

How to Diagnose Attention-Deficit/Hyperactivity Disorder

There is no single test to diagnose ADHD. A complete evaluation by a qualified mental health professional or physician who gathers the necessary information from multiple resources is needed. ADHD can not be diagnosed from just talking to someone or after a brief visit to the doctor. The clinical guidelines for the diagnosis of ADHD are provided in the American Psychiatric Association diagnostic manual referred to as the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition or DSM-IV. During an evaluation, the clinician will try to determine the extent of which of these symptoms are present in order to make an accurate diagnosis.

Diagnostic criteria for Attention-Deficit/Hyperactivity Disorder DSM-IV pages 83-85

A. Either (1) or (2):

(1) six (or more) of the following symptoms of **inattention** have persisted for at least 6 months to a degree that is maladaptive and inconsistent with developmental level:

Inattention

- (a) often fails to give close attention to details or makes careless
- (b) mistakes in schoolwork, work, or other activities
- (c) often has difficulty sustaining attention in tasks or play activities
- (d) often does not seem to listen when spoken to directly
- (e) often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand instructions)
- (f) often has difficulty organizing tasks and activities
- (g) often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or home-work)
- (h) often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, books, or tools)
- (i) is often easily distracted by extraneous stimuli
- (j) is often forgetful in daily activities

(2) six (or more) of the following symptoms of **hyperactivity-impulsivity** have persisted for at least 6 months to a degree that is maladaptive and inconsistent with developmental level:

Hyperactivity

- (a) often fidgets with hands or feet or squirms in seat
- (b) often leaves seat in classroom or in other situations in which remaining seated is expected

- (c) often runs about or climbs excessively in situations in which it is inappropriate (in adolescents or adults, may be limited to subjective feelings of restlessness)
 - (d) often has difficulty playing or engaging in leisure activities quietly
 - (e) is often "on the go" or often acts as if "driven by a motor"
 - (f) often talks excessively
- Impulsivity*
- (g) often blurts out answers before questions have been completed
 - (h) often has difficulty awaiting turn
 - (i) often interrupts or intrudes on others (e.g., butts into conversations or games)

- B. Some hyperactive-impulsive or inattentive symptoms that caused impairment were present before age 7 years.
- C. Some impairment from the symptoms is present in two or more settings (e.g., at school [or work] and at home).
- D. There must be clear evidence of clinically significant impairment in social, academic, or occupational functioning.
- E. The symptoms do not occur exclusively during the course of a Pervasive Developmental Disorder, Schizophrenia, or other Psychotic Disorder and are not better accounted for by another mental disorder (e.g., Mood Disorder, Anxiety Disorder, Dissociative Disorder, or a Personality Disorder).

Code based on type:

314.01 Attention-Deficit/Hyperactivity Disorder, Combined Type: if both Criteria A1 and A2 are met for the past 6 months

314.00 Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type: if Criterion A1 is met but Criterion A2 is not met for the past 6 months

314.01 Attention-Deficit/Hyperactivity Disorder, Predominantly Hyperactive-Impulsive Type: if Criterion A2 is met but Criterion A1 is not met for the past 6 months

Coding note: For individuals (especially adolescents and adults) who currently have symptoms that no longer meet full criteria, "In Partial Remission" should be specified.

References:

American Psychiatric Association (2000). Diagnostic and statistical manual of mental disorders: DSM IV (4th ed., text, revision), Washington, D.C.: American Psychiatric Association.