

Aide Memoire ADHD:

Some useful information to consider when thinking of ADHD:

Information from parents

1. Evidence around behaviours from home
 - Has the patient exhibited with behaviours of;
 - Inattention –struggling to finish tasks or homework, lack of focus, easily distracted or day dreaming?
 - Hyperactivity – always on the go, higher than expected levels of energy, climbing, unable to sit still or fidgeting?
 - Impulsivity - saying things without thinking, running out into the road, blurting out and interrupting conversation or not thinking about consequences?
 - When did the behaviours first present?
2. Evidence around impact on daily life
 - Does the patient exhibit failure to complete everyday simple tasks like getting ready on time?
 - Does the patient struggle with social relationships? Not invited to parties, fewer friends, not in sports teams etc.
 - Does the patient have a higher than expected level of risk taking?

Information from school

1. Evidence around behaviours from school
 - Has the patient exhibited with behaviours of;
 - Inattention –struggling to finish tasks or homework, lack of focus, easily distracted or day dreaming?
 - Hyperactivity – always on the go, higher than expected levels of energy, over excitable climbing, unable to sit on chair or fidgeting?
 - Impulsivity - saying things without thinking, not being aware of other people's personal space, blurting out and interrupting conversation in class and not being able to wait their turn?
 - When did the behaviours first present?
 - Has an educational and healthcare plan or early help plan been put in place for the patient?
2. Evidence around impact on school life
 - Does the patient exhibit failure to complete everyday simple instructions?
 - Does the patient struggle with social relationships?
 - What has been the impact of learning for the patient?

Information from GP

- Could there be any other causes which need to be addressed first?
 - For example learning disabilities, changes in personal situation, high levels of anxiety, divorce/separation/ bereavement, domestic violence etc.
- Have they experienced the symptoms in different domains?
- Any family history which you believe is relevant?
- Please record any observations which you have made from your knowledge and experience with this patient, i.e. were they distracted and fidgeting during the appointment
- Is there any other possible reason for these difficulties?

Aid Memoire ASD:

Please consider the evidence in more than one setting e.g. home and school:

Problems with social interaction and communication

Understanding and being aware of other people's emotions and feelings; it can also include delayed language development and an inability to start conversations or take part in them properly.

- For example struggling to understand:
- facial expressions or tone of voice
- jokes and sarcasm
- common phrases and sayings; an example might be the phrase 'It's cool', which people often say when they think that something is good, but strictly speaking, means that it's a bit cold.

Difficulty with social interaction and communication:

Restricted and repetitive patterns of thought, interests and physical behaviours – including making repetitive physical movements, such as hand tapping or twisting, and becoming upset if these set routines are disrupted.

- For example struggling with:
- not understand the unwritten social rules which most of us pick up without thinking: they may stand too close to another person for example, or start an inappropriate subject of conversation
- appear to be insensitive because they have not recognised how someone else is feeling
- prefer to spend time alone rather than seeking out the company of other people
- not seek comfort from other people
- appear to behave 'strangely' or inappropriately, as it is not always easy for them to express feelings, emotions or needs.

Difficulty with Social Imagination:

- understanding and interpreting other people's thoughts, feelings and actions
- predicting what will happen next, or what could happen next
- understanding the concept of danger, for example that running on to a busy road poses a threat to them
- engaging in imaginative [play and activities](#): children with autism may enjoy some imaginative play but prefer to act out the same scenes each time
- preparing for change and plan for the future
- coping in new or unfamiliar situations.
- Is there any other possible reason for these difficulties?