Policy for Evaluation and Treatment of Attention Deficit Hyperactivity Disorder (ADHD)

Are you a student seeking an Attention Deficit Hyperactivity Disorder (ADHD) evaluation or medication?

Often, college students have trouble focusing, getting organized or completing work at times of increased stress. If these problems have only started recently (e.g. after coming to undergraduate or graduate school), they are unlikely to be caused by ADHD. ADHD begins in childhood and is not simply a response to stress. Because ADHD begins at an early age and is not episodic, information from parents, physicians and collateral sources is often essential in making a clinical diagnosis.

If you are unable to provide documentation which verifies that you have exhibited symptoms which caused functional impairment before the age of 12 years, you will not have met criteria for an ADHD diagnosis.

Please read all of the following important information carefully about our services for ADHD at UHS.

If I have never been diagnosed with ADHD before, can I be diagnosed at the Student Health Center?

- No, UHS does not provide services for new ADHD evaluation or testing. However, we will provide a referral to a community provider as needed. If you have never been diagnosed or treated for ADHD, or been diagnosed but have no medical records available, please contact Counseling and Psychological Services (CaPS) at 412-268-2922 to be referred to a provider in the community.

If I have been diagnosed with ADHD in the past, can I continue my care at UHS?

- It depends. See steps 1-6.

1. If you have been diagnosed and/or treated previously for ADHD, UHS requires complete documentation of the diagnostic evaluation and treatment provided by your previous treating physician or other licensed professional. You will need to contact your previous provider to send your records to UHS well in advance of scheduling an appointment. Please note:

- Thorough medical records pertaining to your diagnosis and treatment for ADHD are REQUIRED.
• Summary letter from your previous provider may not be adequate documentation and cannot be a substitute for your medical records.
• Prescriptions, empty pill containers, or parents’ notes are considered inadequate documentation of diagnosis and treatment of ADHD.
• **If you are unable to provide documentation which verifies that you have exhibited symptoms which caused functional impairment before the age of 12 years, you will not have met criteria for an ADHD diagnosis.**

2. All documentation must be received and reviewed before an appointment is scheduled or medication is prescribed.

3. If the documentation is acceptable, you will be contacted and an appointment will be scheduled with a member of our medical staff.

4. If a psychostimulant is prescribed, you will be asked to complete and sign a psychostimulant medication agreement that will become a part of your medical record at UHS. Psychostimulant medications will not being prescribed or refilled if this document is not completed.

5. If the documentation is not adequate, we will contact you to review the following options:
   • Referral to a community provider.
   • Contact your current provider for additional required documentation.
   • Continue care with your current provider.

6. Additionally, many other problems such as depression, anxiety, or substance abuse can cause symptoms that might resemble ADHD. It is important that UHS physicians complete their own thorough initial evaluation. If after this assessment we determine, based upon our clinical judgment, that the prior diagnosis is incorrect, we may refuse to continue the medication prescribed by the previous clinician.

MEDICAL RECORDS SHOULD BE SENT TO:
University Health Services
Carnegie Mellon University
1060 Morewood Avenue
Pittsburgh, PA 15213
ATTN: Comprehensive Care Manager
Phone: 412-268-2157
Fax: 412-268-6357

**IMPORTANT – For patient safety, UHS does not “bridge” prescriptions from outside providers. For this reason, you will need to work with your current prescriber during this process to ensure you have an adequate supply of medication.**