

Diagnostic Criteria for Attention-Deficit/ Hyperactivity Disorder

WITH PRACTICAL SUGGESTIONS for each symptom

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- (This is from: American Psychological Association. (2001). *Publication Manual of the American Psychological Association* (5th ed.). Washington, DC: Author.)
- * Italics are Dave Zidar's intervention. All other material is the APA

Either (1) or (2)

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**
 - often fails to give close attention to details or makes careless mistakes in schoolwork, work, or other activities
 - *Check list and routines*
 - *Partializing tasks (break it into small pieces).*
 - often has difficulty sustaining attention in tasks or play activities
 - *Anticipatory guidance and time limits*
 - often does not seem to listen when spoken to directly
 - *Get eye contact*
 - *Have child repeat prompt*
 - *Sight and touch control*
 - *Rule out hearing loss*
 - 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)
 - *Check lists*
 - *Set up rewards*
 - *Consequences*
 - often has difficulty organizing tasks and activities
 - *Lists and bags*
 - *Help with transition times, watches, routines, timers.*
 - often avoids, dislikes or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework)
 - *Hard task, rewarding task, hard task, etc.*
 - *Show function*

- *Short breaks*
- *Rewards for attention*
- often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, books or tools)
 - *Bags, checklists, scheduled (hard task, fun task, hard task) so they always have something to look forward to.*
 - *Teach and model structure*
 - *Places for everything, like a fire truck*
- is often easily distracted by extraneous stimuli
 - *Study carols*
 - *No open classrooms*
 - *Limit BD classroom time*
 - *Shades*
 - *Limit or encourage music*
- is often forgetful in daily activities
 - *Big list, little list*
 - *Note book (one to tell them what to do)*
- *NOTE: What we want to tell them:*
 - *Contrary to what they are being told, they are not stupid, retarded or crazy. They learn different and have more energy. As such, they can do more than their peers. Reframe this as a gift.*
 - *It will take time to learn to slow down.*
 - *Get supports from the child, we are in this together is what we need to communicate.*
 - *Anything worth while is hard.*

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

- **Hyperactivity**
 - often fidgets with hands or feet or squirms in seat
 - *Given them something in their hand*
 - *Taking notes*
 - *Church: Sit them in the back, bathroom breaks and read bible.*
 - often leaves seat in classroom or in other situations in which remaining seated is expected
 - *Set up bathroom breaks, signal relief*
 - often runs about or climbs excessively in situations in which it is inappropriate (in adolescent or adults, may be limited to subjective feelings of restlessness)
 - *Set up a time to be mild that is healthy. This will help with these transition times.*
 - *Set up work that requires big muscle use*
 - *Vocational direction: Set them toward what they like*

- *Realize that in most cases they will not get tired*
 - often has difficulty playing or engaging in leisure activities quietly
 - *Set up quiet time and build the time up as they go.*
 - *Basement*
 - is often on the go. or often act as if driven by a motor
 - *Plan an activity or become an activity*
 - *Large social setting: Make sure the child knows he's going to leave.*
 - *Set up an alliterative activity*
 - often talks excessively
 - *Start with waiting a turn activity. Do it in the home they are ready in school.*
 - *Start being the voice in their head.*
 - *Private conversations*
 - *Help with flight of ideas*
- **Impulsivity**
 - often blurts out answers before questions have been completed
 - *hand raising*
 - *At home practices*
 - *Reward control*
 - often has difficulty waiting for their turn
 - *Think then do*
 - often interrupts or intrudes on others (e.g., butts into conversation or games)
 - Some hyperactive-impulsive or inattentive symptoms that caused impairment were present before age 7 years.
 - Some impairment from the symptoms is present in two or more settings (e.g., at school or work and at home).
 - There must be clear evidence of clinically significant impairment in social academic or occupational functioning.
 - 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).