

Informed Consent for Stimulants for Adult Attention Deficit Disorders

Uses

I understand that stimulants are used to improve hyperactivity, impulsivity and inattention symptoms that may go along with Attention Deficit Disorders. These drugs include:

- Methylphenidate (Ritalin, Metadate, Aptensio, Daytrana, Methylin, Quillivant, Concerta)
- Dexmethylphenidate (Focalin)
- Dextroamphetamine (Dexedrine, ProCentra, Zenzedi)
- Dextroamphetamine and amphetamine mixed salts (Adderall)
- Lisdexamfetamine (Vyvanse)

Benefits Expected

- Improved attention
- Improved hyperactivity (restlessness)
- Improved impulsivity

Alternatives

- Atomoxetine
- Behavioral Therapy
- Clonidine or Guanfacine
- Bupropion

Risks

It has been explained to me and I understand that the use of stimulants can cause:

- Headache
- Difficulty sleeping
- Increase in blood pressure and heart rate
- Changes in behavior, mood and thinking
- Anxiety or panic symptoms
- Increased risk of seizures
- Diminished appetite, weight loss
- Abnormal movements
- Dependence (of the body and mind), substance abuse, and addiction
- Higher doses of these drugs cause even greater risks
- These drugs may increase my risk of being the victim of a crime

I also understand:

- That stimulant medication should be avoided in those with a history of addiction to any of the stimulant class of drugs.
- That caution should be exercised when prescribing stimulants to someone with any history of addiction and alternative treatments should be considered first.

- That alternative treatments should be considered when treating attention deficit disorder in those with co-morbid opioid use disorder on opioid replacement treatment.
- That stimulants should not be prescribed concurrently with an opioid or a benzodiazepine without psychiatric collaboration and clear rationale.
- That if I have high blood pressure, abnormal heart rhythms, bipolar disorder, anorexia, Tourette's syndrome or a history of psychosis the risks are increased.
- That Benzodiazepines, Alcohol, Opioids and Marijuana may cause symptoms of inattention.
- That attention deficit disorder is thought to be a chronic disease; however, I understand that the question about how long a person should stay on stimulants has not been answered.

Additional: _____

My provider, _____, and I have discussed the indications, risks, benefits, and alternatives for the use of stimulants to treat attention deficit disorder. I understand the risks described here and I know that by taking stimulants I accept all of these risks. I understand this prescription will be reviewed at least annually for evidence of effect, improved function and the need for continuation.

Patient Name: _____

Patient DOB: __/__/__

Patient Signature: _____

Date: __/__/__

Provider Signature: _____

Date: __/__/__