

*fast*

Care of the Patient with ADHD

1.00 Contact Hour

Author: Julia Tortorice

Outcomes

Goal $\geq 92\%$ of participants will know how to care for people with ADHD.

Objectives

After completing this continuing education course, the participant will be able to meet the following objectives:

1. Describe symptoms of Attention Deficit and Hyperactivity Disorder.
2. Discuss how to care for a person with ADHD who is impulsive.
3. Discuss how to care for a person with ADHD who is hyperactive.
4. Discuss how to care for a person with ADHD who is inattentive.
5. Recognize what to report to the nurse.

Introduction

Attention deficit hyperactivity disorder (ADHD) is a neurological condition that is usually identified in childhood, but up to 60% of people have symptoms in adulthood (Nicholson, 2019). Comorbid conditions include oppositional defiant disorder, conduct disorder, depression, anxiety, learning disorder, tics disorder, bipolar disorder, and cigarette smoking (Pearson & Leung, 2021).

Symptoms of ADHD

ADHD is identified through behaviors and testing. Common behaviors fall into three categories: inattention, hyperactivity, and impulsivity (Nicholson, 2019). Inattentive children or adults have difficulty keeping their minds centered on one thing. They tend to get bored and jump from task to task. Asking them to give their attention to one thing is very difficult. For example, picking out clothing for the day may be a difficult task because they cannot focus long enough to pick out all articles of clothing. They find it difficult to focus on schoolwork or someone talking for a long period. Other examples of inattentiveness include being easily distracted, unable to complete tasks, or making careless mistakes.

Hyperactivity is being in constant excessive movement. The individual with ADHD cannot seem to sit still and squirm. They may talk quickly or constantly and may also be fidgety. Examples of hyperactivity and impulsivity are feeling restless, leaving their seat, blurting out answers, interrupting, not seeming to listen when spoken to, or having difficulty waiting their turn. Furthermore, an adult with ADHD may have problems with friendships or relationships, be

unable to pay attention or have difficulty holding a job. The symptoms can cause significant impairment in daily life for the child as well as for the adults.

Impulsivity occurs when the person is impatient and reacts immediately to situations or events. They may appear to be bouncing off the walls, moving from one activity to the next very quickly, or even have racing thoughts. The result is usually inappropriate actions or comments. For example, they may rush to finish their work, overlooking details. They may forget schoolbooks or shoes.

How to Care for a Person with ADHD

Interventions should include a structured environment and a routine that provides consistent, clear rules and organizational strategies (Pearson & Leung, 2021). For more hyperactive children, ensure their area is free from sharp objects or items that could cause injury or harm. Be sure to monitor food and fluid intake. Offer finger foods and even sippy cups to help keep them hydrated and fed. For children and adults, developing routines for tasks can be helpful to keep them focused. Keeping directions and routines simple is also helpful. Break up tasks into smaller parts to help keep their attention (Pearson & Leung, 2021). It is important to set limits, such as how much TV to watch, and establish routines, including a wake-up and go to school or work schedule. These limits can help channel energy and keep the focus on a task. A reward system is also helpful, as studies show that those with ADHD are more responsive to immediate rewards (Pearson & Leung, 2021). A structured system can address motivational problems as well as help the child or adult focus on getting a task done to get the reward.

A person with hyperactivity may be distressed and embarrassed about their behavior. Be empathetic, non-judgmental, and understanding when working with these people. It helps the person to have an opportunity to get up and down and walk around. This avoids their frustration and agitation (Nicholson, 2019).

Impulsive behavior can cause you frustration. Be non-judgmental about frequent interruptions. You can help by being clear and accurate about waiting times. You can also allow them additional time to express their concerns (Nicholson, 2019).

Inattentive people are easier to work with if you break up tasks into small pieces with breaks in between the tasks. When you give information, be concise, use uncomplicated manners, and avoid using jargon. Also, provide information verbally and in writing so the person has a reference. If they forget things, you might use automated text reminders or emails. To start new treatments or activities, associate it with a routine activity. For instance, take your medication when you have your morning coffee (Nicholson, 2019).

What to Report to the Nurse?

Along with a normal report, be sure to immediately report any changes in the patient's mood or behavior. Changes that need to be reported immediately may include (Pearson & Leung, 2021):

- Sudden anger or crying
- Becoming demanding or aggressive
- Withdrawing from others or groups
- Inappropriate behaviors such as touching or undressing
- Confusion
- Nonverbal signs such as a clenched fist, pacing, or rapid movements
- Physical signs of a possible medication reaction, such as hives, vomiting, or diarrhea
- Decreased or increased appetite or fluid intake

- Safety issues
- New Injuries
- Changes in mobility
- Abnormal vital signs
- Difficulty swallowing
- Difficulty with daily activities

Most likely, the person will be on medication for ADHD. The most common type of medication prescribed is a stimulant. Be aware of signs of abuse, such as constantly asking for refills before they are due, euphoria, increased blood pressure, increased energy or alertness, rapid breathing, dilated pupils, no appetite, or staying up for more extended periods (Pearson & Leung, 2021). These signs should be immediately reported to the nurse.

Case Study One

Susan is a 30-year-old female who has a diagnosis of anxiety. This is her first hospitalization. The nurse tells you she has been able to manage her anxiety until just recently. The nurse is suspicious that Susan has something else going on. You enter Susan's room and notice that she is very upset and looking for something. You approach her, asking if you can help. Susan tells you she lost her hairbrush. She also tells you she loses everything or forgets where she puts her things. You help her find her brush, and when she is dressed, you escort her first to breakfast and then a group to follow. In the group, you notice that Susan seems to "tune out." She seemed unable to keep up with the conversation, and when asked to complete a questionnaire in the group, Susan was unable to finish it. What she did complete had several mistakes, such as missing her name and not answering questions completely. You decide to tell the nurse about your findings. What do you report?

In Susan's case, you will need to report what you have been observing. Susan is forgetful, loses items easily, cannot stay focused in the group, and seems to tune out often. She was not able to complete the questionnaire, and you saw that she made careless mistakes on the form. Once you have reported this to the nurse, she tells you that she suspects Susan also has ADHD. She called the provider to see what could be done to help Susan.

Case Study Two

Today, you are taking care of a 12-year-old boy, John, who is believed to be suffering from ADHD. When you enter the home, you notice that John is running through the house like he is driven by a motor. He is yelling at the top of his lungs and being very disruptive while you try to talk to his parents. The parents tell you that they do not understand what is happening. They have been giving John his medication daily, but he seems worse. You ask the parents to describe what happens each day while keeping an eye on John. They tell you he is more irritable and moodier all day. The teacher reports that he is acting out more and will not stay in his seat. Although he did this before the medication, it is much worse now. They also tell you John does not sleep for more than two hours a night but does not appear tired at all. He is not eating well and cannot stop moving. You notice all this and that John has a red splotch on his arm. You approach John and ask if you can look at his arm. You talk to John, asking him what he has been doing today. John is talking so fast that he is starting to stutter. You can see that he has several red spots on his arm, and with the help of his mother, you see more on his back. What do you do?

In John's case, you call the nurse when you notice the red marks or hives. He is having an allergic reaction that is most likely from the medication. You also reported that John is not

responding to the medication as he should have been. You relay what the parents told you as well as your observations. John has more energy and is starting to act out. He cannot sit still and is talking rapidly, not eating well, and not sleeping more than two hours. You also report that you took his vital signs, and his respirations, heart rate, and blood pressure increased. The nurse asks that you stay with the patient and the parents while she calls the provider. While you wait, you talk to the parents about the routine set up for John in the morning and when he comes home from school. You discover that John could benefit from a more structured routine and begin to discuss this with the parents. Together, you set up a structured routine for John.

Conclusion

ADHD is a disorder that impacts children as well as adults in various settings. Symptoms range from inattentiveness, such as turning out or making careless mistakes, to hyperactivity and impulsivity, such as talking too fast, not being able to sit still, or not being able to finish tasks. ADHD can also occur with other disorders such as anxiety, depression, or Conduct Disorder. The caregiver needs to be able to recognize any signs of excessive energy or inattentiveness. The caregiver can help by setting up routines and offering strategies for the patient to stay focused, depending on the patient's age and capabilities. With medication, routines, and strategies to help with focus, patients with ADHD can be successful.

Implicit Bias Statement

CEUFast, Inc. is committed to furthering diversity, equity, and inclusion (DEI). While reflecting on this course content, CEUFast, Inc. would like you to consider your individual perspective and question your own biases. Remember, implicit bias is a form of bias that impacts our practice as healthcare professionals. Implicit bias occurs when we have automatic prejudices, judgments, and/or a general attitude towards a person or a group of people based on associated stereotypes we have formed over time. These automatic thoughts occur without our conscious knowledge and without our intentional desire to discriminate. The concern with implicit bias is that this can impact our actions and decisions with our workplace leadership, colleagues, and even our patients. While it is our universal goal to treat everyone equally, our implicit biases can influence our interactions, assessments, communication, prioritization, and decision-making concerning patients, which can ultimately adversely impact health outcomes. It is important to keep this in mind in order to intentionally work to self-identify our own risk areas where our implicit biases might influence our behaviors. Together, we can cease perpetuating stereotypes and remind each other to remain mindful to help avoid reacting according to biases that are contrary to our conscious beliefs and values.

References

- Nicholson, T. (2019). A nurse's introduction to attention deficit hyperactivity disorder. *British Journal of Nursing*, 28(11), 678–680. [Visit Source](#).
- Pearson, G. S., & Leung, C. (2021). Attention Deficit Hyperactivity Disorder. In E. L. Yearwood, G. S. Pearson, & J. A. Newland (Eds.), *Child and Adolescent Behavioral Health* (1st ed., pp. 162–172). Wiley. [Visit Source](#).

;