

Psychiatry Consult

Patient Identifying Information Alex Date of Evaluation: Tue Oct 29 2024

Chief Complaint Alex presents to the clinic today for a psychiatric evaluation to assess for possible ADHD.

History of Presenting Illness Alex reports a history of symptoms suggestive of ADHD since childhood. He describes difficulty with focus and concentration, often getting distracted and struggling to complete tasks. He reports these symptoms have persisted into adulthood, impacting his work, home life, and relationships. At work, he struggles to stay on task and manage his time effectively, leading to missed deadlines and a sense of being overwhelmed. At home, he has difficulty with organization and chores, causing friction with his partner. Alex describes his energy levels as variable, noting he can hyperfocus on tasks he finds interesting but quickly loses interest in tasks he finds boring or repetitive. He experiences fatigue after periods of hyperfocus. He has tried using reminders and planners to manage his symptoms but has found limited success. He is interested in exploring treatment options, including medication, but is wary of potential side effects and the need for daily medication.

Past Psychiatric History No past psychiatric history reported.

Past Medical History Not provided.

Medications None reported.

Social History Alex lives with his partner, who is described as organized. He is employed but reports challenges with work performance due to his symptoms.

Allergies Not provided.

Family History Not provided.

Mental Status Exam Not provided.

Diagnostic Assessment Alex's symptoms and history are suggestive of ADHD. However, further evaluation is needed to confirm the diagnosis and rule out other potential conditions that may present with similar symptoms.

Psychiatric Diagnoses Rule out ADHD.

Treatment Plan

- **Safety:**
 - Not applicable at this time.
- **Biological:**
 - Psychoeducation provided on ADHD, including potential causes, symptoms, and treatment options.
 - Discussed the risks and benefits of stimulant and non-stimulant medication for ADHD.
 - Medication management will be considered further if behavioral strategies are not sufficient.
- **Psychosocial:**
 - Implement behavioral strategies to improve focus, organization, and time management, including:
 - Habit stacking: Linking new habits to existing routines.
 - Pomodoro Technique: Utilizing timers for focused work intervals and breaks.

- Developing a consistent daily routine.
- Setting up visual cues and reminders.
- Encourage self-compassion and focus on strengths.
- Explore potential couples therapy to address relationship challenges related to ADHD symptoms.

Medication Management Plan

- To be determined based on further evaluation and discussion of risks and benefits.

Psychotherapy Recommendations

- Cognitive behavioral therapy (CBT) could be beneficial to address negative thought patterns and develop coping mechanisms related to ADHD.

Prognosis With appropriate treatment and support, Alex's prognosis is good. ADHD is a manageable condition, and with the right tools and strategies, he can learn to manage his symptoms effectively and improve his quality of life.

Follow Up Plan

- Schedule a follow-up appointment in 2-4 weeks to review progress, discuss treatment options further, and make adjustments as needed.

Recommendations

- Alex should be encouraged to keep a journal to track his symptoms, progress, and any challenges he encounters.
- Psychoeducation materials on ADHD should be provided to Alex and his partner.