## Checklist 2: Methylphenidate (MPH) checklist for monitoring of ongoing therapy

The following is designed to support you in the monitoring of ongoing therapy of an MPH-containing product in the appropriate patients with attention-deficit/hyperactivity disorder (ADHD).

As outlined in the prescribing information in more detail, growth (only applicable to children and adolescents below 18 years of age), psychiatric and cardiovascular status should be regularly monitored:

- Blood pressure and pulse should be recorded at each adjustment of dose and then at least every 6 months
- Height, weight and appetite should be recorded at least 6-monthly with maintenance of a growth chart (only applicable to children and adolescents below 18
  years of age)
- Development of *de novo* or worsening of pre-existing psychiatric disorders should be monitored at every adjustment of dose and then at least every 6 months and at every visit

It is recommended that this checklist be used in conjunction with the full prescribing information for the individual product that is being prescribed.

Please download and print this checklist prior to your consultation. It will not be possible for you to store any patient-specific information on the website. The completed checklist can be documented within the patient records.

As you work through the checklist, it may also be useful for you to discuss the patient information leaflet (PIL) of the individual product that is being prescribed with your patient or guardian(s) and for children and adolescents below 18 years of age with their parent(s) or guardian(s).

Date of assessment:		
Reason for assessment:		
Patient name:		
Date of birth:		
Age:	Gender:	

## Monitoring during ongoing treatment with MPH

Carefully review the following systems as indicated below at each adjustment of dose and at follow-up visits at least every 6 months:

	Evaluated		
General medical findings, for children and adolescents below 18 years of age			
Document height, body weight and appetite (see separate follow-up chart) - only applicable to children and adolescents below 18 years of age			
Consider discontinuation of MPH if growth is below expectations - only applicable to children and adolescents below 18 years o	fage		
General medical findings, all patients			
Document any indication of abuse, misuse or diversion of MPH			
Pregnancy			
Evaluate benefit/risk			
New cardiovascular findings, all patients  Blood pressure and pulse should be recorded			
• Palpitations			
Exertional chest pain			
Unexplained syncope			
• Dyspnoea			
Other symptoms suggestive of cardiac disease			
Refer for prompt specialist cardiac evaluation			
New neurological findings, all patients			
Severe headache, numbness, weakness or paralysis, impairment of coordination, vision, speech, language or memory			
Any of above conditions may suggest cerebral vasculitis: stop MPH			
Seizure frequency increase or new-onset seizures			
MPH should be discontinued	,		

		Evaluated
New psychiatric findings or worsening thereof, all patients	Development of <i>de novo</i> or worse psychiatric disorders shou	
Psychotic or manic symptoms		
Consider discontinuation of MPH		
Suicidal ideation or behaviour		
Consider treatment of underlying psychiatric condition		
Re-evaluate benefit/risk		
Consider discontinuation of MPH		
Aggressive and hostile behaviour		
Consider the need for adjustment of treatment		
Anxiety, agitation or tension		
Depressive symptoms		
Motor or verbal tics or worsening thereof		
Treatment duration, all patients		
Patient is being treated continuously for >12 months		
Improvement in symptoms after appropriate dosage adjustment over a 1-month peri- discontinuation is recommended	iod is observed, otherwise drug	
Consider trial period off medication at least once yearly to determine if continued tre	eatment is still necessary	
Record any additional information here		

Following the evaluation above, please use the chart provided to record the information required for ongoing monitoring (link to chart)

## **End of treatment**

Careful supervision is required during drug withdrawal, since this may unmask

- Depression as well as
- Chronic overactivity

Some patients may require long-term follow-up.