ADHD Documentation & Review Policy

ADHD Stimulant Policy
Students must have documentation in order to receive a stimulant prescription for Attention-Deficit/Hyperactivity Disorder (ADHD) from Wardenburg Health Services.

Documentation must include:
• Psychological testing (usually completed by a psychologist) above and beyond screening measures or a clinical interview. Progress notes from a physician or psychiatrist typically do not qualify.
• Testing must include multiple measures, one of which must be an objective test that measures the cognitive performance of the student.
• A listed diagnosis of ADHD.
• If the student was younger than 16 when documentation was completed, documentation must also demonstrate ongoing treatment (e.g., treatment notes).

The Review Process
The student’s documentation must be reviewed by one of Wardenburg’s licensed staff members to ensure it meets the above criteria before the student can schedule an appointment for treatment.

Please note the following information on the review process:
• Cost: ADHD documentation reviews require the time of a licensed professional to read and evaluate documentation which will incur a $50 (covered by the Student Gold Plan) which will be charged regardless of the outcome.
• Timeframe: The review process can take a minimum of two weeks so we recommend starting this process well in advance of needed treatment. Reviews can be delayed if documentation is incomplete and further information is requested.
• Results: After the review process is completed, students will receive a secure message to their colorado.edu email account from Wardenburg Health Services notifying them of the outcome.

Students are welcome to contact the Counseling and Psychiatric Services at Wardenburg with questions or to request the status of their review by calling 303-492-5654.

By signing below, I acknowledge that I have read and understand the policy. By signing, I also agree to the charges associated with a review:

__________________________________     _________________________
Name (printed)     Student ID

__________________________________
Signature

Date