ADHD in Primary Care: Meeting Growing Demand with Practical Tools

PANELISTS

Dr. Joan Flood • Dr. Devon Shewfelt

WITH

Dr. Stephanie Zhou • Dr. Chase McMurren

Ontario College of Family Physicians — *Thriving Family Physicians in a Healthy Ontario*

Family & Community Medicine, University of Toronto | Mental Health and Addictions

Please introduce yourself in the chat!

Your name,
Your community,
Your X (Twitter) handle

Interested in becoming a speaker at our CoPs?
Send us an email with your name & topic(s) of interest to
practisingwell@ocfp.on.ca

@OntarioCollege
#PractisingWell

Your Panelists: Disclosures

Dr. Joan Flood

Relationships with financial sponsors (including honoraria):

- CoP Speaker - OCFP Practising Well
- Speaker's fees- Elvium, Humber River Health, Janssen-Ortho, Knight, Kye, Otsuka, Takeda
- Advisory boards- Elvium, Kye, Otsuka
- Advisory council- CADDRA — the Canadian ADHD Resource Alliance

Dr. Devon Shewfelt

Relationships with financial sponsors (including honoraria):

- CoP Speaker - OCFP Practising Well
- Peer Mentor- OCFP Peer Connect
- Clinical Lead on ADHD in Adults Tool- Centre for Effective Practice
- Medical Director- Thames Valley Family Health Team
- Speaker- OMA
- Leadership work- MLOHT/MLPCN

Disclosures

Dr. Stephanie Zhou @stephanieyzhou

Relationships with financial sponsors (including honoraria):

•Ontario College of Family Physicians – Practising Well Scientific Planning Committee
•Ontario Medical Association – Honoraria for practice management lectures
•Department of Family and Community Medicine (University of Toronto), Dept of Medical Imaging, Dept of Ob/Gyn for practice management lectures
•Toronto Public Health – Board of Directors Member
•McMaster University, Queen's University, McGill University, Toronto Metropolitan University, OntarioMD & Dr. Bill, Canadian Society of Allergy & Immunology, Canadian Fertility & Andrology Society, and Women in Academic Medicine - Honoraria for teaching financial literacy, billing, and practice management.

Dr. Chase McMurren

Relationships with financial sponsors (including honoraria):

- Ontario College of Family Physicians – Practising Well Scientific Planning Committee
- University of Toronto
- College of Physicians and Surgeons of Ontario
- Ontario Medical Association
- Medical Psychotherapy Association Canada
- Centre for Effective Practice

Mitigating Bias

Disclosure of financial support

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Potential conflicts

N/A

Mitigating potential bias

The Scientific Planning Committee (SPC) has control over the choice of topics and speakers.

Content has been developed according to the standards and expectations of the Mainpro+ certification program.

The program content was reviewed by the SPC.

Practising Well Self-Learning Program

The Practising Well CoP is certified for self-learning credits!

Earn **1-credit-per-hour** for reviewing the recording and resources from **past CoP sessions**. The self-learning program is certified for up to 63 Mainpro+ credits.

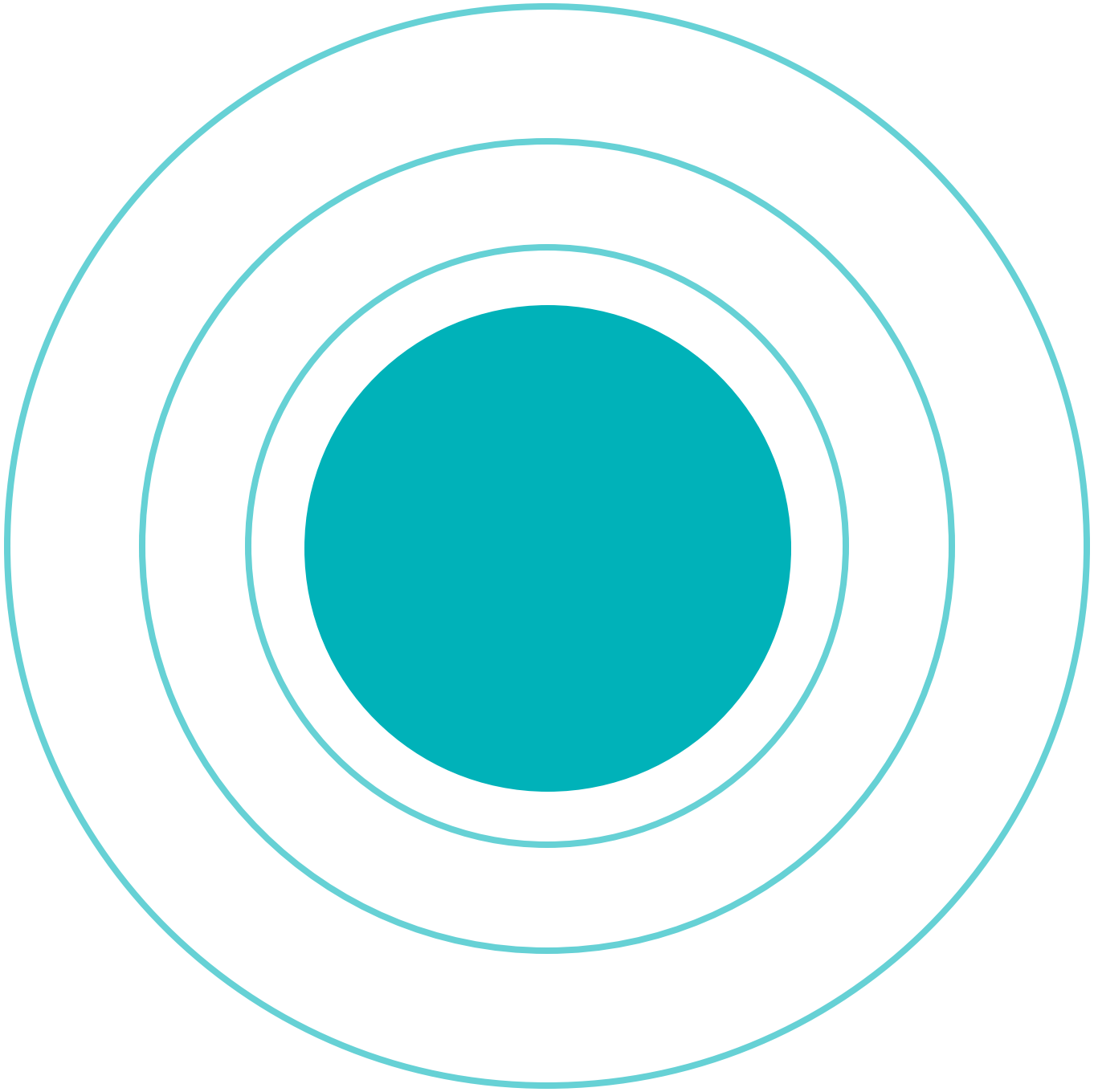
Learn More and Participate

Land Acknowledgement

We acknowledge that the lands on which we are hosting this meeting include the traditional territories of many nations.

The OCFP and DFCM recognizes that the many injustices experienced by the Indigenous Peoples of what we now call Canada continue to affect their health and well-being. The OCFP and DFCM respects that Indigenous people have rich cultural and traditional practices that have been known to improve health outcomes.

I invite all of us to reflect on the territories you are calling in from as we commit ourselves to gaining knowledge; forging a new, culturally safe relationship; and contributing to reconciliation.



Your Panelists

Dr. Joan Flood

Dr. Devon Shewfelt

ADHD in Primary Care: Meeting Growing Demand with Practical Tools

Learning Objectives

- Review of key points of ADHD diagnosis and assessment
- ADHD is a disorder that persists across the lifespan – not just in childhood – and is associated with significant adverse life consequences

DEMAND (COGNITIVE OR EMOTIONAL) VS GAS IN THE TANK (NE & D)


Hyperactivity
Inattention
Impulsivity
Emotional Dysregulation

What Individuals with ADHD experience

Daily Struggles

- Executive function challenges impacting school, work, relationships, and self-care

Emotional Burden

- **Shame, frustration, and misunderstanding** from others affecting mental wellbeing

Treatment Journey

- Navigating medication side effects, behavioral strategies, and system barriers

Many patients are told…

You've gotten this far – how could you have ADHD?

Lots of people are disorganized and poor at managing their time

You're smart! Smart people don't have ADHD

Your kid is gifted! No way does he have ADHD

You don't really want to take meds, do you?

You're anxious. Why don't we try a med for mood/anxiety?

She's only 8 – why don't we give her a couple of more years to blossom?

Is Social Media Driving the Diagnosis of ADHD?

- Maybe & Maybe Not…
- Most people think about this for quite some time before reaching out. They usually do so when their own executive challenges—or their child's struggles—start to really affect life at home or school.
- What they're looking for is insight, validation, and a way to function more effectively day to day

Women & ADHD

- **Women are now the largest group presenting for ADHD assessment**, representing many individuals whose symptoms were overlooked during childhood and adolescence.
- **ADHD prevalence is similar in adult men and women**, but girls are frequently underdiagnosed in childhood because symptoms are often less overt and referral patterns have historically favored boys.
- **Estrogen influences dopamine neurotransmission**, making it common for ADHD symptoms to worsen during the premenstrual phase, postpartum, and menopause. Medication adjustments may be appropriate during these periods.
- **Most ADHD rating scales and DSM diagnostic criteria were developed primarily from male samples.** Although women often present with less overt symptoms, the degree of functional impairment can be just as significant. Don't expect female patients to match the same bar as males.

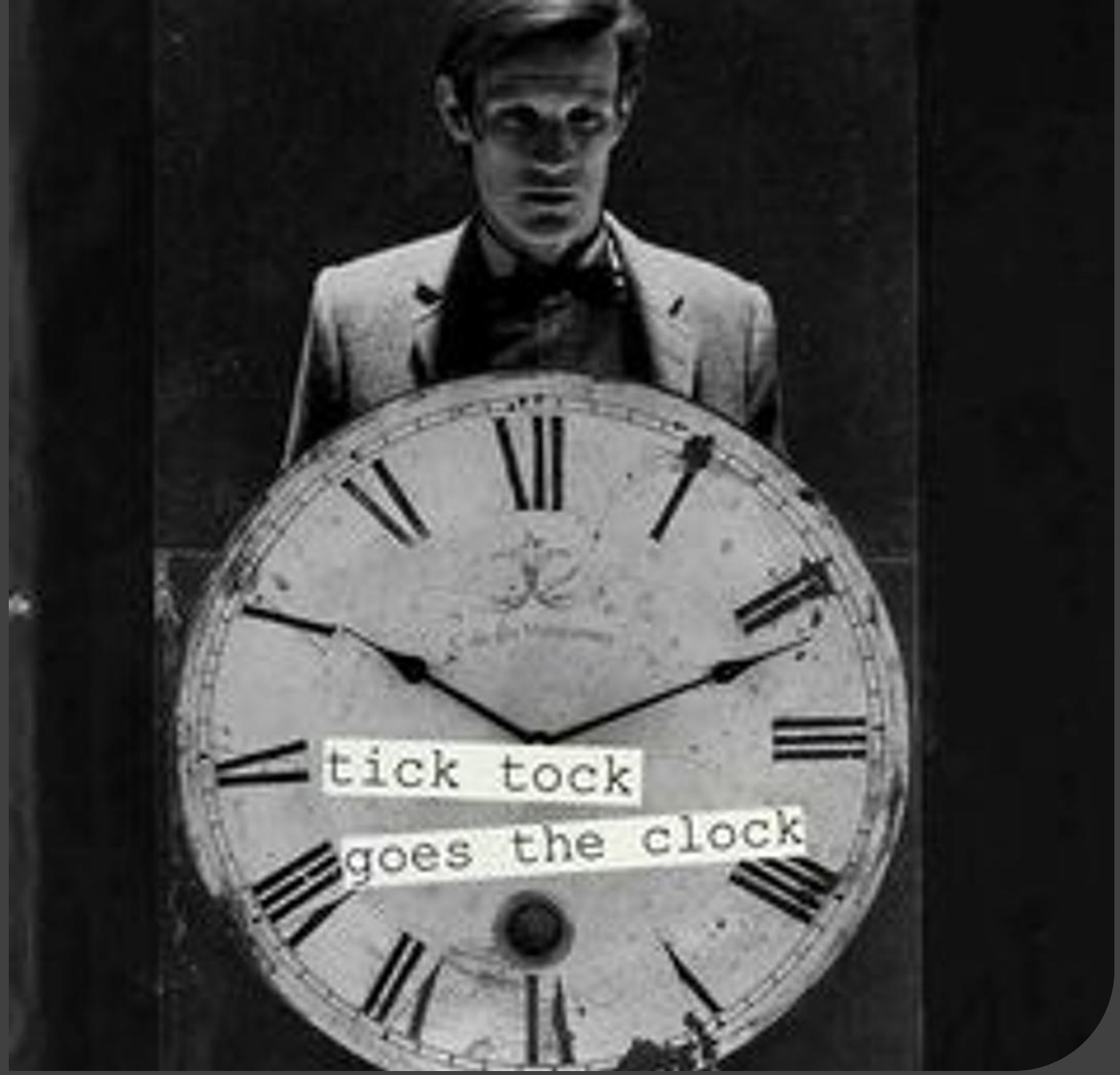
What about Children?

- **Safety is paramount** – children with ADHD have quadruple the incidence of serious injuries – poisoning, fractures, falls, cycling, car accidents
- If children miss out on early learning particularly language skills (reading, writing) and social skills, you put them behind their peers do **please don't delay an assessment**
- Treating prior to puberty **diminishes the risk of Substance Use Disorder** in adulthood
- Neuroimaging studies show improvement in the developmental trajectory of the pediatric brain

Myths abound about dangers of medication, addiction, long-term side effects, and fear of College complaints that are unfounded and close the doors to effective treatment for many individuals.

Risk

The concern should not be the risk of treating ADHD but the risk of *NOT* treating ADHD


tick tock
goes the clock

How to make the diagnosis

Clinical interview identifying **current challenges** as well as **past functioning, developmental history, academic/vocational history, social functioning, medical history and family history**

Attention to presence of **co-morbid disorders**: Oppositional Defiant Disorder, Anxiety, Dysthymia, Depression, Bipolar, Borderline personality, Substance Use, Autism…

Adjunctive **rating scales** can help focus interview questions – they are a prompt to assess – **they do not make the diagnosis**

One thing at a time

Key Questions:

How easy is it to parent your child? Does your child need lots of reminders and prompts? Are they defiant?

What does their teacher say? Don't discount that – teachers see lots of same-aged kids and see those who are challenged

Does your child get invited to birthday parties and play dates?

How are they doing with reading and writing? Are they keeping up?

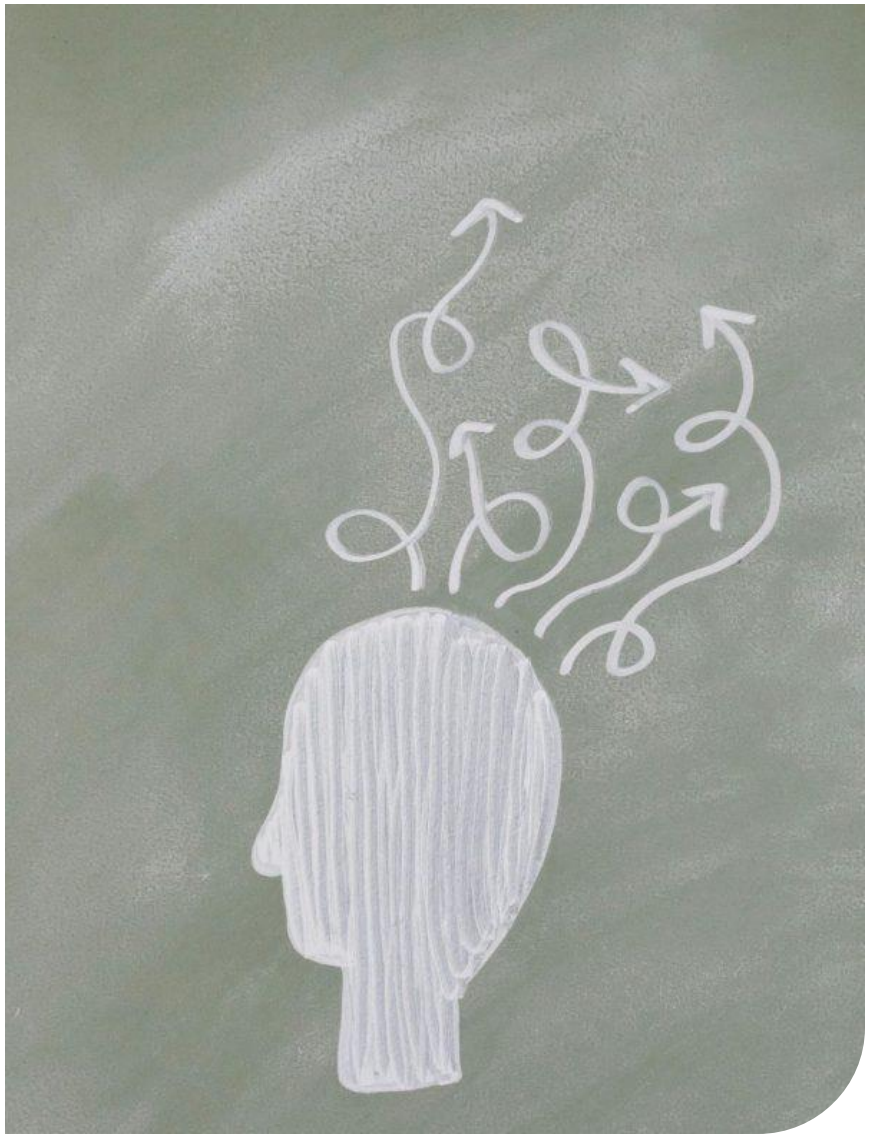
Key Questions:

Have you had long-standing and consistent problems with attention & distractibility?

Have your current complaints (of executive dysfunction) been present over the last 10 -20 years?

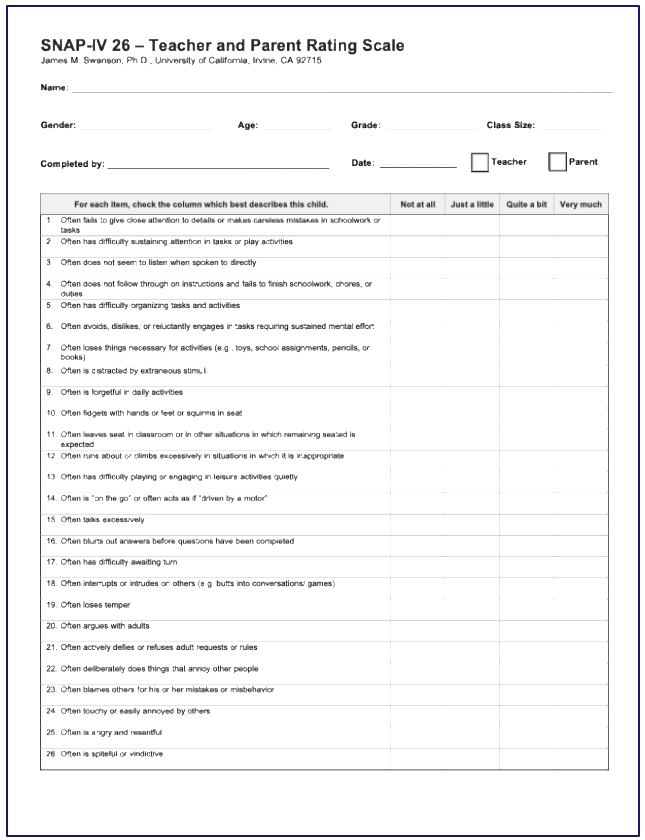
If I could see you in the classroom you were in as a child, what would you be like?

Pearl – do they have a 'PDF file = procrastination, distractibility, forgetfulness'?




• just coffee
• Espresso
• Steamed milk
• Espresso
• Steamed milk
• Foam
• Espresso
• Hot water
• 1oz Espresso
• 2oz Espresso
• 1oz Espresso
• 1oz Steamed milk
• Coffee
• Espresso
• Espresso
• Foamed milk
• Long pulled espresso
• Espresso shot
• Foam
• Espresso
• Chocolate
• Steamed milk
• Short pulled espresso
• Espresso
• Steamed milk
• Espresso
• Ice cream
• Coffee
• Steamed milk
• Coffee
• Whiskey
• Sugar
• Cream

Rating Scales for your Toolbox



SNAP-IV 26 – Teacher and Parent Rating Scale

James M. Swanson, Ph.D., University of California, Irvine, CA 92715

Name: _____

Gender: _____ Age: _____ Grade: _____ Class Size: _____

Completed by: _____ Date: _____ ☐ Teacher ☐ Parent

For each item, check the column which best describes this child.	Not at all	Just a little	Quite a bit	Very much
1. Often fails to give close attention to details or makes careless mistakes in schoolwork or tasks				
2. Often has difficulty sustaining attention in tasks or play activities				
3. Often does not seem to listen when spoken to directly				
4. Often does not follow through on instructions and fails to finish schoolwork, chores, or duties				
5. Often has difficulty organizing tasks and activities				
6. Often avoids, dislikes, or reluctantly engages in tasks requiring sustained mental effort				
7. Often loses things necessary for activities (e.g., toys, school assignments, pencils, or books)				
8. Often is distracted by extraneous stimuli				
9. Often is forgetful in daily activities				
10. Often fidgets with hands or feet or squirms in seat				
11. Often leaves seat in classroom or in other situations in which remaining seated is expected				
12. Often runs about or climbs excessively in situations in which it is inappropriate				
13. Often has difficulty playing or engaging in leisure activities quietly				
14. Often is "on the go" or often acts as if "driven by a motor"				
15. Often talks excessively				
16. Often blurts out answers before questions have been completed				
17. Often has difficulty awaiting turn				
18. Often interrupts or intrudes on others (e.g. butts into conversations/ games)				
19. Often loses temper				
20. Often argues with adults				
21. Often actively defies or refuses adult requests or rules				
22. Often deliberately does things that annoy other people				
23. Often blames others for his or her mistakes or misbehavior				
24. Often touchy or easily annoyed by others				
25. Often is angry and resentful				
26. Often is spiteful or vindictive				

CADDRA
CANADIAN ADHD RESOURCE ALLIANCE

Patient Name:

Date of birth: _____ MRN/File #: _____

Clinician's Name: _____ Date: _____

CADDRA Teacher Assessment Form

Student's Name: _____ Age: _____ Gender: _____

School: _____ Grade _____

Educator completing this form: _____ Date Completed: _____

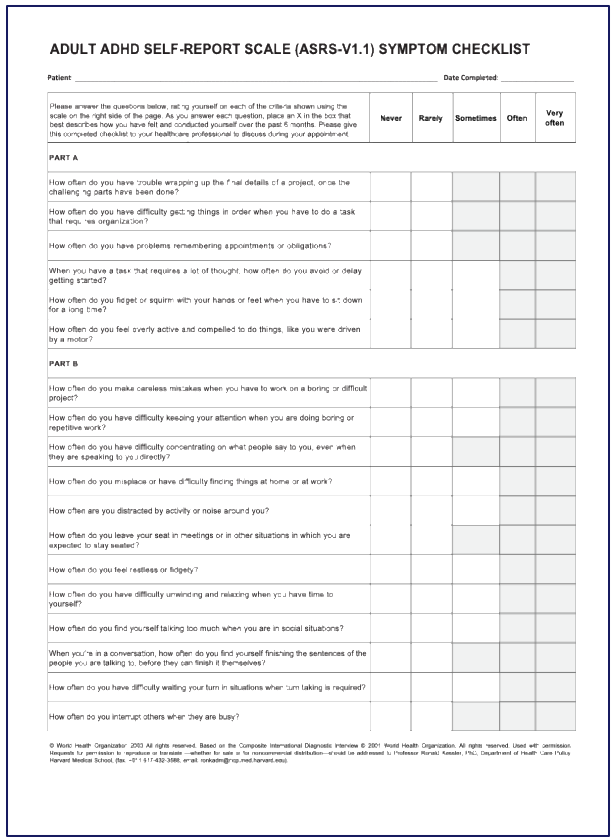
How long have you known the student? _____ Time spent each day with student: _____

Student's Educational Designation: _____ ☐ None

Does this student have an educational plan? ☐ Yes ☐ No

ACADEMIC PERFORMANCE	Well Below Grade Level	Somewhat Below Grade Level	At Grade Level	Somewhat Above Grade Level	Well Above Grade Level	n/a
READING						
a) Decoding						
b) Comprehension						
c) Fluency						
WRITING						
d) Handwriting						
e) Spelling						
f) Written syntax (sentence level)						
g) Written composition (text level)						
MATHEMATICS						
h) Computation (accuracy)						
i) Computation (fluency)						
j) Applied mathematical reasoning						
CLASSROOM PERFORMANCE	**Well Below Average**	**Below Average**	**Average**	**Above Average**	**Well Above Average**	**n/a**
Following directions/instructions						
Organizational skills						
Assignment completion						
Peer relationships						
Classroom Behaviour						

CADDRA TEACHER ASSESSMENT FORM 1 /3



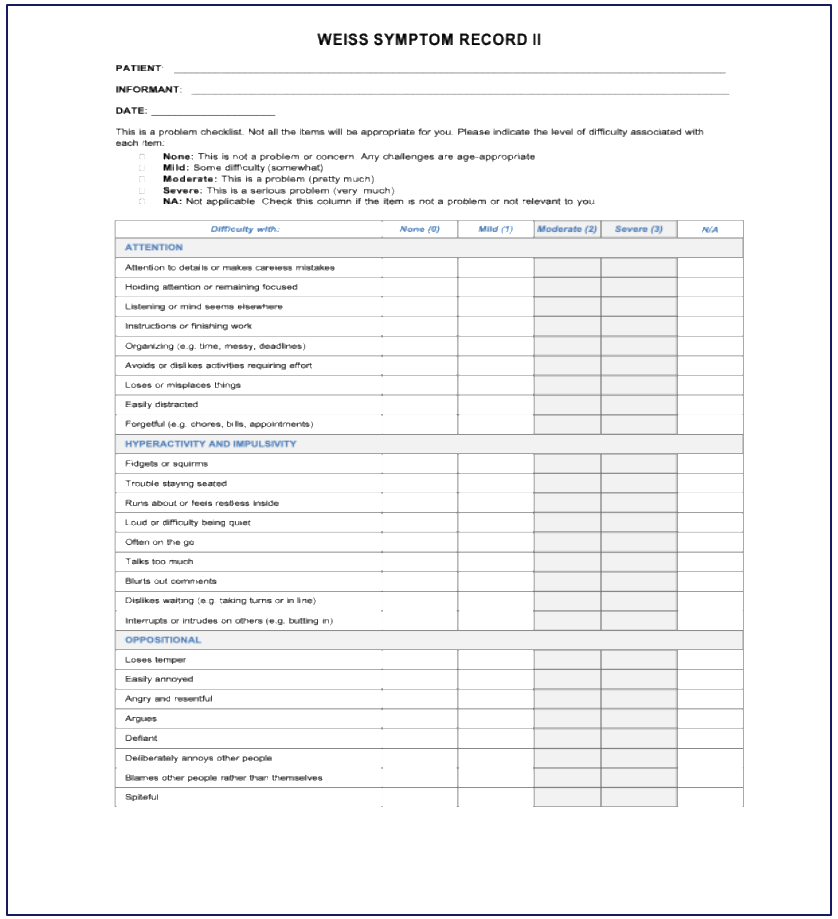
ADULT ADHD SELF-REPORT SCALE (ASRS-V1.1) SYMPTOM CHECKLIST

Patient _____ Date Completed: _____

Please answer the questions below, rating yourself on each of the criteria shown using the scale on the right side of the page. As you answer each question, place an X in the box that best describes how you have felt and conducted yourself over the past 6 months. Please give this completed checklist to your healthcare professional to discuss during your appointment	Never	Rarely	Sometimes	Often	Very often
PART A					
How often do you have trouble wrapping up the final details of a project, once the challenging parts have been done?					
How often do you have difficulty getting things in order when you have to do a task that requires organization?					
How often do you have problems remembering appointments or obligations?					
When you have a task that requires a lot of thought, how often do you avoid or delay getting started?					
How often do you fidget or squirm with your hands or feet when you have to sit down for a long time?					
How often do you feel overly active and compelled to do things, like you were driven by a motor?					
PART B					
How often do you make careless mistakes when you have to work on a boring or difficult project?					
How often do you have difficulty keeping your attention when you are doing boring or repetitive work?					
How often do you have difficulty concentrating on what people say to you, even when they are speaking to you directly?					
How often do you misplace or have difficulty finding things at home or at work?					
How often are you distracted by activity or noise around you?					
How often do you leave your seat in meetings or in other situations in which you are expected to stay seated?					
How often do you feel restless or fidgety?					
How often do you have difficulty unwinding and relaxing when you have time to yourself?					
How often do you find yourself talking too much when you are in social situations?					
When you're in a conversation, how often do you find yourself finishing the sentences of the people you are talking to, before they can finish it themselves?					
How often do you have difficulty waiting your turn in situations when turn taking is required?					
How often do you interrupt others when they are busy?					

*www.caddra.ca

Rating Scales for your Toolbox



WEISS SYMPTOM RECORD II

PATIENT: _____

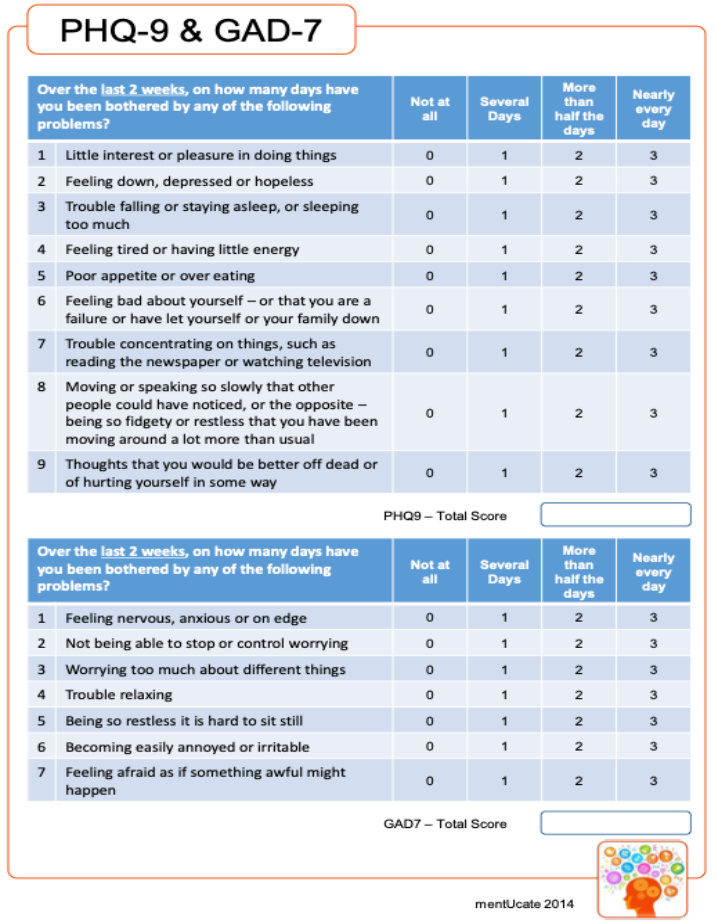
INFORMANT: _____

DATE: _____

This is a problem checklist. Not all the items will be appropriate for you. Please indicate the level of difficulty associated with each item.

- **None:** This is not a problem or concern. Any challenges are age-appropriate
- **Mild:** Some difficulty (somewhat)
- **Moderate:** This is a problem (pretty much)
- **Severe:** This is a serious problem (very much)
- **NA:** Not applicable. Check this column if the item is not a problem or not relevant to you.

Difficulty with:	*None (0)*	*Mild (1)*	*Moderate (2)*	*Severe (3)*	*N/A*
ATTENTION					
Attention to details or makes careless mistakes					
Holding attention or remaining focused					
Listening or mind seems elsewhere					
Instructions or finishing work					
Organizing (e.g. time, messy, deadlines)					
Avoids or dislikes activities requiring effort					
Loses or misplaces things					
Easily distracted					
Forgetful (e.g. chores, bills, appointments)					
HYPERACTIVITY AND IMPULSIVITY					
Fidgets or squirms					
Trouble staying seated					
Runs about or feels restless inside					
Loud or difficulty being quiet					
Often on the go					
Talks too much					
Blurts out comments					
Dislikes waiting (e.g. taking turns or in line)					
Interrupts or intrudes on others (e.g. butting in)					
OPPOSITIONAL					
Loses temper					
Easily annoyed					
Angry and resentful					
Argues					
Defiant					
Deliberately annoys other people					
Blames other people rather than themselves					
Spiteful					



PHQ-9 & GAD-7

Over the last 2 weeks, on how many days have you been bothered by any of the following problems?		Not at all	Several Days	More than half the days	Nearly every day
1	Little interest or pleasure in doing things	0	1	2	3
2	Feeling down, depressed or hopeless	0	1	2	3
3	Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4	Feeling tired or having little energy	0	1	2	3
5	Poor appetite or over eating	0	1	2	3
6	Feeling bad about yourself – or that you are a failure or have let yourself or your family down	0	1	2	3
7	Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8	Moving or speaking so slowly that other people could have noticed, or the opposite – being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9	Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

PHQ9 – Total Score

Over the last 2 weeks, on how many days have you been bothered by any of the following problems?		Not at all	Several Days	More than half the days	Nearly every day
1	Feeling nervous, anxious or on edge	0	1	2	3
2	Not being able to stop or control worrying	0	1	2	3
3	Worrying too much about different things	0	1	2	3
4	Trouble relaxing	0	1	2	3
5	Being so restless it is hard to sit still	0	1	2	3
6	Becoming easily annoyed or irritable	0	1	2	3
7	Feeling afraid as if something awful might happen	0	1	2	3

GAD7 – Total Score

mentUcate 2014

How to make the diagnosis

Don’t try to do this in one session – listen to the patient & give them homework: fill out rating scales (self & observer), find their report cards, send to reputable websites

Don’t be pressured to prescribe –a dose of stimulant is not going to fix an exam that is about to be failed – stimulants are controlled drugs that need to be titrated carefully over time

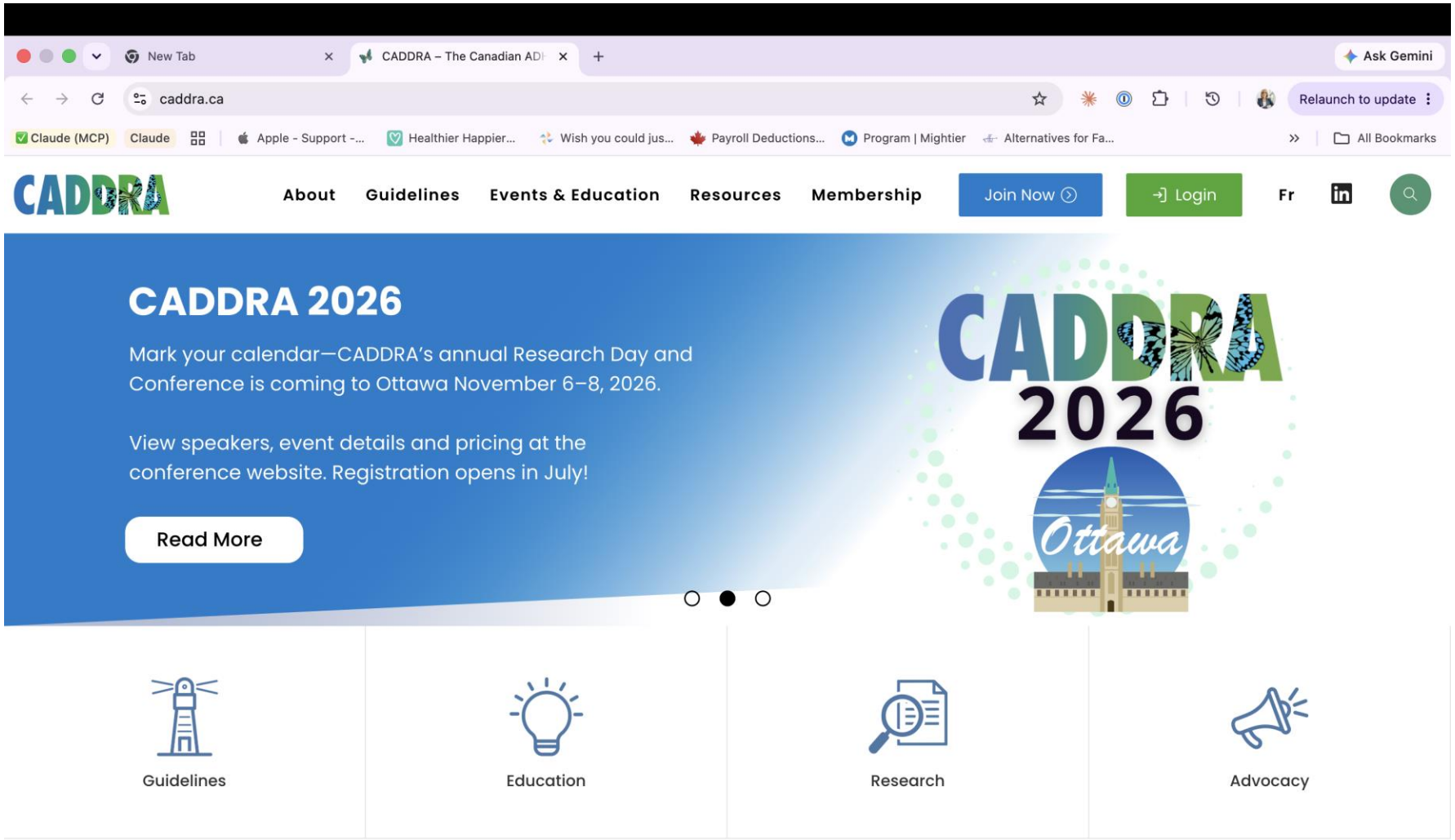
While most individuals seeking assessment do so in good faith, a careful and comprehensive evaluation helps **ensure appropriate prescribing and discourages diversion or misuse.**

Resources

Tools

Links to resources shared today will be sent to participants following the session.

Resources for ADHD



Resources

Education

Links to resources shared today will be sent to participants following the session.

Upcoming Community of Practice Events

ADHD in Practice: Treatment & Management for Family Physicians

August 26th, 2026
8:00am – 9:00am

Register Now

Ontario College of Family Physicians

OCFP Ask Me Anything (AMA) Webinar

Wellness in Family Medicine

August 27, 2026 | 6:00pm – 7:00pm

- Hear firsthand from experienced family physicians about navigating wellness, career development, work-life balance, and the transition into practice.
- Ideal for medical students, residents, and international medical graduates (IMGs) exploring a future in family medicine.

Register Now

Ontario College of Family Physicians

ONTARIO Osteoporosis Strategy

Clinical Application of the Long-Term Care (LTC) Fracture Prevention Recommendations for Frail Older Adults

At the end of this session, participants will be able to:

- Assess fracture risk using Fracture Risk Scale
- Apply evidence-based recommendations for fracture prevention in LTC
- Recognize challenges and barriers to implement the recommendations and use enablers.

September 4, 2026 | 12 PM – 1PM | Zoom

Free to attend. This one-credit-per-hour Group Learning program has been certified by the College of Family Physicians of Canada and the Ontario Chapter for up to 1 Mainpro+ credit.

Registration now open

Scan to learn more

Ontario College of Family Physicians

The Children's Mental Health Workshop Series

Foundations of Children's Mental Health

Scan QR Code

October 7, 2026 | 1:30PM - 4:30PM | Virtual Workshop | Claim up to **3 credits**!

- Explore how to take a comprehensive psychosocial history specific to school-aged children and adolescents
- Identify common childhood presentations, including adjustment disorder, anxiety & depression, and review essential concepts related to ADHD
- Review early identification through use of evidence-based screening tools
- And More

Price: $200 +HST (early bird pricing)
Discount applies until July 31st!

Register now

Become a Peer Learner and Connect with a fellow Family Physician

Interested in continuing your learning journey?

Connect with another family physician through OCFP's one-to-one mentorship program for educational support on topics related to **physician wellness, mental health**, **chronic pain** and **substance use disorders.**

Scan the QR code for more information or click here!

Examples of topics Peer Learners have explored:

- Guidance for setting boundaries/work-life balance
- Managing chronic pain and long-term use of opioids