

Primary Care Principles for Child Mental Health

Version 1.2
August, 2008

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Partnership Access Line
Mental Health Consultation Outreach
for children

The information in this book is intended to offer helpful guidance on the diagnostic and treatment process conducted by a primary care provider, and is not a substitute for specific professional medical advice. Providers are encouraged to reproduce pages as desired from this booklet for use in their clinical practice.

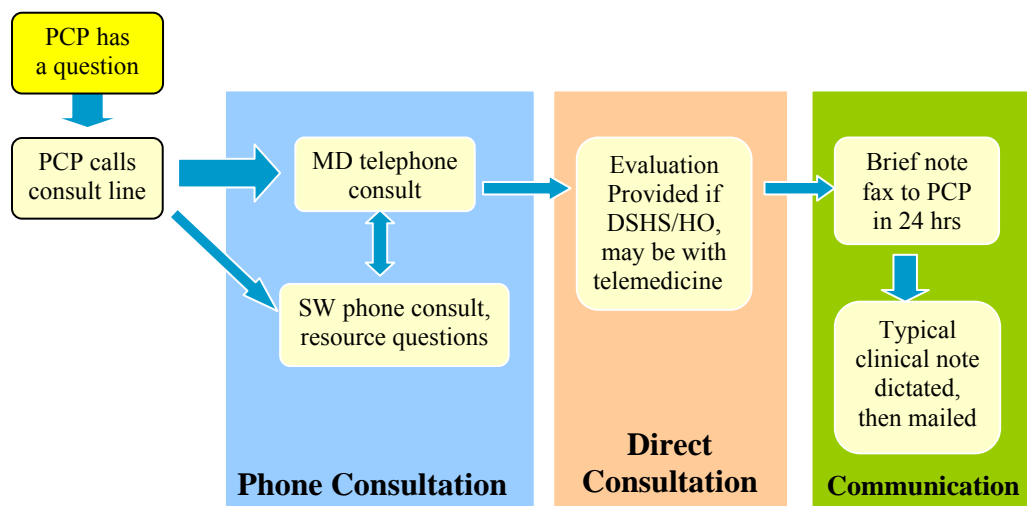
There was no pharmaceutical industry or commercial funding for preparing this booklet.



Partnership Access Line

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- PAL is a new program, provided for free to you. It is funded by the Washington State Legislature and by the Department of Social and Health Services.
- Primary care providers may call the PAL toll free number (866-599-7257) during business hours (M-F, 9-5) for *any* type of child mental health advice for *any* child they see
 - A program assistant will ask for the provider's name and basic patient information
 - A child psychiatrist then will speak to the provider either immediately, or, if there must be a call back, it will usually be within 10 minutes.
- If child psychiatrist and PCP over the phone determine further consultation is needed, a rapid appointment will be offered with the child psychiatrist for DSHS/Healthy Options clients
- Primary care providers can be reimbursed \$25.32 for DSHS phone consultations with the PAL psychiatrist (call us for details)



A study at the University of Washington is being conducted to investigate the effectiveness of the PAL program. You may be contacted by the research team. Your participation in the research is voluntary. You do **NOT** need to participate in the research to participate in the PAL clinical program.

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Peer Review

This guide is based on current evidence in the literature about mental health treatments in children. It is a digestion of current knowledge into focused points practical for the primary care physician. Future editions may cover additional topics in child health.

Although Dr. Hilt is the primary author, this guide has utilized peer review from a variety of mental health experts and the helpful input and guidance from state agencies.

General peer review has included:

Child and Adolescent Outpatient Psychiatry Clinic, Seattle Children's Hospital
U. Washington Division of Public Health and Justice Policy
Eric Trupin, PhD, Professor of Psychiatry & Behavioral Sciences, U. of Washington
Bryan King, MD, Professor of Psychiatry & Behavioral Sciences, U. of Washington
Matt Speltz, PhD, Professor of Psychiatry & Behavioral Sciences, U. of Washington
John Dunne, MD, Child and Adolescent Psychiatrist

Section specific peer review has included:

ADHD:

Chris Varley, MD, Professor of Psychiatry & Behavioral Sciences, U. of Washington
Nicole Nguyen, PharmD., DSHS
Siri Childs, PharmD., Pharmacy Administrator, DSHS

Anxiety:

Teresa Piacentini, PhD, Clinical Psychologist, CHRMC
Nicole Nguyen, PharmD., DSHS
Soraya Kanakis, PharmD., DSHS

Bipolar:

Jack McClellan, MD, Associate Professor of Psych. & Beh. Sciences, U. of Washington
Kathleen Myers, MD, Associate Professor of Psych. & Beh. Sciences, U. of Washington
Nicole Nguyen, PharmD., DSHS
Soraya Kanakis, PharmD., DSHS

Depression:

Elizabeth McCauley, PhD, Professor of Psych. & Beh. Sciences, U. of Washington
Soraya Kanakis, PharmD., DSHS

Eating Disorder:

Rose Calderon, PhD, Associate Professor of Psych. & Beh. Sciences, U. of Washington
Cora Breuner, MD, Associate Professor of Pediatrics, U. of Washington

Oppositional/Conduct:

Terry Lee, MD, Acting Assistant Professor, U of Washington

Endorsed by Washington State Agencies including:

Department of Social and Health Services
Children's Administration
DSHS Regional area medical directors
Washington State Chapter of the American Academy of Child and Adolescent Psychiatry

Methods

Dr. Hilt is the primary author of this guide, and peer reviewers were asked to verify the validity of the information, and help guide the content of the final product. Patient handout information chosen for inclusion in the guide was selected based on the clinical experiences of Dr. Hilt and the section reviewers. A steering committee consisting of the following additional individuals reviewed the guide and will monitor its future revisions:

Jeff Thompson
Bryan King
Jack McClellan
Kathleen Myers
Eric Trupin
John Dunne
Terry Lee
Elizabeth McCauley
Chris Varley

The process of formulating the care recommendations in this document started with a review of the most recent applicable practice guidelines from the American Academy of Child and Adolescent Psychiatry, and reviewing the applicable sections of *Bright Futures in Practice: Mental Health* practice guide from HRSA (which has received widespread endorsements including from the American Academy of Pediatrics). Regarding medications, Ovid Medline searches were performed between December 2007 and March 2008 looking back at least 10 years with limits set to include only child studies. These Medline searches were supplemented by reviewing recent conference presentations of drug treatment studies, and reviewing bibliographies of the published studies that were found. Bibliographies of review textbooks were also searched, including in particular the bibliography of a recent textbook, *Pediatric Psychopharmacology Fast Facts* by DF Connor and BM Meltzer (2006).

Psychosocial treatment guidance was formulated in consultation with the named section reviewers, and with members of the steering committee. Evidence based psychosocial treatment recommendations were arrived at through expert consultations and review of online CAMHD Hawaii Department of Health information (included herein) and review of a WA DSHS report from the Children's Evidence Based Practices Expert Panel, dated December 15, 2006.

All recommendations in this guide were reviewed and modified by a panel of state experts in each of the applicable fields to reflect current and regionally endorsed, state of the art care.

How this book can help you:

As with all diagnostic processes, one has to think of the possibility of a mental health disorder before it is possible to diagnose it.

- Ask for the history of the child's problem
- Ask about acute and chronic stressors relating to their problem
- Then ask yourself if there is a mental health diagnosis to consider
- Ask whether appropriate social, behavioral and family support is present

Certain clusters of symptoms bring up the possibility of particular diagnoses. For instance consider:

ADHD if inattentive or hyperactive with school difficulty

Anxiety disorder if unexplained somatic complaints, general or specific worries

Bipolar disorder if episodic mood changes with manic features

Depression if withdrawn, irritable, unexplained somatic complaints

Eating disorder if losing weight or odd eating habits

Conduct or Oppositional Defiant Disorder (ODD) if oppositional or aggressive behavior

A primary care provider considering a particular mental health diagnosis can consult that section of this guide easily to find things they may need.

Contained inside:

- Tips on the general approach to mental health issues in primary care practices
- Recommended thought process for the evaluation and treatment of the above 6 common childhood disorders.
- Free to reproduce rating scales for assistance with diagnosis and follow up
- Organized, current evidence based medication information
- Community resource guide for DSHS clients for social, behavioral and family support
- Free to reproduce patient handouts
- All reference information here will be consistent with advice given out by PAL program psychiatrists