

Treatment Tracking Tool

Clinical Approach to Psychopharmacologic Management

Identify and assess target behaviors

Parent/caregiver interview

Intensity

Duration

Exacerbating factors/triggers (time, setting/location, demand situations, denials, transitions, etc.)

Ameliorating factors and response to behavioral interventions

Time trends (increasing, decreasing, stable)

Degree of interference with functioning

Consider baseline behavior-rating scales and/or baseline performance measures/direct observational data

Include input from school staff and other caregivers

Assess existing and available supports

Behavioral services and supports

Educational program, habilitative therapies

Respite care, family psychosocial supports

Search for medical factors that may be causing or exacerbating target behavior(s)

Consider sources of pain or discomfort (infectious, gastrointestinal, dental, allergic, etc.)

Consider other medical causes or contributors (sleep disorders, seizures, menstrual cycle, etc.)

Complete any medical tests that may have a bearing on treatment choice

Consider psychotropic medication on the basis of the presence of

Evidence that the target symptoms are interfering substantially with learning or academic progress, socialization, health and safety (of the patient and/or others around him or her), or quality of life

Suboptimal response to available behavioral interventions and environmental modifications

Research evidence that the target behavioral symptoms or coexisting psychiatric diagnoses are amenable to pharmacologic intervention

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Treatments for Autism

Choose a medication on the basis of

- Likely efficacy for the specific target symptoms
- Potential adverse effects

Practical considerations such as formulations available, dosing schedule, cost, and requirement for laboratory or electrocardiographic monitoring

Informed consent (verbal or written) from parent/guardian and, when possible, assent from the patient

Establish plan for monitoring of effects

- Identify outcome measures
- Discuss time course of expected effects

Arrange follow-up telephone contact, completion of rating scales, reassessment of behavioral data, and visits accordingly

Outline a plan regarding what might be tried next if there is a negative or suboptimal response or to address additional target symptoms

- Change to a different medication

- Add another medication to augment a partial or suboptimal therapeutic response to the initial medication (same target symptoms)

- Add a different medication to address additional target symptoms that remain problematic

Obtain baseline laboratory data if necessary for the drug being prescribed and plan appropriate follow-up monitoring

Explore the reasonable dose range for a single medication for an adequate length of time before changing to or adding a different medication

Monitor for adverse effects systematically

Consider careful withdrawal of the medication after 6–12 months of therapy to determine whether it is still needed

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