

Meds at School

Successful treatment requires a detailed game plan.



If your child takes medication for AD/HD, make sure it's administered on schedule and that it's working as intended. Along with the doctor, the classroom teacher and school nurse can be valuable allies in this effort. Include the following steps in your medication plan.

■ **Make sure your child's symptoms are "covered" whenever necessary.** Consider the possibility that he may need coverage beyond school hours—so that he can complete homework assignments and enjoy after-school activities and social relationships.

Remember that the duration listed on a medication's package materials is only an approximation. A four-hour tablet might control symptoms for as few as three hours—or as many as five. A 12-hour form might last only 10 hours.

■ **Ask the teacher to be your eyes and ears in the classroom.** Is your child's behavior consistent throughout the school day? How about her focus? If there's a point during the day when her medication wears off, you may need to adjust the timing of the second dose, or ask the doctor

about switching your child to a longer-acting formulation.

The teacher should know which med your child takes and the symptoms it targets. Ask her to notify you if she notices the emergence of side effects, such as headaches, stomachaches, tics, or "spaciness." If there's a problem, your child's medication may need to be adjusted.

■ **Give the school nurse everything she needs.** If your child takes a dose at school, you must supply the nurse with pills in the original container. In addition, your prescribing doctor must indicate dispensing instructions on a form provided by the school.

Ask the nurse to alert you if your child misses a dose. If there's a problem, it needs to be addressed.

Even if your child doesn't take a dose at school, inform the nurse which AD/HD med

your child takes; in an emergency, she'll know to avoid administering any drugs that might interact dangerously with it. And if you supply the nurse with "spare" pills, your child won't have to call you if he fails to get his morning dose before leaving home.

■ **Respect your child's desire for privacy.** Work out an unobtrusive way for the teacher to let him know when it's time to go to the nurse. She might catch his eye and tap her watch, or put a note on his desk. If you'd like your child to be responsible for keeping track of the time, get him a watch with a silent, vibrating alarm. (Check epill.com/pediatric.html for kid-sized vibrating watches.)

If leaving class to visit the school nurse makes your child feel "different," ask her doctor about medication that lasts through the day.

BUILDING AN APPETITE

Appetite loss is a common side effect of stimulants. In many children, the problem subsides within a month. But if it is long-lasting or severe, kids may lose weight or miss out on essential nutrients.

One potential solution is to ask the doctor about prescribing a different stimulant—each drug affects individuals differently. Alternatively, your doctor may recommend a short-acting stimulant. Your child will need a lunchtime dose, but he should be able to enjoy a good meal before it kicks in. If that doesn't help, he may fare better on a nonstimulant medication.

If long-acting meds work best for your child, make sure he gets a nutritious breakfast. Hold off on afternoon meds until 5 P.M.—his appetite may return for dinner.

Keep healthful snacks, such as string cheese or carrots with hummus, on hand, and mix nutritional supplements, like Pediasure, into milk shakes.