Developmental-Behavioral Pediatrics Management and Referral Guidelines

Provided by

Sub-specialists of Dell Children’s Medical Center of Central Texas
A member of the Seton Healthcare Family

dell children’s
medical center of central texas
A member of the Seton Family of Hospitals
Developmental Behavioral Pediatrics

General Information

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The developmental behavioral program is a part of the Dell Children’s Pediatric Consultation and Referral Service located at 5339 N Interstate 35 Frontage Road, Suite 100, Austin, TX 78723.

We offer Developmental assessments and an interdisciplinary approach to the diagnosis and monitoring of children with developmental and behavioral disorders such as ADHD, Autism Spectrum Disorder, Anxiety, Depression, speech/language disorders, developmental coordination disorder (dyspraxia), and developmental delay. We also provide developmental follow-up and monitoring for NICU graduates as well as children with genetic syndromes.

We are currently accepting new patients up to 12 years of age. Our program collaborates with speech therapists, occupational therapists, and physical therapists from Dell Children’s Rehabilitative Services. Standardized testing is used to monitor developmental progress and aid medical decisions on plan of care including therapies and educational programming. We are working on adding psychological evaluation and services to expand the program.

New patient evaluations can involve more than one visit depending on the complexity of the child. The initial visit is a 60 minute medical consultation where the clinician will review the child’s records (health, therapy, school), obtain a detailed developmental and medical history, as well as perform a comprehensive physical exam and developmental screening. A second appointment may be needed for extended developmental testing (60 minutes), evaluation by the interdisciplinary team (90 minutes), or to review subsequent testing.

A New Patient Intake Questionnaire is required to be completed by the parent/guardian PRIOR to being given a New Patient appointment. (This form may be accessed at https://www.dellchildrens.net/specially-for-children/patient-resources/forms/ and clicking under Developmental Pediatrics on the “Behavioral Intake Form 0-12 years, English or Spanish”)
APPOINTMENT REQUIREMENTS

While waiting for the initial appointment to take place, there are several things that can be done to prepare for the appointment.

In addition to the new patient intake questionnaire, please have caregivers complete and submit developmental and social emotional screeners to our office before the initial appointment. Parents may access developmental screeners at the following links. Parents can print the results and fax them to (512) 380-4274 or send/bring them with the New Patient Paperwork.

These questionnaires are available online free of charge on the following websites:

1. Ages and Stages Questionnaire-3 (ASQ) for developmental delays
   a. www.actearlytexas.org
   b. www.easterseals.com/mtffc/asq
2. Modified Checklist for Autism in Toddlers (M-CHAT) for autism concern
   a. www.actearlytexas.org
   b. http://m-chat.org/
3. Parent/Teacher Vanderbilt Assessment Scales for ADHD
4. Pediatric Symptom Checklist for behavior or emotional problems

For children between the ages of 0-3, please request an evaluation for Early Childhood Intervention (ECI). To determine which agency to contact for evaluation, please go to the following website:

- https://dmzweb.dars.state.tx.us/prd/citysearch/
- or call the HHS Office of the Ombudsman at 1-877-787-8999, select a language, and then select Option 3.

For children between the ages of 3-5 years that have not started school yet, you can request evaluation for the Preschool Program for Children with Disabilities (PPCD) by calling the Special Education Department of the school district where the child resides.

If patient has already started outpatient therapy, ECI, or has completed school evaluations please send these with your referral for initial appointment.
If there is a concern of harm to self or others, please refer family to Seton Psychiatric Emergency Services at 512-324-7000 or Integral Care at 512-472-HELP. All other patients can be seen on a next available timeline unless otherwise noted.

Please also provide all previous test results (labs, MRIs, EEG, etc.) and medication history. This information can be mailed, dropped off at our clinic, or faxed to (512) 380-4274.

Additional Information for Primary Care Providers:

Please let us know whether you are requesting consultation and will be following the child after initial visit and developmental evaluation or prefer to have patient follow-up in our developmental clinic for ongoing management.

If a medical consultation is provided on the same day as extended developmental testing, parents should be aware that insurance carriers view that as two separate services and will require two copayments.

For extended developmental testing visits, please have parents bring the child’s favorite toys, snacks, or any items which may help him/her be more comfortable for the lengthy evaluation.

Subsequent visits are sometimes necessary for discussion and feedback of test results, clinical impressions, diagnoses and treatment recommendations.

Families who prefer to NOT have their child present for the discussion and feedback visit need to be aware that most insurance will not cover non-face to face visits with the patient. Parents may choose to bring the child and another adult to supervise the patient or pay for the visit on their own.
Speech/language Delay (ICD-10: F80.9)

Clinical Findings: A broad set of conditions characterized by deficiencies of comprehension or expression of written and spoken forms of language. These deficiencies may be developmental or acquired.

Evaluation Recommended:
- A Pre-referral workup to include an Audiology assessment

Treatment Recommendations:
- While waiting for an appointment, parents can pursue a Speech Therapy Evaluation

Referral Requirements:
- Hearing test results
- Developmental Screenings (ASQ or PEDS, MCHAT, see General Information and Appointment Requirements above)

Delayed Milestones (ICD-10: R62.0)

Clinical Findings: Delayed milestones are characterized by delayed attainment of expected physiological developmental stages which may be in the areas of gross or fine motor skills or language skills.

Referral Timeline:
- Next Available, unless there is a history of regression after 2 years old. If that is the case, referring provider should call to speak with the specialist for additional workup.

Evaluation Recommended:
- For Speech Delay - audiology evaluation
- For Gross Motor Delay -CK (creatine phosphokinase test)
- For Global Developmental Delay – CBC, Lead, TSH/Free T4, CMP

Treatment Recommendations parents can pursue while waiting for appointment:
- Physical/Occupational/Speech Therapy
- ECI (Early Childhood Intervention) < 3 years old
- PPCD or Special Education > 3 years old

Referral Requirements:
- Developmental Screenings (ASQ or PEDS, MCHAT, see General Information
ADHD (ICD-10 F90.0, F90.1, F90.2)

Clinical Findings: A behavior disorder originating in childhood in which the essential features are signs of developmentally inappropriate inattention, impulsivity, and hyperactivity. Although most individuals have symptoms of both inattention and hyperactivity-impulsivity, one or the other pattern may be predominant.

Recommended Evaluation:
- Parent/Teacher Vanderbilt questionnaires (Currently we do not score Conners Behavior Rating Scales)
- See Helpful Resources for information on ADHD medications

Treatment Recommendations parents can pursue while waiting for appointment:
- Mental health or behavior counselor
  - Austin Child Guidance Center: 512-451-2242
  - Integral Care: 512-472-4357

Referral Requirements:
- Clinic Notes
- Medication history
- Vanderbilt Questionnaire results

Preschool Behavior Disorder (F91.9)

Clinical Findings: Mental disorder characterized by repetitive and persistent patterns of conduct in which rights of others and age-appropriate societal rules are violated.

Recommended Evaluation:
- Developmental Screenings (ASQ or PEDS, MCHAT, see General Information and Appointment Requirements above)

Treatment Recommendations parents can pursue while waiting for appointment:
- ECI (Early Childhood Intervention) if 0-3 years
- PPCD or Special Education if 3+ years
Autism Spectrum Disorder (F84.0-F84.9)

Clinical Findings: A disorder characterized by marked impairments in social interaction and communication accompanied by a pattern of repetitive, stereotyped behaviors and activities.

Referral Timeline:
- Priority is given to those currently without a diagnosis and/or services

Recommended Evaluation:
- Developmental Screening (ASQ or PEDS, see General Information and Appointment Requirements above)
- Autism Screening (MCHAT if 18-30 months)
- Audiology evaluation

Treatment Recommendations parents can pursue while waiting for appointment:
- ECI (Early Childhood Intervention) if 0-3 years
- PPCD or Special Education evaluation if 3+ years

Referral Requirements:
- Clinic Notes
- School or therapy evaluations
- Developmental screening and Audiology results
NICU Follow-up (P07.00-P07.39, Q99.9, E70-E88, P91.0-P91.9, and many others)

Clinical Findings: Infants at high risk for developmental or behavioral disorders on the basis of premature birth, low birth weight, genetic disorders, metabolic syndromes, neurologic injury, or other chronic illnesses.

Referral Timeline:
- Within 6-8 weeks of discharge from the NICU

Recommended Evaluation:
- 0-3 years: Call Austin First Steps, our High Risk NICU follow-up partner at (512) 482-8880 upon discharge from NICU

Treatment Recommendations parents can pursue while waiting for appointment:
- ECI (Early Childhood Intervention) if 0-3 years
- PPCD or Special Education evaluation if 3+ years
  - Austin Child Guidance Center: 512-451-2242
  - Integral Care: 512-472-4357

Referral Requirements:
- NICU Discharge Summary

Unspecified Anxiety Disorder (F41.9)

Clinical Findings: A category of psychiatric disorders which are characterized by anxious feelings or fear often accompanied by physical symptoms.

Recommended Evaluation:
- Please remind parents to answer all questions on the New Patient Intake Questionnaire for children older than 6 years.

Treatment Recommendations parents can pursue while waiting for appointment:
- Behavior counselor
  - Austin Child Guidance Center: 512-451-2242
  - Integral Care: 512-472-4357

Referral Requirements:
Unspecified Depressive Disorder (F32.0-F32.9, F33.0-F33.9)

Clinical Findings: Depressive disorders are characterized by sadness severe enough or persistent enough to interfere with function and often by decreased interest or pleasure in activities.

Referral Timeline/Red Flags:
- **If child has a previous diagnosis of a Mood disorder or has ever been evaluated in the Emergency Room for behavioral health**, these individuals should be seen by a Pediatric Psychiatrist. Please contact Integral Care Hotline at 512-472-HELP or Seton Psychiatric Emergency Services Department at 512-324-7000. **NOTE:** The Developmental/Behavioral Pediatrics Clinic is not equipped to treat children with homicidal/suicidal ideation, acute psychosis, or mood disorder.

Recommended Evaluation:
- Please remind parents to answer all questions on the New Patient Intake Questionnaire for children older than 6 years.

Treatment Recommendations parents can pursue while waiting for appointment:
- Behavior counselor
  - Austin Child Guidance Center: 512-451-2242
  - Integral Care: 512-472-4357

Referral Requirements:
- Therapy notes and evaluations
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Additional Information/Helpful Resources for Physicians

Use of SSRIs in Children
www.guideline.gov
   • Click “psychiatry” under Clinical Specialty
www.aacap.org
   • Free download regarding to AACAP 63rd annual meeting regarding Depression in Children and Adolescence
www.fda.gov
   • Search SSRIs in children
www.aap.org
www.cdc.gov/childrensmentalhealth/depression.html

ADHD medications
www.cdc.gov/ncbddd/adhd/guidelines.html
www.help4adhd.org/portals/0/content/CHADD/NRC/websites2/medchart.png
www.fda.gov
   • Search ADHD medication for children