

# Attention, learning, and school problems

## (January 2017)

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### Rationale

School and learning problems are among the most common reasons for children to present to primary care clinicians. Difficulties at school can be caused by treatable medical and developmental conditions which, if unaddressed, can lead to long-term psychosocial dysfunction and chronic health problems.

### Causal Conditions

(list not exhaustive)

- Developmental disorders (e.g., attention deficit hyperactivity disorder [ADHD], specific learning disorder, autism spectrum disorder)
- Sensory impairment (e.g., hearing or vision impairment)
- Neurological disorders (e.g., seizure disorder, fetal alcohol spectrum disorder)
- Mental health disorders
- Psychosocial stressors (e.g., hunger, adverse childhood experience)
- Chronic medical disease (e.g., obstructive sleep apnea)
- Substance abuse-related and addictive disorders

### Key Objectives

Given a child or youth with learning or school problems, the candidate will assess for potential causal conditions, which often co-occur, and will initiate an appropriate management plan. Particular emphasis should be placed on early involvement of interdisciplinary resources and longitudinal supportive care.

### Enabling Objectives

Given a child or youth with learning or school problems, the candidate will

- list and interpret critical clinical findings, including those derived from
  - a. a thorough medical and developmental history, with a focus on potential causal conditions;
  - b. an educational history from school staff;
  - c. a physical examination, with particular attention to signs of neurologic or genetic causal conditions;
- list and interpret critical investigations, including
  - a. systematic hearing and vision screening;
  - b. relevant laboratory tests (e.g., thyrotrophin-stimulating hormone, lead level);
  - c. psychological (cognitive) testing or behavioral checklists (e.g., ADHD screening tools);
- construct an effective management plan, including
  - a. supporting family advocacy for academic and/or behavioral interventions at school;
  - b. referring for interdisciplinary intervention, if necessary (e.g., behavior management);
  - c. ensuring medical management of causal conditions when required (e.g., long-acting stimulant medications);
  - d. providing counseling and longitudinal family support;
  - e. referring for specialized care, if necessary.