A. Inattention

Six (or more) of the following symptoms of inattention have persisted for at least 6 months to a degree that is inconsistent with developmental level and that negatively impacts directly on social and academic/occupational activities:

- 1. Often fails to give close attention to details or makes careless mistakes in schoolwork, at work, or during other activities.
- 2. Often has difficulty sustaining attention in tasks or play activities.
- 3. Often does not seem to listen when spoken to directly.
- 4. Often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace.
- 5. Often has difficulty organizing tasks and activities.
- 6. Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort.
- 7. Often loses things necessary for tasks or activities.
- 8. Is often easily distracted by extraneous stimuli.
- 9. Is often forgetful in daily activities.

B. Hyperactivity and Impulsivity

Six (or more) of the following symptoms of hyperactivity-impulsivity have persisted for at least 6 months to a degree that is inconsistent with developmental level and that negatively impacts directly on social and academic/occupational activities:

- 1. Often fidgets with or taps hands or feet or squirms in seat.
- 2. Often leaves seat in situations when remaining seated is expected.
- 3. Often runs about or climbs in situations where it is inappropriate.
- 4. Often unable to play or engage in leisure activities quietly.
- 5. Is often "on the go," acting as if "driven by a motor."
- 6. Often talks excessively.
- 7. Often blurts out an answer before a question has been completed.
- 8. Often has difficulty waiting their turn.
- 9. Often interrupts or intrudes on others.

Additional Criteria

- Several inattentive or hyperactive-impulsive symptoms were present before age 12 years.
- Several symptoms are present in two or more settings (e.g., at home, school, or work; with friends or relatives; in other activities).
- There is clear evidence that the symptoms interfere with, or reduce the quality of, social, academic, or occupational functioning.

• The symptoms are not better explained by another mental disorder (e.g., mood disorder, anxiety disorder, dissociative disorder, personality disorder). The symptoms do not occur exclusively during the course of schizophrenia or another psychotic disorder.

Subtypes

The DSM-5 identifies three subtypes of ADHD based on the predominance of symptoms:

- 1. **Predominantly Inattentive Presentation**: Enough symptoms of inattention, but not hyperactivity-impulsivity, are present for the past six months.
- 2. **Predominantly Hyperactive-Impulsive Presentation**: Enough symptoms of hyperactivity-impulsivity, but not inattention, are present for the past six months.
- 3. **Combined Presentation**: Enough symptoms of both inattention and hyperactivity-impulsivity are present for the past six months.

Severity

The DSM-5 also specifies the severity of ADHD:

- Mild: Few, if any, symptoms in excess of those required to make the diagnosis are present, and symptoms result in no more than minor impairments in social or occupational functioning.
- Moderate: Symptoms or functional impairment between "mild" and "severe" are present.
- **Severe**: Many symptoms in excess of those required to make the diagnosis, or several symptoms that are particularly severe, are present, or the symptoms result in marked impairment in social or occupational functioning.

For older adolescents and adults (age 17 and older), the DSM-5 criteria for ADHD are modified to better reflect the symptoms' impact on this age group. The key modifications are:

- 1. **Reduced Number of Symptoms**: Only five (instead of six) symptoms of inattention and/or hyperactivity-impulsivity are required to make the diagnosis.
- 2. **Symptom Manifestation**: The symptoms might present differently in older adolescents and adults. For instance:
 - o Inattention may manifest as difficulty managing time, poor organizational skills, or difficulty sustaining attention in meetings or reading.
 - Hyperactivity may present more as feelings of restlessness rather than overt hyperactivity. This can include fidgeting, an inability to relax, or excessive talking.