



Evidence-based Practice Center Systematic Review Protocol

Project Title: *Diagnosis of Attention-Deficit/Hyperactivity Disorder in Adults: A Systematic Review*

I. Background and Objectives for the Systematic Review

Attention-deficit/hyperactivity disorder (ADHD) is characterized by persistent symptoms in the domains of inattention, hyperactivity, and impulsivity.¹ Clinically significant symptoms, especially inattention, persist into adulthood in most individuals.¹⁻⁵ The lifetime prevalence of ADHD is approximately 5.3%,⁶ although epidemiological studies that have not required a childhood onset have suggested that its prevalence in adults may be as high as 6.7%.⁷⁻¹⁰

Despite established diagnostic criteria in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), diagnosing ADHD in adults remains challenging due to the frequent absence of hyperactivity and impulsivity symptoms, the subtlety of inattention symptoms, the inaccuracy of recall in adults for their retrospective assessments of ADHD symptoms in childhood (required to meet DSM-5 diagnostic criteria), and the common overlap with other mental health conditions.¹¹⁻¹³ The DSM-5 diagnostic criteria, developed primarily for children, may not be suitable for adult diagnosis, and the requirement of symptoms beginning before age 12 has been debated.¹⁴⁻¹⁸ Furthermore, the accurate diagnosis of adult ADHD is complicated by the large number of individuals,¹⁹⁻²⁴ including healthy college students,^{25, 26} who seek stimulant medications to improve cognitive performance. The absence of a true “gold-standard” diagnosis, the variability in performance of diagnostic tools among clinicians and settings, and the lack of clear practice guidelines further add to diagnostic complexity.²⁷⁻³⁰

The diagnosis of ADHD in adults is often made by primary care providers and nurse practitioners³¹ rather than specialists, and the dispensing of ADHD medications has been increasing steadily, highlighting the need for effective diagnostic tools and guidelines.¹⁷ The existing standards and guidelines for diagnosing ADHD in adults are limited, and the use of diagnostic tools and assessments varies widely in practice.³²⁻³⁴ No guidelines for the diagnosis of adults with ADHD have thus far been developed in the United States, though one is in development.³⁵ The accuracy of diagnosis directly affects the management and treatment of ADHD, as well as the prevention of medication misuse. The diagnostic accuracy of tools and assessments used in adult ADHD diagnosis is unclear, however, and their performance may vary depending on the characteristics of the ADHD participants and comparator samples.^{36, 37}

Purpose of the Review

This systematic review aims to provide a comprehensive and unbiased assessment of the diagnostic tools and assessments used to diagnose ADHD in adults, with a focus on their accuracy, reliability, and feasibility in primary care settings. The review will explore the contextual factors that influence diagnostic decisions, including the lack of guidelines, variability

in clinical practice, and uncertainty about disease diagnosis. By addressing key questions, this systematic review will provide critical evidence to inform the development of guidelines, clinical practice, and policy decisions related to the diagnosis of ADHD in adults.

II. Key Questions

The systematic review will be guided by the following key questions. In addition, a contextual question will provide additional information:

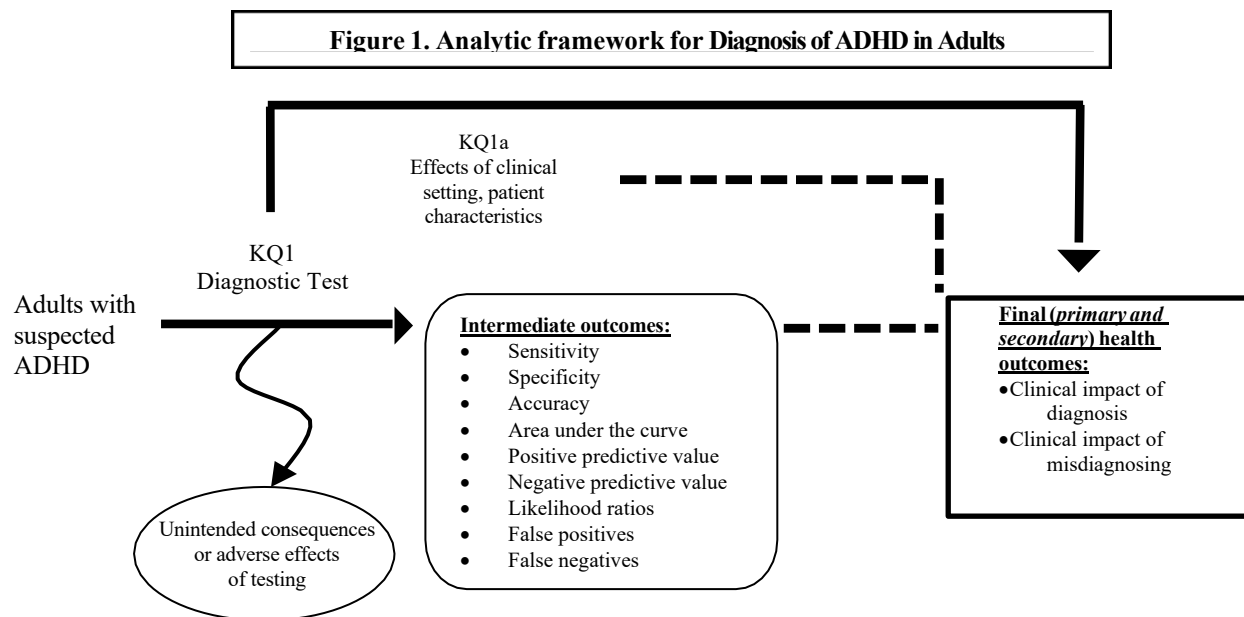
Key Question 1: What is the comparative diagnostic accuracy, unintended consequences and impact of tools that can be used in the primary care practice setting or by specialists to diagnose ADHD among adults?

- a. How does the comparative diagnostic accuracy of these tools vary by clinical setting, including primary care or specialty clinic, or patient characteristics, including, age, gender, cultural background, and risk factors associated with ADHD?

Contextual Question: How frequently are the various tools to diagnose ADHD in adults currently being used?

III. Logic Model

The model below illustrates the scope of the review and the key questions.



IV. Methods

The systematic review will be guided by this systematic review protocol and will follow the EPC Methods Guide.³⁸ The project will be supported by a multidisciplinary technical expert panel. The panel is designed to provide different perspectives of a broad group of stakeholders to ensure the evidence report on diagnosis of ADHD is relevant to a large audience. The panel includes experts specifically in adult ADHD and will consider the needs of affected patients as well as family members.

Literature Search Strategies To Identify Relevant Studies to Answer the Key Questions

The literature for the review on diagnosing ADHD in adults will use a combination of known tests to diagnose ADHD and general search terms for diagnostic accuracy studies to identify novel tools. We will search PubMed (biomedical literature), EMBASE (pharmacology emphasis), and PsycINFO (psychological research) without search date restriction and restricted to English language. The search strategy will be peer reviewed within the EPC program. We will use existing reviews for reference-mining; these will be identified through the same databases plus searching the Cochrane Database of Systematic Reviews, Campbell Collaboration, and PROSPERO. We will also search the ECRI repository, G-I-N, and ClinicalKey for published guidelines and use these for reference-mining cited literature. All searches will be updated during the public comment period.

In addition, we will leverage technical experts to ensure that relevant research studies have been identified. We will provide a list of included studies, together with all associated publications, and a list of excluded studies to facilitate this process. A Supplemental Evidence And Data for Systematic Reviews (SEADs) portal will be available and a Federal Register Notice will be posted for this review. Additional data and publications suggested to us from any source, including peer and public review, will be screened applying the outlined eligibility criteria.

Criteria for Inclusion/Exclusion of Studies in the Review

The eligibility criteria are shown in the table.

Table 1. Eligibility Criteria

	Inclusion Criteria	Exclusion Criteria
Population	Adults 18 years and older with symptoms of ADHD and without the diagnosis of ADHD	Individuals 17 years of age or younger unless findings are reported separately for older participants
Intervention	Any ADHD diagnostic tool used for the diagnosis of ADHD in adults	Studies not reporting on diagnostic performance; non-English language questionnaires and interview guides
Comparator	Confirmation of diagnosis by a specialist (reference standard), such as a psychologist, psychiatrist or other healthcare provider using a well validated and reliable process of confirming a clinical diagnosis of ADHD	Comparison to diagnosis with another diagnostic instrument
Outcome	Diagnostic accuracy (e.g., sensitivity, specificity, accuracy, area under the curve, positive predictive value, negative predictive value, likelihood ratios, false positives, false negatives); unintended consequences and impact associated with diagnosing ADHD	Provider opinion of tests, cost without performance measure
Timing	Diagnostic follow-up must be completed before treatment is initiated	Any other timing
Setting	Primary or specialty care settings, including telehealth	Settings where diagnosis is for nonclinical or not research purposes
Study Design	<ul style="list-style-type: none">• Diagnostic accuracy studies	<ul style="list-style-type: none">• Editorials, nonsystematic reviews, letters, case series, case reports, pre-post studies.• Systematic reviews are not eligible for inclusion but will be retained for reference mining.

Included ADHD tests will not be limited to a set of pre-specified tools; instead, the review will document all tools that have been evaluated in the scientific literature and for which diagnostic accuracy evidence exists. There are no publication date restrictions. Studies with data exclusively published in non-English language publications will be excluded to ensure transparency. We will obtain all published reports providing data on a study (a study is defined by the included participants), including trial records and multiple publications, and consolidate the information into one study record.

Study Selection

We will use an online database designed for systematic reviews to screen the literature search output. The team will design detailed citation and full text screening forms to ensure a transparent, consistent, and unambiguous approach. All citations will be screened by at least two independent reviewers. Citations found to be potentially relevant by at least one literature reviewer will be obtained as full text.

Full text screening will apply the detailed eligibility criteria. Training will ensure a shared understanding of all inclusion and exclusion criteria. Full text publications will be screened by two independent reviewers to reduce errors and bias, and any discrepancy will be resolved through discussion in the review team. The screening decisions and reasons for exclusion of publications will be tracked in the online database and citation management software. These citations will be shared with the technical expert panel and will be documented with the review to ensure that the literature flow is transparent and objective.

Data Abstraction and Data Management

The data abstraction will capture detailed information about eligible studies. One literature reviewer will abstract the data and an experienced methodologist will check the data for accuracy. We will document the targeted population, abstract reported characteristics for all participants (participants with ADHD and those without). We will document the clinical setting, abstract the method of establishing the reference standard (a clinical ADHD diagnosis), and abstract diagnostic tool characteristics (format, name of the tool, employed cut offs, use of a training and validation set). We will collect data for a diagnostic meta-analysis where possible (i.e., number of false positives, number of false negatives) along with the summary diagnosis accuracy measures reported by the authors such as sensitivity, specificity, area under the curve, positive predictive value.

Assessment of Methodological Risk of Bias of Individual Studies

The critical appraisal for individual studies will apply criteria consistent with QUADAS 2.³⁹ QUADAS-2 evaluates four domains: *patient selection*, *index test* characteristics, *reference standard* quality, as well as *flow and timing*:

- Patient selection: The domain addresses whether the selection of patients could have introduced bias, taking into account whether the study enrolled a consecutive or random sample, whether the data are not based on a retrospective case-control design, and whether the study avoided inappropriate or problematic exclusions from the patient pool.
- Index test: The domain evaluates whether the conduct or interpretation of the test could have introduced bias, taking into account whether the results of the test were interpreted without knowledge of the results of the reference standard and whether any thresholds or cut-offs were pre-specified (e.g., instead of determined during the study to maximize diagnostic performance).
- Reference standard: The domain evaluates whether the reference standard, its conduct, or its interpretation may have introduced bias, taking into account the quality of the reference standard in correctly classifying the condition and whether the reference standard test results were interpreted without knowledge of the results of the index test.
- Flow and timing: The last domain evaluates whether the conduct of the study may have introduced bias. The assessment takes into account whether the interval between the test and the reference standard was appropriate, whether all patients received the reference standard and whether they received the same reference standard, and whether all patients were included in the analysis.

For each domain, we will assess the potential risk of bias in the study in order to identify high risk of bias and low risk of bias studies. One literature reviewer will assess risk of bias, and a methodologist will review individual studies and rating across studies to ensure accuracy and consistency of ratings. We will evaluate for each study and appraisal domain whether there are concerns regarding the applicability of the study results to the review question. This encompassed whether the patients included in the studies match the review question; whether the test, its conduct, or interpretation differ from the review question; or whether the target condition as defined by the reference standard fully matches the review question.

Data Synthesis

We will answer the key question with the available evidence. An evidence table will

display key characteristics, the reference standard, and diagnostic accuracy outcomes for all included studies. Where possible, studies reporting on the same diagnostic tool will be summarized in a random effects diagnostic meta-analysis. Where there is insufficient data, we will document the range of identified diagnostic accuracy results as reported by the authors in the individual studies. Sensitivity estimates will be documented together with specificity estimates given that the estimates are not independent. We will document the results for available diagnostic tools across studies in a comprehensive summary of findings table. Key outcomes were determined with the help of the TEP: Misdiagnosis; Sensitivity; Specificity; Administration and scoring time; Inter-rater reliability; Costs; and Diagnostic concordance of primary care provider with specialist. The synthesis will take study limitations and the risk of bias of individual studies contributing to estimates into account. In particular, we will determine whether summary estimates correspond to data reported in low risk of bias studies or are primarily based on high risk of studies.

To address the sub-question, we will report on subgroup results for different clinical settings (differentiating general and specialty care settings), patient characteristics (differentiating gender, age, cultural background, and comorbidity groups), and ADHD presentation (differentiating predominantly inattentive, hyperactive-impulsive, combined). We will assess for all variables whether they can explain heterogeneity identified in results across studies.

For the contextual question we will document the frequency of identified research for each individual tool. In addition, we will summarize data sources that report on the frequency of tool use in clinical practice with emphasis on the U.S. healthcare setting.

Assessing Applicability

Results will be based on the international literature and applicability ratings will provide assessments regarding the generalizability of samples, settings, and tool results for U.S. clinical practice. For each study, we will assess the population included in the study to identify studies with narrow eligibility criteria, studies that excluded participants with comorbidities, or that had more complex participants than typically seen in the community. We will assess whether studies describe tools not used as recommended or commonly used in practice, the presence of highly trained test team, or assessors that were not qualified for the assessment. We will assess whether the reference standard was ambiguous, different from standard clinical practice, otherwise inadequate, or insufficiently described.

Grading the Strength of Evidence (SoE) for Major Comparisons and Outcomes

We will apply the EPC strength of evidence criteria to evaluate the body of evidence. In determining the quality of the body of evidence, the following domains will be evaluated:

- Study limitations: The extent to which studies reporting on a particular outcome are likely to be protected from bias. The aggregate risk of bias across individual studies reporting an outcome is considered; graded as low, medium, or high level of study limitations.
- Inconsistency: The extent to which studies report the same direction and/or magnitude of effect or show statistical heterogeneity for a particular outcome; graded as consistent, inconsistent, or unknown (in the case of a single study or the absence of studies).
- Indirectness: Describes whether the intervention (test, treatment, or strategy) and the comparator were directly compared (i.e., in head-to-head trials) or indirectly (e.g.,

through meta-regressions across studies). In addition, indirectness can reflect whether the outcome is directly or indirectly related to health outcomes of interest. The domain is graded as direct or indirect.

- Imprecision: Describes the level of certainty of the estimate of effect for a particular outcome, where a precise estimate is one that allows a clinically useful conclusion. When quantitative synthesis is not possible, sample size and assessment of variance within individual studies are considered. The domain is graded as precise or imprecise.
- Reporting bias: Occurs when publication or reporting of findings is based on their direction or magnitude of effect. Publication bias, selective outcome reporting, and selective analysis reporting are types of reporting bias. Reporting bias is difficult to assess as systematic identification of unpublished evidence is challenging.

A final [strength of evidence](#) grade for each evidence statement will be assigned by evaluating and weighing the combined results of the above domains. We will differentiate an overall grade of high, moderate, low, or insufficient according to a four-level scale:

- High: We are very confident that the estimate of effect lies close to the true effect for this outcome. The body of evidence has few or no deficiencies. We believe that the findings are stable (i.e., another study would not change the conclusions).
- Moderate: We are moderately confident that the estimate of effect lies close to the true effect for this outcome. The body of evidence has some deficiencies. We believe that the findings are likely to be stable, but some doubt remains.
- Low: We have limited confidence that the estimate of effect lies close to the true effect for this outcome. The body of evidence has major or numerous deficiencies (or both). We believe that additional evidence is needed before concluding either that the findings are stable or that the estimate of effect is close to the true effect.
- Insufficient: We have no evidence, we are unable to estimate an effect, or we have no confidence in the estimate of effect for this outcome. No evidence is available, or the body of evidence has unacceptable deficiencies, precluding reaching a conclusion.

Summary tables will include reasons for downgrading or upgrading the strength of evidence. The strength of evidence assessment will document uncertainty and communicate our confidence in the evidence statements that can be drawn from the literature.

Use of Artificial Intelligence and/or Machine Learning

All citations retrieved by the literature searches will be screened by at least one human literature reviewer and a DistillerSR software machine learning algorithm trained by the human reviewers to ensure that no relevant citation will be missed. Any citations identified as potentially relevant by the algorithm that have not been selected for full text publication review will be rescreened for relevance by an independent literature reviewer.

V. References

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VI. Definition of Terms

ADHD	Attention-deficit/hyperactivity disorder
EPC	Evidence-based Practice Center
FDA	U.S. Food and Drug Administration

VII. Summary of Protocol Amendments

If the EPC needs to amend the protocol, provide a numbered list of versions with the date of

posting, which will be hyperlinked to previous versions; and a table with the date of each amendment, description of the change, and the rationale. Changes will be incorporated into the protocol.

Table 1. Summary of Protocol Amendments

Date	Section	Original Protocol	Revised Protocol	Rationale

VIII. Previous Versions of the Protocol

None.

IX. Technical Experts

Technical Experts constitute a multi-disciplinary group of clinical, content, and methodological experts who provide input in defining populations, interventions, comparisons, or outcomes and identify relevant studies or databases to search. The Technical Expert Panel is selected to provide broad expertise and perspectives specific to the topic under development. Divergent and conflicting opinions are common and perceived as healthy scientific discourse that fosters a thoughtful, relevant systematic review. Therefore, study questions, design, and methodological approaches do not necessarily represent the views of individual technical and content experts.

Technical Experts provide information to the EPC to identify literature search strategies and suggest approaches to specific issues as requested by the EPC. Technical Experts do not do analysis of any kind; neither do they contribute to the writing of the report. They do not review the report, except as given the opportunity to do so through the peer or public review mechanism.

Members of the TEP must disclose any financial conflicts of interest greater than \$5,000 and any other relevant business or professional conflicts of interest. Because of their unique clinical or content expertise, individuals are invited to serve as Technical Experts and those who present with potential conflicts may be retained. The AHRQ TOO and the EPC work to balance, manage, or mitigate any potential conflicts of interest identified.

X. Peer Reviewers

Peer reviewers are invited to provide written comments on the draft report based on their clinical, content, or methodological expertise. The EPC considers all peer review comments on the draft report in preparing the final report. Peer reviewers do not participate in writing or editing of the final report or other products. The final report does not necessarily represent the views of individual reviewers.

The EPC will complete a disposition of all peer review comments. The disposition of comments for systematic reviews and technical briefs will be published 3 months after publication of the evidence report.

Potential peer reviewers must disclose any financial conflicts of interest greater than \$5,000 and any other relevant business or professional conflicts of interest. Invited peer reviewers with any financial conflict of interest greater than \$5,000 will be disqualified from peer review. Peer reviewers who disclose potential business or professional conflicts of interest can submit comments on draft reports through the public comment mechanism.

XI. EPC Team Disclosures

EPC core team members must disclose any financial conflicts of interest greater than \$1,000 and any other relevant business or professional conflicts of interest. Direct financial conflicts of interest that cumulatively total more than \$1,000 will usually disqualify an EPC core team investigator.

XII. Role of the Funder

This project was funded under Contract No. 75Q80120D00009 from the Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services with support from an interagency agreement with the U.S. Food and Drug Administration (FDA) of the U.S. Department of Health and Human Services. The AHRQ Task Order Officer reviewed the EPC response to contract deliverables for adherence to contract requirements and quality. The authors of this report are responsible for its content. Statements in the report should not be construed as endorsement by either the Agency for Healthcare Research and Quality, the FDA, or the U.S. Department of Health and Human Services, or the U.S. government. As requested, FDA officers provided nonbinding feedback and technical support to the evidence review team. This review is intended to help inform clinical decision making by clinicians and patients. The review is not intended to be used for the purposes of restricting, limiting, delaying, or denying coverage for or access to a diagnostic tool for a legitimate medical purpose by an individual practitioner acting in the usual course of professional practice. The views expressed in this review are those of the authors and do not necessarily reflect the position or policy of the FDA.

XIII. Registration

This protocol will be registered in the international prospective register of systematic reviews (PROSPERO).

Appendix

Draft Search Strategy

PubMed

"Attention Deficit Disorder with Hyperactivity"[Mesh] OR "attention deficit hyperactivity disorder"[tiab] OR "ADHD"[tiab] OR "attention deficit disorder"[tiab])

AND

Adult[MESH] OR Aged[MESH] OR Middle Aged[MESH] OR Young Adult[MESH] OR Adult[Title/Abstract] OR Adults[Title/Abstract]

AND

"Attention Deficit and Disruptive Behavior Disorders/diagnosis"[Majr] OR mass screening[mesh] OR questionnaires[mesh] OR Interviews as Topic[Mesh] OR Psychometrics[Mesh] OR Psychiatric Status Rating Scales[Mesh] OR diagnosis[mesh:noexp] OR "Diagnostic Techniques and Procedures"[Mesh] OR "Referral and Consultation"[Mesh] OR questionnaire[tiab] OR questionnaires[tiab] OR screening[tiab] OR screen[tiab] OR scale[tiab] OR instrument[tiab] OR instruments[tiab] OR interview[tiab] OR interviews[tiab] OR diagnosis[tiab] OR diagnostic[tiab] OR diagnosed[tiab] OR Measure [tiab] OR test[tiab] OR tests[tiab] OR testing[tiab] OR "Attention Deficit Disorder with Hyperactivity/diagnostic imaging"[Majr] OR (((("Adaptive Behavior Assessment System"[Title/Abstract] OR "ABAS-3"[Title/Abstract] OR "Advanced Clinical Solutions"[Title/Abstract] OR "Word Choice Test"[Title/Abstract] OR "Test of Premorbid Functioning"[Title/Abstract] OR "Social Cognition"[Title/Abstract] OR "Beck Anxiety Inventory"[Title/Abstract] OR "BAI"[Title/Abstract] OR "Beck Depression Inventory"[Title/Abstract] OR "BDI-2"[Title/Abstract] OR "Behavioral Assessment System for Children"[Title/Abstract] OR "Self-Report of Personality"[Title/Abstract] OR "BASC-3 SRP Adolescent"[Title/Abstract] OR "Behavioral Assessment System for Children"[Title/Abstract] OR "Parent Rating Scales"[Title/Abstract] OR "BASC-3 PRS Adolescent"[Title/Abstract] OR "BASC-3 SRP College"[Title/Abstract] OR "Teacher Rating Scales"[Title/Abstract] OR "BASC-3 TRS Adolescent"[Title/Abstract] OR "Brown Executive Function/Attention Scales"[Title/Abstract] OR "Brown EF/A Self"[Title/Abstract] OR "California Verbal Learning Test"[Title/Abstract] OR "CVLT-3"[Title/Abstract] OR "Standard Form California Verbal" "CVLT-3 Brief"[Title/Abstract] OR "California Verbal Learning Test"[Title/Abstract] OR "CVLT-C"[Title/Abstract] OR "Childhood Autism Rating Scale"[Title/Abstract] OR "CARS-2"[Title/Abstract] OR "Childhood Autism Rating Scale"[Title/Abstract] OR "High-Functioning Version"[Title/Abstract] OR "CARS-2 HF"[Title/Abstract] OR "Clinical Evaluation of Language Fundamentals"[Title/Abstract] OR "CELF-5"[Title/Abstract] OR "Comprehensive Executive Function Inventory"[Title/Abstract] OR "CEFI Adult Observer"[Title/Abstract] OR "Comprehensive Executive Function Inventory"[Title/Abstract] OR "CEFI Adult Self-Report"[Title/Abstract] OR "Conners' Adult ADHD Diagnostic Interview for DSM-IV"[Title/Abstract] OR "CAADID Part 1"[Title/Abstract] OR "CAADID Part 2"[Title/Abstract] OR "CAARS-O:L"[Title/Abstract] OR "CAARS-S:L"[Title/Abstract] OR "CAARS-2 Observer"[Title/Abstract] OR "Conners' Adult ADHD Rating Scales"[Title/Abstract] OR "CAARS-2 Self-Report"[Title/Abstract] OR "Delis-Kaplan Executive Function System"[Title/Abstract] OR "D-KEFS"[Title/Abstract] OR "Dot Counting Test"[Title/Abstract] OR "Grooved Pegboard Test Kaufman Test of Educational Achievement"[Title/Abstract] OR "KTEA-3"[Title/Abstract] OR "Neuropsychological Assessment Battery"[Title/Abstract] OR "Attention, Language, Memory, Spatial, and Executive Functions

Modules"[Title/Abstract] OR "NIH Executive Abilities–Measures and Instruments for Neurobehavioral Evaluation and Re-search"[Title/Abstract] OR "NIH EXAMINER"[Title/Abstract] OR "Personality Assessment Inventory"[Title/Abstract] OR "PROMIS Sleep Assessments Pediatric Parent Proxy"[Title/Abstract] OR "Repeatable Battery for the Assessment of Neuropsychological Status"[Title/Abstract] OR "RBANS"[Title/Abstract] OR "Rey-Osterrieth Complex"[Title/Abstract] OR "Wechsler Abbreviated Scale of Intelligence"[Title/Abstract] OR "WASI-2"[Title/Abstract] OR "Wechsler Adult Intelligence Scale"[Title/Abstract] OR "WAIS-4"[Title/Abstract] OR "WAIS-IV"[Title/Abstract] OR "Wechsler Individual Achievement Test"[Title/Abstract] OR "WIAT-4"[Title/Abstract] OR "Wechsler Intelligence Scale "[Title/Abstract] OR "Wechsler Memory Scale"[Title/Abstract] OR "WMS-4"[Title/Abstract] OR "Wide Range Achievement Test"[Title/Abstract] OR "WRAT-5"[Title/Abstract] OR "Adult ADHD Rating Scale"[Title/Abstract] OR "ADHD-RS"[Title/Abstract] OR "Brown ADD scales"[Title/Abstract] OR "Continuous Performance Tests"[Title/Abstract] OR "Conners CPT"[Title/Abstract] OR "QB Test"[Title/Abstract] OR "TOVA"[Title/Abstract] OR "Wender Utah Adult ADHD Scale"[Title/Abstract]))

AND

"Sensitivity and Specificity"[Mesh] OR "Diagnostic Errors"[Mesh] OR sensitivity[tiab] OR specificity[tiab] OR (accura*[tiab] AND (diagnos*[tiab] OR classif*[tiab])) OR "ROC curve"[tiab] OR "positive predictive value"[tiab] OR "negative predictive value"[tiab] OR "false positive"[tiab] OR "false negative"[tiab] OR "likelihood ratio"[tiab]

NOT

Editorial[ptyp] OR Letter[pt] OR Case Reports[pt] OR Comment[pt] address[pt] OR "autobiography"[pt] OR "bibliography"[pt] OR "biography"[pt] OR "case report"[tw] OR "case reports"[tw] OR "case series"[tw] OR "comment on"[All Fields] OR congress[pt] OR "dictionary"[pt] OR "directory"[pt] OR "festschrift"[pt] OR "historical article"[pt] OR lecture[pt] OR "legal case"[pt] OR "legislation"[pt] OR "news"[pt] OR "newspaper article"[pt] OR "patient education handout"[pt] OR "periodical index"[pt]

NOT

"animals"[mesh] NOT "humans"[mesh])

EMBASE

((('adaptive behavior assessment system':ti OR 'abas-3':ti OR 'advanced clinical solutions':ti OR 'word choice test':ti OR 'test of premorbid functioning':ti OR 'social cognition':ti OR 'beck anxiety inventory':ti OR 'bai':ti OR 'beck depression inventory':ti OR 'bdi-2':ti OR 'self-report of personality':ti OR 'basc-3 srp adolescent':ti OR 'behavioral assessment system for children':ti OR 'parent rating scales':ti OR 'basc-3 prs adolescent':ti OR 'basc-3 srp college':ti OR 'teacher rating scales':ti OR 'basc-3 trs adolescent':ti OR 'brown executive function/attention scales':ti OR 'brown ef/a self':ti OR 'california verbal learning test':ti OR 'cvlt-3':ti OR 'standard form california verbal':ti) AND 'cvlt-3 brief':ti OR 'california verbal learning test':ti OR 'cvlt-c':ti OR 'cars-2':ti OR 'childhood autism rating scale':ti OR 'high-functioning version':ti OR 'cars-2 hf':ti OR 'clinical evaluation of language fundamentals':ti OR 'celf-5':ti OR 'cefi adult observer':ti OR 'comprehensive executive function inventory':ti OR 'cefi adult self-report':ti OR 'conners adult adhd diagnostic interview for dsm-iv':ti OR 'caadid part 1':ti OR 'caadid part 2':ti OR 'caars–o:l':ti OR 'caars–s:l':ti OR 'caars-2 observer':ti OR 'conners adult adhd rating scales':ti OR 'caars-2 self-report':ti OR 'delis-kaplan executive function system':ti OR 'd-kefs':ti OR 'dot counting test':ti

OR 'grooved pegboard test kaufman test of educational achievement':ti OR 'ktea-3':ti OR 'nepsy-ii developmental neuropsychological battery':ti OR 'neuropsychological assessment battery':ti OR 'attention, language, memory, spatial,'(ti) AND 'executive functions modules':ti OR 'nih executive abilities-measures':ti) AND 'instruments for neurobehavioral evaluation':ti AND 'research':ti OR 'nih examiner':ti OR 'personality assessment inventory':ti OR 'promis sleep assessments pediatric parent proxy':ti OR 'repeatable battery for the assessment of neuropsychological status':ti OR 'rbans':ti OR 'rey-osterrieth complex':ti OR 'wechsler abbreviated scale of intelligence':ti OR 'wasi-2':ti OR 'wechsler adult intelligence scale':ti OR 'wais-4':ti OR 'wais-iv':ti OR 'wechsler individual achievement test':ti OR 'wiat-4':ti OR 'wechsler intelligence scale':ti OR 'wechsler memory scale':ti OR 'wms-4':ti OR 'wide range achievement test':ti OR 'wrat-5':ti OR 'adult adhd rating scale':ti OR 'adhd-rs':ti OR 'brown add scales':ti OR 'continuous performance tests':ti OR 'conners cpt':ti OR 'qb test':ti OR 'tova':ti OR 'wender utah adult adhd scale':ti OR 'diagnostic interview for adult adhd':ti

AND

"Attention Deficit Disorder with Hyperactivity" OR "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder")

OR

#1 'attention deficit disorder with hyperactivity':ab,ti OR 'attention deficit hyperactivity disorder':ab,ti OR 'adhd':ab,ti OR 'attention deficit disorder':ab,ti 61194

#2 ((adult:ab,ti OR aged:ab,ti OR middle:ab,ti) AND aged:ab,ti OR young:ab,ti) AND adult:ab,ti OR adult:ab,ti OR adults:ab,ti 2231374

#3 (((('attention deficit and disruptive behavior disorders/diagnosis':ab,ti OR mass:ab,ti) AND screening:ab,ti OR questionnaires:ab,ti OR interviews:ab,ti) AND as:ab,ti AND topic:ab,ti OR psychometrics:ab,ti OR psychiatric:ab,ti) AND status:ab,ti AND rating:ab,ti AND scales:ab,ti OR 'diagnostic techniques and procedures':ab,ti OR 'referral and consultation':ab,ti OR questionnaire:ab,ti OR questionnaires:ab,ti OR screening:ab,ti OR screen:ab,ti OR scale:ab,ti OR instrument:ab,ti OR instruments:ab,ti OR interview:ab,ti OR interviews:ab,ti OR diagnosis:ab,ti OR diagnostic:ab,ti OR diagnosed:ab,ti OR measure:ab,ti OR test:ab,ti OR tests:ab,ti OR testing:ab,ti OR 'attention deficit disorder with hyperactivity/diagnostic imaging':ab,ti 11386521

#4 'sensitivity and specificity':ab,ti OR 'diagnostic errors':ab,ti OR sensitivity:ab,ti OR specificity:ab,ti OR (accura*:ab,ti AND (diagnos*:ab,ti OR classif*:ab,ti)) OR 'roc curve':ab,ti OR 'positive predictive value':ab,ti OR 'negative predictive value':ab,ti OR 'false positive':ab,ti OR 'false negative':ab,ti OR 'likelihood ratio':ab,ti 2280552

#5 #1 AND #2 AND #3 AND #4 814

#6 #5 AND [humans]/lim 787

#7 #6 AND ([article]/lim OR [article in press]/lim) 509

APA PsycINFO

((title: ("Adaptive Behavior Assessment System") OR title: ("ABAS-3") OR title: ("Advanced Clinical Solutions") OR title: ("Word Choice Test") OR title: ("Test of Premorbid Functioning") OR title: ("Social Cognition") OR title: ("Beck Anxiety Inventory") OR title: ("BAI") OR title: ("Beck Depression Inventory") OR title: ("BDI-2") OR title: ("Behavioral Assessment System for Children") OR title: ("Self-Report of Personality") OR title: ("BASC-3 SRP Adolescent") OR title: ("Behavioral Assessment System for Children") OR title: ("Parent Rating Scales") OR title: ("BASC-3 PRS Adolescent") OR title: ("BASC-3 SRP College") OR title: ("Teacher Rating

Scales") OR title: ("BASC-3 TRS Adolescent") OR title: ("Brown Executive Function/Attention Scales") OR title: ("Brown EF/A Self") OR title: ("California Verbal Learning Test") OR title: ("CVLT-3") OR title: ("Standard Form California Verbal" "CVLT-3 Brief") OR title: ("California Verbal Learning Test") OR title: ("CVLT-C") OR title: ("Childhood Autism Rating Scale") OR title: ("CARS-2") OR title: ("Childhood Autism Rating Scale") OR title: ("High-Functioning Version") OR title: ("CARS-2 HF") OR title: ("Clinical Evaluation of Language Fundamentals") OR title: ("CELF-5") OR title: ("Comprehensive Executive Function Inventory") OR title: ("CEFI Adult Observer") OR title: ("Comprehensive Executive Function Inventory") OR title: ("CEFI Adult Self-Report") OR title: ("Conners' Adult ADHD Diagnostic Interview for DSM-IV") OR title: ("CAADID Part 1") OR title: ("CAADID Part 2") OR title: ("CAARS-O:L") OR title: ("CAARS-S:L") OR title: ("CAARS-2 Observer") OR title: ("Conners' Adult ADHD Rating Scales") OR title: ("CAARS-2 Self-Report") OR title: ("Delis-Kaplan Executive Function System") OR title: ("D-KEFS") OR title: ("Dot Counting Test") OR title: ("Grooved Pegboard Test Kaufman Test of Educational Achievement") OR title: ("KTEA-3") OR title: ("NEPSY-II Developmental Neuropsychological Battery") OR title: ("Neuropsychological Assessment Battery") OR title: ("Attention, Language, Memory, Spatial, and Executive Functions Modules") OR title: ("NIH Executive Abilities—Measures and Instruments for Neurobehavioral Evaluation and Research") OR title: ("NIH EXAMINER") OR title: ("Personality Assessment Inventory") OR title: ("PROMIS Sleep Assessments Pediatric Parent Proxy") OR title: ("Repeatable Battery for the Assessment of Neuropsychological Status") OR title: ("RBANS") OR title: ("Rey-Osterrieth Complex") OR title: ("Wechsler Abbreviated Scale of Intelligence") OR title: ("WASI-2") OR title: ("Wechsler Adult Intelligence Scale") OR title: ("WAIS-4") OR title: ("WAIS-IV") OR title: ("Wechsler Individual Achievement Test") OR title: ("WIAT-4") OR title: ("Wechsler Intelligence Scale ") OR title: ("Wechsler Memory Scale") OR title: ("WMS-4") OR title: ("Wide Range Achievement Test") OR title: ("WRAT-5") OR title: ("Adult ADHD Rating Scale") OR title: ("ADHD-RS") OR title: ("Brown ADD scales") OR title: ("Continuous Performance Tests") OR title: ("Conners CPT") OR title: ("QB Test") OR title: ("TOVA") OR title: ("Wender Utah Adult ADHD Scale") OR title: ("diagnostic interview for Adult ADHD")))

AND

((title: ("Attention Deficit Disorder with Hyperactivity") OR title: ("attention deficit hyperactivity disorder") OR title: ("ADHD") OR title: ("attention deficit disorder")) OR (abstract: ("Attention Deficit Disorder with Hyperactivity") OR abstract: ("attention deficit hyperactivity disorder") OR abstract: ("ADHD") OR abstract: ("attention deficit disorder"))))

OR

((title: ("Attention Deficit Disorder with Hyperactivity") OR title: ("attention deficit hyperactivity disorder") OR title: ("ADHD") OR title: ("attention deficit disorder")) OR (abstract: ("Attention Deficit Disorder with Hyperactivity") OR abstract: ("attention deficit hyperactivity disorder") OR abstract: ("ADHD") OR abstract: ("attention deficit disorder")))

AND ((title: (Adult) OR title: (Aged) OR title: (Middle Aged) OR title: (Young Adult) OR title: (Adult) OR title: (Adults)) OR (abstract: (Adult) OR abstract: (Aged) OR abstract: (Middle Aged) OR abstract: (Young Adult) OR abstract: (Adult) OR abstract: (Adults))) AND ((title: ("Attention Deficit and Disruptive Behavior Disorders/diagnosis") OR title: (mass screening) OR title: (questionnaires) OR title: (Interviews as Topic) OR title: (Psychometrics) OR title: (Psychiatric Status Rating Scales) OR title: (diagnosis) OR title: ("Diagnostic Techniques and Procedures") OR title: ("Referral and Consultation") OR title: (questionnaire) OR title:

(questionnaires) OR title: (screening) OR title: (screen) OR title: (scale) OR title: (instrument) OR title: (instruments) OR title: (interview) OR title: (interviews) OR title: (diagnosis) OR title: (diagnostic) OR title: (diagnosed) OR title: (Measure) OR title: (test) OR title: (tests) OR title: (testing) OR title: ("Attention Deficit Disorder with Hyperactivity/diagnostic imaging")) OR (abstract: ("Attention Deficit and Disruptive Behavior Disorders/diagnosis")) OR abstract: (mass screening) OR abstract: (questionnaires) OR abstract: (Interviews as Topic) OR abstract: (Psychometrics) OR abstract: (Psychiatric Status Rating Scales) OR abstract: (diagnosis) OR abstract: ("Diagnostic Techniques and Procedures") OR abstract: ("Referral and Consultation") OR abstract: (questionnaire) OR abstract: (questionnaires) OR abstract: (screening) OR abstract: (screen) OR abstract: (scale) OR abstract: (instrument) OR abstract: (instruments) OR abstract: (interview) OR abstract: (interviews) OR abstract: (diagnosis) OR abstract: (diagnostic) OR abstract: (diagnosed) OR abstract: (Measure) OR abstract: (test) OR abstract: (tests) OR abstract: (testing) OR abstract: ("Attention Deficit Disorder with Hyperactivity/diagnostic imaging")) AND ((title: ("Sensitivity and Specificity") OR title: ("Diagnostic Errors") OR title: (sensitivity) OR title: (specificity) OR (title: (accura*) AND (title: (diagnos*) OR title: (classif*))) OR title: ("ROC curve") OR title: ("positive predictive value") OR title: ("negative predictive value") OR title: ("false positive") OR title: ("false negative") OR title: ("likelihood ratio"))) OR (abstract: ("Sensitivity and Specificity") OR abstract: ("Diagnostic Errors") OR abstract: (sensitivity) OR abstract: (specificity) OR (abstract: (accura*) AND (abstract: (diagnos*) OR abstract: (classif*))) OR abstract: ("ROC curve") OR abstract: ("positive predictive value") OR abstract: ("negative predictive value") OR abstract: ("false positive") OR abstract: ("false negative") OR abstract: ("likelihood ratio")))) AND Population Group: Human AND Publication Type: Peer Reviewed Journal)

Cochrane Database of Systematic Reviews (CDSR)

(#1 ("Adaptive Behavior Assessment System" OR "ABAS-3" OR "Advanced Clinical Solutions" OR "Word Choice Test" OR "Test of Premorbid Functioning" OR "Social Cognition" OR "Beck Anxiety Inventory" OR "BAI" OR "Beck Depression Inventory" OR "BDI-2" OR "Behavioral Assessment System for Children" OR "Self-Report of Personality" OR "BASC-3 SRP Adolescent" OR "Behavioral Assessment System for Children" OR "Parent Rating Scales" OR "BASC-3 PRS Adolescent" OR "BASC-3 SRP College" OR "Teacher Rating Scales" OR "BASC-3 TRS Adolescent" OR "Brown Executive Function/Attention Scales" OR "Brown EF/A Self" OR "California Verbal Learning Test" OR "CVLT-3" OR "Standard Form California Verbal" OR "CVLT-3 Brief" OR "California Verbal Learning Test" OR "CVLT-C" OR "Childhood Autism Rating Scale" OR "CARS-2" OR "Childhood Autism Rating Scale" OR "High-Functioning Version" OR "CARS-2 HF" OR "Clinical Evaluation of Language Fundamentals" OR "CELF-5" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Observer" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Self-Report" OR "Conners' Adult ADHD Diagnostic Interview for DSM-IV" OR "CAADID Part 1" OR "CAADID Part 2" OR "CAARS-O:L" OR "CAARS-S:L" OR "CAARS-2 Observer" OR "Conners' Adult ADHD Rating Scales" OR "CAARS-2 Self-Report" OR "Delis-Kaplan Executive Function System" OR "D-KEFS" OR "Dot Counting Test" OR "Grooved Pegboard Test Kaufman Test of Educational Achievement" OR "KTEA-3" OR "NEPSY-II Developmental Neuropsychological Battery" OR "Neuropsychological Assessment Battery" OR "Attention, Language, Memory, Spatial, and Ex-ecutive Functions Modules" OR "NIH Executive Abilities-Measures and Instruments for Neurobehavioral Evaluation and Re-search" OR "NIH

EXAMINER" OR "Personality Assessment Inventory" OR "PROMIS Sleep Assessments Pediatric Parent Proxy" OR "Repeatable Battery for the Assessment of Neuropsychological Status" OR "RBANS" OR "Rey-Osterrieth Complex" OR "Wechsler Abbreviated Scale of Intelligence" OR "WASI-2" OR "Wechsler Adult Intelligence Scale" OR "WAIS-4" OR "WAIS-IV" OR "Wechsler Individual Achievement Test" OR "WIAT-4" OR "Wechsler Intelligence Scale" OR "Wechsler Memory Scale" OR "WMS-4" OR "Wide Range Achievement Test" OR "WRAT-5" OR "Adult ADHD Rating Scale" OR "ADHD-RS" OR "Brown ADD scales" OR "Continuous Performance Tests" OR "Conners CPT" OR "QB Test" OR "TOVA" OR "Wender Utah Adult ADHD Scale" OR "diagnostic interview for Adult ADHD"):ti,ab,kw (Word variations have been searched)

#2 ("Attention Deficit Disorder with Hyperactivity" OR "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder"):ti,ab,kw (Word variations have been searched)

#3 #1 AND #2)

OR

(#1

MeSH descriptor: [Attention Deficit Disorder with Hyperactivity] explode all trees

#2

("attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder"):ti,ab,kw (Word variations have been searched)

#3

#1 OR #2

#4

MeSH descriptor: [Adult] explode all trees

#5

MeSH descriptor: [Aged] in all MeSH products

#6

MeSH descriptor: [Middle Aged] explode all trees

#7

(Young Adult OR Adult OR Adults):ti,ab,kw

(Word variations have been searched)

#8

#4 OR #5 OR #6 OR #7

#9

MeSH descriptor: [Mass Screening] explode all trees

#10

MeSH descriptor:[Surveys and Questionnaires] explode all trees

#11

MeSH descriptor: [Interviews as Topic] explode all trees

#12

MeSH descriptor: [Psychometrics] explode all trees

#13

MeSH descriptor: [Psychiatric Status Rating Scales] explode all trees

#14

MeSH descriptor: [Diagnosis] this term only

#15

MeSH descriptor: [Diagnostic Techniques and Procedures] explode all trees

#16

MeSH descriptor: [Referral and Consultation] explode all trees

#17

("Attention Deficit and Disruptive Behavior Disorders" AND diagnosis):ti,ab,kw

(Word variations have been searched)

#18

("Attention Deficit and Disruptive Behavior Disorders" AND "diagnostic imaging"):ti,ab,kw

(Word variations have been searched)

#19

(questionnaire OR questionnaires OR screening OR screen OR scale OR instrument OR instruments OR interview OR interviews OR diagnosis OR diagnostic OR diagnosed OR Measure OR test OR tests OR testing):ti,ab,kw

#20

#9 OR #10 OR #11 OR #12 OR #13 OR #14 OR #15 OR #16 OR #17 OR #18 OR #19

#21

("Sensitivity and Specificity" OR "Diagnostic Errors" OR sensitivity OR specificity OR (accura* AND (diagnos* OR classif*)) OR "ROC curve" OR "positive predictive value" OR "negative predictive value" OR "false positive" OR "false negative" OR "likelihood ratio"):ti,ab,kw

#22

#3 AND #8 AND #20 AND #21)

Campbell Collaboration

("Adaptive Behavior Assessment System" OR "ABAS-3" OR "Advanced Clinical Solutions" OR "Word Choice Test" OR "Test of Premorbid Functioning" OR "Social Cognition" OR "Beck Anxiety Inventory" OR "BAI" OR "Beck Depression Inventory" OR "BDI-2" OR "Behavioral Assessment System for Children" OR "Self-Report of Personality" OR "BASC-3 SRP Adolescent" OR "Behavioral Assessment System for Children" OR "Parent Rating Scales" OR "BASC-3 PRS Adolescent" OR "BASC-3 SRP College" OR "Teacher Rating Scales" OR "BASC-3 TRS Adolescent" OR "Brown Executive Function/Attention Scales" OR "Brown EF/A Self" OR "California Verbal Learning Test" OR "CVLT-3" OR "Standard Form California Verbal" OR "CVLT-3 Brief" OR "California Verbal Learning Test" OR "CVLT-C" OR "Childhood Autism Rating Scale" OR "CARS-2" OR "Childhood Autism Rating Scale" OR "High-Functioning Version" OR "CARS-2 HF" OR "Clinical Evaluation of Language Fundamentals" OR "CELF-5" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Observer" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Self-Report" OR "Conners' Adult ADHD Diagnostic Interview for DSM-IV" OR "CAADID Part 1" OR "CAADID Part 2" OR "CAARS-O:L" OR "CAARS-S:L" OR "CAARS-2 Observer" OR "Conners' Adult ADHD Rating Scales" OR "CAARS-2 Self-Report" OR "Delis-Kaplan Executive Function System" OR "D-KEFS" OR "Dot Counting Test" OR "Grooved Pegboard Test Kaufman Test of Educational Achievement" OR "KTEA-3" OR "NEPSY-II Developmental Neuropsychological Battery" OR "Neuropsychological Assessment Battery" OR "Attention, Language, Memory, Spatial, and Executive Functions Modules" OR "NIH Executive Abilities--Measures and Instruments for Neurobehavioral Evaluation and Re-search" OR "NIH EXAMINER" OR "Personality Assessment Inventory" OR "PROMIS Sleep Assessments Pediatric Parent Proxy" OR "Repeatable Battery for the Assessment of Neuropsychological

Status" OR "RBANS" OR "Rey-Osterrieth Complex" OR "Wechsler Abbreviated Scale of Intelligence" OR "WASI-2" OR "Wechsler Adult Intelligence Scale" OR "WAIS-4" OR "WAIS-IV" OR "Wechsler Individual Achievement Test" OR "WIAT-4" OR "Wechsler Intelligence Scale" OR "Wechsler Memory Scale" OR "WMS-4" OR "Wide Range Achievement Test" OR "WRAT-5" OR "Adult ADHD Rating Scale" OR "ADHD-RS" OR "Brown ADD scales" OR "Continuous Performance Tests" OR "Conners CPT" OR "QB Test" OR "TOVA" OR "Wender Utah Adult ADHD Scale" OR "diagnostic interview for Adult ADHD")
OR
("Attention Deficit Disorder with Hyperactivity" OR "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder")

PROSPERO (<https://www.crd.york.ac.uk/prospero/>)

#1 ("Adaptive Behavior Assessment System" OR "ABAS-3" OR "Advanced Clinical Solutions" OR "Word Choice Test" OR "Test of Premorbid Functioning" OR "Social Cognition" OR "Beck Anxiety Inventory" OR "BAI" OR "Beck Depression Inventory" OR "BDI-2" OR "Behavioral Assessment System for Children" OR "Self-Report of Personality" OR "BASC-3 SRP Adolescent" OR "Behavioral Assessment System for Children" OR "Parent Rating Scales" OR "BASC-3 PRS Adolescent" OR "BASC-3 SRP College" OR "Teacher Rating Scales" OR "BASC-3 TRS Adolescent" OR "Brown Executive Function/Attention Scales" OR "Brown EF/A Self" OR "California Verbal Learning Test" OR "CVLT-3" OR "Standard Form California Verbal" OR "CVLT-3 Brief" OR "California Verbal Learning Test" OR "CVLT-C" OR "Childhood Autism Rating Scale" OR "CARS-2" OR "Childhood Autism Rating Scale" OR "High-Functioning Version" OR "CARS-2 HF" OR "Clinical Evaluation of Language Fundamentals" OR "CELF-5" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Observer");TI

#2 ("Comprehensive Executive Function Inventory" OR "CEFI Adult Self-Report" OR "Conners Adult ADHD Diagnostic Interview for DSM-IV" OR "CAADID Part 1" OR "CAADID Part 2" OR "CAARS?OL" OR "CAARS?SL" OR "CAARS-2 Observer" OR "Conners Adult ADHD Rating Scales" OR "CAARS-2 Self-Report" OR "Delis-Kaplan Executive Function System" OR "D-KEFS" OR "Dot Counting Test" OR "Grooved Pegboard Test Kaufman Test of Educational Achievement" OR "KTEA-3" OR "NEPSY-II Developmental Neuropsychological Battery" OR "Neuropsychological Assessment Battery" OR "Attention, Language, Memory, Spatial, and Ex- ecutive Functions Modules" OR "NIH Executive Abilities?Measures and Instruments for Neurobehavioral Evaluation and Re-search");TI

#3 ("NIH EXAMINER" OR "Personality Assessment Inventory" OR "PROMIS Sleep Assessments Pediatric Parent Proxy" OR "Repeatable Battery for the Assessment of Neuropsychological Status" OR "RBANS" OR "Rey-Osterrieth Complex" OR "Wechsler Abbreviated Scale of Intelligence" OR "WASI-2" OR "Wechsler Adult Intelligence Scale" OR "WAIS-4" OR "WAIS-IV" OR "Wechsler Individual Achievement Test" OR "WIAT-4" OR "Wechsler Intelligence Scale" OR "Wechsler Memory Scale" OR "WMS-4" OR "Wide Range Achievement Test" OR "WRAT-5" OR "Adult ADHD Rating Scale" OR "ADHD-RS" OR "Brown ADD scales" OR "Continuous Performance Tests" OR "Conners CPT" OR "QB Test" OR "TOVA" OR "Wender Utah Adult ADHD Scale" OR "diagnostic interview for Adult ADHD");TI

#4 #3 OR #2 OR #1

#5 (MeSH DESCRIPTOR Attention Deficit Disorder with Hyperactivity EXPLODE ALL

TREES):TI

#6 MeSH DESCRIPTOR Attention Deficit Disorder with Hyperactivity EXPLODE ALL TREES

#7 ("Attention Deficit Disorder with Hyperactivity" OR "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder"):TI

#8 #7 OR #6

#9 #8 AND #4)

OR

#1 MeSH DESCRIPTOR Attention Deficit Disorder with Hyperactivity EXPLODE ALL TREES

#2 "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder"

#3 #2 OR #1

#4 MeSH DESCRIPTOR Aged, 80 and over EXPLODE ALL TREES

#5 MeSH DESCRIPTOR Adult EXPLODE ALL TREES

#6 MeSH DESCRIPTOR Middle Aged EXPLODE ALL TREES

#7 Young Adult OR Adult OR Adults

#8 #4 OR #5 OR #6 OR #7

#9 MeSH DESCRIPTOR Mass Screening EXPLODE ALL TREES

#10 "interviews as topics"

#11 psychometrics

#12 MeSH DESCRIPTOR Psychiatric Status Rating Scales EXPLODE ALL TREES

#13 MeSH DESCRIPTOR Diagnosis EXPLODE ALL TREES

#14 MeSH DESCRIPTOR diagnosis EXPLODE ALL TREES

#15 MeSH DESCRIPTOR diagnosis

#16 MeSH DESCRIPTOR Diagnostic Techniques and Procedures EXPLODE ALL TREES

#17 MeSH DESCRIPTOR Referral and Consultation EXPLODE ALL TREES

#18 attention deficit and disruptive behavior disorders

#19 "attention deficit and disruptive behavior disorders" AND diagnosis

#20 "attention deficit and disruptive behavior disorders" AND "diagnostic imaging"

#21 questionnaire OR questionnaires OR screening OR screen OR scale OR instrument OR instruments OR interview OR interviews OR diagnosis OR diagnostic OR diagnosed OR Measure OR test OR tests OR testing

#22 #9 OR #10 OR #11 OR #12 OR #15 OR #16 OR #17 OR #19 OR #20 OR #21

#23 "Sensitivity and Specificity" OR "Diagnostic Errors" OR sensitivity OR specificity OR (accura* AND (diagnos* OR classif*)) OR "ROC curve" OR "positive predictive value" OR "negative predictive value" OR "false positive" OR "false negative" OR "likelihood ratio"

#24 #3 AND #8 AND #22 AND #23

ECRI Guidelines Trust <https://guidelines.ecri.org/>

("Adaptive Behavior Assessment System" OR "ABAS-3" OR "Advanced Clinical Solutions" OR "Word Choice Test" OR "Test of Premorbid Functioning" OR "Social Cognition" OR "Beck Anxiety Inventory" OR "BAI" OR "Beck Depression Inventory" OR "BDI-2" OR "Behavioral Assessment System for Children" OR "Self-Report of Personality" OR "BASC-3 SRP Adolescent" OR "Behavioral Assessment System for Children" OR "Parent Rating Scales" OR

"BASC-3 PRS Adolescent" OR "BASC-3 SRP College" OR "Teacher Rating Scales" OR "BASC-3 TRS Adolescent" OR "Brown Executive Function/Attention Scales" OR "Brown EF/A Self" OR "California Verbal Learning Test" OR "CVLT-3" OR "Standard Form California Verbal" OR "CVLT-3 Brief" OR "California Verbal Learning Test" OR "CVLT-C" OR "Childhood Autism Rating Scale" OR "CARS-2" OR "Childhood Autism Rating Scale" OR "High-Functioning Version" OR "CARS-2 HF" OR "Clinical Evaluation of Language Fundamentals" OR "CELF-5" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Observer" OR "Comprehensive Executive Function Inventory" OR "CEFI Adult Self-Report" OR "Conners' Adult ADHD Diagnostic Interview for DSM-IV" OR "CAADID Part 1" OR "CAADID Part 2" OR "CAARS-O:L" OR "CAARS-S:L" OR "CAARS-2 Observer" OR "Conners' Adult ADHD Rating Scales" OR "CAARS-2 Self-Report" OR "Delis-Kaplan Executive Function System" OR "D-KEFS" OR "Dot Counting Test" OR "Grooved Pegboard Test Kaufman Test of Educational Achievement" OR "KTEA-3" OR "NEPSY-II Developmental Neuropsychological Battery" OR "Neuropsychological Assessment Battery" OR "Attention, Language, Memory, Spatial, and Executive Functions Modules" OR "NIH Executive Abilities–Measures and Instruments for Neurobehavioral Evaluation and Re-search" OR "NIH EXAMINER" OR "Personality Assessment Inventory" OR "PROMIS Sleep Assessments Pediatric Parent Proxy" OR "Repeatable Battery for the Assessment of Neuropsychological Status" OR "RBANS" OR "Rey-Osterrieth Complex" OR "Wechsler Abbreviated Scale of Intelligence" OR "WASI-2" OR "Wechsler Adult Intelligence Scale" OR "WAIS-4" OR "WAIS-IV" OR "Wechsler Individual Achievement Test" OR "WIAT-4" OR "Wechsler Intelligence Scale" OR "Wechsler Memory Scale" OR "WMS-4" OR "Wide Range Achievement Test" OR "WRAT-5" OR "Adult ADHD Rating Scale" OR "ADHD-RS" OR "Brown ADD scales" OR "Continuous Performance Tests" OR "Conners CPT" OR "QB Test" OR "TOVA" OR "Wender Utah Adult ADHD Scale" OR "diagnostic interview for Adult ADHD")

OR

("Attention Deficit Disorder with Hyperactivity" OR "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder")

FILTER: Patient Age

Adolescent (13 to 18 years), Adult (19 to 44 years), Middle Age(45 to 64 years), Aged(65 to 79 years), Aged (80 and over)

Guidelines International Network Library (G-I-N, <https://guidelines.ebmportal.com/>)

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ClinicalKey

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OR

("Attention Deficit Disorder with Hyperactivity" OR "attention deficit hyperactivity disorder" OR "ADHD" OR "attention deficit disorder"

FILTERS: Journal Articles, Guidelines)