Autism Spectrum Disorder (DSM 5.0)¹ – Parent Version

ASD Diagnosis

- Meets all 3 Social Communication Deficits criteria and at least 2 Repetitive Behaviors criteria
- Symptoms are present in early childhood (may not be noticeable until social demands exceed capacity)
- Symptoms cause significant functional impairment

- Severity level is determined for each area (Social Communication Deficits, Repetitive Behaviors)

Social Communication Deficits: Persistent deficits in social communication and interaction across multiple contexts)

Criteria	Severity Levels
❖Deficits in social-emotional reciprocity	
Does not show or point out objects of interest	
 Has difficulty sharing pleasure, interests, emotions 	
Has difficulty maintaining "back and forth" interactions	
or conversations with others	
 Has one-sided exchanges, talks "at" rather than "with" others 	
Has difficulty initiating a social interaction	Level 3 – requires very substantial support
 Has difficulty responding to social overtures of others; 	Severe deficits in verbal and nonverbal
does best when interactions are "on his/her terms"	social communication skills; severe functional impairment with very limited
	initiation of social interaction and minimal
 Deficits in nonverbal communicative behaviors used for social interaction 	response to social overtures from others.
Has poor eye contact, especially when others request	Level 2 – requires substantial support
attention; may be better on his/her own terms	Marked deficits in verbal and nonverbal
Has blank facial expression. May direct limited	social communication skills; even with
expressions, like smiles, to self	supports in place, functional impairments
 Turns away from others during interactions Has limited social use of gestures, such as pointing to 	are apparent; limited initiation of social
express interest	interaction and reduced or abnormal
Has poor integration of verbal and nonverbal	responses to social overtures from others.
communication	La aldonia Cara a sand
Has difficulty noticing or understanding nonverbal	Level 1 – requires support Deficits in social communication skills;
communication of others	with supports in place, functional
	impairments are less noticeable; difficulty
❖Deficits in developing, maintaining, understanding	with initiation of social interaction and
relationships	atypical or unsuccessful responses to
Has difficulty making or keeping friends	social overtures from others.
Has no interest in peers, or avoids peer interactions	
 Has difficulty adjusting behavior to suit different social contexts 	
 For toddlers, lacks interest in shared social play (e.g., 	
peek-a-boo), lacks imaginative play (e.g., pretending)	
 For preschoolers, plays alone, has difficulty joining 	
group activities, engages in parallel play when peers	
are engaging in interactive or make-believe play	

¹ Includes former DSM IV diagnoses of: Autistic Disorder, Asperger's Disorder, Pervasive Developmental Disorder, Not Otherwise Specified (PDD-NOS)

 For older children, does not have an identified friend, chooses solitary activities, has difficulty making new friends, doesn't understand physical boundaries

friends, doesn't understand physical boundaries

Repetitive Behaviors: Restricted, repetitive patterns of behavior, interests, or activities

Criteria	Severity Levels
Stereotyped or repetitive motor movements, object use or	Octority Ectors
speech	
Paces or runs in circles	
Moves body into unusual positions	
Flaps hands, flicks fingers	
Spins or flips objects	
Lines up toys	
Use immediate echolalia (parroting)	
Uses jargon (speech-like babbling)	
Repeats lines from favorite videos	
Uses scripted or "canned" phrases	
Pronoun reversal (I/you)	
_	Level 3 – requires very substantial support
❖Insistence on sameness, inflexible adherence to routines,	Extreme difficulty coping with change and
or ritualized patterns of verbal or nonverbal behavior	great distress changing activities;
Needs to do things in a particular manner, order, or	restricted/repetitive behaviors markedly
sequence; becomes distraught if order is not followed o Examples of routines: schedules, eating,	interfere with functioning in all contexts.
 Examples of routines: schedules, eating, object placement, dressing, driving routes, 	
greetings	Level 2 – requires substantial support
Shows extreme distress at small changes	Difficulty coping with change and distress
Has difficulty with transitions	changing activities; restricted/repetitive
Shows rigid thinking patterns	behaviors appear frequently enough to be
grand right animality partitions	obvious to casual observer and interfere
❖Highly restricted, fixated interests with abnormal intensity	with functioning in several contexts.
or focus	Level 1 – requires support
 Has strong attachments to or preoccupations with 	Difficulty switching between activities;
unusual objects	inflexible behavior causes interference with
 Has unusual interests; has normal interests that are 	functioning in one or more contexts.
highly focused or obsessive	Organization and planning problems
In younger children, intense interest in certain videos	hamper independence.
(e.g., Thomas), in certain toys (e.g., trains, cars), in	
numbers and letters, in mechanical objects (e.g., elevators)	
In older children, intense interest in certain subjects	
(e.g., marine animals, outer space, dinosaurs)	
(o.g., marmo ariimalo, outor opudo, amodulio)	
❖Hyper-or hypo-reactivity to sensory input; unusual	
interest in sensory aspects of the environment	
Has interests that seem sensory in nature	
Engages in excessive smelling or touching of objects	
 Visually examines of parts of toys (e.g. car wheels), 	
squints or peers, fascination with lights or movement	
 Engages in repetitive dropping of objects, or watching 	
objects fall (e.g., water, sand, balls)	

•	Shows adverse response to specific sounds.	
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1	Shows adverse response to specific sounds, textures, tastes, smells	
•	Appears indifferent to pain/temperature	
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