VANDERBILT KENNEDY CENTER VANDERBILT CONSORTIUM LEND

A Parent's Guide to Psychological Evaluations for ASD

Autism Spectrum Disorder (ASD)

If your healthcare provider has serious concerns about your child's development, he or she may recommend having your child screened for an autism spectrum disorder. ASD refers to a disorder that impacts a child's social, communication, and behavioral development. Early warning signs include delayed language, limited pointing and gesturing, lack of interest in other children, unusual toy play, and over- or undersensitivity to lights, sounds, touch, and other sensory experiences. The number of symptoms and their severity will differ among children.

The Centers for Disease Control and Prevention (CDC) estimates that ASD occurs in as many as 1 in every 36 children in the United States and is more likely to occur in boys than in girls. ASD is a lifelong, brainbased disorder with multiple causes, many still unknown. It occurs in all racial, ethnic, and social groups. Early diagnosis and intervention are important in helping children with ASD gain skills and make progress developmentally.



If your child's healthcare provider suspects a developmental delay or a possible ASD diagnosis, your child may be referred to a psychologist for a psychological evaluation.

Autism spectrum disorder (ASD): The diagnostic classification system (DSM-5, May 2013) combines the previous subcategories of autistic disorder, Asperger's disorder, childhood disintegrative disorder, and pervasive developmental disorder—not otherwise specified (PDD-NOS) into the one category of ASD.

Psychologist vs. Psychiatrist

- A psychologist will conduct tests to diagnose your child and may be able to provide behavioral intervention.
- A psychiatrist is a medical doctor who can diagnose as well as prescribe medication for your child.



The Psychological Evaluation Process

While professionals may vary in the way they conduct the evaluation, you can typically expect a psychological evaluation to include multiple components: records review, parent interview, direct testing with your child, and a feedback session.

□ Records Review:

Prior to your appointment, you may be asked to complete questionnaires that will ask you about your concerns and your child's developmental and medical history. These questionnaires may be sent for you to complete and to return by mail or to bring to the appointment. You may also be asked to have your child's daycare provider or teacher complete a questionnaire. In addition, you should also provide any reports of previous evaluations that your child has received. It is very helpful for the psychologist to review information from other clinicians, such as speech-language pathologists and occupational therapists.

□ Parent Interview:

During the parent interview, the psychologist will meet you, obtain more information about your child's medical history, and ask questions about his/her behavior and development. The parent interview may take about an hour to complete. Based on the information shared during the parent interview, you may be asked to complete additional questionnaires or behavior checklists.

□ Child Assessment:

This portion of the evaluation usually involves behavioral observations and administration of standardized tests. The psychologist may complete tests in three main areas: cognitive skills, adaptive behavior, and specific ASD assessments. These measures will be discussed further below. During this time, your child may be asked to complete some additional tests (such as fine motor, attention, memory) if the psychologist thinks the tests will lead to better understanding your child. This process can take 2 or 3 hours, depending on your child's age and skills. This is a long time for your child and the psychologist to work together. It is a good idea for you to bring comfort items and snacks for your child (and yourself) during this component. Most of the tests will seem like "play" to your child, and it can be helpful to explain this to your child in advance.

□ Feedback Session:

After the evaluation, the psychologist will have a feedback session with you. During the feedback session, the psychologist will share with you the results of the testing and the diagnosis. This typically takes about an hour. Ultimately, an ASD diagnosis is based upon past history, test results, behavioral observations, and the psychologist's clinical judgment. At this time, the psychologist may provide you with a copy of his/her recommendations. This is an important time for you to ask questions. A formal and more complete written report will usually be provided to you. Your child's psychologist may also provide you with information about helpful resources.

Assessment Measures

There are three basic categories of tests that are often used during a psychological evaluation for ASD: cognitive testing, adaptive behavior, and autism-specific assessments. There are many different potential tests within each of these categories. The psychologist will select measures that are designed for your child's age and abilities.

Cognitive Testing

Cognitive testing generally involves assessing the child's problem-solving and language skills. For very young children, this may be part of a developmental measure that includes cognitive, language, and motor skills. Preschool and school-age children may be given an IQ test. In simple terms, an IQ (Intelligence Quotient) test measures a child's current cognitive ability relative to other children his/her age, and often includes both verbal and nonverbal problem-solving skills. Most IQ tests have scores with a mean or average of 100 and a standard deviation of 15 points. The average range of scores is from 85 to 115.

□ Adaptive Behavior

Adaptive Behavior measures assess how well a child has mastered the tasks of daily living or life skill demands for his/her age based on questionnaires or interviews with someone who is very familiar with the child's skills.

□ Autism-Specific Assessments

This category includes both parent interviews, behavior checklists, and structured child activities. These approaches allow psychologists to obtain information about and/or observe the critical areas used to make a diagnosis of ASD: social interaction, communication skills, and repetitive behaviors/ restricted interests.

All of these assessment components are important to the diagnostic process. They also provide valuable information for designing educational and treatment plans.

Mean

Is the average score. The arithmetic mean is calculated by adding the values of the scores and dividing by the number of scores.

Standard Deviation

Is a measure of variability. Most IQ tests have a mean score of 100 and a standard deviation of 15 points. Significant differences are considered two standard deviations from the mean. On an IQ test, two standard deviations equals 30 points. Thus, an IQ of 70 and below is considered intellectually disabled, while an IQ of 130 and above is considered gifted.

Percentile Rank

Percentile rank indicates the percentage of students who scored below your child. A 70th percentile would mean that your child scored as well as or better than 70 out of 100 children who took the test.

Recommendations

The psychologist will provide a written report at or following your final visit. Within the report, your child's diagnosis will be explained, and the test results will be provided. The psychologist may also give recommendations for an education plan or specific therapies. Examples include speech therapy, occupational therapy, physical therapy, and positive behavioral supports. You may be referred to local agencies and websites that will provide supports for you and your child. These resources may help you to connect with other families who have children with developmental disabilities. An accurate diagnosis will help you better understand the concerns you have had and actions you can take that may help to improve your child's development.

Resources

- Autism Society of East Tennessee
 asaetc.org
- Autism Tennessee autismtn.org
- Autism Society of the Mid-South autismsocietymidsouth.org
- Autism Speaks autismspeaks.org
- Autism Spectrum Disorders: Tips and Resources
 - vkc.vumc.org/assets/files/tipsheets/asdtips.pdf
- Tennessee Disability Pathfinder

DisabilityPathfinder.org

- □ The Monroe Carell Jr. Children's Hospital at Vanderbilt
 - » Center for Child Development childrenshospitalvanderbilt.org/service-line/ center-child-development
 - » Junior League Family Resource Center childrenshospitalvanderbilt.org/information/juniorleague-family-resource-center
 - » Junior League Family Resource Center Family Information Notebook childrenshospitalvanderbilt.org/information/familyinformation-notebook
- Treatment and Research Institute for Autism Spectrum Disorders (TRIAD) triad.vumc.org
- Vanderbilt Autism Resource Line triad.vumc.org/autismline (615) 322-7565, (877) 273-8862
- ❑ A Guide for Nonpsychologists: Children's Psychological Testing, 3d ed., by David L. Wodrich Paul H. Brookes Publishing Co., 2006
- Straight Talk about Psychological Testing for Kids by Ellen Braaten, PhD, and Gretchen Felopulos, PhD The Guilford Press, 2004

This publication was authored by Ann Curl, MBA, Leadership Education in Neurodevelopmental Disabilities (LEND) family trainee in 2009-10 and revised by Evon Batey Lee, Ph.D., Associate Professor of Pediatrics, Psychology, and Psychiatry & Behavioral Sciences at Vanderbilt University Medical Center; Director of Vanderbilt Consortium LEND; and Director of Training, University Center for Excellence in Developmental Disabilities. Graphic design support provided by the Vanderbilt Kennedy Center for Research on Human Development. This publication may be distributed as is or, at no cost. View more printable resources and materials online at: vkc.vumc.org

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number T73MC30767, Vanderbilt Consortium LEND. This information or content and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government. Revised April 2020.

