Child age:		mos	
Gender:	М	F	

ASD-PEDS Rating Form

VANDERBILT KENNEDY CENTER

TREATMENT & RESEARCH INSTITUTE FOR AUTISM SPECTRUM DISORDERS

Likert score: 1= Not consistent with ASD; 2= Some consistencies with ASD but at subclinical levels; 3= Obviously consistent with ASD

	ltem		1		2	3	3	Likert 1/2/3
SOCIAL COMMUNICATION	Socially directed speech and sounds	Child often uses words or other vocalizations for a variety of social purposes (e.g. requesting, protesting, directing attention, sharing enjoyment).		Inconsistent socially directed speech.		Child does not often direct vocalizations (i.e., words, non-word sounds) to others. Most sounds are self-directed or undirected.		
	Frequent and flexible eye contact	Child makes frequent and spontaneous eye contact with others across a variety of activities.		Child's eye contact seem seems less flexible and h expected.		Child infrequently makes make eye contact during for help, when being tickl others in response to nan	one activity (e.g., asking ed). Does not look to	
	Use of gestures and integration with eye contact and speech/ vocalization			Child does not always loo sound when gesturing. C point or use other gestur expected.	Child may sometimes May sometimes res, but less than usually combine the		sture to communicate. point, but does not th eye gaze or sounds. push on your body to get	
	ltem	1		2		3		
RESTRICTED/REPETITIVE BEHAVIORS/INTERESTS	Unusual vocalizations	No unusual qualities of speech/ language observed. Most of child's vocalizations (i.e., words, non-word sounds) are appropriate for the child's developmental level.		Speech is not clearly unu differences (e.g., volume of speech/language, unc occasional sounds that an	slight repetitive quality lear echoing, some	Child produces unusual ja speech/language (e.g., un peculiar intonation, unusu speech, echoing, scripting	ndirected jargoning, Jal/repetitive sounds or	
	Unusual or repetitive play	Child plays with toys in appropriate ways (uses toys as expected for developmental level).		Child's play is not clearly unusual, but child is strongly focused on some toys, routines, or activities. May sometimes be hard to shift child's attention to something new.		Child shows clearly repetitive or unusual play (e.g., repeatedly pushing buttons, lining things up, or scrambling/dropping toys, grouping/stacking).		
	Unusual or repetitive body movements	No unusual or repetitive body movements seen.		Unclear unusual/repetitive body movements. Some repetitive jumping or very brief posturing of fingers, hands, or arms that is not clearly atypical.		Child clearly shows unusual or repetitive body movements (e.g., hand-flapping, posturing or tensing body, toe-walking, facial grimacing, hand/ finger mannerisms, repetitive patterns of pacing/ spinning/bouncing/jumping).		
	Unusual sensory exploration or reaction	No unusual sensory behavior observed.		Unclear sensory exploration or reaction. May have a brief response to a sound, smell, or how some- thing feels or moves.		Child shows sensory differences. May closely inspect objects, overreact to sounds, show intense interest or dislike to textures (e.g., touching, lick- ing, biting, refusing to touch specific toys), or clear self-injurious behavior.		
Did you recommend further evaluation for diagnostic clarification?ASD if forced to choose? AbsentDid you recommend further evaluation for diagnostic clarification?ASD if forced to choose? Absent		1 Completely	How certain are you of yo 2 Somewhat	b ur diagnostic impression? 3 Somewhat	4 Completely	Total Score		
Dia	Diagnosis issued:		uncertain	uncertain	certain	Certain		

Hine, J., Foster, T., Wagner, L., Corona, L., Nicholson, A., Stone, C., Swanson, A., Wade, J., Weitlauf, A., & Warren, Z. (2023). ASD-PEDS: An Autism Evaluation Tool for Toddlers and Young Children. Vanderbilt University Medical Center. triad.vumc.org