Autism Case Training: A Developmental Behavioral Pediatrics Curriculum
Communicating Concerns: Screening and Diagnosis Results: Part I

Visual: “Learn the Signs. Act Early.” campaign marking

Visual: Autism Case Training: Video Role Plays

Narrator: The following video role play was staged with an actual physician and with real parents of a child with autism.

Visual: Communicating Abnormal Results from a Screening Tool: Part I

Narrator: In this role play, Tommy, the patient, is 27 months old. His pediatrician saw him at his two year well-check, expressed concerns and asked the parents to fill out a questionnaire. They’re back in her office today.

Pediatrician: It’s good to see you both. I’d like to take a few minutes and look at the questionnaire again that you completed.

Mother: Yes, we filled that out after the last visit, and he’s made a lot of progress. He knows more words now.

Pediatrician: That’s great to hear. A growing vocabulary is really a good thing to see. I’d like to take a look at some of your responses to the questionnaire and just see if anything has changed since you filled that out.

Father: Like what?

Pediatrician: You had answered that he’s not really interested in other kids.

Father: Yeah. That’s just his personality. He kind of likes to be alone, and do his own thing.

Pediatrician: Tell me more what you mean by that.

Father: He gets very upset with any change in his routine. He likes playing with his toys for a long time, and he’s very creative. When he’s playing on his own, he just doesn’t like any other kids to interfere. But isn’t that normal for a toddler?

Pediatrician: You’re right, young children often do not like it when their routines are disturbed, and will get upset when that happens. And you know, when kids are really busy playing, they don’t like to be disturbed. But some of the things you’ve told me about Tommy’s social interactions raises some concerns, and I’d like to understand that a little bit better.

Father: He knows what he wants. He’s very independent and likes playing by himself. He’s kind of shy. Most of my family is shy. Tommy takes after my side of the family.

Pediatrician: Well that’s interesting. You’ve sort of noticed some similarities between Tommy and other people in your family. So, let’s look. You know, I’d like to hear a little bit more about your reporting that Tommy doesn’t point or follow your point.
Mother: Right, I don't know why he doesn't point. Whenever he wants something, he just carries me to what he wants. He gets really frustrated if we don't understand what he's asking for.

Pediatrician: That must be frustrating for the two of you, to not always know what Tommy needs. Let’s take a look. So, you had also indicated that he doesn’t respond to his name. Can you tell me a little bit more about that?

Mother: No. He won’t respond when you call his name. And he won’t even address me as momma.

Father: My wife and I, we kind of disagree about this. He responds well when you get close and you touch him, he just doesn’t respond well from across the room.

Pediatrician: I see. Is he in daycare or preschool?

Mother: No, we tried preschool; it was an absolute disaster. So now we just keep him at home. He seems a lot happier being at home by himself.

Pediatrician: Tell me what you mean by a disaster.

Mother: Well, the school, he was more rigid. He wasn’t interested in playing with the other kids. He just liked kind of playing with the shapes and blocks and that sort of thing. I just don’t think preschool was a good fit for him.

Pediatrician: Boy, it sounds like that was really unpleasant for Tommy, and for your family as well. How long was Tommy in preschool?

Mother: Only about three months. The teachers felt that he wasn’t ready for preschool.

Pediatrician: I see. Well I’m glad we’ve had some opportunity to review your responses to that questionnaire in a little more detail. And I really recommend the evaluation with the developmental and behavioral pediatrician. And based on what you’ve told me, I still have some concerns about Tommy’s social and communication skills like we had talked about last time. So, I am so happy to hear that Tommy is making lots of nice gains, has a growing vocabulary, but I do still have some areas of concern.

Mother: Well, we’re uncomfortable with something being wrong with him. And we really weren’t sure what you meant about evaluation. But he’s made a lot of progress. Do you still recommend this?

Pediatrician: Yes. The questionnaire that you completed does not provide us with a diagnosis, but it does suggest that there are some things about Tommy that we need to look at a bit more closely. I am still concerned that some of the behaviors you’ve described suggest that Tommy’s a bit less social and less communicative than I would expect.

Father: What will they do? Put him on medication?

Pediatrician: We’re not talking about medication now. We just need to get some more information, and to understand Tommy a little bit better. So there may be one clinician or there may be a team of clinicians, I’m not sure. But they are going to really use that time to observe
Tommy, to really look very carefully at his social and his communication skills. And they do this by using child-friendly toys and materials, so puzzles and maybe blocks, and different kind of things like that. You know, the evaluations are designed to try to make kids feel comfortable. They’re not meant to be scary. They can be tiring because they can be long. But they’re not meant to be frightening to children.

Mother: Okay. Well, alright. It sounds like you really want us to go through with this.

Pediatrician: I think it’s a good idea. And I’d like to hear from you. I’d like to stay in touch and hear how the evaluation goes and get your impressions about, you know, how you think it went.

Pediatrician: Okay doctor, we’ll do it.

Visual: Pediatrician played by: Carol Weitzman, MD, FAAP, Yale University School of Medicine; Parents played by Thomas and Nicole Moore

Visual: Producer/Director: David Hughes Duke; Camera Operators: Scott Bynum and John Duke; Video Editor: David Porter; www.livingstories.tv

Visual: Thanks to: Georgina Peacock, MD, MPH, National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention, Carol Weitzman, MD, FAAP, Yale University School of Medicine, Jana Thomas, MPA, Porter Novelli

Visual: Supported by: The Centers for Disease Control and Prevention, National Center on Birth Defects and Developmental Disabilities and the Health Resources and Services Administration Maternal and Child Health Bureau