Autism Checklist

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# Tasks:

☐ **Speech/Language/Communication**

☐ **Speaks nonsense, memorized phrases or uses gestures.**

☐ **Doesn't respond to facial expressions.**

☐ **High or low senses of smell, taste, sight, sound or touch.**

☐ **High or low reaction to pain.**

☐ **Has abnormal ability to commmunicate for his/her age.**

☐ **Sociability**

☐ **Doesn't make eye contact or look directly at an object of interest.**

☐ **Withdrawn, can't make friends.**

☐ **Treats others as objects.**

☐ **Seems to be in a shell - you cannot reach him/her.**

☐ **Pays little or no attention when addressed.**

☐ **Uncooperative and resistant.**

☐ **Shows no affection.**

☐ **Dislikes being held/cuddled.**

☐ **Rarely smiles.**

☐ **Insensitive to other's feelings.**

☐ **Ignores other people.**

☐ **Health/Physical/Behavior**

☐ **Rubs, licks or mouths objects.**

☐ **Shows little imagination, doesn't mimic others.**

☐ **Strong opposition to change.**

☐ **Very narrow interests.**

☐ **Can't move off of a single object of interest.**

☐ **Repetitive body movements.**

☐ **Bed-wetting.**

☐ **Sleep problems.**