



MARIANJOY

Rehabilitation Hospital

Wheaton Franciscan Healthcare

Autism Diagnostic Observation Schedule (ADOS) Testing

Introduction

According to the Centers for Disease Control, one in every 68 children is diagnosed with Autism or Autism Spectrum Disorder (ASD) with boys being at an increased rate of diagnosis than girls. Autism and Autism Spectrum Disorders vary in degree of impairment. An individual with Autism or ASD have challenges in social skills and communication, as well as other difficulties that may co-exist such as sensory and behavioral difficulties. These limitations may last throughout a person's life. Research indicates that diagnosis as early as two years of age is reliable.

Early Intervention is Key

“Children with Autism communicate, interact, behave and learn in ways that are different from others,” explains Dr. Mary Keen, Medical Director of the Marianjoy Pediatric Program. “They also demonstrate these deficits very early on. We encourage parents to pay close attention to their child's developmental milestones. For example, at six months old, a baby should be making sounds, responding to others, and be curious about their surroundings. At 16 months, the child should know several words, be able to show affection, and follow simple commands. If a parent has any concerns related to their child's development, they should address them with their healthcare provider.”

Research findings have shown early intervention is especially important for children diagnosed with Autism. “Because each child is different, a thorough evaluation is completed to determine the most appropriate course of action for the child's particular needs,” notes Keen. “For example, many children with Autism may have additional physical and mental impairments that accompany the ASD diagnosis which may require a more complex treatment plan.”

Autism Diagnostic Observation Schedule (ADOS) Testing

ADOS testing is considered to be the gold standard instrument for diagnosing and assessing Autism Spectrum Disorders across age groups, developmental levels, and language skills. The tests are individually administered to children beginning at 12 months through adulthood.

“The testing uses a variety of modules that are based on the child's expressive language skills and chronological age,” explains Dr. Christine Valessares, pediatric neuropsychologist at Marianjoy. “Using a variety of activities, we are able to evaluate the child's communication skills, social interactions, play, and behaviors. This helps us determine if the behaviors are consistent with the diagnosis of ASD. If an ASD diagnosis is confirmed, we work with the patient's physician to determine the best course of treatment which may include individualized physical, occupational, speech and behavioral therapy programs. Our clinicians use a variety of therapy techniques and strategies to help the child and family make daily tasks and activities more rewarding.”



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Therapy Approaches

For children with Autism, the primary goal of speech therapy is to help them effectively communicate their wants and needs. “For some children, the focus of speech therapy may be to help them engage in conversation, make eye contact and understand non-verbal language,” explains Rachel Frens, speech language pathologist at Marianjoy. “We may also use Picture Exchange Communication Systems, also known as PECS, or other augmentative and alternative communication devices. Another common characteristic of ASD is the repeating of phrases or specific words that may not appropriately fit the conversation. Sometimes a child’s responses can sound ‘canned’ or robotic which is known as echolalia. We use therapy as an opportunity to work on their language skills and their vocal pitch to help them convey meaning, like when they are asking a question versus making a statement.”

In occupational therapy, clinicians typically use sensory integration therapy with a child who has ASD. While most children unconsciously combine and use their senses to learn about themselves and the environment, this does not come naturally to children with Autism.

“I usually challenge their senses through movement and play which promotes eye contact, social interaction and is meant to engage the child,” explains Shonna Dhawan, occupational therapist at Marianjoy. “These activities are designed to promote things like touch, motor planning, and movement. After these activities, the child is usually more prepared to work on their self-help skills such as brushing their teeth, tying their shoes, dressing, feeding and utensil use, handwriting and cutting, and other important daily living activities.”

In addition to occupational and speech therapy, Marianjoy’s physical therapist supplement other treatments to address motor planning, postural awareness, safety, and general strength and balance. Physical therapy also assists with the child’s development of gross motor skills.

Group Classes for Children with Autism

Marianjoy offers a variety of classes for children with special needs, including those with Autism. The classes are an opportunity for the children to practice what they’ve learned in one-on-one therapy sessions and apply these skills in a practical way for different situations they may encounter in society. These small group classes emphasize a variety of skills including turn taking, making eye contact, initiating conversations, empathizing with others while showing emotional and social support.

Classes are offered throughout the year and a current list is available on the Marianjoy website at www.Marianjoy.org.

For more information on ADOS testing, please call 630-909-8602.