ARI/Form ATEC-1/11-99

Autism Treatment Evaluation Checklist (ATEC)

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Project/Purpose:							
Scores: I				Total			

This form is intended to measure the effects of treatment. Free scoring of this form is available on the Internet at: www.autism.com/atec

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Name of Child		☐ Male	Age					
Last	First	☐ Female	Date of Birth					
Form completed by:	Relationship:		Today's Date					
Please circle the letters to indicate how true each phrase is:								
I. Speech/Language/Communication: [N] Not true [S] Somewhat true [V] Very true								
N S V 1. Knows own name	N S V 6. Can use 3 wo (Want more		N S V 11. Speech tends to be meaningful/					
N S V 2. Responds to 'No' or 'Stop'	N S V 7. Knows 10 or	(5) seen	N S V 12. Often uses several successive					
N S V 3. Can follow some commands N S V 4. Can use one word at a time	N S V 8. Can use sentences with 4 or more words		sentences N S V 13. Carries on fairly good					
(No!, Eat, Water, etc.)	N S V 9. Explains what he/she wants		conversation					
N S V 5. Can use 2 words at a time (Don't want, Go home)	N S V 10. Asks meaningful questions		N S V 14. Has normal ability to com- municate for his/her age					
II. Sociability: [N] Not descriptive [S] Somewhat descriptive [V] Very descriptive								
N S V 1. Seems to be in a shell – you	N S V 7. Shows no aff		N S V 14. Disagreeable/not compliant					
cannot reach him/her	N S V 8. Fails to gree	t parents	N S V 15. Temper tantrums					
N S V 2. Ignores other people	N S V 9. Avoids conta	act with others	N S V 16. Lacks friends/companions					
N S V 3. Pays little or no attention when addressed	N S V 10. Does not im	itate	N S V 17. Rarely smiles					
N S V 4. Uncooperative and resistant	N S V 11. Dislikes bei	ng held/cuddled	N S V 18. Insensitive to other's feelings					
N S V 5. No eye contact	N S V 12. Does not sha	are or show	N S V 19. Indifferent to being liked					
N S V 6. Prefers to be left alone	N S V 13. Does not wa	ive 'bye bye'	N S V 20. Indifferent if parent(s) leave					
III. Sensory/Cognitive Awareness: [N] Not descriptive [S] Somewhat descriptive [V] Very des								
N S V, 1. Responds to own name	N S V 7. Appropriate	facial expression	N S V 13. Initiates activities					
N S V 2. Responds to praise	N S V 8. Understands	stories on T.V.	N S V 14. Dresses self					
N S V 3. Looks at people and animals	N S V 9. Understands	explanations	N S V 15. Curious, interested					
N S V 4. Looks at pictures (and T.V.)	N S V 10. Aware of en	vironment	N S V 16. Venturesome - explores					
N S V 5. Does drawing, coloring, art	N S V 11. Aware of da	nger	N S V 17. "Tuned in" - Not spacey					
N S V 6. Plays with toys appropriately	N S V 12. Shows imag	ination	N S V 18. Looks where others are looking					
IV. Health/Physical/Behavior:	Use this code: [N] No	t a Problem or Problem	[MO] Moderate Problem [S] Serious Problem					
	N MI MO S 9. Hype		N MI MO S 18. Obsessive speech					
N MI MO S 1. Bed-wetting	N MI MO S 10. Letha		N MI MO S 19. Rigid routines					
N MI MO S 2. Wets pants/diapers N MI MO S 3. Soils pants/diapers	N MI MO S 11. Hits	•	N MI MO S 20. Shouts or screams					
N MI MO S 4. Diarrhea	N MI MO S 12. Hits		N MI MO S 21. Demands sameness					
N MI MO S 5. Constipation	N MI MO S 13. Destr	ructive	N MI MO S 22. Often agitated					
N MI MO S 6. Sleep problems	N MI MO S 14. Soun		N MI MO S 23. Not sensitive to pain					
N MI MO S 7. Eats too much/too little	N MI MO S 15. Anxi		N MI MO S 24. "Hooked" or fixated on certain objects/topics					
N MI MO S 8. Extremely limited diet	N MI MO S 16. Unha N MI MO S 17. Seizu		N MI MO S 25. Repetitive movements (stimming, rocking, etc.)					