

## ECHO Idaho: Autism STAT Patient Case Recommendations

**Presentation Date**

6-27-24

**Type**

New

**Presenting question:** Does he qualify for an Autism Diagnosis?

**Additional identified concerns:** Should there be consideration of independent Intellectual Impairment?

**Is a diagnosis of autism confirmed?** Yes

**DIAGNOSTIC RECOMMENDATIONS:**

Meets DSM-5 diagnostic criteria for autism spectrum disorder.

Thank you for suggesting recommendations during your case presentation. Recommendations as proposed during case discussion are endorsed.

**PHYSICIAN RECOMMENDATIONS:**

After review of information provided and discussion of the case, the following recommendations are provided:

Recommendation 1:	Supportive modifications to address elopement behavior: <ul style="list-style-type: none"> <li>• High locks/bolts on doors (speak with your local fire department)</li> <li>• House alarm</li> <li>• Red/yellow/green light visual and verbal system to teach when it is safe to go or stop</li> <li>• Swimming lessons</li> <li>• Disability parking placard</li> </ul>
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**PEDIATRIC NEUROPSYCHOLOGIST RECOMMENDATIONS:**

Recommendation 1:	I support the developmental preschool referral/recommendation given ASD symptoms and other delays (language, cognitive, fine motor, adaptive).
Recommendation 2:	Assessment of co-occurring conditions will be helpful as this child ages. Referral to a psychologist/neuropsychologist for a treatment planning evaluation in the future (early school age/kinder) is strongly recommended.

**PEDIATRIC SLP RECOMMENDATIONS:**

Recommendation 1:	Feeding evaluation and treatment Audiological evaluation
Recommendation 2:	Continue speech and language therapy focused on prelinguistic (joint attention, imitation, turn-taking, cause/effect) and reciprocal play

## COUNSELOR RECOMMENDATIONS:

Recommendation 1:	Recommendations: Confirming and encouraging all care givers to participate in treatment, educate and are consistent with their interactions and support with this child. ABA is vital on mother's and grandmothers' consistency with how they respond to his behaviors and teaching him functional skills. In addition, would explore PCIT with mother and Grandmother with this child to help support relationship building and recognition of positive connection, and help with siblings as well to support family as whole.
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## BCBA/PARENT ADVOCATE RECOMMENDATIONS:

Recommendation 1:	I agree with your recommendations as set forth, I would only add in the feeding therapy, and encourage you to help this parent prioritize what interventions to pursue first. In my area of Idaho there are some therapists that are outpatient but treat children in home, others are only clinic based and you have to take the child to the appointment. Exploring what providers are out there and how their services can fit into their world can help. Once a diagnosis is given, helping them explore/enroll in Medicaid/Katie Beckett programs and the Developmental Disabilities program (and finding a case manager) will also give mom/grandma a person to help them navigate this.
Recommendation 2:	Encourage mom/grandma to find opportunities for this child to interact with other children (beyond their sibling) so they can get more experiences with social interactions, language, etc. Finding a library story time, swimming lessons, going to the park, aquatic center, or any other community programs with similar aged children will be a great way to give more opportunities for interaction.

## THE FOLLOWING TOOLKITS/RESOURCES MAY BE HELPFUL:

- Clinical Outpatient Speech Language Therapy (SLP)
- Clinical Outpatient Occupational Therapy (OT)
- Applied Behavioral Analysis (ABA) - (The goal of behavior therapy is to increase behaviors that are helpful and decrease behaviors that are harmful or affect learning. Family may benefit from the implementation of techniques for understanding and changing behavior based on the principles of applied behavior analysis). ECHO Idaho Guide: Questions to ask of a BCBA or ABA Provider found here: <https://iecho.unm.edu/sites/uidaho/download.hns?is=fc4f9ce1fd542d4c4d0a3084f732904a>.
- Early Special Education Services / Developmental Preschool - (Local school districts have early childhood programs for children between 3 and 5 years old with developmental delays who are determined to be eligible for services. Classroom based support and peer interactions are critical at an early age)
- Parent/Caregiver Skills Training - (Parent training allows parents to become active participants in their child's learning and development. It can help parents learn about effective ways to support their child's skills, building and learn strategies to manage their interfering behaviors. Help is in Your Hands is a free resource by University of California-Davis with modules to show parents and clinicians how to help young children with autism connect, communicate, and learn through various activities and play exercises. Family can create a login and access all modules and videos for free at <https://helpisinyourhands.org/course>)
- ADEPT (Autism Distance Education Parent Training) - (Clinicians at the University of California-Davis developed these online, on-demand learning modules to help parents/caregivers learn more about behavior and autism. The following are particularly helpful: Module 1: Strategies for Teaching Functional Skills; Module 2: Positive Behavior Strategies for Your Child with Autism) (<https://health.ucdavis.edu/mindinstitute/centers/cedd/adept.html>)

## Community Resources/Connections:

Autism Speaks Rapid Response Team - (Personalized autism information and resources for any step in the autism path can be found at <https://www.autismspeaks.org/autism-response-team-art>)

**Other condition(s) management recommendations:**

Monitor staring spells and head circumference

**Routine Autism/Developmental Follow-up & Monitoring:**

- Routine Follow-up 3-4 months - (Follow-up scheduled with ECHO Autism Clinician every 3-4 months to assess the following: current therapies and progress, current challenges, parent well-being and support, screening and management of medical issues like sleep, diet, constipation, staring spells, anticipatory guidance specific to autism.)
- Labs - (Recommended standard lab evaluation for a child on the autism spectrum to include Chromosomal Microarray, DNA for Fragile X and lead level. MECP2 for Rett Syndrome is recommended for girls with an autism diagnosis.)

**Tools to Learn more about Autism Spectrum Disorder:**

- Tool Kit: 100 Day Kit for Young Children - (This guide is designed to provide you with the information and tools you need to make the best possible use of the days following the diagnosis. It is a comprehensive tool filled with facts and resources such as information about symptoms, treatment, legal rights and advocacy. This tool kit can be found at <https://echoautism.org/new-diagnosis-under-age-4/> then click 100 Day Kit for Newly Diagnosed Families of Young Children)
- Autism Navigator - About Autism in Toddlers and Video Glossary - (This self-paced program will teach families about autism symptoms and supports and intervention to help their child thrive. Autism Navigator also has information about evidence-based supports for everyday activities and developmental growth charts to recognize and monitor meaningful outcomes. Family can create a login and access modules and videos at <https://autismnavigator.com/courses/>)
- Behavior Videos - (The following videos offer some practical tips that may be helpful for this family: ABCs of Behavior and Reinforcement. The videos can be found at <https://echoautism.org/behavior-basics/> then click Video Tool Kit: ABCs and Video Tool Kit: Reinforcement)
- CDC Autism Case Training Videos <https://www.cdc.gov/ncbddd/actearly/autism/video/index.html>