Autism in the Exam Room: Translating Neuroscience into Better Clinical Care

Sam Goldstein, Ph.D.
Assistant Clinical Professor
University of Utah School of Medicine

www.samgoldstein.com
info@samgoldstein.com
@drsamgoldstein
@doctorsamgoldstein
@CommonSenseScience

1

Relevant Disclosure

- Co-author of the Autism Spectrum Rating Scales (MHS, 2009) and Autism Spectrum Scales Adult (MHS 2026).
- Co-author of Assessment of Autism Spectrum Disorders First and Second Editons(Guilford, 2009, 2018).
- Co-author of Raising a Resilient Child With Autism Spectrum Disorders (2011, McGraw Hill).
- Co-author of Treatment of Autism Spectrum Disorders (2012, Springer).
- Co-author The Power of Resilience for Adults with ASD (Copernicus, 2026)
- Compensated speaker.
- AI note-taking is fine.

2

We are social beings.

3

3

What Benefits Do We Derive From Socialization?

- Support
- Survival
- Affiliation
- Pleasure
- Procreation
- Knowledge
- Friendship

4

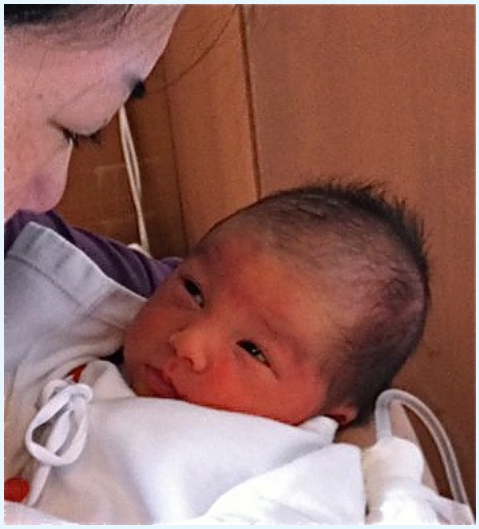
The social development of autistic children is qualitatively different from other children.

5

In normal children perceptual, affective and neuroregulatory mechanisms predispose young infants to engage in social interaction from very early on in their lives.

6

Socialization Begins Early
Reina and Her Mother



7

7

8

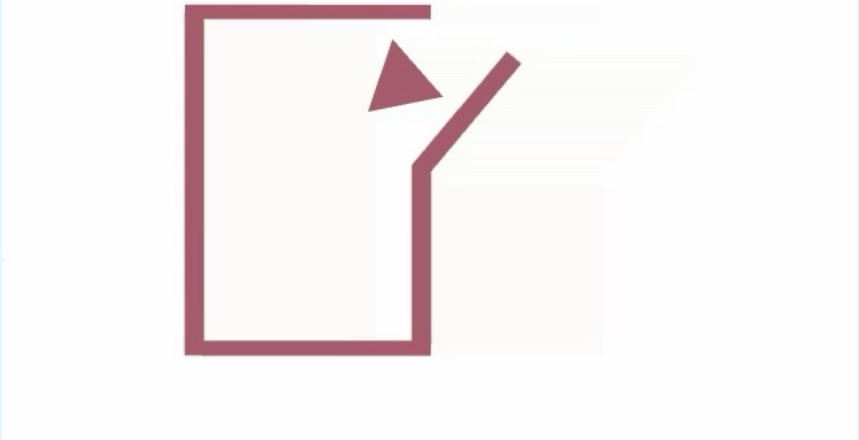
8

Autism in children, or autism spectrum disorder (ASD), is a neurodevelopmental condition affecting communication, social interaction, and behavior.

Children with autism may display repetitive behaviors, sensory sensitivities, and unique learning patterns.

Symptoms vary widely, with strengths and challenges differing between individuals, requiring personalized support to promote development, independence, and well-being.

9



10

Theory of mind is the ability to understand that other people have their own thoughts, beliefs, feelings, intentions, and perspectives that may differ from one's own. This skill enables children to predict and interpret others' behavior and is essential for empathy, social relationships, and effective communication. Many autistic children experience delays or differences in developing theory of mind, which can contribute to difficulties understanding social cues, sarcasm, deception, or another person's emotions.

Joint attention is the shared focus of two individuals on the same object, event, or activity, achieved through eye contact, pointing, gestures, or verbal communication. It is a foundational social communication skill that typically develops during infancy and supports language acquisition, learning, and social interaction. Difficulties with initiating or responding to joint attention are among the earliest signs of autism spectrum disorder (ASD) and are commonly assessed during developmental evaluations.

11

Forty years ago, 2/3 of children diagnosed with ASD were globally developmentally delayed. Today 2/3 have normal development.

Forty years ago the majority diagnosed with ASD were male**s.** Today its equal between males and females.

There is still a minority and SES gap with fewer minority parents seeking evaluation for their children.

12

Exam room decisions about children's developmental problems should be based on:

- A traditional risk benefit analysis of present and future risk
- An appreciation of normal development
- An appreciation of present and future demands of the environment
- An understanding of the variance and idiosyncrasies in parent reports
- A best guess about family functioning
- A knowledge of available options and resources

13

Decision 1: What Am I Seeing?

Behavior is an output of brain function.
Observe regulation before judging compliance.
Interpret context before assigning meaning.

14

Decision 2: What Should I Investigate?

Sleep
Sensory processing
Anxiety
ADHD
Language
Motor function
Medical comorbidities

15

Child Behavior

- Attention
- Activity level
- Impulse control
- Defiance
- Destruction
- Aggression
- High risk taking
- Moody
- Worry

16

Home Environment

- Socioeconomic Status
- Stressors
- Parent personality
- Parent mental health
- Sibling issues
- Community

17

Child Temperament

- Poor routines
- Irritability
- Inflexible/rigid
- Strong intensity of reaction
- Easily overwhelmed
- Disconnected

18

Cognition and Language

- Early speech
- Social communication
- Self-regulation
- Pre-academic language skills (label, association, sequence, retrieval)
- Early knowledge

19

Neuro-Informed Exam Room Checklist

✓ Observe before interpreting
✓ Screen sensory function
✓ Look for co-occurring conditions
✓ Explain uncertainty
✓ Individualize recommendations
✓ Reassess over time
✓ Partner with families

20

General Guidance: When to Refer for Further Assessment

- **Failed developmental or autism screening:** Refer if the child has a positive autism screening result (e.g., M-CHAT-R/F) or concerning developmental screening findings.
- **Delayed speech or language:** Limited babbling by 12 months, no single words by 16 months, no two-word phrases by 24 months, or regression in language skills.
- **Social communication concerns:** Poor eye contact, limited response to their name, reduced shared attention, difficulty engaging with others, or limited use of gestures.
- **Restricted or repetitive behaviors:** Repetitive movements (e.g., hand flapping, rocking), insistence on routines, intense restricted interests, or unusual sensory responses.

21

General Guidance: When to Refer for Further Assessment

- **Developmental regression:** Any loss of previously acquired language, social, or motor skills requires urgent referral.
- **Parental or caregiver concern:** Take concerns seriously, even if screening results are negative, as parents often identify developmental differences early.
- **Family history or high-risk conditions:** Children with siblings with ASD, genetic syndromes, or significant developmental delays should receive closer surveillance and early referral if concerns arise.
- **Persistent developmental concerns:** Refer to developmental-behavioral pediatrics, child neurology, child psychology/psychiatry, or a multidisciplinary autism assessment team when clinical suspicion remains despite inconclusive screening.

22

EarliPoint® is an FDA-cleared, eye-tracking tool designed to help clinicians assess and diagnose Autism Spectrum Disorder (ASD) in children. Measuring where and how long a child looks at social scenes on a screen provides objective data that complements traditional diagnostic methods. https://earlipointhealth.com

23

Decision 3: What Should I Tell Families?

Explain behavior using brain-based language.
Normalize variability across the spectrum.
Frame strengths alongside challenges.

24

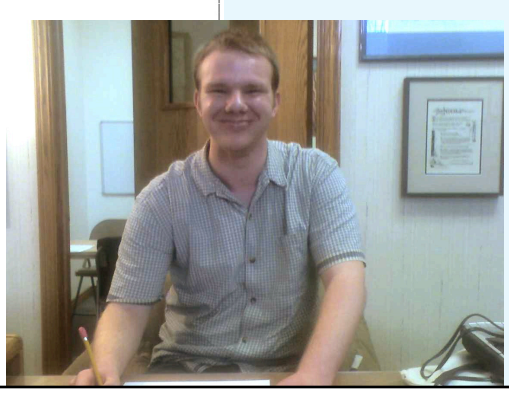
Devin Teichert

Song of Myself

December 16, 2008

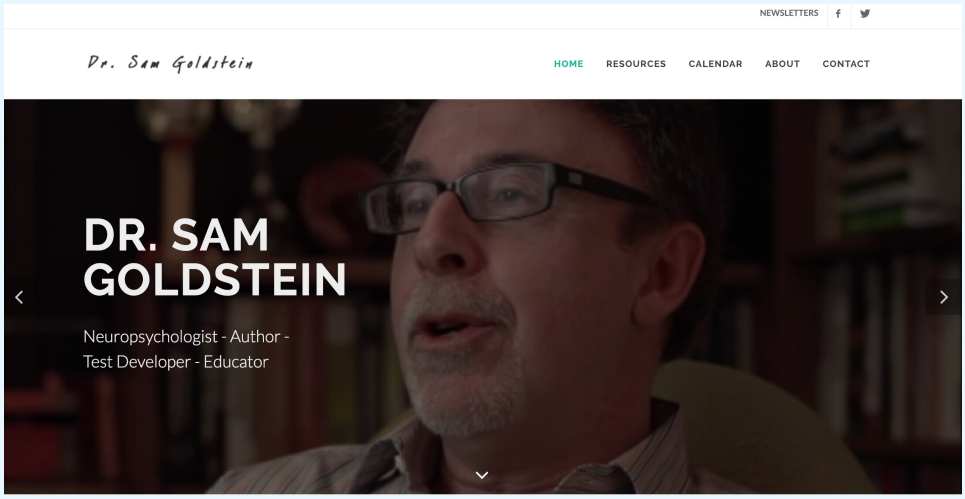
Were They but There at Night

There is a bolder field where every stone
Is a glazed, glittering gem, like stars fallen from the sky
All except one, a plain grey rock alone in the center
Feeling excluded and shunned
People come, tourists, painters, photographers, collectors
To view each shining bolder, a pleasure to the beholder
Ooh! Ahh! Look at this one! Come quick!
Pockets bulge with fragments and paint cans run dry
But the grey rock remains ignored
An ugly blotch on a sweeping mural
The sun sets, everyone leaves
And they miss the centerpiece of the field
For when night falls, the grey rock in the center



25

www.samgoldstein.com



26