

Children's Hospital Association
Autism Spectrum Disorder (ASD) Practice Questions

CASE STUDY

Charley, who is 8 years old, is going to be admitted for increased seizure activity. Charley was diagnosed with autism spectrum disorder (ASD) at the age of 2. Charley lives with his parents, his brother Levi, who is 11, and his little brother Ethan, who is 5 years old. Both of Charley's parents work outside the home, and Charley attends public school in a classroom for children with special needs, where he gets occupational and educational therapy.

Charley has had seizures that have been well-controlled on medication since he was 6 months old, but over the last six months his parents have reported an increase in seizure activity. Charley is being admitted to an acute care unit at a children's hospital. The plan for admission will be to complete some diagnostic tests including a video EEG and MRI. Following the diagnostic studies the neurologist will make some recommendations for medications changes.

1. When he was 2 years old, Charley's parents decided to have him evaluated for autism because he avoided making eye contact, refused to wear sweaters because they were itchy, and insisted on eating applesauce every day for breakfast. Select the diagnostic criteria that best describes Charley's behavior. *Select all that apply.*
 - A. Deficits in nonverbal communication skills
 - B. Deficits in social-emotional exchange
 - C. Hyper- or hypo-reactivity to sensory input or unusual interests in sensory aspects of the environment
 - D. Insistence on sameness, inflexible adherence to routines or ritualized patterns
 - E. Stereotypical or repetitive motor movements

2. Which of the following behaviors are characteristic of children with autism? *Select all that apply.*
 - A. Five-year-old Megan sings the theme song of "Little Einsteins™" repeatedly for over two hours.
 - B. Nine-year-old Michael talks excessively about tarantulas when anyone asks him how his day was.
 - C. Three-year-old Eli sucks his thumb when he is upset.
 - D. Twelve-year-old Rita, who insists on wearing her red boots to school, refused to go to school one day when they could not be found.

3. Charley is showing some reactive behaviors to his environment and the clinician is concerned that these behaviors will continue to escalate. After reviewing the information the parents provided at admission, which of the following might be calming for Charley? *Select all that apply.*
- A. Find an activity that involves matching colors.
 - B. Get a movie for him to watch.
 - C. Take him to a Child Life group activity to play with blocks.
 - D. Turn down the lights in his room.
 - E. Turn on SpongeBob SquarePants™

The clinician enters Charley's patient room to discuss with him and his parents the EEG that he will be having in about an hour. There are two therapists in the room talking to Charley's parents and quite a lot of noise outside Charley's room. Charley seems a little upset and is pacing in the room with his hands over his ears and repeating over and over again, "Charley go home now."

For each question, select the correct answer.

4. What should the clinician do first?
- A. Ask the therapists to talk outside with one of Charley's parents and shut the door.
 - B. The therapists should talk over the noise going on outside the room, so Charley can't hear it.
5. How should the clinician begin the conversation with Charley and the parent that stayed in the room?
- A. Avoid eye contact with Charlie.
 - B. Begin by saying Charlie's name.
6. What strategies should the clinician use to proceed with talking to Charley and his mom?
- A. Provide positive instructions and visual support directly to Charley.
 - B. Allow Charley's parent to be the primary communicator.

Scenario

When the clinician goes back to Charley's room to see if he is ready for his EEG, he finds him sitting on the floor, in just his underwear with the hospital gown he had previously given him to put on still on the bed. Charley is twirling a ball around and around; he does not look up or seem to notice when the clinician comes into the room and begins to talk to him and his parents.

7. How should the clinician respond to Charley not putting on his hospital gown?
- A. Get down on the floor with Charley and ask him why he hasn't put on the gown.
 - B. Ignore it as it is not hurting him to not have the gown on.
 - C. Say the following, "Charley has to put his gown on now."
 - D. Show him a picture of a boy in a gown.

Scenario

Ben is high energy, has trouble sitting still and is quite animated. He is constantly drumming with his hands and humming and singing. When asked how he is feeling today Ben says, "I do not want green eggs and ham!"

When Ben is asked by the doctor if they can listen to his heartbeat he enthusiastically replies, "As for you my galvanized friend, you want a heart!" although he then tries to take the stethoscope from the doctor.

When the doctor attempts to take the stethoscope back from Ben, he yells and flails, "No, no!" and bites his arm.

Ben's mom is there and informs the ED team he had a seizure but does not have a history of seizures. Mom is also able to give helpful tips, such as Ben hates whistling and music when played by others. He is most relaxed when spinning, swinging or getting other vestibular input.

8. What characteristics commonly associated with autism are observable in Ben? *Select all that apply.*
- A. Communication challenges
 - B. Sensory processing challenges
 - C. Social challenges
 - D. Visual sensitivities
9. What strategies could be used to support Ben during his hospitalization? *Select all that apply.*
- A. Sensory accommodations
 - B. Social narrative
 - C. Visual supports and written expectations

Scenario

Lydia, a 10-year-old with ADHD and ASD, has been admitted to the medical floor due to an increase in aggression toward her guardian at home. While home, she receives support from a specialized school and a behavioral therapist that offers coaching. Guardians are requesting assessment for medication management. Lydia is currently on olanzapine, clonidine, lithium, topiramate and gabapentin and has allergies to thorazine and concerta. She requires a sensory diet and physical activity including bouncing on a ball and walking with a weighted backpack three times per day. She has limited verbal capabilities utilizing two-to-three-word phrases at a time. She currently does not utilize sign language and prefers to point or model her need for her caregivers. Lydia and her caregivers keep a visual schedule posted in the home and Lydia prefers to have a structured daily schedule. Lydia is excited to have additional people around to engage in activity with while in the hospital.

Lydia has been asked to stay in her room while waiting for the doctor to complete her assessment. She tells the nursing staff she does not want to stay there, repeating "walk, walk, walk." She begins to show agitation when her request is not met.

10. How can the nursing staff best meet Lydia's need for sensory input while also maintaining her safety in the room as she waits for the physician to complete her assessment?
- A. Affirm Lydia's request by saying "first we visit the doctor, and then we go on a walk".
 - B. Create a walk line with tape for her to walk a path in her room while she waits for her assessment.
 - C. Ignore the behavior and she will forget about wanting to go on a walk.
 - D. Redirect Lydia to an exercise ball for bouncing in the room.

Lydia has been in the hospital for one week and her medication was changed to promote stabilization of her mood dysregulation. For the past two days Lydia has been requesting food on a continuous basis. She has gone from three meals a day to having a snack or meal once an hour. When she is not given food, Lydia becomes agitated and begins hitting, spitting, or biting her nurse or hospital caregiver.

11. As Lydia's health care provider, what would be your next step in addressing this new behavioral symptom?
- A. Consult her psychiatrist regarding the medication change and side effects of increased appetite.
 - B. Continue to give her food whenever she requests it because she is in the hospital and it's better to minimize opportunity for escalation.
 - C. Create a visual schedule of meal/snack times so Lydia will know when it is time to eat.

Final Assessment

12. Which of the following events in the hospital may be a trigger for a child with vestibular over-sensitivity?
- A. Drinking barium
 - B. Riding on gurney
 - C. The smell of antiseptic agents
 - D. The sound of the MRI
13. Eric is a 4-year-old boy recently diagnosed with autism. In addition to an impairment in social communication skills, Eric demonstrates all of the characteristics listed below. Which of them would also be diagnostic of autism?
- A. Depression and ADHD
 - B. Developmental delay
 - C. Intellectual disability
 - D. Pacing and flapping
14. How does the pattern of strengths and weakness of patients with autism compare to those who are typically developing? The child with autism demonstrates_____.
- A. A "splintered" pattern of development.
 - B. A predictable pattern of development across categories
 - C. Expressive and receptive language delays
 - D. Some deficits in all categories of development
15. A 10-year-old child with autism is admitted to the hospital with an exacerbation of asthma symptoms. The child has been pacing and screaming "no, no, no," making it impossible for the clinician to complete an assessment. By recognizing the basic functions of behavior, the clinician suspects that this behavior is a way for the child to _____.
- A. escape the unpleasant situation (hospitalization)
 - B. get attention from the hospital staff.
 - C. get something she wants.
 - D. meet a physical need.
16. The clinician caring for a 12-year-old child with autism and low executive function wants to implement a tool to help the child anticipate and cooperate with events of the day. Which of the following tools would be most helpful for this purpose?
- A. A timer set to alarm for each event.
 - B. A written schedule hung on the wall.
 - C. A verbal recording listing the schedule.

- D. Visual representations of each event/time
17. Which of the following is an example of sensory-seeking behavior in a child with proprioception challenges?
- A. Motion sickness
 - B. Playing with light switches
 - C. Repeated spinning
 - D. Toe walking
18. The child life specialist is planning activities for a child with autism that is known to have sensory-seeking behaviors due to visual under-sensitivity. Which of the following would be an appropriate activity or tool to implement for this sensory processing impairment?
- A. Pictorial representations of directions
 - B. Provide a kaleidoscope as a reward.
 - C. Sunglasses when going outside.
 - D. Use of a five-point scale
19. Which of the following is the most effective example of providing directions to a child on the autism spectrum?
- A. Do not push.
 - B. Stop running.
 - C. Wait in this chair.
 - D. You may not leave this area.
20. How can the five-point scale be utilized when caring for a child with autism?
- A. It allows the child to identify level of pain.
 - B. It provides a method for the child to describe feelings.
 - C. The clinician can use it to communicate steps in a procedure.
 - D. It communicates visually five steps the child needs to complete.
21. The clinician observes that a patient with autism on the acute care unit for treatment of pneumonia has all of his clothes turned inside out. The clinician recognizes that this child likely has which of the following sensory processing impairments?
- A. Interoception over-sensitivity
 - B. Proprioception under-sensitivity
 - C. Tactile over-sensitivity
 - D. Visual under-sensitivity

Taken from: PNI: Autism Spectrum Disorder (ASD) by Children's Hospital Association in HealthStream at Providence Health & Services.