

PDD Behavior Inventory™ Screening Version (PDDBI™ -SV)

Brief Interpretive Report

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Name: Client Sample	Client ID: 1102
Age: 9 years, 5 months	Birthdate: 10/12/2001
Gender: Male	Test Date: 03/16/2011
Ethnicity: Caucasian	
Rater/Relationship: Mrs Robins / Mother	

Scale scores	
<i>SOCPP-SV</i> Raw	19
<i>SOCAPP-SV</i> Raw	7

Social Deficits (SOCDEF) Score		
Raw	T	90% CI
26	55	49-61

SOCDEF Profile			
		Raw score	T score
Unusually high score	Level 6, Extreme	—	≥46
		—	45
		—	44
		—	43
		—	42
		—	41
		—	40
		—	39
		—	38
		Autism spectrum disorder (ASD)/ Social deficits likely	Level 5, Severe
—	36		
—	35		
—	34		
—	33		
—	32		
—	31		
—	30		
—	29		
Level 4, Moderate	●		26
	—		25
	—		24
	—		23
	—		22
	—		21
	—		20
	—		19
	—		18
	—		17
Level 3, Mild	—	16	
	—	15	
	—	14	
	—	13	
More information needed	Level 2, Borderline	—	12
		—	11
		—	10
		—	9
ASD/Social deficits unlikely	Level 1, Unlikely	—	8
		—	7
		—	6
		—	5
		—	4
		—	3
		—	2
—	1		
—	0		
		≤22	

Interpretation: Level 4, Moderate

About 68% of children with autism score in this range, thus, scores at this level are strongly suggestive of autism spectrum disorder (ASD). Children who obtain Level 4 scores differ from those who obtain Level 3 scores in that their language, social skills, and sensory behaviors are worse and are typical of children with ASD.

Recommendations:

Children who score in this range should be scheduled for an in-depth evaluation of autism or similar disorder by an experienced diagnostician, as well as a cognitive evaluation, a speech and language evaluation, a motor skills assessment, and an evaluation of anxiety problems or “challenging behaviors;” the latter ideally should be conducted by a board-certified behavior analyst (BCBA). Discussion about ASD with the child’s parents is also recommended, and, depending on the child’s age, his or her parents should be advised to contact available early intervention or special education services.

Of course, no one score should be used in the determination of a diagnosis, and other supporting factors, such as behavioral observation, history of symptoms, and other testing results, should be considered when making recommendations or giving feedback. Further, the veracity of this report is contingent on the rater's ability to accurately assess the patient.

Item Responses

<i>SOCPP-SV</i> Items		<i>SOCAPP-SV</i> Items	
No.	Response	No.	Response
1.	Sometimes/Partially shows behavior	10.	Sometimes/Partially shows behavior
2.	Rarely shows behavior	11.	Usually/Typically shows behavior
3.	Rarely shows behavior	12.	Sometimes/Partially shows behavior
4.	Sometimes/Partially shows behavior	13.	Sometimes/Partially shows behavior
5.	Usually/Typically shows behavior	14.	Rarely shows behavior
6.	Sometimes/Partially shows behavior	15.	Usually/Typically shows behavior
7.	Usually/Typically shows behavior	16.	Sometimes/Partially shows behavior
8.	Usually/Typically shows behavior	17.	Usually/Typically shows behavior
9.	Sometimes/Partially shows behavior	18.	Sometimes/Partially shows behavior

End of Report