# <u>Parent Interview for Autism – Clinical Version (PIA-CV)</u> ©2002 Stone, Coonrod, Pozdol, & Turner

Name:		Date:	Relationship to Child: _	
For each item at the present	-	ber that indicates how	often your child demonstrates	each behavior
******	*********	*******	********	******
1	2	3	4	5
Almost Never ********	Once in a While	<b>Sometimes</b> *************	Frequently ************************************	Almost Always
		<b>Social Relating</b>		
1 2 3 4 5	1) Does your child enjoy in	nteracting with familiar	adults?	
1 2 3 4 5	2) Does your child look at	you while you are play	ing with him/her?	
1 2 3 4 5	3) Does your child look at	you when you are talki	ng to him/her?	
1 2 3 4 5	4) Does your child come to	you for comfort when	he/she is sick or hurt?	
1 2 3 4 5	5) Does your child ignore p	people who are trying t	o interact with him/her?	
1 2 3 4 5	6) Does your child "look th	nrough" people as if the	ey weren't there?	
1 2 3 4 5	7) Does your child enjoy b	eing held or cuddled?		
1 2 3 4 5	8) Does your child hug you	ı back when you hug h	im/her?	
1 2 3 4 5	9) Does your child become	stiff or rigid when you	are holding or hugging him/h	ier?
1 2 3 4 5	10) Does he/she go limp w	hen you hold or hug hi	m/her?	
1 2 3 4 5	11) Does your child come asking him/her to?	to you for a kiss or a hu	ng on his/her own, without you	1
1 2 3 4 5	12) Does he/she enjoy bein	g kissed?		
1 2 3 4 5	13) Does your child seem t Examples?	o enjoy affection only	on his/her own terms?	
1 2 3 4 5	14) Does your child smile	back at you when you	smile at him/her?	
1 2 3 4 5	15) Does your child seem t	o be "hard to reach", o	r in his/her own world?	
1 2 3 4 5	16) Does your child activel	ly avoid looking at peo	ple during interactions?	
1 2 3 4 5	17) Does your child look a interacting with him/he		ey are far away than when the	y are

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For each item below, please circle the number that indicates how often your child demonstrates each behavior at the present time.

**********************					
1	2	3	4	5	
Almost Never ********	Once in a While	<b>Sometimes</b> ***********	Frequently *********	Almost Always **********	
		Affective Responses	1		
1 2 3 4 5	1 2 3 4 5 18) Does your child seem to understand how others are feeling? Examples?				
1 2 3 4 5	19) Does he/she understand the expressions on people's faces?				
1 2 3 4 5	1 2 3 4 5 20) Is it difficult to tell what your child is feeling from his/her facial expression? What makes it hard to tell?				
1 2 3 4 5	21) Does your child smile during his/her favorite activities?				
1 2 3 4 5	22) Does your child smile, laugh, and cry when you expect him/her to?				
1 2 3 4 5	5 23) Do your child 's moods change quickly, without warning? Examples?				
1 2 3 4 5	24) Does your child become very frightened of harmless things? Examples?				
1 2 3 4 5	25) Does your child laugh for no obvious reason?				
1 2 3 4 5	26) Does your child have severe temper tantrums?				
Peer Interactions					
1 2 3 4 5	27) Does your child prefer t	o play alone instead of	with other children?		
1 2 3 4 5	28) Will your child ever join	n in play with another o	child?		
1 2 3 4 5	29) Does your child enjoy p	29) Does your child enjoy playing with other children?			
1 2 3 4 5	30) Does your child seem to be interested in making friends with other children?				
1 2 3 4 5	31) Does your child hurt other children by biting, hitting, or kicking?				
<b>Motor Imitation</b>					
1 2 3 4 5	32) Does your child imitate hands?	simple gestures such a	s waving goodbye or clapp	ing	
1 2 3 4 5	33) Does your child imitate dusting? Examples?	the things you do arou	nd the house, such as sweep	ping or	
1 2 3 4 5	34) Do you have difficulty t when you want him/her		to imitate your movements	S	
1 2 3 4 5	35) Does your child imitate	words or sounds when	you want him/her to?		

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For each item below, please circle the number that indicates how often your child demonstrates each behavior at the present time.

*******	**********	********	********	*******
1	2	3	4	5
Almost Never *********	Once in a While	Sometimes *********	Frequently **********	Almost Always ********
N 1 .1 C .		<b>Communication</b>		
Nonverbal Co				
	talking, there are lots of other wo s, or pointing, or gesturing.	ays that children can con	municate their needs and	wants, such as
1 2 3 4 5	36) How often does your chi	ld communicate to you	in ways other than talk	ing?
1 2 3 4 5	37) Can you understand wha	at your child is trying to	o communicate?	
1 2 3 4 5	38) Can other people unders	tand your child?		
1 2 3 4 5	39) Does your child become	frustrated when he/she	e tries to communicate?	
The next que	estions are about the <b>reasons</b> to e to:	hat your child commun	nicates. How often does	your child
1 2 3 4 5	40) Let you know he/she wa	nts something, like foo	od or a toy?	
1 2 3 4 5	41) Get you to do something	for him/her? Example	?	
1 2 3 4 5	42) Let you know he/she doo	esn't want something?	How does he/she let you	ı know?
1 2 3 4 5	43) Get your attention? Exa	mple?		
1 2 3 4 5	44) Show off? Example?			
1 2 3 4 5	45) Ask questions about an o	object or event? Exam	ple?	
1 2 3 4 5	46) Ask your permission to	do something? Exampl	e?	
1 2 3 4 5	47) Get you to play with him	n/her? Example?		
1 2 3 4 5	48) Get you to look at somet	hing he/she's interested	d in? Example?	
	<u>L</u>	anguage Understandi	ng	
1 2 3 4 5	49) Does your child respond	when you call his/her	name?	
1 2 3 4 5	50) Does your child understa	and what you say to him	m/her? How can you tel	1?
1 2 3 4 5	51) When you point at some	thing, does your child	look in the direction you	point in?
1 2 3 4 5	52) Can your child follow si	mple directions such a	s "Get your coat"?	
1 2 3 4 5	53) Can your child follow lo "Get your coat and bring		ntain more than one idea	a, such as
1 2 3 4 5	54) Does your child listen to	you when you read hi	m/her short stories?	

1 2 3 4 5 55) Does your child seem interested in conversations that other people are having?

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For each item below, please circle the number that indicates how often your child demonstrates each behavior <u>at the present time</u>.

******	*********	*******	*******	*******
1	2	3	4	5
Almost Never *********	Once in a While	Sometimes	Frequently *********	Almost Always
		Object Play		
1 2 3 4 5	56) Does he/she play with lo	ots of different toys?		
1 2 3 4 5	· · · · · · · · · · · · · · · · · · ·	g., rolling a toy car, pu	ways, the way they were tting Legos together, pus	
1 2 3 4 5	58) Does your child use toys up over and over again?		n as spinning them, or lin	ing them
1 2 3 4 5	59) Does your child play with toys or other objects in the same exact way each time? Examples?			
		<b>Imaginative Play</b>		
1 2 3 4 5	60) Does your child use his/ such as pretending th Examples?		playing with toys or othe hat a comb is an airplane	
1 2 3 4 5	61) Does your child play pretend games by him/herself, such as pretending to be a superhero? Examples?			
1 2 3 4 5	62) Does your child play pretend games with other children, like playing "mommy," "daddy," or "teacher"? Examples?			
1 2 3 4 5	63) Does your child play many different pretend games?			
		Sensory Responses		
1 2 3 4 5	64) Does your child fail to r bumping his/her head? V			or
1 2 3 4 5	65) Is your child overly sens	sitive to being touched	?	
1 2 3 4 5	66) Does your child examin	e objects by sniffing or	smelling them?	
1 2 3 4 5	67) Does he/she examine ob	jects by licking or tast	ing them?	
1 2 3 4 5	68) Is your child overly inte	rested in the way thing	s feel?	
1 2 3 4 5	69) Does he/she enjoy touch	ing or rubbing certain	surfaces? Examples?	
1 2 3 4 5	70) Is your child overly sens	sitive to sounds or nois	es? Examples?	
1 2 3 4 5	71) Does your child cover h	is/her ears at certain so	ounds? Examples?	
1 2 3 4 5	72) Does it seem like your c	hild does not hear well	1?	
1 2 3 4 5	73) Does your child ever igr	nore loud noises? Exan	nples?	

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******	**********	********	********	******		
1	2	3	4	5		
Almost Never ********	Once in a While *************	<b>Sometimes</b>	Frequently **********	Almost Always		
1 2 3 4 5	74) Is your child overly into Examples?	erested in looking at sma	all details or parts of objec	ets?		
1 2 3 4 5	75) Is your child overly into fingers?	erested in watching the n	novements of his/her hand	ls or		
1 2 3 4 5	76) Is your child overly into	erested in watching object	cts that spin? Examples?			
1 2 3 4 5 77) Is your child overly interested in looking at lights or shiny objects? Examples?						
1 2 3 4 5	78) Does your child look at	t things out of the corner	of his/her eyes? Example	s?		
1 2 3 4 5	79) Does your child do thin	ngs without looking at wl	hat he/she is doing? Exam	ples?		
Motoric Behaviors						
1 2 3 4 5	80) Does your child spin or	whirl him/herself aroun	d for long periods of time	?		
1 2 3 4 5	81) Does your child move l (e.g., flapping or twistin	•	n unusual or repetitive wa	nys		
1 2 3 4 5	82) Does your child walk in	n unusual ways (e.g., on	his/her toes)? Example?			
1 2 3 4 5	83) Does your child hurt hi biting his/her hand, or	m/herself on purpose, su hitting any part of his/he		nead,		
Need for Sameness						
1 2 3 4 5	84) Does your child insist a certain jacket when he	on certain routines or rite e/she goes outside? Exar	_	wearing		
1 2 3 4 5	85) Does your child become ample, if a different p	e upset if changes are ma parent puts him/her to be	•	es –for		
1 2 3 4 5	86) Does your child becomfurniture is moved? Exa		ade in the household suc	ch as if		
1 2 3 4 5	87) Does your child have cocarrying around? What	•	toys that he/she insists or	1		
1 2 3 4 5	88) Does your child becom has a spot on it or book	e upset when things don s in a bookshelf are lean		e rug		
1 2 3 4 5	89) Does your child becom Example?	e agitated or upset by ne	w people, places, or activ	ities?		
1 2 3 4 5	90) Does your child insist of Example?	on wearing only certain c	clothes or types of clothes	?		

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1	2	3	4	5
Almost Never	Once in a While	Sometimes	Frequently	Almost Always
*******	********	******	********	******

- 1 2 3 4 5 91) Does he/she become upset when new clothes are put on?
- 1 2 3 4 5 92) Does your child have certain mealtime rituals, such as eating from only one specific plate? Example?
- 1 2 3 4 5 93) Does your child have unusual food preferences, such as only eating foods of certain color or texture? Example?

#### References

Stone, W.L., & Hogan, K.L. (1993). A structured parent interview for identifying young children with autism. <u>Journal of Autism and Developmental Disorders</u>, <u>23</u>, 639-652.

Stone, W.L., Coonrod, E.E., Pozdol, S.L., & Turner, L.M. (2003). The Parent Interview for Autism-Clinical Version (PIA-CV): A measure of behavioral change for young children with autism. <u>Autism: The International Journal of Research and Practice</u>, 7, 9-30.

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