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

Name:		Date:	Relationship to Ch	ild:
For each item at the present	below, please circle the num time.	ber that indicates how	often your child demonst	rates each behavior
******	*********	********	********	********
1 Almost Never	2 Once in a While	3 Sometimes	4 Frequently	5 Almost Always
	**************************************			
		Social Relating		
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 people who are trying to interact with him/her?			
1 2 3 4 5	6) Does your child "look th	nrough" people as if the	y 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 hi	m/her?	
1 2 3 4 5	9) Does your child become	e stiff or rigid when you	are holding or hugging	him/her?
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 to you for a kiss or a hug on his/her own, without you asking him/her to?			
1 2 3 4 5	12) Does he/she enjoy being kissed?			
1 2 3 4 5	13) Does your child seem to enjoy affection only on his/her own terms? Examples?			
1 2 3 4 5	14) Does your child smile	14) Does your child smile back at you when you smile at him/her?		
1 2 3 4 5	15) Does your child seem to be "hard to reach", or in his/her own world?			
1 2 3 4 5	16) Does your child active	ly avoid looking at peop	ple during interactions?	
1 2 3 4 5	17) Does your child look a interacting with him/he		ey are far away than whe	n they are

Page 1 of 6 Rev. 03/10/2008

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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		
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	· • • • • • • • • • • • • • • • • • • •	Affective Responses		r v v v v v v v v v v v v v v v v v v v		
1 2 3 4 5	18) Does your child seem to		-	?		
1 2 3 4 5	19) Does he/she understand	I the expressions on peo	ople's faces?			
1 2 3 4 5	20) Is it difficult to tell what what makes it hard to to		rom his/her facial express	sion?		
1 2 3 4 5	21) Does your child smile of	luring his/her favorite a	activities?			
1 2 3 4 5	22) Does your child smile,	laugh, and cry when yo	ou expect him/her to?			
1 2 3 4 5	23) Do your child 's moods	change quickly, withou	ut warning? Examples?			
1 2 3 4 5	24) Does your child become	24) Does your child become very frightened of harmless things? Examples?				
1 2 3 4 5	25) Does your child laugh f	25) Does your child laugh for no obvious reason?				
1 2 3 4 5	26) Does your child have se	evere temper tantrums?				
		<b>Peer Interactions</b>				
1 2 3 4 5	27) Does your child prefer	to play alone instead of	with other children?			
1 2 3 4 5	28) Will your child ever joi	28) Will your child ever join in play with another child?				
1 2 3 4 5	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 oth	her children by biting, l	nitting, 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 clap	oping		
1 2 3 4 5	33) Does your child imitate the things you do around the house, such as sweeping or dusting? Examples?					
1 2 3 4 5	34) Do you have difficulty trying to get your child to imitate your movements when you want him/her to?					
1 2 3 4 5	35) Does your child imitate words or sounds when you want him/her to?					

Page 2 of 6 Rev. 03/10/2008

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***********	***************************************	**************************************	**************************************	********** 5		
Almost Never	Once in a While	Sometimes	Frequently	Almost Always		
*********	**********	**************************************	********	*******		
Nonverbal Co	<u>mmunication</u>					
	talking, there are lots of other w ls, or pointing, or gesturing.	ays that children can con	nmunicate their needs and	wants, such as		
1 2 3 4 5	36) How often does your ch	ild communicate to you	u 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	stand your child?				
1 2 3 4 5	39) Does your child become	e frustrated when he/she	e tries to communicate?			
The next que communicate	estions are about the <b>reasons</b> t e to:	that your child commur	nicates. How often does	your child		
1 2 3 4 5	40) Let you know he/she wa	ants something, like foo	od or a toy?			
1 2 3 4 5	41) Get you to do something	g for him/her? Example	e?			
1 2 3 4 5	42) Let you know he/she do	esn't want something?	How does he/she let you	ı know?		
1 2 3 4 5	43) Get your attention? Exa	ample?				
1 2 3 4 5	44) Show off? Example?					
1 2 3 4 5	45) Ask questions about an	object or event? Exam	ple?			
1 2 3 4 5	46) Ask your permission to	do something? Example	le?			
1 2 3 4 5	47) Get you to play with him/her? Example?					
1 2 3 4 5	48) Get you to look at some	thing he/she's intereste	d in? Example?			
	Ī	anguage Understandi	ing			
1 2 3 4 5	49) Does your child respond	l when you call his/her	name?			
1 2 3 4 5	50) Does your child underst	and what you say to hi	m/her? How can you tel	1?		
1 2 3 4 5	51) When you point at some	ething, does your child	look in the direction you	point in?		
1 2 3 4 5	52) Can your child follow si	52) Can your child follow simple directions such as "Get your coat"?				
1 2 3 4 5	53) Can your child follow longer directions that contain more than one idea, such as "Get your coat and bring me your shoes"?					
1 2 3 4 5	54) Does your child listen to	you when you read hi	m/her short stories?			
1 0 0 4 5	55) D					

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

Page 3 of 6 Rev. 03/10/2008

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******	*********	*******	*******	*******	
1	2	3	4	5	
Almost Never *********	Once in a While	<b>Sometimes</b>	Frequently ********	Almost Always *********	
		Object Play			
1 2 3 4 5	56) Does he/she play with l	ots of different toys?			
1 2 3 4 5	57) Does your child use his designed to be used? (e. the buttons on a pop-up	.g., rolling a toy car, pu			
1 2 3 4 5	58) Does your child use toy up over and over again?		n as spinning them, or li	ning them	
1 2 3 4 5	59) Does your child play we Examples?	·	s in the same exact way	each time?	
		Imaginative Play			
1 2 3 4 5	60) Does your child use his such as pretending the Examples?		playing with toys or oth hat a comb is an airplan		
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 m	any different pretend ga	ames?		
		Sensory Responses			
1 2 3 4 5	64) Does your child fail to bumping his/her head?			or	
1 2 3 4 5	65) Is your child overly sensitive to being touched?				
1 2 3 4 5	66) Does your child examine objects by sniffing or smelling them?				
1 2 3 4 5	67) Does he/she examine objects by licking or tasting them?				
1 2 3 4 5	68) Is your child overly interested in the way things feel?				
1 2 3 4 5	69) Does he/she enjoy touching or rubbing certain surfaces? Examples?				
1 2 3 4 5	70) Is your child overly sen	sitive to sounds or nois	es? Examples?		
1 2 3 4 5	71) Does your child cover h	nis/her ears at certain so	ounds? Examples?		
1 2 3 4 5	72) Does it seem like your	child does not hear well	1?		
1 2 3 4 5	73) Does your child ever ignore loud noises? Examples?				

Page 4 of 6 Rev. 03/10/2008

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1	2	3	4	5		
Almost Never	Once in a While	Sometimes	Frequently	Almost Always		
*****	**********	*******	*******	*****		
1 2 3 4 5	74) Is your child overly int Examples?	erested in looking at sma	all details or parts of object	ss?		
1 2 3 4 5	75) Is your child overly int fingers?	erested in watching the	movements of his/her hand	s or		
1 2 3 4 5	76) Is your child overly into	erested in watching obje	ects that spin? Examples?			
1 2 3 4 5	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 a	t things out of the corner	of his/her eyes? Examples	;?		
1 2 3 4 5	79) Does your child do thir	ngs without looking at w	that he/she is doing? Examp	ples?		
		<b>Motoric Behaviors</b>				
1 2 3 4 5	80) Does your child spin or	whirl him/herself arour	nd for long periods of time?	?		
1 2 3 4 5	81) Does your child move (e.g., flapping or twisting	_	in unusual or repetitive wa	ys		
1 2 3 4 5	82) Does your child walk is	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		ead,		
		Need for Sameness				
1 2 3 4 5	84) Does your child insist a certain jacket when h	on certain routines or rit e/she goes outside? Exam	_	vearing		
1 2 3 4 5	•	ne upset if changes are m parent puts him/her to be	•	es –for		
1 2 3 4 5	86) Does your child becomfurniture is moved? Example 1.		nade in the household such	h as if		
1 2 3 4 5	87) Does your child have c carrying around? What	_	r toys that he/she insists on			
1 2 3 4 5	88) Does your child become upset when things don't look rightsuch as if the rug has a spot on it or books in a bookshelf are leaning? Examples?					
1 2 3 4 5	89) Does your child become agitated or upset by new people, places, or activities? Example?					
1 2 3 4 5	90) Does your child insist of Example?	on wearing only certain	clothes or types of clothes?			

Page 5 of 6 Rev. 03/10/2008

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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.

Page 6 of 6 Rev. 03/10/2008