

# Practice Parameter for the Assessment and Treatment of Children and Adolescents With Autism Spectrum Disorder

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Autism spectrum disorder is characterized by patterns of delay and deviance in the development of social, communicative, and cognitive skills that arise in the first years of life. Although frequently associated with intellectual disability, this condition is distinctive in its course, impact, and treatment. Autism spectrum disorder has a wide range of syndrome expression and its management presents particular challenges for clinicians. Individuals with an autism spectrum disorder can present for clinical care at any point in development. The multiple developmental and behavioral problems associated with this condition necessitate multidisciplinary care, coordination of services, and advocacy for individuals and their families. Early, sustained intervention and the use of multiple treatment modalities are indicated. *J. Am. Acad. Child Adolesc. Psychiatry*, 2014;53(2):237–257. **Key Words:** autism, Practice Parameters, guidelines, developmental disorders, pervasive developmental disorders

Since the first Practice Parameter for the Assessment and Treatment of Children, Adolescents, and Adults with Autism and Other Pervasive Developmental Disorders<sup>1</sup> was published, several thousand research and clinical articles have appeared and the diagnostic criteria for autism have changed. This Parameter revision provides the opportunity to update the previous version and incorporate new research. Because the extant body of research was performed under the *DSM-IV-TR* diagnostic schema, the evidence will be presented using that terminology. This Parameter is applicable to evaluation of children and adolescents (< 17 years of age) but often will have some relevance to adults. This document presumes basic familiarity with aspects of normal child development and child psychiatric diagnosis and treatment. Unless otherwise noted, the term *child* refers to adolescents and younger children, and *parents* refers to the

child's primary caretakers regardless of whether they are the biological or adoptive parents or legal guardians.

## METHODOLOGY

The first version of this Parameter was published in 1999. For this revision, the literature search covered the period from 1991 to March 19, 2013 using the PubMed, PsycINFO, Cochrane, and CINAHL (EBSCO) databases. The initial searches were inclusive and sensitive. Search terms were a combination of MeSH headings and keywords, and the MeSH headings were adjusted to terms used by PsycINFO and CINAHL by using their thesauri.

In PubMed the MeSH terms *autistic disorder*, *childhood development disorders—pervasive*, *Asperger\**, and *Rett\** and the keyword *autism* were searched. The initial search yielded 20,807 results. Then, the results were limited to English, human, *all child (0 to 18 years)*, and 1991 to March 19, 2013. Additional limits included classic article, clinical trial, comparative study, controlled clinical trial, evaluation studies, guideline, historical article, meta-analysis, practice guideline, multicenter study, randomized controlled trial, review, twin study,



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