



mhs.com/ASRS

About the ASRS

The ASRS is the first nationally-standardized, norm-referenced instrument to identify symptoms, behaviors, and associated features of Autism Spectrum Disorder in children and adolescents.

Age

2–18

Administration

Parent-completed
Teacher-completed

Administration Time

Full-Length Form: 15 minutes
Short Form: 5 minutes

Number of Items

Ages 2–5: 70 items
Ages 6–18: 71 items
Short Form (Ages 2–18): 15 items

Formats

Handscored (QuikScore™)
Online
Scoring Software

Translations

Spanish

Qualification Level

B-level



ASRS®

Goldstein & Naglieri—
Autism Spectrum Rating Scales™

The Purpose of the ASRS

The Goldstein & Naglieri—*Autism Spectrum Rating Scales* (ASRS) are designed to effectively identify symptoms, behaviors, and associated features of Autism Spectrum Disorder (ASD) in children and adolescents ages 2 through 18.

How the ASRS Works

This innovative instrument, authored by Sam Goldstein, Ph.D., and Jack A. Naglieri, Ph.D., is the first nationally-standardized, and norm-referenced assessment to identify symptoms, behaviors, and associated features of Autism Spectrum Disorder. Using a five-point Likert rating scale, parents, teachers, and other caregivers are asked to evaluate how often they observed specific behaviors in the child or adolescent in areas such as socialization, communication, unusual behaviors, behavioral rigidity, sensory sensitivity, and self-regulation.

The ASRS assessment is an easy-to-use tool intended for psychologists, school psychologists, clinical social workers, physicians, counselors, psychiatric workers, and pediatric/psychiatric nurses.

There are two versions of the full-length form: ASRS (2–5 Years) for ratings of children aged 2 to 5 Years and ASRS (6–18 Years) for ratings of children or adolescents aged 6 to 18 years. There is also a 15-item ASRS Short Form available. The ASRS Short Form provides an efficient way to evaluate large numbers of children for possible ASD and can be used for monitoring treatment progress.

The ASRS can be easily and quickly completed and scored automatically with the ASRS online from any Internet connection. The ASRS can also be automatically scored using the ASRS scoring software simply by entering responses from a completed paper-and-pencil administration into the software (ratings from paper-and-pencil forms can also be scored online). Paper-and-pencil administrations on ASRS QuikScore forms can be scored by hand.

The ASRS will assist clinicians, school psychologists, and other mental health professionals in the diagnostic process. ASRS items assess DSM-5* symptom criteria for ASD. When used in combination with other assessment information, results from the ASRS can help guide diagnostic decisions, treatment planning, and ongoing monitoring of response to intervention. The ASRS can also be used to evaluate the effectiveness of a treatment program for a child with an ASD.

There are three report types for all of the ASRS forms:

- Interpretive Reports
- Comparative Reports
- Progress Monitoring Reports

Reports can be generated quickly and easily using software or online scoring.

Scales

The ASRS includes a Total Score, a DSM-5* Scale, ASRS Scales, and Treatment Scales. The comprehensive scales are:

ASRS Scales

- Social/Communication
- Unusual Behaviors
- Self-Regulation (ASRS [6–18 Years] only)

Treatment Scales

- Peer Socialization
- Adult Socialization
- Social/Emotional Reciprocity
- Atypical Language
- Stereotypy
- Behavioral Rigidity
- Sensory Sensitivity
- Attention/Self Regulation (ASRS [2–5 Years] only)
- Attention (ASRS [6–18 Years] only)

***DSM-IV-TR Scoring still available for online and software options.**

Scoring Options

The following two scoring options are available for the MHS Online Assessment Center and the MHS Scoring Software:

- The standard scoring method which can be continued to be used for individuals without limited speech.
- An alternative scoring method for individuals who do not speak or speak infrequently.

Normative Data

The ASRS was standardized on 2,560 cases from across the United States. The standardization samples include 640 cases for the ASRS (2–5 Years), with 320 parent and 320 teacher forms. Additionally, it included 1,920 cases for the ASRS (6–18 Years), with 960 parent and 960 teacher forms. Over 1,200 clinical cases were also collected. The disorders in the clinical sample include:

- Autism Spectrum Disorder
- Attention-Deficit/Hyperactivity Disorder
- Mood and Anxiety Disorders
- Developmental Delay
- Communication Disorders

The ASRS can be depended on to back up clinical decisions, as it has excellent reliability and validity.

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