

A. Impairment in social interaction as manifested by at least two of the following:

Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction.

Failure to develop peer relationships appropriate to developmental level.

A lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or point out objects of interest).

Lack of social or emotional reciprocity.

B. Qualitative impairment in communication as manifested by at least one of the following:

Delay in or total lack of the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime).

In individuals with adequate speech, marked impairment in the ability to initiate or sustain conversation with others.

Stereotyped and repetitive use of language or idiosyncratic language.

Lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level.

C. Restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least one of the following:

Encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus.

Apparently inflexible adherence to specific, nonfunctional routines or rituals.

Stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements).

Persistent preoccupation with parts of objects.

1. deficits in social-emotional reciprocity; which may range, for example, from abnormal social approach and failure of normal back and forth conversation, to reduced sharing of interests, emotions, or affect, to failure to initiate or respond

2. deficits in communicative behaviors used for social interaction; ranging, for example, from poorly integrated verbal and nonverbal communication, to abnormalities in eye contact and body-language or deficits in understanding and use of gestures, to a total lack of facial expressions and nonver-

3. deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behavior to suit various social contexts, difficulties in sharing imaginative play or in making friends, to absence of interest in peers.

1. stereotyped or repetitive motor movements, use of objects, or speech, (such as simple motor stereotypies, lining up toys or flipping plates, echolalia, idiosyncratic phrases).

2. insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior (such as extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat same food every day).

3. highly restricted, fixated interests that are abnormal in intensity or focus (such as strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).

4. hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of the environment (such as apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

Becomes a specifier.

A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following

B. Restricted, repetitive patterns of behavior, interests, or activities as manifested by at least two of the following, currently or historically.