AbaTools

ADULT ASD PROTOCOL

Adult Autism Screening Protocol

A structured, ready-to-use protocol of **13 adult ASD screening scales** — built to support screening, clinical analysis and diagnostic decision-making with greater confidence.

Self-report • Informant • Analysis • Decision

13	9	2
Structured screening scales	Core clinical domains	Perspectives: self & informant

HOW TO USE THIS PROTOCOL

Before You Begin

Adults are often diagnosed late, after years of masking and self-doubt. This protocol gives you a consistent, multi-perspective way to screen, organise and reason about adult ASD presentations.

A structured protocol

Thirteen scales cover social communication, restricted & repetitive patterns, sensory differences, masking, regulation and real-world impact.

Self-report & informant

Pair the person's own report with observations from someone who knows them well — adult presentations are easily masked in a single perspective.

Designed for masking

A dedicated camouflaging screen and retrospective history help surface traits that are actively compensated for in everyday adult life.

Screening, not diagnosis

These tools support clinical reasoning and triage. Diagnosis requires a comprehensive, developmentally-informed evaluation by a qualified professional.

A DEFENSIBLE SCREENING SEQUENCE

1. **Begin with self-report**
   Administer the core social-communication scales and the masking screen first.
2. **Add informant & history**
   Gather collateral observation and a retrospective developmental history.
3. **Screen co-occurring & impact**
   Check anxiety/mood overlap and quantify real functional impact.
4. **Consolidate & decide**
   Bring scores together, weigh the pattern, and document the next step.

THE PROTOCOL

The 13-Scale Protocol

A complete adult ASD screening protocol. Administer the full sequence, or select the scales most relevant to the presenting question. Every scale is ready to print and use.

#	SCREENING SCALE	FORMAT	RESPONDENT	ITEMS	PRIMARY FOCUS
01	Adult Social Communication Screen	Form	Self-report	12	Conversation, nonverbal cues, social inference
02	Social Reciprocity & Relationships Screen	Form	Self-report	12	Relationships, reciprocity, empathy expression
03	Restricted & Repetitive Behaviours Screen	Screen	Self-report	8	Repetitive patterns, movements, rituals
04	Sensory Sensitivity Profile	Screen	Self-report	8	Sensory hyper- and hypo-reactivity
05	Routines & Insistence on Sameness	Screen	Self-report	7	Predictability, change & transitions
06	Focused / Special Interests Screen	Screen	Self-report	7	Depth, intensity & focus of interests
07	Camouflaging & Masking Screen	Screen	Self-report	8	Compensation, masking & social effort
08	Executive Function & Daily Living	Screen	Self-report	8	Planning, organisation, daily independence
09	Emotional Regulation & Overload	Screen	Self-report	7	Overwhelm, shutdown & meltdown
10	Co-occurring Concerns Screen	Checklist	Self / Clinician	8	Anxiety, mood & differential overlap
11	Developmental History Screen	Worksheet	Self / Informant	6	Childhood indicators (retrospective)
12	Informant / Collateral Observation	Worksheet	Informant	6	Traits observed by someone close
13	Functional Impact & Quality of Life	Screen	Self / Clinician	8	Work, relationships, independence, wellbeing

• Form
Full self-report scale

• Screen
Compact domain scale

• Checklist
Differential / overlap flags

• Worksheet
History & informant input

CLINICAL REFERENCE

Understanding Adult ASD

Autism in adults often looks different from the childhood picture. Years of learned compensation, co-occurring anxiety and missed early signs make structured, multi-source screening essential.

Social communication

Differences in conversation, nonverbal cues, social inference and reciprocal relationships — often compensated for with effortful, learned strategies.

Restricted, repetitive & sensory

Routines, focused interests, repetitive behaviours and marked sensory sensitivities that shape daily life and wellbeing.

Camouflaging & masking

Many adults consciously hide traits to "fit in", which exhausts them and hides the picture from clinicians — a key reason adult screening is challenging.

Late diagnosis & impact

Adults often present with anxiety, burnout or relationship difficulties. Functional impact and history matter as much as symptom counts.

i Screen with **more than one source** and across **self-report, history and observed function**. A low self-report score does not rule out ASD when masking is high — corroborate with informant and developmental history.

S-01 Social Communication Screen

Adult self-report · Ages 16+

SOCIAL COMMUNICATION

CLIENT & SCREENING INFORMATION

Client / Respondent: Date of birth:

Age: Occupation / Setting: Date:

Completed by: Relationship / Role:

INSTRUCTIONS

These statements describe everyday social situations. For each one, mark how true it is of you **generally**, across most of your adult life — not just on a good or bad day.

RESPONSE KEY

0	1	2	3
Rarely / Never Not like me	**Sometimes** A little like me	**Often** Mostly like me	**Almost always** Very like me

SCREENING ITEMS

#	BEHAVIOUR / OBSERVATION	0	1	2	3
1	I find it hard to know when it is my turn to speak in a conversation	☐	☐	☐	☐
2	I have difficulty reading people's facial expressions or tone of voice	☐	☐	☐	☐
3	People have said I talk too much, too formally, or about the "wrong" topics	☐	☐	☐	☐
4	Making and holding natural eye contact feels effortful or uncomfortable	☐	☐	☐	☐
5	I find small talk confusing, draining, or pointless	☐	☐	☐	☐
6	I miss hints, sarcasm, or things that are implied rather than said directly	☐	☐	☐	☐
7	I find it hard to tell when someone is bored or wants to end a conversation	☐	☐	☐	☐
8	I plan, rehearse, or script conversations in advance	☐	☐	☐	☐
9	I tend to take what people say very literally	☐	☐	☐	☐
10	Group conversations are much harder for me than one-to-one	☐	☐	☐	☐
11	My facial expressions or gestures don't always match what I mean	☐	☐	☐	☐
12	I find it hard to judge how close or formal to be with different people	☐	☐	☐	☐

S-02 Social Reciprocity & Relationships

Adult self-report · Ages 16+

RELATIONSHIPS & RECIPROCITY

CLIENT & SCREENING INFORMATION

Client / Respondent: Date of birth:

Age: Occupation / Setting: Date:

Completed by: Relationship / Role:

INSTRUCTIONS

Mark how true each statement is of you across your adult life. There are no right or wrong answers — answer as honestly as you can.

RESPONSE KEY

0	1	2	3
Rarely / Never Not like me	**Sometimes** A little like me	**Often** Mostly like me	**Almost always** Very like me

SCREENING ITEMS

#	BEHAVIOUR / OBSERVATION	0	1	2	3
1	I find it difficult to build or maintain friendships	☐	☐	☐	☐
2	I am often unsure how to show interest in other people's lives	☐	☐	☐	☐
3	Others have described me as distant, blunt, or hard to read	☐	☐	☐	☐
4	I find it hard to know what to say when someone is upset	☐	☐	☐	☐
5	I prefer to spend time alone and find socialising tiring	☐	☐	☐	☐
6	I struggle to sense the "unwritten rules" of social situations	☐	☐	☐	☐
7	I rarely share my enjoyment or achievements with others spontaneously	☐	☐	☐	☐
8	I have been misunderstood or left out without understanding why	☐	☐	☐	☐
9	The back-and-forth of relationships feels effortful to me	☐	☐	☐	☐
10	I find it hard to adjust how I act in different social settings	☐	☐	☐	☐
11	I have few close relationships, even when I would like more	☐	☐	☐	☐
12	Dating or intimate relationships feel especially confusing to me	☐	☐	☐	☐

CORE DOMAINS

Repetitive Patterns & Sensory

Restricted, repetitive behaviours and sensory differences are core to ASD and often have the greatest day-to-day impact for adults.

Scale 03 — Restricted & Repetitive Behaviours

Repetitive patterns, movements & rituals

Self-report · Ages 16+ · 8 items

1	I repeat movements or actions to feel calm or focused	☐ ☐ ☐ ☐
2	I have strong habits or rituals that are hard to change	☐ ☐ ☐ ☐
3	I notice small changes or details others overlook	☐ ☐ ☐ ☐
4	I like to organise, line up, or order things precisely	☐ ☐ ☐ ☐
5	I repeat words, phrases, or sounds (aloud or in my head)	☐ ☐ ☐ ☐
6	I do certain things in a fixed sequence or "the right way"	☐ ☐ ☐ ☐
7	Disrupting my routine makes me uncomfortable	☐ ☐ ☐ ☐
8	I rely on repetitive activities to manage stress	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 24

Scale 04 — Sensory Sensitivity Profile

Sensory hyper- and hypo-reactivity

Self-report · Ages 16+ · 8 items

1	Certain sounds are painful or overwhelming for me	☐ ☐ ☐ ☐
2	Bright or flickering lights bother me	☐ ☐ ☐ ☐
3	Particular textures, fabrics, or food textures are intolerable	☐ ☐ ☐ ☐
4	Strong smells affect me more than they do others	☐ ☐ ☐ ☐
5	Busy or crowded places quickly overwhelm me	☐ ☐ ☐ ☐
6	I seek out specific sensations (pressure, movement, sound)	☐ ☐ ☐ ☐
7	I notice background sensations others tune out	☐ ☐ ☐ ☐
8	I feel drained after sensory-rich environments	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 24

CORE DOMAINS

Routines & Focused Interests

Insistence on sameness and deep, focused interests are common adult strengths and stressors — worth screening for both their impact and their value.

Scale 05 — Routines & Insistence on Sameness

Predictability, change & transitions

Self-report · Ages 16+ · 7 items

1	I rely on routines to get through the day	☐ ☐ ☐ ☐
2	Unexpected changes to plans distress me	☐ ☐ ☐ ☐
3	I prefer things to stay the same over time	☐ ☐ ☐ ☐
4	Transitions between activities are hard for me	☐ ☐ ☐ ☐
5	I plan extensively to avoid surprises	☐ ☐ ☐ ☐
6	I feel anxious when I cannot predict what will happen	☐ ☐ ☐ ☐
7	I have a strong preference for familiar places and people	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 21

Scale 06 — Focused / Special Interests

Depth, intensity & focus of interests

Self-report · Ages 16+ · 7 items

1	I have interests I pursue with unusual depth or intensity	☐ ☐ ☐ ☐
2	I can focus on a topic of interest for long periods	☐ ☐ ☐ ☐
3	I know a great deal about a few specific subjects	☐ ☐ ☐ ☐
4	My interests are central to how I spend my time	☐ ☐ ☐ ☐
5	I find it hard to stop once absorbed in an interest	☐ ☐ ☐ ☐
6	Others have commented on how intense my interests are	☐ ☐ ☐ ☐
7	My interests are a major source of comfort and identity	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 21

CORE DOMAINS

Masking & Executive Function

Camouflaging hides the clinical picture, while executive-function load shapes real independence. Screen both to understand effort and impact.

Scale 07 — Camouflaging & Masking

Compensation, masking & social effort

Self-report · Ages 16+ · 8 items

1	I consciously copy others' gestures or expressions to fit in	☐ ☐ ☐ ☐
2	I rehearse phrases or facial expressions before social events	☐ ☐ ☐ ☐
3	I force eye contact even when it feels uncomfortable	☐ ☐ ☐ ☐
4	I hide my true reactions to seem "normal"	☐ ☐ ☐ ☐
5	Socialising leaves me exhausted and needing to recover	☐ ☐ ☐ ☐
6	I feel I am performing rather than being myself with people	☐ ☐ ☐ ☐
7	I have built rules to pass as socially typical	☐ ☐ ☐ ☐
8	People would be surprised how much effort socialising takes me	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 24

Scale 08 — Executive Function & Daily Living

Planning, organisation & independence

Self-report · Ages 16+ · 8 items

1	I struggle to start tasks even when I intend to	☐ ☐ ☐ ☐
2	I find it hard to plan and organise multi-step tasks	☐ ☐ ☐ ☐
3	I lose track of time or run late despite trying	☐ ☐ ☐ ☐
4	I find everyday admin (bills, forms, email) overwhelming	☐ ☐ ☐ ☐
5	I have difficulty switching between tasks	☐ ☐ ☐ ☐
6	I rely on lists, alarms, or others to stay on track	☐ ☐ ☐ ☐
7	Keeping a household or routine running is effortful	☐ ☐ ☐ ☐
8	I become paralysed when there is too much to do	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 24

REGULATION & OVERLAP

Regulation & Co-occurring Concerns

Emotional overload and co-occurring anxiety or low mood are extremely common in adults seeking assessment — and central to both differential reasoning and care.

Scale 09 — Emotional Regulation & Overload

Overwhelm, shutdown & meltdown

Self-report · Ages 16+ · 7 items

1	I become overwhelmed more easily than people around me	☐ ☐ ☐ ☐
2	When overloaded, I shut down and withdraw	☐ ☐ ☐ ☐
3	I sometimes reach a breaking point ("meltdown") under stress	☐ ☐ ☐ ☐
4	I find it hard to identify or name what I feel	☐ ☐ ☐ ☐
5	Recovering after being overwhelmed takes me a long time	☐ ☐ ☐ ☐
6	Strong emotions feel physically intense or hard to control	☐ ☐ ☐ ☐
7	I avoid situations that I know will overload me	☐ ☐ ☐ ☐

Rate each 0–3 (0 Never · 3 Very Often)

Subtotal: ____ / 21

Scale 10 — Co-occurring Concerns

Anxiety, mood & differential overlap

Self / Clinician · 8 items

- ✓ Persistent anxiety or worry
- ✓ Low mood or depression
- ✓ Social anxiety / avoidance
- ✓ History of burnout or exhaustion
- ✓ Difficulty with sleep
- ✓ Past misdiagnosis or unclear diagnoses
- ✓ Self-esteem affected over time
- ✓ Thoughts that life feels harder than it should

HISTORY & CORROBORATION

History, Informant & Impact

Retrospective history and an informant's view help confirm whether traits are long-standing — and functional impact anchors the clinical significance.

Scale 11 — Developmental History

Childhood indicators, completed with self or informant

Self / Informant · 6 items

1	As a child, had difficulty making friends or playing with others	☐ ☐ ☐ ☐
2	Showed intense, focused interests from an early age	☐ ☐ ☐ ☐
3	Preferred routines and became upset by change	☐ ☐ ☐ ☐
4	Was described as "in their own world", literal, or unusually serious	☐ ☐ ☐ ☐
5	Had sensory sensitivities or unusual reactions early on	☐ ☐ ☐ ☐
6	Differences were present before adolescence	☐ ☐ ☐ ☐

Scale 12 — Informant / Collateral Observation

Completed by a partner, family member or close friend

Informant · 6 items

1	Finds reciprocal conversation or social give-and-take difficult	☐ ☐ ☐ ☐
2	Relies heavily on routines and predictability	☐ ☐ ☐ ☐
3	Has noticeable sensory sensitivities	☐ ☐ ☐ ☐
4	Appears to mask or work hard in social settings	☐ ☐ ☐ ☐
5	Has intense interests they return to repeatedly	☐ ☐ ☐ ☐
6	These traits have been consistent for as long as I have known them	☐ ☐ ☐ ☐

Scale 13 — Functional Impact & Quality of Life

Real-world impact across key life domains

Self / Clinician · 8 items

1	Work or study is affected by these difficulties	☐ ☐ ☐ ☐
2	Close relationships are affected	☐ ☐ ☐ ☐
3	Independent daily living is effortful	☐ ☐ ☐ ☐
4	Mental health and wellbeing are affected	☐ ☐ ☐ ☐
5	Social isolation is a recurring problem	☐ ☐ ☐ ☐
6	Significant energy goes into coping or masking	☐ ☐ ☐ ☐
7	Confidence and self-understanding are affected	☐ ☐ ☐ ☐
8	Support or accommodations would meaningfully help	☐ ☐ ☐ ☐

MAKE SENSE OF THE SCORES

Scoring & Interpretation

Scores organise a complex picture into a clear screening signal. They guide clinical reasoning and next steps — they never replace a full diagnostic evaluation.

HOW TO SCORE

1. **Total each scale**
   Sum the 0–3 responses. Each 12-item form ranges 0–36; compact screens are scored out of their own maximum.

2. **Read the domain pattern**
   Look across social communication, RRB, sensory, routines and masking. ASD is a **pattern**, not one high score.

3. **Weigh masking & history**
   High masking with long-standing history can mean a low self-report score still warrants follow-up.

4. **Anchor with functional impact**
   Significant impact (Scale 13) plus a consistent domain pattern carries the most clinical weight.

INTERPRETING THE SCREENING BAND (PER 12-ITEM FORM)

BAND	SCORE RANGE	SUGGESTED SCREENING ACTION
Low	**0–11**	Few traits endorsed. Consider masking and corroborate before ruling out.
Mild	**12–20**	Some traits present. Add informant and history; review the domain pattern.
Moderate	**21–28**	Clear screening signal across domains. Consider formal diagnostic referral.
High	**29–36**	Strong, pervasive signal with impact. Refer for comprehensive adult ASD assessment.

i Bands are **interpretive screening guides**, not validated diagnostic cut-offs. Integrate scores with history, masking, co-occurring conditions and clinical judgement before forming any conclusion.

SUM Screening Summary & Decision

Clinician consolidation worksheet · Ages 16+

CONSOLIDATE & DECIDE

DOMAIN CONSOLIDATION

DOMAIN / SCALE	SCORE	BAND	SOURCE
01–02 · Social communication & reciprocity	☐	☐	Self
03–06 · RRB, sensory, routines & interests	☐	☐	Self
07–09 · Masking, executive function & regulation	☐	☐	Self
11–12 · Developmental history & informant	☐	☐	Informant
13 · Functional impact	☐	☐	All

▸ CLINICAL IMPRESSION & PATTERN

▸ CO-OCCURRING / DIFFERENTIAL NOTES

NEXT-STEP DECISION

- ☐ **Not indicated**
- ☐ **Gather more input**
- ☐ **Monitor / re-screen**
- ☐ **Refer for full assessment**

CLINICIAN SIGNATURE

DATE