



# The Childhood Autism Spectrum Test (CAST)

Child's Name

Date of Birth:

Parent's Name

Today's Date

	Yes	No
1 Does s/he join in playing games with other children easily?		
2 Does s/he come up to you spontaneously for a chat?		
3 Was s/he speaking by 2 years old?		
4 Does s/he enjoy sports?		
5 Is it important to him/her to fit in with the peer group?		
6 Does s/he appear to notice unusual details that others miss?		
7 Does s/he tend to take things literally?		
8 When s/he was 3 years old, did s/he spend a lot of time pretending (e.g., play-acting being a superhero, or holding teddy's tea parties)?		
9 Does s/he like to do things over and over again, in the same way all the time?		
10 Does s/he find it easy to interact with other children?		
11 Can s/he keep a two-way conversation going?		
12 Can s/he read appropriately for his/her age?		
13 Does s/he mostly have the same interests as his/her peers?		
14 Does s/he have an interest which takes up so much time that s/he does little else?		
15 Does s/he have friends, rather than just acquaintances?		
16 Does s/he often bring you things s/he is interested in to show you?		
17 Does s/he enjoy joking around?		
18 Does s/he have difficulty understanding the rules for polite behaviour?		
19 Does s/he appear to have an unusual memory for details?		
20 Is his/her voice unusual (e.g., overly adult, flat, or very monotonous)?		

		Yes	No
21	Are people important to him/her?		
22	Can s/he dress him/herself?		
23	Is s/he good at turn-taking in conversation?		
24	Does s/he play imaginatively with other children, and engage in role-play?		
25	Does s/he often do or say things that are tactless or socially inappropriate?		
26	Can s/he count to 50 without leaving out any numbers?		
27	Does s/he make normal eye-contact?		
28	Does s/he have any unusual and repetitive movements?		
29	Is his/her social behaviour very one-sided and always on his/her own terms?		
30	Does s/he sometimes say "you" or "s/he" when s/he means "I"?		
31	Does s/he prefer imaginative activities such as play-acting or story-telling, rather than numbers or lists of facts?		
32	Does s/he sometimes lose the listener because of not explaining what s/he is talking about?		
33	Can s/he ride a bicycle (even if with stabilisers)?		
34	Does s/he try to impose routines on him/herself, or on others, in such a way that it causes problems?		
35	Does s/he care how s/he is perceived by the rest of the group?		
36	Does s/he often turn conversations to		
37	Does s/he have odd or unusual phrases?		
38	Have teachers/health visitors expressed any concerns about his/her development?		
	If Yes, please specify: <input type="text"/>		
39	Has s/he ever been diagnosed with any of the following?:		
	Language delay		
	Hyperactivity/Attention Deficit Disorder (ADHD)		
	Hearing or visual difficulties		
	Autism Spectrum Condition		
	A physical disability		
	Other (please specify)		
	<input type="text"/>		