Why is it important to do developmental screening with a standardized, validated tool?
The AAP recommends developmental screening at 9, 18, and 24 or 30 months. It also recommends autism-specific screening at 18 and 24 months. In addition, the AAP recommends screening whenever a parent or provider concern is expressed.

Screening with a standardized, validated tool is more accurate than surveillance alone. Regular developmental screening with a standardized, validated tool helps detect developmental delays at an early age. Evidence shows that early identification and intervention improve outcomes. The AAP recommends that as soon as a developmental issue is suspected, physicians refer children to Early Intervention (i.e., Birth to 3 in WI; children 0-36 months) or Early Childhood Education Services (36 mos to school entry at 5 to 6 years old).

Why are trainings in Wisconsin focusing on the ASQ and the M-CHAT?
There are several validated tools for developmental screening as well as for autism-specific screening. For more information about screening tools, visit www.cdc.gov/ncbddd/child/devtool.htm.

Reasons providers in Wisconsin are choosing the ASQ:
- Easy to use
- Good psychometric qualities
- Available in multiple languages
- Promotes parent-provider partnership
- Commonly used by Birth to 3 providers, local public health departments, and home visiting programs, allowing for consistency between programs
- New ASQ-3 kit has questionnaires specifically for 9, 18, 24 and 30 months, and has questionnaires for a screening window from 1 month up to 66 months of age.
- Validated as a screening tool that is appropriate for use in the primary care setting for the ages for which AAP recommends developmental screening

Reasons providers in Wisconsin are choosing the M-CHAT:
- Easy to use
- Free and readily available
- Validated as an ASD-specific screening tool that is appropriate for use in the primary care setting for the ages for which AAP recommends screening for autism spectrum disorders

Where can I go to learn more about developmental screening?
The Wisconsin Medical Home Webcast Series offers online presentations on a range of topics including developmental screening, screening for autism spectrum disorders, and sharing screening results with families. The Webcasts are online at www.waisman.wisc.edu/connections/webcast.php.

Information on identifying children with special health care needs is also available at http://wimedicalhometoolkit.aap.org/identify/index.cfm.
How much does the ASQ cost, and where can I get it?
ASQ materials are available through Brookes Publishing at a cost of approximately $250.00 per kit. Orders can be placed at www.brookespublishing.com/store/books/squires-asq/index.htm. For practices ordering more than one kit, contact sales rep Jeannine Blimeline about obtaining a quantity discount at jblimeline@brookespublishing.com or 1-800-638-3775 ext. 46.

How much does the M-CHAT cost, and where can I get it?
M-CHAT materials are free. You can access electronic copies of the M-CHAT questionnaire, along with instructions and permission for use, scoring instructions, and scoring template at www.cdc.gov/ncbddd/actearly/hcp.

Can we share the ASQ kit with all of the physicians in our practice?
Can we share one ASQ kit across practice sites?
Practitioners at the same practice site can share one kit, but you cannot share the kit across sites. Each practice location needs its own kit. For current, detailed information about use of the ASQ, please visit www.agesandstages.com.

Can we bill for screening?
For current, detailed information about coding for developmental screening, point your web browser to www.medicalhomeinfo.org/tools/coding.html or contact the AAP Coding Hotline by email at aapcodinghotline@aap.org or by phone at 1-800-433-9016 ext. 4022.

If we use both the ASQ and M-CHAT, what screening schedule should we use?
The AAP recommends doing developmental screening (e.g., ASQ) at 9, 18, and 30 (or 24) months, and recommends doing an autism-specific screening (e.g., M-CHAT) at 18 and 24 months.

We plan to mail the ASQ questionnaire for completion before the appointment.
What do we do if a high percentage of families come in without the ASQ completed?
The rate of completion is often pretty high. But you can also have copies of the questionnaire available at the clinic, and build in time for the ASQ questionnaire to be completed in the waiting room. You may want to have a space set up for ASQ completion in waiting room.

How can we incorporate ASQ results into the electronic records system?
Because of copyright issues, you cannot post a copy of an individual scoring sheet for public access. You can, however, scan results into EMR as a scanned document / attached file. You can also record the score (e.g., “concerning,” “reassuring”).

Some HMOs have worked with Brookes Publishing to get permission to include the individual scoring sheets on their own intranet. The ASQ-3 also has an online version available for an additional cost. Contact Brookes Publishing at 1-800-638-3775 to learn more about these options.