



1115 Bethel Road, 1<sup>st</sup> Floor 43220 Phone (614) 538-0353

*Above all else, guard your heart, for out of it flows the Wellspring of life.*

*Proverbs 4:23*

## MENTAL HEALTH ISSUES

**Note:** For individuals (especially adolescents and adults) who currently have symptoms that no longer meet full criteria, "In Partial Remission" should be specified.

### *Alternative Causes*

Age-appropriate behaviors in active children; Mental Retardation; understimulating environments; oppositional behavior; another mental disorder; Pervasive Developmental Disorder; Psychotic Disorder; Other Substance-Related Disorder Not Otherwise Specified.



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## MENTAL HEALTH ISSUES

### Asperger's Disorder

#### *Potential Symptoms / Causes*

- A. Qualitative impairment in social interaction, as manifested by at least two of the following:
    1. 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
    2. failure to develop peer relationships appropriate to developmental level
    3. a lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or pointing out objects of interest to other people)
    4. lack of social or emotional reciprocity
  - B. Restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least one of the following:
    1. encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus
    2. apparently inflexible adherence to specific, nonfunctional routines or rituals
    3. stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements)
    4. persistent preoccupation with parts of objects
  - C. The disturbance causes clinically significant impairment in social, occupational, or other important areas of functioning.
  - D. There is no clinically significant general delay in language (e.g., single words used by age 2 years, communicative phrases used by age 3 years).
  - E. There is no clinically significant delay in cognitive development or in the development of age-appropriate self-help skills, adaptive behavior (other than in social interaction), and curiosity about the environment in childhood.
  - F. Criteria are not met for another specific Pervasive Developmental Disorder or Schizophrenia.
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## MENTAL HEALTH ISSUES

### *Alternative Causes*

Pervasive Developmental Disorder; Schizophrenia; Autistic Disorder; Rett's Disorder  
Childhood Disintegrative Disorder; Obsessive-Compulsive Disorder; Schizoid  
Personality Disorder.