

Identifying Autism Spectrum Disorder in Real-world Health Care Settings

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Despite efforts to reduce the age of diagnosis for autism spectrum disorder (ASD) and ameliorate disparities in the identification of children with ASD from diverse backgrounds, we have only recently begun to move the needle. We acknowledge the formidable task pediatricians face in recognizing ASD, a condition with relatively low prevalence and signs that may not be apparent during a brief clinical encounter. Despite its promise for aiding pediatricians and improving ASD identification, emerging research suggests that the Modified Checklist for Autism in Toddlers (M-CHAT) is less accurate in detecting ASD in clinical practice than previously thought. In this issue of *Pediatrics*, Carbone et al⁴ performed a retrospective study using electronic health record data to evaluate screening practices and ASD diagnostic outcomes for children aged 16 to 30 months seen between 2013 and 2016 in one large health system in Utah. This important work closely parallels a similar study published by our research group in *Pediatrics* in 2019. We applaud the editors for publishing 2 articles with such similar methods and findings, because replication is particularly critical when findings are in contrast to previous results and suggest the need to reconsider current clinical practice.

Journal:

[Pediatrics](#)

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