Confidential Draft Evaluation Report for SS

Notice: This evaluation report draft is for informational purposes only and should not be considered a final assessment or used in any official capacity. Further evaluation will be necessary for the purposes of diagnosis, accommodations, and/or advocacy.

Background Information

SS is a 31-year-old individual who was referred for a neurodevelopmental evaluation to explore patterns related to attention, sensory processing, emotional awareness, and social adaptation. The evaluation aimed to identify cognitive and behavioral patterns that may impact daily functioning and to provide appropriate recommendations for support.

Evaluation Measures

1. Adolescent/Adult Sensory Profile
2. Multidimensional Assessment of Interoceptive Awareness - Version 2 (MAIA-2)
3. Toronto Alexithymia Scale (TAS)
4. Attachment Style Questionnaire - Short Form (ASQ-SF)
5. Adult ADHD Self-Report Scale v1.1 (ASRS)
6. Brown Executive Function/Attention Scales
7. Ritvo Autism Asperger Diagnostic Scale – Revised (RAADS-R)
8. Camouflaging Autistic Traits Questionnaire (CAT-Q)
9. Obsessive-Compulsive Inventory - Revised (OCI-R)

Adolescent/Adult Sensory Profile

A measure of sensory processing patterns in daily life

Quadrant	Raw Score	Cut Score Range	Classification
Low Registration	37/75	36-44	More Than Most People
Sensation Seeking	33/75	15-35	Much Less Than Most People
Sensory Sensitivity	56/75	49-75	Much More Than Most People
Sensation Avoiding	61/75	50-75	Much More Than Most People

Graph

Reference lines indicate sensory processing pattern ranges

Interpretation

SS's sensory processing profile shows a pattern of high sensitivity and avoidance combined with reduced sensation seeking. The results indicate that SS is "Much More Than Most People" in both Sensory Sensitivity (56/75) and Sensation Avoiding (61/75), suggesting heightened awareness of sensory stimuli and a tendency to actively limit or avoid sensory experiences. SS also scores "More Than Most People" in Low Registration (37/75), indicating occasional difficulty noticing sensory input that others readily perceive. The "Much Less Than Most People" score in Sensation Seeking (33/75) suggests minimal interest in seeking additional sensory experiences.

## Key Findings

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The Sensory Profile results reveal a significant pattern of sensory differences that likely impact daily functioning. The combination of high sensitivity and active avoidance suggests that SS may find many everyday environments overwhelming or uncomfortable, necessitating significant adaptation or recovery time. The elevated Low Registration score alongside high Sensitivity may seem contradictory but suggests complex sensory processing where certain stimuli may be missed while others are experienced intensely. This pattern aligns with the sensory-motor findings on the RAADS-R and explains some of the challenges noted in the MAIA-2 regarding not-worrying about and not-distracting from uncomfortable sensations. These sensory differences likely contribute significantly to SS's daily stress levels and may impact social functioning, work performance, and overall quality of life.

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Multidimensional Assessment of Interoceptive Awareness - Version 2

A measure of awareness and responsiveness to internal bodily sensations

Scale	Average Score (0-5)	Percentile
Noticing	3.75	67.6
Not-Distracting	1.5	24.2
Not-Worrying	1.4	9.4
Attention Regulation	2.43	31.7
Emotional Awareness	3.8	64.6
Self-Regulation	3	58.6
Body Listening	4	93.8
Trust	4	71.5

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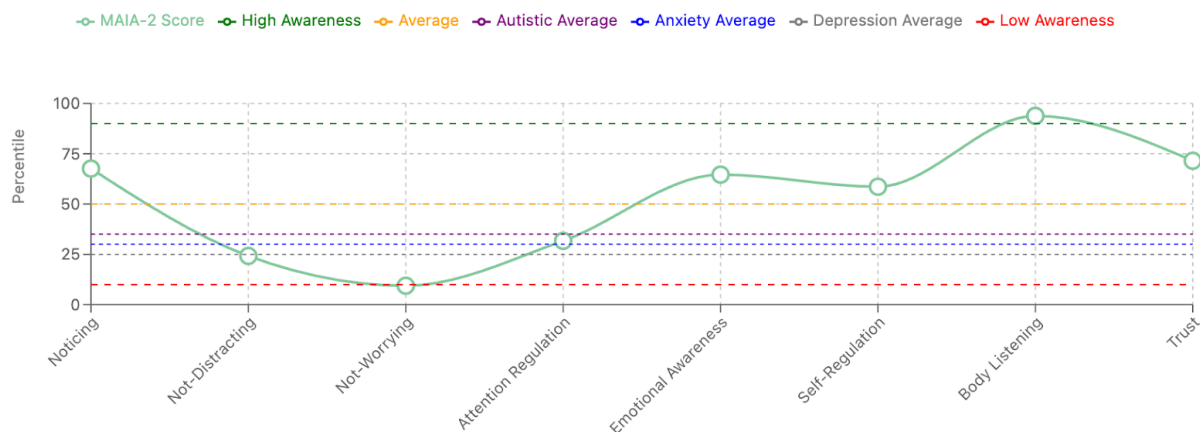
Reference Lines: 90th percentile (High Awareness), 50th percentile (Average), 35th percentile (Autistic Average), 30th percentile (Anxiety Average), 25th percentile (Depression Average), 10th percentile (Low Awareness)

Interpretation

SS's interoceptive awareness profile shows significant variability across domains. Notable strengths appear in Body Listening (93.8th percentile), Trust (71.5th percentile), Noticing (67.6th percentile), and Emotional Awareness (64.6th percentile), while significant challenges are indicated in Not-Worrying (9.4th percentile), Not-Distracting (24.2th percentile), and Attention Regulation (31.7th percentile). This pattern suggests strong abilities in detecting and listening to bodily sensations, but considerable difficulty in regulating responses to uncomfortable sensations and a tendency to become worried or distracted by them.

Key Findings

The MAIA-2 results reveal a highly contrasted pattern of interoceptive awareness. SS shows exceptional abilities in detecting internal bodily sensations and listening to the body for insight (Body Listening in the 93.8th percentile), paired with strong bodily trust and emotional awareness. However, these strengths are contrasted by significant challenges in managing worries about uncomfortable sensations (Not-Worrying at the 9.4th percentile) and a tendency to become distracted by discomfort. This pattern suggests that while SS is highly attuned to internal states, this sensitivity may sometimes become overwhelming, especially when sensations are unpleasant or uncomfortable. These findings correlate with the sensory sensitivity patterns observed in the Sensory Profile assessment and help explain some of the emotional identification challenges noted in the TAS.

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Toronto Alexithymia Scale (TAS)

A measure of difficulties in identifying and describing emotions

Scale	Score	Percentile	Descriptor
Total (20-100)	44	29	-
Difficulty Identifying Feelings (7-35)	19	66	Elevated
Difficulty Describing Feelings (5-25)	12	37	-
Externally Oriented Thinking (8-40)	13	4	-

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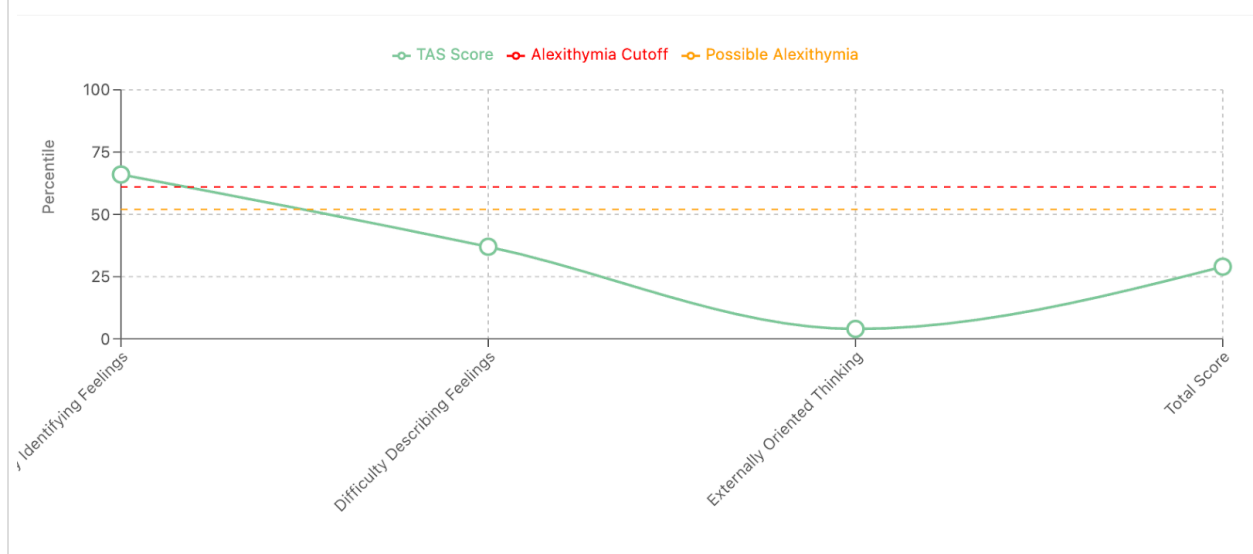
Reference Lines: 61st percentile (Alexithymia Cutoff), 52nd percentile (Possible Alexithymia)

Interpretation

SS's emotional awareness scores fall within typical ranges, with the overall profile (29th percentile) below the alexithymia cutoff (61st percentile). However, there is a notable elevation in Difficulty Identifying Feelings (66th percentile), which is slightly above the threshold for possible alexithymia in this specific domain. Interestingly, SS shows a very low score in Externally Oriented Thinking (4th percentile), suggesting a rich internal emotional life and strong introspective tendencies, despite some challenges in precisely identifying feelings.

Key Findings

The TAS results reveal a unique emotional processing profile with mixed patterns across domains. Notable strengths appear in SS's highly internally oriented thinking style, indicating strong introspective capabilities and engagement with emotional content. Relative challenges are indicated in identifying

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specific emotions as they arise in the body, which may create a disconnect between bodily sensations and emotional awareness. These patterns suggest potential difficulties in quickly naming emotions during intense experiences, while still maintaining an overall rich emotional inner life. These findings align with the variability seen in the MAIA-2 interoceptive awareness profile.

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Attachment Style Questionnaire - Short Form (ASQ-SF)

A measure of patterns in close relationships and attachment styles

Scale	Score	Percentile	Descriptor
Avoidant Attachment (Range -5 to 75)	43	91	High
Anxious Attachment (Range -18 to 57)	30	81	High
Discomfort with Closeness (Range 9 to 54) (Avoidant)	42	88	High
Relationships as Secondary (Range 4 to 24) (Avoidant)	13	80	High
Preoccupation with Relationships (Range 5 to 30) (Anxious)	20	74	Average
Need for Approval (Range 5 to 30) (Anxious)	19	64	Average
Confidence in Interpersonal Interactions (Range 6 to 36)	21	33	Average

Graph

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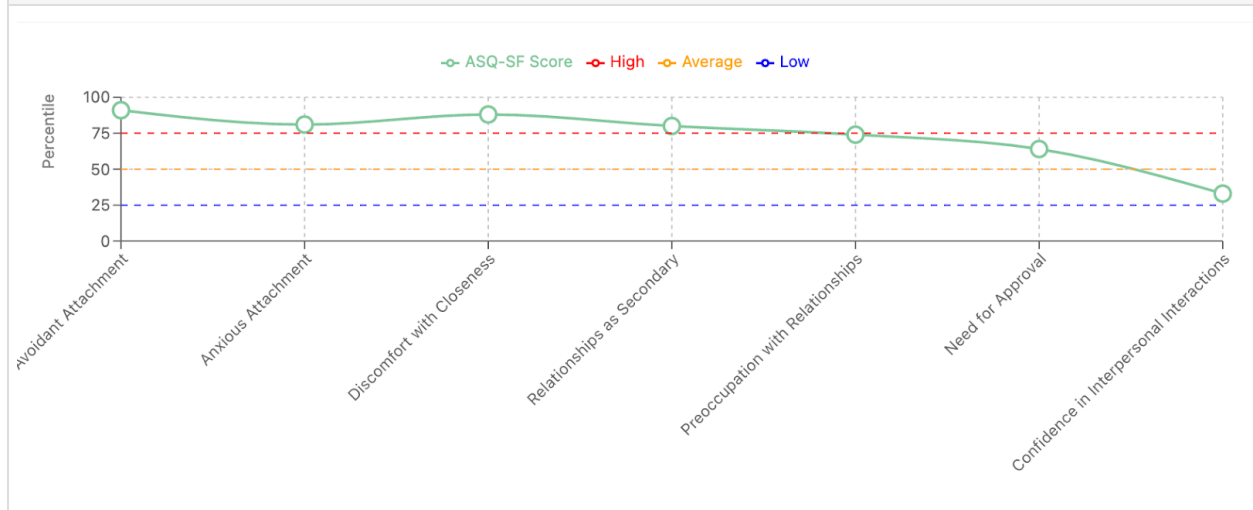
Reference Lines: 75th percentile (High), 50th percentile (Average), 25th percentile (Low)

Interpretation

SS's attachment profile indicates a mixed anxious-avoidant pattern, with particularly high scores on avoidant dimensions. The Avoidant Attachment score (91st percentile) and Anxious Attachment score (81st percentile) both fall in the high range, suggesting significant challenges in close relationships. The subscales indicate particular difficulty with closeness and intimacy (88th percentile) and a tendency to view relationships as secondary to other aspects of life (80th percentile). SS shows average confidence in interpersonal interactions (33rd percentile), suggesting some comfort in social situations despite the attachment challenges.

Key Findings

The ASQ-SF results reveal significant attachment-related challenges that likely impact SS's relationships and emotional wellbeing. The high scores on both anxious and avoidant dimensions suggest a "fearful-avoidant" attachment style, characterized by both desire for and fear of close relationships. This pattern is consistent with the social challenges identified in the RAADS-R and the high masking behaviors in the CAT-Q, suggesting that early social experiences may have contributed to both attachment difficulties and the development of compensatory social strategies. The average confidence in interpersonal interactions despite high avoidance may reflect SS's well-developed masking and compensation strategies. These attachment patterns may contribute to relationship difficulties, emotional dysregulation, and social exhaustion, and should be considered in the context of SS's neurodevelopmental profile.

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Adult ADHD Self-Report Scale v1.1 (ASRS)

A screening measure for attention-related traits in adults

Scale	Score	Percentile	Descriptor
Criterion (Part A)	11	51	Mild to Moderate
Additional Symptoms (Part B)	27	79	High
Total Score	38	70	Mild to Moderate
Inattentiveness	2	22%	-
Hyperactivity/Impulsivity	6	67%	-

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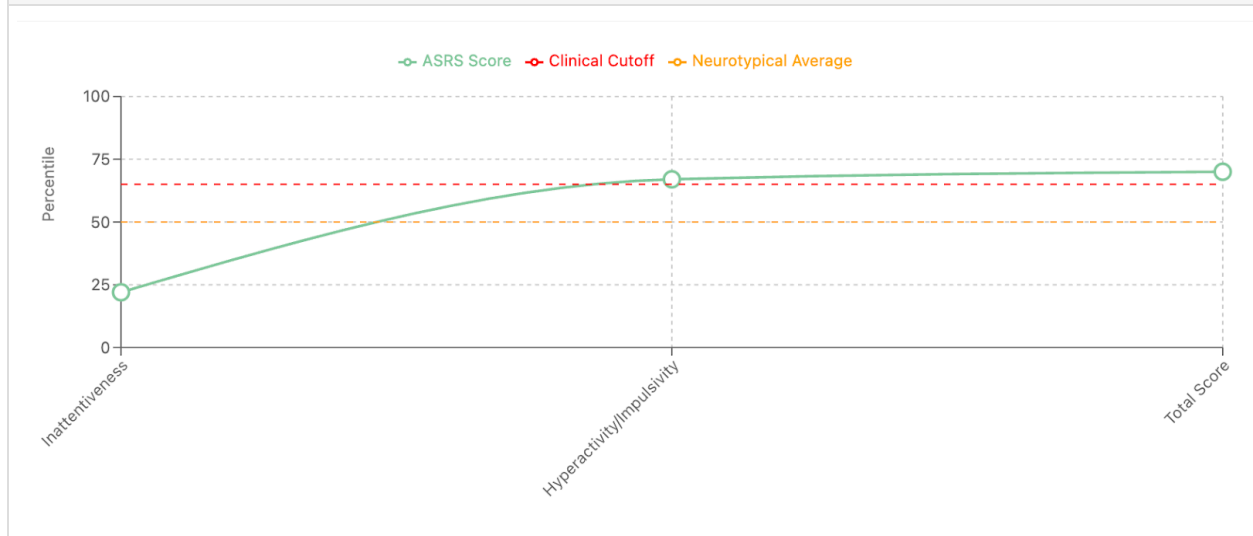
Reference Lines: 65th percentile (Clinical Cutoff), 50th percentile (Neurotypical Average)

Interpretation

SS's responses indicate ADHD traits that fall at the 70th percentile, slightly above the clinical significance threshold of the 65th percentile. The profile shows a notable difference between inattention (22%) and hyperactivity/impulsivity (67%), suggesting that hyperactive and impulsive traits are more prominent in SS's experience. The elevated score on Additional Symptoms (79th percentile) indicates challenges with executive functioning that may impact daily life, despite the more moderate score on core ADHD criteria.

Key Findings

The ASRS results show a mixed profile of attention-related traits, with hyperactivity/impulsivity being more prominent than inattention. Notable strengths include relatively intact attention capabilities, while relative challenges are indicated in impulse control and hyperactive tendencies. These patterns suggest potential difficulties in situations requiring sustained inhibition and quiet focus, while possibly benefiting

from environments that allow movement and dynamic engagement. Consider these results within the context of SS's high masking score on the CAT-Q, which may indicate compensatory strategies that mask attention-related challenges.

Brown Executive Function/Attention Scales

A comprehensive assessment of executive function capabilities

Scale	Raw Score	T Score	Percentile
Activation	7	53	69
Focus	20	74	98
Effort	8	53	70
Emotion	18	66	91
Memory	14	66	92
Action	11	59	83
Total Composite	78	64	90

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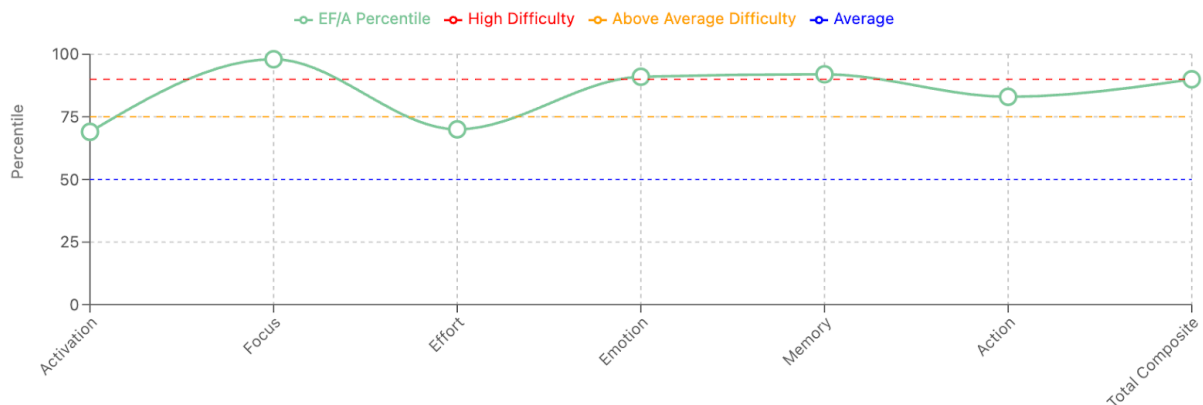
Reference Lines: 90th percentile (High Difficulty), 75th percentile (Above Average Difficulty), 50th percentile (Average)

Interpretation

SS's executive functioning profile indicates significant challenges in multiple domains, with scores above the 75th percentile suggesting above-average difficulties. The most prominent challenges appear in Focus (98th percentile), Memory (92nd percentile), and Emotion (91st percentile), with the overall composite score falling at the 90th percentile. These results suggest substantial difficulties with focusing attention, utilizing working memory, and managing emotional responses that impact executive function. The relatively lower scores in Activation (69th percentile) and Effort (70th percentile) suggest somewhat better abilities in initiating tasks and sustaining effort, though still falling above average for difficulties.

Key Findings

The Brown EF/A results reveal significant executive functioning challenges that likely impact daily functioning across multiple domains. The extremely high Focus score (98th percentile) indicates

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substantial difficulties with selective attention and distractibility, while the elevated Memory and Emotion scores suggest challenges with working memory and emotional regulation in service of goal-directed behavior. These patterns align with the ADHD traits noted in the ASRS and are likely exacerbated by the sensory processing differences identified in the Sensory Profile. The relative strengths in Activation and Effort may represent compensatory strategies that SS has developed over time. These executive function challenges likely contribute to difficulties in academic and occupational settings, particularly in environments with multiple sensory demands or distractions.

Ritvo Autism Asperger Diagnostic Scale – Revised (RAADS-R)

A self-report measure designed to identify autistic traits in adults

Scale	Raw Score	Neurotypical Percentile	Autism Percentile	Descriptor
Total Score (0-240)	172	99.9	84.4	Clinically Significant
Social Relatedness (0-117)	76	99.9	70	Clinically Significant
Circumscribed Interests (0-42)	31	99.9	65	Clinically Significant
Language (0-21)	18	99.9	95.7	Clinically Significant
Sensory Motor (0-60)	47	99.9	90.3	Clinically Significant

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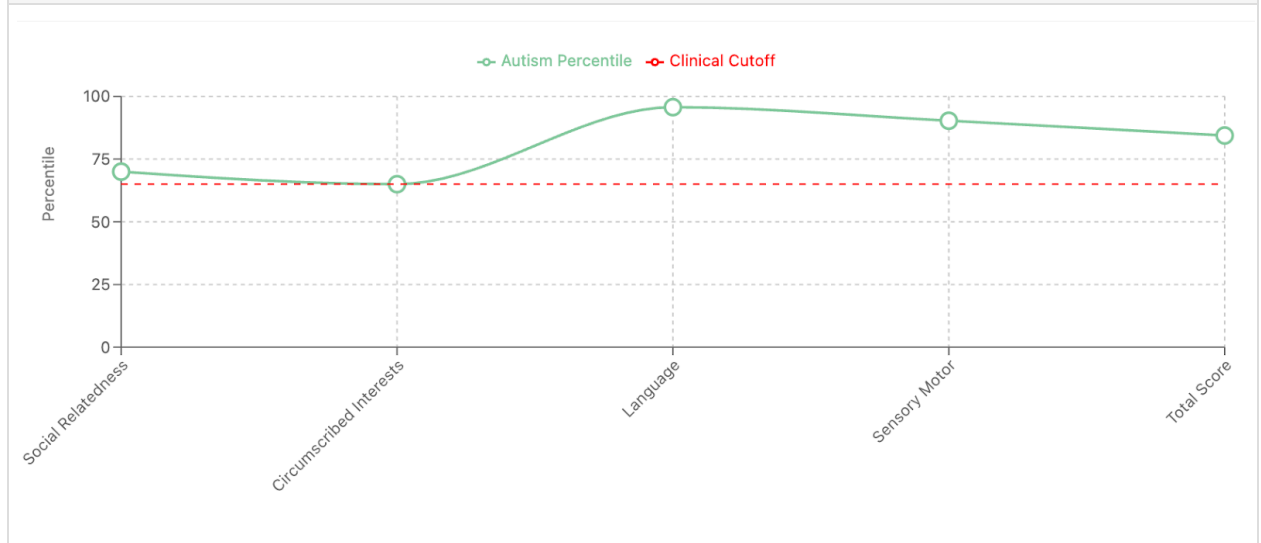
Reference Line: 65th percentile (Clinical Cutoff)

Interpretation

SS's responses indicate a pattern consistent with autism spectrum traits, with scores falling significantly above the clinical cutoff in all domains. The total score falls at the 84.4th percentile within the autism comparison group, suggesting a pronounced presentation of autistic traits. The most elevated domains are Language (95.7th percentile) and Sensory Motor (90.3rd percentile), indicating particular challenges with pragmatic language use and sensory processing. These results strongly suggest an autistic cognitive and perceptual style that impacts multiple domains of functioning.

## Key Findings

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The RAADS-R results show a consistent pattern of autistic traits across all domains. Notable areas of significance include language processing (95.7th percentile) and sensory-motor differences (90.3rd percentile), suggesting particular challenges with pragmatic language use, social communication, and sensory processing. These patterns suggest significant impact on social interaction, communication, and environmental adaptation. The results align with findings from the Sensory Profile assessment and the CAT-Q, which indicates high masking of these traits in social situations. This suggests that while these traits significantly impact SS's internal experience, they may not always be apparent to others due to well-developed compensatory strategies.

Camouflaging Autistic Traits Questionnaire (CAT-Q)

A measure of strategies used to mask or compensate for autistic traits in social situations

Scale	Score	Percentile	Descriptor
Total (25-175)	148	97.8	Extremely High
Compensation (9-63)	54	98.6	Extremely High
Masking (8-56)	42	77	High
Assimilation (8-56)	52	97.5	Extremely High

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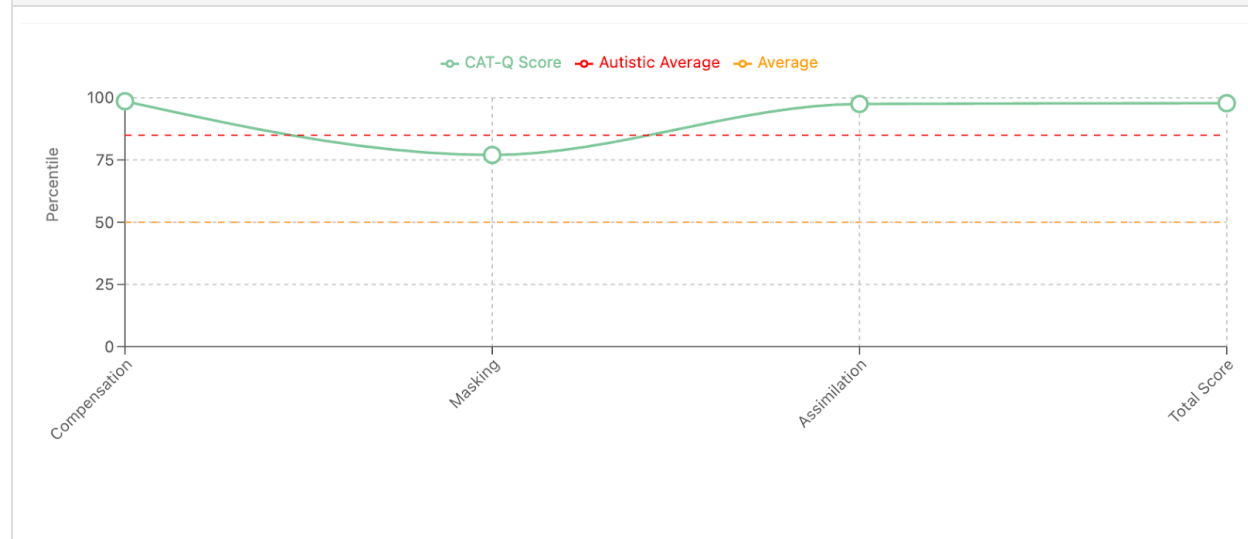
Reference Lines: 85th percentile (Autistic Average), 50th percentile (Average)

Interpretation

SS's responses indicate significant use of camouflaging strategies, with scores falling well above typical ranges across all domains. The overall pattern (97.8th percentile) suggests substantial energy investment in social adaptation, particularly in Compensation (98.6th percentile) and Assimilation (97.5th percentile). These extremely high scores indicate that SS is likely expending considerable cognitive and emotional resources to appear neurotypical in social situations, developing explicit strategies to navigate social interactions, and making substantial efforts to blend in with others.

Key Findings

The CAT-Q results reveal an exceptionally high level of social camouflaging across all domains. SS shows particular strengths in compensation strategies (consciously learning social rules and developing scripts) and assimilation efforts (actively trying to fit in with others). These patterns suggest a significant cognitive and emotional burden associated with social interactions, which may contribute to exhaustion, stress, and delayed recognition of autistic traits. The exceptionally high camouflaging score helps explain why SS's autistic traits may not have been readily apparent to others throughout life despite the significant internal experience indicated by the RAADS-R results. This finding is consistent with the

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attachment patterns indicated in the ASQ-SF, which suggests discomfort in close relationships that likely developed in response to negative social experiences.

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Obsessive-Compulsive Inventory - Revised (OCI-R)

A measure of obsessive-compulsive symptoms

Scale	Score	Normative Percentile	Clinical Percentile
OCD	40	99.9	90.8
Hoarding Disorder	1	44.1	0

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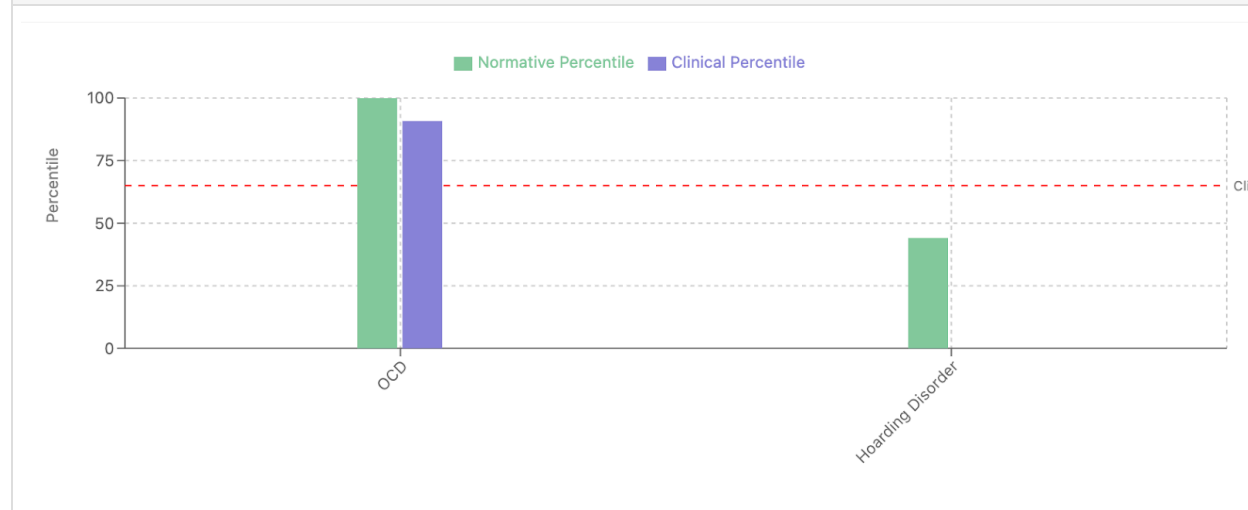
Reference Line: Clinical cutoff score of 12 for OCD symptoms

Interpretation

SS's OCI-R results indicate significant obsessive-compulsive symptoms, with the OCD score (40) falling at the 99.9th percentile compared to the general population and the 90.8th percentile compared to clinical OCD samples. This suggests a level of obsessive-compulsive symptoms that is clinically significant and comparable to individuals diagnosed with OCD. In contrast, the Hoarding Disorder score (1) falls within normal ranges, indicating that hoarding behaviors are not a concern.

Key Findings

The OCI-R results indicate clinically significant obsessive-compulsive symptoms that likely cause substantial distress and functional impairment. The extremely high OCD score suggests that SS experiences intrusive thoughts, compulsive behaviors, and/or rigid patterns that consume time and energy. These symptoms may interact with and potentially exacerbate other identified patterns, including executive functioning challenges, sensory sensitivities, and social difficulties. It's important to consider these symptoms in the context of SS's autistic traits, as repetitive behaviors and rigid thinking patterns are common in autism and may present similarly to OCD. The interaction between these conditions may result in a complex clinical presentation requiring nuanced understanding and targeted intervention approaches.

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Summary

SS's comprehensive evaluation reveals a neurodevelopmental profile consistent with autism spectrum traits, significant sensory processing differences, executive functioning challenges, and obsessive-compulsive symptoms. The results indicate clinically significant autistic traits (RAADS-R) combined with extremely high masking behaviors (CAT-Q), confirming what SS has long suspected about herself and explaining why these traits may have been overlooked during her developmental years.

Sensory processing shows a distinctive pattern best understood as "sensory gifting" - a heightened awareness and intensity of sensory experience that manifests as both high sensitivity and active avoidance (Sensory Profile). This sensory profile represents a neurological variation rather than a deficit, though it significantly impacts daily functioning in modern environments which often present overwhelming sensory demands. This pattern aligns with findings of variable interoceptive awareness (MAIA-2) characterized by exceptional abilities in detecting internal bodily sensations (Body Listening at 93.8th percentile) paired with considerable difficulty regulating responses to uncomfortable sensations (Not-Worrying at 9.4th percentile).

SS demonstrates what can be understood as a "spiky profile" typical of neurodivergent individuals, where extraordinary abilities in some domains necessarily affect capacity in others. The intensity of external sensory processing affects internal processing capabilities, creating a neurological profile best conceptualized through the lens of "tropism" - where attention and focus manifest as highly directed and intense (monotropism) combined with variable focus (variotopism) characteristic of the ADHD experience.

Executive functioning challenges are significant (Brown EF/A), particularly in focus (98th percentile), memory (92nd percentile), and emotional regulation (91st percentile). These challenges appear to have an interrelationship with sensory processing differences, where sensory overload likely exacerbates difficulties with focus and regulation. SS shows some ADHD traits (ASRS), particularly in the hyperactive/impulsive domain, representing an expected overlap with her autistic traits and further explaining the challenges she experiences in environments with multiple sensory demands or distractions.

The emotional awareness profile (TAS) shows an interesting pattern where years of therapeutic work appear to have built compensatory strategies despite underlying differences in emotional processing. SS's exceptionally low score in Externally Oriented Thinking (4th percentile) indicates a rich internal emotional life and strong introspective tendencies that contradict

stereotypical views of autism as lacking emotional depth.

SS's attachment profile (ASQ-SF) indicates relationship challenges that likely developed in response to negative social experiences related to neurodivergence rather than purely attachment-based origins. These patterns interact with her exceptional camouflaging abilities (CAT-Q at 97.8th percentile), where she has developed sophisticated strategies for social adaptation that, while effective, require substantial cognitive and emotional resources.

The overall pattern suggests a complex, interconnected neurodevelopmental profile that creates a unique presentation. SS likely experiences significant internal challenges that aren't readily apparent to others due to well-developed masking strategies. Rather than focusing on deficits, this profile highlights a different neurological organization that requires specific accommodations to reduce the amplitude of challenging traits while preserving the strengths inherent in this neurotype.

This profile helps explain SS's lived experience and validates her self-understanding, while providing a foundation for developing practical accommodations focused on sensory regulation, executive function support, and reducing the cognitive burden of social camouflaging. Even small adjustments in these areas are likely to produce noticeable improvements in daily functioning and quality of life.

Recommendations

1. **Psychotherapy:** Explore therapy options with a neurodiversity-affirming provider who can address autistic burnout, masking, executive functioning, and anxiety management.
2. **Executive Function Coaching:** Work with an ADHD/executive function coach to develop systems for time management, organization, and task completion that align with SS's cognitive style.
3. **Self-Advocacy Skills Development:** Explore resources for understanding neurodivergent identity and developing effective self-advocacy strategies in educational, occupational, and healthcare settings.
4. **Social Support:** Consider neurodivergent peer support groups or online communities to reduce isolation and build connections with others who share similar experiences.
5. **Relationship Counseling:** If in a relationship, consider counseling that addresses attachment patterns and neurodivergent-neurotypical relationship dynamics.

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