Low-Verbal Investigatory Screener (LVIS) page 1

Child Name:		**Child Gender:**	
Today's Date:		**Child's Date of Birth:**	
Child's diagnosis (if any):		**Child age at diagnosis:**	
Child's Race & Ethnicity:		**Completed By / Relation:**	
Language(s) spoken at home:			

Instructions: Answer based on how your child usually behaves. If a behavior has occurred only a few times and is unusual, mark No. Mark one response for every item.

Speech Production

Item	Question	Response
1	Has your child ever babbled (for example, "baba," "mama," "gaga")?	☐ Yes ☐ No
1i	*If yes, did he/she start babbling before his/her first birthday?*	☐ Yes ☐ No
2	Has your child ever said real words, that is, consistent sounds that you recognize as a word?	☐ Yes ☐ No
2i	*If yes, did he/she start saying words before his/her second birthday?*	☐ Yes ☐ No
3	Has your child ever said phrases (multiple words) like "more cookie"?	☐ Yes ☐ No
3i	*If yes, did he/she start before his/her third birthday?*	☐ Yes ☐ No

Nonverbal and Alternative Forms of Communication

Item	Question	Response
4	Does your child often use sounds to communicate specific messages with you (for example, to make requests for things)?	☐ Yes ☐ No
5	Does your child often use pictures (for example, PECS) to communicate specific messages?	☐ Yes ☐ No
6	Does your child communicate with you by placing your hands on things or by grabbing your hand and bringing you somewhere?	☐ Yes ☐ No
7	Does your child often use gestures to communicate specific messages?	☐ Yes ☐ No
8	Does your child follow your point to things?	☐ Yes ☐ No
9	Does your child point to things he/she wants?	☐ Yes ☐ No
10	Does your child point to things to draw your attention to them?	☐ Yes ☐ No

Unusual Speech

Is your child's speech unlike that of other children his or her age for any of the following reasons?

Item	Question	Response
11	Rapid repeating of sounds (for example, "dugudugudugu")?	☐ Yes ☐ No
12	Monotone voice (for example, robotic sounding)?	☐ Yes ☐ No
13	Extremely high-pitched, low-pitched, or sing-song?	☐ Yes ☐ No
14	Frequent humming?	☐ Yes ☐ No
15	Echolalia (for example, repeating what you say word-for-word or repeating the last word you say)?	☐ Yes ☐ No
16	Scripting (for example, repeating part of a TV show from memory)?	☐ Yes ☐ No
17	Odd uses of words (for example, saying "boxes" to mean "no")?	☐ Yes ☐ No
18	Unusual sounds (for example, repeated shrieks)?	☐ Yes ☐ No

Sounds / Words

Item	Question	Response
19	How many consonant sounds does your child make? (for example, m, p, d, b)	☐ None ☐ Some ☐ Many
20	How many words does your child understand?	☐ None ☐ Some ☐ Many
21	How many words does your child say?	☐ None ☐ Some ☐ Many

For details see: Eigsti, Tenenbaum & Naples (2026). *Molecular Autism*; Naples, Tenenbaum, Jones, Righi, Sheinkopf & Eigsti (2023). *Autism*.

Comprehension

Item	Question	Response
22	Does your child look up or notice when someone says his or her name?	☐ Yes ☐ No
23	Does your child follow simple directions *with gestures* (for example, "Sit down")?	☐ Yes ☐ No
24	Does your child follow simple directions *without gestures*?	☐ Yes ☐ No
25	Does your child follow multi-step directions (for example, "Get the ball and bring it to me")?	☐ Yes ☐ No

Reading

Item	Question	Response
26	Does your child recognize printed letters and/or numbers?	☐ Yes ☐ No
27	Does your child read aloud?	☐ Yes ☐ No
28	Does your child write words?	☐ Yes ☐ No

Loss of Skills

Item	Question	Response
29	Did your child ever have language skills that they later lost (for example, words that they said but later stopped using)?	☐ Yes ☐ No

Verbal Status

Item	Question	Response
30	Would you describe your child as "nonverbal" or "minimally verbal" at this time?	☐ Yes ☐ No

Any other information you would like to share about your child's communication?

_____

_____

_____

For details see: Eigsti, Tenenbaum & Naples (2026). *Molecular Autism*; Naples, Tenenbaum, Jones, Righi, Sheinkopf & Eigsti (2023). *Autism*.

Low-Verbal Investigatory Screener (LVIS) page 3

LVIS Scoring Summary

Child Name:		Child's Date of Birth:	
Standard items:	No = 0, Yes = 1	Items 19–21:	None = 0; Some = 1, Many = 2

Item	Factor 1: Verbal Ability	Circle score
2	Uses words	0 1
2i	Words before 24 months	0 1
3	Uses phrases	0 1
3i	Multi-word phrases before 36 months	0 1
19	Number of consonant sounds	0 1 2
20	Word comprehension	0 1 2
21	Words produced	0 1 2
24	Follows simple directions without gestures	0 1
25	Follows multi-step directions	0 1
26	Recognizes printed letters or numbers	0 1
27	Reads aloud	0 1
28	Writes words	0 1
	TOTAL VERBAL ABILITY:	**/ 15**
Item	**Factor 2: Nonverbal Communication**	**Circle score**
1	Child babbles	0 1
1i	Child babbled prior to 13 months	0 1
7	Uses gestures to communicate specific messages	0 1
8	Follows caregiver's point	0 1
9	Points to things wanted	0 1
10	Points to draw caregiver's attention	0 1
22	Notices when someone says child's name	0 1
23	Follows simple directions with gestures	0 1
	TOTAL NONVERBAL COMMUNICATION:	**/ 8**
Item	**Factor 3: Atypical Communication**	**Circle score**
4	Uses sounds to communicate specific messages	0 1
6	Communicates by placing caregiver's hands on things	0 1
11	Rapid repeating of sounds	0 1
12	Monotone voice	0 1
13	High-, low-pitched, or sing-song voice	0 1
14	Frequent humming	0 1
15	Echolalia	0 1
16	Scripting	0 1
17	Odd uses of words	0 1
18	Unusual sounds	0 1
29	Ever lost language skills	0 1
	TOTAL ATYPICAL COMMUNICATION:	**/ 11**

VERBAL STATUS CLASSIFICATION

Classification rule: 12 or lower suggests non-speaking/minimally verbal status

Verbal Ability total	
Minimally verbal	☐ Yes ☐ No

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