Healthcare Ethics Case 3.1

## **Observing Oliver**

Dr. Ozil greeted Oliver warmly as the 16-month-old toddler entered the examination room with his father for a routine well-child visit. Oliver clutched a small toy truck tightly in his hand, seemingly absorbed in spinning its wheels repeatedly.

"How's everything going with Oliver?" Dr. Ozil asked, settling into his chair as Oliver's father set him down on the play mat in the center of the office. Oliver's father shrugged with a relaxed smile. "Pretty good, I'd say. He's healthy and active, so I have no complaints really. Though I've noticed he's not saying as many words as his older sister did at this age. But every kid's different, right?" "That's true," Dr. Ozil nodded, watching Oliver carefully. The toddler was still clinging to his truck, spinning the wheels again and again with intense focus. Dr. Ozil then observed Oliver lining up his truck alongside a few other toys from the play area, arranging them in a precise row. "Does he often line up his toys like that?" Dr. Ozil asked casually. "Yeah, he loves organizing things," his father replied. "I figure he might be an engineer someday."

As the visit continued, Dr. Ozil noted several behaviors that gave him pause. Oliver rarely made eye contact, even when his father called his name, though Oliver did eventually respond after the second or third attempt. He also seemed to prefer playing alone rather than engaging with either adult in the room. When his father tried to redirect his attention from the toys, Oliver became visibly upset, fixating on his truck and continuing arranging the toys.

Dr. Ozil looked at Oliver's chart. His developmental history showed he had generally met his milestones on time, though his language development seemed somewhat delayed. His father appeared relatively unconcerned and attributed Oliver's behaviors to normal individual variation. Some of Oliver's behaviors could indeed be typical for his age; many toddlers prefer independent play and show strong preferences for particular activities.

Yet the combination of limited eye contact, repetitive play patterns, language delay, and resistance to transitions raised questions in Dr. Ozil's mind about possible early signs of autism spectrum disorder. He knew Oliver was scheduled for standardized developmental screening at his 18-month appointment, just two months away, which would also include screening for autism. The signs he observed weren't definitive, and an immediate referral for evaluation seemed premature.

Still, Dr. Ozil wondered if he should mention his observations to Oliver's father. Voicing his observations might cause unnecessary concern for the family and potentially lead them to misinterpret typical toddler behaviors as clearly indicative of autism. On the other hand, if he remained silent, was he withholding relevant information that the father ought to know and seemed unaware of?