There are red flags to look for that can help to determine what supports will be most effective for students with TS. However because symptoms of TS are frequently misunderstood, these 'red flags' are often thought of as being "purposeful behaviors" and not related to the disability. The following is a partial list of some of the more common red flags to be aware of:

- **Handwriting problems**  Sloppiness, frequent erasing, time consuming effort at perfectionism, reduced output, slowness of handwriting, refusal to write, writing that is difficult to read are often misunderstood and perceived as being purposeful.

- **Homework difficulties**  Failure to understand the assignment; inconsistency in copying down assignments; struggles to complete; refusal to begin or complete; failing grades due to missing assignments; completed homework never turned in; etc.

- **Organization**  Disorganization may include problems managing time, tasks, belongings, and difficulty with beginning and/or follow through on tasks – all may result in difficulties producing a product and can be due to ADD or Executive Function Deficits.

- **Difficulty with transitions**  Problems when changing tasks or classes. Resistant to changes in schedule or difficulties if the routine is changed.

- **Anxiety**  Explosive behaviors; school avoidance; shutting down when overwhelmed; excessive trips to nurse, bathroom or counselor; emotional outbursts, etc.

- **Sensory Issues**  Sensitivity to light, sound, touch, smells, tastes; need to harm oneself physically; excessive chewing on objects, etc.

- **Difficulty following directions**  Slow to respond; overwhelmed by complex directions; need to always have directions repeated; unable to complete tasks with multiple directions (verbal, written or both), etc.
• **Discrepancy between verbal and performance scores**  Significant difference between scores on psycho-educational evaluations (e.g., high average range for reading comprehension with low average range for written language skills; high scores in verbal and low on performance)

• **Symptoms that are seen as deliberate behaviors**  A behavior continuing after countless consequences (positive or negative) may be due to a symptom that is being overlook or misunderstood.

• **Academic failure**  Intellect may disguise disabilities in early grades; disability may disguise intellect in higher grades

• **Oppositional behaviors**  When there is a refusal to engage in an activity or task, we must ask why, where, and when does the oppositional behavior occur, and how we can support the student in being successful (which often will reduce oppositional behaviors).

• **Difficulty with peers**  Demonstrating social skills and understanding social cues can sometimes be an area of difficulty requiring Pragmatic Language skills training or social skills support.

• **Impulsivity**  Shouting out answers, making inappropriate statements, and exhibiting impulsive behaviors may be result of a student’s inability to use inhibitory process and learned inhibitory skills

• **Behaviors that student knows are wrong**  Knowing HOW to act but inconsistently performing appropriately while "in the moment"

• **Perfectionism**  Erasing; limited risk taking; must have things ‘just so’; hyper-vigilant regarding rules; insistent regarding rituals, etc.

• **Difficulty attending**  Focusing difficulties that are inconsistent or chronic. Complex or simple tics or obsession can interfere even though the student appears to be focused. Additionally, some students are able to attend while experiencing tics even though it may appear otherwise.

• **Immature behavior as compared to peers**  Responds in a manner that is not age appropriate. May feel more comfortable with younger children and with toys that are geared to younger children.

• **Explosive behaviors in school or at home**  May be a result of suppressing symptoms, experiencing anxiety, feelings of failure or being overwhelmed while at school or due to homework