

**PRAGMATIC LANGUAGE IMPAIRMENT IN AUTISTIC-SAVANT
PERSON PORTRAYED IN *THE GOOD DOCTOR* FILM**

SKRIPSI

*Submitted in Partial Fulfillment of the Requirements
for the Degree of Sarjana Pendidikan (S.Pd)
English Education Program*

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**MAJELIS PENDIDIKAN TINGGI
UNIVERSITAS MUHAMMADIYAH SUMATERA UTARA
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ABSTRACT

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The purpose of this study was to find out the kinds of pragmatic language impairments realized by an autistic-savant main character in *The Good Doctor* film, to describe the pragmatic language impairments realized by the character, and to investigate why the linguistic impairments were realized in the way they were. The descriptive qualitative method was used in this research. The data taken was from the utterances and the behaviors of the autistic-savant character, Shaun Murphy, from 18 episodes of season one of the film. There were 352 dialogues obtained consisting of pragmatic language impairments, both verbal and non-verbal language problems. The verbal language problems realized were violation of maxims, literal interpretation, monologue, pronoun reversal, politeness difficulty, pedantic speech, odd prosody, turn-taking violation, echolalia, and idiosyncratic use of language. While the non-verbal language problems realized were limited use of gesture, clumsy/gauche body language, limited facial expression, inappropriate facial expression, and peculiar/stiff gaze. Pragmatic language impairments were realized in the utterances and the behaviors. The linguistic impairments were realized the way they were because of the lack of comprehension, inability to talk based on context, difficulty at adjusting voice and tone, lack of mind reading skill, having trouble at maintaining a conversation, and incapability to use non-verbal language properly.

Keyword: *pragmatic language impairment, language problems, autistic-savant, autism*

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Hopefully, the findings of this research can be helpful and useful for the readers and anyone who are interested in the subject. The researcher realizes that this research is still far from perfection in spite of the fact that she has done her best to accomplish this study. Therefore, criticisms and suggestions are welcomed in order to improve this research.

Medan, 01 Oktober 2019

Researcher,

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CHAPTER I

INTRODUCTION

A. Background of the Problem

Language impairment was caused by the underdevelopment of content, form and use of language. The language content referred to what topic was being discussed about and comprehended by human. The language form referred to pattern and sound of units of language and their combination. The language use related to the reason why language was constructed as it was depending on the speakers and context (Bloom, 1988). Hence, people suffered of language impairment had difficulty in using language properly, that could be seen through the way they spoke, the way they interpreted meaning, the way they created sentence, and so on. Furthermore, according to Turgeon and Macoir in Stemmer & Whitaker (2008), a disturbance of specialized cerebral substrates in the brain might lead to language and communication disorders. Thus, language impairment was also caused by the abnormalities within the brain.

Language impairment could be divided into receptive and expressive impairments. Receptive language impairment declined the quality of listening and comprehending language that could be in word or sentence level (Harris, 1994). While expressive language impairment caused problems in producing language, such as word use, conversational skills, and forming sentence (Harris, 1994). Despite being divided, there was a kind of language impairment that involved both impairments, which was pragmatic language impairment. Pragmatic language

impairment covered the significant problems of language in communication. People with this disorder were troubled with the recognition and application of the social rules for language and discourse (Verhoeven & Balkom, 2004). As a result, these people were lacking at maintaining conversation, using language according to context, and most importantly making friends. Moreover, the defective pragmatic skills led the sufferer not capable in detecting any kinds of figurative meaning and having odd prosody (Stemmer, 2008). They usually interpreted message at face value, so finding implied messages in other's utterances successfully wasn't likely to happen. This was due to their inabilities in recognizing the interlocutor's intention that could be indicated through social cues such as expression and body language.

Moreover, problems with sensory and motor processing might lead to behaviors having pragmatic consequences (Perkins in Damico et al., 2010). It was not surprising to find people with pragmatic impairment had restricted facial expression, stiff gesture, and difficulty in showing emotions. Thus, pragmatic language impairment didn't impact only the verbal communication, but also the non-verbal one.

Pragmatic language impairment commonly happened in people with autism. Autism Spectrum Disorders (ASD) was a neurodevelopmental disorder signed by deficits in social communication and restricted repetitive behaviours (RRBs). Although each autistic person had different symptoms, however, the pragmatic disorders were never absent even to those whose language development similar to normal people (Roberts et al, 2004; Young et al, 2005; Belkaldi, 2006; Smith et al,

2007). This also applied to autistic people with savant syndrome, a condition that allowed them to be genius at certain field, such as memory, calculation, music, and so on. According to Grover (2015), autistic savant had sure cognitive and social deficit associated with autism even after being exceptional in one sense. One of films portraying pragmatic language impairment in autistic savant was *The Good Doctor*.

The Good Doctor was an American show produced by Sony Pictures Television and ABC Studios. This series told about Shaun Murphy, a surgeon with high functioning autism and had savant syndrome. Although this savant syndrome allowed him to be a genius at certain part, such as having photographic memory so he was capable in envisioning human's anatomy while operating, his autism troubled him a lot whenever he was communicating to his peers, patients, or co-workers. He tended to talk inappropriately, gave odd responds, missed social cues, and rarely showed any expressions and gestures.

This series had been received many mixed reviews by the audiences and critics. Basically, the problems of this series pertained to how accurate the portrayal of autism in the film. Some of the audiences commented that the autism depicted was too stereotypical and couldn't be a representative of the wide range of the spectrum. While some thought that the symptoms and weaknesses were portrayed accurately and found the character to be relatable. Moreover, there were even people who didn't know anything about autism and could only comment about the unrealistic portrayal of medical procedures (IMDb, 2017, *Reviews: The Good Doctor*, https://m.imdb.com/title/tt6470478/review?ref=m_tt_ury, accessed on

October 4, 2019). Based on the mixed comments, it assumed that there were still many people not familiar with impairments in autism and couldn't tell the accuracy of autism in the film. Therefore, the researcher chose *The Good Doctor* to be analyzed.

The title of this research is *Pragmatic Language Impairment in Autistic-Savant Person Portrayed in The Good Doctor Film*. The title was chosen because the researcher wanted to know what kinds of pragmatic language impairments endured by an autistic savant and how they happened. This was important to be investigated because their lack of proper communication often became the target of the bullies (Szakavits, Maia, 2012, *Why Autistic Kids Make Easy Targets for School Bullies*, <http://healthland.time.com/2012/09/05/why-autistic-kids-make-easy-targets-for-school-bullies/>, accessed on May 26, 2019). By understanding and learning the impairments experienced by the people with ASD, it could help them to overcome their flaws through proper treatment so they weren't judged falsely, they could have meaningful conversation with others, and they could manage to live well as normal people. Although giving treatment couldn't entirely recover them, at least the impairments could be reduced to minimum level.

B. The Identification of the Problem

Based on the background of the study above, the problems could be identified as follow:

1. Pragmatic language impairment impacted verbal and non-verbal communications.

2. People with pragmatic language impairment had difficulties with the recognition and application of the social rules for language and discourse.
3. Autistic people, with or without savant syndrome, were suffered of pragmatic language impairment.
4. There were still many people unfamiliar with the impairments in autism.

C. Scope and Limitation

The scope of this study was neurolinguistics, while its limitation was on pragmatic language impairment. This research only focused on pragmatic language impairment in the autistic-savant main character, Shaun Murphy, in *The Good Doctor* series, particularly in season one which contained of eighteen episodes.

D. The Formulation of the Problem

The problems of this study were formulated as the following:

1. What kinds of pragmatic language impairments are realized by the main character in *The Good Doctor*?
2. How are the pragmatic language impairments realized in the main character of *The Good Doctor*?
3. Why are the linguistic impairments realized in the way they are?

E. The Objective of the Study

The objectives of this study were stated as the following:

1. To describe the kinds of pragmatic language impairments realized by the main character in *The Good Doctor*.
2. To describe the realization of the pragmatic language impairments happen in the main character in *The Good Doctor*.
3. To investigate the reasons for the realizations of the linguistic impairments.

F. The Significance of Study

Based on the objectives of the research above, it was identified that the significances of the study involved theoretical and practical aspects.

1. Theoretically

The findings potentially contributed knowledge in regard to neurolinguistics, specifically on pragmatic language impairment in Autism Spectrum Disorders (ASD).

2. Practically

This research hopefully could give contributions to following parties, they are:

a. The Students of English Department

For students of English department, exclusively the ones who took majority in linguistics, this research was expected to contributing in the field of neurolinguistics. It could be used to give more insight about pragmatic language impairment in Autism Spectrum Disorders (ASD), especially the one with savant syndrome, and to be references for their study.

b. The Readers of The Study

For the readers of this research, they could gain knowledge regarding pragmatic language impairment in Autism Spectrum Disorders (ASD). Therefore, they were able to get better understanding of the language impairment in that spectrum, particularly the one with savant syndrome.

c. The Other Researchers

For other researchers, the findings of this study could be used as references if they wanted to conduct a research that was similar to this.

CHAPTER II

THE REVIEW OF LITERATURE

A. Theoretical Framework

1. Neurolinguistics

Neurolinguistics is one of psycholinguistic branches that concerns about the relationship between language and brain. It is the interdisciplinary enterprise and straddles the boundary between linguistics and other fields connected to the study of mind/brain, such as cognitive psychology, neuropsychology, and cognitive science (Bambini in Östman & Verschueren, 2012). From the perspective of neurosciences, neurolinguistics focuses on brain behaviors in processing language, while from linguistics standpoint, it aims at expounding how language structures can be represented in the brain. Thus, brain is important for language process.

2. The Relation between Language and Brain

Brain is an important organ that enables human to produce language. It has some areas that each of them has their own functions. These functions are not only related to language, but also other cognitive skills, for instances calculation and problem solving.

The upper surface of the brain consists or ‘gray matter’ recognized as *cortex* (Field, 2003:8). It handles many complex operations, namely making connections with stored information, analyzing input, and managing muscular movement. Below this *cortex* is *sub-cortex* of ‘white matter’. Essentially, the lower parts of

brain have responsibilities for reflexes, controlling functions such as respiration and heart beats. The *cerebellum* at the base of the brain gets a mild role in coordinating a range of muscular movements that are highly automatic.

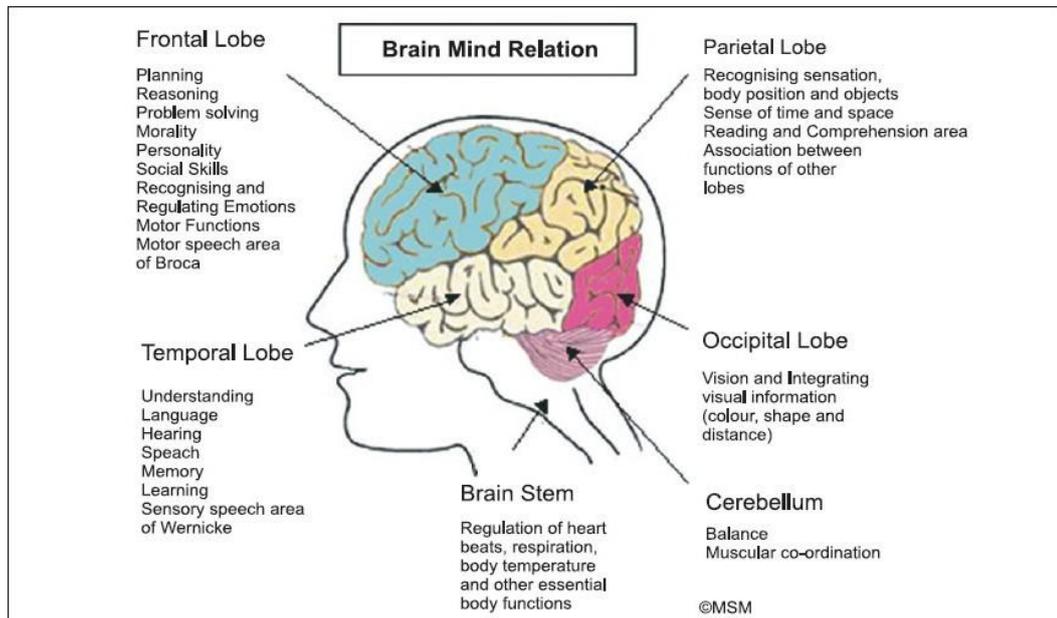
Furthermore, the brain separates into two *hemispheres*, which are located in both left and right sides (Field, 2003:8). They are connected by a web of nerve connection named *corpus callosum*. The left hemisphere governs movement and sensation on the right side of the body while the right one does otherwise. The function of the left hemisphere is generally associated with analyzing and symbolization, while the right focuses on perceptual and spatial representation.

In addition, the outer surface of the brain is marked by mounds (*gyri*) and valleys (*sulci*). These aid to mark out four primary parts in every hemisphere, known as lobes. Those lobes are *the frontal lobe* at the front, *the temporal lobe* at the front to back, and *the occipital* and *parietal lobes* at the back.

Moreover, there is *pre-frontal* areas which are responsible to recognize the similarities between objects and classify them into categories. Damage in these areas may weaken the ability to determine alternatives and to overcome old routine when new information informs to revise them. It may also restrict the sufferer's ability to see things based on other's perspective.

Lastly, there is a narrow area which controls motor operations, like muscular movements, runs about midway down to every side of the hemisphere.

In general, brain has six major parts, they are frontal lobe, parietal lobe, temporal lobe, occipital lobe, cerebellum, and brain stem. Each of these parts has their own functions and roles.



Picture.2.1. The Parts of Brains and Their Functions (www.msmonographs.org)

From the picture above, there are parts of brain whose duties are related to language, like *parietal lobe*, *temporal lobe*, and *frontal lobe*, which handle the process of listening, writing, speaking, and reading, as well as comprehension and other abilities involving cognitive and social skills. If one of these parts is damaged, there are possibilities that the sufferer's language to be impaired, especially in the injury is in the frontal lobe, the part that controls the language (Lanczik & Keil, 1991; Prins & Bastiaanse, 2006). In addition to John Field (2003:7), those who are suffered of impaired language tend to have their left sides of the brains defected. Hence, the damage on the right sides of the brain may not cause language impairment.

3. Language Disorders

Language impairment is caused by the underdevelopment of content, form, and use of language. The language content refers to what topic is being discussed

about and comprehended by human. The language form refers to pattern and sound of units of language and their combination. The language use relates to the reason why language is constructed as it is depending on the speakers and context (Bloom, 1988). Hence, people suffered of language impairment will have difficulty in using language properly, that can be seen through the way they speak, the way they interpret meaning, the way they create sentence, and so on. Furthermore, according to Turgeon and Macoir in Stemmer & Whitaker (2008), a disturbance of specialized cerebral substrates in the brain may lead to language and communication disorders. Thus, language impairment is also caused by the abnormalities within the brain.

Language impairment can be divided into receptive and expressive impairments. Receptive language impairment declines the quality of listening and comprehending language that can be in word or sentence level (Harris, 1994). People with this impairment have some characteristics as follows: (1) an insufficient attention span, especially during oral presentation, (2) lack of listening skills, (3) having trouble at following directions, (4) poor memory for verbal information, (5) difficulty maintaining concepts from one day to the next, (6) small receptive vocabulary, (7) comprehension difficulty for double-meaning words, (8) difficulty classifying the relations between words or concepts, (9) having problem to understand figurative language, and (10) struggling with concepts of space, time, and quantity.

While expressive language impairment causes problems in producing language, such as word use, conversational skills, and forming sentence (Harris, 1994). People with this impairment have some characteristics such as: (1) speaking

in unfinished or inaccurate sentences, (2) depending upon gestures to supplement for oral language, (3) incorrectly using pronouns, plurals, and possessives, (4) having problem with the agreement of subjects and verbs, (5) struggling at telling or describing event and story logically, (6) using run-on sentences, (7) having restricted expressive lexicon, (8) striving to find proper word(s) to express meaning, (9) eluding talking in class, and (10) having problem of interaction with people.

Therefore, language impairment can impact the people's language comprehension and production.

a. Aphasia

One of language disorders caused by brain damage is called as aphasia. This condition defects people's ability in producing and understanding language sentences, either it is spoken or written. Thus, aphasiac people are not able to talk like normal people do or like they are used to be. In addition, they have troubles at comprehending the messages of the utterances delivered by interlocutors.

There are many classifications for aphasic syndromes. According to Goodglass (2001), aphasia is categorized under ten different types. In each of these aphasia types, certain indications can be considered as signs of comprehension and production problem. For examples, the omission at word, sentence, or discourse levels are generally the forms of comprehension disorders. While the loss of grammar and syntax or semantic deficits are considered both comprehension and production disorders since they have expressive and receptive aspects.

Furthermore, there are two groups of aphasias, the fluent and non-fluent (Beeson & Rapcsak in Stemmer & Whitaker, 2008). Fluent aphasias are characterized by normal articulation and fluent speech, however they have some difficulties such as auditory comprehension, repetition and presence of paraphasias. Whereas non-fluent aphasias have articulation and language production problems, yet the verbal comprehension remains intact. Therefore, aphasia impact both language comprehension and production.

b. Dyslexia

Dyslexia is a language disorder which the sufferers have difficulties in reading. This disorder is more recognized as reading disorder, however because this is the consequence of brain damage in the left hemisphere, it is often accompanied by impairment in spoken language processing due to being placed in the same sites as reading skills (Harley, 2001:203).

According to Harley (2001: 203), there are two types of dyslexia. The first one is called as *surface dyslexia*, a disorder that has a selective deficit in reading irregular (exception) words. While the last one is *phonological dyslexia*, a disorder that has a selective deficit in the ability of reading pronounceable nonwords (such as “sleeb”), while the sufferers are still able to read matched words (such as “sleep”). Phonological dyslexics don’t find reading regular words to be harder compared to reading the irregular ones.

c. Schizophrenia

Schizophrenia is a mental disorder characterized by distortion in perceptions and behaviors (Sie, 2011:1). The symptoms of the disorder can be divided into two, positive and negative. Positive indications cause an excess of cognitive functions and involve both hallucination and delusion. While the negative symptoms cause apathy and inadequate social activity due to suppressed normal function.

Schizophrenia is widely known for causing delusion and hallucination, however it also causes the deficits in language. According to Veague et al. in Agustina (2014) schizophrenia is from a psychotic disorder which disorganizes thoughts, speech and behaviors. This disorganized speech is the impact of thought disorder, so there are abnormalities found in the way the sufferer speak because their minds or brains work oddly and it influences their speeches.

d. Autism Spectrum Disorders (ASD)

Autism Spectrum Disorders (ASD) is a neurodevelopmental disorder signed by deficits in social communication and restricted repetitive behaviors (RRBs). According to Happé in Stemmer & Whitaker (1998:527), this disorder is a collection of impairments in communication, socialization, and imagination, along with limited interests and activities. Hence, people with autism are not good at maintaining social activities due to their poor communication and social skills. In addition, impairments in verbal and non-verbal communication are primary symptoms in autism (DSM-IV; American Psychiatric Association, 1994). This non-verbal communication is as important as the verbal one because it can emphasize

what one is thinking and feeling through expression or gestures. The lack of non-verbal skill will make the social interaction harder for autistic people, while the poor of verbal communication makes them unable to use language properly.

The impairments in autism spectrum are varies because each individual shows various symptoms that are different to one another. Roughly, half of the autistic people do not use language properly and undergo delay in communication. Other autistic people appear to get their language development as good as normal people, however their pragmatic skills are defective resulting to having trouble to communicate according to situations or the interlocutor, misunderstanding rhetoric expressions such as metaphors or irony (Roberts et al, 2004; Young et al, 2005; Belkaldi, 2006; Smith et al, 2007). So, even some autistic people can speak, they are still troubled in comprehending and using language.

1. High Functioning Autism or Asperger's Syndrome

In the Autism Spectrum Disorders (ASD), there is a term called as High Functioning Autism (HFA). This kind of autism is different from normal autism. It is because the people with this condition have the classic symptoms in early childhood, but they develop and show their cognitive skills to be greater than the usual autistic children through the quality of intellection, socialization, adaptation, and communication (DeMyer et al. 1981).

High Functioning Autism (HFA) is known as Asperger's Syndrome (AS). Although some people think both are different, however the comparison between both conditions in their cognitive, social, motor or neuro-psychological tasks are

equal, which means that they are not different (Howlin, 2000). Despite of being superior to those with normal autism, the pragmatic skills and processes are usually impaired in those diagnosed with High Functioning Autism (HFA) and those with Asperger's Syndrome (AS) (Attwood, 2007; Baron-Cohen, Wheelwright, Hill, Raste, & Plumb, 2001; Baron-Cohen, Wheelwright, Seahill, Lawson, & Spong, 2001; David et al, 2010; Happé, 1994; Loukusa & Moilanen, 2009). Thus, the people with this these kinds of autism still have their languages impaired.

2. Savant Syndrome in Autism

Savant syndrome is a condition in which certain person with mental abnormalities shows superior abilities in certain field. Treffert in Grover (2015) has reported that savant skills include numeral calculation, calendar calculation, perfect pitch, artistic skills, and musical abilities. In addition, people with this syndrome are known for their extraordinary memory.

There are autistic people with this kind of syndrome although it is exceedingly rare phenomena and several cases pertaining this have been documented (Sacks, 1986; 1995; Treffert, 1989). There are about 50% of savant syndrome cases are from the population of autistic people, while the remained percentage goes to population with developmental disabilities and CNS injuries. The estimated incidence of savant abilities in the autism is about 10%, whereas there is only less than 1 % in the disability population (Grover, 2015).

According to Treffert in Grover (2015), autistic savant can be categorized into three categories. The first is *splinter skills*, the most common savant syndrome

that the sufferers have a minor talent, like memorizing small facts and plate numbers. The second is *talented savant* which the sufferers have remarkable talents compared to their disadvantage. They generally mentally retarded, but they can perform amazing tasks in certain domains. The third is *prodigious savants* who have extraordinary talent and this would be impressive even if the savant was not disabled in any way (Treffert, 2000). Despite of having impressive talents, autistic savants cannot avoid the cognitive and social deficiency associated with autism (Grover, 2015). As a result, they still have their language abilities impaired.

3. Theory of Mind in Autism

Theory of Mind (ToM) is a psychological term that refers to the ability to identify and comprehend people's thoughts, desires, beliefs, and intention in order to understand why people act as they do and to predict their next actions (Baron-Cohen, 1995). The synonym of the term is empathy (Gillberg, 2002). People with normal theory of mind will be capable in understanding how one's feeling so they can interact and communicate to one another properly.

However, autistic person has their Theory of Mind (ToM) defected. They have difficulties to recognize and understand the thoughts or feelings of the other people. Furthermore, impaired Theory of Mind (ToM) influences self-consciousness and introspection (Frith & Happé in Attwood, 2007). In their study, a teenager with Asperger's syndrome named Corey talked about the ability on 'mind reading'. He said that he was not good at working out what other people are

thinking and what he was thinking. Therefore, there may be difficulties in thinking about thoughts and feelings, whether they are theirs or others’.

a. The Effect of Impaired Theory of Mind in Autism

Because of the impairment in the Theory of Mind (ToM), those with Autism Spectrum Disorder (ASD) encounter some hardships in daily activities. According to Attwood (2007:114) some of the problems they face are:

1. Difficulty in reading the social/emotional messages in someone’s eyes

People with autism have tendency not to look at people’s eyes directly, so they usually look at their mouths, bodies, and other objects (Klin et al. in Attwood, 2007). This causes them not being able in determining what others are thinking and feeling because eyes hold unspoken message and their true intentions. Although they try to look at the eyes, they are less able to read the meaning in them (Baron-Cohen and Jolliffe 1997; Baron-Cohen et al, 2001a) and have difficulties in reading the messages conveyed through the eye region of the face (Wing in Attwood, 2007:131).

2. Making a literal interpretation

People with autism, whether it is High Functioning Autism (HFA) or Asperger’s syndrome, have problems in recognizing social cues and reading the thoughts or emotions in other people’s face (Attwood, 2007:115). Moreover, they find it difficult in comprehending the importance of the person’s tone of voice, or prosody (Kleinman, Marciano and Ault 2001; Rutherford, Baron-Cohen and Wheelwright, 2002), which make them hardly take messages beyond a literal interpretation. By understanding facial expression, tone of voice and context,

people will realize whether someone is being sarcastic or not, but people with autism are not able to do this.

3. Being considered disrespectful and rude

Autistic people may not realize when people they are talking to feel annoyed because of their habit in dominating conversation. They appear to violate the social rules and do not respond well to the warning signs (Attwood, 2007:116). People who have no clue that this is caused by impaired Theory of Mind (ToM) will regard autistic people to be rude and disrespectful although in reality, they don't intend to be that way and are unaware of being offensive.

4. Honesty and deception

People with autism are known to be honest (Attwood, 2007:117). If they do something that is prohibited, they will likely to admit their mistake if they are asked to. In addition, they are not able to distinguish fact and lie due to their inability of interpreting beyond literal interpretation. So, they are gullible and not be able to make a white lie.

5. A sense of paranoia

The impaired ToM skills cause the autistic people unable to differentiate between deliberate or accidental actions of another person (Attwood, 2007:118). In other words, if some children are teasing each other for fun, the autistic children may take it seriously and look at it as a sign of hostility.

6. Problem solving

People with autism have their mind to be odd. If they cannot solve a problem, they won't ask for help from other people, instead being determined to

solve it by themselves. The knowledge into the thoughts and abilities of other people is not automatic for people with autism, including Asperger's Syndrome (Attwood, 2007:119).

7. Managing conflict

Autistic people are relatively immature, lack of various negotiating tools and tend to be confrontational (Attwood, 2007:119). These make them bad at persuading people because they don't know what people want and how to convince them. They also rarely show appreciation towards others and show less remorse when they do something bad, which usually they are not aware of. So, when people argue with autistic people, it is better not to continue the argumentation if they keep denying and do not show any signs to back off.

8. Introspection and self-consciousness

According to Frith and Happé in Attwood (2007), people with Asperger Syndrome may develop a different form of self-consciousness due to differences in the acquisition and nature of ToM abilities in the cognitive development. These people may acquire ToM skills by using intelligence and experience rather than intuition, which can eventually lead to an alternative form of self-consciousness.

9. Understanding embarrassment

According to Hillier and Allinson (2002), a study of the understanding of embarrassment in children with High Functioning Autism or Asperger's Syndrome found a link between ToM skills and the understanding of embarrassment. People with autism do not know why people should be embarrassed about something and they can be embarrassed at something that normal people think isn't embarrassing

at all. Moreover, at presentation or acting in front of others, children with Asperger's Syndrome make fewer gesture of embarrassment compared to normal children (Attwood, Frith and Hermelin, 1988). So, what normal people think embarrassing are usually not considered embarrassing for autistic people.

10. Anxiety

Being unsure of what people are thinking or feeling can be the factor to growing uncertainty and anxiety. An Asperger's Syndrome sufferer, Marc Fleisher in Attwood (2007:110) said that he was terribly afraid of upsetting people without realizing it. He claimed that socializing was harder than any maths equation and people did not always stick to what they said and did not always say what they mean.

11. The speed and quality of social reasoning

Typically, people are very quick and efficient in using ToM abilities when involved in social situations. Research has shown that some children and adults with Asperger's Syndrome can show advanced ToM skills, like giving responses and processing relevant cues, but more encouragement and prompts are required for these kinds of tasks. Their answers that depend on ToM skills can be less casual and intuitive and more literal, idiosyncratic, and irrelevant (Bauminger and Kasari, 1999; Kaland et al, 2002).

12. Exhaustion

ToM skills may be delayed in people with Asperger's Syndrome, so they use cognitive mechanism to compensate the impaired ToM. There is great mental

struggle required by them to process social information. This leads them to mental exhaustion.

4. Pragmatic Language Impairment in Autism Spectrum Disorders (ASD)

Language impairment is divided into receptive and expressive language impairments. Although being divided, however, there is a language disorder that involves both impairments, which is called as pragmatic language impairment. Because this disorder includes expressive and receptive impairments, people who suffer from this have their abilities in comprehending and producing language to be defected.

Pragmatic language impairment covers the significant problems of language in communication. People with this disorder are troubled with recognition and application of the social rules for language and discourse (Verhoeven & Balkom, 2004). As a result, these people are lacking at maintaining conversation, using language according to context, and most importantly making friends. Moreover, the defective pragmatic skills lead the sufferer not capable in detecting any kinds of figurative meaning and having odd prosody (Stemmer, 2008). They usually interpret message at face value, so finding implied messages in others' utterances successfully isn't likely to happen. This is due to their inability in recognizing the interlocutor's intention that can be indicated through social cues, such as expression and body language. Normal people are able to interpret that a person who has a bitter expression is upset, however people with this impairment aren't.

Moreover, problems with sensory and motor processing may lead to behaviors having pragmatic consequences (Perkins in Damico et al., 2010). It is not surprising to find people with this impairment have restricted facial expressions, stiff gesture, and difficulty in showing emotions. Thus, pragmatic language impairment doesn't impact only the verbal communication, but the non-verbal one also.

Pragmatic language impairment commonly happens in people with Autism Spectrum Disorders (ASD). Linguistic deficits, especially pragmatic inabilities, have been the central feature of people with autism (Fernandes in Mohammadi, 2011; Folstein & Rosen-Shedley, 2001; Volkmar & Pauls, 2003; Belkaldi, 2006; Smith et al, 2007). Although each autistic person has different symptoms, however, the pragmatic disorders are never absent even to those whose language development similar to normal people (Roberts et al, 2004; Young et al, 2005; Belkaldi, 2006; Smith et al, 2007). This also applies to autistic people with savant syndrome, a condition that allows them to be genius at certain field, such as memory, calculation, music, and so on. According to Grover (2015), autistic savant cannot avoid the cognitive and social deficit associated with autism.

The pragmatic language impairment has to do with the undeveloped Theory of Mind (ToM) because it involves social abilities. It is clear that Theory of Mind (ToM) is needed in social communication because it allows people to know what others are feeling and thinking. The core to understand what people say is by imagining what their true intentions is (Howlin, Baron-Cohen & Hadwin, 1999).

Moreover, the ability of mind reading is important to understand what beyond literal meaning and interpret non-verbal communication.

a. Verbal Language Problems

Autistic people have been known for their language deficits. Although some of them may have their language development to be similar to normal people, their pragmatic skills are still impaired (Roberts et al, 2004; Young et al, 2005; Belkaldi, 2006; Smith et al, 2007). So they have difficulty in using language according to context or social situations. According to Surian and Siegal in Stemmer & Whitaker (2008:377), there are some kinds of language problems caused by pragmatic deficits, they are maxim violations, literal interpretation, monologue, pronoun reversal, politeness difficulty, pedantic speech, odd prosody, and turn-taking violation. Moreover, there are two more such as echolalia and idiosyncratic use of language (Belkaldi, 2006; Tager-Flusberg, Paul, and Lord, 2005).

1. Violation of Maxims

People follow a number of additional principles that determine whether their statements are well-formed and contextually appropriate when they are listening or speaking to someone. However, Surian et al (1996) observed that people with autism have difficulty in recognizing utterances that violate pragmatic constraints concerning the quantity and the type of information that has to be conveyed in responses to simple questions. So, their responds may be lacking.

According to Grice (1989:26), those principles are called as *maxim of quantity*, *maxim of quality*, *maxim of relevance*, and *maxim of manner*.

a. Maxim of Quantity

The rule of this maxim is telling something that is as informative as is required. If people make contribution more or less informative than is required, then they violate maxim quantity. The example of this maxim violation is:

[The setting: A (a guest) wants to be nicer and friendlier, he smiles to B (a receptionist) and says hello politely. A dog comes and stands beside him. Then A asks B:]

A: Does your dog bite?

B: **No.**

A: (Bends down to stroke it and gets bitten) Ow! You said your dog does not bite!

B: That is not my dog.

(Cutting, 2002:40)

The respond 'no' violates the maxim because it gives less information to the speaker. The respond doesn't explain that the dog referred to A is not the B's dog although B knows that A needs to know it is not his/ her dog before touching it.

b. Maxim of Quality

The rule of this maxim is to only tell something that is true. So, people don't need to say what they believe to be false or what they have lack of evidence. If people keep saying something false, then they violate this maxim. The example for this maxim violation is:

A: How much did that new dress cost, darling?

B: (See the tag- 50 pounds, but says...) **Thirty-five pounds**

(Cutting, 2000: 40)

The answer given by B violates this maxim because B lies about the cost of the dress that is supposed to be fifty pounds.

c. Maxim of Relevance

The rule of this maxim is to tell something that is relevant to the conversation. If they talk something irrelevant, then this maxim is violated. The example of this maxim violation is:

[The Setting: A (husband) is the one who earns money, and the economy condition is bad. He sees B (wife) wears an unusual dress, then asks:]

A: How much did that new dress cost, darling?

B: **I know, let's go out tonight. Now, where would you like to go?**

(Cutting, 2002: 40)

The B's answer violates this maxim because it doesn't relevant at all to the question. The wife seems to avoid the question by changing the topic.

d. Maxim of Manner

The rule of this maxim is to tell something that is clear, so people need to avoid vagueness of expression, avoid ambiguity, be brief, and be orderly. Talking in ambiguous way will violate this maxim. The example of this maxim violation is:

A: How much did that new dress cost, darling?

B: **A tiny fraction of my salary, though probably a bigger fraction of the salary of the woman that sold it to me.**

(Cutting, 2000: 40)

The respond violates this maxim because it tells the cost of the dress ambiguously without clear and straight answer.

Due to autistic people's nature to dominate conversation, jump to one topic to another topic, or give respond that is odd, obscure or irrelevant (Attwood

2007:114), it is clear that people with autism is very likely to violate any kinds of maxims.

2. Literal Interpretation

Autistic people are known to not understand utterances beyond literal interpretation. They are incapable in understanding irony, sarcasm, metaphor or any kinds of figurative words (Ziatas et al., 2003). Based on the investigation conducted by Melogno et al. (2016:183), the autistic child that was given a metaphor 'The house has a hat' gave respond such as 'No, it doesn't exist, it's not true... No, the house has no hat... It's the roof'. This shows that the child refuses to believe that the house has a hat although the child approves the existence of roof. However, the child doesn't consider the roof as the hat of the house. Thus, the child interprets the words literally.

Moreover, people with Autism Spectrum Disorders (ASD) always take something at face value without paying attention at how those people say the utterances and what gestures or expressions used by them, which is really crucial to get the people's true intentions (Happé in Stemmer & Whitaker, 1998:526). Because of taking every utterance literally, autistic people also don't take indirect speech really well (Aarons & Gittens, 1999). Thus, the lack of understanding of non-literal meaning makes autistic people unable to decide whether people really mean what they say or not and whether the utterances carry hidden request or not.

3. Monologue

Autistic people have their Theory of Mind (ToM) to be impaired resulting to pragmatic deficits that make them unable to maintain social interaction well. They usually tend to dominate conversation that is often restricted to monologue on the subject which the individuals with autism find interesting (Tager-Flusberg, 1996) causing the conversation to end up one-sided. This usually happens to the High-Functioning Autism (HFA) or Asperger's Syndrome. Based on the study of Baltaxe and Simmons (1977), an autistic girl observed liked to make soliloquies during bedtime. They found that the girl had tendency to speak in monologue, while normal children usually act a two-way conversation (Weir, 1962).

Even though their grammar is well constructed, however their monologue tend to be lack of coherence and the discourse and narrative are disjointed (Asperger in Stemmer & Whitaker, 1998), so the interlocutor may have difficulty in following it.

4. Pronoun Reversal

The use of personal pronouns depends on the context as to who the speaker is and who the interlocutor is. According to Surian and Siegal in Stemmer & Whitaker (2008: 381), people with autism tend to misuse singular pronoun for the first and second person ('I' and 'you'), but this doesn't occur when they refer to the third person. In the study conducted by Overweg et al (2018), most of children with ASD were wrong in interpreting pronoun in direct speech, like changing the direct speech "Pig said: You get the car" into indirect speech "Pig said that you get the

car” instead of “Pig said that I get the car”. In this context, a frog was told by a pig that the frog got a car, then the frog reported to a dog that it got a car from the pig. So, if the direct speech is changed into “Pig said that you get the car”, then the one who gets the car is the dog, not the frog.

Furthermore, a study conducted by Minczakiewicz in Pisula (2003) showed that children with autism did not understand phrases such as “It’s his” and “It’s hers”. So, although they may not misuse the terms for third person, they still use their possessive pronouns incorrectly. Moreover, they can also misuse the terms such as ‘that’ and ‘this’ or ‘here’ and ‘there’ (Frith, 2003). These reversals are believed to be the effect of echolalia because people with autism tend to parroting without really understanding the meaning behind it.

5. Politeness Difficulty

Autistic people are honest in telling what they think about someone or thing without filter, like saying a big woman as fat and telling them to have a diet even though the woman is a stranger (Attwood, 2007: 116). They will not aware that their comments may be offensive because they have trouble in understanding conversational rules and social cues due to the lack of ToM. However, they don’t mean to be rude, they just tell what they are thinking or feeling, but fail at making the statement to be well received (Baron-Cohen, 1988: 385).

Moreover, autistic people like to ask embarrassing questions. Langdell in Baron-Cohen (1988) reported that people with autism tend to ask questions that may be unacceptable, for instance asking “How old are you?” to the stranger in the

supermarket. Therefore, the questions they ask can be trivial or even offensive. Although they don't intend to be impolite, the people being asked may find them to be impolite due to asking something so personal.

6. Pedantic Speech

The formal style of speech is called as pedantic speech. According to Baron-Cohen (1988), autistic people, particularly the high-functioning ones, like to use a formal language even though they are in an informal social context. So, although they are talking to their friends or people close to them, they will likely talk formally, unlike normal people who talk casually to their friends.

The example of pedantic speech can be seen through a case study conducted by Clarke et al (1958) in the patient of Korsakoff's Syndrome. This patient named a corkscrew as "an automatic accessory for bunging beers out of bottles". Moreover, this patient also named a rubber as "an india rubber or as you say in more obvious language an india rubber eraser". Thus, a speech is pedantic when the speech is unimportantly detailed and formal, which makes the speaker sounding knowledgeable like a professor.

7. Odd Prosody

Autistic people have been recognized with their abnormal prosody. According to Shriberg et al. (2001), people with Autism Spectrum Disorders (ASD), including the High-Functioning ones, have their utterances to be less appropriate in stress, phrasing, and resonance. For example, in the study of Fosnot

and Jun in McCann & Peppé (2003), four autistic children were asked to read 'It's a rhino.' and it turned out that the stress they placed was in the wrong syllable. They pronounced it as 'It's a rhiNO' instead of 'It's a **RHI**no'. Although they had been taught how to pronounce the word before reading it, they still failed at stressing the right syllable. Furthermore, their pitches were higher compared to the typical children being observed.

Moreover, According to Sastra (2011), odd prosody can be divided into two, they are odd prosody in linguistics and odd prosody in emotion. Odd prosody in linguistics is signed by the wrong pressing, intonation, and pausing so the meaning and the form of a sentence can be distorted. While odd prosody in emotion is caused by an unmatched of sound quality with the emotion that the speaker has. Autistic people usually have their intonation to be monotonous or flat along with lack of emotional expression in the tone of voice (Pisula, 2003: 55). So, even when they are upset, they will not show it through their intonation.

8. Turn-Taking Violation

It is usually difficult to sustain conversation with autistic people. Besides of being recognized as being verbose, autistic people are also known to hijack the topic of conversation with topic that they are interested with (Asperger in Stemmer & Whitaker, 1998). So, the conversation generally becomes one-sided because the interlocutor doesn't give chances to speak or even finish their sentences. According to Wang (2017:71), he investigated that autistic children had low score in conducting proper turn-taking when they were listening to their parents reading

them a picture book. They showed refusal in behavior, such as whining or walking away when their parents were still reading and talking to them. This shows that autistic people are troubled at maintaining turn-taking.

9. Echolalia

Echolalia is an act of repetition which involves similar intonation, words or phrases voiced by another person. For example, the investigation conducted by Sterponi and Shankey (2013: 292-293), an autistic child named Aaron repeated what his mother said to him:

Mother: Now we are together.

Aaron : ((Turns away rapidly))

Mother: Uh-oh.

Aaron : ((Laughs and turns back toward mom))

Mother: Do you want to be together?

Aaron : Yes

Mother: ((Turns away again and laughs))

Aaron : ((Laughs and turns back))

Mother: ((Laughs))

Aaron : **Now we are together.**

Mother: Mm-hm ((Nods and looks at Aaron))

Aaron : **Now we are together.**

Mother: Uh huh

Aaron : ((Turns away and laughs))

Mother: ((Laughs))

In this case, Aaron kept repeating his mother utterance, which was ‘Now we are together’. Thus, echolalia is considered a type of repetitive, stereotyped behavior.

In addition, Prizant and Duchan (1981) reported that children with autism had echolalia whose communicative functions were various, such as asking, protesting, confirming, and demanding. Hence they will likely to use the same phrases when they need to protest, demand, confirm, or ask people. Although this

'echoes' can have function communicatively, however echolalia is seen as automatic or accidental behavior by some. Thus, echolalia uttered by people with autism may not be relevant at all in the context of communication. Once their linguistic skills develop, this repetition will subside (Pisula, 2003:54).

10. Idiosyncratic Use of Language

Autistic people have extraordinary phrases that can occur in the speech (Kanner in Frith, 1989). These phrases are purely unusual. Attwood (2007:205) studied that a girl who has Asperger's Syndrome or High Functioning Autism once used unique word to her father before giving him a kiss on the cheek, saying "No wanna kiss da Daddy till Daddy use da *Hoover*". The word 'hoover' is actually a type of vacuum cleaner, which means that the girl wanted her father to shave before getting her kiss. This shows that autistic people can be creative in making utterances although it is weird.

Furthermore, the idiosyncratic use of words can also refer to long phrases. For instance the phrase 'don't throw the dog off the balcony' quoted by Kanner in Frith (1989). In this case, the phrase that are always said by a child named Paul may refer to real event when her mother said something about a toy dog. For people who don't know this, they will find it weird and don not understand the meaning behind it at all. Therefore, the idiosyncratic words used by people with autism can make their interlocutors bewildered because the words they use are not normal and sometimes need further explanation.

b. Non-Verbal Language Problems

Pragmatic impairment is most generally linked to the dysfunction of cognition or neuron. The consequences of such dysfunction for communication bring out many kinds of phenomena including language, speech, gesture, eye contact, hearing, and vision (Perkins in Damico et al., 2010). Thus, the impaired pragmatic can impact non-verbal communication also.

Non-verbal impairment has main deficits, namely visual, perception, psychomotor, adaptation, and interaction skills. According to Gillberg in Attwood (2007), people with Autism Spectrum Disorders (ASD) including Asperger's Syndrome have five kinds of non-verbal communication problems. They are limited of gesture, clumsy gauche/body language, limited facial expression, inappropriate facial expression, and peculiar/ stiff gaze.

1. Limited Use of Gesture

Gesture is a kind of communication that is in a form of body language. It can be used to express something that cannot be expressed by the words or to emphasize the meaning in the utterance spoken. However, autistic people have their gestures to be limited. Based on the research conducted by Colgan et al. (2006), they found that most of autistic children observed only showed one type of gestures while interacting, while the normal children had various types of gestures. Moreover, people with autism have limited use of gesture, especially the ones associated with initiating joint attention, such as pointing and showing things that

they are talking about (Osterling & Dawson, 1994; Osterling, Dawson & Munson, 2002).

According to Happé in Stemmer & Whitaker (1998), autistic people may have lack of gestures, but it doesn't mean that they are motionless because they are recognized to have odd stereotypical movements (hand-flapping, toe walking). Therefore, autistic people have limited gesture while speaking. They usually just stand stiffly or playing with things that they are obsessed with while talking to others, not using gestures to emphasize what they are talking about. Although they may use a gesture functionally in one occasion in social activity, they may end up using only one type of gestures to show their responds.

2. Clumsy/ Gauche Body Language

Gauche body language is one of weaknesses of people with autism in motor skills. These motor difficulties affect sensorimotor task widely, such as playing with puzzles and blocks, turning doorknob, hand writing, ball catching, and also task which requires speed, agility, and balance (Jansiewicz et al., 2006; Noterdaeme, Mildenberger, Minow, Amorosa, 2002). As a result, the way they adjust their body and their movement are not normal compared to people with no diagnosis of autism. Moreover, Loh et al. in Chi-Mei & Jin (2015) found out that people with autism have awkward 'hand to ear' posture and the inability to arm wave. This awkwardness may cause their message to be not effectively delivered to people around them and it will affect their efficiency when doing some activities.

3. Limited Facial Expression

People communicate not only with words, but also expressions. When people are happy, it can be seen through their faces that are smiling. If people frown and look annoyed, then those people are feeling angry or frustrated. However, autistic people cannot recognize facial expressions, so they rarely show any expressions. There was a study that children with autism didn't look sympathetic with a central character of a story they were listening to, while the other children without autism looked sympathetic (Attwood, 2007:133). These autistic children only had a look of being attentive the entire time. So, people with autism have difficulty in showing how they feel and think through expressions.

4. Inappropriate Facial Expression

People with autism may give inappropriate expression while talking due to the inability in recognizing expressions and the meaning behind them. When other people would feel many kinds of emotions, such as sadness, happiness, embarrassment and so on, autistic people may only have one respond which is anger (Rieffe, Terwogt, and Stockman, 2000). Moreover, according to Attwood (2007:131), he investigated that people with autism had difficulty in making expressions as they had been told and the expressions they made usually turn out unnatural or weird. Hence, because of this limited expressions and the difficulty of making expressions, they may use inappropriate expression while talking.

5. Peculiar/ Stiff Gaze

People use eye contact to support the process of sending message. In doing so, people can see what others are feeling and thinking through their eyes. However, autistic people like to avoid eye contact. According to Klin et al (2002a), people with autism has tendency to neglect the eye region of the face of participants in a conversation, thus losing crucial cues to interpret social interactions. They generally look at the other object, like mouth, body and anything but eyes while talking or listening (Klin et al. 2002a, 2002b).

In the study of Korkiakangas and Rae (2014), an autistic boy named Niko often avoids gazing at his teacher while giving responds and questions. He most of the time looks at his computer. Thus, autistic people rarely look at people's eyes and mostly look at other object while interacting, which makes their staring odd. Even so, they sometimes look at people's eye, but they are still incapable in getting message through it (Baron-Cohen and Jolliffe, 1997; Baron-Cohen et al. 2001a).

4. The Summary of *The Good Doctor* Film



Picture. 2.2. The Good Doctor Cover (<https://wpblink.com>)

The Good Doctor is an American show based on South Korean Series that shares the same name. This series is released on 2017, produced by Sony Pictures Television and ABC Studios. The Good Doctor tells a story about Shaun Murphy, a person with a high functioning autism and savant syndrome, who works at San Jose St. Bonaventure Hospital as surgical resident. Because of his autism, people who work with him always underestimate his ability as a surgeon. If Shaun is caught up at making mistake, even just one, he will be suspended from the hospital along with the provocation of Dr. Glassman, Shaun's mentor and the director of the hospital, who has made that bargain to his peers.

Although his savant syndrome allows him to be a genius at certain part, like having photographic memory so he is capable in envisioning human's anatomy while operating, his autism troubles him a lot whenever he is communicating to his peers, patients, or even people he knows outside of his job. He doesn't know how to respond and talk properly to the others. It is not rare that he is dominating conversation and being rude even though he doesn't mean to be that way. Moreover, most patients that he meets always feel unconvinced and misunderstand him, being confused at his behavior and his odd speech. Nevertheless, he always tries to do his best to show people that he is worthy as a surgeon.

The autistic savant in this series, who is played by Freddie Highmore, is portrayed greatly. The savant syndrome and the drama in medical environment showed may be exaggerating, however the communication problem in this film, both verbal and non-verbal, is portrayed really accurate (Magro, Kerry, 2018, *My*

Review of 'The Good Doctor' as an Adult with Autism, <https://www.autismspeaks.org/blog/my-review-good-doctor-adult-autism>, accessed on April 16, 2019).

5. The Biography of the Writer of *The Good Doctor* Film

David Shore (born in July 3, 1959) is a Canadian television writer. He graduated from A. B. Lucas Secondary School with distinction and then attended The University of Western Ontario for an undergraduate degree, and the University of Toronto for his law degree in 1982. Before he moved to Los Angeles to be involved in television, he worked as a municipal and corporate lawyer in his native Canada.

One of his famous series is *The Good Doctor*. This series tells about an autistic-savant person who works as a surgeon. Although this series doesn't have anything to do with his degree, David did a lot of researches and saw a lot of documentaries regarding Autism Spectrum Disorders (ASD) (Thomas, Matthew, 2019, *20 Things only True Fans Know about The Good Doctor*, <http://screenrant.com/good-doctor-tv-trivia-details/>, accessed on May 23, 2019). He even have people in the spectrum to help him doing his work and have consultation with them in order to get good portrayal of autistic people in the workplace and so does how their mind works. His awareness towards this spectrum makes him invite some people with autism as actors in certain episodes in the show. He knows that savant syndrome is a rare case even in the spectrum, so he makes sure that the series doesn't appear to be a representation of it, but just autism in

general. Furthermore, he is assisted by David Renaud, a physician, in writing things that needs medical knowledge.

His other popular works aside from *The Good Doctor* are *House*, *Battle Creek*, and *Sneaky Pete*.

B. Previous Study

This research is not the only one that analyzes about language impairment. There are some previous researches similar to this one, for instances Doni Wiranda (2013) whose study entitled “A Psychopragmatic Analysis on Communication Impairments and Illocutionary Acts in Asperger’s Syndrome Character’s Conversation Portrayed in *Mozart and The Whale* Movie”. It focuses on the impaired communication in social and pragmatic aspects and the illocutionary acts of the character Donalt Morton, a main character with Asperger’s Syndrome. Moreover, it is not just the verbal communication problems that have been discussed but also the non-verbal one. Although the language problems focus on the impact of social and pragmatic deficits, the researcher doesn’t include violation of maxims and politeness difficulties.

Secondly, there is a previous research by Ferri Dwi Agustina (2014) entitled “A Psycholinguistic Analysis of Schizophrenic Speech and Behavior Portrayed in the Main Character in *Canvas* Movie”. This research studies about the abnormalities in the speech and behavior in a character suffered of schizophrenia. Schizophrenia has different language problems compared to Autism Spectrum

Disorders (ASD) because it involves hallucination and delusion which don't occur in people with autism.

Thirdly, a previous study by Hastarita Dewanti (2013) entitled "A Psycholinguistic Analysis of Verbal and Non-Verbal Language Problems of an Individual with Asperger's Syndrome in the Movie *Adam*" studies about the communication problems, both verbal and non-verbal, realized by the main character with Asperger syndrome. This study only includes the impairment of language uses in social context. Thus, it doesn't describe about the lack of pragmatics in detail.

Although the previous study also describes about the language impairment in any language disorders such as Asperger Syndrome or Schizophrenia, this study is more focus on the pragmatic language impairment in autistic-savant character in *The Good Doctor*, a series that isn't used in any of the previous researches.

C. Conceptual Framework

Neurolinguistics is one of psycholinguistic branches that concerns about the relationship between language and brain. It is the interdisciplinary enterprise and straddles the boundary between linguistics and other fields connected to the study of mind/brain, such as cognitive psychology, neuropsychology, and cognitive science (Bambini, 2012).

Language is controlled by the brain and the language is influenced by the state of the brain. If parts of the brain are damaged or abnormal, especially the parts when language is involved such as *parietal lobe*, *temporal lobe*, and *frontal lobe*,

then it will cause the sufferers' languages to be impaired. Some of language disorders are aphasia, dyslexia, schizophrenia, and Autism Spectrum Disorder (ASD).

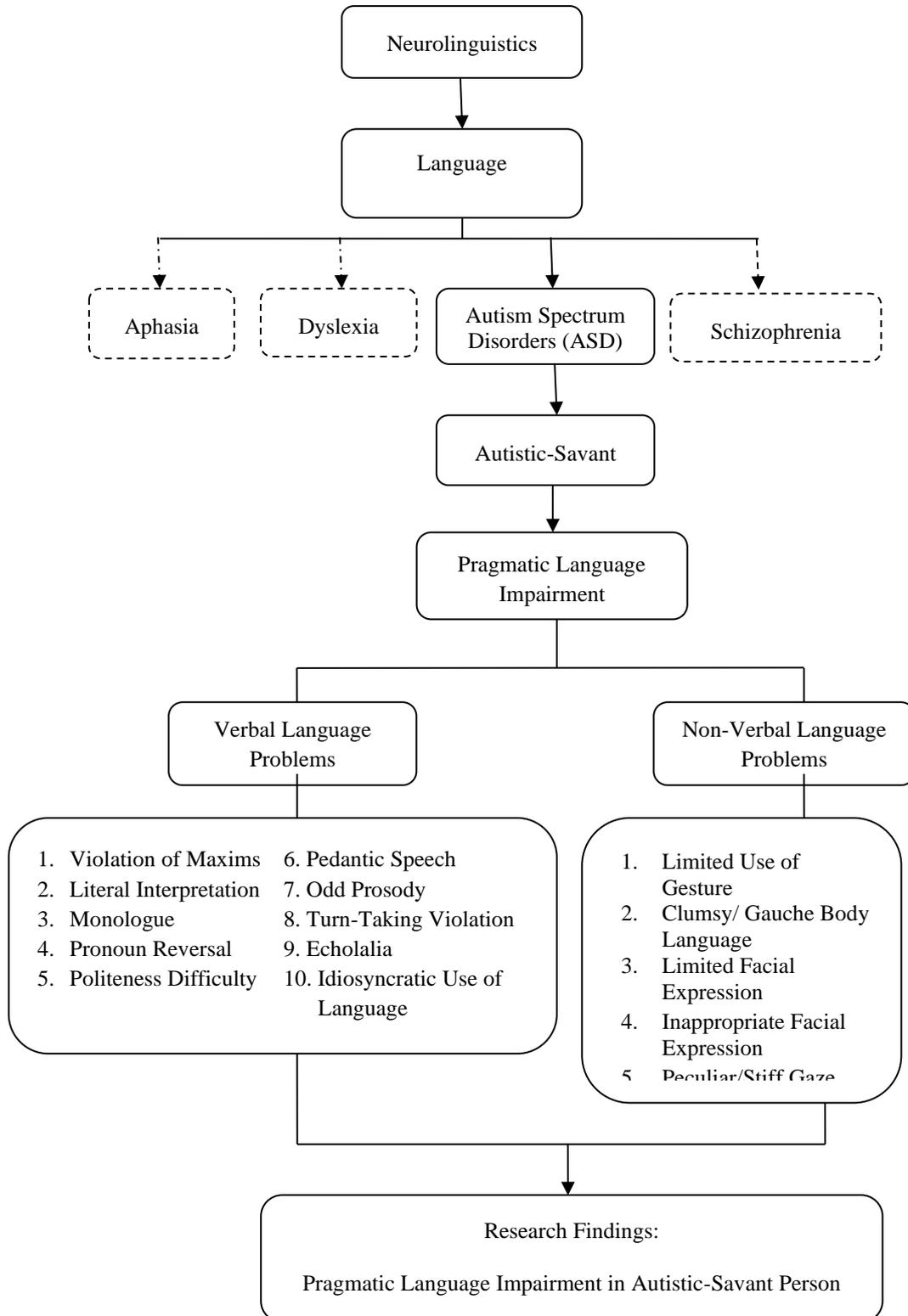
Autism Spectrum Disorders (ASD) is a neurodevelopmental disorder signed by deficits in social communication and restricted repetitive behaviors (RRBs). They have their language to be impaired and this applies to any kinds of ASD, like High Functioning Autism or Asperger's Syndrome. Moreover, autistic people with savant syndrome, a syndrome that allows them to be genius at certain field like calculation, even have their language defected despite of their geniuses. Language impairment that is never absent from the autistic people is called as pragmatic language impairment.

Pragmatic language impairment is caused by the defected cognition, social or pragmatic skills, and theory of mind. People suffered from this cannot use language properly according to the social context and has inability to understand what people or they are thinking or feeling. Pragmatic language impairment impact both verbal and non-verbal communications. The verbal communication problems are (1) Violation of Maxims, (2) literal interpretation, (3) monologue/ verbosity, (4) pronoun reversal, (5) politeness difficulties, (6) pedantic speech, (7) odd prosody, (8) turn-taking violation, (9) echolalia, and (10) idiosyncratic use of words (Surian and Siegal in Stemmer & Whitaker, 2008; Belkaldi, 2006; Tager-Flisberg, Paul, and Lord, 2005). While impaired non-verbal communications are (1) limited use of gesture, (2) clumsy/gauche body language, (3) limited facial expression, (4)

inappropriate facial expression, and (5) peculiar/stiff gaze (Gillberg in Attwood, 2007).

Therefore, *The Good Doctor* will be analyzed because it portrays pragmatic language impairment in autistic-savant person.

Table 2.1. Conceptual Framework



CHAPTER III

RESEARCH METHODOLOGY

A. Research Design

Descriptive qualitative method was applied in this research. The method was chosen because the data appeared in words instead of numbers. According to Miles and Huberman (1984:21), qualitative method was used if the data that dominantly appeared are words instead of numbers. Moreover, Hancock (2009:1) stated that qualitative research was related to expanding explanations of social phenomena. This research described the phenomena of pragmatic language impairment in autistic-savant character in *The Good Doctor*. Thus, the descriptive qualitative method was used in the study.

B. Source of Data

According to Lofland and Lofland in Moleong (2004), the main data of qualitative research were action and language. So, the sources of data in this research were the utterances and the behaviors of the main character in *The Good Doctor*. The series was produced by Sony Pictures Television and ABC Studios, which now consisted of two seasons. However, the researcher only took the first season containing of eighteen episodes as the data sources. Therefore, the researcher didn't analyze the second season of the series. In addition, the film analyzed was taken from <https://indoxxi.cx/film-seri/the-good-doctor-season-1-2017-1jc0s1>.

C. Technique of Data Collection

The researcher used documentary technique for collecting the data. According to Sugiyono (2016:240), the data for documentary technique could be a text, picture, film, photo, and any kinds of works. As a result, the researcher chose this technique because the data gotten was from film.

In collecting the data, the researcher did the following steps:

1. Watching *The Good Doctor* from the first episode to the last episode of season one.
2. Taking notes at the utterances found in each episode of the film.
3. Comparing the subtitles to the utterances spoken by the main character to check whether they were match or not.
4. Finding the kinds of pragmatic language impairment, both verbal and non-verbal, realized by the main character of *The Good Doctor*.

D. Technique of Data Analysis

The technique of analyzing data used in this study was content analysis. Content analysis was a technique for collecting and analyzing a content, that could be words, meanings, pictures, symbols, ideas, themes, or any messages that could communicate, whether they were written, spoken, or visualized (Neuman, 2008:322-323). Based on this, the researcher chose this technique because the research involved the identification and interpretation of pragmatic language impairment, both verbal and non-verbal, of the main character that was autistic-savant in *The Good Doctor* film.

The researcher conducted several procedures to analyze the data. The procedures were as follows:

1. Identifying the kinds of pragmatic language impairment, both verbal and non-verbal, realized by the main character of *The Good Doctor*.
2. Describing the kinds of pragmatic language impairment, both verbal and non-verbal, realized by the main character of *The Good Doctor*.
3. Investigating the reasons behind the realizations of the language impairments.
4. Drawing the conclusion of the research.

CHAPTER IV

DATA ANALYSIS AND FINDINGS

A. Data Collection

*The data were collected from the utterances and behaviors done by Shaun Murphy, the autistic-savant protagonist of *The Good Doctor* film. The data gathered were only from 18 episodes of the season one. There were 352 dialogues consisting of utterances and behaviors that involved pragmatic language impairments gotten from all of the episodes.*

B. Data Analysis

After collecting the data, the researcher identified what kinds of pragmatic language impairments, both verbal and non-verbal, realized by the protagonist. The analysis was done to answer the formulation of the problems, namely what kinds of pragmatic language impairments were realized by the main character in *The Good Doctor*, how were the pragmatic language impairments realized in the main character of *The Good Doctor*, and why were the linguistic impairment realized in the way they were.

1. Kinds of Pragmatic Language Impairment Realized by the Main Character in *The Good Doctor*

After collecting the data by watching and taking notes of the utterances in each of the episode, the researcher identified the kinds of pragmatic language impairments realized by the protagonist based on the theories. These pragmatic

language impairments were divided into two, they were verbal language problems and non-verbal language problems. The verbal problem consisted of ten types, such as violation of maxims, literal interpretation, monologue, pronoun reversal, politeness difficulty, pedantic speech, odd prosody, turn-taking violation, echolalia, and idiosyncratic use of language. While the non-verbal problem consisted of five types, they were limited use of gesture, clumsy/gauche body language, limited facial expression, inappropriate facial expression, and peculiar/stiff gaze.

The data was analyzed based on types of pragmatic language impairments (see appendix 1). Based on the analysis, the percentages of each impairment could be seen on the table below:

Table 4.1. Kinds of Pragmatic Language Impairments (Verbal Language Problems) Realized by the Main Character of *The Good Doctor* Film.

No.	Pragmatic Language Impairment: Verbal Language Problems	Frequency	Percentage
1.	Violation of Maxims	153	26.2 %
2.	Literal Interpretation	79	13.5 %
3.	Monologue	44	7.5 %
4.	Pronoun Reversal	6	1.2 %
5.	Politeness Difficulty	32	5.4 %
6.	Pedantic Speech	31	5.2 %
7.	Odd Prosody	88	15 %
8.	Turn-Taking Violation	124	21.2 %
9.	Echolalia	16	2.7 %
10.	Idiosyncratic Use of Language	12	2.1 %
Total		585	100%

Based on the table above, it could be seen that the main character realized all of the verbal language problems. These verbal language problems occurred as many as 573 times from the 352 dialogues gotten. Therefore, an autistic-savant might commit more than one language problems when he was interacting with someone.

Moreover, violation of maxims appeared to be ranked the highest with 153 data (26.2%) from 585 data of occurrences. This showed that the character had major difficulty in delivering information that he was supposed to. Then turn-taking violation followed behind with total occurrences as many as 124 times (21.2%). The third position was taken by odd prosody with 88 data (15%), then followed by literal interpretation with 79 data (13.5%). Furthermore, there was monologue, which was not realized as many as the previous ones, as many as 44 times (7.5%). Then the sixth place was taken by politeness difficulty occurred as many as 32 times (5.6%), and then followed by pedantic speech with 31 data (5.2%). The last three problems were rarely realized, from echolalia with 16 data (2.7%), idiosyncratic use of language with 12 data (2.1%), and pronoun reversal which was ranked the lowest with only 6 data (1.2%) from 573 data of occurrences.

Besides of pragmatic language impairments in the form of verbal language problems, the non-verbal language problems were analyzed also (see appendix 1). The percentages for each of the problems could be seen below

Table. 4.2 Kinds of Pragmatic Language Impairments (Non-Verbal Language Problems) Realized by the Main Character of The Good Doctor Film.

No.	Pragmatic Language Impairment: Non-Verbal Language Problems	Frequency	Percentage
1.	Limited Use of Gesture	15	2.1 %
2.	Clumsy/ Gauche Body Language	107	15.3 %
3.	Limited Facial Expression	205	29.3 %
4.	Inappropriate Facial Expression	44	6.3 %
5.	Peculiar/ Stiff Gaze	329	47%
Total		700	100 %

Based on the table above, it could be deduced that the main character realized all of the non-verbal language problems. The total data of the occurrences

were 700, which were gotten from the 352 dialogues. This showed that these non-verbal language problems could occur more than once at a time.

In addition, peculiar/stiff gaze was found to be the highest among them all, which occurred as many as 329 times (47%) from 700 data of occurrences. Then, there was limited facial expression in the second place realized as many as 205 times (29.3%), and then followed by clumsy/gauche body language with 107 data (15.3%). The fourth place was taken by inappropriate facial expression realized not as often as the others as many as 44 times (6.3%). Lastly, there was limited use of gesture, which was ranked the lowest, with only 15 data (2.1%) from 700 data of occurrences.

2. The Realization of Pragmatic Language Impairment by the Main Character of The Good Doctor

After identifying the pragmatic language impairment, both verbal and non-verbal, the researcher described the data found. This part was divided into two parts, the first one was the verbal language problems, while the second one was the non-verbal language problems.

a. Verbal Language Problems

1. Violation of Maxims

Violation of maxims appeared to be a language problem that was ranked the highest. There were 152 maxim violations from 573 data gotten. This showed that an autistic-savant person had difficulties in conveying an information that they were asked and maintaining a topic of conversation. These maxim violations could be divided into four, they were the violation of quantity maxim, the violation of quality

maxim, the violation of relevance maxim, and the violation of manner maxim. All of these four maxim violations were realized by the main character, Shaun Murphy. So, the responds given by an autistic-savant individual might be lacking.

a. Maxim of Quantity

Maxim of quantity was the principle of telling something as informative as possible. The information could not be less or more than it was supposed to be. So, if this maxim was violated, then the information given might be more or less than necessary. This occurred as many as 30 times of 153 data. The example of this maxim violation could be seen when Shaun had an interview in the hospital.

Aoki : Dr. Murphy. I'd like you to tell us why you want to become a surgeon.

Shaun : ... **The day that the rain smelled like ice cream, my bunny when to heaven in front of my eyes. The day that the copper pipes in the old building smelled like burnt food, my brother... went to heaven in front of my eyes. I couldn't save them. Neither one had the chance to become an adult. They should have become adults. They should have had children of their own and loved those children and I want to make that possible for other people. I want to make a lot of money so that I can have a television.**

(EP1/PLI/N14)

The setting of the example was at certain room in San Jose St. Bonaventure hospital. Shaun was asked to give his reason why he wanted to be a surgeon by Aoki. It took several minutes before Shaun explained to her why he wanted to. Instead of saying he wanted to be a surgeon to save people and make them experience adulthood, he gave extra information about the death of his rabbit and little brother and how his surroundings were smelled when they were dead. While these supported his reasons, this information was not asked by Aoki. So, in this situation, Shaun gave more information than he was asked.

b. Maxim of Quality

Maxim of quality was the principle of telling something that was true. So, giving false information or anything whose fact was unproven violated this maxim. Maxim quality was realized as many as 23 times of 153 data. This maxim violation could be found when Shaun met his mentor, Glassman, in front of an elevator of the hospital. In this example, Shaun lied to Glassman about a therapist being helpful.

Glassman : How'd it go with Melissa?
Shaun : **She was... very helpful.**

(EP10/PLI/N184)

In this situation, Shaun was asked whether Melissa, a therapist, was helpful or not for Shaun to ease his mind from the trauma caused by being involved in shooting accident. Glassman already asked Shaun to meet Melissa on previous day at his apartment, but Shaun stayed at the hospital to avoid her, sleeping at the storage room. Shaun lied to Glassman regarding to her helpfulness. He didn't want Glassman to find out that he didn't return to his apartment, however Glassman knew that he was lying because his clothes were same as yesterday. At this moment, Shaun was being untruthful towards Glassman.

c. Maxim of Relevance

Maxim of relation was the principle of telling something relevant to the conversation. Saying something that was irrelevant was considered to violate this maxim. There were 50 violations of relation maxim gotten from 153 data. The example of this kind of maxim violation could be seen when Shaun and Browne were on the way to deliver a liver to the hospital.

Browne: What are you looking for?
 Shaun : (Looked at the liver scan)
 Browne: What do you see?
 Shaun : **I have a girl neighbor.**
 Browne: (Confused) Okay. Is she nice?
 Shaun : (Looked at the liver scan)
 Browne: What does she do? Does she... Have a boyfriend?
 Shaun : (Looked at the liver scan)
 Browne: Do you know her name?
 Shaun : (Clumsily moving the scan)
 Browne: What the hell are you looking for on the scans?
 Shaun : ...

(EP3/PLI/N55)

Shaun and Browne were in a police car on the way to San Jose St. Bonaventure hospital. Browne was bewildered at Shaun who busily looked at the liver scan. She asked what things that made him so interested in it and she mostly was ignored. Once she got an answer, the information given to her was not relevant at all. Browne thought that Shaun didn't want to talk about the liver, but his neighbor, so she kept the topic for long but kept being ignored by the man. Shaun's respond violated the maxim of relevance.

d. Maxim of Manner

Maxim of manner was the principle of telling something clearly. The rule of this maxim was to keep an information brief, clear, and unambiguous. So, any kinds of information that were told in unclear manner violated this maxim. This maxim occurred as many as 50 times of 153 data. Shaun liked to give ambiguous information, which made the interlocutor need to ask further or for worst, create a misunderstanding between them. The example could be seen when Shaun interacted with a patient when doing his scut work.

Patient : You sure? It... It's safe for me to go home? So am I okay? Am...
 Am I okay?

Shaun : **According to all hospital rules and direct instructions given to me, yes.**

(EP2/LPI/N29)

In this situation, Shaun had a conversation with a patient in one of the patient rooms in the hallway. The patient was really worried about his health because he thought his puke had a different color than usual. Actually, Shaun agreed with him, but was warned by a bossy nurse, so he let it slide. However, the patient asked him again about his condition after seeing Shaun's weird respond, but Shaun gave unclear information about it. The respond didn't answer whether he was truly healthy or not. Shaun was a doctor, but the reason he said yes was not because of his knowledge pertaining the symptoms, but regulation. This made the patient confused and he looked at Shaun in disbelief. In this case, Shaun violated the maxim of manner.

2. Literal Interpretation

Literal interpretation happened when an individual interpreted meaning literally, without looking at the context of situation and how the interlocutor uttered the words. This language problem occurred quite often as many as 79 times out of 573 data. Literal interpretation was signed when a person couldn't digest a joke, figurative language, idiomatic expression, and even a hidden request. This commonly happened in people with autism, who had weakness in interpreting beyond literal meaning. Thus, they needed people to be clear of what they were saying.

This section was divided into three. The results that weren't classified as these three were normal literal interpretation, which meant that the utterances

interpreted weren't figurative speech, indirect request, idiom, and joke, yet they carried meanings that were not literal due to context. This normal literal interpretation occurred 33 times from 78 data. The example of this kind of literal interpretation could be seen below:

Glassman : Yes, but people have told you that *it's your fault*, haven't they?
 Shaun : **My actions and the shooting were associative incidents. It is not a causal relationship. I paced, and she got shot, but pacing doesn't cause shootings. Otherwise every time someone paced, a shooting would soon follow.**
 (EP8/PLI/N161)

In this scene, Glassman reminded Shaun that most people blamed him for the incident. Back in the market, Shaun was threatened by a robber to give him his wallet, but he didn't respond and began to pace. This caused the robber to get mad and accidentally pulled the trigger of his gun so a girl got shot. Shaun's action of not giving the wallet was the reason why people put a blame on him. However, Shaun didn't think so. He thought that the girl was injured because of the shooting, not him. So, he couldn't understand that his action was a part of why the robber shot the girl and couldn't think of a possibility that the girl would have been saved if he had given the robber his wallet.

a. Figurative Language

The main character of *The Good Doctor* hardly understood figurative speech so he mostly interpreted it literally. This occurred 29 times from 79 data. The example of interpreting literally could be seen when Shaun was talking to Melendez at the first time he worked at San Jose St. Bonaventure hospital.

Melendez : And every patient in this hospital could have malaria, but that doesn't mean we're gonna go around testing for every condition

we think they could have. For example, that MRI you ordered on the guy with the ear infection? *Nice call, genius.*

Shaun : **Thank you.**

Melendez : I was being sarcastic.

(EP2/LPI/N26)

Melendez and Shaun had an argument outside a patient room. He advised Shaun not to do an MRI anymore for patients that were already clear to be allowed to go home, for instance the patient with an ear infection, who was proven to be completely healthy. Melendez said “Nice call, genius” at the end of his protest. Literally, the phrase had positive meaning because it was a form of compliment and it meant that Melendez acknowledged Shaun’s intelligence. However, the way Melendez said it to Shaun was unpleasant and his face didn’t look happy. He said it mockingly. This meant that the phrase couldn’t be taken at the surface only, but beyond literal meaning. “Nice call, genius” was a sarcasm and Melendez threw it at Shaun because of his stupid action. So, the real meaning of the phrase was Shaun was a moron, the antonym of genius. Because Shaun couldn’t connect the contradiction between the way Melendez said the phrase and the literal meaning of it, he failed to get the sarcasm. As a result, he thanked Melendez for that until Melendez clarified it to him.

b. Idiomatic Expression

Shaun didn’t get idiomatic expression for 3 times of 79 data. In the example, he took his patient, Evan, seriously when he indirectly asked him something quite vulgar.

Evan : A friend you date? *A friend with benefits?*

Shaun : **I lend her batteries sometimes.**

(EP5/PLI/N94)

Shaun was at a place like a lab to check Evan's condition. They had a conversation about Lea, a girl neighbor that Shaun really liked. Evan asked if this Lea was his girlfriend or just "a friend with benefit." Evan asked the question in amusement and a sly smile could be traced from his expression. The phrase was actually an idiom meaning a friend whom a person had sex with without having romantically involved. Shaun didn't get the meaning behind it, so he answered literally by telling Evan that he lent batteries to Lea in occasions. Apparently, he thought that "a friend with benefits" referred to a friend that gave advantages to each other. Shaun didn't know the real meaning of the idiom and he was not suspicious at Evan's sly expression and how Evan asked him, that sounded like a teasing. Evan was amused at Shaun's funny respond.

c. Indirect Request

Shaun didn't get when people gave an indirect order to him and this happened 9 times out of 79 data. One of examples was when he stayed at Lea's apartment in order to avoid Glassman. He didn't want to see him because what had happened between them on the previous day. Lea advised him.

Lea : Okay, you're overworked, stressed out, and pissed off at your boss. Now is not the time to be making a big decision. *You need to take a break, clear your head. You need a vacation.*

Shaun : **I have to work five more months before I earn a vacation.**

Lea : *So call in sick.*

Shaun : **I'm not sick.**

(EP11/PLI/N203)

At the first attempt, Lea's indirect request wasn't understood by Shaun. He didn't realize that Lea asked him to be absent to take a vacation with her, so he told her that he couldn't have one because holiday was still far away. Lea gave him

advice for a second time to give him a better grasp of what she really meant, which was lying to the boss that he was sick so he's allowed not to work for that day. However, Shaun still didn't get it. He reasoned that he couldn't call in sick because he was not sick. An idea to lie to his boss for a vacation never crossed his mind.

d. Joke

It's difficult for the main character to detect a joke, whether it was a kind of flirting or teasing. This occurred as many as 5 times from 79 data. One of the examples could be seen when his patient, Evan, tried to tease him about Browne.

Evan : So, what's up with Dr. Browne? She's Lea, isn't she?
 Shaun : Claire is my colleague.
 Evan : Oh, come on, I saw the way you were looking at her.
 Shaun : How?
 Evan : (*Blinking cutely and funnily*)
 Shaun : **I don't think I look like that.**

(EP5/PLI/N99)

In this situation, Evan assumed that Browne, Shaun's friendly colleague, was Lea, the girl that Shaun had crush on. Shaun was being vague whether Browne was Lea or not from his respond, so Evan teased him. He told Shaun that the way Shaun looked at her was different and started to funnily make his eyes blinking cutely by closing and opening them fast, as if he was impersonating Shaun. Shaun looked at Evan's antics and didn't laugh or even smile although it was obvious that Evan attempted to make a joke out of him. He then seriously told Evan that he didn't blink that funny at Browne. He was too serious in reacting to Evan's joke.

3. Monologue

Monologue was a kind of language problem when a person talked as if they were not talking to the interlocutor. They seemed to talk to themselves and voiced

what they were thinking and feeling. Moreover, it also occurred when someone was being verbose. This impairment was only realized as many as 44 times out of 573. This showed that an autistic-savant rarely showed this problem. Although sometimes they talked in one way conversation, it was not as often as some of the other language problems.

Shaun had a savant syndrome which allowed him to have a spatial memory and great vision. When he thought of something and got a conclusion out of it, he had a tendency to voice it out loud. For instance, when he treated a victim of a fallen signpost in an airport, he had a monologue about the victim's condition.

Shaun : **The vein in the boy's left arm are popping.**

The Kid's Mother : Is that bad?

Doctor : I- I don't see it.

Shaun : (Looks at the mother) Intrathoracic pressure.

Doctor : No, his chest is rising. He's breathing.

Shaun : No, the... the chest is moving paradoxically. The left lung is in distress. **Yes.**

(EP1/PLI/N3)

In this situation, Shaun visualized how the patient's condition while looking at his both arms and body. He could imagine the vein for each of the body parts that he was looking at. From the condition, he concluded that victim's chest was under intrathoracic pressure due to an abnormal swelling and it's popping in his left arm. The other doctor didn't feel that way, but Shaun insisted. He checked the victim's body again and explained to the doctor how the chest moved. He then had a vision and commented it with a "yes" to himself after getting the information he needed.

Moreover, a monologue didn't always happen when Shaun was visualizing things, but it could be occurred when Shaun was reading something. There was one

case when Shaun stated his opinion while reading a test of a patient that had been sent home.

Lab. Girl : Everything is within normal range.

Shaun : **Hmm... Slightly elevated lactate and amylase, and she's very small. Normal should be lower. Normal should be lower.**

Lab. Girl : What do you think she has?

Shaun : Thank you.

(EP2/PLI/N38)

In this case, Shaun was fixated at the result. He voiced the abnormality found in the test. The way Shaun explained about it is as if he was talking to himself, not talking the lab. Girl. He didn't even respond to the woman's question properly after he stated his concern and he left afterwards.

Moreover, the other example showed that Shaun was having monologue by being verbose when talking. It could be seen when he worked at the hospital at the first time.

Brand : Am I ever gonna walked again?

Melendez : (Smiled)

Shaun : **Yes. Of course. This is Mitchell Brand. I reviewed his chart. He's 55 years old from Chiago, divorced with two children. You did a radical prostatectomy on him yesterday. There are many possible complications but none related to motor neurons. There is no chance you won't be able to walk.**

Browne : He... He wasn't worried about his legs.

(EP2/PLI/N18)

In this situation, Shaun answered the question which was supposed to be Melendez's. He gave more information regarding to the possibility of the patient to 'walk' again. His explanation was disjointed at first because after responding with a 'yes', he talked about him reading the patient's chart and leaked his personal data right in front of the said patient. Then, he explained to the other doctors that they already did a surgery to him. After that, he told about the complications emerged

weren't related to any motor neurons, which was the only topic that supported the respond 'yes'. While talking, the other doctors, especially Melendez, were looking at Shaun in confusion and dislike due to his interruption and long speech.

4. Pronoun Reversal

The use of pronoun depended on the context. Individual with autism was known for using the wrong pronoun when talking. This wrong use of pronoun was often believed to be the effect of echolalia. It was due to the individual trying to use certain words they've heard to the interlocutor, however the pronouns weren't changed. If the words were left unchanged in a wrong context, then pronoun reversal happened. Nonetheless this language problem could happen also because the autistic people had trouble in deciding what pronoun to use.

There were only 6 out of 573 data found to be pronoun reversal. It appeared that this was not a major problem for an autistic-savant because it was ranked the lowest. One of the examples of pronoun reversal was when Shaun did a surgery with Andrews and Browne. This example didn't show the effect of echolalia.

Shaun : Are you trying to mock me or encourage me?

Andrews : I'm trying to get to know you so I know when I should mock and when I should encourage.

Shaun : **When's the right time to mock you?**

(EP4/PLI/N79)

The conversation took place in the operation room, where Shaun and the others were operating on a patient with bartholin gland abscess. Andrews and Shaun had a unique talk about Shaun's love life. Shaun admitted that he almost kissed a girl once and Andrews responded that it was alright if it didn't work well at first. Shaun didn't know if Andrews really encouraged him or not, so he asked him about

that. Andrews only gave vague answer because he didn't know Shaun yet, so he couldn't decide. Shaun wanted to ask when the right time to mock himself, but instead of using "me", he used the word "you." So it fell as if Shaun wanted to mock Andrews at the right time. This made Browne hold her laughter.

The other example of pronoun reversal could be found when Shaun was angry at Glassman at San Jose St. Bonaventure hospital. This reversal was affected by echolalia.

Glassman	: Shaun, I don't understand...
Shaun	: Okay (Patting his head)
Glassman	: Why this is so...
Shaun	: <u>You</u> don't let anyone... (Patting his head)
Glassman	: Upsetting. I don't get it.
Shaun	: Ever tell <u>you</u> what <u>you</u> can and can't do (Patting his head)
Glassman	: Shaun, just calm down now, please.

(EP10/PLI/N200)

In this scene, Shaun refused Glassman to take him to see a therapist. He kept insisting that Glassman didn't have right to order him around and he wanted to make his own decision. Shaun showed his frustration by patting his head and started talking when Glassman was still speaking. He wanted to add his statement by telling Glassman that he wouldn't let anyone to decide what he could and couldn't do. This statement was inspired by Bobby, his patient that he met beforehand. Bobby advised him directly "Don't ever let anyone tell you what you can and can't do." There was a slight change when Shaun uttered it to Glassman, however he didn't change the pronoun resulting to wrong pronouns were used in his protest. He should have said "I don't let anyone ever tell me what I can and can't do" instead.

5. Politeness Difficulty

Autistic individual underwent difficulties to be polite. They sometimes liked to ask something inappropriate and sensitive to his friends and even strangers. Moreover, they might give comment that was insulting to the listener. Yet, this impoliteness happened without them being aware that they were being impudent. Politeness difficulties weren't realized frequently by Shaun. There were only 32 out of 573, an evidence that an autistic-savant mostly acted and talked politely towards the people they met.

One of examples that Shaun being impolite was when he met Alex Park, a doctor, at a certain room in San Jose St. Bonaventure hospital. Park was reassigned to their team, so he needed to introduce himself to the others and Shaun.

Park : Nice to meet you (Gives hand for handshake)
 Shaun : (Doesn't return the handshake)
 Reznick : Welcome back. How was Costa Rica?
 Park : Beaches were awesome. Monkeys were horrible. Little bastards stole my new camera and a pair or—
 Shaun : **How old are you?**
 Park : ... 45.
 Shaun : **That's even older than Dr. Melendez.**

(EP15/PLI/N274)

In this situation, Shaun asked how old Park was. Age might or might not be a sensitive topic. It depended on the culture and the people being asked. In America, age was considered as a sensitive topic because it was related to personal data, particularly when the one being asked is a stranger, a women, or a new acquaintance. Park was Shaun's new colleague, so his question was regarded impolite. Moreover, Shaun commented that Park was older than Melendez. Such comparison could be insulting because some people thought that age was more than

numbers, like connecting it to experience and success rate. So comparing age could be seen as comparing both individuals. Fortunately, Browne informed Park about Shaun's autism and he was alright with it.

Furthermore, the rate of politeness could be affected by the status of people. Commonly, a person with higher status was being respected more than their inferiors. The act of being impolite based on status could be found in the conversation between Shaun and Melendez in the operation room.

Shaun : I saw a lot of surgeons in medical school. You're much better than them. I have a lot to learn from you.

Melendez : (Surprised).

Shaun : **You're very arrogant. Do you think that helps you be a good surgeon? Does it hurt you as a person? Is it worth it?**

(EP1/PLI/N15)

Melendez was undoubtedly the leader of the operation team and Shaun's superior, while Shaun was still a surgical resident. However, Shaun didn't show any respect when calling Melendez arrogant. This surprised the other doctors and nurses around them. There were no other doctors that acted like that towards Melendez, even Browne and Kalu avoided disrespecting his decision-making. This showed that Shaun didn't see his status when he was talking to people. He talked because he wanted to talk.

Moreover, another example showed a politeness difficulties because Shaun tried to invade someone's personal privacy, in this case his patient's life. In a lab, Shaun asked Quinn many things out of curiosity.

Shaun : Hello. **Do you wear dresses?**

Kalu : Murphy, don't.

Shaun : Quinn is a boy who thinks he's a girl. I want to know why he thinks that.

Quinn : Sometimes, I wear dresses, but sometimes I wear leggings.

Shaun : **Do you like the color pink?**
 Quinn : I'm more of a purple girl.
 Shaun : **Do you play with dolls?**
 Quinn : Since I was 5, but I'm super into mermaids.
 Shaun : **Do you take dance—**
 Kalu : Murphy, 20 questions are up (Drags Shaun)
 Shaun : I only asked four. **Do you wear perfume?**
 Kalu : It doesn't matter. The CT's ready. Let's go.
 Shaun : **Do you always paint your nail?**

(EP14/PLI/N262)

In this situation, some of Shaun's questions were not completely harmful for Quinn. However, Quinn wasn't like any other kids, he was transgender who thinks he was a girl. The questions Shaun asked were mostly a question to know whether he did girly things, like wearing dresses, taking dance lessons, and so on. These were sensitive questions because Shaun tried to invade Quinn's privacy. At first, Quinn seemed alright, but he became more and more uncomfortable at Shaun's curiosity. His discomfort could be seen at his frowned face. Kalu was there to make Shaun stop because he knew it was not Shaun's business and Shaun was being disrespectful towards their patient.

6. Pedantic Speech

Autistic people were recognized for having a pedantic speech, a formal way of speaking. This usually involved unnecessary use of adjective to describe things or unnecessary formality in casual conversation. Pedantic speech made these people sounded like a genius because they seemed to be really detail at things. This language problem only happened 31 times out of 573. Shaun mostly talked like any other people, yet sometimes he became too formal and detail. The proof of pedantic speech could be seen below.

Andrews : Okay, what do we need to do here, Murphy?

Shaun : **A superficial partial-thickness burn** should be managed conservatively. Cleanse the area, debride with soft gauze and then cover with **an antimicrobial petrolatum dressing**.
(EP13/PLI/N233)

Shaun and the others were checking a patient named Naja in the patient's room. Before Shaun spoke, Andrews already mentioned about a burnt arm without specifically stated how the burn was. Unlike Andrews, Shaun explicitly mentioned how the burn was with "a superficial partial-thickness burn" when he was talking about it although the word "burn" was enough. Moreover, he called "dressing" with "an antimicrobial petrolatum dressing." He became too detail of what kind of dressing they needed to cover the burn with. It was unnecessarily detail because the doctors around Shaun were already professional and could decide the right dressing for burn injury.

Another pedantic speech could be found when Shaun introduced himself for the first time to Lea at the apartment. They actually had met before, but they couldn't introduce themselves properly. Lea casually told her name to Shaun without telling him her full name, while Shaun fully told her what his name was along with his title. Telling a full name might be considered common, however stating a title for introduction was unusual, especially if that someone introduced themselves to a neighbor or even potential friends.

Shaun : What is your name?
Lea : I'm Lea.
Shaun : **I'm Dr. Shaun Murphy.** Nice to meet you.
(EP3/PLI/N64)

Moreover, another example of this kind of speech could be seen when Shaun informed the injury that Liam, a patient, got to his parents.

Liam's mother: Can someone tell me what happened?

Shaun : Liam has a **5.4 centimeter laceration** on his forehead, probably from a fall. The wound was infiltrated with **5 milliliters of 1% lidocaine... 7... 7 single-interrupted 5-0 prolene sutures**. He will have a small scar, but other long-term effect from this injury.
(EP7/PLI/N129)

Shaun met Liam's parents at the hallway where some patients were treated.

Shaun answered the mother's question by informing her the injury that Liam got in detail. He told her the length of the laceration he had, the amount of lidocaine Shaun gave to him, and the amount of sutures followed by the length of the sutures used. All of these information were unnecessarily detail because the mother only wanted to know what happened to her son and what injury her son got. Shaun's information was more than enough.

7. Odd Prosody

Odd prosody referred to the pattern of intonation and stress that was uttered in abnormal way. People with Autism Spectrum Disorder (ASD) had difficulty in creating tone when speaking. They basically talked monotonously and emotionlessly, so when they were angry, their intonation might not show it at all. This was an oddity in emotional prosody. Moreover, they might stress the wrong syllable and create wrong phrasing that could cause the change in meaning in an utterance or even change the form of that utterance. These changes in meaning and form were oddities in linguistic prosody. This abnormal prosody makes autistic people to sound weird.

This language problem was realized as 88 times out of 573. This proved that odd prosody still occurred quite often in an autistic-savant. Some of the examples could be seen below.

Shaun : **You fixed my sink!**
 Armen : Do you know how to tell time?
 Shaun : **You fixed my sink!**
 Armen : You're welcome. Now go away.
 Shaun : **It was not on the list! The faucet. It was not on the list. You weren't supposed to touch it.**
 Armen : So after I fix everything you woke me up for, then I go out of my way to fix something el—
 Shaun : I was not on the list because I'd already fixed it.
 Armen : Well, you fixed it wrong. Because it was still dripping.
 Shaun : I need it to drip. At the same rate as my sink in Casper. It was too slow before. Now I have to fix it all over again. It's not fair.
 (EP4/PLI/N81)

This situation happened at the apartment. Shaun wanted to voice his complain about the fixed sink. However, his voice and expression were flat and emotionless, so Armen couldn't realize Shaun's frustration and took it as a sign of gratitude. Even when Shaun tried to tell that Armen shouldn't touch his sink, his voice was still monotonous. Armen then realized Shaun's protest after hearing he wasn't supposed to touch the sink. This realization came because of the information, not the intonation.

The other example of odd prosody could be seen when Shaun met Browne at the first time at San Jose St. Bonaventure hospital. Shaun tried to suggest her to use an echocardiogram to treat the patient. However, the way Shaun uttered it was higher at the end of the sentence. As a result, his suggestion sounded more like a question than a statement. Instead of sounding like "We need an echo... Echocardiogram," it sounded like "We need an echo... Echocardiogram?" He sounded as if he was asking why echocardiogram was needed.

Browne : Get him set up in Trauma 3 with EKG, full blood work and a pan-scan.
 Shaun : **We need an echo... Echocardiogram.**
 (EP1/PLI/N8)

Furthermore, there was an odd prosody changing the meaning of a sentence.

The example was when Shaun interacted with Evan for the last time.

Shaun : (Reading) "... While he hadn't done any of those things, Atticus, he was real nice. His hands were under my chin, pulling up the cover, tucking it around me. **Most people are, Scout, when you finally see them.**"

(EP5/PLI/N107)

In one of patient's rooms in the hallway, Shaun was reading a novel to Evan.

The last sentence of the story was read flatly, so there was no coma could be traced from his intonation. The original meaning of the last sentence was people were good when people looked deeply into them. That was an advice uttered by Atticus, the character novel, to his daughter named Scout. However, because Shaun read the line as "Most people are Scout when you finally see them," the meaning was distorted into most people were Scout (or scout) when people got to know them. So, in this changed meaning, Atticus advised Scout that people were like her when she looked beyond them or people had the soul of a scout when people looked deeply into them.

8. Turn-Taking Violation

Turn-taking violation happened when an individual didn't give any kinds of respond to the interlocutor. This also could be occurred because of several actions, such as interrupting conversation, hijacking a topic, and ignoring the speaker. This problem happened many times as 124 of 573 data. This showed that an autistic-savant experienced difficulty in managing turn-taking. From the data, it was shown that Shaun liked to interrupt and ignore the speaker so much. The examples could be seen below.

a. Ignoring

Ignoring was an action which someone did in order to not give any responds when the interlocutor was finished talking. This violation in turn-taking happened as many as 55 times of 124 data. This showed that Shaun could be really unresponsive at certain time. The example can be seen below:

Browne : Do you know what this is, right? Well, I'll tell you what it is. It's scut work.
 Shaun : **(Looks at the rotors)**
 Browne : Jared gets the golden ticket and we got... Pizza delivery.
 Shaun : **(Looks at the rotors)**
 Browne : The rotors just go round and round, Shaun. They don't change.
 Shaun : **(Looks at the rotors)**

Browne : How do I talk to you?

(EP3/PLI/N46)

This scene happened when Shaun and Browne were at a helicopter, on the way to another hospital to get a liver transplant. Browne whined about them being unlucky for not being included in the operation, but being ordered to pick up a liver. However, Shaun didn't listen to her and kept being distracted by the rotors of the helicopter. He kept looking at it over and over and started imagining the parts of the rotors. Browne commented about them, yet Shaun still didn't respond.

b. Interrupting

Interrupting was an action which someone did to interrupt by cutting or butting in in the middle of conversation. This interruption occurred 59 times out of 124 data. This proved that autistic-savant had tendency to cut people's words or joined a conversation that he was not in.

The example of Shaun made an interruption was when he treated a patient and listened to instruction given by Melendez.

Melendez : We're gonna have to work fast. I'll prep the evac drain. I'm gonna need you to put that needle right between—
 Shaun : **6th and 7th rib** (Takes a needle and checks it)
 Man : Wait, you're gonna let him do—
 Melendez : Shut up. All right, be careful. Don't put the needle in too deep. We don't want to give her—
 Shaun : **Pneumothorax.**

(EP8/PLI/N160)

In a patient's room, Shaun and Melendez were treating a female patient that needed an immediate attention. Melendez tried to give instruction to Shaun, but Shaun interrupted him before he could finish his sentence. This happened again when he instructed Shaun not to put the needle too deep. Shaun always gave a comment to continue Melendez's instruction for each of interruption he made. Shaun cut Melendez's instruction because he knew what kind of instruction that Melendez would give to him.

c. Talking in People's Turn

The other turn-taking violation was talking in someone's turn. This was similar to interruption, but in this case, the interlocutor interrupted was still talking to finish their sentences. This was only realized as many as 10 times from the 124 data gotten. This showed that the main character knew when to speak. The example of this turn-taking violation can be seen below:

Shaun : I crashed (Goes outside the car)
 Lea : We didn't. We just...
 Shaun : **Yes, I-I crashed. I hit something.**
 Lea : Shaun, Shaun.
 Shaun : **I hit something. I did. I hit something** (Messing his hair)
 Lea : Shaun, you...
 Shaun : **I know, I did. I felt it. I crashed.**
 Lea : Shaun, you didn't crash.
 Shaun : **Yes.**
 Lea : You just drove off the road...
 Shaun : **No.**

Lea : ... And it was totally my fault.
 Shaun : **No, you're wrong. Nu-unh. I hit something.**
 (EP11/PLI/N209)

In this scene, Shaun had a driving lesson with Lea as his coach. Suddenly, he couldn't control the car, so it bumped into something on the street. Shaun began to panic, believing that he crashed Lea's car to something he hadn't found out. Lea tried to calm him down and reassured him that he didn't crash her car, but Shaun kept being persistent about it. He consistently muttered he crashed when Lea was there still talking to him. Shaun didn't care about Lea's reassurance and blamed himself over and over again. Panic made him become uncontrollable.

9. Echolalia

Echolalia was an action of repeating what people had ever said, which involved similar intonation, words or phrases spoken. Although this had function communicatively, the words caused by echolalia might not be relevant and were oddly placed. This only happened as 16 times out of 573 data. This showed that an autistic-savant rarely echoed people's words. Most of Shaun's echolalia was well placed, but there was a time when he didn't know the exact meaning of it.

One of examples of echolalia was found in the scene where Shaun interacted with Evan in the patient's room.

Evan : Why do I need a bone marrow aspiration?
 Shaun : My attending saw a low RBC count and wants to find the cause.
No biggie.
 Evan : "No biggie?" You're lying. What's going on? You already told me I have terminal cancer, what's worse than that?
 (EP5/PLI/N103)

Before Shaun met Evan in the room, Shaun had a discussion with Glassman. He asked Glassman whether it was okay to run a test for Evan without Melendez

and the other's consent. Glassman told him not to tell anyone if he was going to do that and said "No biggie" at his lying advice before they parted away. Shaun echoed the "No biggie" part and Evan noticed this weirdness. Shaun never said something informal to him before, so he assumed Shaun was lying. Moreover, the way Shaun said it was sounded like an afterthought.

Another examples was found when Shaun did an MRI for his patient named Bobby. He echoed Bobby's words immediately after he said it to Shaun.

Bobby : Okay, you asked nicely.
 Shaun : Yes. Yes, I did.
 Bobby : You gotta be fierce if you want the glory, bro.
 Shaun : Oh, no. I don't **want the glory, bro.**

(EP10/PLI/N188)

In this setting, Bobby once again gave advice to Shaun to stand firmly against his superiors, so he could be respected like the other doctors. He told him to be stronger and kept believing in his opinion. This was how people could gain respect or glory. Shaun immediately objected him and imitated Bobby's voice when he said "don't want the glory, bro." Shaun didn't want glory, he just wanted to be a good doctor.

Moreover, en echolalia was noticed again at the scene where Shaun had an argument with Glassman at certain room at San Jose St. Bonaventure hospital. This echolalia appeared to be a phrase that was gotten from the past. Shaun said "... Shaun was right. Shaun was right" which was really odd because he never addressed himself by his first name. Before this phrase came out, he told Glassman "I was right" instead. When Shaun was angry, he had tendency to speak in weird

construction and echolalia liked to emerge or influence the way he was talking. This phrase was one of them.

Shaun : I said doctors make mistake...
 Glassman : Yeah, they made a mistake. I have less time than we even thought!
 Shaun : ... And they made a mistake. **Shaun was right. Shaun was right.** Imaging is unreliable.

(EP18/PLI/N335)

10. Idiosyncratic Use of Language

People with autism were known for their idiosyncratic use of language. This happened when they created a word by themselves or made a use of word in unusual way. The words used even could be influenced by the event from the past. This made them really creative. There were only 12 idiosyncratic use of languages out of 573 data. This was evidence that autistic-savant could be creative and also weird when talking. Some utterances containing this could be seen below.

Security : What is he doing?
 Nurse : I have no idea.
 Shaun : Well, you don't have one, so I'm making a **REBOA**.
 Nurse : A what?
 Shaun : **A REBOA**.
 Nurse : Is that even a word?
 Shaun : **A REBOA** will occlude the damaged artery and stop the bleeding.

(EP6/PLI/N10)

Shaun and the others were trying to stop the patient's bleeding. Shaun created something out of tools he asked before to make the bleeding stop. He named it as REBOA. This made the nurse bewildered because she didn't understand it. A REBOA was actually a medical procedure to stop an internal bleeding. It was a short term for Resuscitative Endovascular Balloon Occlusion of the Aorta. Due to

have the same function as the procedure, Shaun named his invention after it. However, the nurse still didn't get it and Shaun still didn't try to explain it to her.

Another example of this was when Kalu shared his problem to Shaun. Shaun gave him advice based a certain event in the past.

Kalu : Uh, so I think Celez, my burn patient, has feelings for me, and ... I May have feelings for her, too. But there is a chance her feelings aren't real, and if they are real, then they may not be permanent.

Shaun : ...

Kalu : Uh, you know, it's kind of textbook transference... She's grateful and she's vulnerable.

Shaun : ...

Kalu : And all I've ever known in my life is unrequited love... From Claire and from my parents. And that makes me vulnerable too.

Shaun : ...

Kalu : (Waits for Shaun to respond).

Shaun : ...

Kalu : (Returns to his computer)

Shaun : You should **call in sick**. Lea says **calling in sick** is all you need to gain superior wisdom and knowledge. She was right.
(EP17/PLI/N321)

Shaun suggested to "call in sick" when it meant "take a trip/ vacation." He misunderstood Lea's advice back then. She was actually talking about taking a trip, but to get that Shaun should call in sick first because he didn't have holiday time yet. Therefore, Shaun used the phrase "call in sick" instead of "take a vacation." Kalu looked confused and was speechless when hearing that.

Then, Shaun talked weirdly again when he was having fun playing game with Kenny at the apartment.

Kenny : Yeah, you got 4 arms, but you're naked, so here we go.

Shaun : **I gave you pneumothorax.**
(EP16/PLI/N303)

Kenny commented the character used by Shaun at the moment he chose it. Then they were playing that fighting game. When Shaun's character punched Kenny's right on the chest and caused bleeding, he commented that he gave a pneumothorax at him. Pneumothorax was a term used for chest injury. Shaun's medical knowledge and his profession influenced him to use medical term although he was playing game with his friend who was not a doctor. Furthermore, the damage caused by Shaun's character's attack had nothing to do with that injury. Shaun probably thought the character's damaged chest looked like a pneumothorax.

b. Non-Verbal Language Problems

1. Limited Use of Gesture

Autistic people had tendency not to use any kinds of gesture when speaking. They usually just stood firmly or played with something they were interested with (for Shaun's case, it was his toy scalpel or his own finger). Therefore, when they were talking, their gesture didn't emphasize their utterances. This only happened as 15 times out of 700. This was proof that Shaun was still expressive when he was talking, although sometimes he didn't show or return any kinds of gestures that were thrown at him.

One of the examples could be found when Shaun met a security in order to find a knife. He needed it to save the kid whose body was struck down by a signpost.

Security : You can't be back here.

Shaun : Oh, I need a knife. Where do you keep the knives people forget they're traveling with?

Security : (Sarcasm) A knife? Sure. Anything else?

Shaun : I do also need a narrow six-foot tube and high-proof alcohol and gloves and baggage-handling tape, but I am going to get the alcohol from the duty free store and the tube from the back of the soda machine.

Security : I wish you all the luck with that. But I'm not gonna give you a knife.

Shaun : No, I need a knife. It-It's very... There is a medical emergency. There's a medical emergency. **(Looks at his left)** That one, right near the top, looks very sharp. (Looks at the security) Would you get it for me?

(EP1/PLI/N4)



Picture 4.1. Shaun was asking for a knife

The security didn't want to give Shaun a knife. He seemed to underestimate Shaun and couldn't believe everything that came out from his mouth due to his unexpressive face and voice. Shaun didn't give up and looked at his left. He found a knife in a white box and asked the security to give it to him. However, he didn't point at the knife, which usually people did when they asked for something. Shaun simply looked at it and then returned to stare at the bald man.

Another example could be found when Shaun met Lea for comfort. He wanted to share his problem to her at the apartment.

Shaun : (Knocks Lea's door)

Lea : (Opens the door)

Shaun : I made a mistake today. And someone got hurt.

Lea : (Hugs Shaun).

Shaun : **(Tries to hug Lea, but fails)**

(EP9/PLI/N166)



Picture. 4.2. Shaun told Lea about his mistake.

Lea hugged Shaun hesitantly once she heard that Shaun made a great mistake. Shaun tried to hug Lea. He slowly raised his hands to hug her, but his hands slowly returned back to where they were. He didn't hug her in return at the end. He even couldn't embrace her to show his gratitude or tranquility for her affection.

Moreover, besides hug, there was a kind of gesture that Shaun rarely showed, which was handshake.

Reznick : (Looks at Kalu) Are you the autistic one?
 Kalu : No (Shakes Reznick's hand).
 Shaun : That's me. Dr. Shaun Murphy.
 Reznick : Hi (Gives hand for handshake).
 Shaun : **(Doesn't return the gesture).**

(EP14/PLI/N260)



Picture. 4.3. Shaun met Reznick for the first time

Some of the doctors were gathered to be assigned in team, but before Melendez could decide who would be in which team, he introduced Reznick to others. Reznick always gave a handshake every time the others introduced themselves. When she offered her hand for a handshake, Shaun ignored the gesture. Shaun might introduce himself formally, but he didn't want to make a physical contact with her. He didn't even make a gesture of not wanting a handshake politely, but simply ignored her.

2. Clumsy/ Gauche Body Language

Compared to normal people, autistic people had difficulty at adjusting their body and doing activity due to lack of motor skills. The way they made a movement could be really awkward and clumsy. It could cause their purpose of making the move was not delivered well to the interlocutors. This weakness appeared quite often which was as 107 times out of 700. So, autistic savant still had trouble at balancing their body posture and movement.

One of the examples could be found when Shaun discussed about the cause of their patient's troubled breathing.

Shaun : The treatments are diametrically opposed. Antibiotics if it's infection, steroids if it's inflammation (**Raises both of his hands**). If she needs antibiotics and she needs steroids instead, it will suppress her immune system, causing the infection to flourish and kill her (Raises his hand again). If she needs steroids and we give her antibiotics then...

Melendez : I get it. We'd better be right.

(EP13/PLI/N253)



Picture 4.4. Shaun explained about treatments and their effects.

Shaun raised his hands clumsily. At first, he only raised one of his hands while mentioning antibiotics, as if that hand was the antibiotics. And then, he raised his other hand while addressing steroids, which had the same purpose like the other hand, but different substance. For a second later, he hesitantly put down both of his hands and continued explaining before Melendez cut him off.

This clumsy/ gauche body language could be found again in the scene where Shaun helped Lea with her things at the apartment.

Lea : Well, what about baseballs that this girl caught at a Giants game signed by Mr. Hunter Pence? He didn't hit it, but that doesn't matter.

Shaun : (Busily arranging book)
 Lea : So, where is the sporting good one?
 Shaun : There (Points at it)
 Lea : (Goes to the place)
 Shaun : **(Wags his finger)** Oh, no, that does not go in sporting goods.
 (EP12/PLI/N224)



Picture. 4.5 Shaun helped Lea packing.

Lea asked Shaun where the box that was provided for the sporting good-ones. Shaun pointed where it was, so Lea walked towards the place pointed. But before she could go, Shaun wagged his finger funnily at her, warning her that the ball didn't meet the criteria. The way Shaun wagged at her was quick and the finger wasn't moved like waving, but only tilted half way. He then snatched the ball and placed it on the box with fragile sticker stuck on its side.

Moreover, this non-verbal problem could be seen again at the event when Shaun went to a bar with Lea. Lea gave him a tequila and Shaun thought it tasted really good. So he ordered by himself for another tequila.

Lea : Yes.
 Shaun : **(Raises his hand)** Tequila, stat.
 (EP11/PLI/N212)



Picture. 4.6. Shaun ordered tequila for the second time.

When Shaun was ordering, he raised his hand holding the glass. He raised the hand quickly and then put it down on the table. Then he raised his hand again, but this time the hand wasn't raised highly. It only reached less than half of the first attempt. It looked as if he was being shy to raise the glass as high as before.

3. Limited Facial Expression

Making an expression was not a strength of people with autism. It's difficult for them to show their emotions, even a simple one. So, when they were happy, they might not look like it. This limited expression happened really often as 205 times out of 700. This was evidence that emotion and expression were not autistic-savant's strong qualities. Shaun most of the time had his face look flat. When he attempted to make an expression, it was always thin or didn't stay long.

The lack of expression could be seen when Shaun visited a market to buy an apple. He went there because Lea ate his last apple, so he needed to buy another one for his breakfast.

Robber : I said to get your wallet!
 Shaun : (Raises his hands)
 Robber : Do it now!

Shaun : ...
 Robber : Wallet now!
 Shaun : ...

(EP8/PLI/N148)



Picture. 4.7. Shaun was threatened by a robber.

At the market, Shaun encountered a robber that threatened all of them to give him money. However, Shaun didn't respond to his threat. Shaun just stood there with no expression could be seen from his face. The other people at the location already showed their horror, but Shaun didn't look terrified at all. The robber even pointed his gun at him, right to his face, yet Shaun's expression remained flat. Shaun was actually afraid, but he couldn't show it through his expression. He was shivering.

Another example was found when Shaun listens to Reznick's opinion about how important it was to buy a high-quality tux for a party held at the San Jose St. Bonaventure hospital.

Reznick : (Chuckles) It doesn't matter how new it is. It's not a tux.
 Shaun : Wearing a uniform at work reassures patients. Wearing a uniform at a party does nothing but make you hot and uncomfortable.

Reznick : This party is work. Get a tux. And not a crappy one from outlet store. Get fitted by a pro and spend a minimum of 2 grand. You're gonna meet rich people who can help your career, and they're not gonna want to help some slob in a—

Shaun : I'm not a slob. I'm very clean and make sure my clothes are never wrinkle. And it's too big. (Looks at monitor) Her heart. It's enlarged 53% since her last exam.

(EP15/PLI/N280)



Picture. 4.8. Shaun had an argument with Reznick.

Shaun interrupted Reznick once he heard the word “slob.” He didn’t like that assertion because he thought he kept his hygiene just fine. Although he disliked being compared to a real slob, his face didn’t show his dislikes. His expression looked flat though there was a slight change could be traced. The change happened because he looked around when talking, not because he tried to look angry at her.

Another one could be found again when Shaun was treating a victim at the airport. Shaun and the other doctor had been trying to make the kid breathe normally.

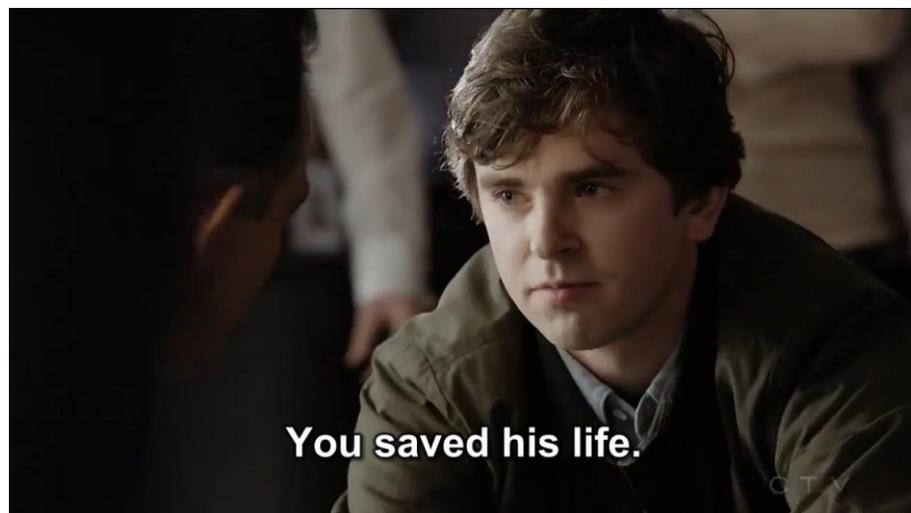
Doctor : Okay, well why the bottle?

Shaun : The air will continue to leak and accumulate until the damage can be properly repaired. The tube allows the air to get out. The water in the bottle stops the air from coming back in.

Doctor : A homemade one-way valve. (Looks at the kid beginning to breathe) He’s breathing. You saved his life.

Shaun : ...

(EP1/PLI/N6)



Picture. 4.9. Shaun saved the fallen signpost victim.

Shaun found a way to overcome the obstacle. He made a homemade one-way valve from the tools he had gathered. Once he used his invention and inserted its wire to the kid's body, the kid finally began to breathe normally. The doctor showed his relief. He praised Shaun and the people around them had happy expression on their faces. However, Shaun didn't look happy or relieved despite of saving the poor kid. Even, when Shaun was hugged by both of the kid's parents as a thanks for being his hero, Shaun didn't associate his happiness through his expression.

4. Inappropriate Facial Expression

Having difficulty at recognizing expressions caused autistic individual to make an inappropriate expressions. They might show a frustrated face when they felt happy. Moreover, the expression they made could be really weird and didn't fit with the situation or information that they were trying to convey. This only occurred

as 44 times out of 700. This proved that an autistic-savant was still able to decide or make what expression that was suitable for certain moment.

This non-verbal problem could be found at a certain scene in the film. One of them was when Glassman asked Shaun to meet a therapist with him.

Glassman : Ok-okay. Yeah, okay, sure. I'm stubborn. But I'm doing this for you, okay? So that you can have a better life, so that you can have a happier life.

Shaun : What if it doesn't make me, happy? What if it doesn't make me happy? What if it only makes you happy?

(EP10/PLI/N198)

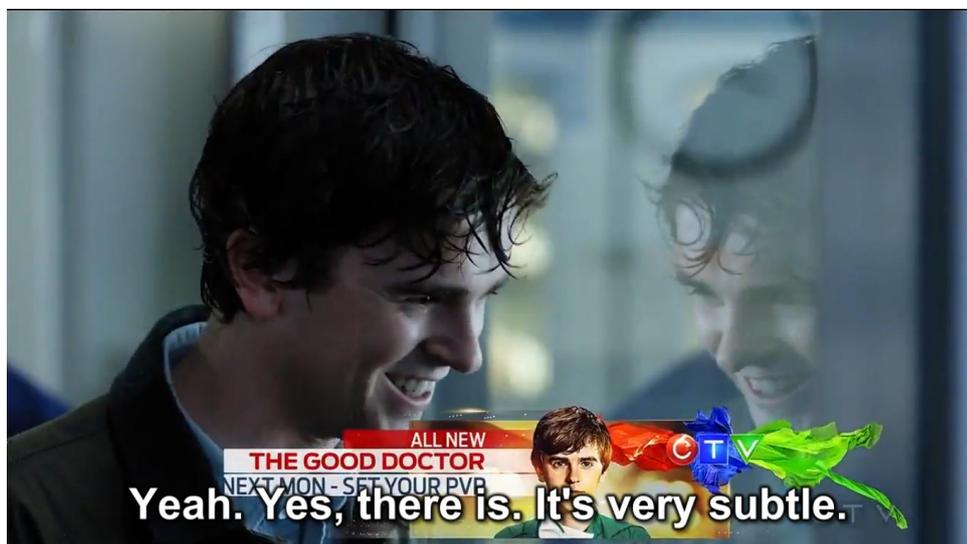


Picture. 4.10. Shaun was forced to see a therapist.

Shaun argued that meeting this therapist only made Glassman happy, not him. He hated being questioned and therapy tortured him. Although it was clear that Shaun showed his hate through his words and body movement, his expression was adjusted weirdly. He didn't frown like any other person who was frustrated. He only widened his eyes and moved his head so the chin touched the neck. The expression wasn't well adjusted, while his gesture showed his dislike. It looked abnormal and creepy at the same time.

Another example was at the time Shaun visited the operation room for the first time. He attempted to convince the other doctors that they had overlooked something important, the cause of the potential pericardial effusion

Shaun : Again... Again... Again... There! (Points the monitor)
 Kalu : Looks normal to me.
 Shaun : (Laughs) It's not normal. There's a concave deformity in the right atrium.
 Kalu : Um, no, there's not.
 Shaun : **(Laughs)** Yes. Yes, there is. It's very subtle
 (EP1/PLI/N12)



Picture. 4.11. Shaun looked at the victim's condition

Shaun kept insisting that there was an abnormality shown on the monitor, but Kalu objected him. He couldn't see anything different on it. Shaun laughed at Kalu's statement, which was inappropriate considering the serious atmosphere surrounding them. It felt as if he mocked Kalu, but he didn't. Shaun laughed because he noticed the abnormality and assumed he won. However, because Shaun wanted to convince them, this laughter ruined his convincing attempt. Shaun was troubled at adjusting his expression according to the situation.

Moreover, this problem was noticed again when Shaun had a serious conversation with his patient, Naja, whom he accused as a terrorist.

Naja : Have you seen people change their flight because of you? Have people cursed you out before you've opened your mouth?
 Shaun : I'm not prejudiced. I have evidence.
 Naja : Nobody's prejudiced. Everybody has evidence. And I'm always brown. Maybe you're not so different (Suddenly feels pain).
 Shaun : You're sweating. Perspiration is a sign of dishonesty.
 Naja : (Troubles breathing) My chest.
 Shaun : Chest pain can be brought on by anxiety.
 Naja : (Troubles breathing).
 Shaun : Oh, but this time, you are having a heart attack **(Smiles)**. EKG, stat!

(EP13/PLI/N251)



Picture 4.12. Shaun accused Naja for being dishonest.

Naja shared her problem of being judged because of her religion. Shaun listened to her, but still insisted she was a terrorist due to the symptoms that Naja experienced. In the middle of their conversation, Naja suddenly felt pain again. Shaun accused her of lying to him until he looked at a monitor and realized she got a heart attack. Shaun smiled happily when he informed her about it, which was odd considering it was a bad news and her life was on the edge. Usually, doctors or people in general, began to panic to know someone near them got a heart attack, but Shaun didn't. He looked happy. He probably smiled because the heart attack could be a proof that she was in touch with chemical weapon, which meant she

might be a terrorist just like what he thought she was. Nonetheless, his reaction was still not normal.

5. Peculiar/ Stiff Gaze

People with autism rarely made an eye-contact. They usually avoided the eye region and looked at other things, such as their surroundings, or even the interlocutor's body parts that were not eye-related. This was why they hardly got people's true message. Moreover, although they tried to look straightly at the interlocutor, it commonly looked empty and stiff. This non-verbal problem was ranked the highest as 329 out of 700. This was evidence that autistic-savant didn't gaze like people normally did. The examples of peculiar/stiff gaze could be seen below.

Shaun visited a party at San Jose St. Bonaventure hospital. He was greeted by Jessica. They talked about several things including the cost of Shaun's tux.

Jessica : Can I buy you a drink?

Shaun : I don't like tequila anymore. It makes me vomit.

(EP15/PLI/N289)



Picture. 4.13. Shaun was at a party.

When Jessica offered Shaun to buy a drink, Shaun didn't look at her. He refused her while his gaze was looking at his surroundings, looking straight at

anything where his face was facing. He didn't even blink. Because his expression was also flat, his eyes weren't affected to make any kinds of moves or twitches. He just simply stared around blankly.

Stiff gaze could be noticed again at the scene when Shaun refused to hire a housekeeper. He met Lea once the housekeeper walked towards the elevator.

Lea : Who was that? (Smiles slyly)
 Shaun : A housekeeper.
 Lea : Leaving your place at 07:00 in the morning? (Smiles slyly)
 Shaun : I was interviewing her.
 Lea : You're hiring a housekeeper for a studio apartment?
 Shaun : I'm not hiring her. Her clothes don't match.
 (EP9/PLI/N166)



Picture. 4.14. Shaun met Lea at the apartment.

Lea didn't know that the woman going to the elevator was a housekeeper, so she teased Shaun about it, but he didn't realize. Then, they were talking about that woman. Shaun looked at Lea for a short time, then his gaze wandered around. Although he looked around, sometimes his eyes came back to look at where the rejected woman went, the elevator. He most of the time looked at that place. He barely stared at Lea, no matter how cheerful and happy she was when she was talking to him.

The other scene which peculiar/stiff gaze realized was when Shaun and Browne were ordered to bring a liver transplant. Because they couldn't use the helicopter anymore, Browne asked for the availability of police car to escort them to San Jose St. Bonaventure hospital.

Browne : Shaun? Shaun, we got to go!

Shaun : (Reminiscing)

Browne : I think we'll get there much quicker if we drive, Shaun.

Shaun : ...

(EP3/PLI/N52)



Picture 4.15. Shaun looked at the light bar of a police car.

When the police car arrived, Browne hurriedly walked towards it. Shaun didn't follow her however. He was fixated at the light bar of the police car. Browne asked him to get to the car, but he ignored her. The lights in the light bar reminded him with the ones in the past, causing him to reminisce that particular event. Browne tried to get his attention by talking again, yet she was ignored once again. Shaun was too focused on the lights and his eyes couldn't get detached to it, even Browne's protest couldn't make him turn his eyes around.

3. The Reason why the Linguistic Impairments are Realized in the Way They are

After describing the pragmatic language impairment, both verbal and non-verbal, realized by the main character, the researcher investigated the reason why linguistic impairments were realized. Based on the result gotten, there were some reasons that could be concluded why these language impairments were realized the way they were.

a. Lack of Comprehension

The lack of comprehension influenced how people perceived and responded to certain information. The inability to digest information well could create misconception and lead to giving false, unnecessary, unrelated, and unclear information. For instance, the main character in *The Good Doctor* had difficulty in deciding what type of information that was necessary for the interlocutor. As a result, sometimes he became less informative or told information more than he was supposed to do. This often made his interlocutors bewildered, so they had to force themselves to make sense of his information or ask him more about it. Therefore, the lack of comprehension impacted the quality of the information that the speaker conveyed.

b. Inability to Talk Based on Context

Talking based on context affected the language used by a person. This context could be topic, location, situation, and interlocutor. People could talk formally or casually depending on the context, than could be seen from where they were talking and whom they were talking to. But, the protagonist of *The Good*

Doctor was inclined to talk without looking at the context. There was a time when he talked really formal in casual situation, like talking to his friend, or talking impolitely towards his superior. As a result, he looked as if he was being disrespectful and being too distant towards the others. Additionally, pronoun reversal happened because of not understanding the context. Sometimes, this pronoun reversal happened due to an echolalia. Because the main character only repeated what someone had said to him, the different context when he repeated this utterance might not be suitable causing the wrong pronoun to be used, so the information told was delivered inaccurately. Therefore, context influenced how people created their utterances.

c. Difficulty at Adjusting Voice and Tone

Adjusting voice and tone was necessary to emphasize the information that people attempt to explain. It could strengthen and weaken the information depending on how the speaker said it. As an example, the main character in *The Good Doctor* had his voice to be flat and unconvincing when he tried to complain about something. The interlocutor didn't get his protest because his voice didn't have the quality of protesting. As a result, the interlocutor misunderstood him and thought it as a compliment. Therefore, managing voice quality was important to show how one's feeling.

Furthermore, adjusting voice and tone falsely might lead to distorting the meaning and the form of an utterance. This ever happened when the main character wanted to give suggestion but ended up making it sound like a question and when he read a certain line in a novel without punctuation resulting to a change in the

meaning. Thus, managing voice and tone was important, so the utterance said carried the meaning and the form intended.

d. Lack of Mind Reading Skill

Mind reading was a skill related to being attentive and understanding social cues. This skill was needed because it allowed people to interpret the implied meaning of an utterance. Sometimes, people didn't really mean what they said and this could be detected through social cues, such as expression and body language. For example, the main character in *The Good Doctor* mostly failed at telling sarcasm or any kinds of figurative languages. This happened because he had difficulty at reading people's expression and gestures. He couldn't connect those social cues to the utterance spoken. Usually, positive words were considered compliment, but if the speaker had their faces look nasty when talking, then those words were assumed to bear a hidden meaning, which could be the antonym of the literal interpretation. So, this mind reading enabled people to detect implied meaning and not being able to do that caused people to interpret literally only.

e. Having Trouble at Maintaining a Conversation

Maintaining conversation was important to make interaction went well between the listener and the speaker. Conversation could be preserved by responding to someone's comment, talking when people finished their sentences, and avoiding interruption. However, some people, particularly the autistic ones, sometimes couldn't maintain a conversation. For instance, the main character in *The Good Doctor* liked to ignore his colleague's questions and didn't give any kinds of respond when people were talking to him. Moreover, he had a tendency to

interrupt people's sentence when he knew what they were going to say. Therefore, being responsive and capable of turn-taking were the key to maintain a conversation.

f. Incapability to Use Non-Verbal Language Properly

Non-verbal language could be used to emphasize the information conveyed. Making a hand movement and adjusting expression while talking could make the information to be received more effectively than when non-verbal languages were absent. However, the main character in *The Good Doctor* lacked this non-verbal skill. The hardship he had to read people's expression caused him not being capable to be expressive. He rarely showed his emotion through his expression causing the interlocutor sometimes misunderstood him. Moreover, the way he used gestures when talking looked weird and clumsy, so his information was delivered ineffectively. So, the lack of these non-verbal languages weakened the effectiveness of the information delivery.

C. Findings and Discussion

1. Findings

From the result gotten, the researcher found that the autistic-savant main character, Shaun Murphy, realized all of the pragmatic language impairment, both verbal and non-verbal language problems. The data of occurrences of verbal language problems were 573 data with 26,6% of maxim violation, 13,7% of literal interpretation, 5,8% of monologue, 1,1% of pronoun reversal, 5,6% of politeness difficulty, 5,4% of pedantic speech, 15,3% of odd prosody, 21,6% of turn-taking

violation, 2,8% of echolalia, and 2,1 % of idiosyncratic use of language. While the data of occurrences of non-verbal language problems were 700 data with 2,1% of limited use of gesture, 15,3% of clumsy/gauche body language, 29,3% of limited facial expression, 6,3% of inappropriate facial expression, and 47% of peculiar/stiff gaze.

Then, pragmatic language impairments were realized by the main character which could be seen through the utterances and behaviors. Compared to any characters that were not autistic, the information uttered by the protagonist tended to be lacking whether it was in content or language use. The reasons why the linguistic impairments were realized in that way were because the lack of comprehension, inability to talk based on context, difficulty at adjusting voice and tone, lack of mind reading skill, having trouble at maintaining a conversation, and incapability to use non-verbal language properly.

2. Discussion

Based on the data gotten, the verbal language problems that were realized often were violation of maxims, turn-taking violation, literal interpretation, and odd prosody. This result was quite the same with the research conducted by Hastarita Dewanti (2013) entitled “A Psycholinguistics Analysis of Verbal and Non-Verbal Language Problems of an Individual with Asperger’s Syndrome in the Movie *Adam*.” In her research, literal interpretation and lack of pragmatics were the verbal language problems that were realized the most. This showed that people with Autism Spectrum Disorders (ASD) were indeed have difficulty in conveying what type of information that should be conveyed and what should not be told. As a

result, their respond might not be related to the topic. Moreover, understanding information that were not intended literally was really hard for them to grasp. Both characters, either from *The Good Doctor* or *Adam*, mostly weren't aware of an indirect request, figurative language, or anything whose meaning was implied. So, the verbal language problems that commonly occurred in people with ASD were maxim of violation (lack of pragmatics in the case of the previous study) and literal interpretation, while the other problems happened occasionally, depending on the individuals themselves.

As for the non-verbal language problems, peculiar/stiff gaze and limited facial expression occurred the most, similar to the result of the research done by Hastarita Dewanti (2013) entitled "A Psycholinguistics Analysis of Verbal and Non-Verbal Language Problems of an Individual with Asperger's Syndrome in the Movie *Adam*." This showed that people with ASD were hardly use their eyes and expressions to communicate. They usually didn't look at the interlocutor's eyes and preferred to look at their surroundings, while their expressions remained flat most of the time.

Furthermore, there was oddity found on the result of non-verbal language problem. According to Colgan et al. (2006), they found autistic children observed only showed one type of gestures when interacting, while the typically developing children had various types of gestures. Moreover, the limited use of gestures that commonly happen are related to initiating joint attention, such as pointing and showing things that they were talking about (Osterling & Dawson, 1994; Osterling, Dawson & Munson, 2002). However, the main character of *The Good Doctor* was

quite expressive in using gestures. Although he was seen to like avoiding gestures involving physical contacts, such as hugging and handshaking, he used various kinds of gestures such as pointing, wagging, raising hand, waving, and nodding or shaking head while talking. The way he used body language might not be perfect and normal, but at least the use of gesture was not entirely absent. Therefore, autistic people weren't always static when they had a conversation.

In conclusion, each individual with autism had different kinds of language problems. Some might be more expressive than the others. In addition, maxim of violation and literal interpretation seemed to be the major problems of people with ASD.

CHAPTER V

CONCLUSIONS AND SUGGESTIONS

A. Conclusions

Based on the result of data analyzed, there were some conclusions that could be drawn as the followings:

1. The autistic-savant character in *The Good Doctor* realized all the pragmatic language impairments in the form of verbal language problems. There were ten of them, such as violation of maxims (26.6%), turn-taking violation (21.6%), odd prosody (15.3%), literal interpretation (13.7%), monologue (5.8%), politeness difficulty (5.6%), pedantic speech (5.4%), echolalia (2.8%), idiosyncratic use of language (2.1%), and pronoun reversal (1.1%). Moreover, he realized all the pragmatic language impairments in the form of non-verbal language problems. There were five of them, namely peculiar/stiff gaze (47%), limited facial expression (29.3%), clumsy/gauche body language (15.3%), inappropriate facial expression (6.3%), and limited use of gesture (2.1%).
2. Pragmatic language impairments were realized by the main character which could be seen through the utterances and behaviors. In maxim violation, he couldn't choose what type of information that should be informed so he tended to violate all of the maxims named quantity, quality, relation and manner. Additionally, in interpreting information, he couldn't digest figurative languages such as irony, sarcasm, and hyperbole along with idiomatic expression, jokes, puns, and indirect request. He also liked to sound what he

was thinking and feeling so it sounded like a monologue. Furthermore, he commonly talked without considering the context, such as situation, location, and interlocutor, causing him to talk pedantically in casual situation, become impolite towards others, and use the wrong pronoun. Moreover, odd prosody was realized quite often, whether it was the linguistic one, the emotional one, or the unusual one. He also was inclined to violate turn-taking by interrupting, ignoring, and talking when people were still talking. Then, echolalia wasn't realized often. That could happen immediately or even later after someone uttered the words. Idiosyncratic use of words happened a little, which could be related to certain event or thing. Lastly, the non-verbal language problems were realized due to the difficulty of using gestures, such as making handshake, returning a hug, pointing, wagging a finger, and lifting or showing something and making expressions, such as anger, happiness, horror, and upset.

3. Linguistic impairment occurred because of several reasons, namely lack of comprehension, inability to talk based on context, difficulty at adjusting voice and tone, lack of mind reading skill, having trouble at maintaining a conversation, and incapability to use non-verbal language properly.

B. Suggestions

1. For students of English department

This research could be used for references regarding language impairment, specifically in the part of pragmatics. Language problems could happen to everyone with or without autism, so understanding the features of the language problem could

help to treat it. However, language impairment was not always in pragmatic field. It could be in syntactic field and so on, which led to different type of language problems. So, for the English students, it was suggested to understand kinds of language problem in each field to get a better insight pertaining to language disorders.

2. For the readers of the study

This research hopefully could give knowledge for the readers about the language problems experienced by an autistic-savant or people with Autism Spectrum Disorders (ASD). By knowing language problems, the readers were expected to be more understanding towards people with autism for not judging them because of their weaknesses. And also, understanding the features of each type of the problem might help the readers to assist them in learning language better.

3. For other researchers

This research hopefully could be helpful to other researchers conducting similar research. However, this research only analyzed the pragmatic language impairment in Autism Spectrum Disorders (ASD). For those who were going to conduct a research about language impairments in autism, it was suggested to focus on another field aside from pragmatics. It was because the language problems in autism could be discussed from another field. It was expected that the other researchers could conduct a different and further study focusing on the language of autism, so that the knowledge regarding it could be wider. So there were many references for people to conduct this kind of research.

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APPENDIX 1: DATA SHEET

Pragmatic Language Impairment Portrayed by Autistic-Savant Person in
The Good Doctor Film

- | | |
|-------------------------------------|---------------------------------------|
| VM : Violation of Maxims | LUG : Limited Use of Gesture |
| LI : Literal Interpretation | C/GBL : Clumsy/ Gauche Body Language |
| M : Monologue | LFE : Limited Facial Expression |
| PR : Pronoun Reversal | IFE : Inappropriate Facial Expression |
| PD : Politeness Difficulty | P/SG : Peculiar Stiff Gaze |
| PS : Pedantic Speech | EP1 : Episode |
| OP : Odd Prosody | PLI : Pragmatic Language Impairment |
| TTV : Turn-Taking Violation | N1 : Number of Datum |
| E : Echolalia | MQ : Maxim of Quantity |
| IUL : Idiosyncratic Use of Language | MQL : Maxim of Quality |
| MR : Maxim of Relevance | MM : Maxim of Manner |
| FL : Figurative Language | J : Joke |
| I : Idiom | IR : Indirect Request |
| IG : Ignoring | IT : Interrupting |
| TT : Talking in People's Turn | |

Code	Utterances	Language Verbal Problems										Non-Verbal Language Problems					Explanation
		V M	L I	M	P R	P D	P S	O P	T T V	E	I U L	L U G	C/ G B L	L F E	I F E	P/ S G	
EP1/ PLI/ N1	[At the Airport] Shaun: <i>You're killing him</i> (Smiled). Doctor: I'm saving his life. He was bleeding out Shaun: You have it in the wrong place (Smiled).	MM						√							√	√	Shaun vaguely said that the doctor trying to stop the victim's bleeding was 'killing' him. This gave misunderstanding until Shaun

	<p>Doctor: I think I remember enough of anatomy 101 to know where the jugular vein is.</p> <p>Shaun: You would be in the right place if he were an adult. He's not an adult. He is a boy, which means you're also putting pressure on his trachea, which means he's not currently breathing. You have to put the pressure higher up (Smiled).</p>															<p>responded to the doctor's anger to elaborate what he really meant by 'killing,' Moreover, Shaun's voice was really flat which didn't show any kinds of panic.</p> <p>[Shaun was stiffly staring at the victim while smiling thinly, which was inappropriate remembering the situation.]</p>
EP1/ PLI/ N2	<p>[At the Airport]</p> <p>Doctor: Who are you?</p> <p>Shaun: Hello. I'm <i>doctor Shaun Murphy. I'm a surgical resident at San Jose St. Bonaventure Hospital.</i></p>	MQ				√						√		√	<p>Shaun introduced himself formally by stating his full name along with his title as a surgical resident in an informal situation. He gave more information like what hospital he worked for.</p> <p>[At first Shaun stiffly looked at the doctor and averted his eyes to focus at the victim and his expression was flat.]</p>	
EP1/ PLI/ N3	<p>[At the Airport]</p> <p>Shaun: <i>The vein in the boy's left arm are popping.</i></p> <p>The kid's Mother: Is that bad?</p> <p>Doctor:I-I don't see</p> <p>Shaun: (Looked at the mother) <i>Intrathoracic pressure.</i></p> <p>Doctor: No, his chest is rising. He's breathing.</p> <p>Shaun: No, the... The chest is moving paradoxically. The left lung is in distress. (Visioning) <i>Yes.</i></p>	MM		√	√							√		√	<p>Shaun stated what he was thinking without people asking and responded to what his vision told him about the victim's condition. Furthermore, he gave unclear answer for the mother regarding whether her son was in bad condition or not by saying "intrathoracic pressure".</p> <p>[He stiffly stared at the victim while thinking and his expression was flat.]</p>	
EP1/ PLI/ N4	<p>[At the Airport]</p> <p>Security: You can't be back here.</p> <p>Shaun: Oh, I need a knife. Where do you keep the knives people forget they're traveling with?</p> <p>Security: (Sarcasm) A knife? Sure. Anything else?</p>	MQ	FL			√	√				√	√		√	<p>Shaun didn't realize that the security threw sarcasm at him about giving him a knife. He stated what things he needed to the security with detail description and unnecessary</p>	

	<p>Shaun: I do also need a narrow six-foot tube and high-proof alcohol and gloves and baggage-handling tape, but I am going to get the alcohol from the duty free store and the tube from the back of a soda machine.</p> <p>Security: I wish you all the luck with that. But I'm not gonna give you a knife.</p> <p>Shaun: No, I need a knife. It-It's very... <i>There is a medical emergency. There's a medical emergency.</i> (Looked at his left) That one. That one, right near the top, looks very sharp. (Looked at the Security) Would you get it for me?</p>															information such as where he would get the alcohol and tube. Knowing the security wouldn't let him had the knife, he told him there was a medical emergency, which was voiced in a weird way. [Shaun was weirdly gazing at the security's badge and didn't point at a knife that he wanted. Shaun's lack of expression couldn't convince him.]	
EP1/ PLI/ N5	<p>[At the Airport]</p> <p>Shaun: <i>The incision should take place two ribs down.</i></p>			√									√		√	Shaun stated what he was going to do for himself after thinking. [Shaun looked at no one while thinking and his expression was emotionless.]	
EP1/ PLI/ N6	<p>[At the Airport]</p> <p>Doctor: Okay, well why the bottle?</p> <p>Shaun: <i>The air will continue to leak and accumulate until the damage can be properly repaired. The tube allows the air to get out. The water in the bottle stops the air from coming back in.</i></p> <p>Doctor: A homemade one-way valve. (Looked at the kid beginning to breathe) He's breathing. You saved his life.</p> <p>Shaun:....</p>			√				√					√		√	Shaun flatly and monotonously explained why he chose to use the bottle. The way he explained it didn't look as if he was talking to the doctor, but a one way conversation. [Shaun kept staring at anything except at anyone's eyes and didn't show happiness when the doctor complimented him for saving the victim.]	
EP1/ PLI/ N7	<p>[In an Ambulance]</p> <p>Shaun: <i>It changed. The boy's ECG changed.</i></p> <p>Police: It's the same. 86 BPM.</p> <p>Shaun: No. It's used to be higher.</p> <p>Police: No, it used to be 86. It's still 86.</p> <p>Shaun: <i>It used to come up to here. Lower amplitude means lower voltage. Lower amplitude means lower voltage.</i></p>	MM						√					√	√		√	Shaun didn't show any surprises when seeing the change through stress and intonation. It fell flat. In addition, his explanation couldn't be understood by the victim's parents at all because it's vague regarding the lower amplitude.

	Shaun: Oh, good. His name is Adam. Traumatic pneumothorax. I'm hungry (Smiled).																[Shaun smiled to know he saved a life, but his eyes were stiff.]
EP1/ PLI/ N13	[At the Cafeteria] Browne: Hey, you're new to town, right? Shaun: Yes. Browne: Well, I'm sure you have a lot of questions. Shaun: <i>No.</i> Browne: Uh... You got to be curious about the place, about the people. Shaun: Dr. Glassman gave me a map of the hospital and I got a map of San Jose online. Browne: Okay. Great. Shaun: I do have one question. Browne: Yeah? Shaun: <i>Why are you rude to me when we first met, then nicer to me the second time we met, and now you want to be my friend? Which time was it that you were pretending?</i>	LI			√								√		√	The question that Browne said was not actually question, but she assumed that Shaun might be curious about San Jose because this was his first time there, but Shaun took it literally. Moreover, Shaun asked something that hurt Browne's feeling about her pretending, which was actually not true. [Shaun focused on a thing, but Browne while talking. Sometimes he looked around stiffly. There was a time when he smiled, but most of the time his expression was restricted.]	
EP1/ PLI/ N14	[At San Jose St. Bonaventure Hospital] Aoki: Dr. Murphy. I'd like you to tell us why you want to become a surgeon. Shaun: ... <i>The day that the rain smelled like ice cream, my bunny when to heaven in front of my eyes. The day that the copper pipes in the old building smelled like burnt food, my brother... went to heaven in front of my eyes. I couldn't save them. It's sad. Neither one had the chance to become an adult. They should have become adults. They should have had children of their own and loved those children and I want to make that possible for other people. I want to make a lot of money so that I can have a television.</i>	MQ											√		√	Shaun gave more information than he was asked to, like telling about his rabbit and brother and how his surroundings smelled when they were dead. [Shaun stiffly looked around and his face didn't show any kinds of emotions. Although his eyes looked somewhat glistening, however there was no change in expression.]	
EP1/ PLI/ N15	[At San Jose St. Bonaventure Hospital] Aoki: We're proud to have you (Offered her hand to hand shake)												√		√	[Shaun shook Aoki's hand awkwardly, while his eyes looked around.]	

	Shaun: <i>(Shook her hand).</i>																
EP1/ PLI/ N16	[In the Operation Room] Shaun: I saw a lot of surgeons in medical school. You're much better than them. I have a lot to learn from you. Melendez: (Surprised) Shaun: <i>You're very arrogant.</i> Do you think that helps you be a good surgeon? Does it hurt you as a person? Is it worth it?				√										√		Shaun disrespected his superior for saying he was arrogant, although he was still a surgical resident with his first assist in operation. [Shaun stared stiffly at Melendez, but not really into the eyes.]
EP2/ PLI/ N17	[In the Elevator] Man: Where to? Shaun: <i>San Jose St. Bonaventure Hospital. I'm a surgical resident. Today is my first full day.</i> Man: I meant floor. Shaun: Oh, ground floor. <i>I'm taking the bus.</i>	MQ MQ	LI												√		Shaun didn't look at the man who leaned forward to the lift button, so Shaun thought that he was asked where he was going for work, not which floor he wanted to go. Although he answered it literally, the information he gave was more than enough. Moreover, when he stated what ground he wanted to go, he gave additional information about how he would get to the hospital. [Shaun happily answered the questions, but his gaze was anywhere but the man.]
EP2/ PLI/ N18	[In the Patient's Room] Brand: Am I ever gonna walk again? Melendez: (Smiled) Shaun: (Entered the room) <i>Yes. Of course. This is Mitchell Brand. I reviewed his chart. He's 55 years old from Chiago, divorced with two children. You did a radical prostatectomy on him yesterday. There are many possible complications but none related to motor neurons. There is no chance you won't be able to walk.</i> Browne: He... He wasn't worried about his legs.	MQ	LI	√					IT			√		√		Shaun answered a question that was given for Melendez and gave more information than enough. He misinterpreted the question asked, which was actually about the operation effect for his lower body, not about the possibility of not walking again. In this situation, Shaun was being verbose, explaining about the patient's personal data along what the others doctors had been done to the man.	

EP2/ PLI/ N30	[Outside Someone's House] Shaun: <i>Hi. My brother said there's a kid named Kenny, and he's sick and there might... You should give us money.</i> Man: (Closed the door angrily)	MQL				√		√						√		√	Shaun talked so fast without any intonation. He tried to lie and the words chosen made it impolite. It was as if he forced the unknown man to give him money. [Shaun didn't show anxiety when he was talking to the man and his gaze was not looking at him.]	
EP2/ PLI/ N31	[At the Operation Room] Melendez: The tumor's entirely encased the large abdominal arteries. Shaun: That's very bad. If it's in the artery walls, it's going to be impossible to cut out without killing her. You should get a biopsy to determine where the margins are. Melendez: Thank you. Shaun: <i>You're welcome.</i> Melendez: I was being sarcastic... Again		FL											√		√	Shaun didn't get Melendez's sarcasm about his gratitude for explaining things he already knew. [Although Shaun knew the patient's condition was bad, his expression was still emotionless. He looked at Melendez stiffly while talking.]	
EP2/ PLI/ N32	[At San Jose St. Bonaventure Hospital] Shaun: <i>I'm Dr. Shaun Murphy.</i> I'm a surgical resident. Dr. Melendez sent you a biopsy. When will the results be ready? Lab. Woman: When I get to it.						√							√	√		√	Shaun formally introduced himself to the lab girl. Usually, outside of operation, the doctors talked casually. [Shaun clumsily spun his I.D to show it to her while gazing at her stiffly and flatly.]
EP2/ PLI/ N33	[At San Jose St. Bonaventure Hospital] Lab. Girl: That is not the way it works. Now go wait your turn. Shaun: (Thumbed up) Shaun: (Thinking) Shaun: <i>If you don't do Dr. Melendez's test right now, I will throw a rock through your window.</i>		LI			√								√	√		√	The threat about throwing a rock at a window referred to the past event when Steve told Shaun that if he wanted to get anything he wanted, he should do one thing, to not be afraid. After that, Steve threw a rock at someone's window. This made Shaun assumed that throwing a rock was a sign of being fearless.

																		Moreover, threatening someone was impolite. [Shaun weirdly thumbed up at the girl and his expression and stiff gaze didn't support his threat.]
EP2/ PLI/ N34	[At San Jose St. Bonaventure Hospital] Browne: You're suggesting we cut out a perfectly healthy organ just to get a better view? Shaun: <i>Yes (Smiled).</i>													√	√			[Shaun smiled at his idea of cutting a healthy kidney while the others thought it was crazy. He simply stared at Browne.]
EP2/ PLI/ N35	[At San Jose St. Bonaventure Hospital] Shaun: I specifically never said that. I made sure not to say that. Patient: No. Oh what... What the hell does that mean? Glassman: What does that mean, Shaun? Patient: Am I healthy? Shaun: <i>Probably.</i> Patient: You're a doctor. You're... You're supposed to know. Shaun: <i>No, we're not. Nobody knows anything for sure. Anybody could drop dead of a heart attack at any time.</i>	MM				√								√		√	Shaun gave vague answer regarding the patient's health and created an implication that he would get a heart attack, which was not. The man was furious because of the ambiguity and his harsh words. [Shaun was not straightly look at the patient and his expression didn't show anything.]	
EP2/ PLI/ N36	[At San Jose St. Bonaventure Hospital] Glassman: Shaun, people need reassurance. Shaun: I told him he was safe to go home. I was very clear. Glassman: W-with your words... Your actions said something completely different. Shaun: <i>No, they didn't. My actions were completely silent.</i> Glassman: When you reassure someone, they have to receive it. You have to gauge whether they actually are reassured. You understand? Shaun: <i>When did you review Trevor's chart?</i>	MR	LI											√		√	The action that Glassman referred was the way Shaun spoke, however Shaun thinks it was activity involving body, which something he didn't do when talking to the patient (silent action). Moreover, Shaun didn't give relevant respond to Glassman's question. [Shaun looked at Glassman with flat expression. His face showed no guilty or anything.]	
EP2/ PLI/	[At San Jose St. Bonaventure Hospital]		FL											√		√		Shaun asked the lab girl for patient check after Glassman said he got

N37	<p>Shaun: I want D-dimer, lactate, and amylase for a 10 year old girl, Martine LaDuff. <i>She might have a tummy ache caused by stress or she might not.</i></p>															<p>stomach issue caused by brain (stress) every day. Back then, Glassman said it while looking at Shaun, who often made trouble for him. Glassman implied that Shaun was the source of his stress because Shaun's problems were also his responsibility. Due to how often Shaun caused problem, Glassman exaggerated that he was stressed every day. Shaun took it seriously anyway. [Shaun looked at his surrounding with flat expression.]</p>
EP2/ PLI/ N38	<p>[At San Jose St. Bonaventure Hospital] Lab. Girl: Everything is within normal range. Shaun: <i>Hmm... Slightly elevated lactate and amylase, and she's very small. Normal should be lower. Normal should be lower.</i> Lab. Girl: What do you think she has? Shaun: <i>Thank you.</i></p>	MR		√									√		√	<p>Shaun voices what he thought about the test and ignored the girl's question with irrelevant respond of gratitude. [Shaun's eyes focused on the paper and his expression was flat although Martine may be in danger.]</p>
EP2/ PLI/ N39	<p>[At Martine's House] Martine's Dad: Call us in the morning— Shaun: <i>Okay, she may not be alive in the morning.</i> Martine's Dad: Does your boss know you're here? Shaun: <i>No, I think he'd be upset with me for being here.</i></p>	MQ							IT				√		√	<p>Shaun cut the man's line and gave information more than he's supposed to say. [Shaun stiffly looked at the man. While his eyes were glistening, his expression remained restricted.]</p>
EP2/ PLI/ N40	<p>[At Martine's House] Martine's Mom: How hard is it to get rid of someone. Martine's Dad: I told him— Shaun: You're right, I'm weird. Part of my weirdness is that I perseverate. That means I keep thinking about things. So I will keep knocking your door until I know Martine is okay.</p>								IT						√	<p>Shaun once again cut Martine's father line and interrupted the spouse's bickering. [Shaun looked at them weirdly and he showed sadness and frustration through expression.]</p>

EP2/ PLI/ N41	[At Martine's Parents' Car] Shaun: (Checked Martine's pulse) <i>Her pulse is too weak to perfuse her organs.</i>			√										√	√	Shaun voiced how Martine's condition after checking her pulse. [Shaun looked at Martine seriously. His expression looked weird. He tried to look panic but the expression he could manage was widening eyes.]
EP3/ PLI/ N42	[At the Apartment] Lea: So, I'm in the middle of "Uncharted" and I'm dead. Can I borrow some triple A's? I'm your neighbor. Shaun: <i>Hello.</i> Lea: 34? Shaun: <i>I moved in last week. 33.</i> Lea: Yeah, I know. Shaun: <i>I work at a hospital.</i> Lea: That's cool. Shaun: Yes. Lea: Triple A's, <i>por favor?</i> Shaun: <i>Batteries.</i>	MR					√						√		√	Shaun ignored Lea's question by introducing himself as a neighbor. When Lea tried to remind him about triple A's, Shaun clarified if she meant batteries, however it sounded like a statement than a question. [Shaun's body posture couldn't be steady and he kept fiddling with his fingers. His eyes looked at something near Lea's presence. He smiled a little while talking to her, especially when he told her where he worked.]
EP3/ PLI/ N43	[At the Apartment] Lea: Thank you. Piece of advice... Don't feed the cat. Shaun: <i>What cat?</i>		LI										√		√	Shaun only got that he was asked not to feed a cat, but he didn't get that the cat Lea referred to was the one outside his apartment room. Here, Shaun couldn't connect the context and Lea's suggestion although he knew its existence. [Shaun looked at anything but Lea and he didn't smile when Lea said her gratitude.]
EP3/ PLI/ N44	[At the Roof of San Jose St. Bonaventure Hospital] Browne: How you doing? I know these sounds and everything might be a lot for you. It's... It's hard for anyone. Shaun: <i>I like helicopters.</i>	MM											√		√	Shaun gave unclear respond about whether he was bothered by the helicopter's sound or not. Liking something didn't mean he didn't find it disturbing.

	Browne: I, uh, didn't know you'd been on a helicopter. Shaun: I haven't. <i>(Covered his ears)</i>																[Shaun focused on the helicopter and covered his ears hesitantly while walking towards it.]
EP3/ PLI/ N45	[In the Helicopter] Browne: Do you know what this is, right? Well, I'll tell you what it is. It's scout work. Shaun: <i>(Looked at the rotors).</i> Browne: Jared gets the golden ticket and we got... Pizza delivery. Shaun: <i>(Looked at the rotors).</i> Browne: The rotors just go round and round, Shaun. They don't change. Shaun: <i>(Looked at the rotors).</i> Browne: How do I talk to you?							IG IG IG			√		√		√		Shaun kept ignoring Browne. His mind focused on the helicopter's rotors only. He didn't even do any gesture to tell her that he was listening to her. [Shaun was fixated at the rotors. He didn't show any amazement, curiosity or anything while staring at them.]
EP3/ PLI/ N46	[At Another Hospital] Browne: We just lost 3 hours. Man: Technically 3 hours and 5 minutes. True clock is on the cooler. Shaun: <i>Can't go below 39 degrees or above 47 degrees.</i>			√									√		√		Shaun robotically said how to maintain the liver's durability when looking at the liver box. [Shaun stiffly and flatly looked at the box.]
EP3/ PLI/ N47	[At Another Hospital] Man: What are you doing? Shaun: <i>(Gazing at the liver).</i> Browne: What are you looking for? Shaun: <i>(Gazing at the liver).</i>							IG IG				√	√		√		Shaun ignored Browne's and the Man's curiosity pertaining his behavior. [Shaun focused on the liver. He clumsily lifted the plastic and touched it. His expression stayed the same.]
EP3/ PLI/ N48	[At Another Hospital] Browne: There is nothing there. Shaun: I know. <i>There is nothing there.</i>								√				√		√		Shaun echoed Browne's statement after she showed him the scan. [Shaun stiffly and flatly gazed at the scan then returned to look at the liver.]
EP3/ PLI/ N49	[At the Roof of Another Hospital] Browne: You know, Chuck was my first patient. 6 months ago, first day at St. Bonaventure, I get a liver	MR MM MM													√	√	Browne shared how she felt about her patient and Shaun responded it with something irrelevant. Shaun

	<p>failure. And the nicest guy in the world. I wanted to be the one to give him the good news.</p> <p>Shaun: <i>We're not leaving.</i></p> <p>Browne: (Confused) You said you liked helicopters.</p> <p>Shaun: <i>We are not leaving.</i></p> <p>Browne: We... We made it here safe.</p> <p>Shaun: <i>Yes, we are not leaving.</i></p>																<p>kept repeating about them not leaving the hospital, but didn't elaborate why to the confused Browne. They were not leaving because the weather was worsen and it would be dangerous to go by helicopter.</p> <p>[Shaun looked around and smiled. It was inappropriate expression because he knows it was a bad news.]</p>
EP3/ PLI/ N50	<p>[Outside Another Hospital]</p> <p>Browne: (On the phone) The itinerary and the life clock have changed. Yeah, uh... 4 hours and 14 minutes.</p> <p>Shaun: <i>(Waving his hand to get Browne's attention)</i> Excuse me! Are you talking to the hospital?</p>											√	√		√		<p>[Shaun weirdly waved his hand to get Browne's attention who was on the phone. He didn't look at Brown and his face was restricted.]</p>
EP3/ PLI/ N51	<p>[Outside Another Hospital]</p> <p>Browne: So, how do you know about the weather?</p> <p>Shaun: ...</p> <p>Browne: Is it some kind of gift?</p> <p>Shaun: ...</p> <p>Browne: (Laughed) Come on, I got to know. What. Shaun Murphy is Zeus?</p> <p>Shaun: <i>I watch The Weather Channel.</i></p>								IG	IG			√		√		<p>Shaun ignored Browne's curiosity most of the time. He answered when she insisted to know.</p> <p>[Shaun looked around and didn't smile towards Browne's joke about him being Zeus.]</p>
EP3/ PLI/ N52	<p>[Outside Another Hospital]</p> <p>Browne: Shaun? Shaun, we got to go!</p> <p>Shaun: <i>(Reminiscing).</i></p> <p>Browne: I think we'll get there much quicker if we drive, Shaun.</p> <p>Shaun: ...</p>											√		√		√	<p>Shaun didn't give any responds when Browne asked him to get to the police car.</p> <p>[Shaun looked at the light bar intensely while his face was flat.]</p>
EP3/ PLI/ N53	<p>[In a Police Car]</p> <p>Police: You're home. You dad and mom have had a tough night with your brother and all. Come on. Let's go.</p>												√			√	<p>Shaun tried to scream but his voice sounded strangled and low to be considered a cry.</p> <p>[Shaun sadly looked at the car's window and kept on banging on it.]</p>

	Shaun: <i>No! No! (Hitting his hands on the car window)</i> <i>He... He promised me! He promised! He promised me!</i> <i>He promised me! He promised me!</i>																
EP3/ PLI/ N54	[Outside Another Hospital] Shaun: <i>What's the patient's name?</i> Browne: I told you. It's Chuck. Shaun: No. Browne: No? Shaun: No. The... The donor? What's his name? Browne: What? The liver? I... "Oliver"? Shaun: <i>Oliver?</i>	MQ	FL							√				√		√	Shaun was being unclear of what patient he referred to. Browne was actually making the name up, a pun, but Shaun took it seriously. He repeated the name when Browne told him. [Shaun didn't directly look at Browne and no expression was shown.]
EP3/ PLI/ N55	[In a Police Car] Browne: What are you looking for? Shaun: <i>(Looked at the liver scan).</i> Browne: What do you see? Shaun: <i>I have a girl neighbor.</i> Browne: (Confused) Okay. Is she nice? Shaun: <i>(Looked at the liver scan).</i> Browne: What does she do? Does she... Have a boyfriend? Shaun: <i>(Looked at the liver scan).</i> Browne: Do you know her name? Shaun: <i>(Clumsily moving the scan).</i> Browne: What the hell are you looking for on the scans? Shaun: ...	MR							IG IG IG IG				√	√		√	Browne was being ignored by Shaun over and over and once she got an answer it was irrelevant to the topic. [Shaun stared at the scan intensely. He clumsily shifted from his position to get a better view. His face stayed the same.]
EP3/ PLI/ N56	[In a Market] Browne: The temperature's already at 47 degrees. We can't let it go any higher. Shaun: (Looked at a Drink Machine). Browne: (Looked at Shaun) Are you gonna help me? Shaun: ... <i>That won't work.</i> Browne: How do you know? Shaun: ...	MR							IG IG IG				√		√	Shaun's ignorance towards her left Brown in frustration. The only time he showed respond was once and it was even vague and somewhat unrelated to the question. [Shaun looked around and didn't show any panic like Browne does.]	

	<p>Browne: Shaun? (Looked at the freezer) You are right. It's not working! Why?</p> <p>Shaun: ...</p> <p>Browne: Shaun!</p> <p>Shaun: ...</p> <p>Browne: Are you even listening to me?!</p>															
EP3/ PLI/ N57	<p>[In a Market]</p> <p>Browne: Why did you answer me the last time, but not before?</p> <p>Shaun: ...</p> <p>Browne: Was it because I was angry?</p> <p>Shaun: ...</p> <p>Browne: Was it random?</p> <p>Shaun: ... (Stopped the water)</p> <p>Browne: Why can't you answer my questions?</p> <p>Shaun: ...</p>							IG IG IG IG				√	√		√	Shaun ignored all of Browne's questions and only focused on watering the liver box. [Shaun stiffly looked at the water flowing and clumsily pulled it after he finished. No expression appeared.]
EP3/ PLI/ N58	<p>[In a Police Car]</p> <p>Browne: What are you doing?</p> <p>Shaun: <i>(Checking the liver)</i></p> <p>Browne: Shaun?</p> <p>Shaun: <i>(Checking the liver)</i></p> <p>Browne: What are you thinking?</p> <p>Shaun: <i>(Checking the liver)</i></p> <p>Browne: Okay, this isn't a question. I just,, I don't know what you're looking for, Shaun.</p> <p>Shaun: <i>Yes, I can feel it. It's firmer.</i></p>	MM		√				IG IG IG					√		√	Shaun didn't give clear respond about what he thought of and what he did with the liver. His answer to Browne's curiosity was stated in monologue, it sounded he talked to himself. He was too focused on the liver so he mostly ignored Browne. [Shaun stared at the liver and began to press it to know its condition. Although he realized it was something bad, yet his expression was flat.]
EP3/ PLI/ N59	<p>[On a Street]</p> <p>Shaun: <i>Less intrusive cut would be along the falciform ligament to all access to segment III.</i></p>			√										√	√	Shaun said to himself what he needed to do when cutting the liver. [Shaun looked at the liver and smiled thinly at it, which was odd because it was in an urgent condition.]

EP3/ PLI/ N60	[On a Street] Shaun: UW solution will stabilize the cell walls.			√											√	Shaun suddenly told the use of UW solution, which no one asked for. [Shaun looked around him with normal expression.]
EP3/ PLI/ N61	[Outside Jose St. Bonaventure Hospital] Man: Thank you. This is amazing. Got to go. The whole team is waiting. Shaun: <i>His name is Oliver.</i>	MM	FL												√	The man ran to the ambulance and Shaun suddenly told him about the donor's name, which was actually a pun made by Browne. The man didn't know about this Oliver thing, so Shaun's comment confused him because he didn't know who Shaun referred to. [Shaun stiffly looked at the man.]
EP3/ PLI/ N62	[Outside San Jose St. Bonaventure Hospital] Shaun: It was a good day. We saved a life. Just not Chuck's (<i>Moving his hand to Browne, but does nothing</i>).											√	√		√	[Shaun looked at the leaving car. He didn't show any emotions and awkwardly raised his hand toward Browne for nothing.]
EP3/ PLI/ N63	[At the Apartment] Shaun: <i>May I have my batteries back?</i> Lea: (Shocked) Shaun: <i>The ones you borrowed.</i>		IR									√	√		√	Lea didn't mean to borrow the batteries, but asked to have it, but Shaun didn't get this hidden request. [Shaun couldn't stand steadily and as usual he stared stiffly and flatly.]
EP3/ PLI/ N64	[At the Apartment] Shaun: What's your name? Lea: I'm Lea. Shaun: I'm <i>Dr. Shaun Murphy</i> . Nice to meet you.						√							√	√	Shaun formally introduced himself in a casual situation. [Shaun didn't directly look at Lea and his face didn't show happiness.]
EP4/ PLI/ N65	[At the Apartment] Glassman: Why is the furniture in the middle of the room? Shaun: <i>I Know I packed it. I made a list. "Star-tip screwdriver." Look, it's checked. It's checked (Pointed at the list).</i> Glassman: Maybe you... You threw it out with the newspaper you used to pack the dishes?	MR MR					√						√	√	√	Shaun didn't explain about the reason behind the furniture, but told about his list regarding the screwdriver that he described explicitly. In addition, he didn't respond well about the possibility of him throwing it.

	Shaun: <i>I packed with bubble wrap. It's safer and you can see through it.</i>																[Shaun clumsily pointed at the paper and his face didn't show panic. He looked around while talking.]
EP4/ PLI/ N66	[In a Patient's Room] Patient's Husband: Barb. Patient: It's true. Patient's Husband: No, it's not. You're the strongest woman I've ever met. We'll get through this. We will. And... And then we'll try again. Shaun: <i>We could manage clotting risk pre-operatively with an infusion of unfractionated heparin (Smiled).</i>						√	IT						√	√		Shaun mechanically said an alternative option when the spouse was having an argument. [Shaun looked around while talking. He at a second smiled widely at his idea, but then reverted back. Although there was hope, his expression didn't suit the serious and sad atmosphere.]
EP4/ PLI/ N67	[At San Jose St. Bonaventure Hospital] Melendez: Never contradict me in front of my patient again. Shaun: I didn't. I agree with your assessment of the risks. I suggested a way we would mitigate them. Melendez: Not in front of my patient. Shaun: <i>We're not in front of the patient now.</i>		LI										√		√		Melendez warned Shaun about contradicting him in front of a patient ever again, but Shaun thought it was only for this certain patient. This warning applied to any patients. [Shaun looked around without any guilt on his face.]
EP4/ PLI/ N68	[At San Jose St. Bonaventure Hospital] Shaun: <i>Extreme pain that's out of proportion to the visible injury could mean you have necrotizing flesh-eating bacteria.</i> Patient: WHAT!? Shaun: <i>(Smiled)</i>		FL										√		√	√	Before this scene, Shaun's patient commented about how painful her lower body was, as if there was a bowling ball in her tampon. The way she said it was lazy. Then, Shaun responded to the patient's hyperbole about the pain seriously. [Shaun couldn't steadily stand and he stiffly looked around. His smile on his idea didn't suit the implied bad news.]
EP4/ PLI/ N69	[At San Jose St. Bonaventure Hospital] Shaun: <i>The inflamed Bartholin gland is causing the ischiocavernosus muscle to spasm and pinch the labial nerve.</i>			√											√	√	Shaun voiced his idea gotten from his vision.

	so hard to motivate after work. Half the time I end up not— Shaun: <i>You stink.</i>																[Shaun looked at Lea after staring at the road stiffly and he didn't look disgusted or anything.]
EP4/ PLI/ N75	[At the Apartment] Armen: What the hell is your problem? Shaun: Sorry. Hello. My name is <i>Shaun Murphy</i> . It's very nice to meet you. Armen: No, It's not nice to meet me at 12:40 a.m. Shaun: Yes. <i>Dr. Glassman said I can call you any time I need something fixed.</i> Armen: Who the hell is Dr. Glassman? Shaun: He's the president at San Jose St. Bonaventure Hospital. <i>I'm a surgical resident there.</i>	MQ	FL				√						√	√		√	Shaun formally introduced himself to Armen. He went to him at past midnight because Glassman told him that Armen could be called at any time, which was a hyperbole. He also gave more information about him being a surgical resident. [Shaun clumsily gave the list at Armen. While his gaze was fixated on him, his expression didn't show any guilt or regret for awaking him.]
EP4/ PLI/ N76	[At the Cafeteria] Glassman: In Casper, Wyoming. Everybody looked out for you in Casper. Everybody looks for everybody in Casper. This is San Jose. It's a big city. And residency is a whole lot more demanding than medical— Shaun: <i>I don't need an aide.</i> Glassman: We're just talking, Shaun— Shaun: <i>I don't need an aide!</i>							√	IT IT					√		√	Shaun cut Glassman's reasoning. He tried to be strong, but the voice he managed didn't sound so. It was somewhat sing song at the end of the line. [Shaun didn't show his frustration and his eyes were mostly on Glassman, but sometimes wandered around.]
EP4/ PLI/ N77	[In the Operation Room] Andrews: How could a guy who can't even shake a coworker's hand be comforted doing a pelvic exam? Shaun: <i>People squeezed too hard. It hurts.</i> Andrews: Send this to the lab for culture. So, I'm guessing you're not that into hugs. Shaun: I don't like to be <i>squeezed</i> .	MM									√			√		√	Shaun didn't give clear answer for Andrew's question although it was implied that he didn't like handshake because the way people did it hurt him. He also weirdly called hug as squeeze. People normally said hug. [Shaun looked around and his face was limited.]
EP4/ PLI/ N78	[In the Operation Room] Andrews: Well, what if it's somebody you like? Or somebody you love? Have you ever had a girlfriend?	MM												√		√	Shaun's response didn't explain whether he had ever had a girlfriend or mind to be hugged by his loved

	Shaun: <i>I almost kissed a girl. Once.</i>																one. However, his respond of nearly kissing a girl might have a potential he had ever had one. [Shaun looked around and his face was limited.]
EP4/ PLI/ N79	[In the Operation Room] Shaun: Are you trying to mock me or encourage me? Andrews: I'm trying to get to know you so I know when I should mock and when I should encourage. Shaun: When's the right time to mock <i>you</i> ?				√								√		√		Shaun actually wanted to ask when the right time to mock him, not Andrews. He used the wrong pronoun. [Shaun looked at Andrews expressionless.]
EP4/ PLI/ N80	[In the Patient's Room] Patient: I knew it. God's punishing me. Browne: No, absolutely not. This is just a random growth— Shaun: You're religious?					√		IT					√		√		Question that was religion-related was sensitive, particularly towards stranger. Shaun didn't consider that and he cut Browne's reassurance. [Shaun stiffly looked at the patient without any expressions.]
EP4/ PLI/ N81	[At the Apartment] Shaun: <i>You fixed my sink!</i> Armen: Do you know how to tell time? Shaun: <i>You fixed my sink!</i> Armen: You're welcome. Now go away. Shaun: <i>It was not on the list! The faucet. It was not on the list. You weren't supposed to touch it.</i> Armen: So after I fix everything you woke me up for, then I go out of my way to fix something el— Shaun: <i>It was not on the list because I'd already fixed it.</i> Armen: Well, you fixed it wrong. Because it was still dripping. Shaun: I need it to drip. At the same rate as my sink in Casper. It was too slow before. Now I have to fix it all over again. It's not fair	MR					√ √ √	IT					√	√		√	Shaun attempted to complain about the fixed sink, but his voice was too flat so Armen misunderstood it as gratitude. Shaun didn't even respond to Armen's protest about his choice of waking him up and kept the sink topic continued. Armen's complaint was cut by Shaun's protest. [Shaun's body posture was not steady. His face didn't read frustration and anger while staring at Armen.]
EP4/ PLI/	[In the Patient's Room] Browne: Shaun, th... This—							IT					√	√		√	Shaun interrupted Browne from talking to explain his findings.

N82	<p>Shaun: <i>We need to sever the pudental nerve to excise the myoma, but if we reconnect the ends—</i></p> <p>Andrews: The tumor is 4 centimeters in diameter. That’s way too wide of a gap to reconnect the ends and nerves don’t stretch.</p>																	[Shaun awkwardly showed paper to the patient. He stiffly looked at her without happy emotion even though he had a good news.]	
EP4/ PLI/ N83	<p>[In the Patient’s Room]</p> <p>Andrews: You’re still on the meds, so it’s gonna—</p> <p>Shaun: <i>It’s going to take six months to a year to regain complete sensation.</i></p>								IT								√	Shaun interrupted Andrews to continue his explanation. [Shaun stared at her intensely with a thin smile on his face.]	
EP4/ PLI/ N84	<p>[In the Locker Room]</p> <p>Shaun: Where are you going?</p> <p>Kalu: Out. We’re gonna have drink.</p> <p>Shaun: <i>I’m not thirsty.</i></p> <p>Kalu: Don’t be an idiot.</p>		LI													√	√	Kalu implied that they went to a pub for an alcohol beverage related as a mean to commemorate their success, but Shaun took it as having a drink only. [Shaun looked stiffly at Kalu without expression even though he saved his patient.]	
EP4/ PLI/ N85	<p>[At a Bar]</p> <p>Kalu: All right guys, a toast. To us. ‘Cause we rock. Nothing else need be said.</p> <p>Browne: Cheers.</p> <p>Shaun: (Raised the glass to toast)</p>															√	√	√	[Shaun hesitantly raised his drink for toast. His face wasn’t happy at all, just flat while staring at nothing.]
EP5/ PLI/ N86	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Melendez: Right on time. What did you sleep here or use teleportation device?</p> <p>Shaun: <i>I used a teleportation device. Nonsensical questions usually imply sarcasm, which I’ve found people often answer sarcastically.</i></p>	MQL		√												√	√	√	Shaun lied about him using a teleportation device. He explained to himself about what sarcasm was. [Shaun’s posture was gauche. His eyes wandered around while throwing a flat expression to anybody around him.]
EP5/ PLI/ N87	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Evan: Young bones? Isn’t that a “Star-TREK: Origins” graphic novel?</p> <p>Shaun: <i>I’m not sure.</i></p> <p>Evan: No, that was a joke.</p>		J														√	√	Shaun didn’t get the joke and thought it was indeed a serious question. [Shaun stiffly looked around and his expression didn’t show any emotions.]

EP5/ PLI/ N88	[At San Jose St. Bonaventure Hospital] Evan: So, what's that mean? Shaun: <i>When you fell, did you hit your head?</i> Evan: No. What, you think I have brain damage? Shaun: <i>Nystagmus can be a sign of a neurological issues.</i>	MR MM												√		√	Shaun ignored Evan's question by asking something. His respond about Evan had a brain damage was also ambiguous. [Shaun looked around without expression.]
EP5/ PLI/ N89	[At San Jose St. Bonaventure Hospital] Glassman: Glassman: Shaun, are you getting any sleep? Shaun: Yes. Glassman: Really? I mean really getting sleep? Shaun: <i>I got here on time.</i> Glassman: Well, that's good. Shaun: <i>I used teleportation device.</i>	MM MQL												√		√	Shaun's answer about him getting a real sleep remained vague. Arriving on time didn't mean a person had a good sleep. Moreover, he tried to lie to make a joke. [Shaun looked at Glassman with no expression, the reason why his joke didn't work.]
EP5/ PLI/ N90	[At San Jose St. Bonaventure Hospital] Glassman: That boy, he looks like— Shaun: Steve. He does. Glassman: Is he related? Shaun: <i>His name is Evan Gallico. So I don't think so.</i>	MQ							IT							√	Shaun interrupted Glassman before he could finish his sentence. Also, Shaun gave more information than he was supposed to by telling the patient's full name. It supported the reason he said Evan wasn't related though. [Shaun eyes focused on his paper.]
EP5/ PLI/ N91	[At San Jose St. Bonaventure Hospital] Glassman: He looks exactly like your brother. Shaun: <i>No, he doesn't. His hair is shorter.</i> Glassman: It freaks me out. It doesn't freak you out? Shaun: No. Glassman: It's okay if it does— Shaun: <i>No, he's not Steve. Steve's dead.</i>		FL						IT				√	√		√	Glassman overstated about the similarity of the patient with Shaun's deceased brother, but Shaun took it literally. He cut Glassman's sentence. [Shaun's standing posture was not firm. His face didn't show anything and he gazed around.]
EP5/ PLI/ N92	[At San Jose St. Bonaventure Hospital] Evan: I know. I've had 2 of these. One more and I get my Scout badge. Shaun: <i>That was funny.</i>	MQL												√		√	Shaun lied about Evan's joke being funny. He actually didn't understand it.

																		[Shaun looked at Evan seriously and didn't show any emotions.]		
EP5/ PLI/ N93	[At San Jose St. Bonaventure Hospital] Evan: So, you married? Shaun: ... Evan: Girlfriend? Shaun: ... Evan: Boyfriend? Shaun: ... Evan: Tropical fish? Shaun: ... <i>I like Lea.</i>	MM															IG IG IG	√	√	Shaun kept ignoring Evan's questions, but once he responded it was vague whether he had a lover or not. Liking someone didn't guarantee that said someone was his lover. [Shaun was fixated on the screen that showed Evans face on it. His expression was still flat although Evan constantly gave him smile.]
EP5/ PLI/ N94	[In the Patient's Room] Evan: A friend you date? A friend with benefits? Shaun: <i>I lend her batteries sometimes.</i>	MM	I															√	√	Shaun didn't clearly explain what kind of friend Lea was. He didn't even get that "a friend with benefit" was a term for a friend whom a person had sex with without romantically involved, but interpreted it as friends that gave advantages to each other instead. [Shaun was still fixated on the screen with Evan on it. He didn't show emotion.]
EP5/ PLI/ N95	[At San Jose St. Bonaventure Hospital] Shaun: Mr. and Mrs. Gallico? Evan's parents: Hi (Gave hands to hand shake). Shaun: (Didn't accept the hand) I'm Dr. Shaun Murphy. I'm treating your son.																	√	√	[Shaun didn't accept the handshake. He stiffly looked at the parents and his expression was flat although he was going to give a bad news.]
EP5/ PLI/ N96	[At San Jose St. Bonaventure Hospital] Evan's Mom: Uh, can we see him? Shaun: Yes. <i>He's in room 414.</i>	MQ																√	√	Shaun was only asked about the patient-visit, but he gave more information about where the room was. [Shaun was flatly and stiffly looked at the parents.]

EP5/ PLI/ N97	<p>[At the Cafeteria] Glassman: Well, let me ask you this, Shaun... What's so wrong about Evan being allowed to enjoy as much of his life as possible? Shaun: Evan wants to know the truth. Glassman: How do you know that? If this were Steve, if this were your brother, would he want to know the truth? Is that what this is? Shaun: <i>Yes. He would want to know the truth.</i></p>		FL											√		√	Shaun was convinced that his brother would like the truth because of the past event in which Steve told him that his honesty was refreshing. Steve said it angrily, he seemed to be upset about Shaun telling him what his surprised gift would be. It was a sarcasm, but Shaun took it literally. [Shaun mostly looked at Glassman, but sometimes looked around him. His expression remained silent.]
EP5/ PLI/ N98	<p>[At San Jose St. Bonaventure Hospital] Shaun: Claire, I need you. Browne: Sure. What's up? Shaun: I need someone to lie for me. Browne: (Shocked) Okay... Am I flattered?</p>					√								√		√	Shaun's choice of words made him turn harsh, implying Claire was a good liar instead of good talker. [Shaun mostly looked around and his expression was flat.]
EP5/ PLI/ N99	<p>[In the Patient's Room] Evan: So, What's up with Dr. Browne? She's Lea, isn't she? Shaun: <i>Claire is my colleague.</i> Evan: Oh, come on, I saw the way you were looking at her. Shaun: How? Evan: (Blinking cutely and funnily). Evan: <i>I don't think I look like that.</i></p>	MM	J											√		√	Shaun's answer didn't clearly clarify whether Browne was Lea or not. He even took Evan funnily imitating his stare seriously. [Shaun was busy with the medical tools, but he was fixated on them while his face was not amused at the joke at all.]
EP5/ PLI/ N100	<p>[In the Patient's Room] Evan: So, what about Lea? Where'd you guys meet? Shaun: <i>In the hallway.</i> Evan: That's a beautiful story (Sarcasm). Shaun: <i>Yes. She's my neighbor.</i></p>	MQ	FL											√		√	Shaun's answer lacked of explanation, like which hallway it was. Furthermore he really thought that Evan complimented his answer, however it was sarcasm. [Shaun flatly and stiffly looked at anything bur Evan.]
EP5/ PLI/	<p>[At San Jose St. Bonaventure Hospital]</p>			√										√		√	Shaun voiced what he was writing.

N101	Shaun: <i>(Writing)</i> The oncologist flagged his neutrophil count of 634 as low.																	[Shaun clumsily placed his hand to write and stiffly looked at the paper.]
EP5/ PLI/ N102	[At San Jose St. Bonaventure Hospital] Shaun: <i>(Thinking about healing Evan (patient))</i> Evan doesn't have cancer.			√									√	√		√		Shaun voiced the result of his brainstorming although there was no one around him. [Shaun awkwardly palmed his hand. His eyes were stiff and he didn't show happiness for his good conclusion.]
EP5/ PLI/ N103	[In the Patient's Room] Evan: Why do I need a bone marrow aspiration? Shaun: My attending saw a low RBC count and wants to find the cause... <i>No biggie.</i> Evan: "No biggie?" You're lying. What's going on? You already told me I have terminal cancer, what's worse than that?		LI										√	√	√	√		Before meeting Evan, Shaun met Glassman to ask his suggestion to conduct a test without Melendez and the other's consent. Glassman told him to lie, saying he found a low RBC count, if "anyone" asked. What "anyone" meant is that the other doctors, Evan was secluded. But Shaun thought this "anyone" was for everyone so he lied when Evan asked. Moreover, Shaun echoed what Glassman had been said to him, the "no biggie" phrase. [Shaun clumsily held an injection. He stiffly and flatly looked at it, then turned to Evan with the exact same expression.]
EP5/ PLI/ N104	[In the Patient's Room] Evan: Do my parents know? Shaun: Mm... <i>I was told not to get their hopes up.</i>	MM												√		√		Shaun's answer was not clear regarding the parents' permission, but it was still relevant. [Shaun looked around flatly and stiffly.]
EP5/ PLI/ N105	[In the Patient's Room] Evan's Parents: What are you doing? Evan: Painkiller. My arm hurts.		IR										√	√		√		Steve lied to defend Shaun and secretly asked Shaun to shut his mouth, but he didn't get it, thinking

	Shaun: <i>That wouldn't explain why I'd be injecting your lumbar region.</i>																	that Evan didn't know the use of the injection. [Shaun's standing posture was awkward. He looked around and showed no emotion.]
EP5/ PLI/ N106	[In the Patient's Room] Evan: He says whatever I have might be treatable. Evan's Dad: Are you insane? Shaun: <i>No, I'm not insane.</i>		LI									√	√		√			Shaun was indeed sane, but what Evan's dad meant was whether Shaun already lost his mind or not for making such an inconsistent assertion. [Shaun stiffly and flatly stared at Evan's parents. His posture was not firm and he still stiffly held his injection.]
EP5/ PLI/ N107	[At San Jose St. Bonaventure Hospital] Shaun: (Reading) "... While he hadn't done any of those things, Atticus, he was real nice. His hands were under my chin, pulling up the cover, tucking it around me. <i>Most people are, Scout, when you finally see them.</i> "													√		√		There was no punctuation when Shaun read a certain line so the meaning became different. It no longer meant people were good when people looked deeply into them, but people were Scout when people got to know them or people had a soul of scout when they were deeply looked. [Shaun's gaze was fixated on the novel and he had no emotion when reading a heartwarming ending.]
EP6/ PLI/ N108	[At San Jose St. Bonaventure Hospital] Kalu: You're welcome. It's a special blend. I roast the beans myself. Shaun: (Sniffed the coffee while walking) <i>Smells like leather.</i> Kalu: Then none for you, Murphy. Shaun: <i>I don't drink coffee.</i>		J	√											√		√	Shaun commented what he thought about how the coffee smelled. Kalu teased him by threatening not to give him one and Shaun responded it seriously. [Shaun kept walking while talking, looking expressionless and staring around.]

EP6/ PLI/ N109	[At San Jose St. Bonaventure Hospital] Nurse: He's bleeding out, Security: Do something. Shaun: ... I need a urinary catheter, 14-gauge needle, arterial guide wire, occlusion balloon, and 20 cc of saline, stat.						√	√						√		√	Shaun explicitly stated what he needed. The way he said it was too flat considering the urgent situation he was in. [Shaun stared somewhere and didn't panic like the other people surrounding him.]
EP6/ PLI/ N110	[At San Jose St. Bonaventure Hospital] Security: What's he doing? Nurse: I have no idea. Shaun: Well, you don't have one, so I'm making a REBOA. Nurse: A what? Shaun: A REBOA. Nurse: Is that even a word? Shaun: A REBOA will occlude the damaged artery and stop the bleeding.	MR									√		√			√	REBOA was actually a medical procedure and Shaun named his invention after it due to having the same function. The nurse didn't realize this and asked the existence of the word, but Shaun ignored it by explaining its function. [Shaun clumsily dealt with the medical tools. He looked around and was still not panic like the others.]
EP6/ PLI/ N111	[At San Jose St. Bonaventure Hospital] Nurse: Nice work, Dr. Murphy (Smiles). Shaun: I made a REBOA.	MR									√			√		√	Shaun didn't respond the nurse's flattery well and once again stated he made a REBOA. [Shaun didn't look at the nurse and he even didn't try to smile after stopping the patient's bleeding.]
EP6/ PLI/ N112	[At San Jose St. Bonaventure Hospital] Browne: Hey! I was here first! Shaun: (Typing). Browne: Shaun. Shaun: (Typing). Browne: Shaun!								IG IG				√	√		√	Shaun didn't respond to Browne's protest and kept typing. [Shaun couldn't sit firmly in his seat and focused on the computer without expression.]
EP6/ PLI/ N113	[At San Jose St. Bonaventure Hospital] Browne: Okay, I'll give you the computer, but you need to apologize first. Shaun: Okay, I'm sorry. Turn it on.							√					√	√		√	Shaun's voice was too flat to be regarded as an apology. [Shaun didn't steadily sit and looked around without a sorry expression.]

EP6/ PLI/ N114	[At San Jose St. Bonaventure Hospital] Shaun: <i>(Thinking and looking at the computer) Mm. It's not possible. The bone damage is too severe. A road implantation won't work. There's nothing to anchor into, and the shunt won't last long enough to do reconstruction. There are no other options.</i>			√									√		√	Shaun voiced the reason of impossibility of not amputating the patient's leg. It sounded like a monologue although he talked to Browne. [Shaun looked around and there was no sadness for the bad news on his expression.]
EP6/ PLI/ N115	[At San Jose St. Bonaventure Hospital] Marco's Dad: You want to put a fake femur into Marco's leg? Shaun: <i>It's not fake. It's real.</i> Melendez: It's not real bone, We're making it out of Titanium. Shaun: <i>It's still real.</i> Bride: That's incredible. And Marco will be able to walk, run, climb? Shaun: <i>And swim.</i> Marco's Mom: Well, have you done the surgery before? Melendez: I haven't— Shaun: <i>We'll be the first.</i>	MM	LI						IT				√		√	Shaun insisted the femur is not fake because it had presence and would stay as Marco's 'bone' forever. He didn't accept the idea of it as fake bone because it was not real bone. He also didn't give proper answer for whether Marco could walk, run and climb, but continued the list instead. He even talked when Melendez talked [Shaun stiffly and flatly looked somewhere.]
EP6/ PLI/ N116	[At the Operation Room] Shaun: Why are you marrying Jessica? Melendez: (Surprised) Why does anyone get married? Shaun: I don't know.					√							√		√	Asking a superior about his decision to marry someone was quite impolite, but Shaun still asked it anyway. [Shaun looked towards Melendez without any expressions.]
EP6/ PLI/ N117	[At the Operation Room] Melendez: What the hell am I supposed to do with an unconscious patient whose leg is a ticking time bomb? Jessica: Judge Singh is en route. She wants to hear from both parties and the doctors on the case. Shaun: I have to testify?								IT				√		√	Shaun interrupted Jessica's and Melendez's conversation. [Shaun most of the time looked past through the operation window. His face was flat.]

EP6/ PLI/ N118	[At the Operation Room] Melendez: It's their call to make. Jessica: And if the accident happened an hour later, it would be the wife's. And she wants the fake leg— Shaun: It's not fake.		LI						IT				√		√	Shaun kept insisting about the 'fake leg' that he considered as real. He cut Jessica's sentence before she finished. [Shaun looked past through the operation window, expressionless.]
EP6/ PLI/ N119	[At the Operation Room] Melendez: I was saying, there needs to be rules that there needs to be bright red lines telling us who gets to make these calls. It's the parents' call. Jessica: Not anymore. Now it's the judge's. How much time does Marco have left on the temporary shunt? Shaun: 3 HOURS, and then his leg will die.						√		IT				√		√	Shaun answered a question given for Melendez and some of his line was stressed and loud too much compared to the rest. [Shaun looked at them. He didn't look sad or panic about the limited time they had to save Marco.]
EP6/ PLI/ N120	[In the Patient's Room] Judge: He has. But the fake femur is yours, though, right? How confident are you in its design? Shaun: <i>It's not fake!</i> Jessica: Shaun, she needs to know— Shaun: <i>I know what she needs to know. She needs to know will it work. She needs to know how long it will last.</i>	MR	LI						IT			√	√		√	Shaun didn't give an explanation about his confidence, but kept insisting about the femur being not fake again. He cut Jessica's sentence to say what he needed to do. [Shaun didn't steadily stand. His eyes looked around and his face didn't show any kinds of expressions.]
EP6/ PLI/ N121	[In the Patient's Room] Marco's Dad: No, we already know the answer. They don't know. This thing has never been done before. Shaun: <i>Be quite! (Rising his pointing finger near his ear).</i> Shaun: (Walked close to the patient) <i>His toes are changing color. He's clotting. That's bad. Page Dr. Melendez, stat!</i>			√					IT			√			√	Shaun commented the change of color in Marco's leg after interrupting the family's bickering. [Shaun awkwardly raised his hand to make them stop talking. He focused on Marco's toe, expressionless.]
EP6/ PLI/ N122	[In the Patient's Room] Melendez: No, no. We're monitoring him very closely. The biggest threat is behind— Shaun: <i>He moved. It worked.</i>								IT		√		√		√	Shaun commented when the others were still talking. [Shaun looked at Marco's toe intensely. He didn't show happiness

	<p>Everyone, but Shaun: (Smiled)</p> <p>Marco's Dad: Thank you (Gave his hand to shake hand).</p> <p>Shaun: (<i>Didn't shake his hand</i>).</p>																	like the others and didn't return the gesture to shake the dad's hand.]
EP6/ PLI/ N123	<p>[Outside San Jose St. Bonaventure Hospital]</p> <p>Glassman: Shaun, you really don't want love?</p> <p>Shaun: <i>I loved Steve and my rabbit. Not anymore.</i></p> <p>Glassman: You don't love them anymore?</p> <p>Shaun: No, I don't. They're dead. You can't love someone if they're dead.</p>	MR											√		√			Shaun said he didn't love his rabbit and Steve anymore, which didn't fit the question about him not wanting love. [Shaun looked around, mostly at the road with no expression.]
EP6/ PLI/ N124	<p>[Outside San Jose St. Bonaventure Hospital]</p> <p>Glassman: You want breakfast?</p> <p>Shaun: <i>Can I have four pancakes instead of three?</i></p> <p>Glassman: You can have five.</p> <p>Shaun: <i>I only want four.</i></p> <p>Glassman: Okay.</p>	MM	LI										√		√			Shaun threw question instead of answering Glassman's question, yet it was still related. The question could mean that he would like to go to have breakfast. Glassman actually implied that Shaun could get as much as pancakes he wanted, but Shaun thought he indeed offered 5 pancakes. [Shaun mostly looked at the road. No emotion could be seen through his face.]
EP7/ PLI/ N125	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Melendez: End stage heart failure. His heart's was beyond repair. What are our option?</p> <p>Shaun: <i>He's 73 years old. His age is an absolute contradiction for transplant. He's dying.</i></p>	MM		√									√		√			Shaun vaguely stated that they didn't have any options because how bad his patient's condition was. He talked as if he didn't give suggestion to Melendez. It sounded monologue. [Shaun looked at the patient and he didn't look as hopeless as the others.]
EP7/ PLI/ N126	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: (<i>Looked at patient outside the door</i>) You're scaring him.</p> <p>Shaun: (<i>Opened the door</i>) You're scaring him.</p> <p>Shaun: (<i>Walked to the patient</i>) You're scaring him!</p>							√				√	√		√			Shaun's voice was too flat although he tried to stop the police from touching the patient.

																		[Shaun didn't make a stop gesture at all. His face was flat and his gaze was stiff.]
EP7/ PLI/ N127	[At San Jose St. Bonaventure Hospital] Man: This patient is psychotic, Dr. Murphy. Shaun: <i>You don't like people touching you?</i> He's not psychotic. He's psychotic.							√					√	√		√		Shaun wanted to ask for clarification, but it sounded like a statement. [Shaun awkwardly made a stop gesture. He looked around flatly although the others were panic.]
EP7/ PLI/ N128	[At San Jose St. Bonaventure Hospital] Nurse: Can we release his hands? Shaun: <i>(Looked at the patient).</i> Nurse: Dr. Murphy? His hands? Shaun: <i>(Still looked at the patient)</i>								IG IG					√		√		Shaun ignored the nurse's questions and started looking at the patient. [Shaun looked at Liam and he didn't make any expressions even though Liam made a weird statement.]
EP7/ PLI/ N129	[At San Jose St. Bonaventure Hospital] Liam's Mom: Can someone tell me what happened? Shaun: <i>Liam has a 5.4 centimeter laceration on his forehead, probably from a fall. The wound was infiltrated with 5 milliliters of 1% lidocaine... 7... 7 single-interrupted 5-0 prolene sutures. He will have a small scar, but other long-term effect from this injury.</i>	MQ		√			√ √ √	√						√		√		Shaun robotically gave more information than he was asked to, complete with unnecessary details, like the long of laceration and so on. He didn't sound to talk to Liam's mom. It sounded as if he reported it to himself. [Shaun looked around and his face didn't show any reassurance or anything.]
EP7/ PLI/ N130	[At San Jose St. Bonaventure Hospital] Liam's Mom: You're my son's doctor? Shaun: I am. Dr. Shaun Murphy... <i>"Shaun" with a U.</i>	MQ											√	√		√		Shaun gave information than enough. [Shaun could stand firmly. He looked around, expressionless.]
EP7/ PLI/ N131	[At the Operation Room] Melendez: Cause could be anything from cancer to diet, so— Shaun: Liam's parents have him on a special ketogenic diet.								IT				√	√		√		Shaun cut Melendez's sentence. [Shaun raised his finger. He mostly looked around flatly, no sign of concern.]
EP7/ PLI/ N132	[At San Jose St. Bonaventure Hospital] Shaun: I want your help. Browne: With what?	MM					√							√		√		Shaun gave vague answer as to why he needed Browne's help. He also used the long term instead of the

	<p>Shaun: <i>Endoscopic Retrograde Cholangio-Pancreatography.</i></p> <p>Browne: ERCP? Why? You've done that before.</p> <p>Shaun: <i>You're good with people who have autism.</i></p>																short one although he was talking to a doctor. [Shaun looked around. His expression remained flat as usual.]
EP7/ PLI/ N133	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Browne: (Smiled) So, it must be nice to spend some time around Liam, then.</p> <p>Shaun: <i>(Laughd)</i> Why? Why would that be nice?</p>													√	√		[Shaun laughed at the idea so it turned out as if he was mocking it. He stared around, then back to the monitor.]
EP7/ PLI/ N134	<p>[In Melendez's Office]</p> <p>Melendez: Stimming?</p> <p>Shaun: <i>The tics and spasms are a neurological response to stress. If he's doing an MRI. There is stress... If there is stress, he won't keep still, if he won't keep still, we can't do an MRI. Therefore, it is impossible.</i></p>			√				√						√	√		The way Shaun talked was robotic, flat. He explained the impact of the stimming to Melendez in monologue. [Shaun looked around and walked while talking. He didn't show sadness for the impossibility.]
EP7/ PLI/ N135	<p>[In One of Patient's Rooms]</p> <p>Glassman: Shaun, what are you doing?</p> <p>Shaun: (Pacing) <i>Counting.</i></p> <p>Glassman: Counting what?</p> <p>Shaun: (Pacing) Hmm. Distance.</p> <p>Glassman: Why?</p> <p>Shaun: I want \$1,643.</p>	MQ					√							√	√		Shaun didn't give a clear respond about what he was counting until Glassman asked it. He also specifically told the exact number of money he wanted. [Shaun was pacing around, he looked straightly and didn't show any expression.]
EP7/ PLI/ N136	<p>[In One of Patient's Rooms]</p> <p>Glassman: You're not a surgeon yet. You're a surgical resident. Ah, there's a big difference in the paycheck there, pal.</p> <p>Shaun: I'm not a child, <i>pal.</i></p>									√			√	√	√		Shaun repeated Glassman's 'pal' word, a word that he never said before. [Shaun didn't stand firmly. He looked around and his face was flat.]
EP7/ PLI/ N137	<p>[In One of Patient's Rooms]</p> <p>Shaun: No. The one I want is \$1,643, okay?</p> <p>Glassman: I know, but you have a budget.</p> <p>Shaun: <i>A budget.</i></p> <p>Glassman: You... Uh, rent, food, bills to pay.</p> <p>Shaun: Is should do my own budget. I have an MRI to do.</p>						√			√			√	√	√		Shaun again stated the cost of the television he wanted specifically. He echoed Glassman's 'budget' word. That's why it sounded like a statement instead of question although the asked what this "budget" that Glassman referred to.

																		[Shaun didn't stand steadily. He looked around and his face was flat.]
EP7/ PLI/ N138	[At San Jose St. Bonaventure Hospital] Browne: That's great, listen— Shaun: <i>It's not great. Mm, it's not good. On a high-quality display, the human eyes at 20/20 cannot detect the pixels.</i>								IT					√		√		Shaun interrupted Browne's sentence. [Shaun's eyes were fixated on the television. His expression was flat.]
EP7/ PLI/ N139	[At San Jose St. Bonaventure Hospital] Browne: You don't like him? Shaun: <i>I don't know him.</i>	MM												√		√		Shaun gave unclear answer. Not knowing and disliking were two different things. [Shaun stiffly and flatly looked at Browne.]
EP7/ PLI/ N140	[At San Jose St. Bonaventure Hospital] Browne: He has the same condition you have. You have never met anyone with— Shaun: Do you like all people with psoriasis? Browne: (Confused) I don't have— Shaun: <i>Yes, you do. And you can never get rid of it.</i>	MQL							IT IT				√	√		√		Shaun cut Browne's sentence and accused Browne of having psoriasis which she didn't have. [Shaun didn't stand steadily. He looked around him, no emotion could be read from his face.]
EP7/ PLI/ N141	[In the Operation Room] Melendez: (Gave Shaun a scalpel) Do you take it or not? Shaun: <i>(Took the scalpel) This is the number 3L. It's made of high carbon steel. It doesn't break.</i>			√										√				Shaun commented about the scalpel after reminiscing about certain event in the past. [Shaun weirdly held the scalpel.]
EP7/ PLI/ N142	[At San Jose St. Bonaventure Hospital] Shaun: He will be okay. Liam's Mom: (Hugged Shaun) Thank you. Thank you. Shaun: <i>(Tried to hug her, but he didn't).</i>												√	√	√		√	[Shaun awkwardly attempted to hug her, but didn't return the hug at the end. He looked stiffly and didn't show happiness and relief like the others.]
EP7/ PLI/ N143	[At San Jose St. Bonaventure Hospital] Liam's Mom: I-I'm sorry. We're... We just... He's our son. Shaun: You shouldn't feel bad. You did what you thought was best for Liam. You love Liam. I didn't have that from my parents. <i>It also means I didn't have to take</i>					√									√		√	Shaun's statements implied that their son's disease was caused by them and he relived to not have parents like them. This was impolite although unintentional. [Shaun's expression was flat while staring at Liam's mother.]

	<i>kava root, so I didn't get hypereosinophilic gastroenteritis.</i>																
EP7/ PLI/ N144	[In a Television Store] Shaun: <i>He was the quarterback picked in 2013, but his stats outside the pocket are only 27% completed passes. Their backup QB is at 65% under pressure.</i>			√									√		√		Shaun told about a certain quarterback he looked on a television. [Shaun focused on the TV and he didn't show any expressions at all.]
EP7/ PLI/ N145	[In a Television Store] Seller: Excuse me. Uh, it's almost closing time, so— Shaun: I'd like to buy this TV.								IT				√		√		Shaun cuts the seller's sentence. [Shaun looked at the TV, then at him. His expression was limited.]
EP8/ PLI/ N146	[At the Apartment] Lea: And if I had been on a ventilator, I could've suffocated in that time, right? Shaun: <i>You're not on a ventilator.</i> Lea: Thank god for that. But I could be. I mean, it was dark. I could've tripped. I should sue him (Ate Shaun's apple). Shaun: <i>(Surprised and tries to stop Lea from eating).</i>		FL								√		√		√		Shaun took Lea's imagery seriously. She actually tried to justify herself and put blame on Armen. If she had been on a ventilator, then Armen who cut her electrical power would have been killed her due to ventilator couldn't work without electricity. [Shaun didn't use any gesture to stop Lea from eating his apple. His face didn't show anger while blankly looked at her.]
EP8/ PLI/ N147	[At the Apartment] Lea: Sorry. Were you gonna eat this? I stress eat. Okay, listen. I go talk to him, and he claims I was playing my music too loud again (Smiled ironically). Shaun: <i>I wear earplugs when your music irritates me. I miss the dripping.</i> Lea: You're missing the point here, Shaun, okay? You knock. You ask. You don't cut someone's power. You knock, right? Of course, you would knock. Any normal person would. I mean, am I crazy or is he a total sociopath? Shaun: <i>You should get headphones.</i>		FL FL										√		√		Lea ironically stated what atrocity that Armen had done to her, cutting her electrical power. She actually tried to convey to Shaun how bad Armen was, but Shaun didn't get it. She tried again to justify herself, but Shaun didn't get that she needed a support. Because he couldn't get her true intention, he gave her an advice. [Shaun looked blankly at her. His face didn't give sign he was being upset for the eaten apple.]

EP8/ PLI/ N148	[In a Market] Robber: I said get your wallet! Shaun: <i>(Raised his hand) ...</i> Robber: Do it now! Shaun: ... Robber: Wallet now! Shaun: ...								IG IG IG				√	√	√	Shaun didn't react to the robber's threat at all. [Shaun stiffly stared at the robber and he didn't show fear on his face although the robber pointed his gun to him. His body wasn't steady, probably shivering.]
EP8/ PLI/ N149	[At San Jose St. Bonaventure Hospital] Browne: Are you okay? You weren't hurt? Shaun: <i>His oropharyngeal anatomy is distorted from the confusion.</i>	MR												√	√	Shaun avoided Browne's question and explained the robber's injury. [He looked around without any expressions.]
EP8/ PLI/ N150	[At San Jose St. Bonaventure Hospital] Man: (Looked at Shaun) What the hell is he doing here? Shaun: ... (Looked at the man). Man: It's his fault. Shaun: ... Man: This is all his fault! Shaun: ...								IG IG					√	√	Shaun didn't react anything towards the man's claim. [Shaun didn't show guilt or trouble when accused and stared stiffly at his surroundings.]
EP8/ PLI/ N151	[At San Jose St. Bonaventure Hospital] Melendez: Hey, police want to talk to you. After that, you can go home. Shaun: <i>I should be helping. My shift is just starting.</i> Melendez: You were at the shooting. I don't have time to hold your hand. Shaun: <i>I don't like my hand being held. Small-caliber bullets. They ricochet inside. They can cause multiple and unpredictable injuries</i>		I	√			√	√					√	√	√	One of Shaun's sentences, "I should be helping" were voiced really slow and flat. He didn't get the idea about Melendez having no time to comfort him, not really holding his hand. He specifically stated the size of the bullets and commented what they would cause in monologue. [Shaun didn't steadily stand. He focused on the victim, expressionless.]
EP8/ PLI/ N152	[At San Jose St. Bonaventure Hospital] Melendez: Hey, Murphy, get us the ultrasound so we can find out what's inside.			√			√							√	√	Shaun told himself what he needed to get. Melendez called it ultrasound, but Shaun called it by its long name.

	Shaun: <i>Focussed Assessment with Sonography and Trauma.</i>																	[Shaun walked while looking straight. His face was not panic like the others.]
EP8/ PLI/ N153	[In the Operation Room] Kalu: Why does her boyfriend think it's your fault? Shaun: <i>It punctured her diaphragm here and entered the posterior chest.</i>	MR																Shaun avoided the question by stating about the punctured diaphragm.
EP8/ PLI/ N154	[At the Operation Room] Glassman: Shaun. Are you all right? Shaun: Yes. I wasn't injured. Glassman: What happened this morning? Shaun: <i>Lea ate my apple.</i>	MR											√		√		Shaun gave irrelevant answer which topic referred to the event in the store, not at the apartment. [Shaun stared blankly. His face was not reassuring towards Glassman's concern.]	
EP8/ PLI/ N155	[In a Market] Robber: Wallet now! Shaun: I can't. Robber: Why the hell not? Shaun: <i>You said to keep my hands where you could see them. My wallet is in my pocket. You can't see my hands if—</i>		LI										√	√		√	Shaun took the robber's threat literally. He actually asked Shaun to do nothing harmful to the robber. [Shaun awkwardly moved his fingers. He didn't seem afraid at all while staring at him stiffly.]	
EP8/ PLI/ N156	[In a Market] Robber: Are you trying to be a hero?! Shaun: <i>I'm a surgical resident—</i> Robber: Huh!? Hey! Hey! Shut the hell up! This isn't a game man. I'm serious. Shaun: ... <i>(Began pacing)</i> Robber: Put your damn phone and wallet on the ground right now! Shaun: ... <i>(Still pacing)</i>		FL						IG				√	√		√	Shaun didn't get that the robber mocked him for acting weird and denying him by calling him "hero", a metaphor. He didn't do what the robber asked and began to pace back and forth because of panics. [Shaun didn't look terrified like the other people in the store. He weirdly placed his hands near his ears while pacing, staring stiffly.]	
EP8/ PLI/ N157	[In Glassman's Office] Therapist: After any doctor goes through a potentially traumatic—	MR							IT		√			√		√	Shaun interrupted the therapist explanation to continue it himself. He used weird phrase to refer to his ability to focus on working with	

	<p>Shaun: <i>You have to determine if I'm a medico-legal liability to the hospital.</i></p> <p>Therapist: Yes. And, more importantly, it's an opportunity to provide you with emotional support. How are you feeling?</p> <p>Shaun: <i>You don't have apples.</i></p>																<p>“Medico-legal liability”. He was distracted by the food on the table, so responded her question with his protest of the lack of apples. [Shaun stared deeply at the food with no expression.]</p>
EP8/ PLI/ N158	<p>[In Glassman's Office]</p> <p>Therapist: What are you thinking right now?</p> <p>Shaun: <i>Systemic Inflammatory Response Syndrome.</i></p>						√							√		√	<p>Shaun answered with the long term instead of the short one, SIRS. [Shaun stared blankly and his expression still remained silent.]</p>
EP8/ PLI/ N159	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: <i>Her creatinine is 1.6.</i></p> <p>Browne: Mild bump in renal numbers isn't surprising after all her trauma. This morning must've been crazy. Are you okay?</p> <p>Shaun: <i>This morning my neighbor Lea came over and ate my apple.</i></p>	MR		√										√		√	<p>Shaun stated to himself regarding his patient. Again, he gave irrelevant respond when the topic clearly referred to the event at the store, not at apartment. [Shaun looked around, no emotion could be found on his face.]</p>
EP8/ PLI/ N160	<p>[In the Patient's Room]</p> <p>Melendez: We're gonna have to work fast. I'll prep the evac drain. I'm gonna need you to put that needle right between—</p> <p>Shaun: <i>6th and 7th rib</i> (Took a needle and checked it)</p> <p>Man: Wait, you're gonna let him do—</p> <p>Melendez: All right, be careful. Don't put the needle in too deep. We don't want to give her—</p> <p>Shaun: <i>Pneumothorax.</i></p>															√	<p>Shaun kept cutting Melendez' suggestions and continued the rest himself. [Shaun looked straightly at everything he did.]</p>
EP8/ PLI/ N161	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Glassman: Yes, but people have told you that it's your fault, haven't they?</p> <p>Shaun: <i>My actions and the shooting were associative incidents. It is not a causal relationship. I paced, and she got shot, but pacing doesn't cause shootings, otherwise every time someone paced, a shooting would soon follow.</i></p>		LI	√										√	√	√	<p>Shaun didn't get that his action was what triggered the shooting, which made it his fault. He didn't regard it as his mistake because he was not the one who shot the victim. The way he reasoned was monologue although he tried to defend himself. He didn't say phrases like “It wasn't my fault” like</p>

																		people would do when they were blamed, but directly went to explain why it wasn't his fault. [Shaun didn't stand firmly. He looked around and his expression didn't show a frustration of being accused.]
EP8/ PLI/ N162	[At San Jose St. Bonaventure Hospital] Glassman: Okay, Shaun, wait a second. Wait a second. I know your behavior is not completely in your control, but I also know it's not completely out of your control, is it? So, yes, maybe it is a little bit your fault. And definitely mine. Shaun: <i>(Laughed)</i> You weren't even there.		LI										√		√	√		What Glassman meant is that it was also his fault because Shaun was his responsibility, but Shaun thought Glassman didn't have anything to do with the event because he was not there. [Shaun's body posture was not firm. The laugh he made didn't suit the conversation they had. He looked around when talking.]
EP8/ PLI/ N163	[At San Jose St. Bonaventure Hospital] Glassman: Shaun... I convinced myself that everything was fine because in here, it is. It's great. But you need help. Shaun... You need guidance... Much more than I can give you. Shaun: <i>I'm supposed to be with my patient. I'm supposed to be watching her like a hawk.</i>	MR												√		√		Shaun changed the topic in order to avoid the conversation. [Shaun looked at Glassman, then looked around. His face didn't react to Glassman's concern.]
EP8/ PLI/ N164	[In the Patient's Room] Man: She was there because of me. She is here because of me. Shaun: <i>It's not a causal relationship.</i> Man: Wait, excuse me? Shaun: <i>It's not a causal relationship... Lying and shootings. Lying doesn't cause shootings, otherwise every time someone lied—</i>		LI	√									√	√		√		Shaun didn't get the man's statement about he was the one who brought the victim to the store, the place where she got shoot, through his lie. He blamed himself because he was part of the incident. But Shaun thought it was not his fault because lie didn't cause shooting, but the gun. Shaun's reasoning sounded monologue because it didn't try to

N168	<p>Browne: Okay. The pretentious giggle. The, uh... The squirm. And the hair sweep. I call it the flirting trifecta.</p> <p>Shaun: <i>Hair scuffing</i> is used in both animals and humans, Claire. Secreting glands are located in the scalp and fur. Scuffing sends hormones out into the environment to let a potential mate know they are interested. Or it could be ringworm.</p>																brushing hair. This phrase was not normal [Shaun looked around while talking and made a gesture of spreading hormones with his both hands.]
EP9/ PLI/ N169	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Glassman: Well, that's terrific, Shaun. Why are we talking about that here?</p> <p>Shaun: <i>I'm not stupid.</i></p>	MR										√	√		√		Shaun didn't give an information suitable for the question. He appeared to accuse Glassman to think he's stupid for choosing the place, which was a curtain occupied by an old man, for private conversation. [Shaun's posture was gauche. He looked stiffly and flatly at Glassman.]
EP9/ PLI/ N170	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Glassman: Shaun, what are you getting at?</p> <p>Shaun: <i>Flirting, it requires primarily nonverbal interactions. Being perceptive in one dimension translates well to other social skills.</i></p> <p>Glassman: You're flirting. Are you lonely, Shaun? 'Cause you know there are... There are websites now where you can—</p> <p>Shaun: <i>I like being alone.</i></p>		LI	√					IT			√	√		√		Shaun defined the requirement of flirting. It didn't sound as if he was talking to Glassman. Shaun interrupted Glassman before he could explain further. Shaun didn't get that Glassman asked whether he needed a girlfriend because of being lonely, but Shaun thought he talked about a friend. [Shaun didn't stand firmly. He stared at Glassman stiffly with no expression.]
EP9/ PLI/ N171	<p>[In the Patient's Room]</p> <p>Kalu: Has he developed endocarditis? (Looked at the other doctor).</p> <p>Shaun: <i>His echo didn't reveal vegetations on his valves or... Endocardium. He has not developed a fever.</i></p>			√					IT				√		√		Shaun answered a question given for the other doctor. He commented about the toy whose parts of its face were placed wrongly. [Shaun's gaze focused on the toy. He looked stiffly and flatly at it.]

	<p>Doctor: Let's be sure. Get blood cultures. Order them times two, 15 minutes.</p> <p>Shaun: <i>It's in the wrong place (Looked at a toy and fixes it). It was in the wrong place.</i></p>																
EP9/ PLI/ N172	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Melendez: Thank you for the visual aid. You can't move the mitral valve. Now, if Mr. Potato Head had an atrial septal nose and hypertrophic obstructive—</p> <p>Shaun: <i>I believe... I believe the abnormal insertion of the mitral valve can be—</i></p> <p>Melendez: Stop.</p>						√	IT				√	√		√	Shaun interrupted Melendez's comment about his idea. He tried to reason with him, but the voice uttered was flat, even the 'I believe' sounded sing song. [Shaun weirdly showed the toy to Melendez. His face didn't get excited and he looked at him blankly.]	
EP9/ PLI/ N173	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: I made a chart too. <i>A qualitative observation log</i> of what you taught me.</p> <p>Browne: What did I teach you?</p> <p>Shaun: Flirting. <i>Every time I saw someone flirt, I noted it and cross-referenced the subject, object, and nonverbal gestures.</i></p>	MQ					√								√	Shaun explicitly said what kind of log it was. He gave more information than he was asked to. [Shaun focused on his log.]	
EP9/ PLI/ N174	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: Yes. You were at the nurses station and he said "Good for you" and you said "Yeah, right. I just broke about eight rules," and smiled and giggled and brushed you hair back. It's possible you have ringworm.</p>								√ √			√	√		√	Shaun repeated the conversation between Browne and Melendez back then. [He awkwardly scratched his neck. He looked around, and his face still remained limited.]	
EP9/ PLI/ N175	<p>[In the Operation Room]</p> <p>Melendez: If we go anywhere near that number, we won't have enough support for the valve. But let's say we took that down to 20...</p> <p>Shaun: (Laughed) That won't be enough.</p>											√		√	[Shaun laughed at the idea while they were now thinking about saving a kid's life. He weirdly bent to move the visual aid.]		
EP9/ PLI/ N176	<p>[In the Operation Room]</p> <p>Shaun: <i>Good luck.</i></p> <p>Melendez: You believe in luck?</p> <p>Shaun: <i>It's something people say in difficult situations.</i></p>	MM							√					√	√	Shaun said good luck without really knowing how to use it, a sign of echolalia. He also didn't give clear answer for his believe in luck.	

																		[Shaun looked around and made a weird expression.]
EP9/ PLI/ N177	[In Glassman’s Office] Shaun: Yes. And I caught Claire flirting. Glassman: With you? Shaun. I think you might be mis— Shaun: <i>With Dr. Melendez.</i>							IT					√	√		√		Shaun cut Glassman’s misunderstanding. [Shaun showed the list clumsily. His face didn’t show amusement and he looked at Glassman.]
EP9/ PLI/ N178	[In Glassman’s Office] Shaun: <i>I don’t want a stranger helping me.</i> Glassman: I know, Shaun, but... And I can’t... I can’t always be there, I-I... I can’t always help you the way you need to be helped, the way you deserve to be helped. Shaun: <i>I don’t want a stranger helping me.</i>						√						√	√		√		Shaun flatly voiced his protest of having a life coach. [Shaun looked straightly at Glassman, but his face didn’t show disappointment and sadness in it.]
EP9/ PLI/ N179	[At the Apartment] Lea: Do you think Armen would kill me if I got a pet hedgehog? I mean, I read that they’re actually pretty— Shaun: <i>Lea.</i> Lea: Yes, Shaun? Shaun: <i>You look absurd in that sweater.</i>					√		IT						√		√		Shaun cut Lea’s sentence of her fascination for hedgehog. He commented Lea’s sweater being bad on her. He probably tried to flirt with her, but his expression didn’t show it so it turned out to be a mocking statement. [Shaun stared around, sometimes at Lea.]
EP10/ PLI/ N180	[In Glassman’s Office] Therapist: Hi, Shaun. Nice to meet you. Shaun: <i>H-h-hi.</i> Therapist: Dr. Glassman thought it would be a good idea for us to meet before our first in home session. Just make sure you’re comfortable. Shaun: I’m not comfortable.						√						√	√		√		The way Shaun said “hi” was sing song. [Shaun looked around. Although he said he felt uncomfortable, his face didn’t say that. Shaun’s posture was not steady.]
EP10/ PLI/ N181	[In the Patient’s Room] Melendez: Which part of the UCL is the principal secondary restraint to excessive valgus movement? (Looked at Kalu). Kalu: (Wanted to answer).	MQL						IT					√	√		√		Shaun interrupted Kalu by answering the question given by Melendez. Shaun told him that he was okay, but he was not. The therapy was too much for him.

	<p>Shaun: <i>Anterior.</i> Melendez: (Looked at Shaun) Is everything okay? Shaun: <i>Ye, I'm fine. I'm fine.</i></p>																	[Shaun clumsily messed his hair. He looked at Melendez shortly and his face was limited although he was shivering.]
EP10/ PLI/ N182	<p>[In the Patient's Room] Shaun: <i>There is a paradoxical loss grip strength on the left.</i></p>			√								√					√	Shaun voiced what he thought that Bobby had. [Shaun's body posture was gauche. He looked at Melendez blankly.]
EP10/ PLI/ N183	<p>[In the Patient's Room] Bobby: What's wrong with you? Shaun: N-nothing. I have a condition called— Bobby: You're autistic. Yeah, yeah, yeah. Mm, I get it. But what is wrong with you, bro? You gotta be legit smart to land a gig as a surgeon and he just shut you down like a noob. Shaun: <i>I'll bring the idea up again. I do that.</i></p>		LI									√	√			√	What Bobby meant was that Shaun wasn't respected by the other doctors because the way he was treated, but Shaun thought that Bobby suggested him to try to bring the idea again. [Shaun's standing posture wasn't firm. He looked around and didn't show sadness.]	
EP10/ PLI/ N184	<p>[At San Jose St. Bonaventure Hospital] Glassman: How'd it go with Melissa? Shaun: <i>She was... VERY helpful.</i></p>	MQL						√								√	√	Shaun didn't meet Melissa, so he lied about her being helpful. The word "very" was stressed too much compared to other words. [Shaun stiffly looked at the elevator. He made a weird expression when he responded.]
EP10/ PLI/ N185	<p>[In an Elevator] Glassman: You stayed here all night just to avoid a confrontation. Just say "no" Shaun. You know? Just say "no." Shaun: <i>No! No.</i></p>		LI					√									√	Shaun weirdly said no. It sounded sing song. Then again, Shaun thought that Glassman asked him to say no, but he actually asked Shaun to be open if he didn't want to meet Melissa. [Shaun looked at Glassman.]
EP10/ PLI/ N186	<p>[In the Patient's Room] Bobby: Come on. You didn't get up in there?</p>	MR											√			√	Shaun didn't give irrelevant answer for Bobby's question regarding him not trying to stand against the other doctors.	

	Shaun: <i>Your muscle weakness along with the high body temperature could be an early indicator of multiple sclerosis.</i>																	[Shaun looked straightly at Bobby. His expression was flat, although he had bad news.]
EP10/ PLI/ N187	[At San Jose St. Bonaventure Hospital] Melendez: We have talked about this countless times (Angry). Shaun: <i>Yes. We should do an MRI.</i> Melendez: We're not ordering an MRI. Shaun: <i>You don't respect me?</i>	MR				√		√							√	√		Shaun ignored Melendez's protest and insists to do an MRI. Melendez was his superior, and the way he asked for MRI was impolite. Shaun wanted to sound tough, but his voice was flat. [Shaun looked around and the way he adjusted himself to look strong was weird.]
EP10/ PLI/ N188	[At San Jose St. Bonaventure Hospital] Bobby: Okay, you asked nicely. Shaun: <i>Yes. Yes, I did.</i> Bobby: You gotta be fierce if you want the glory, bro. Shaun: Oh, no. I don't want the glory, bro.	MQL								√						√		Shaun said he asked Melendez nicely, which was not true. Moreover, Shaun repeated Bobby's phrase. [Shaun looked straightly while doing his things and smiled a little because of Bobby's comment.]
EP10/ PLI/ N189	[At San Jose St. Bonaventure Hospital] Bobby: Everyone wants glory. It... It's how you get what you want. And everybody's got wants. Shaun: <i>I want a surround-sound speaker system. To get it, I have to see a therapist, I don't want to see a therapist.</i> Bobby: Okay, yeah, that's... That's how I got my first PS2. Yeah, my parents bribed me to go to therapy after they split.		FL				√							√		√		Shaun tried to tell that to get what he wanted, it was not always by glory, but it could be by visiting his therapist. He even stated what kind of speaker he wanted in detail. However, the glory that Bobby meant was an honor that made people look up to them. [Shaun looked blankly while walking, expressionless.]
EP10/ PLI/ N190	[In the Patient's Room] Shaun: <i>WHY did you hide the truth? A previous cancer diagnosis isn't shameful.</i>							√						√		√		There was a long juncture when Shaun was asking question. [Shaun looked at Bobby, not looking angry.]

EP10/ PLI/ N191	[In the Patient's Room] Melendez: The mass is located on your brain stem. Shaun: <i>Which controls your autonomic nervous system, your heart, respiration.</i>								IT						√	√	Shaun continued Melendez's explanation without being asked. [Shaun looked around. There were some weird expressions appeared when he was talking.]
EP10/ PLI/ N192	[In a Storage Room] Janitor: What are you doing here? Shaun: I'm hiding from my therapist. <i>I'm not going to get a surround-sound speaker system. But I am doing whatever the hell I fell like doing.</i>	MQ				√				√					√	√	The janitor was given more information than he asked. Shaun echoed Bobby's advice, in this case "whatever the hell." He also stated what kinds of speaker he won't get in detail due to defying Glassman's request of meeting a therapist. [Shaun looked stiffly and flatly at the janitor.]
EP10/ PLI/ N193	[In a Storage Room] Shaun: <i>Are you satisfied with what you've done with your life?</i> Janitor: (Surprised). Shaun: <i>Would you be happy if you died tomorrow?</i>					√									√	√	The questions that Shaun asked may not be that impolite, but they were not normal questions thrown to a stranger. [Shaun looked around. His face didn't show any emotions.]
EP10/ PLI/ N194	[In a Storage Room] Shaun: That's very good answer (Gave the mop). Janitor: I got the pictures of the girls if you want see— Shaun: No.								IT					√	√	√	Shaun interrupted the janitor to shut him down. [Shaun gave the mop weirdly. His face didn't show amusement when hearing the man's great answers. His stare was stiff as usual.]
EP10/ PLI/ N195	[In a Storage Room] Glassman: I tried... Encouraging, I've tried being supportive, I've tried bribing you. Shaun: I don't need a therapist. <i>No.</i>							√							√	√	Shaun voiced his "no" weirdly. It doesn't sound normal. It's like "NNNOO." [Shaun didn't show a dislike and looked around while wearing his coat].

EP10/ PLI/ N196	[In the Operation Room] Shaun: <i>He's going into V-tach. Robert Ato is dying.</i>						√	√							√	Shaun addressed the patient's full name. His voice was flat and relax even though Bobby was dying. [Shaun looked at the monitor intensely.]
EP10/ PLI/ N197	[At San Jose St. Bonaventure Hospital] Glassman: Why do you think I'm doing this? Shaun: <i>Because YOU ARE stubBORN.</i>							√					√	√	√	One of Shaun's words was stressed wrongly and the others were louder than the rest. [Shaun stood unsteadily. He looked around and his expression was still the same, yet there was a little twitch.]
EP10/ PLI/ N198	[At San Jose St. Bonaventure Hospital] Glassman: Ok-okay. Yeah, okay, sure. I'm stubborn. But I'm doing this for you, okay? So that you can have a better life, so that you can have a happier life. Shaun: What if it doesn't make ME, happy? <i>What if it doesn't make me happy? What if it only makes YOU happy?</i>							√					√	√	√	Shaun's voice didn't emphasize protest and anger due to it being flat. [Shaun looked around. His body was still clumsy because he's shivering. He made an abnormal expression to show anger.]
EP10/ PLI/ N199	[At San Jose St. Bonaventure Hospital] Glassman: No! Let's go! Shaun: <i>No! No.</i> No, I... I want to make my own decisions. Glassman: Shaun, can you keep your voice down, please? Please? Shaun: You... You cannot keep ordering around, okay? You're not my father!							√					√	√	√	Shaun didn't show anger when he refused to go. It even sounded sing song. [Shaun looked around. His eyes widened to show anger, but it turned out strange. He clumsily used some gestures such as moving or raising his hands.]
EP10/ PLI/ N200	[At San Jose St. Bonaventure Hospital] Glassman: Shaun, I don't understand... Shaun: <i>Okay (Patting his head).</i> Glassman: Why this is so... Shaun: <i>You don't let anyone... (Patting his head).</i> Glassman: Upsetting. I don't get it.				√ √ √			√	TT				√	√	√	Shaun started talking and walked away when Glassman was still trying to calm him down by talking. Shaun said "you" when he tried to tell Glassman that he wouldn't let anyone ordering him. Then, his voice was strangled and low as if he was

	<p>Shaun: <i>I have to work five more months before I earn a vacation.</i></p> <p>Lea: So call in sick.</p> <p>Shaun: <i>I'm not sick.</i></p>																[Shaun looked around, then at Lea. There was no expression could be seen from his face.]
EP11/ PLI/ N204	<p>[At the Apartment]</p> <p>Shaun: (Grabbed his phone and puts it on the table).</p> <p>Lea: You call in sick?</p> <p>Shaun: <i>I'm ready to go.</i></p>	MR										√	√		√		Shaun avoided the topic and said he was ready to go on vacation. He didn't answer the question well because he hadn't called Melendez for permission. [Shaun clumsily tried to touch the pillows behind him. He looked stiffly and flatly at Lea and at the pillows.]
EP11/ PLI/ N205	<p>[At the Parking Lot]</p> <p>Shaun: <i>Okay, what do you do at work?</i></p> <p>Lea: Do you really care what I do, or do you just want to know how someone with such a crappy apartment can afford 2 cars?</p>							√							√		A long juncture could be heard from Shaun's question. [Shaun focused on Lea while walking towards her.]
EP11/ PLI/ N206	<p>[At the Parking Lot]</p> <p>Lea: Hmm. Yeah, I can't. Yeah, my grandpa Rod died last year, and he left me his most prized possession (Opened the cover).</p> <p>Shaun: (Pointed the car) <i>It's the S-Striped Tomato.</i></p> <p>Lea: Oh, my God. You like "Starsky and Hutch?"</p> <p>Shaun: <i>It's okay.</i></p>	MM									√		√	√	√		Shaun called a Torino car as Striped Tomato, which referred to a name used by a film character for his Torino. Lea coincidentally knew the film and understood him. Also, Shaun gave vague answer about whether he liked the film Starsky and Hutch. [Shaun pointed at the car then clapped his hands awkwardly. He looked at the car, but didn't show any excitement for finding it out.]
EP11/ PLI/ N207	<p>[In Lea's Car]</p> <p>Lea: (Shocked) Oh, my God. I'm so sorry. I had no idea. How did he, um... If you don't mind me asking?</p> <p>Shaun: <i>My father was mean. He killed my pet, so my brother and I, we ran away. Then he fell of a train we</i></p>	MQ						√						√	√		There was no emotion when Shaun told a story of how his brother died could be traced from his voice. He also gave more information for Lea's

	were playing on, hit his head, and died. <i>I never went back home. Dr. Glassman has watched out for me ever since.</i>															question by telling about how mean his father was. [Shaun looked around, mostly at the road. He didn't show sorrow when he told the story.]
EP11/ PLI/ N208	[In Lea's Car] Shaun: <i>I want a car.</i> Lea: So, get one. You've been driving a half-hour, and you're already better than half the people in San Jose.						√						√	√		Shaun had a sing song voice. [Shaun focused on the road. He didn't look happy when Lea complimented him.]
EP11/ PLI/ N209	[On the Street] Shaun: I crashed (Went outside the car). Lea: We didn't. We just— Shaun: <i>Yes, I-I crashed. I hit something.</i> Lea: Shaun, Shaun. Shaun: <i>I hit something. I did. I hit something (Messing his hair).</i> Lea: Shaun, you— Shaun: <i>I know, I did. I felt it. I crashed.</i> Lea: Shaun, you didn't crash. Shaun: <i>Yes.</i> Lea: You just drove off the road... Shaun: <i>No.</i> Lea: ... And it was totally my fault. Shaun: <i>No, you're wrong. Nu-unh. I hit something.</i>						√	TT				√	√	√	Shaun's voice sounded weird. Some were sing song and some were flat although he was panic. He kept talking when Lea talked. [Shaun used some awkward gestures, such as bending and messing his hair while talking. He looked around. His expression looked weird, just like when he was angry at Glassman the other day.]	
EP11/ PLI/ N210	[On the Street] Lea: Have you ever drunk? Shaun: ... Lea: Never? Shaun: ... Lea: Eight years of college and not one frat party? Shaun: ... Lea: Tail gating? You roommate's 21 st birthday? Shaun: <i>What is your job?</i>	MR											√	√	Shaun ignored Lea's curiosity pertaining his experience with alcohol. When he spoke, it didn't respond to any of the questions, but new topic arouse. [Shaun looked around. His expression was flat even though Lea kept bothering him.]	

EP11/ PLI/ N211	[In a Bar] Shaun: <i>(Toasted his drink and drinks it) It's... Good.</i>							√						√	√		√	Shaun made a sing song voice when giving his opinion. [Shaun weirdly drank the glass. He didn't look happy although it felt good. He blankly looked around.]
EP11/ PLI/ N212	[On the Street] Lea: Yes. Shaun: <i>(Raised his glass) Tequila, stat.</i>										√			√	√		√	"Stat" was commonly used in medical environment as a mean of needing immediate attention. Shaun used this to order his next drink. [Shaun held his glass awkwardly, looking stiff and expressionless.]
EP11/ PLI/ N213	[Outside an Apartment] Lea: Now tell me I'm really fun, too, and that you hope we can do it again soon. Shaun: <i>Y-Y-You're really fun, too.</i>							√						√			√	Shaun was too happy. His voice started out low before being normal again. [Shaun's eyes wandered around and his posture was not steady.]
EP11/ PLI/ N214	[Outside an Apartment] Lea: Kiss me, Shaun. Shaun: <i>(Weirdly leaned forward to kiss her).</i> Lea: Have you ever done that before? Shaun: <i>Uh, no, NO, NO, NO.</i>							√						√			√	Shaun's voice sounded sing song, probably because he was so happy. [Shaun looked around. His posture was steady and he awkwardly kissed Lea. A big smile appeared on his face.]
EP11/ PLI/ N215	[On the Street] Shaun: <i>I feel DISgusting.</i> Lea: You're just hungover.							√							√		√	Shaun gave long juncture when he spoke. [Shaun looked around, no emotion could be seen.]
EP11/ PLI/ N216	[In a Restaurant] Lea: And just taking this trip with you made me realize I, uh... I want to enjoy my life, you know? Shaun: ... Lea: Okay, what? Say something. Shaun: ... Lea: You're... Shaun: <i>(Left Lea alone in the restaurant).</i>														√		√	Shaun ignored Lea. [Shaun looked stiffly at nothing. He didn't show any expression, but his eyes were glistening though.]

EP12/ PLI/ N217	<p>[At San Jose St. Bonaventure Hospital] Shaun: Okay. Yes. I... Will notify Dr. Melendez next time I go on a road trip with my girlfriend (Smiled). Woman: Amazing. Melendez: "Road Trip?" Dr. Glassman said you were dealing with a personal crisis. Shaun: <i>That is true.</i></p>							√						√	√	<p>The way Shaun spoke was so slow and there was a long juncture there. [Shaun looked around after looking at Melendez. He smiled when Melendez was angry at his absence.]</p>
EP12/ PLI/ N218	<p>[At San Jose St. Bonaventure Hospital] Melendez: You and Dr. Browne get going on Katie's angiogram, unless, of course you have any personal emergencies to attend to (Sarcasm). Shaun: <i>No, my crisis is over.</i></p>		FL											√	√	<p>Shaun took Melendez's sarcasm seriously regarding his possibility of having personal crisis. [Shaun walked away from Melendez, looking around without any guilty could be seen from him.]</p>
EP12/ PLI/ N219	<p>[At San Jose St. Bonaventure Hospital] Browne: You're thinking low flow out means low flow in? Shaun: Yes, that is what I'm thinking. We should look at the arterial inflow phase. (Looked at the nurse) We'd like to look at <i>the arterial inflow phase</i>, please (Thumbed up). Browne: So, what'd you do on your trip? Shaun: ... Browne: Well, sometimes when we take a road trip, we're running away from something. Shaun: <i>I kissed Lea. And Dr. Glassman is mad at me.</i></p>	MQ						√	IG				√	√	√	<p>Shaun gave long juncture when he said a phrase "the arterial inflow phrase," so it sounds like "the arterial, inflow phase." He ignored Browne's question at first, then answered it with less information than he was asked. [Shaun awkwardly gave a thumb up to the nurse through the window. He didn't look sad when he knew Glassman was angry at him while looking around.]</p>
EP12/ PLI/ N220	<p>[At San Jose St. Bonaventure Hospital] Glassman: Did this trip with this girl help? Shaun: Yes. Yes, it did (Smiled). Glassman: Okay. How? Shaun: <i>I would like to give two-weeks notice.</i></p>	MR											√	√	√	<p>Shaun didn't give relevant respond to Glassman. [Shaun's posture was clumsy. He knew Glassman was upset at him, but he looked happy, perhaps thinking about Lea. He looked around.]</p>

EP12/ PLI/ N221	[At San Jose St. Bonaventure Hospital] Shaun: (Thinking). Andrews: The brain tissue hasn't settled. Another could very well stroke Katie out. Other options. Shaun: <i>Intravascular.</i>			√											√	Shaun voiced what he thought and looked from his vision when listening to the others. [Shaun stared at nothing.]
EP12/ PLI/ N222	[In the Operation Room] Woman: You see the narrowing there, in the horizontal segment of the <i>middle cerebral artery</i> . Shaun: <i>Middle cerebral artery.</i>							TT				√			√	Shaun was talking when the woman was still speaking. [Shaun held a certain tool awkwardly. He looked around after looking at the monitor.]
EP12/ PLI/ N223	[At San Jose St. Bonaventure Hospital] Shaun: (Thinking). Woman: ECMO requires blood thinners. She just had brain surgery. It could cause a catastrophic bleed. Melendez: Well, ECMO and its complications may be our only avenue. Shaun: <i>R-Re-conjoin them</i> (Smiled)			√									√		√	Shaun took a conclusion from his vision regarding the patient and voiced it. [Shaun looked straightly. He might smile at the end, but most of the time his expression was really flat when he was walking away from the others.]
EP12/ PLI/ N224	[At the Apartment] Lea: Well, what about baseballs that this girl caught at a Giants game signed by Mr. Hunter Pence? He didn't hit it, but that doesn't matter. Shaun: <i>(Busily arranging books).</i> Lea: So, where is the sporting-goods one? Shaun: There (Pointed at it). Lea: (Went to the place). Shaun: <i>(Wagged his finger) Oh, NO, that does not go in sporting goods.</i>						√	IG				√			√	Shaun was busy collecting Lea's books, so he ignored Lea. His voice sounded weird when he tried to stop Lea from placing the ball to the place. It sounded sing song and some words like "Oh, no" were stressed more than normal. [Shaun was wagging his finger funnily. He looked around before focusing on the ball and placed it.]
EP12/ PLI/ N225	[At the Apartment] Lea: Are you following me? Shaun: ... Lea: I need to make sure you're not just doing this to stay close to me. Shaun: <i>No.</i>	MQL						IG					√		√	Shaun didn't respond Lea before she insisted to know. He lied about him for not following her to Hershey. [Shaun looked around. His face didn't show anything.]

EP12/ PLI/ N226	[At the Apartment] Lea: Dr. Glassman is just trying to help you. Shaun: <i>I don't want help.</i>							√						√		√	Shaun stressed the word "I" too much so it sounds like "IIIII don't want help". [Shaun' eyes wandered around. His face was still flat although he wanted to convince Lea.]
EP12/ PLI/ N227	[At San Jose St. Bonaventure Hospital] Glassman: I brought you here because... I thought this place would provide a challenge for your abilities. But I realized I really brought you here because I thought you needed me. Shaun: ... (Listening) Glassman: This is now signed letter of recommendation. But... I don't want you to go. Shaun: ... (Listening) Glassman: If you stay, I'll... I'll back off. I'll... I'll let you make your own choices, your own mistakes. Shaun: ... (Listening) Glassman: I believe in you, Shaun. Shaun: <i>(Read a letter).</i>								IG				√	√		√	Shaun didn't give any responds to Glassman who attempted to convince him not leaving his job and San Jose. [Shaun looked at the monitor, then at Glassman. He didn't look at the old man directly though. There was no expression could be read from him, not even guilty nor sorrow. He clumsily held the letter given by Glassman to read it.]
EP12/ PLI/ N228	[At San Jose St. Bonaventure Hospital] Browne: Are you moving to Pennsylvania to be with Lea? Shaun: ... Browne: Does she know that? Shaun: <i>Lea knows I'm moving to Hershey.</i> Browne: Yeah, but does she know you're going there because she is going there? Shaun: <i>I'm not.</i>	MM MQL							IG					√		√	Shaun answered that Lea knew about him going to Hershey without clarifying whether she knew he went there for her or not. Shaun lied to Browne after he ignored her. He actually wanted to leave Hershey because of Lea. He loved her so much and he would go anywhere for her. [Shaun looked at anything, but Browne. His expression was limited.]
EP12/ PLI/ N229	[In Glassman's Office] Glassman: Gone fishing. Shaun: <i>(Came to the office).</i>	MM												√		√	Shaun's words were still vague. It couldn't be understood before Glassman looked at a letter on his

	<p>Glassman: Store's closed. Shaun: <i>I spoke to Claire</i> (Put letter to the table).</p>																<p>table. Shaun meant that he wasn't determined to leave for Lea anymore after having a conversation with Browne. [Shaun looked straightly and stiffly.]</p>
EP12/ PLI/ N230	<p>[At the Apartment] Lea: Promise? You're gonna come visit, right? Shaun: I promise. <i>I like Hershey.</i> Lea: You've never been to Hershey. Shaun: Lea's there. Lea: Can I put my arms around you? Shaun: (Put a baseball on the floor). Lea: (Hugged Shaun). Shaun: <i>(Didn't return the hug).</i></p>	MQL									√		√		√		<p>Shaun had not been in Hershey, so the statement about him liking Hershey was not true. [Shaun was not sad when Lea was leaving San Jose. He didn't return Lea's hug and he mostly looked around.]</p>
EP13/ PLI/ N231	<p>[At San Jose St. Bonaventure Hospital] Andrews: Naja Modi... 28 years old, suffered a burn to her left hand as a result of a cooking accident. Shaun: <i>Are Jared and I being punished?</i></p>	MR											√		√		<p>Shaun changed the topic into the possibility of him and Jared being punished. [Shaun didn't look to accuse him. He looked around.]</p>
EP13/ PLI/ N232	<p>[At San Jose St. Bonaventure Hospital] Andrews: Lesson one... Don't suggest to the head of surgery that working with the head of surgery is form of punishment. Shaun: <i>Dr. Melendez is very unhappy with Jared for how he got his job back. And Dr. Melendez is unhappy with me for t-taking...</i> Andrews: (Snatched Shaun's ipad). Shaun: <i>Taking two days off.</i></p>	MR						√					√		√		<p>Shaun ignored Andrews's threat and kept going on to convince him that they were being punished. The way he spoke was too slow and flat compared to his normal speech. [Shaun wasn't afraid of Andrew's threat and looked around when explaining.]</p>
EP13/ PLI/ N233	<p>[In the Patient's Room] Andrews: Okay, what do we need to do here, Murphy? Shaun: <i>A superficial partial-thickness burn</i> should be managed conservatively. Cleanse the area, debride with soft gauze and then cover with <i>an antimicrobial petrolatum dressing.</i></p>						√	√					√	√		√	<p>Shaun explained what they needed to do and included unnecessary description about things such as the burn and the petroleum dressing.</p>

																		health greatly, not about him witnessing a woman got shot. [Shaun looked at Melendez straightly.]
EP13/ PLI/ N238	[In the Operation Room] Melendez: Give me a mucosal brush for a cellular sample. Kalu: Loading it now. Shaun: <i>How long does it take to get over a breakup with the woman you love?</i>					√												Shaun once again asked a sensitive question. It was not his business how Melendez coped up with his problem.
	[In the Operation Room] Melendez: ... I'm seeing a lot of inflammation but no smoke damage. Shaun: That makes <i>sense</i> .							√										Shaun's comment sounded weird. It sounded like "that makes sssssssense."
EP13/ PLI/ N239	[In Glassman's Office] Shaun: <i>I had breakfast by myself. Where were you?</i> Glassman: I'm sorry. Were we supposed to have breakfast this morning? I have an early consult. Shaun: <i>(Laughed)</i> Yes, we always have breakfast on Mondays.							√						√	√			Shaun seemed to be upset because Glassman didn't join him for breakfast. But his voice was meek and flat. [Shaun looks around and laughs at something that is not worth laughing.]
EP13/ PLI/ N240	[In Glassman's Office] Glassman: We do? Shaun: <i>Every Monday. Every Monday.</i>							√					√	√		√		Shaun's voice sounded high at the first sentence and low at the end. [Shaun looked around with limited expression. His body posture was not steady.]
EP13/ PLI/ N241	[In Glassman's Office] Glassman: Well, I guess our streak has been broken then, huh? Shaun: <i>If someone punctures the bronchus during a routine bronchoscopy. That's a mistake, right?</i>	MR											√		√			Shaun didn't answer and made a new topic. [He looked at Glassman. His face remained flat.]
EP13/ PLI/ N242	[In Glassman's Office] Glassman: Well, I can't imagine how it wouldn't be. Why? What did you do, Shaun?	MM												√	√			Shaun's answer was still vague because it didn't convey whether he did something wrong or not.

	Shaun: <i>I'm wondering if I need to report Dr. Melendez.</i>																	[Shaun looked at nothing in particular. There was a weird expression appeared when he talked.]
EP13/ PLI/ N243	[In Glassman's Office] Glassman: Dr. Melendez did that? Shaun: <i>The protocol is very clear. I need to report it. But I've seen how Jared is being treated. Will Dr. Melendez treat me badly if I report this?</i>	MM														√	√	Shaun didn't give clear answer and added more information. [Shaun made a really weird expression, probably trying to make a serious face. He looked around.]
EP13/ PLI/ N244	[In the Patient's Room] Naja: How? How could that happen? (Looked at Kalu) Shaun: <i>WHY did you lie? You said that you inhaled smoke, but there was no evidence of smoke. So, what do you gain by lying to your doctors?</i>	MR					√	IT										Shaun answered a question given to Kalu by asking another question to the patient, avoiding her inquiry. Shaun's first question sounded sing song and the other one is flat.
EP13/ PLI/ N245	[At the cafeteria] Shaun: Thank you for having breakfast with me (Smiled). Browne: My pleasure. Shaun: <i>People lie a lot, don't they?</i> Browne: No, i-I meant it, Shaun. I'm happy to spend time with you. Shaun: <i>There are seven reasons that I've thought of. There may even be more. Do people ever lie without reason?</i>	MM MR														√	√	Shaun's vague question created a misunderstanding. He even didn't try to clear the misunderstanding and kept talking about the topic. [Shaun looked around. His face didn't show anything.]
EP13/ PLI/ N246	[At the Cafeteria] Browne: No, she's not lying, Shaun. She loves him. Shaun: <i>(Smiled) She doesn't love him.</i>	MQL															√	Shaun asserted the woman didn't love her husband although he didn't have proof. It was just a speculation. [Shaun smiled at the bad speculation.]
EP13/ PLI/ N247	[At the Cafeteria] Browne: Well, I am, and— Shaun: <i>I think people-reading embraces personal biases. I think we should try to avoid biases.</i>							IT		√						√	√	Shaun interrupted Browne. He created a term "people-reading" which had a close meaning as reading social cues and reading mind or understanding human behavior.

EP13/ PLI/ N251	<p>[In the Patient's Room] Naja: Have you seen people change their flight because of you? Have people cursed you out before you've opened your mouth? Shaun: <i>I'm not prejudiced. I have evidence.</i> Naja: Nobody's prejudiced. Everybody has evidence. And I'm always brown. Maybe you're not so different (Suddenly felt pain). Shaun: You're sweating. Perspiration is a sign of dishonesty. Naja: (Troubled breathing) My chest. Shaun: Chest pain can be brought on by anxiety. Naja: (Troubled breathing). Shaun: Oh, but this time, you are having a heart attack (<i>Smiled</i>). EKG, stat!</p>	MR						√					√	√	√	√	<p>Shaun didn't respond well to Naja's explanation about her being accused of someone she was not through her questions. Shaun gave a wrong stop, so the sentence "I'm not prejudiced" becomes "I'm not, prejudiced" instead. [Shaun stared stiffly at her even when she was having a trouble breathing, however he smiled widely when he found out that she was indeed having a heart attack. He clumsily held a wire to help her.]</p>
EP13/ PLI/ N252	<p>[At San Jose St. Bonaventure Hospital] Melendez: Burning? Shaun: <i>From the caustic chemical!</i> Melendez: (Walked away) Murphy... Shaun: It's going through her system. Unlike thermal burns, chemical burns get worse over time (Chuckled). And it also explains the punctured bronchus. The caustic chemical thinned the bronchial walls. You did not make a mistake.</p>	MQL											√		√	√	<p>Shaun still believed that she was a terrorist when she was not. [Shaun smiled broadly when explaining something serious. She looked around and made some gestures when speaking.]</p>
EP13/ PLI/ N253	<p>[At San Jose St. Bonaventure Hospital] Shaun: <i>The treatments are diametrically OPPOSED. Antibiotics if it's infection, steroids if it's inflammation (Raises both of his hands). If she needs antibiotics and she needs steroids instead, it will suppress her immune system, causing the infection to flourish and kill her (Raises his hand again). If she needs steroids and we give her antiBIOTICS, then...</i> Melendez: I get it. We'd better be right.</p>		√				√						√	√		√	<p>When Shaun was talking, some of the words were stressed more than the rest and sometimes a long juncture happened. He also spoke as if he had a works out, which was weird because he didn't. He explained the effects of each treatment in long speech.</p>

																		Browne back then when he told her that people lied for several reasons. [Shaun looked stiffly at anything.]
EP13/ PLI/ N259	[In Glassman’s Office] Shaun: I don’t need a father. I hate fathers. Glassman: Right, so— Shaun: <i>I need a friend.</i>								IT					√		√		Shaun cut Glassman’s sentence. [Shaun didn’t look sad when Glassman seemed to reject him. He looked around when speaking.]
EP14/ PLI/ N260	[At San Jose St. Bonaventure Hospital] Reznick: (Looked at Kalu) Are you the autistic one? Kalu: No (Shook Reznick’s hand). Shaun: That’s me. <i>Dr. Shaun Murphy.</i> Reznick: Hi (Gave hand for hand shake). Shaun: <i>(Didn’t return the gesture).</i>						√						√		√			Not like the other doctors who introduced themselves casually, Shaun stated his full name while introducing himself to Reznick. [Shaun didn’t return Reznick’s gesture. He didn’t really look at Reznick and didn’t show pleasure of meeting her.]
EP14/ PLI/ N261	[At San Jose St. Bonaventure Hospital] Lim: Okay. Let’s see... (Opened the patient’s cover, shocked). Kalu: That’s a— Shaun: Penis.								IT					√		√		Shaun cut Kalu’s sentence. [Shaun looked at the patient. He didn’t look shocked when discover the patient’s true identity.]
EP14/ PLI/ N262	[At San Jose St. Bonaventure Hospital] Shaun: Hello. <i>Do you wear dresses?</i> Kalu: Murphy, don’t. Shaun: Quinn is a boy who thinks he’s a girl. I want to know why he thinks that. Quinn: Sometimes, I wear dresses, but sometimes I wear leggings. Shaun: <i>Do you like the color pink?</i> Quinn: I’m more of a purple girl. Shaun: <i>Do you play with dolls?</i> Quinn: Since I was 5, but I’m super into mermaids. Shaun: Do you take dance— Kalu: Murphy, 20 questions are up (Dragged Shaun). Shaun: <i>I only asked four. Do you wear perfume?</i>		FL			√										√		Shaun asked Quinn’s personal things. It was okay if he was his friend, however Quinn was his patient which meant that the questions might be a bit sensitive considering Quinn was a transgender. Also, Shaun didn’t get that what Kalu meant was that Shaun asked too many questions. [Shaun looked blankly at Quinn.]

	Kalu: It doesn't matter. The CT's ready. Let's go. Shaun: <i>Do you always paint your nail?</i>																
EP14/ PLI/ N263	[At San Jose St. Bonaventure Hospital] Kalu: You've got to quit calling her a "he." We're never going to win this competition with you disrespecting our patient. Don't they have transgender people in Wyoming? Shaun: <i>Okay. Transgender patient care was not part of my medical school curriculum. Was it part of yours?</i> Kalu: ... No. Shaun: (Looked at monitor) Quinn doesn't have appendicitis. He has testicular cancer.	MR											√		√		Shaun didn't give proper respond about the existence of transgender in Wyoming to Kalu and asked something new instead. [Shaun looked around. His face didn't show guilty or anything.]
EP14/ PLI/ N264	[In the Patient's Room] Quinn: Do you know how I got cancer? Lim: There are several possible causes, but I— Shaun: <i>Microlithiasis, mumps, hypospadias...</i> Lim: Murphy. Shaun: <i>Intraepithelial germ cell neoplasma, inguinal hernia, HIV... (Smiled).</i>	MQ							IT						√	√	Shaun interrupted Lim's explanation and began to give a list of what caused the cancer. However, Shaun's list lacked of evidence and explanation. [Shaun smiled when he listed the possible cause. He looked blankly at nothing.]
EP14/ PLI/ N265	[In the Patient's Room] Quinn: Fine? I... I don't want an Adam's apple or a deep voice or hair all over my body. You can't reverse that, can you? Lim: I'm afraid not. Quinn: (Hugged his Grandma). Shaun: <i>Girls have body hair too.</i>		FL										√		√		What Quinn really meant was that he didn't want to have as much hair as men usually did, but Shaun took it literally and clarified that women had body hair too. Quinn's statement was an overstatement. [Shaun looked at Quinn, expressionless.]
EP14/ PLI/ N266	[In the Patient's Room] Lim: I wish there were— Shaun: <i>If we do a bilateral orchiectomy, Quinn will have the testosterone level of a girl (Smiled).</i>								IT						√	√	Shaun cut Lim's explanation. [There was a glimpse of happiness when Shaun gave a bad option. He even smiled thinly while speaking.]
EP14/ PLI/	[At the Apartment] Kenny: (Opened Shaun's door) Hey. You like?	MR								√			√		√		Shaun didn't give respond whether he liked the channel or not, but cared

N267	<p>Shaun: <i>That door was locked.</i></p> <p>Kenny: Oh, I know. The cable guy had a cancellation, so he hooked me up, got us a two-for-one. Little thanks for being so chill earlier.</p> <p>Shaun: <i>Gracias, amigo.</i></p>															<p>more about Kenny who entered his room through his locked door. Shaun echoed the phrase “gracias, amigo” that he heard in the morning from Kenny.</p> <p>[Shaun mostly looked at Kenny. He didn’t look happy when hearing Kenny’s gratitude.]</p>
EP14/ PLI/ N268	<p>[At the Apartment]</p> <p>Kenny: A surgeon? Your stud doesn’t say surgeon, does it? It’s like, uh, Selena and Justin.</p> <p>Shaun: ...</p> <p>Kenny: It doesn’t really go together. Furniture’s from, like, a dozen different places—</p> <p>Shaun: <i>14.</i></p> <p>Kenny: (Smiled).</p> <p>Shaun: <i>14. The people in Casper knew I didn’t have money, so they make me things to make a home. The bookshelf is from Jennifer, the town librarian. My table and chairs are from Mr. Grady’s diner. The lamp is from Shery, who teaches Sunday School at High land Gurch. Dr. Glassman, he got me my bed.</i></p>	MM MQ		√					IT			√		√	<p>Shaun gave less information and too much information when talking to Kenny. What he meant by 14 was his age when he got helped to make a home. He then talked about who gave him what furniture in a long list.</p> <p>[Shaun walked clumsily to the things that were given by the people in Casper. Shaun looked around, looking happy.]</p>	
EP14/ PLI/ N269	<p>[In the Patient’s Room]</p> <p>Quinn: When my parents let me be me, I felt... Like I didn’t have to pretend anymore. I felt free, like when you’re in a pool and you just let go and float.</p> <p>Shaun: <i>I’m not a very good swimmer.</i></p>		FL											√	<p>Shaun didn’t get Quinn’s imagery about how it felt like to be free.</p> <p>[Shaun looked around.]</p>	
EP14/ PLI/ N270	<p>[In the Patient’s Room]</p> <p>Shaun: <i>Increased groin pain could be attributed to epididymitis, kidney stones, inguinal hernia... (Smiled)</i></p> <p>Kalu: The extra weight of the tumor could be causing testicle to twist on.</p>			√									√	√	<p>Shaun listed his hypothesis after hearing the nurse’s explanation.</p> <p>[Shaun looked straightly at nothing and smiled when he listed the causes.]</p>	
EP14/ PLI/	[At San Jose St. Bonaventure Hospital]			√		√						√	√	√	<p>Shaun was being insensitive towards Quinn’s grandma who tried to make</p>	

N271	<p>Quinn's Grandma: (Bringing a bouquet of pink flowers).</p> <p>Shaun: <i>Quinn doesn't like pink (Pointed at the flowers).</i></p> <p>Quinn's Grandma: Oh (Shocked).</p> <p>Kalu: Uh, I think she will like these.</p> <p>Quinn's Grandma: I hope so (Walked away).</p> <p>Shaun: <i>She's more of a purple girl.</i></p>																up with her grandson by giving him flowers. He then voiced to himself about Quinn who liked purple the best before walking away. [Shaun awkwardly pointed the flowers. He looked blankly at them, expressionless.]
EP14/ PLI/ N272	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Glassman: I can't imagine how it must feel to be so different on the outside than you are on the inside.</p> <p>Shaun: <i>(Walked away).</i></p> <p>Glassman: Hey, Shaun. I can give you a lift.</p> <p>Shaun: ...</p> <p>Glassman: We could grab a bite.</p> <p>Shaun: ... You said you can't be my friend. So, no, thank you <i>(Walks away).</i></p>							IG					√				Shaun walked away when Glassman was still talking. He didn't even respond to him or say goodbye before going. [Shaun didn't show any emotion when he listened to Glassman about the difficulty of being different.]
EP14/ PLI/ N273	<p>[At a Swimming Pool]</p> <p>Kenny: You're not gonna do any laps or nothing?</p> <p>Shaun: <i>No.</i></p> <p>Kenny: Then what are you doing?</p> <p>Shaun: <i>Understanding.</i></p>	MM						√								√	Shaun's first respond sounded sing song and the second one was vague. [Shaun was floating in the pool, staring at the sky seriously.]
EP15/ PLI/ N274	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Park: Nice to meet you <i>(Gave hand for handshake).</i></p> <p>Shaun: <i>(Didn't return the handshake).</i></p> <p>Reznick: Welcome back. How was Costa Rica?</p> <p>Park: Beaches were awesome. Monkeys were horrible. Little bastards stole my new camera and a pair of—</p> <p>Shaun: <i>How old are you?</i></p> <p>Park: ... 45.</p> <p>Shaun: <i>That's even older than Dr. Melendez.</i></p>					√		IT			√		√		√	Shaun interrupted the conversation between Reznick and Park by asking an inappropriate question about Park's age. In America, asking age was impolite, especially to new acquaintance. He even commented that he was old. This was impolite, particularly this is the first time Shaun met him. [Shaun didn't return Park's hand. He looked around and didn't show any expression.]	

EP15/ PLI/ N275	[At San Jose St. Bonaventure Hospital] Melendez: Now that we all know each other, Reznick and Browne have dibs on cases this week. You make your picks? Reznick: Yes. Browne: Definitely. Shaun: <i>Is there karaoke?</i>	MR										√	√	√	√	Shaun asked something that was not related to the recent topic. He was still interested in the previous topic about the party. [Shaun raised the brochure hesitantly without pointing at it. He didn't look at anything in particular and his expression remained the same.]
EP15/ PLI/ N276	[In the Patient's Room] Reznick: Spirit was born with ectopia cordis. She's been— Shaun: Why didn't they repair it when she was an infant?							IT					√		√	Shaun cut Reznick's explanation. [Shaun looked around, no expression could be found on his face.]
EP15/ PLI/ N277	[In the Patient's Room] Shaun: This is an interesting view. I can see the AORTIC ARCH.						√						√		√	Shaun was too excited and it changed his voice to sound more high-pitched at the end. [Shaun tried to touch the patient before Reznick prohibited him. He looked at the patient intensely.]
EP15/ PLI/ N278	[In the Patient's Room] Reznick: You've never hugged anyone? Not even your parents? Spirit: Kissed by my parents, high-fived by my parents, but nope, no hugs. It's just too risky. Reznick: (Nodded understandingly). Shaun: <i>Hugs make me feel TRAPPED.</i>			√			√						√		√	Shaun commented about him for not liking a hug. There was a long pause before he finished the word "trapped." [Shaun looked at no one, expressionless.]
EP15/ PLI/ N279	[At San Jose St. Bonaventure Hospital] Reznick: You gonna buy a tux or rent one? The fundraiser is black tie. Shaun: <i>I have a suit. It's new. I bought it for my resident interviews.</i>	MQ												√	√	Shaun gave more information than he was asked to. [Shaun looked around. His expression was limited.]
EP15/ PLI/ N280	[At San Jose St. Bonaventure Hospital] Reznick: (Chuckled) It doesn't matter how new it is. It's not a tux.	MM	FL				√							√	√	Shaun gave unclear respond although it could be concluded that he didn't like to wear uniform unless it was for

	<p>Shaun: <i>Wearing a uniform at work reassure patients. Wearing a uniform at a party does nothing but make you hot and uncomfortable.</i></p> <p>Reznick: This party is work. Get a tux. And not a crappy one from outlet store. Get fitted by a pro and spend a minimum of 2 grand. You're gonna meet rich people who can help your career, and they're not gonna want to help some slob in a—</p> <p>Shaun: <i>I'm not a slob. No, I'm very clean and make sure my clothes are never wrinkle. And it's too big.</i> (Looeds at monitor) Her heart. It's enlarged 53% since her last exam.</p>																work. Shaun took Resnick's comment about him being a slob seriously when she was just exaggerating. The clause "it's too big" and the sentence before that were uttered without pause, so it made Shaun as if was still talking about him not being a slob, not about the patient's heart that was too big to be replaced back to the rib cage. [Shaun looked around. His face didn't show frustration or anger when Reznick calling him a slob.]
EP15/ PLI/ N281	<p>[In the Patient's Room]</p> <p>Reznick: When you started menstruating, the increased estrogen caused pulmonary hypertension, which isn't a surgical issue in itself, but along with your atypical vascular system—</p> <p>Shaun: <i>Your heart's grown too big.</i></p>								IT								Shaun interrupted Rezninck's explanation.
EP15/ PLI/ N282	<p>[In Lim's Office]</p> <p>Lim: An artificial sternum. That would actually grow along with the patient.</p> <p>Shaun: (Thinking) The surgery isn't reversible. If it doesn't work, we can't just move her heart back to where it was (Pointed at a book).</p> <p>Reznick: It would have her to have a life.</p> <p>Shaun: <i>She has a life, and she'll be healthy as long as she stays out of crowds, doesn't hug anyone or do anything where she might fall.</i></p>		LI									√	√		√	What Reznick meant was that the surgery could make her had a better and happier life, but Shaun took it that the patient was already alive because she was indeed alive. [Shaun clumsily pointed at the book. His eyes wandered around while his face remained the same even though he talked about the risk of the surgery.]	
EP15/ PLI/ N283	<p>[At the Operation Room]</p> <p>Shaun: <i>You wear very stylish clothes.</i></p> <p>Andrews: (Looked at his operation gown) Um, thank you. I assume you mean when I'm not in surgery.</p>	MM						√									Shaun gave vague compliment about what clothes that were stylish until Andrews pointed that out. The way Shaun talked was flat and high

	<p>Jessica: (Surprised) I don't remember. And just so you know, that's not the best question for an event like this. Shaun: <i>Why not?</i></p>																not?" uttered by Shaun sounded like "Why, not?" instead. [Shaun looked around and sometimes stared at Jessica. His face remained the same.]
EP15/ PLI/ N289	<p>[At the Hall] Jessica: Can I buy you a drink? Shaun: <i>I don't like tequila anymore. It makes me vomit.</i></p>	MR								√			√		√		Shaun gave answer that was unrelated to the topic. He called an alcohol drink as tequila, one of types of alcoholic drink. [Shaun looked around. His face was limited although he complained about the drink.]
EP15/ PLI/ N290	<p>[At the Hall] Reznick: There you are. And nicely done. You got the look. Now you got to put it to use. There's work to do. Mingle. Shaun: Okay. Reznick: I see you, Dr. Chen. She runs the Rivington Fellowship at the Mayo Clinic. I wonder who brought her here. Shaun: I don't know. <i>Mingle.</i></p>									√		√	√		√		Shaun echoed the word that Reznick just had said. [Shaun's body posture was not steady. He looked around, expressionless.]
EP15/ PLI/ N291	<p>[At the Hall] Andrews: Apparently I was wrong. I told Dr. Murphy he'd be fine renting a tuxedo. Clearly, he chose not to listen. Shaun: <i>I'm sorry.</i></p>		FL										√		√		Shaun took Andrews's irony seriously, so he said sorry for him. [Shaun looked at nothing in particular with no expression on his face.]
EP15/ PLI/ N292	<p>[At the Hall] Andrews: How's the golf gone, Jake? Jake: Oh, same as always. Shaun: <i>I Know how that is.</i> Andrews: You play golf, Murphy? Shaun: I have, <i>but I don't like it.</i> Andrews: None... None of us do. You know what they say... "Golf is a good walk spoiled."</p>	MQ	J										√		√		Andrews and Jake were having a conversation and Shaun butted in. Also, he gave more information about him not liking golf to Andrews. While everyone was laughing at the joke, Shaun just stood and didn't understand it. "Golf is a good walk spoiled" meant that

	<p>my mother. And 3 days later, she came back from Reno with a designer dress and a guy named Ricky. I never got the laptop.</p> <p>Park: (Felt guilty).</p> <p>Shaun: <i>My mom made pancakes. They were good.</i></p>																
EP16/ PLI/ N296	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: Hunter's <i>initial spinal cord</i> injury from the motorcycle accident that caused his paralysis was at T1, but that part looks almost completely normal now.</p> <p>Browne: Hunter's phantom pain is real.</p>						√						√		√		<p>There was a long pause when Shaun utters "initial spinal cord" so it became "initial, spinal cord" instead. [Shaun focused on the monitor. His expression didn't show surprise like the others.]</p>
EP16/ PLI/ N297	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: If this works, after a considerable amount of physical therapy you may be able to walk, <i>but that doesn't mean you'll be a very good dancer. After years of atrophy from not moving your legs, you will likely be very bad.</i></p>		LI			√							√		√		<p>Shaun commented about Hunter's possibility of not being able to dance well was because Hunter's words pertaining how good his wife was at dancing and he wanted to dance with her for the first time to make her happy. But Shaun didn't think about the happiness part, so he thought Hunter wanted to be a good dancer for his wife.</p> <p>This conversation could be regarded as impolite because it underestimated Hunter.</p> <p>[Shaun looked around while following Hunter. His face remained the same.]</p>
EP16/ PLI/ N298	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Hunter: My brother-in-law's on the spectrum. So's my assistant. I make it a priority of hiring people with disabilities. Let me guess, when you first started working here, no one believed you.</p> <p>Shaun: <i>They didn't know me. They didn't know that I was going to be a good surgeon.</i></p>		LI												√		<p>Shaun didn't get the meaning behind Hunter's statement. What Hunter meant was that nobody believed Shaun because he was autistic, being a part of those with disability. But Shaun thought that nobody believed</p>

	Hunter: No. You were different. I guarantee you every other doctor started with a basic level of respect. It's implied they're competent. We waste our time and energy trying to prove that we belong.																him because he was still a new surgeon at the hospital. [Shaun looked straightly while walking. He rarely looked at Hunter.]
EP16/ PLI/ N299	[At San Jose St. Bonaventure Hospital] Hunter: Why I want this surgery so bad. You'd jump at a cure for autism, wouldn't ya? Shaun: <i>There isn't a cure for autism.</i>		FL													√	Shaun took Hunter's words seriously, while it was just imagery. He actually asked if Shaun would do anything to cure his disability. [Shaun looked around.]
EP16/ PLI/ N300	[At San Jose St. Bonaventure Hospital] Hunter: There are a lot of reasons to marry me, you know? I'm sure there are a lot of reasons to marry you. Shaun: Yes. I'm organized, I have <i>excellent visual spatial memory</i> , and Lea says I'm refreshingly honest and fair.															√	Shaun specifically described what memory he was good at. [Shaun smiled thinly while looking around.]
EP16/ PLI/ N301	[At San Jose St. Bonaventure Hospital] Park: (Talking to Browne) Every time you get in your car... Hell, every time you leave your home you take a risk something bad could happen. But you do it anyway, you know, to make yourself better, to make the world better, sometimes just to have fun. Shaun: <i>Sometimes just to go to a carnival.</i>																Browne and Park had a serious conversation and Shaun butted in to give his opinion. [Shaun was fixated at a scan. His face was neutral.]
EP16/ PLI/ N302	[At the Apartment] Kenny: Uh, Celeste isn't coming. She broke up with me. I hate her. But I'm gonna let that ruin our night. That's what friends are for. They got each other's backs, rain or shine. By the by, I found a \$ 20 in your battery drawer, so I got us Chinese food. Don't thank me. Shaun: <i>I don't like Chinese food.</i> Kenny: Aw, come one now. Trust me, everybody likes Ma Jong's Kung Pao. (Gave the food to Shaun) There you go. I'm pretty torn up about that Celeste thing. She was a real keeper. Shaun: <i>You said you hated Celeste.</i>		FL			√							√	√	√	√	Although the food was bought with Shaun's money, however Shaun didn't thank Kenny for going all the way through to buy it for him before stating his dislike. Kenny was just exaggerating about hating Celeste after she dumped him. People had tendency to hate people they loved after being rejected or hurt. But, Shaun took it literally. [Shaun looked at Kenny stiffly. He most of the time had no expression

	<p>Kenny: I do. I-I hate her 'cause... I don't know... I kind of love her.</p> <p>Shaun: <i>(Ate) This tastes terrible (Smiled).</i></p>																until he clumsily tasted the food and smiled at it's terrible taste.]
EP16/ PLI/ N303	<p>[At the Apartment]</p> <p>Kenny: Yeah, You got 4 arms, but you're naked, so here we go.</p> <p>Shaun: <i>I gave you a pneumothorax.</i></p>									√							Shaun and Kenny were playing Mortal Combat. When Shaun's character hit Kenny's on the chest and caused bleeding, he called it pneumothorax, a term used for chest injury.
EP16/ PLI/ N304	<p>[At the Apartment]</p> <p>Kenny: Ah, I didn't realize how bloody this game was. Ooh, a fireball. I got you there. Have you played this before?</p> <p>Shaun: <i>That looks like a spinal fracture.</i></p>	MR								√							Shaun didn't give relevant answer for Kenny's question. They were still playing game at the moment and Shaun used medical term for a broken back when Kenny's character was being beaten.
EP17/ PLI/ N305	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Andrews: (Chuckled) Okay, great. So unless there are any other questions—</p> <p>Shaun: <i>Do you want to be a comedian?</i></p> <p>Gretchen: (Looked at Shaun).</p> <p>Shaun: People getting your jokes must be very important to you <i>if you think it's worth the risk of dying elective surgery.</i></p>	MQ						IT					√		√	Shaun interrupted Andrews. Shaun told Gretchen something unnecessary about the risk when Park and Andrews already gave her hope with their confidence. [Shaun looked at Gretchen blankly. His face was emotionless although he had a bad news.]	
EP17/ PLI/ N306	<p>[At the Cafeteria]</p> <p>Shaun: <i>Okay.</i></p> <p>Glassman: Hey, Shaun.</p> <p>Shaun: Oh. Hello.</p> <p>Glassman: I haven't seen you in ages. What's... What's new?</p> <p>Shaun: <i>I'm buying an apple (Showed the apple).</i></p>	MR		√				√				√	√		√	Shaun didn't talk with anyone when he said "okay" in a sing song tone. When Glassman greeted him, Shaun gave the respond that Glassman didn't ask. [Shaun looked at Glassman and then looked around. He didn't show any expression when finally is able to meet his mentor. He awkwardly showed the apple he bought.]	

EP17/ PLI/ N307	[At the Cafeteria] Glassman: What else is new? Shaun: <i>You didn't want to be friends.</i>	MR												√		√	Shaun avoided the question and reminded Glassman that they were no longer friends. [Shaun looked at Glassman stiffly, expressionless.]
EP17/ PLI/ N308	[At the Cafeteria] Glassman: We can talk. You know, we can talk about sports, we can talk about weather, we can talk about— Shaun: <i>Debbie?</i> Glassman: Why would you want to talk about Debbie? Shaun: <i>Debbie was flirting with you.</i>	MR MQL							IT					√		√	Shaun cut Glassman's sentence. He ignored Glassman's question and assumed that Debbie flirted with Glassman although there was no evidence. His accusation was based on how Debbie acted around Glassman and the amount of payback she gave to him, which was more than it was supposed to be. [Shaun looked at Glassman blankly. There was no expression on his face.]
EP17/ PLI/ N309	[At the Cafeteria] Glassman: I think she's just trying to be friendly. Shaun: <i>She gave you an extra dollar in exchange (Took the money). And the fact you didn't notice means you like her, too.</i>	MQL							TT							√	Shaun began to speak when Glassman had not finished his sentence. Then Shaun accused Glassman for liking Debbie based on doubtful proof. He thought Glassman liked Debbie based on how the old man wasn't aware that the payback was more than enough. [Shaun didn't really look at Glassman. There was amusement on his face.]
EP17/ PLI/ N310	[In the Patient's Room] Gretchen: My dad said that you're on the spectrum... That's why you said that about people getting my jokes. Shaun: <i>People always get my jokes.</i> Gretchen: Then you're lucky. Shaun: That was a joke.	MQL												√		√	Shaun lied about people getting his joke to make a joke. [Shaun looked at Gretchen. His face didn't show any emotion although he tried to make a joke.]

EP17/ PLI/ N311	[In the Patient's Room] Gretchen: They call me "Resting Gretch Face." Shaun: "Shaun the Moron." Gretchen: ... Shaun: <i>Not very witty... I'm obviously quite smart.</i>		LI														√	Shaun was labeled moron for his weakness of understanding human emotion and feeling, but Shaun thought it was his brain capability. Intellectually, Shaun was really smart, but he was emotionally unwitty. [Shaun looked around, looking happy to tell her that he was smart.]	
EP17/ PLI/ N312	[In the Patient's Room] Gretchen: You really think this surgery's too risky? Shaun: <i>Possible complications, include embolism, hemorrhage, collateral paralysis, asymmetry, brain damage and stroke (Smiled). It's also expensive and medically unnecessary.</i>	MQ															√	√	Shaun gave more information than enough. Instead of answering with "yes" or "no", he told her the possible risks of the surgery, and the expense of it. [Shaun looked happy when listing the possible risks, especially the stroke part. His eyes stared stiffly.]
EP17/ PLI/ N313	[In a Vacant Room] Andrews: Gretchen's father is very upset. It seems you talked her out of the surgery. Shaun: <i>No, I didn't talk her out of it or talk her anywhere. I just gave her the list of potential risks. Embolism, hemorrhage, collateral paralysis, asymmetry, brain damage, and stroke (Smiled).</i>		I														√	√	Shaun didn't get the idiom. Actually, "talking out of something" meant persuading people not to do something. He didn't think that Andrews accused him of persuading Gretchen to change her mind about the surgery, but he thought he was accused of talking with Gretchen outside of surgery. [Shaun didn't look at Andrews. He smiled when he said stroke, which was weird because it was a bad possibility.]
EP17/ PLI/ N314	[In a Vacant Room] Andrews: I feel good, you feel good... Everybody likes smile.		FL			√								√	√		√	Shaun took Andrews's hyperbole seriously. There was no 100% guarantee that all people loved smile. People who were lonely and sad	

N319	<p>Shaun: <i>She should have protective airway reflexes, motor activity, and a return of consciousness. I need to page Dr. Andrews, stat.</i></p>																<p>what Gretchen needed. This unclear monologue implied that Gretchen's condition was bad because there was a possibility she couldn't wake up. He weirdly talked lowly when he realizes to call Andrews. [Shaun started to panic while staring at Gretchen.]</p>
EP17/ PLI/ N320	<p>[At San Jose St. Bonaventure Hospital] Kalu: True. But I can't exactly ask Claire for her advice, and I barely know Park, and Morgan— Shaun: <i>Morgan would be bad.</i> Kalu: Very bad. Shaun: ... <i>I'm a person.</i></p>	MM						IT								√	<p>Shaun interrupted Kalu's sentence. He vaguely said that Kalu could talk to him about his problem by saying he was a person. Kalu needed some minutes to make sense of his statement. [Shaun stared at Kalu's back.]</p>
EP17/ PLI/ N321	<p>[At San Jose St. Bonaventure Hospital] Kalu: Uh, so I think Celez, my burn patient, has feelings for me, and I... May have feelings for her, too. But there is a chance her feelings aren't real, and if they are real, then they may not be permanent. Shaun: ... (Listening) Kalu: Uh, you know, it's kind of textbook transference... She's grateful and she's vulnerable. Shaun: ... (Listening) Kalu: And all I've ever known in my life is unrequited love... From Claire and from my parents. And that makes me vulnerable too. Shaun: ... Kalu: (Waited for Shaun to respond). Shaun: ... Kalu: (Returned to his computer). Shaun: You should <i>call in sick</i>. Lea says <i>calling in sick</i> is all you need to gain superior wisdom and knowledge. She was right.</p>		IR					IG IG		√						√	<p>Shaun said "call in sick" when it meant "take a trip." He misunderstood Lea's advice back then when she actually was talking about taking trip, but to get that Shaun should call in sick first. Shaun didn't give respond when Kalu paused a little to hear him give advice. [Shaun stared blankly. He didn't that focus on Kalu.]</p>

EP17/ PLI/ N322	[In the Patient's Room] Gretchen's Dad: What are you doing? Shaun: Corneal reflex. <i>It's mediated by nasociliary branch of the ophthalmic branch.</i>	MQ												√		√	Shaun gave more information about what corneal reflex was. [Shaun stared at nothing in particular. His expression was flat.]
EP17/ PLI/ N323	[In the Patient's Room] Gretchen's Dad: Thank y... (Tried to hug Shaun). Shaun: <i>(Backed off).</i> Gretchen's Dad: Oh. Thank you, Dr. Murphy (Offered his hand for handshake). Shaun: <i>(Ignored him).</i>								IG			√		√		√	Shaun didn't respond to the man's gratitude. [Shaun didn't return any gestures that the man offered. His face was still flat although he knew Gretchen would be okay. He looked for the exit.]
EP17/ PLI/ N324	[In the Patient's Room] Andrews: She seemed like a good template. Gretchen: (Smiled). Shaun: (Pointed at Gretchen's face) <i>There is no Duchenne Marker. Her smile is not real.</i>					√								√			Shaun was impolite for telling his patient had an insincere smile. [Shaun didn't show happiness like the others in the room.]
EP17/ PLI/ N325	[At the Apartment] Kenny: Oh, hey. Uh, my homies decided to pop by and, uh, play some Texas Hold 'em, so I'm gonna have to take a rain check on that pizza night. Shaun: <i>You got a 70 inch flat-screen too.</i>	MR														√	Shaun was distracted to the TV, so he didn't give relevant respond to Kenny. [Shaun gazed stiffly at the TV.]
EP17/ PLI/ N326	[At the Apartment] Shaun: Okay (Wanted to come inside Kenny's room). Kenny: (Restrained him) Oh, um, sorry, amigo. It's four-player Texas Hold 'em. Shaun: <i>I don't like poker anyways.</i>		IR														Shaun didn't get Kenny's implied request that Shaun couldn't join them and couldn't come to his apartment for today because all of Kenny's friends were visiting him.
EP18/ PLI/ N327	[In Glassman's Office] Glassman: W-Why Shaun? What happened? Shaun: <i>People NEED friends.</i>	MM						√						√		√	Shaun gave vague answer regarding why he wanted to be friends with Glassman again. It wasn't actually about people, but it was Shaun who was in the need of having friend. He wanted to make up with Glassman. His utterance had abnormal juncture and pitch.

	<p>Glassman: You asked me to get a second opinion. I got a second opinion. You asked me to get more imaging. I got more imaging. Shaun, you have to accept—</p> <p>Shaun: <i>No, I don't accept.</i></p>																[Shaun's posture was not firm. He looked around.]
EP18/ PLI/ N336	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: I said doctors make mistakes...</p> <p>Glassman: Yeah, they made a mistake. I have less time than we even thought!</p> <p>Shaun: ... <i>And they made a mistake. Shaun was right. Shaun was right. Imaging is unreliable.</i></p>							TT	√			√		√	√		<p>Shaun was talking when Glassman was still speaking. The phrases "Shaun was right. Shaun was right" seemed to be gotten from other people because he never addressed himself as "Shaun."</p> <p>[Shaun had a weird expression when frustrated. He touched his head awkwardly. He looked at nothing in particular.]</p>
EP18/ PLI/ N337	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Glassman: That imaging that you asked me to get.</p> <p>Shaun: <i>I-Imaging is subject to interpretation. Yes, studies have shown that experts rely on... on... on subjective measures based on experience rather than object...</i></p>							TT							√		<p>Shaun talked when Glassman was still talking.</p> <p>[Shaun stared a book intensely before walking to the glass door.]</p>
EP18/ PLI/ N338	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Glassman: No more.</p> <p>Shaun: <i>Rather THAN objective...</i></p> <p>Glassman: No more, no.</p>							√	TT								<p>The "than" word was stressed than normal. Shaun kept talking although Glassman asked him to stop.</p>
EP18/ PLI/ N339	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Shaun: You can't do a biopsy to confirm because many tumors look alike.</p> <p>Glassman: (Threw the books).</p> <p>Shaun: Some are treatable. <i>Some ARE curable.</i></p> <p>Glassman: Stop, will ya!?</p> <p>Shaun: <i>Some are curable. They are curable.</i></p> <p>Glassman: Stop please will ya!? Stop, stop, stop talking! Stop!</p>							√	TT					√	√		<p>First, Shaun stressed the word "are" more than the rest. And at the end, the way he spoke became weird. They sounded like a loud murmur. He also kept talking when Glassman begged him to stop.</p> <p>[Shaun made a weird expression to show his frustration. He looked straightly to every angle he looked at.]</p>

EP18/ PLI/ N340	<p>[At San Jose St. Bonaventure Hospital] Glassman: No, you're not. You're not helping. I don't need theories. I don't need white boards. I don't need doctors! I don't want to think about the tumor! I don't want to think about dying! You know what I want? You know what I actually want? I want to... I want to... I want to go on a long drive somewhere. I want to... I want to eat pancakes. I want to watch football. Shaun: <i>It's not football season.</i></p>		LI										√		√	<p>Shaun didn't get that Glassman wanted to have fun, not really watching football. [Shaun looked at nothing in particular. His face was now limited.]</p>
EP18/ PLI/ N341	<p>[At a Carnival] Glassman: And I remember thinking, "This is the moment... That I know will be in my mind when I... When I... When I close my eyes to die." Only thought that she'd be sitting there, right next to me, and I'd hear her say it one more time. Shaun: <i>I lost my toy scalpel. The one that Steve gave me.</i></p>	MR														<p>Shaun created a new topic and didn't respond to Glassman talking about his sweet memory with his daughter.</p>
EP18/ PLI/ N342	<p>[In Melendez's Office] Melendez: Murphy, any thoughts here? It is kind of your ass on the line. Shaun: (Thinking) <i>I know why Caden has DIC</i> (Raised his finger). Melendez: ...</p>			√									√		√	<p>Shaun voiced that he knew what happened to Caden after he imagined the possibility. Also, Shaun paused at the wrong word resulting the change in meaning because it became "I know why, Caden has DIC" instead of "I know why Caden has DIC." The meaning was distorted from "Shaun knew the cause of Caden's DIC" into "He knew something happened because of Caden's DIC". [Shaun clumsily raised his finger. He looked at something blankly.]</p>
EP18/ PLI/ N343	<p>[In Melendez's Office] Shaun: I squeezed the artery between two clamps. I must have ruptured the aorta wall, causing a pseudo-aneurysm. It was my mistake. And also... <i>I have to make a bowel movement</i> (Walked outside the room).</p>	MQL											√	√	√	<p>Shaun was lying about him going to a restroom. He actually was going to Glassman's office.</p>

	Park: He's lying. He's gonna puke.																	[Shaun awkwardly raised his finger. He didn't show guilty of making a mistake while staring at no one.]
EP18/ PLI/ N344	[In Glassman's Office] Shaun: <i>I have the answer.</i> Glassman: Shaun, I hope you're referring to your patient, but due to the fact that you're here, pretending to be in the bathroom, I kind of doubt that. Shaun: <i>Yes, it's your answer (Showed a book).</i>	MM						TT				√						Shaun made a vague statement. He didn't state clearly what answer he had. Then he started talking when Glassman was still speaking. [Shaun showed the book towards Glassman awkwardly.]
EP18/ PLI/ N345	[In Glassman's Office] Shaun: <i>An open cranial would tell us what's wrong. But there are blood vessels in the way. The biopsy would cause an aneurysm or a bleed. But if we go through your nasal cribriform plate, we can cross the tentorium on the contralateral side and avoid all those blood vessels. We can do a biopsy through your nose.</i> Glassman: ... Shaun: You can't die, too. Glassman: ... Shaun: <i>I have to throw up.</i>	MQL		√									√		√			Shaun made a long speech while reading and told Glassman what he thought they could do to get the more accurate result of Glassman's disease. Moreover, Shaun lied. He didn't go to throw up, but went back to see the others. [Shaun most of the times looked at a book he was reading, and sometimes he looked at Glassman. He didn't showed sadness and determination even though he wanted to help Glassman to keep on living.]
EP18/ PLI/ N346	[In Melendez's Office] Park: Protocol would seem to favor the bitch over the friend. Reznick: Thanks? Shaun: (Opened the door) <i>I threw up.</i>	MQL																Shaun lied about him throwing up. He was from Glassman's office and didn't stop at the restroom to throw up.
EP18/ PLI/ N347	[In Melendez's Office] Kalu: Okay. We report it. We get the investigation, make sure nothing like this ever happens again. But tell them I did it. Shaun: <i>They'd fire you, too.</i>							√					√		√			There was no surprise in Shaun's voice, just flat as usual. [Shaun looked around to find his scalpel. His face stayed flat.]
EP18/ PLI/	[In Melendez's Office]	MR						√					√		√			Shaun had another topic to convey, which was about his scalpel, so it

N348	<p>Melendez: Can we get back to the medicine? Caden is still alive. If we can keep it that way, there won't be an M&M review. Which means no one will be asking questions, and no one will have to give answers. It all goes away. If Caden dies, we tell the truth, and face the consequences together.</p> <p>Shaun: <i>No. No. I thought I'd found my scalpel.</i></p>																was not relevant to the current topic. The way Shaun said "No. no..." was sing song. [Shaun raised a cup he found. He looked around stiffly.]
EP18/ PLI/ N349	<p>[At San Jose St. Bonaventure Hospital]</p> <p>Kalu: Murphy, if we don't—</p> <p>Shaun: <i>We should insert an endovascular graft through his leg instead. Fix it from the inside out.</i></p>							IT				√			√		Shaun interrupted Kalu's objection. [Shaun awkwardly held a pen. He looked straightly at nothing in particular.]
EP18/ PLI/ N350	<p>[In Glassman's Office]</p> <p>Shaun: Is that from an IV? <i>You did the biopsy.</i></p> <p>Glassman: I did. I have a low-grade glioma.</p>						√					√	√		√		Shaun's voice was flat although he was surprised and relieved that Glassman took a second opinion for rechecking his cancer. [Shaun held his toy scalpel awkwardly. His looked at Glassman's hand. His face didn't show happiness.]
EP18/ PLI/ N351	<p>[In Glassman's Office]</p> <p>Shaun: Not a GBM? I told you...</p> <p>Glassman: Cancer, Shaun. It's still cancer. I have to undergo brain surgery. Which is really scary because I'm not the one performing it. Five days a week for six weeks of radiation, 10 more weeks of chemotherapy.</p> <p>Shaun: And then?</p> <p>Glassman: And then... With a little luck... You and I can go to the Super Bowl next season.</p> <p>Shaun: <i>(Hugged Glassman).</i></p>											√					[Shaun walked towards Glassman and hugged him awkwardly.]
EP18/ PLI/ N352	<p>[In Glassman's Office]</p> <p>Shaun: Yes, first I have to tell Dr. Andrews about the mistake I made.</p> <p>Jessica: Shaun, you can't.</p> <p>Shaun: Protocol is clear, and reporting saves lives.</p>		IR									√	√		√		Shaun didn't get Jessica's implied request to not report his mistake to Andrews because Caden was alright and nobody would find out the mistake he made.

	<p>Jessica: And I hear Caden is on the road to the recovery, so your mistake couldn't have been too bad.</p> <p>Shaun: <i>No, I made a mistake.</i></p>																<p>[Shaun didn't stand steadily. He looked around when talking. His expression was limited.]</p>
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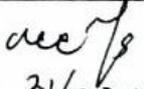


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PERMOHONAN PERSETUJUAN JUDUL SKRIPSI

Dengan ini saya:

Nama Mahasiswa : Ayu Larasati
NPM : 1502050162
Prog. Studi : Pendidikan Bahasa Inggris

Judul	Diterima
Pragmatic Language Impairment in Autistic-Savant Person Portrayed in <i>The Good Doctor</i> Film	 21/3/2015

Bermohon kepada Dosen Pembimbing untuk mengesahkan Judul yang telah diajukan kepada Prodi Pendidikan Bahasa Inggris.

Disetujui oleh
Dosen Pembimbing


Yusriati, SS, M.Hum

Medan, 20 Maret 2019
Hormat Pemohon,


Ayu Larasati



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Form : K - 1

Kepada Yth: Bapak Ketua & Sekretaris
Program Studi Pendidikan Bahasa Inggris
FKIP UMSU

Perihal : **PERMOHONAN PERSETUJUAN JUDUL SKRIPSI**

Dengan hormat yang bertanda tangan di bawah ini:

Nama Mahasiswa : Ayu Larasati
NPM : 1502050162
Prog. Studi : Pendidikan Bahasa Inggris
Kredit Kumulatif : 154 SKS

Persetujuan Ket./Sekret. Prog. Studi	Judul yang Diajukan	IPK=3,72 Disahkan oleh Dehan Fakultas
	Pragmatic Language Impairment in Autistic-Savant Person Portrayed in <i>The Good Doctor</i> Film	
	The Analysis of Double Entendre and Sarcasm Found in the Jokes within 9 Hours, 9 Person, 9 Doors Game	
	The Analysis of Idiomatic Expressions Found in Phoenix Wright: Ace Attorney Trilogy	

Demikianlah permohonan ini saya sampaikan untuk dapat pemeriksaan dan persetujuan serta pengesahan, atas kesediaan Bapak saya ucapkan terima kasih.

Medan, 20 Maret 2019
Hormat Pemohon,

Ayu Larasati

Keterangan:

Dibuat rangkap 3 : - Untuk Dekan/Fakultas
- Untuk Ketua/Sekretaris Program Studi
- Untuk Mahasiswa yang bersangkutan



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Form K-2

Kepada Yth : Bapak Ketua/Sekretaris
Program Studi Pendidikan Bahasa Inggris
FKIP UMSU

Assalamu'alaikum Wr. Wb

Dengan hormat, yang bertanda tangan di bawah ini :

Nama Mahasiswa : Ayu Larasati
NPM : 1502050162
Program Studi : Pendidikan Bahasa Inggris

Mengajukan permohonan persetujuan proyek proposal/risalah/makalah/skripsi sebagai tercantum di bawah ini dengan judul sebagai berikut :

Pragmatic Language Impairment in Autistic-Savant Person
Portrayed in *The Good Doctor* Film

Sekaligus saya mengusulkan/menunjuk Bapak/Ibu :

1. Yusriati, S.S, M.Hum

Sebagai Dosen Pembimbing Proposal/RisalahMakalah/Skripsi saya.

Demikianlah permohonan ini saya sampaikan untuk dapat pengurusan selanjutnya. Akhirnya atas perhatian dan kesediaan Bapak/Ibu saya ucapkan terima kasih.

Medan, April 2019
Hormat Pemohon,

Ayu Larasati

Keterangan:

- Dibuat rangkap 3 : - Untuk Dekan/Fakultas
- Untuk Ketua/Sekretaris Program Studi
- Untuk Mahasiswa yang bersangkutan



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Jln. Mukhtar Basri BA No. 3 Telp. 6622400 Medan 20217 Form : K3

Nomor : 060 /II.3/UMSU-02/F/2019
Lamp : ---
Hal : Pengesahan Proyek Proposal
Dan Dosen Pembimbing

Assalamu`alaikum Warahmatullahi Wabarakaatuh

Dekan Fakultas Keguruan dan Ilmu Pendidikan Universitas Muhammadiyah Sumatera Utara menetapkan proyek proposal/risalah/makalah/skripsi dan dosen pembimbing bagi mahasiswa yang tersebut di bawah ini :

Nama : Ayu Larasati
N P M : 1502050162
Program Studi : Pendidikan Bahasa Inggris
Judul Penelitian : Pragmatic Language Impairment in Autistic-Savant Person Portrayed in the Good Doctor Film.

Pembimbing : Yusriati, SS, M.Hum

Dengan demikian mahasiswa tersebut di atas diizinkan menulis proposal/risalah/makalah/skripsi dengan ketentuan sebagai berikut :

1. Penulis berpedoman kepada ketentuan yang telah ditetapkan oleh Dekan
2. Proyek proposal/risalah/makalah/skripsi dinyatakan BATAL apabila tidak selesai pada waktu yang telah ditentukan
3. Masa kadaluarsa tanggal : 25 April 2020

Wa`alaikumssalam Warahmatullahi Wabarakatuh.



Dr. H. Elfrianto Nst, S.Pd, M.Pd.
NIDN : 0115057302

Dibuat rangkap 4 (empat) :

1. Fakultas (Dekan)
2. Ketua Program Studi
3. Pembimbing
4. Mahasiswa yang bersangkutan :
WAJIB MENGIKUTI SEMINAR



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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

LEMBAR PENGESAHAN HASIL SEMINAR PROPOSAL

Proposal yang sudah disceminarkan oleh mahasiswa di bawah ini

Nama Lengkap : Ayu Larasati

N.P.M : 1502050162

Program Studi : Pendidikan Bahasa Inggris

Judul Proposal : Pragmatic Language Impairment in Autistic - Savant Person
Portrayed in *The Good Doctor* Film

Pada hari ini ...Rabu..., tanggal ...15..., bulan ...Mei..., tahun 2019
sudah layak menjadi proposal skripsi.

Medan, Juni 2019

Disetujui oleh

Dosen Pembahas

Prof. Amrin Saragih, Ph. D

Dosen Pembimbing

Yusriati, SS, M. Hum

Diketahui oleh

Ketua Program Studi

Mandra Saragih, S. Pd, M. Hum



UMSU

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Bila menjawab surat ini agar disebutkan nomor dan tanggalnya

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Nomor : 4562 /II.3/UMSU-02/F/2019
Lamp : ---
Hal : Mohon Izin Riset

Medan, 07 Dzulqaidah 1440 H
10 Juli 2019 M

Kepada Yth. Bapak Kepala Perpustakaan
Universitas Muhammadiyah Sum. Utara
di-
Tempat

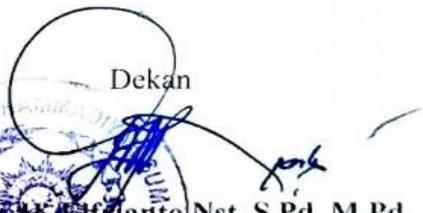
Assalamu'alaikum Warahmatullahi Wabarakaatuh

Wa ba'du, semoga kita semua sehat wal'afiat dalam melaksanakan kegiatan-aktifitas sehari-hari. sehubungan dengan semester akhir bagi mahasiswa wajib melakukan penelitian/riset untuk pembuatan skripsi sebagai salah satu syarat penyelesaian Sarjana Pendidikan, maka kami mohon kepada Bapak/Ibu Memberikan izin kepada mahasiswa untuk melakukan penelitian/riset di Pustaka Bapak pimpin. Adapun data mahasiswa kami tersebut sebagai berikut :

Nama : Ayu Larasati
N P M : 1502050162
Program Studi : Pendidikan Bahasa Inggris
Judul Peneltia : Pragmatic Language Impairment in Autistic- Savant Person Portrayed in *The Good Doctor Film*.

Demikian hal ini kami sampaikan, atas perhatian dan kesediaan serta kerjasama yang baik dari Bapak kami ucapkan terima kasih.

Wa'alaikumssalam Warahmatullahi Wabarakatuh.

Dekan

Drs. H. H. Hanto Nst, S.Pd, M.Pd.
IDN 0715057302


** Pertiinggal **



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Jl. Kapt. Mukhtar Basri No. 3 Telp. 6624567 - Ext. 113 Medan 20238
Website: <http://perpustakaan.umsu.ac.id>

SURAT KETERANGAN

Nomor: ...2013/KET/II.9-AU/UMSU-P/M/2019

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

Kepala Unit Pelaksana Teknis (UPT) Perpustakaan Universitas Muhammadiyah Sumatera Utara dengan ini menerangkan :

Nama : Ayu Larasati
NPM : 1502050162
Univ./Fakultas : UMSU/ Keguruan dan Ilmu Pendidikan
Jurusan/P.Studi : Pendidikan Bahasa Inggris/ S1

adalah benar telah melakukan kunjungan/penelitian pustaka guna menyelesaikan tugas akhir / skripsi dengan judul :

"Pragmatic Language Impairment in Autistic-Savant Person Portrayed in The Good Doctor Film"

Demikian surat keterangan ini diperbuat untuk dapat dipergunakan sebagaimana mestinya.

Medan, 10 Muharram 1441 H
10 September 2019 M

Kepala UPT Perpustakaan,


Muhammad Arifin, S.Pd, M.Pd



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UPT PERPUSTAKAAN

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SURAT KETERANGAN

Nomor: ~~2062~~ /KET/II.9-AU/UMSU-P/M/2019

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

Berdasarkan hasil pemeriksaan data pada Sistem Perpustakaan, maka Kepala Unit Pelaksana Teknis (UPT) Perpustakaan Universitas Muhammadiyah Sumatera Utara dengan ini menerangkan :

Nama : Ayu Larasati
NPM : 1502050162
Fakultas : Keguruan dan Ilmu Pendidikan
Jurusan/ P.Studi : Pendidikan Bahasa Inggris

telah menyelesaikan segala urusan yang berhubungan dengan Perpustakaan Universitas Muhammadiyah Sumatera Utara Medan.

Demikian surat keterangan ini diperbuat untuk dapat dipergunakan sebagaimana mestinya.

Medan, 9 Muharram 1441 H
09 September 2019 M

Kepala UPT Perpustakaan,



Muhammad Arifin, S.Pd, M.Pd

SURAT PERNYATAAN

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

Saya yang bertandatangan di bawah ini:

NamaLengkap : Ayu Larasati

N.P.M : 1502050162

Program Studi : Pendidikan Bahasa Inggris

Judul Proposal : Pragmatic Language Impairment in Autistic - Savant Person
Portrayed in *The Good Doctor* Film

Dengan ini menyatakan bahwa:

1. Penelitian yang saya lakukan dengan judul di atas belum pernah diteliti di Fakultas Keguruan dan Ilmu Pendidikan Universitas Muhammadiyah Sumatera Utara.
2. Penelitian ini akan saya lakukan sendiri tanpa ada bantuan dari pihak manapun dengan kata lain penelitian ini tidak saya tempahkan (dibuat) oleh orang lain dan juga tidak tergolong *Plagiat*.
3. Apabila point 1 dan 2 di atas saya langgar, maka saya bersedia untuk dilakukan pembatalan terhadap penelitian tersebut dan saya bersedia mengulang kembali mengajukan judul penelitian yang baru dengan catatan mengulang kembali seminar.

Demikian surat pernyataan ini saya perbuat tanpa ada paksaan dari pihak manapun juga, dan dapat dipergunakan sebagaimana mestinya.

Medan, Juli 2019

Hormat saya

Yang membuat pernyataan



Diketahui oleh Ketua Program Studi
Pendidikan Bahasa Inggris

Mandra Saragih S.Pd, M. Hum



BERITA ACARA BIMBINGAN PROPOSAL

Perguruan Tinggi : Universitas Muhammadiyah Sumatera Utara
Fakultas : Keguruan dan Ilmu Pendidikan
Jurusan/Prog. Studi : Pendidikan Bahasa Inggris
Nama Lengkap : Ayu Larasati
N.P.M : 1502050162
Program Studi : Pendidikan Bahasa Inggris
Judul Proposal : Pragmatic Language Impairment in Autistic-Savant Person Portrayed in *The Good Doctor* Film

Tanggal	Deskripsi Hasil Bimbingan Proposal	Tanda Tangan
6/4-2019	Revise Chapter 1	
23/4-2019	Revise chapter 2	
25/4-2019	revise chapter	
29/4-2019	Ree for seminar	

Diketahui oleh:
Ketua Prodi

(Mandra Saragih, S.Pd., M.Hum.)

Medan, 29 April 2019

Dosen Pembimbing

(Yusriati SS, M.Hum)



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SURAT KETERANGAN

Ketua Program Studi Pendidikan Bahasa Inggris, Fakultas Keguruan dan Ilmu Pendidikan, Universitas Muhammadiyah Sumatera Utara, menerangkan di bawah ini:

NamaLengkap : Ayu Larasati
N.P.M : 1502050162
Program Studi : Pendidikan Bahasa Inggris
Judul Proposal : Pragmatic Language Impairment in Autistic - Savant Person
Portrayed in *The Good Doctor* Film

Benar telah melakukan seminar proposal skripsi pada hari Rabu, tanggal 15, Bulan Mei, Tahun 2019.

Demikianlah surat keterangan ini dibuat untuk memperoleh surat izin riset dari Dekan Fakultas. Atas kesediaan dan kerjasama yang baik, kami ucapkan terima kasih.

Medan, Juli 2019

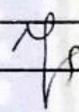
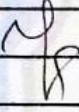
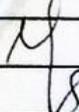
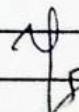
Ketua,

Mandra Saragih, S. Pd, M.Hum



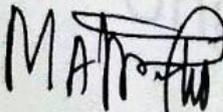
BERITA ACARA BIMBINGAN SKRIPSI

Perguruan Tinggi : Universitas Muhammadiyah Sumatera Utara
Fakultas : Keguruan dan Ilmu Pendidikan
Jurusan/Prog. Studi : Pendidikan Bahasa Inggris
Nama Lengkap : Ayu Larasati
N.P.M : 1502050162
Program Studi : Pendidikan Bahasa Inggris
Judul Skripsi : Pragmatic Language Impairment in Autistic-Savant Person Portrayed in *The Good Doctor* Film

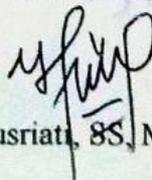
Tanggal	Deskripsi Hasil Bimbingan Skripsi	Tanda Tangan
20/08/2019	Revisi chapter 1 - 3.	
0		
04/09/2019	Revisi analisis of disc.	
07/09/2019	Revisi chapter 5 and Ack.	
12/09/2019	Revisi the whole chapter - as	
16/09/2019	ack for the etc	

Medan, September 2019

Diketahui oleh:
Ketua Prodi


(Mandra Saragih, S.Pd., M.Hum.)

Dosen Pembimbing


(Yusriati, SS, M.Hum)

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3. Senior High School at SMA NEGERI 2 Medan 2012-2015
4. Students of English Department of FKIP
Muhammadiyah University of Sumatera Utara 2015-2019



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