



Minnesota Multiphasic
Personality Inventory-2
Restructured Form™

Interpretive Report: Clinical Settings

MMPI-2-RF™

Minnesota Multiphasic Personality Inventory-2-Restructured Form™

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ID Number: 10
Age: 19
Gender: Male
Marital Status: Never Married
Years of Education: 10
Date Assessed: 08/02/2008

PEARSON

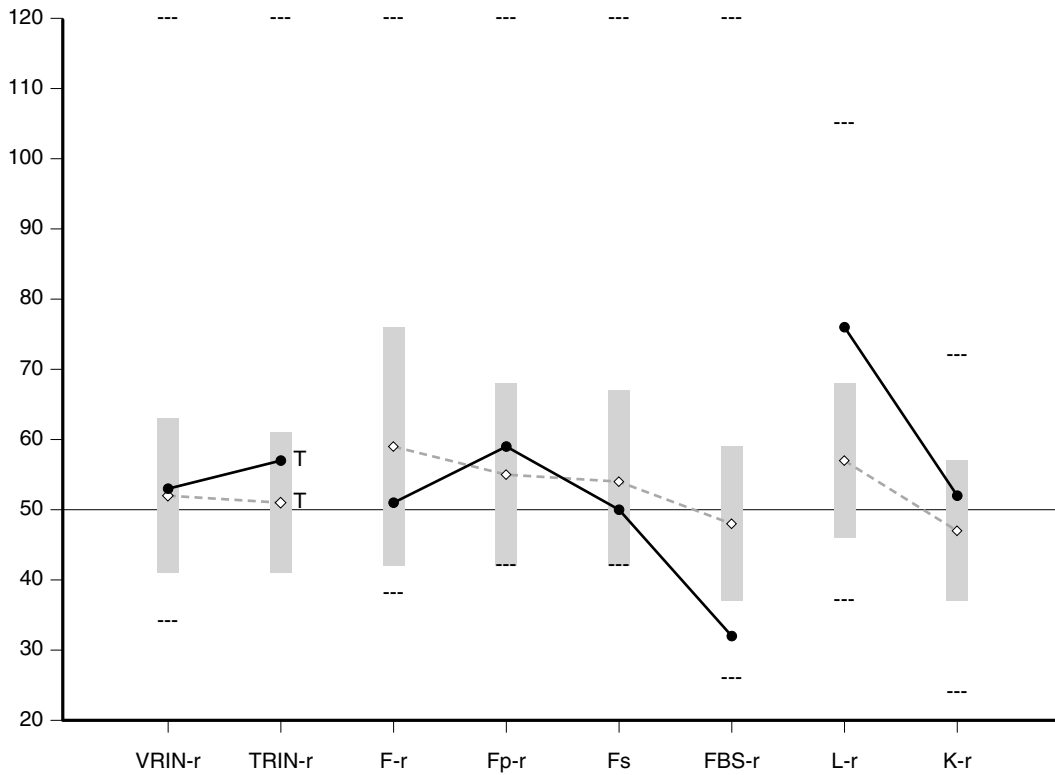
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TRADE SECRET INFORMATION

Not for release under HIPAA or other data disclosure laws that exempt trade secrets from disclosure.

MMPI-2-RF Validity Scales



Raw Score:	4	12	2	2	1	2	8	8
T Score:	53	57 T	51	59	50	32	76	52
Response %:	100	100	100	100	100	100	100	100
Cannot Say (Raw):	2							Percent True (of items answered): 39%

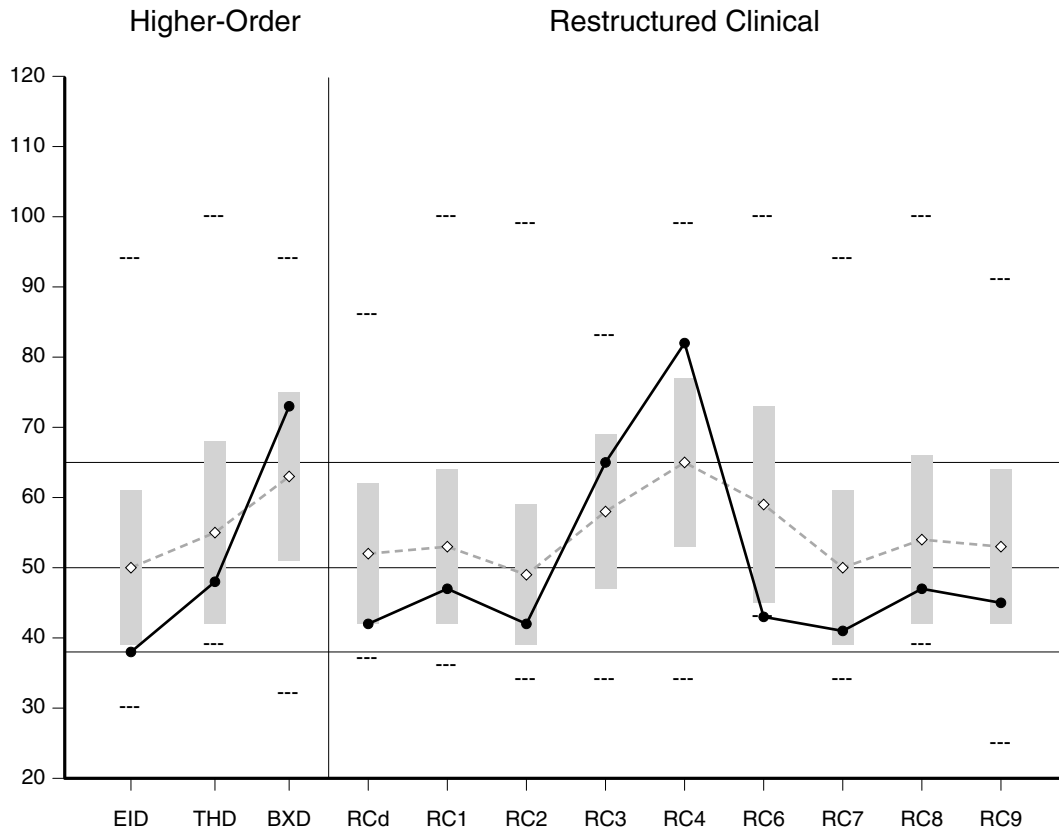
Comparison Group Data: Prison Inmate (Men), N = 34,935

Mean Score (◇--◇):	52	51 T	59	55	54	48	57	47
Standard Dev (±1 SD):	11	10	17	13	13	11	11	10

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-2-RF T scores are non-gendered.

VRIN-r	Variable Response Inconsistency	Fs	Infrequent Somatic Responses
TRIN-r	True Response Inconsistency	FBS-r	Symptom Validity
F-r	Infrequent Responses	L-r	Uncommon Virtues
Fp-r	Infrequent Psychopathology Responses	K-r	Adjustment Validity

MMPI-2-RF Higher-Order (H-O) and Restructured Clinical (RC) Scales



Raw Score:	3	1	15	1	2	2	11	16	0	2	1	9
T Score:	38	48	73	42	47	42	65	82	43	41	47	45
Response %:	100	100	100	100	100	100	100	100	100	100	100	100

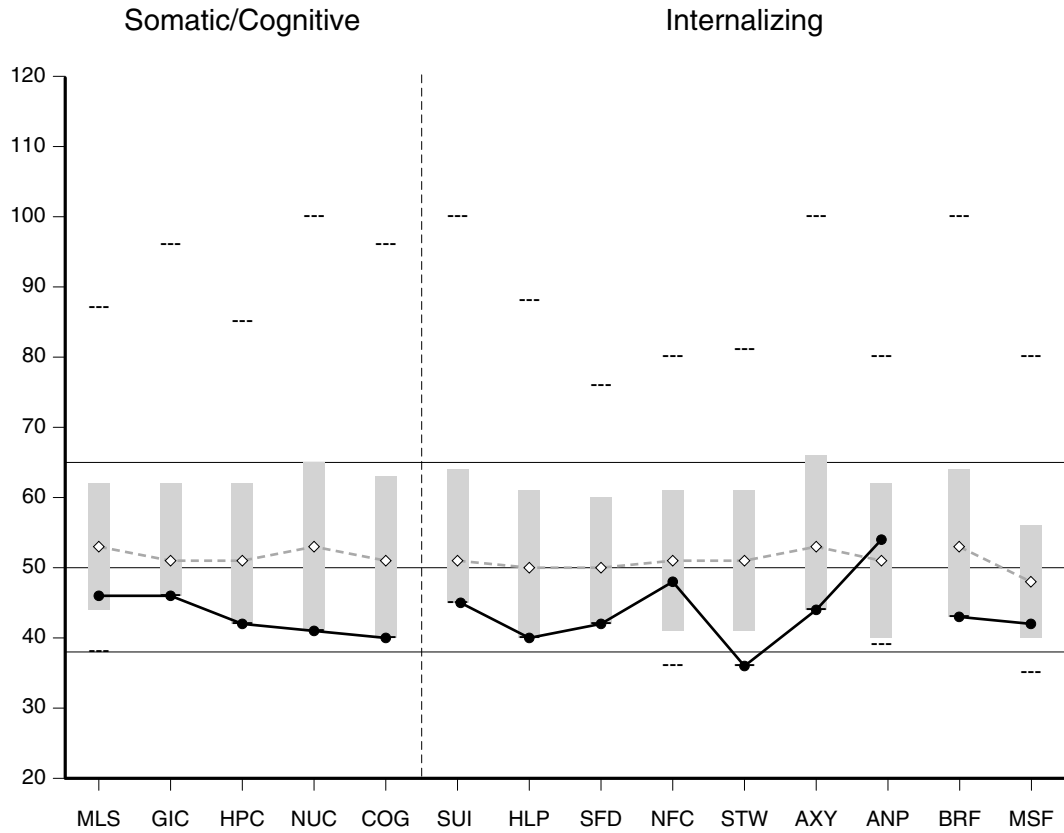
Comparison Group Data: Prison Inmate (Men), N = 34,935

Mean Score (◇---◇):	50	55	63	52	53	49	58	65	59	50	54	53
Standard Dev (±1 SD):	11	13	12	10	11	10	11	12	14	11	12	11

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-2-RF T scores are non-gendered.

EID Emotional/Internalizing Dysfunction	RCd Demoralization	RC6 Ideas of Persecution
THD Thought Dysfunction	RC1 Somatic Complaints	RC7 Dysfunctional Negative Emotions
BXD Behavioral/Externalizing Dysfunction	RC2 Low Positive Emotions	RC8 Aberrant Experiences
	RC3 Cynicism	RC9 Hypomanic Activation
	RC4 Antisocial Behavior	

MMPI-2-RF Somatic/Cognitive and Internalizing Scales



Raw Score:	1	0	0	0	0	0	0	0	2	0	0	3	0	1
T Score:	46	46	42	41	40	45	40	42	48	36	44	54	43	42
Response %:	100	100	100	100	100	100	100	100	89	100	100	100	100	100

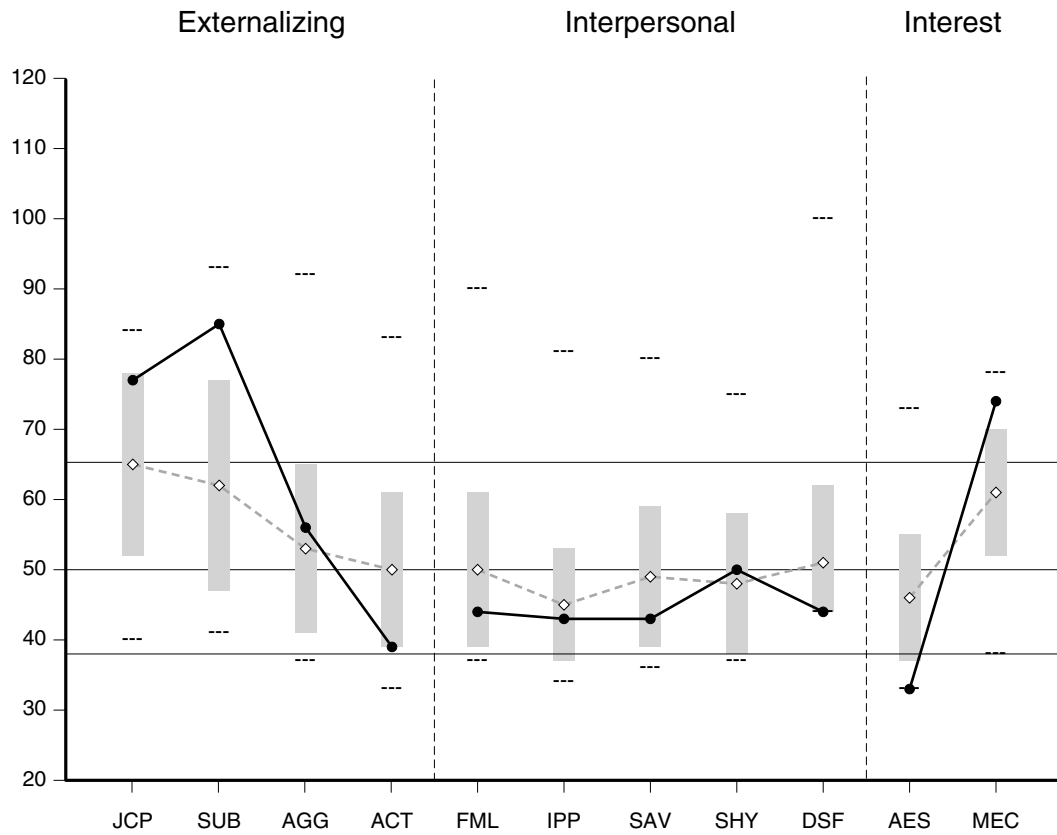
Comparison Group Data: Prison Inmate (Men), N = 34,935

Mean Score (◇--◇):	53	51	51	53	51	51	50	50	51	51	53	51	53	48
Standard Dev (±1 SD):	9	11	11	12	12	13	11	10	10	10	13	11	11	8

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-2-RF T scores are non-gendered.

MLS	Malaise	SUI	Suicidal/Death Ideation	AXY	Anxiety
GIC	Gastrointestinal Complaints	HLP	Helplessness/Hopelessness	ANP	Anger Proneness
HPC	Head Pain Complaints	SFD	Self-Doubt	BRF	Behavior-Restricting Fears
NUC	Neurological Complaints	NFC	Inefficacy	MSF	Multiple Specific Fears
COG	Cognitive Complaints	STW	Stress/Worry		

MMPI-2-RF Externalizing, Interpersonal, and Interest Scales



Raw Score:	5	6	3	1	1	2	1	3	0	0	8
T Score:	77	85	56	39	44	43	43	50	44	33	74
Response %:	100	100	100	100	100	90	100	100	100	100	100

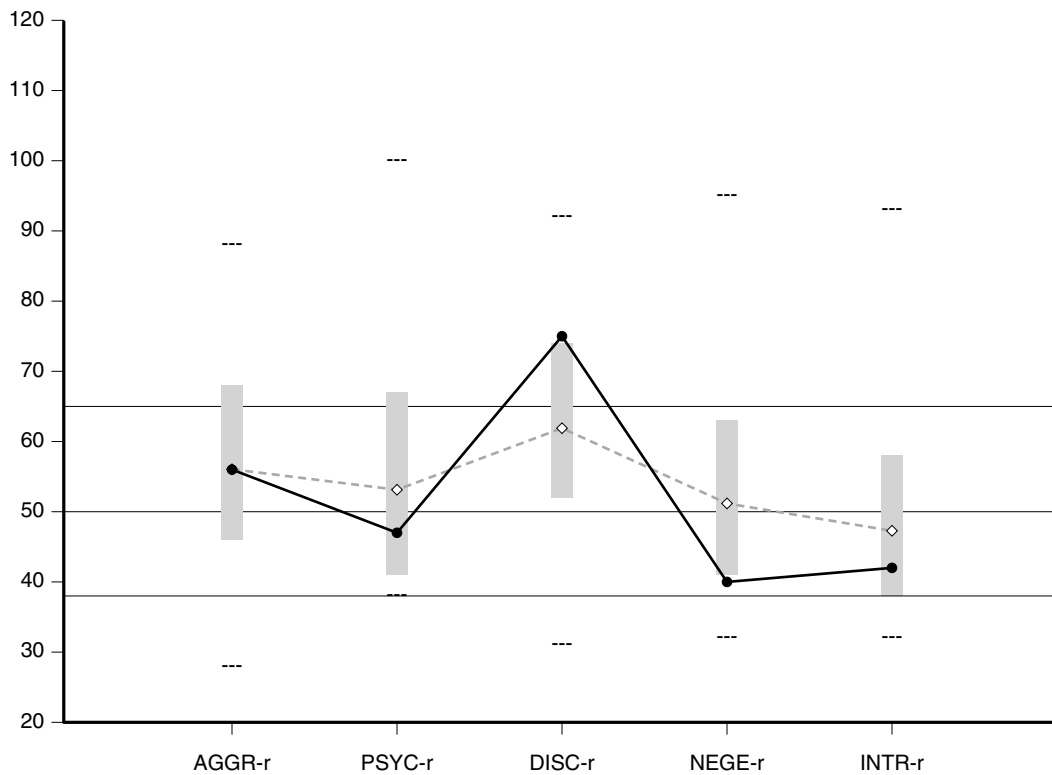
Comparison Group Data: Prison Inmate (Men), N = 34,935

Mean Score (◇--◇):	65	62	53	50	50	45	49	48	51	46	61
Standard Dev (±1 SD):	13	15	12	11	11	8	10	10	11	9	9

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-2-RF T scores are non-gendered.

JCP	Juvenile Conduct Problems	FML	Family Problems	AES	Aesthetic-Literary Interests
SUB	Substance Abuse	IPP	Interpersonal Passivity	MEC	Mechanical-Physical Interests
AGG	Aggression	SAV	Social Avoidance		
ACT	Activation	SHY	Shyness		
		DSF	Disaffiliativeness		

MMPI-2-RF PSY-5 Scales



Raw Score:	11	1	15	2	3
T Score:	56	47	75	40	42
Response %:	94	100	100	100	100

Comparison Group Data: Prison Inmate (Men), N = 34,935

Mean Score (◇--◇):	57	54	63	52	48
Standard Dev (±1 SD):	11	13	11	11	10

The highest and lowest T scores possible on each scale are indicated by a "---"; MMPI-2-RF T scores are non-gendered.

- AGGR-r Aggressiveness-Revised
- PSYC-r Psychoticism-Revised
- DISC-r Disconstraint-Revised
- NEGE-r Negative Emotionality/Neuroticism-Revised
- INTR-r Introversion/Low Positive Emotionality-Revised

This interpretive report is intended for use by a professional qualified to interpret the MMPI-2-RF. The information it contains should be considered in the context of the test-taker's background, the circumstances of the assessment, and other available information.

SYNOPSIS

Scores on the MMPI-2-RF validity scales raise concerns about the possible impact of unscorable responses and under-reporting on the validity of this protocol. With that caution noted, scores on the substantive scales indicate behavioral and interpersonal dysfunction. Behavioral-externalizing problems include antisocial behavior, juvenile conduct problems, and substance abuse. Interpersonal difficulties relate to cynicism.

PROTOCOL VALIDITY

Content Non-Responsiveness

Unscorable Responses

The test-taker answered less than 90% of the items on the following scale. The resulting score may therefore be artificially lowered. In particular, the absence of elevation on this scale is not interpretable. A list of all items for which the test-taker provided unscorable responses appears under the heading "Item-Level Information."

Inefficacy (NFC): 89%

Inconsistent Responding

The test-taker responded to the items in a consistent manner, indicating that he responded relevantly.

Over-Reporting

There are no indications of over-reporting in this protocol.

Under-Reporting

The test-taker presented himself in a very positive light by denying several minor faults and shortcomings that most people acknowledge. This level of virtuous self-presentation is uncommon, but may, to some extent, reflect a background stressing traditional values. Any absence of elevation on the substantive scales should be interpreted with caution. Elevated scores on the substantive scales may underestimate the problems assessed by those scales.

SUBSTANTIVE SCALE INTERPRETATION

Clinical symptoms, personality characteristics, and behavioral tendencies of the test-taker are described in this section and organized according to an empirically guided framework. Statements containing the word "reports" are based on the item content of MMPI-2-RF scales, whereas statements that include the word "likely" are based on empirical correlates of scale scores. Specific sources for each statement can be viewed with the annotation features of this report.

The following interpretation needs to be considered in light of cautions noted about the possible impact of unscorable responses and under-reporting on the validity of this protocol.

Somatic/Cognitive Dysfunction

There are no indications of somatic or cognitive dysfunction in this protocol. However, because of indications of under-reporting described earlier, such problems cannot be ruled out.

Emotional Dysfunction

There are no indications of emotional-internalizing dysfunction in this protocol. However, because of indications of under-reporting described earlier, such problems cannot be ruled out.

Thought Dysfunction

There are no indications of disordered thinking in this protocol. However, because of indications of under-reporting described earlier, such problems cannot be ruled out.

Behavioral Dysfunction

The test-taker's responses indicate significant externalizing, acting-out behavior, which is likely to have gotten him into difficulties. More specifically, he reports serious antisocial behavior and is very likely to have poor impulse control, to have been involved with the criminal justice system, and to have difficulties with individuals in positions of authority. He is also very likely to act out when bored, to fail to conform to societal norms and expectations, and to have antisocial characteristics. He also reports a significant history of substance abuse, current substance abuse, frequent use of alcohol and drugs, and using alcohol to "relax and open up". He is indeed very likely to have a history of problematic use of alcohol or drugs, to be sensation-seeking, and to have had legal problems as a result of substance abuse. In addition, he reports a history of problematic behavior at school. He is likely to have a history of juvenile delinquency and criminal and antisocial behavior and to experience conflictual interpersonal relationships.

Interpersonal Functioning Scales

The test-taker reports having cynical beliefs, distrust of others, and believing others look out only for their own interests. He is likely to be hostile toward others and feel alienated from them, and to have negative interpersonal experiences as a result of his cynical beliefs.

Interest Scales

The test-taker reports an above average number of interests in activities or occupations of a mechanical or physical nature (e.g., fixing and building things, the outdoors, sports). Individuals who respond in this manner are likely to be adventure- and sensation-seeking. He indicates little or no interest in activities or

occupations of an aesthetic or literary nature (e.g., writing, music, the theater).

DIAGNOSTIC CONSIDERATIONS

This section provides recommendations for psychodiagnostic assessment based on the test-taker's MMPI-2-RF results. It is recommended that he be evaluated for the following:

Behavioral-Externalizing Disorders

- Antisocial personality disorder, substance use disorders, and other externalizing disorders

Interpersonal Disorders

- Personality disorders involving mistrust of and hostility toward others

TREATMENT CONSIDERATIONS

This section provides inferential treatment-related recommendations based on the test-taker's MMPI-2-RF scores.

Psychotherapy Process Issues

- Unlikely to be internally motivated for treatment.
- Extreme acting-out tendencies significantly increase the risk of treatment non-compliance and jeopardize the development of a therapeutic relationship.
- Cynicism may interfere with forming a therapeutic relationship.

Possible Targets for Treatment

- Inadequate self-control
- Reduction or cessation of substance abuse
- Lack of interpersonal trust

ITEM-LEVEL INFORMATION

Unscorable Responses

Following is a list of items to which the test-taker did not provide scorable responses. Unanswered or double answered (both True and False) items are unscorable. The scales on which the items appear are in parentheses following the item content.

- 198. Omitted Item. (NFC)
- 321. Omitted Item. (IPP, AGGR-r)



Special Note:

The content of the test items is included in the actual reports. To protect the integrity of the test, the item content does not appear in this sample report.

Critical Responses

Seven MMPI-2-RF scales--Suicidal/Death Ideation (SUI), Helplessness/Hopelessness (HLP), Anxiety (AXY), Ideas of Persecution (RC6), Aberrant Experiences (RC8), Substance Abuse (SUB), and Aggression (AGG)--have been designated by the test authors as having critical item content that may require immediate attention and follow-up. Items answered by the individual in the keyed direction (True or False) on a critical scale are listed below if his T score on that scale is 65 or higher. The percentage of the MMPI-2-RF normative sample (NS) and of the Prison Inmate (Men) comparison group (CG) that answered each item in the keyed direction are provided in parentheses following the item content.

Substance Abuse (SUB, T Score = 85)

- 49. Omitted Item. (True; NS 29.6%, CG 55.7%)
- 141. Omitted Item. (True; NS 34.2%, CG 49.2%)
- 192. Omitted Item. (True; NS 11.2%, CG 28.3%)
- 237. Omitted Item. (False; NS 27.4%, CG 59.0%)
- 266. Omitted Item. (True; NS 5.0%, CG 43.4%)
- 297. Omitted Item. (True; NS 14.4%, CG 45.0%)

End of Report

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