Practice Case: Larry

Larry completed the MMPI-2 as part of the admission process at a psychiatric inpatient unit. He recently had been discharged from the Army because of psychiatric problems and was transferred to the hospital for treatment.

Larry is a 20-year-old White man who graduated from high school. In school his grades were above average. He was not very popular and did not date. His only school activity was the computer club. He did not get into any trouble in school and has never been in trouble with the law.

Larry is the younger of two children in his family. His brother is a senior college student majoring in business. His parents were divorced when he was 10 years old, and he and his brother were raised by their mother, although they have stayed involved with their father. His mother works as a nursing assistant at a community hospital, and his father is a police officer.

Larry has had no prior mental health treatment. While still in the Army he experienced hallucinations and persecutory delusions. He had frequent suicidal ideation and on one occasion took a large number of aspirins in an apparent suicide attempt. Larry has no history of substance abuse.

Larry was somewhat agitated and had difficulty attending to the MMPI-2. However, breaking the test administration into several shorter sessions over a 2-day period resulted in successful completion of the test.

Larry's MMPI-2 Profile



MMPI®-2

Minnesota Multiphasic Personality Inventory®-2 Extended Score Report

Name: Larry

ID Number:

Age: 20 Gender: Male

Date Assessed: 10/19/1998

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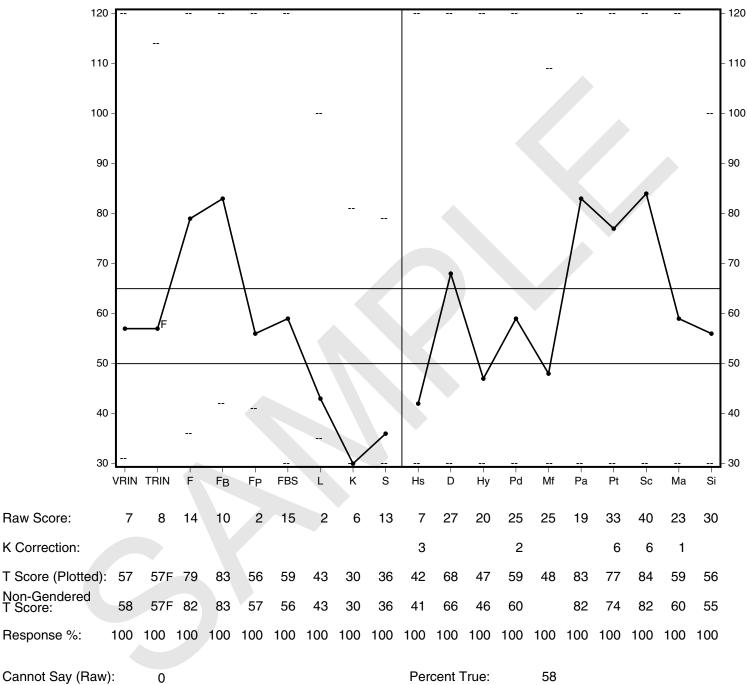
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[5.4/1/QG]

MMPI-2 VALIDITY AND CLINICAL SCALES PROFILE



 Cannot Say (Raw):
 0
 Percent True:
 58

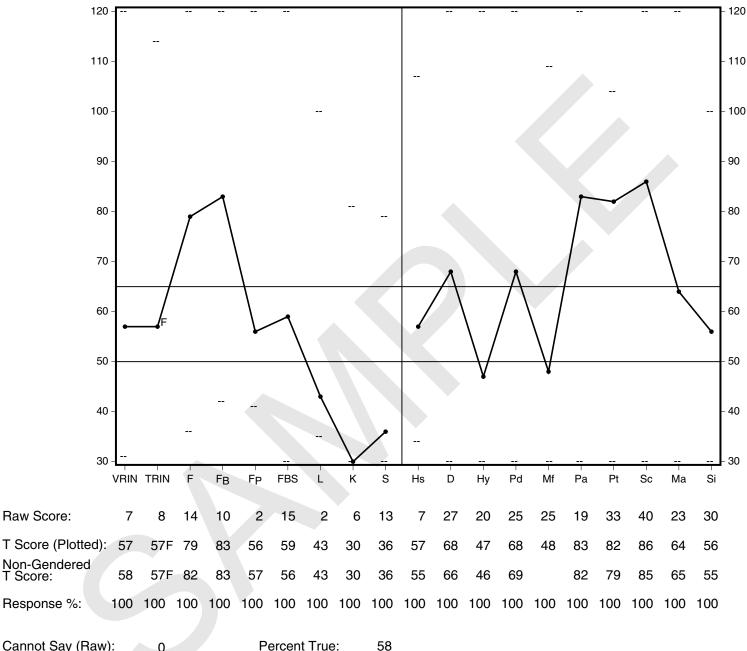
 F-K (Raw):
 8
 Percent False:
 42

 Welsh Code:
 86"7'2+-490/531: F'+-/L:K#
 Profile Elevation:
 64.9

The highest and lowest T scores possible on each scale are indicated by a "--".

For information on FBS, see Ben-Porath, Y. S., & Tellegen, A. (2006). The FBS: Current Status, a report on the Pearson web site (www.pearsonassessments.com/tests/mmpi_2.htm).

MMPI-2 NON-K-CORRECTED VALIDITY/CLINICAL SCALES PROFILE



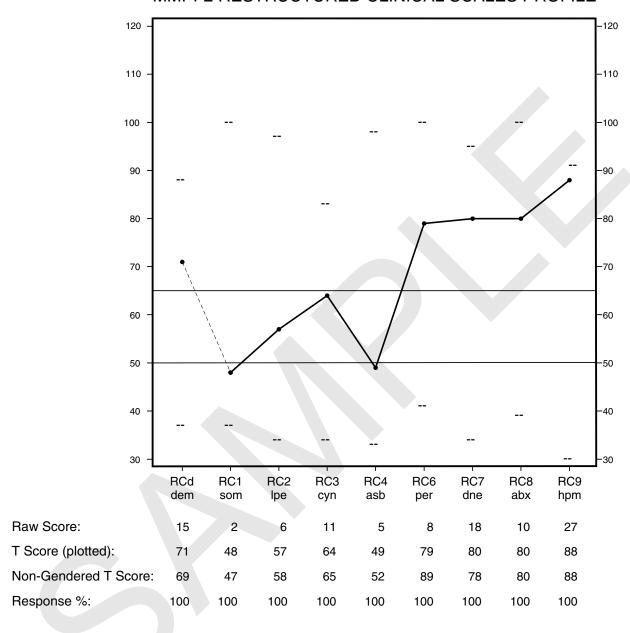
Cannot Say (Raw): 0 Percent True: 58
Profile Elevation: 69.4 Percent False: 42

The highest and lowest T scores possible on each scale are indicated by a "--".

Non-K-corrected T scores allow interpreters to examine the relative contributions of the Clinical Scale raw score and the K correction to K-corrected Clinical Scale T scores. Because all other MMPI-2 scores that aid in the interpretation of the Clinical Scales (the Harris-Lingoes subscales, Restructured Clinical Scales, Content and Content Component Scales, PSY-5 Scales, and Supplementary Scales) are not K-corrected, they can be compared most directly with non-K-corrected T scores.

For information on FBS, see Ben-Porath, Y. S., & Tellegen, A. (2006). The FBS: Current Status, a report on the Pearson web site (www.pearsonassessments.com/tests/mmpi_2.htm).

MMPI-2 RESTRUCTURED CLINICAL SCALES PROFILE



The highest and lowest T scores possible on each scale are indicated by a "--".

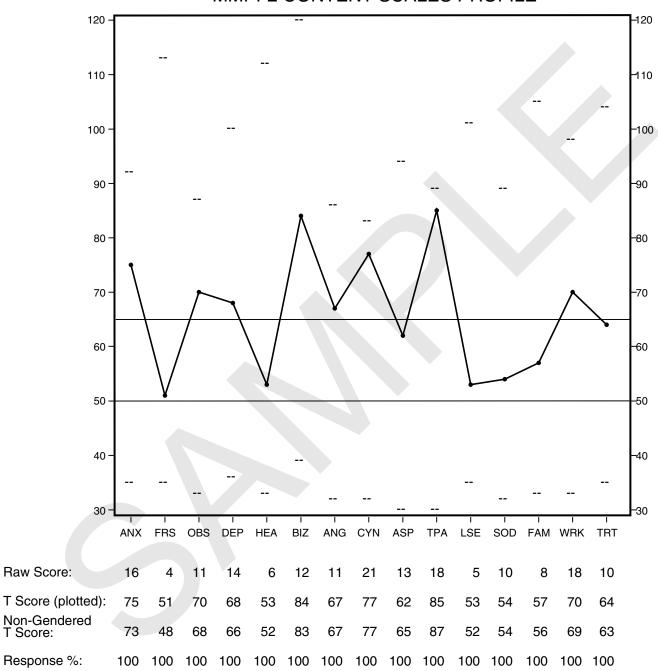
LEGEND	-	
dem= Demoralization som= Somatic Complaints lpe = Low Positive Emotions	cyn = Cynicismasb = Antisocial Behaviorper = Ideas of Persecution	dne = Dysfunctional Negative Emotionsabx = Aberrant Experienceshpm= Hypomanic Activation

For information on the RC scales, see Tellegen, A., Ben-Porath, Y.S., McNulty, J.L., Arbisi, P.A., Graham, J.R., & Kaemmer, B. 2003. The MMPI-2 Restructured Clinical (RC) Scales: Development, Validation, and Interpretation. Minneapolis: University of Minnesota Press.

Raw Score:

T Score:



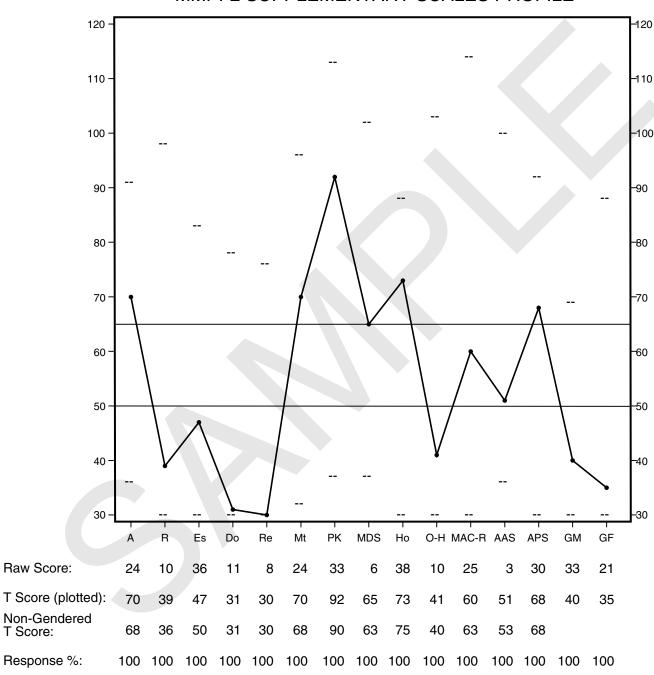


The highest and lowest T scores possible on each scale are indicated by a "--".

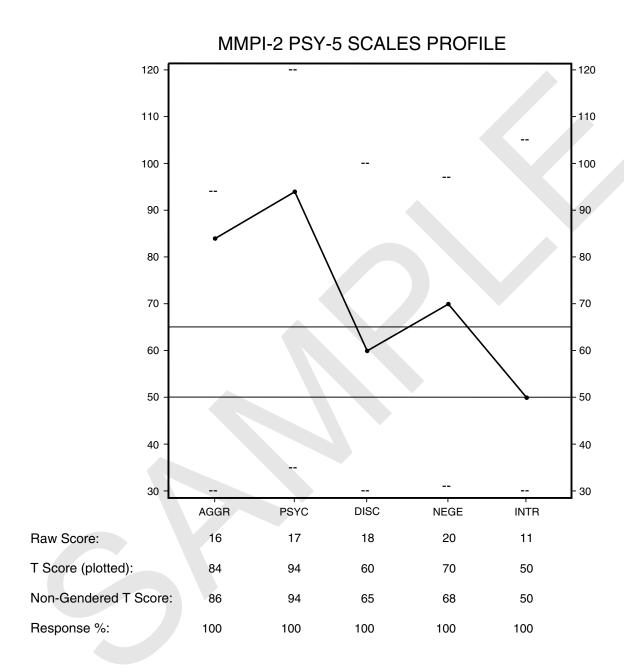
Raw Score:

T Score:

MMPI-2 SUPPLEMENTARY SCALES PROFILE



The highest and lowest T scores possible on each scale are indicated by a "--".



The highest and lowest T scores possible on each scale are indicated by a "--".

ADDITIONAL SCALES (to be used as an aid in interpreting the parent scales)

(to be used as an aid in interpreting the parent scale	<i>(</i> 3)	Non-Gendered		
	Raw Score		T Score	eu Resp %
Harris-Lingoes Subscales	Raw Score	1 Score	1 Score	resp /0
Depression Subscales	10	70	77	100
Subjective Depression (D ₁)	18	79 48	77 47	100
Psychomotor Retardation (D ₂)	5 3	48 51	50	100 100
Physical Malfunctioning (D ₃) Mental Dullness (D ₄)	3 11	91	90	100
Brooding (D_5)	7	79	76	100
	,	19	70	100
Hysteria Subscales				
Denial of Social Anxiety (Hy ₁)	1	34	35	100
Need for Affection (Hy ₂)	2	32	31	100
Lassitude-Malaise (Hy ₃)	9	79	77	100
Somatic Complaints (Hy ₄)	5	62	59	100
Inhibition of Aggression (Hy ₅)	0	30	30	100
Psychopathic Deviate Subscales				
Familial Discord (Pd ₁)	2	51	51	100
Authority Problems (Pd ₂)	5	60	64	100
Social Imperturbability (Pd ₃)	2	39	40	100
Social Alienation (Pd ₄)	11	87	87	100
Self-Alienation (Pd ₅)	9	77	77	100
Paranoia Subscales				
Persecutory Ideas (Pa ₁)	11	106	106	100
Poignancy (Pa ₂)	5	68	67	100
Naivete (Pa ₃)	1	32	31	100
Schizophrenia Subscales				
Social Alienation (Sc ₁)	10	80	78	100
Emotional Alienation (Sc ₂)	8	117	116	100
Lack of Ego Mastery, Cognitive (Sc ₃)	8	90	91	100
Lack of Ego Mastery, Conative (Sc ₄)	9	87	86	100
Lack of Ego Mastery, Defective Inhibition (Sc ₅		82	80	100
Bizarre Sensory Experiences (Sc ₆)	6	70	69	100
Hypomania Subscales	2	50	52	100
Amorality (Ma ₁)	2 8	50 63	52 64	100 100
Psychomotor Acceleration (Ma ₂) Imperturbability (Ma ₃)	o 1	35	36	100
Ego Inflation (Ma ₄)	8	82	81	100
Ego initation (wa ₄)	8	62	01	100
Social Introversion Subscales				
Shyness/Self-Consciousness (Si ₁)	8	59	58	100
Social Avoidance (Si ₂)	2	45	46	100
AlienationSelf and Others (Si ₃)	12	71	70	100

		N	ed	
	Raw Score	T Score	T Score	Resp %
Content Component Scales				
Fears Subscales Generalized Fearfulness (FRS ₁) Multiple Fears (FRS ₂)	2	62	58	100
	2	45	42	100
Depression Subscales Lack of Drive (DEP ₁) Dysphoria (DEP ₂) Self-Depreciation (DEP ₃) Suicidal Ideation (DEP ₄)	4	62	61	100
	4	74	69	100
	4	69	70	100
	1	62	62	100
Health Concerns Subscales Gastrointestinal Symptoms (HEA ₁) Neurological Symptoms (HEA ₂) General Health Concerns (HEA ₃)	0	44	44	100
	1	47	46	100
	1	48	49	100
Bizarre Mentation Subscales Psychotic Symptomatology (BIZ ₁) Schizotypal Characteristics (BIZ ₂)	4 7	84 86	85 86	100 100
Anger Subscales Explosive Behavior (ANG ₁) Irritability (ANG ₂)	4 6	64 67	67 66	100 100
Cynicism Subscales Misanthropic Beliefs (CYN ₁) Interpersonal Suspiciousness (CYN ₂)	13	69	70	100
	8	71	73	100
Antisocial Practices Subscales Antisocial Attitudes (ASP ₁) Antisocial Behavior (ASP ₂)	10	60	62	100
	3	59	64	100
Type A Subscales Impatience (TPA ₁) Competitive Drive (TPA ₂)	6	68	70	100
	8	77	79	100
Low Self-Esteem Subscales Self-Doubt (LSE ₁) Submissiveness (LSE ₂)	3	54	54	100
	1	48	47	100
Social Discomfort Subscales Introversion (SOD ₁) Shyness (SOD ₂)	5 4	50 58	52 57	100 100
Family Problems Subscales Family Discord (FAM ₁) Familial Alienation (FAM ₂)	6	65	64	100
	0	40	41	100

	Non-Gendered			
	Raw Score	T Score	T Score	Resp %
Negative Treatment Indicators Subscales				
Low Motivation (TRT ₁)	3	60	58	100
Inability to Disclose (TRT ₂)	3	60	61	100

Uniform T scores are used for Hs, D, Hy, Pd, Pa, Pt, Sc, Ma, the content scales, the content component scales, and the PSY-5 scales. The remaining scales and subscales use linear T scores.

NOTE: The final pages of this report display any items that were skipped or unscorable as well as any endorsed items that are part of a critical responses or critical items list. These sections include both the item number and content. The final page of the report includes the test taker's item level responses to every test item These pages are not displayed in this book in order to maintain test security; however, redacted sample reports are available on the Pearson Assessments' website.

