

**MMPI-2-RF<sup>®</sup>**  
**Adult Interpretive System Version 4**  
**Content-Based Report**

Developed by  
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and PAR Staff

**Client Information**

**Name:**sample Case

**Client ID:**SC2011

**Gender:**Male

**Age:** 43

**Education:**High School Grad.

**Ethnicity:**Caucasian/White

**Test Date:**12/08/2010

The interpretive information contained in this report should be viewed as only one source of hypothesis about the individual being evaluated. No decisions should be based solely on the information contained in this report. This material should be integrated with all other sources of information in reaching professional decisions about this individual. This report is confidential and intended for use by qualified professionals only. It should not be released to the individual being evaluated

## **.Potential Impact of Demographic Variables**

The client's age, education, and ethnicity are unlikely to have a significant impact on the interpretation of the MMPI-2-RF scores.

## Dangerousness to Self/Others Items Age Group: 40-49

His responses (either “True” or “Omitted”) to the dangerousness to self items (93, 120, 164, 251) should be documented in writing in his clinical record.

Dangerousness to Self - Responses		
Test Item Number	Client Response	Typical Percent Endorsed TRUE
93	Not Entered	15.64
120	Not Entered	8.64
164	Not Entered	10.32
251	Not Entered	5.53

Dangerousness to Self - Item Count		
Number of Items Endorsed TRUE	Number Endorsed by This Client	Typical Percent Endorsing This Number
0		79.80
1		8.56
2		5.37
3		4.24
4		2.03

His responses (either “True” or “Omitted”) to the dangerousness to others items (312, 329) should be documented in writing in his clinical record.

Dangerousness to Others - Responses		
Test Item Number	Client Response	Typical Percent Endorsed TRUE
312	Not Entered	9.21
329	Not Entered	12.95

Dangerousness to Others - Item Count		
Number of Items Endorsed TRUE	Number Endorsed by This Client	Typical Percent Endorsing This Number
0		81.89
1		14.06
2		4.05

## Test-Taking Behaviors

### Omissions

He omitted no items.

### Consistency of Item Endorsement

*VRIN-r* = 63

He has made more inconsistent responses than is expected. He may have begun responding to the items inconsistently at some later point in the test. The clinician should query him about any possible change in responding to the items.

### Accuracy of Item Endorsement

*F-r* = 42

*T*-scores at or below 44 indicate that he did not report the socially unacceptable or disturbing content represented in these items. He may be trying to provide a self-favorable report of psychopathology, or he may be a normal person who is very conventional, unassuming, and unpretentious.

*F<sub>p-r</sub>* = 45

He has endorsed the items accurately. Scale interpretation may proceed with confidence.

*L-r* = 62

He may be slightly more conforming than usual and may have a tendency to resort to denial mechanisms.

*K-r* = 53

He has a proper balance between self-disclosure and self-protection. He has sufficient personal resources to desire and tolerate a psychological intervention. In higher socioeconomic class clients, a moderate level of personal distress is expected. The prognosis for a psychological intervention is good.

## MMPI-2-RF Content-Based

### Moods

**Negative Emotionality and General Subjective Distress (RCd):** He reports that he is discouraged and generally demoralized with himself and his life. He is insecure and pessimistic and feels overwhelmed. He expects to fail or believes he has failed in various areas of his life ( $RCd > 64$ ).

**Anxiety (AXY/STW):** He reports being anxious and easily frightened, and having nightmares every few nights ( $AXY > 64$ ).  $STW \leq 64$ .

**Depression (RC2):**  $RC2 \leq 64$ .

**Anger and Irritability (ANP):**  $ANP \leq 64$ .

**Fears (BRF/MSF):**  $BRF \leq 64$ .  $MSF \leq 64$ .

**Hypomania (ACT):**  $ACT \leq 64$ .

### Cognitions

**Problems with Attention, Concentration and Memory (COG):** He reports problems with his attention, memory, and concentration. He has unusual thoughts, and problems focusing his mind on any one thing ( $COG > 64$ ).

**Cynical Beliefs (RC3):**  $RC3 \leq 64$ .

**Negative Cognitions (HLP/SFD/NFC):** He reports general negative cognitions reflecting his hopelessness, his pessimism, and the futility he perceives of trying to make changes in his life ( $HLP > 64$ ).  $SFD \leq 64$ .  $NFC \leq 64$ .

**Psychotic Symptoms and Behaviors (RC8):**  $RC8 \leq 64$ .

### Interpersonal Relations

**Social Relations (SAV/IPP/SHY/DSF):**  $SAV \leq 64$ .  $IPP \leq 64$ . Although he may have good social skills, he is shy, bashful, and reserved around others. He is unlikely to initiate conversations ( $SHY > 64$ ). He dislikes having people around him and prefers to be alone. He may never have had a close relationship. It is important to determine whether he has any type of social support system ( $DSF > 64$ ).

**Family Problems (FML):**  $FML \leq 64$ .

**Aggression (AGG):**  $AGG \leq 64$ .

**Delinquency/Antisocial Behavior (JCP):**  $JCP \leq 64$ .

### Other Problem Areas

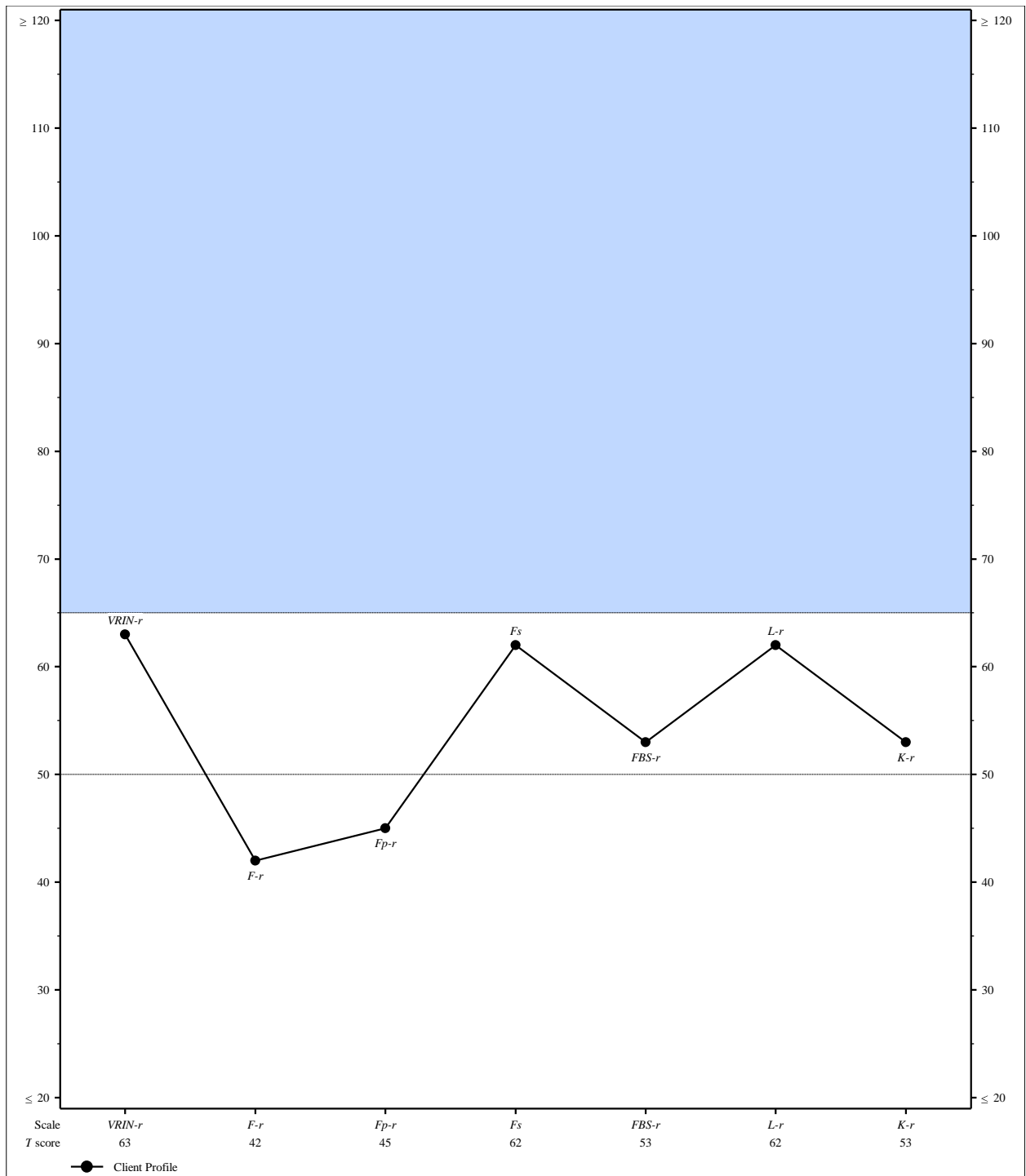
**Somatic Symptoms (RC1/GIC/HPC/NUC):**  $RC1 \leq 64$ .  $GIC \leq 64$ .  $HPC \leq 64$ .  $NUC \leq 64$ .

**Alcohol/Drug Abuse (SUB):**  $SUB \leq 64$ .

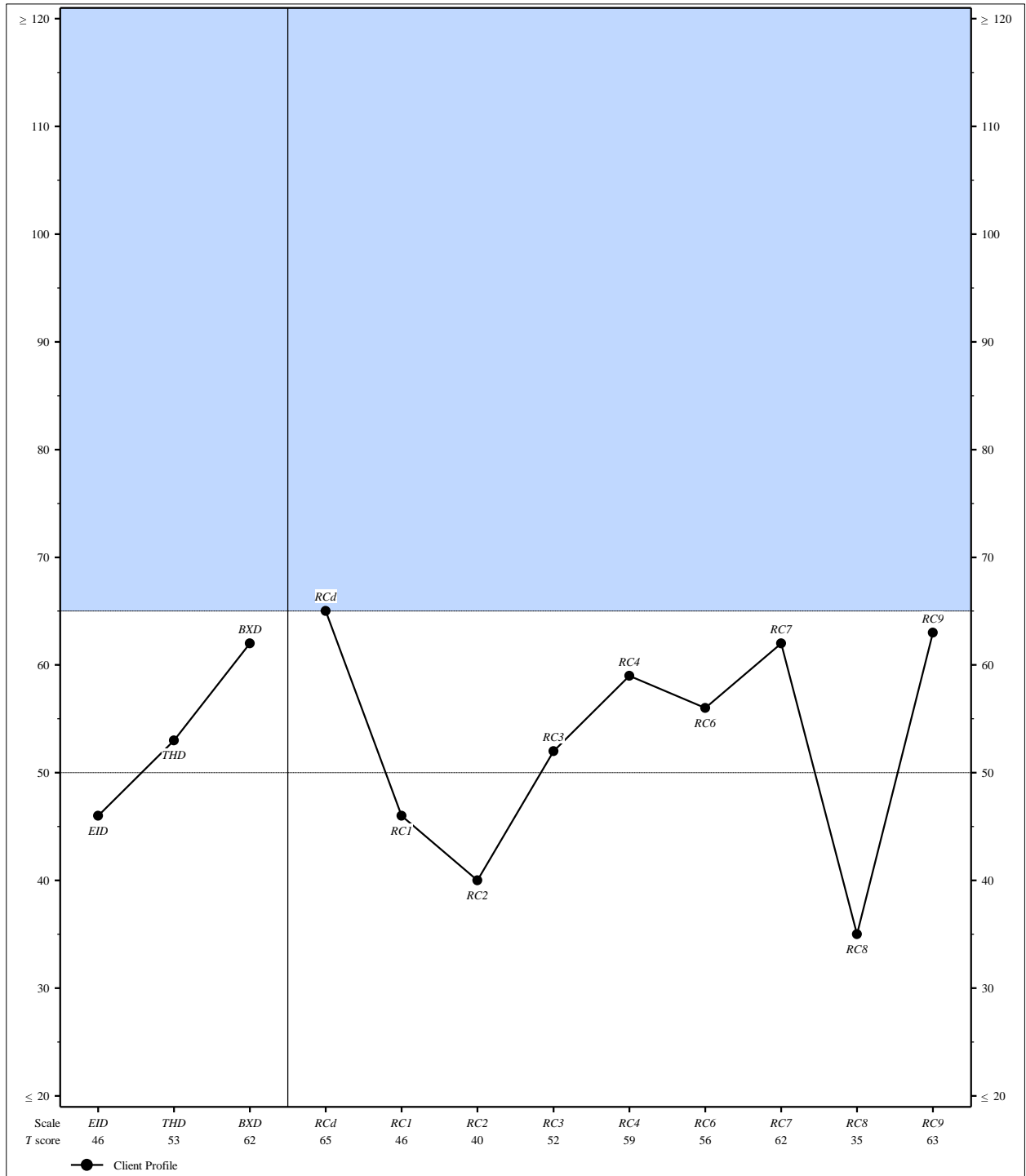
**Suicidal Ideation (SUI):**  $SUI \leq 64$ .

**Sleep Problems** Sleep Items not answered (5, 79, 149, 289).

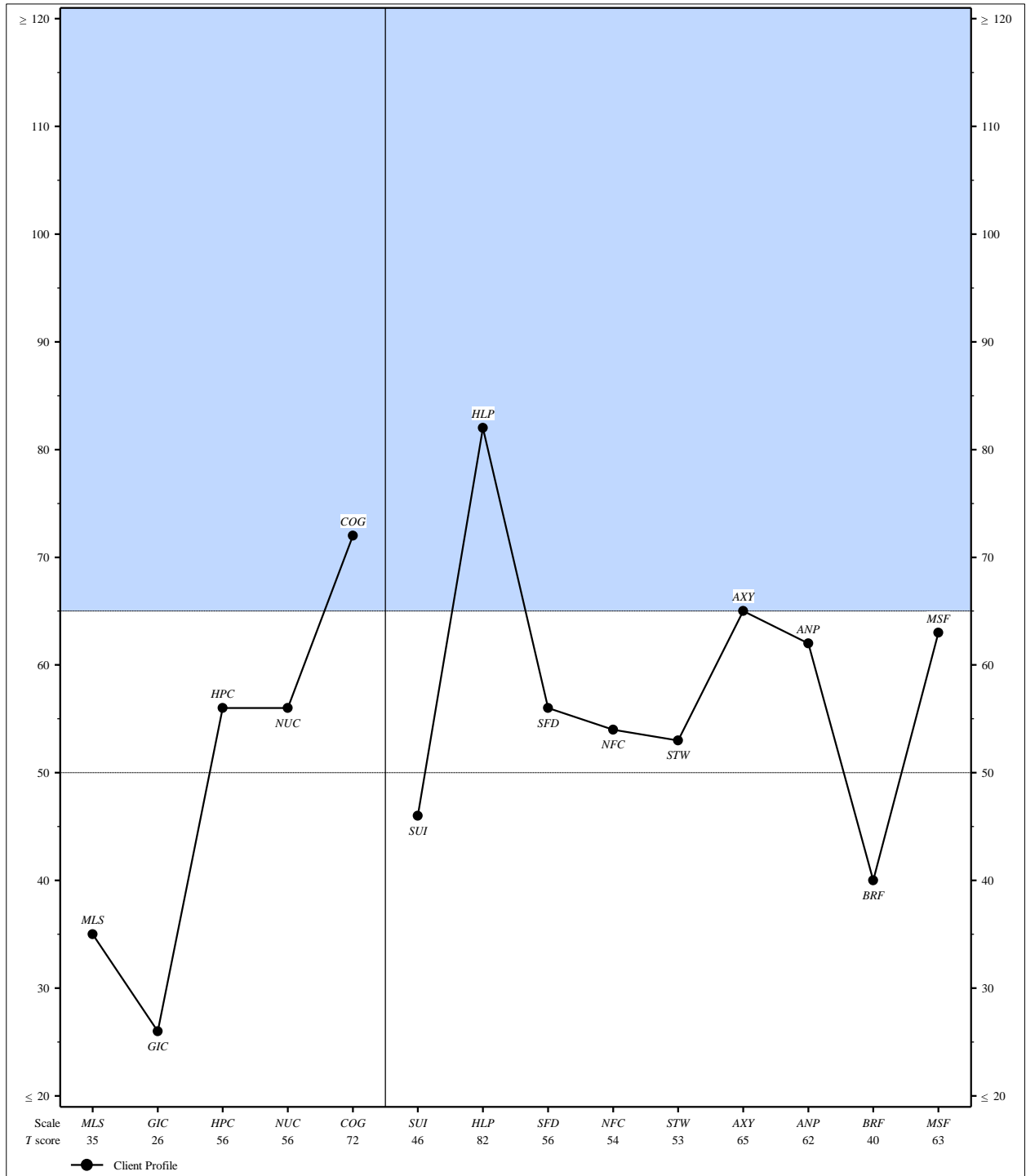
## Validity Scales



### Higher-Order (H-O) and Restructured Clinical (RC) Scales

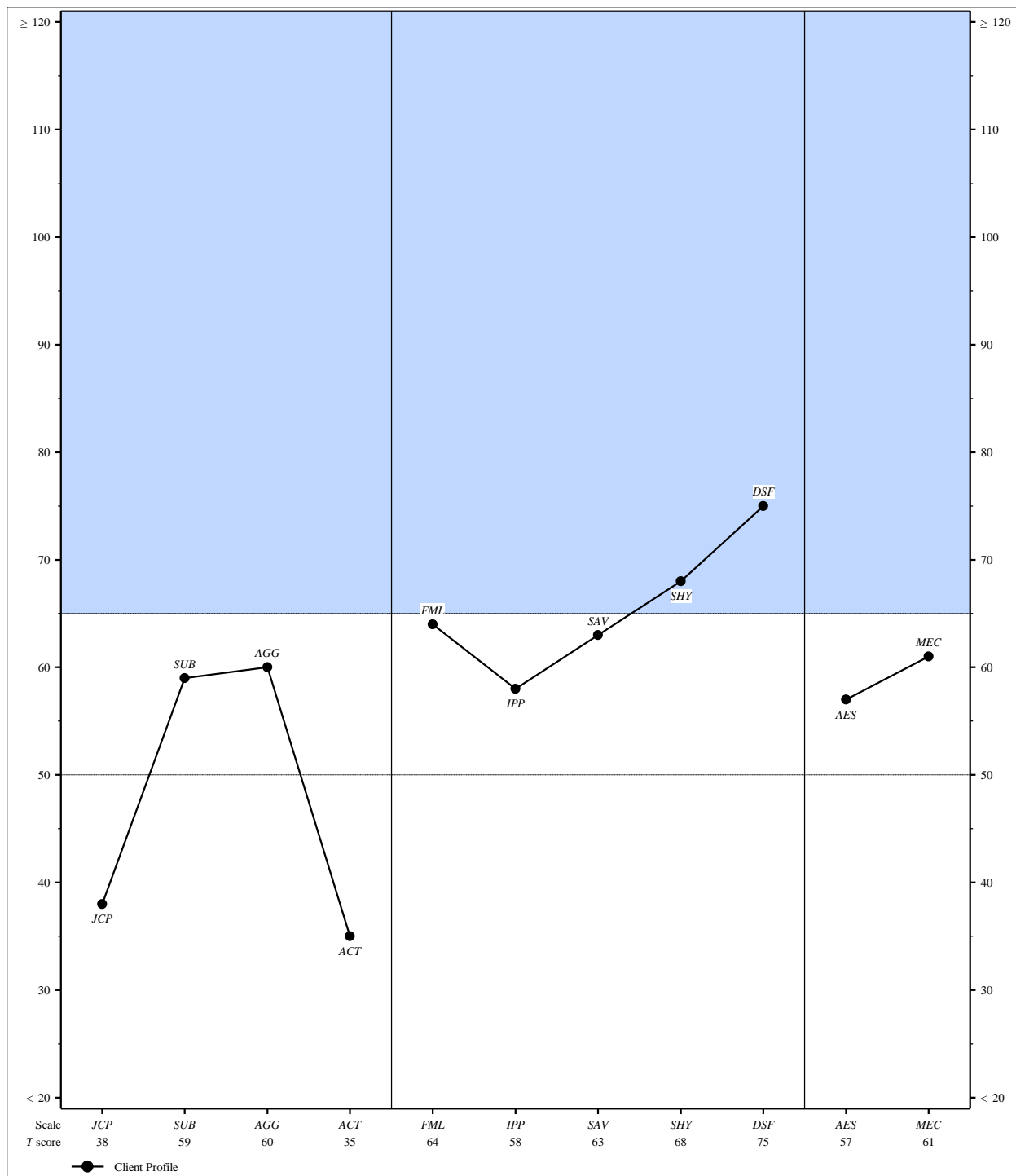


### Somatic/Cognitive and Internalizing Scales

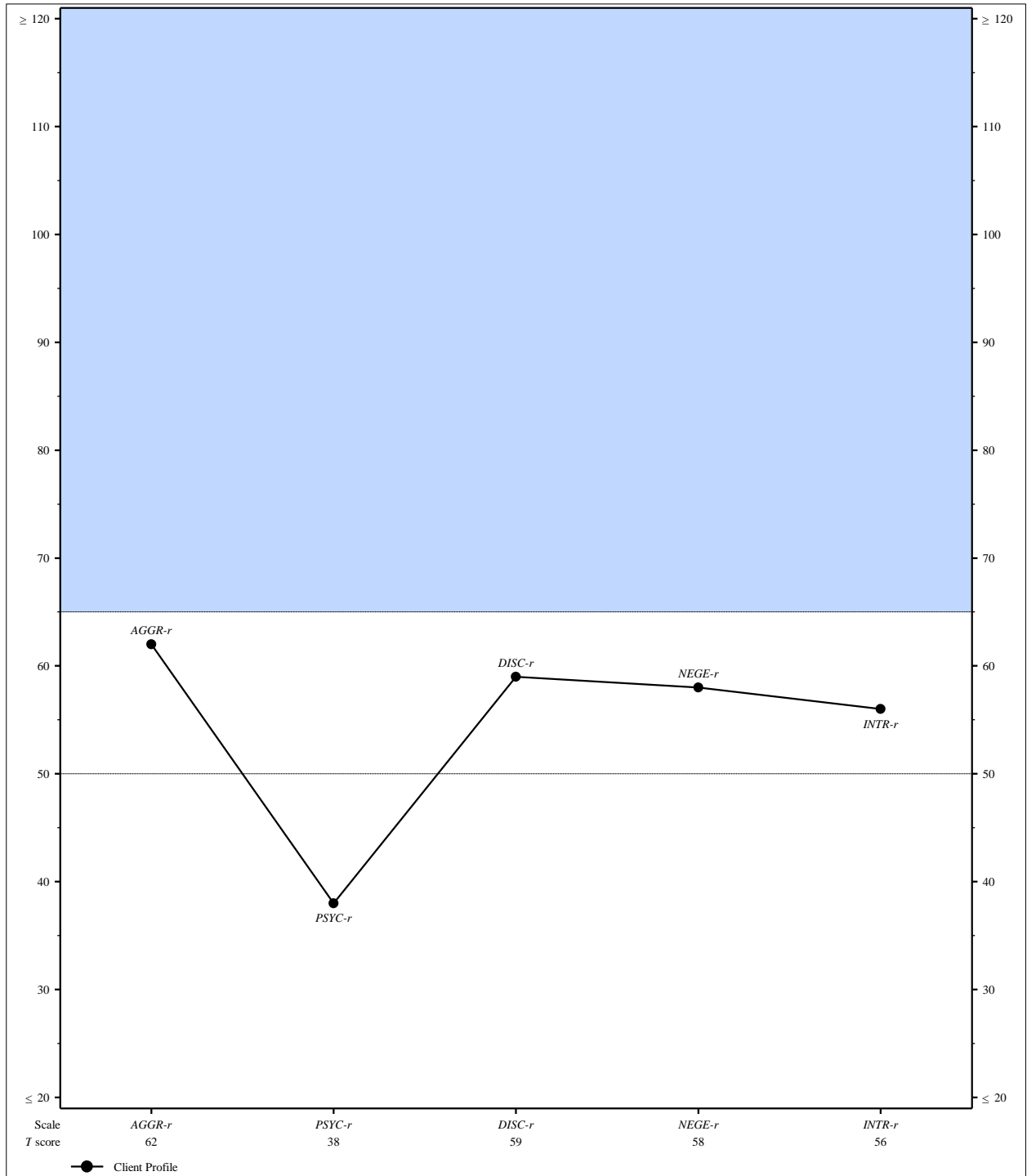




### Externalizing, Interpersonal, and Interest Scales



### PSY-5 Revised Scales



## Scale-by-Scale Interpretation

### Validity Scales

#### Cannot Say (?)

? = 0 (Raw Score)

No items were omitted.

#### Variable Response Inconsistency (VRIN-r)

VRIN-r = 63

He has made more inconsistent responses than is expected. He may have begun responding to the items inconsistently at some later point in the test. The clinician should query him about any possible change in responding to the items.

#### InFrequent Responses (F-r)

F-r = 42

T-scores at or below 44 indicate that he did not report the socially unacceptable or disturbing content represented in these items. He may be trying to provide a self-favorable report of psychopathology, or he may be a normal person who is very conventional, unassuming, and unpretentious.

#### InFrequent-Psychopathology Responses (F<sub>P</sub>-r)

F<sub>P</sub>-r = 45

He has endorsed the items accurately. Scale interpretation may proceed with confidence.

#### InFrequent Somatic Responses (F<sub>S</sub>)

F<sub>S</sub> = 62

He is reporting more unusual or atypical somatic symptoms than most medical patients with known medical problems.

#### Symptom Validity (FBS-r)

FBS-r = 53

No significant elevation was reported.

#### Uncommon Virtues (L-r)

L-r = 62

He may be slightly more conforming than usual and may have a tendency to resort to denial mechanisms.

#### Adjustment Validity (K-r)

K-r = 53

He has a proper balance between self-disclosure and self-protection. He has sufficient personal resources to desire and tolerate a psychological intervention. In higher socioeconomic class clients, a moderate level of personal distress is expected. The prognosis for a psychological intervention is good.

## Higher-Order (H-O) Scales

### Emotional/Internalizing Dysfunction (*EID*)

*EID* = 46

**Moods:** He has a normal level of general subjective distress and negative affect.

### Thought Dysfunction (*THD*)

*THD* = 53

**Cognitions:** He is reporting typical thought processes.

### Behavioral/Externalizing Dysfunction (*BXD*)

*BXD* = 62

**Interpersonal Relations:** He reports a balance between expressing and inhibiting his needs and wants behaviorally.

## Restructured Clinical (RC) Scales

### **Demoralization (RCd)**

RCd = 65

**Moods:** He reports that he is discouraged and generally demoralized with himself and his life. **Cognitions:** He is insecure and pessimistic and feels overwhelmed. He expects to fail or believes he has failed in various areas of his life.

### **Somatic Complaints (RC1)**

RC1 = 46

### **Low Positive Emotions (RC2)**

RC2 = 40

### **Cynicism (RC3)**

RC3 = 52

### **Antisocial Behavior (RC4)**

RC4 = 59

### **Ideas of Persecution (RC6)**

RC6 = 56

### **Dysfunctional Negative Emotions (RC7)**

RC7 = 62

### **Aberrant Experiences (RC8)**

RC8 = 35

### **Hypomanic Activation (RC9)**

RC9 = 63

## Somatic/Cognitive Complaint Scales

**Malaise (MLS)**

MLS = 35

**Gastrointestinal Complaints (GIC)**

GIC = 26

**Head Pain Complaints (HPC)**

HPC = 56

**Neurological Complaints (NUC)**

NUC = 56

**Cognitive Complaints (COG)**

COG = 72

**Cognitions:** He reports problems with his attention, memory, and concentration. He has unusual thoughts, and problems focusing his mind on any one thing.

## Internalizing Scales

### **Suicidal/Death Ideation (SUI)**

SUI = 46

### **Helplessness/Hopelessness (HLP)**

HLP = 82

**Cognitions:** He reports general negative cognitions reflecting his hopelessness, his pessimism, and the futility he perceives of trying to make changes in his life.

### **Self-Doubt (SFD)**

SFD = 56

### **Inefficacy (NFC)**

NFC = 54

### **Stress/Worry (STW)**

STW = 53

### **Anxiety (AXY)**

AXY = 65

**Moods:** He reports being anxious and easily frightened, and having nightmares every few nights.

### **Anger Proneness (ANP)**

ANP = 62

### **Behavior-Restricting Fears (BRF)**

BRF = 40

### **Multiple Specific Fears (MSF)**

MSF = 63

## Externalizing Scales

### Juvenile Conduct Problems (*JCP*)

*JCP* = 38

### Substance Abuse (*SUB*)

*SUB* = 59

### Aggression (*AGG*)

*AGG* = 60

### Activation (*ACT*)

*ACT* = 35

## Interpersonal Scales

### Family Problems (*FML*)

*FML* = 64

### Interpersonal Passivity (*IPP*)

*IPP* = 58

### Social Avoidance (*SAV*)

*SAV* = 63

### Shyness (*SHY*)

*SHY* = 68

*Interpersonal Relations:* Although he may have good social skills, he is shy, bashful, and reserved around others. He is unlikely to initiate conversations.

### Disaffiliativeness (*DSF*)

*DSF* = 75

*Interpersonal Relations:* He dislikes having people around him and prefers to be alone. He may never have had a close relationship. It is important to determine whether he has any type of social support system.

## Interest Scales

### Aesthetic Literary Interests (*AES*)

*AES* = 57

### Mechanical Physical Interests (*MEC*)

*MEC* = 61



## **Personality Psychopathology Five (PSY-5)- Revised Scales**

**Aggressiveness-Revised (AGGR-r)**

*AGGR-r = 62*

**Psychoticism-Revised (PSYC-r)**

*PSYC-r = 38*

**Disconstraint-Revised (DISC-r)**

*DISC-r = 59*

**Negative Emotionality/Neuroticism-Revised (NEGE-r)**

*NEGE-r = 58*

**Introversion/Low Positive Emotionality-Revised (INTR-r)**

*INTR-r = 56*

**End of Report**