

Report for: **Sam Sample**

BASIC REPORT

Gender: **Male**

Age: **30**

Marital Status: **Separated**

Client Type: **Outpatient (Never Hospitalized)**

Report Date: **July 24, 2021**

The **Psychological Screening Inventory - 2 (PSI-2)** is a screening test designed to identify characteristics of possible concern for further evaluation or follow-up. Users should be aware that false positives and false negatives will occur. However, the test is considered cost-effective in the use for which it was designed.

There are three sets of scales:

- **4 BASIC SCREENING SCALES** assessing major categories of psychological dysfunction (*major psychiatric disorder, significant antisocial characteristics, general psychological distress, and depression*), plus a measure of the personality trait *extroversion-introversion* and a measure of general test-taking *defensiveness*.
- **21 BRIEF CONTENT SCALES** that may yield additional information.
- **6 MISREPRESENTATION SCALES** for further analysis of the respondent's degree of cooperation vs. misrepresentation.

There are three possible designations for each scale:

- **Normal range** means that the respondent's score on the relevant scale is lower than the 85th percentile.
- **Possible concern** means that the score falls in the 85th to 94th percentile range.
- **Definite concern** means that the score is at or above the 95th percentile. For the Misrepresentation scales, scores at this level are considered to invalidate the test results.

Exceptions to these descriptions include the Expression (Ex) scale in the Basic Screening scales and the Brief Content scales PER (Likes to perform) and VSO (Verbal, socially outgoing). These scales reflect personality characteristics rather than psychopathology.

Assessing test-taking validity


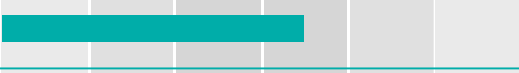


- In interpreting the PSI-2 test data, it is recommended that the scores on the general Defensiveness (De) scale and the Misrepresentation scales be considered first.

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Basic Screening Scales


The first four scales (the Basic Screening scales) reflect the four basic areas of psychological functioning that the PSI-2 was designed to assess (see scale descriptions on page 3). While the results are based on self-report, they are also backed by substantial research data. The *possible concern* category reflects scores ranging from the 85th to the 94th percentile based on a normal adult population. The *definite concern* category reflects scores at or above the 95th percentile based on a normal adult population.

Scale	Raw Score	Category	T Score	T Score						
				20	30	40	50	60	70	80
Major psychiatric disorder (AI scale)	27	normal range	54							
Significant antisocial characteristics (Sn scale)	30	normal range	55							
General psychological distress (Di scale)	66	definite concern	76							
Depression (Dp scale)	19	definite concern	67							

The **Expression (Ex)** scale reflects the personality trait of introversion-extroversion.

Scale	Raw Score	Category	T Score	T Score						
				20	30	40	50	60	70	80
Expression (Ex scale)	40	mid-range	50							

The **Defensiveness (De)** scale reflects general test-taking defensiveness.

Scale	Raw Score	Category	T Score	T Score						
				20	30	40	50	60	70	80
Defensiveness (De scale)	29	open	43							

Notes

The degree of openness vs. defensiveness should be considered in interpreting the scores on the four basic screening scales.

Interpretations should be considered to be tentative hypotheses, to be followed up if indicated by an individual evaluation.

Raw Score: Each raw score consists of the sum of the answers for the items belonging to the scale.

T Score: The scores in the **T Score** column have been standardized around a mean of 50 and a standard deviation of 10.

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Basic Screening Scale Descriptions

AI (Alienation)

The **AI** scale represents *major psychiatric disorder*, and was designed to assess the similarity of the respondent to persons who are hospitalized for psychiatric problems.

Sn (Social Nonconformity)

The **Sn** scale represents *significant antisocial characteristics*, and was designed to assess the similarity of the respondent to persons who have been involved with the legal system.

Di (Discomfort)

The **Di** scale represents *general psychological maladjustment*, and assesses the extent of the respondent's self-reported psychological distress.

Dp (Depression)

The **Dp** scale is a general screening scale for degree of *self-reported depression*, including depressive thoughts, feelings and behaviors.

Ex (Expression)

The **Ex** scale is a personality scale, representing the basic personality dimension of *extroversion/introversion* or undercontrol/overcontrol.

De (Defensiveness)

The **De** scale was designed to assess the general extent of *personal defensiveness* in the respondent's answers to the test questions.

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Brief Content Scales

The 21 Brief Content (BC) scales each describe a particular characteristic, and were designed to give whatever additional information can be found in the 139 items of the PSI-2. They are not intended to represent all of psychopathology. Because they are brief, only extreme scores should be considered meaningful, and should be considered simply as signaling areas for follow-up rather than as diagnostic information.

Scale	Raw Score	Category	T Score	T Score						
				20	30	40	50	60	70	80
1. CRD (Close relationship difficulties)	4	normal range	49							
2. LSE (Low self-esteem)	6	normal range	57							
3. DPF (Depressive feelings)	10	possible concern	60							
4. TDS (Thought disorder)	6	possible concern	62							
5. PAR (Paranoid)	2	normal range	44							
6. IAA (Isolated/alone/alienated)	3	normal range	47							
7. OUE (Odd/unusual experiences)	11	normal range	57							
8. SSR (Stimulus-seeking/risk-taking)	6	normal range	52							
9. DSH (Dysfunctional childhood home)	7	normal range	60							
10. CII (Careless/irresponsible/impulsive)	2	normal range	40							
11. UCN (Undercontrol)	5	normal range	53							
12. AGA (Aggression/anger)	9	normal range	56							
13. CCD (Childhood conduct disorder)	9	possible concern	61							
14. ANT (Antisocial characteristics)	2	normal range	45							
15. FLE (Fatigue/low-energy)	22	possible concern	66							
16. HPR (Health problems)	14	definite concern	86							
17. AXF (Anxious feelings)	10	definite concern	76							
18. MCP (Memory/concentration problems)	10	definite concern	68							
19. SAS (Somatic anxiety symptoms)	11	definite concern	78							
20. PER (Likes to perform)	10		57							
21. VSO (Verbal, socially outgoing)	11		51							

Raw Score: Each raw score consists of the sum of the answers for the items belonging to the scale.

T Score: The scores in the **T Score** column have been standardized around a mean of 50 and a standard deviation of 10.

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Misrepresentation Scales

The extent to which a respondent might have misrepresented his or her characteristics in one or more ways should be considered before interpreting the test as a whole. Although this information is given in general terms by the Defensiveness (De) scale, the six misrepresentation scales offer a finer-grained analysis of general test-taking attitudes and possible response distortion (see scale descriptions on page 6).

It is noted that problems with reading or language can yield deviant scores on these scales, particularly the Random Responding (Ra) scale. Also, although distortion is generally deliberate, it can be unintentional.

Scale	Raw Score	Category	T Score	T Score						
				20	30	40	50	60	70	80
SOE (Symptom overendorsement)	34	possible concern	64							
EPS (Erroneous psychiatric stereotype)	31	normal range	51							
EEV (Endorsement of excessive virtue)	45	normal range	45							
ESA (Endorsement of superior adjustment)	40	normal range	46							
Ra (Random responding)	32	possible concern	65							
HPO (Health problem overstatement)	42	definite concern	68							

Raw Score: Each raw score consists of the sum of the answers for the items belonging to the scale.

T Score: The scores in the **T Score** column have been standardized around a mean of 50 and a standard deviation of 10.

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Misrepresentation Scale Descriptions

SOE (Symptom overendorsement)

Assesses the extent to which a person in a normal population might have deliberately set out to exaggerate or indiscriminately endorse symptoms of psychopathology.

EPS (Erroneous psychiatric stereotype)

Distinguishes between actual psychiatric patients and persons who are merely claiming to be patients. It is thus another measure of symptom exaggeration.

EEV (Endorsement of excessive virtue)

Identifies persons who set out to portray themselves as very high in personal virtuousness.

ESA (Endorsement of superior adjustment)

Identifies persons within a normal population who deliberately attempt to claim very superior mental health adjustment.

Ra (Random responding)

Assesses the degree to which the person responds in a random rather than a comprehensible manner, perhaps due to an inadequate understanding of the PSI-2 items, or deliberately.

HPO (Health problem overstatement)

Assesses the extent to which a person might have attempted to exaggerate physical health problems.



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Administrative Indices

Item Responses

1-50: 2 2 1 3 3 3 1 1 2 2 2 3 2 3 2 3 3 0 3 2 2 0 0 3 0 0 2 0 3 2 3 0 0 0 2 3 3 0 2 2 0 0 1 0 1 2 1 2 3 0
 51-100: 0 2 2 1 2 1 2 3 2 2 2 3 0 1 1 1 2 2 0 3 3 2 2 1 2 0 1 2 0 3 3 3 1 0 0 2 3 3 0 3 3 2 2 3 3 3 0 3 2 0
 101-139: 3 3 0 0 0 0 3 2 3 2 2 0 3 3 3 3 0 0 3 3 3 3 3 0 0 1 2 2 3 3 2 2 2 2 1 2 2 3 1

Missing Responses

AI: 0	LSE : 0	DSH : 0	HPR: 0	EPS: 0
Sn: 0	DPF : 0	CII: 0	AXF: 0	EEV: 0
Di: 0	TDS : 0	UCN: 0	MCP: 0	ESA: 0
Dp: 0	PAR : 0	AGA: 0	SAS: 0	Ra: 0
Ex: 0	IAA : 0	CCD: 0	PER: 0	HPO: 0
De: 0	OUE : 0	ANT: 0	VSO: 0	
CRD : 0	SSR : 0	FLE: 0	SOE: 0	

Scales missing over 25% of their responses were not scored. The raw scores for scales with fewer missing responses were prorated.