**BASIC REPORT** 

Gender: Male Report Date: April 14, 2024

Age: **30** 

Marital Status: Separated

Client Type: Outpatient (Never Hospitalized)

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.

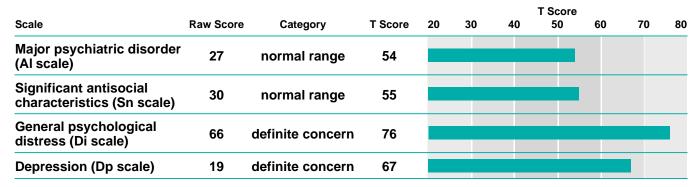
#### Assessing test-taking validity

 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.



# **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.



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



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

			T Score							
Scale	Raw Score	Category	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.



# **Basic Screening Scale Descriptions**

### Al (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.

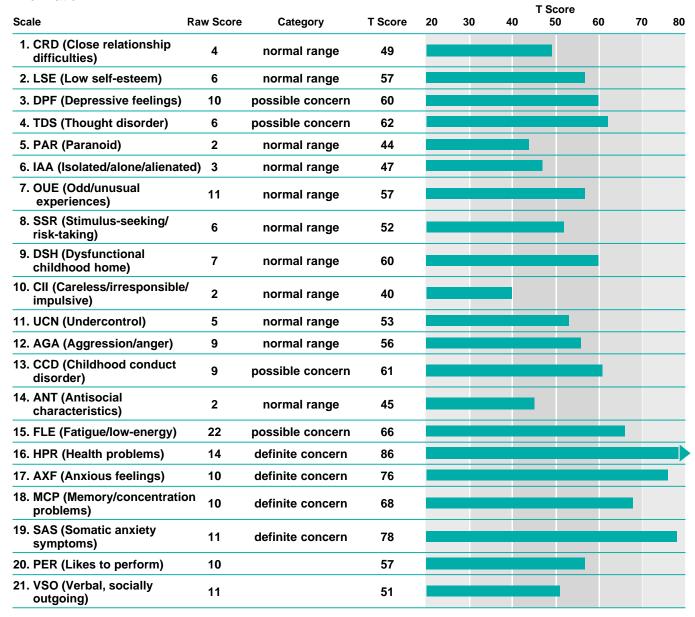
#### De (Defensiveness)

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



### **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.



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

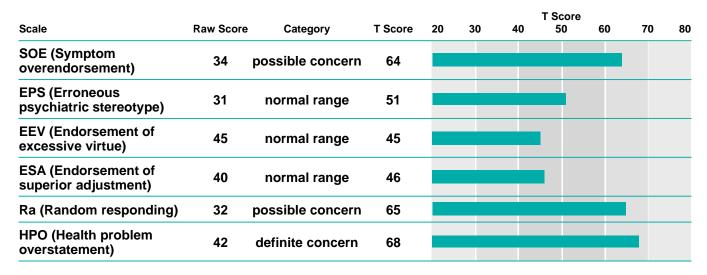
T Score: The scores in the T Score column have been standardized around a mean of 50 and a standard deviation of 10.



# **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.



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.



# **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.



## **Administrative Indices**

# **Item Responses**

## **Missing Responses**

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

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