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 "--".

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.

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

Raw Score:

<table>
<thead>
<tr>
<th>Scale</th>
<th>dem</th>
<th>som</th>
<th>lpe</th>
<th>cyn</th>
<th>asb</th>
<th>abx</th>
<th>dne</th>
<th>hpm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score</td>
<td>19</td>
<td>6</td>
<td>15</td>
<td>6</td>
<td>7</td>
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<td>9</td>
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T Score (plotted):

<table>
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<th>cyn</th>
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<tr>
<td>Score</td>
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<td>60</td>
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<td>48</td>
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<td>39</td>
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Non-Gendered T Score:

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<tr>
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<th>cyn</th>
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<th>dne</th>
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<tr>
<td>Score</td>
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<td>59</td>
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<td>49</td>
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<td>39</td>
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Response %:

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<th>cyn</th>
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<tr>
<td>%</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
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<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Harris-Lingoes Subscales</th>
<th>Non-Gendered</th>
<th>Raw Score</th>
<th>T Score</th>
<th>T Score</th>
<th>Resp %</th>
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<tbody>
<tr>
<td><strong>Depression Subscales</strong></td>
<td></td>
<td></td>
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<tr>
<td>Subjective Depression (D₁)</td>
<td>26</td>
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<td>97</td>
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<tr>
<td>Psychomotor Retardation (D₂)</td>
<td>13</td>
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<tr>
<td>Physical Malfunctioning (D₃)</td>
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<td>Mental Dullness (D₄)</td>
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<td>Brooding (D₅)</td>
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<tr>
<td><strong>Hysteria Subscales</strong></td>
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<tr>
<td>Denial of Social Anxiety (Hy₁)</td>
<td>3</td>
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<tr>
<td>Need for Affection (Hy₂)</td>
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<tr>
<td>Lassitude-Malaise (Hy₃)</td>
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<td>88</td>
<td>86</td>
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<tr>
<td>Somatic Complaints (Hy₄)</td>
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<td>Inhibition of Aggression (Hy₅)</td>
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<tr>
<td><strong>Psychopathic Deviate Subscales</strong></td>
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<td></td>
<td></td>
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<tr>
<td>Familial Discord (Pd₁)</td>
<td>5</td>
<td>71</td>
<td>69</td>
<td>100</td>
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<tr>
<td>Authority Problems (Pd₂)</td>
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<td>47</td>
<td>50</td>
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<tr>
<td>Social Imperturbability (Pd₃)</td>
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<td>34</td>
<td>100</td>
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<tr>
<td>Social Alienation (Pd₄)</td>
<td>6</td>
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<td>60</td>
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<tr>
<td>Self-Alienation (Pd₅)</td>
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<td>72</td>
<td>72</td>
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<tr>
<td><strong>Paranoia Subscales</strong></td>
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<tr>
<td>Persecutory Ideas (Pa₁)</td>
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<td>Poignancy (Pa₂)</td>
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<td>Naivete (Pa₃)</td>
<td>5</td>
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<td>50</td>
<td>100</td>
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<td><strong>Schizophrenia Subscales</strong></td>
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<tr>
<td>Social Alienation (Sc₁)</td>
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<tr>
<td>Emotional Alienation (Sc₂)</td>
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<td>87</td>
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<tr>
<td>Lack of Ego Mastery, Cognitive (Sc₃)</td>
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<tr>
<td>Lack of Ego Mastery, Conative (Sc₄)</td>
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<tr>
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<tr>
<td>Bizarre Sensory Experiences (Sc₆)</td>
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<td>45</td>
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<tr>
<td><strong>Hypomania Subscales</strong></td>
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<td>Amorality (Ma₁)</td>
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<td>44</td>
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<tr>
<td>Psychomotor Acceleration (Ma₂)</td>
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<tr>
<td>Imperturbability (Ma₃)</td>
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<td>36</td>
<td>100</td>
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<tr>
<td>Ego Inflation (Ma₄)</td>
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<tr>
<td><strong>Social Introversion Subscales</strong></td>
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<tr>
<td>Shyness/Self-Consciousness (Si₁)</td>
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<td>59</td>
<td>58</td>
<td>100</td>
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<tr>
<td>Social Avoidance (Si₂)</td>
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<td>62</td>
<td>64</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Alienation--Self and Others (Si₃)</td>
<td>12</td>
<td>71</td>
<td>70</td>
<td>100</td>
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</tbody>
</table>
### Content Component Scales

**Fears Subscales**
- Generalized Fearfulness (FRS<sub>1</sub>)
  - Raw Score: 0
  - T Score: 44
  - T Score: 43
  - Resp %: 100
- Multiple Fears (FRS<sub>2</sub>)
  - Raw Score: 5
  - T Score: 59
  - T Score: 54
  - Resp %: 100

**Depression Subscales**
- Lack of Drive (DEP<sub>1</sub>)
  - Raw Score: 12
  - T Score: 106
  - T Score: 103
  - Resp %: 100
- Dysphoria (DEP<sub>2</sub>)
  - Raw Score: 5
  - T Score: 82
  - T Score: 76
  - Resp %: 100
- Self-Depreciation (DEP<sub>3</sub>)
  - Raw Score: 5
  - T Score: 76
  - T Score: 77
  - Resp %: 100
- Suicidal Ideation (DEP<sub>4</sub>)
  - Raw Score: 3
  - T Score: 95
  - T Score: 96
  - Resp %: 100

**Health Concerns Subscales**
- Gastrointestinal Symptoms (HEA<sub>1</sub>)
  - Raw Score: 1
  - T Score: 57
  - T Score: 55
  - Resp %: 100
- Neurological Symptoms (HEA<sub>2</sub>)
  - Raw Score: 1
  - T Score: 47
  - T Score: 46
  - Resp %: 100
- General Health Concerns (HEA<sub>3</sub>)
  - Raw Score: 0
  - T Score: 40
  - T Score: 41
  - Resp %: 100

**Bizarre Mentation Subscales**
- Psychotic Symptomatology (BIZ<sub>1</sub>)
  - Raw Score: 0
  - T Score: 44
  - T Score: 44
  - Resp %: 100
- Schizotypal Characteristics (BIZ<sub>2</sub>)
  - Raw Score: 1
  - T Score: 47
  - T Score: 48
  - Resp %: 100

**Anger Subscales**
- Explosive Behavior (ANG<sub>1</sub>)
  - Raw Score: 0
  - T Score: 39
  - T Score: 39
  - Resp %: 100
- Irritability (ANG<sub>2</sub>)
  - Raw Score: 4
  - T Score: 56
  - T Score: 56
  - Resp %: 100

**Cynicism Subscales**
- Misanthropic Beliefs (CYN<sub>1</sub>)
  - Raw Score: 8
  - T Score: 55
  - T Score: 56
  - Resp %: 100
- Interpersonal Suspiciousness (CYN<sub>2</sub>)
  - Raw Score: 3
  - T Score: 48
  - T Score: 49
  - Resp %: 100

**Antisocial Practices Subscales**
- Antisocial Attitudes (ASP<sub>1</sub>)
  - Raw Score: 6
  - T Score: 49
  - T Score: 51
  - Resp %: 100
- Antisocial Behavior (ASP<sub>2</sub>)
  - Raw Score: 3
  - T Score: 59
  - T Score: 64
  - Resp %: 100

**Type A Subscales**
- Impatience (TPA<sub>1</sub>)
  - Raw Score: 5
  - T Score: 63
  - T Score: 64
  - Resp %: 100
- Competitive Drive (TPA<sub>2</sub>)
  - Raw Score: 2
  - T Score: 44
  - T Score: 45
  - Resp %: 100

**Low Self-Esteem Subscales**
- Self-Doubt (LSE<sub>1</sub>)
  - Raw Score: 10
  - T Score: 90
  - T Score: 88
  - Resp %: 100
- Submissiveness (LSE<sub>2</sub>)
  - Raw Score: 4
  - T Score: 69
  - T Score: 66
  - Resp %: 100

**Social Discomfort Subscales**
- Introversion (SOD<sub>1</sub>)
  - Raw Score: 12
  - T Score: 71
  - T Score: 72
  - Resp %: 100
- Shyness (SOD<sub>2</sub>)
  - Raw Score: 5
  - T Score: 63
  - T Score: 62
  - Resp %: 100

**Family Problems Subscales**
- Family Discord (FAM<sub>1</sub>)
  - Raw Score: 3
  - T Score: 50
  - T Score: 49
  - Resp %: 100
- Familial Alienation (FAM<sub>2</sub>)
  - Raw Score: 2
  - T Score: 58
  - T Score: 59
  - Resp %: 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.

<table>
<thead>
<tr>
<th>Negative Treatment Indicators Subscales</th>
<th>Raw Score</th>
<th>Non-Gendered T Score</th>
<th>T Score</th>
<th>Resp %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Motivation (TRT₁)</td>
<td>9</td>
<td>95</td>
<td>90</td>
<td>100</td>
</tr>
<tr>
<td>Inability to Disclose (TRT₂)</td>
<td>2</td>
<td>52</td>
<td>53</td>
<td>100</td>
</tr>
</tbody>
</table>
OMITTED ITEMS

Those items for which there is no response or for which both true and false responses have been entered are considered "omitted." The potential for lowering the elevation of individual scales or the overall profile and rendering the administration invalid increases with the number of omitted items. Defensiveness, confusion, carelessness, and indecision are among the common reasons for omitting items. Examination of the content of the items that were omitted by the respondent may reveal specific problem areas or suggest reasons for their not responding appropriately to all items. Following are the items that were omitted:

501. Item Content Omitted.

CRITICAL ITEMS

The MMPI-2 contains a number of items whose content may indicate the presence of psychological problems when endorsed in the deviant direction. These "critical items," developed for use in clinical settings, may provide an additional source of hypotheses about the respondent. However, caution should be used in interpreting critical items since responses to single items are very unreliable and should not be treated as scores on full-length scales -- for example, an individual could easily mismark or misunderstand a single item and not intend the answer given. The content of the items and the possibility of misinterpretation make it important to keep the test results strictly confidential. Special caution should be exercised when interpreting these items in nonclinical settings.

Acute Anxiety State (Koss-Butcher Critical Items)

2. Item Content Omitted.
3. Item Content Omitted.
5. Item Content Omitted.
28. Item Content Omitted.
39. Item Content Omitted.
140. Item Content Omitted.
218. Item Content Omitted.
223. Item Content Omitted.
301. Item Content Omitted.
444. Item Content Omitted.

Depressed Suicidal Ideation (Koss-Butcher Critical Items)

9. Item Content Omitted.
38. Item Content Omitted.
65. Item Content Omitted.
71. Item Content Omitted.
75. Item Content Omitted.
92. Item Content Omitted.
95. Item Content Omitted.

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.
ITEMS NOT SHOWN

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.

130. Item Content Omitted.
146. Item Content Omitted.
215. Item Content Omitted.
233. Item Content Omitted.
273. Item Content Omitted.
303. Item Content Omitted.
411. Item Content Omitted.
454. Item Content Omitted.
485. Item Content Omitted.
518. Item Content Omitted.

Threatened Assault (Koss-Butcher Critical Items)
213. Item Content Omitted.

Situational Stress Due to Alcoholism (Koss-Butcher Critical Items)
125. Item Content Omitted.
518. Item Content Omitted.

Mental Confusion (Koss-Butcher Critical Items)
31. Item Content Omitted.
299. Item Content Omitted.
325. Item Content Omitted.

Persecutory Ideas (Koss-Butcher Critical Items)
17. Item Content Omitted.
124. Item Content Omitted.
241. Item Content Omitted.
259. Item Content Omitted.
314. Item Content Omitted.

Antisocial Attitude (Lachar-Wrobel Critical Items)
35. Item Content Omitted.
105. Item Content Omitted.

Family Conflict (Lachar-Wrobel Critical Items)
21. Item Content Omitted.
83. Item Content Omitted.
125. Item Content Omitted.

Somatic Symptoms (Lachar-Wrobel Critical Items)
28. Item Content Omitted.
111. Item Content Omitted.
164. Item Content Omitted.
464. Item Content Omitted.
Anxiety and Tension (Lachar-Wrobel Critical Items)
17. Item Content Omitted.
218. Item Content Omitted.
223. Item Content Omitted.
261. Item Content Omitted.
299. Item Content Omitted.
301. Item Content Omitted.

Sleep Disturbance (Lachar-Wrobel Critical Items)
5. Item Content Omitted.
39. Item Content Omitted.
140. Item Content Omitted.

Depression and Worry (Lachar-Wrobel Critical Items)
2. Item Content Omitted.
3. Item Content Omitted.
65. Item Content Omitted.
73. Item Content Omitted.
75. Item Content Omitted.
130. Item Content Omitted.
165. Item Content Omitted.
273. Item Content Omitted.
303. Item Content Omitted.
339. Item Content Omitted.
411. Item Content Omitted.
415. Item Content Omitted.
454. Item Content Omitted.

Deviant Beliefs (Lachar-Wrobel Critical Items)
259. Item Content Omitted.
314. Item Content Omitted.

Problematic Anger (Lachar-Wrobel Critical Items)
213. Item Content Omitted.

End of Report

NOTE: This and previous pages of this report contain trade secrets and are not to be released in response to requests under HIPAA (or any other data disclosure law that exempts trade secret information from release). Further, release in response to litigation discovery demands should be made only in accordance with your profession's ethical guidelines and under an appropriate protective order.