

Profile Report

PATIENT INFORMATION

Patient Identification Number: 12345

Patient Name (Optional) Mr. R	Test Date 03/19/2016
Gender Male	Relationship Status Never Married
Age 55	Education Level High School Graduate
Pain Diagnostic Category Back Injury	Race White
Date of Injury (Optional) 11/15/2015	Setting Physical Rehabilitation

PROVIDER INFORMATION

Care Provider (Optional) Robert Helper, PhD	Practice/Program (Optional) Multidisciplinary Pain Clinic
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This BHI 2 report is intended to serve as a source of clinical hypotheses about possible biopsychosocial complications affecting medical patients. It can also be used with the BBHI™ 2 test to serve as a repeated measure of pain, function, and other symptoms to track a patient's progress in treatment.

The BHI 2 test was normed on a sample of physically injured patients and a sample of community subjects. This report is based on comparisons of this patient's scores with scores from both of these groups. BHI 2 results should be used by a qualified clinician in combination with other clinical sources of information to reach final conclusions. If complex biopsychosocial syndromes are present, it is generally necessary to consider medical diagnostic conclusions before forming a psychological diagnosis.



Daniel Bruns and John Mark Disorbio

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[2.1/1/QG]

ALWAYS LEARNING PEARSON

BHI™ 2 Profile Report ID: 12345 03/19/2016, Page 2 Mr. R

Battery for Health Improvement 2

Patient Profile

Scales	Raw	T Sc	cores	T-Score Profile	Rating	l,		
Scales	Score	Patient	Comm.	1-3core Frome	Training	Rating Perce		
Validity Scales		•	\Diamond	10 40 50 60	90			
Self-Disclosure	46	34	38	*	Low			
Defensiveness	21	67	62	√////	Very High			
Physical Symptom Sca	les			<i>\{ { } </i> <i> </i> }				
Somatic Complaints	43	68	81		─ ⇔ High			
Pain Complaints	54	64	73	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	High			
Functional Complaints	21	64	78		– ⇔ High			
Muscular Bracing	19	66	73		High			
Affective Scales	•		•	<i>\ </i>				
Depression	1	30	34	*	Ext. Low			
Anxiety	9	40	43	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Low			
Hostility	8	39	40	\$	Low			
Character Scales								
Borderline	7	40	42		Low			
Symptom Dependency	4	36	43	*	Low			
Chronic Maladjustment	3	33	35	*	Very Low			
Substance Abuse	0	39	39	\	Low			
Perseverance	34	58	57	*	Average			
Psychosocial Scales			•					
Family Dysfunction	17	63	65	*	High			
Survivor of Violence	13	62	67		High			
Doctor Dissatisfaction	11	55	59		Average			
Job Dissatisfaction	11	45	48		Average			

INTERPRETING THE PROFILE:

- The Patient Profile plots T scores based on both patient and community norms. Both sets of T scores should be used for evaluating a patient's BHI 2 profile.
- In general, community norms are more sensitive, but less specific, in detecting elevated levels of complaints than are patient norms. In other words, community norms are better at detecting lower levels of problematic symptoms than patient norms, but at the risk of increased false-positive findings.
- T scores within the 40 to 60 range are typical for the normative patient and community samples (approximately 68% of the samples scored within this range). Scores above or below the average range are clinically significant (in both cases, approximately 16% of the samples scored above a T score of 60 or below a T score of 40).
- Patient and community T scores are represented by black diamonds (♠) and white diamonds (♦), respectively. A black diamond outside the average range indicates problems that are unusual even for patients, while a white diamond outside the average range indicates that a problem may be present but at a level that is not uncommon for patients. If both diamonds are outside the average range, this indicates a problem area that is relatively unusual for both patients and members of the community. If only the white diamond is visible, the T scores are overlapping.
- The length of the bar shows a scale score's difference from the mean score. The longer the bar, the more the score deviates from the mean and the more unusual it is.
- Scale ratings are based on patient percentile scores, with the exception of moderately high and moderately low ratings, which are outside the average T-score range for community members but inside the average T-score range for patients.
- The percentile indicates the percentage of subjects in the patient sample who had scores lower than this patient's score on a particular scale.

BHI™ 2 Profile Report 1D: 12345 03/19/2016, Page 3 Mr. R

VALIDITY

This patient did not endorse any of the validity items. This reduces the risk that this profile was produced by random responding. This patient reported an unusually low level of psychological concerns, possibly indicating a self-protective way of thinking that may introduce a strong positive bias to his responses. Only 6% of patients reported a level of psychological problems this low. In addition, this level of self-disclosure is seen in only 26% of patients who were asked to fake good.

CRITICAL ITEMS

The patient responded to the following critical items in a manner that is likely to be of concern to the clinician.

Compensation Focus

Item omitted. (Agree)
Item omitted. (Strongly Agree)

Entitlement

Item omitted. (Agree)

Dysfunctional Pain Cognitions

Item omitted. (Agree)

Perceived Disability

Item omitted. (Strongly Agree)

Sleep Disorder

Item omitted. (Strongly Disagree)

Survivor of Violence

Item omitted. (Strongly Agree)

Note

Item numbers and content are included in the actual reports. To protect test security, the item details do not appear in this sample report.

Battery for Health Improvement 2

Content Area Profile 1

		Content Area Range ²								
Content Area	Parent Scale	Very Low	Low	Typical	High	Very High				
Physical Symptom Content Areas										
Vegetative Depression	SOM			<u> </u>						
Autonomic Anxiety										
Cognitive Dysfunction										
Somatization Symptoms										
PTSD/Dissociation.										
Disability and Work Limitations	FNC			- {/////7///////		—				
ADL Limitations	FNC									
Affective Content Areas				<i>\ - \ - \ - </i>						
Medical Reactive Depression	DEP	│								
Severe Depression	DEP	•	-	<u> </u>						
Dysthymia	DEP	—	•	- {////////////////////////////////////						
Death Fears										
Illness Anxiety										
Generalized Anxiety			_	- (////////////////////////////////////						
Aggressiveness										
Angry Feelings										
Cynical Beliefs	HOS		$- \blacklozenge$							
Character Content Areas				<i>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</i>						
Identity Disturbance	BOR									
Self-Destructiveness	BOR									
Unstable Relationships				<u> </u>						
Somatic Secondary Gain	SYM			<u> </u>						
Dysfunctional Somatic Cognitions										
Impulsiveness			-	<u> </u>						
Social Dysfunction			_ `	<u> </u>						
Substance Abuse History			•							
Rx Abuse Risk			-	\////\ \						
Self-Efficacy						_				
Proactive Optimism										
Psychosocial Content Areas				\ <i> </i>						
Family Conflict	FAM									
Lack of Support				\////\ / //////////////////////////////						
Incompetent Doctors										
Unempathic Doctors										
Boss Dissatisfaction	DOC									
Company Dissatisfaction.										
Co-Worker Dissatisfaction										
Intrinsic Job Dissatisfaction										
	JOB	-								
Critical Item Content Areas ³				·- <i>\{\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>						
Compensation Focus				V/////////////////////////////////////		•				
Entitlement				V/////\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
Dysfunctional Pain Cognitions			-	- (////////////////////////////////////						
Suicidal Ideation										
Violent Ideation	N/A	1	\longrightarrow	- V////////////////////////////////////						

¹The Content Area Profile can be used to further interpret the BHI 2 scale scores by providing additional information about the types of items the patient endorsed. Although individual content areas should not be interpreted in the same manner as the BHI 2 scales because they do not have the same level of reliability and validity, they may help explain scale-level elevations by providing additional information about the nature of the patient's responses.

²The Content Area Range uses a simplified version of the rating system found on the BHI 2 Patient Profile. For each content area, the black horizontal line indicates the overall range of content area ratings in the patient sample. The black diamond indicates the individual patient's content area placement relative to those patients. Approximately two-thirds of the patient population fall within the Typical range, as indicated by the vertical shaded area. High and Very High content area ratings closely approximate the 84th and 95th percentile ranks, respectively, and Low and Very Low ratings closely approximate the 16th and 5th percentiles, respectively.

³Critical Item content areas were derived from critical items rather than from scales.

BHI™ 2 Profile Report 1D: 12345 03/19/2016, Page 5 Mr. R

End of Report

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BHI™ 2 Profile Report 1D: 12345 03/19/2016, Page 6 ID: n 12345 Mr. R

ITEM RESPONSES

1:	5	2:	2	3:	4	4:	3	5:	3	6:	3	7:	9	8:	10	9:	6	10:	9
11:	10	12:	8	13:	10	14:	2	15:	3	16:	3	17:	3	18:	3	19:	3	20:	1
21:	1	22:	1	23:	1	24:	1	25:	1	26:	1	27:	3	28:	3	29:	1	30:	3
31:	3	32:	1	33:	1	34:	0	35:	3	36:	3	37:	0	38:	0	39:	0	40:	0
41:	2	42:	3	43:	0	44:	1	45:	1	46:	0	47:	2	48:	1	49:	1	50:	0
51:	3	52:	0	53:	0	54:	1	55:	1	56:	1	57:	3	58:	2	59:	1	60:	1
61:	3	62:	0	63:	0	64:	0	65:	1	66:	1	67:	2	68:	0	69:	1	70:	1
71:	1	72:	0	73:	0	74:	1	75:	1	76:	1	77:	1	78:	3	79:	1	80:	1
81:	2	82:	0	83:	1	84:	1	85:	1	86:	0	87:	1	88:	3	89:	3	90:	1
91:	0	92:	1	93:	3	94:	0	95:	0	96:	1	97:	1	98:	1	99:	0	100:	0
101:	1	102:	0	103:	1	104:	1	105:	0	106:	2	107:	1	108:	1	109:	1	110:	0
111:	1	112:	2	113:	0	114:	0	115:	2	116:	1	117:	0	118:	0	119:	1	120:	0
121:	0	122:	0	123:	0	124:	0	125:	0	126:	3	127:	3	128:	0	129:	0	130:	2
131:	0	132:	1	133:	1	134:	0	135:	0	136:	0	137:	0	138:	0	139:	0	140:	3
141:	1	142:	2	143:	2	144:	2	145:	3	146:	2	147:	3	148:	0	149:	0	150:	0
151:	0	152:	0	153:	0	154:	2	155:	0	156:	0	157:	0	158:	3	159:	0	160:	3
161:	2	162:	2	163:	0	164:	1	165:	1	166:	0	167:	3	168:	3	169:	2	170:	0
171:	3	172:	0	173:	2	174:	0	175:	2	176:	2	177:	1	178:	0	179:	0	180:	1
181:	1	182:	0	183:	0	184:	1	185:	0	186:	0	187:	3	188:	0	189:	1	190:	3
191:	2	192:	2	193:	0	194:	0	195:	1	196:	1	197:	2	198:	3	199:	2	200:	0
201:	1	202:	3	203:	2	204:	2	205:	1	206:	1	207:	1	208:	1	209:	2	210:	2
211:	1	212:	1	213:	2	214:	0	215:	0	216:	3	217:	0						