Multidimensional Perfectionism Scale

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Profile Report

Client Name:	**Sarah Smith**
Gender:	Female
Administration Age:	25
Test Duration:	0 minutes, 55 seconds
Administration Date:	June 17, 2004

This Profile Report is intended for the sole use of the test administrator and is not to be shown or presented to the respondent or any other party.
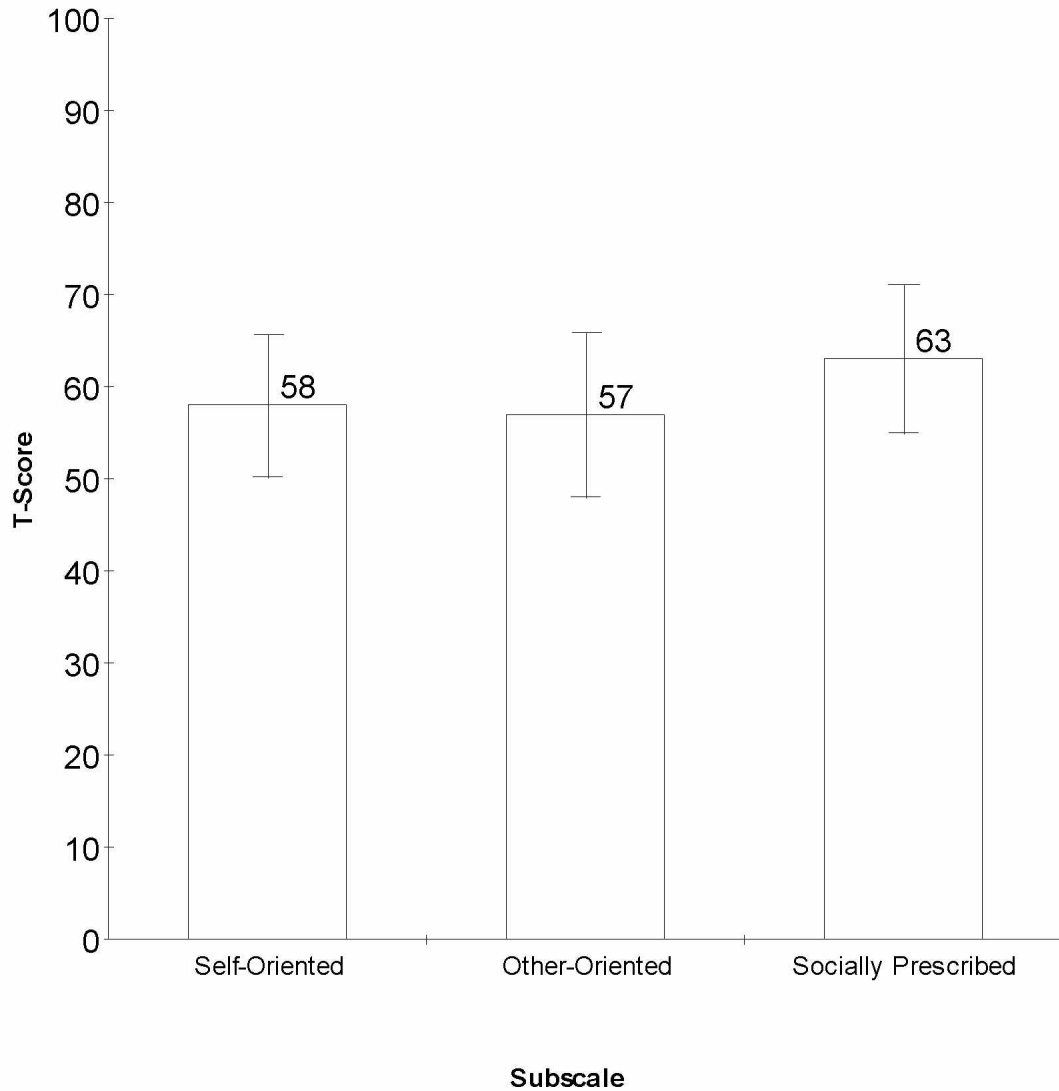
Introduction

The Multidimensional Perfectionism Scale (MPS) assesses levels of multidimensional perfectionism in adults. This report provides information about the client's scores and how they compare with the scores of the normative sample. See the MPS Technical Manual (published by MHS) for more information about the MPS and the interpretation of its results.

This computerized report is an interpretive aid and should not be given to clients or used as the sole criterion for clinical diagnosis or intervention. Administrators are cautioned against drawing unsupported interpretations. Combining information from this with information gathered from other psychometric measures, as well as from interviews and discussions with the client, will give the practitioner or service provider a more comprehensive view of the client than might be obtained from any one source. This report is based on an algorithm that produces the most common interpretations for the scores that have been obtained. Administrators should review the client's responses to specific items to ensure that these generic interpretations apply.

This report compares Sarah Smith's subscale scores to individuals in a normal population. See the Appendix for comparisons to a clinical population.

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Subscale T-Scores

The following graph displays Sarah Smith's T-scores for each of the three MPS subscales: Self Oriented, Other Oriented, and Socially Prescribed perfectionism. The error bars in the graph below represent the 95% confidence interval for each subscale score. For information on the calculation of confidence intervals, see the MPS Technical Manual.

Summary of Subscale Scores

The following table summarizes Sarah Smith's scale scores and gives general data about how Sarah Smith compares to the group norms. Please refer to the MPS Technical Manual for more information on the interpretation of these results.

Scale	Raw Score	T-Score	Guideline	Common Characteristics of High Scorers
Self-Oriented	78	58	Moderate—may demonstrate some vulnerability	High and/or unrealistic expectations for themselves; strive compulsively toward their goals; experience little sense of satisfaction; avoid things that can't be done well; engage in self-punishment and self-criticism.
Other-Oriented	64	57	Moderate—may demonstrate some vulnerability	Very high and/or unrealistic expectations for others; expect others to strive compulsively; hostile; authoritarian; dominating; motivated by a need to reduce others' worth, thereby elevating their self-worth.
Socially Prescribed	71	63	Elevated—may demonstrate marked pathological outcomes and vulnerabilities	Perceive that people want them to be perfect; self-worth depends on meeting these expectations; making mistakes is highly unacceptable; have marked fears of rejection and fears of looking foolish.

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Item Response Table
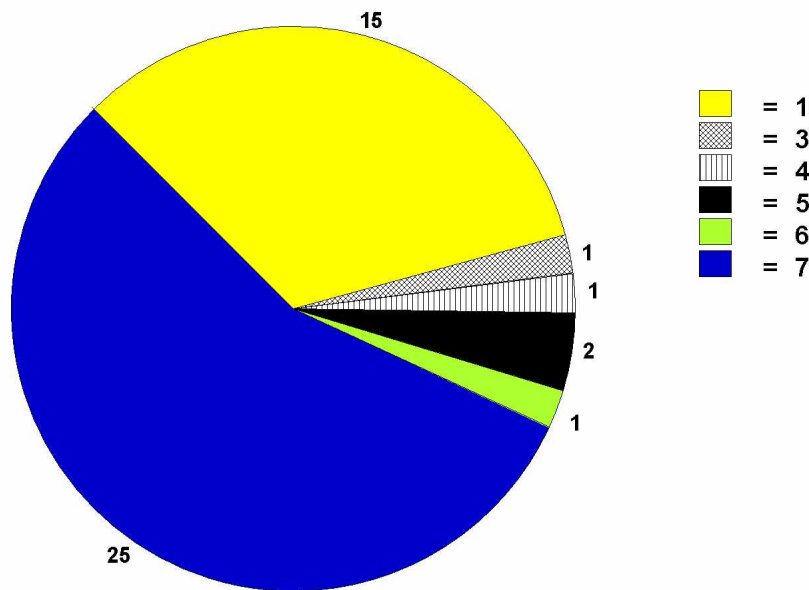
This table lists Sarah Smith's responses to each item.

Item	Response	Item	Response	Item	Response	Item	Response	Item	Response
1	4	10	7*	19	7*	28	7	37	7*
2	2*	11	7	20	7	29	7	38	7*
3	3*	12	7*	21	7*	30	7*	39	7
4	3*	13	7	22	7	31	7	40	7
5	3	14	7	23	7	32	7	41	7
6	7	15	7	24	7*	33	7	42	7
7	7	16	7	25	7	34	7*	43	7*
8	7*	17	7	26	7	35	7	44	7*
9	7*	18	7	27	7	36	7*	45	7*

*These items require reverse coding for interpretation. See the MPS Technical Manual for more information about reversed-score items.

Response Key: Item responses are based on a continuum: 1 = "Strongly Disagree" to 7 = "Strongly Agree."
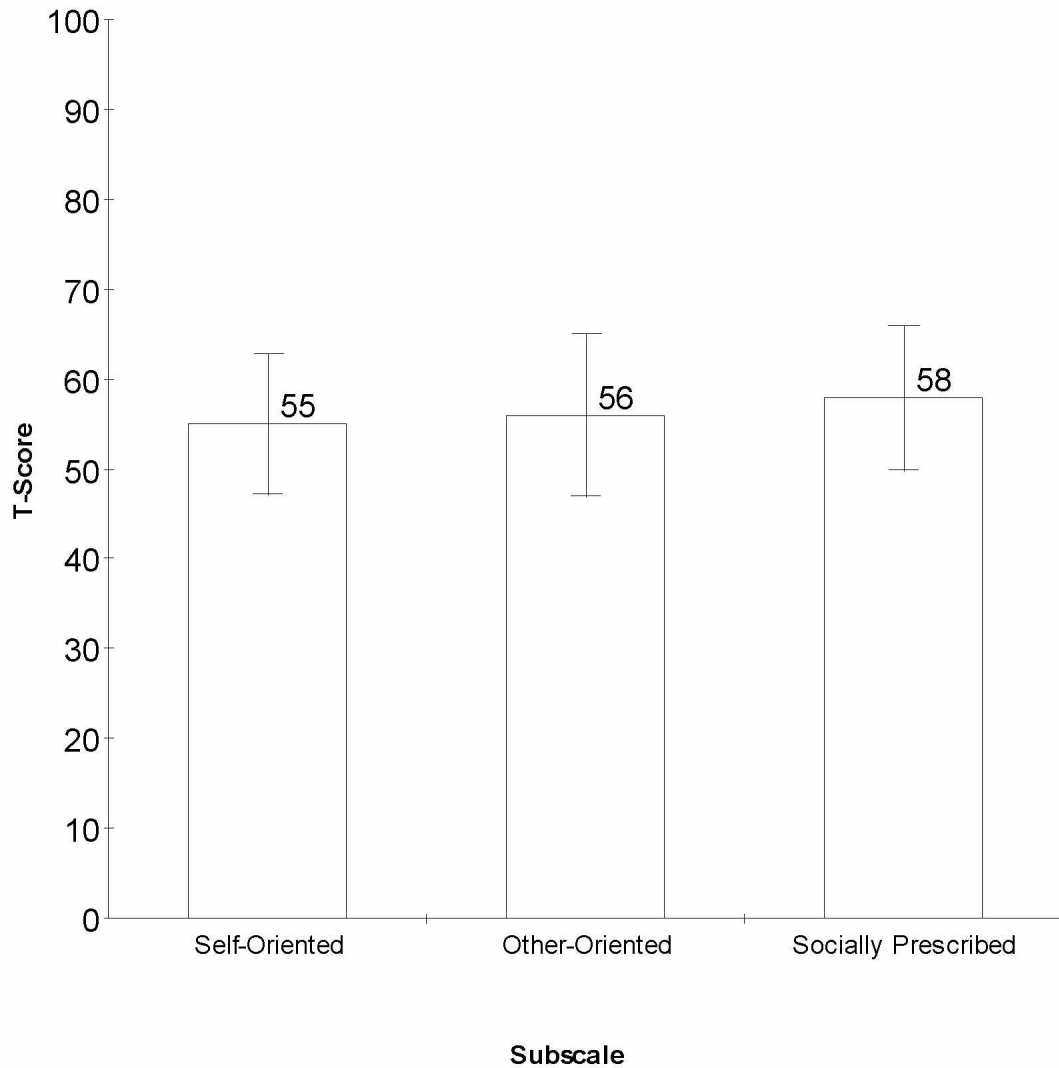
Response Frequencies

The following chart indicates the frequency with which Sarah Smith endorsed each of the seven response options.

Legend:
- = 1
- = 3
- = 4
- = 5
- = 6
- = 7

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Appendix

Comparison to Clinical Norms

The following graph displays Sarah Smith's T-scores for each of the three MPS subscales, as compared to a clinical population. The error bars in the graph below represent the 95% confidence interval for each subscale score.

Date Printed: August 31, 2004
End of Report