

Coolidge Assessment Battery (CAB)

Summary - Narrative Report

Name: **Case 1**
ID Number: **1000**
Gender: **Female**
Age: **46**
Report Date: **January 9, 2020**

This report is based on the answers provided by Case 1 when completing the CAB, a measure designed to assess personality disorders, neuropsychological dysfunctioning, and psychopathological syndromes. Scores show how the individual compares with other people in terms of the characteristics measured by the CAB.

The CAB score interpretations contained in this report are based on psychological theory and actuarial research. Under no circumstances should they be used for clinical or policy decision-making in the absence of corroborating data such as behavioral observations, biographical information, clinical interview, current social and personal circumstances, and other psychological test results. As with any psychological test findings, they should be reviewed by a mental health professional trained in the use and interpretation of psychological test results. Use of this instrument by persons without such a background is clearly inappropriate.

Contents:

- Profile
- Responses
- Administrative Indices
- Critical Items
- Drug and Alcohol Items
- Axis I Scales
- Personality Disorder Scales (Axis II)
- Neuropsychological Dysfunction Assessment
- Executive Functions Assessment
- Personality Change Due to Medical Condition
- Hostility Scales
- Other Scales
- Normal Personality Scales
- Non-Normative Scales
- Possible Therapy Issues
- Diagnostic Possibilities

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CAB Profile

Scale	Interpret	Scores			T Scores						
		Raw	%	T	<20	30	40	50	60	70	80>
Axis I											
Anxiety	Normal	57	58	52							
Depression	Normal	47	69	55							
Post-Traumatic Stress	ELEVATED	39	90	63							
Psychotic Thinking	Normal	19	58	52							
Schizophrenia	Normal	85	50	50							
Social Phobia	Normal	6	2	30							
Withdrawal	Normal	23	8	36							
Axis II											
Antisocial	Normal	84	62	53							
Avoidant	Normal	36	42	48							
Borderline	Normal	56	73	56							
Dependent	Normal	61	66	54							
Depressive	Normal	13	38	47							
Histrionic	ELEVATED	90	93	65							
Narcissistic	Normal	49	7	35							
Obsessive-Compulsive	Normal	66	21	42							
Paranoid	Normal	29	3	31							
Passive-Aggressive	ELEVATED	63	93	65							
Sadistic	Normal	20	5	34							
Schizoid	Normal	13	14	39							
Schizotypal	Normal	42	46	49							
Self-Defeating	Normal	48	79	58							

CAB Profile (continued)

Scale	Interpret	Scores			T Scores						
		Raw	%	T	<20	30	40	50	60	70	80>
Neuropsychological Dysfunction											
Overall Neuropsychological	ELEVATED	61	99	87							
Language Functions	ELEVATED	15	99	77							
Memory and Concentration	ELEVATED	26	99	82							
Neurosomatic Symptoms	ELEVATED	20	99	83							
Executive Functions of the Frontal Lobe											
Overall Executive Functions	ELEVATED	47	99	73							
Decision Difficulty	ELEVATED	22	96	67							
Planning Problems	ELEVATED	14	97	69							
Task Completion Difficulty	ELEVATED	18	97	69							
Personality Change due to Medical Condition											
Aggression	Normal	11	12	38							
Apathy	Normal	13	10	37							
Disinhibition	ELEVATED	22	98	71							
Emotional Lability	ELEVATED	24	93	65							
Paranoid	Normal	12	5	34							
Hostility											
Anger	Normal	28	38	47							
Dangerousness	Normal	26	24	43							
Impulsiveness	ELEVATED	22	97	69							
Other											
Apathy	Normal	47	31	45							
Emotional Lability	ELEVATED	35	90	63							
Indecisiveness	ELEVATED	32	98	71							
Maladjustment	Normal	131	54	51							
Introversion-Extraversion	Extraverted	77	73	56							

Explanation of Profile Terms

- Interpret** This is a global interpretation of how a respondent relates to others on a given scale. If the respondent receives a T-score of 60 or above on a given scale, their score is considered **ELEVATED**, or above average. If a respondent receives a T-score of 59 or less, their score is considered **Normal**.
- Raw Score** This score is the number of statements the respondent endorsed for each scale. A high raw score indicates that the respondent endorsed many of the scale's statements.
- % Score** The percentile score indicates the percentage of people who completed the CAB and received a score lower than the respondent.
- T Score** This score (standardized using a mean of 50 and a standard deviation of 10) compares the respondent's raw score for each scale with those of a representative group.

CAB Responses

Item Number Responses
 1 - 25: 4 1 4 3 3 2 1 4 3 1 1 3 3 4 1 2 1 1 4 4 2 3 1 2 4
 26 - 50: 3 1 1 3 4 1 3 4 1 3 3 4 3 1 1 2 1 1 2 3 3 3 4 2 1
 51 - 75: 3 1 1 1 2 1 4 2 4 3 1 3 4 4 2 4 2 3 4 1 3 1 2 2 2
 76 - 100: 1 1 1 1 2 1 1 2 1 1 2 1 1 3 4 3 1 2 2 1 3 4 1 1 1
 101-125: 1 4 4 1 4 3 2 1 1 4 1 3 4 1 1 2 3 1 3 1 2 1 3 1 3
 126-150: 4 1 2 4 3 1 4 3 2 1 1 4 4 1 3 4 4 1 1 4 1 4 2 1 3
 151-175: 1 3 4 4 3 4 4 3 4 1 1 3 4 1 2 4 2 2 2 4 1 3 4 1 1
 176-200: 4 1 1 4 3 2 1 1 1 3 1 3 1 2 3 3 2 3 1 1 1 3 1 4 2
 201-225: 3 2 3 2 2 1 3 3 2 1 1 4 3 4 1 4 2 3 2 1 1 3 1 2 1

* = Unscorable Response

CAB Administrative Indices

Answer Choice	Frequency	Score	T-Score	<20	30	40	50	60	70	80>
0 = No Response		0	44							
1 = Strongly False (SF)		85	60							
2 = More False than True (MF)		40	41							
3 = More True than False (MT)		52	51							
4 = Strongly True (ST)		48	63							

	Count	0 High
Unscorable Responses	0	1

	Count	Normal	Random
Random Responding	3		

The random responding profile is within normal limits.

	Score	T-Score	Faking Bad	Normal	Faking Good
Tendency to Look Good or Bad	49	35			

The subject may be trying to look bad or may genuinely feel bad.

	Score	T-Score	Denial	Normal
Tendency to Deny Blatant Pathology	197	57		

The subject appears to be within normal limits on the Tendency to Deny Pathology scale.

301.9 Passive-Aggressive Personality Disorder T-Score 65 Percentile 93

The responses suggest that Case 1 fails at tasks even when capable, works slowly or badly on unwanted tasks, is forgetful, rates personal performance higher than others do, resents other's helpful suggestions, avoids or postpones making decisions, seeks forgiveness after feeling angry, procrastinates, is occupationally irresponsible, lacks initiative, is easily irritated and is seen as not pulling her weight.

Executive Function Scales - Interpretation

Analysis of the executive function scales results in the following interpretation:

Executive Dysfunction T-Score 73 Percentile 99

Case 1 is reporting symptoms consistent with moderate to severe executive dysfunction.

Decision Difficulties T-Score 67 Percentile 96

The responses suggest that Case 1 requires others to make important decisions, is dependent on others, avoids or postpones making decisions, allows others to make important decisions, does not enjoy making decisions and lacks initiative.

Planning Problems T-Score 69 Percentile 97

The responses suggest that Case 1 procrastinates, dislikes making plans for vacation/leisure, is unconcerned with details, lists, and schedules and dislikes organizing.

Task Completion Difficulties T-Score 69 Percentile 97

The responses suggest that Case 1 fails at tasks even when capable, maintains unrealistic standards, avoids or postpones making decisions, fails to finish tasks because of organizational needs and procrastinates.

Neuropsychological Scales - Interpretation

Analysis of the neuropsychological scales results in the following interpretation:

Neuropsychological Dysfunction T-Score 87 Percentile 99

Case 1 is reporting symptoms consistent with a diagnosis of moderate to severe brain dysfunction. A neuropsychological evaluation may be warranted.

Diagnostic Possibilities

The CAB profile indicates the following diagnostic possibilities:

Histrionic traits
Neuropsychological Dysfunction
Passive-Aggressive traits
Post-traumatic Stress Disorder

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