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LAQ Score Report

Page 1 of 13

# LAQ

## Life Assessment Questionnaire

**Patient:** Andrea Stafford**SSN:** 123-45-6789**Date of Birth:** 11/04/1956**Sex:** female**Date Tested:** 05/17/2003**Reviewed by:** Blake Tearnan, PhD

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The Life Assessment Questionnaire (LAQ) was designed to help clinicians better understand the accuracy and honesty of symptoms reported by patients complaining of chronic pain and disability. The majority of the LAQ requires patients to indicate if they are experiencing various physical and psychological symptoms. They are queried about symptom complaints across all major bodily systems. Patients are also asked questions measuring a variety of beliefs such as cynicism and general health. There are 32 scales on the LAQ.

Because the LAQ is in the process of being validated, normative and other empirical data are limited. The results should be considered tentative and only used as a possible source of hypotheses regarding the veracity of the patient's self-report of symptoms. No decisions about treatment or diagnoses should be made solely on the results of the LAQ.

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**LAQ - Life Assessment Questionnaire**

by

Blake H. Tearnan, Ph.D.

The Life Assessment Questionnaire (LAQ) is part of the Pain Assessment Series  
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Published and distributed by:  
HealthNetSolutions.com  
4790 Caughlin Parkway Ste. 160  
Reno, NV 89509  
Phone: (888) 286-9302  
Fax: (775) 825-5363  
Email: hns@charter.net  
Website: www.healthnetsolutions.com

## LAQ EXECUTIVE SUMMARY

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female

### Background Information

Marital Status: Living With Someone But Not Married  
 Currently Employed: 8-11 Months  
 Highest Educational Level Attained: High School Graduate  
 Injury and Pain Development: Suddenly, And Immediately  
 Injury and Pain Onset: 05/05/2002  
 Primary Pain Location: Foot  
 Secondary Pain Location: Leg,foot,toes  
 Average Pain Intensity: 9  
 Past Work Injury Claims: 0  
 Past Personal Injury Claims: No  
 Past SSDI Filings: 1  
 Attorney: Yes  
 Current Injury Related to Legal Suit: Yes

| Scales                            | Patient's<br>Mean<br>Score | Range Normative<br>Mean | Patient's Range<br>T-Score |
|-----------------------------------|----------------------------|-------------------------|----------------------------|
| <b>Validity Scales I</b>          |                            |                         |                            |
| Variability                       | 1.12                       | 2.29                    | 20.00 Low                  |
| Neutrality                        | 3.75                       | 16.70                   | 34.25 Low                  |
| Opposite Item Reliability         | 80.95                      | 65.91                   | 63.25 High                 |
| Similar Item Reliability          | 88.24                      | 73.74                   | 62.62 High                 |
| <b>Validity Scales II</b>         |                            |                         |                            |
| Maximum-Minimum First Half        | 83.45                      | 37.35                   | 89.40 High                 |
| Maximum-Minimum Overall           | 84.40                      | 36.33                   | 90.78 High                 |
| Maximum-Minimum Second Half       | 85.37                      | 35.29                   | 90.55 High                 |
| <b>Unusual Symptoms</b>           |                            |                         |                            |
| Nonsensical Symptoms              | 5.28                       | 1.25                    | 98.48 High                 |
| Physician Critical List           | 5.71                       | 1.53                    | 98.00 High                 |
| Rare                              | 5.89                       | 1.12                    | 104.97 High                |
| Unusual Pairings                  | 5.50                       | 2.30                    | 79.64 High                 |
| <b>Impression Management</b>      |                            |                         |                            |
| Lack of Medical Comprehensiveness | 4.56                       | 3.03                    | 61.35 High                 |
| Projected Disability              | 6.63                       | 5.45                    | 59.73 Normal               |
| Projected Suffering               | 7.00                       | 4.27                    | 71.63 High                 |
| Projected Virtue                  | 6.14                       | 5.34                    | 59.13 Normal               |
| Treatment Unresponsiveness        | 6.50                       | 4.09                    | 63.40 High                 |
| <b>Symptom Endorsement I</b>      |                            |                         |                            |
| Cardiovascular                    | 6.00                       | 2.00                    | 78.71 High                 |

|                                |      |      |            |
|--------------------------------|------|------|------------|
| Gastrointestinal               | 5.19 | 1.90 | 79.03 High |
| Musculoskeletal                | 6.60 | 3.23 | 78.97 High |
| Neurological                   | 5.71 | 2.43 | 81.11 High |
| <b>Symptom Endorsement II</b>  |      |      |            |
| Dermatological                 | 5.89 | 1.60 | 88.96 High |
| Endocrine                      | 6.60 | 2.30 | 83.34 High |
| Pulmonary                      | 6.14 | 1.12 | 99.39 High |
| U/G                            | 5.88 | 2.44 | 85.29 High |
| <b>Symptom Endorsement III</b> |      |      |            |
| General Malaise                | 6.78 | 4.19 | 71.32 High |
| Pain                           | 6.31 | 3.67 | 77.61 High |
| Psychological Complaints       | 6.08 | 3.18 | 74.44 High |
| Unbearable Pain                | 7.00 | 3.57 | 74.29 High |
| <b>Belief Patterns</b>         |      |      |            |
| Cynicism                       | 4.36 | 2.97 | 64.25 High |
| Entitlement                    | 6.50 | 4.10 | 62.34 High |
| Narcissism                     | 4.83 | 2.67 | 66.90 High |
| <b>General Health</b>          |      |      |            |
| Poor Health                    | 5.84 | 3.78 | 71.32 High |

Motivational factors are 3 areas of possible motivation which might in part explain the response style of the patient. These 3 areas include:

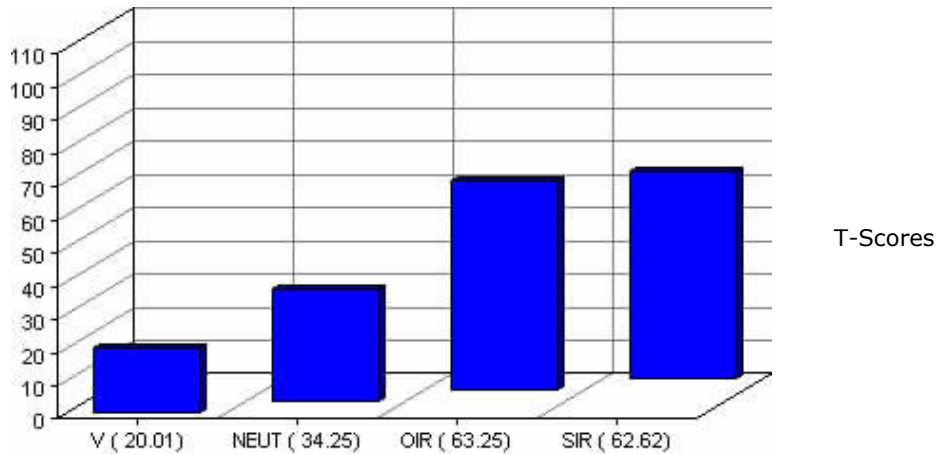
- 1) Litigation: Is the patient litigating a claim
- 2) Financial: Is the patient receiving disability payments or expecting a large financial settlement
- 3) Adoption of Sick Role: Did the patient endorse a high (>60) number of items suggesting dependency on the health care system and/or adoption of the sick role.

#### Motivational Factors

|                           |     |
|---------------------------|-----|
| Adoption of Sick Role     | Low |
| Disability Payments       | Yes |
| Expectation of Settlement | No  |
| Financial                 | Yes |
| Hopeful of Settlement     | No  |
| Litigation                | Yes |

**LIFE ASSESSMENT QUESTIONNAIRE TEST  
VALIDITY SCALES I**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



### Validity Scales I Interpretation

#### Variability (V)

Scores falling between 40 and 60 (i.e., between +1 and -1 SD of the normative mean) on this scale suggest that the patient's symptom endorsement varied at a normal level compared to the normative sample. Scores exceeding 60 indicate a great deal of variability. Scores below 40 indicate very little variability. However, low scores suggest the patient's self-report may not provide clinically significant information and may not accurately reflect his/her true level of pain-related disability.

#### Neutrality (NEUT)

Scores above 65 on this scale (>1.5 SDs above the normative mean) indicate the patient showed a tendency to endorse a high number of neutral responses (3's and 4's). Scores this high or above suggest the patient may have been overly cautious in his/her response or may not have sufficiently understood the item content.

#### Opposite Item Reliability (OIR)

This scale consists of 21 pairs of items with opposing content. Normal to High values (>40) indicate dissimilar answers were made to items with opposing content (i.e., the patient's responses were consistent).

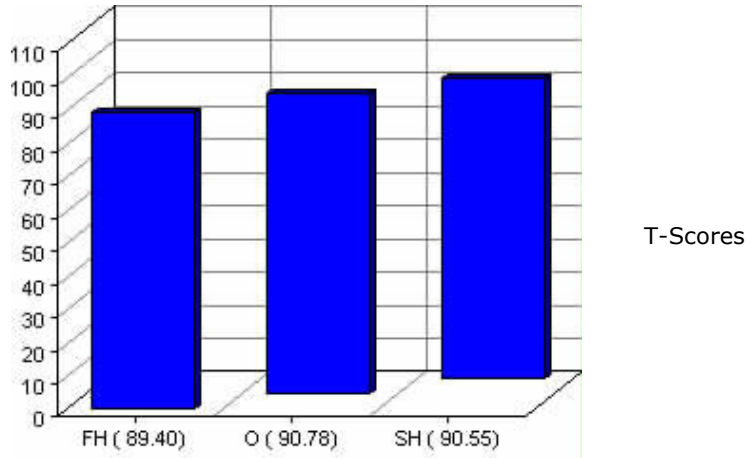
#### Similar Item Reliability (SIR)

This scale consists of 17 pairs of items with similar content. Normal to High Scores (>40) indicate that similar answers were made to items with similar content (i.e., the patient's responses were consistent).

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
VALIDITY SCALES II**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



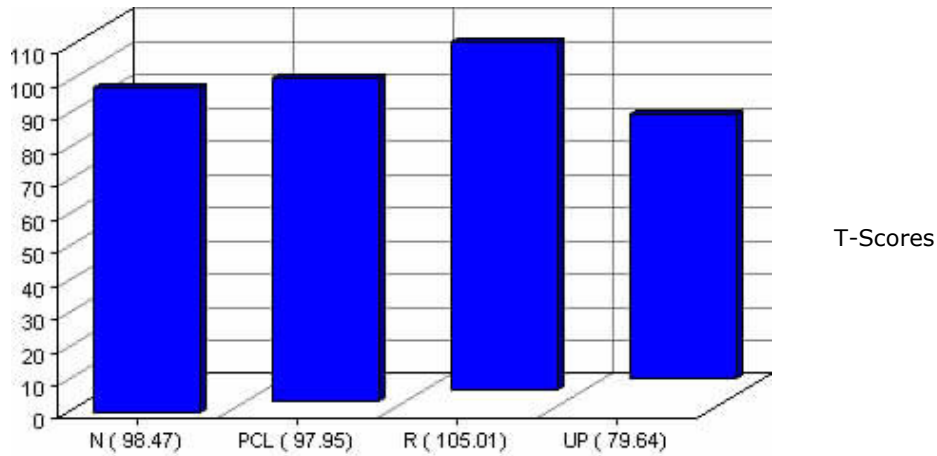
**Validity Scales II Interpretation**

|                                  |  |
|----------------------------------|--|
| Maximum-Minimum First Half (FH)  | High scores (>60) reflect an exaggerated endorsement of physical and psychiatric symptoms for the first half of symptoms listed. Low scores (<40) suggest a tendency to minimize the symptom presentation. |
| Maximum-Minimum Overall (O)      | High scores (>60) reflect an exaggerated endorsement of physical and psychiatric symptoms overall. Low scores (<40) suggest a tendency to minimize symptom presentation.                                   |
| Maximum-Minimum Second Half (SH) | High scores (>60) reflect an exaggerated endorsement of physical and psychiatric symptoms for the second half of symptoms listed. Low scores (<40) suggest a tendency to minimize symptom presentation.    |

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### LIFE ASSESSMENT QUESTIONNAIRE TEST UNUSUAL SYMPTOMS

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



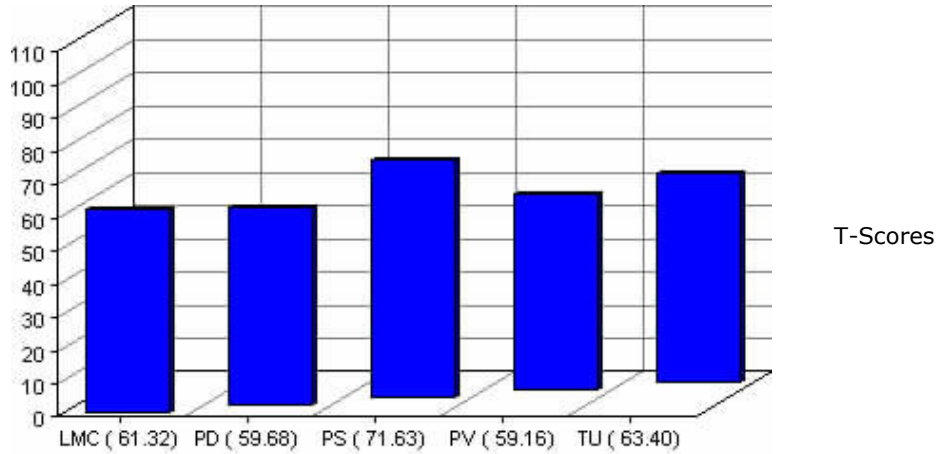
#### Unusual Symptoms Interpretation

|                               |  |
|-------------------------------|--|
| Nonsensical Symptoms (N)      | High scores (>60) indicate an endorsement of symptoms which are nonsensical and highly unlikely, such as "The steps I take when walking are longer in stride than they were before my injury."   |
| Physician Critical List (PCL) | The PCL Scale measures the extent to which a patient endorsed items identified as suspicious and highly suggestive of possible deception by a national group of physician pain specialists. Scores greater than 60 are considered high.                                  |
| Rare (R)                      | High scores (>60) indicate an endorsement of items which are rare and unusual for patients experiencing persistent pain, such as "I have fainted more than once since my injury."  |
| Unusual Pairings (UP)         | This scale measures the tendency to endorse pairs of symptom complaints that by themselves are not unusual, but when paired with another symptom are highly unlikely, such as "I get dizzy when my muscles cramp and spasm." Scores greater than 60 are considered high. |

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### LIFE ASSESSMENT QUESTIONNAIRE TEST IMPRESSION MANAGEMENT

Patient: Andrea Stafford  
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 Date of Birth: 04/11/1956  
 Gender: female



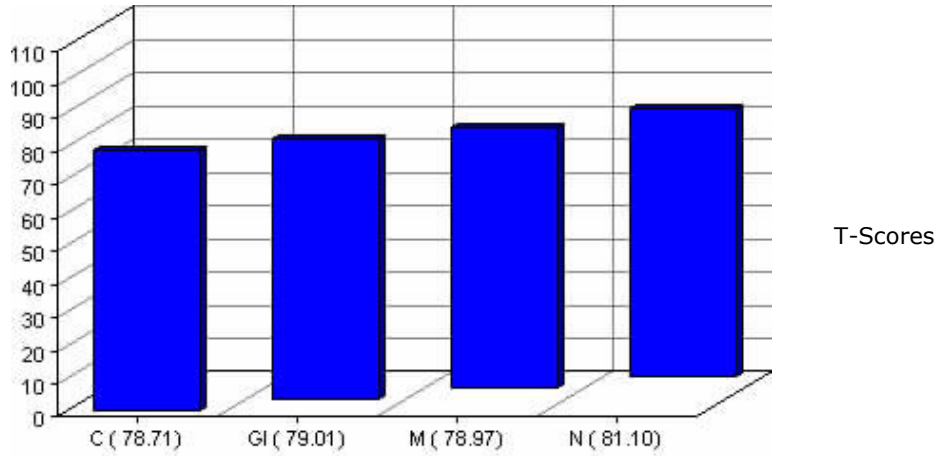
#### Impression Management Interpretation

|   |  |
|---|--|
| Lack of Medical Comprehensiveness (LMC) | High scores (>60) reflect the belief that treatment was not comprehensive or adequate in some way.   |
| Projected Disability (PD)               | High scores (>60) indicate high levels of expressed disability such as "I can't do most things I used to be able to do before my injury" and "My pain stops me from doing most physical activities." |
| Projected Suffering (PS)                | This scale measures beliefs the patient has suffered because of his/her pain problem. High scores (>60) indicate more intense levels of perceived suffering.   |
| Projected Virtue (PV)                   | High scores (>60) suggest the patient is strongly motivated to appear in a favorable light. Examples include "People who lie can never be trusted" and "I always tell the truth."                    |
| Treatment Unresponsiveness (TU)         | High scores (>60) reflect the patient's belief he or she did not respond to treatments aimed at alleviating the pain.  |

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
SYMPTOM ENDORSEMENT I**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



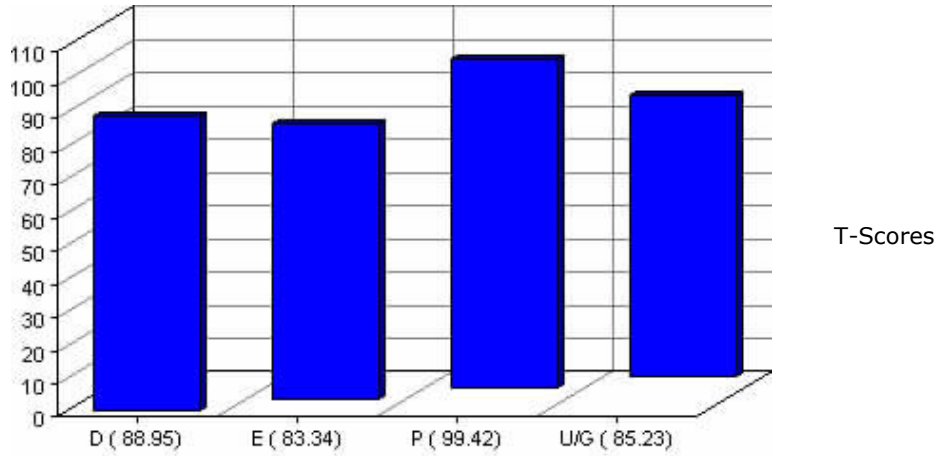
**Symptom Endorsement I Interpretation**

|                       |   |
|-----------------------|---|
| Cardiovascular (C)    | High scores (>60) indicate problems with circulation, heart beat and pulse.   |
| Gastrointestinal (GI) | High scores (>60) indicate multiple GI complaints such as nausea, loss of appetite for food, and difficulty swallowing.   |
| Musculoskeletal (M)   | High scores (>60) indicate diffuse musculoskeletal discomfort such as muscle achiness, stiffness, pain, and tenderness.   |
| Neurological (N)      | High scores (>60) reflect widespread neurologic symptoms such as poor reflexes, loss of strength, memory impairment, diminished sensory function, lightheadness, disorientation, difficulty walking, and loss of balance. |

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
SYMPTOM ENDORSEMENT II**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



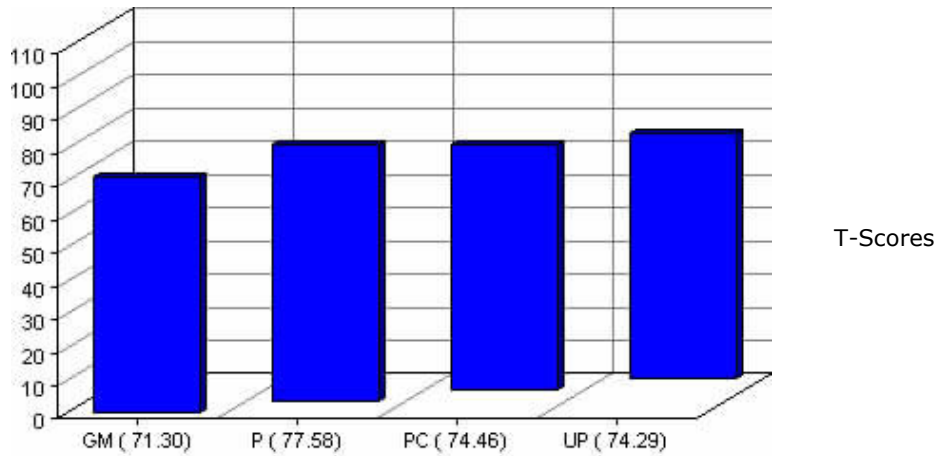
**Symptom Endorsement II Interpretation**

|                    |   |
|--------------------|---|
| Dermatological (D) | High scores (>60) reflect diffuse dermatological symptoms including coarse and dry skin, heavy perspiration, and being easily bruised.                |
| Endocrine (E)      | High scores (>60) indicate generalized endocrine complaints such as intolerance to cold, sensitivity to heat, and the experience of hot flashes.      |
| Pulmonary (P)      | High scores (>60) reflect such symptoms as difficulty breathing, shortness of breath, and other symptoms related to pulmonary functioning.            |
| U/G (U/G)          | High scores (>60) reflect problems in the U/G system including painful urination, decreased interest in sex, and changes in bowel and bladder habits. |

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
SYMPTOM ENDORSEMENT III**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



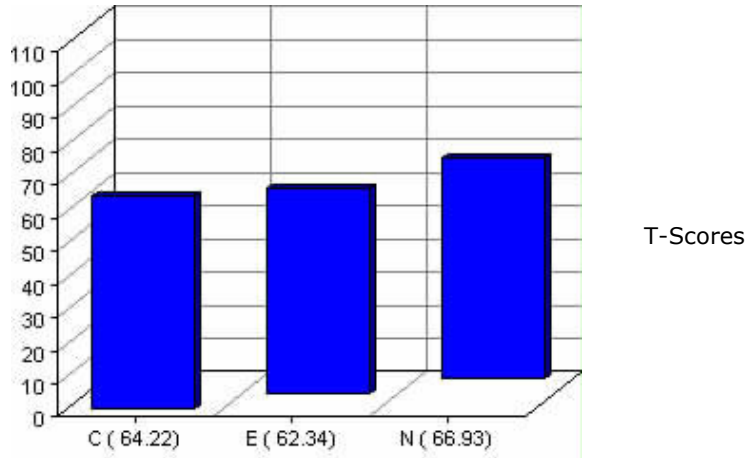
**Symptom Endorsement III Interpretation**

|                               |  |
|-------------------------------|--|
| General Malaise (GM)          | High scores (>60) indicate lassitude, diminished vigor and poor physical fitness.  |
| Pain (P)                      | High scores reflect a wide range of pain symptoms such as "My pain feels achy and stiff." "My pain is so bad I get short of breath," and "I am bothered by sharp shooting pains down the back of my legs." |
| Psychological Complaints (PC) | The scale (>60) measures a variety of psychological symptoms including depression, anxiety, sleep disturbances and drug abuse. Higher scores suggest more psychological problems.                          |
| Unbearable Pain (UP)          | High scores (>60) indicate symptoms of unbearable pain such as "The intensity of my pain is so severe nothing seems to help relieve by discomfort."  |

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
BELIEF PATTERNS**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female



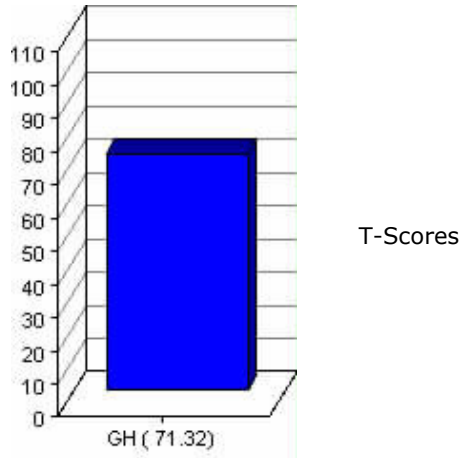
**Belief Patterns Interpretation**

- Cynicism (C)** High scores (>60) indicate a general mistrust of the world as well as a reflection of misanthropic beliefs such as "It's a dog-eat-dog world," "Most people are basically selfish," and "People who take advantage of others to get ahead deserve the rewards they get."
- Entitlement (E)** High scores (>60) indicate beliefs of entitlement, such as "It's not fair I have chronic pain."
- Narcissism (N)** This scale (60) measures narcissistic beliefs. Patients with high scores are endorsing items such as "I am smarter than most people I know," "I have an uncanny ability to sniff out potential problems," and "I can detect problems better than most people."

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
GENERAL HEALTH**

Patient: Andrea Stafford  
Social Security: 123-45-6789  
Date of Birth: 04/11/1956  
Gender: female



**General Health Interpretation**

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Poor Health (GH)

This scale is composed of numerous items reflecting beliefs of poor general physical and emotional health. Scores greater than 60 indicate the belief of poor general health that is well above most patients with persistent pain.

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**LIFE ASSESSMENT QUESTIONNAIRE TEST  
MOTIVATIONAL FACTORS**

Patient: Andrea Stafford  
 Social Security: 123-45-6789  
 Date of Birth: 04/11/1956  
 Gender: female

| <b>Scale</b>              | <b>Admin 1<br/>(05/17/2003)</b>   | <b>Normative</b> |
|---------------------------|---|------------------|
| Adoption of Sick Role     | 4.43  | 3.25             |
| Disability Payments       | 1   | 0.64             |
| Expectation of Settlement | I am confident that this evaluation will convince others I have suffered because of my pain | 1.68             |
| Financial                 | 7.00  | 4.78             |
| Hopeful of Settlement     | I am confident that this evaluation will convince others I have suffered because of my pain | 1.68             |
| Litigation                | 1.00  | 0.48             |

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