

The MBMD® Test in Practice: The Preferred Choice for a Health Psychologist

Ron Carbaugh, PsyD, Health Psychologist in Colorado

Health Psychologist Ron Carbaugh, PsyD, has nearly 20 years of experience working with chronic pain patients. After working in a pain clinic as a Masters-level psychologist for several years, he earned his PsyD from the University of Denver. Carbaugh dedicates his time almost exclusively to chronic pain patients, and his clients are referred by other physicians, primarily physiatrists, and fall into three categories:

- Patients requiring pre-surgical psychological screening mandated by the Colorado Workers' Compensation Act or insurance providers
- Patients undergoing medical treatments for their pain and whose physicians request a psychological evaluation for medical management or a suspected pre-existing psychological problem
- Patients who have not experienced successful outcomes from previous treatment or surgery for their chronic pain and were referred for pain management

Carbaugh administers the [MBMD® \(Millon Behavioral Medicine Diagnostic\)](#) test to all of his chronic pain patients, along with the [P-3® \(Pain Patient Profile\)](#).

The importance of understanding a patient's personality

Carbaugh looks to the MBMD test results to learn how the medical problem affects the patient's functioning, and, more importantly, to learn about the patient's personality style. "My belief is that personality style dictates how we respond to everything," says Carbaugh, "that's the reason we assess these patients: to help determine how they will respond to their

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doctors and how they will cope, and how to prepare the doctor for the personality type and likely behavior of this person.”

Carbaugh finds the [MBMD interpretive report](#) narrative helpful, particularly the coping styles segment that identifies the positive and negative indicators of the individual’s likely response to treatment. He uses this information to help determine whether or not to recommend to the physician that the patient needs psychological treatment. He also uses the report to help advise the physician on patient management, (e.g., how to address the patient in terms of his or her personality style, and how the patient is likely to respond to the treatment.) “I think the MBMD test does that much better than the previous behavioral medicine inventories and much better than the more psychiatric inventories,” says Carbaugh.

Relevant and efficient

Carbaugh has found that for medical patients, the MBMD test is preferable over the more psychiatric-oriented tests because its questions are less offensive to the patient. Carbaugh reports that he “experiences a higher rate of compliance from patients since he began using the MBMD test”, shortly after its release in 2001.

Carbaugh also says the questions that address how the patient is handling the medical issue are more relevant and valid, so the report provides clinical information more relevant to physicians.

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For his chronic pain patients, Carbaugh appreciates the MBMD test for its ability to help determine probable need for psychological treatment, for the information it provides regarding personality style, for its design and utility specifically for medical settings, and for its time-saving features.

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