TEST DATA ANALYSIS





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PDD TEST DATA

(POLYGRAPH CHART)

A LENGTH OF GRAPH PAPER
CONTAINING TRACINGS OF
SELECTED PSYCHOPHYSIOLOGICAL
ACTIVITY OF THE EXAMINEE IN
RESPONSE TO STIMULI.

RESPIRATORY TRACING



THE DISPLAY OF PHYSIOLOGICAL

PATTERNS INDICATIVE OF THE

EXAMINEE'S BREATHING ACTIVITY

AS RECORDED BY THE

PNEUMOGRAPH COMPONENT.

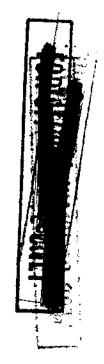
THE DISPLAY OF PHYSIOLOGICAL

PATTERNS OF EITHER SKIN RESISTANCE

OR SKIN CONDUCTANCE OBTAINED

THROUGH EXOSOMATIC RECORDING

WITH A GALVANOGRAPH COMPONENT.



THE DISPLAY OF PHYSIOLOGICAL

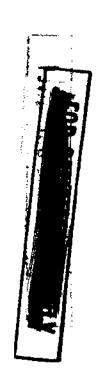
PATTERNS OF THE SUBJECT'S

RELATIVE BLOOD VOLUME AND

PULSE RATE AS RECORDED WITH

A CARDIOGRAPH COMPONENT.

REACTION



RESPONSE TO A STIMULUS;

EITHER PHASIC OR TONIC.

HOMEOSTATIC CHANGES



A DEVIATION IN ANY TRACING ATTRIBUTABLE TO A PHYSIOLOGICAL PHENOMENA OCCURRING AS A **COMPENSATORY ACTION AFTER** REACTION OR AN ARTIFACT.

ARTIFACT

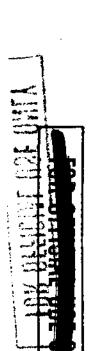


A CHANGE IN PHYSIOLOGICAL
PATTERN NOT ATTRIBUTABLE TO
STIMULUS, OR HOMEOSTATIC
CHANGES.

SIGNAL/NOISE



A TRACING MAY BE DESCRIBED AS
BEING FREE OF ARTIFACTS WHEN
THERE IS NO UNWANTED NOISE ON
THE SIGNAL OF INTEREST.



APPLYING A STIMULUS ALL SIGNALS HAVE NOISE

IN PDD TESTING UNWANTED NOISE ON A TRACING IS THAT NOISE THAT PREVENTS A STIMULUS FROM BEING APPLIED, I.E., ARTIFACT, REACTION, OR RETURN TO HOMEOSTASIS.

SPOT ANALYSIS

THE PROCEDURE WHEREIN EACH **TRACING ON EACH TEST IS** SEPARATELY EVALUATED BY COMPARING THE RESPONSE OF A RELEVANT QUESTION TO THE **RESPONSE OF A CONTROL** QUESTION.

PNEUMOGRAPH

Consists of inhalation and exhalation strokes with the adjusted amplitudes from 1/2 to 1 inch.

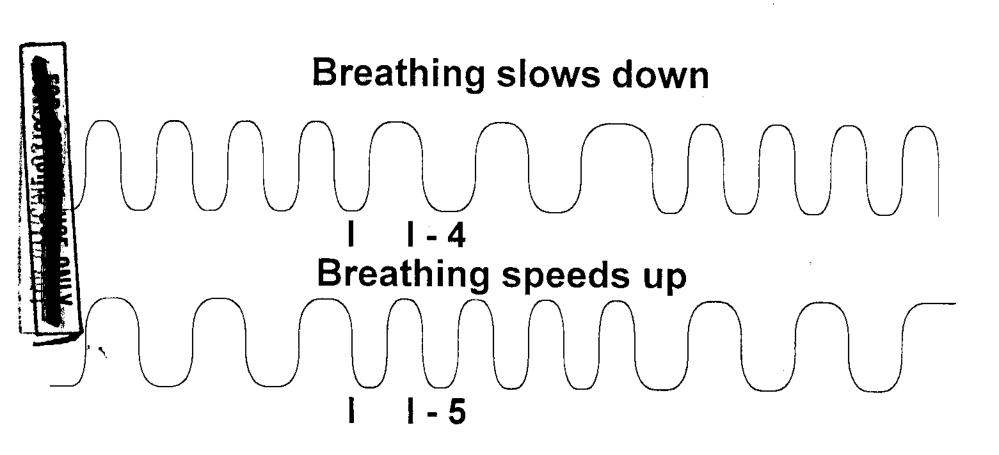
The desired amplitude is 3/4 of an inch. The normal cyclic rate is 13 to 18 breaths per minute. This may vary due to a person's physical condition and/or physical build.

PNEUMOGRAPH

Evaluation Criteria

PNEUMOGRAPH CHANGES MAY BE CONSIDERED REACTIONS WHEN OCCURRING IN A TIMELY MANNER O AN APPLIED STIMULUS A REVIEWED TEST QUESTION) WHEN THERE IS NO UNWANTED NOISE ON THE SIGNAL OF INTEREST.

1. CHANGES IN RATE



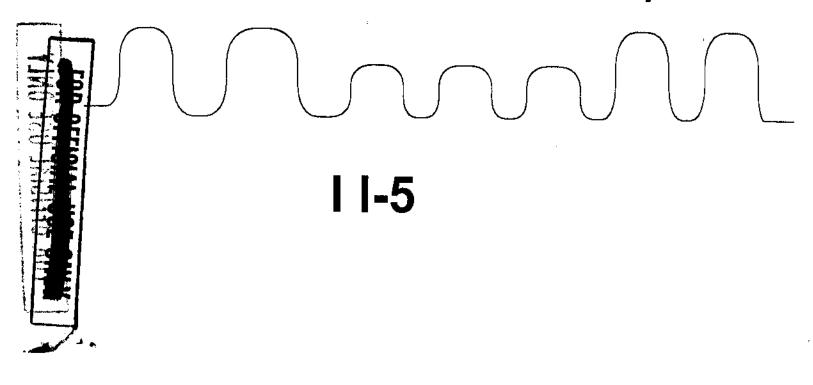
2. Changes in Amplitude



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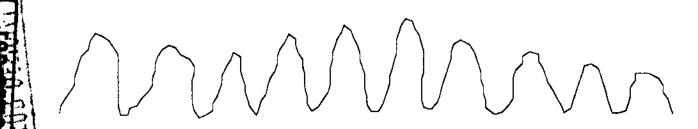
2. Change in Amplitude

Suppression/Decrease in Amplitude



2. Change in Amplitude

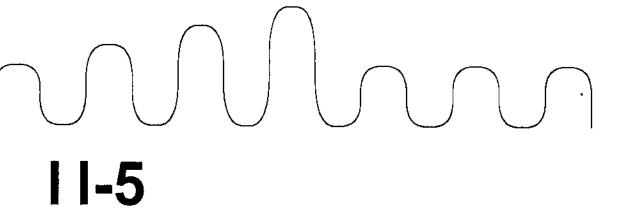
Progressively increasing in amplitude followed by progressively decreasing in amplitude, timely with the stimulus.



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2. Change in Amplitude

Progressively increasing in amplitude, timely with the stimulus and return to homeostasis.



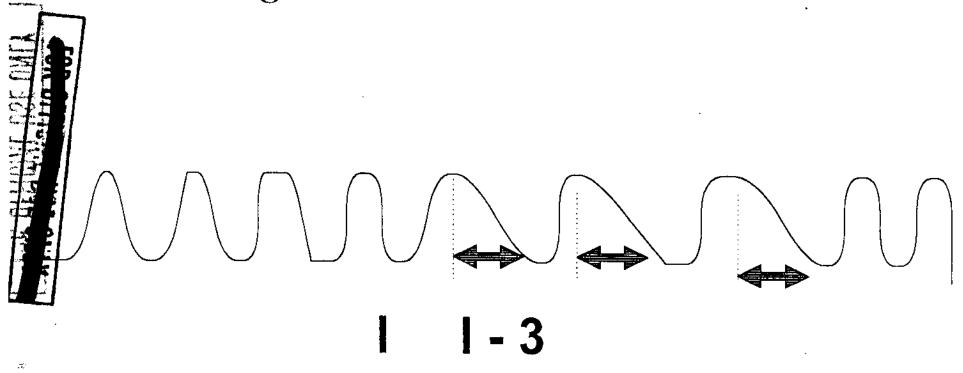
2. Change in Amplitude

Progressively decreasing in amplitude,

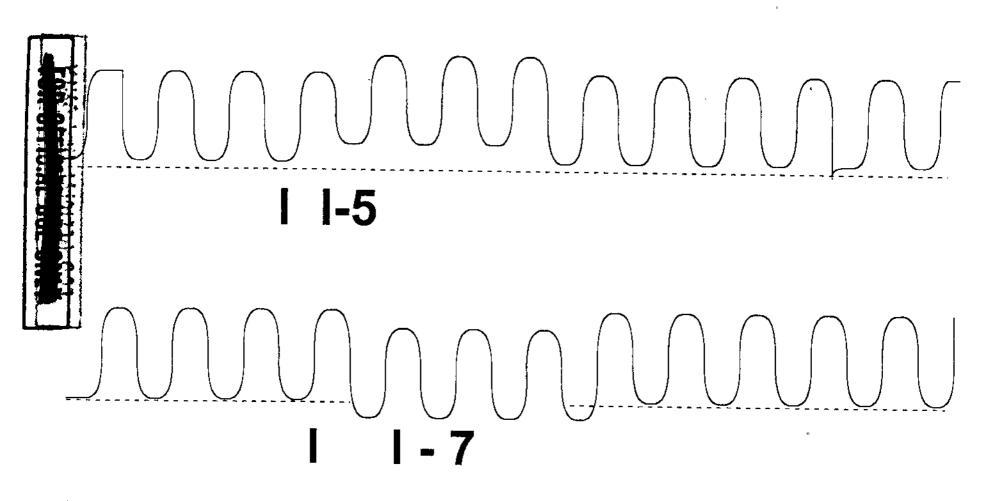
timely with the stimulus and return to

1 1 - 5

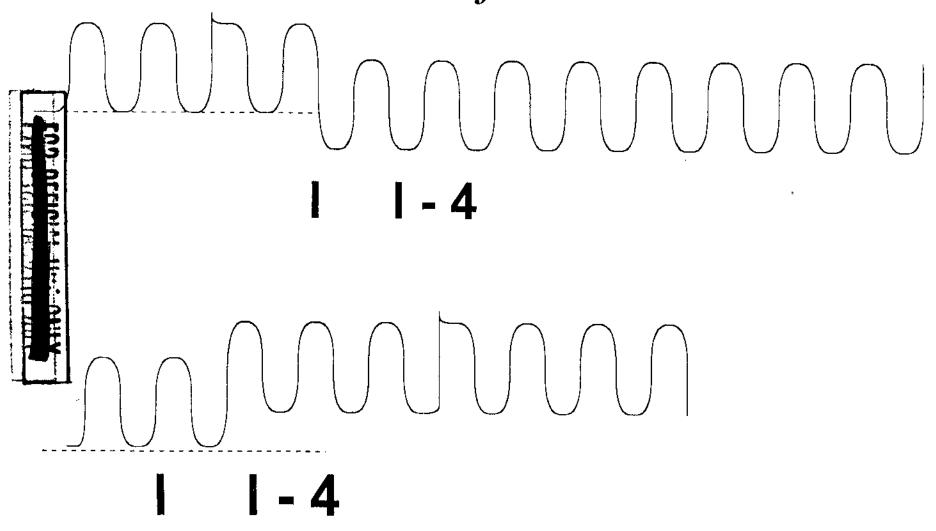
3. Change in inhalation/exhalation ratio



4. Change of baseline



4. Loss of Baseline

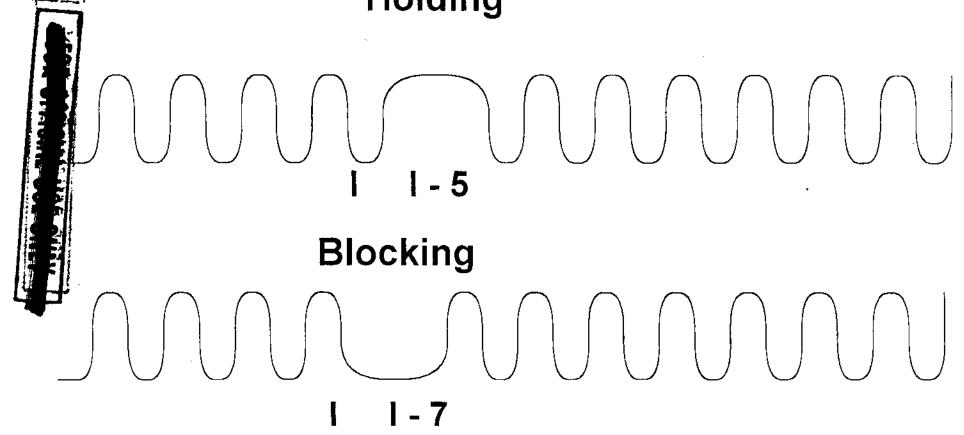


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PNEUMOGRAPH TRACING

6. APNEA





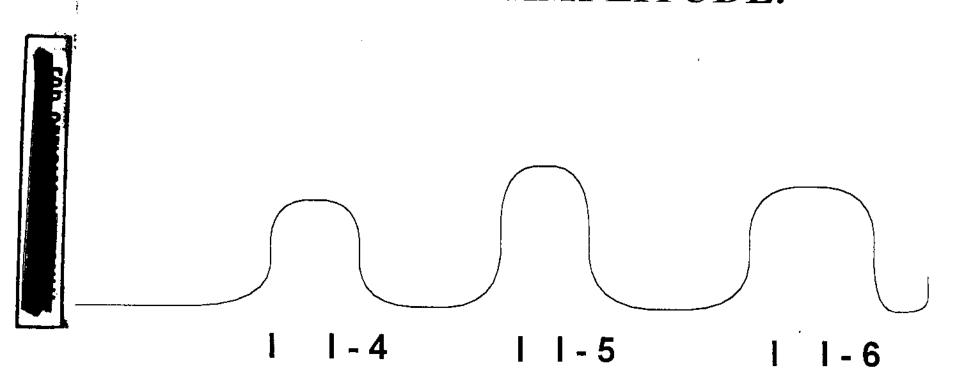
Two types of tracings are skin resistance (GSR) and skin conductance (GSG).

he electrodermal tracing consists of a relatively orizontal tracing indicative of the level of the lectrical resistance in the skin, due to skin ydration. The sensitivity has been properly djusted when the examinee shows a response to a stimulus.

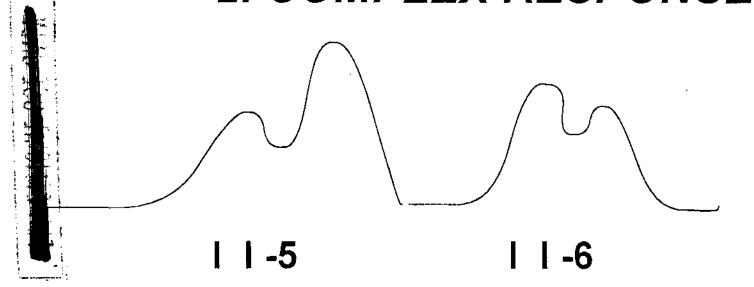
No stimuli applied



1. CHANGE IN AMPLITUDE.

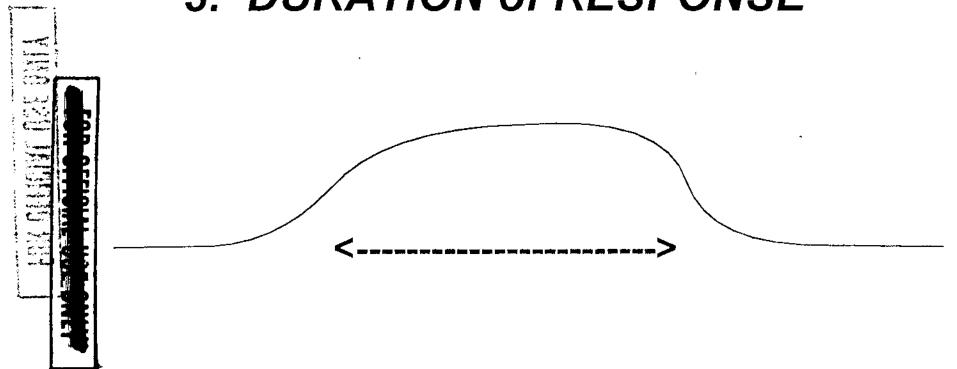


2. COMPLEX RESPONSE



ELECTRODERMAL Tracing

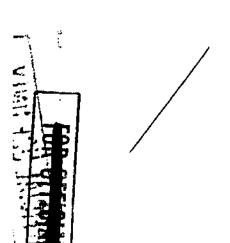
3. DURATION of RESPONSE



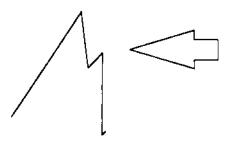
The contraction and relaxation of the heart causes the polygraph to record the systolic stroke, diastolic stroke, and the dicrotic notch which appears in the diastolic stroke. The tracings should be adjusted from 1/2 to 1 inch, with the desired amplitude being 3/4 of an inch.

SYSTOLIC STROKE

DIASTOLIC STROKE

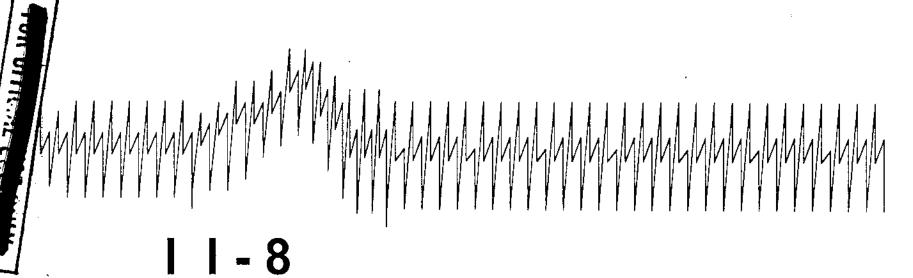


DICROTIC NOTCH

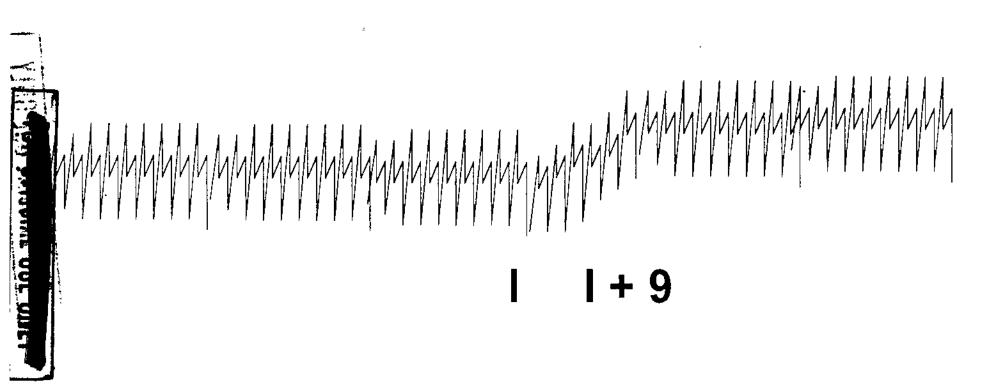


1. CHANGE IN BASE LINE

a. Increase and decrease in baseline.

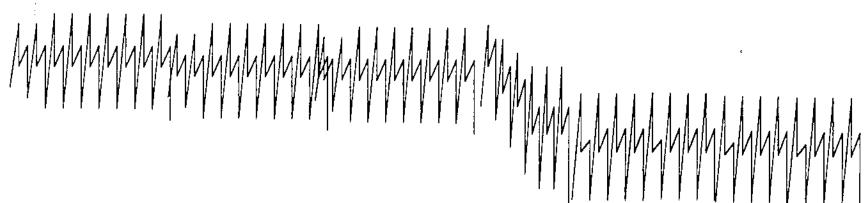


b. Increase only in base line

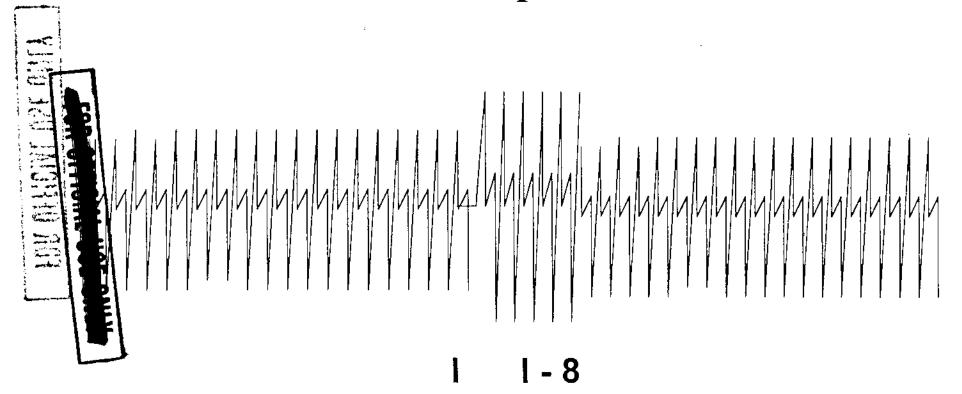


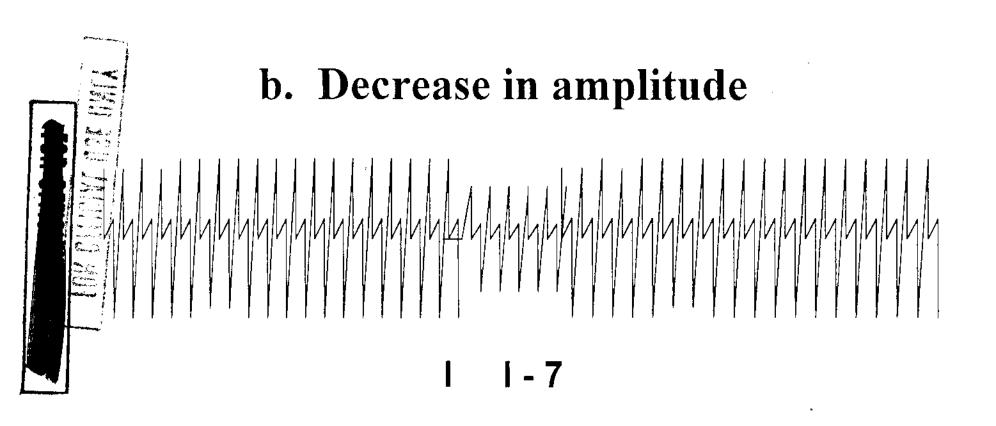


c. Decrease only in baseline.



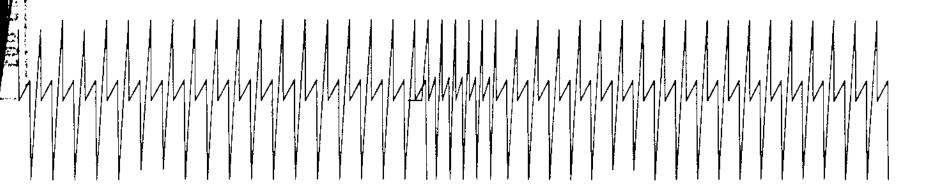
- 2. CHANGE IN AMPLITUDE
 - a. Increase in amplitude.



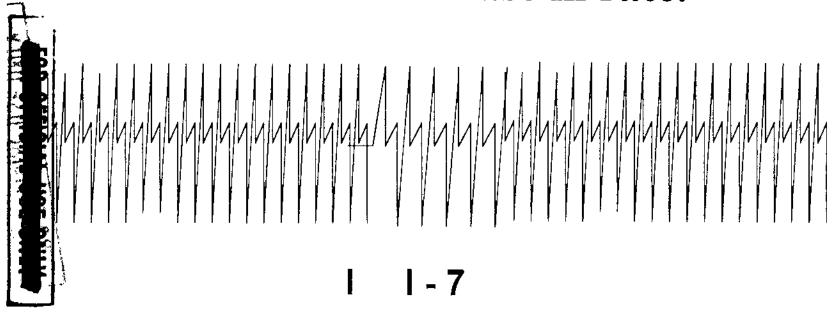


3. CHANGE IN RATE

a. Increase in rate.

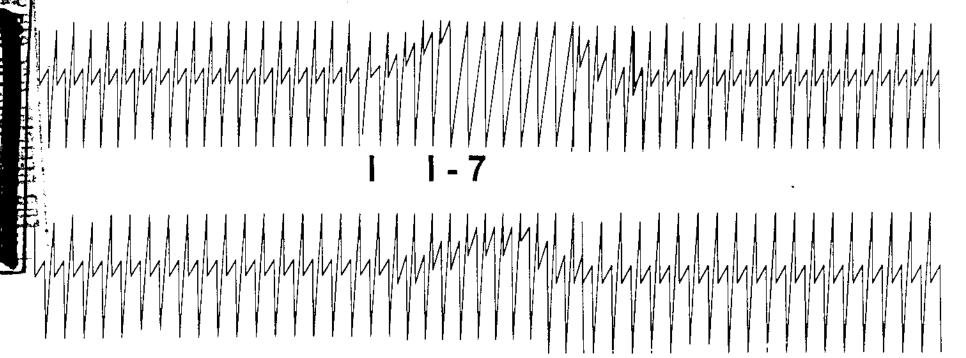


b. Decrease in rate.

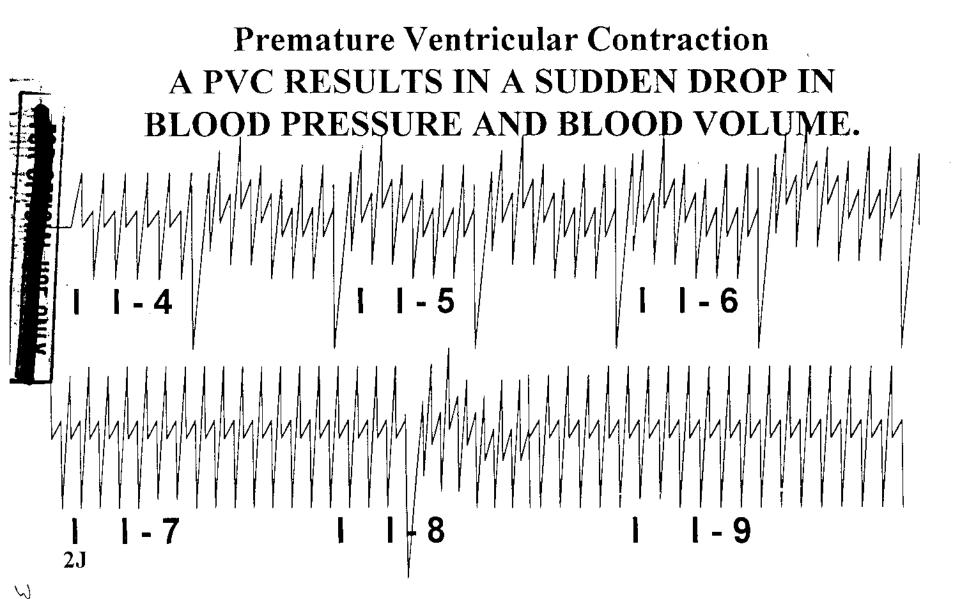


CARDIOVASCULAR TRACING OTHER CRITERIA TO CONSIDER

Change in position or disappearance of dicrotic notch.



CARDIOVASCULAR TRACING OTHER CRITERIA TO CONSIDER



SEVEN-POSITION SCALE

USED FOR DETERMINING THE NUMERICAL VALUE TO BE ASSIGNED EACH RESPONSE.

THE SCALE IS CONSTRUCTED AS:

7 Position Scale Assigning Values

When a reaction to a question is subtly greater than the question to which it is being compared a value of (1) is assigned. If the eaction is obviously better then a (2) is assigned. If the reaction is dramatically better a value of (3) is assigned. If both reactions are equal then a score of (0) is assigned.

7 Position Scale (continued)

When the reactions are greater at the control, he value assigned will be positive (+), and when the reactions are greater at the relevant,

the value is negative (-).

Combining Spot Values and **Test Scores**

Values for two pneumographs are combined. If one pneumo value for a spot is (+1) and the other PNEUMOGRAPH value for the same spot is (-1) then the spot is given a zero (0).

Combined

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Test Data Analysis Decision Criteria

Every inch of a PDD test contains one or more of the following four categories:

- 1. Signal/Noise
- 2. Artifact
- 3. Homeostatic Changes
- 4. Reaction

Test Data Analysis (continued)

Only evaluate or consider changes that occur in a timely manner when the stimulus (the reviewed test question) has been asked while there is no unwanted noise on the signal of interest. (i.e.., artifacts, homeostatic changes (returning to homeostasis), reaction.)

Combining Spot Values

The combined pneumo value is added to the electrodermal and cardiovascular values for a spot score for that test. Each spot on a test receives a spot score. The spot scores from each test are added together for a spot total for each spot. The grand total is the sum of all spot totals.

Decision Criteria

There are three opinions that can be formed after the evaluation of a Probable Lie Control Test (PLCT).



- 2. DI (Deception Indicated)
- 3. INC (Inconclusive)

Zone Comparison Test (ZCT)

There must be a "+" in every SPOT TOTAL with a GRAND TOTAL of + 6 or more, for an NDI opinion. A "-3" in any one SPOT TOTAL will form the basis for a DI opinion. A "-2" to a "0" in any one SPOT TOTAL, where no one SPOT TOTAL is "-3" or greater or the GRAND TOTAL is not "-6" or +6 or greater, equals an Inconclusive exam.

ZCT Scoring Examples

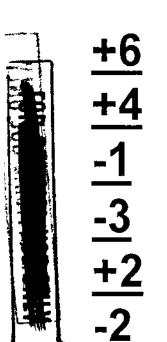
AFTER THREE ASKINGS OF EACH RELEVANT

Spot I

Spot II

Spot III

Grand Total



MODIFIED GENERAL QUESTION TEST MGQT

There must be at least a "+3" in every SPOT

TOTAL to arrive at the opinion of NDI. A "-3"

in any SPOT TOTAL, regardless of the other

SPOT TOTALS will be the basis for a DI

opinion. Any other combination not meeting the criteria for DI or NDI is considered inconclusive.

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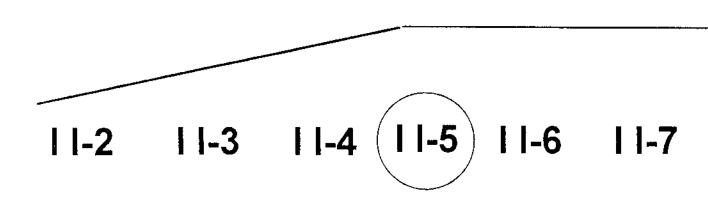
MGQT SCORING



POT Evaluation Criteria

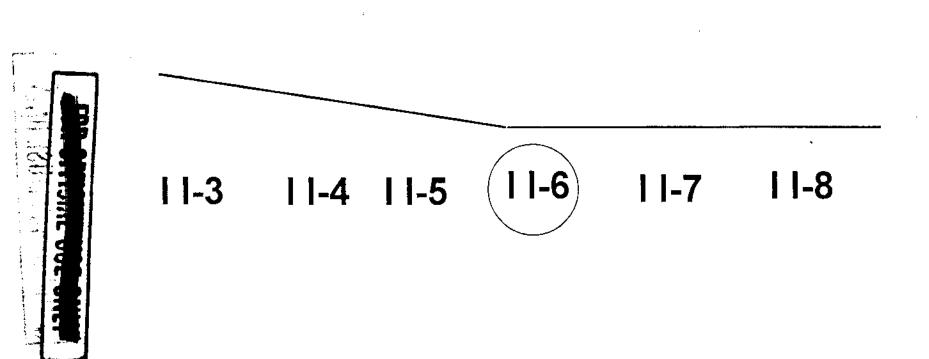


Increasing Baseline then leveling.



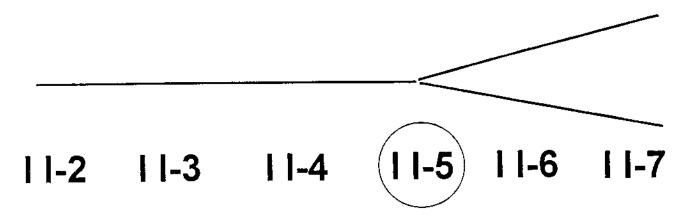


Decreasing baseline then leveling.

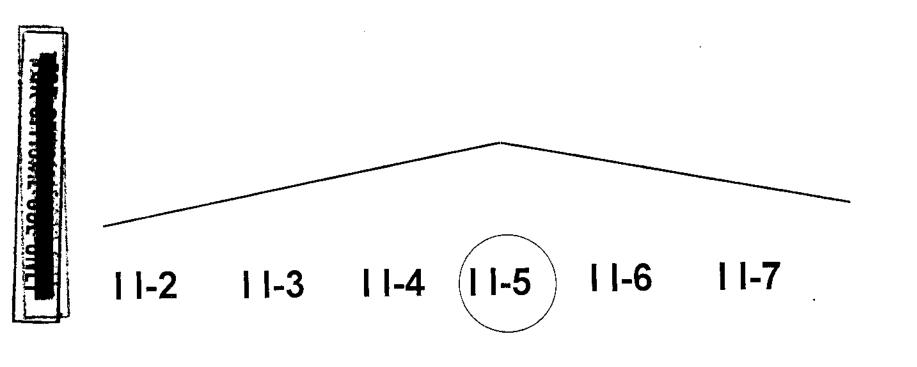




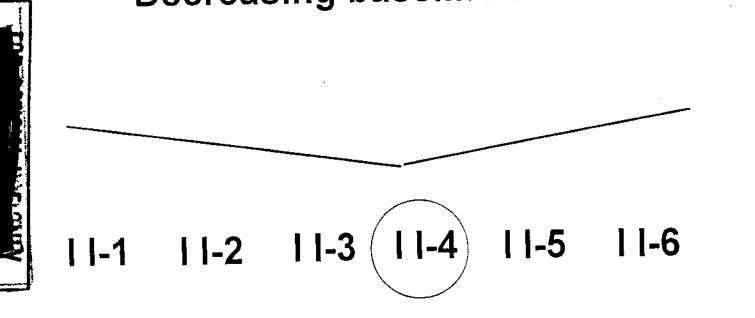
Level baseline then either an increase or a decrease



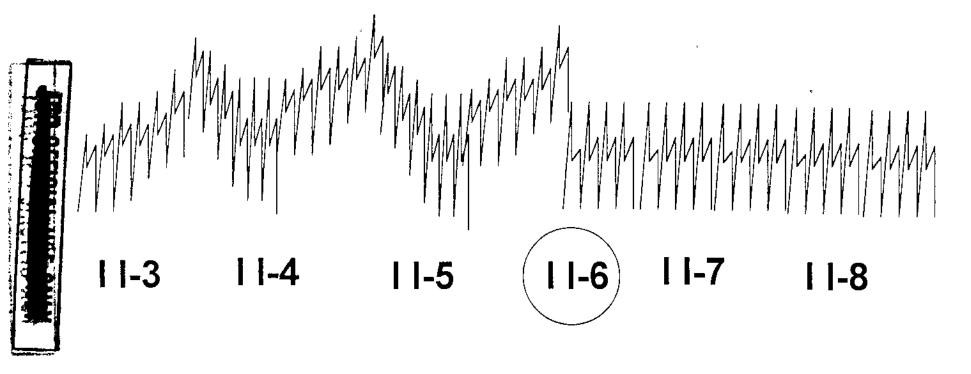
Increasing baseline then a decreasing baseline

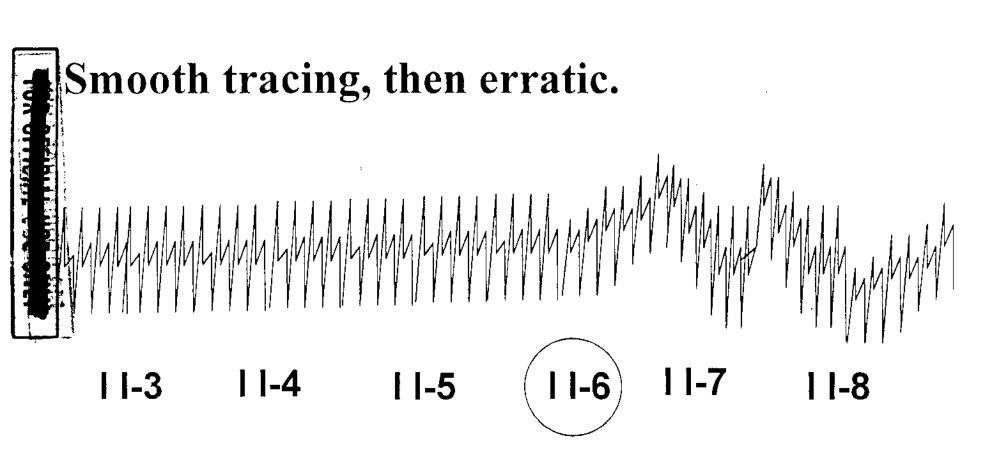


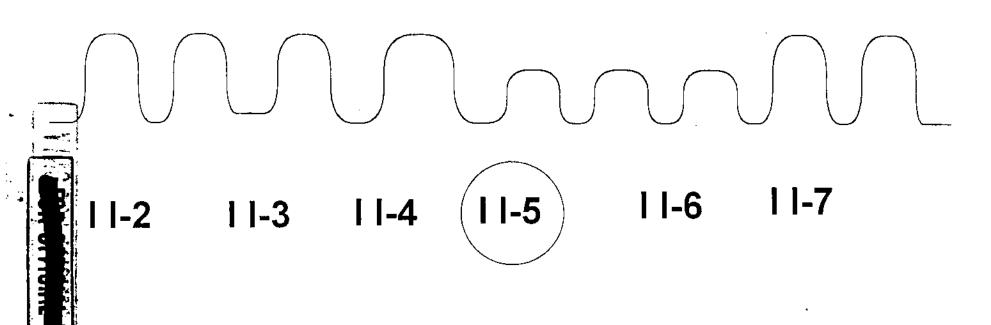
Decreasing baseline then increasing.



Erratic tracing, then smooth.

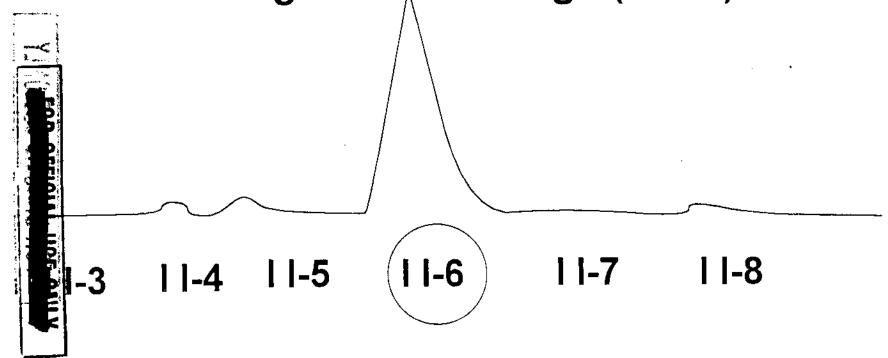




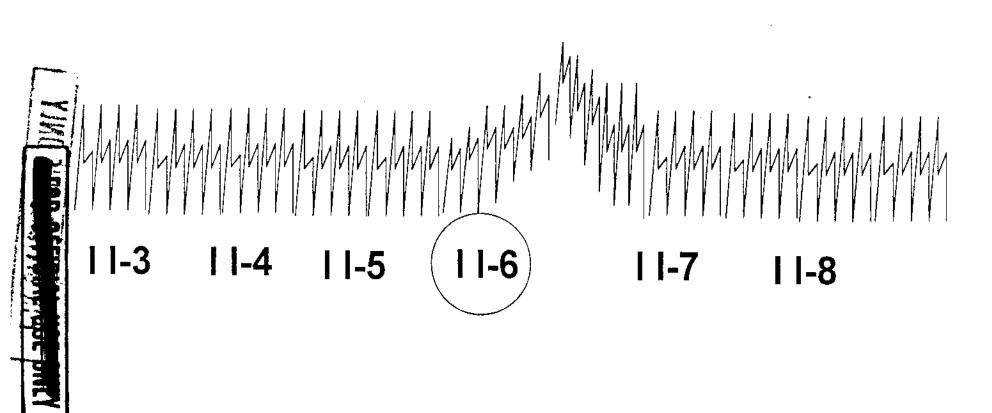


Any significant specific change in any of the components at the key (known POT) or possible key (searching POT).

Significant change (con't)



POT EvaluationSignificant Change (con't)



POT

Decision Criteria

To opine that an examinee has peaked at a question, there must be at least TWO of the three recording components showing one of the eight criteria at the same question.

For the examiner to conclude that the examinee has indeed "PEAKED" at a particular test question, the examinee must have peaked at the same question on at least TWO of the THREE POT OR SPOT tests.