

Supplemental Table 1. Characteristics of Participants for Prototypic and Comorbid Cases.

	Prototypic Cases	Comorbid Cases DSM Condition	Comorbid Cases FFM Condition
Years of Experience and (SD)	19.84 (8.85)	20.52 (8.98)	18.53 (8.82)
Clinical Working Hours per Week and (SD)	31.84 (11.83)	33.86 (13.21)	33.40 (13.15)
Hours/Week with Pers. Disorder Patients and (SD)	10.88 (8.13)	10.97 (9.91)	12.30 (10.70)
Gender			
Male	45.99%	46.32%	41.67%
Female	50.27%	49.47%	57.29%
No Response	3.74%	4.21%	1.04%
Degree			
Ph.D.	29.14%	28.42%	30.21%
Psy.D.	6.95%	4.21%	1.04%
M.D.	30.21%	32.63%	34.38%
Masters or higher in S.W.	28.34%	24.21%	26.04%
Unspecified Masters	2.67%	6.32%	8.33%
Other or Unknown	2.67%	4.21%	0.00%
Theoretical Orientation			
Cognitive or Cognitive-Behavioral	61.5%	70.5%	64.6%
Psychodynamic	55.1%	61.1%	47.9%
Interpersonal/System	36.9%	39.0%	37.5%
Eclectic	35.3%	22.1%	34.4%
Biological	33.7%	35.8%	35.4%

Behavioral	29.4%	21.1%	27.1%
Humanistic	16.6%	13.7%	13.5%
Psychoanalytic	12.8%	14.7%	8.3%
Other	12.8%	15.8%	4.2%
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Employment Setting			
Private Practice	70.0%	75.8%	70.8%
Hopsital	31.6%	29.5%	38.5%
Clinic	31.0%	25.3%	26.0%
Academic Position	21.9%	29.5%	28.1%
Forensics	9.6%	9.5%	9.4%
Other	16.6%	19.0%	11.5%

Supplemental Table 2. Mean Number of Correct Diagnoses per Personality Disorder for Prototypic Cases.

Pers. Disorder	FFM	DSM	SWAP
Cluster A			
Paranoid	0.43	1.00	0.80
Schizoid	0.65	0.88	0.58
Schizotypal	0.34	0.59	0.69
Cluster B			
Antisocial	0.50	0.95	0.87
Borderline	0.41	0.95	0.94
Histrionic	0.29	0.78	0.56
Narcissistic	0.56	0.94	0.95
Cluster C			
Avoidant	0.35	0.61	0.50
Dependent	0.53	0.82	0.82
OCPD	0.75	0.89	0.88

Supplemental Table 3. Mean Number of Incorrect Diagnoses per Personality Disorder for Prototypic Cases.

Pers. Disorder	FFM	DSM	SWAP
Cluster A			
Paranoid	1.09	0.25	0.55
Schizoid	1.24	0.41	0.74
Schizotypal	1.05	1.41	0.88
Cluster B			
Antisocial	1.00	0.25	1.04
Borderline	0.94	0.16	0.47
Histrionic	1.24	0.58	0.89
Narcissistic	0.81	0.20	0.25
Cluster C			
Avoidant	1.55	1.13	1.20
Dependent	1.37	0.47	0.47
OCPD	0.80	0.28	0.30

Supplemental Figures 1a-c. Profiles and Diagnoses of the Three Comorbid Cases
in both the *DSM* and FFM Conditions

Note: The disorders shown in brackets associated with each *DSM* symptom were not presented to participants. The FFM profiles presented to participants looked like Figure 1a.

Supplemental Figure 1a: Earnest

DSM Profile

Avoids occupational activities that involve significant interpersonal contact, because of fears of criticism, disapproval, or rejection. [Avoidant]

Is inhibited in new interpersonal situations because of feelings of inadequacy. [Avoidant]

Reads hidden demeaning or threatening meanings into benign remarks or events. [Paranoid]

Almost always chooses solitary activities. [Schizoid]

Views self as socially inept, personally unappealing, or inferior to others. [Avoidant]

Is unwilling to get involved with people unless certain of being liked. [Avoidant]

Shows restraint within intimate relationships because of the fear of being shamed or ridiculed. [Avoidant]

Is preoccupied with being criticized or rejected in social situations. [Avoidant]

Lacks close friends or confidants other than first-degree relatives. [Schizoid & Schizotypal]

Has little, if any, interest in having sexual experiences with another person. [Schizoid]

Is unusually reluctant to take personal risks or to engage in any new activities because they may prove embarrassing. [Avoidant]

Neither desires nor enjoys close relationships, including being part of a family. [Schizoid]

FFM Profile

Neuroticism Facets

Anxiousness	4.33
Angry Hostility	3.50
Depressiveness	4.07
Self-consciousness	4.54
Impulsivity	1.85
Vulnerability	3.76

Extraversion Facets

Warmth	1.84
Gregariousness	1.47
Assertiveness	1.60
Activity	2.00
Excitement-Seeking	1.52
Positive Emotions	1.69

Openness Facets

Fantasy	4.07
Aesthetics	3.00
Feelings	2.59
Actions	2.79
Ideas	3.14
Values	1.93

Agreeableness Facets

Trust	1.88
Straightforwardness	3.01
Altruism	2.85
Compliance	3.27
Modesty	3.83
Tendermindedness	3.13

Conscientious Facets

Competence	3.71
Order	3.64
Dutifulness	3.71
Achievement Striving	3.75
Self-Discipline	3.69
Deliberation	3.97

Participant's Diagnoses from the DSM Profile

Correct Diagnoses	
Avoidant	63%
Schizoid	42%
Incorrect Diagnoses > 10%	
Social Anxiety	19%
Paranoid	14%

Participant's Diagnoses from the FFM Profile

Correct Diagnoses	
Avoidant	32%
Schizoid	16%
Incorrect Diagnoses > 10%	
Obsessive Compulsive	28%
Pers. D. or D.	23%
Anxiety	23%
Depression or Dysthymia	20%

Supplemental Figure 1b: Madeline

DSM Profile

Requires excessive admiration. [Narcissistic]

Interaction with others is often characterized by inappropriate sexually seductive or provocative behavior. [Histrionic]

Impulsivity in at least two areas that are potentially self-damaging (e.g., spending, sex, substance abuse, reckless driving, binge eating). Note: Do not include suicidal or self-mutilating behavior. [Borderline]

Inappropriate, intense anger or difficulty controlling anger (e.g., frequent displays of temper, constant anger, recurrent physical fights). [Borderline]

Shows arrogant, haughty behaviors or attitudes. [Narcissistic]

Lacks empathy: is unwilling to recognize or identify with the feelings and needs of others. [Narcissistic]

There is evidence of Conduct Disorder with onset before age 15 years. [Antisocial]

Consistently uses physical appearance to draw attention to self. [Histrionic]

Considers relationships to be more intimate than they actually are. [Histrionic]

Is preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love. [Narcissistic]

Is interpersonally exploitative, i.e., takes advantage of others to achieve his or her own ends. [Narcissistic]

Identity disturbance: markedly and persistently unstable self-image or sense of self. [Borderline]

A pattern of unstable and intense interpersonal relationships characterized by alternating between extremes of idealization and devaluation. [Borderline]

Is uncomfortable in situations in which he or she is not the center of attention.

Affective instability due to a marked reactivity of mood (e.g., intense episodic dysphoria, irritability, or anxiety usually lasting a few hours and only rarely more than a few days. [Borderline]

Shows self-dramatization, theatricality, and exaggerated expression of emotion. [Histrionic]

Has a grandiose sense of self-importance (e.g., exaggerates achievements and talents, expects to be recognized as superior without commensurate achievements). [Narcissistic]

Participant's Diagnoses from the DSM Profile

Correct Diagnoses	
Borderline	68%
Histrionic	46%
Narcissistic	59%
Incorrect Diagnoses > 10%	
Antisocial, Sociopathic or Psychopathic	39%

FFM Profile

Neuroticism Facets	
Anxiousness	2.28
Angry Hostility	3.41
Depressiveness	2.24
Self-consciousness	1.28
Impulsivity	4.08
Vulnerability	2.00
Extraversion Facets	
Warmth	2.26
Gregariousness	4.56
Assertiveness	4.69
Activity	4.72
Excitement-Seeking	4.74
Positive Emotions	4.19
Openness Facets	
Fantasy	2.65
Aesthetics	2.82
Feelings	2.15
Actions	4.14
Ideas	3.19
Values	4.28
Agreeableness Facets	
Trust	2.14
Straightforwardness	1.77
Altruism	2.22
Compliance	1.69
Modesty	1.27
Tendermindedness	1.60
Conscientious Facets	
Competence	4.35
Order	3.64
Dutifulness	3.00
Achievement Striving	4.74
Self-Discipline	3.51
aDeliberation	2.24

Participant's Diagnoses from the FFM Profile

Correct Diagnoses	
Borderline	11%
Histrionic	11%
Narcissistic	26%
Incorrect Diagnoses > 10%	
Antisocial, Sociopathic or Psychopathic	34%
Bipolar or Manic	22%

Supplemental Figure 1c: Ted

DSM Profile

Lacks empathy: is unwilling to recognize or identify with the feelings and needs of others. [Narcissistic]

Has a grandiose sense of self-importance (e.g., exaggerates achievements and talents, expects to be recognized as superior without commensurate achievements). [Narcissistic]

Shows arrogant, haughty behaviors or attitudes. [Narcissistic]

Deceitfulness, as indicated by repeated lying, use of aliases, or conning others for personal profit or pleasure. [Antisocial]

Neither desires nor enjoys close relationships, including being part of a family. [Schizoid]

Has a sense of entitlement, i.e., unreasonable expectations of especially favorable treatment or automatic compliance with his or her expectations. [Narcissistic]

Lacks close friends or confidants other than first-degree relatives. [Schizoid & Schizotypal]

Reckless disregard for safety of self or others. [Antisocial]

Failure to conform to social norms with respect to lawful behaviors as indicated by repeatedly performing acts that are grounds for arrest. [Antisocial]

Lack of remorse, as indicated by being indifferent to or rationalizing having hurt, mistreated, or stolen from another. [Antisocial]

Believes that he or she is "special" and unique and can only be understood by, or should associate with, other special or high-status people (or institutions). [Narcissistic]

Is interpersonally exploitative, i.e., takes advantage of others to achieve his or her own ends. [Narcissistic]

Irritability and aggressiveness, as indicated by repeated physical fights or assaults. [Antisocial]

FFM Profile

Neuroticism Facets

Anxiousness 1.49

Angry Hostility 4.14

Depressiveness 2.12

Self-consciousness 1.38

Impulsivity 2.84

Vulnerability 1.58

Extraversion Facets

Warmth 1.95

Gregariousness 3.45

Assertiveness 4.08

Activity 4.10

Excitement-Seeking 4.38

Positive Emotions 3.11

Openness Facets

Fantasy 3.03

Aesthetics 3.22

Feelings 2.08

Actions 3.85

Ideas 3.88

Values 2.75

Agreeableness Facets

Trust 1.71

Straightforwardness 1.16

Altruism 1.27

Compliance 1.88

Modesty 1.40

Tendermindedness 1.25

Conscientious Facets

Competence 4.33

Order 4.48

Dutifulness 3.36

Achievement Striving 4.00

Self-Discipline 3.41

Deliberation 3.93

Participant's Diagnoses from the DSM Profile

Correct Diagnoses

Antisocial 79%

Narcissistic 58%

Incorrect Diagnoses > 10%

Sociopathic or Psychopathic (can be mapped onto Antisocial) 12%

Participant's Diagnoses from the FFM Profile

Correct Diagnoses

Antisocial 26%

Narcissistic 23%

Incorrect Diagnoses > 10%

Obsessive-Compulsive 30%

Pers. D. or D. 16%

Paranoid 16%

Bipolar or Manic 13%

Familiarity with DSM as a Covariate in Study 2

One explanation why participants in the DSM condition reported slightly higher familiarity with the DSM-IV than participants in the FFM condition is that they may have been reminded of the DSM criterial symptoms while looking at the DSM case profiles. In contrast, participants in the FFM condition may have felt less familiar with the DSM after having a difficult time providing correct DSM diagnoses. We ran additional statistical analyses using familiarity with the DSM-IV as a covariate and these analyses confirmed that the difference in familiarity did not lead to any of the main findings in Study 2. These findings are presented below.

Correct Diagnoses. Though familiarity with the DSM was a significant predictor of the overall accuracy score, $F(1,187)=5.15, p=.02$, the effect of DSM vs. FFM was still significant as well, $F(1,187)=147.95, p<.01$.

Incorrect Diagnoses. An ANOVA using familiarity with the DSM as a covariate, did not find familiarity with the DSM to be a significant predictor of the number of incorrect diagnoses $F(1,187)<1$, and the effect of DSM vs. FFM was still significant $F(1,187)=19.84, p<.01$.

Utility Ratings. Familiarity with the DSM was a significant predictor of all six utility questions (all $p's<.05$). However, even with DSM as a covariate, participants still gave significantly higher utility ratings for DSM than FFM for five of the six utility questions (all $p's<.05$). For the question about communicating with clients, even after accounting for familiarity with the DSM, the average utility rating was still higher for FFM than DSM as was found in the initial analysis, ($p=.05$).