

Ayurvedic Type (Prakriti) Questionnaire

Physical Features	Column A	Column B	Column C
Describe your frame size. <input type="checkbox"/>	Small bones; thin; little fat, or localized to abdomen only; bones, tendons and veins otherwise prominent <input type="checkbox"/>	Average bones, neither thin nor heavy; little fat, or localized to abdomen only; muscular <input type="checkbox"/>	Large-boned; heavy; bones, tendons and veins covered in a layer of fat <input type="checkbox"/>
How much did you weigh during early 20's? <input type="checkbox"/>	Low Women: less than 105 lbs Men: less than 130 lbs <input type="checkbox"/>	Average Women: 105-135 lbs Men: 140-180 lbs <input type="checkbox"/>	Heavy Women: more than 135 lbs Men: more than 180 lbs <input type="checkbox"/>
Describe your complexion. <input type="checkbox"/>	Darker than average <input type="checkbox"/>	Red, ruddy or flushed <input type="checkbox"/>	Pale, clear <input type="checkbox"/>
Describe the quality of your skin and mucus membranes. <input type="checkbox"/>	Dry, thin, cold, rough, cracked <input type="checkbox"/>	Warm, moist, pink-red, flushed, hot <input type="checkbox"/>	Heavy, thick, greasy <input type="checkbox"/>
Describe your head. <input type="checkbox"/>	Small <input type="checkbox"/>	Average <input type="checkbox"/>	Large <input type="checkbox"/>
Describe your forehead. <input type="checkbox"/>	Small <input type="checkbox"/>	High <input type="checkbox"/>	Average <input type="checkbox"/>
Describe your eyebrows. <input type="checkbox"/>	Small, thin <input type="checkbox"/>	Average, fine <input type="checkbox"/>	Thick, bushy <input type="checkbox"/>
Describe your eyelashes. <input type="checkbox"/>	Small, short <input type="checkbox"/>	Average, fine <input type="checkbox"/>	Thick, long <input type="checkbox"/>
Describe your eyes. <input type="checkbox"/>	Small, dry, sclera dull <input type="checkbox"/>	Average, piercing, bright, sclera pinkish <input type="checkbox"/>	Large, moist, sclera bright white <input type="checkbox"/>
Describe your nose. <input type="checkbox"/>	Small, uneven, thin septum <input type="checkbox"/>	Average, angular shape <input type="checkbox"/>	Large, thick, wide septum <input type="checkbox"/>
Describe your lips. <input type="checkbox"/>	Thin, small, dry, bluish <input type="checkbox"/>	Average, bright red <input type="checkbox"/>	Large, thick, pale <input type="checkbox"/>
Describe your teeth and gums. <input type="checkbox"/>	Teeth thin, striated, uneven, easily broken; gums receding, dry <input type="checkbox"/>	Teeth average; gums reddish, easily inflamed, moist <input type="checkbox"/>	Teeth large and thick, strong, even; gums pink, moist <input type="checkbox"/>
Describe your shoulders and arms <input type="checkbox"/>	Thin, small, cracking with movement <input type="checkbox"/>	Average <input type="checkbox"/>	Large, thick, firm <input type="checkbox"/>
Describe your chest. <input type="checkbox"/>	Thin, small, narrow poor definition; in women, small breasted <input type="checkbox"/>	Average, muscular <input type="checkbox"/>	Thick, large, broad; in women, large breasted <input type="checkbox"/>
Describe your hips/pelvis. <input type="checkbox"/>	Thin, small, narrow <input type="checkbox"/>	Average <input type="checkbox"/>	Large, broad, thick <input type="checkbox"/>
Describe your hands. <input type="checkbox"/>	Thin, dry, rough, fissured bluish <input type="checkbox"/>	Average, pinkish-red, moist <input type="checkbox"/>	Large, thick, pale, smooth, moist <input type="checkbox"/>
Describe your nails. <input type="checkbox"/>	Thin, dry, breaks easily, fissured <input type="checkbox"/>	Moist, quickly growing, peeling, frequent hangnails <input type="checkbox"/>	Large, thick, hard, pale, smooth <input type="checkbox"/>
Describe your legs. <input type="checkbox"/>	Thin, small, poorly developed; joints cracking <input type="checkbox"/>	Average, muscular <input type="checkbox"/>	Large, thick <input type="checkbox"/>
Describe your feet. <input type="checkbox"/>	Thin, small, poorly developed <input type="checkbox"/>	Average, muscular <input type="checkbox"/>	Large, thick <input type="checkbox"/>
Describe your body hair. <input type="checkbox"/>	Sparse, coarse, dry <input type="checkbox"/>	Thin, fine, moist <input type="checkbox"/>	Thick, moist <input type="checkbox"/>
TOTAL	/21 points	/21 points	/21 points

Body Functions	Column A	Column B	Column C
How would you characterize your appetite? <input type="checkbox"/>	Irregular <input type="checkbox"/>	Strong <input type="checkbox"/>	Weak <input type="checkbox"/>
How would you characterize your bowel movements? <input type="checkbox"/>	Dry, hard <input type="checkbox"/>	Soft, moist <input type="checkbox"/>	Average <input type="checkbox"/>
How would you characterize your urination? <input type="checkbox"/>	Frequent urination, but voids small amount, urine stream weak; urine either dark-colored or clear, and/or frothing easily <input type="checkbox"/>	Frequent urination, voids large amount, urine stream strong; urine yellow <input type="checkbox"/>	Infrequent urination, voids large amount, urine stream strong; urine pale yellow <input type="checkbox"/>
How would you characterize your sweat and body odor? <input type="checkbox"/>	Little sweat, even with exertion; little smell <input type="checkbox"/>	Profuse sweat with mild exertion; strong smell <input type="checkbox"/>	Sweat only with exertion; mild smell <input type="checkbox"/>
What is your activity level? <input type="checkbox"/>	Highly active, fidgety, confused movements <input type="checkbox"/>	Active, highly focused movements <input type="checkbox"/>	Slow, lethargic, calm <input type="checkbox"/>
How would you characterize your strength and endurance level? <input type="checkbox"/>	Weak or variable, poor endurance <input type="checkbox"/>	Moderate strength and endurance <input type="checkbox"/>	Strong, good endurance <input type="checkbox"/>
What is your resistance to disease? <input type="checkbox"/>	Poor resistance, catches colds quite easily <input type="checkbox"/>	Average resistance <input type="checkbox"/>	Strong resistance <input type="checkbox"/>
How do you react to medications? <input type="checkbox"/>	Responds quickly with low doses <input type="checkbox"/>	Average response with normal doses <input type="checkbox"/>	Slow response with normal doses; often requires larger doses <input type="checkbox"/>
How would you characterize your sexual response? <input type="checkbox"/>	Irregular, alternating in intensity; poor endurance; poor fertility <input type="checkbox"/>	Strong, intense, good endurance; moderately fertile <input type="checkbox"/>	Low intensity, good endurance; very fertile <input type="checkbox"/>
TOTAL	/9 points	/9 points	/9 points

Notes:

Personality	Column A	Column B	Column C
What is your climate/ environmental preference? <input type="checkbox"/>	Prefers warm temperatures, usually with a higher humidity; reacts negatively to coldness <input type="checkbox"/>	Prefers cool temperatures; reacts negatively to heat, or heat with high humidity <input type="checkbox"/>	Prefers warm temperatures, usually with a lower humidity; dislikes cold <input type="checkbox"/>
How would you characterize your voice? <input type="checkbox"/>	Weak, rasping, hoarse, changeable <input type="checkbox"/>	Loud, sharp, firm, forceful <input type="checkbox"/>	Loud, sharp, firm, forceful <input type="checkbox"/>
When recalling events, do you: <input type="checkbox"/>	Remember what happened as visual memory <input type="checkbox"/>	Remember what happened by recalling voices <input type="checkbox"/>	Remember what happened by feeling it in your body <input type="checkbox"/>
How would you describe your normal memory? <input type="checkbox"/>	Quickly learns, but quickly forgets <input type="checkbox"/>	Very sharp, fast, concise <input type="checkbox"/>	Good memory, but slow recall <input type="checkbox"/>
How would you describe your mental state? <input type="checkbox"/>	Quick, impulsive, indecisive <input type="checkbox"/>	Sharp, focused, decisive <input type="checkbox"/>	Slow, steady, considered <input type="checkbox"/>
How would you describe your emotional state most of the time? <input type="checkbox"/>	Anxious, fearful, nervous <input type="checkbox"/>	Angry, critical, irritable <input type="checkbox"/>	Easy-going, content, loving <input type="checkbox"/>
What relationship do you have with spirituality and faith? <input type="checkbox"/>	Changeable, undisciplined, irreverent <input type="checkbox"/>	Disciplined, passionate, righteous; or skeptical and rational <input type="checkbox"/>	Traditional, easy-going, compassionate <input type="checkbox"/>
How would you characterize your sleeping patterns? <input type="checkbox"/>	Difficulty falling asleep; light sleeper <input type="checkbox"/>	Goes to sleep easily, but a light sleeper <input type="checkbox"/>	Heavy sleeper <input type="checkbox"/>
Characterize your dream world. <input type="checkbox"/>	Active, with lots of movement; confused and/or fearful; jumping, flying, falling; associated with the sky and wind <input type="checkbox"/>	Active, emotional; angry and/or violent; associated with the sun, fire and blood <input type="checkbox"/>	Peaceful, calm, little activity; associated with water, snow and the moon <input type="checkbox"/>
What is the quality of the relationships you have with your family? <input type="checkbox"/>	Changeable, disturbed, varied, disruptive, alternating in intensity <input type="checkbox"/>	Committed, dutiful, explosive, passionate, loyal, separation <input type="checkbox"/>	Very close, attached, frequent contact, sentimentality, <input type="checkbox"/>
TOTAL	/9 Points	/9 Points	/9 Points

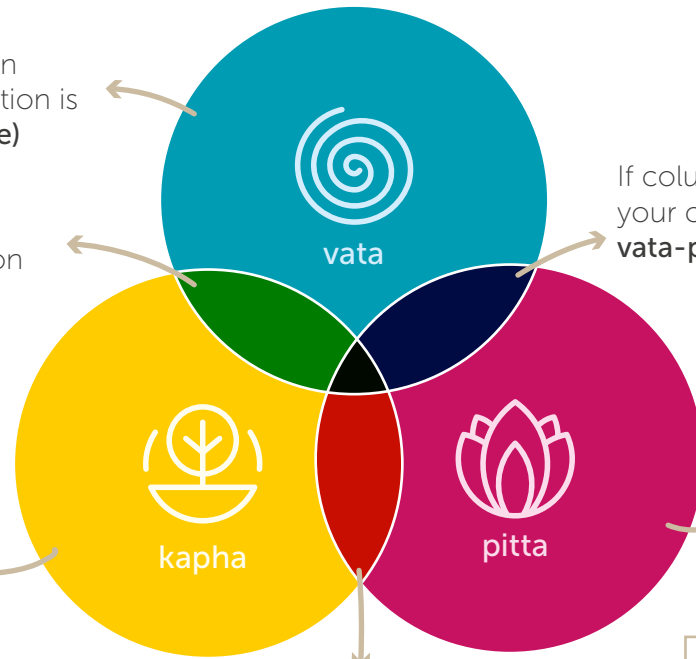
Part I	/21 points	/21 Points	/21 Points
Part II	/9 Points	/9 Points	/9 Points
Part III	/10 Points	/10 Points	/10 Points
Grand Total	/40 Points	/40 Points	/40 Points
	A	B	C
	A+B=		B+C=
	A+C=		

Check what's your constitution (prakriti)?

If you have 20 or more in column A, your constitution is probably **vata (wind type)**

If column A + C is more than 30, your constitution is probably **vata-kapha (wind-phlegm type)**

If you have 20 or more in column A, your constitution is probably **kapha (phlegm type)**



If column A+B is more than 30, your constitution is probably **vata-pitta (wind-bile type)**

If you have 20 or more in column B, your constitution is probably **pitta (bile type)**

If column B + C is more than 30, your constitution is probably **pitta-kapha (bile-phlegm type)**

Note: if the tally for section III (Personality) is very different from I and II, you may have a different mental constitution.

Here is a description of each basic type (vata, pitta and kapha), from my book "Ayurveda: The Divine Science of Life."

vata

A general tendency to being underweight and asthenic, with dry rough skin, small wiry muscles and irregular proportions. The bony prominences of the skeleton and the veins are easily observed due to a deficiency in the overlying muscular and fat layers. Vataja prakritis will usually display a strong aversion to cold, with irregular or poor peripheral circulation. A tendency to more or less constant movement, often confused or peripheral to the situation at hand, including twitching, tapping, bouncing, picking and shaking. The joints often pop and crack, and the muscles have a tendency to go into spasm. Vata is the most sensitive of the prakritis to sensory stimuli, with poor powers of recuperation and endurance. Digestive powers are typically weak or erratic, with a general tendency to constipation.

pitta

Strong metabolism, strong digestion, and a general tendency to mild inflammatory states. Physically, the body is of average build, lighter than that of kapha, with a well-developed musculature but generally less fat. The features are more angular than that of kapha, and facial features are thinner, sharper and longer. The skin is often quite ruddy and there is a general tendency to excessive heat. Warm temperatures and hot climates are poorly tolerated. A tendency to excessive hepatic and gastrointestinal secretions, loose bowel movements, and more frequent urination. Generally more sensitive to sensory stimuli than kapha, especially with light, heat and sound. Physically active, movements are coordinated, quick and efficient, sometimes aggressive, with determination and purpose.

kapha

A general tendency to weight gain, with a heavy, sthenic build. The shoulders are broad and the torso, legs and arms are thick and large; in women the hips are broad and breasts are full. The musculature is well-developed but usually hidden by a layer of fat, hiding any angularities of the skeleton. The feet are large and thick. Facial features are broad and full, and generally well proportioned. The skin is soft and smooth, and the hair is generally smooth, thick and greasy. The orifices (eyes, nose, ears, mouth, rectum, urethra, vagina) are moist and well-lubricated. There is a tendency to lethargy or inactivity, although once motivated the energy released can be very powerful, with great endurance and a steady pace. A kapha type might suffer from minor congestive conditions, such as respiratory and gastrointestinal catarrh. They may display a mild aversion to cold and prefer warmer climates, but if they are physically active they can withstand even very cold weather quite easily.

Dietary macronutrient ratios, according to prakriti

Vata: higher fat, medium protein, low carb, well-cooked vegetables, little fruit

Pitta: mixed carb/protein, with more lean protein, less fat, raw/lightly-cooked vegetables, lots of fruit

Kapha: higher complex carb, less fat and animal protein, lightly cooked vegetables, little fruit

Vata-pitta: higher animal protein, moderate fat, lower carb, lightly cooked vegetables, some fruit

Kapha-pitta: mixed carb/protein, with more complex carb, less fat, lightly cooked vegetables, some fruit

Vata-kapha: high complex carb, with some fat and animal protein, well-cooked vegetables, little fruit