



THE GIFT OF CHOOSING  
LIVING A VIBRANT LIFE

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

### PRAKRUTI DOSHA QUIZ: YOUR ESSENTIAL NATURE

TOTAL	VATA	PITTA	KAPHA
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My Essential Nature is:

### VIKRUTI DOSHA QUIZ: YOUR CURRENT STATE OF HEALTH

BODY	VATA	PITTA	KAPHA
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MIND	VATA	PITTA	KAPHA
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My current areas of imbalance are:



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balance. heal. transform.

Adapted from the Chopra Center Prakruti Dosha Mind Body Quiz



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**PRAKRUTI DOSHA QUIZ: YOUR ESSENTIAL NATURE**

INSTRUCTIONS: For each characteristic, rank Vata, Pitta and Kapha with 5, 3, or 1.  
5= Most accurately represents me      3= Secondly represents me      1= Rarely represents me  
For each row, use each number once. Each row should add up to 9.

CHARACTERISTICS	Vata	Pitta	Kapha
<b>Frame</b>	<input type="checkbox"/> I am thin, lanky and slender with prominent joints and thin muscle.	<input type="checkbox"/> I have a medium, symmetrical build with good muscle development.	<input type="checkbox"/> I have large, round or stocky build. My frame is broad, stout or thick.
<b>Weight</b>	<input type="checkbox"/> LOW; I may forget to eat or have a tendency to lose weight.	<input type="checkbox"/> MODERATE; it is easy for me to gain or lose weight if I put my mind to it.	<input type="checkbox"/> HEAVY; I gain weight easily and have difficulty losing it.
<b>Eyes</b>	<input type="checkbox"/> My eyes are small and active.	<input type="checkbox"/> I have a penetrating gaze.	<input type="checkbox"/> I have large, pleasant eyes.
<b>Complexion</b>	<input type="checkbox"/> My skin is dry, rough or thin.	<input type="checkbox"/> My skin is warm, reddish in color and prone to irritation.	<input type="checkbox"/> My skin is thick, moist and smooth.
<b>Hair</b>	<input type="checkbox"/> My hair is dry, brittle or frizzy.	<input type="checkbox"/> My hair is fine with a tendency towards early graying or thinning.	<input type="checkbox"/> I have abundant, thick and oily hair.
<b>Joints</b>	<input type="checkbox"/> My joints are thin and prominent and have a tendency to crack.	<input type="checkbox"/> My joints are loose and flexible.	<input type="checkbox"/> My joints are large, well knit and padded.
<b>Sleep Pattern</b>	<input type="checkbox"/> I am a light sleeper with a tendency to awaken easily.	<input type="checkbox"/> I am a moderately sound sleeper, usually needing less than eight hours to feel rested.	<input type="checkbox"/> My sleep is deep and long. I tend to awaken slowly in the morning.
<b>Body Temperature</b>	<input type="checkbox"/> My hands and feet are unusually cold and I prefer warm environments.	<input type="checkbox"/> I am unusually warm, regardless of season, and prefer cooler environments.	<input type="checkbox"/> I am adaptable to most temperatures but do not like cold, wet days.
<b>Temperament</b>	<input type="checkbox"/> I am lively and enthusiastic by nature. I like to change.	<input type="checkbox"/> I am purposeful and intense. I like to convince.	<input type="checkbox"/> I am easy going and accepting. I like to support
<b>Under Stress...</b>	<input type="checkbox"/> I become anxious and/or worried.	<input type="checkbox"/> I become irritable and/or aggressive.	<input type="checkbox"/> I become withdrawn and/or reclusive.

INSTRUCTIONS: Now add up each column to determine the Vata, Pitta and Kapha elements of your prakruti.  
VATA + PITTA + KAPHA = 90

TOTAL	VATA	PITTA	KAPHA
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**VIKRUTI DOSHA QUIZ: YOUR CURRENT STATE OF HEALTH**

**INSTRUCTIONS:**

For each question, assess whether you have experienced the symptom *NOT AT ALL, SOMEWHAT/OCCASIONALLY, OR VERY OFTEN* over the last 3 months. When you have completed each section, tally the total number of points scored.

VATA	Not at all	Somewhat/ Occasionally	Very Often
<b>BODY</b>			
I've had a dry throat, have felt the need to frequently clear my throat, or have a dry cough.	1	3	5
I've been experiencing gas, cramping, or bloating after meals.	1	3	5
My appetite has been inconsistent.	1	3	5
I've been suffering from chronic pain.	1	3	5
My skin has been dry or flaking.	1	3	5
My bowel movements have been hard and dry &/or are irregular.	1	3	5
Men: I've been have trouble getting sexually aroused, maintaining erections, or experiencing orgasms. Women: My menstrual cycle has been uncomfortable or irregular or I am experiencing vaginal dryness.	1	3	5
I've been getting light-headed when I get up quickly.	1	3	5
My hands and feet have been uncomfortably cold.	1	3	5
I've been having muscle twitches, cramps, or heart palpitations.	1	3	5

Vata Body Score: \_\_\_\_\_

VATA	Not at all	Somewhat/ Occasionally	Very Often
<b>MIND</b>			
I've been having difficulty with mental clarity or the ability to focus my attention.	1	3	5
I've been feeling overwhelmed	1	3	5
My life has been turbulent and chaotic.	1	3	5
I've been start new projects, but have difficulty completing them.	1	3	5
I've been having difficulty falling asleep or have been awakening easily.	1	3	5
I've been having a hard time making decisions.	1	3	5
I've been having trouble following through on commitments I've made.	1	3	5
I've been feeling restless if I'm not constantly on the move.	1	3	5
I've been acting impulsively or inconsistently.	1	3	5
I've been more forgetful than usual.	1	3	5

Vata Mind Score: \_\_\_\_\_



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PITTA	Not at all	Somewhat/ Occasionally	Very Often
<b>BODY</b>			
I've been feeling overheated or have been experiencing hot flashes.	1	3	5
I've been having headaches accompanied by light sensitivity or distorted vision.	1	3	5
My eyes have been itchy, irritated, red, or watery.	1	3	5
I've been having more than two bowel movements per day.	1	3	5
My appetite has been excessively strong.	1	3	5
I've been getting reflux/heartburn or have an ulcer.	1	3	5
I've been sensing the accumulation of toxins in my system. (air, food, water alcohol, cigarettes, drugs)	1	3	5
I've been diagnosed with some form of liver malady.	1	3	5
I've been diagnosed with high blood pressure or coronary heart disease.	1	3	5
My skin has been itchy, irritated, prone to breakouts or I've been diagnosed with an inflammatory skin condition.	1	3	5

Pitta Body Score: \_\_\_\_\_

PITTA	Not at all	Somewhat/ Occasionally	Very Often
<b>MIND</b>			
I've been feeling discontented with my life.	1	3	5
I've been judgmental and critical of others.	1	3	5
I've been feeling jealous of others.	1	3	5
I've been expressing anger towards others easily.	1	3	5
I've been feeling irritable or impatient.	1	3	5
I've been compulsive, with difficulty stopping once I've started a project.	1	3	5
I've been strongly opinionated, freely sharing my point of view without being asked.	1	3	5
I've been frustrated by other people.	1	3	5
I've been feeling the need to out-compete others.	1	3	5
I've been ruminating over situations from the past.	1	3	5

Pitta Mind Score: \_\_\_\_\_



KAPHA	Not at all	Somewhat/ Occasionally	Very Often
<b>BODY</b>			
My ankles tend to swell.	1	3	5
I tend to be sluggish or lethargic in the morning.	1	3	5
I have a lot of phlegm or mucous production.	1	3	5
I feel nauseated or full for an extended time after eating.	1	3	5
I am more than 10 pounds over my ideal weight.	1	3	5
I have high cholesterol or atherosclerotic heart disease.	1	3	5
I have been having episodes of asthma or wheezing.	1	3	5
I fall asleep easily after meals.	1	3	5
I have a tendency to have elevated blood sugars.	1	3	5
I have frequent sinus congestion or respiratory infections.	1	3	5

Kapha Body Score: \_\_\_\_\_

KAPHA	Not at all	Somewhat/ Occasionally	Very Often
<b>MIND</b>			
I've been dealing with conflict by withdrawing.	1	3	5
I've been accumulating clutter in my life.	1	3	5
I've been resistant to changing my routine.	1	3	5
I've been having difficulty leaving a relationship, job, or situation even though it no longer serves me.	1	3	5
My short-term memory has been a concern to me.	1	3	5
I've been intending to be more physically active, but have difficulty exercising regularly.	1	3	5
I've been eating more out of my emotional rather than nutritional needs.	1	3	5
I've been having difficulty getting going in the morning.	1	3	5
I have not been confident in my ability to cope with challenges.	1	3	5
I've been having a hard time moving beyond the past.	1	3	5

Kapha Mind Score: \_\_\_\_\_