



# The Braverman Nature Assessment

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## ***Instructions:***

The Braverman Nature Assessment consists of two Parts with four Sections in each. Part A assesses a dominant nature; Part B defines deficiencies. Answer each question in each section as either True or False. Complete this form and note the total number of **True** items for each of the eight sections, 1A-4A and 1B-4B on the last page.

Answer the questions in terms of how you feel most of the time. For example, if you've had a bad night's sleep and feel tired today answer the questions that pertain to your energy levels based on how you feel on a more average day.

Either **fax the last page only (score sheet)** to 919.869.2141, or scan and email it to [Contact@HealthandRestoration.com](mailto:Contact@HealthandRestoration.com), or drop it off at the Center for Health and Restoration prior to your visit.

## **PART A: DETERMINING YOUR DOMINANT NATURE**

### **Section 1A**

#### **Memory and Attention**

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I find it easy to process my thoughts                  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I concentrate effectively                              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am a deep thinker                                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am a quick thinker                                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I become distracted because I do so many tasks at once | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I enjoy intense debate                                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a good imagination                              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to criticize and analyze my thoughts            | True <input type="checkbox"/> | False <input type="checkbox"/> |

## Physical

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I have a lot of energy most of the time  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| My blood pressure is often elevated  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Sometimes in my life I have had episodes of extreme energy                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have insomnia  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I find exercising invigorating   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't ordinarily need coffee to jump-start me in the morning                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| My veins are visible and tend to look as though they might pop out of my skin. | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to have a high body temperature   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I eat my lunch while I'm working   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I engage in sexual intercourse any chance I get                                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a temper  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I eat only to reenergize my body   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I love action movies   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Exercising makes me feel powerful  | True <input type="checkbox"/> | False <input type="checkbox"/> |

## Personality

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I am a very domineering individual.                                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I sometimes don't notice my feelings                                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I often have trouble listening to others because my own ideas dominate | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have been in many physical altercations                              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to be future-oriented   | True <input type="checkbox"/> | False <input type="checkbox"/> |

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I am sometimes speculative  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Most people view me as thinking-oriented  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I daydream and often fantasize  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I like to read history and other nonfiction books   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I admire ingenuity  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can be slow in identifying how people can cause trouble   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't usually get tricked by people who say they need my help   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Most people view me as innovative   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| People have thought I have had some strange ideas, but I can always explain the basis for them rationally | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am often agitated or irritated  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Little things make me anxious or upset  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have fantasies of unlimited power   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I love spending money   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I dominate others in my relationships   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very hard on myself  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I react aggressively to criticism; often becoming defensive in front of others                            | True <input type="checkbox"/> | False <input type="checkbox"/> |

### **Character**

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| Some individuals view me as tough-minded    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Most people view me as achievement-oriented | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Some people say that I am irrational        | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I will do anything to reach a goal          | True <input type="checkbox"/> | False <input type="checkbox"/> |

I value a religious philosophy

True

False

Incompetence makes me angry

True

False

I have high standards for myself and for others

True

False

**You have completed part 1A.  
Go to the next section.**

## Section 2A

### Memory and Attention

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| My memory is very strong                                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am an excellent listener                                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am good at remembering stories                           | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I usually do not forget a face                             | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very creative   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have an excellent attention span and rarely miss a thing | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have many good hunches                                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I notice everything going on around me                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a good imagination                                  | True <input type="checkbox"/> | False <input type="checkbox"/> |

### Physical

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I tend to have a slow pulse  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| My body has excellent tone   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a great figure/build  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have low cholesterol   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| When I eat, I love to experience the aromas and the beauty of food | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I love yoga and stretching my muscles                              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| During sex I am very sensual                                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have had an eating disorder at some point in my life             | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have tried many alternative remedies                             | True <input type="checkbox"/> | False <input type="checkbox"/> |

## Section 2A

### Personality

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I am a perpetual romantic                                      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am in touch with my feelings                                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to make decisions based on hunches                      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I like to speculate  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Some people say I have my head in the clouds                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I love reading fiction   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a rich fantasy life                                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am creative when solving people problems                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very expressive; I like to talk about what's bothering me | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am buoyant   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I believe that it is possible to have a mystical experience    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I believe in being a soul mate                                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Sometimes the mystical can excite me                           | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to overreact to my body                                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I find it easy to change; I am not set in my ways              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am deeply in touch with my emotions                          | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to love someone one minute and hate him or her the next | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am flirtatious   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't mind spending money if it benefits my relationships    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to fantasize when I'm having sex                        | True <input type="checkbox"/> | False <input type="checkbox"/> |

My relationships tend to be filled with romance True  False

I love watching romantic movies True  False

I take risks in my love life True  False

**Character**

I foresee a better future True  False

I am inspired to help other people True  False

I believe that all things are possible, particularly for those who are devoted True  False

I am good at creating harmony between people True  False

Charity and altruism come from the heart, and I have plenty of both True  False

Others think me of as having vision True  False

My thoughts on religion often change True  False

I am an idealist, but not a perfectionist True  False

I'm happy with someone who just treats me right True  False

**You have completed part 2A.  
Go to the next section.**

## Section 3A

### Memory and Attention

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I have a stable attention span and can follow other people's logic | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I enjoy reading people more than books                             | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I retain most of what I hear                                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can remember facts people tell me                                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I learn from my experiences  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am good at remembering names                                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can focus very well on tasks and people's stories                | True <input type="checkbox"/> | False <input type="checkbox"/> |

### Physical

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I find it easy to relax                               | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am a calm person                                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I find it easy to fall asleep at night                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to have high physical endurance                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have low blood pressure                             | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I do not have a family history of stroke              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| When it comes to sex, I am not very experimental      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have little muscle tension                          | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Caffeine has little effect on me                      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I take my time eating my meals                        | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I sleep well  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't have many harmful food cravings such as sugar | True <input type="checkbox"/> | False <input type="checkbox"/> |

Exercising is a regimented habit for me

True

False

### Personality

I am not very adventurous

True

False

I do not have a temper

True

False

I have a lot of patience

True

False

I don't enjoy philosophy

True

False

I love watching sitcoms about families

True

False

I dislike movies about other worlds or universes

True

False

I am not a risk taker

True

False

I keep past experiences in mind before I make decisions

True

False

I am a realistic person

True

False

I believe in closure

True

False

I like facts and details

True

False

When I make a decision, it's permanent

True

False

I like to plan my day, week, month, etc

True

False

I collect things

True

False

I am a little sad

True

False

I'm afraid of confrontations and altercations

True

False

I save up a lot of money in the event of a crisis

True

False

I tend to create strong, lasting bonds with others

True

False

I am a stable pillar in people's lives

True

False

### Character

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I believe in the adage 'Early to bed, early to rise.'                                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I believe in meeting deadlines   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I try to please others the best I can  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am good at maintaining long-lasting relationships                                  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I pay attention to where my money goes   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I believe that the world would be more peaceful if people would improve their morals | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very loyal and devoted to my loved ones   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have high ethical standards that I live by   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I pay close attention to laws, principles, and policies                              | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I believe in participating in service for the community                              | True <input type="checkbox"/> | False <input type="checkbox"/> |

**You have completed part 3A.  
Go to the next section.**

## Section 4A

### Memory and Attention

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I can easily concentrate on manual-labor tasks                                  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a good visual memory   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very perceptive  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am an impulsive thinker   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I live in the here and now  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to say, 'Tell me the bottom line.'                                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am a slow book learner, but I learn easily from experience                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I need to experience something or work at it hands-on in order to understand it | True <input type="checkbox"/> | False <input type="checkbox"/> |

### Physical

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I sleep too much  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| When it comes to sex, I am very experimental                          | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have low blood pressure   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very action-oriented   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very handy around the house                                      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am very active outdoors   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I engage in daring activities such as skydiving and motorcycle riding | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can solve problems spontaneously                                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I rarely have carbohydrate cravings                                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I usually grab a quick meal on the run                                | True <input type="checkbox"/> | False <input type="checkbox"/> |

I'm not very consistent with my exercise routine; I may exercise daily for three weeks and then skip it for a month

True

False

### Personality

I live life in the immediate moment

True

False

I like to perform/entertain in public

True

False

I tend to gather facts in an unorganized manner

True

False

I am very flexible

True

False

I am a great negotiator

True

False

I often just like to 'eat, drink, and be merry.'

True

False

I am dramatic

True

False

I am very artistic

True

False

I am a good craftsman

True

False

I'm a risk taker when it comes to sports

True

False

I believe in psychics

True

False

I can easily take advantage of others

True

False

I am cynical of others' philosophies

True

False

I like to have fun

True

False

My favorite types of movies are horror flicks

True

False

I am fascinated with weapons

True

False

I rarely stick to a plan or agenda

True

False

I have trouble remaining faithful

True

False

I am easily able to separate and move on when relationships with loved ones end

True

False

I don't pay much attention to how I spend my money True  False

I have many frivolous relationships True  False

### **Character**

I always keep my options open in case something better comes up True  False

I don't like working hard for long periods of time True  False

I believe things should have a function and purpose True  False

I am optimistic True  False

I live in the moment True  False

I pray only when I'm in need of spiritual support True  False

I don't have particularly high morals and ethical values True  False

I do what I want, when I want to True  False

I don't care about being perfect; I just live my life True  False

Savings are for suckers True  False

**You have completed part 4A.  
Go to the next section.**

# THE BRAVERMAN NATURE ASSESSMENT

## *Instructions:*

The second assessment will determine if you are deficient in any of the four bio-chemicals, including the one that governs your nature. Many of the questions relate to symptoms you might be experiencing.

Answer the questions in terms of how you feel right now; it doesn't matter how long you've been experiencing these symptoms, or even if they occurred today for the first time.

## PART B: DEFINING YOUR DEFICIENCIES

### Section 1B

#### Memory and Attention

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I have trouble paying consistent attention and concentrating            | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I need caffeine to wake up  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I cannot think quickly enough   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I do not have a good attention span                                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have trouble getting through a task even when it is interesting to me | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am slow in learning new ideas   | True <input type="checkbox"/> | False <input type="checkbox"/> |

#### Physical

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I crave sugar  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have decreased libido  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I sleep too much   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have a history of alcohol or addiction                             | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have recently felt worn out for no apparent reason                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I sometimes experience total exhaustion without even exerting myself | True <input type="checkbox"/> | False <input type="checkbox"/> |

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I have always battled weight problems                      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have little motivation for sexual experiences            | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have trouble getting out of bed in the morning           | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have had a craving for cocaine, amphetamines, or Ecstasy | True <input type="checkbox"/> | False <input type="checkbox"/> |

### **Personality**

- |                                     |                               |                                |
|-------------------------------------|-------------------------------|--------------------------------|
| I feel fine just following others   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| People seem to take advantage of me | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am feeling very down or depressed | True <input type="checkbox"/> | False <input type="checkbox"/> |
| People have told me I am too mellow | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have little urgency               | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I let people criticize me           | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I always look to others to lead me  | True <input type="checkbox"/> | False <input type="checkbox"/> |

### **Character**

- |                                 |                               |                                |
|---------------------------------|-------------------------------|--------------------------------|
| I have lost my reasoning skills | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can't make good decisions     | True <input type="checkbox"/> | False <input type="checkbox"/> |

**You have completed part 1B.**

**Go to the next section.**

## Section 2B

### Memory and Attention

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I lack imagination.  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have difficulty remembering names when I first meet people | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have noticed that my memory ability is decreasing          | True <input type="checkbox"/> | False <input type="checkbox"/> |
| My significant other tells me I don't have romantic thoughts | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can't remember my friends' birthdays                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have lost some of my creativity                            | True <input type="checkbox"/> | False <input type="checkbox"/> |

### Physical

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I have insomnia   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have lost muscle tone                                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't exercise anymore                                      | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I crave fatty foods   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have experimented with hallucinogens or other illicit drugs | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I feel like my body is falling apart                          | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can't breathe easily  | True <input type="checkbox"/> | False <input type="checkbox"/> |

## Personality

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I don't feel joy very often   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I feel despair  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I protect myself from being hurt by others by never telling much about myself | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I find it more comfortable to do things alone rather than in a large group    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Other people get angrier about bothersome things than I do.                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I give in easily and tend to be submissive                                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I rarely feel passionate about anything                                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I like routine  | True <input type="checkbox"/> | False <input type="checkbox"/> |

## Character

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I don't care about anyone's stories but mine | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't pay attention to people's feelings   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I don't feel buoyant                         | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I'm obsessed with my deficiencies            | True <input type="checkbox"/> | False <input type="checkbox"/> |

**You have completed part 2B.  
Go to the next section.**

## Section 3B

### Memory and Attention

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I find it difficult to concentrate because I'm nervous and jumpy                                    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I can't remember phone numbers  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have trouble finding the right words  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I know I am intelligent, but it is hard to show others  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| My ability to focus comes and goes  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| When I read, I find I have to go back over the same paragraph a few times to absorb the information | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am a quick thinker but can't always say what I mean   | True <input type="checkbox"/> | False <input type="checkbox"/> |

### Physical

- |  |                               |                                |
|--|-------------------------------|--------------------------------|
| I feel shaky                               | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I sometimes tremble                        | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have frequent backaches and/or headaches | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to have shortness of breath         | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to have heart palpitations          | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to have cold hands                  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I sometimes sweat too much                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am sometimes dizzy                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I often have muscle tension                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to get butterflies in my stomach    | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I crave bitter foods                       | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am often nervous                         | True <input type="checkbox"/> | False <input type="checkbox"/> |

I like yoga because it helps me to relax True  False

I often feel fatigued even when I have had a good night's sleep True  False

I overeat True  False

### **Personality**

I have mood swings True  False

I enjoy doing many things at one time, but I find it difficult to decide what to do first True  False

I tend to do things just because I think they'd be fun True  False

When things are dull, I always try to introduce some excitement True  False

I tend to be fickle, changing my mood and thoughts frequently. True  False

I tend to get overly excited about things True  False

My impulses tend to get me into a lot of trouble True  False

I tend to be theatrical and draw attention to myself True  False

I speak my mind no matter what the reaction of others may be True  False

I sometimes have fits of rage and then feel terribly guilty True  False

I often tell lies to get out of trouble True  False

I have always had less interest than the average person in sex True  False

## Character

I don't play by the rules anymore

True

False

I have lost many friends

True

False

I can't sustain romantic relationships

True

False

I consider the law arbitrary and without reason

True

False

I now consider rules that I used to follow ridiculous

True

False

**You have completed part 3B.  
Go to the next section.**

## Section 4B

### Memory and Attention

I am not very perceptive

True

False

I can't remember things that I have seen in the past

True

False

I have a slow reaction time

True

False

I have a poor sense of direction

True

False

### Physical

I have night sweats

True

False

I have insomnia

True

False

I tend to sleep in many different positions in order to feel comfortable

True

False

I always awake early in the morning

True

False

I can't relax

True

False

I wake up at least two times per night

True

False

It is difficult for me to fall back asleep when I am awakened

True

False

I crave salt

True

False

I have less energy to exercise

True

False

I am sad

True

False

## Personality

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I have chronic anxiety                                | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am easily irritated                                 | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have thoughts of self-destruction                   | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I have had suicidal thoughts in my life               | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I tend to dwell on ideas too much                     | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I am sometimes so structured that I become inflexible | True <input type="checkbox"/> | False <input type="checkbox"/> |
| My imagination takes over                             | True <input type="checkbox"/> | False <input type="checkbox"/> |
| Fear grips me   | True <input type="checkbox"/> | False <input type="checkbox"/> |

## Character

- |   |                               |                                |
|---|-------------------------------|--------------------------------|
| I can't stop thinking about the meaning of life | True <input type="checkbox"/> | False <input type="checkbox"/> |
| I no longer want to take risks                  | True <input type="checkbox"/> | False <input type="checkbox"/> |
| The lack of meaning in my life is painful to me | True <input type="checkbox"/> | False <input type="checkbox"/> |

**You have completed part 4B.  
Total your answers. on the next page**



# Braverman Assessment Results

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Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ E-Mail \_\_\_\_\_

In each category, indicate the number of TRUE answers you have selected:

## Part A Results

Section 1A =  Dopamine Nature

Section 2A =  Acetylcholine Nature

Section 3A =  GABA Nature

Section 4A =  Serotonin Nature

**The category with the greatest number of true responses will identify your dominant nature. A classically dominant nature is typically a score of 35 and above in any one category, which suggests a less-than-balanced life.**

**Note: When any other nature is 10-15 points lower than the dominant one, the nature with the lower score is probably a lifelong relative deficiency and needs balance even in times of good health. For example, if your score is 40 dopamine, 33 acetylcholine, 25 GABA, and 17 serotonin, you likely have long-standing deficiencies in both GABA and serotonin.**

## Part B Results

Section 1B =  Dopamine Nature

Section 2B =  Acetylcholine Nature

Section 3B =  GABA Nature

Section 4B =  Serotonin Nature

**The highest number is your most deficient nature, the one that is most likely to lead to illness. Your deficient nature can be the same as or different from your dominant nature. In fact, you'll most likely recognize deficits in your dominant nature sooner than you would in other aspects of your bio-chemistry, simply because you are used to behaving and feeling a specific way.**