

Female Symptom Checklist

Use each of the following checklists to determine your symptoms of hormone imbalance and to help you choose the appropriate hormone test profile.

Category 1: Basic Hormone Imbalance

Mark which of the following symptoms are troublesome and/or persist over time

<input type="checkbox"/> Hot flashes	<input type="checkbox"/> Mood swings (PMS)	<input type="checkbox"/> Urinary incontinence	<input type="checkbox"/> Night sweats
<input type="checkbox"/> Heart palpitations	<input type="checkbox"/> Cystic Ovaries	<input type="checkbox"/> Vaginal dryness	<input type="checkbox"/> Acne
<input type="checkbox"/> Heavy menses	<input type="checkbox"/> Foggy thinking	<input type="checkbox"/> Weight gain	<input type="checkbox"/> Depressed mood
<input type="checkbox"/> Fibrocystic breasts	<input type="checkbox"/> Irritability	<input type="checkbox"/> Increased body/facial	<input type="checkbox"/> Headaches
<input type="checkbox"/> Thinning skin	<input type="checkbox"/> Uterine fibroids	<input type="checkbox"/> hair	<input type="checkbox"/> Bone loss

Category 2: Adrenal Hormone Imbalance

Mark which of the following symptoms are troublesome and/or persist over time

<input type="checkbox"/> Aches and pains	<input type="checkbox"/> Elevated triglycerides	<input type="checkbox"/> Morning Fatigue	<input type="checkbox"/> Bone loss
<input type="checkbox"/> Sleep disturbances	<input type="checkbox"/> Depression	<input type="checkbox"/> Anxiety	<input type="checkbox"/> Blood sugar imbalance
<input type="checkbox"/> Infertility	<input type="checkbox"/> Nervousness	<input type="checkbox"/> Allergic conditions	<input type="checkbox"/> Autoimmune illness
<input type="checkbox"/> Chronic illness	<input type="checkbox"/> Evening fatigue	<input type="checkbox"/> Susceptibility to infections	

Category 3: Thyroid Hormone Imbalance

Mark which of the following symptoms are troublesome and/or persist over time

<input type="checkbox"/> Aches and pains	<input type="checkbox"/> Anxiety	<input type="checkbox"/> Brittle Nails	<input type="checkbox"/> Depression
<input type="checkbox"/> Dry skin	<input type="checkbox"/> Cold hands and feet	<input type="checkbox"/> Headaches	<input type="checkbox"/> Infertility
<input type="checkbox"/> Fatigue	<input type="checkbox"/> Foggy thinking	<input type="checkbox"/> Weight gain	<input type="checkbox"/> Feeling cold all the time
<input type="checkbox"/> Heart palpitations	<input type="checkbox"/> Low libido	<input type="checkbox"/> Inability to lose weight	<input type="checkbox"/> Sleep disturbances
<input type="checkbox"/> Constipation	<input type="checkbox"/> Thinning hair	<input type="checkbox"/> Menstrual Irregularity	<input type="checkbox"/> Elevated cholesterol

Category 4: Cardio metabolic Risk

Mark which of the following symptoms are troublesome and/or persist over time

<input type="checkbox"/> Smoker	<input type="checkbox"/> Weight Gain	<input type="checkbox"/> Heart disease of family history of heart disease
<input type="checkbox"/> High blood sugar	<input type="checkbox"/> Sugar cravings	<input type="checkbox"/> Diabetes of family history of diabetes
<input type="checkbox"/> High blood pressure	<input type="checkbox"/> Fatigue	<input type="checkbox"/> Waist size greater than 35 inches
<input type="checkbox"/> Overweight or obese	<input type="checkbox"/> Low physical activity	

If you checked symptom IN ALL four categories the suggested test profiles are:

Good: Female Blood Profile I or Female/Male Saliva Profile I

Best: Comprehensive Female Profile I or II and Cardio metabolic Profile I

If you checked symptoms ONLY in Category 1, the suggested test profiles are:

Good: Female Blood Profile I or Female/Male Saliva Profile I

Best: Comprehensive Female Profile I or II

If you checked symptoms ONLY in Category 2, the suggested test profiles are:

Good: Diurnal Cortisol (Saliva)

Best: Comprehensive Female profile I or II (Saliva/Blood Spot)

If you checked symptoms ONLY in Category 3, the suggested test profiles are:

Good: Complete Thyroid Profile

Best: Comprehensive Female I or II (Saliva/Blood Spot)

If you checked symptoms ONLY in Category 4, the suggested test profiles are:

Good: Cardio metabolic Profile I plus Diurnal Cortisol

Best: Cardio metabolic Profile I plus Female/Male Saliva Profile III

Adrenal Health Questionnaire: Section A

(1 point for each yes answer - circle Y for "yes" or N for "no")

1. Do you frequently have low body temperatures? (<98 degrees F)	Y	N
2. Do you frequently get irritable?	Y	N
3. Do you have poor memory or concentrations?	Y	N
4. Do you notice palpitations?	Y	N
5. Do you suffer from allergies or asthma?	Y	N
6. Do you bruise easily or find your wounds heal slowly?	Y	N
7. Do you get frequent/chronic infections?	Y	N
8. Do you have dry thinning skin?	Y	N
9. Do you get headaches?	Y	N
10. Do you have unexplained hair loss?	Y	N
11. Do you skip meals?	Y	N
12. Do you exercise more than one time each week?	Y	N
13. Do you have thyroid problems?	Y	N
14. Is your energy good all day?	Y	N
15. Do you need caffeine in the morning or after lunch?	Y	N

(3 points for each yes answer - circle Y for "yes" or N for "no")

16. Are you emotionally overstressed?	Y	N
17. Do you get tenderness across your lower back?	Y	N
18. Do you suffer from depression or down moods?	Y	N
19. Do you have low blood pressure?	Y	N
20. Do you experience a "second wind" (high energy) at bedtime?	Y	N
21. Do you experience chronic or recurrent inflammation?	Y	N
22. Do you get light headed when sitting up or standing?	Y	N

(5 points for each yes answer (yes to any of these should trigger adrenal test))

23. Do you suffer from chronic pain?	Y	N
24. Do you suffer from low blood sugar/hypoglycemia? (i.e. headaches, sleepiness, mood swings if skipping meals)	Y	N
25. Do you suffer from insomnia?	Y*	N
26. Do you experience symptoms of PMS? (breast tenderness, abdominal cramping, heavy periods, mood swings)	Y**	N
27. Are you menopausal or peri menopausal? (skipped periods, between 45-55 years old, hot flashes, vaginal dryness)	Y**	N

If your score is >10 you probably have some degree of adrenal dysfunction

If your score is >20 it is highly probable you have adrenal dysfunction

If your score is >30 it is nearly certain you have adrenal dysfunction

*If you answered yes to question 25 please also complete **Section B - Insomnia**

*If you answered yes to questions 26 or 27 please also complete **Section C - Female Hormone**

Adrenal Health Questionnaire: Section B - Insomnia

Circle your answers Y for "yes" or N for "no".

- | | | |
|--|---|---|
| 1. Do you experience difficulty falling asleep? | Y | N |
| 2. Does your mind race when trying to fall asleep? | Y | N |
| 3. Does it take you more than 20 minutes to fall asleep once the lights are off? | Y | N |
| 4. Do you experience a second wind (high energy) at night? | Y | N |
| 5. Do you have trouble staying asleep? | Y | N |
| 6. Do you wake more than once per night? | Y | N |
| 7. Do you have trouble going back to sleep once awakened? | Y | N |
| 8. Do you frequently waken between 2-3am? | Y | N |
| 9. Do you experience restless legs when trying to sleep? | Y | N |
| 10. Do you recall your dreams? | Y | N |
| 11. Do you have vivid or disturbing nightmares? | Y | N |
| 12. Do you sleep/nap during daylight hours? | Y | N |
| 13. Do you feel groggy or sleepy when you awaken? | Y | N |
| 14. Do you work "third shift" (work nights/sleep days)? | Y | N |
| 15. Are you depressed when the weather is cloudy or overcast? | Y | N |
| 16. Are you taking any sleeping pills, natural or prescription? | Y | N |
| 17. Do you snore? | Y | N |
| 18. Have you ever been diagnosed with sleep apnea? | Y | N |
| 19. Do you use coffee, caffeine or other stimulants/medications? | Y | N |
| 20. Do you have children or pets that sleep in your room/bed? | Y | N |
| 21. Do you exercise late in the day? | Y | N |
| 22. Do you eat carbohydrate snacks before bed (cake, cookies, ice cream?) | Y | N |
| 23. Do you eat nothing between dinner and bedtime? | Y | N |
| 24. Do you drink alcohol at night? | Y | N |
| 25. Do you have sinus problems/allergies/asthma that is worse at night? | Y | N |
| 26. Does your sleep partner snore or keep you awake due to restlessness? | Y | N |
| 27. Have you ever had a concussive injury (black out due to head trauma)? | Y | N |
| 28. Is your insomnia related to your cycle? | Y | N |
| 29. Are you menopausal or have you had a hysterectomy? | Y | N |

Adrenal Health Questionnaire: Section C - Female Hormone

Circle your answers Y for "yes" or N for "no".

Pre & Peri Menopausal Women...

Do you experience frequent or irregular periods/menstruation?	Y	N
Do you experience severe abdominal cramping with your period?	Y	N
Do you get breast tenderness around the time of your periods?	Y	N
Do you get moody or irritable during or just before your period?	Y	N
Do you get heavy periods (heavy bleeding more than 2-3 days)?	Y	N
Do you have uterine fibroids?	Y	N
Do you have trouble getting to sleep because your mind is racing?	Y	N
Have you had trouble getting pregnant or experienced a miscarriage?	Y	N
Do you get anxiety or panic attacks?	Y	N
Do you take or have you taken birth control pills in the past two years?	Y	N
Have you gone without a period for more than 3 months?	Y	N
Have you experienced depression or post partum depression?	Y	N
Do you get headaches/migraines around the time of your period?	Y	N
Do you get cravings for sugar, fat, salt, or chocolate?	Y	N
Do you experience pain during intercourse?	Y	N
Do you get bloating and water retention during or around your period?	Y	N
Do you take birth control pills, patches, injections or hormone-types?	Y	N
Do you have a family history of breast, uterine, or ovarian cancer?	Y	N
Do you have endometriosis?	Y	N

Post Menopausal Women...

Was your last menstrual period more than a year ago?	Y	N
Do you get "hot flashes"?	Y	N
Do you get severe sweating at night?	Y	N
Do you have vaginal dryness?	Y	N
Have you noticed vaginal thinning?	Y	N
Do you notice a reduced libido?	Y	N
Are you concerned for osteoporosis or hip/spinal fractures?	Y	N
Do you have trouble getting to sleep because your mind is racing?	Y	N
Do you get anxiety or panic attacks?	Y	N
Do you experience pain during intercourse?	Y	N
Do you take hormone replacement (pills, creams, patches, etc.)?	Y	N
Do you have a family history of breast, uterine, or ovarian cancer?	Y	N
Have you had a hysterectomy?	Y	N

Dr. Eric Braverman's: Nature Assessment

Please answer each question by either circling T for true or F for false. At the end of each group please add up only the total number of true responses.

1A

I find it easy to process thoughts.	T	F
I concentrate effectively.	T	F
I am a deep thinker.	T	F
I am a quick thinker.	T	F
I become distracted because I do so many tasks at once.	T	F
I enjoy intense debate.	T	F
I have a good imagination.	T	F
I tend to criticize and analyze my thoughts.	T	F

Physical

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

Personality

I am a very domineering individual.	T	F
I sometimes do not notice my feelings.	T	F
I often have trouble listening to others because my own ideas dominate.	T	F
I have been in many physical altercations.	T	F
I tend to be future orientated.	T	F
I am sometimes speculative.	T	F
Most people view me as thinking-orientated.	T	F
I daydream and often fantasize.	T	F
I like to read history and other non-fiction books.	T	F
I admire ingenuity.	T	F
I can be slow in identifying how people can cause trouble.	T	F
I don't usually get tricked by people who say they need my help.	T	F
Most people view me as innovative.	T	F
I am often agitated or irritated.	T	F
I have fantasies of unlimited power.	T	F

I love spending money.	T	F
I dominate others in my relationships.	T	F
I am very hard on myself.	T	F
I react aggressively to criticism, often becoming defensive in front of others.	T	F

Character

Some individuals view me as tough-minded.	T	F
Most people view me as achievement orientated.	T	F
Some people say that I am irrational.	T	F
I will do anything to reach a goal.	T	F
I value a religious philosophy.	T	F
Incompetence makes me angry.	T	F
I have high standards for myself and others.	T	F

TOTAL NUMBER OF T RESPONSES:

2A

Memory & Attention

My memory is very strong.	T	F
I am a good listener.	T	F
I am good at remembering stories.	T	F
I usually do not forget a face.	T	F
I am very creative.	T	F
I have an excellent attention span and rarely miss a thing.	T	F
I have many good hunches.	T	F
I notice everything going on around me.	T	F
I have a good imagination.	T	F

Physical

I tend to have a slow pulse.	T	F
My body has excellent tone.	T	F
I have a great figure/build.	T	F
I have low cholesterol.	T	F
When I eat, I love to experience the aromas and the beauty of the food.	T	F
I love yoga and stretching my muscles.	T	F
During sex I am very sensual.	T	F
I have had an eating disorder at some point in my life.	T	F
I have tried many alternative remedies.	T	F

Personality

I am a perpetual romantic.	T	F
I am in touch with my feelings.	T	F
I tend to make decisions based on hunches.	T	F
I like to speculate.	T	F
Some people say I have my head in the clouds.	T	F
I love reading fiction.	T	F
I have a rich fantasy life.	T	F

I am very creative when solving problems.	T	F
I am very expressive; I like to talk about what's bothering me.	T	F
I am buoyant.	T	F
I believe that it is possible to have mystical experience.	T	F
I believe in being a soul mate.	T	F
Sometimes the mystical can excite me.	T	F
I tend to over react to my body.	T	F
I find it easy to change; I am not set in my ways.	T	F
I am deeply in touch with my emotions.	T	F
I tend to love someone one minute and hate him or her the next.	T	F
I am flirtatious.	T	F
I don't mind spending money if it benefits my relationships.	T	F
I tend to fantasize when I am having sex.	T	F
My relationships tend to be filled with romance.	T	F
I love watching romantic movies.	T	F
I take risks in my love life.	T	F

Character

I foresee a better future.	T	F
I am inspired to help other people.	T	F
I believe that all things are possible, particularly for those that are devoted.	T	F
I am good at creating harmony between people.	T	F
Charity and altruism come from the heart and have plenty of both.	T	F
Others think of me as having vision.	T	F
My thoughts on religion often change.	T	F
I am an idealist but not a perfectionist.	T	F
I am happy with someone who just treats me right.	T	F

TOTAL NUMBER OF T RESPONSES:

3A

Memory & Attention

I have a stable attention span and can follow other people's logic.	T	F
I enjoy reading people more than books.	T	F
I retain most of what I hear.	T	F
I can remember facts that people tell me.	T	F
I learn from my experiences.	T	F
I am good at remembering names.	T	F
I can focus very well on tasks and people's stories.	T	F

Physical

I find it easy to relax.	T	F
I am a calm person.	T	F
I find it east to fall asleep at night.	T	F
I tend to have high endurance.	T	F
I have low blood pressure.	T	F
I do not have a family history of stroke.	T	F

When it comes to sex, I am not very experimental.	T	F
I have little muscle tension.	T	F
Caffeine has little effect on me.	T	F
I take my time eating my meals.	T	F
I sleep well.	T	F
I don't have many harmful food cravings such as sugar.	T	F
Exercising is a regimented habit for me.	T	F

Personality

I am not very adventurous.	T	F
I do not have a temper.	T	F
I have a lot of patience.	T	F
I don't enjoy philosophy.	T	F
I love watching sitcoms about families.	T	F
I dislike movies about other worlds or universes.	T	F
I am not a risk taker.	T	F
I keep past experiences in mind before I make decisions.	T	F
I am a realistic person.	T	F
I believe in closure.	T	F
I like facts and details.	T	F
When I make a decision, it's permanent.	T	F
I like to plan my day, week, month, etc.	T	F
I collect things. I am a little sad.	T	F
I'm afraid of confrontations and altercations.	T	F
I save up a lot of money in the event of a crisis.	T	F
I tend to create strong, lasting bonds with others.	T	F
I am a stable pillar in people's lives.	T	F

Character

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

TOTAL NUMBER OF T RESPONSES:

4A

Memory & Attention

I can easily concentrate on manual labor tasks.	T	F
I have good visual memory.	T	F

I am very perceptive.	T	F
I am an impulsive thinker.	T	F
I live in the here and now.	T	F
I tend to say, "Tell me the bottom line".	T	F
I am a slow book learner, but I learn easily form experience.	T	F
I need to experience something or work at it hands-on in order to understand it.	T	F

Physical

I sleep too much.	T	F
When it comes to sex I am very experimental.	T	F
I have low-blood pressure.	T	F
I am very action-orientated.	T	F
I am very handy to have around the house.	T	F
I am very active outdoors.	T	F
I engage in daring activities such as skydiving and motorcycle riding.	T	F
I can solve problems spontaneously.	T	F
I rarely have carbohydrate cravings.	T	F
I usually grab a quick meal on the run.	T	F
I am not very consistent with my exercise routine; I may exercise daily for three weeks and then skip it for a month.	T	F

Personality

I live life in the immediate moment.	T	F
I like to perform/entertain in public.	T	F
I tend to gather facts in an unorganized manner.	T	F
I am very flexible.	T	F
I am a great negotiator.	T	F
I often just like to "eat, drink & be merry".	T	F
I am dramatic.	T	F
I am very artistic.	T	F
I am a good craftsman.	T	F
I am a risk taker when it comes to sports.	T	F
I believe in physics.	T	F
I can easily take advantage of others.	T	F
I am cynical of other's philosophies.	T	F
I like to have fun.	T	F
My favorite types of movies are horror flicks.	T	F
I am fascinated with weapons.	T	F
I rarely stick to a plan or agenda.	T	F
I have trouble remaining faithful.	T	F
I am easily able to separate and move on when relationships with loved ones end.	T	F
I don't pay much attention to how I spend money.	T	F
I have many frivolous relationships.	T	F

Character.

I always keep my opinions open in case something better comes up.	T	F
I don't like working hard for long periods of time.	T	F
I believe things should have a function and a purpose.	T	F
I am optimistic.	T	F
I live in the moment.	T	F
I pray only when in need of spiritual support.	T	F
I don't have particularly high morals and ethical values.	T	F
I do what I want, when I want to.	T	F
I don't care about being perfect; I just live my life.	T	F
Savings are for suckers.	T	F

TOTAL NUMBER OF T RESPONSES: _____

Results

- 1A. Total number of T responses: dopamine nature. _____
- 2A. Total number of T responses: acetylcholine nature. _____
- 3A. Total number of T responses: GABA nature. _____
- 4A. Total number of T responses: serotonin nature. _____

Dr. Eric Braverman's: Defining Your Deficiencies Assessment

Please answer each question by either circling T for true or F for false. At the end of each group please add up only the total number of true responses.

1B

Memory & Attention

I have trouble paying consistent attention and concentrating.	T	F
I need caffeine to wake up.	T	F
I cannot think quickly enough.	T	F
I do not have a good attention span.	T	F
I have trouble getting through a task even when it is interesting to me.	T	F
I am slow in learning new ideas.	T	F

Physical

I crave sugar.	T	F
I have decreased libido.	T	F
I sleep too much.	T	F
I have a history of alcohol or addiction.	T	F
I have recently felt worn out for no apparent reason.	T	F
I sometimes experience total exhaustion without even exerting myself.	T	F
I have always battled a weight problem.	T	F
I have little motivation for sexual experiences.	T	F
I have trouble getting out of bed in the morning.	T	F
I have a craving for cocaine, amphetamines or Ecstasy.	T	F

Personality

I feel just fine following others.	T	F
People seem to take advantage of me.	T	F
I am feeling very down or depressed.	T	F
People have told me I am too mellow.	T	F
I have little urgency.	T	F
I let people criticize me.	T	F
I always look to other to lead me.	T	F

TOTAL NUMBER OF T RESPONSES: _____

2B

Memory & Attention.

I lack imagination.	T	F
I have difficulty remembering names when I first meet people.	T	F
I have noticed that my memory ability is decreasing.	T	F
My significant other tells me that I don't have romantic thoughts.	T	F
I can't remember my friends birthdays.	T	F

Physical

I have insomnia.	T	F
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I have lost muscle tone.	T	F
I don't exercise anymore.	T	F
I crave fatty foods.	T	F
I have experimented with hallucinogenics or illicit drugs.	T	F
I feel like my body is falling apart.	T	F
I can't breathe easily.	T	F

Personality

I don't feel joy very often.	T	F
I feel despair.	T	F
I protect myself from being hurt by others by never telling much about myself.	T	F
I find it more comfortable to do things alone rather than in a large group.	T	F
Other people get angrier about bothersome things than I do.	T	F
I give easily and tend to be submissive.	T	F
I rarely feel passionate about anything.	T	F
I like routine.	T	F

Character

I don't care about anyone's stories but mine.	T	F
I don't pay attention to people's feelings.	T	F
I don't feel buoyant.	T	F
I am obsessed with my deficiencies.	T	F

TOTAL NUMBER OF T RESPONSES: _____

3B

Memory & Attention

I find it difficult to concentrate because I am nervous and jumpy.	T	F
I can't remember phone numbers.	T	F
I have trouble finding the right word.	T	F
I have trouble remembering things when I am put on the spot.	T	F
I know I am intelligent, but it is hard to show others.	T	F
My ability to focus comes and goes.	T	F
When I read, I find I have to go back over the same paragraph a few times to absorb the information.	T	F
I am a quick thinker but I can't always say what I mean.	T	F

Physical

I feel shaky.	T	F
I sometimes tremble.	T	F
I have frequent backaches and/or headaches.	T	F
I tend to have shortness of breath.	T	F
I tend to have heart palpitations.	T	F
I tend to have cold hands.	T	F
Sometimes I sweat too much.	T	F
I am sometimes dizzy.	T	F
I often have muscle tension.	T	F

I tend to get butterflies in my stomach.	T	F
I crave bitter foods.	T	F
I am often nervous.	T	F
I like yoga because it helps me relax.	T	F
I often feel fatigued even when I have had a good nights sleep.	T	F
I overeat.	T	F

Personality.

I have mood swings.	T	F
I enjoy doing many things at one time, but I find it difficult to decide which to do first.	T	F
I tend to do things just because I think they'd be fun.	T	F
When things are dull, I always try to introduce some excitement.	T	F
I tend to be fickle, changing my mood and thoughts frequently.	T	F
I tend to get overly excited about things.	T	F
My impulses tend to get me into a lot of trouble.	T	F
I tend to be theatrical and draw attention to myself.	T	F
I speak my mind no matter what the reaction of others may be.	T	F
I sometimes have fits of rage and then feel terribly guilty.	T	F
I often tell lies to get out of trouble.	T	F
I have always had less interest that the average person in sex.		

Character

I don't play by the rules anymore.	T	F
I have lost many of my friends.	T	F
I can't sustain romantic relationships.	T	F
I consider the law arbitrary and without reason.	T	F
I now consider rules that I used to follow ridiculous.	T	F

TOTAL NUMBER OF T RESPONSES:

4B

Memory & Attention

I am not very perceptive.	T	F
I can't remember things that I've seen in the past.	T	F
I have slow reaction time.	T	F
I have a poor sense of direction.	T	F

Physical

I have night sweats.	T	F
I have insomnia.	T	F
I tend to sleep in many different positions in order to feel comfortable.	T	F
I always awake early in the morning.	T	F
I can't relax.	T	F
I wake up at least two times per night.	T	F
It is difficult for me to fall back asleep when I am awakened.	T	F
I crave salt.	T	F

I have less energy to exercise.	T	F
I am sad.	T	F

Personality.

I have chronic anxiety.	T	F
I am easily irritated.	T	F
I have thoughts of self-destruction.	T	F
I have had suicidal thoughts in my life.	T	F
I tend to dwell on ideas too much.	T	F
I am sometimes so structured that I become inflexible.	T	F
My imagination takes over me.	T	F
My fear grips me.	T	F

Character

I can't stop thinking about the meaning of life.	T	F
I no longer want to take risks.	T	F
The lack of meaning in my life is painful to me.	T	F

TOTAL NUMBER OF T RESPONSES: _____

Results

1A. Total number of T responses: dopamine deficiencies.	_____
2A. Total number of T responses: acetylcholine deficiencies.	_____
3A. Total number of T responses: GABA deficiencies.	_____
4A. Total number of T responses: serotonin deficiencies.	_____

Questionnaires in this package were adapted from Dr. Eric Braverman's *The Edge Effect: Reverse or Prevent Alzheimer's, Aging, Memory Loss, Weight Gain, Sexual Dysfunction, and More.*

The *Female Symptom Checklist* is courtesy of ZRT Laboratory , and the *Adrenal Health Questionnaire* is courtesy of Ortho Molecular Products .

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