



SMBT Sevabhavi Trust's

SMBT AYURVED COLLEGE AND HOSPITAL

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Ref. No. - 1336/smbt/0515K/1

ASCP/HT-1

A. Title : SOP of Shirobasti

Date: 11/6/2021

B. Scope:

Various shirorogas like shirashool, ardhavabhedaka and conditions where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Shirobasti Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
.....(Name),

.....(City) for my ailment.

The Consultant(Name) has

explained to me to my full knowledge in my own language about my condition, treatment procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the risk associated with the treatment procedure, the possible outcome, the services available at the Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure



Before start the procedure swasti vachana is done for the welfare of the patient and for the success of the treatment .

The patient who has undergone snehana , Swedana , and purification treatments vamana and virechana .

patient should be made to sit comfortably on a chair of his knees height with his feet totally resting on the floor .

Placement or construction of Shirobasti cap :-

i) The doctor conducting the treatment should take the leather sheet and tie it around the head of the patient in the form of a cap .

ii) Lower border of the sheet should go around the head passing above the ears .

iii) The sheet is 12 angulas away from the upper part of the ear .

The black flour paste should be used to seal the junction of the cap with the scalp both inside and outside .

This paste doesn't allow the oil to leak during the procedure .

After this sterile bandage is wound around the lower area of the cap in contact with the head .

The medicine which is used for the treatment should not be heated directly on fire .

It is taken in a small bowl and placed over the boiling water which is in another big bowl .

After testing the temperature of the oil it is slowly pour into the construction of the cap .

Do not pour the oil directly over the scalp of the patient ; instead it should be slowly pour along the inner wall of the construction using large spoon .

After every few minutes the temperature of the oil in the scalp should be checked .

The medicine should never be allow to cool down .

Once it loses the temperature , remove it using the spoon / syringe .

Warm it again and pour back into the cap .

This procedure is repeated until the stipulated time duration fixed over the completion of the treatment .

The oil should to a height of 2 angulas over the scalp .

The patient should be instructed not to shake head during the procedure and should not be allowed to talk , laugh and sleep .

Duration of the treatment should be as per the consultant advised .Approximately 5-6 min .

But the indicator of the completion of duration of Shirobasti procedure is appearance of symptoms like discharge from mouth and nose .

After that the treatment should be stopped.



After completion the procedure or obtaining the signs of completion the oil is slowly removed with the help of spoon / syringe.

After removing the oil bandage cloth should be removed. The flour paste used as adhesive is removed and the cap is removed.

The patient scalp should wiped with the sterile cloth & the body should be swabbed with warm sponging .

The head , shoulders & upper part of the back , nape of the neck & cervical area are lightly massaged using the same oil for 5- 10 min

After that warm water bath should be advised to the patient .

Post kriyakalpa light digestible food should be reccomend to the patient like yavagu , vilepi , peya , manda & yusha

Post kriyakalpa pathyapathya like avoid day sleep , excessive talk , exposure to fire and sunlight , sorrow and anger .

follow up will be explained to the patient for the further treatment by attended .

G. Records:

Vital Parameters	Before Treatment		After Treatment	
Pulse Rate				
Blood Pressure				
Respiratory Rate				
IOP	Rt Eye	Lt Eye	Rt Eye	Lt Eye
Vision	Rt Eye	Lt Eye	Rt Eye	Lt Eye

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.



I.REFERENCE

- Sushruta. Sushruta Samhita Dalhana Comm.-
- Nibandhasangraha, Chaukhamba Orientalia
- Varanasi, 2002, Uttarantra, 18/17-18.
- Vagbhatta, Astanga Hridaya- Vidyotini Comm.
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- Appendix, Ayurvedic Pharmacopoeia of India, Vol.
- VII – Central Council for Research in Ayurveda and
- Siddha; Ministry of Health & Family Welfare, Govt. of India.

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Ref No. - 1336/SMBT/05/54/ASU & HT - 2

A. Title : SOP Of Bidalaka

Date:- 11/6/2021

B. Scope:

Akshishopha , Akshipaka, Eye irritation and conditions where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Bidalaka Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
.....(Name),

.....(City) for my ailment.

The Consultant(Name) has

explained to me to my full knowledge in my own language about my condition, treatment procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the risk associated with the treatment procedure, the possible outcome, the services available at the Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Name & Signature:

Witness

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure



Supine position will be taken to conduct procedure attended will relax patient and start with procedure .

Before application of bidalak clean the face and eye properly , so that no dust should enter into the eyes .

After which slight abhangya should be done on the face followed with the mild sudation on the face and patient should be advised to closed the eyes .

Then in the prescribed medicated powder Luke warm water should be added for the paste formation in semisolid consistency .

This paste will be applied on the closed and relaxed eyes excepting lid margine .

The thickness should be as per consultant advised .

Paste should be left on eyes till dry or approx 10-15 min .

After procedure the paste will be removed gently , eyes should be clen properly .

Patient will be advised to take some rest .

Lepa should allowed to remain till it becomes dry ; if left dry , it vitiates the complexion of the skin , irritate the skin and eye .

It will be removed after moistening and when removed , the face should be anointed with oil .

Post kriyakalpa pathyapathya like avoid day sleep , excessive talk , exposure to fire and sunlight , sorrow and anger .

follow up will be explained to the patient for the further treatment by attended .

G. Records:

Vital Parameters	Before Treatment		After Treatment	
Pulse Rate				
Blood Pressure				
Respiratory Rate				
IOP	Rt Eye	Lt Eye	Rt Eye	Lt Eye
Vision	Rt Eye	Lt Eye	Rt Eye	Lt Eye

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.



- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

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- Vagbhatta, Astanga Hridaya- Vidyotini Comm.
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RefNo - 1336/SMBT/0515/ASCP&HT-3

Date: 11/6/2021

A. Title : SOP Of Karnapurana

B. Scope:

Karna rogas like karna shoola , karn kshweda , karna nada and Karna Badhirya , Swastha and conditions where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Karnapurana Kriyakalpa

D. Responsibility

- Consultant
- Panchakarma therapist
- PG Students
- Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
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The Consultant(Name) has

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I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure



- 1.Rt/Lt left lateral side supine position will be given according to diseased ear given to patient
- 2.Sthahnik snehan with prescribed dravya done with total sweda given around external ear and pinna
- 3.Warming of karnapuran dravya in lukewarm water bowl
- 4.Checking of warmth of karnapuran dravya as per sensitivity of patient
- 5.Proper instillation with 2cc syringe of karnapuran dravya in external auditory canal and counting for prescribed time period
- 6.Removal of karnapuran dravya with cotton, cleaning of external auditory canal and keeping big cotton swab in external auditory canal
- 7.Removal of karnapuran dravya with cotton, cleaning of external auditory canal and keeping big cotton swab in external auditory canal
- 8.Post procedure pathyapathya explanation to patient

G. Records:

Vital Parameters	Before Treatment	After Treatment
Pulse Rate		
Blood Pressure		
Respiratory Rate		

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

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- Vagbhatta, Astanga Hridaya- Vidyotini Comm.
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Ref.No-1336/SMBT/OSISK/ASCP & HT-9

A. Title : SOP Of Gandusha

Date: 1/6/2021

B. Scope:

All Mukhrogas where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Gandusha Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
.....(Name),
.....(City) for my ailment.

The Consultant(Name) has

explained to me to my full knowledge in my own language about my condition, treatment
procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the
risk associated with the treatment procedure, the possible outcome, the services available at the
Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the
Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor)

Name & Signature

F. Procedure

1. Patient's face, head, neck and shoulder should be massaged with oil.



2. Mild swedan should be given to the patient.
3. Warm drugs should be hold in mouth.
4. Drugs are taken as much as patient can hold in mouth so that drugs cant move in mouth.
5. When watery discharge get out of the nose and ears, then drugs can be spit out.
6. This process can be done till patient get vakra laghavta.

G. Records:

Vital Parameters	Before Treatment	After Treatment
Pulse Rate		
Blood Pressure		
Respiratory Rate		

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

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Ref No. 1356/SMBT/05/2021/ASCP RHT-5

A. Title : SOP Of Kavala

Date: 1/6/2021

B. Scope:

All Mukhrogas where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Kavala Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department

.....(Name),

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The Consultant(Name) has

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procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the
risk associated with the treatment procedure, the possible outcome, the services available at the
Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the
Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure:

1. Patient's face, neck, head and shoulders should be massaged with oil.



2. Mild swedan should be given to the patient.
3. Warm drugs are hold in the mouth of patient.
4. Drugs are taken in a small amount so that it can be move in the mouth.
5. When watery discharge get out of the nose and ears ,then drugs can be split out.
6. This process can be done till patient will get vakra laghavta.

G. Records:

Vital Parameters	Before Treatment	After Treatment
Pulse Rate		
Blood Pressure		
Respiratory Rate		

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

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Ref No. 1336SMBT/05/SH/ASCP/KIT- 6

A. Title : SOP Of Anjana

Date: 11/6/2021

B. Scope:

Netrakandu , Abhishyanda , healthy patient, etc where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Anjana Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
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.....(Name),
.....(City) for my ailment.

The Consultant(Name) has

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procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the
risk associated with the treatment procedure, the possible outcome, the services available at the
Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the
Consultant

Date:

Signature

Consultant

Name & Signature:

Witness

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure:

Prerequisite =



1) Sitting position will be given to conduct procedure with due assurance attendant will relax patient and to avoid anxiety of patient procedure will explain to patient then procedure will start .

2) Anjana application procedure done with medicinal form of Gutika, Raskriya to inner side of lower lid either by finguretip or by Anjana shalaka

3) Matra of Anjana decided by consultant doctor as per the severity of disease of eyes or according to the doashas

4) Procedure-

- Eyelid are retracted with left hand , while the help of right hand shalaka is moved from inner canthus to outer canthus
- Anguli is used whenever Anjana is to be use in eyelid
- After applying the anjana, the patient is asked to close the eyelids gently and to rotate eyeballs due to this medicine perfectly spreads in the eyes
- Doshas dissolve and comes out in the state of lacrimation after it Netra prakshalan (eye wash)with pure water
- Post kriyakalpa pathyapthaya like avoid direct sun rays , irritant objects , long persist exposure to Sunday's , take lite diet will be explained by the attendend.

5) Follow up will be explain to patient for further treatment by attendend.

G. Records:

Vital Parameters	Before Treatment		After Treatment	
Pulse Rate				
Blood Pressure				
Respiratory Rate				
IOP	Rt Eye	Lt Eye	Rt Eye	Lt Eye
Vision	Rt Eye	Lt Eye	Rt Eye	Lt Eye

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess pressure .
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management

- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.





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Ref.No.1336/SMBT/BS/SC/ASCP&HT-7

Date: 1/6/2021

A. Title : SOP OF TARPNA

B. Scope:

Eye diseases like dry eye syndrome, drushtimandya ,computer vision syndrome, etc where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct tarpna Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
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.....(Name),

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The Consultant(Name) has

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I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature



F. Procedure:



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Prerequisite =

Tarpana should be administered only after confirmation of no infection in eyes.

Tarpana should be administered only after Samshodhana of Shira and Kaya.

Mridu Virechana with Erandabhrishta Haritaki and Nasya with Anutaila are sufficient.

Timing = Tarpana can be done either in early morning or evening; only after the digestion of any food taken previously.

Steps=

Position - Patient is asked to lie down on his back, in a chamber free from direct sun rays, wind and dust,

Procedure

1. Eyes will be encircled with firm, compact wall made up of paste of powdered Masha pulse (black gram).
2. The height of this wall should be 2 Angula.
3. The patient will be asked to close the eyes and over the closed eyes, liquefied Ghritamanda will be poured very slowly till the entire eyelashes are under the liquefied Ghrita.
4. Patient will be instructed to close and open his/her eyes (unmesha & nimesha).
5. After retaining for the stipulated time, the liquid will be drained out through the hole made near the outer canthus and the eye will be irrigated by lukewarm water fomentation.

G. Records:

Vital Parameters	Before Treatment		After Treatment	
Pulse Rate				
Blood Pressure				
Respiratory Rate				
IOP	Rt Eye	Lt Eye	Rt Eye	Lt Eye
Vision	Rt Eye	Lt Eye	Rt Eye	Lt Eye

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess pressure



- ❖ Care to be taken to avoid burns during the procedure by hot oils.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

I. REFERENCE

- Sushruta. Sushruta Samhita Dalhana Comm.-
- Nibandhasangraha, Chaukhambha Orientalia
- Varanasi, 2002, Uttaratantra, 18/17-18.
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Ref. No. 1334/SMBT/OS/LSK/18/ASCP&HT-8

Date :- 16/2/21

A. Title : SOP Of Karna Dhoopana

B. Scope:

Karnastrava , karna paka , krumikarna and conditions where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Karnadhoopana Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
.....(Name),

.....(City) for my ailment.

The Consultant(Name) has

explained to me to my full knowledge in my own language about my condition, treatment procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the risk associated with the treatment procedure, the possible outcome, the services available at the Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure

Sitting position given



local examination of ear done .

Material like dhoopam yantra , matchbox ,Hariylyadidhoomvarti

Dhoom varti inserted in dhoopam yantra hold in one hand dhoopam yantra put in near external opening of ear

Upto 5-10 min this procedure will done according to patient condition

Patient is allowe to do proper mouth breathing for proper ventilation to middle ear

Explanation of post procedure pathyapathy.

Follow up will be explain to patient for further treatment by attended

G. Records:

Vital Parameters	Before Treatment	After Treatment
Pulse Rate		
Blood Pressure		
Respiratory Rate		

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

I. REFERENCE

- Sushruta. Sushruta Samhita Dalhana Comm.-
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- Kaviraja Atrideva Gupta, Chaukhambha Prakashan,





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Rf. No. -1334/SMBT/05/15418) ASCP&HT -9

Date: 16/2/21

A. Title : SOP Of Shirolepa

B. Scope:

Shirorogs like ardhavabhedaka , suryavarta , various types of ShiraShula and conditions where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Shirolepa Kriyakalpa

D. Responsibility

- Consultant
- Panchakarma therapist
- PG Students
- Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
 SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
 _____(Name),
 _____(City) for my ailment.

The Consultant _____(Name) has
 explained to me to my full knowledge in my own language about my condition, treatment
 procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the
 risk associated with the treatment procedure, the possible outcome, the services available at the
 Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Name & Signature:

Witness

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure



1. Supine position given
2. Preparation of lepa with appropriate binding material
3. Local examination of forehead for any dermatological pathology
4. Application Of lepa as it required thickness indicated in samhita as per diseases
5. Removal of lepa after time mentioned for disease as per samhita
6. Explanation of post procedure pathyapathya
7. Follow up will be explain to patient for further treatment by attended

G. Records:

Vital Parameters	Before Treatment		After Treatment	
Pulse Rate				
Blood Pressure				
Respiratory Rate				
IOP	Rt Eye	Lt Eye	Rt Eye	Lt Eye
Vision	Rt Eye	Lt Eye	Rt Eye	Lt Eye

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

I. REFERENCE

- Sushruta. Sushruta Samhita Dalhana Comm.-
- Nibandhasangraha, Chaukhambha Orientalia
- Varanasi, 2002, Uttarantra, 18/17-18.
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Ref No. 1334/SMBT/COSISMB/ASCP&AT - 10

A. Title : SOP of Pratisarana

Date: 1/6/2024

B. Scope:

Shirorogs like ardhavabhedaka , suryavarta , various types of ShlraShula , Mukharogas and conditions where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Pratisarana Kriyakalpa

D. Responsibility

- Consultant
- Panchakarma therapist
- PG Students
- Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
 SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
 _____(Name),
 _____(City) for my ailment.

The Consultant _____(Name) has

explained to me to my full knowledge in my own language about my condition, treatment procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the risk associated with the treatment procedure, the possible outcome, the services available at the Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure



Sitting position will be given to conduct procedure with due assurance attendant will relax patient and to avoid anxiety of patient procedure will explain to patient then procedure will start .

According to disease dravya n matra decided by consultant

Fine paste and powder form choorna made of selected dravya and after meal paste or powder applied to affected area

Duration -kept for 15 mins then it's washed with pure water

Post procedure pathyapthaya explain to patient

Follow up will be explain to patient for further treatment by attended

G. Records:

Vital Parameters	Before Treatment	After Treatment
Pulse Rate		
Blood Pressure		
Respiratory Rate		

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess volume of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot medicine.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.
- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

I. REFERENCE

- Sushruta. Sushruta Samhita Dalhana Comm.-
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- Varanasi, 2002, Uttaratantra, 18/17-18.
- Vagbhatta, Astanga Hridaya- Vidyotini Comm.
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Ref. No. B36/SMBT/05/15 KR) AS4 dHT-11

Date - 1/6/2021

A. Title : SOP Of Nasya

B. Scope:

All urdhva jatrugata vyadhi where consultant advice as treatment

C. Purpose:

Provide Standard Operating Procedure to conduct Nasya Kriyakalpa

D. Responsibility

Consultant

Panchakarma therapist

PG Students

Intern Students

E. Forms and Formats:

General Consent Form

I _____ aged _____ years, here by consent to undergo treatment at
SMBT AYURVED COLLEGE, DHAMANGAON, Shalakyatantra Department
.....(Name),

.....(City) for my ailment.

The Consultant(Name) has

explained to me to my full knowledge in my own language about my condition, treatment
procedures planned, the duration of treatment, do's & don'ts during the treatment procedure, the
risk associated with the treatment procedure, the possible outcome, the services available at the
Smbt Ayurved college, Dhamangaon and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the
Consultant

Date:

Signature

Consultant

Witness

Name & Signature:

Name & Signature:

Parent / Guardian (if the patient is minor.)

Name & Signature

F. Procedure:

Pre requisites = Sthanik Snehana with tilataila and swedana with Nadi Sweda should be done



1. Supine position will be given to conduct procedure attendend will relax patient and start with procedure. Head is tilted to 45 degrees with shoulder support
2. Hands and legs of patient should be kept straight.
3. His head is maintained at a lower position by keeping the pillow below the nneck.
4. Then the medicine is made to flow into the nostrils, while the other is kept closed.
5. The same process is carried out in the other nostril also.
6. For the administration of the drug a cotton swab or dropper can be used.
7. After installation of medicine the shoulder, neck and face are gently message.
8. Patient is asked to spit out all the impurities and medicine that reach in mouth.
9. Swedan should be done after the nasya treatment.
10. Lukewarm water Gargles should be done after completion of procedure
11. The process of nasya should be repeated for days as per consultant advised

G. Records:

Vital Parameters	Before Treatment		After Treatment	
Pulse Rate				
Blood Pressure				
Respiratory Rate				
IOP (If ophthalmic patient)	Rt Eye	Lt Eye	Rt Eye	Lt Eye
Vision	Rt Eye	Lt Eye	Rt Eye	Lt Eye

Other Parameters

Duration of Treatment	
Complications during procedure	
Other symptoms developed	

H. Process Efficiency Criteria:

Precautions:

- ❖ Avoid excess instillation of drugs
- ❖ Care to be taken to avoid burns during the procedure by hot oils.
- ❖ Time and season of administration should neither be too hot nor cold and sky should not be cloudy.

Complications and management:

- ❖ In case of burns apply shatadhouta gritam to the part.



- ❖ In case of allergic reactions like rash, itching etc., stop the procedure and ask the patient to take bath. Inform the vaidya immediately.

REFERENCE

- Sushruta. Sushruta Samhita Dalhana Comm.-
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