VRINDAVAN AYURVEDA CHIKITSALAYAM

Shivalik Foothills, Village Thana, EPIP -II, H.P
Ph:01795667166, +91 7901778899

ADMISSION RECORD

IPD No	:	8			
UHID No	:	771			
Full Name	:	ZEENAT BINDRA			
DOB	:	15/05/1974 00:00:00			
Gender	:	Male	Age	:	48
Address	:	21/2A, CHURCH ROAD SANTI KUNJ-A BLOCK, BEHIND D3, VASANT KUNJ,S DELHI			
E-mail ID	:	@			
Nationality	:	India	Mother Tounge	:	
Profession	:				
Marital Status	:				
Name of person accompanied by	:				
Contact Tel	:	9811131476			
Admission Date	:	02/04/2022			
Suggested Duration of Treatments	:				
Bed Number	:				
Chief Physician	:	Dr. Akanksha			
Consulting Doctor	:	Dr. Akanksha			

Printed on 2022/04/20 11:09:48 AM

FILE CHECK LIST

Patient Name: ZEENAT BINDRA.

MRN: 771.

S no	Content	YES	No	No. Of Pages	Remarks
1	Registration Form	✓			
2	General Consent Form/ PANCHKARMA CONSENT FORM	✓			
	PRAKURTI CHART FORM	✓			
3	Referral /Transfer Form		✓		
4	Patient Initial Assessment Sheet	✓			
5	Plan of Care	✓			
6	Visual Analog Scale Format (Pain)		✓		
7	Diet chart	✓			
8	Progress Note	✓			
9	Reassessment Notes	✓			
10	Informed patient consent for therapy /procedure	✓			
11	Pre procedure instruction sheet	✓			
12	Procedure /Treatment Notes and Post procedure /treatment instructions	✓			
13	Drug chart	✓			
14	Patient and / family member education form	✓			
15	Discharge summary	✓			
16	Investigation Results		✓		
17	Other		✓		

Auditor name & Date: 10.04.22

Consultant Name & Signature: DR. AKANKSHA SONI, REGD. NO. 6145, VRINDAVAN AYURVEDA CHIKITSALAYAM. DR. AKANKSHA. 09/04/2022 11:00 Am

Vrindavan Ayurveda Chikitsalayam
(unit of R.P Garg and Associates)
Vrindavan Estate, Village Thana, EPIP-2, Baddi, Himachal Pradesh Ph : (01795 667166) +91 7901778899

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA
Unique Identification Number	111.
OP/IP	O.P.
Admitted Location	RJIO.
Date & Time	02/04/2022

VAC /F 1/10 21

Registration Form

Date of Registration: 2/04/2022.

Name: ZEENAT BINDRA.

Date of Birth: 15/May/1976 Age: 46 Year: 1974.

Sex: ☐ Male ☑ Female

Nationality: INDIAN

Aadhar Card or Passport No.: 574741303162

Postal Address: D/O KASHMIRI LAL BINDRA, 21/2A, CHURCH ROAD, SANTI KUNJ – A BLOCK, SOUTH WEST DELHI, -110070.

Phone No: 9811131476.

Email Id: — Referred By: No.

Came to know Vrindavan Ayurveda Chikitsalayam: (Tick appropriate)

Newspaper / Friend / TV / Sign board / Pamphlets

Signature of Patient/Relative Zeenat Bindra

Vrindavan Ayurveda Chikitsalayam

Vrindavan Estate, Village Thana, EPIP-2, Baddi, Himachal Pradesh Ph : (01795 667166) +91 7901778899

ADMISSION REQUEST

Patient Name : ZEENA T BINDRA	**MRN :** 471
Consultant Name : DR. AKANKSHA.	**Date :** 02/04/2022
Routine ☑ **Urgent** ☐	**Room Type :** Single ☑ Twin ☐ Multiple Bedded ☐
Primary Diagnosis : THYROID, STRESS.	
Expected Date of Discharge :	
Admitting Doctor	DR. AKANKSHA BAMS B.A.M.S., REGD. NO. 9145 VRINDAVAN AYURVEDA CHIKITSALAYAM
Name : DR. AKANKSHA.	
Signature : Akanksha.	
Date : 02/04/2022 Time : 6:00 Am.	

Patient Name	ZEENAT BINDRA
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	111.
OP/IP	O.P.
Date & Time	02/04/2022 @ 6:02Am.

VAC /F-2/10-21

General Consent Form

I ZEENAT BINDRA aged 46 years, here by consent to undergo treatment at Vrindavan Ayurveda Chikitsalayam, Baddi, 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 Vrindavan Ayurveda Chikitsalayam, and the approximate cost of the treatment.

I agree to undergo the treatment procedures and abide by the instructions given to me by the treating Vaidya.

Patient rights and responsibilities explained to me in my understanding manner and language, I understood also, I am agreed to follow patient responsibilities and I will abide by the hospital / facility rules.

I also give consent to make timely payments of all dues of the hospital that are incurred from time to time during the management of patient in the hospital.

Date & Time : 2/04/2022 @ 6:04Am.

Vaidya Name & Signature : DR. AKANKSHA @

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

Witness Name & Signature :

Patient Name & Signature : Zeenat Bindra.

Parent / Guardian Name & Signature, if the patient is minor :

रोगी का नाम	
इलाज करने वाले वैद्य का नाम	
विशिष्ट पहचान संख्या	
ओ पी /आई पी	
तिथि एवं समय	

VAC /F-2/10-21

सामान्य सहमति प्रपत्र

मैं ..... आयु ..... वर्ष, यहां सहमति से गुजरना वृंदावन आयुर्वेद चिकित्सालयम, बद्दी में उपचार ने मुझे मेरी स्थिति, नियोजित उपचार प्रक्रियाओं, उपचार की अवधि, उपचार प्रक्रिया के दौरान क्या करें और क्या न करें, उपचार प्रक्रिया से जुड़े जोखिम के बारे में मेरी अपनी भाषा में पूरी जानकारी के साथ समझाया। संभावित परिणाम, वृंदावन आयुर्वेद चिकित्सालयम में उपलब्ध सेवाएं और उपचार की अनुमानित लागत।

मैं उपचार प्रक्रियाओं से गुजरने और मेरे द्वारा दिए गए निर्देशों का पालन करने के लिए सहमत हूँ।

वैद्य का इलाज रोगी के अधिकारों और जिम्मेदारियों को मेरी समझ और भाषा में समझाया, मैं भी समझ गया, मैं रोगी जिम्मेदारियों का पालन करने के लिए सहमत हूं और मैं अस्पताल/सुविधा नियमों का पालन करूंगा।

मैं अस्पताल में रोगी के प्रबंधन के दौरान समय-समय पर होने वाले अस्पताल के सभी बकाए का भुगतान करने के लिए भी सहमति देता हूँ।

तिथि एवं समय :

वैद्य का नाम एवं हस्ताक्षर :

साक्षी का नाम एवं हस्ताक्षर :

मरीज़ का नाम एवं हस्ताक्षर :

मातापिता /अभिभावक का नाम एवं हस्ताक्षर, यदि रोगी नाबालिग है :

VRINDAVAN AYURVEDA CHIKITSALAYAM

(Unit of R.P Garg and Associates)

Shivalik Foothills, Village Thana, EPIP-Z, Baddi, Himachal Pradesh – 173205

PANCHKARMA CONSENT (पंचकर्म सहमति)

UHID 771 IPD 771 Bed No. R111a Date 02/04/2022

Patient Name (रोगी का नाम) ZEENAT BINDRA

Name of W/O, D/O, S/O (पिता/पति का नाम) KASHMIRI LAL BINDRA

Address & Phone No. (पता एवं फोन नं.) 21/2A, CHURCH ROAD, SANTI KUNJ DELHI-110070.

DOA (भर्ती की तिथि) 02/04/2022 TOA (भर्ती का समय) 6:00A Age(उम्र) 46 Yr. Sex(लिंग) Female.

Treatment Benefits (उपचार के लाभ) Stiffness of Body will decrease & Blood supply impro

Risk (जोखिम) Pain Stiffness may increase.

Alternative (विकल्प) Stop irining therapy & rectification will be done.

We are informed about the therapy & also about the complication in which e.g.,

हमें हमारी थैरेपी के बारे में पूर्णत: बता दिया गया है एवं थैरेपी के आने वाले उपद्रवों के बारे में भी बता दिया गया है।

जैसे :-

- ☐ Fever (बुखार आना)
- ☐ Tenderness in abdomen (पेट में भारीपन)
- ☐ Backache (कमर में दर्द)
- ☐ Increase pain (दर्द में वृद्धि)
- ☐ Decrease B.P (बी.पी कम होना)
- ☐ Tingling sensation (झनझनाहट)
- ☐ Tenderness (अकड़न)
- ☑ Numbness (सुन्नपन)
- ☐ Vomiting (उल्टी)
- ☐ Loose motion (दस्त)

After Explaining about the complication & the benefits I will be responsible for everything and give full permission to the doctors & the therapists to perform. It have been clearly explained about the complications and other impacts of procedure by the doctor clearly in my own language. I have been explained about the expenses in the procedure clearly. I have been explained about the details of PROCEDURE, in case of any emergency and further referral to any higher center, the required expenses in that case will be paid by me. I had read about the clauses clearly and giving my concern for the procedure mention about

आदि के बारे में डाक्टर द्वारा अवगत करा दिया गया है। मैं स्वत: अपनी इच्छानुसार अपनी होनी वाली थैरेपी के बारे में पूर्णत: ज्ञात होने के पश्चात इन्हें कराने के लिए तैयार हूँ। इसकी पूर्णत: ज़िम्मेदारी मेरी स्वयं की होगी। मुझे मुझ पर होने वाली प्रक्रिया (थैरेपी) के बारे में पूर्णत: बता दिया है। जिसमें आने वाले उपद्रवो के बारे में भी मुझे मेरी भाषा में बता दिया गया है। यदि किसी भी थैरेपी के दौरान आई आपातकालीन स्थिति में मुझे किसी दूसरे बड़े अस्पताल में जाना पड़ता है तो इसका पूर्ण खर्चा मुझे स्वयं वहन करना होगा। मैं अस्पताल के सारे नियम व कानून पढ़ चुका/चुकी हूं एवं मुझे बता दिया गया है और मैं अपनी स्वीकृति दे रहा/रही हूं।

DR. AKANKSHA SONI B.A.M.S., REG. NO. 6145 VRINDAVAN AYURVEDA CHIKITSALAYAM

Doctor's Signature (डाक्टर के हस्ताक्षर) DR. AKANKSHA - Patient's Signature (रोगी के हस्ताक्षर) Zeenat Bindra.

ZB.

Prakurti Chart Form

UHID 709 IPD 709 BED NO. Rilla DATE 02/04/2022

Kindly add mental, behavioral, emotional and physical profile subtotals to attain the final total. The dash with the highest total is your mind body type.

	VATA	PITTA	KAPHA
MENTAL PROFILE			
Mental activity ☑	Quick mind restless	☐ Sharp intellect aggressive	☐ Claim stead stable
Memory ☐	Short-term best	☑ Good general memory	☐ Long –term best
Thoughts ☐	Constantly charging	☐ Fairly steady	☐ Steady stable fixed
Concentration	Short-learn focus best	☐ Better than average mental concentration	☐ Good ability for long term focus
Ability to learn ☑	Quick grasp of learning	☐ Medium to moderate grasp	☐ Slow to learn
Dreams ☐	Fearful flying running jumping	☐ Angry , fiery ,violent adventurous	☐ Includes water clouds relationship , romance
Sleep ☐	Interrupted light	☐ Sound ,medium	☐ Sound ,heavy long
Speech ☐	Fast sometimes missing words	☐ Fast sharp clear cut	☑ Sound ,clear ,sweet
Voice ☐	High pitch	☐ Medium pitch	☐ Low pitch
Mental profile			
Eating speed ☐	Quick	☐ Medium	☐ Show
Hunger level ☐	irregular	☐ Sharp need food when hungry	☐ Can easily miss meals
Food and drink ☐	Prefers warm	☐ Prefers cold	☐ Prefers dry and warm
Achieving goal ☐	Easily distracted	☐ Focused of driven	☐ Slow and steady
Giving/donation ☑	Gives small amounts	☐ Gives nothing or large amount infrequently	☐ Gives regularly and generously
Relationships ☐	Many casual	☐ Intense	☐ Long and deep
Sex drive ☐	Variable or law	☐ Moderate	☐ Strong
Works best ☐	White supervised	☐ Alone	☐ In groups
Weather preference ☐	Aversion to cold	☐ Aversion to heat	☐ Aversion to damps cool
Reaction to stress ☐	Excites quickly	☐ Medium	☐ Slow to get excited
Finances ☐	Doesn't save spends quickly	☐ (Save but big heat)	☐ Save regularly accumulates wealth
Friendship ☐	Tends towards short term friendship makes friends	☐ Tends to be a longer friends related to occupation	☐ Tends to form long lasting

Vata type	Dry to rough skin ,insomnia , constipation ,fatigue , headaches , intolerance of cold underweight or losing weight anxiety ,worry ,and restlessness , attention deficit with hyperactivity disorder .
Pitta type	Rashes inflammatory, skin condition, stomach ache, diarrhea, controlling and manipulative behavior, visual problems, excessive body heat, hostility irritability and excessive competitive drive.
Kapha type	Oily skin shows digestion, digestion, sinus congestion, nasal allergies, asthma, and obesity. Skin growths, possessiveness, neediness, apathy, depression, difficulty, paying attention.

INSTRUCTIONS FOR PANCHKARMA TREATMENTS

1.Warm and hot water for drinking.
2.Hot water for bathing.
3.Avoid day sleep.
4.Avoid awakening in night.
5.Pass natural urges (urine & stools) before Panchkarma treatments.
6.Don't suppress natural urges.
7.Don't do excessive workout exercise
8.Don't expose to clod air of hot sun.
9.Avoid stress and strain during treatment.
10.Don't travel on vehicles immediately after treatment.
11.Immediately after traveling or exercise should be not taking and panchkarma treatment.
12.Avoid coitus during treatment period.
13.Take proper rest during and after treatment.
14. During treatment patient should be kept on light and hot diet.

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771.
OP/IP/Emergency	O.P.
Admitted Location	R1110.
Date & Time	02/04/2022 @ 6:06Am.

VAC /F-4/10-21

Patient Initial Assessment Sheet

Chief complaints

c/o Thyroid since 10-12 years
Thyroxine 100mg once daily.
Indigestion since 2 years back.
Stress since 1 years back.
Stiffness of body.

History of present illness

firstly Thyroid since 10-12 years then after stress & than after indigestion & then Hair fall & the stiffness of Body.

Vital signs

Wt → 78.6 Kg.
B.P → 130/90 mm Hg.
Pulse → 80/min.
R.R → 16/min.

System Examination details	S. L. R. DONE. (-ve).

Pain Score	No.
Nutritional risk	No.
Is patient vulnerable? If yes mention type	No.
Previous Medications	

Name of the drug	Dose	Route /Site	Frequency /Time
Thyroxine	100mg.	ORAL	ONCE DAILY

Any allergies: No any food & Drug Allergy.

Provisional Diagnosis	THYROID.
Vaidya Name & Signature: Date & Time:	DR. AKANKSHA & Akanksha. 02/04/2022 & 6:07 AM

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

Patient Name	Leenat Bindra.
Treating Vaidya Name	Dr. Akanksha.
Unique Identification Number	771.
OP/IP/Emergency	O.P.
Admitted Location	R1110.
Date & Time	02/04/2022. @ 6:08 Am

VAC /F-5/10-21

Plan of Care

Problem	Planned intervention /treatment	Nature of care (Preventive/Curative /Investigative /Rehabilitative)	Desired Result
Thyroid.	Kalari Uzhichil	Curative	Stiffness reduced.
Indigestion	Netra Dhara.	"	Focom range
Stress	Shirodhara	"	10 to 9.
Stiffness.		"	Hair fall
			reduced.

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

Vaidya Name & Signature : Dr. Akanksha

Consultant Name & Signature : Dr Akanksha

Date & Time : 02/04/2022 @ 6:10 Am.

VRINDAVAN AYURVEDA CHIKITSALAYAM

(Unit of R.P Garg and Associates)

Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205

VITAL CHART

PATIENT NAME : ZEENAT BINDRA GENDER : Female DOA : 02/04/2022 UHID NO. : 771

DATE	TIME	WEIGHT	TEMPERATURE	BLOOD PRESSURE	PULSE	RESPIRATION RATE	PAIN	SIGN
02/04/2022	8:00A	78.6kg	98.6°f	120/80mmHg	76/min.	13/min.	No	Sudha
02/04/2022	6:00A	"	98.4°f	125/85mmHg	78/min	16/min.	"	Rujuta
03/04/2022	8:05A	"	98.3°f.	120/80mmHg	80/min.	18/min	"	Nithya
03/04/2022	6:05A	"	98.6°f.	120/80mmHg	75/min	18/min	"	Pooja
04/04/2022	8:10Am	"	98.5°f	130/90mmHg	78/min	16/min.	"	Nithya
04/04/2022	6:10P.	"	98.4°f	125/85mmHg	80/min	13/min	"	Pooja
05/04/2022	8:10A	"	98.5°f	130/90mmHg	75/min	16/min.	"	Shuthi
05/04/2022	6:05P.	78.5kg	98.4°f	125/85mmHg	80/min	18/min.	"	Nithya
06/04/2022	7:10A	"	98.5°f	130/90mmHg	78/min.	13/min.	"	Pooja
06/04/2022	5:40P.	"	98.6°f.	125/85mmHg	80/min	16/min.	"	Nithya
07/04/2022	7:05Am	"	98.3°f.	120/80mmHg	76/min.	18/min.	"	Pooja
07/04/2022	5:10P.	"	98.4°f.	120/90mmHg	75/min	16/min.	"	Rimpy
08/04/2022	8:00A.	"	98.5°f.	125/85mmHg	78/min	15/min.	"	Rimpy
08/04/2022.	6:00P.	76.0kg	98.3°f.	120/80mmHg	80/min	18/min	"	Pooja

DR. AKANKSHA SONI
M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYA

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA
Unique Identification Number	Y.Y.L.
OP/IP/Emergency	I.P.
Admitted Location	R.L.L.p.
Date & Time	02/04/2022 @ 6:12 Am.

VAC /F-7/10-21

Diet Chart

Patient Name: ZEENAT BINDRA Age/Gender: 46/F.

Diagnosis: THYROID & STRESS.

Height: 165 c.m. Weight:

Meal Type	Meal Items
Breakfast:	POHA / UPMA / CHUTNEY.
Lunch:	ONE CHAPPATI / MIX VEGETABLE
Dinner:	KITCHDI / DALIA
Items to Avoid:	All KIND OF BAKERY ITEM To Avoid.
Items to Include:	JEERA + AJWAYAN + ELA + KADI PATA 3L BOILED WATER D

Date, Time & Signature of Vaidya: 02/04/2022 @ 6:14Am @

DR. AKANKSHA SOM
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

DAILY DIET CHART

02/04	03/04	04/04	05/04	06/04	07/04	08/04	09/04		
✓	✓	✓	✓	✓	✓	✓	✓		

Vrindavan Ayurveda Chikitsalayam
(unit of R.P Garg and Associates)
Vrindavan Estate, Village Thana, EPIP-2, Baddi, Himachal Pradesh Ph : (01795 667166) +91 7901778899

VRINDAVAN AYURVEDA CHIKITSALAYAM
(Unit of R.P Garg and Associates)
Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205
No.01795667166 /9418514681/9497672347

UHID: 771. OPD: 771. Room No. R1 110 ...PH

PROGRESS NOTES

DATE: 2/04/2022.
TIME: 7:00 Am.
B.P.: 120/80 mmHg.
Pulse: 78/min.
Temp.: 98.5°F.
Pain: No.

* Thyroid since 10-12 Years back.
Indigestion since 2 Years back.
Stress since 1 Years back.
STIFNESS of the Body.

Adv- 8:00 to 10.30 Am.
1) KALARI UZHICHIL ē DHANWANTHARAM + SAHACHARADI + KARPOORADI THAILAM X45 Min.
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X15 Min.
3) SHIRODHARA ē KSHEERBALA THAILAM X45 Min.

Rx →
1) SUKUMARAM KASHAYAM 15ML TWICE DAILY.
2) VARUNADI KASHAYAM TAB. 2 TAB. 2) ē KASHAYAM TWICE DAILY.
3) THYROCALM TAB 2TAB TWICE DAILY.
4) MENOREX TAB 2TAB TWICE DAILY.
5) SARASWATA ARISHTAM 25ML TWICE DAILY.

DATE: 02/04/2022.
TIME: 5:30 P.m.
B.P.: 130/90 mmHg.
Pulse: 80/min.
Temp.: 98.4°F.
Pain: No.

* Relief after Panchkarma Therapy.
* Stiffness of the Body will be reduced.

Adv: 8:00 to 10:30 Am.
1) KALARI UZHICHIL ē DHANWANTHARAM + SAHACHARADI + KARPOORADI THAILAM X45 Min.
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X15 Min.
3) SHIRODHARA ē KSHEERBALA THAILAM X45 Min.

Akanksha.
DR. AKANKSHA.
02/04/2022
5:32 P.m

VRINDAVAN AYURVEDA CHIKITSALAYAM
(Unit of R.P Garg and Associates)
Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205

UHID: 771 OPD: 771 Room No. R.L.I.D.

PH No.01795667166 /9418514681/9497672347

PROGRESS NOTES

DATE: 03/04/2022.
TIME: 7.05 Am.
B.P.: 130/90 mm Hg.
Pulse: 78/min.
Temp.: 98.5°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the Body will be reduced.

Adv →
1) KALARI UZHICHIL ē DH + SAHA + KARPOORADI THAILAM. X 45 Min.
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM. X 45 Min
3) SHIRODHARA ē KSHEERABALA THAILAM. X45 Min.

Dr. Akanksha.
03/04/2022
7:07 Am.

DATE: 03/04/2022
TIME: 6:05 P.m.
B.P.: 120/80 mm Hg.
Pulse: 76/min.
Temp.: 98.4°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the Body will be reduced.

Adv →
1) KALARI UZHICHIL ē DH + SAHA + KARPOORADI THAILAM X 45 Min
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X 45 min.
3) SHIRODHARA ē KSHEERBALA THAILAM X 45 Min.

Dr. Akanksha.
03/04/2022
6:07 P.m

VRINDAVAN AYURVEDA CHIKITSALAYAM
(Unit of R.P Garg and Associates)
Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205

UHID: 771 OPD: 771 Room No. R1 110 /...PH

No.01795667166 /9418514681/9497672347

PROGRESS NOTES

DATE: 04/04/2022.
TIME: 8:05 Am.
B.P.: 125/85 mmHg.
Pulse: 80/min.
Temp.: 98.4°f.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the body will be reduced from orange 10 to 8.

Adv →
1) KALARI UZHICHIL ē D.H. + SAHA + KARPOORADI THAILAM X 45 Min.
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X15 Min.
3) SHIRODHARA ē KSHEERBALA THAILAM X 45 Min.

Akanksha.
DR. AKANKSHA.
04/04/2022
8:07Am.

DATE: 04/04/2022.
TIME: 6:05P.m.
B.P.: 120/80 mmHg.
Pulse: 78/min.
Temp.: 98.5°f.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the body will be reduced from orange to 10 to 7.

Adv →
1) KALARI UZHICHIL ē D. H. + SAHA + KARPOORADI THAILAM X 45 Min.
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X 15 Min.
3) SHIRODHARA ē KSHEERBALA THAILAM X 45 Min.

Akanksha.
DR. AKANKSHA.
04/04/2022
6:07P.m

VRINDAVAN AYURVEDA CHIKITSALAYAM

(Unit of R.P Garg and Associates)

Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205

UHID: 771 OPD: 771 Room No. R.1.10 PH

No.01795667166 /9418514681/9497672347

PROGRESS NOTES

DATE: 05/04/2022
TIME: 7:40 Am.
B.P.: 130/90 mm Hg.
Pulse: 78/min.
Temp.: 98.5°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the body will be reduced range 1 to 6.

Appelite → Good.
Bowel → Normal.
Sleep → Good.

Adv. → 1) KALARI UZHICHIL ē DHANWANTHARAM + SAHACHACHARADI + KARPOORADI THAILAM
2) NETRA DHARA ē BRUHATH X45 MIN.
3) SIRODHARA ē TRIPHALA CHOORNAM X15 MIN, KSHEERBALA THAILAM X45 MIN.

Dr. Akanksha. 05/04/2022 7:42 Am.

DATE: 05/04/2022
TIME: 5:55 P.m.
B.P.: 125/85 mm Hg.
Pulse: 80/min.
Temp.: 98.4°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the body will be reduced range 1 to 5.

Appelite → Good.
Bowel → Normal.
Sleep → Good.

Adv → 1) KALARI UZHICHIL ē DH + SAHA + KARPOORADI THAILAM X45 Min.
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X15
3) SIRODHARA ē KSHEERBALA THAILAM X45 Min.

Dr. Akanksha. 05/04/2022 5:57 P.m.

VRINDAVAN AYURVEDA CHIKITSALAYAM
(Unit of R.P Garg and Associates)
Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205
No.01795667166 /9418514681/9497672347

UHID: 771 OPD: 771 Room No. Rd. 1 La. PH

PROGRESS NOTES

DATE: 06/04/2022.
TIME: 7:45 Am.
B.P.: 125/85 mmHg.
Pulse: 78/min.
Temp.: 98.4°f.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness of the body will be reduced range 1 to 5.
* Abbetite → Good.
Bowel → Semi constipated.
Sleep → Good.

Adv. → 1) KALARI UZHICHIL ē DHANWANTHARAM + SAHACHARADI + KARPOORADI THAILAM X45 Min
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM. X15 Min.
3) SIRODHARA ē KSHEERBALA THAILAM X45 Min.

Dr. Akanksha. 06/04/2022 7:47Am

DATE: 06/04/2022
TIME: 6:00P.m.
B.P.: 130/90 mmHg.
Pulse: 80/min.
Temp.: 98.5°f.
Pain: No.

* Relief After Panchkarma Therapy.
Abbetite → Good.
Bowel → Semi Constipated.
Sleep → Good.

Dr. Akanksha. 06/04/2022 6:05Pm

Adv → 1) KALARI UZHICHIL ē DHANWANTHARAM + SAHACHARADI + KARPOORADI THAILAM. X45
2) NETRA DHARA ē B. T. CHOORNAM X15 Min
3) SIRODHARA ē KSHEERBALA THAILAM.

VRINDAVAN AYURVEDA CHIKITSALAYAM

(Unit of R.P Garg and Associates)

Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205

UHID: 771 OPD: 771 Room No. R111D PH

No.01795667166 /9418514681/9497672347

PROGRESS NOTES

DATE: 07/04/2022
TIME: 7:40 Am.
B.P.: 125/85mmHg.
Pulse: 80/min.
Temp.: 98.4°f.
Pain: No

* Relief After Panchkarma Therapy.
* Stiffness reduced from orange 10 to 6.

Appetite → Good.
Bowel → Normal.
Sleep → Good.

Adv → 1) KALARI UZHICHIL ē DHANWANTHARAM THAILAM + SAHACHARADI + KARPOORADI THAILAM
2) NETRA DHARA ē BRUHATH TRIPHALA CHOORNAM X15 Min.
3) SIRODHARA ē KSHEERBALA THAILAM X45 min.

Dr. Akanksha. 07/04/2022 7:42Am.

DATE: 07/04/2022
TIME: 6:05 Pm.
B.P.: 130/90mmHg.
Pulse: 78/min.
Temp.: 98.5°f.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness reduced from orange 10 to 6.

Appetite → Good.
Bowel → Normal.
Sleep → Good.
Adv → C.S.T.

DR. AKANKSHA. 07/04/2022. 6:07P.m.

VRINDAVAN AYURVEDA CHIKITSALAYAM
(Unit of R.P Garg and Associates)
Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205
No.01795667166 /9418514681/9497672347

UHID: 771 OPD: 771 Room No. R111.0 PH

PROGRESS NOTES

DATE: 08/04/2022.
TIME: 9:00 Am.
B.P.: 125/85 mmHg.
Pulse: 80/min.
Temp.: 98.5°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness reduced from orange 10 to 6.

Appetite → Good
Bowel → Normal.
Sleep → Good.

Adv →
1) KALARI UZHICHIL ĉ DHANWANTHARAM + SAHACHARA + KARPOORADI THAILAM X45
2) NETRA DHARA ĉ BRUHATH TRIPHALA CHOORNAM X15 Min
3) SHIRODHARA ĉ KSHEERBA THAILAM X45 Min

Akanksha
DR. AKANKSHA. 08/04/2022 9:02Am

DATE: 08/04/2022.
TIME: 6:00 P.m.
B.P.: 130/90 mm Hg.
Pulse: 78/min.
Temp.: 98.4°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness reduced from orange 10 to 5.

Appetite → Good.
Bowel → Normal.
Sleep → Good.

Akanksha
DR. AKANKSHA. 08/04/2022 6:05 P.m
Patient condition is better Plan for Tomorrow Discharge. Adv. → C.S.T.

VRINDAVAN AYURVEDA CHIKITSALAYAM
(Unit of R.P Garg and Associates)
Shivalik Foothills, Village Thana, EPIP-2, Baddi, Himachal Pradesh – 173205

UHID: 771 OPD: 771 Room No. R1110 PH

No.01795667166 /9418514681/9497672347

PROGRESS NOTES

DATE: 09/04/2022.
TIME: 8:00 Am.
B.P.: 120/80mmHg
Pulse: 78/min.
Temp.: 98.5°F.
Pain: No.

* Relief After Panchkarma Therapy.
* Stiffness reduced from orange to 1of5.

Abbetite → Good.
Bowel → Normal
Sleep → Good.

* Patient Condition is better for Discharge.

Akanksha.
AKANKSHA.
09/04/2022.
8:02 Am.
DR.

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

DATE:
TIME:
B.P.:
Pulse:
Temp.:
Pain:

Patient Name	YEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	NA.
OP/IP	O.P.
Admitted Location	R1 to 10
Date & Time	02/04/2022 @ 6:10 Am.

VAC /F-8/10-21

Reassessment Notes

Each time notes should dated, signed and named by Vaidya

Date & Time	Patient Response to the treatment /intervention	Desired Results Met/Not	Further Care Plan	Dr's Sign
02/04/2022 @ 5:30 P.m	Stiffness reduced from range 1 to 9.	Met.	Treatment continued as per care plan.	Dr. Akanksha
03/04/2022 @ 5:00 P.m.	Stress reduced.	Met.	Treatment continued as per care plan.	Dr. Akanksha
04/04/2022 @ 4:00 P.m.	Stiffness reduced from range 1 to 8.	Met.	Treatment continued as per care plan.	Dr. Akanksha
05/04/2022 @ 3:00 P.m	Stress reduced.	Met.	Treatment continued as per care plan.	Dr. Akanksha
06/04/2022 @ 3:30 P.m	Stiffness reduced from range 1 to 6.	Met.	Treatment continued as per care plan.	Dr. Akanksha
07/04/2022 @ 3:00 P.m.	Feeling better.	Met	Treatment continued as per care plan	Dr. Akanksha
08/04/2022 @ 3:10 P.m	Feeling better. Stiffness reduced from range 1 to 5.	Met.	Treatment continued as per care plan.	Dr. Akanksha
09/04/2022 @ 10:00 Am		Met.	Treatment continued as per care plan.	Dr. Akanksha

DR. AKANKSHA SHARMA
B.A.M.S., REGD. NO. 61452
VRINDAVAN AYURVEDA CHIKITSALAYAM

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771.
OP/IP	I.P.
Admitted Location	R110.
Date & Time	02/04/2022. @ 6:12 Am.

VAC /F-9/10-21

Informed Patient Consent for Therapy or Procedure

I ZEENAT BINDRA UHID 771. Age 46 years Husband/Wife/father Name KASMIRILAL BINDRA hereby declare that the Vaidya DR. AKANKSHA has explained the surgery KALARI UZHICHIL, SIRODHARA possible complications, known benefits, expected results and consequences if not treated.

1. Procedure details (nature of the procedure):
   1) KALARI UZHICHIL ~ DH + SAHA + KARPOORADI THIK
   2) SHIRODHARI ~ KSHEERBALA THAILAM.
   3) NETRA DHARA ~ BRUHATH TRIPHALA CHOORNAM.
2. Necessity: To reduce the Stiffness.
3. Expected Results: Stiffness will reduced.
4. Possible complications: —
5. Alternatives: Allopethic Treatment.
6. Consequences if not treated: Stiffness can increase.
7. Right to refuse therapy /procedure: Explained to the Patient.

Witness name & Signature:	Patient name & Signature: Zeenat Bindra.

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771.
OP/IP	I.P.
Admitted Location	RL 110.
Date & Time	08/04/2022. @ 6:13 Am.

Declaration: I declare that I have informed patient of the procedure noted the above including known benefits and possible complications.

DR. AKANKSHA MD (AM) M.S REG. NO. 6145 VRINDAVAN AYURVEDA CHIKITSALAYAM

Date & Time: 02/04/2022 @ 6:14 PM	Vaidya Name & Signature

No.

Consent for Patient Representative/Surrogate

The patient is unable to give consent because .....

.....

.....

And I, ... (name/relationship to the patient), therefore, consent for the patient. I acknowledge that I have had an opportunity to discuss the procedure ,as stated above, with the doctor or doctor's designee and hereby consent to this procedure.

	Name	Signature	Date	Time
Doctor				
Patient representative with relationship				
Witness				

TREATING VAIDYA NAME - DR. AKANKSHA.

PANCHKARMA TREATMENT PLAN	
POORVA KARMA	
TREATMENT DAYS	1) KALARI UZHICHIL & DHANWANTHARAM + SAHACHARADI + KARPOORADI THAILAM.
RISK BENEFITS	BENEFITS → Stiffness decrease, Blood circulation ↑es.
NEXT FOLLOW UP ADVICE	RISK → Stiffness may be Increase.
NEXT FOLLOW UP DATE	Admission advised.
PRADHA KARMA	
TREATMENT DAYS	2) SIRODHARA & KSHEERBALA THAILAM.
RISK BENEFITS	BENEFIT → Relieving the associated stress anxiety & depression immediately decrease.
NEXT FOLLOW UP ADVICE	RISK → No Risk found in Sirodhara.
NEXT FOLLOW UP DATE	BRUHATHA TRIPHALA CHOORNAM & NETRA DHARA. BENEFIT → Improving the Strength of eyes.
PASCHAT KARMA	
TREATMENT DAYS	Diet → Liquid → Soup, Juices Semi Solid → Kitchdi, Dalia
RISK BENEFITS	Rx → 1) SUKUMARAM KASHAYAM 15ML + 60ML WATER. 6 AM & 6 PM Before food. 2) VARUNADI KASHAYAM TAB 2 TAB. with Kashayam 6 AM & 6 PM Before food. 3) THYROCALM TAB. 2 TAB 8 AM & 8 PM & Normal water After food. 4) MENOREX 2 TAB 8 AM & 8 P.M & Normal water After food. 5) SARASWAHA ARISHTHAM 25ML 8:30 AM & 9:00 AM Normal water After food.

Akanksha
Reg. No: 6145.
02/04/2022.

Vrindavan Ayurveda Chikitsalayam
(unit of R.P Garg and Associates)

Leenat Bindra.

Vrindavan Estate, Village Thana, EPIP-2, Baddi, Himachal Pradesh Ph : (01795 667166) +91 7901778899

Patient Name	ZEENAT BINDRA.
Treating Valdya Name	DR. AKANKSHA.
Unique Identification Number	741.
OP/IP	O.P.
Admitted Location	R1 110.
Date & Time	02/04/2022. @ 6:15 Am.

VAC/F-10/10-21

Pre-Procedure Instructions

Date & Time	Instructions	Valdya Sign & Full Name
02/04/2022 @ 6:16Am	Stop eating for a certain period of time of treatment. (Before 3 hour of treatment overboard No intake of food)	DR. AKANKSHA SONI B.A.M.S., R2GD/AD. 6145 VRINDAVAN AYURVEDA CHIKITSALAYA DR. AKANKSHA @ Akanksha.

Pre procedure check list

Name of the patient: ZEENAT BINDRA. Age: 48 Sex: M / F

UHID: 741. Diagnosis: THYROID & STRESS.

Planned procedure/intervention: KALARI UZHICHIL, NETRA DHARA, SHIRODHARA.

Site Confirmed	: Yes/ No/NA
Informed consent	: Yes/ No/NA
Site preparation	: Yes/ No/NA
Required PPE	: Yes/ No/NA
Required materials availability	: Yes/ No/NA
Staff Sign & Full Name :	DR. AKANKSHA @ Akanksha.
Date &Time :	02/04/2022. @ 6:17 Am.

Patient Name	ZEENAT BENDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	Y11.
OP/IP	O.P.
Admitted Location	RLHo.
Date & Time	02/04/2022 @ 6:18 Am.

VAC /F-11/10-21

Procedure/Treatment Notes : 1) KALARI UZHICHIL ē DH
+ SAHA + KARPURADI THAILAM.

2) NETRA TRAPNA ē B. T. CHOORNAM.

3) SIRODHARA ē KSHEERBALA THAILAM

Post Procedure/Treatment Instructions :

COMPLETE BED Rest.

Staff Sign & Full Name: DR. AKANKSHA SONI B.A.M.S., REGD. NO. 6145 VRINDAVAN AYURVEDA CHIKITSALAYAM
DR. AKANKSHA @ Akanksha

Date & Time : 02/04/2022 @ 6:19 Am.

Shruthy
Nitya.
Pooja.
Rimpy

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771.
OP/IP	I.P.
Admitted Location	R 110.
Date & Time	02/04/2022. @ 6:20 Am.

VAC /F-12/10-21

Drug Chart (please write legibly)

Drug Allergy: No.

Date 02/04/2022.

To be filled by administered staff

To be filled by Doctor

Date	Name of the Drug	Dose	Route/Site	Freq	Dr's Sign & Reg. No	(Time given & name)			
						Time	Time	Time	Time
						Name & Sign	Name & Sign	Name & Sign	Name & Sign
02/04	SUKUMARAM KASHAYAM	15ML	ORAL	TWICE DAILY	6145.	6 Am. Nitya		6 P.m. Pooja	
02/04	VARUNADI KSH TAB	2 TAB	ORAL	TWICE DAILY	6145.	6 Am. Rimpy		6 P.m. Pooja	
02/04.	TRIVROCALM TAB.	2 TAB	ORAL	TWICE DAILY	6145.		8 A.m Nitya		8 P.m Shruthi
02/04	SARSWATHA ARISHAM	25ML	ORAL	TWICE DAILY	6145.		8 Am Rimpy		8 P.m. Pooja
02/04	MENOREX	2TAB	ORAL	TWICE DAILY	6145.		8 Am. Nitya		8 P.m. Shruthi

Daily attendant chart

02/04	03/04	04/04	05/04	06/04	07/04	08/04	09/04	9	10
✓	✓	✓	✓	✓	✓	✓	✓		

Patient Name	ZEENAT BINDRA.
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771.
OP/IP	O.P.
Admitted Location	RLLO.
Date & Time	02/04/2022 @ 6:21 Am.

VAC /F-13/10-21

Patients and / or family members education form

Patient treatment, his/her special clinical needs to be identified and education should be provided

Safe and effective Use of Medication

Potential side effects of medication

Food - medicine Interaction

Education on Pathyahara and Poshana

Disease process, Complications and Preventive strategies

Preventing infections

Date & Time	Details of Education Provided	Staff Sign & Full Name	Patient /Relative Sign and Name
02/04/2022. @ 7:00 Am.	Be on light diet at the time of treatment.	Akanksha. DR. AKANKSHA	Zeenat Bindra.
03/04/2022 @ 7:05 Am	Avoid oily food.	Akanksha. DR. AKANKSHA.	Zeenat Bindra.
04/04/2022 @ 7:10 Am.	Avoid stress & strain during treatment.	Akanksha. DR. AKANKSHA.	Zeenat Bindra
05/04/2022 @ 7:40 Am.	Take more drinking water.	Akanksha. DR. AKANKSHA.	Zeenat Bindra.
06/04/2022 @ 7:45 Am	Avoid milk product	Akanksha. DR. AKANKSHA	Zeenat Bindra

Date & Time	Detail of Education Provided	Staff sign & Full Name	Patient / Relative Sign & Name.
07/04/2022 & 7:50 Am.	Avoid all kind of Bakery item.	Akanksha. DR. AKANKSHA.	Leeneel Sindhi.
08/04/2022 & 7:40 Am.	Be on slight diet at the time of treatment	Akanksha. DR. AKANKSHA.	Leeneel Sindhi
09/04/2022 & 7:30 Am.	Take more drinking water.	Akanksha. DR. AKANKSHA.	Leeneel Sindhi.

DR. AKANKSHA SONI
B.A.M.S., REG. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

Patient Name	ZEENAT BINDRA
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771
OP/IP	I. P.
Admitted Location	R1 110.
Date & Time	02/04/2022 @ 7:00 Am.

VAC /F-14/10-21

DISCHARGE SUMMARY (NORMAL/LAMA/DAMA)

Patient Name : ZEENAT BINDRA	Age & Sex : 46 YF.	MRN : 771.
Doctor: DR. AKANKSHA.	Admitted Area : WARD.	Date : 09/04/2022
Weight :	Allergies :	Diagnosis : THYROID & STRESS

Reason for Admission: c/o Thyroid since 10 - 12 Years.
Indigestion since 2 Years back.
Stress since 1 Years back.
Stiffness of body.

Significant Findings:

Diagnosis: THYROID & STRESS.

Procedures Performed:
1) KALARI UZHICHIL X 8 days.
2) SHIRODHARA X 8 days.
3) NETRA DHARA X 8 days.

Investigations: No.

Patient Name	ZEENAT BINDRA
Treating Vaidya Name	DR. AKANKSHA.
Unique Identification Number	771.
OP/IP	I.P.
Admitted Location	R1 110.
Date & Time	09/04/2022 @ 10:00 Am.

Medications Given During Course of Hospitalization

1) SUKUMARAM KASHAYAM 15ML + 60ML WATER 6Am & 6Pm. Before food
2) VARANADI KASHAYAM TAB 2 TAB ē KASHAYAM 6Am & 6P.m Before food
3) THYROCALM TAB 2 TAB 8Am & 8Pm After food ē Normal Water.
4) MENOREX TAB 2 TAB 8Am & 8P.m After food ē Normal Water.
5) SARASWATA ARISHTAM 25ML 8Am & 8P.m After food.

Condition at the Time of Discharge:

* Patient is perfectly fine & valso experienced to reduced Stress.

Discharge Medications:

1) SUKUMARAM KASHAYAM 15ML +60ML Lukewarm WATER 6Am & 6P.m. Before food.
2) VARANADI KASHAYAM TAB 2 TAB mixed ē KASHAYAM 6Am & 6P.m. Before food.
3) THYROCALM TAB 2 TAB ē. NORMAL WATER 8Am & 8P.m After food.
4) SARASWATA ARISHTAM 25ML ē NORMAL WATER 8Am & 8P.m. Afterfood

Follow up Care:

1) Avoid Milk, Milk Product & all other Bakery item.
2) Take more drinking water.
3) Avoid junk food.

Vrindavan Ayurveda Chikitsalayam

Vrindavan Estate, Village Thana, EPIP-2, Baddi, Himachal Pradesh Ph : (01795 667166) +91 7901778899

Patient Name	ZEENAT BINDRA
Treating Vaidya Name	DR. AKANKSHA
Unique Identification Number	711.
OP/IP	I.P.
Admitted Location	R11/0.
Date & Time	09/04/2022 @ 10:10 Am.

Consequences of (NORMAL/LAMA/DAMA)

1	
2	
3	NIL.
4	
5	

Call 01795667166. in case of emergency. Get advice if any signs Stiffness all over the body. or symptoms Stress. arises.

Issued By
Doctor Name & Signature: DR. AKANKSHA @ DR. AKANKSHA SONI B.A.M.S. REGD. NO. 6145 VRINDAVAN AYURVEDA CHIKITSALAYAM

Date & Time: 09/04/2022 @ 10:30 Am.

Discharge Summary received by
Patient/Relative Name & Signature: Zeerat Bindra

TREATMENT PROGRAMME.

NAME : Mrs. Zeenat Bindra **Age-48**
SEX : Female
Room No -110
Treatment Suggested: for 8 days .

Date:	Treatments:	Time:	Remarks:
02/04	Uzhichil + Netra Dhara + Shirodhara	8 am	Procedure Done
	Shruthy, Nithya, Pooja, Rimpy.		
03/04	Uzhichil + Netra Dhara + Shirodhara	8 am	〃
	Shruthy, Nithya, Pooja, Rimpy.		
04/04	Uzhichil + Netra Dhara + Shirodhara	8 am	〃
	Shruthy, Nithya, Pooja, Rimpy.		
05/04	Uzhichil + Netra Dhara + Shirodhara	8 am	〃
	Shruthy, Nithya, Pooja, Rimpy.		
06/04	Uzhichil + Netra Dhara + Shirodhara	8 am	〃
	Shruthy, Nithya, Pooja, Rimpy.		
07/04	Uzhichil + Netra Dhara + Shirodhara	8 am	〃
	Shruthy, Nithya, Pooja, Rimpy.		
08/04	Uzhichil + Netra Dhara + Shirodhara	8 am	〃
	Shruthy, Nithya, Pooja, Rimpy.		
09/04	~~Purgation~~ Uzhichil + Netra Dhara + Shirodhara	8 am.	〃

Dr . Akanksha **Messeurs- Shruthi, Nithya, Rimpi, Pooja**

Oil For Uzhichil – Dhanwantram + Sahacharadi + Karpooradi Thailam
Netra Dhara – Bruhath Triphala Choornam
Shirodhara – Ksheerbala Thailam

Internal Medicine

1. **Sukumaram Kashayam-15ml+60ml water -6am & 6pm**
2. **Varanadi Kashayam Tab- 2tab with Kashayam -6am & 6pm**
3. **Thyrocalm Tab-2tab after food**
4. **Menorex tab-2tab after food**
5. **Saraswata Arishtam-25ml after food**

Vrindavan Ayurveda Chikitsalayam

Ref. No. 771

Any Drug Allergies No.

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM

Dr. AKANKSHA Prescription for ZEENAT BINDRA Age 48 Y/F Date 02/04/2022.

RF. No.	Name of the Medicine	Dose	Route	Early Morning 6 am	Before Breakfast	After Breakfast	Before Lunch	After Lunch	Evening 6 P.M.	Before Dinner	Aft Dinr
1)	SUKUMARAM KASHAYAM	15ML +	60 ML ORAL	LUKEWARM WATER. ✓					✓		
2)	VARADYADI KASHAYAM TAB	2 TAB	Mixed in ORAL	KASHAYAM. ✓					✓		
3)	THYROCALM TAB	2 TAB.	in ORAL	NORMAL WATER.		✓					✓
4)	SARASWATHA ARISTHAM	25ML	in ORAL	50 ML NORMAL WATER.		✓					✓
5)	TAB. MENOREX	2 TAB.	in ORAL	NORMAL WATER.		✓					✓
				X 15 days.							

DR. AKANKSHA SONI
B.A.M.S., REGD. NO. 6145
VRINDAVAN AYURVEDA CHIKITSALAYAM
Dr. Akanksha.
DR. AKANKSHA.
02/04/2022
8:00Am

Please bring this while coming next time. Check medicines before leaving. Keep Original Bill with you.

Shivalik Foothills, EPIP-II, Vill. Thana, Baddi (Himachal Pradesh) Phone: +91 7901778899, (01795) 667166, Email: