

SHRI VATS AYURVEDIC CHIKITSALAYA

640/C, Chirag Delhi, New Delhi-110017



Service Name :	Sop Of Nursing
Date Created :	01/Oct/2021
Approved By :	Dr Pushkar Sharma
Reviewed By :	Dr Paridhi Sharma

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640/C, Chirag Delhi
New Delhi-110017

A handwritten signature in blue ink, appearing to read 'Dr. Pushkar Sharma'.

SOP OF NURSING

● What is SOP of Nursing?

- ◆ Nursing is required to take care of the patient smoothly, which helps in the process of showing the patient to the doctor, sitting the patient up, giving medicines on time to the patient, taking care of the patient's food, etc. . Supports all teams of nursing clinics to function smoothly.

● What are the five stages of the patient's diagnosis?

● The five stages of prior observation of a patient are as follows: -

1. Prior observation of the patient's own disease is obtained.
2. A complete overview of earlier diseases of the family of the patient is made.
3. Complete information about the patient's current disease is given.
4. Complete behavioral observation of the patient's routine and diet chart.
5. To diagnose the treatment related complaint by the patient as soon as possible.

● How do you assess a patient?

1. Take complete information of the disease of the present patient from the patient, complete information should also be taken about the diet of daily's diet.
2. First of all, a pulse test is done to analyze the patient.
3. Thereafter the patient has a Prakritik Parikshan test.
4. It is advisable to improve the patient's diet.
5. The patient's daily routine is improved.
6. Improvement of the digestive system is advised.

● What are the Six stages of the nursing process?

The five stages of the nursing process are as follows: -

1. Complete knowledge of the patient's disease.
2. There should be complete knowledge of medicines related to the patient's disease.
3. The patient should have complete knowledge of his disease.
4. There should be complete information about treatment related to the disease of the patient.
5. There should be complete knowledge of patient care, food, daily routine of giving medicines, etc.
6. Vulnerable patient should always be given priority.



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● What are the qualities of a good nurse?

The qualities and qualifications of a good nurse are as follows: -

1. Team leadership and personality traits
2. There should be complete experience of cohesion in the clinics and patients.
3. Time should be punctual.
4. There should be critical thinking towards your institution.
5. There should always be willingness and readiness to learn new things.
6. Must be committed to serving the patient.
7. Should be friendly and easy going.
8. Must have the stamina to deal with any situation.
9. If any problem arises in the institute, you should have the skill to solve it.
10. Attention should always be given to the institution and patient information.
11. There should be a feeling of sympathy towards all.
12. Patients who are admitted in clinic should have rounds in their wards in due to time and all should be well taken care of the patient.
13. Nurse should be given to the proper diet and Proper care of patient .
14. Diet should be maintained properly in the food that is given to the patient .
15. Nurse should be taken food on time according to the of diet chart of the patient.
16. Children younger than 12 years, adult aged above 60 years, pregnant women, specialpeople, or else come in the count of Vulnerable patient, they should be specially taken care of them, their priority should be higher, their needs should be met first of all to their satisfaction.





SHRI VATS AYURVEDIC CHIKITSALYA

640/C, Chirag Delhi, New Delhi-110017

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SOP OF VYAPAD

VYAPAD: Due to faulty administration of Ayurvedic Treatment one may have to come across the complications. These mistakes may occur either by physicians or by patients.

If a patient gets any type of Vyapad due to any treatment during Ayurvedic treatment, then we will solve that problem in the following way.

Sneha

Mistakes of Physician :

1. By improper fixation of the dose of Sneha.
2. Inappropriate considerations of time factor.
3. Wrong selection of subject and Sneha.

Mistakes of Patients

If the subject fails to follow the postoperative regimen of Snehana therapy, viz. avoidance of cold water uses for all purposes, as recommended by physician, then certain complications occur.

Complications of oleation therapy are as follows-

- Indigestion
- Thirstiness
- Loss of consciousness

Due to administration of excess amount of Sneha or wrong food regimen after Snehana therapy indigestion occurs. This undigested Sneha further causes obstruction of vata and delays the digestion of Sneha.

In this condition emesis therapy should be administered with warm water.

If Sneha is administered to persons with aggravation of Vata and Pitta during the hot seasonal conditions, it leads to thirst, fainting etc. Ginger-coriander processed warm water should be given for the above said complications.


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ABHYANGA

- Oil massage is the best in both the conditions i.e. health and decease except few exceptions, which are as follow.
- Patients suffering by Kaphaja or Kapha predominant disease.
- Those who have been given emesis or purgation.
- Persons suffering from indigestion.
- Persons having intermediate matter.
- Acute fever.
- Those who have been given decoction enema.
- The diseases caused by over nutrition.

The oil massage if done in above conditions causes diminution of digestive fire and increases the condition. For the head, cold or lukewarm oil should be used, because head is the place of all senses and it is considered as the most vital part, hence it should be protected from heat.

Procedure of Massage Pre operative procedure

Oil massage should be done with warm medicated oil or ghee, prepared with anti humor and aromatic drugs suitable to the season, region, constitution, disease, humor etc.

Udvartana

- Udvartana massage is the best in both the conditions i.e. health and decease except few exceptions, which are as follow.
- Patients suffering by Kaphaja or Kapha predominant disease.
- Those who have been given emesis or purgation.
- Persons suffering from indigestion.
- Persons having intermediate matter.
- Acute fever.
- Those who have been given decoction enema.
- The diseases caused by over nutrition.

The Udvartana massage if done in above conditions causes diminution of digestive fire and increases the condition..

Procedure of Massage Pre operative procedure

Udvartana massage should be done with warm medicated oil or ghee, prepared with anti humor and aromatic drugs suitable to the season, region, constitution, disease, humor etc.

SHIRODHARA

Shivering is observed in some patients due to excess coldness of oil. In such case the procedure is stopped immediately and the patient is managed with heat therapy.

SHIROBASTI

1. Sneezing and rhinitis – Talam with Rasnadi Churna and Jambeera swarasa, dhoomapana with Haridra dhooma varti
2. Heaviness of head – stop the procedure and treat accordingly

KATIBASTI / JANUBASTI / GREEVA BASTI /

Stop the procedure and apply jatyadi Ghrita or Shatadhouta Ghrita.

Note : Now a day steel rings or fiber rings are available in small, medium and big sizes, which can be used with great ease. It is less time consuming and reduces the requirement of black gram dough.

SHASHTIKA SHALI PINDA SVEDA OR NAVARAKIZHI

1. Shivering: It usually occurs due to the uneven distribution of temperature or prolonged time gap in between the taking up of new boluses; or if body is exposed to cold breeze immediately after the procedure. Allow the patient to take rest cover with a blanket and given warm liquid diet.
2. Fainting: Due to increased body temperature or low heat threshold of the patient or atiyoga of kriyakrama. Medicated oil and Churan. Drakshadi kashaya 20ml can be given internally.
3. Rashes : Due to heat intolerance of the patient of Pitta Prakriti. Apply Madhu & Ghrita, preferably Shatadhouta Ghrita.

JAMGEERA POTLI SVEDA

- a) Fainting – sprinkle cold water on face, Talam should be done with suitable oil and Amalaki powder and Drakshadi kashaya 20ml with equal water

Burns – Apply Madhu and Ghrita preferably Shatadhouta Ghrita.

ALL POTALI

1. Shivering- Due to uneven distribution of temperature or if body is exposed to cold breeze immediately after the procedure. In such condition, cover the body with thick cloth, give warm liquid for drinking or give hot sudation.
2. Fainting – Due to increased temperature. Treat appropriately.
3. Rashes- Apply Madhu and Ghrita.

KAYASEKA

pouring too rapidly, from too great a height or for too prolonged a time may cause disorders such as burning sensation, erysipelas, fatigue, hoarseness of voice, splitting pains in the joints.

DHANYAMLA DHARA

In this type the luke warm medicated butter milk (takra) is used. The drugs used for preparing the medicated buttermilk are Acacia catechu, neem leaves, cassia fistula leaves cyperous rotundus, Pongamia pinnata leaves, curcuma loga, etc are used.

VAMANA KARMA (EMESIS THERAPY)

A) Virechana Vyapad & Chikitsa (complication and Management)

- I. Flatulence (Adhmana)
- II. Cutting pain at anal region (Parikartika)
- III. Excessive discharge (Parisrava)
- IV. Catching pain in chest (Hrutgraha)
- V. Spasms of limbs (Gatragraha)
- VI. Bleeding from lower GIT (Jivadana)
- VII. Improper action of medication (Vibharmsha)
- VIII. Rigidity (Stambha)
- IX. Serious afflictions (Upadrava)
- X. Exhaustion (Klama)

Flatulence (Adhmana)

This is caused when purgative drug of low dose and low potency is given to the patient having dry constitution or in condition of excess bio-humor or in weak digestive fire.

Clinical features : Distention of abdomen, pain in back and sides of the chest and head, obstruction to breath, stool, urine, and flatus.

Treatment : Charaka recommends massages, sudation, suppository, evacuative enema and unctuous enema. Sushruta has added Deepana and Langhana.

Cutting pain in anal region (Parikartika)

When the strong purgative drug is given to the oleated patient having indigested matter (Ama) in GIT, soft bowel, weak and tired, it may cause acute cutting pain and motions containing blood and mucus. This is known as Parikartika.

Clinical features : it is characterized by burning sensation in anus, umbilical region, urethra, bladder and head, retention of gases and loss of appetite.

Treatment : Patient should be managed by Langhana, Pahana, Rukshana, hot drugs. Repleteive therapy (Brumhana) should be given to weak patient. Cold enema, Piccha Basti or Anuvasana Basti should be given for the purpose.

Anal discharge (Srava)

If mild drug is given to the patient having excess bio-humor and hard bowel, then the drug unbale to remove the bio-humore and thus leads to anal discharge.

Clinical features : Weakness, itching, swelling, skin disease, heaviness in the body, loss of appetite, anemia.

Treatment : potent purgation after Snehana & Svedana, fermented alcoholic preparations, decoction enema, and treatment mentioned in the treatment of malabsorption syndrome (Grahani) and piles (Arsha)

Catching pain at chest region (Hrutgraha):

If a patient tries to suppress the purgation bout after taking purgative drug, then Vata Dosha get Vitiated and reaches to heart (Hrudaya) and causes Hrutgraha.

Clinical features : heicough, cough, pain in sides, unconsciousness etc.

Management : Vamana, Pachana, Abhyanga, Svedana and Anuvasana Basti, Teeksha Nasya; intake of oily & salt taste drugs.

Spasm of body parts (Gatragraha)

Due to suppression of natural urges and excess action of purgation etc., Vata gets aggravation, and causes spasm of body parts.

Clinical features : spasm of skeletal muscles, weakness, pricking pain, twisting and stirring pain.

Management : patients should be managed by Vata pacifying Snea and Sveda.

Bleeding from lower GIT (Jivadana):

If high potency drug is given to the soft bowel patient in condition of less aggravated bio-humor, then it creates irritation and leads to heavy bleeding .

Management : Patient should be given Anti-Pitta treatment. Give fresh blood of live deer, cow, buffalo, or goat. Rakta Basti, Piccha Basti, Anuvasana with supernatant portion of ghee (Ghrita Manda).

Rectal prolapse, disturbances in consciousness (Vibhramsha):

Clinical features : prrolapse of rectum, impaired consciousness or unconsciousness, itching etc.

Management : In rectum prolapse, it should be replaced by astringent medication, Alum powder, udumbara Sara, Iodhra Churna alongwith Jatyadi Taila should applied.

in unconsciousness, strong nasya (nasal medication), heart touching music is advised. The itching is treated according to bio-humor involved.

Rigidity (Stambha)

When oily purgative drug is given to obese patient it causes obstruction to the movement of bio-humors, therefore drug causes retention of bio-humor.

Clinical features : Langhana, Pachana, Teekshna Basti, and Virechanashould be given.

Management : oleation, sudation, and Vata pacifying drugs.

Exhaustion (klama)

If the mild purgative is given to the patient oleated well and having soft bowel, leads of vitiation of kapha and Pitta and obstruction of Vata.

Clinical features : Stupor, heaviness, exhaustion, weakness, and pain all over the body.

Management : Langhana, Pachana, Snehana, and strong purgative drug. Atiyoga : Due care should be taken in case of excess purgation and it should be managed by following measures –

Cold water should be sprinkled over the lower half of the patient's body and hot water to upper half of the body.

Rice washed water should be given with honey.

Kuataja Ghana Vati (2 tab) or Kutaja powder (2-4 gram)

Post Operative Procedure (Pashchat karma)

This is same as Vamana Karma except the Dhoomapana (medicated Smoking).

Which should not be done after Virechana.

- Behavioral & diet restriction
- Dietetic regimen
- Planning of other therapies

- A) Behavioral & Dietetic Restriction : same as emesis therapy
- B) Dietetic Regimen : Same as emesis therapy
- C) Planning of other Therapy : If enema (Basti) is to be given, then it should be started on 9th day after Virechana. Palliative medicines should be given after PPDR (Samsarjana Krama).

Summary of procedure of Virecana

- At first Ama Pachana should be done

- Then suitable Sneha is given according to strength of Agni till the appearance of Samyak Snigdha Lakshana
- Then Abhyanga and Svedana should be done for 3 days
- On the day of Virecana Karma first Abhyanga and Svedana
- After administration of Snehana and Svedana, finding the patient to be cheerful, slept well, completely digested previous meal and on empty stomach
- Virechana drug is administered after time of Kapha. The time for administering Virechana drug is between 9a.m to 11 a.m. It should preferably be administered in empty stomach
- Just after administration of the drug, to avoid vomiting due to nauseating and irritating nature of Virechana drugs, following measures should be adopted-
- Patient is asked to gargle by hot water and then advise to smell the fragrance of flowers
- Advise the patient to chew cardamom, clover or betel leaf
- Sprinkling of cold water over face
- Patient is advised not to expose to cold wind, take bed rest but cautioned not to sleep
- For easy, free & unobstructed expulsion of Vega (bout), hot water should be given repeatedly in little quantities
- If vega are not induced then Svedana should be done over abdomen
- Observe the symptoms of digestion of purgative drugs, remnants of medicine, & evacuation of Dosha.
- Record the following data-
 - a. Time required for the onset of the virechana vega, number of Vega, the details of excreta were inquired from the subject
 - b. Vital data

Based on the type of Sudhi, Samsarjana Krama should be planned

VIRECHANA KARMA

1. The condition of patient must be free from intermediate or indigested matter (Nirama). If purgative drug is taken in the condition of indigestion, it will lead to constipation and exhaustion and no purgation occurs at all.
2. If the patient is weak, having less aggravation of bio-humors, less strength, who has been purified and whose bowel is unknown then mild purgative is recommended in low dose.

3. In some patients purgation occurs during the period of oleation, then in such condition purgative diet is advocated. in weak patient having excess bio-humors, purgation occurs due to digestion of bio-humors : in this condition the purgative diet (Rice mixed with warm milk & powder of operculina Tarpehum) should be given.
4. Practically it is observed that, after taking the purgative formulation, usually bout of purgation starts within 45 – 90 min . in hard bowel patients (Vaidya Vasant).
5. In certain formulations such as Croton Tiglum preparations warm or hot water is contraindicated, as its purgative action is weakened due to dissolution of volatile oil content by the action of hot water. Purgation occurs as long as the volatile oil content is in contact with the intestinal mucosa.
6. If purgation does not occur even after 3 hours then sudation should be done over the abdomen area and hot water should be taken frequently. Then wait for another 30 minutes. If bout not starts, then booster dose of same yoga or other potent medicine should be given.
7. In some patients the purgative drug does not act due to the Kapha in the chest and starts at evening after the liquefaction of Kapha. So in such cases the physician should advise the patient before giving purgative drug.
8. Charaka told that decreased Kapha condition is the desired criteria for doing the virechana. If Pitta is increased then it may cause inadequate purgation as the increased Agni may digest purgative Drugs.²²

Purgative drug should be given again if no elimination Dosha occurs.

9. If the given purgative drug causes vomiting, then gargling and light diet (langhana) should be advised and on next day purgative drug should be given.²⁴
10. Hot water should be given frequently, if bio-humors are obstructed (Vibhandha).
11. Indry & patient has fasted, if purgation is given, then due to obstruction it moves upwards. In such condition drug mixed with ghee/oil & salt should be given.
- 12 . During digestion of purgative drug if the patient gets Pitta symptoms like thirst, fainting , etc., then patient should be treated with Anti- Pitta drugs having sweet & cold properties.²⁷
- 13 . During digestion of purgative drug if Kapha symptoms such as salivation, nausea, and hiccups are present then anti- Kapha drugs should be given.
- 14 . Factors causing of purgative drugs are excited Kapha, bad smell, unpleasant, excess dose, and indigestion.
- 15 . In children use of linctus made from rose petals (Gulakanda), decoction of dry grape, and decoction of cassia fistula are good.
- 16 . In patients of Asthma, the sadyodvirechana with Avipattikara Churna Provides quick relief in severity of symptoms. (Vaidya Vasant)
- 17 . Along with Virechana drugs always give cardamom, cinnamon, clove etc. aromatic drugs to prevent the gripping pain during purgation. Also these drugs help in prevention of vomiting of purgation drugs.

18 . In case of diarrhea due to infection, food poisoning it should not be stopped at the beginning (means at least allow motions to occur for 6 – 8 times and then it can be stopped). If stopped at the beginning, the toxins remain inside the gut are reabsorbed which then cause serious illnesses.

19 . In diseases due to Kapha and Meda (fat), Ruksha (dry) Virechana should be given. In diseases due to Vata and in dry body, Snigdha (oily) Virechana should be given.

In patients having weak bio-fire & hard bowel, at first ghee added with Yava kshara and rock salt should be given to kingle the agni & then after Snehana- Svedana, Virechana should be given.

Basti Karma

1. Only one type of Basti that is either decoction enema or oil enema should not be used continuously. If oil enema is given continuously it aggravates bio-humors and reduces the digestive fire. If decoction enema is used continuously then it causes aggravation of Vata. Thus, decoction enema after oil enema or vice versa are very much important to restore the normalcy and pacity the disease.
2. Adminstration of Basti without the purification of stomach & colon does not yields desired therapeutic results.
3. Initially decoction enema should be given in persons having oiliness in body.
4. For Yapana Basti there is no need of giving the oil enema.
5. Vaitarana Basti, a type of decoction enema can also be given after light meals.
6. In Vrushya Basti, the drugs having our & salt taste should be avoided.
7. In Pitta pacifying enama the drugs having sour & salt taste should be avoided.
8. Even though in obese, diabetes mellitus, Kushta decoction enema is contraindicated, it can be given after proper assessment of the condition with due care.
9. In children, elder, tender person and women, use of strong enema should be avoided.
10. In child, old aged & paralysis patients with weak anal sphincter, the quantity of enema should be less, & then increase the dose gradually.
11. While using brimhana Basti, drip method should be used to obtain desired therapeutic effects.
12. In patinets with weak sphincter or anal incontinence, initially Matra Basti should be given for 7 days. Then yoga/Kala Basti should be started with less dose and gradually increase.
13. Brimhana Basti should not be given in Shodhana yogya Roga such as prameha, Kushta, and stoulya.
14. Evacuative enema (Shodhana Basti) should not be given to the preson sufering from ituberculosis, very weak, fainting; purified with Vamana-Virechana and in which the life depends on bio-humors.

15. Non-processed oil (Ama Sneha) is strictly contraindicated because it causes secretion of Guda.
16. Simultaneous oleation through oral and rectal route is contraindicated because it causes vitiation of Vata and Agni.
17. Oil enema should be given daily in persons of dry, performs exercise daily, Vata diseases, inguinal pain, pelvic pain and diseases due to suppression of natural urges (udavarta).
18. The dose patterns of oil enema as advised by Vangesan is most practical and should be incorporated in practice.
19. Oil enema is strictly prohibited in obstruction (Avarna) of vata by Kapha & meda.
20. Before giving enema all material should be sterilized properly.
21. Reason for non-entrance of enema solution – if catheter / enema nozzle is blocked enema nozzle/catheter inserted in wrong direction, the anal route obstructed by piles/kapha/stool.
22. Reason for non return of enema-obstruction by bio-humors, less quantity of enema, low potency enema
23. Reason for quick return of enema- very hot, very strong/potent, soft bowel, presence of bout of flatus-stool-urine, excessively aggravated Vata, weak anal sphincter.
24. Yapanam basti owing to its mild nature retains for longer times and strong enema (Teekshna Basti) comes out in 60 seconds, hence very strong enema should not be administered.
25. For mixing Basti drugs, mixer can be used which saves the time and also emulsion occurs properly.

Basti especially eliminative, strong, alkali (kshara) patient must be hospitalized.

27. Sterile/aseptic measures should be strictly followed for all types of Basti.
28. Drip method of basti administration is highly beneficial in patient of malnutrition, paralysis, geriatric, degenerative diseases etc. which needs nourishment. It is also best suitable in patients having incontinence of anal sphincter.
29. The Basti which is not properly churned & mixed will not yield any benefits/result.
30. Well formulated Basti with Saindhava & Anethum Sowa, given in luke warm condition returns easily.

In dry & excess Vata persons, first 2-3 oil enema (Anuvasana Basti) should be given and thereafter, considering that the body is well oleated, Niruha Basti should be administered



Nasya Karma

The patient after taking the Nasya Karma if does not follow the regimen given above, causes aggravation of Dosha leading to many complications which are known as Vyapad.

Complication of Nasya karma may occur due to :-

1. Administration of Nasya in contraindicated diseases & persons
2. Due to technical error.
3. These complications occur either excitation of bio-humors, which should be managed by purificatory & palliative therapies or depletion of bio-humors, which should be managed by repletion therapy.

