



Dr. S. T. Dada Gujar  
Founder MAM



Shri Sumatibhai Shah

Maharashtra Arogya Mandal's

**SUMATIBHAI SHAH AYURVED MAHAVIDYALAYA**

Estb: 01 Aug 1990 Inst. Code: AYU0148

Recognized by: Govt. of INDIA, Ministry of AYUSH, N.C.I.S.M, New Delhi and Govt. of Maharashtra

Affiliated to : Maharashtra University of Health Sciences (MUHS) Nashik

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Accredited by NAAC with 'B+' grade

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॥ अस्मिन्समस्तं प्राप्यते बुद्धिः  
कर्मसिद्धिश्चकारिणी ॥

# KAUMARABHRITYA PANCHAKARMA: SOP



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### **SOP of Snehana :**

1. First patients is examined and decided whether its indicated for snehana by both Pediatrician and Panchakarma Specialist.
2. Then Medications are prescribed as per consultants opinion.
3. The written consent is taken from patient's parents or guardian about procedure and procedure is explained in details.
4. Patient is told to bring the Medications and instruments needed for the procedures.
5. After bringing proper medications, medications and required instruments are checked by doctors for quantity, quality, safety and efficacy.
6. Then Patient is prepared for procedure and procedure is carried out as per following instructions.
7. First of all the drugs needed for snehana are warmed by water bath method and checked for warmth by doctor or as per experts opinion.
8. Then patient is prepared by letting the patient sleep on snehana table after removing clothing and any ornaments wore.
9. Gradually Oliation and massage is done by Health Professional / PG Students / Interns / Consultant as per Expert's Opinion.
10. After proper procedure, the child is re-examined and handovered to parents or guardians and signs are taken regarding handovered baby.
11. Follow up date is given to the patient as per experts opinion and then OPD paper is submitted to billing department for billing.

### **Protocol For Complications of Snehana:**

1. While doing snehana there are usually less chances of complications as the procedure is mostly massage with oils. But sometimes minor traumas



1. First patient is examined and checked whether its history is correct by both physician and laboratory specialist.
  2. The medical case is reviewed as per hospital case record.
  3. The written records include patient's present or previous signs, symptoms and previous or explanatory history.
  4. Patient is told to bring the specimens and instruments needed for the procedures.
  5. After bringing proper specimens, medical case and history, instruments are checked for the number of units, the expiry date and efficacy.
  6. Then patient is prepared for procedure and procedure is carried out as per following procedure.
  7. First of all the aseptic method for procedure is followed by water bath, control and checked by watch by doctor in aseptic operation.
  8. The case is prepared by using the aseptic step as per aseptic technique after removing clothing as 1 day operations were.
  9. Finally, operation and management done by Health Practitioner (H.P.) Specialist & Incharge & Consultant as per Hospital's Operation.
  10. After proper procedure, the patient is examined and hospitalized as per patient's condition and status as per aseptic technique and follow up.
  11. Follow up date is given to the patient as per doctor's opinion and this (H.P.) report is submitted to follow up department for follow up.
- Procedure for Surgical cases of 2018
1. While doing the work there are usually few things to be considered as per the procedure is mostly managed with this few instructions as per hospital.



and mishaps can happen like, Slipping of baby by sliding on oil, blunt trauma due to falling, Burn and scalds due to application of hot oils.

2. For this Emergency first aid kit is present in Panchakarma department.
3. The Kit includes Primary instrumentation, Medication even Instrumentation for Positive Pressure Ventilation and Intubation in case if required related for this minor mishaps.
4. In case of major issue like collapse of baby or sever injury the baby is immediately shifted to PICU/Ward for that Blue code is activated and further management is done.

#### **SOP for Swedana :**

- 1) First patients is examined and decided whether its indicated for swedana by both Pediatrician and Panchakarma Specialist.
- 2) Then Medications are prescribed as per consultants opinion.
- 3) The written consent is taken from patient's parents or guardian about procedure and procedure is explained in details.
- 4) Patient is told to bring the Medications and instruments needed for the procedures.
- 5) After bringing proper medications, medications and required instruments are checked by doctors for quantity, quality, safety and efficacy.
- 6) Then Patient is prepared for procedure and procedure is carried out as per following instructions.

#### **a) Procedure for Bashpa-Swedana :**

1. First Drugs prescribed are added into water and mixture is heated in pressure cooker.
2. The cord for steam transport is attached at the whistle end of pressure cooker and everything is heated till uniform steam comes from the open end of steam cord.



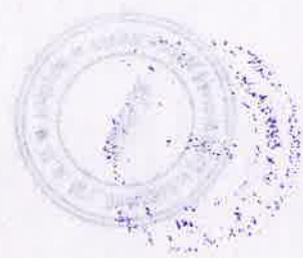
and perhaps can help in the slipping of baby by sitting & all kind  
 reasons due to falling down and scalp use to application of hair oil  
 2. For the hair growth, this oil is treated in the treatment of hair loss  
 3. The oil is used for many hair treatments. Medication even  
 instrumentation for the active pressure reduction and reduction in scalp  
 related issues for the minor massage  
 4. In case of major hair loss, the oil is used to reduce the hair loss  
 (which may be due to the hair loss) & it is used for  
 further management of hair

209 for 2020

- 1) The hair oil is prepared and tested for its hair loss for  
 evidence by hair loss, hair loss and hair loss treatment
- 2) The hair oil is prepared and tested for its hair loss for  
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- 3) The hair oil is prepared and tested for its hair loss for  
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 evidence by hair loss, hair loss and hair loss treatment
3. The hair oil is prepared and tested for its hair loss for  
 evidence by hair loss, hair loss and hair loss treatment



3. The uniform steam is checked for any hot splatters and water droplets eruption from steam cord end.
4. The Proper distance is decided for administration of steam by checking with hands.
5. After that Patient is prepared by removing cloths and any ornaments wore and then proper position is given to patient as per experts instruction.
6. After that uniform steam is given to patient till siddhi lakshana /expers opinion.
7. After proper procedure, the child is re-examined and handovered to parents or guardiens and signs are taken regarding handovered baby.
8. Follow up date is given to the patient as per experts opinion and then OPD paper is submitted to billing department for billing.

**b) Procedure for shalishashtika Pinda Swedana :**

1. The drugs needed for shalishashtika pinda swedana are added into pot and then ksheerapaaka is prepared as per standard procedure.
2. Rice is cooked in pressure cooker and after proper cooking is bound in cheese cloth so that pottali is prepared.
3. Then this pottali is dumped into ksheerapaaka of drugs and kept for soaking till the temperature of whole mixture drops upto suitable for application.
4. Till that sarvanga snehana is carried out by proper snehana SOP.
5. After that prepared patient is adjusted on swedana table with proper position and shalishashtika pinda swedana is carried out after checking temperature of Pottali by doctor or health professional.
6. The Pottali is applied on child's body with adequate pressure with circular motions on affected areas where swedana is expected. When pottali again becomes cold its dumped into warm ksheerapaaka and warmed again this





procedure is carried out till proper siddhilakshana is observed or as per experts opinion.

7. At last the pottali is opened up and rice inside it is massaged on whole body of patient.

8. After that patients body is cleaned with warm water soaked towel and patient is told to wear warm cloths.

9. After proper procedure, the child is re-examined and handovered to parents or guardians and signs are taken regarding handovered baby.

10. Follow up date is given to the patient as per experts opinion and then OPD paper is submitted to billing department for billing.

#### **Protocol For Complications of Swedana :**

1. While doing Swedana there are usually less chances of complications as the procedure is mostly hot fomentation done under supervision. But sometimes minor traumas and misshaps can happen like, Slipping of baby by sliding on oil, blunt trauma due to falling, Burn and scalds due to application of hot oils , Steam or Methods used for hot fomentation. Instrumental misshapps like Gas Cylinder leakage, And Explosion or burning.

2. For this Emergency first aid kit is present in Panchakarma department.

3. The Kit includes Primary instrumentation, Medication even Instrumentation for Positive Pressure Ventilation and Intubation in case if required related for this minor misshaps.

4. In case of major issue like collapse of baby or sever injury the baby is immediately shifted to PICU/Ward for that Blue code is activated and further management is done.

5. For Instrumental misshaps like Burning and Gas leakage the Fire extinguisher are available and all staff is trained for this. In case of major



procedure is carried out and proper arrangements are observed in all  
reports of cases.

7. At least the present is observed in all cases it is necessary to report  
the fact of

8. After that period the fact is reported with every case and  
the same is to be reported in the

9. After proper procedure the fact is reported and the same is to be  
reported in the same way as the fact.

10. Follow up work is given to the fact and the same is to be  
reported in the same way as the fact.

Procedure for the collection of specimens

1. While doing the work the fact is reported and the same is to be  
reported in the same way as the fact.

2. The procedure is to be reported in the same way as the fact  
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reported in the same way as the fact.

10. The fact is reported in the same way as the fact and the same is to be  
reported in the same way as the fact.



issue the fire exit/emergency exit guidelines are available in whole premises.

### **SOP of Basti :**

1. First patients is examined and decided whether its indicated for Basti by both Pediatrician and Panchakarma Specialist.
2. Then Medications are prescribed as per consultants opinion.
3. The written consent is taken from patient's parents or guardian about procedure and procedure is explained in details.
4. Patient is told to bring the Medications and instruments needed for the procedures.
5. After bringing proper medications, medications and required instruments are checked by doctors for quantity, quality, safety and efficacy.
6. Then Patient is prepared for procedure and procedure is carried out as per following instructions.
7. First the medication for basti is prepared as per order given by exper doctors.
8. Basti drug is prepared in central kitchen at panchakarma OPD with help of Panchakarma specialist.
9. After proper preparation of basti drug patient is prepared for pre procedure which included snehana and swedana either sthanik or sarvadehik.
10. Snehana and Swedana are carried out as mentioned in Snehana and Swedana SOP.
11. After that Proper Position is given to the patient.



Learn the first emergency exit guidelines are available in whole premises

COPI in 6001

1. First patients in treatment and discharge which are not necessary to be by both the physician and the patient's relatives

2. Then medical staff are provided to give to patients and relatives

3. The patient's consent is taken from patient's relatives or the patient about procedure and procedure is required in certain

4. Patient is told to bring the documents and instruments needed for the procedure

5. After taking of proper medication, anesthesia and the patient's instruments are checked by the doctor for quantity and quality and all ready

6. Then patient is prepared for procedure and procedure is carried out in the following manner

7. First the anesthesia is given as per order given by the doctor

8. X-ray data is prepared in order to follow on postoperative X-ray with help of technician assistance

9. After proper preparation of end stage patient is prepared for the procedure with the help of staff and the doctor about the details of procedure

10. Signs and symptoms are carried out as mentioned in booklets and books of IOP

11. After the proper patient is given to the patient



12. Under all Aseptic precautions Basti drug is taken in bastiputaka and rubber catheter or cannula is attached to the basti putaka then air is removed and basti drug is checked for suitable temperature.
13. Lubricant is then applied to anal spincter of patient and rubber catheter and appx 4cm catheter is administered into patients rectum.
14. Then required quantity mentioned as per expert is administered slowly with adequate force into patients rectum and then catheter is removed and discarded .
15. After that gentle tapping is done on patients buttocks and lumbar area is massaged gently.
16. Then patient is told to wait till basti is passed out.
17. After proper procedure, the child is re-examined and handover to parents or guardians and signs are taken regarding handover baby.
18. Follow up date is given to the patient as per expert's opinion and then OPD paper is submitted to billing department for billing.

#### **Protocol For Complications of Basti :**

1. While doing Basti there are usually less chances of complications as the procedure is mostly done under observation of supervisor and senior doctors. But sometimes minor traumas and mishaps can happen like, Slipping of baby by sliding on oil, blunt trauma due to falling, Burn and scalds due to application of hot oils, Kwatha and materials needed for basti.
2. For this Emergency first aid kit is present in Panchakarma department.
3. The Kit includes Primary instrumentation, Medication even Instrumentation for Positive Pressure Ventilation and Intubation in case if required related for this minor mishaps.



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4. In case of major issue like collapse of baby or sever injury the baby is immediately shifted to PICU/Ward for that Blue code is activated and further management is done.

5. For Instrumental misshaps like Burning and Gas leakage the Fire extinguisher are available and all staff is trained for this. In case of major issue the fire exit/emergency exit guidelines are available in whole premises.



In case of any error or delay in the delivery of the goods, the liability shall be on the part of the contractor and not the Government. The contractor shall be responsible for the cost of any delay or non-delivery of the goods.

2. For the purpose of this contract, the contractor shall be responsible for the cost of any delay or non-delivery of the goods. The contractor shall be responsible for the cost of any delay or non-delivery of the goods.



### **SOP of Nasya :**

1. First patients is examined and decided whether its indicated for Basti by both Pediatrician and Panchakarma Specialist.
2. Then Medications are prescribed as per consultants opinion.
3. The written consent is taken from patient's parents or guardian about procedure and procedure is explained in details.
4. Patient is told to bring the Medications and instruments needed for the procedures.
5. After bringing proper medications, medications and required instruments are checked by doctors for quantity, quality, safety and efficacy.
6. Then Patient is prepared for procedure and procedure is carried out as per following instructions.
7. The Drugs Used in Nasya which have been prescribed by experts is warmed by water bath method and kept handy.
8. Then proper position is given to the patient and sthanik snehana and swedana is done on face , neck and sholders as per standard SOP.
9. Then sthanik swedana by Bashpa shwedana is done locally as per standard SOP.
10. After that the warmed medication of nasya is checked by fingers and temperature is checked.
11. 2-6 drops or a prescribed by expert are then administered in patients each nostrils. Then the gentle massage is done on face again.
12. Patient is told to sleep on the snehana table with proper head tilt chin lift position for appx 5-10min.
13. After proper procedure, the child is re-examined and handover to parents or guardians and signs are taken regarding handover baby.



1. First and foremost, the waste management and handling procedures are defined for every type of waste.

2. The waste management and handling procedures are defined for every type of waste.

3. The waste management and handling procedures are defined for every type of waste.

4. The waste management and handling procedures are defined for every type of waste.

5. After preparing proper waste management and handling procedures, the waste management and handling procedures are defined for every type of waste.

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10. After the waste management and handling procedures are defined for every type of waste.

11. The waste management and handling procedures are defined for every type of waste.

12. The waste management and handling procedures are defined for every type of waste.

13. The waste management and handling procedures are defined for every type of waste.



14. Follow up date is given to the patient as per expert's opinion and then OPD paper is submitted to billing department for billing.

**Protocol For Complications of Nasya:**

1. While doing Nasya there are usually less chances of complications as the procedure is mostly done under observation of supervisor and senior doctors. But sometimes minor traumas and misshaps can happen like, Slipping of baby by sliding on oil, blunt trauma due to falling, Burn and scalds due to application of hot oils, Kwatha and materials needed for Nasya, Nasya Complications Like Asphaxia and other major complications like Internl mucosal burning and irritation.

2. For this Emergency first aid kit is present in Panchakarma department.

3. The Kit includes Primary instrumentation, Medication even Instrumentation for Positive Pressure Ventilation and Intubation in case if required related for this minor misshaps.

4. In case of major issue like collapse of baby or sever injury the baby is immediately shifted to PICU/Ward for that Blue code is activated and further management is done.

5. For Instrumental misshaps like Burning and Gas leakage the Fire extinguisher are available and all staff is trained for this. In case of major issue the fire exit/emergency exit guidelines are available in whole premises.





### **SOP of Jivha Pratisarana :**

1. First patients is examined and decided whether its indicated for Jivha Pratisarana by both Pediatrician and Panchakarma Specialist.
2. Then Medications are prescribed as per consultants opinion.
3. The written consent is taken from patient's parents or guardian about procedure and procedure is explained in details.
4. Patient is told to bring the Medications and instruments needed for the procedures.
5. After bringing proper medications, medications and required instruments are checked by doctors for quantity, quality, safety and efficacy.
6. Then Patient is prepared for procedure and procedure is carried out as per following instructions.
7. The Drugs Used in Jivha Pratisarana which have been prescribed by experts is prepared as per guideline and kept handy.
8. Then proper position is given to the patient and sthanik snehana and swedana is done on face , neck and sholders as per standard SOP.
9. Then sthanik swedana by Bashpa shwedana is done locally as per standard SOP.
10. After that the Prepared medicine is checked by fingers and temperature , consistency and structure also quantity is checked.
11. Quantity prescribed by expert are then administered in patients by proper guidelines. This includes gentle massage of prepared medication inside oral cavity and tongue. Then the gentle massage is done on face again.
12. Patient is told to do gandusha and Kavala after pratisarana as a post procedure or as per described by physician.



1. First patient is examined and findings noted in relation to the
2. Second patient is examined and findings noted in relation to the
3. Third patient is examined and findings noted in relation to the
4. Fourth patient is examined and findings noted in relation to the
5. Fifth patient is examined and findings noted in relation to the
6. Sixth patient is examined and findings noted in relation to the
7. Seventh patient is examined and findings noted in relation to the
8. Eighth patient is examined and findings noted in relation to the
9. Ninth patient is examined and findings noted in relation to the
10. Tenth patient is examined and findings noted in relation to the
11. Eleventh patient is examined and findings noted in relation to the
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19. Nineteenth patient is examined and findings noted in relation to the
20. Twentieth patient is examined and findings noted in relation to the



13. After proper procedure, the child is re-examined and handover to parents or guardians and signs are taken regarding handover baby.

14. Follow up date is given to the patient as per expert's opinion and then OPD paper is submitted to billing department for billing.

**Protocol For Complications of Jivha Pratisarana :**

1. While doing Jivha Pratisarana there are usually less chances of complications as the procedure is mostly done under observation of supervisor and senior doctors. But sometimes minor traumas and misshaps can happen like, Slipping of baby by sliding on oil, blunt trauma due to falling, Burn and scalds due to application of hot oils, Kwatha and materials needed for Jivha Pratisarana, Jivha Pratisarana Complications Like Asphaxia and other major complications like Internl mucosal burning and irritation.

2. For this Emergency first aid kit is present in Panchakarma department.

3. The Kit includes Primary instrumentation, Medication even Instrumentation for Positive Pressure Ventilation and Intubation in case if required related for this minor misshaps.

4. In case of major issue like collapse of baby or sever injury the baby is immediately shifted to PICU/Ward for that Blue code is activated and further management is done.

5. For Instrumental misshaps like Burning and Gas leakage the Fire extinguisher are available and all staff is trained for this. In case of major issue the fire exit/emergency exit guidelines are available in whole premises.



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