



KMCT AYURVEDA MEDICAL COLLEGE

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TO WHOM SO EVERIT MAY CONCERN

This is to certify that the information in the attached documents is verified by me and is true to the best of my knowledge.

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INNOVATION AND
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DEVELOPMENT CENTRE





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PROTOCOLS INCORPORATING PRINCIPLES OF AYURVEDHA AND THEIR IMPLEMENTATION

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Institute incorporate protocols for arranging various panchakarma procedures based on the aggravation of doshas in various seasons. These are arranged for the benefit of the society and for creating awareness in general public regarding panchakarma.

1. VAMANA KARMA

Vamana is important treatment for Kapha Vyadhi. Naturally aggravated Kapha can be removed with the help of Vamana so we can avoid Vyadhis formed due to Kapha Dosha.

a) Selection of patient:

- When patient comes to Panchakarma OPD detail history of his/her present and past illness is taken. History about his/her diet and day today activity is also taken.
- This activity is done for finding out Dosha and Dushya taking part in present Vyadhi Samprapti.
- After actual Nidana of Vyadhi and its Awastha we advise Pachana and Rukshan Chikitsa to the patient (including medicine and diet) as per requirement of the patient (approx. 5 to 7 days).

b) Snehapana for Vamana procedure:

- Snehapana is very crucial step in Shodhana like Vamana and Virechana for Utkleshana of Doshas,
- We advise Snehapana to the patient according to their Agni and Koshta.
- We advise Snehadravya like Ghruta and Taila. We use Vicharana Snehapana or AcchaPana.
- We design a protocol of Vardhamana Sneha Matra for 4 days as follows

1st day- 30 ml

2nd day- 60 ml

3rd day- 90 ml

4th day - 120 ml

- If no Samyaka Sneha Lakshanas in patient after 4 days we add more 1 or 2 days of Snehapana of 120 ml as per patients requirement.



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c) Diet regimen and procedure during pathya kala:

- After following the above protocol if there are Samyaka Sneha Lakshana then we go for Bahya Snehana -Swedana procedure for Vilayana of Utkleshita Doshas after Snehapana.
- Because of Swedana Doshas get Gati from Shakha to Koshta
- For Vamana there is rest for one day.
- On that day patient is advised to take Kapha Utkleshita Ahara such as Masha, Dadhi, Dugdha, Payasa etc.

d) Pradhana Karma:

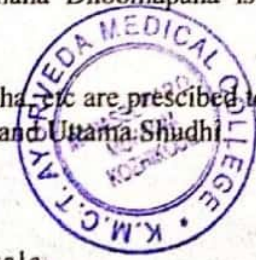
- After patient's completion of Purva Karma of Bahya Snehana and Swedana in the morning of Vamana Karma we examine the patient thoroughly and take their written consent.
- Akanta Panartha we use Godugdha, Ikshurasa, Peya, Yashti madhu Kwatha as per patients requirement.
- After Akantapana , Vamaka Dravya is administered. These are Madanaphala Pippali Churna, Vacha Churna, Saindhava and Madhu,
- During administration of Vamaka Dravya prayer is going to be chanted as Mangalacharana.
- We wait for the Vamana Vega for about 48 min. (1 Muhurta).
- When Vamana Vega starts we carried out the whole procedure of Vamana by giving Yashtimadhu Kwatha, Patola Kwatha, Vasa Kwatha to the patient for induction of Vamana Vega till Pittadarshana.
- We ensure that Vamaka Dravya should come out of stomach through vomitus during Vamana procedure.

e) Pashchat Karma:

- After completion of Pradhana Karma of Vamana Dhoomapana is administered for Shesha Kaphadosha in Ura Kanta Pradesha.
- Samasarjana Krama of Peya, Vilepi, Mudga Yusha etc are prescribed to the patients after Vamana Karma according to Heena, Madhyama and Uttama Shudhi

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2. VIRECHANA KARMA

Virechana is important treatment for pittapradhanavyadhi. Naturally aggravated pitta can be removed with the help of Virechana. So we can avoid vyadhis formed due to pitta dosha

A. Selection of patients:

1. When patient comes to panchakarma OPD detail history of his/her present and past illness is taken. History about his/her diet and day today activity is also taken.
2. This activity is done for finding out dosha and dushya taking part in present vyadhisamprapti.
3. After actual nidana of vyadhi and its Avastha we advise Pachana and Rukshana chikitsa to the patient including medicine and diet as per requirement of the patient (approx. 5 to 7 days).
4. During Pachana and Rukshana Chikitsa we assess the patient either he is indicated or contraindicated for the Virechana procedures. We also examine the patient with the help of modern parameters.

B. Snehapana for Virechana procedure

1. Snehapana is very crucial step in shodhana like Vamana and Virechana for utkleshana of doshas.
2. We advise Snehapana to the patient according to their Agni and Koshta
3. We advise Snehadravya like ghruta and taila. We use Virechana Snehapana or Acchapanana.
4. We design a protocol of Vardhamana Sneha matra for 4 days as follows
1st day- 30 ml
2nd day- 60ml
3rd day- 90ml
4th day- 120ml
5. If no Samyak Sneha lakshanas in patient after 4 days we add more 1 or 2 days of snehapana of 120ml as per patient's requirement.

C. Diet regimen and procedure during Pathyakala

1. After Samyak snigdha Lakshana is seen amongst the individual, purvakarma Sarvanga Snehana and Swedana is carried for 3 days.
2. The purpose behind this is to bring the Shakhagata Sanchita dosha into the Koshta.
3. Before the day of Virechana Karma Purishvardhaka Aahara, i.e kidney beans is been advised to the patient at night.

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D. Pradhana Karma

1. On the day of Virechana Karma patient is advised to drink 1 cup of lukewarm milk with medicated Sneha(siddha ghruta) in early morning.
2. Virechana Karma is done on empty stomach.
3. For Virechana Karma Virechaka Dravya like Trivrut Avaleha, Kalyanaka Guda, Eranda Sneha, Abhayadi Modaka etc is used.
4. Anupana is given as per the Virechaka Dravya. But generally lukewarm water is used.

E. Pashchat Karma:

1. At the day of Virechana patient is advised not to take any kind of solid meal.
2. After each Vega lukewarm water is given to the patient to maintain their hydration as well as Vatanulomana.
3. As per the frequency of Vega (after seeing Samyaka Virechaka Lakshana) we give 3 days of Samsarjana karma like Manda, Peya, Vilepi which means low diet to normal diet.
4. If Ayoga Lakshana is seen again on next day Snehana-Swedana is given to the patient along with the Virechaka Dravya according to the Koshta of patient.

3. RAKTAMOKSHANA:

'Raktamokshana' is one of the Shodhana procedure in Panchakarma which means 'blood letting'. The Doshas present in the Rakta are liberated (Mokshana).

The procedure is divided into two types based on instruments used.

- i. Shashtra Krut (with help of iv set and needle) - Siravedha.
- ii. Ashastrakrut (with help of Jalauka) - Jalaukavacharana.

1. SIRAVEDHA:

Raktamokshana from veins i.e. Sira with the help of needle (iv set)

For this procedure patient's affected area of skin is cleaned with spirit swab.

Applying tourniquet four Angula Pramana above the desired vein to be punctured.

Vein is punctured with needle no 18 (from iv set) and tubing of the iv set fixed with tape to a kidney tray to collect the blood (Sadosha Rakta-impure blood).

Tourniquet is removed.

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After adequate blood letting is achieved Parikshana of the Rakta Varna (colour) is done, needle is removed and dressing is done with Haridra Churna.

The blood collected out is discarded safely as a bio- medical waste.

2. JALAUKA VACHARANA (LEECH THERAPY):

Raktamokshana using Jalaukas is known as Jalaukavacharana.

Properly cultured Nirvisha Jalaukas are used and stored properly.

The patient is advised strictly not to apply any scented soap/cream/ointment, lotions over the desired area of skin on which Jalaukas are to be used.

Requirements: The selected Jalaukas, kidney tray, dressing tray containing Haridra Choorna, Panchavalkala Choorna, sticking tape, cotton, sterile needle no 18, milk if required, sheet.

The Jalauka is applied to the desired area. The Jalauka effortlessly applies to Doshasanchita area but if not so the blood from needle pricked finger or blood from needle pricked selected area helps the Jalauka to get fixed for Jalaukavacharana.

The properly fixed Jalauka has elevated neck and sucks the impure blood. The patient can feel mild pain when the leech takes its prick.

The impure blood sucking is painless.

The leech is covered with damp/wet cotton swab.

After adequate Jalaukavacharana is achieved i.e. blood sucking by the leech is enough or once impure blood is sucked completely the sucking by the leech becomes more painful.

The leech leaves the prick site on its own, once all impure blood is sucked but if not so the Haridra Choorna is sprinkled on the prick site or leech's mouth this causes irritation at the leech's mouth and the leech leaves the prick site.

This marks the end of Jalaukavacharana- Pradhana Karma.

In Paschat Karma, two things are followed.

1. Patient prick site/wound care: Wearing sterile gloves, Haridra Choorna, Panchavalkala Choorna is pressed with cotton swab over the prick site and dressing is done. Due to hirudin released by leech at prick site, the blood takes longer time to clot, hence dressing with Haridra/ Panchavalkala (Rakta sthambana) is done.
2. Jalauka Vamana: Wearing sterile gloves the leech use for Raktamokshana is taken in kidney tray and Haridra Choorna is taken on one side. The leech mouth is kept on the Haridra Choorna, due to irritation and sensitivity to the Haridra Churna, the Jalauka vomits all the sucked impure blood on its own, if not so gentle pressure is applied from leech's hook to its mouth to help the impure blood to take out of its abdomen..

The blood vomited by the leech is handled with care and discarded properly as biomedical waste.



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Once the Jalauka's size returns to its normal size and the Jalauka regains its activeness. (checked by adding water into the kidney tray, the Jalaukas moves faster and actively.

The Jalauka Vamana is important to save the life of the Jalauka used as Sadosha Rakta can be toxic to it.

The used Jalauka is advised not to be used for minimum of 8 days.

The used Jalauka are kept in recently container with water and lid having air entry holes.

This makes the end of the Jalaukavacharana procedure.

4.BASTI KARMA

Basti is a significant procedure in Ayurveda, especially in Panchakarma, the detoxification and rejuvenation program. Basti is one of the most important treatments for Chikitsa in Ayurveda. It is important for Vata dosha predominant vyadhies.

A) Selection of patient:

- When patient comes to Panchakarma OPD detail history of his/her present and past illness is taken. History about his/her diet and day today activity is also taken.
- This activity is done for finding out Dosha and Dushya taking part in present Vyadhi Samprapti.
- After actual Nidana and Vyadhi Avastha we select patient for Basti karma.
- We advise Yogabasti, Kalabasti or other patterns of Basti Kalpana as per patients requirement.

B) Pradhana Karma:

- Every day Sarvanga or Sthanika (Udara and Kati) Snehana and Swedana is advised to the patient before taking Basti Chikitsa.
- We advise alternate day Anuvasana Basti and Niruha Basti to the patient.
- For Anuvasana Basti we use Dashamoolika Taila, Nagabaladi Taila, Narayana Taila, Triphala taila etc as per patients Vyadhi Awastha
- For Niruha Basti we use, Dashamoola Kwatha, TriphalaKwatha, etc.
- or we advise Erandamooladi Niruha, Punarnavadi Niruha, Vaitarana Basti, Lekhana Basti, Krunighna Basti, Kshira Basti etc
- We provide Peya to the patient before Anuvasana Basti and after Pratyagama of Niruha Basti in the institute.
- After completion of Basti Chikitsa we advise some lifestyle modification like Vyayama, Yogasanas and Pathyahara according to occupation.

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