



SHREE SAPTASHRUNGI AYURVED MAHAVIDYALAYA & HOSPITAL

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Second revision (R2) made on 15/03/2018

Third revision (R3) made on 15/12/2021

SOP OF BHEDANA KARMA IN VIDRADHI

DEFINITION

Process of Bhedana Karma at demarcated area is Shastrakarma.

STANDARD OPERATING PROCEDURE:

MATERIAL REQUIREMENT


- Sponge Holding Forceps
- Betadine and Spirit
- Artery, Allies and Babcock's Tissue forceps
- Tissue cutting scissors
- BP handle with surgical Blade no.11ⁱ
- Sterile gauze piece and cotton
- Sterile linen hole sheet
- Cotton bandages
- Scoopⁱⁱ
- Sinus Forcepsⁱⁱⁱ

PURVA KARMA:-

- Awastha of Vranashotha should be evaluated before surgery.^{iv}
- Written informed consent
- Part Preparation, Site demarcation and Painting and draping is followed
- Infiltration of local Anesthetic (Inj. Lignocaine hcl 2%) in small abscesses. Spinal anaesthesia or General anaesthesia is advised as per need.^v


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PRADHANA KARMA:-

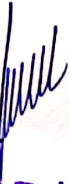
- Expose the area and confirm the site
- With the help of Surgical Blade apply Bhedana Karma on the Vidradhi is followed
- Drain all dushta Puyasrava
- Apply blunt dissection with finger and sinus forceps^{vi}.
- Lekhan Karma done with scoop^{vii}

PASHCHAT KARMA-

- Clean operative site with Antiseptic solution Nimba/ Panchavalkala Kwatha
- Apply Packing of Nimba Tail or KsharaTaila^{viii} with roller gauze up to healing
- Apply appropriate bandage according to site


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SOP OF JALAUKAVCHARANA

DEFINITION

Therapeutic application of medicinally usable leech for the purpose of removing vitiated blood is known as Jalokavacharana.

STANDARD OPERATING PROCEDURE MATERIAL REQUIREMENT

- Medicinally usable leeches (Nirvisha Jaloka)
- Water pot
- Kidney tray
- Haridra
- Milk
- Sterile needle
- Gauze piece
- Sterile gloves

PURVA KARMA

- Take consent for the procedure and evaluate patient safety for before procedure as per pre procedure checklist
- Preparation of local parts
- Preparation / activation of Jaloka by keeping it in water pot with haridra powder dusting.

PRADHANA KARMA

- Application of Jaloka manually with or without use of Milk drop/ skin prick by needle
- Observe for Ashwakhurvat ananam, unnabhya va skandan (the shape of horse shoe in the raised and arched position).^{ix}
- Application of wet gauze piece over Jaloka
- Observation of proper suction movement of Jaloka.
- Jalouka detaches after completing its feed.^x
- Remove Jaloka manually by dusting of Haridra Powder only if it pains or presence of tingling sensation is there.
- Platelet count, BT-CT^{xi}, S. HIV, S. HbSAg, S. VDRL of patient prior to performing procedure.



PASHCHAT KARMA


- After removal of Jaloka, dusting of Haridra powder should be done on operated part to stop the bleeding.
- Tight pressure bandage should be given on operated part.
- JalokaVamana should be done by classical method of Haridra Powder dusting and finger pressure by thumb and index finger on Jaloka.
- Drop the Jaloka in clean water pot for rest.
- Post procedure evaluation should be written in patient's file

SAFETY PRECAUTION

- One-time applied Jaloka should not be used for next 7 days.
- Preservation of Jaloka should be done properly.
- Jaloka used in one patient should not be used in another patient. It should be patient personalized.
- JalokaVamana should be performed gently and not vigorously.


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SOP OF KSHARASUTRA BANDHANA IN NADIVRANA

DEFINITION

Process of Threading of Kshara Sutra (High pH strong alkaline Barbour linen thread no. 20) on demarcated area is Ksharakarma.

STANDARD OPERATING PROCEDURE:

MATERIAL REQUIREMENT

- Sterile Kshara sutra
- Pile Holding Forceps/Sponge Holding Forceps
- Proctoscope
- Betadine and Spirit
- Allies and Babcock's Tissue forceps
- Sims Speculum
- Probes (Different size and length, Malleable/non-malleable)
- Tissue cutting scissors
- BP handle with different surgical Blades
- Sterile gauze piece and cotton
- Sterile linen hole sheet
- Cotton bandages

PURVA KARMA:-

- MRI is advised in complicated fistula.^{xii}
- Written informed consent for the procedure
- Part preparation, Site demarcation Painting and draping followed accordingly
- Infiltration of local Anesthetic (Inj.Lignocaine hcl 2%) for only Low anal fistula. If high anal fistula then go for Spinal anaesthesia or General Anaesthesia.^{xiii}
- If patient have high anal fistula then go for 4 finger dilatation.^{xiv}

PRADHANA KARMA:-

- Expose the area and confirm the site
- Probing done into the external to internal opening and define the track (If needed do retrograde probing)
- Gentle probing should be done to avoid false track formation.^{xv}
- Ligation of Ksharasutra with the help of probe from external to internal opening.
- If needed explore the external opening of Bhagandara / Nadivrana for the drainage of discharge.



PASHCHAT KARMA-

- Clean operative site with NS^{xvi}.
- Clean remaining kshar at perianal region.^{xvii}
- Packing done with gauze piece
- Apply "T" bandage at operative site^{xviii}
- Change the previous Ksharsutra on every seventh day

Sew

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SOP OF AGNIKARMA

DEFINITION

A Classical para-surgical procedure of producing therapeutic burns on body to cure certain pathological conditions is known as Agnikarma

STANDARD OPERATING PROCEDURE

MATERIAL REQUIREMENT

- PanchdhatuShalaka.
- HaridraChurna
- Ghritkumari (Aloe Vera pulp)
- MudgaYusha
- Antiseptic solution (Povidone iodine)

PURVA KARMA

- Take consent for the procedure and evaluate patient safety for before procedure as per pre procedure checklist
- Prepare GhreetKumariMajja
- Area demarcation for Agnikarma should be done
- Heat the PanchdhatuShalaka up to red hot

PRADHANA KARMA

- Painting of demarcated area for Agnikarma with antiseptic solution.
- Drapping with sterile linen hole sheet to expose only operative area.
- Agnikarma with PanchdhatuShalaka with Bindu Dagdga method leaving 0.5 cm – 1cm gap between two points of Dagdha
- Immediate GhreetaKumariMajja application.

PASHCHAT KARMA

- Dusting of HaridraChurna after Agnikarma over the DagdhaVrana.
- Advice to avoid water contact to DagdhaVrana area for next 24 hours.
- Post procedure evaluation should be written in patient's file


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SOP OF KSHARA KARMA

DEFINITION

Process of Applying Kshara (High pH strong alkaline preparation) on demarcated area is Ksharakarma.

STANDARD OPERATING PROCEDURE: MATERIAL REQUIREMENT

- Sterile Kshara
- Spetula
- Lemon juice
- Honey and Ghee
- Sterile gauze piece and cotton
- Sterile linen hole sheet

PURVA KARMA

- Take consent for the procedure and evaluate patient safety for before procedure as per pre procedure checklist
- Site demarcation should be done
- Prepare the part where kshara karma is proposed for.
- Painting and draping is followed

PRADHANA KARMA

- Expose the area where kshara karma is proposed
- Confirm the site before application of kshara
- Application of Kshara and leave it for 100 matra (75 seconds)

PASHCHAT KARMA

- Rinse the part with lemon juice and Normal Saline respectively
- Application of Shatadhauta Ghritpichu
- Post procedure evaluation should be written in patient's file.


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Revision details:-

- ⁱ R1: Surgical Blade no.11
- ⁱⁱ R1: Scoop
- ⁱⁱⁱ R2: Sinus Forceps
- ^{iv} R3: Awastha of Vranashotha should be evaluated before surgery
- ^v R3: Infiltration of local Anesthetic (Inj. Lignocaine hcl 2%) in small abscesses. Spinal anaesthesia or General anaesthesia is advised as per need
- ^{vi} R2: finger and sinus forceps.
- ^{vii} R1: Lekhan Karma done with scoop
- ^{viii} R1: Nimba Tail or Kshara Taila
- ^{ix} R2: Observe for Ashwakhurvat ananam, unnabhya va skandan (the shape of horse shoe in the raised and arched position).
- ^x R2: Jalouka detaches after completing its feed
- ^{xi} R1: BT-CT
- ^{xii} R3: MRI is advised in complicated fistula.
- ^{xiii} R1: Infiltration of local Anesthetic (Inj. Lignocaine hcl 2%) for only Low anal fistula. If high anal fistula then go for Spinal anaesthesia or General Anaesthesia.
- ^{xiv} R3: If patient have high anal fistula then go for 4 finger dilatation.
- ^{xv} R2: Gentle probing should be done to avoid false track formation
- ^{xvi} R1: NS
- ^{xvii} R2: Clean remaining kshar at perianal region
- ^{xviii} R3: Apply "T" bandage at operative site


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