



CSMSS
Ayurved Mahavidyalaya & Rngnalaya
Kanchanwadi, Aurangabad



Details of availability of emergency kits and mock drill carried out to manage complication.

1. Uttarbasti

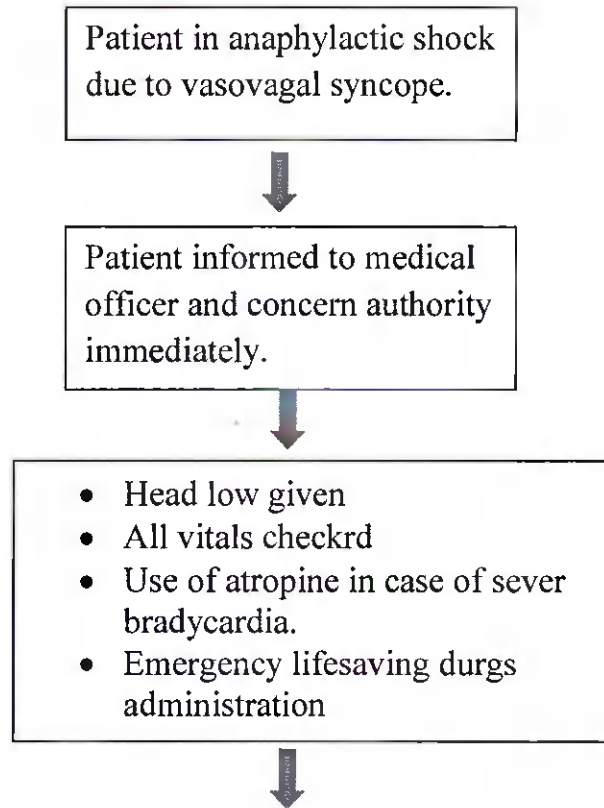
Possible complications.

- Patient may land in to anaphylactic shock.
- Cervical injury, vaginal injury, uterine wall injury.
- In case of neurogenic shock patient either goes in cardiac arrest or dies or he may recovers fully spontaneously

Emergency drugs available-

- Inj. Atropine
- Inj. Dopamine
- Inj. Dobutamine
- Inj. Phenylephrine
- Inj. Hydrocortisone
- IV fluids like RL, NS etc.

Mock Drill –A. Anaphylactic shock



Rashmi

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- Resuscitation if needed done.
- Extravascular fluid replacement done with RL, NS etc.

2 . Kshar pratisaran/ Yonipichoo

Possible complications-

- patient may land in to Neurogenic shock due to severe pain experienced by him.
- Patient may land in to vasovagal shock sometime.
- Resulting in to sudden Hypotension, Bradycardia, Arrythmia, low cardiac output .

Emergency drugs available-

- Inj. Atropine
- Inj. Norepinephrine.
- Inj. Epinephrine
- Inj. Dopamine.
- Inj. vasopressin
- Inj. Hydrocortisone
- IV fluids like RL, NS etc.

Mock Drill –A. Neurogenic shock

Patient in Neurogenic shock
with sever hypotension



Patient informed to medical
officer and concern authority
immediately.



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- Head low given- Trendelengburge Position
- Immediate administration of IV fluids to correct hypovolemic condition
- Use of vasoconstrictor Drugs like epinephrine, nor epinephrine.
- Use of atropine in case of sever bradycardia
- Use of Steroids if needed



- Resuscitation if needed done.
- Extravascular fluid replacement done with RL, NS etc.

3. Agnikarma

Possible complications-

- While performing *Agnikarma* treatment there may be chances of burn .

Drugs available-

- Antibiotics
- Analgesics.
- Silver sulphadiazine ointment for local application
- Inj.Hydrocortisone
- IV fluids like RL, NS etc.

Mock Drill –A. Neurogenic shock treatment and wound management.



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Patient in Neurogenic shock
due to severe pain



Patient informed to medical
officer and concern authority
immediately.



- Immediate administration of IV fluids to correct hypovolemic condition
- Use of antibiotics.
- Use of Analgesic drugs.
- Use of Steroids if needed



- Management of Burn Wound accordingly.
- Extravascular fluid replacement done with RL, NS etc.



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