

## **CSMSS**

## Ayurved Mahavidyalaya & Rugnalaya



Kanchanwadi, Aurangabad

## DESCRIBE THE ACTIVITIES UNDERTAKEN BY THE INSTITUTION TOWARDS PRACTICE OF VARIOUS TYPES OF ANUSHASTRA

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

#### 1. Raktamokshana

#### Possible complications

- Sever bleeding may happen during *raktamokshana*, in some patients with increase bleeding time or increase clotting time.
- Excessive bleeding may occur in patients taking blood thinning medications like ecosprin etc.
- Patient may land in to hypovolemic shock.
- Sometimes adverse reaction of *jalaukacharana* may take place due to application of *savish jalauka*.

### Emergency drugs available-

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

## Mock Drill –A. Hypovolumic shock

Patient in hypovolemic shock due to excessive.



Patient informed to medical officer and concern authority immediately.







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- Head low giver
- Immediate cortol of bleeding
- Bleeding tried to stop immediately with compression or the available measures.



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

#### B. Adverse reaction of Jalukavacharana

 In case of adverse reaction of Jalauka, immediate management done with medicines like anti allergic and sometime use of steroids.

#### 2. Ksharkarma

Possible complications-

- While change of *Ksharsutra* in case of fistula in ano at minor ot level 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.

• Symptoms are like dizziness, nausea, vomiting, blank stares, fainting, increased sweating, anxiety, pale skin.





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 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.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.



- 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 need



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- · 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.

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.

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

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