Promotion of seasonal Panchakarma and Life style modification through Ayurveda

Protocols incorporating Principles of Ayurveda and their implementation

Ayurveda addresses the fact that each & every of us is unique and therefore each and every illness is unique because we are all affected by it in different ways. Modern medicine has grouped together common sets a symptom to form a title for an illness or condition, enabling doctors to cure, or fix the issue "en masse" but rarely are the reasons behind why that person become — to suffer in the first instance are addressed.

We educate the individuals approaching panchakarma Unit about incorporating Ayurved principles into our everyday lives can prevent us from becoming ill. Or help us to look for the root of the problem, we have & address this issue, rather than relying on a cure, it empowers us to make choices that nurture our wellbeing and boost our vitality.

We educate people to maintain the balance of Doshas or healthy or health & to prevent the disease Daily regimen, Dietic rules, Seasonal rules and mental well-being. For treating a disease, we approach the patient by incorporating Shodhan therapy

Panchakarma is the most essential part of Ayurved treatment. It is preventive, preservative, promotive and curative therapy. Ayurved believe in strong relationship between macrocosm and microcosm states that the seasonal changes will influence biological system resulting into and the accumulation and aggravation of particular Dosha in particular season, by following the above verse. The Department of panchakarma promoting various activities where we counsel the patient and educate them about the importance of seasonal panchakarma and their benefits. In this regard we conduct the Vasantika vamana in spring season (March April), Sharad Kale Virechana (October and November) Basti in Varsha rutu. In Winter advice patients the procedures like Abhyanga, Shiro abhyanga, Kati basti etc which are considered as external Snehan procedures.

As global burden of non-communicable diseases is Rapidly increasing, most of such diseases have prevention potential but they are difficult to cure once they really Occur. lifestyle management is the seat of anchor of treatment for Such aliments. for this our department is conducting various camps where we examine various individual and suggest them as those who are prone to develop lifestyle disorders like DM, Dyslipidemia, HTN etc for these Individuals advice timely Panchakarma procedures like Shirodhara, Shirobasti, Matrabasti etc along with Yogasana, Pranayama etc.

- Vamana- Mainly indicated in Kaphaj Vajadhis. Vasant rutu for healthy individual.
- 2. **Virechana** mainly for pitta, raktaja vyadhis, in conditions like kushatha, amlapitta, vandhyatwa etc. & in sharad rutu.
- 3. Basti- It is used for cleansing the intestine by administering medicated oils & Decoction for pacifying the excess vata & in varsha rutu.
- 4. Nasya- It involves administration of medicated oil through the nose to cleanse accumulated dosha's from the head and neck region.
- 5. Raktamokshana It is procedure to cleanse blood & remove toxins from the same. Life style management is the Seat of anchor of aliments for this we Swastha Yojana where we concentrate on mental as well as physical wellbeing of individuals. Total 60 individual are taking benefits of this Scheme.

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Kaumarya Panchakarma

Department of Panchakarma io collaboration with Department of kaumaryabhrutya treating various patients (Kaumara) of cerebal palsy, ADHD, Delayed milestone etc by opting the various panchakarma procedures like abhyanga, Shashtika shalipinda sweda, matra basti etc. We also conduct procedures like and sadyovamana in Bala shwasa roga individuals. Jalaukavacharana is advised is raktamokshana procedure indicated in paediatric age group in a skin diseases.

We conduct various school health programs where we educate children about various Panchakarma procedures their uses & importance.



SOP FOR CORONA Pandemic. (30/09/2020)

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Guidelines for safe Panchakarma practice in context of COVID 19

Introduction

1. Panchakarma is a high-risk speciality in the context of current COVID 19 pandemic because of the expulsion of body fluids like saliva, nasal fluids, vomitus, blood etc. These guidelines are aimed to minimize the spread of COVID-19 infection among Panchakarma doctors, technicians, attendants, nursing staff, support staff, patients and their attendants.

2. These comprise:

 Guidelines, Protocols and SOPs for Panchakarma Theatre (facilities) for Panchakarma procedures.

Protocols and SOP for OPD:

- Consultation at OPD is done to identify patients who may require undergoing any kind of Panchakarma procedures.
- Any patient who needs to undergo any Panchakarma procedure shall be tested for fitness by means of physical examination, lab. Investigations etc.
- One patient at a time in examination room, if possible, without attendant.
- All patients entering Panchakarma OPD should be screened using screening proforma (Annexure 1) and thermal screening. The objective of screening is to minimize exposure to staff and to patients. Screening is to be done to pre-screen all patients before entry and to minimize entry to the OPD premises. Patients having symptoms suggestive of Covid 19 should be seen in a separate "Covid-19 screening Clinic" and not in the Panchakarma OPD. This is so that other patients in the Panchakarma OPD are safe. Also, personnel manning the Covid-19 Screening Clinic will have a different level of PPE.
- Regulate entry of patients and ensure use of NIOSH certified N-95 facemask, hand hygiene and social distancing, as per the standard protocols advocated from time to time by M/o Health & Family Welfare.
- Panchakarma OPD room should be well-ventilated.

- Panchakarma doctors should wear Level I SITRA certified PPE kit, NIOSH certified N-95 facemask, surgical gown, thin gloves, goggles/ face shield) in OPD chamber and therapy room.
- Doctor should change gloves if they get soiled and refrain from eating/drinking during
 - OPD timings however standard guidelines for OPD consultation and patient examination should be followed as per M/o health and family welfare.
- Doctor should encourage patients and their attendant to follow-up with teleconsultation based upon his/her assessment.

Protocols and SOP for IPD:

- Only asymptomatic COVID-19 negative patients will be admitted in the IPD.
- Panchakarma ward is supposed to be COVID free and the aim of guidelines is to maintain it as a COVID free ward as possible.
- Patients should be essentially screened for COVID 19 before admission (refer to Annexure 1). Post COVID-19 infected patients after turning negative should be taken up and admitted for Panchakarma after 2 weeks.
- Only one patient's care-taker may be allowed at a time who is also screened like above.
- Patient's care-taker should comply to strict precaution for COVID 19 like wearing of NIOSH certified N-95 facemask, face shield, frequent hand washing and social distancing.
- Ensure that appropriate hand washing facilities and hand-hygiene supplies are available.
- Hand sanitization and social distancing posters must be displayed in multiple areas of ward.
- Keep the patient's personal belongings to a minimum.
- Examination instruments should be properly sterilized as per standard sterilization protocol after every use.
- Ward should be with minimum furniture for proper cleaning and disinfection.

Visitors should not be allowed.

- Corridors and rooms should be well-ventilated.
- Distancing of at least 2 meters in between patient beds is mandatory. Additional distance if feasible is desirable as care taker may also be accompanying patients.

Rational use of Personal Protective Equipment 1.4,5

Health care personnel	1- NIOSH certified N-95 facemask
•	2- Health care worker -level I SITRA
	certified PPE kit/surgical gown, NIOSH
	certified N-95 facemask.
Patients and care taker	Gown & triple layer NIOSH certified N-95
	facemask, face shield.
Examination of patients/ cleaning the	HCP(doctor, nursing staff and technical
ward (aerosol generating)	assistant) should use level II PPE (cover
	all gown, NIOSH certified N-95 facemask,
	gloves, goggle and face shield)

- (i) For rational use of PPEs, the following guidelines issued by the Ministry may be referred:
 - $\underline{https://www.mohfw.gov.in/pdf/GuidelinesonrationaluseofPersonalProtectiveEquipme} \\ \underline{nt.pdf}$
- (ii) Additional guidelines on rational use of Personal Protective Equipment: https://www.mohfw.gov.in/pdf/UpdatedAdditionalguidelinesonrationaluseofPersonal ProtectiveEquipmentsettingapproachforHealthfunctionariesworkinginnonCOVID19are as.pdf

Practices for environmental cleaning in healthcare facilities

Cleaning environmental surfaces with water and detergent and applying commonly used hospital disinfectants (such as sodium hypochlorite) is an effective and sufficient procedure. Regular cleaning is required to keep ward and Panchakarma theatre COVID-free.

Cleaning agents and disinfectants 1,2,6

- a) Freshly prepared 1% Sodium Hypochlorite can be used as a disinfectant for cleaning and disinfection.
- b) Leaving the solution for a contact time of at least 10 minutes is recommended.
- c) Ward cleaning should be done with detergent with water or 1% Sodium Hypochlorite.
- d) High contact surfaces (door and door knobs) should be regularly cleaned with 1% Sodium Hypochlorite.
- e) Nursing station, examination room need more frequent cleaning than other areas of ward.
- f) Alcohol (e.g. isopropyl 70% or ethyl alcohol 70%) can be used to wipe down surfaces where the use of bleach is not suitable, e.g. metals.
- g) Sensitive equipment's (BP apparatus, thermometer, stethoscope and knee hammer) should be wiped with 70% alcohol-based rub/spirit swab before each patient contact.
- i) Examination Equipment (heat stable)-(autoclave), chemical (formaldehyde) vapor, and dry heat (e.g., 320° F for 2 hours)
- j) The wash rooms in the Panchakarma facility should be sanitized every 2 hourly.

For more details (like frequency of cleaning / different items)-(https://www.mohfw.gov.in/pdf/Guidelinesondisinfectionofcommonpublicplacesincludin goffices.pdf)

Guidelines for Panchakarma theatre for practitioners during COVID-19 pandemic

Objectives - To escalate the preparedness towards reinstating Panchakarma theatre (PT) practices in the wake of COVID-19 pandemic.

- No COVID positive patient to undergo Panchakarma procedures.
- Major Panchakarma procedures are associated with very high transmission risk of COVID-19 due to the following factors.
 - a. Upper aero digestive tract is the post of entry, nidus and exit route for the Novel
 Corona Virus.

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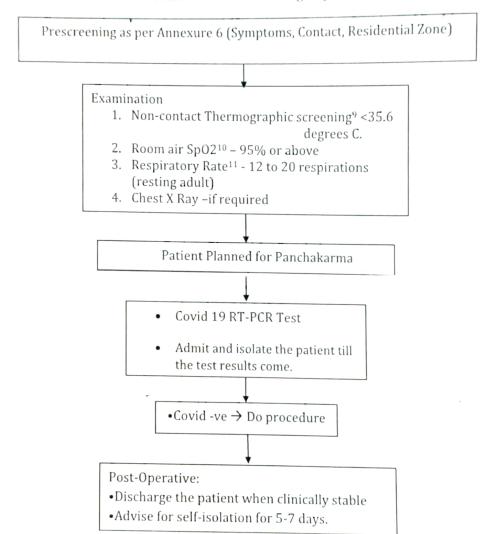
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- b. High droplet and aerosol generation during the procedures like Vamana, nasya, kavala, gandusha etc.
- c. Prolonged aerosolization during and following prolonged Panchakarma procedures.

Pre-Operative Screening and COVID-19 Testing Paradigm7

This flow chart to be considered for non-emergency cases



Modifications in PT set-up and personnel protection

 Minimum required number of personnel (i.e., Doctors/students, therapist, nurses, technicians) should enter the procedure room in a timely manner.

- Minimal required material (preferably disposable) should be used for each intervention.
- At the end of each intervention all disposable materials must be disposed of properly and all surfaces as well as electro-medical devices/panchakarma equipments accurately cleaned and disinfected as per BMW guidelines.
 (https://www.aiims.edu/images/pdf/BMW-Book%20final.pdf;
 https://covid.aiims.edu/biomedical-waste-management-disinfection-cleaning-in-covid-19-areas/)
- SITRA certified PPE must be removed and disposed off outside the PT in dedicated doffing areas.
- All procedures not physically related to the patient (i.e., clinical and procedural documentation) must be performed outside the PT.
- Ensure proper sanitization after every karma.

 (https://www.mohfw.gov.in/pdf/Guidelinesondisinfectionofcommonpublicplacesincludingoffices.pdf)

Raoji Avuned College Solapur.

PPE Guidelines^a

Risk Definition	Patient Requirements	PT Personnel Requirements
Risk Definition HIGH RISK PATIENTS COVID-19 positive COVID-19 suspect OTHER PATIENTS Negative on RT-PCR 96 hours before procedure Asymptomatic till 14 days isolation after admission		PT Personnel Requirements As per the guidelines for COVID positive patients Aerosol Generating Procedures * NIOSH certified N-95 facemask and eye protection (maybe appropriate to reuse); Must use face shield (to allow reuse) Impermeable gown or gown with plastic apron Double gloves Powered Air-Purifying Respirator (PARP) for prolonged procedures to
		minimize fogging and physician comfort Non-Aerosol Generating Procedure NIOSH certified N-95 facemask Goggles or face shield Gown Gloves

Procedure Specific Guidelines

Procedure	COVID Specific Modifications	
Major procedures:	These procedures are considered as major because of the	
• Vamana	expulsion of body fluids like saliva, nasal fluids, vomitus,	
Virechana	intestinal fluids, blood etc.	
Nirooha Basti		
Anuvasana Basti	Annexure -2, 3, 4, 5, 6 respectively	
Nasya		
Raktamokshana		
Minor procedures:	These procedures are considered as minor because of	
External basti – Janu	the non-expulsion of body fluids and are done with	
basti, Kati basti etc.	contact to skin.	
Moordhni taila	Guidelines similar to annexure 2 to 6, keeping in mind	
Abhyanga	the standard guidelines for discarding of materials used	
Udvartana	for the procedures.	
All swedana – bashpa	• Annexure – 7	
sweda, nadi sweda,	*oral mucous expulsion occurs in this but can be done at home so	
pootali sweda, pariseka	patient can be educated on the first day regarding its practice and	
sweda, upanaha etc.	then onwards it can be practiced at home. The oil or any other	
Kavala*	liquid or medicine used should be collected in a separate vessel	
• Gandusha*	and sould be boiled properly for sufficient amount of time to disinfect and let it self-cool. After that it can be disposed in drain.	
• Dhoomapana	distillect and let it sen cook their diagnostics	

Note:

- Local govt. guidelines have to be followed.
- These guidelines are dynamic and may be updated from time to time as required.

Recommendations:

- Prophylaxis Ayurvedic medicine for therapists.
- Follow general guidelines for health care providers.

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- 3. What are the symptoms of COVID-19?

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Annexures

Annexure-1: Screening proforma

• Symptoms

Table 1-Symptoms for COVID-19 infection (presence of any of these signs & symptoms)

Most common symptoms:	Less common symptoms:	Serious symptoms:
Fever	Aches and pains	Difficulty breathing or
Dry cough	Sore throat	shortness of breath
Tiredness	Diarrhoea	Chest pain or pressure
	• Conjunctivitis	 Loss of speech or
	Headache	movement
	Loss of taste or smell	• SPO ₂ <90
	A rash on skin, or	
	discolouration of fingers	
	or toes	

- a) Are you suffering from fever/cough/difficulty in breathing
- b) Are you residing in a containment zone
- c) Have you been in contact with a confirmed COVID-19 case in last 14 days
- d) Are you using AROGYA SETU app

SOP of Vamana karma during COVID 19

A standard operating procedure (SOP) is a step-by-step instruction compiled to help workers carry out complex routine operations. SOPs aim to achieve efficiency, quality output and uniformity of performance.

Background: Effective infection prevention and control is central to providing high quality health care for patients and a safe working environment for those that work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spread of infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent.(1)

POORVA KARMA:

- 1. Examination of patient.
- 2. Collection of materials required.
- 3. Preparation of Patient (Snehana, Abhyanga, Swedana)

1. Examination of patient

- Before the treatment plan of Vamana, physician should examine the patient to ascertain the fitness for Vamana.
- Perform hand hygiene by means of hand rubbing or hand washing.
 - Hand Washing (40-60 sec): It includes eight steps. Wet hands and apply soap;
 rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet.(2)
 - o **Hand rubbing** (20–30 sec): apply enough product to cover all areas of the hands; rub hands until dry.(2)

- Wear NIOSH certified N-95 face mask, gloves and surgical cap during patient's examination.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette.(2)

Disinfection of Examination premises, in patient ward and therapy room:

- Use adequate procedures for the routine cleaning and disinfection of
 examination premises, in patient ward and other frequently touched surfaces.
- Method: Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth (or microfiber) saturated with 1% sodium hypochlorite solution.(1)
- Spot and clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry.(1)
- The therapy bed/chair should be disinfected along with the changing of disposable bed/chair spread after each patient.

2. Collection of material required

- NIOSH certified N-95 face mask, NABL/SITRA certified PPE kit, face shield, surgical gloves, sanitizer should be collected.
- Measuring glass, towel, bowl, glasses, spoon and vessels for collecting vomitus should be cleaned with soap/detergent and water. (1)
- Instruments like sphygmomanometer, stethoscope, thermometer, weighing machine should be cleaned and disinfected using 1% sodium hypochlorite or alcohol based disinfectants.(2).
- Properly sterilized oil for massage should be collected in a disinfected vessel.
- Drugs used for swedana should be collected in the disinfected vessel.
- Properly disinfected cone for dhoomapana should be collected.

3. Preparation of the Patient

Snehapana

- During snehapana, physician should wear gloves and NIOSH certified N-95 face mask.
- The sneha dravya should be made luke warm in a disinfected vessel.
- Abhyanga and Bashpa swedana
 - The therapist(s) should wear gloves, full body gown, NIOSH certified N-95 face mask and face shield while performing abhyanga and swedana.
 - The gloves must be changed after each patient.
 - \circ The Abyanga table and Bashpa Sweda cubical should be disinfected using 1% sodium hypochlorite or alcohol based disinfectants. (1)

PRADHANA KARMA:

- 1. Instructions to the patient.
- 2. Vamana procedure

1. Instructions to the patient.

 Patient is advised to attend all his/her natural urges and wash the part and hands with soap before Vamana.

2. Vamana procedure

- The physician and therapist(s) should wear SITRA certified PPE kit to protect skin and prevent soiling of clothing during activities that are likely to generate splashes or sprays of blood, body fluids, secretions or excretions.
- Gloves should be changed in between tasks and procedures on the same patient after contact with potentially infectious.material.
- Vamana Aaushadha Prayoga: Prepared Vamana Ausadha should be prepared and administered in clean and disinfected vessels.
- During procedure of Vamana, prevent skin and mucous membrane exposure and contamination of clothing.
- In case of non-occurrence of Vegas, after giving Vamana medication mechanical induction of vegas should be done with Kamala nala etc. instead of fingers.
- One assistant doctor should remain outside the room to perform the documentation work.

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- \bullet $\;$ The vomitus should be collected in the vessel containing 1% sodium hypochlorite.
- Therapist should remove PPE kit soon after therapy and perform hand hygiene.
- The gloves should be removed after use, before touching non-contaminated items and surfaces, and before going to another patient. Perform hand hygiene immediately after removal.

PASCHAT KARMA:

 The spittoon should be prefilled with 1% sodium hypochlorite solution in which the patient should spit the mucus etc. after dhoomapana.

Waste disposal:

- Ensure safe waste management.
- Treat waste contaminated with blood, blood fluids, secretions and excretions as clinical waste and dispose it, in accordance with local regulations.(2)(3)
- Discard disposable items and Infectious waste in a Bio-Hazard bag. The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is also decontaminated with 1% sodium hypochlorite and should be given to the hospitals to dispose of according to their policy. Change cotton mop water containing disinfectant after each cleaning cycle. Do not place cleaning cloth back into the disinfectant solution after using it to wipe a surface.(1)
- Sterilization of reusable equipment (2)
 - Clean, disinfect and reprocess reusable equipment appropriately before use with another patient.

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Annexure - 3

SOP of Virechana karma during COVID-19

A standard operating procedure (SOP) is a step-by-step instruction compiled to the help workers carry out complex routine operations. SOPs aim to achieve, quality output and uniformity of performance.

Background: Effective infection prevention and control is central in providing high quality health care for patients and a safe working environment for those that work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spread of infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent.(1)

POORVAKARMA:

- 1. Examination of patient
- 2. Collection of materials required
- 3. Preparation of patient

1. Examination of patient:

- ❖ Before the treatment plan of the Virechana physician should examine the patient to ascertain fitness for Virechana.
- Properly wash the hand before patient's examination.
- ❖ As per the guidelines of WHO(2)

- Hand washing (40-60 sec): wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet.
- Hand rubbing (20–30 sec): apply enough product to cover all areas of the hands; rub hands until dry.
- Wear NIOSH certified N-95 face mask and gloves during patient's examination.
- Wear face shield to protect mucous membranes of the eyes, nose and mouth.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette.

Disinfection of therapy room:

- Use adequate procedures for the routine cleaning and disinfection of therapy room and frequently touched surfaces.
- Method: Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth (or microfiber) saturated with a 1% sodium hypochlorite solution. (1)
- Spot and clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry. (1)
- On the basis of availability of number of toilets, patient should be admitted for Virechana.

2. Collection of materials required:

- NIOSH certified N-95 face mask, full body gown, face shield, surgical gloves, surgical cap, sanitizer should be collected.
- Snehana dravya, Virechana dravya, Virechanopaga dravya, oils for Abhyanga and drugs for Swedana should be collected in disinfected vessels.
- Measuring glass, towel, bowl, glasses, spoon, should be cleaned with soap/detergent and water.
- ❖ Instruments like sphygmomanometer, stethoscope, thermometer, weighing machine should be cleaned and disinfected using 1% sodium hypochlorite or alcohol based disinfectants.(1)

3. Preparation of patient:

Snehana karma:

- During snehapana physician should wear NIOSH certified N-95 face mask and gloves.
- Snehadravya should be made luke warm in disinfected vessels.

Abhyanga and Bashpaswedana:

- The therapist(s) should wear gloves, full body gown, NIOSH certified N-95 face mask and face shield while performing abhyanga and swedana.
- Gloves must be changed after each patient.
- Properly disinfected, Abhyanga table and Bashpa sweda cubical, with 1% sodium hypochlorite or alcohol-based disinfectants should be used.

PRADHANA KARMA:

(1) Instructions to the patient:

❖ Before entering into Virechana room make sure that patient is wearing mask and patient is to be advised to attend his/her natural urges before virechana karma.

(2) Administration of the virechana aushadha:

- Physician should wear gloves, NIOSH certified N-95 face mask, surgical cap and face shield.
- Prepared Virechana aushadh should be administered in clean and disinfected vessels.
- After administration of virechana aushadh, patient is to be advised take rest in the ward.
- The gloves should be removed after use, before touching non-contaminated items and surfaces and before attending another patient. Perform hand hygiene immediately after removal of gloves.
- Disinfected hot water bag and hot water glass should be provided to the patient if needed.

PASCHAT KARMA:

Waste disposal:

- After completion of Virechana karma of each patient, toilet should be disinfected.
- Ensure safe waste management.
- Discard single use item properly.
- Discard disposable items and Infectious waste in a Bio-Hazard bag. The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is also decontaminated with 1% sodium hypochlorite and should be given to the hospitals to dispose of according to their policy. Change cotton mop water containing disinfectant after each cleaning cycle. Do not place cleaning cloth back into the disinfectant solution after using it to wipe a surface.(1)

Sterilization of reusable equipment.

• Clean, disinfect and reprocess reusable equipment appropriately before use with another patient.(2)

References:

- $\frac{https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOP for transporting}{as uspector confirmed case of COVID19.pdf}$
- 2. https://www.who.int/docs/default-source/documents/health-topics/standard-precautions-in-health-care.pdf?sfvrsn=7c453df0_2

Annexure - 4

SOP of Basti karma during COVID -19

A standard operating procedure (SOP) is a step-by-step instruction compiled to help workers carry out complex routine operations. SOPs aim to achieve efficiency, quality output and uniformity of performance.

Background: Effective infection prevention and control is central to providing high quality health care for patients and a safe working environment for those that work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spreading the infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent. (1)

POORVAKARMA:

- 1) Examination of Patient.
- 2) Collection of materials required.
- 3) Preparation of Basti dravya.
- 4) Preparation of Patient.

1) Examination of Patient-

 Before the treatment plan of Basti, physician should examine the patient to ascertain the fitness.

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Perform hand hygiene by means of hand rubbing or hand washing.

- O Hand washing (40–60 sec): It includes eight steps. Wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet.(2)
- Hand rubbing(20-30 sec): Apply enough product to cover all areas of the hands; rub hands until dry.(2)
- Wear NIOSH certified N-95 face mask, gloves and surgical cap during patient's examination.
- Wear face shield to protect mucous membranes of the eyes, nose and mouth during examination.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette. (2)

Disinfection of the therapy room-

 Use adequate procedures for the routine cleaning and disinfection of therapy room and other frequently touched surfaces in the panchakarma theatre.

> Method:

- Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth (or microfiber) saturated with 1% sodium hypochlorite solution (1).
- Spot and clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry. (1)
- On the basis of availability of number of toilets, patient should be posted for Basti. After completion of Basti Karma of each patient, toilet should be disinfected.

2) Collection of materials required-

- NIOSH certified N-95 face mask, full body gown, gloves, face shield and sanitizer should be collected.
- Instruments used in basti such as khalva yantra, basti netra, basti putaka, glycerine syringe, red rubber catheter etc. should be properly disinfected and kept ready.

- After proper washing of utensils with soap/ detergent and water, materials like madhu, saindhava lavana, taila, churna for the preparation of kwatha, kalka and prakshepaka dravya should be collected.
- Instruments like sphygmomanometer; stethoscope should be cleaned and disinfected using 1% sodium hypochlorite or alcohol-based disinfectants (2).
- Properly sterilized oil for Abhyanga and drugs for Swedana should be collected in disinfected vessels.
- Abhyanga table and Nadi swedana yantra should be disinfected with 1% sodium hypochlorite solution. (1)

3) Preparation of Basti dravya-

- In properly disinfected utensils like mortar and pestle, measuring jar and other necessary equipment, kalka and kwatha dravya should be prepared.
- In the mortar, Madhu, Saindhavalavana, Taila, Kalka and Kwathadravya and prakshepa dravya (if any) should be mixed and prepared dravya should be collected in a clean and disinfected vessel.

4) Preparation of Patient-

 The therapist(s) should wear gloves, full body gown, NIOSH certified N-95 face mask and face shield while performing abhyanga and swedana.

PRADHANA KARMA:

- 1) Instructions to the patient.
- 2) Administration of Basti

1) Instructions to the patient-

- Before entering into Basti room ensure that patient is wearing mask.
- Patient is to be advised to attend all his/her natural urges and wash the part and hands properly with soap before receiving Basti.

2) Administration of Basti-

- Therapist should wear full body gown to protect skin and prevent soiling of clothing during procedures that are likely to generate splashes or sprays of blood, body fluids, secretions or excretions.
- Gloves should be changed in between tasks and procedures on the same patient after contact with potentially infectious material. (2)
- Gloves should be removed after use, before touching non-contaminated items and surfaces, and before attending another patient. Perform hand hygiene immediately after removal. (2)
- Basti Dravya should be made lukewarm in disinfected vessel and Basti Netra must be autoclaved or a disposable basti netra should be used for each patient.
- A single used polythene bags should be cleaned and disinfected before each basti.
- While administering the Basti, prevent skin and mucous membrane exposures and contamination of clothing.
- Therapist should remove soiled gown as soon as possible and perform hand hygiene. (2)
- After completion of whole procedure, patient should take bath with soap and warm water.

PASCHAT KARMA:

Waste Disposal:

- Ensure safe waste management. (2)
- Treat waste contaminated with blood, body fluids, secretions and excretions as clinical waste, in accordance with local regulations. (2)(3)
- Discard disposable items and infectious waste in a Bio-Hazard bag. The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is also decontaminated with 1% sodium hypochlorite and should be given to the hospitals to dispose of according to their policy. Change cotton mop water containing disinfectant after each cleaning cycle. Do not place cleaning cloth back into the disinfectant solution after using it to wipe a surface. (1)

Disinfection of reusable instruments:

• Clean, disinfect and reprocess reusable equipment appropriately before use with another patient. (2)

REFERENCES:

- $1. \ \ \, \underline{https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOPfortransporting} \\ ng a suspector confirmed case of COVID 19.pdf$
- 2. https://www.who.int/docs/default-source/documents/health-topics/standard-precautions-in-health-care.pdf?sfvrsn=7c453df0_2
- 3. https://www.aiims.edu/images/pdf/BMW-Book%20final.pdf;
 https://covid.aiims.edu/biomedical-waste-management-disinfection-cleaning-in-covid-19-areas/

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SOP of Nasya karma during Covid-19

A standard operating procedure (SOP) is a step-by-step instruction compiled to help workers carry out complex routine operations. SOPs aim to achieve efficiency, quality output and uniformity of performance.

Background: Effective infection prevention and control is central to providing high quality health care for patients and a safe working environment for those that work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spread of infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent.

POORVA KARMA:

- 1. Examination of the patient.
- 2. Collection of materials required.
- 3. Preparation of Patient (Abhyanga, Swedana)

1. Examination of the patient

- Before the treatment plan of Nasya, physician should examine the patient to acertain the fitness of Nasya.(all types).
- Perform hand hygiene by means of hand rubbing or hand washing.

- Hand Washing (40-60 sec): It includes eight steps. Wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet. (2)
- Hand rubbing (20-30 sec): apply enough product to cover all areas of the hands; rub hands until dry.(2)
- Wear surgical mask, gloves, surgical cap, face shield during patient's examination to protect oneself from any possible infection.
 - Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette. (2)

Disinfection of therapy room:

- Use adequate procedures for the routine cleaning and disinfection of therapy room and other frequently touched surfaces.
- Method: Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth (or microfiber) saturated with a 1% sodium hypochlorite solution. (1)
- Spot and clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry. (1)
- The procedure table should be disinfected after every patient.

2. Collection of materials required

- ➤ NIOSH certified N-95 face mask, full body gown, hood, face shield, surgical gloves, sanitizer should be procured.
- In case of nasya where liquids are used- nasya yantra (gokarna yantra), spitting pots, bowl, spoon should be washed with soap/detergent and preferably hot water.
 (1)
- ➤ In case of Nasya where powders are used- Nasya yantra (Blower), Straw should be disinfected with 1% Sodium Hypochlorite. (1)
- Properly disinfected cone for Dhoomapana and utensils; sterile cotton, sterile gauze etc. should be collected.

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- > Instruments like sphygmomanometer, stethoscope and thermometer should be disinfected after examining each patient.
- Properly sterilized oil for massage should be collected in a disinfected vessel.
- ➤ Enough paper napkins or tissue papers should be made available for staff(s) as well patient during therapy sessions. Avoid using cloth napkins.

3. Preparation of the Patient

- Patient is advised to attend all his/her natural urges and wash the face, neck and hands with soap before Nasya.
- Patient is advised to wear disinfected garments during therapy.
- The Abhyanga table and Nadi yantra should be disinfected using 1% sodium hypochlorite or alcohol-based disinfectants. (1)
- During Abhyanga and Nadi swedana, the therapist should sanitize their hands properly and wear gloves. He/she should not touch their body or face during the procedure.
- After Abhyanga the therapist(s) must completely sanitize their hands immediately, before they proceed for Pradhana Karma.

PRADHANA KARMA:

- The physician should wear SITRA certified PPE kit/ full body gown to protect skin
 and prevent soiling of clothing during nasya karma as patient expels nasal and oral
 fluid.
- The gloves must be changed after each patient.
- Therapist (s) should wear NIOSH certified N-95 face mask, gloves and face shield during procedure.
- Gloves should be changed in between tasks and procedures on the same patient after contact with potentially infectious material.
- During procedure of Nasya, prevent skin and mucous membrane contact and contamination of clothing.

- In case of Pradhamana nasya medicine is delivered by blowing through mouth which is not suitable in covid-19 condition, thus a mechanical instrument like a rubber bulb may be used.
- Rubber bulb should be removed and disinfected after use in every patient.
- If Gokarna yantra is used, autoclave it after each nasya procedure.
- The spittoon should be prefilled with 1% sodium hypochlorite solution in which the patient should spit the mucus etc. after instillation of Nasya medicine.
- Therapist should remove SITRA certified PPE kit as soon as possible and perform hand hygiene.
- The gloves should be removed and disposed after use, before touching noncontaminated items and surfaces, and before going to another patient. Perform hand hygiene immediately after removal.

PASCHAT KARMA:

• The spittoon should be prefilled with 1% sodium hypochlorite solution in which the patient should spit the mucus etc after dhoomapana.

Waste disposal:

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- Ensure safe waste management.
- Treat waste contaminated with blood, body fluids, secretions and excretions as clinical waste, in accordance with local regulations. (2)(3)
- Discard disposable items and Infectious waste in a Bio/Hazard bag. The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is also decontaminated with 1% sodium hypochlorite and should be given to the hospitals to dispose of according to their policy. Change cotton mop water containing disinfectant after each cleaning cycle. Do not place cleaning cloth back into the disinfectant solution after using it to wipe a surface. (1)

Sterilization of reusable equipment (2)

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• Clean, disinfect and reprocess reusable equipment appropriately before use with another patient.

REFERENCES:

- 1. https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOPfortransportinga-suspectorconfirmedcaseofCOVID19.pdf
- 2. https://www.who.int/docs/default-source/documents/health-topics/standard-precautions-in-health-care.pdf?sfvrsn=7c453df0_2
- 3. https://www.aiims.edu/images/pdf/BMW-Book%20final.pdf;
 https://covid.aiims.edu/biomedical-waste-management-disinfection-cleaning-in-covid-19-areas/

Innexure - 6a

SOP of Raktamokshana - Siravedha during Covid -19

A standard operating procedure (SOP) is a step-by-step instruction compiled to the help workers carry out complex routine operations. SOPs aim to achieve, quality output and uniformity of performance.

Background: Effective infection prevention and control is central toproviding high quality health care for patients and a safe working environment for those that work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spread of infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent.(1)

POORVAKARMA:

- 1. Examination of patient
- 2. Collection of materials required
- 3. Preparation of patient

1. Examination of patient:

- ❖ Before the treatment plan of the Siravedha, physician should examine the patient for fitness.
- Properly wash the hand before patient's examination.
- ❖ As per the guidelines of WHO, (2)

- Hand washing (40-60 sec): wet hands and apply soap; rub all surfaces; rinse
 hands and dry thoroughly with a single use towel; use towel to turn off faucet.
- o Properly sanitize the hands in between patient's examination if necessary.
- **Hand rubbing** (20–30 sec): apply enough product to cover all areas of the hands; rub hands until dry.
- Wear face mask and gloves during patient's examination.
- Wear sterile garments during patient's examination.
- Face shield to protect mucous membranes of the eyes, nose, and mouth.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette.

Disinfection of Examination premises and inpatient ward:

- Use adequate procedures for the routine cleaning and disinfection of examination premises and frequently touched surfaces.
- Method: Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth saturated (or microfiber) with a 1% sodium hypochlorite solution. (1)
- Spot and clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry. (1)
- The beds of the in patients must be kept at the distance of minimum 1 meter and with no bed facing opposite to each other.
- The bed should be disinfected daily.
- The bed spread and pillow cover should be changed daily.

2. Collection of material required

- Face mask, face shield, surgical gloves, sanitizer should be collected.
- Measuring glass, towel, bowl, gauze piece, swabs, bandages, tourniquet, scalp vein (No. 20) and kidney tray should be collected.
- The vessels which are (is) used for the collection of the blood should be washed with soap/detergent/chlorine dioxide solution and water.

- Instruments like sphygmomanometer, stethoscope and thermometer should be cleaned and disinfected using 1% sodium hypochlorite or alcohol based disinfectants.
- The sterilized oil for massage will be collected in disinfected vessel.
- Drugs used for Swedana should be collected in the disinfected vessel.

3. Preparation of patient:

Abhyanga and Nadiswedana:

- Therapist should wear gloves, face mask and face shield during Abhyanga and Nadiswedana.
- o Gloves must be changed after each patient.
- Table and chair should be disinfected using 1% sodium hypochlorite or alcohol based disinfectants.

PRADHANA KARMA:

1. Instructions to the patient:

Before entering the room make sure that patient is wearing mask.

2. Procedure of Siravedha

- Physician and one therapist should wear PPE kit to protect skin and prevent soiling of clothing during activities that are likely to generate splashes or sprays of blood.
- The blood should be collected in the vessel containing the 1% sodium hypochlorite.
- ❖ The gloves should be removed after use, before touching non-contaminated items and surfaces and before attending another patient. Perform hand hygiene immediately after removal.

PASCHAT KARMA:

Sterile cotton, gauze, bandage roll should be used for bandaging.

Waste disposal:

- > Ensure waste safe management.
- Discard single use item properly.
- The gauze piece, bandages, blood bags will be discarded in the Yellow bag.(3)
- Scalp vein should be discarded in White bag.(3)
- The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is
 also decontaminated with 1% sodium hypochlorite and should be given to the
 hospitals to dispose of according to their policy. Change cotton mop water
 containing disinfectant after each cleaning cycle. Do not place cleaning cloth back
 into the disinfectant solution after using it to wipe a surface.(1)

Sterilization of reusable equipment

- Clean, disinfect and reprocess reusable equipment appropriately before use with another patient.(2)
- Room should be disinfected after each procedure.

REFERENCES:

- $1. \ \ \, \underline{https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOP for transporting} \\ \underline{asuspector confirmed case of COVID19.pdf}$
- 2. https://www.who.int/docs/default-source/documents/health-topics/standard-precautions-in-health-care.pdf?sfvrsn=7c453df0_2
- 3. https://www.aiims.edu/images/pdf/BMW-Book%20final.pdf

Annexure - 6b

SOP of Raktamokshana - Jaloukavcharana during Covid-19

A Standard operating procedure (SOP) is a step-by-step instruction compiled to the help workers carry out complex routine operations. SOPs aim to achieve, quality output and uniformity of performance.

Background: Effective infection prevention and control is central to providing high quality health care for patients and a safe working environment for those who work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spread of infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent.(1)

POORVAKARMA:

- 1. Examination of patient
- 2. Collection of materials required
- 3. Preparation of patient
- 4. Preparation of Jalauka:

1. Examination of patient:

❖ Before the treatment plan of the Jalaukavacharana, physician should examine the patient to ascertain the fitness.

Properly wash the hand before patient's examination.

- ❖ As per the guidelines of WHO, (2)
 - o **Hand washing** (40–60 sec): wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet.
 - Properly sanitize the hands in between patient's examination if necessary.
 - Hand rubbing (20-30 sec): apply enough product to cover all areas of the hands; rub hands until dry.
- Wear face mask and gloves during patient's examination.
- Wear sterile garments during patient's examination.
- Face shield to protect mucous membranes of the eyes, nose, and mouth.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette.
 - Disinfection of therapy room:
 - Use adequate procedures for the routine cleaning and disinfection of therapy room and frequently touched surfaces.
 - Method: Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth saturated (or microfiber) with a 1% sodium hypochlorite solution.(1).
 - Spot and clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry.(1).

2. Collection of material required

- Face mask, face shield, surgical gloves, sanitizer should be collected.
- Measuring glass, towel, bowl, gauze piece, swabs, bandages, saindhava, Haridra powder,Sarshapa powder,lancet, scalp vein needle kidney tray should be collected.
- The vessels which are used for the collection of the blood should be washed with soap/detergent/chlorine dioxide solution and water.

- Instruments like sphygmomanometer, stethoscope, thermometer should be cleaned and disinfected using 1% sodium hypochlorite or alcohol based disinfectants.
- Properly sterilized oil for massage should be collected in disinfected vessel.
- Drugs used for Swedana should be collected in the disinfected vessel.

3. Preparation of patient:

Abhyanga and Nadiswedana:

- Therapist should wear gloves, face mask and face shield during Abhyanga and Nadiswedana.
- Gloves must be changed after each patient.
- Table should be disinfected using 1% sodium hypochlorite or alcohol based disinfectants.

4. Preparation of Jalauka:

- Drugs (haridra, sarshapa) which are used during procedure should be collected in disinfected vessels.
- One jalauka should be collected in disinfected vessel.

PRADHANA KARMA:

1. Instructions to the patient:

Before entering the room make sure that patient is wearing mask.

2. Procedure of Jalaukavacharana:

- Physician and therapist(s) should wear PPE kit to protect skin and prevent soiling of clothing during activities that are likely to generate splashes or sprays of blood.
- The blood should be collected in the vessel containing the 1% sodium hypochlorite.
- The gloves should be removed after use, before touching non-contaminated items and surfaces and before attending another patient. Perform hand hygiene immediately after removal.

PASCHAT KARMA:

Sterile cotton, gauze, bandage roll should be used for bandaging.

Waste disposal:

- Ensure waste safe management.
- Discard single use item properly.
- The gauze piece, bandages, blood bags will be discarded in the Yellow bag.(3)
- The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is also decontaminated with 1% sodium hypochlorite and should be given to the hospitals to dispose of according to their policy. Change cotton mop water containing disinfectant after each cleaning cycle. Do not place cleaning cloth back into the disinfectant solution after using it to wipe a surface. (1)
- Jalauka which is used in one patient should be kept in a separate labelled container (vessel) for 15 days and then discarded. Clean, disinfect and reprocess reusable equipment appropriately before use with another patient.(2)Room should be disinfected after each procedure.

REFERENCES:

- ${\bf 1.} \ \, \underline{https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOP for transporting} \\ \underline{asuspector confirmed case of COVID 19.pdf}$
- 2. https://www.who.int/docs/default-source/documents/health-topics/standard-precautions-in-health-care.pdf?sfvrsn=7c453df0_2
- 3. https://www.aiims.edu/images/pdf/BMW-Book%20final.pdf

Annexure - 7

Common SOP of Minor procedures during COVID-19

A standard operating procedure (SOP) is a step-by-step instruction compiled to help workers carry out complex routine operations. SOPs aim to achieve efficiency, quality output and uniformity of performance.

Background: Effective infection prevention and control is central to providing high quality health care for patients and a safe working environment for those that work in healthcare settings. Implementation of good infection control practices help to minimize the risk of spread of infection to patients and staff. Pre-hospital care need to have an infection prevention program to monitor for HAIs (Healthcare Associated Infections) and prevent the spread of diseases/infection.

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions, non-intact skin, and mucous membranes may contain transmissible infectious agents. These set of measures are intended to be applied to the care of all patients in all healthcare settings, regardless of the suspected or confirmed presence of an infectious agent. (1)

POORVAKARMA:

- 1. Examination of Patient.
- 2. Collection of materials required.
- 3. Preparation of medicines.
- 4. Preparation of Patient.

1. Examination of Patient-

- Before the treatment plan, physician should examine the patient to ascertain the fitness.
- Perform hand hygiene by means of hand rubbing or hand washing.

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- ➤ Hand washing (40-60 sec): It includes eight steps. Wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet (2)
- ➤ Hand rubbing(20-30 sec): Apply enough product to cover all areas of the hands; rub hands until dry.(2)
- Wear NIOSH certified N-95 facemask, gloves and surgical cap during patient's examination.
- Wear face shield to protect mucous membranes of the eyes, nose, and mouth during examination.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette. (2)

Disinfection of therapy room-

 Use adequate procedures for the routine cleaning and disinfection of therapy room and other frequently touched surfaces.

Method:

- Disinfect (damp wipe) all horizontal, vertical and contact surfaces with a cotton cloth (or microfiber) saturated with a 1% sodium hypochlorite solution. (1)
- Spot clean walls (when visually soiled) with disinfectant-detergent and windows with glass cleaner. Allow contact time of 30 minutes and allow air dry. (1)
- The therapy bed/chair should be disinfected along with the changing of disposable bed/chair spread after each patient.

2. Collection of materials required-

- NIOSH certified N-95 facemask, full body gown, gloves, face shield and sanitizer should be collected.
- Materials used for various procedures such as black gram flour, spoon, vessels, cotton cloth, gauze, shirodhara yantra, shirobasti cap, medicinal leaves, sand, etc. should be collected and properly disinfected.

- Medicines like different oils, ghee, decoctions, butter milk, milk etc. should be appropriately disinfected and collected in properly cleaned utensils by soap/detergent.
- Instruments like sphygmomanometer, stethoscope should be cleaned and disinfected using 1% sodium hypochlorite or alcohol-based disinfectants(2).
- Sterilized Oil for Abhyanga and drugs for Swedana should be collected in autoclaved vessels.
- Therapy table and Nadi swedana yantra should be disinfected with 1% sodium hypochlorite solution. (1)

3. Preparation of medicines-

 Medicine preparation area should be properly disinfected. Prepare the required medicines as per the standard preparation procedure in properly disinfected vessels and utensils by properly disinfected instruments and equipments.

4. Preparation of Patient-

- Patients are advised to bring their own soap and towel for usage after the therapy and to take their belongings with them.
- The disposable linen may be used as per requirement.

PRADHANA KARMA:

1. Instructions to the patient.

- Before entering into therapy room instruct patient to wear mask.
- Advice patient to attend all his/her natural urges if any and wash the part and hands properly with soap before the procedure.

2. Administration of Procedure-

 Therapist should wear full body gown/PPE kit (SITRA certified), NIOSH certified N-95 face mask and gloves during the procedure to protect skin and prevent soiling of

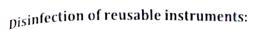


- clothing during activities that are likely to generate splashes, body fluids, or excretions.
- Gloves should be changed in between tasks and procedures on the same patient
 after contact with potentially infectious material. (2) Remove gloves after use,
 before touching non-contaminated items and surfaces, and before going to another
 patient. Perform hand hygiene immediately after removal. (2)
- Dough used should be afresh every time for all patients.
- Medicines should be made lukewarm if required and poured in disinfected vessels.
- During administration of procedure, prevent skin and mucous membrane exposures and contamination of clothing.
- Check the temperature of pottali, oils etc. by contactless thermographic scan before using on patient to avoid any burn injuries and to maintain uniform temperature (40°C 45 °C) throughout procedure.
- Therapist should remove soiled gown as soon as possible and perform hand hygiene. (2)
- After completion of whole procedure, patient should take bath with soap and warm water.

PASCHAT KARMA:

Waste Disposal:

- Decoctions/pottali/oils/other medicines should not be re-used again.
- Ensure safe waste management. (2)
- Treat waste contaminated with blood, body fluids, secretions and excretions as clinical waste, in accordance with local regulations. (2)(3)
- Discard disposable items and infectious waste in a Bio-Hazard bag. The interior is sprayed with 1% sodium hypochlorite. The bag is tied and exterior is also decontaminated with 1% sodium hypochlorite and should be given to the hospitals to dispose of according to their policy. Change cotton mop water containing disinfectant after each cleaning cycle. Do not place cleaning cloth back into the disinfectant solution after using it to wipe a surface. (1)



• Clean, disinfect and reprocess reusable equipments appropriately before use with another patient. (2)

REFERENCES:

- $1. \ \ \, \underline{https://www.mohfw.gov.in/pdf/StandardOperatingProcedureSOPfortransportinga}\\ suspectorconfirmed case of COVID 19.pdf$
- 2. https://www.who.int/docs/default-source/documents/health-topics/standard-precautions-in-health-care.pdf?sfvrsn=7c453df0_2
- 3. https://www.aiims.edu/images/pdf/BMW-Book%20final.pdf;
 https://covid.aiims.edu/biomedical-waste-management-disinfection-cleaning-in-covid-19-areas/)

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