

AIIA/SHALAKYA/SOPMANUAL/01

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ALL INDIA INSTITUTE OF AYURVEDA NEW DELHI

DEPARTMENT OF SHALAKYA TANTRA

KRIYAKALP PROCEDURE SOP

Doc No: AIIA/SHALAKYA/SOP MANUAL/01

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MANUAL REVIEWED BY		
MANUAL APPROVED BY	Prof. Dr Abhimanyu Kumar, Director	

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करितः पारतीय आयुर्वेव संस्थान
<u>भारतीय आयुर्वेव संस्थान</u>
(आयुर्व मंद्रमत्म, भारत संस्थार)

MINIS TRY OF AYUSH GOVT. OF INDIA MINIS TRY OF AYUSH GOVT. OF INDIA नीतमपुर्ग, सरिता विकार, नई डिस्ती-110076 जिंधारामपुर्ग, सरिता विकार, नई डिस्ती-110076 Gautam Pur., Szilla Vinar, अंक्ष Delhi-110076

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NETRA SEKA

This is the procedure in which the medicaments are poured on closed eyes continuously from the height of 4 Anguli for a specific duration as per the Dosha involved.

Poorva karma (Pre procedure)

- Collect all the pre-cleaned and autoclaved utensils
- · Clean all the required raw drugs and medication as advised
- Explain the procedure to the patient

Conceptual framework for the procedure

Seka is a Chakshushya Kriyakalpa procedure explained in classics. In Sheeta Ritu and in Pitta - Rakta disorders Sheeta Aushadhis should be used. In Ushna Ritu and in Vaata - Kapha disorders lukewarm medicine is to be used.

In this procedure, the medicaments in the form of drops should be instilled from the height of 4 Angula and should be kept in eye for 100 Maatra Kaala followed with Mridu Sweda. Seka has 3 types based on its action. Viz. -

- Snehana - Indicated in Vaataja Netra Vikara. It should be performed for 400 Matra Kaala and during Aparahna with lukewarm Snigdha, Madhura, Amla and Lavana Aushadha.
- Indicated in Pitta and Raktaja Netra Vikara. It should be performed for Ropana 600 Matra Kaala and during Madhyana with Sheeta, Madhura, Tikta Kashaya Aushadha.
- Lekhana - Indicated in Kaphaja Netra Vikara. It should be performed for 200 to 300 Maatrakaala and during Poorvanha. It should be done with lukewarm Katu, Tikta. Kashaya Aushadha.

Seka has 2 types based on medicaments used. Viz. - Ushna and Sheeta.



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ALL INDIA INSTITUTE OF AYURVEDA

DEPARTMENT OF SHALAKYA TANTRA

SOP MANUAL

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DEPARTMENT OF SHALAKYA TANTRA

KARNA NASA GALA EVAM MUKHA ROGA CHIKITSA KRAMA SOP

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Karnapoorana is the procedure in which the medicaments in the form of drops should be instilled from the height of 2 Angula and should be kept in ear canal for 600 to 1000 Maatra Kaala depending upon the dosha followed with Mridu Sweda.

Conceptual framework for the procedure

Karnapoorana is procedure explained in classics. In Sheeta Ritu and in Pitta – Rakta disorders Sheeta Aushadhis should be used. In Ushna Ritu and in Vaata – Kapha disorders lukewarm medicine is to be used.

In this procedure, the medicaments in the form of drops should be instilled from the height of 2 Angula and should be kept in ear canal for 600 to 1000 Maatra Kaala according to dosha involved followed with Mridu Sweda. Karnapoorana can be performed with various forms of oushadhis. Viz. – Taila, Swarasa, Kashaya.

Required Equipments -

Carry Tray

Steel bowel

Cotton Pads (Medium size)

Cotton pads (Small size)

Required Medications & Drugs -

Hot water

- As required

Ear drops

- As advised by consultant



AHA/HRM/DOC 08

Issue date: 18/01/2021

Issue No 1 2/SI No.47

Rev No 02

POLICY & PROCEDURE ON PERSONAL Rev date: 04/01/2021 RECORDS

Ref. NABH standard for Ayurveda Hospitals, April 2016 (2 dedition): HRM/09

ALL INDIA INSTITUTE OF AYURVEDA

POLICY & PROCEDURE ON PERSONAL RECORDS

Doc No: AIIA/HRM/DOC 08

PREPARED BY	Dr Pankaj Kundal, Assistant professor, Shalakya
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POLICY APPROVED BY	Prof (Dr.) Tanuja Manoj Nesari, Director



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POLICY & PROCEDURE ON PERSONAL RECORDS

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4	2 Scope Page No. 3	2.1 Extends to all employees working under the purview of the hospital and includes both permanent and outsourced staff	2.1 Extends to all employees working under the purview of the hospital and includes both permanent and outsourced staff, contractual.		
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POLICY & PROCEDURE ON PERSONAL RECORDS

Rev date 04/01/2021 Rev No 02

Ref: NABH standard for Ayurveda Hospitals, April 2016 (2"dedition): HRM/09

1. PURPOSE

1.1 To maintain the complete record of all the employees of the hospital.

2. SCOPE

2.1 Extends to all employees working under the purview of the hospital and includes both permanent and outsourced staff, contractual.

3. ABREVIATIONS:

- 3.1 NABH: National Accreditation Board for Hospital and Health care providers
- 3.2 AIIA: All India Institute of Ayurveda
- 3.3 HRM: Human Resource Management

4. DEFINITION: Nil

5. RESPONSIBILITY

- 5.1 Administrative Head
- 5.2 Recruitment cell

6. POLICY

6.1 All India Institute of Ayurveda ensures that personal file of all the employees containing staff qualification, disciplinary background and health status are documented and maintained.

7. PROCEDURE

- 7.1 Employees personal Record contains
 - 7.1.1 Employees detail form with photograph
 - 7.1.2 Appointment order photo copy
 - 7.1.3 Employees Bio-data with C.V.
 - 7.1.4 Employees documents supporting his /her Educational Qualification in the order Matriculation Certificate for date of birth, +2 certificate, Degree

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Ref. NABH standard for Ayurveda Hospitals, April 2016 (2 edition): HRM/09

- certificate, Post-Graduation Degree certificate, any other supporting document showing his other professional qualification.
- 7.1.5 Employees past record of any misconduct or negligence in work and any memo issued to him/her is kept in service book.
- 7.1.6 Candidates found medically fit are given appointment letters.
- 7.1.7 The record of medical health is documented in the personal file of an employee.
- 7.1.8 Annual health checkup of all employees so as to assess the level of fitness and record of the same is maintained in the personal file of an employee.
- 7.1.9 Periodic vaccination of all its employees such as vaccination against hepatitis, tetanus is documented in the personal file.
- 7.1.10 The personal file should be periodically updated with respect to training. seminars, workshops attended by the employee.
- 7.1.11 A record of leaves availed by the employee will also be recorded in his service book
- 7.1-12 Appraisal report/ACR is a detailed report relating to the performance of an employee against certain present criteria including the training attended by the concerned employee over the last one year period
- 7.1.13 It is an objective method of evaluating the performance of an employee upon which depends the decision relating to transfer, promotion, increments etc.
- 7.1.14 Besides ACR length of service of the concerned employee is also taken into consideration
- 7.1.15 ACR is also used as a tool for assessing the strength and weakness as well as the potential of the employees



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Ref. NABH standard for Ayurveda Hospitals, April 2016 (2nd edition): HRM/09

8 RECORDS

- 8.1 Personal files of recruitment and other activities
- 8.2 Service Book as per Govt. of India Guidelines

9 REFERENCE

9.1 HRM 9, NABH Guidebook for Ayurveda Hospitals.

10 ANNEXURES: Nil



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Prepared By Dr. Pankaj Kundal Dr. Narayan Bavalatti

Approved By

Prof (Dr.) Tanuja Manoj Nesan,

ALL INDIA INSTITUTE OF AYURVEDA DEPARTMENT OF SHALAKYA TANTRA

SOP MANUAL

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POLICY REVIEWED BY	Dr. Rajagopala S. Additional Medical Superintendent
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Approved By: Prof.(Dr.) Tanuja Manoj Nesari,

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Dr Narayan Bavalatti

Approved By:

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AHA/HRM/DOC 05

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APPRAISAL SYSTEM FOR EVALUATING THE PERFORMANCE OF EMPLOYEES

Rev No : 02

Ref. NABH standard for Ayurveda Hospitals. April 2016 (2nd edition): HRM/05

ALL INDIA INSTITUTE OF AYURVEDA

APPRAISAL SYSTEM FOR EVALUATING THE PERFORMANCE OF EMPLOYEES

Doc No: AIIA/HRM/DOC 05

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REVISED BY		
POLICY REVIEWED BY	Dr. Rajagopala S. Additional Medical Superintendent	
POLICY APPROVED BY	Prof (Dr.) Tanuja Manoj Nesari,Director	

No

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AHA/HRM/DOC 05

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Issue No. 1.2/Sl. No. 44

APPRAISAL SYSTEM FOR EVALUATING THE Rev. date. 04/01/2021 PERFORMANCE OF EMPLOYEES

Rev No. 02

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APPRAISAL SYSTEM FOR EVALUATING THE PERFORMANCE OF EMPLOYEES

Ref. NABH standard for Ayurveda Hospitals. April 2016 (2nd edition): HRM/05

I. PURPOSE

1.1. To provide guideline for appraisal system for evaluating the performance of employees

2 SCOPE:

 Extends to all employees working under the purview of the hospital and includes both permanent and outsourced staff.

3. ABBREVIATION

- 3.1 NABH National Accreditation board for Hospitals and Health Care Providers
- 3.2 AIIA: All India Institute of Ayurveda
- 3.3. HRM: Human Resource Management

4 DEFINITION

4.1. Appraisal: The act of estimating or judging the nature or value of something or someone.

5 RESPONSIBILITIES

5.1 Internal Quality Assurance Cell, Head of the departments

6 PERFORMANCE MANAGEMENT POLICY:

6.1 All India Institute of Ayurveda ensures that all the employees of the hospital are evaluated for their performances periodically and apprised based on their performances.



AHA/HRM/DOC 09

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ASSESSING, ANALYZING AND EVALUATION OF THE CREDENTIALS AND PRIVILEGING OF MEDICAL AND PARAMEDICAL PROFESSIONAL

Rev date 04/01/2021 Rev No :02

Ref: NABH standard for Ayurveda Hospitals. April 2016 (2[™]edition):

ALL INDIA INSTITUTE OF AYURVEDA

ASSESSING, ANALYZING AND EVALUATION OF
THE CREDENTIALS AND PRIVILEGING OF
MEDICAL AND PARAMEDICAL PROFESSIONAL

Doc No: AHA/HRM/DOC 09

PREPARED & REVISED BY	Dr. Pankaj Kundal, Assistant professor, Shalakya Tantra	
POLICY REVIEWED BY	Dr. Rajagopala S. Additional Medical Superintendent	
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ALL INDIA INSTITUTE OF AYURVEDA

AIIA/HRM/DOC 09

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ASSESSING, ANALYZING AND EVALUATION OF THE CREDENTIALS AND PRIVILEGING OF MEDICAL AND PARAMEDICAL PROFESSIONAL

Rev No :02

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3	Title Page	Approved by Prof Abhimanyu Kumar	Changed as Approved by Prof.(Dr.) Tanuja Manoj Nesari		
4	7.2 Privileging Page no 4	Addition. 7.2.4	The education, registration, training, and experience of doctors, nursing staff is documented and updated periodically and privileges are given as per their experience and it is to be reviewed every 2 yearly		
5.	7.2 Re-privileging Page no 4	Addition 7.2.5	Re-privileging should be conducted at least every 3 years in a timely manner prior to the expiry of current privileges		



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ASSESSING, ANALYZING AND EVALUATION OF THE CREDENTIALS AND PRIVILEGING OF MEDICAL AND PARAMEDICAL PROFESSIONAL

Rev No :02

Ref. NABH standard for Ayurveda Hospitals. April 2016 (2"edition).

- PURPOSE: To assess, analyze and evaluate the credentials and privileging of medical and paramedical professional permitted to provide patient care without supervision.
- 2. SCOPE: Extends to medical, paramedical and Panchakarma Technician staff.
- 3 ABBREVIATIONS NIL
- 4. DEFINITION
 - 4.1. Privileging: It is a process for authorizing all medical professionals to admit and treat patients and provide other clinical services commensurate with their qualification and skills.
 - 4.2 Credentialing The process of obtaining, verifying and assessing the qualification of a health care provider.
- 5. RESPONSIBILITIES. Medical Superintendent, respective heads of department
- 6. POLICY:
 - 6.1. All India Institute of Ayurveda ensures that
 - 6.1.1. Medical professionals and nursing professionals are given credentials and are privileged.
 - 6.1.2. The credentials (education, training and experience) of Panchakarma Therapist & Paricharaka are collected, verified and evaluated.
- Procedure

7.1. Credentialing:

- 7.1.1. The AYUSH Department has defined pre-requisite qualification for each and every position to be filled
- 7.1.2. The criteria includes the basic educational qualification required for the each and every position, experience if any required registration with professional bodies (such as various state and central registration authorities, NCI etc.), special qualification in terms of training etc.
- 7.1.3 Credentialing policy is followed during filling any vacant post either by external recruitment or by internal recruitment



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ASSESSING, ANALYZING AND EVALUATION OF THE CREDENTIALS AND PRIVILEGING OF MEDICAL AND PARAMEDICAL PROFESSIONAL REV No.:

Rev date 04/01/2021 Rev No: 02

Ref. NABH standard for Ayurveda Hospitals. April 2016 (2"edition)

7.1.4 Every employee submits attested copy of their credentials.

7.2 Privileging:

- 7.2.1 Based on the qualification, training, experience, registration and specialization area of medical and paramedical professional, they will be authorized to provide health care services in their respective areas.
- 7.2.2. A documented policy is in place to define the areas of privilege of medical professional of their own and in the other departments of the organization.
- 7.2.3 A newly inducted faculty should and must undergo training under observation until his independent privileges are ascertained. There will be a procedure in place to achieve this.
- 7.2.4 The education, registration, training, and experience of doctors, nursing staff is documented and updated periodically and privileges are given as per their experience and it is to be reviewed every 2 yearly.
- 7.2.5 Re-privileging should be conducted at least every 3 years in a timely manner prior to the expiry of current privileges.

7.3. Verification of Credentials

- 7.3.1 Primary Source Verification. This entails obtaining verification of specific credentials elements directly from the source.
- 7.3.2 Elements to be verified. A critical component of the credentialing process is the verification of information provided by the applicant. The following information should be verified on the initial application.
 - 1 Medical School
 - 2 Internship residency training
 - 3. Fellowship training
 - 4. Board certification
 - 5 Hospital affiliations



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ASSESSING, ANALYZING AND EVALUATION OF THE CREDENTIALS AND PRIVILEGING OF MEDICAL AND PARAMEDICAL PROFESSIONAL

Ref. NABH standard for Ayurveda Hospitals. April 2016 (2"dedition)

Sources of Verification

Credential Element	Acceptable Primary Source
Medical education	Medical College
Internship	Facility where training was completed/Director
Residency	Facility where training was completed/Director of Training program
Fellowship	Facility where training was completed/Director of Training program
Licensure state in which physician (provider) practices	State Board of Medicine or other appropriate State Board
Licensure - other states in which physician (provider) holds held license	State Board of Medicine or other appropriate State Board
Board Certification	Specialty board conferring certification
Hospital membership	Hospital
Academic appointments	Chairman of the Department

8. RECORDS:

- 8 | Personal file of the employee
- 8.2 Service book of the employee

9 REFERENCE:

9 | HRM-10, 11 & 12, NABH standard for Ayurveda Hospitals April 2016 (2" edition)

to ANNEXURE: Nil