

**Journal for the syllabus of Ayurvedacharya ( B.A.M.S.)**

**Third Professional**

**Name of the Student :-**

**Name of the College :-**

**Roll Number :-**

**NAME OF THE COLLEGE ..........………………………………..…………………**

**AFFILIATED TO**

**GUJARAT AYURVED UNIVERSITY, JAMNAGAR**

**Department of Swasthavritta and Yoga**

**-: CERTIFICATE :-**

This is to certify that Mr./Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_student of IIIrd professional year has satisfactorily performed the practicals of Swasthavritta and Yoga subject in two academic terms, from \_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ under our supervision.

Date :-

Place :-

Head of the Department

Signature of theTeacher/s

**GUJARAT AYURVED UNIVERSITY, JAMNAGAR**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_College**

**INDEX**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr.  no. | Name of the Practical | Practical No. | Date | Page No. |
| 1 | Visit to Water Filter Plant and Supply System |  |  |  |
| 2 | Visit to Sewage Treatment Unit |  |  |  |
| 3 | Visit to Dairy |  |  |  |
| 4 | Visit to Leprosy Centre |  |  |  |
| 5 | Visit to Industrial Unit |  |  |  |
| 6 | Visit to Rural Ayurvedic Dispensary |  |  |  |
| 7 | Visit to Primary Health Centre |  |  |  |
| 8 | Visit to Maternal and Child health Centre (MCHC) & Family Welfare Centre (FWC) |  |  |  |
| 9 | Visit to Naturopathy Center |  |  |  |
| 10 | Pratimarsha Nasya (Errhine) |  |  |  |
| 11 | Anjana (Collyrium) |  |  |  |
| 12 | Abhyanga (Unctuous massage) |  |  |  |
| 13 | Gandusha - Kavala (Mouth filling-Gargle) |  |  |  |
| 14 | Prayogika Dhumapana (Medicated Smoking) |  |  |  |
| 15 | Udvartana (Scrubbing) |  |  |  |
| 16 | Basti-Enema (Nisargopachara) |  |  |  |
| 17 | Mrullepattika (Mud pack) |  |  |  |
| 18 | Mrullepa (Mud Paste) |  |  |  |
| 19 | Atapa Snana (Sun bath) |  |  |  |
| 20 | Mardana (Massage) |  |  |  |
| 21 | Bashpa Snana (Steam bath) |  |  |  |
| 22 | Pada-Hasta Snana (Foot- Arm bath) |  |  |  |
| 23 | Udara Jala Pattika (Abdominal Water Pack) |  |  |  |
| 24 | Vishramana (Relaxation) |  |  |  |
| 25 | Asana- (1) |  |  |  |
| 26 | (2) |  |  |  |
| 27 | (3) |  |  |  |
| 28 | (4) |  |  |  |
| 29 | (5) |  |  |  |
| 30 | (6) |  |  |  |
| 31 | Shatkarma : (1) Neti Kriya |  |  |  |
| 32 | (2) Dhauti Kriya |  |  |  |
| 33 | (3) Trataka Kriya |  |  |  |
| 34 | (4) Kapalabhati Kriya |  |  |  |
| 35 | Pranayama- (1) Nadishodhana |  |  |  |
| 36 | (2) Suryabhedana |  |  |  |
| 37 | (3) Ujjayi |  |  |  |
| 38 | (4) Shitali |  |  |  |
| 39 | (5) Sitkari |  |  |  |
| 40 | (6) Bhastrika |  |  |  |
| 41 | (7) Bhramari |  |  |  |
| 42-47 | Case Sheets (6) |  |  |  |
| 48-52 | Health Survey Forms (5) |  |  |  |

**Signature of Student Signature of Teacher/s Signature of HoD**

**1. Proforma for visit to Water Filter Plant and Supply System**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

11 **विवेचनम्** (Critical Remarks) :

1. **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**2. Proforma for visit to Sewage Treatment Unit**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

1. **विवेचनम्** (Critical Remarks) :

12 **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**3. Proforma for visit to Dairy**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

11 **विवेचनम्** (Critical Remarks) :

1. **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

4. Proforma for visit to Leprosy Centre

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

1. **विवेचनम्** (Critical Remarks) :

12 **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**5. Proforma for visit to Industrial Unit**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

11 **विवेचनम्** (Critical Remarks) :

1. **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**6. Proforma for visit to Rural Ayurvedic Dispensary**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

1. **विवेचनम्** (Critical Remarks) :
2. **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**7. Proforma for visit to Primary Health Centre**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

1. **विवेचनम्** (Critical Remarks) :
2. **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**8. Proforma for visit to Maternal and Child Health Centre (MCHC) & Family Welfare Centre (FWC)**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

11 **विवेचनम्** (Critical Remarks) :

1. **सूचनानि** (Suggestions) :

13 **विशेष** (Special Mention) :

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**9. Proforma for visit to Naturopathy Centre**

1. **विषय** (Subject) :
2. **नगरम्** (City) :
3. **स्थानम्** (Locality) :
4. **कार्यक्षेत्रम्** (Field/Area of Work) :
5. **निरीक्षण तिथि** (Date of Visit) : **समय** (Time) :
6. **निरीक्षणोद्देश:**(Aim of Visit) :
7. **निर्देशक** (Name of Guide/ Teacher) :
8. **विषयस्थान वर्णनम्** (Description of the Site) :
9. **स्वास्थ्यरक्षा प्रबंध** (Arrangement for health Precautionary Measures) :

**(अ) अपेक्षित** (Desired) :

**(आ) उपलब्ध** (Available) :

10 **स्वास्थ्यरक्षा संबन्धित उपकरणानां शुद्धिकरण विधि :**

Method of Cleaning/Sterilization of place/equipments:

1. **विवेचनम्** (Critical Remarks) :

12 **सूचनानी** (Suggestions) :

13 **विशेष** (Special Mention) :

****

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**10. Proforma for Practical of Health Preservative / Promotive Daily Routine (Dinacharya) – Pratimarsha Nasya (Errhine)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **आयुर्वेदीय** (Ayurvedic Aspect) :
10. **आधुनिक** (Modern Aspect) :
11. **विशेष** (Special Mention) :

****

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**11. Proforma for Practical of Health Preservative / Promotive Daily Routine (Dinacharya) – Anjana (Collyrium)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **आयुर्वेदीय** (Ayurvedic Aspect) :
10. **आधुनिक** (Modern Aspect) :
11. **विशेष** (Special Mention) :

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**12. Proforma for Practical of Health Preservative / Promotive Daily Routine (Dinacharya) – Abhyanga (Unctuous Massage)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **आयुर्वेदीय** (Ayurvedic Aspect) :
10. **आधुनिक** (Modern Aspect) :
11. **विशेष** (Special Mention) :

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**13. Proforma for Practical of Health Preservative / Promotive Daily Routine (Dinacharya) – Gandusha - Kavala (Mouth filling - Gargle)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **आयुर्वेदीय** (Ayurvedic Aspect) :
10. **आधुनिक** (Modern Aspect) :
11. **विशेष** (Special Mention) :

****

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**14. Proforma for Practical of Health Preservative / Promotive Daily Routine (Dinacharya) – Prayogika Dhumrapana (Medicated Smoking)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **आयुर्वेदीय** (Ayurvedic Aspect) :
10. **आधुनिक** (Modern Aspect) :
11. **विशेष** (Special Mention) :

****

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**15. Proforma for Practical of Health Preservative / Promotive Daily Routine (Dinacharya) – Udvartana (Scrubbing)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **आयुर्वेदीय** (Ayurvedic Aspect) :
10. **आधुनिक** (Modern Aspect) :
11. **विशेष** (Special Mention) :

****

**आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**16. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Basti - Enema**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**17. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Mrullepattika (Mud Pack)**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**18. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Mrullepa (Mud Paste) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**19. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Atapa Snana (Sun Bath) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**20. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Mardana (Massage) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**21. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Bashpa Snana (Steam Bath) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**22. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Pada-Hasta Snana (Foot-Arm Bath) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**23. Proforma for Practical of Nisargopchara (Naturopathic)**

**Procedure - Udara Jala Pattika (Abdominal Water Pack) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**24. Proforma for Practical of Nisargopchara (Naturopathic) Procedure - Vishramana (Relaxation) )**

1. **कर्मनाम** (Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **कर्ता** (Performer) :
4. **उपयोक्ता :** **वय :** **लिंगम् :**

Name of the Volunteer: Age : Sex :

1. **तिथि** (Date) : **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम** (Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :
7. **लाभम्** (Benefits) :
8. **शारीरक्रियात्मक प्रभावा:** (Physiological Action of the benefits) :
9. **निसगोर्पेचारीय (Naturopathic Concept):**

b) **आयुर्वेदीय** (Ayurvedic Aspect) :

c) **आधुनिक** (Modern Aspect) :

16. **विशेष** (Special Mention) :

****

**आलोचक (Teacher**) **विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**25. Proforma for Practical of Asana (Yogic Posture)**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **आसनवर्ग:** (Type of Asana) :
2. **संज्ञा** (Name of Asana) :
3. **संज्ञा हेतु** (Reason for naming) :
4. **निर्देशक** (Name of Guide / Teacher) :
5. **कर्ता : वय : लिंगम् :**

Performer: Age: Sex:

1. **तिथि** (Date): **समय** (Time):
2. **आसनविधि**(Procedure of Asana with related breathing technique) :

1. **आसन योग्यायोग्या:** (Indications and Contraindication for the Asana) :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr.no. | Parameters | Indications | Contra indications |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) |  |  |

1. **लाभम्**(Benefits) :

**a. संस्थानत:** (As per systems) :

**b. दोषत:** (As per Dosha) :

**c. यौगिक** (As per Yoga) :

1. **शारीरक्रियात्मक प्रभावा:** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :

* 1. **आयुर्वेदीय** (Ayurvedic Aspect) :
  2. **आधुनिक** (Modern Aspect) :

1. **विशेष**  (Special meation) :

12 **सूचनानि** (Suggestions) :  **कारणम्** (Reason) :

** आलोचक** (Teacher) **विद्यार्थी** (Student)

**Note :- Please add extra page/s if required**

**26. Proforma for Practical of Asana (Yogic Posture)**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **आसनवर्ग:** (Type of Asana) :
2. **संज्ञा** (Name of Asana) :
3. **संज्ञा हेतु** (Reason for naming) :
4. **निर्देशक** (Name of Guide / Teacher) :
5. **कर्ता : वय : लिंगम् :**

Performer: Age: Sex:

1. **तिथि** (Date): **समय** (Time):
2. **आसनविधि**(Procedure of Asana with related breathing technique) :

1. **आसन योग्यायोग्या:** (Indications and Contraindication for the Asana) :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr.no. | Parameters | Indications | Contra indications |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) |  |  |

1. **लाभम्**(Benefits) :

**a. संस्थानत:** (As per systems) :

**b. दोषत:** (As per Dosha) :

**c. यौगिक** (As per Yoga) :

1. **शारीरक्रियात्मक प्रभावा:** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :

* 1. **आयुर्वेदीय** (Ayurvedic Aspect) :
  2. **आधुनिक** (Modern Aspect) :

1. **विशेष**  (Special meation) :

12 **सूचनानि** (Suggestions) :  **कारणम्** (Reason) :

** आलोचक** (Teacher) **विद्यार्थी** (Student)

**Note :- Please add extra page/s if required**

**27. Proforma for Practical of Asana (Yogic Posture)**

**3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **आसनवर्ग:** (Type of Asana) :
2. **संज्ञा** (Name of Asana) :
3. **संज्ञा हेतु** (Reason for naming) :
4. **निर्देशक** (Name of Guide / Teacher) :
5. **कर्ता : वय : लिंगम् :**

Performer: Age: Sex:

1. **तिथि** (Date): **समय** (Time):
2. **आसनविधि**(Procedure of Asana with related breathing technique) :

1. **आसन योग्यायोग्या:** (Indications and Contraindication for the Asana) :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr.no. | Parameters | Indications | Contra indications |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) |  |  |

1. **लाभम्**(Benefits) :

**a. संस्थानत:** (As per systems) :

**b. दोषत:** (As per Dosha) :

**c. यौगिक** (As per Yoga) :

1. **शारीरक्रियात्मक प्रभावा:** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :

* 1. **आयुर्वेदीय** (Ayurvedic Aspect) :
  2. **आधुनिक** (Modern Aspect) :

1. **विशेष**  (Special meation) :

12 **सूचनानि** (Suggestions) :  **कारणम्** (Reason) :

** आलोचक** (Teacher) **विद्यार्थी** (Student)

**Note :- Please add extra page/s if required**

**28. Proforma for Practical of Asana (Yogic Posture)**

**4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **आसनवर्ग:** (Type of Asana) :
2. **संज्ञा** (Name of Asana) :
3. **संज्ञा हेतु** (Reason for naming) :
4. **निर्देशक** (Name of Guide / Teacher) :
5. **कर्ता : वय : लिंगम् :**

Performer: Age: Sex:

1. **तिथि** (Date): **समय** (Time):
2. **आसनविधि**(Procedure of Asana with related breathing technique) :

1. **आसन योग्यायोग्या:** (Indications and Contraindication for the Asana) :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr.no. | Parameters | Indications | Contra indications |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) |  |  |

1. **लाभम्**(Benefits) :

**a. संस्थानत:** (As per systems) :

**b. दोषत:** (As per Dosha) :

**c. यौगिक** (As per Yoga) :

1. **शारीरक्रियात्मक प्रभावा:** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :

* 1. **आयुर्वेदीय** (Ayurvedic Aspect) :
  2. **आधुनिक** (Modern Aspect) :

1. **विशेष**  (Special meation) :

12 **सूचनानि** (Suggestions) :  **कारणम्** (Reason) :

** आलोचक** (Teacher) **विद्यार्थी** (Student)

**Note :- Please add extra page/s if required**

**29. Proforma for Practical of Asana (Yogic Posture)**

**5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **आसनवर्ग:** (Type of Asana) :
2. **संज्ञा** (Name of Asana) :
3. **संज्ञा हेतु** (Reason for naming) :
4. **निर्देशक** (Name of Guide / Teacher) :
5. **कर्ता : वय : लिंगम् :**

Performer: Age: Sex:

1. **तिथि** (Date): **समय** (Time):
2. **आसनविधि**(Procedure of Asana with related breathing technique) :

1. **आसन योग्यायोग्या:** (Indications and Contraindication for the Asana) :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr.no. | Parameters | Indications | Contra indications |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) |  |  |

1. **लाभम्**(Benefits) :

**a. संस्थानत:** (As per systems) :

**b. दोषत:** (As per Dosha) :

**c. यौगिक** (As per Yoga) :

1. **शारीरक्रियात्मक प्रभावा:** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :

* 1. **आयुर्वेदीय** (Ayurvedic Aspect) :
  2. **आधुनिक** (Modern Aspect) :

1. **विशेष**  (Special meation) :

12 **सूचनानि** (Suggestions) :  **कारणम्** (Reason) :

** आलोचक** (Teacher) **विद्यार्थी** (Student)

**Note :- Please add extra page/s if required**

**30. Proforma for Practical of Asana (Yogic Posture)**

**6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **आसनवर्ग:** (Type of Asana) :
2. **संज्ञा** (Name of Asana) :
3. **संज्ञा हेतु** (Reason for naming) :
4. **निर्देशक** (Name of Guide / Teacher) :
5. **कर्ता : वय : लिंगम् :**

Performer: Age: Sex:

1. **तिथि** (Date): **समय** (Time):
2. **आसनविधि**(Procedure of Asana with related breathing technique) :

1. **आसन योग्यायोग्या:** (Indications and Contraindication for the Asana) :

|  |  |  |  |
| --- | --- | --- | --- |
| Sr.no. | Parameters | Indications | Contra indications |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) |  |  |

1. **लाभम्**(Benefits) :

**a. संस्थानत:** (As per systems) :

**b. दोषत:** (As per Dosha) :

**c. यौगिक** (As per Yoga) :

1. **शारीरक्रियात्मक प्रभावा:** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :

* 1. **आयुर्वेदीय** (Ayurvedic Aspect) :
  2. **आधुनिक** (Modern Aspect) :

1. **विशेष**  (Special meation) :

12 **सूचनानि** (Suggestions) :  **कारणम्** (Reason) :

** आलोचक** (Teacher) **विद्यार्थी** (Student)

**Note :- Please add extra page/s if required**

**31. Proforma for Practical of Shatkarma (Yogic Cleansing Procedure) – 1. Neti Kriya**

1. **कर्मनाम**(Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **आयुर्वेदान्तर्गतकर्म** (Similarity with Ayurvedic Procedure):
4. **उभयोविभेद**Difference) :

**यौगिककर्म** (Yogic Procedure)  **आयुर्वेदान्तर्गतकर्म**(Ayurvedic Procedure)

1. **कर्ता : वय: : लिंगम्** **:**

Performer: Age: Sex:

1. **तिथि** (Date) **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम**(Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :-

1. **लाभम्** (Benefits) :
2. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :
   1. **यौगिक** (Yogic Aspect) :
   2. **आयुर्वेदीय** (Ayurvedic Aspect) :
   3. **आधुनिक** (Modern Aspect) :
3. **सूचनानि (**Suggestions) :
4. **विशेष:** (Special Mention):

** आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**32. Proforma for Practical of Shatkarma (Yogic Cleansing Procedure) – 2. Dhauti Kriya**

1. **कर्मनाम**(Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **आयुर्वेदान्तर्गतकर्म** (Similarity with Ayurvedic Procedure):
4. **उभयोविभेद**Difference) :

**यौगिककर्म** (Yogic Procedure)  **आयुर्वेदान्तर्गतकर्म**(Ayurvedic Procedure)

1. **कर्ता : वय: : लिंगम्** **:**

Performer: Age: Sex:

1. **तिथि** (Date) **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम**(Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :-

1. **लाभम्** (Benefits) :
2. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :
3. **यौगिक** (Yogic Aspect) :
4. **आयुर्वेदीय** (Ayurvedic Aspect) :
5. **आधुनिक** (Modern Aspect) :
6. **सूचनानि (**Suggestions) :
7. **विशेष:** (Special Mention):

** आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**33. Proforma for Practical of Shatkarma (Yogic Cleansing Procedure) – 3. Trataka Kriya**

1. **कर्मनाम**(Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **आयुर्वेदान्तर्गतकर्म** (Similarity with Ayurvedic Procedure):
4. **उभयोविभेद**Difference) :

**यौगिककर्म** (Yogic Procedure)  **आयुर्वेदान्तर्गतकर्म**(Ayurvedic Procedure)

1. **कर्ता : वय: : लिंगम्** **:**

Performer: Age: Sex:

1. **तिथि** (Date) **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम**(Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :-

1. **लाभम्** (Benefits) :
2. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :
3. **यौगिक** (Yogic Aspect) :
4. **आयुर्वेदीय** (Ayurvedic Aspect) :
5. **आधुनिक** (Modern Aspect) :
6. **सूचनानि (**Suggestions) :
7. **विशेष:** (Special Mention):

** आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**34. Proforma for Practical of Shatkarma (Yogic Cleansing Procedure) – 4. Kapalabhati Kriya**

1. **कर्मनाम**(Name of Practical) :
2. **निर्देशक** (Name of teacher/demonstrator) :
3. **आयुर्वेदान्तर्गतकर्म** (Similarity with Ayurvedic Procedure):
4. **उभयोविभेद**Difference) :

**यौगिककर्म** (Yogic Procedure)  **आयुर्वेदान्तर्गतकर्म**(Ayurvedic Procedure)

1. **कर्ता : वय: : लिंगम्** **:**

Performer: Age: Sex:

1. **तिथि** (Date) **समय** (Time) :
2. **उपकरणानि** (Required Equipments) :
3. **द्रव्याणि** (Required Materials/Drugs) :

**द्रव्यनाम**(Name of Material) :  **मात्रा** (Quantity) :

1. **पूर्वकर्म** (Pre procedure) :
2. **प्रधानकर्म** (Main Procedure) :
3. **पश्चात्कर्म** (Post procedure) :
4. **अवलोकनम्** (Observation) :
5. **योग्या:** (Indications) :
6. **अयोग्या:** (Contra Indications) :-

1. **लाभम्** (Benefits) :
2. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :
3. **यौगिक** (Yogic Aspect) :
4. **आयुर्वेदीय** (Ayurvedic Aspect) :
5. **आधुनिक** (Modern Aspect) :
6. **सूचनानि (**Suggestions) :
7. **विशेष** (Special Mention):

** आलोचक (Teacher) विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**35. Proforma for Practical of Pranayama**

**1. Nadishodhana**

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**36. Proforma for Practical of Pranayama**

**2.** Suryabhedana

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**37. Proforma for Practical of Pranayama**

**3. Ujjayi**

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**38. Proforma for Practical of Pranayama**

**4. Shitali**

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**39. Proforma for Practical of Pranayama**

**5. Sitkari**

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**40. Proforma for Practical of Pranayama**

**6. Bhastrika**

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**41. Proforma for Practical of Pranayama**

**7. Bhramari**

1. **प्राणायाम संज्ञा** (Name of Pranayama) :
2. **निर्देशक** (Name of Guide/ Teacher) :
3. **कर्ता** **:** **वय :** **लिंगम् :**

(Performer) : Age : Sex

1. **तिथि** (Date): **समय** (Time) :
2. **प्राणायाम विधि** (Procedure of Pranayama) :

1. **प्राणायाम योग्यायोग्या:** (Indications and Contraindication for the Pranayama) :

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. no.** | **Parameters** | **Indications** | **Contra indication** |
| 1 | **आयुत:** (Age) |  |  |
| 2 | **लिंगत:** (Sex) |  |  |
| 3 | **ऋतुत:** (Season) |  |  |
| 4 | **स्वस्थ्यास्वास्थ्यत:**  (Condition of health) |  |  |
| 5 | **अन्य** (Others) :- |  |  |

7. **लाभम्** (Benefits) :

8. **शारीरक्रियात्मक प्रभावा** (Physiological Action) :

* + - * 1. यौगिक (Yogic Aspect) :
        2. **आयुर्वेदीय** (Ayurvedic Aspect) :
        3. **आधुनिक** (Modern Aspect) :

9. **सूचनानि** (Suggestions) :

10. **विशेष**  (Special Mention):

****

**आलोचक (Teacher)  विद्यार्थी (Student)**

**Note :- Please add extra page/s if required**

**42. स्वस्थ / आतुर वृत्त पत्रक (Proforma for Healthy/Diseased) – (1)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. no.** |  | | **Residence** | C/T/V/IR/F/M/D |
| **Date** |  | | **So. eco. status** | VP/P/M/UM/R/VR |
| **Name** |  | | **Marital Status** | M/UM/W |
| **Age** |  | | **Sex** | M/F/C |
| **Address** |  | | **Edu. Status** | I/P/S/HS/G/PG/Tech./Others |
| **Occupation** |  |
| **Diagnosis** |  |
| **Ph** | **M:** | **O:** | **Chronicity** |  |
| **Result** |  | | | |

**Present Illness:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Symptoms | Before Proce. | After Procedure | | | Physical Parameter | Before Proce. | After  Procedure | | |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
|  |  |  |  |  | Ht. |  |  |  |  |
|  |  |  |  |  | Wt. |  |  |  |  |
|  |  |  |  |  | AC R |  |  |  |  |
|  |  |  |  |  | AC L |  |  |  |  |
|  |  |  |  |  | CC WB |  |  |  |  |
|  |  |  |  |  | CC WOB |  |  |  |  |
|  |  |  |  |  | U AbC |  |  |  |  |
|  |  |  |  |  | M AbC |  |  |  |  |
|  |  |  |  |  | WC |  |  |  |  |
|  |  |  |  |  | HC |  |  |  |  |
|  |  |  |  |  | TC R |  |  |  |  |
|  |  |  |  |  | TC L |  |  |  |  |
|  |  |  |  |  | **Temp.** |  |  |  |  |
|  |  |  |  |  | **Pulse** |  |  |  |  |
|  |  |  |  |  | **Resp.** |  |  |  |  |
|  |  |  |  |  | **B.P.** |  |  |  |  |

Laboratory Tests:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Blood Test** | Before Proce. | After Procedure | | | **Urine Analysis** | Before Proce. | After  Procedure | | |
| **1st Wk.** | **2nd Wk.** | **3rd Wk.** | **1st Wk.** | **2nd Wk.** | **3rd Wk.** |
| Hb |  |  |  |  | Physical |  |  |  |  |
| TC |  |  |  |  | Chemical |  |  |  |  |
| DC |  |  |  |  | Microscopic |  |  |  |  |
| ESR |  |  |  |  | FUS/PPUS |  |  |  |  |
| FBS |  |  |  |  | **Stool Analysis** |  |  |  |  |
| PPBS |  |  |  |  | Physical |  |  |  |  |
| Others |  |  |  |  | Chemical |  |  |  |  |
|  |  |  |  |  | Microscopic |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Practical** | **Procedure/No./**  **Time** | **Before Proce.** | **Result (After Procedure)** | | | | |
| **1st Wk.** | | | **2nd Wk.** | **3rd Wk.** |
| 1. **Dinacharya (Daily Routine):** | | | | | | | |
| (1)Pratimarsha Nasya |  |  |  | | |  |  |
| (2) Anjana |  |  |  | | |  |  |
| (3)Gandoosha-Kavala |  |  |  | | |  |  |
| (4)Prayogika Dhoomapana |  |  |  | | |  |  |
| (5)Abhyanga |  |  |  | | |  |  |
| (6) Udvartana |  |  |  | | |  |  |
| 1. **Asana (Yogic Posture):** | | | | | | | |
| Suryanamaskara |  |  | |  | |  |  |
| (1) Ardhakatichakrasana |  |  | |  | |  |  |
| (2)Padahastasana |  |  | |  | |  |  |
| (3)Ardhachakrasana |  |  | |  | |  |  |
| (4)Trikonasana |  |  | |  | |  |  |
| (5)Swastikasana |  |  | |  | |  |  |
| (6)Gomukhasana |  |  | |  | |  |  |
| (7)Padmasana |  |  | |  | |  |  |
| (8)Vajrasana |  |  | |  | |  |  |
| (9)Bhadrasana |  |  | |  | |  |  |
| (10)Shashankasana |  |  | |  | |  |  |
| (11)Ushtrasana |  |  | |  | |  |  |
| (12)Pashchimottanasana |  |  | |  | |  |  |
| (13)Suptavajrasana |  |  | |  | |  |  |
| (14)Ardhamatsyendrasana |  |  | |  | |  |  |
| (15)Siddhasana |  |  | |  | |  |  |
| (16)Pavanamuktasana |  |  | |  | |  |  |
| (17)Sarvangasana |  |  | |  | |  |  |
| (18)Matsyasana |  |  | |  | |  |  |
| (19)Halasana |  |  | |  | |  |  |
| (20)Chakrasana |  |  | |  | |  |  |
| (21)Shavasana |  |  | |  | |  |  |
| (22)Setubandhasana |  |  | |  | |  |  |
| (23)Bhujangasana |  |  | |  | |  |  |
| (24)Shalabhasana |  |  | |  | |  |  |
| (25)Dhanurasana |  |  | |  | |  |  |
| (26)Makarasana |  |  | |  | |  |  |
| 1. **Pranayama:** | | | | | | | |
| (1)Suryabhedana |  |  | | |  |  |  |
| (2)Ujjayi |  |  | | |  |  |  |
| (3)Shitali |  |  | | |  |  |  |
| (4)Sitkari |  |  | | |  |  |  |
| (5)Bhastrika |  |  | | |  |  |  |
| (6)Bhramari |  |  | | |  |  |  |
| (7)Anuloma-viloma (Nadishuddhi) |  |  | | |  |  |  |
| 1. **Shuddhi Prakriya (Cleansing Procedure):** | | | | | | | |
| (1)Neti |  |  | | |  |  |  |
| (2)Dhauti |  |  | | |  |  |  |
| (3)Kapalabhati |  |  | | |  |  |  |
| (4)Trataka |  |  | | |  |  |  |
| 1. **Nisaropachara (Naturopathy):** | | | | | | | |
| **(1)Prithvi Tattva Chikitsa (Mud therapy)** |  |  | | |  |  |  |
| 1. Mrullepattika (Mud pack) |  |  | | |  |  |  |
| 1. Mruttikanimajjana (Mud bath)/ Mrullepa (Mud Paste) |  |  | | |  |  |  |
| **(2) Jala Tattva Chikitsa (Hydrotherapy)** |  |  | | |  |  |  |
| 1. Snana (Bath) |  |  | | |  |  |  |
| 1. Pattika (Pack) |  |  | | |  |  |  |
| 1. Basti (Enema) |  |  | | |  |  |  |
| **(3)Agni Tattva Chikitsa (Fomentation)** |  |  | | |  |  |  |
| 1. Aatapa sevana   ( Sun bath) |  |  | | |  |  |  |
| 1. Bashpa Snana (Steam bath) |  |  | | |  |  |  |
| **(4)Vayu Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Mardana (Massage) |  |  | | |  |  |  |
| 1. Vishramana (Relaxation) |  |  | | |  |  |  |
| **(5)Akasha Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Upavasa (Fasting) |  |  | | |  |  |  |

|  |
| --- |
| **Recommended Diet:** |
| **Recommended Life Style:** |

**Teacher Student**

**43. स्वस्थ / आतुर वृत्त पत्रक (Proforma for Healthy/Diseased) – (2)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. no.** |  | | **Residence** | C/T/V/IR/F/M/D |
| **Date** |  | | **So. eco. status** | VP/P/M/UM/R/VR |
| **Name** |  | | **Marital Status** | M/UM/W |
| **Age** |  | | **Sex** | M/F/C |
| **Address** |  | | **Edu. Status** | I/P/S/HS/G/PG/Tech./Others |
| **Occupation** |  |
| **Diagnosis** |  |
| **Ph** | **M:** | **O:** | **Chronicity** |  |
| **Result** |  | | | |

**Present Illness:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Symptoms | Before Proce. | After Procedure | | | Physical Parameter | Before Proce. | After  Procedure | | |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
|  |  |  |  |  | Ht. |  |  |  |  |
|  |  |  |  |  | Wt. |  |  |  |  |
|  |  |  |  |  | AC R |  |  |  |  |
|  |  |  |  |  | AC L |  |  |  |  |
|  |  |  |  |  | CC WB |  |  |  |  |
|  |  |  |  |  | CC WOB |  |  |  |  |
|  |  |  |  |  | U AbC |  |  |  |  |
|  |  |  |  |  | M AbC |  |  |  |  |
|  |  |  |  |  | WC |  |  |  |  |
|  |  |  |  |  | HC |  |  |  |  |
|  |  |  |  |  | TC R |  |  |  |  |
|  |  |  |  |  | TC L |  |  |  |  |
|  |  |  |  |  | **Temp.** |  |  |  |  |
|  |  |  |  |  | **Pulse** |  |  |  |  |
|  |  |  |  |  | **Resp.** |  |  |  |  |
|  |  |  |  |  | **B.P.** |  |  |  |  |

Laboratory Tests:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Blood Test** | Before Proce. | After Procedure | | | **Urine Analysis** | Before Proce. | After  Procedure | | |
| **1st Wk.** | **2nd Wk.** | **3rd Wk.** | **1st Wk.** | **2nd Wk.** | **3rd Wk.** |
| Hb |  |  |  |  | Physical |  |  |  |  |
| TC |  |  |  |  | Chemical |  |  |  |  |
| DC |  |  |  |  | Microscopic |  |  |  |  |
| ESR |  |  |  |  | FUS/PPUS |  |  |  |  |
| FBS |  |  |  |  | **Stool Analysis** |  |  |  |  |
| PPBS |  |  |  |  | Physical |  |  |  |  |
| Others |  |  |  |  | Chemical |  |  |  |  |
|  |  |  |  |  | Microscopic |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Practical** | **Procedure/No./**  **Time** | **Before Proce.** | **Result (After Procedure)** | | | | |
| **1st Wk.** | | | **2nd Wk.** | **3rd Wk.** |
| 1. **Dinacharya (Daily Routine):** | | | | | | | |
| (1)Pratimarsha Nasya |  |  |  | | |  |  |
| (2) Anjana |  |  |  | | |  |  |
| (3)Gandoosha-Kavala |  |  |  | | |  |  |
| (4)Prayogika Dhoomapana |  |  |  | | |  |  |
| (5)Abhyanga |  |  |  | | |  |  |
| (6) Udvartana |  |  |  | | |  |  |
| 1. **Asana (Yogic Posture):** | | | | | | | |
| Suryanamaskara |  |  | |  | |  |  |
| (1) Ardhakatichakrasana |  |  | |  | |  |  |
| (2)Padahastasana |  |  | |  | |  |  |
| (3)Ardhachakrasana |  |  | |  | |  |  |
| (4)Trikonasana |  |  | |  | |  |  |
| (5)Swastikasana |  |  | |  | |  |  |
| (6)Gomukhasana |  |  | |  | |  |  |
| (7)Padmasana |  |  | |  | |  |  |
| (8)Vajrasana |  |  | |  | |  |  |
| (9)Bhadrasana |  |  | |  | |  |  |
| (10)Shashankasana |  |  | |  | |  |  |
| (11)Ushtrasana |  |  | |  | |  |  |
| (12)Pashchimottanasana |  |  | |  | |  |  |
| (13)Suptavajrasana |  |  | |  | |  |  |
| (14)Ardhamatsyendrasana |  |  | |  | |  |  |
| (15)Siddhasana |  |  | |  | |  |  |
| (16)Pavanamuktasana |  |  | |  | |  |  |
| (17)Sarvangasana |  |  | |  | |  |  |
| (18)Matsyasana |  |  | |  | |  |  |
| (19)Halasana |  |  | |  | |  |  |
| (20)Chakrasana |  |  | |  | |  |  |
| (21)Shavasana |  |  | |  | |  |  |
| (22)Setubandhasana |  |  | |  | |  |  |
| (23)Bhujangasana |  |  | |  | |  |  |
| (24)Shalabhasana |  |  | |  | |  |  |
| (25)Dhanurasana |  |  | |  | |  |  |
| (26)Makarasana |  |  | |  | |  |  |
| 1. **Pranayama:** | | | | | | | |
| (1)Suryabhedana |  |  | | |  |  |  |
| (2)Ujjayi |  |  | | |  |  |  |
| (3)Shitali |  |  | | |  |  |  |
| (4)Sitkari |  |  | | |  |  |  |
| (5)Bhastrika |  |  | | |  |  |  |
| (6)Bhramari |  |  | | |  |  |  |
| (7)Anuloma-viloma (Nadishuddhi) |  |  | | |  |  |  |
| 1. **Shuddhi Prakriya (Cleansing Procedure):** | | | | | | | |
| (1)Neti |  |  | | |  |  |  |
| (2)Dhauti |  |  | | |  |  |  |
| (3)Kapalabhati |  |  | | |  |  |  |
| (4)Trataka |  |  | | |  |  |  |
| 1. **Nisaropachara (Naturopathy):** | | | | | | | |
| **(1)Prithvi Tattva Chikitsa (Mud therapy)** |  |  | | |  |  |  |
| 1. Mrullepattika (Mud pack) |  |  | | |  |  |  |
| 1. Mruttikanimajjana (Mud bath)/Mrullepa (Mud Paste) |  |  | | |  |  |  |
| **(2) Jala Tattva Chikitsa (Hydrotherapy)** |  |  | | |  |  |  |
| 1. Snana (Bath) |  |  | | |  |  |  |
| 1. Pattika (Pack) |  |  | | |  |  |  |
| 1. Basti (Enema) |  |  | | |  |  |  |
| **(3)Agni Tattva Chikitsa (Fomentation)** |  |  | | |  |  |  |
| 1. Aatapa sevana   ( Sun bath) |  |  | | |  |  |  |
| 1. Bashpa Snana (Steam bath) |  |  | | |  |  |  |
| **(4)Vayu Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Mardana (Massage) |  |  | | |  |  |  |
| 1. Vishramana (Relaxation) |  |  | | |  |  |  |
| **(5)Akasha Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Upavasa (Fasting) |  |  | | |  |  |  |

|  |
| --- |
| **Recommended Diet:** |
| **Recommended Life Style:** |

**Teacher Student**

**44. स्वस्थ / आतुर वृत्त पत्रक (Proforma for Healthy/Diseased) – (3)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. no.** |  | | **Residence** | C/T/V/IR/F/M/D |
| **Date** |  | | **So. eco. status** | VP/P/M/UM/R/VR |
| **Name** |  | | **Marital Status** | M/UM/W |
| **Age** |  | | **Sex** | M/F/C |
| **Address** |  | | **Edu. Status** | I/P/S/HS/G/PG/Tech./Others |
| **Occupation** |  |
| **Diagnosis** |  |
| **Ph** | **M:** | **O:** | **Chronicity** |  |
| **Result** |  | | | |

**Present Illness:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Symptoms | Before Proce. | After Procedure | | | Physical Parameter | Before Proce. | After  Procedure | | |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
|  |  |  |  |  | Ht. |  |  |  |  |
|  |  |  |  |  | Wt. |  |  |  |  |
|  |  |  |  |  | AC R |  |  |  |  |
|  |  |  |  |  | AC L |  |  |  |  |
|  |  |  |  |  | CC WB |  |  |  |  |
|  |  |  |  |  | CC WOB |  |  |  |  |
|  |  |  |  |  | U AbC |  |  |  |  |
|  |  |  |  |  | M AbC |  |  |  |  |
|  |  |  |  |  | WC |  |  |  |  |
|  |  |  |  |  | HC |  |  |  |  |
|  |  |  |  |  | TC R |  |  |  |  |
|  |  |  |  |  | TC L |  |  |  |  |
|  |  |  |  |  | **Temp.** |  |  |  |  |
|  |  |  |  |  | **Pulse** |  |  |  |  |
|  |  |  |  |  | **Resp.** |  |  |  |  |
|  |  |  |  |  | **B.P.** |  |  |  |  |

Laboratory Tests:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Blood Test** | Before Proce. | After Procedure | | | **Urine Analysis** | Before Proce. | After  Procedure | | |
| **1st Wk.** | **2nd Wk.** | **3rd Wk.** | **1st Wk.** | **2nd Wk.** | **3rd Wk.** |
| Hb |  |  |  |  | Physical |  |  |  |  |
| TC |  |  |  |  | Chemical |  |  |  |  |
| DC |  |  |  |  | Microscopic |  |  |  |  |
| ESR |  |  |  |  | FUS/PPUS |  |  |  |  |
| FBS |  |  |  |  | **Stool Analysis** |  |  |  |  |
| PPBS |  |  |  |  | Physical |  |  |  |  |
| Others |  |  |  |  | Chemical |  |  |  |  |
|  |  |  |  |  | Microscopic |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Practical** | **Procedure/No./**  **Time** | **Before Proce.** | **Result (After Procedure)** | | | | |
| **1st Wk.** | | | **2nd Wk.** | **3rd Wk.** |
| 1. **Dinacharya (Daily Routine):** | | | | | | | |
| (1)Pratimarsha Nasya |  |  |  | | |  |  |
| (2) Anjana |  |  |  | | |  |  |
| (3)Gandoosha-Kavala |  |  |  | | |  |  |
| (4)Prayogika Dhoomapana |  |  |  | | |  |  |
| (5)Abhyanga |  |  |  | | |  |  |
| (6) Udvartana |  |  |  | | |  |  |
| 1. **Asana (Yogic Posture):** | | | | | | | |
| Suryanamaskara |  |  | |  | |  |  |
| (1) Ardhakatichakrasana |  |  | |  | |  |  |
| (2)Padahastasana |  |  | |  | |  |  |
| (3)Ardhachakrasana |  |  | |  | |  |  |
| (4)Trikonasana |  |  | |  | |  |  |
| (5)Swastikasana |  |  | |  | |  |  |
| (6)Gomukhasana |  |  | |  | |  |  |
| (7)Padmasana |  |  | |  | |  |  |
| (8)Vajrasana |  |  | |  | |  |  |
| (9)Bhadrasana |  |  | |  | |  |  |
| (10)Shashankasana |  |  | |  | |  |  |
| (11)Ushtrasana |  |  | |  | |  |  |
| (12)Pashchimottanasana |  |  | |  | |  |  |
| (13)Suptavajrasana |  |  | |  | |  |  |
| (14)Ardhamatsyendrasana |  |  | |  | |  |  |
| (15)Siddhasana |  |  | |  | |  |  |
| (16)Pavanamuktasana |  |  | |  | |  |  |
| (17)Sarvangasana |  |  | |  | |  |  |
| (18)Matsyasana |  |  | |  | |  |  |
| (19)Halasana |  |  | |  | |  |  |
| (20)Chakrasana |  |  | |  | |  |  |
| (21)Shavasana |  |  | |  | |  |  |
| (22)Setubandhasana |  |  | |  | |  |  |
| (23)Bhujangasana |  |  | |  | |  |  |
| (24)Shalabhasana |  |  | |  | |  |  |
| (25)Dhanurasana |  |  | |  | |  |  |
| (26)Makarasana |  |  | |  | |  |  |
| 1. **Pranayama:** | | | | | | | |
| (1)Suryabhedana |  |  | | |  |  |  |
| (2)Ujjayi |  |  | | |  |  |  |
| (3)Shitali |  |  | | |  |  |  |
| (4)Sitkari |  |  | | |  |  |  |
| (5)Bhastrika |  |  | | |  |  |  |
| (6)Bhramari |  |  | | |  |  |  |
| (7)Anuloma-viloma (Nadishuddhi) |  |  | | |  |  |  |
| 1. **Shuddhi Prakriya (Cleansing Procedure):** | | | | | | | |
| (1)Neti |  |  | | |  |  |  |
| (2)Dhauti |  |  | | |  |  |  |
| (3)Kapalabhati |  |  | | |  |  |  |
| (4)Trataka |  |  | | |  |  |  |
| 1. **Nisaropachara (Naturopathy):** | | | | | | | |
| **(1)Prithvi Tattva Chikitsa (Mud therapy)** |  |  | | |  |  |  |
| 1. Mrullepattika (Mud pack) |  |  | | |  |  |  |
| 1. Mruttikanimajjana (Mud bath)/Mrullepa(Mud Paste) |  |  | | |  |  |  |
| **(2) Jala Tattva Chikitsa (Hydrotherapy)** |  |  | | |  |  |  |
| 1. Snana (Bath) |  |  | | |  |  |  |
| 1. Pattika (Pack) |  |  | | |  |  |  |
| 1. Basti (Enema) |  |  | | |  |  |  |
| **(3)Agni Tattva Chikitsa (Fomentation)** |  |  | | |  |  |  |
| 1. Aatapa sevana   ( Sun bath) |  |  | | |  |  |  |
| 1. Bashpa Snana (Steam bath) |  |  | | |  |  |  |
| **(4)Vayu Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Mardana (Massage) |  |  | | |  |  |  |
| 1. Vishramana (Relaxation) |  |  | | |  |  |  |
| **(5)Akasha Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Upavasa (Fasting) |  |  | | |  |  |  |

|  |
| --- |
| **Recommended Diet:** |
| **Recommended Life Style:** |

**Teacher Student**

**45. स्वस्थ / आतुर वृत्त पत्रक (Proforma for Healthy/Diseased) – (4)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. no.** |  | | **Residence** | C/T/V/IR/F/M/D |
| **Date** |  | | **So. eco. status** | VP/P/M/UM/R/VR |
| **Name** |  | | **Marital Status** | M/UM/W |
| **Age** |  | | **Sex** | M/F/C |
| **Address** |  | | **Edu. Status** | I/P/S/HS/G/PG/Tech./Others |
| **Occupation** |  |
| **Diagnosis** |  |
| **Ph** | **M:** | **O:** | **Chronicity** |  |
| **Result** |  | | | |

**Present Illness:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Symptoms | Before Proce. | After Procedure | | | Physical Parameter | Before Proce. | After  Procedure | | |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
|  |  |  |  |  | Ht. |  |  |  |  |
|  |  |  |  |  | Wt. |  |  |  |  |
|  |  |  |  |  | AC R |  |  |  |  |
|  |  |  |  |  | AC L |  |  |  |  |
|  |  |  |  |  | CC WB |  |  |  |  |
|  |  |  |  |  | CC WOB |  |  |  |  |
|  |  |  |  |  | U AbC |  |  |  |  |
|  |  |  |  |  | M AbC |  |  |  |  |
|  |  |  |  |  | WC |  |  |  |  |
|  |  |  |  |  | HC |  |  |  |  |
|  |  |  |  |  | TC R |  |  |  |  |
|  |  |  |  |  | TC L |  |  |  |  |
|  |  |  |  |  | **Temp.** |  |  |  |  |
|  |  |  |  |  | **Pulse** |  |  |  |  |
|  |  |  |  |  | **Resp.** |  |  |  |  |
|  |  |  |  |  | **B.P.** |  |  |  |  |

Laboratory Tests:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Blood Test** | Before Proce. | After Procedure | | | **Urine Analysis** | Before Proce. | After  Procedure | | |
| **1st Wk.** | **2nd Wk.** | **3rd Wk.** | **1st Wk.** | **2nd Wk.** | **3rd Wk.** |
| Hb |  |  |  |  | Physical |  |  |  |  |
| TC |  |  |  |  | Chemical |  |  |  |  |
| DC |  |  |  |  | Microscopic |  |  |  |  |
| ESR |  |  |  |  | FUS/PPUS |  |  |  |  |
| FBS |  |  |  |  | **Stool Analysis** |  |  |  |  |
| PPBS |  |  |  |  | Physical |  |  |  |  |
| Others |  |  |  |  | Chemical |  |  |  |  |
|  |  |  |  |  | Microscopic |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Practical** | **Procedure/No./**  **Time** | **Before Proce.** | **Result (After Procedure)** | | | | |
| **1st Wk.** | | | **2nd Wk.** | **3rd Wk.** |
| 1. **Dinacharya (Daily Routine):** | | | | | | | |
| (1)Pratimarsha Nasya |  |  |  | | |  |  |
| (2) Anjana |  |  |  | | |  |  |
| (3)Gandoosha-Kavala |  |  |  | | |  |  |
| (4)Prayogika Dhoomapana |  |  |  | | |  |  |
| (5)Abhyanga |  |  |  | | |  |  |
| (6) Udvartana |  |  |  | | |  |  |
| 1. **Asana (Yogic Posture):** | | | | | | | |
| Suryanamaskara |  |  | |  | |  |  |
| (1) Ardhakatichakrasana |  |  | |  | |  |  |
| (2)Padahastasana |  |  | |  | |  |  |
| (3)Ardhachakrasana |  |  | |  | |  |  |
| (4)Trikonasana |  |  | |  | |  |  |
| (5)Swastikasana |  |  | |  | |  |  |
| (6)Gomukhasana |  |  | |  | |  |  |
| (7)Padmasana |  |  | |  | |  |  |
| (8)Vajrasana |  |  | |  | |  |  |
| (9)Bhadrasana |  |  | |  | |  |  |
| (10)Shashankasana |  |  | |  | |  |  |
| (11)Ushtrasana |  |  | |  | |  |  |
| (12)Pashchimottanasana |  |  | |  | |  |  |
| (13)Suptavajrasana |  |  | |  | |  |  |
| (14)Ardhamatsyendrasana |  |  | |  | |  |  |
| (15)Siddhasana |  |  | |  | |  |  |
| (16)Pavanamuktasana |  |  | |  | |  |  |
| (17)Sarvangasana |  |  | |  | |  |  |
| (18)Matsyasana |  |  | |  | |  |  |
| (19)Halasana |  |  | |  | |  |  |
| (20)Chakrasana |  |  | |  | |  |  |
| (21)Shavasana |  |  | |  | |  |  |
| (22)Setubandhasana |  |  | |  | |  |  |
| (23)Bhujangasana |  |  | |  | |  |  |
| (24)Shalabhasana |  |  | |  | |  |  |
| (25)Dhanurasana |  |  | |  | |  |  |
| (26)Makarasana |  |  | |  | |  |  |
| 1. **Pranayama:** | | | | | | | |
| (1)Suryabhedana |  |  | | |  |  |  |
| (2)Ujjayi |  |  | | |  |  |  |
| (3)Shitali |  |  | | |  |  |  |
| (4)Sitkari |  |  | | |  |  |  |
| (5)Bhastrika |  |  | | |  |  |  |
| (6)Bhramari |  |  | | |  |  |  |
| (7)Anuloma-viloma (Nadishuddhi) |  |  | | |  |  |  |
| 1. **Shuddhi Prakriya (Cleansing Procedure):** | | | | | | | |
| (1)Neti |  |  | | |  |  |  |
| (2)Dhauti |  |  | | |  |  |  |
| (3)Kapalabhati |  |  | | |  |  |  |
| (4)Trataka |  |  | | |  |  |  |
| 1. **Nisaropachara (Naturopathy):** | | | | | | | |
| **(1)Prithvi Tattva Chikitsa (Mud therapy)** |  |  | | |  |  |  |
| 1. Mrullepattika (Mud pack) |  |  | | |  |  |  |
| 1. Mruttikanimajjana (Mud bath)/Mrullepa(Mud Paste) |  |  | | |  |  |  |
| **(2) Jala Tattva Chikitsa (Hydrotherapy)** |  |  | | |  |  |  |
| 1. Snana (Bath) |  |  | | |  |  |  |
| 1. Pattika (Pack) |  |  | | |  |  |  |
| 1. Basti (Enema) |  |  | | |  |  |  |
| **(3)Agni Tattva Chikitsa (Fomentation)** |  |  | | |  |  |  |
| 1. Aatapa sevana   ( Sun bath) |  |  | | |  |  |  |
| 1. Bashpa Snana (Steam bath) |  |  | | |  |  |  |
| **(4)Vayu Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Mardana (Massage) |  |  | | |  |  |  |
| 1. Vishramana (Relaxation) |  |  | | |  |  |  |
| **(5)Akasha Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Upavasa (Fasting) |  |  | | |  |  |  |

|  |
| --- |
| **Recommended Diet:** |
| **Recommended Life Style:** |

**Teacher Student**

**46. स्वस्थ / आतुर वृत्त पत्रक (Proforma for Healthy/Diseased) – (5)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. no.** |  | | **Residence** | C/T/V/IR/F/M/D |
| **Date** |  | | **So. eco. status** | VP/P/M/UM/R/VR |
| **Name** |  | | **Marital Status** | M/UM/W |
| **Age** |  | | **Sex** | M/F/C |
| **Address** |  | | **Edu. Status** | I/P/S/HS/G/PG/Tech./Others |
| **Occupation** |  |
| **Diagnosis** |  |
| **Ph** | **M:** | **O:** | **Chronicity** |  |
| **Result** |  | | | |

**Present Illness:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Symptoms | Before Proce. | After Procedure | | | Physical Parameter | Before Proce. | After  Procedure | | |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
|  |  |  |  |  | Ht. |  |  |  |  |
|  |  |  |  |  | Wt. |  |  |  |  |
|  |  |  |  |  | AC R |  |  |  |  |
|  |  |  |  |  | AC L |  |  |  |  |
|  |  |  |  |  | CC WB |  |  |  |  |
|  |  |  |  |  | CC WOB |  |  |  |  |
|  |  |  |  |  | U AbC |  |  |  |  |
|  |  |  |  |  | M AbC |  |  |  |  |
|  |  |  |  |  | WC |  |  |  |  |
|  |  |  |  |  | HC |  |  |  |  |
|  |  |  |  |  | TC R |  |  |  |  |
|  |  |  |  |  | TC L |  |  |  |  |
|  |  |  |  |  | **Temp.** |  |  |  |  |
|  |  |  |  |  | **Pulse** |  |  |  |  |
|  |  |  |  |  | **Resp.** |  |  |  |  |
|  |  |  |  |  | **B.P.** |  |  |  |  |

Laboratory Tests:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Blood Test** | Before Proce. | After Procedure | | | **Urine Analysis** | Before Proce. | After  Procedure | | |
| **1st Wk.** | **2nd Wk.** | **3rd Wk.** | **1st Wk.** | **2nd Wk.** | **3rd Wk.** |
| Hb |  |  |  |  | Physical |  |  |  |  |
| TC |  |  |  |  | Chemical |  |  |  |  |
| DC |  |  |  |  | Microscopic |  |  |  |  |
| ESR |  |  |  |  | FUS/PPUS |  |  |  |  |
| FBS |  |  |  |  | **Stool Analysis** |  |  |  |  |
| PPBS |  |  |  |  | Physical |  |  |  |  |
| Others |  |  |  |  | Chemical |  |  |  |  |
|  |  |  |  |  | Microscopic |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Practical** | **Procedure/No./**  **Time** | **Before Proce.** | **Result (After Procedure)** | | | | |
| **1st Wk.** | | | **2nd Wk.** | **3rd Wk.** |
| 1. **Dinacharya (Daily Routine):** | | | | | | | |
| (1)Pratimarsha Nasya |  |  |  | | |  |  |
| (2) Anjana |  |  |  | | |  |  |
| (3)Gandoosha-Kavala |  |  |  | | |  |  |
| (4)Prayogika Dhoomapana |  |  |  | | |  |  |
| (5)Abhyanga |  |  |  | | |  |  |
| (6) Udvartana |  |  |  | | |  |  |
| 1. **Asana (Yogic Posture):** | | | | | | | |
| Suryanamaskara |  |  | |  | |  |  |
| (1) Ardhakatichakrasana |  |  | |  | |  |  |
| (2)Padahastasana |  |  | |  | |  |  |
| (3)Ardhachakrasana |  |  | |  | |  |  |
| (4)Trikonasana |  |  | |  | |  |  |
| (5)Swastikasana |  |  | |  | |  |  |
| (6)Gomukhasana |  |  | |  | |  |  |
| (7)Padmasana |  |  | |  | |  |  |
| (8)Vajrasana |  |  | |  | |  |  |
| (9)Bhadrasana |  |  | |  | |  |  |
| (10)Shashankasana |  |  | |  | |  |  |
| (11)Ushtrasana |  |  | |  | |  |  |
| (12)Pashchimottanasana |  |  | |  | |  |  |
| (13)Suptavajrasana |  |  | |  | |  |  |
| (14)Ardhamatsyendrasana |  |  | |  | |  |  |
| (15)Siddhasana |  |  | |  | |  |  |
| (16)Pavanamuktasana |  |  | |  | |  |  |
| (17)Sarvangasana |  |  | |  | |  |  |
| (18)Matsyasana |  |  | |  | |  |  |
| (19)Halasana |  |  | |  | |  |  |
| (20)Chakrasana |  |  | |  | |  |  |
| (21)Shavasana |  |  | |  | |  |  |
| (22)Setubandhasana |  |  | |  | |  |  |
| (23)Bhujangasana |  |  | |  | |  |  |
| (24)Shalabhasana |  |  | |  | |  |  |
| (25)Dhanurasana |  |  | |  | |  |  |
| (26)Makarasana |  |  | |  | |  |  |
| 1. **Pranayama:** | | | | | | | |
| (1)Suryabhedana |  |  | | |  |  |  |
| (2)Ujjayi |  |  | | |  |  |  |
| (3)Shitali |  |  | | |  |  |  |
| (4)Sitkari |  |  | | |  |  |  |
| (5)Bhastrika |  |  | | |  |  |  |
| (6)Bhramari |  |  | | |  |  |  |
| (7)Anuloma-viloma (Nadishuddhi) |  |  | | |  |  |  |
| 1. **Shuddhi Prakriya (Cleansing Procedure):** | | | | | | | |
| (1)Neti |  |  | | |  |  |  |
| (2)Dhauti |  |  | | |  |  |  |
| (3)Kapalabhati |  |  | | |  |  |  |
| (4)Trataka |  |  | | |  |  |  |
| 1. **Nisaropachara (Naturopathy):** | | | | | | | |
| **(1)Prithvi Tattva Chikitsa (Mud therapy)** |  |  | | |  |  |  |
| 1. Mrullepattika (Mud pack) |  |  | | |  |  |  |
| 1. Mruttikanimajjana (Mud bath)/Mrullepa (Mud Paste) |  |  | | |  |  |  |
| **(2) Jala Tattva Chikitsa (Hydrotherapy)** |  |  | | |  |  |  |
| 1. Snana (Bath) |  |  | | |  |  |  |
| 1. Pattika (Pack) |  |  | | |  |  |  |
| 1. Basti (Enema) |  |  | | |  |  |  |
| **(3)Agni Tattva Chikitsa (Fomentation)** |  |  | | |  |  |  |
| 1. Aatapa sevana   ( Sun bath) |  |  | | |  |  |  |
| 1. Bashpa Snana (Steam bath) |  |  | | |  |  |  |
| **(4)Vayu Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Mardana (Massage) |  |  | | |  |  |  |
| 1. Vishramana (Relaxation) |  |  | | |  |  |  |
| **(5)Akasha Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Upavasa (Fasting) |  |  | | |  |  |  |

|  |
| --- |
| **Recommended Diet:** |
| **Recommended Life Style:** |

**Teacher Student**

**47. स्वस्थ / आतुर वृत्त पत्रक (Proforma for Healthy/Diseased) – (6)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. no.** |  | | **Residence** | C/T/V/IR/F/M/D |
| **Date** |  | | **So. eco. status** | VP/P/M/UM/R/VR |
| **Name** |  | | **Marital Status** | M/UM/W |
| **Age** |  | | **Sex** | M/F/C |
| **Address** |  | | **Edu. Status** | I/P/S/HS/G/PG/Tech./Others |
| **Occupation** |  |
| **Diagnosis** |  |
| **Ph** | **M:** | **O:** | **Chronicity** |  |
| **Result** |  | | | |

**Present Illness:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Symptoms | Before Proce. | After Procedure | | | Physical Parameter | Before Proce. | After  Procedure | | |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
| 1st Wk. | 2nd Wk. | 3rd Wk. |
|  |  |  |  |  | Ht. |  |  |  |  |
|  |  |  |  |  | Wt. |  |  |  |  |
|  |  |  |  |  | AC R |  |  |  |  |
|  |  |  |  |  | AC L |  |  |  |  |
|  |  |  |  |  | CC WB |  |  |  |  |
|  |  |  |  |  | CC WOB |  |  |  |  |
|  |  |  |  |  | U AbC |  |  |  |  |
|  |  |  |  |  | M AbC |  |  |  |  |
|  |  |  |  |  | WC |  |  |  |  |
|  |  |  |  |  | HC |  |  |  |  |
|  |  |  |  |  | TC R |  |  |  |  |
|  |  |  |  |  | TC L |  |  |  |  |
|  |  |  |  |  | **Temp.** |  |  |  |  |
|  |  |  |  |  | **Pulse** |  |  |  |  |
|  |  |  |  |  | **Resp.** |  |  |  |  |
|  |  |  |  |  | **B.P.** |  |  |  |  |

Laboratory Tests:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Blood Test** | Before Proce. | After Procedure | | | **Urine Analysis** | Before Proce. | After  Procedure | | |
| **1st Wk.** | **2nd Wk.** | **3rd Wk.** | **1st Wk.** | **2nd Wk.** | **3rd Wk.** |
| Hb |  |  |  |  | Physical |  |  |  |  |
| TC |  |  |  |  | Chemical |  |  |  |  |
| DC |  |  |  |  | Microscopic |  |  |  |  |
| ESR |  |  |  |  | FUS/PPUS |  |  |  |  |
| FBS |  |  |  |  | **Stool Analysis** |  |  |  |  |
| PPBS |  |  |  |  | Physical |  |  |  |  |
| Others |  |  |  |  | Chemical |  |  |  |  |
|  |  |  |  |  | Microscopic |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Practical** | **Procedure/No./**  **Time** | **Before Proce.** | **Result (After Procedure)** | | | | |
| **1st Wk.** | | | **2nd Wk.** | **3rd Wk.** |
| 1. **Dinacharya (Daily Routine):** | | | | | | | |
| (1)Pratimarsha Nasya |  |  |  | | |  |  |
| (2) Anjana |  |  |  | | |  |  |
| (3)Gandoosha-Kavala |  |  |  | | |  |  |
| (4)Prayogika Dhoomapana |  |  |  | | |  |  |
| (5)Abhyanga |  |  |  | | |  |  |
| (6) Udvartana |  |  |  | | |  |  |
| 1. **Asana (Yogic Posture):** | | | | | | | |
| Suryanamaskara |  |  | |  | |  |  |
| (1) Ardhakatichakrasana |  |  | |  | |  |  |
| (2)Padahastasana |  |  | |  | |  |  |
| (3)Ardhachakrasana |  |  | |  | |  |  |
| (4)Trikonasana |  |  | |  | |  |  |
| (5)Swastikasana |  |  | |  | |  |  |
| (6)Gomukhasana |  |  | |  | |  |  |
| (7)Padmasana |  |  | |  | |  |  |
| (8)Vajrasana |  |  | |  | |  |  |
| (9)Bhadrasana |  |  | |  | |  |  |
| (10)Shashankasana |  |  | |  | |  |  |
| (11)Ushtrasana |  |  | |  | |  |  |
| (12)Pashchimottanasana |  |  | |  | |  |  |
| (13)Suptavajrasana |  |  | |  | |  |  |
| (14)Ardhamatsyendrasana |  |  | |  | |  |  |
| (15)Siddhasana |  |  | |  | |  |  |
| (16)Pavanamuktasana |  |  | |  | |  |  |
| (17)Sarvangasana |  |  | |  | |  |  |
| (18)Matsyasana |  |  | |  | |  |  |
| (19)Halasana |  |  | |  | |  |  |
| (20)Chakrasana |  |  | |  | |  |  |
| (21)Shavasana |  |  | |  | |  |  |
| (22)Setubandhasana |  |  | |  | |  |  |
| (23)Bhujangasana |  |  | |  | |  |  |
| (24)Shalabhasana |  |  | |  | |  |  |
| (25)Dhanurasana |  |  | |  | |  |  |
| (26)Makarasana |  |  | |  | |  |  |
| 1. **Pranayama:** | | | | | | | |
| (1)Suryabhedana |  |  | | |  |  |  |
| (2)Ujjayi |  |  | | |  |  |  |
| (3)Shitali |  |  | | |  |  |  |
| (4)Sitkari |  |  | | |  |  |  |
| (5)Bhastrika |  |  | | |  |  |  |
| (6)Bhramari |  |  | | |  |  |  |
| (7)Anuloma-viloma (Nadishuddhi) |  |  | | |  |  |  |
| 1. **Shuddhi Prakriya (Cleansing Procedure):** | | | | | | | |
| (1)Neti |  |  | | |  |  |  |
| (2)Dhauti |  |  | | |  |  |  |
| (3)Kapalabhati |  |  | | |  |  |  |
| (4)Trataka |  |  | | |  |  |  |
| 1. **Nisaropachara (Naturopathy):** | | | | | | | |
| **(1)Prithvi Tattva Chikitsa (Mud therapy)** |  |  | | |  |  |  |
| 1. Mrullepattika (Mud pack) |  |  | | |  |  |  |
| 1. Mruttikanimajjana (Mud bath)/Mrullepa(Mud Paste) |  |  | | |  |  |  |
| **(2) Jala Tattva Chikitsa (Hydrotherapy)** |  |  | | |  |  |  |
| 1. Snana (Bath) |  |  | | |  |  |  |
| 1. Pattika (Pack) |  |  | | |  |  |  |
| 1. Basti (Enema) |  |  | | |  |  |  |
| **(3)Agni Tattva Chikitsa (Fomentation)** |  |  | | |  |  |  |
| 1. Aatapa sevana   ( Sun bath) |  |  | | |  |  |  |
| 1. Bashpa Snana (Steam bath) |  |  | | |  |  |  |
| **(4)Vayu Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Mardana (Massage) |  |  | | |  |  |  |
| 1. Vishramana (Relaxation) |  |  | | |  |  |  |
| **(5)Akasha Tattva Chikitsa** |  |  | | |  |  |  |
| 1. Upavasa (Fasting) |  |  | | |  |  |  |

|  |
| --- |
| **Recommended Diet:** |
| **Recommended Life Style:** |

**Teacher Student**

**48. स्वास्थ्य परीक्षण पत्रक (PROFORMA FOR HEALTH ASSESMENT) - (1)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Batch: | | Date: | Resident : | C/T/V/IR/M/D |
| Name : |  | | | So.eco.sta: | VP/P/M/UM/R/VR |
| Address : |  | | | Education : | I/P/S/HS/G/PG/TEC/Other |
| Birth Dt.  / / | Occupation : |  |
| Sex : M/F |  |
| Age : | Ph. |  |
|  | | | | | |
| PERSONAL HISTORY : | | | | | |
| **Utthana : Time………………………….Since………………….** | | | | | |
| **Danta Dhavana :**  **Daily** – Y / N **Material Used Brush / Twig** (…..........) **Toothpaste preferred**………………....... **Since………** | | | | | |
| **Anjana :** Daily / Occasional / Never **Material Used** Kajal / Surma / Netraprabha / Other **Since………** | | | | | |
| **Nasya :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Dhumrapana :** Daily / Occasional / Never **Material Used** Medicated Cigarette / Nirdosh/ Other **Since………** | | | | | |
| **Abhyanga :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Vyayama :** No / Less / Proper / Excessive / Irregular **Method:** Gym/ Home Gym/ with Equip./w.o Equip.**Since……...** | | | | | |
| **Snana :** Daily / Occasional / Never **Water Used** Hot / Cold **Since**……… | | | | | |
| **Anulepana :** Daily / Occasional / Never **Material Used**………………………. **Since………** | | | | | |
| **Ratna / Mani Dharana** **:** Y / N **Type of Gem/s**………………………………………………... **Since………** | | | | | |
| **Ushnish / Shirastrana Dharana :** Daily / Occasional / Never **Type**……………………….. **Since………** | | | | | |
| **Ahara :** Sam / Nrm **Pramana :** Alpa / Pramita / Sama / Ati **Rasa :** M/A/L/Kt/T/Ks | | | | | |
| **Guna:** R/S, U / S, G/L, S/D **Kshudha :** Alpa / Sama / Ati **Trisha :** Alpa / Sama / Ati | | | | | |
| **D. Habit :** Samshana/Vishama/Adhya/Anashana/Viruddhashana **Diet:** BrF/ Midmor/ L / Snacks / Din/Late Night | | | | | |
| **Work:** Man. /Sed. /Lab. /Tra. /St. /Sit; Day/Nig.; **Hrs……….. Vishrama:**Less / Proper / Excess: **Hrs…** | | | | | |
| **Nidra:**  Reg / Irrg. **No. of Hrs.:\_\_\_Time of going to bed:\_\_Time of sleep onset:\_\_\_\_\_Dreams:** Y / N | | | | | |
| **Type:** Disturbed at intervals / Good initial sleep then no sleep / Waking for 2–3 hrs. then good sleep / No | | | | | |
| sleep whole night / Early waking / Sound sleep whole night / Divaswapa (Day sleep) | | | | | |
| **Mala:**  Reg / Irrg. / Const. / Loose **Freq.:……………….Odour…………… Colour………………** | | | | | |
| **Mutra:**  Burning / Dysuria **Freq.:…… Qty. ………………Odour…………… Colour……………** | | | | | |
| **Sweda:** Alpa / Sama / Ati **Odour** | | | | | |
| **Vyasana:** Cofee / Tea / Bidi / Cig. / Tob. / Alc. **Since………** | | | | | |
| **Is the diet & life style changed according to the season ?** Always / Occasional / Never | | | | | |
| **Menstrual Hist:** | | AOM…….AOMP………….Cycle - Reg./Irreg…….……..Days……..…….Flow……………. Menorrhagia / Metrorrhagia / Dysnen. / Leucorrhoea | | | |
| **Obstetric Hist**. | | No. of Conceptions …………No. of Deliveries ………Normal………..Surgical……………. Living……………………….M……………F………….Miscarriage / Abortion……………….. | | | |
| **History of Contraception** | | Temp. : Mech / Ch. / Oral / IUCD / Coi. Int / Abstinence  Perm. : Vasectomy / Tubectomy / Laparoscopic TL. | | | |

**General Physical Examination**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Pulse  (Radial) | Rate  ……….... | | Rhythm  ….………. | | Volume  ………. | |  | | Mouth | | Lips : Pink/Pale/Cyanosis/None | | | |
| Respiration | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Tongue : Coated/Clear/Dry/Moist./  Fissured/Inflamed/None | | | |
| Blood  Pressure | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Teeth: White/Yellow/Stains/Carries   Even / Uneven | | | |
| Temperature | Buccal  ……… | | Axillary  ……….. | | Anal  ………… | |  | |  | | Gums: Gingivitis/Pyorrhea/  Bleeding / Spongy | | | |
| Built | Slender / Lanky / Muscular / Stocky / Obese | | | | | | | | Nails | | Pale / Pink / Spots / Clubbing / Lining / Bhangura | | | |
| Nose  (olfaction) | Good / Fair / Poor | | | | | | | | Skin | | Dry / Rough Oily / Moist. / Smooth / Eruptions. | | | |
| Hair | Black / Grey / White | | | | | | | | Complex. | | Whitish / Dark / Fair / White | | | |
| Eyes | Ptosis / Style / Pink / Pale /  Visual Acuity Pupils | | | | | | | | Fingers | | Good shape/Deformed | | | |
| Ears | Discharge / Pain / Deafness / None | | | | | | | | Lymph. Nodes | | Present / Absent | | | |
| Nose | Cy. of tip / DNS / Discharge / Epistaxis / None | | | | | | | | Oedema | | Localized / Generalized / Not Present | | | |
| **Health Problems frequently Faced.** | | | | | | | | | | Para. | |  | Para. |  |
| 1. | |  | |  | |  | |  | | Ha | |  | U Abc |  |
| 2. | |  | |  | |  | |  | | Wa | |  | M Abc |  |
| 3. | |  | |  | |  | |  | | ACR | |  | WC |  |
| 4. | |  | |  | |  | |  | | ACL | |  | HC |  |
| 5. | |  | |  | |  | |  | | CCwb | |  | TRR |  |
| 6. | |  | |  | |  | |  | | CCwob | |  | TCL |  |
| Family History : | | Fr. | | Br. | | PGFr. | | MGFr. | | PU. | | MU. |  |  |
| Mr. | | Sr. | | PGMr. | | MGMr. | | PA. | | MA. |  |  |

**Date :- / /**

**Place :- Signature of Surveyor/Student**

**Signature of the Teacher**

**49. स्वास्थ्य परीक्षण पत्रक (PROFORMA FOR HEALTH ASSESMENT) – (2)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Batch: | | Date: | Resident : | C/T/V/IR/M/D |
| Name : |  | | | So.eco.sta: | VP/P/M/UM/R/VR |
| Address : |  | | | Education : | I/P/S/HS/G/PG/TEC/Other |
| Birth Dt.  / / | Occupation : |  |
| Sex : M/F |  |
| Age : | Ph. |  |
|  | | | | | |
| PERSONAL HISTORY : | | | | | |
| **Utthana : Time………………………….Since………………….** | | | | | |
| **Danta Dhavana :**  **Daily** – Y / N **Material Used Brush / Twig** (…..........) **Toothpaste preferred**………………....... **Since………** | | | | | |
| **Anjana :** Daily / Occasional / Never **Material Used** Kajal / Surma / Netraprabha / Other **Since………** | | | | | |
| **Nasya :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Dhumrapana :** Daily / Occasional / Never **Material Used** Medicated Cigarette / Nirdosh/ Other **Since………** | | | | | |
| **Abhyanga :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Vyayama :** No / Less / Proper / Excessive / Irregular **Method:** Gym/ Home Gym/ with Equip./w.o Equip.**Since……...** | | | | | |
| **Snana :** Daily / Occasional / Never **Water Used** Hot / Cold **Since**……… | | | | | |
| **Anulepana :** Daily / Occasional / Never **Material Used**………………………. **Since………** | | | | | |
| **Ratna / Mani Dharana** **:** Y / N **Type of Gem/s**………………………………………………... **Since………** | | | | | |
| **Ushnish / Shirastrana Dharana :** Daily / Occasional / Never **Type**……………………….. **Since………** | | | | | |
| **Ahara :** Sam / Nrm **Pramana :** Alpa / Pramita / Sama / Ati **Rasa :** M/A/L/Kt/T/Ks | | | | | |
| **Guna:** R/S, U / S, G/L, S/D **Kshudha :** Alpa / Sama / Ati **Trisha :** Alpa / Sama / Ati | | | | | |
| **D. Habit :** Samshana/Vishama/Adhya/Anashana/Viruddhashana **Diet:** BrF/ Midmor/ L / Snacks / Din/Late Night | | | | | |
| **Work:** Man. /Sed. /Lab. /Tra. /St. /Sit; Day/Nig.; **Hrs……….. Vishrama:**Less / Proper / Excess: **Hrs…** | | | | | |
| **Nidra:**  Reg / Irrg. **No. of Hrs.:\_\_\_Time of going to bed:\_\_Time of sleep onset:\_\_\_\_\_Dreams:** Y / N | | | | | |
| **Type:** Disturbed at intervals / Good initial sleep then no sleep / Waking for 2–3 hrs. then good sleep / No | | | | | |
| sleep whole night / Early waking / Sound sleep whole night / Divaswapa (Day sleep) | | | | | |
| **Mala:**  Reg / Irrg. / Const. / Loose **Freq.:……………….Odour…………… Colour………………** | | | | | |
| **Mutra:**  Burning / Dysuria **Freq.:…… Qty. ………………Odour…………… Colour……………** | | | | | |
| **Sweda:** Alpa / Sama / Ati **Odour** | | | | | |
| **Vyasana:** Cofee / Tea / Bidi / Cig. / Tob. / Alc. **Since………** | | | | | |
| **Is the diet & life style changed according to the season ?** Always / Occasional / Never | | | | | |
| **Menstrual Hist:** | | AOM…….AOMP………….Cycle - Reg./Irreg…….……..Days……..…….Flow……………. Menorrhagia / Metrorrhagia / Dysnen. / Leucorrhoea | | | |
| **Obstetric Hist**. | | No. of Conceptions …………No. of Deliveries ………Normal………..Surgical……………. Living……………………….M……………F………….Miscarriage / Abortion……………….. | | | |
| **History of Contraception** | | Temp. : Mech / Ch. / Oral / IUCD / Coi. Int / Abstinence  Perm. : Vasectomy / Tubectomy / Laparoscopic TL. | | | |

**General Physical Examination**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Pulse  (Radial) | Rate  ……….... | | Rhythm  ….………. | | Volume  ………. | |  | | Mouth | | Lips : Pink/Pale/Cyanosis/None | | | |
| Respiration | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Tongue : Coated/Clear/Dry/Moist./  Fissured/Inflamed/None | | | |
| Blood  Pressure | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Teeth: White/Yellow/Stains/Carries   Even / Uneven | | | |
| Temperature | Buccal  ……… | | Axillary  ……….. | | Anal  ………… | |  | |  | | Gums: Gingivitis/Pyorrhea/  Bleeding / Spongy | | | |
| Built | Slender / Lanky / Muscular / Stocky / Obese | | | | | | | | Nails | | Pale / Pink / Spots / Clubbing / Lining / Bhangura | | | |
| Nose  (olfaction) | Good / Fair / Poor | | | | | | | | Skin | | Dry / Rough Oily / Moist. / Smooth / Eruptions. | | | |
| Hair | Black / Grey / White | | | | | | | | Complex. | | Whitish / Dark / Fair / White | | | |
| Eyes | Ptosis / Style / Pink / Pale /  Visual Acuity Pupils | | | | | | | | Fingers | | Good shape/Deformed | | | |
| Ears | Discharge / Pain / Deafness / None | | | | | | | | Lymph. Nodes | | Present / Absent | | | |
| Nose | Cy. of tip / DNS / Discharge / Epistaxis / None | | | | | | | | Oedema | | Localized / Generalized / Not Present | | | |
| **Health Problems frequently Faced.** | | | | | | | | | | Para. | |  | Para. |  |
| 1. | |  | |  | |  | |  | | Ha | |  | U Abc |  |
| 2. | |  | |  | |  | |  | | Wa | |  | M Abc |  |
| 3. | |  | |  | |  | |  | | ACR | |  | WC |  |
| 4. | |  | |  | |  | |  | | ACL | |  | HC |  |
| 5. | |  | |  | |  | |  | | CCwb | |  | TRR |  |
| 6. | |  | |  | |  | |  | | CCwob | |  | TCL |  |
| Family History : | | Fr. | | Br. | | PGFr. | | MGFr. | | PU. | | MU. |  |  |
| Mr. | | Sr. | | PGMr. | | MGMr. | | PA. | | MA. |  |  |

**Date :- / /**

**Place :- Signature of Surveyor/Student**

**Signature of the Teacher**

**50. स्वास्थ्य परीक्षण पत्रक (PROFORMA FOR HEALTH ASSESMENT) – (3)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Batch: | | Date: | Resident : | C/T/V/IR/M/D |
| Name : |  | | | So.eco.sta: | VP/P/M/UM/R/VR |
| Address : |  | | | Education : | I/P/S/HS/G/PG/TEC/Other |
| Birth Dt.  / / | Occupation : |  |
| Sex : M/F |  |
| Age : | Ph. |  |
|  | | | | | |
| PERSONAL HISTORY : | | | | | |
| **Utthana : Time………………………….Since………………….** | | | | | |
| **Danta Dhavana :**  **Daily** – Y / N **Material Used Brush / Twig** (…..........) **Toothpaste preferred**………………....... **Since………** | | | | | |
| **Anjana :** Daily / Occasional / Never **Material Used** Kajal / Surma / Netraprabha / Other **Since………** | | | | | |
| **Nasya :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Dhumrapana :** Daily / Occasional / Never **Material Used** Medicated Cigarette / Nirdosh/ Other **Since………** | | | | | |
| **Abhyanga :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Vyayama :** No / Less / Proper / Excessive / Irregular **Method:** Gym/ Home Gym/ with Equip./w.o Equip.**Since……...** | | | | | |
| **Snana :** Daily / Occasional / Never **Water Used** Hot / Cold **Since**……… | | | | | |
| **Anulepana :** Daily / Occasional / Never **Material Used**………………………. **Since………** | | | | | |
| **Ratna / Mani Dharana** **:** Y / N **Type of Gem/s**………………………………………………... **Since………** | | | | | |
| **Ushnish / Shirastrana Dharana :** Daily / Occasional / Never **Type**……………………….. **Since………** | | | | | |
| **Ahara :** Sam / Nrm **Pramana :** Alpa / Pramita / Sama / Ati **Rasa :** M/A/L/Kt/T/Ks | | | | | |
| **Guna:** R/S, U / S, G/L, S/D **Kshudha :** Alpa / Sama / Ati **Trisha :** Alpa / Sama / Ati | | | | | |
| **D. Habit :** Samshana/Vishama/Adhya/Anashana/Viruddhashana **Diet:** BrF/ Midmor/ L / Snacks / Din/Late Night | | | | | |
| **Work:** Man. /Sed. /Lab. /Tra. /St. /Sit; Day/Nig.; **Hrs……….. Vishrama:**Less / Proper / Excess: **Hrs…** | | | | | |
| **Nidra:**  Reg / Irrg. **No. of Hrs.:\_\_\_Time of going to bed:\_\_Time of sleep onset:\_\_\_\_\_Dreams:** Y / N | | | | | |
| **Type:** Disturbed at intervals / Good initial sleep then no sleep / Waking for 2–3 hrs. then good sleep / No | | | | | |
| sleep whole night / Early waking / Sound sleep whole night / Divaswapa (Day sleep) | | | | | |
| **Mala:**  Reg / Irrg. / Const. / Loose **Freq.:……………….Odour…………… Colour………………** | | | | | |
| **Mutra:**  Burning / Dysuria **Freq.:…… Qty. ………………Odour…………… Colour……………** | | | | | |
| **Sweda:** Alpa / Sama / Ati **Odour** | | | | | |
| **Vyasana:** Cofee / Tea / Bidi / Cig. / Tob. / Alc. **Since………** | | | | | |
| **Is the diet & life style changed according to the season ?** Always / Occasional / Never | | | | | |
| **Menstrual Hist:** | | AOM…….AOMP………….Cycle - Reg./Irreg…….……..Days……..…….Flow……………. Menorrhagia / Metrorrhagia / Dysnen. / Leucorrhoea | | | |
| **Obstetric Hist**. | | No. of Conceptions …………No. of Deliveries ………Normal………..Surgical……………. Living……………………….M……………F………….Miscarriage / Abortion……………….. | | | |
| **History of Contraception** | | Temp. : Mech / Ch. / Oral / IUCD / Coi. Int / Abstinence  Perm. : Vasectomy / Tubectomy / Laparoscopic TL. | | | |

**General Physical Examination**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Pulse  (Radial) | Rate  ……….... | | Rhythm  ….………. | | Volume  ………. | |  | | Mouth | | Lips : Pink/Pale/Cyanosis/None | | | |
| Respiration | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Tongue : Coated/Clear/Dry/Moist./  Fissured/Inflamed/None | | | |
| Blood  Pressure | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Teeth: White/Yellow/Stains/Carries   Even / Uneven | | | |
| Temperature | Buccal  ……… | | Axillary  ……….. | | Anal  ………… | |  | |  | | Gums: Gingivitis/Pyorrhea/  Bleeding / Spongy | | | |
| Built | Slender / Lanky / Muscular / Stocky / Obese | | | | | | | | Nails | | Pale / Pink / Spots / Clubbing / Lining / Bhangura | | | |
| Nose  (olfaction) | Good / Fair / Poor | | | | | | | | Skin | | Dry / Rough Oily / Moist. / Smooth / Eruptions. | | | |
| Hair | Black / Grey / White | | | | | | | | Complex. | | Whitish / Dark / Fair / White | | | |
| Eyes | Ptosis / Style / Pink / Pale /  Visual Acuity Pupils | | | | | | | | Fingers | | Good shape/Deformed | | | |
| Ears | Discharge / Pain / Deafness / None | | | | | | | | Lymph. Nodes | | Present / Absent | | | |
| Nose | Cy. of tip / DNS / Discharge / Epistaxis / None | | | | | | | | Oedema | | Localized / Generalized / Not Present | | | |
| **Health Problems frequently Faced.** | | | | | | | | | | Para. | |  | Para. |  |
| 1. | |  | |  | |  | |  | | Ha | |  | U Abc |  |
| 2. | |  | |  | |  | |  | | Wa | |  | M Abc |  |
| 3. | |  | |  | |  | |  | | ACR | |  | WC |  |
| 4. | |  | |  | |  | |  | | ACL | |  | HC |  |
| 5. | |  | |  | |  | |  | | CCwb | |  | TRR |  |
| 6. | |  | |  | |  | |  | | CCwob | |  | TCL |  |
| Family History : | | Fr. | | Br. | | PGFr. | | MGFr. | | PU. | | MU. |  |  |
| Mr. | | Sr. | | PGMr. | | MGMr. | | PA. | | MA. |  |  |

**Date :- / /**

**Place :- Signature of Surveyor/Student**

**Signature of the Teacher**

**51. स्वास्थ्य परीक्षण पत्रक (PROFORMA FOR HEALTH ASSESMENT) – (4)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Batch: | | Date: | Resident : | C/T/V/IR/M/D |
| Name : |  | | | So.eco.sta: | VP/P/M/UM/R/VR |
| Address : |  | | | Education : | I/P/S/HS/G/PG/TEC/Other |
| Birth Dt.  / / | Occupation : |  |
| Sex : M/F |  |
| Age : | Ph. |  |
|  | | | | | |
| PERSONAL HISTORY : | | | | | |
| **Utthana : Time………………………….Since………………….** | | | | | |
| **Danta Dhavana :**  **Daily** – Y / N **Material Used Brush / Twig** (…..........) **Toothpaste preferred**………………....... **Since………** | | | | | |
| **Anjana :** Daily / Occasional / Never **Material Used** Kajal / Surma / Netraprabha / Other **Since………** | | | | | |
| **Nasya :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Dhumrapana :** Daily / Occasional / Never **Material Used** Medicated Cigarette / Nirdosh/ Other **Since………** | | | | | |
| **Abhyanga :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Vyayama :** No / Less / Proper / Excessive / Irregular **Method:** Gym/ Home Gym/ with Equip./w.o Equip.**Since……...** | | | | | |
| **Snana :** Daily / Occasional / Never **Water Used** Hot / Cold **Since**……… | | | | | |
| **Anulepana :** Daily / Occasional / Never **Material Used**………………………. **Since………** | | | | | |
| **Ratna / Mani Dharana** **:** Y / N **Type of Gem/s**………………………………………………... **Since………** | | | | | |
| **Ushnish / Shirastrana Dharana :** Daily / Occasional / Never **Type**……………………….. **Since………** | | | | | |
| **Ahara :** Sam / Nrm **Pramana :** Alpa / Pramita / Sama / Ati **Rasa :** M/A/L/Kt/T/Ks | | | | | |
| **Guna:** R/S, U / S, G/L, S/D **Kshudha :** Alpa / Sama / Ati **Trisha :** Alpa / Sama / Ati | | | | | |
| **D. Habit :** Samshana/Vishama/Adhya/Anashana/Viruddhashana **Diet:** BrF/ Midmor/ L / Snacks / Din/Late Night | | | | | |
| **Work:** Man. /Sed. /Lab. /Tra. /St. /Sit; Day/Nig.; **Hrs……….. Vishrama:**Less / Proper / Excess: **Hrs…** | | | | | |
| **Nidra:**  Reg / Irrg. **No. of Hrs.:\_\_\_Time of going to bed:\_\_Time of sleep onset:\_\_\_\_\_Dreams:** Y / N | | | | | |
| **Type:** Disturbed at intervals / Good initial sleep then no sleep / Waking for 2–3 hrs. then good sleep / No | | | | | |
| sleep whole night / Early waking / Sound sleep whole night / Divaswapa (Day sleep) | | | | | |
| **Mala:**  Reg / Irrg. / Const. / Loose **Freq.:……………….Odour…………… Colour………………** | | | | | |
| **Mutra:**  Burning / Dysuria **Freq.:…… Qty. ………………Odour…………… Colour……………** | | | | | |
| **Sweda:** Alpa / Sama / Ati **Odour** | | | | | |
| **Vyasana:** Cofee / Tea / Bidi / Cig. / Tob. / Alc. **Since………** | | | | | |
| **Is the diet & life style changed according to the season ?** Always / Occasional / Never | | | | | |
| **Menstrual Hist:** | | AOM…….AOMP………….Cycle - Reg./Irreg…….……..Days……..…….Flow……………. Menorrhagia / Metrorrhagia / Dysnen. / Leucorrhoea | | | |
| **Obstetric Hist**. | | No. of Conceptions …………No. of Deliveries ………Normal………..Surgical……………. Living……………………….M……………F………….Miscarriage / Abortion……………….. | | | |
| **History of Contraception** | | Temp. : Mech / Ch. / Oral / IUCD / Coi. Int / Abstinence  Perm. : Vasectomy / Tubectomy / Laparoscopic TL. | | | |

**General Physical Examination**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Pulse  (Radial) | Rate  ……….... | | Rhythm  ….………. | | Volume  ………. | |  | | Mouth | | Lips : Pink/Pale/Cyanosis/None | | | |
| Respiration | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Tongue : Coated/Clear/Dry/Moist./  Fissured/Inflamed/None | | | |
| Blood  Pressure | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Teeth: White/Yellow/Stains/Carries   Even / Uneven | | | |
| Temperature | Buccal  ……… | | Axillary  ……….. | | Anal  ………… | |  | |  | | Gums: Gingivitis/Pyorrhea/  Bleeding / Spongy | | | |
| Built | Slender / Lanky / Muscular / Stocky / Obese | | | | | | | | Nails | | Pale / Pink / Spots / Clubbing / Lining / Bhangura | | | |
| Nose  (olfaction) | Good / Fair / Poor | | | | | | | | Skin | | Dry / Rough Oily / Moist. / Smooth / Eruptions. | | | |
| Hair | Black / Grey / White | | | | | | | | Complex. | | Whitish / Dark / Fair / White | | | |
| Eyes | Ptosis / Style / Pink / Pale /  Visual Acuity Pupils | | | | | | | | Fingers | | Good shape/Deformed | | | |
| Ears | Discharge / Pain / Deafness / None | | | | | | | | Lymph. Nodes | | Present / Absent | | | |
| Nose | Cy. of tip / DNS / Discharge / Epistaxis / None | | | | | | | | Oedema | | Localized / Generalized / Not Present | | | |
| **Health Problems frequently Faced.** | | | | | | | | | | Para. | |  | Para. |  |
| 1. | |  | |  | |  | |  | | Ha | |  | U Abc |  |
| 2. | |  | |  | |  | |  | | Wa | |  | M Abc |  |
| 3. | |  | |  | |  | |  | | ACR | |  | WC |  |
| 4. | |  | |  | |  | |  | | ACL | |  | HC |  |
| 5. | |  | |  | |  | |  | | CCwb | |  | TRR |  |
| 6. | |  | |  | |  | |  | | CCwob | |  | TCL |  |
| Family History : | | Fr. | | Br. | | PGFr. | | MGFr. | | PU. | | MU. |  |  |
| Mr. | | Sr. | | PGMr. | | MGMr. | | PA. | | MA. |  |  |

**Date :- / /**

**Place :- Signature of Surveyor/Student**

**Signature of the Teacher**

**52. स्वास्थ्य परीक्षण पत्रक (PROFORMA FOR HEALTH ASSESMENT) – (5)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Batch: | | Date: | Resident : | C/T/V/IR/M/D |
| Name : |  | | | So.eco.sta: | VP/P/M/UM/R/VR |
| Address : |  | | | Education : | I/P/S/HS/G/PG/TEC/Other |
| Birth Dt.  / / | Occupation : |  |
| Sex : M/F |  |
| Age : | Ph. |  |
|  | | | | | |
| PERSONAL HISTORY : | | | | | |
| **Utthana : Time………………………….Since………………….** | | | | | |
| **Danta Dhavana :**  **Daily** – Y / N **Material Used Brush / Twig** (…..........) **Toothpaste preferred**………………....... **Since………** | | | | | |
| **Anjana :** Daily / Occasional / Never **Material Used** Kajal / Surma / Netraprabha / Other **Since………** | | | | | |
| **Nasya :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Dhumrapana :** Daily / Occasional / Never **Material Used** Medicated Cigarette / Nirdosh/ Other **Since………** | | | | | |
| **Abhyanga :** Daily / Occasional / Never **Material Used** Ghee / Oil / Medicated Oil / Other **Since………** | | | | | |
| **Vyayama :** No / Less / Proper / Excessive / Irregular **Method:** Gym/ Home Gym/ with Equip./w.o Equip.**Since……...** | | | | | |
| **Snana :** Daily / Occasional / Never **Water Used** Hot / Cold **Since**……… | | | | | |
| **Anulepana :** Daily / Occasional / Never **Material Used**………………………. **Since………** | | | | | |
| **Ratna / Mani Dharana** **:** Y / N **Type of Gem/s**………………………………………………... **Since………** | | | | | |
| **Ushnish / Shirastrana Dharana :** Daily / Occasional / Never **Type**……………………….. **Since………** | | | | | |
| **Ahara :** Sam / Nrm **Pramana :** Alpa / Pramita / Sama / Ati **Rasa :** M/A/L/Kt/T/Ks | | | | | |
| **Guna:** R/S, U / S, G/L, S/D **Kshudha :** Alpa / Sama / Ati **Trisha :** Alpa / Sama / Ati | | | | | |
| **D. Habit :** Samshana/Vishama/Adhya/Anashana/Viruddhashana **Diet:** BrF/ Midmor/ L / Snacks / Din/Late Night | | | | | |
| **Work:** Man. /Sed. /Lab. /Tra. /St. /Sit; Day/Nig.; **Hrs……….. Vishrama:**Less / Proper / Excess: **Hrs…** | | | | | |
| **Nidra:**  Reg / Irrg. **No. of Hrs.:\_\_\_Time of going to bed:\_\_Time of sleep onset:\_\_\_\_\_Dreams:** Y / N | | | | | |
| **Type:** Disturbed at intervals / Good initial sleep then no sleep / Waking for 2–3 hrs. then good sleep / No | | | | | |
| sleep whole night / Early waking / Sound sleep whole night / Divaswapa (Day sleep) | | | | | |
| **Mala:**  Reg / Irrg. / Const. / Loose **Freq.:……………….Odour…………… Colour………………** | | | | | |
| **Mutra:**  Burning / Dysuria **Freq.:…… Qty. ………………Odour…………… Colour……………** | | | | | |
| **Sweda:** Alpa / Sama / Ati **Odour** | | | | | |
| **Vyasana:** Cofee / Tea / Bidi / Cig. / Tob. / Alc. **Since………** | | | | | |
| **Is the diet & life style changed according to the season ?** Always / Occasional / Never | | | | | |
| **Menstrual Hist:** | | AOM…….AOMP………….Cycle - Reg./Irreg…….……..Days……..…….Flow……………. Menorrhagia / Metrorrhagia / Dysnen. / Leucorrhoea | | | |
| **Obstetric Hist**. | | No. of Conceptions …………No. of Deliveries ………Normal………..Surgical……………. Living……………………….M……………F………….Miscarriage / Abortion……………….. | | | |
| **History of Contraception** | | Temp. : Mech / Ch. / Oral / IUCD / Coi. Int / Abstinence  Perm. : Vasectomy / Tubectomy / Laparoscopic TL. | | | |

**General Physical Examination**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Pulse  (Radial) | Rate  ……….... | | Rhythm  ….………. | | Volume  ………. | |  | | Mouth | | Lips : Pink/Pale/Cyanosis/None | | | |
| Respiration | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Tongue : Coated/Clear/Dry/Moist./  Fissured/Inflamed/None | | | |
| Blood  Pressure | Sleeping  ………... | | Sitting  …...... | | Standing  ………… | |  | |  | | Teeth: White/Yellow/Stains/Carries   Even / Uneven | | | |
| Temperature | Buccal  ……… | | Axillary  ……….. | | Anal  ………… | |  | |  | | Gums: Gingivitis/Pyorrhea/  Bleeding / Spongy | | | |
| Built | Slender / Lanky / Muscular / Stocky / Obese | | | | | | | | Nails | | Pale / Pink / Spots / Clubbing / Lining / Bhangura | | | |
| Nose  (olfaction) | Good / Fair / Poor | | | | | | | | Skin | | Dry / Rough Oily / Moist. / Smooth / Eruptions. | | | |
| Hair | Black / Grey / White | | | | | | | | Complex. | | Whitish / Dark / Fair / White | | | |
| Eyes | Ptosis / Style / Pink / Pale /  Visual Acuity Pupils | | | | | | | | Fingers | | Good shape/Deformed | | | |
| Ears | Discharge / Pain / Deafness / None | | | | | | | | Lymph. Nodes | | Present / Absent | | | |
| Nose | Cy. of tip / DNS / Discharge / Epistaxis / None | | | | | | | | Oedema | | Localized / Generalized / Not Present | | | |
| **Health Problems frequently Faced.** | | | | | | | | | | Para. | |  | Para. |  |
| 1. | |  | |  | |  | |  | | Ha | |  | U Abc |  |
| 2. | |  | |  | |  | |  | | Wa | |  | M Abc |  |
| 3. | |  | |  | |  | |  | | ACR | |  | WC |  |
| 4. | |  | |  | |  | |  | | ACL | |  | HC |  |
| 5. | |  | |  | |  | |  | | CCwb | |  | TRR |  |
| 6. | |  | |  | |  | |  | | CCwob | |  | TCL |  |
| Family History : | | Fr. | | Br. | | PGFr. | | MGFr. | | PU. | | MU. |  |  |
| Mr. | | Sr. | | PGMr. | | MGMr. | | PA. | | MA. |  |  |

**Date :- / /**

**Place :- Signature of Surveyor/Student**

**Signature of the Teacher**