

**AYURVEDACHARYA (B.A.M.S.)
SECOND PROFESSIONAL B.A.M.S.**

**SAMHITA ADHYAYAN-2
(STUDY OF AYURVEDA CLASSICAL TEXT)
(SUBJECT CODE : AyUG-SA2)**

JOURNAL /ACTIVITY BOOK

Name of the student : _____

Institutional Roll No. : _____

Examination Reg. No. : _____

Academic Year : _____

(Name of the College)

(Approved by –National Commission for Indian System of Medicines, New Delhi &

Name of the University)

Name of the department

Batch- _____

Certificate

This is to certify that, Mr. / Ms. _____, Enrollment Number- _____ has satisfactorily completed the course of Practicals in (Subject Name) _____ prescribed by the (Name of University) as a part of the Second Professional B.A.M.S. Course.

Examination Seat No.: _____

Date of Examination- _____

Sign. Of Internal Examiner- _____

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JOURNAL /ACTIVITY BOOK
SAMHITA ADHYAYAN-2
(STUDY OF AYURVEDA CLASSICAL TEXT)
(SUBJECT CODE : AyUG - SA-1)

Journal Cum Activity Book

DEPARTMENT OF
SAMHITA, SIDDHANTA & SAMSKRITAM,
Name of the College

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PRACTICAL NO. 2,13,20

LEARNING THROUGH

VYAKHYANA-1

(Sutras listed in Table.4a of the syllabus)

No.

Sutra Reference:

Sutra:

Primary meaning

Vyakhyana

Difference in understanding after Vyakhyana:

PRACTICAL No. 3
OBSERVING THERAPEUTIC UTILITY OF SNEHANA AND SWEDANA

1. Task-1: Enlist snehayogas available in the hospital pharmacy

Sl No	Name of Sneha-yoga	Type of Snehadravya used	Reference as per label	Common indications

2. Task-2: Observe and enlist swedana procedures undertaken by patients in hospital ward

Patient-1:

Presenting complaints:

Type of sweda applied:

Details of sweda (materials, medicines etc.):

Effects of sweda as observed and described by patient:

Patient-2:

Presenting complaints:

Type of sweda applied:

Details of sweda (materials, medicines etc.)

Effects of sweda observed and described by patient:

Patient-3:

Presenting complaints:

Type of sweda applied:

Details of sweda (materials, medicines etc.)

Effects of sweda observed and described by patient:

Patient-4:

Presenting complaints:

Type of sweda applied:

Details of sweda (materials, medicines etc.)

Effects of sweda observed and described by patient:

Patient-5:

Presenting complaints:

Type of sweda applied:

Details of sweda (materials, medicines etc.)

Effects of sweda observed and described by patient:

PRACTICAL No. 4

IDENTIFICATION OF BAHUDOSHALAKSHANA IN PATIENTS

(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:	XYZ	So. Eco. Status:	Lower / Middle/ Upper
Address:		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Gender:		IPD no.	
Mo. No.		K/C/O	

Presenting complaints:

No	QUESTIONNAIRE TO ASSESS BAHUDOṢA LAKṢAṆĀ	Never	Occasional ly	Frequently	Always
1.	Do you feel proper hunger thrice a day? (morning, afternoon, night)	1	2	3	4
2.	Do you feel the food you eat lacks in taste?	1	2	3	4
3.	Do you feel any dislikeness towards those things that you like to do?	1	2	3	4
4.	Do you feel tired easily while engaged in any kind of work?	1	2	3	4
5.	Do you experience sadness without any particular reason?	1	2	3	4
6.	Do you feel reluctant to do chores?	1	2	3	4
7.	Do you have boils in your body?	1	2	3	4
8.	Do you experience body odour issues?	1	2	3	4
9.	Do you have raised reddish patches in your skin?	1	2	3	4
10.	Do you feel heaviness in your body?	1	2	3	4
11.	Do you have sleeplessness at night?	1	2	3	4
12.	Do you feel your mouth gets filled with thick saliva?	1	2	3	4
13.	Do you feel itchiness in your body parts?	1	2	3	4
14.	Do you oversleep?	1	2	3	4
15.	Do you experience restlessness?	1	2	3	4

16.	Do you experience weakness while engaged in any kind of work?	1	2	3	4
17.	Do you experience acid reflux?	1	2	3	4
18.	Do you see nightmares that interrupt your sleep?	1	2	3	4
19.	Do you feel any difficulty to understand things in a proper way?	1	2	3	4
20	Do you feel drowsy during day time?	1	2	3	4

Total score:

Interpretation: (Alpadosha - 20 – 40, Madhyamadosha - 41 – 60, Bahudosha – 61 -80)

Result: The given case exhibits Bahudosha/Madhyamadosha/Alpa dosha

Discussion in relation to the treatment given/planned:

PRACTICAL No.5
ASSESSMENT OF DISEASES BASED ON TRIVIDHA BODHYASANGRAHA
(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:	XYZ	So. Eco. Status:	Lower / Middle/ Upper
Address:		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Gender:		IPD no.	
Mo. No.		K/C/O	

VIKARAPRAKRUTI

Poorvarupa:

Rupa:

Samprapti:

Upasaya/anupasaya:

ADHISTHANA

Roga-adhithana (site of disease):

Rogamarga:

Dosha involved:

Dhatu/upadhatu/mala involved:

Srotas involved

Type of srotodushti:

SAMUTHANA (Causative factors)

Ahara:

Vihara:

Agantu:

Manasa:

Interpretation based on treatment adopted:

PRACTICAL No. 6
IDENTIFICATION OF ASHTA DOSHA IN STHOULYA

No.	Date:		
Name:	XYZ	Resident:	
Address:		So. Eco. Status:	
		Education:	
Age:	Preferably > 25	Occupation:	
Sex:		OPD no.	
Mo. No.		IPD no.	
Height:		K/C/O	
BMI		Weight:	
Symptoms of atisthaulya	Question to be asked		Rating
			Score (1-10)
Ayusho hrasa (decrease in quality of life)	How is your total satisfaction in life?		Least satisfied – 0 Most satisfied - 10
Javoparodha (loss of energy)	How energetic are you during your routine work?		Minimum – 0 Maximum - 10
Krichravayavayata (decreased libido)	How energetic are during sexual act?		Minimum – 0 Maximum - 10
Dourbalya (weakness)	How tired are you during routine daily activities?		Always – 0 Never - 10
Dourgandhya (bad odour)	How much bad body odor troubles you?		Maximum– 0 Minimum - 10
Swedabadha (excessive sweating)	How much do you sweat during daily activities?		Most – 0 Least - 10
Kshudatimatram (increased appetite)	How much are you affected by increased appetite?		Most – 0 Least - 10
Pipasatiyoga (increased thirst)	How much are you affected by increased thirst?		Most – 0 Least - 10
Total Score:			
Interpretation	Score above 40 – prone to atisthaulya		

Interpretation based on the score:

Discussion:

PRACTICAL No.7
CLINICAL OBSERVATIONS ON NIJA AGANTU RELATIONSHIP

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	
Presenting complaints			
History of present illness			
Relevant past history			
Discussion on Nija-Agantu relationship			

Signature of student

Signature of teacher

PRACTICAL No.8
CLINICAL OBSERVATIONS ON SHADUPAKRAMA

(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	

Presenting complaints

General line of management (as per case sheet)

Upakramas undertaken by the patient: (select whichever is relevant)

Langhana/Brumhana/Swedana/Stambhana/Rukshana/Snehana

Details of Upakramas performed (medicines, methods and duration)

Discussion on logic of Upakrama prescribed

Signature of student

Signature of teacher

PRACTICAL No.9
ASSESSMENT OF RAKTADUSHTI KARANA IN SPECIFIC CLINICAL
CONDITIONS
(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education :	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	
Presenting complaints			
Raktadushti nidana present (put tick marks for whichever is applicable)			
Ahara (food materials) – regular, excessive intake			
Food materials having teekshna, ushna			
Excessive use of amla, lavana, katu, skhara rasas (use of pickles, papads, chilly items etc.)			
Regular use of kulatha, masha, nishpava, tilataila, pindalu, mulaka etc.			
Regular intake of fish, water birds and animals etc.			
Excessive use of curd, mastu, sukta, sura, sauveeraka etc.			
Intake of viruddha ahara, puti (stale) and putrefied food			
Habit of over eating, adhyasana and ajeerna			
Vihara (lifestyle)			
Habit of day sleep after intake of heavy diet			
Excessive anger			
Excessive exposure to heat and wind			
Inhibition of chardi vega			
Improper/insufficient administration of sodhana in seasons			
Excessive physical exertion, injuries			
Aggravation in autumn season (sarat kala)			

Interpretation:

Signature of student

Signature of teacher

PRACTICAL No.10
OBSERVATIONS ON USE OF AGRYA AUSHADHA IN CLINICAL PRACTICE

Name of drug:

Category of agrya:

Drug Profile:

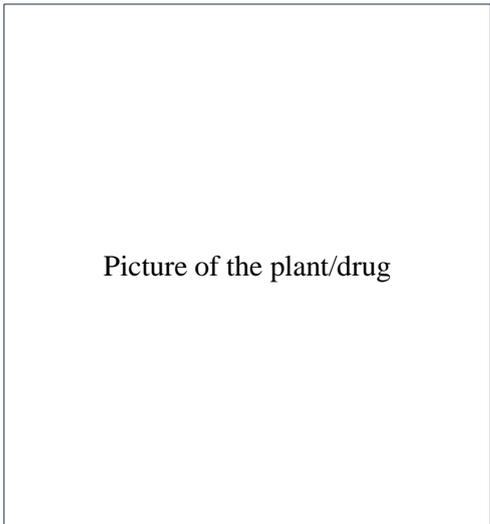
Botanical identity:

Rasa Guna Veerya

Vipaka Prabhava:

Parts used:

Therapeutic uses:



Important yogas:

Report on interview with Physicians on use of the drug in clinical practice:

Name of the physician:

Date of interview:

Information collected:

Student's impressions:

Signature of student

Signature of teacher

PRACTICAL No.11
ASSESSMENT OF DHATU-UPADHATU-MALA
PRADOSHAJAVIKARAS IN PATIENTS
 (Minimum five cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	

Presenting complaints

Assessment of dhatu-upadhatu-indriya pradosha vikaras

Symptoms present	Dhatu/Upadhatu/Mala involved

Interpretation:

Vridhhi of

Kshaya of

Probable Samprapti involving Dhatu-upadhatu-mala:

Signature of student

Signature of teacher

PRACTICAL No.14
CASE TAKING IN RELATION TO NIDANAPANCHAKA

(Minimum five cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education	I/ P/ S/ HS/ G/ PG
		Occupation	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	

Aetiological factors (Nidana)

Premonitory symptoms (Pragroopa)

Presenting complaints (Rupa)

Pathogenesis (Samprapti)

Relieving and aggravating factors (Upasaya-anupasaya)

Signature of student

Signature of teacher

PRACTICAL No.15
DIFFERENTIAL DIAGNOSIS OF SKIN DISEASES BASED ON
GUIDELINES ON KUSHTA
 (Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education :	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	

Presenting complaints

Feature	Presentation (use appropriate terms as per descriptions in Kushtanidana)	Dosha predominance	Probable diagnosis (type of kushta)
Varna (Color)			
Akriti (appearance)			
Srava (secretions)			
Sparsa (touch)			
Other associated symptoms (daha, kandu, sula etc.)			

Signature of student

Signature of teacher

PRACTICAL No.16
PRAMANA PARIKSHA
(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education :	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	
Status of health			
Measurements taken		Ratios	Interpretation

Signature of the student:

Signature of teacher:

PRACTICAL No. 17
IDENTIFICATION OF VIKARAVIGHATA BHAVA ABHAVA IN PATIENTS

Disease assigned:

Summary of group discussion:

Check list prepared after group discussions:

Factors identified as risk factors/ aggravating factors (vikara-vighata- abhava)	Factors identified as protective factors, factors against diseases (vikara-vighata- bhava)

Screening patients with the checklist: ((Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education :	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	
Risk factors present as per check list		Protective factors present as per checklist	

Interpretation:

Signature of student

Signature of teacher

PRACTICAL No. 18
EXPLORATION OF LOKAPURUSHA SAMYA VADA IN THE BACK GROUND
OF ONE HEALTH

Date of discussion:
Moderator:

Topic:

Group Members:

Major theme discussed:

Summary of discussion:

Important ideas evolved:

Signature of student

Signature of teacher

PRACTICAL No.21
LEARNING THROUGH SAMBHASHA PARISHAD

Group No.

Topic assigned:

Date of the parishat:

Methods/components of Vadamarga used in the parishat:

Details of conduct of the parishat:

Structured summary of the parishat:

Pratijna:

Hetu:

Udaharana:

Upanaya:

Nigamana:

Assessment by Faculty:

Signature of student

Signature of teacher

PRACTICAL No.22
SROTAS PROFORMA
 (Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education :	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		OPD no.	
Sex:		IPD no.	
Mo. No.		K/C/O	

Presenting complaints

Srotas involved	Whether causative factors of the particular srotodushti is present or not, If yes, give the details	Type of srotodushti (Atipravritti/sanga/siragr anthi/vimargagamana)	Interpretation:

Signature of student

Signature of teacher

PRACTICAL No.23
LEARNING THROUGH TANTRAYUKTI

(Minimum 15 different tantrayuktis selected from the list given in Table.4a of the syllabus)

No.

Sutra Reference:

Sutra:

Interpretation with tantrayukti:

New understanding by applying tantrayukti

PRACTICAL No.24

ASSESSMENT OF HEALTH THROUGH DHATUSAMYA PAREEKSHA

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address:		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		Sex:	
Question			Response
Are you usually free from health issues?			Yes/No
Do you have proper voice?			Yes/No
Do you have normal skin complexion/color/pigmentation?			Yes/No
Is your weight/BMI normal as per the age and gender?			Yes/No
Do you have proper physical strength ?			Yes/No
Do you have appetite at proper intervals?			Yes/No
Do you feel taste of the food you eat?			Yes/No
Does the food get digested within a proper time?			Yes/ No
Do you get sleep at proper time?			Yes/No
Is your sleep sound?			Yes/No
Do you get up fresh in the morning?			Yes/No
Is you sleep free from nightmares ?			Yes/No
Do you get proper stool evacuation daily?			Yes/No
Do you pass urine normally?			Yes/No
Do you have normal vision?			Yes/No
Do you have proper hearing capacity?			Yes/No
Do you receive smell normally?			Yes/No
Do you know taste properly?			Yes/No
Can you identify touch properly through skin?			Yes/No
Does your mind work properly?			Yes/No
Are you satisfied with your life?			Yes/No

(Interpretation: Scoring - Yes +1, No -1; Total score 15-20 – Very good in health, 10-15 – moderately healthy, below 10 – unhealthy)

Score obtained:

Status of health:

Signature of student

Signature of teacher

PRACTICAL No. 25

AGNI ASSESSMENT BASED ON TOLERANCE TO APACHARA

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address :		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		Gender	
Assessment Questionnaire			
1	Capability to tolerate irregularities in diet	Always capable to tolerate any type of abnormality/irregularity in food intake	Teekshnagni
		Digestion gets affected by considerable abnormality/irregularity in food intake	Samagni
		Fluctuating nature in tolerating abnormality/irregularity	Vishamagni
		Not capable to tolerate even minimum abnormality/irregularity	Mandagni
2	Type of Agni as assessed by standard tool*		

* (Singh, Aparna & Singh, Girish & Patwardhan, Kishor & Gehlot, Sangeeta. (2016). Development, Validation, and Verification of a Self-Assessment Tool to Estimate Agnibala (Digestive Strength). Journal of Evidence-Based Complementary and Alternative Medicine. 22. 10.1177/2156587216656117.)

Interpretation:

How much the observations conform together?

Signature of student

Signature of teacher

PRACTICAL No.26
TRIVIDHA ROGA VISHESHA VIJNANA IN DIAGNOSIS

(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address :		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		Gender	
Presenting complaints:			
Application of pratyaksha - Observations through different sense organs and other instruments			
Application of anumana			
Observed facts		Inferred facts	
Application of aptopadesa – Write the references/quotes/verses from Samhitas, textbooks or articles to justify/explain the conclusions			

Signature of student

Signature of teacher

PRACTICAL No. 27
ASSESSMENT OF UPASAYA AND ANUPASAYA IN PATIENTS

(Minimum three cases)

No.	Date:	Resident:	Rural/ Urban
Name:		So. Eco. Status:	Lower / Middle/ Upper
Address :		Education:	I/ P/ S/ HS/ G/ PG
		Occupation:	
Age:		Gender	
Desa	Jangal/Sadharana/Anoopa		
Presenting complaints:			
Probable Diagnosis			
Doshadushti:			
Doshaguna Dushti :			
Dhatudushti :			
Maladushti :			
Probable Disease Diagnosis if available:			

Upashaya- Anupashaya Pareeksha

Upashaya		Ahara	Aushadha	Vihar/Kriya	Kala	
	Dravya	1)	1)	1)	1) 2) 3) 4)	Ushna/Sheeta/Varsha/Durdina
		2)	2)	2)		
		3)	3)	3)		
Guna						
Karma						
Anupashaya		Ahara	Aushadha	Vihara/Kriya	Kala	
	Dravya	1)	1)	1)	1) 2) 3) 4)	
		2)	2)	2)		
		3)	3)	3)		
Guna						
Karma						

Interpretation:

Disease diagnosis confirmation based on Upashaya- anupashaya –

Probable line of Management based on Upashaya- anupashaya --

Signature of student

Signature of teacher