KMCT
AYURVEDA MEDICAL COLLEGE
Approved by NCISM and Affiliated to Kerala University of Health Sciences

TO WHOMSOEVER IT MAY CONCERN

This is to certify that the information in the attachment documents is verified by me and is true to the best of my knowledge

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

K.M.C.T. AYURVEDA MEDICAL COLLEGE
MANASSERY PO
MUKKOM
KOZHIKODE

Manassery PO, Mukkam, 673602, Kozhikode, Kerala
0495-229 4664 ayurveda@kmct.edu.in
www.kmctayurvedacollege.org

2.2.2
SPECIAL PROGRAMMES FOR SLOW PERFORMERS

QUESTION BANK

KRIYA SHARIRA PAPER-I

1-BASIC CONCEPTS

10-Mark questions

1.Define the terms Shareera & Shaareera. Explain Loka-Purusha Samyata. (2020/2016scheme)

2. Define srothas in the perspective of kriyasareera. Classify srothas both structurally and functionally. Name the moola sthana of each srothas. Describe Samanya srotodushti karana and lakshana. (2018/2012scheme)

3. Describe about the panchamahanhootasiddhanta. Explain the functions and representation of panchamahabhoota in the shareera. (2018/2012scheme)

4.Describe loka-purusha samaya. (2015/2012scheme)

5- Mark questions

1.Describe Triguna- Tridosha sambandha (relationship) (2020/2016scheme,2016/2010scheme)

2. Triguna and tridoshasambandha. (2020/2012scheme)

3. Discuss about the concept of Srotas in Ayurveda. (2019/2010scheme)

4. Describe the biological rhythms of tridoshas. (2019/2010scheme,2016/2016scheme)

5. Describe the relationship between annavaha srothas, grahani and agni. Substantiate the moolam of annavaha srothas. (2019/2016scheme)

6. Narrate the concept of lokapurushasamya. (2018,2017,2014/2010scheme), (2018,2017,2015/2012scheme)

7. Describe mutual relationship between Triguna, Tridosha and Panchamahabhuta. (2018/2016scheme)

8. Samanya-vishesha sidhanta. (2018/2012scheme,2017/2010scheme)

10.Definition and classification of Srotas. (2017/2010scheme)

11.Explain srushti utpatti krama. (2014/2010scheme)

12. Define triguna tridosha relation and lakshanas of triguna. (2014/2010scheme)

13. Explain the panchabouthik concept in Ayurveda at the level of dosha, dhatu and rasa. (2014/2012scheme)

3- Mark questions

1. Samanya visesha sidhanta. (2020,2019,2016/2012scheme)

2. General signs of Srothodushti. (2020/2010scheme) (2019,2017/2012scheme)

3. Loka Purusha Samyatwam. (2019/2010scheme)

4. Definition and classification of Srotas. (2019/2010scheme)

5. Triguna siddhanta. (2019/2010scheme)

6. Give a brief description of annavaha srotas with its mula sthana. (2019/2012scheme)

7. Describe mutual relationship between tiguna-tridosha and panchamahabhuta. (2019,2016,2015/2012scheme)

8. Synonyms of srotus. (2017/2010scheme)

9. Annavaha srotus. (2016/2012scheme)

10. Relationship between panchamahabhuta and shadrasa. (2015)
11. Udakavahasrothas. (2014/2012scheme)
12. Biological rhythm of tridoshas. (2015/2012scheme)

2-SAREERA&DOSHAS
10- Mark questions
1. Explain different purushas explained by Charaka. Justify the importance of Shatdhatu purusha in Ayurvedic view. (2019,2016/2012scheme)
2. Define Purusha. Describe various constitutions of Purusha. State which of these Purusha is recognized by Ayurveda and why. (2018/2012scheme)
3. Define Shareera and Substantiate 'Dosha Dhatu Mala moolam hi. Shareeram. (2016/2010scheme)
5- Mark questions
1.Define the term Sareera and Kriya. Write four synonyms of Sareera with their meaning. (2020/2012scheme)
2.Enlist the components of purusha and state the importance of shatdhatupurusha. (2019/2012scheme, 2019/2016scheme,2015/2010scheme)
3.Define sareera. (2019/2016scheme)
4.Explain the concept of Chikitsa Purusha in Ayurveda. (2017/2010scheme)
5.Explain the concept of Chaturvimashatika Purusha. (2017/2010scheme)
6.Define purusha and its classifications. (2015/2012scheme)
3- Mark questions
1. Shat dhathu purusha (2020/2010scheme,2018,2017/2012scheme)
2. Synonyms of Sharira. (2020/2010scheme)
3. Define Purusha. (2017/2010scheme)
4. Synonyms of shareera. (2017/2010scheme)
5. Chikitsa purusha. (2016/2010scheme,2015,2014/2012scheme)
6. Rashi purusha. (2014/2010scheme)
7. Define Shareera. (2014/2012scheme)
3-TRIDOSHA
10- Mark questions
1.Discuss various doshagathy. Explain causative factors of dosha kopa of each dosha. (2019/2010scheme)
5- Mark questions
1. Where is vata, pitta and kapha formed in the body? (2019/2016scheme)
2. Praakrata, vaikrata dosha. (2018/2010scheme)
3. Relationship between dosha and shadrasa. (2018/2010scheme)
4. Describe the interrelationship of dosha with ritu and rasa. (2014/2012scheme)
3- Mark questions
1. Diurnal and seasonal changes of dosha states in the body. (2020/2012scheme)
2. Define Doshagati. (2020/2010scheme)
3. Dosha Bhedas. (2019/2010scheme)

4. Biological rhythms of tridosha on the basis of age-day-night-food. (2018/2016scheme)
5. Which among the shad rasas cause increase and decrease of pittha dosha? (2016/2012scheme)

4-VATA DOSHA

10- Mark questions

1. Define dosha. Classify Vata dosha. Describe the role of vata dosha in gastrintestinal physiology. (2019/2012scheme)
2. Explain nirukthi, sthana and guna of Vata Dosha. Describe its general functions and vrudhi kshaya lakshana. Describe the divisions of Vata dosha. (2016/2012scheme)
3. Diseases of udaana vaayu vikrati. (2015/2010scheme)

5- Mark questions

1. Define dosha and explain the functions of Vata dosha. (2020/2016scheme), (2018,2014/2012scheme)
2. Functions of Vyanavata. (2019/2016scheme)
3. Classify the various locations of vata into aasaya, organs (sites), dhatu and indriya with the help of a table. Locate its chief seat. (2017,2019/2016scheme)
4. The functions of each moiety of Vata. (2018/2010scheme)
5. Apana vayu and its karma. (2017/2010scheme,2017/2012scheme)
7. prana vata and its functions. (2017,2015/2010scheme)
8. Normal functions of vata dosha according to Charaka. (2016/2010scheme)
Explain samana vata in detail. (2014/2010scheme)

3- Mark questions

1.Types of Vaata. (2020/2010scheme)
2.Synonyms of vata. (2018/2010scheme,2014)
3.Functions of Apanavaata. (2018/2010scheme,2014,2016/2012scheme)
4.vata sthana. (2017/2010scheme)
5.Prana vata. (2017/2012scheme)
6.Vyana vayu location and function. (2015)

5-PITTA DOSHA

10- Mark questions

1. Describe the seasonal increase and decrease of doshas. Point out the rasa and guna responsible for these changes with respect to pittadosha. (2019/2012scheme)
2. Explain pitta dosha nirukthi, general locations, types of pittas and its role in digestion. (2017/2012scheme)
3.Define dosha. Explain the gunas, bhedas, bhedanusara guna and karms of pittha dosha. (2015/2016scheme)

5- Mark questions

1.The properties of pitta dosha. List the features of pitta vridhi and kshaya in the body. (2020/2012scheme)
2.Functions of Ranjaka pitta. (2020/2010scheme)
3. Mention the types and functions of Pitha dosha. (2019/2010scheme,2018/2012scheme).

4. General properties and functions of Pitta. (2019/2016scheme)
5. Classify the various locations of pitta into aasaya, dhatu, malam and indriya with the help of a table. Locate its chief seat. (2018/2016scheme, 2019/2012scheme)
6. Explain the specific functions of bhrajaka pitta and alocaka pitta. (2018/2012scheme)
7.Pachaka pitta and its functions. (2017/2010scheme)
8. Explain the function of alochaka pitta. (2014/2010scheme)

3- Mark questions

1.Sadhaka pitta. (2020/2016scheme,2019,2014/2012scheme)
2.Locations of Pitta. (2020,2017/2010scheme)
3.Pitta karma. (2018/2012scheme)
4. Accha pitta. (2017/2010scheme)
5. Ranjaka pitta. (2017/2012scheme,2016/2010scheme)
6. Alochaka pitta. (2014/2010scheme)
7. Pittha guna. (2014/2010scheme)

6-KAPHA DOSA

10- Mark questions

1.Write nirukti and general functions of kapha dosa. Explain each moiety of kapha and their functions. (Dec 2020/2012 scheme)
2.Define the dosa. Explain the gunas, bhedas, bhedanusara guna and karma of kapha dosa. (Sept 2016/2012 scheme)
3.Explain the location, function, vridhikshaya of kapha dosa. (Feb 2014/2012 scheme)
4.Explain nirukti, sthana, gina of kapha dosa. Describe its general functions and vridhi kshaya lakshana. Describe the divisions of kapha dosa. (Sept 2014/2012 scheme)

5- Mark questions

1.Enumerate the general locations and specific location of kapha dosa. (Sept2017/2012scheme, Oct2019)
2.Stana and karma of kapha dosa. (Mar 2018/2012 scheme)
3.Kledaka kapha. (Mar 2016/2012 scheme)
4.Explain the types and functions of kapha. (Feb 2015/2012 scheme)
5.Mention the seasons of chaya, prakopa, prasama of kapha dosa. (Mar2015/2012scheme)

3- Mark questions

1.Kledaka kapha. (Dec 2020/2016 scheme)
2.Sleshaka kapha. (Mar2019/2016scheme)
3.Types of kapha. (Oct2019/2016scheme)
4.List the factors responsible for kapha dosa. (Sept 2015/2012scheme)

7-CAUSES OF DOSHA VRIDHY AND KSHAYA

5- Mark questions

1.Analyse kapha vridhi lakshana. (Sept2014/2010scheme, Mar2016, Mar2017, Nov2020)
2.Describe the etiological factors involved in the vridhy of kapha dosa. (Mar2019/2016scheme)
3.Explain vridhikshaya lakshana of pitta. (Sept2015/2010scheme,

Sept2016/2012scheme)
4.Vata vridhikshaya lakshana. (Sept2015/2012scheme)
3- Mark questions
1.Vata kshaya. (Mar2017/2012scheme)
2.Etiological factors responsible for dosavridhi. (Feb2014/2012scheme)

8-PRAKRUTHI
10- Mark questions
1.Compare the presentation of each dosa prakruthy with the involved gunas of respective dosas with 3 examples of vata pitta kapha prakruthy lakshana. Define prakruthy. (Mar2019/2012scheme)
2.Define prakruthy. Explain kapha prakruthy features. State which manasika dosa is related with this prakruthy. Mention at least 4 examples to satisfy this contention. (Mar2019/2016scheme)
3.Define prakruthy and explain the different classification of prakruthy. (Mar2017/2010scheme)
4.Enlist the properties of each dosas. Describe what difference you can find out between a kapha prakruthy individual and a vata prakruthy iindividual suffering from a vatikaroga. (Oct2017/2016scheme)
5- Mark questions
1.Define prakruthy and describe manasaprakruthy. (Oct2019/2016scheme, Dec2020/2012scheme)
2.Describe the intrauterine and extrauterine factors influencing prakruthy. (Oct2019/2012scheme)
3.Enlist 10 characters of pittaprakruthy. (Mar2018/2016scheme, Sept 2017/2012scheme)
4.Define prakruthy and mention the lakshnas of pittaprakruthy. (Sept2016/2012scheme)
5.Explain different factors responsible for the genesis of prakruthy. (Mar2016/2010scheme)
6.Define prakruthy. Explains the factors which influences the formation of prakruthy. (Sep2015/2012scheme)
7.Define prakruthy. Explain features of vataprakruty. (Feb2014/2012scheme)
8.Enumerates the types of prakruthy. (Sept2014/2010scheme)
3- Mark questions
1.Aanookatwa of prakruthy. (Nov2020/2010scheme)
2.Enumerate the factors responsible for the determination of prakruthy. (Mar2019/2012scheme)
3.Mention any 2 clinical application of prakruthy. (Sept 2017/2012scheme)

9-NERVOUS SYSTEM
10- Mark questions

1.Describe the various areas of the brain where memory is processed. Classify various types of memory. State how memory is consolidated. Which moiety of which dosha is involved in smrithi? (2018/2016scheme)
2.Vamana is one among the panchakarma therapy. How does this process affect tridoshas? (2016)
3.What are the factors initiating the vomiting reflex. Where is the vomiting centre situated and describe the mechanism of vomiting? (2018/2010scheme)
4.Describe various hypothalamic nuclei and their individual functions with the help of a table. Narrate temperature regulation in detail. In which all ways are hypothalamus related with the pituitary? (2018/2012scheme)
5.Explain the divisions of nervous system, autonomous nervous system and the functions of spinal cord? (2017/2012scheme)
6.Define autonomic nervous system. Explain the differences between sympathetic and parasympathetic nervous system in detail? (2015/2012scheme)
7.Explain the functions of thalamus and hypothalamus. Brief the role of vata and its types to bring about these functions? (2014/2012scheme)

5- Mark questions

1. Actions of sympathetic and parasympathetic nervous system? (2020/2012scheme)
2.Explain the physiology of sleep and benefits of sleep? (2020/2012scheme)
3.Functions of cerebral cortex? (2020/2016scheme)
4.Name the components of basal ganglia. Describe any two functions? (2019/2012scheme)
5.Fuctions of various hypothalamus nuclei? (2019/2012scheme)
6.Elaborate the functions of thalamus? (2019/2012scheme)
7.Explain the specific functions of Amygdala? (2019/2016scheme)
8.Explain functions of cerebellum? (2018/2016scheme)
9.What is Broadman area. Explain the areas and functions of frontal lobe of cerebral cortex? (2018/2016scheme)
10.What are receptors. Classify them and explain their functional properties? (2018/2016scheme)
11.Explain the motor tract from primary motor area to spinal cord? (2018/2016scheme)
12.What is a synapse. Mention the functional basis of a synapse? (2018/2012scheme)
13. Differentiate between slow pain and fast pain? (2017/2012scheme)
14.Autonomous nervous system? (2016/2012scheme)
15.Describe the functions of hypothalamus? (2015/2012scheme)
16.Describe the two divisions of the autonomic nervous system? (2015/2012scheme) 17. Production and functions of cerebro spinal fluid? (2014/2012scheme)
18.Explain the mechanism of formation, circulation and drainage of CSF? (2014/2012scheme)
19.Basal ganglia, its functions and disorders? (2014)
20.Define memory and types? (2014)
21.Explain sleep stages and mention usual indications of EEG? (2014)
22.Swapnabheda. (2014)

23.Enumerate the functions of sympathetic system. How does it act? (2013)
24.Describe the sensory and motor areas of cerebral cortex? (2011)
3- Mark questions
1.Name the EEG waves. Which waves are prominent in deep sleep? (2019/2012scheme)
2.Red nucleus. (2019/2016 scheme)
3.Primary visual area. (2019/2016scheme)
4.Broca's area. (2019/2016scheme)
5.Describe the function of limbic system? (2019/2012scheme)
6.Enumerate properties of receptors? (2019/2012scheme)
7.Visual area and its functions. (2018/2012scheme)
8.EEG. (2018/2016scheme)
9.Functions of CSF. (2017/2012scheme)
10.Name the stages of sleep. Which stage is important for consolidation of memory? (2017/2012scheme)
11.Why the deep tendon reflexes are exaggerated in UMN lesions? (2017/2012scheme)
12.Memory. (2016/2012scheme)
13.Brain-bridge reflex. (2015)
14.How is a nerve impulse transmitted across a synapse? (2015/2012scheme)
15.Name ascending tracts with functions? (2014/2012scheme)
16.Neuroglia. (2014/2012scheme)
17.Types of memory. (2014/2012scheme)

10-DHATU, RASADHATU, RAKTADHATU, MAMSADHATU
10- Mark questions
1. Explain the vridhi and kshaya of Rakta dhatu and explain its panchabhoutikatwa. List the various contents of blood with normal values of each. (Apr 2020/2016 scheme)

2. Enumerate the Dhatuparinama nyayas. Explain them by comparing the utility in understanding the dhatuparinama process. (1+3+3+3) (Mar 2020/2010 scheme)

3. Define Upadhatu. Explain their formation, enumerate them, write the differences between Dhatu & Upadhatu. (2+2+3+3) _ (Oct 2019/2016 scheme)

4. Discuss various Dhathu poshana theories with their applied significance. (Mar 2018/2010 scheme)

5. Define Upadhatu. Enumerate upadhatus of saptadhatus. Explain upadhatus of Rasa dhatu. (1+3+6) (Mar 2018/2012 scheme)

6. Define dhatu. Explain Dhatu poshana nyayas. Explain Rasa dhatu in detail.

(Mar 2017/2012 scheme)

7. Enumerate the Dhatuparinama nyayas. Explain any two nyayas by comparing the utility in understanding the dhatuparinama process. Narrate the concept of poshaka and stayidhatu. (1+6+3) (Sept 2017/2012 scheme)

8. Mention the synonyms of Rakta and features of Sudha Rakta and vridhi kshaya lakshana of Rakta dhatu. Explain Rakta Vaha Srothas and Rakta Sara Purusha lakshna. Name the stages of Erythropoiesis. (5+3+2=10) (Mar 2016/2012 scheme)

9. Define and describe the concepts of Dhathu and Saara. State the similarities and dissimilarities between them. (5+5=10) _ (Feb 2015)
10. Describe the Dhatu Poshana Nyayas and mention the limitations of any one among them. (9+1) (Mar 2015/2012 scheme)

11. Describe the utpatthi, sthaana and samvahana of Rasa dhatu. Explain its karma, pramana, upadhatu and dhatumala. Mention the features seen in its sarata. (4+4+2) (Feb 2014/2012 scheme)

12. Explain the concept of Rakta dhatu and describe the mechanism of coagulation of blood in detail.

(5+5=10) (Sept 2014)

13. Explain the Dhatu poshana nyayas with its merits and demerits. (Sept 2014/2012 scheme)

5- Mark questions
1. Explain Khale-kapota nyaya. (Apr 2020/2012 scheme)

2. List the dhatus and malas which are in connection with kapha dosha. Narrate the interdependence of doshas with dhatus and malas with a suitable example. (Apr 2020/2016 scheme)

3. Enumerate the characteristics of suddharakta. (Mar 2020/2010 scheme)

4. Circulation of Rasadhatu. (Oct 2019/2016 scheme)

5. Mention about the kedarikulya nyaya and explain its merits and demerits. (Mar 2019/2012 scheme)
6. Explain the utpatti, karma, vruddhi and kshaya of mamsadhatu. (Mar2019/2012 scheme)
7. Describe formation of rasadhatu. (Mar 2019/2016 scheme)
8. Explain upadhatu and list dhatumalas. (Oct 2019/2012 scheme)
9. Vriddhi Lakshanas of Rasadi Dhatus. (Sept 2018/2010 scheme)
10. Shuddha stanya lakshana. (Mar 2018/2010 scheme)

11. Functions of Rasa dhatu. (Mar 2018/2010 scheme)

12. Features of sudha raktha. (Mar 2018/2016 scheme)

13. Panchabhouthikatva of raktha dhathu. (Mar 2018/2016 scheme), (Sept 2018/2010 scheme)

14. How does rakta exhibit the characteristics of all the bhootas. (Oct 2017/2016 scheme)

15. Explain the utpatti, karma, vruddhi and kshaya of mamsa dhatu. (Mar2017/2010 scheme)

16. State the concept of upadhatu and brief about stanya. (Mar 2017/2012 scheme)

17. Enlist the upadhatus of each dhatu. (Oct 2017/2016 scheme)

18. Enumerate the pramana of all the dhatus. (Sept 2016/2010 scheme)

19. Upadhatu. (Sept 2015) (Sept 2016/2010 scheme)

20. Vruddhi lakshanas of mamsa dhatu and mootra. (Mar 2015/2012scheme)

21. Describe various dhathuparinama nyayas. (Feb 2015)

22. List the differences between dhathu and upadhathu. (Feb 2014)

23. Enumerate the dhatu malas of all the dhatus. (Sept 2014/2012scheme)

3- Mark questions
1.Synonyms of Raktadhatu with its kshaya lakshana. (Apr 2020/2012scheme)
2. Enlist the dhatumalas. (Apr 2020/2016 scheme)

3. Enlist the drawbacks of ksheeradadhinyaya. (Apr 2020/2016 scheme)

4. Formation of Rasa dhatu from Aahara rasa. (Apr 2020/2016 scheme)

5. Dhatu Malas. (Mar 2019/2010 scheme) (Mar 2019/2012 scheme)

6. Manifestation of kshaya and vriddhi lakshana of Rakta dhatu. (Oct 2019/2012 scheme)

7. Khale kapota nyaya. (Mar 2018/2016 scheme) (Mar 2019/2010scheme)

8. Formation of Mamsa dhathu. (Mar 2018/2016 scheme)

9. Define dhatu. (Mar 2018/2010 scheme)

10. Enlist the drawbacks of Ksheeradadhinyaya. (Sept 2017/2010scheme) (Sept2018/2012 scheme)

11. Features of sudha rakta lakshana. (Mar 2017/2012 scheme)

12. Pramana of dhatus. (Mar 2017/2010 scheme)

13. Dhatu parinati kala. (Mar 2017/2010 scheme)

14. Dhatu mala. (Mar 2016/2010 scheme)

15. Mamsa vruddhi kshaya lakshana. (Mar 2016/2010 scheme)

16. Define upadhatu and explain upadhatu sankhya. (Mar 2016/2010scheme

17. Panch bhautik aspect of rakta dhatu. (Feb 2015)

18. Raktha vruddhi lakshana. (Feb 2014/2012 scheme) (Sept 2016/2010scheme)

2-MEDODHATU, ASTHIDHATU, MAJJADHATU, SHUKRADHATU

10- Mark questions

1. Explain location, properties, functions, and pramanapfshukradhatu. (3+3+3+1) (Mar 2019/2016 scheme)

2. Explain majjadhatu in detail, mention its saarata. Explain the types of bone marrow with its functions. (Mar 2019/2012 scheme)

3. Explain location, properties, functions and pramana of shukradhatu. (Mar2019 /2016 scheme)

3. Explain hormonal regulation of spermatogenesis. Explainshukladhatu and its brief features. (Oct 2019/2012 scheme)

5.Describeuttpatti, sthana, guna, and karma of shukradhatu. Explain the process of spermatogenesis. (Mar 2016/ 2010 scheme)

5- Mark questions

1. Describe asthidhatu and explain asthisaralalakshana. (Oct 2019/2012 scheme)

2. Explain majjadhatu formation, function, vridhi, kshaya, and saralakshna. (Mar2017 /2012 scheme. Oct 2019/2016 scheme)

3. Describe the formation location and functions of majjadhatu. (Oct 2019/2016scheme)

4. Describe the characterstics of an individual with asthisara. (Sept 2018/2012 scheme)

5. Shukrasaraparushalakshna. (Feb2014, Mar 2018/2012 scheme)

6. Enumerate Shudhashukralakshanas. (Sept 2016,2017/2010 scheme, Mar 2018 2012 scheme)

7. Explain how asthi and vata are related. (Oct 2017 /2016 scheme, Mar 2018 /2012 scheme)

8. Explain how asthi and vata are related. (Oct 2017/2016scheme)

9. Described any three physical and two psychological characterstics of shukrasarapurusha. (Sept 2017/ 2012 scheme)

10. Explain shukradhatu in detail. (Mar 2017/ 2010 schem)

11. Describe the formation of medodhatu and explain medasarapurusha lakshna. (Mar 2016/2010 scheme)

12. Shukravahasrotas and narrate the functions of testosterone. (Mar2016/2012 scheme)

13. Functions of meda. (Sept 2015)

14. Define shudhashukla and explain the composition of semen. (Feb 2015)

15. Explain asthidhatukshaya and its management. (Feb 2015)

16. Medovridhikshayalakshna. (Sept 2014/ 2012 scheme)

17. Medovridhilakshna and pureeshavridhilakshna. (20132014)

18. Utpatti of asthidhatu, its vridhi, kshaya, lakshanas. (2001)

19. Explain guna and karma of medodhatu and medovahasrotas. (2001)

3- Mark questions
1. Explain asthidhatu vridhi lakshana. (Apr (Dec) 2020)

2. Paanchbhoutikatva of medodhatu (Oct 2019/2016scheme)

3. Pecularity of dosharekation of asthidhatu. (Sept 2019)

4. Features of sudhashukra. (Mar 2018/2016scheme)

5. Functions of majjadhatu. (Sept 2018/2016scheme)

6. Functions of medadhatu and features of medovridhi. (2013,2014, Sept 2018)

7. Kshaya of shukradhatu. (Sept 2018/2016 scheme)

8. Mention three physiological characterstics of medosarapuusha. (Mar2018/2012scheme)

9. Asthisaraand majjasarapurushalakshna. (Mar 2015/2012scheme)

10. Pramana of shukradhatu. (Sept 2015)

11. Vridhi of majjadhatu. (Sept 2015)

11-BLOOD

10- Mark questions

1. Define erythropoiesis and describe its stages in detail. (2019/2016scheme), (2016/2012scheme)

2.. Describe haemopoiesis and various stages of erythropoiesis. Chart out the cardinal functions of each type of blood cells with the help of a table. Describe various steps in the formation of raktha from rasa. (2018/2012scheme)

3.Define hemostasis. Enumerate coagulation factors and explain the mechanism of coagulation. (2017/2012scheme)

5- Mark questions

1.Composition of blood. (2019/2016scheme)

2. Functions of platelets. (2018/2016scheme)

3. Blood clotting factors. (2018/2016scheme)

4. Erythropoiesis. (2018/2016scheme), (2017/2012scheme), (2015/2012scheme)

5. Types of anemia. (2018/2016scheme)

4. Increase of bilirubin in various types of jaundice. (2018/2016scheme)

7. Clotting cascade. (2018/2016scheme)

8. Name the plasma proteins and enumerate their functions. (2017/2012scheme)

9. Mention the mode of action of any five anticoagulants. (2017/2012scheme)

6. Enlist the factors necessary for erythropoiesis. (2017/2012scheme)

7. How is bilirubin formed and excreted in the body? (2017/2012scheme)

12.Physiological basis of classification of blood groups. (2015/2012scheme)
13. Hemopoiesis. (2014/2012scheme)
14. Formation, properties and functions of platelet. (2003)

3- Mark questions

1.Types of hemoglobin. (2019/2016scheme)
2. Functions of bone marrow. (2019/2016scheme)
3. Serum creatinine. (2018/2016scheme)
4. Plasma proteins and A:G ratio. (2018/2016scheme)
5. Define clot retraction and fibrinolysis. (2017/2012scheme), (2015/2012scheme)
5. Enumerate the properties of WBCs. (2017/2012scheme)

6. Which organ is the 'graveyard' of RBC? Why? (2017/2012scheme)

8. Jaundice. (2017/2012scheme), (2015/2012scheme)
9. Plasma protein functions. (2016/2012scheme)
10.Types of anemia. (2015/2012scheme)
11.Describe the rhesus factor blood grouping system. Why is it called rhesus factor? (2015/2012scheme)
12.What are macrophages. Which type of blood cell transforms into macrophages. (2015/2012scheme)
13.Type of leucocytes. (2015/2012scheme)

12-IMMUNITY

10- Mark questions

1. Define and classify immunity. Compare the mechanisms of each. What is auto immunity. Define the Ayurvedic version of immunity. (2018/2016scheme)

2. Ayurveda is renowned for 'immune booster' medicines. Name the different lines of defence in our body. Discuss the function of different WBCs and their subtypes. Mention any two states where immune function is altered with the mechanisms involved. (2017/2012scheme)

5- Mark questions

1.Cell mediated immunity. (2018/2016scheme)
2.Define immunity and its types. (2015/2012scheme), (2014/2012scheme)

3- Mark questions

1.Artificial immunity. (2019/2016scheme)
2. Auto immune diseases. (2019/2016scheme)
3. Innate immunity. (2017/2012scheme), (2015/2012scheme)

4. Types of immunity. (2016/2012scheme)

RACHANA SHAREERA

1-SAREEROPAKRAMANEEYA SHAARIRA

10- Mark questions

1. Explain sharira and shareera, its importance and division. (Mar 2019/2010 scheme)

2. Define sharira and shareera and explain mrithasharira samshodhana vidhi in detail. (Sept 2018/2012 scheme)

5- Mark questions

1. Shadangatwa of sharira. (Sept 2019/2010 scheme), (Mar 2019/2010 scheme)

2. Pancha bhouthikatwa of sareera and sukshma sareera.

(Mar 2019/2010 scheme), (Mar 2016/2012 scheme), (Oct2019/2016 scheme), (Mar 2018/2016 scheme)

3. Dhathu bheda purusha.
(Sept2017/2010scheme), (Mar2019/2010scheme), (Oct2016/2012), (Mar 2016/2012scheme), (Mar2019/2016scheme)

4. Chaturvimshati dhatu purusha. (Oct2018/2016scheme)

5. Branches of anatomy. (Sep2018/2012scheme), (Oct2019/2012scheme)

6. Embalming process according to Ayurveda. (Feb2014/2012scheme), (Oct2016/2012scheme), (Mar2019/2016scheme)

7. Definition of sharira and shareera and enumerate Pratyanga. (Feb2014/2012scheme), (Mar 2019/2012scheme)

8. Karma purusha and its qualities. (Feb2014/2012scheme), (Oct2017/2016scheme)

3- Mark questions

1.Write a short note on pratyangas. (Mar 2018/2016scheme, Nov 2013)

2.Definition of shareera and shareeram. (Mar 2017/2012 scheme)

3. Shadanga. (2014)

4.Write a short note on purusha and shareera. (Nov2013)

5.Importance of shareera sastra. (2012,2014 scheme)

6. Sapta dhatu purusha. (2012)

2-EMBALMIMG

5- Mark questions

1.Body preservation method. (Sept 2019/2010 scheme), (Oct2019/2016 scheme)]

3- Mark questions

1.Body preservation method. (Oct2017/2016 scheme)

3-ANATOMICAL TERMINOLOGIES

5- Mark questions

1.Importance of surface anatomy. (Oct2016/2012scheme,2011)

2.Explain various classification of epithelial tissue with example. (Nov2013)

3- Mark questions

1. Anatomical position and planes of the body. (Mar2019/2010scheme), (Mar2018/2012scheme)

2. Abduction and adduction. (Sept 2019/2010 scheme)

3. Ipsilateral and abduction. (Oct2018/2016 scheme)

4-PARIBHASHA SHAARIRA
5- Mark questions
1. Snayu and kandara. (Mar 2019/ 2016 scheme)
2.Explain Rajju and Seevani. (Oct 2019/2016 scheme)
3.Explain rajju asthi sangaatha and seemantha in detail. (Mar 2018/2012 scheme)
3- Mark questions
1. Jaala. (Mar 2019/2012 scheme)
2. Koorcha and seemantha. (Mar 2018/2016 scheme)
3. Snayu. (Mar 2018/2012 scheme)
4. Seevani. (Sep 2017/2010 scheme)
5. Koorcha and kandara. (Feb2014/2012 scheme, 2013)
6. Jaala serevani. (2014,2013)
7. Snayuprakara with examples. (2014)
8. Seemantha and seevani. (2012)

UNIT-2
1-GARBHA SHAARIRA
10- Mark questions
1. Sudhasukrartava lakshana, garbhavridhikara bhava and aparanirmana. (2019/2016scheme)
2. Niruktu of garbha with monthly development. (2018,2017-2016 scheme,2012)

3. Garbhotpadaka bhava & derivatives. (2018/2016 scheme)
4. Masanumasika garbhavridhikrama. (2020,2018-2016 scheme)
5.Garbha & role of panchamahabhootha in the formation of garbha & garbhodpadaka bhava. (2014,2015-2010 scheme,2017)
6. Sudhasukrartava and garbhotpadaka bhava. (2012)
7. Garbha Panchabhauthik parivridhi, Garbhotpadaka bhava &Linga nirnaya. (2017/2016 scheme)
5- Mark questions
1. Beeja beejabhaga beejabhagaanga avayava.

(2019/2016 scheme), (2018/2010 scheme)
2. Angapratyanga utpatti. (2019/2016 scheme, 2018)

3. Masanumasika garbhavridhikrama. (2018,2019)
4. Sudhasukrartava lakshana. (2018)
5. Linganirnaya. (2018/2016 scheme)
6. Garbhavridikara bhava. (2018/2016 scheme)
7. Garbhaposhanam. (2014)
8. Garbhotpadaka samagri and bhavas. (2013,2014 /2012 scheme,2018)
9. Garbhotpadaka bhava. (2012,2914)
10. Pramana& Sudhasuklartava lakshana with dusting. (2012,2013)
11. Aparanirmana. (2012,2011)
12. Garbhalinganirnayotpatti. (2012)

3- Mark questions
1. Sudha and Dushta Sukla lakshana. (2018)
2. Linganirnaya. (2019/2016 scheme)
3. Garbhalingajnanam. (2014/2012 scheme)
4. Baahyartava. (2012)
5. Dauhrda. (2018/2016 scheme)

2-EMBRYOLOGY
10- Mark questions
1. Garbha & role of panchamahabhootha in the formation of garbha & garbhodpadaka bhava. (2014,2015/2010 scheme,2017)

2. Define fetal circulation. (2014)

3. Define garbha and month wise development. (2013)

4. Explain shudha sukrsartava lakshana and garbhotpadaka bhavas. (2012)
5- Mark questions
1. Pramana and lakshana of shudha sukra & Sudha artava. (2013, 2014, 2012)
2. Garbhotpadaka bhava. (2014,2012)
3. Aparanirmana. (2012)

-OSTEOLOGY
10- Mark questions
1. Describe the features, muscle attachment and clinical anatomy of scapula. (Sep2019/2010 scheme)

2. Explain in detail the femur bone with well labelled diagram. (Oct2019/2012 scheme)

3. Mention the regional classification of bones. Describe the femur in detail. (Mar 2018/2016 scheme)

4. Mention the regional classification of bones. Describe the femur in detail. (Mar 2018/2016 scheme)

5. Name the type of vertebrae. Explain typical thoracic vertebrae. (Sept 2017/2010 scheme)

6. Enumerate the bones of the upper limb. Describe upper end and lower end of the humerus with the muscle attachment. Mention its clinical aspects. (Mar 2016/2012scheme)

7. Classification of bones according to Ayurveda and modern view with examples and explain the parts of scapula. (Feb 2014/2012 scheme)

8. Name the classification of the bone with example and explain scapula with muscle attachment. (2012)

5- Mark questions

1. Type, location, determination of side and clinical anatomy of clavicle. (Sept 2019/2010 scheme), 2014, 2015, (Mar 2018/2012 scheme), (Sep2018/2012scheme)
2. Lower end of humerus. (Sept2019/2010 scheme), (Oct2016/2012 scheme)

3. Sternum. (Mar 2019/2010 scheme)

4. Classification of bones. (Sept 2019/2010scheme)

5. Explain the upper end of the bone ulna. (Mar 2019/2016 scheme)

6. Explain the upper end of the bone ulna. (Mar 2019/2016 scheme)

7. Explain the atlas bone with diagram. (Oct2019/2012 scheme)

8. Explain the types of ossification. (Oct2019/2012 scheme)

9. Explain the features and muscle attachment of upper end of femur. (Oct2019/2016 scheme)

10. Explain the typical vertebrae with muscle attachment. (Mar 2019/2012 scheme)

11. Pneumatic bone. (2014, Sept 2018/2012 scheme)

12. Features of typical cervical vertebrae. (2012,2014, March2018/2012scheme)

13. Explain the upper end of the humerus. (2012, Mar 2017/2012scheme)

14. Axis. (Sep2017/2010 scheme)

15. Sternal angle. (Sept 2017/2010 scheme)

16. Body of scapula. (Oct 2017/2016 scheme)

17. Features of lower end and upper end of the femur. (2012,2015)

18. Features of first rib. (2014)

19. Mandible. (2014)

20. Patella. (2010,2014)

21. Describe the body of the scapula with its muscle. (Nov2013)

22. Characteristics of typical rib. (2012)

23. Parts of the pelvic bone. (2012)

24. Number of bones according to Ayurveda and modern view. (2011)

3- Mark questions

1. Clinical anatomy of radial bone. (Sept 2019/2010 scheme)
2. Intervertebral disc and menisci. (Mar 2019/2010 scheme)
3. Typical thoracic vertebrae. (Mar 2019/2010scheme)
4. Side determination of femur. (Mar 2019/2010scheme)
5. Enumerate the parts of the temporal bone. (Oct2019/2016scheme)
6. Peculiarities of the clavicle. (Oct2019/2012 scheme)
7. List the parts of lower end of bone humerus. (Oct2019/2016 scheme)
8. Typical vertebrae. (Mar 2018/2016 scheme)
9. Cranial bones. (Oct 2016/2012 scheme), (Oct2018/2016 scheme)
10. Characteristics of typical rib. (2014, Mar 2017/2012scheme)
11. Anatomical position determining factors of humerus. (Sept 2017/2012scheme)

12. Sex determination of the sacrum. (Sept2017/2010 scheme)

13. Curvatures of vertebral column. (2014, Sept 2017/2010 scheme)

14. Tarsal bones. (2012, Mar2016/2012 scheme)

15. Sesamoid bone. (2014)

16. Name of the facial bones. (2014)

17. Bone of thorax. (2014)

18. Short note on ramus of mandible. (Nov 2013)

19. Carpel bones. (2013)

20. Parts and nerves closely related with humerus. (2012)

21. Sternal angle. (2012)

22. Parts of the sternum. (2012)

23. Surgical neck of the humerus. (2012)

3-SANDHI SHAARIRA
5- Mark questions
1. Classification of joints according to susruta. (2016)
3- Mark questions
1. Ulookala sandhi. (2019)

2. Number and types of sandhi. (2018)

3. Number and types of asthisandhi. (2017)

MYOLOGY
5- Mark questions
1. Hamstring muscle. (Mar 2019/2012 scheme) (2014,2012,2016)

2. Mention the origin, insertion, innervation, action of Biceps brachi & Sartorius muscles. (Mar 2019, Apr 2020/2016 scheme), (Ma2018)

3. Calf muscles. (Mar 2019/2010 scheme)

4. Origin, insertion, innervation & action of trapezius & soleus. (Oct 2019/2016 scheme, 2005)

5. Explain the muscles acting on shoulder joint. (Mar 2019/2010 scheme)

6. Diaphragm. (Mar 2019/2016 scheme,2012)

7. Origin, insertion & innervation of Supraspinatus & Sartorius muscles. (Mar 2018/2016 scheme)

8. Muscles of anterior abdominal wall. (Oct 2018/2016 scheme)

9. Quadriceps femoris. (Sept 2017/2010 scheme)

10. Origin, insertion & innervation of deltoid & rectus femoris muscle. (Oct 2017/2016 scheme)

11. Origin &, insertion of Muscles acting on Ankle joint. (Feb 2015/2016 scheme)

12. Origin& insertion of Muscles acting on Knee joint. (2012,2014)

13. Origin, insertion, action & innervation of deltoid & gastrocnemius. (Feb 2014,2013)

14. List the origin, insertion, action & innervation of Pectoralis major muscle. (2013)

15. Name of Muscles of Mastication & give its origin, insertion, innervation, blood supply & action. (2002,2013)

16. Briefly explain the Muscles of tongue. (2012)

17. Origin & innervation of external oblique muscle. (2012)

18. Write the origin, action & innervation of muscle of anterior compartment of arm. (2011)

3- Mark questions

1. Muscle attachments of anterior abdominal wall. (Mar 2019)

2. Biceps brachi muscle. (Mar 2019/2010 scheme)

3. Muscle attachments of scapula. (Mar 2019/2010scheme)

4. Muscles of Pharynx. (2013, Mar 2019/2010 scheme)

5. Name the extraocular muscle with their nerve supply. (Oct 2019/2016 scheme)

6. Diaphragm. (Sept 2017/2010 scheme)

7. Muscles of Mastication. (Feb 2014/2012 scheme)

8. Hypothenar muscle. (2014)

9. Pectoralis major. (2013)

10. Muscles passing through carpel tunnel. (2012)

UNIT-4

1-SIRA, DHAMANI, SROTUS SHAARIRA

3- Mark questions
1. Sira and dhamani. (2012,2015)

2-KOSHTA EVUM ASHAYA SHAARIRA
3- Mark questions
1. Define Koshta and Koshtanga. (2012,2014)
3-KALA SHAARIRA
5- Mark questions
1. Sapta kala. (Sept 2017 / 2010 scheme)

2. Mamsadhara & Pithadharakala. (Oct 2017)

3. Mamsadhara kala & Sleshmadhara kala. (Mar 2016/2012 scheme)
3- Mark questions
1. Kala & it's Classification. (Mar 2018 /2016 scheme) (Sept 2017/2010 scheme) (Apr 2020/2016 scheme)]

2. Sukradhara kala. (Mar 2019/ 2016 scheme)

3. Pithadharakala. (Oct 2019/ 2016 scheme), (Mar 2018 /2012 scheme)

4. Mamsadhara kala. (Mar 2019/ 2012 scheme)

5. Medodhara & Sukradhara kala. (Oct 2018/2016 scheme)

6. Medodhara kala. (Mar 2016/2010 scheme)

MARMA SHAARIRA
10- Mark questions
1. Define Marma. Explain in detail the five- fold classifications of Mamsa marma. (2015)

2. Marma with example. (Mar2019/2016scheme)

3.Explainthe various classification ofMarma.(Mar2018/2016scheme)
4.DefineMarma.Explain its structural classificationin detail.(Mar2016)
5.Classify marma and explainsadhyapranaahar marma. (Feb2014)

5-Mark questions

1.Enumerate and describe Koshta Marma. (Oct2019/2016scheme)
3.Enumerateand describe Mamsa marma.(Oct2019/2016scheme)
4.Location and aaghata parinama ofVidapa and Kukuntaramarmas.(Oct2018/2016scheme)
5.Vasthi marma and Seemantha marma. (Oct2017/2016scheme)
6.Explain Vasthi andguda marma.(2014/2015)

7.Trividha marma.(2014)
8.Jaanu and Vasthi marma. (2013)
9.Visalyaghna marma. (2013)
10 Keshta marma.(2012)

Mark questions

1.Adhipatimarma. (Mar2019/2016scheme)
2.Mamsa marma. (Oct2018/2016scheme)
3.Sadyapranahara marmas.(Oct2017/2016scheme)
4.Sringataka marma. (2015)
5.Talhridaya marma.(Feb 2014)
6.Constituents of marma.(Feb 2014)

3-INDRIYA SHAARIRA
5- Mark questions
1.Types of indriya? (2013)
2. Define indriya, explain jnaanendriya and karmendriya? (2005)
3- Mark questions
1.Shadangas. (2019/2016 scheme)

ROGANIDHANAM

Doshadushyadivinjanam

10-mark questions

1) Define ama. Explain samanyalakshana of ama and samavatalakshana. (2019 Mar,2012 scheme)

2) Define ama, samanya ama lakshana. Explain samaniramalakshana of dosha. (2018 Oct,2016scheme)

3) What are the samanyasrotodushtinidana and lakshana. Explain in detail about pranavahasrotodushtilakshana. (2018 Sept,2012 scheme)

4) Describe in detail about rogamarga and its clinical importance. (2018 Sept,2012 scheme)

5) Ama. (2018 Mar,2012scheme)

6) Explain meaning of rogaridana and vikruthivinjana and explain importance with suitable example. (2018 Mar,2010 scheme)

7) Describe samanyasrotodushtikarana and lakshana. Explain rakthavahasrotodushtikarana and lakshana. (2017 Oct,2012 scheme)

8) Clinical importance of different doshagati with example. (2016 Oct,2012 scheme)

9) Nidana and lakshana of doshaprakopa and doshakshaya. (2016 Sept,2010scheme)

10) Define srotas. Classify srothodushti explain nidana and lakshana of pranavahasrotas. (2015 Sept)

11) Define and classify avarana. Explain clinical features of kabhaavarana and Pitta avarana. (2015 Mar)

5-mark questions

1)Explain Rogamarga. (2020 Mar, 2016 scheme)
2) Explain dosha paka and dathupaka. (2020 Mar,2016 scheme)
3)Pitta vrudhikaranas and lakshanas. (2019 Oct, 2016 scheme)
4)Dushtinidana and lakshanas of asthivahasrotas. (2019 Oct, 2016 scheme)
5)Doshagati. (2019 Oct, 2016 scheme)
6)Define and explain concept of avarana. (2019 Mar, 2016 scheme)
7)Rakthavahasrotodushtikarana and lakshana. (2019 Mar, 2016 scheme)
8)Vata dosha prakopakarana and lakshana. (2019 Mar,2016 scheme)
9)Doshagati with example. (2019 Mar, 2012 scheme)
10)Doshadhatuashrayasrayi bhava. (2019 Mar, 2012 scheme)
11)Describe rogamarga enumerate diseases affecting each rogamarga. (2019 Mar, 2010scheme)
12) Medo vahasrotodushtikarana and lakshana. (2018 Oct, 2016 scheme)
13) Doshagati. (2018 Oct, 2016 scheme)
14) Pitta vrudhikshayalakshana. (2018 Oct, 2016 scheme)
15) Sama dosha lakshana. (2018 Sept, 2012 scheme)
16) Doshapaka and its clinical importance. (2018 Sept, 2012 scheme)
17) Muthravahasrotodushtikaranalakshana. (2018 Mar, 2012 scheme)
18) Rogamarga. (2018 Mar, 2012 scheme)
19) Explain nidana of vataprakopa. (2018 Oct, 2010 scheme)
20) Explain muthravahasrotodushtikaranalakshana. (2018 Oct, 2010 scheme)
21) Describe pureeshavrudhikshayalakshana. (2018 Oct, 2010 scheme)
22) Describe samavatalakshana. (2018 Oct, 2010 scheme)
23) Vata kshayalakshana. (2018 Mar, 2010 scheme)
24) Nidana of kapha prakopa. (2018 Mar, 2010 scheme)
25) Write about doshagati and its clinical importance. (2017 Oct, 2012 scheme)
26) Clinical features of rakthavrudhi and rakthakshaya. (2017 Mar, 2012 scheme)
27) Differentiate sama pitta and nirama Pitta. (2017 Mar,2012 scheme)
28) Avarana. (2017 Mar, 2012 scheme)
29) Rakthavahasrotodushtinidana and lakshana. (2017 Sept, 2010 scheme)
30) Nidana of pittaprakopa. (2017 Sept, 2010 scheme)
31) Doshagati. (2017 Sept, 2010 scheme)
32) Explain the reason for srotodushti with suitable example. (2017 Sept, 2010 scheme)
33) Explain the concept of agni. (2017 Sept, 2010 scheme)
34) Define niramavatalakshana. (2017 Sept, 2010 scheme)
35) Describe ama mention samaniramavatalakshana. (2017 Mar, 2010 scheme)
36) Explain dushtinidana and lakshana of majjavahasrotas. (2017 Mar, 2010 scheme)
37) Doshagati. (2017 Mar, 2010 scheme)
38) Features of rasavrudhi and rasakshaya. (2016 Mar, 2012 scheme)
39) Differentiate samakapha and niramakapha. (2016 Mar, 2012 scheme)
40) Kapha prakopanidanas. (2016 Mar, 2012 scheme)
41) General features of ama. (2016 Mar, 2012 scheme)
42) Features of asthivrudhi and kshaya. (2016 Oct, 2012 scheme)
43) Differentiate samavata and niramavata. (2016 Oct, 2012 scheme)

44) Srotodushti. (2016 Oct, 2012 scheme)
45) Define ama explain lakshanas of ama. (2016 Sept, 2010 scheme)
46) Differentiate doshapakadathupaka. (2016 Sept, 2010 scheme)
47) Pranavahasrotas. (2016 Sept, 2010 scheme)
48) Define ama Mention samanyalakshana of ama. (2015 Sept, 2012 scheme)
49) Pranavahasrotas. (2015 Sept, 2012 scheme)

50) Vata prakopanidanas. (2015 Sept, 2012 scheme)
51) Rogamarga. (2015 Sept, 2012 scheme)
52) Clinical features of kaphaavruthavata. (2015 Sept)
53) Vata kopanidana. (2015 Sept)
54) Describe madyamarogamarga. (2015 Mar)

55)Nidana and dushtilakshana of pranavahasrotas. (2015 Mar)

3-mark questions

1) Samavatalakshana. (2020 Mar,2016 scheme)
2) Rasadathukshayalakshana. (2020 Mar,2016 scheme)
3) Samanya ama lakshana. (2019 Mar,2016 scheme)
4) Types of avarana. (2019 Mar,2012scheme)
5) Dushtilakshana of mamsavahasrotas. (2019 Mar,2012 scheme)
6) Define dhathupaka. (2019 Mar,2012 scheme)
7) Vata prakopanidana. (2019 Mar,2010 scheme)
8) Srotodushtiprakara. (2018 Oct,2016 scheme)
9) Vata prakopalakshana. (2018 Sept,2012 scheme)
10) Doshapaka and dathupaka. (2018 Mar,2012 scheme)
11) Vata prakopakarana. (2018 Mar,2012 scheme)
12) Doshapaka. (2018 Oct,2010 scheme)
13) Rogamarga. (2018 Oct,2010 scheme)
14) Khavaigunya. (2018 Mar,2010 scheme)
15) Samanya srotodushtilakshana. (2018 Mar,2010 scheme)
16) Ama. (2018 Mar,2010 scheme)
17) Nirama kapha lakshana. (2018 Mar,2010 scheme)
18) Dosha pakalakshana. (2017 Oct,2012 scheme)
19)Kapha prakopalakshana. (2017 Oct,2012 scheme)
20) Bahyarogamargam. (2017 Mar,2012 scheme)
21) Mamsavahasrotodushtilakshana. (2017 Mar,2012scheme)
22) Dathupaka. (2017 Mar,2012 scheme)
23) Rogamarga. (2017 Sept,2010 scheme)
24) Differentiate doshapaka and dathupaka. (2017 Mar,2010 scheme)
25) Describe avarana. (2010 scheme, March 2017)
26) Madyamarogamarga. (2016 Mar,2012 scheme)
27) Doshapaka. (2016 Mar,2012 scheme)
28) Asthivahasrotodushtilakshana. (2016 Mar,2012 scheme)
29) Abhyantararogamarga. (2016 Oct,2012 scheme)
30) Rogamarga. (2016 Sept,2010 scheme)
31) Vatavruddhilakshana. (2015 Sept,2012 scheme)
32) Medakshayalakshanas. (2015 Sept)
33) Dathupaka. (2015 Sept)

34) Majjakshaya. (2015 Ma

BasicPathology

5-mark questions

1) Tumors-benign and malignant tumor.
2) Classification of tumors. (2020 Mar,2016 scheme)
3) Malignant tumor. (2019 Oct,2016 scheme)
4) Explain characteristics of malignant tumor. (2018 Mar,2010 scheme)
5) Differentiate benign tumor from malignant tumor. (2017 Mar,2010 scheme)
6) Features of malignant tumor with example. (2016 Mar,2012 scheme)
7) Difference between benign and malignant tumor. (2014Feb)
8) Classification of microorganisms. (2018 Oct, 2016 scheme)
9) Explain inflammation. (2020,2018,2016,2015, 2013- 2016 scheme)
10) Auto immune disease with suitable example. (2019,2017 - 2016 scheme) (2013)
11) . Describe edemait's pathophysiology. (2019,2017,2018, 2015- 2012, 2010 scheme)
12) Hypersensitivity. (2017 – 2010 2012 scheme)
13) Cellular adaptation. (2019 ,2017 – 2010 scheme)
14) Differentiate embolism and thrombosis. (2019, 2015- 2010 scheme)
15) Cell injury and cell death. (2016 ,2015 – 2010,2012 scheme)
16) Liver function test. (2015 – 2012 scheme)
17) Enumerate vitamin B deficiency disorders. (2019 Mar, 2016 scheme)
18) Explain nutritional diseases with example. (2016 Oct, 2012 scheme)

3-mark question

1) Classify virus. (2019 Mar-2016 scheme,2017 Oct-2012 scheme)
2) Types of bacteria. (2019 Oct,2018 -2016 scheme,2012 scheme)
3) Classify bacteria. (2019 Mar-2010 scheme,2018 Mar-2012 scheme)
4) Fungal infections. (2017 Mar,2012 scheme)
5) Bacterial infection. (2016 Oct,2012 scheme)
6) Viral infection. (2016 Mar,2012 scheme)
7) Hypersensitivity. (2020, 2018, 2017, 2016, 2014 – 2016 scheme)
8) Ischemia. (2019, 2018, 2015 – 2016 2012 scheme)
9) Clinical features of inflammation. (2019, 2018, 2017 – 2016, 2010 scheme)
10) Cellular adaptation. (2019 – 2016 schemes)

11) Define and classify immunity. (2019 – 2010 scheme)
12) Laboratory investigation of dyslipidaemia. (2019- 2010 scheme)
13) Shock. (2018, 2016 – 2010 scheme)
14) Utility of percussion in clinical examination. (2018 – 2012scheme)
15) Vitamin c deficiency. (2018 – 2012 scheme)
16) AIDS clinical diagnosis. (2018 -2012 scheme)
17) Cushing syndrome. (2018-2012 scheme)
18) Autoimmunity. (2018 – 2012 scheme)
19) Hypertrophy. (2018 – 2010 scheme)
20) Dysplasia. (2017 – 2012 scheme)
21) Thrombosis. (2017- 2010 scheme)
22) Hypothyroidism. (2017-2010 scheme)
23) Embolism and its types. (2017, 2016 -2012 scheme)
24) Clinical examination of ascitis. (2017 – 2012 2010 scheme)

25) Healing and repair. (2017, 2015 – 2010 scheme)
26) Laboratory investigation of diabetes mellitus. (2017, 2014 – 2010 scheme)
27) Lipid profile. (2016 – 2010 scheme)
28) Edema. (2016 – 2010 scheme)
29) Infarction. (2016 ,2015 – 2012 scheme)
30) Renal function test. (2015- 2012 scheme)
31) Gangrene formation. (2013)
32) Thyroid function test. (2013)

Nidanapanchakavigyana

10-mark questions

1) Describe the importance of Nidana Panchaka in diagnosis of any disease. (2019,2016 scheme)
2) The importance of nidanapanchaka. (2019,2012 scheme)
3) Define Nidana and explain its classification. (2019,2010 scheme)
4) Explain the meaning of roganidana and vikritivigyana and explain importance with suitable example. (2018,2010 scheme)
5) Define upasaya. Explain the classifications with examples. (2017,2012 scheme)
6) Describe shadkriyakala in detail. (2017,2010scheme)
7) Give a detailed description of nidanapanchaka with classification and examples. (2017,2010 scheme)
8) Define samprapti. Explain the classifications with examples. (2016,2012 scheme)
9) Define and classify samprapthi. Explain samprapthikhatakas. (2016,2010 scheme)
10) Define samprapthi and explain its classifications with examples. (2015,2010 scheme)
11) Explain shatkriyakalas in detail. (2015,2010 scheme)
12) Define samprapti. Explain sampraptighatakas in detail. (2013,2010 scheme)

5-mark questions

1) Explain the Samprapthighatakas. (2014, 2019-2010 scheme,2018- 2016 scheme) (2018-2012 scheme) (2014)
2) Elaborate Anupasaya with suitable examples. (2019,2010 scheme)
3) Define and classify Roopam. (2019, 2010 scheme)
4) Sadhyasadhyatha. (2019,2017 - 2010 scheme,2019-2012 scheme)
5) Explain upasaya in detail with suitable examples. (2016,2017,2018 and 2019 - 2010, 2012 & 2016 scheme)
6) Define and classify hetu and explain each. (2016 ,2010 scheme)
7) Anukthavyadhi. (2018 - 2010,2016,2012 scheme)
8) What are the features of yapyaroga? (2016, 2012 scheme)
9) Define prajnaparadha and mention its contemporary pathological relevance. (2016, 2012 scheme)
10) Explain Bhedavastha of Kriyakala and its clinical importance. (2017, 2012 scheme)
11) Describe Chaturvidha classification of Hetu. (2017 ,2012 scheme)
12) Define Samprapti and explain VikalpaSamprapti. (2017, 2012 scheme)
13) Define and write the importance of Upashaya. (2017, 2012 scheme)
14) Describe about TrividhaDukha. (2017, 2012 scheme)

15) What are the features of sukhasadyaroga? (2017, 2012 scheme) (2018, 2012 scheme)
16) What is sthanasamsraya and mention an example. (2017 - 2012 scheme)
17) What are the general features of upadravaroga? (2017, 2015, 2014 - 2012 scheme)
18) Write differences between Upadrava, Arishta and Udarka. (2018 - 2016 scheme,2015 - 2012 scheme)
19) Differentiate between Sannikrishta and Viprakrishtahetu. (2018 - 2016 scheme)
20) Define' Nidana'. Write the types of Nidan in detail. (2018 - 2012 scheme,2015)
21) Explain krichrasadhyaroga. (2017 - 2010 scheme)
22) Describe the types of samprapti. (2018 - 2010 scheme ,2020-2016 scheme)
23) Explain yapyavyadhilakshana. (2018 - 2010 scheme)
24) Define poorvaroopa and explain vishishtapoorvaroopa. (2018 - 2010 scheme, 2019 - 2016 scheme)
25) Explain Kriyakala with their Lakshana. (2018 -2012scheme)
26) What are the features of asadyaroga? (2016 - 2012scheme)
27) Explain shatkriyakalas. (2013)
28) Define and classify purvaroopa. (2013)
29) Define and classify roopa. (2015)
30) Explain sthanasamsraya in detail. (2015)
31) Explain sukhasadhyalakshana. (2018 - 2010 scheme)

32) Explain Kricchrasadhyavyadhilakshana. (2016 scheme)

3-mark questions

1) Enumerate the Sampraptighatakas. (2020 ,2016 scheme)
2) Explain Vishistapurvarupa. (2020,2016 scheme)
3) DvitiyaKriyakala. (2019,2016 scheme)
4) Vyabhichari Hetu. (2019, 2016 scheme)
5) Bala and kala Samprapti. (2019,2016 scheme)
6) Upadrava. (2019,2016 scheme)
7) Vidhi samprapti. (2019,2016 scheme)
8) Define Prathyathmalakshana with examples. (2019,2016 scheme)
9) Define and write down the importance of Arishta. (2019,2010 scheme)
10) Vyabhicharihetu. (2018,2010 scheme)
11) Sanchaya avastha. (2018,2010 scheme)
12) Vidhi samprapti. (2018,2010 scheme)
13) VikalpaSamprapti. (2018,2012 scheme)
14) Upadrava. (2018,2012 scheme)
15) Nirukti and Paryaya of Hetu. (2018,2012 scheme)
16) Sannikrishtanidana. (2018,2010 scheme)
17) Upadrava. (2018,2010 scheme)
18) Synonyms of nidana. (2018,2016 scheme)
19) samanayapoorvaroopam. (2018,2012 scheme)
20) Synonyms of poorvaroopam, roopam. (2018,2010 scheme)
21) Define and classify Sampraphi. (2017,2010 scheme)
22) Define and write down the importance of Arishta. (2017,2010 scheme)
23) Describe Upadrava. (2017,2010 scheme)
24) Define Arista and classify. (2017,2012 scheme)
25) Ubhayahetu. (2016,2012 scheme)

26) Arishta. (2016,2012 scheme)
27) Udarka. (2016,2012 scheme)
28) Viprakrishtahetu. (2016,2012 scheme)
29) Visishtapoorvaroopa. (2016,2012 scheme)
30) Nidana panchaka. (2016,2010 scheme)
31) Sadhya rogalakshana. (2016,2010 scheme)
32) Arishta. (2018-2010 scheme, 2015-2012 scheme)
33) What is the importance of knowledge of poorvaroopa? (2015,2012 scheme)
34) Ashayapakarshagati. (2015,2012 scheme)
35) Vyadhiviparcethaupasaya. (2015)
36) Vyabhicharihethu. (2015)
37) Vikalpasamprapti. (2015)
38) Hethuviparcethaupasaya. (2015)
39) Define and synonyms of nidana. (2014 Feb)
40) Classify arishta. (2014,2015)
41) Explain samanya and visishtapurvaroopa. (2014 Feb) ,42) Vyanjakahethu. (2013) 43) Vidhi samprapti. 44) Sukhasadyaroga. (2013)

2.2.1

REMEDIAL CLASS REGISTER

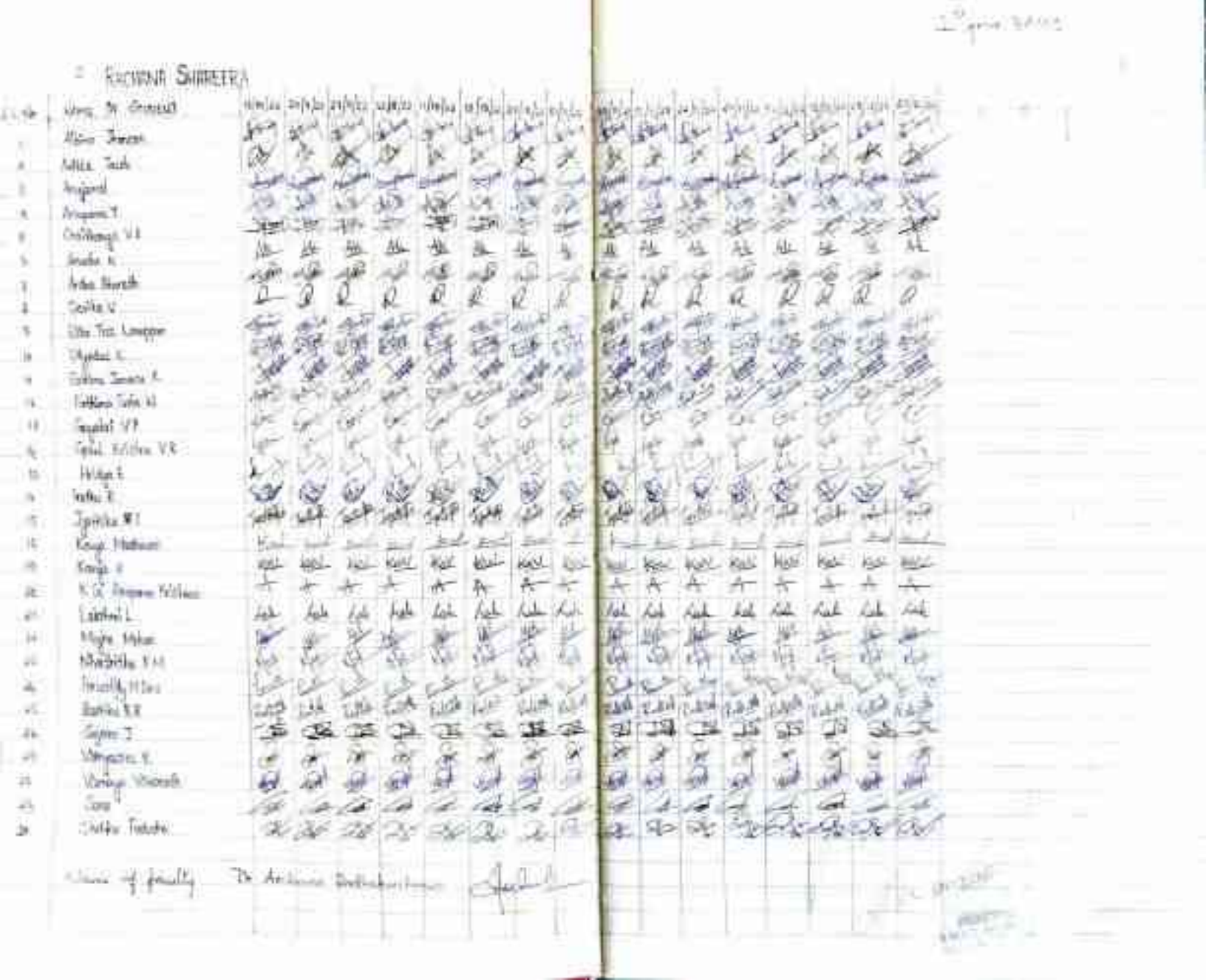
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Certified register contains 1 - 96 pages

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

REMEDIAL CLASS REGISTER
(2020-21 Batch)

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE



II RACHANA SHAREERA

Sl. No.	Name of Student
1	Abin Jaimon
2	Aditya Tech
3	Angajeet
4	Anupama T
5	Chaithanya V.S
6	Jincha K
7	Arha Naresh
8	Sarika V
9	Uha Tess Cooppa
10	Shyathri K
11	Fathima Janeeta K
12	Fathima Safa M
13	Gayathri V.P
14	Gokul Krishna V.R
15	Hridya E
16	Indhu R
17	Jyotika M.I
18	Kavya Mathew
19	Kavya K
20	K.G. Prasanna Krishna
21	Lakshmi L
22	Megha Mohan
23	Niveditha K.M
24	Priscilla Milani
25	Rashmi R.R
26	Sajna I
27	Vinyasini R
28	Vishnupriya Vinod
29	Sona
30	Sheha Thaha

Name of faculty Dr. Archana [illegible]

KAVYA SHAREERA

S.No	Name of Student
1	A S Ajnir
2	Archana S Prasad
3	Anupama T
4	Chaithanya V A
5	Deetha V
6	Eda Tess Sonappan
7	Fathima Jumana K
8	Fathima Shifa N
9	Gopika V P
10	Gopika Krishna V P
11	Hiran P P
12	Vidhya E
13	Indhu R
14	Kavya V
15	Nasha Shine
16	Nimitha K M
17	Rakhi K R
18	Sajana T
19	Vijaya K
20	Visnuja Vinod

Name of faculty - Dr. Basil P Jacob

MINOR SAMANTHA

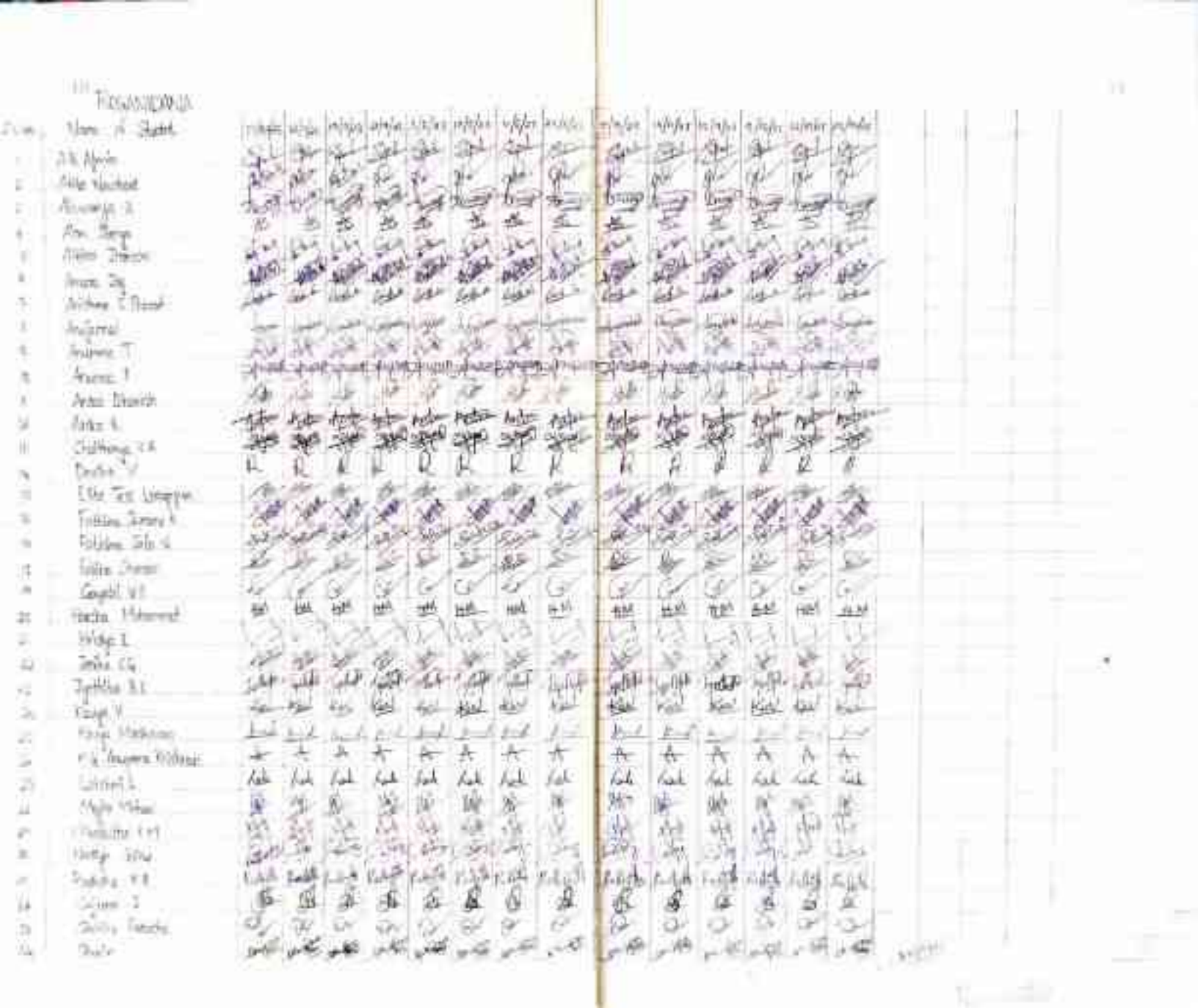
S.No.	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
1	A.S. Ajith																
2	Albin Thomas																
3	Anju V.P.																
4	Anjana T																
5	Anjana T																
6	Chaithanya V.S.																
7	Drisya V																
8	Fathima Sahla K																
9	Gayathri V.P.																
10	Gokul Krishna V.P.																
11	Harifa Mohammed																
12	Hiba P.P.																
13	Hiranya E																
14	Indhu R																
15	Kavya V																
16	Kavya Mathews																
17	Parvathy M Das																
18	Radhika K.K.																
19	Sajana J																
20	Shahana P																
21	Sreerag P.P.																
22	Vismaya Vasanth																

Name of the faculty : Dr. Anishma M.S. Babu

* DRAWINGINA

S.No	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
1	A R Ajith	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
2	Anuraga A	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
3	Akita Jose	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
4	Adithya S Vinod	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
5	Anjana	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
6	Anusree P	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
7	Chaithanya M A	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
8	Drisha V	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
9	Fathima Jumana K	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
10	Fathima Safa N	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
11	Gopika U P	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
12	Kavya V	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
13	Megha Mohan	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
14	Neha Sebin	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	
15	Nikhitha	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
16	Rahna K R	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
17	Vaisnavi K	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
18	Sreelal E S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Name of Faculty: [illegible] Sign:



Roll No.	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	Sona	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	Soorya S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	Sreekutti V	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	Sreerag S S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	Vidhyasree V	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	Vismaya Viswanath	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Signature of the faculty - [illegible]

11 RASASHASTRA Evam BHAISHAJYAKALPANA

Sl. No.	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
1	A.K. [illegible]													
2	[illegible]													
3	[illegible]													
4	[illegible]													
5	[illegible]													
6	[illegible]													
7	[illegible]													
8	[illegible]													
9	[illegible]													
10	[illegible]													
11	[illegible]													
12	[illegible]													
13	[illegible]													
14	[illegible]													
15	[illegible]													
16	[illegible]													
17	[illegible]													

Name of Faculty Dr. T.N. [illegible]

CHARAKA SAMHITA

S.No.	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
1	A.R. Ajetha	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
2	Alisha Dhruv	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
3	Anjana	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
4	Anusree P	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
5	Chaithanya V.R	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
6	Dhrithu V	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
7	Fathima Sifa N	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
8	Fidha Sherin	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
9	Gopika V.P	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
10	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
11	Jyothika K.C	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
12	Megha Mohan	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
13	[illegible] K.M	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
14	[illegible] K.R	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
15	Sajana J	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
16	Shibha Fathima	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
17	[illegible] K	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Name of Faculty – Dr. [illegible]

S.No	Name of Student								
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									

KAUMARABHRITYA

Sl. No.	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
1	A.S. Nisha	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
2	Alan George A	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
3	Aldha Jimmy	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
4	Anusha S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
5	Archa K	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
6	Chaithanya V.A	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
7	Febha Thomas	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
8	Kavya Mathew	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
9	Nikhila Sibu	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
10	Nivedita K.M	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
11	Sajana S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
12	Sheena Shamsudin	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
13	Sona S.S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Name of Faculty - Dr. Anuraga

Cestoda [illegible]

S.No.	Name of Student	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
1	Mr. Afrin	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
2	Mithra Jimmy	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
3	Anuja Mol [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
4	Chaithanya V.A.	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
5	Nisha [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
6	Vidhyasree K	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Name of the Faculty:
Dr. [illegible] A.S.

2.2.1
SIMPLIFIED NOTES FOR SLOW LEARNERS

SUTIKA VIGYAN

PAGE NO.
DATE 20/03/2014

Defn / सूतिका परिभाषा →

A] Nirukti → सूयत स्वार्थे क अतधूत्वम् |
स्त्री, सद्यः प्रसूतायां स्त्रियाम् |

B] Paribhasha → सूतमास्थापि तत्र स्याद्
अपरा येन निर्गता |
प्रसूताऽपि न सूता स्त्री
भवत्येवं गते सति |

A woman can be termed as Sutika only after the expulsion of the placenta.

सूतिका काल

1. According to Charak → No definite duration or specific regimen mentioned.
2. According to Sushruta and Vagbhata → Time duration 1½ months or until the woman gets her 1st menstrual cycle after labour.
3. According to Kashyap → 6 months.
4. According to Bhavprakash & Yogaratnakar → Either after 1½ month or after restoration of menstrual cycle.
5. In case of Mudha Garbha → 4 months.

FACTORS RESPONSIBLE FOR MENSTRUATION

POST - DELIVERY

तथैव गर्भः सूतायाः
सद्यः सन्न्यास कल्पते।
शेषं तु रुधिरीभूतं
कार्यं योनि च सर्पति॥
धातुषु प्रतिपूर्णेषु
शरीरे समवस्थिते।
सञ्चितं रुधिरं योनिः
पुनः कालेन मुञ्चति॥

Mainly 3 factors are responsible :-

① Replenishment of Dhatus → (धातु परिपूर्णता)

→ Replenishment of the sapta dhatus from R to S takes place.

→ Shukra dhatu an upadhatu → Ant. pituitary and ovarian hormones respectively.

② Steadiness of body → (व्यवस्थित शरीर)

→ Only after proper physical & psychological health the woman restarts her menstruation.

③ Accumulation of blood in yoni or uterus → (रक्त संचय in योनि or गर्भाशय)

→ The blood collected in uterus for whole month in its dhamanis is discharged during menstruation.

SUTIKA PARICHARYA
ACCORDING TO

CHARAK	SUSHRUTA	VAGBHATA	KASHYAP
JTERNAL ADMINISTRATION Pippali, Pippalimula, Chavya, Chitraka & Shringavera ē Sarpi/Taila/Vasa/Majja. Ghritayukta yavagu ē above mentioned drugs. 5-7 days regimen should be continued. Gradual administratn of brimhana dravyas	1. Pippali, Pippalimula, Hastipippali, chavya, shringavera ē ushna गुडोदक for 2-3 days. 2. Sneha yavagu or Ksheera yavagu ē vidarigandhadi group of drugs for 3 days. 3. Shalidhanya ē yava, kola, kulattha siddha jangala mamsa rasa.	1. Sneha ē panchakola churna or powdered yavani, upakunchika, chavya, chitraka, vyosha, saindhav lavana. 2. Vatahara dravya siddha or lagha panchamula siddha kwatha. 3. यवागु + विदार्यादि गण द्रव्य. 4. After 3, 5, 7 days यव/कोल/कुलत्थ यूष. 5. लघु अन्न पान. 6. After 12 days मांस ग्रहण	1. मण्ड सेवन → 3-5 days 2. यवागु सेवन → स्नेहयुक्त ē pippali & nagara. 3. स्नेहयुक्त यवागु ē lavana. 4. यूष + मांस रस सेवन.

CHARAK	SUSHRUTA	VAGBHATA	KASHYAP
EXTERNAL ADMINISTRATN 1. धूप & तैल over abdomen 2. पट्ट बन्धन 3. Compression of abd. to avoid vata prakopa 4. BA & After स्नेहपान & यवागुपान Parisechana should be done.	1. अभ्यंग = bala taila followed by Parisheka = वातहर द्रव्य सिद्ध क्वाथ	1. अभ्यंग = बला तैल 2. Uhnodaka parisechana before & after स्नेहपान & यवागुपान.	1. Nyubja chiti 2. अभ्यंग मर्दन. 3. पट्ट बंधन 4. योनि स्नेहन. = बला तैल. 5. योनि स्वेदन = कुपहर prepared = प्रियंग्वादि गण द्रव्य. 6. सर्वांग स्वेदन. 7. स्नान. 8. योनि धूपन = Kushta, Agaru, Guggulu } + घृत.

According to Desha :-

Acc to Kashyapa

1. Anupa Desha :-

① V & K Predominance

② आभिष्यन्दि + स्नेह द्रव्य should be avoided.

③ मण्ड = agni + बलवर्धक द्रव्य.

④ स्वेदन, निवात शयन & use of ushna dravyas.

2. Jangala Desha :-

① VP Predominance.

② स्नेह is सात्म्य.

3. Sadharana desha :-

① Neither excess sneha nor excess ruksha dravyas should be used.

Harita's Opinion :-

① lodhra, Arjuna, Kadamba, devadaru, bijaka, vasakundhu for purification of blood & vagina

Diet

Day 1) Fasting.

2) लाजा + दधिमण्ड = गुड + कुलत्थ यूष.

3) यवागू + [illegible]

4) यवागू + [illegible]

Benefits Of Sutika Paricharya

(1) Dhatu paripurnata :-

मुक्तगर्भाशयां योनिं तैलेनाङ्ग च मर्दयेत् ।

(अ.ह.शा.1/91)

It helps the body to recuperate as well as protect the digestive functions of the women.

(2) Stanya utpatti & Stanya sampat :-

रसप्रसादो मधुरः
पक्वाहारनिमित्तजः ।
कृत्स्नदेहात् स्तनौ प्राप्तः
स्तन्यमित्यभिधीयते ॥

(सु.नि. 10/18)

- After digestion of food, Rasa is formed.
- This aahar rasa, circulating through entire body reaches स्तन, after mixing व्यान वायु & स्तन्य उत्पत्ति takes place.

(3) Garbhashaya shuddhi :-

→ By giving pippali, pippalimula, charya, chitraka & shringavera in the form of churna, should be given = घृत/तैल/वसा/मज्जा

→ These drugs cause dhatu shuddhi & garbhashaya shodhana.

→ Local treatments like udarapariseckana, yoni-pariseckana, lead to garbhashaya shodhana.

④ Vata niyamana

⑤ Dosha samyata.

⑥ Punarnavikarana :-

पलाशोदुम्बरफलैं तिलतैलसमन्वितम् ।
योनौ विलिप्तं मधुना गाढीकरणमुत्तमम् ॥

→ Physical fitness in terms of cosmetic aspect.

प्रसूता वनिता वृद्ध कुक्षिआसाय सम्पिवेत् ।
प्रातर्मखिलसंमिश्रां त्रिसप्ताहात् कनाजटाम् ॥

⑦ Kukshi hrasa for cosmetic purpose.

⑧ Yonigadheekarana.

परीक्षा

→ परीक्षा is a diagnostic tool

→ It is classified into 2 types

1) Roga pareeksha

2) Rogi pareeksha

प्रमाणैः अर्थावधारणं परीक्षा ।

रोगपरीक्षा

→ 5 steps

1. निदानं - cause
2. पूर्वरूपं - Prodromal Symptoms (manifest at समप्राप्ति)
3. रूपं - signs & Symptoms
4. उपशय - अनुपशय (Favourable & Non-Favourable to treatment)
5. सम्प्राप्ति - whole pathogenesis

रोगीपरीक्षा

- त्रिविधि - प्रत्यक्ष, अनुमान
- त्रिविधा - प्रत्यक्ष, अनुमान, आप्तोपदेश
- चतुर्विधा - प्रत्यक्षं, अनुमानं, आप्तोपदेशः, युक्तिः
- त्रिविधा - Through three organs

- षड्विधं – पञ्चेन्द्रियं + प्रश्नं
- अष्टविधं – नाडी, मूत्रं, मलं, जिह्वा, दृक्, स्पर्श, शब्दं, आकृति
- दशविधं –

  Acc. Ashtangahridaya:

  दूष्य, देश, बलं, कालं, अनलं, वयः, प्रकृति, आहारं, सत्वं, सात्म्यं

  Acc. to Charaka Vimanasthana:

  प्रकृति, विकृति, सार, संहननं, प्रमाणं, सात्म्यं, सत्वं, आहारशक्ति, व्यायामशक्ति, वयः.

- द्वादशविधं – Acc. to Susruta Sutrasthana:

  आयु, व्याधि, ऋतु, अग्नि, वयः, देह, बल, सत्व, सात्म्य, प्रकृति, भेषजं, देशं

षड्विधा परीक्षा

→ Explained by Acharya Susruta in Sutrasthana 8th chapter.

1) श्रोत्रेन्द्रिय परीक्षा
2) स्पर्शेन्द्रिय परीक्षा
3) चक्षुरेन्द्रिय परीक्षा
4) रसनेन्द्रिय परीक्षा
5) घ्राणेन्द्रिय परीक्षा
6) प्रश्न परीक्षा

1. श्रोत्रेन्द्रिय परीक्षा

तत्र श्रोत्रेन्द्रिय विज्ञेया विशेषा रोगेषु
व्रणस्रावविज्ञानीयादिषु वक्ष्यन्ते
तत्र सफेनं रक्तमीरयन्ननिलः सशब्दो
निर्गच्छति इत्येवमादयः ॥ (Su.Su.)

Eg:- शिराकाण्डस्य उपगमने पारवत् इव
आकूजन – क्ष्वेद कास गर्दभवत् स्वर –
क्षतिका स्वरभेद

2. स्पर्शनेन्द्रिय परीक्षा

स्पर्शनेन्द्रिय विज्ञेयः शीतोष्णश्लक्ष्ण कर्कश मृदुकठिनत्वादयः स्पर्श विशेष ज्वरशोफादिषु

eg: उष्णस्पर्श in ज्वर

मृदुस्पर्श in प्लीहोदर

धमनी स्पर्श उष्णवेगवती in ज्वर

3. रसनेन्द्रिय परीक्षा

रसनेन्द्रिय विज्ञेयः प्रमेहादिषु रस विशेष

eg: Bees & flies attracted towards प्रमेह patient indicates माधुर्यता of urine in प्रमेहरोगी.

4. घ्राणेन्द्रिय परीक्षा

घ्राणेन्द्रिय विज्ञेयः अरिष्टलिङ्गादिषु व्रणाव्रणानां च गन्धविशेषाः ।

eg: In रक्तपित्त, लोहगन्ध is seen.

दशविध परीक्षा

1. प्रकृति

तत्र प्रकृत्यादीन भावानन्व्याख्यास्यामः । तद्यथा - शुक्रशोणितप्रकृतिं, कालगर्भाशयप्रकृतिं, मातुराहारविहार-प्रकृतिं, च गर्भशरीरमपेक्षते ।
→ महाभूतविकारप्रकृतिं

It is the inherent characteristic property of a individual refer to genetically determined physical mental make up. It is determined by:

a) sperm & ovum
b) Season & condition of the uterus.
c) Food & regimen of mother
d) Nature of महाभूत comprising the fetus.

Vata Prakriti

अल्पकेशः कृशोरूक्षोवाचालश्चलमानसः आकाशचारि

Pitta Prakriti

अकालपलितैर्व्याप्तो धीमान्स्वेदी च रोषणः स्वप्नेष्वालोकि दृक्षः पित्तप्रकृतिको नरः ।

→ नातवोऽनन्तरं in व्यक्तता

5. चक्षुरिन्द्रिय परीक्षा

चक्षुरिन्द्रिय विज्ञेयः शरीर उपचय अपचय आयुर्लक्षणं बलवर्ण विकारादयः

Acc to Dalhana :

शरीर उपचय - स्थौल्यं
अपचयं - कार्श्यं
बल - उत्साह
वर्ण - Discoloration.

6. प्रश्न परीक्षा

प्रश्नेन च विजानीयाद् देशं कालं जाति सात्म्यं आतकसमुत्पत्ति वेदनासमुच्छ्रायं बलमन्तराग्नि। वातमूत्रपुरीषाणां प्रवृत्त्यप्रवृत्ति कालप्रकर्षादींश्च विशेषान् आत्मसदृशेषु विज्ञानति उपायेषु तत्स्थानीयो जानीयात् (Su. Su 10)

Kapha prakruti

गम्भीरबुद्धिः स्थूलाङ्गः स्निग्धकेशो महाबलः ।
स्वप्ने जलाशयालोकी श्लेष्मप्रकृतिको नरः ॥

2 विकृति

विकृतिश्चेति विकृतिरुच्यते विकारः । तत्र विकारं हेतु-
दोष-दूष्य-प्रकृति-देश-काल-बलविशेषैर्लिङ्गतश्च परीक्षेत ।

Patients are to be examined in विकृति as well. दोष धातु involved in the pathogenesis of प्रकृति or constitution of an individual has influence from दोष, काल, बल & produce symptoms without determining the strength of causative factors.

3 सार

सारशब्देन विशुद्धतरो धातुरुच्यते ।
सारश्चेति साराण्यष्टौ पुरुषाणां बलमानविशेषज्ञानार्थं उपदिश्यन्ते तद्यथा त्वग्रक्तमांसमेदोऽस्थिमज्जशुक्रसत्त्वानीति ।

→ The purest form of dhatu which are of best quality is सार
→ It is the essence of धातु
→ There are 8 types of सार.

Sarvasara Lakshana

तत्र सर्वैः सारैरुपेता पुरुषा भवन्त्यतिबलाः
परमसुखयुक्ताः क्लेशसहाः सर्वारम्भेष्वात्मनि जात
कल्याणाभिनिवेशिन स्थिरसमाहित शरीराः सुसमाहितग
सानुनादस्निग्ध गम्भीरमहास्वराः सुखैश्वर्यवित्तोपभोग
भाजो मन्दजरसो मन्दविकाराः प्रायस्तुल्यगुणविस्तीर्णाप
चिरजीविनश्च ।

Madhyamasara lakshana

moderate degree of qualities of respective saaras

Avarasaara lakshana

Possess qualities of respective saaras in lowest degree. Individuals are physically weak, less immunity, low health status & short life span.

4. संहननं

संहननतश्चेति संहननं, संहतिः, संयोजनमित्येकोऽर्थ
तत्र समसुविभक्तास्थि, सुबद्धसन्धि, सुनिविष्टमांसशो
सुसंहतं शरीरमित्युच्यते ।

Patient must be examined for compactness of ... degree of nourishment

a) Pravara Samhanana

→ Symmetrical & well demarcated bones.
→ Strong built
→ Cood strength.

b) Madhyama Samhanana

→ Moderate symmetry & moderate demarcate joints.
→ Moderate built.
→ Moderate strength.

c) Avara Samhanana

→ weakly demarcated bones.
→ weak built
→ weak strength.

5 Pramana

प्रमाणश्चेति शरीरप्रमाणं पुनर्यथास्वेनाङ्गुलिप्रमाणेनोपदे-
-क्ष्यते उत्सेधविस्तारायामैर्यथाक्रमं ।

eg. पाद ⇒ 4 X 14 X 6

शिरा → 16 (A)

उरः → 12 (A) 24 (B)

हृदयं → 2 Angula

Entire body length = 84 A

→ measurement of body & parts Increase of pramana as in organomegaly or as in asta [illegible] purusha or decrease in pramana are considered as pathological.

→ Patients should be examined by measuring organs of body to understand healthy physical status.

→ A person endowed with proper measurement organs will have longevity, strength, ojas, happiness, power & wealth.

a) Pravara

→ Person who has apt pramana as said [illegible] classics.

b) Madhyama

→ moderate build.

c) Avara

→ Pramana as per classics is poor

7. Satwa

सत्त्वमित्युच्यते मनः । तच्छरीरस्य तन्त्रकमात्मसंयोगात् । तत्त्रिविधं बलभेदेन - प्रवरं, मध्यमम्, अवरं चेति; अतश्च प्रवरमध्यावरसत्त्वाः पुरुषा भवन्ति ।

→ Satwa is the mental status of an individu[al] which represents sensory & motor alertness along with understanding of mind, willpower, intellect & judgement

a) Pravara satwa

→ These individuals possess super mental facu[lties] able to bear strong therapies without any harmfulness, tolerate serious exogenous dise[ase] without many difficulties, tolerate pain, adopts same sort of happiness & sorrow, control thems[elves] predominance of satwa guna

b) Madhyma satwa

→ Individual with moderate mental faculties

→ Able to bear strong therapies without an[y]

harmfulness

→ Predominant रजस् guna.

c) Avarasatwa

→ An individual of inferior mental faculties, neither themselves nor others can sustain their mental strength.

→ They will not take command, advice.

→ They are susceptible to fear, grief, greed, delusion & ego, persons are contraindicated to samsodhana karma & they have prominent tamo guna.

8. Ahara Sakti

आहारशक्तिरिति आहारशक्तिरभ्यवहरणशक्त्या जरणशक्त्या च परीक्ष्या, बलायुषी ह्याहारायत्ते।

→ This is test for physical ability & physical strength.

One's capacity for food can be examined from two angles, viz

(i) Abhyavaharana (ingestion power).

→ Overall quantum of food intake

(ii) Jarana Shakti (power of digestion)

-> Ability of digestion of ingested food. It is assessed by clear talking, enthusiasm, timely manifestation of the urges, lightness of body, manifestation of urge of hunger & thirst indicate that previous meal is digested well.

-> Both the strength & life span are determined by diet of individual.

9. Vyayama Shakti

व्यायामशक्तितश्चेति - व्यायामशक्त्या परीक्षेत [illegible]

बलत्रैविध्यम् ।

-> The patients should be examined with the capacity for exercise, which determine own ability to perform work.

- The stamina, endurance, tolerance of physical activity are all assessed.
- Based on ability & disability (to do work), moderate (inclusive of occupational & exercise), heavy work (heavy exercise.

Batting) the vyayama shakti is classified as avara, madhyama, pravara shakti respectively

10. Vaya

वय: कालप्रमाणविशेषापेक्षिणी शरीरावस्था ॥ (C.Vi)

त्रिविधं - बालं, मध्यं, जीर्णम्

→ It is examination of age & age related changes of patient to see the related disease or deformity which is prevalent in particular age groups.

- बालं - upto 16 yrs a person can be considered as bala.
- विवर्धमानधातुगुणं : - आत्रिंशद्वर्षम् - 30 yrs
- अनवस्थितसत्वम् - Here is incompleteness in development till that age one is considered as bala
- मध्य - An individual after the age of 30 is considered as adult or madhya. He all types of growth & development is com
- वृद्ध - After madhyama vastha the process of degeneration begins therefore the stage called as Jeernavastha or vruddhavastha

पंचलवण – सैंधव, सौवर्चल, बिड, रोमक, सामुद्र

षटलवण - सैंधव, सौवर्चल, बिड, रोमक, सामुद्र, चुल्लिकालवण

Saidhav	– Found in punjab near sindhu river
Sauvarchal	- Swarji Kshaara + 8 times water. Add Q.S. Saindhav in this mixture and fill the liquid in earthern pot. Then heated till water evaporated
Bid Lavan	– Romak Lavan + Amalaki Churna, kept in earthern pot and heated till color of pot becomes red hot
Romak	- Prepared from water of Saambhar Lake (Rajasthan). Previously it was procured from Rome river. So, it is callied Saambhar /Romak.
Chullika lavan	- Navsadar

K.M.C.T. AYURVEDA MEDICAL COLLEGE

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

क्षारद्वय - यवक्षार, स्वर्जिकाक्षार

क्षारत्रय - यवक्षार, स्वर्जिकाक्षार, टंकणक्षार

क्षारपंचक - यवक्षार, स्वर्जिकाक्षार, मुष्ककक्षार, पलाशक्षार, तिलक्षार

क्षाराष्टक - यवक्षार, स्वर्जिकाक्षार, पलाशक्षार, तिलक्षार, स्नुहिक्षार, चिंचाक्षार, अपामार्गक्षार, अर्कक्षार

Swarji Kshaara – Kshaara obtained from Kantakaari plant by general method (Rasa Tarangini).

Prepared from Laano named plant found in punjab and it should be dissolved in water and filtered 7 times through cotton cloth according to Vd. Harishankar Sharma.

- क्षाराः सर्वे मलं हन्युः अम्लं शोधन जारणम्
  मान्द्यं विषाणि निघ्नन्ति लैघ्यं स्नेहाः प्रकुर्वते॥

अम्ल वर्ग – जम्बिर, निम्बुक, बीजपूरक, अम्लवेतस, अम्लिका, नारंग, दाडिम, वृक्षाम्ल, चांगेरी, चणकाम्ल, कर्कन्धु, करमर्द, चुक्रिका.

अम्लपंचक –जम्बिर, निम्बुक, मातुलुंग, अम्लवेतस, नारंग.

द्रावकगण – गुड, गुंजा, गुग्गुलु , मधु, सर्पि, टंकण

शोधनगण – काच, टंकण, शिप्रा(शुक्ति)

मधुरत्रय – घृत, गुड, माक्षिक

पंचमृतिका – वल्मीकमृतिका, इष्टिका, गैरिक, लवण, भस्म

पंचामृत – गव्य क्षीर-दधि-घृत, माक्षिक, शर्करा

रक्त वर्ग – कुसुम्भ, खदिर, लाक्षा, मंजिष्ठा, रक्तचन्दन, अक्षीव, बन्धुजीव, कर्पूरगन्धिनी, माक्षिक

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Maana Paribhasha

- मीयते अनेन इति मानम् (अमरकोश)

- न मानेन विना युक्ति द्रव्याणां जायते क्वचित्
  अतः प्रयोगकार्यार्थं मानं अत्र उच्यते मया॥ (शा.सं.)

- दोषादिमानज्ञान आयत्वात् क्रियायाः
  न हि अमानज्ञो दोषादीनां भिषक् व्याधिनिग्रह समर्थो भवति (च.सं.)

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

पौतव तुलया - Weight,

द्रवय कुड्वादिभि - Volume,

पाय्य हस्तादिभि - Length

बिंदु - प्रदेशिनी अंगुली पर्वद्यान् मग्नसमुद्धृतात्
यावत् पतति असौ बिंदु.....

८ बिंदु - शाण
३२ बिंदु - शुक्ति
२ शुक्ति - पाणि शुक्ति

अंगुल - अष्टयवमध्या*
वितस्ति - १२ अंगुल
अरत्नि - २२ अंगुल
हस्त - २४ अंगुल
व्याम - ४ हस्त

*अष्टयवमध्या - length of a thread which is passed through 8 yava

कालिंगं मागधं च इति द्विविधं मानं उच्यते. कालिंगात् मागधं श्रेष्ठं मानं मानविदो विदुः॥ (शा.सं.)

Magadh Maana		पर्याय	Modern
३० परमाणु	त्रसरेणु	वंशी	
६ वंशी	मरिचि		
६ मरिचि	राजिका (सर्षप भेद)		
३ राजिका	सर्षप (गौर सर्षप)		
८ सर्षप	यव		
४ यव	गुंजा	रत्ति	125 mg
६ रत्ति	माष	हेमधान्यक	1 gm
४ माष	शाण	धरण, टंक	
२ शाण	कोल	क्षुद्रक, वटक, द्रंक्षण	6 gm
२ कोल	कर्ष	पाणिमानिका, पाणितल, किंचित्पाणि, करमध्य, अक्ष, पिचु, तिन्दुक, बिड़ालपदक, षोडशिका (१६ माषा), हंसपद, सुवर्ण, कवलग्रह, उदुम्बर	12 gm
२ कर्ष	शुक्ति	अर्धपल, अष्टमिका (८ शाण)	24 gm

Maagadh Maana		पर्याय	Modern
२ शुक्ति	पल	मुष्टि (नख अन्तः मुष्टि), आम, चतुर्थिका (४ कर्ष), प्रकुञ्च, षोडशी (१६ माण), बिल्व	48 gm
२ पल	प्रसृति	प्रसृत (प्रसारित अंगुलि करतल)	96 gm
२ प्रसृत	अंजलि (करद्वय मिलित संपुटाकार)	कुडव, अर्धशराव, अष्टमान	192 gm
२ कुडव	शराव	मानिका, अष्टपल	384 gm
२ शराव	प्रस्थ		768 gm
४ प्रस्थ	आढक	भाजन, कंसपात्र, चतुःषष्टिपल	3.072 kg
४ आढक	द्रोण	कलश, नल्वण, उर्मण, उन्मान, घट, राशि	12.288 kg
२ द्रोण	शूर्प	कुंभ, चतुःषष्टिशराव	24.576 kg
२ शूर्प	द्रोणी	वाही, गोणी	49.152 kg
४ द्रोणी	खारी	४०६० पल	196.61 kg

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

2000 Pala = 1 Bhaar = 96 Kg

100 Pala = 1 Tulaa = 4.8 Kg

Kudava – मृत् वृक्ष वेणु लोहादेः भाण्डं यत्चतुर्गुलम्
विस्तीर्णं च तथा उच्चं तन्मानं कुडवं वदेत्

weight or volume of material which is filled in a vessel having height and internal diameter of 4 angula. Vessel could be prepared of bamboo, wood, metal etc.

माष टंक अक्ष बिल्वानि कुडवः प्रस्थं आढकम्
राशिः गोणी खारिक इति यथोत्तर चतुर्गुणाः॥

गुंजादि मानमारभ्य यावत् कुडवस्थितिः
द्रवार्द्रशुष्कद्रव्याणां तावत् मानं समं मतम्॥

प्रस्थादि मानमारभ्य द्विगुणं तत् द्रवार्द्रयोः
मानं तथा तुलायाः च द्विगुणं न क्वचित् स्मृतम्॥

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Kaalinga Maana		पर्याय
१२ गौरसर्षप	यव	
२ यव	गुंजा	
३ गुंजा	वल्ल	
७/८ गुंजा	माष	
४ माष	शाण	निष्क, टंक
६ माष	गद्याण	
१० माष	कर्ष	
४ कर्ष	पल	१० शाण
४ पल	कुडव	

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Collection

Time, Place, Method

How it should be –

तत्र यानि

•कालजातानि

•उपागतसंपूर्णप्रमाण रस वीर्य गन्धानि

•काल आतप अग्नि सलिल पवन जन्तुभिः अनुपहत

•गन्ध वर्ण रस स्पर्श प्रभावाणि प्रति अग्राणि

•उदीच्यां दिशि स्थितानि;

Time -

शाखा, अचिरप्ररुढं पलाशं –	वर्षा, वसन्त
मूलानि –	ग्रीष्मे
शीर्णप्ररुढ पर्णा –	शिशिरे
त्वक् कन्द क्षीर –	शरदि
सार –	हेमन्ते
पुष्प फल –	यथा ऋतु

•शरदि अखिलकार्यार्थं ग्राह्यं सरसं औषधम् ॥
विरेकवमनार्थं च वसन्तान्ते समाहरेत्॥ (शा.सं.)

K.M.C.T. AYURVEDA MEDICAL COLLEGE

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Place -

•आग्नेया विन्ध्यशैलाद्याः सौम्यो हिमगिरिः मतः॥

• पंचमहाभूत अनुसार

Contraindicated places

• वल्मिक

•कुत्सित

•आनूप

•अश्म

•स्मशान

•उषरमार्गजाः॥

जन्तु-वह्नि-हिम व्याप्ता न औषध्यः कार्यसिद्धिदाः ॥

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Method - गृह्णियात् तानि

- सुमनाः
- शुचिः
- प्रातः
- सुवासरे
- आदित्यसंमुखो
- मौनी
- नमस्कृत्य
- शिवं हृदि
- साधारणधरा द्रव्यं गृह्णियात्
- उत्तराश्रितम्

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

अति स्थूल जटा	– त्वक्	
सूक्ष्म मूल	– सकल (पंचांग)	

न्यग्रोधादि	– त्वक्	(वट – आम्र – प्लक्ष – जम्बूक)
बीजकादि	– सार	(विजयसार – खदिर – असन - बब्बूल)
तालीसादि	– पलाश	(कुमारी – नागवल्ली - पत्रशाक)
त्रिफलादि	– फल	(प्रियंगु – कंकोल – मदनफल)
धातक्यादि	– पुष्प	
खुह्यादि	- क्षीर	

General Principles / Anukta Grahan Niyam

- एकमपि औषधं योगे यस्मिन् यत् पुनः उच्यते
  मानतो द्विगुणं कार्यं तत् द्रव्यं तत्त्वदर्शिभिः

- नवानि एव हि योज्यानि द्रव्याणि अखिलकर्मसु
  विना विडंगकृष्णाभ्यां गुडधान्याज्यमाक्षिकैः॥

नव अभावे - अनतिक्रान्त वत्सरम्

पुरातनत्वं - संवत्सरात् उपरि

• शुष्कं नवीनं यत् द्रव्यं योज्यं सकल कर्मसु
आर्द्रं च द्विगुणं युज्यात् एष सर्वत्र निश्चयः

• गुडुची कुटजो वासा कूष्मांडः च शतावरी
अश्वगंधा सहचरी शतपुष्पा प्रसारिणी
प्रयोक्तव्या सदैव आर्द्रा द्विगुणा नैव योजयेत्

वीर्य उत्कृष्टत्वात् द्विगुणा न कार्या.....

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

• काले अनुक्ते प्रभातं स्यात् अंगे अनुक्ते जटा भवेत्
भागे अनुक्ते साम्यं स्यात् पात्रे अनुक्ते च मृण्मयम्॥
द्रवे अनुक्ते जलं ग्राह्यं तैले अनुक्ते तिलोद्भवम्॥

• चूर्णस्नेहासवा लेहाः प्रायः चन्दनान्विताः
कषायलेपयोः प्रायो युज्यते रक्तचन्दनम्॥ (शा.सं.)

अवलेहग्रहणेन - गुटिकाग्रहणं

कषाय – पंचविधकषाय कल्पना

प्राय - in general and not as rule because in एलादि चूर्ण (used for छर्दिनिग्रहण), रक्त चन्दन is used because its karma is छर्दिजित्

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

- To increase therapeutic efficacy of drug e.g. dashamoola kwatha with yogaraj guggulu in vaata-vyadhi
- To reduce toxicity or side effect of drug e.g. milk with gandhak formulations
- For easy digestion e.g. warm water with Sneha
- For easy absorption of drug e.g. Amalaki with Lauha preparation
- For particular action e.g. Honey with sitopaladi churna for kapha chhedana
- Palatability e.g. Honey with Vaasa Swarasa
- Supportive action e.g. warm water with anuloman drugs
- According to dosha

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Maatra

•मात्रा काल आश्रयो युक्ति सिद्धिः युक्तौ प्रतिष्ठितः॥ (च.सं.)

• स्थितिः नास्ति एव मात्रायाः कालं अग्नि वयो बलम्
प्रकृतिं दोष देशौ च द्रष्ट्वा मात्रा प्रकल्पयेत्॥ (शा.सं.)

ह्रस्वमात्रा – मन्दाग्नि, हीनसत्वा, कलौ

Aahar Maatra – Agnibala apekshini
Dravya apekshini

Aushadha Maatra - Roga Bala
Rogi Bala
Agni Bala
Kalpana

Child dose acc to ayurved and rules of modern science like young's, dilling's and as per surface area

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Bhaishajya Kaala

भैषज्यं अभ्यवहरेत् प्रभाते प्रायशो बुधः
कषायाः च विशेषेण.....

वा.स.	अ.हृ.	अ.सं.	शा.सं.	उपयोग
निरन्न	अनन्नम्	अभक्त	सूर्योदये जाते	पित्त कफ प्रकोप, वमन, विरेचन, लेखन
भक्तादौ	अन्नादौ	प्राक्भक्त	दिवस भोजने	अपान वायु दुष्टि
भक्तमध्ये	मध्ये	मध्यभक्त		समान वायु दुष्टि
पश्चातभक्तम्	अन्ते	अधोभक्त	सायन्ते भोजने	व्यान वायु दुष्टि
भक्तसंयुक्तम्	साग्रम्	सभक्त		अरुचि, अग्निमांद्य
		अनन्तरभक्त		व्यान वायु, दीप्ताग्नि
सामुद्ग	सामुद्ग	सामुद्ग		हिक्का, आक्षेपक, कंप
मुहुः मुहुः	मुहुः	मुहुः मुहुः	मुहुः	तृष्णा, छर्दि, हिक्का, श्वास
ग्रासे	ग्रासे ग्रासे	सग्रास		उदान वायु दुष्टि
ग्रासान्तरे	कवलान्तरे	ग्रासान्तर		उदान वायु दुष्टि
	निशि	निशि	निशि	उर्ध्वजत्रु विकार, लेखन, बृंहण, पाचन, शमन
अप्रयुक्त				बाल, सुकुमार, औषधद्वैष, अरुचि, सर्वांग गत व्याधि

Shelf-life

गुणहीनं भवेत् वर्षात् उर्ध्वं तत् रुपं औषधम्
मासद्वयात् तथा चूर्णं हीनवीर्यत्वं आप्नुयात्॥
हीनत्वं गुटिकालेहौ लभेते वत्सरात् परम्
हीनाः स्युः घृततैलाद्याः चतुर्मासाधिकात् तथा॥
औषध्यो लघुपाकाः स्युः निर्वीर्या वत्सरात् परम्
पुराणाः स्युः गुणैः युक्ताः आसवाः धातवो रसाः॥ (शा.सं.)

पुराण – चिरकालस्थित बहुसंवत्सर उषित

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Kalpana	Classical	Indian gazzette
Churna	2 months	2 years
Gutika	1 year	3 years
Avaleha	1 year	3 years
Ghrita	16 months	2 years
Taila	16 months	3 years
Aasav-Arishta	infinite	infinite
Dhaatu Bhasma, Rasa Kalpa	infinite	10 years for mandur and lauha kalpa
Arka, Netrabindu		1 year

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

५. गर्भशारीर

गर्भस्तु खलु अंतरिक्ष वायु अग्नि तोय भूमि विकार स्चेतनाधिष्ठानभूत

चु.शा ४/३

शुक्रशोणितं गर्भाशयस्थं आत्म- प्रकृतिविकारसंमुर्छितं गर्भ इति उच्यते।

सु.शा 5/2

शुक्रशोणित जीव संयोगे तु खलु कुक्षिगते गर्भसंज्ञा।

च.शा ४/२.

गर्भोत्पादकरा भाव :-

१. गर्भोत्पादक ऋतुक्षेत्रादि चतुर्भाव / गर्भोत्पत्ती सामुग्री

२ गर्भोत्पादक पंचमहाभूतादि षड्भाव

३. गर्भोत्पादक मातृज - पितृजादि षड्भाव

(अ) गर्भोत्पादक ऋतुक्षेत्रादि चतुर्भाव / गर्भोत्पत्ती सामुग्री

ध्रुवं चतुर्णां सान्निध्यात् गर्भः स्यात् विधिपूर्वकः।

ऋतु क्षेत्र अम्बु बीजानाम् सामग्र्याद अंकुरो यथा॥

सु.शा.२/३३.

१. ऋतु :-

"ऋतुर्नाम शोणितदर्शनोपलक्षितो गर्भधारणयोग्यः स्त्रीणां अवस्थाविशेषः।

कुल्लुकभट्ट

तद् वर्षात् द्वादशात् काले वर्तमानम् असृक् पुनः।
जरापक्वशरीराणां याति पंचाशतः क्षयम् ॥
सु.शा.३/७.

स्त्रीचा आर्तव काल:-

ऋतुस्तु द्वादशरात्रं भवति दृष्टार्तवः।
सु.शा.२

ऋतुकाल:- स्त्री ऋतुमती झाल्यापासून (१२) दिवसांचा (-सुश्रुत).

ऋतुकाल प्रारंभ:- ऋतुस्नात दिवसापासून म्हणजे ४ थ्या दिवसापासून मोजावा.

ऋतुचक्र:-
(२८) दिवसांचे

* गर्भाशय आकार:- रोहित माशासारखा

आर्तव:-
ऋतौ भवम् आर्तवम्।
अरुणदत्त अ.ह.शा.१

गर्भोत्पादक भाव:-

- Diameter of Actin = 5 nm
- Diameter of Myosin = 12 nm

गर्भपरिवृद्धीक्रम

१. गर्भ निर्माण होताना — प्रथम शिर - शौनक

२. प्रथम हृदय — कारण मन व बुद्धी याचे स्थान - कृतवीर्य

३. प्रथम नाभी — कारण नाभीस्थानापासून सर्व देहाची वाढ - पराशर

४. प्रथम हात - पाय - मार्कंडेय

सु ५. मध्यशरीर - सुश्रुतगौतम

६. पक्वाशय व गुद — वायुचे अधिष्ठान - भद्रशौनक

७. इंद्रियांची उत्पत्ती — बुद्धीचे अधिष्ठान - जनक नैदेह

च ८. प्रथम अदृश्य असा अचिन्त्य उत्पन्न - - मरिची व कश्यप

वातपित्तश्लेष्माश्चं देहसंभव हेतवः।

सु.शा. ४/३.

भौतिक प्रकृती - 5

वायु - वात
अग्नि - पित्त
जल - कफ

पृथ्वी ⟶ पार्थिव प्रकृती

आकाश ⟶ नाभस प्रकृती

पार्थिव प्रकृती :-
स्थिर - विपुल शरीरा: पार्थिवश्च क्षमावान्

नाभस प्रकृती :-
शुचिरश्च चिरजीवी नाभस: मुखै: महद्भि: ||
सु.शा. ४
मुखनासादी छिद्रे - मोठी

अंशांश कल्पनेने होणारी प्रकृती - (31) - भौतिक प्रकृती

एकैकेन वदन्ती पंच	- 5
दश तु द्वाभ्यां	- 10
त्रिभि: तावतभूतै:	- 10
पंच चतुर्भि: एव	- 05
भिषजस्तु एकां समस्तै: आपि	- 01
	31

FOREARM & HAND

Front of forearm:-

Components:-

i. Muscles - (8)
  - Superficial - 5
  - Deep - 3

ii. Arteries - (2)
  - i. Radial
  - ii. Ulnar

iii. Nerves - (3)
  - i. Median
  - ii. Ulnar
  - iii. Radial

Vincula longa and Brevia:

Synovial folds similar to mesentery which connect the tendons to the phalanges.

Palpable Arteries in the body:- (8)   RBC PP FAD

i. Radial
ii. Brachial
iii. common carotid
iv. Abdominal Aorta
v. femoral
vi. Popliteal
vii. Posterior tibial

Superficial and deep palmer arches ⟹ By
Radial & Ulnar arteries.

NERVES

1) Median Nerve:- "Eye of Hand"
Labourer Nerve


of HAND

cause:- supplies most of the long muscles of front of forearm

Control coarse movements of Hand.

2) Ulnar N:-
Musician Nerve

cause:- controlls fine movements of fingers.

supplies medial two fingers - little & Ring

3) ~~Median~~
Radial N:-
Thickest branch of Brachial plexus

Pen test:- For Abductor pollicis Brevis
ABP

CTS (carpal Tunnel syndrome):- Median N. compression

Muscles in Hand = 20

Superficial Palmar arch:-
continuation of ulnar artery

Deep palmar arch:- situated deep to long flexor tendons.

mainly formed by terminal part of radial artery

SPACES OF HAND

Whitlow:- infection of space (pulp)

Forearm space of Parona:-
Rectangular space situated deep in the lower part of forearm.

Ulnar Bursa:-

Infection of this bursa → hour glass swelling

⇓

(cause:- one swelling in the palm & another in the distal part of forearm)

Dorsal tuberde of Radius = Lister's tuberde

Superficial muscles on the back of foreqarm:- (7)

points of attachment of the interossei & lumbrical called "Wing tendons".

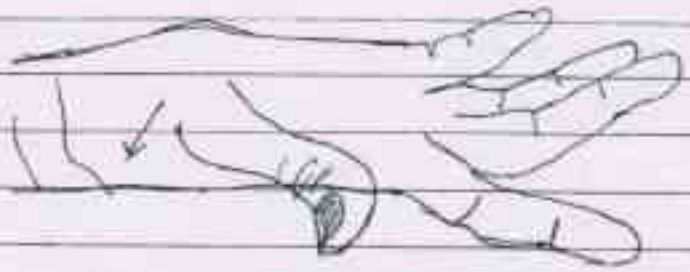
* Posterior interosseous Nerve:- chief nerve of the back of the foreqarm.

CLINICAL ANATOMY

* pointing index finger :- due to paralysis of long flexors of the digit

* Ape thumb Deformity:- Paralysis of thenar muscles.

pointing index finger



APE THUMB DEFORMITY

Phalen's Test :-

It is attempted for Carpal Tunnel syndrome

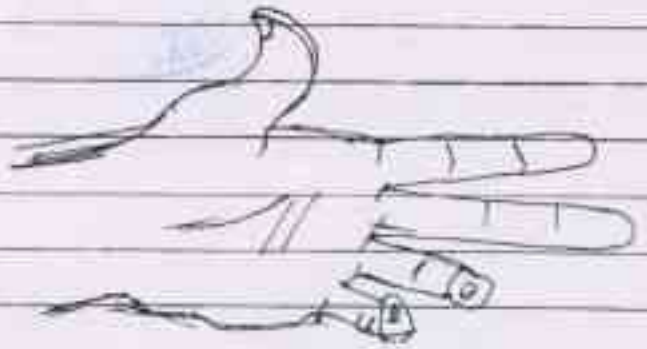
Dupuytren's contracture :-

Condition due to inflammation involving ulnar side of palmar aponeurosis.

Thickening and contraction of the aponeurosis

⇓

proximal phalanx & middle phalanx become flexed & cannot be straightened.



Dupuytren's contracture.

paralysis of intrinsic muscles of hand

⇓

Claw Hand

Ulnar Nerve:-

- commonly injured at the elbow
- Ulnar N injury at wrist is tested by
  Froment's sign /
  Book Test

complete claw Hand :- ulnar N & median N } damage.

JOINTS

Subject's Badge

SHOULDER GIRDLE

Joints:-

1. sternoclavicular → synovial joint
2. Acromioclavicular → plane synovial joint.

coracoclavicular ligament

Conoid Trapezoid

ligaments of scapula:-

1. Coraco-acromial ligament:- Δlar

Coracoacromial Arch:-

1. Acromion
2. Coracoacromial ligament
3. Coracoid process

Joints	Types
1. Shoulder Joint	synovial Joint of ball and socket variety
H 2. Elbow Joint & Interphalangeal Joint	Hinge variety of synovial Joint
P 3. Radio-ulnar Joint	
• superior	Pivot type of synovial Joint
• inferior	Pivot type
4. Wrist (Radiocarpal) Joint	Ellipsoid type synovial Joint
Joints of Hand	
CMC Sad 1. First carpometacarpal Joint has seperate Joint cavity	Saddle variety of synovial joint
MP condy 2. Metacarpophalangeal Joint	condylar variety of synovial Joint.
3. Interphalangeal Joint (proximal & Distal)	Hinge variety of synovial Joint.

SHOULDER JOINT

* Ligaments :- C C T G

1. capsular
2. coracohumeral
3. Transverse humoral
4. The glenoidal labrum.

* Bursae :-

1. Subacromial bursa
2. Sub scapularis
3. Infra spinatus bursa

* Blood supply :-

1. Anterior circumflex humeral vessels.
2. Posterior circumflex humeral vessels
3. Supra scapular vessels
4. Subscapular vessels.

* Nerve supply :-

i. Axillary N

ii. Musculocutaneous N.

iii. Suprascapular N

Analysis of Abduction at shoulder:-

The humerus and scapula move in the ratio 2:1 throughout abduction

ELBOW JOINT

- Ligaments:-
  1. Capsular ligament
  2. anterior ligament
  3. posterior ligament
  4. ulnar collateral ligament
  5. Radial collateral or lateral ligament

- Blood supply:-

  From anastomoses around the elbow joint.

- Nerve supply:-

  Branches from following nerves.

  i. Ulnar N
  ii. Median N
  iii. Radial N
  iv. musculocutaneous N through its branch to the brachialis

* Carrying Angle:- 13 degree

* Supination is more powerfull than pronation.

* pronation - brought chiefly by
pronator quadratus.

aided by - pronator teres.

WRIST JOINT

Articular capsule

Ligaments - (5)

i. palmar radiocarpal ligament - broad ~~brand~~ band.

ii. palmar ulnocarpal ligament

iii. dorsal radiocarpal ligament

iv. Radial collateral ligament

v. Ulnar collateral ligament.

B.S →

Anterior & posterior carpal arches.

N.S →

Ant & post interosseous nerves

Extension & flexion of wrist is done through C6, C7 spinal segments.

* CLINICAL ANATOMY

1. shoulder joint is more prone to dislocation than any other joint.

2. Frozen shoulder:-
patient of (40-60) years of age

The drsease is self limiting
patient may recover spontaneously in 2 years.

3 Tennis Elbow:-

occurs in Tennis players.

4 Student's (Miner's elbow)

Bursa on the olecranon process gets inflammed.

5 Golfer's elbow:-

Microtrauma of medial epicondyle of humerus, occurs commonly in golf players.

Carrying angle:- Normal - 13°

if more → cubitus valgus

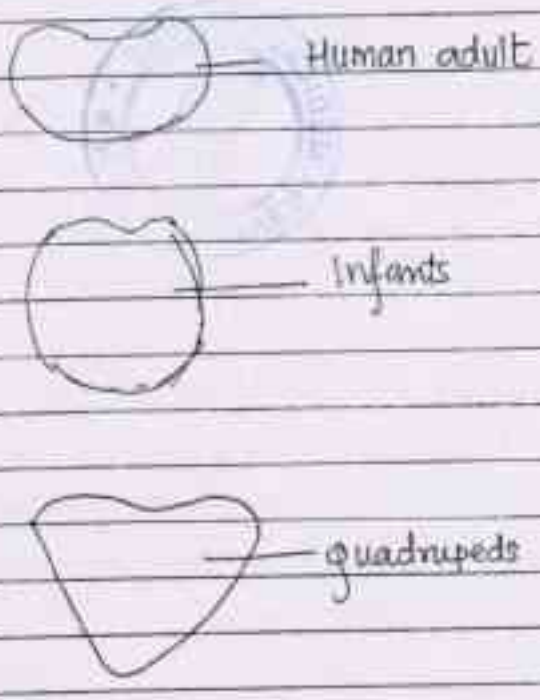
if less → cubitus varus.

THORAX

Coastal margin:-
Coastal cartilages of 7th 8th 9th 10th Ribs form coastal margin.

Floating Ribs:- anterior ends of 11th & 12th Ribs

Shape of Thorax



Infants:- Ribs → Horizontal
Respiration → purely abdominal by action of diaphragm.

Adult:- Thorax → oval
Ribs → oblique

PRINCIPAL
K.M.C.T. AYURVEDA MEDICAL COLLEGE

BONES OF THORAX

1. Ribs → 12

2. length of Ribs ↑ - 1st to 7th Ribs
   ↓ - 8th to 12th Ribs.

3. True Ribs → 1st 7 Ribs (connected to sternum)

   False Ribs → Remaining.
   8th 9th 10th.

   floating Ribs → 11th & 12th
   ∵ ant ends of these are free.

* Atypical Ribs → first two &
T- (A first) have special features Last three
   1st 2nd 10th 11th 12th

   Typical Ribs → 3rd to 9th.
T- (Three)

* Ossification of typical Ribs:-

P - 1

S - 3

First Rib :-

- shortest broadest & curved Rib

- ossification :-

P = 1

S = 2

Second Rib :-

length = 2 × First Rib.

Eleventh & twelth Ribs :-

ossification :-

P → 1

S → 1

STERNUM

- Flat bone

length = 17 cm

Manubrium:-

quadrilateral shape

angle of louis:-

manubrium forms a slight angle with body called sternal angle of louis.

Ectopia cordis:-

Non fusion of the plates of sternum causes ectopia cordis

↓

Heart lies uncovered on the surface.

partial fusion of plates:-

- formation of sternal foramina
- bifid xiphoid process.

Fusion is complete by 25 years of age.

CLINICAL ANATOMY:-

1. Bone marrow - Obtained by manubriosternal puncture
2. Funnel chest:- sternum is depressed.
3. Pigeon chest:- forward projection of sternum.

VERTEBRAL COLUMN

spine = spinal column = back bone

33 vertebrae

length - 70 cm (males)
- 60 cm (females)

ossification

3|6	cervical - 7	1st 2nd 7th - Atypical
2|5"	Thoracic - 12	
3|7	Lumbar - 05	5th - Atypical
21/14	sacral - 05	
4|0	coccygeal - 04	
	33	

curvatures:-

Sagittal plane:-

① Primary curves
② secondary curves

Coronal plane (Lateral curve)

THORACIC VERTEBRAE

12 Thoracic vertebrae

Typical:- 2nd to 8th

Atypical:- 1st 9th 10th 11th & 12th

Ossification:-

P → 3

S → 5

First thoracic vertebra:-

- Body resembles 2 cervical vertebra
- Not heart shaped.

JOINTS OF THORAX

1. Manubriosternal Joints
2. costo vertebral Joints
3. costo transverse Joints
4. Costo chondral Joints
5. Chondosternal Joints
6. Interchondral Joints
7. Intervertebral Joints

Pump Handle movement:- Respiration → Sternum - up & down

Bucket Handle movement:- movements in vertebrocostal ribs

Clinical Anatomy:-

i. Funnel chest → sternum is depressed.

ii. Pigeon chest → forward projection of sternum

iii. Commonest site of Fracture → Region at Ribs angle (Weakest area)

iv. Cervical Rib → 0.5% of persons

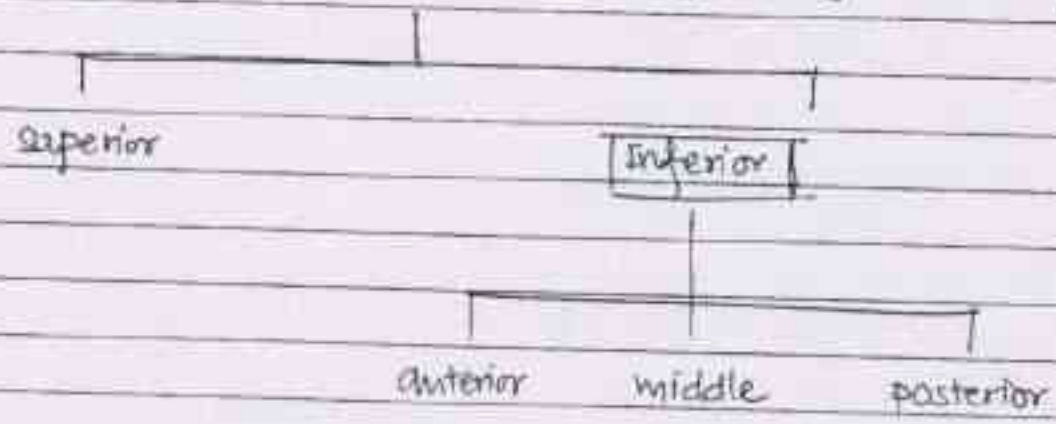
MEDIASTINUM

Middle space left in thoracic cavity betn Lungs.

Divisions:-

i. Superior
ii. Inferior
iii.

} seperated by imaginary ~~line~~ plane passing through sternal angle



Superior mediastinum contents

1. Trachea & oesophagus
2. Muscles - origin of i. sternohyoid
   ii. sternothyroid.
3. Arteries :- i. Arch of aorta
   ii. brachiocephalic artery
   iii. Left common carotid A
   iv. Left subclavian A
4. Veins :- i. Rt & Lt brachiocephalic veins
   ii. upper half of sup venacava.

5. Nerves:- i. Vagus
ii. phrenic

6. Thymus

7. Thoracic duct

8. Lymph Nodes

Inferior Mediastinum

1) Anterior mediastinum:-

contents :- Areolar tissue

2) Middle Mediastinum:-

contents:- i. Heart enclosed in pericardium.

Arteries:- i. Ascending aorta
ii. Pulmonary Trunk.
iii. 2 pulmonary arteries

Veins:- Lower half SVC

Nerves:- phrenic

Tubes:- Bifurcation of trachea.

Basic principles of Bhaishajya Kalpana

- ✓Paribhaasha
- ✓Maana Paribhasha
- ✓Collection
- ✓Anukta Grahan Niyam
- ✓ Sanskaara
- ✓Anupaana
- ✓Maatra
- ✓Bhaishajya Kaala
- ✓Shelf-life

Paribhaasha

अव्यक्त अनुक्त लेशोक्त संदिग्धार्थ प्रकाशिका॥

Paribhaasha helps to understand things which are not described or incompletely described; hidden principles and controversial theories in literature.

Hidden principles

Reading between the lines

Elaboration

Controversial theories

त्रिफळा - हरितकी, बिभितकी, आमलकी

त्रिकटु - शुंठी, मरिच, पिप्पली

त्रिजात - त्वक्, एला, पत्र

चतुर्जात - त्वक्, एला, पत्र, नागकेशर

त्रिमद - विडंग, नागर, मुस्ता

चतुर्स्नेह - घृत, तैल, वसा, मज्जा

दशमूल - बिल्व, अग्निमन्थ, श्योनाक्, पाटला, गम्भारी
शालपर्णी, पृष्णपर्णी, बृहती. कंटकारी, गोक्षुर

पंचकोल् - पिप्पली, पिप्पलीमूल, चव्य, चित्रक, शुंठी

Indrajeet S. Badge

INTRODUCTION

* PARTS OF UPPER LIMB :-

[4] Parts

1. Shoulder Region
2. Arm or brachium
3. forearm or Antebrachium
4. Hand or Manus

(a) Carpels - (8)

(b) Metacarpals - (5)

(c) Phalanges - (14)

Thumb = Pollex

BONES OF UPPER LIMB

i. Total bones in man = (206)

ii. Upper limb bones = (64)

✲ CLAVICLE

Peculiarity :-

i. long bone - lies horizontally (only clavicle)

ii. subcutaneous throughout.

iii. 1st bone to start ossifying.

iv. only long bone ossifies in membrane.

v. only long bone

Primary centres - (2)

Ossifications :-

P → (2)

S → 1

Clinical Anatomy :-

i Most common site of fracture → Junction betn two curvatures of bone.

ii. Cleidocranial dysostosis :- absence.

Cong clavic

- congenital absence of clavicle or
- imperfectly developed

SCAPULA

- Ossification :-

  P = 1 — Near Glenoid cavity during 8th week

  S = 7

- Clinical Anatomy :-

  1. WINGING OF SCAPULA :-

     Paralysis of Serratus anterior

     Arm cannot abducted beyond 90 degrees

HUMERUS

Longest bone of upper arm (limb)

Neck

Anatomical Neck ↓

Line seperating Head from rest of upper end.

Surgical Neck ↓

Line seperating upper end & shaft.

Lower end.

Carrying angle :- Medial edge of trochlea projects down 6 mm more than the lateral edge

Ossification :- P = 1 ✓

S = 7 ✓

Nerves Related to Humerus:- (3)

i. Axillary N
ii. Radial N
iii. Ulnar N

Clinical Anatomy:-

i. Common site of # : • surgical neck
• shaft
• supracondylar Region.

ii. Supracondylar # :- cause injury to Median Nerve.

iii. Volkman's ischaemic contracture :- caused by occlusion of brachial artery.

RADIUS ≅ tibia

Radial Notch on ulna → Head of Radius

Ulnar notch on radius → Head of ulna

Radial artery - palpated as "pulse". (Radial)

Ossification:-

P → 1 — 8th week

S → (2)

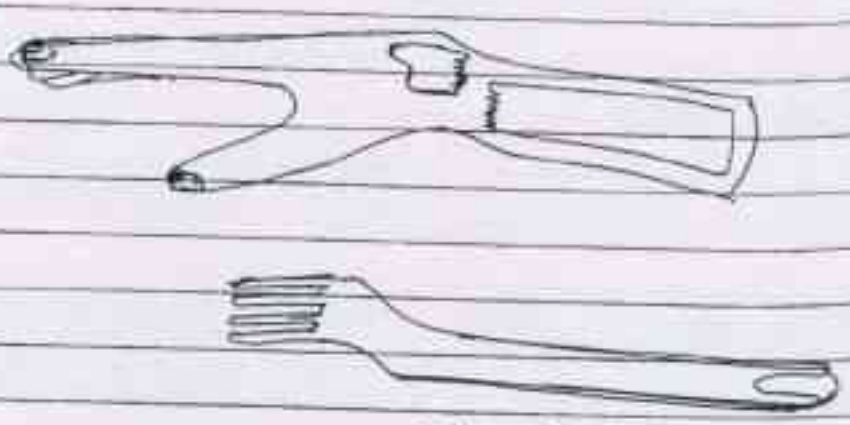
ईश्वरीत गाडगे

Clinical Anatomy Radius:-

i. Colle's Fracture :- 2 cm above lower end
Dorsal
ii dinner fork deformity
Distal fragments displaced upwards & backwards.
Radial styloid process lie proximal to ulnar styloid process

ii Smith's fracture :- Distal fragment displaced anteriorly.
ventral

iii Subluxation of the head of radius :- (pulled elbow)
- dislodge head of Radius from annular ligament.



Colles fracture.

ULNA

≅ fibula
(Homologous)

- processes :-
  - i. olecranon → projects upwards
  - ii. coronoid → projects forwards

- Notches :-
  - i. Trochlear → articulates c̄ trochlea of Humerus
  - ii. Radial → c̄ Head of radius

- ossification :-
  - P → 1
  - S → (2)

- clinical anatomy :-
  - i. Ulna is stabilizing bone of the forearm.
  - ii. Dislocation of elbow :- Fall on outstretched hand c̄ elbow slightly Flexed.
  - iii. Fracture of olecranon :- common
    - fall on point of elbow.
  - iv. Fracture of coronoid process – uncommon
  - v. Madelung's deformity :- dorsal subluxation (displacement) of lower end of ulna, due to retarded growth of lower end of radius.

Long बढ़ें.

Radius - छोटा
ulna - dorsal displacement of lower end.

* Ossification of Humerus, Radius and Ulna

* Law of ossification :-

Growing Ends :- shoulder ↳ — upper end humerus
wrist joint — lower ends of Radius ↳ ulna.

Nutrient foramen :- Apposite to growing end
Opposite

CARPAL BONES

07 06 15

8 - carpal bones — She Look Tall Pretty
Arranged in 2 - Rows — That They Can not Half

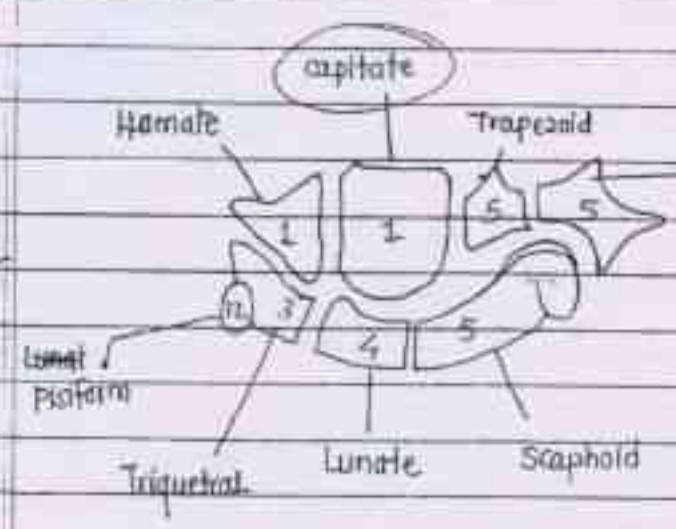
1] Proximal Row :- (L → M) — Shape

i.	Scaphoid	-	Boat
ii.	lunate	-	Half moon
iii.	triquetral	-	pyramidal
iv.	pisiform	-	pea shaped

2] Distal Row :- (L → M)

i.	Trapezium	-	quadrangular
ii.	Trapezoid	-	shoe of baby
iii.	Capitate	-	Largest carpal bone
iv.	Hamate	-	wedge shaped ± hook

ossification :-



Appearance in years.

* Clinical Anatomy of carpal Bones:-

i. # of scaphoid → common

cause:- fall on outstretched hand or on tips of the fingers

ii. Dislocation of Lunate:-

cause:- fall on acutely dorsiflexed hand & elbow joint flexed.

↓

displaces the lunate anteriorly

leading to carpal tunnel cyndrome like Features.

M-14 **carpal tunnel syndrome** - due to compression of **median N.**

MEDIAN N.
Compression

at → Medial

METACARPAL BONES - 5

Miniature Long Bones (L→M)

1st :-

i. shortest and stoutest

ii. 1st metacarpal bone rotated medially through 90°

iii. Does not articulate with any other metacarpal bone.

Ossification:- 1

P → 1

S →

4th week of development.

* Clinical Anatomy of metacarpals:-

i. Bennett's fracture :- # of base of 1st metacarpal.
Base

ii. Tubercular or syphilitic disease of the metacarpals or phalanges in a child located in the middle of diaphysis rather than in the metaphysis.

PHALANGES - 14

Total - 14

Ossification:- 1

P →

S →

Clinical Anatomy:-

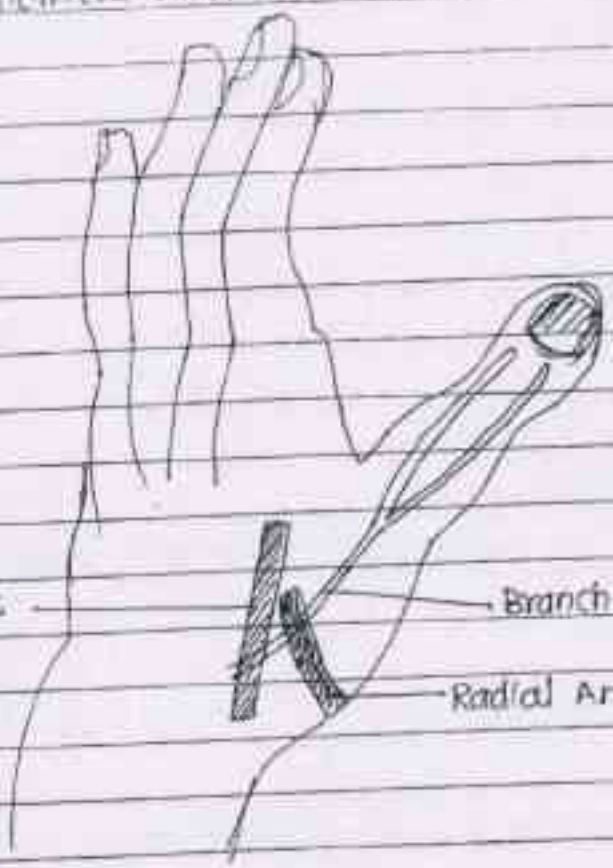
i. Total 6 digits:-
1st metacarpal bifurcates distally

ii. ANATOMICAL SNUFF BOX

- Triangular depression on posterolateral aspect of wrist joint.
- Radial artery :- traverses anatomical snuff box to make entry into palm.
- Digital branch of Radial Nerve:- passes through it to reach dorsum of Hand.
- Cephalic vein:- formed in this box
- During scaphoid fracture:- pain is felt in this box.

Anatomical snuff box contents:—

1. Radial Nerve Branch
2. Radial Artery
3. Cephalic vein



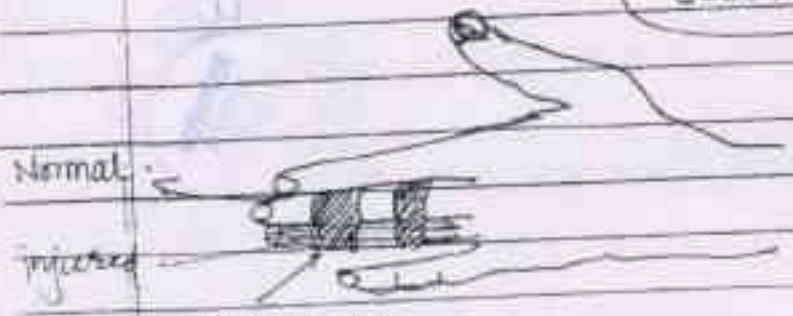
- # of distal phalanx of middle finger is commonest.

↓

Treated by splinting the injured phalanx to adjacent Normal finger.

⇓

BUDDY SPLINT



BUDDY SPLINT

PECTORAL REGION

* Sternal Angle or Angle of Louis :-

    - Felt as transverse ridge about (5 cm) below jugular Notch.

    - Serves as a landmark for identification of 2nd Rib.

* Nipple position :-

  Males / immature females → 4th intercostal space just medial to midclavicular line
  or
  - 10 cm from midsternal line

* Area supplied by spinal Nerves C_3 and C_4 directly meets the area supplied by spinal Nerves T_2 & T_3

* Platysma :- supplied by facial Nerve

  Platysma muscle – Facial N.

  Platina फेइस फोल की लेकर पड़ी

BREAST

Breast → modified (sweat) Gland

Areola → modified (sebacious) Gland

Axillary tail of Spence:-

A small extension of upper lateral quadrant of pectoral region.

↓

passes through an opening in the deep fascia

Foramen of [Langer] - opening through which axillary tail of spence passed.

Retro-mammary space:- Breast seperated from pectoral fascia by loose areolar tissue.

* Nipple is pierced by (15 to 20) lactiferous ducts

Montgomery:-

Areola becomes enlarged during pregnancy & lactation to form raised tubercles of montgomery.

Gland → 15 to 20 lobes

Lymphatic vessels:-

A plexus of lymph vessels is present deep to areola. This is subareolar plexus of Sappy.

Development of Breast:-

Line of Schultz / milk line / mammary Ridge

- Breast develops from an ectodermal thickening called milk line.

✱ Developmental Anamolies of Breast:-

(a) Amastia — absence of breast

(b) Athelia — absence of Nipple.

(c) Polymastia — super numerary breasts.

(d) polythelia — super numerary Nipples.

(e) Gynaecomastia — development of breast in male
↓
occurs in Klinefelter's syndrome

Myoepitheliocytes:-

Passage of milk from the alveoli into & along the ducts is facilitated by contraction of myo epitheliocytes.

Suspensory ligaments of cooper:-

Fibrous stroma forms septa

* Blood supply of breast:-

1. Subclavian Artery → Internal Thoracic Artery

2. Axillary Artery branches

ⓐ Lat. Thoracic ⓑ sup. thoracic ⓒ thoraco-acromial

3. Post. intercostal Arteries → Lateral branches.

* Nerve supply:-

anterior and lateral cutaneous branches of (4th) and (6th) Intercostal Nerves.

x Nerves do not control milk secretion.

↓

controlled by prolactin

(Pars anterior of hypophysis)

* Diagnosis of lesion of breast -
  Fine Needle aspiration cytology is safe & quick method

* Retracted nipple is a sign of tumour in the breast.

* cancer of mammary glands is the most common cancer in females

  ↓

  more frequent in post menopausal females due to lack of oestrogen hormones.

Human Milk contents:-

i. Water - 88%
ii. Lactose - 7%
iii. Fat - 4 %
iv. protein - 1 %
   - caseins
   - lactalbumin
v. Antibodies - IgA

Colostrum:-

Milk secreted for few days after parturition

Rich in fat
Poor in Nutrients

Witch's milk:- Under the influence of oestrogen infant breast

- Milk secreted during the 1st one or two weeks after birth

- fat free fluid

Clinical Anatomy:-

i. Retraction of nipple:-
Infiltration of ladiferous ducts and their consequent fibrosis can cause it.

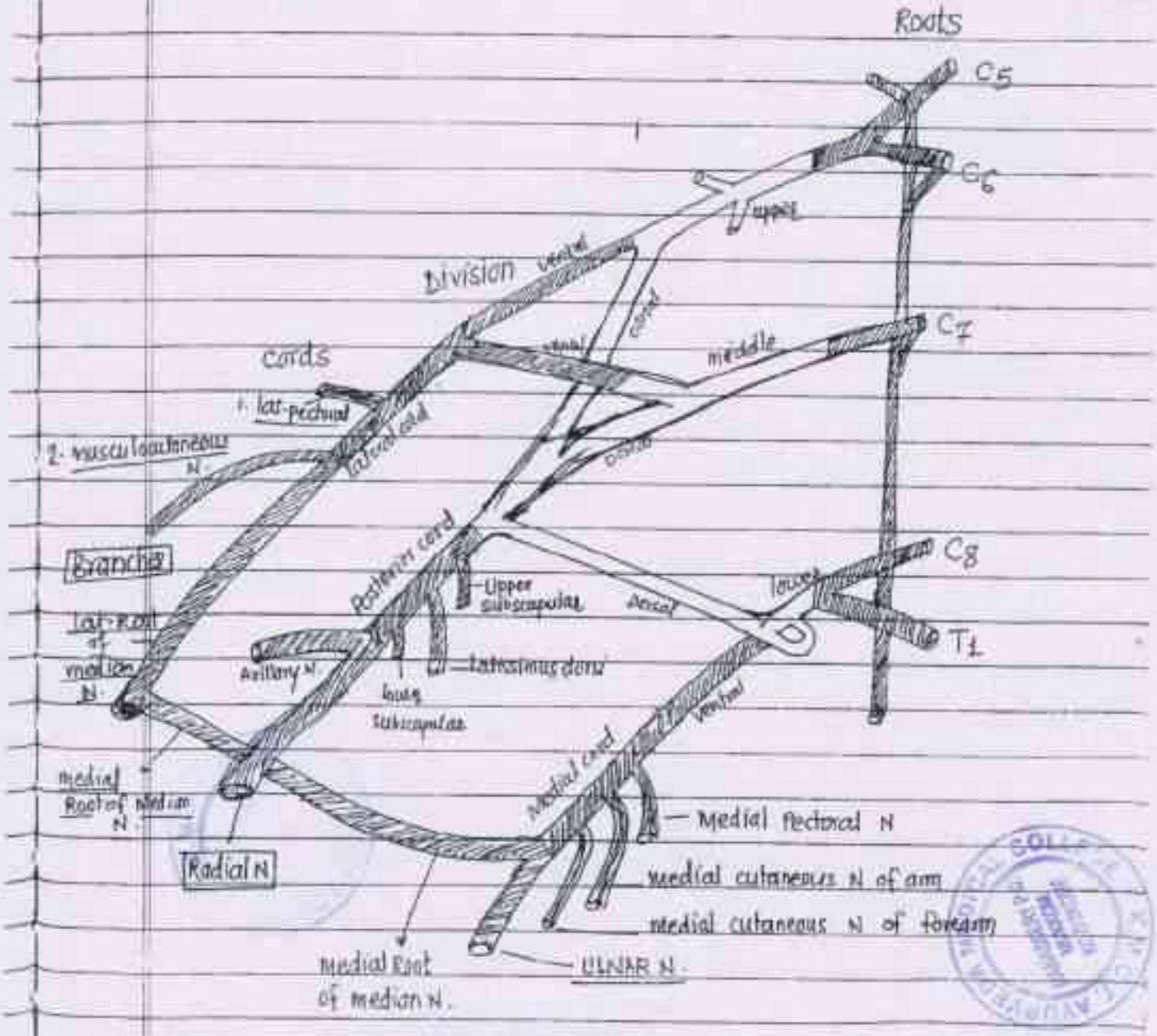
ii. Peau d' orange :- obstruction of superficial lymphatics of breast vessels by giving rise to an appearance like that of the skin of an orange.

PRINCIPAL
R.M.C.T. AYURVEDA COLLEGE

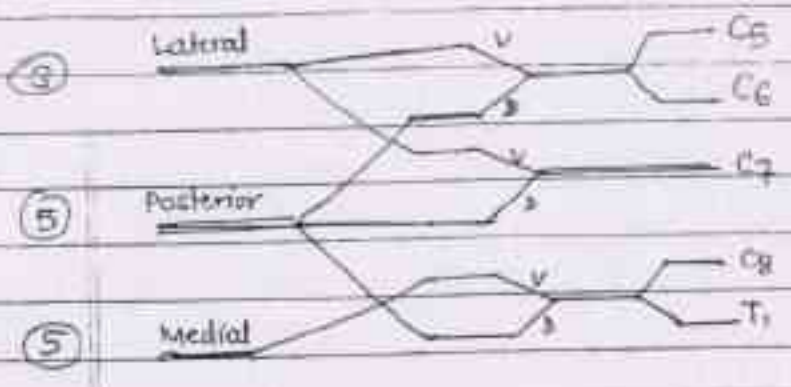
Axilla

Brachial Plexus -

1.	Roots	C_5C_6	C_7	C_8T_1
2.	Trunks	upper	middle	Lower.
3.	Divisions	V-D	V-D	V-D
4.	cords	Lateral	Posterior	Medial
5	Branches			



CORDS



Branches :

1] Lateral cord :-

1. Lateral Pectoral	C5 - C7
2. Musculocutaneous	C5 - C7
3. Lateral Root of median N.	C5 - C7

2] Posterior cord :-

1. Upper subscapular	C5 - C6
2. Lower subscapular	C5 - C6
3. N. to Latissimus Dorsi	C6 - C7 - C8
4. Axillary (Circumflex)	C5 - C6
5. Radial N.	C5 - C8, T1

3] Medial cord :-

1. Medial Pectoral	C8
2. Medial cutaneous N of arm	C8, T1
3. Medial cutaneous N of forearm	C8, T1
4. Ulnar	C7 C8 T1
5. Medial root of median N	

Axillary Artery:-

- Continuation of subclavian artery.
- continuous as brachial artery

Branches:- (6)

i. Superior Thoracic artery
ii. Thoraco acromial artery
iii. Lateral Thoracic A.
iv. Subscapular A.
v. Anterior circumflex Humeral artery
vi. Posterior circumflex Humeral artery

Axillary vein:-

continuation of basalic vein.

CLINICAL ANATOMY

1] Erb's paralysis:-

Erb's point → injury to upper trunk.
six nerves meet here

Forearm : Extended & pronated

⇓

→ Policeman's tip hand or

BHU-2013 — porter's tip hand

Policeman's Receiving tip Hand

Klumpke's Paralysis:-

Site:- Lower trunk of brachial plexus

Nerve Root:- Mainly T_1 and partly C_8

Horner's syndrome:-

if T_1 is injured

- ptosis
- miosis
- anhydrosis

Triangle of Ausculation:-

Medially — lateral border of trapezius

laterally — medial border of scapula

Inferiorly — upper border of latissimus dorsi

Floor — seventh rib
sixth and seventh intercostal spaces.

Lumbar Δ of petit:-

Medially — lateral border of latissimus dorsi

laterally — posterior border of ext. oblique muscle of the abdomen

Inferiorly — iliac crest

* Hernial site → hernia (lumbar)

* Cutaneous Nerves:-

Skin of upper limb supplied by (15) sets of cutaneous Nerve.

(13) sets are derived from brachial plexus

* Dermatomes:-

The area of skin supplied by one spinal segment is called dermatomes

Clinical Anatomy:-

spinal segments	spine of vertebra
$C_1 - C_8$	$C_1 - C_7$
$T_1 - T_6$	$T_1 - T_4$
$T_7 - T_{12}$	$T_5 - T_9$
$L_1 - L_5$	$T_{10} - T_{11}$
$S_1 - S_5$ and co 1	$T_{12} - L_1$

Bursa:-

Subacromial bursa is largest bursa of body

Median cubital vein:- IV
vein of choise for intravenous injection

If median cubital vein is absent
basilic vein is preferred.

Lymphangitis:-
inflammation of lymph vessels

Lymphadenitis:-
inflammation of lymph nodes

Lymphoedema:-
obstruction of lymph vessels →
accumulation of tissue fluid

* Lymph above umbilicus drain into axillary lymph node

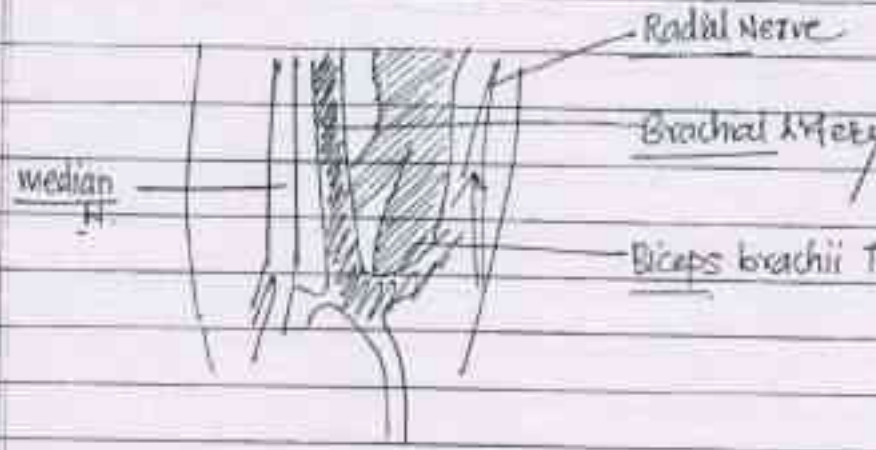
Lymph below umbilicus drain into Inguinal group

Gudrajeet's Gadge

ARM

CUBITAL FOSSA

Contents:-
i. Median Nerve
ii. Brachial artery
iii. Bicep brachi Tendon
iv. Radial Nerve



Left cubital fossa.

CLINICAL ANATOMY:-

i. B.P is universaly Recorded by auscultating the brachial artery.

ii. Saturday Night Palsy / Crutch paralysis:-

Cause ↓ Radial N injury

sleeping in an armchair with limb hanging by the side of the chair

iii. Wrist drop:-

# of shaft of humerus