

Prasuti tantra streerog Department

Pre -Operative SOP'S -

- . Written consent of patient and relatives
- . Nil By mouth from mid night
- . Preparation of the part
- . Soap water Enema
- . Inj-Xylocaine (2) sencsitivity Test
- . Inj-Taxim 1gm BD
- . Inj-Genta 80 mg BD
- . Inj Metrogyle 500 mg TDS
- . Watch for FHS (If ANC)
- . Watch for TPR/BP
- . Informs SOS





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Post-Operative SOP's

- .Head low POstion (If spinal Anesthesia Given)
- . Neck Raised in left or Right Lateral POstion (If GA)
- . NBM
- . IV DNS 2 Unit
- .IV RL 2 Unit With Pit6ocin 20 IU
- . IV D5 1 Unit
- . Inj. Taxim 1 gm BD IV
- . Inj. Metrogyl 500 mg BD IV
- . Inj. Genta 80mg BD IV
- . Inj. Dynapar SOS
- . Inj. Emset SOS
- . Inj. Pan D SOS
- .Watch for PV Bleeding
- . Watch for TPR/BP
- . Maintain Input output chart
- . Inform surgeon




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Details of availability of emergency kits and mock drill carried out to manage complication.

Uttarbasti

Possible complications.

- Injury to Vagina, Cervix as well as Uterine wall
 - Patient may land in to anaphylactic shock.
- In case of neurogenic shock patient either goes in cardiac arrest or dies
She may recover fully spontaneously

Emergency drugs available-

- Inj. Atropine
- Inj. Dopamine
- Inj. Dobutamine
- Inj. Phenylephrine
- Inj. Hydrocortisone

IV fluids like RL, NS etc.

Mock Drill Steps for a Anaphylactic shock

1. Patient in anaphylactic shock due to vasovagal syncope.
2. Patient informed to medical officer and concern authority immediately.
3. Head low given
4. All vitals checked
5. Use of atropine in case of sever bradycardia.
6. Emergency lifesaving drugs administration
7. Resuscitation if needed done.
8. Extravascular fluid replacement done with RL, NS etc.



for Chaitanya
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Kshar pratisaran/ Yonipichoo

Possible complications-

1. Patient may feel severe pain and can land in to Neurogenic shock due to acute pain experienced by her.
2. Patient may land in to vasovagal shock sometime.
3. Resulting in to sudden Hypotension, Bradycardia, Arrhythmia, low cardiac output.

Emergency drugs available-

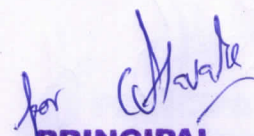
- Inj. Atropine
- Inj. Norepinephrine.
- Inj. Epinephrine
- Inj. Dopamine.
- Inj. vasopressin
- Inj. Hydrocortisone

IV fluids like RL, NS etc.

Mock Drill By Step For A. Neurogenic shock

1. Patient in Neurogenic shock with sever hypotension
2. Patient informed to medical officer and concern authority immediately.
3. Head low given- Trendelenburg Position
4. Immediate administration of IV fluids to correct hypovolemic condition
5. Use of vasoconstrictor Drugs like epinephrine, nor epinephrine.
6. Use of Inj. Atropine in case of sever bradycardia
7. Use of Steroids if needed
8. Resuscitation if needed done.
9. Extravascular fluid replacement done with RL, NS etc.



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