



## Practical 4: Customized Full-Body Kalari Uzhichil Routine

### Practical 4: Customized Full-Body Kalari Uzhichil (60-min)

#### Learning objective

Synthesize learned strokes, marma awareness, and gentle mobilizations into a safe, fluid 60-minute routine tailored to the client's constitution (prakṛti) and current doṣa imbalance.

#### 1) Pre-session: space, safety, consent (3-5 min)

- **Room & hygiene:** 26–30°C, draft-free; warm oil; clean linens; non-slip flooring; short nails, no jewelry; hand hygiene.
- **Contraindication screen (do not proceed or modify):**
  - Fever, acute infection, open wounds/skin disease, DVT/untreated varicosities, recent fracture/surgery, uncontrolled HTN, severe cardiac/renal disease, active cancer care without physician OK, first trimester pregnancy (avoid abdomen throughout pregnancy), acute disc prolapse/radiculopathy, severe neuritis.
- **Consent & draping:** Explain benefits/risks, pressure scale (0–10), areas included/excluded; obtain verbal (and written in clinic) consent; maintain professional boundaries.
- **Therapist body mechanics:** Neutral spine, hip-driven weight shift, forearm use for long strokes, avoid thumb overuse.

#### 2) Micro-consultation & plan (5 min)

##### A. Quick intake (ask ≤5 focused items)

1. Primary concern & pain map (VAS 0–10)
2. Daily strain pattern (desk work, sports, long standing)
3. Sleep, appetite, bowels (for doṣa cues)
4. Heat/cold preference
5. Red flags from screen above

##### B. Doṣa snapshot (signs today)

- **Vāta ↑:** dryness, coldness, variable pain, insomnia, anxiety, cracking joints.
- **Pitta ↑:** heat, redness, irritability, tight muscles with burning quality.
- **Kapha ↑:** heaviness, stiffness, edema, lethargy, sluggish bowels.

##### C. Goal for this session (1 sentence)

e.g., “Reduce mid-back stiffness and calm Vāta; improve neck ROM.”

#### 3) Taila (oil) selection & prep (2-3 min)

Warm to skin-safe (~40–45°C). Patch test if sensitive skin.

- **Vāta-predominant:** Sesame base; *Dhanvantaram taila*, *Mahanārāyaṇa*, *Bala-Aśvagandhādi*. Add gentle heat fomentation post-strokes if trained.



- **Pitta-predominant:** Coconut/ghee base; *Pinda taila*, *Chandana-bala-lakṣādi*. Keep room cooler; avoid vigorous friction.
- **Kapha-predominant:** Sesame/mustard blend (if tolerated); *Kottamchukkādi*, *Sahacarādi*. Use brisk strokes; keep pace lively.

(Use locally available classical/proprietary oils per institute protocol.)

## 4) Techniques palette (Kalari Uzhichil)

Keep contact continuous; match rhythm to client breath.

- **Thādavū (long gliding):** palms/forearms, proximal→distal, sets tissue tone, distributes oil.
- **Mardana (kneading):** heels of hand/thenar; muscle bellies (paraspinals, thighs).
- **Pīḍana (compressions):** sustained, broad—never on bony prominences.
- **Utsāhana (lifting/rolling):** gentle tissue lift on calves, forearms.
- **Spanda/Vibhrama (vibration/shaking):** end of a segment to down-regulate.
- **Marma sparśa (marma contact):** brief, graded pressure—see caution below.
- **Sukha-sanchalana (gentle mobilizations):** pain-free joint circles, traction, oscillations.

**Marma caution (avoid deep pressure):** Hṛdaya (precordium), Nābhi, Basti (suprapubic), Śaṅkha/Āpāṅga (temples/eye canthus), Sthapanī (glabella), Kṣipra (web of thumb), Talahridaya (palm/sole centers). Prefer **light contact** (3–5/10) for 1–3 breaths.

## 5) The 60-minute flow (with timing)

**Suggested total = 60 min** (includes intake & closure).

- Intake 5 min → Hands-on 50 min → Closure 5 min.

### A) Prone sequence (25 min)

- 1. Feet & calves (6 min)**
  - Thādavū from heel→knee (x3 each leg)
  - Mardana on gastrocnemius/soleus
  - Marma light contact: **Indrabasti**, **Gulpha** (2 breaths each)
  - Ankle circles (3 each direction)
- 2. Hamstrings & glutes (5 min)**
  - Broad forearm glides; knead attachments near ischial area (no direct pressure on ischial tuberosity)
  - Hip oscillations; gentle IR/ER with knee flexed
- 3. Back (thoracolumbar) (10 min)**
  - Forearm Thādavū sacrum→shoulders (x6)
  - Mardana paraspinals; avoid spinous processes
  - Scapular borders friction (soft)
  - Marma: **Katikataruna** (PSIS region) light contact
  - Prone sacral rocking synced to exhale
- 4. Posterior shoulders & neck (4 min)**
  - Upper trapezius compress-release
  - Shoulder circumduction (pain-free arc)
  - Occipital hold, breath cueing



## B) Supine sequence (25 min)

### 5. Feet & shins (4 min)

- Thādavū toes→knee; Talahridaya (sole center) light contact
- Ankle pumps; subtalar mobilization

### 6. Quadriceps & hips (6 min)

- Long glides; kneading on vasti
- Hip traction (gentle); FABER/FIR pattern mobilizations (within comfort)

### 7. Abdomen (optional, 3 min; avoid in pregnancy or discomfort)

- **Very light** clockwise circles around navel (no deep pressure on **Nābhi** marma)
- Diaphragmatic breath cueing

### 8. Chest & arms (5 min)

- **No pressure** on precordium (Hṛdaya). Work pectoral edges, intercostal spaces lightly
- Arms: thādavū wrist→shoulder; mardana forearm; wrist/finger circles
- Palm marma (**Talahridaya**) light contact

### 9. Anterior neck & face (optional, 3 min)

- Light strokes along SCM (ear→clavicle)
- Avoid deep work on throat; temples only feather-touch
- Finish with forehead effleurage

### 10. Integration (4 min)

- Bilateral arm/leg holds; gentle limb traction
- Stillness hold at ankles, then crown (non-directive)

## C) Closure (5 min)

- Remove excess oil with warm towel.
- Seated neck/shoulder re-check; cue 3 slow breaths.
- Re-rate key symptom (VAS change).

## 6) Pressure, pacing, breathing

- **Pressure scale:** Aim 4–6/10 for most tissues; 2–3/10 over sensitive areas; never exceed client's ceiling.
- **Pace:** Vāta—slow/warm; Pitta—moderate/neutral; Kapha—brisk/activating.
- **Breath pairing:** Glide on exhale; pause on inhale for mobilizations.

## 7) Post-massage advice (2–3 min)

- Warm water sips; light, warm meal after 30–60 min; avoid cold drafts/bath for 2–3 hours.
- **Home care:** 5–7 min gentle joint circles, diaphragmatic breathing at night; local warm compress if Vāta stiffness; cool rinse next morning for Pitta.
- **Follow-up cadence (typical, adjust to case):**
  - Vāta-dominant pain/stress: 2×/week for 2–3 weeks, then weekly.
  - Pitta tension: weekly, emphasize cooling; add guided relaxation.
  - Kapha stiffness: weekly or 2×/week initially with brisker routines.

## 8) Documentation (SOAP) + self-evaluation

### SOAP template (copy for logbook):

- **S:** “Mid-back stiffness 7/10; desk job; sleeps 6h; prefers warmth.”



- **O:** Guarded thoracolumbar fascia, cool distal limbs; BP 126/78; no red flags.
- **A:** Vāta ↑ in śleṣma sthāna (back) with Kapha stiffness; aim to warm, lengthen, calm.
- **P:** 50-min Uzhichil per flow; oil: *Mahanārāyaṇa* warmed; pressure 4-6/10; marma contact—Katikataruna, Indrabasti, Talahridaya (light); HEP: breath + joint circles; review in 1 week.

#### Self-evaluation rubric (rate 1-5):

1. Flow continuity (no “breaks” in contact)
2. Doṣa-appropriate pace/pressure
3. Marma safety and accuracy
4. Client comfort (breath, face, feedback used)
5. Body mechanics & stamina
6. Time management (kept 60 min)
7. Outcomes (VAS change, ROM, relaxation)

#### Reflection prompts (write 3-4 lines):

- What one adjustment next time would improve results?
- Which segment consumed extra time and why?
- How did client breathing change during the session?

## 9) Assessment checklist

- Contraindication screen & consent done
- Proper draping & warming of oil
- Doṣa-aligned oil and pacing chosen (justify)
- Demonstrates thādavu, mardana, pīḍana, mobilizations safely
- Correct marma caution (names + light contact only)
- Continuous flow & therapist ergonomics
- Clear post-care + documented SOAP

## 10) Common errors to avoid

- Overworking upper traps/low back with pointy thumbs
- Deep pressure on abdomen/chest/temples
- Cold oil, cold room, or abrupt transitions
- Ignoring client breath/facial cues
- Skipping intake or post-care

#### Quick review (teach-back)

- If today's client shows **Vāta ↑**, name **two** changes you'd make to oil and pacing.
- Point to **three** marma where only light contact is appropriate.
- Which **two** mobilizations would you keep for a desk-worker with shoulder tightness?

If you'd like, I can turn this into a printable one-page checklist and a 60-min wall-chart timing card for your clinic/LMS. Want it as a PDF or PPT?