Ordinance Governing

HOMOEOPATHY DEGREE I, II, III & IVth Year B.H.M.S. COURSE

Syllabus / Curriculum 2019 - 20



Accredited 'A' Grade by NAAC (2nd Cycle) Placed in Category 'A' Grade by MHRD(GoI)

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VISION

To be an outstanding KAHER of excellence ever in pursuit of newer horizons to build self reliant global citizens through assured quality educational programs.

MISSION

- To promote sustainable development of higher education consistent with statutory and regulatory requirements.
- To plan continuously provide necessary infrastructure, learning resources required for quality education and innovations.
- To stimulate to extend the frontiers of knowledge, through faculty development and continuing education programs.
- To make research a significant activity involving staff, students and society.
- To promote industry / organization, interaction/collaborations with regional/national / international bodies.
- To establish healthy systems for communication among all stakeholders for vision oriented growth.
- To fulfill the national obligation through rural health missions.

OBJECTIVES

The objectives are to realize the following at KAHER and its constituent institutions:

- To implement effectively the programs through creativity and innovation in teaching, learning and evaluation.
- To make existing programs more careers oriented through effective system of review and redesign of curriculum.
- To impart spirit of enquiry and scientific temperament among students through research oriented activities.
- To enhance reading and learning capabilities among faculty and students and inculcate sense of life long learning.
- To promulgate process for effective, continuous, objective oriented student performance evaluation.
- To ordinate periodic performance evaluation of the faculty.
- To incorporate themes to build values, Civic responsibilities & sense of national integrity.
- To ensure that the academic, career and personal counseling are in-built into the system of curriculum delivery.
- To strengthen, develop and implement staff and student welfare programs.
- To adopt and implement principles of participation, transparency and accountability in governance of academic and administrative activities.
- To constantly display sensitivity and respond to changing educational, social, and community demands.
- To promote public-private partnership.

INSIGNIA



The Emblem of the KAHER is a Philosophical statement in Symbolic.

The Emblem...

A close look at the emblem unveils a pillar, a symbol of the "KAHER of Excellence" built on strong values & principles.

The Palm and the Seven Stars...

The Palm is the palm of the teacher- the hand that acts, promises & guides the students to reach for the Seven Stars...

The Seven Stars signify the "Saptarishi Dnyanamandal", the Great Bear-a constellation made of Seven Stars in the sky, each signifying a particular Domain. Our culture says: The true objective of human birth is to master these Knowledge Domains.

The Seven Stars also represent the Saptarishis, the founders of KLE Society whose selfless service and intense desire for **"Dnyana Dasoha"** laid the foundation for creating the knowledge called KLE Society.

Hence another significance of the raised palm is our tribute to these great Souls for making this KAHER a possibility.

Empowering Professionals...

Empowering Professionals', inscription at the base of the Emblem conveys that out Organization with its strength, maturity and wisdom forever strive to empower the student community to become globally competent professionals. It has been a guiding force for many student generations in the past, and will continue to inspire many forth coming generations.



KLE ACADEMY OF HIGHER EDUCATION & RESEARCH

(Deemed-to-be-University)

[Declared as Deemed-to-be-University u/s 3 of the UGC Act, 1956 vide Government of India Notification No. F.9 -19/2000-U.3 (A)]

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Ref. No. KAHER/AC/19-20/D-2509/9011

25th September 2019

NOTIFICATION

Sub: Ordinance governing the syllabus/curriculum for Bachelor of Homoeopathic Medicine & Surgery (BHMS) Course

Ref: Minutes of the meeting of the Academic Council of the KAHER held on 20th September 2019.

In exercise of the powers conferred under Rule A-04 (i) of the Memorandum of Association of the KAHER, the Academic Council of the KAHER is pleased to approve the Ordinance governing the syllabus / curriculum for **Bachelor of Homoeopathic Medicine & Surgery (BHMS) Course** in its meeting held on **20**th **September 2019**.

The Ordinance shall be effective for the students admitted to **Bachelor of Homoeopathic Medicine & Surgery (BHMS) Course** in the constituent college of the KAHER viz. **KLE Homoeopathic Medical College**, Belagavi from the academic session **2019-20** onwards.

By Order

REGISTRAR

To

The Principal, KLE Homoeopathic Medical College, BELAGAVI.

CC to:

- 1. The Secretary, University Grants Commission, New Delhi,
- 2. The Secretary to Chancellor, KAHER, Belagavi.
- 3. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 4. All Officers of the KAHER Academic Affairs / Allied Course/Examination Branch.

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Section I

INTRODUCTION

Basic objectives of education and training in a Homoeopathic Institution is to prepare a competent Homoeopathic Physician, who is capable of functioning independently and effectively in Rural and Urban set up.

a. Sound Foundation

To function effectively as a Homoeopathic physician, a thorough grasp over the medical concepts is imperative. For this the educational process shall be perceived as an integrated evolving process and not merely as an acquisition of a large number of disjointed facts.

A student shall have to pass through a training procedure, which encompasses the above, right from I BHMS to IV BHMS and also during the internship period. He/ She shall undergo an education process wherein learning of Facts and Concepts right from I Year are in continuity, in an evolutionary and progressive pattern. In I BHMS, students shall study the fundamental principles of Homoeopathy and will also learn more of applied anatomy than a multitude of minor anatomical details.

In II BHMS, a student shall be exposed to very vital concepts of susceptibility and symptomatology with Analysis-Evaluation and details of the Homoeopathic concepts and logic of Homoeopathy. These will attain much deeper significance (if care is taken by teachers of Pathology and Organon-Philosophy) when the current knowledge of INFLAMMATION, IMMUNITY, is correlated well with the concepts of susceptibility.

In III BHMS, there is opportunity to fortify the foundation at the best by correlating between theory of Chronic diseases and the Patho-Physiological facts of Gynecology, Surgery and Medicine. A student shall have to be taught the spectrums of various diseases in correlation with the spectrum of miasmatic manifestations. He will then be able to use a well-concluded evaluation order of Characteristics to derive an Operationally valid repertorial Totality.

The Knowledge gathered in this pattern will keep him constantly aware of his objectives and his role as a Homoeopathic Physician. The integration will eliminate the state of confusion. The Therapeutic actions then will be right and complete, utilizing the full repertories of the Medicinal and Non-medicinal measures, keeping him up-to-

date about all fresh scientific developments and inculcating values of Continuous Medical Education.

b. Execution

Maximum emphasis shall be placed on the applied aspects of all the subjects. Thus teachings of Anatomy, Physiology and Biochemistry will demand greater emphasis on applied aspects. Teaching of Pathology will demand sharp focus on General Pathology, while Regional Pathology will come up as an application. It shall require correlation with Medicine, Surgery and Gynecology.

All these need to be studied from Homoeopathic perspectives, with emphasis on applied aspects of Organon Philosophy & Homoeopathic Therapeutics, representing application to all other subjects.

c. Inter-Departmental Co-ordination

Essentially, the entire approach becomes integrated. All departments shall develop a cohesive well-defined programme of inter-departmental co-ordination.

It is therefore desirable to have teaching programs wherein, by rotation each department participates in the teaching, co-coordinating well with the other faculties with constant updating and evaluation. This will ensure fundamental and exceptional clarity.

d. Deductive-Inductive Teachings

While teaching, there shall be balance in designing deductive and inductive process in mind. There shall be less emphasis on didactic lectures. Major portion of the time of the students shall be devoted to demonstrations, group discussions, seminars and clinics. Every attempt shall be made to encourage students to participate in all these to develop his personality, character, expressions and to ensure rapid grasp over the concepts.

e. Patient Oriented Teachings

In order to impart the integrated medical education, PATIENT has to be the Centre of learning.

Importance of social factors in relation to the problem of health and disease, shall receive proper emphasis throughout the course and to achieve this objective, the educational process shall be community as well as hospital based.

Based on the above concepts, the course of studies as laid down in these Regulations will help to fulfill these needs. While doing so, the need of the hour, past experience in learning and teaching is taken into consideration.

SECTION -II

GOALS OF CURRICULUM

1. The curriculum should enable the students to play the role of a competent Homoeopathic Physician and fulfill the responsibilities of a medical graduate in both rural and urban environment confidently and effectively.

Emphasis in the course should be to demonstrate to the students:

- Application of Homoeopathic principles.
- Scope and limitations of Homoeopathy.
- Role of Homoeopathy in the present and future context.
- Skills in clinical diagnosis.
- > Techniques of individualization.
- Evolution of constitutional totality.
- Miasmatic analysis of the patient.
- 2. Teaching programme should be an integrated one, avoiding compartmentalization of disciplines. The teaching of clinical subjects, Paraclinical subjects and pre-clinical subjects should be done with a Homoeopathic perspective and need. All the departments should jointly develop a teaching programme so that the students are presented with an integrated and cohesive knowledge and skills both vertically and horizontally. A uniform method of clinical approach that blends the tenets of Homoeopathy and contemporary developments in the field of medicine to meet the requirements of effective Homoeopathic practice should be evolved and adopted by all the clinical departments.
- 3. The educational experience should provide community orientation in addition to mere hospital orientation. 4. The scope of Genus epidemicus should be fully tapped in the field of preventive medicine.
- 4. Every effort should be made to use learner-oriented methods that encourages cultivation of the values like logical thinking, clarity of expression and action, independence of judgment, scientific habits, problem-solving abilities, self-

- initiated and self-directed learning, purity of purpose and other necessary values.
- 5. Reduction of theoretical and class-room lectures and increasing use of the methods of active learning like group discussions, seminars, role modeling, field visits, clinical case-demonstration etc. should be attempted by all departments to develop the inter-personal and communicative skills and to provide an integrated learning.
- 6. As education without character and discipline is futile, more so in the field of medicine, educational institution should also be a center for character building than a mere center for learning. Examination should be an avenue not merely to assess the student's extent and depth of knowledge and skills but also to assess his dedication, integrity, habits, behavior, values and other essential expressions of affective domain.
 - Regular periodic internal assessment of the student should be done throughout the course. It should not be limited to written tests. Maintenance of records, participation in seminars and group discussions, clinical case study, participation in other projects and assignments should also have a bearing on the internal assessment. These may be evaluated objectively.
 - Teachers shall expand their role from mere imparting of knowledge to that of facilitator, motivator and role model for students learning and practice during the entire course.
 - Every institution shall have a medical education unit (cell) for faculty development, preparation of learning resource materials, evolving standardized techniques in teaching, case-study, methods of prescription, potency selection, repetition procedures, evaluation of teaching methods etc.
 - Students should be taught to appreciate the scope of other systems of medicine and utilize this knowledge for the optimal benefit of human being, sick or well person.
 - The educational experience should result in appreciation of the effects of social, psychological, cultural, economical and environmental factors on health and resolution of these with a human concern.
 - The curriculum should create an interest in the student for continuous learning, updating the knowledge and indulge in research. He/she should

be open to all developments in the field of medicine and accept them after critical analysis and adopt them for furthering his/her professional competence.

• The teaching programme should facilitate the development of personal characteristics and attitude acquired for professional life such as personal integrity, sense of responsibility and dependability and ability to relate to or show concern for other individuals and society.

SECTION III

OBJECTIVES

At the end of the course the Homoeopathic medical student shall:

- a. Be a competent clinician with proficiency in diagnosis and management of common health problems of both individual and the community.
- b. Be a competent to practice promotive, preventive, curative and rehabilitative medicine in respect to the commonly encountered health problems.
- c. Develop humane attitude.
- d. Possess the attitude for continued self-learning and to seek further expertise or to pursue research.
- e. Be competent in implementing National Health Programs such as:
 - 1. Family Welfare and Maternal and Child Health (MCH)
 - 2. Sanitation and water supply
 - 3. Prevention and control of communicable and non-communicable diseases
 - 4. Immunization
 - 5. Health education
 - 6. National Health Mission.
- f. Acquire basic management skills in managing human resources and materials related to health care delivery.
- g. Have personal character and attitude for professional life such as personal integrity, sense of responsibility, dependability and ability to relate to or show concern for other individuals.

SECTION IV

REGULATIONS GOVERNING BHMS COURSE

I. Courses of Study

- 1. The Bachelor of Homoeopathic Medicine and Surgery degree course shall comprise a course of study spread over a period of 5 ½ years including a compulsory rotatory internship of one-year duration after passing the IV BHMS examinations.
- 2. Every candidate shall undergo a compulsory rotatory internship for a period of 12 months as per the procedure annexed to this regulation.
- 3. On successful completion of internship and on the recommendation of the principal of the Homoeopathic Medical College concerned, the University shall issue degree to such candidates.
- 4. Every candidate shall complete the course including the passing of examination in all subject and complete the compulsory internship training within a period of eleven years from the date admission in the 1st year BHMS degree course in the college concerned, failing which his/ her name shall be removed from the rolls of the college.

II. Eligibility for Admission

- 1. (i) The Candidate must have passed in the subjects of Physics, chemistry, Biology and English individually and must have obtained a minimum of fifty per cent marks taken together in Physics, Chemistry and Biology at the qualifying examination mentioned above for unreserved candidates and forty per cent marks in respect of the Scheduled Castes, Scheduled Tribes and other Backward Classes;
 - (ii) Candidate with benchmark disabilities as specified under the Rights of Persons with Disabilites Act, 2016 (49 of 2016), the minimum qualifying marks in qualifying examination in Physics, Chemistry and Biology shall be forty-five per cent for general category and forty per cent for the Scheduled Castes, Scheduled Tribes and other Backward Calsses.";
- 2. A candidate who has passed the B.Sc. Part-I degree examination of any University in India or recognized as equivalent thereto with the following science

subjects namely Chemistry, Botany & Zoology is eligible for admission to I BHMS Course, provided the candidate has passed the Pre-University or equivalent examination with Physics, Chemistry, Biology as optional subjects and English as one of the languages. Note the candidate should have passed the subjects of Physics, Chemistry, Biology individually in the pre-university or its equivalent examination.

- 3. A candidate who has passed B.Sc. degree examination of any University in India or recognized as equivalent thereto with the following science subjects namely Chemistry, Botany and Zoology is eligible for admission to I BHMS Course provided the candidate has passed Pre-University or equivalent examination with Physics, Chemistry and Biology as optional subjects and English as one of the languages at the Pre-University or B.Sc. Part-I level. Note the candidate should have passed the subjects of Physics, Chemistry, Biology individually in the pre-university or its equivalent examination.
- 4. No candidate shall be admitted BHMS Degree Course unless he/she has attained the age of 17 (Seventeen) years on or before 31st December of the year of this admission in the first Year of the course and not older than the age of 25 (twentyfive) years on or before 31st December of the year of the admission in the First year of the course:

Provided that the upper age limit may be relaxed by Five years to the scheduled castes, scheduled tribes, other backward classes and physically handicapped candidates.

5. A candidate to be eligible to be admitted to BHMS course shall NOT be blind (including colour blindness), deaf, dumb and deaf and dumb.

III. Criteria for selection of students

The selection of students to the college shall be based solely on merit. The process will be in accordance with the norms laid down by competent Regulatory Bodies from time to time.

(i) There shall be a uniform entrance examination to all medical institutions at the undergraduate level, namely the National Eligibility Entrance Test (NEET) for admission to undergraduate course in each academic year and shall be conducted by an authority designated by the Central Government;

(ii) In order to be eligible for admission to undergraduate course for an academic year, it shall be necessary for a candidate to obtain minimum of marks at 50th percentile in the 'National Eligibility Entrance Test for undergraduate course' held for the said academic year:

Provided that in respect of-

- (a) Candidates belonging to the Scheduled Castes, Scheduled Tribes and Other Backward Classes, the minimum marks shall be at 40th percentile;
- (b) Candidates with benchmark disabilities specified under the Rights of persons with Disabilities Act, 2016 (49 of 2016), the minimum marks shall be at 45th percentile for General Category and 40th percentile for the Scheduled Castes, Scheduled Tribes and Other Backward Classes.

Explaination – The percentile shall be determined on the basis of highest marks secured in the all India common merit list in the National Eligibility Entrance Test for undergraduate courses;

Provided further that when sufficient number of candidates in the repective categories fail to secure minimum marks in the National Eligibility Entrance Test, as specified above, held for any academic year for admission to undergraduate courses, the Central Government in consultation with Central Council may at its discretion lower the minimum marks required for admission to undergraduate course for candidates belonging to respective categories and marks so lowered by the Central Government shall be applicable for that academic year only.

- (iii) An all India common merit list as well as State-wise merit list of the eligible candidates shall be prepared on the basis of the marks obtained in the National Eligibility Entrance Test and the candidates, within the respective categories, shall be admitted to undergraduate course from the said merit lists only.
- (iv) The Seat matrix for admission in the Government, Government-aided Institutions and Private Institutions shall be fifteen percent for the all India quota and eighty-five percent for the States and Union territories quota.
- (v) The designated authority for counseling for all admissions to undergraduate course in all Homoeopathy educational institutions in the

States and Union territories including institutions established by the States Government University, Deemed University, Trust Society, Majority Institutions, Corporation or Company shall be the respective State or Union territory in accordance with the relevant rules and regulations of the concerned State or Union territory Government, as the case may be.

- (vi) The counseling for all admissions to undergraduate course for seats under the all India quota as well as for all Homoeopathy educational institutions established by the central Government shall be conducted by the authority designated by the Central Government.
- (vii) No candidate who has failed to obtain the minimum eligibility marks as specified above shall be admitted to undergraduate course in the said academic year.
- (viii) No authority or institution shall admit any candidate to the undergraduate course in contravention of the criteria or procedure as laid down by these regulations in respect of admissions and any candidate admitted in contravention of the said criteria or procedure shall be discharged by the Central Council forthwith.
- (ix) The authority or institution which grants admission to any student in contravention of the aforesaid criteria or procedure shall be liable to face action in terms of the provision of the Act.
- (x) For foreign national candidates any other equivalent qualification to be approved by the Central Government may be allowed, and entrance examination for admission to undergraduate course namely the "National Eligibility Entrance Test (NEET) shall not be applicable for foreign national candidates."

IV. Duration of the course

The Bachelor of Homoeopathic Medicine and Surgery degree course shall comprise a course of study spread over a period of 5 ½ years including a compulsory rotatory internship of one-year duration after passing the IV BHMS examinations.

I. BHMS 12 monthsII BHMS 12Months

III BHMS 12MonthsIV BHMS 18 MonthsINTERNSHIP 12 Months

Note: A candidate shall be permitted to join BHMS – II Year only if he has passed Anatomy, Physiology including Biochemistry for which he/she will be permitted not more than four chances including original examination. The candidate shall pass First BHMS Examination in all the subjects at least one term (six months) before he is allowed to appear in Second BHMS Examination.

V. Details of courses study (Subject wise/ year wise)

SI.No	Name of the subject	Subject taught during	Holding of Examinations
1	Anatomy	First B.H.M.S	At the end of First B.H.M.S.
2	Physiology including Biochemistry	First B.H.M.S	At the end of First B.H.M.S.
3	Homoeopathic Pharmacy	First B.H.M.S.	At the end of First B.H.M.S.
4	Homoeopathic Materia Medica	First B.H.M.S. Second B.H.M.S. Third B.H.M.S. and Fourth B.H.M.S.	At the end of Second Third and Fourth B.H.M.S.
5	Organon of Medicine with Homoeopathic Philosophy	First B.H.M.S. Second B.H.M.S. Third B.H.M.S and Fourth B.H.M.S.	At the end of Second Third and Fourth B.H.M.S.
6	Pathology and Microbiology	Second B.H.M.S.	At the end of Second B.H.M.S.
7	Forensic Medicine and Toxicology	Second B.H.M.S.	At the end of Second B.H.M.S.
8	Surgery	Second B.H.M.S. and Third B.H.M.S.	At the end of Third B.H.M.S.
9	Gynaecology and Obstetrics	Second B.H.M.S. and Third B.H.M.S.	At the end of Third B.H.M.S.
10	Practice of Medicine	Third B.H.M.S. and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.
11	Community Medicine	Third B.H.M.S. and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.
12	Case Taking and Repertory	Third B.H.M.S. and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.

Subjects & Hours of Teaching First Year BHMS (Duration 1Year)

Table 1:

Subjects prescribed and distribution of teaching hours for theory and practical classes

SI No	Subject	Theory	Practical/ Tutorial/seminar	Total
1	Anatomy	200 Hrs (including 10 hours each for histology and embryology	275 Hrs (including 30 hours for histology and embryology)	475 Hrs
2	Physiology	200 Hrs. (including 50 hours for Bio- chemistry)	275.Hrs (including 50 hours for Bio- chemistry)	475 Hrs
3	Homoeopathic Pharmacy	100 Hrs	70 Hrs	1 <i>7</i> 0 Hrs
4	Homoeopathic Materia Medica	35Hrs		35 Hrs
5	Organon of Medicine with Homooeopathic Philosophy	35 Hrs		35 Hrs
	TOTAL	570 Hrs	620 Hrs	1190Hrs

Second Year BHMS (Duration 1 Year)

Table 2:

Subjects prescribed and distribution of teaching hours for theory and practical classes

SI.	subject	Theoretical	Practical or clinical or tutorial	Total
No		lectures (in hours)	or seminar (In hours)	
1	Pathology	200	80	280 Hrs
2	Forensic Medicine	80	40	120 Hrs
	and Toxicology			
3	Organon of Medicine	160	60	220 Hrs
	with Homoeopathic			
	Philosophy			
4	Homoeopathic	160	60	220 Hrs
	Materia Medica			
5	Surgery	80	60 (One term of three months	140 Hrs
			in surgical ward and outpatient	
			department)	
6	Gynaecology and	40 + 40 - 80	60 (One term of three months	140 Hrs
	Obstetrics		in surgical ward and outpatient	
			department)	
	TOTAL	760	360	1120 Hrs

Note: Clinical postings: Monday to Saturday of 3 hrs. duration.

Third Year BHMS (Duration 1 Year)

Table 3:

Subjects prescribed and distribution of teaching hours for theory and practical classes

SI No	Subject	Theoretical lecture (in	Practical or clinical or tutorial or seminar	Total
		Hours)	(In hours)	
1	Company in aboding FAIT		` ' ' ' ' '	22511
	Surgery including ENT,	100Hrs	75 Hrs (three months	225Hrs
	Ophthalmology, dentistry &	50 Hrs	clinical postings in	
	Homoeopathic Therapeutics	Total: 150Hrs	ward and OPD	
2	Obstetrics and Gynaecology,	100 Hrs	75 Hrs (three months	225Hrs
	Infant Care and	50 Hrs	clinical postings in	
	Homoeopathic Therapeutics	Total:150Hrs	ward and OPD	
3	Homoeopathic Materia	100Hrs	75Hrs	175Hrs
	Medica			
4	Organon of Medicine with	100Hrs	75Hrs	1 <i>7</i> 5Hrs
	Homoeopathic Philosophy			
5	Practice of Medicine and	50Hrs	75Hrs	150Hrs
	Homoeopathic Therapeutics	25Hrs		
		Total 75Hrs		
6	Case Taking & Repertory	50Hrs	25Hrs	75Hrs
7	Community Medicine	35Hrs	15Hrs	50Hrs
	TOTAL	660Hrs	415Hrs	1075Hrs

Note: Clinical postings: Monday to Saturday of 3 hrs duration.

Fourth Year BHMS (Duration 1.1/2 Year)

Table 4:

Subjects prescribed and distribution of teaching hours for theory and practical classes

SI.	subject	Theoretical	Practical or clinical or	Total
No		Lectures (in Hrs)	tutorial or seminar (In	
			hours)	
1	Practice of Medicine and	120Hrs	150 Hrs in each subject	330Hrs
	Homoeopathic Therapeutics	60Hrs	(One term of three months	
		Total: 180 Hrs	each in outpatient	
			department and in patient	
2	Homoeopathic Materia Medica	180 Hrs	department respectively	330 Hrs
3	Organon of Medicine with	180 Hrs	for case taking, analysis,	330Hrs
	Homoeopathic Philosophy		evaluation and provisional	
4	Case Taking &Repertory	100 Hrs	prescription just for case	250 Hrs
			presentation on 10 cases	
			per month)	
5	Community Medicine	100 Hrs	100Hrs	200Hrs
	Total	740Hrs	700 Hrs	1440Hrs

Note: Clinical classes in the subjects of Homoeopathic Materia Medica, Organon of Medicine with Homoeopathic Philosophy, Case taking and Repertory have to be accommodated within Surgery, Obstetrics and Gynaecology and Medical OPD /IPD postings during 2nd to 4th BHMS courses.

Attendance

Every candidate shall have attendance of not less than 75% of the total classes conducted in theory and practicals separately in each academic year calculated from the date of commencement of the term to the last working day as notified by the university in each of the subjects prescribed to be eligible to appear for the university examination.

The principal should notify at the college the attendance details of all the students at the end of each term without fail under intimation to the university.

A candidate lacking in attendance and satisfactory progress in any of the subject(s) in theory or practicals / clinical in the first appearance shall not be permitted to appear for the examination in that subject(s).

Special classes, seminars, demonstrations, practicals, tutorials etc shall be arranged for the repeaters in the subject in which they have failed before they are allowed to appear in the next examination, in which attendance is compulsory.

Scheme of Examination

Internal Assessment:

It shall be based on evaluation of assignment, presentation of seminar, clinical presentation etc. There shall be periodical tests and internal (theory & practical) examinations in each academic year. Although the question of number of examinations is left to the institution, there should be a minimum of three Internal assessment examinations during the I, II, III and IV BHMS course and average of best of two examination marks for each year should be taken into consideration while calculating the marks of the internal assessment. Day-to-day records should be given importance in the internal assessment. Proper record of the work should be maintained, which will be the basis of internal assessment of all students and should be available for scrutiny. Assistant Professor and above or lecturer with 3 years of teaching experience in the concerned subject can conduct internal assessment examination.

A student must secure at least 35% of total marks fixed for internal assessment in a particular subject in order to be eligible to appear University Examination in that subject.

Each student appearing for I, II, III & IV BHMS shall maintain practical record/journal comprising of 20 cases (10 short & 10 long cases) with complete processing of the case material for each examination, which shall be evaluated by the head of the department.

There shall be provision for improvement of the internal assessment of all these examinations and journal work in I, II, III & IV BHMS examinations respectively.

Internal Assessment Examination

Three Internal Assessment Examinations will be conducted.

A student must secure at least 35% of total marks fixed for internal assessment in a particular subject, in order to be eligible to appear for University Examination. Best of two examinations results will be considered.

Question Paper Pattern for Internal Assessment Examination:

No.	Division	No. Of	Marks Per	Total	Grand
		Questions	Question	Marks	Total
1	MCQ	20	1	20	
2	Long Essay Questions	2	10	20	
3	Short Essay	6	5	30	100
4	Short Answers	10	3	30	

University Examination

The university shall conduct two examinations annually with an interval of not less than four to six months between the two examinations.

Schedule of Examination

I BHMS -The first year BHMS examination shall be at the end of 12 months after admission

II BHMS - The second year BHMS examination shall follow one year of course of study after the I BHMS examination

III BHMS - The third year BHMS examination shall follow one year of course of study after the II BHMS examination

IV BHMS - The fourth year BHMS examination shall follow ONE AND HALF year of course of study after the III BHMS examination

All examinations shall be held as per notification issued in the calendar of events by the university from time to time.

Particulars of subjects for university examination

The subjects, the number of theory papers, practical and viva-voce examination shall be as follows.

IBHMS:

- **1. Anatomy including Histology and Embryology:** There shall be two theory papers, one practical and one viva-voce examination.
- **2. Physiology including Biochemistry:** There shall be two theory papers, one practical and one viva-voce examination.
- **3. Homoeopathic pharmacy:** There shall be one theory, one practical & one vivavoce examination.

II BHMS:

- **1. Pathology and Microbiology:** There shall be two theory papers, one practical and one viva-voce examination.
- **2. Forensic Medicine and Toxicology:** There shall be one theory paper, one practical and one viva-voce examination.
- **3. Organon of Medicine with Homoeopathic Philosophy:** There shall be one theory paper, one practical and one viva-voce examination.
- **4. Homoeopathic Materia Medica:** There shall be one theory paper, one practical and one viva-voce examination.

III BHMS:

- **1. Organon of Medicine with Homoeopathic Philosophy:** There shall be one theory paper, one Practical and one viva-voce examination.
- 2. Surgery: There shall be two theory papers, one practical and one via-voce examination. The practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skill on the surgical instruments, bandages and general measures related to surgery, scope of Homoeopathic therapeutics and examination and diagnosis of surgical disease through clinical examination, X-ray and other common

- diagnostic techniques. The case studies reports of the students carried out during the course shall also be considered for the oral examination.
- 3. Obstetrics & Gynecology including infant care: There shall be two theory papers. The practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skills on the specimens, models, instruments and general appliances related to Obstetrics, scope of Homoeopathic therapeutics and examination and diagnosis of Gynaecological disease through clinical examination, X-ray and other common diagnostic techniques. The case studies reports of the students carried out during the course shall also be considered for the oral examination.
- **4. Homoeopathic Materia Medica:** There shall be one theory paper, one bedside practical and one viva-voce examination. The bedside examination shall be on two acute cases with special reference to their nosological diagnosis & therapeutic diagnosis from Homoeopathic point of view.

IV BHMS:

- 1. Practice of Medicine including Paediatrics, Psychiatry and Dermatology: There shall be two theory papers, one bedside practical and one viva-voce examination. The practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skills on the nosological and therapeutic diagnosis through clinical examination, X-ray and other common diagnostic techniques and detailed case takings on long and short cases. The case reports of the students carried out during the course shall also be considered for the oral examination.
- 2. Case taking and Repertory: There shall be one theory paper, one practical and one viva-voce examination. The practical examination shall consist of the Homoeopathic principles on case taking of one long case and one short case and the methods of arriving the repertorial totality, through case analysis and actual repertorisation. The skill of finding rubrics from Kent and Boenninghausen Repertories, the case reports of the students carried out during the course shall be considered for the oral examination.
- **3.** Homoeopathic Materia Medica: There shall be two theory papers, one bedside practical and viva-voce examination. The bedside examination shall be one long case and one short case with special reference to their

- nosological diagnosis and therapeutic diagnosis from Homoeopathic point of view. The case reports of the students carried out during the course shall be considered for the oral examination.
- **4. Organon of Medicine with Homoeopathic Philosophy:** There shall be two theory papers one practical and one viva-voce examination. The practical examination shall be on the Homoeopathic orientation of cases in relation to miasmatic diagnosis, general management, posology, second prescription etc.
- 5. Community Medicine including Health Education and Family Welfare: There shall be one theory paper, one practical and viva-voce examination. The practical examination shall be on spotting and identification of specimens and matters related to the community oriented problems.

Distribution of Marks

Topic wise distribution of marks in theory is given in concerned subjects. These are suggestive some variations may occur.

I Year BHMS - Number of papers and distribution of marks

Subject	Written		Practical (including oral)		Total		
	Full	Pass	Full	Pass	Full	Pass	
Anatomy	2x100 = 200	100	200	100	400	200	
Physiology	2x100 = 200	100	200	100	400	200	
including							
Biochemistry							
Homoeopathic	$1 \times 100 = 100$	50	100	50	200	100	
Pharmacy							

II Year BHMS - Number of papers and distribution of marks

Subject	Written		Practical (including clinical or oral)		Total	
	Full	Pass	Full	Pass	Full	Pass
Pathology & Microbiology	$2 \times 100 = 200$	100	100	50	300	150
Forensic Medicine and	$1 \times 100 = 100$	50	100	50	200	100
Toxicology						
Homoeopathic Materia Medica	1x100 = 100	50	100	50	200	100
Organon of Medicine with	$1 \times 100 = 100$	50	100	50	200	100
Homoeopathic Philosophy						

III Year BHMS - Number of papers and distribution of marks

Subject	Writte	Written		Practical (including		tal
			clinical or oral)			
	Full	Pass	Full	Pass	Full	Pass
Homoeopathic Materia	1x100 = 100	50	100	50	200	100
Medica						
Organon of Medicine with	$1 \times 100 = 100$	50	100	50	200	100
Homoeopathic Philosophy						
Surgery	2x100 = 200	100	200	100	400	200
Gynaecology and Obstetrics	$2 \times 100 = 200$	100	200	100	400	200

IV Year BHMS - Number of papers and distribution of marks

Subject	Written		Practical (including clinical or oral)		Total	
	Full	Pass	Full	Pass	Full	Pass
Homoeopathic Materia Medica	$2 \times 100 = 200$	100	200	100	400	200
Organon of Medicine with Homoeopathic Philosophy	2x100 = 200	100	100	50	300	150
Practice of Medicine	2x100 = 200	100	200	100	400	200
Case Taking & Repertory	1×100 – 100	50	100	50	200	100
Community Medicine	$1 \times 100 = 100$	50	100	50	200	100

8. Eligibility for University Examination:

Attendance

Every candidate shall have attendance of not less than 75% of the total classes conducted in theory and practicals separately in each academic year calculated from the date of commencement of the term to the last working day as notified by the university in each of the subjects prescribed to be eligible to appear for the university examination.

The principal should notify at the college the attendance details of all the students at the end of each term without fail under intimation to the university.

A candidate lacking in attendance and satisfactory progress in any of the subject(s) in theory or practicals / clinical in the first appearance shall not be permitted to appear for the examination in that subject(s).

Special classes, seminars, demonstrations, practicals, tutorials etc, shall be arranged for the repeaters in the subject in which they have failed before they are allowed to appear in the next examination, in which attendance is compulsory.

All examinations shall be held as per notification issued in the calendar of events by the university from time to time.

I BHMS -A student shall be eligible to appear for I BHMS examination provided he/ she has pursued the course satisfactorily and has requisite attendance as per regulation.

II BHMS - No candidate shall be eligible to appear in II BHMS examination unless he/she has passed in the first BHMS examination in all the subjects prescribed for University examination and has required attendance as per the regulation. The candidate shall pass First BHMS examination in all the subjects at least one term (six months) before he/she is allowed to appear in the Second BHMS examination.

III BHMS - No candidate shall be eligible to appear in III BHMS examination unless he/she has passed in the second BHMS examination and has required attendance as per regulation. Note:- to consider as pass in second BHMS examination, a candidate has to pass in all the subjects prescribed for the University examination. In case a candidate has failed in one or more subjects in II BHMS examination he/she shall have to pass in these failed subject(s) at least one term (6 months) before he/she is allowed to appear in the III BHMS examination.

IV BHMS - No candidate shall be eligible to appear in IV BHMS examination unless he/she has passed in the third examination and he/she has requisite attendance as per regulation. Note:- to consider as pass in third BHMS examination, a candidate shall have to pass in all the subjects prescribed for the university examination. In case a candidate has failed in one or more subjects in third BHMS examination, he/she shall have to pass in the failed subject(s) at least one term (6 months) before he/she is allowed to appear in the IV BHMS examination.

9.1. Criteria for pass in a subject

A candidate to be declared as pass in any subject, shall secure separately, in Theory and Practicals / Clinicals including Viva-voce examination, not less than 50% of maximum marks prescribed for the University examination.

A candidate who has passed in a subject or subjects need not appear in that subject(s) in the subsequent examination if he/she has failed in other subject or subjects.

9.2. Criteria for pass in I year, II year, III year and IV year BHMS examination

To consider as pass in BHMS examination, a candidate has to pass in all the prescribed subjects of the University examination for the concerned year.

10. Facility to keep term

- a. No student shall be permitted to join the Para-clinical/Clinical group of subjects until he/she has passed in the subjects of Anatomy and Physiology including Biochemistry of I BHMS for which he/she will be permitted not more than four chances including original examination. A candidate must pass First BHMS examination at least one term (6 months) before he appears in Second BHMS examination
- b. A candidate must pass Second BHMS examination at least one term (6 months) before he/she is allowed to appear in the Third BHMS examination.
- c. A candidate must pass the Third BHMS examination at least one term (6 months) before he/she is allowed to appear in the Fourth BHMS examination.

11. Number of Attempts

If a candidate fails to pass in all the subjects within four chances I or II or III BHMS examination, he/she shall be required to prosecute a further course of study of all the subjects and in all parts for one year to the satisfaction of the head of the college and appear for examination in all the subjects.

Provided that if a student appearing for the Fourth BHMS examination, has only one subject to pass at the end of prescribed chances, he shall be allowed to appear at the next examination in that particular subject and shall complete the examination with this special chance.

The examining body may under exceptional circumstances, partially or wholly cancel any examination conducted by it under intimation to the Central Council of Homoeopathy and arrange for conducting re-examination in those subjects within a period of thirty days from the date of such cancellation.

12. Declaration of Class:

a) A candidate having appeared in all the subjects in the same examination and passed that examination in the first attempt and secures 75% of marks or more of grand total marks prescribed will be declared to have passed the examination with distinction.

- b) A candidate having appeared in all the subjects in the same examination and passed that examination in the first attempt and secures 65% of marks or more but less than 75% of grand total marks prescribed will be declared to have passed the examination in First Class.
- c) A candidate having appeared in all the subjects in the same examination and passed that examination in the first attempt and secures 50% of marks or more but less than 65% of grand total marks prescribed will be declared to have passed the examination in Second Class.
- d) A candidate passing a university examination in more than one attempt shall be placed in Pass class irrespective of the percentage of marks secured by him/her in the examination.

[Please note fraction of marks should not be rounded off for clauses (a), (b) and (c)]

13. Examiners –

(i) No person other than the holder of qualification prescribed for the teaching staff in the Homoeopathy Central Council (Minimum Standards Requirement of Homoeopathic Colleges and attached Hosptials) Regulations, 2013 (as amended from time to time) shall be appointed as an internal or external examiner or papersetter or moderator for the BHMS Degree Course:

Provided that:-

- (a) No such person shall be appointed as an examiner unless he has at least three years continuous regular teaching experience in the subject concerned, gained in a degree level Homoeopathic Medical College.
- (b) Internal examiners shall be appointed from amongst the teaching staff of the Homoepathic Medical College to which the candidate or student belongs.
- (ii) The criteria for appointing the Chairman or paper-setter or moderator shall be as follows, namely:-
 - (1) Chairman: Senior most person from amongst the examiners or paper-setters appointed for theory and oral or practical or clinical examinations shall be appointed as Chairman and the eligibility qualification for the Chairman shall be the same as for appointment of a Professor.

- (2) Moderator: A Professor or Associate Professor or Lecturer with five years experience as an examiner shall be eligible to be appointed as Moderator.
- (3) Paper-setter: A Professor or Associate Professor or Reader shall be appointed as a paper-setter

An Assistant Professor or a Lecturer with three years experience as an examiner shall be eligible to be appointed as Paper-setter.

COMPULSORY INTERNSHIP TRAINING

1. Guidelines

- a. Each candidate shall undergo compulsory rotating internship of one year, after passing the finalBHMS Examination, to the satisfaction of the Principal of the Homoeopathic Medical College. The candidate shall be eligible for the award of Degree of Bachelor of Homoeopathic Medicine and Surgery(B.H.M.S.) by the University only after successful completion of internship.
- b. All parts of the internship training shall be undertaken at the hospital attached to the College, and, in cases where such hospital cannot accommodate all of its students for internship then such candidates/ students shall be informed in writing by the college and it shall be the responsibility of the College to ensure that each of such students is put on internship training in a Homoeopathic Hospital or dispensary run by Government or local bodies.
- c. To enable the State Board/ Council of Homoeopathy to grant provisional registration of minimum of one year to each candidate to undertake the internship, the University concerned shall issue a provisional pass certificate on passing the final BHMS examination to each successful candidate. Provided that in the event of shortage or unsatisfactory work, the period of compulsory internship and the provisional registration shall be accordingly extended by the State Board/ Council.
- d. Full registration shall only be given by the State Boards if the BHMS degree awarded by the University concerned is a recognized medical qualification as per Section 13 (1) of the Act, and Board shall award registration to such candidates who produce certificate of completion /compulsory rotating internship of not less than one year duration from the Principal of College where one has been a bonafide student which shall also declare that the

- candidate is eligible for it.
- e. The intern students shall not prescribe treatment including medicines, and each of them shall work under the direct supervision of Head of Department concerned and/ or a Resident Medical Officer. No intern student shall issue any medico-legal document under his / her signature.
- 2. The internship training shall be regulated by the Principal in consultation with concerned Heads of Departments and R.M.O. as under:
- (i) Each intern shall be asked to maintain a record of work, which is to be constantly monitored by the Head of concerned Department and/ or Resident Medical Officer under whom the intern is posted. The scrutiny of record shall be done in an objective way to update the knowledge, skill and aptitude of intern.
- (ii) a. The stress during the internship training shall be on case taking, evaluation of symptoms, nosological and miasmatic diagnosis, analysis, repertorisation and management of sick people based on principles of Homoeopathy.
 - b. The Principal or Head of the college in consultation with heads of concerned clinical departments (including organon of Medicine, Materia Medica and Repertory) shall make medical units having integration of teaching faculty of concerned departments to regulate internship training to be given to each student.
 - c. Weekly seminars and tutorial classes shall be conducted wherein, interns in rotation be given a chance to present their cases for discussion, and concerned teachers/ R.M.O. shall assess the performance of each intern.
 - d. Resident Medical officer shall co- ordinate with teachers concerned in conduct of weekly seminars
- iii). Rotation of intern-students shall be as under:
 - a. Medicine -8 Months wherein the intern will be rotated in each branch of Medicine.
 - b. Surgery -1 Month.
 - c. Obstetrics & Gynecology including Reproductive & Child Health Care -2 months [1 month each]

- d. Community Medicine (including PHC/CHC) -1 month.
- iv. Each intern shall be exposed to clinicopathology work to acquire skill in taking samples and doing routine blood -examination, blood smear for parasites, sputum examination, urine and stool examination. Students shall be trained to correlate laboratory findings with diagnosis and management of sick people.
- v. Each intern shall be given opportunities to learn the diagnostic techniques like X-rays, Ultrasonography, E.C.G., Spirometer and other modern techniques and use the findings for diagnosis and management of cases.
- vi. Each intern student shall be given adequate knowledge about issuing of medicolegal Certificates including medical and fitness certificates, death certificates, birth certificates, court procedures, laws and acts given in the curriculum of Forensic Medicine.
- vii. Each intern shall maintain records of 40 acute and 25 chronic cases complete in all manner including follow up in Practice of Medicine, record of 5 antenatal check-up and 3 delivery cases attended by him/her in Department of Obstetrics and 3 cases of Gynaecology; records of 5 surgical cases assisted by him (and demonstrational knowledge of dressings) in Surgery department, and records of knowledge gained in Primary Health Centres, Community health Centres, various health programs.
- viii. Each intern shall be given liberty to choose an elective assignment on any subject, and complete out-put shall be furnished in writing by the intern in respect of elective assignment to the Principal of the College within internship duration.
- ix. Each intern shall be posted on duty in such a manner that each of them attend at least 15 days in O.P.D. and 15 days in I.P.D. at least in each month (except for duty in Community Medicine) and attend the other parts of duty including self-preparation in Library.
- x. Each intern-student shall be made to learn importance of maintaining statistics and records, intern-student shall also be familiarized with Research Methodology.

3. Duties and Attendance

a. Each intern shall have not less than 80% of attendance during the internship training.

b. Each intern shall be on duty of at least 6 hrs. per day during the compulsory internship training.

XVII. EDUCATIONAL TOUR

(CCH Regulation-6)

Components:

Number of Students:

Name of teachers accompanying students:

What the tour is about - an overview:

Prerequisites-What knowledge the students must know before going for tour

How it will be organised:

Approaches to teaching or learning and assessment:

Aim and objective:

- 1. To provide the basic knowledge of practical aspects of pharmacy / FMT/ community medicine by exposure of students to pharmaceutical labs. and HPL/ district courst/hospitals/milk dairies/ PHC/I.D. Hospitals / industrial units/ sewage treatment plants/ water purification plants as the case may be.
- 2. To inspire students for their involvement in study during the said visits to learn the related procedures.
- 3. To provide the platform for evaluation of their skill and knowledge by interactive methodology.
- 4. To infuse confidence amongst students about homoeopathy, its future and their career.
- 5. To provide interaction between students, induce decision making skills and to motivate them for better vision about their future.
- 6. To improve cognitive skills (thinking and analysis)
- 7. To improve communication skills (personal and academic).

Learning Outcomes:

- 1. To be more than a wish list objectives, need to be realistic, pragmatic, understandable and achievable.
- 2. The focus should be on what students will be able to do or how they will show that they know, and how this will help in their career and individual growth.
- 3. Knowledge we want the students to have by the end of the course.
- 4. Skills we want the students to master by the end of the course.
- 5. Attitudes we want students to demonstrate at the ends of the course.

Note: It shall be an essential part of the Journal on the subject, a viva-voice can be put in respect of it.

Resources

- 1. Essential and recommended text books.
- 2. Journals and other readings.
- 3. Equipment and apparatus.

Visit record

- 1. Places visited with photographs
- 2. Programmes organised during visit.
- 3. Summary.

Assignment or project report

- 1. Description of assignments.
- 2. Due dates of assignments.
- 3. Preparation method for the project report
 - (i) Purpose.
 - (ii) Schedule.
 - (iii) Places visited.
 - (iv) Details of visit.
 - (v) Summary of achievements or learnings.

XVIII. Transfer of students from one college to another (Migration)

- a. Migration from one college to other college is not right of the student.
- b. Migration of student from one Homoeopathic Medical College to another Homoeopathy Medical College, in India shall considered by the central council of Homoeopathy only in exceptional cases extreme compassionate grounds, provided following criteria are fulfilled. Routine migrations on other grounds shall not be allowed.
- c. Both college, i.e. one at which the student is studying at present and one to which migration is sought are recognized as per provision of homoeopathy central council Act.
- d. The applicant shall have passed first BHMS emanation.
- e. The applicant shall submit his application in the Format annexed below for migration. Complete in all respects, to the principal of his college within a period of one month of passing (declaration of result) the first professional bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination.
- f. The applicant shall submit an affidavit stating that he shall pursue twelve months of prescribed study before appearing at second professional B.H.M.S examination at the transferee college, which he is seeking transfer and the transfer shall be effective only after receipt of the affidavit.
- g. Migration during internship training shall be allowed on extreme compassionate grounds, provided that such migration shall be allowed only with the mutual consent of the concerned Colleges, where both the college, i.e. one at which the student is studying at present and one to which migration is sought are recognized as per provisions of Homoeopathy Central Council Act.

Note:

- A) All applications for migration shall be referred to central council of Homoeopathy by college authorities No institution or University shall allow migration directly without approval of the central council.
- B) The central council of Homoeopathy reserves the right not to entertain any application expect under the following compassionate grounds, namely
 - i) Death of a supporting guardian
 - ii) Illness of candidate causing disability supported by medical grounds certified by a recognized hospital

- iii) Disturbed conditions as declared by concerned Government in the area where the college is situated
- C) A Student applying for transfer on compassionate ground shall apply in 'Format I in Complete manner with requisite documents.

Format-1

{See regulation 14(v)}

Migi	ration of Mr./Miss from
	Homoeopathic Medical College to
	Homoeopathic Medical
Coll	ege
1.	Date of admission in First B.H.M.S. course
2.	Date of passing First B.H.M.S. University examination
3.	Date of application
4.	No objection certificate form relieving college (enclosed) - Yes/No
5.	No objection certificate from relieving University (enclosed) - Yes/No
6.	No objection certificate from receiving College (enclosed) - Yes/No
7.	No objection certificate from receiving University (enclosed) - Yes/No
8.	No objection certificate from State Government where in the relieving college is located - Yes/No
9.	Affidavit, duly sworn before First Class Magistrate containing an undertaking that "I will study for full twelve months in existing class of B.H.M.S. course in transferred Homoeopathic Medical College before appearing in the IInd Professional University examination" (enclosed) - Yes/No
10.	Reasons for migration in brief (please enclose copy of proof) - Yes/No
11.	Permanent address :

SECTION V

Course Description

Study of Normal Man in Pre clinical Period:

Man is a conscious mentalised, living being and functions as a whole. Human knowledge has become so vast that for precise comprehension of man as a whole, development of different branches of science like anatomy, physiology and psychology was necessary. But such a division is only an expedient; man nevertheless remains indivisible.

Consciousness, life and its phenomena cannot be explained merely in terms of cell physiology or of quantum mechanics or by physiological concepts, which in their turn are based on chemico-physical concepts.

Though anatomy and physiology are hitherto being taught as entirely different subjects, a watertight barrier should not be erected between them; structure (anatomy) and function (Physiology) are correlated aspects and the physio-chemical processes are expressions of experiential phenomenon, called life.

OBJECTIVES:

Student shall

- a. Have an understanding of morphological principles, which will be correlated with the physiological and psychological principles, which determine and influence the organism of the living body as a functional unit.
- b. Be able to correlate and interpret the structural organism and normal physiology of the human body and enabled to provide data on which to anticipate disturbance of functions.
- c. Be able to recognize the anatomical and physiological basis of the clinical signs and symptoms of disorders due to injury, disease and mal development.
- d. Be able to understand the factors involved in development of organs.

- e. Be able to understand the factors involved in the development of pathological process and the possible complications, which may arise there from.
- f. Be able to apply knowledge of pre-clinical subjects for ordinary methods of examination and treatment (including surgery) that may involve such knowledge.
- g. Be able to pick out strange, rare and uncommon symptoms from pathognomic symptoms and drugs for the purpose of applying the law of similars in homoeopathic practice.

BHMS 1st YEAR ANATOMY

Instructions in Anatomy be so planned as to present a general working knowledge of the structure of the human body. The amount of detail, which he is required to memorize, should be reduced to the minimum. Major emphasis should be laid on functional anatomy of the living subject rather than on the static structures of the cadaver, and on general anatomical positions and broad relations of the viscera, muscles, blood vessels, nerves and lymphatic study of the cadaver is only a mean to this end. Students should not be burdened with minute anatomical details, which have no clinical significance.

Though dissection of the entire body is essential for the preparation of the student for clinical studies, the burden of dissection can be reduced and much saving of time can be effected, if considerable reduction of the amount of topographical details is made and the following points are kept in view: -

- a. Only such details as have professional or general educational value for the medical student should be presented to him.
- b. The purpose of dissection is not to create technically expert prosecutors but to give the student an understanding of the body in relation to its function, and the dissection should be designed to achieve this end, for example, ignoring of small and clinically unimportant blood vessels results in such clearer dissection and much clearer picture of the main structures and their natural relationships.
- c. Much that is at present taught by dissection could be demonstrated usefully through prepared dissected specimens.
- d. Normal radiological anatomy may also form part of practical training. The structure of the body should be presented linking functional aspect.
- e. Actual dissection should be preceded by a course of lectures on the general structure of the organ or the system under discussion and then its function. In this way anatomical and physiological knowledge can be presented to students in an integrated form and the instruction of the whole course of anatomy and physiology made more interesting, lively and practical.
- f. A good part of the theoretical lectures on anatomy can be transferred to tutorial classes with demonstrations.

- g. A few lectures or demonstrations on the clinical and applied anatomy should be arranged in the later part of the course. They should preferably be given by a clinician and should aim at demonstrating the anatomical basis of physical signs and the value of anatomical knowledge to the clinician.
- h. Seminars and group discussions to be arranged periodically with a view of presenting the subject in an integrated manner.
- i. Formal classroom lectures to be reduced but demonstrations and tutorials to be increased.
- j. There should be joint teaching-cum-demonstration sessions with clinical materials illustrating applied aspect of Anatomy in relation to clinical subjects. This should be arranged once a fortnight and even form part of series of introductory lectures if be needed.
- k. There should be joint seminars with the departments of Physiology and Biochemistry and should be organized once a month. There shall be a close correlation in the teaching of gross Anatomy, Histology, Embryology and Genetics. The teaching of areas and systems in Anatomy, Physiology including Biochemistry shall be integrated as far as possible.

Theory (200 Hours)

A complete course of human anatomy with general working knowledge of different anatomical parts of the body are taught with emphasis on the general anatomical positions and broad relations of the viscera, muscles, blood vessels, nerves and lymphatic. Candidates should not be burdened with minute anatomical details of every description, which has no clinical significance.

Candidates will be required to recognize anatomical specimen and to identify and answer questions on structures displayed in recent dissections, to be familiar with the bones and their articulations including the vertebrae, the skull and with the manner of classification of the long bones.

Emphasis will not be laid on minute details except in so far as is necessary to the understanding or in their application to medicine and surgery. Candidates are expected to know the attachments of muscles sufficiently to understand their action, but not the precise details of the origin and insertion of every muscle. Knowledge of the minor details of the bones of the hand, foot, their articulation and details of the small bones of the skull will not be required.

The curriculum of Anatomy should be divided under the following headings:-

- I. Gross Anatomy -to be dealt under the following categories :
 - a. Introductory lectures with demonstrations
 - b. Systemic series

The study to be covered by deductive lectures, demonstrations, surface and radiological anatomy, by dissection of the cadaver and study of dissected specimen. Knowledge thus obtained together with co-relation of facts should be integrated into living anatomy. Details of topographical relation should be stressed for these parts, which are of importance in general practice.

- i. Superior extremity, inferior extremity, head, neck, thorax, abdomen and pelvis to be studied regionally and system by system (special reference to be made to development and its anomalies, regional, innervation, functional groups of muscles in relation to joints of otherwise and Applied Anatomy).
- ii. Endocrine organs with special reference to development and applied anatomy.
- II. Developmental Anatomy General principles of development and growth and the effect of hereditary and environment factors to be given by lectures, charts, models and slides.
- III. Neuro-Anatomy Gross anatomy of brain and spinal cord and the main nerve tracts. The peripheral nerves. Cranial nerves their relation, course and distributions.
 - Autonomic nervous system-development and anomalies, applied Anatomy.
 - (The study to be covered by lectures, lecture-demonstrations of brain and spinal cord, and clinical co-relation.)
- N.B.:- The practical study should precede the study of physiology of nervous system, Early co-relation with the clinical course desirable.
- IV. Micro Anatomy (Histology) -Modern concepts of cell, epithelial tissue, connective tissue, muscular tissue, nervous tissue and systemic structure.
 - A. Introductory Lectures:-25 Hrs.
 - B. Modern concept of cell-components and their functions, why a cell divides, cell division, types with their significance.

- C. Genetic individuality:- (i) Elementary genetics definition, health and diseases, result of interaction between organism and its environments, utility of knowledge from homoeopathic point of view.
- D. Regional anatomy -Regional Anatomy shall be taught with emphasis on developmental anatomy, broad relationship, surface marking, Radiological anatomy, and applied anatomy.

PAPER-I 100 MARKS

Sl. No	Торіс	Hours Allotted	Marks
A.	Introductory Lectures	10	05
1	Basic Introduction of Anatomy –	3	
	Terms and Positions / History of Anatomy		
2	Modern Concept of Cell:	2	
	Components and their functions, why a cell divides, cell division,		
	types with their signification	3	
3	Genetic Individuality:		
	Elementary genetics definition, health and diseases, result of		
	interaction between organism and its environments, utility of		
	knowledge from Homoeopathic point of view		_
	i. Mandel's Laws and their significance	1	
	ii. Applied Genetics	1	
В.	Embryology	10	10
4	Spermatogenesis & Oogenesis	1	
5	Formation of germ layer	1	
6	Development of embryogenic dish	1	
7	Placenta	1	
8	Development of abdominal organs	1	
9	Development of cardiovascular system	1	
10	Development of nervous system	1	
11	Development of respiratory system	1	
12	Development of body cavities	1	
13	Development of Uro-genital system	1	
C.	General Anatomy & Micro-anatomy	10	10
14	Epithelial tissue	3	
15	Connective tissue	3	
16	Muscular tissue	3	
17	Nervous tissue	1	
D.	Regional Anatomy -		
a.	Extremities – Upper	20	25
18	Skeleton, position and functions of joints	3	
19	Muscle groups, Brachial plexus	4	

			\neg
20	Arterial supply, venous drainage, neuro-vascular bundles, lymphatic	5	
	and lymph nodes, relation of nerves to bones		-
21	Joints with special emphasis on shoulder, elbow, wrist joints. Muscle producing movement, results of nerve injury	4	
22	Radiology of bones and joints. Classification, determination of age	2	7
23	Applied Anatomy	1	7
24	Surface marking of main arteries, nerves	1	7
b.	Head, Neck & Face	30	40
25	Scalp-innervation, vascularsupply middle meningeal artery	1	
26	Face-main muscles groups, muscles of facial expression muscles of	2	7
	mastication,innervation of skin and repair muscles, vascular supply,	_	
	principles of repair scalp and face wrinkles.		
27	The eyelids, eyeball, lachrymalapparatus, the muscles that move the	3	1
	eyeball.	9	
28	The nasal cavity and nasopharynx, septum, conchae,paranasal,	2	
	sinus, Eustachian tube,lymphoid masses.		
26	Oral cavity and pharynx.	2	
30	Larynx and laryngeal part of Pharynx structure (No details) functions,	3	7
	nerve supply,larynageoscopic appearances		
31	Cervical vertebrae, joints of head and neck	2	
32	Structures of neck, sternomastoid, brachial plexus, main arteries and	8	
	veins, disposition oflymph nodes, areas of drainage, phrenic nerve,		
	thyroid gland and its blood supply, para-thyroid,the		
	trachea,esophagus. The position of the Sub-mandibular and		
	sublingual salivaryglands.		
33	Teeth and Dentition	1	
34	The external, middle and internal ear	3	7
35	Applied Anatomy	1	7
36	Surface marking: Parotid gland, middle meningeal artery, thyroid	2	7
	gland, common internal and external carotid arteries		
с.	Brain	20	10
37	Meanings – parts	2	7
38	Cerebrum – areas of localization, vascular supply basal ganglion,	4	7
	internal capsule		
39	Cerebellum functions	2	7
40	Pons, medullar midbrain, cranial nerves, palsies	5	7
41	Cerebro-spinal fluid-formation, circulation function, absorption	2	7
42	Cranial nerves, origin, courses (within minimum anatomical details)	4	7
	areas of distribution;		
43	The sympathetic and parasympathetic nervous system location,	1	7
	distribution, function		

PAPER II 100 MARKS

SI. No	Торіс	Hours Allotted	Marks
d.	Thorax	30	20
44	Skeleton, joints, muscles, chest wall-diaphragm,innervation of abdominal and thoracicrespiration, different with age. The mammary gland, lymphatic drainage.	7	
45	The pleura & lungs	3	
46	Arrangements structures inthe mediastinum, heart, coronary artery great vessels, trachea,oesophagus, lymph nodes, thymus	18	
47	Radiology of heart, aorta, lungs, bronchogram	1	
48	Surface marking-pleura, lungs, heart-valves of heart, border, arch of aorta, superiorvenacava, bifurcation of trachea	1	
e.	Abdomen & Pelvis	40	50
49	The abdominal wall-skin and muscles, innervation of fascia, peritoneum, blood vessels,lymphatics, autonomic ganglia and plexuses	5	
50	Stomach, small intestine, caecum, appendix, large intestine	6	7
51	Duodenum, pancreas, kidneys, uterus, supra-renals	6	7
52	Liver and gall bladder	2	7
53	Pelvis, skeleton and joints, muscles of the pelvis, organs internal and external genitalia inmale and in the female, lumbosacral plexus, vessels, lumphatics, autonomic ganglia and plexus	10	
54	Blood vessels and nerve plexuses of abdomen and pelvis, the portal venous system	9	
55	Applied anatomy of referred pain, portal system anastomosis, catheterization of the urinary bladder in the male and female	1	
56	Surface marking of organs and blood vessels	1	
f.	Extremities – Lower	20	25
57	Skeleton, position and functions of joints	3	
58	Muscle groups, lumber plexus	5	
59	Arterial supply, venous drainage, neuro-vascular bundles, lymphatic and lymph nodes, relation of nerves to bones	4	
60	Joints with special emphasis on lumbo – sacral, hip, knee and ankle joints, muscles producing movement, results of nerve injury	5	
61	Radiology of bones and joints. Classification, determination of age	1	1
62	Applied Anatomy	1]
63	Surface marking of main arteries, nerves	1	
E.	Histological study systemic various organs	10	05

HUMAN ANATOMY [PRACTICAL]

275 Hours

Sl. No	Торіс	Hours Allotted			
1	INTRODUCTION TO CUNNINGHAM'S MANNUAL OF PRACTICAL ANATOMY Terms, Positions, Skin, Blood Vessels, Lymphatics, Nerves, Deep Fascia, Muscles, Bursae & Joints	5			
	SUPERIOR EXTREMITY	35			
2	Pectoral Region & Auxiliary Fossa	02			
3	Superficial dissection of the back	02			
4	Shoulder & scapular Region with Acromiclavicular articulation	04			
5	Cubital Fossa, Front of Arm, Back of Arm, Front of fore Arm	04			
6	Palm of the Hand superficial dissection, Palm of the Hand deep dissection, Back of Fore Arm, Dorsum of Hand	02			
7	Arthrology : Shoulder Joint, Elbow & Radioulnar Joint, Wrist Joint & articulation of hand				
8	Osteology				
9	Surface Anatomy	02			
10	Radiological Anatomy	02			
11	Tutorials	01			
	HEAD & NECK	35			
12	Scalp & superficial dissection of temporal region	02			
13	Removal of brain, Roots of cranial nerves, Dura Matter with sinuses, Base of skull, Anterior Fossa, Middle Fossa, Posterior Fossa	02			
14	Occipital region Superficial dissection of neck Sub occipital triangle	02			
15	Back identification of muscles Lumbo dorsal fascia	02			
16	Spinal medulla with membrane and ligamentum Flava	02			
17	Face and lacrimal apparatus	02			
18	Orbit	02			
19	Posterior triangle of neck	02			

	Anterior triangle of neck			
	Carotid triangle, Muscular triangle			
20	Middle line of neck with thyroid	02		
	Parathyroid glands, Diagastric triangle	02		
	Sub mandibular region			
2.1	Deep dissection of the neck, Vessels, Nerves, Lateral wall pharynx	0.3		
21	Cervical part of sympathetic trunk	02		
22	Parotid Region	02		
23	Infratemporal region, Optic ganglion and chorda tympani, Sinuses of meninges	02		
24	Prevertebral region	02		
25	Mouth & Pharynx, Larynx, Tongue	03		
26	Nose & Accessory Sinuses	02		
27	Spheno Palatine region, Pterygo palatine fossa, Pterygomaxillary fissure	02		
27	Maxillary nerve with spheno palatine Ganglion	02		
28	Auditory Apparatus, External ear,	02		
	Middle ear with mastoid antrum, Internal ear			
	BRAIN	30		
29	Membranes of brain cistemae	01		
30	Superficial blood vessels of brain	01		
31	Superficial anatomy lateral medial surface and base of brain	01		
32	Mid Brain, Pons and 4 th ventricle, Medulla oblongata, Cerebellum	02		
33	Mid brain with cerebral pendencles and corpora quadrigemina with optic tract			
	CERREBRUM: Fissures, sulci and gayri, lobes, motor and sensory areas,			
34	Corpus callosum lateral ventricle, Telechordia and 3 rd ventricle, Thalamus and	02		
٦-,	corpus stratum, Commissural association and projection fibres,	02		
	Rhinencephalon			
35	Ascending & descending tracts, Cranial topography	01		
36	External tunica, sclera comea and choroids, Ciliary Body, nerves and vessels	01		
37	Refractory media aqueous humour, pupil lens with its capsule, vitreous humour and retina	01		
38	Osteology	05		
39	Arthrology: Mandibular Joint, Cranio vertebral joints	02		
40	Surface Anatomy	02		
41	Radiological Anatomy	04		
42	Histology	05		
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43	Tutorials					
	THORAX	60				
44	Anterior thoracic wall	01				
45	Dissection of intercostals space and contents	05				
46	Pleura with roots of lung and pulmonary plexus	08				
47	Anterior and superior mediastinum	05				
48	Middle mediastinum and pericardium	05				
49	Phrenic and vagus nerves with cardiac plexus	04				
50	Heart	06				
51	Posterior mediastinum and content	03				
52	Thoracic part of symphathetic trunk and branches	03				
53	Posterior thoracic wall and intracostal vessels and nerves	03				
54	Thoracic Diaphragm	02				
55	Osteology	05				
56	Arthrology: Anterior Articulation Sterno clavicular, Chondro sternal Interchondral articulation, Vertebral and costo-vertebral joint					
5 <i>7</i>	Surface Anatomy					
58	Radiological Anatomy	02				
59	Histology	03				
60	Tutorials	01				
	ABDOMEN	40				
61	Abdominal Cavity and positions with relation of viscera	02				
62	Anterior abdominal wall, spermatic cord round ligament of uterus	02				
63	External Genitalia in males and females	02				
64	Peritoneum, greater and lesser sac	02				
65	Stomach, celiac plexus and portal vein	02				
66	Mesenteric vessels	02				
67	Small intestine jejunium and ilium	02				
68	Large intestine	02				
69	Duodenum pancreas and spleen	02				
70	Liver	02				

71	Kidneys, suprarenal gland and posterior abdominal wall	04			
72	Diaphragm	02			
73	Abdominal part of sympathetic system celiac and aortic plexus	02			
74	Aorta IVC, common, Internal and external iliac arteries	02			
75	Lymphatic system of abdomen	01			
76	Lumbar plexus of nerves and lumbar vessels	01			
77	Osteology	04			
78	Surface Anatomy	02			
79	Radiological Anatomy	02			
	PELVIS	40			
80	Pelvic position and relation of viscera	02			
81	Hypogastric vessels and branches	02			
82	Pelvic fascia muscles and pelvic part of ureter				
83	Sigmoid colon rectum and anal canal				
84	Urinary Bladder, prostate and urethra	04			
85	Ovary, uterine tubes and vagina	02			
86	Pelvic Nerves	02			
87	Perineum	02			
88	Arthrology: Articulation of lumbosacral, sacroiliac	02			
89	Histology	10			
90	Osteology	03			
91	Surface Anatomy	02			
92	Radiological Anatomy	01			
93	Tutorials	01			
94	Seminar	01			
	LOWER EXTRIMITY	35			
95	Superficial dissection of front of the thigh, Cutaneous nerves, Vessels & deep fascia, Deep Dissection, Femoral Sheath and Femoral Hernia, Adductor Region, Adductor Canal, Quadriceps muscles.	06			

96	Gluteal Region , Popliteal Fossa, Back of Thigh, Anterior tibio-fibular & Dorsum of Foot, Peroneal Region	05
97	Posterior Tibio-Fibular region with Superficial compartment and middle compartment, Superficial dissection of sole, Deep Dissection of Sole	05
98	Osteology	10
99	Arthrology : Hip Joint, Knee Joint, Tibio Fibular Joint, Articulation of Foot and arches	06
100	Surface Anatomy	01
101	Radiological Anatomy	01
102	Tutorials	01

SCHEME OF EXAMINATION

A. Theory:

No. of Papers 02

Paper I 100 Marks

Paper II 100 Marks

Types of Questions with Marks

Type of Questions	No. of Questions	No. of Questions to	Marks per	Total	
	Asked	be attempted	Question		
Long Essays	02	02	10	20	
Short Essays	12	10	05	50	
Short Answers	10	10	03	30	
Maximum Marks					

B. Practical including Viva-voce or Oral

1. Practical: 100 Marks

SI.	Particulars	Marks
No		
1	Spotters: 10 Spotters (including Micro-anatomy slides)	50
	5 marks each 10 x 5	
	(Identification 1 marks, Anatomical significance 4 marks)	
2	Discussion: (Specimens) Discussion on two given dissected	30
	specimen, each carrying 15 marks Upper half above	
	diaphragm – 15 marks, Lower half	
	including diaphragm = 15 marks),	
3	Surface Marking:	10
4	Practical Records:	10

Maximum Marks: 200

2. Viva-Voce (Oral) Examination: 100 Marks

MARKS DISTRIBUTION

	The	eory		Practica	l & Oral		Grand	l Total
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Anatomy	200	100	100	100	200	100	400	200

RECOMMENDED BOOKS

Sl.No.	Name of the Book	Author	Publisher
1	Essentials of Human Anatomy a. Thorax and Abdomen b. Head& Neck c. Neuroanatomy d. Superior and Inferior extremity vi. Histology	Datta A.K	Current book international
2.	Text book of Anatomy with colour atlas a. Introduction, Osteology, upper extremity, lower extremity. b. Thorax and abdomen c. Head, neck &CNS	Singh Inderbir	J.P. Brothers New Delhi
3	Tex book of Histology	Singh Inderbir	J.P. Brothers New Delhi
4	Tex book of Human Embryology	Singh Inderbir	Macmillan india Ltd, Madras
5	Cunnigham's Manual of Practical Anatomy Vol. I to III	Romanes	Oxford Medical Publishers
6	Human Anatomy Regional and Applied. Vol. 1, Vol. 2 & Vol. 3	B.D. Chaurasia	C.B.S. Publishers, New Delhi

REFERENCE BOOKS

SI. No.	Name of the Book	Author	Publisher
1.	Gray's Anatomy	ELBS	William & Warwick
2.	Last's Anatomy; Regional and applied	Churchill Lvingstone	Mc Minn
3.	Clinical Anatomy for Medical students	Little, Brown & Company	Richard S. Snell
4.	Clinical Neuroanatomy for Medical students	Lippincott, Raven Publication.	Richard S. Snell
5.	Langmann's Medical Embryology	William's & Wilkins	Sadler
6.	Essentials of Histology	Little, Brown and Co.	Krause
7.	Ross and Wilson's Physiology in Health and Illness	Churchill Ligingstone	Wilson & Waugh
8.	De' Flores Atlas of Histology with functional correlation	William's & Wilkins	Eroschenko
9.	Clinical oriented Anatomy	Little Brown and Company - Boston Current Book, International	Moorie & Kieth L.
10.	Elements of Medical Genetics	ELBS, U.K.	Emery Muller
11.	Bailey's Text Book of Histology	Williams, Baltimore	Copenhaver
12.	Grants Atlas of Anatomy	John Charles Brileam	Lippincott Williams & Willums

PHYSIOLOGY INCLUDING BIOCHEMISTRY

The purpose of a course in physiology is to teach the functions, processes and interrelationship of the different organs and systems of the normal and disturbance in disease and to equip the student with normal standards of reference for use while diagnosing and treating deviations from the normal. To a Homoeopath, the human organism is an integrated whole body, life and mind; and though life includes all the chemico-physical processes it transcends them. There can be no symptoms of disease without vital force animating the human organism and it is primarily the vital force which is deranged in disease. Physiology shall be taught from the standpoint of description of physical processes underlying them in health.

There should be close co-operation between the various departments while teaching the different systems. There should be joint courses between the two departments of anatomy and physiology so that there is maximum co-ordination in the teaching of these subjects. Seminars should be arranged periodically and lectures of anatomy, physiology and bio-chemistry should bring home the point to the students that the integrated approach is more meaningful.

A. Theory (200 Hours)

Syllabus & the Distribution of Chapter-wise marks*

PAPER- I MARKS: 100 marks

SI. No	Торіс	Hours Allotted	Marks
1	Elementary Bio-physics	04 hrs	04
	Diffusion, Osmosis,		
	Filtration, Ultrafiltration, Dialysis,		
	Surface Tension, Absorption, Adsorption, Assimilation, Hydrotrophy,		
	Colloid, Donnan's equilibrium, Acid-Base Concentration, Trace elements		
П	Introduction, Cell and Tissues	04 hrs	04
	Introduction to Cellular Physiology, Cell Junctions, Transport through Cell		
	Membrane and Resting Membrane Potential, Body Fluids Compartments,		
	Homoeostatsis		
111	Body Fluids	26 hrs	26
	Blood, Plasma Proteins, Red Blood Cells, Erythropoiesis, Haemoglobin and		
	Iron Metabolism, Erythrocyte Sedimentation Rate, Packed Cell Volume and		
	Blood Indices, Anaemia, Haemolysis and Fragility of Red Blood Cells,		
	White Blood Cells, Immunity, Platelets, Haemostatsis, Coagulation of		
	Blood, Blood Groups, Blood Transfusion, Blood Volume, Reticulo-		
	endothelial System and Tissue Macrophages, Lymphatic System and Lymph,		
	Tissue Fluid and Oedema		

IV	Respiratory System and Environmental Physiology Introduction, Functional Anatomy of Respiratory System, Muscles of Respiration, Mechanism of Respiration, Lung Compliance, Pulmonary and Alveolar Ventilation, Physical Principles of Gaseous Exchange and Transport and CO2 Transport, O2 and CO2 Dissociation Curve, O2 and CO2 Diffusion Capacity, Ventilation Perfusion Ratio, Pulmonary Function Test, Lung Volumes and Lung Capacities, Nervous and Chemical Regulation of Respiration, Pulmonary Circulation and Factors affecting Pulmonary Circulation, Abnormal Respiration, Dyspnoea, Asphyxia, Hypoxia, Cyanosis, Respiratory adjustments during Muscular Exercise at High and Low Atmospheric Pressures, Acclimatization Principles of Oxygen Therapy, Hyperbaric Oxygen Therapy, Artificial Respiration, Patho-physiology of Obstructive and Restrictive Pulmonary Disorders, Decompression Sickness, Pulmonary Oedema	20 hrs	20
V	Excretory System Structure and Functions of Kidney, Nephron Mechanism of Formation of Urine, Role of Kidney in Water and Electrolyte Balance, Mechanism of Concentration and Dilution of Urine, Juxta-Glomerular Apparatus, Renin-Angiotensin system, Renal Blood Flow and factors affecting renal blood flow Renal function tests, Physiology of Micturition, Micturition Reflex, Disorders of Micturition, Artificial kidney	12 hrs	12
VI	Special Senses Introduction to special Sense Organs, Physiology of smell sensation, Olfactory pathway, Physiology of taste sensation, Gustatory pathway Ear: General Anatomy, Conduction of sound waves through external, middle and inner ear Auditory Pathway, Auditory defects Vestibular Apparatus, Physiology of Vision, Visual Pathway and effects of lesions at various levels, Physiology of Optics, Formation of image, Refractory errors and their correction, Accomodation, Visual Acuity, Dark and Light Adaptation Colour Vision, Role of Vitamin A, Colour Blindness, Physiology of Retina, Pupillary reflexes, Sensation of touch	12 hrs	12
VII	Cardiovascular System Introduction to CVS Cardiac Muscle Fibre; structure and properties Junctional Tissues of the Heart, Origin and Spread of Cardiac Impulse, Heart Block; Definition and types, Cardiac Cycle General principles of circulation Heart Sounds, Cardiac Murmurs, ECG, Nerves of the Heart & their Action, Vagus, Sympathetic nerves, Cardiac Centers, Heart Rate & Factors	18 hrs	18

	regulating HR, Cardiac Output, Blood Pressure and its Regulation, Physiological Basis of Shock, Regional Circulations, Cardiovascular		
	adjustments during exercise		
VIII	Environmental Physiology	04 hrs	04
	Skin-Structure and functions, Sweat, Regulation of body temperature,		
	Pyrexia, Hypothermia		1

PAPER- II MARKS: 100 marks

SI. No	Торіс	Hours Allotted	Marks
ı	Endocrinology	16 hrs	16
•	Introduction, Hormones	101115	10
	Pituitary Gland: Development and Structure		
	Hormones of Anterior Pituitary: GH, TSH, ACTH, FSH, LH, Prolactin,		
	their physiology and associated clinical disorders,		
	Hormones of posterior pituitary: ADH, Oxytocin, their physiology		
	and associated clinical disorders		
	Thyroid gland: Structure and Functions,		
	Thyroid hormones, T3, T4, disorders of hypo and hyper secretions		
	(Hypothyroidism, Hyperthyroidism, Goitre)		
	Parathyroids: Hormones, their functions and dysfunctions, calcium		
	metabolism		
	Adrenal glands: Hormones of adrenal cortex and medulla, their		
	functions and Dysfunctions		
	Male Sex Hormones		
	Female Sex Hormones		
	Pancreas: Hormones of Pancreas and their functions, Regulation of		
	Glucose, GTT, Diabetes Mellitus, Endocrine functions of other		
	organs		
П	Central Nervous System	15 hrs	15
	Introduction, General Organization		
	Structure and Functions of Nerve Cell and Neuroglia		
	Synapse: Types, Properties and Functions, Neurotransmitters		
	Physiology of Receptor Organs		
	Physiology of Reflex Action: Classification and Properties of Reflexes		
	and Clinical Importance, Sensory and Motor Tracts: General		
	Characteristics, Tract of Gall and Burdach, Anterior and Lateral		
	Spinothalamic Tracts,		
	Pyramidal and Extra-Pyramidal Tracts,		
	Physiology of Pain, Spinal Cord: Effects of Trans-section and Hemi-		
	section of spinal cord, Upper Motor Neuron and Lower Motor		
	Neuron, their disorders, Autonomic Nervous System (ANS),		
	Cerebrum: Structure, Cerebral Cortex, Functional Areas and their		
	Functions, Limbic system: Hypothalamus, Limbic Cortex,		
	Hippocampus and Amygdala. Internal CapsuleBasal Ganglia:		
	Components, Functions, Hypokinetic and Hyperkinetic syndromes		
	Cerebellum: Components, connections, functions and disorders,		
	Thalamus: Nuclei, Functions and Thalamic Syndrome		
	Brain Stem: Medulla, Pons, Midbrain, Red Nucleus		
	Reticular Formation: Connections, ARAS,		
	Descending Reticular Formation Functions, Proprioceptors		
	Higher Intellectual Function, Electroencephalogram (EEG),		
	Physiology of sleep, Cerebro-Spinal Fluid (CSF)		

III	Digestive System Introduction to GIT Tongue: Structure and Functions Salivary Glands: Structure, Composition and Functions of Saliva, Mechanism of secretion of Saliva, Applied Physiology Stomach: Histology, Gastric Glands, Composition, Functions and Mechanism of Secretion of Gastric Juice, HCI secretion, Sham Feeding, Pavlov Pouch Study Pancreas: Structure, Composition, Functions and Mechanism of Secretion of Pancreatic Juice Liver and Gall Bladder: Histology, Composition and Functions of Bile, Mechanism of Filling and emptying of Gall Bladder, Small Intestine: Histology, Composition, Functions and Mechanism of	16 hrs	16
	Secretion of Intestinal Juice Large Intestine: Structure and Functions movements of G.I. Tract: Degluition, Gastric Motility, Movements of small and large intestine, vomiting, Defecation		
IV	Reproductive System Introduction in general and types of Reproduction Puberty and physiological changes during puberty Male Reproductive System: Testes, Physiology, Spermatogenesis, Structure and life history of Spermatozoa, Testosterone and functions, composition of Semen, Impotency. Female Reproductive System: Ovaries, Physiology, Graafian Follicle, Oogenesis, Oestrogen and Progesterone and Functions. Physiology of Menstruation, Ovarian and Endometrial Cycle, Ovulation, Fertilization and Implantation, Infertility, Physiology of Pregnancy, Parturition and Lactation, Placenta and its Functions, Foetal Circulation and Respiration, Parturition, Menopause, Contraception	12 hrs	12
V	Nerve-Muscle Physiology Structure and Function of Nerve Cell Bio-electric Phenomena in the Nerve and Muscle, R.M.P., Action Potential and its propagation, Neuromuscular junction, Neuromuscular Transmision, General introduction and classification of Muscle Fibres Structure and Properties of Skeletal Muscles, Mechanism of Musclecontraction, Thermal and Chemical changes and oxygen utilization during muscle contraction, Energy Metabolism of Muscles Classification and Properties of Nerve Fibers, Wallerian Degeneration, Regeneration and Reaction of Degeneration. Neuromuscular Disorders and Pathophysiology of Myasthenia Gravis. EMG	06 hrs	6

VI	Biochemistry	35 hrs	35
	Principles and Elementary constituents of Protoplasm		
	Chemistry and Metabolism of Carbohydrates		
	Chemistry and Metabolism of Fats / Lipids		
	Chemistry and Metabolism of Proteins		
	Enzymes and Vitamins		
	Nutrition, BMR, Respiratory Quotient		
	Balanced Diet, Liver and Renal Function Tests		

 $^{^{}st}$ These are suggestive, some variations may occur.

B. PRACTICALS INCLUDING TUTORIALS:

275 Hours

SL. NO.	PARTICULARS	HOURS ALLOTTED	MARKS
I	HALMATOLOGY	100 Hrs	20
1	Study of Compound Microscope		
2	Methods of Collection of Blood		
3	Estimation of Haemoglobin Percentage		
-1	Study of Haemocytometer		
_ 5	Determination of Total WBC count		
1.	Determination of Fotal RBC count		
1	Determination of Differential Count of WECs		
Ð	Determination of Lrythrocyte Sedimentation Rate		
1)	Determination of Blood Groups		
10	Determination of Bleeding Time and Clotting		
	lim e		
II	HUMAN EXPERIMENTS/ CLINICAL PHYSIOLOGY	60 Hrs	10
1	Thetory Taking and General Examination		
7	Clinical Examination of Radial Polse		
.3	Recording of Arterial Blood Pressure in Human		
	Beings and Effect of Postme, Exercise and Stress		
4	Study of Clinical Thermometer and Recording of		
	Taxly Temperature		
.5	Examination of Respiratory System		
- 1.	Artificial Respiration		
/	Clinical Examination of Cardiovascular System		
- 8	Study of Electrocardiogram		

10	Examination of Sensory Islamous System Clinical examination of Motor Functions		
1.7	Examination of Reflexes Determination of Vital Capacity by Spirometer		
11	Examination of the Cramal Nerves		
III	BIOCHIMISTRY	30 Hrs	20
ו	Study of Urine		
2	Study of Normal Constituents of Urine		
,	Study of Abnormal Urine		
4	Qualitative Estimation of Chicose, Total Proteins, Unic gold in Blood, Liver Lunction Test, Ridney Lunction Test, Lipid Profile, Interpretation and Discussion of Results of Biochemical Tests		
IV	Identification and Uses of Instruments and Appliances (Spotters; any G)	5 Hrs	30
V	Maintenance of Practical Record/ Journal		20
VI	Entorials	90 Hrs	
VII	DEMONSTRATIONS		
	Note: 1. Demonstrations are carried out through Audiovisual Aids wherever required 2. Demonstrations are a part of Haematology, Human experiments and Biochemistry		
۱ ۱	Demonstration of Uses of Instruments or Equipments		
,	Hacmatology, Hacmatocrit, Reticulocyte Count, Platelet Count, Absolute Losinophil Count, Osmotic Fragility and Specific Coavity		
3	Nerve Musele Physiology, Electromyography (EA1C)		
4	Respiratory System: Determination of Lung Volumes, 1	1	

7,	Cardiovascular System: Recording of Arterial Pulse tracing and Venous Pulse tracing, Simultaneous		
	record fipressure changes in Left Ventricle, LCCC and		
	Phonor antiograph		
	Cardiac Efficiency Tests		
6	Clinical Examination of Castrointestibnal System	_	
7	Chinical Examination of Nervous System		
Ŋ.	Examination of Eligher Europions		
4)	Special Senses: Andrometry, Purkinje i -Samson's		
	images, Examination of Lu-indus by Ophthalmoscopy		
10	Llectoencephalogram (LLG)		
11	Autonomic Lunction Tests		

SCHEME OF EXAMINATION

A. Theory:

No. of Papers 02

Paper I 100 Marks

Paper II 100 Marks

Types of Questions with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks				

B. Practical Maximum Marks: 100 Marks

SI.	Particulars	Marks
No 1.	Examination of Urine	25 marks
••	Physical properties	05 marks
	Chemical constituents (any one) (Glucose, Albumin, Ketone Bodies, Bile Salt, Bile Pigments)	05 marks
	Practical Skills	05 marks
	Discussion	10 marks
2.	Haematology (any one)	25 marks
	Haemoglobin estimation, RBC total count, Bleeding Time, Clotting Time, WBC total count/differential count	
	Procedural skills	05 marks
	Practical skills	10 marks
	Discussion	10 marks
3.	Spotters (any four)	20 marks
	(Instruments and appliances – the choice available for the Examiners should at least be in the proportion of 1:15)	
	Identification	02 marks
	Discussion	03 marks
4.	Clinical and Applied Physiology. Examination of Blood Pressure,	20 marks
	Pulse, Temperature, Reflexes on human beings	
	Procedural skills	05 marks
	Practical skills	05 marks
	Discussion	10 marks
5.	Practical Record Book	10 marks

C. Viva-Voce (Oral) Examination

100 marks

MARKS DISTRIBUTION

	Theory		Practical & Oral				Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Physiology Including Biochemistry	200	100	100	100	200	100	400	200

RECOMMENDED BOOKS

Sl.No.	Name of the Book	Author	Publisher
1.	Text Book of Medical Physiology	Guyton & Hall	Elsevier India
2.	Essentials of Physiology	Sembulingam	Jaypee Brothers Medical Publishers
3.	Concise Medical Physiology	Chaudhuri	New Central Book Agency
4.	Fundamentals of Biochemistry for Medical Students	AmbikaShanmugam	Wolters Kluwer India Pvt. Ltd.
5.	Text Book of Biochemistry	Rama Rao	UBS Publishers Distributors Pvt. Ltd.

REFERENCE BOOKS

Sl.No.	Name of the Book	Author	Publisher
1.	Best Tailors Physiological Basis of Medical Practice	John B. West	Williams & Wilkins
2.	Review of Medical Physiology	Ganong	Lange Medical Publications
3.	Samson Wright's Applied Physiology	Keele, Neil &Joels	Oxford Medical Publications
4.	Understanding Medical Physiology	Bijlani	Jaypee Brothers Medical Publishers
5.	Principles of Physiology	Berne & Levy	Mosby
6.	Principles of Anatomy & Physiology	Tortora&Grabousky	Harper Collins College Publishers
7.	Human Physiology	Chatterjee	Medical Allied Agency
8.	A Guide to Physiology Examination and History Taking	Barbara Bates	J.B. Lippincott Com.
9.	Hutchison's Clinical Methods	Michael Swash	ELBS with W.B. Saunders Co.
10.	Fundamentals of Biochemistry	A.C. Deb	New Central Book Agency
11.	Text Book of Medical Biochemistry	Chatterjee &Shinde	Jaypee Brothers Medical Publishers
12.	Harpers Biochemistry	Murray, Granner	Prentice Hall

HOMOEOPATHIC PHARMACY

OBJECTIVES:-

At the end of the course student shall be able to,

- 1. Demonstrate the acquisition of the basic knowledge of the principles and practice of Homoeopathic Pharmacy.
- 2. Exhibit an understanding of the evolution of the various aspects of Homoeopathic Pharmacy with future projection.
- 3. Demonstrate the knowledge of the scientific and logical basis of the principles and practice of dynamization.
- 4. List the techniques of drug proving.
- 5. Enumerate the methods of quality testing, storing, dispensing.
- 6. Recall laws relating to Pharmaceutical industry in general and Homoeopathy in particular.

Instructions:

Instruction in Homoeopathic pharmacy shall be so planned as to present,

- 1) Importance of homoeopathic pharmacy in relation to study of homoeopathic materia medica, organon of medicine and national economy as well as growth of homoeopathic pharmacy and research;
- 2) Originality and speciality of homoeopathic pharmacy and its relation to pharmacy of other recognised systems of medicine;
- 3) The areas of teaching shall encompass the entire subject but stress shall be laid on the fundamental topics that form the basis of homoeopathy.

COURSE CONTENT

A Theory (100 Hours)

SI.			
	Торіс	Hours Allotted	Marks
No			
I	General Concepts and Orientation	16 Hrs	10 Marks
1.	History of Pharmacy with emphasis on emergence of Homoeopathic	2 hrs	
2.	Official Homoeopathic Pharmacopoeia (Germany, British, U.S.A, Inida)	3 hrs	
3.	Important terminologies like Scientific Names, Common Names, Synonyms	1 hr	
4.	Definitions in Homoeopathic Pharmacy	2 hrs	
5.	Components of Pharmacy	5 hrs	
6.	Weights and Measurements	2 hrs	
7.	Nomenclature of Homoeopathic Drugs with their Anomalies	1 hr	
11	Raw Material: Drugs and Vehicles	21 Hrs	25 Marks
1.	Source of Drugs (Taxonomic classification, with reference to utility)	5 hrs	
2.	Collection of Drug Substances	2 hrs	
3.	Vehicles	9 hrs	
4.	Homoeopathic Pharmaceutical Instruments and Appliances	5 hrs	
Ш	Homoeopathic Pharmaceutics	31 Hrs	35 Marks
1.	Mother tincture and its preparation – old and new methods	5 hrs	
2.	Various Scales used in Homoeopathic Pharmacy	5 hrs	
3.	Drug Dynamisation or Potentisation	4 hrs	
4.	External applications (focus on scope of Homoeopathic lotion, Glycerol, Liniment and Ointment)	4 hrs	
5.	Doctrine of Signature	1 hr	
6.	Posology (focus on basic principles; related aphorisms of Organon of Medicine)	5 hrs	
7.	Prescription (including abbreviation)	2 hrs	
8.	Concept of Placebo	1 hr	
9.	Pharmacology – Routes of Homoeopathic Drug Administration	2 hr	
10.	Dispensing of Medicines	1 hr	
11.	Basics of Adverse Drug Reaction and Pharmacovigilance	1 hr	
IV	Pharmacodynamics	14 Hrs	10 Marks
1.	Homoeopathic Pharmacodynamics	3 hrs	
2.	Drug Proving (related aphorism 105-145 of Organon of Medicine) and merits and de-merits of Drug Proving on	5 hrs	

3.	Pharmacological study of drugs listed in Appendix – A	4 hrs	
4.	Scope of Homoeopathic Pharmacy in relation to National	2 hrs	
	Economy, Organon of Medicine and Materia Medica		
V	Quality Control	11 Hrs	10
			Marks
1.	Standardisation of Homoeopathic Medicines, Raw Materials	8 hrs	
	and Finished Product		
2.	Good Manufacturing Practices; Industrial Pharmacy	2 hrs	
3.	Homoeopathic Pharmacopoeia Laboratory – Functions and	1 hr	
	Activities, Relating to Quality Control of Drugs		
VI	Legislation pertaining to Pharmacy	7 Hrs	10
			I
1.	The Drugs and Cosmetics Act, 1940 (23 of 1940) (in reaction		Marks
1.	The Drugs and Cosmetics Act, 1940 (23 of 1940) (in reaction to Homoeopathy);		Marks
1.			Marks
	to Homoeopathy);		Marks
	to Homoeopathy); Drugs and Cosmetics Rules, 1945 (in relation to		Marks
2.	to Homoeopathy); Drugs and Cosmetics Rules, 1945 (in relation to Homoeopathy)		Marks
2.	to Homoeopathy); Drugs and Cosmetics Rules, 1945 (in relation to Homoeopathy) Poisons Act, 1919 (12 of 1919)		Marks
2.	to Homoeopathy); Drugs and Cosmetics Rules, 1945 (in relation to Homoeopathy) Poisons Act, 1919 (12 of 1919) The Narcotic Drugs and Psychotropic Substances Act, 1985		Marks
2. 3. 4.	to Homoeopathy); Drugs and Cosmetics Rules, 1945 (in relation to Homoeopathy) Poisons Act, 1919 (12 of 1919) The Narcotic Drugs and Psychotropic Substances Act, 1985 (61 of 1985)		Marks
2. 3. 4.	to Homoeopathy); Drugs and Cosmetics Rules, 1945 (in relation to Homoeopathy) Poisons Act, 1919 (12 of 1919) The Narcotic Drugs and Psychotropic Substances Act, 1985 (61 of 1985) Drugs and Magic Remedies (Objectionable Advertisement)		Marks

B. Practical (70 Hours)

Experiments

Sl. No	Торіс	Hours
1.	Estimation of size of Globules	2 hrs
2.	Medication of globules and preparation of doses with sugar of milk	2 hrs
	and distilled water	
3.	Purity Test of sugar of milk, distilled water and ethyl alcohol	6 hrs
4.	Determination of specific gravity of distilled water and ethyl alcohol	2 hrs
5.	Preparation of dispensing alcohol and dilute alcohol from strong alcohol	2 hrs
6.	Trituration of one drug each in decimal and centesimal scale	4 hrs
7.	Succession in decimal scale from mother tincture to 6x potency	2 hrs
8.	Succession in centesimal scale from mother tincture to 3c potency	2 hrs
9.	Conversion of Trituration to liquid potency : Decimal scale 6x to 8x potency	1 hr
10.	Conversion of trituration to liquid potency : Centesimal scale 3c to 4c potency	1 hr
11.	Preparation of 0/1 potency (LM scale) of 1 drug	2 hrs
12.	Preparation of external applications – lotion glycerol, liniment, ointment	8 hrs
13.	Laboratory Methods – Sublimation, Distillation, Decantation, Filtration, Crystallisation	8 hrs
14.	Writing of prescription	2 hrs
15.	Dispensing of Medicines	2 hrs
16.	Process of taking Minims	2 hrs
17.	i) Macroscopic and Microscopic characteristic of drug substances – minimum 05 drugs; ii) Microscopic study of Trituration of two drugs (up to 3x potency)	4 hrs 2 hrs
18.	Estimation of moisture content using water bath	2 hrs
19.	Preparation of Mother Tincture- Maceration and Percolation	4 hrs
20.	Collection of 30 drugs for Herbarium	
21.	Visit to Homoeopathic Pharmacopoeial Laboratory and visit to a Large Manufacturing Unit Homoeopathic Medicine (GMP compliant). (Stude detailed visit reports as per proforma at Annexure).	

C. Demonstration

- 1. General Instructions for Practical or Clinical in Pharmacy.
- 2. Identification and use of Homoeopathic Pharmaceutical Instruments and Appliances and their cleaning. -10 Hrs
- 3. Estimation of Moisture Content Using Water Bath.
- 4. Preparation of Mother Tincture-Maceration And Percolation.

D. Tutorials- 20 Hrs

APPENDIX-A

List of drugs included in the syllabus of pharmacy for pharmacological action-

Sl. No	Drugs	Sl. No	Drugs
1	Aconitum napellus	16	Glonoinum
2	Adonis Vernails	17	Hydrastis Canadensis
3	Allium Cepa	18	Hyoscyamus Niger
4	Argentum Nitricum	19	Kali Bichromium
5	Arsenicum Album	20	Lachesis
6	Atropa Belladonna	21	Lithium Carbonicum
7	Cactus Grandiflorus	22	Mercurius Corrosives
8	Cantharis Vesicatoria	23	Naja Tripudians
9	Cannabis Indica	24	Nitricum Acidum
10	Cannabis Sativa	25	Nux Vomica
11	Cinchona Officinalis	26	Passiflora Incarnate
12	Coffea Cruda	27	Stannum Metallicum
13	Crataegus Oxyacantha	28	Stramonium
14	Crotalus Horridus	29	Symphytum Officinale
15	Gelsemium Sempervirens	30	Tabacum

APPENDIX-B

List of drugs for identification

SI. No	Drugs	SI. No	Drugs
I	Vegetable Kingdom	ļ	
1	Aegle Folia	14	Holarrhena Antidysenterica
2	Anacardium Orientale	15	Hydrocotyle Asiatica
3	Andrographis Panniculata	16	Justicia Adhatoda
4	Calendula officinalis	17	Lobelia Inflata
5	Cassia Sophera	18	Nux Vomica
6	Cinchona Officinalis	19	Ocimum Sanctum
7	Cocculus Indicus	20	Opium
8	Coffea Cruda	21	Rauwolfia Serpentia
9	Colocynthis	22	Rheum
10	Crocus Sativa	23	Saraca Indica
11	Croton Tiglium	24	Senna
12	Cynodon Dactylon	25	Stramonium
13	Ficus Religiosa	26	Vinca Minor
11	Chemical or Minerals		
1	Aceticum Acidum	7	Carbo Vegetabilis
2	Alumina	8	Graphites
3	Argentum metallicum	9	Magnesium Phosphorica
4	Argentum Nitricum	10	Natrum Muriaticum
5	Arsenicum Album	11	Sulphur
6	Calcarea Carbonica		
Ш	Animal Kingdom		
T	Apis Mellifica	4	Sepia
2	Blatta Orientalis	5	Tarentula Cubensis
3	Formica Rufa		

Note:

- 1. Each student shall maintain practical or clinical record or journal and herberium file Separately.
- 2. College Authority shall facilitate the students in maintaining record as per Appendix.

SCHEME OF EXAMINATION-

A.THEORY

1. No of papers - 01

2. Maximum Marks -100

Types of Questions with Marks

Type of Questions	No. of Questions Asked	No. of Questions to be attempted	Marks per Question	Total
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
		,	Maximum Marks	100

B. Practical including Viva Voce or Oral:

Max. Marks = 100

1. Practical – 50 marks

Sl. No	Particulars Particulars	Marks	
Procedure of conducting and distributing of Marks			
1.	Specimens:		
	Identification	1 mark	
	Description	1 mark	
		$2 \times 5 = 10 \text{ marks}$	
2.	Spotters:		
	Identification	1 mark	
	Description	1 mark	
		$2 \times 5 = 10 \text{ marks}$	
3.	Experiment:		
	Procedural skills	5 marks	
	Practical skills	5 marks	
	Discussion	5 marks	
		15 marks	
4.	Practical Record Book	10 Marks	
5.	Maintenance of Herbarium Record	5 marks	

C. Viva-Voce (Oral) Examination: 50 Marks

MARKS DISTRIBUTION

	The	eory		Practica	l & Oral		Grand	Total
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Homoeopathic Pharmacy	100	50	50	50	100	50	200	100

RECOMMENDED BOOKS

Textbooks

Sl.No.	Name of the Book	Author	Publisher
1.	Augmented Textbook of Homoeopathic Pharmacy	D.D.Banerjee	B. Jain
2.	A text book of Homoeopathic Pharmacy	Mandal&Mandal	New Central Book Agency, Calcutta.
3.	Art and Science of Homoeopathic Pharmacy	SumitGoel	Leo Enterprises, Ahmedabad.

REFERENCE BOOKS

SI. No.	Name of the Book	Author	Publisher
1.	Homoeopathic Pharmacopoeia India (1-10 Vol.)	HPL	Government of India, Ministry of Health & Family Welfare, New Delhi.
2.	A treatise on Homoeopathic Pharmacy	N. K. Banerjee and N. Sinha	B. Jain
3.	A Text Book of Homoeopathic Pharmacy	M. J. Wartikar	Pune Vidyarthi Griha Prakashan, Pune.
4.	Pharmacodynamics	Richard Hughes	B. Jain

BHMS – 2nd YEAR PATHOLOGY AND MICROBIOLOGY

INTRODUCTION:

The teaching of pathology and bacteriology has to be done cautiously and judiciously. While modern medicine associates pathology of tissues and microorganisms with disease conditions and considers bacteria as conditioned cause of diseases, homoeopathy regards disease as a dynamic disturbance of the vital force expressed as altered sensations and functions which may or may not ultimate in gross tissue changes. The tissue changes are not therefore an essential part of the disease per se and are not the object of treatment by medication in Homoeopathy.

Since the discoveries of Louis Pasteur and Robert Koch the medical world has come to believe in the simple dogma "kill the germs and cure the disease". But subsequent experience has revealed that there is an elusive factor called 'susceptibility' of the patient, which is behind infection, and actual outbreak of disease. As homoeopathy is mainly concerned with reactions of the human organism to different morbid factors, microbial or otherwise, the role of bacteria or viruses in the production of disease is therefore secondary.

Knowledge of Pathology is nevertheless necessary for a complete homoeopathic physician; but it is for purposes other than therapeutics such as for diagnosis, prognosis, and prevention of disease and general management. It is also necessary for disease discrimination between symptoms of the patient and symptoms of the disease and for adjusting the dose and potency of indicated homoeopathic remedy. Only broad training in pathology, free from specialist bias should be imparted to students. Teachers of pathology should never lose sight of the fact that they are training medical practitioners, especially homoeopathic practitioners, and not technicians and specialists in pathology. The living patient, and not the corpus, should be the central theme in the teaching of this subject.

INSTRUCTIONS:

1. (a) Pathology and Microbiology shall be taught in relation to the concept of miasms as evolved by Samuel Hahnemann and further developed by J. T. Kent, H. A. Robert, J.H. Allen and other stalwarts, with due reference to Koch's Postulate, correlation with immunity, susceptibility and thereby emphasizing homoeopathic concept of evolution of disease and cure:

- (b) Focus will be given on the following points, namely:-
 - (1) Pathology in relation with Homoeopathic Materia Medica
 - (2) Correlation of miasms and pathology
 - (3) Characteristic expressions of each miasm
 - (4) Classification of symptoms and diseases according to pathology
 - (5) Pathological findings of diseases; their interpretation, correlation and usage in the management of patients under homoeopathic treatment.
- (c) To summarise, all the topics in the general and systemic Pathology and Microbiology should be correlated, at each juncture, with homoeopathic principles so that the importance of pathology in Homoeopathic system could be understood by the students.

OBJECTIVES:

At the end of the course a Student shall:

- a. Know about changes in the cells and tissues as a result of disease in correlation to homoeopathy.
- b. Know the pathogenicity and the virulence of the microbes in relation to the susceptibility of the constitution.
- c. Be able to understand the level of the affection of the illness, the scope of homoeopathy, determining the principles of posology, setting priorities of approach for treatment, prognosis, general management and drawing prophylactic measures.
- d. Be able to correlate the subjective symptoms with the objective clinical signs on the basis of underlying pathology wherever necessary.
- e. Be able to study pathology in relation with concept of miasms.
- f. Study the procedures of basic pathological, biochemical, and microbiological investigations, and interpretation of the same for promotive, prophylactic and therapeutic purposes.
- g. Be able to correlate the knowledge of pathology to homoeopathic concepts.

Course Content

A. Theory: (200 Hours) Syllabus & the Distribution of chapter – wise marks *

PAPER –I Marks: 100

SL. NO	TOPIC / CHAPTERS	HOURS ALLOTTED	MARKS
	Section A		
1.	General Pathology	50 hrs	50
		10 hrs	
	 Cell injury and Cellular adaptation 		
	Hyperplasia and hypertrophy, Anaplasia, Metaplasia,		
	Atrophy, Necrosis, Gangrene, Calcification		
	2) Inflammation and repair (Healing)	12 hrs	
	Degeneration,Regeneration, Pyrexia		
	3) Immunity	1 hrs	
	Infection, Hospital infection		
	4) Thrombosis and Embolism	3 hrs	
	5) Oedema	2 hrs	
	6) Disorders of metabolism	2 hrs	
	7) Ischaemia	1 hr	
	8) Haemorrhage	1 hr	
	9) Shock	2 hrs	
	10) Hyperemia	2 hrs	
	11) Infarction	2 hrs	
	12) Amyloidosis	1 hr	
	13) Hyperlipidaemia and Lipidosis, Disorders of pigmentation	1 hr	
	14) Neoplasia (Definintion, variation in cell growth,	10 hrs	
	nomenclature and taxonomy, characteristics of neoplastic		
	cells, aetiology and pathogenesis, grading and staging,		
	diagnostic approaches, interrelationship of tumour and host,		
	course and management, Effects of radiation).		

Concept of miasms in view of pathology.

Reference to koch's postulate. Importance of susceptibility and immunity, there by the Homoeopathic concept of disease and cure.

Characteristic expression of each miasm.

Classification of symptoms and disease according to pathology - Co relation of miasm and pathology for example PSORA - the inflammation. Natural evolution in pathology.

Injury, inflammation & repair. Degeneration

Cellular swelling (hydropic change or vascular degeneration), fatty change, hyaline change, mucoid change. Necrosis and gangrene.

Disturbances of metabolism

Pigment, calcium and uric acid metabolism, fat metabolism, carbohydrate metabolism, amino acid metabolism.

Disorders of growth

Metaplasia, hyperplasia, anaplasia, atrophy, hypertrophy, Neoplasm classification: benign and malignant.

Circulatory disturbances

Clotting, ischaemia, thrombosis, embolism, infarction, hyperaemia, oedema and shock.

SL.	TOPIC / CHAPTERS	HOURS	MARKS
NO		ALLOTTED	
	Section B		
2.	Systemic Pathology	50 hrs	50
	In each system, the important and common diseases should be		
	taught, keeping in view their evolution, aetio-pathogenesis, mode of		
	presentation, progress and prognosis, namely:-		
i	Mal-nutrition and deficiency diseases	4 hrs	
ii	Diseases of Cardiovascular system	5 hrs	
iii	Diseases of blood vessels and lymphatics	3 hrs	
iv	Diseases of kidney and lower urinary tract	6 hrs	
V	Diseases of male reproductive system and prostate	1 hr	
vi	Diseases of the female genitalia and breast	2 hrs	
vii	Diseases of eye, ENT and Neck	1 hr	
viii	Diseases of the respiratory system	6 hrs	
ix	Diseases of the oral cavity and salivary glands	1 hr	
X	Diseases of the G.I. system	4 hrs	
xi	Diseases of liver, gall bladder and biliary ducts	4 hrs	
xii	Diseases of the pancreas (including diabetes mellitus)	2hrs	
Xiii	Diseases of the haemopoetic system, bone marrow and blood		
		4 hrs	
xiv	Diseases of glands —thymus, pituitary, thyroid and parathyroid,		
	adrenals, parotid	2 hrs	
XV	Diseases of the skin and soft tissues and nervous system	1 hr	
x∨i	Diseases of the musculo-skeletal system	3 hrs	
XVII	Leprosy	1 hr	

Course Content:

PAPER –II: Marks: 100

SL. NO	TOPIC / CHAPTERS	HOURS Allotted	MARKS
	Section A	55 hrs	50
1	Bacteriology	30 hrs	25
i	Bacterial structure, growth and metabolism		
li	Bacterial genetics and bacteriophage	6 hrs	
lii	Identification and cultivation of bacteria	2 hrs	1
iv	Gram positive aerobic and facultative anaerobic cocci, eg.	5 hrs	1
	Streptococci, pneumococci		
V	Gram positive anaerobic cocci, e.g., peptostreptococci	1 hr	
vi	Gram negative aerobic cocci, eg. Neisseria, Moraxella, kingella	1 hr	
vii	Gram positive aerobic bacilli, eg. Corynebacterium, bacillus	8 hrs]
	anthrax, cereus subtitis, mycobacterium tuberculosis, M. leprae,		
	actinomycetes; nocardia, organism of enterobacteriac group		
VIII	Gram positive anaerobic bacilli, eg., genus clostridium,	3 hrs	
	lactobacillus		
ix	Gram positive anaerobic bacilli, eg. Bacteroides, fragilus,	1 hr	
	fusobacterium		
X	Others like-cholerae vibrio, spirochaetes, leptospirae,	3 hrs	
	mycoplasma, chlamydiae, rickettsiae, Yersinia and pasturella.		
2	Fungi and Parasites:	25 hrs	25
i	Fungi – (1) True pathogens (Cutaneous, sub-cutaneous and systemic infective Agents). (2) Opportunistic pathogens.	2 hrs	
ii	Protozoa—(1) Intestinal (Entamoeba histolytica, Giardia lamb lia, Cryptosporidum parvum), (2) Urogenital (Trichomonas vaginalis) (3) Blood and Tissues (Plasmodium species, Toxoplasma gondii, Trypanosoma species, leishmania species).	9 hrs	
iii	Helminths- (1) Cestodes (tapeworms) - Echinococcus granulosus, Taenia solium, Taenia saginata, (2) Trematodes (Flukes): Paragonimus westermani, Schistosoma mansoni, Schistosoma haematobium (3) Nematodes - Ancylostoma duodenale, Ascaris lumbricoides, Enterobius vermic ularis, Strongyloides, Stercoralis, Trichuris trichiura, Brugia malayi, Dracunculus medinensis, Loa loa. Onchocerca volvulus, Wuchereria bancroftii).	14 hrs	

SL. NO	TOPIC / CHAPTERS	HOURS ALLOTTED	MARKS
	Section B	45 hrs	50
I	Virology	20 hrs	20
i	Introduction		1
ii.	Nature and classification of viruses	2 hrs	
iii.	Morphology and replication of viruses	2 hrs	1
vi.	DNA viruses:		
	i) Parvo virus	1 hr	
	ii) Herpes virus, varicella virus, CMV, EBV		
	iii) Hepadna virus (hepatitis virus)	3 hrs	
	iv) Papova virus	1 hr	1
	v) Adeno virus		
	vi) Pox virus-variola virus, vaccinia virus, molluscum	1 hr	1
	contagiosum etc.		
٧.	RNA Viruses:	10 hrs	
	a. Orthomyxo virus;		
	i) Entero virus		
	ii) Rhino virus		
	iii) Hepato virus		
	b. Paramyxo virus-rubeola virus, mumps virus, influenza virus		
	etc.		
	c. Rhabdo virus		
	d. Rubella virus (german measles)		
	e. Retro virus		
	f. Yellow fever virus		
	g. Dengue, Chikungunya virus		
	h. Miscellaneous virus		
	i) Arena virus		
	ii) Corona virus		
	iii) Rota virus		
	iv) Bacteriophages		
2	Clinical Microbiology	3 hrs	10
	1) Clinically important micro organisms		
	2) Immunoprophylaxis		
	3) Antibiotic Sensitivity Test (ABST)		
3	Diagnostic procedures in Microbiology	2 hrs	
	1) Examination of blood and stool		
	2) Immunological examinations		
	3) Culture Methods		
	4) Animal inoculation		

4	Infection and Disease		10
	Pathogenicity, mechanism and control		
	2) Disinfection and sterilization		
	3) Antimicrobial chemotherapy		
	4) Microbial pathogenicity		
5	Histopathology		
	Teaching of histopathological features with the help of slides of common Pathological conditions from each	5 hrs	
	system.		
	2) Teaching of gross pathological specimens for each system.		
	3) Histopathological techniques, e.g., fixation, embedding,		
	sectioning and staining by common dyes and stains.		
	4) Frozen sections and its importance.5) Electron microscopy; phase contrast microscopy.		
6	Microbiology		10
(1)	General Topics	5 hrs	10
(•)	i) Introduction	31113	
	ii) History and scope of medical Microbiology		
	iii) Normal bacterial flora		
	iv) Pathogenicity of micro-organisms		
	v) Diagnostic Microbiology		
(2)	Immunology	10 hrs	
_/	i) Development of immune system		
	ii) The innate immune system		
	iii) Non-specific defense of the host	1	
	iv) Acquired immunity		
	v) Cells of immune system; T cells and Cell mediated		
	immunity; B cells and Humoral immunity		
	vi) The compliment system		
	vii)Antigen; Antibody; Antigen-Antibody reactions		
	(Anaphylactic and Atopic); Drug Allergies		
	viii) Hypersensitivity		
	ix) Immuno-deficiency		
	x) Auto-immunity		
	xi) Transplantation		
	xii) Blood group antigens		
	xiii) Clinical aspect of immune-pathology		

B. Practical or Clinical: 80 Hours

1) Clinical and Chemical Pathology: estimation of haemoglobin (by acidometer)count of Red Blood Cells and White Blood Cells, bleeding time, clotting time, blood grouping, staining of thin and thick films, differential counts, blood examination for parasites, erythrocyte sedimentation rate— 18 hrs.

- 2) Urine Examination, physical, chemical microscopical, quantity of albumin and sugar- 12 hrs.
- 3) Examination of Faeces: physical, chemical (occult blood) and microscopical for ova and protozoa- **4 hrs.**
- 4) Methods of sterilization, preparation of a media, use of microscope, gram and acid fast stains. Motility preparation, gram positive and negative cocci and bacilli. Special stains for corynebacterium gram and acid fast stains of pus and sputum— 12 hrs.
- 5) Preparation of common culture medias, e.g., nutrient agar, blood agar, Robertson's Cooked Meal Media (RCM) and Mac conkey's media— 2 hrs.
- 6) Widal test demonstration 1 hr.
- 7) Exposure to latest equipment, viz, auto-analyzer, cell counter, glucometer 2 hrs.
- 8) Histopathology
 - (a) Demonstration of common slides from each system- 12 hrs.
 - (b) Demonstration of gross pathological specimens 12 hrs.
 - (c) Practical or Clinical demonstration of histopathological techniques, i.e, fixation, embedding— 2 hrs.
 - (d) Sectioning, staining by common dyes and stain. Frozen section and its Importance– 2 hrs.
 - (e) Electron microscopy, phase contrast microscopy- 1 hr.

SCHEME OF EXAMINATION

A. Theory:

Number of Papers : 02

Paper I: 100 Marks

Paper II : 100 Marks

Distribution of Marks:

Paper-I:	Section A- General Pathology	-50 marks
	Section B- Systemic Pathology	-50 marks
Paper- II	Section A-	
	Bacteriology	-25 marks
	Fungi and Parasites	-25 marks
	Section B-	
	Virology	-20 marks
	Clinical Microbiology and	-10 marks
	Diagnostic Procedures	
	Microbiological control and	-10 marks
	mechanism of Pathogenicity	
	General Topics immuno- pathology	-10 marks

Types of Question with Marks

Type of Questions	No. of Questions Asked			Total	
Long Essays	02	02	10	20	
Short Essays	12	10	05	50	
Short Answers	10	10	03	30	
Maximum Marks					

Maximum Marks: 100

B. Practical including Viva Voce or Oral:

1. Practical: 50 Marks

Distribution of marks: - Marks

a) Practical - 15

b) Spotting - 20 (4 spottings)

c) Histopathological slides - 10 (2 slides)

d) Journal or practical record - 05

2. Viva Voce (Oral) Examination: 50 Marks

(Including 5 marks for interpretation of routine pathological reports)

MARKS DISTRIBUTION

	Theory		Practical & Oral				Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Pathology And Microbiology	200	100	50	50	100	50	300	150

RECOMMENDED BOOKS

Sl. No	Name of the Book	Author	Publisher
1.	Walter & Israel's General Pathology	J.W. Walter / I.C. Talbot	Churchill Livingstone
2.	Y.M. Bhende's General Pathology (2 Vols)	S.G. Deodhare	Popular Prakashan
3.	Text book of pathology	Harsh Mohan	Jaypee Brothers
4.	Medical Microbiology	Greenwood, Slack	ELBS
5.	Organon of Medicine	Hahnemann	B. Jain Publishers
6.	Theory of chronic Miasms	Hahnemann	B. Jain Publishers
7.	Boyd's Text book of Pathology	A.C. Ritchie	Indian Edn - K.M. Verghese company (Mumbai)
8.	Basic Pathology	Kumar, Cotran & Robbins	Prism books (Pvt) Ltd (Bangalore)
9.	Pathologic basis of disease	Robbins	Prism books (Pvt) Ltd
10.	Pathology illustrated	Rovan, Mc Farlane & Callander	Churchill Livingstone
11.	Text book of Medical Parasitology	Jayaram Panikar	Jaypee
12.	Text book of Microbiology	Ananta Narayan	Orient Longman Bangalore

REFERENCE BOOKS:

SI. No	Name of the Book	Author	Publisher
1.	Dacie and Lewis Practical	Bain. BJ, Bates I, Laffan	Churchill Livingstone
2	Haematology [11 th edition]	MA	CDC
2.	Anderson's pathology vol I, II. [10 th edition]	Damjanov I, Linder J	CRS press
3.	Essential Immunology [12 th edition],	Delves PJ, Martin SJ, et al.	Chichester, West Sussex
4.	General pathology & pathology of systems [part I & part II]- [6 th edition]	Deodhare S. & Y.M. Bhendes	Popular Prakashan Mumbai
5.	Essential of Clinical Pathology. [1st edition]	Kawthalkar SM	Jaypee medical, New Delhi
6.	Medical Laboratory Technology.[4 th edition]	Stanley RS	Lynch's.Saunder's,
7.	Pathology [3 rd edition]	Rubin E, Farber J L.	Lippincott Williams & Wilkins
8.	Walter & Israel General pathology [7 th edition].	Talbot IC	Elsevier Health Science

BHMS - 2nd YEAR

FORENSIC MEDICINE AND TOXICOLOGY

INSTRUCTIONS:

- (a) Medico-legal examination is the statutory duty of every registered Medical Practitioner, whether he is in private practice or engaged in Government sector and in the present scenario of growing consumerism in medical practice, the teaching of Forensic Medicine and Toxicology to the students is highly essential.
- (b) This learning shall enable the student to be well-informed about medico-legal responsibility in medical practice and he shall also be able to make observations and infer conclusions by logical deductions to set enquire on the right track in criminal matters and connected medico-legal problems.
- (c) The students shall also acquire knowledge of laws in relation to medical practice, medical negligence and codes of medical ethics and they shall be capable of identification, diagnosis and treatment of the common poisonings in their acute and chronic state and also dealing with their medico-legal aspects.
- (d) For such purposes, students shall be taken to visit district courts and hospitals to observe court proceedings and post-mortem as per Annexure 'B'.

OBJECTIVES:

At end of the course the student shall:

- 1. Be acquainted with medico-legal procedures, medical ethics and various provisions of Consumer Protection Act.
- 2. Be competent to handle medico-legal cases apart from giving evidence in such cases whenever required.
- 3. Have the knowledge of toxicology to identify the poison and adopt necessary emergency measures.
- 4. Expand his knowledge of Materia Medica by incorporating the knowledge gained through the study of Toxicology.
- 5. Demonstrate basic knowledge of relevant sections of penal code.

- 6. Demonstrate awareness of inquest, legal and court procedures applicable to medico-legal and medical practice.
- 7. Demonstrate awareness of code of ethics, duties & rights of medical practitioner, duties towards patients, society, punishment on violation of code of ethics, various forms of medical negligence and duties towards his / her professional colleagues.

Course Content:

A. Theory: 80 Hours

Forensic Medicine – 50 Hours, Toxicology - 28 Hours

Legislation relating to Medical Profession: 2 Hours

SI. No	Topic / chapters	Hours allotted	Marks
I.	Forensic Medicine	50 hours	67
1	Introduction (a) Definition of Forensic Medicine, Medical jurisprudence (b) History of Forensic Medicine in India (c) Medical Ethics and Etiquette Medical ethics, medical etiquette forensic pathology. Functions of CCH, meaning of penal erasure or professional death sentence, reasons for awarding it, warning notice, duties of medical practitioner, privileged communication meaning with examples (d) Duties of registered Medical Practitioner in medico-legal-cases Professional secrecy meaning with examples, definition of professional negligence or malpraxis, infamous conduct, contributory negligence, vicarious liability, objects of medical records, definition of consent, types of consent,	4 hrs	5
2	informed consent, locoparentis, malingering Legal Procedure (a) Inquests, courts in India, legal procedure Inquest definition, police inquest, magistrate inquest, courts of law & their powers, cognizable offences (as per S2(c) Cr. P. C) summons, definition of conduct money. (b) Medical evidence in courts, dying declaration, dying deposition, including medical certificates and medico-legal reports. Types of documentary evidence, dying declaration, chain of custody, common, expert, hostile witness, procedure of record of evidence.	4 hrs	5
3	Personal identification (a) Determination of age and sex in living and dead; race, religion. Definition of identification, need for identification, meaning of corpus delicti, identification data, determination of Race, cephalic index formula, need for determination of sex, sex chromatin/ barr body definition, intersex definition & types, differences between male skull & female skull, male & female pelvis, male & female mandible, male & female femur, differences between	7 hrs	10

	permanent & temporary teeth, determination of age from teeth, medico legal importance of age, rule of Haase, (b) Dactylography, DNA finger printing, foot print. anthropometry, finger print definition, ridges types, techniques of finger printing, types of finger print, medico legal importance of finger prints, scarsdefinition, characters, medico-legal importance. Tattoo marks- definition dyes used, complication, duration, & erasure of tattoo & medico legal importance. (c) Medico-legal importance of bones, scars and teeth, tattoo marks, handwriting, anthropometry. Medico legal importance of eyes, hair & teeth. Difference between animal & human hair, Medullary index of bones, age determination as a whole age determination of foetus. (d) Examination of biological stains and hair		
4	Death and its medico-legal importance (a) Death and its types, their medico-legal importance Death & its types, medico legal aspects of death, Brain death, modes of death, manner of death, classification of cause of death (b) Signs of death (1) immediate, (2) early (3) late and their medico-legal Importance and methods to preserve the dead body. (c) Asphyxial death (mechanical asphyxia and drowning) Asphyxial death – asphyxia definition, causes & types of asphyxia, stages of asphyxia, signs of asphyxia, mechanism & pathophysiology of drowning, post mortem changes in asphyxia. Hanging, strangulation, throttling – definition, types, causes of death, fatal period, post mortem appearance medico legal aspects. Definition of suffocation, smothering, gagging, overlaying, choking, traumatic asphyxia. post mortem changes, medico legal aspects Drowning – definition, types, causes of death, post mortem changes medico legal aspects. (d) Deaths from starvation, cold and heat etc. Starvation – types, symptoms, fatal period, factors influencing the fatal period, cause of death, post mortem changes.	13 hrs	13
5	Injury and its medico-legal importance Mechanical, thermal, firearm, regional, transportation and traffic injuries; injuries from radiation, electrocution and lightening. Injury – definition, classification Abrasion –definition, types, age of abrasion, medico legal importance Contusions – definition, factors modifying size & shape, age of bruise, patterned bruising. Laceration – definition, types, characters, medico legal importance. Incised wound – definition, characters, medico legal importance, age of incised wound, chop wound.	8 hrs	09

	Stab wound – definition, characters, medico legal importance.		
	Defence & self-inflicted wound		
	Fire arm injuries, character of entry wound in contact, difference between		
	entrance & exit wound. Suicidal, homicidal, accidental firearm injuries.		
	Regional injuries – types of fracture skull, coup & contre coup lesion,		
	difference between drunkenness & concussed, lucid interval.		
	Thermal injury – Burns – Wilsons degree of burns, rule of nine, causes of		
	death, post mortem appearance, difference between ante mortem & post		
	mortem burns, dry heat, moist heat differences		
6	Forensic Psychiatry	3 hrs	5
	(a) Definition; delusion, delirium, illusion, hallucinations;	-	
	Impulse and mania; classification of insanity, phobia & medico legal		
	importance,		
	(b) Development of insanity, diagnosis, admission to mental asylum	1	
	Classification of insanity, differences between real & feigned insanity, lucid	+	
	interval, mental disorder & responsibility.		
7	Post-mortem examination (autopsy)	2 hrs	3
	(a) Purpose, procedure, legal bindings; difference between pathological and		
	Medico-legal autopsies. Autopsy – definition., objects, rules, types of skin	1	
	incision, Exhumation.		
	(b) External examination, internal examination of adult, foetus and skeletal	1	
	remains.		
_			
8	Impotence and sterility	2 hrs	3
	Impotence; Sterility; Sterilization; Artificial Insemination; Test Tube Baby;	1	
	Surrogate mother, Definition of impotence, sterility,	ł	
	Sterilization definition, artificial insemination definition, legal problems.		
	Surrogate motherhood, situation where question of impotency & sterility		
	arises.	-	
	Legitimacy & paternity.		
9	Virginity, defloration; pregnancy and delivery	3 hrs	3
	Definition of virgin, defloration & differences, types of hymen, causes of		
	rupture of hymen, medico legal aspects		
	Superfecundation, superfetation,		
	Legitimacy definition, medico legal aspects of legitimacy.		
10	Abortion and infanticide (a) Abortion different methods, complications, assidents following criminal	2 hrs	8
	(a) Abortion: different methods, complications, accidents following criminal	I	1
	abortion MTP		İ
	abortion, MTP. Legal definition of abortion, criminal abortion, difference between natural &		
	Legal definition of abortion, criminal abortion, difference between natural &		
	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion,		
	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion, (b) Infant death, legal definition, legitimacy, legal definition of infanticide,		
	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion,		
11	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion, (b) Infant death, legal definition, legitimacy, legal definition of infanticide, criminal causes of death infant, viability of foetus, stillborn definition, Battered baby syndrome, Cot death. Sexual Offences	2 hrs	3
11	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion, (b) Infant death, legal definition, legitimacy, legal definition of infanticide, criminal causes of death infant, viability of foetus, stillborn definition, Battered baby syndrome, Cot death. Sexual Offences Rape, incest, sodomy, sadism, masochism, tribadism, bestiality, buccal coitus	2 hrs	3
11	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion, (b) Infant death, legal definition, legitimacy, legal definition of infanticide, criminal causes of death infant, viability of foetus, stillborn definition, Battered baby syndrome, Cot death. Sexual Offences Rape, incest, sodomy, sadism, masochism, tribadism, bestiality, buccal coitus and other sexual perversions.	2 hrs	3
11	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion, (b) Infant death, legal definition, legitimacy, legal definition of infanticide, criminal causes of death infant, viability of foetus, stillborn definition, Battered baby syndrome, Cot death. Sexual Offences Rape, incest, sodomy, sadism, masochism, tribadism, bestiality, buccal coitus and other sexual perversions. Define sexual offences, classify sexual offences, define Rape as per Sec 375 &	2 hrs	3
11	Legal definition of abortion, criminal abortion, difference between natural & criminal abortion, Methods of procuring criminal abortion, (b) Infant death, legal definition, legitimacy, legal definition of infanticide, criminal causes of death infant, viability of foetus, stillborn definition, Battered baby syndrome, Cot death. Sexual Offences Rape, incest, sodomy, sadism, masochism, tribadism, bestiality, buccal coitus and other sexual perversions.	2 hrs	3

SI. No	Topic / chapters	Hours allotted	Marks
II.	Toxicology	28	33
1.	General Toxicology (a) Forensic Toxicology and Poisons Definition of Toxicology, poison, clinical toxicology and antidote characters of ideal homicidal and suicidal poison, classification of poison as per the mode of action, routes of administration of poison, fate of poison in the body, routes of elimination of poison from the body, actions of poison, causes or factors modifying action of poisons, types of poisoning. (b) Diagnosis of poisoning in living and dead subjects, reasons for failure to detect poison in the body, duties of medical practitioner in a case of suspected poisoning, treatment of poisoning, (c) General principles of management of poisoning (d) Medico-legal aspects of poisons (e) Antidotes and types -types of antidotes and its uses, universal antidote constituent and its uses, preservation of visceras & other materials & preservatives to be used.	6 hrs	6
2.	Clinical toxicology - (a) Types of Poisons; (i) Corrosive poisons (Mineral acids, Caustic alkalis, Organic acids, Vegetable acids, Sulphuric acid, hydrochloric acid, nitric acid, oxalic acid, carbolic acid & caustic alkalis- action, signs & symptoms, fatal dose, fatal period, causes of death, post mortem finding, circumstances or medico legal of poisoning.	5 hrs	3
	(ii) Irritant poisons (Organic poisons – vegetable and animal, Inorganic poisons- metallic and non-metallic Mechanical poisons) Arsenic, lead – action, signs & symptoms, fatal dose, fatal period, post mortem findings, circumstances of poisoning. Differentiate arsenic poisoning from cholera Phosphorus- action, signs & symptom, fatal dose, fatal period, post mortem findings, circumstances of poisoning. Powdered glass, needles, hair etc- signs & symptoms, post mortem findings, medico legal aspects. Treatment of mechanical poisoning. Ricinus communis, Abrus precator ius, capsicum, calotropis, anacardium – action, physical charecteristics, alkaloids, signs & symptoms, post mortem findings, circumstances of poisoning. Powdered glass, needles, hair etc- signs & symptoms, post mortem findings, medico legal aspects. Treatment of mechanical poisoning. Ricinus communis, Abrus precator ius, capsicum, calotropis, anacardium – action, physical charecteristics, alkaloids, signs & symptoms, post mortem findings, circumstances of poisoning. Treatment in capsicum, anacardium, calotropis ricinus communis poisoning. Differences between poisonous snakes from non-poisonous snakes, action of venom, signs & symptoms, post mortem findings, circumstances of poisoning, first aid treatment, Scorpions – action, signs & symptoms, post mortem findings,	6 hrs	6

	(iii) Asphyxiant poisons (Carbon monoxide; Carbon dioxide;	1 hr	3
	Hydrogen sulphide and some war gases)		
	Carbon monoxide & carbon dioxide – action sources, signs & symptoms, post mortem findings, circumstances of poisoning &		
	treatment.		
	(iv) Agricultural Poisons – Oragano phosphorous poison,	2 hrs	3
	Organophosphorus compounds action signs & symptoms, fatal period,		
	diagnosis, causes of death, post mortem findings, prophylaxis, medico		
	legal aspects.	4.1	
	(v) Neurotic poisons (Opium, Nux vomica, Alcohol, Fuels like kerosene and petroleum products, Cannabis indica, Dhatura,	4 hrs	3
	Anaesthetics Sedatives and Hypnotics, Agrochemical compounds,		
	Belladonna, Hyoscyamus, Curare, Conium)		
	Ethyl alcohol –action, signs & symptoms, fatal dose, fatal period, post		
	mortem findings, medico legal aspects, hazards of alcohol, define		
	drunkenness,		
	Opium – alkaloids, action signs & symptoms, fatal dose, fatal period,		
	diagnosis of post mortem findings, medico legal importance, Datura , Hyasymus & Belladonna- action, signs & symptoms, fatal		
	dose, fatal period, post mortem findings, medico legal aspects,		
	Cannabis Indica – action, sources or forms in which it is used, signs &		
	symptoms, fatal dose, fatal period, circumstances of poisoning.		
	Cocaine – action, signs & symptom, fatal dose, fatal period, post-		
	mortem findings, circumstances of poisoning,		
	Nux vomica – action, signs & symptoms, fatal dose, fatal period,		
	difference between strchynine poisoning & tetanus, circumstances of poisoning,		
	(vi) Cardiac poisons (Digitalis purpurea, Oleander, Aconite, Nicotine)	3 hrs	3
	Digitalis, aconite, tobaccum -action, signs & symptoms, fatal dose,		
	fatal period, post mortem findings, circumstances of poisoning.		
	Nerium odorum (white & yellow) – signs & symptoms, fatal dose, fatal		
	period, post mortem findings, circumstances of poisoning.		
	(vii) Miscellaneous poisons (Analgesics and Antipyretics,	1 hr	3
	Antihistaminics, Tranquillisers, antidepressants, Stimulants,		
	Hallucinogens, Street drugs, food poison etc.)		
III.	Legislation relating to Medical Profession	2 Hrs	3
	(a) The Homoeopathy Central Council Act, 1973 (59 of 1973)		
	(b) The Consumer Protection Act, 1986 (68 of 1986)(c) The Workmen's Compensation Act, 1923 (8 of 1923)		
	(d) The Employees State Insurance Act, 1948 (34 of 1948)		
	(e) The Medical Termination of Pregnancy Act, 1971 (34 of 1971)		
	(f) The Mental Health Act, 1987 (14 of 1987)		
	(g) The Indian Evidence Act, 1872 (1 of 1872)		

- (h) The Prohibition of Child Marriage Act, 2006 (6 of 2007)
- (I) The Personal Injuries Act, 1963 (37 of 1963)
- (j) The Drugs and Cosmetics Act, 1940 (23 of 1940) and the rules made therein:
- (k) The Drugs and Magic Remedies (Objectionable Advertisements) Act, 1954 (21 of 1954)
- (l) The Transplantation of Human Organs Act, 1994 (42 of 1994);
- (m) The Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act,1994 (57 of 1994);
- (n) The Homoeopathic Practitioners (Professional Conduct, Etiquette and Code of Ethics) Regulations, 1982;
- (o) The Drugs Control Act, 1950 (26 of 1950)
- (p) The Medicine and Toiletry preparations (Excise Duties) Act, 1955 (16 of 1955)
- (q) The Indian Penal Code (45 of 1860) and the Criminal Procedure Code (2 of 1974) relevant Provision.
- (r) The persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (1 of 1996)
- (s) The Clinical Establishment (Registration and Regulation) Act, 2010 (23 of 2010)

B. Practical: 40 hours

1. Demonstration: 35 Hrs

- (a) Weapons 5 hrs
- (b) Organic and inorganic poisons 5 hrs
- (c) Poisonous plants 5 hrs
- (d) Charts, diagrams, photographs, models, x-ray films of medico-legal importance **5 hrs**
- (e) Record of incidences reported in newspapers or magazines and their explanation of medico-legal importance **5 hrs**
- (d) Attending demonstration of ten medico-legal autopsies **10 hrs**

2. Certificate Writing: 5 hrs

Various certificates like sickness certificate, physical fitness certificate, birth certificate, death certificate, injury certificate, rape certificate, chemical analyzer (Regional Forensic Laboratory), certificate for alcohol consumption, writing postmortem examination report.

SCHEME OF EXAMINATION

A. Theory:

Number of Paper : 01

Maximum Marks : 100

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
			Maximum Marks	100

B. Practical including Viva Voce or Oral:

Maximum Marks = 100

1. Practical: 50 Marks

Sl. No	Skill	Marks
1	Practical record/Journal	10
2	Certificate writing	5
3	Instruments –one spotter	10
	Weapons – one spotter	10
4	Inorganic poisons-one spotter	5
5	Charts, diagrams, photographs, models, x-ray films of	5
	medico-legal importance	
6	Poisonous plants/vegetable poisons – one spotter	
	Animal poisons – one spotter	10
7	Bones/Specimens –one spotter	5

Each spotter/specimen division of marks (where ever is applicable)

- 1. Identification 1 mark
- 2. Medico legal importance 2 marks
- 3. Discussion 2 marks
- 2. Viva Voce or (Oral) Examination 50 marks

MARKS DISTRIBUTION

	Theory		Practical & Oral			Grand Total		
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Forensic Medicine & Toxicology	100	50	50	50	100	50	200	100

RECOMMENDED BOOKS

SI. No	Name of the Book	Author	Publisher
1.	Modi's Medical Jurisprudence & Toxicology	Modi	A.S.Pandya. N.M. Tripathi Pvt. Ltd.
2.	Forensic Medicine & Toxicology Vol. 1 & II (4 th Edition) - 2011	J.B.Mukherjee	Academic Publishers, Kolkata
3.	Parikh's Text book of Medical Jurisprudence, Forensic Medicine and Toxicology . th Edition) –(2012)	Parikh	CBS Publisher & Distributors, New Delhi
4.	Hand book of Forensic Medicine & Toxicology	K.Krishnan	Khotari books, Hyderabad
5.	Synopsis of Forensic Medicine & Toxicology (28 th Edition) (2014).	K.S. Narayana Reddy	Jaypee Brothers Medical Publishers. New Delhi.
6.	Medical Ethics, II Ed., 2004	Francis C. M	Jaypee Brothers, New Delhi.
7.	CCH Regulations and Acts Govt of India	40 M M M	CCH, New Delhi 1973.
8.	The essential of Forensic Medicine & Toxicology (33 rd Edition) - (2015)	Reddy KSN, Murthy OP	Jaypee Brothers Medical Publishers. New Delhi.

REFERENCE BOOKS

SI. No	Name of the Book	Author	Publisher
1.	Colour Atlas of Forensic Medicine (2 nd edition)	Govindiah D	Jaypee brothers Medical Publishers. New Delhi
2.	Modi A Text book Of Medical Jurisprudence & Toxicology (24 th edition)	Mathiharan. K & Amrit K Patnaik	Lexis Nexis Butterworth's India
3.	Practical Forensic Medicine (3 nd edition)	Nagesh Kumar G. Rao	Jaypee brothers Medical Publishers. New Delhi
4.	Text book of Forensic Medicine & Toxicology (2 nd edition)	Nagesh Kumar G. Rao	Jaypee brothers Medical Publishers. New Delhi
5.	Modern Medical Toxicology (4 th edition)	Pillay V. V	Jaypee Brothers medical publishers. New Delhi

HOMOEOPATHIC MATERIA MEDICA AND THERAPEUTICS

OBJECTIVES:

At The end of the course student shall be able to:

- a. List the methods of construction of Materia Medica. Enumerate the mode of action of drugs.
- b. Demonstrate the ability to apply Materia Medica in practical situation.
- c. Recall the drug picture of Medicines listed.
- d. Demonstrate the ability to develop the drug picture and demonstrate the knowledge of the relative importance of the individual drug (during First and Second Year).
- e. Compare and contrast the drugs listed and understand their relationship (during Third and Final Year).
- f. Demonstrate application of knowledge of Materia Medica in clinical practice (during Third and Final Year).

INSTRUMENTS:

- Homoeopathic Materia Medica is differently constructed as compared to other Materia Medica. Homoeopathy considers that the study of the action of drugs on individual parts or systems of the body of an animal on their isolated organs is only a partial study of life processes under such action and that it does not lead us to a full appreciation of the action of the medicinal agent; the drug substance as a whole is lost sight of under such circumstances.
- 2. Essential and complete knowledge of the drug action as a whole can be ascertained only by qualitative synoptic drug experiments on healthy persons and this alone can make it possible to view all the scattered data in relation to the psychosomatic whole of a person and it is just such a persona as a whole to whom the knowledge of drug action is to be applied.
- 3. The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship. Each drug should be studied synthetically, analytically and comparatively, and this alone would enable a

Homoeopathic student to study each drug individually and as a whole and help him to be a good prescriber.

4. Polychrests and the most commonly indicated drugs for every day ailments should be taken up first so that in the clinical classes or outdoor duties the students become familiar with their applications. These drugs should be thoroughly dealt with explaining all comparisons and relationships. Students should be conversant with their sphere of action and family relationship.

The less common and rare drugs should be taught in outline, emphasizing only their most salient features and symptoms. Rare drugs should be dealt with later.

5. Tutorials must be introduced so that students in small numbers can be in close touch with teachers and can be helped to study and understand Materia Medica in relation to its application in the treatment of the sick.

Group discussions, tutorials, workshops and seminars will open up new and effective avenues of learning the subject and same has to be taken advantage of. There should be a close interaction between the departments of Homoeopathic Philosophy, Pharmacy, Repertory and the Department of Materia Medica so that there is perfect synchronization, understanding and the unity of thinking and practice. All the departments should evolve a joint strategy so that the student understands clearly to integrate these subjects in practice without leaving any scope for confusion.

6. While teaching therapeutics, an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned. The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself to memorize a few drugs for a particular disease. This Hahnemannian approach will not only help him in understanding the proper perspective of symptoms as applied and their curative value in sickness but will even lighten his burden as far as formal examination are concerned. Otherwise the present trend produces the allopathic approach to treatment of diseases and is contradictory to the teaching of Organon.

Application of Materia Medica should be demonstrated from cases in the outdoor and hospital wards.

- Lectures on comparative Materia Medica and therapeutics as well as tutorials should be as far as possible be integrated with lectures on clinical medicine in the various departments.
- 7. For the teaching of drugs, the college should keep herbarium sheets and other specimens for demonstrations to the students and audiovisual material shall be used for teaching & training purposes. Lectures should be made interesting and slides of plants and materials may be projected.
- A. Introductory lectures: Teaching of Homoeopathic Materia Medica should include:
 - a. Nature and scope of Homoeopathic Materia Medica
 - b. Sources of Homoeopathic Materia Medica
 - c. Different ways of studying the Materia Medica
- B. The drugs are to be taught under the following heads:
 - 1. Common name, natural order, habitat, part used, preparation.
 - 2. Sources of drug proving
 - 3. Symptomatology of the drug emphasizing the characteristic symptoms and modalities.
 - 4. Comparative study of drugs.
 - 5. Complimentary, inimical, antidotal and concomitant remedies.
 - 6. Therapeutic applications (applied Materia Medica).
- C. A study of 12 Tissue Remedies according to Schussler's Biochemic System of Medicine.

1st Year BHMS HOMOEOPATHIC MATERIA MEDICA AND THERAPEUTICS

OBJECTIVES:

At the end of 1st year, the student shall be able to:

- 1. Define the terms 'Materia Medica' & 'HomoeopathicMateria Medica'.
- 2. Enumerate the Sources of Homoeopathic Materia Medica.
- 3. Describe the Basic Concept and Construction of various Materia Medica.
- 4. Explain the Construction of Homoeopathic Materia Medica.
- 5. List the types of Homoeopathic Materia Medica.
- 6. Classify Homoeopathic Materia Medica.
- 7. Discuss the Scope & Limitations of Homoeopathic Materia Medica.

COURSE CONTENT

A. Theory: 35 hours

General topics of Materia Medica: - (Including introductory lectures)

Basic Materia Medica – 10 Hours

Homoeopathic Materia Medica – 25 Hours

SI. No	Торіс	Hours	Marks Alloted
А	Basic Materia Medica	10 Hrs	
1	Definition of Materia Medica	1 hr	
2	Basic Concept of Materia Medica	2 hrs	11 marks
3	Basic construction of various Materia Medicas	7 hrs	
В	Homoeopathic Materia Medica	25 hrs	
1	Definition of Homoeopathic Materia Medica	1 hr	3 marks
2	Basic concept and construction of homoeopathic Materia Medica	5 hrs	10 marks
3	Classification of Homoeopathic Materia Medica	7 hrs	11 marks
4	Sources of Homoeopathic Materia Medica	6 hrs	10 marks
5	Scope and Limitations of Homoeopathic Materia Medica	6 hrs	5 marks

B. Examination: There shall be no examination in this subject in First B.H.M.S.

2nd Year BHMS

HOMOEOPATHIC MATERIA MEDICA AND THERAPEUTICS

OBJECTIVES:

At the end of 2nd year BHMS the student shall be able to:

- 1. Describe the Science & Philosophy of Homoeopathic Materia Medica.
- 2. List different ways of studying Homoeopathic Materia Medica.
- 3. List the Scope & Limitations of Homoeopathic Materia Medica.
- 4. Recall the Remedy Relationship of various drugs.
- 5. Compare & Contrast the drugs listed below.
- 6. Describe the Theory, History, Concept & Principles of Biochemic System of Medicine.
- 7. Recall the drug pictures of the medicines listed in **Appendix I and I A**.

Course content

A. Theory: 160 Hours

SI. No	Topic / chapters		Marks
		Allotted 20 hrs	18 marks
1.	In addition to syllabus of First B.H.M.S. Course, following shall be taught, name	ely:	
	Science and philosophy of Homoeopathic Materia Medica	3 hrs	5 marks
	 Different ways of studying Homoeopathic Materia Medica (e.g., Psycho-clinical, pathological, physiological, synthetic, comparative, analytical, remedy relationships, group study, portrait study etc.) 	3 hrs	5 marks
	3. Scope and limitations of Homoeopathic Materia Medica	4 hrs	
	4. Concordance or remedy relationships	3 hrs	3 marks
	 Comparative Homoeopathic Materia Medica, namely:- Comparativestudy of symptoms, drug pictures, drug relationships 	3 hrs	
	 Theory of biochemic system of medicine, itshistory, concepts and principles according to Dr. Wilhelm Heinrich Schuessler. Study of 12 biochemic medicines (tissue remedies). 	4 hrs	5 marks
2.	Homoeopathic Medicines to be taught in Second BHMS as per Appendix – I and Appendix – I A	140 hrs	

APPENDIX - I:

While teaching major remedies an emphasis should be made on the following points;

- 1) Keep a Holistic approach to the remedy.
- 2) Detailed teaching should include;
 - a) Sphere of action & pathogenesis, Physical constitution, Thermals,
 Ailments from/Causations, Mental symptoms, Characteristic symptoms,
 Particular symptoms under the following headings
 - Location
 - Sensation
 - Modalities
 - Concomitants

General Modalities

- b) Common name, Family, Source, Alkaloids, Clinical indications, Comparison and Relationship.
- c) Part used, Preparation, Collection, Prover, Habitat, Diathesis, Temperament, Miasmatic background, Therapeutic application.

APPENDIX – I: Major Remedies (114 hours)

20 Marks

SI.	Medicines	SI. No	Medicines
No			
1	Aconitum napellus	21	Ferrum phosphoricum
2	Aloe socotrina	22	Gelsemium
3	Antimonium crudum	23	Hepar sulphuricum
4	Antimonium tartaricum	24	Ipecacuanha
5	Apis mellifica	25	Kali phosphoricum
6	Argentum nitricum	26	Kali sulphuricum
7	Arnica Montana	27	Ledum palustre
8	Arsenicum album	28	Lycopodium clavatum
9	Baptisia tinctoria	29	Natrum muriaticum
10	Bryonia alba	30	Natrum sulphuricum
11	Calcarea carbonica	31	Nux vomica
12	Calcarea fluorica	32	Pulsatilla
13	Calcarea phosphoric	33	Rhus toxicodendron
14	Calcarea sulphurica	34	Silicea
15	Chamomilla	35	Spongia tosta
16	Cina	36	Sulphur
17	Cinchona officinalis	37	Thuja occidentalis
18	Colchicum autumnale		
19	Colocynthis		
20	Dulcamara		

APPENDIX – I A: (26 hours)

12 Marks

The following minor remedies will be learnt with focus on points given against the respective Remedies;

APPENDIX – I A: Minor Remedies

Sl.No	Торіс	Focus area
1	Aethusa cynapium	Baby, cholera, epilepsy
2	Allium cepa	Nasal symptoms, colic, Neuralgia, cough, Menses
3	Aurum tryphyllum	Respiratory
4	Bellis perrenis	Injuries & Characteristic symptoms
5	Calendula officinalis	Injuries
6	Drosera	Respiratory complaints
7	Euphrasia	Eye, fever, menses
8	Hypericum	Injuries, asthma
9	Kali muriaticum*	Catarrhal manifestations & Characteristic symptoms
10	Magnesium phosphoricum*	Colic, Neuralgia
11	Natrum phosphoricum*	Gastro intestinal & Characteristic symptoms
12	Ruta graveolens	Injuries , rectal & Characteristic symptoms
13	Symphytum officinale	Injuries & Characteristic symptoms

^{*}These drugs are to be taught both as Biochemic & Homoeopathic drugs.

B. Practical or Clinical: 60 Hours

This will cover

- (i) Case taking of acute and chronic patients
- (ii) Case processing including totality of symptoms, selection of medicine, potency and repetition schedule

Each student shall maintain practical record or journal with record of five cases.

SCHEME OF EXAMINATION

The syllabus covered in first BHMS and second BHMS course are the considered for Examination.

A. Theory: Duration: 3 hours

Number of Paper : 01

Maximum Marks : 100

Distribution of Marks

Topics of I BHMS : 50 Marks

Topics of II BHMS : 50 Marks

Types of Question with Marks

Type of Questions	No. of Questions	of Questions No. of Questions		Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
		Maxim	ium Marks	100

B. Practical including Viva Voce or Oral:

Maximum Marks = 100

1. Practical: 50 Marks

Case	Case taking	Case analysis	Remedy selection	Total marks
Long	15	10	05	30
Short	05	03	02	10
Journal				10
Total				50

2. Viva-voce (Oral) Examination = 50 marks

MARKS DISTRIBUTION

	Th	eory		Practical	& Oral		Grand	Total
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Homoeopathic Materia Medica	100	50	50	50	100	50	200	100

RECOMMENDED BOOKS (FOR I & II B.H.M.S.)

Sl. No	Name of the Book	Author	Publisher
1.	Lectures on Homoeopathic Materia Medica	J.T. Kent	B. Jain
2.	Allen's Key Notes	Allen H.C.	B. Jain
3.	The twelve tissue remedies of Schuessler	Boericke & Dewey	B. Jain
4.	A textbook of Materia Medica	S.K. Dubey	B. Jain
5.	All in one Homoeopathic Materia Medica	Mohanty, Niranjan	B. Jain
6.	Text book of Homoeopathic Materia Medica	Mondal TC Vol. 1	Books and Allied (P) Ltd, Kolkata
7.	Homoeopathic Materia Medica	William Boericke	B. Jain

REFERENCE BOOKS

SI. No	Name of the Book	Author	Publisher
1.	Physiological Materia Medica. 3 rd Ed	Burt WH	B. Jain publishers (P) limited, New Delhi
2.	Clinical Materia Medica. 4 th Ed	Farrington EA	B. Jain publishers (P) limited, New Delhi
3.	Master Key to Homoeopathic Materia Medica	K.C. Bhanja	National Homoeo Laboratory, Kolkata
4.	Leaders in Homoeopathic therapeutics	E.B. Nash	Jain publishers (P) limited, New Delhi.
5.	Homoeopathic drug pictures	Tyler ML	B. Jain publishers (P) limited, New Delhi

III YEAR BHMS HOMOEOPATHIC MATERIA MEDICA AND THERAPEUTICS

OBJECTIVES:

At the end of III BHMS the student shall be able to:

- 1. Describe the Concept of Constitution, Temperament and Diathesis in the context of the listed medicines.
- 2. Describe the Group Features of the listed remedy groups.
- 3. Compare and Contrast the group characteristics among the listed remedy groups
- 4. Describe the Concept of Nosodes.
- 5. Describe the Concept of Mother Tincture.
- 6. Recall the Drug Pictures of the medicines listed in Appendix II and II A.

In addition to the drugs mentioned in First & Second Year B.H.M.S. the following additional medicines and topics are included in the syllabus of Materia Medica for the 3rd B.H.M.S. Examinations.

In the III and IV BHMS examination, the emphasis in teaching and examination should be on clinical, applied and comparative Materia Medica.

Course content

Theory: 100 hours

SI. No	Topic / chapters	Hours Allotted	Marks
		120 hrs	50
(A)	General Topics of Homoeopathic Materia Medica		
	In addition to the syllabus of first and second BHMS including the use of medicines for second BHMS (Appendix -1& I A) the following additional topics and medicines are included in the syllabus of Homoeopathic Materia Medica for the Third BHMS Examination.	2 hrs	
	 (a) Concept of nosodes – definition of nosodes, types of nosodes, general indications of nosodes. 		
	(b) Concepts of constitution, temperaments, diathesis –	4 hrs	
	Definitions, various concepts of constitution with their peculiar characteristics, importance of constitution, temperaments and diathesis and their utility in treatment of patients.		10
(B)	Concept of Mother Tincture Definition, list of mother tinctures with indications	2 hrs	
(C)	Homoeopathic Medicines to be taught in Third BHMS as in Appendix – II and II A	86 hrs	30
(D)	Group studies	6 hrs	10

Appendix-II:

While teaching major remedies an emphasis should be made on the following points;

- 1) Keep a wholistic approach to the remedy.
- 2) Detailed teaching should include;
 - a) Sphere of action & pathogenesis, Physical constitution, Thermals
 Ailments from/Causations, Mental symptoms, Characteristic symptoms,

Particular symptoms under the following headings

- Location
- Sensation

- Modalities
- Concomitants

General Modalities, Clinical indications, Relationship.

- b) Diathesis, Temperament, Miasmatic Background, Therapeutic application Comparison.
- c) Common name, Family, Source, Alkaloids, Part used, Preparation, Collection, Prover, Habitat.

Appendix-II: Major Remedies (46 hours)

20 Marks

Sl. No	Medicines	Sl. No	Medicines
1	Agaricus muscarius	20	Kreosotum
2	Alumina	21	Lachesis muta
3	Ammonium carbonicum	22	Naja tripudians
4	Anacardium orientale	23	Natrum carbonicum
5	Arsenicum Iodatum	24	Nitric Acid
6	Aurum metallicum	25	Nux Moschata
7	Baryta carbonica	26	Opium
8	Belladonna	27	Petroleum
9	Borax	28	Phosphoric Acid
10	Bovista lycoperdon	29	Phosphorus
11	Cannabis indica	30	Picric Acid
12	Carbo vegetabilis	31	Platinum Metallicum
13	Conium maculatum	32	Secale cornutum
14	Crotalus horridus	33	Sepia
15	Ferrum metallicum	34	Staphysagria
16	Graphites	35	Stramonium
1 <i>7</i>	Ignatia amara	36	Syphilinum
18	Kali bichromicum	37	Veratrum album
19	Kali carbonicum		

Appendix-IIA: (40 hours)

The following minor remedies shall be learnt with focus on points given against the respective remedies.

Appendix-II A: Minor Remedies

10 Marks

No	Remedy	Focus area
1	Acetic acid	GIT, Fever & Debility, Dropsy
2	Actea spicata	Rheumatism
3	Agnus castus	Mind, Genitals- male & female.
4	Ambra grisea	Nervous affections ,Mind and Female
5	Ammonium mur	Constitution, Respiratory, Female & guiding symptoms.
6	Apocyanum	Dropsy, GIT
7	Asafoetida	Mind, GIT, Bones
8	Benzoic acid	Urogenitals system, Gout
9	Berberis vulgaris	Urinary & GIT
10	Bismuth	GIT & Mind
11	Bromium	Respiratory, Glands
12	Bufo rana	Mind &Nervous system, Convulsions, Genitourinary
13	Cactus	Heart, Fever &guiding symptoms
14	Caladium	Genitals &guiding symptoms
15	Calcarea ars	Convulsions &guiding symptoms
16	Camphora	GIT &guiding symptoms
17	Cannabis sativa	Urogenital, mentals &guiding symptoms
18	Cantharis	Urinary system, Skin&guiding symptoms
19	Chelidonium	GIT, Respiratory&guiding symptoms
20	Croton tig	GIT & Skin
21	Cyclamen	Female Genitals &guiding symptoms
22	Digitalis	Heart&guiding symptoms
23	Dioscorea	GIT, &guiding symptoms
24	Equisetum	Urinary
25	Helleborus	Mind, Head, CNS
26	Hyoscyamus	CNS, Mind, Cough
27	Kali brom	Nervous system and Skin
28	Moschus	Mind, GIT
29	Murex	Female, mentals and guiding symptoms
30	Muriatic acid	Debility, GIT, Typhoid
31	Oxalic acid	Mind, Urinary and guiding symptoms
32	Phytolacca	Joints, Glands, Throat and Female
33	Podophyllum	GIT, fever & guiding sympyoms
34	Selenium	Male and Guiding symptoms
35	Sulphuric acid	Debility, GIT and Guiding symptoms

36	Tabacum	GIT, Eye, Vertigo and Urinary
37	Taraxacum	Tongue and GIT
38	Tarentula cubens	Skin and Mind
39	Terebinthina	Urinary and GIT
40	Theridion	Vertigo, Air sickness
41	Thlaspi bursa pastoris	Female and guiding symptoms

Group Studies: 10 Marks

The following groups should be studied under the following headings;

Introduction, sphere of action, ailments from, mental, general characteristics, list of remedies in the group & general modalities, Clinical Application, Compare & Contrast study.

List of Groups			
Acid group			
Carbon group			
Kali group			
Ophidia group			
Mercurius group			
Spider group			

B. Practical including clinical training -75 Hours

- (1) This will cover:-
 - (a) Case taking of acute and chronic patients
 - (b) Case processing including selection of medicines, potency and repetition schedule.
- (2) Each student shall record at least 10 cases during the clinical posting.

During III year, students should be posted to hospital where they should be taught apart from case taking, evolving the totality, establishing the similarity between the symptoms of the patient and the drug.

- a. To assess the miasmatic presentation of the case and establish the relationship between portraits of drugs and patients.
- b. They should be taught remedy relationship and their application in practical situation and to come to a conclusion of simillimum.

SCHEME OF EXAMINATION

The Topics included in the syllabus of the preceding year/s shall be added to the syllabus and Examination of the succeeding year.

A. Theory: 100 Marks Duration: 3 Hours

Number of Paper : 01

Maximum Marks : 100

Distribution of Marks : Topics from Second BHMS - syllabus:- 50 Marks

Topics from Third BHMS syllabus:- 50 Marks

Types of Question with Marks

Type of Questions	No. of Questions Asked	No. of Questions to be attempted	Marks per Question	Total
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
		Maxin	num Marks	100

B. Practical including Viva Voce or Oral:

Maximum Marks = 100

1. Practical: 50 Marks

Case	Case	Case	Miasmatic	Remedy	Remedy	Total marks
	taking	analysis	Analysis	differentiation	selection	
Long	08	05	05	07	05	30
Short	03	02	00	03	02	10
Journal						10
Total						50

2. Viva-Voce (Oral) Examination = 50 marks

MARKS DISTRIBUTION

	Theory		Practical & Oral				Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Homoeopathic Materia Medica and Therapeutics	100	50	50	50	100	50	200	100

IV YEAR BHMS

HOMOEOPATHIC MATERIA MEDICA AND THERAPEUTICS

OBJECTIVES:

At the end of completing the fourth BHMS, the students will be able to-

- 1. Describe the Concept of Constitution, Temperament and Diathesis in the context of the listed Medicines.
- 2. Describe the Personality Types, Miasmatic Trends and Therapeutic Utility of the medicines listed.
- 3. Describe the Group Features of the listed remedy groups.
- 4. Compare and Contrast the group characteristics among the listed remedy groups.
- 5. Describe the Concept of Nosodes.
- 6. Describe the Concept of Mother Tincture and illustrate the Clinical Application of Mother Tinctures.
- 7. Recall the Drug Pictures of the Medicines listed in **Appendix III and III A.**

Course Content

A. Theory -180 Hrs.

SI. No	Topic / chapters	Hours Allotted	Marks
		180 hrs	100
(A)	In addition to the topics mentioned in First, Second & Third Year B.H.M.S. including the Medicines taught as per the Appendices I, I A, II& II A, the follo wing additional topics and Medicines are included in the syllabus of Materia Medica for the Fourth B.H.M.S.		
	Examinations.		
	 General Topics of Homoeopathic Materia Medica – Sarcodes – definition and general indications. 		10
	 Medicines indicated in App endix III& III A shall be taught in relation to the Medicines of Appendices -I, I A, II& II A for comparison wherever required. 		80

	 In the Third and Fourth BHMS examination, the emphasis in teaching and examination should be on clinical, applied and co mparative Materia Medica. 	-
(B)	Group Studies	10

In addition to the topics mentioned in First, Second & Third Year B.H.M.S. including the Medicines taught as per the Appendices I, I A, II & II A, the following additional topics and Medicines are included in the syllabus of Materia Medica for the Fourth B.H.M.S. Examinations.

- A. General Topics of Homoeopathic Materia Medica Sarcodes definition and general indications.
- B. Medicines indicated in Appendix III& III A shall be taught in relation to the Medicines of Appendices –I, I A, II& II Afor comparison wherever required.
- C. In the Third and Fourth BHMS examination, the emphasis in teaching and examination should be on clinical, applied and comparative Materia Medica.

Appendix-III:

While teaching major remedies an emphasis should be made on the following points;

- 1) Keep a wholistic approach to the remedy.
- 2) Detailed teaching should include;
 - a) Sphere of action & pathogenesis, Physical constitution, Thermals, Ailments from/Causations, Mental symptoms, Characteristic symptoms, Particular symptoms under the following headings
 - Location
 - Sensation
 - Modalities
 - Concomitants

General Modalities, Clinical indications, Comparison, Relationship

- b) Diathesis, Temperament, Miasmatic Background, Therapeutic application
- c) Common name, Family, Source, Alkaloids, Parts used, Preparation, Collection, Prover, Habitat.

Appendix-III: Major Remedies (100 Hours)

40 Marks

SI. No	Medicines	SI. No	Medicines	SI. No	Medicines
1	Carbo animalis	14	Sanicula aqua	27	Asterias rubens
2	Fluoricum acidum	15	Sabadilla officinalis	28	Iodium
3	Magnesia carbonica	16	Sambucus nigra	29	Argentum metallicum
4	Magnesia muriatica	17	Lithium carbonicum	30	Cuprum metallicum
5	Anthracinum	18	Cocculus indicus	31	Plumbum metallicum
6	Bacillinum	19	Lillium tigrinum	32	Zincum metallicum
7	Lac caninum	20	Sabina	33	Mercurius corrosives
8	Lyssin	21	Cicuta virosa	34	Mercurius solubilis
9	Medorrhinum	22	Ranunculus bulbosus	35	Causticum
10	Psorinum	23	Coffea cruda	36	Carcinosin
11	Pyrogenium	24	Glonoine	37	Stannum metallicum
12	Mezereum	25	Sanguinaria Canadensis		
13	Abrotanum	26	Spigelia		

Appendix-III A:

The following minor remedies shall be learnt with focus on points given against the respective remedies.

Appendix-III A: Minor Remedies (80 hours)

40 Marks

SI.	Topic	Focus Area
No		
1	Abies Canadensis	GIT
2	Abies nigra	GIT
3	Carbolic acid	General characteristics, GIT & female
4	Cundurango	GIT & general characteristics
5	Hydrastis can	General characteristics, GIT female & respiratory
6	Raphanus sat	Mind, GIT
7	Lac defloratum	Head & GIT
8	Vaccininum	General characteristics
9	Variolinum	Skin
10	Hydrocotyle	Skin & female
11	Radium brom atum	General characteristics, Skin, & GIT

12	Urtica urens	Skin, female & General characteristics
13	Vinca minora	Skin, Head
14	Rheum	Child, GIT
15	Acalypha indica	GIT, Respiratory
16	Corrallium r	Respiratory, Skin
17	Lobelia inflata	Respiratory, GIT, Head
18	Mephites	Respiratory , Head
19	Rumex crispus	GIT, respiratory & skin
20	Squilla	Respiratory
21	Baryta mur	General characteristics, , CVS
22	Crataegus	General characteristics, , CVS
23	Rauwolfia	Heart, CVS
24	Caulophyllum	Mind, female & joints
25	Crocus sativus	General characteristics, , Mind, Female & Hemorrhage
26	Helonias	General characteristics & female
27	Trillium p	Female & general characteristics
28	Viberinum op	Female & general characteristics
29	Rhododendron	Extremeties & general characteristics
30	Clematis erecta	Urogenitals
31	Sabal serrulata	Urogenitals
32	Sarsaparilla	Urogenitals, skin &GIT
33	Mellilotus	Head, Hemorrhages
34	Millefolium	Head, Hemorrhages & female.
35	Veratrum viride	Head, CVS
36	Capsicum	General characteristics, , Mind, GIT,
37	Cedron	Head, Fever
38	Eupetorium perf	General characteristics, Head, Respiratory S, Fever
39	Abroma augusta	Urinary symptoms
40	Calatropis	Skin
41	Carica papaya	GIT & female
42	Cassia sophera	Extremities, Respiratory
43	Ficus religiosa	Hemorrhage & female.
44	Jonosia asoka	Female
45	Justicia adhatoda	Respiratory
46	Occinum sanctum	Respiratory
47	Syzigium jamb	Urinary , skin
48	Ratanhia	Rectal symptoms
49	Collinsonia canademvi	GIT
50	Antimonium ars	Respiratory
51	Sticta pulm	Respiratory & Extremities
52	Thyroidinum	General characteristics, , Heart, Urinary & Skin
53	Adonis vernalis	Heart

54	Kalmia lat	Heart, Extremities
55	Physostigma	Eyes, Head, Nervous affections
56	Merc cynatus	Throat
57	Merc dulcis	Throat, GIT, Ear
58	Merc sulp	Respiratory
59	Bacillus No 7	General characteristics
60	Dysenery Co	General characteristics
61	Gaertner	General characteristics
62	Morgon Pure	General characteristics
63	Morgen Gaertner	General characteristics
64	Propeus B	General characteristics
65	Sycotic B	General characteristics
66	Aesculus hip	GIT, extremities
67	Adrenalinum	General characteristics
68	Artimesia vulg	Head &General characteristics
69	Avena sativa	General characteristics & weakness
70	Blatta orien	Respiratory
71	Cardus mar	GIT
72	Ceonathus	Abdomen
73	Chininum ars	Head, GIT, Heart, Fever
74	Cholestrinum	Abdomen
75	Coca	Respiratory S, Head, GIT
76	Diptherinum	Throat, Respiratory S
77	Erigeron	Female
78	Malandrinum	Skin
79	Menyanthes	Head
80	Onosmodium	Head, Eyes
81	Passiflora	Mind, Nervous affections
82	Ustilago	Female
83	Valeriana	Mind, GIT, Extremities
84	X-ray	Head, Skin

B. Group studies:

10 Marks

The following groups should be studied under the following headings;

Introduction, sphere of action, ailments from, mental, general characteristics, list of remedies in the group & general modalities, Clinical Application, Compare & Contrast study.

List of Groups
Baryta group
Calcarea group
Magnesia Group
Natrum Group
Compositae family
Ranunculacae family
Solonaceae family

B. Practical (including clinical, tutorials and seminars): 150Hours

During IV year, students should be posted to hospital where they should be taught apart from case taking, evolving totality, establishing the similarity between the symptoms of the patient and the drug.

- a. To assess the miasmatic presentation of the case and establish the relationship between portraits of drugs and patients.
- b. They should be taught remedy relationship and their application in practical situation and to come to a conclusion of similimum.

Each student shall maintain a Journal having record of at least 20 cases (10 acute + 10 chronic) during the clinical posting.

SCHEME OF EXAMINATION

A. Theory:

a. Two Theory Papers: 100 marks each of 03 hours each.

Distribution of Marks

1. Paper I - topics of First Year (10 marks), Second Year (30 marks) & Third Year (60 marks) = 100 Marks

2. Paper II- topics of Fourth BHMS = 100 Marks

Types of Question with Marks

Type of Questions	No. of Questions Asked	No. of Questions to be attempted	Marks per Question	Total
Long Essays	02	02	10	20
Short Essays	12	10	Ω5	50
Short Answers	10	10	03	30
		Maxin	num Marks	100

B. Practical including Viva –Voce or Oral

Marks

Distribution of marks

Maximum Marks: 200 Marks

1. Practical: 100 Marks

Case	Case taking	Case analysis	Miasm analysis	Remedy differentiation	Remedy selection	Total
Long	16	10	10	14	10	60
Short	06	04	00	06	04	20
Journal		·	_	-		20
Total						100

2. Viva Voce (Oral) Examination: 100 Marks

MARKS DISTRIBUTION

	Th	Theory Practic			l & Oral		Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Homoeopathic Materia Medica and Therapeutics	200	100	100	100	200	100	400	200

RECOMMENDED BOOKS (FOR III AND IV B.H.M.S.)

SI. No.	Name of the Book	Author	Publisher	
1.	Lectures on Homoeopathic Materia Medica.	J.T. Kent	B. Jain	
2.	Homoeopathic drug pictures	M.L. Tyler	B. Jain	
3.	Leaders in Homoeopathic therapeutics	E.B. Nash	B. Jain	
4.	A Dictionary of Practical Materia Medica	Clarke J. H.	B. Jain	
5.	Physiological Materia Medica.	William Burt	B. Jain	
6.	Allen's Key Notes	Allen H.C.	B. Jain	
7.	Synoptic Key	C.M. Boger	B. Jain	
8.	The twelve tissue remedies of Schuessler	Boericke & Dewey	B. Jain	
9.	Master Key to Homoeopathic Materia Medica.	K.C. Bhanja	National Homoeo Laboratory, Kolkata	
10.	A study on Materia Medica	N.M. Choudhuri	B. Jain	
11.	Clinical Materia Medica	E.A. Farrington	B. Jain	
12.	Comparative Materia Medica	Farrington	B. Jain	
13.	Textbook of Materia Medica	S.K. Dubey	B. Jain	
14.	Homoeopathic Materia Medica	William Boericke	B. Jain	
15.	Homoeopathic Psychology-Personality profiles of the major constitutional remedies	P M Bailey	B. Jain	

REFERENCE BOOKS

SI. No.	Name of the Book	Author	Publisher
1.	Dasgupta Characterstic Materia Medica	Das Gupta	Roy Publications
2.	Textbook of Homoeopathic Materia Medica	Otto Lesser	B. Jain Publishing, New Delhi
3.	The Materia Medica Pura, 2 Volumes	Hahnemann	B. Jain Publishing, New Delhi
4.	Portraits of Homoeopathic Medicines, 3 Volumes	Coulter CR	North Atlantic Books, Berkley CA
5.	The Guiding symptoms of the Materia Medica, 10 Volumes	C. Hering	B. Jain Publishing, New Delhi
6.	The Encyclopedia of Pure Materia Medica, 12 Volumes	T F Allen	

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Instructions:

- I (a) Organon of Medicine with Homoeopathic Philosophy is a vital subject which builds up the conceptual base of the physician:
 - (b) It illustrates those principles which when applied in practice enable the physician to achieve results, which he can explain logically and rationally in medical practice with greater competence:
 - (c) Focus of the education and training should be to build up the conceptual base of homoeopathic philosophy for use in medical practice.
- II Homoeopathy should be taught as a complete system of medicine with logical rationality of its holistic, individualistic and dynamistic approach to life, health, disease, remedy and cure.
- III. (a) It is imperative to have clear grasp of inductive and deductive logic, and its application and understanding of the fundamentals of Homoeopathy;
 - (b) Homoeopathic approach in therapeutics is a holistic approach and it demands a comprehension of patient as a person, disposition, state of his mind and body, along with study of the disease process and its causes;
 - (c) Since Homoeopathy lays great emphasis on knowing the mind, preliminary and basic knowledge of the psychology becomes imperative for a homoeopathic physician and introduction to psychology will assist the student in bulding up his conceptual base in this direction.
- IV The Department of Organon of Medicine shall co-ordinate with other departments where students are sent for the pre-clinical and clinical training and this will not only facilitate integration with other related departments, but also enhance the confidence of the students when they will be attending speciality clinics

Objectives:

At end of the course the student shall be able to

1 Build Conceptual base of Homoeopathy.

- 2 Recall the Basic Principles, which can be applied in practice.
- 3 List the Fundamental Principles of Homoeopathy.
- 4 List the Pioneers of Homoeopathy and give briefly the Contributions of various Pioneers.
- 5 Critically Analyze and Evaluate the writings in Homoeopathy in the light of Psychology, Logic, Philosophy, Science and Medicine and understand the Principles of Homoeopathy.
- Integrate and Synchronize the Principles of Homoeopathy with the learning from contemporary medical sciences.
- 7 Apply the learning for the individual and social well-being.
- 8. Contribute effectively as an alternative and complementary Homoeopathic Practitioner.

1st YEAR BHMS

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Course Contents

A. Theory: 35 hours

SL. No	TOPIC / CHAPTERS	HOURS ALLOTTED	Marks
I	Introductory Lectures	10 hours	10
1.1	Evolution of Medical Practice of ancients (Prehistoric Medicine, Greek Medicine, Chinese Medicine, Hindu Medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts		
1.2	Short history of Hahnemann's Life and his contributions and discovery of Homoeopathy		
1.3	Brief history and contributions of early pioneers –Boenninghausen, Kent, Rajendralal Dutta, M. L. Sircar, C. Hering	-	
1.4	History and development of Homoeopathy in India, USA, Europe		
1.5	Fundamental Principles of Homoeopathy		
1.6	Basic concept of 1.6.1. Health – Hahnemann's concept and modern concept 1.6.2. Disease – Hahnemann's concept and modern concept 1.6.3. Cure		
1.7	Different editions and constructions of Hahnemann's Organon of Medicine	1	
П	Logic -with reference to S.Close chapter 3 and 16	10 hrs	15
Ш	Psychology	7 hrs	15
3.1	Basic of Psychology		
3.2	Study of Behaviour and Intelligence		
3.3	Basic concept of Sensations		
3.4	Emotion, Motivation, Personality, Anxiety, Conflict, Frustration, Depression, Fear, Psychosomatic manifestations		
3.5	Dreams		
IV	Aphorisms 1 to 28 of Organon of Medicine		
V	Homoeopathic Prophylaxis	8 hrs	10

B. Examination: There shall be no examination in this subject in First Year BHMS. RECOMMENDED BOOKS

SI. No.	Name of the Book	Author	Publisher
1	Organon of Medicine Sixth Edition	Samuel Hahnemann	B. Jain Publishers, New Delhi
2	A comprehensive principles of homoeopathy	Garth Boericke	World homoeopathic links, Post Box 5775, New Delhi 110 055.
3	Organon of Medicine (5th & 6th edition) with commentary	B.K. Sarkar	M. Bhattacharya & Co. Pvt. Ltd., Kolkata - 700 001.
4	Genius of Homoeopathy	S. Close	B. Jain Publishers, New Delhi
5	Pioneers of Homoeopathy	Mahendra Singh	Dr. Indo Manish Homoeopathic Publications, Kolkata
6	Medicine – the voyage through time	Arun Bhasme	_
7	Educational Psychology	S. K. Mangal	Tandon Publications, Ludhiana

REFERENCE BOOKS

SI. No.	Name of the Book	Author	Publisher
1	Samuel Hahnemann - His life and work	Richard Haehl	B. Jain Publishers, New Delhi
2	A compend of the principles of Homoeopathy	W.M. Boericke	B. Jain Publishers, New Delhi
3	First corrected re-translated & retranslated and redacted edition of of Organon of Medicine 6th and 5th edition by Samuel Hahnemann	Dr. Mahendra Singh & Dr. Subhas Singh	Dr. Indo Manish Homoeopathic Publications, Kolkata
4	Introduction of Psychology	Norman L. Munn	Oxford & IBH Publishing Co.
5	Essentials of Psychology	M.B. Ghorpade	Himalaya Publishing House, Bombay.
6	Science of Logic	John H. Piot	
7	A textbook of Advanced Educational Psychology	S. Dandapani	Anmol Publications Pvt. Ltd., New Delhi
8	History of Homoeopathy	Mahendra Singh	B. Jain Publishers, New Delhi
9	History of Homoeopathy in India	Ghosh	B. Jain Publishers, New Delhi

2ndYEAR BHMS

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Course Contents:

A. Theory: 160 Hours

Sl. No	Topic / chapters	Hours allotted	Marks
1	Aphorism 29-104 including foot notes of Organon of Medicine	60 hrs	30 marks
	(5th & 6th Editions translated by R.E. Dudgeon and W. Boericke).		
2	Homoeopathic Philosophy:	100 hrs	20 marks
	2.1 Chapters of Philosophy books of J.T. Kent (Chapters 1 to 17,23 to 27, 31 to 33) Stuart Close (Chapters- 8,9, 11,12) and H.A. Roberts (Chapters 3,4,5,6, 8, 9, 11, 17, 18,19,20), related to Aphorisms 30,104 of Organics of Madicine.	80 hrs	-
	29-104 of Organon of Medicine 2.2 Symptomatology:	4 hrs	
	Details regarding Symptomatology are to be comprehended by referring to the relevant aphorisms of Organon of Medicine and chapters of the books on Homoeopathic Philosophy.	41115	-
	2.3 Causations: Thorough comprehension of the evolution of disease, taking into account pre-disposing, fundamental, exciting and maintaining causes.	4 hrs	-
	2.4 Case taking The purpose of homoeopathic case taking is not merely collection of the disease symptoms from the patient, but comprehending the patient as a whole with the correct appreciation of the factors responsible for the genesis and maintenance of illness. Hahnemann's concept and method of case taking, as stated in this Organon of Medicine is to be stressed upon	6 hrs	-
	2.5 Case Processing: This includes, (i) Analysis of symptoms (ii) Evaluation of Symptoms (iii) Miasmatic diagnosis. (iv) Totality of symptoms	6 hrs	-

B. Practical (including clinical, tutorial & seminars): 60 Hours

- 1. Clinical posting of students shall be started from Second B.H.M.S. onwards.
- 2. Each student shall maintain case records of at least ten acute cases.

During II year, the students should be posted to hospital and clinical teaching should be oriented towards case taking, analysis of case, analysis and evaluation of symptoms, and making the portrait of the disease or totality of symptoms.

Case taking:

The purpose of Homoeopathic case taking is not merely collection of symptoms but comprehending the patient in wider dimensions with the correct appreciation of the factors responsible for the genesis and maintenance of illness i.e. Fundamental cause, Predisposing cause, Maintaining cause and One-sided diseases.

Classification of symptoms:

Symptom should not be considered superficially at its face value. It should be analysed and evaluated by taking into account following factors:

- I. Thorough grasp over the underlying dynamics. (Psychological, Physiological and Pathological aspects).
- ii. This would demand thorough comprehension over the evolution of disease, taking into account fundamental, exciting and maintaining causes.
- iii. Knowledge of socio-cultural background is quite imperative for correct analysis and evaluation. Details regarding symptomatology can be comprehended by referring to the classical books in philosophy.

Evaluation:

- I. To individualize the case so as to prepare an effective totality which allows us to arrive at the similimum, prognosis of the case and advise management and impose necessary restrictions on mode of life and diet.
- ii. State of susceptibility can be inferred by appreciating the quality of characteristics. State of susceptibility and diagnosis about miasmatic state would allow physician to formulate comprehensive plan of treatment.
- iii. Order of evaluation of the characteristics of the case would become stepping stone for the Repertorial totality.

SCHEME OF EXAMINATION

A. Theory:

Number of Paper : 01

Maximum Marks : 100

Distribution of Marks

Introductory Lectures with fundamentals of Homoeopathy 10 marks

Logic 15 marks

Psychology 15 marks

Aphorisms 1 to 28 10 marks

Aphorisms 29 to 104 30 marks

Homoeopathic philosophy 20 marks

Total 100 Marks

Types of Question with Marks

Type of Questions	No. of Questions Asked	No. of Questions to be attempted	Marks per Question	Total
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks				100

B. Practical including Viva Voce or Oral: Maximum Marks: 100

1. Practical: 50 Marks

1) Case taking and case processing 40

2) Maintenance of Practical record or journal 10

2. Viva Voce (Oral) Examination: 50 Marks

MARKS DISTRIBUTION

	The	ory		Practical & Oral				Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks	
Organon of Medicine	100	50	50	50	100	50	200	100	

RECOMMENDED BOOKS

SI. No	Name of the Book	Author	Publisher
1.	Organon of Medicine 6 th edition	Samuel Hahnemann	A. Jain Publishers, New Delhi
2.	Lectures on Homoeopathic	J.T. Kent	B. Jain Publishers,
2.	Philosophy		New Delhi
2	A compend of the principles of	Garth Boericke	A. Jain Publishers,
3.	Homoeopathy		New Delhi
4	Organon of Medicine (5 th & 6 th	B.K. Sarkar	M. Bhattachary & Co.
4.	edition) with commentary		
_	Principles and Art of cure by	H.A. Roberts	B. Jain Publishers
5.	Homoeopathy		
6.	The Genius of Homoeopathy	Stuart Close	B. Jain Publishers

REFERENCE BOOKS

SI. No	Name of the Book	Author	Publisher
1	Homoeopathy - The Science of Therapeutics	Carrol Dunham	B. Jain Publishers
2	Principles and Practice of Homoeopathy	Richard Hughes	B. Jain Publishers
3	First corrected re-translated & redacted edition of Organon of Medicine 6th & 5th edition by Samuel Hahnemann	Dr. Mahendra Singh & Subhas Singh	Dr. Indo Manish Homoeopathic Publications, Kolkata
4	A brief study course in Homoeopathy	Elizabeth Hubbard	B. Jain Publishers

III YEAR BHMS

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

When student enters third year, he has already grasped basic sciences of Anatomy, Physiology, Pathology, and has been introduced to Clinical Medicine, Surgery, Gynaecology and Obstetrics. Organon including Philosophy is the subject, which builds up the conceptual base for the physician. It illustrates those principles which when applied in practice enable Physician to obtain results which he can explain rationally and repeats them in practice with greater competence. Focus of the education and training should be to build this conceptual base. This can be delivered effectively if there is proper integration of various disciplines, various knowledge throughout the subject of ORGANON-PHILOSOPHY. The following should be elucidated.

In addition to revision of Aphorisms studied in First B.H.M.S. and Second B.H.M.S. the following shall be covered, namely:-

Course Contents

A. Theory: 100 Hours

Sł.	Topic / chapters	Hours	Marks
No		allotted	
1	Hahnemann's Prefaces and Introduction to Organon of Medicine.	5 hrs	5 marks
2	Aphorism105 to 294 of Hahnemann's Organon of medicine, including foot notes (5 th and 6 th Editions translated by R.E. Dudgeon and W. Boericke).	50 hrs	30 marks
3	Chapters of Philosophy books of J.T. Kent (Chapters 28,29, 30, 34, to 37) Stuart Close (Chapters- 7,10,13,14,15) & H.A. Roberts (Chapters-7,10,12 to 19,21, 34) related to 105- 294 Aphorisms of Organon of Medicine.	45 hrs	20 marks

B. Practical including clinical/tutorial/seminar -75 Hours.

During III B.H.M.S. students are posted to hospital where they are taught case taking, analysis and evaluation of symptoms, making the portrait of the disease or totality of symptoms.

Apart from this, the students must be taught to correlate the knowledge of basic sciences of Anatomy, Physiology, Pathology, Medicine, Obst &Gyn, and Surgery

with the knowledge of Homoeopathic philosophy so as to understand the theory of chronic miasms and apply it in practice. This will demand comprehension of evolution of natural disease from miasmatic angle.

Students are also taught selection of the drug and posology.

Students should maintain the practical record book of 20 cases where in thoroughly worked out cases from their clinical attendance should be recorded which should demonstrate: Case taking, analysis and evaluation of symptoms, disease diagnosis, miasmatic diagnosis, selection of remedy and potency.

Each student appearing for Third B.H.M.S. examination shall maintain records of 20 cases - (10 acute and 10 chronic cases).

SCHEME OF EXAMINATION

A. Theory:

Number of Paper : 01

Maximum Marks : 100

Distribution of Marks

Aphorism 1 to 294 60 marks

Homoeopathic Philosophy 40 marks

Total 100 Marks

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks	•	•	•	100

B. Practical including Viva Voce or Oral:

Maximum Marks: 100

1. Practical: 50 Marks

1) Case taking and case processing 40

2) Maintenance of Practical record or journal 10

C. Viva Voce (Oral) Examination: 50 Marks

MARKS DISTRIBUTION

	The	огу		Practica	l & Oral		Grand Total		
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks	
Organon of Medicine	100	50	50	50	100	50	200	100	

IV YEAR BHMS

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Here the focus is on applied aspect of Organon and Philosophy. Maximum emphasis shall be given on practical oriented teaching. This can be effectively achieved by studying the various cases taken by students in OPD and IPD.

Case analysis, evaluation and synthesis taken into account the application of entire Organon from Aph. 1 to 294 and all principles of philosophy as illustrated in I, II, III B.H.M.S.

More emphasis to be given on Case taking, Case analysis, Evolution, Posology, Miasmatic diagnosis, Potency selection, Repetition of doses, Second prescription, Diet, Regimen and other measures with principle of management during OPD and IPD visits, so that students can have practical knowledge of treatment and management of patient.

In addition to the syllabus of First B.H.M.S, Second B.H.M.S and Third B.H.M.S. the following shall be covered, namely:-

Course Contents

A. Theory: 180 Hours

SL. No	TOPIC / CHAPTERS	HOURS ALLOTTED	MARKS
1	Evolution of Medical practice of the ancients (Prehistoric Medicine, Greek Medicine, Chinese medicine, Hindu Medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts.	5 hrs	-
2	Revision of Hahnemann's Organon of Medicine (Aphorism 1 to 294) including footnotes (5th & 6th Editions translated by R.E. Dudgeon and W. Boericke).	55 hrs	100 marks
3	Homoeopathic Philosophy: Philosophy books of Stuart close (Chapters- 1,2,4,5,6,8,17), J.T. Kent (Chapters- 18 to 22) and H.A. Roberts (Chapters-1 to 5, 20, 22 to 33, 35) Richard Hughes (Chapters-1 to 10) and C. Dunham (Chapters- 1 to 7)	75 hrs	50 marks

4	Chronic Diseases:	45 hrs	50 marks
	Hanemann's Theroy of Chronic Diseases.		
	J.H. Allen's The Chronic Miasms- Posra and Pseudo- Psora; Sycosis		
	a) Emphasis should be given on the way in which each miasmatic state		
	evolves and the characteristic expressions are manifested at various		
	levels and attempt should be made to impart a clear understanding of		
-	Hahnemann's theory of chronic miasms.		
-	b) The Characteristics of the miasms need to be explained in the light of		
	knowledge acquired from different branches of medicine.		
	c) Teacher should explain clearly therapeutic implications of theory of		
	chronic miasms in practice and this will entail a comprehension of		
	evolution of natural disease from miasmatic angle, and it shall be		
	correlated with applied Materia Medica.		

B. Practical including Clinical / Tutorial / Seminar: 150 Hours

During IV B.H.M.S. students are posted to hospital where they are taught the application of entire Organon from aphorism 1 to 294 and all principles of Homeopathic Philosophy as illustrated in I, II, III BHMS.

More emphasis is given on case taking, case analysis, evaluation of symptoms, miasmatic diagnosis, selection of drug and potency, assessment of prognosis, repetition of doses, second prescription, diet and regimen, principles of management during OPD and IPD visits so that the students can have the practical knowledge of the treatment and management of the patient.

Students should maintain practical record book of 20 cases where in thoroughly worked out cases from their clinical attendance should be recorded which should demonstrate the student's work on: Case taking, analysis & evaluation of symptoms, disease diagnosis, miasmatic diagnosis, selection of drug and potency, assessment of prognosis, repetition of doses, second prescription, diet and regimen, and principles of management.

- a) The students shall maintain practical records of patients treated in the out patient department and inpatient department of the attached hospital.
- b) The following shall be stressed upon in the case records, namely:-
 - 1) Receiving the case properly (case taking) without distortion of the patient's expressions:
 - 2) Nosological diagnosis:
 - 3) Analysis and evaluation of the symptoms, Miasmatic diagnosis and portraying the totality of symptoms:

- 4) Individualization of the case for determination of the similimum, prognosis, general management including diet and necessary restrictions on mode of life of the individual patients;
- 5) State of susceptibility of formulate comprehensive plan of treatment;
- 6) Order of evaluation of the characteristic features of the case would become stepping stone for the reportorial totality:
- 7) Remedy selection and posology
- 8) Second prescription.

Note: 1) Each Student has to maintain records of twenty thoroughly worked out cases (ten chronic and ten acute cases).

2) Each student shall present at least one case in the departmental symposium or seminar.

SCHEME OF EXAMINATION

A. Theory:

Number of Papers : 02

Paper I : 100 Marks

Paper II : 100 Marks

Distribution of Marks

Paper: I

Paper Aphorism 1 to 145		30 marks
Aphorisms 146 to 294		70 marks
·	Total	100 Marks

Paper: II

Chronic Diseases		50 marks
Homoeopathic Philosophy		50 marks
•	Total	100 Marks

Types of Question with Marks

Type of Questions	No. of Questions Asked	No. of Questions to be attempted	Marks per Question	Total
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks				

B. Practical including Viva Voce or Oral:

Maximum Marks: 100

1. Practical: 50 Marks

1)	Case taking and cas	e processing of a lo	ong case 3	30
,	0	- 0	- 0	

2) Case taking and case processing of a short case 10

3) Maintenance of Practical record or journal 10

2. Viva - Voce (Oral) Examination: 50 Marks

MARKS DISTRIBUTION

	The	eory	Practical & Oral			Grand Total		
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Organon of Medicine	200	100	50	50	100	50	300	150

RECOMMENDED BOOKS FOR III & IV BHMS

SI. No	Name of the Book	Author	Publisher
1.	Organon of Medicine 6th edition	Samuel Hahnemann	B. Jain Publishers
2.	A compend of the principles of Homoeopathy	W.M. Boericke	B. Jain Publishers
3.	Lectures on Homoeopathic Philosophy	J.T. Kent	B. Jain Publishers
4.	A compend of the principles of Homoeopathy for students in Medicine	Garth Boericke	B. Jain Publishers
5.	Organon of Medicine (5th & 6th edition) with commentary	B.K. Sarkar	M. Bhattachary & Co. Pvt. Ltd. Kolkatta
6.	Homoeopathy - The Science of Therapeutics	Carrol Dunham	B. Jain Publishers
7.	Principles and Art of cure by Homoeopathy	H.A. Roberts	B. Jain Publishers
8.	The Genius of Homoeopathy	Stuart Close	B. Jain Publishers
9.	The Principles and Practice of Homoeopathy	Richard Hughes	B. Jain Publishers, New Delhi.
10.	Chronic Diseases	Samuel Hahnemann	B. Jain Publishers
11.	The chronic miasm Psora, pseudo-psora and sycosis	J. H. Allen	B. Jain Publishers
12.	Chronic Diseases- Its cause and cure	Banerjee	B. Jain Publishers
13.	A comparosion of the chronic miasms, psora, pseudopsora and syphilis and sycosis	Phyllis Speight	B. Jain Publishers

REFERENCE BOOKS

SI. No	Name of the Book	Author	Publisher
1.	Lectures on the theory & practice of Homoeopathy	R.E. Dudgeon	B. Jain Publishers
2	A brief study course in Homoeopathy	Elizabeth Hubbard	B. Jain publishers (P) limited, New Delhi
3	New Lights (Lectures on Homoeopathic philosophy)	Dr. E.S. Rajendran	Mohna Publications, Calicut.
4	Miasmatic Diagnosis practical tips with clinical comparisons	Dr S. K. Banerjee	B. Jain publishers (P) limited, New Delhi.
5	Notes on miasms	Procesco Ortega	B. Jain Publishers (P) limited, New Delhi
6	The Nucleus (Lectures on Chronic Diseases and Miasms)	Dr. E. S. Rajendran	Mohna Publications, Calicut.
7	Chronic miasms in Homoeopathy and their cure	Dr. Ramanalala P. Patel	Hahnemann Homoeopathic Pharmacy, Kottayam, Kerala

SURGERY

(INCLUDING HOMOEOPATHIC THERAPEUTICS)

INTRODUCTION:

- I. a) Homoeopathy as a science needs clear application on the part of physician to decide about the best course of action(s) required to restore the sick to health;
 - b) Knowledge about surgical disorders is required to be grasped so that the Homoeopathic Physician is able to:
 - 1) Diagnose common surgical conditions.
 - 2) Institute homoeopathic medical treatment wherever possible.
 - 3) Organise Pre and Post- operative Homoeopathic medicinal care besides intervention with the consent of the surgeon.
- II. For the above conceptual clarity and to achieve the aforesaid objectives, an effective co- ordination between the treating surgeons and homoeopathic physicians is required keeping in view the holistic care of the patients and it will also facilitate the physician in individualizing the patient, necessary for homoeopathic treatment and management.
- III. The study shall start in second B.H.M.S and complete in third B.H.M.S and examination shall be conducted in third B.H.M.S.
- IV. a) Following is a plan to achieve the above and it takes into account about the second and third year B.H.M.S syllabus and respective stage of development:
 - b) Throughout the whole period of study, the attention of the students should be directed by the teachers of this subject to the importance of its preventive aspects.
- V. There shall be periodical inter-departmental seminar to improve the academic knowledge, skill and efficiency of the students and study shall include training on,
 - a) Principles of surgery
 - b) Fundamentals of examination of patient with surgical problems

- c) Use of common instruments for examination of a patient
- d) Physiotherapy measures
- e) Applied study of radio- diagnostics
- f) Knowledge of causation, manifestations, management and prognosis of surgical disorders
- g) Miasmatic background of surgical disorders, wherever applicable
- h) Bedside clinical procedures
- i) Correlation of applied aspects, with factors which can modify the course of illness including application of medicinal and non-medicinal measures
- j) Role of Homoeopathic treatment in pseudo- surgical and true surgical diseases.

It is a therapeutic system of medicine. It appreciates that surgery is required at times to effect ideal palliation. Surgery, often, primarily deals with the removal of the effects of disease not the disease itself. It must not be forgotten that Homoeopathy has its place to remove the cause of disease, slow down the process of cause flowing into effects, reduce post-operative complications; speed up the process of healing and recovery, etc. Students must be ultimately able to understand clearly the scope and limitations of surgery in the context of Homoeopathy and learn basic outpatient and emergency surgical procedures.

OBJECTIVES:

At the end of the course the student shall be able to:

- 1 Take case in detail keeping in mind the scientific and artistic approach
- 2 Make a thorough physical general examination and systemic examination.
- 3 Understand the common investigations appropriate to his/her case
- 4 Shall be able to interpret the results of investigation to know the pace of disease and its progress.
- 5 Diagnose common surgical cases.
- 6 Institute Homoeopathic medical treatment wherever possible.

- 7 Organize pre and post-operative Homoeopathic medicinal care as total/partial responsibility.
- 8 Organize complete Homoeopathic care for restoring the susceptibility of the patient to normalcy.
- 9 Understand the scope and limitations of Homoeopathy in surgical diseases. Identify the surgical emergencies and refer it to the referral hospital.

2nd YEAR BHMS SURGERY

(INCLUDING HOMOEOPATHIC THERAPEUTICS)

COURSE CONTENTS:

Theory: 80 Hours

SI. No		Topic / chapters	Hours Allotted	Marks
1.	General Surgery			
	a)	Introduction to surgery and basic surgical principles	3 hrs	
	b)	Fluid, electrolytes and acid-base balance	3 hrs	
	C)	Haemorrhage, haemostasis and blood transfusion	7 hrs	
	d)	Boil, abscess, carbuncle, cellulitis and erysipelas	3 hrs	
	e)	Acute and chronic infections, tumors, cysts, ulcers, sinus and fistula	8 hrs	
	f)	Injuries of various types; Head Injury, preliminary management of head	8 hrs	
		injury, Fracture of the base of the skull, injury to the brain, intracranial		
		haemorrhage.		
	g)	Wounds, tissue repair, scars and wound infections, healing of skin	5 hrs	100
		wounds		100
	h)	Special infections (Tuberculosis, Syphilis, Acquired Immuno Deficiency	3 hrs	
		Syndrome, Actinomycosis, Leprosy)		
	i)	Burns	3 hrs	
	j)	Shock	5 hrs	
	k)	Nutrition	2 hrs	
	1)	Pre-operative and post-operative care	3 hrs	
	m)	Fundamentals of examination of patient with surgical problems,	10 hrs	
		common symptoms in surgical cases, Physiotherapy measures		
2.	Sys	temic Surgery		
		Diseases of blood vessels	7 hrs	3
	1	Raynaud's disease& Buerger's diseases, Gangrene, Diseases of veins,		
	I	Varicose veins & Deep venous thrombosis, Pulmonary embolism, Diseases		
	I	of lymphatics, Lymphangitis, Lymphoedema, Hodgkins disease, Diseases		
		of peripheral nerves.		

b) Dentistry	10 hrs	10
-Applied anatomy, physiology of teeth	and gums	
-Milestones related to teething		
-Examination of Oral cavity		
-Diseases of gums		
-Diseases of teeth		
-Teeth Morphology, Caries of Tooth, A	Abscess& Fistula,	
Diseases of Gums, Apthous Ulcer &G	lossitis, Cleft palate	
& cleft lip, Ca Cheek, Root canal treat	ment, Injury to	
Maxilla& Mandible, Silolithiasis Silogi		
-Problems of dentition		

General management, surgical management and homoeopathic therapeutics of the above topics will be covered

II Year BHMS Clinical topics

SL.	Topics	Hrs	SL. No.	Topics	Hrs
1	Surgical History taking	5	21	Management of Warred	2
2	Special symptoms & signs	2	22	Management of Wound	
			_	Abscess & Incision & Drainage	1
3	Investigations - routine & Special	4	23	Examination of Varicose Veins	1
4	Sterilization	2	24	Examination of Lymphatic System	1
5	Anti-sepsis in Surgery	1	25	Examination of Peripheral Nerve Lesions	1
6	Pre-operative investigations	1	26	Examination of injuries about individual joints	2
7	Pre-operative care.	1	27	Examination of Head Injuries, preliminary management of head	2
				injury case	
8	Post-operative care	1	28	Procedure of X ray taking.	1
9	Suture Material & Suturing of various types	2	29	Procedure of Barium meal x rays	2
10	Dressings and Plasters (Bandaging)	2	31	Procedure for IVP & Urethrogram	2
11	Use of common instruments for Examination.	2	31	X Ray Demonstration	5
12	Basics of general surgical procedures	2			
13	Anaesthesia - Introduction & its types	1			
14	Management of Shock	1			
15	Management of Acute Haemorrhage	2	Total	Hours = 60 hours	
16	Case Demonstration	5			
17	Examination of Swelling	2			
18	Examination of Ulcer	2			
19	Examination of Perivascular Diseases and Gangrene	1			
20	Examination of Sinus & Fistula	1			

Examination: There shall be no Examination in this Subject in Second Year B.H.M.S.

3rd YEAR BHMS SURGERY

(INCLUDING HOMOEOPATHIC THERAPEUTICS)

OBJECTIVES:

At the end of the III year BHMS student should able to,

- 1. Interact with patient and his / her attendants to record a surgical case in the systemic areas and the specialities of ENT, Ophthalmology, and Dentistry.
- 2. Conduct necessary clinical examination to arrive at a surgical diagnosis in the systemic areas and the specialities of ENT, Ophthalmology, and Dentistry.
- 3. Identify the specific surgical conditions which can be managed with homeopathy for curative / palliative outcomes.
- 4. Identify specific surgical conditions, which have to be referred for surgical interventions.
- 5. Provide appropriate pre-/post-surgical homeopathic management.

COURSE CONTENTS:

Theory: 150 Hours

SI. No	Topic / chapters	Hours Allotted	Marks
1.	Systemic Surgery		47
a)	Diseases of glands	4 hrs	
	Parotid gland - Parotitis, Pleomorphic adenoma, Sialolithiasis,		
	Thyroid Goitre		
b)	Diseases of extremitities	4 hrs	
	Hand Deformities, Dupuytrens contracture & De- Quervains		
	disease, Carpal tunnel syndrome & ganglion, Foot swelling, Madura		
	foot ulcer,		
	in growing nail, Corn & callosities.		
c)	Diseases of thorax and abdomen	6 hrs	}
	Injuries of chest, Traumatic pneumothoxax, Surgical emphysema,		
	Diseases of chest - Empyema thoracic, lung abscess, Carcinoma of		
	lung, Pleural effusion,		
	Breast - Fibroadenoma of breast & Mastitis, Carcinoma of breast.		

- Ix	D'(l'	0.4.1	
d)	Diseases of alimentary tract Oesophageus - Reflux oesophagitis, Hiatus hernia, Carcinoma of oesophagus, Achalasia cardia, congenital pyloric stenosis, Peptic ulcer, carcinoma of stomach, Pancreas – Pancreatitis, Carcinoma of pancreas,	24 hrs	
	Colon - Ulcerative colitis, crohn's disease,		
	Intestine-Intestinalobstruction, Volvulus, intussusception, Meckel's diverticulum, Appendix - Appendicitis, Rectum& Anus - Hemorrhoids, Prolapse of rectum, Pilonidal sinus,		
	Fissure-in-ano, Anorectal abscess, Fistula-in-ano, carcinoma of rectum		
e)	Diseases of liver, spleen, gall bladder and bile duct. Liver - Pyogenic liver abscess & Amoebic liver abscess, Hydatid cyst, Portal hypertension, Carcinoma of liver Spleen- Rupture of spleen, Hypersplenism	10 hrs	
	Gall bladder - Gall stones, Cholecystitis Choledocholithiasis, Carcinoma of gall bladder		
f)	Diseases of abdominal wall, umbilicus, Hernias- Inguinal Hernia, Femoral hernia; Ascitis, Peritonitis	4 hrs	
g)	Diseases of heart and pericardium Chronic Pericarditis, Congenital disorders - Atrial septal defect & ventricular septal defect, Acquired heart diseases - Mitral stenosis& mitral regurgitation	3 hrs	
h)	Diseases of urogential system Kidney-Renal stones, Tuberculosis, Vesical calculus, Cystitis, Pyelonephritis Hydronephrosis, Haematuria, Retention of urine & Anuria, Prostate - Beningn prostatic hypertrophy, Baleno posthitis & priapism, Carcinoma of prostate, Phimosis & paraphimosis, Varicocele, Hydrocele, Haematocele &pyocele, Urethra - Urethral stricture, Ureter calculi, Testis - Undescended testis & torsion of testis, Epispadias & hypospadias	19 hrs	
1)	Diseases of the bones, Osteomyelitis & Broodie's Abscess, Osteoma, Osteosarcoma & Ewing,s Tumour, Pott's Diseases (Tuberculosis of Spine)	4 hrs	
j)	Diseases of Cranium Head Injury,	1hrs	
k)	Diseases of Vertebral column Paget's disease, Osteitis deformans, Disc Prolapse (PID), Cervical spondylosis &Lumbar spondylosis, Ankylosing Spondylosis, Spina Bifida	5 hrs	
l)	Fractures and dislocations General Principles of Fracture, Fracture of neck of femur, Fracture of Tibia, Supracondylar fracture of Humerus, Colle's Fracture, Pott's Fracture (Ankle), Dislocation of Shoulder joint, Dislocation of hip Joint.	8 hrs	

m)	Diseases of the joints Rheumatoid Arthritis, Osteoarthritis, Osteoporosis, Pagets Disease	4 hrs	
n)	Diseases of the muscles, tendons and fascia Tenosynovitis & Achillis Tendinitis, Calcaneal spur & Chronic Bursitis, Injury to nerves - Cervical Plexus, Radial Nerve, Median Nerve-Carpal Tunnel Syndrome, Sciatic Nerve - Sciatica.	5 hrs	
2.	 Ear Applied anatomy and applied physiology of ear. Examination of ear Diseasesof external, middle and inner ear Acute otitis Externa, Wax and otomycosis, Acute suppurative otitis media, Chronic otitis media, Mastoiditis & mastoid abscess, Otosclerosis otorthoea & aural polyp, Earache, Deafness, Vertigo, Tinnitus & Meniers disease. 	10 hrs	20
3	Nose - Applied anatomy and physiology of nose and para-nasal sinuses Examination of nose and para nasal sinuses Diseases of nose and para nasal sinuses deviated nasal septum, Rhinitis, Nasal polyp, Sinusitis, Epistaxis.	6 hrs	
4	Throat - Applied Anatomy andapplied physiology of pharynx, larynx, tracheobronchial tree, oesophagus - Examination of pharynx, larynx, tracheobronchial tree, oesophagus Diseases of Throat (External and internal) Diseases of oesophagus. Tonsillitis, Adenoid, Pharyngeal abscess, Cervical swellings, Laryngitis, Pharyngitis, Hoarseness, Dysphagia, Carcinoma of tongue.	9 hrs	
5	Ophthalmology -Applied Anatomy, Physiology of eyeExamination of eyeDiseases of eyelids, eyelashes and lachrymal drainage systemDiseases of Eyesincluding injury related problems. Blepharitis, Hordeolum, Chalazion, Ptosis, Anatomy & History of lachrymal drainage system, Tears, Watering of eye, Dacryocystitis Errors of refractions, conjunctivitis, Ophthalmia Neonatorum, Trachoma, Pterygium, Corneal Ulcer, Keratitis, Scleritis, Iritis and Iridocyclitis Cataract, Glaucoma, Retinitis, Retinopathy, Optic Nerve Atrophy, Squint, Diplopia, Nystagmus, Injuries.	20 hrs	20
6	Review of diseases of blood vessels, lymphatics and peripheral nerves.	2 hrs	
7	Review of Dentistry topics	2 hrs	

General management, Surgical management and Homoeopathic Therapeutics of the above topics will be covered.

Practical or clinical - 75 Hours

(To be taught in Second and Third B.H.M.S.)

- 1. Every student should prepare and submit twenty complete histories of surgical cases, ten each in the Second and Third B.H.M.S. classes respectively
- 2. Demonstration of surgical instruments, X-rays, Specimens etc.
- 3. Clinical examination in surgery.
- 4. Management of common surgical procedures and emergency procedures as stated below:
 - a) Wounds
 - b) Abscesses: incision and drainage
 - c) Dressings and plasters
 - d) Suturing of various types
 - e) Pre-operative and post-operative care
 - f) Management of shock
 - g) Management of acute hemorrhage
 - h) Management of acute injury cases
 - i) Preliminary management of a head injury case

III year B.H.M.S – Clinical Topics -75 Hours

Sl. No.	Topics	Hour s
1	Investigations of Intra Cranial Space-Occupying Lesions	1
2	Examination of Spinal Injuries	2
3	Examination of the Hand	1
4	Examination of Foot	1
5	Examination of the Head & Face	2
6	Examination of Palate, Cheek, Tongue & Floor of the Mouth	2
7	Examination of the Salivary Glands	1
8	Examination of Neck	1
9	Examination of Thyroid Gland	1
10	Examination of injuries to Chest	1
11	Examination of Breast	2
12	Examination of a case of Dysphagia	2
13	Examination of Acute Abdomen	2
14	Examination of Chronic Abdominal Conditions	2
15	Examination of Abdominal Lump	2
16	Examination of Rectal Case	2
17	Examination of Urinary case	2
18	Examination of a case of Hernia	2
19	Examination of Inguino-scrotal swelling	2
20	Examination of Male external Genitalia	1
21	Diseases of Muscles, Tendons and Fasciae	2
22	Examination of Diseases of Bones	2
23	Examination of Bone & Joint Disease	3
24	X - Ray Demonstration	7
25	ENT History Taking	1
26	Tonsillitis	1
27	DNS	1
28	Sinusitis	1
29	Nasal polyp	1
30	Otitis Media - Acute & Chronic	2
31	Acute Mastoiditis	1
32	Epistaxis	1
33	Laryngitis/ Hoarseness of Voice	1
34	Ophthalmology Clinical History Taking	1
35	Errors of Refraction	1
36	Conjunctivitis	1
37	Cataract	1

38	Glaucoma	1
39	Hardeolum Externa / Interna	1
40	Apthous Ulcers, Ranula & Epulis	1
41	Caries of Tooth	1
42	Deafness	1
43	Case demonstration	10
	Total	75

Examination:

Examination in this subject will be conducted in Third Year BHMS (not in Second year BHMS).

SCHEME OF EXAMINATION:

A. Theory:

Number of Papers : 02

Paper I: 100 Marks

Paper II : 100 Marks

Distribution of Marks

Paper-I:	Section A- General Surgery	50 marks
	Section B- Homoeopathic Therapeutics relating to	50 marks
	General Surgery	
Paper- II	Section A-	
	 Systemic Surgery 	25 marks
	• ENT	10 marks
	Ophthalmology	10 marks
	 Dentistry 	05 marks
	Section B-	
	 Systemic Surgery Homoeopathic Therapeutics 	25 marks
	 ENT Homoeopathic Therapeutics 	10 marks
	 Ophthalmology Homoeopathic Therapeutics 	10 marks
	Dentistry Homoeopathic Therapeutics	05 marks

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks			•	100

B. Practical including Viva Voce or Oral:

Maximum Marks - 200

1. Practical: 100 Marks

One long case 40

Identification of Instruments –rays 30

Practical records, case records of journal 30

2. Viva Voce (Oral) Examination: 100 Marks

MARKS DISTRIBUTION

	The	eory		Practica	l & Oral		Grand	Total
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Surgery (Including Homoeopathic Therapeutics	200	100	100	100	200	100	400	200

RECOMMENDED BOOKS

Sl. No.	Name of the Book	Author	Publisher
1.	Bailey & Love's short practice of	Bailey & Love	Arnold, Co-publisher,
	surgery		Oxford University Press,
			New York
2.	Concise textbook of surgery	S. Das	S. Das
3.	A manual of clinical surgery	S.Das	S. Das
4.	Diseases of the ENT	I. S. Hall & B.M.	Churchill Livingstone
		Colman	
5.	Diseases of the Ear, Nose, & Throat	B.K. Roy	B. Bhattachary Vijoya
			Publishing House
6.	Handbook of Ophthalmology	B.M. Chatterjee	CBS Publishers & Distributors
7.	A first handbook of medical	A. Bowmik	B.I. Publications
	instruments		
8.	Outline of Orthopaedics	Adams	Churchill Livingstone
9.	A textbook of surgery	R. Mahadevan	Asia publishing house
10.	A system of surgical diagnosis	Tribhuvan Patel	B.I. Publication
11.	Ophthalmic diseases therapeutics	Burton	B. Jain
12.	Diseases of eyes	E.W. Berridge	B. Jain
13.	A manual of operative surgery	S. Das	S. Das
14.	Short cases of surgery	S. Das	S. Das
15.	Clinical methods in surgery	Hamilton Bailey	S. Das

REFERENCE BOOKS

Sl. No.	Name of the Book	Author	Publisher
1.	Complete Repertory of Eye	Berridge EW	B. Jain Publishers; New Delhi
2.	Practical Guide to Operative Surgery. 6 th ed.	Das. S. A	S. Das's Publications; 2007

GYNAECOLOGY AND OBSTETRICS

(INFANT CARE AND HOMOEOPATHIC THERAPEUTICS)

INSTRUCTIONS:

l.

- a) Homoeopathy adopts the same attitude towards this subject as it does towards Medicine and Surgery, but while dealing with Gynaecology and Obstetrical Cases, a Homoeopathic physician must be trained in special clinical methods of investigation for diagnosing local conditions and individualising cases, the surgical intervention either as a life saving measure or for removing mechanical obstacles, if necessary, as well as their management by using homoeopathic medicines and other auxiliary methods of treatment:
- b) Pregnancy is the best time to eradicate genetic dyscrasias in women and this should be specially stressed. And students shall also be instructed in the care of new born
- c) The fact that the mother and child form a single biological unit and that this peculiar close physiological relationship persists for at least the first two years of the child's life, should be particularly emphasised.
- II. A course of instructions in the principles and practice of Gynaecology and Obstetrics and infant hygiene and care including the applied anatomy and physiology of pregnancy and labour, will be given.
- III. Examinations and investigation in Gynaecological and Obstetrical cases shall be stressed and scope of homoeopathy in this subject shall be taught in details.
- IV. The study shall start in Second BHMS and shall be completed in the Third BHMS and the examination will be held in Third BHMS.

Distribution of Hours:

Year		Year	II BHMS	III BHMS
	Total hours		140	225
Time		Gynaecology	30	70
	Theory	Obstetrics	45	70
		Care of new born / infant care	05	10
	Clinical		60Hours (Three months clinical posting in OPD & IPD)	75 Hours (Three months clinical posting in OPD & IPD)

2nd YEAR BHMS GYNAECOLOGY AND OBSTETRICS

(Infant Care and Homoeopathic Therapeutics)

OBJECTIVES:

After completing the course of Gynaecology & Obstetrics in II BHMS the student will be able to –

- Recall the normal structure & function and patho-physiology of female reproductive system.
- Provide a holistic care for a healthy pregnancy, safe delivery and motherhood.
- Describe gynaecological problems and explain their therapeutic solutions.
- Detect normal pregnancy, labor, puerperium and manage the problems related to them.
- During ANC check-up advice the mother about 'High-Risk' pregnancy and complications.
- Motivate couple to implement Family Planning Measures.
- Examine a pregnant woman, identify high risk pregnancies and make appropriate

referrals.

- Conduct normal delivery, recognize complications and provide post-natal care.
- Resuscitate new born and recognize congenital abnormalities.
- Interact with the mother to remove fear and false notions about pregnancy.

Course Content

A. Theory: 80 Hours

GYNECOLOGY

SL.	CHAPTER	HOURS Allotted	MARKS
1	Anatomy of female reproductive organs, Internal genitalia, pelvic muscles, pelvic floor & fascia.	2 hrs	5 marks
	Blood vessels, lymphatics of pelvic organs	1 hr	
	Congenital malformation of female genital organs, Uterine anomalies types, clinical features & diagnosis. Vaginal abnormalities types & clinical features. Treatment of uterine anomalies.	4 hrs	
	Development of genital organs & gonads.	2 hrs	
2	Puberty & menopause Puberty- definition morphological genital organ changes &Tanners' classification. Precocious puberty-define, causes.Menopause-definition, clinical features diagnosis & treatment.Diagnosis of precocious puberty. Delayed puberty define & causes.Abnormal menopause & artificial menopause. Neuro-endocrinology in relation to reproduction Ovarian hormones & its functions. Importance of hypothalamo-pituitary	6 hrs 2 hrs	5 marks
	ovarian axis. Menstruation -Ovulation- definition, causes & hormonal effects. Definition, stages of menstruation. Formation & maturation of GF & corpus-luteum.	3 hrs	
3	Examination of gynecological patient Detailed history, gynecological &vaginal examination.Indications of laparoscopy, hysteroscopy &culdoscopy.Methods of examination of vagina& cervix.Colposcopy, x-ray, u/sonography indications.	3 hrs	5 marks
	Inter-sex Etiology, clinical feature of female, male inter-sex.	2 hrs	
4	Uterine displacements – definition, degree causes, signs and symptoms of retro-version. Genital prolapse –etiology, types degrees of prolapse, clinical features, diagnosis and D/D. Prevention and management of retroversion	5 hrs	10 marks

OBSTETRICS

SL. NO	CHAPTER	HOURS ALLOTTED	MARKS
1	Anatomy of reproductive organs	1 hr	
	Fundamentals of reproduction Gametogenesis, Ovulation, fertilization, Implatation, Trophoblast, deciduas, chorion&chorio-villi	2 hrs	
	Placenta & membranes, Placental functions, amniotic fluid & amnion, Development, structure & placental circulation	2 hrs	
	The fetus Fetal physiology & fetal circulation	1hr	
	Physiological changes during pregnancy Genital organs, breasts, weight gain, cutaneous changes, hematological changes, Metabolic changes	2hrs	
	Endocrinology in relation to reproduction Maturation of graafian follicle & maintenance of corpus luteum after fertilization Hormones of placenta Changes of endocrinal gland during pregnancy	1 hrs	5 marks
	Fetus-in-utero Lie, presentation, Attitude, Denominator Position. Methods of obstetrics examination-abdominal with grips, engagement, Internal examination, Ultra-sonography inferences, Vaginal examination	4 hr	
	Fetal skull & maternal pelvis Fetal skull-areas, sutures, fontanelles& diameters. Moulding, Caput- succedaneum. False & true pelvis. Pelvis-shape, plane & diameter	1 hr	
2	Diagnosis of pregnancy st , 2 nd & 3 rd trimester—Subjective & Objective, D/D of pregnancy. Estimation of gestational age & EDD. Chronological appearance of symptoms & sign of pregnancy	6 hrs	
	Antenatal care—Aims, objective & advice, Minor ailments in pregnancy Normal-labor -Definition of normal & abnormal labor. Causes of labor, Diagnosis of labor False & True labor pains. Stages of labor. Mechanism of labor Events in 1 st , 2 nd & 3 rd stages of labor. Management of labor Physiology of labor, clinical course of labor	4 hrs 10 hrs	20 marks
	Normal puerperium -Definition, involution of uterus. Lochia. Management of normal puerperium.Post-natal care.Physiological changes at puerperium, lactation & its physiology. Management of ailments	6 hrs	
3	Care of new born -New born infant-define physical features at birth & immediate care of new born, Breast feeding advantage & contraindications, Breast feeding difficulties	5 hrs	5 marks
4	Vomiting in pregnancy Simple vomiting & hyperemesis gravidarum—etiology, clinical course & management, Pathology & bio-chemical changes	3 hrs	5 marks
-	Induction of labour Definition, indications & contra-indications Low rupture & high rupture of membranes indications	2 hrs	

B. Practical or Clinical: 60 Hours

Practical or clinical classes shall be taken on the following topics both in second and Third B.H.M.S.

- a. Gynecological case taking
- b. Obstetrical case taking
- c. Gynecological examination of the patient
- d. Obstetrical examination of the patient including antenatal, intranatal and post- natal care
- e. Bed side training
- f. Adequate grasp over Homoeopathic principles and management
- g. Identification of Instruments and modelsRecord of ten cases each in gynecology and obstetrics

Examination: There shall be no Examination in this Subject in Second Year B.H.M.S.

3rd YEAR BHMS GYNAECOLOGY AND OBSTETRICS

(Infant Care and Homoeopathic Therapeutics)

OBJECTIVES:

After completing the course of Gynaecology & Obstetrics in third BHMS, the student

will be able to -

- To assess the relationship & Care of mother & foetus during Antenatal, intra-natal & the complication to mother, foetus during & after pregnancy with its management.
- Recall the various disorders & diseases of female genitalia, its diagnosis & therapeutic management.
- To detect, control, treat and prevent a number of disease conditions encountered in women through homoeopathic treatment.
- To provide appropriate education to the students in Gynaecology
 & Obstetrics to become competent physicians.

Course Content:

A. Theory: - 150 Hours

GYNAECOLOGY

Paper -I

SI. No	Chapter	Hours Allotted	Marks
1.	Pelvic infections	4 hrs	10
	Acute pelvic infections-definition, mode of spread, C/F,		
	investigations diagnosis, D/D & complications.		
	Chronic pelvic infections- C/ F, investigations, D/D &		
	management.Genital TB mode of spread, C/F		
	investigations, D/D. Treatment of chronic PID, Tuberculosis		
	& Cervical TB		

	Sexually transmitted diseases Acute & chronic gonorrhea-clinical features diagnosis & treatment. Syphilis-C/F & diagnosis. AIDS-clinical features causative organisms, diagnosis & prevention, Chlamydial infections-clinical features & diagnosis. Chancroid& Granuloma inguinale-causes & clinical features	4 hrs	
	Infection of the individual organs, classify vulvitis due to specific infection. Acute Bartholinitis-C/F & causation. Bartholin abscess-clinical features. Vaginal infection-vulvo-vaginitis in childhood, C/F & investigation. Moniliasis & Trichomoniasis-causes, C/F, mode of transmission & diagnosis. Vulvitis due to sensitive reaction & urinary contamination. Bartholin cyst-clinical features Senile vaginitis-clinical features & diagnosis.	5hrs	
2.	Dysmenorrhoea& other disorders of menstruation Define dysmenorrhoea, types, etiology clinical features & management of primary & secondary dysmenorrhoea. Membranous dysmenorrhoea. Premenstrual syndrome-causes, clinical features, diagnosis & treatment, Ovarian dysmenorrhoea, Ovular pain	4 hrs	15
	Abnormal menstrual bleeding Menorrhagia, metrorrhagia, oligomenorrhoea, hypomenorrhoea definition & causes. DUB-define, classify, clinical features, investigations & general management, Common causes of abnormal vaginal bleeding	4 hrs	
	Amenorrhea Definition, types, causes & investigations of primary & secondary amenorrhea Management & treatment of primary & secondary amenorrhea	3 hrs	
3.	Infertility Definition, causes of male & female infertility. Investigation of male infertility-routine & in-depth evaluation. Female investigations for ovarian factors-BBT Treatment of male & female infertility- Assisted reproductive techniques—IVF, GIFT & MIST	6 hrs	10

	Other investigations endometrial biopsy, cervical mucus		
	study, HCG & sonography	1	
4.	Benign lesion of vulva & vagina	1 hrs	10
	Benign lesion of cervix	4 hrs	
	Cervical erosion—definition, etiology, clinical features &		
	diagnosis.Management of cervical erosion.Types of		
	cervical cysts.	+	
	Benign lesions of uterus	4 hrs	
	Fibroid types, clinical features, investigations, treatment &		
	D/D		
	Secondary changes in fibroid,		
	Polyps types, clinical features,		
	Benign lesions of ovary	4 hrs	
	Non-neoplastic causes—follicular cyst, corpus luteal cyst &		
	lutein cyst. Dermoid cyst – Origin, signs & symptoms.		
	D/D of ovarian tumor	1	
	Classification of ovarian tumor	-	
	Mucinous cyst, serous cyst—origin & causes.	ļ	
	Complication of ovarian tumor		
5.	Endometriosis & Adenomyosis	3 hrs	5
	Endometriosis-definition, sites, clinical features diagnosis		
	complication Adenomyosis-causes. Clinical features.		
	Pathology & treatment of endometriosis.		
6.	Special topics	6 hrs	5
	Abnormal vaginal discharge-causes		
	Leucorrhoea causes & diagnosis.		
	Pruritus vulvae- Definition, etiology & general treatment.		
	Pelvic pain, types, causes & investigations. Post-		
	menopausal bleeding-causes & investigations.		
	Vaginismus, Dyspareunia definition, causes & treatment		
	Pruritus vulvae-mechanism of itching, special investigation.		
	Management of acute & chronic pain.		
	Low backache causes.		
	Fibro-adenoma of breasts.		
	Hirsutism- definition & causes.		
	Galactorrhoea definition & causes.		
7.	Genital malignancy	6 hrs	10
	CA cervix-etiology, predisposing risk factors, mode of		
	spread, diagnosis, D/D & complications, prevention.		
	Endometrial cancer etiology & clinical feature. Granulosa		
	tumor of the ovary causes & clinical features.		
	Planning &management of CA cervix		
	Staging & treatment of endometrial CA		
	CA Cervix - staging procedure by FIGO.		

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8.	Urinary problems in gynecology	3 hrs	5
	Genuine stress incontinence define, causes & C/F & D/D		
	Definition etiology & symptoms of sensory & Motor urge		
	incontinence.Retention of urine causes & management.		
	Physiology of micturition storage & voiding of urine.		
	Dysuria causes		
	Genital fistula -Definition, Types of genital fistula	3 hrs	
	Vesico-vaginal fistula definition causes C/F & prevention.		
	Recto-vaginal fistula definition, causes & treatment		
	Genital tract injuries -Complete perineal tear (CPT) define,	2 hrs	
	etiology clinical feature & prevention, Nature of coital		
	injuries		
9.	Contraception	3 hrs	5
	Methods of contraception-indications & uses. Vasectomy		
	advantages & complications.Indications of sterilization		
	Chemotherapy caused complications	1 hr	
	Radiation reactions and their treatment		

Course Content:

OBSTETRICS

Paper –II

Sl. No	Chapter	Hours Allotted	Marks
1.	Hemorrhage in pregnancy Abortion, classification. Threatened, inevitable, missed, septic & recurrent abortion with clinical features, complications & general management. Indications of MTP & its complication. Ectopic pregnancy— etiology, C/F & diagnosis. Hydatidiform mole—etiology, C/F, investigations, D/D & complications	9 hrs	20
	Complete & incomplete abortion. Multiple-pregnancy, hydramnios & placental abnormalities Twins-Varieties, etiology, diagnosis & complications. Hydramnios—Definition, etiology, clinical features & complications. Oligo-hydramnios- definition diagnosis & complication. Definition of placenta succenturiata, circumvallate placenta, Battledore placenta & placenta marginata –its clinical significance	5 hrs	
	Hypertensive disorders in pregnancy Pre-eclampsia-definition, classification types, clinical- features complications & conservative management. Eclampsia-Causes, clinical features D/D Eclampsia-management Gestational hypertension	4 hrs	
	Ante-partum hemorrhage Definition, causes of APH. Placenta previa - definition, types clinical features, D/D, Complications. Distinguish placenta praevia&abruptio placenta. Abruptio placenta—Definition, varieties, classify clinical features & D/D. Diagnosis of placenta praevia. Management & treatment. Abruptio placenta - prognosis & management. Couvelaire uterus.	4 hrs	
	Abnormalities of puerperium Puerperal pyrexia-define causes, clinical features, treatment	4 hrs	

	Puerperal pyrexia-pathology & prophylaxis.		
	Breast complications-mastitis clinical features &		
	treatment		
	Breast engorgement cracked nipples-causes & treatment		
2.	Medical & surgical illness complicating pregnancy	3 hrs	5 marks
	Anemia in pregnancy-Classification.		
	Iron deficiency anemia –clinical features, complications		
	of severe anemia.		
	Gestational diabetes-types, effects of diabetes on the		
	mother & fetus.		
	Causes of retention of urine in pregnancy		
	Management of diabetes during pregnancy		
	Gynaecological disorders during pregnancy	2 hrs	
	Fibroid in pregnancy-clinical features & diagnosis.		
3.	Pre-term labor, rupture of membranes, IUD of fetus &	4 hrs	5 marks
٥.	post-maturity.	5	Januari
	Pre-term labor- definition, etiology diagnosis.		
	PROM-definition & diagnosis.		
	Post term pregnancy-definition, etiology, diagnosis &		
	complication.		
	IUD- definition, etiology clinical features.		
	Special cases	2 hrs	
	Elderly prime-complications	2 1113	
	Grand multipara-complications		
	Bad obstetric history-define		
	Contracted pelvis	4 hrs	
	Cephalo-pelvis-disproportion-definition, diagnosis		
	Munro- kerrs classification of contracted pelvis		
4.	Abnormal uterine contraction	2 hrs	10 marks
	Constriction ring-diagnosis & treatment.	2	
	Difference between constriction & retraction ring		
	Cervical dystocia-types		
	Precipitate labor		
	Mal-position, mal-presentation & cord prolapsed	5 hrs	
	Breech presentation types, clinical features etiology &	3 1113	
	diagnosis.		
	Face & brow presentation-its course in labor.		
	Compound presentation, etiology & diagnosis.		
	Prolonged labor, obstructed labor & dystocia	3 hrs	-
	Prolonged labor-definition, causes with diagnosis	5 1115	
	Obstructed labor-definition, causes, clinical features.		
	Obstructed labor-effect on mother & fetus.		
		r I	10 marks
5			
5.	Complication of 3rd stage labor Post-partum types, causes & diagnosis. Management of	5 hrs	10 marks

	Secondary PPH-causes & management		
	Retained placenta, define causes		
	Management of 3 rd stage bleeding		
	Placenta-accreta-diagnosis		
	Inversion of uterus-varieties & etiology		
	Injuries to birth canal	2 hrs	
	Injuries to perineum-causes & management		
6.	Low birth weight baby	4 hrs	5 marks
	Preterm baby-definition, etiology complication.		
	IUGR-definition, types, etiology diagnosis &		
	complications.		
	Disease of fetus & the new born	8 hrs	
	Asphyxia neonatrum- etiology, clinical features &		
	management.		
	Jaundice in new born-causes.		
	Infections of new born-ophthalmia neonatrum causes		
	prevention & treatment		
	Injuries of new born-causes & prevention		
	Causes of diarrhea and vomiting in new-born.		
7.	Medico-legal aspects in Obstetrics	2 hrs	5 marks
	Measure to minimize medico-legal problems	2 1113	Jinana
	Population dynamics & control of conception	2 hrs	
	Methods of contraception & its advantages.	2 1113	
	Sterilization in male & female-its indications & contra-		
	indications		
	Advantages & disadvantages of IUCD		
	Prenatal Diagnostic Techniques Act 1994	1 hr	
	Abnormalities & reasons detected by the technique	1 111	
8.	Operative obstetrics	2 hrs	5 marks
0.	Indications of D&E, D&C, Suction evacuation,	2 1113	Jillaiks
	hysterotomy.		
	Episiotomy-types & indications.		
	Version definition & types.		
	Caesarian section -definition, indications, types		
	Forceps-types & varieties.		
	Classical caesarean section-merits & demerits with		
	complication		
	Safe mother-hood & obstetrics care	1 hr	
	Still births & maternal mortality-definition & causes	1 111	
	Special topics in obstetrics	1 hr	_
	Fetal distress	1 111	
	High risk pregnancy	1 5	-
	Reproductive & child health care	1 hr	
	Prenatal & maternal mortality & morbidity		

Homoeopathic Therapeutics

Following organ affinity remedies (with specific sphere of action on genitalia) to be given preference along with Polychrests of II, III, IV BHMS;

- Aurum MuriaticumNatronatum
- Caulophyllum
- Cimicifuga Racemosa
- Colocynthis
- FicusReligiosa
- Fraxinus Americana
- Gossypium
- HamamelisVirginica

- Millefolium
- Oophorinum
- Pituitary gland
- Sabina
- Thlaspi Bursa Pastoris
- Trillium Pendulum
- UstilagoMaydis
- Viburnum Opulus\

Practical or Clinical: 135 Hours

Learning Objectives:

Skills to be acquired by students

- Knowledge skills
- Communication with the patients
- Counseling & Analytical skills
- Management & Diagnosis.

Competence acquired at the end of the course:

- Individualizing every case from Homoeopathic perspective for therapeutic application.
- Assess Mother-to-Be regarding genetic dyscrasia for prescribing homoeopathic medicines.
- Provide quality maternal care by diagnosis of diseases during ANC check-up with homoeopathic remedies & manage accordingly.

- Prevention of diseases encountered by women during adolescence, childbearing period pre-post menopause & menopausal period with prior treatment on homoeopathic principles.
- Advice&counseling for a safe & planned family by advocating family planning methods.
- Identify High risk Pregnancy, MTP& pure surgical cases for referral.

Objectives for clinical

- Demonstrate the appropriate knowledge, skills and attitudes in order to perform specialist assessment of patients by means of clinical history taking and physical examination in a logical manner.
- Manage the problem&communicate with patient in different clinical situations.
- Define the patterns of symptoms in women presenting with obstetric and gynecological problems.
- Justify the importance of psychological factors for patients and their relatives.
- Assess Benign, pre-malignant & malignant conditions with prognosis of each case.

Obtain information from the patient and her family, by

- Performing complete and directed interviews with women at different stages of reproductive life.
- Performing general and specific physical examination on the woman
- Inspection and palpation of the external genitalia.
- Performing obstetric examination like digital, using speculum etc.
- Inspection and palpation for breast examination.

Analysis, interpretation of information and decision-making

 Assess the patient and from the information obtained, formulate diagnostic hypotheses and differential diagnoses for the most prevalent medical conditions in gynaecology and obstetrics;

- Indicate appropriate additional obstetric tests for each case, taking into consideration the context and the available resources.
- Request obstetric ultrasound images;
- Request prenatal examinations;
- Request routine examinations of blood, urine, specific examination like culture swab, Diagnostic D&C etc.
- Indicate appropriate complementary examinations within gynaecology for each case taking into consideration the context and the available resources:
- Request screening examinations for breast and cervical cancer;

Request imaging examinations and laboratory tests suitable for various benign diseases of the uterus and ovaries.

Practical or clinical classes shall be provided on the following topics both in II and IIIBHMS

Gynaecological case taking: 20 Hours

- Art of case-taking- structured format.
- Elicit history of present complaint
- Details of present & past menstrual history
- Interpret investigations required in the case
- Assess the provisional diagnosis of the case
- List the homoeopathic remedies.

Obstetrical case taking: 30 Hours

- Elicit history of previous pregnancy, delivery puerperium
- Discuss history of abortions, operative intervention etc.
- Elicit abdominal findings-grips, presentation, position & PV findings.
- View the duration & stages of labor.
- Mention the type of delivery-pre-term, term vaginal or operative.

Gynecological examination of the patient: 20 hours.

- History & examination of female pelvic organ.
- Observe insertion & removal of IUCD.
- Observe minor gynecological procedures like D&C, D&E etc.

Obstetrical examination -antenatal, intra& postnatal care: 30 hours

- Art of case taking-Assist the process of normal labour & observe abnormal labour.
- Observe episiotomies, tubectomy procedures & application of forceps.
- Observe operative procedures like classical caesarean section.
- Watch the process of immediate care of new born.

Bedside training: 10 hours

• Demonstrate individual cases at bed-side & discuss the case in groups.

Adequate grasp over homoeopathic principle's and management: 10 hours

- Application of organ affinity remedies &polychrest.
- Miasmatic approach in study of the case to prescribe a remedy.

Identification of instruments and models: 15 hours.

- Identify the instruments& assesses its importance.
- Note the specimen/models.

Instruments of importance: a) Speculum b) Female catheter c) Single & Multiple toothed vulsellum. d) Uterine curette e) Cervical dilators f) Forceps-Ovum Haemostatic, sponge holding etc. g) Uterine forceps-Kocher's, Allis, Lanes etc. h) Doyen's retractori) Pelvimeter j) Pessary-Hodge-Smith & Ring k) Uterine sound

Record of ten cases each in Gynecology and Obstetrics

SCHEME OF EXAMINATION:

A. Theory:

Number of Papers : 02

Paper I : 100 Marks

Paper II : 100 Marks

Contents

SI.	Chapters	SI.	Chapters
No		No	
Paper	I – Gynaecology and	Paper	: II – Obstetrics and Infant care
Homo	eopathic Therapeutics	and H	omoeopathic Therapeutics
1	Anatomy of female genitalia	e genitalia 1 Fundamentals of reprodu	
	Congenital malformation		Placenta & membranes
2	Puberty & Menopause		Fetus-in utero
	Neuro-endocrinology		Physiological changes during pregnancy
	Menstruation		Endocrionology in pregnancy
3	Examination of Gynaecological		Fetal skull & maternal pelvis
	patient		
	Inter –sex	2	Ante natal care
4	Uterine displacements		Diagnosis of pregnancy
5	Pelvic infections		Normal labor
	STD		Normal puerperium
	Infections of individual organs	3	Vomiting pregnancy
6	Dysmenorrhoes and other		Induction of labour
	disorders		+
	Amenorrhoea	4	Hemorrhage in pregnancy
	Abnormal menstrual bleeding		Multiple pregnancy
7	Infertility		Ante partum hemorrhage
8	Benign lesions of cervix		Hypertensive disorders in
			pregnancy
	Benign lesion of uterus		Abnormalities of puerperium
	Benign lesion of uterus	5	Medical & surgical illness in
0	Endometriesis and Adamenus		pregnancy Cypass disorders during
9	Endometriosis and Adenomyosis		Gyneco- disorders during
			pregnancy

9	Endometriosis and Adenomyosis		Gyneco- disorders during
10	Special topics	6	Preterm labor, PROM, Post maturity
11	Genital malignancy		Special cases
12	Urinary problems in Gynaecology		Contracted pelvis
	Genital fistula	7	Abnormal uterine contraction
	Genital tract injuries		Malpresentation, mal-position & cord
13	Contraception		Prolonged, Obstructed labour, dystocia
	Chemotherapy caused	8	Complication of 3 rd stage
	complications		labour
			Injuries to birth canal
		9	Care of New Born
			Low birth weight Baby
			Diseases of fetus& New-born
		10	Population dynamics
			Medico-legal aspects of Obstetrics
			Pre Diagnostic Techniques Act
		11	Operative obstetrics
			Safe motherhood & obstetrics care
			Special topics in obstetrics
			Reproductive & child health care

• Homoeopathic Therapeutics related to above chapters.

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks	•		•	100

B. Practical including Viva Voce or Oral:

1. Practical: 100 Marks

-One long case 30

Maximum Marks: 200

-Practical records, case records, Journal 30

-Identification of instruments, models and specimens 40

2. Viva - voce (Oral) Examination: 100 Marks

MARKS DISTRIBUTION

	The	eory	Practical & Oral				Grand Total	
	Max	Pass	Max	Max Oral	Total	Pass	Max	Pass
Subject	Marks	Marks	Practical	Marks	Practical	Marks	Marks	Marks
			Marks		& Oral			
Gynaecology &	200	100	100	100	200	100	400	200
Obstetrics								
(Infant care and								
Homoeopathic								
Therapeutics								

RECOMMENDED BOOKS

SI. No.	Name of the Book	Author	Publisher
1.	Textbook of Obstetrics & Neonatology	C. S. Dawn	Smt. Arati Dawn
2.	The application of the Principles & Practice of Homoeopathy to Obstetrics	H.N. Guernsey	B. Jain Publishers, New Delhi
3.	Practical Handbook of Gynaecology with Therapeutic hints	J. H. Marsden	B. Jain Publishers, New Delhi
4.	Clinical Gynaecology	Jameswood	B. Jain Publishers, New Delhi
5.	Guide to Gynaecology	A. K. Sharma	B. Jain Publishers, New Delhi
6.	The ladies manual of homoeopathic treatment	E.H. Ruddock	B. Jain Publishers, New Delhi
7.	A textbook of Gynaecology	A.C. Cowperthwaite	B. Jain Publishers, New Delhi
8.	An Obstetric Mentor	Clarence M. Conant	B. Jain Publishers, New Delhi
9.	Homoeopathic Therapeutics as applied to Obstetrics	Sheldon Leavitt	B. Jain Publishers, New Delhi
10.	Mudaliar and Menon's clinical obstetrics 9th Edition	Mudaliar	Orient Longman Ltd.
11.	Textbook of obstetrics	D. C. Dutta	New Central Book Agency, Kolkatta
12.	The signs and concomitant derangements of pregnancy	William Morgan	B. Jain Publishers, New Delhi
13.	Organ diseases of woman	J. Compton Burnett	B. Jain Publishers, New Delhi
14.	Disorders of Menstruation	A.C. Cowperthwaite	B. Jain Publishers, New Delhi
15.	Textbook of Gynaecology	C. S. Dawn	5mt. Arati Dawn
16.	Shaw's Textbook of Gynaecology	Shaw	B.I. Churchill Livingstone
17.	An application of principles and practice of homoeopathy to obstetrics	H.N. Guernsey	B. Jain Publishers, New Delhi
18.	Uterine therapeutics	Minton	B. Jain Publishers, New Delhi
19.	Organ Diseases of Woman	Burnet. J. C	B. Jain Publishers, New Delhi
20.	Text Book of Gynaecology	Howkins & Bourne's Shaws	Elsevier Health Science

REFERENCE BOOKS

SI.	Name of the Book	Author	Publisher
No.	A Classical de	C + C++ (2010	D. I. '. D. I.I.' I
1.	An Obstetric Mentor	Conant CM. (2010	B. Jain Publishers.
		Reprint)	New Delhi
2.	Clinical Materia-Medica (re print edition)	Farrington EA. (2013 Reprint)	B. Jain publishers. New Delhi
3.	Diseases of females & Infants at the Breasts	G H G Jahr (2004	B Jain Publishers
	(Reprint edition)	Reprint)	New Delhi
4.	Clinical Therapeutics (2nd edition)	Hoyne Temple S	B Jain Publishers.
		(2010 Reprint)	New Delhi
5.	Therapeutic Guide 40 yrs practice (reprint	Jahr C. (2015 Reprint)	B Jain Publishers.
_	edition)		New Delhi
6.	Principles of Gynecology (8th edition no)	Jeffcott (2014)	Butter world & Co Publishers Ltd- London
7.	Text book of Obstetrics & Gynecology including	Kandpal AK, Bhagat	B-Jain Publishers.
	neonatology with Homoeopathic Therapeutics (1st edition)	T, Jain R. (2004)	New Delhi
8.	Gynecologic& Obstetrics (Reprint edition)	Kulkarni S(2009)	B Jain publishers. New Delhi
9.	Homoeopathic Therapeutics (2 nd revised edition)	Lilienthal S. (2012	B Jain
		Reprint)	Publishers.
			New Delhi
10.	Dysfunctional uterine bleeding (1st edition)	Purandare C N. (2006)	Jaypee Publishers Ltd. New Delhi
11.	Holland & Brews Manual of Obstetrics (14th	Robert P (1986)	Churchill
	edition)		Livingstone Pvt
			Ltd New Delhi
12.	Essentials of Obstetrics (2nd edition)	Sabaratnam AK.	Jaypee
		(2011)	Publications. New
			Delhi
13.	Text book of Obstetrics and Gynecology (1st	Salhan S. (2011)	Jaypee Publishers
	edition)		Ltd. New Delhi
14.	Text book of Obstetrics (2nd edition)	Sheila Balakrishnan.	Paras Medical
		(2013)	Publishers .New
			Delhi
15.	Practical handbook of Gynecology with	Verma S.P. (2001)	B Jain publishers
	therapeutics (Reprint edition)		New Delhi

PRACTICE OF MEDICINE AND HOMOEOPATHIC THERAPEUTICS

INTRODUCTION:

- I. Homoeopathy has a distinct approach to the concept of disease. It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts. It emphasizes the study of man from his state of health, till it travels to the state of presenting illness, incorporating all major events and contributing factors in the process. The individualization study needs thorough background of:
 - 1. Basic Human Sciences like Anatomy, Physiology, Biochemistry, Pathology and Microbiology.
 - 2. Fundamental Principles of Homoeopathy, Homoeopathic Materia Medica and Therapeutics.

Homoeopathic student shall be trained in a manner in which he is not locked up in studying rare syndromes as theoretical exercise but as a sound clinician with adequate discrimination, sharp observation and conceptual clarity so that he will be able to mould an effective appreciation of the patient's picture utilizing his knowledge of medicine.

- II. The study of the above concept of individualization is essential with the a following background so that the striking features which are characteristic to the individual become clear, in contrast to the common picture of the respective disease conditions, namely:-
 - 1. Correlation of the disease conditions, with basics of Anatomy, Physiology and Biochemistry and Pathology.
 - 2. Knowledge of causation, manifestations, diagnosis (including differential diagnosis), prognosis and management of diseases.
 - 3. Application of knowledge of Organon of Medicine and Homoeopathic Philosophy in dealing with the disease conditions.
 - 4. Comprehension of applied part.
 - 5. Sound clinical training at bedside to be able to apply the knowledge and clinical skill accurately.

- 6. Adequate knowledge to ensure that rational investigations are utilized.
- III. a) The emphasis shall be on study of man in respect of health, disposition, diathesis, disease, taking all Predisposing and precipitating factors, i.e. fundamental cause, maintaining cause and exciting Cause;
 - b) Hahnemann's Theory of ChronicMiasms provides us an evolutionary understanding of the chronic diseases: Psora,Sycosis, Syphilis and acute manifestations of chronic diseases and evolution of the natural disease shall be comprehended in the light of Theory of Chronic Miasms.
- IV. a) The teaching shall include homoeopathic therapeutics or management in respect of all topics and clinical methods of examination of patient as a whole will be given due stress during the training.
 - b) A thorough study of the above areas will enable a homoeopathic physician to comprehend the practical aspects of medicine.
 - c) He shall be trained as asound clinician with adequate ability of differentiation, sharp observation and conceptual clarity about diseases by taking help of all latest diagnostic techniques, viz. X-ray, ultrasound, electrocardiogram, and commonly performed laboratory investigations.
 - d) Rational assessment of prognosis and general management of different disease conditions are also to be focused.
- V. Study of subject the study of the subject will be done in twoyears in Third B.H.M.S and Fourth B.H.M.S but examination shall be conducted at the end of Fourth B.H.M.S.

OBJECTIVES:

At the end of the course student shall be able to:

- 1. Take case in detail keeping in mind the scientific and artistic approach.
- 2. Make a thorough physical general examination and systemic examination.
- 3. Understand the common investigations appropriate to his/her case.
- 4. Interpret the results of investigation to know the pace of the disease and its progress.

- 5. Correlate the health disturbances with basics of Anatomy, Physiology and Biochemistry.
- 6. Understand the evolution of disease about its causation, manifestations, maintenance and Prognosis.
- 7. Make plan of treatment including general measures, diet and regimen.
- 8. Understand the scope and limitations of homoeopathy in a given case including identification of medical emergencies and take appropriate measures.

3rd YEAR BHMS

PRACTICE OF MEDICINE AND HOMOEOPATHIC THERAPEUTICS

Course Content:

A. Theory: 75 Hours

While teaching Practice of Medicine a special emphasis should be made to applied anatomy and applied physiology of the respective system as stated below and knowledge of clinical examination of respective systems should a part of teaching these systems.

SI. No	Topic / chapters	Hours allotted	Marks
1	Respiratory diseases	21 hrs	34 marks
2	Diseases of digestive system and peritoneum	21 hrs	34 marks
3	Diseases concerning liver, gall- bladder and pancreas	16 hrs	16 marks
4	Genetic Factors (co- relating diseases with the concept of chronic miasmas)	05 hrs	05 marks
5	Immunological factors in diseases with concept of susceptibility (including HIV, Hepatitis-B)	05 hrs	03 marks
6	Disorders due to chemical and physical agents and to climatic and environmental factors.	02 hrs	03 marks
7	Water and electrolyte balance –disorders of	05 hrs	05 marks

B. Practical or Clinical: 75 Hours

- a) Each candidate shall submit twenty complete case records (ten in third B.H.M.S and ten in Fourth B.H.M.S)
- b) The examination procedure will include one long case and one short case to be prepared during clinical training. Each student has to be given adequate exposure to:-
 - 1. Comprehensive case taking following Hahnemann's instructions;
 - 2. Physical examinations (general, systemic and regional);
 - 3. Laboratory investigations required for diagnosis of disease conditions;
 - 4. Differential diagnosis and provisional diagnosis and interpretation on Investigation reports;
 - 5. Selection of similimum and general management.

Examination: There shall be no examination in this subject in Third Year BHMS.

4thYEAR BHMS

PRACTICE OF MEDICINE AND HOMOEOPATHIC THERAPEUTICS

Course Content:

A. Theory: 180 Hours

While teaching Practice of Medicine and Homeopathic Therapeutics an emphasis should be made on;

- Applied anatomy and applied physiology of different organ and system relating to specific diseases.
 - Knowledge of clinical examination of respective system.
- a) General management and Homoeopathic therapeutics for all the topics to be covered in third B.H.M.S and Fourth B.H.M.S shall be taught simultaneously and the emphasis shall be on study of man in respect of health, disposition, diathesis, disease, taking all predisposing and precipitating factors, i.e. fundamental cause, maintaining cause and exciting cause.
- b) Study of therapeutics does not mean simply list of specifics for the clinical conditions but teaching of applied Meteria Medica which shall be stressed upon.

SI. No	Topic / chapters	Hours	Marks
		allotted	
1	Nutritional and metabolic diseases	06 hrs	03
2	Diseases of haemopoietic system	13 hrs	08
3	Endocrinal diseases	11 hrs	05
4	Infectious diseases	18 hrs	08
5	Diseases of cardiovascular system	22 hrs	13
6	Diseases of urogenital Tract	12 hrs	08
7	Diseases of CNS and peripheral nervous system	25 hrs	18
8	Psychiatric disorders	14 hrs	05
9	Diseases of locomotor system (connective tissue, bones and joints disorders)	13 hrs	08
10	Diseases of skin and sexually transmitted diseases	15 hrs	08
11	Tropical diseases	10 hrs	05
12	Pediatric Disorders	16 hrs	08
13	Geriatric disorders	05 hrs	03

B. Practical or Clinical: 150 Hours

- a) Each candidate shall submit of twenty complete case records (ten in third B.H.M.S and ten in Fourth B.H.M.S)
- b) The examination procedure will include one long case and one short case to be prepared during clinical training, each student has to be given adequate exposure to:-
 - 1. Comprehensive case taking following Hahnemann's instructions;
 - 2. Physical examinations (general, systemic and regional);
 - 3. Laboratory investigations required for diagnosis of disease conditions;
 - 4. Differential diagnosis and provisional diagnosis and interpretation on Investigation reports;
 - 5. Selection of similimum and general management.

SCHEME OF EXAMINATION:

A. Theory:

Number of Papers : 02

Paper I : 100 Marks

Paper II : 100 Marks

Contents

Paper: I – Topics of Third BHMS with Homoeopathic Therapeutics

Paper: II – Topics of Fourth BHMS with Homoeopathic Therapeutics

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks			•	100

B. Practical including Viva Voce or Oral:

1. Practical: 100 Marks

-One long case 40
-One short case 20
-Practical records, case records, Journal 15
-Identification of specimens (X-ray, ECG, etc) 25

Maximum Marks: 200

2. Viva voce (Oral) Examination: 100 Marks

(Note: The case reports of the students carried out during the course shall also be considered for the oral examination)

MARKS DISTRIBUTION

	Theory		Practical & Oral				Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Practice of Medicine with Homoeopathic Therapeutics	200	100	100	100	200	100	400	200

RECOMMENDED BOOKS

SI. No.	Name of the Book	Author	Publisher	
1.	Davidson's Principles and Practice of Medicine	J. Alastair Innes -Ed by	Churchill Livingstone	
2.	Manual of Practical Medicine	R. Alagappan	Jaypee Brothers	
3.	Essential Paediatrics	O.P. Ghai	Interprint, New Delhi	
4.	Children type	Borland	B. Jain, New Delhi	
5.	Homoeopathy & child care	Shashi Kant Tiwari	B. Jain, New Delhi	
6.	Medicine for students	Golwala	A.F. Golwala	
7.	Synopsis of psychiatry	Kaplan and Saddock	Williams and Wilkins	
8.	Essentials of Dermatology	J.L. Burton	Churchill Livingstone	
9.	Hutchison's Clinical Methods	M. Swash	W. B. Saunders	
10.	Chamberlain's symptoms and signs in clinical medicine	Collin & Christopher	Butterworth & Co. Ltd.	
11.	Psychiatry and Homoeopathy	Fernando	B. Jain, New Delhi	
12.	A guide to physical examination and history taking	Barbara Bates	JB Lippincott company	
13.	Homoeopathic therapeutics	Lilienthal	B. Jain, New Delhi	
14.	Clinical therapeutics Vol- I and II	Hoyne	B. Jain, New Delhi	
15.	Practical homoeopathic therapeutics	Dewey	B. Jain, New Delhi	
16.	A manual of homoeopathic therapeutics	Neatby	B. Jain, New Delhi	
17.	Diseases of lungs	Ch; Gatchell	B. Jain, New Delhi	
18.	The science of therapeutics Vol- I and II	Bernhard Bachr	B. Jain, New Delhi	
19.	Constitutional therapeutics	A.W. Woodward	B. Jain, New Delhi	
20.	Diseases of the heart	A. L. Blackwood	B. Jain, New Delhi	
21.	Special pathology and diagnostics with therapeutics hints	Raue	B. Jain, New Delhi	
22.	Therapeutics of the respiratory system	Vandenburg	B. Jain, New Delhi	

REFERENCE BOOKS

SI. No.	Name of the Book	Author	Publisher
1.	The Science of Therapeutics	Baehr Bernhard. (1875)	Boericke and Tagel - New York
2.	Bate's Guide to Physical Examination and History taking 8 th edition	Bickley Lynns. (2002)	Lippincott Williams and Wilkins; Philadelphia.
3.	Diseases of the Heart	Blackwood AL. (2001Reprint)	B. Jain Publishers (P) Ltd; New Delhi
4.	Children's Types. 2 nd edition	Borland Douglas M. (1997 Reprint)	Indian Books and Periodical Publishers; New Delhi
5.	Harrison's Principles of Internal Medicine. 15 th edition	Braunwald E, Fauci AS, Kaper DL, Hauser SL, Longo DL, Jameson JL. (2001)	MC Graw Hill; New York
6.	Essentials of Dermatology. 3 rd edition	Burtn JL. (1985)	Churchill Livingstone; Edinburgh
7.	Diseases of the Lungs	Gatchell Charles. (2015)	Book on Demand Ltd; New Delhi
8.	A Manual of Homoeopathic Therapeutics. 2 nd edition	Neatby EA and Stonham TG. (2001 Reprint)	B. Jain Publisher (P) Ltd; New Delhi
9.	Psychiatry and Homoeopathy. 1 st edition	Risquez Fernado. (1995)	B. Jain Publisher (P) Ltd; New Delhi
10.	Kaplan and Sadock's Synopsis of Psychiatry. 10 th edition	Sadock BJ, Sadock VA. (2016)	Lippincott Williams and Wilkins; Philadelphia
11.	Homoeopathy and Childcare	Tiwari Shashikant. (1998)	B. Jain Publishers (P) Ltd; New Delhi
12.	Therapeutics of Respiratory System	Vandenburg MW. (2002 Reprint)	B. Jain Publisher (P) Ltd; New Delhi
13.	Oxford Text Book of Medicine. 4 th edition	Warrell DA, CoxTM, Firth JD, Jr Benz, J Edward. (2003)	Oxford University Press; New York
14.	Constitutional Therapeutics	Woodward WA. (1993 Reprint)	B. Jain Publishers (P) Ltd; New Delhi

COMMUNITY MEDICINE

(INCLUDING HEALTH EDUCATION AND FAMILY MEDICINE)

INTRODUCTION:

Instruction in this course should be given in the third and the fourth year of Medical Studies by lectures, demonstrations and field studies. This subject is of utmost importance and throughout the period of medical studies the attention of student should be directed to the importance of Community Medicine and the measures for the promotion of positive health. His function is not limited merely to prescribing Homoeopathic Medicine for curative purpose but he has a wider role to play in the community. He has to be well conversant with the national health problems both of rural as well as urban areas, so that he can be assigned responsibilities to play an effective role not only in the field of curative but also of Preventive and Social Medicine including Family Planning.

INSTRUCTIONS:

- a) Physician's function is not limited merely prescribing homoeopathic medicines for curative purpose but he has wider role to play in the community.
 - b) He has to be well conversant with the national health problems of rural as well as urban areas, so that he can be assigned responsibilities to play an effective role not only in the field of curative but also preventive and social medicine including family planning.
- Il This subject is of utmost importance and throughout the period of study attention of the student should be directed towards the importance of preventive medicine and the measures for the promotion of positive health.
- a) During teaching, focus should be laid on community medicine concept, man and society, aim and scope of preventive and social medicine, social causes of disease and social problems of the sick, relation of economic factors and environment in health and disease:
 - b) Instruction in this course shall be given by lectures, practicals, seminars, group discussions, demonstration and field studies.

OBJECTIVES:

A student shall be able to:

- 1. Organize elementary epidemiological studies to assess the health problems in the area. For this he should be able to design a study, collect data, analyze it with statistical tests, make a report and be able to participate in health information systems.
- 2. Prioritize the most important problems and help formulate a plan of action to manage them under National Health Programme guidelines including population control and Family Welfare Programme.
- 3. Demonstrate the knowledge of principles of organizing prevention and control of communicable and non-communicable diseases by incorporating the Hahnemannian concept of prevention and control of communicable and non-communicable diseases.
- 4. Organize health care service for special groups like mother, infants, under five children and school children, handicapped, adolescents, geriatric, rural, tribal and urban slum dwellers.
- 5. Organize health care in case of calamities by following the guidelines given in Hahnemann's Organon of Medicine.
- 6. Inculcate values like compassion, empathy to poor, rationale and ethical practice, honesty, sincerity, integrity to ensure quality professional practice.
- 7. Work as an effective leader of the health team within the primary health care setup.
- 8. Coordinate with and supervise other members of the health team and maintain liaison with various agencies. (Government, non-government and voluntary organizations).
 - a. Plan and implement health education programmes.
 - b. Promote community participation especially in areas of disease control, health education and implementation of national programmes.
 - c. Aware of national priorities and the goal to be achieved to implement primary health care including the Health for All.

3rd YEAR BHMS

COMMUNITY MEDICINE

To achieve the above objectives, syllabus is described below. The course of study is for two years during III and IV Year BHMS. Examinations shall be held in IV Year BHMS.

Course Content:

Theory: 35 Hours

SL. No	TOPIC / CHAPTERS	HOURS ALLOTTED	MARKS
		35 hrs	40
1	Man and Medicine	1 hrs	marks
2	Concept of Health and Disease in conventional Medicine and	2 hrs	
	Homoeopathy		
3	Nutrition and Health	8 hrs	
	a) Food and nutrition		
	b) Food in relation to health and disease		
	c) Balanced diet		
	d) Nutritional deficiencies, and Nutritional survey		
	e) Food Processing		
	f) Pasteurization of milk		
	g) Adulteration of food		
	h) Food Poisoning		
4	Environment and health	10 hrs	
	a) Air, light and sunshine, radiation		
	b) Effect of climate		
	c) Comfort zone		
	d) Personal hygiene		
	e) Physical exercise		
	f) Sanitation of fair and festivals		
	g) Disinfection and sterilization		
	h) Atmospheric pollution and purification of air		
	i) Airbome disease		
5	Water	8 hrs	
	a) distribution of water uses: impurities and purification		
	b) standards of dirking water		1
	c) water borne diseases		
	d) excreta disposal		1
	e) disposal of deceased		
	f) disposal of refuse		

	g) Medicalentomology- insecticides, disinfection, insects in relation to disease, insect control		
6	Occupational health	3 hrs	
7	Preventive Medicine in Pediatrics and Geriatrics	3 hrs	

B. PRACTICALS: 15 Hours

- 1. Food additives: food fortification, food adulteration: food toxicants
- 2. Balanced diet
- 3. Survey of nutritional status of school children pollution and water purification

Note:

- 1. For field visits Annexure 'B' has to be kept in view.
- 2. Student are to maintain practical records or journals in support of above practical or field visits.
- 3. Report of the above field visits are to be submitted by the students.
- 4. Each student has to maintain records of at least ten infectious diseases.

4th Year BHMS

COMMUNITY MEDICINE

(INCLUDING HEALTH EDUCATION AND FAMILY MEDICINE)

Course Content:

A. Theory: 100 Hours

SL. No	TOPIC / CHAPTERS	HOURS ALLOTTED	MARKS
1	Epidemiology	45 hrs	60
	a) Principles and Methods of Epidemiology		
	b) Epidemiology of communicable diseases- General principles of prevention and control of communicable diseases		
	 c) Communicable diseases: their description, mode of spread and method of prevention. 		
	d) Protozoan and helminthic infections- life cycle of protozoa and helminthes, their prevention		
	e) Epidemiology of non- communicable diseases: general principles of prevention and control of non- communicable diseases		
	f) Screening of diseases		
2	Bio-Statistics	8 hrs	
	a) Need of biostatistics in medicine		
	b) Elementary statistical methods		
	c) Sample size calculation		
	d) Sampling methods		
	e) Test of significance		
	f) Presentation of data		
	g) Vital statistics		
3	Demography and family planning: population control: Contraceptive practices: National Family Planning Programme	47 hrs	
	Health education and health communication		
	2) Health care of community		
	3) International Health		
	4) Mental Health		
	5) Maternal and Child Health		

6) School and Services	
7) National Health Programs of India including Rashtriya Bal Chikitsa Karyakram	
8) Hospital waste management	
9) Disaster Management	
10) Study of aphorisms of Organon of Medicine and other Homeopathic literatures, relevant to above topics including prophylaxis	

B. PRACTICALS: 100 Hours

- 1. Medical entomology
- 2. Family planning and contraception
- 3. Demography
- 4. Disinfection
- Insecticides

Field Visits

- 1. Milk dairy
- 2. Primary Health Centre
- 3. Infectious Diseases Hospital
- 4. Industrial Unit
- 5. Sewage treatment plant
- 6. Water Purification plant

Note:

- 1. For field visits Annexure 'B' has to be kept in view
- 2. Students are to maintain practical records or journals in support of above practical or field visits
- 3. Report of the above field visits are to be submitted by the students.
- 4. Each student has to maintain records of at least ten infectious diseases.

SCHEME OF EXAMINATION:

Examination in this subject will be conducted in Fourth Year BHMS (not in Third Year BHMS)

A. Theory:

Number of Paper : 01

Maximum Marks ; 100

Distribution of Marks:

Topics from Third BHMS - syllabus: - 40 Marks

Topics from Fourth BHMS syllabus: -60 marks

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks				100

Maximum Marks: 100

B. Practical including Viva Voce or Oral:

1. Practical: 50 Marks

1) Spotters 30

2) Journal or Practical records (including field visit records) 20

2. Viva Voce (Oral) Examination: 50 Marks

MARKS DISTRIBUTION

	Theory		Practical & Oral			Grand Total		
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Community Medicine	100	50	50	50	100	50	200	100

RECOMMENDED BOOKS

SI. No	Name of the Book	Author	Publisher
1.	Park's textbook of Preventive and	K. Park	M/s Banarsidos Bhanot 1167,
	Social Medicine		Prem nagar, Jabolpur 482001
2.	Textbook of Preventive and Social Medicine	M.C. Gupta and BK Mahajan	Jaypee Brothers, New Delhi.
3.	Organon of Medicine	S. Hahnemann	B.Jain Publishers
4.	Community Medicine with Recent Advances – 3 rd Edition	A.H. Suryakantha	Jaypee Publishers, New Delhi

REFERENCE BOOKS

Sl. No.	Name of the Book	Author	Publisher
1.	National Health Programs of India National Policies and Legislations Related to Health -11 th Edition	J. Kishore	Century Publications
2.	Essentials of Community Medicine Practicals, 1 st Edition	DK Mahabalaraju	Jaypee Publishers, New Delhi
3.	Handbook of Community Medicine, 1 st Edition	Mangala Subramanian	Jaypee Publishers, New Delhi, 2012
4.	Textbook of Community Medicine; Preventive and Social Medicine, 2 nd Edition	Sunder Lal, Adarsh, Pankaj	CBS Publishers and Distributors, New Delhi
5.	Oxford Textbook of Public Health Roger Detels, Robert Beaglehole, Mary Ann Lansang and Martin Gulliford	Roger Detels, Robert Beaglehole, Mary Ann Lansang and Martin Gulliford	Oxford University Press, USA.
6.	A Comprehensive Text Book of Community Medicine	J. S. Mathur	CBS Publishers and Distributors, New Delhi
7.	Principles & Practice of Community Medicine	Asma Rahim	Jaypee Publishers, New Delhi
8.	Homoeopathy for all		
9.	Homoeopathic Preventive Medicine	Kate Birch	
10.	Where there is no Doctor	David Werner	Hesperian Health Guides
11.	Text Book of Public Health and Community Medicine, 2009	Arvind Kushwaha	Dept. of Community Medicine,AFMC Pune in Collaboration with WHO India
12.	Textbook of Preventive Medicine	Balaram Jana	B. Jain Publishers, New Delhi

CASE TAKING & REPERTORY

INTRODUCTION:

Repertory is an index of symptoms of the Homoeopathic Materia Medica with their corresponding medicines given in gradation arranged systematically. Homoeopathic Materia Medica is an encyclopedia of symptoms. No mind can memorize all the symptoms of all the drugs with their characteristic gradation. The study of Repertory consists of case taking and repertorisation and the Repertory proper.

INSTRUCTION:

- a) Repertorisation is not the end but the means to arrive at the similimum with the help of Materia Medica based on sound knowledge of Homoeopathic philosophy.
 - b) Homoeopathic Materia Medica is an encyclopedia of symptoms. No mind can memorize all the symptoms or all the drugs with their gradations:
 - c) The repertory is an index and catalogue of the symptoms of the Materia Medica, neatly arranged in a practical or clinical from, with the relative gradation of drugs, which facilities quick selection of indicated remedy and it may be difficult to practice Homoeopathy without the aid of repertories.
- II. a) Each repertory has been compiled on distinct philosophical base, which determines its structure.
 - b) In order to explore and derive full advantage of each repertory it is important to grasp thoroughly is conceptual base and construction and this will help student to learn scope, limitation and adaptability of each repertory.

OBJECTIVES:

A student shall be able to:

- 1 Understand the importance of case taking and record keeping.
- 2 Take the case (both acute and chronic) according to Hahnemannian concept.
- 3 Understand the views of various authors in case taking like Kent, Roberts, Boenninghausen and Boger.

- 4 Understand the difficulties in case taking -one sided diseases, paediatric etc.
- 5 Make out the totality of symptoms and repertorial totality.
- 6 Understand the definition, purpose, and various terminologies used in the repertory.
- 7 Understand the commonly used repertories in relation to their historical background, philosophical background, plan and construction, adaptability and limitations.
- 8 Understand that the repertorisation is not the end but means to arrive at simillimum together with Materia Medica based on sound principles of philosophy.
- 9 Understand modernmethods of repertorisation including use of computer.
- 10. Understand the definition, pre and post-repertorisation requisites.

3rd Year BHMS CASE TAKING & REPERTORY

Course Content

Theory: 50 Hours

SL. No	TOPIC / CHAPTERS	HOURS ALLOTTED	MARKS
1	Repertory: Definition:Need Scope and Limitations Conversion of symptomsinto rubrics for repertorisation using different repertories Terms and language of repertories (Rubric)cross references in other repertories and Materia Medica Repertory –its relation with organon of medicine and materia medica.	3 hrs	5
2	Classification of Repertories	2 hrs	3
3	a) Study of Kent Repertory History, Philosophical background, Structure, Concept of repertorisation, Adaptability, Scope and Limitation(s)	9 hrs	
	b) Study of Boenninghausen Repertory History, Philosophical background, Structure, Concept of repertorisation, Adaptability, Scope and Limitation(s)	4 hrs	24
	c) Study of Boger–Boenninghausen Repertory History, Philosophical background, Structure, Concept of repertorisation, Adaptability, Scope and Limitation(s)	4 hrs	
4	Gradation of Remedies by different Authors	1 hr	3
5	Methods and techniques ofrepertorisation	2 hrs	5
6	Case taking and related topics a) Case taking b) Difficulties of case taking, particularly in chronic case c) Types of symptoms, their understanding and importance d) Importance of pathology in disease diagnosis and individualization in relation to study of repertory. Case processing and Steps of repertorisation a) Analysis and evaluation of symptoms b) Miasmatic assessment c) Totality of symptoms or conceptual image of the patient d) Repertorial totality e) Selection of rubrics f) Repertorial technique and results g) Repertorial analysis	25 hrs	30

B. Practical or Clinical: 25 Hours

- 1. Record of five cases each of Surgery, Gynaecology and Obstetrics worked out by using Kent's Repertory.
- 2. Rubrics hunting from Kent's & Boenninghausen's Repertories.

Note: There will be no Examination in this subject in Third Year B.H.M.S

4thYEAR BHMS CASE TAKING AND REPERTORY

Course Content

A. Theory: 100 Hours

SL.	TOPIC / CHAPTERS	HOURS	MARKS
No		ALLOTTED	
1	Comparative study of different repertories(like Kent's Repertory,	47 hrs	10
	Boenninghausen's Therapeuticpocket book and Boger-		
	Boenninghausen's Charactetristic Repertories, A Synoptic key to Materia		
	Medica).		
2	Card repertories and other mechanical aided repertories- History, Types	1 hr	-
	and Use		
3	Concordance repertories (Gentry and Knerr Repertory)	2 hrs	5
4	Clinical Repertories including Regional Repertories	10 hrs	5
	(William Boericke etc.)		
5	An introduction to modern Thematic Repertories- (Synthetic, Synthesis	15 hrs	5
	and Complete Repertoryand Murphy's Repertory)		
6	Role of computers in Repertorisation and different softwares	25 hrs	5

B. PRACTICAL OR CLINICAL: 150 Hours

Students shall maintain the following records, namely:-

- 1. Five acute and five chronic cases (each of Medicine, Surgery and Obstetrics and Gynaecology) using kent's Repertory.
- 2. Five cases (pertaining to medicine) using Boenninghausen's therapeutics pocket book.
- 3. Five cases (pertaining to medicine) using Boger-Boenninghausen's characteristics repertory.
- 4. Five cases to be cross checked on repertories using Homoeopathic software.

SCHEME OF EXAMINATION:

Examination in this subject will be conducted in Fourth Year BHMS (not in Third Year BHMS)

A. Theory: Duration: 3 Hours

Number of Paper : 01

Maximum Marks : 100

Types of Question with Marks

Type of Questions	No. of Questions	No. of Questions	Marks per	Total
	Asked	to be attempted	Question	
Long Essays	02	02	10	20
Short Essays	12	10	05	50
Short Answers	10	10	03	30
Maximum Marks				100

B. Practical including Viva Voce or Oral: Max. Marks = 100

1. Practical / Clinical:50 Marks

Long case: 30 marks

Short case: 10 marks

Practical Record/Journal: 10 marks

Case	Case taking	Case analysis	Repertorisation	Result and drug selection	Total marks
Long	10	10	05	05	30
Short	04	03	02	01	10
Practical					10
Record/Journal					
Total					

2. Viva-Voce: 50 Marks

MARKS DISTRIBUTION

	Theory		Practical & Oral				Grand Total	
Subject	Max Marks	Pass Marks	Max Practical Marks	Max Oral Marks	Total Practical & Oral	Pass Marks	Max Marks	Pass Marks
Case Taking & Repertory	100	50	50	50	100	50	200	100

RECOMMENDED BOOKS

SI. No.	Name of the Book	Author	Publisher
1.	Boenninghausen's characteristics and Repertory	C.M.Boger	B. Jain, New Delhi
2.	Synoptic key of Materia medica	Boger	B. Jain, New Delhi
3.	Lesser writing of CMF Von Boenninghausen	Bradford, Thomas Windsley	B. Jain, New Delhi
4.	Encyclopedia of repertory	Castro	B. Jain, New Delhi
5.	Principles and practice of Homoeopathy	M.L. Dhawale	ICR Mumbai
6.	Concordance repertory	Gentry, William D	B. Jain, New Delhi
7.	Kent's Repertory of the Homoeopathic Materia medica with word index	J.T.Kent	B. Jain, New Delhi
8.	Index to card repertory	Jugal Kishore	B. Jain, New Delhi
9.	Repertory of Hering's guiding symptoms of our Materia medica	Calvin Knerr	B. Jain, New Delhi
10.	Perceiving the rubrics of mind	Farokh J. Master	B. Jain, New Delhi
11.	Boenninghausen's therapeutic pocket book	T. F. Allen	B. Jain, New Delhi
12.	Treatise on Homoeopathic Repertories	Adi. S.S.	Jyothi Publications, Belgaum
13.	Essentials of Repertorisation	Shashi Kant Tiwari	Modern Homoeo- pathic Publications
14.	Repertorising	M.L. Tyler and John Weir	B. Jain, New Delhi
15.	Essentials of Homoeopathic philosophy and place of repertory in homoeopathic practice	B. K. Sarkar	M. Bhattacharya
16.	Introduction to principles of repertorisation	Munir Ahmed R.	Books and Allied (P) Ltd. Calcutta

REFERENCE BOOKS

Sl. No.	Name of the Book	Author	Publisher	
1.	Lesser writing	Kent J. T.	B. Jain Publishers, New Delhi	
2.	Studies of Philosophy of Healing	Boger C. M	B. Jain Publishers, New Delhi	
3.	Pocket Manual of Homoeopathic Materia Medica and Repertory	Boericke W & Boericke OE	B. Jain Publishers, New Delhi	
4.	Therapeutics of fever	Allen H. C.	B. Jain Publishers, New Delhi	
5.	Intermittent Fevers	Allen W	B. Jain Publishers, New Delhi	
6.	The Homoeopathic Therapeutics of Dierrhoea, Dysentry. Cholera, Cholera Morbus, Cholera Infantum	Bell. J	B. Jain Publishers, New Delhi	
7.	Clinical Repertory	Clarke J. H	B. Jain Publishers, New Delhi	
8.	ICE Symposium volume. 3	Dhawale M. L	Area D. ICR Publications. Mumbai	
9.	Introduction of Homoeopathic Prescribing	Gunavante S. M	B. Jain Publishers, New Delhi	
10.	Uterine Therapeutics	Minton H	B. Jain Publishers, New Delhi	
11.	Alchemy of Homoeopathic Methodology-fundamentals of repertory study	Munir A. R	Hi Line Publishers, Bengaluru	
12.	A Concise Repertory	Phatak S. R	B. Jain Publishers, New Delhi	

LAW - INDIAN CONSTITUTION

GOAL: The students should gain the knowledge and insight into the Indian Constitution so that they are aware of the fundamental rights and freedom bestowed through the democratic governance of our country.

Objectives:

a) Knowledge:

At the end of the course the student is expected to know:

- Basic knowledge of the Indian Constitution.
- Democratic Institutions created by the Constitution.
- Special right created by the Constitution for regional and linguistic monitories.
- Election commission.
- Legislative, Executive and Judicial powers and their functions in India.

b) Skills:

At the end of the course the student is expected to make use of knowledge:

- To perform his/her duties towards the society.
- Judiciously and with conscious effort for self-development.
- To utilize state policies in their future practice.

Duration of the Module: Module will be taught in 1st year BHMS.

Attendance and Progress: A minimum of 75% of the attendance is required to be eligible to appear for examination, provided his/her progress and conduct are counted to be satisfactory by the Principal.

Examination: Examination will be conducted as Insitutuional Examination along with 1st Internal Assessment Examination for 2 hours duration and marks will be added in the University marks card of 1st year BHMS. However, these marks will not be considered for declaration of results of 1st year BHMS.

Theory Question paper pattern

No.	Division		Marks Per Question	Total Marks	Grand Total
01	MCQ	10	1	10	
02	Long Essay Questions	1	10	10	_
03	Short Essay Questions	3	5	15	50
04	Short Answers	5	3	15	

Criteria for Passs:

- A candidate must obtain 35% marks (18 marks) to declare as pass.
- Failed candidates must appear supplementary examination along with subsequent Internal Assessment Examination.
- The result of the 1st year BHMS examinations will be withheld in case the student fails to pass the subject.
- These marks will not be considered for declaration of University Rank / Distinction / Class.