



**BHARATI VIDYAPEETH
(DEEMED TO BE UNIVERSITY) PUNE (INDIA)**

Accredited by NAAC with 'A+' Grade

Faculty of Homoeopathy

**COMPETENCY BASED DYNAMIC
CURRICULUM FOR
2ND BHMS PROFESSIONAL COURSES - 2022**

**HOMOEOPATHY EDUCATION BOARD
NATIONAL COMMISSION FOR HOMOEOPATHY**

MINISTRY OF AYUSH, GOVERNMENT OF INDIA



SYLLABUS AND EXAMINATION PATTERN

Bharati Vidyapeeth

Bharati Vidyapeeth, the parent body of Bharati Vidyapeeth (Deemed to be University) was established in May, 1964 by Dr. Patangrao Kadam with the objective of bringing about intellectual awakening and all round development of people of our country through education. Since its establishment, it has maintained the highest standards and has proliferated inventive practices in the education sector.

In the year 2013-14, Bharati Vidyapeeth celebrated the glorious Golden Jubilee year of imparting education and inculcating moral values among the youth. During the last 5 decades, Bharati Vidyapeeth has made astonishing strides in the field of education. It is now a leading educational institution in the country, which has created history by establishing within a span of 59 years, 180 educational institutions imparting education from the pre-primary to the post graduate stage.

These educational institutions which have achieved an acclaimed academic excellence cater to the educational needs of thousands of students coming from different parts of India and abroad. Our teaching faculty includes highly qualified, experienced, dedicated and student-caring teachers. These educational institutions are located at various places viz. Pune, Navi Mumbai, Kolhapur, Solapur, Sangli, Karad, Panchagani, Jawhar and New Delhi. The colleges are affiliated to various universities including Bharati Vidyapeeth (Deemed to be University), University of Pune, University of Mumbai, Shivaji University Kolhapur and Indraprastha University, Delhi.

The spectacular success achieved by Vidyapeeth is mainly the result of unusual foresight, exceptionally dynamic leadership and able guidance of the founder of Vidyapeeth, Dr. Patangrao Kadam. It has been our constant endeavour to impart high quality education and training to our students and we have achieved success in these pursuits so that our institutions have earned reputation and high acclaim for their high academic standard.

Bharati Vidyapeeth (Deemed to be University):

Bharati Vidyapeeth (Deemed to be University) came into existence in April, 1996, when the Ministry of Human Resource Development, Government of India, in exercise of the powers under section 3 of the University Grants Commission Act conferred the status of University to 12 institutions of Bharati Vidyapeeth on the advice of the University Grants Commission, the apex body concerned with higher education in India which made assessment of the academic excellence achieved by the institutions through a committee of experts. Subsequent to that, the Government of India, vide its various notifications brought several other institutions of Bharati Vidyapeeth under the ambit of this University.

Bharati Vidyapeeth (Deemed to be University) is one of the largest multi-faculty, multi-campus Deemed to be Universities in the country which has created a very laudable track record of academic achievements since its inception. The University is having 29 constituent units conducting programmes under 12 different disciplines including Modern Medicine, Dentistry, Ayurved, Homoeopathy, Nursing, Arts, Science, Commerce, Engineering, Pharmacy, Management, Social Sciences, Law, Environment Science, Architecture, Hotel Management Tourism and Catering Technology, Physical Education, Computer Science, Library Science and Information Technology etc. The 29 constituent institutions of the University are located in different cities viz. Pune, New Delhi, Navi Mumbai, Kolhapur, Solapur, Sangli and Karad.

The University was firstly accredited by the National Assessment and Accreditation Council (NAAC) with the prestigious 'A' grade in 2004. It was reaccredited with 'A' grade in 2011 in its second cycle. Under third cycle of assessment, the university is accredited with 'A+' grade by the NAAC in 2017. The University has been graded as Category-I University by the UGC. The UGC has also recognized this University u/s12 (B) of UGC Act 1956. University is a Member of Association of Indian Universities and has been a Member of Association of Commonwealth Universities. NIRF Ranking of this University has been continuously within top 100 Universities in India. This year the University has been ranked at 78th position by NIRF 2023.

One of the distinctive features of this University is that it has three self-financing research institutes, which are involved in advanced research in Bio Medical Sciences, Pharmaceutical Sciences and Social Sciences.

It is a university, which is academically and intellectually very productive. Its faculty members have a very remarkable track record of research publications and patents. It has digitalized the libraries in its constituent units and has been making an extensive use of modern Information and Communication Technology in teaching, learning, research and administration. The University attracts students from all over India and abroad due to academic reputation.

Bharati Vidyapeeth (Deemed to be University), Pune, India

Accredited with 'A+' Grade by NAAC

Category - I University Status by UGC

NIRF Ranking – 78

It had been a long standing dream of our founder to get the status of a University to Bharati Vidyapeeth. That dream was realised when the Ministry of Human Resource Development (Department of Education, Government of India) on the recommendations of the University Grants Commission, New Delhi through their notification No. F.9-15/95-U.3 dated 26th April, 1996 declared a cluster of institutions of Bharati Vidyapeeth at Pune as Deemed to be University.

Present Constituent Colleges of the University

1. Medical College, Pune
2. Dental College & Hospital, Pune
3. College of Ayurved, Pune
4. **HOMOEOPATHIC MEDICAL COLLEGE, PUNE**
5. College of Nursing, Pune
6. Yashwantrao Mohite College of Arts, Science and Commerce, Pune
7. New Law College, Pune
8. Social Sciences Centre (M.S.W.), Pune
9. Yashwantrao Chavan Institute of Social Science Studies & Research, Pune
10. Research and Development Centre in Pharmaceutical Sciences & Applied Chemistry, Pune
11. College of Physical Education, Pune
12. Institute of Environment Education & Research, Pune
13. College of Engineering, Pune
14. Poona College of Pharmacy, Pune
15. Institute of Management & Entrepreneurship Development, Pune.
16. Rajiv Gandhi Institute of Information Technology & Bio-Technology, Pune
17. Interactive Research School for Health Affairs, Pune.
18. Medical College & Hospital, Sangli.
19. Dental College & Hospital, Navi Mumbai.
20. Institute of Management & Research, New Delhi;
21. College of Architecture, Pune;

22. Institute of Hotel Management & Catering Technology, Pune;
23. Yashwantrao Mohite Institute of Management, Karad;
24. Institute of Management, Kolhapur;
25. Institute of Management & Rural Development Administration, Sangli.
26. Abhijit Kadam Institute of Management and Social Sciences, Solapur.
27. Dental College & Hospital, Sangli
28. College of Nursing, Sangli
29. College of Nursing, Navi Mumbai.

Thus, there are 29 institutions which are the constituent units of Bharati Vidyapeeth (Deemed to be University) with 8 schools & 6 centers and departments.

As is widely known, the Central Govt. had constituted a high power Task Force consisting of very eminent and experienced academicians to evaluate the academic performance of deemed universities in the country. The Task Force appreciated the report submitted by the University and also the presentation made by Prof. Dr. Shivajirao Kadam the then Vice Chancellor. The Task Force noted the University's excellent performance with regard to teaching-learning process, research, scientific publications by faculty and their impact and potential, innovative academic programmes, enriched infrastructure and recommended to the Ministry of Human Resources Development, Govt. of India to award 'A' Grade status. The Central Government has accepted the recommendation of the Task Force and awarded 'A' Grade status to this University.

Ours is probably, the only University established under section 3 of the U.G.C. Act having under its umbrella institutions of diverse disciplines of professional, technical and traditional categories such as Medicine, Dentistry, Physical Education, Natural and Physical Sciences, Social Sciences, Commerce, Law and Humanities, Pharmaceutical Sciences, Management Studies, Engineering and Technology. The UGC has recognised this University u/s 12 'B' of UGC Act.

This University is a Member of Association of Indian Universities.

This University has been Graded as Category-I Deemed to be University by UGC. NIRF Ranking for this University is continuously within top 100 Universities. This year the University has been ranked by NIRF as 78.

**Bharati Vidyapeeth (Deemed to be University) Homoeopathic Medical College & Hospital,
Post Graduate Department & Research Centre, Pune**

Bharati Vidyapeeth (Deemed to be University) Homoeopathic Medical College & Hospital, Post Graduate Department & Research Centre, Pune established in 1990, is a leading institution offering comprehensive education in homoeopathy. Our Homoeopathic College has Deemed University status since 1996, it stands as a beacon of academic excellence, accredited with an 'A+' grade by NAAC in 2017. The college provides a range of academic programs including the undergraduate B.H.M.S. degree, postgraduate M.D. (Hom.) in five specialized subjects, and a Ph.D. program in four disciplines, all recognized by the National Commission of Homoeopathy (NCH) & Ministry of AYUSH, Govt. of India.

The campus features one of the best infrastructure with 34,000 sq.ft. dedicated to academic facilities and a separate 32,000 sq.ft. Homoeopathic Hospital, offering a 100-bed facility with diagnostic services like X-ray, ultrasound, and clinical pathology labs & attached Bharati Hospital. These facilities ensure that students gain real-world clinical experience in a professional healthcare environment. Additionally, the college boasts a well-equipped library with over 14,936 books, plenty medical journals, and access to digital resources such as DELNET and Web OPAC. The integration of modern Information and Communication Technology (ICT) into teaching provides students with cutting-edge e-learning tools and platforms, supported by a digital library, virtual labs, and plagiarism check systems.

The college is dedicated to holistic student development, with a highly qualified dedicated faculty delivering personalized, student-focused education. Many faculty members hold Ph.D. degrees, ensuring that students receive expert guidance throughout their academic journey. The practical learning experience is further enhanced through clinical exposure at the hospital and through mobile clinics operating in seven rural areas around Pune. These mobile clinics not only extend essential homoeopathic healthcare services to underserved populations but also offer students hands-on experience in addressing rural health challenges, understanding epidemiological patterns, and gaining insight into the social factors affecting healthcare. Students are actively encouraged to participate in various intercollegiate, intracollegiate, and university-level activities, including sports, cultural events, and research initiatives, fostering their overall development and enhancing their academic and extracurricular skills.

In keeping with its commitment to innovation in education, the institution employs advanced teaching methods, utilizing smart classrooms and a robust online platform where faculty regularly upload lectures, e-content, and supplementary materials. Students benefit from 24/7 access to these resources, enhancing their learning experience. With a mission to extend homeopathic care beyond urban areas, the college actively promotes healthcare outreach through its rural clinics, providing both academic and clinical benefits to its students while addressing the healthcare needs of the community.

**COMPETENCY BASED DYNAMIC CURRICULUM FOR
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INDEX

(1)		Page No.
(A)	NOTIFICATION	01
B)	Part-I	01-28
	1	Eligibility for admission/qualification and age
		01-03
	2	Duration of Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course
		03
	3	Degree awarded
		03
	4	Pattern of study
		03-07
	5	Electives
		06-07
	6	Methodology for supplementing modern advancement, research and technology in Homoeopathy (SMART-Hom.)
		07-09
	II	Examination
	1	General guidelines for examinations, results and re-admission
		09 - 12
	2	Assessment
		12-17
	3	Migration of students during the study
		17-18
	III	Internship programme
	1	Compulsory Rotatory Internship Training
		18-23
	IV	SCHEDULE relating to "SPECIFIED DISABILITY"
		24-28
C)	Part-II	29-35
	1	Foundation Programme
		29-31
	2	Tentative Template Of Academic Calendar
		32
	3	Guidelines For Attendance Maintenance
		33
	4	Various forms
		34-35
D)	Part-III	
	II-B.H.M.S	
	1	Preamble
		36- 37
	2	Homoeopathic Materia Medica
		38-46
	3	Organon of Medicine and Homeopathic Philosophy
		47-53
	4	Homoeopathic Repertory and Case Taking
		54-59
	5	Forensic Medicine and Toxicology
		60-67
	6	Pathology and Microbiology
		68-80
	7	Practice of Medicine
		81-93
	8	Surgery
		94-99
	9	Gynaec and Obstetrics.
		100-107

NATIONAL COMMISSION FOR HOMOEOPATHY

NOTIFICATION

New Delhi, the 6th December, 2022

(A) F. No. 3-34/2021/NCH/HEB/CC/10758.—In exercise of the powers conferred by sub – section (1) and clauses (h), (i), (q), (s) and (t) of sub-section (2) of section 55 of the National Commission for Homoeopathy Act, 2020 (15 of 2020) and in supersession of Homoeopathy (Degree course) B.H.M.S. Regulations, 1983, except as respects thing done or omitted to be done before such supersession, the Commission hereby makes the following regulations, namely: -

1. **Short title and commencement.** – (1) These regulations may be called National Commission for Homoeopathy (Homoeopathy Graduate Degree Course – Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Regulations- 2022.

(2) They shall come into force on the date of their publication in the Official Gazette.

2. **Definitions.**- (1) In these regulations, unless the context otherwise requires, -

- (i) “Act” means the National Commission for Homoeopathy Act, 2020 (15 of 2020);
- (ii) “Annexure” means an Annexure appended to these regulations;
- (iii) “Appendix” means an Appendix appended to these regulations;
- (iv) “Commission” means the National Commission for Homoeopathy constituted under section 3 of this Act;
- (v) “Electives” means the course of study devised to enrich the educational expression of the student.

(2) Words and expressions used herein and not defined but defined in the Act shall have the same meanings as respectively assigned to them in the Act.

B) PART I

Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course.- The Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) shall produce Graduates, having profound knowledge of Homoeopathy with contemporary advancement in the field, supplemented with knowledge of scientific and technological advancement in modern health science and related technology along with extensive practical training, be able to function as an efficient holistic health care practitioner in health care service in the urban and rural areas.

3. **Eligibility criteria for admission and manner of admissions.** -(1) The eligibility for admission in Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) Course shall be, namely:-

- (a) the candidate shall have passed 10+2 or its equivalent examination from any recognised Board with Physics, Chemistry, Biology and have obtained minimum of fifty percent. marks taken together in Physics, Chemistry and Biology/Biotechnology in case of student belonging to general category and forty percent. marks in case of student belonging to the Scheduled Castes, Scheduled Tribes and Other Backward Classes:

Provided that in respect of person with disability specified under the Rights of Persons with Disabilities Act, 2016 (49 of 2016), the qualifying marks in the examinations shall be forty-five percent. in case of General category and forty percent. in case of the Scheduled Castes, Scheduled Tribes and Other Backward Classes.

- (b) Biology/Biotechnology studied as Additional Subject at 10+2 level also shall not be considered for such admission:
- (c) Candidate passed 10+2 from Open School or as Private candidate shall not be eligible to appear for National Eligibility-cum-Entrance Test.
- (d) No candidate shall be considered for admission in Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) Course unless the candidate attains the age of seventeen years on or before the 31st day of December of the year of admission in the first year of the Course;

- (2) There shall be a uniform Entrance Examination for all Homoeopathy Medical Institution namely National Eligibility-cum- Entrance Test (NEET) for admission to under-graduate course in medical institution in each academic year and shall be conducted by an authority designated by the National Commission for Homoeopathy:

Provided that for foreign national candidate, any other equivalent qualification approved by the Central Government may be allowed for admission and sub-regulation (2) of regulation 4 shall not be applicable in this behalf.

- (3) No candidate obtaining less than marks at 50th percentile in the National Eligibility-cum- Entrance Test for undergraduate course conducted for the said academic year shall be considered for such admission:

Provided that the candidate belonging to the Scheduled Castes, Scheduled Tribes and Other Backward Classes obtain marks not less than 40th percentile and the candidate belonging to person with the disability as specified under the Rights of Persons with Disabilities Act, 2016 (49 of 2016) obtains the marks not less than 45th percentile in case of General category and not less than 40th percentile in case of the Scheduled Castes, Scheduled Tribes and Other Backward Classes shall be considered for admission.

Provided further that the Commission may, in consultation with the Central Government lower the marks required for admission to undergraduate course for candidate belonging to respective category and marks so lowered by the Commission shall be applicable for that academic year.

- (4) An All-India common merit list as well as State-wise merit list of the eligible candidate shall be prepared on the basis of the marks obtained in the National Eligibility-cum-Entrance Test conducted for the academic year and the candidate within the respective category shall be considered for admission to undergraduate course from the said merit list.
- (5) The seat matrix for admission in the Government institution, Government-aided institution and private Institution shall be fifteen percent. for all-India quota and eighty-five percent. for the State quota and Union territory quota as the case may be:

Provided that, -

- (a) the all India quota for the purpose of admission to the Deemed University both Government and private shall be hundred percent.;
- (b) The university and institute having more than fifteen percent. all India quota seat shall continue to maintain that quota;
- (c) five percent. of the annual sanctioned intake capacity in Government and Government aided institution shall be filled up by candidate belonging to persons with disability as specified under the provisions of the Rights of Persons with Disabilities Act, 2016 (49 of 2016)

Explanation.- For the purposes of this regulation, the specified disability contained in the Schedule to the Rights of Persons with Disabilities Act, 2016 (49 of 2016) specified in *Appendix "A"* and the eligibility of candidate to pursue a course in Homoeopathy with specified disability shall be in accordance with the guidelines specified in *Appendix "B"*.

- (6) The designated authority for counseling of State and Union territory quota for admission to undergraduate course in medical institution in State and Union territory including institution established by the State Government, University, Trust, Society, Minority Institution, Corporation or Company shall be the respective State or Union territory in accordance with the applicable rules and regulations of the concerned State or Union territory, as the case may be.
- (7) (a) The counselling for admission to Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) course for seats under all India quota as well as the all-medical institution established by the Central Government shall be conducted by the authority designated by the Central Government in this behalf;
- (b) The counselling for admission to Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) Course for hundred percent. seats of Deemed University both Government and Private shall be conducted by the authority designated by the Central Government, in this behalf.
- (8) The admission shall be done;-
- (a) through counseling except foreign nationals;
- (b) by any means other than manner specified in these regulations shall not be approved and any institution found admitting the students in contravention of the provisions of these regulations shall be denied permission for taking admission for subsequent academic year;
- (c) the medical institution shall have to submit the list of admitted students in the format decided

by the Commission on or before six p.m. on the cutoff date for admission decided by it from time to time for verification;

- (d) the medical institution shall approve the admission of the candidate except foreign national who has been allotted seat through counseling (Central, State or Union territory, as the case may be).
- (9) The candidate who fails to obtain the minimum eligibility marks as referred to under sub-regulation (3) shall not be admitted to undergraduate course in the said academic year.
- (10) No authority or medical institution shall admit any candidate to the under-graduate course in contravention of the criteria or procedure specified in these regulations and any admission made in contravention of these regulations shall be cancelled by the Commission forthwith.
- (11) The authority or medical institution which grants admission to any student in contravention of the provisions of these regulations shall be dealt as specified under the Act.
- (12) The medical institution shall send the list of admitted students to the Commission within one month of his admission and the Commission may verify the medical institution to ensure the compliance of the provisions of the regulations at any time.
4. **Duration of Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course** -The duration of the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course shall be five years and six months as specified in the table below, namely:-

Table-1

Serial Number	Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course	Duration
(1)	(2)	(3)
(1)	First Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)	Eighteen Months;
(2)	Second Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)	Twelve Months;
(3)	Third Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)	Twelve Months;
(4)	Fourth (Final) Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)	Twelve Months;
(5)	Compulsory Rotatory Internship	Twelve Months.

5. **Degree to be awarded.** -The candidate shall be awarded Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Degree after passing all the examinations and completion of the laid down course of study extending over the laid down period and the compulsory rotatory internship extending over twelve months.
6. **Pattern of study.** -The Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course shall consist of main programme and electives and the pattern of study shall follow the following manner, namely:-
- (1) Main programme :-
- (a) after admission, the student shall be inducted to the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course through a Foundation Programme not less than ten working days/sixty hours based on the 'Content for Foundation programme' which intends to introduce newly admitted student to Homoeopathy system of medicine and skills required to make him well aware of the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course he is going to undergo for next five years and six months.
- (b) during the Foundation Programme, the student of Homoeopathy shall learn history of Homoeopathy, get oriented with development of homoeopathic science across the globe, understanding on improvising interpersonal communication skills, management of stress and time, basic life support and first-aid along with other subjects as per syllabus specified in
- (c) total teaching hours for first professional session shall be not less than two thousand one hundred and six (2106) while for second, third and fourth professional session, a minimum of one thousand four hundred and four (1404) hours teaching in each professional session to complete.
- (d) working hour may be increased by the University or medical institution as per requirement to complete the stipulated period of teaching and requisite activity.

Explanation. - For the purposes of this sub-regulation, -

- (a) "Lectures" means Didactic teaching such as classroom teaching,
- (b) Non – lecture includes Practical or Clinical and Demonstrative teaching and the Demonstrative teaching includes Small group teaching or Tutorials or Seminars or Symposia or Assignments or Role play or Drug Picture presentation or Pharmacy training or Laboratory training or Dissection or Field visits or Skill lab training or Integrated learning or Problem based learning or Case based learning or Early clinical exposure or Evidence based learning etc. as per the requirement of the subject and in Non-lectures, the Clinical or Practical part shall be seventy percent. and demonstrative teaching shall be thirty per cent.
- (e) new department and subject like fundamentals of Psychology, Yoga, essentials of Modern Pharmacology and Research Methodology and Biostatistics are introduced in degree course to provide holistic and integrated knowledge of the health science along with development of research aptitude.
- (f) the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course shall consist of following Departments/Subjects, namely : -

Table 2

Serial Number	Name of Department
(1)	(2)
1	Homoeopathic Materia Medica;
2	Organon of Medicine and Homoeopathic Philosophy and Fundamentals of Psychology;
3	Homoeopathic Pharmacy;
4	Homoeopathic Repertory and Case Taking;
5	Human Anatomy;
6	Human Physiology and Biochemistry;
7	Forensic Medicine and Toxicology;
8	Pathology and Microbiology;
9	Community Medicine, Research Methodology and Biostatistics;
10	Surgery;
11	Gynaecology and Obstetrics;
12	Practice of Medicine with Essentials of Pharmacology;
13	Yoga for health promotion;

- (g) The following subjects shall be taught in first professional session as per the syllabus laid down by Homoeopathy Education Board and approved by the Commission, namely:- -

Table-3

Serial Number	Subject Code	Subject
(1)	(2)	(3)
1	HomUG-HMM-I	Homoeopathic Materia Medica;
2	HomUG-OM-I	Organon of Medicine and Homoeopathic philosophy and Fundamentals of Psychology;
3	HomUG-R-I	Homoeopathic Repertory and case taking;
4	HomUG-HP	Homoeopathic Pharmacy;
5	HomUG-AN	Human Anatomy;
6	HomUG-PB	Human Physiology and Biochemistry;
7	HomUG-Yoga I	Yoga for health promotion.

- (h) The second professional session shall ordinarily start after completion of first professional examination and the following subjects shall be taught as per the syllabus laid down by the Homoeopathy Education Board

and approved by Commission, namely: -

Table-4

Serial Number	Subject Code	Subject
(1)	(2)	(3)
1.	HomUG-HMM-II	Homoeopathic Materia Medica;
2.	HomUG-OM-II	Organon of Medicine and Homoeopathic Philosophy;
3.	HomUG-R-II	Homoeopathic Repertory and case taking;
4.	HomUG-FMT	Forensic Medicine and Toxicology;
5.	HomUG-Path M	Pathology and Microbiology;
6.	HomUG-Sur-I	Surgery;
7.	HomUG-ObGy-I	Gynecology & Obstetrics;
8.	Hom-UG PM-1	Practice of Medicine;
9.	HomUG-Yoga-II	Yoga for health promotion.

- (i) The third professional session shall ordinarily start after completion of second professional examination and following subjects shall be taught as per the syllabus laid down by Homoeopathy Education Board and approved by the Commission, namely: -

Table-5

Serial Number	Subject Code	Subject
(1)	(2)	(3)
1	HomUG-HMM-III	Homoeopathic Materia Medica;
2	HomUG-OM-III	Organon of Medicine and Homoeopathic Philosophy;
3	HomUG-R-III	Homoeopathic Repertory and case taking;
4	HomUG-PM-II	Practice of Medicine ;
5	HomUG-Mod.Pharm	Essentials of Pharmacology;
6	HomUG-Sur-II	Surgery;
7	HomUG-ObGy-II	Gynecology and Obstetrics;
8.	HomUG-CM-I	Community Medicine ;
9.	HomUG-Yoga -III	Yoga for health promotion;

- (j) The fourth professional session shall ordinarily start after completion of third professional examination and following subject shall be taught as per the syllabus laid down by Homoeopathy Education Board and approved by the Commission, Namely:-

Table-6

Serial Number	Subject Code	Subject
(1)	(2)	(3)
1	Hom UG-HMM-IV	Homoeopathic Materia Medica;
2	Hom UG-OM-IV	Organon of Medicine and Homoeopathic Philosophy;
3	Hom UG-R-IV	Homoeopathic Repertory and case taking;
4	Hom UG-PM-III	Practice of Medicine;

5	Hom UG-CM-RM-Stat-II	Community Medicine, Research Methodology and Biostatistics;
6	Hom UG-Yoga - IV	Yoga for health promotion.

- (k) Clinical training. -Clinical training of the student shall start from the first professional session after second term and subject related clinical training shall be provided in the attached hospital by the concerned faculty and department in non-lecture hour as per the requirement of the subject as mentioned below-
- (i) During first professional session, clinical training shall be provided in Outpatient Department (OPD), Inpatient Department (IPD), community and peripheral clinics and clinical exposure may also be arranged through appropriate audio-visual media or simulated patient.
- (ii) Students shall be placed in Hospital Pharmacy to get familiar with prescription patterns, medicine names, dosage, dispensing of medicines etc.
- (iii) During second, third and fourth professional session, clinical training shall be provided through the specialty Outpatient Department (OPD) and Inpatient Department (IPD), peripheral Outpatient Departments (OPDs) and community posting wherein teacher of the above departments shall be consultant. The students shall be involved in screening patients in Outpatient Department (OPD); case taking, analysis, evaluation and totality of symptoms, clinical examination, repertorisation and investigation including Radiology, Hematology and Pathology Laboratory and prescription writing.
- (iv) Training/ orientation on add on therapy: Training for Yoga, Physiotherapy and diet and nutrition shall be provided to the student by the concerned professional.
- (v) Clinical training shall be on rotation basis as per the non-lecture/clinical batches and in accordance with the clinical/ non-lecture teaching hour stipulated for the following subjects, namely: -
- (A) Homoeopathic special and general Outpatient Department (OPD) and Inpatient Department (IPD), peripheral Outpatient Department (OPD), community Outpatient Department (OPD), with compulsory repertorisation through software.
- (B) Practice of Medicine: Outpatient Department (OPD), Inpatient Department (IPD) and specialty clinics like Pediatrics, Pulmonology, Cardiology, Nephrology, Gastroenterology, Dermatology, Psychiatry, Oncology or any other, functioning under the department, in attached hospital/Super specialty hospital with Memorandum of Understanding (MoU).
- (C) Surgery: Eye, Ear Nose Throat (ENT), Dental Outpatient Department and any other related specialty clinics; Operation Theater Unit, Preparation room, postoperative recovery room, Sterilization, wound care & infection control, bio- waste management and any specialty units in the attached hospital/Super specialty hospital with Memorandum of Understanding (MoU).
- (D) Gynecology and Obstetrics: Outpatient Department (OPD), Inpatient Department (IPD), Labour room, procedural room, and other related specialty clinics for reproductive, mother & child health, if any.
- (E) Department of Community Medicine will provide training through specialty clinics, adopted villages /health programmes i.e. awareness camps, campaigns and public health programs and Inpatient Department (IPD) for waste management, prophylaxis and health education programs. Inpatient Department (IPD) Nutritional assessment and diet requirement of cases admitted in Inpatient Department (IPD) shall be determined by the dietitian of the Hospital. Awareness about nutritional disorders and balanced diet shall be included in the training programme.
- (F) Clinical Outpatient Department (OPD), Inpatient Department (IPD) and clinics functioning under School Health programme .
- (vi) Clinical training for the fourth professional session shall be provided in Outpatient department (OPD), Inpatient department (IPD), and Physiotherapy room in accordance with the requirement of subject, and shall be on rotation basis as per the non- lecture/clinical batches and also in accordance with the clinical/ non-lecture teaching hour stipulated for the following subjects, namely: -
- (A) General and special Homoeopathic Outpatient Department (OPD) and Inpatient Department (IPD)
- (B) Emergency/Casualty department in hospital
- (C) Skill lab in hospital;
- (D) Practice of Medicine: Outpatient Department (OPD), Inpatient Department (IPD) and specialty clinic (Pediatrics, Pulmonology, Cardiology,

Nephrology, Gastroenterology, Dermatology, Psychiatry, Oncology) functioning under the department if any, in attached hospital /Super speciality hospital with Memorandum of Understanding (MoU).

(2) **Electives-** (a) It constitutes an optional course of study devised to enrich the educational experience of the student and each discipline has distinctive requirements not adequately covered by the regular courses.

(b) The Electives shall be conducted as an online programme by the Commission:

- (i) Each student from first professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course to third professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course shall opt two electives in each academic year.
- (ii) The electives shall start from the second term of first professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course.
- (iii) One elective shall be compulsory in each professional year for student and he may select any one elective from the list provided by the Commission for a particular professional year.
- (iv) Completion of two electives shall be compulsory for passing the respective academic year.
- (v) Each elective may vary in terms of duration of the academic year but shall be available and divided into component of approximately two or more hours and the content or presentation shall be hosted on the online portal of the commission.
- (vi) Each component shall comprise an audio-visual component in the form of lecture/demonstration, some suggested reading material/activity and an assessment.
- (vii) The student may progress from one component to the next after satisfactorily completing each assessment.
- (viii) At the end of each elective, the commission shall issue an elective completion certificate online to the student and the certificate, having the grade, shall be submitted to the medical institution authority as proof of completing the electives and same shall be sent to affiliating university.
- (ix) The student who fails to complete the electives shall not be allowed to appear in annual university examination.
- (x) The commission shall provide a unique number to the student to log in the portal.

7. Methodology for supplementing modern advancement, research and technology in Homoeopathy (SMART-Hom.)-

(1) To accomplish the supplementation of modern advancement, scientific and technological developments in Homoeopathy System of Medicine, all the thirteen departments as mentioned in table 2 of regulation 7, shall be supplemented, enriched and updated with relevant and appropriate advancement or development in the area of diagnostic tools, conceptual advancement and emerging areas as under-

- (a) Innovations or advancement or new development in basic sciences like Biology, Chemistry, Physics, Mathematics, Microbiology, Bioinformatics, Molecular biology etc.;
- (b) Diagnostic advancements;
- (c) Pharmaceutical technology including quality and standardization of drugs, drug development etc.;
- (d) Teaching, Training methods and Technology;
- (e) Research Methods, Parameters, Equipment and Scales etc.;
- (f) Technological automation, software, artificial Intelligence, digitalisation, documentation etc.;
- (g) Biomedical advancements;
- (h) Medical equipment;

- (i) Any other innovations, advancement, technologies and development useful for understanding, validating, teaching, investigation, diagnosis, treatment, prognosis, documentation, standardisation and conduction of research in Homoeopathy.
- (2) There shall be multidisciplinary Core Committee constituted by the Commission for the purpose of supplementation of modern advancement, scientific and technological developments in Homoeopathy, that identify the advancement and developments that are suitable and appropriate to include in anyone or multiple departments.
- (3) There shall be an Expert Committee for each department constituted by Commission, to define and suggest the method of adaptation and incorporation of the said advancement and developments and also specify the inclusion of the same at undergraduate or postgraduate level and the expert committee shall develop detailed methodology for usage, standard operating procedure and interpretation as required.
- (4) Teaching staff, practitioner, researcher, student and innovator etc. may send his suggestions through a portal specified by National Commission for Homoeopathy regarding supplementation of modern advancement, scientific and technological development in Homoeopathy and suggestion shall be placed by Homoeopathy Education Board before core committee for consideration.
- (5) The modern advancement shall be incorporated with due interpretation of the said advancement based on the principles of Homoeopathy, supported by the studies and after five years of inclusion of such advancement in syllabus, they shall be considered as part of Homoeopathy syllabus.
- (6) Once Core Committee approves the recommendations of the Expert Committee, National Commission for Homoeopathy shall direct the Homoeopathy Education Board, to include the same in curriculum of undergraduate or postgraduate course as specified by the Expert Committee and the Commission shall issue guidelines or if required to conduct orientation of teacher for incorporation of the recommended modern advancement or scientific and technological development.
- (7) (a) There shall be a Core Committee for each department comprising of the following persons, namely -
 - (i) President, Homoeopathy Education Board–Chairman;
 - (ii) four experts from Homoeopathy (one expert from Materia Medica, Organon of Medicine, Repertory and Practice of Medicine)–members;
 - (iii) one expert (either retired or in service) each from Central Council for Research in Homoeopathy (CCRH), National Institute of Homoeopathy (NIH), pharma industry, public health – member;
 - (iv) one educational technologist–member;
 - (v) Member of Homoeopathy Education Board-Member Secretary:

Provided that the core committee may co-opt an expert as per the needs and with permission of the Commission.
- (b) Terms of reference. – (i) The term of the Committee shall be three years;
 - (i) The committee shall meet at least twice in a year.
 - (ii) The committee shall identify any modern advancement, scientific and technical development as specified in the sub-regulation (1) of regulation for; -
 - (A) understanding of validating conduction of research activities in Homoeopathy;
 - (B) diagnosis or prognosis in a specific clinical condition and treatment;
 - (C) teaching and training;
 - (D) health care services through Homoeopathy.
 - (iii) The committee shall ensure the applicability of the identified modern advancements or scientific and technical development to basic principles of Homoeopathy with the help of the four expert members of Homoeopathy.
 - (iv) The Core Committee shall identify and recommend suitable expert for the Expert Committee to develop methodology for identification of modern advancement or development.
 - (v) The Core Committee shall suggest the application of the advancements or developments in terms of its usage in specific department or to incorporate in under-graduate or post-graduate syllabus

etc. as the case may be.

- (vi) The Core Committee shall identify the outdated part of the modern science and technology and suggest the Commission to replace it with the appropriate modern advancements.
- (8) (a) There shall be an expert committee for each department consisting of the following persons namely:-
- (i) Subject Expert as recommended by Homoeopathy Education Board– Chairman;
 - (ii) Two experts from relevant Homoeopathy subjects, one from under graduate (UG) and one from post graduate (PG) –members;
 - (iii) One expert from relevant modern subject–member;
 - (iv) One expert from teaching technology –member:
- Provided that the Expert Committee may co-opt concerned expert in accordance to theselected area with the permission of the Commission.

(b) Terms of reference. –

- (i) the term of the Expert Committee shall be three years;
- (ii) The Expert Committee shall meet as many times as per the direction of the Commission;
- (iii) The Expert Committee shall work on the suggestion from the core committee and decide how to incorporate it in the syllabus, its mode of teaching (i.e., lecture/non-lecture) and the assessment with the help of educational technologist, experts;
- (iv) The Expert Committee shall first understand the application of modern advancement that are identified to incorporate and its relevance to the basic principles of Homoeopathy;
- (v) The Expert Committee shall also identify the need of advance technology in Homoeopathy particular to that vertical and identify the suitable technology and recommend its usage along with the standard operating procedure or methodology;
- (vi) The Expert Committee shall suggest Core Committee regarding the modern advancement and technology to be included at undergraduate or post graduate level.

8. General guidelines for examinations, results and re-admission.-

- (1) The University or agencies empowered by the Commission shall conduct examination for the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Course.
- (2) The examining body shall ensure the minimum number of hours for lectures or demonstrations or practical or seminars etc. in the subject in each Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) examination as specified in these regulations are followed, before allowing medical institution to send the student for university examination.
- (3) The examining body shall ensure that the student of the medical institution, who does not fulfill the criteria laid down in these regulations are not sent for the university examination.
- (4) Each student shall be required to maintain at least seventy five percent. attendance in each subject in theory/lecture hours/ practical and clinical / non-lecture hours separately for appearing at examination.
- (5) Where the medical institution is maintaining physical register, it shall be recorded in cumulative numbering method as per Annexure-III and at the end of the course/ term/ part of the course, after obtaining each student signature, the same shall be certified by respective Head of the Department and approved by Head of the institute.
- (6) The approved attendance shall be forwarded to the concerned university.
- (7) Internal assessment examinations to be conducted by medical institution during first, second, third and fourth Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) professional year.
- (8) The weightage of internal assessment shall be ten percent. of the total marks specified for each subject for main university examination and internal assessment shall be in the forms of practical only.
- (9) Internal assessment examination shall include one periodic assessment and one term test in each term of six months.

- (10) It is compulsory for every student to pass with minimum fifty percent. marks in the internal assessment examination prior to filling the final university examination form of the respective professional year and Head of medical institution shall send the marks of internal assessment and term test to the university prior to final examination of any professional year.
- (11) There shall be no separate class for odd batch student (those students who could not keep the term) and the student must attend the class along with regular batch or with junior batch as applicable.
- (12) To become eligible for joining the Compulsory Rotatory Internship programme, a student must pass all four professional examinations and qualified in six electives and the entire course of Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) including internship shall be completed within a period of maximum ten years.
- (13) The theory examination shall have ten percent. marks for Multiple Choice Questions (MCQ), forty per cent. marks for Short Answer Questions (SAQ) and fifty percent. marks for Long Explanatory Answer Questions (LAQ) and these questions shall cover the subject widely.
- (14) Each theory examination shall be of three hours duration.
- (15) The minimum marks required for passing the examination shall be fifty percent. in theory component and fifty percent. in practical component including practical, clinical, viva-voice, internal assessment and electives wherever applicable separately in each subject.
- (16) Electives shall be assessed in terms of attendance and assessment by grading as following, namely: -
 - (a) Grading shall be only for two electives per professional session and mentioned in the certificate obtained by the student after online teaching and assessment.
 - (b) Grading shall be mentioned in the University mark sheet of student.
 - (c) The examination branch of the institution shall compile the grade of electives obtained by student and submit to university through the head of institution so that the University shall add the same to final mark sheet of the student.
- (17) Grading of electives shall be assessed as following, namely :-
 - (a) Electives shall be assessed online by the resource person who has prepared the contents of elective and assessed to the student.
 - (b) The following points shall be taken in to consideration for grading , namely:-
 - (i) Depth of problem definition – 15%
 - (ii) Extent of work undertaken – 20%
 - (iii) Innovation – 15%
 - (iv) Logical and integrated way of presentation – 20%
 - (v) Quality of learning derived – 20%
 - (vi) Adequacy of references undertaken – 10%
 - (c) The final grades would be as follows, namely: -
 - (i) “A” – Excellent (above 70%)
 - (ii) “B” – Good (above 60 %)
 - (iii) “C” – Average (around 50%)
 - (iv) “D” – below average (around 40%)
 - (v) “E” – Poor (below 40%)
 - (d) The student shall have to secure at least ‘C’ grade in all the electives in order to pass the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course.
- (18) The examining body shall hold examinations on such date and time as the examining body may determine and the theory and practical examination shall be conducted on the center approved by the examining body.
- (19) There shall be a regular examination and a supplementary examination in a year and the supplementary examination shall be conducted within three months of declaration of results of regular examination including issuance of mark sheets.
- (20) A candidate obtaining sixty percent. and above marks shall be awarded first class in the subject and seventy five percent. and above marks shall be awarded distinction in the subject.

- (21) The award of class and distinction shall not be applicable for supplementary examination.
- (22) For non-appearance in an examination, a candidate shall not have any liberty for availing additional chance to appear at that examination.
- (23) Any Diploma/Degree qualification, at present included in Schedule II and Schedule III of the Homoeopathy Central Council Act 1973 (59 of 1973) where nomenclature is not in consonance with these regulations shall cease to be recognised medical qualification when granted after commencement of these regulations. However, this clause will not apply to the students who are already admitted to these courses before the enforcement of these regulations.
- (24) (a) No person shall be appointed as an external or internal examiner or paper setter or moderator in any of the subjects of the Professional examination, leading to and including the final Professional examinations for the award of the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) degree unless he has taken at least three years previously, a M.D.(Hom.) degree of a recognised university or an equivalent qualification in the particular subject as per recommendation of the Commission on teachers' eligibility qualification and has had at least three years of teaching experience in the subject concerned in a college affiliated to a recognised university at a faculty position.
- (b) Non-medical scientist engaged in the teaching of medical students as full time teacher, may be appointed examiner in his concerned subject provided he possess requisite Post Graduate qualification and three-year teaching experience of medical students after obtaining his postgraduate qualifications:
- Provided further that the fifty percent. of the examiner (Internal and External) shall be from the medical qualification stream.
- (c) A university having more than one college shall have separate set of examiner for each college, with internal examiner from the concerned college.
- (d) In a state where more than one affiliating university is existing, the external examiner shall be from other university.
- (e) External examiner shall rotate at an interval of two years.
- (f) Any fulltime teacher with teaching experience of not less than three years in a concerned subject in a Homoeopathic Medical Institution shall be appointed internal / external examiner by rotation in his subject.
9. **University examination.** – (1) First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination:
- (a) The student shall be allowed to appear for the First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination provided that he has required attendance as per clause (4) of regulation 9 of head of the medical institution.
- (b) The process of conduction of examination and declaration of the results of First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) shall be completed between seventeen to eighteen Months from the date of admission.
- (c) In order to be declared as “Passed” in First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination, a candidate shall have to pass all the subjects of university examination including the internal assessments examination.
- (2) Second Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Examination:
- (a) No candidate shall be allowed for the Second Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination unless he has passed all the subjects of First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination and has required attendance as specified in sub section (4) of regulation 9.
- (b) The process of conduction of examination and declaration of results of Second Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination shall be completed between twenty nine to thirty Months from the date of admission.
- (c) In order to be declared “Passed” in the Second Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination, a candidate shall have to pass all the subjects of university examination including the internal assessment examination.
- (3) Third Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Examination:

- (a) No candidate shall be allowed for the Third Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination unless he has passed all the subjects of the Second Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination and has required attendance as specified in sub section (4) of regulation 9.
- (b) The process of examination conduction and results of Third Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) shall be completed between forty one to forty two month from the date of admission.
- (c) In order to be declared as “Passed” in the Third Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination, a candidate shall have to pass all the subjects of university examination including the internal assessment examination.
- (4) Fourth Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Examination:
 - (a) No candidate shall be allowed for the Fourth Bachelor of Homoeopathic Medicine and Surgery examination unless he has passed all the subjects of Third Bachelor of Homoeopathic Medicine and Surgery examination and has required attendance as specified in sub section (4) of regulation 9.
 - (b) The process of conduction of examination and declaration of result of Third Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination shall be completed between fifty three to fifty four Month from the date of admission.
 - (c) In order to be declared as “Passed” in the Fourth Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) examination, a candidate shall have to pass all the subjects of University examination including the internal assessment examination.

Result : (a) The examining body shall ensure to publish the results within one month from the last date of examination so that student can complete the course in five and half year after admission.

- (b) Who passes in one or more subjects need not to appear in that subject or those subjects again in the subsequent examinations if the candidate passes the whole examination within four chances including the original examination.
- (c) Notwithstanding contained in the foregoing regulations, the student shall be allowed the facility to keep term on the following conditions:
 - (i) The candidate shall pass First Bachelor of Homoeopathic Medicine and Surgery examination in all the subjects at least one term of six months before he is allowed to appear at the Second Bachelor of Homoeopathic Medicine and Surgery examination.
 - (ii) The candidate shall have to pass the Second Bachelor of Homoeopathic Medicine and Surgery examination at least one term of six months before he is allowed to appear at the third Bachelor of Homoeopathic Medicine and Surgery examination.
 - (iii) The candidate must pass the Third Bachelor of Homoeopathic Medicine and Surgery examination at least one term of six months before he is allowed to appear at the Fourth Bachelor of Homoeopathic Medicine and Surgery examination.
- (d) The student who has not passed any of the four professional examinations even after exhausting all four attempts, shall not be allowed to continue his Course:
 Provided that in case of any unavoidable circumstances, the vice Chancellor of the concerned university may provide two more chances in any one of four professional examination.
- (e) The examining body may under exceptional circumstances, partially or wholly cancel any examination conducted by it under intimation to the commission and arrange for conducting re-examination in those subjects within a period of thirty days from the date of such cancellation.
- (f) The university or examining authority shall have the discretion to award grace marks not exceeding to ten marks in total if a student fails in one or more subjects.

10. **Assessment.**-Assessment of students shall be in the form of Formative and Summative Assessments as under-

(1) Formative Assessment. - Student shall be assessed periodically to assess his performance in the class, determine the understanding of Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) course material and his learning outcome in the following manner, namely: -

- (a) Periodical Assessment shall be carried out in practical and at the end of teaching of a topic or

module or a particular portion of syllabus and the following evaluation method may be adopted as appropriate to the content, namely:-

Table -7

Serial Number	Evaluation Method
(1)	(2)
1.	Practical/Clinical Performance;
2.	Viva Voce;
3.	Open Book Test (Problem based);
4.	Summary Writing (Research Papers or Synopsis);
5.	Class Presentations; Work Book Maintenance;
6.	Problem based Assignment;
7.	Objective Structured Clinical Examination (OSCE), Objective Structured Practical Examination (OPSE), Mini Clinical Evaluation Exercise (Mini-CEX), Direct Observation of Procedures (DOP), Case Based Discussion(CBD)
8.	Extra-curricular activities, (Social work, Public awareness, Surveillance or Prophylaxis activities, Sports or Other activities which may be decided by the Department);
9.	Small Project.

- (b) (i) First Bachelor of Homoeopathic Medicine and Surgery(B.H.M.S.) course : There shall be minimum three periodical assessments for each subject (ordinarily at 4th, 9th, and 14thmonth) and two term test (ordinarily at 6th and 12th month) followed by final University examination.
- (ii) Second, Third and Fourth Bachelor of Homoeopathic Medicine and Surgery(B.H.M.S.) course: There shall be minimum two periodical assessments at 4th and 9th month and one term examination at 6th month followed by final university examination.
- (iii) The scheme and calculation of assessment shall be as per the following tables, namely:-

Table-8

[Scheme of Assessment (Formative and Summative)]

Serial Number	Professional Course	Duration of Professional Course			
		(3)			
		First Term	Second Term	Third Term and University exam	
		(a)	(b)	(c)	
(1)	First Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).	First PA and First TT-1	Second PA and Second TT-2	Third PA	First Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Exam (FUE)

		First Term	Second Term and University exam	
(2)	Second Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).	First PA and First TT-1	Second PA	Second Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) exam (FUE)
(3)	Third Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).	First PA and First TT	Second PA	Third Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) exam (FUE)
(4)	Fourth (Final) Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).	First PA and First TT	Second PA	Fourth (Final) Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) exam (FUE)

PA: Periodical Assessment; TT: Term Test; FUE: Final University Examinations; B.H.M.S: (Bachelor of Homoeopathic Medicine and Surgery).

(2) Summative Assessment. –

- (a) Final University examinations conducted at the end of each professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) course shall be the Summative Assessment.
- (b) There shall be double evaluation system and shall be no provision for revaluation.
- (c) There shall be two examiners (one internal and one external) for university practical/clinical/viva voce examinations for hundred marks and it shall increase to four (two internal and two external) for two hundred marks.
- (d) During supplementary examination for two hundred marks, if students are less than fifty then examination can be conducted by one internal and one external examiner but if students are more than fifty, then four examiners are required (two internal and two external examiner).
- (e) While declaring the result of Summative Assessment, Internal Assessment component shall be considered as per the distribution of marks pattern provided in Table-10, Table-12, Table- 14 and Table-16.

11. **The Profession wise Subjects, Number of Papers, Teaching Hours and Marks Distribution shall be as specified in the Tables below namely: -**

Table -09

First Year Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)			
(3 terms)			
Subject	Number of teaching hours		
(1)	(2)		
	Lectures	Non- Lectures	Total
	(a)	(b)	(c)
Hom UG-OM-I	180	100	280
Hom UG-AN	325	330	655
Hom UG-PB	325	330	655
Hom UG-HP	100	110	210
Hom UG-HMM-I	120	75	195
Hom UG-R-I	21	-	21
HomUG-Yoga-I	-	30	30
Total	1071	975	2046
<i>Foundation Course=10 Working days (60hours) Teaching Hours :2046</i>			

Table – 10

Marks distribution First Year Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)									
S.N.	Subject Code	Papers	Theory	Practical or Clinical Assessment					Grand Total
(1)	(2)	(3)	(4)	(5)					(6)
				Practical/ Clinical	Viva	IA	Electives grade	Sub total	
				(a)	(b)	(c)	(d)	(e)	
1	HomUG-OM-I	1	100	50	40	10	Elective I - Elective II-	100	200
2	HomUG-AN	2	200	100	80	20		200	400
3	HomUG-PB	2	200	100	80	20		200	400
4	HomUG-HP	1	100	50	40	10		100	200
5	HomUG-HMM-I	1	100	50	40	10		100	200
Grand Total									1400

Table-11

Second Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). (2 terms)				
Teaching hours=1404				
Serial Number	Subject Code	Number of teaching hours		
(1)	(2)	(3)		
		Lectures	Non-Lectures	Total
		(a)	(b)	(c)
1	Hom UG-HMM-II	150	30	180
2	Hom UG-OM-II	150	30	180
3	Hom UG R-II	50	30	80
4	Hom UG-FMT	120	50	170
5	Hom UG-Path-M	200	80	280
7	Hom UG-PM-I	80	92	172
8	Hom UG Sur- I	92	60	152
9	Hom UG ObGy- I	100	60	160
10	Hom UG-Yoga-II	-	30	30
		942	462	1404

Table-12

Marks distribution of Second Year Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)									
Serial Number	Subject Code	Papers	Theory	Practical Clinical	Practical or Clinical Assessment				
(1)	(2)	(3)	(4)	(5)	(6)				
					Viva	Electives Grade	IA	Sub Total	Grand Total
					(a)	(b)	(c)	(d)	(e)
1.	HomUG-HMM-II	1	100	50	40	Electives I- Electives	10	100	200
2.	HomUG-OM-II	1	100	50	40		10	100	200
3.	HomUG-FMT-I	1	100	50	40		10	100	200

4.	<i>HomUG-Path M</i>	2	200	100	80	II-	20	200	400
Grand Total								1000	

Table-13

Third Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). (2 terms) Teaching hours=1404				
Serial Number	Subject Code	Number of teaching hours		
		(3)		
(1)	(2)	Lectures	Clinical/ Practical	Total
		(a)	(b)	(c)
1	HomUG- -HMM-III	150	50	200
2	HomUG-OM-III	150	50	200
3	HomUG-R-III	100	50	150
4	HomUG-PM-II	120	100	220
5	Hom UG Sur- II	120	100	220
6	Hom UG ObGy- II	110	79	189
7	HomUG-CM	100	60	160
8	Hom.UG-Mod. Phar-I	45	-	45
9	HomUG Yoga-III		20	20
Grand Total		895	509	1404

Table-14

Marks Distribution of Third Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Subjects									
Serial Number	Subject Code	Papers	Theory	Practical or Clinical Assessment					Grand Total
(1)	(2)	(3)	(4)	(5)					(6)
				Practical or Clinical	Viva	Electives grade	IA	Sub Total	
				(a)	(b)	(c)	(d)	(e)	
1	<i>HomUG-HMM-III</i>	1	100	50	40	Elective I - Elective II-	10	100	200
2	HomUG-OM-III	2	200	100	80		20	200	400
3	<i>Hom-UG-R-III</i>	1	100	50	40		10	100	200
4	<i>Hom-UG Sur-II</i>	2	200	100	80		20	200	400
5	<i>Hom-UG ObGy-II</i>	2	200	100	80		20	200	400
6	<i>Hom-UG-CM</i>	1	100	50	40		10	200	200
Grand Total									1800

Table-15

Fourth Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) (2 terms) Teaching hours=1404				
Serial number	Subject Code	Number of teaching hours		
(1)	(2)	(3)		
		Lectures	Non-Lectures	Total
		(a)	(b)	(c)

1	HomUG-HMM-IV	200	83	283
2	HomUG-OM-IV	100	75	175
3	HomUG-R-IV	60	120	180
4	HomUG-PM-III	300	300	600
5	HomUG-CM II including RM-stat	71	75	146
6	HomUG-Yoga-II	-	20	20
	Total	731	673	
			Grand Total	1404

Table-16

Marks Distribution of Fourth Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Subjects)								
S.N.	Subject Code	Papers	Theory	Practical or Clinical Assessment				Grand Total
(1)	(2)	(3)	(4)	(5)				(6)
				Practical or Clinical	Viva	IA	Sub Total	
				(a)	(b)	(c)	(d)	
1	Hom UG-HMM-IV	2	200	100	80	20	200	400
2	Hom UG-OM-IV	1	100	50	40	10	100	200
3	Hom UG-R-IV	1	100	50	40	10	100	200
4	Hom UG-PM-III	3	300	100	80	20	200	500
5	Hom UG-CM-RM-STAT	1	100	50	40	10	200	200
6	Hom UG-Ess. of Pharmacology	1	50		40	10	50	100
Grand Total								1600

- 12. Migration of students during the study:** -(1) The student may be allowed to take migration to continue his study in another medical institution after passing the first professional examination, but the student who fails in such examination shall not be considered for transfer and mid-term migration.
- (2) For migration, the students shall have to obtain the mutual consent of both Medical Institution and University and it shall be against the vacant seat.
 - (3) Migration from one Medical Institution to other is not a right of a student.
 - (4) Migration of students from the Medical Institution to another Medical Institution in India shall be considered by the Commission only in exceptional cases on compassionate ground, if following criteria are fulfilled and routine migrations on other grounds shall not be allowed;
 - (a) Medical Institution at which the student is studying present and Medical Institution to which migration is sought are recognised as per provisions of Commission.
 - (b) The applicant shall submit his application in the Form- 3 for migration, complete in all respects, to the Medical Institution within a period of one month of passing (declaration of result) the first professional Bachelor of Homoeopathic Medicine and Surgery examination.
 - (c) The applicant shall submit an affidavit stating that he shall pursue twelve months of prescribed study before appearing at second professional Bachelor of Homoeopathic Medicine and Surgery examination at the transferee college, which shall be duly certified by the Registrar of the concerned University in which he is seeking transfer and the transfer shall be effective only after receipt of the affidavit.
 - (d) Migration during internship training shall be allowed on extreme compassionate grounds and the migration shall be allowed only with the mutual consent of the medical institution at which the student is studying at present and the medical institution one to which migration is sought are recognised as per provisions of Commission.
 - (5) All applications for migration shall be referred to the Commission by medical institution and

nomedical institution shall allow migration without the approval of the Commission.

- (6) The Commission reserves the right not to entertain any application except under the following compassionate grounds, namely: -
- (a) death of a supporting guardian;
 - (b) illness of candidate causing disability supported by medical grounds certified by a recognized hospital;
 - (c) disturbed conditions as declared by concerned Government in the area where the college is situated.
- (7) A student applying for transfer on compassionate ground shall apply in Form 3.

13. **Compulsory Rotatory Internship Training.** - There shall be compulsory rotatory internship training, followingly :-

- (1) (a) Each candidate shall be required to undergo compulsory rotatory internship including internship orientation and finishing programme within one year from passing of fourth Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) examination.
- (b) Ordinarily the internship training shall commence on first working day of April for regular batch students and first working day of September for supplementary batch students.
- (c) The student shall be eligible to join the compulsory internship programme after passing all the subjects from First to Fourth (Final) Professional examination including six electives and after getting Provisional Degree Certificate from respective Universities and provisional registration Certificates from respective State Board or Council for Compulsory Rotatory Internship.
- (2) During internship, the interns belonging to institute of the Central Government, State Government or Union territory as the case may be, and all the private homoeopathic medical colleges/institutions shall be eligible to get the stipend at par with other medical systems under respective Government and there shall not be any discrepancy between medical systems.
- (3) (a) Migration during internship shall be issued with the consent of both the medical institution and university; in the case where migration is between the medical institution of two different Universities.
- (b) If migration is only between medical institution of the same university, the consent of both the medical institution shall be required.
- (c) Migration shall be accepted by the university on the production of the character certificate issued by the institute or medical institution and the application forwarded by the medical institution and university with a 'No Objection Certificate' as the case may be.
- (4) The objective of the orientation programme shall be to introduce the activity to be undertaken during the internship.
- (a) The interns shall attend an orientation programme regarding internship and it shall be the responsibility of the teaching institution to conduct the orientation before the commencement of the internship.
- (b) The orientation shall be conducted with an intention to make the intern to acquire the requisite knowledge as following, namely:-
- (i) Rules and Regulations of the Medical Practice and Profession,
 - (ii) Medical Ethics;
 - (iii) Medico legal Aspects;
 - (iv) Medical Records;
 - (v) Medical Insurance;
 - (vi) Medical Certification;
 - (vii) Communication Skills;
 - (viii) Conduct and Etiquette;
 - (ix) National and State Health Care Programme;
 - (x) Project work.

- (c) The orientation workshop shall be organised at the beginning of internship and an e-log book shall be maintained by each intern, in which the intern shall enter date-wise details of activities undertaken by him/her during orientation.
 - (d) The period of orientation shall be for three days prior to date of commencement of internship.
 - (e) The manual for conducting the orientation as prescribed from time to time by the National Commission for Homoeopathy shall be followed.
- (5) (a) There shall be a finishing programme for three days at the completion of internship.
- (b) This programme is designed for the interns and will consist of ten sessions spread over a period of three days. The program may include both online and offline modes of training. It is aimed to enlighten the interns on various career opportunities available after successful completion of the program and how to equip themselves to meet the requirements and fulfill their dreams.
 - (c) After successful completion of this training the student will be able to:
 - (i) list the various career opportunities available after successful completion of the degree program.
 - (ii) identify their Strengths and Weaknesses;
 - (iii) choose a career of their choice;
 - (iv) enumerate the requirements to be met to become a successful professional;
 - (v) demonstrate positive outlook and attitude towards the profession;
 - (vi) exhibit better skills in communication, problem solving, writing, team building, time management, decision making etc.;
 - (vii) demonstrate ethical and professional values and be a compassionate and caring citizen / professional.
- (6) The finishing programme shall be as follows, namely:-
- (a) Job opportunities after successful completion of the program
 - (b) Study opportunities in India and abroad after successful completion of the program
 - (c) Entrepreneurship opportunities after successful completion of the program
 - (d) Research opportunities after successful completion of the program
 - (e) Public Service opportunities after successful completion of the program
 - (f) Training and awareness about Competitive exams
 - (g) Self analysis to choose the right option
 - (h) Building Interpersonal & Soft Skills including Interview skills, Leadership skills, Resume writing skills, problem solving and decision making skills
 - (i) Certificate writing and prescription writing and medico-legal issues relevant to the profession
 - (j) Loan assistance and other scholarship facilities available for establishment and study.
 - (k) Ethical / Professional and Social responsibilities after successful completion of internship
- (7) Activities during Internship shall consist of clinical work and project work.
- (a) (i) Clinical work in the Outpatient Department (OPD)s/ medical institution hospital/ memorandum of understanding hospital/ Primary Health Centre or Community Health Centre or Research institute of Central Council for research in Homoeopathy or Rural Hospital or district hospital or civil Hospital or any government hospital of modern medicine or homoeopathy medicine or National Accreditation Board and for Hospital accredited private hospital of Homoeopathy.

- (ii) The daily working hours of intern shall be not less than eight hour and the intern shall maintain an e-log book/log book containing all the activities undertaken by him/her during internship.
- (iii) The medical institution shall opt any one of the Option as specified below for completion of internship and the same shall be mentioned in its prospectus.
 - (A) Option I shall be divided into clinical training of ten months in the Homoeopathy hospital attached to the college and two months in Primary Health Centre or Community Health Centre or Research institute of Central Council for Research in Homoeopathy or Rural Hospital or District Hospital or Civil Hospital or any Government Hospital of Modern Medicine or Homoeopathy Medicine or National Accreditation Board for Hospital accredited private hospital of Homoeopathy.
 - (I) The interns shall be posted in any of the following centers where National Health Programs are being implemented and these postings shall be to get oriented and acquaint with the knowledge of implementation of National Health Programmes in regard to,-
 - (a) Primary Health Centre;
 - (b) Community Health Centre or Civil Hospital or District Hospital;
 - (c) Any recognized or approved Homeopathy Hospital or Dispensary;
 - (d) In a clinical unit/hospital of Central Council for Research in Homoeopathy.
 - (II) All the above institutions mentioned in clauses (a) to (d) shall have to be recognised by the concerned University or Government designated authority for providing such training.
 - (III) During the two months internship training in Primary Health Centre or Research institute of Central Council for Research in Homoeopathy or Rural Hospital or Community Health Centre or District Hospital or any recognized or approved hospital of Modern Medicine or Homoeopathy Hospital or Dispensary, the interns shall:-
 - (1) get acquainted with routine of the Primary Health Centre and maintenance of their records;
 - (2) get acquainted with the diseases more prevalent in rural and remote areas and their management;
 - (3) involve in teaching of health care methods to rural population and also various immunization programmes;
 - (4) get acquainted with the routine working of the medical or non-medical staff of Primary Health Centre and be always in contact with the staff in this period;
 - (5) develop research aptitude;
 - (6) get familiarized with the work of maintaining the relevant register like daily patient register, family planning register, surgical register, etc. and take active participation in different Government health schemes or programmes;
 - (7) participate actively in different National Health Programmes implemented by the State Government.
 - (IV). The record of attendance during two months in Primary Health Center (PHC)/Community Health Center (CHC)/Dispensary must be maintained by the interns according to his posting and should be certified by the Medical Officer/Deputy medical superintendent/ Research officer/Resident Medical Officer (RMO)/Faculty/Outpatient department in-charge, where student undergone the training and shall be submitted to and counter signed by the principal of medical institution on monthly basis.
 - (B) Option II shall consists of clinical training of twelve months in Homoeopathy hospital attached to the medical institution and the record of attendance during twelve months in hospital attached to medical institution shall be maintained by the intern according to his posting and shall be certified by the Medical Officer/Deputy medical superintendent/ Research officer/ Resident Medical Officer (RMO)/Faculty/ Outpatient Department (OPD) in-charge, where the intern undergo the training and shall also be submitted to and counter signed by Dean/ Principal of medical institution on monthly basis.
 - (V) Division of Clinical work during posting in Option I and Option II. The clinical work during internship shall be conducted as per the following table, namely:-

Table-17

(Distribution of Internship duration)			
Serial Number	Departments	Option I	Option II
(1)	(2)	(3)	(4)
1.	Practice of Medicine Outpatient Department including Psychiatry and Yoga, Dermatology, and related specialties and respective section of Inpatient Department	two month;	three months;
2.	Surgery Outpatient Department including Operation theatre, related specialties and Ophthalmology, Ear Nose Throat(ENT) and respective section of Inpatient Department	two month;	two months;
3.	Gynecology and Obstetrics Outpatient Department, related specialties including Operation theatre, and respective section of Inpatient Department	two month;	two months;
4.	Pediatric Outpatient Department related specialties including Neonatal Intensive Care Unit, and respective section of Inpatient Department	one month;	two months;
5.	Community Medicine Outpatient Department, related specialties including Rural/Public Health /Maternal and Child Health and respective section of Inpatient Department	two month;	two months;
6.	Casualty	one month;	one month;
7.	Primary Health Centre or Community Health Centre or Research institute of Central Council for Research in Homoeopathy or Rural Hospital or District Hospital or Civil Hospital or any Government Hospital of Modern Medicine or Homoeopathy Medicine or NABH (National Accreditation Board for Hospitals) accredited private hospital of Homoeopathy	two month;	

(D) The intern shall undertake the following activities in respective department in the hospital attached to the College, namely: -

- (1) The intern shall be practically trained in practice of medicine to acquaint with and to make him competent to deal with following, namely: -
 - (a) all routine works such as case taking, investigations, diagnosis and management of patients with homoeopathic medicine;
 - (b) routine clinical pathological work such as hemoglobin estimation, complete haemogram, urine analysis, microscopic examination of blood parasites, sputum examination, stool examination, interpretation of laboratory data and clinical findings and arriving at a diagnosis and all pathological and radiological investigations useful for monitoring the status of different disease conditions;
 - (c) training in routine ward procedure and supervision of patients in respect of his diet, habits and verification of medicine schedule.
- (2) The intern shall be practically trained in Surgery to acquaint with and to make him competent to deal with following, namely:-
 - (a) Clinical examination, diagnosis and management of common surgical disorders according to homoeopathic principles using homoeopathic medicines;
 - (b) Management of certain surgical emergencies such as fractures and dislocations, acute abdomen;
 - (c) Intern shall be involved in pre-operative and post-operative managements;
 - (d) Surgical procedures in ear, nose, throat, dental problems, ophthalmic problems;
 - (e) Examinations of eye, ear, nose, Throat and Refractive error with the supportive instruments in Out-Patient Department; and
 - (f) Practical training of a septic and antiseptic techniques, sterilization;
 - (g) Practical use of local anesthetic techniques and use of anesthetic drugs;

- (h) Radiological procedures, clinical interpretation of X-ray, Intra venous Pyelogram, Barium meal, Sonography and Electro Cardio Gram;
 - (i) Surgical procedures and routine ward techniques such as-
 - (i) suturing of fresh injuries;
 - (ii) dressing of wounds, burns, ulcers and similar ailments;
 - (iii) incision and drainage of abscesses;
 - (iv) excision of cysts and;
 - (v) venesection;
- (3) The intern shall be practically trained in Gynecology and Obstetrics to acquaint with and to make him competent to deal with following, namely:-
- (a) Ante-natal and post-natal problems and their remedies, ante-natal and post-natal care;
 - (b) Management of normal and abnormal labors;
 - (c) Minor and major obstetric surgical procedures;
 - (d) All routine works such as case taking, investigations, diagnosis and management of common gynecological conditions with homoeopathic medicine;
 - (e) Screening of common carcinomatous conditions in women.
- (4) The intern shall be practically trained in pediatrics to acquaint with and to make him competent to deal with following, namely:-
- (a) Care of newborns along with immunization programme;
 - (b) Important pediatric problems and their homoeopathic management;
- (5) The intern shall be practically trained in Community Medicine to acquaint with and to make him competent to deal with following, namely:-
- (a) Programme of prevention and control of locally prevalent endemic diseases including nutritional disorders, immunization, management of infectious diseases, etc.;
 - (b) Family Welfare Planning programme;
 - (c) All National Health Programme of Central Government at all levels
 - (d) Homoeopathic prophylaxis and management in cases of epidemic/endemic/pandemic diseases.
- (6) The intern shall be practically trained in Emergency or Casualty management to acquaint with and to make him competent to deal with all emergency condition and participate actively in Casualty section of the hospital for identification of casualty and trauma cases and his first aid treatment and also procedure for referring such cases to the identified hospital.
- (b) The project work shall consist of the following, namely:-
- (a) Each intern will undertake a project utilizing the knowledge of Research Methodology and Biostatistics acquired in IVth Bachelor of Homoeopathic medicine and Surgery (B.H.M.S)
 - (b) It would be the responsibility of the intern to choose the topic of the subject (clinical/community/education) within the first month of the internship and shall communicate to guide/mentor allotted by Principal.
 - (c) The project shall run through three phases of planning (three months), data collection (three months) and finalization and writing (three months).
 - (d) The writing shall be as per the format taught in the course on research methodology and will be minimal one thousand five hundred words and it shall be type written and submitted in a spiral bond form as well as in the electronic format.
 - (e) The project shall end with a brief presentation to the IV Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) students.
 - (f) The principal shall assign a teacher to evaluate the project which will be with respect to the following:
 - (i) Originality of the idea
 - (ii) Scientific methodology followed in formulating the ideas and the designs
 - (iii) Analysis
 - (iv) Results and conclusion
 - (v) Merits of writing
 - (vi) The grades shall range from A (70% and above), B (60 - 70%), C (50-60%) and D (below 50%)
- (c) A Certificate shall be awarded to the intern stating the title of the project and grade received.

14. **Electronic Logbook / Logbook.** -(i) It shall be compulsory for an intern to maintain the record of procedures done/assisted/observed by him on day-to-day basis in a specified e-logbook/ logbook as the case may be and the intern shall maintain a record of work, which shall be verified and certified by the concerned Medical Officer or Head of the Unit or Department under whom he is placed for internship.
- (ii) Failure to produce e-logbook/ logbook, complete in all respects certified by the concerned authority to the Dean / Principal / Director at the end of Internship Training Programme, may result in cancellation of his performance in any or all disciplines of Internship Training Programme.
- (iii) The institution shall retain soft copy of the completed and certified –e log book/ logbook and available for further verification, if required.
15. **Evaluation of Internship program.** -(1) The evaluation system shall assess the skills of an intern while performing the minimum number of procedures as enlisted with an objective that successful learning of these procedures will enable the interns to conduct the same in his/her actual practice.
- (2) The evaluation shall be carried out by respective Head of Department at the end of each posting and the reports shall be submitted to Head of the institute in Form-1.
- (3) On completion of one year of compulsory rotatory internship including submission of project, the Head of the Institute shall evaluate all the assessment reports as specified in Form-1, as provided by Head of the Department at the end of respective posting and if found satisfactory, the intern shall be issued Internship Completion Certificate in Form-2 within seven working days.
- (4) If performance of an intern is declared as unsatisfactory upon obtaining below fifteen marks as per Form-2 or less than fifty per cent. of marks, in an assessment in any of the Departments, he shall be required to repeat the posting in the respective department for a period of thirty percent. of the total number of days, laid down for that department in Internship Training and posting.
- (5) The intern shall have the right to register his grievance in any aspect of conduct of evaluation and award of marks, separately to the concerned Head of the Department and Head of the Institution, within three days from the date of completion of his evaluation, and on receipt of such grievance, the Head of the Institution in consultation with the Head of the concerned Department shall redress and dispose of the grievance within seven working days.
16. **Leave for interns.**-(1) During compulsory rotatory internship of one year, fifteen days of leaves shall be permitted.
- (ii) Any kind of absence beyond the period of fifteen days shall be extended accordingly.
17. **Completion of internship.**-(1) If there is any delay in the commencement of internship or break during internship due to unavoidable conditions, in such cases, internship period shall be completed within maximum period of twenty four months from the date of passing the qualifying examination of Fourth Final Professional Bachelor of Homoeopathic Medicine and Surgery and in such case, the student shall take prior permission from the Head of the institution in writing with all supporting documents thereof;
- (2) It shall be the responsibility of the Head of the institution/college to scrutinise the documents, and assess the genuine nature of the request before issuing permission letter;
- (3) if the student rejoins internship, he shall submit the request letter along with supporting document, in this regard to the head of institution/college.

SEC.4]Academic calendar: University, Institution/ College shall prepare academic calendar of a particular batch in accordance with the template of tentative academic calendar specified in Annexure II in these regulations and the same shall be circulated to students, hosted in respective websites, and followed accordingly.

18. **Tuition fee.** -Tuition fee as laid down and fixed by respective state fee regulation committee as applicable, shall be charged for four and half years study period only and no tuition fee shall be charged for extended duration of study in case of failing in examination or for any other reason and there shall not be any fee for doing internship in the same institute.

Dr. TARKESHWAR JAIN, President, (Homoeopathy Education Board)

[ADVT.-III/4/Exty./453/2022-23]

Appendix A

(See sub regulation (5) of regulation 4)

SCHEDULE relating to "SPECIFIED DISABILITY" referred to in Clause (zc) of Section 2 of the Rights of Persons with Disabilities Act, 2016 (49 of 2016), provides as under:-

1. Physical disability-
 - (a) Locomotor disability (a person's inability to execute distinctive activities associated with movement of self and objects resulting from affliction of musculoskeletal or nervous system or both), including-
 - (i) "Leprosy cured person" means a person who has been cured of leprosy but is suffering from-
 - a) Loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifest deformity;
 - b) Manifest deformity and paresis but having sufficient mobility in their hands and feet to enable them to engage in normal economic activity;
 - c) Extreme physical deformity as well as advanced age which prevents him/her from undertaking any gainful occupation, and the expression "leprosy cured" shall be construed accordingly.
 - (ii) "Cerebral palsy" means a group of non-progressive neurological condition affecting body movements and muscle coordination, caused by damage to one or more specific areas of the brain, usually occurring before, during or shortly after birth.
 - (iii) "Dwarfism" means a medical or genetic condition resulting in an adult height of 4 feet 10 inches (147 centimeters) or less.
 - (iv) "Muscular dystrophy" means a group of hereditary genetic muscle disease that weakens the muscles that move the human body and persons with muscular dystrophy have incorrect and missing information in their genes, which prevents them from making the proteins they need for health of muscles. It is characterized by progressive skeletal muscle weakness, defects in muscle proteins, and the death of muscle cells and tissues.
 - (v) "Acid attack victim" means a person disfigured due to violent assaults by throwing acid or similar corrosive substance.
 - (b) Visual impairment-
 - (i) "blindness" means a condition where a person has any of the following conditions, after best correction-
 - a) Total absence of sight, or
 - b) Visual acuity less than 3/60 or less than 10/200 (Snellen) in the better eye with best possible correction, or
 - c) Limitation of the field of vision subtending an angle of less than 10 degree.
 - (ii) "Low-vision" means a condition where a person has any of the following conditions, namely:-
 - a) Visual acuity not exceeding 6/18 or less than 20/60 up to 3/60 or up to 10/200 (Snellen) in the better eye with best possible corrections; or
 - b) Limitation of the field of vision subtending an angle of less than 40 degree up to 10 degree.
 - (c) Hearing impairment-
 - (i) "Deaf" means persons having 70 DB hearing loss in speech frequencies in both ears;
 - (ii) "Hard of hearing" means person having 60 DB hearing loss in speech frequencies in both ears,
 - (d) "Speech and language disability" means a permanent disability arising out of conditions such as laryngectomy or aphasia affecting one or more components of speech and language due to organic or neurological causes;
 - (e) Intellectual disability a condition characterized by significant limitation both in intellectual functioning (reasoning, learning, problem solving) and in adaptive behavior which covers a range of every day, social and practical skills, including-
 - (i) "Specific learning disabilities" means a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do mathematic calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia.

- (ii) “Autism spectrum disorder” means a neuro-developmental condition typically appearing in the first three years of life that significantly affects a person’s ability to communicate, understand relationships and relate to others and is frequently associated with unusual or stereotypical rituals or behaviors.
2. “Mental illness” means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviors, capacity to recognize reality or ability to meet the ordinary demands of life, but does not include retardation which is a condition of arrested or incomplete development of mind of a person,
3. Disability caused due to-
- (a) Chronic neurological conditions, such as-
- (i) “Multiple sclerosis” means an inflammatory, nervous system disease in which the myelin sheaths around the axons of nerve cells of the brain and spinal cord are damaged, leading to demyelination and affecting the ability of nerve cells in the brain and spinal cord to communicate with each other.
- (ii) “Parkinson’s disease” means a progressive disease of the nervous system marked by tremor, muscular rigidity and slow, imprecise movement, chiefly affecting middle-aged and elderly people associated with degeneration of the basal ganglia of the brain and a deficiency of the neurotransmitter dopamine.
- (b) Blood disorder-
- (i) “Hemophilia” means an inherited disease, usually affecting only male but transmitted by women to their male children, characterized by loss or impairment of the normal clotting ability of blood so that a minor wound may result in fatal bleeding,
- (ii) “Thalassemia” means a group of inherited disorders characterized by reduced or absence of haemoglobin.
- (iii) “Sickle cell disease” means a hemolytic disorder characterised by chronic anaemia, painful events, and various complications due to associated tissue and organ damage “Hemolytic” refers to the destruction of cell membrane of red blood cells resulting in the release of hemoglobin,
4. Multiple Disabilities (more than one of the above specified disabilities) including deaf, blindness which means a condition in which a person may have combination of hearing and visual impairments causing severe communication, developmental, and educational problems.
5. Any other category as may be notified by the Central Government from time to time.

Appendix B

(See sub-regulation (5) of regulation 4)

Guidelines regarding admission of students, with “Specified Disabilities” under the Rights of Persons with Disabilities Act, 2016 (49 of 2016), in Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).

- (1) The “Certificate of Disability” shall be issued in accordance with the Rights of Persons with Disabilities Rules, 2017.
- (2) The extent of “specified disability” of a person shall be assessed in accordance with the guidelines published in the Gazette of India, Extraordinary, Part II, Section 3, Sub- section (ii), vide number S.O. 76 (E), dated the 4th January, 2018 under the Rights of Persons with Disabilities Act, 2016 (49 of 2016).
- (3) The minimum degree of disability should be forty percent. (Benchmark disability) in order to be eligible for availing reservation for persons with specified disability.
- (4) The term ‘Persons with Disabilities’ (PwD) shall be used instead of the term ‘Physically Handicapped’(PH)

TABLE 18

Serial Number	Disability Category	Type of Disabilities	Specified Disability	Disability Range		
				(5)		
(1)	(2)	(3)	(4)	Eligible for Bachelor of Homoeopathic	Eligible for Bachelor of Homoeopathic Medicine and Surgery	Not Eligible for

				Medicine and Surgery (B.H.M.S). Course, Not Eligible for Persons with Disabilities Quota	(B.H.M.S). Course, Eligible for Persons with Disabilities Quota	Course
1.	Physical Disability	(A) Locomotor disability, including specified disabilities (a to f).	(a) Leprosy cured person* (b) Cerebral Palsy** (c) Dwarfism (d) Muscular Dystrophy (e) Acid attack victims	Less than 40% disability	40-80% disability- Persons with more than 80% disability may also be allowed on case to case basis and their function of incompetency will the aid of assistive devices, if it is being used, to see if its is brought below 80%	More than 80%
			(f) Other* ** such as Amputation, Poliomyelitis, etc.		and whether they possess sufficient motor, ability as required to pursue and complete the Course satisfactorily.	
			<p>* Attention should be paid to loss of sensations in fingers and hands, amputation, as well as involvement of eyes and corresponding recommendations be looked at.</p> <p>** Attention should be paid to impairment of vision, hearing, cognitive function etc. and corresponding recommendations be looked at.</p> <p>*** Both hands intact, with intact sensations, sufficient strength and range of motion are essential to be considered eligible for Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Course.</p>			
		(B) Visual Impairment(*)	(a) Blindness (b) Low vision	Less than 40% disability (i.e. Category '0 (10%)' I(20%)' & II (30%)		Equal to or more than 40% disability (i.e. Category III and above)
		(C) Hearing Impairment@	(a) Deaf (b) Hard of hearing	Less than 40% disability		Equal to or more than 40% disability

			<p>(*) Persons with visual impairment/ visual disability of more than 40% may be made eligible to pursue Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Course and may be given reservation, subject to the condition that the visual disability is brought to a level of less than the benchmark of 40% with advanced low vision aids such as telescopes / magnifier.</p> <p>@ Persons with hearing disability of more than 40% may be made eligible to pursue Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). Course and may be given reservation, subject to the condition that the hearing disability is brought to a level of less than the benchmark of 40% with the aid of assistive devices.</p> <p>In addition to this, the individual should have a speech discrimination score of more than 60%.</p>				
		(D) Speech & language	Organic/neurological causes	Less than 40%		Equal to or more than	
		disability		disability		40% disability	
		<p>For admission to Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). course the Speech Intelligibility Affected (SIA) score shall not exceed 3 (which will correspond to less than 40%) to be eligible to pursue the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course. The individuals beyond this score will not be eligible for admission to the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course.</p> <p>Persons with an Aphasia Quotient (AQ) upto 40% may be eligible to pursue Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). course but beyond that they will neither be eligible to pursue the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course nor will they have any reservation.</p>					
2.	Intellectual disability		(a) Specific learning disabilities (Perceptual disabilities, Dyslexia, Dyscalculia, Dyspraxia & Developmental aphasia)#	# Currently there is no quantification scale available to assess the severity of SLD; therefore the cut-off of 40% is arbitrary and more evidence is needed.	Less than 40% disability	Equal to or more than 40% disability but selection will be based on the learning competency evaluated with the help of the remediation/assisted technology/ aids/ infrastructural changes by the expert panel.	
			(b) Autism spectrum disorders	Absence or Mild Disability, Asperger syndrome (disability of 40-60% as per ISAA) where the individual is deemed fit for Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S). course by an expert panel	Currently, not recommended due to lack of objective method. However, the benefit of reservation/quot a may be considered in future after developing better methods of disability assessment.	Equal to or more than 60% disability or presence of cognitive/intellectual disability and/ or if the person is deemed unfit for pursuing Bachelor of Homoeopathic Medicine and Surgery course by an expert panel.	

3.	Mental Behaviour		Mental illness	Absence or mild disability: less than 40% (under IDEAS)	Currently, not recommended due to lack of objective method to establish presence and extent of mental illness. However, the benefit of reservation/quota may be considered in future after developing better methods of disability assessment.	Equal to or more than disability or if the person
4.	Disability caused dueto	(a) Chronic neurological conditions	(i) Multiple Sclerosis	Less than 40% disability	40%80% disability	More than 80% disability
			(ii) Parkinsonism			
		(b) Blood disorders	(i) Hemophilia	Less than 40% disability	40%80% disability	More than 80% disability
			(ii) Thalassemia			
(iii) Sickle cell disease						
5.	Multiple disabilities including deafness blindness		More than one of the above specified disabilities	<p>Must consider all above while deciding in individual cases recommendations with respect to presence any of the above, namely , visual, hearing, speech & language disability, intellectual disability, and mental illness as a component of multiple disabilities.</p> <p>Combining formula as notified by the related Gazette Notification issued by the Govt. of India:</p> <p><u>$a+b (90-a)$</u> 90</p> <p>(where a=higher value of disability % and b=lower value of disability % as calculated for different disabilities) is recommended</p> <p>for computing the disability ar when more than one disabling condition is present in a given individual. This formula may be used in cases with multiple disabilities, and recommendations regarding admission and/or reservation made as per the specific disabilities present in a given individual</p>		

Note: For selection under PwD category, candidate shall be required to produce Disability Certificate before his scheduled date of counselling issued by the disability assessment boards as designated by concerned authority of Government of India.

Note: 2- if the seats reserved for the persons with disabilities in a particular category remain unfilled on account of unavailability of candidates, the seats shall be included in the annual sanctioned seats for the respective category.

Annexure -I

Foundation Programme

[See clause (b) of sub-regulation (1) of regulation 7]

BACKGROUND

Homoeopathic medical education in India requires orientation of the new entrants to a basic philosophical orientation, a need to think in an integrated and holistic manner, an ability to function in a team at the bedside and a capacity to invest in a life-long learning pattern. Homoeopathy, though more than 225 years old, is relatively young as a scientific discipline and has attracted several negative community exposures due to a variety of reasons. In India, we are aware that the students who enter the portals of a homoeopathic college rarely do so out of their volition. It is often an exercise as the last choice or one which is adopted as a stepping stone to a 'medical' degree. Hence, the mind-set of the new entrants is rarely informed, positive, and self-affirming.

However, we know that like all medical disciplines, homoeopathy training includes a wide spectrum of domains that involves exposure to human interactions and interpersonal relationships in various settings including hospital, community, clinics etc. The training is intense and demands great commitment, resilience and lifelong learning. It is desirable to create a period of acclimatization and familiarization to the new environment. This would include an introduction to the course structure, learning methods, technology usage, and peer interactions which would facilitate their smooth transition from junior college to homoeopathic college.

This is planned to be achieved through a dedicated 10 days exclusive "Foundation Programme", at the beginning of the BHMS course to orient and sensitize the students to various identified areas.

Goals and Objectives

Broad goals of the Foundation Programme in Homoeopathy include:

1. Orienting the students to various aspects of homoeopathic system of medicine;
2. Creating in them the conscious awareness of the 'Mission' as defined by Master Hahnemann;
3. Equipping them with certain basic, but important skills required for going through this professional course and taking care of patients;
4. Enhancing their communication, language, computer and learning skills;
5. Providing an opportunity for peer and faculty interactions and introducing an orientation to various learning methodologies.

Objectives

(a) The Objectives of the Foundation Programme are to:

Orient the learners to:

- (i) The medical profession and the mission of a homoeopath in society
- (ii) The BHMS Course
- (iii) Vision and Mission of the institute
- (iv) Concept of holistic and positive health and ways to acquire and maintain it
- (v) History of Medicine and Homoeopathy and the status of Homoeopathy in the world
- (vi) Medical ethics, attitudes and professionalism
- (vii) Different health systems available in the country
- (viii) Health care system and its delivery
- (ix) National health priorities and policies
- (x) Principles of primary care (general and community-based care)
- (xi) Concept of mentorship programme

(b) Enable the learners to appreciate the need to enhance skills in:

- (i) Language
- (ii) Observation, documentation & understanding of basic medical technologies
- (iii) Interpersonal relationships and team behavior
- (iv) Communication across ages and cultures

- (v) Time management
 - (vi) Stress management
 - (vii) Use of information technology
- (c) Train the learners to provide:
- (i) First-aid/ Emergency management
 - (ii) Basic life support
 - (iii) Universal precautions and vaccinations
 - (iv) Patient safety and biohazard safety
- (d) Impart Language and Computer skills
- (i) Local language programme
 - (ii) English language programme
 - (iii) Computer skills

These may be arranged as per the needs of the particular batch and extra coaching may be continued after the Foundation programme

Content and Methodology

The programme will be run in professional session which must be interactive.

The major components of the Foundation Programme include:

1) Orientation Program:

This includes orienting students to all the components mentioned below with special emphasis on the role of Homoeopathy and homoeopath in today's times.

2) Skills Module (Basic):

This involves skill sessions such as Basic Life Support/ Emergency Management, First aid, Universal Precautions and Biomedical Waste and Safety Management that students need to be trained prior to entering the patient care areas.

3) Field visits to Community and Primary Health Centre:

These visits provide orientation to the care delivery through community and primary health centres, and include interaction with health care workers, patients and their families.

4) Professional development including Ethics:

This is an introduction to the concept of Professionalism and Ethics and is closely related to Hahnemann's emphasis on the conduct of a physician. This component will provide students with understanding that clinical competence, communication skills and sound ethical principles are the foundation of professionalism. It will also provide understanding of the consequences of unethical and unprofessional behavior, value of honesty, integrity and respect in all interactions. Professional attributes such as accountability, altruism, pursuit of excellence, empathy, compassion and humanism will be addressed. It should inculcate respect and sensitivity for gender, background, culture, regional and language diversities. It should also include respect towards the differently abled persons. It introduces the students to the basic concept of compassionate care and functioning as a part of a health care team. It sensitizes students to "learning" as a behavior and to the appropriate methods of learning.

5) Enhancement of Language / Computer skills / Learning skills:

These are sessions to provide opportunity for the students from diverse background and language competence to undergo training for speaking and writing English, fluency in local language and basic computer skills. The students should be sensitized to various learning methodologies such as small group discussions, skills lab, simulations, documentation and concept of Self-Directed learning.

Structure of the program for students

Table 19: Foundation Programme

Serial Number	Topic	Type of activity	Duration hours
(1)	(2)	(3)	(4)
1.	Welcome and Introduction to Vision/ Mission of the Institute	Lecture	1
2.	Mission and role of Homoeopathy and a Homoeopath in society including showcasing effects of Homoeopathy	Interactive discussion	3
3.	BHMS Course of study and introducing to first year faculty	Presentation	1
4.	Visit to institution / campus / facilities	Walking tour	2
5.	Concept of Holistic and Positive health	Interactive discussion	2
6.	History of Medicine and Homoeopathy and state of Homoeopathy in the world	Presentation	2
7.	Adult learning principles	Interactive discussion	2
8.	Health care system and delivery	Visit to PHC/ Urban Health Centre and interaction with staff	3
9.	Different health care systems recognized in the country and the concept of pluralistic health care systems	Presentation	1
10.	Primary community care	Interaction	2
11.	Basic life support	Demonstration video and practice	4
12.	Communication – its nature and importance in different social and professional settings	Practical with scenarios and enactment with observation	4
13.	Medical ethics – role in enhancing patient care	Role play	2
14.	Who is professional?	Debate between two sides on a topic	2
15.	Time management	Practical exercise	3
16.	First aid – principles and techniques	Demonstration and presentation	2
17.	National health priorities and policies	Presentation	1
18.	Importance of Mental Health and Hygiene to a medical student in the medical profession Stress management including importance of sports and extracurricular activities	Practical demonstration / video	4
19.	Concept and practice of mentoring	Interactive discussion	4
20.	Constitutional values, equality, gender sensitization and ragging policy	Presentation and Interactive discussion	3
21.	Universal precautions and vaccinations	Presentation followed by discussion	1
22.	Importance of Observation and Documentation in Homoeopathic practice	Practice exercise through video observation	4
23.	Team working	Game and debriefing	2
24.	Patient safety and biomedical hazards	Video and presentation	1
25.	Computer skills	Demonstration and practice of basic use of word, Excel and PPT	2
26.	Language skills	Language labs	2
	TOTAL		60

Annexure -II

PART A

TENTATIVE TEMPLATE OF ACADEMIC CALENDAR
First Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).
(18 MONTHS)

Serial Number	DATE / PERIOD	ACADEMIC ACTIVITY
(1)	(2)	(3)
1.	First working day of October	Course commencement
2.	10 working days	Foundation Programme
3	First periodic assessment	January- Internal Assessment (PA-1)
4.	Fourth Week of March	First Terminal Test -Internal Assessment (TT-1)
5	Second periodic assessment	June -Internal Assessment (PA-2)
6.	First week of September	Second Terminal Test -Internal Assessment (TT-2)
7.	Third periodic assessment	November – Internal Assessment – (PA-3)
8.	Second week of February to March	University Examination
9.	<i>First Working Day of April</i>	<i>Start of second professional year</i>
	NOTE.- <ol style="list-style-type: none">1. University / Institution / College shall specify dates and year while preparing academic calendar of that particular batch of students. The same is to be informed to students and displayed in respective websites.2. Institution/College established in Extreme Weather Conditions may adjust the timings as required by maintaining the stipulated hours of teaching. However, the structure of academic calendar shall not be altered.3. Academic calendar may be modified according to directions of National Commission for Homoeopathy issued from time to time.	

PART-B

TENTATIVE TEMPLATE OF ACADEMIC CALENDAR
Second/Third/ Fourth Professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S).
(12 MONTHS)

Serial Number	DATE / PERIOD	ACADEMIC ACTIVITY
(1)	(2)	(3)
1.	First working day of April	Course commencement
2.	Fourth week of July	First periodic - Internal Assessment (PT-1)
3.	Fourth week of September	First terminal examination- Internal Assessment (TT-1)
4.	Fourth week of December	Second periodic - Internal Assessment (PT-2)
5.	Third week of February	University Examination
6.	<i>First Working day of April</i>	<i>Commencement of third/fourth/internship professional year</i>
	NOTE. - <ol style="list-style-type: none">1. University/ Institution / College shall specify dates and year while preparing academic calendar of that particular batch of students. The same is to be informed to students and displayed in respective websites.2. Institution / College established in Extreme Weather Condition may adjust the timing as required by maintaining the stipulated hour of teaching and however, the structure of academic calendar shall not be altered3. Academic calendar may be modified according to directions of National Commission for Homoeopathy issued from time to time.	

Annexure-III

GUIDELINES FOR ATTENDANCE MAINTENANCE (THEORY/PRACTICAL/CLINICAL/NON-LECTURE HOURS)

Institutes/colleges offering education in Homoeopathy are recommended to maintain online attendance system. However, in case physical registers are being maintained for recording attendance of various teaching/training activities, the following guidelines are to be followed:

- (1) Attendance is to be marked in cumulative numbering fashion:
 - (a) In case presence, it is to be marked as 1, 2, 3, 4, 5, 6.....soon;
 - (b) In case of absence, it must be marked as 'A';
 - (c) Example: P PPP A P P AA P P P.... may be marked as (1, 2, 3, 4, A, 5, 6, A, A, 7,8,9...).
- (2) Avoid strictly marking 'P' for presence.
- (3) Separate register for theory and practical/clinical/non-lecture activities are to be maintained.
- (4) At the end of term or course or part of syllabus, the last number to be taken as total attendance.
- (5) The total attendance after student's signature is to be certified by respective Head of department (HOD) followed by approval by Principal.
- (6) In case of multiple terms, at the end of course all term attendance is to be summarised and percentage is to be calculated separately for theory and practical including clinical & non-lecture hours.

[Note : *If any discrepancy is found between Hindi and English version, the English version will be treated as final.]

FORM 1

[See sub- regulation (2) and (3) of regulation 16](NAME OF THE COLLEGE AND ADDRESS)

BACHELOR OF HOMOEOPATHIC MEDICINE AND SURGERY
(B.H.M.S) COURSE DEPARTMENT OF

CERTIFICATE OF ATTENDANCE AND ASSESSMENT OF INTERNSHIP

(1) Name of the Intern :

(2) Attendance during internship

Period of training

From-----to-----

(a) Number of working days

:

(b) Number of days attended

:

(c) Number of days leave availed

:

(d) Number of days absent

:

Assessment of Internship

Serial Number	Category	Marks obtained
(1)	(2)	(3)
1.	General	Maximum 10
(a)	Responsibility and Punctuality	(____)outof2
(b)	Behavior with sub-ordinates, colleagues and superiors	(____)outof2
(c)	Documentation ability	(____)outof2
(d)	Character and conduct	(____)outof2
(e)	Aptitude for research	(____)outof2
2.	Clinical	Maximum 20
(a)	Proficiency in fundamentals of subject	(____)outof4
(b)	Bedside manners & rapport with patient	(____)outof4
(c)	Clinical acumen and competency as acquired	(____)outof4
	(i) By performing procedures	
	(ii) By assisting in procedures	(____)outof4
	(iii) By observing procedures	(____)outof4
Total Score obtained		(____)out of 30

Performance Grade of marks

Poor < 8, Below average 9-14, Average 15-21, Good 22-25, Excellent 26 and above

Note: An intern obtained unsatisfactory score (below 15) shall be required to repeat one third of the total period of posting in the concerned department.

Date:

Place:

Signature of the Intern
Seal

Signature of the Head of the Department and Office

FORM 2

[See sub-regulations (3) and (4) of regulation 16](NAME OF THE COLLEGE AND ADDRESS)

(BACHELOR OF HOMOEOPATHIC MEDICINE AND SURGERY – (B.H.M.S)) COURSE CERTIFICATE OF COMPLETION OF COMPULSORY ROTATORY INTERNSHIP

This is to certify that _____ (name of the intern) an intern of _____ (name of the college and address), has completed his/her Compulsory Rotatory Internship at the _____ (Name of college, address and place of posting) for one year _____ to _____ in following departments.

TABLE 20

Serial Number.	Name of the Department	Period of training(From) (dd/mm/yyyy)	Period of training (to) (dd/mm/yyyy)
(1)	(2)	(3)	(4)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

During the internship period, the conduct of the student is

Date:

Place:

Signature of the Internship in charge / Principal/Dean/Director with Office seal

Form-3

{ See sub – regulation (4) and (7) of regulation 13 }

Migration of Mr. / Miss _____ from

_____ Homoeopathic Medical

College _____ to _____ Homoeopathic Medical College

1. Date of admission in First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) course
2. Date of passing First Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) University examination
3. Date of application
4. Number objection certificate from relieving college (enclosed) – Yes/No
5. Number objection certificate from relieving University (enclosed) – Yes/No
6. Number objection certificate from receiving college (enclosed) – Yes/No
7. Number objection certificate from receiving University (enclosed) – Yes/No
8. Number objection certificate from State Government wherein 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 Bachelor of Homoeopathic Medicine and Surgery (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: _____”.

PREAMBLE TO THE COMPETENCY BASED DYNAMIC CURRICULUM for 2nd BHMS PROFESSIONAL COURSE

The National Commission for Homoeopathy (NCH) has undertaken major revisions in the educational regulations in the last year and has devised a new Syllabus to ensure that the student who completes the Homoeopathic undergraduate course grows into a Homoeopathic physician who is informed and capable of performing as a professional with competency to deliver services as required for addressing the health needs of the person and society at large. It is based on the premise that a correct adherence to Homoeopathic principles and knowledge imparted will enable the physician to deliver results in all aspects of health, viz. preventive promotive, curative and rehabilitative.

The Homoeopathic Education Board (HEB) is obliged by the NCH Act 26 (b) to “develop a competency based dynamic curriculum for Homoeopathy at all levels in accordance with the regulations made under this Act, in such manner that it develops appropriate skill, knowledge, attitude, values and ethics among the graduates, postgraduate and super-specialty students and enables them to provide healthcare, to impart medical education and to conduct medical research”.

The NCH has formulated broad national goals which a Homoeopathic graduate would be expected to be able to achieve.

NATIONAL GOALS:

At the end of undergraduate program, the Homoeopathic medical student should be able to:

- a. Recognize the strength of homoeopathy, its applicability and limitations in health care of society and the individual.
- b. Integrate Homoeopathy along with conventional line of treatment for effective delivery of health care.
- c. Recognize the purpose of the National Health Policy and “Health for all” as a national goal and health right of all citizens and undergo training to achieve the realization of this social responsibility
- d. Develop a scientific temper, acquire educational experience for proficiency in profession and promote healthy living based on the tenets of homoeopathy.
- e. Become an exemplary citizen by observing medical ethics and fulfilling social and professional obligations so as to respond to national aspirations.

- f. Achieve competence in the practice of homoeopathy with holistic approach, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases.
- g. Establish Homoeopathy as an evidence-based system of medicine & practice it with zeal so that it stands at par to other scientific healing methods.

The above goals, though desirable, are broad. To realize them, the student entering into the undergraduate Homoeopathic programme needs to be equipped with a set of competencies which would fall in the domains of knowledge, skills and attitudes. The broad goals need to be defined in specific actionable terms which will form the Programme outcomes. These will enable all the stakeholders to be clear of the nature of functioning expected from the Homoeopathic physician at the end of the training. Accordingly, the team of resource persons worked together to formulate Programme Outcomes

PROGRAMME OUTCOMES:

At the end of the programme of the undergraduate studies, the Homoeopathic physician must

- 1) Develop the knowledge, skills, abilities and confidence as a primary care Homoeopathic practitioner to attend to the health needs of the community in a holistic manner
- 2) Correctly assess and clinically diagnose common clinical conditions prevalent in the community from time to time
- 3) Identify and incorporate the socio-demographic, psychological, cultural, environmental & economic factors affecting health and disease in clinical work
- 4) Recognize the scope and limitation of homoeopathy in order to apply Homoeopathic principles for curative, prophylactic, promotive, palliative, and rehabilitative primary health care for the benefit of the individual and community
- 5) Be willing and able to practice homoeopathy as per medical ethics and professionalism.
- 6) Discern the scope and relevance of other systems of medical practice for rational use of cross referrals and role of life saving measures to address clinical emergencies
- 7) Develop the capacity for critical thinking, self-reflection and a research orientation as required for developing evidence based Homoeopathic practice.
- 8) Develop an aptitude for lifelong learning to be able to meet the changing demands of Clinical practice
- 9) Develop the necessary communication skills and enabling attitudes to work as a responsible team member in various healthcare settings and contribute towards the larger goals of national health policies such as school health, community health and Environmental conservation.

Homoeopathic Materia Medica

Subject code: Hom UG – HMM - II

Index

S. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Learning Objectives (LO)	
4.	Course Content And Term –wise Distribution	
5.	Teaching Hours	
6.	Details of Assessment	
7.	List of Recommended Books	

Preamble

Homoeopathic Materia Medica is the study of the action of drugs on healthy human being as a whole taking into consideration individual susceptibility and its reaction to various circumstances and time. A good prescription by a Homoeopath mainly depends upon the case receiving, processing and a sound knowledge of Homoeopathic Materia Medica.

Each drug in Materia Medica not only has its own personality with its mental and physical constitution but also has its own affinity to an area, direction, spread, tissue, organ; system. Study of a drug in context of altered sensation, function and structure covers the Pathology caused by it, which is also expressed in the pathogenesis of the drugs. Materia Medica also has symptoms from Toxicological and Clinical proving. All this knowledge is of utmost importance in order to apply the remedies in various clinical conditions. This can be achieved only by integrating the study of Materia Medica with other parallel subjects taught during the course.

Apart from the source books of Materia Medica there are different types of Materia Medica constructed on different philosophical backgrounds by different authors. Materia Medica also forms the platform of various repertories. Therefore, it becomes very important for a student of Homoeopathy to learn the plan and construction of all the basic Materia Medica in order to understand their practical utility in practice.

It is also important to keep in mind that the end point of the teaching of HMM is not to burden the student with information of a greater number of remedies but to equip with an approach which will help to develop the vision towards self-guided study and apply the knowledge in practice.

This self-directed learning can ultimately lead to a critical approach of studying Materia Medica hence empowering evidence-based practice and initiate the process of lifelong learning. Exploring Materia Medica is an endless journey as newer illnesses will keep on emerging and newer drugs or undiscovered facets of existing drugs will be needed to explore for managing these situations.

Course outcomes

To grasp the basic concept and philosophy of Homeopathic Materia Medica based on Hahnemannian directions

To understand the different sources and types of Materia Medica

To mould Homoeopathic students by equipping them to readily grasp the symptoms of the sick individual corresponding to the symptoms of the drug.

To understand the drug with its pharmacological data, adaptability, sphere of action, along with characteristic sensations and functions both at level of mind and body along with doctrine of signatures.

To construct the portrait of the drug with its predisposition, disposition both mental and physical, diathesis and disease expression with Miasmatic correlation and its susceptibility expression at various times taking in to consideration of the environment around him/ her.

To understand the drug from its therapeutic application in various pathological conditions and allied clinical subjects like practice of medicine, surgery, Obstetrics and Gynaecology.

To understand the group characteristics of the drugs and the individualizing symptoms of the individual remedies of the group.

To differentiate medicines arising from the reportorial process and to arrive at an appropriate similimum.

To grasp the concept of remedy relationship and its application in practice

To understand the Miasmatic expressions and evolution in a given drug

To understand and apply the bio-chemic system of medicine in practice

To understand and apply the utility of mother tinctures in practice

1. Learning objectives

At the end of BHMS II course, the students should be able to

- i. Discuss the different approaches for studying Homoeopathic Materia Medica.
- ii. Understand the drug picture of medicines in the syllabus of II BHMS in context of its pharmacological data, constitution, temperament, sphere of action, pathogenesis, ailments from, modalities, mentals, physical generals and particulars, miasm and relationship with other remedies including the doctrine of Signature.
- iii. Integrate the knowledge of Anatomy, Physiology, Pharmacy, Psychology, Organon of Medicine, Pathology and Toxicology for the understanding of a particular drug.
- iv. Compare and contrast symptoms of similar remedies of I and II BHMS syllabus.
- v. Demonstrate the steps of case taking as per guidelines given in Organon of medicine.
- vi. Demonstrate basic physical examination skills.

- vii. Recognise the importance of interpretation of basic investigations in a given case.
- viii. Analyse the symptoms of a case to categorize them as Mentals, Physical Generals and Particulars.
- ix. Recognise the PQRS of a drug in the case taken.

2. Course content and its term-wise distribution(theory)

2.1 Introductory lectures

2.1.1 Assessment of Entry Behaviour for I BHMS syllabus

2.1.2 Different approaches for studying Homoeopathic Materia Medica

2.1.3 Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in a better understanding of Homoeopathic Materia Medica

2.2 Homoeopathic medicines:

1. Acetic Acid	17. Cactus Grandiflorus	33. Helleborus Niger
2. Actea Racemosa	18. Calcarea Arsenicosa	34. Hyoscyamus Niger
3. Aesculus Hippocastanum	19. Calcarea Iodata	35. Kali Bichromicum
4. Agaricus Muscarius	20. Camphora	36. Kali Bromatum
5. Agnus Castus	21. Cannabis Indica	37. Kali Carbonicum
6. Alumina	22. Cannabis Sativa	38. Natrum Carbonicum
7. Ambra Grisea	23. Cantharis	39. Nux Moschata
8. Anacardium Orientale	24. Cardus Marianus	40. Opium
9. Antimonium Arsenicosum	25. Causticum	41. Petroleum
10. Apocynum Cannabinum	26. Ceanothus Americanus	42. Phosphorus
11. Arsenicum Iodatum	27. Chelidonium Majus	43. Secale Cornutum
12. Argentum Nitricum	28. Chininum Arsenicosum	44. Sepia
13. Baptisia Tinctoria	29. Digitalis Purpurea	45. Stramonium
14. Berberis Vulgaris	30. Echinacea Angustifolia	46. Thuja Occidentalis
15. Bellis Perennis	31. Equisatum Hyemale	47. Urtica Urens
16. Bromium	32. Ferrum Metallicum	48. Veratrum Album

2.3 Content for Term I

2.3.2 Introductory Lectures:

2.3.2.1 Assessment of Entry Behavior for I BHMS syllabus

2.3.2.1.1 Different approaches for studying Homoeopathic Materia Medica

2.3.2.2 Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia Medica

2.3.3 Homoeopathic medicines:

1. Acetic Acid	9. Cardus Marianus	17. Kali Bromatum
2. Aesculus Hippocastanum	10. Causticum	18. Kali Carbonicum
3. Agaricus Muscarius	11. Ceanothus Americanus	19. Natrum Carbonicum
4. Alumina	12. Chelidonium Majus	20. Opium
5. Anacardium Orientalis	13. Chininum Arsenicosum	21. Thuja Occidentalis
6. Apocynum Cannabinum	14. Echinacea Angustifolia	22. Urtica Urens
7. Baptisia Tinctoria	15. Helleborus Niger	
8. Bellis Perrenis	16. Kali Bichromicum	

2.4 Contents for Term II:

Homoeopathic medicines:

1. Actea Racemosa	11. Calcarea Iodatum	21. Petroleum
2. Agnus Castus	12. Camphora	22. Phosphorus
3. Ambra Grisea	13. Cannabis Indica	23. Secale Cornuatum
4. Antimonium Arsenicosum	14. Cannabis Sativa	24. Sepia
5. Argentum Nitricum	15. Cantheris	25. Stramonium
6. Arsenicum Iodatum	16. Digitalis Purpurea	26. Veratrum Album
7. Berbers Vulgaris	17. Equisatum Hyemale	
8. Bromium	18. Ferrum Metallicum	
9. Cactus Grandifloria	19. Hyoscyamus Niger	
10. Calcarea Aarsenicosum	20. Nux Moschata	

Non-lectures shall be equally distributed to both term I and II, as per the feasibility of individual institution

3. Teaching hours

3.1 Gross division of teaching hours

Homoeopathic Materia Medica		
Year	Teaching hours- Lectures	Teaching hours- Non-lectures
II BHMS	150	100

3.2 Teaching hours theory

S. No.	List of Topics	Hours
1.	Assessment of Entry Behavior of I BHMS syllabus	2
2.	Different approaches for studying Homoeopathic Materia Medica	4
3.	Integrating the knowledge of Pathology and Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia Medica	2
4.	Study of Drug pictures (Term I)	70
5.	Study of Drug pictures (Term II)	72
	Total	150

3.3 Teaching hours Non-lecture

Sr. No	Non-Lecture Teaching Learning methods	Term	Time Allotted per Activity (Hours)
1	Clinical(to be integrated with topics under Pathology, Practice of Medicine, Surgery and ObGy)	I & II	75
2	Demonstration	I & II	25 (Distribution as mentioned below)
2(a)	Seminar / Tutorials		10
2(b)	Problem based learning/ Case Based Learning		10
2(c)	Assignment/ Symposium / Group discussion		5
	Total		100

4. Details of assessment

4.1 Overall Scheme of Assessment (Summative)

Sr. No	Professional Course	Term I (1-6 Months)		Term II (7-12 Months)		
1	Second Professional BHMS	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	FUE (end of 12 months)	
		10 Marks Viva	50 Marks Practical/ Viva Viva voce -25 marks Clinical performance – 25 marks (Case Taking and analysis of symptoms)	10 Marks Viva	100 marks theory	100 marks (Clinical/practical+ Viva+ IA)

PA: Periodical Assessment; TT: Term Test; FUE: Final University Examinations; IA: Internal Assessment

4.2 Number of papers and marks distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical/ Clinical	Viva Voce	Internal Assessment**	Grand Total
1	Hom UG- HMM-II	01	100 marks*	50 marks Journal -10 marks (Five acute and 5 chronic cases) Case taking and analysis of symptoms --- 40 marks	40 marks	10 marks (Marks of PA I + TT I + PA II)	200 marks

***30 % of questions shall be from I BHMS syllabus and 70 % of questions shall be from II BHMS syllabus.**

****Method of calculation of Internal Assessment marks for Final University Examination: Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) / 70 X 10**

4.3 Paper Layout

Summative assessment (FUE): Theory- 100 marks

MCQ	10 marks
SAQ	40 marks
LAQ	50 marks

4.4 Distribution of questions for theory exam

Sr. No	Paper A List of Topics	B Term	C Marks	'D' Type of Questions		
				MCQ (1 Mark)	SAQ (5 Marks)	LAQ (10 Marks)
1	BHMS I Syllabus	-	Refer to table 8.5 below	05	03	01
2	Different approaches for studying Homoeopathic Materia Medica	I		0	01	0
3	Integrating the knowledge of Pathology and Toxicology in better understanding of Homoeopathic Materia Medica	I		0	0	0
4	Homoeopathic Medicines of II BHMS (48)	I&II		05	04	04

4.5 Theme-wise distribution:

Theme	Topics	Term	Marks	MCQ's	SAQ's	LAQ's
A-D	BHMS I Syllabus	-	30	5	3	1
E	Different approaches for studying Homoeopathic Materia Medica	I	5	0	1	0
F	Homoeopathic Medicines of II BHMS (48)	I&II	65	5	4	4

4.6 Question paper blueprint

A Question Serial Number	B Type of Question	Question Paper Format (Refer table 8.5 for themes)
Q1	Multiple Choice Questions (MCQ) 10 Questions 1 mark each All compulsory Must know part: 7 MCQ Desirable to know: 2 MCQ. Nice to know: 1 MCQ	Theme A-D Theme A-D Theme A-D Theme A-D Theme A-D Theme F Theme F Theme F Theme F Theme F
Q2	Short answer Questions (SAQ) Eight Questions 5 Marks Each All compulsory Must Know part: 6 SAQ Desirable to Know: 2 SAQ	Theme A-D Theme A-D Theme A-D Theme E Theme F Theme F Theme F Theme F
Q3	Long answer Questions (LAQ) Five Questions 10 marks each All compulsory All questions on Must Know No Questions on Nice to Know and Desirable to Know	Theme A-D Theme F Theme F Theme F Theme F

5. List of recommended text/reference books

- Allen H.C. (2005). Keynotes Rearranged and Classified with Leading Remedies of the Materia Medica and Bowel Nosodes, (Reprint edition), B.Jain Publishers, New Delhi
- Choudhuri N.M. (2006). A Study On Materia Medica Enriched with real case studies, (Reprint revised edition). B.Jain Publishers, New Delhi.
- Kent J.T. (2015). Lectures on Homoeopathic Materia Medica (Reprint edition,) B.Jain Publishers, New Delhi.
- Burt W. (2009). Physiological Materia Medica, (Third edition) B.Jain Publishers, New Delhi.
- Nash E.B. (2007). Leaders in Homeopathic Therapeutics with Grouping and Classification, (Sixth edn.) B Jain Publishers, New Delhi.
- Tyler M.L. (2007). Homoeopathic Drug Picture. (First edition), B Jain Publishers, New Delhi.
- Farrington E.A. (2007) Lectures on Clinical Materia Medica in family order (Fourth edition.) B Jain Publishers Pvt Ltd, New Delhi.
- Farrington E.A. (2005), Comparative Materia Medica. (Reprint edition.) B.Jain Publishers, New Delhi.
- Boericke W, Dewey W, 2016, The Twelve Tissue Remedies by Schussler, Reprint edition, B.Jain Publishers, New Delhi
- All source books.

Organon of Medicine and Homeopathic Philosophy

Subject Code: Hom UG-OM-II

Index

S. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Learning Objective (LO)	
4.	Course Content and Term –wise Distribution	
5.	Teaching Hours	
8.	Details of Assessment	
9.	List of Recommended Books	

1. Preamble

Organon of Medicine with Homoeopathic Philosophy is a central fulcrum around which education and training of a Homoeopathic physician revolves. It lays down the foundations of Homoeopathic practice, education, training and research. It not only elaborates on the fundamental laws but also how to apply them in practice. It defines the qualities of a healer, guides the Homoeopathic physician in inculcating values and attitude and develop skills.

Nature nurtures us. It is well depicted in our science. Therefore, Homoeopathy is in synchronization with nature. The need to keep life force within us well balanced with nature is well established in the Organon of Medicine by Dr Hahnemann. Dr Hahnemann as an ecologist was well ahead of his time. Philosophically, it connects man and his actions to the dynamic forces available in nature, thus bringing to fore the holistic approach. Lateralization of these concepts helps the student to develop insight into various facets of Life & Living.

Homoeopathic philosophy orients the students to homoeopathy as an Art & Science. It's comprehensive understanding needs a core competency in logic and the concepts of generalization and individualization. Its treatment of disease process and relating to the concept of miasm makes it a study of the process of scientific investigation.

The biggest challenge in teaching-learning of Homoeopathic philosophy is to first understand the fundamentals according to the Master's writing and then demonstrate them in practice. Quality and real time integration with other subjects helps a student to conceive the holistic perceiving of Man and Materia Medica. The concepts and knowledge required by the Physician with operational knowledge of management of patients and their diseases will need horizontal and vertical integration with Homoeopathic subjects and clinical subjects. First BHMS will need horizontal integration with Anatomy, Physiology, pharmacy and HMM. Homoeopathic philosophy will have spiral integration with itself and vertical integration with clinical subjects. Second year will need integration with pathology, community medicine, forensic medicine, along with other Homoeopathic subjects. Third and fourth year establishes links with clinical subjects, research methodology and pharmacology.

Science is never static. Since the time of Dr.Hahnemann, medical science has advanced by leaps and bounds. Since Homoeopathy is based on principles rooted in nature, they would stand the test of time. However, their application in the changing times and circumstances would find newer avenues to heal. This is an opportunity for a homoeopath to connect the current advances while relating with the fundamental laws. Mastering all this will make him a master healer and will move him towards higher purpose of existence.

2. Course outcomes

At the end of the BHMS program, a student will be able to-

- i. Understand Mission of a Physician & Higher Purpose of Existence as per the Master's thoughts and words
- ii. Understand Hahnemannian concept of man and integrating it with the concept from the bio-psycho-social perspective.
- iii. Know homoeopathy as a Holistic & Individualistic medical science
- iv. Understand the concept of dynamism and vital force to get insight in health, disease, diathesis and disease.
- v. Relate concepts of Prevention, Promotion & Cure with the Hahnemannian approach
- vi. Know the Healer within the Homoeopathic Physician and work towards bringing forth the qualities of healing.
- vii. Understand Philosophy of Life & Health by applying basic fundamental laws of Homoeopathy.
- viii. Understand Homoeopathic philosophy in the context of research

3. Learning outcomes

- i. Understanding the evolution of chronic disease in view of pathogenesis
- ii. Knowing Hahnemannian classification of diseases and its importance
- iii. Correlation of Microbiology and Homeopathy with Miasms.
- iv. Correlation of laboratory investigation with the evolution of pathology and miasm
- v. Learning the concept of prevention of disease
- vi. Understanding the concept of causation and relating to homoeopathy
- vii. Classification and analysis of symptoms and correlation with repertory.
- viii. Developing a portrait of disease by integrating the Hahnemannian concept

4. Course content and its term-wise distribution

Sl. No.	Topic
Term I	
1.	Natural Disease vs Artificial Disease (Aphorisms 28-33)*
2.	The Correctness of Homoeopathic Therapeutic Law of Nature (Aphorisms 34-51)*
3.	Classification of Diseases (Hahnemannian Classification of Disease) with Introduction to Miasm (Aphorisms 71-82)*
4.	Case Taking (Aphorisms 83-103)*
5.	Homoeopathic Philosophy:
5.1	Symptomatology: 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.
5.2	Case taking: The purpose of Homoeopathic case-taking is not merely the collection of 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 Organon is to be stressed. Case receiving-perceiving techniques and symptoms-grading needs to be introduced and discussed. The prerequisite of the physical environment & of the physician also needs to be outlined.
5.3	Case processing: This includes-
5.3.1	Analysis of Symptoms
	Evaluation of Symptoms

5.3.2	
5.3.3	Totality of symptoms
5.3.4	Susceptibility
Term II	
6.	Record Keeping (Aphorism 104)*
7.	Various Systems of Medicine (Aphorisms 52-70)*
8.	Causation: Thorough comprehension of the evolution of disease, taking into account pre-disposing, fundamental, exciting and maintaining causes.
9.	Individuality- individualization- its process
10.	Anamnesis- evolution of disease
11.	Disease-its progress- complex disease relation with miasm
12.	Introduction to the concept of suppression

5. Teaching hours

5.1. Gross division of teaching hours

Organon of Medicine and Homoeopathic Philosophy		
Year	Teaching hours- Lectures	Teaching hours- Non-lectures
II BHMS	150	100

5.2 Teaching hours theory

Sl. No	List of Topics	Hours
1.	Natural Disease vs Artificial Disease	05
2	The Correctness of Homoeopathic Therapeutic Law of Nature	20
3	Classification of Diseases with introduction to Miasm	20
4	Case Taking (Aphorisms 83-103)	20
5	Symptomatology	07
6	Case taking (Homoeopathic Philosophy)	12
7	Case processing	15
8	Various systems of Medicine	15
9	Record Keeping	02
10	Causation	15
11	Anamnesis-evolution of disease, Disease its progress-complex disease, Individualization-its process, Susceptibility- types and factors modifying it	16
12	Introduction to the concept of suppression	3
	Total	150

5.3. Teaching hours Non-lecture

Sr. No	Non-Lecture Activity	Term	Time Allotted per Activity (Hours)
1	Clinical(to be integrated with topics under Pathology, Practice of Medicine, Surgery and ObGy)	I & II	75
2	Demonstrative	I & II	25
2(a)	Seminar / Tutorials		10
2(b)	Problem based learning/ Case Based Learning		10
2(c)	Assignment/ Symposium / Group discussion		5
	Total		100

8. Details of assessment

8.1 Overall Scheme of Assessment (Summative)

Sr. No	Professional Course	Term I (1-6 Months)		Term II (7-12 Months)		
1	Second Professional BHMS	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	FUE (end of 12 months)	
		10 Marks Viva	50 Marks Practical/ Viva Viva voce - 25marks	10 Marks Viva	100 marks theory	100 marks (Clinical/practical+ Viva+ IA)
			ii) Clinical performance – 25 marks Case taking and analysis and evaluation			

8.2 Number of papers and marks distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical/ Clinical	Viva Voce	Internal Assessment**	Grand Total
1	Hom UG-OM-II	01	100 marks	50 marks Case taking-10 marks Case processing-25 marks Case presentation-5marks Journal*-10 marks	40 marks	10 marks (Marks of PA I + TT I + PA II)	200marks

*Journal with 10 cases needs to be maintained by the students which should include Case Taking, Case Processing -Analysis & Evaluation, Investigations, Probable Diagnosis, Classification of disease in that case, Susceptibility

**Method of Calculation of Internal Assessment Marks for Final University Examination: Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) / 70 X 10

Paper Layout

Summative assessment (FUE):

Theory- 100 marks

MCQ	10 marks
SAQ	40 marks
LAQ	50 marks

8.3 Distribution of questions for theory exam

Sr. No	Paper	B Term	C Marks	D Type of Questions		
				MCQ (1 Mark)	SAQ (5Marks)	LAQ (10 Marks)
1	Aphorism 28- 70 and 83-104	I & II	Refer to table 8.5 below	4	2	2
2	Case taking -receiving- perceiving techniques prerequisites of physician, Symptomatology, Analysis, Evaluation, Totalityof Symptoms	I & II		2	2	1
3	Classification of disease with introduction to miasm (Aphorism 71-82); Its correlation with pathogenesis and Homoeopathic management	I		2	1	1
4	Anamnesis-evolution of disease, Disease its progress- complex disease, Individualization-its process, Susceptibility: types and factors modifying it	II			2	
5	Causation; Introduction to the concept of suppression	II			1	1

8.4 Theme-wise distribution

No	Chapter/ Topic	Term	Theme	Marks	LAQ	SAQ	MCQ
1	Aphorism 28-104	I & II	A	34	20	10	4

2	Case taking -receiving-perceiving techniques prerequisites of physician, Symptomatology, Analysis, Evaluation, Totality of Symptoms	I&II	B	22	10	10	2
3	Classification of Disease with respect to Pathogenesis, miasm and correlation with homeopathic management	I	C	17	10	5	2
4	Anamnesis-evolution of disease, Disease its progress-complex disease, Individualization-its process,Susceptibility: types and factors modifying it	II	D	12		10	2
5	Causation; Introduction to the concept of suppression	II	E	15	10	5	

9. List of recommended text/reference books

- Hahnemann Samuel, Organon of Medicine 6th edition translated By W. Boericke
- Hahnemann Samuel, Organon of Medicine 5th& 6th combined edition translated By R. E. Dudgeon
- Kent J.T. Lectures on Homoeopathic Philosophy
- Roberts H. A. The Principle and Art of Cure By Homoeopathy
- Close Stuart, The Genius of Homoeopathy Lectures and Essay on Homoeopathic Philosophy
- Sarkar B. K., Commentary on Organon
- Das A. K.,A Treatise on Organon of Medicine
- Schmidt Pierre, The Art of Case Taking and Interrogation
- Goel Sumit, A study on Organon of Medicine and Homoeopathic Philosophy

10. List of Contributors

- I. Dr. Prabhakar Devadiga, MD (Hom), Professor and HOD Smt. Chandaben Mohanbhai Patel Homeopathic Medical College, Mumbai, Maharashtra 400056
- II. Dr. S. M. Sharma, MD (Hom) Professor, Department of Organon and Principal, Dr. Madan Pratap Khunteta Homeopathic Medical College, Jaipur, Rajasthan
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Homoeopathic Repertory and Case Taking

Subject Code: Hom UG-R-II

Index

S. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Learning Objectives (LO)	
4.	Course Content And Term –wise Distribution	
5.	Teaching Hours	
6.	Details of Assessment	
7.	List of Recommended Books	

1. Preamble

The repertory is a dictionary or storehouse or an index to the huge mass of symptoms of the Materia Medica. The repertory is organized in a practical form indicating the relative gradation of drugs. Repertories not only contain symptoms of proving but also clinical and pathological symptoms found in the Materia Medica and additions made by authors based on their clinical experience. As no mind can memorize all the symptoms of the Materia Medica with their relative grading, repertories serve as an instrument at the disposal of the physician for sifting through the maze of symptoms of the vast Materia Medica. Case taking is the elementary mode of collecting data from the patient and the principles and techniques of case taking will demand constant updating of knowledge of the disease processes and way of interacting with human beings.

Need of the repertory as a tool arose when the number of remedies went on increasing and it was becoming humanly difficult to remember all the symptoms. A simple solution was to index the symptoms with the name of the drug. Repertories aim at simplifying the work of the physician to find the indicated remedy by eliminating the non-indicated remedies. Repertorisation is not the end but means to arrive to the simillimum and reference to Materia Medica based on sound principles of Philosophy is the final court of appeal.

Each repertory has been compiled on the basis of distinct philosophy, structure and utility. To use these instruments effectively, one must understand thoroughly its conceptual base, construction and utility and limitations. Even though there are a number of repertories, the student at the undergraduate level is expected to learn the philosophy and application of basic core repertories namely Kent, BBCR and BTPB. The subject of Repertory must not be taught in isolation but must be taught in horizontal integration with Anatomy and Physiology in I BHMS, Pathology in II BHMS, Surgery and Gynaecology in III BHMS and Practice of Medicine in IV BHMS and vertically integrated with Materia Medica and Organon and Homoeopathic Philosophy in all the years. Integrated teaching over all the years will help the student to grasp and understand the subjects better and connect repertory to all other subjects.

Similarly, case taking demands virtually integrating all the subjects taught from the I through IV BHMS in the consulting room or at the bedside. The physician can never say that he has learnt all every new patient has a new lesson to teach.

The advent of computerization and resulting software has opened many new avenues to collate and correlate the vast information found in the Materia Medica through the repertories. Continued exploration of these connections will generate new data, new repertories and the new application to existing or new illnesses.

2. Course outcomes

At the end of BHMS course, the learner will be able to:

- i. Explain the need and utility of repertory as a tool to find the similimum and in the study of Materia Medica.
- ii. Describe the philosophical backgrounds, construction, utility and limitation of Kent repertory, BTBP, BBCR, Boericke repertory, other clinical repertories and modern repertories.
- iii. Able to describe the various dimension of case taking and able to demonstrate case taking in moderate and difficult cases.
- iv. Classify the symptoms, evaluate the symptoms according to their importance and construct the totality of symptoms based on different philosophies (Dr Kent, Dr Boenninghausen, Dr Hahnemann, Garth Boericke).
- v. Choose an appropriate approach for the case, construct the Repertorial Totality and select the appropriate rubrics and technique of repertorisation.
- vi. Identify the medium, method, process and technique of repertorization.
- vii. Display empathy with the patient and family during case taking.
- viii. Communicate to the patient and attendants the need for sharing patient related information for a complete Homoeopathic case taking.
- ix. Develop ability to apply different case taking skills.
- x. Search for the appropriate rubrics in different repertory.
- xi. Understanding and evolution of modern repertories, computerized repertories, operate and use software-based repertories for repertorization.

3. Learning objectives

At the end of II BHMS, the learner will be able to:

1. Describe the steps of case taking in acute and chronic cases
2. Perform simple case taking in acute and chronic case under guidance
3. Illustrate the structure of Boericke repertory
4. Locate different pathological rubrics from Boericke repertory and Kent's repertory

4. Course content and its term-wise distribution(theory)

4.1 Case Taking (Term I)

- 4.1.1 Demonstration of Homoeopathic case taking in simple, acute and chronic cases (*refer to the table in Annex-A at the end defining category of the cases*)
- 4.1.2 Instructions given in Organon regarding case taking

4.2 Correlation of Repertory with Disease and Pathology (Term II)

- 4.2.1 Introduction to Boericke's repertory
- 4.2.2 Representation of different pathologies and pathogenesis in Boericke and Kent repertory

- 4.2.3 Understanding holistic concept of disease, constitution, diathesis, susceptibility and temperament

5. Teaching hours

5.1. Gross division of teaching hours

Homoeopathic Repertory and Case Taking		
Year	Teaching hours- Lectures	Teaching hours- Non-lectures
II BHMS	50	30

5.2. Teaching hours theory

S. No.	List of Topics	Hours (Total 50 hrs)
Term I		
1.	Demonstration of Homoeopathic case taking in simple acute cases	09
2.	Demonstration of Homoeopathic case taking in simple chronic cases	08
3.	Instruction given in Organon regarding case taking	05
	Total	22
Term II		
4.	Introduction to Boericke repertory	10
5.	Representation of different pathologies and pathogenesis in Boericke and Kent repertory	06
6.	Understanding holistic concept of disease, constitution, diathesis, susceptibility and temperament	12
	Total	28

5.3. Teaching hours Non-lecture

Sr. No	Non-Lecture Activity	Hours
Term I		
1	Clinical	15
2	Demonstrative	
2(a)	Seminar / Tutorials	01
2(b)	Problem based learning/ Case Based Learning	02
2(c)	Assignment/ Symposium / Group discussion	02
Term II		
1	Clinical	05
2	Demonstrative	
2(a)	Seminar / Tutorials	01
2(b)	Problem based learning/ Case Based Learning	01
2(c)	Assignment/ Symposium / Group discussion// Rubric hunting exercises	03
	Total	30

6. Details of assessment

Note- The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA)*

Professional Course/ Subject	Term I (1-6 Months)		Term II (7-12 Months)	
	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	TT II (end of 12 months)
II BHMS/ Repertory	10 Marks Viva- A	50 Marks Clinical/Practical and Viva - E i) Viva voce -25 marks ii) Clinical/practical- 25 a Recording of Simple acute case - 20 marks b Analyse the case for acute and chronic disease as per Hahnemann's classification of disease - 05 marks	10 Marks Viva- B	50 Marks Clinical/Practical and Viva - F Viva Voce - 25 marks i) Clinical/ practical- 25 a) Recording of Simple chronic case-15 marks b) Analyse the case for acute and chronic disease as per Hahnemann's classification of disease - 05 marks c) Locate the rubrics for pathologies in Boericke & Kent's repertory- 05 marks

***Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:**

Marks of PA I	Marks of PA II	Periodical Assessment Average PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test Average TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	B	D	E	F	G	D+G/2

7 List of recommended text/reference books

- Ahmed Munir R(2016). Fundamentals of repertories:Alchemy of homeopathic methodology.
- Bidwell GI.(1915). How to Use the Repertory.
- Boericke, W. (2003). New manual of Homoeopathic Materia Medica and repertory.
- Hahnemann, S. (2014). Organon of Medicine.
- Kent, J. T. (2008). Lectures on Homeopathic Philosophy.
- Kent, J. T. (2016). Repertory of the homeopathic materia medica.
- Kent, J. T: How to study the Repertory, how to use the Repertory.
- Tiwari SK. (2007). Essentials of Repertorization.

Annexure A (in reference of course content sub clause 4.1.1)

	Simple case	Moderate case	Difficult case
Acute case	A case of acute nature as defined by Hahnemann; which is presenting with complete symptoms of either one location or one system of single malady with no other comorbid conditions. Cases where case processing is easy and constructing totality/ rubric search for reference/ Repertorization is easy.	A case of acute nature as defined by Hahnemann; which is presenting with mixed symptomatology (complete as well incomplete symptoms) of multiple location or of single malady of functional level with other comorbid conditions of functional level. Cases where case processing needs a certain set of knowledge, skill for construction of totality and rubric search/ Repertorization is somewhat more difficult than simple cases.	A case of acute nature as defined by Hahnemann; which is presented with mixed symptomatology of multiple locations with structural changes or a complex disease. Cases where case processing needs a certain set of knowledge, skill for construction of totality and rubric search/ Repertorization is somewhat difficult than moderate cases.
Chronic case	A case of chronic nature as defined by Hahnemann; which is having complete symptoms of either one location or one system of single malady with no other comorbid conditions. Cases where case processing is easy and constructing Repertorial totality/ rubric search/ Repertorization is easy.	A case of chronic nature as defined by Hahnemann; which is presenting with mixed symptomatology (complete as well incomplete symptoms) of multiple locations or of single malady of functional level with other comorbid conditions of functional level. Cases where case processing needs a certain set of knowledge, skill for construction of totality and rubric search/ Repertorization is somewhat difficult than simple cases.	A case of chronic nature as defined by Hahnemann; with mixed symptomatology of multiple locations with structural changes or a complex disease. Cases where case processing needs a certain set of knowledge, skill for construction of totality and rubric search/ Repertorization is somewhat difficult than moderate cases

Forensic Medicine & Toxicology

Subject code: Hom UG-FMT

Index

S. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Course Content And Term –wise Distribution	
4.	Teaching Hours	
5.	Details of Assessment	
6.	List of Recommended Books	

Preamble

Forensic Medicine and Toxicology encompass a multifaceted understanding of the medical, legal, and medico-legal obligations incumbent upon physicians, alongside a profound comprehension of medical ethics, decorum, and the toxicological ramifications of poisons. This field intersects with the elucidation of symptoms associated with homeopathic remedies. It is imperative for every registered Homoeopathic medical practitioner, whether practicing privately or within governmental institutions, to undertake medico-legal examinations as mandated by statute. In the current landscape characterized by burgeoning consumerism in medical services, familiarity with laws pertinent to medical practice, doctrines of medical negligence, and ethical codes assumes paramount importance. Practitioners must be cognizant of their medico-legal responsibilities, adept at making astute observations, drawing logical inferences, and arriving at significant conclusions during investigations into criminal matters and associated medico-legal intricacies.

Furthermore, proficiency in identifying, diagnosing, and studying the management protocols of both acute and chronic poisonings is indispensable. Decisions regarding treatment and referral should be judiciously made, considering the prevailing circumstances and severity of the condition, thereby ensuring timely intervention. Moreover, an understanding of the medico-legal dimensions of poison-related incidents is crucial.

Additionally, recognizing that the toxicological manifestations of poisons may bear resemblance to either the proving or clinical symptoms of certain Homoeopathic remedies underscoring the importance of integration between these disciplines. Such integration not only sheds light on the evolving drug profiles but also enhances comprehension of toxicological and therapeutic principles.

Course outcomes (CO)

At the end of BHMS II course in Forensic Medicine and Toxicology, the student shall –

- Identify, examine and prepare reports / certificates in medico-legal cases/situations in accordance with the law of land.
- Demonstrate awareness of legal/court procedures applicable to medico legal/medical practice.
- Acquire knowledge in Forensic medicine and recognize its scope and limitations in Homoeopathic practice
- Be conversant with the code of ethics, etiquette, duties and rights of medical practitioners' profession towards patients, profession, society, state and humanity at large; infamous conduct, medical negligence, and punishment on violation of the code of ethics.

- Be able to identify poisons/poisoning, and management of poisoning within the scope of homoeopathy.
- Develop knowledge of Materia Medica by application of knowledge gained by the study of Toxicology.
- Develop skills in medical documentation.
- Be aware of the principles of environmental, occupational and preventive aspects of general Toxicology.

Teaching hours
Gross division of teaching hour

Forensic Medicine and Toxicology		
Year	Teaching hours Lectures	Teaching hours Non-lectures
II BHMS	120	50

Course content with its Term-wise and Teaching hours distribution
Teaching hours theory

Sr. No.	List of Topics	Term	Hours
Forensic Medicine			
1	Introduction to Forensic Medicine	I	02
2	Medical ethics	I	03
3	Legal procedures	I	04
4	Personal Identification	I	07
5	Death and its medico-legal importance	I	13
6	Injury and its medico-legal importance	II	10
7	Forensic psychiatry	II	04
8	Post-mortem examination (ML autopsy)	II	04
9	Impotence and sterility	II	03
10	Virginity, defloration; pregnancy and delivery.(Integration with OBG)	II	03
11	Abortion and infanticide (Integration with OBG)	II	04
12	Sexual Offences	II	06
Toxicology			
1.	General Toxicology	I	7
2.	Clinical toxicology	I	20
3.	Clinical Toxicology	II	25
Legislation relating to medical profession(relevant areas)			
1.	Legislation relating to medical profession	II	5
	Total		120

Teaching Hours: Non-lecture

Sr. No.	Non-Lecture Activity	Term	Time Allotted per Activity
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			(Hours)
1	Practical	I&II	35
	Demonstration		
1(a)	Weapons Toxicology-corrosives, irritants, systemic and miscellaneous poisons, gastric lavage Charts, diagrams, photographs, models, bones, x-ray films of medico-legal importance		10
	Certificate Writing		
1(b)	a) Various certificates like sickness certificate, physical Fitness certificate, death certificate, consent form, birth Certificate.		3
	b) Knowledge of injury certificate, examination of rape victim and assailant, drunkenness, post-mortem examination report, age certification		
1(c)	Consent -Medical consent, implied consent, patient confidentiality, autonomy, role of care giver, audio-video recording of cases, safety and custody of medical records		2
1(d)	Demonstration of at least ten medico-legal autopsies.		20
2	Demonstrative	I&II	15
2(a)	Court Procedures (Moot Court)		05
2(b)	Field Visits		10
	Total		50

Details of Assessment
Overall Scheme of Assessment (Summative)

Sr. No	Professional Course	Term I (1-6Months)		Term II (7-12Months)		
		PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	FUE (end of 12 months)	
1	Second Professional BHMS	10 Marks Viva	50 Marks Practical/Viva Viva voce -25marks Practical- 25 marks (Identification of weapons, poisons, X-Rays- 10 Marks, Certificate writing- 10 Marks Case Scenario of consent taking-5 marks)	10 Marks Viva	100 marks theory	100 marks (Clinical/practical +Viva + IA)

- **PA: Periodical Assessment**
- **TT: Term Test**
- **FUE: Final University Examinations**
- **IA: Internal Assessment**

Number of papers and Marks Distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical/Clinical	Viva Voce	Internal Assessment*	Grand Total
1	Hom UG-FMT	01	100marks	50marks**	40 marks	10 marks (Marks of PAI+TTI+PAII)	200marks

***Method of Calculation of Internal Assessment Marks for Final University Examination:**
Marks of IA- (Marks of PA-1 +Marks of TT+ Marks ofPA-2) / 70 X10

****Details of practical assessment at FUE**

Sr. No	Headings	Marks
1	6 spotters – Bones, weapons, Toxicology specimens, Photographs, models – with their medico legal aspects- 5 marks Each	30
2	Certificate Writing	10
3	Journal	10
	Total	50

Paper Layout

**Summative Assessment (FUE)
Theory-100 marks**

MCQ	10 marks
SAQ	40 marks
LAQ	50 marks

Distribution of questions for theory exam

Sr.No	Paper	B Term	D Type of Questions “Yes” can be asked. “No” should not be asked.		
			MCQ (1Mark)	SAQ (5 Marks)	LAQ (10Marks)
1	Introduction to Forensic Medicine &Medical Ethic Legal procedure	I	No	Yes	No

2	Personal Identification	I	Yes	Yes	No
3	Death and Its Medicolegal importance	I	Yes	No	Yes
4	Injury and Its medicolegal importance	II	Yes	No	Yes
5	Impotence and sterility	II	Yes	Yes	Yes
	Virginity, defloration pregnancy and Delivery Abortion and infanticide Sexual offences	II			
6	General Toxicology	I	Yes	Yes	No
7	Clinical Toxicology-Corrosive Poisons	I	Yes	Yes	No
8	Clinical Toxicology-Irritant Poisons	I	Yes	No	Yes
9	Clinical Toxicology-Asphyxiant poisons	I	No	Yes	No
10	Clinical Toxicology-Neurotics Poisons	II	No	Yes	No
11	Clinical Toxicology-Cardiac Poisons	II	No	Yes	No
12	Clinical Toxicology-Miscellaneous Poisons	II	Yes	No	No
13	Clinical Toxicology-Food Poisoning, Drug Dependence and drug abuse	II	Yes	No	No
14	Legislation relating to medical profession	II	No	No	Yes

Theme-wise distribution of questions:

The me	Topics	Ter m	Marks	MCQ's	SAQ's	LAQ's
A	Introduction to Forensic Medicine Medical ethics Legal procedure	I	5	0	5	0
B	Personal Identification	I	6	1	5	0
C	Death and Its Medicolegal importance	I	11	1	0	10
D	Injury and Its medicolegal importance	II	11	1	0	10
E	Impotence and sterility Virginity , defloration pregnancy and Delivery, Abortion, Infanticide Sexual offences	II	16	1	5	10
F	General Toxicology	I	6	1	5	0
G	Clinical Toxicology-Corrosive Poisons	I	6	1	5	0
H	Clinical Toxicology-Irritant Poisons	I	11	1	0	10

I	Clinical Toxicology- Asphyxiant poisons	I	5	0	5	0
J	Clinical Toxicology-Neurotics Poisons	II	5	0	5	0
K	Clinical Toxicology-Cardiac Poisons	II	5	0	5	0
L	Clinical Toxicology-Miscellaneous Poisons	II	2	2	0	0
M	Clinical Toxicology- Food Poisoning, Drug Dependence and drug abuse	II	1	1	0	0
N	Legislation relating to medical profession	II	10	0	0	10

Question paper blueprint

A Question Sr. No.	B Type of Question	Question Paper Format (Refer table 7.5for themes)
Q1	Multiple choice Questions (MCQ) 10 Questions 1mark each All compulsory Must know part: 6 MCQ Desirable to know: 2 MCQ. Nice toknow:2MCQ	1.Theme B 2.Theme C 3.Theme D 4.Theme E 5.Theme F 6.Theme G 7.Theme H 8.Theme L 9.Theme L 10.Theme M
Q2	Short answer Questions (SAQ) 8 Questions 5 Marks Each All compulsory Must know part:7 SAQ Desirable to know: 1 SAQ Nice to know: Nil	1.Theme A 2.Theme B 3.Theme E 4.Theme F 5.Theme G 6.Theme I 7.Theme J 8.Theme K
Q3	Long answer Questions (LAQ) 5Questions 10 Marks each All compulsory	1.Theme C 2.Theme D 3.Theme E 4.Theme H 5.Theme N

FORENSIC MEDICINE & TOXICOLOGY (2022 COURSE)

II BHMS

Theory Question Paper

Day-
Date-

Time-
Marks- 100

Instructions- 1. All Questions are **COMPULSORY**.
2. Draw diagrams **WHEREVER** necessary.

Q.1. Multiple choice Questions (All questions are **COMPULSORY**) (10x1=10)

(One mark each)

(MCQ) 10 questions

10 marks

Q.2. Short answer Questions (All questions are **COMPULSORY**) (8x5=40)

(5 marks each)

(SAQ) 8 Questions

40 marks

Q.3. Long answer Questions (All questions are **COMPULSORY**) (10x5=50)

10 Marks each

50 marks

(LAQ) 5 Questions

Reference-

- C. K. Parikh, 2019, Text Book of Medical Jurisprudence Forensic Medicine & Toxicology (edition 21st), CBS Publishers
- K.S. Narayan Murty, 2022, The Essentials of Forensic Medicine & Toxicology, Jaypee Publication,
- Modi, N.J, A Text Book of Medical Jurisprudence and Toxicology
- Biswas Gautam, 2015, Review of Forensic Medicine and Toxicology (Including Clinical & Pathological Aspects), Jaypee Brothers Medical Publisher (P) Ltd,.
- Nandy Apurba, Principles of Forensic Medicine Including Toxicology,
- Sharma D.B., 2022, Essential of Forensic Medicine Including Toxicology, (First Edition), B. Jain Publishers.

Pathology and Microbiology

Subject code:- Hom UG-Path-M

Index

Sr. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Course Content And Term –wise Distribution	
4.	Teaching Hours	
5.	Details of Assessment	
6.	OSPE Stations (for practical examination)	
7.	List of Recommended Books	

1. Preamble

Pathology and Microbiology provide comprehensive knowledge of the pathologic basis of disease, to enable a complete understanding of the reaction of man to different morbid factors causing disease -its natural course, clinical manifestations, complications and sequel.

The students must be able to discriminate symptoms of the patient & disease satisfying the Hahnemannian requirements of physicians as mentioned in aphorism 3 of Organon of Medicine, make them competent in diagnosis and to substantiate miasmatic perspective with pathology for an accurate Homoeopathic prescription.

Knowledge also helps in deciding the scope, limitation and prognosis of a case through the understanding of susceptibility. Immune mediated illnesses are becoming important areas where Homoeopathic interventions can play a significant part in alleviating suffering and in bringing about a cure. The teaching should be aligned and integrated vertically in organ systems recognizing deviations from normal structure and function and clinically correlated to provide an overall understanding of the aetiology, mechanisms, laboratory diagnosis and management of diseases and horizontally with Homoeopathic Philosophy, Homoeopathic Materia Medica and Repertory to understand the Homeopathic concept of Disease and its management. Pathology will need alignments with Anatomy and Physiology on one side and clinical subjects on the other side with the foundation of Homoeopathic subjects.

Course outcomes

At the end of the II BHMS course the students will be able to:

1. Recognize the importance of study of Pathology and Microbiology in Homoeopathic system of medicine
2. Understand the morphological changes in cell structure in disease and recognize the mechanism of the etiological factors in the causation of such changes
3. Integrate the study of Pathology and Microbiology with Homoeopathic philosophy, Materia Medica, and Repertory.
4. Understand classification of diseases as per Master Hahnemann.
5. Understand common and important diseases based on their evolution, aetio-pathogenesis, pathology, progress and prognosis.
6. Develop skill in the identification of pathological features specifically histo-pathological features, and gross pathological specimens.
7. Able to interpret laboratory reports for diagnosis and treatment purpose.
8. Develop a positive attitude towards the role of Pathology and Microbiology in Homoeopathic system.

Course content and its term-wise distribution

Contents for Term I

Theory	
Sr. No.	Topic
1.	Introduction to Pathology
2.	General Pathology
3.	Introduction to Microbiology
4.	Sterilisation and Disinfection
5.	Culture medias and methods
6.	Infection and Disease
7.	Human Microbiome
8.	Gram positive bacterias
9.	Introduction to Virology
10.	Introduction to Parasitology
11.	Protozoans

Contents for Term I

Non -lecture- Practical/Demonstrative	
1.	Demonstration of Instruments
2.	Demonstration of Methods of sterilisation
3.	Demonstration of culture medias
4.	Estimation of haemoglobin
5.	Total count of Red Blood Cells
6.	Total count of White Blood Cells
7.	Bleeding time and clotting time
8.	Blood grouping.
9.	Gram staining
10.	Demonstration of histopathological slides
11.	Demonstration of Pathological specimen/ models

Contents for Term II

Theory	
Sr. No.	Topic
1	Systemic Pathology
2	Gram negative bacterias
3	Acid fast bacterias
4	Spirochaetes
5	Virology-DNA,RNA virus
6	Parasitology –Helminths
7	Mycology
8	Diagnostic procedures in Microbiology

Non –lecture- Practical/Demonstrative	
1.	Staining of thin and thick films.
2.	Differential count.
3.	Erythrocyte sedimentation rate-demonstration
4.	Urine examination-physical,chemical and microscopical examination.
5.	Examination of Faeces- demonstration
6.	Hanging drop preparation.- demonstration
7.	Acid fast staining –demonstration
8.	Interpretation of laboratory reports (serological tests, LFT, RFT, TFT etc) and its clinico pathological correlation
9.	Demonstration of common pathological specimens/models from each system
10.	Demonstration of common Pathological slides from each system

Gross division of teaching hours

Pathology & Microbiology		
Year	Teaching hours- Lectures	Teaching hours- Non-lectures
II BHMS	200	80

4.2 TEACHING HOURS THEORY

Sr. No	Topic	Hours
	Paper I	
1.	Introduction	3
	General Pathology	

1.	Cell Injury and cellular adaptation	10
2.	Inflammation and repair	10
3.	Neoplasia	10
4.	Immunopathology	8
5.	Haemodynamic disorders	10
6.	Environmental and Nutritional diseases	2
	Systemic Pathology	
1.	Diseases of the Haematopoietic system, bone marrow and blood	9
2.	Diseases of the Respiratory system.	5
3.	Diseases of the the oral cavity, salivary glands and gastro intestinal tract	6
4.	Diseases of liver, gall bladder, and biliary ducts	4
5.	Diseases of the Pancreas	1
6.	Diseases of blood vessels and lymphatics	2
7.	Diseases of Cardiovascular system	5
8.	Diseases of kidney and lower urinary tract	6
9.	Diseases of male reproductive system and prostate	1
10.	Diseases of the female genitalia and breast	4
11.	Diseases of the skin and soft tissue	1
12.	Diseases of the musculo-skeletal system.	2
13.	Diseases of Endocrine glands -thyroid	2
14.	Diseases of nervous system	1
	TOTAL	102
	Paper II	
	Microbiology and Parasitology	
1.	General introduction, Bacterial structure, growth and metabolism & genetics	3
2.	Identification and cultivation of bacteria(staining, culture medias, methods)	3
3.	Sterilization and disinfection	2
4.	Infection and disease	2

5.	Gram positive cocci	5.
6.	Gram negative cocci	6.
7.	Gram positive aerobic bacilli	7.
8.	Gram positive anaerobic bacilli	3
9.	Gram negative bacilli	9
10.	Acid Fast Bacterias	4
11.	Spiroch aetes	3
12.	Fungi - general characters- cutaneous, systemic mycosis, opportunistic	3
13.	Introduction to parasitology	2
14.	Protozoans	9
17.	DNA virus	11
18.	RNA viruses	12
19.	Emerging and re-emerging diseases	2
20.	Human Microbiome- Homoeopathic concept	3
21.	Diagnostic procedures in Microbiology	2
	Total	98
Sr. No	Teaching hours Non-lecture	Teaching hours Non-lecture
1.	Demonstration of common and latest equipments used in pathology and microbiology laboratory	4
2.	Estimation of haemoglobin (by acidometer)	2
3.	Total count of Red Blood Cells	2
4.	Total count of White Blood Cells,	2
5.	Bleeding time and Clotting time.	2
6.	Blood grouping.	2
7.	Staining of thin and thick films- demonstration	2
8.	Differential count of WBC	2
9.	Erythrocyte sedimentation rate -demonstration	2

10.	Urine examination physical, chemical and microscopical examination.	4
11.	Examination of Faeces- demonstration of physical, chemical (occult blood)and microscopical for ova and protozoa.	2
12.	Demonstration of Methods of sterilisation	2
13.	Common culture medias- demonstration	1
14.	Gram staining	2
15.	Acid fast staining – demonstration	2
16.	Hanging drop preparation.- demonstration	2
17.	Interpretation of laboratory reports (serological tests, LFT, RFT, TFT etc) and its clinico pathological correlation.	5
18.	Demonstration of common pathological specimens/models	10
19.	Demonstration of common histopathological slides	10
	Demonstrative Activities	20
1.	Seminar/tutorials/ Symposium	8
2.	PBL/CBL	6
3	Group discussion	6

1 Overall Scheme of Assessment (Summative)

Sr. No	Professional Course	Term I (1-6 Months)		Term II (7-12 Months)		
		1	Second Professional BHMS	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)
		20 Marks Viva	100 Marks Practical/ Viva i) Viva voce -50 marks ii)Practical – 50 marks	20 Marks Viva	200 marks theory	200 marks Practical+ Viva+ IA

PA: Periodical Assessment; TT: Term Test; FUE: Final University Examinations; IA: Internal Assessment

**7.1 Number of papers and Mark Distribution for
Final University Examination (FUE)**

Sr. No.	Course Code	Papers	Theory	Practical/ Clinical	Viva Voce	Internal Assessment*	Grand Total
1	HomUG-Path M	02	200 marks *	100 marks	80 marks	20 marks (Marks of PA I + TT I + PA II)	400 marks

***Method of Calculation of Internal Assessment Marks for Final University Examination: Marks of IA-** (Marks of PA-1 + Marks of TT + Marks of PA-2) / 140 X 20

7.2 Paper Layout

Summative assessment (FUE): Theory- 200 marks

Paper I (100 Mark) General Pathology and Systemic Pathology		
1.	LAQ	50
2.	SAQ	40
3.	MCQ	10
Paper II (100) Microbiology and Parasitology		
1.	LAQ	50
2.	SAQ	40
3.	MCQ	10

7.3 Theme-wise distribution of questions for theory exam paper I

PAPER – 1						
Theme	Topics	Term	Marks	LAQ's	SAQ's	MCQ's
A	Cell Injury and cellular adaptation, Inflammation and repair and Homoeopathic concept	I	21	Yes	Yes	Yes
B	Neoplasia ,Immunopathology and Homoeopathic concept	I	21	Yes	Yes	Yes
C	Haemodynamic disorders ,Environmental and Nutritional diseases and Homoeopathic concept	I	17	Yes	Yes	Yes

D	Diseases of the haemopoetic system, bone marrow and blood, CVS system blood vessels and lymphatics	II	17	Yes	Yes	Yes
E	Diseases of Respiratory , GIT, Liver and gall bladder, Pancreas , kidney and lower urinary tract, Endocrine glands	II	17	Yes	Yes	Yes
F	Diseases of male and female reproductive system, skin and soft tissue, nervous, Musculo-skeletal system	II	7	No	Yes	Yes

7.4 Distribution of questions for theory exam paper II

PAPER – 2						
Theme	Topics	Term	Marks	LAQ's	SAQ's	MCQ's
A	Bacteriology introduction, Human microbiome, Infection and diseases ,culture medias and methods ,Sterilisation and disinfection.	I	12	No	Yes	Yes
B	Gram positive bacterias	I	17	Yes	Yes	Yes
C	Parasites- protozoans , Virology introduction	I	17	Yes	Yes	Yes
D	Gram negative bacterias, Acid fast bacterias ,Spirochaetes	II	21	Yes	Yes	Yes
E	DNA & RNA Viruses	II	17	Yes	Yes	Yes
F	Fungi and parasites –helminthes, Diagnostic procedures in Microbiology, Homoeopathic concept	II	16	Yes	Yes	Yes

7.5 Question paper blue print Paper I

A Question Serial Number	B Type of Question	Question Paper Format (Refer table 7.4 for themes)
Q1	Multiple Choice Questions(MCQ) 10 Questions 1 mark each All compulsory	1. Theme A 2. Theme B 3. Theme C 4. Theme C 5. Theme D 6. Theme D 7. Theme E 8. Theme E 9. Theme F 10. Theme F
Q2	Short answer Questions (SAQ) Eight Questions 5 Marks Each	1. Theme A 2. Theme A 3. Theme B

	All compulsory	4. Theme B 5. Theme C 6. Theme D 7. Theme E 8. Theme F
Q3	Long answer Questions (LAQ) Five Questions 10 marks each All compulsory	1. Theme A 2. Theme B 3. Theme C 4. Theme D 5. Theme E

7.7 Question paper blue print Paper II

A Question Serial Number	B Type of Question	Question Paper Format (Refer table 7.4 for themes)
Q1	Multiple Choice Questions (MCQ) 10 Questions 1 mark each All compulsory	1. Theme A 2. Theme A 3. Theme B 4. Theme B 5. Theme C 6. Theme C 7. Theme D 8. Theme E 9. Theme E 10. Theme F
Q2	Short answer Questions (SAQ) Eight Questions 5 Marks Each All compulsory	1. Theme A 2. Theme A 3. Theme B 4. Theme C 5. Theme D 6. Theme D 7. Theme E 8. Theme F
Q3	Long answer Questions (LAQ) Five Questions 10 marks each All compulsory	1. Theme B 2. Theme C 3. Theme D 4. Theme E 5. Theme F

7.8 Details of practical assessment

PRACTICAL EXAM					
1.	Laboratory reports		Marks	Total marks	Time

9. List of recommended text/reference books

Theory

1. Harsh Mohan (2023), *Textbook of Pathology* (9th Edition). Jaypee Publisher (CBME)
2. Vinay Kumar and Abul K Abbas(2023) ,*Robbins & Kumar Basic Pathology* (11th SAE), Elsevier
3. Apurba S Sastry , Sandhya Bhat (2023), *Essentials of Medical Microbiology* (4th Edition), ARYA Publications. (CBME) CBS publishers.
4. Ananthanarayan.R and Jayaram Paniker CK (2022), *Ananthanarayan and Paniker's Textbook of Microbiology* (12th Edition),Universities Press (CBME)
5. Chatterjee K D, (2023), *Parasitology (Protozoology and Helminthology)*, (13th Edition),CBS publishers.
6. Ghosh Sougata (2021), *Paniker's Textbook of Medical Parasitology*,(9th Edition), Jaypee Publisher (CBME)
7. Fiona Roberts , (2018),*Pathology Illustrated International* ,(8th Edition) , Elsevier
8. Nayak Ramadas(2017),*Essentials in Hematology and Clinical Pathology*,(2nd Edition), Jaypee Publishers.
9. Sunil Kumar Mohanty (2014),*Text Book of Immunology*,(2nd Edition),Jaypee Brothers Medical Publishers

Practical

1. Harsh Mohan , (RP 2023) *Practical Pathology*, (5th Edition). Jaypee Publisher (CBME)
2. Santosh Kumar Mondal , (2024) *Pathology Practicals With OSPE*, (2nd Edition), CBS Publishers. (CBME)
3. Anamika Vyas, Sheethal. S (2023), *Concise Workbook in Practical Microbiology*, Jaypee Publishers. (CBME)
4. Dr Baveja C P(2021), *Practical Microbiology for MBBS*, (5th Edition),ARYA Publications

Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:

Marks of PA I	Marks of PA II	Periodical Assessment AVERAGE PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test AVERAGE TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	B	D	E	F	G	D+G/2

Note- The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA) ***

Practice of Medicine

Subject code: Hom UG PM-I

Index

S. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Learning Objectives (LO)	
4.	Course Content And Term –wise Distribution	
5.	Teaching Hours	
6.	Details of Assessment	
7.	List of Recommended Books	

1. Preamble

Practice of Medicine with Homoeopathic therapeutics is concerned with study of clinical methods, clinical presentations of systemic diseases, differential diagnosis and prognosis, general management and integration with Homoeopathic principles to evolve Homoeopathic therapeutics. Homoeopathy has a distinct approach to the concept of disease. It recognizes the ailing individual by studying him as a whole rather than in terms of sick parts and emphasizes the study of the man, his state of health, state of illness. The emphasis is 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. The study of the concept of individualization is essential so that the striking features which are characteristic to the individual become clear, in contrast to the common picture of the respective disease condition. Hahnemann's theory of chronic Miasms provides us an evolutionary understanding of the chronic diseases: psora, sycosis, tubercular and syphilis, and acute manifestations of chronic diseases and evolution of the natural disease shall be comprehended in the light of theory of chronic Miasms.

This will demand correlation of the disease conditions with basics of Anatomy, Physiology, biochemistry and pathology. Application of Knowledge of Organon of Medicine and Homoeopathic Philosophy, Materia Medica and Repertory in dealing with the disease conditions should be actively taught.

Life style disorders have burgeoned in modern times. Homoeopathy has a great deal to offer through its classical holistic approach. There are plenty of therapeutic possibilities which Homoeopathy needs to exploit in the years to come.

2. Course outcomes

- i.** Develop as a sound Homoeopathic clinician who can function in different clinical settings by applying knowledge, clinical skills and attitudes in studying the individual as a whole.
- ii.** Able to correlate the disease conditions with the basics of Anatomy, Physiology, biochemistry and pathology.
- iii.** Able to apply the knowledge of causation, pathophysiology, pathogenesis, manifestations, and diagnosis (including differential diagnosis) to understand the disease.
- iv.** Develop adequate knowledge for rational use of investigations and its interpretation to arrive at a final diagnosis of disease.
- v.** Ability to make a rational assessment of prognosis and general management of different disease conditions.
- vi.** Ability to understand and provide preventive, curative, palliative, rehabilitative and holistic care with compassion, following the principles of Homoeopathy.
- vii.** Able to integrate the clinical state of the disease with the concepts of Organon of Medicine and Homoeopathic Philosophy, Repertory and Homoeopathic Materia Medica for the management of the patient.

3. Learning objectives

At the end of BHMS II course, the students should be able to-

- i.** Clinico-pathological evaluation of common signs and symptoms with miasmatic integration.

- a. **Understanding Common Signs and Symptoms:** By the end of the course, students will be proficient in recognizing and evaluating common signs and symptoms presented by patients, utilizing a holistic approach that integrates clinical and pathophysiological processes involved.
- b. **Diagnostic Competence:** Through case-based learning and clinical exposure, students will develop the skills necessary to conduct comprehensive clinico-pathological evaluations, to identify underlying disease tendencies and susceptibilities.
- c. **Therapeutic Proficiency:** Students will be able to select Homoeopathic remedies based on the disease expression.

ii. Infectious Diseases general outline and introduction and common expression and investigation; Water & Electrolyte Disturbances, Acid Base Metabolism

- a. **Comprehensive Understanding:** Students will acquire a comprehensive understanding of the principles of infectious diseases, including their aetiology, pathogenesis, epidemiology, and clinical manifestations, within the context of homeopathic philosophy.
- b. **Recognition of Common Infections:** Through case studies and practical sessions, students will learn to identify common infectious diseases encountered in clinical practice, integrating homeopathic principles with conventional approaches to diagnosis.
- c. **Diagnostic Approach:** Students will develop proficiency in employing diagnostic methods relevant to infectious diseases, including physical examination findings, laboratory tests, and imaging studies, while considering holistic aspects of the patient's health.
- d. **Introduction to Prevention and Control Measures:** Students will be able to define preventive strategies and public health measures aimed at controlling the spread of infectious diseases, incorporating principles of homeopathy into discussions of hygiene, immunity, and environmental factors.

iii. General Considerations of Immunity & Susceptibility

- a. **Understanding Immune Function:** Students will acquire a comprehensive understanding of the immune system, including its cellular and humoral components, mechanisms of recognition, and response to pathogens and foreign antigens.
- b. **Exploration of Susceptibility:** Through theoretical study and clinical case discussions, students will explore the concept of susceptibility in homeopathy, examining factors that influence an individual's predisposition to disease and their response to Homoeopathic treatment.
- c. **Integration of Immune Concepts:** Students will learn to integrate concepts of immunity and susceptibility into the Homoeopathic framework, considering the role of constitutional factors, miasmatic influences, and environmental exposures in shaping an individual's health status.

iv. Introduction to Medical Genetics

a. Foundational Principles: Students will gain an introductory understanding of medical genetics, including principles of inheritance, genetic variation, and gene-environment interactions relevant to human health and disease.

b. Genetic Disorders: Through theoretical study, students will familiarize themselves with common genetic disorders, including single gene disorders, chromosomal abnormalities, and their clinical manifestations.

These course outcomes aim to equip second-year homoeopathy degree students with the knowledge, skills, and perspectives necessary to approach the evaluation and management of common clinical presentations, infectious diseases and establishing the relationship between knowledge of genetics and immunology with Homoeopathic concept of qualitative aspects of Susceptibility.

4. Course content and its term-wise distribution

Theory	Non-lectures (Clinical/Demonstrative)
Term I	
Clinico - pathological evaluation of common signs and symptoms with miasmatic integration* Introduction to Medical genetics*	Clinical: 10 Demonstrative: 2
Term II	
Immunity & Susceptibility - General considerations* Infectious Diseases and Tropical Diseases*	Clinical: 10 Demonstrative: 2

**Refer clause 5.4 and tables 5.4.1 – 5.4.5 for detailed content (topics breakup)*

5. Teaching hours

5.1. Gross division of teaching hours

Practice of Medicine			
Year	Teaching hours- Lectures	Teaching hours- Non-lectures	Total
II BHMS	80	24	104

5.2. Teaching hours theory

Sr. No.	Topic	Hours
1	Clinico - pathological evaluation of common signs and symptoms with miasmatic integration	35
2	Immunity & Susceptibility - General considerations	5
3	Introduction to Medical genetics	5
4	Infectious Diseases and Tropical Diseases	35
Total		80

5.3. Teaching hours Non-lecture

Sr. No.	Non-lectures	Hours
Clinical		
1	Approach to Patient: a) Doctor & Patient: General Principles of History Taking b) Physical Examination General Principles c) Differential Diagnosis: The beginning of management plan	3

2	General Assessment: a) Psychological Assessment b) Nutritional Assessment	3
3	General Physical Examination Skill	14
	Demonstrative	
4	Case Based / Problem Based Discussion on any of the topic of II BHMS Syllabus topic to be conducted <i>[as per availability of the case material or patient]</i>	4
Total		24

5.4. Distribution of teaching hours with breakup of each topic

5.4.1. Clinico - pathological evaluation of Common signs and symptoms with miasmatic integration

Cardinal Manifestations and Presentation of Diseases with relevant investigations

(Ref: Harison's Principles of Internal Medicine 21stEd)

Sr. No.	Topic	Topic breakup	Hours
1	Pain	1) Pain: PathoPhysiology, types of pain	4
		2) Chest Discomfort	
		3) Abdominal Pain	
		4) Headache	
		5) Back and Neck Pain	
2	Alterations in Body Temperature	6) Fever: Definition, types of fever, aetiology, pathoPhysiology, physical examination, investigations and management	3
		7) Fever and Rash: Definition of rash, Approach - causes and its presentation, examinations, investigations and management	
		8) Fever of Unknown Origin: Definition, types, aetiology and epidemiology, diagnostic tests, differential diagnosis and management	
3	Neurological Symptoms	9) Syncope: Definition, classification and its aetiology and its pathoPhysiology, clinical features as per the types, investigations, management	6
		10) Dizziness and Vertigo: Definition, clinical approach with its pathoPhysiology and management	
		11) Fatigue: Definition, differential diagnosis, clinical approach and management	
		12) Neurologic Causes of Weakness and Paralysis: Definition [Weakness, Paralysis, Tone, Spasticity, Rigidity, Paratonia, flaccidity, Fasciculations], Pathogenesis [Upper Motor Neuron Weakness, Lower Motor Neuron Weakness, Neuromuscular Junction Weakness, Myopathic Weakness,	

		<p>& <i>Psychogenic Weakness</i>], Distribution and its approach.</p> <p>13) Numbness, Tingling, and Sensory Loss: Definition, pathoPhysiology and differential diagnosis</p> <p>Gait Disorders, Imbalance, and Falls: Anatomy and Physiology related to Gait balance. Definition, pathoPhysiology and clinical significance related to different types of gait disorders. Definition, pathoPhysiology and clinical manifestation of disorders of balance. Assessment for the patient with falls.</p> <p>15) Confusion and Delirium: Definition, epidemiology, risk factors, pathogenesis, clinical features, physical examinations, investigations, diagnostic criteria, differential diagnosis and general management.</p> <p>16) Coma and disorders of consciousness: Definition, stages, Diagnostic approach: History, aetiology and its differential diagnosis, neurological examinations, investigations, management and prognosis</p> <p>17) Dementia: Definition, functional Anatomy of dementia, aetiology and its differential diagnosis, Diagnostic approach: History physical & neurological examinations, cognitive and neuropsychiatric examination, investigations and management</p>	
		<p>18) Aphasia, Memory Loss, and Other Cognitive Disorders: Definition, applied Anatomy, clinical examination</p> <p>19) Sleep Disorders: Physiology of sleep and wakefulness, approach to sleep disorders and treatment; evaluation of insomnia and its treatment</p>	
4	Circulatory and Respiratory Dysfunctions	<p>20) Dyspnoea: Definition, epidemiology, mechanisms underlying dyspnoea, assessment, differential diagnosis; Clinical approach: history, physical examination, investigations and management.</p> <p>21) Cough: Definition, mechanism of cough, impaired cough, aetiology, classification, assessment of chronic cough, differential diagnosis, approach: history, physical examination, investigations and management.</p> <p>22) Haemoptysis: Definition, understanding Anatomy & Physiology of it, aetiopathogenesis, evaluation of haemoptysis:</p>	6

		<p>history, physical examination, diagnostic evaluation, and management.</p> <p>23) Hypoxia and Cyanosis: Hypoxia: Definition, response to hypoxia, aetiology, patho, Physiology, adaptation to hypoxia. Cyanosis: Definition, types, differential diagnosis with its aetiology, approach to cyanosis.</p> <p>24) Oedema: Definition, aetiopathogenesis, differential diagnosis – Generalized and Localized oedema; distribution of oedema; Approach: History taking, Clinical examination and investigations.</p> <p>25) Palpitations: Definition, aetiopathogenesis, differential diagnosis, Approach: History taking, Clinical examination, investigations and management.</p>	
5	Abdominal/GIT Dysfunctions	<p>26) Dysphagia: Definition, Physiology of swallowing, pathoPhysiology; Approach: history taking, Clinical examination, diagnostic procedures and management.</p> <p>27) Nausea, Vomiting and Indigestion: Definition, mechanism, causes & differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.</p> <p>28) Diarrhoea and Constipation: Definition, Normal Physiology, types and causes, differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.</p> <p>29) Dysentery: Definition, causes, differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.</p> <p>30) Unintentional Weight Loss: Definition, Physiology of weight regulation with aging, causes and differential diagnosis, assessment and testing, management.</p> <p>31) Gastrointestinal Bleeding: Definition, source of the bleeding and its causes and its mechanism, Approach: history taking, differentiation of UGIB & LGIB – its assessment, evaluation and management.</p>	6
		<p>32) Jaundice: Definition, clinical evaluation, metabolism of bilirubin, aetiopathogenesis, classification and its causes, differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.</p>	

		33) Abdominal Swelling & Ascites: Definition, causes, differential diagnosis, Approach: history taking, Clinical examination, investigations and its evaluation. Ascites: Definition, aetiopathogenesis, evaluation, management and complications.	
6	Renal and Urinary Tract Dysfunctions	34) Interstitial Cystitis / Bladder Pain Syndrome: Definition, aetiopathogenesis, clinical presentation, investigations, diagnostic evaluation, management, complication and prognosis. 35) Dysuria: Definitions, aetiology, patho, Physiology, assessment and diagnostic evaluation. 36) Azotaemia and Urinary Abnormalities: Definitions, aetiology, pathoPhysiology, assessment and diagnostic evaluation. 37) Fluid and Electrolyte Imbalance: Causes, pathophysiological evaluation, Investigations	4
7	Haematological alterations	38) Anaemia: Definition, applied Anatomy & Physiology of RBC, regulation of its production; classification, clinical presentation; Approach: History taking, clinical examination, investigations and diagnostic evaluation 39) Leucocytosis & Leukopenia: Definition, Aetiology, differential diagnosis.	4
		40) Bleeding diatheses: Bleeding & Thrombosis: Definitions, applied Anatomy & Physiology of Haemostasis, aetiology of disorder of haemostasis, clinical presentation and history taking, clinical examination, laboratory evaluation. 41) Interpretation of Peripheral Blood Smears	
8	Psychological symptoms	42) Causes of asthenia, anxiety, sadness, thought disorders and delusions, perceptual disorders and hallucinations and relevant investigations	2
Total			35

5.4.2 Medical genetics:

Sr. No.	Topic lecture	Hours
1	Cytogenetics - definition, classification of chromosomal abnormality	1
2	Down's Syndrome	1
3	Turner's & Klinefelter's Syndrome	

4	Cystic fibrosis, Huntington's disease & Marfan's syndrome	1
5	Poly cystic kidney disease	
6	Neoplasia	1
7	Rare diseases – basic concept	
8	Integrating concept of Genetics with Homoeopathy	1
Total		5

5.4.3 Immunological factors in disease with concept of susceptibility:

Sr. No.	Topic lecture	Hours
1	Introduction and Primary & Secondary Immunodeficiency States	1
2	Hypersensitivity reactions: I, II, III, IV	1
3	Autoimmune diseases	1
4	Transplants, Graft rejection	
5	HIV	1
6	Integrating concept of Immunity with Homoeopathy: Susceptibility	1
TOTAL		5

5.4.4 For study of infectious and tropical diseases: Emphasis shall be on the following headings:

- i. Definition
- ii. Causative agents
- iii. Epidemiology
- iv. Pathogenesis
- v. Clinical features
- vi. Investigations
- vii. Diagnostic features
- viii. Differential Diagnosis
- ix. Complications
- x. Management
- xi. Prevention
- xii. Prognosis
- xiii. Homoeopathic classification of disease with its reasons
- xiv. Repertorial coverage / reference related to the disease
- xv. Homoeopathic therapeutics to the disease

Sr. No.	Topic Lecture	Hours
1	Herpes simplex viruses [HSV] infections	1
2	Varicella-zoster virus (VZV) infection	1
3	Epstein-Barr virus [EBV] Infections	1
4	Poliovirus Infections	1
5	Measles	1
6	Mumps	1
7	Rabies	1
8	Dengue	1

9	Japanese B Encephalitis	1
10	BIRD FLU	2
11	Influenza A H1N1 virus	
12	Chikungunya	
13	COVID 19 Virus Infection	1
14	Yellow fever	1
15	Smallpox (variola) - poxvirus infection	1
16	HIV Infection	1
17	Zika virus infection	1
18	Rickettsial infection	
19	Staphylococcal, streptococcal infections	1
20	Typhoid Fever	1
21	Gastroenteritis	1
22	Cholera	1
23	Tetanus	1
24	Anthrax, brucellosis, plague	1
25	Leprosy	1
26	Sexually Transmitted Disease, Syphilis	1
27	Amoebiasis, Amoebic Liver Abscess	1
28	Filariasis / Worm infestations	1
29	Malaria & Kalazar	1
30	Leptospirosis	1
31	Tuberculosis	1
32	Extra pulmonary tuberculosis	1
33	Diphtheria	1
34	Pertussis (whooping cough)	1
35	Therapeutics of Infectious Disorders	3
TOTAL		35

5.4.5 Teaching hours distribution to clinical / practical / demonstrative activities (Non-lectures):

Sr. No.	Non-lectures	Hours
1	<p>Approach to Patient:</p> <p>d) Doctor & Patient: General Principal of History Taking</p> <p>e) Physical Examination General Principal</p> <p>f) Differential Diagnosis: The beginning of management plan</p>	3
2	<p>General Assessment:</p> <p>c) Psychiatric Assessment</p> <p>d) Nutritional Assessment</p>	3

3	General Examination Skill:	14
	i.) Temp recording and its documentation and interpretation	1
	ii.) Pulse examination at different site and its documentation and interpretation	
	iii.) RR examination and its documentation and interpretation	1
	iv.) BP Recoding and its documentation and its interpretation	
	v.) Height measurement and its documentation and interpretation	1
	vi.) Weight measurement and its documentation and interpretation	
	vii.) BMI and Nutrition Assessment and its documentation and interpretation	
	viii.) Observation of Appearance, Built, and assessing Body proportion: Documentation and interpretation	1
	ix.) Observation of Gait and its Assessment& documentation	
	x.) Observation of Decubitus and its assessment& documentation	
	xi.) Ear examination and its documentation and interpretation	
	xii.) Nose examination and its documentation and interpretation	3
	xiii.) Throat examination and its documentation and interpretation	
	xiv.) Eye examination and its documentation and interpretation	2
	xv.) Face examination and its documentation and interpretation	2
	xvi.) Mouth examination and its documentation and interpretation	
	xvii.) Lymph Nodes examination at different sites and documentation and interpretation	3
	xviii.) Nails examination and its documentation and interpretation	
xix.) Skin examination and its documentation and interpretation		
4	Case Based / Problem Based Discussion on any of the following topic to be conducted [as per availability of the case material or patient]	
	a) Approach to Case of Fever with any system presenting symptoms [GIT / RS / Skin / Renal / MSS etc.]	
	b) Approach to Case presenting with Neurological Symptoms	4
	c) Approach to Case presenting with Circulatory and / or Respiratory Symptoms	

d) Approach to Case presenting with Abdominal/GIT Symptoms
e) Approach to Case presenting with Renal and Urinary Tract symptoms
f) Approach to Case presenting with Haematological symptoms
g) Approach to Case presenting with psychological symptoms

6. Details of assessment

Note- The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the IV BHMS University Examination.

Overall Scheme of Internal Assessment (IA)**

Professional Course/ Subject	Term I (1-6 Months)		Term II (7-12 Months)	
	II BHMS/ Practice of Medicine	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)
	20 Marks Viva- A	100 Marks Clinical/Practical and Viva - E Viva voce -50 marks Clinical/practical*- 50	20 Marks Viva- B	100 Marks Clinical/Practical and Viva -F i) Viva voce -50 marks ii) Clinical/practical*- 50

***Practical Examinations:**

- i.** Case taking: 20 Marks for case taking, including history, symptoms of patient in detail.
- ii.** Examination skills: 10 marks for the proper demonstration of skills.
- iii.** Bedside Q n A session: 15 marks for demonstrating understanding of concepts and for applying knowledge to identify the problem.
- iv.** Spotters: 5 marks (Instruments: Identification and Indications; Reports: Observations, Causes, Diagnosis/Differential Diagnosis)

****Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in IV BHMS:**

Marks of PA I	Marks of PA II	Periodical Assessment Average PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test Average TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	B	D	E	F	G	D+G/2

7. List of recommended text/reference books

- Alagappan, R. (2017). *Manual of Practical Medicine* (6th ed.). Jaypee Brothers Medical Publishers (P) Ltd.
- Penman I.D., Ralston S.H., Strachan M.W.J., & Hobson R. (2022). *Davidson's Principles and Practice of Medicine* (24th ed.)Elsevier Health Sciences.
- Anudeep, B. A. P. (2022). *Insider's guide to clinical medicine* (2nd ed.)Jaypee Brothers Medical (P) Ltd.
- Golwala, A. F., & Vakil, R. J. (2008). *Physical diagnosis A textbook of symptoms and signs* (16th ed.). Media Promoters &Publishers.
- Glynn, M., & Drake, W. M. (2017). *Hutchison's clinical methods: An Integrated Approach to Clinical Practice*. Saunders.
- *Harrison's principles of internal medicine (2vols)* (21st ed.). (2022). McGraw-Hill.
- Bickley. (2016). *Bates' pocket guide to physical exam & history taking* (8th ed.). Wolters Kluwer India Pvt. Ltd.
- Dover, A. R., Innes, J. A., & Fairhurst, K. (2023). *Macleod's clinical examination international edition*. (15th ed.). Elsevier.
- Allen, H. C. (1998). *Therapeutics of intermittent fever*. B. Jain Publishers
- Bell, J. B. (2016). *The homeopathic therapeutics of diarrhea, dysentery, cholera, cholera morbus, cholera infantum, and all other loose evacuations of the bowels (Classic reprint)*. Forgotten Books.
- Boericke, W. (2022). *New Manual of Homoeopathic Materia Medica and Repertory with Relationship of Remedies: Including Indian Drugs, Nosodes Uncommon, Rare Remedies, Mother Tinctures, Relationship, Sides of the Body, Drug Affinities and List of Abbreviation* (3rd ed.). B Jain Publishers Pvt Limited.
- Hahnemann, S. (2004). *Organon of Medicine*. B Jain Publishers Pvt Limited.
- Lilienthal, S. (2005). *Homoeopathic therapeutics*. B Jain Pub Pvt Limited.
- Nash, E. B. (2002). *Leaders in Homoeopathic therapeutics*. B Jain Pub Pvt Limited.
- Tyler, M. L. (1993). *Pointers to the common remedies*. B. Jain Publishers

Surgery

Subject code:- Hom UG Surg.- I

Index

S.No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Learning Objectives (LO)	
4.	Course Content And Term –wise Distribution	
5.	Teaching Hours	
6.	Details of Assessment	
7.	List of Recommended Books	

1. Preamble

Surgery involves addressing acute or chronic injuries, deformities, or diseases through physical intervention such as removal, repair, or reconstruction of a specific part or organ. Specialized fields like ENT, Ophthalmology, Dentistry, and Orthopedics, as well as super specialties like cardiac, neuro, and onco-surgery, have gained prominence.

Homoeopathy has proven to play a significant role in preventing several surgical interventions, provided that the physician can diagnose the condition early and administer the appropriate treatment while also considering supplementary measures. Therefore, a Homoeopathic physician should possess a solid understanding of surgery. A student of homoeopathy should be able to diagnose clinical conditions to effectively address the scope and limitations of homoeopathy in surgical cases. It is essential for students to learn the Hahnemannian concept of surgical diseases, chronic diseases, and susceptibility for the effective management of surgical conditions.

The management of surgical cases according to both modern medicine and Organon is a crucial part of the education and training of Homoeopathic students. A comprehensive understanding and application of Homoeopathic principles, along with the correct knowledge of Homoeopathic medicines, can extend the use of Homoeopathy to a range of acute and chronic surgical conditions that were previously considered beyond its scope. Understanding surgical conditions enables students to provide continuity of care, particularly when patients transition between surgical interventions and homeopathic management. Equipping homeopathic students with knowledge of surgical conditions allows them to make informed decisions and recommend suitable treatment options, whether surgical or non-surgical. By studying surgical conditions, homeopathic students can offer comprehensive and integrated healthcare to their patients, leading to improved health outcomes and patient satisfaction.

2. Course outcomes

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

- i) Diagnose common surgical conditions.
- ii) Understand the role of Homoeopathic treatment in pseudo-surgical and true surgical diseases.
- iii) Record the surgical case history that is complete and relevant to disease identification, help to find the correct Homoeopathic medicine that can be used for treating the condition.
- iv) Understand the fundamentals of examination of a patient with surgical problems.
- v) Demonstrate the ability to perform the bedside clinical procedures and the physical examination that is relevant for diagnosis and management of the disease.
- vi) Demonstrate ability to advise appropriate diagnostic tests (including radio-diagnosis) and interpretation of the test in the individual surgical case.
- vii) Perform basic management procedures of general surgery like wound dressing, ABC management, suturing, transport of the injured and fluid therapy etc.
- viii) Discuss causation, manifestations, management and prognosis of surgical conditions.
- ix) Understand the miasmatic background of surgical disorders, wherever applicable.
- x) Apply Materia Medica (therapeutics) and posology in common surgical conditions.

- xi) Understand the use of repertory in Homoeopathic prescriptions for surgical conditions.

3. Learning objectives (to be edited according to the II BHMS content)

At the end of II BHMS course, the learner shall be able to-

- i. Understand surgical case taking.
- ii. Understand common surgical symptomatology and its differential approach.
- iii. Demonstrate the basic management procedures of general surgery. Eg. dressing, ABC management and fluid therapy
- iv. Describe the concepts required to diagnose surgical clinical conditions taught in II BHMS.
- v. Understand the role of examination and investigation in diagnosing surgical disorders.
- vi. Identify referral criteria for medical emergencies and surgical conditions.
- vii. Classify symptoms and integration with repertory.
- viii. Understand applied Materia Medica and posology in common surgical conditions (taught in II BHMS) which can be managed with Homoeopathy.

4. Course content and its term-wise distribution

Sl. No.	Topic
Term I	
1.	Introduction to surgery, Scope and limitations of Homoeopathy in surgical conditions, Surgical diseases explained in relation to organon of medicine
2.	Trauma/Injury; different types of injuries- head injury; road traffic accident; injury to chest and abdomen
3.	Wound and wound healing; scars and keloids
4.	Hemorrhage and blood transfusion
5.	Shock; various types of shock
6.	Fluid, electrolyte and acid- base balance
7.	Burns and Skin grafting
8.	Nutrition
9.	Common surgical infections
Term II	
10.	Special infections
11.	Tumors and Cysts (Swellings)
12.	Hernia
13.	Ulcers
14.	Sinus and fistula

5. Teaching hours

5.1. Gross division of teaching hours

Surgery		
Year	Teaching hours- Lectures (LH)	Teaching hours- Non-lectures (NLH)
II BHMS	92	24

5.2. Teaching hours theory

Sl. No.	Topic	Teaching hours
1.	Introduction to surgery, Scope and limitations of Homoeopathy in surgical conditions	3
2.	Injury – types Head injury; Road traffic accident; injury to chest, abdomen	10
3.	Wound & wound healing; Scar, keloid	5
4.	Hemorrhage Blood transfusion	4
5.	Shock	6
6.	Fluid, electrolytes and acid-base balance	6
7.	Burn, skin grafting	7
8.	Nutrition – consequents of malnutrition in surgical patients, nutritional requirement in surgical patients and methods of providing nutritional support	3
9.	Common surgical infections- Boil, Carbuncle, Abscess, Cellulitis, and erysipelas, Hidradenitis suppurativa, septicemia, pyemia	8
10.	Special infections- Tuberculosis, syphilis, acquired immunodeficiency syndrome, actinomycosis, leprosy, tetanus, infective gangrene	8
11.	Concept of swellings- Tumors: Benign-Lipoma, fibroma, adenoma, neuroma, Neurilemmoma, Neurofibroma, Hemangioma Malignant-Carcinoma, sarcoma, fibrosarcoma; naevus, melanoma Cysts – Classification	12
12.	Hernia - Etiology, General Classification, Abdominal hernias- Basic Anatomy, Types, clinical features, management	10
13.	Ulcers	8
14.	Sinus and fistula	2
Total		92

5.3. Teaching hours Non-lecture

Sr. No	Clinical	Hours
1	Case taking of surgical case	2
2	Examination of Trauma case, Transport of the injured	2
3	Examination of head injury case	2
4	Examination of wound, suture technique	1
5	Examination of hemorrhagic case	1
6	Examination of shock	1
7	Fluid, electrolytes and acid base balance - Clinical Examination and evaluation	1
8	Burns - Clinical Examination	1
9	Common surgical infections - Clinical Examination	2
10	Special infections - Clinical examination	2
11	Examination of swelling- cysts and tumors	2
12	Examination of hernia	2
13	Examination of ulcer	2
14	Examination of sinus, fistula	1
15	ABC management, wound dressing, fluid therapy	2
Total		24

6. Details of assessment

Note- The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA)*

Professional Course/ Subject	Term I (1-6 Months)		Term II (7-12 Months)	
	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	TT II (end of 12 months)
Practice of Medicine	20 Marks Viva- A	100 Marks Clinical/Practical and Viva - E i) Viva voce -50 marks ii) Clinical/practical - 50 Surgical Case taking - 25marks (Mandatory); Examination of Wound/Cleaning and dressing of wound/ Demonstration of Steps of Basic life support/Transport of the injured /Demonstration of suturing technique. (Demonstration of any one of the procedures mentioned) – 25 marks	20 Marks Viva- B	100 Marks Clinical/Practical and Viva - F i) Viva voce -50 marks ii) Clinical/practical- 50 Surgical case taking and Examination of surgical case – 15+15=30 marks; Surgical case file (5 cases)-20 marks

***Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:**

Marks of PA I	Marks of PA II	Periodical Assessment Average PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test Average TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	B	D	E	F	G	D+G/2

7. List of recommended text/reference books

- Williams, N., O'Connell, P. R., & McCaskie, A. (2018).
- *Bailey and Love's Short Practice of Surgery, 27th Edition: the Collector's Edition*. Chapman and Hall/CRC.
- Sriram Bhat. (2019). *SRB's manual of surgery*. Jaypee Brothers.
- A concise text book of surgery, 11th edition – S Das
- Das, S. (2024). *A Manual on Clinical Surgery*. Jaypee Brothers Medical Publishers Pvt Limited.
- Sriram, B. M. (2019). *SRB's clinical methods in surgery*. Jaypee Brothers Medical Publishers.
- Kulkarni, S. (2002). *Surgery Therapeutics*. B. Jain Publishers.
- Lilienthal, S. *Homoeopathic Therapeutics*.
- Willis Alonzo Dewey. (2018). *Practical Homeopathic Therapeutics*. B. Jain Publishers.

Gynaecology and Obstetrics

Subject code: Hom UG – ObGy - I

Index

S. No	Description	Page Number
1.	Preamble	
2.	Course Outcomes (CO)	
3.	Learning Objectives (LO)	
4.	Course Content and Term –wise Distribution	
5.	Teaching Hours	
6.	Details of Assessment	
7.	List of Recommended Books	

1. Preamble

Obstetrics stands at the forefront of maternal health, emphasizing the care and well-being of expectant mothers throughout pregnancy, childbirth, and the postpartum period. From prenatal care to labour and delivery, obstetricians play a pivotal role in ensuring safe pregnancies and healthy births. Gynaecology encompasses the diagnosis and treatment of conditions affecting the female reproductive system, from adolescence through menopause, including menstrual disorders, fertility concerns, sexually transmitted infections, and gynecological cancers. Infant care extends beyond the moment of birth, encompassing the critical early stage of a newborn's life. From breastfeeding guidance to newborn screening and immunization.

The fields of Obstetrics, Infant care and Gynaecology intersect to provide holistic care to women across the reproductive lifespan. By addressing the physical, emotional and social aspects of women's health, healthcare providers empower individuals to make informed decisions about their bodies and well-being. In the realm of Obstetrics and Gynaecology, Homoeopathy offers a holistic approach that seeks to address the physical, emotional and spiritual aspects of women's health.

Homoeopathy, a system of medicine based on the principle of "like cures like" and individualized treatment, can play a significant role in promoting well-being and managing various conditions in Obstetrics and Gynaecology. Homoeopathy offers safe and gentle remedies to support women throughout pregnancy. From alleviating common discomforts such as nausea, fatigue, and back pain to addressing emotional concerns like anxiety and mood swings, Homoeopathic treatments can provide relief without adverse effects on the developing fetus. Additionally, Homoeopathy can aid in preparing the mother's body for labor and delivery, promoting a smooth and natural

In the postpartum period, Homoeopathy offers support for new mothers as they navigate the physical and emotional changes following childbirth and breastfeeding difficulties, promote lactation and support the overall recovery of the mother.

Homoeopathy provides a holistic approach to managing various Gynaecological conditions, including menstrual disorders, hormonal imbalances, polycystic ovarian syndrome (PCOS), endometriosis, and menopausal symptoms. Homeopathy considers the individual's unique constitution and emotional state.

In conclusion, Homoeopathy offers a holistic and patient-centred approach to Obstetrics and Gynaecology, addressing the physical, emotional and spiritual aspects of women's health.

2. Course outcomes

At the end of BHMS II course, the students should be able to-

- i. Understand applied Anatomy, Endocrinology and Physiology including abnormality of female reproductive system during puberty, menstruation, menopause and in different stages of womanhood.
- ii. Learn skills in case taking, physical examination, diagnostic procedures and managements of benign and malignant conditions, trauma, infections and inflammations related with female genitalia and pre-malignancy screening procedures.
- iii. Integrate the various knowledges to get a holistic understanding of disease evolution and approach to disease diagnosis and management.
- iv. Understand developmental anomalies, uterine displacements and Sex and intersexuality.
- v. Understand the causes related with male and female Infertility, their diagnosis, Artificial Reproductive Techniques and skill in Homoeopathic management along with population dynamics and control of Conception.
- vi. Know skills required in case taking, clinical examination and common diagnostic modalities in Gynaecology and Obstetrics.
- vii. Understand the process of normal pregnancy and minor ailments during pregnancy
- viii. Comprehend the process of diagnosis of normal pregnancy, prenatal, antenatal, postnatal maternal and fetal surveillance, care of newborn, care of puerperium.
- ix. Understanding common problems during abnormal pregnancy and labour to manage it through Homoeopathic perspective including scope, limitations and timely referral.
- x. Comprehending postnatal, puerperal care, diseases of fetus, new-born and medico legal aspects with Homoeopathic perspective.
- xi. Learning general and Homoeopathic management of common Gynaecological and Obstetric conditions

3. Learning objectives

At the end of the II BHMS course the student shall able to:

1. Understand the applied Anatomy, Endocrinology and Physiology including abnormality of female reproductive system during puberty, menstruation, menopause and in different stages of womanhood.
2. Integrate the knowledge with Anatomy, Physiology, Organon of medicine, Practice of Medicine and Homoeopathic Materia Medica to get a holistic understanding of disease

evolution and approach to disease diagnosis and management.

3. Discuss the developmental anomalies, Uterine displacements and Sex and intersexuality to understand the Predisposition including fundamental miasm, personality type known to develop particular disease, causation and modifying factors like exciting and maintaining factors.
4. Acquire skills in case taking, clinical examinations and common diagnostic modalities in Gynaecology and Obstetrics.
5. Describe Anatomical, Physiological, Endocrinological changes and minor ailments during pregnancy
6. Understand prenatal, antenatal, postnatal maternal and foetal surveillance, care of new-born, care of puerperium.
7. Integrate the knowledge with Organon of medicine and Homoeopathic Materia Medica for eradicating genetic dyscrasias in the mother and foetus.
8. Describe the mechanism and stages of normal labour, and intra-partum management.
9. Discuss general and Homoeopathic management for the related conditions through integration with repertorisation and therapeutics.

4. Course content and its term-wise distribution

a) Unit 1: Gynaecology and Homoeopathic Therapeutics

Sl. No.	List of Topics	Term
1.a	Introduction to Gynaecology with Definition of Hahnemannian classification of disease. Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books	I
1.b	A review of the applied Anatomy of female reproductive system, development and Developmental anomalies	I
1.c	A review of the applied Physiology of female reproductive system - Puberty, Menstruation and its disorders including, amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia, epimenorrhoea, AUB, Postmenopausal bleeding and menopause with related ailments and its scope and management in Homoeopathy and integrate wherever necessary with other disciplines	I
1.d	Gynaecological Case taking, physical examination, investigation and approach to clinical diagnosis and Differential diagnosis.	I
1.e	Epidemiology -Predisposition including fundamental miasm: personality type known to develop particular disease	I
1.f	Uterine displacements – Prolapse, Retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis,	II

	management and scope in Homoeopathic perspective.	
1.g	Sex & Intersexuality- Knowledge and scope to eradicate genetic Dyscrasias, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook.	II
1.h	General and Homoeopathic Management, repertorisation, therapeutics, posology, Formulation of prognostic criteria and Prognosis of related topics in Gynecology.	II

4.2 . Unit 2: Obstetrics, new born care & Homoeopathic therapeutics

Sl. No.	List of topics	Term
2.a	Introduction to Obstetrics and Newborn care related with Homoeopathic Philosophy, Therapeutics and Repertorisation.	I
2.b	Fundamentals of reproduction	I
2.c	Development of intra uterine pregnancy	I
2.d	Diagnosis of pregnancy, investigations & examinations, applied Anatomy & Physiology, Normal pregnancy – physiological changes	I
2.e	Antenatal care – aims, objectives, visits, advise, procedures, investigations, identifying high risk cases, scope and limitation of management in Homoeopathy	I
2.f	Common conditions such as Vomiting, backache, constipation in pregnancy and Homoeopathic management	I
2.g	Normal labour with its causes of onset, Anatomy, Physiology, mechanism, stages, events and clinical course in each stage, importance of Homoeopathic scope and management	II
2.h	Postnatal & puerperal cure - scope and limitation of management in Homoeopathy	II
2.i	Care of new born in Homoeopathic point of view	II
2.j	General and Homoeopathic Management, repertorisation, therapeutics, posology, Formulation of prognostic criteria and Prognosis of related topics in Obstetrics and new-born care.	II
2.k	Important Investigations for diagnosis in Obstetrics	II

5. Teaching hours

5.1. Gross division of teaching hours

Gynaecology and Obstetrics		
Year	Teaching hours- Lectures	Teaching hours- Non-lectures
II BHMS	100	24

5.2. Teaching hours theory

5.2.1 Unit 1: Gynaecology and Homoeopathic Therapeutics

Sl. No.	List of topics	Lecture hours
1.a	Introduction to Gynecology with definition of Hahnemannian classification of disease. Importance in the review of the	02 hrs.

	Homoeopathic literature, Therapeutics and Repertory source books	
1.b	A review of the applied Anatomy of the female reproductive system.	03 hrs.
	Developmental anomalies	03 hrs.
1.c	A review of the applied Physiology of the female reproductive system HPO axis & Menstruation	02 hrs.
	Puberty	03 hrs.
	Disorders of Menstruation including – Amenorrhoea, Dysmenorrhoea, Menorrhagia, Metrorrhagia, Epimenorrhoea, AUB.	09 hrs.
	Post-Menopausal Bleeding & Menopause with related ailments	05 hrs.
1.d	Gynaecological case taking, Physical examination, investigation and approach to clinical diagnosis and differential diagnosis.	04 hrs.
1.e	Epidemiology – Predisposition including fundamental Miasm; personality type known to develop particular disease.	04 hrs.
1.f	Uterine displacements- Prolapse, retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in Homoeopathic perspective	08 hrs.
1.g	Sex & Intersexuality – Knowledge and scope to eradicate genetic dyscrasians, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook	05 hrs.
1.h	Correlate Homoeopathic remedies, Therapeutics, posology. Formulation of prognostic criteria and prognosis related to Gynaecological conditions.	02 hrs
Total		50 hrs.

5.2.2. Unit 2: Obstetrics, new born care & Homoeopathic therapeutics

Sl. No.	List of topics	Teaching hours
2.a	Introduction to Obstetrics and Newborn Care Related with Homoeopathic Philosophy. Therapeutics and Repertorisation.	02 hr.
2.b	Fundamentals of reproduction	04 hrs.
2.c	Development of intrauterine pregnancy- Placenta and foetus.	04 hrs.
2.d.	Diagnosis of pregnancy: Investigations & examinations, applied Anatomy & Physiology, Normal pregnancy – Physiological changes.	07 hrs.
2.e	Antenatal care – aims, objectives, visits, advice, procedures, investigations, identifying high-risk cases, scope and limitation of management in Homoeopathy	06 hrs.
2.f	Vomiting in pregnancy	04 hrs.
2.g	Normal labour with its causes of onset, Anatomy, Physiology, mechanism, stages, events and clinical course in each stage and management	08 hrs.
2.h	Postnatal & puerperal cure – scope and limitation of management in Homoeopathy	06 hrs.
2.i	Care of New-born in a Homoeopathic point of view	04 hrs.
2.j	Correlate Homoeopathic remedies, Therapeutics, posology. formulation of prognostic criteria and prognosis related to	02 hrs.

	Obstetrical conditions	
2.k	Important investigations for diagnosis in Obstetrics	03 hrs.
Total		50 hrs.

5.2.3. Teaching hours Non-lecture

S. No.	Non lecture activity	Hours
1.	Clinical	
a.	Gynaecological Case taking	04
b.	Obstetrical Case taking	04
c.	Gynaecological Examination	04
d.	Obstetrical Examination	04
e.	Investigations, Diagnosis , D/D	04
2.	Demonstrative	
a.	Problem based / Case based learning- Foetal skull & maternal pelvis Demonstration of labour in Mannequin - skill lab	04
Total		24

6. Details of assessment

Note- The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA)***

Professional Course/ Subject	Term I (1-6 Months)		Term II (7-12 Months)	
	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	TT II (end of 12 months)
II BHMS/ Gynecology and Obstetrics	20 Marks Viva- A	100 Marks Clinical/Practical and Viva - E Viva voce -50 marks Clinical/practical*- 50	20 Marks Viva- B	100 Marks Clinical/Practical and Viva - F Viva voce -50 marks Clinical/practical**- 50

*Practical Examinations TT I:

- a) **Case taking:** Recording of case in Obstetrics & Gynaecology. (20 marks)
- b) **Demonstration:** (15 Marks)
 - General physical examination
 - Per abdominal examination
 - Pelvic grips
- c) **Lab Investigations:** Suggest the relevant lab investigations for 1st, 2nd and 3rd trimester (5 marks)
- d) **Demonstration of foetal skull & Pelvic diameters (10 marks)**

****Practical Examinations TT II:**

- a) **Case taking:** Recording of case taking in Obstetrics & Gynaecology. (20 marks).
- b) **Examination of the patient (10 marks)**
 - General physical examination
 - Breast examination
 - Obstetric examinations
 - Post-natal examinations.
 - New born care examination
- c) **Analysis of the case (5 marks)**
- d) **Journal submission - 5 cases (10 marks)**
Journal shall have following cases with analysis- Gynaec-3, ANC-1, PNC-1
- e) **Dummy & Pelvis:** Demonstration of fetal skull diameters, Sutures and pelvic diameters. (05 marks)

*****Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:**

Marks of PA I	Marks of PA II	Periodical Assessment Average PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test Average TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	B	D	E	F	G	D+G/2

7. List of recommended text/reference books

- Dutta, D.C,(2023).*Text book of Obstetrics*, 10th edition, New Central Book Agency Pvt Ltd.,
- Dutta D.C (2020).*Text book of Gynaecology*, 8th edition, New Central Book Agency Pvt Ltd.
- Lilienthal Samuel (Reprint 2003), *Homoeopathic Therapeutics*, 5 edition B Jain Publishers (P) Ltd
- Guernsey H.N. *Principles & Practice of Homoeopathy in Obstetrics & Paediatrics*.
- Minton, *Uterine therapeutics Materia Medica & Repertory*, B Jain publishers (P) Ltd.

