KERALA UNIVERSITY OF HEALTH SCIENCES
MEDICAL COLLEGE P O, TRISSUR 680 596, KERALA

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

CURRICULUM AND SYLLABUS
&
SCHEME OF EXAMINATIONS

AS PER THE HOMOEOPATHY (DEGREE COURSE) AMENDMENT REGULATIONS 2003

CONTENTS

BACHELOR OF HOMOEOPATHIC MEDICINE AND SURGERY

1. TITLE OF THE COURSE

Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S)

2. ELIGIBILITY FOR ADMISSION

No candidate shall be eligible for admission unless

a) He / She has completed the age of 17 years on or before 31st December of the year of his admission to the first year of the course.

b) He / She has passed the higher secondary examination (10+2) with Physics, Chemistry and Biology as optional subjects or examination recognized by the University as equivalent thereto.

c) A candidate for admission to B.H.M.S. course must have obtained not less than 50% marks in Biology separately and not less than 50% marks in Physics, Chemistry and Biology taken together at the qualifying examination.

d) Qualification and allocation of the seats will be as per the directions issued by the Government of Kerala from time to time.

3. DURATION OF THE COURSE OF STUDY

The total duration of the course is five and half years. Every candidate for admission to the B.H.M.S. examination shall undergo a course of certified study extending over four and a half academic years from the date of commencement of his study as per syllabus and curriculum prescribed for the course in Homoeopathic Medical College affiliated to the University. The academic course of studies is divided into four phases as follows

PHASE	DURATION
First B.H.M.S	$1^{1/2}$ Academic years
Second B.H.M.S	1 Academic year
Third B.H.M.S	1 Academic year
Fourth B.H.M.S	1 Academic year

The study of the first phase shall comprise of Pre-clinical subjects along with Homoeopathic Philosophy, Pharmacy and Materia Medica.

The remaining academic phases shall be devoted to the study of clinical subjects. During the second phase, the Para-clinical subjects shall be taught concurrently.

At the end of each phase, examinations will be conducted by the University.

No student shall be admitted to the second / Third / Final B.H.M.S examination unless he has passed the First / second / Third / B.H.M.S examinations held for the previous phases.

After passing the final B.H.M.S. examination, he shall undergo a period of one year rotating internship in the Collegiate Hospital.

No student shall be admitted to the Second B.H.M.S. examination. But the student shall be permitted to continue in the Third and Final B.H.M.S courses without passing the second and Third B.H.M.S. examinations.

CURRICULUM

Subjects: Subjects for study and examinations for the B.H.M.S (Degree Course) shall be as under:

1. Anatomy, Histology & Embryology
2. Physiology including Biochemistry
3. Organon of Medicine, Principles of Homoeopathic Philosophy & Psychology
4. Homoeopathic Pharmacy
5. Homoeopathic Materia Medica
6. Pathology & Microbiology including Parasitology, Bacteriology & Virology
7. Forensic Medicine & Toxicology
8. Practice of Medicine & Homoeopathic Therapeutics
9. Surgery including ENT, Ophthalmology, Dental & Homoeopathic Therapeutics
10. Obstetrics & Gynaecology, Infant care & Homoeopathic Therapeutics
11. Community Medicine
12. Case Taking & Repertorisation

INTRODUCTION

Basic objectives of education and training in a Homoeopathic institution is to prepare a competent Homoeopathic Physician who is capable of functioning independently and effectively under Rural and Urban set ups.

In order to achieve this, the following syllabus and curriculum has been designed.

A. Sound Foundation

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

A student shall have to pass through a training procedure which encompasses the above, well right from I B.H.M.S to IV B.H.M.S. and also during the Internship period.

He/she shall undergo an education process wherein learning of facts and concept right from I year are in continuity, in an evolutionary & progressive pattern. In I B.H.M.S, student shall study the fundamental principles of Homoeopathy and will also learn more of applied anatomy than a multitude of minor anatomical details.

In the II B.H.M.S., a student shall be exposed to a very vital concept of Susceptibility and symptomatology with Analysis – Evaluation, details of the Homoeopathic concepts and Logic of Homoeopathy. These will attain much deeper significance (if care is taken by Teachers of Pathology and Organon – Philosophy) when the correct knowledge of INFLAMMATION, IMMUNITY is correlated well with concepts of susceptibility.

In III B.H.M.S., there is an opportunity to fortify the foundation at the best by correlating between Theory of chronic diseases and the Patho-Physiological facts on the Gynaecology, Surgery and Medicine. A student shall have to be taught the spectrums of various diseases in correlation with the spectrum of Miasmatic manifestations. He will be able to use a well concluded EVALUATION ORDER OF Characteristics to derive an operationally valid reportorial totality.

The knowledge gathered in this pattern, will keep him constantly aware of his objectives and his role as a Homoeopathic Physician. The integration will eliminate the state

of confusion. The therapeutic action then will be right and complete, utilizing the full repertories of the Medical and Non-medical measures, keeping him up-to-date about all fresh scientific developments and inculcating values of continuous Medical Education.

B. EXECUTION

Maximum emphasis shall be placed on the applied aspects of all the subjects. Thus teachings of Anatomy, Physiology and Biochemistry will demand greater emphasis on applied aspects of these sciences. Teaching of Pathology will demand sharp focus on general Pathology, while regional Pathology will come up as an application. It shall require correlation with Medicine, Surgery and Gyneacology. All these need to be studied from Homoeopathic perspectives, hence emphasis on applied aspects of Organon philosophy & Homoeopathic therapeutics representing application to all other subjects.

C. **INTER-DEPARTMENTAL CO-ORDIANTION:**

Essentially, the entire approach becomes an integrated approach. All departments shall develop a cohesive well defined programme which demand marked inter-departmental co-ordination. It is therefore desirable to have teaching programmes wherein, by rotation each department participates in the teaching, coordinating well with other faculties with constant updating and evaluation. The coordination has to be in the ways as, given in the text under each subject inside these regulations. This will ensure fundamental and exceptional clarity.

D. **DEDUCTIVE-INDUCTIVE TEACHINGS:**

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

E. **PATIENT ORIENTED TEACHINGS:**

In order to impart the integrated medical education, patient has to be in the centre right from day one of the II B.H.M.S. importance of social factors in relation to the problem of health and disease shall receive proper emphasis through out the course and to achieve this objective, the educational process shall be community as well as hospital based.

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

I BHMS
SYLLABUS
ORGANON OF MEDICINE ,PRINCIPLES OF HOMOEOPATHIC PHILIOSOPHY & PSYCHOLOGY

SYLLABUS AND CURRICULUM:

INTRODUCTION TO SCIENCE OF HOMOEOPATHY

Organon - Philosophy is a vital subject which builds up the conceptual base for the Physician. It illustrates those principles which when applied in practice enable the Physician to obtain results, which he can explain rationally and repeats them in practice with greater competence. Focus of the Education and Training should be to build up the conceptual base.

Homoeopathy should be introduced as a Complete Rational System of Medicine with its Holistic, individualistic and Dynamistic approach to life, Health, Disease, Remedy and cure.

In order to achieve this, study of logic, psychology and the fundamentals of Homoeopathic Science become quite important. It is imperative to have clear grasp over, Inductive-Deductive Logic, and its application and comprehending the fundamentals of Homoeopathic Science. Homoeopathic approach for the patients is a Holistic approach. Science demands from the Homoeopathic Physician, to comprehend his patient as a PERSON, his dispositional state of Mind (and Body), along with the disease process with its causes. Since we lay great emphasis on knowing the mind, knowledge of the psychology becomes impreative for a Homoeopathic Physician. Thus introduction to Psychology will assist HOMOEOPATHIC student to build up his conceptual base in his direction

1. Fundamentals of Homoeopathic Science

Preliminary lectures on the evolution of medicinal practice by the ancients giving stress to rationalistic and vitalistics thoughts.

1. History of Medicine
2. Short history of Hahnemann's life and contributions
3. Fundamental Principles of Homoeopathy

4. General Introduction to organon of medicine & its diff. edition

5. Brief life and contributions of early pioneers after Hahnemann

6. Brief study of the early history of spread of homoeopathy & position of Homoeopathy
in various countries.

7. Introduction to Organon of Medicine.

8. Hahnemann's Organon of Medicine from 8 ahorism 1 to 70

9. Health: Hahnemann's and modern concept

10. Introductory lectures on diseases, their classification, drug, diseases, case taking and drug proving

II. Logic

The term 'Logic' means 'thought' 'reason' 'Law' and is used to denote the totality of rules to which the process of thought is subjected, a process that reflects the reality. It is also used to denote the science of the rules of reasoning and the forms in which it occurs.

As discussed earlier, to comprehend ORGANON - PHILOSOPHY, it is essential to acquaint with understanding of LOGIC in order to grasp inductive-deductive reasoning and the forms in which it occurs.

III. Introduction to Psychology

1. Definition of Psychology as a Science and its differences from other Sciences. Concept of Mind-Contemporary schools of Psychology with special reference to Behavioristic and Psychoanalystic approaches.

2. Scientific study of behavior, intelligence, cause-effect relation, behaviorist (Pavlov; Watson, Skinner) and dynamics of behavior (Freud and Neo Freudians).

3. Basic concepts of sensation, perception, illusion, Hallucination, Delusion, imagination, intelligence, aptitude, attention, thinking and memory.

4. Emotion, motivation, personality, anxiety, conflict, frustration, psychosomatic manifestations and dreams.

5. Developmental psychology-normal-developments since birth to maturity (both physical and psychological) and deviations - its effects on later behavior.

* The attempt should be made to make a student receptive to various terms in teachings of Materia Medica and Homoeopathic Philosophy

TEACHING PLAN
I BHMS
Total Hrs: 200

I Semester-hrs 66

History of Hahnemann's life and contribution - 10 hrs

Life and contribution of early pioneers after Hahnemann - 10 hrs

Brief history of medicine - 10 hrs

Short study of spread of Homoeopathy in various countries - 5 hrs

Fundamental principles of Homoeopathy - 17 hrs

Health : Hahnemann's and modern concept - 5 hrs

Revision and examination - 9 hrs

II Semester - hrs 66

Logic, with reference to Stuart Close-chapter 16 -10 hrs

Psychology - 30 hrs

Introductory lectures on diseases, their classification, drug, disease, case taking and drug proving - 4 hrs

General introduction to Organon of medicine and its different editions - 3 hrs

Hahnemann's introduction to Organon of medicine - 10 hrs

Revision and examination - 9 hrs

III Semester - 68 hrs

Organon of medicine - aphorisms 1 to 70 - 56 hrs

Revision and examination - 12 hrs

I BHMS
Model Question Paper

ORGANON OF MEDICINE , PRINCIPLES OF HOMOEOPATHIC PHILOSOPHY

& PSYCHOLOGY

Time 3 hrs **Total Marks 100**

Essay

I Explain briefly cardinal Principles of Homoeopathy? 3+3+4 = 10

II What happens when 2 dissimilar diseases meet together in a human being, explain with examples? 3+3+4 = 10

Short Notes

1. Greek Medicine
2. Knowledge of physician
3. Types of logic
4. Various systems of medicine
5. Illusion, Delusion, Hallucination
6. Contributions of Dr. Kent
7. Attention
8. Bad effects of antipathy
9. Unprejudiced observer
10. Mixture Prescription 10x5 = 50

Short Notes

1. Duce Natura
2. Trephening
3. Theoritic Medicine
4. Aude Sapere
5. Highest ideal of cure
6. What is Organon
7. Uncertain & Hazardous Homoeopathic remedies
8. Define Intelligence
9. Define Totality of Symptom

10. Health 10x3 = 3

I BHMS
Scheme of Valuation
ORGANON OF MEDICINE , PRINCIPLES OF HOMOEOPATHIC PHILOSOPHY

PSYCHOLOGY

Essay

1 State cardinal principles – law of similar, law of simplex and law of minimum dose. Aphorism number and explanation.
2 §36, § 38 and §42. State three conditions with examples.

Short Notes
1 Ancient Greek concept of sickness. Greek God of Medicine, Hippocrates
2 § 3, What are the knowledges? Explanation for each.
3 Define logic, Types, Deductive and inductive logic.
4 Allopathy, Antipathy, Homoeopathy and Isopathy, with brief explanation.
5 Defnitions for each with its further classification and examples.
6 Dr Kent as a teacher, as a doctors and his literary works.
7 Defnition, nature and classification of attention
8 §58 and §59 What are the bad effects, How it happens with examples.
9 §6, what is unprejudiced observer? How it happen and its result?
10 where Hahnemann mentions it? What is it? What are the contents?

Short Notes
1 Where is it mentioned? What is it?
2 What is it? Why this method is used?
3 Where is it mentioned? What is it?
4 Word meaning, Derived from
5 §2
6 Word meaning, Derived from, wrote by
7 §50, What is it, with examples.
8 WHO definition.
9 Definition according to §7
10 WHO definition.

List of Text Books for I BHMS

1 Organon of Medicine 5th and 6th translated with an appendix by R E Dudgeon
2 Samuel Hahnemann His Life and Works by Richard Haehl
3 General Psychology by S K Mangal
4 History of Medicine Dr Samareendar Reddy
5 Pioneers of Homoeopathy byMahendra Singh

ANATOMY AND PHYSIOLOGY

Study of Normal Man in Pre-Clinical Period

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

Consciousness, life and its phenomena cannot be explained in terms of cell physiology or of quantum mechanics nor by physiological concepts which in their turn are based on chemico - physical concepts.

Though anatomy and physiology are hitherto being taught as entirely different subjects, a water-tight barrier should not be erected between them; structure (anatomy) and function (physiology) are but correlated aspects and the physio-chemical processes are but an external expression of an inexplicable phenomenon which is life.

So anatomy and physiology shall be taught with the following aims:

1. To provide for the understanding of the morphological, physiological and psychological principles which determine and influence the organism of the living body as a functioning unit;
2. To co-relate and interpret the structural organism and normal physiology of the human body and thus to provide the data on which to anticipate disturbance of functions;
3. To enable the student to recognize the anatomical, physiological and psychological basis of the clinical signs and symptoms of disorders due to injury, disease and mal development;
4. Similarly, to give the student to understand the factors involved in the development of pathological processes and the possible complications which may arise there from;
5. To give the student such knowledge of pre clinical subjects as will enable him ultimately to employ competently and rationally all the ordinary methods of examination and treatment (treatment (including surgery) that may involve such knowledge; and

6. For enabling the student to pick out strange, rare and uncommon symptoms for individualization of patients and drugs for the purpose of applying the law of similar in homeopathic practice.

ANATOMY, HISTOLOGY AND EMBRYOLOGY

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

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

1. Only such details as have professional or general educational value for medical student should be presented to him.
2. The purpose of dissection is not to create technically expert prosecutors but to give the student an understanding of the body in relation to its functional, and the dissection should be designed to achieve this end, for example, ignoring of small and clinically unimportant blood vessels results in such cleaner dissection and a much clearer picture of the main structure and their natural relationships.
3. Much that is at present taught by dissection could be demonstrated as usefully through prepared dissected specimens.
    a. Normal radiological anatomy may also form part of practical training. The structure of the body should be presented linking functional aspect.
    b. Actual dissection should be preceded by a course of lectures on the general structure of the organ or the system under discussion and then its function. In this way anatomical and physiological knowledge can be presented to

students in an integrated form and the instruction of the whole course of anatomy and physiology and more interesting, lively and practical.

c. A good part of the theoretical lectures on anatomy can be transferred to tutorial classes with the demonstrations.

A few lectures or demonstrations on the clinical and applied anatomy should be arranged in the later part of the course. They should preferably be given by a clinician and should aim at demonstrating the anatomical basis of physical signs and the value of anatomical knowledge to the clinician.

Seminars and group discussions to be arranged periodically with a view of presenting different subjects in an integrated manner.

Formal class room lectures to be reduced but demonstrations and tutorials to be increased.

There should be joint teaching-cum-demonstration sessions with clinical materials illustrating applied aspect of Anatomy in relation to clinical subjects. This should be arranged once a fortnight and even form part of series of introductory lectures if be needed.

There should be joint seminars with the departments of Physiology and Bio-Chemistry and should be organized once a month. There should be a close correlation in the teaching of gross Anatomy, Histology, Embryology and Genetics. The teaching of areas and systems in Anatomy, Physiology including Bio-chemistry should be integrated as far as possible.

THEORETICAL

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

Candidates will be required to recognized anatomical specimen and to identify and answer questions on structures displayed in recent dissections, to be familiar with the bones and

their articulations including the vertebrae, the skull and with the manner of classification of the long bones.

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

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

(I) ***Gross Anatomy***-to be dealt under the following categories:-

a. Introductory lectures with demonstrations.

b. Systematic series.

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

I. Superior extremity, inferior extremity, head, neck, thorax, abdomen and pelvis to be studied regionally and system by system (special reference to be made to development and its anomalies, regional, innervation, functional groups of muscles in relation to joint of otherwise and Applied Anatomy).

II. Endocrine organs-with special reference to **development** and applied anatomy.

(II) ***Development anatomy***-General principles of development and growth and the effect of hereditary and environment factors to be given by lectures, charts, models and slides.

(III) ***Neuro-anatomy,*** Gross Anatomy of brain and spinal cord and the main nerve tracts. The peripheral nerves. Cranical nerves their relations course and distributions.

N.B: The practical study should proceed the study of physiology nervous system. Early correlation with the clinical course desirable.

Automic nervous system-Development and anomalies, Applied Anatomy. The study to be covered by lectures, lecture-demonstrations, of brain and cord, clinical correlation.

(IV) ***Mirco-anatomy (Histology)-***Modern conceptions of cell, epithelial tissue, connective tissue, muscular tissue, nervous tissue and systematic structure.

A. **Introductory Lectures**

a. Modern conception of cell-components and their functions, why a cell divides, cell division, types with their signification.

b. Genetic Individuality :

i. Elementary genetics definition, health and disease, result of interaction between organism and its environments, utility of knowledge from Homoeopathic point of view

ii. Mendel's Laws and their significances

iii. Applied genetics.

B. **Embryology.**

C. **General anatomy & micro-anatomy**

D. **Regional anatomy:** Regional Anatomy shall be taught with emphasis on developmental anatomy, broad relationship, surface marking, Radiological anatomy, and applied anatomy.

a. **Extremities:-**

i. Skeleton, position and functions of joints,

ii. Muscle groups, lumber plexus,

iii. Arterial supply, venous drainage, neuro vascular bundles, lymphatics and lymph nodes, relation of nerves to bones.

iv. Joints with special emphasis on lumbo - sacral, hip, knee and ankle joints, muscles producing movement, results of nerve injury.

v. Radiology of bones and joints, classification, determination of age.

vi. Applied anatomy

vii. Surface marking of main arteries, nerves.

b. **Thorax :-**

i. Skeleton of joints of muscles of chest wall-diaphragm, innervation of abdominal and thoracic respiration, difference with age. The mammary gland lymphatic drainage.

ii. The pleura & lungs.

iii. Arrangements structures in the mediastinum, heart, coronary arteries, great vessels, trachea, oesophagus, lymph nodes, thymus.
iv. Radiology, of heart, aorta, lung, bronchogram.
v. Surface marking - pleura, lung, and heart - valves of heart, border, arch of aorta, sup, vena-cava, bifurcation of trachea.

c. **Abdomen And Pelvis :-**

i. The abdominal wall-skin and muscles, innervation of fascia, peritoneum, blood vessels, lymphatics, autonomic, ganglia and plexuses.
ii. Stomach, small intestine, caecum, appendix, large intestine.
iii. Duodenum, pancreas, kidneys, uterus, supra renal.
iv. Liver and gall bladder
v. Pelvis, skeleton and joints, muscles of the pelvis, organs internal and external genitalia in male and in the female, lumbosacral plexus, vessels, lymphatics, autonomic ganglia, and plexuses.
vi. Blood vessels and nerve plexuses of abdomen and pelvis, the portal venous system.
vii. Applied anatomy of referred pain, portal systemic anastomosis, catheterization of the urinary bladder in the male and female.
viii. Surface marking of organs and blood vessels.

d. **Head and Neck :-**

i. Scalp - Innervation, vascular supply middle meningeal artery.
ii. Face-main muscles groups, muscles of facial expression muscles of mastication, innervation of skin and repair muscles, vascular supply, principles of repair scalp and face wrinkles.
iii. The eyelids, eyeball, lacrimal apparatus, the muscles that move the eyeball.
iv. The nasal cavity and nasopharynx, septum, conchae, paransalsinus, Eustachian tube lymphoid masses.
v. Oral cavity and pharynx.
vi. Larynx and laryngeal part of Pharynx structure (No details) functions, nerves supply, laryngoscope appearances.

vii. Cervical vertebrae, joints of head and neck.

viii. Structures of neck, sternomastoid, brachial plexus, main arteries and veins, disposition of lymph nodes, areas of drainage, phrenic nerve, thyroid gland and its blood supply, para-thyroid, the trachea, oesophagus. The position of the Sub-mandibular and sub-lingual salivary glands.

ix. Teeth and dentition.

x. The external middle and internal ear.

xi. Applied anatomy

xii. Surface marking: Parotid gland, middle meningeal artery, thyroid gland, common internal and external carotid arteries.

e. **Neuro anatomy :-**

i. Meanings-functions of

ii. Cerebrum-areas of localisation, vascular supply basal ganglion, internal capsule.

iii. Cerebellum-functions.

iv. Pons, medullar midbrain, cranial nerves, palsies.

v. Cerebro-spinal fluid-formation, circulation function, absorption.

vi. Cranial nerves, origin, courses (with minimum anatomical detail) areas of distribution.

vii. The sympathetic and parasympathetic nervous system location, distribution, functions.

viii. Applied anatomy of lumbar puncture, referred pain, spinal anesthesia increased intracranial pressure.

f. **Histological study systematic**

PRACTICAL

Demonstration of dissected parts / Dissection of the whole human body.

Identification of histological specimen of tissues and organs viz., liver, kidney, lungs, thyroid, pancreas, spleen, trachea, oesophagus, stomach, tongue intestine, large intestine, testes, every bone, adipose tissue, spinal cord, suprarenal glad, parotid gland, anterior pituitary salivary glands, skin, parathyroid gland, cerebellum, cerebral cortex, cardiac muscle.

The written papers in Anatomy shall be distributed as follows:-

Paper I - Upper extremity, head, face, neck, brain and Embryology.

Paper II - Thorax, abdomen, pelvis and lower extremity and Histology.

Subject	THEORY				VIVA & PRACTICAL					Grand Total	Aggregate minimum for pass
	Written	Int. Assessment	Total	Minimum For Pass	VIVA	Practical	Int. Assessment	Total	Minimum For Pass		
ANATOMY	200	40	240	120	100	100	40	240	120	480	240

TEACHING PLAN

First Semester (6 Months)

1 General Anatomy 35 hrs

Epithelium : Classification, Simple and compound epithelium, glandular and sensory epithelium
Connective tissue : Cells, Matrix
Cartilage : Classification, structure, cells, matrix
Bone : Types, development, ossification, blood supply
Joints : Classification and structure of synovial joint
Vascular tissue : Artery and Vein
Lymphatic tissue : Lymph node , structure and function
Muscular tissue
Skin
Nervous tissue

2 General Embryology 30 hr

Oogenisis, Ovarian cycle
Menstrual cycle
Spermatogennesis
Fertilization, implantation
Bilaminar embryo
Trilaminar embryo
Intra embryonic mesoderm and folding of embryo
Formation and circulation of placenta
Foetal membranes
Structure of umbilical cord and placenta

3 upper limb 15hrs

Brachial Plexus
Mammary Gland
Shoulder joint
Palmar space
Axilla

SEMINARS (give importance to applied anatomy) 10hrs

Elbowjoint,wrist joint,carpometacarpal joint
Axillaryartery
Brachialartery
Radial,ulnarandMedian nerve
4 LOWER LIMB 15hrs
Hip joint
Knee joint
Arches of foot
Popliteal fossa
SEMINARS(give importance to applied anatomy) 10hrs
Joints of the foot
Femoral triangle and Adductor canal
FIRST INTERNAL ASSESSMENT EXAMINATION (during the last month of the semester) 15hrs

SECOND SEMESTER (6 MONTHS):

5 THORAX 20hrs
Thoracic wall
Pleura
Lungs
Pericrdium
Blood supply of heart
Foetal circulation
Mediastinum
SEMINARS(Give importance to applied anatomy) 10hrs
Arch of aorta
Thoracic duct
Chambers of heart
Oesophagus
6. **ABDOMEN AND PELVIS 35hrs**
Anterior abdominal wall and Rectus sheath
Inguinal canal spermatic cord and descent of testis
Peritonium
Stomach
Portal vein
Liver
Kidney, developmental anomalies
Diaphragm
Uterus
Prostate and male urethra
Rectum and anal canal
Urinary bladder and ureter
Perineal pouches
Ischiorectal fossa
SEMINARS (give more importance to applied anatomy) 10hrs
Duodenum
Pancreas

Supra renal gland
Pudendal nerve
Pelvic floor
Second internal assessment Examination (during the last month of the semester) 15hrs

THIRD SEMESTER (6 Months):

7. HEAD AND NECK 25 Hrs
Scalp
Dural Venous sinuses
Cervical fascia
Extra ocular muscles
Tempero-mandibular joint
Thyrid gland
Pharynx
Larynx
Eye Ball Layers
Tongue
Facial Nerve
8. **SEMINARS 10hrs**
Triangles of the neck
Nasal Cavity and PNS
Salivary glands
9. **BRAIN AND SPINAL CORD** 30HRS
Spinal cord
Superficial blood supply of brain
Medulla Oblongata
Pons
Cerebellum
Ventricles of brain
Midbrain
Sulci,gyri and functional areas of brain
Internal capsule
Deep blood supply of brain
Basal ganglia
Thalamus
Third Internal Assessment Examination and University Examination
including the publication of the result during the last 2 months of the semester. 15hrs

List of books

Sl. No:	Recommended text book	Sl. No:	Supplementery Books	Sl No:	Refference books
1.	Cunninghamm's Manual of Practical Anatomy Vol I, II & III	1.	Gray's Anatomy - Standring	1.	Text book of anatomy - Dr. T. Raghanadhan
2.	B.D.Chaurasia's Human Anatomy Vol I, II & III	2.	Regional Anatomy - LAST	2.	Essential clinical Anatomy - Keith.L.moore
3.	EMBROLOGY – INDERBERSIGH	3.	Gray's Anatomy for students – Drake	3.	Clinical Anatomy by SNELL
4.	TEXT BOOK OF OSTEOLOGY - PODDER	4.	Clinical embryology – SNELL	4.	Embryology – Keith.L.Moore
5.		5.	Clinically orientated Anatomy – Kadasne	5.	ANATOMY – DUTTA Vol I, II & III
		6.	Text Book of Anatomy – SAMAR MITRA Vol I, II & III	6.	Fundamentals of Anatomy – A.S.Moni
		7.	Human Anatomy – Byas der ghosh		

MODEL QUESTION PAPER
ANATOMY PAPER-I

(Draw diagrams where ever necessary)
(Answer all Questions)

Time: 3 hrs Max Marks 100

Essays (Q no. 1&2) **10x2 =20**

1. Describe Brachial Plexus
2. Describe Thyroid Gland

Short Essays (Q.Nos.3-12) **5x10=50**

3 Cavernous sinus
4 Cubital Fossa
5 Clavicle
6 Palmar arteral arch
7 Layers of eye ball
8 Muscles of mastication
9 Axilla
10 Spermatogenisis
11 Carotid trangle
12 Anterior interosseous nerve

Short notes (Q.Nos. 13-22) **3x10=30**

13 Carpal tunnel syndrome
14 Bicipital groove
15 Flexor retinaculum
16 Middle ear ossicles
17 Falx cerebri
18 Morula
19 Meninges
20 Thymus
21 Corpus callosum
22 Hamate

ANATOMY PAPER- 11

(Draw diagrams where ever necessary)

(Answer all questions)

Time 3 hrs Max marks 100

Essays (Q.Nos 1&2) **10x2=20**

1 Define mediastinum and its divisions and contents

2 Describe the stomach and its blood supply

Short essays (Q.Nos 3-12) **5x10=50**

3 Duodenum

4 Urinary bladder

5 Calf muscles

6 Acetabulam

7 Male urethra

8 Uterus

9 Mesentry

10 Coronary artery

11 Vermiform appendix

12 Right kidney -relations

Short notes ; (Q.Nos 13-22) **10x3=30**

13 Pericardium

14 Arch of aorta

15 Gall bladder

16 Portal vein

17 Ligamentum patellae

18 Azygos vein

19 Femoral artery

20 Pouch of Douglas

21 Pyramidalis

22 Epiploic foramen

PHYSIOLOGY INCLUDING BIOCHEMISTRY

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

There should be close co-operation between the various departments while teaching the different systems. There should be joint courses between the two departments of anatomy and physiology so that there is maximum co-ordination in the teaching of these subjects.

Seminars should be arranged periodically and lecturers of anatomy, physiology and bio-chemistry should bring home the point to the student that the integrated approach is more meaningful.

THEORETICAL

Introductions: Fundamental phenomena of life. The cell and its differentiation. Tissues and organs of the body.

Bio-chemical principles: Elementary constituents of protoplasm, chemistry of proteins, carbohydrates and lipids, Enzymes.

Bio-physical principles: Units of concentration of solutions, ions, electrolytes and non-electrolytes filtration, diffusion, ultra-filtration, dialysis, surface tension, absorption, hydrotrophy, domain equilibrium, colloid, acid-base concentration.

ENVIRONMENTAL PHYSIOLOGY:

1. Skin - structure and functions.
2. Regulations of body temperature hypothermia.

SKELETO - MUSCULAR SYSTEM

1. General introduction and classification of muscle fibers.

2. Excitation-construction coupling and molecular basis of construction.
3. Properties of skeletal muscles and factors affecting development of tension.
4. Energy metabolism of muscles.

NERVE:

1. Structure and function of nerve cell.
2. Bioelectric phenomena in the nerve and muscle. RM.P., Action and its propagation, neuromuscular transmission.
3. Classification and properties of nerve fibers.
4. Wellerian degeneration, regeneration and reaction of degeneration.

BLOOD COMPOSITION:

1. Composition and functions in general.
2. Physiology of plasma proteins, normal values, ES.R. & other blood indices.
3. Physiology of RB.C. W.B.C. and platelets formation, fate and physiological and functions of formed elements of blood.
4. Body fluid compartments, their measurements, blood volume and its regulation.
5. A.B.O. and RH. Blood group systems.
6. Lymphatics and RE system.
7. Coagulation & haemostasis.

CARDIO-VASCULAR SYSTEM: (C.V.S.):

1. Structure and properties of cardiac muscle.
2. Generation and conduction of cardiac impulse, E.C.G. (Normal).
3. Cardiac cycle with reference to pressure, volume changes, heart sounds etc.
4. Heart rate and its regulations.
5. Haemodynamics, B.P. and its regulation.
6. Nervous and chemical control of blood vessel.
7. Physiological basis of shock.

RESPIRATORY SYSTEM:

1. Introduction, general organization.
2. Mechanics of respiration, compliance.
3. Pulmonary volumes and capacities.
4. Pulmonary and alveolar ventilation.

5. Physical principles of gaseous exchange a transport of respiratory gases.
6. Nervous and chemical control of respiration.
7. Hypoxia, acclimatization, cyanosis, dyspnoea, asphyxia, abnormal respiration.
8. Pulmonary function tests.
9. Effect of high and low atmospheric pressure effect of respiration on circulation, artificial respiration.

DIGESTIVE SYSTEM:

1. General introduction, Organisation plan and evolutionary significance.
2. Composition, function and regulation of salivary, gastric pancreatic intestinal and biliary's secretions.
3. Movements of G.I.Tract.
4. Absorption of G.I.Tract.
5. Physiology of Liver and Gall bladder structure and functions.

EXCRETORY SYSTEM:

1. General introduction, structure and functions of kidney.
2. Mechanism of formation of urine.
3. Mechanism of concentration and dilution of urine.
4. Physiology of micturation.

ENDOCRINE:

1. Physiology of pituitary, thyroid, parathyroid, pancreas adrenal cortex and adrenal medulla.
2. Regulation of secretion of endocrine glands.

REPRODUCTION:

1. Introduction in general and types of reproduction.
2. Physiology of testes and ovaries.
3. Physiology of menstruation, pregnancy and lactation.
4. Placenta and its function, foetal circulation and respiration.

CENTRAL NERVOUS SYSTEM:

1. General Organisation, structure and function of nerve cell and neuralgia.
2. Cerebrospinal fluid.
3. Physiology of synapse and receptor organs.

4. Physiology of reflex action - classification properties etc. of reflexes.
5. Sensory and motor tracts and effects of sections transaction & hemi-section of the spinal cord.
6. Spinal. decereberate and decorticate preparations and Regulations of posture and equilibrium.
7. Reticular formation.
8. Cerebellum and basal ganglia.
9. Sensory and motor cortex.
10. Physiology of voluntary movements.
11. Higher functions of cortex: sleep and wakefulness. EEG. Memory, speech, learning.
12. Physiology of thalamus and hypothalamus and limbic system.
13. Physiology of autonomic nervous system, peripheral and central mechanism.

SPECIAL SENSES:

1. Physiology of taste and smell sensation.
2. Ear-General anatomy, conduction of sound waves through external, middle and internal ear.
3. Peripheral and central mechanism of hearing and auditory pathways.
4. General anatomy refractory media and protective mechanisms in Eye.
5. Formation, circulation and functions of aqueous humor.
6. Physiology of optics, Formation of image, accommodation errors of refraction, acuity of vision.
7. Physiology of retina photographer functions, dark and light adoption, photochemistry of vision, colour vision.
8. Visual pathway and effects of various levels.

NUTRITION:

Balanced diet and special dietary requirements during pregnancy, lactation and grown.

BIOCHEMISTRY

1. Biochemical principles and elementary constituents of protoplasm.
2. Chemistry of proteins.
3. Chemistry of carbohydrates.
4. Chemistry of lipids.
5. Enzymes and vitamins.
6. Metabolism of proteins, fats carbohydrates, minerals. Biophysical process and their principles in relation to human body.

PRACTICAL

LIST OF PRACTICALS IN PHYSIOLOGY

1. The Microscope-Construction; Use & Care.
2. Haemoglobinometry.
3. Total White Blood Cell Count.
4. Differential WBC count.
5. Packed Cell Volume.
6. Calculation of Blood Indices.
7. E.S.R.
8. Bleeding Time.
9. Clotting Time.
10. Blood Groups.
11. History taking and General Examination.
12. Examination of Alimentary System.
13. Examination of the cardiovascular system.
14. Pulse.
15. Determination of Arterial Blood Pressure in Humans and effect of posture, exercise and Cold stress.
16. Clinical Examination of the Respiratory system, E.C.G.
17. Stethography.
18. Spirometry.
19. Examination of Higher Functions
20. Cranial Nerves.

21. Motor Functions.

22. Reflexes.

23. Sensory system.

24. Recording of Body Temperature.

LIST OF DEMONSTRATION

1. Varieties of Stimuli: Faradic or Induced and Galvanic or Constant Current: Apparatus Used in the Laboratory.

2. Excitability of Muscle.

3. Effect of Graded Stimuli.

4. Simple Muscle Twitch, Effect of temperature on the muscle.

5. Effect of two successive stimuli on the Skeletal Muscle of Frog.

6. Genesis of Tetanus.

7. Fatigue.

8. Effects of Fee and after Loading on Frog's Gastronomies Muscle.

9. Heart Block.

10. Properties of Cardiac Muscle.

11. Perfusion of Mammalian Heart and effect of various ions on it.

12. Effect of stimulation of Vago-sympathetic Trunk and Crescent on Frog's Heart.

13. Effect of Acetylcholine on Heart.

14. Effect of Adrenaline on Frog's Heart.

15. Action of Nicotine on Frog's Heart.

16. Photokinetic stimulation, Ophthalmoscopy and Tonometry.

17. Recording Mammalian blood pressure and respiration and study of factors influencing them.

18. Specific Gravity of Blood.

19. Gastric Analysis.

PRACTICAL IN BIOCHEMISTRY

1. Introduction to Biochemistry and familiarization with laboratory Instruments.

2. Study of Disaccharides - Lactose. Maltose & Sucrose.

3. Study of Polysaccharides - Starch, Dextrin & Glycogen.

4. Introduction of Proteins.

5. Normal Urine report (Inorganic and Organic Constituents)
6. Unknown solutions - Study.
7. Quantitative & Estimation of Glucose in Urine.

Paper – I: Elements of Bio-physics, Biochemistry, Blood and lymph, Cardiovascular system, Reticulo-endothelial system, spleen, Respiratory system Excretory System, Skin, regulation of body temperature, sense organs.

Paper – II: Endocrine organs, nervous system, nerve muscles physiology, Digestive system and metabolism, bio-chemistry of protein, carbohydrate and lipoid, enzymes, Nutrition.

Practical Examination:

1. Examination of physical and chemical constituents of normal and abnormal urine (qualitative)
2. Enumeration of total cell count of Blood (R.B.C. or W.B.C) or differential count of peripheral blood or estimation of percentage of HB.
3. Viva-voce on instruments and apparatus
4. Biochemistry examination of proteins/carbohydrate/lipoid.
5. Experimental physiology
6. Laboratory Note-Book
7. Viva-voce on experiments

PHYSIOLOGY AND BIOCHEMISTRY
TEACHING PLAN

The purpose of a course in physiology is to teach the functions, processes and inter relationship of the different organs and systems of the normal and disturbances in disease . To a homoeopath the human organism is an integrated whole body life and mind .There should be close co operation between the .various departments of anatomy and physiology so that there is maximum coordination in teaching the of these subjects

1ST SEMESTER

1 Introduction (4hours)
Fundamental phenomena of life. The cell and its differentiation, the tissues and organs of the body

2 Biochemical principles (12hours) and biophysical principles(06hours)
Constituents of protoplasm, chemistry of carbohydrates ,lipids and proteins,diffusion,osmosis ,acidbase balance

3 Haematology (26Hours)
Composition and functions of blood,plasma proteins,E.S.R,Physiology of formed elements of blood,Anemia,hemoglobin,Blood groups,Lymph,R.E.System,coagulation,hemostasis,thrombosis,normal values
4 Muscle nerve physiology (12hours)
Classification of muscles with properties and functions, mechanism of muscle contraction structure and functions of neurone RMP,AP, Synapse, neuromuscular jn,transmission of impulse, classification and properties of nerve fibers,wallerian degeneration
5 Digestive system(18Hours)
Composition,function and regulation of salivary,gasric,pancreatic,intestinal,and biliary secretions,movements of GIT,digestion and absorptioninGIT,physiology of liver and gallbladder-structure and functions-liver function tests
Seminar 10hrs
First internal Assessment Examination during the last month of the semester

2nd semester

6 Respiratory system(20hours)
Introduction,mechanism of respiration,pulmonary volumes and capacities,pulmonary and alveolar ventilation,gaseous exchange and transport of respiratory gases,oxygen and carbon dioxide dissociation curve, nervous and chemical regulation of respiration,hypoxea,dyspnoea,acclamatisation,asphyxia,abnormal respiration,pulmonary function tests,artificial respiration
7 Metabolism of carbohydrates and proteins(18Hours)
8 Cardio vascular system (28Hours)
Structure and properties of cardiac muscle,generation and conduction of cardiac impulse,cardiac cycle.cardiac output, blood pressure,shock ,ECG,Heart rate, Heart sounds,regional circulations
9 Excretory system(15Hours)
Structure and functions of kidney,nephron, and renal blood flow, mechanism of formation of urine,GFR,reabsorption of Na,water,Cl,glucose,urea,secrtion of K,H,mechanism of concentration and dilution of urine,physiology of micturition,artificial kidney normal and abnormal constituents of urine,renal function tests
10 **skin-** structure and functions,regulation of body temperature(03Hours)
11 Endocrinology(20Hours)
Physiology of pituitary,thyroid,parathyroid,pancreas,adrenalcortex and medulla Regulation of endocrine secretions,clinical study of hypo and hyper secretion of hormones
12 Enzymes (15Hours)
Seminar 10hrs
Second internal Assessment Examination during the last month of the semester

3rd semester

13Central nervous system(30Hours)
CSF,Receptors,refex action,sensory and motor tracts,effects of trans section and hemi section of spinal cord,brain-cerebrum,cerebellum,basalganglia,pons,medulla,and reticular formation EEG,memory,speech,thalamus and hypothalamus,limbic system,autonomic nervous system
14 Special senses(10Hours)
Vision-physiology of optics,image formation,physiology of eye , layers of retina,rods and cons,visual pathway and effects of lesions, accommadation,pupillary reflexs, errors of refraction,colour blindness
Hearing-Physiology of ear,conduction of sound waves through external,middle and intl ear, organ of corti,auditory pathway
Taste and smell –pathways
15 Reproduction(10Hours)
Physiology of testes,ovary,menstruation,pregnancy,lactation,placenta and its functions,foetal circulation and respiration
16 Metabolism of lipids and minerals,BMR,Nutrition,Balanced diet,(20 Hours)
17 Vitamins(15Hours)
Third internal AssessmentExamination and the University Examination including the publication of Result during the last 2 months of the semester
Seminars 10hrs

MODEL QUESTION PAPER
Physiology and Biochemistry
PAPER - I
(Answer all Questions)

Time: 3 Hours **Max. Marks: 100**

Essay (Each Question carries 10 marks) 10X2=20

1. What is erythropoesis? Describe in detail the different stages of erythropoesis.what are the factors affecting it?
2. Define cardiac output? explain in detail the factors affecting cardiac output .

Short Esays (Question Nos. 3 to 12) 10x5=50

3. Renin angiotensin mechanism
4. G.F.R
5. Errors of Refraction
6. Blood groups
7. Sodium absorption fromP.C.T
8. heart sounds
9. hypoxia
10. lung volumes
11. oxygen dissociation curve
12. organ of corti

Short Note (Questions Nos. 13 to 22) 10x3=30

13. colour blindness
14. Herring breaur reflex
15. Periodic breathing
16. P wave of E.C.G
17. Albumin
18. haemophila
19. surfactant
20. Rh factor
21. macula densa
22. accommodation reflex

Physiology and Biochemistry

PAPER - II

(Answer all Questions)

Time: 3 Hours **Max. Marks: 100**

Essay (Each Question carries 10 marks) 10X2=20

1. Name the anterior pituitary hormones.Explain in detail the functions and regulation of growth hormone .Add note on gigantism
2. Describe anaerobic glycolysis in detail with its energetics .

Short Esays (Question Nos. 3 to 12) 10x5=50

3. synthesis of Hcl in stomach
4. thalamus
5. basal ganglia
6. functions of liver
7. gastro intestinal hormones
8. beta oxidation
9. enzymes
10. HMP Pathway
11. vitamin.A
12. calcium

Short Note (Questions Nos. 13 to 22) 10x3=30

13. parathormone
14. action potential
15. follicular phase
16. oxytocin
17. essential amino acids
18. glycogenolysis
19. beriberi
20. pellagra
21. cynacobalamine
22. cori cycle

List of books

Sl. No:	Recommended text book	Sl. No:	Supplementery Books	Sl No:	Refference books
1.	Text book of Medical Physiology: Guyton;	1	Samson wright's applied Physiology	1	Text book of Medical Biochemistry: M.N.Chatterjee
2.	Text book of Biochemistry; Dr. Vasudevan	2	Review of Medical Physiology- Willam.F.Ganong	2	Text book of Human Physiology ; Madavan kutty
3.	Text book of Practical Physiology- Pal & Pal	3	Harper's Biochemistry	3	Biochemstry - Sathya narayanan
		4	Human Physiology – Vol I & Vol II; C.C.Chatterjee		
		5	Concise Medical Physiology – Choudhary;		

HOMOEOPATHIC PHARMACY .

[SYLLABUS]

THEORY (100 HOURS)

Part 1:- (Topic for first semester)

Schools of Medicine: their discovery,principles,pharmacology,material medica and scope and limitations.

The terms 'Pharmacy' and 'Homoeopathic Pharmacy'.

History of Pharmacy ;Importance of knowledge of pharmacy

Homoeopathic Pharmacy (Introduction and Divisions)

Terms—Pharmacist,Pharmacology,Pharmacognosy,Pharmacodynamics and Pharmacopraxy.

Homoeopathic Pharmacy---its speciality and originality.

Inter relationship of different schools of pharmacy with emphasis on relationship of Allopathic and Homoeopathic pharmacy.

Homoeopathic pharmacopoeia (Definition; two types,official and unofficial)

Homoeopathic Pharmacopoeia of Germany,Britain,America,India and France.

Elementary history of botany,zoology and chemistry with rules of their nomenclature

Sources of Homoeopathic drugs in detail (Veg.kingdom,Animal kingdom,Mineral kingdom,Nosodes, Sarcodes,Imponderabilia and Synthetic sources.), with sufficient examples including indigenous types. Collection and preservation of drugs .

Phyto chemistry (General constituents of drugs with special emphasis on secondary metabolites like alkaloids,glycosides,saponins,anthraquinone derivatives, Tannins,plant exudates and oils----their properties and examples.) Identification tests of alkaloids and tannins.

General laboratory methods and procedures (sublimation,distillation,decantation,filtration, crystallization etc.)

Pharmaceutical instruments and appliances.

History of art and science of pharmaceutics and literature on Homoeopathic Pharmaceutics.

Vehicles (Solid,Liquid and semisolids in detail with regards to source, preparation, properties and uses.)

[First Semester Examination to be conducted during the last month of the semester.]

Part 2:- (Topic for second semester)

External applicants:- Their Significance and role in classical homoeopathy to be discussed. (Ointments,Glycerols,Liniments,Opodeldocs,Lotions,Cerates,Poultices,Fomentations,Plasters,Medicatedoils,Injections and Surgical Dressings)----their preparation,properties,uses and examples.) Preparation of medicines (mother tinctures,mother solutions and mother powders) both by Hahnemannian or old method (class I to IX) and modern methods (maceration and percolation) .

Preservation of mother substances.

Potentisation :-

History ,Evolution, Logic,and scientificity of potentisation.

Different scales (Decimal,Centesimal and 50 millesimal) and procedures (Trituration and Succussion) of potentisation.

Preservation of Potentised medicines.

Pharmaconomy (route of administration of medicines) in general and Homoeopathic remedies in particular---like oral,olfactory/inhalations,injections and external applications.

Advantages and disadvantages of common names and botanical names.
Explanation of terms like, valid scientific names,synonyms,typonyms,metonyms,homonyms,hyponyms, common names and invalid names.
Anomalies in the nomenclature of Homoeopathic drugs.
Identification of 30 drug substances in detail .

List of drugs for identification :-

Vegetable Kingdom :-

1.Aegle folia
2.Anacardium orientale
3.Andrographis paniculata
4.Calendula officinalis
5.Cassia sophera
6.Cinchona officinalis
7.Cocculus Indicus
8.Colocynthis
9.Croton tig
10.Ficus Religiosa
11.Hydrocotyle Asiatica
12.Justicia Adathoda
13.Nux vomica
14.Opium
15.Rauwolfia Serpentina
16.Vinca minor
17.Ocimum sanctum
18.Stramonium

Chemicals :-

19.Mercury
20.Argentum Met
21.Argentum Nitricum
22.Arsenicum album
23.Calcarea Carb
24.Carbo vegetabilis
25.Graphitis
26.Sulphur

Animal kingdom :-

27.Apis melifica
28.Blatta Orientalis
29.Sepia
30.Tarentula Cubensis

[Second Semester Examination to be conducted during the last month of the semester.]

Part 3:- (Topics for third semester)

Posology-Homoeopathic posology-Advantages and disadvantages .
Pharmacopallaxy (Repetition of doses).General awareness regarding this to be given to students.
Prescription writing in detail with study of abbreviations, emphasizing most commonly used abbreviations.
Weights and measures (Metric system,Avoidrupoise/Imperial system and Apothecary's sytem.Relation of measures in Metric system with that in the two other systems.)
Classification of Homoeopathic medicines according to their botanical and zoological ,natural orders. Scientific names,common names in english and other Indian languages with emphasis on regional language,of some of the indigenous plants.
Technique of Homoeopathic drug proving regarding the pathogenetic properties of drugs and other similar sources ,mentioning the related aphorisms and their foot notes.
Standardisation of Homoeopathic drugs in detail.
Explanation and definition of food,poisons,cosmetics,drug substance,drug medicine and remedy.
Legal part:- Legislation in respect of Homoeopathic Pharmacy in detail (Drugs and cosmetic act and rule, Drugs and magic remedies act and rule,Medicinal and toilet preparation act,Dangerous drug act/narcotic and psychotropic drug act,Drugs price control order,Pharmacy act and Poisons act).
Homoeopathic Pharmacy in relation to:-
1.Organon of medicine (Related aphorisms and food notes to be mentioned)
2.Materia medica
3.National economy

Pharmacological action of 30 drugs :-

1.Aconite Napellus
2.Adonis vernalis
3. Allium cepa
4.Argentum Nitricum
5. Arsenic album
6.Belladona
7.Cactus grandiflorus
8.Cantharis
9.Cannabis Indicus
10.Cannabis sativus
11.Cinchona officinalis
12.Coffea cruda
13.Cratageus
14.Crotalus Horridus
15.Gelsemium
16.Glonoine
17.Hydrastis canadensis
18.Hyoscyamus
19.Kali Bichromicum
20.Lachesis
21.Lithium carb

22.Mercurius cor
23.Naja Tripudiens
24.Nitric acid
25.Nux vomica
26.Passiflora Incarnata
27.Stannum met
28.Stramonium
29.Symphytum
30.Tabacum .

(**Third Semester Examination to be conducted during the fifth month of the semester.University**

Examination is to be conducted during the sixth month of the last semester.)

PRACTICALS(100 HOURS)

Identification and uses of Homoeopathic pharmaceutical instruments and appliances and their cleaning.
Preparation of external applicants (Ointments,Glycerols,Liniments,Lotions,Rectal injections,Vaginal injections)
Trituration of 3 insoluble drugs up to 6x and their conversion in to liquid potency (Fluxion/Jumping potency)
Preparation of mother tinctures of 4 drugs (2 according to old method and 2 according to new method)
Potentisation of 3 mother tincture up to 6^{th} potency under Decimal scale and up to 3^{rd} potency under centesimal scale.
Estimation of size globules .
Medication of :- 1)Sugar of milk
2)Globules 3)Distilled water and (4) Tablets and dispensing doses to different age groups both in acute and chronic cases.

Preparation of ethyl alcohol from sucrose.
Purity test of:- 1)Ethyl Alcohol 2)Sugar of milk 3)Distilled water
Determination of specific gravity of :- 1)Alcohol 2)Distilled water
Estimation of moisture content of one drug using water bath.
Macroscopic study of 30 drugs (that is given in the theory part ; draw diagrams of these in the practical record and write the important identifying features in the right hand side of the record.)
Herbarium of 30 drug substances,from the list given by the pharmacy dept.of the college.
Prescription writing and dispensing the medicines (the question should go together in the practical examination) .
General Laboratory methods:-
Sublimation,Distillation,decantation,filtration,crystallization and percolation.
Microscopic study of two drugs up to 3X potency.

[Every experiment done in the laboratory must be recorded in the pharmacy record and

Herbarium of 30 Medicinal Plants to be prepared before the end of last semester.]
Visit to a Homoeopathic laboratory to study the manufacture of drugs in large scale.
Visit to a botanical garden to acquire knowledge regarding medicinal plants (Optional).

[TEACHING PLAN

First Semester:-

1. **THEORY [40 hrs]:-** Schools of medicine---History of pharmacy----inter relationship of different schools of pharmacy----Homoeopathic pharmacy,its definition,divisions and speciality and originality------Pharmacist,pharmacology, pharmacognosy,pharmacodynamics and pharmacopraxy----Homoeopathic Pharmacopoeia; definition,two types,official and unofficial; different pharmacopoeiae like German,British,American,Indian and French,with special emphasis on H.P.I------ Elementary history of botany,zoology and chemistry------sources of homoeopathic drugs in detail with sufficient examples including some indigenous plants and animal species------collection and preservation of drugs-----General constituents of drugs; their properties and examples-------General laboratory procedures,like decantation filtration,distillation,sublimation and crystallization-----Pharmaceutical instruments----- Vehicles (solid,liquid,semisolid);their source,preparation, properties uses and sufficient examples.
2. **PRACTICALS/TUTORIAL/SEMINAR [20 hrs]:-** Laboratory instruments-------Preparation of different types of external applicants -----Purity tests of distilled water,ethyl alcohol and sugar of milk------Determination of size of globules.

Second semester:-

1.THEORY [25 hrs]:- External applicants; their significance in classical homoeopathy, different types, their preparation, properties ,uses and examples-----Preparation of mother tinctures, mother solutions, mother powders, both by old [class I to IX and new methods (maceration and percolation);differences between the two------Preservation of mother substances----- Potentisation; history, evolution, logic, its scientificity, three scales and different procedures ----- Preservation of potentised medicines------Pharmaconomy-----Advantages and disadvantages of common names and botanical names----Explanation of terms like valid scientific names,s ynonyms, typonyms, metonyms, homonyms, hyponyms, common names and invalid names----- Anomalies in the nomenclature of homoeopathic drugs-----identification of 30 drugs in detail (list of drugs given in the syllabus).

2. **PRACTICALS/TUTORIAL/SEMINAR [50 hrs]:-** Triturations of 3 insoluble drugs upto 6X and their conversion into liquid potencies------Preparation of mother tinctures of 4 drugs (2 according to old method and 2 according to new method)------Potentisation of 3 mother tinctures upto 6X and 3C

Third semester:-

1. **THEORY [35hrs]:-** Posology;Homoeopathic posology,its advantages and disadvantages----Pharmacopallaxy-----Prescription writing in detail with study of abbreviations, emphasizing most commonly used abbreviations------Weights and measures-----

Classification of homoeopathic medicines according to their botanical and zoological natural orders------Scientific names,common names in English and other Indian languages with emphasis on regional language of some of the indigenous plants-------Homoeopathic Drug proving in detail Standardization of Homoeopathic drugs in detail------ Explanation and definition of food,poisons,cosmetics,drug substance,drug medicine and remedy------ Legislation in respect of Homoeopathic Pharmacy in detail-------Homoeopathic pharmacy in relation to Materia Medica,Organon of Medicine and National Economy------Pharmacological action of 30 drugs (list of drugs given in the syllabus).

2. **PRACTICALS/TUTORIAL/SEMINAR [30hrs]:-** Medication of globules, distilled water, sugar of milk and tablets------Preparation of ethyl alcohol and its confirmatory test (iodoform test)-----Estimation of moisture content of one drug using water bath------Practical part of prescription writing and serving-----Practical part of common laboratory procedures-----Macroscopic study of 30 drugs given in the list of identification------Microscopic study of 2 triturations upto 3X potency.

In addition to the practicals, visit to a Homoeopathic Laboratory to study the manufacture of drugs on large scale is mandatory. Visit to a Botanical Garden to acquire knowledge regarding some of the medicinal plants may be done (optional) .

Model question paper

Subject:- Homoeopathic Pharmacy.

Time:3 hours Total marks: 100

[Draw diagrams wherever necessary.]

I. Essay Questions:-

1. Mention the sources of Homoeopathic drugs.Describe in detail the Vegetable kingdom.
2.What do you mean by the term mother tincture? Describe in detail the preparation of mother tincture by percolation method. (10x2=20)

II. Write Notes on:-

1.Pharmacopoeia.
2.Sugar of milk
3.Alkaloid
4. Standardisation of distilled water.
5. Collection and preservation of animal drugs.
6. L.M potency.
7.Posology.
8. Parts of a 'Prescription'
9.Drug Proving.
10. Pharmacy act. (5x10=50)

III.Write Short Notes on:

1.Olive oil.
2.Ointment.
3.Nux vomica (identifying features)
4.Pharmaconomy.
5.Prepared lard.
6. Cinchona officinalis (pharmacological action).
7.Filtration
8.Avoirdupois system.
9.Opodeldoes.
10.Proof spirit. (3x10=30)

Answer Key to the model questions.

I. Essays:-

1. Veg.kingdom,Animal kingdom,Mineral kingdom,Nosodes,Sarcodes,Imponderabilia and Synthetic sources-----Veg.sources in detail with examples; Thallophyta (algae,fungi,lichens) ----- Bryophyta------Pteridophyta-----Whole plants including root,excluding root----different type of barks including that of root------fresh and dry leaves------twigs and leaves-----flowering tops-----

buds and flowers----fresh,dry and hanging aerial root-----modified under ground stem----- different types of fleshy and dry fruits,pulp-----wood----- extractions.

2.Definition of mother tincture-----Percolation is a new method of mother tincture preparation----Types of drugs subjected to percolation------Percolator and its parts----Tow and its different layers-----preparation of drug substance for percolation ------actual process of preparation of mother tincture----- time required before collection of mother tincture-----Advantages of Percolation over Maceration.

II.**Notes**:-

1.Definition of Pharmacopoeia-----divisions(official,unofficial)-------history,developments in few word------different pharmacopoeiae available now------special reference to H.P.I

2.Raw material used for the preparation of Sugar of milk-----preparation and purification in few words ------Physico-chemical properties in short------usual impurities-------uses.

3.One of the secondary metabolytes-----properties------ pharmacological properties of some of them-------examples for alkaloids------chemical tests of identification; Mayer's test,Wagner's test,Dragendorff's test.

4.Preparation of distilled water------properties-----usual impurities present------tests of identification of impurities------preservation of dist.water.

5.Methods and manner of collection of drugs from animal species in short including snake venoms----after peper identification---to be collected in fresh form------reliability of sources------some from serological laboratories------to be preserved in proper devices.

6. L.M potencies,also known as 50 millesimal potencies------its discovery (6^{th} edition of organon)-----preparation-----how these potencies are represented------advantages------method of dispensing.

7.Study of doses-----definition of dose------types of doses-----significance of minimum dose-----factors -------determining doses.

8.Definition -------4 parts; superscription,inscription,subscription,signature/signatura/signa-----role of abbreviations------mention medico-legal importance of prescriptions.

9.Definition-----unique features of Homoeopathic Drug proving------drug proving unit------ideal prover-----precautions,protocol and procedure in short-----day book------complete proving.

10.Pharmacy Act of 1948------its purpose (education regulations,approval of institutions,registration of persons engaged in the profession)-----mention pharmacy council of India and state pharmacy councils------steps of registration of pharmacists.

III.**Short Notes**:-

1.Olive oil,a fixed oil------source-----properties------uses.

2.Ointment (therapeutic cream)----definition-----vehicles used----ratio----mention methods of preparation----- use----examples.

3.Deciduous tree----type of leaves,flowers ,berry and seeds----Seed used-----disc shaped,flat or cocavo-covex,margin round,surface ash-gray,covered with short satiny hairs; no odour----- bitter taste

4.It is the route of administration of medicines------ oral,olfactory/inhalations,injections,external application-----oral route preferred in our system,why?

5.It is a semi solid vehicle-----source and preparation------properties------uses----- preservation.

6.Dried outer bark of Cinchona used------major centres of action are cerebrospinal nervous system, venous system, G.I.T-----jaundice,anaemia destruction of W.B.C------malaria----mydriatic,antiseptic, disinfectant,aphrodisiac.

7.Filtration,a general laboratory method of seperation------two types;rapid filtration/filtration under reduced pressure,hot filtration------decantation to be done before filtration.

8.Avoirdupois system,one of the systems of weights and measures------different measures of weight, volume and length in this system------relation with metric system.

9.Opodeldocs/semisolid liniments are a kind of external applicants-------tincture of soap is the vehicle used (white curd soap+water→gently heated),add alcohol and mother tincture----use.

10.Proof-spirit is a mixture of alcohol and purified water weighing 12/13th of an equal volume of purified water at 51 degree F------57.1% of ethyl alcohol and 42.9% of purified water(both by volume)-----measured by alcoholometer------mention over-proof and under-proof.

List of Text Books

1. Homoeopathic Pharmacy for Students and Practitioners---------Dr.T.P.Elias.
2. Text book of Homoeopathic Pharmacy---------Dr.D.D.Banerjee.
3. A Text book of Homoeopathic Pharmacy------Mandal and Mandal.

List of Reference Books.

1. Art and Science of Homoeopathic Pharmacy----------Dr.Sumit Goel.
2. Principles and Practice of Homoeopathic Pharmacy---------Dr.M.K.Sahani.
3. Homoeopathic Pharmacy----------T.C.Mondal.
4. A Treatise on Homoeopathic Pharmacy--------Dr.N.K.Banerjee.
5. Homoeopathic Pharmacopoeia of India-------(I to X volumes).
6. Organon of Medicine--------5th and 6th editions.
7. Physiological Materia Medica-------Dr.W.H.Burt.
8. Encyclopedia of Medicinal Plants used in Homoeopathy (Vol.I)-------Dr.K.S.Gopi.
9. Pharmaceutical Science in Homoeopathy and Pharmacodynamics-----Dr.K.P.Muzumdar.
10. M.Bhattacharyya & Co.'s Homoeopathic Pharmacopoeia.
11. Forensic Pharmacy and Ethics--------S.C.Mahajan and J.B.K.Narang.
12. Indian Medicinal Plants (4Vols)------A.K.Gupta,Madhu Sharma,Neeraj Tandon.

'Oushadha Sasyangal'(Malayalam, 2Vols)------Dr.S.Nesamony.

HOMOEOPATHIC

MATERIA MEDICA

Homoeopathic Materia Medica is differently constructed as compared to other Materia Medica. Homoeopathy considered that study of the action of drugs on individual parts or systems of the body or on animal or their isolated organs is only a partial study of life processes under such action and that it does not lead us to a full appreciation of the action of the medicinal agent; the drug agent as a whole is lost sight of.

2. Essential and complete knowledge of the drug action as a whole can be supplied only by qualitative synoptic drug experiments on healthy persons and this alone can make it possible to view all the scattered data in relation to the psychosomatic whole of a person and it is just such a person as a whole to whom the knowledge of drug action is to be applied.

3. The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship. Each drug should be studied synthetically, analytically and comparatively, and this alone would enable a Homoeopathic student to study each drug individually and as a whole and help him to be a good prescriber.

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

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

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

6. While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned. The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself to memorize a few drugs for a particular disease.

This Hahnemannian approach will not only help him in understanding the proper perspective of symptoms as applied and their curative value in sickness but will even lighten his burden as far as formal examination are concerned. Otherwise the present trend produces the allopathic approach to treatment of diseases and it contradictory to the teaching of Organon.

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

Lectures on comparative Materia Medica and therapeutics as well as tutorials should be as far as possible be integrated with lectures on clinical medicine in the various departments.

7. For the teaching of drugs the college should keep herbarium sheets and other specimens for demonstrations to the students. Lectures should be made interesting and slides of plants and materials may be projected.

8. The drugs are to be taught under the following heads:-
1. Common name, natural, order, habitat, part used, ,preparation.
2. Sources of drug proving.
3. Symptomatology of the drug emphasizing the characteristic symptoms and modalities.
4. Comparative study of drugs.
5. Complimentary, inimical, antidotal and concomitant remedies.
6. Therapeutic applications (applied Materia Medica).

A. Introductory lectures: Teaching of the Homoeopathic Materia Medica should include:-
(a) Nature and scope of Homoeopathic Materia Medica.
(b) Sources of Homoeopathic Materia Medica.
(c) Different ways of studying the Materia Medica.

B. A study of 12 tissue remedies according to Schusler's biochemic system of medicine.

List of drugs for Ist BHMS
1. Acontite nap
2. Aethusa cyan
3. Allium cepa
4. Aloe socotrina
5. Antimonium crud
6. Antimonium tart
7. Apis malefic
8. Argentum nit
9. Arnica Montana
10. Bryonia alb
11. Chamomilla
12. Cina
13. Colchium autumn
14. Colocynthis
15. Dulcamera
16. Euphrasia
17. Ipecac
18. Ledum pal
19. Nux vomica
20. Rhus tox
21. Calcarea flour
22. Calcarea phos
23. Calcarea sulph
24. Ferrum phos
25. Silicea

Teaching Plan

I BHMS

Theory – 120 hrs

Seminar / Tutorial - 25 hrs

Month	Topic
1st month of admission	Introduction to Homoeopathy / Introduction to Materia Medica / Nature & Scope of Homoeopathic Materia Medica
2nd	Sources of Homoeopathic Materia Medica / Different Types of Materia Medica / Different Ways of Studying Materia Medica
3rd	A Study of twelve tissue remedies according to Schussler's biochemic system of medicine
4th	Aethusa / Allium cepa
5th	Euphrasia / Aconite / Chamomilla
6th Month - Ist Average Examination	
7th	Ledum pal / Nux vomica
8th	Aloe / Cina / Antim tart
9th	Dulcamara / Colocynth
10th	Bryonia / Ipecac / Argentum Nitricum
11th	Rhustox / Arnica
12th Month - IInd Average Examination	
13th	Silicea / Apis mel
14th	Colchicum / Calcarea Phos
15th	Ferrum Phos / CalcareaFlour
16th	Antim crud / Calcarea Sulph
17th Month - IIIrd Average / Model Examination	
18th Month - University Examination	

Department of Materia Medica

Model Question Paper **First BHMS (Juniors)** March 2011

Time: 3Hours Marks: 100

Answer all Questions

1) Define Materia Medica? What are the different types of studying Materia Medica? Explain any 3 types with Examples, Merits & Demerits (1+3+6)

2) Compare Homoeopathic &Biochemic system of Medicine. What are the 12 Tissue Remedies. Write the constituents of Nerve cell & Bone cells (5+4+1)

II Write Notes on **(5*10=50)**

1. Limitations of Materia Medica
2. Aethusa – GIT Complaints
3. Apis – Urinary symptoms
4. Dulcamara – Skin complaints
5. Source books of Materia Medica
6. Relationship of Remedies
7. Aconite – Mind
8. Kali. phos. – CNS Complaints
9. Arnica – Injury
10. Write the relationship of:-
    a. Aconite – Coffea
    b. Apis – Rhus tox
    c. Dulcamara – Belladonna
    d. Drosera – Cina

III Write short notes on: **(3*10=30)**

1. Apis – Skin
2. Define Constitution with example
3. Arnica – Constipation
4. Define Diathesis with example
5. Differential modality
6. Cina – Respiratory complaints
7. Dulcamara – Rheumatism
8. Aethusa – Epilpsy
9. Aconite – Menses
10. Kali phos – Head complaints.

Answer Key

1. Medical materials, apply natural law of cure, proving on healthy human beings.
2. Picture type, Anatomical, Keynote, Comparitive, Therapeutic.

II

1. No pathological study, no lower animal provings, unmanageably wast, no drug pathogenesis, management of only medicaly curably disease.
2. Vomiting, weakness, milk intolerance, Thirstlessness.

3. Strangury, Burning stinging, sore pain, thirstless, dropsy, hot patient
4. Chilly, eczema, warts
5. Hahnemann: Fragmentadevirbis

   Materia medica pura
   Chronic disease

   T. F. Allen Encyclopedia of pure Materia Medica
   Hering Guiding symptoms of Materia Medica
   Clarke Dictionary of Materia Medica
   Huges Cyclopedia of drug pathogenesy
6. Boeninghussen introduced

   HeringsGuiding symptoms of Materia Medica
   Gibson miller
   Clarke Dictionary of Materia Medica 4th Volume
   Relationship: 1. Complementry
   2 Inimical
   3 Antidote
   4 Cognate
   5 Concordent
7. Fear, anxiety, restlessness, acute remedy
8. Nerve tonic of schussler, lack of nerve power, brain fag, nervous prostration.
9. Bruised sore pain, blue black skin, black eye, blunt instruments, acute & chronic affections of injury
10. a Complementry

    b inimical
    c incompatible
    d follows well

III

1. Rosy red hue, oedema, dropsy without thirst.
2. Physical & mental make up,

   Grauvogl,
   hydrogenoid – thuja
   Oxygenoid- ,
   Carbonitrogenoid- Lyco, Sulph
3. Dog stool, pipe stem stool, due to enlarged prostrate.
4. Physical predisposition to diseases.

   Eg:

   Haemerrhagic diathesis – Phos, Lach

Rheumatic diathesis- Rhus tox

Scrofulous diathesis – Tuber, con

5. Modalities which donot agree with the general modalities of that dug

   EgArsalb – General amel warmth, but head complaints amel by cold
   Lyco – Hot pt.prefering warm food and drinks
   Phos. Chilly patient prefers cold food & drinks

6. Cough dry, with sneezing, spasmodic, gagging in the morning, periodic, returning spring & fall, afraid to speak or move for fear of bringing paroxysim of cough.
7. Brought on by cold damp rainy wether, or sudden change in hot wether.Amel moving.
8. Eyes turn down, clenched thumb, fixed dilated pupil, during dentintion, summer
9. Amenorrhoea in young plethoric, after fright
10. - Occipital headache; better, after rising.
    - Vertigo, from lying, on standing up, from sitting, and when looking upward.
    - Cerebral anaemia.
    - Headache of students, and those worn out by fatigue.
    - Headaches are relieved by gentle motion.
    - Headache, with weary, empty, gone feeling at stomach.

Admission to examination, scheme of examination etc

FIRST BHMS EXAMINATION

(i) The student shall be admitted to the First BHMS Examination provided he/she has required attendance as per regulation 13 (iii) to the satisfaction of the head of the Homoeopathic Medical College.

(ii) The First BHMS examination shall be held at the end of 18th month of admission.

(iii) The minimum number of hours for lecture, demonstration/ practical and seminar classes in the subjects shall be as under:

FIRST BHMS COURSE -DISTRIBUTION OF HOURS

Sl .No		Theory	Practical/Clinical				
	Subject	Theory including internal exam	Practical/Clinical including internal Exam	Tutorial	Seminar	Total	Grand Total
01	Organon of Medicine, Principles of Homoeopathic Philosophy and Psychology	200	Nil	15	10	25	225
02	Anatomy, Histology and Embryology	265	355	15	20	390	655
03	Physiology including Biochemistry	265	355	15	20	390	655
04	Homoeopathic Pharmacy	100	75	15	10	100	200
05	Homoeopathic Materia Medica	120	Nil	15	10	25	145
	TOTAL						1880

(iv) Examination in Organon of Medicine, Principles of Homoeopathic Philosophy and Psychology shall consist of one theory paper and one oral examination.

(v) Examination in Anatomy including Histology and Embryology shall consist of two theory papers. Practical includes oral, identification of specimen and histology slides.

(vi) Examination in Physiology including Biochemistry shall consist of two , theory papers and one practical including oral.

(vii) The examination in Homoeopathic Pharmacy shall consist of one theory and one practical including Oral.

(viii) The examination in Homoeopathic Materia Medica shall consist of one theory and one oral examination.

(ix) Full marks for each subject and the minimum number of marks required for passing First BHMS should be as follows:

FIRST BHMS -DISTRIBUTION OF MARKS

Subject	THEORY				ORAL & PRACTICAL					Grand Total	Aggregate minimum for pass
	University Exam Written	Int. Assessment	Total	Minimum For Pass	University practical	Exam Viva	Int. Assessment	Total	Minimum For Pass		
Homeopathic Pharmacy	100	20	120	60	50	50	20	120	60	240	120
Anatomy	200	40	240	120	100	100	40	240	120	480	240
Physiology including Biochemistry	200	40	240	120	100	100	40	240	120	480	240
Homeopathic Materia & Medica	100	20	120	60	Nil	50	10	60	30	180	90
Organon of Medicine, Principles of Homoeopathic Philosophy and Psychology	100	20	120	60	Nil	50	10	60	30	180	90

II BHMS Syllabus

PATHOLOGY AND MICROBIOLOGY

(Including bacteriology, virology & parasitology)

The written exam consists of 2 papers .
Prescribed hrs as per syllabus

Theory-210 hrs
Practical – 90
Tutorials -10s
Seminars - 20

First (1) paper includes - introduction
-General Pathology & systemic Pathology

Second (11) paper includes - Bacteriology
-Virology
-Parasitology
-Clinical Pathology & Complete Haematology

Syllabus and Teaching plan

First Semester
(General- Systemic Pathology)

General Pathology – 80 hrs
} …..140 hrs
Systemic Pathology – 60 hrs

Topics – Introduction to Pathology

Study of Pathology must be in relation with the concept of miasm as evolved by Dr.Hahneman and further developed by Kent, Boger and Allen.

Concept of miasm in view of Pathoplogy should be taught during the introductory classes itself. Importance of susceptibility and immunity , which explains the Homoeopathic concepts of disease and cure.

In the introductory classes itself the students should be aware about

-Characteristic expression of each miasm
- Classification of diseases according to Pathology
- Classification of miasm to Pathology for eg:- psora & inflammation

Like wise all the topics in general Pathology and systemic Pathology must be correlated at each level. So a student will definitely understand the importance of Pathology in Homoeopathy.

General Pathology

-Normal cell
- Cell injury and adaption
    - Degeneration – disturbance in various metabolism
    - Amyloidosis
    - Necrosis
    - Gangrene
- Acute and chronic inflammation
- Repair,Regeneration and healing
- Disorders of vascular flow and shock
    - oedema
    - Hyperaemia & congestion
    - Haemorrhage, pyrexia
    - Thrombosis
    - Embolism
    - Infraction
    - Shock
- Immunity & Disorders of Immune systems
    - Innate Immunity
    - Acquired Immunity - Active 1
      Passive 1
    -Cells of the Immune system
    - Cytokines& Messenger molecules of the immune system
    - Hypersensitivity
    - Autoimmunity and autoimmune disorders
    - immune deficiency diseases

-Growth disturbances
    - Hypetrophy
    - Hyperplasia
    - Aplasia
    - Agenesis
    - Metaplasia
    - Dysplasia
    - Anaplasia
    - Neoplasia
        Definition

Nomenclature
Classification
-Characteristics of Benign and malignant tumor.
- Precancerous Lesion
- epidemiology
- Carcinogenesis – the molecular basis of cancer.
- Biology of tumor growth
- Etiology of cancer – carcinogenic agents
- Host offense against tumor
- Cancer due to habit and custom
- Clinical features of Neoplaia
- Skin tumors
- Diagnosis of cancer grading and staging of cancer

Systemic Pathology
- Diseases of alimentary system
- Diseases of cardiovascular system
- Common disorders of central nervous system
- Respiratory disorders
- Diseases of kidney, bladder, ureter, urethra
- Common disorders of male, female genetal organs
- Sketal & muscular diseases
- Common skin disorders
- Endocrine diseases
- Diseases caused by Bacteria, Parasites & Viruses
- Fungal diseases

SECOND SEMESTER TOTAL-70 hrs

Bacteriology - 30 hrs
Introduction to Microbiology
-Different types of classification of bacteria
- Cultural medias
- Products of bacterial growth and metabolism
- infections
- disinfection & sterilization
- Gram + ve cocci
  - staphylococcus
  - streptococcus
  - pneumococcus
- Gram –ve cocci
  - Neisseria meningitides
  - Neisseria gonorrhea
- Mycobacterias
  - Mycobactertium tuberculosis

- Mycobacterium leprae
- Spirocheats
  - treponemas
  - leptospira
  - borrelia
- Corynebacterium diphtheria
- Bacilum anthracis
- Parvo bacterias
  - Haemophilus influenza
  - Brucella
  - bordetella
  - yersinia pestis

Entero bacteriaceas
- E coli
- Klebsella
- Proteus
- Pseudomonas
- Salmonella
- Shigella

Vibrios
- Cholera vibrio
- Eltor vibrio

Ricketsiae

VIROLOGY …….. 10 hrs

- General characters
- Classifications
- Important viruses with its characteristic features & Pathogenecity
- Viral multiplication
- Structure of virus

PARASITOLOGY …… 15 hrs

Protozoal parasites
- Entamoeba histolitica
- Flagellates
- Plasmodium
- Ciliata

Cestodes
- Various tapeworms

Trematodes

Nematodes

-Ascaris lumbricoides
- Ankylostoma duodenale
- Trichinella spiralis
- Strongyloides stercoralis
- Enterobius vermicularis
- Filarial worms

HAEMATOLOGY..…… 15 hrs

WBC disorders
RBC disorders
Haemoglobinopathies
Platelet defects
Blood group & Blood transfusion
Diseases of lympho reticular system
- Lymphoma
- Plasma cell disorders

PRACTICALS

Practicals - 90 hrs
Tutorials - 10 hrs
Seminars - 20 hrs

First Semester Practicals - 30 hrs
Tutorial - 5 hrs
Seminar - 10 hrs
Total - 45 hrs

PRACTICALS

- Collection of blood
- Study of Anticoagulants
- Haematology Practicals
  - Total WBC Count
  - Total RBC Count
  - Differential count
  - Haemoglobin Estimation
  - ESR
  - Bleeding time, Clotting time
  - Blood group

-Clinical chemical pathology
-Urine analysis
-Physical examination
- Chemical examination
-Microscopical examination

-Stool examination

-study of various parasites and ova

SECOND SEMESTER Practicals - 60 hrs

Tutorial - 5 hrs

Seminar - 10 hrs

HISTOPATHOLOGY

-demonstration of histopathological techniques
- fixation , embedding
- staining
- frozen section & its importance
- microscopic study of Histopathological slides
- demonstration of gross pathological specimens

MICROBIOLOGY

-Gram staining
- Acid fast staining
- Culture
- Demonstration of other important staining methods

SECOND YEAR B.H.M.S DEGREE EXAMINATION
PAPER -1 PATHOLOGY AND MICROBILOGY INCLUDING PARASITOLOGY,BACTERIOLOGY & VIROLOGY

TIME : 3 Hrs Max. Marks :100

Instructions :- 1. Answer all questions.
2. Draw diagrams wherever necessary.

1. Describe the pathogenesis , clinical features and laboratory diagnosis of Pernicious anaemia. (10)

2. Define Neoplasm. Describespread of malignant tumour in detail.

(10)

3. Write notes on

(a) Phagocytosis (b) Gangrene (c) Amyloidosis (d) Cirrhosis (e) Infarction

(f) Pulmonary embolism (g) Lymphoma (h) Repair (I) Diabetes Mellitus (j) Renal stone

(10 x 5 = 50)

4. Write short notes on

(a) Giant cells (b) Scurvy (c) Albuminuria (d) Milroy's disease (e) Vincent's angina
(f) Gout (g) Rodent ulcer (h) Multiple myeloma (i)Virchow's triad (j)Water can pernium

(10 x 3 = 30)\

PATHOLOGY AND MICROBIOLOGY

PAPER – 1 SCHEME OF VALUATION

1. Anaemia – definition - 1 mark

   Causes of pernicious anaemia – 1 mark
   Pathogenesis – How it develops and afew pathological changes observed- 3 marks
   Clinical features – the important clinical features by which one suspect pernicious Anaemia – 2 marks
   all other clinical features –1/2 mark
   Lab diagnosis – blood picture – 1 mark
   Bone marrow picture – 1 mark
   Other tests – ½ mark

2. Neoplasm – definition by willis – 1 ½ mark

   For all other definitions – ½ mark
   Direct spread – local spread – ½ mark
   Lymphatic spread (a)lymphatic permeation
   (b) lymphatic embolism - 2 marks
   (m) metastasis in lymphnode
   Haematogenous spread- how it spread in veins,arteries andin large and small vessels
   Dissemination through serous sacs - 2 marks
   Spread through CSF – 1 mark
   Spread by implantation on epithelial surface – 1 mark
   Indirect spread - 2 marks
   Metastatic spread - 2 marks

3.Write notes on :-

(a) Phagocytosis – definition 1 ¼ marks
Cells participating in phagocytosis 1 ¼ marks
Mechanism of phagocytosis 1 ¼ marks
End result 1 ¼ marks

(b) gangrene - what is gangrene 1 ¼ marks
Types of gangrene 1 ¼ marks
Characteristic features of each gangrene 1 ¼ marks
Different between dry and wet 1 ¼ marks

(c) Amyloidosis – what is amyloidosis 1 mark
Causes of amyloidosis 2 marks
Pathological changes and clinical features – 2 marks

(d) Cirrhosis – what is cirrhosis – 1 mark
Types of cirrhosis – 1 mark
Causes of cirrhosis – 1 mark
Pathological features (a) macroscopy}
(b) microscopy }- 2 marks

(e) Infraction – definition – 1 mark
Presentation – 1 ½ mark
Lab diagnosis (a) enzymes }

(b) ECG changes } - 2 ½ marks

(f) pulmonary embolism – definition 1 mark
Causes of embolism 1 mark
Predisposing conditions 1 mark
Fate of pulmonary embolism 2 mark

g) Lymphoma

h) Repair

i)Diabetes mellitus
Classification, Causes, Paathogeness, clinical features, Diagnosis (1 mark each)

j)Renal stonew
types, causes, investigations (2+1+2)

Write short notes on

1) Giant cell
what is it?, types, disease conditions, where is it present (½+½+2)
2) Scurvy
what is it, causes, clinical features (½+½+2)
3) Albuminuria
physiological & pathological, conditions of, diagnosis (1+1+1)
4) Milroys disease
characteristic features, diagnosis (2+1)
5) Vincents angina
causative organism, clinical features, associating bacteria (½+2+½)
6) Gout
definitions, pathogenesis, clinical features, complications (½+2+½)
7) Rodent ulcer
features of malignancy, site of lesion, pathological features (½+½+2)
8) Multiple myeloma
what is it, pathology and diagnosis (1+1+1)
9) Virchows triad
changes in the blood vessel, changes in constituents,
changes in the flow of blood (1+1+1)
10) Water can perineum
causative organism, characteristic features, site (½+2+½)

Name of text books and References:

Pathology by Robbins
Pathology by Harsh Mohan
General pathology Bhende
General pathology walter Israyel

Text Book of pathology by Muiar
Text book of pathology by Boyd
Microbiology:
Text book of microbiology Anantha Narayan and Jayaram Panicker
Essentials of Medical Microbiology by rajesh Bhatia
Parasitology by K.D. Chatterjee
Parasitology by Jayaram Panicker
Pathology –Anderson
Pathology in tropics-G.M.Edington
Pathophysiology-Sylvic Anderson, price
Immunobiology-Janeway
Clinical Haematology-Dr. Gruchy
Diagnostic Microbiology-Bailey and Scott
Practical Haematology-Sir John ,V.Dacci
Clinical Pathology-Chakravarthy and Bhattacharya
Hand book of ultrasound G.S.Garakal

SECOND YEAR B.H.M.S DEGREE EXAMINATION
PAPER -11 PATHOLOGY AND MICROBIOLOGY INCLUDING PARASITOLOGY, BACTERIOLOGY & VIROLOGY

TIME : 3 Hrs. Max.Marks : 100

Instructions :- 1.Answer all questions.
2. Draw diagrams wherever necessary.

1. Describe morphology & pathogenesis of malarial parasites. (10)

2. Define Immunity. Describe Acquired Immunity in detail. (10)

3. Write notes on :-
(a) Oncocerca volvulous (b) Imvic Reaction (c) Herpes virus (d) Microfilaria
(e) Morphology of E. coli (f) AIDS (g) Toxins of cl.welchi (h) Virasl multiplication
(i) Anaphylaxis (j) Enriched media (10 x5 = 50)

4. Writes short notes on:-
(a) Antigen (b) Infection (c) NIH swab (d) Negri bodies (e) Exotoxin
(f) Egg of Trichuris trichura (g) Precipitation reaction (h) Biological characters of pneumococci
(i) Mantaux test (j) Varicella zoster virus (10 x 3 = 30)

Forensic Medicine & Toxicology – based on Central Council of Homoeopathy syllabus.

The subject is of practical importance to the students of homoeopathic medicine as homoeopathic physicians are to be employed by Government in areas where they may have to handle medico-legal-cases, perform autopsies, apart from giving evidence in such cases. The training in forensic medicine at present conducted is inadequate to meet these needs.

The course consist of a series of lectures and demonstrations including

1. Legal Procedure:

- Definition of medical Jurisprudence.
- Courts and their jurisdiction.
- Medical evidence.
- Conduct of a doctor in a court as a witness.

2. Medical ethics:

- Law relating to medical registration and Medical relation between practitioners and the State.
- The Homoeopathy Central Council Act, 1973 and the Code of Ethics under it, the practitioners and the patients, Malpractices covering professional secrecy.
- The practitioner and the various legislations (Acts) Provincial and Union such as Workman's compensation Act, Public Health Act, Injuries Act, Child Marriage Restraint (Amendment) Act, Borstal School Act, Medical Termination

of Pregnancy Act. Mental Health Act, Indian Evidence Act, Indian Penal Code, Criminal Procedure Code (Relevant sections), Consumer's Protection Act (COPRA), Transplantation of Human Organs Act, Pre-natal Diagnostic Techniques (PNDT) (Regulation and Prevention of Misuse) Act, etc.

3. Forensic Medicine:

- Examination and identification of person living and dead; parts, bones, stains, etc.
- Medicolegal: Putrefaction, mummification, saponification, forms of death, causes, agencies, onset etc.
- Assaults, wounds, injuries and death by violence.
- Asphyxial death
- Blood examination, blood stains, seminal stains:
- Burns, scalds, lighting stroke etc.
- Starvation, pregnancy, delivery, abortion,
- Infanticide, sexual crimes,
- Insanity in relation to the State life and accident insurance.

Toxicology

- A separate course of lectures dealing poisoning in general, the symptoms and treatments of various poisons, post-mortem appearance and test should be given,
- Drugs & Cosmetics Act, Drugs Control Act, Drugs and magic Remedies (Objectionable Advertisements) Act, Medicinal and toilet preparations Act, Relevant sections of Indian Penal Code dealing with offences related to drugs and poisons.
- Study of the following poisons:- Mineral Acids (Sulphuric, Nitric, Hydrochloric, Oxalic and Carbolic acid), Phosphorus, Corrosive sublimate, Arsenic, Lead and its compound, Organophosphorus compounds, Abrus Precatorius, Snake poisoning, Opium and its alkaloids, Alcohol, Cocaine, Kerosene, Datura, Cannabis, Nux Vomica, Hydrocyanic acid, Prussic acid, Aconite, Cerebra thevatia, Nerium odorum, Oleander, Carbon monoxide, Carbon dioxide, etc

4. Medico legal post-mortem:

Recording post mortem appearance, forwarding materials to chemical examiner: Interpretation of laboratory and chemical examiner's findings. Students who are attending a course of lecture in forensic medicine should avail themselves of all possible opportunities of attending medico-legal post-mortems conducted by the professors of forensic medicine. It is expected that each student should attend at least 10 post-mortems.

5. Demonstration/ Practical:

(1) Weapons, (2) Organic & Inorganic poisons (3) Poisonous plants (4) Charts, diagram, models, x-ray films etc. of medico-legal interest.

FORENSIC MEDICINE & TOXICOLOGY
TEACHING PLAN FOR II B.H.M.S

TOTAL THEORY HOURS 60 HRS

TOTAL PRACTICAL HOURS 40 HRS
TUTORIALS/SEMINARS 20HRS

INTRODUCTION- COURTS- MEDICAL EVIDENCE
CCH ACTS RIGHT AND PRIVILEGES OF MO ETC.
IDENTIFICATION

FORENSIC THANATOLOGY
IDENTIFICATION

INJURY- MECHANICAL, THERMAL, CHEMICAL,
LIGHTNING ETC.

STARVATION
BLOOD STAINS, SEMINAL STAINS
POST MORTEM EXAMINATION
ASPHYXIA DEATH- DROWNING, HANGING, THROTTLING
AND OTHER ASPHYXIAL DEATHS

VIRGINITY
IMPOTENCY, STERILITY
RAPE
ABORTION
PREGNANCY
DELIVERY

ARTIFICIAL INSEMINATION

INFANTICIDE
PRACTICAL
FORENSIC PSYCHIATRY
1ST AVERAGE EXAM

TOXICOLOGY IN GENERAL
PRACTICAL

DELIRIANT POISONS
SOMNIFEROUS POISONS
PRACTICAL

INEBRIANT POISONS
CORROSIVES
GASEOUS POISONS
PRACTICAL

CYANIDES& CARDIAC POISONS
ORGANO PHOSPHOROUS COMPOUNDS
METALLIC POISONS
NON-METALLIC POISONS

MODEL QUESTION PAPER

FORENSIC MEDICINE AND TOXICOLOGY

TIME: 3 HOURS MAX MARKS: 100

SHORT ESSAYS:

1. CLASSIFY INJURIES? WRITE IN DETAIL THE FEATURES, TYPES AND MEDICO-LEGAL ASPECTS OF INCISED WOUND?
2. WRITE DOWN THE ACTION, SIGNS AND SYMPTOMS, TREATMENT, MEDICO-LEGAL ASPECTS AND POST-MORTEM APPEARANCE OF ORGANOPHOSPHORUS POISONING?

(2 X 10 = 20 MARKS)

SHORT NOTES:

3. M.T.P ACT
4. SIGNS OF LIVE-BIRTH
5. INQUEST
6. PLUMBISM
7. RULE OF NINE
8. SUMMONS
9. GRIEVOUS HURT
10. BERTILLION SYSTEM
11. RULE OF HASSE
12. DRUGS AND COSMETICS ACT (10 X 5 = 50 MARKS)

VERY SHORT ANSWERS:

13. DIFFERENTIATE ARSENIC POISONING AND CHOLERA
14. DIFFERENTIATE NUX VOMICA POISONING AND TETANUS
15. PROFESSIONAL MISCONDUCT
16. ABRASION COLLAR
17. PUNISHMENT FOR RAPE
18. MODES OF DEATH
19. RIGOR MORTIS
20. LITCHENBERG'S FLOWERS
21. SIGNS OF RECENT DELIVERY

22. MC NAUGHTEN RULE

(10 X 3 = 30 MARKS)

Answer key:

1. Classification of injuries: Mechanical, Thermal, Chemical, Physical etc. Causation of incised wound – characters of an incised wound (margins, width, length, shape, haemorrhage, direction) – Calculation of age of an incised wound – Medicolegal aspects of an incised wound (Suicidal, homicidal, accidental)
2. Action of organophosphorus compounds (Phosphorylation of acetyl cholinesterase) – Signs and Symptoms (Muscarinic and nicotinic effects) – Treatment (Use of oximes and atropine) – Prophylaxis (Protective measures advised to farmers to prevent organophosphorus poisoning)
3. MTP Act, 1971 – Indications & Rules explained in MTP act for terminating a pregnancy
4. Changes seen in an infant's body helping to differentiate a still-born with a dead-born (Changes in lungs, middle ear, shape of chest and position of diaphragm, changes in stomach and intestines, other less important signs of live-birth like meconium, caput succedaneum, umbilical cord changes etc)
5. Inquest – S.174, Cr.P.C, procedure for conducting an inquest, different types of inquest (police and magistrate inquest and its indications), preparation of F.I.R
6. Plumbism – Chronic lead poisoning – causes, signs and symptoms, prophylaxis and treatment of lead poisoning.
7. Wallace rule of nine – to determine the extent of burn – division of body into 11 parts each having 9 % and 1 % for external genitalia.
8. Summons – S.61 – 69 Cr.P.C – definition, rules, procedure of issuing summons, punishment for non compliance of summons.
9. Grievous Hurt – S. 320, IPC – a brief explanation of the 8 points enumerated in S.320 IPC.

10. Datylography = finger print system – history, classification of finger prints, identification of persons using this data.
11. Rule of Hasse – rough method of calculating the age of foetus
12. Drug's and Cosmetic Act, 1940 – legislation, DTAB (Drugs Technical Advisory Board), CDL (Central drugs Laboratory) – Different schedules of drugs, Procedure to be followed while selling a drug.
13. Differentiate Arsenic poisoning and cholera based on the GIT symptoms.
14. Differentiate Nux vomica poisoning and tetanus based on the nervous system and muscle changes (convulsions, spasms)
15. Professional misconduct – definition, citing 5 – 10 examples
16. Abrasion collar – mechanism of causation – features of abrasion collar – medico-legal importance
17. Punishment for rape – S. 376 IPC, punishment for committing rape, gang-rape, custodial rape and rape on a wife by a husband.
18. Modes of death = Asphyxia, coma, syncope, Briefly explaining the causes, signs and symptoms to identify the different modes of death.
19. Rigor mortis = causative factor, features, time of appearance and disappearance, various conditions simulating rigor-mortis.
20. Litchenberg flowers = Electrical high voltage burns – causation & features
21. Lochia = features, different types, time of appearance and its medico-legal importance
22. Mc Naughten rule = History, S. 84, IPC, medico-legal aspects of Mc Naughten Rule

LIST OF REFERENCE BOOKS FOR FORENSIC MEDICINE AND TOXICOLOGY

1. Modi's Medical Jurisprudence And Toxicology – Jaising.P.Modi
2. Essentials Of Forensic Medicine And Toxicology – Narayana Reddy
3. Principles of Forensic Medicine – Apurba Nandy
4. Modern Medical Toxicology – V.V. Pillay
5. Forensic Medicine – P.V.Guharaj
6. A Textbook of Forensic Pharmacy – B.M.Mithal

ORGANON OF MEDICINE & PRINCIPLES OF HOMOEOPATHIC PHILIOSOPHY

I. Hahnemann's Organon of Medicine Aphorism : 1 to 145

II. The purpose of Homoeopathic case taking is not merely collection of symptoms but comprehending the (A) person in wider Dimensions with the correct appreciation of the factors responsible for the genesis and maintenance of illness i.e. Fundamental cause

Predisposing cause, Maintaining cause & One Sided Diseases

There should be compulsory case taking term for each student wherein he learns to 'build up Portrait of the disease by undertaking:

1. Evolutionary study of the patient comprising of well defined characteristics
2. Studying individual in his life-span and in relation to his family environment and work.
3. Processing of he interview and the entire case so as to grasp the principles of Management of these patients.

He should be taught to classify various symptoms which he has elicited in his case taking. He puts down his evaluation of those characteristics. His capacity for analysis and synthesis should evolve. In appendix, Analytical paper' for symptom classification and Evaluation is attached. If practiced properly, has potential to improve analytical faculty of the student.

Physician, Teaching Staff, R.M.O. and House staff shall spend enough time with the student and interns and scrutinize of their written cases, discussing mode of interview and processing of the case.

There should be standardization in imparting training in Analysis and Evaluation. Each Institute shall keep the standard guideline of Case-taking.

Guidelines Analysis - Evaluation of objectives of Analysis, Evaluation of Symptoms

1. To individualize the case so as to prepare an effective totality this allows us to arrive at the Similimum, prognosis the case, and advise management and impose necessary restrictions on mode of life and diet.

2. To infer about the state of susceptibility by appreciating the quality of characteristic state of susceptibility- and diagnosis about miasmatic state would allow physician to formulate comprehensive plan of treatment.

3. Order of evaluation of the characteristics of the case would become stepping stone for the reportorial totality

III. Classification of Symptoms

Their scopes and limitations in arriving as a totality.

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

(i) Thorough grasp over the underlying dynamics; Psychological, Psysiological, Pathological aspects.

(ii) This would demand thorough comprehension over the evolution of Disease, taking into account the Fundamental, exciting & Maintaining Causes.

(iii) Knowledge of socio-cultral background is quite imperative for correct analysis and evaluation.

(iv) Details regarding Symptomatology can be comprehended by referring to the classical books in philosophy.

The Department of Organon & Philosophy while training in Case taking - shall co-ordinate with various other departments where student is sent for the pre-clinical and clinical training. This would ensure not only streamlining of the clinical Centers but also cultivate Homoeopathic perspective when student is attending other special clinics.

Evaluation Examination:

1. Student's performance shall be evaluated periodically. There shall be periodical class tests and internal (theory and practical) examinations in each academic year. The concerned teaching staff shall file his general report on the conduct of internal examinations and also on student's performance, which shall be discussed in departmental and inter-departmental meetings.

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

There shall be provisions for internal assessment of all these examinations and journal work in the Second, Third and Fourth BHMS examinations respectively.

Topics of Study shall consist of:

1. Organon of Medicine Aph 1 - 145 with reference to Kent's lectures 1 to 17

2. Classification, Analysis and Evaluation of symptoms & Totality of symptoms with reference to Hahnemann, Kent, H.A Roberts & Stuart Close

(a) Kent Chapters 22-33 & 35

(b) H.A Robert 1-12 & 14, 15 & 17

(c) S. Close - 1-5, 7, 11 & 12

TEACHING PLAN
II BHMS
Total Hrs: 135

I Semester-67 hrs

Aphorism 71 to 104 - 21 hrs

Kent - Chapters 1 to 17 and 22 to 27 - 20 hrs

Stuart Close - Chapters 7,11,12 - 9 hrs

H.A. Robert - Chapters 1 to 11 - 11 hrs

Examination - 6 hrs

II Semester - 68 hrs

Aphorism 105 -145 - 22 hrs

Kent - Chapters 28 to 33 and 35 - 14 hrs

H.A Robert - Chapters 12, 14, 15 and 17- 8 hrs

Stuart Close - Chapters - 1 to 5 - 12 hrs

Examination - 12 hrs

Practical and clinical hours 95hrs

Tuitorial/Seminar 30hrs

Model Question Paper

ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY

Time 3 hrs **Total Marks 100**

I Essay

1 Define vital force, explain concept of Kent and the qualities predicated to ?

2 Classification of disease according to Hahnemann 3+3+4 = 10

II Short Notes

1. Difficulties in chronic case taking
2. Define psora & explain secondary manifestations of psora
3. Idiosyncrasy
4. Susceptibility
5. Totality of symptom
6. Record keeping
7. Pseudo chronic disease
8. Primary action & Secondary action
9. Preparation of drugs for proving
10. Thorough proving drug 10 x 5 = 50 marks

III. Short Notes

1. Qualities of Physician for case taking
2. Genus epidemicus
3. Surrogates
4. Logical totality
5. True materia medica
6. Ideal prover
7. Diet in drug proving
8. Chief complaints and auxillary
9. Albert von Haller
10. Dose in drug proving 10x3 = 30 marks

Scheme of Valuation

ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY

Essay
1 Define vital force (§9), Simple substance according to Kent
2 Explain according to §72 to §81

Short Notes
1 §91 to §96
2 §80, §81
3 §117, Clinical importance
4 §30, §31, §32. Explain according to philosophy
5 §7. Explain according to Stuart Close.
6 Kent chapter 27
7 §77
8 §63, §64
9 §123
10 §135.

Prescribed Texts and references

List of Text Books for II BHMS

1 Organon of Medicine 5th and 6th translated with an appendix by R E Dudgeon
2 Lectures on Homoeopathic Philosophy by James Tyler Kent
3 Principles and art of cure by Homoeopathy by H A Roberts
4 Genius of Homoeopathy by Stuart Close

List of reference books

1 Principles of Homoeopathy by Garth Boericke
2 A Commentary on Organon of Medicine by B K Sarkar
3 Essays on Homoeopathy by B K Sarkar
4 Samuel Hahnemann his Life and Times by Trevor M Cook
5 Life of Christian Samuel Hahnemann by Rosa Waugh Hobhouse
6 Life and Letters of Hahnemann by Bradford
7 Life of Hering Knerr
8 Homoeopathy Medicine of the New Man by George Vitholkas
9 The Science of Homoeopathy by George Vitholkas
10 The Man Unknown by Alexis Carrel
11 A Comparison of Chronic Diseases by Phyllis Speight
12 Miasmatic Diagnosis by S K Banerjee
13 Miasmatic Diagnosis by K P Mazumdar
14 Notes on Miasma by P S Ortega
15 Lectures on Theory and Practice of Homoeopathy by R E Dudgeon
16 The Art of Case Taking and Practical Repertorisation in Homoeopathy by R P Patel
17 History of Medicine byDivan Harischand
18 Glimpses of History of Medicine by D D Banerjee
19 Lesser Writings by Hahnemann

20 Lesser Writings by J T Kent
21 Lesser Writings by Farrington
22 Lesser Writings by Boeninghausen
23 Organon of Medicine 5th and 6th edition by S Hahnemann Corrected, Retranslated and Redacted by Dr Mahendra Singh and Dr Subhas Singh
24 Hahnemann's Homoeopathy by Peter Morrell
25 Art of Interrogation by Pierre Schmidt

HOMOEOPATHIC MATERIA MEDICA

Application of Materia Medica should be demonstrated from cases in the OP and IP departments

List of drugs included in the Syllabus of IInd BHMS Examination

ıddition to the list of drugs for the Ist BHMS Examination , the following additional drugs are inc
labus of Materia Medica for the II BHMS Examination.

Acetic acid	Actea Racemosa
Agaricus Mus	Agnus Castus
Alumina	Ambra Grasea
Ammonium carb	Ammonium mur
Anacardiam	Apocynum
Ars Alb	Ars iod
Aurum met	Arum tri
Bapticia tinct	Beriberis vulg
Bismuth	Borax
Bromium	Bovista
Cactus	Calc Ars
Calendula	Camphora
Cantharis	Chelidonium Maj
Conium mac	Digitalis
Drosera	Ferrum met
Gels	Helle
Hep sulph	Ignatia
Kali brom	Kreosot
NAtrum carb	Nux Mosch
Opium	Petroleum

Phosphorus	Phytolacca
Platinum	Sepia
Spongia	Verat alb
Kali mur	Kali phos
Mag phos	Nat sulph

Teaching Plan – IInd BHMS

Theory – 100 hrs

Clinical / Seminar / Tutorial - 100 hrs

Month	Topic
1st month of admi	Acetic acid / Actea Racemosa / Agaricus / Agnus castus / Alumina
2nd	Ambra grisea / Ammonium carb / Ammonium mur / Anacardium / Ars Alb
3rd	Apocynum / Ars iod / Aurum met / Arum Triph / Baptisia
4th	Berberris Vulg / Bismuth / Borax / Bromium / Bovista / Mag phos
5th	Cactus / Calcarea Ars / Calendula / Camphor / Cantharis / Natrum sulph
6th Month - Ist Average Examination	
7th	Chelidonium / Conium / Digitalis / Drosera / Ferrum met
8th	Gelsemium / Helleborus / Hepar sulph / Ignatia / kali brom
9th	Kreosote / Natrum carb / Nux Moschata / Opum / Petroleum
10th	Phosphorus / Phytolacca / Platina / Sepia / Spongia
11th	Veratrurum alb / Kali mur / Kali phos
11th Month - IInd Average Examination	
12th Month - University Examination	

MODEL QUESTION PAPER
Dept Of Materia Medica- II nd BHMS Degree Examination

Time: 3hrs
Marks: 100

I)

1) Give a pen picture of SEPIA lady (10)

2) Describe the salient features of the drug PHOSPHORUS both in mental & physical plane so as to complete the picture (10)

II) Write Notes On (5X10=50)

1) Cantharies- Urinary Affections
2) Spongia- Respiratory Complaints
3) Petroleum –Skin
4) Ignatia-Mind
5) Baptisia-Fever
6) Aurum Met- Cardiovascular Affections
7) Calendula-Injury
8) Alumina- GIT Affections
9) Chelidonium- Liver Affections
10) Phytolacca- Throat Affections

III) Write Short Notes on (3X10=30)

1) Gelsemium- Headache
2) Camphor- Cholera
3) Actea Racemosa- Female complaints
4) Opium- GIT
5) Agaricus- CNS Affections
6) Agnus Castus- Male Sexual System
7) Nux Moschata- Mind
8) Mag Phos- Pain

9) Apocyanum –Dropsy
10) Kreosotum- Urinary Affections

II nd BHMS- Schema of Valuation

1)Sepia- Narrow Pelvis,yellow saddle across the face (1)
Physical general- Chilly (1)
Mental general-Indifference(1)
Particulars & Modalities- Headache (7)
Tongue
Urinary
Uterine Affections
< & >ing factors

2) Phosphorus
Constitution- Tall slender, delicate eyelashes(1)
Mental generals- Oversensitiveness(1)
Physical generals- Burning, haemorrhage, empty all gone feeling(1)
Particulars & Modalities- Head
Face, Eyes, Respiratory, GIT (7)
< & >ing factors

II) Write Notes On
1) Canthatries- Urging, burning pain
2) Spongia- Dry cough,Modalities
3) Petroleum skin- Site, Suppuration & Modalities
4) Ignatia Mind- Contradiction
5) Baptisia Fever- Typhoid fever, delirium, tongue
6) Aurum Met heart- Sensn as if heart stood still, palpitation
7) Calendula injury- Surgical, loss of blood, excessive pain
8) Alumina GIT- Constipation, cravings
9) Chelidonium- Pain under scapula, tongue, constipation, thirst
10) Phytolacca- Character of pain-burning, can't drink hot fluids

III) Write Short Notes On
1) Gelsemium- Headache- beginning in cervical spine, blindness with modalities < bad news, tobacco smoking
2) Camphor- Dry cholera, coldness of surface

3) Actea Racemosa- Increase of mental symptoms during menses,false labour like pains, shivers in 1st stage.
4) Opium GIT- Constipation
5) Agaricus CNS- Epilepsy, stumbling gait
6) Agnus castus- Male Sexual System- Complete impotence after frequent attacks of gonorrhoea.
7) Nux Moschata -mind- Absent minded, changeable humor, loss of memory
8) Mag Phos –pain- lightning like, modalities
9) Apocyanum –dropsy- Dropsy with thirst
10) Kreosotum- Urinary affections- Can urinate only while lying during 1st sleep, eneuresis.

List of Text books

1. Lectures on Homoeopathic Materia Medica – Kent JT
2. Clinical Materia Medica - Farrington EA
3. Keynotes and Characteristics with Comparisons – Allen HC
4. Condensed Materia Medica – Hering C
5. Comparative Materia Medica – Farrington EA
6. A Synoptic key of the Materia Medica – Boger CM
7. A study on Materia Medica - NM Choudhuri
8. Leaders in Homoeopathic Therapeutics – Nash EB
9. Homoeopathic Drug Pictures - ML Tyler
10. The Materia Medica of Some Important Nosodes - Allen HC
11. Twelve tissue remedies of Schussler – Boericke & Dewey
12. Pocket Manual of Homeopathic Materia Medica – Boericke W

List of Reference Books

1. Materia Medica Pura – Hanemann S
2. The Guiding Symptoms of our Materia Medica – Hering C
3. The Encyclopedia of Pure Materia Medica – Allen TF
4. Text Book of Materia Medica with Therapeutics - Cowperthwaite

5. A text book of Materia Medica – Lippe AD
6. Plain Talks on Materia Medica with Comparisons – Pierce WI
7. A dictionary of Practical Materia Medica (3 vols) – Clarke JH
8. Lectures on Materia Medica – Dunham C
9. Masterkey to Materia Medica – Bhanja KC
10. A Manual of Pharmacodynamics – Hughes R
11. Materia Medica Viva – Vithoulkas G
12. A Manual of Materia Medica Therapeutics and Pharmacology - Blackwood AL

SECOND BHMS EXAMINATION

(i) No candidate shall be admitted to the Second BHMS Examination **unless he has passed the First BHMS** examination and he/she has required attendance as per regulation 7 (iii) to the satisfaction of the , head of the Homoeopathic Medical College.

(ii) The Second BHMS examination shall be held at the end of 30th month of admission to First BHMS.

(iii) The minimum number of hours for lecture, demonstration/practical and seminar classes in the subjects shall be as under:

SECOND BHMS COURSE -DISTRIBUTION OF HOURS

	Theory	Practical/Clinical				
Subject	Theory including internal exam	Practical/Clinical including internal Exam	Tutoria	Se-minar	Total	Grand Total
Pathology and Microbiology including Parasitology Bacteriology and Virology	210	90	10	20	120	330
Forensic Medicine & Toxicology	60	40	10	10	60	120
Organon of Medicine and Principles of Homoeopathic Philosophy	135	95	10	20	125	260
Homoeopathic Materia Medica	100	95	10	20	125	225

Surgery including ENT, Eye Dental and Homoeo therapeutics	75	75	Nil	Nil	75	150
Obstetrics & Gynaecology Infant care and Homoeo therapeutics	75	75	Nil	Nil	75	150
Practice of Medicine and Homoeo. Therapeutics	75	75	Nil	Nil	75	150
Case taking	50	Nil	Nil	Nil	Nil	1435

(iv) Examinations in Pathology and Microbiology shall consist of two theory paper and one practical including oral. Identification of microscopic slides and specimens shall be apart of practical examination.

(v) Examination in Forensic Medicine and Toxicology shall consist of one theory paper and one oral examination including identification and spotting of specimens.

(vi) Examination in Organon of Medicine, Principles of Homoeopathic Philosophy and Psychology shall consist of one theory paper and one oral examination.

(vii) Examination in Materia Medica shall consist of one theory paper and one practical including oral examination.

(viii) In order to pass the Second BHMS examination, a candidate has to pass all the subjects of the examination.

(ix) Full marks for each subject and the minimum number of marks required for passing should be as follows:

SECOND BHMS COURSE- DISTRIBUTION OF MARKS

Subject	THEORY				ORAL & PRACTICAL					Grand Total	Aggregate minimum for pass
	Theo	IA	Total	Pass Min	Uni Pract	Exam Viva	IA	Total	Min For Pass		
FM	100	20	120	60	50	50	20	120	60	240	120
PATHO	200	40	240	120	100	100	40	240	120	480	240
MM	100	20	120	60	50	50	20	120	60	240	120
OM	100	20	120	60	50	50	20	120	60	240	120

III BHMS
SYLLABUS
SURGERY

Homoeopathy as a science need clear application the part of the physician to decide about the best course of actions required to restore the sick to health.

Knowledge about surgical disorders is required to be grasped well, so that the homoeopathic physician is able to-

1. Diagnose common surgical cases
2. Institute homoeopathic medical treatment wherever possible
3. Organise pre and post-operative homoeopathic medical case as total/partial responsibility
4. Organise a complete homoeopathic care for restoring the susceptibility of the patient to normalcy

The conceptual clarity and database needed for above is possible only by an effective co-ordination of the care of the patients.

The study shall include training on:

1. Knowledge of causation, manifestation, maintenance and prognosis of health.
2. Disorders related to surgery with stress on miasmatic evolution.
3. Bedside clinical procedures.
4. Co-relation of applied aspects with factors which can modify the course of illness, including medicinal and non-medicinal measures.

The above can assist a Homoeopathic Physician who will be a Rational Physician, not one locked up in whirlpools of rare conditions, but one can apply all the basics for an ailing individual. It will also facilitate him for Individualization of the patient necessary for final Homoeopathic management.

Following is a plan to achieve the above. It takes into account about the II[second] and III[third] year BHMS syllabus and respective stage of development.

Some points are made about coordinating with other departments [for a better training in Surgery, ultimately]

That the *SURGERY* as a subject will include:

1. Principles of Surgery.
2. Fundamentals of Examination of a patient with surgical problems.
3. Use of common instruments for examination of a patient, asepsis, anti-sepsis, dressing, plaster, operative surgery etc.

4. Practical instruments, training in minor surgical methods.
5. Physiotherapy measures.
6. Include also applied study in Radiology, Diagnostics etc.
7. What are surgical cases? Orientation towards case-taking and examination of:
   a) Surgical patients. [Details to be done as part of practical training]
   b) Applied anatomy and physiology- its importance, demonstration with good examples.
8. Basics of general surgical procedures.

The basic topics in Surgery are to be followed up with relevant systemic topics so as to cover:

1. All common clinical conditions of various parts
2. Their evolution, examination methods and diagnosis.
3. Their investigations and prognosis.
4. Their management, especially principles.
5. Relevant minor surgical procedures.
6. Preventive aspects.

Management of common surgical procedures and emergency procedures

To be taught in theory and practice:

1. Wounds, abscesses etc- incision and drainage
2. Dressings and plasters
3. Suturing of various types.
4. Pre-operative and post-operative care.
5. Management of post-operative complications.
6. Management of shock.
7. Management of acute haemorrhage.
8. Management of acute injury case.
9. Management of a head injury case.

The above is utmost necessary for any physician

The above basically consists of mechanical skilled procedure, supplementation, etc measures which in no way interferes with scope and application of Law Of Similars.

The study will start in the second BHMS and complete in the third BHMS

The written examination shall consist of three papers

PAPER 1 & II
II BHMS

1. Infections and inflammations
   All acute and chronic infections such as Clostridia, Salmonella, Mycobacteria
   All viral and non-viral infections including AIDS affecting various parts of the body
2. Haemorrhage and shock
   Types of haemorrhage, measurement of blood loss, management of haemorrhagic shock and blood transfusion.
   Types of shock and management

   Fluid and electrolyte management- fluid therapy, hypovolemia, prevention of organ failure
3. Skin and burns
   Various types of infections ofskin-boils, carbuncles, cellulitis, erysipelas, lupus, corns, warts, callosities, sebaceous cysts etc.
   Causes, classification, complications and management of burns.
   Scar and its deformities.

III BHMS

1. Tumours and cysts
   Benign and malignant tumours on the surface like Adenoma, Lipoma, Fibroma, Neurofibroma.
   Various malignant tumours like Carcinoma, Sarcoma- their clinical features, grading, spread and management.
   Type of cysts
2. Injuries and diseases of nerves
   Cranial, peripheral, spinal and specific nerve injuries and diseases.
3. Injuries and wounds
   Accidental, mechanical and biological wounds.
   Pathophysiology of wound healing and factors interfering with wound healing.
   Injuries of fat, bones, joints, warfare injuries, civil injuries, road traffic injuries.
   Cervical injuries, sterna and rib injuries,intra abdominal and diaphragmatic injuries
   Pelvic fracture and urinary tract injuries, hip and spinal injuries.
4. Diseases of muscles
   Acute and chronic injuries to muscles and tendons.
   Diseases and tears of various tendons-biceps, patellar,Achilles etc
   Ganglion
5. Diseases of bursa
   Acute and chronic bursitis, baker's cyst
6. Diseasesof lymphatic system

Acute lymphangitis, lymphoedema,filariasis, diseases of lymph nodes, lymphomas.

7. Diseases of arteries
   Acute and chronic arterial stenosis and occlusion
   Vasospastic diseases of arteries- varieties of gangrene and their management.
8. Diseases of veins
   Superficial and deep vein thrombosis, varicose veins.
9. Diseases of spleen
   Spleenomegaly, idiopathic thrombocytopenic purpura, hemolytic anaemia

10.General diseases like hernia.

11. Abdominal and gastrointestinal diseases

Diseases of oral cavity, tongue and salivary glands, stomach, liver, gall bladder, pancreas, peritoneum, omentum, mesentery, small and large intestines, appendix, intestinal obstruction, diseasesof rectum and anal canal.

All the above to be followed up with respective therapeutic topics

PAPER II

1. Diseases of head and neck
   Diseases of scalp, skull, head
   Head injuries, intracranial disorders, neoplasms, vascular formations, aneurysms, epilepsy, HIV
   Diseases of branchial apparatus, cervical rib, cervical lymphadenitis
   Primary malignant tumours of neck.
2. Diseases of thyroid
   Ectopic thyroid, Tyroiditis, Hypothyroidism
   Thyroid enlargement- simple and toxic
   Neoplasm of thyroid
   Thyroid function tests.
3. Diseases of breast
   Diseases of nipple- abnormal discharges from nipple
   Infections and inflammations
   Benign and malignant tumours of breast
4. Diseases of kidney, ureter, bladder, prostate, seminal vesicles, testes, scrotum, penis etc
5. Ophthalmology
   Common diseases, accidents, injuries, etc of various parts of eyes. Clinical examination of eyes[various parts] using various instruments including ophthalmoscope. Common eye operations and relevant care of the patients
6. Orthopaedics
   Diseases of bones and joints.
   Fracture- pathology of fracture and fracture healing, clinical diagnosis and complications.
   Management of fracture of individual bones and joints.
   Acute and chronic infections of bones and joints.
   Benign and malignant tumours of bones.
   Physiotherapic procedures

7. Thoracic surgery
   Thoracic neoplasms-benign and malignant
   Tumours of mediastinum, lungs and diaphragm.
   Surgical diseases of heart and pericardium.
8. Oto-rhino-laryngology-[ENT]
   Diseases of Ear, Nose, Throat, Tracheobronchial tree and oesophagus, such as infections, inflammations, injuries, tumours, cysts etc.
9. Dentistry
   Diseases of teeth, gums, jaws and maxilla.

10.Congenital anomalies of all organs including lips and palate.

All the above to be followed up with respective therapeutic topics also

PAPER III

Homoeopathic therapeutics [based on the syllabus for Materia Medica of First, Second and Third BHMS courses.

EXAMINATION

It will be conducted in the Third BHMS at the end of 2 years of course of study in Theory and Practical training of Surgery.

Eligibility for examination will include submission of 10 complete case histories, 5 each from the study in the Second and Third BHMS.

PRACTICAL AND CLINICAL EXAMINATIONS

The examination will include one case to be prepared and presented by the examinees. The assessing examiners shall stress on:

1. Comprehensive Case-taking
2. Bedside training
3. Adequate grasp over the process of diagnosis
4. Adequate grasp over principles of management

TEACHING PLAN

Topics	Distribution of hrs
PAPER I	
II BHMS	
1. Infections and inflammations	25 hrs
2. Haemorrhage and shock	25 hrs
3. Skin and burns	25 hrs
	Total 75 hrs
III BHMS	
1. Tumours and cysts	10 hrs
2. Injuries and diseases of nerves	5 hrs
3. Injuries and wounds	10 hrs
4. Diseases of muscles	3 hrs
5. Diseases of bursae	2 hrs
6. Diseasesof lymphatic system	5 hrs
7. Diseases of arteries	5 hrs
8. Diseases of veins	5 hrs
9. Diseases of spleen	5 hrs
10. General diseases like hernia	5 hrs
11. Abdominal and gastrointestinal disorders	15 hrs
PAPER II	
1. Diseases of head and neck	10 hrs
2. Diseases of thyroid	10 hrs
3. Diseases of breast	10 hrs
4. Diseases of kidney, ureter, bladder seminal vesicles, testes, scrotum, penis etc	10 hrs
5. Ophthalmology	10 hrs
6. Orthopaedics and physiotherapy	10 hrs
7. Thoracic surgery	10 hrs
8. Oto-rhino-laryngology	10 hrs
9. Dentistry	5 hrs
10. Congenital anomalies of all organs	5 hrs
	Total 160 hrs

ACADEMIC PROGRAMME III BHMS

I MONTH

Tumours and cysts
Benign and malignant tumours
Benign- adenoma, lipoma, fibroma, neurofibroma
Cranial injury
Peripheral and spinal injury

II MONTH

Accidental, mechanical and biological wounds
Pathophysiology of wound healing
Carcinoma- types, methods of spread, grading and staging
Sarcomas
Specific nerve injury and diseases
Factors influencing wound healing
Types of wounds
Management of wounds
Scars and its deformities

III MONTH

Injuries of fat, bones, joints
War wounds and road traffic wounds
Types of cysts
Cervical, sternal and rib injuries
Intra abdominal and diaphragmatic injuries
Diseases of muscles, tendons and fasciae
Diseases of lymphatic system- of lymph nodes, Hodgkin's lymphoma

IV MONTH

Diseases of bursa
Pelvic fracture and urinary tract injuries
Hip and spinal injuries
Diseases of arteries
Diseases of veins
Splenomegaly
Idiopathic thrombocytopenic purpura
Hemolytic anaemia
Hernia
Diseases of oral cavity, oesophagus and stomach

V MONTH

Diseases of liver, biliary tract and pancreas
Diseases of scalp, skull, head
Head injuries
Intracranial disorders
Cervical rib, malignant tumours of neck
Diseases of peritoneum, omentum, mesentery
Neoplasms of head and neck
Ectopic thyroid, thyroiditis
Hypothyroidism
Thyroid enlargement
Neoplasms of thyroid
Thyroid function tests

VI MONTH FIRST SEMESTER EXAMINATION
VII MONTH

Diseases of nipple
Infections and inflammations of breast
Benign and malignant tumours of breast
Diseases of small and large intestines
Diseases of appendix
Diseases of bones and joints
Intestinal obstruction

VIII MONTH

Diseases of rectum and anal canal
Fractures
Types of fracture
Pathology of fractures and fracture healing
Clinical diagnosis of fracture
Complications of fracture
Management of fracture of individual bone and joints

IX MONTH

Thoracic neoplasms
Benign and malignant neoplasms of thorax
Tumours of mediastinum
Tumours of diaphragm
Acute infections of bones and joints
Chronic infections of bones and joints

Benign tumours of bones
Malignant tumours of bones

X MONTH

Surgical diseases of heart and pericardium
Diseases of ear
Diseases of nose
Diseases of throat
Infections of tracheobronchial tree and oesophagus
Inflammation and injuries of tracheobronchial tree and oesophagus
Tumours and cystsof tracheobronchial tree and oesophagus
Diseases of teeth and gums
Diseases of jaws and maxillae
Congenital anomalies of all organs including lips and palate

XI MONTH SECOND SEMESTER EXAMINATION
XII MONTH THIRD BHMS UNIVERSITY EXAMINATION

SURGERY
Text books

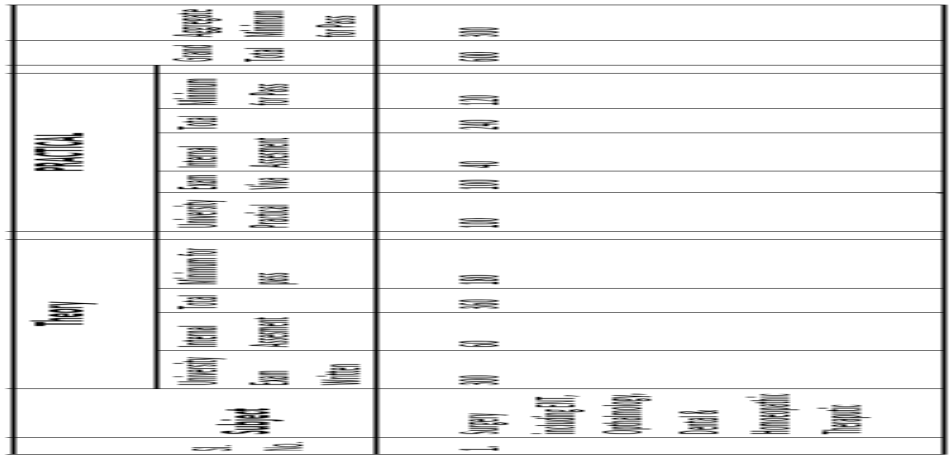
Short Practice of Surgery - Bailey & Love
Clinical methods in Surgery - Das

REFERENCE BOOKS

Chamberlane's physical signs and symptoms - Chamberlane
Operative Surgery - Das
Surgical Therapeutics - Gil Christ
Manual of diseases of the eye - May & Worth
Physical signs in clinical Surgery - Hamilton Bailey
Diseases of nose and throat - Ivins
Manual of surgery - Rose & Carles[2 vol]
Parson's diseases of eye - Stephen.H.Miller
Text book of ENT diseases - Mohammad Maqbool
Text book of ENT - Dhingra
Manipal's text book of surgery
Practical Homoeopathic therapeutics – Dewey
Pharmacodynamics - Richard Hughes
Select your remedy - William Boericke

BHMS Course Distribution of Hours
Surgery & Homoeopathic Therapeutics

Year	Theory	Practical				Grand Total
	Lecture including Internal Exams	Practical/Clinical including Internal Exams	Tutorial	Seminar	Total	
II BHMS	75	75	Nil	Nil	75	150
III BHMS	200	70	10	20	100	300



THIRD YEAR BHMS DEGREE EXAMINATION
SURGERY AND HOMOEOPATHIC THERAPEUTICS

Paper I

Time:3 hrs Max.marks:100

Instructions: Answer sections A and B Separately

Section A

1. What are the causes of haematemesis? Describe in detail about the aetiology, pathology, clinical features, investigations and management of chronic peptic ulcer. [10 marks]
2. Write short notes on:
   a) Chronic pancreatitis
   b) Gastro intestinal stromal tumour[GIST]
   c) Hepatocellular carcinoma
   d) Crohn's disease
   e) Dermoid cyst [5x5=25]
3. Write very short notes on:
   a) Bazin's ulcer
   b) Peripheral Occlusive Vascular disease
   c) Para-umbilical hernia
   d) Hypertrophic scar
   e) Tuberculous lymphadenitis [3x5=15]

SECTION B

4. Classify tumours. Differentiate benign and malignant tumours. [10 marks]
5. Write short notes on:
   a) Supracondyle fracture of humerus
   b) Internal haemorrhoids
   c) ERCP
   d) Intussuception
   e) Carcinoma of tongue [5x5=25]
6. Write very short notes on:
   a) Oro-antral fistula
   b) Hypovolemic shock
   c) Splenectomy

d) Varicose veins
e) Squamous cell carcinoma [3x5=15]

THIRD YEAR BHMS DEGREE EXAMINATION
SURGERY AND HOMOEOPATHIC THERAPEUTICS

Paper II

Time:3 hrs Max.marks:100

1. What are the causes of haematuria? Describe the aetiology, pathology, clinical features and investigations required for diagnosis. [10marks]
2. Write short notes on:
   a) Pterygium
   b) Tennis elbow
   c) Membranous conjunctivitis
   d) Varicocoele
   e) Excretory urography [5x5=25]
3. Write very short notes on:
   a) Osteomyelitis
   b) Primary thyrotoxicosis
   c) Extradural haematoma
   d) Cleft-lip
   e) Glaucoma [3x5=15]

4. Describe in detail about the aetiology, clinical varieties, clinical features,investigations and complications of chronic suppurative otitis media[CSOM] [10 marks]
5. Write short notes on:
   a) Bronchoscopy
   b) Periurethral abscess
   c) Cataract
   d) Epistaxis
   e) Mastitis [5x5=25]
6. Write very short notes on:
   a) Dental fistula
   b) Mastoiditis

c) Hydrocephalus
d) Scoliosis
e) DNS [3X5=15]

THIRD YEAR BHMS DEGREE EXAMINATION
SURGERY AND HOMOEOPATHIC THERAPEUTICS

Paper III

Time:3 hrs Max.marks:100

Instructions: Answer sections A and B separately

1. Name important remedies for goiter. Give indications of any 5 of the remedies in detail. [10marks]
2. Compare and contrast:
   a) Pulsatilla and Silicea in tonsillitis
   b) Gelsemium and Conium mac in Meniere's disease
   c) Thuja and Causticum in senile cataract
   d) Chelidonium and Bryonia in cholecystitis
   e) Symphytum and calendula in injuries [5x5=25]
3. Give the indications of:
   a) Chamomilla in otalgia
   b) Sulphur in haemorrhoids
   c) Apocynum in ascites
   d) Hepar.sulph in carbuncle
   e) Rhustox in lymphadenitis. [3x5=15]
4. What are the important drugs for peptic ulcer? Give the indications of any 5 drugs in detail. [10 marks]
5. Compare and contrast:
   a) Pulsatilla and Dulcamara in osteoarthrosis
   b) Carbo.veg and Phosphorus in haemorrhage
   c) Sanguinaria and Nitric acid in nasal polyps
   d) Hekla lava and Bell in dental abscess
   e) Cantharis and Apis in burns [5x5=25]
6. Give the indications of:
   a) Staphysagria in styes

b) Bryonia in hydrocele
c) Merc.cor in ulcerative colitis
d) Arnica in CSOM
e) Lycopodium in hernia [3x5=15]

KERALA UNIVERSITY OF HEALTH & ALLIED SCIENCE

CURRICULUM AND SYLLABUS
& SCHEME OF EXAMINATIONS
OBSTETRICS & GYNAECOLOGY

Gynaecology and obstetrics including infant care

The purpose of this study is to give training in special clinical methods or investigations and treatment of Gynaecological and Obstetric cases.
Homoeopathy can be offered in many cases related to development of foetus, all stages of pregnancy and familial disorders.
The problems studied herein constitute delicate phases of female patients and have strong correlation with their general wellbeing.
The study of this subject starts in II (second) BHMS and complete in III. (Third) BHMS. Examination will be held in III. (Third) BHMS.

The study will go according to the following plan:

II. BHMS
OBSTETRICS

1. A review of applied anatomy
2. A review of applied physiology
3. Development of intra uterine pregnancy
4. Diagnosis of pregnancy
5. Ante-natal care.

6. Abnormal pregnancy : introduction
7. Normal Labour
8. Introduction to abnormal labour
9. Postnatal care puerperal
10. Abnormal puerperal
11. Care of the New born

GYNAECOLOGY

1. Applied Anatomy and physiology
2. Gynaecological examination
3. Developmental abnormalities
4. Endocrinal axis: abnormalities
5. Uterine displacements

III. BHMS
OBSTETRICS

1. Abnormal Pregnancies: abortion,
   Molar pregnancy,
   Extra uterine pregnancy,
   Diseases of placenta and membrane,
   Toxaemia of pregnancy,
   Antepartum haemorrhage,
   Disorders of genital tract
   Retroversion,
   Prolapse,
   Tumours, etc.
   Multiple pregnancy
   Protracted gestation.
2. Common disorders and systemic diseases associated with pregnancy.
3. Labour:- Abnormal position and presentation,
   Twins,
   Prolapse of cord and limbs,
   Abnormalities in the action of uterus,

Abnormal conditions of soft parts,
Contracted pelvis,
Obstructed labour,
Complications of third stage of labour,
Injuries of birth canal

4. Common obstetrical operations
5. Abnormal puerperal infections

GYNAECOLOGY

Inflammation ulceration and trautic lesions of the female genital organs.
Malignant/ Non malignant growths,
Common gynaecological operations and radiotherapy.

Infant care
Neonatal hygiene
Breast feeding
Management of premature child
Asphyxia
Birth injuries
Common disorders of new born

EXAMINATION

It will be conducted in III. BHMS at the end of II year course of study.
Theoretical and practical aspects of Gynaecology and obstetrics
Eligibility for examination will include submission of 20 (twenty) completed cases of different types. (10 in Gynaecology and 10 in Obstetrics)

Paper –I: Obstetrics and infant care
Paper- II: Gynaecology
Paper-III: Homoeopathic Therapeutics

PRACTICAL AND CLINICAL EXAMINATION

The examinee will take and present one case.
The examiners shall stress on:

1. Comprehensive case taking

2. Bedside training
3. Adequate grasp over diagnostics
4. Adequate grasp over Management Principles

SECOND BHMS EXAMINATION

(i) No candidate shall be admitted to the Second BHMS Examination unless he has passed the First BHMS examination and he/she has required attendance as per regulation 7 (iii) to the satisfaction of the , head of the Homoeopathic Medical College.

(ii) The Second BHMS examination shall be held at the end of 30th month of admission to First BHMS.

(iii) The minimum number of hours for lecture, demonstration/practical and seminar classes in the subjects Gynaecology and Obstetrics shall be as under:

SECOND BHMS COURSE -DISTRIBUTION OF HOURS

	Subject	Theory including internal exam	Practical/Clinical including internal Exam	Tutorial	Seminar	Total	Grand Total
	Gynaecology and Obstetrics	75	75	-	-		150

THIRD BHMS EXAMINATION

(i) No candidate shall be admitted to the Third BHMS examination unless he has passed the Second BHMS examination and he/she has required attendance as per regulation 7 (iii) to the satisfaction of the head of the Homoeopathic Medical College.

(ii) The Third BHMS examination shall be held at the end of 42nd month of admission to First BHMS.

(iii) The minimum number of hours for lecture, demonstration/practical, clinical and seminar classes in the subjects Gynaecology and Obstetric shall be as under :

	Subject	Theory including internal exam	Practical/Clinical including internal Exam	Tutorial	Seminar	Total	Grand Total
	Gynaecology	200	70	10	20	100	300

and Obstetrics								

(v) Examination in Obstetrics & Gynaecology including infant care shall consist of three theory papers and one practical examination. One theory paper shall be exclusively on Homoeo therapeutics. The Practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skill on the specimens, models, instruments, and general appliances related to Obstetrics, scope of Homoeopathic therapeutics and examination and diagnosis of Gynaecological disease through clinical examination, X-ray and other common diagnostic techniques. The case studies reports of the students carried out during the course shall also be considered for the oral examination.

(viii) In order to pass the Third BHMS examination, candidates have to pass in all the subject of the examination.
(ix) Full marks for each subject and the minimum number of marks required for passing should be as follows:

THIRD BHMS COURSE -DISTRIBUTION OF MARKS

Subject	THEORY				ORAL & PRACTICAL					Grand Total	Aggregate minimum for pass
	University Exam Written	Int. Assessment	Total	Minimum For Pass	University Practical	Exam Viva	Int. Assessment	Total	Minimum For Pass		
Obstetrics & Gynaecology	300	60	360	180	100	100	40	240	120	600	300

TEACHING PATTERN

SL NO	CHAPTER	HOURS

1	A review of the applied anatomy	02
2	A review of applied physiology	02
3	Development of intra uterine pregnancy	04
4	Diagnosis of Pregnancy	06
5	Ante-natal care	03
6	Abnormal pregnancy- Introduction	01
7	Normal Labour	06
8	Abnormal Labour –introduction	01
9	Post natal care	03
10	Abnormal Puerperium	03
11	Care of newborn	02
12	Therapeutics	12
	Total	45

GYNAECOLOGY

Sl No	Chapter	Hours
1	Applied anatomy and physiology	04
2	Gynaecological examination	05
3	Developmental abnormalities	04
4	Endocrinal axis : abnormalities	04
5	Uterine displacement	08
6	Therapeutics	05
	Total	30

TEACHING PROGRAMME
II. BHMS

MONTH- 1

Obstetrics	A review of the applied anatomy
Gynaecology	Applied anatomy and physiology

MONTH-2

Obstetrics	A review of applied physiology
Gynaecology	Gynaecological examination

MONTH-3

Obstetrics	Development of intra uterine pregnancy
Gynaecology	Therapeutics

MONTH-4

Obstetrics	Diagnosis of Pregnancy
Gynaecology	Developmental abnormalities

MONTH-5 & 15 DAYS

Obstetrics	Ante-natal care
Gynaecology	Abnormal pregnancy

15DAYS

Assessments and examinations

MONTH-7

Obstetrics	Normal labour, abnormal Labour-introduction,
Gynaecology	Therapeutics

MONTH-8

Obstetrics	Post natal care
Gynaecology	Therapeutics

MONTH-9

Obstetrics	Abnormal puerperium
Gynaecology	Endocrinal axis abnormalities

MONTH-10

Obstetrics	Care of new-born
Gynaecology	Therapeutics

MONTH-11

Obstetrics	Therapeutics
Gynaecology	Uterine displacements

MONTH-12

Assessments and examinations

III. BHMS

OBSTETRICS

Sl No	Chapter	Hours
1	Abnormal pregnancies	
	Abortions	03
	Molar pregnancy	02
	Extra uterine pregnancy	04
	Diseases of placenta and membrane	03
	Toxaemia of pregnancy	06

	Antepartum haemorrhage	05
	Disorders of genital tract, retroversion, prolapsed, tumours , etc	05
	Multiple pregnancy, protracted gestation	03
2	Common disorders and systemic diseases associated with pregnancy	05
3	Labour	
	Abnormal position and presentation	04
	Twins	02
	Prolapse of the cord and limbs	02
	Abnormalities in the action of the uterus	02
	Abnormal conditions of soft parts	02
	Contracted pelvis, obstructed labour	05
	Complications of 3rd stage of labour	03
	Injuries of birth canal	02
4	Common obstetrical operations	04
5	Abnormal puerperium- Infections etc	03
	Therapeutics	35
	Total	90

INFANT CARE

1	Neonatal hygiene	02
2	Breast feeding	02
3	Artificial feeding	02
4	Management of premature child	02
5	Asphyxia	03
6	Birth injuries	02
7	Common disorders of newborn	07
	Therapeutics	15
	Total	35

GYNAECOLOGY

	Inflammation , ulceration and traumatic lesions of the female genital organs	10
	Malignant / Non Malignant growths	13
	Common Gynaecological operations and radiotherapy	02
	Pathology of conception	05
	Disorders of menstruation	10
	Therapeutics	25
	Total	65

TEACHING PROGRAMME
III.BHMS

MONTH- 1

Obstetrics	Abortion, Molar pregnancy, Extra uterine pregnancy
Gynaecology	Inflammation of genital tract/ therapeutics

MONTH-2

Obstetrics	Diseases of placenta and membrane, toxaemias of pregnancy, Ante partum Haemorrhage
Gynaecology	Traumatic lesions of genital tract/ Therapeutics

MONTH-3

Obstetrics	Disorders of genital tract, retroversion, prolapse, tumours, multiple pregnancy, protracted gestation.
Gynaecology	Non malignant growth of genital tract/ Therapeutics

MONTH-4

Obstetrics	Common disorders and systemic diseases associated with pregnancy, Labour, Abnormal position and presentation
Gynaecology	Malignant growth of Genital tract/ Therapeutics

MONTH-5 & 15DAYS

Obstetrics	Twins, prolapse of cord and limbs, abnormalities in the action of uterus, Neo-natal hygiene, breast feeding
Gynaecology	Pathology of conception / Therapeutics

15 DAYS

First Assessments and examinations

MONTH-7

Obstetrics	Abnormal condition of soft parts, contracted pelvis, injuries of birth canal, artificial feeding
Gynaecology	Common gynaecological operations / Therapeutics

MONTH-8

Obstetrics	Obstructed labour, complications of third stage of labour, Management of premature child, asphyxia
Gynaecology	Radiotherapy in gynaecology / Therapeutics

MONTH-9

Obstetrics	Common obstetrical operations, Birth injuries
Gynaecology	Disorders of menstruation / Therapeutics

MONTH-10 & 15 DAYS

Obstetrics	Abnormal puerperium- infections ..etc..
Gynaecology	Common disorders of newborn / Therapeutics

15 DAYS

Second Assessments and examinations

MONTH-12

Examinations

OBSTETRICS & GYNAECOLOGY
TEXT BOOKS

Sl. No:	Name of the book	Author
	Mudaliar & Menon's Clinical Obstetrics	Sarala Gopalan & Vanitha Jain
	Shaw's Textbook ofGynaecology	V.G.Padubidri, Shirish N. Daftary
	Diseases of children	Raue & fisher
	Obstetrics	Guernsey
	Text book of Gynaecology	D.C.Dutta

	Text book of Obstetrics	D.C.Dutta
	Text book of Gynaecology	C.S.Dawn

REFERENCE BOOKS

Sl. No:	Name of the book	Author
	Textbook of Obstetrics	Sudha Salhan
	Clinical Gynaecology	K. Bhaskar Rao, N.M. Raj Chowdhary
	Manual of Obstetrics	Shirish N. Daftary Sudip Chakravarthy
	Textbook of Obstetrics	V. Padubidri Ela Anand
	Ante-natal clinics	Browne
	Text book of Obstetrics & Gynaecology	Munro kert
	Text book of gynaecology	Cowperthwaite
	Homoeopathic therapeutics as applied to obatetrics	Sheldon Leavitt
	Uterine therapeutics	Minton
	Text book of obstetrics	Guernsey
	Gems of obstetrics & Gynaecology with Homoeopathic Therapeutics	A. Deshpande
	Lady's manual of Homoeopathic treatment	Ruddock.B.H
	Repertory of the Diseases of mother & the newborn	Meera
	Diseases of the females & infants at breast	Jahr.G.H.G

MODEL QUESTION PAPERS
Third year B.H.M.S Degree Examination, January 2011
(2003-04 Admission onwards)
OBSTETRICS AND GYNAECOLOGY, INFANT CARE AND HOMOEOPATHIC THERAPEUTICS

Paper- I

Time: 3 hours Max. Marks: 100

Instructions: Answer all questions.

(4+6=10)

1. What is preparatory stage? Describe the mechanism of labour in vertex presentation.

(5X5=25)

2. Write briefly on:
   a. Threatened abortion
   b. Diagnosis of face presentation
   c. Hyper emeisis gravidarum
   d. Acute hydramnios.
   e. Convelaire uterus (5X3=15)
3. Short Notes on:
   a. Effects of toxoplasmosis on pregnancy
   b. Diagnosis of gestational diabetes.
   c. Aetiology of Brow presentation
   d. Lovset maneuver.
   e. Contraction ring. (4+6=10)

What are the various causes of APH? Describe the aetiology and management of placenta previa.

(5X5=25)

Write briefly on:

a.Acute inversion of uterus
b.Indication of forceps application
c.Neonatal Jaundice
d.Aetiology of pre-term labour
e.CPD (5X3=15)

4. Short notes on:
   a. Prolapse of cord

b. Sub involution of uterus
c. Follow up of vesicular mole
d. Aetiology of ectopic gestation.
e. Placenta accreta.

Third year B.H.M.S Degree Examination, January 2011
(2003-04 Admission onwards)
OBSTETRICS AND GYNAECOLOGY, INFANT CARE AND HOMOEOPATHIC THERAPEUTICS

Paper –II

Time : 3 hours Max. Marks: 100

Instruction: answer all questions

1.Describe the aetiology, clinical features, classification and differential diagnosis of endometriosis. (2+3+2+3=10)

1. Write briefly on: (5X5=25)
   a. Post menopausal bleeding
   b. Turner's syndrome
   c. Trichomoniasis
   d. Predisposing factors of carcinoma of endometrium.
   e. Hysterosalpingography (5x3=15)
2. Short notes on:
   a. Vault prolapse
   b. Haematocoipos
   c. Lichen sclerosus
   d. Hydrosalpnix
   e. Fixed retroversion

3.Describe the causes of male infertility. What are the important investigations? (5X5=10)

4.Write briefly on: (5X5=25)
   a. Clinical features of genital tuberculosis
   b. Vesico- vaginal fistula
   c. Feminising tumours of the ovary
   d. Metropathia haemorrhagica
   e. CIN
3. Short notes on: (5X3=15)

a. Chancroid
b. Urethral syndrome
c. Ectopion
d. Parovarian cyst
e. Investigations in breast cancer

Third year B.H.M.S Degree Examination, January 2011
(2003-04 Admission onwards)
OBSTETRICS AND GYNAECOLOGY, INFANT CARE AND HOMOEOPATHIC THERAPEUTICS

Time: 3 hours Max. Marks: 100

Instructions: Answer all questions.

1. Give the indications of ipecac, Nitric Acid and Phosphorus in placenta previa. (10)

2. Compare and contrast: (5X5=25)
   a. Actea Racemose and Pulsatilla in abortion
   b. Rhustox and Merc.sol in chicken pox during pregnancy
   c. Ferrum Met and Mat Mur in anaemia during pregnancy
   d. Arnica and Secale cor in contraction ring
   e. Apocynam and Apis in Eclampsia

3. Differentiate: (5X3=15)
   a. Sepia and opium in constipation during pregnancy
   b. Cactus Gran and Kali Carb in cervical dystocia
   c. Bryonia and phytolocca in acute mastitis
   d. Phosphorus and Bell in APH
   e. Ipecac and Ars alb in morning sickness
4. Give the indications of four homoeopathic medicines for adenomyosis (10)

5. Compare the following: (5X5=25)
   a. Graphitis and Calc. carb in PCOD
   b. Nat Mur and Sepia in chronic Cervicitis
   c. Sepia and Murex in uterine prolapse
   d. Nux Vom and Varatrum alb in congestive dysmenorrhoea
   e. Cyclamen and Ipecac in menorrhagia

6. Give the indications of: 95X3=15)
   a. Ars alb in candidiasis
   b. Pulsatilla in CIN

c. Causticum in stress incontinence
d. Thuja in PCOD
e. Trillium in Metrorrhagia

DEPT OF MATERIA MEDICA

Application of Materia Medica should be demonstrated from cases in the OP and IP departments.

Each student appearing for IIIrd BHMS shall maintain one record comprising of twenty cases (five short and fifteen long cases) which shall be evaluated by the head of department.

List of drugs included in the Syllabus of IIIrd BHMS Examination

In addition to the drugs mentioned for Ist & IInd BHMS, the following additional drugs are included in the syllabus of Materia Medica for the 3rd BHMS Examinations-

1.	Actea spicata	2.	Adonis vernalis
3.	Antimonium ars	4.	Argentum metallicum
5.	Asafoetida	6.	Asterins rubens
7.	Baryta carb	8.	Benzoic acid
9.	Belladonna	10.	Bufo rana
11.	Caladium	12.	Calcarea curb
13.	Cannabis indica	14.	Cannabis sativa
15.	Carbo vegitabiiis	16.	Causticum
17.	Crotalus hor	18.	Crotontig
19.	Cuprum met	20.	Cyclamen
21.	Diaoscorea villosa	22.	Equisetum
23.	Graphitis	24.	Hyoscymus n
25.	Hypericum	26.	Lodum
27.	Kali carb	28.	Katisufph
29.	Kaimia iatfolia	30	Lachesis
31.	Lycopodium	32.	32. Mercurius sol
33.	Mercurius cor	34.	Mercurius sulph
35.	Moschus	36.	Murex
37.	. Muriatic acid	38.	Naiat
39.	Natrum mur	40.	Natrum phos
41.	Nitic acid	42.	Onosmodium
43.	Oxalic acid	44.	Cinchona

45 Phosphoric acid
46. Phyphostigma
47. Picric acid
48. Plumbum met
49. Podophylum
50. Pulsatilla
51. Secaler core
52. Selenium
53. Staphisagria
54. Stramonium
55. Sticta P
56. Sulpher
57. Sulphuric acid
58. Symphytum
59. Symphylinum
60. Tabacum
61. Taraxacum
62. Terentula c
63. Teribinthina
64. Thalapsi bursa p
65. Theridion
66. Thuja
67. Thyroidinum
68. Kali bich
69. Zincum met

TEACHING PLAN – MATERIA MEDICA 3RD BHMS

Theory – 100 hrs

Clinical / Seminar / Tutorial - 100 hrs

Month	Topic
1st month of admission	Actea spicata / Adonis / Antim ars / Argentum met / Asafoetida / Asterias reubens / Baryta carb / Benzoic acid
2nd	Belladonna / Bufo / Caladium / Calcarea carb / Cannabis indica / Cannabis sativa / Carbo veg / Causticum
3rd	Crotalus horridus / Croton tig / Cuprum Met / Cyclamen / Dioscorea / Equisetum / Graphites / Hyoscyamus
4th	Hypericum / Iodum / Kali carb / Kali sulph / Kalmia / Lachesis / Lycopodium / Merc sol
5th	Merc cor / Merc sulph / Moschus / Murex / Muriatic acid / Naja / Natrum mur / Natrum phos
6th Month - Ist Average Examination	
7th	Nitic acid / Onosmodium / Oxalic acid / Phosphoric acid / Physostigma / Picric acid
8th	Plumbum met / Podophylum / Pulsatilla / Secale cor / Selenium / Staphysagria / Stramonium
9th	Sticta pulm / Sulphur / Sulphuric acid / Symphytum / Syphilinum / Tabacum
10th	Taraxacum / Tarantula cubensis / Terebinth / Thlaspi bursa / Theridion / Thuja / Thyroidinum
11th	Zincum met / Cinchona / Kali bich
11th Month - IInd Average Examination	
12th Month - University Examination	

List of Text books

13. Lectures on Homoeopathic Materia Medica – Kent JT
14. Clinical Materia Medica - Farrington EA
15. Keynotes and Characteristics with Comparisons – Allen HC
16. Condensed Materia Medica – Hering C
17. Comparative Materia Medica – Farrington EA
18. A Synoptic key of the Materia Medica – Boger CM
19. A study on Materia Medica - NM Choudhuri
20. Leaders in Homoeopathic Therapeutics – Nash EB
21. Homoeopathic Drug Pictures - ML Tyler
22. The Materia Medica of Some Important Nosodes - Allen HC
23. Twelve tissue remedies of Schussler – Boericke & Dewey
24. Pocket Manual of Homeopathic Materia Medica – Boericke W

List of Reference Books

13. Materia Medica Pura – Hanemann S
14. The Guiding Symptoms of our Materia Medica – Hering C
15. The Encyclopedia of Pure Materia Medica – Allen TF
16. Text Book of Materia Medica with Therapeutics - Cowperthwaite
17. A text book of Materia Medica – Lippe AD

18. Plain Talks on Materia Medica with Comparisons – Pierce WI

19. A dictionary of Practical Materia Medica (3 vols) – Clarke JH

20. Lectures on Materia Medica – Dunham C

21. Masterkey to Materia Medica – Bhanja KC

22. A Manual of Pharmacodynamics – Hughes R

23. Materia Medica Viva – Vithoulkas G

24. A Manual of Materia Medica Therapeutics and Pharmacology - Blackwood AL

IIIrd BHMS MODEL QUESTION PAPER

TIME—3hrs MAX MARKS—100

ANSWER ALL THE QUESTIONS

I.a)Describe the drug picture of Sulphur 10marks

b)give the drug picture of Pulsatilla lady 10

II.Write notes on
1) Lycopodium—GIT
2)Calcarea --child
3)kalmia –rheumatism
4) Podophyllum—diarrhoea
5) Cuprum met—cough
6)Natrum—headache
7)Terebinth—urinary
8)Baryta carb—throat
9)Petroleum—skin
10)Murex—uterine 10x5=50

III.
1. Lachesis—haemorrhage
2. Kali carb-respiratory
3. Bell—mania
4. Causticum—modality
5. Caladium—sexual symptom
6.Asterias—cancer
7. Merc sol—ulcer
8.Plumbum met—colic
9.Taraxaccum—liver

10. Bufo—epilepsy 10x3=30

Answer key

III BHMS MODEL QUESTION

1.Sulphur—constitution, mental symptoms,physical symptoms,skin,GIT,respiratory
2.Pulsatilla—lady,discharges, mind,pain,GIT,eye,menses,physical generals

II. 1. Lyco-GIT—flatulence, constipation, satiety,lower abdomen
2.Calc carb child—constitution,physical generals, head,GIT
3. Kalmia-rheumatism—heart complaints,pain descending, shifting,numbness
4. Podophyllum—5 Ps
5. Cuprum met—spasmodic, 3 paroxysm, modality
6. Natrum mur—headache, lt side, sensation.
7. Terebinth—urinary-haematuria, albuminuria, odour of violets
8. Baryta carb-throat—swallow liquid only, quinsy,glands
9. Petroleum—skin,--winter<<,easy suppuration, perspiration,cracks
10. Murex—uterine—sexual excitement,sensation, mentals,modality

III. 1. Lachesis-haemorrhage—blood dark, non-coagulable
2. Kali carb ---respiratory—ashma modality,
3. Bell-mania—violent delirium,hallucinations
4. Causticum-modality--<clear fine weather,>damp wet weather
5. Caladium-sexual symptom-impotence,pruritus vagina
6. Asterias rubens—CA breast,ulcer,foetid odour
7. Merc.sol—ulcer-irregular,lardaceous`base,syphilitic
8. Plumb met –colic—radiating,coma,drawn by a string to spine
9. Tarxaccum—mapped tongue,jaundice
10. Bufo-epilepsy—epilepsy during sleep,epilepsy connected with sexual sphere,spasm during coition, epilepsy menses during

III BHMS
ORGANON OF MEDICINE & PRINCIPLES OF HOMOEOPATHIC PHILIOSOPHY

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

(1) Hahnemann's Theory of Chronic Diseases

Proper emphasis should be made on the way in which each miasmatic phase evolves and the characteristic expressions which are thrown off at various level. This will bring out characteristic pattern of each miasm.

Definite attempt should be made to understand theory of Chronic Miasm in the light of Pathology & our knowledge in basic sciences of Anatomy, Physiology and Medicine. This would demand Corelation of Homoeopathic Philosophy with allied sciences.

Teacher should bring out clearly therapeutic implications of Theory of Chronic Miasm in practice. This will demand comprehension Evolution of natural disease from miasmatic angle. This will require to be correlated with applied Materia Medica. Here you demonstrate how various drugs would come up in Psoric, Sycotic and, Syphilitic state of the clinical diseases.

Thus Organon Philosophy will bring out effectively integration of Anatomy, Physiology, Psychology, Pathology, Clinical Medicine, Materia Medica and Therapeutics. This would demand greater interdepartmental co-ordination.

(II) Hahnemann's organon of Medicine Vth & VI th editions

(a) Kent's lectures, Robert and Stuart close works in Philosophy

(b) Posology

(c) Diet, Auxillary mode of Treatment

(d) Introduction of Repertory

Student should maintain journal of 20 cases wherein throughly worked out cases from their clinical attendance would be there.

Cases should demonstrate student's work on : case taking - case analysis - evaluation - disease, diagnosis - miasm-posology - remedy selection.

Topics shall include the following:

1. Organon of Medicine Aph. 146 to 294 with reference to
   Kent, H.A Roberts & Stuart Close

   (a) Kent - Chapter 18-21, 34, 36, 37

   (b) H.A Robert - 13, 16, 18-35

   (c) S. Close 6 -17 (Except 7, 11, 12)

2. Hahnemann's Theory of Chronic Diseases, based on the theoretical part of Chronic Diseases.

TEACHING PLAN
III BHMS
Total Hrs: 110

I Semester-55 hrs

Hahnemann's theory of chronic miasm - 13 hrs

Aphorism 146-244 - 24 hrs

Kent - Chapters 18, 19, 20, 21 - 4 hrs

H A Robert - Chapters 13,16, 18, 19, 20, 21, 22 - 7 hrs

Examination - 6 hrs

II Semester - 55 hrs

Stuart Close - Chapters 6 to 17 (except 7, 11, 12) - 9 hrs

Theory of chronic miasm - 4 hrs

H.A. Robert - Chapters 23 to 35 - 13 hrs

Kent - Chapters 34, 36, 37 - 3 hrs

Aphorism 245 - 294 - 14 hrs

Examination - 12 hrs

III BHMS
Model Question Paper

ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY

Time 3 hrs Total Marks 100

Essay

I Explain briefly the development, natura and manifestation of psora? 3+3+4=10

II Define mental disease, what are its types? and its management? 3+3+4=10

Short Notes

1. Distinguish Homoeopathic aggravation, medicinal aggravation & Disease aggravation
2. Define Typical Intermittent disease, Classify it
3. Distinguish between cure and recovery?
4. Diet & regimen in chronic disease by Dr. Hahnemann
5. Suppression
6. Logic of Homoeopathy
7. Management of local maladies
8. Schiene Sympton
9. Second Prescription
10. Route of aministration of remedies. 5x10 = 50

Short Notes

1. Define totality of Symptom by stuart close
2. Characteristic Symptom

3. Define Susceptibility
4. Homoeopathic specific
5. Therapeutic dose
6. Mongrel sect
7. 3 conditions for rapid cure
8. Indisposition
9. Second best remedy
10. Fifty millessimal potency 3x10 =30

III BHMS
Scheme of Valuation
ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY

Essay
1 Development, nature, manifestations of psora according to Hahnemann's "Chronic Diseases"
2 §210 to §230

Short Notes
1 §155
2 §233 to §234
3 Stuart Close chapter 9
4 Chronic Disease §259 to §263
5 H A Roberts Chapter 18, Stuart Close chapter 6
6 Stuart Close chapter 16
7 §192 to §204
8 §248 (6^{th} edition)
9 H A Roberts Chapter 16
10 §284 (6^{th} edition)

Short Notes
1 Stuart Close chapter 11
2 §153
3 H A Roberts Chapter 17, Kent chapter 14, Stuart Close chapter 13
4 §147
5 Stuart Close chapter 13
6 §149 Foot Note
7 §246
8§150, Stuart Close chapter 10
9 Stuart Close chapter 10
10 §270

List of Text Books for III BHMS

1 Organon of Medicine 5th and 6th translated with an appendix by R E Dudgeon
2 Lectures on Homoeopathic Philosophy by James Tyler Kent
3 Principles and art of cure by Homoeopathy by H A Roberts
4 Genius of Homoeopathy by Stuart Close
5 The Chronic Diseases by Dr Hahnemann

List of reference books

1 Principles of Homoeopathy by Garth Boericke
2 A Commentary on Organon of Medicine by B K Sarkar
3 Essays on Homoeopathy by B K Sarkar
4 Samuel Hahnemann his Life and Times by Trevor M Cook
5 Life of Christian Samuel Hahnemann by Rosa Waugh Hobhouse
6 Life and Letters of Hahnemann by Bradford
7 Life of Hering Knerr
8 Homoeopathy Medicine of the New Man by George Vitholkas
9 The Science of Homoeopathy by George Vitholkas
10 The Man Unknown by Alexis Carrel
11 A Comparison of Chronic Diseases by Phyllis Speight
12 Miasmatic Diagnosis by S K Banerjee
13 Miasmatic Diagnosis by K P Mazumdar
14 Notes on Miasma by P S Ortega
15 Lectures on Theory and Practice of Homoeopathy by R E Dudgeon
16 The Art of Case Taking and Practical Repertorisation in Homoeopathy by R P Patel
17 History of Medicine byDivan Harischand
18 Glimpses of History of Medicine by D D Banerjee
19 Lesser Writings by Hahnemann
20 Lesser Writings by J T Kent
21 Lesser Writings by Farrington
22 Lesser Writings by Boeninghausen

23 Organon of Medicine 5th and 6th edition by S Hahnemann Corrected, Retranslated and Redacted by Dr Mahendra Singh and Dr Subhas Singh
24 Hahnemann's Homoeopathy by Peter Morrell
25 Art of Interrogation by Pierre Schmidt

THIRD BHMS EXAMINATION

(i) No candidate shall be admitted to the Third BHMS examination unless he has passed the Second BHMS examination and he/she has required attendance as per regulation 7 (iii) to the satisfaction of the head of the Homoeopathic Medical College.

(ii) The Third BHMS examination shall be held at the end of 42nd month of admission to First BHMS.

(iii) The minimum number of hours for lecture, demonstration/practical, clinical and seminar classes in the subjects shall be as under :

THIRD BHMS COURSE -DISTRIBUTION OF HOURS

Sl .No		Theory	Practical/Clinical				
	Subject	Theory including internal exam	Practical/Clinical including internal Exam	Tutorial	Seminar	Total	Grand Total
01	Practice of Medicine & Homoeo therapeutics	75	75	Nil	Nil	75	150
02	Surgery including ENT, Ophthalmology & dental & Homoeo. therapeutics	200	70	10	20	100	300
03	Obstetrics & Gynaecology Infant care & Homoeo. therapeutics	200	70	10	20	100	300
04	Homoeopathic Materia	100	70	10	20	100	200

	Medica						
05	Organon of Medicine, Principles of Homoeopathic Philosophy	100	70	10	20	100	200
06	Case taking & Repertorisation	30	75	Nil	Nil	Nil	105
07	Community Medicine	30	Nil	Nil	Nil	Nil	30
	TOTAL						1285

(iv) Examination in Surgery shall consist of three theory papers and one practical examination. One theory paper shall be exclusively on Homoeo therapeutics. The Practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skill on the surgical instruments, bandages and general measures related to surgery, scope of Homoeopathic therapeutics and examination and diagnosis of surgical disease through clinical examination, X-ray and other common diagnostic techniques. The case studies reports of the students carried out during the course shall also be considered for the oral examination.

(v) Examination in Obstetrics & Gynaecology including infant care shall consist of three theory papers and one practical examination. One theory paper shall be exclusively on Homoeo therapeutics. The Practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skill on the specimens, models, instruments, and general appliances related to Obstetrics, scope of Homoeopathic therapeutics and examination and diagnosis of Gynaecological disease through clinical examination, X-ray and other common diagnostic techniques. The case studies reports of the students carried out during the course shall also be considered for the oral examination.

(vi) Examination in Homoeopathic Materia Medica shall consist of one theory paper and one bedside practical examination. The bedside examination shall be on two acute cases with special reference to their nosological diagnosis and therapeutic diagnosis from Homoeopathic point of view.

(vii) Examination in Organon of medicine shall consist of one theory paper and one oral and practical .

(viii) In order to pass the Third BHMS examination, candidates have to pass in all the subject of the examination.

(ix) Full marks for each subject and the minimum number of marks required for passing should be as follows:

THIRD BHMS COURSE -DISTRIBUTION OF MARKS

Subject	THEORY				ORAL & PRACTICAL					Grand Total	Aggregate minimum for pass
	University Exam Written	Int. Assessment	Total	Minimum For Pass	University practical	Exam Viva	Int. Assessment	Total	Minimum For Pass		
Surgery	300	60	360	180	100	100	40	240	120	600	300
Obstetrics & Gynaecology	300	60	360	180	100	100	40	240	120	600	300
MATERIA MEDICA	100	20	120	60	50	50	20	120	60	240	120
Organon of Medicine	100	20	120	60	50	50	20	120	60	240	120

PRACTICE OF MEDICINE & HOMOEOPATHIC THERAPEUTICS SYLLABUS, TEACHING PLAN,ACADEMIC PROGRAMME AND SCHEME OF EXAMINATIONS

Homoeopathy has a distinct approach to the concept of Disease. It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts. It emphasizes the study of the man from his State of Health, till it travels to state of presenting illness, incorporating all major events and contributing factors in the process. The individualization study as above needs following background so that the striking aspects which are characteristic to the individual become clear in contrast to the common picture of the respective Health disturbances:

1. Primary correlation of the Health disturbances with basics of Anatomy-Physiology-Biochemistry
2. Knowledge of common evolution of study about its causation, manifestations, maintenance and prognosis details.
3. Knowledge about factors which will worsen and improve the disturbance including various medicines and non-medical measures and respective possible response elucidation by application of measures.

The study obviously emphasizes more on:

A. Comprehension of Applied part.
B. Sound clinical training at bedside to be able to apply the learning accurately

These can lead towards developing a Homoeopathic Physician who will not be deficient at the practical Science of Medicine. He should be trained in a manner in which he is not locked up in Rare syndromes as Theoretical Exercise, but as a sound clinician with adequate discrimination, sharp observation and conceptual clarity. He will then be able to mould an effective appreciation of the patient's picture utilizing his knowledge of Medicine.

To evolve the above, following distribution of Theory and Practical Training is suggested so that there is gradual but clear and firm comprehension.

Course of Study-3years II, III and IV BHMS

Examination will be conducted at the end of IV [Fourth BHMS]. Also in the side of the topics are suggested co-ordinations [with other department] which will improve the caliber of imparting training in Medicine. The distribution is made keeping in mind about other subjects in II, III and IV BHMS and the respective state of learning of student.

Paper I
II BHMS

1. Clinical Methods of Examination of patient as a whole.
2. Nutritional diseases - Nutrition, Hygiene in co- ordination with Dept. of Community Medicine.
3. Climatic Factors in diseases.
4. Immunological Factors in diseases - Epidemiology in co-ordination with Community Medicine.
5. Genetic Factors – Chronic Diseases and Miasms in co- ordination with Dept. of Organon & Philosophy.
6. Infectious diseases.

All the above to be followed up with respective Therapeutic Topics also

III BHMS

1. Respiratory diseases.
2. Alimentary Tract and Pancreatic Disease.
3. Liver and Biliary Tract Diseases.
4. Acute Emergencies including poisons.
5. Endocrinal Diseases – Menstrual Disorders in co-ordination with Dept. of Gynaecology.
6. Connective tissue disorders and Bones and joint disorders.

All the above to be followed up with respective Therapeutic Topics also.

Paper II
IV BHMS

1. Hematological diseases.
2. Cardiovascular system diseases.
3. Kidneys and Urinary Tracts diseases.
4. Water and electrolytes balance diseases.
5. Skin diseases.
6. CNS and peripheral nervous system diseases.
7. Mental diseases.
8. Metabolic diseases.
9. Pediatrics

All the above to be followed up with respective Therapeutic Topics also.

Paper III
Homoeopathic Therapeutics

[Based on the syllabus for Materia Medica of the First, Second, Third & Fourth BHMS Course]

The above in these terms will require a follow up of strong and emphatic training on Homoeopathic Therapeutics for the same. It will be conducted in IV[fourth] BHMS at the end of 3 tears of course of study in Theoretical and Practical aspects of Medicine. Eligibility for examination shall include submission of 10 complete case histories, 5 each being prepared in III and IV BHMS.

PRACTICAL AND CLINICAL EXAMINATION

The examination procedure will include one case, to be prepared, and presented to the examiner. The examiners will put stress on

1. Comprehensive case taking.
2. Bedside procedure, investigations for diagnosis.
3. Principles of management.

GENERAL GUIDANCE: THERAPEUTICS

Homoeopathy has a distinct approach to disease. Concept of individualization and concept of chronic miasm makes it disinct. It recognizes an ailing individual by studying him as a whole rather then in terms of sick parts. It emphasizes the study of man from his state of Health i.e Disposition, Diathesis, Disease, taking into account all predisposing and precipitating factors i.e Fundamental Cause, Maintaining Cause & Exciting Cause.

Hahnemann's theory of chronic miasm provides us an evolutionary understanding of the chronic disease: Psora-Sycosis-Syphilis & acute manifestations of Chronic Diseases. Evolution of the natural disease shall be comprehended in the light of theory of chronic miasm. How our current knowledge of Pathology and Clinical Medicine assist in defining this must be demonstrated.

Study of therapeutics does not mean simply list of specifics for the clinical condition,but teaching of applied Materia Medica. Here we demonstrate how various drugs would come up in Psoric, Sycotic, Tubercular or Syphilitic state of the clinical conditions. Thus emphasis would be in correlating pace of evolution of disease peculiar respectively and cluster of characteristics. Thus teaching of therapeutics of Hypertension would demand delineation of various phases of hypertension taking into account what is happening to the Structure and what kind of forms are thrown off. Psoric phase would be characterized by Labile hypertension which shoots up under stress, especially with rise in systolic and manifesting flushes and emotional disturbances.

This would draw our attention to drugs like Gelsemium, Glonoine, Ferrum Met etc. This is the functional phase. Tubercular hypertension would be characterized by fairly high systolic and diastolic B.P. oscillating wildly at higher range, manifesting bleeding like epistaxis etc with erratic mental state. This will draw attention to Phosphorus, Lachesis etc.

Syphilitic dimension would be characterized by immense destructive damage to target organs like heart, kidney and retina.

Thus teaching of Therapeutics would essentially demand an effective correlation of:

i) Knowledge of Clinical- Medicine/Surgery

ii) Appreciation of Natural disease and its evolution in the light of Theory of chronic miasms. Thus correlation with Organon and Philosophy

iii) Applied Materia Medica and Repertory:

Comprehending drug picture from the evolutionary angle-Boger's approach towards Materia Medica and its application for the study of various clinical patterns of Natural diseases-correlation with Materia Medica and with Repertory.

TEACHING PLAN

Paper I
Distribution of hours

II BHMS

1.	Clinical methods of examination of patient as a whole	10 hrs
2.	Nutritional diseases	15hrs
3.	Climatic factors in diseases	10 hrs
4.	Immunological factors in diseases	10 hrs
5.	Genetic factors	5 hrs
6.	Infectious diseases	25 hrs
		Total - 75 hrs

All the above to be followed up with respective therapeutic topics also.

III BHMS

1.	Respiratory diseases	15 hrs
2.	Alimentary tract and pancreatic diseases	20 hrs
3.	Liver and biliary tract diseases	5 hrs
4.	Acute emergencies including poisonings	5 hrs
5.	Endocrinal diseases	15 hrs
6.	Connective tissue disorders and bones and joint disorders	15 hrs

Total 75 hrs

All the above to be followed with respective therapeutic topics also.

Paper II

IV BHMS

1.	Hematological diseases	20 hrs
2.	Cardiovascular system diseases	25 hrs
3.	Kidneys and urinary tract diseases	15 hrs
4.	Water and electrolyte balance diseases	10 hrs
5.	Skin diseases	25 hrs
6.	CNS and peripheral nervous system diseases	25 hrs
7.	Mental diseases	15 hrs
8.	Metabolic diseases	10 hrs
9.	Pediatrics	15 hrs

Total - 160 hrs

All the above to be followed with the respective therapeutic topics also.

ACADEMIC PROGRAMME FINAL BHMS

I MONTH

Introduction to hematology
Iron deficiency anaemia
Megaloblastic anaemia
Hemolytic anaemia
Haemoglobinopathies
Cardiac anatomy and physiology
Congenital heart diseases
Glomerulonephritis
Nephrotic syndrome
Chronic renal failure

II MONTH

Leukemias
Lymphomas
Rheumatic fever and rheumatic heart disease
Chronic valvular heart diseases
Congestive cardiac failure
Urinary tract infections
Urolithiasis
Diseases of lower genitor urinary tract
Diseases if the prostate gland

III MONTH

Aplastic anaemia
Bleeding and coagulation disorders
Bacterial endocarditis
Atherosclerosis
Coronary artery diseases
Hypertension
Tumours of kidney and urinary tract
Investigations in genitor urinary system
Electrolyte and acid base balance
Fluid volume overload
Fluid volume depletion

IV MONTH

Hyperkalemia
Hypokalemia
Dysnatremias
Metabolic acidosis and alkalosis
Eczema
Psoriasis
Urticaria
Sexually transmitted diseases/infections

V MONTH

Papulosquamous lesions
Vesiculobullous lesions
Skin tumours
Diseases of hair and nails
Cardiac arrhythmias
Ischemic heart disease
Diseases of myocardium and pericardium
Corpulmonale
Peripheral vascular diseases
Diseases of aorta

VI MONTH FIRST SEMESTER EXAMINATION

VII MONTH

CNS introduction including examination and investigation
Headache
Infections of CNS
Epilepsy
Involuntary movements and diseases of extrapyramidal system
Introduction to psychiatry
Organic mental disorders
Schizophrenia and delusional disorders

VIII MONTH

Cerebrovascular diseases
Intracranial space occupying lesions
Pediatrics
Growth and developmental problems of newborn and premature infants
Congenital anomalies
Neonatal jaundice
Haemorrhagic diseases of newborn
Infections of newborn
Infantile diarrhea
Convulsions
Bronchopneumonia and acute bronchiolitis

IX MONTH

Multiple sclerosis and other demyelinating lesions
Motor neuron diseases
Diseases of cerebellum
Diseases of spinal cord, nerve root and plexuses
Mood disorders
Anxiety disorders
Obsessive compulsive disorders

X MONTH

Conversion disorders
Diseases of vertebral column causing neurological lesion
Diseases of peripheral nervous system
Diseases of autonomic nervous system
Myasthenia gravis
Diseases of muscles
Behavioural disorders
Mental retardation

XI MONTH - SECOND SEMESTER EXAMINATION
XII MONTH - FINAL BHMS UNIVERSITY EXAMINATION

TEXT BOOKS

Davidson's Principles and Practice of Medicine –Davidson
Text book of Practice of Medicine – Price
Clinical Methods - Hutchison and Hunter
Bedside Medicine - Majumdar.A.R
Text book of Medicine - Cowperth Wait
Text book of Medicine - P.C.Das
Therapeutics -Lilienthal
Therapeutics -Dewey
Therapeutics -Raue

REFERENCE BOOKS

Principles of Internal Medicine - Harrison
Text book of Medicine - Cecil
Text book of Medicine - Savil, Gordon Jouset
Differential diagnosis - Harvey & Bordley
Homoeo Therapeutics - Neatby & Stonhan
French index of Medicine

BHMS Course. Distribution of Hours

Year	**Theory**	**Practical**				**Grand Total**
	Lecture including Internal Exams	**Practical/Clinical in Internal Exams**	**Tutorial**	**Seminar**	**Total**	
II BHMS	75	75	Nil	Nil	75	150
III BHMS	75	75	Nil	Nil	75	150
IV BHMS	160	220	10	20	250	410

Fourth BHMS Examination- Distribution of Marks

Sl. No.	Subject	Theory				PRACTICAL					Grand Total	Aggregate Minimum for Pass
		University Exam Written	Internal Assesment	Total	Minimum for pass	University Practical	Exam Viva	Internal Assesment	Total	Minimum for Pass		
1.	Practice of Medicine & Homoeopathic Therapeutics	300	60	360	180	100	100	40	240	120	600	300

MODEL QUESTION PAPERS
Fourth year BHMS Degree Examination
Practice of Medicine and Homoeopathic Therapeutics

PAPER I

Time:3 hrs **Max.Marks:100**

Instructions: 1)Answer **all** questions.

1.Define and classify pneumonias. Describe the aetiopathogenesis and diagnosis of acute bronchopneumonia. [2+4+4=10]

2. Write short notes on:
   a) Acute pancreatitis.
   b) Mediastinal shift
   c) Ankylosing spondylitis
   d) Sjogren's syndrome
   e) Heat stroke

[5x5=25]

3. Write very short notes on:
   a) Ketoacidosis
   b) Primary complex
   c) Irritable bowel syndrome
   d) Pneumothorax
   e) Protein energy malnutrition [3x5=15]

4. Describe the causes, clinical presentations and diagnosis of hypothyroidism. [2+4+4=10]

Write short notes on:
   a) Glucose tolerance test
   b) Fibromyalgia
   c) Osteoarthrosis
   d) Vit.A deficiency
   e) Rubella [5x5=25]

6. Write very short notes on:
   a) Anaphylaxis
   b) Kala-azar
   c) Barotrauma
   d) Genetic screening tests
   e) Coeliac disease [3x5=15]

Fourth year BHMS Degree Examination
Practice of Medicine and Homoeopathic Therapeutics

Paper II

Time:3 hrs **Max.Marks:100**

Instructions:1) Answer **all** questions.

1.Define chronic renal failure. How will you diagnose and manage a case of end stage renal disease? [2+4+4=10]

1. Write short notes on:
   a) Budd chiari syndrome
   b) Chronic myeloid leukaemia
   c) PET scan
   d) Bullous impetigo
   e) Diaper dermatitis [5x5=25]

2. Write very short notes on:
   a) Aphasia
   b)Urinary cast
   c) Tetralogy of Fallot
   d) Tread mill test
   e) Anorexia nervosa [3x5=15]

3. Define Ataxia. What are the features of cerebellar dysfunction? How will you differentiate sensory ataxia from cerebellar ataxia? [2+4+4=10]
4. Write short notes on:
   a) ASD
   b) Multiple myeloma
   c) Hyponatremia
   d) Bipolar disorder
   e) Bulbar polio [5x5=25]
5. Write very short notes on:
   a) Haematuria
   b) JVP in health and disease
   c) TAO
   d) Urticaria
   e) Hemiplegia

Fourth year BHMS Degree Examination
Practice of medicine and Homoeopathic Therapeutics

PAPER III

Time:3 hrs **Max.Marks:100**

Instructions:1) Answer **all** questions.

1. Discuss the important medicines for thyroid enlargement due to hypothyroidism. 10mrks

2.Give the therapeutics of:

a) Allergic rhinitis
b) Bronchiectasis
c) Post chikungunya arthritis
d) Malena
e) Alcoholic gastritis 5x5=25

3. Write theindications of:

a) Graphitis and sepia in atopic dermatitis
b) Nux vomica and Sabadilla in tropical eosinophilia
c) Agraphis nutans and Baryta carb in adenoids
d) Bryonia and Kalicarb in pleurodynia
e) Phosphorus and Sulphur in pancreatitis [3x5=15

4. Discuss the important medicines for acute renal colic 10 marks

5. Give the therapeutics of:

a) Ataxia
b) Vitiligo
c) Obsessive compulsive disorders
d) Angina pectoris
e) Haemoptysis 5x5=25

6. Write the indications of:

a) Gelsemium and Glonoine in hypertension
b) Lilium tig and Aconite in tachycardia
c) Heparsulph and Mercsol in pyoderma
d) Causticum and Nitric acid in verrucae
e) Carboveg and Selenium in Guillain-Barre syndrome 3x5=15

Answer Key
Paper-I

1. Acute respiratory illness with recently developedradiological pulmonary shadowingwhich may be segmental, lobar or multi-lobar.

   Classification
   Anatomical
   Aetiological
   Clinical
   Community acquired
   Immunocompromised
   Suppurative
   Aspirational

Aetiology

Lowered resistance to infection
Viral infection of URT.
Chronic respiraty diseases.
Alcoholism
Impaired bronchial drainage.

Diagnosis
By symptoms & signs.
Investigations- WBC count.
Sputum
CXR
Pa CO2

2. a. Causes- gall stones, alcohol, post ERCP
post surgical
trauma
drugs
hypercalcemia
mumps, Coxsackie Virus
Renal failure
Severe hypothermia

Cinical Features
Constant upper abdominal pain radiates to back
Nausea & vomiting
Severe cases – hypoxia, hypovolemic shock with oliguria
Grey – Turner's sign

Cullens sign
Differential Diagnosis- perforated viscus
Acute cholecystitis
MI
Complications - systemic
Pancreatic
GIT
Investigations- serumamylase
Urinaryamylase
USS

CT
CRP.

2.b. Causes

Retrosternal goiter
Thymic tumoer
Dermoid cyst
Lymphoma
Aortic aneurysm
Bronchial carcinoma
Hiatus hermia
Pneumothorax
Pleural effusion
Pulmonary fibrosas

2.c. More in men

Sacro- iliac joints & spine
Cinical features
Spinal – low back pain with marked stiffness
< early morning, inactivity
> movement
Bamboo spine

Complications- spinal fracture & spinal cord compression
Restricted movements of lumbar spine
Decreased chest expansion

Extra articular - anterior uveitis
Prostatitis
Cardiovascular disease
Amyloidosis
Upper lobe pulmonary fibrosis

Investigations- Raised ESR, CRP
X-ray- bamboo spine

2.d. autoimmune disease

More in females, 40 – 50 years
Triad of dry eyes, dry mouth & RA
Raynauds phenomenon
Fatigue
Low grade fever
Anaemia
Peripheral neuropathy
Glomerulonephrits

Investigations- Raised ESR, CRP
Temporal artery biopsy

2.e. Sudden loss of Consciousness

Prodromal – headache, dizziness, nausea, convulsions, visual disturbances, high fever, cessation of sweating.

Skin is hot, fluhed, dry, rapid pulse, irregular pulse, weak pulse, low BP.

If not treated – hyper pyrexia

Management

Cooling by fanning
Sprinkling water
Immersion in cold water
Use of eyes packs
IV fluids

3.a Clinical features- polyuria, thirst
Weight loss, weakness, vomiting
Leg cramps, blurred vision, abdominal pain
Signs- dehydration
Hypotension
Cold limbs, cyanosis
Tachycardia
Kussmaul Breathing
Smell of acetone
Hypothermia

Investigations- Urine for ketons
Blood for glucose

Management- IV & insulin replacement

3.b. TB bacilli in the alveoli form a sub pleural lesion- a mass of granulomas leads to primary lesion- Ghon focus

Combination of primary lesion and regional lymphadenopathy is termed primary complex

3.c. Recurrent abdominal pain
Altered bowel habits
Abdominal distension
Rectal mucus
Feeling of incomplete defecation

Diagnosis- full blood count
ESR
Sigmoidoscopy
Barium enema
Colonoscopy

3.d. Air in pleural space

Types- spontaneous- primary
Secondary
Traumatic

Clinical features
Slow onset, dyspnoea, chest discomfort, chest pain, haemoptysis, cyanosis

Signs- Chest movements- decreased on affected side
Hyperinflated chest
TVF absence
Trachea displaced
Hyper resonance
Cardiac dullness absence

Breath sounds decreased or absent
Bronchial breath sounds

3.e. In children as syndromes of kwashiorkor & marasmus

Causes- famine, persistent vomiting, anorexia, malabsorption, maldigestion, increased physical activity, increased BMR

Cinical Features- weight loss, thirst, weakness, hypothermia, pale dry skin, hair loss, cold blue extremities, muscle wasting, mental disturbances, distended abdomen

Early weaning
Education of mother

4.Hypothyroidism

Causes
Autoimmune
Iatrogenic
Transient thyroiditis
Iodine deficiency
Congenital
Infiltrative
Secondary hypothyroidism

Clinical Features

constipation, ascites, bradycardia, hypertension, pericardial and pleural effusion, neuromuscular symptoms, dry skin and hair, alopecia, myxoedema, malar flush, carotenemia, vitiligo, menorrhagia, infertility, periorbital oedema.

DIAGNOSIS

Serum T4-decreased, TSH-Iincreased, serum enzymes-increased, hypercholesterolemia, anaemia, hyponatremia.

5.a)GTT

Indications of oral GTT

Fasting glucose- [110-126mg/dl], random glucose[140-199], unrestricted carbohydrate diet for 3 days before test, fasted overnight for atleast 8 hrs, rest before test, no smoking, plasma glucose measured before and 2 hrs after 75gm glucose load

DIAGNOSIS

Diabetes-fasting>110
2 hrs after glucose load>200

Impaired glucose tolerance-fasting<110
2 hrs after glucose load[140-199]

5.b)Fibromyalgia

Common cause of musculoskeletal pain and disability

Causes:

Sleep abnormality-non-REM, abnormal pain processing, exaggerated skin flare response, dermatographism, allodynia,

Clinical Features:

Multiple region pain, severe fatigue, severe disability, broken sleep, poor concentration,forgetfulness, earlymorning stiffness, swellingof hands and fingers with numbness and tingling

Tests:

FBC, ESR, CRP, Thyroid function test, antinuclear antibody, serum calcium, serum alkaline phosphatase

5.c) OA

After 50years- weight bearing joints, terminal phalangeal joints, metatarso phalangeal joint of big toe, sternoclavicular

Joint.

Causes:

Heriditary, obesity, high bone density, aging, trauma, usage

Clinical Features:

Pain-variable/intermittent, <movement, >rest, brief morning stiffness.

Signs:

Restricted movement, palpable or audible crepitus,swelling around joints, muscle weakness or wasting, heberden's [Bouchard's nodes]

Types:

Knee OA, hip OA, young onset OA

Investigations:

X-ray-narrowed joint space, osteophytes, para articular sclerosis.

Management:

Rest, physiotherapy, correction of risk factors, splints

5.d) Vit.A deficiency

CF:

Follicular keratosis of skin, bitot's spots, night blindness, xerophthalmia and keratomalacia, imperfect enamel formation of teeth.

Treatment:

60mg retinol,every 4-6 months orally; eat green leafy vegetables or carotene rich fruits.

5.e) Rubella

Virus, IP-14-21 days,droplet or direct contact, viremia to skin joints and placenta, if placental infection occurs in first trimester severe congenital heart disease

CF: Lymphadenopathy- post auricular, post cervical, sub occipital, macula popular rashes on face and trunk, petechial lesions[Forchheimer spots] on soft palate, coryza, conjunctivitis, fever only on first day of rash

Complications:

Diagnosis:

Rubella specific IgG and IgM.

Prevention: rubella vaccine.

6.a) Anaphylaxis:

Reaction caused by release of histamine and other mediators.

Causes:

Foods, insect bite, chemicals, drugs, foreign proteins.

CF:

Loss of consciousness, angiooedema, laryngeal obstruction, conjunctivitis, flushing, sweating, wheezes, hypotension, urticaria, itching of palms and soles, diarrhea and abdominal pain

DD:

Syncope,MI

Management:

6.b)Kala-azar: Lieshmania donovani, transmitted by phlebotomus sand flies, I.P-2weeksto 1year

CF: Fever, double peaked temperature,rigor and chills, relapse,

massive spleenomegaly, hepatomegaly,lymphadenopathy, blackish discolouration of skin, anaemia, pancytopenia, cough, epistaxis.

Diagnosis:

Stained marrow and splenic smears shows Leishman Donovan bodies, PCR, ELISA.
DD:
Malaria, typhoid, TB.
6.c)Barotrauma:
During the ascent phase of a dive-gas in diver's lungs expands due to increasing pressureand leads tolung rupture, occurs in other viscera and in middle ear and sinuses.
Management:
Nursed in horizontal position, oxygen therapy,recompression.
6.d)Genetic screening tests:
USS- 1st trimester onwards, chorionic villus biopsy-from11 weeks, amniocentesis-from 14 weeks, cordocentesis-from 19 weeks
6.e) Coeliac disease: of smallbowel,intolerance to wheat gluten and similar proteins in rye barley and oats, associated with HLA-linked autoimmune disorder.
In infants after weaning, with diarrhoea, malabsorption and failure to thrive.
In older children, delayed growth and puberty, abdominal distension
In adults, tiredness, weight loss, folate and iron defiency, oral ulcers.
Investigation:
Duodenal and jejunal biopsy,barium meal
Blood test:
Management: correct existing deficiency,exclude oat and wheat from diet.
Complications: Increased risk of malignancy.

PAPER II

1. It is an irreversible deterioration in renal function, developing over a period of years with loss of excretory metabolic and endocrine functions of kidney leading to the clinical signs and symptoms of renal failure.

Diagnosis:
In end stage renal failure-pt appears ill and anaemic, anorexia, nausea, fits and coma.
Biochemical: blood urea and creatinine
Decrease in bicarbonate,sodium, potassium, calcium, phosphate and magnesium, increase in uric acid, hyperlipidemia, anaemia
Mgmt:
Low protein diet, electrolyte requirements, tmt of hyperkalemia, salt and water intake.
2.a) Hepatic venous obstruction, rapid upper abdominal pain, marked ascites, hepatomegaly,peripheral oedema, cirrhosis, portal hypertension
Diagnosis:
LFT, ascitic fluid analysis, CT scan, MRI,liver biopsy.
2.b) Myeloproliferative stem cell disorder, granulocytic, 30-80 yrs of age, Philadelphia chromosome.
CF:

Fever with weight loss, malaise,breathlessness, anorexia, abdominal discomfort, menorrhagia, bruising, purpura, sterna tenderness, massive spleenomegaly.
Investigation:
Normocytic normochromic anaemia, increased hb, leucocytosis, increased platelets, bonemarrow aspirate shows ph chromosome, decrease in alkaline phosphatase,increased LDH and uric acid.
2.c) Positron emission tomography: In investigationof pulmonary nodules, staging mediastinal lymph nodes in pts with Ca lungs
2.d) Superficialpurulent infection,staphylococcus, in children, large bullae last for 2- 3 days, blisters burst and crust develops
2.e) Napkin eczema in babies, due to irritant ammoniacal urine and faeces.

3.a) Disorder of language content of speech, lesions in dominant hemisphere.
Types: Broca's, wernicke's, conduction, transcortical sensory and motor
3.b) Urinary cast: Cylindrical structures formed within kidney tubules by the coagulation of proteins-hyaline, granular, waxy, cellular, red cell, malignant cells.
3.c) Due to large rt-lt shunt, consists of pulmonary stenosis, over riding of VSD by aorta, VSD, rt ventricular hypertrophy.
CF:
Fallots spells, relieved by squatting, stunted growth, clubbing, cyanosis, ejection systolic murmur
ECG-Rt ventricular hypertrophy, boot shaped heart
3.d)ECG recorded during exercise on a treadmill
Bruce protocol.
To confirm diagnosis of angina, stable angina, myocardial infarction
3.e) Eating disorder
Causes: genetic, environmental.
CF: Marked weightloss, anxiety, depression, lanugo hair,anaemia, thrombocytopenia, delayed puberty, growth retardation, amenorrhea, uremia, renal calculi, osteoporosis, constipation.

4.Degenerative changes occur to varying extents in cerebellum, brain stem, pyramidal tracts, spino cerebellar tracts, optic and peripheral nerves.
Cerebellar ataxia: walk with a broad based gait, drunken gait, intention tremor, scanning speech, nystagmus, past pointing, rebound, hypotonia, pendular reflexes, dysmetria, dyssynergy, dysdiadokokinesia
Sensory ataxia: Walking difficult in poorlight, stamping gait, hysteria
5.a) most common, more in females, ostium secundum and primum defects.
CF:
Dyspnoea, chest infection, cardiac failure, arrhythmias, wide fixed splitting of S2, systolic flow murmur, CXR-enlarged heart and pul artery, ECG- incomplete RBBB, RV dilatation, RVH
5.b) Malignant proliferation of plasma cells which produce cytokines and stimulate osteoblast.
CF:
Bone pain, fractures, hypercalcemia, retinal bleeding,panda eyes, carpel tunnel syndrome, nephrotic syndrome, spinal coed compression,anaemia and Bence Jones proteinuria
5.c) Causes:
Excess sweating, GI fluid loss, renal loss, diabetes, diuretics
CF:
Sunken eyes and cheeks, weakness,faintness, muscular cramps, inelastic skin, tachycardia, collapse, death.
5.d) Relapsing mood disturbance with periods of both depressed and elevated mood-genetic, drugs.

5.e) Muscles supplied by bulbar nuclei involved, facial ,palatal and pharyngeal paralysis-change in voice, dysphagia, nasal regurgitation, choking, respiratory paralysis, death.
6.a) Causes:
In kidneys, ureter, prostate, bladder, urethra.
Investigations:
General and physical examination, urine andblood analysis, renal angiography, cystoscopy, retrograde pyelography, serum calcium and phosphorus, biopsy of prostate and kidneys.
6.b) Normal wave form with diagram and also in disease.
6.c) Usually males, 25-40 yrs, heavy smokers, medium and small arteries of legs, phlebitis, intermittent claudication, restpain, peripheral pulses altered, diagnosis by arteriography
6.d) Wheals on skin, focal dermal oedema, secondary to transient increase in capillary permeability,pruritic, angioedema.
Causes:
Autoimmune, allergens, drugs, contact, physical, infections.
6.e) Paralysis of one side of the body involving arm and leg and also the face, due to lesion in corticospinal pathway-vascular, neoplastic, inflammatory, degenerative, hypotonia of affected limb, abdomen and tendon reflexes absent on both sides, extensor plantar response on hemiplegic side

PAPER III

1.Thyroidinum, Calc.fluor, Spongia, Iodum, Bromium.
2.a) All.cepa, Ars.iod, Tuberculinum, Aralia, Sanguinaria, Lemna
2.b)Senega, Bryonia, Ant.tart, Kali.bich, Acalypha, Ipecac, Tuberculinum,Phos,Ar.alb
2.c) Actea spicata,Colchicum, Calc.fluor, Thuja, Bryonia.
2.d) Hamamelis, Bell, Aloes,Merc.cor, Carbo.veg, Ipecac, Lachesis,Millefolium, Mur.acid,Phos,Nit.acid.
2e) Ars.alb.Bismuth,Nux.vom,Phos, Kali.bich, Merc.cor.
3.a) Graphites-oozing eruptions, sticky fluid, unhealthy skin,every little injury suppurates, swelling and induration of glands
Sepia-urticaria in open air, better in warm room, herpes circinatus
3.b) Nux.vom- easily chilled, avoid open air, snuffles after exposure to dry cold, worse warm room, acrid discharge.
Sabadilla- Spasmodic sneezing, coryza, frontal head ache, redness of eyes and lachrymation, watery nasal discharge.
3.c) Agraphis-takes cold on exposure,adenoids, throat deafness, enlarged tonsils, free discharge from mucous membranes, mutinism.
Baryta.carb-takes cold easily, quinsy from every cold, worse empty swallowing, over use of voice, backward mentally and physically, very averse to strangers.
3.d) Bryonia-dry cough at night, must sit up, worse eating and drinking,stitches in chest, rust coloured sputum, as if chest would fly to pieces, must support chest, coming into warm room excites cough,better lying on painful side, pressure, rest, cold
Kali.carb- Cutting pain, dry cough at 3a.m, with stitching pains, coldness of chest, worse lyingon lt side and painful side, better by leaning forwards
3.e) Phos. Sharp cutting pains, empty gone sensation in abdomen, jaundice, vomiting, water is thrown up as soon as it gets warm in the stomach, better by cold food
Sulphur-milk disagrees, great acidity, burning, weight like pressure,weak and faint at about 11a.m., movements as of something alive, pain and soreness over pancreas.

4.Renal colic-Bell, Berb.vul[lt side], Cantharis[lt side], Dioscorea, Lycopodium[rt side], Nux.vom[rt side], Ocimum[rt side], Tabacum[lt side], Sepia.
5.a) Arg.nit, Gelsemium,Causticum, Zinc.met, Plumb.met.
5.b) Ars.sulph.flav, Nat.mur, Nit.acid, Thuja, Syphilinum, Thyroidinum,Tuberculinum.
5.c) Anacardium, Aconite, Hyoscyamus, Thuja,Arg.nit, Ignatia, Nat.mur, Tuberculinum, Pulsatilla, Sulphur, Sepia.
5.d) Aconite, Adonis,Bryonia, Digitalis, Lilium.tig, Glonoine,Naja, Spigelia,Lith.carb, Tabacum, Kalmia
5.e) Acalypha, Arnica,All.sat, Digitalis, Ferr.phos, Hamamelis, Ipecac, Millefolium,Trillium.

6.a) Gels.-feels as if heart would cease beating if not in motion, palpitation, slow, soft, weak pulse of old age.
Glon.-congestive head aches, surging of blood to head and heart,pulsating pains, pulsation throughout body, palpitation cannot go uphill, worse from sun, gas, openfire, haircut.
6.b) Lil.tig- sensation as if heart is grasped in a vice, palpitation, pain in cardiac region as of a load, angina with pain in rt arm,tachycardia, irregular very rapid pulse.
Acon.-tachycardia, pain in lt shoulder, palpitation with anxiety, fainting and tingling in fingers, pulse- full, hard, tense and bounding, throbbing of temporal and carotids.
6.c)Hep.sulph-abscesses,unhealthy skin, every little injury suppurates, deep cracks on hands and feet, ulcers very sensitive to contact, wants to be wrapped up warmly, chronic and recurring skin symptoms.
Merc.sol-moist skin, marked sweating but no relief, vescicular and pustular eruptions, buboes, swelling of glands everytime pt takes cold,itching, worse warmth of bed.
6.d) Causticum-Warts, large jagged, bleeds easily on tips of fingers and nose.
Nit.acid-Warts, large jagged, bleeds easily on washing, ulcerates with zig-zag edges.
6.e)Carbo.veg-Imperfect oxidation,sluggish,fat and lazy, cyanosis, chilliness, echymoses, lowered vital power,after effects of previous illness, limbs go to sleep, cold from knees downwards.
Selenium- Paralytic pain in small of back in the morning and tearing pain in hands at night, great debility, especially after exhausting diseases, sexual atony.

IV BHMS Materia Medica

Application of Materia Medica should be demonstrated from cases in the OP and IP departments

Each student appearing for IVth BHMS shall maintain one record comprising of twenty cases (five short and fifteen long cases) which shall be evaluated by the head of department.

List of drugs included in the Syllabus of IV BHMS Examination

In addition to the drugs mentioned for Ist, IInd & IIIrd BHMS, the following additional drugs are ir in the syllabus of Materia Medica for the IVth BHMS Examinations-

1.	Abies can	2.	Abies nig
3.	Abroma Augusta	4.	Abrotanum
5.	Acalypha indica	6.	Anthrasinum
7.	Bacilinum	8.	Baryta mur
9.	Bellis per	10.	Calotropis indica
11.	Capsicum	12.	Carbo animals
13.	Carbolic acid	14.	Carrica papaya
15.	Cassia saphra	16.	Caulophyllum
17.	Cedron	18.	Cicuta virosa
19.	Clematis	20.	Cocculus indica
21.	Coffea cruda	22.	Collinsonia
23.	Condurangeo	24.	Corrallium
25.	Crataegus	26.	Crocus savita
27.	Eupatorium per	28.	Ficus religiosea
29.	Flouric acid	30.	Glonoine
31.	Hellonius	32.	Hydrastis can
33.	Hydrocotyle as	34.	Jonosia asoka
35.	Justicia adhotoda	36.	Lac CAN
37.	lac def	38.	Lilium tig
39.	Lithium carb	40.	Lobelia inf
41.	Lyssin	42.	Magnessia carb
43.	Magnessia mur	44.	Medorrhinum
45.	Melilotus	46.	Mephitis
47.	Mercurius cynatus	48.	Mercurius dul
49.	Mezerium	50.	Mellifolium

51. Occimum sanct
52. Psorinum
53. Pyrogenum
54. Radium bromide
55. Ranunculus bulb
56. Raphanus
57. Rathania
58. Rauwolfia serpentine
59. Rheum
60. Rhododendrum
61. Rumex
62. Ruta G
63. Sabadilla
64. Sabal serulatta
65. Sabina
66. Sambucas
67. Sangunaria
68. Sanicula
69. Sarasaparilla
70. Spigelia
71. Squilla
72. Stannum met
73. Syzygium jambolanum
74. Trillium Pendulum
75. Urtica urens
76. Vaccinum
77. Variolinum
78. Veratrum viride
79. Vibrinum Opulus
80. Vinca minor
81. Vipera

Teaching hours allotted

Year	**Theory**	**Tutorial / Semina**	**Clinical**	**Total**
Ist BHMS	120	25	-	145
IInd BHMS	100	25	95	225
IIIrd BHMS	100	25	75	200
IVth BHMS	120	30	125	275

Teaching Plan – IVth BHMS

Theory – 125 hrs

Clinical / Seminar / Tutorial - 100 hrs

TEACHING PLAN

Month	Topic
1st month admission	Abies can / Abies nigra / Abroma Augusta / Abrotanum / Acalypha in Anthracinum / Bacillinum / Baryta mur / Bellis per
2nd	Calotropis / Capsicum / Carbo animalis / Carbolic acid / Carica papaya / sophera / Caulophyllum / Cedron / Cicuta
3rd	Clematis / Cocculus / Coffea / Collinsonia / Cundurango / Corallium rub Crataegus / Crocus sativus / Eupetorium perf
4th	Ficus religiosa / Flouric acid / Glonoine / Helonias / Hydrastisv/ Hydroc Jonosia Asoka / Justicea Adathoda / Lac caninum
5th	Lac defloratum / Lilium tig / Lithium carb / Lobelia inflate / Lyssin / Mag Mag mur / Medorrhinum / Melilotus
6th Month - Ist Average Examination	
7th	Mephitis / Merc cyan / Merc dulcis / Mezereum / Millifolium / Ocimum san Psorinum / Pyrogen
8th	Radium brom / Ranunculus bulb / Raphanus / Ratania / Rauwolfia / Rh Rhododendron / Rumex
9th	Ruta / Sabadilla / Sabal ser / Sabina / Sambucus / Sanguinaria / Sani Sarasaparilla
10th	Spigelia / Squilla / Stannum met / Syzigium / Trillim pendulum / Urtica u Vaccininum / Variolinum
11th	Veratrum viride / Viburnum opulus / Vinca minor / Vipera
11th Month - IInd Average Examination	
12th Month - University Examination	

IV BHMS MODEL QUESTION PAPER
DEPARTMENT OF MATERIA MEDICA,

TIME 3 hrs Max Marks-100

Answer all questions

I. Describe four characteristics of Nosodes and emphasis importance of psorinum and medorrhinum as constitutional remedies 2+9+9=20

II. Compare and contrast

a.Rumex and squilla -respiratory affections
b. Glonoine and gelsemium -headache
c. Sabina and viburnum opulus- female complaints
d. Mezereum and anthracinum- skin
e. Eupetorium and pyrogen-fever
f. Collinsonia and ratahnia-rectum
g. Abies nigra and nux vomica –GIT
h.Oscimum canum and beriberis-kidney
i. Lac defloratum and mag mur – headache
j. Ammonium mur and lycopodium –constitution 5x10=50

III. Write notes on:

a.Raphanus- hysteria
b.Cicuta –epilepsy
c. Abrotanum-child
d.Calotropis- indications
e.Crategus-heart
f.Bellis perinnis- injury
g.Caulophyllum- female
h.Vipera-phlebitis
i.Mercurius cyanide- throat
j.Condurango- cancer 3x10=30

KEY IV BHMS

I. 1. Past history of TB, cancer, syphilis
2.C/c diseases of skin, throat, extremities
3. Secretions foul smelling
4.Acts on glands
5. Conditions where best selected remedy fails. (2)

PSORINUM

1. Scabies vesicle
2. Chilly with easy perspiration
3. Ear -offensive ottorhea
4. Asthma relieved by lying with arms spread apart
5. Headache hungry during (9)

MEDORRHINUM

1. Anti sycotic
2. Weak memory
3. Asthma relieved by knee chest position
4. Aggravation early morning till sunset
5. Pelvic disorders-offensive, staining menses
6. C/c rheumatism, burning feet

II. Compare and contrast

1	Rumex- dry cough <least cold air TB left sided	Squilla- loose cough, post measles cough, excess secretions, polyuria
2	Glonoine Sun headache congestions	Gelsemium- Dull,dizzy,drowsy Polyuria. Radiation
3	Sabina- Anti sycotic Warts Rheumatism -Pubis to sacrum, pain	Viburnum- Spasmodic dysmennorhea,. >pressure

	with menorrhagia	
4 5	Mezereum- Chilly, occipital eczema, scab, breeds worm with itching. Eupatorium- Break bone fever, influenza, chill with thirst with vomiting	Anthracinum- Septicemia, boils,carbuncles,with burning pain,thick tarry blood. Pyrogen- Pulse temperature ratio altered,tongue, delerium
6	Collinsonia- Haemorrhoids, constipation, sharp sticks with heart complaints, female complaints	Ratahnia- Piles, fissure, broken glass, burning>cold water
7	Abies nigra- Old people habituated to tea, tobacco,hard boiled egg sensation,	Nux vomica- If only I could vomit, I feel better Chilly,irritable, ineffectual urging
8	Ocimum canum- Rt sided, red sand in urine, vomitting	Berberis- Left sided, bubbling sensation,backache
9	Lac defloratum- American sick headache, nausea, conatipation, menses during	Mag mur- Periodical 6 day headache Constipation

10	Amm.mur- Lemon on match stick	Lyco- Lower part semi dropsical, upper emaciated

.

III.1.Raphanus Globus hystericus & nymphomania
2. Cicuta – Bending head back with violent contraction, opisthotonus
3 Abrotanum – Marasmus,increased appetite, metastases
4Calotropis- skin, elephantiasis, leprosy
5 Crategus- cardiac dropsy,atherosclerosis
6 Bellis perinnis-like arnica, bruised, deep tissue injuries, auto traumatism.
7Caulophyllum-uterus atony, abortion, dysmennorhea, leucorrhea
8 Vipera- phlebitis, bursting sensation, modalities
9 Merc cyanatus- rapid prostration from the start, malignant diphtheria with haemorrhage, cyanosis , albuminuria
10 Condur ango-Cracks corners of mouth. Ca stomach

IV BHMS
ORGANON OF MEDICINE & PRINCIPLES OF HOMOEOPATHIC PHILIOSOPHY

Here the focus is on applied aspect of Organon & Philosophy Maximum emphasis shall be given on practice oriented teaching of Organon and Philosophy.

This can be effectively achieved by studying the various cases taken by students in OPD & IPD.

Case analysis, evaluation and synthesis takes into account the application of entire ORGANON from aphorism 1 to 294 and all principles of Philosophy as illustrated in I, II, III BHMS.

More emphasis to be given on case analysis, evaluation, Posology, Miasmatic diagnosis, potency selection and repetition of doses, second prescription, diet, regimen and other measures with principle of management during OPD and IPD visits, so that the students can have the practical knowledge of the treatment and management of the patient.

The following topics shall be taught during IV BHMS in depth:

1. Life & living environment
   with reference to:
   H.A Robert lecturers3,4,5,6
   Kent chapters - 8,9,10,11

St. Close chapters - 2,3,6,5

2. Concept of health & factors modifying it
   with reference to:
   St. Close chapters- 6
   H.A. Roberts chapters- 4
   Kent chapters- 1,7,8,9,10,11,15
3. Concept of Susceptibility
   with reference to:
   Kent chapters- 8,9,14,15
   H.A Roberts chapters - 7, 17
   St. Close chapters- 7
4. Concept of disease & Totality
   with reference to:
   St. Close chapters- 6,9
   H.A Roberts chapters - 11
   Kent chapters- 12,30,31,32,9
5. Concept of Drug, Medicine & Remedy
   with reference to:
   H.A Roberts chapters- 7,12,15
   St.Close chapters- 9, 13,14,15
   Kent chapters- 13, 18
6. Cure, Disease, Drug relationship
   with reference to:
   St. Close chapters- 9,10
   H.A. Robert chapters- 4,15,16,17
   Kent chapters- 2,3,4,34,36,37
7. Scope & Limitations of different mode of employing medicines
   with reference to:
   H.A Roberts chapters- 6,4
   Aphorism
   Dunham chapter- 2
   Hughes chapter-4
8. Classification & Evaluation of signs and symptoms
   with reference to:
   Hahnemann's organon of medicine
   Kent chapter- 32, 33
   St. Close chapters- 11, 16
   H.A. Robert chapter- 11
9. Incurable d/s, Suppression & Palliation

with reference to:
Kent chapter- 37
H.A. Robert chapters- 18,19
St. Close chapters- 4,5

10. Prophylactic
    with reference to:
    Kent chapter 15,10
11. Scope and limitation of Homoeopathy
    with reference to:
    St. Close Chapter IV
12. Remedy reaction & prognonsis
    with reference to:
    H.A. Robert chaper -14
    Kent chapter- 35
    St. Close chapter- 13
13. Principles and criteria for selection of potency and repetition of dose.
14. Dunham : Science of Therapeutics - Chapters 1-10
15. Hughes : Principles & Practice of Homoeopathy
    Chapter 1 to 10

Paper II

Chronic Miasm based on

1. Kent - Chapters 18 to 21
2. H.A. Roberts - Chapters 22 to 31
3. Stuart Close - Chapter 8
4. J.H. Allen - Chronic miasm, psora and pseudopsora - full text
5. P.N. Banerjee - Chronic Disease, its cause and cure (full text)

TEACHING PLAN
FINAL BHMS
Total Hrs: 120

I Semester-60 hrs

General Topics 1 to 7 - 7 hrs

R. Hughes Chpt 1 to 5 - 10 hrs

Dunham chpt 1 to 5 - 15 hrs

J.H. Allen - 8 hrs

P.N. Banerji - 8 hrs

Examination - 12 hrs

II Semester

General Topic 8 to 13 - 6 hrs

R. Hugher 1 to 5 - 10 hrs

Dunham 6-10 - 10 hrs

J.H. Allen - 5 hrs

P.N. Banerji - 5 hrs

Examination - 24 hrs

FINAL BHMS
Model Question Paper

ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY

Time 3 hrs **Total Marks 100**

I Essay

1 Scope and limitation of Homoeopathy and different modes of employing medicines 5+5=10

2. Knowledge of disease according to Richard Huhes 10

II Short Notes

1. Susceptibility
2. Selection of similimum
3. Action of Drugs
4. Selection of potency
5. Totality of symptoms
6. Prophylaxis

7. Alternation of remedies
8. Pseudopsora
9. Antagonism between Homoeopathy and Allopathy
10. Miasm and its Relation to abnormal growths 10 x 5 = 50 marks

III. Short Notes

1. Curantur & Curentur
2. Dead pathology & living pathology
3. Noumenon & Phenomenon
4. Drug, Medicine, Remedy
5. Scrofula
6. Simile and Similimum
7. Primary and Secondary symptoms
8. Antipsoric Medicines
9. 50 millisemal potency
10. Local Maladies 10 x 3 = 30 marks

FINAL BHMS
Scheme of valuation
ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY

Essay
1 Stuart Close chapter 4
2 Richard Hughes chapter 4

Short Notes
1 §30, §31 and §32
2 H A Roberts Chapter 17, Kent chapter 14, Stuart Close chapter 13
3 C Dunham chapter 5
4 Stuart Close chapter 13
5 Stuart Close chapter 11
6 Constitutional medicine and Genus epidemicus
7 C Dunham chapter 6 and 7
8 J H Allen, Chronic miasm
9 C Dunham chapter 2
10 J H Allen, Chronic miasm

Short Notes
1 Richard Hughes chapter 1, appendix 158 footnote
2 Richard Hughes chapter 4
3 Richard Hughes chapter 4
4 Aphorism related

5 J H Allen, Chronic miasm
6 Richard Hughes chapter 5
7 C Dunham chapter
8 §104, Chronic disease
9 §269, §270
10 §185 to §203

List of Text Books for - Final BHMS

1 Organon of Medicine 5th and 6th translated with an appendix by R E Dudgeon
2 Lectures on Homoeopathic Philosophy by James Tyler Kent
3 Principles and art of cure by Homoeopathy by H A Roberts
4 Genius of Homoeopathy by Stuart Close
5 The Chronic Diseases by Dr Hahnemann
6 Chronic Miasms J H Allen
7 Chronic Disease its Cause and Cure by P N Banerjee
8 The Principles and Practice of Homoeopathy by Richard Hughes
9 The Science of Therapeutics by C Dunham

List of reference books

1 Principles of Homoeopathy by Garth Boericke
2 A Commentary on Organon of Medicine by B K Sarkar
3 Essays on Homoeopathy by B K Sarkar
4 Samuel Hahnemann his Life and Times by Trevor M Cook
5 Life of Christian Samuel Hahnemann by Rosa Waugh Hobhouse
6 Life and Letters of Hahnemann by Bradford
7 Life of Hering Knerr
8 Homoeopathy Medicine of the New Man by George Vitholkas
9 The Science of Homoeopathy by George Vitholkas
10 The Man Unknown by Alexis Carrel
11 A Comparison of Chronic Diseases by Phyllis Speight
12 Miasmatic Diagnosis by S K Banerjee
13 Miasmatic Diagnosis by K P Mazumdar
14 Notes on Miasma by P S Ortega
15 Lectures on Theory and Practice of Homoeopathy by R E Dudgeon
16 The Art of Case Taking and Practical Repertorisation in Homoeopathy by R P Patel
17 History of Medicine byDivan Harischand
18 Glimpses of History of Medicine by D D Banerjee
19 Lesser Writings by Hahnemann
20 Lesser Writings by J T Kent
21 Lesser Writings by Farrington
22 Lesser Writings by Boeninghausen
23 Organon of Medicine 5th and 6th edition by S Hahnemann Corrected, Retranslated and Redacted by Dr Mahendra Singh and Dr Subhas Singh
24 Hahnemann's Homoeopathy by Peter Morrell
25 Art of Interrogation by Pierre Schmidt

CASE TAKING AND REPERTORISATION

II nd BHMS (One hour per week – 50 hours per year)

A. Case taking – Definition, primary object, background knowledge required, importance and utility of observation in homeopathic case taking

B. Effective methods & techniques of case taking. Pre-requisites, do's & don't's. Case taking in different clinical conditions and situations. Different methods of case taking in the class room, in clinic, open air, OPD, IPD, public & rural areas. How to set up a clinic.

C. Repertorial approach in case taking

D. Relevance of Organon in case taking & repertorisation. How to operationalize the concept of unprejudiced observer. Difficulties in taking chronic cases.

E. Case taking – Approach & concepts by classical authors.

F. Standardized case record, record keeping

G. Symptomatology- types and understating of various symptoms and their importance

H. Anamnesis, analysis & evaluation of case

I. Relevance of other clinical & non clinical subjects in case taking

III BHMS

(One hour per week – 50 hours per year)

A. Need of repertory, logic ,merits & de-merits and how to overcome it
B. History & Evolution of repertory, terminologies and language of repertories
C. Methods & techniques of repertorisation including cross repertorisation
D. Classification of repertories
F. Detailed study of Kent's repertory including rubrics and interpretations
G. Scientific methodology of repertporisation

Third BHMS (one hour per week- 50 hours a year)

- Introduction to repertory 1 hour
- Need for a repertory 1 hour
- History and evolution of repertories – 5 hours
- Classification of repertories – 5 hours
- Methods and techniques of repertorisation – 5 hours
- Limitations of repertory – 1 hour
- Steps of repertorisation – 5 hour
- Kent's repertory- Introduction
  - History of Kent's repertory
  - Philosophic background
  - Plan and construction 5 hours
- Explanation of terminologies used in Kent's repertory. – 2 hour
- Kent – Arrangement of rubrics
  - Practical guidelines
  - Important rubrics
  - Cross references - 10 hour
- Kent- concept of totality
  - Methods of working a case
  - Special features
  - Criticism 10 hours

REFERENCE BOOKS

CASE-TAKING:

1. Hutchison- Clinical methods
2. Hahnemann - Organon of medicine
3. How to take a case- Dunham.C

4. The art of case taking- Schmidt.P

REPERTORISATION

1. J, T. Kent (Enriched Indian Edition)- Repertory of the Homoeopathic Materia Medica
   Frederik Schoryens -Synthesis
   Robin Murphy -Homoeopathic Medical Repertory
   Barthel and Klunker- Synthetic Repertory

2. MunirAhmed - Introduction to principles of Repertorisation

3. Evolution of Homoeopathic repertories & repertorisations- Kishore jugal
4. Repertorisation - Tyler, Wier

1V BHMS CASETAKING AND REPERTORISATION

(Three hour per week – 150 hours per year)

A. Detailed study of Boenninghausen's TPB and Boger's repertory
B. Comparative study of 3 basic repertoires
C. Interpretation of mind rubrics, effective methods of tracing and converting mental symptoms
E. Brief idea about Concordance repertory, Gentry's repertory, Kneer's Repertory
F. A brief idea of various repertories- Kunzli's repertorium general, Card repertory ,Synthetic repertory, Oscar Boerike's, Repertorium homeopathicum Syntheticum (Synthesis), Murphy's repertory etc.
G. Computer repertory- History, construction & utility of software packages in homeopathy.
Concise knowledge of Hompath, RADAR, ISIS etc
H. Correlation of case taking & repertory with clinical & non-clinical subjects

Practical Works

Students shall repertories:-
(i) 10 acute cases on Kent.
(ii) 5 chronic cases on Kent.
(iii) 5 chronic cases on Boenninghausen.
(iv) 5 chronic cases on Bogar-Boeinninghausen.
(v) 5 cases to be cross checked on computer

Examinations

In Final Year Only
Theory : 100 Marks
Viva : 50 marks
Practical : 50 Marks
Pass mark : 50% in each item
Clinical postings: In final year only (8am – 11.30 am everyday)
Examination in Case taking and Repertory shall consist of one theory paper and one practical examination. The Practical examination shall consist of the Homoeopathic principles on case taking of one long case and one short case and the methods of arriving the reportorial totality, through case analysis and actual repertorisation. The skill of finding rubrics from Kent, TPB and Boger's repertories, the case reports of the students carried out during the course shall be considered for the oral examination.

IV BHMS
(Three hour per week – 150 hours per year)

- BTP- Introduction
  - Philosophic background
  - Plan & Construction
  - Misplaced rubrics – 10 hour

- BTP- Concept of totality
  - Adaptability
  - Methods of repertorisation – 10 hour

- BTP- use of relationship section
  - Criticism
  - Kent's view on BTP
  - Important rubrics – 08 hour

- Boger's Repertory- Introduction
  - Philosophic background
  - Plan & Construction
- Arrangement of rubrics – 10 hour

- Boger- Important use of subsections
  - Pathological generals
  - Important rubrics
  - Totality - 10 hour

- Boger- methods of repertorisation
  - Special features of repertory
  - Mind rubrics in Boger's repertory with relevance
  - Critical study – 10 hour

- Synthetic repertory- Brief idea only
  - Plan & Construction
  - Special features
  - Methods of repertorisation – 2 hour

- Potential differential field – 2 hour
- Rubrics & Cross references- 2 hour
- Origin of clinical repertories & utility – 5 hour
- Synthesising of rubrics – 2 hour
- Cross repertorisation – 2 hour

- Card repertory- Introduction
  - merits and de-merits
  - Evolution of card repertory

- Kishore's card repertory – 5 hour

- Comparative study of 3 basic repertories – rubric wise, chapter wise, philosophical etc – 10 hour
- Introduction to modern repertories-
  - Synthesis
  - Murphy
  - Kent's repertorium general
  - Complete repertory
  - Boerick repertory - 10 hour

- A brief idea about Concordance repertories – Kneer & Gentry – 2 hour
- Case repertorised by various repertories - Practical application of various repertories - 10 hour
- Interpretation of mental rubrics and methods of tracing mental symptoms – 5 hours
- Training on Softwares like ISIS, RADAR, Hompath 30 hour
- Correlation of study of repertory with clinical & non-clinical subjects – 5 hours

KERALA UNIVERISTY OF HEALTH & ALLIED SCIENCE
FINAL BHMS DEGREE EXAMINATIONS
CASE TAKING & REPERTORISATION

Time : 3 Hrs Marks : 100

1) What is anamnesis ? How past history, family history and treatment history helps in repertorisation? Explain with examples from Kent's repertory.
10

2) How will you use the concordance section of TBP. Explain with examples? 10

3) Silent features of RADAR 5
4) Concomitant symptoms with their importance 5
5) Potential Differential Field with examples 5
6) Importance of the following years in the field of repertory 5
1846, 1881, 1959,1993
7) Base books used by Boger in the compilation of his repertory ? 5
8) Develop the denotations- Morbus coxarius, Mentagra , Pertinacity, Forsaken , Onyx
5
9) Problems in the interpretation of mental symptoms 5

10) Give the rubric with chapter in Kent's Repertory -Honeymoon cystitis, Primary tuberculsosis, Icthyosis, Artificial behavior to impress others , Tubercular abscess knee
5

11) Give the rubric with chapter in TPB – Diaphram, Dislocations, Puerperal state , illusion, Bad milk
5 marks
12) Give the rubric with chapter in Boger's repertory - Chronic vertigo, Coryza from being over heated, Sea sickness , vaccination prophylactic, fever with much perspiration
5
13) Synthesis of rubrics 3
14) "Bed rock of TPB " 3

15) Criteria in the selection of rubrics 3

16) Brief note on Syntheis repertory 3

17) Brief note on concordance repertory of Gentry 3 marks
18) Boger's concept of totality 3
19) Major classification of repertories 3
20) Difference between analysis & evaluation of symptoms 3
21) Develop abbreviations - Caj , Sel , Cocaine 3
22 . 3

KERALA UNIVERSITY OF HEALTH & ALLIED SCIENCE
FINAL BHMS DEGREE EXAMINATIONS
CASE TAKING & REPERTORISATION

Answer Key

1. Medical History of the patient.
   History of Past Illness

Give Us Clue About
• Remote Aetiology
• Diagnosis
• Development Of The Disease
• Miasm
Hpi- Aetiology
• Asthma, general,eruptions, after suppressed
• injuries, genaral, chronic effects of
Hpi- Diagnosis
• Heart, Endocarditis,rheumatic
• Swelling, testes,mumps from (in infertility)

Development Of The Disease
Surgically Treated Diseases in HPI
Cataract

Family History
Give clue towards
1. Diagnosis – consanguinity in parents of a child with mental retardation suggest chromosoamal defects
2. Miasm

Treatment history
We can utilize rubrics related to treatment history from different repertories
We can avoid the use of earlier prescribed remedies
GENERALS – irritability…too much MEDICINE

2. As given in the introductory part of TPB – Concordance section

3. Contains Synthesis repertory, large number of books and many repertories in Encyclopedia Homeopathica, Winchip- patient management system , different types of analysis methods, easy to use, multi media clips and pictures, audio clips to explain rubrics

4. Dr.Boenninghausen was the first to realize the importance of the concomitants in prescribing and constructing his repertory. Dr.Boger developed the idea fully in Boger's repertory with additions and modifications.
The word concomitant means _ existing or occurring together also known as associated symptoms.
The symptom that accompany the chief are called concomitant symptom.
The concomitant bear no relation to the chief complaint than the time association. When these symptoms cannot be explained by pathology they become the characteristic symptoms.
Concomitant arise from the inherent constitutional aspects and tend to remain constant with a patient irrespective of the nature of the disease.
Rarely found combined with the main affection, here also infrequent under the same condition in the proving.
All these belongs to the another sphere of the disease than that of the main one.
Finally those which bear the distinctive marks of some drug, even if they have never before noted in the preceding relation.

5. The field which differentiate medicines. A scientific method of repertorisation. Thermal modality, miasm, desires and aversions, surgically treated symptom in the past history etc used as pdf
6. 1845 - Boenninghause's Therapeutic Pocket Book , 1881 -Herring's Analytical repertory. , 1959 -Dr. Jugal Kishores card repertory. ,1993- Homoeopathic Medical Repertory by Robin Murphy
7. 1.TPB
   2.Repertory of anipsorics
   3.Repertory of apsorics
   4.Boenniaghausen's sides of body
   5.Therapeutics of intermittent fever
   6.Therapeutics of Whooping cough
   7. Aphorisms of Hippocrates
8. Hip joint disease/infantile paralysis, Sycosis menti, Persist in one thing even if others disagree, feeling of being left alone, nail like opacity of cornea –mention with chapters in concerned repertory and its usefulness
9. Difficult to get, many rubrics with similar dictionary meaning but different interpretation and medicines, wants to confirm from friends relatives
10. Bladder- urination dysuria newly married women, chest-pthisis pulomonalis - incipient, Mind-affectation, Skin eruption scaly vesicular icthyosis, Mind-affectation, Extr. Abscess knee gonarthocace
11. Rubrics from the concerned chapter of TPB
12. Rubrics from the concerned chapter of Boger's repertory
13. When a direct rubric is not available for a condition, we can combine few rubrics related to represent that condition Eg. Osteo arthrosis- Extr. Craks joints, Extr- Stifness morning, Extr.Pain Motion amel
14. Doctrine of analogy
    Doctrine of concomitants
    Evaluation of remedies
    Concordances
15. Avoid rubrics with less than 5 medicines and more than 50, avoid two one more rubrics from same chapter, give importance to aetilogy in mind rubrics, select complete particulars than vague
16. Full name : Repertorium homeopathicum Syntheticum
    Editor : Frederick Schroyens
    Base : 6th edition of Kent's Repertory
    First edition : 1987 RADAR
    Book version : 1995
    Indian edition : 1996
    9th version of RADAR : 2004

    RADAR was first developed as research project at University of Namur,Belgium under supervision of Jean Fichefet who is a professor of Maths ,his sympathetic reaction after the homeopathic cure of his son was the begning of everything.

    Gradations : **BOLD CAPITAL**
    Bold roman
    Italics
    roman
17. Full name : Repertory of Hering's guiding symptoms of our materia medica
    Author : Clavin B Kneer (Son in law of Hering)

First edition : 1896
428 medicines, One volume, 48 chapters

Gradation : 4
II : most frequently verified by cures
I : remedies confirmed or verified on clinical practice
II : occasionally verified
I : less occasionally verified
Hand mark : cross reference]
@ theta mark : standing between the cured symptom and the pathological condition,
--- symptom observed on the sick only
: -- the perpendicular dotted line , marks observation taken from the old school such as harmonize with our law of cure.
t --- toxicological extracts

18. Quis, Quid, Ubi, qumodo, Quanto, Qubis axillus
19. LEVELS OF CLASSIFICATION
Overall appearance
Internal formatting
Group characteristics

Level.1 OVER ALL APPEARANCES
Book Repertories
Card Repertories
Software Packages

Level. 2 INTERNAL FORMATTING
Based on the internal formatting they are divided in to

#. Puritan group
#. Logical utilitarian group

20. Analysis – the act of resolving reducing or breaking the whole symptoms to pieces. Evaluation means classifying in to Mental Generals, Physical General or Particluars
21. Guiacum, Selenium, Cocane

REFERENCE BOOKS

CASE-TAKING:

1. Hutchison- Clinical methods
2. Hahnemann - Organon of medicine
3. How to take a case- Dunham.C

4.The art of case taking- Schmidt.P

REPERTORISATION

5. J, T. Kent (Enriched Indian Edition)- Repertory of the Homoeopathic Materia Medica
6. FrederikSchoryens-Synthesis
7. Robin Murphy -Homoeopathic Medical Repertory
8. Barthel and Klunker- Synthetic Repertory
9.MunirAhmed - Introduction to principles of Repertorisation
10.Evolution of Homoeopathic repertories & repertorisations- Kishore jugal
11.Repertorisation - Tyler, Wier

Community Medicine

COMMUNITY MEDICINE-111 BHMS

(Including Health Education and Family Medicine)

Instructions in this course should be given in the Fourth year of medical studies by lectures, Study of the cases on O.P, demonstrations and field studies. This subject is of utmost importance, and throughout the period of medical studies the attention of the student should be directed to the importance of preventive medicine and the measures for the promotion of positive health.

His function is not limited merely to prescribing homoeopathic medicines for curative purposes but he has a wider role to play, in the community. He has to be well conversant with the national health problems both or rural as well as urban areas so that he can be assigned responsibilities to play an effective role not only in the filed of curative but also of preventive and social medicine including family planning.

The study of Community Medicine will be carried out during the Third & Fourth B.H.M.S. course.

THIRD B.H.M.S.

1.Introduction to preventive and social medicine concept, Concepts of Health and Disease, man and society: aim and scope of preventive and social medicine, social causes of disease and social problems or the sick, relation of economic factors and environment in health and disease.

2. Food and nutrition-food in relation to health and disease. Balanced diets. Nutritional Requirements, Nutritional deficiencies, Assessment of Nutritional Status, Social aspects of Nutrition, and nutritional surveillance. Food processing, pasteurization of milk. Adulteration of food and food inspection, Food borne Disease,

The minimum number of hours for lecture, demonstration/practical, clinical and seminar classes in the **Community Medicine subjects** shall be as under:

Theory- 30 Hrs

FOURTH B.H.M.S.

1. Physiological hygiene:-

(a) Air Pollution, Ventilation, Light, Noise, and Radiation

(c) Effect of climate-humidity temperature, pressure and other meteorological conditions - comfort zone, effect of overcrowding.

(d) Personal hygiene - (Cleanliness, rest, sleep, work) Physical exercise and training care of health in tropics.

2. Environmental sanitation:

(a) Definition and importance.

(b) Atmospheric pollution-purification or air, air sterilization, air borne diseases.

(c) Water supplies-sources and uses, impurities and purification. Public water supplies in urban and rural areas. Standards of drinking water, water borne diseases.

(d) Conservancy - Methods in villages, towns and cities, septic tanks, dry earth latrines - water closets. Disposal of sewage, disposal of the deceased, disposal of refuge incineration.

(e) Sanitation affairs and festivals.

(f) Disinfection - disinfectants, deodorants, antiseptics, germicides. Methods of disinfection and sterilization.

(g) Insects-insecticides and disinfection-insects in relation to disease. Insect control.

3. Medical Statistics.

Principles and elements of vital statistics

Preventive Medicine

(a) General principles of prevention and control of communicable diseases. Plague, Cholera, Small Pox Djphteria, Leprosy, Tuberculosis, Malaria, Kala-Azar, Filariasis, Common viral disease e.g. Common Cold, Measles, Chicken Pox, Poliomyelitis, Chikungunya Fever; Japanese Encephalitis, H1N1; Kawasaki disease, Infective Hepatitis, Protozoal and Helminthic infections, Enteric fever, dysenteries, Food poisoning. and also animal diseases transmissible to man. Their description and method of preventive spread by contact, by droplet infection by environmental vehicles, (water, soil, food insects animals, founderies, prophylaxis and vaccination.

(b) General principles of prevention and control of non-communicable diseases e.g.

Hypertension, Stroke, Rheumatic Heart Disease; Cancer; Diabetes, Obesity; Blindness etc.

Natural history of diseases.

4. Maternal and Child Health school health services, health education, mental hygiene- elementary principles: school medicine its aim and methods.

5. Family Planning -Demography, channels of communication, National Family planning programme, knowledge, attitudes regarding contraceptive practices. Population and growth control.

6.Occupational Health, Mental Health;

7. Hospital waste Management, Disaster Management.

9.Health Information and Basic Medical Statistics.

10. Public health administration and international health relation

11.Epidemology: Epidemological principles and epidemiological methods.

12. Homoeopathic concept of prophylaxis, vaccination, Immunology and personal hygiene. **Hahnemann's view** on Protection against infection in Epidemic Diseases, Suggestion for the prevention of Epidemic in general; Cure & Prevention of Scarlet Fever and Asiatic Cholera.

N.B.: Field demonstration-water purification plant, infectious diseases hospitals, institutions of public health importance, field surveys, visit to industries to study occupational diseases, visit to vaccine manufacturing centers etc.

The minimum number of hours for lecture, demonstration/practical, seminar and clinical classes in the subjects shall be as under:

Sl	Theory	Practical/Clinical

.No	Theory	Total	Practical/Clinical / internal Exam	Tutorial	Seminar	Total	Grand Total
	150	150	70	10	20	100	250

Full marks for each subject and the minimum marks required for pass are as follows:

DISTRIBUTION OF MARKS

Subject	THEORY				ORAL & PRACTICAL					Grand Total	Aggregate minimum for pass
	Written	Int. Assessment	Total	Minimum For Pass	Oral	Practical	Int. Assessment	Total	Minimum For Pass		
Community Medicine	100	20	120	60	50	50	20	120	60	240	120

TEACHING PLAN

The minimum number of hours for lecture, demonstration/practical, seminar and clinical classes in each Chapter shall be as under:

Sl.No	Chapter	Divisions in each Chapter	Hours	Total Hours
01.	**Introduction;** Concept of Health & Disease		10	10
02.	Principles of Epidemiology & Epidemiological Methods; Screening for Disease		18	28
03	Screening for Disease		2	30
04.	Epidemiology of Communicable Disease	I. Respiratory Infections	16	46
		II. Intestinal Infections	10	56
		III. Arthropod-born Infections	10	66
		IV. Zoonoses	10	76
		V. Surface Infections	10	86

	Homoeopathic concept of prophylaxis			
18.	Health care of Community		1	168
19.	International Health		2	170

TEXT BOOKS & REFERENCE BOOKS

COMMUNITY MEDICINE

TEXT BOOK

Sl. No:	Name of the book	Author
1.	**Preventive and social medicine**	**K. Park**
2.	Textbook of Preventive and social medicine	B.K. M M.C. Gupta
3.	Methods in Biostatics	Mahajan
4.	Basics of Clinical Nutrition	Y.K.Joshi
5.	A treatise on Hygiene & Public Health	Ghosh.B.N
6.	The Lesser Writings of Samuel Hahnemann	R.E. Dudgeon

REFERENCE BOOKS

Sl. No:	Name of the book	Author
1.	Textbook of Preventive and social medicine	Piyush, Ghai
2.	Short Textbook of PSM	Prabhakaran

3.	TB of Community Medicine	Dr. A.P. Kulkarni
4.	Principles and practice of community medicine	Asma Rahim
5.	Clinical Dietics and Nutrition	F.P. Antia
6.	Statistics for Medical students	Mukhopadhay

Model Question Paper

KERALA UNIVERISTY OF HEALTH & ALLIED SCIENCE
FINAL BHMS DEGREE EXAMINATIONS
COMMUNITY MEDICINE

Time- 3 hours **100 marks**

I. Describe the epidemiology, Prevention and Control of Tuberculosis. (10)

II. Write Short Note on:-
1. Antenatal care
2. IUD
3. Feeding of Infants
4. Diagnosis & Prevention of different types of cancers
5. Control of Diabetes (5x 5= 25)

III Write Short notes on:-
1. Growth Chart
2. Juvenile delinquency
3. Serum Cholesterol
4. Vaccine Preventable Disease
5. Diagnosis of Leprosy (5x3=15)

IV. Describe Modern sewage treatment. What are the methods of sewage disposal? (10)

V. Short Note on:

1. Principle of Chlorination
2. Indices of Thermal Comfort
3. WHO
4. Clinical features of Chicken Pox
5. MMR & DPT (5x5=25)

VI Short Note On:

1. Composting
2. Drug abuse and Drug dependence
3. Functions of primary health centre
4. Surveillance
5. Health education. (5x 3=15)

BREAK UP OF PRACTICAL EXAMINATION

1. Practical record – 10 marks
2. Spotters – 40 marks (10 spotters carrying 4 marks each)

Scheme of evaluation

1. Epidemiology- Agent factor, source of infection, communicability

   Host factor- age, sex, heredity, nutrition, immunity

   Environmental factors

Control of TB- case finding tools, sputa examination, sputum culture, mass miniature radiography, tuberculin test, RNTCP,DOTS

Prevention :-BCG vaccination, chemo prophylaxis, general measures

II.

1. Ante natal care-antenatal visit, prenatal advice, specific health protection, mental preparation, family planning

2. Types of intra uterine devices, effectiveness, advantages, contra indication, timing of insertion.

3. Breast feeding, artificial feeding

4. cancer screening, screening for cervical, breast and lung cancers.

Prevention-primary prevention-control of tobacco and alcohol consumption, personal hygiene, radiation ,occupational exposures, immunization, food drugs and cosmetics, air pollution, treatment of precancerous lesions, cancer education and legislation

Secondary prevention-cancer registration, early detection, treatment.

5.Treatment of diabetes, glycosylated haemoglobin, self care, home blood glucose monitoring

III.

1.Growth chart-WHO chart, Chart used in India.

2.Incidence,causes, preventive measures.

3. origin of cholesterol, types of lipoproteins, their normal values

4.immunisation schedule, EPI

5.clinical examination, bacteriological examination, foot pad culture, histamine test, test for detection of CMI

IV. Primary treatment- screening grit chamber, primary sedimentation

Secondary treatment-trickling filter method, activated sludge process, secondary sedimentation, sludge digestion, disposal of effluent

Sea outfall, river outfall, land treatment, oxidation pond, ditches, modern sewage treatment plant.

V.

1.water should be free from turbidity, chlorine demand, breakpoint chlorination, contact period, free residual chlorine

2.air temperature, humidity, cooling power, effective temperature, max. allowable sweat rate.

3.objectives ,membership, work of who, structure, regions

4.Pre eruptive stage,

Eruptive stage- distribution, rapid evolution, pleomorphism, fever

5.MMR-diseases covered, age of administration, dose, reaction, contra indication

DPT-diseases covered, types, storage, optimum age, number of doses ,interval between doses, mode of administration, reactions, contra indication

VI.

1. definition, types-Bangalore method and mechanical composting.
2. definition, reasons for drug dependence, criteria for calling a person as drug addict,
Dependant producing drugs ,symptoms of drug addiction, prevention
3. functions of PHC
4. definition, types of surveillance
5. definition, aim and objectives, models of health education

FOURTH BHMS EXAMINATION

(i) No candidate shall be admitted to the Fourth BHMS examination u**nless he has passed the third BHMS** examination and he/ she has required attendance as per regulation 7 (iii) to the satisfaction of the head of the Homoeopathic Medical College.
(ii) The Fourth BHMS examination shall be held at the end of 54th month of admission of First BHMS.
(iii) The minimum number of hours for lecture, demonstration/practical, seminar and clinical classes in the subjects shall be as under:

Examination in Practice of Medicine including Pediatrics, Psychiatry and Dermatology shall consist of three theory papers and one bedside practical examination. One theory paper shall be exclusively on Homoeo. therapeutics. The Practical examination shall consist of clinical examination and oral. In the clinical examination the students shall be examined on his skill on the nosological and therapeutic diagnosis, through clinical examination, X-ray and other common diagnostic techniques and detailed case takings on long and short cases. The case reports of the students carried out during the course shall also be considered for the oral examination.

6. (v) Examination in Case taking and Repertory shall consist of one theory paper and one practical examination. The Practical examination shall consist of the Homoeopathic principles on case taking of one long case and one short case and the methods of arriving the reportorial totality, through case analysis and actual repertorisation. The skill of finding rubrics from Kent and Bonninghausan Repertories, the case reports of the students carried out during the course shall be considered for the oral examination.
(vi) Examination in Homoeopathic Materia Medica shall consist of two theory papers and one bedside practical examination. The bedside examination shall be one long case and one short case with special reference to their nosological diagnosis and therapeutic diagnosis from Homoeopathic point of view. The case reports of the students carried out during the course shall be considered for the oral examination.
7. (vii) Examination in Organon of Medicine and Principles of Homoeopathic Philosophy shall consist of two theory papers and one practical examination. The practical examination shall be on the Homoeopathic orientation of cases in relation to miasmatic diagnosis, general management, posology, second prescription etc.

(viii) The examination in Community Medicine including Health Education and Family Welfare shall consist of one theory paper and one oral examination. The oral examination shall be on spotting and identification of specimens and matters related to the community oriented problems.
(ix) In order to pass the Fourth BHMS examination, candidates have to pass in all the subjects of the examination.

Sl .N		Theory	Practical/Clinical				
	Subject	Theory including internal e	Practical/Cli including ir Exam	Tutorial	Seminar	Total	Grand Tota
01	Practice of Medicine & Homoeo therapeutics	160	220	10	20	250	410
02	Homoeopathic Materia Medica	120	125	10	20	155	275
03	Organon of Medicine, Princip Homoeopathic Philosophy	120	125	10	20	155	275
04	Case taking & Repertorisation	150	95	10	20	125	275
05	Community Medicine	150	80	10	10	100	250
	TOTAL	645	645	50	100	795	1485

(x) Full marks for each subject and the minimum marks required for pass are as follows

FOURTH BHMS COURSE -DISTRIBUTION OF MARKS

Subject	THEORY				ORAL & PRACTICAL						
	Unive Exam Writte	Int. Assessme	Tota	Minimu For Pass	Univ pract	Exam v	Int. Assessme	Tota	Minimu For Pass	Gran Total	Aggrega minimu pass
Practice Medicine	300	60	360	180	100	100	40	240	120	600	300
Case takir Repertory	100	20	120	60	50	50	20	120	60	240	120
Homoeopat Materia Me	200	40	240	120	100	100	40	240	120	480	240
Organon Medicine	200	40	240	120	100	100	40	240	120	480	240
Community Medicine	100	20	120	60	50	50	20	120	60	240	120

RESULTS AND RE-ADMISSION TO EXAMINATION

(i) Examining body may ensure that the results of the examination are published in time so that the student who successfully completes the BHMS examinations can complete the course in 5 ½ yrs after admission.

(ii) Candidates who have passed in one or more subjects need not appear in that subject or those subjects again in the subsequent examinations if the candidate passes the whole examination with in four chances including the original examination.

(iii) Facility to keep term: Not withstanding with the foregoing regulations, the students shall be allowed the facility to keep term on the following conditions:

(a) The candidate must pass the Second BHMS examination at least one term (6 months) before he is allowed to appear in the Third BHMS examination.

(b) The candidate must pass the Third BHMS examination at least one term (6 months) before he is allowed to appear in the Fourth BHMS examination.

(c) No candidate shall be given more than 4 chances to appear in First BHMS examination in the same subject.

(iv) A candidate who appears at Second or Third BHMS examinations, but fails to pass in the subject or subjects, he may be admitted to the next examination in the subject or subjects. However candidates shall be allowed to keep term as provided in (iii) above.

(v) If a candidate fails to pass in all the subjects with in four chances in examinations, he shall be required to prosecute a further course of studying all the subjects and in all parts for one year to the satisfaction of the head of the college and appearing for examination in all the subjects.

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

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

(vii) Grace marks may be awarded to the students at the discretion of the University / examining body on exceptional

circumstances

Grading of Results:

a) Candidates who pass the examination in the first appearance securing sixty five percent of the total marks shall be placed in the First class. All other successful candidates shall be placed in the second class.

b) Candidates who pass in first class and who obtain not less than seventy five percent of the marks in any subject shall be declared to have passed with Distinction in that subject.

Ranking :

Candidates who pass the whole examination shall be ranked in the order of proficiency as determent by the total marks obtained in the B.H.M.S examinations (I + II + III + IV B.H.M.S examinations) Ranking is only applicable for the publication of final B.H.M.S examination results. Those candidates who have passed all subjects of the BHMS course of studies in 1st attempt (in the regular batch) alone will be considered for giving rank certificate.

EXAMINERS

No person other than the holder of qualification prescribed for the teaching staff in Homoeopathy (Minimum Standards of Education) Regulation as amended from time to time shall be appointed as an internal or external examiner or paper-setter for the BHMS Degree Course.

Provided that:-

(a) No such person shall be appointed as an examiner unless he has at least three years continuous

regular teaching experience in the subject concerned, gained in a degree level Homoeopathic Medical College.

(b) Internal examiners shall be appointed from amongst the teaching staff of the Homoeopathic Medical College.

(c) A paper setter shall not be appointed as an internal or external examiner.

GENERAL GUIDELINES FOR ADMISSION TO EXAMINATION AND SCHEME OF EXAMINATION.

(i) The examining Body shall ensure that the minimum number of hours for lecture/ demonstration/ practical/ seminar etc. in the subjects in each examination as specified in respective regulations are followed before allowing any Homoeopathic Medical College to send the students for University examinations:

(ii) The examining body shall ensure that the students of the Homoeopathic Medical Colleges, who do not fulfill the Homoeopathy (Minimum Standards of Education) Regulation, are not sent for the University Examination.

(iii) Attendance: 75% attendance in a subject for appearing in the examinations is compulsory. The examining body may relax this on exceptional circumstances on individual merit.

(iv) Each theory paper shall be of three hours duration.

(v) The Practical/ oral examination shall be completed immediately after the theory Examination.

(vi) That the examining body shall hold examinations on such date and time as examining body may determine. The theory and practical examination shall be held in the premises of the Homoeopathic Medical College concerned.

(vii) There shall be two examinations in a year. One Regular examination and another Supplementary. The supplementary examination may be conducted with in 6 months of the Regular examination.

(viii) No student shall be permitted to join para clinical/ clinical group of subjects until he has passed in all the

pre clinical subjects of First BHMS for which he will be permitted not more than Four chances including the original examination.

(ix) No student shall be permitted to appear for Practical / oral examination without practical records in the Pre & Para clinical Departments & Case records in case of Clinical Departments.

(x) Internal Assessment:

Twenty percent marks of the University examinations may be added as marks for internal assessment, both for Theory and Practical separately for I B.H.M.S, II B.H.M.S., III B.H.M.S. & IV B.H.M.S. examinations.

Marks for internal assessment may be awarded based on the following criteria.

Criteria for the calculation of the internal assessment

20% of the marks of the university examinations may be added as marks for internal assessment, both for theory and Practical / clinical separately in each subject. The marks for internal assessment in various subjects are given in the appendixes 5 to 8 of the amendment regulations 2003.

The allocation of marks for internal assessment for each subject for various phases of the BHMS degree course shall be in the following proportions:

THEORY:

1. Internal assessment examinations : 80%
2. Assignment /general performance :20%

PRACTICAL / CLINICAL:

1. Internal assessment examinations : 80%
2. Seminar / Clinical Presentation/Other assignments : 20%

Internal assessment examinations

During each phase of the course, Internal Assessment examinations shall be conducted both in theory and practical / clinical at an interval of 5 months. There shall be three examinations for the first BHMS course and two examinations for the Second, Third and Fourth BHMS courses. The questions for the internal assessment examinations shall be on the model of University examinations.

Assignments

Each student shall prepare assignments in each subject of examinations as specified by the concerned department. There shall be minimum three assignments for First BHMS course and two assignments for Second, Third and Fourth BHMS courses in each subject. The assignments shall be submitted to the department before each internal examination. The valued assignments shall be returned to the students.

Seminar / Clinical presentations

Each student shall be required to present a seminar / clinical case on a selected topic in each subject. The evaluation of the seminar / clinical presentation shall be done by the faculty of the concerned department, based on the seminar paper, presentation and participation in discussion.

"MISCELLANEOUS"

(i) **Authorities empowered to conduct examinations:**

The Universities shall conduct the examination for the Degree Course in various States or the agencies empowered by an Act of Parliament.

(ii) **Interpretation:** Where any doubt arises to the interpretation of these regulations it shall be referred to the Central Council for clarification.

(iii) **Power to relax**: : Where any University, or Medical institution in India which grants medical qualification, is satisfied that the operation of any of these regulations causes undue hardship in any particular case, that University or Medical Institution as the case may be, may by order, for reasons recorded in writing, dispense or relax the requirement of that regulation in such an extent and subject to such exceptions and conditions as it may consider necessary for dealing with the case in a just and equitable manner .

(iv) **Saving Clause**:

Any Diploma/Degree qualification, at present included in II or III Schedule to the Homoeopathy Central Council Act where nomenclature is not in consonance with these regulations shall cease to be recognized medical qualification when granted after the 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.

(v) **Transfer of students from One College to another:**

(a) a student studying in a Homoeopathic Medical College may be allowed to migrate/transfer to another Homoeopathic Medical College under same or another University.

(b) The University concerned can allow the migration/ transfer within three months after passing the First BHMS examination, as a rule.

(c) Migration/Transfer of students during the course of their training for the clinical subjects may be avoided.

(d) The number of students migrating/ transferring from one college to another college during one year will be kept to the minimum so that the training of the regular students of that college is not adversely affected. The number of students migrating/ transferring to / from anyone college should not exceed the limit of 5% of its intake subject to a maximum of 5 students in anyone Homoeopathy College in one year.

(e) Cases not covered under the above regulations may be referred to the Council for consideration on individual merits.

(f) Intimation about the admission of migrated / transferred students into any College shall be sent to the Council fore with.

INTERNSHIP TRAINING

1. Each candidate shall be required to undergo compulsory rotating internship of one year, after passing the final BHMS Examinations, to the satisfaction of the Principal of the Homoeopathic College. Thereafter only, the candidate shall be eligible for the award of Degree of Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) by the University.

(i) (a) All parts of the internship training shall be undertaken at the hospital attached to the College, and, in cases where such hospital cannot accommodate all of its students for internship then such candidates/students shall be informed in writing by the college and it shall be the responsibility of the College to ensure that each of such students is put on internship training in a Homoeopathic Hospital or dispensary run by Government or local bodies approved by University. Training outside college will be granted only with prior permission of the University.

(ii) To enable the State Board/Council of Homoeopathy to grant provisional registration of minimum of one year to each candidate to undertake the internship, the University concerned shall issue a provisional passed certificate on passing the final BHMS examination to each successful candidate.

Provided that in the event of shortage or unsatisfactory work, the period of compulsory internship and the provisional registration shall be accordingly extended by the State Board/Council.

(iii) Full registration shall only be given by the State Boards if the BHMS degree awarded by the University concerned is a recognized medical qualification as per Section 13 (1) of the Act, and Board shall award registration to such candidates who produce certificate of completion or compulsory rotating internship

of not less than one year duration from the Principal of College where one has been a bonafide student which shall also declare that the candidate is eligible for it.

(iv) The internee students shall not prescribe the treatment including medicines, and, each of them shall work under the direct supervision of Head of Department concerned and/ or a Resident Medical Officer. No intern student shall issue any medicolegal document under his/her signatures.

(v) Each candidate shall complete the internship training at the maximum within a period of 24 months after passing the final year examination.

2. The internship training shall be regulated by the Principal in consultation with concerned Heads of Departments and R.M.O. as under :-

(i) Each internee student shall be asked to maintain a record of work which is to be constantly monitored by the Head of concerned Department and/ or Resident Medical Officer under whom the internee is posted. The scrutiny of record shall be done in an objective way to update the knowledge, skill and aptitude of internee.

(ii) The stress during the internship training shall be on case taking, evaluation of symptoms, nosological and miasmatic diagnostic analysis, repertorisation and management of sick people based on principles of Homoeopathy. Weekly seminars shall be conducted wherein interns in rotation be given a chance to present their cases for discussion, and, concerned teachers/R.M.O. shall assess performance of each of interns.

(iii) Rotation of intern-students shall be as under:

(a) Practice of Medicine - 8 Months wherein internee will be rotated in each Psychology, Respiratory, Gastro-intestinal, Endocrinology, Skin and V.D., Loco- motor, Cardiology, Paediatrics sections.

(b) Surgery – 1 Month.

(c) Obstetrics & Gynaecology - 2 months (1 month each (including Reproductive & child health care))

(d) Community medicine (including PHC/CHC) - 1 month.

(iv) Each internee shall be given exposed to clinicopathology work to acquire skill in taking samples and doing routine blood - examination, blood smear for parasites, sputum examination, urine and stool examination. Students shall be trained to correlate laboratory findings with diagnosis and management of sick people.

(v) Each internee shall be given opportunities to learn the diagnostic techniques like x-rays,

Ultrasonography, E.C.G., Spirometer and other forthcoming techniques and co-relate their findings with diagnosis and management of cases.

(vi) Each internee student shall be given adequate knowledge about issuing of medico-legal certificates including medical and fitness certificates, death certificates, birth certificates, court producers and all of such legislation's be discussed which were taught in curriculum of Forensic Medicine.

(vii) Each internee shall maintain records of 40 acute and 25 chronic cases complete in all manner including follow up in Practice of Medicine, record of 5 antenatal check- up and 3 delivery cases attended by him/her in Department of Obstetrics and 3 cases of Gynaecology; records of 5 surgical cases assisted by him (and demonstrational knowledge of dressings) in Surgery department, and records of knowledge gained in Primary Health Centres, Community health Centres, various health programmes.

(viii) It shall be compulsory for each intern-student to prove at least one drug during the Period of internship.

(ix) Each internee shall be given a liberty to choose an elective assignment on any subject, and complete out-put shall be furnished in writing by the internee in respect of elective assignment to the Principal of the College within internship duration.

(x) Each intern shall be posted on duty in such a manner that each of them attend at least 15 days in O.P.D. and 15 days in I.P.D. at least in each month (except for duty in Community Medicine) and attend the other parts of duty including self-preparation in Library.

(xi) Each intern-student shall be made to learn importance of maintaining statistics and records, intern-student shall also be familiarized with research-methodology.

(i) Each internee shall have not less than 80% (310 days)of attendance during the internship training.

(ii) Each internee shall be on duty of at least 6 hrs. per day during the compulsory internship training.

(iii) The internee can avail 20 causal leave and 35 extraordinary leave during the internship period.

(xii) As the teaching given in the Homoeopathic subjects namely Materia Medica, Organon of Medicine and case taking & Repertory have to be utilized by the internees while undergoing internship in the departments of Medicine, Surgery and Gyneacology & Obstetrics, the integration of knowledge and

training of the internee in the said subjects need to be supervised by all the teaching faculty concerning these departments. So, the holistic approach has to be maintained in the teaching & training. To facilitate this, the postings of the internees shall be done as per the following schedule.

SCHEDULE OF POSTINGS FOR INTERNSHIP

Department	**Number of days**
Materia Medica	60
Organon of Medicine	60
Case taking & repertory	45
Practice of Medicine	60
Surgery	45
Obstetrics & Gynaecology	30
Community Medicine	30
Clinical pathology	15
Pharmacy	10
Forensic Medicine	05

The remaining 5 days of the year as per schedule shall be utilized to make up the shortage of postings during the month of February and to give additional postings in various departments to complete 365 days of posting during the whole period of internship.