Case taking & Repertory Model Question Papers
Paper set by Dr Mansoor Ali

Time. 3 hrs Marks. 100
Answer all questions
Answers should be brief & accurate

PART.A
1. In foot note to aphorism one Hahnemann said that there was no necessity of knowing the cause of the disease. In aphorism four Hahnemann expressed that the physician should know the cause of the disease. Why this opposite views?
2. What is anamnesis? How age, past history, family history and treatment history helps in repertorisation? Explain with examples from Kent’s repertory.
3. What is ‘Mongrel sect’?
4. What is the basic difference between aphorism 83 with aphorism 98 in relation with case taking?
5. An unmarried girl of 18 years has developed schizophrenia. In what category of disease can it be put in the Homoeopathic stander of classification? How do you take the case & treat it?
6. What is diagnosis? How it helps in repertorisation? Explain with examples?
7. Why hypochondriac patients exaggerate more and why indolent patients details less?
8. Explain the case taking in the following situations with examples?
a) Chronic disease with acute exacerbation
b) Chronic disease without acute exacerbation
c) Acute disease with a chronic background
d) Acute disease with a different chronic background
e) Afebrile intermittent diseases

PART.B
1. Comment on base books used by Boger in the compilation of his repertory?
2. Explain the important landmark in the evolution of repertories up to Kent’s repertory?
3. Explain the general arrangement of rubrics in Boger’s repertory?
4. Explain the term ‘pathological general’ with examples?
5. Comment on Boger’s concept of totality?
6. "Boger added aggravation, amelioration & concomitants in a detailed manner at the end of every chapter why?"

PART.C
1. What are the general directions of Hahnemann for case taking in acute diseases? What special attention should be made in chronic disease of females?
2. Comment on ‘defect of repertories published’ according to Boenninghausen?
3. Even though Boenninghausen limited the number of rubrics in mind section, he devoted 17 rubrics related to Emotional excitement under Aggravation. Why?
4. Comment on ‘Other remedies’ of Boenninghausen?
5. What is the role of doctrine of concomitants in totality of symptoms?
6. What is the relation between one-sided disease & mental disease? Which class amongst these get aggravated with suitable advice, arguments & persecution?
7. Explain the view of Boenninghausen in ‘Contradictory & alternating symptoms’?
8. What is meant by repertorial syndrome?
Paper. II

1. Define anamnesis. How age, sex & occupational history helps in repertorisation? 8
2. Differentiate pathogenic & concordance repertories? 4
3. Compare the view of Hahnemann, Kent & Boger in "observations after the administration of a remedy\" 10
4. Make a note on Boger's contribution to Symptomatology & Homoeopathic Prophylaxis? 6
5. "Often it is impossible to see any remedy likeness in such a symptom group without a careful repertorisation\". Explain? 4
6. Which are the factors upon which the modified natural tendency to disease depend? 3
7. Comment on the Hahnemannian concept of socialism? 3
8. What is demanded in the investigation of a chronic case? 3
9. Make a note on subjective symptoms & particular symptoms with their importance? 4
10. Why miasms are included under the elements of symptom? 3
11. How will you workout a case on pathological generals? 4
12. "You must go fast slowly". Explain the view of M. Tyler? 3
13. What are the basic difference between primary, secondary & alternating actions of Hahnemann, Kent & Boenninghausen? 9
14. "Repertorial analysis clears our vision & points us to the remedy\". Explain? 4
15. Compare the classification of symptoms by G. Boerick with other authors? 6
16. How will you take the case in the following situations. Explain with examples?
   a) Acute disease with a chronic background
   b) Acute disease with a different chronic background
   c) In a bedridden patient
   d) In afibrile intermittent disease
   e) In half spiritual miasmatic diseases 5X2 = 10
17. How will you select an eliminating symptom from the symptoms of physical alone and how will you select a medicine if the mental symptoms presented by the patient call for more than one medicine? 5
18. How can you identify a chronic miasmatic disease? 3
19. Explain the term Vital symptom & Vicarious symptom? 4
20. Comment on the 5th grade remedies of Boenninghausen & Jahr? 4

PART. 1
1. Give the rubrics / subrubrics with chapter in Kent's Repertory
   a) Anorexia mentalis
   b) Sensation of an abscess or ulcer in the prostate
   c) Miller's asthma
   d) Weep with audible convulsive catches of breath
   e) Sensation as if fingers were thumb
   f) Chill beginning in epigastric fossa
   g) Must keep fingers apart
   h) Post herpetic neuralgia
   i) Nocturnal enuresis due to habit
j) Petit mal
k) Popliteal cyst
l) Dreams of epilepsy 12x1 = 12

2. Give the Denotations
   a) Conscientious b) Florida c) Invetrata
d) Gonarthrocace e) Fungus articulosum 5x2 = 10

3. Synthesis the rubrics for
   a) Adenoids b) Osteoarthritis
c) Rheumatic fever d) T A O 5x2 = 10

4. Develope the abbrevations
   a) Chlor b) Guaj c) Kali. a d) Kiss 4x1 = 4

5. Short notes
   a) Comment on side effects of vaccination in Kent’s repertory?
   b) How will you plan a treatment on the basis of diagnosis?
c) How will you explain that a given case has a direct relation to a particular medicine alone, not any other?

3x2 = 6

PART. 11
1. Briefly explain the arrangement of rubrics in Boger’s repertory?
2. Comment on Boger’s concept of totality
3. Pathological generals “ Explain with examples ?
4. Important landmarks in evolution of repertory?
5. Comment on compilation of Boger’s repertory?
6. What are the special advantages of using Boger’s repertory? 6x5 = 30

PART. 111
1. If the Homoeopathic world had no repertory, what would have been the fate of Homoeopaths & their patients?
2. Briefly explain the logistical, ideological & structural limitations of TPB?
3. Explain “ Bed rock of TPB ”?
4. Comment on Kent’s view on TPB?
5. Explain the use of relationship section in TPB?

**Paper III**

PART.A
1. Give the chapter, rubric / sub rubric in Kent’s repertory
   a) Dupuytrens contracture
   b) Pre menstrual tension
c) Yellow network of blood vessels on cornea
d) Bitter taste in throat, not in mouth
e) Hair falling eruptions after
f) Sense of marble in eye
g) Pre eclampsia
i) Accumulation of pus in anterior chamber of eye
j) Swelling like a walnut in Lt. male mammae
k) Muscle refuse to obey the will when attention is turned away
l) Absolute or permanent blindness
m) Sit with head on hands & elbows on knees.
n) Feels very much disturbed when steel points are directed towards her
o) Raises his foot unnecessarily high in stepping over small objects when walking

2. Give the denotations
a) Discontent b) Podagra c) Courageous d) Onyx e) Cheloid

3. Develop the abbreviations.
   a) Ferr. m b) Cupr. a c) Chlor d) Ars. h e) Arum. m

4. Short notes
   a) What is meant by analysis of symptoms? Comment on different methods.
   b) What are general directions of Hahnemann for case taking?
   c) Comment on purpose of case taking?
   d) Differentiate the rubrics 'Home sickness' & Home desire to go?
   e) Give the rubrics for a retarded child?

PART.B
1. Give the chapter/sub chapter with rubrics/sub rubrics in Boger's repertory
   a) Ailments from grief b) Sea sickness
c) Mumps d) Varicose vein
e) Cardiac complaints after rheumatism f) Lock jaw
g) Anaemia h) Slow learning to speak
   i) Psychical complaints after pregnancy j) Capriciousness
   k) Complaints after suppression of skin eruptions
   l) Mental symptoms alternate with physical
   m) Lacrimal fistula
   n) Vaccination prophylactic.

2. Short notes
   a) Fever chapter in Boger's repertory is a "self contained repertory of fever" with in the large
   repertory. Explain?
   b) Explain the working method of concordances?
   c) Comment on advantages of Boger's repertory?
   d) "Clinical rubrics" Explain with examples?
e) Why Boger constructed a repertory even though Kent's work were popular at that time?
PART C
1. Give the chapter, rubrics with sub rubrics in TPB
   a) Desire for cold juicy refreshing things
   b) Sensation as if inner parts were obstructed
   c) Asphyxia d) Un natural position
   e) Sub sultus tendinum f) Mesmerism
   g) Hang down letting limbs < h) Aversion to company
   i) Kreuz & Steiss j) Sensation of lump
   k) Pain as if from shocks l) Concussion 12x1 =12

2. Short notes
   a) Comment on Allen's contribution to TPB?
   b) Explain with examples classification of sensations by Boenninghausen?
   c) Why Boenninghausen limited the number of rubrics in mind section?
   d) Give the full name of TPB?
   e) Why Boenninghusen gives more important to < than >?
   f) 'Polychrests appearing more frequently in chronic cases'. Explain the view of Boenninghausen 6x3 =18

Paper IV

PART I
1. Write the plan and construction of kent’s Repertory (10 marks)
2. Write short notes on the following
   (a) Old method of Repertorisation (b) Computer repertory
   (c) Steps of Repertorisation (d) Kent’ mental generals
   (e) Synthesis of rubrics (5*4= 20 marks)
3. Give denotations of the following:
   (a) Defiant(b) Capriciousness(c) Ennui (d) Impetuous
   (e) Vivacious (5* 1=5 marks)
4. Write rubrics for the following conditions in kent’s Repertory
   (a) Sensitive to sad stories (b) Aversion to opposite sex
   (c) Refuses to take medicine (d) Rheumatic endocarditis
   (e) Cholelithiasis (5* 1=5 marks)

PART II
1. What are the limitations of Boenninghausen’s Characteristics Materia Medica and Repertory? (10 marks)
2. How will you use the Concordance chapter in Boger’s Repertory? (10 marks)
3. Write the chapter, sub chapter, and rubric of the following conditions in Boger’s Repertory:
   (a) Ptosis (f) Eclampsia
   (b) Complaints after gonorrhoea (g) Rheumatic metastasis to heart
   (c) Acute gastritis (h) Hydrogenoid constitution
(d) Pyeletis (I) Septic osteomyelitis
(e) Sterility (j) Panaritium  \(10 \times 1 = 10\) marks

PART III
1. Write the difference between BTP and Boger’s Repertory:  \(10\) marks 
2. Describe in detail the Plan and construction of Boenninghausen’s Therapeutic Pocket Book  \(10\) marks 
3. Where will you find the following conditions in BTP ?
(a) Frozen limbs (f) Inguinal Hernia
(b) Unconsciousness (g) Retention of urine
(c) Paralysis of optic nerve (h) Cracking of joints
(d) Comedones (I) Hysteria
(e) Waterbrash (j) Scurvy  \(10 \times 1 = 10\) marks

Paper V

Part I
1. Mention the chapters in the Kent’s Repertory, in their order. Give the general arrangement of the rubrics in Kent’s Repertory. \(5+5=10\) marks
2. Write short notes on:
(a) Elimination method
(b) Limitations of Kent’s Repertory
(c) Card Repertory
(d) Cross Repertorisation  \(4 \times 5= 20\) marks
3. Give the rubrics for the following conditions in Kent’s Repertory:
(a) Mania to drink alcohol (f) Slow healing of wounds
(b) Difficult to take decisions (g) Nocturnal enuresis
(c) Rodent ulcer (h) Parkinsonism
(d) Children put fingers in mouth (i) Homosexuality
(e) Torticollis (j) Exophthalmus  \(10 \times 1=10\) marks

Part II
1. How will you use Relationship chapter in Boenninghausen’s Therapeutic Pocket Book ?
2. What are the limitations of Boenninghausen’s Therapeutic Pocket Book ?
3. Write the chapter, rubric, and sub rubric of the following conditions in BTP:
(a) Diarrhoea alternating with constipation (f) Eruptions around eyes
(b) Hoarseness of voice (g) Hemiplegia
(c) Haemorrhagic apoplexy (h) Chicken pox
(d) Sunken eyes (I) Ring worm
(e) Hysterical convulsions (j) Emaciation of affected part.  \(10 \times 1=10\) marks
Part III
1. Describe the arrangement of Fever chapter with its utility in Boenninghausen’s Characteristics Materia Medica and Repertory: (10 marks)
2. Write Merits and Demerits of Boenninghausen’s Characteristic Materia Medica and Repertory (10 marks)
3. Where will you find the following conditions in Boger’s Repertory:
   (a) Intercostal neuralgia (f) Pin worms
   (b) Lock jaw (g) Podagra
   (c) Mentagra (h) Carphology
   (d) Gluttony (I ) Uraemia
   (e) Gall stone colic (j) Lousiness (10 *1=10 marks)

Paper VI

Part A
1. What are the general directions of Hahnemann for case taking in acute diseases? What special attention should be made in chronic disease of females? 10
2. If the homoeopathic world had no repertory, what would have been the fate of homoeopaths and their patients? 5
3. Differentiate
   a) Envy, Jealousy
   b) Aversion, Disgust 5
4. Give the rubrics/sub rubrics with chapter in Kent’s repertory
   a) Feeling of being abandoned when most needed
   b) Weep with audible convulsive catches of breath
   c) Dreams of epilepsy
   d) Sit with head on hands & elbows on knees
   e) Rheumatic endocarditis
   f) Rodent ulcer
   g) Skin cancer
   h) Miller’s asthma
   i) Sciatica with numbness 10x2= 20

Part B
5. Explain the working method of concordance chapter? 5
6. Make a note on subjective symptoms and particular symptoms with their importance? 5
7. Give the rubrics/sub rubrics with chapters in Boger’s repertory
   a) Pin worms
   b) Rheumatic fever
   c) Vaccination prophylactic
   d) Infantile constipation
   e) Septic osteomyelitis
   f) Cancerous cachexia
   g) Contraction of epigastrium while coughing
   h) Psychic complaints after pregnancy
   i) Increased growth of hair in internal parts
   j) Slow learning to walk 10x2=20

Part C
8. Briefly explain the logistical, ideological and structural limitations of TPB? 10
9. Give the denotations
   a) Florida
   b) Podagra
   c) Onyx
   d) Gonorhoscace
   e) Haughty 5x2=10
10. Give the rubrics/sub rubrics with chapter in TPB?
    a) Ring worm
    b) Hysterial convulsion
    c) Inguinal hernia
    d) Paralysis of optic nerve
    e) Sensation of inner parts obstructed 5x2=10
Paper VII

Part A

Write short notes on
1. Card repertory
2. Record keeping
3. Pathological generals
   4. Doctrine of Analogy (5x4=20)

Write the meanings of:
   a) Chlorosis
   b) Fungus hematodes
   c) Noma
   d) Cephalhaematoma
   e) Arcus senilis
   f) Pannus
   g) Onyx
   h) Affectation
   i) Impertinence
   j) Ennui (1x10=10)

Part B

1. Philosphic back ground, plan ,construction of Kent's repertory (8)
2. Synthetic repertory (5)
3. Difficulties in chronic casetaking (8)
4. Anamnensis (5) (26)

Write the meanings of
   a) Libertinism
   b) Dipsomania
   c) Reveries
   d) Amaurosis (1x4=4)

Write the chapter, rubric in Kent's repertory
   a) Premature graying of hair
   b) Horror of opposite sex
   c) Gout
   d) Hemiplagia
   e) Typhoid (5x2=10)

Part C

1. Demerits of BBCR
2. Concomittants
3. Philosophy of Therapeutic pocket book
4. Classification of repertories (5x4=20)

Write the rubrics in BBCR
   a. Pregnancy
   b. Asphyxia
   c. Illusions of touch
   d. Ascites
   e. Uric acid diathesis (5x2=10)

Write the chapter, rubrics in TPB
   a. Vertigo
b. Parotiditis  
c. Imbecility  
d. Hiccough  
e. Bedsore  

**Paper VII**

**Part-A**

1. Utility of Kent’s repertory comparing to other repertories  
2. Synthetic repertory  
3. Difficulties in chronic case taking  
4. Anamnesis  

5. Write the meanings of 
   a) Libertinism  
   b) Dipsomania  
   c) Reveries  
   d) Amaurosis  

6. Write the chapter, rubric in Kent’s repertory 
   a) Premature graying of hair  
   b) Horror of opposite sex  
   c) Gout  
   d) Hemiplagia  
   e) Typhoid  

**Part-B**

6. Write short notes on 
   1. Card repertory  
   2. Record keeping  
   3. Pathological generals  
   4. Demerits of BBCR  

7. Write the chapter, subchapter & rubrics in BBCR 
   a. Pregnancy  
   b. Asphyxia  
   c. Illusions of touch  
   d. Ascites  
   e. Uric acid diathesis  

**Part-C**

8. Write the chapter, rubrics in TPB 
   a. Vertigo  
   b. Parotiditis  
   c. Imbecility  
   d. Hiccough  
   e. Bedsore  

9. Write short notes on 
   1. Utility Concomitants in TPB  
   2. Doctrine of Analogy  
   3. Cross repertorisation  
   4. Modern method of repertorisation  
   5. Synthesis of rubrics
Paper IX

Part A

1) What is anamnesis? How past history, family history and treatment history helps in repertorisation? Explain with examples from Kent's repertory. (10)

2) Discuss about the merits of Kent's Repertory (5)

3) Brief notes on
   (a) Merits of card repertory
   (b) Post Kentian repertories
   (c) Particular symptoms with their importance
   (d) Potential Differential Field (3 x 4 = 12)

4) "No wonder that people got Repertory Funk" – Explain. (4)

5) Develop the abbreviations
   (a) Alumn (b) Ammc (c) Euph (d) Helo (e) Aur.m. (1 x 5 = 5)

6) Importance of the following years in the field of repertory
   (a) 1846
   (b) 1881
   (c) 1896
   (d) 1832 (1 x 4 = 4)

Part B

1) Philosophical Background and merits of Boenninghausn's Characteristics and repertory by Boger (12)

2) Describe briefly on
   (a) Base books used by Boger in the compilation of his repertory?
   (b) Modern method of repertorisation
   (c) Boger's concept of totality
   (d) Synthesis of rubrics
   (e) Evaluation of remedies according to Boger (3 x 6 = 18)
   (f) Repertorial syndrome?

Part C

1) Plan and construction of Boenninghausen's Therapeutic Pocket book (8)

2) Explain with examples classification of sensations by Boenninghausen (7)

3) Comment on
   (a) "Bed rock of TPB "
   (b) Boenninghausen's 'Contadictory & alternating symptoms'
   (c) Case taking of a chronic case
   (d) "Red thread cordage in the British navy"
   (e) 'Polychrests appearing more frequently in chronic cases". Explain the view of Boenninghausen (3 x 5 = 15)
Paper X

Part A

1. What are the general directions of Hahnemann for case taking in acute diseases? What special attention should be made in chronic disease of females? 10
2. If the homoeopathic world had no repertory, what would have been the fate of homoeopaths and their patients? 5
3. Compare "logical utilitarian" repertories with "puritan" repertories in their concept and utility 5
4. Make a note on evolution of card repertory 5
5. An unmarried girl of 18 years has developed schizophrenia. In what category of disease can it be put in the Homoeopathic standard of classification? How do you take the case & treat it? 10
6. Differentiate pathogenic & concordance repertories? 5

Part B

7. Explain the working method of concordance chapter? 5
8. Make a note on subjective symptoms and particular symptoms with their importance? 5
9. Fever chapter in Boger's repertory is a "self contained repertory of fever" with in the large repertory. Explain? 5
10. What is the basic difference between aphorism 83 with aphorism 98 in relation with case taking? 5
11. Explain the general arrangement of rubrics in Boger's repertory 5
12. What are the special advantages of using Boger's repertory 5

Part C

13. Briefly explain the logistical, ideological and structural limitations of TPB? 9
14. What do you mean by cross-repertorisation? Discuss its utility 5
15. Give the full name of TPB? 3
16. Comment on Kent's view on TPB? 5
17. Even though Boenninghausen limited the number of rubrics in mind section, he devoted 17 rubrics related to Emotional excitement under Aggravation. Why? 5
4. Comment on 'Other remedies' of Boenninghausen? 3

Paper XI

Part A

1. Explain the bedrock of TPB
2. Full name of therapeutic pocket book
3. Classification of sensations by Boennighausen
4. A well taken case is half cured. Explain?
5. Explain the limitations of repertory. How we can overcome it?
6. Puritan group of repertories with examples
7. Utility of mental symptoms in acute disease
8. Criteria in the selection of mental symptoms
9. Modern method of repertorisation
10. Base books used by Boger (10x5=50)

Part B

11. "Polychrests appearing more frequently in chronic cases". Explain the view of Boenninghausen
12. Differentiate pathogenic & concordance repertories?
13. Eliminating symptoms and its utility in repertorisation
14. Potential differential field
15. Why Boger constructed another repertory even though Kent’s repertory was popular at that time?
16. Utility of Pathological general with examples
   Differentiate the following rubrics with examples
17. Anxiety, Anguish, Anticipation, Fear
18. Absent minded, Absorbed and Abstraction of mind
   Develop the abbreviations
   (8x5=40)
20. Dirc  23.  (5x2=10)

**Paper XII**

**Part A**

1. Briefly describe utility of mental rubrics with examples in acute & chronic cases ? 08
2. Give the rubric/sub rubric with chapter in Kent’s repertory
   a) Aversion to riding in a carriage  b) Complaints from wisdom tooth
   c) Honeymoon cystitis  d) Shoe bite  e) Bell’s palsy
   f) Primary tuberculosis  g) Cough in organic heart disease
   h) Delirium tremens  i) Gallstone colic  j) Hoarseness of politicians 20
3. Differentiate
   a) Absent minded, Absorbed, Abstraction of mind
   b) Aversion, Hatred, Disgust
   c) Contradiction disp to, Contradiction intolerant of , Contrary 12

**Part B**

4. Explain the denotations
   a) Benevolence  b) Mentagra  c) Podagra  d) Florida  e) Onyx 10
5. Give the rubric/sub rubric with chapter/subchapter in Boger’s Repertory
   a) Slow learning to walk  b) Uric acid diathesis
   c) Cancerous cachexia  d) Scabies
   e) Emaciation of affected parts  f) Industrious
   g) Kernicterus  h) Canines teeth
   i) Paralysis of optic nerve  j) Fistulae 20

**Part C**

6. Synthesis the rubrics for
   a) Side effects of vaccination  b) Adenoids  c) TAO  d) Osteoarthritis 10
7. How will you use the concordance section of TBP? 10
8. Give the rubrics/sub rubrics with chapter in TPB?
   a) Vertigo  b) Hemorrhagic apoplexy  c) Diarrhea alternate with constipation
   d) Sensation as if inner parts were obstructed  e) Inguinal hernia 10
Paper XIII

Part A
Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in Boger’s repertory, 16-20 in Boger’s repertory?
1) Hears everything during sleep 2) Rheumatic endocarditis
3) Suppressed gonorrhea 4) Fever after getting rain
5) Horripilation 6) Pseudo paralysis
7) Cretinism 8) Acute tuberculosis
9) Fever during lactation 10) Confusion of present with past
11) Falling of hair from vertex 12) Dislocations
13) Bed wetting 14) Trachea
15) Bad milk

Develop the denotations

Develop abbreviations

Differentiate the following rubrics with examples
26. Contradiction disp to, Contradiction intolerant of, Contrary
27. Aversion, Disgust, Hatred

Part B
Briefly explain the following with examples wherever necessary
28. Silent features of RADAR
29. Sector totality and its applications
30. Explain “unreasonable attendance” with examples
31. Card repertory and its utility
32. Comparative study of Allen’s fever with fever chapter in Boger’s repertory
33. Comparative study of Gentry’s repertory with Kner repertory
34. How past history, family history and treatment history helps in repertorisation?
35. Base books used by Boger for the compilation of his repertory
36. Classification of repertories with utility
37. Explain the importance of PDF in selection of medicine

Paper XIV

Part A
Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in Boger’s repertory, 16-20 in Boger’s repertory?
1. Aversion to riding in a carriage 2. Complaints from wisdom tooth
3. Honeymoon cystitis 4. Shoe bite
5. Primary tuberculosis 6. Slow learning to walk
7. Uric acid diathesis 8. Scabies
9. Industrious 10. Canines teeth
13. Diarrhoea alternate with constipation
14. Sensation as if inner parts were obstructed 15. Inguinal hernia

Give denotations

Develop abbreviations
Differentiate the following rubrics with examples
26. Aversion, Hatred, Disgust
27. Contradiction disp to, Contradiction intolerant of , Contrary

Part B

Briefly explain the following with examples wherever necessary
28. Silent features of RADAR
29. Utility of particular symptoms
30. Post Kentian repertories
31. Card repertory
32. Comparative study of Allen’s fever with fever chapter in Boger’s repertory
33. How Boenninghausen classified sensations
34. How past history, family history and treatment history helps in repertorisation?
35. Base books used by Boger for the compilation of his repertory
36. Classification of repertories
37. Comparative study of Gentry’s repertory with Kneer repertory

Paper XV

Part A

1. What are the general directions of Hahnemann for case taking in acute diseases? What special attention should be made in chronic disease of females? 10
2. If the homoeopathic world had no repertory, what would have been the fate of homoeopaths and their patients? 5
3. Differentiate
   a) Envy, Jealousy
   b) Aversion, Disgust 5
4. Give the rubrics/sub rubrics with chapter in Kent’s repertory
   a) Feeling of being abandoned when most needed
   b) Weep with audible convulsive catches of breath
   c) Dreams of epilepsy  d) Sit with head on hands & elbows on knees
   e) Rheumatic endocarditis  f) Rodent ulcer  h) Skin cancer
   i) Miller’s asthma  j) Sciatica with numbness  10x2 = 20

Part B

5. Explain the working method of concordance chapter? 5
6. Make a note on subjective symptoms and particular symptoms with their importance? 5
7. Give the rubrics/sub rubrics with chapters in Boger’s repertory
   a) Pin worms  b) Rheumatic fever
c) Vaccination prophylactic     d) Infantile constipation 

e) Septic osteomyelitis       f) Cancerous cachexia

g) Contraction of epigastrium while coughing

h) Psychic complaints after pregnancy

i) Increased growth of hair in internal parts

j) Slow learning to walk  

10x2=20

Part C

8. Briefly explain the logistical, ideological and structural limitations of TPB? 10

9) Give the denotations

a) Florida  b) Podagra  c) Onyx  d) Gonarthocace  e) Haughty  5x2=10

10. Give the rubrics/sub rubrics with chapter in TPB?

a) Ring worm  b) Hysterical convulsion  c) Inguinal hernia

d) Paralysis of optic nerve  e) Sensation of inner parts obstructed  5x2=10

Paper XVI

Part A

Write short notes on

1. Card repertory

2. Record keeping

3. Pathological generals

4. Doctrine of Analogy (5x4=20)

Write the meanings of:

a) Chlorosis

b) Fungus hematodes

c) Noma

d) Cephalhaematoma

e) Arcus senilis

f) Pannus

g) Onyx

h) Affectation

i) Impertinence

j) Ennui (1x10=10)
Part B

1. Philosophic back ground, plan ,construction of Kent’s repertory  (8)
2. Synthetic repertory  (5)
3. Difficulties in chronic casetaking  (8)
4. Anamnesis  (5) (26)

Write the meanings of

a) Libertinism
b) Dipsomania
c) Reveries
d) Amaurosis  (1x4=4)

Write the chapter, rubric in Kent’s repertory

a) Premature graying of hair
b) Horror of opposite sex
c) Gout
d) Hemiplagia
e) Typhoid  (5x2=10)

Part C

1. Demerits of BCCR
2. Concomittants
3. Philosophy of Therapeutic pocket book
4. Classification of repertories  (5x4=20)

Write the rubrics in BCCR

a. Pregnancy
b. Asphyxia
c. Illusions of touch
d. Ascites
e. Uric acid diathesis  (5x2=10)

Write the chapter, rubrics in TPB

a. Vertigo
b. Parotiditis
c. Imbecility
d. Hiccough
e. Bedsore  (5x2=10)
Paper XVII

Part A

1) What is casetaking? How past history, family history and treatment history helps in repertorisation? Explain with examples from Kent’s repertory. (10)

2) Discuss about the merits of Kent’s Repertory (5)

3) Brief notes on
   (a) Merits of card repertory
   (b) Post Kentian repertories
   (c) Particular symptoms with their importance
   (d) Potential Differential Field (3 x 4=12)

4) Analysis & evaluation of symptoms (4)

5) Develop the abbreviations
   (a) Alumn    (b) Ammc (c) Euph    (d) Helo    (e) Aur.m. (1 x 5 =5)

6) Importance of the following years in the field of repertory
   (a) 1846
   (b) 1881
   (c) 1896
   (d) 1832 (1 x 4 =4)

Part B

1) Philosophical Background and merits of Boenninghausen’s Characteristics and repertory by Boger 12

2) Describe briefly on
   (a) Base books used by Boger in the compilation of his repertory?
   (b) Modern method of repertorisation
   (c) Boger’s concept of totality
   (d) Synthesis of rubrics
   (e) Evaluation of remedies according to Boger (3 x 6 = 18)
   (f) Cross repertorisation
Part C

1) Plan and construction of Boenninghausen’s Therapeutic Pocket book (8)

2) Explain with examples classification of sensations by Boenninghausen (7)

3) Comment on
   (a) "Base books of TPB "
   (b) Boenninghausen’s 'Contadictory & alternating symptoms'
   (c) Case taking of a chronic case
   (d) Eliminating method of repertorisation
   (e) Bell’s diarrhea (3 x 5 = 15)

Paper XVIII

Part A

Briefly explain the following with examples wherever necessary

1 What is case taking ? How treatment history ,family history and Obstetric history helps in repertorisation?

2. Utility of homeopathic software Hompath

3. Merits of Boger’s repertory in fever case

4. Classification of Modern repertories

5. Methods of elimination in repertorisation and its merits

6. Bell’s diarrhea and its relevance in modern times

7. Base books used by Boenninghausen in TPB

8. Explain the importance of PDF in selection of medicine

9. Pathological prescription using Boger’s repertory

10. Philosophic background of Kneer’s repertory (10x5 =50)

Part B

11.Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in BTP?

1) Chordee 2) Rheumatic endocarditis

3) Sycosis 4) Fever after getting rain

5) Workaholic 6) Pseudo paralysis

7) Cretinism 8) Acute tuberculosis

9) Fever during lactation 10) Confusion of present with past

11) Falling of hair from vertex 12) Dislocations
13) Bed wetting
14) Trachea

15) Bad milk

(2x15 = 30)

12. Develop the denotations
Morbus coxarius Sudoral Gonarthocace Noli me tangere Onyx (2x5 = 10)

Develop abbreviations

2. How will you use the concordance section of TBP. Explain with examples? 5 Marks

Develop abbreviations
1. Ferr 2. Guaj 3. Amm.c 4. Alumn (1 x 4 = 4)

Briefly explain the following with examples wherever necessary
5. Salient features of RADAR
6. Limitations of repertory?
7. Classification of repertories
8. Analysis & evaluation of symptoms
9. Synthetic repertory
10. Base books used by Boger.
11. Utility of concordance section in TPB
12. Fever chapter in Boger’s repertory
13. Post Kentian repertories
14. Concomitant symptoms and its utility
15. Potential differential field
16. Precautions while selecting mental symptoms (8x12 = 50)

Paper XIX

1. Utility of Kent’s repertory comparing to other repertories (8)

2. Synthetic repertory (5)

3. Difficulties in chronic case taking (8)

4. Anamnesis (5) (26)

5. Write the meanings of
a) Libertinism
b) Dipsomania
c) Reveries
d) Amaurosis (1x4 = 4)

6. Write the chapter, rubric in Kent’s repertory
   a) Premature graying of hair
b) Horror of opposite sex

c) Gout

d) Hemiplagia

e) Typhoid

(5x2=10)

**Part B**

6. Write short notes on
   1. Card repertory
   2. Record keeping
   3. Pathological generals
      4. Demerits of BBCR (5x4=20)

7. Write the chapter, subchapter & rubrics in BBCR
   a. Pregnancy
   b. Asphyxia
   c. Illusions of touch
   d. Ascites
   e. Uric acid diathesis (5x2=10)

**Part C**

8. Write the chapter, rubrics in TPB
   a. Vertigo
   b. Parotiditis
   c. Imbecility
   d. Hiccough
   e. Bedsore (5x2=10)

9. Write short notes on
   1. Utility Concomitants in TPB
   2. Doctrine of Analogy
   3. Cross repertorisation
Part A

1) What is anamnesis? How past history, family history and treatment history helps in repertorisation? Explain with examples from Kent’s repertory. (10)

2) Discuss about the merits of Kent’s Repertory (5)

3) Brief notes on
   (a) Merits of card repertory
   (b) Post Kentian repertories
   (c) Particular symptoms with their importance
       (3 x 4 = 12)

4) “No wonder that people got Repertory Funk” – Explain. (4)

5) Develop the abbreviations
   (a) Alumn  (b) Ammc (c) Euph (d) Helo (e) Aur.m. (1 x 5 = 5)

6) Importance of the following years in the field of repertory
   (a) 1846
   (b) 1881
   (c) 1896
   (d) 1832 (1 x 4 = 4)

Part C

1) Philosophical Background and merits of Boenninghausen’s Characteristics and repertory by Boger (12)

2) Describe briefly on
   (a) Base books used by Boger in the compilation of his repertory?
   (b) Modern method of repertorisation
   (c) Boger’s concept of totality
(d) Synthesis of rubrics
(e) Evaluation of remedies according to Boger (3 x 6 = 18)
(f) Repertorial syndrome?

**Part C**

1) Plan and construction of Boenninghausen’s Therapeutic Pocket book (8)
2) Explain with examples classification of sensations by Boenninghausen (7)
3) Comment on
   (a) "Bed rock of TPB "
   (b) Boenninghausen’s 'Contadictory & alternating symptoms'
   (c) Case taking of a chronic case
   (d) "Red thread cordage in the British navy"
   (e) 'Polychrests appearing more frequently in chronic cases". Explain the view of Boenninghausen (3 x 5 = 15)

**Part A**

1. Make a comparative study on speech & Voice in Kent’s repertory? (1 x 8 = 08)
2. Give the rubric/sub rubric with chapter in Kent’s repertory
   a) Tertian fever    b) Crab lice    c) Chilliness from putting hands out of bed
   d) Nightmare    e) Bell’s palsy   f) Anorexia nervosa
   g) Holding head while coughing   h) Burns
   i) Poetical dreams about future   j) Pancreatic affections (10 x 2 = 20)
3. Differentiate
   a) Jealousy, Avarice, Envy
   b) Hurry, Impatience, Impetuous
   c) Contradiction disp to, Contradiction intolerant of, Contrary (3 x 4 = 12)

**Part B**

5. Give the rubric/sub rubric with chapter/subchapter in Boger’s Repertory
   a) Retracted nipples with leucorrhoea   b) Sweats upon genitals with garlic smell.
   c) Barrenness of women   d) Scabies
   e) Mastitis alternate with oophritis   f) Falling of hair from beard
   g) Kernicterus   h) Canines teeth
i) Paralysis of optic nerve  j) Aversion to bathing  \((10 \times 2 = 20)\)

6. Synthesis the rubrics for

a) Retarded Child  b) Ground Itch  c) TAO  d) Tinea Cruris  e) Angina Pectoris  \((5 \times 2 = 10)\)

Part. C

4. Explain the denotations

a) Benevolence  b) Presumptous  c) Deserted  d) Florida  e) Gonarthocace  \((5 \times 2 = 10)\)

7. How will you use the concordance section of TBP. Explain with examples?  \((1 \times 10 = 10)\)

8. Give the rubrics/sub rubrics with chapter in TPB?

a) Parotid gland  b) Diaphram  c) Burns  d) Anus  d) Bedsore  \((5 \times 2 = 10)\)

Paper XXI

1. What are the general directions of Hahnemann for case taking in acute diseases? What special attention should be made in chronic disease of females?  \(10\)

2. If the homeopathic world had no repertory, what would have been the fate of homoeopaths and their patients?  \(5\)

3. Compare "logical utilitarian" repertories with "puritan" repertories in their concept and utility  \(5\)

4. Make a note on evolution of card repertory  \(5\)

5. An unmarried girl of 18 years has developed schizophrenia. In what category of disease can it be put in the Homoeopathic standard of classification? How do you take the case & treat it?  \(10\)

6. Differentiate pathogenic & concordance repertories?  \(5\)

Part. B

7. Explain the working method of concordance chapter?  \(5\)

8. Make a note on subjective symptoms and particular symptoms with their importance?  \(5\)

9. Fever chapter in Boger’s repertory is a "self contained repertory of fever" with in the large repertory. Explain?  \(5\)

10. What is the basic difference between aphorism 83 with aphorism 98 in relation with case taking?  \(5\)

11. Explain the general arrangement of rubrics in Boger’s repertory  \(5\)

12. What are the special advantages of using Boger’s repertory  \(5\)

Part. C

13. Briefly explain the logistical, ideological and structural limitations of TPB?  \(9\)
14. What do you mean by cross-repertorisation? Discuss its utility 5
15. Give the full name of TPB? 3
16. Comment on Kent's view on TPB? 5
17. Even though Boenninghausen limited the number of rubrics in mind section, he devoted 17 rubrics related to Emotional excitement under Aggravation. why? 5
4. Comment on 'Other remedies' of Boenninghausen? 3

**Paper XXII**

**Part A**
1. Explain the bedrock of TPB
2. Full name of therapeutic pocket book
3. Classification of sensations by Boenninghausen
4. A well taken case is half cured. Explain?
5. Explain the limitations of repertory. How we can overcome it?
6. Puritan group of repertories with examples
7. Utility of mental symptoms in acute disease
8. Criteria in the selection of mental symptoms
9. Modern method of repertorisation
10. Base books used by Boger (10x5=50)

**Part B**
11. 'Polychrests appearing more frequently in chronic cases'. Explain the view of Boenninghausen
12. Differentiate pathogenic & concordance repertories?
13. Eliminating symptoms and its utility in repertorisation
14. Potential differential field
15. Why Boger constructed another repertory even though Kent’s repertory was popular at that time?
16. Utility of Pathological general with examples
   Differentiate the following rubrics with examples
17. Anxiety, Anguish, Anticipation, Fear
18. Absent minded, Absorbed and Abstraction of mind (8x5=40)
   Develop the abbreviations

**Paper XXIII**

**Part A**
1) Brief notes on
   (a) Merits of RADAR
   (b) "The need of repertory comes from the character of homeopathy itself”.
   (c) Modern method of repertorisation
   (d) Importance of observation in case taking
   (e) Case taking in mental diseases

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(f) Paradoxical & Accidental symptoms

(g) Demerits of Kent’s repertory

(h) Merits of card repertory

(i) Methods & techniques of cross repertorisation

(j) Utility of family history in repertorisation with examples (10 x 4=40)

Part B

2) Describe briefly on

(a) Base books used by Boger in the compilation of his repertory?

(b) Why Boger constructed a repertory even though Kent’s repertory popular at that time

(c) Various signs used in Boger’s repertory

(d) Concomitant symptoms according to Boger

(e) Evaluation of remedies according to Boger (5 x 4 = 20)

3) Importance of the following years in the field of repertory

   (a) 1996
   (b) 1963
   (c) 1990
   (d) 1904
   (e) 1896 (5 x 1 =5)

4) Develop the abbreviations based on Boger’s repertory

   (a) Merc    (b) Aru.m   (c) Can    (d) Cepa    (e) M -aust (4 x 1 =5)

Part C

5) Comment on

   (a) Contribution of HA Robert to TPB
   (b) Boenninghausen’s 'Contradictory & alternating symptoms'
   (c) Utility of relationship section.
   (d) "Red thread cordage in the British navy"
   (e) How can we overcome the limitations of repertory.
   (f) "Proper use of repertory leads to correct offhand prescription within years”. Explain
(g) Case taking in a bedridden patient

6) Full name of TPB

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**Paper XXIV**

**Part A**

1. Briefly describe utility of mental rubrics with examples in acute & chronic cases?  
2. Give the rubric/sub rubric with chapter in Kent’s repertory
   a) Aversion to riding in a carriage  
   b) Complaints from wisdom tooth  
   c) Honeymoon cystitis  
   d) Shoe bite  
   e) Bell’s palsy  
   f) Primary tuberculosis  
   g) Cough in organic heart disease  
   h) Delirium tremens  
   i) Gallstone colic  
   j) Hoarseness of politicians
3. Differentiate
   a) Absent minded, Absorbed, Abstraction of mind  
   b) Aversion, Hatred, Disgust  
   c) Contradiction disp to, Contradiction intolerant of , Contrary
4. Explain the denotations  
   b) Benevolence  
   c) Mentagra  
   d) Florida  
   e) Onyx
5. Give the rubric/sub rubric with chapter/subchapter in Boger’s Repertory
   a) Slow learning to walk  
   b) Uric acid diathesis  
   c) Cancerous cachexia  
   d) Scabies  
   e) Emaciation of affected parts  
   f) Industrious  
   g) Kernicterus  
   h) Canines teeth  
   i) Paralysis of optic nerve  
   j) Fistulae
6. Synthesis the rubrics for
   b) Side effects of vaccination
   b) Adenoids
   c) TAO
   d) Osteoarthritis
7. How will you use the concordance section of TBP?
8. Give the rubrics/sub rubrics with chapter in TPB?
Paper XXV

Part.A
Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in BTP?

1) Hears everything during sleep
   2) Rheumatic endocarditis

3) Suppressed gonorrhea
   4) Fever after getting rain

5) Horripilation
   6) Pseudo paralysis

7) Cretinism
   8) Acute tuberculosis

9) Fever during lactation
   10) Confusion of present with past

11) Falling of hair from vertex
    12) Dislocations

13) Bed wetting
    14) Trachea

15) Bad milk

(2x15 =30)

Develop the denotations

(2x5 =10)

Develop abbreviations

(1 x 5 =5)

Differentiate the following rubrics with examples
26. Contradiction disp to, Contradiction intolerant of, Contrary
27. Aversion, Disgust, Hatred

(2.5 x2 =5)

Part.B
Briefly explain the following with examples wherever necessary
28. Silent features of RADAR
29. Sector totality and its applications
30. Explain “unreasonable attendance” with examples
31. Card repertory and its utility
32. Comparative study of Allen’s fever with fever chapter in Boger’s repertory
33. Comparative study of Gentry’s repertory with Kner repertory
34. How past history, family history and treatment history helps in repertorisation?
35. Base books used by Boger for the compilation of his repertory
36. Classification of repertories with utility
37. Explain the importance of PDF in selection of medicine

(5x10=50)
Paper XXVI

Part A
Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in BTP?
1) Honeymoon cystitis 2) Hold larynx on coughing
3) Bed seems too hard 4) Fever after getting rain
5) Icthyosis 6) Chronic vertigo
7) Coryza from being over heated 8) Sea sickness
9) O & U in upper extremities 10) Breast feeding aggravates
11) Dislocations 12) Illusion
13) Puerperal state 14) Dislocations
15) Bad milk

Develop the denotations

Develop abbreviations

Differentiate the following rubrics with examples
26. Brooding, Dwelling, Absorbed
27. Impertinence, Insolent, Temerity

Part B
Briefly explain the following with examples wherever necessary
28. Salient features of CARA
29. Importance of Observation with repertorial examples
30. Criteria in the selection of rubrics
31. Modern method of repertorisation
32. Comparative study of Allen’s fever with fever chapter in Boger’s repertory
33. Discuss the significance of mental symptoms in Kent’s concept and how it differs from Boennianaghusen’s concept of repertorisation.
34. Intellectual symptoms and its use in selection of remedy
35. Give reason for grading the symptoms and remedies in repertories
36. Certain remedies in sub rubrics are not included in main rubrics in Kents’ repertory. Why?
37. Mention the names of 5 American repertorians

(5x10 = 50)

Paper XXVII

Part A
Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in BTP? (Questions 1 to 15 carries two mark each)
1. Aversion to riding in a carriage 2. Complaints from wisdom tooth
3. Honeymoon cystitis 4. Shoe bite
5. Primary tuberculosis 6. Slow learning to walk
7. Uric acid diathesis 8. Scabies
9. Industrious  10. Canines teeth  
13. Diarrhoea alternate with constipation  
14. Sensation as if inner parts were obstructed  
15. Inguinal hernia  

Give denotations (Questions 16 to 20 carries 2 marks each)  

Develop abbreviations (Questions 21 to 25 carry one mark each)  

Differentiate the following rubrics with examples (Questions 26 & 27 carry 2.5 marks each)  
26. Aversion, Hatred, Disgust  
27. Contradiction disp to, Contradiction intolerant of, Contrary  

Part.B  

Briefly explain the following with examples wherever necessary (Questions 28 to 37 carries 5 marks each)  
28. Silent features of RADAR  
29. Utility of particular symptoms  
30. Post Kentian repertories  
31. Card repertory  
32. Comparative study of Allen’s fever with fever chapter in Boger’s repertory  
33. How Boenninghausen classified sensations  
34. How past history, family history and treatment history helps in repertorisation?  
35. Base books used by Boger for the compilation of his repertory  
36. Classification of repertories  
37. Comparative study of Gentry’s repertory with Kner repertory  

(5x10=50)
30. Post Kentian repertories
31. Card repertory
32. Comparative study of Allen’s fever with fever chapter in Boger’s repertory
33. How Boenninghausen classified sensations
34. How past history, family history and treatment history helps in repertorisation?
35. Base books used by Boger for the compilation of his repertory
36. Classification of repertories
37. Comparative study of Gentry’s repertory with Kneer repertory

Paper XXIX

Part A

1) What is anamnesis? How past history, family history and treatment history helps in repertorisation? Explain with examples from Kent’s repertory. (10)

2) Discuss about the merits of Kent’s Repertory (5)

3) Brief notes on
   (a) Merits of card repertory
   (b) Post Kentian repertories
   (c) Particular symptoms with their importance
   (d) Potential Differential Field (3 x 4 = 12)

4) “No wonder that people got Repertory Funk” – Explain. (4)

5) Develop the abbreviations
   (a) Alumn (b) Ammc (c) Euph (d) Helo (e) Aur.m. (1 x 5 = 5)

6) Importance of the following years in the field of repertory
   (a) 1846
   (b) 1881
   (c) 1896
   (d) 1832 (1 x 4 = 4)

Part C

1) Philosophical Background and merits of Boenninghausen’s Characteristics and repertory by Boger (12)

2) Describe briefly on
   (a) Base books used by Boger in the compilation of his repertory?
   (b) Modern method of repertorisation
   (c) Boger’s concept of totality
(d) Synthesis of rubrics
(e) Evaluation of remedies according to Boger  \( (3 \times 6 = 18) \)
(f) Repertorial syndrome?

**Part C**

1) Plan and construction of Boenninghausen’s Therapeutic Pocket book \( (8) \)
2) Explain with examples classification of sensations by Boenninghausen \( (7) \)
3) Comment on
   (a) “Bed rock of TPB”
   (b) Boenninghausen’s ‘Contadictory & alternating symptoms’
   (c) Case taking of a chronic case
   (d) “Red thread cordage in the British navy”
   (e) ‘Polychrests appearing more frequently in chronic cases”. Explain the view of Boenninghausen
\( (3 \times 5 = 15) \)

**Paper XXX**

**Part A**

Briefly explain the following with examples wherever necessary
1 What is anamnesis? How past history, family history and treatment history helps in repertorisation?
2. Salient features of RADAR
3. Limitations of repertory?
4. Classification of repertories
5. Analysis & evaluation of symptoms
6. Synthetic repertory
7. Base books used by Boger.
8. Comment on Bell’s Diarrhoea
9. Modern method of repertorisation
10. Eliminating symptoms and its utility in repertorisation \( (10 \times 5 = 50) \)

**Part B**

1) Importance of the following years in the field of repertory
   (a) 1846
   (b) 1881
   (c) 1896
   (d) 1832
   (e) 1805 \( (5 \times 1 = 5) \)
2. How will you use the concordance section of TBP. Explain with examples?

3. Contribution of HA Robert to TPB

4. Utility of mental symptoms in acute diseases

5. Potential differential field

6. "Red thread cordage in the British navy"

7. How can we overcome the limitations of repertory.

8. "Proper use of repertory leads to correct offhand prescription within years”. Explain

9. Case taking in a bedridden patient (9 x 5 = 45)

Part A

Briefly explain the following with examples wherever necessary

1. What is case taking ? How treatment history, family history and Obstetric history helps in repertorisation?

2. Utility of homeopathic softwares in repertorisation

3. Merits of Boger’s repertory in fever case

4. Classification of Modern repertories

5. Methods of elimination in repertorisation and its merits

6. Bell’s diarrhea and its relevance in modern times

7. Base books used by Boenninghausen in TPB

8. Explain the importance of PDF in selection of medicine

9. Pathological prescription using Boger’s repertory

10. Philosophic background of Kneer’s repertory (10x5 = 50)

Part B

11. Give the rubric/sub rubric with chapter in the following repertories (1-5 in Kent’s repertory, 6-10 in Boger’s repertory, 11-15 in BTP?

1) Chordee

2) Rheumatic endocarditis

3) Sycosis

4) Fever after getting rain

5) Workaholic

6) Pseudo paralysis

7) Cretinism

8) Acute tuberculosis

9) Fever during lactation

10) Confusion of present with past

11) Falling of hair from vertex

12) Dislocations

13) Bed wetting

14) Trachea

15) Bad milk

(2x15 = 30)
12. Develop the denotations
   Morbus coxarius  Sudoral  Gonarthocace  Noli me tangere  Onyx  
   (2x5 =10)

Develop abbreviations
   (1 x 5 =5)
2. How will you use the concordance section of TBP. Explain with examples?  5 Marks