

KERALA UNIVERSITY OF HEALTH SCIENCES

THRISSUR – 680 596, KERALA



**REGULATIONS, CURRICULUM, AND SYLLABUS OF
BACHELOR OF HOMOEOPATHIC
MEDICINE
AND SURGERY (B.H.M.S)**

**AS PER THE HOMOEOPATHY (DEGREE COURSE) AMENDMENT
REGULATIONS 2003**

(With effect from 2010-11 onwards)

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1. INTRODUCTION

1.1 Preamble

The regulation of the Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) being conducted by the Kerala University of Health Sciences is in accordance with the recommendations of Central Council of Homoeopathy with an emphasis on the health care needs of the Kerala State.

2. AIMS AND OBJECTIVES OF COURSE

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-ORDINATION:

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.

3. REGULATIONS

3.1 Academic 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.

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

3.2 Selection of Students

The Selection of students for the B.H.M.S course shall be made based strictly on merit as decided by the competent authority approved by the Government of Kerala/Kerala University of Health Sciences and as per guidelines of Central Council of Homoeopathy.

3.3 Registration

A candidate on admission to the B.H.M.S course shall apply to the University for Registration.

- a. By making a formal application in the prescribed format.
- b. Original mark lists of qualifying examination.
- c. Allotment letter from the competent authority.
- d. Eligibility and migration certificate wherever needed.
- e. Original SSLC/equivalent certificate.
- f. The fees prescribed for the course.
- e. Transfer Certificate from the previous institution.

3.4 Duration of course

The total duration of the course is five and half years, including one year internship. 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 |
| Final 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 unless he/she pass First BHMS 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.

3.5 Medium of Instruction

Medium of instruction shall be in English.

3.6 Course outline

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

3.7 Migration and Transfer

No migration or transfer will be allowed during the entire course of study and internship.

3.8 Attendance

A minimum of 80% attendance both in theory and clinical/practical separately is needed to appear for the University examination.

3.9 Examination

3.9.1 Essentialities for qualifying to appear in professional examinations.

The performance in essential components of training are to be assessed, based on:

3.9.2 Internal Assessment

(a) Criteria for the calculation of the internal assessment

20% of the marks of the semester and model 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 :10%
3. Based on the percentage of attendance secured : 10%

Practical/Clinical:

1. Internal assessment examinations : 80%
2. Seminar / Clinical Presentation/Other assignments : 10%
3. Based on the percentage of attendance secured : 10%

(b) 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, including one model examination in all. The questions for the internal assessment examinations shall be on the model of University examinations.

A minimum of 35% marks in internal assessment in theory and clinical/practical + viva voce (or viva voce alone) separately is needed to appear for university examination.

(c) 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.

(d) 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.

3.9.3 Eligibility to appear for the University Examination

A student who has secured 35% marks for internal assessment is qualified to appear for University examination provided he/she satisfies that percentage of attendance requirement as said already.

3.9.4 University Examinations

I) 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 university examination and publication of results shall be completed towards the end of 18th 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:

FIRST BHMS COURSE -DISTRIBUTION OF HOURS

| Sl .No | Subject | Theory | Practical/Clinical | | | | Grand Total |
|-----------|---|--|---|----------|---------|-------|----------------|
| | | Theory includi ng interna l exam | Practical/ Clinical including internal Exam | Tutorial | Seminar | 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 marks required for passing First BHMS should be as follows:

FIRST BHMS -Scheme of Examination

| Subject | THEORY | | | | ORAL & PRACTICAL | | | | | | Grand Total | Aggregate minimum for pass |
|---|-------------------------|--------------|-----------------|--------------------------|----------------------|-----------|-------|--------------|-----------------|-------------------------------------|-------------|----------------------------|
| | University Exam Written | Min for Pass | Int. Assessment | Total including internal | University practical | Exam Viva | Total | Min for pass | Int. Assessment | Total including internal assessment | | |
| Homeopathic Pharmacy | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| Anatomy | 100+ 100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| Physiology including Biochemistry | 100+ 100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| Homeopathic Materia & Medica | 100 | 50 | 20 | 120 | Nil | 50 | 50 | 25 | 10 | 60 | 180 | 90 |
| Organon of Medicine, Principles of Homoeopathic Philosophy and Psychology | 100 | 50 | 20 | 120 | Nil | 50 | 50 | 25 | 10 | 60 | 180 | 90 |

II) 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 3.8 to the satisfaction of the , head of the Homoeopathic Medical College.

(ii) The Second BHMS university examination and the publication of results shall be completed towards 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

| Subject | Theory | Practical/Clinical | | | | |
|---|--------------------------------|---|----------|---------|-------|-------------|
| | Theory including internal exam | Practical /Clinical including internal Exam | Tutorial | Seminar | Total | Grand Total |
| Pathology and Microbiology including Parasitology Bacteriology and Virology | 200 | 70 | 10 | -- | 80 | 280 |
| Forensic Medicine & Toxicology | 80 | 20 | 10 | 40 | 70 | 150 |
| Organon of Medicine and Principles of Homoeopathic Philosophy | 125 | 75 | 10 | -- | 85 | 210 |
| Homoeopathic Materia Medica | 75 | 75 | 10 | -- | 85 | 160 |
| 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 |
| Total | | | | | | 1250 |

(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, practicals and 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- Scheme of Examination

| Subject | THEORY | | | | ORAL & PRACTICAL | | | | | | Grand Total | Aggregate minimum for pass |
|---------|---------|--------------|----|-------------------------------------|------------------|-----------|-------|--------------|----|-------------------------------------|-------------|----------------------------|
| | Theory | Min for Pass | IA | Total including internal assessment | Uni. Practical | Exam Viva | Total | Min for Pass | IA | Total including internal assessment | | |
| FM | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| PATHO | 100+100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| MM | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| OM | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |

III) 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 to the satisfaction of the head of the Homoeopathic Medical College.

(ii) The Third BHMS university examination and the publication of results shall be completed towards 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 | Subject | Theor y | Practical/Clinical | | | | Grand Total |
|--------|--|--------------------------------|--|----------|---------|-------|-------------|
| | | Theory including internal exam | Practical/Clinical including internal Exam | Tutorial | Seminar | Total | |
| 01 | Practice of Medicine & Homoeo therapeutics | 75 | 75 | Nil | Nil | 75 | 150 |

| | | | | | | | |
|----|--|-----|-----|-----|-----|-----|-------------|
| 02 | Surgery including ENT, Ophthalmology & dental & Homoeo. therapeutics | 150 | 75 | 10 | 20 | 105 | 255 |
| 03 | Obstetrics & Gynaecology Infant care & Homoeo. therapeutics | 150 | 75 | 10 | 20 | 105 | 255 |
| 04 | Homoeopathic Materia Medica | 120 | 100 | 10 | 20 | 130 | 250 |
| 05 | Organon of Medicine, Principles of Homoeopathic Philosophy | 120 | 100 | 10 | 20 | 130 | 250 |
| 06 | Case taking & Repertorisation | 40 | Nil | Nil | Nil | Nil | 40 |
| 07 | Community Medicine | 80 | Nil | Nil | Nil | Nil | 80 |
| | TOTAL | | | | | | 1280 |

(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 - Scheme of Examination

| Subject | THEORY | | | | ORAL & PRACTICAL | | | | | | Grand Total | Aggregate minimum for pass |
|--------------------------|-------------------------|--------------|-----------------|-------------------------------------|----------------------|-----------|-------|--------------|-----------------|-------------------------------------|-------------|----------------------------|
| | University Exam Written | Min for pass | Int. Assessment | Total including internal assessment | University practical | Exam Viva | Total | Min for pass | Int. Assessment | Total including internal assessment | | |
| Surgery | 100+100 | 150 | 60 | 360 | 100 | 100 | 200 | 100 | 40 | 240 | 600 | 300 |
| Obstetrics & Gynaecology | 100+100 | 150 | 60 | 360 | 100 | 100 | 200 | 100 | 40 | 240 | 600 | 300 |
| MATERIA MEDICA | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| Organon of Medicine | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |

FOURTH BHMS EXAMINATION

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

(ii) The Fourth BHMS university examination and publication of the results shall be completed towards 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.

(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.

(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.

FOURTH BHMS COURSE – DISTRIBUTION OF HOURS

| Sl.No | Subject | Theory | Practical/Clinical | | | | Grand Total |
|-------|--|--------------------------------|--------------------------------------|----------|---------|-------|-------------|
| | | Theory including internal exam | Practical/ Clinical including i Exam | Tutorial | Seminar | Total | |
| 01 | Practice of Medicine & Homoeo therapeutics | 150 | 220 | -- | -- | 220 | 370 |
| 02 | Homoeopathic Materia Medica | 100 | 95 | -- | -- | 95 | 195 |
| 03 | Organon of Medicine, Princip Homoeopathic Philosophy | 100 | 95 | -- | -- | 95 | 195 |
| 04 | Case taking & Repertorisation | 125 | 150(Includin Semianr) | -- | -- | 150 | 275 |
| 05 | Community Medicine | 100 | 100 | -- | -- | 100 | 200 |
| | TOTAL | | | | | | 1235 |

(x) Full marks for each subject and the minimum marks required for pass are as follows

FOURTH BHMS COURSE - Scheme of Examination

| Subject | THEORY | | | | ORAL & PRACTICAL | | | | | | GrandTotal | Aggregate Minimum for Pass |
|-----------------------------|-------------------------|--------------|-----------------|-------|----------------------|-----------|-------|--------------|-----------------|-------|------------|----------------------------|
| | University Exam Written | Min for pass | Int. Assessment | Total | University practical | Exam viva | Total | Min for pass | Int. Assessment | Total | | |
| Practice of Medicine | 100+ 100+ 100 | 150 | 60 | 360 | 100 | 100 | 200 | 100 | 40 | 240 | 600 | 300 |
| Case taking & Repertory | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| Homoeopathic Materia Medica | 100+ 100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| Organon of Medicine | 100+ 100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| Community Medicine | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |

3.10 Criteria for Pass

Considering the C.C.H norms the following criteria shall be observed.

1. In each of the subjects, a candidate must obtain 50% of the aggregate for a pass.

[University theory + university practicals/clinical + viva voce + internal assessment]

This should be implemented to all the examinations from January 2013 onwards.

2. In the university theory, the candidate must obtain 50% marks exclusively.

3. In the university practicals/clinical+viva voce, the candidate must obtain 50% marks

Exclusively.

This shall be implemented to all the examinations from January 2013 onwards.

3.11 Declaration of class

Candidates who pass the whole examination shall be ranked in the order of proficiency as determined by the total marks and shall be arranged in three classes .

- i. Distinction - 75% and above
- ii First Class - 65% and above, less than 75%
- iii Second Class - 50% and above, less than 65%

All candidates who fail in the first attempt in any subject and pass subsequently shall not be ranked in distinction or first class.

3.12 Award of Rank

- i. Only candidates who have passed all the subjects of the examination in first attempt will be considered for ranking.
- ii. Marks obtained in supplementary examinations will not be considered for ranking.
- iii. Rank will be awarded only after the Final BHMS examination.
- iv. For ranking in the Final BHMS, aggregate marks secured in all the subjects from I to IV BHMS will be counted.

3.13 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: Notwithstanding 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 from 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

3.14 Qualification for 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.

3.15 Internship Training

1.(i) 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.

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. No intern student shall issue any medico-legal 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 the Hospital Superintendent 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 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 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 interneer shall be given a liberty to choose an elective assignment on any subject, and complete out-put shall be furnished in writing by the interneer 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.

3. (i) The resources and expertise of the clinical departments in the Homoeopathic subjects namely Materia Medica, Organon of Medicine and case taking & Repertory have to be utilized by the interneers and they shall be given exposure in clinical pathology, physiotherapy etc. while undergoing internship. In order to attain this, during the rotator internship in the clinical departments of Practice of Medicine, Surgery and Gyneacology & Obstetrics, the interneer shall be posted in all the Homoeopathic departments as per the schedule given below.

| | |
|---|------------|
| Practice of Medicine | : 2 months |
| Surgery | : 1 month |
| Obstetrics & Gynaecology | : 1 month |
| Materia Medica | : 2 months |
| Organon of Medicine | : 2 months |
| Case taking & Repertory | : 2 months |
| Community Medicine | : 1 month |
| Clinical pathology / pharmacy / Forensic medicine / Physiotherapy | : 1 month |

(ii) Each interneer shall have not less than 80% of attendance during the internship training in each of the departments. If he /she fails to attain 80% attendance in any of the above departments, he/she shall be given an extension posting as per the discretion of the HOD of the concerned department.

I BHMS

SYLLABUS

ORGANON OF MEDICINE, PRINCIPLES OF HOMOEOPATHIC

PHILOSOPHY & 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 imperative 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 Aphorisms 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 Psychoanalytic 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

1. Explain briefly cardinal Principles of Homoeopathy? 3+3+4 = 10
2. What happens when 2 dissimilar diseases meet together in a human being, explain with examples? 3+3+4 = 10

Write Notes on

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

Write Short Notes

13. Duce Natura
14. Trephening
15. Theoritic Medicine
16. Aude Sapere
17. Highest ideal of cure
18. What is Organon
19. Uncertain & Hazardous Homoeopathic remedies
20. Define Intelligence
21. Define Totality of Symptom
22. 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.

Notes

3. Ancient Greek concept of sickness. Greek God of Medicine, Hippocrates
4. § 3, what are the knowledge? Explanation for each.

5. Define logic, Types, Deductive and inductive logic.
6. Allopathy, Antipathy, Homoeopathy and Isopathy, with brief explanation.
7. Definitions for each with its further classification and examples.
8. Dr Kent as a teacher, as a doctors and his literary works.
9. Definition, nature and classification of attention
10. §58 and §59 what are the bad effects, How it happens with examples.
11. §6, what is unprejudiced observer? How it happens and its result?
12. Where Hahnemann mentions it? What is it? What are the contents?

Short Notes

13. Where is it mentioned? What is it?
14. What is it? Why this method is used?
15. Where is it mentioned? What is it?
16. Word meaning, Derived from
17. §2
18. Word meaning, Derived from, wrote by
19. §50, what is it, with examples.
20. WHO definition.
21. Definition according to §7
22. 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 by Mahendra Singh

ANATOMY AND PHYSIOLOGY

Study of Normal Man in Pre-Clinical Period

Human anatomy is the most difficult of all sciences to study. Man is a conscious mental being, 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. Cranial 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.

Autonomic 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, paranasal sinuses, 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.

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

Oogenesis, Ovarian cycle

Menstrual cycle

Spermatogenesis

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

Elbow joint, wrist joint, carpometacarpal joint

Axillary artery

Brachial artery

Radial, ulnar and Median 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

Pericardium

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

Temporo-mandibular joint

Thyroid 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: | Supplementary Books | Sl No: | Reference books |
|----------------|--|----------------|----------------------------|---------------|---|
| 1. | Cunningham'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 | 2. | Regional Anatomy - LAST | 2. | Essential clinical Anatomy - |

| | | | | | |
|----|---------------------------------------|----|--|----|--|
| | Vol I, II & III | | | | 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

10x2 =20

1. Describe Brachial Plexus
2. Describe Thyroid Gland

Write Notes on

5x10=50

- 3 Cavernous sinus
- 4 Cubital Fossa

5 Clavicle

6 Palmar arterial arch

7 Layers of eye ball

8 Muscles of mastication

9 Axilla

10 Spermatogenesis

11 Carotid triangle

12 Anterior interosseous nerve

Write Short notes

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

10x2=20

1 Define mediastinum and its divisions and contents

2 Describe the stomach and its blood supply

Write Notes on

5x10=50

3 Duodenum

4 Urinary bladder

5 Calf muscles

6 Acetabulum

7 Male urethra

8 Uterus

9 Mesentery

10 Coronary artery

11 Vermiform appendix

12 Right kidney -relations

Write Short notes

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 all 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-contraction coupling and molecular basis of contraction.
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. R.M.P., Action and its propagation, neuromuscular transmission.
3. Classification and properties of nerve fibers.
4. Wallerian degeneration, regeneration and reaction of degeneration.

BLOOD COMPOSITION:

1. Composition and functions in general.
2. Physiology of plasma proteins, normal values, E.S.R. & other blood indices.
3. Physiology of R.B.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 R.H. 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 and 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. decerebrate 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 lipid, 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, gastric, pancreatic, intestinal, and biliary secretions, movements of GIT, digestion and absorption in GIT, 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, acclimatization, 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, secretion 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, adrenal cortex 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

13 Central nervous system (30Hours)

CSF, Receptors, reflex action, sensory and motor tracts, effects of trans section and hemisection of spinal cord, brain-cerebrum, cerebellum, basal ganglia, 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, accommodation,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 Assessment Examination 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

10X2=20

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

Write Notes on

10x5=50

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

Write Short Note

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

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.

Write Notes on

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

Write Short Note

10x3=30

13. parathormone
14. action potential
15. follicular phase

16. oxytocin
17. essential amino acids
18. glycogenolysis
19. beriberi
20. pellagra
21. cyanocobalamin
22. cori cycle

List of books

| Sl. No: | Recommended text book | Sl. No: | Supplementary Books | Sl No: | Reference 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, Medicated oils, 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.
Pharmacology (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. Calcareo 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, Avoirdupoise/ 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. Belladonna
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 6th potency under Decimal scale and up to 3rd 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-----Pharmacology-----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 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.]

Essay Questions:-

(10x2=20)

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.

Write Notes on:-

(5x10=50)

3. *Pharmacopoeia*.
4. Sugar of milk
5. Alkaloid
6. Standardisation of distilled water.
7. Collection and preservation of animal drugs.
8. L.M potency.
9. Posology.
10. Parts of a 'Prescription'
11. Drug Proving.
12. Pharmacy act.

Write Short Notes on:

(3x10=30)

13. Olive oil.
14. Ointment.
15. *Nux vomica* (identifying features)
16. Pharmaconomy.
17. Prepared lard.

18. Cinchona officinalis (pharmacological action).

19. Filtration

20. Avoirdupois system.

21. Opodeldoes.

22. Proof spirit.

Answer Key to the model questions.

Essays:-

1. Veg.kingdom,Animal kingdom,Mineral kingdom,Nosodes,Sarcodes,Imponderabilia and Synthetic sources-----Veg.sources in detail with examples; Thallophyta (algae,funghi,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.

Notes:-

3. Definition of Pharmacopoeia-----divisions(official,unofficial)-----history,developments in few word-----different pharmacopoeiae available now-----special reference to H.P.I
4. Raw material used for the preparation of Sugar of milk-----preparation and purification in few words -----Physico-chemical properties in short-----usual impurities-----uses.
- 5.One of the secondary metabolites-----properties----- pharmacological properties of some of them-----examples for alkaloids-----chemical tests of identification; Mayer's test,Wagner's test,Dragendorff's test.
6. Preparation of distilled water-----properties-----usual impurities present-----tests of identification of impurities-----preservation of dist.water.
7. Methods and manner of collection of drugs from animal species in short including snake venoms----after proper identification---to be collected in fresh form-----reliability of sources-----some from serological laboratories-----to be preserved in proper devices.
8. L.M potencies,also known as 50 millesimal potencies-----its discovery (6th edition of organon)-----preparation-----how these potencies are represented-----advantages-----method of dispensing.
9. Study of doses-----definition of dose-----types of doses-----significance of minimum dose-----factors -----determining doses.

10. Definition -----4 parts; superscription, inscription, subscription, signature/signatura/signa-----role of abbreviations-----mention medico-legal importance of prescriptions.
11. Definition-----unique features of Homoeopathic Drug proving-----drug proving unit-----ideal prover-----precautions, protocol and procedure in short-----day book-----complete proving.
12. 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.

Short Notes:-

13. Olive oil, a fixed oil-----source-----properties-----uses.
14. Ointment (therapeutic cream)----definition-----vehicles used----ratio----mention methods of preparation----- use----examples.
15. Deciduous tree----type of leaves, flowers, berry and seeds----Seed used-----disc shaped, flat or concavo-convex, margin round, surface ash-gray, covered with short satiny hairs; no odour-----bitter taste
16. It is the route of administration of medicines-----oral, olfactory/inhalations, injections, external application-----oral route preferred in our system, why?
17. It is a semi solid vehicle-----source and preparation-----properties-----uses-----preservation.
18. 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.
19. Filtration, a general laboratory method of separation-----two types; rapid filtration/filtration under reduced pressure, hot filtration-----decantation to be done before filtration.
20. Avoirdupois system, one of the systems of weights and measures-----different measures of weight, volume and length in this system-----relation with metric system.
21. 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.

22. Proof-spirit is a mixture of alcohol and purified water weighing $\frac{12}{13}$ th 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

1. 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 |

| Month | Topic |
|--|--------------------------------------|
| 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)

Write Notes on (5*10=50)

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

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

13. Apis – Skin
14. Define Constitution with example
15. Arnica – Constipation
16. Define Diathesis with example
17. Differential modality
18. Cina – Respiratory complaints
19. Dulcamara – Rheumatism
20. Aethusa – Epilpsy
21. Aconite – Menses
22. Kali phos – Head complaints.

Answer Key

1. Medical materials, apply natural law of cure, proving on healthy human beings.
2. Picture type, Anatomical, Keynote, Comparative, Therapeutic.
3. No pathological study, no lower animal provings, unmanageably wast, no drug pathogenesis, management of only medicaly curably disease.
4. Vomiting, weakness, milk intolerance, Thirstlessness.
5. Strangury, Burning stinging, sore pain, thirstless, dropsy, hot patient
6. Chilly, eczema, warts
7. 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

8. Boeninghussen introduced

HeringsGuiding symptoms of Materia Medica

Gibson miller

ClarkeDictionary of Materia Medica 4th Volume

Relationship:

1. Complementary
- 2 Inimical
- 3 Antidote
- 4 Cognate
- 5 Concordent

9. Fear, anxiety, restlessness, acute remedy
10. Nerve tonic of schussler, lack of nerve power, brain fag, nervous prostration.
11. Bruised sore pain, blue black skin, black eye, blunt instruments, acute & chronic affections of injury

12. a Complementary
 b inimical
 c incompatible
 d follows well

13. Rosy red hue, oedema, dropsy without thirst.

14. Physical & mental make up,

 Grauvogl,
 hydrogenoid – thuja

 Oxygenoid- ,

 Carbonitrogenoid- Lyco, Sulph

15. Dog stool, pipe stem stool, due to enlarged prostate.

16. Physical predisposition to diseases.

 Eg:

 Haemorrhagic diathesis – Phos, Lach

 Rheumatic diathesis- Rhus tox

 Scrofulous diathesis – Tuber, con

17. Modalities which do not agree with the general modalities of that drug

 Eg Arsalb – General ameliorated warmth, but head complaints ameliorated by cold

 Lyco – Hot patient preferring warm food and drinks

 Phos. Chilly patient prefers cold food & drinks

18. Cough dry, with sneezing, spasmodic, gagging in the morning, periodic, returning
 spring & fall, afraid to speak or move for fear of bringing paroxysm of cough.

19. Brought on by cold damp rainy weather, or sudden change in hot weather. Ameliorated moving.

20. Eyes turn down, clenched thumb, fixed dilated pupil, during dentition, summer

21. Amenorrhoea in young plethoric, after fright

22. - 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:

| Sl .No | Subject | Theory | Practical/Clinical | | | | |
|-----------|---|--|---|----------|---------|-------|----------------|
| | | Theory includi ng interna l 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 |
| 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 |

FIRST BHMS COURSE -DISTRIBUTION OF HOURS

(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 | Min for Pass | Int. Assessment | Total including internal assessment | University practical | Exam Viva | Total | Min for pass | Int. Assessment | Total including internal assessment | | |
| Homeopathic Pharmacy | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| Anatomy | 100+100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| Physiology including Biochemistry | 100+100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| Homeopathic Materia & Medica | 100 | 50 | 20 | 120 | Nil | 50 | 50 | 25 | 10 | 60 | 180 | 90 |
| Organon of Medicine, Principles of Homoeopathic Philosophy and Psychology | 100 | 50 | 20 | 120 | Nil | 50 | 50 | 25 | 10 | 60 | 180 | 90 |

DISTRIBUTION OF HOURS

| Subject | Theory | Practical/Clinical | | | | |
|---|---|---|----------|---------|-------|----------------|
| | Theory including internal exam | Practical /Clinical includin g internal Exam | Tutorial | Seminar | Total | Grand Total |
| Pathology and Microbiology including Parasitology Bacteriology and Virology | 200 | 70 | 10 | -- | 80 | 280 |
| Forensic Medicine & Toxicology | 80 | 20 | 10 | 40 | 70 | 150 |
| Organon of Medicine and Principles of Homoeopathic Philosophy | 125 | 75 | 10 | -- | 85 | 210 |
| Homoeopathic Materia Medica | 75 | 75 | 10 | -- | 85 | 160 |
| 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 |
| Total | | | | | | 1250 |

II BHMS SYLLABUS
PATHOLOGY AND MICROBIOLOGY
(Including bacteriology, virology and parasitology)

The written examination consists of 2 papers.

Prescribed hours as per syllabus

| | |
|-----------|-------------|
| Theory | - 210 hours |
| Practical | - 90 hours |
| Tutorials | - 10 hours |
| Seminars | - 20 hours |

First paper includes - Introduction, General pathology, Clinical pathology, Hematology and Systemic pathology (Gastro intestinal tract, Cardio vascular system, Respiratory system, Endocrine system)

Second paper includes - Bacteriology, Virology, Parasitology and Systemic pathology (Central nervous system, Geneto urinary system, Skeletal and muscular system, Common skin disorders)

SYLLABUS

FIRST SEMESTER

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 Pathology 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
- Correlation of miasm to Pathology for eg : psora and 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
- Regeneration, Repair and Healing
- Disorders of vascular flow and shock
- Oedema
- Hyperaemia and congestion
- Haemorrhage
- Pyrexia
- Thrombosis
- Embolism
- Infarction
- Shock
- Burns
- Nutritional Disorders

- **Immunity and Disorders of Immune systems**
 - Innate Immunity
 - Acquired Immunity - Active
Passive
 - Cells of the Immune system
 - Cytokines and Messenger molecules of the immune system
 - Hypersensitivity
 - Autoimmunity and autoimmune disorders
 - immune deficiency diseases

- **Growth disturbances and Neoplasm**
 - Hypertrophy
 - 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 defense against tumor
- Cancer due to habit and custom
- Clinical features of Neoplasia
- Skin tumors
- Grading and Staging of cancer
- Diagnosis of cancer

Clinical pathology and Haematology

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

Systemic Pathology

- Diseases of alimentary system
- Diseases of cardiovascular system
- Respiratory disorders
- Endocrine diseases

SECOND SEMESTER

Bacteriology

- Introduction to Microbiology
- Different types of classification of bacteria
- Culture medias
- Products of bacterial growth and metabolism
- Infections
- Disinfection and Sterilization
- Gram positive cocci

- Staphylococcus
- Streptococcus
- Pneumococcus
- Gram negative cocci
- Neisseria meningitidis
- Neisseria gonorrhoea
- Mycobacterias
- Mycobacterium tuberculosis
- Mycobacterium leprae
- Spirochaetes
- Treponemas
- Leptospira
- Borrelia
- Corynebacterium diphtheriae
- Bacillus anthracis
- Parvo bacterias
- Haemophilus influenza
- Brucella
- Bordetella
- Yersinia pestis
- Enterobacteriaceae
- E coli
- Klebsiella
- Proteus
- Pseudomonas
- Salmonella
- Shigella
- Vibrios
- Cholera vibrio
- Eltor vibrio
- Rickettsiae

Virology

- General characters
- Structure of virus
- Viral multiplication
- Classifications
- Important viruses with its characteristic features and Pathogenicity

Parasitology

- Protozoal parasites
- Entamoeba histolytica
- Flagellates

- Plasmodium
- Ciliata
- Cestodes
- Various tapeworms
- Trematodes
- Nematodes
- Ascaris lumbricoides
- Ankylostoma duodenale
- Trichinella spiralis
- Strongyloides stercoralis
- Enterobius vermicularis
- Filarial worms

Systemic pathology

- Common disorders of central nervous system
- Diseases of kidney, ureter, bladder and urethra
- Common disorders of male and female genital organs
- Skeletal and muscular disorders
- Common skin disorders
- Diseases caused by Bacteria, Parasites and Viruses
- Fungal diseases

PRACTICALS

FIRST SEMESTER

Haematology

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

Histopathology

- Demonstration of histopathological techniques
- Fixation, embedding
- Staining
- Frozen section & its importance
- Microscopic study of Histopathological slides

- Demonstration of gross pathological specimens

SECOND SEMESTER

Microbiology

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

Urine Analysis

- Physical examination
- Chemical examination
- Microscopical examination

Stool Examination

- Study of various parasites and ova

Clinical Chemical Pathology

TEACHING PLAN

FIRST SEMESTER

THEORY

| | |
|--|-------------|
| Total | - 105 hours |
| Introduction, Miasm, General pathology | - 35 hours |
| Immunity | - 12 hours |
| Growth disturbances and Neoplasm | - 15 hours |
| Clinical pathology and Haematology | - 20 hours |
| Systemic pathology | - 20 hours |
| Examination | - 3 hours |

PRACTICAL

| | |
|----------------|------------|
| Total | - 60 hours |
| Haematology | - 20 hours |
| Histopathology | - 22 hours |
| Tutorial | - 5 hours |
| Seminar | - 10 hours |
| Examination | - 3 hours |

SECOND SEMESTER

THEORY

| | |
|--------------------|-------------|
| Total | – 105 hours |
| Bacteriology | – 35 hours |
| Virology | – 32 hours |
| Parasitology | – 25 hours |
| Systemic pathology | – 10 hours |
| Examination | – 3 hours |

PRACTICAL

| | |
|-------------------|------------|
| Total | – 60 hours |
| Microbiology | – 12 hours |
| Urine analysis | – 15 hours |
| Stool examination | – 5 hours |
| Biochemical tests | – 10 hours |
| Tutorial | – 5 hours |
| Seminar | – 10 hours |
| Examination | – 3 hours |

NAME OF TEXT BOOKS AND REFERENCES:

Pathology by Robbins
Pathology by Harsh Mohan
General pathology Walter Israyel
Text Book of pathology by Muiar
Text book of pathology by Boyd
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 by Anderson
Pathology in tropics by G M Eddington
Pathophysiology by Sylvic Anderson
Immunobiology by Janeway
Clinical Haematology by De-Gruchy
Diagnostic microbiology by Bailey and Scott
Practical Haematology by Sir John, V Dacci
Clinical Pathology by Chakraborty and Bhattacharya
Handbook of ultra sound by G S Garakal

SECOND YEAR B.H.M.S DEGREE EXAMINATION
MODEL QUESTION PAPER

**PATHOLOGY AND MICROBIOLOGY INCLUDING PARASITOLOGY, BACTERIOLOGY AND
VIROLOGY- Paper-I**

Time: 3hrs

Max Marks: 100

- *Answer all questions*
- *Draw diagrams wherever necessary*

Essays

(2X10=20)

1. Describe the Pathogenesis clinical features and laboratory diagnosis of Pernicious anemia.
2. Define Neoplasm. Describespread of malignant tumour in detail..

Short notes:

(10x5=50)

3. Phagocytosis
4. Gangrene
5. Amyloidosis
6. Cirrhosis
7. Infarction
8. Pulmonary embolism
9. Lymphoma
10. Repair
11. Diabetes Mellitus
12. Renal stone

Answer briefly:

(10x3=30)

13. Giant cells
14. Scurvy
15. Albuminuria
16. Milroy's disease
17. Vincent's angina
18. Gout
19. Rodent ulcer
20. Multiple myeloma
21. Virchow's triad
22. Water can pernium

PATHOLOGY AND MICROBIOLOGY

PAPER-1 SCHEME OF VALUATION

1. Anaemia – definition - 1 mark
Causes of pernicious anaemia – 1 mark
Pathogenesis – How it develops and a few pathological changes observed- 3 marks
Clinical features – the important clinical features by which one suspects 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 lymph node
Haematogenous spread- how it spreads in veins, arteries and in 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

Short notes

3. Phagocytosis – definition 1 ¼ marks
Cells participating in phagocytosis 1 ¼ marks
Mechanism of phagocytosis 1 ¼ marks
End result 1 ¼ marks
4. 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
5. Amyloidosis – what is amyloidosis 1 mark
Causes of amyloidosis 2 marks
Pathological changes and clinical features – 2 marks
6. Cirrhosis – what is cirrhosis – 1 mark
Types of cirrhosis – 1 mark
Causes of cirrhosis – 1 mark
Pathological features (a) macroscopy }
(b) microscopy } - 2 marks

7. Infarction – definition – 1 mark
Presentation – 1 ½ mark
Lab diagnosis (a) enzymes }
(b) ECG changes } - 2 ½ marks
8. pulmonary embolism – definition 1 mark
Causes of embolism 1 mark
Predisposing conditions 1 mark
Fate of pulmonary embolism 2 mark
9. Lymphoma
10. Repair
11. Diabetes mellitus
Classification, Causes, Pathogenesis, clinical features, Diagnosis (1 mark each)
12. Renal stones
types, causes, investigations (2+1+2)
Answer briefly
13. Giant cell
what is it?, types, disease conditions, where is it present (½+½+2)
14. Scurvy
what is it, causes, clinical features (½+½+2)
15. Albuminuria
physiological & pathological, conditions of, diagnosis (1+1+1)
16. Milroy's disease
characteristic features, diagnosis (2+1)
17. Vincent's angina
causative organism, clinical features, associating bacteria (½+2+½)
18. Gout
definitions, pathogenesis, clinical features, complications (½+2+½)
19. Rodent ulcer
features of malignancy, site of lesion, pathological features (½+½+2)
20. Multiple myeloma
what is it, pathology and diagnosis (1+1+1)
21. Virchow's triad
changes in the blood vessel, changes in constituents,
changes in the flow of blood (1+1+1)
22. Water can perineum
causative organism, characteristic features, site (½+2+½)

SECOND YEAR B.H.M.S DEGREE EXAMINATION
MODEL QUESTION PAPER

**PATHOLOGY AND MICROBIOLOGY INCLUDING PARASITOLOGY, BACTERIOLOGY AND
VIROLOGY-Paper-II**

Time: 3hrs

Max Marks :100

- *Answer all questions*
- *Draw diagrams wherever necessary*

Essays

(2x10=20)

1. Describe morphology & pathogenesis of malarial parasites.
2. Define Immunity. Describe Acquired Immunity in detail.

Short notes:

(10 X 5 = 50)

3. *Oncocerca volvulus*
4. Invic Reaction
5. Herpes virus
6. Microfilaria
7. Morphology of *E. coli*
8. AIDS
9. Toxins of *cl.welchi*
10. Virasl multiplication
11. Anaphylaxis
12. Enriched media

Answer briefly:

(10 X 3 = 30)

13. Antigen
14. Infection
15. NIH swab
16. Negri bodies
17. Exotoxin
18. Egg of *Trichuris trichura*
19. Precipitation reaction
20. Biological characters of pneumococci

21. Mantoux test

22. Varicella zoster virus

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
- Impotency, sterility and Artificial insemination
- Blood examination, blood stains, seminal stains:
- Burns, scalds, lightning 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, Carbon monoxide, Carbon dioxide, Nicotiana tabaccum, Cerbera odallam 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

I Semester : Forensic Medicine and Medical Jurisprudence

II Semester : Toxicology

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, Throttlin 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

There used to be two batches in II BHMS (Regular and supplementary). The supplementary students are also allowed to sit in the same class of regular students, after clearing the failed subjects.

So in the case of supplementary students their portions for the first semester may be ‘Toxicology’ and for the second semester it may be ‘ Forensic medicine and Medical Jurisprudence’
[This is because, it is during the second semester, the supplementary classes usually begins, so their first semester portions will start with ‘Toxicology’.]

SECOND YEAR B.H.M.S DEGREE EXAMINATION
MODEL QUESTION PAPER

FORENSIC MEDICINE AND TOXICOLOGY

Time: 3hrs

Max Marks :100

- *Answer all questions*
- *Draw diagrams wherever necessary*

Essays

(2X10=20)

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?

Short notes:

(10x5=50)

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

Answer briefly:

(10x3=30)

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

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. Dactylography = 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. Lichtenberg 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 PHILOSOPHY

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 the 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 | -30hrs |
| Tutorial/Seminar | -30hrs |

SECOND YEAR B.H.M.S DEGREE EXAMINATION
MODEL QUESTION PAPER

Organon of medicine and Homoeopathic Philosophy

Time: 3hrs

Max Marks :100

- *Answer all questions*
- *Draw diagrams wherever necessary*

Essays

(2X10=20)

1. Define vital force, explain concept of Kent and the qualities predicated to?
2. Classification of disease according to Hahnemann

Short notes:

(10x5 = 50)

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

Answer briefly:

(10x3=30)

13. Qualities of Physician for case taking
14. Genus epidemicus
15. Surrogates
16. Logical totality
17. True materia medica
18. Ideal prover
19. Diet in drug proving
20. Chief complaints and auxillary
21. Albert von Haller
22. Dose in drug proving

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

- 3 §91 to §96
- 4 §80, §81
- 5 §117, Clinical importance
- 6 §30, §31, §32. Explain according to philosophy
- 7 §7. Explain according to Stuart Close.
- 8 Kent chapter 27
- 9 §77
- 10 §63, §64
- 11 §123
- 12 §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 by Divan 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

In addition to the list of drugs for the Ist BHMS Examination, the following additional drugs are included in the Syllabus 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 | Berberis 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

– 75 hrs

Clinical / Seminar / Tutorial - 105 hrs

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

SECOND YEAR B.H.M.S DEGREE EXAMINATION
MODEL QUESTION PAPER

Materia Medica-

Time: 3hrs

Max Marks: 100

- *Answer all questions*
- *Draw diagrams wherever necessary*

Essays

(2X10=20)

1. Give a pen picture of SEPIA lady
2. Describe the salient features of the drug PHOSPHORUS both in mental & physical plane so as to complete the picture

Short notes:

(10x5 = 50)

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

Answer briefly:

(10x3=30)

13. Gelsemium- Headache
14. Camphor- Cholera
15. Actea Racemosa- Female complaints
16. Opium- GIT
17. Agaricus- CNS Affections
18. Agnus Castus- Male Sexual System
19. Nux Moschata- Mind
20. Mag Phos- Pain
21. Apocyanum –Dropsy
22. 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

Short Notes

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

Answer briefly

13. Gelsemium- Headache- beginning in cervical spine, blindness with modalities < bad news, tobacco smoking
14. Camphor- Dry cholera, coldness of surface
15. Actea Racemosa- Increase of mental symptoms during menses, false labour like pains, shivers in 1st stage.
16. Opium GIT- Constipation
17. Agaricus CNS- Epilepsy, stumbling gait
18. Agnus castus- Male Sexual System- Complete impotence after frequent attacks of gonorrhoea.
19. Nux Moschata -mind- Absent minded, changeable humor, loss of memory
20. Mag Phos -pain- lightning like, modalities

21. Apocyanum –dropsy- Dropsy with thirst
22. Kreosotum- Urinary affections- Can urinate only while lying during 1st sleep, enuresis.

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 – Vithoukas 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:
- (iv) The Second BHMS University examination shall be held during the twelfth month of admission to II BHMS
- (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 |
|---------|---------|--------------|----|-------------------------------------|------------------|-----------|-------|--------------|----|-------------------------------------|-------------|----------------------------|
| | Theory | Min for Pass | IA | Total including internal assessment | Uni. Practical | Exam Viva | Total | Min for Pass | IA | Total including internal assessment | | |
| FM | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| PATHO | 100+100 | 100 | 40 | 240 | 100 | 100 | 200 | 100 | 40 | 240 | 480 | 240 |
| MM | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |
| OM | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |

Surgery 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 of skin-boils, carbuncles, cellulitis, erysipelas, lupus, corns, warts, callosities, sebaceous cysts etc.
Causes, classification, complications and management of burns.
Scar and its deformities.

| | Topic | Proposed Hours | |
|--------------|--|----------------|---------|
| | | Theory | Clinics |
| 1 | Introduction to surgery | 1 | 75 |
| 2 | Infection & Inflammation & Skin | 10 | |
| 3 | Injuries & Wounds | 6 | |
| 4 | Haemorrhage & shock, Fluid & electrolyte balance & burns | 16 | |
| 5 | Tumors & cyst, ulcers & sinuses | 12 | |
| 6 | Injuries & disease of nerves | 5 | |
| 7 | Disease of Muscles | 3 | |
| 8 | Disease of Bursa | 2 | |
| 9 | Disease of Lymphatics | 6 | |
| 10 | Arterial disorders | 8 | |
| 11 | Venous disorders | 6 | |
| Total | | 75 | 75 |

Obstetrics & Gynaecology 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

TEACHING PROGRAMME

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 |
|------------------------------|

Practice of Medicine & Homoeopathic Therapeutics

1. Symptoms in systemic disease, respiratory system, cardio-vascular system, loco motor system, digestive system & central nervous system.
2. Clinical approach to patients: History taking, clinical examination investigations & diagnosis

3. Immunological & genetic factors in diseases: Applied physiology, Immune deficiency, Autoimmunity & Allergy
4. Environmental & Nutritional factors in diseases: Environmental diseases, Obesity, malnutrition, Diseases of micro nutrients
5. Diseases of blood, spleen and lymph glands, Anaemias, Hematological malignancies, Myeloproliferative disorders, Bleeding disorders, Venous thrombosis
6. Disorders of endocrine system-Disorders of Hypothalamus, pituitary, Thyroid & Parathyroid glands, Adrenal glands and Gonads
7. Disturbance of water, Electrolyte and Acid base balance
8. Applied materia medica / homoeopathic therapeutics in relation to the above.

Teaching Schedule

Theory

| | |
|--|----------|
| 1. Environmental & Nutritional factors in disease | : 10hrs |
| 2. Immunological & Genetic factors in diseases | : 15 hrs |
| 3. Disease of blood, spleen and lymph glands | : 20 hrs |
| 4. Disturbance of water, electrolyte and acid base balance | : 10hrs |
| 5. Disorders of endocrine system | : 20 hrs |

Total : 75 hrs

Clinical

Students should be given training to understand signs & symptoms in systemic diseases, clinical approach to patients and history taking [Total: 75 hrs]

Teaching plan

| Month | Topics |
|-------|---|
| 1. | Immunological factors in disease: Applied physiology Anemia general consideration |
| 2. | General consideration of endocrinology, Immune deficiency, Autoimmunity & Allergy |
| 3. | The hypothalamus and pituitary gland. Haemolytic anaemias |
| 4. | Adrenal glands. The Sex glands-Gonads. Nutritional & other anemias |
| 5. | Endocrine disorders of breast. Thyroid gland and parathyroid glands. Megaloblastic anaemia |
| 6. | Non metastatic endocrine manifestations of malignancy Iron def. Anaemia. Nutrition- General consideration, Starvation & PEM |

| | |
|-----|---|
| 7. | Lekaemias general consideration Acute leukaemias Disorders of Water and Electrolyte balance |
| 8. | Chronic leukaemias. Inherited disorders of connective tissues. Fat soluble vitamins |
| 9. | Spleen & its disorder. Inherited disorders of erythrocytes. Water soluble vitamins |
| 10. | Myeloproliferative disorder. Haemostasis general consideration. Vascular & platelet disorders. Minerals |
| 11. | Lymphomas. Purpuras. Bleeding disorder due to coagulation factor deficiency. Obesity. |

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:

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

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. Diseases of 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
Splenomegaly, 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, diseases of 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, Thyroiditis, 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.
Physiotherapeutic 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 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. Diseases of 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 cysts of 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

Chamberlaine's physical signs and symptoms - Chamberlaine
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
Select your remedy

- Richard Hughes
- William Boericke

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:

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

GYNACOBLOGY

Inflammation ulceration and traumatic 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

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:

(iv) 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.

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

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

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

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 3 rd 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, toxaeimias 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 of Gynaecology | 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 |

DEPT OF MATERIA MEDICAL

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

| Month | Topic |
|---|-------|
| 12 th Month - University Examination | |

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 – Vithoukas G
12. A Manual of Materia Medica Therapeutics and Pharmacology - Blackwood AL

**III BHMS
ORGANON OF MEDICINE & PRINCIPLES OF
HOMOEOPATHIC PHILOSOPHY**

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 Correlation 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 thoroughly 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 |

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 by Divan 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 :

| Sl .No | Subject | Theor y | Practical/Clinical | | | | |
|-----------|--|---|---|----------|---------|-------|-------------|
| | | Theory includin g internal exam | Practical/Cli nical 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 | 150 | 75 | 10 | 20 | 105 | 255 |
| 03 | Obstetrics & Gynaecology Infant care & Homoeo. therapeutics | 150 | 75 | 10 | 20 | 105 | 255 |
| 04 | Homoeopathic Materia Medica | 120 | 100 | 10 | 20 | 130 | 250 |
| 05 | Organon of Medicine, Principles of Homoeopathic Philosophy | 120 | 100 | 10 | 20 | 130 | 250 |
| 06 | Case taking & Repertorisation | 40 | Nil | Nil | Nil | Nil | 40 |
| 07 | Community Medicine | 80 | Nil | Nil | Nil | Nil | 80 |
| | TOTAL | | | | | | 1280 |

(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 | Min for pass | Int. Assessment | Total including internal assessment | University practical | Exam Viva | Total | Min for pass | Int. Assessment | Total including internal assessment | | |
| Surgery | 100+100+100 | 150 | 60 | 360 | 100 | 100 | 200 | 100 | 40 | 240 | 600 | 300 |
| Obstetrics & Gynaecology | 100+100+100 | 150 | 60 | 360 | 100 | 100 | 200 | 100 | 40 | 240 | 600 | 300 |
| MATERIA | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 |

| | | | | | | | | | | | | | |
|---------------------|-----|----|----|-----|----|----|-----|----|----|-----|-----|-----|--|
| MEDICA | | | | | | | | | | | | | |
| Organon of Medicine | 100 | 50 | 20 | 120 | 50 | 50 | 100 | 50 | 20 | 120 | 240 | 120 | |

**CASE TAKING AND REPERTORISATION
(One hour per week – 40 hours)**

- 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

FINAL BHMS DEGREE COURSE.

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 years 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 distinct. It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts. It emphasizes the study of man from his state of Health 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 | 15 hrs |
| 3. Climatic factors in diseases | 10 hrs |
| 4. Immunological factors in diseases | 10 hrs |
| 5. Genetic factors | 05 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 | 05 hrs |
| 4. Acute emergencies including poisonings | 05 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 of 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 [MODEL EXAMINATION, COMPRISING ENTIRE TOPICS]

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 Jousset |
| Differential diagnosis | -Harvey & Bordley |
| Homoeo Therapeutics | -Neatby & Stonhan |
| French index of Medicine | |

BHMS Course. Distribution of Hours for Practice of Medicine.

| Year | Theory | Practical | | | | Grand Total |
|----------|--------|----------------------------------|---|----------|---------|-------------|
| | | Lecture including Internal Exams | Practical/Clinical including Internal Exams | Tutorial | Seminar | |
| II BHMS | 75 | 75 | Nil | Nil | 75 | 150 |
| III BHMS | 75 | 75 | Nil | Nil | 75 | 150 |
| IV BHMS | 150 | 200 | 10 | 10 | 220 | 370 |

Model Question Papers.

KERALA UNIVERSITY OF HEALTH SCIENCES.

IV BHMS Degree Examination

Practice of Medicine and Homoeopathic Therapeutics

PAPER I

Time:3 hrs

Max.Marks:100

Essay Questions:-

1. Define and classify pneumonias. Describe the aetiopathogenesis and diagnosis of acute Bronchopneumonia (2+4+4=10)
2. Describe the causes, clinical presentations and diagnosis of hypothyroidism. (2+4+4=10)

Write Notes on:-

3. Acute pancreatitis.
4. Mediastinal shift
5. Ankylosing spondylitis
6. Sjogren's syndrome
7. Heat stroke
8. Glucose tolerance test
9. Fibromyalgia
10. Osteoarthritis
11. Vit.A deficiency
12. Rubella

(5X10=50)

Write Short Notes on:-

13. Ketoacidosis
14. Primary complex
15. Irritable bowel syndrome
16. Pneumothorax
17. Protein energy malnutrition
18. Anaphylaxis
19. Kala-azar
20. Barotrauma
21. Genetic screening tests
22. Coeliac disease

(3X10=30)

KERALA UNIVERSITY OF HEALTH SCIENCES.

IV BHMS Degree Examination

Practice of Medicine and Homoeopathic Therapeutics

Paper II

Time:3 hrs

Max.Marks:100

Essay Questions:-

1. Define chronic renal failure. How will you diagnose and manage a case of end stage disease? (2+4+4=10)
2. Define Ataxia. What are the features of cerebellar dysfunction? How will you differentiate sensory ataxia from cerebellar ataxia? (2+4+4=10)

Write Notes on:-

3. Budd chiari syndrome
4. Chronic myeloid leukaemia
5. PET scan
6. Bullous impetigo
7. Diaper dermatitis
8. ASD
9. Multiple myeloma
10. Hyponatremia
11. Bipolar disorder
12. Bulbar polio (5X10=50)

Write Short Notes on:-

13. Aphasia
14. Urinary cast
15. Tetralogy of Fallot
16. Tread mill test
17. Anorexia nervosa
18. Haematuria
19. JVP in health and disease
20. TAO
21. Urticaria
22. Hemiplegia (3X10=30)

KERALA UNIVERSITY OF HEALTH SCIENCES.

Fourth year BHMS Degree Examination

Practice of medicine and Homoeopathic Therapeutics

PAPER III

Time:3 hrs

Max.Marks:100

Essay Questions:-

1. Discuss the important medicines for thyroid enlargement due to hypothyroidism.
2. Discuss the important medicines for acute renal colic (10x2 =20)

Write Notes on:-(give the therapeutics of)

3. Allergic rhinitis
4. Bronchiectasis
5. Post chikungunya arthritis
6. Malena
7. Alcoholic gastritis
8. Ataxia
9. Vitiligo
10. Obsessive compulsive disorders
11. Angina pectoris
12. Haemoptysis (5x10=50)

Write Short Notes on:-

13. Graphitis and sepia in atopic dermatitis
14. Nux vomica and Sabadilla in tropical eosinophilia
15. Agraphis nutans and Baryta carb in adenoids
16. Bryonia and Kalicarb in pleurodynia
17. Phosphorus and Sulphur in pancreatitis
18. Gelsemium and Glonoine in hypertension
19. Lilium tig and Aconite in tachycardia
20. Hepar sulph and Merc sol in pyoderma
21. Causticum and Nitric acid in verrucae
22. Carboveg and Selenium in Guillain-Barre syndrome (3x10=30)

Answer Key

Paper-I

1. Acute respiratory illness with recently developed radiological pulmonary shadowing which 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 respiratory diseases.
Alcoholism
Impaired bronchial drainage.
Diagnosis
By symptoms & signs.
Investigations- WBC count.
Sputum
CXR
Pa CO₂

2. 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-Increased, serum enzymes-increased, hypercholesterolemia, anaemia, hyponatremia.

3. 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.

4. Causes
Retrosternal goiter
Thymic tumoer
Dermoid cyst
Lymphoma
Aortic aneurysm
Bronchial carcinoma
Hiatus hernia
Pneumothorax
Pleural effusion
Pulmonary fibrosas

5. 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 |
6. Autoimmune disease
- More in females, 40 – 50 years
Triad of dry eyes, dry mouth & RA
Raynauds phenomenon
Fatigue
Low grade fever
Anaemia
Peripheral neuropathy
Glomerulonephritis
- Investigations-
- Raised ESR, CRP
Temporal artery biopsy
7. Sudden loss of Consciousness
- Prodromal – headache, dizziness, nausea, convulsions, visual disturbances, high fever, cessation of sweating.
Skin is hot, flushed, 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
8. 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 at least 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]
9. 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, early morning stiffness, swelling of hands and fingers with numbness and tingling

Tests:

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

10. OA

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

Causes:-

Hereditary, 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

11. Vit.A deficiency

Clinical features:-

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.

12. 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

Clinical features:-

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:-

Congenital Cardiac Diseases / malformations in the child if the mother is affected with the disease during pregnancy especially in the first trimester is the most important aspect. Other complications include pneumonia, pancreatitis, meningitis, encephalitis etc.

Diagnosis:

Rubella specific IgG and IgM.

Prevention: rubella vaccine.

13. *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

14. 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

15. Recurrent abdominal pain

Altered bowel habits
Abdominal distension
Rectal mucus
Feeling of incomplete defecation

Diagnosis-Full blood count

ESR
Sigmoidoscopy
Barium enema
Colonoscopy

16. 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
Breath sounds decreased or absent
Bronchial breath sounds

17. 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

18. Anaphylaxis:

Reaction caused by release of histamine and other mediators.

Causes:-

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

Clinical features:-

Loss of consciousness, angioedema, laryngeal obstruction, conjunctivitis, flushing, sweating, wheezes, hypotension, urticaria, itching of palms and soles, diarrhoea and abdominal pain.

Differential Diagnosis:-

Syncope, MI

Management:

19. Kala-azar: *Lishmania donovani*, transmitted by phlebotomus sand flies, I.P- 2weeksto 1year

Clinical features:-

Fever, double peaked temperature, rigor and chills, relapse, Massive splenomegaly, 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.

20. Barotrauma:

During the ascent phase of a dive, gas in diver's lungs expands due to increasing pressure and leads to lung rupture, occurs in other viscera and in middle ear and sinuses.

Management:

Nursed in horizontal position, oxygen therapy, recompression.

21. Genetic screening tests:

USS- 1st trimester onwards, chorionic villus biopsy-from 11 weeks, amniocentesis- from 14 weeks, cordocentesis- from 19 weeks

22. Coeliac disease: of small bowel, 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 deficiency, 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

Management.

Low protein diet, electrolyte requirements, treatment of hyperkalemia, salt and water intake.

2. 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

3. 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.

4. Myeloproliferative stem cell disorder, granulocytic, 30-80 yrs of age, Philadelphia chromosome.

Clinical features:-

Fever with weight loss, malaise, breathlessness, anorexia, abdominal discomfort, menorrhagia, bruising, purpura, sterna tenderness, massive splenomegaly.

Investigation:

Normocytic normochromic anaemia, increased hb, leucocytosis, increased platelets, bonemarrow aspirate shows ph chromosome, decrease in alkaline phosphatase, increased LDH and uric acid.

5. Positron emission tomography: In investigation of pulmonary nodules, staging mediastinal lymph nodes in pts with Ca lungs
6. Superficial purulent infection, staphylococcus, in children, large bullae last for 2- 3 days, blisters burst and crust develops
7. Napkin eczema in babies, due to irritant ammoniacal urine and faeces.
8. 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
9. Malignant proliferation of plasma cells which produce cytokines and stimulate osteoblast.
CF: Bone pain, fractures, hypercalcemia, retinal bleeding, panda eyes, carpal tunnel syndrome, nephrotic syndrome, spinal cord compression, anaemia and Bence Jones proteinuria

10. Causes:

Excess sweating, GI fluid loss, renal loss, diabetes, diuretics

CF: Sunken eyes and cheeks, weakness, faintness, muscular cramps, inelastic skin, tachycardia, collapse, death.

11. Relapsing mood disturbance with periods of both depressed and elevated mood-genetic, drugs.

12. Muscles supplied by bulbar nuclei involved, facial, palatal and pharyngeal paralysis-change in voice, dysphagia, nasal regurgitation, choking, respiratory paralysis, death.

13. Disorder of language content of speech, lesions in dominant hemisphere.

Types:

Broca's, Wernicke's, conduction, transcortical sensory and motor

14. Urinary cast: Cylindrical structures formed within kidney tubules by the coagulation of proteins-hyaline, granular, waxy, cellular, red cell, malignant cells.

15. Due to large right to left shunt, consists of pulmonary stenosis, overriding of VSD by aorta, VSD, right ventricular hypertrophy.

CF: Fallot's spells, relieved by squatting, stunted growth, clubbing, cyanosis, ejection systolic murmur, ECG- right ventricular hypertrophy, boot shaped heart

16. ECG recorded during exercise on a treadmill Bruce protocol.

To confirm diagnosis of angina, stable angina, myocardial infarction

17. Eating disorder

Causes:

Genetic, environmental.

CF:

Marked weight loss, anxiety, depression, lanugo hair, anaemia, thrombocytopenia, delayed puberty, growth retardation, amenorrhoea, uremia, renal calculi, osteoporosis, constipation.

18. Causes:

In kidneys, ureter, prostate, bladder, urethra.

Investigations:

General and physical examination, urine and blood analysis, renal angiography, cystoscopy, retrograde pyelography, serum calcium and phosphorus, biopsy of prostate and kidneys.

19. Normal wave form with diagram and also in disease.

20. Usually males, 25-40 yrs, heavy smokers, medium and small arteries of legs, phlebitis, intermittent claudication, rest pain, peripheral pulses altered, diagnosis by arteriography

21. Wheals on skin, focal dermal oedema, secondary to transient increase in capillary permeability, pruritic, angioedema.

Causes:- Autoimmune, allergens, drugs, contact, physical, infections.

22. 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. .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.
3.) All.cepa, Ars.iod, Tuberculinum, Aralia, Sanguinaria, Lemna
4. Senega, Bryonia, Ant.tart, Kali.bich, Acalypha, Ipecac, Tuberculinum, Phos, Ar.alb
5. Actea spicata, Colchicum, Calc.fluor, Thuja, Bryonia.
6. Hamamelis, Bell, Aloes, Merc.cor, Carbo.veg, Ipecac, Lachesis, Millefolium, Mur.acid, Phos, Nit.acid.
7. Ars.alb. Bismuth, Nux.vom, Phos, Kali.bich, Merc.cor.
8. Arg.nit, Gelsemium, Causticum, Zinc.met, Plumb.met.
9. Ars.sulph.flav, Nat.mur, Nit.acid, Thuja, Syphilinum, Thyroidinum, Tuberculinum.
10. Anacardium, Aconite, Hyoscyamus, Thuja, Arg.nit, Ignatia, Nat.mur, Tuberculinum, Pulsatilla, Sulphur, Sepia.
11. Aconite, Adonis, Bryonia, Digitalis, Liliun.tig, Glonoine, Naja, Spigelia, Lith.carb, Tabacum, Kalmia
12. Acalypha, Arnica, All.sat, Digitalis, Ferr.phos, Hamamelis, Ipecac, Millefolium, Trillium pend.
13. 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.
14. 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.
15. 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.
16. 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 lying on left side and painful side, better by leaning forwards.
17. 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.
18. Gels.-feels as if heart would cease beating if not in motion, palpitation, slow, soft, weak pulse of old age. Glon.-congestive headaches, surging of blood to head and heart, pulsating pains, pulsation throughout body, palpitation cannot go uphill, worse from sun, gas, open fire, haircut.
19. Lil.tig- sensation as if heart is grasped in a vice, palpitation, pain in cardiac region as of a load, angina with pain in right arm, tachycardia, irregular very rapid pulse. Acon.-tachycardia, pain in left shoulder, palpitation with anxiety, fainting and tingling in fingers, pulse- full, hard, tense and bounding, throbbing of temporal and carotids.

20. 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, vesicular and pustular eruptions, buboes, swelling of glands every time patient takes cold, itching, worse warmth of bed.
21. 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.
22. 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 DEGREE COURSE.

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 included 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. Condurango | 24. Corralium |
| 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. Magnesia carb |
| 43. Magnesia 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. Sanguaria | 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 Seminar | / Clinical | Total |
|------------|--------|---------------------|---------------|-------|
| Ist BHMS | 120 | 25 | - | 145 |
| IIInd BHMS | 100 | 25 | 95 | 225 |
| IIIrd BHMS | 100 | 25 | 75 | 200 |
| IVth BHMS | 100 | 20 | 75 | 195 |

Teaching Plan – IVth BHMS

Theory – 100 hrs

Clinical / Seminar / Tutorial = 75+10+10 = 95 hrs

TEACHING PLAN:-

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

Model Question Paper:- (Paper-I)

IV BHMS DEGREE EXAMINATIONS.

Subject:- MATERIA MEDICA.

Time 3 hrs

Max Marks-100

Essay Questions:-

1. Describe four characteristics of Nosodes and emphasize importance of psorinum and medorrhinum as constitutional remedies.
2. Describe the salient features of a Lilium tig lady. (10x2=20)

Write Notes on:- (compare and contrast)

3. Rumex and squilla -respiratory affections
4. Glonoine and gelsemium -headache

5. Sabina and viburnum opulus- female complaints
6. Mezereum and anthracinum- skin
7. Eupetorium and pyrogen-fever
8. Collinsonia and ratahnia-rectum
9. Abies nigra and nux vomica –GIT
10. Oscimum canum and beriberis-kidney
11. Lac defloratum and mag mur – headache
12. Ammonium mur and lycopodium –constitution (5x10=50)

Write Short Notes on:-

13. Raphanus- hysteria
14. Cicuta –epilepsy
15. Abrotanum-child
16. Calotropis- indications
17. Crategus-heart
18. Bellis perinnis- injury
19. Caulophyllum- female
20. Vipera-phlebitis
21. Mercurius cyanide- throat
22. Condurango- cancer (3x10=30)

Answer key to Questions:- (Question Paper-I)

Essay Questions:-

1.
 - a. Past history of TB, cancer, syphilis
 - b. C/c diseases of skin, throat, extremities
 - c. Secretions foul smelling
 - d. Acts on glands
 - e. Conditions where best selected remedy fails.

PSORINUM

 - a. Scabies vesicle
 - b. Chilly with easy perspiration
 - c. Ear -offensive otorrhea
 - d. Asthma relieved by lying with arms spread apart
 - e. Headache hungry during

MEDORRHINUM

 - a. Anti sycotic
 - b. Weak memory
 - c. Asthma relieved by knee chest position
 - d. Aggravation early morning till sunset
 - e. Pelvic disorders-offensive, staining menses
 - f. C/c rheumatism, burning feet
2. Liliom tig is more of a female remedy----Describe its uterine complaints-----
Cardiac complaints with tachycardia-----Mind of the remedy,

Notes:- (Compare and contrast):-

| | | |
|----|---|--|
| 3. | Rumex- dry cough <least cold air TB left sided | Squilla- loose cough, post measles cough, excess secretions, polyuria |
| 4. | Glonoine Sun headache congestions | Gelsemium- Dull,dizzy,drowsy Polyuria. Radiation |
| 5. | Sabina- Anti sycotic Warts Rheumatism -Pubis to sacrum, pain with menorrhagia | Viburnum- Spasmodic dysmenorrhea,. >pressure |
| 6. | Mezereum- Chilly, occipital eczema, scab, breeds worm with itching. | Anthracinum- Septicemia, boils,carbuncles,with burning pain,thick tarry blood. Pyrogen- |
| 7. | Eupatorium- Break bone fever, influenza, chill with thirst with vomiting | Pulse temperature ratio altered,tongue, delerium |
| 8. | Collinsonia- Haemorrhoids, constipation, sharp sticks with heart complaints, female complaints | Ratahnia- Piles, fissure, broken glass, burning>cold water |
| 9. | Abies nigra- | Nux vomica- |

| | | |
|-----|---|--|
| | Old people habituated to tea, tobacco,hard boiled egg sensation, | If only I could vomit, I feel better Chilly,irritable, ineffectual urging |
| 10. | Ocimum canum- Rt sided, red sand in urine, vomitting | Berberis- Left sided, bubbling sensation,backache |
| 11. | Lac defloratum- American sick headache, nausea, conatipation, menses during | Mag mur- Periodical 6 day headache Constipation |
| 12. | Amm.mur- Lemon on match stick | Lyc- Lower part semi dropsical, upper emaciated |

Short Notes:-

13. Raphanus Globus hystericus & nymphomania
14. Cicuta – Bending head back with violent contraction, opisthotonus
15. Abrotanum – Marasmus,increased appetite, metastases
16. Calotropis- skin, elephantiasis, leprosy
17. Crategus- cardiac dropsy,atherosclerosis
18. Bellis perinnis-like arnica, bruised, deep tissue injuries, auto traumatism.
19. Caulophyllum-uterus atony, abortion, dysmenorrhea, leucorrhea
20. Vipera- phlebitis, bursting sensation, modalities
21. Merc cyanatus- rapid prostration from the start, malignant diphtheria with haemorrhage,
cyanosis , albuminuria
22. Condur ango-Cracks corners of mouth. Ca stomach.

MODEL QUESTION PAPER:- (Paper-II)

IV BHMS DEGREE EXAMINATIONS.

Subject:-MATERIA MEDICA

Time : 3 hrs

Max Marks: 100

Essay Questions:-

1. Name coniferae group of remedies. Describe SABINA in detail. (3+ 7 =10)
2. Describe LACHESIS in detail. (10)

Write Notes on:- (Compare and contrast)

3. Cassia sophera and puls in respiratory complaints
4. Sarasaparilla and sabal serulata in urinary complaints
5. Bell and trillium pendulum in uterine haemorrhage
6. Lillium- tig and sepia in uterine prolapsed
7. Lithium- carb and naja in heart complaints
8. Lyssin and stramonium in convulsions
9. Calotropis and hydrocotyl in skin complaints
10. Abies- nigra and abies Canadensis in GIT complaints
11. Cedron and china in fever
12. Mephitis and sambucus in asthmatic complaints (5 x 10 = 50)

Write Short Notes on:-

13. Corralium cough
14. Ficus- religiosa haemorrhage
15. Baryta- mur in hypertension
16. Collinsonia in haemorrhoids
17. Lobelia in respiratory complaints
18. Lac- can mind
19. Condurango GIT
20. Acalypha- indica in TB
21. Anthracinum in ulcer
22. Mezerium in skin complaints (3 x 10 = 30)

ANSWER KEY TO QUESTIONS:- (Question Paper-II)

Essay Questions:-

- I.** Abies Nigra
Abies Canadensis
Sabina
Terebinthina
Thuja

Sabina

- Full blooded females with haemorrhagic tendencies
- Tendency to miscarriages at third month
- Pain from sacrum to pubis
- Menorrhagia

2. Lachesis

- Ophidia group
- Left sided complaints
- Foetid discharges
- Loquacity
- Suspicious
- Haemorrhage
- Climacteric ailments

Notes:-

3. Cassia sophera

Cough with thick yellowish expectoration
Stitching pain
>warmth

4. Sarsaparilla

Severe unbearable pain at conclusion of urination
Renal colic right side

5. Belladonna

bright red too early too profuse haemorrhage
hot pressing downwards as if contents of abdomen would issue from vulva
>standing and sitting erect

6. Lil tig

Puls

Cough with thick bland yellowish green expectration
Thirst less
<warmth
>open air

Sabal serulata

Constant desire to urinate at night
Cystitis with prostatic hypertrophy

Trillium pendulum

Profuse gushing bright red atleast movement every two weeks
Lasting a week or longer
After overexertion too long ride

Sepia

Pressure and bearing down sensation
as though all organs would escape
<supporting vulva with hand

7. Lithium carb

Chronic rheumatism associated with
heart lesion
Pain in the heart before menses and
with pain in the bladder

8. Lyssin

Convulsion from dazzling or reflected
light from water or mirror
From slightest touch or current of air
<sight or sound of water

9. Calotropis

Elephantiasis and leprosy
Heals ulcers and blotches from the
skin and perfects the cure
Heat in the stomach is guiding
symptom and primary anemia of
syphilis

10. Abies Canadensis

Gnawing hungry faint feeling in
epigastrium
Tendency to eat far beyond the
capacity for digestion

11. Cedron

Periodicity, chills towards evening
Frontal head ache extends to parietal
region, with tearing pain with
numbness of limbs

12. Mephitis

Few paroxysms during day time but
many at night
Asthma as if inhaling sulphur
Cough from talking
Pressure and bearing down as if everything
would protrude from pelvis, must close the
limbs tightly
Must sit close to prevent it

Naja

Pulse irregular in force, regular in rhythm
Irritating dry cough in acute stage of
rheumatic carditis or chronic organic lesion

Stramonium

Convulsions with consciousness
Convulsion renewed by sight or bright light,
mirror or water

Hydrocotyl

Great thickening of epidermoid layer and
exfoliation of scales
Psoriasis gyrata on the trunk and extremities
Palms and soles

Abies nigra

Dyspeptic problems of the aged with
functional heart symptoms
Sensational hard boiled egg lodged in cardiac
end of stomach

China

Intermittent paroxysms return every week
Fever never at night
Sweat profusely all over on being covered or
during sleep

Sambucus

Child awakens suddenly nearly suffocated,
face livid blue, child inspires but cannot
expire

Short Notes:-

13. Corallium cough - whooping and spasmodic cough with sensitiveness. feels cold on deep inspiration. < open air

14. Ficus Religiosa - bright red blood from all orifices. Phthisical hemoptysis where other remedies failed.

15. Barytamur - arteriosclerosis with high systolic and comparatively low diastolic tension attended by cerebral and cardiac symptom.

16. Collinsonia - portal congestion resulting in haemorrhoids. Chronic painful bleeding piles. Sensation of stick, sand, gravel had lodged in rectum.

17. Lobelia - dyspnoea from constriction in middle of chest. >rapid walking.

18. Lac can - very forgetful, absent minded, makes purchases and walks away without them. Cursing and swearing.

19. Condurango - cancer stomach. Cracks on corners of mouth.

20. Acalypha indica - cough dry hard. < morning and night. Bright red blood morning, dark and clotted in afternoon.

21. ulceration, sloughing, intolerable burning. Malignant pustule, black or blue blisters

22. Mezerium - eczema after vaccination. Yellow scabs, itch violently burn like fire. <bed and touch

IV BHMS DEGREE COURSE. **ORGANON OF MEDICINE & HOMOEOPATHIC PHILOSOPHY**

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 lecturers 3,4,5,6
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: 100:-

I Semester-50 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 -50 hrs

- 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

Model Question Paper:- (Paper-I)

IV BHMS DEGREE EXAMINATIONS.

Subject:- Organon of Medicine and Homoeopathic Philosophy.

Time 3hrs

Total marks.100

Essay questions:-

(10x2=20)

1. Explain the principles of repetition of medicine according to the VI edition of Organon
2. Describe Homoeopathic Prophylaxis:-

Write notes on:-

(5x10=50)

3. Palliation
4. Characteristic symptoms
5. Scope of homoeopathy
6. Differentiate drug and remedy
7. Negative general. Give examples
8. Susceptibility
9. Routes of administration of remedy
10. Cause of disease
11. History of Homoeopathy in India
12. Evaluation of symptoms

Write Short Notes on:-

(3x10=30)

13. Define health
14. Hindu medicine
15. Define totality of symptoms
16. Placebo
17. Define life
18. Key note symptom
19. Incurable cases
20. Favourite remedy
21. Absolute symptoms
22. Importance of a common symptom

ANSWER KEY:- (Model Question Paper:- Paper-I)

Subject:- Organon of Medicine and Homoeopathic philosophy.

Essays:-

(10x2=20)

1. With reference to aphorisms 246 to 258
2. Genus epidemicus – history –belladonna experiment- Asiatic cholera incident-Disease prevention in aphorisms-Epidemic management Kent-Classification of preventives

Notes:-

(5x10=50)

3. Palliation- definition-application –Kent’s observation in palliation—law of palliation
4. Characteristic symptoms-§153-boenninghausens-stuart close-general symptom Hahnemann and kent
5. Scope of homoeopathy-stuart close
6. Differentiate drug and remedy
7. Negative general. Give examples
8. Susceptibility explain on the basis of §§ -kent- stuart close
9. Routes of administration of remedy-chronic diseases -§§- ingestion-olfaction-inunction-administration to mothers in breast fed infants
10. Cause of disease –exciting cause-maintaining –fundamental
11. History of Homoeopathy in India-introduction – Hoenningberger-spread in India-present situation
12. Evaluation of symptoms

Short Notes:-

(3x10=30)

13. Define health WHO definition-explain
14. Hindu medicine-basic principles-
15. Define totality of symptoms -stuart close
16. Placebo
17. Define life -Stuart close
18. Key note symptom -Stuart close
19. Incurable cases Kent- treatment
20. Favorite remedy
21. Absolute symptoms-Garthe Boericke classification
22. Importance of a common symptom –Kent, IV BHMS

Model Question Paper:- Paper-II**IV BHMS DEGREE EXAMINATIONS.**

Subject:- Organon of Medicine and Homoeopathic Philosophy.

Time 3hrs

Total marks 100

Essay questions:-

(10x2=20)

1. Idiosyncrasy
2. Deflected current

Write notes on:-

(5x10=50)

3. Record keeping
4. Local applications
5. The dose
6. Substantialism
7. Immunity
8. Tuberculosis
9. 50 ML potency
10. Analysis of the case
11. Suppression
12. Deficiency Miasm

Write Short Notes on:-

(3x10=30)

13. Homoeopathic Aggravation in acute diseases
14. Temperaments
15. Auxiliary symptoms
16. Metastasis
17. Infinitesimal dose
18. Law of mass action
19. Law of palliation
20. Internal man
21. Oversensitive patients
22. Spurious syphilis

Answer key:- (Model Question paper:- Paper II)

Subject:- Organon of Medicine and Homoeopathic Philosophy.

Essays:-

(10x2=20)

1. Idiosyncrasy-§117,kent classification- treatment-examples
2. Deflected current

Notes:-

(5x10=50)

3. Record keeping-kent
4. local applications-HA Roberts
5. The dose §§ Stuart close
6. Substantialism
7. Immunity
8. Tuberculosis
9. 50 ML potency
10. Analysis of the case
11. Suppression
12. Deficiency Miasm

Short Notes:-

(3x10=30)

13. Homoeopathic Aggravation in acute diseases
14. Temperaments
15. Auxiliary symptoms
16. Metastasis
17. Infinitesimal dose
18. Law of mass action
19. Law of palliation
20. Internal man
21. Oversensitive patients
22. Spurious syphilis

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 by Divan 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.

III BHMS Topics:-

(One hour per week – 40 hours for 10 months)

- 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

J. Need of repertory, logic ,merits & de-merits and how to overcome it
 K. History & Evolution of repertory, terminologies and language of repertories
 L. Methods & techniques of repertorisation including cross repertorisation
 M. Classification of repertories
 N. Detailed study of Kent's repertory including rubrics and interpretations
 O. Scientific methodology of repertorisation

Third BHMS (one hour per week- 40 hours for 10 months.)

- 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 hours
- Kent – Arrangement of rubrics
 - Practical guidelines
 - Important rubrics
 - Cross references -5 hours
- Kent- concept of totality
 - Methods of working a case
 - Special features
 - Criticism -5 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 – 125 hours for 10 months.)

- 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 repertoires- 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 Homopath, RADAR, ISIS etc
- H. Correlation of case taking & repertory with clinical & non-clinical subjects

Practical Works

Students shall repertoires:-

- (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 theory, 50% in practical + viva voce.

Clinical postings: In final year only (3 hrs in the morning session 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 repertoires, the case reports of the students carried out during the course shall be considered for the oral examination.

IV BHMS

(Three hour per week – 125 hours for ten months.)

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

- BTP- Concept of totality
 - Adaptability
 - Methods of repertorisation – 08 hours
- BTP- use of relationship section
 - Criticism
 - Kent’s view on BTP
 - Important rubrics – 04 hours
- Boger’s Repertory- Introduction
 - Philosophic background
 - Plan & Construction
 - Arrangement of rubrics – 07 hours
- Boger- Important use of subsections
 - Pathological generals
 - Important rubrics
 - Totality - 07 hours
- Boger- methods of repertorisation
 - Special features of repertory
 - Mind rubrics in Boger’s repertory with relevance
 - Critical study – 07 hours
- 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 hours

- Case repertorised by various repertories - Practical application of various repertories - 10 hours
- Interpretation of mental rubrics and methods of tracing mental symptoms - 05 hours
- Training on Softwares like ISIS, RADAR, Homopath 20 hour
- Correlation of study of repertory with clinical & non-clinical subjects - 05 hours

Model Question Paper.

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

Time : 3 Hrs

Max.Marks : 100

Essay Questions:-

(10x2=20)

- 1) What is anamnesis ? How past history, family history and treatment history helps in repertorisation? Explain with examples from Kent's repertory.
- 2) How will you use the concordance section of TBP. Explain with examples?

Write Notes on:-

(5x10=50)

- 3) Silent features of RADAR
- 4) Concomitant symptoms with their importance
- 5) Potential Differential Field with examples
- 6) Importance of the following years in the field of repertory---- 1846, 1881, 1959,1993
- 7) Base books used by Boger in the compilation of his repertory ?
- 8) Develop the denotations- Morbus coxarius, Mentagra , Pertinacity, Forsaken , Onyx
- 9) Problems in the interpretation of mental symptoms
- 10) Give the rubric with chapter in Kent's Repertory -Honeymoon cystitis, Primary tuberculosis, Ichthyosis, Artificial behavior to impress others , Tubercular abscess knee
- 11) Give the rubric with chapter in TPB – Diaphragm, Dislocations, Puerperal state , illusion, Bad milk
- 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

Write Short Notes on:-

(3x10=30)

- 13) Synthesis of rubrics
- 14) "Bed rock of TPB "
- 15) Criteria in the selection of rubrics
- 16) Brief note on Synthesis repertory
- 17) Brief note on concordance repertory of Gentry
- 18) Boger's concept of totality
- 19) Major classification of repertories
- 20) Difference between analysis & evaluation of symptoms
- 21) Develop abbreviations – Caj, Sel , Coca
- 22) Card Repertories.

**KERALA UNIVERSITY OF HEALTH 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, general, 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 chromosomal 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.Boenniaghhausen'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-ptthisis pulomonalis - incipient, Mind- affectation, Skin eruption scaly vesicular ichthyosis, 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 aetiology 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 Fichet 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

22. Construction of first Card Repertory----Different types----Present significance.

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. Frederik Schoryens-Synthesis
7. Robin Murphy -Homoeopathic Medical Repertory
8. Barthel and Klunker- Synthetic Repertory
9. Munir Ahmed - Introduction to principles of Repertorisation
10. Evolution of Homoeopathic repertories & repertorisations- Kishore jugal
11. Repertorisation - Tyler, Wier

COMMUNITY MEDICINE.

(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 field 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.

COMMUNITY MEDICINE---III BHMS.

- 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- 80 Hrs

COMMUNITY MEDICINE---IV BHMS.

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 refuse 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 Diphtheria, 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.

8.Health Information and Basic Medical Statistics.

9. Public health administration and international health relation

10.Epidemiology: Epidemiological principles and epidemiological methods.

11. 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 .No | Theory | | Practical/Clinical | | | | |
|--------|--------|-------|------------------------------------|----------|---------|-------|-------------|
| | Theory | Total | Practical/Clinical / internal Exam | Tutorial | Seminar | Total | Grand Total |
| | 100 | 100 | 80 | 10 | 10 | 100 | 200 |
| | | | | | | | |

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 | Minimum For pass | Int assessment | Total | Oral | Practical | Minimum For pass | Int assessment | Total | | |
| Community Medicine | 100 | 50 | 20 | 120 | 50 | 50 | 50 | 20 | 120 | 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 |
| | | VI. Emerging & Reemerging Infectious Disease | 4 | 90 |
| | | VII. Hospital acquired Infection | 4 | 94 |
| 05. | Epidemiology of Chronic Non- communicable D | i. Cardiovascular Disease & Coronary Heart Disease | 5 | 99 |
| | | ii. Hypertension & Stroke | 3 | 102 |
| | | iii. Rheumatic Heart Disease | 2 | 104 |
| | | iv. Cancer | 3 | 107 |
| | | v. Diabetes | 2 | 109 |
| | | vi. Obesity | 10 | |
| | | vii. Blindness | | 119 |
| | | viii. Accidents & Injuries | | |
| 06. | Health Programme in India | | 2 | 121 |

| | | | | |
|-----|--|--|----|-----|
| 07. | Demography & Family Planning | | 6 | 127 |
| 08. | Preventive Medicine in Obstetrics,, Paediatrics & Geriatrics | | 4 | 131 |
| 09. | Nutrition & Health | | 8 | 139 |
| 10. | Environment & Health | | 12 | 151 |
| 11. | Hospital waste Management | | 2 | 153 |
| 12. | Disaster Management | | 1 | 154 |
| 13. | Occupational Health | | 2 | 156 |
| 14. | Mental Health | | 2 | 158 |
| 15. | Basic Medical statistics | | 3 | 161 |
| 16. | Communication for Health education | | 2 | 163 |
| 17. | Health planning & Homoeopathic concept of prophylaxis | | 4 | 167 |
| 18. | Health care of Community | | 1 | 168 |
| 19. | International Health | | 2 | 170 |

TEXT BOOKS & REFERENCE BOOKS

COMMUNITY MEDICINE

TEXT BOOKS

| Sl. No: | Name of the book | Author |
|---------|--|----------------------------|
| 1. | Preventive and social medicine | K. Park |
| 2. | Textbook of Preventive and social medicine | B.K. Mahajan M.C. Gupta |
| 3. | Methods in Biostatistics | 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 | Mukhopadhyay |

Model Question Paper

KERALA UNIVERSITY OF HEALTH SCIENCES FINAL BHMS DEGREE EXAMINATIONS COMMUNITY MEDICINE

Time- 3 hours

Max.Marks:100

Essay questions:-

1. Describe the epidemiology, Prevention and Control of Tuberculosis.
2. Describe Modern sewage treatment. What are the methods of sewage disposal?
(10x2=20)

Write Notes on:-

3. Antenatal care
4. IUD
5. Feeding of Infants
6. Diagnosis & Prevention of different types of cancers
7. Control of Diabetes
8. Principle of Chlorination
9. Indices of Thermal Comfort
10. WHO
11. Clinical features of Chicken Pox
12. MMR & DPT
(5x10=50)

Write short notes on:-

13. Growth Chart
14. Juvenile delinquency
15. Serum Cholesterol
16. Vaccine Preventable Disease
17. Diagnosis of Leprosy
18. Composting
19. Drug abuse and Drug dependence
20. Functions of primary health centre
21. Surveillance
22. Health education.
(3x10=30)

BREAK UP OF MARKS FOR PRACTICAL EXAMINATION (TOTAL 50).

1. Practical record – 10 marks
2. Spotters – 40 marks (10 spotters carrying 4 marks each)

Answer key to Model Question Paper.

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.
2. 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.
3. Ante natal care-antenatal visit, prenatal advice, specific health protection, mental preparation, family planning
4. Types of intra uterine devices, effectiveness, advantages, contra indication, timing of insertion.
5. Breast feeding, artificial feeding
6. 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.
7. Treatment of diabetes, glycosylated haemoglobin, self care, home blood glucose monitoring
8. water should be free from turbidity, chlorine demand, breakpoint chlorination, contact period, free residual chlorine
9. Air temperature, humidity, cooling power, effective temperature, max. allowable sweat rate.
10. Objectives, membership, work of who, structure, regions.
11. Pre eruptive stage, eruptive stage- distribution, rapid evolution, pleomorphism, fever
12. 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
13. Growth chart-WHO chart, Chart used in India.
14. Incidence, causes, preventive measures.
15. Origin of cholesterol, types of lipoproteins, their normal values
16. Immunisation schedule, EPI
17. Clinical examination, bacteriological examination, foot pad culture, histamine test, test for detection of CMI
18. Definition, types-Bangalore method and mechanical composting.
19. Definition, reasons for drug dependence, criteria for calling a person as drug addict, Dependant producing drugs, symptoms of drug addiction, prevention
20. Functions of PHC
21. Definition, types of surveillance
22. Definition, aim and objectives, models of health education

FOURTH BHMS EXAMINATION

- (i) No candidate shall be admitted to the Fourth BHMS examination **unless 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) He/she should obtain a minimum of 35% marks in the internal assessment examinations.
- (iii) The Fourth BHMS examination shall be held at the end of 54th month of admission of First BHMS.
- (iv) The minimum number of hours for lecture, demonstration/practical, seminar and clinical classes in the subjects shall be as under:

| Sl. No | Subject | Theory | Practical / Clinical | Tutorial | Seminar | Total for practical/clinical/tutorial/seminar | Grand Total. |
|--------|--|---------------------------------|---|----------|---------|---|--------------|
| | | Theory including internal exam. | Practical/Clinical including internal exam. | | | | |
| 01 | Practice of Medicine & Homoeo therapeutics | 150 | 200 | 10 | 10 | 220 | 370 |
| 02 | Homoeopathic Materia Medica | 100 | 75 | 10 | 10 | 95 | 195 |
| 03 | Organon of Medicine, Principles of Homoeopathic Philosophy | 100 | 75 | 10 | 10 | 95 | 195 |
| 04 | Case taking & Repertorisation | 125 | 120 | 10 | 20 | 150 | 275 |
| 05 | Community Medicine | 100 | 80 | 10 | 10 | 100 | 200 |
| | TOTAL | 575 | 550 | 50 | 60 | 660 | 1235 |

Scheme of examination:-

(i). 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 Homoeopathic 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.

(ii.) 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 Boenninghausan Repertories, the case reports of the students carried out during the course shall be considered for the oralexamination.

(iii.) 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.

(iv.) 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.

(v.) 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.

Partial appearance in the examination is allowed, provided a student get 80% attendance in all the subjects, including the subject/subjects in which he/she is not appearing. But when a student appear for an examination of a particular subject, he/she should appear its theory examination, Practical examination and viva voce.

In order to pass the Fourth BHMS examination, candidates have to pass in all the subjects of the examination.

Full marks for each subject and the minimum marks required for pass are as follows.

FOURTH BHMS COURSE -DISTRIBUTION OF MARKS

| Subject | THEORY | | | | PRACTICAL& VIVA VOCE | | | | | Grand Total | Aggregate minimum for pass |
|-----------------------------|-------------------------|-------------------|----------------|-----------------|----------------------|---------------|---------------|----------------|-----------------------|-------------|----------------------------|
| | University Exam Written | Minimum For pass. | Int. Asse mark | Total in Theory | University practical | Univer Viva . | Mini For pass | Int. Asse mark | Total in Pract & Viva | | |
| Practice of Medicine | 300 | 150 | 60 | 360 | 100 | 100 | 100 | 40 | 240 | 600 | 300 |
| Case taking & Repertory | 100 | 50 | 20 | 120 | 50 | 50 | 50 | 20 | 120 | 240 | 120 |
| Homoeopathic Materia Medica | 200 | 100 | 40 | 240 | 100 | 100 | 100 | 40 | 240 | 480 | 240 |
| Organon of Medicine | 200 | 100 | 40 | 240 | 100 | 100 | 100 | 40 | 240 | 480 | 240 |
| Community Medicine | 100 | 50 | 20 | 120 | 50 | 50 | 50 | 20 | 120 | 240 | 120 |

BREAK UP OF PRACTICAL – CLINICAL EXAMINATIONS (FROM I BHMS TO IV BHMS).

Anatomy

Total marks – 100

1. Practical record – 10
2. Spotting – 30 (2 x 15 specimens)
3. Slides – 25 (5 x 5 slides)
4. Dissection viva – 35

Physiology & Biochemistry

Total marks – 100

1. Physiology - 50 marks
 - a. Experiment – 10 marks
 - b. Marks for work done – 10 marks
 - c. Viva – on experiment – 25 marks
 - d. Practical record – 5 marks.

2. Biochemistry – 50 marks
 - a. Experiment – 10 marks
 - b. Marks for work done – 10 marks
 - c. Viva – on experiment – 25 marks
 - d. Practical record – 5 marks.

Homeopathy Pharmacy

Total marks – 50

1. Spotters – 15 marks
2. Procedure – 10 marks
3. Practical done – 5 marks
4. Practical viva – 5 marks
5. Herbarium – 10 marks
6. Records – 5 marks

Forensic medicine

Total marks – 50

1. Practical record – 10
2. Specimens – 40 (8 x 5 specimens)
(3) marks divided as follows)
 - (a) Identification of specimen – 2 marks
 - (b) Mode of presentation – 3 marks
 - (c) Medico legal importance – 3 marks

Pathology

Total marks – 50

1. Practical records – 10 marks
2. Hematology – 10 marks
3. Urine analysis – 10 marks
4. Gramstaining – 10 marks
5. Spotters – 10 marks

Surgery

Total marks – 100

1. Case recorded – 10 marks
2. Case presentation – 20 marks
3. Diagnosis and investigation – 30 marks
4. Identification of instruments – 10 marks
5. Surgical management and therapeutics - 30 marks

Gynaecology

Total marks – 100

1. Case recorded – 10 marks
2. Case presentation – 20 marks
3. Diagnosis and investigation – 30 marks
4. Identification of instruments – 10 marks
5. Case management and therapeutics - 30 marks

Community Medicine

Total marks – 50

- e. Practical record – 10 marks
- f. Spotters – 40 marks (10 spotters carrying 4 marks each)

Practice of Medicine

Total marks – 100

1. Case record – 10 marks
2. Case presentation – 20 marks
3. Diagnosis and investigation – 40 marks
4. Case management and therapeutics - 30 marks

Case taking and Repertorisation

Total marks – 50

1. Case record – 10 marks
2. Case taking – 20 marks
3. Evaluation – 10 marks
4. Repertorisation – 10 marks

Organon of medicine (II BHMS)

Total marks – 50

1. Case taking performan - 25 marks
2. Case taking – 25 marks

Organon of medicine (III BHMS)

Total marks – 50

1. Case record – 10 marks
2. Case taking – 20 marks
3. Analysis and Evaluation – 20 marks

Organon of medicine (IV BHMS)

Total marks – 50

1. Case record – 10 marks
2. Case taking – 10 marks
3. Miasmatic diagnosis – 10 marks
4. Prescription – 20 marks.

Materia medica (II BHMS)

Total marks – 50

1. Case taking Performa – 25 marks
2. Case taking – 25 marks

Materiamedica (III BHMS)**Total marks – 50**

1. Case record – 10 marks
2. Case taking – 20 marks (Two acute cases)
3. Prescription – 20 marks

Materia medica (IV BHMS)**Total marks – 100**

1. Case record – 10 marks
2. Case taking – (a) short case - 20 marks
(b) Long case – 25 marks
4. Nosological and Therapeutic diagnosis – 45 marks

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 from 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 determined 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: 80% attendance in a subject for appearing in the examinations is compulsory. The examining body may relax this on exceptional circumstances on individual merit.

(iv) He/she should obtain a minimum of 35% marks in the internal assessment in all the subjects in which he likes to appear for the University examinations.

(v) Each theory paper shall be of three hours duration.

(vi) The Practical/ oral examination shall be completed immediately after the theory Examination.

(vii) 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.

(viii) There shall be two examinations in a year. One Regular examination and another Supplementary. The supplementary examination may be conducted within 6 months of the Regular examination.

(ix) 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.

(x) 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.

(xi) Internal Assessment:

Twenty percent of the marks of the internal assessment in Theory and Practical/Clinical + Viva voce shall be added to the marks of the University examinations for Theory and

Practical/Clinical + Viva voce respectively, 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 internal assessment is added to the marks of the University examinations, 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 | :10% |
| 3. Percentage of attendance | : 10% |

PRACTICAL / CLINICAL:

- | | |
|--|-------|
| 1. Internal assessment examinations | : 80% |
| 2. Seminar / Clinical Presentation/Other assignments | : 10% |
| 3. Percentage of attendance | : 10% |

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 will not be allowed to migrate/transfer to another Homoeopathic Medical College under same or another University.

(b) The University concerned can allow the migration/ transfer on exceptional cases on medical Ground, subjected to the regulations of the University related to such migration / transfer.

(c) Cases not covered under the above regulations may be referred to the Council for

consideration on individual merits.

(d) Intimation about the admission of migrated / transferred students into any College shall be sent to the Council fore with.