

**SYLLABUS 2016**

**Kerala University of Health Sciences  
Thrissur 680596**



**SYLLABUS**

**BACHELOR OF HOMOEOPATHIC  
MEDICINE AND SURGERY (BHMS)**

**Course Code 004**

**(2015-16 admission onwards)**

**NEW SCHEME**

**(Approved by the Academic Council)**

(This is excerpted from the draft Regulations document being prepared by the KUHS. Hence the numbering pattern is being retained)

## 2. COURSE CONTENT

### 2.1 Title of course:

Bachelor of Homoeopathic Medicine and Surgery (BHMS)

### 2.2 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 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 repertorial totality.

The knowledge gathered in this pattern, will keep him constantly aware of his objectives and his role as a Homoeopathic Physician. The integration will eliminate the state of confusion. The therapeutic 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 Gynecology. 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 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 throughout the course and to achieve this objective, the educational process shall be community as well as hospital based.

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

**2.3 Medium of instruction:**

Medium of instruction shall be in English.

**2.4 Course outline**

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

Sl. No.	Name of Subject	Year of study	Examinations conducted
1.	Anatomy	First BHMS	At the end of First BHMS Course
2.	Physiology & Biochemistry	First BHMS	At the end of First BHMS Course
3.	Homoeopathic Pharmacy	First BHMS	At the end of First BHMS Course
4.	Organon of Medicine with Homoeopathic Philosophy	First BHMS, Second BHMS, Third BHMS & Fourth BHMS	At the end of Second, Third and Final BHMS Course
5.	Homoeopathic Materia Medica	First BHMS, Second BHMS, Third BHMS & Fourth BHMS	At the end of Second, Third and Final BHMS Course
6.	Forensic Medicine & Toxicology	Second BHMS	At the end of Second BHMS Course
7.	Pathology	Second BHMS	At the end of Second BHMS Course
8.	Gynaecology and Obstetrics	Second BHMS & Third BHMS	At the end of Third BHMS Course
9.	Surgery	Second BHMS & Third BHMS	At the end of Third BHMS Course
10.	Community Medicine	Third BHMS & Fourth BHMS	At the end of Final BHMS Course
11.	Repertory	Third BHMS & Fourth BHMS	At the end of Final BHMS Course
12.	Practice of Medicine	Third BHMS & Fourth BHMS	At the end of Final BHMS Course

Each college shall impart teaching and training to all the students in all the classes for theory and practical or clinical including tutorial and seminar for minimum of seven working hours on a working day (including thirty minutes for lunch)

## 2.5 Duration

The total duration of the course is five and half years, including one year internship. Every candidate for award of B.H.M.S degree shall undergo a course of certified study extending over four and a half academic years from the date of commencement of the course as per syllabus and curriculum prescribed for the course in Homoeopathic Medical College affiliated to the University and Compulsory rotatory Internship for 12 months.

## 2.6 Syllabus.

The different subjects of study and their syllabus are furnished under 'Clause 2.10'

## 2.7 Total number of hours

The students have to attend a minimum of 240 working day .

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

### **FIRST BHMS COURSE -(Duration one academic year)**

Sl.No.	SUBJECT	Theory Hours	Practical/Clinical/ Tutorial/Seminar Hours	TOTAL
1.	Anatomy	225	275	500
2.	Physiology & Biochemistry	225	275	500
3.	Homoeopathic Pharmacy	100	100	200
4.	Organon of Medicine, With Homoeopathic Philosophy	70	-	70
5.	Homoeopathic Materia Medica	70	-	70
	<b>TOTAL</b>			<b>1340</b>

### **SECOND BHMS COURSE (Duration one academic year)**

Sl.No.	SUBJECT	Theory	Practical/Clinical/ Tutorial/Seminar		TOTAL
1.	Pathology	200	80		280
2.	Forensic Medicine & Toxicology	80	40		120
3.	Organon of Medicine, With Homoeopathic Philosophy	160	60		220
4.	Homoeopathic Materia Medica	160	60		220
5.	Surgery	80	Minimum 60 Hrs.	One term of 3 months each in surgical ward & OPD	140
6.	Gynaecology and Obstetrics	80	Minimum 60 Hrs.	One term of 3 months each in OBG ward & OPD	140
<b>TOTAL</b>					<b>1120</b>

**THIRD BHMS COURSE (Duration one academic year)**

Sl.No.	SUBJECT	Theory	Practical/Clinical/ Tutorial/Seminar		TOTAL
1.	Practice of Medicine and Homoeopathic therapeutics	75	Minimum 75 Hrs.	One term of 3 months each in OPD & IPD in Different wards	150
2.	Surgery and Homoeopathic therapeutics	150	Minimum 75 Hrs.	One term of 3 months each in surgical ward &	225

				OPD	
<b>3.</b>	Gynaecology and Obstetrics & Homoeopathic therapeutics	<b>150</b>	Minimum 75 Hrs.	One term of 3 months each in OBG ward & OPD	<b>225</b>
<b>4.</b>	Homoeopathic Materia Medica	<b>100</b>		<b>75</b>	<b>175</b>
<b>5.</b>	Organon of Medicine, With Homoeopathic Philosophy	<b>100</b>		<b>75</b>	<b>175</b>
<b>6.</b>	Repertory	<b>50</b>		<b>25</b>	<b>75</b>
<b>7.</b>	Community medicine	<b>35</b>		<b>15</b>	<b>50</b>
	<b>TOTAL</b>				<b>1075</b>

**FINAL BHMS COURSE (Duration one and a half academic years)**

Sl.No.	SUBJECT	Theory	Practical/Clinical/ Tutorial/Seminar		TOTAL
<b>1.</b>	Practice of Medicine and Homoeopathic therapeutics	<b>180</b>	Min. 275 Hrs.	One term of 3 months each in OPD & IPD respectively for case taking, analysis and provisional prescription just for case presentation on ten cases per month	<b>455</b>
<b>2.</b>	Homoeopathic Materia Medica	<b>180</b>	Min. 150 Hrs.		
<b>3.</b>	Organon of Medicine, With Homoeopathic Philosophy	<b>180</b>	Min. 150 Hrs.		<b>330</b>
<b>4.</b>	Repertory	<b>100</b>	Min. 150 Hrs.		<b>250</b>
<b>5.</b>	Community medicine	<b>100</b>	100		<b>200</b>



	<b>TOTAL</b>	<b>1465</b>
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**2.8 Branches if any with definition**

Not applicable

**2.9 Teaching learning methods**

Lecture, practical classes, Seminars, Tutorials and assignments.

**2.10 Content of each subject in each year**

**FIRST BHMS**

**ANATOMY**

**Instructions**

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 a student is required to memories should be reduced to the minimum. Major emphasis should be laid on functional anatomy of 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 and std of the cadaver is the only means to achieve this. 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 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 are kept in view.

1. Only such details as have professional or general educational value for the medical students.
2. The purpose of dissection is to give the student an understanding of the body in relation to its function, and the dissection should be designed to achieve this goal

3. Normal radiological anatomy may also form part of practical or clinical training and the structure of the body should be presented linking functional aspects.
4. 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 more interesting, lively and practical or clinical.
5. A good part of theoretical lectures on anatomy can be transferred to tutorial classes' with the demonstrations.
6. Students should be able to identify anatomical specimens and structures displayed in the dissections.
7. Lectures or demonstrations on the clinical and applied anatomy should be arranged in the later part of the course and it should aim at demonstrating the anatomical basis of physical signs and the value of anatomical knowledge to the students.
8. Seminars and group discussions to be arranged periodically with a view of presenting these subjects in an integrated manner.
9. More stress on demonstrations and tutorials should be given. Emphasis should be laid down on the general anatomical positions and broad relations of the viscer ,muscles, blood vessels, nerves and lymphatics.
10. There should be joint seminars with the departments of physiology and biochemistry which should be organised once a month
11. There should be a close correlation in the teaching of gross Anatomy, Histology. Embryology and Genetics and the teaching of Anatomy .Physiology including Biochemistry shall be integrated.

## **Curriculum**

### **A. Theory:( Total 225 Hrs)**

- a) A complete study of human anatomy with general working knowledge of different anatomical parts of the body.

## **1. General Anatomy**

Modern concepts of cell and its components, cell divisions, types with their significance.  
Tissues, Genetics.

## **2. Developmental anatomy (Embryology)**

1. Spermatogenesis
2. Oogenesis,
3. Formation of germ layers
4. Development of embryonic disc
5. Placenta
6. Development of abdominal organs
7. Development of cardiovascular system
8. Development of nervous system
9. Development of respiratory system
10. Development of body cavities
11. Development of uro-genital system

## **3. Regional anatomy**

This will be taught under the following regions:-

1. Head, Neck and Face, Brain
2. Thorax
3. Abdomen
4. Upper and Lower extremities
5. Special Senses

Each of the above areas will cover,-

- a. Osteology
- b. Syndesmology(joints)
- c. Myology
- d. Angiology
- e. Neurology
- f. Splanchnology(viscera and organs)

- g. Surface anatomy
- h. Applied anatomy
- i. Radiographic anatomy

#### 4. Histology (Microanatomy)

##### **B. Practical-( Total 275 Hrs)**

1. Dissection of the whole human body & demonstration of dissected parts.
2. Identification of histological slides related to tissues and organs.
3. Students shall maintain practical records and dissection cards.

##### **C. Examination: -**

##### **1. Theory (Total-200 marks)**

Paper-I (100 marks)

General anatomy Head, face and neck, Central nervous system, Upper extremities and Embryology

Paper-II (100 marks)

Thorax, Abdomen, Pelvis, Lower extremities and Histology (Microanatomy)

##### **2. Practical - Marks-200**

The practical including viva voce or oral examination includes the following areas:

Distribution of marks	Marks
Knowledge of dissected parts-	20
Viscera	20
Bones	20
Surface anatomy	10
Spotting (including Radiology and Histology)	20
Maintenance of practical record	10
Viva voce (oral)	100
Total	200

## Syllabus

### A) General anatomy & Microanatomy

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

Spermatogenesis, Oogenesis, Fertilisation, Implantation and changes, embryonic disc, Germ layer Placenta, Foetal membranes, Umbilical cord, Organogenesis.

### c) Regional anatomy

Regional anatomy shall be taught with emphasis on developmental anatomy, broad relationship, surface marking, Neuro vascular supply, Radiological anatomy, and applied anatomy.

#### a. Extremities:-

- i. Skeleton, position and functions of joints.
- ii. Muscle groups, lumbo sacral plexus.
- iii. Arterial supply, venous drainage, neurovascular 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 movements, results of nerve injury.
- v. Radiology of bones and joints, classification, determination of age
- vi. Applied anatomy
- vii. Surface markings of main arteries, nerves.

## **b.Thorax**

- i. Skeleton, joints, muscles of chest wall –diaphragm, The mammary gland, lymphatic drainage.
- ii. The pleura & lungs.
- iii. Mediastinum, heart, coronary arteries, great vessels, trachea, oesophagus, lymph nodes, Thymus
- iv. Radiology, of heart, aorta, lung.
- v. Surface marking – pleura, lung and heart- valves of heart, borders. Arch of aorta, sup.vena cava, bifurcation of trachea
- vi. Applied Anatomy

## **c. Abdomen and Pelvis:-**

- i. The abdominal wall – skin and muscles, innervations 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 gallbladder
- v. Pelvis, skeleton and joints, muscles of pelvis, organs, external genitalia in male and in the female, lumbosacral plexus, vessels, lymphatics, 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, porto systemic anastomosis.
- viii. Surface marking of organs and blood vessels.

## **d. Head and Neck:-**

- i. Scalp- Innervation, vascular supply, middle meningeal artery.
- ii. Face- main muscle group, muscles of mastication, facial expression.
- iii. The eyelids, eye ball, lacrimal apparatus, muscles that move the eyeball
- iv. The nasal cavity, naso pharynx, paranasalsinuses, Eustachian tube and Lymphoid masses
- v. Oral cavity and pharynx.

- vi. Larynx
- vii. Cervical vertebrae joints of head and neck.
- viii. Structures of neck, sternocleidomastoid, thyroid gland ,salivary gland
- ix. Teeth and dentition.
- x. The external, middle and internal ear.
- xi. Applied anatomy
- xii. Neuro vascular supply
- xiii. Surface marking: Parotid gland, middle meningeal artery, thyroid gland, common internal and external carotid arteries.

**e. Neuro anatomy: -**

- i. Meninges –
- ii. Cerebrum – functional areas of brain, basal ganglia, internal capsule .
- iii. Mid brain
- iv. Hind brain structures
- v. Ventricles of brain, Cerebro spinal fluid –formation, circulation.
- vi. Cranial nerves, origin, courses, areas of distribution, nerve palsies.
- vii. Sympathetic and parasympathetic nervous system, location, distribution
- viii. Blood supply Supply of Brain
- ix. Applied anatomy viz; lumbar puncture, referred pain, spinal anaesthesia, Increased intracranial pressure etc.

**B .PRACTICAL**

1. Demonstration of dissected parts/dissection of the whole human body.
2. Identification of histological specimen of tissues and organs viz., Cartilage, Bone, Epithelium, Artery , Vein, Adipose tissue, Skin, Mammary gland, Cardiac muscle, Skeletal muscle, Trachea, lungs, Thyroid, Para thyroid, Oesophagus, Stomach, Duodenum, Pancreas, Spleen, liver, Jejunum, Ileum, large Intestine, Testes, ovary, kidney , Ureter, supra renal gland, Parotid gland, Pituitary gland, Salivary gland, Cerebrum, Cerebellum, Spinal cord , Retina, Cornea etc.

### LIST OF BOOKS

No	Recommended text book	No	Reference books
1	Cunningham's Manual of practical anatomy-Vol: I,II,III	1	Grays Anatomy - Standing
2	B .D Chaurasia,s Human anatomy Vol: I,II,III	2.	Atlas of Anatomy
3	Embryology-Inderbersingh	3.	Osteology-Podder
4	Histology-Inderbersingh	4.	Clinical Embryology-Snell
5	Clinical anatomy-Neeta .V.Kulkarni	5.	Clinically orientedAnatomy-Kadasne

### PHYSIOLOGY& BIOCHEMISTRY

#### Instructions:

**I (a)** The purpose of a course 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.

**(b)** To a Homoeopath the human organism is an integrated whole of body life and mind and though life includes all the chemico-physical processes it transcends them.

**(c)** 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;

**(d)** Physiology shall be taught from the stand point of describing physical processes underlying them in health.

**(e)** Applied aspect of every system including the organs is to be stressed upon while teaching the subject.



**II (a)** There should be close co-operation between the various departments while teaching the different systems;

**(b)** There should be joint courses between the two departments of anatomy, physiology and biochemistry should bring home the point to the students that the integrated approach is meaningful.

**A. Theory:( Total 225 Hrs))(including biochemistry)**

The curriculum includes the following namely:

**Physiology**

**I. General physiology:**

1. Introduction to cellular physiology
2. Cell Junctions
3. Transport through cell membrane and resting potential
4. Body fluids compartments
5. Homeostasis

**II. Body fluids:**

1. Blood
2. Plasma Proteins
3. Red Blood Cells
4. Erythropoiesis
5. Haemoglobin and Iron Metabolism
6. Erythrocyte Sedimentation Rate
7. Packed cell Volume and Blood Indices
8. Anaemia
9. Haemolysis and Fragility of Red Blood Cells
10. White Blood Cell
11. Immunity
12. Platelets
13. Haemostasis

14. Coagulation of Blood
15. Blood groups
16. Blood Transfusion
17. Blood volume
18. Reticulo-endothelial System and Tissue Macrophage
19. Lymphatic System and Lymph
20. Tissue fluid and Oedema

### III. Cardio-vascular system:

1. Introduction to cardiovascular system
2. Properties of cardiac muscle
3. Cardiac cycle
4. General principals of circulation
5. Heart sounds
6. Regulation of cardiovascular system
7. Normal and abnormal Electrocardiogram (ECG)
8. Cardiac output
9. Heart rate
10. Arterial blood pressure
11. Radial Pulse
12. Regional circulation- Cerebral, Splanchnic, Capillary, Cutaneous & skeletal muscle circulation
13. Cardiovascular adjustments during exercise

### IV. Respiratory system and environmental physiology:

1. Physiological anatomy of respiratory tract
2. Mechanism of respiration: Ventilation, diffusion of gases
3. Transport of respiratory gases
4. Regulation of respiration
5. Pulmonary function tests

6. High altitude and space physiology
7. Deep sea physiology
8. Artificial respiration
9. Effects of exercise on respiration

#### V. Digestive system:

1. Introduction to digestive system
2. Composition and functions of digestive juices
3. Physiology anatomy of Stomach, Pancreas, Liver and Gall bladder, Small intestine, Large intestine
4. Movements of gastrointestinal tract.
5. Gastrointestinal hormones
6. Digestion and absorption of carbohydrates, proteins and lipids

#### VI. Renal physiology and skin:

1. Physiological anatomy of kidneys and urinary tract
2. Renal circulation
3. Urine formation: Renal clearance, glomerular filtration, tubular reabsorption, selective secretion, concentration of urine, acidification of urine.
4. Renal function tests
5. Micturition
6. Skin
7. Sweat
8. Body temperature and its regulation

#### VII. Endocrinology:

1. Introduction to endocrinology
2. Hormones and hypothalamo-hypophyseal axis
3. Pituitary gland
4. Thyroid gland
5. Parathyroid
6. Endocrine functions of pancreas

7. Adrenal cortex
8. Adrenal medulla
9. Endocrine functions of other organs

VIII. Reproductive system:

1. Male reproductive system – testis and its hormones; seminal vesicles, prostate gland, semen.
2. Introduction to female reproductive system
3. Menstrual cycle
4. Ovulation
5. Menopause
6. Infertility
7. Pregnancy & parturition
8. Placenta
9. Pregnancy tests
10. Mammary glands and Lactation
11. Fertility
12. Foetal circulation

IX. Central nervous system:

1. Introduction to nervous system
2. Neuron
3. Neuroglia
4. Receptors
5. Synapse
6. Neurotransmitters
7. Reflex
8. Spinal cord
9. Somato-sensory system and somato-motor system
10. Physiology of Pain

11. Brainstem, Vesicular apparatus
12. Cerebral cortex
13. Thalamus
14. Hypothalamus
15. Internal capsule
16. Basal ganglia
17. Limbic system
18. Cerebellum – Posture and equilibrium
19. Reticular formation
20. Proprioceptors
21. Higher intellectual function
22. Electroencephalogram (EEG)
23. Physiology of sleep
24. Cerebro-spinal fluid (CSF)
25. Autonomic nervous system (ANS)

X. Special senses:

1. Eye: Photochemistry of vision, Visual pathway, Pupillary reflexes, Colour vision, Errors of refraction
2. Ear: Auditory pathway, Mechanism of hearing, Auditory defects
3. Sensation of taste: Taste receptors, Taste pathways
4. Sensation of smell: Olfactory receptors, olfactory pathways
5. Sensation of touch

XI. Nerve muscle physiology:

1. Physiological properties of nerve fibres
2. Nerve fibre – types, classification, function, Degeneration and regeneration of peripheral nerves.
3. Neuro-Muscular junction
4. Physiology of Skeletal muscle
5. Physiology of Cardiac muscle

6. Physiology of smooth muscle
7. EMG and disorders of skeletal muscles.

**XII. Bio-physical sciences:**

1. Filtration
2. Ultra filtration
3. Osmosis
4. Diffusion
5. Adsorption
6. Hydrotropy
7. Colloid
8. Donnan equilibrium
9. Tracer elements
10. Dialysis
11. Absorption
12. Assimilation
13. Surface tension

**BIO-CHEMISTRY**

1. Carbohydrates: (Chemistry, Metabolism, Glycolysis, TCA, HMP, Glycogen synthesis and degradation, Blood glucose regulation)
2. Lipids: (Chemistry, Metabolism, Intestinal uptake, Fat transport, Utilisation of stored Fat, Activation of fatty acids, Beta oxidation and synthesis of fatty acids)
3. Proteins: (Chemistry, Metabolism, Digestion of proteins, Transamination, Deamination, Fate of Ammonia, Urea cycle, End products of each amino acid and their entry into TCA cycle)
4. Enzymes: (Definition, Classification, Biological Impotence, Diagnostic use, Inhibition)
5. Vitamins: (Daily requirements, Dietary source, Disorders and physiological role)
6. Minerals: (Daily requirements, Dietary source, Disorders and physiological role)
7. Organ function tests

## **B. Practical : (Total 275 Hrs)(including biochemistry)**

### **Physiology**

#### I. Haematology:

1. Study of the Compound Microscope
2. Introduction to haematology
3. Collection of blood samples
4. Estimation of Haemoglobin Concentration
5. Determination of Haematocrit
6. Haemocytometry
7. Total RBC count
8. Determination of RBC indices
9. Total Leucocytes count (TLC)
10. Preparation and examination of Blood smear
11. Differential Leucocyte count (DLC)
12. Absolute Eosinophil count
13. Determination of Erythrocyte Sedimentation Rate
14. Determination of Blood groups
15. Osmotic fragility of Red cells
16. Determination of Bleeding Time & Coagulation Time
17. Platelet Count
18. Reticulocyte Count

#### II. Human experiments

1. General Examination
2. Respiratory System – Clinical examination, Spirometry, Stethography
3. Gastrointestinal System – Clinical examination
4. Cardiovascular System – Blood pressure recording, Radial pulse, ECG, Clinical examination
5. Nerve and Muscle Physiology – Mosso's Ergography, Handgrip Dynamometer

6. Nervous System – Clinical examination
7. Special Senses – Clinical examination
8. Reproductive System – Diagnosis of pregnancy

### **Biochemistry**

1. Demonstration of uses of instruments or equipment
2. Qualitative analysis of carbohydrates, proteins and lipids
3. Normal characteristics of urine
4. Abnormal constituents of urine
5. Quantitative estimation of glucose, total proteins, uric acid in blood
6. Liver function tests
7. Kidney function tests
8. Lipid profile
9. Interpretation and discussion of result of biochemical tests.

### **(C) EXAMINATION**

#### 1. Theory

(1) No. of papers – 02

(2) Marks: paper – I – 100 & Paper II – 100

##### 1.1. Contents:

##### 1.1.1. Paper – I:

General Physiology, Biophysics, Body fluids, Cardiovascular system, Reticuloendothelial system, Respiratory system, Excretory system, Regulation of body temperature, Skin, Nerve Muscle Physiology

##### 1.1.2. Paper – II:

Endocrine system, Central Nervous system, Digestive system and Metabolism, Reproductive system, Sense organs, Biochemistry, Nutrition

#### 2. Practical including viva voce or oral:

2.1. Marks: Practical:100, Viva: 100, Total: 200

2.2. Distribution of marks;

marks

2.2.1. Experiments

:50

2.2.2. Spotting

;30



2.2.3. Maintenance of Practical record/journal/assignment	:20
Total	:100
2.2.4. Viva Voce(Oral)	:100

### **Physiology& Biochemistry Books**

#### **Recommend text books**

- 1 Text book of Medical Physiology: Guyton
2. Text book of Biochemistry; Dr.Vasudevan
3. Text book of Practical Physiology-Pal & Pal

#### SupplementaryBooks

- 1 Samson wright's applied Physiology
- 2 Review of Medical Physiology- Willam.F.Ganong
- 3.Harper's Biochemistry
- 4 Human Physiology – Vol I &Vol II; C.C.Chatterjee
- 5 Concise Medical Physiology – Choudhary

#### **Reference books**

1. Text book of Medical Biochemistry: M.N.Chatterjee
2. Text book of Human Physiology ;Madavankutty
3. Biochemistry – Sathya Narayanan

### **HOMOEOPATHIC PHARMACY**

#### **A. THEORY( Total 100 Hrs)**

##### **1. General concepts and orientation**

- a. History of Pharmacy with emphasis in emergence of Homoeopathic Pharmacy
- b. Official Homoeopathic Pharmacopoea and Unofficial Homoeopathic Pharmacopoea. ( German, British, U.S.A, Indian)
- c. Important terminologies like Scientific names, common names, synonyms.
- d. Definitions in Homoeopathic Pharmacy.
- e. Components of Pharmacy- Branches of Pharmacy.
- f. Weights and measurements.
- g. Nomenclature of Homoeopathic drugs with their anomalies.
- h. Speciality and originality of Homoeopathic Pharmacy.
- i. Relation of Pharmacy with Materia Medica, Organon of Medicine and National Economy.

## **2. Raw Materials- Drugs and Vehicle**

- a. Sources of Drugs- Taxonomical and Morphological classification with reference to utility.
- b. Collection of Drug substances.
- c. Vehicles.
- d. Homoeopathic Pharmaceutical instruments and appliances.

## **3. Homoeopathic Pharmaceutics.**

- a. Mother Tincture- Its preparation and Preservation- Old and New methods of Preparation.
- b. Drug Dynamization or Potentisation. Preservation of potentised drugs and various scales of Dynamization.
- c. External application (Focus on scope of Homoeopathic lotion, glycerol, liniment, ointment and others).
- d. Doctrine of Signature.
- e. Posology ( Focus on basic principles related aphorisms of Organon of Medicine).
- f. Prescription. ( commonly used abbreviations with meaning).

Concept of Placebo.

- g. Pharmaconomy- Routs Homoeopathic drug administration.
- h. Dispensing of Medicines.
- i. Basis of adverse drug reaction and Pharmaco vigilance.
- j. Phytochemistry.
- k. Pharmacopallaxy.

## **4 Pharmacodynamics and Pharmacognosy( Pharmacology)**

- a. Homoeopathic Pharmacodynamics.
- b. Drug Proving (related aphorisms 105-145 of Organon of Medicine). Merits and demerits of Human and Animal proving.
- c. Pharmacological study of drugs listed in Appendix- A

## **5. Quality control**

- a. Standardization of Homoeopathic Drugs- Raw materials and finished products.
- b. Good Manufacturing Practices, Industrial Pharmacy

c. Homoeopathic Pharmacopoea Laboratory- Functions and Activities, relating to quality control of Drugs.

#### **6. Legislations Pertaining to Homoeopathic Pharmacy**

a. The Drug and Cosmetic Act- 1940 (23 of 1940) in relation to Homoeopathy

b. Drug and Cosmetic Rules 1945- in relation to Homoeopathy.

c. Poisons act 1990

d. The Narcotic drugs and Psychotropic substances Act 1985- 61 of 1985- Dangerous Drug Act

e. Drugs and Magic Remedies Act 1954- 21 of 1954. Medicinal and Toilet Preparation Act 1955(Excise Duties)- 16 of 1955

f. Drug Price Control order 1970 and 1971.

g. Pharmacy Act 1948.

#### **B. PRACTICALS (Total 100 Hrs)**

##### Experiments

1. Estimation of size of globules.
2. Medication of globules and preparation of doses with sugar of milk and distilled water.
3. Purity test of sugar of milk, distilled water, ethyl alcohol.
4. Determination of specific gravity of distilled water and ethyl alcohol.
5. Preparation of dispensing alcohol and dilute alcohol from strong alcohol.
6. Trituration of one Drug each up to 6X or 3C.
7. Succession in Decimal scale from Mother Tincture to 6X potency (one old and one new method).
8. Succession Centesimal scale from Mother Tincture to 3C potency (one old and one new method).
9. Conversion of Trituration to liquid potency; Decimal scale 6X to 8X potency.
10. Conversion of Trituration to liquid potency; Centesimal scale 3C to 4C.
11. Preparation of 0/1 potency (L M Scale) of one Drug.
12. Preparation of External applications- Lotion (dressing and eye), Glycerol, Liniment, Ointment ( both methods).
13. laboratory methods- Sublimation, Distillation, Decantation, Filtration, Crystallisation.
14. Writing of prescription .

15. Dispensing of medicines.
16. Process of taking of minims.
17. Identification of drugs (listed in appendix B).
  - a. Macroscopic and Microscopic characteristics of Drug substances- minimum 5 drugs.
  - b. Microscopic study of Trituration of two drugs up to 3X potency.
18. Estimation of moisture content using water bath.
19. Preparation of Mother Tincture- Maceration (one by old method and one by new method) and Percolation.
20. collection of 30 Drugs for Herbarium.
21. Visit to Homoeopathic Pharmacopoea Laboratory and visit to a large scale Manufacturing unit of Homoeopathic Medicines (GMP ). Students shall keep detailed visit report as per proforma Annexure-B

### **Demonstrations**

1. General Instructions for practical or clinical Pharmacy.
2. Identifications and use of Homoeopathic Pharmaceutical instruments and appliances and their cleaning.
3. Estimation of Moisture content using water bath.
4. Preparation of Mother Tincture- Maceration and Percolation.

### **C.APPENDIX**

#### **PHARMACOLOGICAL ACTION**

1. Aconite nap
2. Adonis vernalis
3. Allium cepa
4. Argentum nit
5. Arsenic alb
6. Belladonna
7. Cactus G
8. Cantharis
9. Cannabis ind
10. Cannabis sat

11. Cinchonna of
12. Coftea crud
13. Crataegus
14. Crotalushor
15. Gelsemium
16. Glonoine
17. Hydrastis can
18. Hyoscynamus n
19. Kali bich
20. Lachesis
21. Lithium carb
22. Mercuriuscor
23. &nbsp;Naja t
24. Nitric acid
25. Nux vomica
26. Passifioraincamata
27. &nbsp;Stannum met
28. Stramonium
29. Stramonium
30. Tabacum

## **LIST OF DRUGS FOR IDENTIFICATION**

### **I. VEGETABLE KINGDOM**

1. Aegle folia
2. Anacardiumorientale
3. Andrographispenniculata
4. Calendula offic
5. Cassia sophera
6. Cinchonna off
7. Cocculusindicus
8. Coneeacruda
9. Colocynth cittrallus
10. Crocus sativa
11. Croton tig
12. Cynodon
13. Ficusreligiosa
14. Holerrhenaantidysentrica

15. Hydrocotyle
16. Justisiaadhatoda
17. Lobelia inflata
18. Nux vomica
19. Ocimum
20. Opium
21. Rauwolfia serpentine
22. Rheum
23. Saracaindica
24. Senna (cassia acutifolia)
25. Stramonium met
26. Vinca minor

## **II. CHEMICALS**

1. Acetic acid
2. Alumina
3. Argentum metallicum
4. Argentum nitricum
5. Arsenic alb
6. Calcarea Carb
7. Carbo veg (charcoal)
8. Graphitis
9. Magnesium
10. Mercury (the metal)
11. Natrummur
12. Sulphur

## **III. ANIMAL KINGDOM**

1. Apis malefic
2. Blattaorientalis
3. Formica ruba
4. Sepia
5. Tarentulacubensis

## **D. EXAMINATION**

## 1. Theory

1.1 Number of Paper : 01

1.2 Marks: 100

## 2. Practical including viva voce or oral:

2.1. Marks: 100

2.2. Distribution of marks;	marks
2.2.1. Experiments	:20
2.2.2. Spotting	:15
2.2.3. Maintenance of Practical record	:10
2.2.4 Maintenance of Herbarium record	:05
2.2.5 Viva Voce/Oral	:50
Total	:100

## **Recommended books for Homoeopathic Pharmacy.**

### **Text books:-**

1. A Text Book of Homoeopathic Pharmacy-----Mandal and Mandal.
2. Augmented Text Book of Homoeopathic Pharmacy-----D.D.Banerjee.
3. Art and Science of Homoeopathic Pharmacy-----SumitGoel.

### **Reference Books:-**

1. Homoeopathic Pharmacy for students and practitioners-----T.P.Elias
2. Homoeopathic Pharmacopoeia of India (Vol 1—9)----HPL
3. A Treatise on Homoeopathic Pharmacy-----N.K.Banerjee&N.Sinha
4. Pharmacodynamics----Richard Hughes
5. Text Book of Homoeopathic Pharmacy----Mondal
6. Principles and Practice of Homoeopathic Pharmacy for students----M.K.Sahani.
7. 50 Millesimal Potency in Theory and Practice----HarimohanChoudhary
8. 'OushadhaSasyangal' (Malayalam—2Vols)-----S.Nesamony
9. The Genius of Homoeopathy----Stuart Close
10. Physiological MateriaMedica----W.H. Burt

## HOMOEOPATHIC MATERIA MEDICA

### Instructions:

Homoeopathic Materia medica is differently constructed as compared to other Materia medicas.

Homoepathy considers that the study of the action of drugs on individual parts or systems of the body or on animal or on 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 substance. The drug substance as a whole is lost sight of .

Essential and complete knowledge of the drug action as a whole can be ascertained only by qualitative drug proving on healthy persons and this alone can make it possible to elicit all the symptoms of a drug with reference 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 studied.

The Homoeopathic Materiamedica consists of a schematic arrangement of symptoms produced by each drug incorporating no theories for explanations about their interpretation or interrelationship.

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.

The most commonly indicated drugs for day to day ailments should be taken up first so that in the clinical classes or outdoor duties the students become familiar with their applications and they should be thoroughly dealt with explaining all comparisons and relationships.

Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline emphasising only their most salient features and symptoms.

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

While teaching therapeutics an attempt should be made to recall the Materiamedica 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 Materiamedica in any sickness and not limit oneself to memorise a few drugs for a particular disease and 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 the burden as far as formal examinations are concerned.

Application of Materia Medica should be demonstrated from case records in the outdoor and the in door.

Lectures on comparative Materia Medica and therapeutics as well as tutorials should be integrated with lectures on clinical medicine.

For the teaching of drugs, the department should keep herbarium sheets and other specimens for demonstrations to the students and audio visual materials should be used for teaching and training purposes.

There is a large number of homoeopathic medicines used today and much more medicines being experimented and proved at present and more will be added in future and some very commonly used homoeopathic medicines are included in this curriculum for detailed study

it is essential that at the end of this course each student should gain basic and sufficient knowledge of "How to study Homoeopathic Materia Medica" and to achieve this objective, basic and general topic of Materia Medica should be taught in detail during this curriculum . General topics should be taught in all the classes.

The medicines are to be taught under the following headings, namely

1. Common name, family, habitat, part used, preparation, constituents (of source material)
2. Proving data
3. Sphere of action
4. Symptomatology of the medicine emphasizing the characteristic symptoms (mental, physical generals and particulars including sensations, modalities and concomitants) and constitution.
5. Comparative study of medicines
6. Therapeutic applications (applied Materia Medica)

### **FIRST B.H.M.S**

#### **A. Theory:( Total 70 Hrs)**

General topics of Materia Medica (including introductory lectures)

##### a ) Basic materia medica

1. Basic concept of Materia Medica
2. Basic construction of various Materia Medicas
3. Definition of materia medica

b) Homoeopathic Materiamedica

1. Definition of Homoeopathic Materiamedica
2. Basic concept and construction of Homoeopathic Materiamedica
3. Classification of Homeopathic Materiamedica
4. Sources of Homoeopathic Materiamedica
5. Scope and limitations of Homoeopathic Materiamedica

**List of drugs for first BHMS**

1. Arsenicum album
2. Bryonia alba
3. Cinchona officinalis
4. Gelsemium
5. Lycopodium clavatum
6. Natrum muriaticum
7. Nux vomica
8. Pulsatilla
9. Rhus toxicodendron
10. Sulphur

**Note: there shall be no examination in the subject during First BHMS**

**ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY**

- I (a) Organon of Medicine with Homoeopathic Philosophy is a vital subject which builds up the conceptual base of the physician;
  - (b) It illustrates those principles which when applied in practice enable the physician to achieve results, which he can explain logically and rationally in medical practice with greater competence;
  - (c) Focus of the education and training should be to build up the conceptual base of Homoeopathic Philosophy for use in medical practice.
- II Homoeopathy should be taught as a complete system of medicine with logical rationality of its holistic, individualistic and dynamic approach to life, health, disease, remedy and cure

and in order to achieve this, integration in the study of logic, psychology and the fundamentals of Homoeopathy becomes necessary.

III (a) It is imperative to have clear grasp of inductive and deductive logic and its application and understanding of the fundamentals of Homoeopathy;

(b) Homoeopathic approach in therapeutics is a holistic approach and it demands a comprehension of patient as a person, disposition, state of his mind and body, along with the study of the disease process and its causes;

(c) Since Homoeopathy lays great emphasis on knowing the mind, preliminary and basic knowledge of the psychology becomes imperative for a homoeopathic physician and introduction to psychology will assist the student in building up his conceptual base in this direction.

IV The department of organon of medicine shall co-ordinate with other departments where students are sent for the pre-clinical and clinical training and this will not only facilitate integration with other related subjects but also enhance the confidence of the students when they will be attending speciality clinics.

### **SYLLABUS: FIRST B.H.M.S**

#### **Theory:(Total 70 Hrs))**

##### 1. Introductory lectures

1.1. Evaluation of medical practice of the ancients ( Prehistoric Medicine, Greek Medicine, Chinese medicine, Hindu medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts.

1.2. Short history of Hahnemann's life, his contributions ,and discovery of Homoeopathy, situation leading to discovery of Homoeopathy

1.3. Brief life history and contribution of early pioneers of homoeopathy like C.V. Boenninghausen ,J.T.Kent, C. Hering, RajendraLalDatta, Sircar

1.4. History and Development of Homoeopathy in India, U.S.A and European countries

1.5. Fundamental Principles of Homoeopathy

1.6. Basic concepts of:

1.6.1. Health: Hahnemann's concept and modern concept

1.6.2. Disease: Hahnemann's concept and modern concept

1.6.3. Cure

### 1.7. Different editions and construction of Hahnemann's Organon of Medicine

## 2. Logic

To understand organon of medicine and homoeopathic philosophy, it is essential to be acquainted with the basics of LOGIC to grasp inductive and deductive reasonings.

Priliminary lectures on inductive and deductive logic (with reference to philosophy book of Suart Close, Chapter 3 and 16)

## 3. Psychology

3.1. Basics of Psychology.

3.2. Study of behaviour and intelligence.

3.3. Basic concepts of sensation and perception.

3.4. Emotion, motivation, personality, anxiety, conflict, frustration, depression, fear, psychosomatic manifestation.

3.5. Dreams, memory, attention, learning, thinking

4. Aphorism 1 to 28 of Organon of medicine with respect to corresponding homoeopathic philosophy – Kent, H.A.Robert, Stuart Close

5. Homoeopathic Prophylaxis

### **List of Text Books for I BHMS**

1.Organon of<sup>th</sup>andMedicine<sup>th</sup>translated65 with an appendix

2.Samuel Hahnemann His Life and Works by Richard Haehl

3.General Psychology by S K Mangal

4. History of Medicine DrSamareendar Reddy

5. Pioneers of Homoeopathy byMahendra Singh

**Note: there shall be no examination in the subject during First BHMS**

## Second BHMS

### Syllabus:-

### Pathology

#### Instructions:

1 (a) Pathology and microbiology shall be taught in relation to the concept of miasms as evolved by Samuel Hahnemann and further developed by JT Kent, H.A.Roberts, J.H.Allen and other stalwarts, with due reference to Koch's postulate, correlation with immunity susceptibility and there by emphasizing Homoeopathic concept of evolution of disease and cure;

(b) Focus will be given on the following points, namely :-

(1) Pathology in relation with Homoeopathic MateriaMedica.

(2) Correlation of miasms and pathology.

(3) Charecteristic expression of each miasm.

(4) Classification of symptoms and disease according to pathology.

(5) Pathological findings of diseases; their interpretation, correlation and usage in the management of patients under Homoeopathic treatment.

(c) To summarise, all the topics in the general and systemic pathology and microbiology should be correlated, at each juncture, with homoeopathic principles so that the importance of pathology in Homoeopathic system could be understood by the students.

#### A.Theory:

(a) General pathology

1. Cell injury and cellular adaptation
2. Inflammation and repair (Healing)
3. Immunity
4. Degeneration
5. Thrombosis and embolism
6. Oedema
7. Disorders of metabolism
8. Hyperplasia and hypertrophy
9. Anaplasia
10. Metaplasia

11. Ischaemia
  12. Haemorrhage
  13. Shock
  14. Atrophy
  15. Regeneration
  16. Hyperemia
  17. Infection
  18. Pyrexia
  19. Necrosis
  20. Gangrene
  21. Infarction
  22. Amyloidosis
  23. Hyperlipidaemia and lipidosis
  24. Disorders of pigmentation
  25. Neoplasia (definition , variation in cell growth , nomenclature and taxonomy , characteristics of neoplastic cells , aetiology and pathogenesis , grading and staging , diagnostic approaches , Interrelationship of tumor and host, course and management).
  26. Calcification
  27. Effects of radiation
  28. Hospital infection
- (b) Systemic pathology

In each system, the important and common diseases should be taught, keeping in view their evolution, aetio-pathogenesis, mode of presentation , progress and prognosis, namely:-

1. Malnutrition and deficiency diseases
2. Diseases of cardiovascular system
3. Diseases of blood vessels and lymphatics
4. Diseases of kidney and lower urinary tract
5. Diseases of male reproductive system and prostate
6. Diseases of the female genitalia and breast
7. Diseases of Eye, ENT and neck
8. Diseases of the respiratory system
9. Diseases of the oral cavity and salivary glands
10. Diseases of the GI system
11. Diseases of liver, Gall bladder , and Biliary ducts

12. Diseases of the pancreas(Including Diabetes mellitus)
13. Diseases of Haemopoetic system, bone marrow and blood
14. Diseases of glands-thymus, pituitary, thyroid, parathyroid, adrenals, parotid.
15. Diseases of the skin and soft tissue
16. Diseases of the musculo-skeletal system.
17. Diseases of the nervous system
18. Leprosy

(c) Microbiology

(A) General topics:

1.Introduction

2. History and scope of medical microbiology
3. Normal bacterial flora
4. Pathogenicity of micro-organisms
5. Diagnostic microbiology

(B) Immunology:

1. Development of immune system
2. The innate immune system
3. Non-specific defence of the host
4. Acquired immunity
5. Cells of immune system;T cells and Cell mediated immunity; B cells and Humoral immunity
6. The compliment system
7. Antigen;Antibody; Antigen – Antibody reactions (Anaphylactic and Atpic); Drug Allergies
8. Hypersensitivity
9. Immuno-deficiency
10. Auto-immunity
11. Transplantation
12. Blood group antigens
13. Clinicl aspect of immune-pathology.

(C) Bacteriology:

1. Bacterial structure, growth and metabolism

2. Bacterial genetics and bacteriophage
3. Identification and cultivation of bacteria
4. Gram positive aerobic and facultative anaerobic cocci, eg. Streptococci, pneumococci.
5. Gram positive anaerobic cocci, eg. Peptostreptococci
6. Gram negative aerobic cocci, eg. Neisseria, Moraxella, Kingella.
7. Gram positive aerobic bacilli, e.g. Corynebacterium, Bacillus, anthrax, Clostridium, Mycobacterium tuberculosis, M. leprae, actinomycetes; nocardia, organism of enterobacteriaceae group.
8. Gram positive anaerobic bacilli, e.g. Genus Clostridium, Lactobacillus.
9. Gram negative anaerobic bacilli, eg. Bacteroides, Fragilis, Fusobacterium.
10. Others like- Cholerae vibrio, Spirochaetes, Leptospirae, Mycoplasma, Chlamydiae, Rickettsiae, Yersinia and Pasteurella.

(D) Fungi and parasites:

1. Fungi- (1) True pathogens (cutaneous, sub-cutaneous and systemic infective agents), (2) Opportunistic pathogens.
2. Protozoa – (1) Intestinal (Entamoeba histolytica, Giardia lamblia, Cryptosporidium parvum), (2) Urogenital (Trichomonas vaginalis) (3) Bld and tissue (Plasmodium species, Toxoplasma gondii, Trypanosoma species, Leishmania species).
3. Helminths – (1) Cestodes (tapeworms)- Echinococcus granulosus, Taenia solium, Taenia saginata, (2) Trematodes (Flukes): Paragonimus westermani, Schistosoma mansoni, Schistosoma haematobium (3) Nematodes- Ancylostomduodenale, Ascaris lumbricoides, Enterobius vermicularis, Strongyloides, Stercoralis, Trichuris trichiura, Brugia malayi, Dracunculus medinensis, Loa loa, Onchocerca volvulus, Wuchereria bancroftii).

(E) Virology:

1. Introduction
2. Nature and classification of viruses
3. Morphology and replication of viruses
4. DNA viruses:
  - (1) Parvo virus
  - (2) Herpes virus, varicella virus, CMV, EBV.
  - (3) Hepadna virus (hepatitis virus)
  - (4) Papova virus
  - (5) Adeno virus



(6) Pox virus – variola virus, vaccinia virus, molluscum contagiosum etc.

5. RNA viruses:

(a) Orthomyxo virus:

(1) Enterovirus

(2) Rhinovirus

(3) Hepatitis virus

(b) Paramyxovirus- rubeola virus, mumps virus, Influenza virus etc.

(c) Rhabdovirus

(d) Rubella virus (German measles)

(e) Coronavirus

(f) Retrovirus

(g) Yellow fever virus

(h) Dengue, chikungunya virus :

(i) Miscellaneous virus:

(1) Arenavirus

(2) Coronavirus

(3) Rotavirus

(4) Bacteriophages

(F) Clinical microbiology : (1) Clinically important microorganisms (2) Immunoprophylaxis , (3) Antibiotic sensitivity test (AST)

(G) Diagnostic procedures in microbiology : (1) Examination of blood and stool (2) Immunological Examinations (3) Culture methods (4) Animal inoculation.

(H) Infection and disease : (1) Pathogenicity , mechanism and control (2) Disinfection and sterilisation (3) Antimicrobial chemotherapy (4) Microbial pathogenicity

(d) Histopathology:

1. Teaching of histopathological features with the help of slides of common pathological conditions from each system.
2. Teaching of gross pathological specimens for each system.
3. Histopathological techniques, e.g. fixation embedding , sectioning and staining by common dyes and stains.
4. Frozen sections and its importance.

5. Electron microscopy ; phase contrast microscopy.

B. Practical or clinical:

(1) Clinical and chemical pathology : estimation of haemoglobin (by acidometer) count of red blood cells and white Bld cells , bleeding time , clotting time , blood grouping, staining of thin and thick films , differential counts, blood examination for parasites, erythrocyte sedimentation rate.

(2) Urine examination, physical, chemical, microscopical, quantity of albumin and sugar.

(3) Examination of faeces: physical, chemical (occult blood) and microscopical for ova and protozoa.

(4) Method of sterilisation , preparation of a media use of microscope. Gram and acid fast stains , motility preparation. Gram positive and negative cocci and bacilli. Special stains for corynebacterium gram and acid fast stains of pus and sputum.

(5) Preparation of common culture medias , e.g. nutrient agar, blood agar, Robertson's cooked meat media (RCM) and MacConkey's media.

(6) Widal test demonstration.

(7) Exposure to latest equipment , viz. auto-analyzer, cell counter, glucometer.

(8) Histopathology

(a) Demonstration of common slides from each system.

(b) Demonstration of gross pathological specimens.

(c) Practical or clinical demonstration of histopathological techniques i.e., fixation, embedding.

(d) Sectioning, staining by common dyes and stain. Frozen section and its importance.

(e) Electron microscopy , phase contrast microscopy

C. Examination

1. Theory:

1.1 Number of papers -02

1.2 Marks : Paper 1-100 ; paper 2 – 100

1.3 Contents:

1.3.1 Paper 1 : Section A – General Pathology - 50 Marks

Section B – Systemic Pathology - 50 Marks

1.3.2 Paper 2 : Section A-

Bacteriology - 25 Marks

Fungi and parasites - 25 Marks

Section B-

Virology	- 20 Marks
Clinical Microbiology and Diagnostic Procedures	- 10 Marks
Microbiological control and mechanism of pathogenicity	- 10 Marks
General topics Immuno-pathology	- 10 Marks

Practical including viva voice or oral:

2.1. Marks:100

2.2. Distribution of marks:

	Marks
2.2.1. Practicals	-15
2.2.2. Spotting	-20
2.2.3. Histopathological slides	-10
2.2.4. Journal or practical record	-05
2.2.5. Viva voice (oral)	-50

( Including 5 marks for interpretation of routine pathological reports )

Total	100
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### Forensic Medicine & Toxicology

Instructions:

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

(1). Forensic Medicine

A. Theory:

1. Introduction

- (a) Definition of forensic medicine.
- (b) History of Forensic medicine in India.
- (c) Medical ethics and Etiquette.
- (d) Duties of registered medical practitioner in medico-legal cases.

2. Legal procedure

- (a) Inquests , Courts in India , Legal procedure.
- (b) Medical evidences in courts, dying declaration, dying deposition, including medical certificates and medico-legal reports.

3. Personal identification

- (a) Determination of age and sex in living and dead; race , religion.
- (b) Dactylography, DNA finger printing , foot print.
- (c) Medico-legal importance of bones, scars and teeth, tattoo marks, handwriting , anthropometry.
- (d) Examination of biological stains and hair.

4. Death and its medico-legal importance

- (a) Death and its types , their medico-legal importance
- (b) Signs of death (1) immediate, (2) early, (3) late and their medico-legal importance
- (c) Asphyxial death (Mechanical asphyxia and drowning)
- (d) Deaths from starvation, cold and heat etc.

5. Injury and its medico-legal importance

Mechanical, thermal, firearm, transportation and traffic injuries; injuries from radiation, electrocution and lightning.

6. Forensic psychiatry

- (a) Definition; delusion, delirium, illusion, hallucinations; impulse and mania ; classification of Insanity.
- (b) Development of insanity , diagnosis , admission to mental asylum.

7. Post-mortem examination (autopsy)

- (a) Purpose , procedure , legal bindings; difference between pathological and medico-legal autopsies.
- (b) External examination internal examination of adult, foetus and skeletal remains.

8. Impotence and sterility

Impotence; Sterility; Sterilisation ; Artificial insemination; Test tube Baby; Surrogate mother.

9. Virginity , defloration; pregnancy and delivery

10. Abortin and infanticide

- (a) Abortion: different methods , complications , accidents following criminal abortion, MTP.
- (b) Infant death, legal definition, battered baby syndrome, cot death, legitimacy.

11. sexual offences

Rape, incest, sodomy, sadism, masochism, tribadism, bestiality, buccal coitus and other sexual perversions.

(2) Toxicology

1. General Toxicology

- (a) Forensic Toxicology and poisons
- (b) Diagnosis of poisoning in living and dead.
- (c) General principles of management of poisoning.
- (d) Medico-legal aspects of poisons.
- (e) Antidotes and types.

2. Clinical toxicology

(a)Types of poisons:

- (1) Corrosive poisons (Mineral acids, Caustic alkalis, Organic acids, Vegetable acids)
- (2) Irritant poisons ( Organic poisons – Vegetable and animal; Inorganic poisons - metallic and non-metallic; Mechanical poisons)
- (3) Asphyxiant poisons ( Carbon monoxide; Carbon dioxide; Hydrogen sulphide and some war gases)

(4) Neurotic poisons (Opium, nux vomica, Alcohol, fuels like kerosene and petroleum products, Cannabis indica, Dhatura, Anaesthetics , sedatives and Hypnotics, Agrochemical compounds, Belladonna, Hyosyamus, Curare, conium)

(5) Cardiac poisons (Digitalis purpurea, Oleande, Aconite, Nicotine)

(6) Miscellaneous poisons (Analgesics and Antipyretics, Antihistaminics, Tranquillisers, antidepressants, stimulants, Hallucinogens, Street drugs etc.)

(3) Legislations relating to medical profession

- (a) the Homoeopathy Central Council Act, 1973(59 of 1973);
- (b) the Consumer Protection Act, 1986 (68 of 1986);
- (c) the Workmen's compensation act, 1923(8 of 1923)
- (d) the Employees State Insurance Act, 1948(34 of 1948)
- (e) the Medical Termination of Pregnancy Act, 1971(34 of 1971);
- (f) the Mental Health Act, 1987(14 of 1987);
- (g) the Indian Evidence Act, 1872(1 of 1872)
- (h) the Prohibition of Child Marriage Act,2006(6 of 2007);
- (i) the Personal injuries Act,1963(37 of 1963)
- (j) the Drugs and Cosmetics act,1940 (23 of 1940) and the rules made therein;
- (k) the Drugs and Magic Remedies (Objectionable advertisements)Act, 1954(21 of 1954.
- (l) the Tranplantation of Human Organs Act,1994(42 of 1994);
- (m) the Pre-natal Diagnostic Techniques(Regulation and Prevention of Misuse)Act , 1994(57 of 1994);
- (n) the Homoeopathic Practitioners (Professional conduct, Etiquette and Code of Ethics) Regulations,1982;
- (o) the Drugs Control Act,1950(26 of 1950);
- (p) the Medicine and Toiletry Preparations(Excise Duties)Act, 1955(16 of 1955);
- (q) the Indian Penal Code(45 of 1860)and the Criminal Procedure Code (2 of 1974) (relevant provisions)
- (r) the Persons and Disabilities(Equal Oppurtunities,Protection of Rights and Full Participation) Act 1995(1 of 1996);
- (s) the Clinical Establishment (Registration and Regulation ) Act,2010(23 of 2010)

B. Practical:

1. Demonstration:

- (a) Weapons
- (b) Organic and inorganic poisons
- (c) Poisonous plants
- (d) Charts, diagrams, photographs, models, x-ray films of medico-legal importance
- (e) Record of incidence reported in news papers or magazines and their explanation of medico-legal importance.
- (f) Attending demonstration of ten medico-legal autopsies.

2. Certificate Writing:

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

C. Examination

1. Theory:

1.1. Number of papers-01

1.2 Marks :100

2. Practical including viva voice or oral:

2.1 Marks :100

2.2 Distribution of marks:

Marks

2.2.1. Medico-legal aspect of 4 specimens 40

2.2.2. Journal or Practical Records 10

2.2.3. Viva voice (oral) 50

Total 100

**Organon of Medicine**

Theory :

1 . Aphorisms 29-104 including foot notes of organon of Medicine (5<sup>th</sup> and 6<sup>th</sup> Editions translated by R.E. Dudgeon and w.Bericke).

2. Homoeopathic philosophy :

2.1. Chapters of philosophy books of J.T.Kent(Chapters 1 to 17 , 23 to 27 , 31 to 33),Stuart close( Chapters-8,9,11,12) and H.A.Roberts (Chapters 3,4,5,6,8, 9,11,17,18,19,20),related to aphorisms 29-104 of organon of medicine.

## 2.2 Symptomatology :

Details regarding symptomatology are to be comprehended by referring to the relevant aphorisms of organon of medicine and chapters of the books on homoeopathic philosophy.

Thorough comprehension of the evolution of disease , taking into account pre-disposing,fundamental , exciting and maintaining causes.

## 2.4.Case taking :

The purpose of homoeopathic case taking is not merely collection of the disease symptoms from the patient , comprehending the patient as a whole with correct appreciation of the factors responsible for the genesis and maintenance of illness. Hahnemann's concept and method of case taking as stated in his Organon of Medicine is to be stressed upon.

## 2.5 . Case processing : This includes

- (1) Analysis of symptoms,
- (2) Evaluation of symptoms
- (3) Miasmatic diagnosis
- (4) Totality of symptoms

## B. Practical or Clinical:

1. Clinical posting of students shall be started from Second B.H.M.S. onwards.



2. Each student shall maintain case records of atleast ten acute cases

### C. Examination

#### 1. Theory

1.1 No. of papers – 01

1.2 Marks : 100

1.3 Distribution of marks :

1.3.1. Logic – 15 marks

1.3.2 Psychology – 15 marks

1.3.3 Fundamentals of Homoeopathy and aphorisms 1 to 104-50 marks

1.3.4 Homoeopathic philosophy – 20marks

2. Practical including viva voice or oral:

2.1 Marks : 100

2.2 Distribution of marks : Marks

2.2.1 Case taking and case processing 40

2.2.2 Maintenance of practical

Record or journal 10

2.2.4 Viva voice (oral) 50

Total 100

### **Materia Medica**

#### A .THEORY:

- (a) In addition to syllabus of First BHMS.course, following shall be taught, namely :-
1. Science and philosophy of Homoeopathic material medica.
  2. Different ways of studying homoeopathicmateriamedica (eg.psycho – clinical , pathological physiological , sy7nthetic , comparative , analytical , remedy relation , group study , portrait study etc.)

3. Scope and limitation of homoeopathic material medica
  4. Concordance or remedy relationship
  5. Comparitive homoeopathic materiamedica , namely :-  
Comparative study of symptoms , drug pictures , drug relationships.
  6. Theory of biochemic system of medicine , it's history , concepts and principles according to Dr.Wilhelm Heinrich Schuessler .Study of 12 Biochemic medicines .(Tissue remedies)
- (b) Homoeopathic medicines to be taught in second B.H.M.S as per appendix - 1

#### APPENDIX 1

1. Aconitum napellus
2. Aethusacynapium
3. Allium cepa
4. Aloe socotrina
5. Antimoniumcrudum
6. Antimoniumtartaricum
7. Apismellifica
8. Argentum nitricum
9. Arnica montana
10. Arsenicum album
11. Arum triphyllum
12. Baptisiatinctori
13. Bellisperrenis
14. Bryonia alba
15. Calcareacarbonica
16. Calcareafuorica
17. Calcareaphosphorica
18. Calcareasulphurica
19. Calendula officinalis
20. Chamomilla
21. Cina
22. Cinchona officinalis
23. Colchicum autumnale
24. Colocynthis
25. Drosera
26. Dulcamara
27. Euphrasia
28. Ferrumphosphoricum
29. Gelsimium

30. Heparsulph
31. Hypericumperforatum
32. Ipecacuanha
33. Kali muriaticum
34. Kali phosphoricum
35. Kali sulphuricum
36. Ledumpalustre
37. Lycopodiumclavatum
38. Magnesium phosphoricum
39. Natrummuriaticum
40. Natrumphosphoricum
41. Natrumsulphuricum
42. Nux vomica
43. Pulsatilla
44. Rhustoxicodendron
45. Rutagraveolens
46. Silicea
47. Spongiatoasta
48. Sulphur
49. Symphytumofficinalis
50. Thujaoccidentalis

B. Practical or clinical:

This will cover-

- (1) Case taking of acute and chronic patients
- (2) Case processing including totality of symptoms , selection of medicines , potency , and repetition schedule.

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

C. examination:

The syllabus covered in first BHMS and second BHMS course are the following namely :-

1.Theory

1.1. Number of papers-01

1.2. Marks: 100

1.3. Distribution of marks:

1.3.1. Topic of first BHMS – 50 marks

1.3.2. Topic of second BHMS – 50 marks

2. Practtical including viva voice or oral:	
2.1.Marks :100	
2.2. Distribution of marks;	
2.2.1. Case taking and case	
Processing of one long case	30
2.2.2. Case taking of one short case	10
2.2.3. Maintenance of practical record	
Or journal	10
2.2.4.Viva voice(oral)	50
TOTAL	100

## **SURGERY**

Instructions:

1 (a) Homoeopathy as a science needs clear application on part of the physician to decide about the best course of action(s) required to restore the sick to health;

(b) Knowledge about surgical disorders is required to be grasped s that the Homoeopathic Physician is able to:

- (1) Diagnose common surgical conditions.
- (2) Institute Homoeopathic medical treatment wherever possible.
- (3) Organise Pre and Post-operative Homoeopathic medicinal care besides  
Surgical intervention with the consent of the surgeon.

2 For the above conceptual clarity and to achieve the aforesaid objectives,an effective co-ordination between the treating surgeons and homoeopathic physicians is required keeping in view the holistic care of the patients and it will also facilitate the physician in individualising the patient,necessary for homoeopathic treatment and management.

3 The study shall start in Second B.H.M.S. and complete in Third B.H.M.S. and examination shall be conducted in Third B.H.M.S.

4 (a) Following is a plan to achieve the above and it takes into account about the Second and Third year B.H.M.S. syllabus and respective stage of development.

(b) Throughout the whole period of study,the attention of students should be directed by the teachers of this subject to the importance of its preventive aspects.

5 There shall be periodical inter-departmental seminars, to improve the academic knowledge, skill and efficiency of the students and the study shall include training on,

- (a) Principles of surgery.
- (b) Fundamentals of examination of a patient with surgical problems.
- (c) Use of common instruments for examination of a patient.

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

### **Second B.H.M.S.**

#### **A. Theory:**

- (a) General surgery;
  1. Introduction to surgery and basic surgical principles.
  2. Fluid, electrolytes and acid-base balance.
  3. Haemorrhage, haemostasis and blood transfusion.
  4. Boil, abscess, carbuncle, cellulitis and erysipelas.
  5. Acute and chronic infections, tumours, cysts, ulcers, sinus and fistula.
  6. Injuries and various types; preliminary management of head injury.
  7. Wounds, tissue repair, scars and wound infections.
  8. Special infections (Tuberculosis, syphilis, A.I.D.S., Actinomycosis, Leprosy).
  9. Burn.
  10. Shock.
  11. Nutrition.
  12. Pre-operative and post-operative care.
  13. General management, surgical management and homoeopathic therapeutics of the above topics will be covered.

Examination: There will be no examination in the subject in Second B.H.M.S.

### **GYNAECOLGY AND OBSTETRICS**

#### **Instructions:**

1 (a) Homoeopathy adopt the same attitude towards this subject as it does towards Medicine and Surgery, but while dealing with Gynaecology and Obstetrical cases, a Homoeopathic physician must be trained in special clinical methods of investigation for diagnosing local conditions and individualising cases, the surgical intervention either as a life saving measure or for removing mechanical obstacles, if necessary, as well as their management by using homoeopathic medicines and other auxiliary methods of treatment;

(b) Pregnancy is the best time to eradicate genetic dyscrasias in women and this should be specially stressed. And students shall also be instructed in the care of new born;

(c) The fact that the mother and child form a single biological unit and this peculiar close physiological relationship persists for at least the first two years of the child's life should be particularly emphasised.

2 A course of instructions in the principles and practice of gynaecology and obstetrics and infant

Hygiene and care including the applied anatomy and physiology of pregnancy and labour , will be given.

3 Examinations and investigations in Gynaecological and Obstetrical cases shall be stressed and scope of Homoeopathy in this subject shall be taught in details.

4 The study shall start in Second B.H.M.S. and shall be completed in Third B.H.M.S and and examinations will be held in Third B.H.M.S. and following topics shall be taught, namely:-

Syllabus for Gynaecology and Obstetrics

## **Second BHMS**

### **A. Theory**

#### 1. Gynaecology

- a. A review of the applied Anatomy of female reproductory system, development and malformations
- b. A review of the applied physiology of female reproductive systems - puberty, menstruation, perimenopause, menopause, premature menopause and postmenopausal bleeding .
- c. Gynaecological diagnosis
- d. Malformations of the female genital tract
- e. Sexual development and developmental disorders
- f. Sexually transmitted diseases
- g. Inflammations of the uterus and cervix
- h. Pelvic inflammatory disease
- i. Uterine displacements
- j. Tuberculosis of the genital tract
- k. General management and therapeutics of the above listed topics in gynaecology.

#### 2. Obstetrics

- a. Anatomy and physiology – pelvis, female organs of generation, physiology of ovulation and menstruation, fertilisation of ovum and development of embryo.
- b. Physiology of pregnancy - maternal changes due to pregnancy, diagnosis of pregnancy, the fetus in normal pregnancy, prenatal care, antepartum fetal surveillance
- c. Causation and stages of labour

- d. The mechanism of labour
- e. Conduct of normal labour
- f. Intrapartum surveillance
- g. Normal puerperium
- h. Early pregnancy complications
- i. Management and therapeutics of the above listed conditions

### Third BHMS

#### Surgery

##### A. Theory:

##### (b) Systemic surgery:

1. Diseases of blood vessels, lymphatics and peripheral nerves.
2. Diseases of glands.
3. Diseases of extremities.
4. Diseases of thorax and abdomen.
5. Diseases of alimentary tract.
6. Diseases of liver, spleen, gall bladder and bile duct.
7. Diseases of abdominal wall, umbilicus and hernias.
8. Diseases of heart and pericardium.
9. Diseases of urogenital system.
10. Diseases of the bones, cranium, vertebral column fractures and dislocations.
11. Diseases of joints.
12. Diseases of the muscles, tendons and fascia.

##### B. Ear.

1. Applied anatomy and applied physiology of ear
2. Examination of ear
3. Diseases of external , middle and inner ear

##### C. Nose

1. Applied anatomy and physiology of nose and paranasal sinuses.
2. Examination of nose and paranasal sinuses
3. Diseases of nose and paranasal sinuses

##### D. Throat

1. Applied anatomy and applied Physiology of pharynx, larynx, tracheobronchial tree, oesophagus
2. Examination of pharynx, larynx, tracheobronchial tree, Oesophagus

3. Diseases of throat ( external and internal )
4. Diseases of oesophagus.

#### E. Ophthalmology

1. Applied anatomy, physiology of eye
2. Examination of eye.
3. Diseases of eyelids, eyelashes and lacrimal drainage system.
4. Diseases of Eyes including injury related problems.

#### F. Dentistry

1. Applied anatomy, physiology of teeth and gums;
2. Milestones related to teething.
3. Examination of oral cavity.
4. Diseases of gums
5. Diseases of teeth
6. Problems of dentition

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

**Apart from the medicines comes under Materia Medica of Second and Third BHMS, indications of the following drugs of final BHMS in surgical conditions are also included.**

1. Carbo. Animalis
2. Condurango
3. Fluoric Acid
4. Hydrastics
5. Anthracinum
6. Radium Bromatum
7. Urtica urens
8. Sabadilla
9. Cocculus
10. Sabal serrulata
11. Sanguinaria Canadensis
12. Ratanhia
13. Collinsonia
14. Sticta pulmonaria
15. Asterias rubens
16. Iodum
17. Thyroidinum
18. Physostigma
19. Merc.sol



20. Merc.cor
21. Causticum
22. Aesculus hippocastanum
23. Carcinosis
24. Cardus marianus

Practical or clinical:

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

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

Examination:

It will be conducted in third B.H.M.S. ( not in second B.H.M.S. )

1. Theory:

1.1 Number of papers – 02

1.2 Marks : Paper 1-100; Paper 2 – 100

1.3 Contents:

1.3.1. Paper 1 :

Section 1 – General Surgery-

50 Marks

Section 2 - Homoeopathic Therapeutics relating to General Surgery

50 Marks

Paper 2

Section – 1 – Systemic surgery

25 Marks

(1) ENT

10 Marks

(2) Ophthalmology

10 Marks

(3) Dentistry

05 Marks

Section – 2 :- Systemic surgery

Homoeopathic Therapeutics

25 Marks

(1) ENT Homoeopathic therapeutics

10 Marks

(2) Ophthalmology Homoeopathic therapeutics	10 Marks
(3) Dentistry Homoeopathic therapeutics	05 Marks

2. Practical including viva voice or oral :

2.1. Marks : 200

2.2. Distribution of Marks :

	Marks
2.2.1. One long case	40
2.2.2. Identification of instruments, X-rays	30
2.2.3. Practical records, case records or journal	30
2.2.4. Viva voice (oral)	100
<b>Total</b>	<b>200</b>

**Obstetric & Gynaecology**

1. GYNAECOLOGY

- a. Injuries of the female genital tract
- b. Injuries of the intestinal tract
- c. Diseases of the urinary system
- d. Genital fistula and urinary incontinence
- e. Infertility and sterility
- f. Birth control and medical termination of pregnancy
- g. Ectopic gestation
- h. Gestational trophoblastic disease
- i. Disorders of menstruation- amenorrhoea, menorrhagia, metrorrhagia, polymenorrhoea
- j. Genital prolapsed
- k. Diseases of the vulva and vagina
- l. Benign diseases of the uterus
- m. Endometriosis and adenomyosis
- n. Disorders of the broad ligament, fallopian tubes and parametrium
- o. Disorders of the ovary, ovarian tumours
- p. Diseases of the breast
- q. Acute and chronic pelvic pain
- r. Dysmenorrhoea , premenstrual syndrome
- s. Vulval and vaginal cancer, Cervical intraepithelial neoplasia, carcinoma cervix, Cancers of uterus, endometrium and fallopian tubes, Ovarian cancer
- t. Endoscopy and imaging modalities in gynaecology
- u. Obesity
- v. Radiation therapy and chemotherapy for gynaecologic cancer
- w. Pelvic adhesions and their prevention

- x. Preoperative and postoperative care and surgical procedures
- y. Hormonal therapy in gynaecology
- z. Management and therapeutics of the above listed conditions in gynaecology.

## 2. OBSTETRICS

- A. Anaemia in pregnancy
- B. Hypertensive disorders of pregnancy
- C. Antepartum haemorrhage – placenta praevia, abruptio placenta
- D. Preterm birth, intra uterine growth restriction, prolonged pregnancy, multiple pregnancy
- E. Rhesus isoimmunisation
- F. Diseases of the cardiovascular system
- G. Diseases of the liver, tuberculosis, maternal infections, diabetes, disease of the urinary system - during pregnancy
- H. Tumours of the uterus and adnexas
- I. Surgical emergencies during pregnancy
- J. Abnormal fetal presentation, transverse lie, breech presentation, compound presentation
- K. Dystocia due to anomalies of the expulsive forces
- L. Abnormalities of the reproductive tract
- M. Complications of the third stage of labour
- N. Injuries to the parturient canal, puerperal infections
- O. Resuscitation and examination of the new born
- P. Feeding of the newborn and immunisation
- Q. Respiratory distress and neonatal sepsis, neonatal jaundice, neonatal problems and their management
- R. Maternal mortality, perinatal mortality, coagulation disorders in obstetrics, prenatal diagnosis.
- S. Contraception, medical termination of pregnancy
- T. Imaging techniques
- U. Forceps, version and destructive operations, caesarean section, induction of labour
- V. Homoeopathic management and therapeutics of the above listed clinical conditions in obstetrics.

Note : Under Homoeopathic therapeutics, apart from the medicines given under Materia Medica syllabus of II and III BHMS, the indications of the following drugs in Obstetrics and Gynaecology, are also included

1. HYDRASTIS CANADENSIS
2. MAGNESIA CARB
3. MAGNESIA MUR
4. LAC CANINUM

5. MEDORRHINUM
6. PSORINUM
7. MEZERIUM
8. URTICA URENS
9. BARYTA MUR
10. CRATAEGUS
11. RAUWOLFIA
12. CAULOPHYLLUM
13. COCCULUS
14. CROCCUS SATIVUS
15. HELONIAS
16. LILIUM TIG
17. SABINA
18. TRILLIUM PENDULUM
19. VIBURNUM OPULUS
20. SABAL SERRULATA
21. SARSAPARILLA
22. MILLEFOLIUM
23. SPIGELIA
24. VERATUM VIRIDE
25. EUPATORIUM
26. ABROMA AGUSTA
27. CARICA PAPAYA
28. FICUS RELIGIOSA
29. JONOCIA ASOKA
30. SYZYGIIUM
31. RATANHIA
32. COLLINSONIA
33. ASTERIAS RUBENS
34. IODUM
35. THYROIDINUM
36. ZINCUM MET
37. ADONIS VERNALIS
38. MERC SOL
39. CAUSTICUM
40. AESCULUS HPPOCASTANUM
41. ADRENALIN
42. CARCINOSIN
43. ERIGERON
44. PASSIFLORA
45. USTILLAGO
46. X RAY

47. VALERIANA

48. PYROGEN

**B. CLINICAL CLASSES TOPICS FOR II AND III BHMS**

- a. Gynaecological case taking
- b. Obstetrical case taking
- c. Gynaecological examination of the patient
- d. Obstetrical examination of the patient- antenatal, intra natal and postnatal care, Bed side training
- e. Adequate grasp over homoeopathic principles and management
- f. Identification of instruments and models
- g. Ten cases each in obstetrics and gynaecology.

**C. Examination :**

**1. Theory :**

1.1 Number of papers – 02

1.2 Marks : Paper 1 – 100 ; Paper 2 – 100

1.3 Contents :

1.3.1 Paper – 1 : Gynaecology and Homoeopathic Therapeutics

1.3.2 Paper – 2 : Obstetrics , infant care and homoeopathic therapeutics

**Organon of Medicine**

**THIRD BHMS**

**A. Theory:**

In addition to revision of Aphorisms studied in First BHMS and Second BHMS, the following shall be covered, namely:-

1. Hahnemann's Prefaces and Introduction to Organon of Medicine
2. Aphorisms 105 to 294 of Hahnemann's Organon of Medicine, including footnotes (5<sup>th</sup> and 6<sup>th</sup> Editions translated by R.E.Dudgeon and W.Boericke)
3. Chapters of Philosophy books of J.T.Kent (Chapters – 28, 29, 30, to 37), Stuart Close (Chapters – 7,10,13,14,15) & H.A.Roberts (Chapters – 7,10,12 to 19, 21, 34) related to 105 – 294 Aphorisms of Organon of Medicine.

**B. Practical or clinical:**

Each student appearing for Third BHMS examination shall maintain records of 20 cases (10 acute and 10 chronic cases)

**C. Examination:**

**1. Theory:**

1.1.Number of papers – 01	
1.2.Marks: 100	
1.3.Distribution of marks:	
1.3.1. Aphorisms 1 to 294:	60 marks
1.3.2. Homoeopathic philosophy:	40 marks
2. Practical including viva voce or oral:	
2.1. Marks: 100	
2.2. Distribution of marks,	<u>Marks</u>
2.2.1. Case taking and case processing	40
2.2.3. Maintenance of practical record or journal	10
2.2.4. Viva voce (Oral)	50
	-----
Total	<u>100</u>

### **Materia Medica**

#### THIRD B.H.M.S

In addition to the syllabus of first and second BHMS including the use of medicines for second BHMS(appendix 1), the following additional topics and medicines are included in the syllabus of homoeopathic materiamedica for the third BHMS examination.

#### A. General topics of homoeopathic materiamedica-

In addition to the syllabus of first and second BHMS including the medicines for second BHMS (appendix 1) the following additional topics and medicines are included in the syllabus of homoeopathic material medica for the third BHMS examination.

- (a) Concept of nosodes – Definition of nosodes,type of nosodes , general indications of nosodes.
- (b) Concepts of constitution , temperaments , diathesis – Definitions , various concepts of constitution with their peculiar characteristics , importance f constitution temperaments and diathesis and their utility in treatment of patients.

#### B. Concept of mother tincture.

#### C. Homoeopathic medicines to be taught in third BHMS as in appendix 2

#### APPENDIX – 2

1. Acetic acid
2. Acteaspicata
3. Agaricusmuscarius

4. Agnuscastus
5. Alumina
6. Ambragisea
7. Ammonium carbonicum
8. Ammonium muriaticum
9. Anacardium orientale
10. Apocynum cannabinum
11. Arsenicum iodatum
12. Asafoetida
13. Aurum metallicum
14. Baryta carbonica
15. Belladonna
16. Benzoic acid
17. Berberis vulgaris
18. Bismuth
19. Borax
20. Bovistalycoperdon
21. Bromium
22. Buforana
23. Cactus grandiflorus
24. Caladium seguinum
25. Calcareoarsenica
26. Camphora
27. Cannabis indica
28. Cannabis sativa
29. Cantharis vesicatoria
30. Carbo vegetabilis
31. Chelidonium majus
32. Conium maculatum
33. Crotalus horridus
34. Croton tiglium
35. Cyclamen europaeum
36. Digitalis purpurea
37. Dioscorea villosa
38. Equisetum hyemale
39. Ferrum metallicum
40. Graphites
41. Helleborus niger
42. Hyoscyamus niger
43. Ignatia amara
44. Kali bichromicum

45. kali bromatum
46. kali carbonicum
47. kreosotum
48. lachesismuta
49. Moschus
50. Murex purpurea
51. Muriatic acid
52. Najatripodians
53. Natrumcarbonicum
54. Nitric acid
55. Nuxmoschata
56. Opium
57. Oxalic acid
58. Petroleum
59. Phosphoric acid
60. Phosphorus
61. Phytolaccadecandra
62. Picric acid
63. Plantinummetallicum
64. Podophyllum
65. Secalecornutum
66. Selenium
67. Sepia
68. Staphysagria
69. Stramonium
70. Sulphuric acid
71. Syphilinum
72. Tabacum
73. Taraxacumofficinale
74. Tarentulacubensis
75. Terebinthina
76. Theridion
77. Thlaspi bursa pastoris
78. Veratrum album

#### **GROUP STUDIES**

Acid group

Carbon group

Kali group

Ophidia group



Mercurius group

Spider group

D. Practical or Clinical;

1] This will cover,-

A] case taking of acute and chronic patients

B] case processing including selection of medicine , potency and repetition

2] Each student shall maintain a journal having record of ten case takings

E. Examination

1. Theory;

1. 1 Number of papers-01

1.2Marks;100

1.3 Distribution of marks

1.3.1 Topics of second BHMS-50marks

1.3.2 Topics of third BHMS-50 marks

2. Practical including viva voce or oral;

2.1. Marks : 100

2.2. Distribution of marks Marks

2.2.1. Case taking and case

Processing of one long case 30

2.2.2 Case taking of one short case 10

2.2.3 Maintenance of practical record

Or journal 10

2.2.4 Viva voce or oral 50

Total 100

### Practice of Medicine

#### Instructions

I (a) Homoeopathy has a distinct approach to the concept of Disease.

(b) It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts & emphasizes the study of the Man his State of Health, state of illness.

II The study of the above concept of individualization is essential with the following background so that the striking features which are characteristic to the individual become clear, In contrast to the common picture of the respective disease conditions namely

1. Correlation of the disease conditions with basics of Anatomy Physiology-Biochemistry & Pathology.
2. Knowledge of causation, manifestations, diagnosis (including differential diagnosis) prognosis & management of diseases.
3. Application of knowledge of organon of medicine & Homoeopathic Philosophy in dealing with the disease conditions.
4. Comprehension of applied part.
5. Sound clinical training at bed side to be able to apply the knowledge & clinical skill accurately.
6. Adequate Knowledge to ensure that rational investigations are utilized.

III (a) The emphasis shall be on study of man in respect of health, disposition, diathesis, disease taking all predisposing & precipitating factors, i.e fundamental cause, maintaining cause & exciting cause.

(b) Hahnemann's theory of chronic miasms provide as an evolutionary understanding of the chronic diseases; Psora, sycosis, syphilis and acute manifestations of chronic diseases and evolution of the natural disease shall be comprehended in the light of theory of chronic miasms.

(c) He shall be trained as a sound clinician with adequate ability of differentiation, sharp observation and conceptual clarity about diseases by taking help of all latest diagnostic techniques, viz X-ray, ultrasound, electrocardiogram, and commonly performed laboratory investigations.

(d) Rational assessment of prognosis and general management of different disease conditions are also to be focused.

V Study of subject - the study of the subject will be done two & half years. i.e one & one & half a year respectively during III (Third) BHMS and IV (Fourth) BHMS, but examination shall be conducted at the end IV BHMS.

### **III BHMS – THEORY**

1. Applied Anatomy & Applied Physiology of the respective system as stated below.
2. Respiratory diseases.

- 3 Diseases of Digestive system & Peritoneum.
4. Diseases concerning liver, Gall bladder & Pancreas.
5. Genetic Factors (correlating diseases with the concept of Miasms).
- 6 Immunological Factors in Diseases with concept of susceptibility (including HIV & hepatitis B).
7. Disorders due to chemical & physical agents & climatic & environmental factors.
8. Knowledge of clinical examination of respective systems.
9. Disorders of water & electrolyte balance.

## **Community Medicine**

### **INSTRUCTIONS**

I(a) Physicians function is not limited merely prescribing homoeopathic medicines for curative purpose, but he has wider role to play in the community;

(b) He has to be well conversant with the national health problems of rural as well as urban areas, so that he can be assigned responsibilities to play an effective role not only in the field of curative but also preventive and social medicines including family planning

II this subject is of utmost importance and throughout the period of study attention of the student should be directed towards the importance of preventive medicine and the measures for the promotion of positive health

III(a) During teaching, focus should be laid on community medicine concept, man and society, aim and scope of preventive and social medicine, social causes of disease and social problems of the sick, relation of economic factors and environment in health and disease;

(b) Instruction in this cause shall be given by lectures, practical's, seminars, group discussions, demonstrations and field studies.

### **Third BHMS**

#### **A. Theory:**

1. Man and medicine
2. Concept of health and disease in conventional medicine and homoeopathy
3. Nutrition and health
  - (a) Food and nutrition
  - (b) Food in relation to health and disease
  - (c) Balanced diet
  - (d) Nutritional deficiencies and nutritional survey
  - (e) Food processing

- (f) Pasteurisation of milk
  - (g) Adulteration of food
  - (h) Food poisoning
4. Environment and health
- (a) Air, light and sunshine, radiation.
  - (b) Effect of climate
  - (c) Comfort zone
  - (d) Personal hygiene
  - (e) Physical exercise
  - (f) Sanitation of fair and festivals
  - (g) Disinfection and sterilisation
  - (h) Atmospheric pollution and purification of air
  - (i) Air borne diseases
5. Water
- (a) Distribution of water; uses; impurities and purification
  - (b) Standards of drinking water
  - (c) Water borne diseases
  - (d) Excreta disposal
  - (e) Disposal of deceased
  - (f) Disposal of refuse
  - (g) Medical entomology- insecticide, disinfection, insect in relation to disease, insect control
6. Occupational health
7. Preventive medicine in paediatrics and geriatrics

## **Repertory**

### **OBJECTIVES**

1. Make the students competent enough to take cases in different clinical conditions and situations
2. Successful application of knowledge of repertory in day today clinical practice including management of acute diseases
3. Creating awareness about information and communication technology (ICT) in homoeopathy through medical apps and softwares

### **INSTRUCTIONS:**

I (a) Repertorisation is not the end but the means to arrive at the similimum with the help of material medica based on sound knowledge of homoeopathic philosophy;

(b) Homoeopathic materia medica is an encyclopedia of symptoms. No mind can memorize all the symptoms of all the drugs with their gradations;

(c) The repertory is an index and catalogue of the symptoms of the materia medica nearly arranged in a practical or clinical form with the relative gradation of drugs, which facilitates quick selection of indicated remedy and it may be difficult to practise homoeopathy without the aid of repertories.

II (a) each repertory has been compiled on distinct philosophical base, which determines the structure;

(b) In order to explore and derive full advantage of each repertory, it is important to grasp thoroughly its conceptual base and construction and this will help students to learn scope, limitations and adaptability of each repertory.

### Third BHMS

#### A. Theory:

1. Case taking and related topics:
  - (a) Case taking
  - (b) Difficulties of case taking, particularly in a chronic case.
  - (c) Types of symptoms, their understanding and importance
  - (d) Importance of pathology in disease diagnosis and individualisation in relation to study of repertory. Correlation of other clinical and nonclinical subjects in case taking and repertorisation. Repertory- its relation with organon of medicine and materia medica
  - (e) Case taking in different clinical conditions and situations
  - (f) Reportorial approach in case taking
  - (g) Standardised case record. Different methods of record keeping
  - (h) Application of knowledge of repertory in acute diseases
2. Case processing
  - (a) Analysis and evaluation of symptoms
  - (b) Miasmatic assessment
  - (c) Totality of symptoms or conceptual image of the patient
  - (d) Reportorial totality
  - (e) Selection of rubrics
  - (f) Reportorial technique and results
  - (g) Reportorial analysis
3. Repertory: definition; Need; Scope and limitations
4. Evolution and Classification of repertories
5. Methods and techniques of repertorisation. Steps of repertorisation
6. Study of Kent's repertory
  - (a) History
  - (b) Philosophical background
  - (c) Structure
  - (d) Concept of repertorisation
  - (e) Adaptability
  - (f) Scope
  - (g) Limitations
7. Gradation of remedies by different authors

8. Terms and language of repertories (rubrics) cross references in other repertories and materiamedica

B. Practical or clinical:

1. Record of five cases each of surgery, gynaecology and obstetrics worked out by using Kent's repertory
2. Rubrics hunting from Kent's and Boenninghausen repertories

Note: there will be no examination in the subject in third BHMS.

## Fourth BHMS

### Practice of Medicine

1. Nutritional & metabolic diseases.
  2. Diseases of Hemopoietic system.
  3. Endocrinal Diseases.
  4. Infectious diseases.
  5. Diseases of Cardiovascular system.
  6. Diseases of uro-genital tract.
  7. Diseases of CNS & peripheral nervous system.
  8. Psychiatric disorders.
  9. Diseases of locomotor system. (Connective Tissue, bones & joints disorders.
  10. Skin Diseases & sexually transmitted diseases.
  11. Tropical diseases.
  12. Paediatric disorders.
  13. Geriatric disorders.
  14. Applied Anatomy & Applied Physiology of different organs & systems relating to specific diseases.
  15. Knowledge of clinical examination of respective systems
- (a). General management & Homoeopathic therapeutics for all the topics to be covered in III BHMS & IV BHMS shall be taught simultaneously and the emphasis shall be on study of man in

respect of health, disposition, diathesis, disease taking all predisposing & precipitating factors, i.e fundamental cause, maintaining cause& exciting cause.

(b). Study of therapeutics does not mean simply list of specifics for the clinical conditions but teaching of applied materiamedica which shall be stressed upon.

### **PRACTICAL / CLINICAL**

(a). Each candidate shall submit 20 complete complete case records during final BHMS course.

The examination procedure will include one long case and one short case to be prepared. During clinical training each student has to be given adequate exposure to-

1. Comprehensive case taking following Hahnemann's instructions.
2. Physical examinations(general, systemic and regional).
3. Laboratory investigations required for diagnosis of disease conditions.
4. Differential diagnosis and provisional diagnosis and interpretation of investigation reports.
5. Selection of similimum and general management.

### **EXAMINATION**

#### **1. THEORY**

1.1 Number of Papers: 2

1.2. Marks: Paper I – 100; Paper II – 100

1.3. Contents:

1.3.1 Paper I : Topics of III B.H.M.S with Homoeopathic Therapeutics.

1.3.2 Paper II : Topics of IV B.H.M.S with Homoeopathic Therapeutics

#### **2. Practical including viva voce or oral**

2.1 marks : 200

Distribution of marks	Marks
2.2.1 One long case	20
2.2.2 One short case	20
2.2.3 Practical records, case records (of University Exm.), Journal	30
2.2.4 Identification of specimens (X-ray, E.C.G, Clinical conditions etc.)	30
2.2.5 Viva voce (oral)	100
Total	200

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

## Community Medicine

### A. Theory:

1. Epidemiology
  - (a) Principles and methods of epidemiology
  - (b) Epidemiology of communicable disease:
    - General principles of prevention and control of communicable disease;
  - (c) Communicable diseases: their description, mode of spread and method of prevention.
  - (d) Protozoan and helminthic infections- life cycle of protozoa and helminthes, their prevention.
  - (e) Epidemiology of non-communicable diseases; general principles of prevention and control of non-communicable diseases.
  - (f) Screening of disease
2. Bio-statistics
  - (a) Need of biostatics in medicine
  - (b) Elementary statistical methods
  - (c) Sample size calculation
  - (d) Sampling methods
  - (e) Test of significance
  - (f) Presentation of data
  - (g) Vital statistics
3. Demography and family planning; population control; contraceptive practices; national family planning programme
4. Health education and health communication
5. Health care of community
6. International health
7. Mental health
8. Maternal and child health
9. School health services
10. National health programmes of India including Rashtriya Bal Chikitsa Karyakram
11. Hospital waste management
12. Disaster management
13. Study of aphorisms of organon of medicine and other homoeopathic literatures, relevant above topics including prophylaxis.

### B. Practicals:

1. Food additives; food fortification, food adulteration; food toxicants
2. Balanced diet
3. Survey of nutritional status of school children, pollution and water purification
4. Medical entomology
5. Family planning and contraception
6. Demography



7. Disinfection
8. Insecticide

Field visits

1. Milk diary
2. Primary health centre
3. Infectious diseases hospital
4. Industrial unit
5. Sewage treatment plant
6. Water purification plant

Note:

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

C. Examinations:

There will be examination of the subject only in fourth BHMS(not in IIIBHMS). Besides theory examination there shall be a practical or clinical examination including viva-voce as per following distribution of marks-

1. Theory:

- 1.1. Number of papers -01
- 1.2. Marks: 100

2. Practical including viva-voce oral:

2.1 marks 100

2.2 distribution of marks;

	<u>marks</u>
2.2.1 Spotting	40
2.2.3 Journal or practical records (Including field visit records)	10
2.2.4 Viva voce (oral)	50
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Total	100
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## REPERTORY

### Fourth BHMS.

A. Theory:

1. Conversion of symptoms into rubrics and repertorisation using different repertories
2. Detailed study of Therapeutic Pocket Book and Boger's Boenninghausens repertory.

3. Comparative study of different repertories like(Kent's repertory, Boenninghausen therapeutic pocket book and Boger-Boenninghausen characteristic repertories, a synoptic key to materiamedica)
4. Card repertories and other mechanical aide repertories –History, types and use
5. Concordance repertories (Gentry and Knerr)
6. Clinical repertories (Oscar E Boerick, JH Clarke's repertory, Bell's Diarrhoea.)
7. Regional repertories – Minton's Uterus, Berridge's eye
8. An introduction to modern repertories-(Synthetic, Synthesis and Complete repertory and Murphy's repertory)
9. Role of computers in repertorisation and different software- RADAR, Hompath, ISIS, Complete Dynamics. Information and Communication Technology (ICT) in homoeopathy through medical apps and softwares.
10. Practice building & concept of digital clinic – how to setup and promote your clinic/hospital

B. Practical or clinical

Students shall maintain the following record, namely:-

1. Five acute and five chronic cases (each of medicine, surgery, and obstetrics and gynaecology) using Kent's repertory
2. Five cases (pertaining to medicine) using Boenninghausen therapeutic pocket book.
3. Five cases (pertaining to medicine) usingBoger-Boenninghausen therapeutic pocketbook.
4. Five cases to be cross checked(integrated medium) on repertories using homoeopathic softwares.

1. THEORY:

1.1 Number of papers-01

1.2 Marks 100

2. Practical including viva voce or oral:

2.1 marks: 100

2.2 distribution of marks:

	<u>marks</u>
2.2.1 one long case	30
2.2.2 one short case	10
2.2.3 practical record or journal	10
2.2.4 viva voce (oral)	50
	-----
Total	100

C. Examination:

There will be examination of repertory only in fourth BHMS(not in third BHMS)

## Organon Medicine

### A. Theory:-

In addition to the syllabus of First BHMS, Second BHMS and Third BHMS, the following shall be covered, namely:-

1. Evolution of medical practice of the ancients (Prehistoric medicine, Greek medicine, Chinese medicine, Hindu medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts.
2. Revision of Hahnemann's Organon of Medicine (Aphorisms 1 – 294) including footnotes (5<sup>th</sup> and 6<sup>th</sup> Editions translated by R.E. Dudgeon and W. Boericke)
3. Homoeopathic philosophy:  
Philosophy books of Stuart Close (Chapters – 1, 2, 4, 5, 6, 8, 17), J.T.Kent (Chapters – 18 to 22) and H.A.Roberts (Chapters 1 to 5, 20, 22 to 33, 35), Richard Hughes (Chapters 1 to 10) and C.Dunham (Chapters – 1 to 7)
4. Chronic diseases:
  - 4.1. Hahnemann's Theory of Chronic Diseases
  - 4.2. J.H. Allen's The Chronic Miasm – Psora and Pseudo-psora; sycosis
  - (a) Emphasis should be given on the way in which each miasmatic state evolves and the characteristic expressions are manifested at various levels and attempt should be made to impart a clear understanding of Hahnemann's theory of chronic miasms.
  - (b) The characteristics of the miasms need to be explained in the light of knowledge acquired from different branches of medicine
  - (c) Teacher should explain clearly therapeutic implications of theory of chronic miasms in practice and this will entail a comprehension of evolution of natural disease from miasmatic angle, and it shall be correlated with applied material medica.

### B. Practical or clinical:

- (a) The students shall maintain practical records of patients treated in the out patient department and inpatient department of the attached hospital.
- (b) The following shall be stressed upon in the case records, namely:-
  - (1) receiving the case properly (case taking) without distortion of the patient's expressions;
  - (2) nosological diagnosis;
  - (3) analysis and evaluation of symptoms, miasmatic diagnosis, and portraying the totality of symptoms;
  - (4) individualization of the case for determination of the similimum, prognosis, general management including diet and necessary restrictions on mode of life of the individual patients;
  - (5) state of susceptibility to formulate comprehensive plan of treatment;
  - (6) order of evaluation of the characteristic features of the case would become stepping stone for the reportorial totality;
  - (7) remedy selection and posology;
  - (8) second prescription.

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

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

C. Examination:

1. Theory:

1.1. Number of papers	02
1.2. Marks: Paper I: 100, Paper II:100	
1.3. Distribution of marks:	
Paper I: Aphorisms 1 – 145:-	30 marks
Aphorisms 146 – 294:-	70 marks
Paper II: Chronic diseases:-	50 marks
Homoeopathic philosophy:-	50 marks

2, Practical including viva voce or oral:

2.1. Marks: 100	
2.2. Distribution of marks:	<u>Marks</u>
2.2.1. Case taking and case processing of a long case	30
2.2.2. Case taking and case processing of a short case	10
2.2.3. Maintenance of practical record or journal	10
2.2.4. Viva voce (oral)	50
	-----
Total	<u>100</u>

**Materia Medica**

In addition to the syllabus of first , Second , and Third BHMS including the medicine taught as per the Appendices 1 and 2 , the following additional topics and medicines are included in the syllabus for the Fourth BHMS Examination.

- A. General topics of Homoeopathic material medica – Sarcodes – definition and general indications.

- B. Medicines indicated in Appendix -3 shall be taught in relation to the medicines of Appendix -1 and 2 for comparison wherever required.

APPENDIX 3

1. Abies Canadensis
2. Abiesnigra
3. Carboanimalis
4. Carbolic acid
5. Condurango
6. Fluoricumacidum
7. Hydrastis Canadensis
8. Raphanussativus
9. Magnesia carbonica
10. Magnesia muriatica
11. Anthracinum
12. Bacillinum/ Tuberculinum
13. Lac caninum
14. Lac defloratum
15. Lyssin
16. Medorrhinum
17. Psorinum
18. Pyrogenium
19. Vaccinium
20. Variolinum
21. Hydrctyleasiatica
22. Mezereum
23. Radium bromatum
24. Urticaurens
25. Vinca minor
26. Abrotanum
27. Rheum palmatum
28. Sanicula aqua
29. Acalyphaindica
30. Coralliumrubrum
31. Lobelia inflata
32. Mephitis putorius
33. Rumexcrispus
34. Sabadillaofficinalis
35. Sambucusnigra
36. Squillamaritima
37. Barytamuriatica

38. *Crataegusoxycantha*
39. *Lithium carbonicum*
40. *Rauwolfiaserpentina*
41. *Caulophyllum*
42. *Cocculusindicus*
43. *Crocus sativus*
44. *Heloniasdioica*
45. *Lilliumtigrinum*
46. *Sabina*
47. *Trillium pendulum*
48. *Viburnum opulus*
49. *Cicutavirosa*
50. *Ranunculusbulbosus*
51. *Rhododendron chrysanthum*
52. *Clematis erecta*
53. *Sabalserrulata*
54. *Sarsaparilla officinalis*
55. *Coffeacruda*
56. *Glonoine*
57. *Melilotus*
58. *Mellefolium*
59. *Sanguinaria Canadensis*
60. *Spigelia*
61. *Veratrumviride*
62. *Capsicum*
63. *Cedron*
64. *Eupatorium perfoliatum*
65. *Abromaaugusta*
66. *Calotropisgigantea*
67. *Carica papaya*
68. *Cassia sophera*
69. *Ficusreligiosa*
70. *Jonosiaasoca*
71. *Justiciaadhatoda*
72. *Ocimum sanctum*
73. *Syzigiumjambolanum*
74. *Ratanhiaperuviana*
75. *Collinsonia Canadensis*
76. *Antimoniumarsenicum*
77. *Stictapulmonaria*
78. *Asteriasrubens*

79. Iodium
  80. Thyroidinum
  81. Argentum metallicum
  82. Cuprum metallicum
  83. Plumbummetallicum
  84. Zincummetallicum
  85. Adonis vernalis
  86. Kalmia latifolia
  87. Physostigmavenenosum
  88. Mercuriuscorrosivus
  89. Mercuriuscyanatus
  90. Mercuriusdulcis
  91. Mercuriussolubilis
  92. Mercuriussulphuricus
  93. Causticum
  94. Bacillus No.7
  95. Dysentery co
  96. Gaertner
  97. Morgan pure
  98. Morgan gaertner
  99. Proteus bacillus
  100. Sycotic bacillus
- Additional medicines
- 101 Aesculushippocastanum
  - 102 Adrenalinum
  - 103 Artemesia vulgaris
  - 104 Avenasativa
  - 105 Blattaorientalis
  - 106 Carcinisin
  - 107 Cardusmarianus
  - 108 Ceonathus
  - 109 Chininumarsenicum
  - 110 Cholestrinum
  - 111 Coca erythrxylon
  - 112 Diphtherinum

113 Erigeron Canadensis

114 Malandrinum

115 Menyanthes

116 Onosmodium

117 Passiflora incarnate

118 Ustilagomaydis

119 Stannummetallicum

120 Valerianaofficinalis

121 X – ray

122. Hemamelis

#### **Group studies**

1. Baryta group
2. Calcarea group
3. Magnesia group
4. Natrum group
5. Compositae family
6. Ranunculaceae family
7. Solanaceae family

#### **C. Practical or clinical:**

Each student shall maintain a journal having record of ten acute and ten chronic case taking.

#### **D. Examination :**

1 .1 Number of papers – 02

2.1 Marks : 200

2.1.1 Distribution of marks :

2.1.2 Paper – 1 : Topics of First , Second and Third B.H.M.S – 100 Marks

2.1.3 Paper – 2 Topics of 4 B.H.M.S – 100 Marks

2.Practical including viva voice r oral :



2.1 Marks	200	Marks
2.2. Distribution of marks;		
2.2.1. Case taking and case Processing of one long case		60
2.2.2 Case taking of one short case	20	
2.2.3 Maintenance of practica Record or journal		20
2.2.4 Viva voice (oral)		100
Total		200

**2.11 No: of hours per subject (lecture/practical/clinical--tutorial-seminar-group discussion)**

As per Clause 2.7

**2.12 Practical training**

(Refer clause 2.10)

**2.13 Records**

To be maintained for all Practical Works.

**2.14 Dissertation: Guide/Co-Guide/ Change of Guide**

Not applicable

**2.15 Speciality training if any**

As decided by the Faculty of Homoeopathy/ KUHS from time to time.

**2.16 Project work to be done if any**

As decided by the Faculty of Homoeopathy/ KUHS from time to time.

**2.17 Any other requirements [CME, Paper Publishing etc.]**

As decided by the Faculty of Homoeopathy/ KUHS from time to time.

**2.18 Prescribed/recommended textbooks for each subject**

Refer 'clause 2.10 content of each subject in each year'.

**2.19 Reference books**

Refer clause "2.10 content of each subject in each year"

## **2.20 Journals**

As suggested by the concerned faculty/HoD

## **2.21 Logbook**

To be maintained for all academic work and shall be countersigned by the concerned HOD.

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