SAURASHTRA UNIVERSITY

Accredited Grade "A"
by NAAC

FACULTY OF HOMOEOPATHY

SYLLABUS FOR

B.H.M.S.

(Bachelor of Homoeopathy Medicine & Surgery)

Effective From June - 2015-16

Saurashtra University
University Campus Rajkot - 360 005,
Gujarat,India

Website : www.saurashtrauniversity.edu
CENTRAL COUNCIL OF HOMOEOPATHY

PRINCIPAL REGULATIONS
PUBLISHED IN THE GAZETTE OF INDIA:
EXTRAORDINARY, ON 11TH MAY, 1983
(And Corrigendum Published in the Gazette dated 6TH February, 1984)

AMENDMENTS PUBLISHED IN GAZETTE OF INDIA:
EXTRAORDINARY, ON 25TH SEPTEMBER, 2003,
(And Corrigendum Published in the Gazette dated 29TH June, 2004)

HOMOEOPATHY (DEGREE COURSE)
B.H.M.S.
REGULATIONS, 1983
(As Amended upto July, 2015)

JANAKPURI, NEW DELHI
B.H.M.S. DEGREE COURSE

ORDINANCE AS PER CCH NOTIFICATION
NO F.NO.12-13/2006-CCH(Pt-V)12990 ,Dt.10-8-2015

O.B.H.M.S.: 1

A Candidate shall be eligible to apply for admission to B.H.M.S. DEGREE COURSE who fulfills the requirements, standards and criteria fixed by the CENTRAL COUNCIL OF HOMOEOPATHY in force at the time of giving admission for the concerned academic year, who fulfills the requirement of statutes 150 (A) of the university.

As per above mention notification is as under.
"4 eligibility criteria- (i) No candidate shall be admitted to B.H.M.S degree course unless he has passed --
(a) the higher secondary examination or the Indian school certificate Examination which is equivalent to 10+2 Higher secondary examination after a period of twelve years study, the last 2 year of study comprising of physics, chemistry, biology with mathematics or any other elective subjects with English at a level not less than core course of English as prescribed by the National Council of educational Research and training after the introduction of 10+2+3 years education stricter as recommended by the committee on Education;

Or

(b) The intermediate examination in science of an Indian university or board or other recognized examination body with physics, chemistry and biology, which shall include a practical test in this subjects and also English as a compulsory subject.

Or

(c) The pre-professional or pre-medical examination with physics, chemistry and biology after passing either the higher secondary school examination or the pre-university or an equivalent examination, which shall include a practical test in physics, chemistry and biology and also English as a compulsory subject.

Or

(d) The first year of three years degree courser of a recognized university, with physics, chemistry and biology including a practical test in these subjects provided the examination is a University examination and candidate has passed 10+2 with English at a level not less than a core course;

Or

(e) any other examination with in scope and standard is found to be equivalent to the intermediate science examination of an Indian university or board, taking physics,
chemistry and biology including practical test in each of this subjects and English as a compulsory subject;

(ii) No candidate shall be admitted to BHMS degree course unless he has attained the age of 17 years on or before 31st December of the year of his admission to the first year of the course.

(iii) No candidate shall be admitted to BHMS degree course if he is blind (Including colour blindness), deaf, dumb, deaf and dumb.

O.B.H.M.S.: 2

The B.H.M.S. DEGREE COURSE is a regular full time degree program having 5.1/2 years duration including 12 months compulsory internship as prescribed by CCH. The admitted candidate will not be entitled to join any other course of study without previous permission of the university and CCH.

O.B.H.M.S.: 3

The maximum duration for completing the BHMS course is 11 year including 12 months compulsory internship as per CCH.

O.B.H.M.S.: 4

The scheme of BHMS course is as per CCH notification mention above and it is therefore necessary that all other provisions maid by the CCH in its notifications date.10-8-2015 shall be treated as the Ordinance or the regulation for the implementations of the scheme embodied in the above said notification.

O.B.H.M.S: 5

No candidate will be admitted to any examination in the Homoeopathy as mentioned in the CCH regulation unless He /She has undergone a course of study in the prescribe subjects to the satisfaction of the principal at the college affiliated to this university and recognized by the CCH for teaching the courses of studies in the Homoeopathy.

O.B.H.M.S:6 - Attendances

Seventy-five percent (75%) attendances at the minimum in each of the subjects (in theory and practical including clinical) for appearing in the university examination shall be compulsory.
O.B.H.M.S:7 - Migration

The scheme of migration or transfer of students from one college to another college shall be the same as it is provided in regulation 17 of the above said CCH notification.

O.B.H.M.S:8 - Internship

The scheme of internship shall be the same as it is provided in regulation 18 of the above said CCH notification.

O.B.H.M.S: 9

Every candidate admitted to first year of BHMS course will have to pass through the Thalassaemia Test & Blood Grouping Test.

O.B.H.M.S:10

Every affiliated college shall have to take appropriate measure against Ragging & Gender problems. The word college includes college building, sport complex, hostel, Hospital and such other component, which are with in the purview of the college.

In case of occurrence, any such incident the violator shall be dealt with very serious and appropriate stringent action be taken by the principal of the college observing principle of natural justice. The head of college may appoint a committee to inquire in to the matter, which will also observe the principles of natural justice. The committee will submit its reports to the head of college who may take further necessary action in the matter.
REGULATIONS AS PER CCH NOTIFICATION

NO F.NO.12-13/2006-CCH(Pt-V)12990 , Dt.10-8-2015

R.B.H.M.S.: 1
The application for admission to any of the examination shall be submitted by the candidate through the principal of the college affiliated to the University in the Performa prescribed by the university along with necessary fees and certificate of the principal.

R.B.H.M.S.: 2
The teaching and examination scheme shall be the same as it is provided in the above-referred notification Dated 10-8-2015.

R.B.H.M.S.: 3
The scheme of supplement examination shall be the same as it is provided in the above-referred notification Dated 10-8-2015.

R.B.H.M.S.: 4
The scheme for awarding the Grace marks shall be the same as it is provided in the above-referred notification Dated 10-8-2015.

R.B.H.M.S.: 5
The candidate will be required to appear and past the examination of Environmental science as prescribed by the UGC- New Delhi, in the first year of BHMS degree programme.

R.B.H.M.S.: 6
The examination and passing pattern shall be as per norms prescribed by the CCH for the examination of relevant academic year.

R.B.H.M.S.: 7
On the completion of internship of specified period of 12 months and on the recommendation of the head of the college, the university shall issue the degree to the successful candidate at an ensuing convocation.
R.B.H.M.S.: 8
No candidate will be declared a successful at any of the examination mention below unless he passes all the courses prescribed for the examination by the CCH.

<table>
<thead>
<tr>
<th>sr.no.</th>
<th>First BHMS</th>
<th>12 months from the date of first admission</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Second BHMS</td>
<td>24 months from the date of first admission</td>
</tr>
<tr>
<td>3</td>
<td>Third BHMS</td>
<td>36 months from the date of first admission</td>
</tr>
<tr>
<td>4</td>
<td>Fourth BHMS</td>
<td>54 months from the date of first admission</td>
</tr>
</tbody>
</table>

R.B.H.M.S.: 9
(i) To pass the examinations a candidate must obtain separately in each paper of theory, practical and oral of each subject.
(ii) At least 50% marks in the university examination.

R.B.H.M.S.: 10
The benefit of grace mark shall be the same as it is provided in CCH regulation NO F.NO.12-13/2006-CCH (Pt-V) 12990, Dt.10-8-2015, which read as under "(viii) The university or examining authority shall have the discretion to award to grace marks at the maximum to ten marks in total if a student fails in one or more subjects."

R.B.H.M.S.: 11 award of classes:-
(a) A candidate passing the examination of BHMS course at first attempt will be eligible for class as per below mention.
(i) The candidate who has passed the examinations of all subjects at first attempt will be placed in second class.
(ii) Those of the successful candidate who obtains at least 60% or more but less than 70% of marks at first attempt the aggregates of all subjects will be declares in First class.
(iii) Those of the successful candidate who obtained at least 70% or more marks at first attempt the aggregates of all subjects will be declares in First class with distinction.
(iv) If the candidate has passed the examinations with more then one attempt at any years of examinations he will be declared to have passed the examination in pass class. Such a candidates will not be eligible for Rank, Class, Gold medal, Scholarship or any prize etc.
R.B.H.M.S.: 12
(a) There shall be a regular examination and supplementary examination in a year and the supplementary examination shall be conducted within two months of declaration of results. (including issue of mark sheet) as provided in regulation 16 (vii)
(b) Non-appearance in examination for any reason a candidate shall not have any liberty for availing additional chance to appear in that examination, as provided in regulation 16 (viii)

R.B.H.M.S.: 13 The Examiners:
(i) No person other than the holder of qualification prescribed for the teaching staff in the homoeopathy central council (minimum standard Requirements of Homoeopathic colleges and attached hospitals) Regulations 2013, as amended from time to time shall be appointed as an internal or external examiner or paper setter or moderator provided that
(a) No such person shall be appointed as an examiner unless he has at least 3 years continues regular teaching experience in the subject concerned, gained in a degree level Homoeopathic Medical colleges.
(b) Internal examiners shall be appointed from amongst teaching staff of the Homoeopathic medical college to which the candidate or students belongs.
(c) The criteria for appointing the chairman or paper setter or moderator shall be as follows, namely
   (1) The chairman senior most person from among the examiner or paper setter appointed for the theory and oral or practical or clinical examination shall be appointed as chairman and the eligibility qualifications for the chairman shall be the said a as for appointment as a professor.
   (2) A professor or associate professor or reader shall eligible to be appointed as moderator. provided that an assistant professor or lecturer with five years teaching experience as an examiner shall be eligible to be appointed s moderator.
   (3) Paper shatter: a professor or associate professor or reader shall be appointed as a paper setter provided that an assistant professor or lecturer with three years experience as an examiner shall be eligible to be appointed as paper setter.

R.B.H.M.S.: 14
The scheme of examinations for the BHMS course shall be as under mention table as per CCH.
### THE CURRICULUM WITH - EXAMINATION CODE

#### 25. Subjects.– Subjects for study and examination for the B.H.M.S (Degree) Course shall be as under, namely:–

<table>
<thead>
<tr>
<th>Sl.No</th>
<th>Name of the Subject</th>
<th>Subject taught during</th>
<th>Holding of examination</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Anatomy</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1609010000010100</td>
<td>(1ST YR P-1)</td>
<td>First B.H.M.S.</td>
</tr>
<tr>
<td></td>
<td>1609010000010200</td>
<td>(1ST YR P-2)</td>
<td>At the end of First B.H.M.S.</td>
</tr>
<tr>
<td>2.</td>
<td>Physiology</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1609020000010100</td>
<td>(PAPER-1)</td>
<td>First B.H.M.S.</td>
</tr>
<tr>
<td></td>
<td>1609020000010200</td>
<td>(PAPER-2)</td>
<td>At the end of First B.H.M.S.</td>
</tr>
<tr>
<td>3.</td>
<td>Organon of Medicine with Homoeopathic Philosophy</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1609030000030000</td>
<td>(3RD YR P-1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1609030000040100</td>
<td>(4TH YR P-1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1609030000040200</td>
<td>(4TH YR - P-2)</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Homoeopathic Pharmacy</td>
<td></td>
<td>First B.H.M.S.</td>
</tr>
<tr>
<td></td>
<td>1609040000010000</td>
<td>(1ST YR P-1)</td>
<td>At the end of First B.H.M.S.</td>
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<tr>
<td>5.</td>
<td>Homoeopathic Materia Medica</td>
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<td></td>
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<tr>
<td></td>
<td>1609050000040200</td>
<td>(4TH YR - P-2)</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Pathology</td>
<td></td>
<td>Second B.H.M.S.</td>
</tr>
<tr>
<td></td>
<td>P1-16090600000100</td>
<td>(2 ND YR P-1)</td>
<td>At the end of Second B.H.M.S.</td>
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<td>P1-16090600000200</td>
<td>(2 ND YR P-2)</td>
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<tr>
<td>7.</td>
<td>Forensic Medicine and Toxicology</td>
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<td></td>
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<tr>
<td></td>
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<td>(2 ND YR P-1)</td>
<td>Second B.H.M.S.</td>
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<tr>
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<td>1609080000010000</td>
<td>(4TH YR P-1)</td>
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<tr>
<td></td>
<td>1609080000040200</td>
<td>(4TH YR P-2)</td>
<td></td>
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</tbody>
</table>
| 9.  | Surgery  
1609090000030100 (3RD YR P-1)  
1609090000030200 (3 RD YR P-2) | Second B.H.M.S. and Third B.H.M.S. | At the end of Third B.H.M.S. |
| 10. | Gynecology and Obstetrics  
1609100000030100 (3RD YR P-1)  
1609100000030200 (3 RD YR P-2) | Second B.H.M.S. and Third B.H.M.S. | At the end of Third B.H.M.S. |
| 11. | Community Medicine  
1609110000040000 (4TH YR P-1) | Third B.H.M.S. and Fourth B.H.M.S. | At the end of Fourth B.H.M.S. |
| 12. | Repertory  
1609120000040000 (4TH YR P-1) | Third B.H.M.S. and Fourth B.H.M.S. | At the end of Fourth B.H.M.S.” |
THE SCHEME OF EXAMINATION IN BHMS COURSE IN FORCE FROM 2015-2016 As per CCH, F – 12-13/2006, CCH (Pt. V) 12990, Dt. 10-08-2015

- Subject for Examination for the BHMS (Degree) Course shall be as under
- Full Marks for each subject and minimum marks required for pass as follows
- As per Regulation 13(iv) Each Theory paper shall be of three hours duration.

<table>
<thead>
<tr>
<th>Exam Year</th>
<th>Name of the Subject</th>
<th>Written</th>
<th>Practical / Clinical Including Oral</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Full Marks</td>
<td>Pass Marks</td>
<td>Full Marks</td>
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<tr>
<td>1st Year</td>
<td>Homoeopathic Pharmacy (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
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<tr>
<td></td>
<td>Anatomy Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Anatomy Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physiology Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Physiology Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL MARKS</strong></td>
<td><strong>500</strong></td>
<td><strong>250</strong></td>
<td><strong>500</strong></td>
</tr>
<tr>
<td>2nd Year</td>
<td>Pathology Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Pathology Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Forensic Medicine And Toxicology (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL MARKS</strong></td>
<td><strong>500</strong></td>
<td><strong>250</strong></td>
<td><strong>400</strong></td>
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<tr>
<td>3rd Year</td>
<td>Surgery Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Surgery Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gynaecology and Obstetrics Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Gynaecology and Obstetrics Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
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<td>Organon of Medicine (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
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</tr>
<tr>
<td></td>
<td><strong>TOTAL MARKS</strong></td>
<td><strong>600</strong></td>
<td><strong>300</strong></td>
<td><strong>600</strong></td>
</tr>
<tr>
<td>4th Year</td>
<td>Practice of Medicine Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Practice of Medicine Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine with Homoeopathic Philosophy Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine with Homoeopathic Philosophy Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Repertory (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Community Medicine (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL MARKS</strong></td>
<td><strong>800</strong></td>
<td><strong>400</strong></td>
<td><strong>700</strong></td>
</tr>
</tbody>
</table>
6. Syllabus for Degree Course. – The following shall be the syllabus for B.H.M.S (Degree) Course.

1ST BHMS SUBJECTS.

ANATOMY

Instructions:
I (a) Instructions in anatomy should be so planned as to present a general working knowledge of the structure of the human body;
(b) The amount of detail which a student is required to memorise should be reduced to the minimum;
(c) Major emphasis should be laid on functional anatomy of the living subject rather than on the static structures of the cadaver, and on general anatomical positions and broad relations of the viscera, muscles, blood-vessels, nerves and lymphatics and study of the cadaver is the only means to achieve this;
(d) Students should not be burdened with minute anatomical details which have no clinical significance.
II Though dissection of the entire body is essential for the preparation of the student of his clinical studies, the burden of dissection can be reduced and much saving of time can be effected, if considerable reduction of the amount of topographical details is made and the following points 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 and more interesting, lively and practical or clinical.
(5) A good part of the 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 viscera, muscles, blood vessels, nerves and lymphatics.
(10) There should be joint seminars with the departments of Physiology and Bio-Chemistry 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 Bio-chemistry shall be integrated.

A. Theory:

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

The curriculum includes the following, namely:-

1. General Anatomy:

   1.1. Modern concepts of cell and its components; cell division, types with their significance.
   1.2. Tissues.
   1.3. Genetics.

2. Developmental anatomy (Embryology):

   2.1. Spermatogenesis
   2.2. Oogenesis
   2.3. Formation of germ layers
   2.4. Development of embryogenic disk
   2.5. Placenta
   2.6. Development of abdominal organs
   2.7. Development of cardio vascular system
   2.8. Development of nervous system
   2.9. Development of respiratory system
   2.10. Development of body cavities
   2.11. Development of uro-genital system

3. Regional anatomy:

   This will be taught under the following regions:-

   3.1. Head, Neck and Face, Brain
   3.2. Thorax
   3.3. Abdomen
   3.4. Upper and Lower Extremities
   3.5. 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 -

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 or clinical journals and dissection cards.

C. Examination:

1. Theory:

The written papers in anatomy shall be in two papers, namely:-

1.1. Paper-I
   a. General Anatomy,
   b. Head, face and neck, Central nervous System, upper extremities and Embryology.

1.2. Paper-II
   a. Thorax, abdomen, pelvis, lower extremities and Histology (micro-anatomy).

2. The Practical including viva voce or oral examination includes the following:-

2.1. Marks: 200

2.2. Distribution of marks-

<table>
<thead>
<tr>
<th></th>
<th>Marks</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2.1. Knowledge of dissected parts</td>
<td>20</td>
</tr>
<tr>
<td>2.2.2. Viscera</td>
<td>20</td>
</tr>
<tr>
<td>2.2.3. Bones</td>
<td>20</td>
</tr>
<tr>
<td>2.2.4. Surface Anatomy</td>
<td>10</td>
</tr>
<tr>
<td>2.2.5. Spotting (including Radiology and Histology)</td>
<td>20</td>
</tr>
<tr>
<td>2.2.6. Maintenance of Practical record or journal and dissection card</td>
<td>10</td>
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<tr>
<td>2.2.7. Viva Voce (Oral)</td>
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Total: 200
PHYSIOLOGY

Instructions:
I (a) The purpose of a course in physiology is to teach the functions, processes and inter-relationship of the different organs and systems of the normal disturbance in disease and to equip the student with normal standards of reference for use while diagnosing and treating deviations from the normal;
(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 and physiology so that there is maximum co-ordination in the teaching of these subjects;
(c) Seminars should be arranged periodically and lecturers of anatomy, physiology and bio-chemistry should bring home the point to the students that the integrated approach is more meaningful.

A. Theory:

The curriculum includes the following, namely:-

I. General physiology:

1. Introduction to cellular physiology
2. Cell Junctions
3. Transport through cell membrane and resting membrane 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 principles 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. Physiological 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 and 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, Vestibular 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

B. Practical:
I. Haematology:
1. Study of the Compound Microscope
2. Introduction to haematology
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 and 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

BIO-CHEMISTRY
A. Theory:

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<tr>
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<tbody>
<tr>
<td>1. Carbohydrates: (Chemistry, Metabolism, Glycolysis, TCA, HMP, Glycogen synthesis and degradation, Blood glucose regulation)</td>
<td></td>
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<tr>
<td>2. Lipids: (Chemistry, Metabolism, Intestinal uptake, Fat transport, Utilisation of stored fat, Activation of fatty acids, Beta oxidation and synthesis of fatty acids)</td>
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<tr>
<td>3. Proteins: (Chemistry, Metabolism, Digestion of protein, Transamination, Deamination, Fate of Ammonia, Urea cycle, End products of each amino acid)</td>
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</tbody>
</table>
and their entry into TCA cycle

4. Enzymes: (Definition, Classification, Biological Importance, Diagnostic use, Inhibition)

5. Vitamins: (Daily requirements, Dietary source, Disorders and physiological role)

6. Minerals (Daily requirement, Dietary Sources, Disorders and physiological role)

7. Organ function tests

B. Practical:

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 results of biochemical tests.

C. Examination:

1. Theory:

(1) No. of Papers- 02
(2) Marks: Paper I- 100
(3) 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; 200

2.2. Distribution of marks; 

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<th>Category</th>
<th>Marks</th>
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<td>2.2.1. Experiments</td>
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<tr>
<td>2.2.2. Spotting</td>
<td>30</td>
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<tr>
<td>2.2.3. Maintenance of Practical record/Journal</td>
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<td>2.2.4. Viva Voce (Oral)</td>
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<td>Total</td>
<td>200</td>
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ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Instructions:
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 dynamistic 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 departments, but also enhance the confidence of the students when they will be attending specialty clinics.

FIRST B.H.M.S.

A. Theory:
1. Introductory lectures
   1.1. 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.
   1.2. Short history of Hahnemann’s life, his contributions, and discovery of Homoeopathy, situation leading to discovery of Homoeopathy
   1.4. History and Development of Homoeopathy in India, U.S.A. and European countries
   1.5. Fundamental Principles of Homoeopathy.
   1.6. Basic concept 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 constructions 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.

Preliminary lecturers on inductive and deductive logic (with reference to philosophy book of Stuart Close Chapter 3 and 16).

3. Psychology

3.1. Basics of Psychology.
3.2. Study of behavior and intelligence.
3.3. Basic concepts of Sensations.
3.4. Emotion, Motivation, Personality, Anxiety, Conflict, Frustration, Depression, Fear, Psychosomatic Manifestations
3.5 Dreams.

4. Aphorisms 1 to 28 of organon of medicine

5. Homoeopathic Prophylaxis

**B. Examination: There shall be no examination in the subject in First B.H.M.S.**
HOMOEOPATHIC PHARMACY

Instructions:

Instruction in Homoeopathic Pharmacy shall be so planned as to present,–

1. importance of homoeopathic pharmacy in relation to study of homoeopathic materia medica, organon of medicine and national economy as well as growth of homoeopathic pharmacy and research;
2. originality and speciality of homoeopathic pharmacy and its relation to pharmacy of other recognised systems of medicine;
3. the areas of teaching shall encompass the entire subject but stress shall be laid on the fundamental topics that form the basis of homoeopathy.

A. Theory:

I. General concepts and orientation:
   1. History of pharmacy with emphasis on emergence of Homoeopathic Pharmacy.
   2. Official Homoeopathic Pharmacopoeia (Germany, Britain, U.S.A., India).
   3. Important terminologies like scientific names, common names, synonyms.
   4. Definitions in homoeopathic pharmacy.
   5. Components of Pharmacy.
   6. Weights and measurements.
   7. Nomenclature of homoeopathic drugs with their anomalies.

II. Raw Material: drugs and vehicles
   1. Sources of drugs (taxonomic classification, with reference to utility).
   2. Collection of drug substances.
   3. Vehicles.

III. Homoeopathic Pharmaceutics:
   2. Various scales used in homoeopathic pharmacy.
   3. Drug dynamisation or potentisation.
   4. External applications (focus on scope of Homoeopathic lotion, glycerol, liniment and ointment).
   5. Doctrine of signature.
   6. Posology (focus on basic principles; related aphorisms of organon of medicine).
   7. Prescription (including abbreviations).
   8. Concept of placebo.
   10. Dispensing of medicines.
IV. Pharmacodynamics:

1. Homoeopathic Pharmacodynamics
2. Drug Proving (related aphorisms 105 – 145 of organon of medicine) and merits and de- merits of Drug Proving on Humans and Animals.
3. Pharmacological study of drugs listed in Appendix -A

V. Quality Control:

1. Standardisation of homoeopathic medicines, raw materials and finished products.
2. Good manufacturing practices; industrial pharmacy.
3. Homoeopathic pharmacopoeia laboratory – functions and activities, relating to quality control of drugs.

VI. Legislations pertaining to pharmacy:

1. The Drugs and Cosmetics Act, 1940 (23 of 1940) {in relation to Homoeopathy};
2. Drugs and Cosmetics Rules, 1945 {in relation to Homoeopathy;}
3. Poisons Act, 1919 (12 of 1919);
4. The Narcotic Drugs and Psychotropic Substances Act, 1985 (61 of 1985);
5. Drugs and Magic Remedies (Objectionable Advertisements) Act, 1954 (21 of 1954);

B. Practical:

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 and 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 in decimal and centesimal scale.
7. Succussion in decimal scale from Mother Tincture to 6X potency.
8. Succussion in centesimal scale from Mother Tincture to 3C potency.
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 potency.
11. Preparation of 0/1 potency (LM scale) of 1 Drug.
13. Laboratory methods – sublimation, distillation, decantation, filtration, crystallisation.
14. Writing of prescription.
15. Dispensing of medicines.
17. Identification of drugs (listed in Appendix B)-(i). Macroscopic and Microscopic characteristic of drug substances- minimum 05 drugs;
(ii) Microscopic study of trituration of two drugs (up to 3X potency).
18. Estimation of moisture content using water bath.
21. Visit to homoeopathic pharmacopoeia laboratory and visit to a large scale manufacturing unit of homoeopathic medicines (GMP compliant). (Students shall keep detailed visit reports as per proforma at Annexure- ‘B’).

C. Demonstration
1. General instructions for practical or clinical in pharmacy.
2. Identification and use of homoeopathic pharmaceutical instruments and appliances and their cleaning.
3. Estimation of moisture content using water bath.

APPENDIX-A

List of drugs included in the syllabus of pharmacy for study of pharmacological action:-

1. Aconitum napellus
2. Adonis vernalis
3. Allium cepa
4. Argentum nitricum
5. Arsenicum album
6. Atropa Belladonna
7. Cactus grandiflorus
8. Cantharis vesicatoria
9. Cannabis indica
10. Cannabis sativa
11. Cinchona officinalis
12. Coffea cruda
13. Crataegus oxyacantha
14. Crotalus horridus
15. Gelsemium sempervirens
16. Glonoinum
17. Hydrastis canadensis
18. Hyoscyamus niger
19. Kali bichromicum
20. Lachesis
21. Lithium carbonicum
22. Mercurius corrosivus
23. Naja tripudians
24. Nitricum acidum
25. Nux vomica
26. Passiflora incarnata
27. Stannum metallicum
28. Stramonium
29. Symphytum officinale
30. Tabacum

APPENDIX-B

List of drugs for identification
I. Vegetable Kingdom

1. Aegle folia
2. Anacardium orientale
3. Andrographis paniculata
4. Calendula officinalis
5. Cassia sophera
6. Cinchona officinalis
7. Cocculus indicus
8. Coffea cruda
9. Colocynthis
10. Crocus sativa
11. Croton tiglium
12. Cynodon dactylon
13. Ficus religiosa
14. Holarrhena antidysenterica
15. Hydrocotyle asiatica
16. Justicia adhatoda
17. Lobelia inflata
18. Nux vomica
19. Ocimum sanctum
20. Opium
21. Rauwolfia serpentina
22. Rheum
23. Saraca indica
24. Senna
25. Stramonium
26. Vinca minor

II. Chemicals or Minerals

1. Aceticum acidum
2. Alumina
3. Argentum metallicum
4. Argentum nitricum
5. Arsenicum album
6. Calcarea carbonica
7. Carbo vegetabilis
8. Graphites
9. Magnesium phosphorica
10. Natrum muriaticum
11. Sulphur

III. Animal kingdom

1. Apis mellifica
2. Blatta orientalis
3. Formica rufa
4. Sepia
5. Tarentula cubensis
**Note:**
1. Each student shall maintain practical or clinical record or journal and herbarium file separately.
2. College authority shall facilitate the students in maintaining record as per Appendix-C.

E. 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 | 15 |
      | 2.2.2. Spotting | 20 |
      | 2.2.3. Maintenance of practical records or journal | 10 |
      | 2.2.4. Maintenance of herbarium record | 05 |
      | 2.2.5. Viva voce (oral) | 50 |
      |------|-----|
      | Total | 100 |
HOMOEOPATHIC MATERIA MEDICA

Instructions:

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

II 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 applied.

III (a) The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship;
(b) 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.

IV (a) 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 relationship;
(b) Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline, emphasizing only their most salient features and symptoms.

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

(VI) (a) While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned;
(b) The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself 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 his burden as far as formal examinations are concerned;
(c) Application of Materia Medica should be demonstrated from case-records in the outdoor and the indoor;
(d) Lectures on comparative Materia Medica and therapeutics as well as tutorials should be integrated with lectures on clinical medicine;

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

VIII (a) 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 detail study;
(b) 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 details during this curriculum, general topics should be taught in all the classes;
(c) The medicines are to be taught under the following headings, namely:--
(1) Common name, family, habitat, parts 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:

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 Materia Medica
   1. Definition of Homoeopathic Materia Medica
   2. Basic concept and construction of Homoeopathic Materia Medica.
   3. Classification of Homoeopathic Materia Medica.
   4. Sources of Homoeopathic Materia Medica.
   5. Scope and Limitations of Homoeopathic Materia Medica

**Note: There shall be no examination in First B.H.M.S.**
2nd year subjects

PATHOLOGY

Instructions:
I (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. Robert, J.H. Allen and other stalwarts, with due reference to Koch’s postulate, correlation with immunity, susceptibility and thereby 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 Materia Medica.
   2. Correlation of miasms and pathology.
   3. Characteristic expressions of each miasm.
   4. Classification of symptoms and diseases 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 lipoidosis
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. Mal-nutrition 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.
10. Diseases of the G.I. system
11. Diseases of liver, gall bladder, and biliary ducts
12. Diseases of the pancreas (including diabetes mellitus)
13. Diseases of the haemopoetic system, bone marrow and blood
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

(I) General Topics:
1. Introduction
2. History and scope of medical microbiology
3. Normal bacterial flora
4. Pathogenicity of micro-organisms
5. Diagnostic microbiology

(II) Immunology:
1. Development of immune system
2. The innate immune system
3. Non-specific defense 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 Atopic); Drug Allergies
8. Hypersensitivity
9. Immuno-deficiency
10. Auto-immunity
11. Transplantation
12. Blood group antigens

(III) 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, e.g. peptostreptococci
6. Gram negative aerobic cocci, eg. neisseria, moraxella, kingella.
7. Gram positive aerobic bacilli, eg. corynebacterium, aecillus anthrax, cereus subtitis, mycobacterium tuberculosis, M. leprae, actinomyces; nocardia, organism of enterobacteriae group.
8. Gram positive anaerobic bacilli, eg. genus clostridium, lactobacillus.
9. Gram negative anaerobic bacilli, eg. bacteroides, fragilus, fusobacterium.
10. Others like- cholerae vibrio, spirochaetes, leptospiroae, mycoplasma, chlamydiae, rickettsiae, yersinia and pasturella.

(IV) 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) Blood and Tissues (Plasmodium-species, Toxoplasma gondii, Trypanosoma species, leishmania species).

(V) Virology:
1. Introduction
2. Nature and classification of viruses
3. Morphology and replication of viruses
4. DNA viruses:
   (i) parvo virus
   (ii) herpes virus, varicella virus, CMV, EBV.
   (iii) hepadna virus (hepatitis virus)
   (iv) papova virus
(v) adeno virus
(vi) pox virus- variola virus, vaccinia virus, molluscum contagiosum etc.

5. RNA viruses:
   (a) orthomyxo virus:
       (i) entero virus
       (ii) rhino virus
       (iii) hepato virus
   (b) paramyxo virus- rubeola virus, mumps virus, Influenza virus etc.
   (c) phabdo virus
   (d) Rubella virus (german measles)
   (e) Corona virus
   (f) Retro virus
   (g) Yellow fever virus
   (h) Dengue, vhikungunya virus
   (i) Miscellaneous virus:
       (i) Arena virus
       (ii) Corona virus
       (iii) Rota virus
       (iv) bacteriophages

(VI) Clinical microbiology: (1) Clinically important micro organisms (2) Immunoprophylaxis, (3) Antibiotic Sensitivity Test (ABST)

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

(VIII) 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.
   4. 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 Blood 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) Methods 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 Meal media (RCM) and Mac conkey’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 I-100; Paper II-100
   1.3 Contents:
      1.3.1 Paper-I: Section A- General Pathology - 50 marks
           Section B- Systemic Pathology - 50 marks
      1.3.2. Paper- II: 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

2. Practical including viva voce or oral:
   2.1. Marks: 100
   2.2. Distribution of marks; Marks
      2.2.1. Practicals - 15
      2.2.2. Spotting - 20 (4 spotting)
      2.2.3. Histopathological slides - 10 (2 slides)
      2.2.4. Journal or practical record - 05
      2.2.5. Viva voce (oral) - 50
         (Including 5 marks for interpretation of routine pathological reports)
         ------
      Total 100
FORENSIC MEDICINE AND TOXICOLOGY

Instructions:

I (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 deductions to set enquire on the right 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 and 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’.

I. 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 fingerprinting, 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, regional, transportation and traffic injuries; injuries from radiation, electrocution and lightening.

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. Abortion 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.

II. 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:
       (i) Corrosive poisons (Mineral acids, Caustic alkalis, Organic acids, Vegetable acids)
       (ii) Irritant poisons (Organic poisons - Vegetable and animal; Inorganic poisons - metallic and non-metallic; Mechanical poisons)
       (iii) Asphyxiant poisons (Carbon monoxide; Carbon dioxide; Hydrogen sulphide and some war gases)
(iv) Neurotic poisons (Opium, Nux vomica, Alcohol, Fuels like kerosene and petroleum products, Cannabis indica, Dhatura, Anaesthetics Sedatives and Hypnotics, Agrochemical compounds, Belladonna, Hyoscyamus, Curare, Conium)

(v) Cardiac poisons (Digitalis purpurea, Oleander, Aconite, Nicotine)

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

III. 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 Transplantation 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 Toilet 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 with Disabilities (Equal Opportunities, 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 incidences reported in newspapers 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 analyzer (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 voce or oral:
   
   2.1. Marks: 100
   2.2. Distribution of marks;

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<tr>
<th>Mark</th>
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<tr>
<td>2.2.1. Medico-legal aspect of 4 specimens</td>
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<td>2.2.3. Journal or practical records</td>
<td>10</td>
</tr>
<tr>
<td>2.2.4. Viva voce (oral)</td>
<td>50</td>
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<td>Total</td>
<td>100</td>
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HOMOEOPATHIC MATERIA MEDICA

Instructions:

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

II 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 applied.

III (a) The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship;
(b) 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.

IV (a) 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 relationship;
(b) Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline, emphasizing only their most salient features and symptoms.

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

(VI) (a) While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned;
(b) The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself to memorise a few drugs for a particular disease and this Hahmennian approach will not only help him in understanding the proper perspective of symptoms as applied and their curative value in sickness but will even lighten his burden as far as formal examinations are concerned;
(c) Application of Materia Medica should be demonstrated from case-records in the outdoor and the indoor;
(d) Lectures on comparative Materia Medica and therapeutics as well as tutorials should be integrated with lectures on clinical medicine;

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

VIII (a) 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 detail study;
(b) 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 details during this curriculum, general topics should be taught in all the classes;
(c) The medicines are to be taught under the following headings, namely:
(1) Common name, family, habitat, parts used, preparation, constituents (of source material).
(3) 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).

SECOND B.H.M.S

A. Theory:
   (a) In addition to syllabus of First B.H.M.S. Course, following shall be taught, namely:-
      (i) Science and philosophy of homoeopathic materia medica.
      (ii) Different ways of studying homoeopathic materia medica (e.g. psycho-clinical, pathological, physiological, synthetic, comparative, analytical, remedy relationships, group study, portrait study etc.)
      (iii) Scope and limitations of homoeopathic materia medica.
      (iv) Concordance or remedy relationships.
      (v) Comparative homoeopathic materia medica, namely:-
          Comparative study of symptoms, drug pictures, drug relationships.
      (vi) Theory of biochemic system of medicine, its 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 –I.
APPENDIX-I

1. Aconitum napellus
2. Aethusa cynapium
3. Allium cepa
4. Aloe socotrina
5. Antimonium crudum
6. Antimonium tartaricum
7. Apis mellifica
8. Argentum nitricum
9. Arnica Montana
10. Arsenicum album
11. Arum triphyllum
12. Baptisia tinctoria
13. Bellis perrenis
14. Bryonia alba
15. Calcarea carbonica
16. Calcarea fluorica
17. Calcarea phosphoric
18. Calcarea sulphurica
19. Calendula officinalis
20. Chamomilla
21. Cina
22. Cinchona officinalis
23. Colchicum autumnale
24. Colocynthis
25. Drosera
26. Dulcamara
27. Euphrasia
28. Ferrum phosphoricum
29. Gelsemium
30. Hepar sulph
31. Hypericum perforatum
32. Ipecacuanha
33. Kali muriaticum
34. Kali phosphoricum
35. Kali sulphuricum
36. Ledum palustre
37. Lycopodium clavatum
38. Magnesium phosphoricum
39. Natrum muriaticum
40. Natrum phosphoricum
41. Natrum sulphuricum
42. Nux vomica
43. Pulsatilla
44. Rhus toxicodendron
45. Ruta graveolens
46. Silicea
47. Spongia tosta
48. Sulphur
49. Symphytum officinale
50. Thuja occidentalis

B: Practical or clinical:
This will cover,-
(i) Case taking of acute and chronic patients
(ii) Case processing including totality of symptoms, selection of medicine, 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. Topics of I BHMS- 50 Marks
       1.3. of II 2. Topics BHMS- 50 Marks
2. Practical including viva voce or oral:
   2.1. Marks: 100

2.2. Distribution of marks;

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<tr>
<td>Processing of one long case</td>
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<tr>
<td>2.2.2. Case taking of one short Case</td>
<td>10</td>
</tr>
<tr>
<td>2.2.3. Maintenance of Practical record or journal</td>
<td>10</td>
</tr>
<tr>
<td>2.2.4. Viva voce (oral)</td>
<td>50</td>
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ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Instructions:
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 dynamistic 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 trainin and this will not only facilitate integration with other related departments, but also enhance the confidence of the students when they will be attending specialty clinics.

SECOND B.H.M.S.

A. Theory:
2. Homoeopathic philosophy:
   2.1. Chapters of Philosophy books of J.T. Kent (Chapters 1 to17, 23 to 27, 31 to 33), Stuart Close (Chapters- 8,9, 11, 12) and H.A. Roberts (Chapters3,4,5,6, 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.
   2.3. Causations:
      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, but comprehending the patient as a whole with the correct appreciation of the factors
responsible for the genesis and maintenance of illness. Hahnemann’s concept and method of case taking, as stated in his Organon of Medicine is to be stressed upon.

2.5. Case processing: This includes,
   (i) Analysis of Symptoms,
   (ii) Evaluation of Symptoms,
   (iii) Miasmatic diagnosis,
   (iv) Totality of symptoms

B. **Practical** or clinical:

2. Each student shall maintain case records of at least 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 – 20 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 | 40  |
      | 2.2.2. Maintenance of practical record or journal | 10  |
      | 2.2.4. Viva voce (oral) | 50  |
      |-------                  |
      | Total                  | 100 |

   ----
SURGERY FOR 2ND BHMS

Instructions:

I (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 so 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.

II 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.

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

IV (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 the students should be directed by the teachers of this subject to the importance of its preventive aspects.

V 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:

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, tumors, cysts, ulcers, sinus and fistula.

6. Injuries of various types; preliminary management of head injury

7. Wounds, tissue repair, scars and wound infections.

8. Special infections (Tuberculosis, Syphilis, Acquired Immuno Defeciency Syndrome, 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.**
Instructions:
I (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 that this peculiar close physiological relationship persists for at least the first two years of the child’s life should be particularly emphasised.

II 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.

III Examinations and investigations in gynaecological and obstetrical cases shall be stressed and scope of homoeopathy in this subject shall be taught in details.

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

Second B.H.M.S
A. Theory:

1. Gynaecology
   (a) A review of the applied anatomy of female reproductive systems-development and malformations.
   (b) A review of the applied physiology of female reproductive systems-puberty, menstruation and menopause.
   (c) Gynaecological examination and diagnosis.
   (d) Developmental anomalies
   (e) Uterine displacements.
   (f) Sex and intersexuality.
   (g) General Management and therapeutics of the above listed topics in Gynaecology.

2. Obstetrics
   (a) Fundamentals of reproduction.
   (b) Development of the intrauterine pregnancy-placenta and foetus.
   (c) Diagnosis of pregnancy-investigations and examination.
   (d) Antenatal care.
   (e) Vomiting in pregnancy.
   (f) Preterm labour and post maturity.
   (g) Normal labour and puerperium
   (h) Induction of labour
   (i) Postnatal and puerperal care.
   (j) Care of the new born.
   (k) Management and therapeutics of the above listed topics in obstetrics.

   Examination: There will be no examination in the subject in Second B.H.M.S.
3rd BHMS SUBJECTS

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Instructions:

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 dynamistic 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 trainin and this will not only facilitate integration with other related departments, but also enhance the confidence of the students when they will be attending specialty clinics.

THIRD B.H.M.S.

A. Theory:

In addition to revision of Aphorisms studied in First B.H.M.S and Second B.H.M.S, 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 foot notes (5th and 6th Editions translated by R.E. Dudgeon and W. Boericke)
3. Chapters of Philosophy books of J.T. Kent (Chapters- 28, 29, 30, 34 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 B.H.M.S 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;
      | Marks |
      |-------|
      | 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 100 |
HOMEO PATHIC MATERIA MEDICA

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

II 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 applied.

III (a) The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship;
(b) 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.

IV (a) 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 relationship;
(b) Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline, emphasizing only their most salient features and symptoms.

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

(VI) (a) While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned;
(b) The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself 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 his burden as far as formal examinations are concerned;
(c) Application of Materia Medica should be demonstrated from case-records in the outdoor and the indoor;
(d) Lectures on comparative Materia Medica and therapeutics as well as tutorials should be integrated with lectures on clinical medicine;

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

VIII (a) 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 detail study;
(b) 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 details during this curriculum, general topics should be taught in all the classes;
(c) The medicines are to be taught under the following headings, namely:–

(1) Common name, family, habitat, parts used, preparation, constituents (of source material).
(4) 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).

THIRD B.H.M.S

In addition to the syllabus of First and Second B.H.M.S including the use of medicines for Second BHMS (Appendix-I), the following additional topics and medicines are included in the syllabus of homoeopathic materia medica for the Third B.H.M.S examination.

A. General Topics of Homoeopathic Materia Medica –

In addition to the syllabus of First and Second BHMS including the use of medicines for Second BHMS (Appendix-I), the following additional topics and medicines are included in the syllabus of Homoeopathic Materia Medica for the Third BHMS Examination.

(a) concept of nosodes - definition of nosodes, types of nosodes, general indications of dosodes.
(b) concepts of constitution, temperaments, diathesis-definitions, various concepts of constitution with their peculiar characteristics, importance of 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-II

APPENDIX-II

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1.</td>
<td>Acetic acid</td>
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<tr>
<td>2.</td>
<td>Actea spicata</td>
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<td>3.</td>
<td>Agaricus muscarius</td>
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<td>4.</td>
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<td>Bovista lycoperdon</td>
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<td>21.</td>
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<tr>
<td>22.</td>
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<td>27.</td>
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<td>Cannabis sativa</td>
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<td>29.</td>
<td>Cantharis vesicatoria</td>
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<td>30.</td>
<td>Carbo vegetabilis</td>
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<td>31.</td>
<td>Chelidonium majus</td>
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<td>32.</td>
<td>Conium maculatum</td>
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<td>Crotaulus horridus</td>
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<td>34.</td>
<td>Croton tiglium</td>
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<td>Cyclamen europaeum</td>
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<td>Dioscorea villosa</td>
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<td>Ferrum metallicum</td>
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<td>Kali bromatum</td>
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<td>Kreosotum</td>
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<td>48.</td>
<td>Lachesis muta</td>
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<td>Moschus</td>
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<td>Murex purpurea</td>
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<td>51.</td>
<td>Muriatic acid</td>
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<td>52.</td>
<td>Naja tripudians</td>
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<td>53.</td>
<td>Natrum carbonicum</td>
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<td>Nitric acid</td>
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<td>Nux moschata</td>
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<td>56.</td>
<td>Opium</td>
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<td>Oxalic acid</td>
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<td>Petroleum</td>
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<td>64.</td>
<td>Podophyllum</td>
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<td>Secale cornutum</td>
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<td>Selenium</td>
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<td>68.</td>
<td>Staphysagria</td>
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<td>69.</td>
<td>Stramonium</td>
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<td>70.</td>
<td>Sulphuric acid</td>
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<td>71</td>
<td>Syphilinum</td>
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<td>Taraxacum officinale</td>
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<td>Tarentula cubensis</td>
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<td>Thersidion</td>
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<td>Thlaspi bursa pastoris</td>
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### Group studies

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<td>Mercurius group</td>
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<td>Spider group</td>
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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 schedule

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

E. Examination:

1. Theory:
   1. 1 Number of papers- 01
   1. 2 Marks: 100
   1. 3 Distribution of marks:
      1.3.1 Topics of Second BHMS- 50 Marks
      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 |
GYNAECOLOGY AND OBSTETRICS

Instructions:

I (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 that this peculiar close physiological relationship persists for at least the first two years of the child’s life should be particularly emphasised.

II 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.

III Examinations and investigations in gynaecological and obstetrical cases shall be stressed and scope of homoeopathy in this subject shall be taught in details.

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

Second B.H.M.S

A. Theory:

1. Gynaecology
   (a) A review of the applied anatomy of female reproductive systems-development and malformations.
   (h) A review of the applied physiology of female reproductive systems-puberty, menstruation and menopause.
   (i) Gynaecological examination and diagnosis.
   (j) Developmental anomalies
   (k) Uterine displacements.
   (l) Sex and intersexuality.
   (m) General Management and therapeutics of the above listed topics in Gynaecology.
2. Obstetrics
   (a) Fundamentals of reproduction.
   (b) Development of the intrauterine pregnancy-placenta and foetus.
   (c) Diagnosis of pregnancy-investigations and examination.
   (d) Antenatal care.
   (e) Vomiting in pregnancy.
   (f) Preterm labour and post maturity.
   (g) Normal labour and puerperium
   (h) Induction of labour
   (i) Postnatal and puerperal care.
   (j) Care of the new born.
   (k) Management and therapeutics of the above listed topics in obstetrics.

Third B.H.M.S
1. Gynaecology
   (a) Infections and ulcerations of the female genital organs.
   (b) Injuries of the genital tract.
   (c) Disorders of menstruation.
   (d) Menorrhagia and dysfunctional uterine bleeding.
   (e) Disorders of female genital tract.
   (f) Diseases of breasts
   (g) Sexually transmitted diseases
   (h) Endometriosis and adenomyosis.
   (i) Infertility and sterility
   (j) Non-malignant growths.
   (k) Malignancy
   (l) Chemotherapy caused complications
   (m) Management and therapeutics of the above listed topics in gynaecology.

2. Obstetrics
   (a) High risk labour; mal-positions and mal-presentations; twins, prolapse of cord and limbs, abnormalities in the action of the uterus; abnormal conditions of soft part contracted pelvis; obstructed labour, complications of 3rd stage of labour, injuries of birth canal, foetal anomalies.
   (b) Abnormal pregnancies-abortions, molar pregnancy, diseases of placenta and membranes, toxemia of pregnancy, antepartum haemorrhages, multiple pregnancy, protracted gestation, ectopic pregnancy, intrauterine growth retardation, pregnancy in Rh negative woman, intrauterine fetal death, still birth.
   (c) Common disorders and systemic diseases associated with pregnancy.
   (e) Common obstetrical operations-medical termination of pregnancy, criminal abortion, caesarean section, episiotomy.
   (f) Emergency obstetric care.
(g) Population dynamics and control of conception.

(h) Infant care – neonatal hygiene, breast feeding, artificial feeding, management of premature child, asphyxia, birth injuries, common disorders of newborn.

(i) Reproductive and child health care  (a) safe motherhood and child survival  (b) Risk approach –MCH care  (c) Maternal mortality and morbidity  (d) Perinatal mortality and morbidity  (e) Diseases of foetus and new born.

(j) Medico-legal aspects in obstetrics.

(k) Homoeopathic Management and Therapeutics of the above listed clinical conditions in Obstetrics.

B. Practical or clinical:
   Practical or clinical classes shall be taken on the following topics both in Second and Third B.H.M.S
   (a) Gynaecological case taking
   (b) Obstetrical case taking
   (c) Gynaecological examination of the patient
   (d) Obstetrical examination of the patient including antenatal, intranatal and post- natal care
   (e) Bed side training
   (f) Adequate grasp over Homoeopathic principles and management
   (g) Identification of Instruments and models

Record of ten cases each in gynaecology and obstetrics.

C. Examination:
   1. Theory:
      1.1 Number of papers - 02
      1.2 Marks: Paper I-100; Paper II-100
      1.3 Contents:
         1.3.1 Paper-I: Gynaecology and homoeopathic therapeutics
         1.3.2. Paper-II: Obstetrics, infant care and homoeopathic therapeutics

   2. Practical including viva voce or oral:
      2.1. Marks: 200

      2.2. Distribution of marks; Marks
      2.2.1. One long case 30
      2.2.2. Practical records, case records, journal 30
      2.2.3. Identification of instruments, models and specimens 40
      2.2.4. Viva voce (oral) 100

      Total 200
SURGERY

Instructions:

I (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 so 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.

II 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.

III 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.

IV (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 the students should be directed by the teachers of this subject to the importance of its preventive aspects.

V 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:

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, tumors, cysts, ulcers, sinus and fistula.

6. Injuries of various types; preliminary management of head injury

7. Wounds, tissue repair, scars and wound infections.

8. Special infections (Tuberculosis, Syphilis, Acquired Immuno Defeciency Syndrome, 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.

Third B.H.M.S

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, hernias.

8. Diseases of heart and pericardium.


10. Diseases of the bones, cranium, vertebral column, fractures and dislocations.

11. Diseases of the 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)

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.

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.
4. Management of common surgical procedures and emergency procedures as stated below:

   a) Wounds
   b) Abscesses: incision and drainage.
   c) Dressings and plasters.
d) Suturing of various types.
e) Pre-operative and post-operative care.
f) Management of shock.
g) Management of acute hemorrhage.
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 I-100; Paper II-100
1.3. Contents:

1.3.1. Paper – I:
Section – 1- General Surgery - 50 marks
Section – 2-
Homoeopathic Therapeutics relating to General Surgery – 50 marks

1.3.2. Paper – II:
Section – 1- Systemic Surgery - 50 marks
(i) ENT -20 marks
(ii) Ophthalmology -20 marks
(iii) Dentistry -10 marks

Section – 2: -Systemic Surgery
Homoeopathic Therapeutics - 50 marks
(i) ENT Homoeopathic Therapeutics -20 marks
(ii) Ophthalmology Homoeopathic Therapeutics -20 marks
(iii) Dentistry Homoeopathic Therapeutics -10 marks

2. Practical including viva voce or oral:

2.1. Marks: 200
2.2. Distribution of marks;

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<tr>
<td>2.2.2. Identification of instruments, X-rays</td>
<td>30</td>
</tr>
<tr>
<td>2.2.3. Practical records, case records or journal</td>
<td>30</td>
</tr>
<tr>
<td>2.2.4. Viva voce (oral)</td>
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</tbody>
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Total 200
I (a) Homoeopathy has a distinct approach to the concept of disease;  
(b) it recognises an ailing individual by studying him as a whole rather than in terms of sick parts  
and emphasizes the study of the man, his state of health, state of Illness.  

II The study of the above concept of individualisation is essential with the a 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 and, biochemistry  
and pathology.  
(2) knowledge of causation, manifestations, diagnosis (including differential diagnosis), prognosis and  
management of diseases.  
(3) application of knowledge of organon of medicine and homoeopathic philosophy in dealing with the  
disease conditions.  
(4) comprehension of applied part.  
(5) sound clinical training at bedside to be able to apply the knowledge and clinical skill  
accurately.  
(6) adequate knowledge to ensure that rational investigations are utilised.  

III (a) The emphasis shall be on study of man in respect of health, disposition, diathesis, disease,  
taking all predisposing and precipitating factors, i.e. fundamental cause, maintaining cause and  
exciting cause;  
(b) Hahnemann’s theory of chronic miasms provides us 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.  

IV (a) The teaching shall include homoeopathic therapeutics or management in respect of all topics  
and clinical methods of examination of patient as a whole will be given due stress during the training;  
(b) A thorough study of the above areas will enable a homoeopathic physician to comprehend the  
practical aspects of medicine;  
(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 in two years in Third B.H.M.S and  
Fourth B.H.M.S, but examination shall be conducted at the end of Fourth B.H.M.S.  

Third B.H.M.S  
Theory:  
1. Applied anatomy and applied physiology of the respective system as stated below.  
2. Respiratory diseases.  
3. Diseases of digestive system and peritoneum.  
4. Diseases concerning liver, gall-bladder and pancreas.  
5. Genetic Factors (co-relating diseases with the concept of chronic miasms).
6. Immunological factors in diseases with concept of susceptibility (including HIV, Hepatitis-B)
7. Disorders due to chemical and physical agents and to climatic and environmental factors.
8. Knowledge of clinical examination of respective systems.

Note: There will be no Examination in the subject in Third B.H.M.S.
REPERTORY FOR 3RD BHMS

Instructions:
I (a) Repertorisation is not the end but the means to arrive at the simillimum with the help of materia medica, based on sound knowledge of Homoeopathic Philosophy;
(b) Homoeopathic materia medica is an encyclopedia of symptoms. No mind can memorize all the symptoms or all the drugs with their gradations;
(c) The repertory is an index and catalogue of the symptoms of the materia medica, neatly 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 practice Homoeopathy without the aid of repertories.

II (a) Each repertory has been compiled on distinct philosophical base, which determines its 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 student to learn scope, limitations and adaptability of each repertory.

Third B.H.M.S
A. Theory:
   1. Repertory: Definition; Need; Scope and Limitations.
   2. Classification of Repertories
   3. Study of different Repertories (Kent, Boenninghausen, Boger-Boenninghausen):
      (a) History
      (b) Philosophical background
      (c) Structure
      (d) Concept of repertorisation
      (e) Adaptability
      (f) Scope
      (g) Limitation(s)
   4. Gradation of Remedies by different authors.
   5. Methods and techniques of repertorisation. Steps of repertorisation.
   6. Terms and language of repertories (Rubrics) cross references in other repertories and materia medica.
   7. Conversion of symptoms into rubrics and repertorisation using different repertories.

9. 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.

10. Case processing
    (a) analysis and evaluation of symptoms
    (b) miasmatic assessment
    (c) totality of symptoms or conceptual image of the patient
    (d) repertorial totality
    (e) selection of rubrics
    (f) repertorial technique and results
(g) repertorial analysis

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 & Boenninghausen’s repertories.

Note: There will be no Examination in the subject in Third B.H.M.S.
COMMUNITY MEDICINE FOR 3RD BHMS

Instructions:

I (a) Physician’s 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 medicine 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) Instructions in this course shall be given by lectures, practicals, seminars, group discussions, demonstration and field studies.

Third B.H.M.S

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- insecticides, disinfection, Insects in relation to disease, Insect control.

6. Occupational health

7. Preventive medicine in pediatrics and geriatrics

**Note:** There will be no Examination in the subject in Third B.H.M.S.
4TH BHMS SUBJECTS

PRACTICE OF MEDICINE

Instructions:

I (a) Homoeopathy has a distinct approach to the concept of disease;
(b) it recognises an ailing individual by studying him as a whole rather than in terms of sick parts and emphasizes the study of the man, his state of health, state of Illness.
II The study of the above concept of individualisation is essential with the a 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 and, biochemistry and pathology.
   (7) knowledge of causation, manifestations, diagnosis (including differential diagnosis), prognosis and management of diseases.
   (8) application of knowledge of organon of medicine and homoeopathic philosophy in dealing with the disease conditions.
   (9) comprehension of applied part.
   (10) sound clinical training at bedside to be able to apply the knowledge and clinical skill accurately.
   (11) adequate knowledge to ensure that rational investigations are utilised.

III (a) The emphasis shall be on study of man in respect of health, disposition, diathesis, disease, taking all predisposing and precipitating factors, i.e. fundamental cause, maintaining cause and exciting cause;
(b) Hahnemann’s theory of chronic miasms provides us 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.
IV (a) The teaching shall include homoeopathic therapeutics or management in respect of all topics and clinical methods of examination of patient as a whole will be given due stress during the training;
(b) A thorough study of the above areas will enable a homoeopathic physician to comprehend the practical aspects of medicine;
(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 in two years in Third B.H.M.S and Fourth B.H.M.S, but examination shall be conducted at the end of Fourth B.H.M.S.
Third B.H.M.S
Theory:
   1. Applied anatomy and applied physiology of the respective system as stated below.
   2. Respiratory diseases.
   3. Diseases of digestive system and peritoneum.
4. Diseases concerning liver, gall-bladder and pancreas.
5. Genetic Factors (co-relating diseases with the concept of chronic miasms).
6. Immunological factors in diseases with concept of susceptibility (including HIV, Hepatitis-
B)
7. Disorders due to chemical and physical agents and to climatic and environmental factors.
8. Knowledge of clinical examination of respective systems.

Fourth B.H.M.S
A. Theory:
1. Nutritional and metabolic diseases
2. Diseases of haemopoietic system.
3. Endocrinal diseases.
4. Infectious diseases.
5. Diseases of cardiovascular system.
7. Disease of CNS and peripheral nervous system.
9. Diseases of locomotor system (connective tissue, bones and joints disorders)
10. Diseases of skin and sexually transmitted diseases.
11. Tropical diseases.
12. Paediatric disorders.
14. Applied anatomy and applied physiology of different organ and systems relating to specific 
diseases.
15. Knowledge of clinical examination of respective systems.

(a) General management and homoeopathic therapeutics for all the topics to be covered in Third 
B.H.M.S and Fourth B.H.M.S shall be taught simultaneously and the emphasis shall be on study of 
man in respect of health, disposition, diathesis, disease, taking all predisposing and precipitating 
factors, i.e. fundamental cause, maintaining cause and exciting cause.
(b) Study of therapeutics does not mean simply list of specifics for the clinical conditions but teaching 
of applied materia medica which shall be stressed upon.

Practical or clinical:
(a) Each candidate shall submit of twenty complete case records (ten in Third B.H.M.S and ten in 

(b) 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.

B. Examination:
1. Theory:
1.1. Number of papers - 02
1.2. Marks: Paper I-100; Paper II-100
1.3. Contents:
   1.3.1 Paper-I: Topics of Third B.H.M.S with Homoeopathic Therapeutics
   1.3.2. Paper-II: Topics of Fourth B.H.M.S with Homoeopathic Therapeutics

2. Practical including viva voce or oral:
   2.1. Marks: 200
   2.2. Distribution of marks;

<table>
<thead>
<tr>
<th>Marks</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>One long case</td>
</tr>
<tr>
<td>20</td>
<td>One short case</td>
</tr>
<tr>
<td>30</td>
<td>Practical records, case records, journal</td>
</tr>
<tr>
<td>30</td>
<td>Identification of specimens</td>
</tr>
<tr>
<td>100</td>
<td>Viva voce (oral)</td>
</tr>
</tbody>
</table>

   Total 200

Note: The case reports of the students carried out during the course shall also be considered for the oral examination.
ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

Instructions:
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 dynamistic 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 departments, but also enhance the confidence of the students when they will be attending specialty clinics.

FOURTH B.H.M.S.

A. Theory:
In addition to the syllabus of First B.H.M.S, Second B.H.M.S and Third B.H.M.S, 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.
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 Miasms – 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 materia 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 of patient’s expressions;
   (2) nosological diagnosis;
   (3) analysis and evaluation of the symptoms, miasmatic diagnosis and portraying the totality of symptoms;
   (4) individualisation of the case for determination of the simillimum, 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 repertorial 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;

       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 100
HOMOEOPATHIC MATERIA MEDICA

Instructions:

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

II 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 applied.

III (a) The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or inter-relationship;
(b) 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.

IV (a) 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 relationship;
(b) Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline, emphasizing only their most salient features and symptoms.

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

(VI) (a) While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned;
(b) The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself 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 his burden as far as formal examinations are concerned;
(c) Application of Materia Medica should be demonstrated from case-records in the outdoor and the indoor;
(d) Lectures on comparative Materia Medica and therapeutics as well as tutorials should be integrated with lectures on clinical medicine;

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

VIII (a) 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 detail study;
(b) 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 details during this curriculum, general topics should be taught in all the classes;
(c) The medicines are to be taught under the following headings, namely:–
(1) Common name, family, habitat, parts used, preparation, constituents (of source material).
(5) 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).

**Fourth B.H.M.S**

In addition to the syllabus of First, Second and Third BHMS including the medicines taught as per the Appendices I and II, the following additional topics and medicines are included in the syllabus for the Fourth BHMS examination.

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

B. Medicines indicated in Appendix-III shall be taught in relation to the medicines of Appendices-I and II for comparison wherever required.

### APPENDIX-III

<table>
<thead>
<tr>
<th>No.</th>
<th>Medicine Name</th>
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<tr>
<td>1</td>
<td>Abies canadensis</td>
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<td>Jonosia asoca</td>
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<td>Abies nigra</td>
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<td>Justicia adhatoda</td>
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<td>Carbo animalis</td>
<td>72</td>
<td>Ocimum sanctum</td>
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<tr>
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<td>Solonacae family</td>
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C. Practical or clinical: Each student shall maintain a journal having record of ten acute and ten chronic case takings.
D. Examination:
1. Theory:
   1.1 Number of papers-02
   2.1 Marks: 200

2.1.1 Distribution of marks:
   2.1.2 Paper-I: Topics of First, Second and Third B.H.M.S. — 100 Marks
   2.1.3 Paper-II: Topics of IV B.H.M.S. — 100 Marks

2. Practical including viva voce or oral:
   2.1. Marks: 200
   2.2. Distribution of marks;

   | Case taking and Case Processing of one long case | 60 |
   | Case taking of one short case                   | 20 |
   | Maintenance of practical record or journal      | 20 |
   | Viva voce (oral)                                | 100|

   Total                                         200
REPERTORY

Instructions:
I (a) Repertorisation is not the end but the means to arrive at the simillimum with the help of materia medica, based on sound knowledge of Homoeopathic Philosophy;
(b) Homoeopathic materia medica is an encyclopedia of symptoms. No mind can memorize all the symptoms or all the drugs with their gradations;
(c) The repertory is an index and catalogue of the symptoms of the materia medica, neatly 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 practice Homoeopathy without the aid of repertories.

II (a) Each repertory has been compiled on distinct philosophical base, which determines its 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 student to learn scope, limitations and adaptability of each repertory.

Third B.H.M.S
A. Theory:
1. Repertory: Definition; Need; Scope and Limitations.
2. Classification of Repertories
3. Study of different Repertories (Kent, Boenninghausen, Boger-Boenninghausen):
   (h) History
   (i) Philosophical background
   (j) Structure
   (k) Concept of repertorisation
   (l) Adaptability
   (m) Scope
   (n) Limitation(s)
4. Gradation of Remedies by different authors.
5. Methods and techniques of repertorisation. Steps of repertorisation.
6. Terms and language of repertories (Rubrics) cross references in other repertories and materia medica.
7. Conversion of symptoms into rubrics and repertorisation using different repertories.

9. Case taking and related topics:
   (a) case taking.
      (e) difficulties of case taking, particularly in a chronic case.
      (f) types of symptoms, their understanding and importance.
      (g) importance of pathology in disease diagnosis and individualisation in relation to study of repertory.
10. Case processing
    (a) analysis and evaluation of symptoms
    (b) miasmatic assessment
    (c) totality of symptoms or conceptual image of the patient
    (d) repertorial totality
    (e) selection of rubrics
    (f) repertorial technique and results
    (g) repertorial analysis
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 & Boenninghausen’s repertories.

Note: There will be no Examination in the subject in Third B.H.M.S.
Fourth B.H.M.S
A. Theory:
   1. Comparative study of different repertories (like Kent’s Repertory, Boenninghausen’s Therapeutic Pocket Book and Boger- Boenninghausen’s Characteristic Repertories, A Synoptic Key to Materia Medica).
   2. Card repertories and other mechanical aided repertories– History, Types and Use.
   3. Concordance repertories (Gentry and Knerr)
   4. Clinical Repertories (William Boericke etc.)
   5. An introduction to modern thematic repertories- (Synthetic, Synthesis and Complete Repertory and Murphy’s Repertory)
   6. Regional repertories
   7. Role of computers in repertorisation and different softwares.

B. Practical or clinical:

Students shall maintain the following records, 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’s therapeutics pocket book.
   3. Five cases (pertaining to medicine) using Boger-Boenninghausen’s characteristics repertory.
   4. Five cases to be cross checked on repertories using homoeopathic softwares.

C. Examination:
There will be examination of repertory only in Fourth B.H.M.S (not in III BHMS).

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:

<table>
<thead>
<tr>
<th>Marks</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2.1. One long case</td>
</tr>
<tr>
<td>2.2.2. One short case</td>
</tr>
<tr>
<td>2.2.3. Practical record or journal</td>
</tr>
<tr>
<td>2.2.4. Viva Voce (Oral)</td>
</tr>
</tbody>
</table>

   ------

   Total 100
COMMUNITY MEDICINE

Instructions:

I (a) Physician’s 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 medicine 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) Instructions in this course shall be given by lectures, practicals, seminars, group discussions, demonstration and field studies.

Third B.H.M.S

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
(i) Food in relation to health and disease
(j) Balanced diet
(k) Nutritional deficiencies, and Nutritional survey
(l) Food Processing
(m) Pasteurisation of milk
(n) Adulteration of food
(o) 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- insecticides, disinfection, Insects in relation to disease, Insect control.

6. Occupational health

7. Preventive medicine in pediatrics and geriatrics

Fourth B.H.M.S
A. Theory:
1. Epidemiology

(a) Principles and methods of epidemiology
(b) Epidemiology of communicable diseases:
   - General principles of prevention and control of communicable diseases;
(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 diseases

2. Bio-statistics

(a) Need of biostatistics 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 Programs 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 to 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. Insecticides

Field Visits

1. Milk dairy
2. Primary Health Centre
3. Infectious Diseases Hospital
4. Industrial unit
5. Sewage treatment plant
6. Water purification plant

Note:
1. For field visits, 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. Examination:

There will be examination of the subject only in Fourth B.H.M.S (and not in III BHMS). 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;  

   | Spotting       | 30 |
   | Journal or practical records (including field visit records) | 20 |
   | Viva voce (oral) | 50 |

   ------
   Total 100

- Subject for Examination for the BHMS (Degree) Course shall be as under
- Full Marks for each subject and minimum marks required for pass as follows
- As per Regulation 13(iv) Each Theory paper shall be of three hours duration.

<table>
<thead>
<tr>
<th>Exam Year</th>
<th>Name of the Subject</th>
<th>Written</th>
<th>Practical / Clinical Including Oral</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Full Marks</td>
<td>Pass Marks</td>
<td>Full Marks</td>
</tr>
<tr>
<td>1st Year</td>
<td>Homoeopathic Pharmacy (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Anatomy Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Anatomy Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physiology Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Physiology Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>TOTAL MARKS</td>
<td>500</td>
<td>250</td>
<td>500</td>
</tr>
<tr>
<td>2nd Year</td>
<td>Pathology Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Pathology Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Forensic Medicine And Toxicology (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>TOTAL MARKS</td>
<td>500</td>
<td>250</td>
<td>400</td>
</tr>
<tr>
<td>3rd Year</td>
<td>Surgery Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Surgery Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gynaecology and Obstetrics Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Gynaecology and Obstetrics Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine (sec1 &amp; 2)</td>
<td>100</td>
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<td>100</td>
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<td></td>
<td>TOTAL MARKS</td>
<td>600</td>
<td>30</td>
<td>600</td>
</tr>
<tr>
<td>4th Year</td>
<td>Practice of Medicine Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Practice of Medicine Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td></td>
<td>Homoeopathic Materia Medica Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine with Homoeopathic Philosophy Paper 1 (sec1 &amp; 2)</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Organon of Medicine with Homoeopathic Philosophy Paper 2 (sec1 &amp; 2)</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Repertory (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>Community Medicine (sec1 &amp; 2)</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td></td>
<td>TOTAL MARKS</td>
<td>800</td>
<td>400</td>
<td>700</td>
</tr>
</tbody>
</table>
27. First B.H.M.S examination.– (i) The student shall be admitted to the First B.H.M.S examination provided he has required attendance as per clause (iii) of regulation 13 to the satisfaction of the head of the college.
(ii) The First BHMS examination shall be held in the 12th month of admission.
(iii) The minimum number of hours for lecture, tutorial, demonstration or practical classes and seminars in the subjects shall be as under:-

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Subject</th>
<th>Theoretical lecture (in hours)</th>
<th>Practical or clinical or tutorial or seminars (in hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Organon of Medicine with Homoeopathic Philosophy</td>
<td>35 (including 10 for logic)</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Anatomy</td>
<td>200 (including 10 hours each for histology and embryology)</td>
<td>275 (including 30 on histology and embryology).</td>
</tr>
<tr>
<td>3.</td>
<td>Physiology</td>
<td>200 (including 50 hours for bio-chemistry)</td>
<td>275 hours (including 50 hours for Bio-chemistry).</td>
</tr>
<tr>
<td>4.</td>
<td>Pharmacy</td>
<td>100</td>
<td>70</td>
</tr>
<tr>
<td>5.</td>
<td>Homoeopathic Materia Medica</td>
<td>35</td>
<td>--</td>
</tr>
</tbody>
</table>

(iv) Full marks for each subject and the minimum number of marks required for passing the First B.H.M.S examination shall be as follows, namely:-

<table>
<thead>
<tr>
<th>Subject</th>
<th>Written</th>
<th>Practical (including oral)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>full marks</td>
<td>pass marks</td>
<td>full marks</td>
</tr>
<tr>
<td>Homoeopathic Pharmacy</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td>Anatomy</td>
<td>200</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td>Physiology</td>
<td>200</td>
<td>100</td>
<td>200</td>
</tr>
</tbody>
</table>

27A. 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 of lunch).
SECOND BHMS EXAMINATION

8. Second B.H.M.S examination.— Subject to the provisions of sub-clause (c) of clause (iii) of regulation 11, no candidate shall be admitted to the Second B.H.M.S examination unless he has passed the First B.H.M.S examination and has required attendance as per clause (iii) of regulation 13 to the satisfaction of the Head of the Homoeopathic Medical College.

(ii) The Second BHMS examination shall be held in the 24th month of admission to First BHMS.

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

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Subject</th>
<th>Theoretical lecture (in hours)</th>
<th>Practical or clinical or tutorial or seminar (in hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Pathology</td>
<td>200</td>
<td>80</td>
</tr>
<tr>
<td>2.</td>
<td>Forensic Medicine and Toxicology</td>
<td>80</td>
<td>40</td>
</tr>
<tr>
<td>3.</td>
<td>Organon of Medicine with Homoeopathic Philosophy</td>
<td>160</td>
<td>60</td>
</tr>
<tr>
<td>4.</td>
<td>Homoeopathic Materia Medica</td>
<td>160</td>
<td>60</td>
</tr>
<tr>
<td>5.</td>
<td>Surgery</td>
<td>80</td>
<td>60 (One term of three months in surgical ward and outpatient department).</td>
</tr>
<tr>
<td>6.</td>
<td>Gynaecology and Obstetrics</td>
<td>40 and 40=80</td>
<td>60 (One term of three months in gynaecology and obstetrics ward and outpatient department).</td>
</tr>
</tbody>
</table>

(iv) In order to pass the Second B.H.M.S examination, a candidate has to pass all the subjects of examination.
(v) Full marks for each subject and minimum marks required for pass are as follows, namely:-

<table>
<thead>
<tr>
<th>Subject</th>
<th>Written</th>
<th>Practical or clinical including oral</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Full marks</td>
<td>Pass marks</td>
<td>Full marks</td>
</tr>
<tr>
<td>Pathology</td>
<td>200</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>Forensic medicine and toxicology</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td>Homoeopathic materia medica</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td>Organon of medicine</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

THIRD BHMS EXAMINATION

9. Third B.H.M.S examination.- Subject to the provisions of sub-clause (a) of clause (iii) of regulation 11, no candidate shall be admitted to the Third B.H.M.S examination unless he has passed the Second B.H.M.S examination and has required attendance as per clause (iii) of regulation 13 to the satisfaction of the Head of the Homoeopathic Medical College.

(ii) The Third B.H.M.S examination shall be held in the 36th month of admission to First B.H.M.S.

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

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Subject</th>
<th>Theoretical lecture(in hours)</th>
<th>Practical or clinical or tutorial or seminars (in hours).</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Practice of medicine and Homoeopathic therapeutics</td>
<td>50</td>
<td>75</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>One term of three months each in outpatient department and inpatient department in different wards or department.</td>
</tr>
<tr>
<td>2.</td>
<td>Surgery including ENT Ophthalmology and Dental and Homoeopathic therapeutics</td>
<td>100</td>
<td>150</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>One term of three months each in surgical ward and outpatient department.</td>
</tr>
<tr>
<td>3.</td>
<td>Obstetrics and Gynaecology, Infant Care and</td>
<td>100</td>
<td>150</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>One term of three months gynaecology and obstetrics</td>
</tr>
</tbody>
</table>
(iv) In order to pass the Third B.H.M.S examination, a candidate has to pass all the subjects of examination.
(v) Full marks for each subject and minimum marks required for pass are as follows, namely:-

<table>
<thead>
<tr>
<th>Subject</th>
<th>Written</th>
<th>Practical or clinical including oral</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Full marks</td>
<td>Pass marks</td>
<td>Full marks</td>
</tr>
<tr>
<td>Surgery</td>
<td>200</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td>Gynaecology and Obstetrics</td>
<td>200</td>
<td>100</td>
<td>200</td>
</tr>
<tr>
<td>Homoeopathic Materia Medica</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td>Organon of Medicine</td>
<td>100</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>
10. Fourth B.H.M.S examination.- Subject to the provisions of sub-clause (b) of clause (iii) of regulation 11, no candidate shall be admitted to the Fourth B.H.M.S examination unless he has passed the Third B.H.M.S examination and has required attendance as per clause (iii) of regulation 13 to the satisfaction of the Head of the Homoeopathic Medical College.

(ii) The Fourth BHMS examination shall be held in the 54th month of admission to First B.H.M.S.

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

<table>
<thead>
<tr>
<th>Subject</th>
<th>Theoretical lecture (in hours)</th>
<th>Practical or clinical or tutorial classes (in hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practice of Medicine</td>
<td>120; 180; 60</td>
<td>One term of three months each in outpatient department and inpatient department respectively for case taking, analysis, evaluation and provisional prescription just for case presentation on ten cases per month.</td>
</tr>
<tr>
<td>Homoeopathic Materia Medica</td>
<td>180</td>
<td></td>
</tr>
<tr>
<td>Organon of Medicine and Homoeopathic Philosophy</td>
<td>180</td>
<td></td>
</tr>
<tr>
<td>Repertory</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Community Medicine</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

(iv) In order to pass the Third B.H.M.S examination, a candidate has to pass in all the subjects of examination.

(v) Full marks for each subject and minimum marks required for pass are as follows, namely:-

<table>
<thead>
<tr>
<th>Subject</th>
<th>Written</th>
<th>Practical or clinical including oral</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Full marks</td>
<td>Pass marks</td>
<td>Full marks</td>
</tr>
<tr>
<td>Practice of Medicine</td>
<td>200</td>
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<td>Homoeopathic Materia Medica</td>
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<td>Organon of Medicine with Homoeopathic Philosophy</td>
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<td>Repertory</td>
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<td>Community</td>
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RESULTS AND RE-ADMISSION TO EXAMINATION

11. (i) The examining body shall ensure that the results of the examination are published at the maximum within one month of the last date of examination so that students can complete the course in 5½ yrs after admission.”;

(ii) Candidates who have passed in one or more subjects need not appear in that subject or those subjects again in the subsequent examinations if the candidate passes the whole examination with in four chances including the original examination.

(iii) Facility to keep term: Not withstanding with the foregoing regulations, the students shall be allowed the facility to keep term on the following conditions:

(a) The candidate must pass the Second BHMS examination at least one term (6 months) before he is allowed to appear in the Third BHMS examination.

(b) The candidate must pass the Third BHMS examination at least one term (6 months) before he is allowed to appear in the Fourth BHMS examination.

(c) the candidate shall pass First B.H.M.S examination in all the subjects at least one term (six months) before he is allowed to appear in the Second B.H.M.S examination provided that he has passed in the subjects of Anatomy and Physiology (including Biochemistry) examinations two terms (twelve months) before he is allowed to appear in the Second B.H.M.S examination.

(iv) A candidate who appears at First B.H.M.S examination, Second B.H.M.S examination, Third B.H.M.S examination or Fourth B.H.M.S examination but fails to pass in the subject or subjects shall be re-admitted to the next examination in the subject or subjects (theory and practical or clinical including oral or practical or clinical wherein he has failed).

(v) Special classes, seminars, demonstrations, practical, tutorials etc. shall be arranged for the repeaters in the subject in which they have failed before they are allowed to appear at the next examination, in which attendance shall be compulsory.

(vi) If a candidate fails to pass in all the subjects with in four chances in examinations, he shall be required to prosecute a further course of studying all the subjects and in all parts for one year to the satisfaction of the head of the college and appearing for examination in all the subjects.

Provided that if a student appearing for the Fourth BHMS examination has only one subject to pass at the end of prescribed chances, he shall be allowed to appear at the next examination in that particular subject and shall complete the examination with this special chance.

(vii) The examining body may under exceptional circumstances, partially or wholly cancel any examination conducted by it under intimation to the Central Council of Homoeopathy and arrange for conducting re-examination in those subjects within a
(viii) 2 The University or examining authority shall have the discretion to award grace marks at the maximum to ten marks in total if a student fails in one or more subjects.

212. Examiners.– (i) No person other than the holder of qualification prescribed for the teaching staff in the Homoeopathy Central Council (Minimum Standards Requirement of Homoeopathic Colleges and attached Hospitals) Regulations, 2013 (as amended from time to time) shall be appointed as an internal or external examiner or paper-setter or moderator for the B.H.M.S Degree Course:

Provided that, -

(a) no such person shall be appointed as an examiner unless he has at least three years’ continuous regular teaching experience in the subject concerned, gained in a degree level Homoeopathic Medical College.

(b) internal examiners shall be appointed from amongst the teaching staff of the Homoeopathic Medical College to which the candidate or student belongs.

(c) A paper setter may be appointed as an internal or external examiner.

(ii) The criteria for appointing the Chairman or paper-setter or moderator shall be as follows, namely:–

1. Chairman: Senior most person from amongst the examiners or paper-setters appointed for theory and oral or practical or clinical examinations shall be appointed as Chairman and the eligibility qualification for the Chairman shall be the same as for appointment of a Professor.

2. Moderator: A Professor or Associate Professor or Reader shall be eligible to be appointed as moderator:

Provided that an Assistant Professor or Lecturer with five years experience as an examiner

Shall be eligible to be appointed as moderator.

3. Paper-setter: A Professor or Associate Professor or Reader shall be appointed as a paper-setter:

Provided that an Assistant Professor or Lecturer with three years experience as an examiner shall be eligible to be appointed as Paper-setter.”.

(iii) The examining body may appoint a single moderator or moderators not exceeding three (03) in numbers moderating question papers.

(iv) Oral and practical examinations shall as a rule be conducted by the respective internal and external examiners with mutual co-operation. They shall each have 50% of the maximum marks out of which they shall allot mark to the candidates appearing at the examinations according to their performances and the mark sheet so prepared shall be signed by both the examiners of the examiners shall have the right to prepare, sign, and send mark sheets separately to the examining body together with comments. The
examining body shall take due note of such comments but it shall be declare results on the basis of the mark sheets.

(v) Every homoeopathic college shall provide all facilities to the internal and external examiners for the conduct of examination, and the internal examiner shall make all preparation for holding the examinations.

(vi) The external examiner shall have the right to communicate to the examining body his views and observations about any shortcomings or deficiencies in the facilities provided by the homoeopathic college.

(vii) He shall also submit a copy of his communication to the central council for such actions as the central council may consider fit.

GENERAL RULES FOR ADMISSION TO EXAMINATION AND SCHEME OF EXAMINATION

13 (i) The examining Body shall ensure that the minimum number of hours for lecture/demonstration/practical/seminar etc. in the subjects in each BHMS examination as specified in respective regulations are followed before allowing any Homoeopathic Medical College to send the students for University examination:

(ii) The examining body shall ensure that the students of the Homoeopathic Medical Colleges, who do not fulfill the Homoeopathy (Minimum Standards of Education) Regulation, are not sent for the University Examination.

2(iii) seventy five percent attendance at the minimum in each of the subjects (in theory and practical including clinical) for appearing in the University examinations shall be compulsory.

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

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

(vi) That the examining body shall hold examinations on such date and time as the examining body may determine. The theory and practical examination shall be held in the premises of the Homoeopathic Medical College concerned.

2(vii) There shall be a regular examination and a supplementary examination in a year and the supplementary examination shall be conducted within two months of declaration of results (including issue of mark sheets);

2(viii) For non-appearance in an examination for any reason, a candidate shall not have any liberty for availing additional chance to appear in that examination.

MISCELLANEOUS

14 (i) Authorities empowered to conduct examinations:
The Universities shall conduct the examination for the Degree Course in various States or the agencies empowered by an Act of Parliament.

(ii) Interpretation:
Where any doubt arises to the interpretation of these regulations it shall be referred to the Central Council for clarification.

(iii) Power to relax:
Where any University, or Medical institution in India which grants medical qualification, is satisfied that the operation of any of these regulations causes undue hardship in any particular case, that University or Medical Institution as the case may be, may by order, for reasons recorded in writing, dispense or relax the requirement of that regulation in such an extent and subject to such exceptions and conditions as it may consider necessary for dealing with the case in a just and equitable manner.

Provided that no such order shall be made except with the concurrence of the Central Council.

(iii) Saving Clause:
Any Diploma/Degree qualification, at present included in II or III Schedule to the Homoeopathy Central Council Act where nomenclature is not in consonance with these regulations shall cease to be recognized medical qualification when granted after the commencement of these regulations. However, this clause will not apply to the students who are already admitted to these courses before the enforcement of these regulations.

(v) Migration or transfer of students from one college to another:
(a) Migration from one college to other is not a right of a student.
(b) Migration of students from the Homoeopathic College to another Homoeopathic college in India shall be considered by the Central Council of Homoeopathy only in exceptional cases on extreme compassionate grounds, provided following criterias are fulfilled. Routine migrations on other grounds shall not be allowed;
(c) Both the college, i.e. one at which the student is studying at present and one to which migration is sought are recognised as per provisions of Homoeopathy Central Council Act.
(d) The applicant shall have passed First B.H.M.S examination.
(e) The applicant shall submit his application in the Format annexed below for migration, complete in all respects, to the principal of his college within a period of one month of passing (declaration of result) the first professional Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) examination.
(f) The applicant shall submit an affidavit stating that he shall pursue twelve months of prescribed study before appearing at second professional B.H.M.S examination at the transferee college, which shall be duly certified by the Registrar of the concerned University in which he is seeking transfer and the transfer shall be effective only after receipt of the affidavit.
(g) Migration during internship training shall be allowed on extreme compassionate grounds, provided that such migration shall be allowed only with the mutual consent of the concerned Colleges, where both the college, i.e. one at which the student is studying at present and one to which migration is sought are recognised as per provisions of Homoeopathy Central Council Act.

Note 1:

(A) All applications for migration shall be referred to Central Council of Homoeopathy by college authorities. No institution or University shall allow migrations directly without the approval of the Central Council.
(B) The Central Council of Homoeopathy reserves the right not to entertain any application except under the following compassionate grounds, namely:

(i) death of a supporting guardian;
(ii) illness of candidate causing disability supported by medical grounds certified by a recognised hospital;
(iii) disturbed conditions as declared by concerned Government in the area where the college is situated.

(C) A student applying for transfer on compassionate ground shall apply in ‘Format 1’in complete manner with requisite documents.

ANNEXURE ‘A’
(Regulation 3 (ii))

INTERNSHIP TRAINING

1. (i) Each candidate shall be required to undergo compulsory rotating internship of one year, after passing the final BHMS Examinations, to the satisfaction of the Principal of the Homoeopathic College. Thereafter only, the candidate shall be eligible for the award of Degree of Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S.) by the University.

(ii) All parts of the internship training shall be undertaken at the hospital attached to the College, and in cases where such hospital cannot accommodate all of its students for Internship then such candidates/students shall be informed in writing by the college and it shall be the responsibility of the College to ensure that each of such students is put on internship training in a Homoeopathic Hospital or dispensary run by Government or local bodies.

(ii) To enable the State Board/Council of Homoeopathy to grant provisional registration of minimum of one year to each candidate to undertake the internship, the University concerned shall issue a provisional passed certificate on passing the final BHMS examination to each successful candidate.

Provided that in the event of shortage or unsatisfactory work, the period of compulsory
internship and the provisional registration shall be accordingly extended by the State Board/Council.

(iii) Full registration shall only be given by the State Boards if the BHMS degree awarded by the University concerned is a recognized medical qualification as per Section 13 (1) of the Act, and Board shall award registration to such candidates who produce certificate of completion or compulsory rotating internship of not less than one year duration from the Principal of College where one has been a bonafide student which shall also declare that the candidate is eligible for it.

(iv) The internee students shall not prescribe the treatment including medicines, and, each of them shall work under the direct supervision of Head of Department concerned and/or a Resident Medical Officer. No intern student shall issue any medicolegal document under his/her signatures.

2(v) [omitted].

2. The internship training shall be regulated by the Principal in consultation with concerned Heads of Departments and R.M.O. as under:-

(i) Each internee student shall be asked to maintain a record of work which is to be constantly monitored by the Head of concerned Department and/or Resident Medical Officer under whom the internee is posted. The scrutiny of record shall be done in an objective way to update the knowledge, skill and aptitude of internee.

2(ii) (a) The stress during the internship training shall be on case taking, analysis and evaluation of symptoms, nosological and miasmatic diagnosis, totality of symptoms, repertorisation and management of sick people based on principles of Homoeopathy;

(b) The Principal or Head of the College in consultation with heads of concerned clinical departments (including Organon of Medicine, Materia Medica and Repertory) shall make medical units having integration of teaching faculty of concerned departments to regulate internship training to be given to each student;

(c) Weekly seminars shall be conducted wherein interns in rotation be given a chance to present their cases for discussion and concerned teachers shall assess performance of each of interns;

(d) Resident Medical Officer shall co-ordinate with teachers concerned in conduct of weekly seminars.

(iii) rotation of intern students shall be as under:

1(a) Practice of Medicine – 8 Months wherein internee will be rotated in each Psychology, Respiratory, Gastro – intestinal, Endocrinology, Skin and V.D., Loco-motor, Cardiology, Paediatrics sections.

(b) Surgery – 1 month.

(c) Obstetrics & Gynaecology -2 Months [1 month each (including
Reproductive & child health care).

(d) Community Medicine (including PHC/CHC) - 1 month.

(iv) Each internee shall be exposed to clinicopathology work to acquire skill in taking samples and doing routine blood – examination, blood smear for parasites, sputum examination, urine and stool examination. Students shall be trained to correlate laboratory findings with diagnosis and management of sick people.

(v) Each internee shall be given opportunities to learn the diagnostic techniques like x-rays, Ultrasonography, E.C.G., Spirometer and other forthcoming techniques and co-relate their findings with diagnosis and management of cases.

(vi) Each internee student shall be given adequate knowledge about issuing of medico-legal certificates including medical and fitness certificates, death certificates, birth certificates, court producers and all of such legislation’s be discussed which were taught in curriculum of Forensic Medicine.

(vii) Each internee shall maintain records of 40 acute and 25 chronic cases complete in all manner including follow up in Practice of Medicine, record of 5 antenatal check-up and 3 delivery cases attended by him/her in Department of Obstetrics and 3 cases of Gynaecology; records of 5 surgical cases assisted by him (and demonstration of knowledge of dressings) in Surgery department, and records of knowledge gained in Primary Health Centres, Community health Centres, various health programmes.

2(viii) [Omitted]

(ix) Each internee shall be given a liberty to choose an elective assignment on any subject, and complete out-put shall be furnished in writing by the internee in respect of elective assignment to the Principal of the College within internship duration.

(x) Each intern shall be posted on duty in such a manner that each of them attend at least 15 days in O.P.D. and 15 days in I.P.D. at least in each month (except for duty in Community Medicine, and attend the other parts of duty including self-preparation in Library.

(xi) Each intern-student shall be made to learn importance of maintaining statistics and records, intern-student shall also be familiarized with research methodology.
3. (i). Each internee shall have not less than 80% of attendance during the internship training.
   (ii). Each internee shall be on duty of at least 6 hrs. per day during the compulsory internship training.

2. **Annexure -‘B’**
   (See regulation 6)
   Educational Tour

Components:
- Number of Students:
- Name of teachers accompanying students:
- What the tour is about- an overview:
- Prerequisites –What knowledge the students must know before going for tour
- How it will be organised:
- Approaches to teaching or learning and assessment:

Aim and objective:
1. To provide the basic knowledge of practical aspects of pharmacy/ FMT/ community medicine by exposure of students to pharmaceutical labs. and HPL/ district courts/ hospitals/ milk dairies/ PHC/ I.D. Hospitals/ industrial units/ sewage treatment plants/ water purification plants as the case may be.
2. To inspire students for their involvement in study during the said visits to learn the related procedures.
3. To provide the platform for evaluation of their skill and knowledge by interactive methodology.
4. To infuse confidence amongst students about homoeopathy, its future and their career.
5. To provide interaction between students, induce decision making skills and to motivate them for better vision about their future.
6. To improve cognitive skills (thinking and analysis).
7. To improve communication skills (personal and academic).

Learning outcomes:
1. To be more than a wish list objectives, need to be realistic, pragmatic, understandable and achievable.
2. The focus should be on what students will be able to do or how they will show that they know, and how this will help in their career and individual growth.
3. Knowledge we want the students to have by the end of the course.
4. Skills we want the students to master by the end of the course.
5. Attitudes we want students to demonstrate at the ends of the course.

Note: It shall be an essential part of the Journal on the subject a viva- voice can be put in respect of it.

Resources
1. Essential and recommended text books.
2. Journals and other readings.
3. Equipment and apparatus.

Visit record
1. Places visited with photographs
2. Programmes organised during visit.

Assignment or project report
1. Description of assignments.
2. Due dates of assignments.
3. Preparation method for the project report
   (i) Purpose.
   (ii) Schedule.
   (iii) Places visited.
   (iv) Details of visit.
   (v) Summary of achievements or learnings.

Format-1
{See regulation 14(v)}

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<th>Migration of Mr./Miss</th>
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<tr>
<td>_____________________</td>
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<tr>
<td>College ______________________</td>
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1. Date of admission in First B.H.M.S course
2. Date of passing First B.H.M.S University examination
3. Date of application
4. No objection certificate from relieving college (enclosed) - Yes/No
5. No objection certificate from relieving University (enclosed) – Yes/No
6. No objection certificate from receiving college (enclosed) - Yes/No
7. No objection certificate from receiving University (enclosed) – Yes/No
8. No objection certificate from State Government wherein the relieving college is located – Yes/No.
9. Affidavit, duly sworn before First Class Magistrate containing an undertaking that “I will study for full twelve months in existing class of B.H.M.S course in transferred Homoeopathic Medical College before appearing in the Ilnd Professional University examination” (enclosed) - Yes/No
10. Reasons for migration in brief (please enclose copy of proof) - Yes/No
11. Permanent address: ___________________________”.

*****       *****       *****       *****       *****       *****

Note: - The principal regulations were published in the Gazette of India, Extraordinary Part III, Section 4 vide number 7-1/83/CCH dated the 11th May, 1983 and subsequently amended vide :-
1. 12-13/87-CCH (Pt. II) dated the 24th September, 2003; and
2. 12-4/2000-CCH (Pt.-I) dated the 13\textsuperscript{th} June, 2005.

1A. Amended in June, 2005.
2. Amended in July, 2015

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