

7. In the principal regulations, for regulation 5, the following regulation shall be substituted, namely:—

"5. Subjects.—Subjects for study and examination for the B.H.M.S (Degree) Course shall be as under, namely:—

SLNo	Name of the Subject	Subject taught during	Holding of examination
1.	Anatomy	First B.H.M.S.	At the end of First B.H.M.S.
2.	Physiology	First B.H.M.S.	At the end of First B.H.M.S.
3.	Organon of Medicine with Homoeopathic Philosophy	First B.H.M.S., Second B.H.M.S., Third B.H.M.S and Fourth B.H.M.S.	At the end of Second, Third and Fourth B.H.M.S.
4.	Homoeopathic Pharmacy	First B.H.M.S.	At the end of First B.H.M.S.
5.	Homoeopathic Materia Medica	First B.H.M.S., Second B.H.M.S., Third B.H.M.S and Fourth B.H.M.S.	At the end of Second, Third and Fourth B.H.M.S.
6.	Pathology	Second B.H.M.S.	At the end of Second B.H.M.S.
7.	Forensic Medicine and Toxicology	Second B.H.M.S.	At the end of Second B.H.M.S.
8.	Practice of Medicine	Third B.H.M.S and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.
9.	Surgery	Second B.H.M.S. and Third B.H.M.S.	At the end of Third B.H.M.S.
10.	Gynecology and Obstetrics	Second B.H.M.S. and Third B.H.M.S.	At the end of Third B.H.M.S.
11.	Community Medicine	Third B.H.M.S and Fourth B.H.M.S.	At the end of Fourth B.H.M.S.
12.	Repertory	Third B.H.M.S and Fourth B.H.M.S.	At the end of Fourth B.H.M.S."

8. In the principal regulations, for regulation 6, the following regulation shall be substituted, namely:—

"6. Syllabus for degree course. — The following shall be the syllabus for B.H.M.S (Degree) Course.

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.

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- (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 embryonic 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

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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-	<u>Marks</u>
2.2.1. Knowledge of dissected parts-	20
2.2.2. Viscera	20
2.2.3. Bones	20
2.2.4. Surface Anatomy	10
2.2.5. Spotting(including Radiology and Histology)	20
2.2.6. Maintenance of Practical record or journal and dissection card	10
2.2.7. Viva Voce (Oral)	100
Total	<u>200</u>

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;

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(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

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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)

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23. Physiology of sleep
24. Cerebro-spinal fluid (CSF)
25. Autonomic Nervous System (ANS)

X. Special senses:

Eye : Photochemistry of vision, Visual pathway, Pupillary reflexes, Colour vision, Errors of refraction

1. 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
3. Collection of Blood samples.
4. Estimation of Haemoglobin Concentration
5. Determination of Haematocrit
6. Haemocytometry
7. Total RBC count
8. Determination of RBC indices

Advised

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:

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

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Advised

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;

Marks

2.2.1. Experiments

50

2.2.2. Spotting

30

2.2.3. Maintenance of Practical
record/Journal

20

2.2.4. Viva Voce (Oral)

100

Total

200

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.

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
- 1.3. Brief life history and contributions of early pioneers of homoeopathy like C.V. Boenninghausen, J.T. Kent, C. Hering, Rajendra Lal Dutta, M.L. Sircar
- 1.4. History and Development of Homoeopathy in India, U.S.A. and European countries
- 1.5. Fundamental Principles of Homoeopathy.
- 1.6. Basic 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 lectures 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.

SECOND B.H.M.S.

A. Theory:

1. Aphorisms 29-104 including foot notes of Organon of Medicine (5th & 6th Editions translated by R.E. Dudgeon and W. Boericke).
2. Homoeopathic philosophy:
 - 2.1. Chapters of Philosophy books of J.T. Kent (Chapters 1 to 17, 23 to 27, 31 to 33), Stuart Close (Chapters- 8, 9, 11, 12) and H.A. Roberts (Chapters 3, 4, 5, 6, 8, 9, 11, 17, 18, 19, 20), related to Aphorisms 29-104 of Organon of Medicine
 - 2.2. Symptomatology:

Details regarding Symptomatology are to be comprehended by referring to the relevant aphorisms of organon of medicine and chapters of the books on homoeopathic philosophy.
 - 2.3. Causations:

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

(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 similimum, prognosis, general management including diet and necessary restrictions on mode of life of the individual patients;
- (5) state of susceptibility to formulate comprehensive plan of treatment;
- (6) order of evaluation of the characteristic features of the case would become stepping stone for the 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;

	<u>Marks</u>
2.2.1. Case taking and case processing of a long case	30
2.2.2. Case taking and case processing of a short case	10
2.2.3. Maintenance of practical record or journal	10
2.2.4. Viva Voce (oral)	50

Total	<u>100</u>

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.
4. Homoeopathic Pharmaceutical Instruments and appliances.

III. Homoeopathic Pharmaceutics:

1. Mother tincture and its preparation – old and new methods.
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.
9. Pharmaconomy – routes of homoeopathic drug administration.
10. Dispensing of medicines.
11. Basics of adverse drug reactions and pharmaco-vigilance.

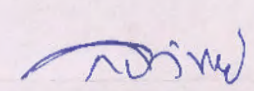
IV. Pharmacodynamics:

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);
 6. Medicinal and Toilet Preparations (Excise Duties) Act, 1955 (16 of 1955).
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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.
12. Preparation of external applications – lotion, glycerol, liniment, ointment.
13. Laboratory methods – sublimation, distillation, decantation, filtration, crystallisation.
14. Writing of prescription.
15. Dispensing of medicines.
16. Process of taking minims.
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.
19. Preparation of mother tincture – maceration and percolation.
20. Collection of 30 drugs for herbarium.
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.
4. Preparation of mother tincture – maceration and percolation.

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 Kinngdom

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*

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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.

B. 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;

	<u>Marks</u>
2.2.1. Experiments	15
2.2.2. Spotting	20
2.2.3. Maintenance of practical records or journal	10

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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 Medica
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.

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 | 14. Bryonia alba |
| 2. Aethusa cynapium | 15. Calcarea carbonica |
| 3. Allium cepa | 16. Calcarea fluorica |
| 4. Aloe socotrina | 17. Calcarea phosphoric |
| 5. Antimonium crudum | 18. Calcarea sulphurica |
| 6. Antimonium tartaricum | 19. Calendula officinalis |
| 7. Apis mellifica | 20. Chamomilla |
| 8. Argentum nitricum | 21. Cina |
| 9. Arnica Montana | 22. Cinchona officinalis |
| 10. Arsenicum album | 23. Colchicum autumnale |
| 11. Arum triphyllum | 24. Colocynthis |
| 12. Baptisia tinctoria | 25. Drosera |
| 13. Bellis perrenis | 26. Dulcamara |

- | | |
|----------------------------|--------------------------|
| 27. Euphrasia | 39. Natrum muriaticum |
| 28. Ferrum phosphoricum | 40. Natrum phosphoricum |
| 29. Gelsemium | 41. Natrum sulphuricum |
| 30. Hepar sulph | 42. Nux vomica |
| 31. Hypericum perforatum | 43. Pulsatilla |
| 32. Ipecacuanha | 44. Rhus toxicodendron |
| 33. Kali muriaticum | 45. Ruta graveolens |
| 34. Kali phosphoricum | 46. Silicea |
| 35. Kali sulphuricum | 47. Spongia tosta |
| 36. Ledum palustre | 48. Sulphur |
| 37. Lycopodium clavatum | 49. Symphytum officinale |
| 38. Magnesium phosphoricum | 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 B.H.M.S. 50 Marks
 - 1.3.2. Topics of II B.H.M.S. 50 Marks

2. Practical including viva voce or oral:

2.1. Marks: 100	
2.2. Distribution of marks;	<u>Marks</u>
2.2.1. Case taking and Case processing of 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 (oral)	50

Total	<u>100</u>

~~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 -

Sl. No.	Group studies
1	Baryta group
2	Calcarea group
3	Magnesia group
4	Natrum group
5	Compositae family
6	Ranunculaceae family
7	Solonaceae family

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,

Marks

2.2.1. Case taking and Case

processing of one long case

60

2.2.2 Case taking of one short case

20

2.2.3 Maintenance of practical
record or journal

20

2.2.4. Viva voce (oral)

100

Total

200

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.

It is to summarise, all the topics in the general and systemic pathology and microbiology should be correlated, at each lecture, with homeopathic principles so that the importance of pathology in Homeopathic 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 lipidosi
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

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e female genitalia and breast.

e, ENT and neck

respiratory system.

9. Diseases of the oral cavity and salivary glands.
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
14. Diseases of glands-thymus, pituitary, thyroid, and parathyroid, adrenals, parotid.
15. Diseases of the skin and soft tissue.
16. Diseases of the musculo-skeletal system.
17. Diseases of the nervous system.
18. Leprosy

(c) Microbiology

(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
13. Clinical aspect of immuno-pathology.

(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

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6. Gram negative aerobic cocci, eg. neisseria, moraxella, kingella.
7. Gram positive aerobic bacilli, eg. corynebacterium, bacillus anthrax, cereus subtilis, mycobacterium tuberculosis, M. leprae, actinomycetes; nocardia, organism of enterobacteriac group.
8. Gram positive anaerobic bacilli, eg. genus clostridium, lactobacillus.
9. Gram negative anaerobic bacilli, eg. bacteroides, fragilis, fusobacterium.
10. Others like- cholerae vibrio, spirochaetes, leptospirae, mycoplasma, chlamydiae, rickettsiae, yersinia and pasteurilla.

(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).
3. Helminths – (1) Cestodes (tapeworms)- Echinococcus granulosus, Taenia solium, Taenia saginata, (2) Trematodes (Flukes): Paragonimus westermani, Schistosoma mansoni, Schistosoma haematobium (3) Nematodes- Ancylostoma duodenale, Ascaris lumbricoides, Enterobius vermicularis, Strongyloides, Stercoralis, Trichuris trichiura, Brugia malayi, Dracunculus medinensis, Loa loa, Onchocerca volvulus, Wuchereria bancroftii).

(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, chikungunya virus
 - (i) Miscellaneous virus:
 - (i) arena virus

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- (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.
1. Teaching of gross pathological specimens for each system.
2. Histopathological techniques, e.g. fixation, embedding, sectioning and staining by common dyes and stains.
3. 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 Meat 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

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- 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 spottings) |
| 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:

1 (a) Medico-legal examination is the statutory duty of every registered medical practitioner, whether he is in private practice or engaged in Government sector and in the present scenario of growing consumerism in medical practice, the teaching of Forensic Medicine and Toxicology to the students is highly essential;

(b) This learning shall enable the student to be well-informed about medico-legal responsibility in medical practice and he shall also be able to make observations and infer conclusions by logical 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

- Definition of forensic medicine.
- History of forensic medicine in India.
- Medical ethics and etiquette.
- Duties of registered medical practitioner in medico-legal cases.

2. Legal procedure

- Inquests, courts in India, legal procedure.
- Medical evidences in courts, dying declaration, dying deposition, including medical certificates, and medico-legal reports.

3. Personal identification

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

4. Death and its medico-legal importance

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

5. Injury and its medico-legal importance

Mechanical, thermal, firearm, 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 Toiletary 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

SUBJECT: PRACTICE OF MEDICINE

- Course of Study : 3 years

- i.e. in II (Second) BHMS
- in III (Third) BHMS and
- in IV (Fourth) BHMS

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

IIND BHMS

1. Clinical Methods of Examination of patients as whole:
2. Respiratory diseases - Respective portion in surgery
3. Alimentary Tract and Pancreas Disease- Respective portion in surgery

IIIRD BHMS

1. Genetic Factors - Chronic Diseases and Miasms Dept. of Organon & Philosophy
2. Nutritional diseases -Nutrition, Hygiene in Dept. of Community Medicine
3. Immunological Factors in Diseases -Epidemiology in Dept. of Community medicine
4. Climatic Factors in Diseases
5. Metabolic Disease
6. Endocrinal Diseases -Menstrual Disorder in Dept. of Gynaecology

The above all need follow up with respective Therapeutics Topics also.

IVTH BHMS

1. Liver and Biliary Tract Diseases
2. Hematological Diseases
3. Cardiovascular system Diseases
4. Kidneys & Urinary Tracts Diseases
5. Water and Electrolytes balance Diseases
6. Connective Tissue Disorders
7. Bones and Joints Disorders
8. Skin Diseases
9. CNS & peripheral nervous system-Mental Diseases
10. Acute Emergencies including poisonings
11. Paediatrics

The above in these terms will require a follow up of strong and emphatic training on Homoeopathic Therapeutics for the same.

It will be conducted in IV (fourth) BHMS at the end of 3 years of course of study in Theoretical and Practical aspects of Medicine.

Eligibility for examination shall include submission of 10 complete case histories, 5 each prepared in III and IV BHMS.

PRACTICAL & CLINICAL EXAMINATION

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

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

GENERAL GUIDANCE: THERAPEUTICS

Homoeopathy has a distinct approach to disease. Concept of individualization and concept of chronic miasm makes it distinct.

It recognizes an ailing individual by studying him as a whole rather than in terms of sick parts. It emphasizes that study of man from the state of Health i.e. DISPOSITION DIATHESIS DISEASE, taking into account all predisposing and precipitating factors i.e. **FUNDAMENTAL CAUSE, MAINTAINING CAUSE & EXCITING CAUSE.**

Hahnemann's theory of chronic miasm provides us an evolutionary understanding of the chronic disease: PSORA-SYCOSIS-SYPHILIS & acute manifestations of Chronic Disease. Evolution of the natural disease shall be comprehended in the light of theory of chronic miasm. How our current knowledge of Pathology and clinical medicine assist in defining this must be demonstrated.

Study of therapeutics does not mean simply list of specifics. For the clinical condition, but teaching of applied Materia Medica. Here we demonstrate how various drugs would come up in psoric, sycotic, tubercular or syphilitic state of the clinical conditions. Thus emphasis would be in correlating pace of evolution of disease, peculiar, respectively and cluster of characteristics.

Thus teaching of therapeutics of Hypertension would demand delineation of various phases of hypertension taking into account what is happening to the STRUCTURE and what kind of forms are thrown off. Psoric phase would be characterized by LABILE hypertension which shoots up under stress especially with rise in systolic and manifesting flushes and emotional disturbances.

This would draw our attention to drugs like GELSEMIUM, GLONINE, FERRUM MET etc. This is the functional phase. Tubercular hypertension would be characterized by fairly high systolic and diastolic B.P. oscillating wildly at higher range, manifesting bleeding like epistaxis etc. with erratic mental state. This will draw attention to PHOSPHORUS, LACHESIS etc.

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

Thus teachings of THERAPEUTICS would essentially demand an effective correlation of:

1. Knowledge of clinical/medicine/Surgery
2. Appreciation of Natural disease its evolution in the light of Theory of chronic miasm. Thus correlation with Organon Philosophy.
3. Applied Materia Medica and Repertory:

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

Correlation with MATERIA MEDICA and with REPERTORY.

PAPER I : As per II and III BHMS

PAPER II: As per the syllabus of IV BHMS

PAPER III: Homoeopathic Therapeutic

SUBJECT: COMMUNITY MEDICINE

1. Introduction to preventive and social medicine concept, man and society; aim and scope of preventive and social medicine, social causes of disease and social problems or the sick, relation of economic factors and environment in health and disease.

2. Physiological hygiene:-

1. Food and nutrition-food in relation to health and disease. Balanced diets. Nutritional deficiencies and nutritional survey. Food processing, pasteurization of milk. Adulteration of food and food inspection, Food poisoning.
2. Air, light and sunshine.
3. Effect of climate-humidity temperature, pressure and other meteorological
4. conditions-comfort zone, effect of overcrowding.

ADRIAN

5. Personal hygiene- (Cleanliness, rest, sleep, work) Physical exercise and training care of health in tropics.

3. Environmental sanitation:

1. Definition and importance.
2. Atmospheric pollution-purification or air, air sterilization, air borne diseases.
3. Water supplies-sources and uses, impurities and purification. Public water supplies in urban and rural areas. Standards of drinking water, water borne diseases.
4. Conservancy-Methods in villages, towns and cities, septic tanks, dry earth latrines-water closets. Disposal of sewage, disposal of the deceased, disposal of refuse incineration.
5. Sanitation of fairs and festivals.
6. Disinfection disinfectants, deodorants, antiseptics, germicides. Methods of disinfection and sterilization.
7. Insects-insecticides and disinfection-insects in relation to disease. Insect control.
8. Protozoal and helminthic diseases Life cycle of protozoan and helminthes, their prevention.

4. Medical Statistics

Principles and elements of vital statistics

Preventive Medicine

1. General principles of prevention and control of communicable diseases. Plague, Cholera, Small Pox Diphtheria, Leprosy, Tuberculosis, Malaria, Kala-Azar, Filariasis, Common viral diseases e.g. Common Cold Measles, Chicken Pox, Poliomyelitis, Infective Hepatitis, Helminthic infections, Enteric fever, dysenteries and also animal diseases transmissible to man. Their description and methods of preventive spread by contact, by droplet infection by environmental vehicles, (water, soil, food insects, animals, foundries, prophylaxis and vaccination).
2. General principles of prevention and control of non-communicable diseases e.g. obesity, hypertension etc.

Natural history of disease

5. Maternal and Child Health, school health services, health education, mental hygiene-elementary principles: school medicine its aim and methods.
6. Family Planning Demography, channels of communication, National Family planning programme, knowledge, attitudes regarding contraceptive practices, Population and growth control.
7. Public health administration and international health relation.
8. Homoeopathic concept of prophylaxis, vaccination, Immunology and personal hygiene.

N.B: Field demonstration-water purification plant, infectious diseases hospital etc.

SUBJECT: SUBJECT: ORGANON OF MEDICINE AND PRINCIPLES OF HOMOEOPATHIC PHILOSOPHY & PSYCHOLOGY

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

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

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

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

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

1. History of Medicine.
2. History of Homoeopathy, its spread to different countries.
3. Life and living environment.
4. Concepts of health and factors modifying it.
5. Concept of susceptibility and vital reaction.
6. Concept of disease and totality of symptoms.
7. Concepts of Drug, Medicine and remedy.
8. Concept of Cure and Disease and Drug relationship.
9. Scope and limitations of different modes of employing medicines in disease Antipathy, Allopathy and Homoeopathy.
10. Various methods of classification and evaluations of symptoms common and characteristic General and particular.
11. Concepts of incurable disease, suppression and palliation.
12. Prophylactics.
13. Scope and limitations of Homoeopathy.
14. Remedy response, prognosis after administration of a remedy.
15. Principles and criteria for repetition and selection of potency.

Paper I Topics from 1-15

Paper II- Topics from Kent's lectures, Stuart close and Roberts Philosophy, Case taking at bedside.

APPENDIX

Purpose of the Homoeopathic Case taking is not merely collecting the symptoms but comprehending the person in wider dimensions, with correct appreciation of the causes for the illness.

The adequacy in Case Taking and Physical examination should be judged from the following angle:-

1. To carry out successful individualization of the case and to conclude about state of the susceptibility.
2. Finding out a simillimum with correct potency and doses.
3. Prescribing proper diet to the patient.
4. Advising the management of the case.
5. The pathology and homoeopathic prognosis.

SUBJECT: MATERIA MEDICA

List of drugs included in the Syllabus of IV B.H.M.S. examination:-

1. Abies can
2. Abies nig
3. Abroma Augusta
4. Abrotanum
5. Acalypha indica
6. Anthracinum
7. Bacillinum
8. Baryta mur
9. Bellis per
10. Calotropis indica
11. Capsicum
12. Carbo animalis
13. Carbo acid

Adira

14. Carrica papaya
15. Cassia saphora
16. Caulophyllum
17. Cedron
18. Cicutu virosa
19. Clematis
20. Cocculus indica
21. Coffea cruda
22. Collinsonia
23. Condurango
24. Corallium
25. Crataegus
26. Crocus sativa
27. Eupatorium per
28. Ficus religiosa
29. Flouric acid
30. Glonoine
31. Hellonius
32. Hydrastis can
33. Hydrocotyle as
34. Jonosia asoka
35. Justicia adhatoda

36. Lac can

37. Lac def
38. Lilium tig
39. Lithium carb
40. Lobelia inf
41. Lyssin
42. Magnesia carb
43. Magnesia mur
44. Medorrhinum
45. Melilotus a
46. Mephitis
47. Mercurius cynatus
48. Mercurius dull
49. Mezerium
50. Millifolium
51. Occimum sanct
52. Psorinum
53. Pyrogenum
54. Radium bromide
55. Rananculus bulb
56. Raphanus
57. Rathania
58. Rauwolfia serpentine
59. Rheum
60. Rhododendron
61. Rumex
62. Ruta G.
63. Sabadilla
64. Sabal Serulatta
65. Sabina
66. Sambucus
67. Sangunaria can

Min

68. Sanicula
69. Sarasaparilla
70. Spigelia
71. Squila
72. Stannum met
73. Syzygium jambolanum
74. Trillium pendulum
75. Urtica urens
76. Vaccinum
77. Variolinum
78. Veratrum viride
79. Vibrinum opulus
80. Vinca minor
81. Vipera

SUBJECT: REPERTORY

Repertorization is not the end but means to arrive to the simillimum together with Materia Medica based on sound principles of Philosophy. Homoeopathic Materia Medica is an encyclopedia of Symptoms. No mind can memorize all the symptoms or all the drugs with their characteristic gradation. The repertory is an index and catalogue of the symptoms of the Materia Medica, nearly arranged in a practical form and also indicating the relative gradation of drugs, and it greatly facilitates quick selection of indicated remedy. It is impossible to practice Homoeopathy without the aid of repertories.

Each repertory has been compiled on distinct philosophical base, which determines its structure. In order to exploit full advantage of each repertory it is important to grasp thoroughly its conceptual base and construction. This will help student to learn scope, limitations and adaptability of the repertory.

Case taking:

Difficulties of taking a chronic case. Recording of cases and usefulness of record keeping. Totality of symptoms, prescribing symptoms: uncommon peculiar and characteristic symptoms. Analysis of the case uncommon and common symptoms. Gradation and evaluation of Symptoms. Importance of Mental symptoms. Kind and sources of general symptoms. Concomitant symptoms.

Teaching of repertorisation should not merely be reduced to rubric hunting exercises. Patient is not a bundle of rubrics.

Logic of Repertory, is delivered from Organon of Medicine as such Repertory should not be taught in isolation. Due emphasis should be made to:-

- a. Learning the language of repertory i.e. meaning of rubrics in correlation with Materia Medica and clinical experiences.
- b. Correlation of Repertory with Therapeutics and Materia Medica.
 1. History and development of repertories till date.
 2. Types of repertories.
 3. Explanation of terminologies used in various repertories.
 4. Boenninghausen's therapeutic pocket book and Boger Boenninghausen's repertory.
 5. Kent's repertory.
 6. Introduction to card repertory.
 7. Specific regional repertories ALLEN'S FEVER, BELL'S DIARHOEA with their comparison.
 8. Brief introduction to puritan group of repertory as Knerr, Gentry, Robert in respect of their Clinic use.

9. Introduction to Computer Repertorization.

PRACTICAL

Students shall repertories:-

1. 10 acute cases on Kent.
2. 5 chronic cases on Kent.
3. 5 chronic cases on Boenninghausen.
4. 5 chronic cases on Bogar-Boeinninghausen.
5. 5 cases to be cross checked on computer.