



राष्ट्रीय होम्योपैथी आयोग
National Commission for Homoeopathy
HOMOEOPATHY EDUCATION BOARD

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Azadi Ka
Amrit Mahotsav



F. No.3-116/2023/NCH/HEB/PG Curr.

4196-4207

Date:

10 SEP 2024

To,

1. The Principal Secretary/Secretary, (Department of AYUSH/ ISM & H / Medical Education / Health & FW – All State & U.T.
2. The Commissioner/Director of AYUSH / ISM&H - All State & U.T.
3. The Registrars of Universities (Including Deemed Universities) having affiliated/Constituent Homoeopathic Medical Colleges - All State & U.T.
4. The Registrars, Homoeopathic Boards/Councils- All State & U.T.
5. The Principal of all the Homoeopathic Medical Colleges and Hospital (including Director, N.I.H. Kolkata & NEIAH, Shillong)
6. All Homoeopathic Associations and Federations/Society
7. All other Stake Holders/General Public.

Sub: Comments/suggestions over the draft Curriculum proposed under the National Commission for Homoeopathy (Homoeopathy Post-Graduate Degree Course- Doctor of Medicine in Homoeopathy) Regulations, 2024.-reg.

Madam/Sir,

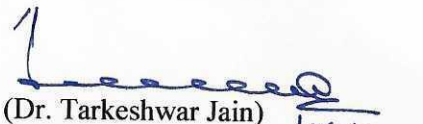
I am directed by the Competent Authority to circulate “**draft Curriculum proposed under the National Commission for Homoeopathy (Homoeopathy Post-Graduate Degree Course- Doctor of Medicine in Homoeopathy) Regulations, 2024**” through website of the National Commission for Homoeopathy (www.nch.org.in) for seeking comments/suggestions from the stake holders under section 23 sub-section (d) of G.S.R 772 (E), Ministry of Ayush, Government of India notification dated 18.12.20, for a period of 30 days with effect from 10.09.2024 to 09.10.2024.

The comments/suggestions be sent on email: heb-nch@gov.in.

This is issued with the approval of competent authority.

Thanking you.

Yours faithfully,


(Dr. Tarkeshwar Jain)
President, Homoeopathy Education Board

Encl: A/a,
Copy to:-

1. The Secretary, Ministry of Ayush, Govt. of India, Ayush Bhawan, B-Block, GPO Complex, INA, New Delhi-110023
2. The Chairperson, NCH.
3. The Secretary, NCH
4. IT Consultant for uploading on NCH website.
5. Guard File.

Template for Curriculum Document
MD Hom
(Homoeopathic Materia Medica)

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Homoeopathic Materia Medica

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Homoeopathic Materia Medica
- (ii) Fundamentals of Clinical Medicine in Homoeopathic Materia Medica
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Homoeopathic Materia Medica. Paper 1
- (ii) Homoeopathic Materia Medica. Paper 2.

III. Brief description of speciality and its relevance in homoeopathy post-graduate course.

The purpose of Post Graduate Program in Homoeopathic Materia Medica is to enable attainment of professional competency to explore in-depth the potentials of homoeopathic medicines and their clinical applications. The program intends to facilitate the post graduate students to be rational thinkers, committed research scholars and passionate teachers in homoeopathy, and be competent to provide professional services with empathy and humane approach.

This program ensure that the Post Graduate student is well acquainted with different types of Materia Medica on the basis of their philosophical background, and also the different approaches to study Homoeopathic Materia Medica. This program would develop their competency to generalize the group characteristics and individualize the members of such groups. Comparative and Clinical Materia Medica enables competency for the differentiation of drugs to be a proficient clinician.

She/he is also trained to understand the principles of research methodology, biostatistics, self-directed learning for continuous professional development, and the methods of utilizing library resources. Thus, the program focuses on methods and techniques which provide to the candidate with an entire experience of understanding Materia Medica by forming a portrait at the level of artificial disease and matching at the level of natural disease.

At the end of Post Graduate training in M.D. (Homoeopathy) Materia Medica, the Post Graduate scholar shall be able to –

- (a) Recognize the importance of Homoeopathy Materia Medica in context with national priorities and health needs of the community.
- (b) Practice Homoeopathy and application of HMM ethically and in step with the principles of the system.
- (c) Display skills as a self-directed learner, recognize continuing education needs, and select and use appropriate learning resources for Homoeopathic Materia Medica.
- (d) Demonstrate competence in basic concepts of research methodology and epidemiology and be able to critically analyze relevant published research literature in relation to HMM.
- (e) Identify social, economic, environmental, biological and emotional determinants of health in a given case, and take them into account while planning therapeutic, rehabilitative, preventive and promotive measures /strategies and incorporate in application in HMM.
- (f) Diagnose health problems and manage as per the scope of homoeopathy and HMM
- (g) Demonstrate scientific acumen by undertaking dissertation/research project using proper research methodology in HMM.
- (h) Play the assigned role in the implementation of national health programs with homoeopathy, effectively and responsibly with evolving utility of HMM.
- (i) Organize and supervise the chosen/assigned health care services demonstrating adequate managerial skills in the AYUSH clinic/hospital or in the field.
- (j) Develop skills in using educational methods and techniques as applicable to the teaching of homoeopathy Materia Medica to Homoeopathic medical students.

IV. Program Objectives. (Entrustable Professional Activities – EPAs)

Entrustable Professional Activities: EPAs

1. Explain the philosophical background, plan and construction of different HMM including source books
2. Construct and demonstrate the utility of the group study of HMM in clinical practice
3. Apply clinical HMM in systemic clinical practice including homoeo-prophylaxis
4. Construct acute, chronic and drug portrait of HMM from different sources including remedy relationship and miasm
5. Receive the Case for the purposes of clinical and person understanding of patients as needed for HMM
6. Document the Homoeopathic clinical encounter in the patient record for processing to remedial diagnosis
7. Collate data for arriving at clinical problem definition and person diagnosis for conclusion of HMM
8. Recommend and interpret investigations for completing therapeutic problem definition and applying to HMM
9. Formulate comprehensive management plans and stages at the general (e.g. Life-style change), Specific (illness related), and homoeopathic level and planning their implementation from the understanding of similimum
10. Choose and applying appropriate approaches/tools for arriving at the similimum through differential HMM
11. List specific outcomes expected from intervention based on the comprehensive management plan through general and remedy relationship
12. Gather appropriate evidence to advance patient care and modifying management plans as considered appropriate
13. Identify the stage and time for getting second opinion / expert advice to improve quality of care as per the comprehensive management plan
14. Make an oral presentation of a clinical encounter (when indicated) with special reference to HMM
15. Give or receive a patient handover to transition care responsibility (when indicated)
16. Collaborate as a member of an interprofessional team (when indicated)
17. Adhere to legal and ethical principles in professional practice.
18. Formulate implementing and assess teaching plans based on clinical encounters special reference to study of HMM
19. Conduct research relevant for continuous quality improvement of homeopathic services with special reference to HMM
20. Identify areas for continuous growth in areas relevant to the self as well as mastery of the subject and relevant skills and implementing them
21. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

IV (1). Mapping of EPAs and Domain Competencies

KS : Knowledge & Scholarship
CS : Communication skills

PC : Patient care
PBL : Practice based learning

HO : Homoeopathic Orientation
Prf : Professionalism

Sr. No	EPA	KS	PC	HO	CS	PBL	Prf
1	Explain the philosophical background, plan and construction of different HMM including source books	✓		✓			

2	Construct and demonstrate the utility of the group study of HMM in clinical practice	✓	✓	✓	✓	✓	
3	Apply clinical HMM in systemic clinical practice including homoeo-prophylaxis	✓	✓	✓	✓	✓	
4	Construct acute, chronic and drug portrait of HMM from different sources including remedy relationship and miasm	✓		✓			
5	Receive the Case for the purposes of clinical and person understanding of patients as needed for HMM	✓	✓	✓	✓	✓	✓
6	Documenting the Homoeopathic clinical encounter in the patient record for processing to remedial diagnosis	✓	✓	✓		✓	✓
7	Collate data for arriving at clinical problem definition and person diagnosis for conclusion of HMM	✓		✓		✓	✓
8	Recommend and interpreting investigations for completing therapeutic problem definition and applying to HMM	✓	✓	✓	✓	✓	✓
9	Formulate comprehensive management plans and stages at the general (e.g. Life-style change), Specific (illness related), and homoeopathic level and planning their implementation from the understanding of similimum	✓	✓	✓		✓	
10	Choose and applying appropriate approaches/tools for arriving at the similimum through differential HMM	✓	✓	✓		✓	
11	List specific outcomes expected from intervention based on the comprehensive management plan through general and remedy relationship	✓	✓	✓		✓	
12	Gather appropriate evidence to advance patient care and modifying management plans as considered appropriate	✓	✓	✓		✓	
13	Identify the stage and time for getting second opinion / expert advice to improve quality of care as per the comprehensive management plan	✓	✓	✓	✓	✓	✓
14	Make an oral presentation of a clinical encounter (when indicated) with special reference to HMM	✓		✓	✓	✓	✓
15	Give or receive a patient handover to transition care responsibility (when indicated)		✓		✓		✓
16	Collaborate as a member of an interprofessional team (when indicated)				✓		✓
17	Adhere to legal and ethical principles in professional practice		✓		✓		✓

18	Formulate, implement and assess teaching plans based on clinical encounters special reference to study of HMM	✓		✓	✓		✓
19	Conduct research relevant for continuous quality improvement of homeopathic services with special reference to HMM	✓	✓	✓		✓	✓
20	Identify areas for continuous growth in areas relevant to the self as well as mastery of the subject and relevant skills and implementing them	✓		✓		✓	✓
21	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	✓			✓	✓	✓

IV (2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

No.	EPAS	Part 1			Part 2		
		Semester 1	Semester 2	Semester 3	Semester 4	Semester 5	Semester 6
1	Explain the philosophical background, plan and construction of different HMM including source books	2 Explain the plan, philosophy and construct from source book	3 Explain philosophy plan and construct include the clinical HMM	4 Explain plan, philosophy and construction Include the commentator	4 Include the key notes and differential HMM and remedy relationship	5 Able to demonstrate independently and guide juniors	5 Guides juniors
2	Construct and demonstrate the utility of the group study of	2 Concept and philosophy of group study and process of	2 Able to organize the data based on the philosophi	3 Built a conceptual image of group indication	3 Application of group indication to different cation and anion to	3 Apply this knowledge in clinical practice	4 . Application in clinical practice

	HMM in clinical practice	building group indication	cal back ground		build individual remedy indication		
3	Apply clinical HMM in systemic clinical practice including homoeopr ophylaxis	2 Insight in to philosophy and construct of different clinical HMM	3 Evolve differential HMM based on clinical indication	3 Apply knowledge of clinical HMM in clinical practice.	3 Apply in clinical practice	4 Apply in clinical practice	5 Able to guide juniors in clinical practice with application of clinical HMM
4	Construct acute, chronic and drug portrait of HMM from different sources including remedy relationship and miasm	2 Do analysis of the symptoms and evaluation. Philosophy of drug image construction	2 Do analysis and evaluation and construct image of acute and chronic and constitutional drug images	3 Construct image and incorporate miasmatic evolution and apply in clinical practice	4 Construct the image and apply in practice	4 Add and refine the indication based on the clinical outcome	5 able to direct juniors for construction of drug image
5	Receive the Case for the purposes of clinical and person understanding of patients as needed for HMM	2 homoeopathic case receiving including clinical data	3 homoeopathic case receiving including clinical data and also incorporate evolutionary data for HMM	3 homoeopathic case receiving including clinical data and also incorporate evolutionary data for HMM	4 homoeopathic case receiving including clinical data and also incorporate evolutionary data for HMM	4 homoeopathic case receiving including clinical data and also incorporate evolutionary data for HMM	5 Can guide juniors
6	Documenting the Homoeopathic clinical encounter in the patient record for processing to remedial diagnosis	2 Able to document the data as per the direction of organon and case record of the institute	3 able to arrange the data as per analysis and evaluation for processing to person and remedy diagnosis	3 Demonstrate analysis and evaluation of clinical and homoeopathic data in 50 percent of cases	4 Demonstrate the analysis and evaluation in 50 percent of cases	4 Demonstrate the exact documentation and analysis and evaluation in 70 percent of the cases	5 Orients juniors the various steps required for accurate processing of case
7	Collating data for arriving at clinical problem definition and person	3 Analysis, evaluation, Integration and synthesis of the data	3 Analysis, evaluation, Integration and synthesis of the data to come to	4 Analysis, evaluation, Integration and synthesis of the data to come to	4 Analysis, evaluation, Integration and synthesis of the data to come to	4 Analysis, evaluation, Integration and synthesis of the data to come to clinical	5 Analysis, evaluation, Integration and synthesis of the data to come to clinical

	diagnosis for conclusion of HMM		clinical diagnosis and HMM	clinical diagnosis and HMM	clinical diagnosis and HMM	diagnosis and HMM	diagnosis and HMM
8	Recommending and interpreting investigations for completing therapeutic problem definition and applying to HMM	2 Connecting investigation and ordering for the clinical diagnosis	3 Connecting investigation and ordering for the clinical diagnosis and HMM	4 Connecting investigation and ordering for the clinical diagnosis and HMM also differential HMM	4 Connecting investigation and ordering for the clinical diagnosis and HMM also differential HMM	4 Connecting investigation and ordering for the clinical diagnosis and HMM also differential HMM	5 Connecting investigation and ordering for the clinical diagnosis and HMM also differential HMM
9	Formulating comprehensive management plans and stages at the general (e.g. Life-style change), Specific (illness related), and homoeopathic level and planning their implementation from the understanding of similimum	2 Comprehensive defining the problem and noting possible solution at the level of homoeopathy and counselling after understanding the similimum	3 Comprehensive defining the problem and noting possible solution at the level of homoeopathy and counselling after understanding the similimum	4 Comprehensive defining the problem and noting possible solution at the level of homoeopathy and counselling after understanding the similimum	4 Comprehensive defining the problem and noting possible solution at the level of homoeopathy and counselling after understanding the similimum	4 Comprehensive defining the problem and noting possible solution at the level of homoeopathy and counselling after understanding the similimum	5 Comprehensive defining the problem and noting possible solution at the level of homoeopathy and counselling after understanding the similimum
10	Choosing and applying appropriate approaches/tools for arriving at the similimum through differential HMM	2 Concept and philosophy for differential HMM	3 Concept and philosophy for differential HMM	4 Concept and philosophy for differential HMM and application to clinical practice	4 Concept and philosophy for differential HMM and application to clinical practice	4 Concept and philosophy for differential HMM and application to clinical practice	5 Concept and philosophy for differential HMM and application to clinical practice
11	Listing specific outcomes expected from	2 Able to relate to remedy response	3 Able to relate to remedy response	4 Able to relate to remedy response	4 Able to relate to remedy response	4 Able to relate to remedy response	5 Able to guide juniors

	intervention based on the comprehensive management plan through general and remedy relationship	concept and philosophy and learn the concept of remedy relationship concept and philosophy	concept and philosophy and learn the concept of remedy relationship concept and philosophy	concept and philosophy and learn the concept of remedy relationship concept and philosophy	concept and philosophy and learn the concept of remedy relationship concept and philosophy	concept and philosophy and learn the concept of remedy relationship concept and philosophy	
12	Gathering appropriate evidence to advance patient care and modifying management plans as considered appropriate And second prescription	2 Ability to gather follow up evidence for further action and second prescription and remedy relationship	3 Ability to gather follow up evidence for further action and second prescription and remedy relationship	4 Ability to gather follow up evidence for further action and second prescription and remedy relationship	4 Ability to gather follow up evidence for further action and second prescription and remedy relationship	4 Ability to gather follow up evidence for further action and second prescription and remedy relationship	5 Able to guide junior
13	Identifying the stage and time for getting second opinion / expert advice to improve quality of care as per the comprehensive management plan	2 Ability to develop insight about limitation of the self and pathy	3 Ability to define the limitation in further quality care and need for expert opinion	3 Ability to define the limitation in further quality care and need for expert opinion and choose the right one	4 Ability to define the limitation in further quality care and need for expert opinion and choose the right one and start communication and take guidance	4 Ability to define the limitation in further quality care and need for expert opinion and choose the right one and start communication and take guidance and alter management plan	5 able to pass this to juniors
14	Making an oral presentation of a clinical encounter (when indicated) with special reference to HMM	2 Ability to gather evidence of the clinical encounter and able to organize it to get insight in	3 Ability to prepare the presentation on clinical experience on the logic and outcome and able	3 Ability to prepare the presentation on clinical experience on the logic and outcome and able	4 Ability to prepare the presentation on clinical experience on the logic and outcome and able to present and receive the	4 Ability to prepare the presentation on clinical experience on the logic and outcome and able to present and receive the	5 Able to guide the juniors

		to the experience	to present and receive the feedback	to present and receive the feedback	feedback	feedback	
15	Giving or receiving a patient handover to transition care responsibility (when indicated)	2 Gather the evidence and able to define the reason for transition	2 Gather the evidence and able to create documents and communicate the reason for the transition	3 Gather the evidence and able to create documents and communicate the reason for the transition and advice on further therapeutic intervention and hmm	3 Gather the evidence and able to create documents and communicate the reason for the transition and advice on further therapeutic intervention and hmm	4 Gather the evidence and able to create documents and communicate the reason for the transition and advice on further therapeutic intervention and hmm	5 Able to guide juniors
16	Collaborating as a member of an inter-professional team (when indicated)	2 Observe the process of being member of the inter professional team and note down the quality required for the same	2 Observe the process of being member of the inter professional team and note down the quality required for the same and discuss with the facilitator	3 Observe the process of being member of the inter professional team and note down the quality required for the same and discuss with the facilitator	3 Observe the process of being member of the inter professional team and note down the quality required for the same and discuss with the facilitator	4 participate	5 Guide juniors
17	Adhering to legal and ethical principles in professional practice.	2 Get aware about	3 Note down all the experience during clinical and research session and discuss	3 Application of this in practice and getting feedback	3 Application of this in practice and getting feedback	4 Application of this in practice and getting feedback	5 Guides junior
18	Formulating, implementing and assessing teaching plans	2 Participate and get feed back	2 Participate in advance teaching and learn modern teaching	3 Translating the clinical encounter in to the teaching	3 Translating the clinical encounter in to the teaching material and	4 Evolving the teaching plan from clinic to classroom	5 Guiding juniors

	based on clinical encounter's special reference to study of HMM		technology	material and delivering	delivering and working further on feedback	and classroom to clinic	
19	Conducting research relevant for continuous quality improvement of homeopathic services with special reference to HMM	2 Learn the basic of research and drug proving	2 Application of the basic to formulate the project and synopsis	3 Scientific and evidence-based practice and data collection with review and undertaking reading	3 Scientific and evidence-based practice and data collection with review and undertaking reading and doing analysis and evaluation	3 Scientific and evidence-based practice and data collection with review and undertaking reading and doing analysis and evaluation with building up the discussion summary and conclusion with publication	4 Presentation of the research outcome and learning
20	Identifying areas for continuous growth in areas relevant to the self as well as mastery of the subject and relevant skills and implementing them	2 Clinical/homeopathy Critical thinking Logic Analysis, evaluation, synthesis, abstraction, comprehension, application Problem solving Observation, control, automation, receiving, responding and internalization	2 Orientation to the area needs improvement and discussing with faculty and map plan	2 Implementation and feedback	3 Ability to do without active supervision	3 Ability to do without distant supervision	4 Ability to work on without supervision
21	Apply various teaching-learning	Justify the need for educational	Identify the learning objective	Recognise the levels of Guilbert.	Write objectives for all domains of	Conduct evidence driven TL and	Apply various teaching-learning

	techniques for imparting undergraduate and postgraduate education.	methodology as a component of PG Course.	s for their domain in Bloom's taxonomy. Identify the contexts of learning.	Indicate the level in Miller's Pyramid. Select appropriate instructional activities.	Bloom and levels of Guilbert. Identify assessment tools appropriate for the context.	Assessment of UG students.	techniques for imparting undergraduate and postgraduate education.
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PART I Paper 1:

V. Courses and Course Objectives

Part I Paper 1:

The syllabus of MD-Part I in HMM deals with the understanding of the basic science and philosophy of Materia Medica. These contents help the students to understand the functional, structural, psychological, and causative aspects of Materia Medica. These contents also deal with the evolution of remedies at the level of mind and body. It will also give them insights into Clinical Materia Medica that would be useful for their resident postings.

Course objectives: Fundamentals of Homoeopathic Materia Medica

- 1) **HOM-PG-HMM-01:** Foundation of Homoeopathic Materia Medica – concept, science, philosophy, application, nature and scope with a special focus on source books of Materia Medica.
- 2) **HOM-PG-HMM-02:** Place of homoeopathic Materia Medica in comparison to other system of medicine and comparison in concept, philosophy, science and application
- 3) **HOM-PG-HMM-03:** Foundation of eliciting the symptomatology of Homoeopathic Materia Medica and concept of drug proving and its application
- 4) **HOM-PG-HMM-04:** Clinical Materia Medica concept, philosophy and construction, relation with repertory- Boericke, Clarke, Farrington, Pointers to common remedy by Tyler, Homoeopathic Therapeutics by Lilienthal, Handbook of Materia Medica by T F Allen
- 5) **HOM-PG-HMM-05:** Application of clinical Materia Medica through the study of the clinicopathological correlation and sphere of action and its derivation through analysis, evaluation and synthesis.
- 6) **HOM-PG-HMM-06:** Physiological action of the remedy and study functional organisation of the remedies through the study of MM and therapeutics arranged upon a physiological and pathological basis by Hempel, Physiological MM by William Burt and applying it to clinical practice
- 7) **HOM-PG-HMM-07:** Study of the Miasm and relating insight into the clinicopathological action of the drug to Miasm and its evolution along with the different causation by studying the sourcebook, commentary and clinical Materia Medica.
- 8) **HOM-PG-HMM-08:** Concept of causation, bio-psycho-social model of aetiopathogenesis and its application in the different expression and symptomatology of HMM through the study of clinical Materia Medica, sourcebooks and commentator
- 9) **HOM-PG-HMM-09:** The structure of mind through the study of basic psychology and integrating with the concept of mind as propagated by Hahnemann, Kent and the study of mind from source books, by Kent, Tyler and Farrington.
- 10) **HOM-PG-HMM-10:** Development and maturation of mind from childhood to old age-normal characteristics and the relevance and application to Homoeopathic Materia Medica.
- 11) **HOM-PG-HMM-11:** Study of disposition, constitutions, and temperaments in the concept of Homoeopathic Materia Medica.
- 12) **HOM-PG-HMM-12:** Critical thinking and evolving logic in the study of HMM, learning the process of data receiving, documenting, analysing coming to logical conclusions by synthesis and abstraction and getting feedback by its application.

Course content

- HOM-PG-HMM-01: Foundation of Homoeopathic Materia Medica – concept, science, philosophy, application, nature and scope with a special focus on source books of Materia Medica.
 - Concept of homoeopathic Materia medica
 - Science of homoeopathic Materia Medica
 - Philosophy of Homoeopathic Materia Medica
 - Nature and scope of Homoeopathic Materia Medica
 - Application of Homoeopathic Materia Medica
- HOM-PG-HMM-02: Place of homoeopathic Materia Medica in comparison to other system of medicine and comparison in concept, philosophy, science and application.
 - Comparison of homoeopathic Materia medica with other system of the medicine prevalent currently
- HOM-PG-HMM-03: Foundation of eliciting the symptomatology of Homoeopathic Materia Medica and concept of drug proving and its application
 - Concept of artificial disease and natural disease
 - Eliciting the symptomatology from patient
 - Eliciting the symptomatology from prover
 - Concept and application of drug proving as per direction of Hahnemann and CCRH
 - Creating image of the drug through symptom analysis and evaluation
- HOM-PG-HMM-04: Clinical Materia Medica concept, philosophy and construction, relation with - Boericke, Clarke, Farrington, Pointers to common remedy by Tyler, Homoeopathic Therapeutics by Lilienthal, Handbook of Materia Medica by T F Allen
 - Concept and philosophy of Clinical Materia Medica
 - Exploring different clinical Materia medica and studying their structure, concept, philosophy and clinical application-as per listed in the course
- HOM-PG-HMM-05: Application of clinical Materia Medica through the study of the clinicopathological correlation and sphere of action and its derivation through analysis, evaluation and synthesis.
 - Application of clinical Materia Medica In OPD and IPD by correlating clinicopathological characteristics
 - Sphere of action through clinical Materia Medica
 - Symptomatic classification and evaluation building drug image
- HOM-PG-HMM-06: Physiological action of the remedy and study functional organisation of the remedies through the study of MM and therapeutics arranged upon a physiological and pathological basis by Hempel, Physiological MM by William Burt and applying it to clinical practice
 - Physiological action of remedies and image of drugs
 - Studying the concept and philosophy of Hempel and William Burt and its application to clinical practice
- HOM-PG-HMM-07: Study of the Miasm and relating insight into the clinicopathological action of the drug to Miasm and its evolution along with the different causation by studying the sourcebook, commentary and clinical Materia Medica.
Salient features of different miasm
 - Utility of studying miasm in building image of the remedy
 - Utility of knowledge of miasm in choice, differentiation and application of HMM in practice
- HOM-PG-HMM-08: Concept of causation, bio-psycho-social model of aetiopathogenesis and its application in the different expression and symptomatology of HMM through the study of clinical Materia Medica, sourcebooks and commentator
 - Concept of causation as per organon of medicine
 - Bio-psycho-social concept of aetiopathogenesis

- Application and importance of concept of causation in building image of HMM
 - Study of concept of causation through different HMM
- HOM-PG-HMM-09: The structure of mind through the study of basic psychology and integrating with the concept of mind as propagated by Hahnemann, Kent and the study of mind from source books, by Kent, Tyler and Farrington.
 - Structure of mind, mental symptoms, mental state and mental disposition
 - Study of emotion, intellect and behaviour
 - Mind as comprehended by Drs Hahnemann and Dr Kent
 - Study of mind of different remedies
 - Concept of psychodynamic and psychosomatic and application to HMM -study Whitmond, Catherine, Vithoulkas and Philip Baiely
 - HOM-PG-HMM-10: Development and maturation of mind from childhood to old age-normal characteristics and the relevance and application to Homoeopathic Materia Medica.
 - Evolutionary study of the man
 - Studying the evolutionary study of different remedies
 - HOM-PG-HMM-11: Study of disposition, constitutions, and temperaments in the concept of Homoeopathic Materia Medica.
 - Concept of disposition, constitution, temperament
 - Application of above in study of HMM
 - HOM-PG-HMM-12: Critical thinking and evolving logic in the study of HMM, learning the process of data receiving, documenting, analysing coming to logical conclusions by synthesis and abstraction and getting feedback by its application.

VI Course description

HOM-PG-HMM-01

Foundation of Homoeopathic Materia Medica – concept, science, philosophy, application, nature and scope with a special focus on source books of Materia Medica.

Course overview	This course will lay down the foundation for the study of the Materia Medica based on science and art of homoeopathic science
Learning outcomes	<p>Competency- HOM-PG-HMM-01-01: Explain the concept of homoeopathic Materia Medica</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Describe the concept of HMM. ▪ Apply concepts in study of HMM ▪ List the source books of HMM • Skill: Demonstrate the concepts in the study of HMM at the bedside • Reflection: <ul style="list-style-type: none"> ▪ Relate the concept and philosophy while studying the HMM. ▪ Recall the experience of application of these concepts and philosophy at the bedside. <p>Competency HOM-PG-HMM-01-02: Explain the scientific aspect of HMM</p> <ul style="list-style-type: none"> • Knowledge:

	<ul style="list-style-type: none"> ▪ Discuss the scientific aspect of HMM. ▪ Explain the science and philosophy of HMM ▪ Establish clinic pathological correlation of HMM at the bedside • Skill: Demonstrate the application of scientific aspects of Homoeopathy at the bedside. • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience of applying the scientific aspect of HMM at the bedside. <p>Competency HOM-PG-HMM-01-03:</p> <p>Explain the nature and scope of the HMM</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Explain the scope and limitations of HMM while applying at bedside. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate actual interpretation of clinical symptoms at bedside to correlate with symptoms in indicated remedy at bedside. <p>Demonstrate the skill of communication of scope and limitations to the patient's relatives.</p> <ul style="list-style-type: none"> • Reflection <ul style="list-style-type: none"> ▪ Recall the experience of application of various Source books at bedside.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed books:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: HomPG-HMM-02

Place of Homoeopathic materia medica in comparison to other system of the medicine and comparison in concept, philosophy, science and application

Course overview	This course will make the learner understand the conceptual difference between HMM and other medical branches and enable the learner to compare these concepts.
Learning outcomes	<p>Competency HOM-PG-HMM-02-01</p> <p>Explain the philosophical background of HMM</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Explain the construction of various HMMs ▪ Explain the science and philosophy of HMM ▪ Enumerate conceptual differences of HMM with other medical sciences. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the art Trituration, succession as processes of potentization.

	<ul style="list-style-type: none"> • Reflection: <ul style="list-style-type: none"> ▪ Recall an experience of trituration and succession in pharmacy lab <p>Competency HOM-PG-HMM-01-02: explain the differences between HMM and other medical sciences</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Enumerate the sources of HMM ▪ Explain the process of drug proving. ▪ Explain the mode of preparation of medicines in Ayurved and Modern medicine. • Skill <ul style="list-style-type: none"> ▪ Demonstrate the procedure of recording of subjective and objective symptoms during the process of drug proving • Reflection: <ul style="list-style-type: none"> ▪ Recall an interaction with a colleague of modern medicine as to how HMM differs from other systems.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code- HomPG-HMM- 03

Foundation of eliciting the symptomatology of Homoeopathic Materia Medica and concept of drug proving and its application

Course overview	This course will lay down the foundation for eliciting the symptomatology of HMM while drug proving and understand the concept off drug proving.
Learning outcomes	<p>Competency HOM-PG-HMM-03-01: Explain the concept and principles of drug proving</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Explain the concept of Homoeopathic drug proving. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the steps involved in the process of drug proving. • Reflection: <ul style="list-style-type: none"> ▪ Recall the first experience of drug proving on self. <p>Competency HOM-PG-HMM-03-02: explain the fundamentals of drug proving in the light of IDEAL PROVER, DRUG SBSTANCE AND PHYSICIAN.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the qualities of IDEAL prover. • Skill <ul style="list-style-type: none"> ▪ Demonstrate the process of selection of ideal prover and the drug substance. • Reflection: <ul style="list-style-type: none"> ▪ Recall the first experience of selection of prover. <p>Competency HOM-PG-HMM-03-03: Verify the efficacy of outcome of Drug proving in clinical practice</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Differentiate the common and uncommon symptoms and elicit Determinative symptoms. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate ability of receiving a case and differentiate common (Basic / absolute) and uncommon(determinative)

	<p>symptoms from case received.</p> <ul style="list-style-type: none"> • Reflection <ul style="list-style-type: none"> ▪ Recall your first experience of case receiving and the difficulties faced in matching with that of artificial disease.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed Books:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code: HomPG-HMM-04:

Clinical Materia Medica concept, philosophy and construction, Boericke, Clarke, Farrington, Pointers to common remedy by Tyler, Homoeopathic Therapeutics by Lilienthal, Handbook of Materia Medica by T F Allen

Course overview	This course will create a scope to understand clinical materia medicas of various authors and their concept, construction and philosophy.
Learning outcomes	<p>Competency HOM-PG-HMM-04-01: Explain the types of HMM and discuss the philosophy of various CLINICAL HMMs.</p> <ul style="list-style-type: none"> • Knowledge: • Enumerate the types of HMMs • Discuss the sources of HMMs. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the application of various clinical HMMs in a case received by interpreting the clinical presentations of a given case. • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience in receiving a case and interpreting the symptoms in light of Drug pictures of HMM. <p>Competency HOM-PG-HMM-04-02: Explain the concept and construction of various clinical Materia Medicas</p> <ul style="list-style-type: none"> • Knowledge:

	<ul style="list-style-type: none"> ▪ Discuss the utility of each clinical HMM in clinical practice ▪ Differentiate the role of general HMM with clinical HMM in respect their utility in clinical practice. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the interpretation of symptomatology of general and clinical HMM • Reflection: <ul style="list-style-type: none"> ▪ Recall the incidence when you actually used a clinical HMM for selection of similimum for the first case <p>Competency HOM-PG-HMM-04-03: Establish a logical relation of various clinical HMMs with various Repertories.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Correlate the construction, concept and philosophy of all the clinical HMMs with concept and philosophy of Repertories. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the skill of KEY note prescription by using CLINICAL HMM in clinical practice and relate the same with reportorial approach. • Reflection: <ul style="list-style-type: none"> ▪ Write down the various experiences of KEY note prescriptions and aim to construct a clinical HMM of your experience.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed Books:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning

Course Code: HomPG-HMM-05

Application of clinical Materia Medica through study of clinico-pathological correlation and sphere of action and its derivation through analysis, evaluation and synthesis.

Course overview	This course creates an opportunity for the PG scholar to actually explore clinico pathological aspects of symptomatology in Clinical HMM and also establish a clinic-pathological correlation of a clinical presentation of a patient.
Learning outcomes	<p>Competency 1: Explain the sphere of action of a remedy and establish clinico pathological relation with the symptomatology of the remedy.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the sphere of action of a remedy. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the skill of snapshot prescription on the basis sphere of action in clinical practice. • Reflection: <ul style="list-style-type: none"> ▪ Recall a peculiar key note symptom which was explained in a class and you had the same in a patient.

	<p>Competency 2: Analyse, evaluate a case and select a similimum applying knowledge of sphere of action and its clinico pathological relation.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss various methods of analysis and evaluation of a patient. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate a clinical analysis and synthesis of a case to arrive at a proper similimum. • Reflection: <ul style="list-style-type: none"> ▪ Recall a first success story of a patient treated on this basis.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code: HomPG-HMM-06

Physiological action of the remedy and study functional organisation of the remedies through study of “MM and therapeutics arranged upon a physiological and pathological basis by Hempel. Physiological MM by William Burt” and applying it to clinical practice.

Course overview	This course creates an opportunity for the PG Scholar to explore various literatures available of these authors and understand physiological actions of drugs and enable him to apply the same in clinical practice.
Learning outcomes	<p>Competency 1: Describe the physiological action of drugs and connect the same while interpretation of symptomatology in clinical practice.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the physiological action of the remedies. · Make a correlation with physiological action of the remedy and the symptoms of the respective drugs in Materia Medica. · Prepare systematic therapeutics on sphere of action of the remedies. • Skill: <ul style="list-style-type: none"> ▪ To develop observational skills depending upon the presenting symptoms of the case. · To develop interpretative skill in clinical application of drugs. • Reflection:

	<ul style="list-style-type: none"> Recall your experience of applying patho-physiological aspect of HMM at bedside
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code: HomPG-HMM-07

Study of the Miasm and relating insight into clinico-pathological action of the drug to Miasm and its evolution along with the different causation by studying the source books, commentary and clinical Materia Medica

Course overview	This course will create a scope for understanding the concept of miasms as fundamental causes of diseases. And correlation with the natural course of the disease and connect the same and apply in clinical practice.
Learning outcomes	<p>Competency 1:</p> <ul style="list-style-type: none"> Knowledge: <ul style="list-style-type: none"> Discuss the characteristics features (system-wise) of various miasms. · Make correlation of symptoms of various disease condition and corresponding miasmatic interpretation. · Prepare miasmatic analysis of symptoms of the leading polycrest drugs. Skill: <ul style="list-style-type: none"> To develop observational skills to identify miasmatic diagnosis upon the presenting symptoms of the case. · To develop interpretative skill to find out similimum considering miasmatic background in the presenting case. Reflection: <ul style="list-style-type: none"> Recall your experience of applying miasmatic approach to HMM in clinical practice and at bedside.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code: HomPG-HMM-08

Concept of causation, bio-psycho-social model of aetio-pathogenesis and its application in the different expression and symptomatology of HMM through study of clinical Materia Medica, sourcebooks and commentaries.

Course overview	This course will allow the PG Scholar to understand the concept of cause and effect and also understand the aetio pathogenesis of clinical symptoms and apply the same in clinical practice.
	Competency 1:

Learning outcomes	<ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss evolutionary concept of cause & effect relationship from homoeopathic point of view. · Make a correlation of cause & effect of symptoms of drugs in Materia Medica. • Skill: <ul style="list-style-type: none"> ▪ To develop interpretative skill between cause and effect and its reflection in drugs of homoeopathic Materia Medica. · To develop understanding of cause & effect relationship and its application at bed-side. • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience of applying cause & effect relationship in clinical practice.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code: HomPG-HMM-09:

The structure of mind through study of basic psychology and integrating with concept of mind as propagated by Dr Hahnemann, Kent and study of mind from source books, Kent, Tyler and Farrington

Course overview	This course will enable the PG Scholar to understand the basics of psychology and integrate the same with concept of mind as propagated by the named pioneers of Homoeopathy.
Learning outcomes	<p>Competency 1: Explain the basic concepts of Psychology and integrate the same with the concepts of mind as propagated by various pioneers and apply the same in clinical practice.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss various psychological aspects present in homoeopathic materia medica. ▪ Discuss the importance of mental symptoms in selecting similimum in a case. • Skill: <ul style="list-style-type: none"> ▪ To develop the interpretative skill of various mental symptoms of the drugs concerning various psychological aspects. · To develop an understanding of mental symptoms to treat psychological cases at the bedside • Reflection:

	<ul style="list-style-type: none"> Recall your experience of prescribing similimum depending on mental or psychological correlation.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, Practice based learning.

Course Code- HomPG-HMM-10:

Development and maturation of mind from childhood to old age-normal characteristics and the relevance and application to Homoeopathic Materia Medica.

Understand the Significance of the study of Mental Symptoms in Homoeopathic Materia Medica by grasping the basic concepts of Modern Psychiatry as explained in Kaplan& Sadock's "Synopsis of Psychiatry"& Niraj Ahuja's "Short Textbook of Psychiatry"& Applying this knowledge of Psychiatry to comprehend the relevance of Mental Symptoms in HMM, through the study of "Textbook of Materia Medica" by JT Kent, "Pocketbook of Homoeopathic Materia Medica& Repertory" by William Boericke, "A Synoptic Key of the Materia Medica" by C.M. Boger, "A Study on Materia Medica" by N.M. Choudhuri.

Course overview	This course will give an opportunity for PG Scholar to understand evolution of MIND and its development so as to enable him to understand personality. This will help him to erect a constitutional totality and interpret LIFE SITUATION in clinical practice.
Learning outcomes	<p>Competency 1: Erect a constitutional totality while receiving a case and relate to the mental symptoms as per the above authors leading to establish a Mental totality in clinical practice.</p> <ul style="list-style-type: none"> Knowledge: <ul style="list-style-type: none"> Explain the mile stones of mental development as per various authors mentioned above. Discuss the various types of Mental symptoms seen in above books of HMM

	<ul style="list-style-type: none"> ▪ Grasp the basic concepts of Modern Psychiatry ▪ Correlate these mental symptoms with Modern Psychiatry so as to realise their significance in understanding drug symptomatology, case taking and case analysis, to arrive at a simillimum. • Skill: <ul style="list-style-type: none"> ▪ To develop observational skills to document the presentation of various mental symptoms during case taking. ▪ To develop interpretative skill of various mental symptoms of Homoeopathic drugs in relation to various psychiatric disorders. ▪ Record and analyse a mental totality and relate to the suitable remedy through Materia Medica in clinical practice. • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience of applying the knowledge of mental symptoms and their diagnostic value in differentiating similar remedies at bedside.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning

Course Code HomPG-HMM-11:

Study of disposition, constitutions, temperaments in concept of Homoeopathic Materia Medica:

Study of disposition, constitutions, temperaments, diathesis in concept of Homoeopathic Materia Medica understood through the writings of Von Grauvogl, J.H.Clarke's "Constitutional Medicine", J.T.Kent's "Lesser Writings" Leon Vannier's "Homoeopathy Human Medicine", "Constitutional Therapeutics" by A.W.Woodward, "The Principles & the Art of Cure" by H.A.Roberts, David Little's essay "Hahnemann on Constitution & Temperament", "Trait and Type theories of Personality"

Course overview	<p>This course will give an opportunity to the PG Scholar</p> <p>To understand concepts of constitution, temperament and dispositions as explained by various authors and apply the same in clinical practice.</p>
Learning outcomes	<p>Competency 1: Explain the concept of constitution, disposition and temperament and relate to HMM and apply in clinical practice</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the definitions and types of disposition, constitutions, temperaments & diathesis. ▪ Understand the relevance of these concepts from the above books in HMM

	<ul style="list-style-type: none"> ▪ Correlate the various types & manifestations of disposition, constitutions, temperaments & diathesis to the actual logical process involved in arriving at a similimum • Skill: <ul style="list-style-type: none"> ▪ To develop observational skills to identify various types of disposition, constitutions, temperaments & diathesis among the presenting symptoms of the case. ▪ To develop interpretative skill to find out similimum considering disposition, constitutions, temperaments & diathesis, in the presenting case. • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience of applying your understanding of disposition, constitutions, temperaments & diathesis to HMM in clinical practice and at the bedside.
Assessment:	Continuous/programmatic assessment including problem-based learning assessment.
Prescribed texts:	As per the list
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, Practice based learning

Course Code HomPG-HMM-12:

Critical thinking and evolving logic in study of HMM, learning the process of data receiving documenting, analysing coming to logical conclusion by synthesis and abstraction and getting feedback by its application.

Critical thinking and evolving logic in study of HMM, learning the process of data receiving, documenting, analysing, coming to logical conclusion by synthesis and abstraction and getting feedback from its application, as seen in "The Genius of Homoeopathy-Lectures and Essays on Homoeopathic Philosophy "by Stuart Close.

Course overview	This course will give a scope for PG Scholar to critically Look at the data received in the process of case receiving and come to a logical conclusion by analysing the same and apply it in clinical practice.
Learning outcomes	<p>Competency 1: Receive the data and analyse critically and come to a logical conclusion of a similimum in clinical practice.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the definition & different types of logic involved in the development of HMM.

	<ul style="list-style-type: none"> ▪ Correlate the role of Inductive & Deductive logic in developing HMM through Drug Proving ▪ Correlate the role of Logic in the whole process starting from case taking, till prescription and follow up and drawing inferences. • Skill: <ul style="list-style-type: none"> ▪ To develop observational skills to identify various types of Logic applied in evolving Homoeopathic Materia Medica. ▪ To develop interpretative skill to understand the application of Logic in the process of Drug Proving. ▪ To develop an understanding of the utilization of different types of Logic in the application of Homoeopathy at the bed-side. • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience of applying Inductive & Deductive Logic in clinical practice.
Assessment:	Continuous / programmatic assessment including problem-based learning assessment.
Prescribed Books:	As per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, Practice based learning

Drug listed below for demonstration and application of all above course contents and competencies.

Drugs for Long Answer Questions			
Sr. No.	Name of the Drugs	Sr. No.	Name of the Drugs
1	Ambra grisea	24	Ignatia a
2	Amm Carb	25	Iodum
3	Anacardium orientale	26	Kali Bich
4	Arg Nitricum	27	Kali Carb
5	Ars Alb	28	Lac Can
6	Bacillinum	29	Lycopodium clavatum
7	Baryta Carb	30	Mag Carb
8	Belladonna	31	Medorrhinum
9	Bryonia alba	32	Merc Sol
10	Calc Carb	33	Nat Carb
11	Calc Flour	34	Nat Mur
12	Calc Iod	35	Nat Phos
13	Calc Phos	36	Nat Sulp
14	Calc Silica	37	Nux vomica
15	Calc Sulp	38	Opium
16	Cocculus ind	39	Psorinum
17	Conium Mac	40	Silicea
18	Gelsemium	41	Stramonium
19	Graphites	42	Sulphur
20	Carcinosin	43	Syphilinum
21	Causticum	44	Tarentula his
22	HepharSulp	45	Thuja occidentalis
23	Hyoscyamus n	46	Tuberculinum

Drugs for Short Answer Questions

Sr. No.	Name of the Drugs	Sr. No.	Name of the Drugs
1	Actea spicata	54	Feltauri
2	Adonis vernalis	55	Ferrum Phos
3	Aesculus hip	56	Ficus relig
4	Aethusacyn	57	Formicum Acid
5	Aethusacyn	58	Gambojia
6	Agaricus musc	59	Ginseng
7	Agaricus musc	60	Glonoine
8	Agraphis nutans	61	Gnaphalium
9	Allium cepa	62	Grindelia
10	Allium sativa	63	Guaiacum off
11	Aloe socotrina	64	Heloderma

12	Alumen	65	Helonias d
13	Aralia Racemosa	66	HydrocynaciumAcid
14	Artemesia vulgaris	67	Ipecac
15	Artemisia vulgaris	68	Iris ver
16	Arum triphyllum	69	Lac Defl
17	Asafoetida	70	Lactic Acid
18	Aspidospermium	71	Ledum pal
19	Badiaga	72	Lemna minor
20	Bellis perenis	73	Lithium Carb
21	Bellis perennis	74	Lobelia inflate
22	Benzoicum Acid	75	Magnesium phos
23	Berberis vulgaris	76	Melilotus alb
24	Boricum Acid	77	Menyathestrif
25	Bothrops l	78	Mephitis
26	Bovista	79	Mer Cor
27	Bromium	80	Myrica cerifera
28	Bufo rana	81	Niccolum Met
29	Butyricum Acid	82	Nux moschata
30	Cactus grandiflorus	83	Oleander
31	Cadmium Met	84	Oleum animale
32	Calendula officinalis	85	Oxalic Acid
33	Cannabis sativa	86	Paeonia officinalis
34	Cantharis	87	Palladium
35	Cardus marinus	88	Petroleum
36	Caulophyllum	89	Picric Acid
37	Cineraria maritima	90	Podophyllum
38	Citricum Acid	91	Ranunculus bulbosa
39	Clematis erecta	92	Sabal serrulata
40	Cobaltum Met	93	Sabina
41	Coccus cacti	94	Sambucus nigra
42	Collinsonia	95	Sanguinaria can
43	Colocynthis	96	SarasaparillaOffic
44	Corallium rubrum	97	Secale corn
45	Cup Aceticum	98	Solidago
46	Digitalis purp	99	Spigelia
47	Dioscorea villosa	100	StrophantusHispidus
48	Drosera r	101	Taraxacum
49	Dulcamara	102	Thalapsi bursa
50	Echinaceaa	103	Trillium pendulum
51	Elapsc	104	Valeriana office
52	Erigeron canadensis	105	Viburnum opulus
53	Eupatorium purpureum	106	Viburnum opulus

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training	During eighteenth month of training
	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Homoeopathic Materia Medica	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Clinical Medicine in Homoeopathic Materia Medica	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 1. Course Numbers

- HOM-PG-HMM-01:** Foundation of Homoeopathic Materia Medica – concept, science, philosophy, application, nature and scope with a special focus on source books of Materia Medica.
- HOM-PG-HMM-02:** Place of homoeopathic Materia Medica in comparison to other system of

- medicine and comparison in concept, philosophy, science and application
3. **HOM-PG-HMM-03:** Foundation of eliciting the symptomatology of Homoeopathic Materia Medica and concept of drug proving and its application
 4. **HOM-PG-HMM-04:** Clinical Materia Medica concept, philosophy and construction, relation with repertory- Boericke, Clarke, Farrington, Pointers to common remedy by Tyler, Homoeopathic Therapeutics by Lilienthal, Handbook of Materia Medica by T F Allen
 5. **HOM-PG-HMM-05:** Application of clinical Materia Medica through the study of the clinicopathological correlation and sphere of action and its derivation through analysis, evaluation and synthesis.
 6. **HOM-PG-HMM-06:** Physiological action of the remedy and study functional organisation of the remedies through the study of MM and therapeutics arranged upon a physiological and pathological basis by Hempel, Physiological MM by William Burt and applying it to clinical practice
 7. **HOM-PG-HMM-07:** Study of the Miasm and relating insight into the clinicopathological action of the drug to Miasm and its evolution along with the different causation by studying the sourcebook, commentary and clinical Materia Medica.
 8. **HOM-PG-HMM-08:** Concept of causation, bio-psycho-social model of aetiopathogenesis and its application in the different expression and symptomatology of HMM through the study of clinical Materia Medica, sourcebooks and commentator
 9. **HOM-PG-HMM-09:** The structure of mind through the study of basic psychology and integrating with the concept of mind as propagated by Hahnemann, Kent and the study of mind from source books, by Kent, Tyler and Farrington.
 10. **HOM-PG-HMM-10:** Development and maturation of mind from childhood to old age-normal characteristics and the relevance and application to Homoeopathic Materia Medica.
 11. **HOM-PG-HMM-11:** Study of disposition, constitutions, and temperaments in the concept of Homoeopathic Materia Medica.
 12. **HOM-PG-HMM-12:** Critical thinking and evolving logic in the study of HMM, learning the process of data receiving, documenting, analysing coming to logical conclusions by synthesis and abstraction and getting feedback by its application.

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content General Topics ALONG WITH DEMONSTRATION THROUGH DRUG LISTED IN LONG ANSWER QUESTION	Marks
1	Application Based	HOM-PG-HMM 01 to 11	20
2	LAQ	HOM-PG-HMM 03 or 04	10
3	LAQ	HOM-PG-HMM 05 or 06	10
4	LAQ	HOM-PG-HMM 07 or 08	10
5	LAQ	HOM-PG-HMM 09 or 10	10
6	SAQ	HOM-PG-HMM 03	5
7	SAQ	HOM-PG-HMM 04	5
8	SAQ	HOM-PG-HMM 05	5
9	SAQ	HOM-PG-HMM 06	5
10	SAQ	HOM-PG-HMM 07	5
11	SAQ	HOM-PG-HMM 08	5
12	SAQ	HOM-PG-HMM 09	5
13	SAQ	HOM-PG-HMM 11	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks

4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

LIST OF BOOKS

1. TEXT BOOKS:

1. Kent JT(1992)Lectures on Homoeopathic Materia Medica
2. Nash EB(2014) Leaders in homoeopathic Therapeutics
3. HC Allen(2002) Key Notes
4. Farrington EA(1992) A Clinical Materia Medica
5. Boericke W(1993)Pocket Manual of The Homoeopathic. Materia Medica
6. Choudhuri N.M.(2003) A study on Materia Medica
7. Lippe A(2002) Keynotes and Red Line symptoms of the Materia Medica
8. Blackwood AL(2016)A manual of Materia medica, Therapeutics and Pharmacology with Clinical Index
9. Lippe A.D. (2005) Textbook of Materia Medica
10. Boger C. M.(2010)A Synoptic Key of the Materia Medica
11. Clarke J.H.(1990) Dictionary of Practical Materia Medica
12. Mathur K. N.(2003) Systematic Materia Medica of Homoeopathic Remedies
13. Phatak S. R.(2003) Materia Medica of Homeopathic Medicines
14. Tyler M.L.(2008) Homoeopathic Drug Pictures
15. Bhanja KC, (1972) Master Key to Materia Medica
16. Pierce W.E. (2016)Plain Talks on Materia Medica
17. Pulford (2002) Homoeopathic Materia Medica of Graphic Drug Pictures.

2. REFERENCE BOOKS:

1. Hahnemann S.Fragmenta de viribus medicamentorum positivissime in sanocorpore humano observatis.
2. Hahnemann S.(2022) Materia Medica Pura
3. Hahnemann S., Chronic Diseases
4. Allen T.F.(2000) Encyclopedia of Pure Materia Medica
5. Hering C.(1900)Guiding Symptoms of our Materia Medica
6. Hughes R. &Dake J.P.(2022) A Cyclopaedia of Drug Pathogenesis
7. Hughes R.(2012) A Manual of Pharmacodynamics
8. Hughes, R.(2012) The Principles & Practice of Homoeopathy
9. Clarke J.H.(1990) The Dictionary of Practical Materia Medica
10. Hering C.(2022) Condensed Materia Medica
11. Allen T.F.(2001) Hand Book of Materia Medica and Homoeopathic Therapeutics
12. Allen H.C.(2000) The Materia Medica of Some important Nosodes
13. Julian OA(1984) Materia Medica of New Homeopathic Remedies
14. Julian OA.(2003) Materia Medica of Nosodes
15. Julian OA((2003) Dictionary of Homoeopathic Materia Medica
16. Ghose S.C. , Drugs of Hindustan
17. Farrington E.A. (2005)The Comparative Materia Medica
18. Roberts H.A. (2002)The Study of Remedies by Comparison
19. Nash E.B.(2001) Regional Leaders
20. Guernsey H.N(1887) Keynotes of the Materia Medica
21. Dunham C.(2021) Lectures on Materia Medica

22. Anshutz E.P.(2002) New, Old & Forgotten Remedies
23. Leesser O.(2000) Text book of Homoeopathic Materia Medica
24. Dubey S.K.(1973) Text book of Materia Medica
25. Boericke W.(2019) The Twelve Tissue Remedies of Schussler
26. Borland D (1939)Pneumonias
27. Burnett (2002) Best of Burnett
28. Farrington E.A.(2010) Lesser Writings with Therapeutic Hints and Some Clinical Cases
29. Kent J.T.(1992) New Remedies, Clinical Cases, Lesser Writings, Aphorisms & Precepts.
30. Bradford T.L. & Taffel, L.H.(1908)The Lesser Writings of C.M.F. von Boenninghausen
31. Tyler M.L.(2022) Pointers to Common Remedies
32. Dewey W.(2009) Practical Homoeopathic Therapeutics
33. Bhanja KC (1978)The Homoeopathic Prescriber
34. Clarke J.H.(1972) The Prescriber
35. Hoyne T.S.(2002) Clinical Therapeutics
36. Lilienthal S(1998) Homoeopathic Therapeutics
37. Foubister D.M.((1995)Carcinosin Drug Picture
38. Vithoulkas G.(1989) Materia Medica Viva, Vol I to XIII
39. Vithoulkas G(2002) Talks on Classical Homoeopathy
40. Vithoulkas G(2008) Essence of Materia Medica
41. Coulter C.(2002) Portrait of Homoeopathic Medicines
42. Cowperthwaite AC (2022) Text Book of Homoeopathic Materia Medica
43. C.C.R.H.(2018)Drugs of Animal Sources used in Homoeopathy
44. C.C.R.H.(2016) Keynotes of Homoeopathic Materia Medica, Vol I & II
45. C.C.R.H.(2014) Homoeopathic Materia Medica of Indian Drugs
46. H.P.L., Ghaziabad (1998) A Photographic Album on Medicinal plants used in Homoeopathy Vol I & II.
47. H.P.L., Ghaziabad, A Compendium of Active Principles/ Phytochemicals of Medicinal plants used in Homoeopathy Vol I & II.
48. Rajendran E.S.(2015) Nanodynamics
49. Candigabe Eugene(1997) Comparative Materia Medica

Note: Part I Paper 2 separately after Part II Paper 1 & 2.

Part 2 Paper 1 & 2

I to IV is common for both part one and part two

PG HMM PART-II

V. Courses and Course Objectives.

Part-2:

- HOM-PG-HMM-13: Different & concepts of the earlier times & their influence on the construction of Homoeopathic Materia Medica.
- HOM-PG-HMM-14: Evolution of Homoeopathic Materia medica with focus on the evolving concepts, masters and the books, their construction and utility.
- HOM-PG-HMM-15: Sources of Homoeopathic Materia Medica, Drug proving and Collection of symptoms.
- HOM-PG-HMM-16: Types of Homoeopathic Materia Medica - concept, philosophy, scope and limitation.
- HOM-PG-HMM-17: Different approaches of study of Homoeopathic Materia Medica i.e. Psycho-Clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship
- HOM-PG-HMM-18: Study of Homoeopathic Drugs / Medicines as per list.
- HOM-PG-HMM-19: Study and construction of Materia Medica – building a portrait of artificial disease and drug picture integrating concept studied in the Part
- HOM-PG-HMM-20: Theory of Biochemic system of Medicine and Biochemic Medicines.
- HOM-PG-HMM-21: Group study of Homoeopathic Materia Medica.
- HOM-PG-HMM-22: Comparative Materia Medica: from symptomatic, regional location, closely coming drug pictures.
- HOM-PG-HMM-23: Clinical application of HMM in Medicine, Gynaecology and Surgery
- HOM-PG-HMM-24: Mother Tinctures, Nosodes (including Bowel Nosodes), Sarcodes.
- HOM-PG-HMM-25: Repertorial Techniques for the evolution of the Drug Pictures from Symptoms.
- HOM-PG-HMM-26: Homoeopathic Materia Medica in acute illnesses and emergencies.
- HOM-PG-HMM-27: Study of Homoeopathic Drugs/Medicines as per list.

Content:

HOM-PG-HMM-13: Different & concepts of the earlier times & their influence on the construction of Homoeopathic Materia Medica.

- Different concepts on which different Materia Medica were available before Hahnemann
- Their influence on Homoeopathic Materia Medica

HOM-PG-HMM-14: Evolution of Homoeopathic Materia medica with focus on the Evolving concepts, masters and the books, their construction and utility.

- Evolution of the HMM from the time of Hahnemann

- Concepts on which different HMM were written
- Study different masters and the construction of their HMM
- Utility of different HMM in Practice

HOM-PG-HMM-15: Sources of Homoeopathic Materia Medica, Drug proving and Collection of symptoms.

- Different Sources of Homoeopathic Materia Medica
- Concept of drug proving
- Concept of documenting the proving symptoms and evolving drug picture

HOM-PG-HMM-16: Types of Homoeopathic Materia Medica - concept, philosophy, scope and limitation.

- Types of Homoeopathic Materia Medica
- Concept and Philosophy on types of HMM evolved
- Scop and limitation of Homoeopathic Materia Medica

HOM-PG-HMM-17: Different approaches of study of Homoeopathic Materia Medica i.e. Psycho-Clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship

- Different approaches to study HMM
- Psycho-Clinico-pathological
- Synthetic
- Comparative
- Analytic
- Remedy relationship

- HOM-PG-HMM-18: Study of Homoeopathic Drugs / Medicines as per list
 - As per list at the end of course overview.
- HOM-PG-HMM-19: Study and construction of Materia Medica – building a portrait of artificial disease and drug picture integrating concept studied in the Part one and two
 - Portrait of artificial diseases as per list
- HOM-PG-HMM-20: Theory of Biochemic system of Medicine and Biochemic Medicines.
 - Theory of biochemic system
 - Differentiate biochemic and homoeopathic system
 - Application of biochemic system in practice
- HOM-PG-HMM-21: Group study of Homoeopathic Materia Medica.
 - Concept of generalisation and individualisation
 - Process of formulating group symptoms from Materia medica and Repertory
 - Group study and application to individual remedy
 - Application of group approach practice
- HOM-PG-HMM-22: Comparative Materia Medica: from symptomatic, regional location, closely coming drug pictures.
 - Concept of comparative Materia medica
 - Comparison of remedies from symptomatic, regional location, evolution, concomitant
 - Comparison of remedies based on systems and themes
- HOM-PG-HMM-23: Clinical application of HMM in Medicine, Gynaecology and Surgery
 - Application of HMM in Medicine
 - Application of HMM in gynaecology
 - Application of HMM in surgery
- HOM-PG-HMM-24: Mother Tinctures, Nosodes (including Bowel Nosodes), Sarcodes
 - Study of different mother tincture as per list and its clinical application
 - Study of nosodes and its application in different role
 - Study of sarcodes.
- HOM-PG-HMM-25: Repertorial Techniques for the evolution of the Drug Pictures from Symptoms.

Concept and utility of repertory

 - Application of repertory in formulating drug picture
- HOM-PG-HMM-26: Homoeopathic Materia Medica in acute illnesses and emergencies
 - Application of HMM in emergency
 - Application of HMM in acute illnesses.
- HOM-PG-HMM-27: Study of Homoeopathic Drugs/Medicines as per list.

- Study drug picture at acute, chronic, intercurrent and constitutional level

VI. Course description

Course Code: **HomPG-HMM-13**

Different eras & concepts of the earlier times & their influence on the construction of Homoeopathic Materia Medica.

Course overview	This course enables the learners to understand the different eras of Materia Medica of Earlier times and understand their influence of the concepts while evolving homeopathic Materia Medica
Learning outcome	<p>Competency: HOM-PG-HMM-13-1</p> <p>List the concepts of Materia medica of earlier times</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the various eras of Materia medica of earlier times. ▪ Explain the various concepts of earlier Materia medica. ▪ Explain the different ways of constructions of earlier Materia medica. • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the various influences of concepts of various Materia Medica on the construction of Homoeopathic Materia medica and its clinical application • Reflection: <ul style="list-style-type: none"> ▪ Relate the various concepts of earlier Materia medicas. ▪ The way in which above understanding influences the conceptual differences with Homoeopathic Materia medica.
Assessments	Formative and summative assesment
Prescribed text	As per the list
Domain of competency	Knowledge and scholarship, Homoeopathic orientation ,patientcare, Practice based learning

Course Code: **Hom-PG-HMM-14**

Evolution of Homoeopathic Materia medica with focus on the evolving concepts, masters and the books, their construction and utility.

Course overview	<p>This course enables the learners to understand the evolution of Homoeopathic materia medica and its concepts put forth by various stalwarts focusing on their logic of application and construction of materia medica.</p> <p>The above learning will make the learner competent in utility of various materia medicas in live clinical situations.</p>
Learning out comes	<p>Competency : Hom-PG-HMM-14-01 Explain the evolution of Homoeopathic Materia medica</p> <ul style="list-style-type: none">• Knowledge:<ul style="list-style-type: none">▪ Recall the evolution of Homoeopathic Materia Medica.▪ Recall the various source books of Homoeopathic materia medica.▪ Recall the logic of various stalwarts used in construction of their respective materia medicas• Skill:<ul style="list-style-type: none">• Interpret the various evolutionary steps in development of Homoeopathic Materia Medica.• Interpretative skill in clinical application of Materia medica in live situations.• Reflection:<ul style="list-style-type: none">▪ Recall your first experience when you read Hahnemann's materia medica pura.
Assessment:	Formative and summative assessments
Prescribed texts	ASPERTHELIST
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **HomPG-HMM-15**

Sources of Homoeopathic Materia Medica, Drug proving and Collection of symptoms.

Course overview	This course enables the learners to understand the various sources of Materia Medica. It also enables to understand the methods of drug proving including collection of symptoms
Learning outcomes	<p>Competency: Hom-PG-HMM-15-01 Enumerate the various sources of materia Medica.</p> <ul style="list-style-type: none">• Knowledge:<ul style="list-style-type: none">▪ Recall the various sources of Homoeopathic materia Medica.▪ Recall the concept of correlating knowledge of toxicology, chemistry and other sources to the symptoms of Homoeopathic Materia Medica.• Skill:<ul style="list-style-type: none">▪ Interpretative skill in understating the symptoms of materia Medica in relation with findings of toxicology, chemistry etc.• Reflection:<ul style="list-style-type: none">▪ Recall your first experience when you read a drug picture in materia Medica and correlated it with its findings of toxicology <p>Enumerate the various sources of materia Medica.</p>
Assessment:	<ul style="list-style-type: none">▪ Continuous/programmatic assessment and summative
Prescribed texts:	ASPERTHE LIST
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **HomPG-HMM-16**

Types of Homoeopathic Materia Medica-Concept, philosophy, scope and limitation.

Course overview	This course enables the learners to understand the various concepts , philosophies and scope , limitations of Homoeopathic materia Medica in clinical; practice.
Learning out comes	<p>Competency: Hom-PG-HMM-16-01</p> <p>Explain the concept and philosophy of Homoeopathic Materia Medica</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> • Explain the various concepts of Homoeopathic material Medicas. ▪ Discuss the various philosophies applied in evolution of Various Homoeopathic material Medicas. • Skill: <ul style="list-style-type: none"> ▪ Display the application of concept and philosophy of different material Medicas in clinical practice. • Reflection: <ul style="list-style-type: none"> • Recall your first experience when you had an opportunity when you correlated the concept and philosophy while reading various material Medicas. <p>Competency: Hom-PG-HMM-16-02</p> <p>List the various scope and limitations of Homoeopathic Materia Medicas</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Explain the classification of diseases putforth by Dr,Hahnemann ▪ Discuss the scope and limitations of Homoeopathic Materia Medica • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the scope and limitation of Homoeopathic Materia Medica in clinical practice • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you experienced the limitation of HMM ▪ Recall the first experience when you experienced ▪ The scope of Homoeopathic Materia Medica

Assessment:	<ul style="list-style-type: none"> • Continuous /programmatic assessment including problem-based learning assessment 20% weightage. • Practical Exam.100%
Prescribed texts	Written Examination 2X3hrs.written papers.80% weightage. as per the list
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-17**

Different approaches of study of Homoeopathic Materia Medica i.e. Psycho-clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship

Course overview	<p>This course enables the learners to understand various approaches to study materia medica which will encompass a global approach in understanding the drug picture in relation to mental, physical, clinical, pathological symptoms which will be comparable with other drugs and establish a proper remedy relationship.</p> <p>This study will enable the student for proper selection of similimum in clinical practice.</p>
Learning outcomes	<p>Competency: Hom-PG-HMM-17-01</p> <p>demonstrate proper method of studying materia Medica</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> Illustrate the various drug pictures using Psycho- clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship approached individually ▪ Apply Psycho- clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship approaches in clinical practice • Skill: <ul style="list-style-type: none"> Construct drug picture using Psycho- clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship approach individually and collectively • Reflection: <ul style="list-style-type: none"> Recall your first experience when you read a remedy in Psycho- clinico-Pathological, Synthetic, Comparative, Analytical way and established a proper related remedy in clinical practice
Assessment:	Continuous/programmatic assessment and summative assessments
Prescribed texts :	ASPERTHE LIST
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-18**

Study of Homoeopathic Drugs/Medicines as per list.

Course overview	Study of Homoeopathic drugs as per list
Learning outcomes	<p>Competency: Hom-PG-HMM-18-01</p> <p>To understand a drug picture and be able to interpret various indications and compare with other nearing drugs and applies in a clinical situation. Be able to understand various clinical relationships of homoeopathic remedies</p> <ul style="list-style-type: none">• Knowledge:<ul style="list-style-type: none">▪ summarize various drug pictures.▪ summarize various group characters of group remedies.▪ summarize the various clinical relationships of the drugs.• Skill:<ul style="list-style-type: none">▪ Construct totality of various drug as per the list▪ Apply these totalities in clinical practice.• Reflection:<ul style="list-style-type: none">▪ Recall your first experience while you received your first case and the way you erected a portrait of a patient and matched with the drug picture and arrived to a similimum.
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts :	ASPERTHE LIST
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-19**

Study and construction of Materia Medica-building a portrait of artificial disease and drug picture integrating concept studied in Part I

Course overview	This course will enable the learner to erect a portrait of artificial disease through study of drug proving and enable to match the artificial disease with drug picture of materia Medica and be able to apply in clinical practice.
Learning outcomes	<p>Competency1: Hom-PG-HMM-19-01</p> <p>To understand a drug picture and be able to interpret various indications and compare with other nearing drugs and applies in a clinical live situation. Be able to understand various clinical relationships of homoeopathic remedies</p> <ul style="list-style-type: none">• Knowledge:<ul style="list-style-type: none">▪ Discuss the various drug pictures.▪ Explain the various group characters of group remedies.▪ Explain the physiological action of drugs.▪ Discuss the various clinical relationships of the drugs.▪ Apply functional, structural ,psychological, clinico-pathological and miasmatic concept in building portrait• Skill:<ul style="list-style-type: none">▪ Display Communication and observational skills in receiving a case history.▪ Apply portrait to clinical practice▪ Perform thorough clinical examination and be able to diagnose a disease condition.• Reflection:<ul style="list-style-type: none">▪ Recall your first experience when you read the materia medica by any of the stalwarts and interpret the logic of construction of materia medica by the author
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts :	ASPERTHE LIST
Domain of competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-20-01**

Theory of Biochemic system of Medicine and Biochemic Medicines.

Course overview	This course enables the learner to understand theory of Twelve Tissue remedies as put forth by Schuessler and be able to understand and interpret the clinical presentations of the patient and apply in clinical practice
Learning outcomes	<p>Competency: Hom-PG-HMM-20-01</p> <p>Recall the theory of Twelve tissue remedies and list the same.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the theory and application of biochemic system of medicine ▪ Discuss the various drug pictures of Twelve Biochemic medicines. ▪ Explain the specific clinical indication of twelve tissue remedies • Skill: <ul style="list-style-type: none"> ▪ Demonstrate clinical application of drugs. • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you Read the theory of twelve tissue remedies and applied by Prescribing the indicated biochemic remedy in a case received by you.
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-21**

Group study of Homoeopathic Materia Medica.

Course overview	This course enables the learner to understand the classification of Homoeopathic remedies into various groups and enable to compare and contrast remedies amongst the groups and the remedies of others group also. And apply this knowledge in choosing a correct similimum in clinical practice.
Learning outcomes	<p>Competency : HomPG-HMM-21-01</p> <p>Recall the various groups under which all Homoeopathic Remedies have been classified.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Explain the concept of group studies. ▪ Discuss the historical evolution of group studies ▪ Discuss the various group characters of group remedies. As per list • Skill: <ul style="list-style-type: none"> ▪ Demonstrate the process of deriving group symptom ▪ Demonstrate the utility of repertory in deriving group symptoms ▪ Apply group symptom approach to arriving at similimum. ▪ Demonstrate the differential approach through group symptoms • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you read the clinical material medica written by E.A.Farrington and what you felt about the grouping of Homoeopathic Remedies for better understanding and application.
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies of	Knowledge and scholarship,Homoeopathic orientation,patientcare,Practice based learning

Course Code: **Hom-PG-HMM-22**

Comparative Materia Medica: from symptomatic, regional, location, closely coming drug pictures.

Course overview	This course enables the learner to understand the importance of comparison of drugs with other similar drugs belonging to the same group or otherwise and make the learner a competent prescriber.
Learning outcomes	<p>Competency: Hom-PG-HMM-22-01</p> <p>Recall the logic of comparative material medica and apply in selection of similimum</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the logic of comparative material medica ▪ Differentiate various closely coming drugs at level of symptoms ,region ,location and drug pictures ▪ Differentiate the various kingdoms and groups. • Skill: <ul style="list-style-type: none"> ▪ Apply concept of remedy differentiation in clinical practice • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you read the comparative material medica and compare two similar drugs belonging to same group and the way in which you arrived to a similimum in clinical practice.
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-23**

Application of HMM in the practice of medicine, surgery and gynecology-obstetrics.

Course overview	This course enables the learner to understand the importance of comparison of group symptoms having similar focus of action in relation to medicine, surgery and gynecology-obstetric.
Learning outcomes	<p>Competency: Hom-PG-HMM-23-01</p> <p>Select a similimum for a given case of medicine, surgery and gynecology-obstetrics.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss differential HMM based on various clinical conditions and symptoms ▪ Apply HMM in clinical branches like medicine, surgery and gynecology-obstetrics. • Skill: <ul style="list-style-type: none"> ▪ Perform history taking and examination. ▪ Construct clinical prescribing ▪ Select appropriate clinical symptom or clinical diagnosis to build differential HMM ▪ Apply clinical HMM in practice • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you select the similar remedy in all the clinical branches like medicine, surgery and gynecology-obstetrics.
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-24**

Mother Tinctures, Nosodes (including Bowel Nosodes), Sarcodes.

Course overview	This course enables the learner to understand the importance of Mother Tinctures, Nosodes (including Bowel Nosodes), Sarcodes and its clinical application
Learning outcomes	<p>Competency : HomPG-HMM-24-01</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the general concepts of mother tincture and their utility ▪ Discuss the various mother tinctures used in clinical practice. ▪ Explain the physiological action of mother tinctures. ▪ Apply various mother tinctures in various clinical conditions. • Skill: <ul style="list-style-type: none"> ▪ Apply mother tincture in clinical practice • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you read the material medica of mother tinctures and applied the same for giving symptomatic relief in a received case.
	<p>Competency2: Recall the theory of Nosodes and Sarcodes and their utility as under current remedy</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss theory of Nosodes and Sarcodes ▪ Discuss application of nosodes and sarcodes in Homoeopathic practice • Skill: <ul style="list-style-type: none"> ▪ Display the utility of nosodes as intercurrent in clinical practice ▪ Display utility of nosodes and sarcodes in clinical practice • Reflection: <ul style="list-style-type: none"> ▪ Recall your experience when you prescribed a Nosode or Sarcodes as second prescription
Assessment:	Continuous/programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **HomPG-HMM-25**

Reportorial Techniques for the evolution of the Drug Pictures from Symptoms.

Course overview	This course enables the learner to understand the importance of application of knowledge of Repertory in evolving a drug picture from the symptoms received in a case.
Learning outcomes	<p>Competency: HomPG-HMM-25-01</p> <p>To evolve a drug picture considering a totality of symptoms selected for a particular method of repertorization.</p> <ul style="list-style-type: none"> Knowledge: <ul style="list-style-type: none"> Discuss the concept and philosophy of Kent, BCCR and BSK repertory Explain the concept of symptom classification, analysis and evaluation Explain the concept of portrait building from symptoms Skill: <ul style="list-style-type: none"> Construct the portrait of the remedy through reportorial rubrics Construct the regional portrait of the remedy from rubrics Apply the portrait erected from repertory in clinical practice Reflection: <ul style="list-style-type: none"> Recall your first experience when you erected a portrait of a remedy using Reportorial Techniques
Assessment:	Continuous /programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-26**

Homoeopathic Materia Medica in acute illnesses and emergencies.

Course overview	This course enables the learner to understand the importance of Homoeopathic Drugs in treating acute illness and Emergencies.
Learning outcomes	<p>Competency: Hom-PG-HMM-26-01</p> <p>List the remedies used in Acute illnesses and Emergencies.</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ Discuss the various drugs used in acute illnesses. ▪ Discuss the differential HMM of acute illness and Emergency. ▪ Construct regional totality from patient and HMM in acute illness and emergency • Skill: <ul style="list-style-type: none"> ▪ Apply the HMM in emergency and acute illnesses. • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you treated a first emergency and acute illness by using Homoeopathic Remedies
Assessment:	<ul style="list-style-type: none"> • Continuous/programmatic assessment and summative assessment
Prescribed texts	ASPERTHELIST
Domain competencies of	Knowledge and scholarship, Homoeopathic orientation, patient care, Practice based learning

Course Code: **Hom-PG-HMM-27**

Study of Homoeopathic Drugs /Medicines as per list.

Course overview	This course enables the learners to Study and understand Homoeopathic drugs as per unit 1 to unit 5 and others such as Chemicals, Vegetables, Nosodes, Sarcodesetc.
Learning outcomes	<p>Competency : HomPG-HMM-27-01</p> <p>To understand a drug picture and be able to interpret various indications and compare with other nearing drugs and applies in a clinical live situation. Be able to understand various clinical relationships of homoeopathic remedies</p> <ul style="list-style-type: none"> • Knowledge: <ul style="list-style-type: none"> ▪ summarize the various drug pictures. ▪ summarize the various group characters of group remedies. ▪ summarize the various clinical relationships of the drugs. • Skill <ul style="list-style-type: none"> ▪ Construct totality of various drug as per the list ▪ Apply these totalities in clinical practice • Reflection: <ul style="list-style-type: none"> ▪ Recall your first experience when you read the material medica by any of the stalwarts and interpret the logic of construction of material medica by the author
Assessment:	<ul style="list-style-type: none"> ▪ Continuous /programmatic assessment including problem-based learning assessment 20%weightage. ▪ Practical Exam.100% <p>Written Examination 2X3 hrs written papers.80%weightage.</p>
Prescribed texts	ASPERTHELIST
Domain competencies	Knowledge and scholarship, Homoeopathic orientation,patientcare,Practice based learning

List of Medicines

Polychrest		Regional		Rare	
1	Ambra grisea	1	Abies can	1	Abies nigra
2	Amm Carb	2	Acalypha indica	2	Amyl Nitrosum
3	Anacardium orientale	3	Aesculus hip	3	Ant Ars
4	Ant Crud	4	Aethusa cyn	4	Aranea diad
5	Apis Mel	5	Agaricus musc	5	Ars Sulp
6	Arg Nitricum	6	Alfa alfa	6	Asparagus officinalis
7	Ars Alb	7	Aloe socotrina	7	Asteria rubens
8	Bacillinum	8	Amm Mur	8	Avena sativa
9	Baryta Carb	9	Ant Tart	9	Blatta orientalis
10	Belladona	10	Apocyanum	10	Canchalagua
11	Bryonia alba	11	Arnica Mont	11	Castaneavesca
12	Calc Carb	12	Ars Iod	12	Chenopodium anthelm
13	Calc Flour	13	Artemisia vulgaris	13	Chimaphilia umbelleta
14	Calc Iod	14	Arum triphyllum	14	Chininum Ars
15	Calc Phos	15	Asafoetida	15	ChininumSulp
16	Calc Silica	16	Baptisia tinc	16	Chloroform
17	Calc Sulp	17	Baryta Mur	17	Chrysarobium
18	Cannabis indica	18	Bellis perenis	18	Cinnamonum
19	Carbo veg	19	Berberis vulgaris	19	Cistus canadensis
20	Carcinosin	20	Bovista	20	Cornuscircinata
21	Causticum	21	Bromium	21	Cubeba officinalis
22	Chamomilla	22	Bufo rana	22	Curare
23	China off	23	Cactus grandiflorus	23	Diptherinum
24	Cocculus ind	24	Caladium	24	Elaterium
25	Conium Mac	25	Calc Ars	25	Equisetum hyemale
26	Gelsemium	26	Calc Mur	26	Eucalyptus
27	Graphites	27	Calendula officinalis	27	Filix mass
28	HepharSulp	28	Camphora off	28	Formalin
29	Hyoscyamus n	29	Cannabis sativa	29	Formica rufa
30	Ignatia a	30	Cantharis	30	Guaninum

31	Iodum	31	Capsicum	31	Hekla Lava
32	Kali Bich	32	Carbo Anim	32	Hura
33	Kali Carb	33	Caulophyllum	33	Hydrangea arbo
34	Kali Mur	34	Chelidonium m	34	Iberis ambra
35	Kali Phos	35	Cicuta v	35	Jalapa
36	Kali Sulp	36	Coca	36	Jatrophia
37	Lac Can	37	Coffea cruda	37	Justicia adhatoda
38	Lycopodium clavatum	38	Colchicum autum	38	Latrodec mac
39	Mag Carb	39	Collinsonia	39	Lycopus v
40	Medorrhinum	40	Colocynthis	40	Mygalelasiod
41	Merc Sol	41	Condurango	41	Ocimum C
42	Nat Carb	42	Digitalis purp	42	Passiflora incarnata
43	Nat Mur	43	Dioscorea villosa	43	Pertussin
44	Nat Phos	44	Drosera r	44	Physostigma v
45	Nat Sulp	45	Dulcamara	45	Piper nigrum
46	Nux vomica	46	Euphrasia off	46	Pothosfoetidis
47	Opium	47	Gamboja	47	Raphanus
48	Psorinum	48	Glonoine	48	Strontia carb
49	Pyrogenum	49	Hamamelis virginica	49	Syzygiumjambolinum
50	Silicea	50	Hydrophobinum	50	Teucrium m v
51	Stramonium	51	Hypericum perf	51	Thiosinaminum
52	Sulphur	52	Ipecac	52	Vaccinium
53	Syphilinum	53	Kalmia latifolia	53	Variolinum
54	Tarentula his	54	Kreosetum	54	Verbascum
55	Thuja occidentalis	55	Lac Defl		
56	Tuberculinum	56	Ledum pal		
		57	Lithium Carb		
		58	Lobelia inflata		
		59	Mag Mur		
		60	Melilotus alb		
		61	Mer Cor		
		62	Merc Cyan		
		63	Merc Iod Flavus		
		64	Merc IodRuber		
		65	Nux moschata		
		66	Onosmodium		
		67	Petroleum		
		68	Podophyllum		
		69	Radium Brom		
		70	Ratanhia per		
		71	Rheum offic		
		72	Rhododendron		
		73	Rumex crispus		
		74	Sabina		
		75	Sambucus nigra		

		76	Sanguinaria can		
		77	SarasaparillaOffic		
		78	Secale corn		
		79	Senega offic		
		80	Spigelia		
		81	Spongiatosta		
		82	SquillaMaritima		
		83	Stictapulm		
		84	Symphytum officinale		
		85	Tabaccum		
		86	Tarentula c		
		87	Terebinthina		
		88	Thalapsi bursa		
		89	Theridion		
		90	Trillium pendulum		
		91	Uranium Nit		
		92	Ustilago		
		93	Viburnum opulus		
		94	Viscum album		
		95	X-ray		

Group characteristic

Group Study					
Plant Family		Mineral Group		Animal Groups	
1	Group characteristics of Compositae	1	Group characteristics of Acid Group	1	Group characteristics of Ophidia
2	Group characteristics of Solanaceae	2	Group characteristics of Alkali Group	2	Group characteristics of Spider
3	Group characteristics of Loganiaceae	3	Group characteristics of Alkaline Earths Group	3	Group characteristics of Mollusk
4	Group characteristics of Anacardiaceae	4	Group characteristics of Arsenic and Arsenates Group	4	Group characteristics of Insects
5	Group characteristics of Liliaceae	5	Group characteristics of Baryta Group	5	Group characteristics of Fish
6	Group characteristics of Cucurbitaceae	6	Group characteristics of Calcareae Group		
7	Group characteristics of Ranunculaceae	7	Group characteristics of Carbon Group		
8	Group characteristics of Rubiaceae	8	Group characteristics of Ferrum Group		
9	Group characteristics of Umbelliferae	9	Group characteristics of Halogen Group		
		10	Group characteristics of Magnesia Group		
		11	Group characteristics of Mercury Group		
		12	Group characteristics of Metal Group		
		13	Group characteristics of Natrum Group		

		14	Group characteristics of Phosphorus and Phosphates Group		
		15	Group characteristics of Silicea and Silicate Group		
		16	Group characteristics of Sulphur, Sulphides, Sulphates Groups		

History and Theory, Indications & Contraindications of Bowel Nosodes		History and Theory, Indications & Contraindications of Sarcodes		History and Theory , Indications & Contraindications of Nosodes	
	Individual Bowel nosodes		Individual sarcodes		Individual nosodes-
1	Bach Morgan	1	Adrenaline	1	Anthraxinum
2	Dysentery co.	2	Cholesterinum	2	Botulinum
3	Bach gaertner	3	Cortisone	3	Diphtherinum
4	Bacillus no 7	4	Feltauri	4	Enterococcinum
5	Sycotic co	5	Folliculinum	5	Hippozeninum
6	Bacilli of morgan	6	Insulinum	6	Hydrophobinum
7	Bacillus no 10	7	OleumJecorisaselli	7	Influenzinum
		8	Oophorinum	8	Malandrinum
		9	Orchitinum	9	Malaria
		10	Pancreatinum	10	Morbillinum
		11	Parathyroidinum	11	Pertussinum
		12	Pepsinum	12	Pyrogenium
		13	Pituitrinum	13	Scarlatinum
		14	Thyroidinum	14	Tetenotoxinum
				15	Vaccininum
				16	Variolinum

Indications of Mother tinctures in terminal cases		History and Theory of Bio- chemic remedies	
	Mother Tinctures		Biochemic
1	Adonis vernalis:	1	Calc fl
2	Alfalfa	2	Calc phos
3	Arnica	3	Calc sul
4	Aspidosperma	4	Ferrumphos
5	Avena sativa	5	Kali mur
6	Brahmi (Bacopa m)	6	Kali phos
7	Calendula Calendula	7	Kali sul

8	Chelidonium	8	Mag phos
9	Condurango	9	Natrum mur
10	Convellariamajalis	10	Natrum Phos
11	Cratogeomys ox:	11	Natrum sul
12	Echinacea	12	Silicea
13	Fraxinus americanus:		
14	Ginkgo biloba		
15	Ginseng		
16	Gymnemasyl		
17	Hypericum		
18	Passiflora		
19	Plantago		
20	Sabal serrulata		
21	Syzygium jamb		
22	Thiosinaminum		

THERAPEUTIC STUDY OF DRUGS:

1. Drugs for Urinary disorders.
2. Drugs for GIT disorders.
3. Drugs for Respiratory disorders.
4. Drugs for Heart disorders.
5. Drugs for Liver disorders.
6. Drugs for Uterine disorders.
7. Drugs for Mouth disorders.
8. Drugs for Rectal disorders.
9. Drugs for Thyroid disorders.
10. Drugs for Glandular disorders.
11. Drugs for affections of Locomotor system
12. Drugs for Paralysis
13. Drugs for Diabetes
14. Drugs for Hypertension
15. Drugs for Affection of eye
16. Drugs for Affections of ear
17. Drugs for Vertigo
18. Drugs for Collapse
19. Drugs for Debility
20. Drugs for Neuralgia
21. Drugs for Fever
22. Drugs for Schizophrenia
23. Drugs for Anxiety disorder
24. Hysterical remedies
25. Drugs for behavioral disorder

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-II	1st Term Test: During twenty fourth month of training 2nd Term Test: During thirtieth month of training	During thirty sixth month of training

VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or clinical exams including Viva-Voce and dissertation	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
Homoeopathic Materia Medica Paper 1	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
Homoeopathic Materia Medica Paper 2	100	50		

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *Eighty per cent weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40

Total	100
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▪ **Part 2 – Paper 1.**

Course Numbers

- HOM-PG-HMM-13: Different & concepts of the earlier times & their influence on the construction of Homoeopathic Materia Medica.
- HOM-PG-HMM-14: Evolution of Homoeopathic Materia medica with focus on the evolving concepts, masters and the books, their construction and utility.
- HOM-PG-HMM-15: Sources of Homoeopathic Materia Medica, Drug proving and Collection of symptoms.
- HOM-PG-HMM-16: Types of Homoeopathic Materia Medica - concept, philosophy, scope and limitation.
- HOM-PG-HMM-17: Different approaches of study of Homoeopathic Materia Medica i.e. Psycho-Clinico-Pathological, Synthetic, Comparative, Analytic and Remedy relationship
- HOM-PG-HMM-18: Study of Homoeopathic Drugs / Medicines as per list.
- HOM-PG-HMM-19: Study and construction of Materia Medica – building a portrait of artificial disease and drug picture integrating concept studied in the Part

Part 2 – Paper 2.

Course Numbers

- HOM-PG-HMM-20: Theory of Biochemic system of Medicine and Biochemic Medicines.
- HOM-PG-HMM-21: Group study of Homoeopathic Materia Medica.
- HOM-PG-HMM-22: Comparative Materia Medica: from symptomatic, regional location, closely coming drug pictures.
- HOM-PG-HMM-23: Clinical application of HMM in Medicine, Gynaecology and Surgery
- HOM-PG-HMM-24: Mother Tinctures, Nosodes (including Bowel Nosodes), Sarcodes.
- HOM-PG-HMM-25: Repertorial Techniques for the evolution of the Drug Pictures from Symptoms.
- HOM-PG-HMM-26: Homoeopathic Materia Medica in acute illnesses and emergencies.
- HOM-PG-HMM-27: Study of Homoeopathic Drugs/Medicines as per list.

VII (2b). Question Paper Layout

Part-2-Paper 1

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-16	20
2	LAQ	HOM-PG-17	10
3	LAQ	HOM-PG-15	10
4	LAQ	HOM-PG-16	10
5	LAQ	HOM-PG-19	10
6	SAQ	HOM-PG-13	5
7	SAQ	HOM-PG-14	5
8	SAQ	HOM-PG-15	5

9	SAQ	HOM-PG-16	5
10	SAQ	HOM-PG-17	5
11	SAQ	HOM-PG-18	5
12	SAQ	HOM-PG-19	5
13	SAQ	HOM-PG-19	5

Part -2-Paper 2

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-23	20
2	LAQ	HOM-PG-20	10
3	LAQ	HOM-PG-21	10
4	LAQ	HOM-PG-22	10
5	LAQ	HOM-PG-22	10
6	SAQ	HOM-PG-21	5
7	SAQ	HOM-PG-24	5
8	SAQ	HOM-PG-24	5
9	SAQ	HOM-PG-26	5
10	SAQ	HOM-PG-27	5
11	SAQ	HOM-PG-25	5
12	SAQ	HOM-PG-22	5
13	SAQ	HOM-PG-22	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Dissertation defence	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

Reference Books:

1. Allen T.F.(2000) Encyclopedia of Pure Materia Medica
2. Allen T.F.(2001) Hand Book of Materia Medica and Homoeopathic Therapeutics
3. Allen H.C.(2000) The Materia Medica of Some important Nosodes
4. Anshutz E.P.(2002) New, Old & Forgotten Remedies
5. Boericke W.(2019) The Twelve Tissue Remedies of Schussler
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7. Burnett (2002) Best of Burnett
8. Bradford T.L. & Taffel, L.H.(1908)The Lesser Writings of C.M.F. von Boenninghausen
9. Bhanja KC (1978)The Homoeopathic Prescriber
10. Clarke J.H.(1990) The Dictionary of Practical Materia Medica
11. Coulter C.(2002) Portrait of Homoeopathic Medicines
12. Cowperthwaite AC (2022) Text Book of Homoeopathic Materia Medica
13. C.C.R.H.(2018)Drugs of Animal Sources used in Homoeopathy
14. C.C.R.H.(2016) Keynotes of Homoeopathic Materia Medica, Vol I & II
15. Clarke J.H.(1972) The Prescriber
16. C.C.R.H.(2014) Homoeopathic Materia Medica of Indian Drugs
17. Candigabe Eugene(1997) Comparative Materia Medica
18. Dunham C.(2021) Lectures on Materia Medica
19. Dubey S.K.(1973) Text book of Materia Medica
20. Dewey W.(2009) Practical Homoeopathic Therapeutics
21. Farrington E.A. (2005)The Comparative Materia Medica
22. Foubister D.M.((1995)Carcinosin Drug Picture
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24. Ghose S.C. , Drugs of Hindustan
25. Guernsey H.N(1887) Keynotes of the Materia Medica
26. Hoyne T.S.(2002) Clinical Therapeutics
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30. Hahnemann S.(2022) Materia Medica Pura
31. Hahnemann S., Chronic Diseases
32. Hering C.(1900)Guiding Symptoms of our Materia Medica
33. Hughes R. &Dake J.P.(2022) A Cyclopaedia of Drug Pathogenesy
34. Hughes R.(2012) A Manual of Pharmacodynamics
35. Hughes, R.(2012) The Principles & Practice of Homoeopathy
36. Hering C.(2022) Condensed Materia Medica
37. Julian OA(1984) Materia Medica of New Homeopathic Remedies
38. Julian OA,(2003) Materia Medica of Nosodes
39. Julian OA((2003) Dictionary of Homoeopathic Materia Medica
40. Kent J.T.(1992) New Remedies, Clinical Cases, Lesser Writings, Aphorisms & Precepts.
41. Leesser O.(2000) Text book of Homoeopathic Materia Medica
42. Lilienthal S(1998) Homoeopathic Therapeutics

43. Nash E.B.(2001) Regional Leaders
44. Roberts H.A. (2002)The Study of Remedies by Comparison
45. Rajendran E.S.(2015) Nanodynamics
46. Tyler M.L.(2022) Pointers to Common Remedies
47. Vithoukas G.(1989) Materia Medica Viva, Vol I to XIII
48. Vithoukas G(2002) Talks on Classical Homoeopathy
49. Vithoukas G(2008) Essence of Materia Medica

Fundamentals of Clinical Medicine to Homoeopathic Materia Medica Part 1 Paper 2

(HOM-PG-FCMHMM) Paper-2

- I. Title of the fundamental Course, and its abbreviation.**
Fundamentals of Clinical Medicine to Homoeopathic Materia Medica
Hom-PG-FCMHMM
- II. Same as paper one**
- III. Brief description of the course and its relevance in homoeopathy post-graduate course.**

This paper deals with the clinical stream to provide a foundation for homoeopathic practice and therefore is expected to deliver the basic clinical approach. This paper supports the evolution of an integrated approach to relating clinical symptomatology with homoeopathic fundamentals, including the miasmatic interpretation in the context of Homoeopathic Materia Medica. This intends to impart knowledge for a basic clinical approach required by a homoeopathic professional for practising clinical medicine concerning homoeopathic principles in general and homoeopathic Materia Medica in particular.

- IV. Same as program**
- V. Course and course objectives:**
Course objectives:

1. Perform evidence-based clinical practice in Homoeopathic Materia Medica
2. Display ethical standards in clinical practice in HMM.
3. Evaluate differential diagnosis by symptom-based approach in clinical practice
4. Relate symptomatology and clinical examination to homoeopathic Materia Medica
5. Interpret investigation in the light of clinical diagnosis and Homoeopathic Materia Medica.
6. Perform homoeopathic case-taking based on homoeopathic principles.
7. Relate the different cause and effect relationships in case taking.
8. Assemble data from the case taking and correlate to suitable clinical Materia Medica.
9. Apply the direction of clinical management from a homoeopathic perspective.
10. Relate the miasm and susceptibility of the patient to the symptoms of drugs in Homoeopathic Materia Medica.

Course

Part -one paper-two: Fundamentals of Clinical Medicine to Homoeopathic Materia Medica (FCMHMM)

- (I) Hom-PG-FCMHMM-01: Introduction to the Practice of Evidence-based Medicine**
- (II) Hom-PG-FCMHMM-02: Developing a Basic Clinical Approach. All the following content has to be delivered through clinical cases and bedside clinic**
- (III) Hom-PG-FCMHMM-03: Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification and clinical HMM through clinical cases and bedside**
- (IV) Hom-PG-FCMHMM-04: Basic Concepts of Nutrition, Nutritional Diseases and Miasmatic Assessment**
- (V) Hom-PG-FCMHMM-05: Interpretations of Laboratory and Radiological Investigation**

Course content:

- (I) Hom-PG-FCMHMM-01: Introduction to the Practice of Evidence-based Medicine**
 - a. Concept of evidence-based practice and its importance in Homoeopathy in relation to HMM.
 - b. Importance of developing an ethical base while adhering to the above with relation to HMM
- (II) Hom-PG-FCMHMM-02: Developing a Basic Clinical Approach. All the following content has to be delivered through clinical cases and bedside clinic**
 - a. Correlative study of Normal structure and function to reveal Structural and functional integrity in Health and understanding the clinical and Hahnemannian concept of health through clinical cases

- b. Role of Control Systems (Psycho-Neuro-Endocrine axis and the Reticulo-endothelial System) in the maintenance of Health and initiating the process of breakdown and onset of illness
- c. Different components which influence health at individual, family and community level leading to insight into preventive and community medicine through Hahnemannian philosophy of holistic
- d. Concept of predisposition and disposition and its influence on development of diseases and application to HMM
- e. Bio-psycho-social and environmental model of Aetiology and correlating with the Hahnemannian concept of causation and evolution of disease and HMM
- f. Development of a Symptom as an indication of loss of functional competence followed by loss of structural integrity – the pathogenesis of symptom formation and the Hahnemannian concept of disease and its expression and application to HMM
- g. Clinico-pathological correlations and the concept of a syndrome and its utility in understanding miasmatic evolution and HMM
- h. Bed side- General and Systematic examination and understanding their basis
- i. Role of physical examination and clinical investigation in the study of disease and miasm.
- j. Understanding the process of clinical diagnosis
- k. Importance of differential diagnosis-probable diagnosis and final diagnosis

Following study shall help in building clinical Materia Medica

- a. Predisposition:
- b. Causation and modifying factors:
- c. Pathogenesis, Pathology, Clinico-pathological and miasmatic correlations with pathological result
- d. Classification and evolution of disease according to varying expressions of susceptibility:
- e. Case taking, examination, investigation and approach to clinical diagnosis:
- f. Differential diagnosis:
- g. Management-General and Homoeopathic:
 - i. General Management
 - ii. Standard management: Detailed aspects of currently accepted medication from modern medicine, their pharmacological effects, their management and adverse drug reactions and ways in which they affect the susceptibility of the patient. And indicated HMM drugs for the state
This may include the following:
 - iii. Principles of Homoeopathic management:
 - 1.Scope and limitations:
 - 2.Role of different forces:
 - 3.Potency and repetition:
 - 4.Follow up management:
- h. Prognosis
- i. Future advances

(III) Hom-PG-FCMHMM-03: Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification and clinical HMM through clinical cases and bedside

- a. Pain
 - i. Pain: Pathophysiology
 - ii. Chest Pain
 - iii. Abdominal pain
 - iv. Headache
 - v. Back and Neck pain
- b. Fever-types
- c. Alteration in Nervous system functions

- i. Faintness, syncope, dizziness, vertigo
 - ii. Weakness, myalgias, imbalance
 - iii. Numbness, tingling and sensory loss
 - iv. Acute confusional states
 - v. Aphasias
 - vi. Memory loss and dementia
 - vii. Sleep disorder
- d. Alteration in Respiratory and Circulation
 - i. Dyspnoea
 - ii. Cough and haemoptysis
 - iii. Cyanosis
 - iv. Oedema
 - v. Shock
- e. Alteration in Gastrointestinal functions
 - i. Dysphagia
 - ii. Nausea, vomiting, indigestion
 - iii. Diarrhoea and Constipation
 - iv. Weight loss
 - v. Gastrointestinal bleeding
 - vi. Jaundice
 - vii. Abdominal swelling and ascites
- f. Alteration in Urinary functions and electrolytes
 - i. Incontinence and lower urinary symptoms
 - ii. Urinary abnormalities
- g. Alteration in Reproductive and Sexual functions
 - i. Erectile dysfunction
 - ii. Disturbances of Menstruation
 - iii. Leucorrhoea
 - iv. Hirsutism
 - v. Infertility
- h. Alteration in Skin functions
 - i. Itching
 - ii. Eruptions
 - iii. Disorders of pigmentation
- i. Haematological alterations
 - i. Anaemia
 - ii. Bleeding
 - iii. Enlargement of Lymph nodes and spleen

(IV) Hom-PG-FCMHMM–04: Basic Concepts of Nutrition, Nutritional Diseases and Miasmatic Assessment

- a. Nutritional and Dietary assessment
- b. Malnutrition
- c. Vitamin and Mineral deficiency
- d. Obesity
- e. Eating disorders

(V) Hom-PG-FCMHMM–05: Interpretations of Laboratory and Radiological Investigations

- a. Haematology - All basic tests
- b. Serology
- c. Biochemistry
- d. Microbiology
- e. Special tests – Hormonal Assays – Thyroid function tests, LH, FSH, Prolactin, TORCH, Triple marker, IgG/ IgM, HLA B27, Beta HCG, Anti-thyroid antibodies, Anti-cardiolipin antibodies.
- f. Basis Concepts of Radio Imaging like X-rays, CT, MRI
- g. USG
- h. ECG (Basic applications)

VI. Course over view:

Note:

Some course and content templets are displayed here for guidelines as example rest of the institute shall prepare themselves for their implementation and documentation

Hom-PG-FCMHMM-01:

Table-1

Course Overview:	This course will provide students of MD Hom (HMM) with an overview of the significance of displaying ethical based clinical practice in HMM.
Learning Outcomes:	<p>Competency : Hom-PG-FCMHMM-01-01 Identifies ethical-based clinical practices in repertory.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the process of eliciting symptoms from the experience of the patient. ▪ Discuss the importance of converting the symptoms into prescribing totality. ▪ Identify the relevant HMM references amongst the cross references. ▪ Discuss the importance of authentic data publication in journals and dissertations. ▪ Comply with issues related to plagiarism. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrates fidelity in converting the experience shared by patient using all senses. ▪ Demonstrates truthfulness in writing the right symptoms choosing right words. ▪ Construct the totality used have the intended meaning desired by the author. ▪ Delivers a publication ready document which ensure free of plagiarism and no manipulation of data. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Appreciates the process involved ensuring ethical based clinical practice in HMM.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Hom PG-FMHMM-03:

Table-2

Course Overview:	This course will provide students of MD Hom (HMM) with an overview of the significance of utilisation of clinical Materia Medica as credible database for shortlisting prescription possibilities for pain in general and various locations in particular.
Learning Outcomes:	<p>Competency : Hom-PG-FCMHMM-03-02-01:Explain the pathogenesis of pain in general and locations in particular.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the various Patho – physiological processes involved in genesis of pain. ▪ Identifies the role of psycho – neuro endocrine axis in genesis of pain.

	<ul style="list-style-type: none"> ▪ Discuss the representation of pain in different remedies in clinical Materia Medica with differentiation. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrates bedside case taking skills. ▪ Identifies the symptom based on subjective and objective expressions. ▪ Search the relevant symptomatology with differential symptoms from different clinical Materia Medica. ▪ Demonstrate the logic behind the choice of clinical Materia Medica. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Recall the experience with referencing the clinical Materia Medica result with cause of pain. <p>Competency 2: Hom-PG-FCMHMM–03-02-02: Differentiates the types of pain based on location association.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Identifies the different types of pains in relation to location. ▪ Relate with the pathogenesis. ▪ Identifies the pain and enquires appropriately. ▪ Identifies the characteristics in the pain sensation. ▪ Aware of the role of homoeopathy ▪ Identifies the investigations to be indented. ▪ Concludes the clinical diagnosis. ▪ Aware of representation of pain and location in clinical Materia Medica books ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ To logically demonstrate the need of clinical Materia Medica ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Identify the critical incidents that supported your prescription decision to be unbiased.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Table-3

Course Overview:	This course will provide students of MD Hom (Hom. Materia Medica) with an overview of the significance of utilisation of HMM as credible source for management and treatment possibilities for Gastro-intestinal bleeding.
Learning Outcomes:	<p>Competency 1: Hom-PG-FCMHMM–03-03-01 Explain the pathogenesis of Gastro-intestinal bleeding.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the various pathological conditions leading to Gastro-intestinal bleeding. ▪ Describe the predisposition and dispositions prone for gastrointestinal bleeding ▪ Interpret the data collected from the case taking ▪ Assemble the clinical and homoeopathic data Relate the gastrointestinal bleedings with examination findings ▪ Discuss differential diagnosis of the gastro intestinal bleedings ▪ Relate gastrointestinal bleeding with investigation findings ▪ Identifies the symptom based on subjective and objective expressions ▪ Describe the various pathogenesis, clinicopathological correlation

	<ul style="list-style-type: none"> and miasmatic correlation ▪ Explain the different causation at the level of bio-psycho-social-cultural-economical -political-religious responsible for the gastrointestinal bleeding ▪ Classify the different evolution of gastrointestinal bleeding from reversible to irreversible pathologies ▪ Classify the diseases with gastrointestinal bleeding from Hahnemannian classification ▪ Define the scope and limitation of homoeopathic management for the same ▪ Relate gastrointestinal bleedings with range of susceptibility ▪ Define the follow up criteria and remedy response for the gastrointestinal bleedings ▪ Apply all the clinical and homoeopathic knowledge to construct homoeopathic Materia medica for gastrointestinal bleeding ▪ Comparative study of various homoeopathic remedies for Gastro-intestinal bleeding based on nature and site and pathogenesis. ▪ Discuss differential HMM for gastrointestinal bleeding at the level of acute, chronic and intercurrent ▪ Describe range of susceptibility and miasm of gastrointestinal bleeding remedies ▪ Relate the different remedies of gastrointestinal bleeding to various clinical Materia medica (Farrington, Boericke, Clarke ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrates bedside case taking skills in cases of Gastro-intestinal bleeding. ▪ Perform homoeopathic clinical case taking of the gastrointestinal bleeding ▪ Demonstrate the physical examination skill. ▪ Construct different reportorial totalities and reportorial references of gastrointestinal bleeding ▪ Construct acute, intercurrent and chronic totalities of gastrointestinal bleedings ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Recall the experience with homoeopathic remedies used in cases of Gastro-intestinal bleeding. ▪ Recall the experience of differentiating various homoeopathic remedies used in cases of Gastro-intestinal bleeding based on nature and location.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	As per the list
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning.

Table-4

Course Overview:	This course will provide overview of dyspnoea, its understanding in clinical practise and its homoeopathic perspective.
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Learning Outcomes:	<p>Competency 1: Hom-PG-FCMHMM–03-04-01 Exploring Dyspnoea as a symptom and its holistic understanding in light of homoeopathic perspective and clinical medicine</p> <ul style="list-style-type: none"> • Knowledge <ul style="list-style-type: none"> ▪ Discuss the etiopathogenesis of dyspnoea ▪ Conclude etiopathogenesis of dyspnoea from homoeopathic perspective ▪ Discuss the other clinical features associated with dyspnoea ▪ Explain the pathogenesis of Dyspnoea ▪ Plan investigation for confirmation of diagnosis ▪ Formulate provisional clinical diagnosis and differential diagnosis ▪ Explain Clinical differentiation of symptoms for assessment of nosological diagnosis ▪ Discuss investigation for confirmation of diagnosis ▪ Classify dyspnoea from Hahnemannian classification of disease ▪ Apply clinical insight in classifying miasm (Psoric, Syphilitic and Sycotic) ▪ Correlate Hahnemann's concept and modern medicine for the understanding of dyspnoea ▪ Classify the symptoms with analysis and evaluation ▪ Ascertain prognosis from clinical medicine and homoeopathic perspective ▪ Plan Diet as regimen as per the nosological diagnosis and Hahnemann's directions. ▪ Plan the line of management (Medicinal and/or auxiliary management) ▪ Plan Strategy for homoeopathic management • Skill: <ul style="list-style-type: none"> ▪ Perform Homoeopathic Case taking including anamnesis ▪ Perform Clinical examination of chest and other relevant systems. ▪ Display Homoeopathic approach in terms of anamnesis, susceptibility and miasmatic analysis ▪ Construct prescribing Totality ▪ Refer appropriate clinical Materia Medica for dyspnoea for indicated and differential Materia Medica • Reflection: <ul style="list-style-type: none"> ▪ Integrated approach in understanding dyspnoea ▪ Identify social, economic, environmental, biological and emotional determinants of dyspnoea ▪ Common remedies used in OPD and IPD for dyspnoea
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	As per the list
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Hom PG-FMHMM–04

Table-5

Course Overview:	This course will provide students of MD Hom (HMM) with an overview of the significance of utilisation of clinical Materia Medica as credible database for malnutrition, vitamin and mineral deficiency, obesity, eating disorder.
Learning Outcomes:	Competency : Hom-PG-FCMHMM–03-05-01:Identifies subjective and

objective signs and symptoms of malnutrition, vitamin and mineral deficiency, obesity, eating disorder.

▪ Knowledge

- Describes the various Patho – physiological processes involved in genesis malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Identifies the role of psycho – neuro endocrine axis in genesis of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Identifies the role of predisposition and susceptibility in genesis of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Aware of subjective and objective signs and symptoms of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Defines the level of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Discuss the role of diet and nutritional supplements in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Identifies the scope of homoeopathy alone in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Awareness of representation in Repertory of signs and symptoms related to malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Apply clinical symptoms and characteristics for referring clinical Materia Medica

▪ Skill

- Demonstrates case taking skills in assessment of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Demonstrates the clinical examination skills of signs and symptom of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Demonstrates the assessment skills of level and intensity of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Refers appropriate repertory and relevant rubrics that represent the malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Refer appropriate clinical Materia Medica for management of nutritional disorders

▪ Reflection

- Appreciates the process involved in assessment of malnutrition, vitamin and mineral deficiency, obesity and eating disorders and scope of homoeopathy.

Competency : Hom-PG-FCMHMM–03-05-02: Refers appropriate clinical Materia Medica to manage malnutrition, vitamin and mineral deficiency, obesity and eating disorders. types of pain based on location association.

▪ Knowledge

- Identifies the different clinical Materia Medica useful for management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
- Identifies the appropriateness of clinical Materia Medica in differentiation of remedies in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.

	<ul style="list-style-type: none"> ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ To logically demonstrate the utility of clinical Materia Medica in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Identifies the scope of use of clinical Materia Medica in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	As per the list
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Hom PG-FMHMM-05:

Table-6

Course Overview:	This course will provide overview of dyspnoea, its understanding in clinical practise and its homoeopathic perspective.
Learning Outcomes:	<p>Competency : Hom-PG-FCMHMM-05-06-01 Interpretation of Liver Function test in light of homoeopathic perspective and clinical medicine.</p> <ul style="list-style-type: none"> • Knowledge <ul style="list-style-type: none"> ▪ Explain the liver functions ▪ Discuss Etiopathogenesis of liver disorders ▪ Interpret investigation for liver function. ▪ Classify the liver function in to functional and structural representation ▪ Classify the liver function as representation of different Miasm (Psoric, Syphilitic and Sycotic) ▪ Explain the march of susceptibility as per the liver function test ▪ Correlate Hahnemann's concept and modern medicine for the understanding liver function test ▪ Justify prognosis from clinical and homoeopathic medicine based on liver functions test. ▪ Plan the line of management based on Liver Function test ▪ Identify Striking, singular, uncommon, and peculiar symptoms based on laboratory findings. ▪ Relate liver function test to clinical Materia Medica ▪ Apply laboratory findings in selection of medicine, potency, repetition of doses. ▪ Apply laboratory findings in prescribing diet and regimen from modern and homoeopathic point of view. ▪ Discuss prognosis from clinical medicine and homoeopathic perspective. • Skill: <ul style="list-style-type: none"> ▪ Perform clinical and homoeopathic history based on laboratory findings. ▪ Corelation of clinical history with laboratory finding. • Reflection: <ul style="list-style-type: none"> ▪ Relate use of laboratory test in judicious management of clinical cases ▪ Relate the utility of laboratory finding in differential Materia Medica
Assessment:	Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	As per the list
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training	During eighteenth month of training
	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Homoeopathic Materia Medica	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Clinical Medicine in Homoeopathic Materia Medica	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Course Numbers

- i. Hom-PG-FCMHMM–01: Introduction to the Practice of Evidence-based Medicine
- ii. Hom-PG-FCMHMM–02: Developing a Basic Clinical Approach. All the following content has to be delivered through clinical cases and bedside clinic
- iii. Hom-PG-FCMHMM–03: Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification and clinical HMM through clinical cases and bedside
- iv. Hom-PG-FCMHMM–04: Basic Concepts of Nutrition, Nutritional Diseases and Miasmatic Assessment
- v. Hom-PG-FCMHMM–05: Interpretations of Laboratory and Radiological Investigation

VII (2b). Question Paper Layout

Sr no	Course content	Application based questions	Weightage
Q 01	HomPG-FMHMM–01 or 03 or 04	20 x1	20 marks
Q 02	HomPG-FMHMM–01	10 marks	40 marks
Q 03	HomPG-FMHMM–03: a or c	10 marks	
Q 04	HomPG-FMHMM–03: d	10 marks	
Q 05	HomPG-FMHMM–03: e	10 marks	
Q 06	HomPG-FMHMM–04	5 marks	40 marks
Q 07	HomPG-FMHMM–03: b or i	5 marks	
Q 08	HomPG-FMHMM–03: f	5 marks	
Q 09	HomPG-FMHMM–03: g	5 marks	
Q 10	HomPG-FMHMM–03: h	5 marks	
Q 11	HomPG-FMHMM–05: a or b or c	5 marks	
Q 12	HomPG-FMHMM–05: d or e	5 marks	
Q 13	HomPG-FMHMM–05: f or g or h	5 marks	

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination: A Common Practical/viva for Part I Paper 1 and

6. LIST OF BOOKS

- Adam Feather; David Randall; Mona Waterhouse . (2020). *Kumar and Clark's Clinical Medicine (10/E)*. Elsevier.
- Allen, H. C. (2002). *Keynotes and Characteristics with Comparisons*.
- Andrew R Houghton, David Gray. (2010). *Chamberlain's Symptoms and Signs in Clinical Medicine, An Introduction to Medical Diagnosis (13/E)*. Hodder Arnold.
- Barbara Bates, Lynn S. Bickley. (2004). *Bates' Guide to Physical Examination and History Taking (8/E)*. Lippincott Williams and Wilkins.
- Bhanja, K. C. (1972). *Masterkey to Homeopathic Materia Medica*.
- Blackwood, A. L. (2016). *A manual of materia medica, therapeutics and pharmacology, with clinical index*.
- Boericke, W. (1993). *Pocket Manual of Homoeopathic Materia Medica & Repertory*.
- Boger, C. M. (2010). *A Synoptic Key of the Materia Medica*.
- Choudhuri, N. M. (2003). *A Study on Materia Medica*.
- Clarke, J. H. (1990). *A Dictionary Of Practical Materia Medica*.
- Cyril M. Macbryde, R.S. Blacklow. (1983). *Signs and Symptoms: Applied Pathologic Physiology and Clinical Interpretation (6/E)*. HarperCollins,Australia.
- Davis, M. A. (1999). *Signs and Symptoms in Emergency Medicine: Literature-Based Guide to Emergent Conditions*. Mosby.
- Farrington, E. A. (1992). *Lectures on Clinical Materia Medica*.
- Gupta. (2005). *Differential Diagnosis (Medicine, Surgery, Obs/Gynae, Ophth, Paed, Dental) (7/E)*. Jaypee Brothers Medical Publishers Private Limited.

15. Kamath, S. A. (2022). *API Textbook of Medicine (12/E)*. Jaypee Brothers Medical Publishers.
16. Kent, J. T. (1992). *Lectures on Homoeopathic Materia Medica*.
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19. Loscalzo. (2022). *Harrison's Principles of Internal Medicine (21/E)*. New Delhi: McGraw Hill / Medical.
20. Mathur, K. N. (2003). *Systematic Materia Medica of Homoeopathic Remedies*.
21. Mehta, P. J. (2023). *Practical Medicine (22/E)*. The National Book Depot.
22. Nash, E. B. (2014). *Leaders in homoeopathic Therapeutics*.
23. Penman, I. (2022). *Davidson's Principles and Practice of Medicine (24/E)*. ELSEVIER.
24. Phatak, S. R. (2003). *Materia Medica of Homoeopathic Medicines*.
25. Pierce, W. I. (2016). *Plain Talks On Materia Medica*.
26. Pulford, A. (2002). *Homoeopathic Materia Medica of Graphical Drug Pictures*.
27. Tyler, M. L. (2008). *Homoeopathic Drug Pictures*.

Template for Specialty Subject

HOMOEOPATHIC PHILOSOPHY

1. Title of the Specialty Course, and its abbreviation.

Doctor of Medicine (Homoeopathy) Homoeopathic Philosophy

MD (Hom) Homoeopathic Philosophy

2. Brief description of specialty and its relevance in homeopathy post-graduate course.

The purpose of studying Homoeopathic Philosophy as a subject in MD (Hom.) Degree course is to obtain a clear understanding of fundamental aspects of homoeopathic science and its philosophical basis. This course enables the students to provide patient-centered care based on homoeopathic principles for appropriate and effective therapeutic, preventive, and promotive healthcare. Post-graduation in MD Homoeopathic Philosophy therefore, aims to train the basic homoeopathic graduates to develop a clear understanding that homoeopathic philosophy is an extension and application of general philosophy in furtherance of healthcare decisions.

Philosophy is a significant aspect of healthcare education because it helps the students to develop skills and attitudes such as examining key assumptions, broadening their perspectives infusing self-knowledge, and developing critical thinking skills. It also provides the tools for analyzing concepts in medicine such as disease, health, and cure. It is all the more important for homoeopathic professionals as homoeopathy is based on a distinct holistic, individualistic, and dynamic understanding of life, health, and disease. The study of homoeopathic philosophy provides insights into the evaluation and management of disease at different levels of the healthcare delivery system.

This program helps to distinguish the uniqueness of homoeopathic philosophy concerning the modern concept of healthcare and apply it in a range of clinical and community contexts. To further these competencies, this program anchors the students in the fundamentals of general philosophy, logic, and scientific methods, and aligns them with Hahnemannian concepts. As a result, the students would be sensitised to critically review literature, and integrate and apply knowledge of established and evolving clinical and epidemiological sciences. It also offers opportunities for validating and advancing the understanding of homoeopathic principles and engaging in evidence-based clinical practice.

3. Program Objectives (Entrustable Professional Activities - EPAs)

1. Gather information to perceive the bio-pathographical evolution of disease.
2. Identify social, economic, environmental, biological, and emotional determinants of health and diseases in light of understanding of accessory circumstances of a case.
3. Diagnose acute and chronic diseases based on clinical assessment.
4. Prioritize a differential diagnosis following a clinical encounter.
5. Recommend and interpret appropriately selected and conducted investigations.
6. Outline the scope and limitations of Homoeopathy in acute and chronic diseases.
7. Perform holistic case analysis for planning therapeutic, rehabilitative, preventive, and promotive measures/strategies.
8. Interpret the prognosis in each case based on the teachings of Hahnemann and post-Hahnemannian stalwarts.
9. Recognize the need for second opinion / expert advice to improve quality of care
10. Demonstrate empathy and a humane approach towards patients and their families and exhibit appropriate interpersonal behaviour in light of basic principles of psychology
11. Consistently adhere to legal and ethical principles in professional practice.
12. Improve instructional methods and assessment practices for Homoeopathic philosophy at undergraduate and postgraduate levels.

13. Critically examine the translational value of Homoeopathic principles and logic
14. Relate the role of Homoeopathic philosophy in the context of the health needs of the community and the national priorities in the health sector.
15. Demonstrate competence in basic concepts of research methodology and epidemiology.
16. Critically analyse relevant published research literature in conjunction with Homoeopathic principles.
17. Publish evidence-based documentation for validation of principles of Homoeopathic philosophy.
18. Consistently demonstrate characteristics of self-directed learning by recognising continuing educational needs, and using appropriate learning resources.
19. Demonstrate skills in using educational methods and techniques as applicable to the teaching of general physicians and health workers.
20. Participate as a contributing and integrated member of an interprofessional team
21. Function as an effective leader of a health team engaged in health care, research or training.
22. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education

3a. Mapping of EPAs and Domain Competencies

Sr. No	EPA	KS	PC	HO	CS	PBL	PRF
1	Gather information to perceive bio-pathographical evolution of disease	√	√	√	√	√	-
2	Identify social, economic, environmental, biological and emotional determinants of health and diseases in light of understanding of accessory circumstances of a case.	√	√	√	√	√	-
3	Diagnose acute and chronic diseases on the basis of clinical assessment.	√	√	√	-	√	-
4	Prioritize a differential diagnosis following a clinical encounter.	√	√	√	-	√	-
5	Recommend and interpret appropriately selected and conducted investigations.	√	√	√	-	√	√
6	Outline the scope and limitations of Homoeopathy in acute and chronic diseases.	√	√	√	-		√
7	Perform holistic case analysis for planning therapeutic, rehabilitative, preventive, and promotive measures/strategies.	√	√	√	-	√	-
8	Interpret prognosis in each case on basis of teachings of Hahnemann and post Hahnemannian stalwarts.	√	√	√	-	√	-
9	Recognise the need for second opinion / expert advice to improve quality of care	√	√	√	-	√	√
10	Demonstrate empathy and humane approach towards patients and their families and exhibit appropriate interpersonal behaviour in light of basic principles of psychology	√	√	√	√	√	√
11	Consistently adhere to legal and ethical principles in professional practice.	√	-	√	√		√
12	Improve instructional methods and assessment practices for Homoeopathic philosophy at undergraduate and postgraduate levels.	√	-	√	√	√	√
13	Critically examine the translational value of Homoeopathic principles and logic	√	-	√	-	√	√

14	Relate the role of Homoeopathic philosophy in the context of the health needs of the community and the national priorities in the health sector.	√	-	√	-	√	-
15	Demonstrate competence in basic concepts of research methodology and epidemiology.	√	-	√	-	-	-
16	Critically analyse relevant published research literature in conjunction with Homoeopathic principles.	√	-	√	-	-	√
17	Publish evidence-based documentation for validation of principles of Homoeopathic philosophy.	√	-	√	-	-	√
18	Consistently demonstrate characteristics of self-directed learning by recognising continuing educational needs, and using appropriate learning resources.	√	-	√	-	√	√
19	Demonstrate skills in using educational methods and techniques as applicable to the teaching of general physicians and health workers.	√	-	-	-	√	√
20	Participate as a contributing and integrated member of an interprofessional team	√	-	-	√	-	√
21	Function as effective leader of team that is engaged in health care, research and training	√	-	-	√	-	√
22	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	√	-	-	√	√	√

3b. Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

EPAs	Part 1			Part 2		
	Sem / Mod 1	Sem / Mod 2	Sem / Mod 3	Sem / Mod 4	Sem / Mod 5	Sem / Mod 6
Gather information to perceive bio-pathographical evolution of disease	2 Demonstrates respect for patient privacy and autonomy Communicates effectively with patient and or attendants, care givers etc.	2 Understand the evolution of disease in different phases of life	3 Develop understanding of bio-pathographical progress of disease	4 Becomes aware of use of knowledge, skill and emotional limitation of self	4 Documents accurately and legibly.	5 Works effectively in various health care settings and demonstrates application of appropriate knowledge, skill and attitude
Identify social, economic, cultural, environmental, biological and emotional determinants of health and diseases in light of understanding	2 Gather information regarding social, economic, cultural, environmental, biological and emotional factors	2 Integrate the data gathered for case analysis	2 Define the philosophy and importance of accessory circumstances	3 Application of knowledge and skill in utilising the information regarding social, economic, cultural, environmental, biological and	4 Conclude the scope of homoeopathy considering holistic concept of health and disease	5 Ensures juniors follow steps defined accurately.

of accessory circumstances of a case.	influencing health and disease			emotional factors influencing health and disease		
Diagnose indisposition, acute and chronic diseases on the basis of clinical assessment and identify its type	2 Gather clinical information with emphasis on anamnesis	2 Understand the homoeopathic concept of indisposition, acute and chronic diseases and their types	3 Diagnose the disease according to homoeopathic perspective	3 Develop the strategy for case management	4 Ensure compliance of case management	5 Demonstrates effective implementation of homoeopathic classification of disease
Prioritize a differential diagnosis following a clinical encounter.	2 Organizes the data obtained and suggest a differential diagnosis	2 Concludes the differential diagnosis of pathology and miasm, based on case analysis and physical examination	3 Prioritize the process of case management in light of homoeopathic philosophy	4 Develop the strategy for case management	5 Conveys the process adopted in arriving at differential diagnosis	5 Orients the juniors the process to be adopted to arriving at differential diagnosis
Recommend and interpret appropriately selected and conducted investigations.	2 Identifies area involved in planning appropriately selected and conducted investigations.	2 Documents appropriately and accurately the planning of appropriately selected and conducted investigations.	3 Demonstrates accurate documentation of diagnostic position for planning comprehensive homoeopathic management	3 Seeks proactively feedback on process of diagnostic position for comprehensive homoeopathic management documented	3 Seeks proactively feedback on assessment of process adopted in periodic follow ups of patients in determining continuation or revision for diagnostic position planning comprehensive homoeopathic management	4 Demonstrates effective implementation of diagnostic position for planning comprehensive homoeopathic management
Outline the scope and limitations of Homoeopathy in acute and chronic diseases.	2 Define the scope and limitation of homoeopathic system of medicine	2 Demonstrate the scope and limitation of homoeopathy in different clinical settings	3 Outline the clinical management on basis of understanding of homoeopathic philosophy	3 Identify the tools for the implementation of clinical management	4 Application of case management strategy and obtaining feedback	5 Demonstrate the scope and limitation of homoeopathy to the juniors and students
Perform holistic case analysis for planning therapeutic, rehabilitative, preventive, and promotive measures/strategies.	2 Understand the methods of holistic case analysis for planning therapeutic, rehabilitative, preventive, and promotive measures/strategies	2 Understand the modalities of therapeutic, rehabilitative, preventive, and promotive measures/strategies	2 Identify the tools for the implementation of clinical management strategy	3 Application of different types of strategies for different clinical outcomes	4 Feedback and validation of treatment strategies	5 Demonstrates application of therapeutic, rehabilitative, preventive, and promotive measures/strategies to students and juniors

Interpret prognosis in each case on basis of teachings of Hahnemann and post Hahnemannian stalwarts.	2 Understand the Hahnemannian concept of remedy reaction and prognosis	2 Understand the post Hahnemannian concept of remedy reaction and prognosis	3 Understanding prognosis and clinical outcome in different case studies	4 Application of knowledge and skill in assessment of prognosis	4 Feedback and validation of prognostic markers	5 Engages the students in understanding the various types of remedy reaction and prognosis
Recognise the need for second opinion / expert advice to improve quality of care	2 Learns when to seek second opinion / expert advice	2 Attempts to define reasons for second opinion / expert advice	3 Communicates with patient and colleagues the need for second opinion / expert advice	4 Communicate with expert reasons for second opinion	4 Learn to accept feedback on gaps in self's evidence-based medicine	5 Demonstrates the process of how and when to seek second opinion / expert advice
Demonstrate empathy and humane approach towards patients and their families and exhibit appropriate interpersonal behaviour in light of basic principles of psychology	2 Understanding patient physician relationship in light of basic principles of psychology	2 Communicates with patient and family empathetically	3 Develops skill in Interpersonal behaviour	4 Exhibits the art of humane approach towards patients and their families	4 Effectively replicates the application of psychology to patient care	5 Demonstrates the process of empathy and humane approach towards patients
Consistently adhere to legal and ethical principles in professional practice.	2 Demonstrates awareness of responsibilities	2 Adheres to responsibilities	3 Ensures adherence to responsibilities	3 Proactively open to feedback in gaps in adherence.	4 Ensure awareness of adherence in various clinical settings and clinical conditions	5 Demonstrates the adherence in various clinical settings and clinical conditions
Improve instructional methods and assessment practices for Homoeopathic philosophy at undergraduate and postgraduate levels.	1 Proactively seeks the process	2 Attempts to demonstrates the importance through actions	2 Demonstrate the value experienced through consistent self-driven effort	3 Submits to feedback on the process adopted and tools utilized	3 Attempts to proactively adapt and change based on feedback	4 Demonstrates through action the use of tools to become a self-directed learner.
Critically examine the translational value of Homoeopathic principles and logic	2 Accurately examines the Homoeopathic principles and logic	2 Explores the application of Homoeopathic principles and logic	3 Develops skill in its application	4 Applies Homoeopathic principles and logic in different clinical settings	4 Feedback and validation of Homoeopathic principles in practise	5 Demonstrates the importance and advantages of understanding Homoeopathic principles and logic
Relate the role	2	2	2	3	4	5

of Homoeopathic philosophy in the context of the health needs of the community and the national priorities in the health sector.	Understanding the health needs of the community and the national priorities in the health sector.	Exploring the role of homoeopathic philosophy in the context of the health needs of the community.	Exploring the role of homoeopathic philosophy in the context of the national priorities in the health sector.	Application of homoeopathic philosophy for health needs of community and nation	Ensure awareness of homoeopathy in context of the health needs of the community	Demonstrates the importance of homoeopathic philosophy in health of community and nation
Demonstrate competence in basic concepts of research methodology and epidemiology.	1 Orients self to research methodology as a subject	2 Proactively seeks guidance in application of research methodology	3 Identifies the avenues and processes that can be taken	3 Concludes the topic to work and applies the learnt processes	4 Conducts the research on the topic selected and consolidates the findings	5 Reviews the conclusions and identifies future areas for research
Critically analyse relevant published research literature in conjunction with Homoeopathic principles.	2 Critically analyses the published research literature	2 Attempts to demonstrate the importance of analyzing published research literature in conjunction with Homoeopathic principles	3 Seeks to validate the homoeopathic principles in light of modern researches	3 Identifies the avenues of scientific validation of homoeopathic principles	4 Submits to feedback on the process to be adopted for further validation	5 Demonstrates the need for critical review of research literature
Publish evidence-based documentation for validation of principles of Homoeopathic philosophy.	1 Becomes aware of importance	2 Explores the documentation already published	2 Consolidates the process to adopted	3 Attempts to document and publish evidence-based studies	4 Effectively documents and publish evidence-based studies	5 Ensures publication of research conducted
Consistently demonstrate characteristics of self-directed learning by recognising continuing educational needs, and using appropriate learning resources.	1 Proactively seeks the process	2 Attempts to demonstrates the importance through actions	2 Demonstrate the value experienced through consistent self-driven effort	3 Submits to feedback on the process adopted and tools utilized	4 Attempts to proactively adapt and change based on feedback	5 Demonstrates through action the use of tools to become a self-directed learner.
Demonstrate skills in using educational methods and techniques as applicable to the teaching of general physicians and health workers.	2 Identifies the skill essential	3 Attempts to implement the skill acquired	3 Masters the various skills of using educational methods and techniques	4 Attempts the application in various settings	4 Consistently applies the process across all settings and personalities	5 Observes the students and patients in action
Participate as a contributing and integrated	1 Becomes aware of need	2 Identifies situations by	2 Proactively participates	3 Proactively seeks others	4 Attempts to seek feedback	5 Effectively contributes as a

member of an interprofessional team		observation		participation	on self's lacunae in the process	team member
Function as effective leader of team that is engaged in health care, research, and training	1 Becomes aware of essential leadership qualities	2 Proactively seeks leadership role	2 Attempts to deliver leadership role	3 Seeks feedback on self's leadership traits	4 Explores opportunities to demonstrate leadership	5 Demonstrates effective leadership
Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	Justify the need for educational methodology as a component of PG Course.	Identify the learning objectives for their domain in Bloom's taxonomy. Identify the contexts of learning.	Recognise the levels of Guilbert. Indicate the level in Miller's Pyramid. Select appropriate instructional activities.	Write objectives for all domains of Bloom and levels of Guilbert. Identify assessment tools appropriate for the context.	Conduct evidence driven TL and Assessment of UG students.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

4. Courses and Course Objectives. (for Part 1, Part 2 Paper1, and Part 2 Paper 2)

LIST OF COURSES

Part 1:

1. HOM – PGOP – 01 History of Medicine
2. HOM – PGOP – 02 History of homoeopathy
3. HOM – PGOP – 03 Introduction to Organon of Medicine
4. HOM – PGOP – 04 Life, Health, and Disease
5. HOM – PGOP – 05 Cure and Recovery
6. HOM – PGOP – 06 Concept of Vital force
7. HOM – PGOP – 07 The sick - Disorder First in Vital Force
8. HOM – PGOP – 08 Sickness and Cure on Dynamic Plane
9. HOM – PGOP – 09 Preserver of Health & Protection from Sickness
10. HOM – PGOP – 10 Basics of knowledge of disease
11. HOM – PGOP – 11 Examination of the Patient and case analysis.
12. HOM – PGOP – 12 Indisposition and the Second-best Remedy
13. HOM – PGOP – 13 Role of susceptibility in homoeopathic practice
14. HOM – PGOP – 14 Reaction after administration of First dose
15. HOM – PGOP – 15 Drug proving

Part II – Paper I

1. HOM – PGOP – 01 Psychological Point of View
2. HOM – PGOP – 02 General interpretation of Homoeopathic philosophy
3. HOM – PGOP – 03 The Scope and limitations of Homoeopathy
4. HOM – PGOP – 04 Symptomatology and Evaluation of symptoms
5. HOM – PGOP – 05 Susceptibility, reaction and immunity
6. HOM – PGOP – 06 The Logic of Homeopathy
7. HOM – PGOP – 07 Analysis of the case
8. HOM – PGOP – 08 The chief complaint and the auxiliary symptoms in their relation to the case
9. HOM – PGOP – 09 The dynamic action of drugs
10. HOM – PGOP – 10 Prognosis after observing the action of the remedy/Remedy reaction

11. HOM – PGOP – 11 The second prescription
12. HOM – PGOP – 12 The Law of Similar
13. HOM – PGOP – 13 The Study of Provings
14. HOM – PGOP – 14 Individualisation

Part II – Paper II

1. HOM – PGOP – 01 Unity of Medicine
2. HOM – PGOP – 02 Schools of Philosophy
3. HOM – PGOP – 03 General Pathology of Homoeopathy
4. HOM – PGOP – 04 Phenomenological Viewpoint
5. HOM – PGOP – 05 Temperaments
6. HOM – PGOP – 06 Classification of Diseases
7. HOM – PGOP – 07 Suppression and Palliation
8. HOM – PGOP – 08 Local Application
9. HOM – PGOP – 09 Alternation of Remedies
10. HOM – PGOP – 10 Homoeopathic Posology
11. HOM – PGOP – 11 Relation of Pathology to Therapeutics
12. HOM – PGOP – 12 Different modes of treatment
13. HOM – PGOP – 13 Deflected current.

CONTENT DISTRIBUTION

MD PART I

TOPIC 1 Course Name: History of Medicine

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) with an overview of the history of medicine along with the study of state of medicine before and during Hahnemann's era.
Learning Outcomes:	<p>Competency 1: Explain the History of medicine, its spread in different countries</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Summarize the important milestones in the History of medicine Outline the state of Medicine in the primitive era State the philosophy of Indian, Egyptian, Mesopotamian, Greek and Roman Medicine <p>Skill</p> <ul style="list-style-type: none"> Trace the development of Western philosophy and its influence on medicine in general and homoeopathy in specific Trace the empirical, rationalistic and vitalistic thoughts <p>Reflection</p> <ul style="list-style-type: none"> Realising the value of developments in the field of medicine Evolution of medical practice of the ancients
Assessment:	<p>Continuous / Programmatic assessment (including Problem-Based Learning assessment: 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 1 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Ackerknecht Erwin H. Haushofer Lisa. 2016. A Short History of Medicine, Johns Hopkins University Press. Baltimore & London, Revised Edition</p> <p>Banerjee D.D. (2019). Glimpses of History of Medicine. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Garrison Fielding H. (1917). An Introduction to The History of Medicine W. B. Saunders Company. Philadelphia and London</p> <p>Haehl R. (2016). Samuel Hahnemann His life and work. B. Jain Publishers (P) Ltd. 12th Impression</p> <p>Park, K. (2021) Textbook of Preventive and Social Medicine”, Twenty sixth edition, M/s Banarsidas Bhanot Publishers.</p>

Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation
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Competency 02

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) with an overview of the history of medicine along with the study of state of medicine before and during Hahnemann's era.
Learning Outcomes:	<p>Competency 2: Understanding of writings of Hippocrates, Immanuel Kant, Paracelsus, and their influence on Hahnemannian Philosophy</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Summarise the Writings of Hippocrates Appraise the contribution of Immanuel Kant to the field of medicine Critique the philosophy of Paracelsus in the development of homoeopathy <p>Skill</p> <ul style="list-style-type: none"> Trace influence of Hippocrates and Immanuel Kant on homoeopathic Principles. Trace similarity and dissimilarity between Paracelsus and Hahnemann Trace the empirical, rationalistic and vitalistic thoughts <p>Reflection</p> <ul style="list-style-type: none"> Understanding the evolution of Hahnemannian Philosophy.
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Ackerknecht Erwin H. Haushofer Lisa. 2016. A Short History of Medicine, Johns Hopkins university press. Baltimore & London, Revised Edition Banerjee D.D. (2019). Glimpses of History of Medicine. B. Jain Publishers (P) Ltd, New Delhi. Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. 14th Impression. Garrison Fielding H. (1917). An Introduction to The History of Medicine W. B. Saunders Company. Philadelphia and London Haehl R. (2016). Samuel Hahnemann His life and work. B. Jain Publishers (P) Ltd. 12th Impression Park, K. (2021) Text book of Preventive and Social Medicine", Twenty sixth edition, M/s Banarsidas Bhanot Publishers.
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 2

Course Name: History of homoeopathy

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) with an overview of discovery and spread of homoeopathy in different continents of the world.
Learning Outcomes	<p>Competency 1: Explain the position of Homoeopathy in field of Medicine</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Recall the nature and origin of Homoeopathy Trace the growth and development of Homoeopathy in India, Europe and western countries. List the contributions of stalwarts in the development of Homoeopathy. State the Fundamental principles of Homoeopathy Discuss Hahnemann's life, his contributions, and the discovery of homoeopathy

	<ul style="list-style-type: none"> Discuss importance of evidence-supported decision in clinical practice according to different stalwarts <p>Skill</p> <ul style="list-style-type: none"> Establishing position of homoeopathy in field of medicine <p>Reflection</p> <ul style="list-style-type: none"> Recall your experience with referencing Hahnemannian and post Hahnemannian contributions in the evolution of homoeopathic system of medicine Development of scientific spirit and methods of science with reference to Hahnemannian homoeopathy as a Science.
Assessment:	Continuous / Programmatic assessment: 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Bradford Thomas Lindsley. (2006). Life and Letters of Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Haehl Richard. (2016). Samuel Hahnemann His Life & Work Vol.– I & II B. Jain Publishers (P) Ltd, New Delhi. 12 th Impressions Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi. Handley Rima. (1993). A Homeopathic Love Story: The Story of Samuel and Melanie Hahnemann. North Atlantic Books, California. Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi. Cook Trevor M. April 2008. Samuel Hahnemann: His Life and Times. B. Jain Publishers (P) Ltd, New Delhi.
Domains of Competencies	Knowledge / Homoeopathic Orientation

Competence 02

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) with an overview of the history of medicine along with the study of the state of medicine before and during Hahnemann's era.
Learning Outcomes:	<p>Competency 2: Influence of Philosophy of Goethe on Hahnemann</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Interpret Philosophy of Goethe for the understanding of homoeopathy Recall Hahnemann's Philosophy <p>Skill</p> <ul style="list-style-type: none"> Trace influence of Philosophy of Goethe on Hahnemann <p>Reflection</p> <ul style="list-style-type: none"> Understanding the evolution of Hahnemann's Philosophy
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Ackerknecht Erwin H. Haushofer Lisa. 2016. A Short History of Medicine, Revised Edition Johns Hopkins University Press. Baltimore & London, Banerjee D.D. (2019). Glimpses of History of Medicine. B. Jain Publishers (P) Ltd, New Delhi.. Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. 14th

	<p>Impression.</p> <p>Garrison Fielding H. (1917). An Introduction to The History of Medicine W. B. Saunders Company. Philadelphia and London</p> <p>Haehl R. (2016). Samuel Hahnemann His life and work. B. Jain Publishers (P) Ltd.</p> <p>Park, K. (2021) Text book of Preventive and Social Medicine”, Twenty sixth edition, M/s Banarsidas Bhanot Publishers.</p>
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation

Competency 03

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) with an overview of the history of medicine along with the study of the state of medicine before and during Hahnemann’s era.
Learning Outcomes:	<p>Competency 2: Influence of Swedenborg’s Philosophy on Kent</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Discuss the influence of Swedenborg’s on Kent’s exegesis of Organon of Medicine Describe the salient features of Kent’s Philosophy <p>Skill</p> <ul style="list-style-type: none"> Trace influence of Swedenborg’s Philosophy on Kent <p>Reflection</p> <ul style="list-style-type: none"> Understanding the evolution of Kentian thoughts and Philosophy
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 1 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Ackerknecht Erwin H. Haushofer Lisa. 2016. A Short History of Medicine, Johns Hopkins university press. Baltimore & London, Revised Edition</p> <p>Banerjee D.D. (2019). Glimpses of History of Medicine. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. 14th Impression.</p> <p>Garrison Fielding H. (1917). An Introduction to The History of Medicine W. B. Saunders Company. Philadelphia and London</p> <p>Haehl R. (2016). Samuel Hahnemann His life and work. B. Jain Publishers (P) Ltd. 12th Impression</p> <p>Park, K. (2021) Text book of Preventive and Social Medicine”, Twenty sixth edition, M/s Banarsidas Bhanot Publishers.</p>
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 3

Course Name: Introduction to Organon of Medicine

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) the insight to the meaning of the word Organon, style and editions of the Organon of medicine, teachings of application of principles of homoeopathy into practice.
Learning Outcomes:	<p>Competency 3: Justify the necessity of Organon of medicine in homoeopathic practice</p> <p>Knowledge</p> <ul style="list-style-type: none"> Trace the origin of Organon of medicine List the salient features of different editions and construction of Hahnemann’s Organon of medicine.

	<ul style="list-style-type: none"> Outline the Ground plan of Organon of medicine Mention the basics of Logic and utility of logic in homoeopathy Discuss the relationship between philosophy, science and logic <p>Skill:</p> <p>Reflection</p> <ul style="list-style-type: none"> Understanding the fundamental laws of homoeopathy according to the Master's writing and then demonstrate them in practice. Appreciating Organon as a product of application of inductive logical method of reasoning Understanding Homoeopathy in vertical and horizontal integration with pre, para & clinical subject.
Assessment:	Continuous / Programmatic assessment: 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi. Haehl Richard. (2016). Samuel Hahnemann His Life & Work Vol.- I & II B. Jain Publishers (P) Ltd, New Delhi, 12 th Impressions. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. (Third Edition) B. Jain Publishers (P) Ltd, New Delhi.
Domains Competencies	of Knowledge / Homoeopathic Orientation

TOPIC 4

Course Name: Life, Health and Disease

Course Overview:	This course will provide understanding of concept of Life, Health and Disease according to different stalwarts
Learning Outcomes:	<p>Competency 1: Understanding the concept of life and health according to different stalwarts</p> <p>Knowledge</p> <ul style="list-style-type: none"> Justify Health as a balanced condition of the living organism in which the integral, harmonious performance of the vital functions. Appraise Disease as a changed condition of life, which is inimical to the true development of the individual and tends to organic dissolution. Critique the relevance of Anthrapology, Sociology and Culture on life, Health Disease and cure. <p>Skill:</p> <ul style="list-style-type: none"> Identify social, economic, environmental, biological and emotional determinants of health and disease in a given case <p>Reflection:</p> <ul style="list-style-type: none"> Understanding Vital phenomena in health and disease as caused by the reaction of the vital substantial power or principle of the organism to various external stimuli.
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%

Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Dudgeon. R.E. (2019). Lesser Writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Park, K. (2023). Park's Textbook of Preventive & Social Medicine; M/s Banarsidas Bhanot Publishers. 27 th edition
Domains of Competencies	Knowledge , Homoeopathic Orientation , application

TOPIC 5

Course Name: Cure and Recovery

Course Overview:	This course will provide understanding of concept of cure and recovery which builds the conceptual base for the physician.
Learning Outcomes:	<p>Competency 1: Understanding cure and recovery of diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> Describe Hahnemann's modern concept of cure and protection from Sickness Evaluate the concept of prophylaxis and its critical study in relation to principles of homoeopathic therapeutics <p>Skill</p> <ul style="list-style-type: none"> Understanding of cure and recovery according to Homoeopathy Ability to plan therapeutics, rehabilitative, preventive measures / Strategies <p>Reflection</p> <ul style="list-style-type: none"> Identify critical elements of treatment of the diseases through judicial application of homoeopathic principles
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. Reprint edition IBPP, New Delhi. Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine, Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Ninth Revised Edition Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 6

Course Name: Concept of Vital force

Course Overview:	This course will provide overview of historical concept of temperaments, its utility in in perception of pathogenesis of homoeopathic medicines and application in clinical practise
Learning Outcomes:	<p>Competency 1: Understanding the concept of life and health according to different stalwarts</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain vital force as expressed in functions: In health, in disease, in recovery, in cure. Discuss the significance of Simple Substance according to Kent

	<ul style="list-style-type: none"> Correlate Hahnemann's concept and modern concept of Vital principle <p>Skill:</p> <ul style="list-style-type: none"> Identify social, economic, environmental, biological and emotional determinants of health in a given case <p>Reflection:</p> <ul style="list-style-type: none"> Understanding of Vital force in context of its nature and functions
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Topic 7

Course Name: The sick - Disorder First in Vital Force

Course Overview:	This course will provide overview of distinct approach of homoeopathy towards sick and sickness with concept of individualization and recognizing an ailing individual by studying him as a whole.
Learning Outcomes:	<p>Competency 5: Understanding of Sick according to Homoeopathy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the concept of disease according Hahnemann and conventional medicine Discuss the concept of will and understanding of man and his sickness Discuss the concept of Sick, Sickness and Cure on Dynamic Plane Differentiate between the Maintaining External Causes and Surgical Cases <p>Skill</p> <p>Reflection</p> <ul style="list-style-type: none"> Comprehension of evolution of disease, the pre-disposing factors associated with them
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%

Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.</p> <p>Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 8:

Course Name: Sickness and Cure on Dynamic Plane

Course Overview:	This course will provide overview deranged vital force and cured in dynamic planes and understanding for perceiving sickness.
Learning Outcomes:	<p>Competency 1: Understanding sickness and cure in dynamic planes</p> <p>Knowledge</p> <ul style="list-style-type: none"> Correlate the concept of cure as from Hahnemann's perspective and modern perspective Illustrate the concept of Cure and Recovery according to different stalwarts <p>Skill:</p> <ul style="list-style-type: none"> Understanding of cure and recovery according to Homoeopathy <p>Reflection</p> <p>Identify the elements critical for development of Hahnemann's concept of cure and recovery</p>
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 1 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.</p> <p>Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 9:

Course Name: Preserver of Health & Protection from Sickness

Course Overview:	This course will provide comprehension of health, its preservation and evolution of natural disease
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Learning Outcomes:	Competency 1: Understanding Preventive care Knowledge <ul style="list-style-type: none"> Explain the role of Physician as preserver of health Discuss the basic principles of health promotion and prevention of disease Skill: Reflection <ul style="list-style-type: none"> Knowledge of prophylaxis in homoeopathy Monitoring and training personal and social hygiene
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Dudgeon. R. E. (2019). Lesser writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Park, K. (2023). Park's Textbook of Preventive & Social Medicine; M/s Banarsidas Bhanot Publishers. Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 10:

Course Name: Basics of knowledge of disease

Course Overview:	This course will provide overview of concept of disease by Case perceiving and the general pathology of homoeopathy
Learning Outcomes:	Competency 1: Clinical classification of diseases in homoeopathy Knowledge <ul style="list-style-type: none"> Classify diseases according to Hahnemann Discuss management of various types of diseases Explain the significance of miasmatic interpretation and how each miasmatic stage evolves Skill <ul style="list-style-type: none"> Reflection <ul style="list-style-type: none"> Appreciate the fundamental cause in progression of disease and obstacles of cure
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New

	<p>Delhi. Reprint edition.</p> <p>Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Dudgeon. R. E. (2019). Lesser writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. R.E. 14th Impression</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition</p> <p>Park, K. (2023). Park's Textbook of Preventive & Social Medicine; M/s Banarsidas Bhanot Publishers. 27th edition</p> <p>Roberts, H. A. (1995). The Principles and Art of Cure by Homoeopathy. B. Jain publishers pvt. Ltd.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 11

Course Name: Examination of the Patient and case analysis.

Course Overview:	This course will provide orientation of homoeopathic case taking and Understanding person in wider dimension with correct application of causes of disease
Learning Outcomes:	<p>Competency 1: Learning the principles of case taking according to homoeopathic philosophy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Outline the basic component of Examination of the Patient Explain the Importance of observation in case taking and Record Keeping Describe the concept of non-remedial, auxiliary method in treatment of diseases <p>Skill:</p> <ul style="list-style-type: none"> Case perceiving Understand the scope and limitation of homoeopathy <p>Reflection</p> <p>Analysing the critical components for Individualization of Patient</p> <p>Reflect on the basic principles of case Management</p> <p>Competency 2: Demonstrate Analysis, evaluation of the case to form the Portrait of disease</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the Importance of symptoms in homoeopathy Classify symptoms according to different stalwarts Discuss the basic concepts of Analysis and evaluation of case <p>Skill</p> <p>Outline the concept of totality of symptoms and selection of right homoeopathic remedy</p> <p>Reflection</p>

	<ul style="list-style-type: none"> Holistic Perception of the patient with correct appreciation of the factors responsible for the origin and maintenance of illness
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Dhawale, M.L. (1994). Principle and Practice of Homeopathy”, Published by Institute of Clinical Research Bombay. Dunham C. (2003). How To Case Taking. B. Jain Publishers (P) Ltd. New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Roberts, H. A. (1995). The Principles and Art of Cure by Homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition Schmidt, P. (1980). Defective Illness”, Hahnemannn Publishing Co. Private Ltd. First edition.. Khan Lal Mohammad. (2013). Case Perceiving: Know Thyself. B. Jain publishers pvt. Ltd. New Delhi. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Third Edition Wright Hubbard Elizabeth. (2009) A Brief Study Course in Homoeopathy”, B. Jain publishers Pvt Ltd. Schmidt, P. (2003) The Art of Interrogation. B. Jain Publishers (P) Ltd, New Delhi. Schmidt, P. (2003) The Art of Case Taking. B. Jain Publishers (P) Ltd, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic 12

Course Name: Indisposition and the Second-best Remedy

Course Overview:	This course will provide the knowledge of differentiation between indisposition and acute disease and utility of placebo as a second best remedy
Learning Outcomes:	<p>Competency 1: Understanding Indisposition as mimicking sickness</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Explain indisposition as a state of sickness arising from improper diet, habits or lifestyle. <p>Skill</p> <ul style="list-style-type: none"> Discriminate between exciting or maintaining cause (causa occasionalis), <p>Reflection</p> <ul style="list-style-type: none"> Reflect on the nature of causations <p>Competency 2: Highlight the importance of placebo and the study of Materia Medica of homoeopathic medicines</p> <p>Knowledge</p> <ul style="list-style-type: none"> Discuss the concept of second best remedy <p>Skill</p> <ul style="list-style-type: none"> Prescription of second best remedy in clinical practice <p>Reflection</p> <p>Reflect upon the clinical utility of placebo</p>
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)

	Practical exam - 100% Written Examinations: 1 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
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Topic 13

Course Name: Role of susceptibility in homoeopathic practice

Course Overview:	This course will provide overview of state of susceptibility to formulate comprehensive plan of treatment its utility in prescription
Learning Outcomes:	<p>Competency 1: Concept of Susceptibility to determine correct dose, potency and repetition</p> <p>Knowledge:</p> <ul style="list-style-type: none"> Determine posology in a given case as per the susceptibility of the person Correlate the concepts of Idiosyncrasy, Reaction and immunity <p>Skill</p> <ul style="list-style-type: none"> To judge the susceptibility of patient Appreciate the role of different factors in affecting the susceptibility <p>Reflection</p> <ul style="list-style-type: none"> Identify the critical elements for remedy administration with correct potency and dose
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Dhawale, M.L. (1994). Principle and Practice of Homeopathy”, Published by Institute of Clinical Research Bombay. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Roberts, H. A. (1995). The Principles and Art of Cure by Homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.

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Topic 14

Course Name: Reaction after administration of First dose

Course Overview:	To study the response of Vital force after the administration of the first dose in an individual and the concept of prescription after the first medicine acted with the prognosis of the case.
Learning Outcomes:	<p>Competency 1: Homoeopathic concept of second prescription.</p> <ul style="list-style-type: none"> Describe the concept of Repetition of the first remedy Explain the Antidotal, Complimentary and Cognate relationship of medicines Discuss the conditions that merit change in the plan of treatment <p>Skill</p> <ul style="list-style-type: none"> <p>Reflection</p> <ul style="list-style-type: none"> Deciding dose, potency and repetition of remedy, Prognosis of the case <p>Competency 2: Observation of reaction after remedy administration.</p> <ul style="list-style-type: none"> Explain the concepts of homoeopathic aggravation, Medicinal & disease aggravation, Amelioration, Palliation, and Suppression. <p>Skill</p> <ul style="list-style-type: none"> To identify whether the selection of medicine is correct The posology and repetition of dose is accurate. Differentiate between palliation and suppression When to use complimentary, cognate, intercurrent, antidote, anti-miasmatic medicines. <p>Reflection</p> <ul style="list-style-type: none"> Unprejudiced observation in the follow-ups
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 1 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi.</p> <p>Dhawale, M.L. (1994). Principle and Practice of Homeopathy”, Published by Institute of Clinical Research Bombay.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition</p> <p>Roberts, H. A. (1995). The Principles and Art of Cure by Homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
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Topic 15**Course Name: Drug proving**

Course Overview:	This course will provide overview of concept of drug proving – pharmacological and physiological action of various drugs with their therapeutic scope which can be used for prescription of similimum.
Learning Outcomes:	<p>Competency 1: Knowledge of instruments needed for homoeopathic cure</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the knowledge of instruments for cure of disease. • Explain the concept of Human Drug proving and necessity to prove the medicine on human beings. • Outline the procedure and steps of drug proving, Different ways of drug proving <p>Skill: Understand the method of drug proving integrating Modern developments in study of effects of drug on human organism</p> <p>Reflection</p> <ul style="list-style-type: none"> • To investigate what is to curative in various medicine in order to ascertain its true nature and qualities for the better implementation of similia
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 1 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi. 14th Impression</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.</p> <p>Roberts, H. A. (1995). The Principles and Art of Cure by Homoeopathy. B. Jain publishers pvt. Ltd.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
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Part II – Paper 1

TOPIC 1

Course Name: Psychological Point of View

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) to understand Homeopathy as a complete and scientific system of therapeutic medication.
Learning Outcomes:	Competency 1: Explain the Psychological Point of View. Knowledge <ul style="list-style-type: none">• State the Fundamental principles of homeopathy• Discuss Homoeopathy as a method of therapeutic medication Skill <ul style="list-style-type: none">• Practical Application of Homoeopathic principles in demonstration of efficacy of homoeopathy. Reflection <ul style="list-style-type: none">• Appreciate Homeopathy as a complete system of therapeutic medication
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Reprint edition.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 2

Course Name: General interpretation of Homoeopathic philosophy

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) to understand homoeopathic philosophy rest upon the system of nature and fundamental science.
Learning Outcomes:	Competency 1: Interpretation of homoeopathic philosophy rests upon the Law of Nature. Knowledge <ul style="list-style-type: none">• Discuss the “Law of Nature” with reference to homoeopathic principles• Describe the cause-and-effect relationship in health and disease• Correlate the Law of least action with minimum dose Skill <ul style="list-style-type: none">• Application of the homoeopathic principles based upon the System of Nature, which Science universally recognizes as fundamental. Reflection <ul style="list-style-type: none">• Reflects Homoeopathy as a Scientifically valid system of medicine Competency 2: Explain homoeopathy is a science as well as an art Knowledge <ul style="list-style-type: none">• Differentiate between ‘science’ and ‘art’.• Contrast the Inductive and deductive methods of Logic in establishment of Homoeopathy. Skill <ul style="list-style-type: none">• Understanding of the working principles of Homoeopathy. Reflection <ul style="list-style-type: none">• Reflects upon the understanding of homoeopathy as a science and art.
Assessment:	Continuous / Programmatic assessment: 20% (weightage) Practical exam - 100%

	Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Dudgeon. R. E. (2019). Lesser writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. R.E.
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 3

Course Name: The Scope and limitations of Homoeopathy

Course Overview:	This course will provide insights into the scope and limitations of homoeopathy
Learning Outcomes:	<p>Competency 1: Understand the Scope and limitations of homoeopathy</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Differentiate between modern and homoeopathic concept of disease. • Mention the sphere of Similia. • Explain the limitation of homoeopathy in true surgical diseases • State the exclusion method adopted by Dake <p>Skill</p> <ul style="list-style-type: none"> • Application of homoeopathy helps to get a clear defined idea of the field in which the principle of Similia is inoperative. <p>Reflection</p> <ul style="list-style-type: none"> • Identify the elements critical for evaluation of Scope and limitation of homoeopathy
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Hahnemann Samuel (2013). Organon of medicine translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition Singh Mahendra, Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 4

Course Name: Symptomatology and Evaluation of symptoms

Course Overview:	This course will provide insights into concept of symptomatology, methods of evaluation of symptoms and its importance in Clinical practice
Learning Outcomes:	<p>Competency 1: Understand different types of symptoms</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the true nature and constitution of a symptom in 'proving', 'examination of a patient;', and 'the study of the Materia Medica'. • Explain the different types of symptoms according to Hahnemann, J. T. Kent, Boenninghausen and Garth Boericke <p>Skill</p> <ul style="list-style-type: none"> • Application of concept of symptomatology in analysis of symptoms and its peculiarity in acute and chronic diseases. <p>Reflection</p> <ul style="list-style-type: none"> • Identification of striking, singular, uncommon and peculiar (characteristic) signs and symptoms

	<p>Competency 2: Discuss the different methods of evaluation of symptoms and their application in clinical practice</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the Hahnemannian, Boenninghausen's, Kent's and Garth Boericke's methods of evaluation. Discuss the Gradation of symptoms during proving. State the Hexameter of Boenninghausen. <p>Skill</p> <ul style="list-style-type: none"> Application of different methods of evaluation in formation of totality of symptoms <p>Reflection</p> <ul style="list-style-type: none"> Reflect upon relative value of symptoms, its utility in clinical practice and understanding of Materia Medica
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi.</p> <p>Dhawale, M.L. (1994). Principle and Practice of Homeopathy", Published by Institute of Clinical Research Bombay.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Low priced 5th and Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

TOPIC 5

Course Name: Susceptibility, reaction and immunity

Course Overview:	This course will provide understanding of susceptibility, factors modifying susceptibility and importance of susceptibility in clinical practice.
Learning Outcomes:	<p>Competency 1: Understanding of susceptibility and the factors which modify susceptibility</p> <p>Knowledge</p> <ul style="list-style-type: none"> Define susceptibility Enumerate the factors which modify the susceptibility Compare the concepts 'susceptibility', 'reaction', and 'immunity'. Justify that action and reaction takes place only in the living organism. Elicit the Stimulants and Depressants of susceptibility <p>Skill</p> <ul style="list-style-type: none"> Application of understanding of susceptibility in clinical practise. <p>Reflection</p> <ul style="list-style-type: none"> Understanding the role of susceptibility in health, disease, selection of medicine, selection of potency and cure <p>Competency 2: Correlate susceptibility, reaction and immunity.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Define susceptibility in the homoeopathic context Discuss factors affecting susceptibility in health and disease Explain the importance of susceptibility in clinical practice

	<ul style="list-style-type: none"> Compare susceptibility, reaction and immunity <p>Skill</p> <ul style="list-style-type: none"> Application of knowledge of Susceptibility in selection of medicines <p>Reflection</p> <ul style="list-style-type: none"> Role of susceptibility in clinical practice and relation between susceptibility, reaction and immunity
Assessment:	Continuous / Programmatic assessment: 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
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TOPIC 6

Course Name: The Logic of Homeopathy

Course Overview:	
Learning Outcomes:	<p>Competency 1: Understanding the Logic of Homoeopathy.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Define Logic Describe history and development of logic Explain formal, inductive and deductive logic Illustrate logic of Aristotle. Bacon, Mill and Hahnemann <p>Skill</p> <ul style="list-style-type: none"> Application of logic in various processes of applied homoeopathy <p>Reflection</p> <ul style="list-style-type: none"> Understanding of application of logic in development of Therapeutic law of nature Reflects General relations of logic to the various processes of applied homoeopathy and to point out advantages in using the methods of logic in the treatment of human sufferings.
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Reprint edition
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 7

Course Name: Analysis of the case.

Course Overview:	This course will provide understanding of analysis of the case for individualisation and homoeopathic practice
Learning Outcomes:	<p>Competency 1: Significance of analysis of the case for individualisation</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Mention the directions for case taking according Hahnemann, Kent, Stuart Close, H.A. Roberts & Boenninghausen • Explain the importance of knowledge of disease for case individualisation. • Estimate the value of the symptoms • Discuss the role of investigations and diagnosis in homoeopathic individualisation • State the Importance of observation in paediatric cases. <p>Skill</p> <ul style="list-style-type: none"> • Application of logical analysis in individualisation of a case <p>Reflection</p> <ul style="list-style-type: none"> • Reflect upon the individualisation of patient, selection of remedy, selection of potency and doses.
Assessment:	Continuous / Programmatic assessment: 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 8

Course Name: The chief complaint and the auxiliary symptoms in their relation to the case

Course Overview:	This course will provide insights into chief complaint and the auxiliary symptoms in their relation to the case
Learning Outcomes:	<p>Competency 1: Understand the chief complaint and the auxiliary symptoms in the case</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Explain symptomatology • Illustrate the concept of Chief complaint • Discuss the Concept Auxiliary or concomitant symptoms <p>Skill</p> <ul style="list-style-type: none"> • Importance of the concomitant symptoms in case perceiving. <p>Reflection</p> <ul style="list-style-type: none"> • Reflect in understanding of relative value of chief complaint and auxillary symptoms in diagnosis and selection of remedy
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition
Domains	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Competencies	
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TOPIC 9

Course Name: The dynamic action of drugs.

Course Overview:	This course will provide insights into dynamic action of drugs
Learning Outcomes:	<p>Competency 1: Understand the dynamic action of drugs.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the dynamic concept of health, disease, and cure State the different types of actions of drugs, such as mechanical, chemical, and dynamic. Mention the doses for drug proving <p>Skill</p> <ul style="list-style-type: none"> Application of concept of dynamic action of drugs to obtain complete proving. <p>Reflection</p> <ul style="list-style-type: none"> Correlation of dynamic action of drugs with concept of administration of minute doses and homoeopathic aggravation in acute, chronic, and even complicated diseases.
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 10

Course Name: Prognosis after observing the action of the remedy/Remedy reaction

Course Overview:	This course will provide insights into remedy reaction and prognosis after observing the action of the remedy
Learning Outcomes:	<p>Competency 1: Illustrate remedy reaction after administration of medicine</p> <p>Knowledge</p> <ul style="list-style-type: none"> State the actions and reactions of remedy Explain the Presuppositions of remedy reaction and Expectations after the administration of remedy Discuss the signs of commencement of amelioration and aggravation <p>Skill</p> <ul style="list-style-type: none"> Clinical application of remedy reaction to understand prognosis. <p>Reflection</p> <ul style="list-style-type: none"> Correlation of Remedy reaction with prognosis of case <p>Competency 2: Discuss the unfavourable prognosis after observing the action of remedy.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Discuss what is unfavourable prognosis. State the signs of commencement of aggravation. Explain the direction of progress of disease <p>Skill</p> <ul style="list-style-type: none"> Application of remedy reaction to understand prognosis of the case <p>Reflection</p>

	<ul style="list-style-type: none"> Identify unfavourable Remedy reaction and its application in clinical practice <p>Competency 3: Discuss the favourable prognosis after observing the action of remedy.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Discuss the depth of pathology i.e. reversible or irreversible State the signs of commencement of amelioration. Mention the direction of cure, according to Hering's Law of Cure <p>Skill</p> <ul style="list-style-type: none"> Application of remedy reaction to understand favourable prognosis <p>Reflection</p> <ul style="list-style-type: none"> Identify favourable Remedy reaction and its use in clinical practice.
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains of Competencies	of Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

TOPIC 11

Course Name: The second prescription.

Course Overview:	This course will provide insights into different types of second prescriptions and their use in clinical practice basing on remedy reactions.
Learning Outcomes:	<p>Competency 1: Mention the different types of second prescriptions and their indications depending on the reaction after administration of remedy.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the remedy reactions / Prognosis after the observing the action of the first remedy Discuss parameters for first and second prescription Illustrate the use of different types of second prescription <p>Skill</p> <ul style="list-style-type: none"> Application of knowledge of different types of second prescriptions in clinical practice <p>Reflection</p> <ul style="list-style-type: none"> Correlation of second prescriptions with remedy reactions and its utility in clinical practice
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishrs, New Delhi. Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel

	Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Third Edition
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

TOPIC 12

Course Name: The Law of Similar

Course Overview:	This course will provide overview of historical concept of similia, its utility in perception of pathogenesis of homoeopathic medicines and their application in clinical practise
Learning Outcomes:	<p>Competency 1: Discuss the historical perspective of understanding of similia principle and formulation of Hahnemann's therapeutics law of nature in treating the patient.</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Cite the references to Law of Similia in Indian Literature • Explain the concept and application of Similia before Hahnemann. • Illustrate the principle of Similia in different aspects – Physical, Moral and Disease <p>Skill</p> <ul style="list-style-type: none"> • Application of Inductive Logic in understanding the formulation of Hahnemann's therapeutics law of nature <p>Reflection</p> <ul style="list-style-type: none"> • Realisation of the value of law of Similia in treating the patient.
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Garrison Fielding H. (1917). An Introduction to The History of Medicine W. B. Saunders Company. Philadelphia and London Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Ameke Wilhelm. Dudgeon R. E. (1885) (ed) History of Homeopathy: Its Origin and Its Conflicts. The British Homoeopathic Society
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

TOPIC 13

Course Name: The Study of Provings

Course Overview:	This course will provide overview of Hahnemannian and modern methods of drug proving and its application in proving of new drugs
Learning Outcomes:	<p>Competency 1: Explanation of the Hahnemannian and modern methods of drug proving</p> <p>Knowledge</p> <ul style="list-style-type: none"> • State the sources of Materia Medica • Discuss the criteria of ideal prover, doses for drug proving, process of recording of symptoms, and restrictions in diet and regime during drug proving. • Enumerate the advantages of drug proving to the provers • Mention the Dunham's view regarding drug proving • Illustrate the modern methods of drug proving

	<p>Skill</p> <ul style="list-style-type: none"> Application of Hahnemannian and modern methods of drug proving in proving of new drugs. <p>Reflection</p> <ul style="list-style-type: none"> Reflects upon the proving of new drugs and formation of new Materia Medica
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Dudgeon. R. E. (2019). Lesser writings of Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. R.E. Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi. 14th Impression.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Low priced 5th and 6th edition.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 14

Course Name: Individualisation

Course Overview:	This course will provide insights into concept of individualisation and its importance in Homoeopathic practice
Learning Outcomes:	<p>Competency 1: Explanation of the concept of individualisation and its importance in Homoeopathic practice</p> <p>Knowledge</p> <ul style="list-style-type: none"> State the benchmarks for understanding the “Individual” as per the concept of Individualisation Enumerate the Qualities of a physician to individualise. State the sources of individualisation Discuss the concept of sickness in disciplines other than homoeopathy. Describe the historical evolution of the concept of individualisation Discuss the perspective of individualisation by the stalwarts of homoeopathy <p>Skill</p> <ul style="list-style-type: none"> Application of concept of individualisation in perceiving the unique aspect of the patient as well as the medicine <p>Reflection</p> <ul style="list-style-type: none"> Reflects upon Selection of similimum, selection of potency, proper dose and repetition which are necessary for cure.
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi. Ninth Revised Edition</p>

	Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

PART II – PAPER 2

TOPIC 1

Course Name: **UNITY OF MEDICINE**

Course Overview:	This course will provide students of MD Hom (Homoeopathic Philosophy) with an overview of integrating the knowledges obtained in different clinical and paraclinical subjects for holistic patient centred case management.
Learning Outcomes:	<p>Competency 1: Explain the importance of interdisciplinary approach for examination of patient</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the concept of Holism • Describe the interdisciplinary approach in understanding man as a whole • Illustrate the inter-relationship of clinical and paraclinical subjects <p>Skill</p> <ul style="list-style-type: none"> • Application of holistic model of health system <p>Reflection</p> <ul style="list-style-type: none"> • Identify the elements critical for integrating clinical and paraclinical knowledges for individualised case perceiving <p>Competency 2: Understanding the significance of patient centric approach in light of current trends in medicine</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the interdisciplinary approach of conventional medicine towards holistic understanding of patient • Correlate the homoeopathic concept of patient centric approach in framework of conventional medicine <p>Skill</p> <ul style="list-style-type: none"> • Integration of homoeopathic concept of holism in paradigm of modern medicine <p>Reflection</p> <ul style="list-style-type: none"> • Scientific validation of Hahnemann's holistic concept of health
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent James Tyler. (2023). Lesser Writings, Clinical Cases, New Remedies, Aphorisms and Precepts.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 2

Course Name: **BRANCHES AND SCHOOLS OF PHILOSOPHY**

Course Overview:	This course will sensitize the students with an overview of different schools of medical philosophy and
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	emphasizes the importance of understanding Hahnemann's concept of vitalism in light of fundamental idea of substantialism
Learning Outcomes:	<p>Competency 1: Describe the state of medicine during Hahnemann's time</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the chaotic state of medicine during Hahnemann's time • Highlight the concept of theoretic medicine with its proliferation in so called 'systems of medicines' • Discuss Empericism and Rationalism • Discuss Philosophy, science and metaphysics and their relationship • Explore Philosophical trends of Scoretes, Plato and Aristotle • Explain Organic view of holistic sciences on the basis of Aristotle and Hegal • Discuss Doctrine of energy on the basis of Leibniz and Bergson • <p>Skill</p> <ul style="list-style-type: none"> • Application of Inductive Logic in understanding the formulation of Hahnemann's working principles • Differentiate Empericism from Rationalism. <p>Reflection</p> <ul style="list-style-type: none"> • Identify the elements critical for development of Hahnemann's concept of homoeopathic philosophy <p>Competency 2: Describe the different schools of philosophy</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the schools of philosophies – Materialism, Idealism and substantialism, existentialism, realism, pragmatism, romanticism, vitalism. positivism, phenomenology, Naturalism and critical theory <p>Skill</p> <ul style="list-style-type: none"> • Application of fundamental idea of substantialism in understanding Hahnemann's concept of health, disease and cure <p>Reflection</p> <ul style="list-style-type: none"> • Integrate Inductive logic with substantialistic philosophy
Assessment:	<p>Continuous / Programmatic assessment: 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Reprint edition.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent James Tyler. (2023). Lesser Writings, Clinical Cases, New Remedies, Aphorisms and Precepts.</p> <p>Sarkar B. K. (2003-2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Birla Publications Pvt. Ltd. Delhi.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation

TOPIC 3

Course Name: GENERAL PATHOLOGY OF HOMOEOPATHY

Course Overview:	This course will sensitize the students to the relation of pathology and microbiology with homoeopathy and concept of chronic diseases. It will provide orientation for application of chronic miasm in clinical practise
Learning Outcomes:	<p>Competency 1: Correlation of pathology and homoeopathy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the basic principles of pathology and microbiology Discuss the significance of the pathophysiology of infectious diseases with reference to the theory of chronic diseases Describe Hahnemann's perception of "infection theory" <p>Skill</p> <ul style="list-style-type: none"> Application of Hahnemann's concept of 'infection' in etiopathogenesis of acute and chronic diseases <p>Reflection</p> <ul style="list-style-type: none"> Scientific validation of Hahnemann's understanding of etiopathogenesis of acute and chronic diseases <p>Competency 2: Discuss the concept of miasm in light of modern principles of pathology and microbiology</p> <p>Knowledge</p> <ul style="list-style-type: none"> Trace the evolution of Hahnemann's theory of miasm Discuss the Hahnemannian and post Hahnemannian viewpoints in relation to understanding of miasm Discuss the evolution and development of miasmatic theory in light of modern pathology and microbiology <p>Skill</p> <ul style="list-style-type: none"> Implementation of theory of acute and chronic miasm in clinical practise <p>Reflection</p> <ul style="list-style-type: none"> Corelate the miasmatic theory with the advancements in the study of pathology and microbiology
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Hahnemann Samuel (2005). The Chronic Diseases, Their Peculiar Nature and Their Homoeopathic Cure. B. Jain Publishers Pvt. Ltd. Allen JH (1998). The Chronic Miasms Psora and Pseudo-Psora. B. Jain Publishers Pvt. Ltd. Ortega PS. (1980). Notes on The miasm on Hahnemann's Chronic Diseases. English Translation by Harris Coulter. National Homoeopathic Pharmacy. Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 4

Course Name: **PHENOMENOLOGICAL VIEWPOINT**

Course Overview:	This course will provide insights into concept of phenomenology and empiricism and highlight its importance in Understanding homoeopathic principles
Learning Outcomes:	Competency 1: Correlate the concept of phenomenology and empiricism as well as its relation with

	<p>homoeopathy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Discuss the concept of Phenomenology and Empiricism Describe the evolution of phenomenological and Empiricist school of thoughts Corelate the relationship of phenomenology and empiricism with homoeopathy <p>Skill</p> <ul style="list-style-type: none"> Clinical utility of phenomenological and empiricist point of view in Understanding science of homoeopathy <p>Reflection</p> <ul style="list-style-type: none"> Corelation of empiricist philosophy with Hahnemannian approach in evolution of homoeopathic science <p>Competency 2: Highlight the principles of Homoeopathic philosophy in light of phenomenological viewpoint</p> <p>Knowledge</p> <ul style="list-style-type: none"> Discuss Hahnemannian concept of ‘a priori’ and ‘posteriori’ Discuss the evolution of fundamental principles of homoeopathy in the light of phenomenology and Empiricism <p>Skill</p> <ul style="list-style-type: none"> Application of phenomenological view point in appreciation of principles of Homoeopathic philosophy <p>Reflection</p> <ul style="list-style-type: none"> Scientific validation of Hahnemannian philosophy in context of Empiricism
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd.</p> <p>Singh Mahendra. Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi.</p>
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

TOPIC 5

Course Name: TEMPERAMENTS

Course Overview:	This course will provide overview of historical concept of temperaments, its utility in in perception of pathogenesis of homoeopathic medicines and application in clinical practise
Learning Outcomes:	<p>Competency 1: Discussion of the historical perspective of understanding of temperaments and appreciate the importance of temperaments in pathological evolution of diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> State the Hippocratic and post Hippocratic concepts of temperaments Explain the Hahnemann’s view point regarding temperament Describe the concept of pathological evolution of diseases and Discuss the importance of temperaments <p>Skill</p>

	<ul style="list-style-type: none"> Application of temperaments in perceiving pathological evolution of diseases <p>Reflection</p> <ul style="list-style-type: none"> Corelate historical concept of temperaments with modern understanding of personality profile of diseases <p>Competency 2: Highlight the importance of temperaments in the study of Materia Medica of homoeopathic medicines</p> <p>Knowledge</p> <ul style="list-style-type: none"> Explain the significance of types of temperaments of different polycrest remedies in homoeopathic Materia Medica Describe the importance of temperaments in drug pathogenesis <p>Skill</p> <ul style="list-style-type: none"> Application of understanding of temperaments in clinical practise <p>Reflection</p> <ul style="list-style-type: none"> Reflect upon the clinical utility of archaic concepts of temperaments mentioned in Materia medica of homoeopathic medicines
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition Hahnemann, Samuel. (2002). The Chronic Diseases Their Peculiar Nature and Their Homoeopathic Cure. Translated by L. H. Tafel. B. Jain Publishers (P) Ltd, New Delhi.
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning/ Communication skills

TOPIC 6

Course Name: CLASSIFICATION OF DISEASES

Course Overview:	This course will outline the historical and Hahnemann's view of disease classification, clinical manifestation of chronic miasms and their application in clinical practise
Learning Outcomes:	<p>Competency 1: Describe the historical and Hahnemannian perspective of classification of diseases</p> <p>Knowledge</p> <p>Illustrate the concepts of disease classification in the timeline of history of medicine Mention the Hahnemann's working principles regarding classification of diseases</p> <p>Skill</p> <p>Practical implementation of Hahnemannian philosophy of acute and chronic diseases</p> <p>Reflection</p> <p>Correlation of Hahnemannian's concept of disease classification with modern medicine</p> <p>Competency 2: Illustrate the manifestation of chronic miasms in clinical settings and their significance in case analysis</p> <p>Knowledge</p> <p>Describe the clinical manifestation of Hahnemann's chronic miasms in latent and active phases with reference to constitutional peculiarities, symptomatology and pathology</p> <p>Skill</p> <p>Application of clinical presentation of miasms (psora, sycosis and syphilis) in case analysis</p>

	Reflection Identify the elements critical for differentiating the miasmatic manifestation of diseases
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Hahnemann. Samuel. (2002). The Chronic Diseases Their Peculiar Nature and Their Homoeopathic Cure. Translated by L. H. Tafel. B. Jain Publishers (P) Ltd, New Delhi. Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 7

Course Name: SUPPRESSION AND PALLIATION

Course Overview:	This course will sensitize the students to the basic concept of suppression and palliation. It will provide insights regarding different forms of their clinical expression and their role in difficult and incurable diseases
Learning Outcomes:	<p>Competency 1: Insight into the basic concepts, fundamental laws and clinical expressions of suppression and palliation</p> <p>Knowledge</p> <ul style="list-style-type: none"> Differentiate between the concepts of suppression and palliation Highlight the Fundamental laws governing the process of suppression and palliation Enumerate different forms of clinical expressions of suppression and palliation <p>Skill</p> <ul style="list-style-type: none"> Ability to clinically differentiate suppression from palliation <p>Reflection</p> <ul style="list-style-type: none"> Evaluation of case prognosis in the light of concept of suppression and palliation <p>Competency 2: Suppression and palliation in Difficult and Incurable diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> Identify the impact of palliation in difficult and incurable diseases Discuss the palliative effect of repetitive physiological doses of medicine resulting in the sequence of suppression <p>Skill</p> <ul style="list-style-type: none"> Clinical management of difficult and incurable disease conditions <p>Reflection</p> <ul style="list-style-type: none"> Principles of palliative care according to homoeopathic and conventional medicine
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.

	Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd.
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning/ Communication skills/ Professionalism

TOPIC 8

Course Name: **LOCAL APPLICATION**

Course Overview:	This course will sensitize the students to the basic concept, pharmacodynamics and therapeutic implication of Local application
Learning Outcomes:	<p>Competency 1: Relating the basic concept of Local application in light of Hahnemannian and post Hahnemannian philosophy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Discuss Hahnemannian concept of true local diseases and ‘so called Local maladies’ Explain the basic concept of Local application Compare Hahnemannian and post Hahnemannian views on Local application <p>Skill</p> <ul style="list-style-type: none"> Judicious employment of Local applications <p>Reflection</p> <ul style="list-style-type: none"> Clinical decision-making regarding the employment of Local applications in homoeopathic practise <p>Competency 2: Illustrate the pharmacodynamics and therapeutic implication of Local application from the perspective of conventional medicine and homoeopathy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Illustrate Pharmacodynamics and therapeutic implication of Local application from the point of view of conventional medicine Discuss the homoeopathic perspective of Pharmacodynamics and therapeutic implication of Local application <p>Skill</p> <ul style="list-style-type: none"> Analysing clinical outcome of Local applications <p>Reflection</p> <ul style="list-style-type: none"> Effect of Local application on case prognosis in different clinical settings
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dhawale, M.L. (1994). Principle and Practice of Homeopathy”, Published by Institute of Clinical Research Bombay. Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd.
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 9**Course Name: ALTERNATION OF REMEDIES**

Course Overview:	This course will sensitize the students to the basic concept and therapeutic implication of Alternation of remedies
Learning Outcomes:	<p>Competency 1: Highlight the basic concept and therapeutic utility of Alternation of remedies in context of Hahnemannian and post Hahnemannian writings</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Mention Basic concept of alternation of remedies • Differentiate between the Hahnemannian and post Hahnemannian views on alternation of remedies • Discuss the Therapeutic scope of alternation of remedies <p>Skill</p> <ul style="list-style-type: none"> • Judicious employment of Alternation of remedies <p>Reflection</p> <ul style="list-style-type: none"> • Clinical decision-making regarding alternation of remedies
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi. Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi. Hahnemann. Samuel. (2002). The Chronic Diseases Their Peculiar Nature and Their Homoeopathic Cure. Translated by L. H. Tafel. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.
Domains Competencies	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

TOPIC 10**Course Name: HOMOEOPATHIC POSOLOGY**

Course Overview:	This course will provide insights into posological principle of Infinitesimal, elements of posology and role of susceptibility in posology
Learning Outcomes:	<p>Competency 1: Understanding the concept of posological principle of Infinitesimals</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Explain the basic principles of vitalistic philosophy • Describe the basic concept of Infinitesimals and the laws governing posology <p>Skill</p> <ul style="list-style-type: none"> • Clinical application of Infinitesimal dose <p>Reflection</p> <ul style="list-style-type: none"> • Scientific validation of posological principle of Infinitesimal <p>Competency 2: Relate the components of homoeopathic posology and role of susceptibility</p>

	<p>Knowledge</p> <ul style="list-style-type: none"> List the components of homoeopathic posology Describe the Basic concept of susceptibility State the factors influencing susceptibility <p>Skill</p> <ul style="list-style-type: none"> Application of susceptibility in posology <p>Reflection</p> <ul style="list-style-type: none"> Critical understanding of elements determining posology
Assessment:	<p>Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi.</p> <p>Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi.</p> <p>Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.</p> <p>Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd.</p> <p>Hubbard EW. (2004). A Brief Study Course in Homoeopathy B. Jain publishers Pvt. Ltd.</p>
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

TOPIC 11

Course Name: Relation of Pathology to Therapeutics.

Course Overview:	
Learning Outcomes:	<p>Competency 1: Discuss the relation of pathology in homoeopathic practice</p> <p>Knowledge</p> <ul style="list-style-type: none"> Outline the concept of sickness Relate the pathophysiology of different types of diseases. Highlight the general survey of disease <p>Skill</p> <ul style="list-style-type: none"> Application of knowledge of pathology in understanding of Materia Medica and individualisation <p>Reflection</p> <ul style="list-style-type: none"> Importance of knowledge of pathology in therapeutics
Assessment:	<p>Continuous / Programmatic assessment: 20% (weightage)</p> <p>Practical exam - 100%</p> <p>Written Examinations: 2 x 3 hour written papers. 80%</p>
Prescribed Texts:	<p>Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi.</p> <p>Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi.</p> <p>Hughes Richard. (2020). The Principles & Practice of Homoeopathy. B. Jain Publishers (P) Ltd, New Delhi.</p>

Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation/ Patient care
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TOPIC 12

Course Name: Different modes of treatment

Course Overview:	This course will provide insights into demerits of Antipathy, Allopathy, Isopathy and merits of Homoeopathy
Learning Outcomes:	<p>Competency 1: Describe the different methods of treatment and establish the superiority of Homoeopathy</p> <p>Knowledge</p> <ul style="list-style-type: none"> Evaluate the different methods of treatment, i.e., Allopathy, Antipathy, Isopathy and Homoeopathy <p>Skill</p> <ul style="list-style-type: none"> Application of fundamental idea of different methods of treatment in understanding their merits and demerits. <p>Reflection</p> <ul style="list-style-type: none"> Understand the scope of Antipathy and superiority of Homoeopathy in clinical practice
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Dudgeon R. E. (2002). Lectures on the Theory and Practice of Homoeopathy. B. Jain publishers pvt Ltd, New Delhi. Dunham Carroll. (2019). Homoeopathy The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi. 14th Impression Hahnemann. Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6 th edition by W. Boericke. B. Jain Publishers (P) Ltd, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi.
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

TOPIC 13

Course Name: Deflected current.

Course Overview:	This course will provide insights into the accessory circumstances or factors which may cause hindrance/obstacle to cure.
Learning Outcomes:	<p>Competency 1: Identify the factors which may cause hindrance/obstacle to cure.</p> <p>Knowledge</p> <ul style="list-style-type: none"> Describe the exciting and maintaining cause Recognize whether the obstacle is from the patient side, from the physician side, or related to the remedy Appraise the exclusion method adopted by Dake <p>Skill</p> <ul style="list-style-type: none"> Clinical application of deflected current in analysing and removing the obstacles <p>Reflection</p> <ul style="list-style-type: none"> Correlate accessory circumstances with obstacle to cure and their removal.

Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment): 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy. IBPP, New Delhi. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy. Indian Book & Periodical Publishers, New Delhi. Reprint edition Roberts, H. A. (1995). The principles and art of cure by homoeopathy. B. Jain publishers pvt. Ltd. Reprint edition
Domains Competencies	of Knowledge & Scholarship / Homoeopathic Orientation / Practice Based Learning

5. Teaching – Learning Activities.

Classroom teaching

- i. Lecture
- ii. Demonstration
- iii. Tutorials

Group discussion

Problem based learning

- a. Assignment
- b. Short project
- c. Community projects
- d. Tutorials

Seminars/ workshops/ Continued Medical education series

Integrated teaching

Self-directing learning

Practical – Lab work – Field – Clinical Hospital work

- a. Journal club
- b. Field work – Community based learning
- c. Clinical Hospital Work
- d. Case studies (Case based Learning)

6. Assessment Blueprint – Theory / Practical / Viva. (Benchmarked by the module wise distribution.)

Content Distribution - Part I

Understanding of fundamental aspects of Homoeopathic science and its philosophical basis including the History of Medicine along with the Introduction to Organon of Medicine. Concept of Vital force, Life, Health, Disease, Cure and Recovery. The sick. Preserver of Health & Protection from Sickness. Basics of knowledge of disease along with the Examination of the Patient and case analysis. Indisposition and the Second-best Remedy, Role of susceptibility in homoeopathic practice, Reaction after administration of First dose and Drug proving.

Sr. No	Content	Marks Allotted	Percentage (%)
1	History of Medicine, History of homoeopathy & Introduction to Organon of Medicine	5	5%
2	Introduction to Organon of Medicine	5	5%

3	Life, Health and Disease, Cure and recovery	5	5%
4	Concept of vital force	10/5+5	10%
5	The sick - Disorder First in Vital Force, Sickness and Cure on Dynamic Plane	10/5+5	10%
6	Preserver of Health & Protection from Sickness	5	5%
7	Basics of knowledge of disease and Indisposition	10/5+5	10%
8	Examination of the Patient and case analysis	20	20%
9	Role of susceptibility in homoeopathic practice	10/5+5	10%
10	Reaction after administration of First dose and Second-best Remedy	10/5+5	10%
11	Drug proving	10/5+5	10%
Total		100	100%

Distribution of Questions:

1. Content with marks distribution of 5 marks (5%) shall be asked under the question number 6 to 13.
2. Content with marks distribution of 10 marks (10%) shall be asked under question 1 as sub-question of 10 marks or under questions number 2 to 5 of 10 marks or from questions 6 to 13 of 5 marks each.
3. Content with a mark distribution of 30 marks (30%) shall be asked under question 1, as sub-question of 10 marks, Question 2 to 5 of 10 marks and Question 6 to 13 of 5 markseach
4. From question 2 to 5 can be divided into sub-questions a) and b) with 5 marks each i.e total of 10 marks if required.

Content Distribution - Part II Paper I

Knowledge of the Psychological point of view, General interpretation of Homoeopathic philosophy, with the Scope and limitations of Homoeopathy. Symptomatology, evaluation of symptoms and analysis of the case, susceptibility, reaction and immunity. Translational value of homoeopathic principles, and the Law of Similars. The Logic of Homoeopathy. Individualization of the patient with the chief complaint and the auxillary symptoms in their relation to the case. The Study of Proving and the dynamic action of drug. Prognosis after observing the action of the remedy/Remedy reaction and Second prescription.

Sr. No	Content	Marks Allotted	Percentage (%)
1	Psychological Point of View	5	5%
2	General interpretation of Homoeopathic philosophy	10/5+5	10%
3	The Scope and limitations of Homoeopathy	5	5%
4	Symptomatology and Evaluation of symptoms Analysis of the case	20	20%
5	Susceptibility, reaction and immunity	10/5+5	10%
6	The Logic of Homoeopathy	10/5+5	10%
7	The chief complaint and the auxillary symptoms in their relation to the case	5	5%
8	The Study of Proving and the dynamic action of drug	10/5+5	10%
9	Prognosis after observing the action of the remedy/Remedy reaction, Second prescription	10/5+5	10%
10	The Law of Similars	5	5%
11	Individualization	10/5+5	10%
Total		100	100%

Distribution of Questions:

1. Content with marks distribution of 5 marks (5%) shall be asked under the question number 6 to 13.
2. Content with marks distribution of 10marks (10%) shall be asked under question 1 as sub question of 10 marks or under question number 2 to 5 of 10 marks or from question6 to 13 of 5 marks each.
3. Content with mark distribution of 30 marks (30%) shall be asked under question 1, as sub question of 10 marks Question 2 to 5 of 10 marks and Question 6 to 13of 5 markseach
4. From question 2 to 5 can be divided in sub question a) and b) with 5 marks each i.e. total 10 marks

Content Distribution - Part II Paper II

Patient-centered care on the basis of homoeopathic principles for appropriate and effective treatment and promotion of holistic health. Concept of Suppression and palliation, Local application, Alternation of remedies and different modes of treatments. Knowledge of Homoeopathic posology and deflected current. Understanding of Unity of Medicine, Different schools of philosophy and The Phenomenological viewpoint. General Pathology of homoeopathy and its Relation to therapeutics. Importance of Temperaments, Disease classification.

Sr. No	Subject	Marks Allotted	Percentage (%)
1	Unity of Medicine	5	5%
2	Schools of philosophy	5	5%
3	General Pathology of homoeopathy	10/5+5	10%
4	Phenomenological viewpoint	5	5%
5	Temperaments	10/5+5	10%
6	Disease classification	10/5+5	10%
7	Suppression and palliation	10/5+5	10%
8	Alternation of remedies	5	5%
9	Homoeopathic posology	10/5+5	10%
10	Local application	10/5+5	10%
11	Relation of Pathology to therapeutics	10/5+5	10%
12	Different modes of treatments	5	5%
13	Deflected current	5	5%
Total		100	100%

Distribution of Questions:

1. Content with marks distribution of 5 marks (5%) shall be asked under the question number 6 to 13.
2. Content with marks distribution of 15 marks (15%) shall be asked under question 1 as sub question of 10 marks or under question number 2 to 5 of 10 marks and from question 6 to 13 of 5 marks
3. Content with mark distribution of 30 marks (30%) shall be asked under question 1, as sub question of 10 marks Question 2 to 5 of 10 marks and Question 6 to 13 of 5 marks
4. From question 2 to 5 can be divided in sub question a) and b) with 5 marks each i.e total 10 marks

7a. Theory Question Paper Layout (Common Layout)

Part 1, Part 2 Paper 1, and Part 2 Paper 2

Forty percent marks for Short Answer Questions (SAQ) and forty Percent marks for Long Explanatory Answer Questions (LAQ) and Twenty percent marks for Case based / Problem based question and these questions shall cover the entire syllabus of the subject.

Q No.	Marks	Content
1	20	Case based / Problem based question

2	10	General Pathology of homoeopathy
3	10	Temperaments
4	10	Disease classification
5	10	Relation of Pathology to therapeutics
6	05	Homoeopathic posology/ Local application
7	05	Suppression and palliation
8	05	Unity of Medicine
9	05	Schools of philosophy
10	05	Phenomenological viewpoint
11	05	Alternation of remedies
12	05	Different modes of treatments
13	05	Deflected current

7b. Clinical / Practical and Oral/viva voce Examination:

The MD Part I clinical examination should include:

- One long case pertaining to major systems
- Stations for clinical, procedural and communication skills
- Oral/viva voce examination shall be comprehensive enough to test the postgraduate student's overall knowledge of the subject

Clinical / Practical and Oral/viva voce Examination:

MD (Hom) Part I -80 Marks (Clinical)	
1 Long case (Major system)	40
Clinical Stations	20
Communication skills	10
Log book	10
MD (Hom) Part I -80 Marks (Viva Voca)	
Viva –Voce (Clinical Medicine, Applied Homoeopathy and, Lab investigations, ECG)	50 (20+20+10)
Micro Teaching	10
Synopsis	20
INTERNAL ASSESSMENT – 40 marks	
Internal Assessment	40

MD Part II Clinical Examinations should include

- One long case pertaining to major systems
- Two short cases
- Communication skills
- Oral/viva voce examination shall be comprehensive enough to test the postgraduate student's overall knowledge and skill of the subject

Part II -80 Marks (Clinical)	
1 Long Case	40
2 Short Cases	30
Communication skills	10
Part II -80 Marks (Viva Voca)	
Viva – Voce (Applied Homoeopathic approach and miasmatic interpretation of Diseases)	50 (20+20+10)
Dissertation defence	20
Micro teaching	10
INTERNAL ASSESSMENT – 40 marks	
Internal Assessment	40

Scoring Scheme

M.D (Hom) Part – I examination – Maximum marks for each subject and minimum marks required to pass shall be as follows: -

Subject	Theory		Practical / Clinical examination including Viva - Voce	
	Maximum marks	Pass marks	Maximum marks	Pass marks
i. PG specialty subject	100	50	200*	100*
ii Advance learning in relation to Homoeopathic Philosophy	100	50		
iii Research Methodology and Biostatistics	100	50	-	-

Summative Assessment:

(* 20% weightage shall be for internal assessment, * 80% weightage shall be for summative assessment)

(3) M.D. (Hom) Part –II examination – Maximum marks for each subject and minimum marks required to pass shall be as follows

Subject	Theory		Practical / Clinical examination including Viva -Voce	
	Maximum marks	Pass marks	Maximum marks	Pass marks
i. Specialty subject Paper I	100	100	200*	100*
ii Specialty subject Paper II	100			

(* 20% weightage shall be for internal assessment, * 80% weightage shall be for summative assessment)

8. Reference books (as per APA)

1. Hahnemann, Samuel. (2013). Organon of medicine Translated from fifth edition, With an Appendix, by R. E. Dudgeon and from 6th edition by W. Boericke (Reprint edition) B. Jain Publishers (P) Ltd, New Delhi.
2. Singh Mahendra, Singh Subhas. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine (Third Edition). B. Jain Publishers (P) Ltd, New Delhi.
3. Dudgeon, R. E. (2019). Lesser writings of Samuel Hahnemann (14th Impression). B. Jain Publishers (P) Ltd, New Delhi.
4. Kent, J. T. (2002). Lectures on Homoeopathic Philosophy (Reprint edition). Indian Book & Periodical Publishers, New Delhi.
5. Roberts, H. A. (1995). The Principles and Art of Cure by Homoeopathy (Reprint edition). B. Jain Publishers (P) Ltd, New Delhi.
6. Close, Stuart. (2003). The Genius of Homoeopathy Lectures and Essays on Homoeopathy (Reprint edition) IBPP, New Delhi.
7. Hughes Richard. (2020). The Principles and Practice of Homoeopathy (13th Impressions). B. Jain Publishers (P) Ltd, New Delhi.

8. Dunham Carroll. (2019). Homoeopathy: The Science of Therapeutics. B. Jain Publishers (P) Ltd, New Delhi.
9. Sarkar B. K. (2004) Organon of Medicine by Samuel Hahnemann with An Introduction and Commentary on the Text: Ninth Revised Edition. Birla Publications Pvt. Ltd. Delhi.
10. Dhawale, M.L.(2013) Principles and Practice of Homoeopathy: Homoeopathic Philosophy and Repertorization (4th revised and enlarged edition). Dr M.L. Dhawale Memorial Trust
11. Hahnemann. S. (1999) The Chronic Diseases: Their Peculiar Nature and Their Homoeopathic Cure (Reprint Edition). B. Jain Publishers (P) Ltd
12. Banerjee. S. K. (2010) Miasmatic Diagnosis: Comparison of the Dermatological Symptoms in Miasmatic Prescribing, (2nd Extended Edition) B. Jain Publishers (P) Limited.
13. Allen. J. H. (1921) The Chronic Miasms: Psora and Pseudo-Psora, India Books and Periodicals Syndicate
14. Haehl, R.(1996) Samuel Hahnemann: His Life and Works. B. Jain Publishers (P) Ltd, New Delhi.
15. Bradford, T.L. (2016) The Life and Letters of Dr.Samuel Hahnemann. (7th impression). B.Jain Publishers.
16. Kent. J.T. (1926) New Remedies, Clinical Cases, Lesser Writings, Aphorisms and Precepts. Ehrhart & Karl.
17. Ortega PS. (1980). Notes on the miasm on Hahnemann's Chronic Diseases. National Homoeopathic Pharmacy.
18. Wright Hubbard Elizabeth. (2009) A Brief Study Course in Homoeopathy, B. Jain Publishers (P) Ltd. New Delhi
19. Schmidt, P. (2003) The Art of Interrogation. B. Jain Publishers (P) Ltd, New Delhi.
20. Schmidt, P. (2003) The Art of Case Taking. B. Jain Publishers (P) Ltd, New Delhi.

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Homoeopathic Repertory and Case Taking.

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Repertory and Case Taking;
- (ii) Fundamentals of Clinical Medicine in Homoeopathic Repertory and Case Taking; and
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Repertory and Case Taking. Paper 1
- (ii) Repertory and Case Taking. Paper 2.

III. Brief description of speciality and its relevance in homoeopathy post-graduate course.

Undergraduate education in repertory has oriented the students to the philosophy and construction of the most repertories and their clinical utility in day-to-day practice in common diseases and primary level of management.

Post graduate studies in repertory will take students on the journey of extending and deepening the understanding of the application of repertories at bedside. As well as grasping and internalizing the concept on which newer repertories are built and their application at bedside. Simultaneously, the concept and practice of case taking will be broadened and deepened to extend to several clinical conditions and settings thus building the experiential bridge between case taking and the repertory.

He ought to learn the background that existed in creation of these repertories by various masters. He should be able to learn the difference between two repertories. Difference between offerings of physical and software-based repertories. Explore this comparative learning at bedside to demonstrate the utility of one over the other.

He should be proficient to apply the philosophical, clinical, regional, software-based repertories at bedside as per the demand of the case. Master the art of analysis and evaluation of symptoms in the most proficient manner.

This background in depth will allow them to address the scope and limitations of different repertories and their utility in different clinical states and situations. Further depth and refinement in symptom classification, evaluation and basic philosophy of different approaches with repertorial totality and PDF will help in approaching cases of secondary and tertiary level. This in depth study will also help in expanding and addition to Homoeopathic Materia Medica.

He should demonstrate effective application of Kent's 12 observations and application of Remedy relationship chapters in various repertories based on these 12 observations. Software and artificial intelligence will become a part of day-to-day practice and understanding their scope, limitations and development will impart insight at basic level which will help repertory post graduate to develop the logic.

In-depth study also will help in developing insights in case taking which will help in developing different facets and areas of exploration and adding them to current repertories or build new repertories based on dissertations on case receiving and repertory. These can form the foundation for further research work and authentication. Utilizing this knowledge to achieve depth in case receiving as well as developing a competency to translate data in rubrics and visa a versa.

He explores the possibilities of integration of this tool with various other homoeopathic speciality subjects and train those candidates in the art and science of use of repertory at bedside.

With changing socio, cultural, political, economic situation one also needs to look into addition and modification of the repertorial rubrics and add bio-psycho-social model for upcoming repertories. Postgraduates would need to be oriented for the same. This will allow them to explore different avenues of research and will help in updating as well as expanding those repertories based on the philosophy and concepts on which they are built and not randomly expanding them.

So, the curriculum so designed shall address these professional activities and competency.

IV. Program Objectives. (Entrustable Professional Activities – EPAs)

1. Gather a homoeopathic history and perform a physical examination in various settings.
2. Obtain information for homoeopathic case management decisions through case analysis.
3. Prioritize a differential diagnosis following a clinical encounter.
4. Recommend and interpret common diagnostic and homoeopathic characteristics and screening tests.
5. Determine the appropriate diagnostic position for planning comprehensive homoeopathic management.
6. Document the homoeopathic as well as clinical data and the processing of case.
7. Apply appropriate homeopathic tools for prescription and assessment of progress.
8. Prioritize the Repertorial approach for making homeopathic prescription.
9. Adapt the axioms of Information and Communication Technology for unbiased repertorisation along with PDF.
10. Form clinical questions and retrieve evidence to advance patient care.
11. Identify the need for second +opinion/expert advice to improve quality of care.
12. Document a clinical encounter in the patient record.
13. Provide oral presentation of a clinical encounter.
14. Adhere to legal and ethical principles in professional practice.
15. Consistently demonstrate characteristics of self-directed learning by recognizing continuing educational needs and using appropriate learning resources.
16. Teach juniors and patients on aspects of health education.
17. Improve instructional methods and assessment practices for repertory at undergraduate and postgraduate levels.
18. Conduct research relevant for promoting quality of homeopathic services through repertory-based competencies.
19. Publish evidence-driven documentation of repertory-based clinical outcomes in credible journals.
20. Collaborate as a member of an interprofessional team.
21. Function as effective leader of team that is engaged in health care, research and training.
22. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

IV(1). Mapping of EPAs and Domain Competencies

KS : Knowledge & Scholarship
Orientation

PC : Patient care

HO : Homoeopathic

CS : Communication skills

PBL : Practice based learning

Prf : Professionalism

Sr. No	EPA	KS	PC	HO	CS	PBL	Prf
1	Gather a homoeopathic history and perform a physical examination.	√	√	√	√	√	√
2	Obtain information for homoeopathic case management	√	-	√	√	√	-

	decision through case analysis.						
3	Prioritize differential diagnosis following a clinical encounter	√	√	√		√	
4	Recommend and interpret common diagnostic and homeopathic characteristics and screening tests	√	√	-	-	-	-
5	Determine the appropriate diagnostic position for planning comprehensive homeopathic management	√	-	√	-	√	-
6	Document the homeopathic as well as clinical data and the processing of case	√	-	√	-	√	-
7	Apply appropriate homeopathic tools for prescription and assessment of progress	√	-	√	-	-	-
8	Prioritize the significance of repertory for making homeopathic prescription	-	-	√	-	√	-
9	Adapt the axioms of Information and Communication Technology for unbiased repertorisation.	-	-	√	-	√	√
10	Form clinical questions and retrieve evidence to advance patient care	√	√	-	√	√	-
11	Identify the need for second opinion/expert advice to improve quality of care	-	√	√	-	√	√
12	Document a clinical encounter in the patient record	-	-	-	√	√	-
13	Provide oral presentation of a clinical encounter	-	-	-	√	-	√
14	Adhere to legal and ethical principles in professional practice.	-	-	-	-	-	√
15	Consistently demonstrate characteristics of self-directed learning by recognizing continuing education needs and using appropriate learning resources.	-	-	-	-	√	√
16	Teach juniors and patients on aspects of health education	√	-	-	√	-	√
17	Improve instructional methods and assessment practices for repertory at undergraduate and postgraduate levels	-	-	-	-	√	√
18	Conduct research relevant for promoting quality of homeopathic services through repertory-based competencies.	-	-	√	-	√	√
19	Publish evidence-driven documentation of repertory-based clinical outcomes in credible journals	-	-	-	√	-	√
20	Collaborate as a member of an interprofessional team	-	-	-	√	√	√
21	Function as an effective leader of a team that is engaged in health care, research and training	-	-	-	√	-	√
22	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	√	-	-	√	√	√

IV(2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

EPAs	Hom-PG-R -Part 1			Hom-PG-R -Part 2		
	Sem / Mod 1	Sem / Mod 2	Sem / Mod 3	Sem / Mod 4	Sem / Mod 5	Sem / Mod 6
Gather a homoeopathic history and perform a physical examination	2 Documents accurately and legibly.	2 Demonstrates respect for patient privacy and autonomy	3 Communicates effectively with patient and or attendants, care givers etc.	4 Becomes aware of use of knowledge, skill and emotional limitation of self	4 Develops ability to withstand and cope up with stress	5 Works effectively in various health care settings and demonstrates application of appropriate knowledge, skill and attitude
Obtain information for homoeopathic case management through case analysis.	2 Gather information that will help case management decision	2 Ensure the data gathered is accurate	3 Define the scope of homoeopathy	3 Inform patient scope of homoeopathy	4 Conclude the scope of homoeopathy and ensure	5 Ensures juniors follow steps defined accurately.
Prioritize a differential diagnosis following a clinical encounter	2 Organizes the data obtained and suggest a differential diagnosis	3 Concludes the differential diagnosis based on case, examination	3 Concludes the differential diagnosis based on case, examination.	4 Conveys the process adopted in arriving at differential diagnosis	4 Concludes the differential diagnosis based on case, examination	5 Orients the juniors the process to be adopted to arriving at differential diagnosis
Recommend and interpret common diagnostic and homoeopathic characteristics and screening tests	2 Demonstrates the ability to identify common and characteristic symptoms	3 Identifies and suggests suitable investigation reports relevant to differential diagnosis.	4 Advise suitable investigations to arrive at the provisional diagnosis	4 Correlates the investigation reports with the clinical condition.	4 Correlates the investigation reports with the clinical condition.	5 Orients the juniors on the process of identifying common and characteristic homoeopathic symptoms and advise of relevant investigations and help them correlate clinically.
Determine the appropriate diagnostic position for planning comprehensive homoeopathic management	2 Identifies area involved in planning comprehensive homoeopathic management	2 Documents appropriately and accurately the planning of comprehensive homoeopathic management	3 Demonstrates accurate documentation of diagnostic position for planning comprehensive homoeopathic management	3 Seeks proactively feedback on process of diagnostic position for comprehensive homoeopathic management	3 Seeks proactively feedback on assessment of process adopted in periodic follow ups of patients in determining continuation	4 Demonstrates effective implementation of diagnostic position for planning comprehensive homoeopathic management

		t	managemen t	t documented	or revision for diagnostic position planning comprehens ive homoeopath ic managemen t	managemen t
Document the homoeopathic as well as clinical data and the processing of case	2 Attempts to document the clinical and homoeopathic data accurately and appropriately in the patient records of the organization	3 Demonstrates accurate and appropriate documentation of clinical and homoeopathic data in the patient records of the organization .	3 Demonstrates accurate and appropriate analysis and evaluation of clinical and homoeopathic data in the patient records of the organization .	4 Demonstrates willingness to receive feedback and improve the skills of processing of the case	4 Recognizes the need of developing ability of self-assessment to improve the skills of processing of the case	5 Orients juniors the various steps required for accurate processing of case
Apply appropriate homeopathic tools for prescription and assessment of progress	3 Demonstrates knowledge of choice an appropriate repertory for the case (Basic, regional, clinical, modern, softwares etc.), remedy relationship section of repertory	3 Demonstrates knowledge of evaluation and sign and symptoms to assess of patient and correlate with Kent's 12 observations and use of remedy relationship section of repertory	4 Can apply the evaluation and sign and symptoms to assess of patient and correlate with Kent's 12 observations and use of remedy relationship section of repertory	4 Can choose appropriate homoeopathic tool (Basic, regional, clinical, modern, softwares etc.) for prescription applicable for progress assessed of the patient in primary setting	5 Applies appropriate homoeopathic tool (Basic, regional, clinical, modern, softwares etc.) for prescription applicable for progress assessed of the patient in secondary & tertiary setting	5 Demonstrates application of appropriate homoeopathic tool (Basic, regional, clinical, modern, softwares etc.) for prescription applicable for progress assessed of the patient in various specialty subjects
Prioritize the significance of repertory for making homoeopathic prescription	3 Applies basic repertories- Kent, TPB, BBCR	4 Applies regional and modern repertories in various specialty subjects and settings	4 Applies softwares in various specialty subjects and settings	5 Monitors the effective application of basic repertories by juniors	5 Monitors the effective application of regional and modern repertories by juniors	5 Monitors the effective application of software repertories by juniors
Adapt the axiom of Information and Communication Technology for unbiased repertorisation.	3 Explores the various softwares and their application	4 Demonstrates the utility of various features of repertory	4 Demonstrates the utility of various features of repertory	5 Engages the students in understanding the various	5 Engages the students in understanding the utility of repertory	5 Engages the students in understanding the various

		softwares in clinical practice	softwares in study of materia medica & development of new repertoires	applications in the repertory softwares	softwares in study of Materia Medica	repertory softwares in creation of new repertoires
Form clinical questions and retrieve evidence to advance patient care	2 Explore the process of prognostication of the disease	3 Documents accurately the experience shared by patient	3 Analyses the document created to advance patient care	4 Demonstrates the synthesis of evidences to advance patient care	4 Effectively replicates the application of evidence to advance patient care	5 Trains the juniors to create appropriate questions and retrieve evidence to advance patient care
Identify the need for second opinion / expert advice to improve quality of care	2 Learns when to seek second opinion / expert advice	3 Attempts to define reasons for second opinion / expert advice	3 Communicates with patient and colleagues the need for second opinion / expert advice	4 Communicate with expert reasons for second opinion	4 Learn to accept feedback on gaps in self's evidence based medicine	5 Demonstrates the process of how and when to seek second opinion / expert advice
Document a clinical encounter in the patient record	2 Demonstrate the ability to record details expressed by patient	3 Explores the deficiencies in clinical record by engaging with the patient	3 Systematically records the events of interaction with patient	4 Accepts feedback proactively on lacunae within self in documenting the expression of patient in the record	4 Demonstrate the effective utilization of patient record to generate evidence based medicine	5 Orients the importance of accurate documentation of clinical record
Provide oral presentation of a clinical encounter	2 Accurately narrates the information	3 Accurately expresses the nuances of communication of patient	3 Accepts proactively feedback on gaps in oral presentation	4 Attempts to judge self's performance on the presentation	4 Identifies why of personal prejudices in the oral presentation	5 Demonstrates the importance and advantages of accurate oral presentation of clinical encounter
Adhere to legal and ethical principles in professional practice.	2 Demonstrates awareness of responsibilities	2 Adheres to responsibilities	3 Ensures adherence to responsibilities	3 Proactively open to feedback in gaps in adherence.	4 Ensure awareness of adherence in various clinical settings and clinical conditions	4 Demonstrates the adherence in various clinical settings and clinical conditions
Consistently demonstrate characteristics of self-	1 Proactively seeks the process	2 Attempts to demonstrate the	2 Demonstrate the value experienced	3 Submits to feedback on the process	3 Attempts to proactively adapt and	4 Demonstrates through action the

directed learning by recognizing continuing educational needs and using appropriate learning resources.		importance through actions	through consistent self-driven effort	adopted and tools utilized	change based on feedback	use of tools to become a self-directed learner.
Teach juniors and patients on aspects of health education	2 Identifies the skill essential	3 Attempts to implement the skill acquired	3 Masters the various skills of communication	4 Attempts the application in various settings	4 Consistently applies the process across all settings and personalities	5 Observes the students and patients in action
Improve instructional methods and assessment practices for repertoire at undergraduate and postgraduate levels	1 Orients self to various instructional assessment practices	2 Acquires the basic knowledge of how to do it	3 Attempts to apply at UG level	4 Attempts to apply at PG level	4 Demonstrates how to apply at UG and PG level	5 Monitors application at UG and PG level
Conduct research relevant for promoting. Quality of homeopathic service through repository-based competencies.	1 Orients self to research methodology as a subject	2 Proactively seeks guidance in application of research methodology	3 Identifies the avenues and processes that can be taken	3 Concludes the topic to work and applies the learnt processes	4 Conducts the research on the topic selected and consolidates the findings	5 Reviews the conclusions and identifies future areas for research
Publish evidence-driven documentation of repository-based clinical outcomes in credible journals.	1 Becomes aware of importance	2 Explores the documentation already published	2 Consolidates the process to adopted	3 Attempts to document	3 Effectively documents	4 Ensures publication of research conducted
Collaborate as a member of an interprofessional team	1 Becomes aware of need	2 Identifies situations by observation	2 Proactively participates	3 Proactively seeks others participation	3 Attempts to seek feedback on self's lacunae in the process	4 Effectively contributes as a team member
Function as effective leader of team that is engaged in health care, research and training	1 Becomes aware of essential leadership qualities	2 Proactively seeks leadership role	2 Attempts to deliver leadership role	3 Seeks feedback on self's leadership traits	3 Explores opportunities to demonstrate leadership	4 Demonstrates effective leadership
Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	Justify the need for educational methodology as a component of PG Course.	Identify the learning objectives for their domain in Bloom's taxonomy. Identify the contexts of	Recognise the levels of Guilbert. Indicate the level in Miller's Pyramid. Select appropriate	Write objectives for all domains of Bloom and levels of Guilbert. Identify assessment	Conduct evidence driven TL and Assessment of UG students.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate

		learning.	instructional activities.	tools appropriate for the context.		e education.
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PART I Paper 1:

V. Courses and Course Objectives.

Part 1-Paper I: Fundamentals of Homoeopathic Repertory and Case Taking (Hom-PG- FHRCT)

- Hom-PG- FHRCT - 01 Concept of repertory in Homoeopathy
- Hom-PG- FHRCT - 02 Historical evolution of Repertories
- Hom-PG- FHRCT -03 Terminologies
- Hom-PG- FHRCT - 04 Symptomatology
- Hom-PG- FHRCT - 05 Case taking in various settings and situations.
- Hom-PG- FHRCT - 06 Analysis and evaluation of symptoms
- Hom-PG- FHRCT -07 Case analysis
- Hom-PG- FHRCT -08 Repertorisation
- Hom-PG- FHRCT - 09 Evolution – Plan – Construction – Application of Philosophical repertories

VI. Course description

- **Course Name** Hom-PG- FHRCT - 01 Concept of repertory in Homoeopathy

Course Overview:	This course will provide students of MD Hom (Repertory) with an overview of the significance of repertory as credible database for shortlisting prescription possibilities.
Learning Outcomes:	<p>Competency 1: Explain the position of repertory as a database of symptoms.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Recall the felt need for repertory by the early stalwarts of homeopathy. ▪ Discuss the efforts of Boenninghausen for a granular indexing symptom-remedy connect. ▪ Illustrate the relationship of repertory with materia medica. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Search the relevant data to seek basis of creation of repertory. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Recall the experience with referencing the reportorial result with materia medica before confirming the prescription. <p>Competency 2: Justify the necessity for repertory in homeopathic practice.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describe repertory as a clinical decision tool. ▪ State the taxonomy of evidence for clinical decision. ▪ Discuss importance of evidence-supported decision in clinical practice. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ To logically demonstrate the need of repertory ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Identify the critical incidents that supported your prescription decision to be unbiased.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached

Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning
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Course Name: Hom-PG- FHRCT - 02 Historical evolution of Repertories

Course Overview:	This course will provide students of MD Hom (Repertory) with an overview of the Historical evolution of Repertory.
	Competency 1: Discuss chronological development of repertories. <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Identify background behind the very first need of Repertory. ▪ Recognize efforts done by master Hahnemann for creation of repertories. ▪ Relate Evolution of concepts and development of various kind of Repertories ▪ Illustrate Historical evolution of Repertories. ▪ Discuss the philosophy and scientific background of development of Repertories. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Future scope of repertories – identifying future methods of use of Repertory for study of Materia Medica – clinical conditions at mental and physical level ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Justification of selection of repertory in variety of cases
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation

▪ **Course Name: Hom-PG- FHRCT -03 Terminologies**

Course Overview:	This course will provide students of MD Hom (Repertory) with an understanding the genesis and interpretation of terminologies used in various repertories
	Competency 1: Understanding the genesis and interpretation of terminologies used in various repertories. <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Discuss the genesis and interpretation of terminologies used in the repertories such as Boenninghausen, Kent, Boger, Boericke, Murphy, Synthesis, Synthetic, Knerr. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Apply various terminologies used in repertory according to the case ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Correlate terminologies used specific to different repertories
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Homoeopathic Orientation

▪ **Course Name: Hom-PG- FHRCT - 04 Symptomatology**

Course Overview:	This course will provide students of MD Hom (Repertory) with an overview of the significance of various type of symptoms & its utility in different types of cases and situation.
Learning Outcomes:	Competency 1: Significance of various type of symptoms & its utility in different types of cases and situation <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Define symptoms and glossary of symptoms. ▪ Classify symptoms as per various stalwarts. ▪ Explain the position of repertory as a database of symptoms. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Apply various types of symptoms as per their significance in framing totality in different types of cases and situation. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Recall your experience with referencing the case with symptom analysis before confirming the totality.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course Name: Hom-PG- FHRCT - 05 Case taking in various settings and situations.

Course Overview:	This course will provide students of MD Hom (Repertory) with in-depth understanding of case taking in Homoeopathic Practice in different settings and scenarios
Learning Outcomes:	Competency 1: Develop Case taking skills in different type of clinical conditions and setups. <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Define Case taking, Purpose and objectives of case taking. ▪ Recall various components of clinical case taking and homoeopathic case taking. ▪ Discuss the Art of Case taking in different types of cases as in acute (Individual, Sporadic, Epidemic, Acute diseases with a Chronic background) ▪ Discuss the art of case taking in Chronic – Non – Communicable, Psychosomatic diseases, Mental diseases, intermittent with acute- exacerbation etc. ▪ Demonstrate In-depth understanding of Disease diagnosis with Differential diagnosis, ▪ Classify the phase of the disease acute or chronic. ▪ Differentiate the Nature of disease, ▪ Identify the Pace and progress of disease, ▪ Classify the Level of disease in the health-disease paradigm, Derive the Susceptibility of the person to disease, ▪ Define the patient as a person, ▪ Conclude the vitality of the patient. ▪ Identify why the patient is suffering. ▪ Perform Case analysis for Repertorisation. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Conducts general physical examination. ▪ Conducts systemic examination. ▪ Records the examination finding appropriately. ▪ Request for appropriate investigations to establish the diagnosis.

	<ul style="list-style-type: none"> Observes the non – verbal expressions of patient and other care givers. Documents the verbal and non – verbal communication expressed by the patient and other care givers. Analyses the documented expressions. Correlates the verbal and non – verbal communication and give a logical meaning. Prescribe suitable dietary measure. Advise suitable physical therapies. Orient the patient and his care givers prognosis of the case. Orient the scope and limitation of the therapeutic action envisaged. Utilize latest technologies for case taking <ul style="list-style-type: none"> <u>Reflection</u> <ul style="list-style-type: none"> Problem identification strategies (communication oral and physical to demonstrate the intent of helping the patient) Problem solving strategies (choosing of repertorial or non – repertorial approach to arrive at the medicine, decision on auxiliary therapy, decision on diet and regimen) To appropriately use the case record of the institute to document the symptoms expressed by the patient and care givers at the right places. <p>Competency 2: Differentiates the data obtained between diagnostic and homoeopathic.</p> <ul style="list-style-type: none"> <u>Knowledge</u> <ul style="list-style-type: none"> Enumerate different types of symptoms. <u>Skill</u> <ul style="list-style-type: none"> Differentiate various signs and symptoms and their relevance. <u>Reflection</u> <ul style="list-style-type: none"> To establish the clinical problem, the patient is suffering from and the characteristic expressions individualising the patient as a person. <p>Competency 3: Organisation of data for arriving at the differential diagnosis.</p> <ul style="list-style-type: none"> <u>Knowledge</u> <ul style="list-style-type: none"> Analysing the symptoms and signs to arrive at group of diagnosis. Identifying suitable investigations based on history and examination findings. Correlating the history – examination and investigations to arrive at provisional diagnosis and differential diagnosis. <u>Skill</u> <ul style="list-style-type: none"> Request for appropriate investigations to establish diagnosis. <u>Reflection</u> <ul style="list-style-type: none"> To integrate the various information from case taking, physical examination, investigation records, past medical records
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning / Communication skills / Professionalism.

- Course Name:** Hom-PG- FHRCT - 06 Analysis and evaluation of symptoms

Course Overview:	This course will provide students of MD Hom (Repertory) with an understanding of Analysis and Evaluation of symptoms.
Learning Outcomes:	<p>Competency 1: Explain analysis and evaluation of symptoms.</p> <ul style="list-style-type: none"> <u>Knowledge:</u>

	<ul style="list-style-type: none"> Define Symptom analysis as per different stalwarts. Discuss evaluation of symptoms as per Boenninghausen, Kent, Boger <u>Skill:</u> <ul style="list-style-type: none"> Application of analysis and evaluation of symptoms in various cases for framing totality. <u>Reflection:</u> <ul style="list-style-type: none"> Recall your experience with referencing the case taking for framing the totality.
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

▪ **Course Name:** Hom-PG- FHRCT -07 Case analysis

Course Overview:	This course will provide students of MD Hom (Repertory) with an insight into method, significance of case analysis & its practical utility in various clinical situation.
Learning Outcomes:	<p>Competency 1: Describe the process of case analysis in terms of scope of Homoeopathy.</p> <ul style="list-style-type: none"> <u>Knowledge:</u> <ul style="list-style-type: none"> Identify case category – acute / chronic. Identify case category mental / physical. Identify case category miasmatic / surgical. Classify acute case. Classify chronic case. Classify type of mental disease Classify type of physical disease Classify miasmatic nature of the case. Define the scope of homoeopathy in each case. <u>Skill:</u> <ul style="list-style-type: none"> Classify the given case as per scope and limitations of Homoeopathy. <u>Reflection:</u> <ul style="list-style-type: none"> Able to define the process of choosing a case for homoeopathic management.
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

▪ **Course Name:** Hom-PG- FHRCT -08 Repertorisation

Course Overview:	This course will provide students of MD Hom (Repertory) with an In-depth knowledge and application of various methods and technique of repertorization & its utility in different types of cases and situation.
Learning Outcomes:	<p>Competency 1: Illustrate concept of Repertorization and its demand based on demand of the case.</p> <ul style="list-style-type: none"> <u>Knowledge:</u> <ul style="list-style-type: none"> Discuss concept of Repertorization. Identifies symptom in the case. Classifies the symptoms. Evaluates the importance of the symptom. Arranges the symptoms as per the philosophy applicable for the case.

	<ul style="list-style-type: none"> Identifies cases which don't need philosophical repertorisation. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Applying all prerequisites of repertorization for process of repertorization <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> Future scope of repertories – identifying future methods of use of Repertory for study of Materia Medica – clinical conditions at mental and physical level. <p>Competency 2: Apply method, technique, and process of repertorization in various cases of different scenarios.</p> <p>▪ <u>Knowledge:</u></p> <ul style="list-style-type: none"> Explore different methods & technique of repertorization described by various master's writings, their working methods, advantages and disadvantages and clinical application. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Apply different methods and technique of repertorization in various cases of different scenarios. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> Appreciates the utilisation of repertorisation in different scenarios <p>Competency 3: Apply method, technique, and process of creating Reportorial Syndrome (RS) & Potential Differential Field (PDF) in various cases of different scenarios.</p> <p>▪ <u>Knowledge:</u></p> <ul style="list-style-type: none"> Organises symptoms as per the demand of philosophical approach in RS & PDF Demonstrate the logic applied in creating RS & PDF <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Apply the appropriate filters required for RS & PDF. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> Appreciates the importance of repertorization using concept of RS & PDF in arriving at the similitum of the case.
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

- **Course name:** Hom-PG- FHRCT - 09 Evolution – Plan – Construction – Application of Philosophical repertories

Course Overview:	<p>This course will provide students of MD Hom (Repertory) with an in depth understanding of the significance of philosophical repertories in clinical practice.</p> <ul style="list-style-type: none"> Boenninghausen's Therapeutic Pocket Book – T.F. Allen Repertory of the Homoeopathic Materia Medica – J. T. Kent Boger Boenninghausen's Characteristic Repertory – C. M. Boger
Learning Outcomes:	<p>Competency 1: Explain the source and origin of repertory, about writer, developments, and edition subsequently.</p> <p>▪ <u>Knowledge:</u></p> <ul style="list-style-type: none"> Recall the source and origin of repertory with the editions. Discuss background the author and its influence on the essence of that repertory. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Organises the information in a logical manner. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> Understands the importance of appreciating the link between author's background in creation of his repertory.

Competency 2: Understands and demonstrates the philosophical background and its basis of plan and construction of the repertory.

- Knowledge:
 - Understands the chapters in the repertory.
 - Recalls the structure of the rubrics represented in the repertory.
 - Remembers the years of publication of the editions.
 - Recalls the difference in various editions.
 - Understands the reason behind the editions.
 - Recalls the unique rubrics.
 - Recalls the number of remedies in the repertory.
- Skill:
 - Able to demonstrate the relationship between the background and plan and construction of the repertory.
- Reflection:
 - Appreciates the process involved in application of philosophy to creation of the repertory.

Competency 3: Demonstrate the Adaptability, Scope, and Limitations of philosophical repertories in clinical practice.

- Knowledge:
 - Understands utility of philosophical repertory in specific conditions.
 - Applies in the specific conditions.
 - Refers in specific conditions.
 - Oriented to cross reference in specific conditions.
 - Aware of limitation of the utility in specific conditions.
- Skill:
 - Utilises the repertories at bedside as appropriate to the clinical condition.
- Reflection:
 - Derives assessment of utility of application of the repertories at bedside.

Competency 4: Demonstrate the skills of choosing appropriate rubrics and explains the interpretation logic adopted.

- Knowledge:
 - Observes the non – verbal expressions of patient and other care givers.
 - Documents the verbal and non – verbal communication expressed by the patient and other care givers.
 - Analyses the documented expressions.
 - Correlates the verbal and non – verbal communication and gives a logical meaning to the expression.
 - Chooses an appropriate word that represents the expression of the patient.
 - Attempts to choose an appropriate rubric representing the word of the expression.
- Skill:
 - Ensures that the interpretation made is matching to the experience shared by the patient or care giver.
 - Utilises right section of the repertory for reference.
 - Ensure all the cross references suggested are checked for appropriateness to the symptoms of the case.
- Reflection:
 - Adapt to the plan, construction based on the background of the philosophy of the repertory to the case in hand.
 - Understands the limitation of self in choosing of the appropriate rubric.

Competency 5: Analyses and compares utility of various repertories in relationship to repertories classified as philosophical.

- Knowledge:
 - Understands the utility in specific conditions.
 - Applies in the specific conditions.
 - Refers in specific conditions.

	<ul style="list-style-type: none"> ▪ Oriented to cross reference with clinical repertories in specific conditions. ▪ Aware of limitation of the utility in specific conditions. ▪ Recalls the structure of the rubrics represented in the repertory. ▪ Recalls the unique rubrics. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Demonstrates awareness of the various repertories and when they can be applied. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Identifies the advantages and limitation of each of the repertories compared at bedside.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment/Written assessment
Prescribed Texts:	<ul style="list-style-type: none"> • Boenninghausen's Therapeutic Pocket Book – T.F. Allen • Repertory of the Homoeopathic Materia Medica – J. T. Kent • Boger Boenninghausen's Characteristic Repertory – C. M. Boger • Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Homoeopathic Repertory and Case Taking	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Clinical Medicine in Homoeopathic Repertory and Case Taking	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva

voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 1. Fundamentals of Homoeopathic Repertory and Case Taking (Hom-PG-FHRCT)

- Hom-PG- FHRCT - 01 Concept of repertory in Homoeopathy
- Hom-PG- FHRCT - 02 Historical evolution of Repertories
- Hom-PG- FHRCT -03 Terminologies
- Hom-PG- FHRCT - 04 Symptomatology
- Hom-PG- FHRCT - 05 Case taking in various settings and situations.
- Hom-PG- FHRCT - 06 Analysis and evaluation of symptoms
- Hom-PG- FHRCT -07 Case analysis
- Hom-PG- FHRCT -08 Repertorisation
- Hom-PG- FHRCT - 09 Evolution – Plan – Construction – Application of Philosophical repertories

VII (2b). Question Paper Layout (PART I -PAPER I)

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question using either of any one repertory Hom-PG- FHRCT - 09	20
2	LAQ	Hom-PG- FHRCT - 02	10
3	LAQ	Hom-PG- FHRCT -03	10
4	LAQ	Hom-PG- FHRCT-05	10
5	LAQ	Hom-PG- FHRCT -08	10
6	SAQ	Hom-PG- FHRCT - 06	5
7	SAQ	Hom-PG- FHRCT - 06	5
8	SAQ	Hom-PG- FHRCT -07	5
9	SAQ	Hom-PG- FHRCT - 09	5
10	SAQ	Hom-PG- FHRCT - 05	5
11	SAQ	Hom-PG- FHRCT - 04	5
12	SAQ	Hom-PG- FHRCT - 04	5
13	SAQ	Hom-PG- FHRCT - 01	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

1. Allen, H. C. (1993). *The Therapeutics of Fever* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
2. Allen, T. F. (2003). *Boenninghausen's Therapeutics Pocket Book* (Reprint ed.). New Delhi: Indian Books & Periodicals Publishers, New Delhi.
3. Barthel, H., & Klunker, W. (2008). *Synthetic Repertory* (Reprint Edition ed.). New Delhi: Indian Books and Periodicals Syndicate, New Delhi.
4. Bell, J. B. (1997). *The Homoeopathic Therapeutics of Diarrhoea* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
5. Berridge, E. W. (1973). *Complete Repertory to the Homoeopathic Materia Medica, Diseases of the Eyes*. New Delhi: Harjeet & Co. New Delhi.
6. Bidwell, G. I. *How to use the Repertory*. New Delhi: Indian Books and Periodicals Syndicate, New Delhi.
7. Boenninghausen, C. (2019). *The Lesser Writings of C. M. F. Boenninghausen* (14th Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
8. Boericke, G. (1986). *A compend of the Principles of Homoeopathy for students in Medicine* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd., New Delhi.
9. Boericke, W. (2016). *Boericke's New Manual of Materia Medica with Repertory* (Second Revised & Re-augmented edition, 37th impression ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
10. Boger C.M (2008) Boenninghausen's characteristics Materia Medica & repertory with word index with corrected & revised abbreviations & word index. B Jain Pub Pvt Ltd.
11. Boger, C. M. (2008). *A Synoptic Key of the Materia Medica* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
12. Boger, C. M. (1996). *Times of the Remedies and Moon Phases* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
13. Borland, D. (2023). *Pneumonias* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
14. Clark, G. H., & Lee, E. J. (1894). *Lee and Clarkes's Cough and Expectoration: A Repertorial Index of Their Symptoms* (2nd ed.). A. L. Chatterton et Company.
15. Clarke, J. H. (2003). *The Prescriber* (Reprint ed.). New Delhi: Indian Books & Periodicals Publishers, New Delhi.
16. Clarke, J. H. (1961). *A Clinical Repertory to the Dictionary of Materia Medica*. Calcutta : Sri. H. Dey of A. P. Homoeo Library, Calcutta.
17. Dhawale, M. L. (2020). *Principles and Practice of Homoeopathy* (Fourth Edition (Revised & Enlarged)- 11th impression ed.). New Delhi: B. Jain Publishers Pvt. Ltd., New Delhi.

18. Dockx, R., & Kokelenberg, G. (1996). *Kent's Comparative Repertory of the Homoeopathic Materia Medica* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
19. Fimmelsberg, J. K., & Kent, J. T. (1987). *Kent's Repertorium Generale*. Barthel & Barthel.
20. Gallavardin, J. P. (1986). *Repertory of Psychic Medicines with Materia Medica* (Second Edition ed.). New Delhi: B. Jain Publishers (P) Ltd, New Delhi.
21. Hahnemann, S. (2002). *Materia Medica Pura* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd., New Delhi.
22. Hahnemann, S. (2001). *The Chronic Diseases* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
23. Kent, J. T. (2012). *Repertory of the Homoeopathic Materia Medica* (Low Price Edition- 10th impression ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
24. Kent, J. T. (2019). *Lesser Writings- Clinical Cases, New Remedies, Aphorisms and Precepts* (14th Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
25. Knerr, C.B. (2021) *Repertory of Hering's guiding symptoms of our Materia Medica.*: B Jain Publishers Pvt. Ltd.
26. Lippe, C. (1996). *Repertory to the More Characteristic Symptoms of the Materia Medica* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
27. Minton, H. (2005). *Uterine Therapeutics* (Reprint Edition ed.). New Delhi: B. Jain Publishers (P) LTD.
28. Munir Ahmed R Fundamentals of repertories: Alchemy of Homoeopathic Methodology; HiLine publishers and distributors
29. Murphy, R. (2010) Homeopathic medical repertory: A modern alphabetical and practical repertory. New Delhi: B. Jain.
30. Phatak, S.R. (2016) Concise repertory of homeopathic medicines. New Delhi: B. Jain.
31. Roberts, H. A. (1999). *Sensation as if* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
32. Robert, H. A. *Repertory to the Rheumatic Remedies*. London: Homoeopathic Publishing Company Ltd, London.
33. Schmidt P, Diwan Harishchandra(1982). *Kent's Final General Repertory of the Homoeopathic Materia Medica* (Revised ed.). National Homoeopathic Pharmacy.
34. Schroyens, F. (Ed.). (2010). *Essential Synthesis*. New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
35. Tiwari, S. (1991). *Essentials of Repertorization* (5th Edition ed.). New Delhi: B. Jain Publishers (P) LTD.
36. Yingling, W. A. (1985). *The Accoucher's Emergency Manual* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.

Part II Paper I & II

V. Courses and Course Objectives.

Part II: Repertory and Case Taking. (Hom-PG-R -Part II – Paper I)

- Hom-PG-R – 10 Evolution – Plan – Construction – Application of Clinical repertories& Puritan repertories
- Hom-PG-R – 11 Evolution – Plan – Construction – Application of Post – Kentian repertories.

VI. Course description

Course name: Hom-PG-R – 10: Evolution – Plan – Construction – Application of Clinical & Puritan repertories

Course Overview:	This course will provide students of MD Hom (Repertory) with an in depth understanding of the significance of clinical & puritan repertories in clinical practice.
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	<ul style="list-style-type: none"> • Boericke’s Materia Medica with Repertory – W. Boericke • Concise Repertory of Homoeopathy – S. R. Pathak • Prescriber – J. H. Clarke • A Clinical Repertory to Dictionary of Homoeopathic Materia Medica – J. H. Clarke • Sensation as if – H. A. Robert • The Rheumatic Remedies – H. A. Roberts • Analytical Repertory of the symptoms of the Mind – C. Herring • Repertory of Hering’s Guiding Symptoms of our Materia Medica – C. B. Knerr
Learning Outcomes:	<p>Competency 1: Explain the source and origin of repertory, about author, developments, and subsequent editions.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Recall the source and origin of repertory with the editions. ▪ Discuss background the author and its influence on the essence of that repertory. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Organises the information in a logical manner. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Understands the importance of appreciating the link between author’s background in creation of his repertory. <p>Competency 2: Understands and demonstrates the background and basis of plan and construction of the clinical & Puritan repertories.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands the chapters in the repertory. ▪ Recalls the structure of the rubrics represented in the repertory. ▪ Remembers the years of publication of the editions. ▪ Recalls the difference in various editions. ▪ Understands the reason behind the editions. ▪ Recalls the unique rubrics. ▪ Recalls the number of remedies in the repertory. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Able to demonstrate the relationship between the background and plan and construction of the repertory. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Appreciates the process involved in application of philosophy to creation of the repertory. <p>Competency 3: Demonstrate the Adaptability, Scope, and Limitations of clinical & Puritan repertories in clinical practice.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands in utility in specific conditions. ▪ Applies in the specific conditions. ▪ Refers in specific conditions. ▪ Oriented to cross reference in specific conditions. ▪ Aware of limitation of the utility in specific conditions. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Utilises the repertories at bedside as appropriate to the clinical condition. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Derives assessment of utility of application of the repertories at bedside. <p>Competency 4: Demonstrate the skills of choosing appropriate rubrics and explains the interpretation logic adapted.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Observes the non – verbal expressions of patient and other care givers.

	<ul style="list-style-type: none"> Documents the verbal and non – verbal communication expressed by the patient and other care givers. Analyses the documented expressions. Correlates the verbal and non – verbal communication and gives a logical meaning to the expression. Chooses an appropriate word that represents the expression of the patient. Attempts to choose an appropriate rubric representing the word of the expression. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Ensures that the interpretation made is matching to the experience shared by the patient or care giver. Utilises right section of the repertory for reference. Ensure all the cross references suggested are checked for appropriateness to the symptoms of the case. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> Adapt to the plan, construction based on the background of the philosophy of the repertory to the case in hand. Understands the limitation of self in choosing of the appropriate rubric. <p>Competency 5: Analyses and compare utility of various repertories in relationship to clinical & Puritan repertories.</p> <p>▪ <u>Knowledge:</u></p> <ul style="list-style-type: none"> Understands the utility in specific conditions. Applies in the specific conditions. Refers in specific conditions. Oriented to cross reference with clinical repertories in specific conditions. Aware of limitation of the utility in specific conditions. Recalls the structure of the rubrics represented in the repertory. Recalls the unique rubrics. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Demonstrates awareness of the various repertories and when they can be applied. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> Identifies the advantages and limitation of each of the repertories compared at bedside. <p>Competency 6: Compare repertories before choosing the simillimum.</p> <p>▪ <u>Knowledge:</u></p> <ul style="list-style-type: none"> Identifies the differentiating features of two similar clinical repertories. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> Demonstrates clinical utility of two similar clinical repertories. <p>▪ <u>Reflection:</u></p> <p>Enhances the awareness of utility of similar clinical repertories</p>
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	<ul style="list-style-type: none"> Boericke’s Materia Medica with Repertory – W. Boericke Concise Repertory of Homoeopathy – S. R. Pathak Prescriber – J. H. Clarke A Clinical Repertory to Dictionary of Homoeopathic Materia Medica – J. H. Clarke Sensation as if – H. A. Robert The Rheumatic Remedies – H. A. Roberts Analytical Repertory of the symptoms of the Mind – C. Herring

	<ul style="list-style-type: none"> • Repertory of Hering's Guiding Symptoms of our Materia Medica – C. B. Knerr • Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: Hom-PG-R – 11: Evolution – Plan – Construction – Application of Post – Kentian repertories.

Course Overview:	<p>This course will provide students of MD Hom (Repertory) with an in depth understanding of the significance of Post Kentian repertories in clinical practice.</p> <ul style="list-style-type: none"> • Kent's Repertorium Generale – Jost Kunzli • Kent's Final General Repertory - Pierre Schmidt & Diwan Harishchandra • Kent's Comparative Repertory of the Homoeopathic Materia Medica - Dockx and Kokelenberg • Essential Synthesis – Fredrick Schroyens • Synthetic Repertory- Barthol & Klunker • Homoeopathic Medical Repertory – Robin Murphy • Additions to Kent's Repertory by Dr C. M. Boger • Repertory of the more Characteristic Symptoms of our Materia Medica – C. Lippe • A Synoptic Key to Materia Medica – C.M.Boger • Complete Repertory - Roger Von Zandvoort
Learning Outcomes:	<p>Competency 1: Explain the source and origin of repertory, about writer, developments, and edition subsequently.</p> <p><u>Knowledge:</u></p> <ul style="list-style-type: none"> ▪ Recall the source and origin of repertory with the editions. ▪ Discuss background the author and its influence on the essence of that repertory. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> ▪ Organises the information in a logical manner. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> ▪ Understands the relationship between the background of the author and its role in creation of the repertory. <p>Competency 2: Understands and demonstrates the background and basis of plan and construction of the Post Kentian repertories.</p> <p>▪ <u>Knowledge:</u></p> <ul style="list-style-type: none"> ▪ Understands the chapters in the repertory. ▪ Recalls the structure of the rubrics represented in the repertory. ▪ Remembers the years of publication of the editions. ▪ Recalls the difference in various editions. ▪ Understands the reason behind the editions. ▪ Recalls the unique rubrics. ▪ Recalls the number of remedies in the repertory. <p>▪ <u>Skill:</u></p> <ul style="list-style-type: none"> ▪ Able to demonstrate the relationship between the background and plan and construction of the repertory. <p>▪ <u>Reflection:</u></p> <ul style="list-style-type: none"> ▪ Appreciates the process involved in application of philosophy to creation of the repertory. <p>Competency 3: Demonstrate the Adaptability, Scope, and Limitations of Post Kentian repertories in clinical practice.</p>

- Knowledge:
 - Understands in utility in specific conditions.
 - Applies in the specific conditions.
 - Refers in specific conditions.
 - Oriented to cross reference in specific conditions.
 - Aware of limitation of the utility in specific conditions.
- Skill:
 - Utilises the repertories at bedside as appropriate to the clinical condition.
- Reflection:
 - Derives assessment of utility of application of the repertories at bedside.

Competency 4: Demonstrate the skills of choosing appropriate rubrics and explains the interpretation logic adapted.

- Knowledge:
 - Observes the non – verbal expressions of patient and other care givers.
 - Documents the verbal and non – verbal communication expressed by the patient and other care givers.
 - Analyses the documented expressions.
 - Correlates the verbal and non – verbal communication and gives a logical meaning to the expression.
 - Chooses an appropriate word that represents the expression of the patient.
 - Attempts to choose an appropriate rubric representing the word of the expression.
- Skill:
 - Ensures that the interpretation made is matching to the experience shared by the patient or care giver.
 - Utilise right section of the repertory for reference.
 - Ensure all the cross references suggested are checked for appropriateness to the symptoms of the case.
- Reflection:
 - Ability to adapt to the plan, construction based on the background of the philosophy of the repertory to the case in hand.
 - Understands the limitation of self in choosing of the appropriate rubric.

Competency 5: Analyses and compare utility of various repertories in relationship to Post Kentian repertories.

- Knowledge:
 - Understands the utility in specific situations.
 - Applies in the specific situations.
 - Refers in specific situations.
 - Oriented to cross reference with Post Kentian repertories in specific situations.
 - Aware of limitation of the utility in specific situations.
 - Recalls the structure of the rubrics represented in the repertory.
 - Recalls the unique rubrics.
- Skill:
 - Demonstrates awareness of the various repertories and when they can be applied.
- Reflection:
 - Identifies the advantages and limitation of each of the repertories compared at bedside.

Competency 6: Compare Post Kentian repertories & philosophical repertories before choosing the simillimum.

	<ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Identifies the differentiating features between Post Kentian repertories ▪ Identifies the differentiating features between Post Kentian repertories & philosophical repertories ▪ Identifies the differentiating features between philosophical repertories ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Demonstrates differentiating features between Post Kentian repertories ▪ Demonstrates differentiating features between Post Kentian repertories & Philosophical repertories ▪ Demonstrates differentiating features between philosophical repertories ▪ <u>Reflection:</u> Enhances the awareness of differentiating features Post Kentian repertories & Philosophical repertories
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	<ul style="list-style-type: none"> • Kent's Repertorium Generale – Jost Kunzli • Kent's Final General Repertory - Pierre Schmidt & Diwan Harishchandra • Kent's Comparative Repertory of the Homoeopathic Materia Medica - Dockx and Kokelenberg • Essential Synthesis – Fredrick Schroyens • Synthetic Repertory- Barthol & Klunker • Homoeopathic Medical Repertory – Robin Murphy • Additions to Kent's Repertory by Dr C. M. Boger • Repertory of the more Characteristic Symptoms of our Materia Medica – C. Lippe • A Synoptic Key to Materia Medica – C. M. Boger • Complete Repertory - Roger Von Zandvoort • Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Part II: Repertory and Case Taking. (Hom-PG-R -Part II – Paper II)

Hom-PG-R Part II – Paper II:

- **Hom-PG-R – 12 Evolution – Plan – Construction – Application of Regional repertories.**
- Hom-PG-R – 13 Evolution – Plan – Construction – Application of Software based repertories**

Course name: Hom-PG-R – 12: Evolution – Plan – Construction – Application of Regional repertories.

Course Overview:	<ul style="list-style-type: none"> • This course will provide students of MD Hom (Repertory) with an in depth understanding of the significance of Regional repertories in clinical practice. • The Homoeopathic therapeutics of Diarrhoea – James Bell • Therapeutics of Fever- H. C. Allen • Pneumonias – Douglas Borland • Accoucher's emergency Manual in Obstetrics – W. A. Yingling
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	<ul style="list-style-type: none"> • Uterine Therapeutics – Minton • Cough and Expectoration by Dr Lee and Dr Clarke • Time of Remedies and Moon Phases – C. M. Boger
Learning Outcomes:	<p>Competency 1: Explain the source and origin of repertory, about writer, developments, and edition subsequently.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Recall the source and origin of repertory with the editions. <p>Discuss background the author and its influence on the essence of that repertory.</p> <ul style="list-style-type: none"> ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Organises the information in a logical manner. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Understands the relationship between the background of the author and its role in creation of the repertory. <p>Competency 2: Understands and demonstrates the background and basis of plan and construction of the regional repertories.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands the chapters in the repertory. ▪ Recalls the structure of the rubrics represented in the repertory. ▪ Remembers the years of publication of the editions. ▪ Recalls the difference in various editions. ▪ Understands the reason behind the editions. ▪ Recalls the unique rubrics. ▪ Recalls the number of remedies in the repertory. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Demonstrate the relationship between the background and plan and construction of the repertory. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Understand the process involved in application of philosophy to creation of the repertory. <p>Competency 3: Demonstrate the Adaptability, Scope, and Limitations of regional repertories in clinical practice.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands in utility in specific conditions. ▪ Applies in the specific conditions. ▪ Refers in specific conditions. ▪ Oriented to cross reference in specific conditions. ▪ Aware of limitation of the utility in specific conditions. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Utilises the repertories at bedside as appropriate to the clinical condition. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Derives assessment of utility of application of the repertories at bedside. <p>Competency 4: Demonstrate the skills of choosing appropriate rubrics and explains the interpretation logic adapted.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Observes the non – verbal expressions of patient and other care givers. ▪ Documents the verbal and non – verbal communication expressed by the patient and other care givers. ▪ Analyses the documented expressions. ▪ Correlates the verbal and non – verbal communication and gives a logical meaning to the expression. ▪ Chooses an appropriate word that represents the expression of the patient.

	<ul style="list-style-type: none"> ▪ Attempts to choose an appropriate rubric representing the word of the expression. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Ensures that the interpretation made is matching to the experience shared by the patient or relatives. ▪ Utilise right section of the repertory for reference. ▪ Ensure all the cross references suggested are checked for appropriateness to the symptoms of the case. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Ability to adapt to the plan, construction based on the background of the philosophy of the repertory to the case in hand. ▪ Understands the limitation of self in choosing of the appropriate rubric. <p>Competency 5: Analyses and compare utility of various repertories in relationship to regional repertories.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands the utility in specific situations. ▪ Applies in the specific situations. ▪ Refers in specific situations. ▪ Oriented to cross reference with regional repertories in specific situations. ▪ Aware of limitation of the utility in specific situations. ▪ Recalls the structure of the rubrics represented in the repertory. ▪ Recalls the unique rubrics. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Demonstrates awareness of the various repertories and when they can be applied. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Identifies the advantages and limitation of each of the repertories compared at bedside. <p>Competency 6: Compare Regional & philosophical repertories.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Identifies the differentiating features between regional repertories. ▪ Identifies the differentiating features between regional & philosophical repertories. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Demonstrates differentiating features between regional repertories. ▪ Demonstrates differentiating features between regional repertories & Philosophical repertories ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Enhances the awareness of differentiating features regional repertories & Philosophical repertories
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course Overview:	This course will provide students of MD Hom (Repertory) with an in depth understanding of the significance of Software based repertories in clinical practice.
Learning Outcomes:	<p>Competency 1: Explain the source and origin of Software based repertories, about writer, developments, and edition subsequently.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Recall the source and origin of repertory with the upgrades. ▪ Discuss background the author and its influence on the essence of that software-based repertory. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Organises the information in a logical manner. ▪ Operate the software and its various applications and features. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Appreciate the use of technology in the current form and its future applications. <p>Competency 2: Understands and demonstrates the utility of the Software based repertories, its various features, applications.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands the chapters in the repertory. ▪ Recalls the structure of the rubrics represented in the repertory. ▪ Remembers the versions of upgrade. ▪ Recalls the difference in various upgrades. ▪ Understands the reason behind the upgrades. ▪ Recalls the unique rubrics. ▪ Recalls the number of remedies in the repertory. ▪ Understands the utility of various features of the software-based repertory. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Able to demonstrate the relationship between the various search features across various repertories and materia medica supplied by software-based repertory. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Appreciates the technical process involved in utilisation of computer repertory. <p>Competency 3: Demonstrate the Adaptability, Scope, and Limitations of computer repertories in clinical practice.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge:</u> <ul style="list-style-type: none"> ▪ Understands in utility in specific conditions. ▪ Applies in the specific conditions. ▪ Refers in specific conditions. ▪ Oriented to cross reference in specific conditions. ▪ Aware of limitation of the utility in specific conditions. ▪ <u>Skill:</u> <ul style="list-style-type: none"> ▪ Utilises the repertories at bedside as appropriate to the clinical condition. ▪ Utilises the various applications and features to deliver best of care to the patient. ▪ <u>Reflection:</u> <ul style="list-style-type: none"> ▪ Derives assessment of utility of application of the computer repertories at bedside. <p>Competency 4: Demonstrate the skills of choosing appropriate rubrics and</p>

explains the interpretation logic adapted.

▪ **Knowledge:**

- Observes the non – verbal expressions of patient and other care givers.
- Documents the verbal and non – verbal communication expressed by the patient and other care givers.
- Analyses the documented expressions.
- Correlates the verbal and non – verbal communication and gives a logical meaning to the expression.
- Chooses an appropriate word that represents the expression of the patient.
- Attempts to choose an appropriate rubric representing the word of the expression.

▪ **Skill:**

- Ensures that the interpretation made is matching to the experience shared by the patient or relatives.
- Utilises right section of the repertory for reference.
- Ensure all the cross references suggested are checked for appropriateness to the symptoms of the case.

▪ **Reflection:**

- Ability to adapt to the plan, construction of the software-based repertory to the case in hand.
- Understands the limitation of self in choosing of the appropriate rubric.

Competency 5: Analyses and compare utility of various software-based repertories.

▪ **Knowledge:**

- Understands the utility in specific situations.
- Applies in the specific situations.
- Refers in specific situations.
- Oriented to cross reference with software-based repertories in specific situations.
- Aware of limitation of the utility in specific situations.
- Recalls the structure of the rubrics represented in the repertory.
- Recalls the unique rubrics.

▪ **Skill:**

- Demonstrates awareness of the various features of software-based repertories and when they can be applied.

▪ **Reflection:**

- Identifies the advantages and limitation of each of the software-based repertories when compared at bedside.

Competency 6: Compare Software based repertories & philosophical repertories.

▪ **Knowledge:**

- Identifies the differentiating features between Software based repertories
- Identifies the differentiating features between Software based repertories & philosophical repertories.

▪ **Skill:**

- Demonstrates differentiating features between Software based repertories.
- Demonstrates differentiating features between Software based repertories & philosophical repertories.

▪ **Reflection:**

	<ul style="list-style-type: none"> Enhances the awareness of differentiating features of Software based repertories & philosophical repertories
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment/Written assessment
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-II	1st Term Test: During twenty fourth month of training 2nd Term Test: During thirtieth month of training	During thirty sixth month of training

VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or clinical exams including Viva-Voce and dissertation	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
Repertory and Case Taking. Paper 1	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
Repertory and Case Taking. Paper 2	100	50		

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (Benchmarked by the module-wise distribution.)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 2 – Paper 1. Course Numbers

- Hom-PG-R – 1 Evolution – Plan – Construction – Application of Clinical repertories & Puritan repertories
- Hom-PG-R – 2 Evolution – Plan – Construction – Application of Post – Kentian repertories.

Part 2 – Paper 2. Course Numbers

- Hom-PG-R – 12 Evolution – Plan – Construction – Application of Regional repertories.
- Hom-PG-R – 13 Evolution – Plan – Construction – Application of Software based repertories.

VII (2b). Question Paper Layout**PART II – PAPER I**

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Application using either of any one repertory (Post Kentian Repertories, Clinical)	20
2	LAQ	Critical study of Post Kentian Repertories	10
3	LAQ	Effect of background of masters in creation of their repertories	10
4	LAQ	Compare, contrast in application of Philosophical to Post Kentian & in between Post Kentian repertories	10
5	LAQ	Utilization of repertory part in repertories having materia medica section	10
6	SAQ	Structure /plan/ application of Post Kentian/modern repertory	5
7	SAQ	Structure /plan/ application of clinical repertory	5
8	SAQ	Application of Post Kentian Repertory	5
9	SAQ	Application of clinical repertory	5
10	SAQ	Observations in Pediatric and corresponding rubric	5
11	SAQ	Observations in Geriatric and corresponding rubric	5
12	SAQ	Observations in Psychiatric and corresponding rubric	5
13	SAQ	Observations in Clinical condition (skin ailments, pain etc) and corresponding rubric	5

PART II – PAPER II

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Application using either of anyone (Software)	20
2	LAQ	Compare, contrast, application of Philosophical to regional	10
3	LAQ	Compare, contrast, application of Philosophical to Modern, Philosophical to softwares, Philosophical to regional	10
4	LAQ	Demonstrate Role of repertory in Homoeopathic Specialty subject	10
5	LAQ	How to develop repertories based on dissertation /Application of repertories in research project	10
6	SAQ	Translating symptoms to rubric (5) regional	5
7	SAQ	Translating symptoms to rubric (5) Modern	5
8	SAQ	Translating symptoms to rubric (5) Clinical	5
9	SAQ	Translating symptoms to rubric (5) General	5
10	SAQ	Features and their application in various software & apps	5
11	SAQ	Deriving of rubrics (5) in a given case—Specific repertory	5
12	SAQ	Application of new technologies in development repertory.	5
13	SAQ	Differences in similar rubrics	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

1. Allen, H. C. (1993). *The Therapeutics of Fever* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
2. Allen, T. F. (2003). *Boenninghausen's Therapeutics Pocket Book* (Reprint ed.). New Delhi: Indian Books & Periodicals Publishers, New Delhi.
3. Barthel, H., & Klunker, W. (2008). *Synthetic Repertory* (Reprint Edition ed.). New Delhi: Indian Books and Periodicals Syndicate, New Delhi.
4. Bell, J. B. (1997). *The Homoeopathic Therapeutics of Diarrhoea* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
5. Berridge, E. W. (1973). *Complete Repertory to the Homoeopathic Materia Medica, Diseases of the Eyes*. New Delhi: Harjeet & Co. New Delhi.
6. Bidwell, G. I. *How to use the Repertory*. New Delhi: Indian Books and Periodicals Syndicate, New Delhi.
7. Boenninghausen, C. (2019). *The Lesser Writings of C. M. F. Boenninghausen* (14th Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
8. Boericke, G. (1986). *A compend of the Principles of Homoeopathy for students in Medicine* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd., New Delhi.
9. Boericke, W. (2016). *Boericke's New Manual of Materia Medica with Repertory* (Second Revised & Re-augmented edition, 37th impression ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
10. Boger C.M (2008) Boenninghausen's characteristics Materia Medica & repertory with word index with corrected & revised abbreviations & word index. B Jain Pub Pvt Ltd.
11. Boger, C. M. (2008). *A Synoptic Key of the Materia Medica* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
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13. Borland, D. (2023). *Pneumonias* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
14. Clark, G. H., & Lee, E. J. (1894). *Lee and Clarkes's Cough and Expectorations: A Repertorial Index of Their Symptoms* (2nd ed.). A. L. Chatterton et Company.
15. Clarke, J. H. (2003). *The Prescriber* (Reprint ed.). New Delhi: Indian Books & Periodicals Publishers, New Delhi.
16. Clarke, J. H. (1961). *A Clinical Repertory to the Dictionary of Materia Medica*. Calcutta : Sri. H. Dey of A. P. Homoeo Library, Calcutta.

17. Dhawale, M. L. (2020). *Principles and Practice of Homoeopathy* (Fourth Edition (Revised & Enlarged)- 11th impression ed.). New Delhi: B. Jain Publishers Pvt. Ltd., New Delhi.
18. Dockx, R., & Kokelenberg, G. (1996). *Kent's Comparative Repertory of the Homoeopathic Materia Medica* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
19. Fimmelsberg, J. K., & Kent, J. T. (1987). *Kent's Repertorium Generale*. Barthel & Barthel.
20. Gallavardin, J. P. (1986). *Repertory of Psychic Medicines with Materia Medica* (Second Edition ed.). New Delhi: B. Jain Publishers (P) Ltd, New Delhi.
21. Hahnemann, S. (2002). *Materia Medica Pura* (Reprint Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd., New Delhi.
22. Hahnemann, S. (2001). *The Chronic Diseases* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
23. Kent, J. T. (2012). *Repertory of the Homoeopathic Materia Medica* (Low Price Edition- 10th impression ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
24. Kent, J. T. (2019). *Lesser Writings- Clinical Cases, New Remedies, Aphorisms and Precepts* (14th Edition ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
25. Knerr, C.B. (2021) *Repertory of Hering's guiding symptoms of our Materia Medica.*: B Jain Publishers Pvt. Ltd.
26. Lippe, C. (1996). *Repertory to the More Characteristic Symptoms of the Materia Medica* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd, New Delhi.
27. Minton, H. (2005). *Uterine Therapeutics* (Reprint Edition ed.). New Delhi: B. Jain Publishers (P) LTD.
28. Munir Ahmed R Fundamentals of repertories: Alchemy of Homoeopathic Methodology; HiLine publishers and distributors
29. Murphy, R. (2010) *Homeopathic medical repertory: A modern alphabetical and practical repertory*. New Delhi: B. Jain.
30. Phatak, S.R. (2016) *Concise repertory of homeopathic medicines*. New Delhi: B. Jain.
31. Roberts, H. A. (1999). *Sensation as if* (Reprint ed.). New Delhi: B. Jain Publishers Pvt. Ltd.
32. Robert, H. A. *Repertory to the Rheumatic Remedies*. London: Homoeopathic Publishing Company Ltd, London.
33. Schmidt P, Diwan Harishchandra(1982). *Kent's Final General Repertory of the Homoeopathic Materia Medica* (Revised ed.). National Homoeopathic Pharmacy.
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35. Tiwari, S. (1991). *Essentials of Repertorization* (5th Edition ed.). New Delhi: B. Jain Publishers (P) LTD.
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Part I Paper 2

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Homoeopathic Repertory and Case Taking.

Fundamentals of Clinical Medicine in Homoeopathic Repertory and Case Taking (HOM-PG-FMR)

II. Brief description of speciality and its relevance in homoeopathy post-graduate course.

This paper deals with the clinical stream to provide a foundation for homoeopathic practice and therefore is expected to deliver the basic clinical approach. This paper supports the evolution of an integrated approach to relating clinical symptomatology with homoeopathic fundamentals, including the miasmatic interpretation in the context of Homoeopathic Repertory. This intends to impart knowledge for a basic clinical approach required by a homoeopathic professional for practising clinical medicine concerning homoeopathic principles in general and homoeopathic repertory in particular.

3Course outcomes:

1. Perform homoeopathic case taking from the perspective of man and environment.
2. Correlate symptomatology and clinical examination for repertorisation
3. Interpret investigation in the light of clinical diagnosis and repertory.
4. Evaluate differential diagnosis through a symptom-based approach in clinical practice.
5. Relate miasms and susceptibility to repertory.
6. Associate the information of case anamnesis with the essence of repertorisation.
7. Display ethical based clinical practice in repertory.
8. Perform evidence based homoeopathic clinical practice and correlate with repertory.

V. Courses and Course Objectives.

PART I PAPER II :

Fundamentals of Clinical Medicine in Homoeopathic Repertory and Case Taking (HOM-PG-FMR)

(I) HOM-PG-FMR -01

Introduction to the Practice of Evidence-based Medicine.

- a. Concept of evidence-based practice and its importance in Homoeopathy in relation to Repertory.
- b. Importance of developing an ethical base while adhering to the above with relation to repertory.

(II) Hom-PG-FMR -02

Developing a Basic Clinical Approach. All the following content must be delivered through clinical cases or presentation.

- a. Correlative study of Normal structure and function to reveal Structural and functional integrity in Health and understanding the clinical and Hahnemannian concept of health through clinical cases.
- b. Role of Control Systems (Psycho-Neuro-Endocrine axis and the Reticulo-endothelial System) in the maintenance of Health and initiating the process of breakdown and onset of illness.
- c. Different components which influence health at individual, family and community level leading to insight into preventive and community medicine through Hahnemannian philosophy of holistic health.
- d. Concept of predisposition and disposition and its influence on development of diseases and application to repertory.

- e. Bio-psycho-social and environmental model of Etiology and correlating with the Hahnemannian concept of causation and evolution of disease and repertory.
- f. Development of a Symptom as an indication of loss of functional competence followed by loss of structural integrity – the pathogenesis of symptom formation and the Hahnemannian concept of disease and its expression and application to repertory.
- g. Clinico-pathological correlations and the concept of a syndrome and its utility in understanding miasmatic evolution and repertory.
- h. Bed side- General and Systematic examination and understanding their basis.
- i. Role of physical examination and clinical investigation in the study of disease and miasm.
- j. Understanding the process of clinical diagnosis
- k. Importance of differential diagnosis-probable diagnosis and final diagnosis

The following study shall help in building clinical application of Repertory

- a. Predisposition:
- b. Causation and modifying factors:
- c. Pathogenesis, Pathology, Clinico-pathological and miasmatic correlations with pathological result
- d. Representation of rubrics to correlate with classification and evolution of disease according to varying expressions of susceptibility:
- e. Case taking, examination, investigation, and approach to clinical diagnosis:
- f. Differential diagnosis:
- g. Management-General and Homoeopathic:
 - i. General Management
 - ii. Standard management: Detailed aspects of currently accepted medication from modern medicine, their pharmacological effects, their management and adverse drug reactions and ways in which they affect the susceptibility of the patient. And choosing appropriate rubrics for the state
This may include the following:
 - iii. Principles of Homoeopathic management:
 - 1. Scope and limitations:
 - 2. Role of different forces:
 - 3. Potency and repetition:
 - 4. Follow up management:
- h. Prognosis
- i. Future advances

(III)Hom-PG-FMR -03

Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification and representation in repertory through clinical cases and bedside

- a. Pain
 - i. Pain: Patho-physiology
 - ii. Chest Pain
 - iii. Abdominal pain
 - iv. Headache
 - v. Back and Neck pain
- b. Fever-types
- c. Alteration in Nervous system functions
 - i. Faintness, syncope, dizziness, vertigo
 - ii. Weakness, myalgias, imbalance
 - iii. Numbness, tingling and sensory loss
 - iv. Acute confusional states
 - v. Aphasias
 - vi. Memory loss and dementia
 - vii. Sleep disorder
- d. Alteration in Respiratory and Circulation
 - i. Dyspnoea
 - ii. Cough and hemoptysis
 - iii. Cyanosis
 - iv. Edema
 - v. Shock
- e. Alteration in Gastrointestinal functions
 - i. Dysphagia
 - ii. Nausea, vomiting, indigestion
 - iii. Diarrhea and Constipation
 - iv. Weight loss
 - v. Gastrointestinal bleeding
 - vi. Jaundice
 - vii. Abdominal swelling and ascites
- f. Alteration in Urinary functions and electrolytes
 - i. Incontinence and lower urinary symptoms
 - ii. Urinary abnormalities
- g. Alteration in Reproductive and Sexual functions
 - i. Erectile dysfunction

- ii. Disturbances of Menstruation
 - iii. Leucorrhea
 - iv. Hirsutism
 - v. Infertility
- h. Alteration in Skin functions
 - i. Itching
 - ii. Eruptions
 - iii. Disorders of pigmentation
- i. Hematological alterations
 - i. Anemia
 - ii. Bleeding
 - iii. Enlargement of Lymph nodes and spleen

(IV) Hom-PG-FMR -04

Basic Concepts of Nutrition, Nutritional Diseases, and miasmatic assessment

- a. Nutritional and Dietary assessment
- b. Malnutrition
- c. Vitamin and Mineral deficiency
- d. Obesity
- e. Eating disorders

(V) Hom-PG-FMR -05

Interpretations of Laboratory and Radiological Investigations

- a. Hematology - All basic tests
- b. Serology
- c. Biochemistry
- d. Microbiology
- e. Special tests – Hormonal Assays – Thyroid function tests, LH, FSH, Prolactin, TORCH, Triple marker, IgG/ IgM, HLA B27, Beta HCG, Anti-thyroid antibodies, Anti-cardiolipin antibodies.
- f. Basis Concepts of Radio Imaging like X-rays, CT, MRI
- g. USG
- h. ECG (Basic applications)

VI. Course description

Course description

Hom-PG-FMR-01

Course Overview:	This course will provide students of MD Hom (Repertory) with an overview of the significance of displaying ethical based clinical practice in repertory.
Learning Outcomes:	Competency 1: Identifies ethical based clinical practices in repertory. <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the process of deriving symptoms from experience of patient. ▪ explain importance of converting the symptoms into appropriate rubric. ▪ Identifies the relevant rubric amongst the cross references. ▪ Explain importance of authentic data publication in journals and dissertation. ▪ Aware of issue related to plagiarism. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrates fidelity in converting the experience shared by patient using all senses. ▪ Demonstrates truthfulness in writing the right symptoms choosing right words. ▪ Ensures the rubrics used have the intended meaning desired by the author of the repertory. ▪ Comply with a publication ready document which ensure free

	<ul style="list-style-type: none"> of plagiarism and no manipulation of data. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Appreciates the process involved ensuring ethical based clinical practice in repertory.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Hom-PG-FMR-02

Course Overview:	This course will provide students of MD Hom (Repertory) with an overview of the significance of utilisation of repertory as credible database for shortlisting prescription possibilities for pain in general and various locations in particular.
Learning Outcomes:	<p>Competency 1: Explain the pathogenesis of pain in general and locations in particular.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the various patho – physiological processes involved in genesis of pain. ▪ Identify the role of psycho – neuro endocrine axis in genesis of pain. ▪ Discuss the representation of pain related rubrics in applicable repertories. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrate bedside case taking skills. ▪ Identify the symptom based on subjective and objective expressions. ▪ Select the relevant rubrics in appropriate repertory. ▪ Demonstrate the logic behind the choice of repertory. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Recall the experience with referencing the repertorial result with cause of pain. <p>Competency 2: Differentiates the types of pain based on location association.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Identify the different types of pains in relation to location. ▪ Relate with the pathogenesis. ▪ Identify the pain and enquires appropriately. ▪ Identifies the characteristics in the pain sensation . ▪ Explain the role of homoeopathy ▪ Identifies the investigations to be indented. ▪ Concludes the clinical diagnosis. ▪ Aware of representation of pain and location in repertory ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Explain logically demonstrate the need of repertory ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Identify the critical incidents that supported your prescription decision to be unbiased.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment
Prescribed Texts:	
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course Overview:	This course will provide students of MD Hom (Hom. Materia Medica) with an overview of the significance of utilisation of HMM as credible source for management and treatment possibilities for Gastro-intestinal bleeding.
Learning Outcomes:	<p>Competency 1: Explain the pathogenesis of Gastro-intestinal bleeding.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the various pathological conditions leading to Gastro-intestinal bleeding. ▪ Describe the predisposition and dispositions prone for gastrointestinal bleeding ▪ Interpret the data collected from the case taking ▪ Assemble the clinical and homoeopathic data Relate the gastrointestinal bleedings with examination findings ▪ Discuss differential diagnosis of the gastro intestinal bleedings ▪ Relate gastrointestinal bleeding with investigation findings ▪ Identifies the symptom based on subjective and objective expressions ▪ Describe the various pathogenesis, clinicopathological correlation and miasmatic correlation ▪ Explain the different causation at the level of bio-psycho-social-cultural-economical -political-religious responsible for the gastrointestinal bleeding ▪ Classify the different evolution of gastrointestinal bleeding from reversible to irreversible pathologies ▪ Classify the diseases with gastrointestinal bleeding from Hahnemannian classification ▪ Define the scope and limitation of homoeopathic management for the same ▪ Perform symptom classification and evaluation ▪ Construct repertorial totality ▪ Select appropriate rubrics ▪ Select applicable clinical repertories ▪ Perform differentiation of remedies ▪ Relate gastrointestinal bleedings with range of susceptibility ▪ Define the follow up criteria and remedy response for the gastrointestinal bleedings ▪ Describe range of susceptibility and miasm of gastrointestinal bleeding remedies ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrates bedside case taking skills in cases of Gastro-intestinal bleeding. ▪ Perform homoeopathic clinical case taking of the gastrointestinal bleeding ▪ Demonstrate the physical examination skill. ▪ Construct different reportorial totalities and reportorial references of gastrointestinal bleeding ▪ Construct acute, intercurrent and chronic totalities of gastrointestinal bleedings ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Recall the experience with clinical repertories used in cases of Gastro-intestinal bleeding. ▪ Recall different clinical rubrics from clinical repertories used in cases of Gastro-intestinal bleeding based on nature and location.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment (including Problem Based

	Learning assessment).
Prescribed Texts:	As per the list
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning.

Hom-PG-FM-04

Course Overview:	This course will provide overview of dyspnoea, its understanding in clinical practise and its homoeopathic perspective.
Learning Outcomes:	<p>Competency 1: Exploring Dyspnoea as a symptom and its holistic understanding in light of homoeopathic perspective and clinical medicine</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Discuss the etiopathogenesis of dyspnoea • Conclude etiopathogenesis of dyspnoea from homoeopathic perspective • Discuss the other clinical features associated with dyspnoea • Explain the pathogenesis of Dyspnoea • Plan investigation for confirmation of diagnosis • Formulate provisional clinical diagnosis and differential diagnosis • Explain Clinical differentiation of symptoms for assessment of nosological diagnosis • Discuss investigation for confirmation of diagnosis • Classify dyspnoea from Hahnemannian classification of disease • Apply clinical insight in classifying miasm (Psoric, Syphilitic and Sycotic) • Correlate Hahnemann's concept and modern medicine for the understanding of dyspnoea • Classify the symptoms with analysis and evaluation • Choose appropriate approach and clinical repertories • Differentiate closely coming Materia medica • Ascertain prognosis from clinical medicine and homoeopathic perspective • Plan Diet as regimen as per the nosological diagnosis and Hahnemann's directions. • Plan the line of management (Medicinal and/or auxiliary management) • Plan Strategy for homoeopathic management <p>Skill:</p> <ul style="list-style-type: none"> • Perform Homoeopathic Case taking including anamnesis • Perform Clinical examination of chest and other relevant systems. • Display Homoeopathic approach in terms of anamnesis, susceptibility and miasmatic analysis • Construct prescribing Totality • Refer appropriate clinical repertory for dyspnoea <p>Reflection:</p> <ul style="list-style-type: none"> • Integrated approach in understanding dyspnoea • Identify social, economic, environmental, biological and emotional determinants of dyspnoea • Common rubrics and approach used in OPD and IPD for dyspnoea
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	As per the list
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Course Overview:	This course will provide students of MD Hom (Repertory) with an overview of the significance of utilisation of repertory as credible database for malnutrition, vitamin and mineral deficiency, obesity, eating disorder.
Learning Outcomes:	<p>Competency 1: Identifies subjective and objective signs and symptoms of malnutrition, vitamin and mineral deficiency, obesity, eating disorder.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Describes the various patho – physiological processes involved in genesis malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Identifies the role of psycho – neuro endocrine axis in genesis of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Identifies the role of predisposition and susceptibility in genesis of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Aware of subjective and objective signs and symptoms of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Defines the level of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Discuss the role of diet and nutritional supplements in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Identifies the scope of homoeopathy alone in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Awareness of representation in Repertory of signs and symptoms related to malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrates case taking skills in assessment of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Demonstrates the clinical examination skills of signs and symptom of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Demonstrates the assessment skills of level and intensity of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Refers appropriate repertory and relevant rubrics that represent the malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Appreciates the process involved in assessment of malnutrition, vitamin and mineral deficiency, obesity and eating disorders and scope of homoeopathy. <p>Competency 2: Refers appropriate repertory and rubrics to manage malnutrition, vitamin and mineral deficiency, obesity and eating disorders. types of pain based on location association.</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Identifies the different repertories useful for management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ Identifies the appropriateness of rubrics in management of malnutrition, vitamin and mineral deficiency, obesity and eating

	<p>disorders.</p> <ul style="list-style-type: none"> ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ To logically demonstrate the utility of repertory in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Identifies the scope of use of repertory in management of malnutrition, vitamin and mineral deficiency, obesity and eating disorders..
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment
Prescribed Texts:	
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
iv. Fundamentals of Repertory and Case Taking	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
v. Fundamentals of Clinical Medicine in Homoeopathic Repertory and Case Taking	100	50		
vi. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Course Numbers

List the Courses

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question using either of any one repertory HomPG-FMR-01 or 03 or 04	20
2	LAQ	HomPG-FMR-01	10
3	LAQ	HomPG-FMR-03: a or c	10
4	LAQ	HomPG-FMR-03: d	10
5	LAQ	HomPG-FMR-03: e	10
6	SAQ	HomPG-FMR-04	5
7	SAQ	HomPG-FMR-03: b or i	5
8	SAQ	HomPG-FMR-03: f	5
9	SAQ	HomPG-FMR-03: g	5
10	SAQ	HomPG-FMR-03: h	5
11	SAQ	HomPG-FMR-05: a or b or c	5
12	SAQ	HomPG-FMR-05: d or e	5
13	SAQ	HomPG-FMR-05: f or g or h	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination: A Common Practical/viva for Part I Paper 1 and 2.

VIII. List of Reference Books (As per APA Format).

List of Recommended Reference Books for the Practice of Medicine:

1. Bates, B., Bickley, Lynn, S. and Szilagyi, Peter, G. (2013) Bates' Guide to Physical Examination and history taking. Philadelphia u.a.: Wolters Kluwer, Lippincott Williams & Wilkins.
2. Beeson, P. B., McDermott, W., & Wyngaarden, J. B. (Eds.). (1979). *Cecil Textbook of Medicine* (Asian Edition ed.). Philadelphia: W. B. Saunders Company.
3. Boyd, W. (1979). *A Textbook of Pathology* (8th ed.). London: Lea & Febiger, Philadelphia.
4. Cecil, R.L. and Kennedy, F. (1943) A text-book of medicine. Philadelphia: Saunders
5. Datey, K.K. and Shah, S.J. (1979) A.P.I. textbook of medicine. Bombay: Association of Physicians of India

6. Davis, M.A. (1999) Signs and symptoms in emergency medicine: Literature-based guide to emergent conditions; Mark A. Davis. St. Louis, MO: Mosby
7. Fauci, A. S., Kasper, D. L., Longo, D. L., Braunwald, E., Hauser, S. L., Jameson, J. L., et al. (Eds.). (2008). *Harrison's Principles of Internal Medicine* (17th Edition ed.). New York: Mc Graw Hill Medical.
8. Frazier, H.S. and Mosteller, F. (1995) Medicine worth paying for: Assessing Medical Innovations. Cambridge, MA: Harvard University Press.
9. Glynn, M., & Drake, W. (Eds.). (2012). *Hutchison's Clinical Methods* (23rd ed.). China: Saunders Elsevier.
10. Golwalla, A. F., & Golwalla, S. A. (2000). *Golwalla Medicine for Students* (19th ed.). Mumbai: Dr. A. F. Golwalla Empress Court, Mumbai.
11. Gupta, L., Gupta, Abhitabh and Gupta, Abhishek (2005) Differential diagnosis: Medicine, surgery, OB/GYN, Ophth, paed, dental. New Delhi: Jaypee Bros.
12. Hurst, J. W. (Ed.). (1992). *Medicine for the Practicing Physician* (3rd ed.). USA: Butterworth Heineman, Stoneham.
13. Kamath, S. A. (Ed.). (2022). *API Textbook of Medicine* (12th ed.). New Delhi: Jaypee Brothers Medical Publishers (P) Ltd, New Delhi.
14. Kaul, V. K., & Bagga, A. (Eds.). (2019). *Ghai Essential Pediatrics* (10th ed.). New Delhi: CBS Publishers & Distributors Pvt Ltd, New Delhi.
15. Kinirons, M., & Ellis, H. (Eds.). (2005). *French's Index of Differential Diagnosis* (14th ed.). London: Hodder Arnold.
16. Kumar, P., & Clark, M. (Eds.). (2005). *Clinical Medicine* (6th ed.). Elsevier Saunders.
17. Malhotra, N., Malhotra, J., Saxena, R., & Malhotra Bora, N. (Eds.). (2019). *Jeffcoate's Principles of Gynaecology* (9th ed.). New Delhi: Jaypee Brothers Medical Publishers (P) Ltd.
18. Mehta, P.J. and Palia, F.E. (1979) Practical medicine for students and Practitioners. Bombay: P.J. Mehta and F.E. Palia.
19. Munir Ahmed R Fundamentals of repertories: Alchemy of Homoeopathic Methodology; HiLine publishers and distributors
20. Ogilvie, C., & Evans, C. (2006). *Chamberlain's Symptoms and Signs in Clinical Practice* (12th ed.). New Delhi: Jaypee Brothers Medical Publishers (P) Ltd.
21. Parthasarathy, A., Menon, P., & Nair, M. (Eds.). (2019). *IAP Textbook of Pediatrics* (7th ed.). New Delhi: Jaypee Brothers Medical Publishers (P) Ltd, New Delhi.
22. Penman, I. D., Ralston, S. H., Strachan, M. W., & Hobson, R. P. (Eds.). (2022). *Davidson's Principles and Practice of Medicine* (24th Edition ed.). Elsevier.
23. Rao, L. V., & Snyder, L. M. (2021). *Wallach's Interpretation of Diagnostic Tests* (South Asian Edition ed.). (S. Dubey, Ed.) New Delhi: Wolters Kluwer Pvt. Ltd. New Delhi.
24. Savill, T.D. and Warner, E.C. (1950) Savill's System of Clinical Medicine. edited by E.C. Warner. London: Edward Arnold & Co.
25. Swash, M. (2006) Hutchison's clinical methods. Orlando, Fl.: Saunders
26. Vakil, R.J. and Golwalla, A.F. (1974) Clinical diagnosis: A textbook of physical signs and symptoms for medical students and practitioners. Bombay: Asia Pub. House.
27. Wallach, J. (2007) Interpretation of diagnostic tests. Philadelphia: Wolters Kluwer.

M.D. (Homoeopathy) Homoeopathic Pharmacy

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Homoeopathic Pharmacy.

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Homoeopathic Pharmacy;
- (ii) Fundamentals of Clinical Medicine in Homoeopathic Pharmacy; and
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Homoeopathic Pharmacy. Paper 1
- (ii) Homoeopathic Pharmacy. Paper 2.

III. Brief description of speciality and its relevance in homoeopathy post-graduate course.

Homoeopathic Pharmacy prospects with discovering and manufacturing new medicines in an industrial set-up along with their quality assurance, effectiveness, drug laws and pharmaceutical ethics binding them. With the ever-expanding Homoeopathic Pharmaceutical industries, the course shall deal with administration, production management, marketing strategies, communication, sales and channels of distribution.

The fundamental sciences like Chemistry, Botany, Zoology, Physics specially biophysics and quantum physics serves to provide a stronghold to the subject of Homoeopathic Pharmacy. With the preclinical research conducted in the pharmacy field, answers to the age-old question about the action of homoeopathic medicines have been presented. Adhering to the principles of Homoeopathy, integrating with Homoeopathic Philosophy and Materia Medica, the new paths of Agro-Homoeopathy and Veterinary Homoeopathy have been explored under Pharmacy showcasing the beautiful results by our medicines.

As medicines serve as a strong backbone for a prescription, understanding the concepts of clinical trial, rational use of drugs, posology, pharmacovigilance, medical auditing, and hospital pharmacy is necessary during patient care.

The study of Homoeopathic Pharmacy at the postgraduate level is to create good academicians and clinicians along with trained professionals for Pharmacovigilance, Pharmaceutical industries, Pharmacopoeia Commission, Regulatory bodies, as Research officers and Scientific writers.

IV. Program Objectives. (Entrustable Professional Activities – EPAs)

1. Collect information necessary to ensure the quality, purity, and stability of drugs by conducting a series of standardisation tests to assay the role of a **drug analyst** in the Homoeopathic Pharmaceutical industry.
2. Perform **Good Manufacturing Practices (GMP)** in the Homoeopathic Pharmaceutical Industry at every stage of manufacturing for distribution and consumption of drugs.
3. Demonstrate qualities of **Good Marketing skills** in Homoeopathic Pharmacy professionals.
4. Perform duties of an academician by imparting knowledge of Homoeopathic Pharmacy for postgraduates through lectures and conducting guest lectures by experts for enhancing the subject depth of Homoeopathic Pharmaceutical Industries.
5. Provide medication-related expertise/ consultation as a homoeopathic physician and as a part of an interprofessional health care team in homoeopathic hospitals.
6. Report adverse drug reactions and /or medication errors (Pharmacovigilance).
7. Perform administrative responsibilities for inventory level checking, drug order review, and coordination with outside vendors in hospital pharmacies.
8. Collect authenticated drug sources for primary assays in Plants and chemicals.
9. Function in R and D branch to design research protocol to ensure pharmaco-therapeutic follow-up, interpret data, analyse results and publish records in International and UGC care journals.
10. Perform specific laboratory skills that are required for new drug development.
11. Internalise the essential skills in industrial manufacturing processes for the preparation of homoeopathic medicines.
12. Manage medication stores and plan for medication budgets by way of providing statistics for medicine consumption.
13. Conduct preclinical & clinical research relevant to validate the sphere of action and efficacy of homoeopathic medicines.
14. Develop the domain of Agro-homoeopathy by conducting research on plants for assessing the effect of homoeopathic medicines on growth & production, biotic and abiotic stresses along with undertaking treatment of various plant diseases.
15. Develop the domain of Veterinary Homoeopathy through clinical research conducted on animals.
16. Formulate new drugs.

17. Publish evidence-based documentation of Homoeopathic Pharmacy based on experimentation and clinical research outcomes in credible journals.
18. Consistently demonstrate characteristics of self-directed learning by recognising continuing educational needs with the conduction of seminars, conferences, CMEs and workshops.
19. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

IV(1). Mapping of EPAs and Domain Competencies

KS : Knowledge & Scholarship **PC** : Patient care **HO** : Homoeopathic Orientation

CS : Communication skills **PBL** : Practice based learning **Prf** : Professionalism

S.no	EPA (Entrustable Professional Activities)	KS	PC	HO	CS	PBL	Prf
1.	Collect information necessary to ensure the quality, purity, and stability of drugs by conducting a series of standardisation tests to assay the role of a drug analyst in the Homoeopathic Pharmaceutical industry.	√	-	√	-	√	√
2.	Perform Good Manufacturing Practices (GMP) in the Homoeopathic Pharmaceutical Industry at every stage of manufacturing for distribution and consumption of drugs.	-	-	√	√	-	√
3.	Demonstrate qualities of Good Marketing skills in Homoeopathic Pharmacy professionals.	√	-	√	√	√	√
4.	Perform duties of an academician by imparting knowledge of Homoeopathic Pharmacy for postgraduates through lectures and conducting guest lectures by experts for enhancing the subject	√	-	√	√	√	-

	depth of Homoeopathic Pharmaceutical Industries.						
5.	Provide medication-related expertise/ consultation as a homoeopathic physician and as a part of an interprofessional health care team in homoeopathic hospitals.	√	√	√	√	-	√
6.	Report adverse drug reactions and /or medication errors (Pharmacovigilance).	-	√	-	√	-	√
7.	Undertake administrative responsibilities for inventory level checking, drug order review, and coordination with outside vendors in hospital pharmacies.	-	-	-	√	-	√
8.	Collect authenticated drug sources for primary assays in Plants and chemicals.	√	-	√	-	√	-
9.	Function in R and D branch to design research protocol to ensure pharmaco-therapeutic follow-up, interpret data, analyse results and publish records in International and UGC care journals.	√	-	√	-	√	√
10.	Perform specific laboratory skills that are required for new drug development.	√	-	√	√	√	-
11.	Internalise the essential skills in industrial manufacturing processes for the preparation of homoeopathic medicines.	-	-	√	√	√	-
12.	Manage medication stores and plan for medication budgets by way of providing statistics for medicine consumption.	√	-	√	√	√	√

13.	Conduct preclinical & clinical research relevant to validate the sphere of action and efficacy of homoeopathic medicines.	√	-	√	-	√	√
14.	Develop the domain of Agro-homoeopathy by conducting research on plants for assessing the effect of homoeopathic medicines on growth& production, biotic and abiotic stresses along with undertaking treatment of various plant diseases.	√	-	√	-	√	√
15.	Develop the domain of Veterinary Homoeopathy through clinical research conducted on animals.	√	-	√	-	√	√
16.	Formulate new drugs.	√	-	√	√	√	√
17.	Publish evidence-based documentation of Homoeopathic Pharmacy based on experimentation and clinical research outcomes in credible journals.	-	-	-	√	-	√
18.	Consistently demonstrate characteristics of self-directed learning by recognising continuing educational needs with the conduction of seminars, conferences, CMEs and workshops.	-	-	-	-	√	√
19.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	√			√	√	√

IV(2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

S.no	EPAs	Hom-PG- HP- Part – I			Hom-PG- HP- Part – II		
		Sem /Mod 1	Sem /Mod 2	Sem /Mod 3	Sem /Mod 4	Sem /Mod 5	Sem /Mod 6
1.	Collect information necessary to ensure the quality, purity, and stability of drugs by conducting a series of standardisation tests to assay the role of a drug analyst in the Homoeopathic Pharmaceutical industry.	2 Understand the concept of authentication and the rules for the collection of authenticated sources of drugs	3 Understand the concept of authentication and the rules for the collection of authenticated sources of drugs	4 Identification & Process of collection of drug substances by experts	4 Process of collection under the supervision of experts like Botanist / zoologist/ chemist during internship at pharmaceutical industry	5 Guiding the juniors	

	Perform Good Manufacturing Practices (GMP) in the Homoeopathic Pharmaceutical Industry at every stage of manufacturing for distribution and consumption of drugs.				Process of collection under the supervision of experts like Botanist / zoologist/ chemist during internship at pharmaceutical industry	Guiding the juniors	
	Demonstrate qualities of Good Marketing skills in Homoeopathic Pharmacy professionals.						
2.	Perform duties of an academician by imparting knowledge of Homoeopathic Pharmacy for postgraduates through lectures and conducting guest lectures by experts for enhancing the subject depth of Homoeopathic Pharmaceutical Industries.	2 Learn the case management with homoeopathic drugs.	3 Case management with interprofessional experts	4 Understand the cardinal principles of homoeopathy and its application in selection of simillimum	4 -	5 -	5 Guiding the juniors

3.	Provide medication-related expertise/consultation as a homoeopathic physician and as a part of an interprofessional health care team in homoeopathic hospitals.	2 Understanding the adverse drug reactions in the cases during the housejob.	3 Observing & analysing the adverse drug reactions in the cases during the housejob.	4 Observing & analysing the adverse drug reactions in the cases during the housejob.	4 Apply this knowledge in clinical practice.	5 Apply this knowledge in clinical practice.	5 Guiding the juniors.
4.	Report adverse drug reactions and /or medication errors (Pharmacovigilance).	2 Understanding the process of inventory level checking	3 Learn the process of drug order review	4 Learn the coordination skills and liasoning with outside vendors in hospital pharmacy	4 -	5 Application in clinical practice	5 Guiding the juniors
5.	Undertake administrative responsibilities for inventory level checking,	2 Organising and	3 Participating in	4 Presenting	4 -	5 -	5 Guiding the Juniors

	drug order review, and coordination with outside vendors in hospital pharmacies.	participating in Journal club Presentations	CME Programs organised by the departments.	Seminars for the Juniors			
6.	Collect authenticated drug sources for primary assays in Plants and chemicals.	2 Understanding the concept of Agro-homoeopathy.	3 Application of Homoeopathic Medicines in plant diseases as well as growth and production of plants / crops in Agriculture.	4 Application of Homoeopathic Medicines in plant diseases as well as growth and production of plants / crops in Agriculture.	4	5 Apply this knowledge in good agricultural practices.	5 Guiding the Juniors.
7.	Function in R and D branch to design research protocol to ensure pharmaco-therapeutic follow-up, interpret data, analyse results and	2 Understanding the Veterinary diseases	3 Homoeopathic Management of Veterinary	4 Apply in Practice	4 Apply in Practice	5 Apply in Practice	5 Guiding the Juniors

	publish records in International and UGC care journals.		diseases.				
8.	Perform specific laboratory skills that are required for new drug development.	2 Conduction of Intra – departmental Seminars	3 Conduction of Interdepartmental Seminars.	4 Guiding Juniors for the presentation of Seminars	4 Guiding Juniors for the presentation of Seminars	5 Guiding Juniors for the presentation of Seminars	5 Guiding Juniors for the presentation of Seminars
9.	Internalise the essential skills in industrial manufacturing processes for the preparation of homoeopathic medicines.	2 Understanding the fundamentals of Pre-clinical & Clinical Research	3 Execution of the Research Knowledge in clinical practice.	4 Execution of the Research Knowledge in clinical practice	4 Execution of the Research Knowledge in clinical practice	5 Execution of the Research Knowledge in clinical practice	5 Guiding the Juniors
10.	Manage medication stores and plan for medication budgets by way of providing statistics for medicine consumption.	2 Understanding the concept of formulation of new	3 Administration of new drugs in the clinical	4 -	5 -	5 -	5 Guiding the Juniors

		drugs.	trials.				
11.	Conduct preclinical & clinical research relevant to validate the sphere of action and efficacy of homoeopathic medicines.	2 Understanding the concept of Drug Standardisation.	3 Understanding the role of a drug analyst in relations to drug standardisation.	4 Application of this knowledge in the departmental laboratory.	4 Application of this knowledge in the Industrial laboratory level.	5 Guiding the Juniors.	5 Guiding the Juniors
12.	Develop the domain of Agro-homoeopathy by conducting research on plants for assessing the effect of homoeopathic medicines on growth & production, biotic and abiotic stresses along with undertaking treatment of various plant diseases.	2 Understanding the concept of GMP and its fundamentals.	3 Understanding the rules of different stages of manufacturing, distribution and consumption of drugs.	4 Understanding the rules of different stages of manufacturing, distribution and consumption of drugs.	4 Understanding the practical aspects of different stages of manufacturing, distribution and consumption of drugs at the Industry level during the Internship.	5 -	5 Guiding the Juniors.
13.	Develop the domain of	2	3	4	4	5	5

	Veterinary Homoeopathy through clinical research conducted on animals.	-	-	-	Understanding the basics of Pharmaceutical infrastructure. Exposure to the Production of medicines at the Industry level during Internship.	-	Guiding the Juniors.
14.1	Formulate new drugs.	2 Learn the fundamentals of Legislation in respect to Homoeopathic Pharmacy	3 -	4 -	4 Application of this knowledge in Industrial set-up.	5 -	5 -
15.	Publish evidence-based documentation of Homoeopathic Pharmacy	2 -	3 -	4	4	5 Publication of	5

	based on experimentation and clinical research outcomes in credible journals.					Articles in Peer Reviewed Journals under the supervision of the Guide.	
16.	Consistently demonstrate characteristics of self-directed learning by recognising continuing educational needs with the conduction of seminars, conferences, CMEs and workshops.	2 -	3 -	4 -	4 Understanding the basics of R & D Protocols under the supervision of R & D Cell / IEC	5 Publication in UGC Care Journals.	5 Guiding the Juniors.
17.	Collect information necessary to ensure the quality, purity, and stability of drugs by	2 -	3 -	4 -	4 Exposure to the Drug	5 -	5 -

	conducting a series of standardisation tests to assay the role of a drug analyst in the Homoeopathic Pharmaceutical industry.				Stores at the Industry set-ups.		
18.	Perform Good Manufacturing Practices (GMP) in the Homoeopathic Pharmaceutical Industry at every stage of manufacturing for distribution and consumption of drugs.	2 -	3 -	4 -	4 Understanding the fundamentals of Marketing from Homoeopathic Pharmaceutical Industry.	5 -	5 -
19.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	Justify the need for educational methodology as a component of PG Course.	Identify the learning objectives for their domain in Bloom's taxonomy. Identify the contexts	Recognise the levels of Guilbert. Indicate the level in Miller's	Write objectives for all domains of Bloom and levels of Guilbert. Identify assessment tools appropriate for the	Conduct evidence driven TL and Assessment of UG students.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

			of learning.	Pyram id. Select appropri ate instruct ional activitie s.	context.		
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PART I Paper 1: Fundamentals of Homoeopathic Pharmacy

V. Courses and Course Objectives.

Part I Paper 1:

Hom-PG-HP-01 Philosophy and Development of Homoeopathic Pharmacy

Hom-PG-HP-02 Homoeopathic Pharmacopoeia

Hom-PG-HP-03 Pharmaconomy

Hom-PG-HP-04 Knowledge of Drug Substance (Pharmacognosy and Pharmacology)

Hom-PG-HP-05 Drug Proving

Hom-PG-HP-06 Homoeopathic Pharmaceutics

VI. Course description

Course name: Hom-PG-HP -01: Philosophy and Development of Homoeopathic Pharmacy

Course Overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview about evolution of Pharmacy with emphasis on Homoeopathic Pharmacy and the contribution of pioneers in its development.
Learning Outcome	Competency 1: Understanding the basis of development of Homoeopathic Pharmacy <ul style="list-style-type: none">• <u>Knowledge:</u><ul style="list-style-type: none">• i) Illustrate the history of Pharmacy with emphasis on Homoeopathic Pharmacy• ii) Enumerate the contribution of pioneers in development of Pharmacy.• <u>Skill:</u> This includes specialized skills like understanding of homoeopathic principles, various dilution and succussion techniques, along with quality control and safety.• <u>Reflection:</u> Reflect on the evolution of homoeopathic pharmacy through the contribution of pioneers
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on different schools of Medicine (Allopathy, Ayurveda, Homoeopathy, Siddha, Unani).
Learning Outcome	Competency 2: Identifying the different schools of medicine – with emphasis on Introduction, principles of pharmaceutics & their inter-relationship <ul style="list-style-type: none">• <u>Knowledge:</u><ul style="list-style-type: none">• i) Describe the fundamental principles of pharmaceutics of different schools of medicines.• ii) Appraise the interrelationship between different schools of medicines.• <u>Skill:</u> This includes the applicable skills to practice the concepts relating to pharmaceutics of different schools of medicine.• <u>Reflection:</u> Develop a fair understanding of merits and demerits of different schools of medicine
Course	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on theory of

overview	Homoeopathic Dynamisation along with its evolution during and after Hahnemannian era.
Learning Outcome	<p>Competency 3: Understand the concept of Potentisation and its development with difference between homoeopathic pharmacy during and after Hahnemann's time.</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i)Elaborate the concept of Dynamization as per Hahnemann • ii)Analyse the evolution of Dynamisation during and after Hahnemannian era • <u>Skill:</u> Perform the methods of dynamization in pharmacy laboratory • <u>Reflection:</u> Determine the competencies to perform dynamization as per Homoeopathic principles.
Assessment:	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/Practice based learning

Course name: Hom-PG-HP -02: Homoeopathic Pharmacopoeia

Course Overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on official and unofficial Homoeopathic Pharmacopoeias with special emphasis on HPI.
Learning Outcome	<p>Competency 1: Formulate preparation of homoeopathic medicines by abiding by the guidelines of homoeopathic pharmacopoeias</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Document the evolution& development of Homoeopathic Pharmacopoeia • ii) Classify Homoeopathic Pharmacopoeias

	<ul style="list-style-type: none"> • iii) Describe official (GHP, HPUS, BHP, HPI- vol. 1 to 10) and unofficial pharmacopoeia (Brazilian Homoeopathic Pharmacopoeia, Encyclopaedia of Homoeopathic Pharmacopoeia- PN Varma & InduVaid) • iv) Summarise the salient features of Homoeopathic Pharmaceutical codex • <u>Skill</u>: This includes understanding of guidelines and standards for the preparation and quality control of homoeopathic drugs besides practical skills relating to trituration dilution, potentization and succussion. • <u>Reflection</u>: Distinguish the contrasting features of different homoeopathic pharmacopoeias
Assessment:	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies:	Knowledge and Skill/Homoeopathic Orientation

Course name: Hom-PG-HP -03: Pharmaconomy

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on concept of Pharmaconomy to Identify administration of drugs through routes applicable to the disease
Learning Outcome	<p>Competency 1: Understand the various routes of administration in general and in Homoeopathy</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> • i) Determine the modes of administration of homoeopathic medicines, its merits and demerits • <u>Skill</u>: Demonstrate the administration of homoeopathic medicines in clinical practice • <u>Reflection</u>: Interpret the effectiveness of various modes of administration
Course	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Pharmacokinetics

overview	
Learning Outcome	Competency 2: Understand the principles of Pharmacokinetics <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> • i) Define Pharmacokinetics • ii) Illustrate the path of travel of drug in the body as per the principles of Pharmacokinetics. • iii) Discuss the concept of Absorption, Distribution, Biotransformation, Excretion of drugs. • <u>Skill:</u> Construct a virtual map of drug action as per Pharmacokinetics. • <u>Reflection:</u> Predict the effect of medicines in patients.
Assessment:	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies:	Knowledge and Skill/Homoeopathic Orientation/ Patient care/Practice based learning

Course name: Hom-PG-HP-04 : Knowledge of Drug Substance (Pharmacognosy and Pharmacology)

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on concept of Pharmacognostic and Pharmacological effects of homoeopathic drugs.
Learning Outcome	Competency 1: Ensure learning of pharmacognosy and pharmacology to identify drug from different sources, collect & preserve for preparation of homoeopathic medicines. <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> • i) Explore the salient features of Pharmacognosy • ii) Summarise the basic principles of Pharmacology

	<ul style="list-style-type: none"> • <u>Skill</u>: Perform procedures for identification of drug substance for macroscopic and microscopic characteristics in departmental pharmacy laboratory (as listed in Appendix 3) • <u>Reflection</u>: Relate the relevance of Pharmacognosy, and Pharmacology in clinical practice
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Phytochemistry and Phytoconstituents of drug substances
Learning Outcome	<p>Competency 2: Understand Phytochemistry and Phytoconstituents of drug substances and their action</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> i) Discuss the concept of Phytochemistry ii) Differentiate the significance of action of Phytoconstituents of five (5) polychrest drug substances(as listed in Appendix 1) • <u>Skill</u>: This includes knowledge of chemistry, biochemistry, botany and plant taxonomy with understanding of morphology and life cycle of plants, analytical technique such as chromatography (HPLC), spectrophotometry, etc. Practical understanding of pharmacology, pharmacokinetics and phytoconstituents, molecular biology techniques. • <u>Reflection</u>: Analyse the phytochemical action of drugs
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Toxicological Dose and Toxicological action of Homoeopathic drugs
Learning Outcome	<p>Competency 3: Understand Toxicological Dose and Toxicological action of Homoeopathic drugs</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> i) Critique the concept of Toxicological Dose ii) Illustrate the Toxicological action of drug substances of five (5) Homoeopathic drugs (as listed in Appendix 2) • <u>Skill</u>: This includes understanding of dose-response relationships and mechanisms of action to

	<p>comprehend the toxicological action of homoeopathic drugs.</p> <ul style="list-style-type: none"> • <u>Reflection</u>: Review the toxicological action of drugs in clinical practice
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Homoeopathic Pharmacodynamics and Introduction to Nanotechnology in relation to Homoeopathic medicines
Learning Outcome	<p>Competency 4: Interpret the scientific basis of mode of action of homoeopathic medicines through concept of Nanotechnology</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> • i) Generalise the features of Homoeopathic Pharmacodynamics • ii) Discuss the concept of ED₅₀, LD₅₀, SAR (structure-activity relationship) • iii) Relate the concept of Nanotechnology with homoeopathic pharmacy. • <u>Skill</u>: This includes the practical skills relating to applications of nano technology which involves manipulating and utilising materials at the nano scale level in order to comprehend how homoeopathic medicines may interact with the body at the nano scale and influence biological processes • <u>Reflection</u>: Verify the dynamic action of drugs in clinical practice.
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Patient care/ Practice based learning

Course name: Hom-PG-HP -05: Drug Proving

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Proving homoeopathic medicines on human beings and animals
Learning Outcome	<p>Competency 1: Understand Hahnemannian Proving and Homoeopathic Pathogenetic Trial (HPT)</p> <p><u>Knowledge:</u></p> <ul style="list-style-type: none"> i) Explain the fundamental principles and methodology of drug proving ii) Enumerate the advantage and disadvantage of Hahnemannian proving iii) Illustrate the procedure for conducting HPT iv) Summarise the new drug development protocol as per CCRH v) Explain reproving of Homoeopathic drugs vi) Critique the Concept of Clinical and Toxicological proving (Animal proving) <p><u>Skill:</u> This includes skills to understand the concept of individualization, study and analysing the Materia medica and ability to navigate and utilize homoeopathic repertories.</p> <p><u>Reflection:</u> Attain the sphere of action of drugs and learn to complete MM pura</p>
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Patient care

Course name: Hom-PG-HP -06: Homoeopathic Pharmaceutics

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on preparation of homoeopathic medicines
Learning outcome	<p>Competency 1: Understand Preparation of Potentised medicines, mother preparation with its preservation, Formulation and Dispensing of Homoeopathic medicine,</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> i) Elaborate the fundamental principles, methods of Potentisation with different scales ii) Explain the steps for preparation of homoeopathic medicines as per Hahnemann and modern methods iii) Discuss the principles and procedure of preservation of potentised medicines and mother preparation iv) Outline the procedure for the formulation and dispensing of homoeopathic medicines • <u>Skill:</u> <ul style="list-style-type: none"> i) Perform the manufacturing procedures in the departmental pharmacy laboratory as listed in (Appendix 3) ii) Estimate Alcohol content in mother tincture, tincture trituration • <u>Reflection:</u> Develop the competencies to perform dynamization as per Homoeopathic principles in large scale
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Safety measures followed in Drug Industry
Learning outcome	<p>Competency 2: Understand the safety rules to be observed during preparation of medicines in manufacturing unit</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> i) List the pre-requisites of ideal pharmacy laboratory ii) Discuss the safety rules followed in industrial set up

	<ul style="list-style-type: none"> • Skill: This includes the skills relating to manufacturing processes, handling of hazardous materials and usage of personal protective equipment, besides practical skills concerning with good manufacturing practices (GMP). • Reflection: Adapt due care and diligence during preparation of medicines
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies:	Knowledge and Skill/Homoeopathic Orientation/Practice based learning

Appendix 1: List of Polychrest drugs

1. Aconite napellus
2. Belladonna
3. Cinchona officinalis
4. Gelsemium sempervirens
5. Thuja occidentalis

Appendix 2: List of drugs for Toxicological action

1. Conium maculatum
2. Datura metel
3. Nux vomica
4. Rauwolfia serpentina
5. Lachesis

Appendix 3: Practicals

M.D. (Homoeopathy) Homoeopathic Pharmacy
Part-I: PRACTICALS

1. Demonstration of Homoeopathic Pharmaceuticals Instruments and appliances and their uses, cleaning (**Appendix A**)
2. Laboratory Methods: Sublimation, Crystallisation, Decantation, Filtration, Distillation
3. Preparation of dilute and dispensing alcohol from strong alcohol
4. Preparation of External application: Glycerol, Lotion, Liniment, Ointment
5. Purity test of Sugar of Milk, Water, and Alcohol
6. Succussion in Decimal scale from Mother Tincture to 3X potency
7. Succussion in Centesimal scale from Mother Tincture to 3C potency
8. Conversion of one trituration to liquid potency: 6X to 8X potency
9. Conversion of one trituration to liquid potency: 3C to 4C potency
10. Determination of specific gravity of different strengths of alcohol
11. Preparation of 0/1 of one drug from 3C trituration (LM scale)
12. Study of identification of drug substances
 - a) Macroscopic characteristics (any 15) -- (**Appendix B**)
 - b) Microscopic characteristics (any 5) -- (**Appendix C**)

Appendix A: Homoeopathic Pharmaceutical Instruments

Mortar and Pestle- Porcelain, Glass, Iron	Macerating Jar	Measuring cylinder	Simple Distillation apparatus	Moisture Balance
Spatula	Percolator	Volumetric flask	Chopping Board, Chopping Knife	Refractometer
Ointment slab and Ointment spatula	Tincture Press	Pipette- -volumetric and graduated	Colorimeter	Dropper

Chemical Balance	Wire Gauze	Burette	Stirrer/ Glass rod	Desiccator
Electronic balance	Hot air oven	Stop watch	Glass Funnels	Glass apparatus for filtration with vacuum
Evaporating dishes- Porcelain, glass	Sieves-10,22, 44,60, 85, 120	Water still	Thin layer chromatography apparatus	Electric triturator
Crucibles with tongs	Lactometer	Spectrophotometer	Watch glass	Spirit lamp
Water bath-metal/ electric	Pyknometer	Electric potentiometer	Petri dish	Polarimeter
Microscopes	pH meter	Hydrometer	Alcoholometer	Silica crucibles

Appendix B: List of drugs for Identification for Macroscopic study

Allium cepa	Cannabis indica	Ficus religiosa	Tropaeolum majus
Andrographis paniculata	Cinchona officinalis	Holarrhena antidysenterica	Terminalia arjuna
Aegle folia	Catharanthus roseus	Helianthus annuus	Tinosporacordifolia
Azadirachta indica	Cassia sophera	Hydrocotyle asiatica	Tabacum
Apis mellifica	Coffea cruda	Opium	
Alstonia scholaris	Cascabela thevetia	Oleander	
Blattaria orientalis	Eucalyptus globulus	Syzygium jambolanum	

Appendix C: List of drugs for Identification for Microscopic study

Cina	Calendula	Datura	Justicia	Cactus grandiflorus
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	officinalis		adhatoda	
Chamomilla	Digitalis purpurea	Nux vomica	Ipecac	Rauwolfia serpentina

M.D. (Hom) Homoeopathic Pharmacy Part-I Activities:

- MoU (Memorandum of Understanding) with College of Pharmacy (ONE INSTITUTE) under any recognized university.
- Journal club meetings in Part-1 for the class.
- 15 days in Homoeopathic Hospital Pharmacy duties (in own collegiate teaching homoeopathic hospital).

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training	During eighteenth month of training
	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Homoeopathic Pharmacy	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Clinical Medicine in Homoeopathic Pharmacy	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory *(Benchmarked by the module-wise distribution.)*

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 1. Course Numbers

Hom-PG-HP-01 Philosophy and Development of Homoeopathic Pharmacy

Hom-PG-HP-02 Homoeopathic Pharmacopoeia

Hom-PG-HP-03 Pharmaconomy

Hom-PG-HP-04 Knowledge of Drug Substance (Pharmacognosy and Pharmacology)

Hom-PG-HP-05 Drug Proving

Hom-PG-HP-06 Homoeopathic Pharmaceutics

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Homoeopathic Pharmacopoeia, Drug Proving, Homoeopathic Pharmaceutics	20
2	LAQ	Philosophy and development of Homoeopathic Pharmacy, Homoeopathic Pharmacopoeia	10
3	LAQ	Knowledge of Drug Substance (Pharmacognosy and Pharmacology)	10
4	LAQ	Drug Proving	10

5	LAQ	Homoeopathic Pharmaceutics	10
6	SAQ	Philosophy and Development of Homoeopathic Pharmacy,	5
7	SAQ	Homoeopathic Pharmacopoeia	5
8	SAQ	Knowledge of Drug Substance (Pharmacognosy and Pharmacology)	5
9	SAQ	Pharmaconomy	5
10	SAQ	Drug Proving	5
11	SAQ	Homoeopathic Pharmaceutics	5
12	SAQ	Drug Proving	5
13	SAQ	Homoeopathic Pharmaceutics	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Practical examination.

Clinical		
1	Internal Assessment	20 Marks
2	Spotting	20 Marks
3	Experiment	30 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva	60 Marks

Total	100 Marks
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VIII. List of Reference Books (As per APA Format).

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Note: Part I Paper 2 separately after Part II Paper 1 & 2.

Part II Paper 1,2

V. Courses and Course Objectives.

Part II: Paper 1:

Hom-PG-HP-01 Prescription Writing and Dispensing

Hom-PG-HP-02 Laboratory Methods

Hom-PG-HP-03 Drug Laws and Legislation Related to Homoeopathic Pharmacy

Hom-PG-HP-04 Standardisation

VI. Course description

Course name: Hom-PG-HP-01: Prescription Writing and Dispensing

Course Overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on ideal Prescription Writing and its medicolegal importance
Learning outcome:	Competency 01: Writing a legal prescription and avoiding errors during prescription writing <ul style="list-style-type: none">• <u>Knowledge:</u><ul style="list-style-type: none">• i) State the parts of Prescription writing• ii)Expand the abbreviations used in prescription writing• iii) Explain the legal aspect of prescription writing in clinical setup• <u>Skill:</u> Practice the format of ideal prescription to avoid errors during clinical practice

	<ul style="list-style-type: none"> • <u>Reflection</u>:Identify the possible mistakes made in prescription writing with regard to its medicolegal significance in clinical practice, and devise their solutions.
Course Overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Dispensing of Homoeopathic medicines
Learning outcome:	<p>Competency 02:Identify Methods and Precautions required for Dispensing of Homoeopathic medicines</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> i) Illustrate the methods of Dispensing ii) Explain the precautions to be taken during dispensing of homoeopathic medicines • <u>Skill</u>: Perform all the procedures for proper dispensing of homoeopathic medicines. • <u>Reflection</u>:Reflect on the main features of dispensing homoeopathic medicines in clinical practice
Assessment:	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Practice based learning/ Professionalism/ Patient care

Course name: Hom-PG-HP-02: Laboratory Methods

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Lab methods specifically for understanding purity of homoeopathic medicines
Learning outcome:	<p>Competency 01: Understanding standard laboratory techniques for standardising homoeopathic medicines</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Describe the various heat process: Sublimation, Evaporation- factors affecting evaporation, types of equipment for evaporation method • ii) Explain the drying procedures: Drying- definition, purpose of drying, theory of drying, moisture content and Desiccation • <u>Skill:</u> Perform laboratory methods in pharmacy laboratory. Estimate moisture content of one drug (Gravimetric method) in Pharmacy laboratory as listed in Appendix 7 • <u>Reflection:</u> Recall the critical factors to ensure the purity and genuineness of drug substances
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Lab methods specifically for understanding purity of homoeopathic medicines
Learning outcome:	<p>Competency 02: Understanding standard laboratory techniques for standardising homoeopathic medicines</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Illustrate the mixing, its mechanism/process, purpose and factors affecting it. • ii) Define the terms 'filtration', 'Filter Media'.

	<ul style="list-style-type: none"> • iii)Discuss the factors affecting rate of filtration. • <u>Skill</u>: Perform laboratory methods in Pharmacy laboratory • <u>Reflection</u>: Appraise the steps to ensure the purity and genuineness of drug substances
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Lab methods specifically for understanding purity of homoeopathic medicines
Learning outcome:	<p>Competency 03: Understanding standard laboratory techniques for standardising homoeopathic medicines</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> i) Define the terms ‘distillation’, and ‘sterilisation’ ii) Illustrate the procedure of distillation and sterilisation iii) Discuss different types of distillation-- simple, fractional, steam iv) Explain the tests for sterility • <u>Skill</u>: Perform laboratory methods in Pharmacy Laboratory • <u>Reflection</u>: Reflect on the steps to ensure the purity of distilled water to prepare a pure medicine and understand sterilisation for use of safe medicines by killing microbes during manufacturing.
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies	Knowledge and Skill/Homoeopathic Orientation/ Practice based learning

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Course name: Hom-PG-HP -03: Drug Laws and Legislation Related to Homoeopathic Pharmacy

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on different legal aspects of Homoeopathic Pharmacy as per The Drugs & Cosmetics Act, 1940
Learning Outcomes:	<p>Competency 01: Understand legislation/ laws related to homoeopathic pharmacy as listed in Appendix 4</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> <ol style="list-style-type: none"> i) Recognise the various by-laws as prescribed by Govt. of India for the practice of homoeopathic pharmacy. ii) Appraise the updates and amendments of Laws and Acts of homoeopathic pharmacy on a regular basis. • <u>Skill:</u> Implement drug laws and legislation into clinical practices and drug manufacturing • <u>Reflection:</u> Ascertain the recency of legal and regulatory procedures to ensure ethical clinical practice and good manufacturing practices.
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Professionalism/ Patient care/ Practice based learning

Course name: Hom-PG-HP-04: Standardisation

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Standardisation of drugs, vehicles, finished products necessary for establishing the purity of a substance.
Learning Outcome	<p>Competency 01: Understanding the goal of manufacturing good quality homoeopathic product</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> • i) Define standardisation, evaluate its objective • ii) Classify the different quality control evaluations, and tests for drug, vehicles and finished products • <u>Skill:</u> Practical demonstration and conduction of the tests in the Homoeopathic Pharmaceutical industry set up. • <u>Reflection:</u> Ascertain the genuineness and purity of drug substances and finished product i.e. homoeopathic medicines & the use of genuine drug for identification, preparation and to avoid use of substitutes
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Pharmaceutical testing methods as listed in Appendix 7
Learning Outcome	<p>Competency 02: Understand the quality control tests to ascertain pure substances</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> • i) Discuss the concept and mechanism of Analytical tests relating to Phytoconstituents- Carbohydrates, Proteins, Lipids, Alkaloids, Glycosides, Saponins, Tannins, Flavanoids • ii) Describe procedures of Thin layer chromatography-TLC, Gas liquid chromatography- GLC, High performance liquid chromatography- HPLC, Lambert's Law (Beers Law), Spectrophotometer analysis of Homoeopathic drugs, Polarography, Fluorometry, Official sampling/ Quartering Technique

	<ul style="list-style-type: none"> • Skill: Practical demonstration and conduction of the tests in the Homoeopathic Industrial pharmaceutical set upas listed in Practical part in Appendix 7 • Reflection: Ascertain the genuineness and purity of drug substances and finished product i.e homoeopathic medicines
Assessment :	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies:	Knowledge and Skill/Homoeopathic Orientation/ Practice based learning

Part II: Paper 2:

Hom-PG-HP-01 Pharmacognosy
Hom-PG-HP-02 Pharmacopoeia Commission for Indian Medicine & Homoeopathy
Hom-PG-HP-03 Experimental Pharmacology
Hom-PG-HP-04 Pharmacovigilance
Hom-PG-HP-05 Homoeopathic Pharmaceutical Industrial Management
Hom-PG-HP-06 Hospital Pharmacy
Hom-PG-HP-07 Advancements/ Researches in Homoeopathic Pharmacy

Course name: Hom-PG-HP -01: Pharmacognosy

Course	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with
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Overview	an overview on Pharmacognostic evaluation of raw materials for attaining good quality finished products.
Learning outcome:	<p>Competency 01: Discuss Pharmacognostic study of organised and unorganised drugs and animals for establishing their genuineness as listed in Appendix 5</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Explain Pharmacognostic study of organised and unorganised drugs as listed in Appendix 5 • ii) Explain systematic evaluation of animal and animal products • <u>Skill:</u> Perform tests for identification, and evaluation of drugs (microscopic study of drugs- Stomatal index, Stomatal number, Palisade ratio) as listed in Appendix 7 • <u>Reflection:</u> Ascertain collection of genuine and authentic drug substances and detect adulterants to ensure quality drug manufacturing and avoid use of substandard drugs or substitutes.
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/ Practice based learning/ Homoeopathic Orientation

Course name: Hom-PG-HP-02: Pharmacopoeia Commission for Indian Medicine & Homoeopathy

Course	This course will provide students of M.D. Hom (Homoeopathic Pharmacy)
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overview	with an overview on Pharmacopoeia Commission for Indian Medicine and Homoeopathy (PCIM & H)
Learning outcome:	<p>Competency 01: Understand the functioning of Central Drug testing unit cum Appellate Laboratory along with their activities and standards of Homoeopathic drugs being made by them</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> <ul style="list-style-type: none"> • i) Describe the development of PCIM &H • ii) Explain the functions and various activities undertaken by PCIM & H • <u>Skill:</u> This includes the standard and guidelines set up homoeopathic pharmacopoeias followed by the Central Drug testing unit cum Appellate Laboratory. Also includes skills relating to techniques such as chemical analysis, microscopy, chromatography and spectroscopy to comprehend the laboratory activities related to testing the quality, purity and potency of homoeopathic medicines. • <u>Reflection:</u> Reflect on the bylaws and regulations prescribed by PCIM & H for manufacturing units
Assessment:	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation

Course name: Hom-PG-HP-03: Experimental Pharmacology

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on standard guidelines to be followed during animal studies.
Learning outcome:	<p>Competency 01: Understand the Ethical requirements for drug studies on animals</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Illustrate the ethical principles and essential requirements during animal proving • <u>Skill:</u> This includes the practical skills relating to animal ethics, animal welfare including 3 R's (Replacement, Reduction, Refinement) , ethical considerations involved in conducting research on animals. • <u>Reflection:</u> Identify possible gaps to ensure the ethical application of homoeopathic medicines on lower animals and suggest suitable remediation.
Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Experimental Pharmacology
Learning outcome:	<p>Competency 02: Understand the Pharmacological action of homoeopathic drugs</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Define Experimental Pharmacology • ii)Discuss the pharmacological action of drugs • ii)Mention the factors modifying pharmacological action of drugs.

	<ul style="list-style-type: none"> • <u>Skill</u>: This includes clinical observation, individualised case analysis, research studies, clinical trials . • <u>Reflection</u>: Appraise the sphere and mechanism of action of drugs
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation

Course name: Hom-PG-HP-04: Pharmacovigilance

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Pharmacovigilance system to manage the different adverse drug events for welfare of patients
Learning outcome:	<p>Competency 01: Understand the concept of ADR and Pharmacovigilance</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> • i) Define Adverse Drug reaction • ii) Explain the management of adverse drug reactions in homoeopathy • iii) Describe the concept of Pharmacovigilance system in India • <u>Skill</u>: Observe, analyse and manage ADR in clinical practice • <u>Reflection</u>: Distinguish the necessary precautions to be taken for avoiding ADR in clinical practice

Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Patient care/ Practice based learning

Course name: Hom-PG-HP-05: Homoeopathic Pharmaceutical Industrial Management

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on management of Homoeopathic Pharmaceutical units for proper production and marketing.
Learning outcome:	<p>Competency 01: Understand the Principles of management of pharmaceutical industry as listed in Appendix 6</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Explain the correlation of Administration Principles of Industrial Management in relation to Homoeopathic Pharmaceutical industry • ii) Enumerate different forms of business organization • iii) Describe the concepts of Management • iv) Explain Production Management • v) Explain Marketing Management, Distribution • vi) Explain Marketing Organization: Manufacturer-to Wholesaler –to retailer • vii) Explain Marketing Communication • viii) Explain Media for communication- Advertising, Sale, Sales Promotion methods • ix) Discuss the role of Medical Representatives • x) Explain Drug Store management

	<ul style="list-style-type: none"> • <u>Skill</u>: Apply the principles of management in pharmaceutical industrial set up. • <u>Reflection</u>: Plan for the production and delivery of genuine homoeopathic drugs from industry to the market
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Practice based Learning/ Communication skills

Course name: Hom-PG-HP-06: Hospital Pharmacy

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Hospital Pharmacy for Procurement and management of medication as per the Homoeopathic perspective
Learning outcome:	<p>Competency 01: Understand the working of Hospital Pharmacy for good clinical practice</p> <ul style="list-style-type: none"> • <u>Knowledge</u>: <ul style="list-style-type: none"> • i) Outline the structure and functions of a Hospital Pharmacy • ii) Determine the procedures for procurement of medicines, stock maintenance, indent system, and distribution of medicines. • <u>Skill</u>: Practice the principles of management of Hospital pharmacy • <u>Reflection</u>: List the steps to establish and effectively run the Hospital

	pharmacy for Good Clinical practice by understanding medication (MOM) aspect of NABH in Hospital Pharmacy.
Assessment:	Continous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Patient care/ Practice based learning

Course name: Hom-PG-HP-07: Advancements/ Researches in Homoeopathic Pharmacy

Course overview	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview on Recent advances and research in relation to Homoeopathic Pharmacy
Learning outcome:	<p>Competency 01: Identify scope of research in Homoeopathic pharmacy with effectiveness of Homoeopathic medicines in different life forms</p> <ul style="list-style-type: none"> • <u>Knowledge:</u> • i) Discuss the recent advancements in India and the world in the field of invention and production of new homoeopathic drugs. • ii) Explore the modern equipment related to drug production/ manufacturing, packaging, sealing and labelling • iii) Recognise the scope of homoeopathic medicines in Veterinary and Agriculture • iv) Discuss published Homoeopathic research studies on animals and plants • <u>Skill:</u> Observe and practice the experimentation relating to above advancements at departmental pharmacy laboratory/ agricultural/ herbal

	<p>garden in a School of Agriculture and School of Pharmacy and Homoeopathic Industrial Pharmaceutical set up/ Veterinary hospital</p> <ul style="list-style-type: none"> • <u>Reflection:</u> Develop new homoeopathic drugs to increase the efficacy of homoeopathy on plants and animals along with latest equipment available for manufacturing medicines.
Assessment:	Continuous/ Programmatic assessment/ Written assessment/ Practical Assessment
Prescribed texts:	Refer to list attached
Domains of Competencies :	Knowledge and Skill/Homoeopathic Orientation/ Practice based learning

Appendix 4:

Drug Laws and Legislation Related to Homoeopathic Pharmacy

1. Drugs and Cosmetics Act, 1940(23 of 1940)
2. Legislation related to Homoeopathic pharmacy (Part VI-A, VII-A, IX-A) –as per Drugs and Cosmetics Rules, 1945
3. Good Manufacturing Practices – Schedule M-I
4. Schedule FF- regulation for ophthalmic preparations
5. The Pharmacy Act, 1948 (6 of 1948)
6. The NCH Act, 2020
7. Medicinal and Toilet Preparation (Excise Duty) Act, 1955 (16 of 1955)
8. Drugs and Magic Remedies (Objectional Advertisements) Act, 1954 (21 of 1954)- Spurious drugs, Misbranded Cosmetics
9. The Prevention of illicit traffic in The Narcotic Drugs and Psychotropic Substances Act, 1988 (46 of 1988)
10. Dangerous Drug Act, 1930

11. The Poison Act, 1919 (12 of 1919)
12. The Drugs (Control) Act, 1950 (25 of 1950)
13. Patent or Proprietary Medicine and procedure to obtain license
14. Inside and Outside bond laboratory- Merits and Demerits
15. Pharmaceutical ethics- related to homoeopathy. General Introduction to code

Appendix 5:

Pharmacognostic study of organised and unorganised drugs, animal and animal products:

Organised drugs: Bark: Cinchona, Cascara, Cinnamon

- 1) Leaves: Senna, Digitalis, Vasaka
- 2) Flowers: Saffron
- 3) Fruits: Capsicum, Coriander
- 4) Seed: Nux vomica, Nut meg, Strophanthus
- 5) Root and Rhizome: Ipecac, Colchicum, Ginger
- 6) Entire organism: Belladonna, Stramonium, Hyoscyamus

Unorganized Drugs: Aloes, Opium

- 1) Indigenous Drugs: Amla, Brahmi, Giloy, Kalmegh
- 2) Systematic study of products of animal origin: Cantharides, Bees-wax, Cochineal, Cod-liver oil

Appendix 6:

Homoeopathic Pharmaceutical Industrial Management

- 1) Administration- Principles of Industrial Management in relation to Homoeopathic Pharmaceutical industry
- 2) Introduction to forms of business organization
- 3) Introduction to concepts of Management: Managerial work, functions of management, managerial planning, long term and short-term plans, Decision making process, Management control systems
- 4) Production Management: Goals & Organization, Plant Location, Factory Building Layout, Policies, Purchasing of raw material, inventory control
- 5) Marketing Management: Distribution, Physician – Consumer profile
- 6) Marketing Organization: Manufacturer-to Wholesaler –to retailer

- 7) Marketing Communication
- 8) Media for communication- Advertising, Sale, Role of medical representatives, Sales Promotion methods
- 9) Drug store Management: factors influencing starting and running of a drug store, different types and forms of drug stores, Location of drug store, store building, construction, furniture, internal planning, layout, financial requirements, purchase and sales record, sales promotion and advertisement, qualification of person running store, authority & issuing licenses, accounting and correspondence, ledgers, cash book, balance sheet, Profit and Loss account

Appendix 7:

M.D. (Homoeopathy) Homoeopathic Pharmacy: Part II

PRACTICALS

Homoeopathic Pharmacy Practical- Part II

S.no	Experiments
1	Estimation of Moisture content of one drug (Gravimetric method)
2	Preparation of one mother tincture by Maceration (as per HPI)
3	Preparation of one mother tincture by Percolation (as per HPI)
4	TLC (Thin layer Chromatography) of two mother tinctures
5	Technique of section cutting, staining and mounting of sections (Preparation of 2 temporary slides)
6	Microscopic study of any 3 drugs (Determination of Stomatal index, Stomatal number, Palisade ratio)
7	Qualitative analysis of any 3 homoeopathic drugs
8	Phytochemical analysis of 3 mother tinctures- Demonstration
9	Determination of alcohol content of one mother tincture
10.	DEMONSTRATION IN HOMOEOPATHIC MANUFACTURING UNIT: Hardness of tablets, friability of tablets, disintegration rate of tablets

Activities- Homoeopathic Pharmacy for Part -II

- Internship Training program in any one GMP certified and Government approved Homoeopathic Pharmaceutical industry for duration of 1(one) month at the industry. Maintain a record file. **(Appendix D)**
- **Duration of training:** 1 month
- **Period of Posting:** After passing Part 1 examination
- **Certificate:** to be provided by the concerned manufacturing unit after completion of Internship

Field visits:

- a) Educational visits to School of Pharmacy, Veterinary Hospital and School of Agricultural Sciences. Maintain a record file of each visit. **(Appendix E)**

Maintenance of record files – Appendix D

I. Format for maintaining record on Industrial training program in Homoeopathic manufacturing unit (GMP Compliant)

- Cover page
- Certificate
- Acknowledgement
- Dates and Duration of training
- Names and number of trainee PG students
- Name and Designation of Teaching faculty
- Detail of the Trainer/s at the Factory
- Name & location of the Homoeopathic Manufacturing Factory
- History about the Manufacturing unit
- Different sections of the manufacturing unit with its working process
 - Globule preparation section
 - Trituration section
 - Washing area
 - Tablet section: **(Demonstration of Hardness of tablets, friability of tablets, disintegration rate of tablets)**
 - Mother tincture section

- Dilution section
- Cosmetics section
- Storage, packaging and labeling
- Quality control lab
- Activities of R&D Department
- How the training helped in correlation with topics studied in Theory
- Conclusion
- Group photo

(Any other related information, not mentioned in format, if required can be included)

Maintenance of record files – Appendix E

II. Format for maintaining a record on each educational visit to School of Pharmacy, Veterinary Hospital and School of Agricultural Sciences.

- Cover page
- Certificate
- Acknowledgement
- Date of visit
- Number of visiting PG students
- Name and Designation of Teaching faculty
- Detail of the instructor/s at the School of Pharmacy, Veterinary Hospital and School of Agricultural Sciences.
- Name & location and brief about the visiting institute/ Hospital
- Different sections/ laboratory/ departments/ Hospital visited and demonstration of Laboratory tests in College of Pharmacy
- Activities being undertaken in School of Pharmacy, Veterinary Hospital and School of Agricultural Sciences
- Treatment being given to the animals at the Hospital
- Herbal Garden visit in School of Agriculture science with identification of plants
- Research activities being undertaken at the school / hospital
- How the visit helped in correlation with topics studied in Theory
- Conclusion
- Group photo

(Any other related information, not mentioned in format, if required can be included)

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-II	1st Term Test: During twenty fourth month of training	During thirty sixth month of training
	2nd Term Test: During thirtieth month of training	

VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or clinical exams including Viva-Voce and dissertation	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
Homoeopathic Pharmacy Paper 1	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
Homoeopathic Pharmacy Paper 2	100	50		

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 2 – Paper 1. Course Numbers

Hom-PG-HP-01 Prescription Writing and Dispensing

Hom-PG-HP-02 Laboratory Methods

Hom-PG-HP-03 Drug Laws and Legislation Related to Homoeopathic Pharmacy

Hom-PG-HP-04 Standardisation

Part 2 – Paper 2. Course Numbers

Hom-PG-HP-01 Pharmacognosy
 Hom-PG-HP-02 Pharmacopoeia Commission for Indian Medicine & Homoeopathy
 Hom-PG-HP-03 Experimental Pharmacology
 Hom-PG-HP-04 Pharmacovigilance
 Hom-PG-HP-05 Homoeopathic Pharmaceutical Industrial Management
 Hom-PG-HP-06 Hospital Pharmacy
 Hom-PG-HP-07 Advancements/ Research in Homoeopathic Pharmacy

VII (2b). Question Paper Layout

Part-II, Paper 1

Q. No.	Type of Question	Content	Marks
1	Application Based	Standardisation	20
2	LAQ	Prescription writing and Dispensing	10
3	LAQ	Drug Laws and Legislation related to Homoeopathic Pharmacy	10
4	LAQ	Standardisation	10
5	LAQ	Drug Laws and Legislation related to Homoeopathic Pharmacy	10
6	SAQ	Prescription writing and Dispensing	5
7	SAQ	Laboratory Methods	5
8	SAQ	Drug Laws and Legislation related to Homoeopathic Pharmacy	5
9	SAQ	Prescription writing and Dispensing	5
10	SAQ	Laboratory Methods	5
11	SAQ	Drug Laws and Legislation related to Homoeopathic Pharmacy	5
12	SAQ	Laboratory Methods	5
13	SAQ	Drug Laws and Legislation related to Homoeopathic	5

	Pharmacy	
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Part-II, Paper 2

Q. No.	Type of Question	Content	Marks
1	Application Based	Pharmacovigilance, Homoeopathic Pharmaceutical Industrial Management	20
2	LAQ	Pharmacognosy, Experimental Pharmacology	10
3	LAQ	Pharmacopoeia Commission for Indian Medicine & Homoeopathy, Pharmacovigilance	10
4	LAQ	Homoeopathic Pharmaceutical Industrial Management	10
5	LAQ	Advancements/ Researches in Homoeopathic Pharmacy	10
6	SAQ	Pharmacopoeia Commission for Indian Medicine & Homoeopathy	5
7	SAQ	Experimental Pharmacology	5
8	SAQ	Homoeopathic Pharmaceutical Industrial Management	5
9	SAQ	Hospital Pharmacy	5
10	SAQ	Advancements/ Researches in Homoeopathic Pharmacy	5
11	SAQ	Homoeopathic Pharmaceutical Industrial Management	5
12	SAQ	Advancements/ Researches in Homoeopathic Pharmacy	5
13	SAQ	Experimental Pharmacology	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Practical examination.

Practical		
1	Internal Assessment	20 Marks
2	One Major Experiment	30 Marks
3	One Minor Experiment	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Dissertation	20 Marks
2	Viva	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

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- 29) Maute Christiane. Homoeopathy for Plants. A practical guide for house, balcony, garden plants.
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- 32) Ortega PS. (1980). Notes on The Miasm on Hahnemann's Chronic Diseases. English Translation by Harris Coulter. National Homoeopathic Pharmacy.
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Part I Paper 2

Fundamentals of Clinical Medicine in Homoeopathic Pharmacy

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Homoeopathic Pharmacy.

III. Brief description of speciality and its relevance in homoeopathy post-graduate course.

The course is a clinical counterpart for the Homoeopathic study and is expected to deliver the basic clinical approach to symptomatology of the patient and process of coming to final diagnosis. student of pharmacy needs to master these processes for not only to give meaning to the symptomatology of the prover but also understand the different toxicological and clinical sources of remedies. It gives better insight about the cause, genesis, evolution of the symptoms and its correlation with examination and investigation which are basic requirement to understand the symptomatology of the prover and action of the remedies. This also will guide the learner to differentiate between proving symptoms and developing any clinical entity at the same time will allow him to take appropriate action to deal with it. The study also can guide to develop new drugs from different traditional sources and their clinical use.

V. Courses and Course Objectives.

Part 1 Paper 2: Fundamentals of Clinical Medicine in Homoeopathic Pharmacy (FCMHP)

- Hom-PG-FMHP -01: **Introduction to the Practice of Evidence-based Medicine.**
 - a. Concept of evidence-based practice and its importance in relation to Homoeopathic Pharmacy
 - b. Importance of developing an ethical base while adhering to the above in relation to Homoeopathic Pharmacy
- Hom-PG-FMHP -02: **Developing a Basic Clinical Approach. All the following content must be delivered through clinical cases or presentation along with different aspects of Homoeopathic Pharmacy**
 - a. Correlative study of Normal structure and function to reveal Structural and Functional integrity in Health and understanding the clinical and Hahnemannian concept of health through clinical cases.
 - b. Role of Control Systems (Psycho-Neuro-Endocrine axis and the Reticulo-endothelial System) in the maintenance of Health and initiating the process of breakdown and onset of illness
 - c. Concept of predisposition and disposition and its influence on development of diseases and application to HP
 - d. Bio-psycho-social and environmental model of Aetiology and correlating with the Hahnemannian concept of causation and evolution of disease and Homoeopathic Pharmacy
 - e. Development of a Symptom as an indication of deviation of functional competence followed by changes in structural integrity – the pathogenesis of symptom formation and the Hahnemannian concept of disease and its expression and application to Homoeopathic Pharmacy
 - f. Clinico-pathological correlations and the concept of a syndrome.
 - g. Bed side- General and Systematic examination and understanding their basis.
 - h. Role of physical examination and clinical investigation in the study of disease.

- i. Understanding the process of clinical diagnosis
- j. Importance of differential diagnosis-probable diagnosis and final diagnosis

Following study shall help in building up the clinical aspects of Homoeopathic Pharmacy

- a. Predisposition
 - b. Causation and modifying factors
 - c. Pathogenesis, Pathology, Clinico-pathological correlations with pathological end result
 - d. Case taking, examination, investigation and approach to clinical diagnosis, differential diagnosis
 - e. Management-General and Homoeopathic:
 - i. General Management
 - ii. Standard management:
 - a) Pharmacological effects of homoeopathic medicines, identification of ADR and its effective management, selection of suitable potency, dosage, repetition through the knowledge of Posology.
 - b) Determining most suitable routes of drug administration as per the case.
 - c) Study and practice ideal methods of Dispensing
 - d) To understand the fundamentals of prescription writing and its implementation in clinical practice.
 - f. Prognosis
- **Hom-PG-FMHP-03: Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatical classification through clinical cases and bedside and its application to homoeopathic pharmacy**
 - a. Pain
 - i. Pain: Pathophysiology
 - ii. Chest Pain
 - iii. Abdominal pain
 - iv. Headache

- v. Back and Neck pain
- b. Fever-types
- c. Alteration in Nervous system functions
 - i. Faintness, syncope, dizziness, vertigo
 - ii. Weakness, myalgias, imbalance
 - iii. Numbness, tingling and sensory loss
 - iv. Acute confusional states
 - v. Aphasias
 - vi. Memory loss and dementia
 - vii. Sleep disorder
- d. Alteration in Respiratory and Circulation
 - i. Dyspnoea (prototype shown in table below)**
 - ii. Cough and haemoptysis
 - iii. Cyanosis
 - iv. Oedema
 - v.
 - vi. Shock
- e. Alteration in Gastrointestinal functions
 - i. Dysphagia
 - ii. Nausea, vomiting, indigestion
 - iii. Diarrhoea and Constipation
 - iv. Weight loss
 - v. Gastrointestinal bleeding
 - vi. Jaundice
 - vii. Abdominal swelling and ascites
- f. Alteration in Urinary functions and electrolytes
 - i. Incontinence and lower urinary symptoms
 - ii. Urinary abnormalities
- g. Alteration in Reproductive and Sexual functions
 - i. Erectile dysfunction
 - ii. Disturbances of Menstruation
 - iii. Leucorrhoea

- iv. Hirsutism
 - v. Infertility
- h. Alteration in Skin functions
 - i. Itching
 - ii. Eruptions
 - iii. Disorders of pigmentation
- i. Haematological alterations
 - i. Anaemia
 - ii. Bleeding
 - iii. Enlargement of Lymph nodes and spleen

- Hom-PG-FMHP-04: **Basic Concepts of Nutrition, Nutritional Diseases and miasmatic assessment**

- a. Nutritional and Dietary assessment
- b. Malnutrition
- c. Vitamin and Mineral deficiency
- d. **Obesity (shown in table below)**
- e. Eating disorders

- Hom-PG-FMHP-05: **Interpretations of Laboratory and Radiological Investigations:**

- a. Hematology - All basic tests
- b. Serology
- c. Biochemistry
- d. Microbiology
- e. Special tests – Hormonal Assays – Thyroid function tests, LH, FSH, Prolactin, TORCH, Triple marker, IgG/ IgM, HLA B27, Beta HCG, Anti-thyroid antibodies, Anti-cardiolipin antibodies.
- f. Basis Concepts of Radio Imaging like X-rays, CT, MRI
- g. USG
- h. ECG (Basic applications)

Some course and content templates are displayed here for guidelines as an example. Rest the institute shall prepare themselves for their implementation and documentation

VI. Course description

Course name: Hom-PG-FMHP -01: **Introduction to the Practice of Evidence based Medicine**

- Importance of developing an ethical base while adhering to the above in relation to Homoeopathic Pharmacy

Course Overview:	This course will provide students of M.D. Hom (Homoeopathic Pharmacy) with an overview of the significance of displaying ethical based clinical practice in Homoeopathic Pharmacy
Learning Outcomes:	<p>Competency 1: Identifies ethical based clinical practices in HP</p> <ul style="list-style-type: none"> ▪ <u>Knowledge</u> <ul style="list-style-type: none"> ▪ Discuss importance of collection of authenticated/genuine raw material from reputed sources for preparation of quality homoeopathic medicine. ▪ Explain GMP procedure followed by homoeopathic manufacturing units to deliver quality finished products. ▪ Conduct / Plan standardisation tests to ensure preparation of quality homoeopathic medicines as per Homoeopathic Pharmacopoeia ▪ Explain selection of potencies as per different scale of Potentisation as per the case

	<ul style="list-style-type: none"> ▪ Report ADR/ medication errors during case taking in a patient ▪ Discuss concept of Pharmacovigilance ▪ Describe the laws to be followed by Homoeopathic manufacturing units as per Drugs and Cosmetics Rules, 1945 <ul style="list-style-type: none"> ▪ <u>Skill</u> <ul style="list-style-type: none"> ▪ Demonstrate standardisation tests to ensure genuineness of homoeopathic medicine ▪ Demonstrate the use of genuine medicine as SIMILIMUM in prescription for a case and obtaining cure. ▪ Demonstrate Cases reporting ADR / medication errors related to concept of Pharmacovigilance in hospital duties ▪ Demonstrate use of potency and mother tinctures in acute and chronic cases. ▪ Identification and demonstrate use of organopathic drugs related to diseases. ▪ <u>Reflection</u> <ul style="list-style-type: none"> ▪ Appreciates the process involved ensuring ethical based clinical practice in HP
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	Refer to list attached
Domains of Competencies:	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: Hom-PG-FMHP -03: Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatical classification and clinical Homoeopathic Pharmacy through clinical cases and bedside.

BELOW IS MENTIONED A PROTOTYPE THAT WILL BE APPLIED TO ALL THE SYMPTOMS LISTED IN THE COURSE

Course Overview:	This course will provide students of MD Hom (Homoeopathic Pharmacy) about overview of dyspnoea, its understanding in clinical practice and its homoeopathic perspective
Learning Outcomes:	<p>Competency 1: Exploring Dyspnoea as a symptom and its holistic understanding in light of homoeopathic perspective and clinical medicine</p> <p><u>Knowledge:</u></p> <ul style="list-style-type: none"> • Discuss etiopathogenesis of dyspnoea and its understanding from clinical medicine. • Discuss etiopathogenesis of dyspnoea and its understanding from homoeopathic perspective • Discuss the other clinical features associated with dyspnoea • Explain pathogenesis of dyspnoea. • Plan investigation for confirmation of diagnosis • Formulate provisional clinical diagnosis and differential diagnosis • Explain Clinical differentiation of symptoms for assessment of nosological diagnosis • Classify dyspnoea from Hahnemannian classification of disease • Apply clinical insight in classifying miasm (Psoric, Syphilitic and Sycotic) • Correlate Hahnemann's concept and modern medicine for the understanding of dyspnoea • Classify the symptoms with analysis and evaluation • Ascertain prognosis from clinical medicine and homoeopathic perspective • Plan Diet and regimen as per the nosological diagnosis and Hahnemann's directions. • Plan the line of management (Medicinal and/or auxiliary management) • Plan Strategy for homoeopathic management • Perform Clinical examination of chest and other relevant systems.

- Discuss Knowledge of Posology, Prescription writing, Pharmaconomy in relation to dyspnoea
- Acquire knowledge of pharmacological action of the selected medicine for dyspnoea through the study of active drug constituents on human body

Skill:

- Homoeopathic Case taking including anamnesis
- Clinical differentiation of symptoms for assessment of nosological diagnosis
- Interpretation of suggested investigation for confirmation of diagnosis
- Clinical examination of chest and other relevant systems.
- Formulate provisional clinical diagnosis and differential diagnosis
- Homoeopathic approach in terms of anamnesis, susceptibility and miasmatic analysis
- Analysis and Evaluation of Symptoms
- Formation of Totality
- Deciding the line of management (Medicinal and/or auxiliary management)
- Strategy for homoeopathic management
- Practice the ideal prescription writing method and Dispensing technique of medicines
- Selection of potency as per the principles of Posology
- Selection of effective route of administration of indicated SIMILIMUM
- Proper repetition of doses as per the progress of the case.
- Ascertain ADR as per the case

Reflection:

- Integrated approach in understanding dyspnoea
- Identify social, economic, environmental, biological and emotional determinants of dyspnoea
- Applying the concept of Homoeopathic Pharmacy pertaining to potency selection, dose, repetition, route of administration of medicines to dyspnoea patient
- Identify the action of drug constituents of a SIMILIMUM medicine on respiratory system

	<ul style="list-style-type: none"> To avoid ADR and to take necessary measures in case of any adverse drug event
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	Refer to list attached
Domains of Competencies :	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Course name: Hom-PG-FMHP -04: **Basic Concepts of Nutrition, Nutritional Diseases and miasmatic assessment**

Course Overview:	This course will provide students of MD Hom (Homoeopathic Pharmacy) about overview of Obesity, its understanding in clinical practise and its homoeopathic perspective.
Learning Outcomes:	<p>Competency 1: Exploring Obesity as a nutritional disorder, Identifying signs and symptoms of Obesity and its holistic understanding in light of homoeopathic perspective and clinical medicine</p> <p><u>Knowledge:</u></p> <ul style="list-style-type: none"> Knowledge of body fat distribution in males and females. Knowledge of Anthropometric measurement in relation to Obesity Etiopathogenesis of Obesity and its understanding from clinical medicine. Etiopathogenesis of Obesity and its understanding from homoeopathic perspective Discuss the clinical features associated with Obesity Plan investigation for confirmation of diagnosis Knowledge of complications associated with Obesity Knowledge of general survey of disease (Hahnemannian classification of disease) Knowledge of miasm (Psoric, Syphilitic and Sycotic) Homeopathic evaluation of common and characteristic symptoms Correlate Hahnemann's concept and modern medicine for the understanding of Obesity

- Ascertain prognosis from clinical medicine and homoeopathic perspective
- Knowledge of Diet and Regimen as per the nosological diagnosis and Hahnemann's directions.
- Knowledge of Posology, Prescription writing, Pharmaconomy
- Gaining knowledge of pharmacological action of the selected medicine through the study of active drug constituents on human body

Skill:

- Homoeopathic Case taking including anamnesis
- Clinical differentiation of symptoms for assessment of nosological diagnosis
- Anthropometric assessments in relation to Obesity
- Interpretation of suggested investigation for confirmation of diagnosis
- Clinical examination of relevant systems.
- Formulate provisional clinical diagnosis and differential diagnosis
- Homoeopathic approach in terms of anamnesis, susceptibility and miasmatic analysis
- Analysis and Evaluation of Symptoms
- Formation of Totality
- Deciding the line of management (Medicinal and/or auxiliary management)
- Strategy for homoeopathic management
- Practice the ideal prescription writing method and Dispensing technique of medicines
- Selection of potency as per the principles of Posology
- Selection of effective route of administration of indicated SIMILIMUM
- Proper repetition of doses as per the progress of the case.
- Ascertain ADR

Reflection:

- Integrated approach in understanding Obesity
- Applying the concept of Homoeopathic Pharmacy pertaining to potency selection, dose, repetition, route of

	administration of medicines to Obese patient <ul style="list-style-type: none"> Identify the action of active drug constituents of a SIMILIMUM medicine on different systems of the body
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	Refer to list attached
Domains of Competencies:	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Course Name: Hom-PG-FMHP -05: Interpretations of Laboratory and Radiological Investigations

BELOW IS MENTIONED A PROTOTYPE THAT WILL BE APPLIED TO ALL THE INVESTIGATION LISTED IN THE COURSE

Course Overview:	This course will provide students of MD Hom (Homoeopathic Pharmacy) about overview of Liver Function test, its understanding in clinical practice and its homoeopathic perspective.
Learning Outcomes:	<p>Competency 1: Interpretation of Liver Function test in light of homoeopathic perspective and clinical medicine.</p> <p><u>Knowledge:</u></p> <ul style="list-style-type: none"> Knowledge of liver functions Etiopathogenesis of liver disorders Plan investigation for liver diseases Classify the liver function in to functional and structural representation Classify the liver function as representation of different Miasm (Psoric, Syphilitic and Sycotic) Knowledge of susceptibility in relation to Liver function test Correlate Hahnemann's concept and modern medicine for the understanding of liver function test Knowledge of prognosis from clinical and homoeopathic medicine basing on liver functions test.

	<ul style="list-style-type: none"> • Plan the line of management based on Liver Function test • Knowledge of Diet and regimen as per the nosological diagnosis. • Knowledge of selection of potency, repetition of doses through Homoeopathic Pharmacy <p><u>Skill:</u></p> <ul style="list-style-type: none"> • Perform clinical and homoeopathic history based on laboratory findings. • Corelation of clinical history with laboratory finding. • Utilisation of laboratory findings in selection of medicine, potency, repetition of doses. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Relate use of laboratory test in judicious management of clinical cases • Relating utility of laboratory finding in potency selection, repetition of doses through knowledge of homoeopathic pharmacy
Assessment:	Continuous / Programmatic assessment (including Problem Based Learning assessment).
Prescribed Texts:	Refer to list attached
Domains of Competencies:	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training	During eighteenth month of training
	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Homoeopathic Pharmacy	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Clinical Medicine in Homoeopathic	100	50		

Pharmacy				
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory *(Benchmarked by the module-wise distribution.)*

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Course Numbers

- Hom-PG-FMHP -01: Introduction to the Practice of Evidence-based Medicine.
- Hom-PG-FMHP-02: Developing a Basic Clinical Approach. All the following content must be delivered through clinical cases or presentation along with different aspects of Homoeopathic Pharmacy
- Hom-PG-FMHP-03: Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification through clinical cases and bedside and its application to homoeopathic pharmacy

- Hom-PG-FMHP-04: Basic Concepts of Nutrition, Nutritional Diseases and miasmatic assessment
- Hom-PG-FMHP-05: Interpretations of Laboratory and Radiological Investigations

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Developing Clinical symptom based approach (Hom-PG-FMHP-02) with one of the example of symptom like dyspnoea or GI bleeding etc. from (Hom-PG-FMHP-03) with application to Homoeopathic Pharmacy	20
2	LAQ	Application of Hom-PG-FMHP-02 to Hom-PG-FMHP-03: Application of Clinical symptom based approach (Hom-PG-FMHP-02) with one of the example of symptom like dyspnoea or GI bleeding etc. from (Hom-PG-FMHP-03) with application to Homoeopathic Pharmacy	10
3	LAQ	Application of Hom-PG-FMHP-02 to Hom-PG-FMHP-03: Application of Clinical symptom based approach (Hom-PG-FMHP-02) with one of the example of symptom like dyspnoea or GI bleeding etc. from (Hom-PG-FMHP-03) with application to Homoeopathic Pharmacy	10
4	LAQ	Application of Hom-PG-FMHP-02 to Hom-PG-FMHP-04: Application of Clinical symptom based approach (Hom-PG-FMHP-02) with one of the example of Basic Concepts of Nutrition, Nutritional Diseases and miasmatic assessment(Hom-PG-FMHP-04)	10
5	LAQ	Application of Hom-PG-FMHP-02 to Hom-PG-FMHP-05: Application of Clinical symptom based approach (Hom-PG-FMHP-02) with one of the example of Interpretations of Laboratory and Radiological Investigations(Hom-PG-	10

		FMHP-05)	
6	SAQ	Introduction to the Practice of Evidence based Medicine	5
7	SAQ	Interpretations of Laboratory and Radiological Investigations	5
8	SAQ	Basic Concepts of Nutrition, Nutritional Diseases and miasmatic assessment	5
9	SAQ	Introduction to the Practice of Evidence based Medicine	5
10	SAQ	Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification through clinical cases and bedside and its application to homoeopathic pharmacy	5
11	SAQ	Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification through clinical cases and bedside and its application to homoeopathic pharmacy	5
12	SAQ	Basic Concepts of Nutrition, Nutritional Diseases and miasmatic assessment	5
13	SAQ	Studying the Cardinal manifestations of disease through their Patho-physiology with Hahnemannian classification of symptoms and Miasmatic classification through clinical cases and bedside and its application to homoeopathic pharmacy	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Practical examination: A Common Practical/viva for Part I Paper 1 and 2.

VIII. List of Reference Books (As per APA Format).

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- 32) Kumar/Clarke. Clinical Medicine, W. B. Saunders Harcourt Bracc & Company Ltd. London
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- 51) Sharma BK. Instrumental methods of Chemical Analysis.
- 52) Singh M. Singh S. (2022). First Corrected, Re-Translated & Redacted English Edition of Organon of Medicine. 6th & 5th Edition with an Appendix & Word Meaning (of each aphorism) by Samuel Hahnemann. B. Jain Publishers (P) Ltd, New Delhi. Third Edition
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Curriculum Document of Fundamentals of Practice of Medicine

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Fundamentals of Practice of Medicine.

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Practice of Medicine.
- (ii) Fundamentals of Homoeopathy in Practice of Medicine.
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Fundamentals of Practice of Medicine .Paper 1.
- (ii) Fundamentals of Homoeopathy in Practice of Medicines. Paper 2.

III. Brief description of speciality and its relevance in homoeopathy post-graduate course.

The purpose of a post-graduate specialty program in the Practice of Medicine is to train the homoeopathic graduate in the field of general medicine and to treat the sick depending upon the principles and philosophy of homoeopathy and to produce excellent professional thinkers, researchers and teachers in homoeopathy with special emphasis in the field of medicine.

They shall recognize the health needs of community and carry out professional obligations ethically and contribute for the advancement of community health of the people of our country and even globally and play responsible role in implementation of national health programs.

The competency-based training program aims to produce postgraduate student who after undergoing required training should be able to deal effectively with the needs of the community be aware of scope and limitations and acquire skills in training medical and paramedical students.

They shall have mastered most of the competencies about the homoeopathic practice of medicine that is required to be practiced at the secondary and tertiary levels of healthcare delivery systems. The importance of physical, mental, social, and spiritual health and its adaptability in the context of health while practicing homoeopathy. They shall have acquired the spirit of scientific enquiry and are oriented to the principles of research methodology and epidemiology.

IV. Program Objectives. (Entrust able Professional Activities – EPAs)

After three years of residency training program, postgraduate should be able to

1. Practice efficiently as a homoeopathic physician with internal medicine specialty having applied knowledge of basic science; ability to gather a history and skills to perform physical examination.
2. Possess sound knowledge of common disease conditions in adults and children with the ability to prioritize differential diagnosis following clinical encounters.
3. Recommend and interpret common screening and diagnostic tests considering diseased

- individuals and not only diagnosis of disease.
4. Demonstrate skills in documentation of case details including epidemiological data and all clinical encounters in the patient record.
 5. Plan and deliver comprehensive treatment through homoeopathy considering the miasmatic evolution of the disease and applying the knowledge of homoeopathic principles and therapeutics.
 6. Apply appropriate Homoeopathic tools for prescription and assessment of progress.
 7. Exercise empathy and a caring attitude and maintain professional integrity, honesty and high ethical standards.
 8. Plan and advice measures for the prevention and rehabilitation of patients identifying social, economical, environmental, biological and emotional determinants of health.
 9. Recognize a patient requiring urgent or emergency care, initiate evaluation and management by providing Basic Life Support (BLS) and timely referring to the emergency care unit for effective resuscitation.
 10. Supervise the process of patient transfer to maintain continuity of care both during and after transfer.
 11. Demonstrate skills in the documentation of case details including epidemiological Data.
 12. Play the assigned role in the implementation of National Health Programs.
 13. Demonstrate competence in basic concepts of research methodology and clinical epidemiology.
 14. Share knowledge and skills with a colleague or a junior and teach the junior, any learner on concepts of health education.
 15. Continue to evince keen interest in continuing education irrespective of whether he/she is in a teaching institution or is practicing and use appropriate learning resources.
 16. Be well versed in medico-legal responsibilities.
 17. Undertake research - both basic and clinical, to publish the work and present the work at scientific forums to promote the quality of Homoeopathic services.
 18. Publish education-based clinical outcomes in credible journals.
 19. Collaborate as a member of inter-professional team.
- Improve instructional methods and assessment practices of UG and PG levels.
20. Improve instructional methods and assessment practices of UG and PG.
 21. Use Information technology tools for training and preparing basic treatment algorithms for Homoeopathic Management.
 22. Adhere to legal and ethical principles in professional practice.
 23. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

IV(1). Mapping of EPAs and Domain Competencies

KS : Knowledge & Scholarship
Homoeopathic Orientation

PC : Patient care

HO :

CS : Communication skills **PBL** : Practice based learning **Prf**: Professionalism

Sr. No	EPA	KS	PC	HO	CS	PBL	Prf
1	Practice efficiently as a homoeopathic physician with internal medicine specialty having applied knowledge of basic science; ability to gather a history and skills to	√	√	√	√	√	√

perform physical examination.

2	Possess sound knowledge of common disease conditions in adults and children with ability to prioritize differential diagnosis following clinical encounter.	√	–	√	√	√	√
3	Recommending and interpreting common screening and diagnostic tests considering diseased individual and not only diagnosis of disease.	√	√	√	√	√	–
4	Demonstrate skills in documentation of case details including epidemiological data and all clinical encounters in the patient record	√	–	√	√	√	√
5	Plan and deliver comprehensive treatment through homoeopathy considering the miasmatic evolution of disease and applying the knowledge of homeopathic principles and therapeutics	√	√	√	√	√	–
6	Apply appropriate Homoeopathic tools for prescription and assessment of progress	√	√	√	–	√	–
7	Exercise empathy and a caring attitude and maintain professional integrity, honesty and high ethical standards.	–	–	–	√	–	√
8	Plan and advice measures for the prevention and rehabilitation of patients identifying social, economical, environmental, biological and emotional determinants of health	√	√	√	√	√	√
9	Recognize a patient requiring urgent or emergency care, initiate evaluation and management by providing Basic Life Support (BLS) and timely referring to emergency care unit for effective resuscitation.	√	√	√	√	√	–
10	Supervise the process of patient transfer for maintaining continuity of care both during and after transfer	√	√	√	√	–	√
11	Demonstrate skills in the documentation of case details including epidemiological Data	√	√	√	–	–	√
12	Play the assigned role in the implementation of National Health Programs.	√	–	√	√	–	√
13	Demonstrate competence in basic concepts of research methodology and clinical epidemiology; and preventive aspects of various disease states.	√	–	√	–	–	–
14	Share knowledge and skills with colleague or a junior and teach junior, any learner on concepts of health education.	√	–	√	√	–	√
15	Continue to evince keen interest in continuing education irrespective of whether he/she is in a teaching institution or is practicing and use appropriate learning resources.	√	–	√	√	–	√
16	Be well versed with medico-legal responsibilities.	√	√	√	–	–	√
17	Undertake research - both basic and clinical, with the aim of publishing the work and presenting the work at scientific forums for promoting quality of Homoeopathic	√	–	√	√	–	√

	services						
18	Publish education based clinical outcome in credible journals.	√	–	√	–	–	–
19	Collaborate as a member of inter professional team.	√	–	√	√	–	√
20	Improve instructional methods and assessment practices of UG and PG level	√	–	√	√	–	√
21	Use Information technology tools for training and preparing basic treatment algorithm for Homoeopathic Management	√	√	√	√	√	–
22	Adhere to legal and ethical principles in professional practice	√	√	√	–	–	√
23	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	√	√	√	√	√	√

IV(2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA level:

1. No permission to act
2. Permission to act with direct proactive supervision present in a room
3. Permission to act with indirect supervision, not present but quickly available if needed
4. Permission to act under distant supervision; not directly available (unsupervised)
5. Permission to provide supervision to junior trainees

Sr. No	EPAs	Semester 1	Semester 2	Semester 3	Semester 4	Semester 5	Semester 6
1	Practice efficiently as a homoeopathic physician with internal medicine specialty having applied knowledge of basic science; ability to gather history and skills to perform physical examination.	2 Documenting systematically data collected during History Taking and findings of Physical examination	3 Demonstrating skills of Physical Examination relevant to patient history	4 Applies knowledge and skills of Physical Examination to derive at probable diagnosis.	5 Demonstrates application of knowledge and skills of history taking and physical examination to arrive at provisional diagnosis	5 Demonstrates application of knowledge and skills of history taking and physical examination to arrive at provisional diagnosis	5 Demonstrates application of knowledge and skills of history taking and physical examination to arrive at provisional diagnosis
2	Possesses sound	2 Gathers	3 Ensure the	4 Concludes	5 Confirms /	5 Confirms,	5 Confirms,

	knowledge of common disease conditions in adults and children with ability to prioritize differential diagnosis following clinical encounters.	information of common disease and grasp skills of examination which can help arrive at differential diagnosis	data collected through history taking and physical examination is accurate in a given clinical encounter to arrive at differential diagnosis	the findings for prioritising differential diagnosis	ensures Juniors follow the steps to prioritise differential diagnosis in a given clinical Encounter through direct supervision	ensures Juniors follow the steps to prioritise differential diagnosis in a given clinical examination . Encounter through direct supervision	ensures Juniors follow the steps to prioritise differential diagnosis in a given clinical examination. Encounter through direct supervision
3	Recommend and interpret common screening and diagnostic tests considering diseased individuals and not only diagnosis of disease.	2 Documents accurately Diagnostic tests to be carried out in a given clinical encounter	2 Documents accurately Diagnostic tests to be carried out in a given clinical encounter	3 Instructs the diagnostic / screening tests to be performed in a given clinical encounter	4 Interprets the results of Diagnostic tests in view of diseased individual	5 Ensures that the juniors follow the accurate steps in recommending and interpreting the Diagnostic / screening tests in a given clinical encounter	5 Ensures that the juniors follow the accurate steps in recommending and interpreting the Diagnostic / screening tests in a given clinical encounter
4	Demonstrate skills in the documentation of case details including epidemiological data and all clinical encounters in the patient record.	2 Skills to document the data gathered in all communities and clinical encounters	3 Ensures the patient record in clinical as well as community setting mentions epidemiological data	4 Ability to interpret the data in view of clinical / community encounter	5 Ensures juniors follow the steps accurately while gathering the data and its interpretation in clinical / community encounter	5 Ensures juniors follow the steps accurately while gathering the data and its interpretation in clinical / community encounter	5 Ensures juniors follow the steps accurately while gathering the data and its interpretation in clinical / community encounter
5	Plan and deliver comprehensive treatment	2 Documents accurately the principles of	3 Ensures the plan of homoeopa	4 Develops ability to plan and	5 Ensures juniors follow the	5 Ensures juniors follow the	5 Ensures juniors follow the steps accurately while

	through homoeopathy considering the miasmatic evolution of disease and applying the knowledge of homoeopathic principles and therapeutics	Homoeopathic Management, miasmatic diagnosis and the plan for therapeutic intervention.	this management considering the miasmatic evaluation of the diseased and defining the scope and limitations appropriately.	execute comprehensive treatment	steps accurately while planning comprehensive treatment and its execution	steps accurately while planning comprehensive treatment and its execution	planning comprehensive treatment and its execution
6	Apply appropriate Homoeopathic tools for prescription and assessment of progress	2 Documents the knowledge and skills of decision making tools which can be applied for making the prescription and follow up progress	3 Ensures appropriate use of Repertory and Materia Medica as decision making tools arriving at final prescription and follows the steps of assessment of progress / Remedy response in a given clinical encounter	4 Develops ability to use appropriate Repertory as per the case and arriving at final prescription by confirming Materia Medica and interprets the remedy response while arriving at the progress	5 Ensures Juniors follow all the steps while application of tools for decision making of final prescription and assessment program during follow up	5 Ensures Juniors follow all the steps while application of tools for decision making of final prescription and assessment progress during follow up	5 Ensures Juniors follow all the steps while application of tools for decision making of final prescription and assessment progress during follow up
7	Exercise empathy and a caring attitude and maintain professional integrity,	2 Grasp the process of ethical practice and demonstrate empathy and	3 Demonstrate empathy, caring attitude, maintain in	4 Develop ability to effectively demonstrate the importance	5 Ensure juniors develop and effectively apply the steps of	5 Ensure juniors develop and effectively apply the steps of	5 Ensure juniors develop and effectively apply the steps of ethical practice and demonstrate

	honesty and high ethical standards.	caring attitude and professional integrity	g professional integrity through following accurately the steps of ethical practice.	e of ethical practice	ethical practice and demonstrate empathy, caring attitude, maintaining professional integrity	ethical practice and demonstrate empathy, caring attitude, maintaining professional integrity	empathy, caring attitude, maintaining professional integrity
8	Plan and advice measures for the prevention and rehabilitation of patients identifying social, economic, environmental, biological and emotional determinants of health	2 Grasp the aspects of preventive and rehabilitative process by understanding the determinants of health	3 Advice and apply appropriately preventive rehabilitative measures	4 Ensure appropriate the application of rehabilitation and preventive measures	5 Guide juniors for preventive and rehabilitative measures by understanding and identifying determinants of health	5 Guide juniors for preventive and rehabilitative measures by understanding and identifying determinants of health	5 Guide juniors for preventive and rehabilitative measures by understanding and identifying determinants of health
9	Recognize a patient requiring urgent or emergency care, initiate evaluation and management by providing Basic Life Support (BLS) and timely referring to the emergency care unit for effective resuscitation.	2 Grasp the basic approach to manage emergency and perform basic procedure like providing BLS and timely referring practices for emergency care	3 Perform and follow basic emergency management protocol	4 Demonstrate ability through effective management of emergency situation and appropriate transfer of patients	5 Guide juniors the basic protocol for management of emergency and ensure that they follow appropriately	5 Guide juniors the basic protocol for management of emergency and ensure that they follow appropriately	5 Guide juniors the basic protocol for management of emergency and ensure that they follow appropriately
10	Supervise the process	2 Gather	3 Perform	4 Document	5 Ensure	5 Ensure	5 Ensure Juniors

	of patient transfer for maintaining continuity of care both during and after transfer.	information and grasp the process of documentation for transfer of patients	the process of transfer of patients and do appropriate documentation	ation of transfer of patient ensuring the continuity of care during and after transfer	Juniors follow accurately the process of transfer of patient and continuity care and document accurately	Juniors follow accurately the process of transfer of patient and continuity care and document accurately	follow accurately the process of transfer of patient and continuity care and document accurately
11	Demonstrate skills in the documentation of case details including epidemiological Data	2 Grasp the process of documentation skills	3 Document the case and ensure the documentation of epidemiological data	4 Document and guide juniors the process of documentation of case and including epidemiological data	5 Ensure juniors document the case following the process and document epidemiological data in each case	5 Ensure juniors document the case following the process and document epidemiological data in each case	5 Ensure juniors document the case following the process and document epidemiological data in each case
12	Play the assigned role in the implementation of National Health Programs.	2 Grasp the process of implementation of National Health Care	3 Participate in various National Health Program and understand the process	4 Execute independently National Health Program at your Health Care Organisation abiding the process and document	4 Execute independently National Health Program at your Health Care Organisation abiding the process and document	4 Execute independently National Health Program at your Health Care Organisation abiding the process and document	5 Guide juniors to participate in National Health Program and ensures they abide the process accurately and document
13	Demonstrate competence in basic concepts of research methodology and clinical epidemiology.	2 Gather information and grasps the concept of Research Methodology	3 Apply the concepts of Research Methodology and documents the same accurately	4 Demonstrate and document the concepts of Research Methodology in Internal	5 Guide juniors and ensure appropriate use of concept of Research Methodology and clinical	5 Guide juniors and ensure appropriate use of concept of Research Methodology and clinical	5 Guide juniors and ensure appropriate use of concept of Research Methodology and clinical epidemiology

				Medicine	epidemiolog y	epidemiolog y	
14	Share knowledge and skills with colleagues or a junior and teach junior, any learner on concepts of health education.	2 Gather information on concepts of Health Education and Grasp the skills	3 Ability to share knowledge and skills appropriately to impart health education	4 Shares knowledge and skills to juniors while imparting health education using modern teaching skills	5 Ensures juniors understand and make appropriate use of knowledge and skills while imparting Health Education	5 Ensures juniors understand and make appropriate use of knowledge and skills while imparting Health Education	5 Ensures juniors understand and make appropriate use of knowledge and skills while imparting Health Education
15	Continue to evince keen interest in continuing education irrespective of whether he/she is in a teaching institution or is practising and using appropriate learning resources.	2 Grasp the process and benefit of Life Long Learner	3 Demonstrate the ability to be a lifelong learner	4 Develops and demonstrate ability for self-directed learning	5 Ensures juniors understand the benefit of self-directed learning and demonstrate the ability for the same	5Ensures juniors understand the benefit of self-directed learning and demonstrate the ability for the same	Ensures juniors understand the benefit of self-directed learning and demonstrate the ability for the same
16	Be well versed with medico-legal responsibilities.	2 Gather accurate information regarding Medico Legal responsibility	3 Understand and document appropriately medico legal issues in clinical practice during various clinical conditions and settings	4 Demonstrate and document medico legal issues and participate in the process of Medico legal enquiries	5 Ensure juniors are well versed with medico legal responsibilities and work efficiently and appropriately in medico legal issues	5 Ensure juniors are well versed with medico legal responsibilities and work efficiently and appropriately in medico legal issues	5 Ensure juniors are well versed with medico legal responsibilities and work efficiently and appropriately in medico legal issues
17	Undertake research - both basic and clinical,	2 Grasp the steps for undertaking	2 Grasp the steps for undertakin	3 Undertake Research and	4 Documents, presents, and publish	5 Prepare juniors to undertake	5 Prepare juniors to undertake research and

	to publish the work and present the work at scientific forums to promote the quality of Homoeopathic services	Research and follow accurately so that it can be accepted for presentation at scientific forum or publication	g Research and follow accurately so that it can be accepted for presentation at scientific forum or publication	prepare synopsis follow accurately steps laid down	the research completed at the scientific forum and credible journals	research and ensure that they follow steps accurately while undertaking research proposal and complete it	ensure that they follow steps accurately while undertaking research proposal and complete it
18	Publish education-based clinical outcomes in credible journals.	2 Document the steps accurately required for publication of clinical outcome in credible journals and enlist the credible journals for publishing the outcome	3 Prepare manuscript and participate in review process	4 Publish scientific papers in credible journals	5 Ensures Juniors follow steps accurately for manuscript preparation and select the credible journals for publications	5 Ensures Juniors follow steps accurately for manuscript preparation and select the credible journals for publications	5 Ensures Juniors follow steps accurately for manuscript preparation and select the credible journals for publications
19	Collaborate as a member of inter-professional team.	2 Understand the process for team formation and its functioning and grasp the final tenets of being the team member	3 Participate as a team member of inter professional team for collaborative actions and also in the formation of a team	4 Document the outcome of collaborative actions being a member of a team	5 Ensure participation of juniors as a member of inter professional team for the effective outcome of collaboration	5 Ensure participation of juniors as a member of inter professional team for the effective outcome of collaboration	5 Ensure participation of juniors as a member of inter professional team for the effective outcome of collaboration
20	Improve instructional methods and assessment practices of UG and PG levels.	2 Document the process of assessment and instruction methods accurately	2 Document the process of assessment and instruction methods accurately	3 Apply and evaluate the process of instruction methods and assessment	4 Apply and evaluate and suggest improvement or application of newer methodologies	5 Ensure appropriate use of assessment and instructions by juniors	5 Ensure appropriate use of assessment and instructions by juniors

				t accurately	y for assessment and instruction methods		
21	Use Information technology tools for training and preparing basic treatment algorithms for Homoeopathic Management	2 Grasp the fundamentals of Information Technology for preparing treatment algorithm for Homoeopathic management in various clinical conditions	3 Prepare and document the basic algorithm for treatment with appropriate use of IT Tools for various clinical conditions and clinical settings	4 Application of use of IT tools for treatment algorithm as appropriate	5 Ensure juniors apply the treatment algorithm with appropriate use of IT	5 Ensure juniors apply the treatment algorithm with appropriate use of IT	5 Ensure juniors apply the treatment algorithm with appropriate use of IT
22	Adhere to legal and ethical principles in professional practice	2 Grasp the basics of legal and ethical principle in homoeopathic practice	2 Grasp the basics of legal and ethical principle in homoeopathic practice	3 Demonstrate through practice application of law and ethics	4 Documentation confirms application of legal and ethical principle in practice	5 Train juniors and supervise for application of legal and ethical principles in homoeopathic practice	5 Train juniors and supervise for application of legal and ethical principles in homoeopathic practice
23	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	1 Get trained and acquire knowledge and skills of educational methodology	2 Prepare lesson plan. Identify learning objectives for their domains in Bloom taxonomy	3 Recognise the levels of Guilbert . Indicate the level in Millars Pyramid select appropriate instructional activity	4 Write objectives for all domains of Blooms Taxonomy and levels of Guilbert . Identify assessment tools appropriately for the context	5 Training of juniors in educational methodology and application of various teaching learning methods for imparting UG and PG training	5 Training of juniors in educational methodology and application of various teaching learning methods for imparting UG and PG training

PART I Paper 1:

V. Courses and Course Objectives.

Part I Paper I: (includes: Advance learning in Practice of Medicine (ALPM) Hom-PG-PM (C1)- **Clinical Examination, Functional anatomy, physiology, investigations and cardinal manifestations, Laboratory investigations and Applied Homoeopathy**

- **A.**
 - **Hom-PG PM 01. Cardiovascular system**
 - **Hom-PG PM 02. Respiratory system and its major manifestations**
 - **Hom-PG PM 03. Alimentary Tract & Pancreas and its major manifestations**
 - **Hom-PG PM 04. Kidney & Genitourinary system and its major manifestations**
 - **Hom-PG PM 05. Musculoskeletal system and major manifestation of musculoskeletal system**
 - **Hom-PG PM 06. Reproductive system and major manifestation of reproductive disease**
 - **Hom-PG PM 07. Endocrine system and manifestation of endocrine diseases**
 - **Hom-PG PM 08. Haematological (Blood) disorders**
 - **Hom-PG PM 09. Nervous system and its major manifestations of neurological disorders**
 - **Hom-PG PM 10. Skin & appendages and its major manifestations**
 - **Hom-PG PM 11. Psychiatric Disorders and its major manifestations**
 - **Hom-PG PM 12. Pain**
 - **Hom-PG PM 13. Fever**

- **Hom – PG PM 14.**
- **B. Laboratory & Radiological Investigations & their interpretation**
- **C. Concept of evidence based medicine, ethical issues, guidelines & its importance Homoeopathic orientation & its application**
- **D. Integrate & Interpret the cardinal manifestations of system under general medicine, paediatric, psychiatry & dermatology in diseased individual according to Homoeopathic concepts**

VI. Course description

Course Name: Hom-PG-PM-(C1) - Clinical Examination, Functional anatomy, physiology, investigations and cardinal manifestations, Laboratory investigations and Applied Homoeopathy

Course Overview	Overview of clinical examination of all the systems & General physical examination, functional anatomy, physiology, investigations, cardinal manifestations of systems under General Medicine, Paediatrics, Psychiatry and Dermatology, Lab investigations and Practice of evidence-based medicine. Contents of course and competencies
Learning Outcome	<p>Hom-PG PM 01. Cardiovascular system</p> <p>Competency 1 Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of the heart • Cardiac cycle in fetus and adults • Clinical approach and differential diagnosis of cardinal manifestations of the cardiovascular system like, • chest pain, palpitations, breathlessness, (dyspnoea), oedema, cyanosis, presyncope, syncope • Bedside investigations/ initial investigations e.g. ECG etc for clinical evaluation of symptomatology • Advice specific investigations to arrive at a final diagnosis <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of the cardiovascular system • Eliciting signs/ findings on Inspection, Palpation • Percussion and Auscultation • General Examination for assessment of vital data: Temperature, Pulse, BP, Respiratory Rate, etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis <p>Reflection</p>

	<ul style="list-style-type: none"> • Able to evaluate the symptoms of cardio- the vascular system to know the probable causes and able to do clinical examinations of the cardiovascular system in a patient to understand the deviation from normal functioning of the cardiovascular system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision-making tool for prescribing • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence-based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment - Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains Of Competencies	Knowledge & Scholarship , Patient Care , Homoeopathic Orientation / Practice Based Learning, Communication Skill.

Learning Outcome	<p>Hom-PG PM 02. Respiratory system and its major manifestations Competency 2</p> <p>Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of the Respiratory system • Respiratory cycle and its regulation • Pulmonary volumes and capacities • Clinical approach and differential diagnosis of cardinal manifestations of Respiratory system like, Cough, Dyspnoea, Expectoration, Chest Pain, Haemoptysis • Bedside investigations/ initial investigations e.g. Chest X-ray, Spirometry etc for clinical evaluation of symptomatology • Advice specific investigations to arrive at a final diagnosis <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Respiratory System • Eliciting signs/ findings on Inspection, Palpation • Percussion and Auscultation • General Examination for assessment of vital data, pulse, BP, Respiratory
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	<p>Rate, Temperature etc.</p> <ul style="list-style-type: none"> Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis <p>Reflection</p> <ul style="list-style-type: none"> Able to evaluate the symptoms of respiratory system to know the probable causes and able to do clinical examinations of respiratory system in a patient to understand the deviation from normal functioning of respiratory system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to List Attached
Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation ,Practice Based Learning, Communication Skill

<p>Learning Outcome</p>	<p>Hom-PG PM 03. Alimentary Tract & Pancreas and its major manifestations Competency 03 Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of Alimentary Tract and Pancreas • Process of digestion • Clinical approach and differential diagnosis of cardinal manifestations of Alimentary Tract and Pancreas like, dysphagia, dyspepsia, nausea, vomiting, indigestion, diarrhoea and constipation, malabsorption, weight loss, gastrointestinal bleeding, abdominal pain, ascites, jaundice • Bedside investigations/ initial investigations e.g. Stool examination, Radiology etc for clinical evaluation of symptomatology • Advice specific investigations to arrive at a final diagnosis <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Alimentary Tract and Pancreas • Eliciting signs/ findings on Inspection, Palpation • Percussion and Auscultation, rectal examination • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Alimentary Tract and Pancreatic diseases to know the probable causes and able to do clinical examinations of Alimentary Tract and Pancreas in a patient to understand the deviation from normal functioning of Alimentary Tract and Pancreas by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
<p>Assessments</p>	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment-Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
<p>Prescribed Texts</p>	

	Refer to list attached
Domains of Competencies	Knowledge & Scholarship , Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill

Learning Outcome	<p>Hom-PG PM 04. Kidney & Genitourinary system and its major manifestations</p> <p>Competency 04</p> <p>Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of Kidney and Genitourinary system. • Physiology of excretion through kidney and urine formation. • Clinical approach and differential diagnosis of cardinal manifestations of disorders like urine volume, hematuria, proteinuria, oedema, incontinence Bedside investigations/ initial investigations e.g. X ray abdomen, CT scan, MRI, ultrasonography, urine examination, Radiology etc for clinical evaluation of symptomatology • Advice specific investigations to arrive at a final diagnosis <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Kidney and Genitourinary system. • Eliciting signs/ findings on Inspection, Palpation. • Percussion and Auscultation. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Kidney and Genitourinary system diseases to know the probable causes and able to do clinical examinations of Kidney and Genitourinary system in a patient to understand the deviation from normal functioning of Kidney and Genitourinary system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment-Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	
Domains of	Refer to list attached

Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill
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Learning Outcome	<p>Hom-PG PM 05. Musculoskeletal system and major manifestation of musculoskeletal system Competency 5 Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of Musculoskeletal system, Muscle attachments, nerve innervations and blood supply ,types of joints and movements. • Clinical approach and differential diagnosis of cardinal manifestations of disorders like joint pain, stiffness, swelling, weakness, wasting, and deformity. Bedside investigations/ initial investigations e.g. Radiology, haematology, immunological test etc for clinical evaluation of symptomatology. • Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Musculoskeletal system. • Eliciting signs/ findings on Inspection, Palpation. • Percussion and Auscultation. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Musculoskeletal system disorders to know the probable causes and able to do clinical examinations of Musculoskeletal system in a patient to understand the deviation from normal functioning of Musculoskeletal system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied Materia Medica as a decision making tool for prescribing • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached

Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill
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Learning Outcome	<p>Hom-PG PM 06. Reproductive system and major manifestation of reproductive disease Competency 6 Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of Reproductive system, Reproductive and Hormonal functions of the Male and female. • Clinical approach and differential diagnosis of cardinal manifestations of disorders like menstrual disorders, leucorrhoea and infertility. Bedside investigations/ initial investigations e.g. USG Abdomen, semen analysis, hormonal assays etc for clinical evaluation of symptomatology. • Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Reproductive system. • Eliciting signs/ findings on Inspection, Palpation. • Percussion, per vaginal examination, male genitalia examination. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Reproductive system diseases to know the probable causes and able to do clinical examinations of Reproductive system in a patient to understand the deviation from normal functioning of Reproductive system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill

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Learning Outcome	<p>Hom-PG PM 07. Endocrine system and manifestation of endocrine diseases</p> <p>Competency 7 Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of Endocrine glands. • Functional anatomy and physiology of hypothalamus, pituitary, thyroid, parathyroid, adrenal gland and endocrine functions of pancreas. • Clinical approach, differential diagnosis and cardinal manifestations of endocrinal abnormalities. Bedside investigations/ initial investigations e.g. Hormonal assays, USG, CT scan, MRI etc for clinical evaluation of symptomatology. • Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Endocrine glands. • Eliciting signs/ findings on Inspection, Palpation. • Percussion, Auscultation. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Endocrine disorders to know the probable causes and able to do clinical examinations of Endocrine glands in a patient to understand the deviation from normal functioning of Endocrine glands by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice

	Based Learning, Communication Skill
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Learning Outcome	<p>Hom-PG PM 08. Haematological (Blood) disorders</p> <p>Competency 8 Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Developmental anatomy of bone marrow. • Haematopoiesis in fetus and adult, Immune system and Blood coagulation. • Clinical approach, differential diagnosis and cardinal manifestations like dyspnea, bleeding, pallor, hepatosplenomegaly . Bedside investigations/ initial investigations e.g. Complete blood count, peripheral blood smear etc, for clinical evaluation of symptomatology. • Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Haemopoietic system. • Eliciting signs/ findings on Inspection, Palpation. • Percussion, Auscultation. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Haemopoietic system disorders to know the probable causes and able to do clinical examinations of Haemopoietic system disorders in a patient to understand the deviation from normal functioning of Haemopoietic system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	<p>Refer to list attached</p>
Domains of	

Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation ,Practice Based Learning, Communication Skill
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Learning Outcome	<p>Hom-PG PM 09. Nervous system and its major manifestations of neurological disorders</p> <p>Competency 9</p> <ul style="list-style-type: none"> Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination. <p>Knowledge of</p> <ul style="list-style-type: none"> Developmental anatomy of nervous system. Organization of the nervous system, Basic functions of synapses, neurotransmitters and receptors. Clinical approach, differential diagnosis and cardinal manifestations like faintness, syncope, dizziness, vertigo, headache, weakness, myalgia, sensory disturbances, aphasia, memory loss and dementia, sleep disorders, coma and disorders of movement. Bedside investigations/ initial investigations e.g. CT Scan, MRI etc. for clinical evaluation of symptomatology. Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> Clinical Examination of nervous system. Eliciting signs/ findings on Higher mental functions, cranial nerve examination, motor, sensory and cerebellar signs General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> Able to evaluate the symptoms of nervous system disorders to know the probable causes and able to do clinical examinations of nervous system disorders in a patient to understand the deviation from normal functioning of nervous system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached

Domains of Competencies	Knowledge & Scholarship , Patient Care , Homoeopathic Orientation ,Practice Based Learning ,Communication Skill
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Learning Outcome	<p>Hom-PG PM 10. Skin & appendages and its major manifestations</p> <p>Competency 10</p> <ul style="list-style-type: none"> Applied anatomy, physiology, cardinal manifestations, investigations and Clinical examination. <p>Knowledge of</p> <ul style="list-style-type: none"> Developmental anatomy of skin and its layers including sweat glands and hair follicles, Regenerative potential of skin. Clinical approach, differential diagnosis and cardinal manifestations like pruritis, eruptive skin lesions, disorders of pigmentation, types of alopecia. Bedside investigations/ initial investigations e.g. Skin swab, scrappings, skin biopsy, skin prick test etc. for clinical evaluation of symptomatology. Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> Clinical Examination of skin. Eliciting signs/ findings on inspection and palpation. General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> Able to evaluate the symptoms of skin disorders to know the probable causes and able to do clinical examinations of skin disorders in a patient to understand the deviation from normal functioning of integumentary system by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	<p>Refer to list attached</p>
Domains of Competencies	<p>Knowledge & Scholarship , Patient Care , Homoeopathic Orientation ,Practice Based Learning, Communication Skill</p>

Learning Outcome	<p>Hom-PG PM 11. Psychiatric Disorders and its major manifestations</p> <p>Competency 11</p> <ul style="list-style-type: none"> • Cardinal manifestations, investigations and Clinical examination. <p>Knowledge of</p> <ul style="list-style-type: none"> • Clinical approach, differential diagnosis and cardinal manifestations like depressive symptoms, anxiety symptoms , delusions and hallucinations, self harm. Bedside investigations/ initial investigations for clinical evaluation of symptomatology. • Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination of Psychiatric Disorders. • Eliciting signs/ findings on higher mental functions. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the symptoms of Psychiatric Disorders to know the probable causes and able to do clinical examinations of Psychiatric Disorders in a patient to understand the deviation from normal functioning by eliciting the signs of various clinical conditions to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	<p>Refer to list attached</p>
Domains of Competencies	<p>Knowledge & Scholarship , Patient Care , Homoeopathic Orientation ,Practice Based Learning ,Communication Skill</p>
Learning Outcome	<p>Hom-PG PM 12. Pain competency 12</p> <ul style="list-style-type: none"> • Pathophysiology, investigations and Clinical examination. <p>Knowledge of</p> <ul style="list-style-type: none"> • Pain pathway, etiology and types of pain. • Clinical approach, differential diagnosis and management of pain. Bedside

	<p>investigations/ initial investigations for clinical evaluation of pain.</p> <ul style="list-style-type: none"> • Advice specific investigations to arrive at a final diagnosis <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination and management • Eliciting signs/ findings to differentiate various etiologies of pain. • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc. • Correlating the examination findings to arrive at a provisional diagnosis. <p>Reflection</p> <ul style="list-style-type: none"> • Able to evaluate the patients with pain to know the probable causes to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations and to manage the pain. • Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. • Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment- Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill
Learning Outcome	<p>Hom-PG PM 13. Fever</p> <p>Competency 13</p> <ul style="list-style-type: none"> • Pathophysiology, investigations and Clinical examination. <p>Knowledge of</p> <ul style="list-style-type: none"> • Regulation of body temperature. • Etiology and Types of fever. • Clinical approach and differential diagnosis of fever. Bedside investigations/ initial investigations, for clinical evaluation of symptomatology. • Advice specific investigations to arrive at a final diagnosis. <p>Skills</p> <ul style="list-style-type: none"> • Clinical Examination. • Eliciting signs/ findings • General Examination for assessment of vital data, pulse, B.P, Respiratory Rate, Temperature etc.

	<ul style="list-style-type: none"> Correlating the examination findings with differential symptomatology to arrive at a provisional diagnosis <p>Reflection</p> <ul style="list-style-type: none"> Able to evaluate the patients with fever to know the probable causes to arrive at a provisional diagnosis and establish final diagnosis with appropriate interpretation with laboratory and or radiological investigations and to manage the fever. Application of knowledge of disease to knowledge of medicine based on principles of Homoeopathy and individualization. Selection of Homoeopathic remedy with the use of repertory and applied materia medica as a decision making tool for prescribing. Documentation of case with analysis, evaluation, reportorial approach, justifying the selection of remedy as well as assessing the progress for evidence based medicine.
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to List attached
Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice Based Learning ,Communication Skill

Learning Outcome	<p>Hom – PG PM 14.</p> <p>B. Laboratory & Radiological Investigations & their interpretation</p> <p>Competency 14</p> <ul style="list-style-type: none"> • Haematology. • Serology. • Biochemistry. • Microbiology. • Hormonal Assays and other special tests • X-rays • CT Scan, MRI – Basic Concepts of radio imaging and its interpretation • USG • ECG, Stress test <p>Knowledge of</p> <ul style="list-style-type: none"> • Interpretation of investigations at various stages of disease • Knowledge of preparation of patient done before procedure / investigations (if any) <p>Skills</p> <ul style="list-style-type: none"> • Confirmation of provisional diagnosis based on interpretation of investigations and decide the scope & limitations • Preparation of patient for the procedure <p>Reflection</p> <ul style="list-style-type: none"> • Appropriate action / interventions depending on diagnosis and stage of disease condition and final treatment plan including auxiliary measures for the case
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment /Practical assessment/Written assessment Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship , Patient Care , Homoeopathic Orientation ,Practice Based Learning, Communication Skill

Learning Outcome	<p>C. Concept of evidence based medicine, ethical issues, guidelines & its importance Homoeopathic orientation & its application</p> <p>Sub competency Case based knowledge of evidence based medicine. Importance of ethical guidelines in clinical practice.</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Different types of evidences & how to collect evidences in clinical practice • Ethical guidelines to be followed while managing the case and collecting data for research purpose <p>Skills</p> <ul style="list-style-type: none"> • Record keeping of evidences of cases treated in OPD / IPD • Utilization of records of clinical evidences for research purpose • Application of knowledge of Ethical guidelines during managing cases in OPD / IPD and emergency settings etc. <p>Reflection</p> <ul style="list-style-type: none"> • Ability to utilize evidences collected for understanding clinical medicine & for research purpose • Ability to utilize knowledge of ethical guidelines for clinical practices and research
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment , MCQ, OSCE, , Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship , Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill

Learning Outcome	<p>D. Integrate & Interpret the cardinal manifestations of system under general medicine, paediatric, psychiatry & dermatology in diseased individual according to Homoeopathic concepts</p> <p>Sub competency</p> <ul style="list-style-type: none"> • Understand and correlate miasmatic evolution of expressions of disease. • Appropriate use of repertory and applied materia medica and its therapeutics applications <p>Knowledge of</p> <ul style="list-style-type: none"> • Various expression of disease and its miasmatic correlation • Homoeopathic concept of disease • Understanding of formation of totality in a given case and use of repertory and applied
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Assessments	<p>materia medica for prescribing</p> <p>Skills</p> <ul style="list-style-type: none"> Case taking & case processing with understanding of disease expression & pathology in an individual To formulate totality & come to a probable remedy to be confirmed by referring various materia medica <p>Reflection</p> <ul style="list-style-type: none"> Ability to make final diagnosis with understanding the stage of disease Ability to differentiate between various remedies Ability to prescribe final remedy with understanding susceptibility with Posology
	<ul style="list-style-type: none"> Continuous / Programmatic assessment /Practical assessment/Written assessment -Formative assessment : Assignment ,MCQ, OSCE, ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship ,Patient Care , Homoeopathic Orientation , Practice Based Learning, Communication Skill

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.)	1st Term Test: During sixth month of training	During eighteenth month of training
Part-I	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Practice of Medicine	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of	100	50		

Homoeopathy in Practice of Medicine					
iii. Research Methodology and Biostatistics	100	50	-	-	

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks(viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part I – Paper I.Course Numbers

Part I Paper I: (includes: Advance learning in Practice of Medicine (ALPM) Hom-PG-PM (C1)- Clinical Examination, Functional anatomy, physiology, investigations and cardinal manifestations, Laboratory investigations and Applied Homoeopathy

- A.
- **Hom-PG PM 01. Cardiovascular system**
- **Hom-PG PM 02. Respiratory system and its major manifestations**
- **Hom-PG PM 03. Alimentary Tract & Pancreas and its major manifestations**
- **Hom-PG PM 04. Kidney & Genitourinary system and its major manifestations**
- **Hom-PG PM 05. Musculoskeletal system and major manifestation of musculoskeletal system**
- **Hom-PG PM 06. Reproductive system and major manifestation of reproductive disease**
- **Hom-PG PM 07. Endocrine system and manifestation of endocrine diseases**
- **Hom-PG PM 08. Haematological (Blood) disorders**
- **Hom-PG PM 09. Nervous system and its major manifestations of neurological disorders**
- **Hom-PG PM 10. Skin & appendages and its major manifestations**
- **Hom-PG PM 11. Psychiatric Disorders and its major manifestations**

- **Hom-PG PM 12. Pain**
- **Hom-PG PM 13. Fever**
- **Hom – PG PM 14**
- **B. Laboratory & Radiological Investigations & their interpretation**
- **C. Concept of evidence based medicine, ethical issues, guidelines & its importance Homoeopathic orientation & its application**
- **D. Integrate & Interpret the cardinal manifestations of system under general medicine, paediatric, psychiatry & dermatology in diseased individual according to Homoeopathic concepts**

VII (2b). Question Paper Layout

Q No.	Type Of Question	Content	Marks
1	Application Based	Case based question on any clinical condition of Respiratory system and its homoeopathic approach for management, scope , limitations and applied Materia Medica.	20
2	LAQ	a) Cardiovascular system b) Alimentary Tract and Pancreatic diseases	10
3	LAQ	a) Musculoskeletal disorders b) Skin diseases	10
4	LAQ	a) Reproductive system and major manifestations of reproductive diseases b) Endocrine system and manifestation of endocrine diseases	10
5	LAQ	a) Haematology b) Fever types, febrile patient evaluation, pyrexia of unknown origin	10
6	SAQ	Nervous system and major manifestation of neurological disorders	05
7	SAQ	Psychiatric Disorders	05
8	SAQ	Kidney and Genitourinary diseases	05
9	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Nervous system and major manifestation of neurological disorders	05
10	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of	05

		Skin diseases	
11	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Kidney and Genitourinary diseases	05
12	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Alimentary Tract and Pancreatic diseases	05
13	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Cardiovascular system	05

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

8. Reference books (Recommended Reading)

Clinical Medicine

(TextBooks-Latest Editon)

- Kamath, S.A, 1969, API Textbook of Medicine Jaypee Bro, New Delhi, 12th Ed.
- Loscalzo, J.Kasper,D.L.,Longo,D.L.,Fauci,A.S,Hauser,S.L.& Jameson,J.L. ,1958, Harrison's, Principles & Practice of Medicine Mc Graw Hill, New York, 21st Ed.
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- Wyngaarden, J, B. & Smith, L.H.Cecil Text Book of Medicine,1985,W.B.Saunders Com, Philadelphia.17th Ed.

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- Paul,V K & Bagga,A,2019,Ghai Essential Pediatrics,CBS Publishers & Distributors Pvt Ltd,New Delhi,9th Ed.
- Schlant,R.C.& Alexander, R.W.,1994,The Heart Arteries and Veins,Mc Graw Hill, New York,7th Ed.
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- Sherlock,S,1963,Diseases of the Liver and Biliary System, Blackwell Scientific Publications,London,8th Ed.
- Singh,M,1992, Pediatric Clinical Methods,Sagar Publications,New Delhi.
- Sleisenger, M.H & Fordtran, J.S, 1993, Gastrointestinal Disease, W.B.Saunders Company, Philadelphia,5th Ed.
- Vakil,R J & Udawadia F.E,Diagnosis And Management of Medical Emergencies,1975,Oxford University Press,London,3rd Ed.
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- Zandorvoot,R.,1994,Complete Repertory, Inst for Research in Homoeopathic Information Symptomatology.

Recommended Journal Reading

- Indian Journal of Research in Homoeopathy
- Homoeopathic Link
- New Homoeopath
- International Journal of Homoeopathic Science
- Journal of Integrated standardized homoeopathy
- The Homoeopathic Heritage
- National Journal of Homoeopathy
- Indian Journal of Medical Ethics
- Indian Journal of Medical Sciences
- Indian Journal of Genetics and Molecular Research
- Journal of Homoeopathy By National Institute of Homoeopathy

Part II Paper 1, 2

V. Courses and Course Objectives.

Part II: (includes: Advance learning in Practice of Medicine (ALPM))

Course-2 Part II Paper I

SYSTEM-BASED DISEASES- GENERAL MEDICINE INCLUDING PAEDIATRICS AND DERMATOLOGY -concerning understanding Patho-Physiology, Epidemiology, Clinical features, Complications investigations, management, General principles of management, General measures, specific treatment with homoeopathy defining the scope of limitations

- **Hom-PG PM 15: Cardiovascular Disease**
 - 1.1 Disorders of heart rate, rhythm and conduction
 - 1.2 Atherosclerotic vascular disease
 - 1.3 Coronary heart diseases
 - 1.4 Vascular diseases
 - 1.5 Hypertension
 - 1.6 Diseases of heart valves
 - 1.7 Congenital heart diseases
 - 1.8 Diseases of myocardium
 - 1.9 Diseases of pericardium
 - 1.10 Heart failure
 - 1.11 Acute circulatory failure
 - 1.12 Cardiac arrest and sudden cardiac death

- **Hom-PG PM 16 : Respiratory System**
 - 2.1. Diseases of nasopharynx, larynx and trachea
 - 2.2. Diseases of pleura, diaphragm, and chest wall
 - 2.3. Obstructive Pulmonary diseases
 - 2.4. Sleep disordered breathing
 - 2.5. Respiratory Failure
 - 2.6. Infections of the Respiratory system
 - 2.7. Interstitial and Infiltrative pulmonary diseases
 - 2.8. Pulmonary Vascular diseases
 - 2.9. Tumours of bronchus and lung

- **Hom-PG PM 17: Kidney and genitourinary diseases**
 - 3.1 Congenital abnormalities of kidney and urinary system
 - 3.2 Glomerular diseases
 - 3.3 Tubulo-interstitial diseases

- 3.4 Infections of kidney and urinary tract
- 3.5 Urinary tract calculi and nephrocalcinosis
- 3.6 Renal involvement in systemic diseases
- 3.7 Renal vascular diseases
- 3.8 Tumours of kidney and genitourinary tract

- **Hom-PG PM 18: Endocrine and Metabolic Disease**

- 4.1 Diseases of Hypothalamus and Pituitary gland
- 4.2 Diseases of Thyroid gland
- 4.3 Diseases of Parathyroid gland
- 4.4 Diseases of Adrenal gland
- 4.5 Diseases of Endocrine pancreas
- 4.6 Diabetes Mellites

- **Hom-PG PM 19: Alimentary Tract and Pancreatic Diseases**

- 5.1 Diseases of mouth and salivary glands
- 5.2 Diseases of Oesophagus, Stomach and Duodenum
- 5.3 Diseases of Small Intestine
- 5.4 Diseases of Pancreas
- 5.5 Irritable Bowel Syndrome
- 5.6 Inflammatory Bowel Disease
- 5.7 Disorders of Colon and Anorectum
- 5.8 Diseases of Peritoneal cavity
- 5.9 Diseases of Gut Injury

- **Hom-PG PM 20: Liver and Biliary Tract disease**

- 6.1 Acute fulminant hepatic failure
- 6.2 Liver cirrhosis and Chronic liver failure
- 6.3 Portal Hypertension
- 6.4 Hepatic encephalopathy
- 6.5 Hepatorenal Failure
- 6.6 Specific causes of Parenchymal liver disease
- 6.7 Tumours of liver
- 6.8 Miscellaneous liver diseases
- 6.9 Gall bladder and other Biliary diseases

- **Hom-PG PM 21: Blood Disorders**

- 7.1 Leukopenia, leucocytosis, thrombocytopenia, thrombocytosis, pancytopenia
- 7.2 Anaemia
- 7.3 Blood products and transfusion
- 7.4 Haematological malignancies
- 7.5 Myeloproliferative disorders
- 7.6 Bleeding disorders
- 7.7 Venous thrombosis

- **Hom-PG PM 22: Musculoskeletal Diseases and Disorders of Bone Metabolism**

- 8.1 Degenerative joint diseases
- 8.2 Inflammatory joint diseases
- 8.3 Fibromyalgia

- 8.4 Diseases of the Bone
- 8.5 Systemic Connective tissue diseases
- 8.6 Musculoskeletal manifestations of disease in other systems
- 8.7 Miscellaneous musculoskeletal conditions

- **Hom-PG PM 23: Neurological Disease**

- 9.1 Cerebro- vascular diseases
- 9.2 Inflammatory diseases of CNS
- 9.3 Degenerative diseases
- 9.4 Diseases of Nerves
- 9.5 Disorders of Muscles
- 9.5 Disorders of Spine and Spinal cord
- 9.6 Infections of Nervous System
- 9.7 Intracranial mass lesions and Raised intracranial pressure

- **Hom-PG PM 24: Skin Disease (Dermatology)**

- 10.1 Skin manifestations in Systemic Disease
- 10.2 Eczema
- 10.3 Urticaria
- 10.4 Psoriasis and other Erythematous Scaly Eruptions
- 10. 5. Disorders of the Pilosebaceous Unit
- 10. 6 .Some Common Skin Infections and Infestations
- 10.7 Pressure sores
- 10.8. Skin Tumours
- 10.9 Disorders of Pigmentations
- 10.10. Disorders of the Nails

Course 3 : Part II Paper II

Infection, immunology, nutrition, genetics, medical psychiatry, geriatric medicine, oncology, women's disease, lifestyle disease, critical care, palliative care and pain management, emergency medicine, poisoning, national health programs and homoeopathic approach, defining scope and limitations

- **Hom-PG PM 25 :Infection and immune failure**

- 11.1 Patterns of infection
- 11.2 Microorganism - Host interaction
- 11.3 Vaccine development
- 11.4 The febrile patient
- 11.5 Generalised infections
- 11.6 Rashes and infection
- 11.7 Food poisoning and gastroenteritis
- 11.8 Tropical and International health
- 11.9 Sexually transmitted infections
- 11.10 Human immunodeficiency virus infection and Acquired immunodeficiency syndrome
- 11.11 The management of infection

- **Hom-PG PM 26: Water electrolyte & Acid – Base balance**
 - 12.1 Physiology of Water & Electrolyte
 - 12.2 Disorders of Water metabolism: Dysnatraemias
 - 12.3 Disorders of Potassium Metabolism: Dyskalaemias
 - 12.4 Acid Base disorders
 - 12.5 Disorders of Divalent ion metabolism
- **Hom-PG PM 27: Nutritional, Metabolic & Environmental disease**
 - 13.1 Nutritional assessment & nutritional needs
 - 13.2 Nutritional & Metabolic disorders
 - 13.3 Vitamins & Minerals
 - 13.4 Other metabolic disorders
 - 13.5 Environmental disorders
- **Hom-PG PM 28: Clinical genetics**
 - 14.1 The role of clinical geneticist
 - 14.2 The anatomy of the human genome
 - 14.3 Types of genetic disease
 - 14.4 Common presentations of genetic disease
 - 14.5 Investigations of genetic disease
 - 14.6 Genetic counselling and testing
- **Hom-PG PM 29: PSYCHIATRIC AND ADDICTION DISORDERS**
 - 15.1 Classification of psychiatric disorders and aetiological factors in psychiatric disorders
 - 15.2 Anxiety disorders, Obsessive compulsive disorder, Schizophrenia and Delusional disorders Affective (Mood) disorders
 - 15.3 Somatoform Disorders , Personality Disorders,
 - 15.4 Psychiatric and psychological aspects of chronic and progressive diseases Substance abuse / misuse
 - 15.5 Legal aspects of psychiatry
- **Hom-PG PM 30: GERIATRIC MEDICINE-FRAIL OLDER PEOPLE**
 - 16.1 Normal aging and concept of "Homeostenosis" and Major manifestations in old people
 - 16.2 Frailty Syndrome, Major manifestations of disease in frail older people
Clinical assessment, investigations and Rehabilitation
- **Hom-PG PM31: ONCOLOGY**
 - 17.1 Approach to a patient with cancer Diagnosis, clinical assessment, investigations, and staging Principals of Treatment
- **Hom-PG PM 32: WOMEN'S DISEASES**
 - 18.1 Infertility
 - Endometriosis
 - Pelvic Inflammatory Diseases
 - Disorders of Menstrual regulation
 - Health issues in Menopausal women
 - 18.2 Malignancies (Gynecological Cancers)
 - Polycystic Ovarian Syndrome (PCOS.)

Medical diseases in pregnancy

- **Hom-PG PM 33: LIFE STYLE ILLNESSES**

- 19.1 Concept of Life Style Illnesses

- Role of the individual and environment in their genesis and maintenance

- Homoeopathic perspective of Life style illnesses

- Comprehensive Homoeopathic assessment and management

- Role of Education, Family education and ancillary measures in restoring health

- **Hom-PG PM 34: CRITICAL CARE**

- 20.1 Provision of critical care

- General principles of critical care management and monitoring

- Major manifestations of critical illness- Circulatory failure. Respiratory failure, Renal failure, Neurological failure (Coma), Hepatic failure, Sepsis, Disseminated intravascular coagulation

- Scoring system in critical care

- **Hom-PG PM 35: PALLIATIVE CARE AND PAIN MANAGEMENT**

- 21.1 Palliative care Symptoms control, rehabilitation, continuity of care, terminal care

- **Hom-PG PM 36: EMERGENCY MEDICINE**

- 22.1 Initial Pre-Hospital Care

- Patient assessment

- Medical emergencies of cardio- circulatory disorders, Respiratory disorders, Neurological disorders, abdominal emergencies, Orthopedic emergencies and Nephrology emergencies

- 22.2 Basic Knowledge of Trauma Care

- **Hom-PG PM 37: POISONING**

- 23.1 General approach to the poisoned patient

- Poisoning by specific pharmaceutical agents

- 23.2 Chemicals and pesticides

- Envenomation

- Environmental poisoning and illnesses

- **Hom-PG PM 38: NATIONAL HEALTH PROGRAMMES**

- 24.1 Current National health Programmes - Concept/ Objectives/ Implementations/ Ground realities/ Impact National Programs under NRHM Contribution of Homoeopathy in National Health Programmes

VI. Course description

Course Name (C2): Hom-PG-PM: System Based Diseases – General Medicine including Pediatrics and Dermatology and Applied Homoeopathy

Course overview	This course will provide students of MD Hom (Practice of Medicine) with an over view of system based diseases from General Medicine including Paediatrics and Dermatology - with respect to understanding Applied Anatomy, Applied Physiology, Patho - Physiology, Epidemiology, Clinical features, complications, investigations. General principles of management, Ancillary measures, specific treatment with homoeopathy defining the scope and limitations of homoeopathy
Learning Outcome	<p>Hom-PG PM 15: Cardiovascular Disease</p> <p>1.1 Disorders of heart rate, rhythm and conduction</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of • Sinus rhythms, atrial tachyarrhythmias, junctional tachyarrhythmias, ventricular tachyarrhythmias, sinoatrial disease, atrioventricular and bundle branch block. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment -Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication

Competencies	skill/ Practice Based Learning/ / Professionalism
Learning Outcome	<p>1.2 Atherosclerotic vascular disease</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of atherosclerotic vascular disease • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • <u>Plan for assessment of a progress of the condition for evidence based medicine</u>
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>1.3 Coronary heart diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of stable angina, unstable angina, myocardial infarction • Basics of BLS • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to

	<p>arrive at the provisional diagnosis.</p> <ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis. • Decision of acceptance or referral of case. • Basics of BLS. • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant). • Arriving at the totality of symptoms. • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool. • Documentation of the same. <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations. • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification
Assessments	<ul style="list-style-type: none"> • Plan for assessment of a progress of the condition for evidence based medicine. • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>1.4 Vascular diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of peripheral arterial disease, diseases of aorta. • Standard line of treatment. • Principles of Management. • Applied Materia Medica. • Ancillary measures. <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis. • Decision of acceptance or referral of case. • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant). • Arriving at the totality of symptoms. • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia. Medica as a prescription decision too.l • Documentation of the same. <p>Reflection</p>

	<ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations. • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>1.5 Hypertension</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of Hypertension. • Standard line of treatment. • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment

Prescribed Texts	Refer to list attached
Domains of Competencies	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>1.6 Diseases of heart valves</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of • Rheumatic heart disease, mitral valve disease, aortic valve disease, tricuspid valve disease, infective endocarditic. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
	<p>1.7 Congenital heart diseases.</p> <p>Knowledge</p>

	<ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications • Of congenital heart diseases- persistent ductus arteriosus, coarctation of aorta, atrial septal defect, ventricular septal defect, tetralogy of Fallot, other causes of cyanotic congenital heart diseases. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>1.8 Diseases of myocardium</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of • acute myocarditis, cardiomyopathy, specific diseases of heart muscle, cardiac tumours. • Standard line of treatment • Principles of Management • Applied Materia Medica

	<ul style="list-style-type: none"> Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) Arriving at the totality of symptoms Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ ,Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>1.9 Diseases of pericardium</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of acute pericarditis, pericardial effusion, tuberculosis pericarditis, chronic constructive pericarditis. Standard line of treatment Principles of Management Applied Materia Medica Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management (Curative/Palliative/ Adjuvant)

	<ul style="list-style-type: none"> • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>1.10 Heart failure</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, types, diagnosis, investigations, complications • of heart failure • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the

	<p>selection of indicated remedy, potency, repetition with justification</p> <ul style="list-style-type: none"> • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	
Domains of Competencies	<p>1.11 Acute circulatory failure</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications • of acute circulatory failure • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	Refer to list attached

	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Prescribed Texts	
Domains of Competencies	1.12 Cardiac arrest and sudden cardiac death Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of • Cardiac arrest. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures Skills <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Basics of BLS • Role of Homoeopathy in management (Curative/Palliative/Adjuvant)/Defining Scope and Limitations • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Learning	Hom-PG PM 16 : Respiratory System

Outcome	<p>Sub – competencies</p> <p>2.1. Diseases of nasopharynx, larynx and trachea</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Allergic rhinitis , chronic laryngitis, laryngeal paralysis, laryngeal obstruction, acute tracheitis, tracheal obstruction, trachea- oesophageal fistula, • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencingMateria Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencingMateria Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>2.2. Diseases of pleura, diaphragm, and chest wall</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Pleurisy, pleural effusion, empyema, pneumothorax, mesothelioma of the pleura, abnormalities of diaphragm - congenital disorders, and acquired disorders, deformities of the chest wall • Principles of Management • Applied Materia Medica

	<ul style="list-style-type: none"> Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Role of Homoeopathy in management- curative/ palliative / adjuvant Arriving at the totality of symptoms of the case Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Confirm the final diagnosis with appropriate laboratory, radiological investigations and its interpretation. In emergency conditions initiate the management and monitor vitals till the case is referred to emergency care unit Recognise the stage of disease pathology correlating with miasmatic evaluation of disease to define scope and limitations of homoeopathy Formulate the totality; use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	<p>2.3.Obstructive Pulmonary diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Chronic obstructive pulmonary disease (COPD), chronic bronchitis, bronchiectasis Asthma emphysema, cystic fibrosis Principles of Management Standard line of treatment Applied Materia Medica Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis

	<ul style="list-style-type: none"> • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative / adjuvant • Arriving at the totality of symptoms of the case • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy prescription, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE,Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ,Problem Based Learning Assessment
Assessments	Refer to list attached
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	<p>2.4. Sleep disordered breathing</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of
	<ul style="list-style-type: none"> • sleep apnoea, hypopnoea syndrome • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • History taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive

	<p>at final diagnosis</p> <ul style="list-style-type: none"> Assessing the stage of clinical condition for defining the scope of Homoeopathy Maismatic evolution of expression of disease for planning the Homoeopathic management Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy ,potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>2.5.Respiratory Failure Knowledge</p>
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> Risk factors, aetiopathogenesis, clinical presentation, Classification of respiratory failure, course of disease, differential diagnosis, complications and investigations of Acute type 1 respiratory failure, Acute type II respiratory failure, Acute on chronic type I and type II respiratory failure Standard line of treatment Principles of Management Applied Materia Medica Ancillary measures <p>Reflection</p> <ul style="list-style-type: none"> Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision about acceptance or referral of case Role of Homoeopathy in management- curative/ palliative/ adjuvant / Defining scope and limitations Arriving at the totality of symptoms of the case Application of Repertory and referencing Materia Medica for selection of remedy Documentation for the same

	<p>management</p> <ul style="list-style-type: none"> • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Orient patient about the disease condition and time required for the recovery and importance of ancillary measures • Explain patient and family about complications and need for hospitalization <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>2.6. Infections of the Respiratory system</p> <p>Knowledge</p>
Domains of Competencies	<ul style="list-style-type: none"> • Various organisms causing infection of respiratory system • Aetiopathogenesis, epidemiology, clinical presentation, course of disease differential diagnosis, complications, investigations and preventive measures
	<p>of upper respiratory tract, infections- viral, bacterial, etc.</p> <ul style="list-style-type: none"> • Pneumonia- community acquired, suppurative and aspirational, lung abscess, and hospital acquired pneumonia in immunocompromised patients. Tuberculosis. • Diseases due to fungi- allergic Bronchopulmonary Aspergillosis, Invasive pulmonary Aspergillosis. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of

	<p>Homoeopathy</p> <ul style="list-style-type: none"> • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy, potency, repetition with justification • Orient patient about the disease condition and time required for the recovery and preventive measures. <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>2.7. Interstitial and Infiltrative pulmonary diseases</p> <p>Knowledge</p>
Domains of Competencies	<ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, course of disease differential diagnosis, investigations, complications of interstitial lung diseases, sarcoidosis cryptogenic fibrosing alveolitis, lung diseases due to organic and inorganic dust, lung diseases due to systemic inflammatory disease, pulmonary eosinophilia due to radiation and drugs and rare interstitial lung disease. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures
	<p>Skills</p> <ul style="list-style-type: none"> • Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic

	<p>management</p> <ul style="list-style-type: none"> • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy, potency, repetition with justification • Orient patient about the disease condition and time required for the recovery and importance of ancillary measures <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Prescribed Texts	2.8. Pulmonary Vascular diseases Knowledge
Domains of Competencies	<ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, course of disease, differential diagnosis, complications and investigations of pulmonary venous thromboembolism, severe pulmonary hypertension • Principles of Management
	<p>Skill</p> <ul style="list-style-type: none"> • Applied Materia Medica • Ancillary measures • Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy ,potency, repetition with justification • Plan for assessment of progress of condition for evidence based practice • Orient patient about the disease condition and time required for the recovery and importance of ancillary measures • Continuous / Programmatic assessment / Practical assessment / Written assessment-

Assessments	<p>Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>2.9. Tumours of bronchus and lung</p>
Prescribed Texts	<p>Knowledge</p> <ul style="list-style-type: none"> Risk factors, aetiopathogenesis, clinical presentation, course of disease, differential diagnosis, complications and investigations of
Domains of Competencies	<ul style="list-style-type: none"> large bronchus obstruction, primary tumours of lung, bronchial carcinoma, Secondary tumours of lung, tumours of mediastinum Standard line of treatment Applied Materia Medica
	<p>Skills</p> <ul style="list-style-type: none"> Ancillary measures Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations Decision about acceptance or referral of case Role of Homoeopathy in management- curative/ palliative/ adjuvant /Defining Scope and limitations Arriving at the totality of symptoms of the case Application of Repertory and referencing Materia Medica for selection of remedy Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis Assessing the stage of clinical condition for defining the scope of Homoeopathy Miasmatic evolution of expression of disease for planning the Homoeopathic management Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy ,potency, repetition with justification Plan for assessment of progress of condition for evidence based practice Orient patient about the disease condition and its outcome , time required for the recovery and importance of ancillary measures
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed	

Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

Learning Outcome	<p>Hom-PG PM 17: Kidney and genitourinary diseases</p> <p>3.1 Congenital abnormalities of kidney and urinary system</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Congenital abnormalities of kidney and urinary system • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

	<p>3.2 Glomerular diseases</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Inherited glomerular diseases, thin GBM disease, Glomerulonephritis, membranous nephropathy, IgA nephropathy and Henoch-Schoenlein purpura • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs • to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p>
Prescribed Texts	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Domains of Competencies	<p>3.3 Tubulo-interstitial diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Interstitial nephritis, analgesic nephropathy, sickle-cell nephropathy, reflux nephropathy, cystic kidney disease, cystic diseases of renal medulla, • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis

	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis. • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Prescribed Texts	3.4 Infections of kidney and urinary tract Knowledge
Domains of Competencies	<ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of infections of • Lower urinary tract, infections of upper urinary tract and kidney
	<p>Skills</p> <ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica • Ancillary measures <p>Reflection</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Orient patient about the disease condition and time required for the recovery

	<p>and importance of ancillary measures</p> <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>3.5 Urinary tract calculi and nephrocalcinosis</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of
Domains of Competencies	<ul style="list-style-type: none"> Urinary tract calculi and nephrocalcinosis Principles of Management Applied Materia Medica
	<p>Skills</p> <ul style="list-style-type: none"> Ancillary measures Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>

Assessments	3.6 Renal involvement in systemic diseases Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Diabetes mellitus, systemic vasculitis, SLE, malignant diseases, pregnancy, drug induced renal disease. • Principles of Management
Prescribed Texts	<ul style="list-style-type: none"> • Applied Materia Medica • Ancillary measures
Domains of Competencies	Skills <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment Refer to list attached Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Assessments	3.7 Renal vascular diseases Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Renal artery stenosis, diseases of small intrarenal vessels • Principles of Management
Prescribed Texts	<ul style="list-style-type: none"> • Applied Materia Medica • Ancillary measures
Domains of	Skills <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis

Competencies	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis
	<ul style="list-style-type: none"> • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of • Principles of Management • Applied Materia Medica • Ancillary measures <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>3.8 Tumours of kidney and genitourinary tract</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of
Assessments	<ul style="list-style-type: none"> • Tumours of kidney, tumours of the renal pelvis, ureters and bladder, prostatic disease, testicular tumours. • Standard line of treatment
Prescribed Texts	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica • Ancillary measures
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis
	<ul style="list-style-type: none"> • Decision of acceptance or referral of case • Role of Homoeopathy in management- (curative/ palliative /adjuvant)/ Defining Scope and limitations • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of

	<p>repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification</p> <ul style="list-style-type: none"> Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ ,Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>Hom-PG PM 18: Endocrine and Metabolic Disease 4.1 Diseases of Hypothalamus and Pituitary gland Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Diseases of hypothalamus and pituitary gland
Assessments	<ul style="list-style-type: none"> Hypopituitarism, visual field defect, galactorrhoea, pituitary and hypothalamic tumours, hypothalamic and posterior pituitary disease Standard line of treatment Principles of Management
Prescribed Texts	<ul style="list-style-type: none"> Applied Materia Medica Ancillary measures <p>Skills</p>
Domains of Competencies	<ul style="list-style-type: none"> Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis
	<ul style="list-style-type: none"> Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>

	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>4.2 Diseases of Thyroid gland</p> <p>Knowledge</p> <p>Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Diseases of thyroid gland</p> <p>Hypothyroidism, hyperthyroidism, simple goitre, solitary thyroid nodule, malignant tumours</p> <p>Standard line of treatment</p> <p>Principles of Management</p> <p>Applied Materia Medica</p>
Assessments	<p>Ancillary measures</p> <p>Skills</p> <p>Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis</p>
Prescribed Texts	<p>Interpretation of investigations to confirm the diagnosis</p> <p>Decision of acceptance or referral of case</p> <p>Role of Homoeopathy in management- curative/ palliative /adjuvant</p>
Domains of Competencies	<p>Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool</p> <p>Documentation of the same</p>
	<p>Reflection</p> <p>Arriving at a final diagnosis by appropriate interpretation of investigations</p> <p>Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification</p> <p>Plan for assessment of a progress of the condition for evidence based medicine</p> <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>KS,PC,HO,CS,PBL,PRF Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>4.3 Diseases of Parathyroid gland</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Diseases of the Parathyroid Glands • hypercalcaemia, hypocalcaemia, hyperparathyroidism. • Standard line of treatment
Assessments	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica

	<ul style="list-style-type: none"> • Ancillary measures Skills <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs
Prescribed Texts	<ul style="list-style-type: none"> • to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case
Domains of Competencies	<ul style="list-style-type: none"> • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool
	<ul style="list-style-type: none"> • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment Refer to list attached <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>4.4 Diseases of Adrenal gland</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Diseases of adrenal gland • Cushing's Syndrome, adrenal insufficiency, mineralocorticoid excess and primary hyperaldosteronism, pheochromocytoma, congenital adrenal hyperplasia • Standard line of treatment • Principles of Management
Assessments	<ul style="list-style-type: none"> • Applied Materia Medica • Ancillary measures Skills <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs
Prescribed Texts	<ul style="list-style-type: none"> • to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case
Domains of Competencies	<ul style="list-style-type: none"> • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool

	<ul style="list-style-type: none"> Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>4.5 Diseases of Endocrine pancreas</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Diseases of endocrine pancreas spontaneous hypoglycaemia, Standard line of treatment Principles of Management Applied Materia Medica
Assessments	<ul style="list-style-type: none"> Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis
Prescribed Texts Domains of Competencies	<ul style="list-style-type: none"> Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same
	<p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment

	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>4.6 Diabetes Mellites</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Diabetes mellites. • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p>
Assessments	<ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant
Prescribed Texts	<ul style="list-style-type: none"> • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same
Domains of Competencies	<p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations
	<ul style="list-style-type: none"> • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Learning Outcome	<p>Hom-PG PM 19: Alimentary Tract and Pancreatic Diseases</p> <p>5.1 Diseases of mouth and salivary glands</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Aphthous ulceration, candidiasis, parotitis, Vincent's angina • Principles of Management • Applied Materia Medica

	<ul style="list-style-type: none"> Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case
Assessments	<p>Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domain of competencies	<p>5.2 Diseases of Oesophagus, Stomach and Duodenum</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Gastro-oesophageal reflux disease, motility disorders, tumours of oesophagus, perforation of oesophagus, gastritis, peptic ulcer disease, functional disorders, tumours of the stomach Principles of Management Applied Materia Medica Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations

	<ul style="list-style-type: none"> Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	5.3 Diseases of Small Intestine
Domains of Competencies	<p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of
	<p>Skills</p> <ul style="list-style-type: none"> Disorders causing malabsorption, motility disorders, miscellaneous disorders of small intestine, adverse food reactions, infections of small intestine, tumours of small intestine Principles of Management Applied Materia Medica Ancillary measures Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment

	Refer to list attached
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Prescribed Texts	5.4 Diseases of Pancreas Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations,
Domains of Competencies	<ul style="list-style-type: none"> • complications of • Acute and chronic pancreatitis, congenital abnormalities of pancreas, tumours of pancreas.
	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica • Ancillary measures Skills <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Documentation of the same • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment Refer to list attached
	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Assessments	5.5 Irritable Bowel Syndrome Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations,
	complications of

Prescribed Texts	<ul style="list-style-type: none"> • Irritable bowel syndrome • Principles of Management • Applied Materia Medica • Ancillary measures
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <p>Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <p>Summative assessment : SAQ, LAQ, Problem Based Learning Assessment</p> <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Assessments	<p>5.6 Inflammatory Bowel Disease</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of
Prescribed Texts	<ul style="list-style-type: none"> • Inflammatory bowel syndrome • Principles of Management • Applied Materia Medica
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> • Ancillary measures • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis
	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of

	<p>repertory and referencing Materia Medica as a prescription decision tool</p> <ul style="list-style-type: none"> • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>5.7 Disorders of Colon and Anorectum</p> <p>Knowledge</p>
Assessments	<ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Tumours of colon and rectum, diverticulosis, constipation and disorders of defaecation, faecal incontinence, haemorrhoids, pruritis ani, solitary rectal ulcer syndrome, anal fissure, anorectal abscesses and fistulae
Prescribed Texts	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica • Ancillary measures
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis
	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative /adjuvant • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment-

	<p>Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>5.8 Diseases of Peritoneal cavity</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of
Assessments	<ul style="list-style-type: none"> Peritonitis and tumours of peritoneal cavity Principles of Management Applied Materia Medica Ancillary measures <p>Skills</p>
Prescribed Texts	<ul style="list-style-type: none"> Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool Documentation of the same
Domains of Competencies	<p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment- <p>Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>5.9 Diseases of Gut Injury</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Ischaemic gut injury (Acute small bowel ischaemia, acute colonic ischaemia,

	<ul style="list-style-type: none"> chronic mesenteric ischaemia) Principles of Management
Assessments	Skills <ul style="list-style-type: none"> Applied Materia Medica Ancillary measures Case taking with Physical Examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis
Prescribed Texts	<ul style="list-style-type: none"> Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case
Domains of Competencies	<ul style="list-style-type: none"> Role of Homoeopathy in management- curative/ palliative /adjuvant Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool
	Reflection <ul style="list-style-type: none"> Documentation of the same Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Learning Outcome	Hom-PG PM 20: Liver and Biliary Tract disease 6.1 Acute fulminant hepatic failure Knowledge <ul style="list-style-type: none"> Risk factors, aetiopathogenesis, clinical presentation, grades, diagnosis, investigations, complications of Acute fulminant hepatic failure Standard line of treatment Principles of Management Applied materia medica Ancillary measures Skills <ul style="list-style-type: none"> Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management (curative/Palliative/ Adjuvant) Arriving at the totality of symptoms

	<ul style="list-style-type: none"> • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE,Case
Assessments	<p>Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> • Summative assessment : SAQ, LAQ,Problem Based Learning Assessment <p>Refer to list attached</p>
<p>Prescribed Texts</p> <p>Domains of Competencies</p>	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>6.2 Liver cirrhosis and Chronic liver failure</p> <p>Knowledge</p>
	<p>Skills</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, grades, diagnosis, investigations, complications of Liver cirrhosis and chronic liver failure • Standard line of treatment • Principles of Management • Applied materia medica • Ancillary measures • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written

	<p>assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	
Domains of Competencies	<p>6.3 Portal Hypertension</p> <p>Knowledge</p> <ul style="list-style-type: none"> Risk factors, aetiopathogenesis, clinical presentation, grades, diagnosis, investigations, complications of Portal hypertension <p>Skills</p> <ul style="list-style-type: none"> Standard line of treatment Principles of Management Applied materia medica Ancillary measures Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management (curative/Palliative/ Adjuvant) Arriving at the totality of symptoms Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>

Prescribed Texts	6.4 Hepatic encephalopathy Knowledge
Domains of Competencies	<ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, grades, diagnosis, investigations, complications of Hepatic encephalopathy • Standard line of treatment
	<p>Skills</p> <ul style="list-style-type: none"> • Principles of Management • Applied materia medica • Scope and limitations of Homoeopathy <p>• Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis.</p> <p>• Interpretation of investigations to confirm the diagnosis</p> <p>• Decision of acceptance or referral of case</p> <p>• Role of Homoeopathy in management (curative/Palliative/ Adjuvant)/ Defining scope and limitations</p> <p>• Arriving at the totality of symptoms</p> <p>• Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool</p> <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <p>• Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <p>• Summative assessment : SAQ, LAQ, Problem Based Learning Assessment</p> <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>6.5 Hepatorenal Failure Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, grades, diagnosis, investigations, complications of Hepatorenal Failure • Standard line of treatment
Domains of Competencies	<ul style="list-style-type: none"> • Principles of Management • Applied materia medica
	<p>Skills</p> <ul style="list-style-type: none"> • Scope and limitations of Homoeopathy • Case taking with physical examination to assess the vitals and elicit the signs to

	<p>arrive at the provisional diagnosis.</p> <ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (curative/Palliative/ Adjuvant) /Defining scope and limitations • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Assessments	<p>6.6 Specific causes of Parenchymal liver disease</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation,classification,diagnosis, investigations, complications of Viral hepatitis, alcoholic liver disease, fatty liver and non-alcoholic steatohepatitis, autoimmune hepatitis, haemochromatosis, Wilson's disease, alpha 1 antitrypsin deficiency, biliary cirrhosis, sclerosing cholangitis, vascular diseases of liver, • Standard line of treatment
Prescribed Texts	<ul style="list-style-type: none"> • Principles of Management • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same

	<p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>6.7 Tumours of liver</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of tumours of liver
Assessments	<ul style="list-style-type: none"> • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p>
Prescribed Texts	<ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis
Domains of Competencies	<ul style="list-style-type: none"> • Decision of acceptance or referral of case • Role of Homoeopathy in management (curative/Palliative/ Adjuvant)/Defining scope and limitations
	<ul style="list-style-type: none"> • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>

Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>6.8 Miscellaneous liver diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of • Liver abscess, hepatic nodule, cystic and fibropolycystic disease • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis.
Prescribed Texts	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case
Domains of Competencies	<ul style="list-style-type: none"> • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool
	<ul style="list-style-type: none"> • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <p>Examination</p> <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>6.9 Gall bladder and other Biliary diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation,diagnosis, investigations,

	<ul style="list-style-type: none"> complications of Gallstones, cholecystitis, choledocholithiasis, tumours of gallbladder and bile duct, miscellaneous biliary disorders. Standard line of treatment Principles of Management
Assessments	<p>Skills</p> <ul style="list-style-type: none"> Applied Materia Medica Ancillary measures Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis.
Prescribed Texts	<ul style="list-style-type: none"> Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of Homoeopathy in management (curative/Palliative/ Adjuvant) Arriving at the totality of symptoms
Domains of Competencies	<ul style="list-style-type: none"> Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool Documentation of the same
	<p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Learning Outcome	<p>Hom-PG PM 21: Blood Disorders</p> <p>7.1 Leukopenia, leucocytosis, thrombocytopenia, thrombocytosis, pancytopenia</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of Leukopenia, leucocytosis, thrombocytopenia, thrombocytosis, pancytopenia Standard line of treatment Principles of Management Principles of Management Applied Materia Medica Ancillary measures

	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • <u>Continuous / Programmatic assessment / Practical assessment / Written</u>
Assessments	<p>assessment-</p> <p>Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>7.2 Anaemia</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation,diagnosis, investigations, complications of • Iron deficiency anaemia, megaloblastic anaemia, chronic anaemia, haemolysis, congenital haemolysis, acquired haemolyticaemia, haemoglobinopathies • Standard line of treatment • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool

	<ul style="list-style-type: none"> Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	7.3 Blood products and transfusion
	<p>Knowledge</p> <ul style="list-style-type: none"> Different types of blood products Procedure of blood and blood product transfusion Indications and contraindications of transfusion Adverse effects of transfusion <p>Skills</p> <ul style="list-style-type: none"> Appropriate use of various blood products after confirming the diagnosis through interpretation of investigations. Standard procedures for pre- transfusion samples and administering transfusion Decision of acceptance or referral of case Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Plan for assessment of a progress of the condition for evidence based medicine Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> Summative assessment : SAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	7.4 Haematological malignancies

Domains of Competencies	Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of leukaemia, lymphomas, paraproteinaemias, aplastic anaemia
	<ul style="list-style-type: none"> • Standard line of treatment • Scope and limitations of Homoeopathy • Principles of Management • Applied Materia Medica • Ancillary measures Skills <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE ,Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment Refer to list attached
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism 7.5 Myeloproliferative disorders
Prescribed Texts	Knowledge <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of
Domains of Competencies	<ul style="list-style-type: none"> • myelofibrosis • Standard line of treatment • Scope and limitations of Homoeopathy
	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica • Ancillary measures Skills <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis.

	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>7.6 Bleeding disorders</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of • Disorders of primary haemostasis, vessel wall abnormalities, platelet functional disorders, coagulation disorders, congenital bleeding disorders, acquired bleeding disorders
Prescribed Texts	<ul style="list-style-type: none"> • Standard line of treatment
Domains of Competencies	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica • Ancillary measures
	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p>

	<ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>7.7 Venous thrombosis Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, diagnosis, investigations, complications of
Prescribed Texts	<ul style="list-style-type: none"> • Haematological disorders predisposing to venous thromboembolism. • Standard line of treatment • Principles of Management
Domains of Competencies	<ul style="list-style-type: none"> • Applied Materia Medica • Ancillary measures <p>Skills</p>
	<ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination

	<ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Learning Outcome	<p>Hom-PG PM 22: Musculoskeletal Diseases and Disorders of Bone Metabolism</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetio-pathogenesis, clinical features, investigations, complications of Musculoskeletal Diseases standard line of treatment scope & limitations of Homoeopathy <p>Skill</p> <ul style="list-style-type: none"> Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy <p>Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	<p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	<p>8.1 Degenerative joint diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> Epidemiology aetio-pathogenesis, clinical features, investigations, complications standard line of Osteoarthritis and other degenerative joint disorder Key management goals Ancillary measures

	<ul style="list-style-type: none"> Applied Materia Medica <p>Skill</p> <ul style="list-style-type: none"> Case taking with physical examination to assess stage of disease and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Miasmatic evolution of expression of disease Remedy differentiation & final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality, use of repertory if necessary and or referencing materia medica to arrive at selection of indicated remedy with posology Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE ,Case Discussion ,Bed Side Examination Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Assessments	Refer to list attached
Prescribed Texts	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>8.2 Inflammatory joint diseases</p>
Domains of Competencies	<p>Knowledge</p> <ul style="list-style-type: none"> Epidemiology aetio-pathogenesis, clinical features, investigations, complications – Rheumatoid arthritis, Seronegative Spondarthritis, Crystal-Associated Disease, Gout, Calcium Pyrophosphate Dihydrate Crystal Deposition Disease (CPPD),Bone and Joint Infection, Septic Arthritis, Viral Arthritis, Juvenile idiopathic arthritis. <p>Skill</p> <ul style="list-style-type: none"> Key management goals Standard line of treatment Ancillary measures Applied Materia Medica Case taking with physical examination to assess progress of disease, development of extra articular manifestations (if any) and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Remedy differentiation & final selection of remedy with appropriate use of

	<p>repertory and referring materia medica as a prescription decision tool</p> <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy • Orient patient about the disease condition and time required for recovery and importance of ancillary measures • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>8.3 Fibromyalgia</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Epidemiology aetio-pathogenesis, clinical features, investigations,
Domains of Competencies	<ul style="list-style-type: none"> • Principles of Management • Ancillary measures • Applied Materia Medica
	<p>Skill</p> <ul style="list-style-type: none"> • Case taking with physical examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by clinical assessment and appropriate interpretation of investigations • Educate the patient concerning the nature of problem and non inflammatory cause of chronic pain • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>

	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Assessments	8.4 Diseases of the Bone
Prescribed Texts	Knowledge <ul style="list-style-type: none"> • aetio-pathogenesis, clinical features, investigations, complications
Domains of Competencies	<ul style="list-style-type: none"> • standard line of treatment – Goals of management of Osteoporosis, Osteomalacia and rickets, Paget's Disease, Cancer associated bone disease • Scope & limitations of Homoeopathy
	Skill <ul style="list-style-type: none"> • Case taking with physical examination to assess and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy • Orient the patient about the nature of disease , time required for recovery and preventive measures <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment Refer to list attached
	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Assessments	8.5 Systemic Connective tissue diseases
	Knowledge <ul style="list-style-type: none"> • Aetio-pathogenesis, clinical features, investigations, complications of Systemic lupus erythematosus (SLE) Systemic Scleroderma, Mixed Connective tissue disorder, Sjogren's Syndrome, Polymyositis and Dermatomyositis , systemic vasculitis, Polymyalgia, Rheumatica, Giant cell arthritis, Takayasu's Arteritis, Polyarteritis Nodosa, Kawasaki disease, Small vessel disease of arthritis, veins and capillaries and other forms of Vasculitis
Prescribed Texts	
Domains of Competencies	<ul style="list-style-type: none"> • Standard line of treatment

	<ul style="list-style-type: none"> Goals of management
	<ul style="list-style-type: none"> Ancillary measures Applied Materia Medica <p>Skill</p> <ul style="list-style-type: none"> Case taking with physical examination to assess and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ,LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Assessments	<p>8.6 Musculoskeletal manifestations of disease in other systems</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetio-pathogenesis, clinical features, investigations, complications of malignant disease, endocrine disease, metabolic disorder, sarcoidosis, neuropathic Joints
Prescribed Texts	<ul style="list-style-type: none"> standard line of treatment scope & limitations of Homoeopathy Goals of management
Domains of Competencies	<p>Skill</p> <ul style="list-style-type: none"> Case taking with physical examination to assess and elicit the signs to arrive at the provisional diagnosis
	<ul style="list-style-type: none"> Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations

	<ul style="list-style-type: none"> Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy, Orient the patient about the nature of disease , time required for recovery and preventive measures Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>8.7 Miscellaneous musculoskeletal conditions</p>
Assessments	<p>Knowledge</p> <ul style="list-style-type: none"> Aetio-pathogenesis, clinical features, investigations, complications of miscellaneous musculoskeletal conditions for eg Osteogenesis imperfecta, Osteopetrosis , Osteosclerosis inherited connective tissue disorders
Prescribed Texts	<ul style="list-style-type: none"> Standard line of treatment Scope & limitations of Homoeopathy <p>Skill</p>
Domains of Competencies	<ul style="list-style-type: none"> Case taking with physical examination and elicit the signs to arrive at the provisional diagnosis of rare musculoskeletal conditions Interpretation of investigations to confirm the diagnosis
	<ul style="list-style-type: none"> Miasmatic evolution of expression of Disease Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy Assess the stage of clinical condition to define the role of Homoeopathy. Orient the patient about the nature of disease , time required for recovery and preventive measures
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/

Competencies	Practice Based Learning/ / Professionalism
Learning Outcome	<p>Hom-PG PM 23: Neurological Disease</p> <p>9.1 Cerebro- vascular diseases</p> <p>Knowledge</p> <ul style="list-style-type: none"> • aetio-pathogenesis, epidemiology, clinical features, investigations, complications of • Cerebrovascular disease, Acute Focal Stroke, Cerebral Infarction, Intracerebral Haemorrhage, Subarachnoid Haemorrhage, Cerebral Venous disease • Standard line of treatment • Principles of acute management, • Rehabilitation and secondary prevention <p>Skill</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis with understanding of Focal area affected & progression of stroke for preventing major damage of functions, thus assessing the stage and progress of Disease • Miasmatic evolution of the expression of disease • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Specially nursing care, rehabilitative measures and planning for secondary prevention • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Referring the patient to stroke unit or neuro- surgical unit to minimize the damage • Define your role in management of the case and work as a member of interprofessional team • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

	9.2 Inflammatory diseases of CNS Knowledge <ul style="list-style-type: none"> • Aetio-pathogenesis, clinical features, investigations, complications – Multiple Sclerosis, Acute Disseminated Encephalomyelitis ,Acute Transverse Myelitis • standard line of treatment • Applied Materia Medica • Ancillary measures Skill <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional • Interpretation of investigations to confirm the diagnosis • Miasmatic evolution of the expression of disease • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy, work as a member of inter professional team , • Planning of assessment , criteria to assess the progress prognosis of the case
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	9.3 Degenerative diseases Knowledge <ul style="list-style-type: none"> • aetio-pathogenesis, clinical features, investigations, complications – Degenerative causes of Dementia, Alzheimer’s Disease Parkinson’s Disease and Akinetic –Rigid syndromes, Wilson’s Disease, Huntigton’s Disease, Hereditary Ataxias, Motor Neuron Disease, Spinal Muscular Atrophies • standard line of treatment • Applied Materia Medica • Ancillary measures Skill <ul style="list-style-type: none"> • Case taking with physical examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis

	<ul style="list-style-type: none"> • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy with appropriate potency and repetition • Defining the role as a member of inter professional team • Planning of assessment criteria to assess the progress prognosis of the case <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- <p>Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p>
Assessments	<ul style="list-style-type: none"> • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	9.4 Diseases of Nerves
	<p>Knowledge</p> <ul style="list-style-type: none"> • Aetio-pathogenesis, clinical features, investigations, complications – Disease of the Peripheral nervous system, Guillain Barre syndrome, Entrapment neuropathies, Diseases affecting cranial nerves, Idiopathic facial nerve palsy, • Standard line of treatment • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking with physical examination and to assess and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy potency, repetition with its

	justification <ul style="list-style-type: none"> Defining the role as a member of inter professional team Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> Summative assessment : SAQ,LAQ ,Problem Based Learning Assessment Refer to list attached
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	9.5 Disorders of Muscles Knowledge
	<ul style="list-style-type: none"> Aetio-pathogenesis, clinical features, investigations, complications – Disease of Disorders of the Neuromuscular junction, Myasthenia Gravis, Diseases of muscle, Muscular Dystrophies, Inflammatory myopathy/ polymyositis Standard line of treatment Applied Materia Medica Ancillary measures Skill <ul style="list-style-type: none"> Case taking with physical examination and to assess and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Decision of acceptance or referral of case Role of homoeopathy in management - (curative/ palliative /adjuvant) Arriving at the totality of the symptoms of the case Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool Reflection <ul style="list-style-type: none"> Arriving at a final diagnosis by appropriate interpretation of investigations Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy potency, repetition with its justification Defining the role as a member of inter professional team Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Assessments	Refer to list attached Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/

	Practice Based Learning/ / Professionalism
Prescribed Texts	
Domains of Competencies	9.5 Disorders of Spine and Spinal cord Knowledge <ul style="list-style-type: none"> • aetio-pathogenesis, clinical features, investigations, complications – Compression of Spinal Cord, Cervical Spondylosis with radiculopathy, Cervical Spondylotic Myelopathy, Lumbar disc Herniation Lumbar Canal stenosis, syringomyelia • standard line of treatment • Applied Materia Medica • Ancillary measures Skill <ul style="list-style-type: none"> • Case taking with physical examination to assess and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Assessments	Refer to list attached Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Prescribed Texts	9.6 Infections of Nervous System
Domains of Competencies	Knowledge <ul style="list-style-type: none"> • Aetio-pathogenesis, clinical features, investigations, complications –standard line of treatment of • Meningitis, Parenchymal viral infections, Parenchymal bacterial infections, Prion diseases: Transmissible spongiform, encephalopathies • scope & limitations of Homoeopathy Skill <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant)

	<ul style="list-style-type: none"> • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy • Defining the role as a member of inter professional team
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>9.7 Intracranial mass lesions and Raised intracranial pressure</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetio-pathogenesis, clinical features, investigations, complications – Raised intracranial pressure, Intracranial Neoplasms, Neurofibromatosis, Acoustic Neuroma, Paraneoplastic, Neurological disease, Hydrocephalus, Idiopathic Intracranial Hypertension • standard line of treatment • scope & limitations of Homoeopathy <p>Skill</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis • Decision of acceptance or referral of case • Role of homoeopathy in management - (curative/ palliative /adjuvant) • Arriving at the totality of the symptoms of the case • Remedy differentiation & final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia medica to arrive at selection of indicated remedy • Defining the role as a member of inter professional team
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ ,Problem Based Learning Assessment

Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

Learning outcomes	<p>Hom-PG PM 24: Skin Disease (Dermatology)</p> <p>10.1 Skin manifestations in Systemic Disease</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, complications and investigations of • Neurofibromatosis, Tuberous Sclerosis, Xanthomas, Amyloidosis, Porphyria, Sarcoidosis, Erythema Multiforme, Erythema Nodosum, Pyoderma Gangrenosum, Acanthosis Nigricans, Necrobiosis Lipoidica, Granuloma Annulare, Drug Eruptions, • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and investigations if necessary to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy ,potency, repetition with justification • Plan for assessment of progress of condition for evidence based practice
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10.2 Eczema</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, complications and investigations of

	<ul style="list-style-type: none"> • Eczema • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and investigations if necessary to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy ,potency, repetition with justification • Plan for assessment of progress of condition for evidence based practice
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10.3 Urticaria</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, complications and investigations of • Urticaria, Photo sensitivity, blisters, leg ulcers, vulval itch • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations

	<ul style="list-style-type: none"> • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and investigations if necessary to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Maismatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy ,potency, repetition with justification • Plan for assessment of progress of condition for evidence based practice
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10.4 Psoriasis and other Erythematous Scaly Eruptions</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Stable Plaque Psoriasis, Guttate Psoriasis, Erythrodermic Psoriasis, Pustular Psoriasis, Lichen Planus, • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking with Physical Examination to elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Role of Homoeopathy in management- curative/ palliative / adjuvant • Arriving at the totality of symptoms of the case • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Confirm the final diagnosis with appropriate laboratory, radiological

	<p>investigations and its interpretation.</p> <ul style="list-style-type: none"> • Recognise the stage of disease pathology correlating with miasmatic evaluation of disease to define scope and limitations of homoeopathy • Formulate the totality; use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10. 5. Disorders of the Pilosebaceous Unit</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Acne Vulgaris, Acne Rosacea, • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • Case taking and Physical Examination with assessment of vitals and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative / adjuvant • Arriving at the totality of symptoms of the case • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing Materia Medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy prescription, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine

Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ,LAQ ,Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10. 6 . Some Common Skin Infections and Infestations</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of Fungal Infection of Skin (Ringworm), Tinea Corporis, Tinea Cruris, Tinea Pedis, Principles of Management Applied Materia Medica Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> History taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis Interpretation of investigations to confirm the diagnosis Role of Homoeopathy in management- curative/ palliative/ adjuvant Arriving at the totality of symptoms of the case Application of Repertory and referencing Materia Medica for selection of remedy Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis Assessing the stage of clinical condition for defining the scope of Homoeopathy Miasmatic evolution of expression of disease for planning the Homoeopathic
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ,LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

Competencies	<p>10.7 Pressure sores</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation, differential diagnosis, investigations, complications of • Pressure sores • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skill</p> <ul style="list-style-type: none"> • History taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10.8. Skin Tumours</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, course of disease differential diagnosis, investigations, Melanocytic Naevi, Seborrhoeic Warts (Basal Cell Papilloma), Keratoacanthoma, Pre-Malignant Tumours, Malignant Tumours, Basal cell Carcinoma(BCC), Squamous Cell Carcinoma (SCC), Cutaneous T-Cell Lymphoma (Mycosis Fungoides) • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking and Physical Examination and elicit the signs to arrive at the

	<ul style="list-style-type: none"> provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and investigations to arrive at final diagnosis • Assessing the stage of clinical condition for defining the scope of Homoeopathy • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy, potency, repetition with justification • Orient patient about the disease condition and time required for the recovery and importance of ancillary measures
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10.9 Disorders of Pigmentations</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical presentation, Classification of respiratory failure, course of disease, differential diagnosis, complications and investigations of • Decreased Pigmentation- Oculocutaneous Albinism, Vitiligo, • Increased Pigmentations- Localized Hypermelanosis, Diffuse Hypermelanosis, • Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis • Interpretation of investigations to confirm the diagnosis • Decision about acceptance or referral of case • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case

	<ul style="list-style-type: none"> • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation for the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and lab, radiological investigation to arrive at final diagnosis • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE ,Case Discussion ,Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>10.10. Disorders of the Nails</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Clinical presentation, differential diagnosis, complications, investigations, Nail Fold Disorders, Nail Plate Disorders, Congenital Disease, Traumatic Nail Disease, Nail in Systemic disease, Nail in some common skin disease Principles of Management • Applied Materia Medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking and Physical Examination and elicit the signs to arrive at the provisional diagnosis • Role of Homoeopathy in management- curative/ palliative/ adjuvant • Arriving at the totality of symptoms of the case • Application of Repertory and referencing Materia Medica for selection of remedy • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Interpretation of clinical findings and investigations if necessary to arrive at final diagnosis • Miasmatic evolution of expression of disease for planning the Homoeopathic management • Integrate the knowledge of Repertory and Materia Medica to arrive at final selection of remedy, potency, repetition with justification • Orient patient about the disease condition and time required for the recovery and preventive measures

Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

Part II Paper II

Course Name (C3) Infection, immunology, nutrition, genetics, medical psychiatry, geriatric medicine, oncology, women's disease , lifestyle disease, critical care, palliative care and pain management, emergency medicine, poisoning, national health programs and applied homoeopathy.

Learning outcomes	Hom-PG PM 25 Infection and immune failure
	11.1 Patterns of infection Knowledge <ul style="list-style-type: none"> • Patterns of infection in developed and tropical countries • Common prevalent infections in developed countries and tropical countries • like measles, diphtheria, pertussis, poliomyelitis, tetanus, Hepatitis B, gastroenteritis, malaria, meningococcal disease, Acute diarrhoeal illness, leprosy, tuberculosis, trachoma, amoebiasis, intestinal helminths, dengue fever etc. Skills <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant/ Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool

	<ul style="list-style-type: none"> • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Explain the preventive measures.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	11.2 Microorganism - Host interaction Knowledge <ul style="list-style-type: none"> • Clinical effects of infections on the body- Acute, chronic, allergic or immune mediated, toxic or toxin mediated • Pathology of infection • Source/route of transmission, method of spread of different infections • Prevention of different infections Skills <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/ Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same Reflection <ul style="list-style-type: none"> • Explain guidelines of prevention of infection • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy.

Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	11.3 Vaccine development Knowledge <ul style="list-style-type: none"> Different vaccines and toxoids Characteristics of effective vaccines Guidelines for immunisation against infectious disease Vaccination Schedule Skills <ul style="list-style-type: none"> Administration of Vaccines Documentation of vaccination schedule Reflection <ul style="list-style-type: none"> Ask and orient about vaccination schedule
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE ,Case Discussion, Bed Side Examination Summative assessment : SAQ ,Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	11.4 The febrile patient Knowledge <ul style="list-style-type: none"> Anatomy of thermostat and physiology of thermoregulation Physiology of febrile response Aetiopathogenesis of fever Different clinical presentations of fever (rash, cough, headache, joint pain, neck stiffness, lymphadenopathy, pain in abdomen,

	<p>fever of returning traveller, pyrexia of unknown origin, fever in injecting drug user,)</p> <ul style="list-style-type: none"> • Course of disease/fever • Different sites of recording temperature • Standard line of treatment • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination in different presentations of fever to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Specific examinations pertaining to diagnosis • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Standard line of treatment • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Orient about pattern and course of fever
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>11.5 Generalised infections</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, mode of transmission, course of disease, clinical features, investigations, complications of Glandular fever syndrome, brucellosis, leptospirosis, lyme borreliosis, Q fever, Toxoplasmosis etc. • Prevention of infection

Assessments	<ul style="list-style-type: none"> • Standard line of treatment • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Orient about pattern and course of fever • Explain the preventive measures. <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE ,Case Discussion ,Bed Side Examination • <u>Summative assessment : SAQ, LAQ, Problem Based Learning Assessment</u>
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>11.6 Rashes and infection</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Different patterns of rash associated with infection (macular, maculo-papular, haemorrhagic, urticarial, vesicular, pustular, nodular, erythematous, chancres, etc) • Risk factors, aetiopathogenesis, mode of transmission, course of disease, clinical features, investigations, complications of • Direct skin infections (impetigo, folliculitis, furuncles, carbuncles, other staphylococcal infections- wound infections, cannula related infections, injection site infection in intravenous drug users, erysipelas, cellulitis, severe necrotising soft tissue infections, clostridial soft tissue infections, Bacteroides infection), etc.

	<ul style="list-style-type: none"> • Toxic erythematous rashes(streptococcal scarlet fever, streptococcal toxic shock syndrome, staphylococcal scalded skin syndrome, staphylococcal toxic shock syndrome), • Rashes with haemorrhage(yellow fever, viral haemorrhagic fever, and meningococcal meningitis) • Erythematous and vesiculopustular eruptions (Herpes simplex virus, human herpes virus, chicken pox, Shingles, hand-foot and mouth disease, herpangina) • Viral exanthemata (Measles, rubella, parvovirus B 19, mumps) • Prevention of infection • Standard line of treatment • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Standard line of treatment • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Orient about pattern and course of fever • Explain the preventive measures.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

	<p>11.7 Food poisoning and gastroenteritis</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Principles of food hygiene • Risk factors, aetiopathogenesis, clinical features, investigations, complications of acute gastroenteritis, acute diarrhoea, acute food poisoning with predominant vomiting, acute watery diarrhoea, acute bloody diarrhoea, parasitic causes of acute diarrhoea, traveller's diarrhoea, chronic diarrhoea • Assessment of patient with diarrhoea and management of acute diarrhoea • Preventive measures • Standard line of treatment • Principles of Fluid replacement • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Standard line of treatment/Principles of management • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Orient about pattern and course of fever • Explain the food hygiene and preventive measures.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ ,Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

11.8 Tropical and International health

Knowledge

- Aetiopathogenesis, clinical features, mode of transmission, course of disease, investigations, complications of ,
- **Fever in/from tropics,**
- **Fever without localising signs** (Malaria)
- **Fever with rash-** (typhoid and paratyphoid fevers, dengue, African trypanosomiasis or sleeping sickness, American Trypanosomiasis or chagas disease)
- **Fever with haemorrhage-** (yellow fever, viral haemorrhagic fevers)
- **Fever following arthropods bites-** (Rickettsia fevers, lyme disease, louse borne relapsing fever, plague)
- **Chronic Fever-** (Amoebic liver abscess, visceral leishmaniasis or kala azar)
- **Diphtheria**
- **Eosinophilia and tropical infections**
- **Parasitic causes of eosinophilia**(soil- transmitted helminthiases, ancylostomiasis, strongyloidiasis, ascaris lumbricoides)
- **Helminths not associated with eosinophilia-** (Enterobius vermicularis, Trichuris trichiura)
- **Filariases-** (lymphatic filariasis, non-filarial elephantiasis, onchocerciasis, other filariases)
- **Schistosomiasis**
- **Liver flukes**
- **Cysticercosis and hydatid disease-** (Taenia saginata, taenia solium and cysticercosis, echinococcusgranulosus and hydatid disease, other tapeworms.)
- **Skin conditions in tropics-** (cutaneous larva migrans, cutaneous leishmaniasis, tropical ulcer, Buruli ulcer, yaws, pinta and bejel)
- **Subcutaneous swellings-** (Jiggers, myiasis, dracunculiasis, mycetoma)
- **Leprosy**
- **Splenomegaly in/from tropics**
- **Other systemic infections-** (Japanese B encephalitis, Nipah virus encephalitis, melioidosis)
- **Systemic fungal infections-** (histoplasmosis, histoplasma duiboisii, aspergillosis, coccidioidomycosis, paracoccidioidomycosis, blastomycosis, cryptococcosis, candidiasis)
- Travel medicine and malaria prophylaxis
- Personal protection
- Preventive measures
- Vaccination and prophylaxis
- Standard line of treatment
- Scope and limitations of Homoeopathy

	<ul style="list-style-type: none"> • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Standard line of treatment/Principles of management • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Orient about pattern and course of disease • Explain preventive measures.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>11.9 Sexually transmitted infections</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical features, mode of transmission and control, course of disease, investigations, complications of • Sexually transmitted bacterial infections- (syphilis, congenital syphilis, gonorrhoea, non- gonococcal urethritis and chlamydial infections in males, chlamydial infection in females, other chlamydial infections, other sexually transmitted bacterial infections) • Sexually transmitted viral infections- (genital herpes simplex, anogenital warts, molluscum contagiosum, hepatitis)

	<ul style="list-style-type: none"> • Other genital conditions- (Balanitis and Balanoposthitis, vulvovaginal conditions) • Preventive measures • Standard line of treatment • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Standard line of treatment/Principles of management • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Explain preventive measures. • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Texts	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of Competencies	11.10 Human immunodeficiency virus infection and Acquired immunodeficiency syndrome
	<p>Knowledge</p> <ul style="list-style-type: none"> • Epidemiology, global epidemic and regional patterns, virology and immunology, natural history and classification, aetiopathogenesis, clinical features, mode of transmission, course of disease, investigations, differential diagnosis, complications of, HIV and AIDS • Clinical syndromes and specific conditions-(mucocutaneous disease, specific skin condition, specific oral condition,

	<p>gastrointestinal disease, specific conditions, respiratory disease, specific conditions, nervous system and eye disease, miscellaneous conditions, neoplasms)</p> <ul style="list-style-type: none"> • Management of HIV • Prevention of infection • Scope and limitations of Homoeopathy • Applied materia medica • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Standard line of treatment/Principles of management • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy. • Explain preventive measures. • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>11.11 The management of infection</p> <p>Knowledge</p>
Domains of Competencies	<ul style="list-style-type: none"> • Principles of antimicrobial therapy • Antimicrobial resistance • Selection of appropriate antibiotic therapy
	<ul style="list-style-type: none"> • Antimicrobial agents • Continuous / Programmatic assessment / Practical assessment /

	<p>Written assessment-Formative assessment : Assignment ,MCQ.</p> <ul style="list-style-type: none"> Summative assessment : SAQ. <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>Hom-PG PM 26: Water electrolyte & Acid – Base balance</p> <p>12.1 Physiology of Water & Electrolyte Knowledge</p>
Domains of Competencies	<ul style="list-style-type: none"> Principal of Homeostasis, Normal Distribution of water & electrolyte, Nephron segments & functions <p>Disorders of Volume Status Knowledge</p>
	<ul style="list-style-type: none"> Understanding pathophysiology and clinical presentation of Extra cellular fluid volume overload & Extra cellular fluid volume depletion General principles of Management <p>Skills</p> <ul style="list-style-type: none"> Eliciting the clinical findings. Advising & interpretation of investigations. Initiating the management by application of general measures and intervention with indicated Homoeopathic medicine based on totality. Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Defining the scope by Arriving at a final diagnosis by appropriate interpretation of investigations& clinical assessment Appropriate referencing. Initial management to overcome acute state by application of general measures. Selection of Homoeopathic remedy by using repertory &Materia medica as a decision making tool Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment, MCQ Summative assessment : SAQ <p>Refer to list attached</p>
Assessments	<p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed	<p>12.2 Disorders of Water metabolism: Dysnatraemias</p>

Texts	Knowledge
Domains of Competencies	<ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation & signs of • Hyponataemia, Syndrome of inappropriate ADH secretion, Hypernatraemia& Polyuria • Principles of Management
Assessments	<p>Skills</p> <ul style="list-style-type: none"> • Applied materiamedica • Ancillary measures <p>Reflection</p> <ul style="list-style-type: none"> • Assessing the clinical presentation by history taking, examination, vital data assessment & eliciting signs to arrive at the provisional diagnosis. • Advising investigations & its interpretation for confirmation of diagnosis. • Decision of acceptance or referencing of the case. • Initiating management by applying general principals • Documentation of the same <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>12.3 Disorders of Potassium Metabolism: Dyskalaemias</p> <p>Knowledge</p>
Prescribed Texts	<ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation & signs of • Hyperkalaemia, Hypokalaemia • Principles of Management
Domains of Competencies	<p>Skills</p> <ul style="list-style-type: none"> • Applied materiamedica • Ancillary measures
	<ul style="list-style-type: none"> • Assessing the clinical presentation by history taking, examination, vital data assessment & eliciting signs to arrive at the provisional diagnosis. • Advising investigations & its interpretation for confirmation of diagnosis. Decision of acceptance or referencing of the case. Initiating management by applying general principals &

	<p>documentation of the same</p> <p>Reflection</p> <ul style="list-style-type: none"> Defining the scope by Arriving at a final diagnosis by appropriate interpretation of investigations & clinical assessment Appropriate referencing. Initial management to overcome acute state by application of general measures. Selection of Homoeopathic remedy by using repertory & Materia medica as a decision making tool Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ Summative assessment : SAQ <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Assessments	<p>12.4 Acid Base disorders</p> <p>Knowledge</p> <ul style="list-style-type: none"> Aetiopathogenesis, clinical presentation of Acid base disorders
Prescribed Texts	<ul style="list-style-type: none"> Normal values & interpretation of changes in arterial (H⁺), PaCO₂, plasma bicarbonates in acid base disturbances Aetiopathogenesis & clinical presentation of Metabolic
Domains of Competencies	<p>aci-dosis, Metabolic alkalosis, Respiratory acidosis, Respiratory alkalosis & mixed Acid Base Disorders</p> <ul style="list-style-type: none"> Principles of Management
	<p>Skills</p> <ul style="list-style-type: none"> Scope and limitations of Homoeopathy Applied materia medica Ancillary measures Clinical assessment of a case by history taking, examination of vital data, physical examination to elicit signs to arrive at provisional diagnosis Decision of acceptance or referral of case Initial management by application of general measures Indicated Homoeopathic medicine based on totality Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Defining the scope by arriving at a final diagnosis by appropriate interpretation of investigations & clinical assessment Appropriate referencing. Initial management to overcome acute state by application of general measures. Selection of Homoeopathic remedy by using repertory & Materia medica as a decision making tool

	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ • Summative assessment : SAQ <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>12.5 Disorders of Divalent ion metabolism</p>
Assessments	<p>Knowledge</p> <ul style="list-style-type: none"> • Calcium & Phosphate metabolism • Aetiopathogenesis & clinical presentation of • Hypocalcaemic Hypophosphatemia
Prescribed Texts	<ul style="list-style-type: none"> • Hypercalcaemic Hypophosphatemia • Hypomagnesaemia • Hypermagnesaemia • Standard line of treatment
Domains of Competencies	<ul style="list-style-type: none"> • Principles of Management • Applied Materia Medica
	<ul style="list-style-type: none"> • Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> • Clinical assessment of the case by history taking, physical examination & assessment of vital signs • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • General principle of management • Defining the role of Homoeopathy & arriving at the indicated medicine based on totality • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Defining the scope by arriving at a final diagnosis by appropriate interpretation of investigations & clinical assessment • Appropriate referencing. Initial management to overcome acute state by application of general measures. Selection of Homoeopathic remedy by using repertory & Materia medica as a decision making tool <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ • Summative assessment : SAQ <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>

	Hom-PG PM 27: Nutritional, Metabolic & Environmental disease 13.1 Nutritional assessment & nutritional needs Knowledge <ul style="list-style-type: none"> • Assessment of Nutritional status of patient • Understanding of Nutrient & energy requirements in patients
Assessments	Skills <ul style="list-style-type: none"> • To assess nutritional status of patient by clinical examination & history taking • Understanding daily requirement of nutrients & energy to understand deficiency and its impact on health
Prescribed Texts	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case
Domains of Competencies	<ul style="list-style-type: none"> • Role of Homoeopathy in management (curative/Palliative/Adjuvant) • Arriving at the totality of symptoms
	<ul style="list-style-type: none"> • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materiamedica as a prescription decision tool • Documentation of the same Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis after clinical examination with eliciting signs & appropriate interpretation of investigations • Give basic diet advice to patients after understanding flaws in diet • Understand impact on dietary deficiency on health • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment Refer to list attached Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism 13.2 Nutritional & Metabolic disorders Knowledge <ul style="list-style-type: none"> • Aetio-pathogenesis of Obesity & Lipoprotein disorders
Assessments	<ul style="list-style-type: none"> • Aetiopathogenesis, clinical features & complications of PEM & Malnutrition in Hospital population • Understanding role of Diet and Nutrition in this cases • Standard line of treatment • Applied materia medica • Ancillary measures

	Skills
Prescribed Texts	<ul style="list-style-type: none"> To assess nutritional status of patient by clinical examination & history taking
Domains of Competencies	<ul style="list-style-type: none"> Understanding daily requirement of nutrients & energy to understand deficiency and its impact on health Interpretation of investigations to confirm the diagnosis Role of Homoeopathy in management (curative/Palliative/Adjuvant)
	<ul style="list-style-type: none"> Arriving at the totality of symptoms Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis after clinical examination with eliciting signs & appropriate interpretation of investigations Give basic diet advice to patients after understanding flaws in diet Understand impact on dietary deficiency on health Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>13.3 Vitamins & Minerals</p> <p>Knowledge</p> <ul style="list-style-type: none"> Understanding daily requirement and role of Vitamins& Inorganic nutrients Understanding signs & symptoms of Deficiency of Vitamins & <u>inorganic nutrients</u>
Assessments	<ul style="list-style-type: none"> Standard line of treatment Principles of Management Applied materiamedica Ancillary measures <p>Skills</p> <ul style="list-style-type: none"> To assess nutritional status of patient by clinical examination & history taking
Prescribed Texts	<ul style="list-style-type: none"> Understanding daily requirement of nutrients & energy to understand deficiency and its impact on health
Domains of	<ul style="list-style-type: none"> Interpretation of investigations to confirm the diagnosis

Competencies	<ul style="list-style-type: none"> • Role of Homoeopathy in management (curative/Palliative/Adjuvant)
	<ul style="list-style-type: none"> • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis after clinical examination with eliciting signs & appropriate interpretation of investigations • Give basic diet advice to patients after understanding flaws in diet • Understand impact on dietary deficiency on health • Plan for assessment of a progress of the condition for evidence based medicine <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>13.4 Other metabolic disorders</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Aetiopathogenesis, clinical presentation,diagnosis, investigations, complications of Porphyrias& Amyloidosis • Principles of Management • Applied materiamedica • Scope and limitations of Homoeopathy
Assessments	<p>Skills</p> <ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (curative/Palliative/Adjuvant)
Prescribed Texts	<ul style="list-style-type: none"> • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool
Domains of Competencies	<p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of

	<p>investigations</p> <ul style="list-style-type: none"> • Formulate the totality; Miasmatic evolution of expression of disease use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>13.5 Environmental disorders</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Clinical presentation, diagnosis, investigations, complications of Diving illness, Hyperthermia & heart illness, Hypothermia, Drowning/ Near Drowning, High-altitude illness, Radiation exposure • Standard line of treatment • Principles of Management • Scope and limitations of Homoeopathy
Assessments	<p>Skills</p> <ul style="list-style-type: none"> • Applied materia medica • Ancillary measures • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Start basic management for acute conditions & Decision of acceptance or referral of case
Prescribed Texts	<ul style="list-style-type: none"> • Interpretation of investigations to confirm the diagnosis • Role of Homoeopathy in management (curative/Palliative/ Adjuvant)
Domains of Competencies	<ul style="list-style-type: none"> • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referencing materia medica as a prescription decision tool
	<p>Reflection</p> <ul style="list-style-type: none"> • Documentation of the same • Understanding of acute emergency & steps to be followed for basic management of acute state • Arriving at a final diagnosis by appropriate interpretation of

	<p>investigations</p> <ul style="list-style-type: none"> • Formulate the totality; use of repertory if necessary and or referencing Materia Medica to arrive at the selection of indicated remedy, potency, repetition with justification • Plan for assessment of a progress of the condition for evidence based medicine • Competency <ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ ,Case Discussion ,Bed Side Examination <ul style="list-style-type: none"> • Summative assessment : SAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>Hom-PG PM 28 Clinical genetics 14.1 The role of clinical geneticist Knowledge</p> <ul style="list-style-type: none"> • How to diagnose all types of genetic diseases, birth defects, and developmental anomalies • How to assess genetic risk • How to do genetic risk <p>14.2 The anatomy of the human genome Knowledge</p> <ul style="list-style-type: none"> • Structure of DNA, chromosome and genes
Assessments	<p>14.3 Types of genetic disease Knowledge</p> <ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical features, investigations, complications of • Chromosomal disorders • Mutations • Duplications
Prescribed Texts	<ul style="list-style-type: none"> • Polymorphism • Genetic factors in common diseases • Inheritance patterns
Domains of Competencies	<p>14.4 Common presentations of genetic disease Knowledge</p>
	<ul style="list-style-type: none"> • Risk factors, aetiopathogenesis, clinical features, investigations, complications of common presentations of genetic diseases in different systems- multisystem, respiratory, cardiovascular, renal, gastrointestinal, hepatic, metabolic, endocrine, haematological, neuromuscular, central nervous system, connective tissue, skin, eye. <p>Skills</p>

	<ul style="list-style-type: none"> • Case taking with physical examination to assess the vitals and elicit the signs to arrive at the provisional diagnosis. • Interpretation of investigations to confirm the diagnosis • Decision of acceptance or referral of case • Role of Homoeopathy in management (Curative/Palliative/Adjuvant/Preventive) • Arriving at the totality of symptoms • Remedy differentiation and final selection of remedy with appropriate use of repertory and referring materia medica as a prescription decision tool • Documentation of the same <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis by appropriate interpretation of investigations • Formulate the totality, use of repertory if necessary and or referring materia to arrive at selection of indicated remedy • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p> <p>14.5 Investigations of genetic disease</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Investigations of genetic disease <p>14.6 Genetic counselling and testing</p> <p>Knowledge</p> <ul style="list-style-type: none"> • Constructing a pedigree • Risk calculation • Information and support • Genetic testing- genetic screening, prenatal testing, diagnostic test, predictive tests. • Ethical issues in genetic testing
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ • Summative assessment : SAQ <p>Refer to list attached</p>

Prescribed Texts	KS,PC,PBL
Domains of Competencies	Knowledge & Scholarship / Patient Care / Practice Based Learning/ /
Assessments	
Prescribed Texts	
Domains of Competencies	

Learning outcomes	<p>Hom-PG PM 29: PSYCHIATRIC AND ADDICTION DISORDERS 15.1 Classification of psychiatric disorders and aetiological factors in psychiatric disorders Clinical Interview and Mental State Examination and Major Manifestations of Psychiatric illnesses</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Classification of psychiatric disorders • Etiological factors in psychiatric disorders • Major Manifestations of Psychiatric illnesses <p>Skill</p> <ul style="list-style-type: none"> • Clinical assessment of a psychiatric patient in context to
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	<p>Hahnemann classification of mental disorders.</p> <ul style="list-style-type: none"> • Use of the Primary Care Evaluation of Mental Disorders (PRIME_MD & Patient Health Questionnaire) • Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Text	
Domains of competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
	<p>15.2 Anxiety disorders, Obsessive compulsive disorder, Schizophrenia and Delusional disorders</p> <p>Affective (Mood) disorders</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Clinical presentation of • Anxiety disorders, Obsessive compulsive disorder, Schizophrenia and Delusional disorders • Affective (Mood) disorders <p>Skill</p> <ul style="list-style-type: none"> • Clinical assessment of a patient in context to Hahnemann classification of mental disorders. • Use of the Primary Care Evaluation of Mental Disorders (PRIME_MD & Patient Health Questionnaire) • Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment /

Assessments	<p>Written assessment-Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination</p> <ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Text	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation /
Domains of competencies	Communication skill/ Practice Based Learning/ / Professionalism
	<p>15.3 Somatoform Disorders , Personality Disorders,</p> <p>Knowledge of</p> <ul style="list-style-type: none"> Somatoform Disorders Behavioural Syndromes associated with Physiological Disturbances, Personality Disorders <p>Skill</p> <ul style="list-style-type: none"> Case taking, Physical examinations to arrive at provisional diagnosis and Clinical assessment of a patient in context to Hahnemann classification of mental disorders. Use of the Primary Care Evaluation of Mental Disorders (PRIME MD & Patient Health Questionnaire) Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis through clinical and laboratory assessment. Formulate the totality Plan for assessment of a progress of the condition Continuous / Programmatic assessment / Practical assessment /
Assessments	<p>Written assessment-</p> <ul style="list-style-type: none"> Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Text	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation /
Domains of competencies	Communication skill/ Practice Based Learning/ / Professionalism
	<p>15.4 Psychiatric and psychological aspects of chronic and progressive diseases</p>

	<p>Substance abuse / misuse</p> <p>Knowledge of</p> <ul style="list-style-type: none"> • Psychiatric and psychological aspects of chronic and progressive diseases • Substance abuse / misuse <p>Skill</p> <ul style="list-style-type: none"> • Clinical assessment of a patient in context to Hahnemann classification of mental disorders. • Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination
Assessments	<ul style="list-style-type: none"> • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p>
Prescribed Text	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Domains of competencies	<p>15.5 Legal aspects of psychiatry</p> <p>Knowledge of</p>
	<ul style="list-style-type: none"> • Legal aspects of psychiatry <p>Skill</p> <ul style="list-style-type: none"> • Assessment of the patient for its acceptance or referral <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment- Formative assessment : Assignment ,MCQ • Summative assessment : SAQ
Assessments	Refer to list attached
Prescribed	Knowledge & Scholarship / Patient Care /Practice Based Learning

Text	
Domains of competencies	Hom-PG PM 30: GERIATRIC MEDICINE-FRAIL OLDER PEOPLE 16.1 Normal aging and concept of "Homeostenosis" and Major manifestations in old people
	Knowledge of <ul style="list-style-type: none"> • Normal aging and concept of "Homeostenosis" • Major manifestations in old people Skill <ul style="list-style-type: none"> • History and clinical examination of geriatric cases • Role of Homoeopathy in management- curative/ palliative /adjuvant Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ • Summative assessment : SAQ
Assessments	Refer to list attached
Prescribed Text	Knowledge & Scholarship / Patient Care /Practice Based Learning 16.2 Frailty Syndrome, Major manifestations of disease in frail older people
Domains of competencies	Clinical assessment, investigations and Rehabilitation Knowledge of <ul style="list-style-type: none"> • Frailty Syndrome ,Clinical assessment , investigations andf Rehabilitation Skill <ul style="list-style-type: none"> • History and clinical examination of geriatric cases • Role of Homoeopathy in management- curative/ palliative /adjuvant Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ • Summative assessment : SAQ
Assessments	

	Refer to list attached
Prescribed Text	Knowledge & Scholarship / Patient Care /Practice Based Learning
Domains of competencies	Hom-PG PM31: ONCOLOGY 17.1 Approach to a patient with cancer Diagnosis, clinical assessment, investigations, and staging Principals of Treatment Case Study Oncological emergencies Knowledge of <ul style="list-style-type: none"> • Approach to a patient with cancer • Diagnosis, clinical assessment, investigations, and staging • Principals of Treatment • Case Study • Oncological emergencies Skill <ul style="list-style-type: none"> • History and clinical examination of oncology cases. • Role of Homoeopathy in management- curative/ palliative /adjuvant Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, OSCE,Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ,Problem Based Learning
Assessments	Assessment Refer to list attached
Prescribed Text	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism Hom-PG PM 32: WOMEN'S DISEASES 18.1 Infertility Endometriosis Pelvic Inflammatory Diseases Disorders of Menstrual regulation
Domains of competencies	Health issues in Menopausal women Knowledge of

	<ul style="list-style-type: none"> • Infertility • Endometriosis • Pelvic Inflammatory Diseases • Disorders of Menstrual regulation • Health issues in Menopausal women <p>Skill</p> <ul style="list-style-type: none"> • History and clinical examination of gynaecology cases. • Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment -Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination • Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>18.2 Malignancies (Gyneacological Cancers) Polycystic Ovarian Syndrome (PCOS.)</p>
Domains of Competencies	<p>Medical diseases in pregnancy Knowledge of</p> <ul style="list-style-type: none"> • Malignancies (Gyneacological Cancers) • Polycystic Ovarian Syndrome (PCOS.)
	<p>Skill</p> <ul style="list-style-type: none"> • Medical diseases in pregnancy • History and clinical examination of cases. • Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment -Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination

Assessments	<ul style="list-style-type: none"> Summative assessment : SAQ, LAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>
Prescribed Texts	<p>Hom-PG PM 33: LIFE STYLE ILLNESSES</p> <p>19.1 Concept of Life Style Illnesses</p>
Domains of Competencies	<p>Role of the individual and environment in their genesis and maintenance</p> <p>Homoeopathic perspective of Life style illnesses</p> <p>Comprehensive Homoeopathic assessment and management</p> <p>Role of Education, Family education and ancillary measures in restoring health</p>
	<p>Knowledge of</p> <ul style="list-style-type: none"> Concept of Life Style Illnesses Role of the individual and environment in their genesis and maintenance Homoeopathic perspective of Life style illnesses Comprehensive Homoeopathic assessment and management Role of Education, Family education and ancillary measures in restoring health <p>Skill</p> <ul style="list-style-type: none"> History and clinical examination of cases of life-style diseases Role of Homoeopathy in management- curative/ palliative /adjuvant <p>Reflection</p> <ul style="list-style-type: none"> Arriving at a final diagnosis through clinical and laboratory assessment. Formulate the totality Plan for assessment of a progress of the condition Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, OSCE, Case Discussion ,Bed Side Examination Summative assessment : SAQ, LAQ, Problem Based Learning Assessment
Assessments	<p>Refer to list attached</p> <p>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</p>

	Hom-PG PM 34: CRITICAL CARE
Prescribed Texts	20.1 Provision of critical care
Domains of Competencies	General principles of critical care management and monitoring Major manifestations of critical illness- Circulatory failure. Respiratory failure, Renal failure, Neurological failure (Coma), Hepatic failure, Sepsis, Disseminated intravascular coagulation
	Scoring system in critical care Knowledge of <ul style="list-style-type: none"> • Provision of critical care • General principles of critical care management and monitoring • Major manifestations of critical illness- Circulatory failure. Respiratory failure, Renal failure, Neurological failure (Coma), Hepatic failure, Sepsis, Disseminated intravascular coagulation Scoring system in critical care Skill <ul style="list-style-type: none"> • Clinical assessment of critically ill patient using SOFA/ APACHE II scoring system. • Preliminary demonstration about: • Insertion of arterial lines/ central venous line • Arterial blood gas analysis • Pulse oximeter • Endotracheal intubation • Mechanical ventilation • High flow oxygen delivery system • Clinical assessment of a comatose patient. • Interpretation of investigations to confirm the diagnosis. • Role of Homoeopathy in management- curative/ palliative /adjuvant Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Define the scope and limitations of homoeopathy • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ, Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment Refer to list attached
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism

	Hom-PG PM 35: PALLIATIVE CARE AND PAIN MANAGEMENT
Prescribed Texts	21.1 Palliative care Symptoms control, rehabilitation, continuity of care, terminal care General principles of pain
Domains of Competencies	Mechanisms, psychological aspects of chronic pain and chronic illness Assessment and measurement of pain Treatment of pain Case study with approach
	Knowledge of <ul style="list-style-type: none"> • Palliative care Symptoms control, rehabilitation, continuity of care, terminal care • General principles of pain • Mechanisms, psychological aspects of chronic pain and chronic illness • Assessment and measurement of pain • Treatment of pain • Case study with approach Skill <ul style="list-style-type: none"> • Role of Homoeopathy in management of palliative care with respect to Symptoms control, rehabilitation, continuity of care, terminal care . Reflection <ul style="list-style-type: none"> • Arriving at a final diagnosis through clinical and laboratory assessment. • Formulate the totality • Plan for assessment of a progress of the condition • Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ, Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment Refer to list attached
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism Hom-PG PM 36: EMERGENCY MEDICINE
Prescribed Texts	22.1 Initial Pre-Hospital Care Patient assessment Medical emergencies of cardio- circulatory disorders, Respiratory disorders, Neurological disorders, abdominal emergencies, Orthopedic
Domains of	

Competencies	emergencies and Nephrology emergencies Knowledge of <ul style="list-style-type: none"> Initial Pre-Hospital Care
	Skill <ul style="list-style-type: none"> Patient assessment Medical emergencies of cardio- circulatory disorders, Respiratory disorders, Neurological disorders, Abdominal emergencies, orthopedic emergencies and Nephrology emergencies Clinical assessment of critically ill patient using SOFA/ APACHE II scoring system. Preliminary demonstration about: <ul style="list-style-type: none"> Insertion of arterial lines/ central venous line Arterial blood gas analysis Pulse oximeter Endotracheal intubation Mechanical ventilation High flow oxygen delivery system Clinical assessment of a comatose patient. Interpretation of investigations to confirm the diagnosis. Role of Homoeopathy in management- curative/ palliative /adjuvant Reflection <ul style="list-style-type: none"> Arriving at a final diagnosis through clinical and laboratory assessment. Formulate the totality Plan for assessment of a progress of the condition Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ, Bed Side Examination Summative assessment : SAQ, Problem Based Learning Assessment Refer to list attached Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Assessments	22.2 Basic Knowledge of Trauma Care Knowledge of <ul style="list-style-type: none"> Basic Knowledge of Trauma Care
Prescribed Texts	<ul style="list-style-type: none"> To acquire skills for its appropriate use of necessary equipments like - Nebulizer, Suction apparatus, Oxygen cylinder with regulator, Fingertip pulse oxymeter
	Laryngoscope, Airways, Ambu bag, ECG machine, IV Canulla

Domains of Competencies	<p>16-21G butterfly Syringes-different sizes 3cc, 50cc, Glucometer, Defibrillator</p> <ul style="list-style-type: none"> • Essential clinical skills for Therapeutics and Diagnostics procedures • Venous and arterial puncture, open airway with or without airway devices. Ventilate a patient, performance of Cardio-pulmonary resuscitation (CPR one or two supporters). Interpretation of arterial blood gases, surgical suture of injuries, apply cast to extremity fractures • Essential emergency medications- To know the Pharmacodynamics, Pharmacokinetics, therapeutic actions and route of administration- Adrenaline • 1:1000 vials. Chlorpheniramine IV vials, Promethazine IV vials, Salbutamol respiratory solution. Prednisolone tablets, IV hydrocortisone vials, Rectal diazepam preparation. Aspirin tablets, Morphine tablets. IV furosemide vials Diclofenac sodium suppository. Hyoscine butylbromide vials, IV fluids-N Saline, 5% dextrose, 50% dextrose
\	<p>Skill</p> <ul style="list-style-type: none"> • Appropriate use of necessary equipment like - Nebulizer, Suction apparatus, Oxygen cylinder with regulator, Fingertip pulse oxymeter Laryngoscope, Airways, Ambu bag, ECG machine, IV Canulla 16-21G butterfly Syringes-different sizes 3cc, 50cc, Glucometer, Defibrillator. • Venous and arterial puncture, open airway with or without airway devices. Ventilate a patient, performance of Cardio-pulmonary resuscitation (CPR one or two supporters). Interpretation of arterial blood gases, surgical suture of injuries, apply cast to extremity fractures. • Defining the scope and limitations of homoeopathy. • Continuous / Programmatic assessment / Practical assessment / Written assessment-Formative assessment : Assignment ,MCQ, Bed Side Examination • Summative assessment : SAQ, Problem Based Learning Assessment <p>Refer to list attached</p> <p><u>Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism</u></p>
Assessments	<p>Hom-PG PM 37: POISONING</p>
Prescribed Texts	<p>23.1 General approach to the poisoned patient Poisoning by specific pharmaceutical agents Knowledge of</p>

Domains of Competencies	<ul style="list-style-type: none"> General approach to the poisoned patient Poisoning by specific pharmaceutical agents Skill
	<ul style="list-style-type: none"> History taking and clinical assessment of poisoned patient Role of Homoeopathy in management of poisoned patient Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ, Bed Side Examination Summative assessment : SAQ, Problem Based Learning Assessment Refer to list attached
Assessments	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism 23.2 Chemicals and pesticides Envenomation
Prescribed Texts	Environmental poisoning and illnesses Knowledge of
	<ul style="list-style-type: none"> Clinical features and management of
Domains of Competencies	<ul style="list-style-type: none"> Chemicals and pesticides Envenomation Environmental poisoning and illnesses
	Skill <ul style="list-style-type: none"> History taking and clinical assessment of poisoned patient Role of Homoeopathy in management of poisoned patient Continuous / Programmatic assessment / Practical assessment / Written assessment Formative assessment : Assignment ,MCQ, Bed Side Examination Summative assessment : SAQ, Problem Based Learning Assessment Refer to list attached Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Communication skill/ Practice Based Learning/ / Professionalism
Assessments	Hom-PG PM 38: NATIONAL HEALTH PROGRAMMES Sub – competencies 24.1 Current National health Programmes - Concept/ Objectives/ Implementations/ Ground realities/ Impact
Prescribed	National Programs under NRHM

Texts	Contribution of Homoeopathy in National Health Programmers
Domains of Competencies	Knowledge of <ul style="list-style-type: none"> Current National health Programmes - Concept/ Objectives/ Implementations/ Ground realities/ Impact National Programs under NRHM Contribution of Homoeopathy in National Health Programmes Skill <ul style="list-style-type: none"> Get versed with implementation of various National Health Programmes. Reflection <ul style="list-style-type: none"> Role of homoeopathy in implementation of various National Health Program through active participation at community level Documentation of evidences
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment / Practical assessment / Written assessment - Formative assessment : Assignment ,MCQ Summative assessment : SAQ
Prescribed Texts	Refer to list attached
Domains of Competencies	Knowledge & Scholarship

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-II	1st Term Test: During twenty fourth month of training 2nd Term Test: During thirtieth month of training	During thirty sixth month of training

VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marksrequired to pass shall be as follows:

Subjects	Theory		Practical or clinical exams including Viva-Voce and dissertation	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
Fundamentals of practice of medicine paper I	100	50	200* (160 + 40) (Summative Assessment 160	100* (80 + 20) (Summative Assessment 80

			Marks) (Internal Assessment 40 Marks)	Marks) (Internal Assessment 20 Marks)
Fundamentals of practice of medicine paper II	100	50		

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part II – Paper I. Course Numbers

List the Courses

Part II: (includes: Advance learning in Practice of Medicine (ALPM)

Course-II

- **Hom-PG PM 15: Cardiovascular Disease**
 - 1.1 Disorders of heart rate, rhythm and conduction
 - 1.2 Atherosclerotic vascular disease
 - 1.3 Coronary heart diseases
 - 1.4 Vascular diseases
 - 1.5 Hypertension
 - 1.6 Diseases of heart valves
 - 1.7 Congenital heart diseases
 - 1.8 Diseases of myocardium
 - 1.9 Diseases of pericardium
 - 1.10 Heart failure
 - 1.11 Acute circulatory failure
 - 1.12 Cardiac arrest and sudden cardiac death

- **Hom-PG PM 16 : Respiratory System**
 - 2.1. Diseases of nasopharynx, larynx and trachea
 - 2.2. Diseases of pleura, diaphragm, and chest wall
 - 2.3. Obstructive Pulmonary diseases
 - 2.4. Sleep disordered breathing
 - 2.5. Respiratory Failure
 - 2.6. Infections of the Respiratory system
 - 2.7. Interstitial and Infiltrative pulmonary diseases
 - 2.8. Pulmonary Vascular diseases
 - 2.9. Tumours of bronchus and lung

- **Hom-PG PM 17: Kidney and genitourinary diseases**
 - 3.1 Congenital abnormalities of kidney and urinary system
 - 3.2 Glomerular diseases
 - 3.3 Tubulo-interstitial diseases
 - 3.4 Infections of kidney and urinary tract
 - 3.5 Urinary tract calculi and nephrocalcinosis
 - 3.6 Renal involvement in systemic diseases
 - 3.7 Renal vascular diseases
 - 3.8 Tumours of kidney and genitourinary tract

- **Hom-PG PM 18: Endocrine and Metabolic Disease**
 - 4.1 Diseases of Hypothalamus and Pituitary gland
 - 4.2 Diseases of Thyroid gland
 - 4.3 Diseases of Parathyroid gland
 - 4.4 Diseases of Adrenal gland
 - 4.5 Diseases of Endocrine pancreas
 - 4.6 Diabetes Mellites

- **Hom-PG PM 19: Alimentary Tract and Pancreatic Diseases**
 - 5.1 Diseases of mouth and salivary glands
 - 5.2 Diseases of Oesophagus, Stomach and Duodenum
 - 5.3 Diseases of Small Intestine
 - 5.4 Diseases of Pancreas
 - 5.5 Irritable Bowel Syndrome
 - 5.6 Inflammatory Bowel Disease
 - 5.7 Disorders of Colon and Anorectum
 - 5.8 Diseases of Peritoneal cavity
 - 5.9 Diseases of Gut Injury

- **Hom-PG PM 20: Liver and Biliary Tract disease**
 - 6.1 Acute fulminant hepatic failure
 - 6.2 Liver cirrhosis and Chronic liver failure
 - 6.3 Portal Hypertension
 - 6.4 Hepatic encephalopathy
 - 6.5 Hepatorenal Failure
 - 6.6 Specific causes of Parenchymal liver disease
 - 6.7 Tumours of liver
 - 6.8 Miscellaneous liver diseases

6.9 Gall bladder and other Biliary diseases

- **Hom-PG PM 21: Blood Disorders**

- 7.1 Leukopenia, leucocytosis, thrombocytopenia, thrombocytosis, pancytopenia
- 7.2 Anaemia
- 7.3 Blood products and transfusion
- 7.4 Haematological malignancies
- 7.5 Myeloproliferative disorders
- 7.6 Bleeding disorders
- 7.7 Venous thrombosis

- **Hom-PG PM 22: Musculoskeletal Diseases and Disorders of Bone Metabolism**

- 8.1 Degenerative joint diseases
- 8.2 Inflammatory joint diseases
- 8.3 Fibromyalgia
- 8.4 Diseases of the Bone
- 8.5 Systemic Connective tissue diseases
- 8.6 Musculoskeletal manifestations of disease in other systems
- 8.7 Miscellaneous musculoskeletal conditions

- **Hom-PG PM 23: Neurological Disease**

- 9.1 Cerebro- vascular diseases
- 9.2 Inflammatory diseases of CNS
- 9.3 Degenerative diseases
- 9.4 Diseases of Nerves
- 9.5 Disorders of Muscles
- 9.5 Disorders of Spine and Spinal cord
- 9.6 Infections of Nervous System
- 9.7 Intracranial mass lesions and Raised intracranial pressure

- **Hom-PG PM 24: Skin Disease (Dermatology)**

- 10.1 Skin manifestations in Systemic Disease
- 10.2 Eczema
- 10.3 Urticaria
- 10.4 Psoriasis and other Erythematous Scaly Eruptions
- 10.5 Disorders of the Pilosebaceous Unit
- 10.6 Some Common Skin Infections and Infestations
- 10.7 Pressure sores
- 10.8 Skin Tumours
- 10.9 Disorders of Pigmentations
- 10.10 Disorders of the Nails

Part II – Paper II. Course Numbers

List the Courses

Part II: (includes: Advance learning in Practice of Medicine (ALPM))

Course 3:

- **Hom-PG PM 25 :Infection and immune failure**

- 11.1 Patterns of infection
- 11.2 Microorganism - Host interaction

- 11.3 Vaccine development
- 11.4 The febrile patient
- 11.5 Generalised infections
- 11.6 Rashes and infection
- 11.7 Food poisoning and gastroenteritis
- 11.8 Tropical and International health
- 11.9 Sexually transmitted infections
- 11.10 Human immunodeficiency virus infection and Acquired immunodeficiency syndrome
- 11.11 The management of infection

- **Hom-PG PM 26: Water electrolyte & Acid – Base balance**

- 12.1 Physiology of Water & Electrolyte
- 12.2 Disorders of Water metabolism: Dysnatraemias
- 12.3 Disorders of Potassium Metabolism: Dyskalaemias
- 12.4 Acid Base disorders
- 12.5 Disorders of Divalent ion metabolism

- **Hom-PG PM 27: Nutritional, Metabolic & Environmental disease**

- 13.1 Nutritional assessment & nutritional needs
- 13.2 Nutritional & Metabolic disorders
- 13.3 Vitamins & Minerals
- 13.4 Other metabolic disorders
- 13.5 Environmental disorders

- **Hom-PG PM 28 Clinical genetics**

- 14.1 The role of clinical geneticist
- 14.2 The anatomy of the human genome
- 14.3 Types of genetic disease
- 14.4 Common presentations of genetic disease
- 14.5 Investigations of genetic disease
- 14.6 Genetic counselling and testing

- **Hom-PG PM 29: PSYCHIATRIC AND ADDICTION DISORDERS**

- 15.1 Classification of psychiatric disorders and aetiological factors in psychiatric disorders
- 15.2 Anxiety disorders, Obsessive compulsive disorder, Schizophrenia and Delusional disorders Affective (Mood) disorders
- 15.3 Somatoform Disorders , Personality Disorders,
- 15.4 Psychiatric and psychological aspects of chronic and progressive diseases Substance abuse / misuse
- 15.5 Legal aspects of psychiatry

- **Hom-PG PM 30: GERIATRIC MEDICINE-FRAIL OLDER PEOPLE**

- 16.1 Normal aging and concept of "Homeostenosis" and Major manifestations in old people
- 16.2 Frailty Syndrome, Major manifestations of disease in frail older people Clinical assessment, investigations and Rehabilitation

- **Hom-PG PM31: ONCOLOGY**
 - 17.1 Approach to a patient with cancer Diagnosis, clinical assessment, investigations, and staging Principles of Treatment
- **Hom-PG PM 32: WOMEN'S DISEASES**
 - 18.1 Infertility
 - Endometriosis
 - Pelvic Inflammatory Diseases
 - Disorders of Menstrual regulation
 - Health issues in Menopausal women
 - 18.2 Malignancies (Gynaecological Cancers)
 - Polycystic Ovarian Syndrome (PCOS.)
 - Medical diseases in pregnancy
- **Hom-PG PM 33: LIFE STYLE ILLNESSES**
 - 19.1 Concept of Life Style Illnesses
 - Role of the individual and environment in their genesis and maintenance
 - Homoeopathic perspective of Life style illnesses
 - Comprehensive Homoeopathic assessment and management
 - Role of Education, Family education and ancillary measures in restoring health
- **Hom-PG PM 34: CRITICAL CARE**
 - 20.1 Provision of critical care
 - General principles of critical care management and monitoring
 - Major manifestations of critical illness- Circulatory failure. Respiratory failure, Renal failure, Neurological failure (Coma), Hepatic failure, Sepsis, Disseminated intravascular coagulation
 - Scoring system in critical care
- **Hom-PG PM 35: PALLIATIVE CARE AND PAIN MANAGEMENT**
 - 21.1 Palliative care Symptoms control, rehabilitation, continuity of care, terminal care
- **Hom-PG PM 36: EMERGENCY MEDICINE**
 - 22.1 Initial Pre-Hospital Care
 - Patient assessment
 - Medical emergencies of cardio- circulatory disorders, Respiratory disorders, Neurological disorders, abdominal emergencies, Orthopedic emergencies and Nephrology emergencies
 - 22.2 Basic Knowledge of Trauma Care
- **Hom-PG PM 37: POISONING**
 - 23.1 General approach to the poisoned patient
 - Poisoning by specific pharmaceutical agents
 - 23.2 Chemicals and pesticides
 - Envenomation
 - Environmental poisoning and illnesses
- **Hom-PG PM 38: NATIONAL HEALTH PROGRAMMES**
 - 24.1 Current National health Programmes-Concept/Objectives/Implementations/ Groundrealities/ Impact National Programs under NRHM Contribution of Homoeopathy in National Health Programmes

VII (2b). Question Paper Layout

Theory Question Paper layout **Part II Paper I Fundamentals of Practice of Medicines**

Q No.	Type of Question	Content	Marks
1	Application Based	Case based question on any clinical condition of Cardiovascular system and its homoeopathic approach for management, scope , limitations and applied Materia Medica.	20
2	LAQ	Respiratory diseases	10
3	LAQ	Kidney and Genitourinary diseases and Endocrine and Metabolic diseases	10
4	LAQ	Neurological diseases	10
5	LAQ	Blood disorders	10
6	SAQ	Musculoskeletal diseases and disorders of bone metabolism and skin diseases	05
7	SAQ	Musculoskeletal diseases and disorders of bone metabolism and skin diseases	05
8	SAQ	Alimentary Tract and Pancreatic diseases	05
9	SAQ	liver and biliary tract diseases	05
10	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Alimentary Tract	05
11	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of kidney and genitourinary diseases	05
12	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Blood disorder	05
13	SAQ	Homoeopathic Therapeutics / Applied Materia Medica of Skin diseases	05

Theory Question Paper layout **Part II Paper II Fundamentals of Practice of Medicine**

Q No.	Type of Question	Content	Marks
1	Application Based	Case based question on any clinical condition of Infection and Immunology and its homoeopathic approach for management, scope , limitations and applied Materia	20

		Medica.	
2	LAQ	Homoeopathic Therapeutics Approach and / or Applied Materia Medica – Medical Psychiatry	10
3	LAQ	Homoeopathic Therapeutics Approach and / or Applied Materia Medica and women's diseases and lifestyle diseases	10
4	LAQ	a) Infection b) Infection	10
5	LAQ	a) Medical Psychiatry b) Genetic medicine	10
6	SAQ	Water, Electrolyte and Acid – Based Imbalance	05
7	SAQ	Nutritional, Metabolic and Environmental Diseases	05
8	SAQ	Clinical Genetics	05
9	SAQ	Oncology	05
10	SAQ	Women's diseases and Lifestyle diseases	05
11	SAQ	Critical Care and palliative care and pain management	05
12	SAQ	Emergency medicine and Poisoning	05
13	SAQ	National Health Programme	05

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks

Total	100 Marks
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VIII. List of Reference Books (As per APA Format).

8. Reference books (Recommended Reading)

Clinical Medicine

(TextBooks-Latest Edition)

- Kamath, S.A, 1969, API Textbook of Medicine Jaypee Bro, New Delhi, 12th Ed.
- Loscalzo, J.Kasper,D.L.,Longo,D.L.,Fauci,A.S,Hauser,S.L.& Jameson,J.L. ,1958, Harrison's, Principles & Practice of Medicine Mc Graw Hill, New York, 21st Ed.
- Ralston, S. H, Penman,I.D, Strachan,M.W.J & Hobson,R.P. ,1952, Davidson's, Principles and Practice of Medicine, Elsevier Pub, London, 24th Ed.
- Weatherall, D.J,Ledingham,J.G.G., & Warrell,D.A Oxford Text book of Medicine ,1983,Oxford Medical Publication, New York 3rd Ed.
- Wyngaarden, J, B. & Smith, L.H.Cecil Text Book of Medicine,1985,W.B.Saunders Com, Philadelphia.17th Ed.

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- Adams,R,D & Victor,M,1993,Principles of Neurology, McGraw Hill, New York,5th Ed.
- Bahr, P.E.C & Bell, D.R, 1987, Manson's Tropical Diseases, ELBS Pub, London, 19th Ed.
- Behrman,R.E & Kliegman,R.M,1992,Nelson Textbook of Pediatrics,W.B.Saunders Company,Philadelphia,14th Ed.
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- Firesteing,G.S,Gabriel,S.E,O'Dell,J.R,Budd,R.C & McInness,I.B,2013,Kelley's Textbooks of Rheumatology,Elesvier,9th Ed.
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- Melmed,S,Larsen,P.R,Polonsky,K.S & Kraneberg,2015,Williams Textbook of Endocrinology, Elsevier.
- Paul,V K & Bagga,A,2019,Ghai Essential Pediatrics,CBS Publishers & Distributors Pvt Ltd,New Delhi,9th Ed.
- Schlant,R.C.& Alexander, R.W.,1994,The Heart Arteries and Veins,Mc Graw Hill, New York,7th Ed.
- Seaton,A,Seaton,D & Leitch,A G,1969,Crofton And Douglas's Respiratory Diseases, Oxford University Press,Bombay,4th Ed.
- Sherlock,S,1963,Diseases of the Liver and Biliary System, Blackwell Scientific Publications,London,8th Ed.
- Singh,M,1992, Pediatric Clinical Methods,Sagar Publications,New Delhi.

- Sleisenger, M.H & Fordtran, J.S, 1993, Gastrointestinal Disease, W.B.Saunders Company, Philadelphia, 5th Ed.
- Vakil, R J & Udawadia F.E, Diagnosis And Management of Medical Emergencies, 1975, Oxford University Press, London, 3rd Ed.
- Walton, J.N, 1962, Brain's Diseases of the Nervous System, Oxford University Press, Bombay, 8th Ed.
- Wanger, G.S, 1994, Marriott's Practical Electrocardiography, B.I. Waverly, PVT LTD, New Delhi, 9th Ed.
- Williams, M.A & Snyder, L.M, 2011, Wallach's Interpretation of Diagnostic Tests, Wolters Kluwer, New Delhi, 9th Ed.
- Wyngaarden, J, B. & Smith, L.H. Cecil, 1985, Text Book of Medicine, W.B.Saunders Com, Philadelphia. 17th Ed.

Clinical Method Books

- Bates, Barbara, Bickley, L.S & Hoekelman, R.A, 1995, Physical Examination and History Taking, J.B. Lippincott Company, Philadelphia, 6th Ed.
- Bickerstaff, E.R & Spillane, J.A, 1991, Neurological examination in clinical practice, Oxford University Press, Madras, 5th Ed.
- Blackkow, R.S, 1983, Macbride's Clinical Signs and symptoms, Lippincott, 6th Ed.
- Glynn, M & Drake, W.M, Hutchison's Clinical Methods, 1897, Elsevier. 25th Ed.
- Mehta's P.J, Mehta, S.P & Joshi S, Practical Medicine, 1979, The National Book Depot, Mumbai, 22nd Ed.
- Munro, J & Edward, J, 1996, Macleod's Clinical Examination, Churchill Living Stone, Edinburgh, 9th Ed.
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- Vakil, R.J & Golwalla, A.F. Physical Diagnosis, 2010, MPP, Mumbai. 14th Ed.

List of Recommended reference books for Homoeopathic Philosophy

- Allen, J.H, 1984, The Chronic Miasms: Psora And Pseudo-Psora, Jain Publishing, Vol 1 & Vol 2 New Delhi.
- Boger, C.M, 1964, Studies in The Philosophy Of Healing, Word Homoeopathic Links, New Delhi, 2nd Ed.
- Close, S, 2005, The Genius of Homoeopathy Lectures And Essays on Homoeopathic Philosophy With Word Index, B.Jain Publishers Pvt.Ltd, USA, 2nd Ed.
- Dhawale, M.L, 1994, Principles & Practice of Homoeopathy: Homoeopathic Philosophy & Repertorization, B.Jain Publishers, New Delhi.
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- Singh, Subhash, 2003, S.Hahnemann's Organon of Medicine : A Study in its History and Evolution, Homoeopathic Publications, West Bengal.
- Speight, P., 1989, A Comparison of the Chronic Miasms, B Jain Pub, New Delhi.

List of Recommended reference books for Homoeopathic Materia Medica

- Allen, T.F, 1990, Handbook Of Materia Medica And Homoeopathic Therapeutics, B.Jain Publishers, New Delhi.
- Allen H.C, 2005, Keynotes Rearranged And Classified With Leading Remedies of the Materia Medica and Bowel Nosodes Including Repertorial Index, B.Jain Publishers, New Delhi, 10th Ed.
- Allen H.C, 1981, The Materia Medica of the Nosodes with Provings of the X-RAY, Jain Publishing, New Delhi.
- Allen, T.F, 1985, The Encyclopaedia of Pure Materia Medica, Vol 1 to Vol 12, B.Jain Publishers, New Delhi.
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- Phatak, S.R, 1999, Materia Medica of Homoeopathic Medicines, B.Jain Publishers, USA, 2nd Ed.
- Tyler, M.L, 1992, Homoeopathic Drug Pictures, B.Jain Publishers, New Delhi.
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List of Recommended reference books for Homoeopathic Repertory

- Barthel, H, Wilhemsfeld & Heidelberg, 1984, Synthetic Repertory: Psychic and General Symptoms of the Homoeopathic Materia Medica vol 1 & 2, Indian Books & Periodicals Syndicate, New Delhi, 2nd Ed.
- Boger, C.M, 2018, Boger Boenninghausen's Characteristics & Repertory with corrected & Abbreviations & Word Index, B.Jain Publishers, USA.
- Kent, J.T, 2018, Repertory of the Homoeopathic Materia Medica, B.Jain Publishers, USA, 6th Ed.
- Murphy, Robin, 2010, Homoeopathic Medical Repertory, B.Jain Publishers, USA, 3rd Ed.

- Phatak, S.R. 2005, A Concise Repertory of Homoeopathic Medicines: Alphabetically Arranged, B.Jain Publishers, USA, 4th Ed.
- Schroyens, F., 1994, Synthesis Repertorium Homoeopathicum Syntheticum: The Source Repertory, B.Jain Publishers, USA, and 9.1th Ed
- Zandorvoot, R., 1994, Complete Repertory, Inst for Research in Homoeopathic Information Symptomatology.

Recommended Journal Reading

- Indian Journal of Research in Homoeopathy
- Homoeopathic Link
- New Homoeopath
- International Journal of Homoeopathic Science
- Journal of Integrated standardized homoeopathy
- The Homoeopathic Heritage
- National Journal of Homoeopathy
- Indian Journal of Medical Ethics
- Indian Journal of Medical Sciences
- Indian Journal of Genetics and Molecular Research
- Journal Of Homoeopathy Of National Institute of Homoeopathy

PART I PAPER 2

I. Title of the fundamental course, and its abbreviation: Fundamentals of Homoeopathy in Practice of Medicine HOM-PG-FHPOM

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Practice of Medicine.
- (ii) Fundamentals of Homoeopathy in Practice of Medicine.
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Fundamentals of Practice of Medicine .Paper 1.
- (ii) Fundamentals of Homoeopathy in Practice of Medicines. Paper 2.

III . Brief description of the course and its relevance in homeopathy post-graduate Course - (HOM-PG-FHPOM) Paper-2

The practice of Homoeopathy is based on the tenets of Homoeopathic Philosophy. This premise sharply differentiates it from the practice of Medicine in the allopathic stream where management is based on scientific evidence bereft of any underlying philosophical base. The homoeopathic practitioner has to undertake the task of not only acquiring the clinical base but applying insights born out of a study of principles of Homoeopathic philosophy and their application through Repertory and Materia Medica and evolving the therapeutic approach. Thus, the trilogy of Organon, Repertory and

Materia Medica conjoint with Clinical Medicine allows the precise practice of Homoeopathic science. We need to evolve an integrated course.

Study of the Fundamentals of Homoeopathy should thus allow the postgraduate student to utilize the basic understanding of Health, Disease, Recovery, Cure and Palliation as seen from the perspective of Homoeopathic Philosophy and apply the operational understanding of Materia Medica and Repertory in his daily clinical work to produce evidence-based results. Simultaneously, he works in the area of preventive and community health where he utilizes the principles of Organon to extend the reach of the physician in preserving health and preventing disease.

IV. Program Objectives. (Entrust able Professional Activities – EPAs)- Same as per Paper One

PART I Paper 2:

V. Courses and Course Objectives

1. Hom-PG-FHPOM-01 - Hahnemannian concept of Man , Health and Disease.
2. Hom-PG-FHPOM-02 - Concept of Dynamism, Recovery and Cure and Obstacles to Cure
3. Hom-PG-FHPOM -03 - Concept of Artificial Disease and Portrait of Disease
4. Hom-PG-FHPOM-04 - Concept of Unprejudiced observation and Case taking
5. Hom-PG-FHPOM-05 - Concept of Symptomatology
6. Hom-PG-FHPOM-06 - Concept of Susceptibility and Acute and Chronic Disease
7. Hom-PG-FHPOM-07 - Concept of Suppression, Miasms and vaccinations in Medicine
8. Hom-PG-FHPOM-08 - Concept of Totality
9. Hom-PG-FHPOM-09 - Concept of Similar and Simillimum
10. Hom-PG-FHPOM-10 - Concept of Therapeutic management

At the end of studying the course the postgraduate student of MD (Clinical Medicine) should possess the following competencies and thus should be able to–

1. Demonstrate how Aphorisms 1-6 of the Organon of Medicine provide a comprehensive base for the functioning of a Homoeopathic physician in Clinical medicine
2. Apply the knowledge of HMM, Organon & Homoeopathic Philosophy and Repertory in case taking in given patient.

Carry out reportorial analysis, remedy selection and case management.

3. Identify the conceptual basis of the travel of the patient from Health to Disease in the Bio-psycho-socio-spiritual environment and its application in practice.
4. Apply the knowledge in the management of illness and preservation of health of patient.
5. Display case taking skills for knowing the illness and the person through inter-relationship of man and environment to determine what causes and maintains the

- illness and its application in preventive and promotive practices.
6. Illustrate evidence-based approach to practice Homoeopathy in clinical medicine
 7. Document the case record in accordance with Principles of Homoeopath enunciated in the Organon.
 8. Identify the characteristics in acute and chronic disease and the significance of these in their management
 9. Explain and assess the role played by the disordered vital force in altering the quantitative and qualitative aspects of susceptibility
 10. Identify the influence of miasmatic forces in affecting disease expressions, course and outcome.
 11. Demonstrate the method of processing clinical data utilizing the appropriate principles to arrive at a Hahnemannian totality
 12. Identify the acute phase, chronic and Inter current totalities in a given case
 13. Demonstrate the use of the appropriate repertorial and non-repertorial methods to arrive at the similimum.
 14. Validate the correspondence using the source books and commentaries of Materia Medica.
 15. Comply with the principles of homoeopathic management and use of remedial forces appropriately with respect to time of administration, potency and repetition.
 16. Choose the use of ancillary measures, diet and patient education, etc. useful to restore the patient to health.

Course Content

(I) HOM-PG-FHPOM-01

Hahnemannian concept of Man, Health and Disease

- Concept of Health, disease and causation.
- Concept of health by WHO
- Hahnemannian concept of man and its further extension by Kent, Boenninghausen and Boger and its influence on their writing in repertory and HMM.(REP AND HMM)
- Evolution of disease: Predisposition-disposition-diathesis-disease
- Philosophical basis and the Construction of the three original repertories (Kent, TPB, BBCR) representation of above concepts in the repertories.
- Science and philosophy of HMM

(II) HOM-PG-FHPOM-02

Concept of Dynamism, Recovery and Cure and Obstacles to Cure

- Concept of vital force in maintaining health and in genesis of disease
- Concepts of recovery and cure and the essential difference between the two. (ORG)
- Concept of pseudo chronic diseases. (ORG)
- Knowledge of various factors - mental and physical - which derange health and act as obstacles to cure and how to remove them to ensure cure. (ORG)
- Role of miasm in causing and maintaining disease and addressing the same to ensure cure.(ORG)
- Understanding the above concepts and its representation and utility in study of HMM (HMM) and its representation in different standard Repertories (REP)

(III) HOM-PG-FHPOM-03

Concept of Artificial Disease and Portrait of Disease

- Mission of physician and knowledge of physician (ORG)
- Drug proving (ORG, HMM)
- Process of recording and manner of recording artificial and natural diseases (ORG)
- Creating portraits of artificial and natural disease and learning the art of matching. (ORG, HMM)
- Art of creating portrait of polychrest remedies through analysis, evaluation and construction of totality at level of mind, physical general and particulars (HMM).

(IV) HOM-PG-FHPOM-04

Concept of Unprejudiced observation and Case taking

- A. Studying the guidelines given by Hahnemann for case taking and evolve a standardised case record for homoeopathic practice. (ORG)
- B. Demonstrating the concept of unprejudiced physician through the process of knowing oneself through practical bed-side demonstration of analysis of physician-patient interaction in detail. (ORG)
- C. Utilising the concept of unprejudiced in perceiving the patient and constructing totality for correct prescribing. (ORG)

(V) HOM-PG-FHPOM-05

Concept of Symptomatology

- Symptomatology and value of a symptom from the standpoint of homoeopathic practice. (ORG)
- Concept of individualisation and generalisation as given by Kent and Boenninghausen and their essential difference between the two. (ORG, Repertory)
- Concept of individualisation and generalisation in the construction of different repertories viz Kent, Boenninghausen, Boger and TPB. (Rep)
- Understanding the concept of classification of symptoms and its utility in the study of HMM
- Understanding the concept of generalisation vs individualisation and its utility in generalising the individual drug symptom into Group symptoms and deriving group characteristics (HMM)
- Study of group remedies based on above concept (HMM).

(VI) HOM-PG-FHPOM-06

Concept of Susceptibility and Disease

- Various parameters in determining susceptibility in different types of cases - acute, chronic, intermittent, mental, and periodic illnesses and its application in practice. (ORG)
- Application of the knowledge of classification of diseases as given by Hahnemann and in defining the scope and limitations by demonstrating its application in different types of cases. (ORG)
- Construction of different regional repertories as an aid to case taking and managing a variety of clinical conditions. e.g. Boericke's Repertory, Phatak's repertory with examples. (REP)

- Clinical Materia Medica and remedy differentiation in different types of cases.

(VII) HOM-PG-FHPOM-07

Concept of Suppression and Miasms

- Concept of suppression in homoeopathy and its types (surgical/non-surgical) in progression of disease and its management (ORG)
- Concept of Miasm from Hahnemannian perspective and its further expansion by Allen, Kent and ML Dhawale (ORG)
- Use of Miasm in classifying and understanding the evolution of different remedies(HMM)
- Utilising the knowledge of indications of anti-miasmatic remedies .
- Role of miasm as a fundamental cause and `its influence on the expressions in disease and remedies ie. through the Miasmatic expressions of Psora, Sycosis, Tubercular and Syphilis. (HMM)
- Rubrics of suppression from different repertories (REP)
- Rubrics of different expressions of Miasm from different repertories and study of different Miasm rubrics (REP)

(VIII) HOM-PG-FHPOM-08

Concept of Totality

- Process of constructing acute, chronic and inter current totalities. (ORG)
- Mastering the concept of classification and evaluation of symptoms (REP)
- Selecting the suitable approach and constructing reportorial totality as per Kent, Boenninghausen and Boger. (REP)
- Understanding the process of reportorial and non-reportorial approach and how to select one (REP)
- Solving the case with the help of available homoeopathic softwares. (REP)
- Understanding the non-reportorial approach namely structuralization, synthetic approach and key-note. (REP)
- Differentiation of similar remedies in acute and chronic cases by refereeing to the source books, commentaries and clinical Materia medica. (HMM)
- Building up totalities of different remedies through source books and other commentaries. (HMM)

(IX) HOM-PG-FHPOM-09

Concept of Similar and Similimum

- Understanding single, simple, minimum substance as Similimum following from the Law of Similars. (ORG)
- Finer differentiation of similar remedies by learning to refer to source books, commentaries and clinical materia medica.(HMM)
- Understanding remedy relationships - complementary, inimical, antidote, follows well, similar with examples. (HMM)
- Learning the concept of concordances as evolved by Boennninghausen and its utility in practice. (REP)

(X) HOM-PG-FHPOM-10

Concept of Therapeutic Management

- A. Practical application of Kent's 12 observations in the assessment of remedy response and in the second prescription. (ORG)
- B. Utility of knowledge of disease, knowledge of investigations and recent advances in the field of medicine to assess comprehensive response to homoeopathic remedies. (ORG)
- C. Study of therapeutics and study of different Materia Medica with respect to various clinical conditions.
- D. Remedy relationship in determining the second prescription. (HMM)
- E. Patient education and orientation about disease. (ORG)
- F. Use of ancillary measures in acute and chronic diseases, namely diet, exercise, yoga, relaxation techniques, supplements for aiding recovery and preventing the progress of disease.(ORG)

VI. Course Description

Note:

Some course contents in the templates are displayed here for guidelines only . Rest of the content shall be prepared by the institute for their implementation and documentation at their end.

Course Overview	This Course will provide students of MD Hom (Practice Of Medicine) with an overview of the significance of study of fundamentals of homoeopathy with the integrated knowledge of Homoeopathic Philosophy, Materia Medica and Repertory in various clinical stages of different clinical conditions in practice to produce evidence based results.
Learning Outcomes	<p>HOM-PG-FHPOM-01</p> <p>Competency 1: Hahnemannian Concept of man, Health, Disease</p> <p>Knowledge of :-</p> <ul style="list-style-type: none">• Concept of Health, disease and causation.• Concept of health by WHO• Hahnemannian concept of man and its further extension by Kent, Boenninghausen and Boger and its influence on their writing of Repertory and HMM.• Evolution of disease: Predisposition-disposition-diathesis-disease• Philosophical basis and the Construction arrangement of the three original repertories (Kent, TPB, BBCR) representation of above concepts in the repertories.

	<ul style="list-style-type: none"> • Science and philosophy of HMM <p>Skills</p> <ul style="list-style-type: none"> • Elicit the causation of disease in a given case • Demonstrate utility of causation in management of cases • Demonstrate application of Repertory and HMM from causative perspective <p>Reflection</p> <ul style="list-style-type: none"> • Relate the evolution of disease with understanding of predisposition, disposition and diathesis in a given case. • Reason out the utility of Repertory and HMM for selection of remedy in clinical practice.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments MCQ • Practical exam – short case • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Learning Outcomes	<p>HOM-PG-FHPOM-02</p> <p>Competency 2 : Concept of Dynamism, Recovery and Cure and Obstacles to Cure</p> <p>Knowledge of –</p> <ul style="list-style-type: none"> • Concept of vital force in maintaining health and in genesis of disease • Concepts of recovery and cure and the essential difference between the two. (ORG) • Concept of pseudo chronic diseases. (ORG) • Knowledge of various factors - mental and physical - which derange health and act as obstacles to cure and how to remove them to ensure cure. (ORG) • Role of miasm in causing and maintaining disease and addressing the same to ensure cure.(ORG) • Understanding the above concepts and its representation and utility in study of HMM (HMM) and its representation in different standard Repertories (REP)
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	<p>Skills</p> <ul style="list-style-type: none"> • Demonstrate logically the difference between recovery and cure. • Identify the obstacles to cure in a given case. <p>Reflection</p> <ul style="list-style-type: none"> • Relating the vital force concept with health and disease. • Illustrate how to remove the obstacles to cure in a given case. • Relate the miasmatic understanding in maintaining the chronic disease.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments, MCQ • Practical exam – short case, objective, structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Learning Outcomes	<p>HOM-PG-FHPOM-03 Competency 3: Concept of Artificial Disease and Portrait of Disease</p> <p>Knowledge of-</p> <ul style="list-style-type: none"> • Mission and knowledge of physician (ORG) • Drug proving (ORG, HMM) • Process of recording and system of recording artificial and natural diseases (ORG) • Creating portraits of artificial and natural disease and learning the art of matching. (ORG, HMM) • Art of creating portrait of polychrest remedies through analysis, evaluation and construction of totality at level of mind, physical general and particulars (HMM). <p>Skills</p> <ul style="list-style-type: none"> • Implement knowledges of physician in clinical practice in all the types of clinical settings. • Construct the portrait of artificial and natural disease and their matching. • Classify the data from artificial and natural disease through analysis and evaluation. <p>Reflection</p> <ul style="list-style-type: none"> • Relate the knowledge of physician in the clinical practice. • Illustrate the portrait of remedy in a given case.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments • Practical exam – short case, long case, structured oral

	<p>examination, OSCE</p> <ul style="list-style-type: none"> Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Learning Outcomes	<p>HOM-PG-FHPOM-04</p> <p>Competency 4 : Concept of Unprejudiced observation and Case taking</p> <p>Knowledge of :-</p> <ul style="list-style-type: none"> The guidelines given by Hahnemann for case taking and evolve a standardised case record for homoeopathic practice. (ORG) Discuss the concept of unprejudiced physician through the process of knowing oneself through practical bed-side demonstration of analysis of physician-patient interaction in detail. (ORG) Utilising the concept of unprejudiced in perceiving the patient and constructing totality for correct prescribing. (ORG) <p>Skills</p> <ul style="list-style-type: none"> Exhibit the skill of perceiving the patient and constructing totality through unprejudiced observation in patient <p>Reflection</p> <ul style="list-style-type: none"> Relate the role of prejudices in perceiving and constructing totality. Contextualizing the knowledge of case taking and unprejudiced observation in construction of totality.
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Learning Outcomes	<p>HOM-PG-FHPOM-05 Competency 5:- Concept of Symptomatology</p> <p>Knowledge of :-</p> <ul style="list-style-type: none"> • Symptomatology and value of a symptom from the standpoint of homoeopathic practice. (ORG) • Concept of individualisation and generalisation as given by Kent and Boenninghausen and their essential difference between the two. (ORG, Repertory) • Concept of individualisation and generalisation in the construction of different repertories viz Kent, Boenninghausen, Boger and TPB. (Rep) • Understanding the concept of classification of symptoms and its utility in the study of HMM • Understanding the concept of generalisation vs individualisation and its utility in generalising the individual drug symptom into Group symptoms and deriving group characteristics (HMM) • Study of Materia Medica with the help of concept of generalisation. (HMM). • Study of group remedies based on above concept (HMM). <p>Skills</p> <ul style="list-style-type: none"> • Construct the totality by using concept of generalization and individualization • Construct the totality of symptoms of a group remedy through generalization. <p>Reflection</p> <ul style="list-style-type: none"> • Relate the application of study of group remedies in clinical practice • Reason out the process of generalization and individualization in totality formation • Contextualize the value of symptom in matching with HMM and referring to repertory.
Assessments	As per list
Prescribed texts	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Domains of competencies	KS,PC,HO,CS,PBL

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Learning Outcomes	<p>HOM-PG-FHPOM-06</p> <p>Competency 6 :- Concept susceptibility, acute and chronic disease</p> <p>Knowledge of :-</p> <ul style="list-style-type: none"> • Various parameters in determining susceptibility in different types of cases - acute, chronic, intermittent, mental, and periodic illnesses and its application in practice. (ORG) • Application of the knowledge of classification of diseases as given by Hahnemann and its role in defining the scope and limitations by demonstrating its application in different types of cases. (ORG) • Construction of different regional repertories as an aid to case taking and managing a variety of clinical conditions. E.g. Boericke's Repertory, Phatak's repertory with examples. (REP) • Clinical Materia Medica and remedial differentiation in different types of cases . <p>Skills</p> <ul style="list-style-type: none"> • Apply susceptibility concept in management of cases in clinical practice. • Demonstrate the disease classification as per Hahnemann in a given case • Document scope and limitations as per classification of diseases in the light of clinical medicine . <p>Reflection</p> <ul style="list-style-type: none"> • Relate the role of susceptibility in homoeopathic practice • Illustrate the utility of regional repertory in clinical practice
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

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Learning Outcomes	<p>Competency: HOM-PG-FHPOM-07 Competency 7: Concept of suppression and miasm</p> <p>Knowledge of –</p> <ul style="list-style-type: none"> • Concept of suppression in homoeopathy and its types (surgical/non-surgical) in progression of disease and its management (ORG) • Concept of Miasm from Hahnemannian perspective and its further expansion by Allen, Kent and ML Dhawale (ORG) • Use of Miasm in classifying and understanding the evolution of different remedies(HMM) • Utilising the indications of anti-miasmatic remedies as per list. • Role of miasm as a fundamental cause and `its influence in the expressions in disease and remedies through the Miasmatic expression of Psora, Sycosis, Tubercular and Syphilis. (HMM) • Rubrics of suppression from different repertories (REP) • Rubrics of different expressions of Miasm from different repertories and study of different Miasm rubrics (REP) <p>Skills</p> <ul style="list-style-type: none"> • Identify the suppression in clinical cases • Derive miasmatic understanding in acute and chronic disease • Choose anti-miasmatic remedy prescribing in clinical cases. • Illustrate miasmatic symptoms in a given case. <p>Reflection</p> <ul style="list-style-type: none"> • Relate the evolution of disease with miasm in clinical practice. • Review the concept of suppression and relate it through the study of repertory and Materia Medica.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Learning Outcomes	<p>HOM-PG-FHPOM-08 Competency 8 : Concept of Totality</p> <p>Knowledge of-</p> <ul style="list-style-type: none"> • Process of constructing acute, chronic and inter current totalities. (ORG) • Mastering the concept of classification and evaluation of symptoms (REP) • Selecting the suitable approach and constructing reportorial totality as per Kent, Boenninghausen and Boger. (REP) • Understanding the process of reportorial and non-reportorial approach and how to select one (REP) • Solving the case with the help of available homoeopathic softwares. (REP) • Understanding the non-reportorial approach namely structuralization, synthetic approach and key-note. (REP) • Differentiation of similar remedies in acute and chronic cases by reference to source books, commentaries and clinical Materia medica. (HMM) • Building up totalities of different remedies through source books and other commentaries from the list. (HMM) <p>Skills</p> <ul style="list-style-type: none"> • Construct acute, chronic and inter current totality • Construct reportorial totality • Solving the case with suitable software • Perform differentiation of remedies using different HMM viz source book, commentaries , clinical Materia medica and key notes <p>Reflection</p> <ul style="list-style-type: none"> • Justify the construction of totality in a given case. • Reason out the basis for different approaches and references to repertory • Establish the role of various Materia Medica based on totality of cases.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of	KS,PC,HO,CS,PBL

competencies	
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Learning Outcomes	HOM-PG-FHPOM-09 Competency 9: Concept of similar and similimum Knowledge of - <ul style="list-style-type: none"> • Understanding single, simple, minimum substance as Similimum following from the Law of Similars.(ORG) • Learning the concept of concordances as evolved by Boenninghaus and its utility in practice. (REP) • Finer differentiation of similar remedies by learning to refer to source books, commentaries and clinical materia medica.(HMM) • Understanding remedy relationships - complementary, inimical, antidotal, follows well, similar with examples. (HMM) Skills <ul style="list-style-type: none"> • Apply fundamental laws of Homoeopathy in practice • Apply the remedy relationship in clinical practice Reflection <ul style="list-style-type: none"> • Review the fundamental laws of homoeopathy observed in clinical cases • Relate the remedy relationship through case studies and correlate with concordance in Repertory
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Learning Outcomes	HOM-PG-FHPOM-10 Competency 10 : Concept of Therapeutic management Knowledge of –
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	<ul style="list-style-type: none"> • Practical application of Kent's 12 observations in the assessment of remedy response and in the second prescription. (ORG) • Utility of knowledge of disease, knowledge of investigations and recent advances in the field of medicine to assess comprehensive response to homoeopathic remedies. (ORG) • Remedy relationship in determining the second prescription. (HMM) • Patient education and orientation about disease. (ORG) • Use of ancillary measures in acute and chronic diseases, namely diet, exercise, yoga, relaxation techniques, supplements for aiding recovery and preventing the progress of disease.(ORG) <p>Skills</p> <ul style="list-style-type: none"> • Select second prescription based on remedy response of Kent's observation • Perform patient education and orientation • Demonstrate the ancillary management in acute and chronic diseases <p>Reflection</p> <ul style="list-style-type: none"> • Evaluate the remedy response in clinical cases • Plan investigations with reference to current advances and its utility in judging remedy response • Planning and undertaking the ancillary management in a given case.
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS,PC,HO,CS,PBL

Following examples of list of repertories besides Kent, TPB, BBCR are suggested during the course.

- Bell's diarrhoea,
- Allen's therapeutics of fevers,
- Phatak's repertory,
- Murphy's repertory
- Boericke's repertory
- Boger synoptic Key
- Borland Pneumonia

As an example the list of remedies for different aspects for study of applied Materia Medica is given here under. However this should not be taken as exclusive for the course purpose.

Clinical HMM	Drug picture	Group study	Anti-miasmatic
1. Aconite	1. Alumina	1. sodium	Bacillinum
2. Aesculus	2. Antimony crud	2. Magnesium	2. Tuberculinum
3. Aethusa	3. Apis mel	3. Calcareo	3. Thuja
4. Agaricus	4. Argentum met	4. Kali	4. Medorrhinum
5. Aloes	5. Argentum nit	8. Loginnaceae	5. Psorinum
6. Ammonium carb	6. Arsenic alb	9. Solanaceae	6. Sulphur
7. Anacardium	7. Aurum met	10. Compositae	7. Syphilinum
8. Antimony ars	8. Baryta carb.	11. Ophidia	
9. Antimony tart	9. Baryta mur.	12. Spider	
10. Arnica	10. Calc. carb.	13. Metals	
11. Ars iod	11. Calc. flur.	15. Acids	
12. Baptisia	12. Calc. iod.		
13. Belladonna	13. Calc. phos.		
14. Bellis per	14. Calc. sulph.		
15. Berberis v.	15. Calc. sil		
16. Borax	16. Causticum		
17. Bromium	17. China		
18. Bryonia. alb.	18. Conium		
19. Cactus g.	19. Ferrum met.		
20. Calc. ars.	20. Ferrumphos.		
21. Carbo. an	21. Fluoric acid		
22. Cantharis.	22. Graph.		
23. Carb. veg.	23. Ignatia		
24. Caulophyllum	24. Iodine		
25. Chamomila	25. Kali bichrom.		
26. Chelidonium m.	26. Kali brom.		
27. China ars.	27. Kali carb.		
28. Cicuta v.	28. Kali iod.		
29. Cimicifuga	29. Kali mur.		
30. Cina	30. Kali sulph.		
31. Coca	31. Lac. can.		
32. Cocculus	32. Lachesis		
33. Coccus cacti	33. Lycopodium		
34. Collinsonia	34. Lyssin		
35. Colocynth	35. Mag. carb.		
36. Corallium rubrum	36. Mag. mur		
37. Crategus	37. Mag. phos.		
38. Crotalus h.	38. Mag. sulph		
39. Croton tig	39. Medorrhinum		
40. Cup. met.	40. Mercurius sol.		
41. Digitalis	41. Naja		
42. Dioscorea	42. Natrum carb.		
43. Drosera	43. Natrum mur.		
44. Dulcamara	44. Natrum phos.		
45. Echinacia	45. Natrum sulph.		
	46. Nitric acid		

46. Euphrasia	47. Nuxvom.		
47. Gelsemium	48. Opium		
48. Glonoine	49. Petroleum		
49. Hammamelis	50. Phos.		
50. Helleborus	51. Phos. ac		
51. Hepar sulph	52. Platina		
52. Hyoscyamus.	53. Psorinum		
53. Hypericum.	54. Puls.		
54. Ipecac	55. Rhus tox.		
55. Kali ars.	56. Sanicula		
56. Lactrodectus m	57. Sepia		
57. Laurocerasus	58. Silica		
58. Ledum	59. Stannum met.		
59. Lilium tig.	60. Staph		
60. Lobelia	61. Stram.		
61. Manganum	62. Sulphur		
62. Merc. dul.	63. Tarent h.		
63. Merc. iod. fl.	64. Thuja		
64. Merc. ior. r.	65.		
65. Mercurius cor.	Tuberculinumbov		
66. Mezereum	66. Verat. alb.		
67. Muriatic acid	67. Zincum		
68. Murex			
69. Nux moschata			
70. Phytolacca			
71. Plumbum			
72. Podophyllum			
73. Pyrogen			
74. Ranunculus			
bulb			
75. Ratanhia			
76. Rheum			
77. Rhododendron			
78. Rumex			
79. Ruta g.			
80. Sabadilla			
81. Sabina			
82. Sambucus			
83. Sanguinaria			
84. Sarsaparilla			
85. Secale cor.			
86. Selenium			
87. Senega			
88. Spigelia			
89. Spongia			
90. Sticta			
91. Symphytum			
92. Tarentula. c.			
93. Thlaspi bursa			
94. Veratrum vir.			

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training	During eighteenth month of training
	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
1) Fundamentals of Practice of Medicine	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
1) Fundamentals of Homoeopathy in Practice of Medicine	100	50		
2) Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *Eighty per cent weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20

Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Course Numbers

Hom-PG-FHPOM-01 - Hahnemannian Concept of man, Health, Disease
Hom-PG-FHPOM-02 - Concept of Dynamism, Recovery and Cure and Obstacles to Cure
Hom-PG-FHPOM-03 - Concept of Artificial Disease and Portrait of Disease
Hom-PG-FHPOM-04 - Concept of Unprejudiced observation and Case taking
Hom-PG-FHPOM-05 - Concept of Symptomatology
Hom-PG-FHPOM-06 - Concept of Susceptibility and Acute and Chronic Disease
Hom-PG-FHPOM-07 - Concept of Suppression, Miasms and vaccinations in pediatrics
Hom-PG-FHPOM-08 - Concept of Totality
Hom-PG-FHPOM-09 - Concept of Similar and Simillimum
Hom-PG-FHPOM-10 - Concept of Therapeutic management

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Hom-PG-FHPOM--/10	20
2	LAQ	Hom-PG-FHPOM-07	10
3	LAQ	Hom-PG-FHPOM-04	10
4	LAQ	Hom-PG-FHPOM-03	10
5	LAQ	Hom-PG-FHPOM-05	10
6	SAQ	Hom-PG-FHPOM-01	5
7	SAQ	Hom-PG-FHPOM-02	5
8	SAQ	Hom-PG-FHPOM-06	5
9	SAQ	Hom-PG-FHPOM-06	5
10	SAQ	Hom-PG-FHPOM-08	5
11	SAQ	Hom-PG-FHPOM-09	5
12	SAQ	Hom-PG-FHPOM-08	5
13	SAQ	Hom-PG-FHPOM-03	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination: A Common Practical/viva for Part I Paper 1 and 2.

VIII. List of Reference Books (As per APA Format).

List of Recommended Reference Books – along with standard text books of Practice of medicine and repertory:

- Allen J.H, 1998, Diseases of therapeutics of the skin, B.Jain Publishers, New Delhi.
- Blackkow,R.S,1983,Macbride's Clinical Signs and symptoms,Lippincott,6th Ed.

- Boericke's W, 1998, Boericke New Manual of Homoeopathic Materia Medica with Repertory, B.Jain Publishers,USA,9th Ed.
- Boger,C.M,1994,A Synoptic Key of the Materia Medica, B.JainPublishers,New Delhi.
- Choudhuri,N.M,2001,A Study on Materia Medica, B.JainPublishers,New Delhi.
- Clarke,J.H,2006,A Dictionary of Practical Materia Medica Vol 1 to Vol 3,IBPP,New Delhi.
- Close, S, 2005, The Genius of Homoeopathy Lectures And Essays on Homoeopathic Philosophy With Word Index, B.Jain Publishers Pvt.Ltd, USA, 2nd Ed.
- Dahlke,R& Dethlefsen,T,2002 Healing Power of illness,Vega.
- Dhawale, M.L, 1994, Principles & Practice of Homoeopathy: Homoeopathic Philosophy &Repertorization, B.JainPublishers,New Delhi.
- Hahnemann, S, 2002, Organon of medicine B.Jain Publishers, New Delhi, 6th Ed.
- Hahnemann,S, 1982,The Chronic Diseases: Their Peculiar Nature & Their Homoeopathic Cure, Jain Publishers, New Delhi.
- Hahnemann,S,1984, Materia Medica Pura, Vol 1 & 2 Jain Publishing,New Delhi.
- Hahnemann,S,1990, The Chronic Diseases :Their Peculiar Nature & Their Homoeopathic Cure, Vol 1 & Vol 2 Jain Publishers ,New Delhi.
- Hering,C,1984,The Guiding Symptoms of Homoeopathic Materia Medica Vol 1 to vol 10, B.JainPublishers,New Delhi.
- Kent,J.T,2002,Lectures on Homoeopathic Materia Medica, B.JainPublishers,New Delhi.
- Kent,J.T,2002,Lectures on Homoeopathic Philosophy, B.Jain Publishers, USA.
- **Loscalzo, J.Kasper,D.L.,Longo,D.L.,Fauci,A.S, Hauser,S.L.&Jameson,J.L. 1958 Harrison's, Principles & Practice of Medicine Mc Graw Hill, New York, 21st Ed.**
- Morgan,C.T,King,R.A,Weisz,J.R& Schopler,J,1986,Introduction to Psychology, McGraw Hill Education (India) Private Limited,7th Ed.
- Phatak,S.R,1999,Materia Medica of Homoeopathic Medicines, B.Jain Publishers,USA,2nd Ed.
- Robbins & Cotran,2014,Pathologic Basic of Diseases,Vol 1 & Vol 2,Elsevier Pub,New Delhi.
- Robert H.A, 2002, The Principles and Art of Cure by Homoeopathy: A Modern Textbook, B.Jain Publishers Pvt.Ltd, USA.
- Tortora,G.J,1996,Principles of Anatomy And Physiology, Harper Collins College Publishers,New York,8th Ed.
- Tyler,M.L,1992,Homoeopathic Drug Pictures, B.Jain Publishers, New Delhi.

Template for Curriculum Document
MD Hom
Doctor of Medicine Homoeopathy Psychiatry

I. Title of the Specialty Course, and its abbreviation.

MD (Homoeopathy) Psychiatry

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Psychiatry;
- (ii) Fundamentals of Homoeopathy in Psychiatry; and
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Homoeopathic Psychiatry Paper 1
- (ii) Homoeopathic Psychiatry. Paper 2

III. Brief description of specialty and its relevance in homoeopathy post-graduate course.

Psychiatry is a branch of medicine focused on the study, diagnosis, treatment and prevention of mental, emotional and behavioural disorders in the individual and in the community. A person's mental health is influenced by a combination of factors that are both specific to an individual as well as related to interactions with the society, community, and family.

The purpose of Psychiatry in homoeopathic postgraduate education is to create specialists who are competent to provide high-quality mental health care using Homoeopathic intervention with Counselling (if required, as an adjuvant). During the course, they should be competent to enrich the system through research. A postgraduate specialist is required to utilize the training in Psychiatry under the domain of the Homoeopathic system of medicine to observe and recognize the mental health needs of the community and to manage mental health illnesses and crises effectively. Along with preventive, promotive, curative and rehabilitative approaches towards mental health, the postgraduate student should be equipped with basic skills in medical and paramedical teaching, especially from Homoeopathic discipline and develop a research aptitude in mental health.

The major components of the postgraduate curriculum need to include the relevant theoretical knowledge to master most of the competencies. It is also necessary to integrate the speciality required for the needs at the secondary and tertiary levels with the principles of Homoeopathic discipline and be aware of the contemporary advances in the discipline as well. The curriculum must be appropriate to develop practical and clinical skills and attitudes required for competent and ethical evidence-based practice along with communication skills, training in research methodology and thesis writing skills. There should be an emphasis on acquiring the spirit of scientific inquiry, research methodology, epidemiology and basic skills in teaching the medical and paramedical Homoeopathic professionals.

Primarily, postgraduate candidates of Psychiatry are therefore expected to understand the knowledge of mental health management adequately coupled with Homoeopathic discipline for systematic use at all levels i.e., pathological, clinical, psychosomatic, etc, and in all clinical situations. They are expected to provide health services with empathy and a humane approach toward patients and their families.

IV. Program Objectives. (Entrustable Professional Activities–EPAs)

1. Demonstrates the components of Psychiatric screening/history taking by striking a compassionate Doctor-Patient relationship.
2. Traces the evolution of psychopathology in every case for establishing a comprehensive clinical and personal diagnosis
3. Documents all the relevant information comprehensively in the case record
4. Performs essential General, Systemic, and Neurological examinations and conducts Mental Status Examination (MSE).
5. Integrates data from history taking, case evolution, and patient assessment to differentiate and conclude the diagnosis as per ICD-11, DSM-V, and Hahnemannian classification systems.
6. Formulates a comprehensive strategy for general and homoeopathic management
7. Manage patients with psychiatric emergencies and guide relatives accordingly.
8. Formulates comprehensive Acute, Chronic or Miasmatic totalities based on homoeopathic principles.
9. Chooses appropriate repertories for identifying the similimum.
10. Applies knowledge of homoeopathic materiamedica as therapeutic agents for the management of various psychiatric conditions.
11. Identifies the stage and time for the need for second opinions or referrals for clinical consultation or management respectively
12. Writes a comprehensive psychiatric report for any referral patient.
13. Identifies the need for and acts on clinical psychologist's intervention for psychotherapeutic or diagnostic interventions.
14. Identifies, evaluates and manages co-morbidities resulting from psychiatric conditions or resulting in psychiatric conditions as per homoeopathic principles.
15. Prescribes various ancillary measures based on the comprehensive problem definition of patients with mental illness
16. Identifies the actions, doses and adverse effects of psychiatric or psychotropic drugs.
17. Develop a safe handover and comprehensive discharge plan.
18. Performs periodic clinical audits to improve patient care and outcomes
19. Applies knowledge of mental health and mental hygiene for performing mental health work in the community.
20. Trains and teaches undergraduates/interns related to psychology and psychiatry
21. Evaluates and takes germane decisions as per the guidelines of Mental Health Care Act 2017 for the benefit of patients and the community.
22. Participates in National Mental Health Programmes while applying the knowledge of Homoeopathic Psychiatry as relevant
23. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

IV(1). Mapping of EPAs and Domain Competencies

KS: Knowledge & Scholarship

PC: Patient care

HO:

Homoeopathic Orientation

CS: Communication skills

PBL: Practice based learning **PRF:** Professionalism

Sl. No	EPA	KS	PC	HO	CS	PBL	PRF
1.	Demonstrates the components of Psychiatric screening / history taking by striking a compassionate Doctor Patient relationship.	√	√	-	√	√	√

2.	Traces the evolution of psychopathology in every case for establishing a comprehensive clinical and person diagnosis.	√	√	√	√	√	√
3.	Documents all the relevant information comprehensively in case record	√	√	√	√	√	√
4.	Performs essential General, Systemic, Neurological examinations and conduct MSE	√	√	-	-	√	√
5.	Integrates data from history taking, case evolution, and patient assessment to differentiate and concludes the diagnosis as per ICD-11, DSM-V, and Hahnemannian classification systems.	√	√	√	√	√	√
6.	Formulates a comprehensive strategy for general and homoeopathic management	√	√	√	-	√	√
7.	Manages patients with psychiatric emergencies and guide relatives accordingly.	√	√	√	√	√	√
8.	Formulates comprehensive Acute, Chronic or Miasmatic totalities based on homoeopathic principles	√	√	√	-	√	√
9.	Chooses appropriate repertories for identifying similimum.	√	√	√	-	√	√
10	Appliesthe knowledge of homoeopathic materiamedica as therapeutic agents for the management of various psychiatric conditions.	√	√	√	-	√	√
11	Identifiesthe stage and time for the need for second opinions or referrals for clinical consultation or management respectively	√	√	√	√	√	√
12	Writes a comprehensive psychiatric report for any referral patients	√	√	-	√	√	√
13	Identifiesthe need for and acts on clinical psychologist's intervention for psychotherapeutic or diagnostic interventions.	√	√	-	√	√	√
14	Identifies, evaluates and manages co-morbidities resulting from psychiatric conditions or resulting in psychiatric conditions as per homoeopathic principles.	√	√	√	√	√	√
15	Prescribes various ancillary measures based on the comprehensive problem definition of patients with mental illness	√	√	√	√	√	√
16	Identifies the actions, doses and adverse effects of psychiatric or psychotropic drugs.	√	√	-	√	√	√
17	Develops a safe hand over and comprehensive discharge plan	√	√	-	√	√	√

18	Performs periodic clinical audit to improve patient care and outcomes	√	√	-	√		√
19	Applies knowledge of mental health and mental hygiene for performing mental health work in the community.	√	√	√	√	-	√
20	Trains and teaches undergraduates / interns related to psychology and psychiatry.	√	√	√	√	√	√
21	Evaluates and takes germane decisions as per the guidelines of mental health care act 2017 for benefit the patients and the community.	√	√	√	√	√	√
22	Participates in National Mental Health Programmes while applying the knowledge of Homoeopathic Psychiatry as relevant	√	√	√	√	√	√
23	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	√			√	√	√

IV(2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

	EPAs	Hom-PG-PS Part 1			Hom-PG-PS Part 2		
		Sem / Mod 1	Sem / Mod 2	Sem / Mod 3	Sem / Mod 4	Sem / Mod 5	Sem / Mod 6
1	Demonstrates the components of Psychiatric screening / history taking by striking a compassionate Doctor Patient relationship.	2 Demonstrates ability to identify the essence of information produced screening and learns to record observations of case taking as an observer.	2 Carries out screening in the OPD and can assess the immediate needs of the patient. Carries out a supervised interview and is able to undertake self-analysis. Demonstrates respect for patient's privacy and autonomy. Seeks feedback from the supervisor over case taking	2 Can perform an independent interview and, discuss the dynamics of case taking with the observer. Is able to successfully interact with the relatives. Is able to conduct Casualty case receiving	3 Is able to carry out case receiving in the OPD, Community and IPD set ups and report objectively about his experiences	4 Is able to carry through case receiving of a variety of clinical conditions and take the help of a junior observer for assessing his performance	5 Is able to guide the junior Postgraduate in fundamentals of screening and can be an effective observer to the case taking efforts by giving constructive feedback
2	Traces the evolution	2 Evaluates	2 Develops	3 Is able to	4 Is able to	4 Is able to	5 Is able to

	of psychopathology in every case for establishing a comprehensive clinical and personal diagnosis.	and documents the whole chronology of complaints and the essential characteristics of the person	ability to classify the symptoms as per psychiatric symptomatology and evaluate psychopathology and connect with the person. Documents and communicates assessment with supervisors. Becomes aware of the use of knowledge, skills and emotional limitations of self in the process of eliciting and interpreting psychopathology	arrive at a probable clinical diagnosis and diagnosis of the person. Is able to establish a correlation between the two to Develops ability to withstand and cope with stress associated with receiving and managing patients Is sensitized to different aspects of receiving cases with psychopathology	arrive at a firm diagnosis with differential diagnosis. Is able to present a comprehensive statement of the problem of the patient incorporating significant aspects of psychopathology and the manner in which it is responsible for the symptomatology	guide the junior in evaluation of complaints and of the person.	guide the Postgraduate juniors in establishing the psychopathology and connecting these to the clinical diagnosis and the type of person.
3	Documents all the relevant information comprehensively in case record	2 Documents all complaints accurately and legibly.	2 Documents all entries at the correct location in the case	3 Is able to justify the location of entries and make corrections, if any	4 Is able to guide the postgraduate junior is the need to document all information	4 Is able to guide the junior in essential classification assisting the	5 Develops ability to correct and give constructive feedback to Postgraduate juniors on

			record		and explain the character of the case record	correct entries in the case record	their case record submissions
4	Performs essential General, Systemic, and Neurological examinations and conduct MSE)	2 Performs and concludes general, systemic and neurological examination Demonstrates empathetic approach required to examine non-compliant patients	2 Performs and concludes general and systemic examination along with MSE	3 Performs and documents all examinations and communicates the findings in terms of clinical diagnosis	3 Is able to guide the juniors for general, systemic and neurological examination	4 Is able to guide the Postgraduate juniors in conducting the MSE	5 Ensures juniors follow steps defined accurately.
5	Integrates data from history taking, case evolution, and patient assessment to differentiate and conclude the diagnosis as per ICD-11, DSM-V, and Hahnemannian classification systems.	2 Comprehensively records the data of the evolutionary complaints and life events in the case record Classifies the symptoms to help to arrive at a spectrum of clinical diagnosis	2 Effectively assesses the phases of psychiatric illness in cases to understand the diagnostic travel Effectively classifies the condition as per DSM-V and ICD-11 and as	3 Effectively differentiates the probable diagnosis and arrives at the final diagnosis. Effectively classifies as per Hahnemannian classification to arrive at the Homoeopathic diagnosis	4 Guides the junior resident in the correct documentation of the complaints and classification of the symptoms	4 Guides the junior resident in the correct differential diagnosis and Hahnemannian classifications	5 Transfers the knowledge by teaching the postgraduate juniors

			per Hahnema nnian classificat ion				
6	Formulate s a comprehe nsive strategy for general and homoeopa thic managemen t		2 Recogniz es the deviated physical and psycholo gical processes in a wide variety of cases	2 Defines the therapeutic problem and opines about the general management related to the same	3 Formulates the comprehen sive strategy for general and homoeopat hic manageme nt of the case Demonstrat es willingness to receive feedback and improve the skills of formulating manageme nt strategy of the case	4 Recognize s the need of developin g ability of self- assessmen t to improve the skills of processin g of the case/clinic al conditions	5 Orients juniors the various steps required for accurate processing of case
7	Manages patients with psychiatri c emergenci es and guides relatives accordingl y.	2 Observe patients with emergenci es and document the observatio ns Develope mpathy towards patients and	3 Assists the CMO/Sen ior resident in the casualty to conclude the assessme nt Receives and	4 Is able to formulate accurate diagnostic evaluations of patients with psychiatric emergencies and discuss the plan of action with the senior resident/sup ervisor	4 Is able to formulate and implement manageme nt plans for patients with psychiatric emergencie s and effectively communica tes the same with	5 Is able to guide the junior resident to the basic emergenc y managem ent procedure s in the casualty	5 Guides and Orients juniors the various steps required for accurate assessment and management of such emergencies

		relatives who are facing emergencies.	communicates with patients/relatives in the emergency room and documents all the observations for clinical and homoeopathic management		the relatives/patients		
8	Formulate comprehensive Acute, Chronic or Miasmatic totalities based on homoeopathic principles		2 Classifies and evaluates acute psychiatric symptomatology and evolves acute totality	3 Documents accurately to derive the miasm and formulates acute and chronic totality based on Hahnemannian guidelines	4 Documents and formulate acute, chronic and come to miasmatic totality of the case based on guidelines	4 Works effectively in any situation of acute or chronic cases	5 Train the junior residents about the same
9	Chooses appropriate repertories for identifying similimum.	2	3 Can convert symptoms into rubrics in acute cases Demonstrates knowledge of choice of an appropriate repertory for the case (Basic, regional,	3 Demonstrates proper conversion of rubrics in chronic cases. Demonstrates the knowledge of choice of an appropriate repertory and software for chronic cases	4	4	5 Is able to guide the juniors in the choice and use of repertories for acute and chronic management of cases

			clinical, modern, with use of software etc), remedy relationship section of repertory for acute cases				
10	Applies knowledge of homoeopathic materia medica as therapeutic agents for the management of various psychiatric conditions .		2 Demonstrates the knowledge of arriving at the group of remedies after formulating appropriate totalities for the management of acute conditions.	2 Demonstrate the knowledge of arriving at a group of remedies after formulating appropriate totalities for chronic conditions.	3 Differentiates remedies based on the clinical characteristics related to various conditions and comes to the final remedy	4	5 Ensures juniors follow steps defined accurately. Transfer the knowledge to Undergraduate students through teaching.
11	Identifies stage and time for the need for second opinions or referrals for clinical consultation or management respectively			2 Recognizes when the therapeutic plan as planned and implemented is not producing plans as expected. Is able to spot the lacunae	3 Is able to share and discuss with the patient/relatives on the assessment and the need for a second opinion or advise on management strategy	4	5 Trains the juniors to create appropriate questions and retrieve evidence to supportive care

1 2	Writes a comprehensive psychiatric report for any referral patients			2 Communicates effectively with supervisors about the findings and probable plan for action	3 Documents the rough psychiatric report of case/s and subject to discussion for inputs	4 Write comprehensive psychiatric reports with specific comprehensible inclusion of homeopathic management	5 Train the juniors for psychiatric report writing by ensuring the all defined guidelines
1 3	Identifies need for and acts on clinical psychologist's intervention for psychotherapeutic or diagnostic interventions.		2 Identifies the cases needing psychological intervention Is able to communicate to the patient/relative the need and the benefit from the consultation	3 Effectively assesses the diagnostic state and understands the need of psychologist's opinion and its indications Effectively communicates the psychiatric report to the psychologist	3 Studies and analyses the findings from the analysts and utilize them in management	4	5 Ensures to keep juniors alongside for training/guiding them
1 4	Identifies, evaluates and manages co-morbidities resulting from psychiatric conditions or resulting in psychiatric		3 Identifies the occurrence of co-morbidities as a result of the clinical condition being treated or those which have	3 Assesses and analyses the connection between two or more clinical conditions present in any given case Discusses with the patient/relative of the	4 Comprehensively formulates the Hahnemannian classification of the of mental illnesses and indicates the management plan	4	5 Demonstrate the knowledge and skill for guiding the juniors

	conditions as per homoeopathic principles.		preceded the condition being treated	need for care of the condition identified			
15	Prescribes various ancillary measures based on the comprehensive problem definition of patients with mental illness		2 Assesses and defines the therapeutic problem of the patients	2 Constructs a comprehensive diagnostic formulation	3 Assesses and formulates a comprehensive diagnostic strategy for the case management helpful in indicating a suitable ancillary measure or referral to specialists (eg. Psychologist)	4 Prescribe and assess the outcome of the ancillary measures and modify them if needed	4 Guide the junior Postgraduate residents for the same.
16	Identifies the actions, doses and adverse effects of psychiatric or psychotropic drugs.				4 Knows and assesses the effect of various modern psychiatric drugs including their side effects if any	4 Knows and assesses the modifying effects in homoeopathic totality	5 Guide the same to junior students
17	Develops a safe hand over and comprehensive discharge plan			3 Formulates a plan for hand over/discharge and gets it evaluated from a	4 Orients the family/patient with the discharge plan. Formulates the final	4 Effectively replicates the application of document	5 Trains the juniors to create appropriate documentation, legal and ethical issues

				supervisor	discharge plan	ation, safe hand over and discharge plan	while admission, safe hand over and discharge plan
18	Performs periodic clinical audit to improve patient care and outcomes			3 Learns to assess quality of therapeutic outcome compared to the initially formulated management plans in individual cases. Learns to write case reports for publication	4 Learns to compile individual case assessments to a case series and write up reports on case series. Prepares reports for publication	4 Drafts recommendations for improving the therapeutic outcome of clinical conditions and discusses with the supervising staff	5 Implements the changes finalized to improve clinical outcomes
19	Applies knowledge of mental health and mental hygiene for performing mental health work in the community.	1 Becomes aware of importance of the principles of mental health and hygiene	2 Explores the components of mental hygiene and practice on the self and near surroundings	2 Sensitize to the different aspects of mental health and hygiene and practice in patients seen in the OPD and IPD	4 Sensitizes to the different aspects of mental health and hygiene and practice it at various community levels colleges, villages, companies etc.	4 Sensitizes with different aspects of mental health and hygiene and practice it at various community levels colleges, villages, companies etc. and assess the feedback for further improvement	5 Guide and demonstrate the same with junior students
20	Trains and teaches undergraduates / interns related to psychology and				4 Formulates the lesson plan related to assigned topic and prepares and	4 Seeks feedback post lecture/ presentation from an	4 Effectively guides and helps other team members and juniors for such teaching activities

	psychiatry .				presents case based material to interns by keeping an observer for evaluation/feedback	observer	
21	Evaluates and takes germane decisions as per the guidelines of mental health care act 2017 for benefit of the patients and the community.				3 Becomes aware of the various clauses of the mental health care act and various rights of the patients with mental illness	3 Practices the rights of confidentiality and rights to treatment in set up of practice with human care	4 Implements the rights in cases of violation. Transfers the knowledge by guiding the juniors on the same.
22	Participates in National Mental Health Programmes while applying the knowledge of Homoeopathic Psychiatry as relevant				Becomes aware of the various National Mental Health Programmes of the Government	Visits the sites where such National Programmes are being run	Participates in one such programme run by the Institution/District/Local authority
23	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	Justify the need for educational methodology as a component of PG Course.	Identify the learning objectives for their domain in Bloom's taxonomy. Identify	Recognise the levels of Guilbert. Indicate the level in Miller's Pyramid. Select appropriate instructional activities.	Write objectives for all domains of Bloom and levels of Guilbert. Identify assessment tools appropriate	Conduct evidence driven TL and Assessment of UG students.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.

			the contexts of learning.		e for the context.		
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PART I Paper 1:

V. Courses and Course Objectives.

Part 1: Paper 1:

- HOM- PG -- PS -- 01: Neuro-biological foundations of Psychiatry and the homoeopathic implications
- HOM- PG -- PS -- 02: Psychosocial foundations of Psychiatry and the homoeopathic implications
- HOM- PG -- PS -- 03: Concept of Personality and various approaches with homoeopathic implications
- HOM- PG -- PS -- 04 : History of Psychiatry in the West and in India and contribution of Homoeopathy
- HOM- PG -- PS -- 05: Case receiving and Examination of Psychiatric patient(adult and children)
- HOM- PG -- PS -- 06: Clinical manifestations of Psychiatric disorders and understanding of psychopathology
- HOM- PG --PS -- 07: Classification of Psychiatric disorders and correlation with the Hahnemannian approach
- HOM- PG -- PS -- 08: Diagnostic process in Psychiatry and correlation with Hahnemannian diagnosis

VI. Course description

Course Name: HOM- PG – PS -- 01: Neuro-biological foundations of Psychiatry and the homoeopathic implications

Course Overview:	This course will provide the students of MD Homoeopathic Psychiatry with the knowledge of Neuro-biological foundations of Psychiatry and the implication in Homoeopathic fundamentals
Learning Outcomes	<p>Competency 1</p> <p>Neuroanatomical and neurophysiological basis of the mental processes</p> <p><u>Cognitive/Knowledge:</u></p> <p>Neuro-biological foundations of Psychiatry</p> <p>a) Types c) Functioning d) Clinical significance</p> <p>Recall the basic neuroanatomical and neurophysiological basis of the mental processes- neuron, nerve transmission, parts of brain and the functioning, limbic system, neurotransmitters, neurotransmission, general adaptation syndrome, HPA axis, etc.</p> <p><u>Skill/ Application:</u></p> <p>Correlate the symptoms with the relevant neurobiological function</p>

	<u>Reflection:</u> Recollecting the neuroanatomical and neurophysiological basis of the mental processes
Learning Outcomes	Competency 2 Study the homoeopathic implications of neurobiological foundations of Psychiatry <u>Cognitive/Knowledge:</u> Discuss the implication of in Homoeopathy with respect to a) Susceptibility b) Sensitivity c) Reactivity d) Vitality e) Relevant rubrics f) Materiamedica indications <u>Psychomotor/ Skill:</u> Assess the onset, duration, progression, susceptibility, fundamental and dominant miasm, hunting the rubrics in repertory, differentiating the remedies based on the presentation <u>Reflection:</u> Able to apply the knowledge of neurobiology to Organon, HMM and Repertory
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Homoeopathic Orientation

Course Name: HOM - PG – PS – 02 Psychosocial foundations of Psychiatry and the homoeopathic implications

Learning Outcomes	Competency 3 Studying the Psychosocial foundations of Psychiatry <u>Cognitive/knowledge</u> Discuss the psychological determinants- psychodynamics, stress and conflict, defence mechanisms, psychological pre-disposing factors, precipitating and maintaining factors Discuss the Social determinants- social predisposing, precipitating and maintaining factors Recall the developmental traits responsible for the evolution of individual and species. Recall the aphorism 6 of Organon of Medicine <u>Skill :</u> Display the skill of case taking and case receiving with the help of this knowledge <u>Reflection:</u> Relate the concept of Organon with the understanding the psychosocial foundations of Psychiatry.
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE

	Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Professionalism

Course Name: HOM - PG -- PS – 03- Concept of Personality and various approaches with homoeopathic implications

Learning Outcomes	<p>Competency 4</p> <p>Understanding the basic concept of Personality</p> <p><u>Cognitive/knowledge</u> a) Personality b) Trait c) Temperament d) Definition e) Types f) Theoretical basis g) Temperaments in Homoeopathy</p> <p><u>Skill/ Psychomotor:</u> Identifying the trait, temperament and personality in cases</p> <p><u>Reflection:</u> Recognizing the concept of trait, temperament and personality and their application in cases.</p>
Learning Outcomes	<p>Competency 5</p> <p>Understanding Sigmund Freud’s psychosexual approach and its case application</p> <p><u>Cognitive/knowledge</u> Define and discuss- a) Structure of the mind b) Levels of consciousness c) Psychosexual theory d) Defense mechanisms</p> <p><u>Skill :</u> Demonstrate Freud’s structure of mind in cases Identify the Id-Ego-Superego balance in cases Define the problem of the patient with the help of the theoretical concept.</p> <p><u>Reflection:</u> Recognizing the Freudian concepts to cases and their Homoeopathic applications.</p>
Learning Outcomes	<p>Competency 6</p> <p>Learn the concepts of the Neo-Freudian Theories</p> <p><u>Cognitive/knowledge</u> Discuss the theoretical concepts of Neo-Freudian theories by 1. Alfred Adler- Recall Adler’s personality theory in detail Carl Jung- Recall Jungian concept of Complexes, Archetypes, Unconscious (personal and collective), Symbols and Personality structure 2. Eric Fromm- Recall Fromm’s personality theory in detail</p>

	<p>Kohlberg- Recall the stages of moral development</p> <p>3. Harry Stack Sullivan- Discuss Sullivan's Interpersonal theory in detail</p> <p>Erik Erikson- Recall the stages of psychosocial theory</p> <p>4. John Bowlby- Recall the attachment styles and stages of attachment</p> <p><u>Skill :</u></p> <p>Apply the concept Neo-Freudian theories in cases</p> <p>Define the problem of the patient with the help of the theoretical concept.</p> <p><u>Reflection:</u></p> <p>Recognizing the Neo-Freudian theories in cases and their Homoeopathic applications.</p>
Learning Outcomes	<p>Competency 7</p> <p>Studying the various personality theories-</p> <p><u>Cognitive/knowledge</u></p> <p>Discuss the Personality theories in detail</p> <p>a) Trait theories b) Behavioural c) Humanistic</p> <p>d) Social learning theories</p> <p><u>Skill :</u></p> <p>Demonstrate the application of the theories in understanding psychopathology and utility in Homoeopathy.</p> <p>Apply the knowledge of personality to arrive at the similimum</p> <p><u>Reflection:</u></p> <p>Recognizing the Personality theories in relation to fundamentals of Homoeopathy and their application in cases.</p>
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE <p>Written Examinations: Problem Based Learning assessment: LAQ SAQ</p>
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Practice based learning / Professionalism

Course Name: HOM - PG -- PS -- 04: History and Evolution of Psychiatry in the West and India and the contribution of Homoeopathy

Learning Outcomes	<p>Competency 8</p> <p>History and Evolution of Psychiatry in the West and India and the contribution of Homoeopathy</p> <p><u>Cognitive/knowledge</u></p> <p>Discuss the history of Psychiatry dating back to Greek and Roman including in India up to recent advancements of DSM and ICD.</p> <p>Know the contribution of pioneers who contributed to the movement of</p>
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	psychiatric thought Recall Hahnemannian concept of mental illnesses Compare general concept of Psychiatry with Hahnemannian concept <u>Skill :</u> Applying the knowledge of classification as per DSM V and ICD 11 to arrive at a probable diagnosis <u>Reflection:</u> Reflect the Historical evolution of Psychiatry and its correlation with Homoeopathy
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/Homoeopathic Orientation

Course Name: HOM- PG -- PS -- 05: Case receiving and Examination of Psychiatric patient(adult and children)

Learning Outcomes	Competency 9 Receiving a psychiatric case- case taking, case receiving, psychiatric interview and examination in adult and children <u>Cognitive/knowledge</u> Discuss the structure and sequence of a child interview Enumerate and discuss Child Interview techniques and examination- play techniques, projective techniques and direct questioning and mental status examination Discuss the steps of interviewing and examination of adult psychiatric patient- emphasize on interview techniques and mental status examination. <u>Skill :</u> Display the skill of case receiving in a psychiatric interview Demonstrate the techniques of interview Conduct a mental status examination <u>Reflection:</u> Reflect the concept of case receiving and examination in a psychiatric interview with unprejudiced.
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Practice based learning / Professionalism

Course Name: HOM - PG -- PS -- 06: Clinical manifestations of Psychiatric disorders and understanding of psychopathology

Learning Outcomes	Competency 10 Understanding the clinical manifestations of Psychiatric disorders Studying psychiatric symptomatology <u>Cognitive/knowledge</u> Discuss the significance and inter-relation between the basic psychological processes Classify the psychiatric symptomatology- <u>Skill :</u> Demonstrate case taking of psychiatric patients Elicit the mental status examination with the knowledge of symptomatology Arrive at a probable diagnosis or spectrum <u>Reflection:</u> Reflect the symptomatology of psychiatric cases and arrive at the probable diagnosis
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Practice based learning

Course Name: HOM - PG -- PS -- 07: Classification of Psychiatric disorders and correlation with the Hahnemannian approach

Learning Outcomes	Competency 11 Studying the evolution of the classification of Psychiatric disorders Studying Hahnemannian classification of Psychiatric disorders <u>Cognitive/knowledge</u> Discuss the evolution of the classification of Psychiatric disorders Discuss the evolution of DSM and ICD Compare and contrast DSM versus ICD Recall the salient features of DSM-5 and ICD-11 Discuss the Hahnemannian classification of Psychiatric disorders (Aphorism 210-230)
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	<p>Skill :</p> <p>Apply the knowledge of classification as per DSM V and ICD 11 to arrive at a probable diagnosis</p> <p>Apply the knowledge of Hahnemannian classification of mental disorders and management strategies to cases</p> <p>Reflection:</p> <p>Reflect the classification of Psychiatric disorder and Hahnemannian classification to arrive at a clinical and Hahnemannian diagnosis.</p>
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation

Course Name: HOM - PG -- PS -- 08: Diagnostic process in Psychiatry and correlation with Hahnemannian diagnosis

Learning Outcomes	<p>Competency 12</p> <p>Diagnostic process in psychiatry and correlation with Hahnemannian diagnosis</p> <p><u>Cognitive/knowledge</u></p> <p>Discuss the basic psychological processes in arriving at a diagnosis.</p> <p>Recall the parameters to derive the Hahnemannian diagnosis- onset, duration, progression, susceptibility, sensitivity, reactivity, causation, etc.</p> <p>Discuss in detail the indications, structure, evolution and interpretation of different psychometric tests- Personality tests (objective and projective), IQ assessment, scales for autism, etc.</p> <p>Recall the indications for lab investigations- radiological tests, CT scan, MRI, haematological investigation, etc.</p> <p>Define diagnostic formulation and explain the general principles and structure of diagnostic formulation</p> <p>Skill :</p> <p>Construct the Conation-Cognition-Affect model to diagnose a psychiatric clinical condition</p> <p>Arrive at the diagnostic formulations of cases of psychiatric disorders.</p> <p>Apply the concept of susceptibility and sensitivity to cases</p> <p>Apply the knowledge of classification of Psychiatric disorder as mentioned in Organon of Medicine to arrive at the Hahnemannian diagnosis</p> <p><u>Reflection:</u></p> <p>Reflect the process of arriving at a clinical and Hahnemannian diagnosis</p>
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE

	<ul style="list-style-type: none"> Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Practice based learning / Professionalism

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Psychiatry	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Psychiatry	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20

Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 1. Course Numbers

- HOM- PG -- PS -- 01: Neuro-biological foundations of Psychiatry and the homoeopathic implications
- HOM- PG -- PS -- 02: Psychosocial foundations of Psychiatry and the homoeopathic implications
- HOM -PG -- PS -- 03: Concept of Personality and various approaches with homoeopathic implications
- HOM- PG -- PS --04: History of Psychiatry in the West and India and correlation with Homoeopathy
- HOM- PG -- PS -- 05: Case receiving and Examination of Psychiatric patient(adult and children)
- HOM- PG -- PS -- 06: Clinical manifestations of Psychiatric disorders and understanding of psychopathology
- HOM- PG --PS -- 07: Classification of Psychiatric disorders and correlation with the Hahnemannian approach
- HOM - PG -- PS -- 08: Diagnostic process in Psychiatry and correlation with Hahnemannian diagnosis

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-PS– 02 OR 03 OR 06 OR 08	20
2	LAQ	HOM-PG-PS – 04 OR 01	10
3	LAQ	HOM-PG-PS – 05 OR 07	10
4	LAQ	HOM-PG-PS – 03 OR 02	10
5	LAQ	HOM-PG-PS – 06 OR 08	10
6	SAQ	HOM-PG-PS – 01	5
7	SAQ	HOM-PG-PS – 08	5
8	SAQ	HOM-PG-PS – 02	5
9	SAQ	HOM-PG-PS – 07	5
10	SAQ	HOM-PG-PS – 06	5
11	SAQ	HOM-PG-PS – 03	5
12	SAQ	HOM-PG-PS – 04	5
13	SAQ	HOM-PG-PS – 05	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

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Note: Part I Paper 2 separately after Part II Paper 1 & 2.

Part II Paper 1,2

V. Courses and Course Objectives.

Part II – Paper I:

All clinical states will include the homoeopathic application and hence will include

- i) Homoeopathic case taking
- ii) Hahnemannian classification
- iii) Causation including correlation with biological and psychosocial correlates
- iv) Psychological correlation with miasmatic states
- v) Assessment of susceptibility
- vi) Approach to totality and processing
- vii) Homoeopathic and ancillary management including differential Materia Medica
 - HOM - PG – PS – 09: Homoeopathy in Common Mental Disorders
 - HOM - PG – PS – 10: Homoeopathy in Major Psychiatric disorders
 - HOM - PG –PS –11: Scope and limitation of Homoeopathy in Substance related disorders
 - HOM -PG -PS- 12: Scope and limitation of Homoeopathy in Emergency Psychiatry and Acute Organic syndromes
 - HOM -PG - PS -13: Scope and limitation of Homoeopathy in Personality disorders including disorders of Impulse control
 - HOM - PG - PS -14: Scope and limitation of Homoeopathy in Sexuality, Sexual dysfunction and Gender identity disorders
 - HOM -PG - PS -15: Homoeopathy in Eating and Sleeping disorders

Part II – Paper 2:

- HOM - PG–PS– 16 Psychosomatic disorders
- HOM - PG – PS– 17: Homoeopathy in Geriatric Psychiatry including illnesses involving Cognitive decline
- HOM -PG --PS --18: Homoeopathy in Special situations: PTSD, Culture bound syndromes, Adjustment disorder and Factitious disorder and Liaison Psychiatry
- HOM -PG -- PS -- 19: Child Psychiatry
- HOM - PG--PS--20: Preventive aspects of Mental Disorders, Psychotherapies, Psychopharmacological treatments, Rehabilitative Psychiatry. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness
- HOM -PG – PS– 21: Homoeopathy in Community Psychiatry and National Mental Health Programmes
- HOM- PG – PS – 22: Forensic Psychiatry, Mental Health Act 2017 and Ethics of Psychiatric treatments

VI. Course description

Part- II/ PAPER-I

Course name: HOM-PG – PS – 09 Common Mental Disorders

Course Overview:	<p>This course will provide students of MD Homoeopathic Psychiatry with a general conceptual and evidence-based approach for the application of Homoeopathy In common mental disorders</p> <ul style="list-style-type: none">• Anxiety disorders including Panic disorders and phobias
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	<ul style="list-style-type: none"> • Somatoform disorders • Dissociative disorders • Obsessive compulsive disorders
Learning Outcomes:	<p>Competency- 13 : Students should demonstrate a basic ability to elicit a psychiatric history, showing awareness of key areas of importance for diagnosing in cases of Anxiety disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Recognize alteration of normal anxiety to an abnormal state • Recognize and explain the neurological/Biological aspects of Anxiety disorders • Describe Anxiety disorders its types, clinical presentation, diagnostic criteria, scale to evaluate and management • Illustrate the clinic-psycho-pathological correlation of Anxiety disorders and its types, integrate these with mental diseases understanding from Organon of medicine <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> • Trace the relevant information from patient, and from bystanders • Identify and assemble the relevant observations on records • Trace the pre-morbid and morbid state. • Collect developmental history effectively along with psychodynamics of the case • Perform General medical examination, • Perform Mental status examination • Perform and interpret necessary investigations • Assess report of basic investigations to identify and rule out if any biological conditions responsible • Construct the homoeopathic diagnosis as per Hahnemann or various stalwarts of Homoeopathy • Construct the totality of symptoms with as per Organon of medicine • Choose the suitable repertory appropriate to the Case for repertorization • Select the appropriate similimum with reference to Materiamedica • Explain the patient or patient caretaker plan of treatment <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Review scope and limitation of management of current or the chronic state of the patient with anxiety disorder • Generate and publish case reports or case series from various clinical experiences <p>Competency 14: Students should demonstrate a basic ability to elicit a psychiatric history, showing awareness of key areas of importance for diagnosing in cases of Somatoform disorders</p>

Cognitive/Knowledge:

- Describe the clinical features of somatoform disorders
- Recall and describe somatoform disorders and its types, clinical presentation, diagnostic criteria, scale to evaluate and management
- Evolve clinic-psycho-pathological correlation of somatoform disorders and its types, integrate these with mental diseases understanding from Organon of medicine
- Justify the application of homoeopathic philosophies in psychiatric cases of somatoform disorders

Procedure/skill:

- Organize by gathering the relevant clinical and personal information from patient, and from bystanders by demonstrating the compassion
- Identify and record relevant observations
- Detect pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case
- Conduct General medical examination,
- Conduct Mental status examination
- Perform and interpret appropriate investigation
- Classify the diseases as per Hahnemann and various stalwarts' guidelines.
- Demonstrate General management/Supportive therapy care
- Select appropriate repertory and perform repertorial analysis
- Select appropriate similimum with due reference to Materia medica.
- Explain the patient/care takers regarding plan of treatment.

Reflection:

- Review scope and limitation of management of current or the chronic state of the patient with somatoform disorders
- Generate and publish case reports or case series from various clinical experiences

Competency 15:

Identify and Diagnose, Dissociative disorders

Cognitive/Knowledge:

- Recall and Describe Dissociative Disorders its types , classification, diagnostic criteria and general management
- Illustrate the use of various scales to evaluate and manage cases of dissociative disorders
- Compare the Classification of the diseases per Hahnemann and various stalwarts

Procedure/skill:

- Demonstrate the psychiatric interview techniques for gathering relevant clinical and psychological information from patient, or bystanders.
- Assemble all the relevant observations on record

- Trace the pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case
- Conduct General medical examination,
- Conduct Mental status examination
- Select ICD11, DSM V for diagnosis
- Construct the disease classification as per Hahnemann or various stalwarts of Homoeopathy
- Construct the totality of symptoms with as per Organon of medicine
- Select appropriate repertory for repertorization
- Select the appropriate similimum with reference to Materia medica
- Explain the patient or patient caretaker plan of treatment
- Plan for ancillary measurements in various conditions

Reflection:

- Orient and guide the patient and relatives about the disease, its prognosis and further management plan over the course of time in acute or chronic cases
- Review the Scope and limitation of homoeopathy for these conditions and plan out therapeutic plan based on clinical experiences
- Generate and publish case reports or case series from various clinical experiences

Competency 16:

Identify and diagnose Obsessive compulsive disorders

Cognitive/Knowledge:

- Describe Obsessive compulsive Disorders and its related disorders. Their classification, aetiology, clinical features, diagnostic criteria as per ICD 11/DSM V, scales to evaluate and its management
- Compare the Classification of the disorder as per Hahnemann and various stalwarts

Procedure/skill:

- Perform psychiatric interview to gather relevant information from patient, and from bystanders
- Identify and Record relevant observations
- Detect pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case
- Conduct General medical examination,
- Conduct Mental status examination
- Select ICD11, DSM V for diagnosis
- Perform and interpret appropriate investigation
- Construct disease classification as per Hahnemann and various stalwarts' guidelines.
- Organize general management/Supportive therapy care

	<ul style="list-style-type: none"> Construct the totality of symptoms as per Principles of Organon of medicine. Select appropriate repertory and perform repertorial analysis Select appropriate similimum with due reference to Materia medica. Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> Scope and limitation of homoeopathy for Obsessive compulsive disorders Prepare and publish case report or case series from vast clinical experiences
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM-PG – PS – 10 Homoeopathy in Major psychiatric disorders

Course Overview:	<p>This course will provide students of MD Homoeopathic Psychiatry with knowledge about Major psychiatric cases and role of homeopathy in understanding and management of major psychiatric conditions viz.</p> <ul style="list-style-type: none"> Mood disorders Schizophrenia spectrum disorders
Learning Outcomes:	<p>Competency 17: Recognize the concept of general philosophy as applied in homoeopathy in co-relation to Mood disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> List and state Mood and its qualities in normal expression along with travel to abnormality Explain Mood disorder/s, its prevalence and symptoms Recognize and explain the neurological/biological/psychological aspects of mood disorder/s Recall and describe mood disorders and its types, clinical presentation, diagnostic criteria, scale to evaluate and management Illustrate clinic-psycho-pathological correlation of mood disorders and its types, integrate these with mental diseases understanding from Organon of medicine

- Justify the application of individualization in the cases of Mood disorders

Procedure/skill:

- Perform the psychiatric interview and gather relevant information from patient, and from bystanders
- Identify and record relevant observations
- Detect pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case/s
- Conduct General medical examination,
- Conduct Mental status examination
- Use ICD11, DSM V for diagnosis
- Construct disease classification as per Hahnemann and various stalwarts' guidelines.
- Sketch General management/Supportive therapy care
- Construct the totality of symptoms as per Principles of Organon of medicine using appropriate repertory
- Select appropriate similimum with due reference to Materiamedica.
- Explain the patient/care takers regarding plan of treatment.

Reflection:

- To understand the scope and limitation of holistic, individualization concepts of homoeopathy for Mood Disorder cases
- Write an original article on the concept/s and its application in mental health, illness and cure.

Competency 18:

Know, remember and apply the role of homoeopathy in cases of Schizophrenia spectrum disorders

Cognitive/Knowledge:

- Recall and describe perception, its qualities and its alteration to abnormality
- Recall and describe Schizophrenia spectrum disorders its types, clinical presentation, diagnostic criteria, scale to evaluate and management
- Comparing the different ways in which ICD 11 and DSM V approach the classification of schizophrenia spectrum disorders
- Describe the neurodevelopmental and neurodegenerative aspects of Schizophrenia spectrum disorders
- Explain clinic-psycho-pathological correlation of schizophrenia spectrum disorders and its types, integrate these with mental diseases understanding from Organon of medicine
- Explain various therapeutic measures to manage cases of schizophrenia

Procedure/skills:

	<ul style="list-style-type: none"> Organize relevant information from patient, and from bystanders on record Identify and Record relevant observations Detect the pre-morbid and morbid state. Trace the developmental history effectively along with psychodynamics of the case/s Conduct General medical examination, Conduct Mental status examination Perform and interpret appropriate investigation Construct the classification of the diseases as per Hahnemann and various stalwarts' guidelines. Sketch General management/Supportive therapy care Construct the totality of symptoms as per Principles of Organon of medicine. Select appropriate repertory and perform repertorial analysis Select appropriate similimum with due reference to Materia medica. Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u> Scope of homoeopathic in Schizophrenia spectrum disorders Prepare and publish case report/s or case series on these conditions</p>
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM-PG – PS – 11 Scope and limitation of homoeopathy in Substance related disorders

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy for Substance related and addictive disorders
Learning Outcomes:	<p>Competency19:</p> <p>Review Scope and limitation of homoeopathy for Substance related and addictive disorders viz. (Alcohol, Tobacco, Cannabis, Cocaine, Caffeine, Hallucinogens, Inhalant, Methadone, Amphetamines etc.)</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Recall and describe the type and uses of various substances along with their psycho-neurological actions Recall and describe the Bio-psycho-social factors which underlie the substance related and addictive disorders

	<ul style="list-style-type: none"> • Illustrate clinic-psycho-pathological correlation of substance related and addictive disorders, its types, integrate these with mental diseases understanding from Organon of medicine explain the integration of the fundamental and dominant miasms in the causation of Substance related and addictive disorders • Illustrate the concept of susceptible constitutions and relate to the determinants of Substance related and addictive disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Conduct psychiatric interview to gather relevant information from patient, and from bystanders • Identify and Record relevant observations • Trace the pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Perform and interpret appropriate investigation • Construct the classification as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Substance related and addictive disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM - PG – PS – 12Scope and limitation of homoeopathy in Emergency Psychiatry and Acute organic Syndromes

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy in cases of Psychiatric emergencies and acute organic syndromes
Learning	Competency20:

Outcomes:	<p>Review Scope and limitation of homoeopathy in cases of emergency Suicide, Acute Psychotic episodes, Violent patients, Neglect or abuse in children etc. in psychiatry and acute organic disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • State the type of psychiatric emergencies are and their clinical presentations • Describe various challenges and steps required to manage psychiatric emergencies from psychiatric texts and Hahnemannian guidelines • Discuss and explain the Bio-psycho-social factors which underlie various psychiatric emergencies • Explain the concept of susceptible constitutions and relate to the determinants of Substance related and addictive disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Isolate the patient or vacant the casualty room for patient/s, nursing staffs and themselves • Assemble all the relevant information gathered from patient, and from bystanders • Display the relevant observations • Conduct the medical and psychiatric triage • Trace the pre-morbid and morbid state. • Conduct General medical examination, • Conduct Mental status examination • Use ICD11, DSM V for diagnosis • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Perform the restrain processes effectively • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Psychiatric emergencies • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains	of Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Competencies	/ Practice Based Learning
Learning Outcomes:	<p>Competency 21:</p> <p>Review Scope and limitation of homoeopathy in cases of acute organic disorders (Delirium, Acute confusion state, Intoxications, Organic psychosis, Transient amnesia etc) and organic brain syndrome(dementia)</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • State the type of acute organic syndromes and their clinical presentations • Describe various challenges and steps required to manage acute organic syndromes from psychiatric texts and Hahnemannian guidelines • Describe various challenges and steps required to manage organic brain syndrome from psychiatric texts and Hahnemannian guidelines • • Discuss and explain the Bio-psycho-social factors which underlie various psychiatric emergencies • Explain the concept of susceptible constitutions and relate to the determinants of Substance related and addictive disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Isolate the patient or vacant the casualty room for patient/s, nursing staffs and themselves • Assemble all the relevant information gathered from patient, and from bystanders • Display the relevant observations • Conduct General medical examination, • Conduct Mental status examination • Conduct the neuropsychiatric mental status examination • Use ICD11, DSM V for diagnosis • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Perform the restrain processes effectively • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Acute organic syndromes • Scope and limitation of homoeopathy for organic brain syndrome • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders

Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM-PG – PS – 13Scope and limitation of homoeopathy in Personality disorders including disorders of impulse control

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy for cases of Personality and Impulse control disorders
Learning Outcomes:	<p>Competency 22:</p> <p>Review Scope and limitation of homoeopathy in cases of personality disorders as per ICD 11 Trait qualifier and specifiers (Mild, Moderate or severe personality disorder), and disorders of impulse control (Intermittent explosive disorders, kleptomania, pyromania, Gambling, Internet/porn addictions)</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Recall and describe the type and their features of various personality disorders and impulse control disorders • Describe various Bio-Psycho-Social causes of various personality and impulse control disorders • Illustrate the integration of the fundamental and dominant miasms in the causation of Personality and Impulse control disorders • Estimate the nature of susceptible constitutions and relate to that with personality and impulse control disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Perform psychiatric interview to Gather relevant information from patient, and from bystanders • Identify and Record relevant observations • Trace the pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Perform and interpret appropriate investigation • Use ICD11, DSM V for diagnosis • Construct the disease classification as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine.

	<ul style="list-style-type: none"> • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p>Reflection:</p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Personality and Impulse control disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM- PG – PS – 14 Scope and limitation of homoeopathy in Sexuality, Sexual dysfunction and Gender identity disorders

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy in Sexuality, Sexual dysfunction (Hypoactive sexual desire, Sexual arousal disorders, Erectile dysfunction, Orgasm disorders, Sexual pain disorders, Premature ejaculation etc) and gender identity disorders (Gender dysphoria)
Learning Outcomes:	<p>Competency23:</p> <p>Review Scope and limitation of homoeopathy in Sexuality, Sexual dysfunctions and Gender identity disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Recall and describe the normal sexuality and its development over the course of time • Describe various psychosexual factors like sexual identity, gender identity and sexual orientation • Describe the types of sexual dysfunctions of each genders • Describe Gender dysphoria with its clinical features • Describe the Bio-psycho-social factors which underlie the sexual dysfunctions and gender identity disorders • Illustrate the integration of the fundamental and dominant miasms in the causation of Sexual dysfunction and gender identity disorders • Apply the concept of susceptible constitutions and relate to the determinants of Sexual dysfunction and gender identity disorder cases <p><u>Procedure/Skills:</u></p>

	<ul style="list-style-type: none"> • Conduct psychiatric interview to gather relevant information from patient, and from bystanders • Demonstrate the elaborative and effective sex history evaluation • Identify and record relevant observations • Trace pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Select ICD11, DSM V for diagnosing • Perform and interpret appropriate investigation • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p>Reflection:</p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Sexual dysfunction and Gender identity disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM - PG – PS – 15 Homoeopathy in Eating and Sleeping disorders

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy in Eating and Sleeping disorders
Learning Outcomes:	<p>Competency 24:</p> <p>Review Scope and limitation of homoeopathy for Eating and Sleeping disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Describe Eating and Sleeping disorders with their types and clinical features

	<ul style="list-style-type: none"> • Describe various etiological factors from Bio-Psycho-Social perspective responsible for genesis of these disorders • State the use of various scales for assessment and management of these disorders • Illustrate the integration of the fundamental and dominant miasms with the causation of these disorders • Apply the concept of susceptible constitutions and relate to the determinants of these disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Conduct the psychiatric interview and gather relevant information from patient, and from bystanders • Identify and record relevant observations • Trace pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Use ICD11, DSMV for diagnosis • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Eating and Sleeping disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Part II (Paper 2):

Course name: HOM - PG – PS – 16 Homoeopathy in Psychosomatic Disorders

Course Overview:	<p>This course will provide students of MD Homoeopathic Psychiatry to review and explore scope of homoeopathic in Psychosomatic Disorders</p> <ul style="list-style-type: none"> • Somatic symptom disorder affecting different systems
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	<p>(Functional GIT, palliative condition like Cancer)</p> <ul style="list-style-type: none"> • Illness anxiety disorder <p>Functional neurological symptom disorders</p>
Learning Outcomes:	<p>Competency25:</p> <p>Review and explore scope of homoeopathic psychiatry in Psychosomatic disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> ▪ Recall and discuss the concept of Psychosomatic medicine and psychosomatic disorders ▪ Recall and describe various types of psychosomatic disorders and differentiate their clinical features ▪ Discuss various trends in understand and evaluating the cases of psychosomatic disorders ▪ Describe the Bio-Psycho-Social concept of etiopathogenesis of Psychosomatic disorders and integrate it with the concept of causation as per Homoeopathic philosophy ▪ Describe the general guidelines of managing these conditions and co-relate with the Hahnemannian guidelines of management <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> ▪ Conduct psychiatric interview to gather relevant information from patient, and from bystanders ▪ Identify and Record relevant observations ▪ Trace the pre-morbid and morbid state. ▪ Trace the developmental history effectively along with psychodynamics of the case ▪ Perform and interpret appropriate investigation for differentiating between medical condition and the psychosomatic disorders ▪ Perform General medical examination ▪ Conduct Mental status examination ▪ Select ICD11, DSMV for diagnosis ▪ Classify the diseases as per Hahnemann and various stalwarts' guidelines. ▪ Give General management/Supportive therapy care, like palliative care in conditions like cancer ▪ Arrive at the totality of symptoms as per Principles of Organon of medicine. ▪ Select appropriate repertory and perform repertorial analysis ▪ Select appropriate similimum with due reference to Materiamedica. <p>Explain the patient/care takers regarding plan of treatment.</p> <p><u>Reflection:</u></p> <p>Explore scope of homoeopathic psychiatry in cases of Psychosomatic Disorders</p>

Course name: HOM-PG – PS – 17 Homoeopathy in Geriatric psychiatry including illness involving cognitive decline

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry understanding and application of Homoeopathy in Geriatric psychiatry (Delirium, Depressive disorders, Late life depression, psychosis) and illness involving cognitive decline (Neurocognitive disorders- Major or Minor, illness related)
Learning Outcomes:	<p>Competency: 26</p> <p>Review and explore scope and limit of homoeopathic psychiatry in Geriatric psychiatry and cognitive decline.</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> ▪ Describe the age and aging along with bio-psycho-social changes ▪ Describe and explain the old age development according to various psychologists viz. Freud, Erickson etc. ▪ Illustrate and explain the neuropsychological evaluation in cases of geriatric cases ▪ Compare and illustrate a sound understanding of the Bio-Psycho-Social concept of etiopathogenesis in Geriatric psychiatric cases and integrate it with the concept of causation as per Homoeopathic philosophy <p><u>Procedure/skills:</u></p> <ul style="list-style-type: none"> ▪ Select to secure the causality for themselves, for patients, for nursing staff etc. ▪ Trace the relevant information from patient, and from bystanders ▪ Identify and record relevant observations ▪ Trace the pre-morbid and morbid state. ▪ Trace the developmental history effectively along with psychodynamics of the cases ▪ Perform General medical examination, ▪ Conduct Mental status examination ▪ Conduct neuropsychiatric mental status examination or MMSE ▪ Select ICD11, DSM V for diagnosis ▪ Assess the need for any of the active investigations like EEG, CT, MRI etc. ▪ Construct the disease classification as per Hahnemann and various stalwarts' guidelines. ▪ Sketch the general management/Supportive therapy care ▪ Construct the totality of symptoms as per Principles of Organon of medicine. ▪ Select appropriate repertory and perform repertorial analysis ▪ Select appropriate similimum with due reference to Materiamedica. ▪ Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> ▪ Explore scope and limit of homoeopathy in Geriatric Psychiatry and cases with cognitive disorders ▪ Formulate a paper on the role of homoeopathy in emergency psychiatry conditions
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE

	<ul style="list-style-type: none"> Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domain competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM-PG – PS – 18 Homoeopathy in special situations: PTSD, Culture bound syndromes, adjustment disorder and factitious disorder and Liaison psychiatry

Course Overview:	<p>This course will provide students of MD Homoeopathic Psychiatry an exposure to understand and experience the role and scope of Homeopathy in various special situations-</p> <p>PTSD Culture bound syndromes Adjustment disorders Factitious disorders Liaison psychiatry</p>
Learning Outcomes:	<p>Competency27: Identify and diagnose cases of PTSD, Culture bound syndrome, Adjustment disorders and apply the understanding of Liaison psychiatry</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Define above mentioned psychiatric conditions with their clinical features Describe various Bio-Psycho-Social factors responsible for the development of these psychiatric conditions Diagnose these conditions with use of various psychiatric classification systems Describe and justify the relationship between medical and psychiatric disorders <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> Demonstrate the collection of relevant information from patient, and from bystanders Identify and record relevant observations Identify and record pre-morbid and morbid state. Trace the developmental history effectively along with psychodynamics Perform General medical examination, Perform Mental status examination Diagnose as per ICD11, DSMV Perform and interpret appropriate investigation Classify the diseases as per Hahnemann and various stalwarts' guidelines. Demonstrate the relation between medical condition with that of psychiatric aspects and guide the general management/Supportive therapy care Construct the totality of symptoms as per Principles of Organon of medicine. Select appropriate repertory and perform repertorial analysis Select appropriate similimum with due reference to Materiamedica.

	<ul style="list-style-type: none"> Explain the patient/care takers regarding plan of treatment. <u>Reflection:</u> <ul style="list-style-type: none"> Scope and limitation of homoeopathy for special situations and as an liaison psychiatry Prepare and publish case report or case series from vast clinical experiences
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage) Practical exam - 100% Written Examinations: 2 x 3 hour written papers. 80%
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning
Learning Outcomes:	<p>Competency 28: Describe role and scope of homoeopathy in Liaison psychiatry</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Define consultation liaison psychiatry Describe various clinical conditions which call for the need of consultation liaison psychiatry Describe role of consultation liaison psychiatry in special situations Describe the role of homoeopathic psychiatrist as an active in field of consultation psychiatry <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> Demonstrate the method of consulting across multiple specialties needing the assistance of a homoeopathic psychiatrist Demonstrate the method of evolving a relationship with patients/relatives across the wide spectrum of clinical conditions needing the intervention of homoeopathic psychiatrist Demonstrate the method of assessing the mental health needs of patients across the spectrum needing the assistance of homoeopathic psychiatrist Demonstrate the method of advising effective and meaningful intervention in referred patients and the follow up Demonstrate the method of advising the consultants of other specialties who have sought assistance for their patients. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> Scope and limitation of homoeopathy for special situations and as an liaison psychiatry Prepare and publish case report or case series from vast clinical experiences
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM-PG – PS – 19 Homoeopathy in Child Psychiatry

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry an exposure to understand and experience the role and scope of Homeopathy in child psychiatry – Intellectual Disability, Learning Disability, Communication disorders, PDD, ADD, Conduct, Elimination disorder, School mental health, Anxiety, Mood and Psychotic disorders
Learning Outcomes:	<p>Competency29:</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Describe the developmental disorders of speech and language Describe specific developmental disorders of scholastic skills Describe Pervasive developmental disorders and its clinical features Describe and discuss anxiety, mood and psychotic disorders in children Describe the conduct disorders and its clinical features Plan and organize school mental health activities to identify and address child psychiatric conditions <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> Demonstrate the collection of relevant information from children, care takers or teachers Identify and record relevant observations Identify and record pre-morbid and morbid state. Trace the developmental history effectively Perform General medical examination, Perform Mental status examination Diagnose as per ICD11, DSM V Perform and interpret appropriate investigation, Tests etc. Classify the diseases as per Hahnemann and various stalwarts' guidelines. Construct the totality of symptoms as per Principles of Organon of medicine. Select appropriate repertory and perform repertorial analysis Select appropriate similimum with due reference to Materia medica. Explain the patient/care takers regarding plan of treatment <p><u>Reflection:</u></p> <p>Scope of Homoeopathy in childhood disorder. Write and publish articles on various case experiences</p>
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation

Competencies	/ Practice Based Learning
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Course name: HOM-PG – PS – 20 Preventive aspects of Mental Disorders, Psychotherapies, Psychopharmacological treatment, Rehabilitative Psychiatry. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry understanding and application of Homoeopathy for Preventing mental illnesses, Rehabilitation of psychiatric conditions and role of Psychotherapies in their management
Learning Outcomes:	<p>Competency 30:</p> <p>Review Scope & limitations knowledge related to Psychotherapies and Psychopharmacological treatment. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> ▪ Plan and organize mental health promotion activities in various fields ▪ Describe and justify the use of various psychotherapies in various psychiatric conditions ▪ Describe and explain the role of various modern psychiatric drugs and their effects/side effects ▪ Define and state the importance of aphorism 210 to 230 <p><u>Procedure/skills:</u></p> <ul style="list-style-type: none"> • Demonstrate the application of preventive aspect of psychiatry by conducting various awareness camps • Measure the effect of various psychotherapies on various psychiatric conditions • Measure the effect of various psychopharmacological drugs for planning the homoeopathic posology • Demonstrate the comparative effects of Homoeopathy with other system for management of mental illness <p><u>Reflection:</u></p> <p>Scope & limitations of Homoeopathy in comparison to other systems of medicine in Preventive and rehabilitative aspects of mental illnesses</p>
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM-PG – PS – 21 Homoeopathy in Community psychiatry and National mental health programmes

Course Overview:	This course will provide students of MD Homoeopathic Psychiatry understanding and application of Homoeopathy in community care and their role in various National mental health programmes
Learning Outcomes:	<p>Competency 31:</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Describe various mental health promotional activities in community care Describe national mental health and its various policies Plan and organize community activities as per need under guidelines of National mental health programmes <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> Demonstrate the active role in planning and conducting mental health related activities in community Measure various clinical conditions prevalence in community and use of various scales <p><u>Reflection:</u></p> <p>Scope of Homoeopathy in community psychiatry and role in National mental health programmes</p>
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Course name: HOM- PG – PS – 22Forensic Psychiatry, Mental Health Act 2017 and ethics of psychiatry treatment

Course Overview:	This course will provide MD Homoeopathy Psychiatry students the knowledge related to forensic psychiatry and various ethics required in practice of psychiatry practices
Learning Outcomes:	<p>Competency 32:</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Describe forensic psychiatry and its role for homoeopaths Describe mental health care act 2017 and various striking features Describe various ethics in psychiatric practices <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> Demonstrate the application of above knowledge in handling and management of psychiatric cases in various health care set ups <p><u>Reflection:</u></p> <p>Scope of forensic psychiatry and ethics in psychiatry for Homoeopathic psychiatrists</p>
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ

	<ul style="list-style-type: none"> Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Psychiatry	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Psychiatry	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 2 – Paper 1. Course Numbers

- HOM-PG – PS – 09: Homoeopathy in Common Mental Disorders
- HOM-PG – PS – 10: Homoeopathy in Major Psychiatric disorders
- HOM-PG –PS –11: Scope and limitation of Homoeopathy in Substance related disorders
- HOM- PG -PS- 12: Scope and limitation of Homoeopathy in Emergency Psychiatry and Acute Organic syndromes
- HOM-PG - PS -13: Scope and limitation of Homoeopathy in Personality disorders including disorders of Impulse control
- HOM-PG - PS -14: Scope and limitation of Homoeopathy in Sexuality, Sexual dysfunction and Gender identity disorders
- HOM-PG - PS -15: Homoeopathy in Eating and Sleeping disorders

Part 2 – Paper 2: Course Numbers

- HOM- PG–PS– 16 Psychosomatic disorders
- HOM- PG – PS– 17: Homoeopathy in Geriatric Psychiatry including illnesses involving Cognitive decline
- HOM-PG --PS --18: Homoeopathy in Special situations: PTSD, Culture bound syndromes, Adjustment disorder and Factitious disorder and Liaison Psychiatry
- HOM-PG -- PS -- 19: Child Psychiatry
- HOM-PG--PS--20: Preventive aspects of Mental Disorders, Psychotherapies, Psychopharmacological treatments, Rehabilitative Psychiatry. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness
- HOM-PG – PS– 21: Homoeopathy in Community Psychiatry and National Mental Health Programmes
- HOM-PG – PS – 22: Forensic Psychiatry, Mental Health Act 2017 and Ethics of Psychiatric treatments

VII (2b). Question Paper Layout

Paper 1

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG–PS– 9 OR 10 OR 11(Substance related disorder) OR 12 (Acute Organic Syndromes) OR (Personality	20

		disorder) OR 15 (Sleeping disorder)	
2	LAQ	HOM-PG-PS – 12 (Emergency Psychiatry) OR 11 (Substance related disorder)	10
3	LAQ	HOM-PG-PS – 13 (Disorder of Impulse control) OR 10	10
4	LAQ	HOM-PG-PS – 14	10
5	LAQ	HOM-PG-PS – 15 (Eating disorder) OR 13 (Personality disorder) OR 9 (Common mental disorder)	10
6	SAQ	HOM-PG-PS – 09	5
7	SAQ	HOM-PG-PS – 10	5
8	SAQ	HOM-PG-PS – 11	5
9	SAQ	HOM-PG-PS – 12 (Acute Organic Syndrome)	5
10	SAQ	HOM-PG-PS – 13 (Personality disorder)	5
11	SAQ	HOM-PG-PS – 15 (Sleeping disorder)	5
12	SAQ	HOM-PG-PS – 14 (Sexuality and sexual dysfunction)	5
13	SAQ	HOM-PG-PS – 12 (Emergency Psychiatry)	5

Paper 2

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-PS– 16 OR 19 OR 20 OR 21 OR 22	20
2	LAQ	HOM-PG-PS – 18 OR 22 (Ethics of Psychiatric treatments)	10
3	LAQ	HOM-PG-PS – 16 OR 22 (Forensic Psychiatry)	10
4	LAQ	HOM-PG-PS – 19 OR 17	10
5	LAQ	HOM-PG-PS – 20 OR 21	10
6	SAQ	HOM-PG-PS – 22	5
7	SAQ	HOM-PG-PS – 18 (Culture based Syndromes, Adjustment disorder)	5
8	SAQ	HOM-PG-PS – 16	5
9	SAQ	HOM-PG-PS – 17	5
10	SAQ	HOM-PG-PS – 18	5
11	SAQ	HOM-PG-PS – 19	5
12	SAQ	HOM-PG-PS – 20	5
13	SAQ	HOM-PG-PS – 21	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

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Part I Paper 2

I. Title of the Speciality Course, and its abbreviation

MD (Homoeopathy) Fundamentals of Homoeopathy in Homoeopathic Psychiatry

II. Brief description of speciality and its relevance in homoeopathy post-graduate course.

Homeopath as termed by Dr. Samuel Hahnemann in Aphorism 4 is a “Preserver of Health” who works for the mission of restoring the sick to health, to cure as in Aphorism 1. For a Homeopathic psychiatrist to achieve this shall require the knowledge of Psychology integrated with the fundamentals of Homeopathy. The mental level of being is the most crucial for the individual’s existence and maintains within itself a hierarchy very useful for understanding the normal functioning of the mind and its deviation. Therefore, understanding and applying the key concepts of Health, Man, Disposition, Predisposition, Diathesis, Homoeopathic causation, Disease, guidelines of management needs to be applied in psychiatry. Hahnemann in the Organon and other masters have laid down the foundation of these concepts and guidelines for practice along with exploring repertorial references and laying down the approach to the study of HMM. Training for prevention, promotion and rehabilitation needs to be mastered from a homoeopathic practice perspective.

Study of the Fundamentals of Homeopathy should thus allow the Homoeopathic psychiatry postgraduate students to utilize the above-mentioned knowledge in preventive, promotive, curative, and rehabilitative care in psychiatry and apply the operational understanding of Repertory and MateriaMedica in clinical practice. That would allow him to render a mild and gentle cure with the complete removal of obstacles to cure.

III . Courses and Course Objectives.

Course outcome

At the end of studying this course the postgraduate student of MD (Homoeopathic Psychiatry) should possess the following competencies and thus should be able to—

1. Display how Aphorisms 1-6 of the ‘Organon of Medicine’ provide a comprehensive base for a Homoeopathic psychiatrist to understand the evolution of mind.
2. Apply knowledge of Organon & Homoeopathic Philosophy, repertory and HMM in case taking and Psychiatric Evaluation
3. Identify the conceptual basis of the travel of the patient from Health to Disease in the light of Bio-psycho-socio-spiritual factors and its application to the practice of Homoeopathic Psychiatry
4. Apply knowledge of homoeopathic principles in the preservation of mental health and to prepare for the management of mental illness
5. Illustrate evidence-based case approach in Homoeopathic psychiatry
6. Display case-taking skills for knowing illness and person through the inter-relationship between Man and environment determining the fundamental, exciting and maintaining causes and their application in preventive, promotive and curative measures.
7. Demonstrate the documentation of the case in standardized format as per guidelines stated in Organon of Medicine
8. Classify psychiatric symptomatology and identify common and characteristics symptoms and its significance in management.

9. Explain the role of qualitative and quantitative susceptibility in mental diseases
10. Illustrate the assessment of susceptibility in acute and chronic psychiatric cases.
11. Derive the influence of miasmatic forces in affecting disease expressions, disease course and outcome in psychiatric cases.
12. Demonstrate the method of processing of the case utilizing appropriate homoeopathic principles to arrive at Hahnemannian totality.
13. Identify the acute, phase, chronic and Intercurrent totalities in a given case
14. Perform Repertorial Analysis, Remedy Selection and deciding the guidelines of case management in homoeopathic psychiatry
15. Validate the correspondence using source books and commentaries of Materia Medica drug pictures.
16. Comply with the principles of Homoeopathic management and use of medicinal forces appropriately with respect to time of administration, potency and repetition.
17. Plan the use of ancillary measures, diet and patient education, etc. useful to restore the patient to health.

Course contents:

Part 1 Paper 2: Fundamentals of Homoeopathy in Psychiatry (HOM-PG-FHPS)

(I) Hom-PG-FHPS-01

- 1. Hahnemannian concept of Man, Vital Force, Health and Disease applied to the study of Mind and mental disorders**
 - A. Health, disease, causation, vital force and their role in mental health and disease
 - B. Evolution of disease: predisposition-disposition-diathesis-disease as reflected in development of mental illnesses
 - C. Mission and knowledges of the physician especially at the level of function & structure of Mind – state of balance & imbalance
 - D. Hahnemannian concept of man and its further extension by Kent, Boenninghausen and Boger – relative importance given by them to mind, mental expressions and mental state in totalities.
 - E. Philosophical basis, construction. arrangement of the original repertories (Kent, TPB, BBCR) representation of above concepts in Chapter Mind of the repertories
 - F. Science and philosophy of HMM, its utility in study of Mind
 - G. Psychological MM

(II) Hom-PG-FHPS-02

- 2. Concept of Dynamism, Recovery and Cure and Obstacles to Cure in Mental illnesses**
 - A. Concept of vital force in maintaining health and in genesis of mental disease
 - B. Concepts of homoeopathic causation (Fundamental, Exciting and Maintaining causes) in genesis of mental disease.
 - C. Concepts of recovery and cure and the essential difference between the two with respect to mental illness.
 - D. Concept of idiosyncratic and pseudo chronic diseases as applicable to mental illnesses.
 - E. Knowledge of various factors - mental and physical - which derange health and act as obstacles to cure and how to remove them to ensure cure.
 - F. Role of miasm in causing and maintaining mental disease and addressing the same to ensure cure. (Further elaborated in theme 7)
 - G. Understanding the above concepts, its representation and utility in study of Mind in evolutionary manner from HMM and its representation in different standard Repertories

(III) Hom-PG-FHPS -03

3. Concept of Artificial Disease and Portrait of Disease

- A. Knowledges of physician
- B. Drug proving
- C. Process of recording and system of recording mental diseases (sudden explosion of latent psora, Psycho – somatic, somato-psychic, mental illness due to prolonged emotional causes)
- D. Creating portraits of mental disease and learning the art of matching
- E. Art of creating portrait of polychrest remedies through analysis, evaluation and construction at Mental and Physical level
- F. Creating portrait of the disease through repertorial study of specific remedy

(IV) Hom-PG-FHPS-04

4. Concept of Unprejudiced observation and Case taking in psychiatric illnesses

- A. Studying the guidelines given by Hahnemann for psychiatric case taking and evolve a standardised case record for homoeopathic practice related to psychiatry.
- B. Demonstrating the concept of unprejudiced observer in case taking, bed side examination, Mental status examination, demonstration analysis of Doctor- patient therapeutic interview based on homoeopathic principles
- C. Utilising the concept of unprejudiced observer in perceiving the psychiatric patient and constructing totality for correct prescribing. (ORG)
- D. Understanding the concept of man as per Kent, Boger and Boenninghausen and its influence on their writing of repertory and HMM

(V) Hom-PG-FHPS-05

5. Concept of Symptomatology as applied to mental illnesses

- A. Symptomatology and value of a symptom from the standpoint of Homoeopathic Practice in psychiatry
- B. Concept of individualisation and Generalisation given by Kent and Boenninghausen and essential difference between the two.
- C. Concept of individualization and generalisation in the construction of Repertory (Kent, Boenninghausen and Boger especially chapter Mind and psycho-somatic representation in Repertory.
- D. Understanding the concept of classification and its utility in study of HMM
- E. Understanding the concept of generalisation vs individualization, and its utility in generalising the individual drugs symptoms in to group symptoms and deriving group characteristics)
- F. Studying Mind from MateriaMedica with the help of concept of generalisation.
 - a. A list of group of remedies is demonstrative to understand the process rather than to learn all the groups in detail.

(VI) Hom-PG-FHPS-06

6. Concept of Susceptibility and Acute and Chronic Disease in Mental illnesses

- A. Various parameters in determining susceptibility in different types of mental diseases and its application in practicing clinical psychiatry.
- B. Application of the knowledge of Hahnemannian classification of mental disease and modern psychiatry in defining the scope and limitations by demonstrating its application in different types of cases.
- C. Understanding Repertories related to Mind and chapter of Mind from Other Repertories- (Kent, Boericke, Phatak, Boger, Boennighausen)

(VII) Hom-PG-FHPS-07

7. Concept of Suppression and Miasms as applied to mental illnesses

- A. Concept of suppression in homoeopathy and its types (surgical/non-surgical) in progression of psychiatric disease and its management through clinical cases.
- B. Concept of Miasm from Hahnemannian perspective and its further expansion by Allen, Kent and M L Dhawale and application to mental illnesses
- C. Use of Miasm in classifying and understanding the evolution of different remedies (HMM)
- D. Utilising the knowledge of indications of anti-miasmatic remedies as per list in mental illnesses
- E. Role of miasm as a fundamental cause and its influence in the expressions in psychiatric disease and remedies through the Miasms of Psora, Sycosis, Tubercular and Syphilis.
- F. Rubrics of suppression from different repertories
- G. Rubrics of Mental Expressions of Miasm from different repertories and study of different related Miasmatic rubrics

(VIII) Hom-PG-FHPS-08

8. Concept of Totality with respect to mental illnesses

- A. Process of constructing acute, chronic and intercurrent totalities in mental illnesses.
- B. Mastering the concept of classification and evaluation of symptoms including mental symptoms
- C. Understanding the process of repertorial and non-repertorial approach and how to select one in patients with mental illness
- D. Selecting the suitable approach and constructing repertorial totality as per Kent, Boenninghausen and Boger with emphasis on psychiatric patients.
- E. Solving the case with the help of softwares like HOMPAT and RADAR.
- F. Understanding the non-repertorial approach namely structuralization, synthetic approach and key-note in psychiatric disorders.
- G. Differentiation of similar remedies in acute and chronic cases by reference to source books, commentators and clinical materia medica.
- H. Building up totalities of different remedies through source books and other commentators from the list.(HMM)

(IX) Hom-PG-FHPS-09

9. Concept of Similar and Similimum

- A. Understanding single, simple, minimum substance as similimum following from the Law of Similars.
- B. Learning the concept of concordances as evolved by Boenninghausen and its utility in Psychiatric practice.
- C. Finer differentiation of similar remedies by learning to refer to source books, commentaries and clinical materia medica.
- D. Understanding remedy relationships and its implications in psychiatric practice - complementary, inimical, antidotal, follows well, similar with examples.

(X) Hom-PG-FHPS-10

10. Concept of Therapeutic Management as applicable in psychiatric illnesses

- A. Practical application of Kent's 12 observations in the assessment of remedy response and in the second prescription in psychiatric disorders.
- B. Utility of knowledge of disease, knowledge of investigations, psychological tests and recent advances in the field of Psychiatry to assess comprehensive response to homoeopathic remedies.
- C. Remedy relationship in determining these prescription.
- D. Patient & Family Psycho-education and orientation.
- E. Use of ancillary measures in acute and chronic diseases, namely diet, exercise, yoga, relaxation techniques, supplements for aiding recovery and preventing the progress of mental illnesses. .

V. Course description

Hom-PG-FHPS-01

Table 01 Course:

Course Overview	1. Hahnemannian Concept of man, vital force, Health and Disease as applied to the study of Mind and mental disorders
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none">1. Define Vital force, Health, Disease, Cure and Recovery with respect to mental illnesses as per homoeopathic philosophy2. Explain evolution of Mental disease in terms of predisposition-disposition-diathesis – stress diathesis model and Basic psychological processes.3. Apply the concept of evolution of mental disease in psychiatry4. Discuss Hahnemannian concept of man and importance to mind given by Boenninghausen, Kent and Boger in their concept of Man5. Define Mental health as per by WHO6. Discuss mission of the physician7. Summarize the Knowledge of Physician relevant in maintaining mental health in individual and community8. Summarize the science and philosophy of HMM and its utility in study of Mind9. Discuss relevance of psychological HMM <p>Skills</p> <ol style="list-style-type: none">1. Demonstrate the relevance of psychological HMM in understanding harmony and disharmony of vital force with respect health and disease

	<p>respectively</p> <ol style="list-style-type: none"> 2. Perform psychiatric case taking to elicit disease evolution following disease chronology <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the mission of the physician in homeopathic psychiatry 2. Reason out the utility of psychological HMM to understand mental health and its deviations
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPS-02

Table 02 Course:

Course Overview	Concept of Dynamism, Recovery, cure and obstacle to cure in Mental Illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Discuss the role of vital force in maintaining mental health 2. Discuss the role of vital force in genesis of mental disease 3. Differentiate cure and recovery in Mental diseases 4. Explain evolution of Mental illness from phases of diathesis to functional and structural, reversible to irreversible phases of disease as per neurophysiological & neuroanatomical basis 5. Summarize Classification of Mental disease given by Dr.Hahnemann. 6. Explain idiosyncratic & pseudo chronic disease as applicable in mental illnesses 7. List various Bio-Psycho- Social factors which derange Mental health and also act as obstacle to cure and explain how to remove these factors to achieve cure 8. Infer role of miasms as a causative and maintaining factor in mental disease 9. Apply the knowledge of Miasm as causation to attain cure 10. Discuss role of causation in study of Homoeopathic MM and repertory with respect to Mental diseases <p>Skills</p> <ol style="list-style-type: none"> 1. Demonstrate the utility of Bio- Psycho-social & Homoeopathic causation in management of the psychiatric cases 2. Demonstrate the application of repertory and HMM from causative perspective in community for mental illnesses <p>Reflection</p> <ol style="list-style-type: none"> 1. Relating the vital force concept with mental health and disease 2. Reason out the web of causation (BPS- Homoeopathic Causation) in mental illnesses 3. Relate with chronic mental disease and miasm

	4. Report the utility of causations in practice of homoeopathic psychiatry
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, objective,structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPS-03

Table 03 Course:

Course Overview	Concept of artificial and natural diseases
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Discuss the knowledge of physician related to psychiatric symptomatology for formulating the portrait of disease 2. Display the system and process of recording artificial and natural disease in mental diseases <p>Skills</p> <ol style="list-style-type: none"> 1. Participate in drug proving 2. Construct & match the portrait of artificial and natural disease 3. Classify the data from artificial and natural disease through analysis and evaluation 4. Construct the portrait of disease through study of relevant rubrics in repertory <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the knowledge of physician to the psychiatric symptomatology in clinical cases 2. Respond to the need of portrait of disease in psychiatry cases 3. Reconstruct rubrics in to portrait of mental illnesses
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments,MCQ Practical exam – short case, long case, structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPS-04

Table 04 Course:

Course Overview	Concept of unprejudiced observation and case taking in psychiatric illnesses
Learning	Knowledge

Outcomes	<ol style="list-style-type: none"> 1. Discuss the guidelines given by Hahnemann for psychiatric case taking 2. Describe techniques of psychiatric case taking 3. Discuss the concept of unprejudiced observation in psychiatric cases 4. Describe the process of evolution of unprejudiced observation through physician patient interaction based on transference – countertransference in therapeutic setting. 5. Summarize the concept of man and relative importance of mind as per Kent, Boger and Boenninghausen and its influence on their repertory and HMM <p>Skills</p> <ol style="list-style-type: none"> 1. Display the skill of perceiving the patient and identify the ones blocks /prejudices 2. Construct g totality through unprejudiced observation in psychiatric cases <p>Reflection</p> <ol style="list-style-type: none"> 3. Relate the role of prejudices in perceiving and constructing totality 4. Contextualizing the knowledge of case taking and unprejudiced observation to construction of totality
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPS-05

Table 05 Course:

Course Overview	Concept of Symptomatology as applied to mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain Homoeopathic symptomatology and psychiatric symptomatology 2. Illustrate the value of symptom through classification and evaluation with its application in HMM and psychiatric cases 3. Differentiate the Kent and Boenninghausen concept of individualization and generalization in psychiatric cases 4. Discuss the concept of individualization and generalization in construction of Kent, TPB, BBCR and BSK repertory with respect to mind and psycho- somatic illnesses 5. Sketch the HMM portrait through symptomatology, individualization and generalization (demonstrative list) <p>Skills</p> <ol style="list-style-type: none"> 1. Construct the totality by using concept of generalization and individualization in psychiatric cases 2. Construct the totality of the group symptoms through generalization

	<p>(some reflective group study)</p> <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the application of group study to psychiatric clinical practice 2. Reason out the process of generalization and individualization in totality formation in psychiatric cases 3. Contextualize the value of symptom in matching HMM and referring repertory in psychiatric cases
Assessments	Refer to list attached
Prescribed texts	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPS-06

Table 06 Course:

Course Overview	Concept susceptibility, acute and chronic disease in mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain the various parameter in determining the susceptibility in acute, chronic, intermittent, periodic / episodic illnesses in psychiatry. 2. Describe the scope and limitation of homoeopathy through knowledge of susceptibility considering psycho-biological and social determinants for acute & chronic mental illness, 3. Summaries the construction of different repertories related to mind,chapter mind and psycho-somatic representations in various repertories based on psycho-bio-social determinants. 4. Application of the concept of susceptibility to homoeopathic psychiatry 5. Apply clinical MateriaMedica in psychiatry <p>Skills</p> <ol style="list-style-type: none"> 1. Apply concept of susceptibility t in clinical management of psychiatric cases and study of HMM 2. Perform differential materiamedica in psychiatricl cases <p>Reflection</p> <ol style="list-style-type: none"> 1. Report the utility of repertories for acute & chronic illness in psychiatry. 2. Relate the susceptibility to homoeopathic practice
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of	KS,PC,HO,CS,PBL

competencies	
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Hom-PG-FHPS-07

Table 07 Course:

Course Overview	Concept of suppression and miasm as applied to mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain the suppression in homoeopathic psychiatric practice 2. Identify rubrics of suppression from standard repertories 3. Discuss the evolution of Mental disease resulting from suppression 4. Discuss on one sided mental illnesses 5. Describe evolution of miasm through chronic Mental disease 6. Explain Miasmatic theory from Hahnemannian writing and its further expansion by Kent, Allen and Dhawale 7. Apply knowledge of miasm in study of HMM and application to mental illnesses 8. Discuss indication of anti-miasmatic remedies in psychiatric cases, 9. Deriving the different rubrics from standard repertories representing different Miasm <p>Skills</p> <ol style="list-style-type: none"> 1. Conclude the suppression in clinical cases 2. Derive fundamental & dominant miasm in acute and chronic mental disease 3. Choose anti-miasmatic in clinical cases <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the evolution of mental disease with miasm 2. Reconstruct the miasmatic evolution from clinical cases 3. Contextualize the concept suppression
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPS-08

Table 08 Course:

Course Overview	Concept of Totality with respect to mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Apply classification and evaluation of psychiatric symptoms 2. Apply the concept of causation web in formulating totality 3. Discuss the repertorial and non-repertorial approach and there

	<p>indication in psychiatric cases.</p> <ol style="list-style-type: none"> Justify the selection of reportorial and non-reportorial approach in a psychiatric case Select suitable approach and construct totality based on need of clinical case. <p>Skills</p> <ol style="list-style-type: none"> Construct acute, chronic and intercurrent totalities in mental illnesses Construct reportorial totality in patients with mental illnesses Solving the case with suitable software Perform differentiation of remedies using different HMM viz source book, commentators, clinical Materia Medica and key notes in psychiatric disorders <p>Reflection</p> <ol style="list-style-type: none"> Relate to clinical cases in psychiatry for construction of the totality Reason out the bases for different approaches and references to repertory in psychiatric cases Report the bases of differential HMM in psychiatric cases
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached
Domains of competencies	KS,PC,HO,CS,PBL

Hom-PG-FHPS-09

Table 09 Course:

Course Overview	Concept of similar and similitum
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> Describe fundamental laws of homoeopathy Conclude the potency and repetition in psychiatric cases Discuss concordance and remedy relationship in psychiatric cases <p>Skills</p> <ol style="list-style-type: none"> Apply fundamental laws in psychiatric cases Apply the remedy relationship in clinical practice <p>Reflection</p> <ol style="list-style-type: none"> Recollect the fundamental laws of homoeopathy observed in clinical cases Reason out the posology in psychiatric practice Relate the concordance and remedy relationship in psychiatric cases
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	Refer to list attached

Domains of competencies	KS, PC, HO, CS, PBL
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Hom-PG-FHPS-10

Table 10 Course:

Course Overview	Concept of Therapeutic management as applicable in psychiatric illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Diagnose the Kent's twelve observation in assessment of remedy response in psychiatric disorders 2. Describe Hahnemannian guidelines on management of mental diseases from Organon of medicine 3. Apply the knowledge of investigation and recent advances in the field of medicine and psychiatry to assess remedy response in psychiatric cases 4. Select second prescription based on remedy relationship in psychiatric cases <p>Skills</p> <ol style="list-style-type: none"> 1. Choose the correct line of management as per Hahnemannian guidelines in mental illnesses. 2. Choose second prescription based on remedy response of Kent's observation in psychiatric cases 3. Perform patient & family psycho- education and orientation 4. Organize the ancillary management in acute and chronic mental diseases 5. Perform the ancillary management in mental diseases <p>Reflection</p> <ol style="list-style-type: none"> 1. Recollect the remedy response in psychiatric cases. 2. Reflect role of investigation and current advances in judging remedy response in psychiatric cases 3. Contextualize the ancillary management in psychiatric cases
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ

List of repertory (examples) beside Kent, TPB, BCCR following repertory are suggested

- Phatak's repertory,
- Murphy's repertory
- Boericke's repertory
- Repertories related to mind – (Farokh Master)

List of remedies for different aspects of the study of applied materia medica (examples)

Clinical HMM	Drug picture	Group study	Anti-miasmatic
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1. Aconite	1. Alumina	1. sodium	1. Bacillinum
2. Aesculus	2. Antimony crud	2. Magnesium	2. Tuberculinum
3. Aethusa	3. Apismel	3. Calcarea	3. Thuja
4. Agaricus	4. Arg met	4. Kali	4. Medorrhinum
5. Aloes	5. Arg nit	8. Loginneacea	5. Psorinum
6. Ammonium carb	6. Arsalb	9. Solanacea	6. Sulphur
7. Anacardium	7. Aurum met	10. Compositae	7. Syphilinum
8. Arnmont	8. Baryta carb.	11. Ophidia	
9. Arsiod	9. Barytamur.	12. Spider	
10. Baptisia	10. Calc. carb.	13. Metals	
11. Bell.	11. Calc. f.	15. Acids	
12. Bellis p.	12. Calc. iod.	16. Lac	
13. Berberis v.	13. Calc. phos.		
14. Borax	14. Calc. sulph.		
15. Bry. alb.	15. Calc. sil		
17. Cactus g.	16. Causticum		
18. Calc. ars.	17. China		
19. Carbo. an	18. Conium		
20. Canth.	19. Ferrum met.		
21. Carb. veg.	20. Ferrumphos.		
22. Caulophyllum	21. Fluoric acid		
23. Cham.	22. Graph.		
24. Chelid. m.	23. Ignatia		
25. Chin. ars.	24. Iodine		
26. Cicuta v.	25. Kali bichrom.		
27. Cimicifuga	26. Kali brom.		
28. Cina	27. Kali carb.		
29. Coca	28. Kali iod.		
30. Coccus	29. Kali mur.		
31. Coccus cacti	30. Kali sulph.		
32. Collinsonia	31. Lac. can.		
33. Coloc.	32. Lachesis		
34. Corallium rubrum	33. Lycopodium		
35. Crataegus	34. Lyssin		
36. Crotalus h.	35. Mag. carb.		
37. Croton tig	36. Mag. mur		
38. Cup. met.	37. Mag. phos.		
39. Digitalis	38. Mag. sulph		
40. Dioscorea	39. Medorrhinum		
41. Drosera	40. Mercurius sol.		
42. Dulcamara	41. Naja		
43. Echinacia	42. Natrum carb.		
44. Euphrasia	43. Natrum mur.		
45. Gelsemium	44. Natrum phos.		
46. Glonoine	45. Natrum sulph.		
47. Hammamelis	46. Nitric acid		
48. Helleborus	47. Nuxvom.		
49. Hep. sulph	48. Opium		
50. Hyosc.	49. Petroleum		
51. Hyper.	50. Phos.		
52. Ipecac	51. Phos. ac		
53. Kali ars.	52. Platina		

54. Ledum 55. Liliuntig. 56. Manganum 57. Merc. dul. 58. Merc. iod. fl. 59. Merc. ior. r. 60. Mercurius cor. 61. Mezereum 62. Mur. ac. 63. Murex 64. Nuxmoschata 65. Phytolacca 66. Plumbum 67. Podophyllum 68. Pyrogen 69. Ranunculuc bulb 70. Ratanhia 71. Rheum 72. Rhododendron 73. Rumex 74. Ruta g. 75. Sabadilla 76. Sabina 77. Sambucus 78. Sanguinaria 79. Sarsaparilla 80. Secale cor. 81. Selenium 82. Senega 83. Spigelia 84. Spongia 85. Sticta 86. Symph. 87. Tarent. c. 88. Tarentula H 89. Thlaspi bursa 90. Verat. vir.	53. Psorinum 54. Puls. 55. Rhustox. 56 Sepia 57. Silica 58. Stannum met. 59. Staph 60. Stram. 61. Sulphur 62. Tarent h. 63. Thuja 64. Tuberculinumbov 65. Verat. alb. 66. Zincum		
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VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum	Pass	Maximum Marks	Pass Marks

	Marks	Marks		
i. Fundamentals of Psychiatry	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Psychiatry;	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Course Numbers

Hom-PG-FHPS-01 - Hahnemannian Concept of man, vital force, Health and Disease as applied to the study of Mind and mental disorders

Hom-PG-FHPS-02 - Concept of Dynamism, Recovery, cure and obstacle to cure in Mental Illnesses

Hom-PG-FHPS -03 -Concept of artificial and natural diseases

Hom-PG-FHPS-04 - Concept of unprejudiced observation and case taking in psychiatric illnesses

Hom-PG-FHPS-05 - Concept of Symptomatology as applied to mental illnesses

Hom-PG-FHPS-06 - Concept of Concept susceptibility, acute and chronic disease in mental illnesses

Hom-PG-FHPS-07 - Concept of Suppression and miasm as applied to mental illnesses

Hom-PG-FHPS-08 - Concept of Totality with respect to mental illness

Hom-PG-FHPS-09 - Concept of Similar and Simillimum

Hom-PG-FHPS-10 - Concept of Therapeutic management as applicable in Psychiatric illness

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question Hom-PG-FHPS--06 or 08 or 09	20
2	LAQ	Hom-PG-FHPS--07	10
3	LAQ	Hom-PG-FHPS--04	10
4	LAQ	Hom-PG-FHPS--03	10
5	LAQ	Hom-PG-FHPS--05	10
6	SAQ	Hom-PG-FHPS--03	5
7	SAQ	Hom-PG-FHPS--02	5
8	SAQ	Hom-PG-FHPS--06	5
9	SAQ	Hom-PG-FHPS--10 (For example -Repertory related to Mind, Mind chapter in various Repertories, Psycho-somatic representation in various repertories or clinical HMM)	5
10	SAQ	Hom-PG-FHPS--08	5
11	SAQ	Hom-PG-FHPS--01	5
12	SAQ	Hom-PG-FHPS--09	5
13	SAQ	Hom-PG-FHPS--04 (Group study in Psychiatric Cases)	5

VII (3). Assessment Blueprint –Practical / Viva.**VII (3a). Clinical examination: A Common Practical/viva for Part I Paper 1 and 2.****VIII. List of Reference Books (As per APA Format).**

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17. Hering, C. (2020). *The Guiding Symptoms Of Our Materia Medica (Volume III)*. Alpha Editions. <https://books.google.co.in/books?id=HDwQzgEACAAJ>
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Template for Curriculum Document
MD Hom

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Pediatrics

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Pediatrics;
- (ii) Fundamentals of Homoeopathy in Pediatrics; and
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Pediatrics. Paper 1
- (ii) Pediatrics. Paper 2.

III. Brief description of speciality and its relevance in homoeopathy post-graduate course.

The Purpose of the M.D Homoeopathy Paediatrics is to train a graduate of Homoeopathy to achieve the competencies required to create a professional specialist in the field of Homoeopathic Paediatrics. For this, the Paediatrician will have to understand the concept of growth and development as dynamic and evolving phenomena that influence the history-taking, assessment, diagnostic, and therapeutic decisions and actions. Paediatrics, thus being a speciality, requires unique competencies to cater to the healthcare needs of children and adolescents. The competency-based curriculum should consider society's needs, both local and global. Accordingly, the competencies need to meet the societal needs detailing the cognitive, psychomotor, and affective domain development for attaining these competencies.

Homoeopathy being a science of individualised holistic care demands the paediatrician to be keen in skills of observations, and non-verbal communication to understand the portrait of disease and medicine. Integration of knowledge of basic sciences with Homoeopathic principles is required to devise a comprehensive holistic management plan. It becomes challenging as no evolved materia medica are available to explain these portraits or specific philosophical literature to understand the susceptibility and its implications on posology. Thus, this curriculum will equip them with required competencies.

The present curriculum clearly describes the program, educational objectives and expected outcomes at the end of three years of training. There is a list of Entrustable Professional Activities (EPAs) that a student should be able to perform by the end of this course.

The curriculum will also outline the guidelines for Homoeopathic postgraduates in the field of Paediatrics, for the application of general principles of Homoeopathy as a science, basic concepts about Man in health, Man in disease, Concepts of Causation, Concomitant, Susceptibility & Individualization, the concept of miasmatic evolution of pathogenesis of various diseases affecting the paediatric age group, totality of symptoms and effective management strategies.

IV. Program Objectives. (Entrustable Professional Activities – EPAs)

At the end of three years program, a postgraduate in MD (Hom) Paediatrics should be able to

- Collect a comprehensive history and perform a thorough physical examination (including neonatal examination, anthropometric examination, general and systemic examination, plotting of growth charts, and using various diagnostic scales (for acute emergency situations, diagnostic and prognostic value in all conditions) and evaluate the health care needs of children in different settings of OPD, IPD, emergency department for acute and chronic conditions.
- Prioritize and develop a differential diagnosis based on the clinical findings and data obtained during the patient consultation.
- Recommend and interpret common diagnostic and screening tests, utilizing case analysis to gather relevant information for the diagnostic process. Conclude final diagnosis with precise understanding of stage and state of current disease pathology in a given patient at a given point of time.
- Determine the appropriate homeopathic management plan, taking into account the diagnostic information and devising comprehensive treatment strategies.
- Apply appropriate homeopathic tools for prescription and regularly assess the progress of the patient's condition.
- Recognize the need for referral to a higher centre, second opinions, or expert advice to enhance the quality of patient care and optimize treatment outcomes.
- Maintain accurate and professional documentation of clinical consultations, ensuring precision and adherence to ethical standards.
- Deliver effective oral presentations of clinical case records, efficiently communicating information to colleagues and peers.
- Adhere to legal and ethical principles in professional practice, respecting patient confidentiality and promoting patient-centred care.
- Demonstrate self-directed learning by identifying ongoing educational needs and utilizing appropriate resources for continuous professional development.
- Provide education and guidance to junior colleagues and patients on various aspects of health and homeopathic care within the field of Paediatrics.

- Engage in research activities relevant to the field of Homoeopathic Paediatrics by employing relevant competencies required for handling Paediatric patients.
- Publish evidence-driven documentation of clinical outcomes based on homeopathic paediatric practices in reputable and credible journals.
- Collaborate effectively as a member of an interprofessional team, fostering a multidisciplinary approach to patient care, research, and training in Paediatrics.
- Demonstrate effective leadership skills when leading a team engaged in healthcare, research, and training activities.

IV(1). Mapping of EPAs and Domain Competencies

KS : Knowledge & Scholarship

PC : Patient care

HO : Homoeopathic Orientation

CS : Communication skills

PBL : Practice based learning

Prf : Professionalism

Sr No	EPA	KS	PC	HO	CS	PBL	Prf
1	Collect a comprehensive history and perform a thorough physical examination (including neonatal examination, anthropometric examination, general and systemic examination, plotting of growth charts, and using various diagnostic scales (for acute emergency situations, diagnostic and prognostic value in all conditions) and evaluate the health care needs of children in different settings of OPD, IPD, emergency department for acute and chronic conditions	√	√	√	√	√	√
2	Prioritize and develop a differential diagnosis based on the clinical findings and data obtained during the patient consultation.	√	√			√	√
3	Recommend and interpret common diagnostic and screening tests, utilizing case analysis to gather relevant information for the diagnostic	√	√	+		√	√

	process. Conclude final diagnosis with precise understanding of stage and state of current disease pathology in a given patient at a given point of time.						
4	Determine the appropriate homeopathic management plan, taking into account the diagnostic information and devising comprehensive treatment strategies.	√	√	√			√
5	Apply appropriate homeopathic tools for prescription and regularly assess the progress of the patient's condition.	√	√	√		√	
6	Recognize the need for referral to higher centre, second opinions or expert advice to enhance the quality of patient care and optimize treatment outcomes.		√		√	√	√
7	Maintain accurate and professional documentation of clinical encounters, ensuring precision and adherence to ethical standards.		√		√	√	√
8	Deliver effective oral presentations of clinical encounters, efficiently communicating information to colleagues and peers.	√	√		√		√
9	Adhere to legal and ethical principles in professional practice, respecting patient confidentiality and promoting patient-centered care.	√	√		√		√
10	Demonstrate self-directed learning by identifying ongoing educational needs and utilizing appropriate resources for continuous professional development.	√	√	√	√	√	√
11	Provide education and guidance to junior colleagues and patients on various aspects of health and homeopathic care within the field of Paediatrics.	√			√		√
12	Engage in research activities relevant to promoting the quality of homeopathic Paediatrics by employing competencies relevant required for handling paediatric patients	√		√	√		√

13	Publish evidence-driven documentation of clinical outcomes based on homeopathic paediatric practices in reputable and credible journals.	√			√	√	√
14	Collaborate effectively as a member of an interprofessional team, fostering a multidisciplinary approach to patient care, research, and training in Paediatrics.		√		√	√	√
15	Demonstrate effective leadership skills when leading a team engaged in healthcare, research, and training activities.	√	√		√	√	√

IV(2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

EPAs	Hom-PG-PED - Part 1			Hom – PG- PED - Part 2		
	Sem / Mod 1	Sem / Mod 2	Sem / Mod 3	Sem / Mod 4	Sem / Mod 5	Sem / Mod 6
Collect a comprehensive history and perform a thorough physical examination (including neonatal examination, anthropometric examination, general and systemic examination, plotting of growth charts, and using various diagnostic	2 Documents accurately and legibly.	2 Demonstrates respect for patient privacy and autonomy	3 Communicates effectively with patient and or attendants, care givers etc.	4 Becomes aware of use of knowledge, skill and emotional limitation of self	4 Develops ability to withstand and cope up with stress	5 Works effectively in various health care settings and demonstrates application of appropriate

scales (for acute emergency situations, diagnostic and prognostic value in all conditions) and evaluate the health care needs of children in different settings of OPD, IPD, emergency department for acute and chronic conditions						knowledge, skill and attitude
Prioritize and develop a differential diagnosis based on the clinical findings and data obtained during the patient consultation	2 Organizes the data obtained and suggest a differential diagnosis	3 Concludes the differential diagnosis based on case, examination	3 Concludes the differential diagnosis based on case, examination.	4 Conveys the process adopted in arriving at differential diagnosis	4 Concludes the differential diagnosis based on case, examination	5 Orients the juniors the process to be adopted to arriving at differential diagnosis
Recommend and interpret common diagnostic and screening tests, utilizing case analysis to gather relevant information for the diagnostic process. Conclude final diagnosis with precise understanding of stage and state of current disease pathology in a given patient at a given point of time.	2 Demonstrates the ability to identify common and characteristic symptoms	3 Identifies and suggests suitable investigation reports relevant to differential diagnosis.	4 Advises suitable investigations to arrive at the provisional diagnosis	4 Correlates the investigation reports with the clinical condition.	4 Correlates the investigation reports with the clinical condition.	5 Orients the juniors on the process of identifying common and characteristic homoeopathic symptoms and advise of relevant investigations and help them correlate clinically.

Determine the appropriate homeopathic management plan, taking into account the diagnostic information and devising comprehensive treatment strategies.	2 Identifies area involved in planning comprehensive homoeopathic management	2 Documents appropriately and accurately the planning of comprehensive homoeopathic management	3 Demonstrates accurate documentation of diagnostic position for planning comprehensive homoeopathic management	3 Seeks proactively feedback on process of diagnostic position for comprehensive homoeopathic management documented	3 Seeks proactively feedback on assessment of process adopted in periodic follow ups of patients in determining continuation or revision for diagnostic position planning comprehensive homoeopathic management	4 Demonstrates effective implementation of diagnostic position for planning comprehensive homoeopathic management
Apply appropriate homeopathic tools for prescription and regularly assess the progress of the patient's condition.	3 Demonstrates knowledge of choice of appropriate tools for prescription & ability to assess the changes in patients	3 Demonstrates knowledge of evaluation and sign and symptoms to assess of patient and correlate with Kent's 12 observations and	4 Can apply the evaluation and sign and symptoms to assess of patient and correlate with Kent's 12 observations and use of remedy	4 Can choose appropriate homoeopathic tool for prescription applicable for progress assessed of the patient in	5 Applies appropriate homoeopathic tool for prescription applicable for progress assessed of the patient in	5 Demonstrates application of appropriate homoeopathic tool for prescription applicable for progress assessed of the patient in various specialty

	condition in follow up analysis	use of remedy relationships	relationship section of repertory	primary setting	secondary & tertiary setting	subjects
Recognize the need for referral to a higher centre, second opinions, or expert advice to enhance the quality of patient care and optimize treatment outcomes.	2 Learns when to seek second opinion / expert advice	3 Attempts to define reasons for second opinion / expert advice	3 Communicates with patient and colleagues the need for second opinion / expert advice	4 Communicate with expert reasons for second opinion	4 Learn to accept feedback on gaps in self's evidence-based medicine	5 Demonstrates the process of how and when to seek second opinion / expert advice
Maintain accurate and professional documentation of clinical consultations, ensuring precision and adherence to ethical standards	2 Demonstrate the ability to record details expressed by patient	3 Explores the deficiencies in clinical record by engaging with the patient	3 Systematically records the events of interaction with patient	4 Accepts feedback proactively on lacunae within self in documenting the expression of patient in the record	4 Demonstrate the effective utilization of patient record to generate evidence based medicine	5 Orients the importance of accurate documentation of clinical record

Deliver effective oral presentations of clinical case records, efficiently communicating information to colleagues and peers.	2 Accurately narrates the information	3 Accurately expresses the nuances of communication of patient	3 Accepts proactively feedback on gaps in oral presentation	4 Attempts to judge self's performance on the presentation	4 Identifies why of personal prejudices in the oral presentation	5 Demonstrates the importance and advantages of accurate oral presentation of clinical encounter
Adhere to legal and ethical principles in professional practice.	2 Demonstrates awareness of responsibilities	2 Adheres to responsibilities	3 Ensures adherence to responsibilities	3 Proactively open to feedback in gaps in adherence.	4 Ensure awareness of adherence in various clinical settings and clinical conditions	4 Demonstrates the adherence in various clinical settings and clinical conditions
Demonstrate self-directed learning by identifying ongoing educational needs and utilizing appropriate resources for continuous professional development	1 Proactively seeks the process	2 Attempts to demonstrates the importance through actions	2 Demonstrate the value experienced through consistent self-driven effort	3 Submits to feedback on the process adopted and tools utilized	3 Attempts to proactively adapt and change based on feedback	4 Demonstrates through action the use of tools to become a self-directed learner.
Provide education and guidance to junior colleagues and patients on various aspects of health and homeopathic care within the field of Paediatrics	2 Identifies the skill essential	3 Attempts to implement the skill acquired	3 Masters the various skills of communication	4 Attempts the application in various settings	4 Consistently applies the process across all settings and personalities	5 Observes the students and patients in action

Engage in research activities relevant to the field of Homoeopathic Paediatrics by employing relevant competencies required for handling Paediatric patients.	1 Orients self to research methodology as a subject	2 Proactively seeks guidance in application of research methodology	3 Identifies the avenues and processes that can be taken	3 Concludes the topic to work and applies the learnt processes	4 Conducts the research on the topic selected and consolidates the findings	5 Reviews the conclusions and identifies future areas for research
Publish evidence-driven documentation of clinical outcomes based on homeopathic paediatric practices in reputable and credible journals.	1 Becomes aware of importance	2 Explores the documentation already published	2 Consolidates the process to adopted	3 Attempts to document	3 Effectively documents	4 Ensures publication of research conducted
Collaborate effectively as a member of an interprofessional team, fostering a multidisciplinary approach to patient care, research, and training in Paediatrics.	1 Becomes aware of need	2 Identifies situations by observation	2 Proactively participates	3 Proactively seeks others participation	3 Attempts to seek feedback on self's lacunae in the process	4 Effectively contributes as a team member
Demonstrate effective leadership skills when leading a team engaged in healthcare, research, and training activities.	1 Becomes aware of essential leadership qualities	2 Proactively seeks leadership role	2 Attempts to deliver leadership role	3 Seeks feedback on self's leadership traits	3 Explores opportunities to demonstrate leadership	4 Demonstrates effective leadership

PART I Paper 1:

V. Courses and Course Objectives.

Part I Paper 1: HOM-PG-PED Part I – Fundamentals of Pediatrics

- HOM-PG-PED 01: Application of Basic Medical Sciences to Homoeopathic Paediatrics and Foundations of Homoeopathic Paediatrics
- HOM-PG-PED 02: Fundamentals of Growth and development in Homoeopathic Paediatrics
- HOM-PG-PED 03: Fundamentals of Nutrition in Homoeopathic Paediatrics
- HOM-PG-PED 04: Clinical approach to alterations in functions of neonates and its integration with Homoeopathic management
- HOM-PG-PED 05: Clinical approach to fever and its integration with homoeopathic management
- HOM-PG-PED 06: Clinical approach to alterations in functions of Growth and development with its integration with Homoeopathic management
- HOM-PG-PED 07: Clinical approach to alterations in functions of Nutrition and its integration with Homoeopathic management
- HOM-PG-PED 08: Clinical approach to alterations in respiratory functions and its integration with Homoeopathic management
- HOM-PG-PED 09: Clinical approach to alterations in gastrointestinal functions and its integration with Homoeopathic management
- HOM-PG-PED 10: Clinical approach to alterations in cardiac and circulatory functions and its integration with Homoeopathic management
- HOM-PG-PED 11: Clinical approach to alterations in excretory functions and its integration with Homoeopathic management
- HOM-PG-PED 12: Clinical approach to alterations in hematological functions and its integration with Homoeopathic management
- HOM-PG-PED 13: Clinical approach to alterations in neurological functions and its integration with Homoeopathic management

VI. Course description

Course Name: HOM-PG-PED 01: Application of Basic Medical Sciences to Homoeopathic Paediatrics and Foundations of Homoeopathic Paediatrics

Course overview:	This course will provide the students of MD Hom (Paediatrics) an in depth understanding of the application of basic medical sciences to Homoeopathic paediatrics and foundations of Paediatrics
Learning outcomes	<p>Competency 1 - Discuss principles of Human genetics, anatomy, physiology, embryology, normal child psychology, pathology and developmental sciences and connect it with Homoeopathic Paediatrics</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss anatomical and physiological understanding of various organ systems in embryological, neonatal, paediatric and adolescent age groups with its transitions from a homoeopathic viewpoint. ▪ Discuss the knowledge of relevant biochemical processes and their impact on health and diseased conditions.

	<ul style="list-style-type: none"> ▪ Relate the concepts of innate and adaptive immunity and its evolution from birth through infancy to adolescence. the immunological processes and correlation with susceptibility. ▪ Discuss and evaluate causes of microbial infections and parasitic infestations, their pathogenesis, and host immune response in paediatric infectious diseases ▪ Discuss the concepts of human embryology and foetal medicine and its correlation with Homoeopathic concept of mother-neonate unit <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform examination of neonates, children, and adolescents and identify normal and abnormal clinical findings. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on the utility of application of basic medical sciences in homoeopathic paediatrics for holistic management of patients <p>Competency 2 – Explain the alteration in functions and structure in process of disease with concepts of pathology in Homoeopathy</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Describe the pathological changes in various tissues and organ systems and their interpretation within homoeopathic framework <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Demonstrate correlations between functional and structural changes responsible behind the clinical findings. ▪ Identify basic management strategies by assessment of flow of susceptibility and based on reportorial representation and differential HMM <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on the scope of reversibility with Homoeopathic treatment along with role of Homoeopathy as an adjuvant therapy
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ,</p>

	Bed side demonstrations, case presentations,
Prescribed texts	Refer to list attached
Domains of competencies	Knowledge & Scholarship/ Patient Care /Homoeopathic Orientation /Practice Based Learning

Course Name: HOM-PG-PED 02: Fundamentals of Growth and Development in Homoeopathic Paediatrics

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of normal growth and development and deviations to abnormal and its Homoeopathic management
Learning outcomes	<p>Competency 1 - Discuss the dynamic and evolving phenomenon of growth with age-wise progression from neonate to infant to toddler to school-going child to adolescent till it reaches the level of a mature adult and its correlation with Homoeopathic principles</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Define growth ▪ Discuss the factors affecting normal growth ▪ Discuss the patterns of growth in infants, children and adolescents ▪ Describe the methods of assessment of growth including use of WHO and Indian national standards. ▪ Enumerate the parameters used for assessment of physical growth in infants, children, adolescents ▪ Discuss common problems related to growth <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform anthropometric measurements, document in growth charts and interpret ▪ Construct the basic management strategy for common problems related to growth <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on the role of Homoeopathy in growth in health and disease in children <p>Competency 2 – Discuss the dynamic and evolving phenomenon of development with age-wise progression from neonate to infant to toddler to school-going child to adolescent till it reaches the level of a mature adult and its correlation with Homoeopathic principles</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Define development ▪ Discuss the normal developmental milestones with respect to motor, behaviour, social, adaptive

	<p>and language</p> <ul style="list-style-type: none"> ▪ Discuss methods of assessment of development ▪ Discuss common problems related to development <p>Skill</p> <ul style="list-style-type: none"> ▪ Perform developmental assessment and interpret ▪ Construct the basic management strategy for common problems related to development <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on the role of Homoeopathy in development in health and disease in children
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ, Bed side demonstrations, case presentations,</p>
Prescribed texts	Refer to list attached
Domains of competencies	Knowledge & Scholarship/ Patient Care /Homoeopathic Orientation /Practice Based Learning

Course Name: HOM-PG-PED 03: Fundamentals of Nutrition in Homoeopathic Paediatrics

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of nutrition and nutritional disorders and its Homoeopathic management
Learning outcomes	<p>Competency 1 – Discuss the fundamentals of Nutrition and its importance in Homoeopathic paediatric practice</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Describe age related nutritional requirements of infants, children and adolescents including macronutrients, micronutrients, vitamins ▪ Discuss the tools and methods for assessment and classification of nutritional status of infants, children and adolescents ▪ Describe various nutritional disorders and its basic management <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform a dietary recall and appropriate nutritional history ▪ Assess and classify the nutrition status of infants, children and adolescents and recognise deviations ▪ Construct an appropriate diet in health and disease ▪ Construct the basic management strategy for nutritional disorders <p><i>Reflection</i></p>

	<ul style="list-style-type: none"> Reflect on the role of Homoeopathy in Nutrition in health and disease in children
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	Refer to list attached
Domains of competencies	Knowledge & Scholarship/ Patient Care /Homoeopathic Orientation /Practice Based Learning

Course Name: HOM-PG-PED 04: Clinical approach to alterations in functions of neonates and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach to alterations in functions of neonates and its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to disease symptoms in neonates with its integration with homoeopathic management (With an Example given – Alterations in colour – Jaundice)</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the clinical approach to a neonate with alterations in functioning with special emphasis on mother-neonate as a unit <i>for e.g., alterations in color - jaundice in neonate</i> Enumerate the causes that lead to development of that symptom – <i>e.g. – jaundice -physiological and pathological causes</i> List the Possible complications – <i>e.g. – jaundice – kernicterus, seizures</i> Discuss the homoeopathic management strategy – <i>e.g., jaundice -case definition of neonate and mother - formulation of acute and chronic totality, ancillary measures- fluid maintenance, phototherapy, breastfeeding or gavage feeding</i> <p><i>Skill</i></p> <ul style="list-style-type: none"> Perform simultaneous clinical and Homoeopathic history taking of the neonate including birth history, mother’s obstetric history and arrive at differential diagnosis Perform relevant history taking of mother and any possible clinical problems in mother Perform the clinical examination of the neonate and reach to a probable diagnosis – <i>e.g. – jaundice - Kramer’s scale</i> Choose appropriate investigations and arrive at range of diagnosis – <i>e.g., jaundice - CBC, CRP, blood grouping, S. bilirubin, Comb’s test, G6PD deficiency, USG abdomen etc.</i> Identify common and the characteristic symptoms

	<ul style="list-style-type: none"> Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on the role of Homoeopathy in management of mother-neonate unit in health and disease
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 05: Clinical approach to fever and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of fever and its Homoeopathic management
Learning outcomes	<p>Competency 1 – Discuss the clinical approach to fever and its management strategies based on homoeopathic principles (With an example given – Intermittent fever)</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Describe the physiology of thermoregulation in paediatric age group Discuss the pathophysiology of fever and fever pathways Define fever, chills and sweats Discuss the clinical approach to a child with fever, fever with rash – <i>e.g., fever with rash – maculopapular – measles, chicken pox, rubella, dengue fever</i> Discuss classification and types of fever and their homoeopathic management- acute and chronic, low grade, moderate grade, high grade, hyperpyrexia Types of fever patterns and their homoeopathic management – intermittent, remittent, continuous/sustained, hectic, relapsing <i>for e.g. – intermittent fever – malaria – approach as per Allen’s fevers – intermittent disease classified as chronic disease – chronic constitutional prescribing</i> Discuss the common causes of fever in paediatric age group – infectious and non-infectious, under infectious – viral/bacterial/ parasitic/ fungal and others etc.

	<ul style="list-style-type: none"> Describe the common complications of fever in paediatric age group <i>like febrile convulsions</i> Discuss the homoeopathic management strategy – based on Hahnemannian classification of diseases – acute disease – approach acute prescription /chronic disease – approach – chronic constitutional prescription. <p><i>Skill</i></p> <ul style="list-style-type: none"> Perform simultaneous clinical and Homoeopathic history taking specific to inquiry for fever and its associated complaints during the state of pyrexia and apyrexia and arrive at differential diagnosis- for <i>e.g., in intermittent fever like malaria – onset, type, course, history of each stage – fever/chill/sweat – character, time, A/F, modalities and concomitants of each, and interval apyrexia</i> Perform the clinical examination and reach to a probable diagnosis – general and systemic examination – for <i>e.g., malaria - look for pallor, petechiae, lymphadenopathy, hepatomegaly, splenomegaly etc.</i> Choose appropriate investigations and arrive at range of diagnosis – <i>CBC, CRP, PS for MP, Malaria antigen, LFT etc.</i> Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 06: Clinical approach to alterations in functions of Growth and development with its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach
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	to alterations in functions of Growth and development with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in functions of growth and development with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in functions of growth and development ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of growth and developmental milestones and arrive at differential diagnosis ▪ Perform the clinical examination, Anthropometric examinations and specific examinations for developmental assessment and reach to a probable diagnosis ▪ Choose appropriate investigations and testing (hearing/vision/psychometric etc.) and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered growth and development
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ,</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 07: Clinical approach to alterations in functions of Nutrition and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach to alterations in functions of Nutrition with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in functions of Nutrition with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in functions of nutrition ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of diet and nutrition and arrive at differential diagnosis ▪ Perform the clinical examination, Anthropometric examinations and specific examinations for nutritional assessment and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered nutrition
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 08: Clinical approach to alterations in respiratory functions and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach
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	to alterations in respiratory functions with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in respiratory functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in respiratory functions ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of respiratory functions and arrive at differential diagnosis ▪ Perform the clinical examination of the respiratory system and other general and specific examinations and reach to a probable diagnosis ▪ Choose appropriate investigations and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered respiratory functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 08:

For Example: Clinical approach to **cough** and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach
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	to cough with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in respiratory functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with cough – based on the 3 main components – history, examination and investigations – narrowing down from LSMC to probable diagnosis ▪ Enumerate the causes that lead to development of that symptom – <p><i>Acute causes – infection, reactive airways, allergic, irritative, sinusitis, foreign body</i> <i>Chronic causes – infection, asthma/bronchitis, sinusitis, irritative, allergic, foreign body, gastroesophageal reflux, psychogenic, anatomic congenital(cleft/fistula/cyst/polyp), cystic fibrosis, immunodeficiency states,</i></p> <ul style="list-style-type: none"> ▪ List the Possible complications – <i>acute respiratory distress</i> ▪ Discuss the homoeopathic management strategy <p><i>Classification in acute/chronic disease and management based on postulates</i></p> <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of respiratory functions and arrive at differential diagnosis <p><i>Location, sensation, modalities and concomitants of cough</i> <i>Is the cough acute or chronic? Onset, duration, progress of it</i> <i>Based on age -what could be the locations/sphere of action</i> <i>Any recent history of upper respiratory infection</i> <i>What are the associated symptoms – fever with chills, night sweats, nasal discharge, type of expectoration – color, odor, headache, respiratory distress</i> <i>Any change in mood, appetite, thirst, sleep, taste, voice, general activity,</i> <i>Quality of cough – productive/dry/barking/brassy with its modalities of time, position, season, environment, food,</i> <i>Pattern of cough – daytime/nighttime/seasonal with specific time of the day or periodicity</i> <i>Known triggers if any – cold air, dust, smoke, food</i> <i>Any personal or family history of atopy?</i> <i>Any history of recurrent infections?</i> <i>Any history of relation with feeding</i></p>

	<p><i>Any history of failure to thrive/weight loss</i></p> <ul style="list-style-type: none"> Perform the clinical examination of the respiratory system and other general and specific examinations and reach to a probable diagnosis <p><i>General appearance, cyanosis, pallor, clubbing, signs of atopy on skin</i></p> <p><i>Vitals – temp, HR, RR, SPO2</i></p> <p><i>ENT – for nasal polyp, ear discharge, congestion, DNS, enlarged tonsils, transverse nasal crease,</i></p> <p><i>Eyes – conjunctiva congestion, lachrymation</i></p> <p><i>Sinuses -tenderness, halitosis,</i></p> <p><i>Chest - shape and size of chest, respiratory movements, breath sounds, tracheal position, signs of distress, use of accessory muscles</i></p> <ul style="list-style-type: none"> Choose appropriate investigations and arrive at range of diagnosis – <i>CBC, CRP, AEC, IgE, MT, CXR, Sputum for AFB, PFT, Barium swallow, bronchoscopy, immune workup, sweat chloride test,</i> Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Homoeopathic acute/chronic/intercurrent rx with posology, Diet – stop junk food and that triggers, soft fresh home cooked nutritious food, vitamin C rich food</i></p> <p><i>Ancillary measures – saline gargles, home remedies, Vitamin C supplements</i></p> <p><i>Education – Avoid allergens, build immunity, nutritious food</i></p> <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered respiratory functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 09: Clinical approach to alterations in gastrointestinal functions and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach to alterations in gastrointestinal functions with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in gastrointestinal functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in gastrointestinal functions ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of gastrointestinal functions and arrive at differential diagnosis ▪ Perform the clinical examination of the gastrointestinal system and other general and specific examinations and reach to a probable diagnosis ▪ Choose appropriate investigations and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered gastrointestinal functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 10: Clinical approach to alterations in cardiac and circulatory functions and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach to alterations in cardiac and circulatory functions with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in cardiac and circulatory functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in cardiac and circulatory functions ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of cardiac and circulatory functions and arrive at differential diagnosis ▪ Perform the clinical examination of the cardiac and circulatory system and other general and specific examinations and reach to a probable diagnosis ▪ Choose appropriate investigations and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered cardiac and circulatory functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 11: Clinical approach to alterations in excretory functions and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach
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	to alterations in excretory functions with its integration with Homoeopathic management
Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in excretory functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in excretory functions ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of excretory functions and arrive at differential diagnosis ▪ Perform the clinical examination of the excretory system and other general and specific examinations and reach to a probable diagnosis ▪ Choose appropriate investigations and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered excretory functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations, OSCE, Mini-CEX</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 12: Clinical approach to alterations in hematological functions and its integration with Homoeopathic Management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach to alterations in hematological functions with its integration with Homoeopathic management
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Learning outcomes	<p>Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical approach to alterations in haematological functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in hematological functions. ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of hematological functions and arrive at differential diagnosis ▪ Perform the clinical examination of the hematological system and other general and specific examinations and reach to a probable diagnosis ▪ Choose appropriate investigations and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered hematological functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course name: HOM-PG-PED 13: Clinical approach to alterations in neurological functions and its integration with Homoeopathic management

Course overview:	This course will provide students of MD Hom (Paediatrics) an in depth understanding of clinical approach to alterations in neurological functions with its integration with Homoeopathic management
Learning outcomes	Competency 1 – Organize the symptomatology and cardinal manifestations to study the clinical

	<p>approach to alterations in neurological functions with its integration with homoeopathic Management</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the clinical approach to a child with alterations in neurological functions ▪ Enumerate the causes that lead to development of that symptom ▪ List the Possible complications. ▪ Discuss the homoeopathic management strategy <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking for assessment of neurological functions and arrive at differential diagnosis ▪ Perform the clinical examination of the neurological system and other general and specific examinations and reach to a probable diagnosis ▪ Choose appropriate investigations and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered neurological functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ,</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course contents

HOM-PG-PED 01: Application of Basic Medical Sciences to Homoeopathic Paediatrics and Foundations of Homoeopathic Paediatrics

- Correlative study of Normal structure and function in an evolutionary way to reveal Structural and functional integrity of the child in health. This includes physical (structural & functional) & psychological (personality) growth & development of the Infant, Child & Adolescent.

- Normal embryological and development and growth of a child, the range of abnormality and its utility in understanding the child. Learning the fundamentals of intensive care of neonates.
- Embryological Development includes influence of Maternal Health-mental and physical on the Foetus. Considering mother—foetus---neonate as a unit is the key to the treatment of neonates. So, approach to the neonate is actually an approach to this unit.
- Role of Control Systems (Psycho-Neuro-Endocrine axis and the Reticulo-endothelial System) in the maintenance of Health and initiating the process of breakdown and onset of illness
- Understanding the different components which influence health at individual, family and community level leading to insight into preventive and community Paediatrics through Hahnemannian philosophy of holistic care.
- Understanding the bio-psycho-social and environmental model of Etiology and correlating with the Hahnemannian concept of causation and evolution of disease in the growing child.

HOM-PG-PED 02: Fundamentals of Growth and development in Homoeopathic Paediatrics

- Definition and overview of Paediatrics with special reference to age-related disorders
- Normal growth from conception to maturity.
- Anthropometry — measurement and interpretation of weight, length/height, head circumference, and mid-arm circumference.
- Interpretation of Growth Charts
- Health card and percentile growth curves
- Abnormal growth patterns-failure to thrive, short stature.
- Normal development from conception to maturity
- Principles of development
- Developmental milestones – Gross motor, fine motor, social, language and its delayed achievement
- Preventable causes and assessment of developmental retardation.

HOM-PG-PED 03: Fundamentals of Nutrition in Homoeopathic Paediatrics

- Normal requirements of protein, carbohydrates, fats, minerals and vitamins for newborn, children and pregnant and lactating mother. Common food sources.
- Breast feeding-Definition and benefits. Characteristics and advantages of breast milk, Hazards and demerits of prelacteal feed, top milk and bottle-feeding. Feeding of LBW babies.
- Infant feeding/weaning foods, method of weaning, ICYN (Infant and young child Nutrition) Guidelines
- Assessment of a child's nutritional status based on history and physical examination.
- Protein energy malnutrition.
- Vitamins-Recognition of vitamin deficiencies (A, D, K, C, B-Complex). Definition, causes and management of obesity.

HOM-PG-PED 04: Clinical approach to alterations in functions of neonates and its integration with Homoeopathic management

- Alterations in cry – excessive/weak/poor

- Alterations in activity – hyperactivity/drowsiness
- Alterations in tone – hypertonia/hypotonia
- Alterations in colour – cyanosis/pallor/jaundice
- Alterations in suck – poor sucking
- Alterations in feeding habits – refusal to feeds
- Alterations in temperature – hyperthermia/hypothermia
- Other systemic alterations

HOM-PG-PED 05: Clinical approach to fever and its integration with Homoeopathic management

- Physiology of thermoregulation
- Pathophysiology of fever and fever pathways
- Definition of Fever, Chills and Sweats
- Classification and Types of fever and their homoeopathic management –acute and chronic, low grade, moderate grade, high grade, hyperpyrexia
- Types of fever patterns and their homoeopathic management – intermittent, remittent, continuous/sustained, hectic, relapsing

HOM-PG-PED 06: Clinical approach to alterations in functions of Growth and development with its integration with Homoeopathic management

- Short stature
- Obesity
- Developmental delay
- Impaired learning

HOM-PG-PED 07: Clinical approach to alterations in functions of Nutrition and its integration with Homoeopathic management

- Underweight
- Stunting
- Wasting
- Failure to thrive
- Micronutrient deficiencies

HOM-PG-PED 08: Clinical approach to alterations in respiratory functions and its integration with Homoeopathic management

- Cough
- Dyspnoea
- Cyanosis
- Respiratory distress
- Haemoptysis

HOM-PG-PED 09: Clinical approach to alterations in gastrointestinal functions and its integration with Homoeopathic management

- Refusal to feeds
- Vomiting
- Diarrhoea and Constipation
- Weight loss
- Gastrointestinal bleeding
- Jaundice
- Abdominal pain
- Abdominal swelling and ascites

HOM-PG-PED 10: Clinical approach to alterations in cardiac and circulatory functions and its integration with Homoeopathic management

- Murmur
- Cyanosis
- Congestive cardiac failure
- Shock

HOM-PG-PED 11: Clinical approach to alterations in excretory functions and its integration with Homoeopathic management

- Haematuria
- Dysuria
- Enuresis and incontinence
- Voiding dysfunction
- Renal failure – acute and chronic

HOM-PG-PED 12: Clinical approach to alterations in haematological functions and its integration with Homoeopathic management

- Anaemia
- Bleeding
- Enlargement of Lymph nodes and spleen

HOM-PG-PED 13: Clinical approach to alterations in neurological functions and its integration with Homoeopathic management

- Convulsions
- Intracranial space occupying lesions
- Large head
- Small head
- Floppy infant
- Coma
- Headache

- Paralysis and palsies

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Pediatrics	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Pediatrics	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory *(Benchmarked by the module-wise distribution.)*

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 1. Course Numbers

- HOM-PG-PED 01: Application of Basic Medical Sciences to Homoeopathic Paediatrics and Foundations of Homoeopathic Paediatrics
- HOM-PG-PED 02: Fundamentals of Growth and development in Homoeopathic Paediatrics
- HOM-PG-PED 03: Fundamentals of Nutrition in Homoeopathic Paediatrics
- HOM-PG-PED 04: Clinical approach to alterations in functions of neonates and its integration with Homoeopathic management
- HOM-PG-PED 05: Clinical approach to fever and its integration with homoeopathic management
- HOM-PG-PED 06: Clinical approach to alterations in functions of Growth and development with its integration with Homoeopathic management
- HOM-PG-PED 07: Clinical approach to alterations in functions of Nutrition and its integration with Homoeopathic management
- HOM-PG-PED 08: Clinical approach to alterations in respiratory functions and its integration with Homoeopathic management

- HOM-PG-PED 09: Clinical approach to alterations in gastrointestinal functions and its integration with Homoeopathic management
- HOM-PG-PED 10: Clinical approach to alterations in cardiac and circulatory functions and its integration with Homoeopathic management
- HOM-PG-PED 11: Clinical approach to alterations in excretory functions and its integration with Homoeopathic management
- HOM-PG-PED 12: Clinical approach to alterations in hematological functions and its integration with Homoeopathic management
- HOM-PG-PED 13: Clinical approach to alterations in neurological functions and its integration with Homoeopathic management

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-PED 02 OR 03 OR 06 OR 07	20
2	LAQ	HOM-PG-PED 01	10
3	LAQ	HOM-PG-PED 04	10
4	LAQ	HOM-PG-PED 05	10
5	LAQ	HOM-PG-PED 08 or 09 or 11 or 13	10
6	SAQ	HOM-PG-PED 10	5
7	SAQ	HOM-PG-PED 12	5
8	SAQ	HOM-PG-PED 02	5
9	SAQ	HOM-PG-PED 03	5
10	SAQ	HOM-PG-PED 06	5
11	SAQ	HOM-PG-PED 01	5
12	SAQ	HOM-PG-PED 01 or 02 or 03 or 04	5
13	SAQ	HOM-PG-PED 05 or 06 or 07	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical

1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

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Note: Part I Paper 2 separately after Part II Paper 1 & 2.

Part II Paper 1,2

V. Courses and Course Objectives.

Part II:

- HOM-PG-PED 14: Homoeopathic Approach to Mother-neonate unit and Embryology & Neonatology
- HOM-PG-PED 15: Homoeopathic Approach to Disorders of Growth and development
- HOM-PG-PED 16: Homoeopathic Approach to Disorders of Nutrition
- HOM-PG-PED 17: Homoeopathic Approach to Disorders of Fluid and Electrolyte Imbalance
- HOM-PG-PED 18: Homoeopathic Approach to Community Paediatrics
- HOM-PG-PED 19: Homoeopathic approach to Infectious Diseases
- HOM-PG-PED 20: Homoeopathic Approach to Child Psychiatry
- HOM-PG-PED 21: Homoeopathic Approach to Diseases of Paediatric Respiratory system
- HOM-PG-PED 22: Homoeopathic Approach to Diseases of Paediatric Cardiovascular system
- HOM-PG-PED 23: Homoeopathic Approach to Diseases of Paediatric Gastrointestinal and hepatobiliary system
- HOM-PG-PED 24: Homoeopathic Approach to Diseases of Paediatric Nervous system
- HOM-PG-PED 25: Homoeopathic Approach to Paediatric Hematology and oncology
- HOM-PG-PED 26: Homoeopathic Approach to Diseases of Paediatric Renal system
- HOM-PG-PED 27: Homoeopathic Approach to Paediatric Endocrinology
- HOM-PG-PED 28: Homoeopathic Approach to Paediatric Immunology and Allergy
- HOM-PG-PED 29: Homoeopathic Approach to Diseases of Paediatric Musculoskeletal system and Rheumatology

HOM-PG-PED 30: Homoeopathic Approach to Paediatric Dermatology
HOM-PG-PED 31: Homoeopathic Approach to Paediatric Surgical Diseases
HOM-PG-PED 32: Advanced Homoeopathic Paediatrics, emergency Paediatrics and Critical care

VI. Course description

Course Name: HOM-PG-PED 14: Homoeopathic approach to Mother-neonate unit and Embryology& Neonatology

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Mother-neonate unit and Embryology & Neonatology
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to neonatal conditions</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology

	<ul style="list-style-type: none"> ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

For example,

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Low-Birth-weight neonate due to intrauterine growth retardation
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to low-birth-weight neonate (IUGR)</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification – IUGR is when a fetal weight is estimated to be below the 10th percentile for its gestational age -----Classification - <i>chronic disease</i> ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition <i>e.g., Genetic/predisposition – consanguineous marriage/family history of parents, past history of major illnesses in parents or siblings and family, past history of hypertension, epilepsy, bronchial asthma,</i>

	<p><i>endocrine illnesses in mother and drug history, addiction history</i></p> <p><i>Environmental – mothers emotional and physical state before during and after conception and in antenatal, perinatal and post-natal period -</i></p> <ul style="list-style-type: none"> ▪ Enumerate the etiological factors – infectious/non-infectious <p><i>Infectious diseases in mother – Syphilis, cytomegalovirus, toxoplasmosis, rubella, hepatitis-B, HSV 1 or 2, HIV</i></p> <p><i>Non-infectious in mother – malnutrition, multiple pregnancies, drugs, alcohol, smoking, HTN, preeclampsia, DM, SLE, CKD, IBD,</i></p> <p><i>Congenital/ Genetic - Trisomy 21,18,13, Turner’s syndrome</i></p> <ul style="list-style-type: none"> ▪ Explain the causation – exciting/maintaining/ fundamental causes <p><i>Exciting causes – acute stress, trauma</i></p> <p><i>Maintaining causes – malnutrition, drug abuse</i></p> <p><i>Fundamental – genetic, chronic lifestyle disease (miasmatic load)</i></p> <ul style="list-style-type: none"> ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage <p><i>An imbalance or lack of co-ordination in the complex system of dynamic interaction between maternal, placental and foetal environment → uteroplacental insufficiency → inadequate maternal-foetal circulation- → compromised nutritional supply → reduction of total body mass, bone and mineral content, and muscle mass+ blood flow redirected away from vital organs to brain, placenta, heart and adrenal glands → reduction in overall foetal size to increase survival → growth retardation-----can be reversible or irreversible based on severity, cause and post-natal care --- → miasmatic cleavage- → Syphilitic-Syphilitic</i></p> <ul style="list-style-type: none"> ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic/Acute exacerbation of chronic, periodic or chronic disease) <p><i>Types – symmetric and asymmetric –typically onset before or after 32 weeks respectively</i></p> <p><i>Symmetric – usually due to genetic causes/TORCH - placental insufficiency - total cell number – less, cell size normal, uniformly small, undernourished and directing most of its energy to maintain growth of vital organs, such as brain and heart, at the expense of liver, muscle, fat, normal ponderal index, complicated course with poor prognosis – morbidity and mortality – syco-syphilitic</i></p> <p><i>Asymmetric –usually due to chronic hypoxia, malnutrition, small AC (due to decreased liver size), scrawny limbs (decreased muscle mass), thinned skin (decreased fat), total cell number- Normal, cell</i></p>
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	<p><i>size – smaller, head larger than abdomen, low ponderal index, usually uncomplicated course having good prognosis – sycotic</i></p> <p><i>Complications and sequelae - sepsis, adverse neurodevelopmental outcomes – poor academic performance decreased cognitive performance, behavioural problems and hyperactivity</i></p> <ul style="list-style-type: none"> ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations <p><i>Ponderal index, anthropometry – weight, height, HC, CC, AC, HC: AC ratio, complete neonatal head to toe examination</i></p> <p><i>Hepatomegaly, sensory-neural hearing loss, dysmorphic facies – specific signs should be looked for</i></p> <ul style="list-style-type: none"> ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis <p><i>LBW due to prematurity, oligohydramnios</i></p> <ul style="list-style-type: none"> ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p><i>CBC, CRP, S. Bil, RBS, S. Ca, Metabolic work up, CXR, USG abdomen, skull</i></p> <ul style="list-style-type: none"> ▪ Discuss the susceptibility of the case/specific to disease – <i>Based on individual case</i> ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p><i>Generalities – growth retarded, arrested, development arrested,</i></p> <ul style="list-style-type: none"> ▪ Discuss the common indicated remedies with differential HMM (clinical) <p><i>Abrotanum, Baryta group, Calcarea group, Natrum group, Silicea, Animal group- Sepia, Based on mother's constitutional remedy</i></p> <ul style="list-style-type: none"> ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology <p><i>Chronic constitutional prescribing- mother's CR to neonate (aphorism 284 footnote) in 50 millesimal potencies</i></p> <p><i>Acute and intercurrent rx as per requirement</i></p> <p><i>Diet – BF with supplements,</i></p> <p><i>Ancillary measures – based on the specific functional insufficiencies</i></p> <p><i>Education – parents and family orientation about care of the newborn</i></p> <ul style="list-style-type: none"> ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Symmetric – guarded prognosis</i></p> <p><i>Asymmetric – good prognosis</i></p>
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	<p><i>Skill</i></p> <ul style="list-style-type: none"> Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis <p><i>Mother's case definition with neonatal observations</i></p> <ul style="list-style-type: none"> Perform the clinical examination and reach to a probable diagnosis <p><i>Complete neonatal examination</i></p> <ul style="list-style-type: none"> Choose appropriate investigations and growth charts and arrive at range of diagnosis <p><i>Complete work up, Fenton's growth charts</i></p> <ul style="list-style-type: none"> Identify common and the characteristic symptoms <p><i>Case- based</i></p> <ul style="list-style-type: none"> Organize repertorial representations, differential materia medica and flow of susceptibility and miasm <p><i>Case- based</i></p> <ul style="list-style-type: none"> Construct the basic management strategy <p><i>Individualized case based</i></p> <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course name: HOM-PG-PED 15: Homoeopathic Approach to Disorders of Growth and Development

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Disorders of Growth and Development
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Disorders of Growth and Development</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition

	<ul style="list-style-type: none"> ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p>

	Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 16: Homoeopathic Approach to Disorders of Nutrition

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Disorders of Nutrition
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Disorders of Nutrition</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis

	<ul style="list-style-type: none"> Perform the clinical examination and reach to a probable diagnosis Choose appropriate investigations and growth charts and arrive at range of diagnosis Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 17: Homoeopathic Approach to Disorders of Fluid and Electrolyte Imbalance

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Disorders of Fluid and Electrolyte imbalance
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Disorders of Fluid and Electrolyte Imbalance</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition Enumerate the etiological factors – infectious/non-infectious Explain the causation – exciting/maintaining/ fundamental causes Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease Enumerate clinical examination- general and systemic to establish clinico-pathological and

	<p>miasmatic correlations</p> <ul style="list-style-type: none"> ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 18: Homoeopathic Approach to Community Paediatrics

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic
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	approach community Paediatrics
Learning outcomes	<p>Competency 1 –Homoeopathic approach to Community Paediatrics</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the basic concepts and principles of community Medicine in Paediatrics and its utility for Homoeopathic paediatrician in community ▪ Discuss the components of Perinatal care in the community, nation and the world with role of Homoeopathic paediatrician ▪ Discuss the Tenets of Breastfeeding in today’s context and how can a homoeopathic paediatrician contribute to improvement of it ▪ Illustrate the Baby-friendly Hospital initiative ▪ Summarise the gender issues in Reproductive and child health ▪ Correlate the epidemiology of respiratory diseases in community – acute respiratory tract infections, allergy and childhood asthma and Homoeopathic management principles to levels of prevention in community ▪ Discuss Tuberculosis in children with its Homoeopathic approach in community ▪ Explain the water and food borne diseases- acute diarrhoeal diseases, vector borne diseases with its Homoeopathic approach in community ▪ Discuss the nutritional problems in children and adolescents and role of Homoeopathic Paediatrician in community ▪ Describe the causes, epidemiology, clinical presentation, detection and Homoeopathic management of Nutritional Anaemia in children and adolescents. ▪ Evaluate the Nutritional Programs and policies in India ▪ Discuss the National Nutritional programme – POSHAN Abhiyan ▪ Discuss the Integrated child development services (ICDS) Scheme in India – objectives, beneficiaries, Services, complementary Nutrition, Immunisation, health check-ups and referrals, Growth monitoring Promotion (GMP) Non formal and preschool education and how can a Homoeopathic Paediatrician contribute in it ▪ Discuss the School Health program under “Ayushman Bharat” – Objectives, Target population, Package of services and Operationalization ▪ Discuss the burden of Thalassemia and Hemoglobinopathies in India and role of Homoeopathic paediatrician ▪ Discuss the burden of blindness and visual impairment in childhood in India and role of

	<p>Homoeopathic paediatrician in prevention and management of it</p> <ul style="list-style-type: none"> ▪ Discuss the role of Homoeopathic Paediatrician in society and for prevention and management of child abuse, neglect and poisoning ▪ Explain the BPS model to understand conduct disorder and juvenile delinquency with its Homoeopathic management ▪ Discuss the Homoeopathic approach to physical and mental disability in individual and community settings ▪ Analyse the role of Homoeopathic Paediatrician in child labour, street children, substance abuse, adoption ▪ Enumerate the major environment health risks in children ▪ Discuss the impact of environmental health risks for children ▪ Discuss the principles of immunisation in India ▪ Explain the concept of Vaccinosis ▪ Evaluate the role of Homoeopathic Paediatrician in various National Health Programs <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform screening camps for various nutritional and health care needs of Children and adolescents in the community ▪ Perform requisite screening examinations, tests and evaluation for diagnosing various paediatric disease in the community ▪ Construct management plan for homoeopathic management of various health care needs of children in the community <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on role of homoeopathic Pediatrician at various levels of Prevention of disease in community and scope and limitations
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 19: Homoeopathic Approach to Infectious Diseases

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Infectious Diseases
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Infectious Diseases</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and

	miasm <ul style="list-style-type: none"> Construct the basic management strategy. <i>Reflection</i> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 20: Homoeopathic Approach to Child Psychiatry

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Child Psychiatry
Learning outcomes	Competency 1 – Clinical assessment and Homoeopathic approach to Child Psychiatry <i>Knowledge</i> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition Enumerate the etiological factors – infectious/non-infectious Explain the causation – exciting/maintaining/ fundamental causes Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations Enlist the differential diagnosis and reach to the probable clinical diagnosis Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) Discuss the susceptibility of the case/specific to disease

	<ul style="list-style-type: none"> ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 21: Homoeopathic Approach to Diseases of Paediatric Respiratory system

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Diseases of Paediatric Respiratory System
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Diseases of Paediatric Respiratory System</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification

	<ul style="list-style-type: none"> ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments

	Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL
Examples	
Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Pneumonia
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Pneumonia</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification <p><i>Dynamic, acute, individual disease</i></p> <ul style="list-style-type: none"> ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition <p><i>Leading cause of mortality and morbidity in India in children under 5 years of age</i></p> <p><i>Environmental risk factors - lack of exclusive breastfeeding, LBW, Under-nutrition, indoor air pollution, overcrowding, lack of measles immunization,</i></p> <ul style="list-style-type: none"> ▪ Enumerate the etiological factors – infectious/non-infectious <p><i>Infectious – Bacterial, viral, fungal</i></p> <p><i>Non-infectious – aspiration of chemicals</i></p> <ul style="list-style-type: none"> ▪ Explain the causation – exciting/maintaining/ fundamental causes <p><i>Exciting – exposure to cold weather, cloudy weather, cold food and drinks</i></p> <p><i>Maintaining – poor hygiene, sanitation, nutrition</i></p> <p><i>Fundamental – disposition to taking cold easily, weak end organ susceptibility</i></p> <ul style="list-style-type: none"> ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage <p><i>Once the immune barrier function is compromised – invasion of mucous membrane – inflammation - injury to epithelium and alveoli – impaired oxygenation</i></p> <p><i>4 stages of lobar pneumonia – congestion, red hepatization, grey hepatization, resolution</i></p> <p><i>Bronchopneumonia commonly seen in young children</i></p> <p><i>Structural reversible pathology mostly of sycotic and tubercular activity</i></p> <ul style="list-style-type: none"> ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease)

	<p><i>Symptoms - Usually, acute onset with rapid progress of Cough, fever, tachypnoea, difficulty in breathing, feeding</i></p> <p><i>Complications – respiratory failure, pleural effusion, empyema, lung abscess, pneumothorax, pneumatoceles, bacteraemia, sepsis</i></p> <ul style="list-style-type: none"> ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations <p><i>Signs – check for - G.C – good/moderate/toxic, cyanosis, signs of respiratory distress, tachypnoea, nasal flaring, lower chest indrawing, hypoxia on room air, grunting and apnoea in infants, auscultation – rales and rhonchi in all lung fields or specific zones as per consolidation, focal crackles, decreased breath sounds, signs of dehydration,</i></p> <ul style="list-style-type: none"> ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis <p><i>Pneumonia, bronchitis, bronchiolitis, asthma exacerbation, tuberculosis</i></p> <ul style="list-style-type: none"> ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p><i>CBC, CRP, ESR, CXR in general, ABGA, S. electrolytes, LFT and blood culture if toxic look</i></p> <ul style="list-style-type: none"> ▪ Discuss the susceptibility of the case/specific to disease <p><i>Evaluate the pace, characteristics, sensitivity, reactivity, immunity to in the given case</i></p> <ul style="list-style-type: none"> ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p><i>Borland's pneumonia – regional repertory – 4 types of Pneumonia and rubrics</i></p> <p><i>Kent – chest lungs inflammation – lobes, sides with various sub rubrics given</i></p> <ul style="list-style-type: none"> ▪ Discuss the common indicated remedies with differential HMM (clinical) <p><i>Antim tart, Bryonia, phosphorus, Pulsatilla, Chelidonium, Lycopodium, merc sol</i></p> <ul style="list-style-type: none"> ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology <p><i>Acute management – formation of acute totality based on Characteristics</i></p> <p><i>Diet – Nutritious food, plenty of oral fluids</i></p> <p><i>Ancillary – Oxygen inhalation, Intravenous fluids, Tepid sponging for fever</i></p> <p><i>Education – parents for hygiene, nutrition, family planning</i></p> <p><i>Posology – guidelines for crisis and lysis mentioned by Borland</i></p> <ul style="list-style-type: none"> ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation <p><i>Generals to particulars – general well-being, change in activity/mood, appetite, fever, cough, breathlessness, vital signs, chest examination, x ray findings, blood ix,</i></p>
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	<ul style="list-style-type: none"> ▪ Discuss the scope and limitations (Prognosis) <i>Scope – good scope in children with complete resolution with Homoeopathy</i> <i>Prognosis -good</i> <i>Skill</i> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis <i>ODP, LSMC, enquiry for onset with upper respiratory tract symptoms, fever, cough, dyspnea, associated complaints- headache, malaise, lethargy, chills, anorexia, chest pain, nausea, vomiting, abdominal pain, Ask for characteristics time, position, meteorological, food causative modalities, mental and physical concomitant of change in mood, activity, thirst, company, irritability, desires etc.</i> ▪ Perform the clinical examination and reach to a probable diagnosis <i>General and systemic examination</i> ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis <i>Hematological, radiological and blood culture</i> ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <i>Management of acute disease – formation of acute totality, HMM differentiation, assessment of posology</i> <i>Reflection</i> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ, Bed side demonstrations, case presentations,
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Example

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Chronic Tonsillitis
Learning outcomes	Competency 1 – Clinical assessment and Homoeopathic approach to Chronic Tonsilitis <i>Knowledge</i>

	<ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification <p>Dynamic, Chronic Miasmatic disease</p> <ul style="list-style-type: none"> ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition <p>Age-commonest between 5 to 15 years</p> <p>Environmental – exposure to triggers</p> <ul style="list-style-type: none"> ▪ Enumerate the etiological factors – infectious/non-infectious <p>Infectious -viral and Bacterial</p> <ul style="list-style-type: none"> ▪ Explain the causation – exciting/maintaining/ fundamental causes <p>Exciting – Exposure to cold. Change of weather, cold food, drinks</p> <p>Maintaining – repeated exposure to triggers</p> <p>Fundamental – strong miasmatic load – usually syco-tubercular</p> <ul style="list-style-type: none"> ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage <p>Inflammatory response – swelling, cellular injury and haemolysis, accumulation and deposition of cellular debris, Lymph node enlargement –</p> <p>Structural reversible- syco-tubercular</p> <ul style="list-style-type: none"> ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease <p>Acute – fever, tonsillar exudates, sore throat, tender anterior cervical lymphadenopathy, odynophagia and dysphagia due to tonsillar hypertrophy</p> <p>Chronic – tonsillar hypertrophy, lymphadenopathy, halitosis,</p> <p>Complications – Group A streptococcal infections can have serious complications- peritonsillar abscess, otitis media, pneumonia, sinusitis, bacteraemia, osteomyelitis, meningitis, arthritis, erythema nodosum, acute post streptococcal glomerulonephritis, acute rheumatic fever, toxic shock syndrome</p> <ul style="list-style-type: none"> ▪ Enumerate clinical examination- general and systemic to establish clinicopathological and miasmatic correlations <p>Visualisation of tonsils – swelling, erythema, exudates, tonsillar enlargement,</p> <p>Examination of ear and nose and Neck for lymphadenopathy</p> <p>Miasm – sycotic-tubercular</p> <ul style="list-style-type: none"> ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis <p>Pharyngitis, retropharyngeal abscess, epiglottitis</p>
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	<ul style="list-style-type: none"> Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p>Usually not done</p> <ul style="list-style-type: none"> Discuss the susceptibility of the case/specific to disease Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p>Throat-inflammation-tonsils – sides,</p> <ul style="list-style-type: none"> Discuss the common indicated remedies with differential HMM (clinical) <p>Belladonna, Hepar Sulph, Phytolacca, Merc sol, Baryta carb, calc carb</p> <ul style="list-style-type: none"> Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology <p>Acute – Acute rx when in acute pain and infection</p> <p>Chronic – chronic constitutional rx with need for intercurrent remedy doses</p> <ul style="list-style-type: none"> Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation Discuss the scope and limitations (Prognosis) <p>Good scope and prognosis. Can prevent tonsillectomy in many cases</p> <p><i>Skill</i></p> <ul style="list-style-type: none"> Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis Perform the clinical examination and reach to a probable diagnosis Choose appropriate investigations and growth charts and arrive at range of diagnosis Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Example

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Bronchial Asthma
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Bronchial Asthma</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification Dynamic, chronic, episodic, miasmatic disease Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition Predisposition – family history of Atopy, Past history of Atopy Disposition – Atopic diathesis and constitution Environment – exposure to allergens Personality – hypersensitive mind and body Enumerate the etiological factors – infectious/non-infectious Non-infectious trigger factors and allergens- dust, smoke, pollens, mites, food, weather Explain the causation – exciting/maintaining/ fundamental causes Exciting causes – exposure to allergens – acute exacerbation Maintaining – damp, cold weather, mental emotional Fundamental – Sycotic miasm Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage Atopic constitution – hypersensitive mind and body – allergic response triggered – bronchoconstriction, collection of mucous and debris, bronchial oedema – structural reversible – sycotic miasm Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease Dry cough, breathlessness, may be preceded by nasal and eye symptoms of itching, redness, sneezing, Complications -status asthmaticus, respiratory failure Acute exacerbation of chronic episodic disease Structural reversible – sycotic miasm Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations Vitals - tachypnoea, hypoxia(SPO2 low)

	<p>RS – chest – rhonchi, chest indrawing, use of accessory muscle of respiration, Enlist the differential diagnosis and reach to the probable clinical diagnosis</p> <ul style="list-style-type: none"> Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p>CBC, AEC, S. IgE, CXR, PFT</p> <ul style="list-style-type: none"> Discuss the susceptibility of the case/specific to disease Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p>Kent – Respiration, difficult, asthmatic</p> <ul style="list-style-type: none"> Discuss the common indicated remedies with differential HMM (clinical) <p>Ars alb, Kali carb, nat sulph, Spongia, Ipecac, Antim tart, Medo, Bromium</p> <ul style="list-style-type: none"> Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology <p>Acute exacerbation – acute remedy</p> <p>Chronic constitutional and intercurrent treatment for chronic condition</p> <ul style="list-style-type: none"> Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation Discuss the scope and limitations (Prognosis) <p>Scope and Prognosis – good</p> <p><i>Skill</i></p> <ul style="list-style-type: none"> Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis Perform the clinical examination and reach to a probable diagnosis Choose appropriate investigations and growth charts and arrive at range of diagnosis Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions –ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list

Domains of competencies	KS/PC/HO/PBL
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Course Name: HOM-PG-PED 22: Homoeopathic Approach to Paediatric Cardiovascular system

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to paediatric Cardiovascular system
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Cardiovascular system</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis

	<ul style="list-style-type: none"> Perform the clinical examination and reach to a probable diagnosis Choose appropriate investigations and growth charts and arrive at range of diagnosis Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Example

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Patent Ductus Arteriosus
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Patent Ductus Arteriosus</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification <p>Congenital birth defect – dynamic chronic miasmatic disease</p> <ul style="list-style-type: none"> Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition <p>Genetic – Trisomy 13,18,21, Predisposition – maternal DM, Magnesium exposure, cocaine, Disposition – extreme prematurity,</p> <ul style="list-style-type: none"> Enumerate the etiological factors – infectious/non-infectious <p>Non-infectious – Neonatal sepsis, drugs, respiratory distress syndrome,</p> <ul style="list-style-type: none"> Explain the causation – exciting/maintaining/ fundamental causes <p>Fundamental causes – syco-syphilitic</p> <ul style="list-style-type: none"> Describe the pathogenesis – evolution of pathology (functional to structural/reversible to

	<p>irreversible) with possible miasmatic cleavage</p> <p>Failure of functional and anatomical closure of Ductus arteriosus at end of 8 weeks of life- syco-syphilitic</p> <ul style="list-style-type: none"> ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease) <p>Machinery murmur, tachycardia, bounding peripheral pulses, wide pulse pressure, respiratory distress, hypoxia,</p> <ul style="list-style-type: none"> ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations <p>General and systemic examination – CVS for murmur</p> <ul style="list-style-type: none"> ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis <p>Coronary artery fistula, sinus of Valsalva,</p> <ul style="list-style-type: none"> ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p>ECG, 2D ECHO, CXR,</p> <ul style="list-style-type: none"> ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p>Phatak repertory – Foramen ovale, non-closure of – calc phos</p> <ul style="list-style-type: none"> ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology <p>Chronic constitutional and antimiasmatic of mother/neonate – LM potency frequent repetitions</p> <ul style="list-style-type: none"> ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p>Based on size of the opening – good when small, surgery can be avoided.</p> <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm
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	<ul style="list-style-type: none"> Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ, Bed side demonstrations, case presentations,
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 23: Homoeopathic Approach to Paediatric Gastrointestinal and Hepatobiliary system

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Gastrointestinal and Hepatobiliary system
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Gastrointestinal and Hepatobiliary system</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition Enumerate the etiological factors – infectious/non-infectious Explain the causation – exciting/maintaining/ fundamental causes Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations Enlist the differential diagnosis and reach to the probable clinical diagnosis Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) Discuss the susceptibility of the case/specific to disease Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke

	<ul style="list-style-type: none"> ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 24: Homoeopathic Approach to Paediatric Nervous system

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Nervous system
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Nervous system</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes

	<ul style="list-style-type: none"> ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease) ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list

Domains of competencies	KS/PC/HO/PBL
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Course Name: HOM-PG-PED 25: Homoeopathic approach to Paediatric Hematology and Oncology

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Hematology and Oncology
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Haematology and Oncology</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis

	<ul style="list-style-type: none"> Perform the clinical examination and reach to a probable diagnosis Choose appropriate investigations and growth charts and arrive at range of diagnosis Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Example: Homoeopathic Approach to Nephroblastoma (Wilm's Tumor)

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Nephroblastoma (Wilm's Tumor)
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Nephroblastoma (Wilm's Tumor)</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification <p>Dynamic Chronic Miasmatic Disease</p> <ul style="list-style-type: none"> Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition <p>Most common Paediatric abdominal cancer, most common renal cancer, fourth most common paediatric cancer overall and 5th common in India</p> <p>Age – usually common in less than 5 years of age (#-5 years)</p> <p>Sex – girls are slightly more likely to have than boys</p> <p>Genetic – genetic alterations during the normal development of of the Genito-urinary tract and associated with many syndromes</p> <ul style="list-style-type: none"> Enumerate the etiological factors – infectious/non-infectious

	<p>Genetic alterations found in 1/3rd cases.</p> <ul style="list-style-type: none"> Explain the causation – exciting/maintaining/ fundamental causes <p>Fundamental cause – syco-syphilitic miasm</p> <ul style="list-style-type: none"> Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage <p>Structural irreversible –</p> <p>Histologically – 90% favourable outcome, 10% unfavourable outcome</p> <ul style="list-style-type: none"> Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease <p>Asymptomatic abdominal mass. Usually discovered by mother while bathing the infqnt. . Abdominal pain, gross haematuria, urinary tract infections, varicocele, hypertension or hypotension, fever, anemia, and respiratory symptoms if they have lung metastasis.</p> <p>Abdominal pain is the most common initial presenting symptom followed by hypertension and haematuria</p> <ul style="list-style-type: none"> Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations <p>General examination for pallor, lymphadenopathy</p> <p>Systemic examination – Per abdomen – abdominal lump</p> <ul style="list-style-type: none"> Enlist the differential diagnosis and reach to the probable clinical diagnosis <p>Clear cell renal sarcoma</p> <p>Congenital mesoblastic nephroma</p> <ul style="list-style-type: none"> Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p>CBC, RFT, urine analysis, Coagulation studies, USG, abdomen and chest CT, CXR for lung metastasis, abdominal MRI</p> <ul style="list-style-type: none"> Discuss the susceptibility of the case/specific to disease Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p>Synthesis repertory – Kidneys, cancer – calc, chim, formica, sars, solidago</p> <p>Kidney’s tumours, ureters – Anil.</p> <ul style="list-style-type: none"> Discuss the common indicated remedies with differential HMM (clinical) <p>calc, chim, formica, sars, solidago</p> <ul style="list-style-type: none"> Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-
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	<p>therapeutic (Diet, ancillary measures, education) with assessment of posology</p> <p>Palliative Management – as an add on therapy to improve adaptation, quality of life, and slow down the process</p> <p>Ancillary – Nephrectomy, chemotherapy, radiotherapy</p> <ul style="list-style-type: none"> ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p>Stage I and II – favourable outcomes</p> <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 26: Homoeopathic Approach to Paediatric Renal system

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Renal system
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Renal system</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious

	<ul style="list-style-type: none"> ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>

Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 27: Homoeopathic approach to paediatric Endocrinology

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Endocrinology
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric endocrinology</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis

	<ul style="list-style-type: none"> Perform the clinical examination and reach to a probable diagnosis Choose appropriate investigations and growth charts and arrive at range of diagnosis Identify common and the characteristic symptoms Organize repertorial representations, differential materia medica and flow of susceptibility and miasm Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 28: Homoeopathic Approach to Allergy and Immunology

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Allergy and Immunology
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Allergy and Immunology</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition Enumerate the etiological factors – infectious/non-infectious Explain the causation – exciting/maintaining/ fundamental causes Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations Enlist the differential diagnosis and reach to the probable clinical diagnosis

	<ul style="list-style-type: none"> ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course name: HOM-PG-PED 29: Homoeopathic approach to Paediatric Musculoskeletal system and Rheumatology

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Musculoskeletal system and Rheumatology
Learning outcomes	Competency 1 – Clinical assessment and Homoeopathic approach to Infectious Diseases <i>Knowledge</i>

	<ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
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Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 30: Homoeopathic Approach to Paediatric Dermatology

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Dermatology
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Dermatology</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequalae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis)

	<p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 31: Homoeopathic Approach to Paediatric Surgical diseases

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Paediatric Surgical Diseases
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Paediatric Surgical Diseases</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease)

	<ul style="list-style-type: none"> ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

For example: Homoeopathic Approach to Tunica vaginalis Hydrocele

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Homoeopathic approach to Tunica Vaginalis Hydrocele
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Tunica Vaginalis Hydrocele</p> <p><i>Knowledge</i></p> <ul style="list-style-type: none"> Discuss the type of disease – Hahnemannian classification <p>Dynamic, chronic, miasmatic disease</p> <ul style="list-style-type: none"> Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition <p>LBW infants, Breech presentation, can predispose to it</p> <ul style="list-style-type: none"> Enumerate the etiological factors – infectious/non-infectious <p>Non-infectious – primary hydrocele– Failure of closure of patent tunica vaginalis</p> <p>Infectious – secondary hydrocele</p> <ul style="list-style-type: none"> Explain the causation – exciting/maintaining/ fundamental causes <p>Fundamental – congenital – miasmatic - sycosis</p> <ul style="list-style-type: none"> Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage <p>Patency of processus vaginalis – allows peritoneal fluid to flow into the scrotum – structural reversible – may be irreversible in some cases – sycotic miasm</p> <ul style="list-style-type: none"> Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease <p>Painless scrotal swelling rendering testes impalpable with positive transillumination test,</p> <ul style="list-style-type: none"> Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations <p>Local examination of inguinal-scrotal region</p> <ul style="list-style-type: none"> Enlist the differential diagnosis and reach to the probable clinical diagnosis <p>Inguinal hernia, epididymal cyst, spermatocele, testicular tumour, varicocele</p> <ul style="list-style-type: none"> Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) <p>USG, Serum-Alpha-fetoprotein, Human chorionic gonadotropins, urine analysis</p> <ul style="list-style-type: none"> Discuss the susceptibility of the case/specific to disease Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke <p>Male genitalia - hydrocele</p>

	<ul style="list-style-type: none"> ▪ Discuss the common indicated remedies with differential HMM (clinical) Rhododendron, clematis, Arnica, Apis, Abrotanum, ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology <p>Chronic constitutional prescription</p> <ul style="list-style-type: none"> ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p>Scope and prognosis – favourable</p> <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
Assessment	<p>Formative and summative assessments</p> <p>Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ</p> <p>Bed side demonstrations, case presentations</p>
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

Course Name: HOM-PG-PED 32: Advanced Homoeopathic Paediatrics, emergency Paediatrics and Critical care

Course overview:	This course will provide students of MD Hom (Paediatrics) an in-depth understanding of Advanced Homoeopathic Paediatrics, emergency Paediatrics and Critical care
Learning outcomes	<p>Competency 1 – Clinical assessment and Homoeopathic approach to Advanced Homoeopathic Paediatrics, emergency Paediatrics and Critical care</p> <p><i>Knowledge</i></p>

	<ul style="list-style-type: none"> ▪ Discuss the type of disease – Hahnemannian classification ▪ Discuss the epidemiology – genetic, environmental, personality, predisposition and disposition ▪ Enumerate the etiological factors – infectious/non-infectious ▪ Explain the causation – exciting/maintaining/ fundamental causes ▪ Describe the pathogenesis – evolution of pathology (functional to structural/reversible to irreversible) with possible miasmatic cleavage ▪ Discuss the signs and symptoms- evolution, clinicopathogenesis, end result in complications or sequelae along with miasmatic evolution (acute disease/acute to chronic. Acute exacerbation of chronic, periodic or chronic disease ▪ Enumerate clinical examination- general and systemic to establish clinico-pathological and miasmatic correlations ▪ Enlist the differential diagnosis and reach to the probable clinical diagnosis ▪ Enumerate investigations – general and symptom-specific to establish miasmatic correlations (multimiasmatic evolution) ▪ Discuss the susceptibility of the case/specific to disease ▪ Enlist representation in repertory- specific to disease rubrics – Kent, TPB, Boericke ▪ Discuss the common indicated remedies with differential HMM (clinical) ▪ Discuss management strategy – therapeutic (homoeopathic – acute/chronic/intercurrent) and non-therapeutic (Diet, ancillary measures, education) with assessment of posology ▪ Discuss the follow up criteria – general and specific and steps of remedy reaction evaluation ▪ Discuss the scope and limitations (Prognosis) <p><i>Skill</i></p> <ul style="list-style-type: none"> ▪ Perform simultaneous clinical and Homoeopathic history taking and arrive at differential diagnosis ▪ Perform the clinical examination and reach to a probable diagnosis ▪ Choose appropriate investigations and growth charts and arrive at range of diagnosis ▪ Identify common and the characteristic symptoms ▪ Organize repertorial representations, differential materia medica and flow of susceptibility and miasm ▪ Construct the basic management strategy. <p><i>Reflection</i></p> <ul style="list-style-type: none"> ▪ Reflect on importance of history taking, clinical examination and investigation in homoeopathic management and decide the scope in disordered functioning
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Assessment	Formative and summative assessments Case based/scenario based/problem-based questions – ABQ, LAQ, SAQ Bed side demonstrations, case presentations, OSCE, Mini-CEX
Prescribed texts	As per the list
Domains of competencies	KS/PC/HO/PBL

HOM-PG-PED 14: Homoeopathic approach to Mother-neonate unit and Embryology& Neonatology

Neonatology: newborn care – examination & diseases.

- Definition —live birth, neonatal period, classification according to weight and gestation, mortality rates, APGAR score
- Care of the normal newborn at birth and in the first week of life - Neonatal examination, anthropometry, reflexes,
- Normal variations and clinical signs in the neonate
- High risk neonates – preterm, LBW, IUGR
- Neonatal feeding – gavage, paladay, EBM, Breastfeeding, colostrum, foremilk, hindmilk,
- Birth asphyxia: causes, diagnosis and principles of management
- Neonatal Jaundice: causes, diagnosis and principles of management.
- Neonatal respiratory diseases – meconium aspiration pneumonia, aspiration pneumonia, RDS etc.
- Other diseases – congenital heart disease, hypoglycemia, hydrocephalus,
- Neonatal infection — aetiology, diagnosis, principles of management. Superficial infections, sepsis.
- Identification of sick newborn (i.e., detection of abnormal signs —cyanosis, jaundice, respiratory distress, bleeding, seizures, refusal to feed, abdominal distension, failure to pass meconium and urine)
- Congenital problems with correlation with embryology – patent ductus arteriosus, undescended testis, cleft palate, etc.

HOM-PG-PED 15: Homoeopathic Approach to disorders of Growth and Development

- Disorders of growth
 - Short stature
 - GH deficiency/insufficiency
 - Turner syndrome
 - Prader-Willi Syndrome
 - Noonan Syndrome
- Disorders of development
 - Global developmental delay
 - Intellectual disability
 - Learning disorders

- Autism spectrum disorders
- Attention deficit Hyperactivity disorder
- Rett syndrome
- Language disorders
- Cerebral palsy

HOM-PG-PED 16: Homoeopathic Approach to disorders of Nutrition

- Malnutrition –
 - macronutrients – undernutrition (Underweight, stunting, wasting) and overnutrition (Obesity),
 - micronutrients – vitamins and minerals

HOM-PG-PED 17: Homoeopathic Approach to disorders of fluid and electrolyte imbalance

- Principles and buffer systems
- Mechanism of dehydration and its management
- Metabolic and respiratory acidosis and alkalosis

HOM-PG-PED 18: Homoeopathic Approach to Community Paediatrics

- Concepts & Principles of Community Paediatrics
- Perinatal care in the community, nation and the world
- Breastfeeding Today's Infants – exclusive breast feeding for 6 months
- Baby- friendly Hospital initiative
- Gender issues in Reproductive and child health
- Epidemiology of acute respiratory tract infections, allergy and Childhood asthma in Community
- Tuberculosis in children
- Water and food borne diseases – acute diarrhoeal diseases, Vector Borne diseases
- Nutritional problems in children and adolescents – Nutritional Anaemia,
- Nutritional Programs and policies in India, National Nutrition Programme, Child Nutrition in current health policies – POSHAN Abhiyan
- Integrated child development Services (ICDS) Scheme in India – management of neonatal and childhood illnesses
- School Health Programs under “Ayushman Bharat”
- Thalassemia and hemoglobinopathies in India
- Blindness and visual impairment in childhood
- Child abuse, neglect, poisoning in children
- Conduct disorder and Juvenile Delinquency
- The child with cognitive impairment/physical disability in community settings
- Child labour, street children, substance abuse

- Adoption
- Environmental health risks for children
- Impact of Immunization programme in India
 - Principles of Immunization.
 - Vaccine preservation and cold-chain.
 - National Immunization Programme
 - Concept of Vaccinosis
- National health programmes
 - Universal immunisation programme
 - ICDS
 - Mid-day meal programme (POSHAN Abhiyan)
 - Balwadi nutritional programme
 - National iodine deficiency prevention programme
 - National blindness control programme

HOM-PG-PED 19: Homoeopathic approach to infectious diseases

Common bacterial, viral and parasitic infections in the region, with special reference to vaccine preventable diseases:

- Tuberculosis,
- Poliomyelitis,
- Diphtheria,
- Whooping cough,
- Tetanus including neonatal tetanus,
- Measles,
- Mumps,
- Rubella,
- Typhoid,
- Viral Hepatitis,
- Cholera,
- Chickenpox,
- Giardiasis,
- Amoebiasis,
- Intestinal helminthiasis,
- Malaria

- Dengue

HOM-PG-PED 20: Homoeopathic Approach to Child Psychiatry

- Breath-holding spells
- Nocturnal enuresis
- Temper tantrums
- Pica
- Autism
- Learning Problems
- ADHD
- Anxiety disorders

HOM-PG-PED 21: Homoeopathic Approach to Diseases of Paediatric Respiratory system

- Acute upper respiratory infections
- Pneumonia with emphasis on bronchopneumonia, bronchiolitis, bronchitis.
- Acute and chronic otitis media.
- Bronchial asthma. Treatment of acute severe asthma
- Pulmonary tuberculosis-tuberculous infection versus tuberculous disease, difference between primary and post-primary tuberculosis. Multidrug resistant tuberculosis
- Bronchiectasis
- Neoplasia

HOM-PG-PED 22: Homoeopathic Approach to Diseases of Paediatric Cardiovascular system

- Congenital acyanotic and cyanotic heart disease. VSD, PDA, ASD and Fallot's tetralogy (Cyanotic spells).
- Acute rheumatic fever. Common forms of rheumatic heart disease in childhood.
- Hypertension in children-recognition and referral.
- Bacterial endocarditis,
- Pericardial effusion,
- Myocarditis.

HOM-PG-PED 23: Homoeopathic Approach to Diseases of Paediatric Gastrointestinal and hepatobiliary system

- Acute diarrhoeal disease-diarrhoea, complications of diarrhoeal illness.
- Acute viral hepatitis, causes & diagnosis of Chronic Liver Disease.
- Common causes of constipation

HOM-PG-PED 24: Homoeopathic Approach to Diseases of Paediatric Nervous system

- Acute pyogenic meningitis,

- Encephalitis
- Tubercular Meningitis.
- Seizure Disorder
- Febrile convulsions
- Cerebral palsy

HOM-PG-PED 25: Homoeopathic Approach to Paediatric Hematology and oncology

- Anaemia in childhood
- Anaemia with lymphadenopathy and/or hepatosplenomegaly
- Thalassemia
- Approach to a bleeding child
- Acute lymphoblastic leukaemia
- Haemophilia
- ITP

HOM-PG-PED 26: Homoeopathic Approach to Diseases of Paediatric Renal system

- Acute post-streptococcal glomerulonephritis
- Nephrotic syndrome.
- Urinary tract infection-acute and recurrent.
- Acute renal failure.
- Obstructive uropathy in children.
- Renal and bladder stones

HOM-PG-PED 27: Homoeopathic Approach to Paediatric Endocrinology

- Diabetes and hypothyroidism,
- Hyperthyroidism and Goitre in children.
- Delayed and precocious puberty

HOM-PG-PED 28: Homoeopathic Approach to Paediatric Immunology and Allergy

- Allergic rhinitis
- Childhood asthma
- Atopic dermatitis
- Eczema
- Urticaria, angioedema, Anaphylaxis
- Food allergies

HOM-PG-PED 29: Homoeopathic Approach to Diseases of Paediatric Musculoskeletal System and Rheumatology

- Juvenile rheumatoid arthritis
- Lupus
- Muscular dystrophy
- Skeletal dysplasia
- Trauma
- Infection

HOM-PG-PED 30: Homoeopathic Approach to Paediatric Dermatology

- Infectious diseases – scabies, impetigo, tinea cruris,
- Non-infectious diseases – eczema, seborrheic dermatitis, diaper rash, warts, acne, psoriasis, pityriasis

HOM-PG-PED 31: Homoeopathic Approach to Paediatric Surgical Diseases

- Cleft lip and palate
- Hypospadias
- Undescended testis
- Tracheoesophageal fistula
- Hydrocephalus
- CTEV (Club foot)
- Umbilical and inguinal hernia, congenital diaphragmatic hernia
- Anorectal malformations
- Hypertrophic pyloric stenosis
- Neonatal intestinal obstruction (including atresia)
- Anorectal malformation
- Tumours
- Spina bifida
- Obstructive jaundice
- Hirschsprung's disease
- Abdominal lump
- Paediatric trauma
- Procedures – wound debridement and suturing, incision and drainage of abscess

HOM-PG-PED 32: Advanced Homoeopathic Paediatrics, emergency Paediatrics and Critical care

Paediatric emergencies:

Critical judgement & referral

- Status epilepticus

- Status asthmaticus
- Acute severe asthma
- Shock and anaphylaxis
- Hypertensive emergencies
- Gastrointestinal bleed
- Comatose child
- Congestive cardiac failure
- Acute renal failure

Genetics

- Principles of inheritance and diagnosis of genetic disorders
- Genetic disorders needing study:
 - Down's syndrome
 - Chromosomal disorders
 - Down's syndrome
 - Edward's syndrome
 - Turner syndrome
 - Klinefelter's syndrome
 - Cystic fibrosis
 - Marfan's syndrome
 - Haemophilia
 - Sickle cell anaemia
 - DMD
 - Osteogenesis imperfecta

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-II	1st Term Test: During twenty fourth month of training	During thirty sixth month of training

	2nd Term Test: During thirtieth month of training	
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VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or clinical exams including Viva-Voce and dissertation	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
Pediatrics Paper 1	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
Pediatrics. Paper 2	100	50		

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *Eighty per cent weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory *(Benchmarked by the module-wise distribution.)*

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
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Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 2 – Paper 1. Course Numbers

- HOM-PG-PED 14: Homoeopathic Approach to Mother-neonate unit and Embryology & Neonatology
- HOM-PG-PED 15: Homoeopathic Approach to Disorders of Growth and development
- HOM-PG-PED 16: Homoeopathic Approach to Disorders of Nutrition
- HOM-PG-PED 17: Homoeopathic Approach to Disorders of Fluid and Electrolyte Imbalance
- HOM-PG-PED 18: Homoeopathic Approach to Community Paediatrics
- HOM-PG-PED 19: Homoeopathic Approach to Infectious diseases
- HOM-PG-PED 20: Homoeopathic Approach to Child Psychiatry

Part 2 – Paper 2. Course Numbers

- HOM-PG-PED 21: Homoeopathic Approach to Diseases of Paediatric Respiratory system
- HOM-PG-PED 22: Homoeopathic Approach to Diseases of Paediatric Cardiovascular system
- HOM-PG-PED 23: Homoeopathic Approach to Diseases of Paediatric Gastrointestinal and hepatobiliary system
- HOM-PG-PED 24: Homoeopathic Approach to Diseases of Paediatric Nervous system
- HOM-PG-PED 25: Homoeopathic Approach to Paediatric Hematology and oncology
- HOM-PG-PED 26: Homoeopathic Approach to Diseases of Paediatric Renal system
- HOM-PG-PED 27: Homoeopathic Approach to Paediatric Endocrinology
- HOM-PG-PED 28: Homoeopathic Approach to Paediatric Immunology and Allergy
- HOM-PG-PED 29: Homoeopathic Approach to Diseases of Paediatric Musculoskeletal system and Rheumatology
- HOM-PG-PED 30: Homoeopathic Approach to Paediatric Dermatology
- HOM-PG-PED 31: Homoeopathic Approach to Paediatric Surgical Diseases
- HOM-PG-PED 32: Advanced Homoeopathic Paediatrics, emergency Paediatrics and Critical care

VII (2b). Question Paper Layout
Paper 1

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-PED 18 OR 19	20
2	LAQ	HOM-PG-PED 14	10
3	LAQ	HOM-PG-PED 15	10
4	LAQ	HOM-PG-PED 16	10
5	LAQ	HOM-PG-PED 17 OR 20	10
6	SAQ	HOM-PG-PED 15	5
7	SAQ	HOM-PG-PED 16	5
8	SAQ	HOM-PG-PED 18	5
9	SAQ	HOM-PG-PED 19	5
10	SAQ	HOM-PG-PED 18	5
11	SAQ	HOM-PG-PED 19	5
12	SAQ	HOM-PG-PED 14 or 15 or 16	5
13	SAQ	HOM-PG-PED 17 or 18 or 19 or 20	5

Paper 2

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-PED 21 OR 23 OR 24 OR 22	20
2	LAQ	HOM-PG-PED 28 OR 26	10
3	LAQ	HOM-PG-PED 30	10
4	LAQ	HOM-PG-PED 31	10
5	LAQ	HOM-PG-PED 29	10

6	SAQ	HOM-PG-PED 27	5
7	SAQ	HOM-PG-PED 32	5
8	SAQ	HOM-PG-PED 21 or 22	5
9	SAQ	HOM-PG-PED 23	5
10	SAQ	HOM-PG-PED 25	5
11	SAQ	HOM-PG-PED 29	5
12	SAQ	HOM-PG-PED 28 or 29 or 22	5
13	SAQ	HOM-PG-PED 23 or 26 or 24 or 32	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	30 Marks
3	One Short case	20 Marks
4	Logbook	20 Marks
5	Micro Teaching	10 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Dissertation defence	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks

Total	100 Marks
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VIII. List of Reference Books (As per APA Format).

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- Beattie, T. F. (2002). Handbook of pediatric emergencies, 3rd edn: Edited by G A Baldwin. (\$39.95). Lippincott Williams and Wilkins, 2001. ISBN 0-7817-2236-5. *Emergency Medicine Journal: EMJ*, 19(2), 187-c–188. doi:10.1136/emj.19.2.187-c
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- Kilpatrick, S. J., Macones, G. A., & Watterberg, K. L. (2017). Guidelines for perinatal care. *American Academy Of Pediatrics, & American College Of Obstetricians And Gynecologists*.
- Kliegman, R. M., & Geme, J. W., III. (2019). *Nelson textbook of pediatrics, 2-volume set* (21st ed.). Philadelphia, PA: Elsevier - Health Sciences Division.
- Parthasarathy, A., Menon, P. S. N., & Nair, M. K. C. (2019). *IAP textbook of pediatrics* (7th ed.). New Delhi, India: Jaypee Brothers Medical.
- Singh, I. (2018). Inderbir Singh's Human embryology. *Jaypee*.
- Singh, M. (2020). *Paediatric clinical methods*. CBS Publishers & Distributors Pvt Ltd.

Allied subjects

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Homoeopathic Literature

Homoeopathic Paediatrics

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Lilienthal, S. (1998). *Homoeopathic therapeutic*. B. Jain Publishers.

Tiwari, S.K. (2009). *Homoeopathy & child care: principles, therapeutics, children's type, repertory*. B. Jain Pub.

Homoeopathic Philosophy

Close S. (2008). *The Genius of Homoeopathy*. Indian books and periodical publishers.

Dhawale, M.L. (2011). *Principles and Practice of Homoeopathy*, Indian Books and Periodicals Publishers.

Hahnemann, S. (2013). *Organon of Medicine*, 6th Edition. B. Jain Publishers.

Kent, J.T. (2009). *Lectures on Homoeopathy Philosophy*, B. Jain Publishers.

Roberts H. A. (2008). *Principles and art of cure Homoeopathy*. Indian books and periodical publishers.

Homoeopathic Materia Medica

Hering, C (2016) *Guiding symptoms of Our Materia medica*, B. Jain Publishers

Kent, J.T, (2007) *Lectures on Materia Medica*, B. Jain Publishers

Phatak, S. R. (1999). *Concise materia medica of homoeopathic medicine*. B. Jain Publishers

Part I Paper 2

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Pediatrics

II. Brief description of speciality and its relevance in homoeopathy post-graduate course.

The practice of Homoeopathy is based on the tenets of Homoeopathic Philosophy. The homoeopathic practitioner has to undertake the task of not only acquiring the clinical base but applying insights borne out of a study of principles of Homoeopathic philosophy and their application through Repertory and Materia Medica and evolving the therapeutic approach. Thus, the trilogy of Organon, Repertory and Materia Medica with Clinical paediatrics facilitates the germane practice of homoeopathic science.

Study of the Fundamentals of Homoeopathy is intended to enable the postgraduate student to utilize the basic understanding of Health, Disease, Recovery, Cure and Palliation as seen from the perspective of Homoeopathic Philosophy and apply the operational understanding of Materia Medica and Repertory in his / her clinical work to produce evidence-based results. Simultaneously, he / she works in the area of preventive and community health where he utilizes the principles of Organon to extend the reach of the physician in preserving health and preventing disease.

III. Courses and Course Objectives.

Part 1 Paper 2: Fundamentals of Homoeopathy in Pediatrics (HOM-PG-FHPED)

(I) Hom-PG-FHPED-01

Hahnemannian concept of Vital Force, Health, Disease, and Man and environment

- a. Health, disease, causation, vital force, man and environment
- b. Evolution of disease-predisposition-disposition-diathesis-disease,
- c. Principles of growth and development and its application and utility in study of Paediatric HMM, repertory and Organon.

- d. Mission, and knowledge of the physician,
- e. Hahnemannian concept of man and its further extension by Kent, Boenninghausen, and Boger.
- f. Philosophical basis and the Construction arrangement of the three original repertories (Kent, TPB, BBCR) representation of the above concepts in the repertories.
- g. Science and philosophy of HMM
- h. Physiological and anatomical MM

(II) Hom-PG-FHPED-02

Concept of Dynamism, Recovery and Cure and Obstacles to Cure

- a. Concept of vital force in maintaining health and in Genesis of disease. (ORG)
- b. Concepts of recovery and cure and the essential difference between the two. (ORG)
- c. Concept of pseudo chronic diseases. (ORG)
- d. Knowledge of various factors - mental and physical - which derange health and act as obstacles to cure and how to remove them to ensure cure. (ORG)
- e. Role of miasm in causing and maintaining disease and addressing the same to ensure cure. (Further elaborated in theme 7) (ORG)
- f. Understanding the above concepts and its representation and utility in study of

HMM (HMM) and its representation in different standard Repertories (REP)

(III) Hom-PG-FHPED -03

Concept of Artificial Disease and Portrait of Disease

- a. Knowledges of physician (ORG)
- b. Drug proving (ORG, HMM)
- c. Process of recording and system of recording artificial and natural diseases (ORG)
- d. Creating portraits of artificial and natural disease and learning the art of matching. (ORG, HMM)
- e. Art of creating portrait of polychrest remedies through analysis, evaluation and construction at level of mind, physical general and particulars (HMM) will be taken in Theme 8.
- f. Creating portrait of the disease through reportorial study of specific remedy

(IV) Hom-PG-FHPED-04

Concept of Unprejudiced observation and Case taking

- a. Studying the guidelines given by Hahnemann for case taking and evolve a standardised case record for homoeopathic practice. (ORG)

- b. Demonstrating the concept of unprejudiced physician through the process of knowing oneself through practical bed-side demonstration of analysis of physician-patient interaction in detail. (ORG)
- c. Utilising the concept of unprejudiced observer in perceiving the patient and constructing totality for correct prescribing. (ORG)
- d. Understanding the concept of man as per Kent, Boger and Boenninghausen and its influence on their writing of repertory and HMM (REP AND HMM)

(V) Hom-PG-FHPED-05

Concept of Symptomatology

- a. Symptomatology and value of a symptom from the standpoint of homoeopathic practice. (ORG)
- b. Concept of individualisation and generalisation as given by Kent and Boenninghausen and their essential difference between the two. (ORG, Repertory)
- c. Concept of individualisation and generalisation in the construction of different repertories viz Kent, Boenninghausen, Boger and TPB. (Rep)
- d. Understanding the concept of classification and its utility in study of HMM
- e. Understanding the concept of generalisation vs individualisation, and its utility in generalising the individual drug symptom into Group symptom and deriving group characteristics. (HMM)
- f. Study of Materia Medica with the help of concept of generalisation. (HMM).
 - (a) A list of group of remedies is demonstrative to understand the process rather than to learn all the groups in detail. (HMM)

(VI) Hom-PG-FHPED-06

Concept of Susceptibility and Acute and Chronic Disease

- a. Various parameters in determining susceptibility in different types of cases - acute, chronic, intermittent, congenital, mental, and periodic illnesses in neonatal and pediatric age group and its application in practice. (ORG)
- b. Application of the knowledge of classification of disease as given by Hahnemann and modern medicine in defining the scope and limitations by demonstrating its application in different types of cases. (ORG)
- c. Construction of different regional repertories as an aid to case taking and managing a variety of clinical conditions. E.g., Bell's Diarrhoea, Allen's Therapeutics of Fever, Minton Uterine therapeutics, Boericke's Repertory, Phatak's repertory with examples. (REP)
 - (i) Clinical Materia Medica and remedial differentiation in different types of diseases with the help of clinical materia medica as per list.

(VII) Hom-PG-FHPED-07

Concept of Suppression, Miasms and vaccinations in pediatrics

- a. Concept of suppression in homoeopathy and its types (surgical/non-surgical) in progression of disease and its management through clinical cases. (ORG)
- b. Concept of Miasm from Hahnemannian perspective and its further expansion by Allen, Kent and M L Dhawale (ORG)
- c. Use of Miasm in classifying and understanding the evolution of different remedies (HMM)
- d. Utilising the knowledge of indications of anti-miasmatic remedies as per list.
- e. Role of miasm as a fundamental cause and its influence in the expressions in disease and remedies through the Miasms of Psora, Sycosis, Tubercular and Syphilis. (HMM)
- f. Rubrics of suppression from different repertories (REP)
- g. Rubrics of different expressions of Miasm from different repertories and study of different rubrics related to miasms
- h. Concept of vaccination and Vaccinosis (Burnett)

(VIII) Hom-PG-FHPED-08

Concept of Totality

- a. Process of constructing acute, chronic and intercurrent totalities. (ORG)
- b. Mastering the concept of classification and evaluation of symptoms. (REP)
- c. Understanding the process of repertorial and non repertorial approach and how to select one (REP)
- d. Selecting the suitable approach and constructing repertorial totality as per Kent, Boenninghausen and Boger. (REP)
- e. Solving the case with the help of softwares like HOMPATH and RADAR. (REP)
- f. Understanding the non-repertorial approach namely structuralization, synthetic approach and keynote. (REP)
- g. Differentiation of similar remedies in acute and chronic cases by reference to source books, commentators and clinical materia medica. (HMM)

(IX) Hom-PG-FHPED-09

Concept of Similar and Similimum

- a. Understanding single, simple, minimum substance as similimum following from the Law of Similars.(ORG)
- b. Learning the concept of concordances as evolved by Boenninghausen and its utility in practice. REP)
- c. Finer differentiation of similar remedies by learning to refer to source books, commentaries and clinical materia medica. (HMM)
- d. Understanding remedy relationships - complementary, inimical, antidotal, follows well, similar with examples. (HMM)

(X) Hom-PG-FHPED-10

Concept of Therapeutic management

- a. Practical application of Kent's 12 observations in the assessment of remedy response and in the second prescription. (ORG)
- b. Utility of knowledge of disease, knowledge of investigations and recent advances in the field of medicine to assess comprehensive response to homoeopathic remedies. (ORG)
- c. Remedy relationship in determining the second prescription. (HMM)
- d. Patient education and orientation about disease. (ORG)
- e. Use of ancillary measures in acute and chronic diseases, namely diet, exercise, yoga, relaxation techniques, supplements for aiding recovery and preventing the progress of disease. (ORG)

IV. Course description

Hom-PG-FHPED-01

Table 01 :

Course Overview	1. Hahnemannian Concept of man, vital force, Health, Disease
Learning	Knowledge
Outcomes	<ol style="list-style-type: none">1. Define Vital force, Health, Disease, cure, and Recovery as per homoeopathic philosophy2. Explain the evolution of disease in terms of predisposition-disposition-diathesis and disease function to structure3. Apply the principles of growth and development in study of Paediatric HMM, repertory and Organon4. Apply the concept of evolution of disease in Paediatrics with emphasis on understanding congenital and neonatal disease5. Apply the concept of the mother-neonate unit to understand the function of vital force in neonates and infants6. Discuss the Hahnemannian concept of man and environment (nature vs nurture) further extension by Boenninghausen, Kent, and Boger7. Define health as per WHO8. Discuss the mission of the physician9. Summarize the Knowledge of Physician relevant to maintaining health in individuals and communities and prevention of disease in children to ensure healthy transition to adulthood10. Summarize the philosophical basis of Kent, BPCR, and TPB repertories11. Summarize the science and philosophy of HMM

12. Apply physiological HMM

Skills

1. Perform the repertorisation as per the need of the case
2. Display the application of physiological HMM
3. Perform paediatric case-taking to elicit disease evolution

Reflection

1. Relate the mission of the physician to the paediatric population and community
2. Reason out the clinical utility of physiological HMM
 - Continuous / Programmatic assessment: Assignments MCQ
 - Practical exam – short case
 - Written Examinations: Problem-Based Learning assessment: LAQ SAQ

Assessments

Prescribed texts

Domains of competencies

As per list

KS, PC, HO, CS, PBL

Hom-PG-FHPED-02

Table 02 :

Course Overview

Learning

Outcomes

Concept Dynamism, Recovery, cure, and obstacle to cure

Knowledge

1. Discuss the role of vital force in maintaining health
2. Discuss the role of vital force in genesis of disease
3. Differentiate cure and recovery
4. Explain the evolution of illness from phases of diathesis to functional and structural, reversible to irreversible phases of disease with emphasis on understanding congenital and neonatal diseases
5. Summarize the Classification of Disease Given by Dr. Hahnemann.
6. Explain pseudo chronic disease
7. List various factors that derange health and also act as obstacles to cure and explain how to remove these factors to remove them for cure
8. Infer the role of miasms as a causative and maintaining factor in disease

9. Apply the knowledge of Miasm as causation to attain a cure
10. Discuss the role of causation in study of Homoeopathic MM and repertory

Skills

1. Demonstrate the utility of causation in management of the paediatric cases
2. Demonstrate the application of repertory and HMM from the causative perspective in paediatrics

Reflection

1. Relating the vital force concept to health and disease
2. Reason out the web of causation
3. Relate with chronic disease and miasm
4. Report the utility of causation in paediatric homoeopathic practice
5. Respond to the outcome of the cases

Assessments

- Continuous / Programmatic assessment: Assignments, MCQ
- Practical exam – short case, objective, structured oral examination, OSCE
- Written Examinations: Problem Based Learning assessment: LAQ SAQ

Prescribed texts

As per list

Domains of competencies

KS,PC,HO,CS,PBL

Hom-PG-FHPED-03

Table 03 :

Course Overview

Concept of artificial and natural diseases

Learning

Knowledge

Outcomes

1. Discuss the knowledge of physician related to Paediatrics for formulating the portrait of disease
2. Display the system and process of recording artificial and natural disease

Skills

1. Organize drug proving
2. Construct the portrait of artificial and natural disease and match
3. Classify the data from artificial and natural disease through analysis and evaluation
4. Construct the portrait through study of repertory

Reflection

1. Relate the knowledge of physician to the paediatric clinical cases
2. Respond to the need of portrait to paediatric clinical cases
3. Reconstruct rubrics in to portrait

Assessments

- Continuous / Programmatic assessment: Assignments, MCQ
- Practical exam – short case, long case, structured oral examination, OSCE
- Written Examinations: Problem Based Learning assessment: LAQ SAQ

Prescribed texts Domains of competencies

As per list
KS, PC, HO, CS, PBL

Hom-PG-FHPED-04

Table 04 :

Course Overview

Concept of unprejudiced observation and case taking

Learning

Knowledge

Outcomes

1. Discuss the guidelines given by Hahneemann for the case taking and focus on difference between adult and paediatric case taking
2. Design the standardized case record for paediatric age group incorporating the essential history taking and examinations specific to the age group
3. Discuss the concept of unprejudiced observation
4. Describe the process of evolution of unprejudiced observation through physician-patient interaction
5. Summarize the concept of man and environment (nature vs nurture) as per Kent, Boger and Boenninghausen and its influence on their repertory and HMM

Skills

1. Display the skill of perceiving the patient and constructing totality through unprejudiced observation in paediatric age group

Reflection

1. Relate the role of prejudices in perceiving and constructing totality
2. Contextualizing the knowledge of case taking and unprejudiced observation to construction of totality

Assessments

- Continuous / Programmatic assessment: Assignments, MCQ

- Practical exam – short case, long case, objective structured oral examination, OSCE
- Written Examinations: Problem Based Learning assessment: LAQ SAQ

Prescribed texts As per list
Domains of competencies KS, PC, HO, CS, PBL

Hom-PG-FHPED-05

Table 05 :

Course Overview	Concept of Symptomatology
Learning Outcomes	Knowledge <ol style="list-style-type: none"> 1. Explain symptomatology 2. Illustrate the value of symptoms through classification and evaluation with its application in HMM and cases 3. Differentiate the Kent and Boenninghausen concept of individualization and generalization 4. Discuss the concept of individualization and generalization in construction of Kent, TPB, BBCR and BSK repertory 5. Sketch the HMM portrait through symptomatology, individualization and generalization (demonstrative list)
	Skills <ol style="list-style-type: none"> 1. Construct the totality by using concepts of generalization and individualization 2. Construct the totality of the group symptoms through generalization (some reflective group study)
	Reflection <ol style="list-style-type: none"> 1. Relate the application of group study to clinical practice 2. Reason out the process of generalization and individualization in totality formation 3. Contextualize the value of symptom in matching HMM and referring repertory
Assessments	As per list
Prescribed texts	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem-Based Learning assessment: LAQ SAQ

Domains of competencies KS,PC,HO,CS,PBL

Hom-PG-FHPED-06

Table 06:

Course Overview	Concept of susceptibility, acute and chronic disease
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain the various parameters in determining the susceptibility in acute, chronic, intermittent, congenital, mental, and periodic illnesses in paediatric age group 2. Describe the scope and limitation of Homoeopathy through knowledge of susceptibility and modern medicine 3. Summaries the construction of different common regional repertories in application to Paediatrics 4. Apply clinical Materia Medica in paediatrics <p>Skills</p> <ol style="list-style-type: none"> 1. Apply susceptibility concept in clinical management and study of HMM 2. Perform differential materia medica in clinical cases <p>Reflection</p> <ol style="list-style-type: none"> 1. Report the utility of regional repertory in clinical practice 2. Relate the susceptibility to homoeopathic practice
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPED-07

Table 07 :

Course Overview	Concept of suppression, miasm and vaccination in Paediatrics
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Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain the suppression in homoeopathic practice 2. Identify rubrics of suppression from standard repertories 3. Discuss the evolution of disease 4. Describe evolution of miasm through chronic disease 5. Explain Miasmatic theory from Hahnemannian writing and its further expansion by Kent, Allen and Dhawale 6. Apply knowledge of miasm in study of HMM 7. Discuss indication of anti-miasmatic remedies in clinical cases 8. Deriving the different rubrics from standard repertories representing different Miasm 9. Describe the concept of vaccination and Vaccinosis (as given by Burnett) <p>Skills</p> <ol style="list-style-type: none"> 1. Conclude the suppression in clinical cases 2. Derive miasm in acute and chronic disease 3. Choose anti-miasmatic in clinical cases 4. Identify predisposition in Paediatric population <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the evolution of disease with miasm 2. Reconstruct the miasmatic evolution from clinical cases 3. Contextualize the concept of suppression
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem-Based Learning assessment: LAQ SAQ
Prescribed texts Domains of competencies	As per list KS, PC, HO, CS, PBL

Table 08 :

Course Overview	Concept of Totality
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Apply classification and evaluation of symptoms 2. Discuss the reportorial and non-reportorial approach and their indication 3. Justify the selection of reportorial and non-reportorial approach in a clinical case 4. Select suitable approach and construct totality based on need of clinical case <p>Skills</p> <ol style="list-style-type: none"> 1. Construct acute, chronic and intercurrent totality 2. Construct reportorial totality 3. Solving the case with suitable software 4. Perform differentiation of remedies using different HMM viz source book, commentators, clinical Materia medica and key notes <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate to clinical cases for construction of the totality 2. Reason out the bases for different approaches and references to repertory 3. Report the bases of differential HMM
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS, PC, HO, CS, PBL

Hom-PG-FHPED-09

Table 09 :

Course Overview	Concept of similar and simillimum
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Describe fundamental laws of homoeopathy 2. Conclude the potency and repetition in clinical cases in paediatric age group esp. the infants and young children

3. Discuss concordance and remedy relationship in clinical practice in paediatric age group esp. the mother-child relationship

Skills

1. Apply fundamental laws in practice
2. Apply the remedy relationship in clinical practice

Reflection

1. Recollect the fundamental laws of homoeopathy observed in clinical cases
2. Reason out the posology in clinical practice
3. Relate the concordance and remedy relationship

Assessments

- Continuous / Programmatic assessment: Assignments, MCQ
- Practical exam – short case, long case, objective structured oral examination, OSCE
- Written Examinations: Problem Based Learning assessment: LAQ SAQ

Prescribed texts

As per list

Domains of competencies

KS, PC, HO, CS, PBL

Hom-PG-FHPED-10

Table 10 :

Course Overview

Concept of Therapeutic management

Learning

Knowledge

Outcomes

1. Diagnose the Kent's twelve observation in assessment of remedy response
2. Apply the knowledge of investigation and recent advances in the field of medicine to assess remedy response
3. Select second prescription based on remedy relationship

Skills

1. Choose second prescription based on remedy response of Kent's observation
2. Perform patient education and orientation
3. Organize the ancillary management in acute and chronic diseases
4. Perform the ancillary management

Reflection

Assessments	<ol style="list-style-type: none"> 1. Recollect the remedy response in clinical cases 2. Reflect role of investigation and current advances in judging remedy response 3. Contextualize the ancillary management <ul style="list-style-type: none"> • Continuous / Programmatic assessment: Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ
Prescribed texts	As per list
Domains of competencies	KS, PC, HO, CS, PBL

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
1)Fundamentals of Pediatrics	100	50	200* (160 + 40) (Summative Assessment 160	100* (80 + 20) (Summative Assessment

			Marks) (Internal Assessment 40 Marks)	80 Marks) (Internal Assessment 20 Marks)
2) Fundamentals of Homoeopathy in Pediatrics	100	50		
3) Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *Eighty per cent weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Courses for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Application Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Course Numbers

Hom-PG-FHPED-01 - Hahnemannian concept of Vital Force, Health, Disease, and Man and environment

Hom-PG-FHPED-02 - Concept of Dynamism, Recovery and Cure and Obstacles to Cure

Hom-PG-FHPED -03 - Concept of Artificial Disease and Portrait of Disease

Hom-PG-FHPED-04 - Concept of Unprejudiced observation and Case taking

Hom-PG-FHPED-05 - Concept of Symptomatology

Hom-PG-FHPED-06 - Concept of Susceptibility and Acute and Chronic Disease

Hom-PG-FHPED-07 - Concept of Suppression, Miasms and vaccinations in pediatrics

Hom-PG-FHPED-08 - Concept of Totality

Hom-PG-FHPED-09 - Concept of Similar and Simillimum

Hom-PG-FHPED-10 - Concept of Therapeutic management

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question Hom-PG-FHPED-- 06 or 08 or 09	20
2	LAQ	Hom-PG-FHPED-- 07	10
3	LAQ	Hom-PG-FHPED-- 04	10
4	LAQ	Hom-PG-FHPED-- 03	10
5	LAQ	Hom-PG-FHPED-- 05	10
6	SAQ	Hom-PG-FHPED-- 01	5
7	SAQ	Hom-PG-FHPED-- 02	5
8	SAQ	Hom-PG-FHPED-- 10	5
9	SAQ	Hom-PG-FHPED-- 06	5
10	SAQ	Hom-PG-FHPED-- 08	5
11	SAQ	Hom-PG-FHPED-- 09	5
12	SAQ	Hom-PG-FHPED-- 08	5
13	SAQ	Hom-PG-FHPED-- 03	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination: A Common Practical/viva for Part I Paper 1 and 2.

VIII. List of Reference Books (As per APA Format).

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Allied subjects

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- Snell, R. (2012). *Clinical anatomy by regions* (9th ed.). Lippincott Williams & Wilkins.

Homoeopathic Literature

Homoeopathic Paediatrics

- Borland, D. M. (2004). *Children's Types*, B. Jain Publishers.
- Herscu, P. (1991). *The homeopathic treatment of children: pediatric constitutional types*. North Atlantic Books.
- Jain, P. (2019). *Essence of Pediatric Materia Medica* (1st ed.). Nitya publications.
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- Kapse, A. (2003). *Paediatrics In Homoeopathy, An Approach*. Dr. M. L. Dhawale Memorial Trust.
- Lilienthal, S. (1998). *Homoeopathic therapeutic*. B. Jain Publishers.
- Tiwari, S.K. (2009). *Homoeopathy & child care: principles, therapeutics, children's type, repertory*. B. Jain Pub.
- Homoeopathic Philosophy
- Close S. (2008). *The Genius of Homoeopathy*. Indian books and periodical publishers.
- Dhawale, M.L. (2011). *Principles and Practice of Homoeopathy*, Indian Books and Periodicals Publishers.
- Hahnemann, S. (2013). *Organon of Medicine*, 6th Edition. B. Jain Publishers.
- Kent, J.T. (2009). *Lectures on Homoeopathy Philosophy*, B. Jain Publishers.
- Roberts H. A. (2008). *Principles and art of cure Homoeopathy*. Indian books and periodical publishers.
- Homoeopathic Materia Medica
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- Kent, J.T, (2007) *Lectures on Materia Medica*, B. Jain Publishers
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Part I Paper 3

I. Title of the Speciality Course, and its abbreviation.

M.D. (Homoeopathy) Research methodology and Biostatistics (RMB) for all speciality subjects

II. Brief description of speciality and its relevance in homoeopathy post-graduate course.

This curriculum is for MD Hom Part – 1 for teaching & examination for developing a scientific aptitude in the students. Upon completion of the program, the PG students should have a basic understanding of research methodology and biostatistics useful for homoeopathic research; and be able to undertake an ethical research study in their specialization under the supervision of a guide. The course is designed to develop the research competencies of MD Hom Part 1 students and is structured for lectures, group and individual activities, discussions, and journal club, spread over 18 months. The course is designed to incorporate mechanisms for understanding and encompassing scientific advances in diagnostics, pathogenesis, and its relevance to homoeopathic approaches and therapeutic principles. The management of cases as a clinician or in the community is enhanced with an aptitude for continuous learning and upgrading knowledge and practices. The course is designed as a bridge between traditional principles and practices recorded in the literature with modern approaches for developing and adopting tools for their validation and use in clinical practice.

After studying this subject, it is expected that the Homoeopathic Postgraduate will continue the scientific study of the specific subject demonstrated by undertaking a research study presented in the form of a dissertation and a research publication in a peer-reviewed journal / oral presentation at scientific conferences thus they should be able to communicate the derived knowledge to the scientific and lay community.

III. Courses and Course Objectives.

Part 1 Paper 3: Research Methodology and Biostatistics (HOM-PG-RMB)

- (I) Hom-PG-RMB-01
Foundation for Homoeopathic Research
- (II) Hom-PG-RMB-02
Concept Of Structured and Continuous Literature Review
- (III) Hom-PG-RMB-03
Research Process and Proposal Writing
- (IV) Hom-PG-RMB-04
Quantitative Research Design for Homoeopathic Research
- (V) Hom-PG-RMB-05
Qualitative Research Design for Homoeopathic Research
- (VI) Hom-PG-RMB-06

Mixed Research Design for Homoeopathic Research

- (VII) Hom-PG-RMB-07
Documentation of Evidence
- (VIII) Hom-PG-RMB-08
Ethics in Homoeopathic Research
- (IX) Hom-PG-RMB-09
Basics concepts of Biostatistics
- (X) Hom-PG-RMB-10
Concept of Data types, Collection & Sorting methods
- (XI) Hom-PG-RMB-11
Concept of Population, Sample, Sampling techniques and Sample Size for conducting homoeopathic research
- (XII) Hom-PG-RMB-12
Basics of Data Analysis, Descriptive statistics & Probability
- (XIII) Hom-PG-RMB-13
Basics of Inferential Statistics for Data Analysis for Homoeopathic Research
- (XIV) Hom-PG-RMB-14
Software & AI tools for supporting Research Data Management and Analysis
- (XV) Hom-PG-RMB-15
Communicating Research Findings

Course contents

Hom-PG-RMB-01 - Foundation for Homoeopathic Research

- a. Importance of Research in Homoeopathy in general
- b. Hahnemann as a Researcher and the research qualities of homoeopathic stalwarts
- c. The foundation of Homoeopathic principles is based on relevant research methods
- d. Relevance of research as per the speciality subject
- e. Types of Research in homoeopathy – Basic / Fundamental, Clinical Trials, Agro-Homoeopathy, Veterinary, and Educational Researches.

Hom-PG-RMB-02 - Concept of Structured and Continuous Literature Review

- a. Need and Purpose of Review of Literature
- b. Sources of Literature – Homoeopathic and other database
- c. Types of literature review – Narrative review, critical review, scoping review, systematic review, meta-analysis, realist review, review of reviews, meta-narrative reviews, evidence gap map
- d. Developing information search plan – PICOT, SPICE, etc.
- e. Medical search engines like PubMed search – word search, field search, Boolean operators, MeSH terms
- f. Plagiarism, Bibliography & References – methods (Vancouver, Harvard)
- g. Reference management software – Zotero, Mendeley, etc.
- h. Recent advances/studies in homoeopathic research in general and discipline-specific

Hom-PG-RMB-03 - Research Process and Proposal Writing

- a. Research planning Process
- b. Criteria for Selecting a research question / Problem
- c. Process for framing of the selected research question/problem
- d. Hypothesis – Characteristics and Formation – Null and Alternative
- e. Variables – Definition & types
- f. Aim and Objectives
- g. Format for writing Research Proposal
- h. Proposal writing for funding

Hom-PG-RMB-04 - Quantitative Research Design for Homoeopathic Research

- a. Research Design: Concept and Importance in Research
- b. Quantitative Research design for homoeopathic research – advantage, scope, limitations, utility and applications
- c. Descriptive research design – Survey, Case Studies, Case Reports
- d. Observational research design – Cohort, Case Control design
- e. Experimental research design – Single arm clinical trials, nRCTs, RCTs - parallel arm trials, cross-over trials, cluster randomized trials, factorial trials, field trials, community trials
- f. Quasi-Experimental research design

Hom-PG-RMB-05 - Qualitative Research Design for Homoeopathic Research

- a. Purpose & Philosophy of Qualitative Methods
- b. Research Designs – Ethnography, Grounded Theory, Action Research, Phenomenology, Historical research, Narrative analysis, Discourse analysis
- c. Data collection and analysis techniques – Thematic analysis, Content analysis, KII, IDI, Exit interviews, social mapping and networking, Root cause analysis, Fishbone analysis, Problem tree analysis

Hom-PG-RMB-06 - Mixed Research Design for Homoeopathic Research

- a. Purpose & Philosophy of Mixed Methods
- b. Mixed methods research design – Morse notation, typologies or models
- c. Data Collection techniques – Free listing, Pile sorting, Delphi techniques, Scale development, Validity and reliability
- d. Data Analysis methods for mixed research – Data transformation, Joint display, Visualization, Mapping, etc.

Hom-PG-RMB-07 - Documentation of Evidence

- a. Evidence-based practice
- b. Type and Level of Evidence in Research
- c. Data Recording Principles
- d. Special case Record
- e. Software for creating databases – Epi Info etc.

Hom-PG-RMB-08 - Ethics in Homoeopathic Research

- a. History, Ethical principles & regulations in Research (Declaration of Helsinki, ICMR guidelines, ICH GCP, GCP Homoeopathy, Drugs & Cosmetics Act & Rules relevant part, NDCT rules, other General and Specific guidelines and legal provisions for research)
- b. Categories of anticipated risks
- c. Participant information sheet & Informed Consent, Assent, Waiver of consent, re-consent
- d. Institutional Ethics Committee/Institutional Review Board, Data Safety Monitoring Board
- e. AE, SAE, compensation, interim analysis, trial registration
- f. Ethics in Publication

Hom-PG-RMB-09 - Basics concepts of Biostatistics

- a. Introduction to Biostatistics: definition
- b. Variability – meaning, types
- c. Bias, Chance
- d. Clinical significance
- e. Validity and Reliability
- f. Specificity and Sensitivity

Hom-PG-RMB-10 - Concept of Data types, Collection & Sorting methods

- a. Data Types – Qualitative / Quantitative, Primary / Secondary
- b. Measurements: Concept & level (Nominal, Ordinal, Interval, Ratio)
- c. Method of collection of data – Interview, Questionnaire
- d. Data preparation, Data Tabulation
- e. Graphical methods for qualitative and quantitative data

Hom-PG-RMB-11 - Concept of Population, Sample, Sampling Techniques and Sample Size for conducting homoeopathic research

- a. Concept and definition of Population, Sampling frame, Sample
- b. Characteristics of a good sample
- c. Types of Sampling Methods and Techniques
- d. Probability Sampling Methods
- e. Non – Probability Sampling Methods
- f. Sampling and non-sampling errors
- g. Demography Statistics & Measures of Population
- h. Factors determining sample size
- i. Calculating sample size for various research designs

Hom-PG-RMB-12 - Basics of Data Analysis, Descriptive Statistics & Probability

- a. Measure of Central Tendency and Location
- b. Measures of Dispersion
- c. Normal Distribution and estimations
- d. Skewness and Kurtosis
- e. Confidence Interval
- f. Probability concept
- g. Laws of Probability
- h. Inverse Probability
- i. Theoretical Distributions

Type I and Type II errors

Hom-PG-RMB-13 - Basics of Inferential Statistics for Data Analysis for Homoeopathic Research

- a. Level of Significance
- b. Type I and Type II Error
- c. Testing of Significance
- d. Hypotheses Testing
- e. Parametric test (SEM, Z test, t test – Pair, unpaired, F test, ANOVA, SEP), effect size
- f. Non-parametric Test (Chi-square test, The Mann-Whitney U test, Wilcoxon matched pair test)
- g. F- Test and Analysis of Variance and Covariance
- h. Method based on Rank order (Spearman's rank correlation, Pearson's rank correlated coefficients)

- i. Regression analysis – linear, logistic, multiple, cox
- j. Odds ratio, Risk ratio, Likelihood ratio, Prognostic factor research
- k. Interpretation of statistical test results

Hom-PG-RMB-14 - Software & AI tools for supporting Research Data Management and Analysis

- a. Statistical software – MS Excel, G-Power, R, SPSS, STATA, SAS
- b. Software for writing and publication – (reference managers, plagiarism check, language & grammar e.g. Mendeley, iThenticate, Grammarly, etc.)

Hom-PG-RMB-15 - Communicating Research Findings

- a. Basic principles of scientific writing
- b. Dissertation, Thesis Writing
- c. Formats for writing article
- d. Writing Abstract, Title and Keyword
- e. Data Presentation – Textual, Tabular, Graphical (Frequency polygon, frequency curve, line diagram, Scatter plot diagram, Types of Bar graph, types of Pie graph, Pictogram, Map diagram, Box plot graph)
- f. Journal – Scientific and peer-reviewed and impact factor
- g. Pre-print and Peer Review Process
- h. Publication technicalities – flow chart of publication, journal selection, journal and author metrics, open access models, predatory journals and conferences, cloned journals, manuscript preparation, authorship criteria, plagiarism and similarity index, preprint, reprint, retraction
- i. Paper Presentation – oral
- j. Poster Presentation

Course Overview	Foundation for Homoeopathic Research
Learning Outcomes	Competency Hom-PG-RMB-01 Foundation for Homoeopathic Research Knowledge <ol style="list-style-type: none"> 1. Define Research 2. Discuss Hahnemann as a Researcher 3. Discuss the research qualities of homoeopathic stalwarts 4. Explain the formulation of homoeopathic research principles on the basis of research 5. Explain the importance of research in general for homoeopathic science 6. Discuss current researches conducted in relation with the speciality subject 7. Discuss the logic used in research 8. Understand the concept of time in relation with research 9. Summarise several types of research pertaining to homoeopathy. Skills <ol style="list-style-type: none"> 1. Display the application of research to the specialty subject Reflection <ol style="list-style-type: none"> 1. Relate the application of research for the growth of knowledge of speciality subject
Assessments	<ul style="list-style-type: none"> • Written Examinations: SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Concept Of Structured and Continuous Literature Review
Learning Outcomes	Competency Hom-PG-RMB-02 Concept of Structured and Continuous Literature Knowledge: <ol style="list-style-type: none"> 1. Explain the importance of searching existing knowledge 2. Discuss the purpose of the review about the problem at hand 3. Enumerate the sources of literature 4. Discuss the utility of various literature sources 5. Explain the utility of various types of literature review 6. Explain the steps of formulating a search query 7. Describe various steps of using a medical search engine 8. Critically evaluate the searched literature and utilise appropriate material useful for their research 9. Explain the method of critically reviewing a research paper 10. Discuss Plagiarism and reference methods

	<p>Skill:</p> <ol style="list-style-type: none"> 1. Analyse the existing body of information i.e. current knowledge on a specific topic in a structured manner 2. Use the appropriate source of literature for answering a specific search query 3. Practice appropriate method of type of literature review for the problem identified for their research work 4. Formulate the literature search query using PICOT, SPICE model 5. Select the appropriate reference style using reference management software <p>Reflection:</p> <ol style="list-style-type: none"> 1. Discuss the existing knowledge concerning the observations of their research study for the speciality subject. 2. Evaluating the scientific research paper for updating self 3. Updating self with recent advances in the field of homoeopathic speciality subject
Assessments	Written Examinations: LAQ, SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Research Process and Proposal Writing
Learning Outcomes	<p>Competency: Hom-PG-RMB-03 Research Process and Proposal Writing</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Discuss the steps of the research process 2. Explain the criteria for selecting an appropriate research question 3. Recognize the importance of writing a scientific research proposal 4. Discuss the steps of formulating the research question 5. Define Hypothesis 6. Discuss the types of hypotheses for homoeopathic research 7. Explain the steps of formulating SMART objectives 8. Define variable 9. Classify the variables 10. Describe the format and meaning of various sections of a proposal 11. Comprehend the steps of writing a proposal for the funding <p>Skill:</p> <ol style="list-style-type: none"> 1. Utilize the day-to-day clinical experience for formulating the potential researchable problem for the research study

	<ol style="list-style-type: none"> Construct a logical research question, hypothesis and objectives for a research study related to the subject speciality Manage variables as per the requirement of the study <p>Reflection:</p> <ol style="list-style-type: none"> Construct the scientific research proposal for the subject speciality
Assessments	Written Examinations: Application based question, LAQ, SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Quantitative Research Design for Homoeopathic Research
Learning Outcomes	<p>Competency: Hom-PG-RMB-04 Quantitative Research Design for Homoeopathic Research</p> <p>Knowledge:</p> <ol style="list-style-type: none"> Define research design Classify research design Explain the meaning of quantitative research Explain the types of quantitative research Discuss the strengths & limitations of different research designs Explain the type of research question suitable for this research design Discuss the type of homoeopathic research that can be answered through this research design Discuss the type of documentation required for this research design Explain the steps undertaken for selecting the sample for this design Explain various sampling methods used for conducting this research design Explain data collection methods for this research design Explain the data analysis method for this research design Synthesis valid research conclusions as per the scope of this research design <p>Skill:</p> <ol style="list-style-type: none"> Using random table method for randomization method Formulating appropriate research methodology for this research design <p>Reflection:</p>

	1. Select appropriate research design for selected research problem of specialty subject
Assessments	Written Examinations: Application based questions, LAQ, SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Qualitative Research Design for Homoeopathic Research
Learning Outcomes	<p>Competency: Hom-PG-RMB-05 Qualitative Research Design for Homoeopathic Research</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Explain the meaning of qualitative research 2. Explain the types of qualitative research 3. Discuss the strengths & limitations of different research designs 4. Explain the type of research question suitable for this research design 5. Discuss the type of homoeopathic research that can be answered through this research design 6. Discuss the type of documentation required for this research design 7. Explain the steps undertaken for selecting the sample for this design 8. Explain various sampling methods used for conducting this research design 9. Explain data collection methods for this research design 10. Explain the data analysis method for this research design 11. Synthesis valid research conclusions as per the scope of this research design <p>Skill:</p> <ol style="list-style-type: none"> 1. Formulating appropriate research methodology for this research design 2. Interpret the data using appropriate data analysis technique <p>Reflection:</p> <ol style="list-style-type: none"> 1. Select appropriate research design for selected research problem of specialty subject 2. Summarise the research conclusions using qualitative method.

Assessments	Written Examinations: Application based questions, LAQ, SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Mixed Research Design for Homoeopathic Research
Learning Outcomes	<p>Competency: Hom-PG-RMB-06 Mixed Research Design for Homoeopathic Research</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Explain the meaning of Mixed research 2. Discuss the strengths & limitations of different research designs 3. Explain the type of research question suitable for this research design 4. Discuss the type of homoeopathic research that can be answered through this research design 5. Discuss the type of documentation required for this research design 6. Explain the steps undertaken for selecting the sample for this design 7. Explain various sampling methods used for conducting this research design 8. Explain data collection methods for this research design 9. Explain the data analysis method for this research design 10. Synthesis valid research conclusions as per the scope of this research design <p>Skill:</p> <ol style="list-style-type: none"> 1. Formulating appropriate research methodology for this research design 2. Interpret the data using appropriate data analysis technique <p>Reflection:</p> <ol style="list-style-type: none"> 1. Select appropriate research design for selected research problem of specialty subject 2. Formulate steps for conducting research using mixed research design
Assessments	Written Examinations: Application based questions, LAQ, SAQ

Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Documentation of Evidence
Learning Outcomes	<p>Competency: Hom-PG-RMB-07 Documentation of Evidence</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Define evidence in research 2. Explain the concept of evidence-based medicine 3. Classify types and levels of evidence 4. Discuss principles of data recording 5. Discuss the knowledge required for formulating special case record 6. Demonstrate the use of Epi Info <p>Skill:</p> <ol style="list-style-type: none"> 1. Using special software for recording data as evidence <p>Reflection:</p> <ol style="list-style-type: none"> 1. Using the concept of evidence-based medicine for homoeopathic research and practice
Assessments	Written Examinations: SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Ethics in Homoeopathic Research
Learning Outcomes	<p>Competency: Hom-PG-RMB-08 Ethics in Homoeopathic Research</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Recall the evolution of ethical principles 2. Discuss the basic ethical principles 3. Enlist the silent features of statutory regulations 4. Discuss the importance of statutory regulations

	<ol style="list-style-type: none"> Describe the components of various consents Enumerate the steps of obtaining consent / assents and also situation of consent waiver Explain the importance and content of Patient Information Sheet Outline the structure and function of Institutional Ethical Committee and data safety committee Define Adverse event Enumerate the step of reporting and managing AE Explain the ethical issues in publication of results <p>Skill:</p> <ol style="list-style-type: none"> Identify the situations where Ethical issues and statutory laws are applicable Categorize the ethical issues for the research work done for the speciality subject Formulate the Informed consent for the research work done for the speciality subject Present the proposal to IEC committee <p>Reflection:</p> <ol style="list-style-type: none"> Conduct the study as per the protocols and report the findings with due consideration for ethical principles.
Assessments	Written Examinations: SAQ
Prescribed texts	As per list
Domains of competencies	KS, PBL, CS, PRF

Course Overview	Basic Concepts of Biostatistics
Learning Outcomes	<p>Competency: Hom-PG-RMB-09</p> <p>Basic Concepts of Biostatistics</p> <p>Knowledge:</p> <ol style="list-style-type: none"> Define Biostatistics Discuss the importance of Biostatistics in homoeopathic research Define Variability Discuss the types of variability Define Clinical significance Discuss the concept of validity and reliability Discuss the concept of Specificity and Sensitivity <p>Skill:</p> <ol style="list-style-type: none"> Demonstrate the use of Specificity and Sensitivity during homoeopathic drug trials <p>Reflection:</p>

	1. Value the basic concept of Bio-statistics while doing homoeopathic research
Assessments	Written Examinations: SAQ
Prescribed texts	As per list
Domains of competencies	KS

Course Overview	Concept of Data types, Collection & Sorting methods
Learning Outcomes	<p>Competency Hom-PG-RMB-10 Concept of Data types, Collection & Sorting methods</p> <p>Knowledge</p> <ol style="list-style-type: none"> 1. Define Data 2. Define Primary and Secondary Data 3. Define Qualitative and Quantitative Data types with medical examples 4. Define the Data Level of Measurements 5. Enumerate the Nominal, Ordinal, Interval, and Ratio with medical examples 6. Discuss the process of Data collection methods; Interview and Questionnaire. 7. Enumerate the types of Questions used for the Questionnaire design. 8. Discuss the guidelines for data tabulation for Quantitative and Qualitative Data 9. Discuss the guidelines for the graphical presentation of Quantitative Data (Histogram Graph, Frequency polygon, frequency curve, line diagram, Scatter plot diagram, Box Plot graph) 10. Discuss the guidelines for the graphical presentation of Qualitative Data (Types of Bar graph, types of Pie graph, Pictogram, Map diagram) <p>Skills</p> <ol style="list-style-type: none"> 2. Display the application of data to categorize the data into types and data levels of measurements while reading research articles on the subject's speciality. 3. Display the application of data presentation principles while reading the research article of the subject speciality <p>Reflection</p> <ol style="list-style-type: none"> 2. Relate the application of Data types, Data Level of Measurements, and Data Presentation while writing the synopsis or protocol.

Assessments	Written Examinations: SAQ, LAQ, Case-Based Questions
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Concept of Population, Sample, Sampling techniques and Sample Size for conducting Homoeopathic Research
Learning Outcomes	<p>Competency Hom-PG-RMB-11 Concept of Population, Sample, Sampling techniques and Sample Size for conducting Homoeopathic Research</p> <p>Knowledge</p> <ol style="list-style-type: none"> 1. Define Population 2. Define Sampling Frame 3. Define Sample 4. Discuss the difference between Census and Sample 5. Enumerate the characteristics of a good sample 6. Define the classification of Sampling Probability and Non – probability Sampling 7. Discuss the difference between Probability and Non – Probability Sampling 8. Discuss the types of Probability Sampling with medical examples (Simple random, Systemic random, Stratified random, Multiphase, Multistage, Cluster, Replicate) 9. Discuss the types of Non – Probability Sampling with medical examples (Quota, Purposive, Accidental, Snowball) 10. Discuss the sampling and non–sampling errors 11. Define the Demography Statistics 12. Discuss the types of Demography statistics with medical examples (Vital, Morbidity, Mortality, Hospital & life table) 13. Enumerating the factors to be considered for calculating the sample size 14. Enlisting the steps to calculate the sample size for Observational Analytical Studies 15. Enlisting the steps to calculate the sample size for Survey Design 16. Enlisting the steps to calculate the sample size for the Experimental study design <p>Skills</p> <ol style="list-style-type: none"> 1. Display the application of Sampling and Non-Sampling errors while reading the research article of the subject speciality 2. Display the application of Types of Sampling methods and Techniques while reading the research article of the subject speciality

	<ol style="list-style-type: none"> 3. Display the application of the Sample size concepts while reading the research article of the subject speciality 4. Demonstrate the calculation of sample size on sample size calculator software. <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the application of Sample size, Sampling frame, and Sampling methods and techniques while writing the synopsis or protocol.
Assessments	<ul style="list-style-type: none"> • Written Examinations: SAQ, LAQ, Case-Based Questions
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Basics of Data Analysis, Descriptive statistics & Probability
Learning Outcomes	<p>Competency Hom-PG-RMB-12 Basics of Data Analysis, Descriptive statistics & Probability</p> <p>Knowledge</p> <ol style="list-style-type: none"> 1. Define Central Tendency (Mean, Median, Mode) 2. Discuss the application of Mean, Median, Mode with the medical examples 3. Define the Percentile 4. Discuss the application of Percentile with the medical example 5. Enlisting the steps for calculating Central Tendency and Percentile (Location) 6. Discuss the concept of Dispersion in the statistics 7. Enlisting the steps for range, quartile, semi-quartile, interquartile, range, Mean Deviation, Standard Deviation, Standard Error, and coefficient of Variation 8. Discuss the application of measures of Dispersion (range, quartile, semi-quartile, interquartile, range, Mean Deviation, Standard Deviation, Standard Error, Coefficient of Variation) 9. Define Normal Distribution 10. Enlisting the characteristics of Normal Curve 11. Discuss the Standard Normal Distribution properties for Quantitative and Qualitative Data 12. Define Skewness and Kurtosis 13. Discuss the positively and negatively skewed distribution 14. Define Confidence Interval 15. Discuss the application of Confidence Interval with Medical Examples 16. Enlisting the steps for calculating Confidence Interval 17. Explain the Probability concept 18. Discuss the Laws of Probability (addition, multiplication, binomial probability law, probability law explained z table)

	<p>19. Discuss the types of Probability (Marginal, Joint, Conditional probability)</p> <p>20. Explain the Baye's Theorem and its application to understand the Inverse Probability</p> <p>21. Discuss the application of Probability laws to Likelihood Ratio and Predictive (False Positive, False Negative, True Positive, True Negative, Sensitivity, Specificity, Accuracy, Predictive Value Positive and Predictive Value Negative)</p> <p>22. Explain the theoretical distributions with medical examples (Binomial and Poisson Distributions)</p> <p>23. Explain the zone of acceptance and rejection in Normal distribution</p> <p>24. Explain the Type I and Type II errors with medical Examples</p> <p>25. Explain the significance of Type I and Type II errors in the medical field</p> <p>Skills</p> <ol style="list-style-type: none"> 1. Display the application of likelihood Ratio while reading the research article on Likelihood Ratio in Homoeopathy 2. Demonstrate the calculation of Descriptive Statistics (Mean, Mode, Median, SD, and Normal Distribution) on statistics software or MS Excel. <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the application of Descriptive statistics while writing the synopsis or protocol. 2. Relate the application of Descriptive statistics while reading the articles of the subject speciality.
Assessments	<ul style="list-style-type: none"> • Written Examinations: SAQ, LAQ, Case-Based Questions
Prescribed texts	As per list
Domains of competencies	KS, HO, PBL

Course Overview	Basics of Inferential Statistics for Data Analysis for Homoeopathic Research
Learning Outcomes	<p>Competency: Hom-PG-RMB-13</p> <p>Basics of Inferential Statistics for Data Analysis for Homoeopathic Research</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Define Inferential Statistics 2. Explain the meaning of level of significance 3. Discuss the test used for hypothesis testing 4. Enlist Parametric test 5. Explain the concept and operation of parametric tests 6. Enlist non-parametric test

	<ol style="list-style-type: none"> 7. Explain the concept and operation of non-parametric tests 8. Discuss the concept of Variance and covariance 9. Explain the concept and operations of test for analysis of variance and covariance 10. Enlist the rank-based test 11. Explain the concept and operations of rank-based test 12. Discuss the concept of regression analysis 13. Define Odds ratio 14. Define risk ratio 15. Define Likelihood ratio 16. Define Prognostic factors 17. Explain the concept of test used for Odds ratio, risk ratio, likelihood ratio <p>Skill:</p> <ol style="list-style-type: none"> 1. Interpret the outcome of statistical test 2. Derive valid conclusions on the basis of outcome of statistical tests <p>Reflection:</p> <ol style="list-style-type: none"> 1. Use statistical test for correct data analysis and making valid conclusions
Assessments	Written Examinations: LAQ, SAQ
Prescribed texts	As per list
Domains of competencies	KS, HO

Course Overview	Software & AI tools for supporting Research Data Management and Analysis
Learning Outcomes	<p>Competency: Hom-PG-RMB-14 Software & AI tools for supporting Research Data Management and Analysis</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Discuss the utility of Statistical Software 2. Discuss the utility of software for writing and publications 3. Discuss the scope of R, SPSS, SAS software for statistical analysis <p>Skill:</p> <ol style="list-style-type: none"> 1. Demonstrate the use of MS-Excel for data organizing and basic statistical calculations 2. Demonstrate the use of G -Power for sample size calculation 3. Illustrate the use of reference management software

	<p>4. Illustrate the use of language-enhancing software</p> <p>Reflection:</p> <p>2. Using various AI tools for data organizing, analysis and presenting the research findings.</p>
Assessments	Written Examinations: SAQ
Prescribed texts	As per list
Domains of competencies	KS

Course Overview	Communicating Research Findings
Learning Outcomes	<p>Competency: Hom-PG-RMB-15 Communicating Research Findings</p> <p>Knowledge:</p> <ol style="list-style-type: none"> 1. Discuss the basic principles of scientific writing 2. Explain the meaning of each section of the dissertation and thesis 3. Explain the basic formats IMRAD for writing a scientific article 4. Indicate various categories of journals and the meaning of the impact factor 5. Explain the process of the peer review process 6. Explain the meaning of various publication technicalities <p>Skill:</p> <ol style="list-style-type: none"> 1. Formulate the data presentation Textual format 2. Formulate the data presentation in Tabular format 3. Formulate the data presentation in a graphical format 4. Creating a poster for a scientific presentation 5. Demonstrating skills in oral presentation of a scientific paper <p>Reflection:</p> <ol style="list-style-type: none"> 1. Dissemination of the knowledge gained through research in an appropriate forum and medium
Assessments	Written Examinations: LAQ, SAQ
Prescribed texts	As per list
Domains of competencies	KS, CS, PRF

Assessment Method:

Part 1 – Paper 3. Course Numbers

Hom-PG-RMB-01 - Foundation for Homoeopathic Research

Hom-PG-RMB-02 - Concept of Structured and Continuous Literature Review

Hom-PG-RMB-03 - Research Process and Proposal Writing

3. Rao NSN, Murthy NSN, 2010, *Applied Statistics in Health Sciences*, India, JP Brothers Medical Publishers
4. Ahmed.R Munir, 2015, *Research Methodology-simplifying intricacies in post graduate studies*, India, Bangalore, Centre for Homeopathic Studies Bangalore
5. Ahmed R Munir, 2015, *Dissertation Made Easy*, India, Bangalore, Center for Homoeopathic Studies
6. Richie Jane, Lewis Jane, 2003, *Qualitative Research Practice*, England, London, SAGE publications limited
7. Government of India, 2021, *Good Clinical Practice Guidelines For Clinical Trials in Homoeopathy*, India, Central Council for Research in Homoeopathy.

Bio-Statistics:

1. Park K. 2021, *Park's Text Book of preventive and Social Medicine*, India, Madhya Pradesh, Jabalpur, M/s Bhanarasi Bhanot Publishers.
2. Dixit J V. 2017, *Principles and Practice of Bio-statistics*, India, Madhya Pradesh, Jabalpur, M/s Bhanarasi Bhanot Publishers.
3. Mahajan BK, 2010, *Methods of Biostatistics: For Medical Students and Research Workers*, India, Jaypee Publishers.
4. Joann G. E. *Jekel's – Epidemiology, Bio-statistics and Preventive Medicine*, USA, Elsevier Publishers.
5. Sundaram K R, Dwivedi S N, Sreenivas V, 2014, *Medical Statistics: Principles and Practice*, India, Wolters Kluwer Pvt. Ltd.
6. Susan W. 2019, *Basic & Clinical Biostatistics*, India, Lange Publication.
7. Constantin Yiannoutsos, 2010, *Principles Of Biostatistics*, USA, Center For Biostatistics In Aids Research Harvard School Of Public Health.

Web resources

1. <https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>
2. <https://www.wma.net/what-we-do/medical-ethics/>
3. <https://ethics.ncdirindia.org/>
4. [https://www.spss-tutorials.com/spss-what-is-it/Nptel courses of research methodology & bioethics](https://www.spss-tutorials.com/spss-what-is-it/Nptel%20courses%20of%20research%20methodology%20&%20bioethics)
5. <https://www.ijrh.org/>
6. <https://www.ccrhindia.nic.in>
7. <https://www.ich.org/>
8. <https://ayushportal.nic.in/>
9. https://onlinecourses.nptel.ac.in/noc22_ge08/preview
10. https://nie.gov.in/icmr_sph/ERHR.html
11. <https://ichgcp.net/>
12. <https://www.equator-network.org/>
13. <https://apps.who.int/iris/handle/10665/206929>