

## SECTION I

### REGULATIONS:

Post graduation course in the field of Homoeopathy is the highest step in this science. The objective of this course is to produce excellent professional thinkers, practitioners, researchers and teachers in Homoeopathy with special emphasis in the subject of their choice.

**BRANCHES OF STUDY:** in the following branches, Postgraduate degree courses are available:

Sl. No.	Name of the Qualification	Abbreviation
1	Doctor of Medicine (Homoeopathy) - Organon of Medicine with Homoeopathic Philosophy	M.D. (Hom.) Organon
2	Doctor of Medicine (Homoeopathy) - Homoeopathic Materia Medica including Applied aspects	M.D. (Hom.) Materia Medica
3	Doctor Of Medicine (Homoeopathy) - Repertory	M.D. (Hom.) Repertory
4	Doctor of Medicine (Homoeopathy) - Homoeopathic Pharmacy	M.D. (Hom.) Homoeopathic Pharmacy
5	Doctor of Medicine (Homoeopathy) - Practice of Medicine	M.D. (Hom.) Practice of Medicine
6	Doctor of Medicine (Homoeopathy) - Pediatrics	M.D. (Hom) - Pediatrics
7	Doctor of Medicine (Homoeopathy) - Psychiatry	M.D. (Hom.) Psychiatry

### PERIOD OF TRAINING:

The period of training for M.D. [Hom] shall be 3 years [six clear terms of six months each after full registration including one year of house job or equivalent thereof]

#### 1. **SELECTION:**

Selection through the AIAPGET .

- 1.1 Provisional Selection shall be made by the Selection Committee constituted by the University.
- 1.2 The Selection Committee shall provisionally select the candidates as per these regulations from among the candidates who passed the entrance test and as per merit list.
- 1.3 The candidates shall submit their option for subjects of his/ her choice in order of priority to Selection Committee. The selection committee will select the candidates as per the Admissions Regulations and Government Rules from among the candidates who physically present themselves and submitted their options. The list of provisionally selected candidates will be displayed and the provisional selection intimations will be issued to the selected candidates. The selection will be made only from among the candidates who physically present themselves when their hall ticket numbers are called out in order of merit.
- 1.4 Claims of the candidates will not be considered if they are, absent when called at the time of selection. If a candidate on merit is, absent for selection when he/she is called then next in the merit would be selected. The candidates shall produce their original certificates to the selection committee for verification.

- 1.5 The candidates shall be called to appear before the Selection Committee one after another and they shall not enter the selection committee room in groups. Any person who obstructs the proceedings of the Selection Committee or otherwise misbehaves or causes disturbance at the selection committee meeting will be liable for disciplinary action as may be taken by the University.
- 1.6 The Selection Committee shall have power to review the provisional selection in case of any errors, misrepresentation, fraud or glaring injustice. In all matters relating to selections and admissions, the decision of the selection committee shall be final and binding on the candidates and selections cannot be questioned after admissions are closed.
- 1.7 If a candidate after choosing the subject fails to pay fees or after paying the fees fails to submit the bond, his/ her selection stands cancelled automatically. If a candidate is absent at the first selection, he/ she will be considered for selection at the subsequent selection in the then available courses.

## **2. CONDITIONS OF ADMISSION:**

- 2.1 The Principal, J.S.P.S. Govt. Homoeo Medical College, Hyderabad shall verify the correctness of documents. On his satisfaction, he shall direct the candidates to credit the college fee etc., immediately.
- 2.2 Candidates joining courses shall execute a bond on non judicial stamp paper of value of Rs. 100/- in the form specified in Annexure-I to ensure completion of the prescribed period of training or in default or for any other reason has to pay Rs. 1,00,000/- to the Registrar, KNR University of Health Sciences and shall refund the stipend received up to that date to Government.
- 2.3 The Original certificates submitted shall not be returned to the candidates till they complete their course.
- 2.4 Candidates selected to various courses shall be whole time students.
- 2.5 Service Candidates will have to apply for study leave and are required to produce the orders wherein such leave has been sanctioned to them from the competent authority within 3 months after joining the course.

## **3. FEES:**

- 3.1 All the selected candidates are required to pay the admission fee, tuition fees, deposits etc., as per rules in force.

## **4. ATTENDANCE AND LEAVE:**

- 4.1 The postgraduate students shall complete eighty five percent of attendance in all subjects separately before they appear for final examination. However, ten percent of attendance may be relaxed by the Vice-Chancellor on production of medical certificate in deserving cases.
- 4.2 **Leave:** The Post Graduates are eligible for 20 days leave in the academic year (AS PER THE GOMs NO:346 HM&FW (R2) DEPT DATED 10-12-2010) and they can avail a maximum 10 days at a time. If they avail more than 10 days at a time, the stipend shall be deducted proportionately. The balance of leave in a year if any shall not be carried forward to the next academic year.
- 4.3 **MATERNITY LEAVE:** Post Graduate students are can avail maternity leave up to 120 days only once in the PG Course of study and study period will be extended to the extent of the Maternity Leave availed. The candidate shall not be eligible to appear in the university Examination till the completion of study period as per regulations.

#### 4.4 SANCTION OF LEAVE OF ABSENCE BEYOND 3 MONTHS AND TERMINATION OF STUDENTSHIP:

Every student shall attend his/ her classes (Theory, Practical and Clinical) on all working days unless he/ she is granted leave of absence by the Principal. If a student is, absent continuously for a period of 91 days or more and seeks permission to attend the course before one year after discontinuation, his/ her application shall be forwarded to the Registrar with the recommendations of the Principal. If the Vice-Chancellor is satisfied with the reasons, he may grant leave of absence attaching such conditions, as he may deem necessary.

Candidates who are absent for a continuous period of one year or more without permission shall be deemed to have forfeited the admission into the course and his/ her studentship shall stand cancelled without any further notice.

#### 4.5. ATTENDANCE AND MONITORING PROGRESS OF STUDIES:

- i. A candidate pursuing M. D. Homoeopathy Course shall study in the concerned department of the institution for the entire period as a full time student. No candidate is permitted to work in any laboratory/ college/ industry/ pharmacy, etc., while studying postgraduate course. **No candidate should join any other course of study or appear for any other examination conducted by this university or any other university in India or abroad during the period of registration.**
- ii. Each year shall be taken as a unit for the purpose of calculating attendance.
- iii. Every student shall attend symposia, seminars, conferences, journal review meetings and lectures during each year as prescribed by the department/college/ university and not absent himself/ herself without valid reasons.
- iv. Candidate who has put in a minimum of 85% of attendance in the theory and practical assignments separately and shows satisfactory progress shall be permitted to appear for **M. D. Homoeopathy part-I examination**. However, ten percent of attendance may be relaxed by the vice-Chancellor on production of medical certificate in deserving cases.
- v. Candidate who has put in a minimum of 85% of attendance in the theory and practical assignments separately and shows satisfactory progress shall be permitted to appear for **M. D. Homoeopathy part-II examination**. However, ten percent of attendance may be relaxed by the vice-Chancellor on production of medical certificate in deserving cases.
- vi. Any student who fails to complete the course in the manner stated above shall not be permitted to appear for the University examinations. A certificate to this effect shall be sent to university by the Principal.
- vii. **P.G. SCHOLARS ARE NOT ENTITLED FOR ANY VACATION**

#### 5. PRIVATE PRACTICE:

No PG student shall do any private practice or consultation practice and shall not accept any part-time employment during his/ her Post Graduation.

#### 6. COLLEGE REGULATIONS:

Candidates are required to follow the rules and regulations of the college and should also abide by the regulations of the University and they shall not make any correspondence with higher authorities directly without prior permission of the Professor of the concerned unit and Principal.

**7. STIPENDS:**

- 7.1 Stipends may be paid by the Principal as per the orders of Government of A.P. to the PG students who are regular in attendance and show good progress every month in their academic pursuits. The total period during which the stipends may be paid to the students shall not exceed thirty-six months for the course. No candidate will be eligible to draw the stipend for more than 36 months during the entire PG study period.
- 7.2 Service candidates shall not be paid stipend if they draw leave salary or salary.

**8. COMMENCEMENT OF THE COURSE:**

The course shall normally commence as per the date mentioned in the schedule at last page. The duration of the course shall be calculated from this date of commencement of the course and shall be uniform for all the candidates irrespective of their individual dates of admission.

**9. CLOSURE OF ADMISSIONS:**

- 9.1 Admissions shall be closed as per the date specified in the schedule notified at last page.
- 9.2 Any vacancy as on day of closure of admissions or that arises after closure of admissions shall not be filled up.

**10. DURATION OF COURSE:**

The period of training of Doctor of Medicine in Homoeopathy shall be of 3 years duration in the department concerned.

**11. MEDIUM OF INSTRUCTION:**

English shall be the medium of instruction and examination.

**12. POWERS OF THE PRINCIPAL:**

Notwithstanding anything contained in these regulations, the Principal, J.S.P.S. Govt. Homoeo Medical College, Hyderabad may at any time before completion of the PG course either on his own motion or on the application of any person after due and proper enquiry and after giving the person two weeks time from the date of the receipt of the show cause notice to submit written explanation and or a personal hearing, order the cancellation of admission to the PG course if in his opinion such candidates had furnished false or incorrect information in the application form or in the documents attached, certificates enclosed there to or in the statements made either before the authority incharge of admissions or the Principal or in any other fraudulent manner, obtained admission into such course. Against any such order of the Principal, an appeal shall lie to the KNR University of Health Sciences, Warangal, T.S.

**13. POWER TO AMEND REGULATIONS AND REVIEW SELECTION OR ADMISSION OF CANDIDATES:**

- 13.1 The Dr. NTR University of Health Sciences shall have the power to add or to delete or amend or alter these regulations from time to time.
- 13.2 The University may either suo moto or on an application made to them, call for and examine records relating to any selection or admission or cancellation thereof made by the authority in-charge of selection or admission for the purpose of satisfying themselves as to the legality or regularity of such selection or admission orders in relation thereto, as they deem fit including cancellation of the selections already published or admissions already made provided that the University may before cancelling such selection or admission give an opportunity to the authority in-charge of selection or admission and to the person effected to show cause against such cancellation.

#### **14. FINALITY OF SELECTION:**

All selections under these Regulations shall be subject to any general regulations or order that may be made by University from time to time.

#### **15. ELIGIBILITY FOR ADMISSION:**

15.1. No candidate shall be admitted to M.D (Hom.) course unless he/ she possesses the degree of-

- a. Bachelor of Homoeopathic Medicine and Surgery or equivalent qualification in Homoeopathy included in the Second Schedule to the Act, after undergoing a course of study of not less than five years and six months duration including one year compulsory internship; or
- b. Bachelor of Homoeopathic Medicine and Surgery (Graded Degree) or equivalent qualification in Homoeopathy included in the Second Schedule to the Act, after undergoing a course of study of not less than two years duration.
- c. The university or the authority appointed by Central government or State government shall conduct the entrance examination based on the merit secured in the entrance examination candidates are selected for P.G. Course.

#### **16. METHOD OF TRAINING**

The emphasis shall be on in-service training and not on didactic lectures. The candidate should take part in seminars, group discussions, clinical meetings and journal club. The candidate shall be required to write a dissertation with detailed commentary, which would provide the candidate with necessary background of training in research. Methods and techniques along with the art of writing research papers and learning and making use of library. The candidate shall be in the hospital campus and shall be given graded responsibility in the management and treatment of patients entrusted to his care. He shall participate in teaching and training of under graduate students and/ or interns.

#### **17. MONITORING PROGRESS OF STUDIES**

Every candidate shall maintain a work diary and record of his/ her participation in the training programmes conducted by the department such as journal reviews; seminars, etc. (please see Chapter IV for model checklists and logbook specimen copy).

The work diary shall be scrutinized by the guide and certified by the Guide, Head of the Department and Head of the Institution, and presented in the university if called for.

Special mention may be made by the candidate in regard to the presentations, seminars, UG Teaching programme as well as details of experiments or laboratory procedures, conducted by the candidate. The presentations will be assessed by the faculty members and peers using relevant checklists given in Section IV.

#### **18. SYNOPSIS:**

Every candidate shall submit to the Registrar (Academic) of the University in the prescribed proforma, a synopsis containing particulars of proposed dissertation work within six months from the date of commencement of the course on or before the dates notified by the University.

18.1 If they register/ or change of topic for dissertation after a period of 6 months up to one year they are allowed with penalty as prescribed by the University of Health Sciences.

18.2 If candidate fails to register the topic with one year, the duration of the course will be extended.

18.3 The change of the topic for dissertation is also allowed only up to one year

18.4 The synopsis shall be sent through the proper channel.

## 19. DISSERTATION

- i. Every candidate pursuing M. D. Homoeopathy course is required to carry out work on a selected research project under the guidance of a recognized postgraduate teacher. The results of such a work shall be submitted in the form of a dissertation.
- ii. A guide shall be a full time postgraduate teacher of P.G. Institution affiliated to KNRUHS and recognized by KNRUHS as a guide for supervision of dissertation work. However, a Co-guide can be opted wherever required. The Co-Guide shall also be a postgraduate teacher recognized by KNRUHS as guide.
- iii. The dissertation is aimed to train a postgraduate student in research methods and techniques. It includes identification of the problem, formulation of a hypothesis, review of literature, getting acquainted with recent advances, designing of a research study, collection of data, critical analysis, and comparison of results and drawing conclusions.
- iv. The dissertation should be written under the following headings
  1. Introduction
  2. Aims or Objectives of study
  3. Review of literature
  4. Material and Methods
  5. Results
  6. Discussion
  7. Conclusion
  8. Summary
  9. References
  10. Tables
  11. Annexure
- v. The written text of dissertation will be not less than 10,000 words and it shall be not less than 50 pages and shall not exceed 150 pages excluding references, tables, questionnaires and other annexure. It should be neatly typed with double line spacing on one side of the bond paper (A4 size, 8.27" x 11.69") and bound properly. **Spiral binding should be avoided.**
- vi. The dissertation shall be certified by the guide and co-guide if any, Head of the Department and Head of the Institution.
- vii. The dissertation shall form the basis of Viva-Voice of Examination.
- viii. Six copies of dissertation thus prepared shall be submitted to the Registrar (Evaluation), six months before final examination on or before the dates notified by the University.
- ix. The dissertation shall be evaluated 3 months before the examination. Result of the dissertation evaluation is the eligibility for appearing for the final examination. If the dissertation is not approved, the candidate is permitted to resubmit the same within the period of 6 months not more than one year after rejection.

## 20. Criteria for Supervisor (Guide), Examiner

A Person shall possess the following qualification and experience for being eligible to be a Supervisor (Guide) and Examiner.

Professor or Reader possessing a recognized Post Graduate Degree qualification in Homoeopathy or a Lecturer holding a recognized Post Graduate Degree in Homoeopathy with eight-year teaching experience as Lecturer.

## **21. Criteria for Selection of Co-Supervisor/ Co-Guide**

P.G. Degree qualification in the speciality subject and seven years teaching experience as Associate Professor in Medical College recognized by the Medical council of India/ Central Council of Homoeopathy.

## **22. Student/ Supervisor (Guide) Ratio**

- a. The student – Supervisor (Guide) ratio shall be 3:1 if the Guide or Supervisor is of Professor Cadre.
- b. The Student – Supervisor (Guide) ratio shall be 2:1 if the Guide or Supervisor is of Reader Cadre/ Asst. Professor.
- c. The Student – Supervisor (Guide) ratio shall be 1:1 if the Guide or Supervisor is of Lecturer cadre.

## **22. Requirement for P.G. Training Centre**

- 1) The Central Council may after granting due permission let a Homoeopathic College/ Institute/ Hospital to start Post Graduate Courses in Homoeopathy.
- 2) Every such college or teaching hospital shall have a department of concerned specialty and shall also have the following additional facilities, with two teachers, having at least one higher faculty namely:-
  - (i) One full Time Professor or Reader in the Department of specialty;
  - (ii) One Lecturer on Full Time basis in the Department of specialty.
  - (iii) Staff such as two Assistants or Attendants, in the Departments of Psychiatry and Pediatrics.
  - (iv) Outdoor department and indoor department with minimum of 250 patients in OPD per day;
  - (v) One bed shall be earmarked per student for each clinical subject of specialty, in addition to the beds required for B.H.M.S. Course in its teaching (Collegiate) Homoeopathic hospital with 75% bed occupation per day.

# **SCHEME OF EXAMINATION**



## **SCHEME OF EXAMINATION:**

The Examination for the P.G. Degree shall consist of:

- 1) Theory Examinations
- 2) Practical and Viva Voce Examinations
- 3) Dissertation.

The examination shall be conducted in two parts namely:

- A) M.D. (Homoeopathy) – Part I (to be held six months after completion of House job of one year duration)
- B) M.D. (Homoeopathy) – Part II (to be held after one year six months after part I examination)

## **PART I: M. D. (HOMOEOPATHY) EXAMINATION**

Every candidate seeking admission to part- I of the examination shall submit application to the university with a certificate from his/ her guide about the completion of the part I course of studies in the subject in which the candidate is seeking admission to the examination

Each course shall comprise the following subjects:

“(i) Part –I M.D. (Hom) Examination – Full marks of each subject and minimum number of marks required to pass shall be as under: -

### **M.D. (HOM.) MATERIA MEDICA**

Subject	Theory	Practicals including orals	Total	Pass marks
1. Materia Medica	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

### **M.D. (HOM.) REPERTORY**

Subject	Theory	Practicals including orals	Total	Pass marks
1.Homoeopathic Repertory	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

**M.D. (HOM.) HOMOEOPATHIC PHILOSOPHY**

Subject	Theory	Practicals including orals	Total	Pass marks
1. Homoeopathic Philosophy	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

**M.D. (HOM.) PRACTICE OF MEDICINE**

Subject	Theory	Practicals including orals	Total	Pass marks
1. Practice of Medicine	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

**M.D. (HOM.) HOMOEOPATHIC PHARMACY**

Subject	Theory	Practicals including orals	Total	Pass marks
1. Homoeopathic Pharmacy	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

**M.D. (HOM.) PAEDIATRICS**

Subject	Theory	Practicals including orals	Total	Pass marks
1. Paediatrics	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

### M.D. (HOM.) PSYCHIATRY

Subject	Theory	Practicals including orals	Total	Pass marks
1. Psychiatry	100	50	150	75
2. Research Methodology & Biostatistics	100	No practicals	50	50
3. Advanced teaching of Fundamentals of Homoeopathy	100	50	150	75

1. NB The student shall be declared pass if he gets 50% marks separately in theory and in practical including viva-voce examination along with 50% aggregate in each subject.
2. One Practical/clinical examination, including viva-voc, in the subject of specialty, to test the candidates acumen and his ability and working knowledge in the practice of the specialty and there shall be four examiners together, including one supervisor [guide] in the subject, for examination the candidate.
3. Provided that all the four examiners shall jointly assess the knowledge of the candidate for recommending the result to the university as passed or failed.

#### METHOD OF CONDUCTING PRACTICAL AND VIVA

#### M.D. PART- I EXAMINATIONS FOR SPECIALITY [MAIN] AND GENERAL SUBJECTS.

**There shall be four examiners with minimum three examiners--two internals, two externals from outside state/ university.**

The examinations may be conducted by giving clinical cases (patients) to the students.

**PRACTICAL AND ORALS MARKS WILL BE ASSESSED JOINTLY BY THE 4 EXAMINERS.**

**The Guidelines for the assessment of the candidate is**

History taking	-	5	Marks
Clinical Exam	-	5	"
Totality of symptoms	-	5	"
Remedy diagnosis & Differential diagnosis	-	5	"
Plan of treatment	-	5	"
Total		25	

## M.D. (HOMOEOPATHY) PART II EXAMINATION

Every candidate seeking admission to the part II of the examination shall submit an application to the university with the following:

- a. A certificate showing that he/ she has passed part I examination ( at least 6 months before scheduled part-II examination) and
- b. A certificate from his/ her guide and endorsed by the HOD and principal about the completion of studies in the subject in which the candidate is seeking admission to the examination.
- c. Every candidate shall prepare and submit Six printed or typed copies of Dissertation embodying his own research and contribution in advancing the knowledge in the subject to the university for approval not later than six months prior to the holding of part II examination.
- d. The dissertation shall be submitted to the guide/ supervisor at least one month before the time fixed for submitting it. The university and the guide/ supervisor shall certify that the work has not previously formed the basis for the award of any P.G. degree and that the work is the record of the candidate's personal efforts and submitted to the university duly countersigned by the guide/supervisor.
- e. The dissertation shall form the basis of Viva-Voice of Examination.
- f. Six copies of dissertation thus prepared shall be submitted to the Registrar (Evaluation), six months before final examination on or before the dates notified by the University.
- g. The dissertation shall be evaluated 3 months before the examination. Result of the dissertation evaluation is the eligibility for appearing for the final examination. If the dissertation is not approved, the candidate is permitted to resubmit the same within the period of 6 months not more than one year after rejection.

### PART II HOMOEOPATHY EXAMINATIONS (SPECIALTY SUBJECT)

Provided that all the four examiners shall jointly assess the knowledge of the candidate for recommending the result to the University as passed or failed. However if four examiners are not available, the practical/clinical examinations may be conducted with three examiners with at least one external examiner.

Part-II M.D. (Hom) Examination - Full marks of each subject and minimum number of marks required to pass shall be as under: -

#### M.D. (Hom.) MATERIA MEDICA

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Materia Medica paper-I	100	200	400	200
2	Materia Medica paper-II	100			

#### M.D. (HOM.) HOMOEOPATHIC PHILOSOPHY

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Homoeopathic Philosophy & Organon of Medicine Paper - I	100	200	400	200
2	Homoeopathic Philosophy & Organon of Medicine Paper - II	100			

### M.D. (HOM.) REPERTORY

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Repertory Paper - I	100	200	400	200
2	Repertory Paper - II	100			

### M.D. (HOM.) PRACTICE OF MEDICINE

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Practice of Medicine Paper - I	100	200	400	200
2	Practice of Medicine Paper - II	100			

### M.D. (HOM.) PEDIATRICS

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Pediatrics Paper - I	100	200	400	200
2	Pediatrics Paper - II	100			

### M.D. (HOM.) PHARMACY

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Pharmacy Paper - I	100	200	400	200
2	Pharmacy Paper - II	100			

### M.D. (HOM.) PSYCHIATRY

Sl.No.	Subjects	Theory	PRACTICAL INCLUDING ORALS	Total	Pass marks
1	Psychiatry Paper - I	100	200	400	200
2	Psychiatry Paper - II	100			

1. NB The student shall be declared pass if he gets 50% marks separately in theory and in practical including viva-voce examination along with 50% aggregate in each subject.
2. One Practical/clinical examination, including viva-voc, in the subject of speciality, to test the candidates acumen and his ability and working knowledge in the practice of the specialty and there shall be four examiners together, including one supervisor [guide] in the subject, for examination the candidate.
3. Provided that all the four examiners shall jointly assess the knowledge of the candidate for recommending the result to the university as passed or failed.

**METHOD OF CONDUCTING PRACTICAL AND ORALS EXAMINATION  
IN M.D.(Hom) PART- II IN SPECIALTY SUBJECTS**

**There shall be four examiners with minimum three examiners--two internals, two externals from outside state/ university.**

1. There will be one long and one short case in the practical.
2. The long case will test the capacity to size up a chronic clinical problem, define it Homeopathic ally, plan the treatment and estimate the prognosis - all this based on sound, rational principles of philosophy.
3. The short cases will asses candidate's approach to clinical problem, skills to quickly define it and suggest alternative plans for resolving the same within the limited resources at command. Thus, the power of observation and interpretation will be examined. The process of examination will be observed and questioned.
4. The viva will aim to cover the entire syllabus seeking to asses candidates' knowledge in depth including the dissertation work.
5. The long case will carry 70% of the allotted marks and the short case will carry 30 %. Each step will be marked separately, thus stressing the importance of the capacity to think through a clinical problem in a systematic way.
6. **PRACTICAL AND ORALS MARKS WILL BE ASSESSED JOINTLY BY THE 4 EXAMINERS.**

**LONG CASE MARK SHEET**

<b>HEADING</b>	<b>ALLOTTED</b>
HISTORY	10
CLINICAL	10
TOTALITY	05
REMEDY DIAGNOSIS AND DIFFERENTIAL MM	05
REMEDY RELATIONSHIP	05
PLANNING	05
PROGNOSIS	05
PRESENTATION	25
<b>TOTAL</b>	<b>70</b>

**SHORT CASE MARK SHEET**

<b>HEADING</b>	<b>ALLOTTED</b>
EXAMINATION SKILLS	10
CLINICAL DEFINITION	10
HOM. APPROACH	10
<b>TOTAL</b>	<b>30</b>

**RESULT:** The student shall be declared pass if he gets 50% marks separately in theory and in practical including viva-voce examination along with 50% in aggregate in each subject.

Provided that all the four examiners shall jointly assess the knowledge of the candidate for recommending the result to the University as passed or failed. However if four examiners are not available, the practical/ clinical examinations may be conducted with three examiners with at least one external examiner.

**Examiners:**

1. The Criteria for the examiner shall be the same as of the guide.
2. A panel of guides/examiners shall be prepared by the University and submitted to the Central Council of Homoeopathy for approval.
3. One of the examiners out of the panel shall be guide.
4. At least 50% of the examiners shall be external examiners

**SECTION II**  
**COURSE CONTENTS FOR M.D. (HOM) PART-I**

**GENERAL SUBJECTS**

**1. RESEARCH METHODOLOGY AND BIostatISTICS (PAPER II)**

**Objectives**

*After completing course in research methodology, you will be able to-*

- Define research and biostatistics.
- Explain the scope of biostatistics in Homeopathic clinical research.
- Justify the role of research in biomedicine.
- Discuss the importance of research for Homeopathy.
- Outline the impact of research on Homeopathic practice.
- Define data.
- Classify data,
- Describe types and levels of data.
- Demonstrate the methods of data presentation.
- Classify research methods as appropriate for Homeopathy.
- Design a research
- Explain the steps of planning research in Homeopathy.
- Plan and conduct research in Homeopathic context.
- Write a research proposal to a funding agency.
- Interpret data and project results.
- Describe the measures of central tendency.
- Investigate the relationship between two quantitative variables.
- Define and distinguish among ratios, proportions, and rates in epidemiology.
- Identify and calculate commonly used rates for morbidity, mortality, and natality.
- Identify unintended medical consequence during a research study and report it to appropriate authority.
- Summarise the ethical constraints for conducting research.
- Practice ethical standards while conducting research.
- List sampling techniques.
- Estimate sample size.
- Interpret the outcome of the statistical analysis.
- Perform data analysis.
- Outline the components of a research paper.
- Review published research articles.
- Illustrate the procedure for publication in peer reviewed journals.
- Demonstrate use of 'R', 'Epiinfo' and 'Excell' for data analysis.

**Competencies**

*At completion of course students will be able to*

- Demonstrate the skills to appreciate application of research and biostatistics in health sciences.
- Demonstrate the ability to design, develop and implement research studies in homoeopathy.
- Test research hypothesis
- Demonstrate the ability to collect all types of data and analyze the data collected.
- Demonstrate the ability to select and apply appropriate statistical tests for analysis.
- To interpret the results and communicate the research findings.
- Demonstrate the ability to critically assess and conduct literature review.
- Write scientific papers and publish the same.

## Theory- 60 hours per year contains:

### UNIT 1: Fundamentals of Biostatistics and research

- A. Definition, scope and role of biostatistics, biomedical and social research in health sciences.
- B. Need for research and challenges in homoeopathic research
- C. Data: Types of data and its presentation.
- D. Levels of measurements

### UNIT 2: Research-types, designs and measures

- A. Types of research and techniques:
  - a. Descriptive research
  - b. Analytical research
    - i. Ecological studies
    - ii. Cross-sectional studies
    - iii. Case control
    - iv. Cohort studies
    - v. Experimental
    - vi. Hybrid
  - c. Others:
    - i. Fundamental research
    - ii. Quantitative and qualitative
    - iii. Conceptual and empirical research
    - iv. Operational and action research
    - v. Systematic review and meta analysis
    - vi. Outcomes research
- B. Research design:
  - a. Meaning of research design
  - b. Need for design
  - c. Features of good design and types
  - d. Hypothesis and testing and errors
- C. Research process/steps
- D. Proposal and Synopsis writing
- E. Statistical measures:
  - a. Measures of central tendencies, (mean, median, mode for grouped and ungrouped data)
  - b. Measures of dispersion,(Range, Mean deviation, standard deviation, quartiles, variance, skewness)
  - c. Standard distributions : normal binomial, poisson distribution)
  - d. Probability
- F. Health Indicators (Mortality and Morbidity rates)
- G. Ethical issues in biomedical research

### UNIT 3: Data collection and Data Management

- a. Sampling fundamentals and designs
  - i. Define population, sample, characteristics of a good sample design
  - ii. Sampling design sand methods: (probability and Non probability)
  - iii. Probability: (Simple Random, Stratified Random, Systematic, Cluster and Multistage sampling)
  - iv. Non probability: (Convenient, Quota, Purposive, Judgment)
  - v. Sample size and errors in sampling
- b. Methods of data collection
  - i. Quantitative methods: (interview method, observation method and questionnaire method)
  - ii. Qualitative methods: ( case study and focus group discussion)
- c. Data processing: ( editing, coding tabulation)



#### UNIT4: Data analysis techniques

- a. Test of significance(chi square, t- test, Paired t- test, z test)
- b. Analysis of variance and covariance
- c. Non parametric tests; (sign test, wilcoxin Mann- whitney test, Kruskal –Wallis H test)
- d. Correlation and Regression
- e. Multivariate analysis,
- f. Life table(concept, description and construction) and survival analysis(concept, need, method of estimation and comparing)

#### UNIT 5: report writing and publishing research studies

- a. Interpretation (meaning, technique, precaution)
- b. Report writing (steps, layout, types)
- c. Mechanics and precaution
- d. Medical/ article/ scientific writing and publishing research studies
- e. Statistical software: (SPSS, Excel, R, Epi info)

### 2. ADVANCED TEACHING OF FUNDAMENTALS OF HOMEOPATHY (PAPER III)

#### Purpose

The aim of this subject is to enable the Homeopathic postgraduate scholar to develop the knowledge, skills and values to perform as a practitioner, teacher and researcher in the field of Homeopathy. This subject integrates the fundamental principles of homeopathy as studied in the undergraduate level so as to evolve the content that shall form the nucleus of instructional practices by the postgraduate scholar. The overall outcome of learning this subject is to train the scholar to be able to independently practice the profession of Homeopathic academics.

#### Objectives

*At the end of the course, the learner will be able to -*

1. Explain the evolution of medical thought from early ages till date and discuss Homeopathic concept in that context.
2. Describe the contributions of Hahnemann and other stalwarts in developing homeopathy into a complete therapeutic system.
3. Relate the cardinal principles of homeopathy to clinical practice.
4. Explain the concept of health, disease and cure in Homeopathy.
5. Explain the role, limitations and prospects of homeopathy as a health care system.
6. Demonstrate skill in the application of methods of case taking and analysis.
7. Interpret the history taken with reference to the various schools of thought in Homeopathy.
8. Estimate the susceptibility of the case taken.
9. Correlate Personality Types of materia medica with the portraits of cases taken.
10. Interpret the results of prescription and plan for appropriate second prescription.
11. Discuss significance of Health Psychology in the field of healthcare.
12. State the social and psychological determinants of health.
13. Explain models of health for Homeopathic management.
14. Analyse the role of behaviours and practices on the health of individuals and society.
15. Define the terms 'education', 'teaching', 'learning' and 'evaluation'.

Units	Time	Marks
I. Doctrines of Homeopathic Philosophy.	15 hours	25 marks
II. Concepts of Homeopathic Materia Medica.	15 hours	25 marks
III. Fundamentals of Homeopathic Repertory.	15 hours	25 marks
IV. Elements of Psychology and Health.	15 hours	25 marks
Total	60 hours	100 marks

### Unit I: Basic Principles of Homeopathic Philosophy.

1. Recall the events that led to the evolution of Homeopathy.
2. State the contributions of Hahnemann in developing homeopathy as a medical system.
3. Discuss the contributions of Boenninghaussen in improving homeopathy as a system.
4. Discuss the contributions of Kent in developing homeopathy as a system.
5. Describe the three cardinal principles of Homeopathy.
6. Elaborate the literary contributions of Hahnemann and Boenninghaussen.
7. Discuss the role, prospects and limitations of homeopathy as a healthcare system.
8. Correlate Homeopathic concepts in the background of evolution of medicine till date.
9. Correlate the concepts of health, disease and cure in homeopathy and other systems of medicine.
10. Recall the principles of case taking in homeopathy as per Hahnemann.
11. Illustrate difficulties of case taking in acute state.
12. Illustrate difficulties of case taking in chronic state.
13. Illustrate the methodology of case analysis & evolution in Homeopathy.
14. Classify the case as per Hahnemann's classification of diseases.
15. List the symptoms of all miasma and identify miasmatic background in a given case.
16. Assess susceptibility of a case.
17. Plan the potency; dose and repetition for a given case.
18. Identify Homeopathic aggravation as part of case follow-up.
19. Observe & interpret the prognosis of a case.
20. Discuss Boenninghaussen's concept of grand generalisation.
21. Justify homeopathy as a holistic system of medicine.
22. Construct the prescriptive portrait of a case.
23. Decide on the suitability of a second prescription.
24. Correlate aetio-pathological focus with identification of miasms.
25. Identify context for palliation.
26. Co-relate the concept of Hahnemannian theory of suppression with horizontal and vertical suppression.
27. Correlate the theory of miasm with physiopathology defence mechanism.
28. Identify different symptoms of a case, & construct totality of symptoms.
29. Identify the nature & type of diseases
30. Plan the treatment according to the type of disease.

### Unit II: Concepts of Homeopathic Materia Medica.

1. List various Materia Medicas of Pre and Post Hahnemannian time.
2. List the methods of construction of Materia Medica. Enumerate the method of action of drugs.
3. Demonstrate the ability to apply Materia Medica in practical situation.
4. Explain the construction & essence of Puritan Materia medicas.
5. Demonstrate the ability to develop the drug picture and demonstrate the knowledge of the relative importance of the individual drug.
6. List different Types and different approaches of study of Hom Materia Medica.
7. List Scope and limitations of Homoeopathic Materia Medica and evolve solution to overcome the limitations.
8. To prove medicines which are partially proved in order to ascertain its true nature and qualities for the better implementation of similia.
9. To possess the knowledge of Natural and artificial diseases.
10. Health and physiological action of homoeopathic drugs.
11. Concept of Causation of diseases and their utility in understanding Homoeopathic

- Materia medica.
12. Concept of Drug proving and conduct drug proving of new or partially proved drugs.
  13. Detailed understanding of evolution of a personality in all the planes such as mental, physical, social and spiritual development.
  14. To ascertain the clinical efficacy of various homoeopathic drugs by clinical trails of partially proved drugs/ conduct the drug proving with new or partially proved drugs.
  15. Develop interdisciplinary approach for Materia Medica, Organon of Medicine and Repertory.

### **Unit III. Fundamentals of Homeopathic Repertory**

1. Trace evolution and development of repertory as a tool for prescription.
2. Discuss philosophy of repertory and repertorisation.
3. Describe logic of construction, structure and application of repertories.
4. Explore Hahnemann's concept of man in health and disease as reflected in various repertories.
5. Evolve constitutions though repertorisation.
6. Correlate symptom classification in the structure of repertories.
7. Classify rubrics vis-à-vis Hahnemann's classification of diseases.
8. Assess of miasmatic essence n the rubrics.
9. Demonstrate concepts of causation, generalisation and individualisation in the structure and application of repertory.
10. Synthesise rubrics to construct materia medica.
11. Synthesise rubrics to compare drugs.
12. Compare a drug through the media of different repertories.
13. Identify relationship of materia medica and repertory in various software programs.
14. Reflect on the case taken from the locus of repertory.
15. Express role of unprejudiced observation and documentation in the construction of repertories.
16. Demonstrate evidence based prescriptions through repertory as a reflection of unprejudiced observer.
17. Demonstrate the drug relationships within rubrics.
18. Reflect on symptom classification in repertory and its relevance for the study of materia medica.
19. Indicate weightage of remedies within the grade listed in rubrics.

### **Unit IV: Psychology and Health**

1. Illustrate holistic dimensions of bio psychosocial processes related to health and wellness.
2. Explain the advantages and limitations of biomedical model of health.
3. Discuss the implications of pathogenic model of health in Homeopathic management.
4. Discuss the implications of biological model of health in Homeopathic management.
5. Discuss the implications of holistic model of health in Homeopathic management.
6. Discuss the implications of holographic model of health in Homeopathic management.
7. Discuss the implications of relational model of health in Homeopathic management.
8. Document the contributions of Health Psychology as a discipline in health promotion.
9. Trace the historical phases in the evolution of mind-body relationship in healthcare.
10. Explore the impact of technology on healthcare.
11. Define health behaviour. Explore the role of behaviour in health promotion.
12. Discuss the role of behavioural factors in disease and disorders.
13. Discuss scope of health education and health behavior in homoeopathic practice
14. Justify role of homoeopathic physician as health educator.

**COURSE CONTENTS**  
**Specialty subjects**  
**M.D. (HOM.) ORGANON OF MEDICINE WITH HOMOEOPATHIC**  
**PHILOSOPHY**

**PURPOSE OF M.D. (HOMOEOPATHY) – HOMOEOPATHIC PHILOSOPHY:**

Specialization in Organon of Medicine and Homoeopathic Philosophy is to train the basic Homoeopathic graduate in the field of Organon as well as -Homoeopathic philosophy to better understanding of the system and to produce excellent professional thinkers, practitioners in Organon of medicine in order to incorporate highest standards

**POSTGRADUATE IN ORGANON AND HOMOEOPATHIC PHILOSOPHY SHALL:**

- A. Have the higher degree of proficiency both in theoretical and practical aspects of “Organon of Medicine” backed by scientific knowledge and philosophy of Homoeopathy.
- B. Have the in depth knowledge of principles and laws of Homoeopathy so as to facilitate optimal care within the scope of Homoeopathy.
- C. Have the ability to interpret the principles (taught by Hahnemann) in the text of developments in the health sciences on the present day.

**AIMS**

- a. To aspire a true rational healing art, which can treat the sick for the permanent Restoration of health.
- b. To employ unprejudiced reflection adopted to each morbid condition and to treat them by the Holistic principles and philosophy of Homoeopathy.
- c. To investigate what is to be cured in disease and to know what is curative in the various medicines in order to understand better the scope and limitations of Homoeopathy.
- d. Shall obtain the communicative and interpersonal skills to communicate and interact with health care teams.
- e. Shall adopt a scientific temper and unbiased approach to augment self-knowledge to improve the quality of treatment throughout the professional life.
- f. Shall be able to co ordinate the recent advances in science with his knowledge of Homoeopathy, so as to reflect better art of healing.
- g. To develop an open mind to update him by self-study attending courses conferences and seminars relevant to the specialty.

**GENERAL OBJECTIVES**

- a. To develop excellent teaching skills, different techniques and educational methods in teaching Homoeopathic students and practitioners.
- b. To practice medicine ethically and un injuriously and instep with principles of health care and the philosophy of Homoeopathy.
- c. To demonstrate empathy and holistic approach towards sick and exhibit interpersonal behavior in accordance with expectations of the society.
- d. To educate the people and promote preventive measures for common health problems by Homoeopathy in rapid gentle, permanent way.
- e. To play responsible role in implementation of the National health programmes.
- f. Undertake common health problems, use information technology and carry out research both basic and clinical with the objective of publishing his work and presenting of various scientific fora by which our fellow Homoeopaths can be benefited.
- g. To recognize the importance of Health as whole in an individual and necessary steps should be taken while practicing Homoeopathy.
- h. To prove medicines, which are partially proved in order to ascertain its true nature and qualities for the better implementation of similia.

**SKILLS:** Take proper history, depending on the basis of guidelines in Organon of Medicine, perform essential diagnostic procedures and order relevant tests and interpret them to come to a

reasonable diagnosis about the condition.

- a. Conduct interview with patients in order to ascertain totality on which a true similitum can be employed.
- b. Perform thorough physical, systemic examination, in order to elicit more symptoms, which may guide in the selection of remedy and potency.
- c. Document medical history, family history and findings of clinical investigations for the purpose of follow up and prognosis.
- d. Assess the state of health by the scientific knowledge of medicine and philosophy of Homoeopathy.
- e. Perform common therapeutic procedures.
- f. Develop experimental and recording skills in proving drugs.
- g. Provide basic life saving support services in emergency situations.
- h. Application of principles and practice of Homoeopathy in general and practice of medicine in particular.

**ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY  
SYLLABUS FOR M.D. [HOM] MAIN- PART I**

**A. GENERAL PHILOSOPHY**

1. Introductory analysis: Subject matter and scope – Question of Philosophy, the branches of Philosophy.
2. Universal Concept of life in general and human being in particular with special reference to Hahnemannian concept with all his related writings.
3. Part and whole relation- Organic view – philosophy of nature and philosophy of mind, Universal concept of mind.
4. Physical world different expression of physical world, its different components and their relationship.
5. Philosophy and the Science – Logic, metaphysics & theory of causation, Science & Inductive methods
6. Epistemology, Metaphysics, Materialism, Idealism, Empiricism, substantialism, Descartes' psycho-physical dualism, The existence of Intuition

**B. BASIC PSYCHOLOGY OF HUMAN BEING**

1. Introduction & definition of Psychology
2. Schools of Psychology & its concepts
3. Sensation
4. Attention
5. Perception
6. Intelligence
7. Learning
8. Memory
9. Emotion
10. Motivation
11. Thinking,
12. Personality
13. Mental Mechanisms
14. Stress

**C. ORGANON OF MEDICINE:**

- 1) Emergence of Homoeopathy & its establishment in the field of medicine
- 2) Critical study of different editions of Organon of Medicine
- 3) Differences between fifth and sixth editions of Organon of medicine.

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks each**

**ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY  
SYLLABUS FOR M.D. [HOM ]- MAIN  
PART II PAPER I**

**A. ORGANON OF MEDICINE:**

- 1) Emergence of Homoeopathy & its establishment in the field of medicine
- 2) Principles of Homoeopathy
- 3) Critical study of different editions of Organon of Medicine and sixth edition of organon

**B. CHRONIC MIASMS:**

- 1) Hahnemannian concept and comparative study of miasms with other authors.
- 2) Critical study of miasmatic theory in the light of modern science.

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks each**

**ORGANON OF MEDICINE AND HOMOEOPATHIC PHILOSOPHY  
SYLLABUS FOR M.D. [HOM] MAIN  
PART II PAPER II**

**HOMOEOPATHIC PHILOSOPHY**

1. Concept - Causation - effect
2. Dynamic concept of Health , Disease and Cure
3. Holistic concept and concept of Individualization
4. DISHARMONY- HARMONY through principles of Similia
5. Methods of framing portrait of disease
6. Application of philosophy in study of Homoeopathic Materia Medica, construction of Personality profile of a drug.
7. A comparative study of various philosophers with a view to bring out relative merit of the individual contribution to the Hahnemannian concept of philosophy.
8. Scope and limitations of Homoeopathic system of Medicine as understood today.
9. Concept of health and disease from primitive medicine to modern medicine, its evolution.
10. Concept of Health, in Homoeopathy the Holistic Approach.
11. Mind body and soul in the trinity of life
12. Hahnemann's concept of life, Universe and man in particular
13. Homoeopathic physician a preserver of health
14. Concept of Vital force, life principle.
15. Concept of Mental health (according to modern psychology, personality development, value system, Freud concept of Ed. Ego. Super ego. Ego defense mechanism. Stress and reactions.
16. Concept of Miasms
17. Concept of Disease potential
18. Concept of Indisposition.
19. Concept of drug potential.
20. Concept of cure at macro level and micro level and at energy level.
21. Concept of simple substance
22. Philosophical expositions of Kent, Hughes, Close, Roberts, Dudgeon, Dunham
23. Concept of susceptibility and reactions.
24. Drug proving, assessment of drug power and unique Homoeopathic methodology.
25. Concept of constitution and temperaments.
26. Nature's therapeutic law of cure.
27. Logic of homoeopathy in the light of modern medicine and its scientific nature.

**The above topics shall be studied according to the interpretations and views of J.T.Kent, H.A.Roberts, Stuart Close, Dunham C., Richard Hughes and J.H.Allen.**

**PATTERN OF QUESTION PAPER : 10 questions carrying 10 marks each**

**M.D. (HOM.) HOMOEOPATHIC MATERIA MEDICA  
[INCLUDING APPLIED ASPECTS.]**

**PURPOSE OF M.D. (HOM) HOMOEOPATHIC MATERIA MEDICA**

The purpose of this course is to train the basic homoeopathic graduates in the field of homoeopathic Materia Medica, to ensure a better health & to produce an excellent thinkers, research scholars & teachers in homoeopathy as well as to achieve highest standards in the field of Homoeopathy.

**A] POST GRADUATE IN HOMOEOPATHIC MATERIA MEDICA SHALL-**

1. Have the high degree of proficiency both in theoretical & practical aspect of Homoeopathic Materia Medica backed by scientific knowledge & Philosophy.
2. Have the confidence of manage the patients who are sick & in case of paucity of symptoms ability to overcome it by the knowledge of Materia Medica.
3. Have the caring attitude & sympathy towards the sick & maintain high moral & ethical standards.
4. Have the knowledge regarding latest happenings & issues pertaining to the preventive disease & promotion of health & the epidemiology underlying the common health problems with special relevance to India.

**AIMS:**

1. To recognize the Physical, Mental, Social & Spiritual health Care of the sick in the spirit of Organon of Medicine.
2. Shall obtain competency in providing complete health care (physical, Social, Mental, and Spiritual) to the needy, so as to achieve a permanent restoration of health in gentle manner as quoted in Organon of Medicine.
3. To investigate what is to be cured in disease & what is curative in various drugs in order to understand the scope & limitations of Homoeopathy.
4. Shall obtain Communicative & interpersonal skills to communicate & interact with health care teams.
5. Shall have a profound knowledge of Homoeopathic Materia Medica including rare & uncommon remedies in order to achieve restoration of health at any levels of sickness.
6. Shall adopt a scientific temper & unbiased approach to augment self knowledge to improve the quality of treatment through out his professional life.
7. Shall be able to co-ordinate the recent advances in science with his knowledge of homoeopathy, so as to reflect better art of healing.
8. To develop an open mind to update him by self-study, attending courses, conferences, & seminars relevant to the specialty.

**GENERAL OBJECTIVES:**

1. To develop high standards in approach & management of sick, in order to fulfill his only mission.
2. To develop excellent teaching skills, different techniques & educational Methods in teaching homoeopathic students & its practitioners.
3. To practice Medicine ethically & injudiciously & in step with principles of health care & the philosophy of Homoeopathy.
4. To demonstrate empathy & holistic approach towards sick & to exhibit interpersonal behavior in accordance with expectations of the society.
5. To play important role in implementing national health programme.
6. To educate the people & promote preventive measures for common health problems in homoeopathy, in order to achieve better health standards.
7. Under take common health problems, use information technology, & carry out research both basic & clinical with objective of publishing of his work & presenting of various scientific floras by which our fellow Homoeopathy can be benefited.
8. To prove medicines which are partially proved in order to ascertain its true nature & qualities for the better implementation of similia?

**M.D. (HOM.) HOMOEOPATHIC MATERIA MEDICA  
SYLLABUS FOR M.D. PART I-- MAIN**

**Basic Materia Medica**

- A. Sources of Materia Medica: Drug proving & collection of symptoms, classification of symptoms, construction of Materia Medica & types of material Medica.
- B. Science & Philosophy of Materia Medica
- C. To study pure effects of Homoeopathic Drugs from all the sources books & to interpret the same
- D. The elements involved in the application of Materia Medica, Homoeopathic Philosophy, Clinical Medicine, Homoeopathic Repertory & Materia Medica.
- E. Homoeopathic management of Iatrogenic Diseases.
- F. Study of Materia Medica: Different approaches of study of Materia Medica i.e. Psycho-Clinic-Pathological, Synthetic, Comparative, Analytical & Remedy Relationship.
- G. Scope & Limitations of Materia Medica.
- H. Sources of Drugs: Family or Group characteristics & Drug relationship.
- I. Introduction and study of materia Medica Pura, Herring Guiding symptoms, T.F. Allen's of Encyclopedia of HMM and Richards Hughes Encyclopedia of drug pathogenesis.
- J. To ascertain the clinical efficacy of various homoeopathic drugs by clinical trials of partial proved drugs/ conduct the drug proving with new or partially proved drugs.

To Study of the following drugs under the different headings namely, Psycho-Clinico-Pathological, Synthetic, Comparative, Analytical & Remedy Relationship; Sources of Drugs, Family or Group characteristics & Drug relationship and to know the pure effects of the Homoeopathic Drugs from all the sources books & to interpret the same

- |                            |                              |
|----------------------------|------------------------------|
| 1. Abies Canadensis        | 33. Ammonium.Brom            |
| 2. Abies Nigra             | 34. Amyl Nitrosum            |
| 3. Abrotanum               | 35. Anacardium Orien         |
| 4. Acalypha Indica         | 36. Antimmonium Crud         |
| 5. Acetanilidinum          | 37. Antimonium Ars           |
| 6. Acetic Acid             | 38. Antimonium Tart          |
| 7. Aconitum Nap            | 39. Apis Mel                 |
| 8. Actea Racemosa          | 40. Apium Graveolans         |
| 9. Actea Spicata           | 41. Apocyanum Can            |
| 10. AdonisVernalis         | 42. Aralia Racemosa          |
| 11. Adrenalin              | 43. Aranea Diadema           |
| 12. Aesculus hippocastanum | 44. Argentum Met             |
| 13. Aethusa Cyanapium      | 45. Argentum Nit             |
| 14. Agaricus Muscaricusa   | 46. Arnica Montana           |
| 15. Agnus Castus           | 47. Ars Sulph. Flav          |
| 16. Agraphis Nutans        | 48. Arsenicum Album          |
| 17. Aletris Farinosa       | 49. Arsenicum Bromatum       |
| 18. Alfalfa                | 50. Arsenicum Hydrogenisatum |
| 19. Alianthus Glandulosa   | 51. Arsenicum Iodatam        |
| 20. Allium Cepa            | 52. Artemesia Vulgaris       |
| 21. Allium Sativum         | 53. Arum Triphyllum          |
| 22. Aloes Socotrina        | 54. Asafoetida               |
| 23. Alstonia Scholaris     | 55. Asarum Europenum         |
| 24. Alumina Silicata       | 56. Asparagus Officinalis    |
| 25. Ambra Griesa           | 57. Aspidosperma             |
| 26. Ammomium Iod           | 58. Asteria Rubens           |
| 27. Ammonium Benz          | 59. Aurum Ars                |
| 28. Ammonium Carb          | 60. Aurum Iodatam            |
| 29. Ammonium Caust         | 61. Aurum Met                |
| 30. Ammonium Dorema        | 62. Aurum Mur. Natronatum    |
| 31. Ammonium Mur           | 63. Avena Sativa             |
| 32. Ammonium Phos          | 64. Bacillinum               |



- |                          |                          |
|--------------------------|--------------------------|
| 65. Badiaga              | 76. Blatta Orientalis    |
| 66. Baptisia Tinctoria   | 77. Borax                |
| 67. Baryta Acetica       | 78. Boricum Acidum       |
| 68. Baryta Carb          | 79. Bothrops Lanceolatus |
| 69. Baryta Iod           | 80. Bovista              |
| 70. Belladona            | 81. Brachyglottis        |
| 71. Bellis Perenis       | 82. Bromium              |
| 72. Benzenum Coal Naptha | 83. Bryonia Alb          |
| 73. Benzoicum Acid       | 84. Bufo Rana            |
| 74. Berberis Vulgaris    | 85. Butyric Acid         |
| 75. Bismuth              |                          |

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks each**

**SYLLABUS FOR HOMOEOPATHIC MATERIA MEDICA  
M.D. PART II- MAIN - PAPER- I**

To Study of the following drugs under the different headings namely, Psycho-Clinico-Pathological, Synthetic, Comparative, Analytical & Remedy Relationship; Sources of Drugs, Family or Group characteristics & Drug relationship and to know the pure effects of the Homoeopathic Drugs from all the sources books & to interpret the same.

- |                                |                                |
|--------------------------------|--------------------------------|
| 1. Cactus Grandiflorus         | 36. Chionanthus                |
| 2. Cadmium Sulph               | 37. Chloroform                 |
| 3. Caladium Seguinum           | 38. Chlorum                    |
| 4. Calcareo Arsenicosa         | 39. Cholesterinum              |
| 5. Calcareo carbonica          | 40. Chromicum Acidum           |
| 6. Calcareo Flourica           | 41. Chryso-robinum             |
| 7. Calcareo Phosphorica        | 42. Cimex-canthia              |
| 8. Calcareo Silicata           | 43. Cina                       |
| 9. Calcareo Sulphurica         | 44. Cinabaris Merc Sulph Rubor |
| 10. Calendula                  | 45. Cinchona Officinalis       |
| 11. Camphora                   | 46. Cineraria                  |
| 12. Canchalagua                | 47. Cinnamonum                 |
| 13. Cantharis                  | 48. Cistus Canadensis          |
| 14. Carbo-Animalis             | 49. Citrus Vulgaris            |
| 15. Carbo-Vegetabilis          | 50. Clematis                   |
| 16. Carbolicum Acidum          | 51. Cobaltum                   |
| 17. Carcinosis                 | 52. Coca                       |
| 18. Cardus Marinius            | 53. Cocaina                    |
| 19. Carlsbad                   | 54. Coccinella septumpunctata  |
| 20. Cascara Sagarda            | 55. Coccus Cacti               |
| 21. Cascarilla                 | 56. Colchicum Autuminale       |
| 22. Castanea Vesca             | 57. Collinsonia Canadensis     |
| 23. Caullophyllum              | 58. Colocynthis Cummunis       |
| 24. Causticum                  | 59. Comocledia Dentata         |
| 25. Cedron-simaruba feruginosa | 60. Condurango                 |
| 26. Ceonanthus                 | 61. Conium Maculatum           |
| 27. Chamomilla                 | 62. Convallaria Majalis        |
| 28. Chaparo Amargosa           | 63. Copaiva                    |
| 29. Chelidonium Majus          | 64. Corallium Rubrum           |
| 30. Chelon                     | 65. Cornus Circinata           |
| 31. Chenopodium Antehelminth   | 66. Cratageus Oxycantha        |
| 32. Chenopodium Glauciaphis    | 67. Crocus Sativa              |
| 33. Chimaphilla Umbellata      | 68. Croton Tiglinum            |
| 34. Chinninum Arsenicosum      | 69. Cubeba                     |
| 35. Chinninum Sulphuricum      | 70. Cuprum Aceticum            |

- |      |                           |      |                           |
|------|---------------------------|------|---------------------------|
| 71.  | Cuprum Arsenatum          | 122. | Hekla Lava                |
| 72.  | Curare                    | 123. | Helleborus Niger          |
| 73.  | Cyclamen                  | 124. | Heloderma                 |
| 74.  | Cypripedium               | 125. | Helonius Dioica           |
| 75.  | Daphne Indica             | 126. | Hepar sulphuris calcareum |
| 76.  | Digitalis                 | 127. | Hura Brazieliensis        |
| 77.  | Dioscorea Villosa         | 128. | Hydrangea                 |
| 78.  | Dipotherinum              | 129. | Hydrastis Canadensis      |
| 79.  | Dolichos Puriens          | 130. | Hydrocotyl Asiatica       |
| 80.  | Drosera Rotundifolia      | 131. | Hydrocyanic Acid          |
| 81.  | Duboisia                  | 132. | Hydrophobinum             |
| 82.  | Dulcamara                 | 133. | Hyocyamus                 |
| 83.  | Dysentrico                | 134. | Hypericum                 |
| 84.  | Ecalyptus Globus          | 135. | Iberis                    |
| 85.  | Echinacea rubdekia        | 136. | Ignatia                   |
| 86.  | Elaps Corallinus          | 137. | Indigo                    |
| 87.  | Elaterium Ecbalium        | 138. | Insulin                   |
| 88.  | Erigiron blept Canadensis | 139. | Iodoform                  |
| 89.  | Eugenia Jambos            | 140. | Ipecacuanha               |
| 90.  | Eunonymus Atropurea       | 141. | Iris Versicolor           |
| 91.  | Eupatorium Perfoliatum    | 142. | Jaborandi                 |
| 92.  | Eupatorium Pupureum       | 143. | Jalapa                    |
| 93.  | Euphorbinum               | 144. | Jatropa                   |
| 94.  | Euphorvia Lathyrus        | 145. | Justicia Adathoda Basaka  |
| 95.  | Euphrasia                 | 146. | Kali Arsenicosum          |
| 96.  | Eupion                    | 147. | Kali Bichromicum          |
| 97.  | Fagopyrum                 | 148. | Kali Bromatum             |
| 98.  | Fel Tauri                 | 149. | Kali Carbonicum           |
| 99.  | Ferrum Muriaticum         | 150. | Kali Chloricum            |
| 100. | Ferrum Arsenicum          | 151. | Kali Cyanatum             |
| 101. | Ferrum Iodatum            | 152. | Kali Hydroiodicum         |
| 102. | Ferrum Magneticum         | 153. | Kali Muriaticum           |
| 103. | Ferrum Met                | 154. | Kali Nitricum             |
| 104. | Ferrum Phosphoricum       | 155. | Kali Phosphoricum         |
| 105. | Ferrum Picricum           | 156. | Kali Sulphuricum          |
| 106. | Ficcus Religiosa          | 157. | Kalmia Latifolia          |
| 107. | Filix Mas (aspidium)      | 158. | Lac Caninum               |
| 108. | Formalin                  | 159. | Lac Defloratum            |
| 109. | Formica Rufa              | 160. | Lachesis                  |
| 110. | Fraxinus Americana        | 161. | Lacticum Acidum           |
| 111. | Gallicum Acidum           | 162. | Lapis Albus               |
| 112. | Gambogia                  | 163. | Lathyrus Sativus          |
| 113. | Gelsemium                 | 164. | Latroductus Mactans       |
| 114. | Ginseng                   | 165. | Laurocerasus              |
| 115. | Glonoine                  | 166. | Lecithin                  |
| 116. | Gnaphalium                | 167. | Ledum Pal                 |
| 117. | Granatum                  | 168. | Lemna Minor               |
| 118. | Gratiola                  | 169. | Lillium Tigrinum,         |
| 119. | Grindelia                 | 170. | Lobelia Inflata           |
| 120. | Guaiaicum                 | 171. | Lycopodium Clavatum       |
| 121. | Hammamelis Virginica      | 172. | Lycopus Virginicus        |

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks each**

**SYLLABUS FOR HOMOEOPATHIC MATERIA MEDICA MAIN  
M.D. PART II - PAPER-II**

To Study of the following drugs under the different headings namely, Psycho-Clinico-Pathological, Synthetic, Comparative, Analytical & Remedy Relationship; Sources of Drugs, Family or Group characteristics & Drug relationship and to know the pure effects of the Homoeopathic Drugs from all the sources books & to interpret the same.

- |                              |                             |
|------------------------------|-----------------------------|
| 1. Magnesium Carbonica       | 52. Picricum Acidum         |
| 2. Magnesium Muriaticum      | 53. Pilocarpus Microphylus  |
| 3. Magnesium Phosphorica     | 54. Piper Nigrum            |
| 4. Magnesium Sulphurica      | 55. Pituitary Gland         |
| 5. Malandrinum               | 56. Pix Liquida             |
| 6. Mancinella                | 57. Plantago Major          |
| 7. Manganum Aceticum         | 58. Platina                 |
| 8. Medorrhinum               | 59. Podophyllum Peltatum    |
| 9. Melilotus Alba            | 60. Pothos Foetidus         |
| 10. Mephitis                 | 61. Psorinum                |
| 11. Mercurius Corrosivus     | 62. Ptelea                  |
| 12. Mercurius Cyanatus       | 63. Pulsatilla              |
| 13. Mercurius Dulcis         | 64. Pyrogenum               |
| 14. Mercurius iodatus Flavus | 65. Quercus Glandi Spiritus |
| 15. Mercurius Iodatus Rubor  | 66. Radium                  |
| 16. Mercurius Solublis       | 67. Ranunculus Bulbosus     |
| 17. Millifolium              | 68. Ranunculus Scleratus    |
| 18. Morphinum                | 69. Raphanus                |
| 19. Murex                    | 70. Ratanhia                |
| 20. Mygale                   | 71. Rhododendron            |
| 21. Myristica Sabrifera      | 72. Rhus Aromatica          |
| 22. Naja Tripudans           | 73. Rhus Glabra             |
| 23. Naphthaline              | 74. Rhus Tox                |
| 24. Natrum Arsenicum         | 75. Rhus Venenata           |
| 25. Natrum Carbonicum        | 76. Robinia                 |
| 26. Natrum Muriaticum        | 77. Rosa Damascana          |
| 27. Natrum Phosphoricum      | 78. Rumex                   |
| 28. Natrum Sulphuricum       | 79. Ruta Graveolans         |
| 29. Niccolum                 | 80. Sabadilla               |
| 30. Nitric Acid              | 81. Sabal Serrulata         |
| 31. Nux Moschata             | 82. Sabina                  |
| 32. Nux Vomica               | 83. Saccharum Officinale    |
| 33. Occimum Canum            | 84. Salicylicum Acidum      |
| 34. Oenanthe Crocata         | 85. Sanicula                |
| 35. Oleander                 | 86. Sarasaparilla           |
| 36. Oleum Animale            | 87. Secale Cornatum         |
| 37. Onosmodium               | 88. Selenium                |
| 38. Oophorinum               | 89. Senecio Aureus          |
| 39. Ornithogalum Umbellatum  | 90. Senega                  |
| 40. Oxalic Acid              | 91. Senna                   |
| 41. Paeonia Officinalis      | 92. Sepia                   |
| 42. Palladium                | 93. Serum Ang Icthyotoxin   |
| 43. Pariera Brava            | 94. Silicea                 |
| 44. Paris Quadrifolia        | 95. Solanum Lycopersicum    |
| 45. Passiflora Incarnata     | 96. Solidago Virgo          |
| 46. Pertussin                | 97. Spartium Scoparum       |
| 47. Petroleum                | 98. Spigelia                |
| 48. Phellandrinum            | 99. Spongia Tosta           |
| 49. Phosphorus               | 100. Sticta Pulmonalis      |
| 50. Physostigma              | 101. Strontia Carb          |
| 51. Phytolacca Decandra      | 102. Strophanthus Hispidus  |

- |                               |                        |
|-------------------------------|------------------------|
| 103. Strychninum              | 127. Uranium Nitricum  |
| 104. Sulphur                  | 128. Urtica Urens      |
| 105. Sulphur Iodatum          | 129. Ustilago Maydis   |
| 106. Sulphuricum Acidum       | 130. Vaccinum          |
| 107. Symphytum                | 131. Valeriana         |
| 108. Syphilinum               | 132. Vanadium          |
| 109. Syzygium Jambolanum      | 133. Variolinum        |
| 110. Tarantula Cubensis       | 134. Veratrum Album    |
| 111. Tarantula Hispanica      | 135. Veratrum Viride   |
| 112. Taraxacum                | 136. Verbascum         |
| 113. Tellurium                | 137. Vespa Crabro      |
| 114. Teribinthina             | 138. Viburnum Opulus   |
| 115. Teucrium Marum Varum     | 139. Vinca Minor       |
| 116. Thalassia Bursa Pastoris | 140. Viola Odorata     |
| 117. Thallium                 | 141. Viola Tricolor    |
| 118. Theridion                | 142. Vipera            |
| 119. Thiosinaminum            | 143. Viscum Album      |
| 120. Thuja Occidentalis       | 144. Wyethia           |
| 121. Thyroidinum              | 145. Xanthoxyllum      |
| 122. Trifolium Pratense       | 146. X-Ray             |
| 123. Trillium Pendulum        | 147. Yucca Filamentosa |
| 124. Trinitrotoluene          | 148. Zincum Met        |
| 125. Trombidium               | 149. Zincum Valerianum |
| 126. Tuberculinum Bovinum     | 150. Zingiber          |

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks each**

## **COURSE CONTENTS M.D. (HOM.) REPERTORY**

### **PURPOSE OF M.D. (HOMOEOPATHY)- REPERTORY:**

Specialization in Repertory is to train the basic Homoeopathic graduate in the field of repertory as well as – Homoeopathic Materia Medica to better understanding of the system and to produce excellent professional thinkers, Practitioners in field of Homoeopathy in order to incorporate highest standards.

### **A] POSTGRADUATE IN REPERTORY SHALL;**

1. Have the highest degree of proficiency both in theoretical and practical aspects of “Repertory” backed by scientific knowledge Materia Medica and philosophy of Homoeopathy.
2. Have the in-depth knowledge of principles and laws of Homoeopathy so as to facilitate optimal care within the scope of Homoeopathy.
3. Have the ability to interpret the principles (taught by Hahnemann). In the text of developments in the health science on the present day.

### **AIMS OF M.D.(HOMOEOPATHY)- REPERTORY**

- i. How to construct a Repertory of his own.
- ii. For Studying the Materia Medica through the repertory.
- iii. To understand the remedy relation ship
- iv. To improve the knowledge of case taking through the repertory.
- v. To know the value & intensity of symptom in drugs
- vi. To learn how to do the comparative study of the similar drugs through repertory.
- vii. To know how to make a quick prescription at bedside.
- viii. To evolve the drug portrait of important polychrests through the reportorial rubrics
- ix. To practically apply different repertories in treating the human beings who are suffering with various types of illnesses.
- x. To keep oneself abreast with latest software in repertory

### **GENERAL OBJECTIVES OF M.D. (HOMOEOPATHY) REPERTORY:**

- A. To develop excellent teaching skills, different techniques and educational method in teaching Homoeopathic students and practitioners.
- B. To practice medicine ethically and uninjuriously and instep with principles of healthcare and the Repertory.
- C. To demonstrate empathy and Holistic approach towards sick and exhibit inter personnel behavior in accordance with expectations of the society with the selection of most similar or similimum through different repertories. .
- D. TO educate the people and promote preventive measures for common health problem by Homoeopathy in rapid gentle & permanent way.
- E. To play responsible role in implementation of the national health programs.
- F. To undertake the common health problems, use information technology and carry out research both basic and clinical with the objective of publishing his work and presenting of various scientific flora by which our fellow Homoeopaths can be benefited.
- G. To recognize the importance of health of health as whole in individual and necessary steps should be taken while practicing.
- H. To prove medicines which are partially proved, in order to ascertain its true nature and qualities for the better implementation of similia.

### **SKILLS:**

- a. Take proper case taking history, depending on the basis of guidelines in Organon of medicine, perform essential diagnostic procedures and order relevant tests and

- interpret them to come to a reasonable diagnosis about the condition.
- b. Conduct interview with patients in order to ascertain totality on which a true similimum can be employed.
  - c. Perform thorough physical, systemic examination, in order to elicit more symptoms, which may guide in the selection of remedy and potency.
  - d. Document medical history, family history and findings of clinical investigations for the purpose of follow up and prognosis.
  - e. Access the state of health by scientific knowledge of medicine and philosophy of Homoeopathy.
  - f. Perform common therapeutic procedures.
  - g. Develop experimental & recording skills in proving drugs.
  - h. Provide basic life saving support services in emergency situations.
  - i. Application of principles and practice of Homoeopathy in general and practice of medicine in particular.

#### **HUMAN VALUES, ETHICAL PRACTICE AND COMMUNICATION ABILITIES:**

- Adopt ethical principles in all aspects of his/ her practice.
- Professional honesty and integrity are to be fostered.
- Care is to be delivered irrespective of the social status, caste, creed or religion of the patient.
- Develop communication skills, in particular the skill to explain regarding the disease, its prognosis and appropriate treatment with homoeopathy.
- Provide leadership and get the best out of his team in a congenial working atmosphere.
- Apply high moral and ethical standards while carrying out human or animal research.
- Be humble, and accept the limitations in his knowledge and skill and to ask for help from colleagues and guide when needed.
- Respect patient's rights and privileges including patient's right to information and right to seek a second opinion.

#### **SYLLABUS FOR M.D. [HOM] REPERTORY M.D. PART - I [MAIN]**

1. Knowledge of disease.
2. Hahnemannian concept of disease.
3. Detailed case taking for Homoeopathic point of view for various types of illness aph: 83-104. Different authors view on case taking.
4. Symptomatology: Definition, source, different varieties of symptoms, their interrelation and meaning with each other and value in analysis. Miasmatic understanding of symptoms and applying this knowledge to analysis of the case from different perspectives.
5. Synthesis of Rubric.
6. Analysis of symptoms and different approaches Kent's classification of symptoms.
7. Hahnemannian concept of totality of symptoms compared with Boeninghausen, J.T Kent and Boger, Close, Grath Boericke.
8. Evaluation of symptoms and different approaches.
9. Analysis and synthesis if case.
10. Difficulties in taking Chronic Case.
11. Record keeping and its importance.
12. Terminology: Meaning of different technical terms in studying repertory as rubric, sub-rubric, cross reference, similar rubric, gradation, elimination, generalization, particularization etc.
13. Purpose of repertory.
14. Pre requisite knowledge for the use of repertory.
15. Principles of repertorization.
16. Steps to repertorization.
17. Study of various methods and techniques of repertorization.
18. Scope and limitation of the use of repertory.
19. Repertory and its relation to Materia Medica and Philosophy.
20. Methods of using various repertories for various types of illness.
21. Cross repertorization.

22. Reportorial Totality and Potential Differential Field.
23. Historical and critical study of evolution of repertory in the homoeopathic practice.
24. Classification of Repertories.

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks each**

**SYLLABUS FOR M.D. [HOM] REPERTORY  
M.D. PART - II [MAIN]  
PAPER-I**

Study of the below repertories from different angles. So that comprehensive knowledge can be achieved

- [a] Introduction including source and origin of repertory, about writer, developments and edition subsequently,
  - [b] philosophical back ground and fundaments
  - [c] Plan and construction
  - [d] Adaptability
  - [e] scope and limitations,
  - [f] Detailed study chapter wise and
  - [g] Interpretation of rubrics.
1. Detailed study of repertory of Anti Psoric.
  2. Boeninghausen therapeutic Pocket Book. Its philosophical background, ground plan, uses and limitations.
  3. Kent repertory, its philosophical background, ground plan, use and limitations.
  4. Detailed study of Complete Repertory.
  5. Boger's Synoptic key its ground plan, scope and limitation.
  6. Boger's times of remedies and moon phases.
  7. Lippe's Repertory its philosophical background, ground plan, use and limitations
  8. Detailed study of Kunzil's Repertory and its Scope and limitations
  9. Clarke's clinical repertory its ground plan, Scope and Limitations
  10. Bells Diarrhea, clinical repertory its ground plan, Scope and Limitations
  11. Allen's Intermittent fever clinical repertory its ground plan, Scope and Limitations
  12. Intermittent fever by W.A. Allen
  13. Berkeley's repertory of Nosodes its ground plan, Scope and Limitations
  14. Materia Medica of Nosodes with repertory by O.A. Julian.
  15. Detailed study of Card Repertory: Introduction, evolution, classification, working methods, Scope and limitations of card repertory. Detailed study of different card repertories like Kishore card repertory, Sharma cards repertory etc.,
  16. Detailed study of Repertory of Cough and Expectoration by Lee and Clarke.
  17. Roberts Rheumatic remedies its ground plan, Scope and Limitations
  18. Repertory of symptoms of Rheumatism and Sciatica by Pulford.
  19. Detailed study of Repertory of Desires and aversion by Guernsey
  20. Detailed study of Knerr repertory its ground plan, scope and limitations.
  21. Gentry's Concordance Repertory its ground plan, scope and limitations.
  22. Detailed study of Allen Symptom register

**PATTERN OF QUESTION PAPER : 10 questions carrying 10 marks each**

**SYLLABUS FOR M.D. [HOM] REPERTORY  
M.D. PART - II [MAIN]  
PAPER - II**

Study of the below repertories from different angles. So that comprehensive knowledge can be achieved under

- [a] introduction including source and origin of repertory, about writer, developments and edition subsequently,

- [b] philosophical back ground and fundaments
- [c] Plan and construction
- [d] adaptability
- [e] scope and limitations,
- [f] Detailed study chapter wise and
- [g] Interpretation of rubrics.

1. Boeninghausen Characteristics and Repertory corrected and translated by C.M.Boger, its philosophical background, ground plan, use and limitations.
2. Synthetic Repertory its philosophical background, ground plan, use and limitations.
3. Synthesis repertory its philosophical background, ground plan, use and limitations.
4. Boerricke's clinical repertory its ground plan, Scope and Limitations
5. Murphy's repertory its ground plan, Scope and Limitations
6. Phoenix repertory its ground plan, Scope and Limitations
7. Detailed study of Herring's analytical Repertory of Mind
8. A repertory of Drug pathogenesis by Richard Hughes.
9. Regional and clinical Repertories like Berridge's eye, its ground plan, Scope and Limitations
10. A detailed study of Sensation as if by Roberts and Ward,
11. Minton's Uterus, its ground plan, Scope and Limitations
12. Respiratory organs by Nash, its ground plan, Scope and Limitations
13. Repertory of Respiratory system by Wondenberg, its ground plan, Scope and Limitations
14. A study of Thematic Repertory.
15. Pathak's repertory its ground plan, use and limitations.
16. A study of Miasmatic Repertory by R.P. Patel.
17. A study of Dougle's skin Repertory
18. A study of Essential Synthesis Repertory
19. Different revised and corrected Editions of Kent like Srivastav, R.P.Patel
20. Mechanical Aided Repertories Like Auto Visual repertory..,
21. Computers and its importance in Homoeopathic Repertories. Soft wares: Hompath, Radar, similimum, ISIS, Mercurius, etc., Comparative study of different software, History, evolution, merits and demirt.

**PATTERN OF QUESTION PAPER: 10 questions carrying 10 marks e**

### **COURSE CONTENTS M.D. (Hom.) IN HOMOEOPATHIC PHARMACY**

**Purpose of M.D (Hom.) - Homoeopathic pharmacy Course:**

Specialization in pharmacy course is to train the basic homoeopathic graduate in the field of pharmacy to adopt the principles of homoeopathy regarding recent advanced techniques in the field of Homoeopathic pharmacy which enables them to fit in the present competitive world and to make them better teachers in the field of pharmacy to incorporate highest standards.

**A post graduate in Homoeopathic pharmacy shall:**

1. Recognize the prescriptive needs of the homoeopathic practitioner and offer pharmaceutical services confining with the principles of Homoeopathy.
2. Master most of the competencies related to drug proving and potentization.
3. Apply basic supportive principles of the homoeopathic pharmacy like standardization, experimental pharmacology, study of posology etc., to a huge volume of possible extent.
4. Have the knowledge to ask for and interpret relevant procedures in dynamisation and provide necessary pharmacological or other assistance on the basis of results of such procedures.
5. Acquire basic skills in teaching of Homoeopathy professionals.



**AIMS:**

1. To portray the factual profiles with their interpretations to dovetail the concept developed with the practices that existed in different pharmacopoeias.
2. To develop an accurate and unbiased approach to augment self-knowledge in improving the quality of the medicine using the principles of dynamisation.
3. To embrace the legal and professional aspects to regulate the proper distribution of drugs and medicines.
4. To co-ordinate recent advances in science with his/ her knowledge of Homoeopathy pharmacy so as to reflect better art of healing.
5. To enhance the quality of medicine by the determination of alcohol content of the medicine, purification of the Medicine, method of chromatography and biochemical estimation of the medicine.

**GENERAL OBJECTIVES:**

1. To recognize the knowledge of covering general truth obtained and tested through scientific methods.
2. To ascertain the curative power of Drugs using the Homoeopathy principals.
3. To undertake audit, use information technology tools and carry out research with basic and clinical with the objective of publishing his/ her work and presenting of various scientific fora, by which our fellow Homoeopaths can be benefited.
4. To develop skills in using educational methods and different techniques applicable in teaching Homoeopathic students and its practitioners.
5. To deal with a specialized system of therapeutic art and science having specificity in its mode of preparations, administration and modus operandi.
6. To prepare each medicine, so that the whole of its active virtues shall be present in a form suitable for administration.
7. To accept a drug with its entity and totality without attempting to separate a drug into its specific constituents.
8. To demonstrate the power or capacity of an infinitesimal dose of high potency in the field of Homoeopathy.

**SKILLS**

The individual should learn the following skills by involving himself and participate

**Pharmacognosy**

- 1) Pharmacognostic study of organized drugs and unorganised drugs.
- 2) Estimation of moisture content of plant
- 3) Determination of extractive values of crude drug
- 4) Phytochemical screening of drugs, with ethanol and water extracts
- 5) Modern Extraction Processes

**Pharmaceutical Analysis**

- 1) Identification and detection of impurities in the sample of Distilled water, Ethyl alcohol and Sugar of milk.
- 2) Quality control tests for raw materials and finished products.
- 3) Chromatographic techniques
- 4) Spectroscopic methods

**Industrial Pharmacy**

- 1) The individual should actively participate in Preparation of Homoeopathic medicines with Decimal, Centesimal and Fifty millesimal scales. [20]
- 2) The individual should actively participate in Preparation of [20] Mother Tinctures,

- 3) Mother Solutions and [20] Triturations according to Hahnemannian methods
- 3) The individual should actively participate in Preparation of [10] Mother Tincture by Modern methods.
- 4) The individual should actively participate in Preparation of Globules, [10] Tablets and [20] Ointments

### **Experimental Pharmacology**

- 1) Experiments on Intact and isolated preparations
- 2) Toxicological studies.

**Drug Proving:** A detail Drug Proving/ Re-proving (CCH Protocol) of minimum 1 drug by each student

### **HERBARIUM**

50 from plant source  
10 from mineral source  
5 from animal source

## **COURSE CONTENT SYLLABUS FOR M.D. [HOM] HOMOEOPATHIC PHARMACY MAIN- PART-I**

### **1. Philosophy And Development Of Homoeopathic Pharmacy**

- A. Homoeopathic Law of Similars operates on the basis of principle of Individualization, Susceptibility- and Dynamization. Laws on which it operates are Law of Simple. Single and Minimum. Integrated knowledge of all the above laws and principles in pharmacy. How Dr. Hahnemann arrived at the conclusion of above laws and principles through his experience. Hahnemann instructions in Drug Preparation, Potentization and Proving. Instructions on administration of medicines and do's and don'ts while administering the medicine. His experience on potency i.e. Decimal and Millesimal, logic behind Potentization. Further development in Posology from the time of Hahnemann till today.
- B. Integration of above principles in Homoeopathic Pharmacy and Post-Hahnemannian Homoeopathic Pharmacy

### **2. Knowledge Of Drug Substance (Pharmacognosy and Pharmacology)**

Detailed study of all the medicinal substance available under following heads Source, Identification, Collection, Preparation, Potentization, Preservation, Prescription and Dispensing of Homoeopathic drugs

- 1. Basic Knowledge of allied sciences (Botony including Taxonomy and Phytochemistry, Chemistry and Zoology) for identification of drug substances.
- 2. Scope of pharmacy, Definition of Pharmacy, drug, food, poison and related sciences.
- 3. Scientific names, Common names, Synonyms, Hyponyms, Homonyms and Abbreviations of various Homoeopathic drugs. [200 plants]
- 4. Classification of drugs according to Kingdom, Phytochemical, Physiological, Toxicological and Specific Therapeutic wise.
- 5. Knowledge of pace, depth, intensity, Pharmacological action, & miasmatic action of important Homoeopathic Drugs.
- 6. Collection and preservation of Homoeopathic drugs according to kingdom.
- 7. Sources, classification, uses and standardization of vehicles.
- 8. An introduction to chemical constituents of drugs classification, covering carbohydrates, proteins, enzymes, lipids, volatile oils, phenetic compounds, alkaloids, glycosides
- 9. An introduction to biogenesis of primary and secondary plant manufacturing. He must

learn a detailed account of pharmaceutical apparatus involved in this area and their application in pharmacy and also must learn sterilization procedures and methods of standardization of Homeopathic medicines.

### 3. HOMOEOPATHIC DRUG PROVING

1. Hahnemannian Homoeopathic drug proving and its merits and demerits
2. Modern Human Pathogenetic Trials - Protocol and Methodology.
3. Publication of Authentic Materia medica and Repertory
4. Repeating and Clinical verification of Homoeopathic medicines.
5. Total knowledge of (1) Drug Substance (2) Proving Team (3) Recording System (4) Verification (6) Drug proving of 5 drugs of different sources (7) Repeating 5 proved drugs authentically under the Guidance of Guide.

### 4. HOMOEOPATHIC PHARMACEUTICS

1. Hahnemannian methods of preparation of drug.
2. Homoeopathic Potentisation – Hahnemannian and Post-Hahnemannian methods.
3. Scales of Potentisation.

### 5. HOMOEOPATHIC VEHICLES: Detailed study of vehicles including their purity tests. Solid vehicles, Liquid vehicles, Semi – solid vehicles.

### 6. EXTERNAL APPLICATION: External application and their role in homoeopathic pharmacy like ointments, liniments, lotions, and glyceroles.

## SYLLABUS FOR M.D. [HOM] HOMOEOPATHIC PHARMACY MAIN- PART-II PAPER-I

### 1. POSOLOGY:

1. Principles of Posology and Dispensing
2. Difference between Homoeopathic posology and posology of other systems of medicine.
3. Various kinds of dose and selection of dose and repetition of dose.
4. Principles and methods of dispensing of Homoeopathic Medicines including mixtures, pills, lotion, liniments, ointments, eye drops, ear drops, tablet triturate.
5. Mode of Administration-Instructions during administration of Homoeopathic Medicine.
6. Methods of prescribing Homoeopathic Medicine, Rules & Regulations.
7. Posology includes knowledge of principles, types of potencies and the level of action of the drug and detailed study of how homoeopathic medicine act in all the patients, and proves, at all the times in both the sexes and at anytime and age.
8. A Post Graduate student should know the duration of action of medicine from the available sources.

### 2. Knowledge Of Drug Substance (Pharmacognosy and Pharmacology) Detailed study of all the medicinal substance available under following heads Source, Identification, Collection, Preparation, Potentisation, Preservation, Prescription and Dispensing of Homoeopathic drugs

1. Basic Knowledge of allied sciences (Botany including Taxonomy and Phytochemistry, Chemistry and Zoology) for identification of drug substances.
2. Scope of pharmacy, Definition of Pharmacy, drug, food, poison.
3. Scientific names, Common names, Synonyms, Hyponyms, Homonyms and Abbreviations of various Homoeopathic drugs.
4. Classification of drugs according to Kingdom, Phytochemical, Physiological, Toxicological and Specific Therapeutic wise.
5. Knowledge of pace, depth, intensity, Pharmacological action, & miasmatic action of Important Homoeopathic Drugs.

6. Collection and preservation of Homoeopathic drugs according to kingdom.
7. Sources, classification, uses and standardization of vehicles.

### 3. HOMOEOPATHIC PHARMACOPOEIAS

1. Historical background and importance of various Homoeopathic pharmacopoeias
2. German Homoeopathic pharmacopoeia,
3. British Homoeopathic pharmacopoeia,
4. American Homoeopathic pharmacopoeia,
5. Homoeopathic pharmacopoeia of United States
6. French Homoeopathic pharmacopoeia etc.
7. A special reference to Homoeopathic Pharmacopoeia of India (Vol 1 to IX) and Bhattacharya's Homoeopathic Pharmacopoeia.

### 4. EXPERIMENTAL PHARMACOLOGY

1. Animal House Facility - Guidelines, Ethical requirements for drug studies on animals and human beings.
2. Physiological data on laboratory animals.
3. Composition of some physiological salt solutions
4. Toxicology studies.
5. Development of new drugs
6. Mechanism of drug action and factors modifying drug action
7. Absorption, distribution of Drugs Bio-transformation and excretion of Drugs
8. Bio-availability of drugs, Adverse Drug Reaction (ADR)
9. Animal behavioral models for Testing
10. Models for learning and memory processes
11. Experiments on Isolated and Intact preparations (in vivo studies)

## SYLLABUS FOR M.D. [HOM] HOMOEOPATHIC PHARMACY MAIN- PART-II PAPER-II

### 1. Drugs Laws And Legislation Related To Homoeopathic Pharmacy

1. A Detailed study of The drugs and cosmetic act 1940 (23 of 1940); and Rules 1945,
2. The prevention of illicit traffic in narcotic drugs and psychotropic substances act 1988 (46 of 1988)
3. The drugs control act 1950 (26 of 1950),
4. The drugs and magic remedies (objectionable advertisement) act 1954 (21 of 1954),
5. The medicinal and toilet preparation (excise duties) act 1955 (16 of 1955),
6. The poison act 1919 (12 of 1919),
7. The Homoeopathic Central Council act 1973 (59 of 1973);
8. The pharmacy act 1948 (8 of 1948)
9. Dangerous drug act.
10. A general idea about the rules and regulation made under the above said Central acts on the subject and concerned state acts and regulation and Pharmaceutical ethics.

### 2. INDUSTRIAL PHARMACY (PHARMACEUTICS) AND PHARMACEUTICAL MANAGEMENT

A student of Homoeopathic Pharmacy should have the basic knowledge of important aspects of Production Management, Finance Management, Material Management, Marketing Management, Human Resource Management, Drug Store Management and Costing & Pricing.

#### Pharmaceutical Analysis

Students should have theoretical as well as practical knowledge about the application of techniques and instrumentations for the quality analysis of raw material and finished products, like Column chromatography, TLC, Paper Chromatography, HPLC, HPTLC, and UV-Visible Spectrophotometry.

1. History of Homoeopathic Industry.
2. Administration: Principals of Industrial Management in relation of homoeopathic pharmaceuticals (drugs) (remedies) industry
  1. Introduction to forms of business originations
  2. Introduction on to concepts of management
    - a. Managerial work, function of management
    - b. Managerial planning, long term and short term plans
    - c. Management by objectives by result by exceptions
    - d. Decision making process
    - e. Management control systems
  3. Production Management
    - Goals & Organization
    - Plant locations
    - Factory building layout
    - Operating problem
    - Policies
    - Purchasing of raw material
    - Inventory control
  4. Marketing Management Distribution
    - Homoeopathic Pharmaceuticals (remedies) Market Consumer Profile
    - Physician Consumer profile
  5. Marketing Organization
    - Manufacturer - to wholesaler - to retailer
  6. Marketing Communication
  7. Media for Communication
    - Advertising & sale promotion methods
  8. Indian Homoeopathic product industry
    - Role in national economy and national health Export and import homoeopathic remedies
  9. Drug store management
    - a. Factor influencing the starting and running of a drug store
    - b. Different types & forms of drug stores
    - c. Financial requirements
    - d. Location of drug store
    - e. Store building, construction, furniture and fixture
    - f. Internal planning and Layout
    - g. Purchase and sales record,
  10. Sales promotion and advertisement,
  11. Accounting and correspondence,
    - Account ratio and their application books & accounts. Journals & ledgers, cash book, balance sheet, profit and loss accounts, principles of costing, Estimating elements of double entry Qualification of person, who is running store, Authority & issuing Licenses
  12. Metrology and calculations.
  13. Packing of pharmaceuticals.
  14. Milling and Size separation/grading of powders.
  15. Mixing and Homogenisation.
  16. Extraction process.
  17. Drying process.
  18. Sterilization process.
- 3. RECENT SCIENTIFIC ADVANCES IN HOMOEOPATHIC PHARMACY**
- 4. ASPECTS OF PHARMACY**
- 6. DIFFERENT LABORATORY METHODS IN HOMOEOPATHIC PHARMACY -**
  - Detailed study of
    1. Evaporation: Study of equipments used for evaporation

2. Distillation: Study of Distillation equipments used for simple, vacuum steam,
3. Crystallization: introduction, principles study of various operations Variable in vacuum & growth type crystallization
4. Filtration:- Theory of filtration, filtering Media, Filter aids, selection of filters, various types of filtrations
5. Sublimation: describe the evaporation of solids into vapours

## 7. PHARMACEUTICAL ANALYSIS

Students should have theoretical as well as practical knowledge about the application of techniques and instrumentations for the quality analysis of raw material and finished products, like Column chromatography, TLC, Paper Chromatography, HPLC, HPTLC, and UV-Visible Spectrophotometry.

## 8. Microscopic examination of the drugs:

Decimal scale

Centesimal scales [ if possible under compound microscope]

9. **Standardization of drugs and vehicles:** Through analytical methods and techniques: Biological, mechanical chemical, toxicological process and characteristics , Laboratory methods of drug study Medical and Non medical uses of drugs.
10. Relation ship of Homoeopathic pharmacy with homoeopathic Materia Medica Organon and national economy.

Detailed study of monographs (atleast 50 drugs)

Detailed study of H.P.L (Homoeopathic Pharmacopoeia Laboratory) & their functioning

Visit to any sophisticated National/ International Pharmaceutical industry.

ANNEXURE

List of Drugs for Pharmacological Study:

**PART I**

<p><b>COMPOSITAE</b></p> <p>Abrotanum Arnica Montana Calendula officinalis Cardus marianus Chamomilla Cina maritima Eupatorium perfoliatum Millifolium</p>	<p><b>RANUNCULACEAE</b></p> <p>Aconitum napellus Actea racemosa Helleborus niger Hydrastis Canadensis Pulsatilla nigericans Ranunculus bulbosus Staphysagria</p>	<p><b>LOGANIACEAE</b></p> <p>Gelsemium sempervirens Ignatia amara Nux vomica Spigelia anthelmia</p>
<p><b>SOLANACEAE</b></p> <p>Belladonna Dulcamara Hyosyamus niger Stramonium</p>	<p><b>UMBELLIFERAE</b></p> <p>Aethusa cynapium Conium maculatum Hydrocotyle asiatica</p>	<p><b>PAPAVERACEAE</b></p> <p>Cheledonium majus Opium Sanguinaria Canadensis</p>
<p><b>EUPHORBIACEAE</b></p> <p>Acalypha indica Croton tiglium Euphorbinum officinarum Viburnum opulus</p>	<p><b>APOCYNACEAE</b></p> <p>Apocynum cannabinum Vinca minor</p>	<p><b>CUCURBITACEAE</b></p> <p>Bryonia alba Cephalandra indica Colocynthis</p>
<p><b>ERICACEAE</b></p> <p>Kalmia latifolia Ledum palustre Rhododendron chrysanthum Podophyllum peltatum</p>	<p><b>BERBERIDACEAE</b></p> <p>Berberis aquifolium Berberis vulgaris Coulophyllum thalictroides</p>	<p><b>CONIFERAE</b></p> <p>Abies Canadensis Abies nigra Sabina Thuja occidentalis</p>
<p><b>LILIACEAE</b></p> <p>Allium cepa Allium sativum Aloe socotrina Lilium tigrinum Sabadilla</p>	<p><b>RUBIACEAE</b></p> <p>Cinchona officinalis Coffea cruda Ipecacuanha</p>	<p><b>LABIATAE</b></p> <p>Collinsonia Canadensis Ocimum sanctum Teucrium marum</p>

**PART II**

<b>CRUCIFERAE</b>	<b>ANACARDIACEAE</b>	<b>LYCOPODIACEAE</b>
Raphanus sativus Thlaspi bursa pastoris	Anacardium orientale Rhus toxicodendron	Lycopodium clavatum
<b>DROSERACEAE</b>	<b>HYPERICACEAE</b>	<b>HAMAMELACEAE</b>
Drosera rotundifolia	Hypericum perforatum	Hamamelis virginiana
<b>CACTACEAE</b>	<b>DIOSCOREACEAE</b>	<b>BORRAGINACEAE</b>
Cactus grandiflorus	Dioscoria villosa	Symphytum officinale
<b>EQUISETACEAE</b>	<b>IRIDACEAE</b>	<b>FUNGI</b>
Equisetum hyemale	Crocus sativus Iris tenax Iris versicolor	Agaricus muscarius Bovista lycoperdon Secale cornutum Ustilago maydis
<b>ARACEAE</b>	<b>ARISTOLOCHIACEAE</b>	<b>LOBELIACEAE</b>
Arum triphyllum Caladium sanguinum	Asarum europaeum	Lobelia inflata
<b>MYRISTICACEAE</b>	<b>POLYGALACEAE</b>	<b>POLYGONACEAE</b>
Nux moschata	Ratanhia peruviana Senega	Rheum officinale Rumex crispus
<b>RUTACEAE</b>	<b>SCROPHULARIACEAE</b>	<b>SMILACEAE</b>
Aegle folia  Ruta graveolens	Digitalis purpurea  Euphrasia officinalis	Trillium pendulum Sarasaparilla officinalis
<b>VALERIANACEAE</b>	<b>SAPINDECEAE</b>	<b>LEGUMINOSEAE</b>
Valeriana officinalis	Aesculus hippocastanum	Baptisia tinctoria
<b>CAPRIFOLIACEAE</b>	<b>MELANTHACEAE</b>	<b>PRIMULACEAE</b>
Sambucus niger	Veratrum album Veratrum viride	Cyclamen europaeum
<b>URTICACEAE</b>	<b>LAURACEAE</b>	
Cannabis indica Cannabis sativa Urtica urens	Camphora officinalis	



## **COURSE CONTENTS**

### **M.D. (Hom.) IN PRACTICE OF MEDICINE**

Purpose of M.D. (Homoeopathy) - Practice of Medicine:

The purpose of this course is to train the basic Homoeopathic graduate in the field of general medicine, & 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.

A Post Graduate in M.D. (Homoeopathy)- Practice of Medicine shall:

1. Have the efficiency to assess and manage the patients who are sick, and in cases of severe illness or crisis manage it till such time as hospitalization in critical care unit may be found.
2. Have high degree of proficiency both in theoretical practical aspects of "Practice of Medicine" and related disciplines backed by scientific knowledge and philosophy of Homoeopathy.
3. Have an intense and personal relationship with the patients and he should demonstrate humanistic qualities towards the patient.
4. Have to maintain objectivity, compassion and understand the patient's behavior however unpleasant, if required he should take help from family members, nurses and psychiatrists but should not lose temper with sick patients.
5. Have the knowledge regarding issues pertaining to the field of Preventive Medicine and the Epidemiology underlying the communicable and infectious diseases with special relevance to India.

#### **Aims**

1. To recognize the need of health care of the sick in the spirit of the Organon of Medicine.
2. Shall obtain competency in providing physical, mental and spiritual health to the needy, so as to achieve a permanent restoration of health (as quoted in Organ on of Medicine)
3. Shall obtain the communicative and interpersonal skills to communicate and interact with health care team.
4. Shall adopt scientific temper and unbiased approach to augment self-Knowledge, to improve the quality of treatment throughout the professional life.
5. To develop an open mind to update him by self- study, attending courses, conferences and seminars relevant to the specialty.
6. Shall be able to co-ordinate the recent advances in science with his knowledge of Homoeopathy so as to reflect better art of healing.

#### **GENERAL OBJECTIVES**

1. To recognize the importance of physical, mental, social, spiritual health and its adaptability in the context of health while practicing Homoeopathy.
2. To practice Medicine ethically and instep with principles of health care and the philosophy of Homeopathy.
3. To describe etiology, patho physiology, principles of diagnosis, miasmatic analysis, and management of common diseases in adults and children with the knowledge of Homeopathic principles and therapeutics.
4. To demonstrate empathy and holistic approach towards sick and exhibit interpersonal behavior in accordance with expectations of society.
5. To undertake common health problems, use information technology and carry out presenting of various scientific fora by which our fellow practitioners of Homoeopathy can be benefited.
6. To play responsible role in implementation of National health programme effectively.
7. To plan and advice preventive and promitive measures in the rehabilitation of the sick.
8. To develop skills in using educational methods and different techniques applicable in teaching Homoeopathic students and its practitioners.

## SKILLS:

1. Take a proper clinical history, examine the patient, perform essential diagnostic procedures and order relevant tests and interpret them to come to reasonable diagnosis about the condition.
2. Conduct interviews both in adults and children and of unconscious patients (with the help of attendants)
3. Perform thorough physical, systemic examination including gait, postures and behavior
4. Document medical history, family & findings of clinical Examinations and Investigations.
5. Assess the state of health by the scientific knowledge of medicine and philosophy of Homoeopathy.
6. Perform common therapeutic procedures.
7. Provide basic life saving support services in emergency situations.
8. Application of principles and practice of Homoeopathy in general and practice of medicine in particular.

## SYLLABUS FOR M.D. [HOM] PRACTICE OF MEDICINE- MAIN-PART-I

The following diseases should be studied so as to understand them, in relation to etiology and Pathogenesis, considering both Internal (fundamental cause i.e. PSORA, SYPHILIS, SYCOSIS) and External Cause (Exciting and Maintaining Cause), its Pathology, Clinical features, Investigations, diagnostic procedures in view of latest technology. Differential Diagnoses, Complications and their Homoeopathic management including miasmatic analysis, general management and therapeutics.

### 1. PRINCIPLES OF MEDICINE.

### 2. INFECTIOUS DISEASES (Viral, Bacterial, Helminthic and Protozoal).

1. General Considerations of Infections
2. Laboratory Diagnosis of Infections
3. Infections in the Immunocompromised Host
4. Hospital Acquired Infections/ Nosocomial Infections
5. Bacterial Infections
6. Staphylococcal Infections
7. Streptococcal Infections
8. Pneumococcal Infections
9. Meningococcal Infections
10. Gonococcal Infections
11. Typhoid Fever (Enteric Fever)
12. Bacillary Dysentery
13. Cholera
14. Haemophilus Influenza Infections
15. Plague and Other Yersinia Infections
16. Clostridia Infections
17. Diphtheria
18. Pertussis—Whooping Cough
19. Leptospirosis
20. Lyme Disease,
21. Rat Bite Fever, and Other Spirochete Infections
22. Brucellosis
23. Donovanosis
24. Actinomycosis and Nocardiosis
25. Rickettsia, Chlamydial and Mycoplasma Infections
26. Basic Considerations of Viral Diseases
27. Herpes Virus Infections

28. Human Papilloma Virus and Parvovirus Infections
29. Bird Flu and Swine Flu
30. Dengue
31. Ebola and Marburg Infections
32. Japanese Encephalitis
33. Rabies
34. Measles (Rubella)
35. Protozoal Diseases - Malaria - Amoebiasis and Giardiasis - Leishmaniasis, Toxoplasmosis, Trypanosomiasis, Trichomoniasis,
36. Helminthic Diseases - Ankylostomiasis, Ascariasis and Other Nematodal Infestations, Filariasis and Other Related Infestations Schistosomiasis/ Bilharziasis

### **3. IMMUNOLOGY**

### **4. GASTROENTEROLOGY & HEPATOBILIARY DISEASES**

1. Clinical Approach—Gastrointestinal Disorders
2. Investigations—Gastrointestinal Disorders
3. Endoscopy—Diagnostic and Therapeutic Utility
4. Diarrhea and Mal-absorption
5. Constipation—Diagnosis and Management
6. Gastrointestinal Bleeding
7. Esophageal Disorders
8. Diseases of the Stomach and Duodenum
9. Diseases of the Pancreas
10. Functional Gastrointestinal Disorders
11. Abdominal Tuberculosis
12. Inflammatory Bowel Disease
13. Gastrointestinal Symptoms in Systemic Disease
14. Diseases of Liver and Gall Bladder

### **5. METABOLISM & NUTRITION**

1. Basic Considerations of Metabolism
2. Inborn Errors of Carbohydrate Metabolism
3. Lipids and Lipoprotein Metabolism
4. Disorders of Purine and Pyrimidine Metabolism
5. Iron Metabolism and Iron Overload Syndrome
6. The Porphyrin's
7. Wilson's Disease
8. Lysosomal Storage Disorders
9. Amyloidosis
10. Disorders of Adipose Tissue and Obesity
11. Diabetes Mellitus
12. Gout
13. Basic Considerations of Nutrition
14. Assessment of Nutritional Status
15. Protein Energy Malnutrition
16. Water Soluble Vitamins
17. Fat Soluble Vitamins
18. Minerals, Trace Elements and Antioxidants
19. Food Allergy and Food Intolerance
20. Eating Disorders
21. Enteral and Parenteral Nutrition

### **6. RESPIRATORY DISORDERS**

1. Hemoptysis

2. URTI
3. Acute laryngo -tracheo bronchitis
4. Asthma
5. Pneumonias
6. Interstitial Lung Diseases
7. Tuberculosis
8. COPD
9. Pleural Diseases
10. Bronchiectasis
11. Bronchogenic Malignant Diseases
12. Infectious diseases including fungal Diseases.
13. Mediastinal diseases.

## **7. RADIOLOGY**

1. Conventional Radiology- Chest, Abdomen-KUB, cranial, osteological, Barium Swallow, Barium Meal, Barium Enema.
2. E.E.G.
3. 2 D - Echo
4. Color Doppler
5. Procedures Bronchoscopy Gastroscopy Oesophagoscopy Duodenoscopy Sigmoidoscopy Proctoscopy Endoscopy
6. Imaging Technology (Ultrasound, Computed Tomography, MRI Nuclear Imaging, and Positron Emission Tomography).

## **8. MEDICAL GENETICS**

1. Introduction to Medical Genetics
2. Mendel and Beyond
3. Clinical and Molecular Cytogenetics
4. Genetic Disorders
5. Inborn Errors of Metabolism
6. Molecular Genetics, Human Genome Project and Genomic Medicine
7. Gene Therapy
8. Genetic Counselling and Prenatal Diagnosis

### **SYLLABUS FOR M.D. [HOM] PRACTICE OF MEDICINE- MAIN-PART-II -PAPER-I**

The following disease should be studied so as to understand it, in relation to etiology and Pathogenesis, considering both Internal (fundamental cause i.e. PSORA, SYPHILIS, SYCOSIS) and External Cause (Exciting and Maintaining Cause), its Pathology, Clinical features, Investigations, diagnostic procedures in view of latest technology. Differential Diagnoses, Complications and its Homoeopathic management including miasmatic analysis, general management and therapeutics.

## **1. CARDIOVASCULAR DISORDERS**

1. Basic Considerations in Cardiology
2. Cardiovascular Diseases—A Clinical Approach
3. ECG, Echocardiography
4. Cardiac Imaging
5. Nuclear Cardiology
6. Cardiac Catheterization and Angiocardiology
7. Heart Failure & Management
8. Acute Rheumatic Fever
9. Valvular Heart Disease
10. Infective Endocarditis
11. Atherosclerosis

12. Ischemic Heart Disease
13. Acute Coronary Syndrome
14. Acute Myocardial Infarction
15. Hypertension & Management
16. Secondary Hypertension
17. Tachyarrhythmia's
18. Sudden Cardiac Death
19. Congenital Heart Disease
20. Heart in Systemic Disease
21. Disorders of Myocardium
22. Diseases of the Pericardium
23. Diseases of the Aorta
24. Vascular Disorders of the Extremities
25. Pregnancy and Heart Disease
26. C. F.
27. Cardiac arrest,
28. Shock
29. Pericardial Diseases

## **2. NEPHROLOGY**

1. Kidney—Structure and Functions
2. Kidney Disease—A Clinical Approach
3. Acute Kidney Injury
4. Chronic Kidney Disease
5. Primary Glomerular Diseases
6. Secondary Glomerular Diseases
7. Urinary Tract Infections
8. Nephrolithiasis and Urinary Tract Obstruction
9. Vascular Injury to Kidney
10. Polycystic Kidney Disease and Inherited Tubular Disorders
11. Tubulo Interstitial Diseases
12. Dialysis for Chronic Renal Failure
13. Renal Transplantation
14. Diseases of Bladder
15. Neoplasms of Kidneys

## **3. RHEUMATOLOGY - Diseases of Bones**

1. Arthritis
2. Osteoarthritis
3. Rheumatoid arthritis and other connective tissue disorders
4. SLE
5. Ankylosing Spondylitis
6. Lumbar and Cervical Spondylitis
7. Inflammatory Muscle Diseases
8. Rheumatic Manifestations of Systemic Diseases
9. Bone and Mineral Metabolism in Health and Disease
10. Investigations and Diagnosis of Bone Disorders
11. Rickets and Osteomalacia
12. Osteoporosis
13. Developmental Disorders of Bone
14. Miscellaneous Bone Disorders

## **4. PSYCHIATRY**

1. An Approach to the Psychiatric Patient
2. investigations of Psychiatric patient,
3. Psychosis,

4. Anxiety neurosis,
5. Phobic Disorders
6. Mood Disorders
7. Psychoneurosis,
8. Psychosomatic illness,
9. Mental deficiencies,
10. Sexual disorders,
11. Alcoholism, drug addiction,
12. Drug induced psychiatric disorder

## 5. CRITICAL CARE MEDICINE

1. Basic Considerations in Critical Care
2. Monitoring of Critically Ill Patients
3. Fluid and Electrolyte Balance in Health and Disease
4. Enteral and Parenteral Nutrition in Critically Ill Patients
5. Acute Respiratory Failure
6. Sepsis and Acute Respiratory Distress Syndrome
7. Mechanical Ventilation
8. Non-Invasive Ventilation
9. Hypotension and Shock
10. Cardiopulmonary Resuscitation
11. Brain Death and Support of the Brain-Dead Organ

### SYLLABUS FOR M.D. [HOM] PRACTICE OF MEDICINE- MAIN- PART-II ----PAPER-II

The following disease should be studied so as to understand it, in relation to etiology and Pathogenesis, considering both Internal (fundamental cause i.e. PSORA, SYPHILIS, SYCOSIS) and External Cause (Exciting and Maintaining Cause), its Pathology, Clinical features, Investigations, diagnostic procedures in view of latest technology. Differential Diagnoses, Complications and its Homoeopathic management including miasmatic analysis, general management and therapeutics.

## 1. NEUROLOGY

1. Basic Considerations in Neurology
2. A Clinical Approach
3. Clinical Neurophysiology
4. Neuroimaging
5. Disorders of Speech
6. Disorders of Cranial Nerves
7. Cerebro-vascular Accidents
8. Epilepsy
9. Headaches
10. Bacterial Meningitis and Brain Abscess
11. Neurotuberculosis
12. Neurosyphilis
13. Acute Viral Infections of Central Nervous System
14. Fungal and Parasitic Diseases of Nervous System
15. Raised Intra-Cranial Pressure and Hydrocephalus
16. Extrapyrarnidal Disorders
17. Hyperkinetic Movement Disorders
18. Cerebellar Disorders
19. MND -Amyotrophic Lateral Sclerosis and Others
20. Demyelinating Diseases of Nervous System
21. Intra-Cranial Space Occupying Lesions
22. Ataxia
23. Hydrocephalus

24. Head Injury-coma
25. Myelopathies
26. Peripheral Neuropathy
27. Disorders of Autonomic Nervous System
28. Myasthenia Gravis
29. Diseases of Muscles
30. PIVD-Cervical, Lumbar
31. Cerebral Palsy
32. Dementia and Alzheimer's Disease

## **2. HEMATOLOGY**

1. Different Anemia's
2. Leukemia's
3. Lymphadenopathies
4. Splenomegaly
5. Lymphomas
6. Myelodysplastic Syndromes
7. Chronic Lymphocytic Leukemia
8. Lymphoid Neoplasms
9. Bleeding Disorders
10. Platelet Disorders
11. Disorders of Coagulation
12. Hypercoagulable Disorders
13. Transfusion Medicine
14. Hematopoietic Stem Cell Transplantation

## **3. ENDOCRINOLOGY**

1. Pituitary disorders
2. Thyroid disorders
3. Parathyroid disorders
4. Adrenal disorders
5. Disorders of Puberty
6. Disorders of Growth and Development
7. Disorders of Gonads

## **5. DERMATOLOGY**

1. Introduction and Principles of Diagnosis in Dermatology
2. Cutaneous Infections
3. Eczemas
4. Abnormal Vascular Responses
5. Autoimmune Bullous Disorders
6. Drug Reactions
7. Papulosquamous Disorders
8. Autoimmune Bullous Disorders
9. Disorders of Pigmentation
10. Cutaneous Responses to Physical Factors
11. Skin in Systemic Diseases
12. Sexually Transmitted Infections

## **6. ONCOLOGY**

1. Basic Considerations of Oncology
2. Principles of Cancer Biology and Pathology
3. Cancer Screening and Prevention
4. Principles of Drug Treatment of Cancer
5. Principles of Radiotherapy

6. Head and Neck Cancers
7. Breast Cancer
8. Tracheobronchial and Lung Cancers
9. Tumors of the Gastrointestinal Tract (Stomach and Esophagus)
10. Colorectal Cancer
11. Genitourinary Cancers
12. Gynecological Malignancies
13. Soft Tissue Sarcomas
14. Cancer of Unknown Primary Site
15. Para-neoplastic Syndromes
16. Oncological Emergencies
17. Supportive Care in Cancer

**7. ENVIRONMENTAL MEDICINE**

1. Basic Considerations of Environmental and Occupational Diseases
2. Climate Change—Health and Disease
3. Environmental Pollution
4. Air-Borne Pollutants and Smoke-Related Hazards
5. Drowning, Near-Drowning and Submersion Injury
6. Electric Shock and Lightning Injury
7. Effects of Extremes of Temperature
8. High Altitude Medicine
9. Aviation Medicine
10. Radiation Hazards
11. Environmental Disasters

**8. GERIATRICS AILMENTS** appropriate treatment with Homoeopathy.



## **COURSE CONTENTS M.D. (Hom.) IN PEDIATRICS**

### **PURPOSE OF MD (HOMOEOPATHY) - PEDIATRICS COURSE:**

Pediatrics course is to train the basic Homoeopathic graduate in the field of Pediatrics to adapt the principles of Homoeopathy while treating sick children, preventing sickness in children and ensuring a healthy child among children in the society and to produce excellent, professional thinkers, researchers and teachers in Homoeopathy with special emphasis in the field of Medicine.

The Homoeopathic Pediatrician shall have:

1. The knowledge to assess the health status of the children coming under his/ her care with background of principles of Pediatrics and philosophy of Homoeopathy.
2. The knowledge to provide therapeutic assistance to sick children under his/ her care, counsel the parents regarding prevention of sickness and generate awareness in the society for healthy living style for children.
3. The knowledge to co-ordinate with and guide the nursing staff in a hospital for arranging appropriate nursing procedure whenever a child under Homoeopathic therapy is hospitalized.
4. The knowledge to ask for and interpret relevant diagnostic tests and provides necessary therapeutic or other assistance on the basis of results of such procedures.
5. The confidence to assess and manage children in a state of medical crisis by using ancillary measures till such time as hospitalization in Critical Care Unit may be found.

### **AIMS**

1. Recognize the health care needs of the children in the society in the spirit of Homeopathic principles.
2. Shall obtain competencies in the field of providing health care to children, so as to achieve a restoration of health.
3. Shall understand the importance of the preventive health care to maintain child health of the society.
4. Shall adapt a scientific temper and unbiased approach to augment' self knowledge to improve the quality of treatment throughout the professional life.
5. Shall develop an open and accommodating attitude to adapt the latest bio-medical discoveries for the improved quality of therapy
6. Shall develop holistic attitude to correlate the results of bio-medical research with the potential in homoeopathic medicines to project a comprehensive homoeopathic practice.

### **GENERAL OBJECTIVES**

At the end of postgraduate training in MD (Homoeopathy) - Pediatrics, the student shall be able to:

1. Recognize the importance of pediatrics in the context of health care needs of the community and its adaptability in the practice of homoeopathy.
2. Practice pediatrics ethically and in step with the principles of primary health care and the philosophy of homoeopathy.
3. Demonstrate sufficient understanding of basic sciences relevant to pediatrics
4. Identify social, economic, environmental, biological, emotional and miasmatic therapeutic, rehabilitative, preventive and promotive measures/ strategies.
5. Plan and advice measures for the prevention and rehabilitation of children suffering from disease and disability.
6. Demonstrate skills in documentation of individual case details as well as morbidity and mortality data relevant to the assigned situation.
7. Demonstrate empathy and human approach towards children and their family and exhibit interpersonal behavior in accordance with the societal norms and expectations.
8. Play the assigned role in the implementation of national health programs, effectively

- and with responsibility.
9. Organize and supervise the chosen! hospital or the field situation
  10. Develop skill as a self- directed learner recognizes continuing educational needs; select and use appropriate learning resources.
  11. Demonstrate competence in basic concepts of research methodology and epidemiology with a special reference to qualitative research, and be able to critically analyze relevant published research literature.
  12. Develop skills in using educational methods and techniques as applicable to the teaching of homoeopathic students, homoeopathic general practitioners and paramedical health workers
  13. Functions as an effective leader of a health team engaged in health care, research or training.

## **SKILLS**

### **Procedures:**

Clinical history and physical examination including Anthropometry Human lactation management, Pediatric resuscitation, Nebulization, Inhaler therapy, Oxygen delivery, Infant feeding/ Ryle's tube, Stomach wash, Urinary, ORS & ORT, Nutritional advice , Use of repertories, Internet search

### **Interpretation:**

Clinical history and physical examination, Blood, Urine, Stool, CSF and Fluid investigation, Biochemistry, Abdominal X-ray, Chest X-ray, Bone and joint X-ray. E.C.G., USG, CT, MRI.

### **Communication:**

Clinical history and physical examination, Communicating health and disease, Communicating method of administering homoeopathic medicines, Communicating possible homoeopathic aggravation and allaying parents' anxiety, Communicating about a seriously ill or mentally abnormal child, Communicating death, Empathy with a family, Referral letters' replies, Discharge summaries, Death certificate, Lectures, bed-side clinics, discussions, Computer usage -word and power point, E-mail

## **COURSE CONTENTS SYLLABUS FOR M.D. [HOM] PAEDIATRICS MAIN- PART-I GENERAL PAEDIATRICS**

1. Overview of child health, scope of homoeopathy in treating the diseases in children
2. Ethical issues in pediatrics
3. Psycho-social issues in children
4. Normal child, portraits of child constitutions in materia medica.

### **1. GROWTH & DEVELOPMENT OF A CHILD**

1. Introduction
2. Factors Affecting Growth and Development
3. Assessment of Normal Growth
4. Charts, Growth Standard
5. Eruption of teeth
6. Assessment of bone age
7. Evaluation Behavioral Development
8. Relevance of miasmatic influences during the development of children & its homoeopathic therapeutics
9. Developmental Delay

## **2. DISORDERS OF GROWTH & DEVELOPMENT**

1. Short stature
2. Failure to thrive
3. Development of Behavior
4. Pre- school behavior
5. Maladjustment of Children
6. Poor school achiever's
7. ADHD
8. Autistic spectrum disorders

## **3. NUTRITION-**

1. Protein Energy Malnutrition
2. Water Soluble Vitamins and their deficiencies
3. Fat Soluble Vitamins and their deficiencies
4. Micronutrients
5. Food Allergy and Food Intolerance
6. Eating Disorders
7. Enteral and Parenteral Nutrition
8. Inborn errors of metabolism

## **4. INFECTIOUS DISEASES (viral, Bacterial, Protozoal, Helminthic etc.)**

1. Fevers
2. PUO
3. Chicken Pox
4. Typhoid Fever (Enteric Fever)
5. Bacillary Dysentery
6. Cholera
7. Haemophilus Influenza Infections
8. Plague and Other Yersinia Infections
9. Diphtheria
10. Pertussis—Whooping Cough
11. Herpes Virus Infections
12. Human Papilloma Virus and Parvovirus Infections
13. Bird Flu and Swine Flu
14. Dengue
15. Ebola and Marburg Infections
16. Japanese Encephalitis
17. Rabies
18. Measles (Rubella)
19. Protozoal Diseases - Malaria - Amoebiasis and Giardiasis - Leishmaniasis, Toxoplasmosis, Trypanosomiasis, Trichomoniasis
20. Helminthic Diseases - Ankylostomiasis, Ascariasis and Other Nematodal Infestations, Filariasis and Other Related Infestations Schistosomiasis/ Bilharziasis

## **5. ENDOCRINOLOGY**

1. Pituitary disorders-
2. Thyroid disorders
3. Parathyroid disorders
4. Adrenal disorders
5. Disorders of Puberty
6. Disorders of Growth and Development
7. Disorders of Gonads
8. Precocious puberty
9. Delayed Puberty
10. Disorders of Parathyroid glands

## **6. Fluid and Electrolytes**

1. Body Fluids and their regulation
2. Patho-physiology of body fluids,
3. Dyselectrolytaemias fluid
4. Fluid and Electrolyte therapy
5. Relevance of biochemic therapy
6. Fluid therapy in special situations.

## **7. Dermatology**

1. Introduction and Principles of Diagnosis in Dermatology
2. Cutaneous Infections
3. Eczemas/ Dermatitis
4. Fungal Diseases
5. Viral infections
6. Parasitic infections
7. Acne
8. Alopecia areata
9. Urticaria
10. Drug Reactions
11. Papulosquamous Disorders
12. Bullous Disorders
13. Disorders of Pigmentation
14. Skin in Systemic Diseases

### **SYLLABUS FOR M.D. [HOM] PAEDIATRICS MAIN-PART-II PAPER-I SYSTEMIC PAEDIATRICS**

#### **1. COLLAGEN VASCULAR DISEASES**

1. Diagnosis of arthritis
2. JRA
3. SLE
4. Scleroderma
5. Mixed Connective Diseases

#### **2. ENVIRONMENTAL DISEASES & THEIR HOMOEOPATHIC THERAPEUTICS**

#### **3. NEPHROLOGY**

1. Congenital Disorders
2. Kidney—Structure and Functions
3. Kidney Disease—A Clinical Approach
4. Diagnostic Evaluation
5. Hematuria
6. Proteinuria
7. Acute Kidney Injury
8. Chronic Kidney Disease
9. Primary Glomerular Diseases
10. Secondary Glomerular Diseases
11. Urinary Tract Infections
12. Nephrolithiasis and Urinary Tract Obstruction
13. Vascular Injury to Kidney
14. Polycystic Kidney Disease and Inherited Tubular Disorders
15. Tubulo Interstitial Diseases
16. Renal Transplantation
17. Diseases of Bladder
18. Neoplasms of Kidneys

#### **4. NEUROLOGY**

1. Congenital Disorders
2. Basic Considerations in Neurology
3. A Clinical Approach
4. Clinical Neurophysiology
5. Neuroimaging
6. Disorders of Speech
7. Epilepsy
8. Febrile convulsions
9. Bacterial Meningitis and Brain Abscess
10. Acute Viral Infections of Central Nervous System
11. Fungal and Parasitic Diseases of Nervous System
12. Raised Intra-Cranial Pressure and Hydrocephalus
13. Gullian Bari Syndrome, Post infectious polyneuritis.
14. Mental Retardation
15. Cerebellar Disorders
16. Myopathies
17. Myasthenia gravis
18. Floppy infant
19. Neural tube defects
20. Peripheral neuropathies
21. Intra-Cranial Space Occupying Lesions
22. Head Injury -coma
23. Brain Tumors
24. Cerebral palsy
25. Ataxia
26. Hyperkinetic Disorders
27. & their homoeopathic therapeutics

#### **5. Genetic disorders & their homoeopathic therapeutics**

#### **6 Immunological disorders, immunization & homoeopathic therapeutics, prophylaxis**

#### **7. Diseases of neonates**

### **SYLLABUS FOR M.D. [HOM] PAEDIATRICS MAIN-PART-II PAPER-II**

#### **1. DIGESTIVE SYSTEM & THEIR HOMOEOPATHIC THERAPEUTICS**

1. Congenital Disorders
2. Diarrhoea and Malabsorption
3. Constipation—Diagnosis and Management
4. Gastrointestinal Bleeding
5. Vomiting
6. Abdominal pain
7. Celiac Disease
8. Milk Protein Intolerance
9. Disorders of bile
10. IBD
11. Hepatomegaly
12. Hepatitis
13. Acute liver failure
14. Chronic liver failure
15. GERD
16. Endoscopy
17. Congenital Disorders

## **2. DISEASES OF RESPIRATORY SYSTEM**

1. Congenital Disorders
2. Hemoptysis,
3. Common Respiratory Symptoms
4. Investigations
5. Acute laryngo -tracheo bronchitis
6. Asthma,
7. Pneumonias,
8. Tuberculosis
9. Pleurisy, plural effusion
10. Bronchiectasis
11. URTI
12. Cystic fibrosis
13. Bronchiolitis
14. Foreign Body Aspiration

## **3. DISEASES OF C. V. S.**

1. Congenital Disorders
2. Basic Considerations in Cardiology
3. Fetal Circulation
4. Cardiovascular Diseases—A Clinical Approach
5. Acute Rheumatic Fever
6. RHD
7. Infective Endocarditis
8. Hypertension in children & Management
9. Arrhythmias
10. Congenital Heart Disease
11. Diseases of the Pericardium
12. Diseases myocardium

## **4. HEMATOLOGY**

1. Congenital Disorders
2. Anemia's
3. leukemia's
4. Lymphadenopathies
5. splenomegaly
6. Lymphomas
7. Myelodysplastic Syndromes
8. Lymphoid Neoplasms
9. Bleeding Disorders
10. ITP
11. Platelet Disorders
12. Disorders of Coagulation
13. DIC
14. Hypercoagulable Disorders
15. Transfusion Medicine
16. Hematopoietic Stem Cell Transplantation

## **5. DISEASES OF EAR, NOSE, THROAT**

1. Congenital Disorders
2. Otitis media
3. CSOM
4. Otitis externa
5. Deafness
6. Mastoiditis

7. Sinusitis
8. Nasal block
9. Epistaxis
10. Rhinitis
11. Sore throat
12. Tonsillitis
13. Adenoids
14. Hoarse ness of voice
15. Strider
16. Tracheostomy
17. Diseases of Salivary Glands
18. Oral Cavity

## 6. OPTHALMOLOGY

1. Congenital Disorders
2. Conjunctive
3. Lachrymal gland
4. Cornea
5. Sclera
6. Pupil
7. Strabismus

## 7. CONGENITAL DISORDERS of CHILDREN

## 8. NEOPLASMS in CHILDREN

### COURSE CONTENTS M.D. (Hom.) IN PSYCHIATRY

#### PURPOSE OF M.D (Homoeopathy)-Psychiatry Course:

The purpose of this course is to train the basic Homoeopathic graduate in the field of psychiatry, and to treat the psychiatric ailments depending upon the principles & philosophy of Homoeopathy, & also train them in counseling and behavioral therapy to ensure healthy citizens in the present hectic and stressful conditions of the society.

#### The “Homoeopathic Psychiatrist” shall:

1. Have the confidence to assess and manage the patients with mental illness. And in cases of severe illness or crisis manage it till such time as hospitalization in critical care unit may be found.
2. Have high degree of proficiency both in the theoretical and practical aspects of psychiatry and related disciplines backed by scientific knowledge and philosophy of Homoeopathy.
3. Have the knowledge to ask for and interpret relevant diagnostic procedures and provide necessary therapeutic or other assistance on the basis of results of such procedures.
4. Have a caring attitude and sympathy towards the needy and maintain high moral and ethical standards.

#### Aims

1. To recognize the need of social health care of the mentally ill in the spirit of Organon of medicine.
2. Shall obtain competency in providing spiritual health to the needy so as to achieve a permanent restoration of health (as quoted in Organon of medicine).
3. Shall obtain the communicative and interpersonal skills to communicate and interact with health care team.

4. Shall adopt a scientific temper and unbiased approach to augment self-knowledge to improve the quality of treatment throughout the professional life.
5. To develop an open mind update himself by self-study attending courses, conferences and seminars relevant to the specialty.
6. Shall be able co-ordinate the recent advance in science with his knowledge of Homoeopathy so as to reflect better art of healing.

### General objectives

1. To recognize the importance of social, mental, spiritual health and its adaptability in the context of health while practicing Homoeopathy.
2. To practice psychiatry ethically and instep with principals of health care and the philosophy of Homoeopathy.
3. To describe etiology, patho-physiology, principles of diagnosis, miasmatic analysis and management of common psychiatric problems in adults and children with the knowledge of homoeopathic principles and therapeutics.
4. Under take audit, use information technology tools and carry out research both basic and clinical with the objective of publishing his work and presenting of various scientific flora by which our fellow Homoeopaths can be benefited.
5. To demonstrate empathy and “holistic” approach towards mentally ill and exhibit interpersonal behavior in accordance with expectations of society.
6. To play responsible role in implementation of National Health programmers effectively.
7. To plan and advice preventive & primitive measures in the rehabilitation of imbecile.

### Skills:

1. Take a proper clinical history, examine the patient perform essential diagnostic procedures and order relevant tests and interpret them to come to a reasonable diagnosis about the condition.
2. Conduct interviews both in adults and children and of uncooperative patients.
3. Perform mental state examination including that of uncooperative patients.
4. Document psychiatric history, family history and mental state examination.
5. Assess personality including administration and interpretation of projective tests.
6. Administer and interpret tests of Intelligence and neuropsychological functions.
7. Perform common therapeutic procedures.
8. Provide basic life saving support services (BLS) in emergency situations.
9. Application of principles and practice of Homoeopathy in general and psychiatry in particular.

## SYLLABUS FOR M.D (HOM) PSYCHIATRY

### PART- I

The following diseases should be studied so as to understand it, inrelation to etiology and Pathogenesis, considering both Internal(fundamental cause i.e. PSORA, SYPHILIS, SYCOSIS) and External Cause(Exciting and Maintaining Cause), its Pathology, Clinical features, Investigations, diagnostic procedures in view of latest technology, Differential Diagnoses, Complications, Ethical issues in psychiatry and its Homoeopathic management including miasmatic analysis, general management and therapeutics

#### 1. INTRODUCTION TO PSYCHIATRY

#### 2. HISTORICAL ASPECT RELEVANT TO THE STUDY OF MENTAL DISEASES:

##### A. Historical review of the Development of Psychiatry

Psychological foundations of Clinical psychiatry.

- a. A brief History of Psychiatry.
- b. Introduction to Psychology and Schools of Psychology.
- c. Theories of Personality and Psychopathology.
- d. Normality & Mental Health.



B. Hahnemann's contribution to the understanding of Mental Disorders.

**3. NEURAL SCIENCES (THE BRAIN AND BEHAVIOR).**

- a. Neuroanatomy, Neurophysiology and Neurochemistry.
- b. Psychoneuroendocrinology.
- c. Immune system and Central Nervous system Interactions.
- d. Neurogenetics.
- e. Chronobiology.

**4. CLASSIFICATION OF PSYCHIATRIC DISORDERS.**

**5. APPLIED ASPECT OF PSYCHOLOGICAL PROCESSES.**

Sensation, Perception, Attention, Motivation, Emotions, Intelligence, Learning, Memory and Personality- Study of Disorders in each of them.

**6. ETIO-PATHOGENESIS OF PSYCHIATRIC DISORDERS.**

**7. SIGNS AND SYMPTOMS OF PSYCHIATRY.**

**8. EXAMINATION AND DIAGNOSIS OF THE PSYCHIATRIC PATIENT.**

- a. Psychiatric Interview, History and Mental Status Examination.
- b. Psychiatric Rating scales.
- c. Clinical Neuropsychology and Intellectual Assessment of Adults.
- d. Personality Assessment: Adults and Children.
- e. Neuropsychological and Cognitive Assessment of Children.
- f. Medical Assessment and Laboratory Testing in Psychiatry.
- g. Neuroimaging in Psychiatry.
- h. Physical Examination of the Psychiatric Patient.

**9. PSYCHOTHERAPIES.**

**10. PRINCIPLES OF CLINICAL RESEARCH IN PSYCHIATRY.**

- a. Statistical Methods
- b. Research methodology

**SYLLABUS FOR M.D (HOM) PSYCHIATRY PART- II (Paper - I)**

The following diseases should be studied so as to understand it, in relation to Etiology and Pathogenesis, considering both Internal(fundamental cause i.e. PSORA, SYPHILIS, SYCOSIS) and External Cause(Exciting and Maintaining Cause), its Pathology, Clinical features, Investigations, Diagnostic procedures in view of latest technology, Differential Diagnoses, Complications, Ethical issues in psychiatry and its Homoeopathic management including miasmatic analysis, general management and therapeutics.

**ICD & DSM Classification of Mental Diseases. Critical review of Hahnemannian Classification of Mental Diseases as elucidated in the Organon in the light of ICD & DSM classifications.**

**1. ORGANIC BRAIN SYNDROMES**

**2. SCHIZOPHRENIA SPECTRUM AND OTHER PSYCHOTIC DISORDERS.**

- a. Schizophrenia
- b. Schizoaffective Disorder.
- c. Schizophreniform Disorder
- d. Delusional disorder and Shared Psychotic Disorder.
- e. Brief Psychotic Disorder, Other Psychotic Disorders, and Catatonia.

**3. MOOD DISORDERS**

- a. Major Depression and Bipolar Disorders

- b. Dysthymia and Cyclothymia.

**4. ANXIETY DISORDERS**

- a. Panic Disorder
- b. Agoraphobia
- c. Specific Phobia
- d. Social Anxiety Disorder (Social Phobia)
- e. Generalized Anxiety Disorder
- f. Other Specified and Unspecified Anxiety Disorders

**5. OBSESSIVE-COMPULSIVE AND RELATED DISORDERS**

**6. TRAUMA- AND STRESSOR-RELATED DISORDERS**

**7. DISSOCIATIVE DISORDERS**

- a. Dissociative Amnesia
- b. Depersonalization/Derealization Disorder
- c. Dissociative Fugue
- d. Dissociative Identity Disorder
- e. Other Specified or Unspecified Dissociative Disorders

**8. PERSONALITY DISORDERS**

- a. Cluster A Personality Disorders: Paranoid Personality Disorder, Schizoid Personality Disorder, Schizotypal Personality Disorder.
- b. Cluster B Personality Disorders: Antisocial Personality Disorder, Borderline Personality Disorder, Histrionic Personality Disorder, Narcissistic Personality Disorder.
- c. Cluster C Personality Disorders: Avoidant Personality Disorder, Dependent Personality Disorder, Obsessive-Compulsive Personality Disorder.
- d. Other Personality Disorders: Personality change due to another Medical Condition, Other Specified Personality Disorder, Unspecified Personality Disorder.

**9. SOMATIC SYMPTOM AND RELATED DISORDER**

- a. Somatic Symptom Disorder
- b. Illness Anxiety Disorder
- c. Functional Neurological Symptom Disorder (Conversion Disorder)
- d. Psychological Factors Affecting Other Medical Conditions
- e. Factitious Disorder
- f. Pain Disorder
- g. Consultation - Liaison Psychiatry.

**10. CHRONIC FATIGUE SYNDROME AND FIBROMYALGIA.**

**11. COMMUNITY PSYCHIATRY WITH SPECIAL REFERENCE TO CONTEMPORARY PROBLEMS (EDUCATION, EMPLOYMENT, SUICIDAL & MARITAL ISSUES. ETC.)**

**SYLLABUS FOR M.D (HOM) PSYCHIATRY PART- II (Paper-II)**

The following diseases should be studied so as to understand it, in relation to Etiology and Pathogenesis, considering both Internal (fundamental cause i.e. PSORA, SYPHILIS, SYCOSIS) and External Cause (Exciting and Maintaining Cause), its Pathology, Clinical features, Investigations, Diagnostic procedures in view of latest technology, Differential Diagnoses, Complications, Ethical issues in psychiatry and its Homoeopathic management including miasmatic analysis, general management and therapeutics.

**1. CHILD PSYCHIATRY ( Neuro-developmental disorders).**

- a. Intellectual Disability (Intellectual Developmental Disorder)
- b. Communication Disorders
- c. Autism Spectrum Disorder
- d. Attention-Deficit/ Hyperactivity Disorder

- e. Specific Learning Disorder
- f. Motor Disorders
- g. Feeding and Eating Disorders of Infancy or Early Childhood (Pica, Rumination Disorder, Avoidant/ Restrictive Food Intake Disorder).
- h. Elimination Disorders (Enuresis, Encopresis).
- i. Trauma - and stressor-related Disorders in Children
- j. Mood Disorders and Suicide in Children and Adolescents (Disruptive Mood Dysregulation Disorder, Oppositional Defiant Disorder, Conduct Disorder).
- k. Anxiety Disorders of Infancy, Childhood and Adolescence ( Separation anxiety Disorder, Selective Mutism).
- l. Psychiatric Treatment of Children and Adolescents ( Individual Psychotherapy, Group Psychotherapy; Residential, Day, and Hospital Treatment )

## **2. FEEDING AND EATING DISORDERS**

- a. Anorexia Nervosa
- b. Bulimia Nervosa
- c. Binge-Eating Disorder and Other Eating Disorder
- d. Obesity and the Metabolic Syndrome

## **3. SLEEP-WAKE DISORDERS**

- a. Insomnia Disorder
- b. Hyper somnolence Disorder
- c. Narcolepsy
- d. Breathing-Related Sleep Disorders
- e. Circadian Rhythm Sleep Disorders
- f. Parasomnias
- g. Sleep-Related Movement Disorders

## **4. HUMAN SEXUALITY AND SEXUAL DYSFUNCTIONS**

- a. Sexual Dysfunctions
- b. Paraphilic Disorders
- c. Gender Dysphoria

## **5. DISRUPTIVE, IMPULSE-CONTROL, AND CONDUCT DISORDERS**

- a. Intermittent Explosive Disorder
- b. Pyromania
- c. Kleptomania
- d. Other Specified or Unspecified Disruptive, Impulse-Control, and Conduct Disorder

## **6. SUBSTANCE-RELATED AND ADDICTIVE DISORDERS**

- a. Alcohol-Related Disorders
- b. Caffeine-Related Disorders
- c. Cannabis - Related Disorders
- d. Hallucinogen-Related Disorders
- e. Inhalant-Related Disorders
- f. Opioid - Related Disorders
- g. Sedative, Hypnotic, or Anxiolytic - Related Disorders
- h. Stimulant - Related Disorders
- i. Tobacco - Related Disorders
- j. Other Substance Use and Addictive Disorders.

## **7. NEUROCOGNITIVE DISORDERS**

- a. Delirium
- b. Dementia
- c. Neurocognitive and Other Disorders Due to a General Medical Condition (Psychiatry in Medicine)

## **8. FORENSIC PSYCHIATRY**

## 9. GERIATRIC PSYCHIATRY

### Section III

#### Monitoring Learning Progress

During the First Year of the course every Post Graduate student should undergo one year compulsory house job at hospital. The hospital authorities should regulate/supervise the duties of Post Graduate students at hospital.

It is essential to monitor the learning progress of each candidate through continuous and regular assessment. It not only helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching/learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Section IV.

The learning outcomes to be assessed should include: 1) Personal attitudes, 2) Acquisition of Knowledge, 3) Clinical skills, 4) Teaching skills, 5) Dissertation.

- 1) **Personal attitudes:-** The essential items are:
- Caring attitudes
  - Initiative
  - Organizational ability
  - Potential to cope with stressful situations and undertake responsibility
  - Trustworthiness and Reliability
  - To understand and communicate intelligibly with patients and others
  - To behave in a manner which establishes professional relationship with patients and colleagues.
  - Ability to work in team.
  - A critical enquiring approach to the acquisition of Knowledge.

The methods used mainly consist of observation. It is appreciated that these items require a degree of subjective assessment by Guide, Supervisors and Peers.

- 2) **Acquisition of Knowledge:-** The methods used comprise of “Log book” which records participation in various teaching/ learning activities by the students. The number of activities attended and the number in which presentations are made are to be recorded. The logbook should periodically be validated by the Supervisors. Some of the activities are listed the list is not complete. Institutions may include additional activities if so, desired.

**A) Journal review meeting (Journal Club):-** The ability to do literature search, in depth study, presentations skills and use of audio-visual sides are to be assessed. Faculty members and peers attending the meeting using a checklist make the assessment. (See model Checklist 1, Section IV).

During the P.G. course each P.G. students shall make 15 journals club presentation and maintain the copies of journals on which presentation is made and maintain a record of journal club presentations.

**B) Seminar/ Symposia:-** The topics should be assigned to do the student well in advance to facilitate in depth study. The ability to do literature search, in depth study, presentation skills and use of audio-visual aids are to be assessed using a checklist. (See model checklist 2, Section IV).

Each P.G. student shall take part in at least 12 seminars/symposia during the P.G. course and maintain the records of seminar notes/presentations and also he/she should present a paper/ participate in at least one national level seminar/conferences.

**C) Assignments:** Each P.G. student shall take up five assignments per year from second year on words and present ten assignments during the course period and maintain a copy of

assignments taken up by the P.G. student at the department.

### 3) **Clinical Skills:-**

**Day to day work:** Skills in O.P.D and I.P.D work should be assessed periodically. The assessment should include the candidate's sincerity and punctuality, analytical ability and communication skills (See model checklist 3, Section IV).

**Clinical Presentations:** Candidates should periodically present to his peers and faculty members. This should be assessed using a checklist (See model Checklist 4, Section IV).

Each P.G. student shall present at least 15 case presentations during the period of P.G. course and maintain the records of case presented.

### 4) **Teaching Skills:-** Candidates should be encouraged to teach under graduate medical students. This performance should be based on assessment by the faculty members of the department and from feedback from the under graduate students (See model Checklist 5, Section IV).

Each student shall conduct at least 25 classes for Undergraduate students during the P.G. course and maintain the records.

### 5) **Dissertation in the Department:-** Periodic presentations are to be made in the department. Initially the topic selected is to be presented before submission to the University for Registration, again before finalization for critical evaluation and another before final submission of the completed work (See model checklist 6, 7 Section IV).

**Periodic Tests:-** The department may conduct three tests, two of them be annual tests, one at the end of first year and the other in second year. The third test may be held three months before final examination. The tests may include written papers, practicals/clinicals and viva-voce.

**Records:-** records, Log books and marks obtained in tests will be maintained by the head of the department and will be made available to the University or central Council of Homoeopathy.

## **List of Books**

### **Research Methodology:**

1. Kothari. CR , Research methodology-methods and techniques, New age International Publishers
2. Rao NSN, Murthy NSN, Applied Statistics in Health Sciences, JP Brothers Medical Publishers
3. Ahmed.R Munir, Research Methodology-simplifying intricacies in post graduate studies, Center for Homeopathic studies Bangalore
4. Ahmed R Munir, Dissertation Made Easy, Center for Homoeopathic studies
5. Richie Jane, Lewis Jane, Qualitative Research Practice, SAGE publications limited

### **Bio-Statistics:**

1. K. Park and Park – Park's Text Book of preventive and Social Medicine, M/s Bhanarasi Bhanot Publishers, Jabalpur
2. Dixit J V – Principles and Practice of Bio-statistics, Bhanot Publishers, Jabalpur.
3. B K Mahajan - Medical Statistics
4. Jekel, David Katz – Epidemiology, Bio-statistics and Preventive Medicine, W B Saunders company, Hulda Bankrost – Introduction to Bio-statistics, Hoeber-Harper publication.
5. Sunderam - Biostatistics
6. B Hills - Biostatistics.

## Health Psychology

- Owen D. Principles and Practice of Homeopathy, the therapeutic healing process. Churchill Livingstone. Philadelphia.
- Dimatteo MR, Martin LR. Health Psychology, Pearson Education. New Delhi.
- Tylor SE. Health Psychology (6e). Tata McGraw Hill. New Delhi.
- WHO. Health education: theoretical concepts, effective strategies and core competencies.

## Education Methods

- Guilbert JJ. Educational Handbook for Health Personnel (63). WHO. Geneva.
- Munir Ahmed R. Handbook of Education for Healthscience Teachers, Bengaluru.

## Ethics:

1. I.C.M.R. Ethical Guidelines for Biochemical Research on Human subject, 2002 New Delhi.
2. Francis C.M. Medical Ethics, 2nd Edition, Jaypee Publishers, New Delhi.
3. Medical education Principles and Practice, 2000, National Teachers Training Centre, JIPMER, Pondichery.
4. INSA Guidelines for care and use of Animals in Research – 2000.
5. CPCSEA Guidelines 2001([www.cpcsea.org](http://www.cpcsea.org)).
6. ICMR Guidelines on animal use 2001.

## Organon of Medicine

1. Allen JH. The Chronic Miasms. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;1998..
2. Aptee SS, Belsare RN, DEhdia SR, Dhawale KM, etc. Satandardisation Vol 1,2,3,4&5. third et edition. Mumbai: Dr. M.L. Dhawale memorial trust: 2003..
3. Boenninghausen CMF Von. The lesser writings. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;2005,2007.
4. Boericke G. A Compend of the Principles of Homoeopathy for students in medicine. First indian edition. New delhi: world Homoeopathic Links; 1980.
5. Baskar poldas SV. History of Homoeopathy in India. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;1992.
6. Clarke JH. Constituional Medicine. New delhi: B.Jain publishers Pvt.Ltd;2009.
7. Close S. The Genius of Homoeopathy. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;2007
8. Coleman JC. Abnormal Psychology and modern life. Reprint edition. Bombay: Scott Foresman & Company;1988.
9. Dhawale ML. Principle and practice of Homoeopathy. Fifth reprint edition. Mumbai: Dr. M.L. Dhawale memorial trust: 2008.
10. Dhawale ML. Principle and practice of Homoeopathy. Fifth reprint edition. Mumbai: Dr. M.L. Dhawale memorial trust: 2008.
11. Datta DM. The chief currence of Contemporary philosophy. Culcutta: university of Culcutta: 1961.
12. Dunham C. Homoeopathy the science of therapeutics. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;1982.
13. Farrington EA. Lesser writings with therapeutics Hints. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd; 1982.
14. Ghatak N. Chronic disease its cause and cure. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;
15. Hahnemann S. Organon of medicine. Reprint edition. New Delhi: B. Jain publishers Pvt.Ltd; 2000.
16. Hahnemann S. The Lesser Writings of Samuel Hahnemann. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd; 2000.
17. Dudgeon RE. The Lesser writing of Samuel Hahnemann. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd; 2013.
18. Huges R. The Principles & Practice of Homoeopathy. Reprint edition. New delhi: B.Jain publishers Pvt.Ltd;1982..
19. Huges R. The Knowledge of Physician. Reprint edition. New delhi: B.Jain publishers

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# **Format of Model Check Lists**

## SECTION - IV

### Checklist - 1: Model Checklist for evaluation of Journal Review.

Name of the Student:

Name of the Faculty/ Observer:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Article chosen was					
2.	Extent of understanding of scope and objectives of the paper by the candidate					
3.	Whether cross-references have been consulted.					
4.	Whether other relevant publications consulted.					
5.	Ability to respond to questions on the paper/ subject					
6.	Audio - Visual aids used					
7.	Ability to defend the paper					
8.	Clarity of Presentation					
9.	Any other observation					
	Total Score					

## Checklist - 2a

### Model Checklist for evaluation of Symposium Presentations.

Name of the Student:

Name of the Faculty/ Observer:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Whether other relevant publications consulted					
2.	Whether cross references have been consulted					
3.	Completeness of preparation					
4.	Clarity of Presentation					
5.	Understanding of Subject					
6.	Ability to answer questions					
7.	Time Scheduling					
8.	Appropriate use of Audio - Visual aids					
9.	Overall performance					
10.	Any other observation					
	Total Score					

## Checklist - 2b

### Model Checklist for evaluation of Seminar Discussions.

Name of the Student:

Name of the Faculty/ Observer:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	<b>Speaks in discussion</b>					
2.	<b>Makes eye contact with the person who is speaking</b>					
3.	<b>Asks a new question</b>					
4.	<b>Asks a follow-up or clarifying question</b>					
5.	<b>Responds/ Makes a comment towards another speaker</b>					
6.	<b>Interrupts another speaker</b>					
7.	<b>Engages in side conversations</b>					
	Total Score					

### Checklist - 3

#### Model Checklist for evaluation of Clinical Work in I.P.D./ O.P.D

(To be completed once in a month by respective unit heads including posting in other departments)

Name of the Student:

Name of the Faculty/ Observer:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	<b>Regularity of attendance</b>					
2.	<b>Punctuality</b>					
3.	<b>Interaction with colleagues and supportive staff</b>					
4.	<b>Maintenance of case Records</b>					
5.	<b>Presentation of cases during rounds</b>					
6.	<b>Investigations work up</b>					
7.	<b>Bedside manners</b>					
8.	<b>Rapport with patients</b>					
9.	<b>Counseling patients relatives for blood donation or postmortem and case follow up</b>					
10.	<b>Over quality of ward work</b>					
	<b>Total Score</b>					

## Checklist - 4

### Evaluation Form for Clinical Presentations.

Name of the Student:

Name of the Faculty:

Date:

Sl. No.	Points to be considered	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	<b>Completeness of History</b>					
2.	<b>Whether all relevant points elicited</b>					
3.	<b>Clarity of Presentations</b>					
4.	<b>Logical order</b>					
5.	<b>Mentioned all positive and negative points of importance</b>					
6.	<b>Accuracy of General physical Examination</b>					
7.	<b>Whether all Physical signs elicited correctly</b>					
8.	<b>Whether any major sings missed or miss-interpreted</b>					
9.	<b>Diagnosis: Whether it follows logically from history and findings</b>					
10.	<b>Investigations required</b> • Complete • Relevant Order • Interpretation of Investigations					
11.	<b>Ability to react to questioning whether it follows logically from history and findings</b>					
12.	<b>Ability to defend diagnosis</b>					
13.	<b>Ability to justify differential diagnosis</b>					
14.	<b>Others</b>					
	<b>Grand Total</b>					

## Checklist - 5

### Model Checklist for Evaluation of Teaching Skill Practice.

Name of the Student:

Name of the Faculty:

Date:

Sl. No.		Strong Point	Weak Point
1.	Communication of the purpose of the talk		
2.	Evokes audience interest in the subject		
3.	The Introduction		
4.	The sequence of ideas		
5.	The use of practical examples and/ or Illustrations		
6.	Speaking style (enjoyable, monotonous, etc., specify)		
7.	Attempts audience participation		
8.	Summary of the main points at the end		
9.	Asks questions		
10.	Answers questions asked by the audience		
11.	Rapport of speaker with his audience		
12.	Effectiveness of the talk		
13.	Uses Audio-Visual aids appropriately		

## Checklist - 6

### Evaluation Form for Clinical Presentation.

Name of the Student:

Name of the Faculty:

Date:

Sl. No.	Points to be considered	Poor 0	Below Average 1	Average 2	Above Average 3	Very Good 4
1.	Interest shown in selecting a topic					
2.	Appropriate Review of Literature					
3.	Discussion with guide & other faculty					
4.	Quality of Protocol					
5.	Preparation of Proformas					
	<b>Total Score</b>					



### Checklist - 7

#### Continuous Evaluation of Dissertation Work by Guide/ Co-Guide.

Name of the Student:

Name of the Faculty:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Above Average 3	Very Good 4
1.	Periodic consultation with guide/ co-guide					
2.	Regular collection of case material					
3.	Depth of Analysis/ Discussion					
4.	Departmental presentation of findings					
5.	Quality of final output					
6.	Others					
	<b>Total Score</b>					

