COMPETENCY BASED DYNAMIC CURRICULUM FOR 2nd

BHMS PROFESSIONAL COURSES

(Applicable from Batch 2022-2023 onwards for 5 years or until further notification by National Commission for Homoeopathy whichever is earlier)



HOMOEOPATHY EDUCATION BOARD

NATIONAL COMMISSION FOR HOMOEOPATHY

MINISTRY OF AYUSH, GOVERNMENT OF INDIA

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PREAMBLE TO THE COMPETENCY BASED DYNAMIC CURRICULUM

The National Commission for Homoeopathy (NCH) has undertaken major revisions in the educational regulations in the last year and has devised a new Syllabus to ensure that the student who completes the homoeopathic undergraduate course grows into a homoeopathic physician who is informed and capable of performing as a professional with competency to deliver services as required for addressing the health needs of the person and society at large. It is based on the premise that a correct adherence to homoeopathic principles and knowledge imparted will enable the physician to deliver results in all aspects of health, viz. preventive promotive, curative and rehabilitative.

There is a significant change in the approach and contents in the newly designed curriculum, with the intention of making it more coherent for the present and future needs of society. The designing of curriculum is based on the sound theories of educational methodology as applicable for the health professionals' education, and therefore, the outcomes are quite transparent and achievable.

The Homoeopathic Education Board (HEB) is obliged by the NCH Act 26 (b) to "develop a competency based dynamic curriculum for Homoeopathy at all levels in accordance with the regulations made under this Act, in such manner that it develops appropriate skill, knowledge, attitude, values and ethics among the graduates, postgraduate and super-specialty students and enables them to provide healthcare, to impart medical education and to conduct medical research".

Competency based medical education (CBME) has been around in the medical world for more than three decades. It has undergone several revisions and adaptations through this period which has placed the NCH in an advantageous position to learn from the varied experiences of curriculum formulation, implementation and assessment.

It should be emphasized that the switch over to CBME involves a sea change in the understanding of the processes and outcomes for which all stakeholders need to be adequately sensitized and the teachers trained to minimize the difficulties inevitable in any transition. The following four pillars need a special mention to grasp the nature of the change being brought about (Frank Jason R, et al 2010).

- 1. The focus is on ensuring that the end user of the health care services is benefited. Hence it is important that the outcomes of the training are defined in clear terms so that the teacher, the student and the community are aware of what can be expected from the training.
- 2. The second logical focus is on bringing the abilities of the physician to the level when the outcomes defined above are realized. This involves the definition of the competencies required in the discharge of various functions of the physician. This would involve certain domains of competencies to be achieved. This coupling of the outcome and abilities leads automatically to the third pillar.
- 3. We have been used to consider all training as time bound as the BHMS course is 5 1/2 years duration. But when we realize that the rate of mastering different abilities would vary from student to student, we should de-emphasize the fixed period of training and instead look at how the student can be helped to master the specific competency.
- 4. The fourth pillar becomes the student herself/himself. The entire education and training become learner centered and hence the teacher takes a great effort in defining the outcomes, competencies, teaching and learning methods and most important of all, assessment which is predominantly formative and hence intends to shape the evolving capacities of the learner.

While formulating the competency based dynamic curriculum (CBDC) for the homoeopathy undergraduate, we must bear in mind the central role that homoeopathy philosophy and the principle of holistic care plays in the therapeutic actions of the homoeopathic interventions. This is a distinctive aspect which has hardly received the attention it deserves despite Hahnemann's clear recommendations in the first six Aphorisms of the Organon. The revised syllabus has brought this change and the formulation of the competency-based curriculum provides an opportunity to incorporate this approach at all levels of teaching and training. The implications lie in bringing about a sensitive and effective integration (horizontal/vertical/spiral) of all aspects of the syllabus throughout the five and half years of the undergraduate course.

There are five compelling factors that form the fulcrum to drive the change (Harris Peter, et al, 2010):

- 1. <u>Design of curriculum</u>: This needs careful attention due to its novelty. Homoeopathy, as a holistic discipline resting on the foundations of philosophy, needs a holistic approach from the first year itself. Several novel situations will need to be envisaged and catered to. And yet, a number of issues will remain. This is the dynamic nature of the enterprise, and we must be prepared to accept the well-known adage: Change, the only constant!
- 2. <u>Teacher training</u>: Our teachers have discharged the role of information providers and the teaching-learning process calls for a transformation in the role of the teacher (Sidhu Navdeep S. et al2022). The future will need them to wear multiple hats and hence they will need to develop competencies viz. planner, facilitator, assessor, education manager, role model, etc, to be effective for these roles.
- 3. <u>Assessment</u>: Assessment practices must be based on a robust platform of validity, reliability, and objectivity, so that the tools of assessment blend fluidly with the academic flow. In this background, the focus is to shift the assessment approach from the monopoly of summative assessment to a significant allowance for formative assessment, which are supportive for learning and correction on-the-go.
- 4. <u>Student issues</u>: Along with the parents and the community, a significant re- orientation is called for while changing it from that of a 'last-minute' sprinter to a longrange 'racer'! All stakeholders should be on the same page so that the processes can operate in a well-oiled manner. Glitches are to be expected when a largely 'rights' based social mind set has to shift gears to adopt a competency oriented one. Understanding that change needs patience and good will go a long way to make the latter orientation a way of life.
- 5. Systems: All educational systems from the colleges to universities need to incorporate the multiple changes within their systems. We are used to consider results as 'pass' and 'fail' with the latter carrying the stigma. While there is an expressed need to wish to cater to all categories of learners fast, normal, slow the need to bring about changes in the systems is not so readily accepted. The institutions need to develop as 'learning organisations' that spur the 'growth mind-set' of its members the teachers, students, and all those who are in the loop of curricular or co-curricular management.

The HEB considers the CBDC as a work in progress. Considerable thoughts and efforts are invested into the design and planning of the curriculum. But as has been mentioned above, this is a pioneering work and would always benefit from suggestions that spring from critical thinking and reflection subsequent to sincere attempts in implementation.

The next sections provide details of operational clarity to implement the program. Training of teachers is the key component which will make all the difference. The NCH is committed to make it happen and the cooperation of all stakeholders is earnestly solicited.

References

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I - STEPS TAKEN TO FORMULATE HOMOEOPATHY CBDC MANUAL

In this section we will detail the process undertaken in the formulation of this manual. The account will be of use to the users viz. the academicians, teachers and students to bettergrasp the significance of the effort and the role that each would have to play. The subsequent section will outline the correct use of the manual in order to derive the maximum benefit.

I- Defining National Goals and Programme Outcomes

The process of identifying competency is a complex one. Defining the outcome clearly helps in defining the relevant competency thus enabling a person acquiring it with relative ease. In case of the medical graduate, the outcome or goal is determined by the health care needs of the community as perceived by the statutory authorities and the ability of the particular health care system to respond to this need. India has a pluralistic health tradition and the community accesses the several health care systems to fulfil their multiple health needs. Scientific evidence is generally relied upon to determine and differentiate the role of each system in providing health care. This, however, may not always be forthcoming to the required degree of precision.

Considering the above, the NCH has formulated broad national goals which a Homoeopathic graduate would be expected to be able to achieve.

NATIONAL GOALS:

At the end of undergraduate program, the homoeopathic medical student should be able to:

- a. Recognize the strength of homoeopathy, its applicability and limitations in health care of society and the individual.
- b. Integrate Homoeopathy along with conventional line of treatment for effective delivery of health care.
- c. Recognize the purpose of the National Health Policy and "Health for all" as a national goal and health right of all citizens and undergo training to achieve the realization of this social responsibility
- d. Develop a scientific temper, acquire educational experience for proficiency in profession and promote healthy living based on the tenets of homoeopathy.
- e. Become an exemplary citizen by observing medical ethics and fulfilling social and professional obligations so as to respond to national aspirations.
- f. Achieve competence in the practice of homoeopathy with holistic approach, encompassing promotive, preventive, curative and rehabilitative aspects of common

diseases.

g. Establish Homoeopathy as an evidence-based system of medicine & practice it with zeal so that it stands at par to other scientific healing methods.

The above goals, though desirable, are broad. To realize them, the student entering into the undergraduate homoeopathic programme needs to be equipped with a set of competencies which would fall in the domains of knowledge, skills and attitudes. The broadgoals need to be defined in specific actionable terms which will form the Programme outcomes. These will enable all the stakeholders to be clear of the nature of functioning expected from the homoeopathic physician at the end of the training. Accordingly, the teamof resource persons worked together to formulate Programme Outcomes

PROGRAMME OUTCOMES:

At the end of the programme of the undergraduate studies, the homoeopathic physician must

- Develop the knowledge, skills, abilities and confidence as a primary care homoeopathic practitioner to attend to the health needs of the community in a holistic manner
- 2) Correctly assess and clinically diagnose common clinical conditions prevalent in the community from time to time
- 3) Identify and incorporate the socio-demographic, psychological, cultural, environmental & economic factors affecting health and disease in clinical work
- 4) Recognize the scope and limitation of homoeopathy in order to apply Homoeopathic principles for curative, prophylactic, promotive, palliative, and rehabilitative primary health care for the benefit of the individual and community
- 5) Be willing and able to practice homoeopathy as per medical ethics and professionalism.
- 6) Discern the scope and relevance of other systems of medical practice for rational use of cross referrals and role of life saving measures to address clinical emergencies
- 7) Develop the capacity for critical thinking, self-reflection and a research orientation as required for developing evidence based homoeopathic practice.
- 8) Develop an aptitude for lifelong learning to be able to meet the changing demands of Page 7 of 31

clinical practice

9) Develop the necessary communication skills and enabling attitudes to work as a responsible team member in various healthcare settings and contribute towards the larger goals of national health policies such as school health, community health and environmental conservation.

Defining the Programme outcomes is a crucial step since this allows us to derive the competencies the homoeopathic graduate should possess at the end of the period of training. Care is taken to ensure that the National goals are covered as much as possible by the various aspects of the Programme Outcomes. Further, the annual course objectives for each academic year will be formulated separately based on the Courses studied and the nature of clinical or community activities undertaken each year. Accordingly, the corresponding competencies for the respective years have been defined.

Domains of Competencies for Homoeopathic Medical Graduate

The training of undergraduates in homoeopathy is now based on the philosophy of enabling competencies. The graduates are expected to demonstrate professional competencies as required and relevant for basic homoeopathic practice. In this background, the domains of performance need to be clearly projected for mapping the professional performance for both training and assessment.

Therefore, drawing on the proposals made in the ACGME, and CanMEDS documents, a taxonomy of competencies for homoeopathic graduates is proposed with six domains – knowledge & scholarship; patient care; homoeopathic orientation, communication skills, practice-based learning& improvement; and professionalism.

A detailed clarity on the six domains of competencies is provided as follows:

I. Knowledge and Scholarship

To acquire relevant and optimal levels of knowledge of the basic, clinical, and behavioural sciences, and apply these in the context of patient care.

- Describe the normal structure and function of the human body and each of its major organ systems.
- 2. Recognise the altered structure and function of major organ systems that are seen in common diseases and conditions.
- 3. Relate the clinical, laboratory, and radiologic manifestations of common disease

- and conditions.
- 4. Correlate the behavioural, psychosocial, genetic, and cultural factors associated with the origin, progression, and treatment of common diseases and conditions.
- 5. Identify the epidemiological dimensions of common diseases and conditions within a defined population.

II. Patient care

To provide individualised therapeutic and individualised and community-wide preventive care for a range of conditions.

- 1. Gather accurate, complete, and unbiased information through history taking, physical examination, and laboratory & imaging data.
- 2. Interpret the symptoms and correlate them with the outcomes of physical examination, and laboratory & imaging data.
- 3. Prioritise the outcomes of interpretation to prepare the basis for patient care decisions.
- 4. Plan for the management of therapeutic care on the basis of disease state, patient individuality, and the psycho-social influencers.
- 5. Plan for a community-based preventive care on the basis of socio-cultural, and health belief paradigms.
- 6. Engage the patients, family / care givers, and the community members to empower them for therapeutic / preventive care.
- 7. Provide evidence-based information for the patient and community to introspect and develop self-sufficiency for continued care.

III. Homeopathic orientation

To make evidence-based decisions that are anchored into the spirit of homeopathy for both individual and community care, and for therapeutic and preventive care.

- 1. Relate the patient's history, physical examination, and laboratory & imaging data for developing a picture of homeopathic diagnosis.
- 2. Position the case in Hahnemann's disease classification.
- 3. Identify the operating school of philosophy in the case.
- 4. Assess the prognostic possibilities as per Dake's hypothesis.
- 5. Track the progress of disease and specify its current state.
- 6. Select the prescription approach as materia medica-based, therapeutics-based, or repertory- based.
- 7. In the case of repertory-based prescription, select the appropriate repertorisation medium.

- 8. Identify the similimum including the potency and dosage.
- Assess the remedy reaction as per Hering's Law or Direction of Cure, and Kent's 12 Observations.
- 10. Mange the case in line with principles of homeopathy.

IV. Communication Skills

Shall be able to communicate and interact effectively with patients, their families and members of the inter-professional healthcare team.

- 1. Practice empathic and patient-centered interviewing and communication.
- 2. Obtain an accurate and complete medical history considering the patient's culture, beliefs, personal preferences and level of health literacy.
- 3. Communicate effectively, both orally and in writing, with patients, families and members of the healthcare team / other healthcare professionals.
- 4. Function as a member of a healthcare team, collaborating effectively with other healthcare professionals in caring for patients.

V. Practice-Based Learning and Improvement

Develop the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning

- 1. Recognize strengths, deficiencies and limitations in their knowledge and skills.
- 2. Articulate the goals for self-regulated learning and improvement.
- 3. Perform learning activities that address gaps in the knowledge, skills and / or attitudes.
- 4. Use information technology to optimize learning.
- 5. Demonstrate commitment to continuously improve knowledge, skills and/or attitudes byincorporating formative evaluation and feedback into daily practice.
- 6. Participate in the education of patients, families, trainees, peers and other health professionals.
- 7. Obtain information about individual patients, populations of patients or communities of patients to improve care.
- 8. Practice life-long learning skills by continually identifying, analysing and implementing new knowledge, guidelines, standards, technologies, products or services.

VI. Professionalism.

Demonstrate a commitment to upholding professional duties guided by ethical principles.

- 1. Demonstrate respect for patients by using the appropriate form of address, attending to a patient's comfort, displaying appropriate attire and grooming, and honouring a patient's privacy and right to make decisions.
- 2. Demonstrate responsibility in actions by being punctual, managing emotions when confronted with adversity and confrontation, and recognizing personal and peer impairments.
- 3. Demonstrate honour and integrity by being honest about role and experience level, admitting mistakes and shortcomings, appropriately attributing sources of ideas and data, and respecting boundaries between patients, peers, and educators.
- 4. Demonstrate reverence for human life, understanding that sympathy for suffering is a fundamental concern of the medical profession and that the needs of the patient are paramountand should govern a physician's actions.
- 5. Demonstrate knowledge of the principles that govern ethical decision-making and rules and regulations regarding healthcare delivery, incorporating them into clinical practice and research

Teachers implementing this curriculum shall use these guardrails to guarantee that the curriculum implementation is firmly on track, and is transparent for monitoring and verification of progress.

This now equips us to chart the competencies against the expanded functions of the homoeopathic physician in each of the areas mentioned above. The components of each of the areas has been expanded to include all actions which the trained student would be expected to undertake.

This also helps us to zero down on the tasks which the homoeopathic student would need to be trained to perform. With this background, we should be able to approach the Manual which is being issued for 2nd, 3rd and 4th BHMS. It will be noted that the 6 domains of competencies will be aligned with the specific learning objectives for each item of learning.

Considerable fresh thought has gone into the framing of this document of CBDC for 2nd, 3rd and 4th BHMS. The existing templates were unable to satisfy the very foundations on

which homoeopathic practice rests and have been extensively elaborated and modified in the Preamble to the CBDC for 2nd, 3rd and 4th BHMS. The two features which may be emphasized here are:

- 1. Close adherence to homoeopathic philosophy and principles at every stage of education and training
- 2. This is turn demands a rare amount of integration at horizontal, vertical and spiral forms

The next section will deal with how the Competency table was formulated and how it should be used.

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II- UNDERSTANDING THE COMPETENCY TABLE

The Competency Table has been designed keeping in mind the domains of competencies required by the learner to attain the overall Program Outcomes (PO) as well as Course Outcomes (CO) of all courses.

A. Methodology in preparation of the Competency Table

The following methodology was adopted in preparing the Competency table for each course (or subject) of 2nd, 3rd and 4th year of the BHMS program once the National Goals, Programme Outcomes, and domains of competencies were identified:

- ❖ Course Outcomes (CO) were identified for each course (or subject) that were in alignment with the National goals and Programme Outcomes (PO)
- Finalizing the syllabus or the list of topics which will help to achieve not only the Course Outcomes (CO) but also the overall Program Outcomes (PO)
- ❖ Aligning the competencies from the 6 domains with the content.
- ❖ Identifying the Learning Objectives and Specific Learning Objectives (SLO) for each topic.
- ❖ Identifying the level of Miller's Pyramid for each Specific Learning Objectives (SLO)
- Classifying each Specific Learning Objective (SLO) as per Bloom's Taxonomy and Guibert's Level
- ❖ Defining the priority of each Specific Learning Objective (SLO) into 'Must know' or 'Desirable toknow' or 'Nice to know' categories
- Choosing the appropriate Teaching Learning method/s and media and the assessment method/srequired for achieving each objective or outcome
- ❖ Identifying the Horizontal, Vertical and Spiral Integration with other courses (or subjects) required for holistic understanding of the topic

We will now illustrate how the Competency table is to be read with respect to the Community Medicine Course (subject)

Illustrative Diagrammatic Representation of Competencies Table with example of the Community Medicine Course

				Concepts	of Health, Disease Causa	ation &	Preve	ntion and Ho	moeopa	thy	
.x	f	ķ			20)er			Asses	ssment	
Competency	Domain of	Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber	Priority	T-L M/M	Formative	Summative	Integration
Hom	KS		KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon
UG				of	health			2. Small	Viva	SAQ	of
CM				health				Group	Quiz		Medicine
I-T					Discuss the			Discussion			
2.1					biomedical,						
					ecological,						
					psychological, and						
					spiritual dimensions						
					of holistic health						
Hom	KS		K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,	
UG					"Health" as per WHO.			2. Small	Viva		
CM								Group	Quiz		
I-T								Discussion			
2.2											
(1)					(5)		7	8			
	(2		(3))	6)		(9	10

Table 1: Description of the Competencies table

S.No	Description
1	Unique number of the competency /outcome (Hom UG CM I-T
	2.1)
	Hom UG CM I-T 2.1 to be read as Homoeopathy Under Graduate Program, Community
	Medicine course 3rd BHMS, Theory Component Unit , Topic 2.followed by serial
	number of the Specific Learning Objectives (SLO)
2	Domain of Competency covered by the topic- Domain Competency: KS-Knowledge
	and Scholarship PC- Patient care HO- Homoeopathic orientation CS- Communication Skills
	PBL- Practice-Based Learning and Improvement PRF- Professionalism
3	Mapping of the Level of Specific Learning Objectives (SLO) to Miller's Pyramid-
	Knows (K)/ Knows How (KH)/ Shows How (SH)/ Does (D)
4	Content to be covered from the topic
5	Description of Specific Learning Objectives (SLO) for the topic
6	The Blooms Domain addressed by the Specific Learning Objectives (SLO)-
	Cognitive (C) or Affective (A)or Psychomotor (P) Domain and Mapping of the
	Specific Learning Objective (SLO) to Guilbert's Level of Learning
	in the Cognitive or Affective or Psychomotor Domain
7	Assigning priority to Specific Learning Objective (SLO) as per Must know (MK) or
	Desirable to know (DK) or Nice to know (NK) areas
8	Teaching Learning methods and media for each SLO
9	Assessment methods for each SLO classified under formative and summative
	assessment
10	Vertical or horizontal integration with other courses to improve understanding. If the
	subject is taught for more than 1 year, it must be integrated spirally in all the years.

III. USING THE COMPETENCY TABLE

A Competency Based Dynamic Curriculum necessitates that each topic in a course (or subject) be elaborated in terms of the outcomes that are to be achieved by the learner at the end of the particular topic. This in turn will help the learner to achieve the competencies at the course and overall, at the program level.

1. Linking the Specific learning Objective (SLO) to the competencies and Miller's Level

			(Concepts o	of Health, Disease Causa	ation &	Preve	ntion and Ho	moeopa	thy	
y		8				er			Asses	sment	_
Competency	Domain of	Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber	Priority	T-L M/M	Formative	Summative	Integration
Hom	KS		KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon
UG				of	health			2. Small	Viva	SAQ	of
CM				health				Group	Quiz		Medicine
I-T					Discuss the			Discussion			
2.1					biomedical,						
					ecological,						
					psychological, and						
					spiritual dimensions						
	\		\		of holistic health						
Hom	KS	$\overline{}$	K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,	
UG					"Health" as per WHO.			2. Small	Viva		
CM								Group	Quiz		
I-T					/			Discussion			
2.2											

Each Specific learning Objective (SLO) will help the learner to acquire the required domains of competencies (abilities that a basic homoeopathic doctor would be trusted to have acquired as a consequence of his / her learning).

The Specific learning Objective (SLO) also indicates at what level the competency is defined in the Miller's Pyramid which in the above example is at the level of 'Knows' and 'Knows How'— the ability to recall facts and ideas and the domain of competency covered is Knowledge and

Scholarship.

2. Specific learning Objective (SLO) for each topic

		Concepts of Health, Disease Causation & Prevention and Homoeopathy											
Ą	ج د				er.			Asses	sment	a			
Competency	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber t	Priority	T-L M/M	Formative	Summative	Integration			
Hom	KS	KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon			
UG			of	health			2. Small	Viva	SAQ	of			
CM			health				Group	Quiz		Medicine			
I-T				Discuss the			Discussion						
2.1				biomedical,									
				ecological,									
				psychological, and									
				spiritual dimensions									
				of holistic health									
Hom	KS	K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,				
UG				"Health" as per WHO.			2. Small	Viva					
CM							Group	Quiz					
I-T							Discussion						
2.2													

Specific Learning Objectives (SLOs) start with the "Action Verb" as per the Domain and level and describe what students should know or be able to do at the end of a learning session.

3. Bloom/ Guilbert's level of SLO

	Concepts of Health, Disease Causation & Prevention and Homoeopathy										
	J	Š				er.			Asses	sment	-
Competency No	Domain of	Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber	Priority	T-L M/M	Formative	Summative	Integration
Hom	KS		KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon
UG				of	health			2. Small	Viva	SAQ	of
CM				health				Group	Quiz		Medicine
I-T					Discuss the			Discussion			
2.1					biomedical,						
					ecological,						
					psychological, and						
					spiritual dimensions						
					of holistic health						
Hom	KS		K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,	
UG					"Health" as per WHO.			2. Small	Viva		
CM								Group	Quiz		
I-T								Discussion			
2.2											

The SLOs are written as per the Blooms Domain (Cognitive or Affective or Psychomotor) under which they are categorized.

In the above example three Specific Learning Objectives (SLOs) have been described that belong to the Cognitive domain.

They are then mapped to Guilbert's Level of Learning in the Cognitive or Affective or Psychomotor Domain.

In the above example, the first two SLOs belong to level-II of Guilbert's level of learning under cognitive domain whereas the third SLO belongs to level-I of Guilbert's level of learning under cognitive domain.

4. Priority of Learning of SLO

		Concepts of Health, Disease Causation & Prevention and Homoeopathy										
y.	- A)er			Asses	sment	n		
Competency	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber f	Priority	T-L M/M	Formative	Summative	Integration		
Hom	KS	KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon		
UG			of	health			2. Small	Viva	SAQ	of		
CM			health				Group	Quiz		Medicine		
I-T				Discuss the			Discussion					
2.1				biomedical,								
				ecological,								
				psychological, and								
				spiritual dimensions								
				of holistic health								
Hom	KS	K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,			
UG				"Health" as per WHO.			2. Small	Viva				
CM							Group	Quiz				
I-T							Discussion					
2.2												

The priority of learning is represented as 'Must know', 'Desirable-to-know', and 'Nice-to-know'. Prioritization is a critical component of curriculum design because it classifies the specific learning objectives on the basis of their importance and usefulness for the ultimate professional standards. The priority of learning is objectively assigned by a formula that gives weightage on the basis of multiplying 'frequency and impact' of the learning for professional needs.

In the above example, all the three SLOs are 'Desirable to Know'.

5. Teaching Learning methods and media for each topic

		Concepts of Health, Disease Causation & Prevention and Homoeopathy										
.		y.				er.			Asses	ssment	а	
Competency	Domain of	Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber t	Priority	T-L M/M	Formative	Summative	Integration	
Hom	KS		KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon	
UG				of	health			2. Small	Viva	SAQ	of	
CM				health				Group	Quiz		Medicine	
I-T					Discuss the			Discussion				
2.1					biomedical,							
					ecological,							
					psychological, and							
					spiritual dimensions							
					of holistic health							
Hom	KS		K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,		
UG					"Health" as per WHO.			2. Small	Viva			
CM								Group	Quiz			
I-T								Discussion				
2.2								/				

The Teaching- Learning methods and media have been identified that are most suitable to the Specific Learning Objectives (SLOs) formed for each topic and as per the Domain of each of the Specific Learning Objectives (SLOs).

In the above example, Lectures, Small Group Discussions are the Teaching-Learning methods to be adopted for achieving the SLO. The media could be projectors, models, whiteboard etc.

The Teaching Learning Methods and media will vary as per the Specific Learning Objectives (SLO) and the Domains they cover.

6. Assessment methods for each topic

		Concepts of Health, Disease Causation & Prevention and Homoeopathy											
Ŋ	.y				er.			Asses	sment	-			
Competency	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber	Priority	T-L M/M	Formative	Summative	Integration			
Hom	KS	KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon			
UG			of	health			2. Small	Viva	SAQ	of			
CM			health				Group	Quiz		Medicine			
I-T				Discuss the			Discussion						
2.1				biomedical,									
				ecological,									
				psychological, and									
				spiritual dimensions									
				of holistic health									
Hom	KS	K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,				
UG				"Health" as per WHO.			2. Small	Viva					
CM							Group	Quiz					
I-T							Discussion						
2.2													

The Assessment methods have been identified that are most suitable to the Specific Learning Objectives (SLOs) formed for each topic and as per the Domain of each Specific Learning Objectives (SLOs) to assess the learner.

In the above example, Multiple Choice Questions (MCQ), Short Answer Questions (SAQ), Viva Voce and Quiz are the assessment methods to be adopted for assessing the SLO. The Assessment Methods will vary as per the SLO and the Domain it covers.

They are further classified into formative and summative assessment methods.

Formative assessment methods will be used at the end of every topic to assess whether the student has achieved the desired SLOs and give feedback. In the above example, MCQ's, Viva, Quiz are the formative assessment methods to be used to assess the particular SLOs.

Summative assessment methods will be used to assess the student on a particular topic for internal assessment and the Final University Examination. In the above example, MCQ's, SAQ's are the summative assessment methods that would be used to assess whether the student has achieved these SLOs.

7. Integrated Learning

	Concepts of Health, Disease Causation & Prevention and Homoeopathy											
.X	, 3				er			Asses	ssment	-		
Competency	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilber	Priority	T-L M/M	Formative	Summative	Integration		
Hom	KS	KH	Concept	Discuss the history of	C-II	DK	1. Lecture	MCQ	MCQ,	Organon		
UG			of	health			2. Small	Viva	SAQ	of		
CM			health				Group	Quiz		Medicine		
I-T				Discuss the			Discussion					
2.1				biomedical,								
				ecological,								
				psychological, and								
				spiritual dimensions								
				of holistic health								
Hom	KS	K	Health	Define the term	C-I	DK	1. Lecture	MCQ	MCQ,			
UG				"Health" as per WHO.			2. Small	Viva				
CM							Group	Quiz				
I-T							Discussion					
2.2												

Horizontal or Vertical Integrated Learning with other subjects is required for a holistic understanding of the topic from different points of view.

In the above example, the above topic should be integrated with Organon of Medicine for betterunderstanding of the topic.

Spiral integration is required as the subject will be taught in II, III and IV BHMS.

Legend: Abbreviations

Sr. No	Acronym	Description
1.	PO	Programme outcomes
2.	СО	Course outcomes
3.	ACO	Annual Course Objectives
4.	SLO	Specific Learning Objective
5.	KS	Knowledge and Scholarship
6.	PC	Patient Care
7.	НО	Homoeopathic Orientation
8.	CS	Communication Skills
9.	PBL	Practice Based Learning and
		Improvement
10.	PRF	Professionalism
11.	K	Knows
12.	KH	Knows How
13.	SH	Shows How
14.	D	Does
15.	C-I/II/III	Cognitive Domain- Guilbert's Level-
		I/II/III
16.	P-I/II/III	Psychomotor Domain- Guilbert's
		Level-I/II/III
17.	A-I/II/III	Affective Domain- Guilbert's Level-
		I/II/III
18.	MK	Must Know
19.	DK	Desirable to Know
20.	NK	Nice to Know
21.	MCQ	Multiple Choice Question
22.	SAQ	Short Answer Question
		1

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23.	LAQ	Long Answer Question
24.	OSPE	Objective Structured Practical
		Examination
25.	OSCE	Objective Structured Clinical
		Examination

IV- Glossary of terms used in the template.

Goals

These are broad outcomes expected of a student at the end of the course of studies. These are to be contrasted with Objectives/Outcomes which are more specifically and narrowly defined.

Programme

A range of learning experiences offered to students in a formal manner over a period of one-to-four years leading to certificates/ diplomas/ degrees. Examples: BA (Economics) BSc (Physics). All possible formal degree Programmes are identified by UGC. BHMS is one such Programme

Programme Outcome

Programme Outcomes (POs) are what knowledge, skills and attitudes a graduate should have at the time of graduation. The Programme Outcomes of professional disciplines are identified at national level by the concerned accrediting agency. In this case, it would be the National Commission of Homoeopathy which would be involved.

Course

Course for the purpose of this Manual represents a subject e.g. Anatomy. In homoeopathic education some of the courses extend over several years e.g. Materia Medica. The relevance of this is in the formulation of Course Outcome

Course Outcome

Course Outcomes are statements that describe what students should be able to do at the end of a course. Where a Course extends over a number of years, it is necessary to define distinct Course Outcomes over the entire teaching programme of the subject. These will varyin depth and extent of the coverage of the subject.

Annual Course Objectives (ACO)

Annual course objectives are overarching goals or outcomes that educators set for an academic course to guide teaching, learning, and assessment for the particular year. These objectives serve as a roadmap for both teachers and students, outlining what is expected to be achieved by the end of the year in the course. They typically encompass the essential knowledge, skills, and competencies that students should acquire within the specified timeframe.

Competency

An observable ability of a health professional, integrating multiple components such as knowledge, skills, values, and attitudes. Since competencies are observable, they can be measured and assessed to ensure their acquisition.

Content:

Content is the group of sub-topics to be covered under each broad topic.

Millers Levels:

Miller's Pyramid is a diagrammatic representation of the convergence of learning. It maps the pathway of learning to show a person gains the ability and competence in a series of increasingly progressive phases of learning.

The broad base of this pyramid - 'Knows' – has the ability to recall facts and ideas that form the bedrock of professional requirements. 'Knows How' is the next phase of learning, where the students gains the insight into the relationships between the various units of 'knows' and can relate them meaningfully to reach the 'knows how' capacity. These phases would largely be in the Cognitive Domain of Bloom's Taxonomy of Learning Objectives.

Learning is not just about knowing and knowing how, but also to enable that the 'know how' is put into practice. This is the third phase of Miller's Pyramid – the 'Shows How'. During this phase of learning, the student is able to demonstrate the reasoning ability that he / she has acquired in controlled or real situations. This ability also includes the psychomotor dimension of Bloom's Taxonomy. The summit of pyramid, i.e., 'Does' also includes the emotional aspect

of learning in the form of values, attitudes, communication, etc, that denote the 'Affective Domain' of Bloom's Taxonomy.

The Miller's Pyramid is a valuable tool to represent the increasing levels of competencies that the students need to acquire, and also a framework to assess the level of competency that is achieved. Interestingly, the framework focuses on what the learner would be doing, rather than on what the teacher would be doing.

Specific Learning Objectives:

Specific Learning Objectives / Outcomes (SLOs) describe what students should know or be able to do at the end of a learning session, that they couldn't do before. These are written and communicated in a 'low context communication style', that is to say, whoever reads the SLO would have the same understanding that the person who wrote it had. That is, there would be no communication gap.

That is the reason why the SLOs are written specifically and exclusively as units of learning in one of the domains of Bloom, and further at one of the levels of Guilbert. This will ensure that the learning that is expected is clearly communication among all those who refer to it, including those who set the assessment and evaluate the student performance. Further, the SLOs are ALWAYS written with an ACTIVE verb, so as to make the statement observable and measurable.

Bloom's domain:

Bloom's Taxonomy of Educational Objectives is a tool for classifying learning under the categories of 'knowledge', 'skill', and 'attitude / value / communication', represented by the technical terms 'Cognitive', 'Psychomotor', and 'Affective' domains respectively. Each of these domains distinguish the dimension of learning in a particular area. The importance of such classification is that it offers a clear model for both teaching and students' assessment.

Guilbert's level:

Guilbert's Hierarchy is a tool that describes the various levels of learning that can be mapped and managed in the Bloom's domains of learning – cognitive, psychomotor, and affective. This tool also has the additional benefit to identify the appropriate teaching – learning methods / media, and also the assessment strategies.

In the 'knowledge' domain Guilbert's approach to learning proceeds from recall of facts to understanding / interpreting the different sets of data, and finally to the ability to make decisions and solve problems on the basis of the understanding / interpretation. This simple three-step process builds a sequential order of learning; it clearly brings out that decisions shall be made NOT on the basis of facts alone, but through a process of understanding and interpretation.

The 'skill' domain builds the learning from the stage of observing and imitation to gaining control over the skills and culminating in automatism of the skill. In simple terms, any skill will be learnt initially by observing its performance, and imitating the same in the sequential order. In the next phase, the learner tries to gain control over the skill initially under the supervision, and ultimately will be able to perform it independently.

Learning in the affective domain proceeds from the stage where the learner is open and receptive to the stimulus or trigger situation, responding to it in a desirable manner, and finally internalizing the responses.

Priority of learning:

The priority of learning is represented as 'Must know', 'Desirable-to-know', and 'Nice-to-know'. Prioritization is a critical component of curriculum design because it classifies the learning outcomes on the basis of their importance and usefulness for the ultimate professional standards. The priority of learning is objectively assigned by a formula that gives weightage on the basis of 'frequency and impact' of the learning for professional needs.

TL Method / Media:

The teaching-learning (TL) methods and media are the vehicles that enable the acquisition of stated outcomes. Teaching method is simply 'what the teacher does or what the teacher enables the students with', such as giving a lecture, conducting a demonstration, or facilitating a group discussion. Teaching-learning media is 'what the teacher or the students use' to enable the learning; with examples such as a board, or projector, or model, or specimen, among others.

The teaching-learning methods and media are specific to the domains and levels in the domains. It must also be remembered that learning is a continuum, and a range of methods and media would be appropriate in the different phases in the continuum of learning.

Assessment:

Assessment of learning is an important component of curriculum. This measures the Page 28 of 31

performance of the students in comparison to the expected outcomes of learning. Therefore the specific learning outcomes must be stated and communicated clearly and objectively to all the stakeholders of education. Assessment strategy is based on the domain and the level of domain in which the outcome is to be measured. Assessment could be judgemental for the extent and quality of outcomes, when it is called 'assessment of learning', or it could also be supportive for learning, when it is called as 'assessment for learning'. There are two major approaches to assessment – formative, and summative. The tools of assessment are provided in the annexure.

Formative Assessment:

Formative assessment is NOT judgmental, in that it does not brand the learner as 'pass' or 'fail'. The formative assessments measure the extent and quality of learning with reference to the expected learning outcomes, so that the students can be given feedback to improve on their performance. The formative assessments promote mastery learning, that is to say, each students achieves the stated level of mastery of performance because of the feedback and support. Formative assessment is also called as continuous assessment.

Summative Assessment:

Summative assessment has the mandate to judge the achievement of the learner at the end of a period of learning, and label him / her as 'pass' or 'fail, assign a rank, approve for eligibility to be promoted or eligibility to be admitted to a course. These assessments also serve as quality check to ensure that those who are being certified conform to a minimum standard of professional competence.

Objective Structured Practical Examination:

The Objective Structured Practical Examination (OSPE) is a type of assessment commonly used in medical education. It's designed to evaluate a student's practical skills and competencies in a structured and standardized manner.

In an OSPE, students rotate through a series of stations, each presenting a different task or scenario. These stations typically involve procedural techniques, or interpretation of diagnostic tests. At each station, students are assessed based on predefined criteria and checklist.

Objective Structured Clinical Examination:

The Objective Structured Clinical Examination (OSCE) is a widely used method of assessing clinical skills in medical education. It's designed to evaluate various competencies such as clinical reasoning, communication skills, physical examination techniques, and professionalism in a standardized and objective manner.

In an OSCE, candidates rotate through a series of stations, each representing a different clinical scenario or task. At each station, candidates are typically required to interact with simulated patients, perform specific clinical tasks, or respond to clinical questions within a set time frame, usually ranging from 5 to 15 minutes per station.

Scenarios can cover a wide range of clinical contexts, including history-taking, physical examination, clinical decision-making, counseling, and procedural skills. Trained assessors evaluate candidates based on predefined criteria, often using structured checklists or rating scales to provide consistent and objective feedback.

Integration:

Integration of learning is an essential requirement for aligning various data points of knowledge and skills for getting a holistic understanding and enabling a unified performance. Integration can be achieved at various dimensions and at various levels.

The dimensions of integration could be temporal in the form of Horizontal, Vertical, or Spiral. Horizontal integration is the alignment of learning on a longitudinal timeline, where the comparable contents of various subjects in the same term or year are integrated.

Vertical integration is seen in the subjects that build on the pre-existing knowledge and skills of another subject. For example, the integration between clinical subjects like Practice of Medicine with the para-clinical subjects such as pathology.

Spiral integration is where a subject is recurring at various levels in the same course. For example, Materia medica is learnt from the first to final BHMS, and the focus of the subject is not the same in each year. There would be iteration of the same knowledge from different perspectives and capabilities across the different phases of BHMS.

The levels of integration represent the increasing approximation of knowledge from different

subjects, so as to reach an approximation of fusion. The attempt to integration may begin with arranging the comparable contents of different subjects at the same cross sections of timeline. Further, there could be positioning the content of one subject into another subject to bring some kind of co-existence. Still further, the contents can be seamlessly merged to create an aligned learning content. Such integrative efforts can bring about holistic learning for a meaningful homeopathic capacity-building.

Subject: Homoeopathic Materia Medica

Subject code: HomUG-HMM-II

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1. Preamble

Homoeopathic Materia Medica is the study of the action of drugs on healthy human being as a whole taking into consideration individual susceptibility and its reaction to various circumstances and time. A good prescription by a Homoeopath mainly depends upon the case receiving, processing and a sound knowledge of Homoeopathic Materia Medica.

Each drug in Materia Medica not only has its own personality with its mental and physical constitution but also has its own affinity to an area, direction, spread, tissue, organ; system. Study of a drug in context of altered sensation, function and structure covers the Pathology caused by it, which is also expressed in the pathogenesis of the drugs. Materia Medica also has symptoms from Toxicological and Clinical proving. All this knowledge is of utmost importance in order to apply the remedies in various clinical conditions. This can be achieved only by integrating the study of Materia Medica with other parallel subjects taught during the course.

Apart from the source books of Materia Medica there are different types of Materia Medica constructed on different philosophical backgrounds by different authors. Materia Medica also forms the platform of various repertories. Therefore, it becomes very important for a student of Homoeopathy to learn theplan and construction of all the basic Materia Medica in order to understand their practical utility in practice.

It is also important to keep in mind that the end point of the teaching of HMM is not to burden the student with information of a greater number of remedies but to equip with an approach which will help to develop the vision towards self-guided study and apply the knowledge in practice.

This self-directed learning can ultimately lead to a critical approach of studying Materia Medica hence empowering evidence-based practice and initiate the process of lifelong learning. Exploring Materia Medica is an endless journey as newer illnesses will keep on emerging and newer drugs or undiscovered facets of existing drugs will be needed to explore for managing these situations.

2. Course outcomes

- i. To grasp the basic concept and philosophy of Homeopathic Materia Medica based on Hahnemannian directions
- ii. To understand the different sources and types of Materia Medica
- iii. To mould Homoeopathic students by equipping them to readily grasp the symptoms of the sick individual corresponding to the symptoms of the drug.
- iv. To understand the drug with its pharmacological data, adaptability, sphere of action, along with characteristic sensations and functions both at level of mind and body along with doctrine of signatures.
- v. To construct the portrait of the drug with its predisposition, disposition both mental and physical, diathesis and disease expression with Miasmatic correlation and its susceptibility expression at various times taking in to consideration of the environment around him/her.
- vi. To understand the drug from its therapeutic application in various pathological conditions and allied clinical subjects like practice of medicine, surgery, obstetrics and gynaecology.
- vii. To understand the group characteristics of the drugs and the individualizing symptoms of the individual remedies of the group.
- viii. To differentiate medicines arising from the reportorial process and to arrive at an appropriate similimum.
- ix. To grasp the concept of remedy relationship and its application in practice
- x. To understand the Miasmatic expressions and evolution in a given drug
- xi. To understand and apply the bio-chemic system of medicine in practice
- xii. To understand and apply the utility of mother tinctures in practice

3. Learning objectives

At the end of BHMS II course, the students should be able to-

- i. Discuss the different approaches for studying Homoeopathic Materia Medica.
- ii. Understand the drug picture of medicines in the syllabus of II BHMS in context of its pharmacological data, constitution, temperament, sphere of action, pathogenesis, ailments from, modalities, mentals, physical generals and particulars, miasm and relationship with other remedies including the doctrine of Signature.
- iii. Integrate the knowledge of Anatomy, Physiology, Pharmacy, Psychology, Organonof Medicine, Pathology and Toxicology for the understanding of a particular drug.
- iv. Compare and contrast symptoms of similar remedies of I and II BHMS syllabus.
- v. Demonstrate the steps of case taking as per guidelines given in Organon of medicine.
- vi. Demonstrate basic physical examination skills.
- vii. Recognisethe importance of interpretation of basic investigations in a given case.
- viii. Analyse the symptoms of a case to categorize them as Mentals, Physical Generals and Particulars.
- ix. Recognise the PQRS of a drug in the case taken.

4. Course content and its term-wise distribution(theory)

4.1 Introductory lectures

- **4.1.1** Assessment of Entry Behaviour for I BHMS syllabus
- **4.1.2** Different approaches for studying Homoeopathic Materia Medica
- **4.1.3** Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in a better understanding of Homoeopathic Materia Medica

4.2 Homoeopathic medicines:

1. Acetic Acid	17.Cactus Grandiflorus	33. Helleborus Niger
2. ActeaRacemosa	18. Calcarea Arsenicosa	34. Hyoscyamus Niger
3. Aesculus Hippocastanum	19.Calcarea Iodata	35. Kali Bichromicum
4. AgaricusMuscarius	20. Camphora	36. Kali Bromatum
5. Agnus Castus	21. Cannabis Indica	37. KaliCarbonicum
6. Alumina	22. Cannabis Sativa	38.Natrum Carbonicum
7. Ambra Grisea	23. Cantharis	39. Nux Moschata
8. AnacardiumOrientalis	24. Cardus Marianus	40. Opium
9. Antimonium Arsenicosum	25. Causticum	41. Petroleum
10. ApocynumCannabinum	26. Ceanothus Americanus	42. Phosphorus
11. Arsenicum Iodatum	27. Chelidonium Majus	43. Secale Cornutum
12. Argentum Nitricum	28. Chininum Arsenicosum	44. Sepia
13. BaptisiaTinctoria	29. Digitalis Purpurea	45. Stramonium
14. Berberis Vulgaris	30. Echinacea Angustifolia	46. Thuja Occidentalis
15. Bellis Perennis	31. Equisatum Hyemale	47. Urtica Urens
16. Bromium	32. Ferrum Metallicum	48. Veratrum Album
	I	

4.3 Content for Term I

4.3.1 Introductory Lectures:

- **4.3.1.1** Assessment of Entry Behavior for I BHMS syllabus
 - **4.3.1.1.1** Different approaches for studying Homoeopathic Materia Medica
- **4.3.1.2** Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia Medica

4.3.2 Homoeopathic medicines:

1. Acetic Acid	9. Cardus Marianus	17. Kali Bromatum
2. Aesculus Hippocastanum	10. Causticum	18. Kali Carbonicum
3. Agaricus Muscarius	11. Ceanothus Americanus	19. Natrum Carbonicum
4. Alumina	12. Chelidonium Majus	20. Opium
5. Anacardium Orientalis	13. Chininum Arsenicosum	21. Thuja Occidentalis
6. Apocynum Cannabinum	14. EchinaceaAngustifolia	22. Urtica Urens
7. Baptisia Tinctoria	15. Helleborus Niger	
8. Bellis Perrenis	16. Kali Bichromicum	

4.4 Contents for Term II:

Homoeopathic medicines:

1. Actea Racemosa	11. Calcarea Iodatum	21. Petroleum
2. Agnus Castus	12. Camphora	22. Phosphorus
3. Ambra Grisea	13. Cannabis Indica	23. Secale Cornuatum
4. AntimoniumArsenicosum	14. Cannabis Sativa	24. Sepia
5. Argentum Nitricum	15. Cantheris	25. Stramonium
6. Arsenicum Iodatum	16. DigitalisPurpurea	26. Veratrum Album
7. Berbers Vulgaris	17. EquisatumHyemale	
8. Bromium	18. Ferrum Metallicum	
9. Cactus Grandifloria	19. Hyoscyamus Niger	
10. Calcarea Aarsenicosum	20. Nux Moschata	

Non-lectures shall be equally distributed to both term I and II, as per the feasibility of individual institution

5. Teaching hours

5.1. Gross division of teaching hours

Homoeopathic Materia Medica							
Year	Teaching hours- Lectures	Teaching hours- Non-lectures					
II BHMS	150	100					

5.2. Teaching hours theory

S. No.	List of Topics	Hours
1.	Assessment of Entry Behavior of I BHMS syllabus	2
2.	Different approaches for studying Homoeopathic Materia Medica	4
3.	Integrating the knowledge of Pathology and Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia Medica	2
4.	Study of Drug pictures (Term I)	70
5.	Study of Drug pictures (Term II)	72
	Total	150

5.3. Teaching hours Non-lecture

Sr. No	Non-Lecture Teaching Learning methods	Term	Time Allotted per Activity
			(Hours)
1	Clinical(to be integrated with topics under Pathology, Practice of Medicine, Surgery and ObGy)	I & II	75
2	Demonstrattion	I & II	25 (Distribution as mentioned below)
2(a)	Seminar / Tutorials		10
2(b)	Problem based learning/ Case Based Learning		10
2(c)	Assignment/ Symposium / Group discussion		5
	Total		100

6. Content mapping (competencies table)

6.1 Competencies table theory

Sl. No.	Compet ency	Millers Level:	Content	SLO/ Outcome	Blooms Domain	Prior ity	T-L Methods/ media	Assessment Integr		Integration
					Guilbert' s Level		meuia	Formati ve	Summ ative	
HomUG -HMM- II-1.	K & S PC HO	KH K	Assessment of Entry Behaviour of I BHMS syllabus	Recall the knowledge of I BHMS syllabus for Materia Medica	C1	MK	Group Discussio n	MCQ, viva	MCQ SAQ LAQ	Spiral integration with Homoeopathic Materia Medica Vertical integration with Anatomy,Physio logy,Pharmacy,
HomUG -HMM- II-2.1 HomUG -HMM- II-2.2			Different approaches for studying Homoeopathic Materia medica	Enumerate the different approaches for studying Homoeopathic Materia medica Explore the scope and limitation of each approaches for studying Homoeopathic Materia Medica	C2	MK	Lecture PPT Library reference s	MCQ Assignm ent Project viva	SAQ	Psychology, Organon) Horizontal integration with subjects of Pathology , Toxicology , Physiology Organon , Anatomy , Psychology and Homoeopathic pharmacy

Sl. No.	Compet ency	Millers Content SLO/ Outcome Blooms Domain		Prior ity	T-L Methods/ media	Assess	ment	Integration		
					Guilbert' s Level		meuia	Formati ve	Summ ative	
HomUG -HMM- II-3.			Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia medica	Integrate the knowledge of Pathology, toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in understanding the evolution of symptoms of remedies	C2	MK	Lecture Team teaching	MCQ Assignm ent Project viva	SAQ	Horizontal integration with subjects of Pathology Toxicology, and Organon
HomUG -HMM- II-4.1	K & S PC HO	KH K	Individual Homoeopathic medicines	Mention the common name, source/ family/kingdom and the prover	C1	NK	Lecture/ Specimen	MCQ Viva	MCQ	Vertical integration with Pharmacy
HomUG -HMM- II-4.2				Correlate with doctrine of signature	C2	NK	Lecture/ Specimen	MCQ Viva	MCQ	Vertical integration with Pharmacy and Physiology
-HMM- II-4.3				List the sphere of action	C1	MK	Lecture Self – learning	Assignm ent Project	LAQ SAQ MCQ	Horizontal

Sl. No.	Compet ency	Millers Level:			Prior ity	T-L Methods/ media	Assessment		Integration	
					Guilbert's Level		media	Formati ve	Summ ative	
								MCQ	Viva	Integrationwith Pathology, Toxicology,
HomUG -HMM- II-4.4				Narrate the 'ailments from'	C1		Small Group Discussio	Viva		ObGy,PM, Surgery and Organon
HomUG -HMM- II-4.5				Describe the constitution and temperament	C1		n Black Board			Vertical integration with
HomUG -HMM- II-4.6				Explain the mental symptoms	C1		PPT			Anatomy Pharmacy , Psychology and
HomUG -HMM- II-4.7				Explain the physical generals	C1	-	Handouts Role play			Physiology
HomUG -HMM- II-4.8				Outline the general modalities	C1		PBL			
HomUG -HMM- II-4.9				Describe the particular symptoms and modalities	C2	-				
HomUG -HMM- II-4.10				Correlate pathogenesis with knowledge of Toxicology, Pathology, Practice of Medicine, Surgery and	C2					

Sl. No.	Compet ency	Millers Level:	Content	SLO/ Outcome	Blooms Domain	Prior ity	T-L Methods/	Assess	ment	Integration
					Guilbert' s Level		media	Formati ve	Summ ative	
				Gynaecology-Obstetrics and miasm						
HomUG -HMM- II-4.11				Mention the Relationships of medicines	C2					
HomUG -HMM- II-4.12				Compare and contrast from the related remedies of First and Second BHMS Syllabus	C2					

6.2 Competencies table practical/clinical

S. No.	Domain of	Millers	Content	SLO/ Outcome	Blooms	Priority	T-L	Asse	ssment	Integration
	Competen cy	Level:			Domain / Guilbert 's Level	·	Methods/media	Formative	Summative	
HomUG- HMM- II-5.1	K & S PC HO CS	SH KH	Case taking	Demonstrate the steps of case taking as per guidelines given in Organon of medicine.	P/A2	MK	Demonstration Checklist	CBD Small project	Clinical performance	Horizontal Integration with Pathology, ObGy, Surgery, Practice of Medicine
HomUG- HMM- II-5.2	PBLI Prf		Clinical examination	Demonstrate the basic clinical examination skills	P/A2					and Organon
HomUG- HMM- II-5.3			Interpretatio n of investigation	Recognise the importance of interpretation of basic investigations.	C2					
HomUG- HMM- II-5.4			Case analysis	Analyse the symptoms to segregate the characteristic Mentals,Physic al General and Particulars	C2					

7. Teaching learning methods

Lectures (Theory)	Non-lectures (Practical/Demonstrative)
Lectures	Clinical demonstration
Small group discussion	Problem based discussion
Integrated lectures	Case based learning
	Tutorials
	Seminars
	Symposium
	Assignments
	Library reference
	Self-learning

8. Details of assessment

8.1 Overall Scheme of Assessment (Summative)

Sr. No	Professional	Term I (1-6 Mo	onths)	Term II (7-12 Months)		
	Course					
1	Second Professional BHMS	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	FUE (end of 12 months)	
		10 Marks Viva	i) Viva voce -25 marks ii) Clinical performance - 25 marks (Case Taking and analysis of symptoms)	10 Marks Viva	100 marks theory	100 marks (Clinical/practical+ Viva+ IA)

PA: Periodical Assessment; TT: Term Test; FUE: Final University Examinations; IA: Internal Assessment

8.2 Number of papers and marks distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical/ Clinical	Viva Voce	Internal	Grand Total
						Assessment**	
1	HomUG-HMM-II	01	100 marks*	50 marks	40 marks	10 marks	200marks
				i) Journal -10		(Marks of PA	
				marks (Five acute		I + TT I + PA	
				and 5 chronic		II)	
				cases)			
				ii) Case taking and			
				analysis of			
				symptoms 40			
				marks			

^{*30 %} of questions shall be from I BHMS syllabus and 70 % of questions shall be from II BHMS syllabus.

Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) $/ 70 \times 10$

^{**}Method of calculation of Internal Assessment marks for Final University Examination:

8.3 Paper Layout

Summative assessment (FUE): Theory- 100 marks

MCQ	10 marks
SAQ	40 marks
LAQ	50 marks

8.4 Distribution of questions for theory exam

Sr. No	Paper			D Type of Questions		
	A List of Topics	B Term	C Marks	MCQ (1 Mark)	SAQ (5 Marks)	LAQ (10 Marks)
1	BHMS I Syllabus	-	Refer to table 8.5 below	05	03	01
2	Different approaches for studying Homoeopathic Materia Medica	I		0	01	0
3	Integrating the knowledge of Pathology and Toxicology in better understanding ofHomoeopathic Materia Medica	I		0	0	0
4	Homoeopathic Medicines of II BHMS (48)	I&II		05	04	04

8.5 Theme-wise distribution:

Theme	Topics	Term	Marks	MCQ's	SAQ's	LAQ's
A-D	BHMS I Syllabus	-	30	5	3	1
Е	Different approaches for studying Homoeopathic Materia Medica	I	5	0	1	0
F	Homoeopathic Medicines of II BHMS (48)	I&II	65	5	4	4

8.6 Question paper blueprint

A	В	Question Paper Format
Question Serial Number	Type of Question	(Refer table 8.5 for themes)
Q1	Multiple Choice Questions(MCQ)	1. Theme A-D
	10 Questions	2. Theme A-D
	10 Questions	3. Theme A-D
	1 mark each	4. Theme A-D
	All compulsory	5. Theme A-D
	All compulsory	6. Theme F
	Must know part: 7 MCQ	7. Theme F
	Desirable to know 2 MCO	8. Theme F
	Desirable to know: 2 MCQ.	9. Theme F
	Nice to know: 1 MCQ	10. Theme F

Q2	Short answer Questions (SAQ) Eight Questions 5 Marks Each All compulsory Must Know part: 6 SAQ Desirable to Know: 2 SAQ	 Theme A-D Theme A-D Theme A-D Theme E Theme F Theme F Theme F Theme F Theme F
Q3	Long answer Questions (LAQ) Five Questions 10 marks each All compulsory All questions on Must Know No Questions on Nice to Know and Desirable to Know	1. Theme A-D 2. Theme F 3. Theme F 4. Theme F 5. Theme F

9. List of recommended text/reference books

- Allen H.C. (2005). Keynotes Rearranged and Classified with Leading Remedies of the Materia Medica and Bowel Nosodes, (Reprint edition), B.Jain Publishers, New Delhi
- Choudhuri N.M. (2006). A Study On Materia Medica Enriched with real case studies, (Reprint revised edition). B. Jain Publishers, New Delhi.
- Kent J.T. (2015). Lectureson Homoeopathic Materia Medica (Reprint edition,) B.Jain Publishers, New Delhi.
- Burt W. (2009). Physiological Materia Medica, (Third edition) B. Jain Publishers, New Delhi.
- NashE.B. (2007).Leaders in Homeopathic Therapeutics with Grouping and Classic fication, (Sixth edn.)B Jain Publishers, New Delhi.
- TylerM.L. (2007). Homoeopathic Drug Picture. (First edition), B Jain Publishers, New Delhi.
- FarringtonE.A. (2007) Lectures on Clinical Materia Medica in family order (Fourth edition.) B Jain Publishers Pvt Ltd, New Delhi.
- FarringtonE.A. (2005), Comparative Materia Medica. (Reprint edition.) B.Jain Publishers, New Delhi.
- Boericke W,Dewey W,2016,The Twelve Tissue Remedies by Schussler,Reprint edition,B.Jain Publishers,New Delhi
- All source books.

10. List of contributors

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1. Preamble

Organon of Medicine with Homoeopathic Philosophy is a central fulcrum around which education and training of a homoeopathic physician revolves. It lays down the foundations of homoeopathic practice, education, training and research. It not only elaborates on the fundamental laws but also how to apply them in practice. It defines the qualities of a healer, guides the homoeopathic physician in inculcating values and attitude and develop skills.

Nature nurtures us. It is well depicted in our science. Therefore, Homoeopathy is in synchronization with nature. The need to keep life force within us well balanced with nature is well established in the Organon of Medicine by Dr Hahnemann. Dr Hahnemann as an ecologist was well ahead of his time. Philosophically, it connects man and his actions to the dynamic forces available in nature, thus bringing to fore the holistic approach. Lateralization of these concepts helps the student to develop insight into various facets of Life & Living. Homoeopathic philosophy orients the students to homoeopathy as an Art & Science. It's comprehensive understanding needs a core competency in logic and the concepts of generalization and individualization. Its treatment of disease process and relating to the concept of miasm makes it a study of the process of scientific investigation.

The biggest challenge in teaching-learning of homoeopathic philosophy is to first understand the fundamentals according to the Master's writing and then demonstrate them in practice. Quality and real time integration with other subjects helps a student to conceive the holistic perceiving of Man and Materia Medica. The concepts and knowledge required by the Physician with operational knowledge of management of patients and their diseases will need horizontal and vertical integration with Homoeopathic subjects and clinical subjects. First BHMS will need horizontal integration with Anatomy, physiology, pharmacy and HMM. Homoeopathic philosophy will have spiral integration with itself and vertical integration with clinical subjects. Second year will need integration with pathology, community medicine, forensic medicine, along with other homoeopathic subjects. Third and fourth year establishes links with clinical subjects, research methodology and pharmacology.

Science is never static. Since the time of Dr.Hahnemann, medical science has advanced by leaps and bounds. Since Homoeopathy is based on principles rooted in nature, they would stand the test of time. However, their application in the changing times and circumstances would find newer avenues to heal. This is an opportunity for a homoeopath to connect the current advances while relating with the fundamental laws. Mastering all this will make him a master healer and will move him towards higher purpose of existence.

2. Course outcomes

At the end of the BHMS program, a student will be able to-

- i. Understand Mission of a Physician & Higher Purpose of Existence as per the Master's thoughts and words
- ii. Understand Hahnemannian concept of man and integrating it with the conceptfrom the bio-psycho-social perspective.
- iii. Know homoeopathy as a Holistic & Individualistic medical science
- iv. Understand the concept of dynamism and vital force to get insight in health, disease, diathesis and disease.
- v. Relate concepts of Prevention, Promotion & Cure with the Hahnemannian approach
- vi. Know the Healer within the Homoeopathic Physician and work towards bringing forth the qualities of healing.
- vii. Understand Philosophy of Life & Health by applying basic fundamental laws of Homoeopathy.
- viii. Understand homoeopathic philosophy in the context of research

3. Learning outcomes

- i. Understanding the evolution of chronic disease in view of pathogenesis
- ii. Knowing Hahnemannian classification of diseases and its importance
- iii. Correlation of Microbiology and Homeopathy with miasms.
- iv. Correlation of laboratory investigation with the evolution of pathology and miasm
- v. Learning the concept of prevention of disease
- vi. Understanding the concept of causation and relating to homoeopathy
- vii. Classification and analysis of symptoms and correlation with repertory.
- viii. Developing a portrait of disease by integrating the Hahnemannian concept

4. Course content and its term-wise distribution

Sl. No.	Topic					
	Term I					
1.	Natural Disease vs Artificial Disease (Aphorisms 28-33)*					
2.	The Correctness of Homoeopathic Therapeutic Law of Nature (Aphorisms 34-51)*					
3.	Classification of Diseases (Hahnemannian Classification of Disease) with Introduction to Miasm (Aphorisms 71-82)*					
4.	Case Taking (Aphorisms 83-103)*					
5.	Homoeopathic Philosophy:					
5.1	Symptomatology: Details regarding Symptomatology are to be comprehended by referring to the relevant aphorisms of Organon of medicine and chapters of the books on homoeopathic philosophy.					
5.2	Case taking: The purpose of homoeopathic case-taking is not merely the collection of disease symptoms from the patient but comprehending the patient as a whole, with the correct appreciation of the factors responsible for the genesis and maintenance of illness. Hahnemann's concept and method of case-taking, as stated in Organon is to be stressed. Case receiving-perceiving techniques and symptoms-grading needs to be introduced and discussed. The prerequisite of the physical environment & of the physician also needs to be outlined.					
5.3	Case processing: This includes-					
5.3.1	Analysis of Symptoms					
5.3.2	Evaluation of Symptoms					
5.3.3	Totality of symptoms					
5.3.4	Susceptibility					
	Term II					
6.	Record Keeping (Aphorism 104)*					
7.	Various Systems of Medicine (Aphorisms 52-70)*					
8.	Causation: Thorough comprehension of the evolution of disease, taking into account pre-disposing, fundamental, exciting and maintaining causes.					
9.	Individuality- individualization- its process					
10.	Anamnesis- evolution of disease					
11.	Disease-its progress- complex disease relation with miasm					
12.	Introduction to the concept of suppression					

5. Teaching hours

5.1. Gross division of teaching hours

Organon of Medicine and Homoeopathic Philosophy						
Year	Teaching hours- Lectures	Teaching hours- Non-lectures				
II BHMS	150	100				

5.2 Teaching hours theory

Sl.	List of Topics	Hours
No		
1.	Natural Disease vs Artificial Disease	05
2	The Correctness of Homoeopathic Therapeutic Law of Nature	20
3	Classification of Diseases with introduction to Miasm	20
4	Case Taking (Aphorisms 83-103)	20
5	Symptomatology	07
6	Case taking (Homoeopathic Philosophy)	12
7	Case processing	15
8	Various systems of Medicine	15
9	Record Keeping	02
10	Causation	15

11	Anamnesis-evolution of disease,	16
	Disease its progress-complex disease,	
	Individualization-its process,	
	Susceptibility- types and factors modifying it	
12	Introduction to the concept of suppression	3
	Total	150

5.3. Teaching hours Non-lecture

Sr. No	Non-Lecture Activity	Term	Time Allotted per Activity (Hours)
1	Clinical(to be integrated with topics under Pathology, Practice of Medicine, Surgery and ObGy)	I & II	75
2	Demonstrative	I & II	25
2(a)	Seminar / Tutorials		10
2(b)	Problem based learning/ Case Based Learning		10
2(c)	Assignment/ Symposium / Group discussion		5
	Total		100

6. Competencies tables

6.1 Natural disease vs artificial disease (Aphorism 28-33)

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Asses	sment	Integration
	Competency				Guilbert			F	S	
HomUG-	K& S	K	Aphorism	Define modus	Cognitive	Must	Lecture	MCQ	MCQ	Spiral
OM-II	НО		28-33	opernadi of	Understand	Know	Small	SAQ	SAQ,	Pharmacy
1.1				homoeopathic	and interpret		Group		Viva	
			Artificial	cure	Level II		Discussion			
HomUG-			disease is	Define and						
OM-II			stronger	differentiate						
1.2			than	between						
			Natural	Natural and						
			disease	Artificial						
				Disease						
HomUG-				Identify factors						
OM-II				differentiating						
1.3				Natural &						
				Artificial						
				Disease						
HomUG-				Compare the						
OM-II				strength of						
1.4				Natural Disease						
				vis-à-vis						
				Artificial						
				Disease						
				7 10						
HomUG-				Justify the						
OM-II				superiority of						
1.5				Artificial						
				Disease						

6.2 The correctness of Homeopathic therapeutic law of nature(Aphorisms 34-51)

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Asses	sment	Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	K	Aphorism	Describe the	Cognitive	Must	Lecture	MCQ	MCQ	
OM-II	НО		34-35	factors needed to	Understand	Know	Small	SAQ	SAQ,	
2.1			Therapeuti	cure a disease	and		Group		Viva	
			c Law of		interpret		Discussion			
			Nature		Level II					
HomUG-		K	Aphorism	Compare the	Cognitive	Must	Lecture	MCQ	MCQ	
OM-II			36-42	different	Understand	Know	Small	SAQ	SAQ,	
2.2			Discuss	scenarios viz.	and		Group		Viva	
			what	Natural diseases	interpret		Discussion			
			happens	meet, Natural	Level II					
			when two	and Artificial						
			dissimilar	Disease meet						
			diseases							
			meet in							
			nature							
HomUG-		K	Aphorism	Compare the	Cognitive	Must	Lecture	MCQ	MCQ	
OM-II			43-45	scenarios viz.	Understand	Know	Small	SAQ	SAQ,	
2.3			Discuss	Natural diseases	and		Group		Viva	
			what	meet, Natural	interpret		Discussion			
			happens	and Artificial	Level II					
			when two							
			Similar							
			diseases							
			meet in							
			nature							

HomUG-	K & S	K	Aphorism	List the	Cognitive	Must	Lecture	SAQ	MCQ,	
OM-II	НО		45-46	examples of cure	Recall	Know	Small		SAQ,	
2.4			Examples	in nature	LevelI		Group		Viva	
			of				Discussion			
			Homeopat							
			hic Cure							
HomUG-		K	Aphorism	Discuss the	Cognitive	Must	Lecture	MCQ,	SAQ,	
OM-II			47-49	learning from	Understand	Know	Small	SAQ	LAQ,	
2.5			Learning	the nature's	and		Group		Viva	
			from	examples of cure	interpret		Discussion			
			Nature		Level II					
HomUG-		K	Aphorism	Discuss the	Cognitive	Must	Lecture	MCQ,	SAQ,	
OM-II			50	effect of Natural	Understand	Know	Small	SAQ	LAQ,	
2.6			Hazardous	diseases used for	and		Group		Viva	
			Homoeopa	treating similar	interpret		Discussion			
			thic	Natural Diseases	Level II					
			Remedy							
HomUG-		K	Aphorism	Discuss artificial	Cognitive	Must	Lecture	MCQ,	SAQ,	Pharmacy
OM-II			51	morbific agents	Understand	Know	Small	SAQ	LAQ,	(V)
2.7			Advantage	and their	and		Group		Viva	Materia
			of	advantage over	interpret		Discussion			Medica (V)
			Homoeopa	natural diseases	Level II					
			thic							
			medicines							

6.3 Classification of disease (Hahnemannian classification of disease) with introduction of miasm (Aphorisms 71-82)

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Asses	sment	Integration
	Competency				Guilbert			F	S	
HomUG -OM-II 3.1 HomUG -OM-II 3.2	K & S HO	K	Aphorism 71 Homeopath ic System of Medicine	List the points necessary in the operation of curing Discuss Hahnemann's classification of disease	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ SAQ	MCQ SAQ Viva	Organon (Spiral) Aphorism 3
HomUG -OM-II 3.3		КН	Aphorism 72 General Survey of Diseases	Define Acute disease Define Chronic disease Illustrate with examples	Cognitive Understand and interpret Level II	Must Know	Caselet Lecture Small Group Discussion	MCQ SAQ	MCQ SAQ Viva	Organon (Spiral) Vital force
HomUG -OM-II 3.4	K & S HO P C	K	Aphorism 73 Acute Diseases	List the types of acute diseases Illustrate with examples of each	Cognitive Understand and interpret Level II	Must Know	Caselet Lecture Small Group Discussion	MCQ SAQ Quiz	MCQ SAQ LAQ Viva	Practice of Medicine (H/V)
HomUG -OM-II 3.5		K	Aphorism 74-76 Chronic Diseases	List examples of Chronic diseases Define Iatrogenic Disease with examples Management of Iatrogenic Diseases	Cognitive Understand and interpret Level II	Must Know	Caselet Lecture Small Group Discussion	MCQ SAQ	MCQ SAQ LAQ Viva	Modern Pharmacolog y (H)

HomUG		K	Aphorism	Define	Cognitive	Must	Caselet	MCQ	MCQ	
-OM-II			77	Inappropriately	Understand	Know	Lecture	SAQ	SAQ	
3.6			Pseudo-	named chronic	and		Small		LAQ	
			chronic	diseases	interpret		Group		Viva	
			Diseases	List the causes	Level II		Discussion			
				of the same						
				Examples						
HomUG	K & S	K	Aphorism	Define and	Cognitive	Must	Caselet	SAQ	MCQ	
-OM-II	НО		78	discuss true	Understand	Know	Lecture		SAQ	
3.7	PC		True	natural Disease	and		Small		LAQ	
			Chronic		interpret		Group		Viva	
			Diseases		Level II		Discussion			
HomUG		K	Aphorism	Define Miasm	Cognitive	Must	Caselet	SAQ	MCQ	Pathology
-OM-II			79	Recognise the	Understand	Know	Lecture		SAQ	(H)
3.8			Syphilis &	miasms	and		Small		LAQ	
			Sycosis	Identify the	interpret		Group		Viva	
				primary	Level II		Discussion			
				presentation of						
				miasm						
HomUG		K	Aphorism	Identify the	Cognitive	Must	Caselet	SAQ	MCQ	Pathology
-OM-II			80-81	primary	Understand	Know	Lecture		SAQ	(H)
3.9			Psora	presentation of	and		Small		LAQ	
				Psora	interpret		Group		Viva	
				List the types of	Level II		Discussion			
				presentations of						
				Psora						
				Summarise						
				footnote 77						
				List the causes						
				that influence						
				transformation						
				of Psora						

HomUG	K	Aphorism	Discuss the	Cognitive	Must	Caselet	SAQ	SAQ	
-OM-II		82	management of	Understand	Know	Lecture		Viva	
3.10		Managem	Chronic diseases	and		Small			
		ent of		interpret		Group			
		Chronic		Level II		Discussion			
		Diseases							

6.4 Case taking (Aphorisms 83-103)

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Asses	sment	Integration
	Competency				Guilbert	Ū		F	S	
HomUG	K & S	ΚH	Aphorism	List the	Cognitive	Must	Lecture	MCQ	MCQ	
-OM-II	НО		83	prerequisites for	Understand	Know	Small	SAQ	SAQ	
4.1	P C		Prerequisites	case taking	and		Group	Viva	Viva	
			for case	Discuss	interpret		Discussion			
			taking	techniques to	Level II		Case			
				develop and			simulation			
				improve on						
				these						
HomUG	K & S	K	Aphorism	Explain the	Cognitive	Must	Lecture	MCQ	MCQ	
-OM-II	НО	ΚH	84-89	steps of case	Understand	Know	Case	SAQ	SAQ	
4.2	PC	S H	History	taking	and		simulation		Viva	
	PBL		taking	Discuss the dos	interpret		Case			
	C S			and don'ts of	Problem		discussion			
				case taking	solving		OPD/IPD			
					Level II&		in small			
					III		groups			
					~	3.5	-	1.000	1.500	
HomUG	K & S	KH	Aphorism	List the various	Cognitive	Must	Lecture	MCQ	MCQ	Anatomy/
-OM-II	НО	SH	90	headings to	Understand	Know	Movies	SAQ	SAQ	Physiology
4.3	PBL	D	Physician's	observe in a	and		/clips	Check- list	Viva	(Spiral)
			observation	patient				HSt		

				Discuss the importance of these observations Co-relate with Materia Medica and Repertory	interpret Level II Psychomot or Level I & II		Case simulation			Practice of Medicine (Horizontal) Materia Medica (H & S) Repertory (H & S)
HomUG -OM-II 4.4	K & S HO P B L	K K H	Aphorism 91 Original Unmodified Picture	Discuss the importance of noting the original form of disease	Cognitive Understand and interpret Level II	Must Know	Lecture Caselet	MCQ SAQ	MCQ SAQ Viva	,
HomUG -OM-II 4.5	K & S P C	K	Aphorism 92 Case taking in acute disease	Discuss the importance of case taking in acute cases	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion Caselet	MCQ SAQ	MCQ SAQ Viva	
HomUG -OM-II 4.6	K & S HO P C P B L C S	K KH	Aphorism 93 Obvious cause of the Disease	Discriminate between various causes of sensitive nature Ask relevant questions	Affective Level I	Must Know	Lecture Small Group Discussion Role play	MCQ SAQ	MCQ SAQ Viva	Fundamentals of Psychology (S)
HomUG -OM-II 4.7	K & S HO P C C S	КН	Aphorism 94 General cause of the Disease	Plan the case taking to ascertain the maintaining cause if any	Cognitive Decision /Problem Solving Level III	Must Know	Lecture Small Group Discussion Case simulation OPD/IPD	MCQ SAQ	MCQ SAQ Viva	Aphorism 5 Organon (S)

HomUG -OM-II 4.8	K & S HO P C	КН	Aphorism 95 Case taking in chronic disease	Design the case taking in chronic disease Evaluate the importance of accessory symptoms	Cognitive Decision /Problem Solving Level III	Must Know	Lecture Small Group Discussion Case simulation OPD/IPD	MCQ SAQ	MCQ SAQ LAQ Viva	
HomUG -OM-II 4.9	K & S HO C S	K	Aphorism 96-97 Disposition s of patients in case taking	Differentiate the dispositions of patients while answering Differentiate between Hypochondriac s and Feigners (malingering) Analyse the reasons behind the disposition	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion Case simulation OPD/IPD	MCQ SAQ	MCQ SAQ Viva	Fundamentals of Psychology (S) Symptomatol ogy Organon
HomUG -OM-II 4.10	K & S HO P B L C S	K	Aphorism 98 Demands of Case taking	Analyse the answers given by the friends and attendants Compare that with the patient's answer Listen to the patients' answers	Cognitive Understand and interpret Level II Affective Level I	Must Know	Lecture Small Group Discussion Case simulation OPD/IPD	MCQ SAQ	MCQ SAQ Viva	Psychology (S)
HomUG -OM-II 4.11	K & S HO	K	Aphorism 99	Discuss the advantages of case taking in	Cognitive Understand and	Must Know	Lecture	MCQ SAQ	MCQ SAQ Viva	

			Case taking in acute	vis-à-vis	interpret Level II		Small Group			
			disease	chronic case			Discussion			
HomUG	K & S	K	Aphorism	Discuss the	Cognitive	Must	Lecture	MCQ	MCQ	Organon (S)
-OM-II	НО		100-103	salient points of	Understand	Know	Small	SAQ	SAQ	
4.12	P C		Case taking	case taking in an	and		Group		Viva	
	Community		in epidemic	epidemic or	interpret		Discussion			
	Health		and	sporadic disease	Level II					
			sporadic	Differentiate						
			disease	between						
				common and						
				characteristic						
				symptom in						
				above cases						
				Discuss the						
				concept of						
				Genus						
				epidemicus						

6.5 Symptomatology

Sl. No	Domain of	Mille	Content	SLO	Bloom/	Priorit	TL	Assess	ment	Integration
	Competenc	r			Guilbert	y	MM	F	S	
	<u>y</u>									
HomUG	K & S	K	Define	Define	Cognitive	Must	Class	MCQ	LAQ	Horizontal with
-OM-II			Symptoms and	Objective and	Understand	Know	room	SAQ		Pathology
5.1			their importance	subjective	and interpret		lecture			
				symptoms	Level II		,			Vertical with
HomUG				Enumerate			Group			POM, OBG,
-OM-II				different types			discuss			Surgery
5.2				of symptoms			ions			
HomUG		K		Explain						
-OM-II				symptoms						
5.3				according to						
				Hahnemann's						
				view						
HomUG	K & S	K		Define	Cognitive/	Must	Class	MCQ	LAQ	
-OM-II				Totality of	Understand	Know	room		VIV	
5.4				symptoms	& Interpret		lecture		Α	
				J 1	level II					
							Group			
HomUG				Explain types			discuss			
-OM-II				of modalities			ions			
5.5							Caselet			
							S			
							5			

HomUG -OM-II 5.6	K & S	K	Define Symptomatolog y in relevance with Dr. KENT	Understanding the method of forming the TOS for prescribing Identify the nature and value of symptoms	Psychomotor / Problem Solving Level I	Must Know	Caselet s PBL	SAQ	LAQ SAQ	Vertical w Repertory	ith
HomUG -OM-II 5.7				Analysis of the case Explain the grade of symptoms of disease							
HomUG -OM-II 5.8				Explain the grade of symptoms of drug							

6.6 Case taking (Homoeopathic Philosophy)

Sl No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integration
	Competency				Guilbert			F	S	
HomUG- OM-II 6.1	K & S HO P C	K	Roberts Ch 8 Case Taking	Discuss the essentials needed to be recorded in taking the case	Cognitive/ Level III	Must know	Lecture Tutorials	MCQ SAQ	MCQ SAQ LAQ Viva	Record keeping Organon (S)
HomUG-				List the dos						
OM-II				and don'ts of						
6.2		SH		case taking						
HomUG-				Difference						
OM-II				between acute						
6.3				and chronic case taking						
HomUG- OM-II 6.4		K	Case taking Views of stalwarts	Explain View of Dr. J T Kent on Case Taking Explain View of Dr. Stuart Close on Case Taking						

6.7 Case processing

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	ΚH	Analysis	Define	Cognitive	Must	Lecture	MCQ	MCQ	
OM-II		SH	-	Analysis	Level III	Know	Small	SAQ	SAQ	
7.1		D		Identify			Group	Checklist	LAQ	
				different			Discussion			
	PС			groups to			Case			
				analyse the			simulation			
				symptoms			OPD/IPD			
				Justify the						
				analysis						
HomUG-			Evaluation	Define	Cognitive					
OM-II				Evaluation	Level III					
7.2				Justify and						
	PBL			defend the						
				evaluated						
				symptoms						
HomUG-			Investigation	Discuss the	Cognitive					Pathology (H)
OM-II				investigation	Level III					<i>3, , ,</i>
7.3				Plan the case						
HomUG-			Diagnosis	Examine the	Cognitive					Practice of
OM-II				case	Level III					Medicine(H)
7.4					Psychomotor					, ,
					Level I &II					
HomUG-	K & S	K	Develop	Define	Cognitive/	Must	Caselets /	MCQ	LAQ	Horizontal with
OM-II			Portrait of	Disease	Understand &	Know	Classroom	SAQ		Pathology,
7.5			Disease by	portrait (Kent	Interpret level		discussion/			Materia Medica,
			integrating	-Ch- 30),	II		DOPS			Repertory
			Hahnemannian	(Roberts- Ch-						
			concept	9),(Close-						
				Ch- 11, 12)						

6.8 Totality of symptoms

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	K	Develop	Define	Cognitive/	Must	Caselets /	MCQ	LAQ	Horizontal
OM-II			Portrait of	Disease	Understand	Know	Classroom	SAQ		with
8			Disease by	portrait (& Interpret		discussion/			Pathology,
			integrating	Kent -Ch-	level II		DOPS			Materia
			Hahnemannian	30),						Medica,
			concept	(Roberts-						Repertory
				Ch-						
				9),(Close-						
				Ch- 11, 12)						

6.9 Susceptibility

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	K	Susceptibility	Define	Cognitive	Must	Lecture	MCQ		Organon (S)
OM-II				Susceptibility	Level II	Know		SAQ		
9.1	НО						Small			
HomUG-				Discuss the	Cognitive		Group			
OM-II	PC			factors	Level II		Discussion			
9.2	CBL			modifying			Case based			
				susceptibility			Learning			
HomUG-				Predict the	Cognitive		Seminar/			
OM-II				susceptibility	Level III		Symposium			
9.3				of the patient						
				to the drug						
				prescribed						

6.10 Record keeping

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assess	sment	Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	ΚH	Aphorism	Discuss the	Cognitive	Must	Lecture	MCQ	MCQ	FMT (H)
OM-II	НО		104	importance	Decision	Know	OPD/ IPD	SAQ	SAQ	
10.1	P C		Record	of Record	/Problem		Case		LAQ	
	D		keeping	keeping	Solving		simulation		Viva	
				Legality of	Level III		Project			
				case record			work			
HomUG-	K & S	K	Define	Define	Cognitive /	Desire-	Caselets	MCQ	SAQ	With
OM-II			Record	Record	Recall	able to	DOPS			Repertory
10.2			Keeping	Keeping		know				
				Explain						
				Case						
				Records						

6.11 Various systems of medicine

Sl. No	Domain of	Miller	Content	SLO)	Bloom/	Priority	TL MM	Assess	sment	Integration
	Competency					Guilbert			F	S	
HomUG- OM-II 11.1	K & S HO	K	Aphorism 52 Chief Methods of	List Discuss different methods Cure	and of	Cognitive Understand and interpret	Must Know	Lecture Small Group Discussion	MCQ SAQ Quiz	MCQ SAQ, Viva	Spiral Pharmacy
			Cure	Cure		Level II		Seminars			
HomUG- OM-II 11.2		К	Aphorism 53 Homeopathic Method	Discuss Fundame Laws	the ental	Cognitive Understand and interpret Level II	MustKnow	Lecture Small Group Discussion Seminars	MCQ SAQ Quiz	MCQ, SAQ, LAQ, Viva	ORGANON (Spiral)

HomUG- OM-II 11.3		K	Application of Law of Cure Aphorism 54 Different forms / System of Medicines Allopathic Method	Compare the outcomes of Various theories	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion Seminars	MCQ SAQ Quiz	MCQ, SAQ, LAQ, Viva	ORGANON (Spiral)
HomUG- OM-II 11.4	K & S HO	К	Aphorism 55-56 Palliation in Allopathy	Discuss the awareness of public to effect of palliative treatment	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion Seminars	MCQ, SAQ	MCQ, SAQ, LAQ, Viva	Modern Pharmacology (V) Medicine (V)
HomUG- OM-II 11.5		K	Aphorism 57-58 Symptomatic Treatment by Contraria	Explain the symptomatic treatment in contraria	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion Seminars	MCQ, SAQ	MCQ, SAQ, LAQ, Viva	Modern Pharmacology (V) Medicine (V)
HomUG- OM-II 11.6		K	Aphorism 59 Injurious effects of antipathic Line of Treatment	Analyse the examples of effects of Antipathic line of treatment	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion Seminars	MCQ, SAQ	MCQ, SAQ, LAQ, Viva	Modern Pharmacology (V) Medicine (V)

HomUG- OM-II 11.7	K & S HO	К	Aphorism 60 Palliation in Allopathy	Discuss the Hazard of increasing doses in palliative treatment	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ Viva	Modern Pharmacology (V) Medicine (V), Gynaec (H), Surgery(H)
HomUG- OM-II 11.8		K	Aphorism 61 Utility of Homoeopathic treatment	Compare the utility of Homoeopathic & Allopathic treatment	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ Viva	Modern Pharmacology (V) Medicine (V), Gynaec (H), Surgery(H)
HomUG- OM-II 11.9	K&S HO P C	K	Aphorism 62-63 Reason for injurious nature of the palliative and sole efficacy of homoeopathic medicine	Define Primary and Secondary Action	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, Viva	
HomUG- OM-II 11.10		КН	Aphorism 64 Explanation of Primary and Secondary Action	Differentiate between Primary and Secondary Action	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, Viva	
HomUG- OM-II 11.11		K	Aphorism 65 Examples of Primary and	Illustrate with examples of Primary and	Cognitive Understand and	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, LAQ Viva	Modern Pharmacology (V) Medicine (V)

			Secondary Action	Secondary Actions	interpret Level II					
HomUG- OM-II 11.12	K & S HO	K	Aphorism 66 Secondary Curative Action	Analyse the effect of smallest homoeopathic doses in secondary action	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, LAQ	
HomUG- OM-II 11.13		K	Aphorism 67 Define and explain Suspended Animation	Discuss the use of antipathic line of treatment in specific cases	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, LAQ	
HomUG- OM-II 11.14		КН	Aphorism 68 Analyse the efficacy of Minuteness of Homeopathic medicines in cure	Application of Law of Minimum	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, LAQ	Organon (S)
HomUG- OM-II 11.15	K & S HO	K	Aphorism 69 Hurtfulness of Antipathic Treatment	Evaluate the effect of Antipathic line of treatment	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, LAQ	Modern Pharmacology (H) Medicine (V)
HomUG- OM-II 11.16	K & S HO	K	Aphorism 70 Summary of Homeopathic system of Medicine	List the inferences derived from the Aphorisms 1-70	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ, SAQ	MCQ, SAQ, LAQ	

6.10 Causation

Sl. No	Domain of	Mille	Content	SLO	Bloom/	Priority	TL MM	Assess	ment	Integratio
	Competency	r			Guilbert			F	S	n
HomUG-	K & S	K	Etiology	Recall the various	Cognitive	Must	Lectures	MCQ	MCQ	Organon
OM-II			Concept of	concept of disease	Level II	know	Small	SAQ	SAQ	(S)
12.1			Disease	_	Understan		group		LAQ	
					d and		Discussio		Viva	
HomUG-	K & S		Biological	Discuss the	Interpret	Desirabl	n			Pathology
OM-II			Concept of	biological concept	_	e to				(H)
12.2			disease	of disease		know				
HomUG-	C S		Environmenta	Discuss the concept		Must				Psycholog
OM-II	CS		1 and	of stress/ strain /		know				y (S)
12.3			Constitutional	Conflict						Personality
			Factors							Adaptation
HomUG-			Importance of	List the importance		Must				Practice of
OM-II	PC		diagnosis in	of diagnosis in daily		know				Medicine
12.4	1 C		Homeopathy	practice						(H & V)
HomUG-			Concept of	Define	Cognitive	Must	Lectures	MCQ	MCQ	Horizontal
OM-II			causation &	fundamental(miasm	Level II	know	Small	SAQ	SAQ	with
12.5			relating it), exciting &	Understan		group		LAQ	Pathology,
			with	maintaining cause	d and		Discussio		Viva	Materia
			homoeopathy		Interpret		n			Medica, Repertory
HomUG-	K & S and	K	Classification	Classification of	Cognitive/	Must	Classroom	MCQ	LAQ	- P
OM-II	Scholarship		of Disease	disease as per	Understand	Know	discussion	SAQ		
12.6				Hahnemann and other	& Interpret		Case Based			
				stalwarts like Sarkar	level II		Learning			

${\bf 6.11\ Introduction\ to\ the\ evolutionary\ concept\ of\ miasm}$

Sl. No	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessi	nent	Integrati on
HomUG- OM-II 13.1	K & S	K	Discovery of Miasm Definition of Miasm Primary basic features of Miasm	Relate to Hahnemann's journey to discover the concept of miasm in chronic diseases	Cognitiv e Level II Understa nd and Interpret	Desirabl e to know	Lecture Small group discussion	F MCQSA Q	S MCQ SAQ LAQ Viva	Organon (S)
HomUG-OM-II 13.2 HomUG-OM-II 13.3	K & S	K	Hahnemann classification of disease	Explain pathological consideration and general survey of disease Hahnemann's theory of Chronic Disease & bacteriology Acute miasm	Cognitive / Understan d & Interpret Level II	Must Know	Class room lecture / Small group Discussions / Caselets	MCQ SAQ	LAQ	Horizontal with Pathology
HomUG- OM-II 13.4 HomUG- OM-II 13.5	K & S	K	Miasm	Explain characteristic of Psora Explain characteristic of Sycosis	Cognitive / Understan d & Interpret level II	Desirable to know	Classroom discussion/ group discussions	MCQ SAQ	LAQ	

HomUG- OM-II 13.6				Explain characteristic of Syphilis Foot note: 74, 76, 77, 78, 79, 80						
HomUG- OM-II 13.7 HomUG- OM-II 13.8	K & S	K	Understanding chronic disease in view of pathogenesis	Co- relate laboratory investigation with evolution of pathology and miasm Co- relate microbiology & homoeopathy with miasm	Cognitive / Understan d & Interpret level II	Desirable to know	Caselets / Classroom discussion/	MCQ SAQ	LAQ	Horizontal with Pathology
HomUG- OM-II 13.9	K & S	K	Miasm & Pathology	Correlation of homoeopathy to pathology with reference to Dr. Kent, Close, Roberts	Cognitive / Understan d & Interpret level II	Nice to know	Classroom discussion/	MCQ SAQ	LAQ	

6.12 Individuality

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessi	nent	Integration
	Competency				Guilbert			\mathbf{F}	S	
HomUG-	K & S	K	Life, Health	Define Individuality	Cognitive	Must	Lecture	MCQ	MCQ	Pathology
OM-II			& Disease		Level II	know		SAQ	SAQ	Practice of
14.1					Understand		Small		LAQ	Medicine
HomUG-				Describe factors	and		Group		Viva	Materia
OM-II				contributing to	Interpret		Discussion			Medica
14.2				individualise a			Case			
				patient			based			
HomUG-				Discuss with			Learning			
OM-II				examples						
14.3							Seminar			

6.13 Anamnesis- evolution of disease

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assess	ment	Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	K	History of	Define Anamnesis	Cognitive	Must	Lecture	MCQ	MCQ	Pathology
OM-II			Disease		Level II	know	Small	SAQ	SAQ	Practice of
15.1			and its		Understand		Group		LAQ	Medicine
			evolution		and		Discussion		Viva	Materia
					Interpret		Case			Medica
							based			
							Learning			
							Seminar			
HomUG-				Define evolution of						
OM-II				disease process and						
15.2				prognosis of disease						

6.14 Disease-its progress- complex disease relation with miasm

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Asses	sment	Integration
	Competency				Guilbert			\mathbf{F}	S	
HomUG-	K & S	K	Progression	Define Complex	Cognitive	Must	Lecture	SAQ	MCQ,	Organon
OM-II			of disease	disease	Level II	know			SAQ,	
16.1					Understand		Small		LAQ,	
HomUG-				Discuss progression	and		Group		VIVA	
OM-II				of disease in relation	Interpret		Discussion			
16.2				with –			Case			
				Psora (Functional			based			
				Changes)			Learning			
				- Sycosis						
				(Infiltration)			Seminar			
				- Syphylis						
				(Destruction)						

6.15 Introduction to the concept of suppression

Sl. No	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Asses	sment	Integration
	Competency				Guilbert			F	S	
HomUG-	K & S	K	Suppression	Define	Cognitive	Nice to	Lecture	MCQ	SAQ	Pathology (H)
OM-II			Causes	Suppression	Level II	Know	Caselet	SAQ		
17.1	НО		Effects and		Understand					
HomUG- OM-II 17.2 HomUG- OM-II 17.3	PC		Management	Enumerate the types and causes of Suppression Discuss the effects of Suppression	and Interpret		Case based Lerarning			
HomUG- OM-II 17.4				Explain the management						

7. Teaching learning methods

Lectures (Theory)	Non-lectures (Practical)	
Lectures	Clinical demonstration	
Small group discussion	Problem based group discussion	
Integrated lectures	Case based learning	
Assignments	Tutorials	
Library reference	Seminars	
	Symposium	
	Assignments	
	Self-learning	

There have to be classroom lectures, small group discussions, case discussions where case-based learning (CBL) and problem-based learning (PBL) are especially helpful.

Audiovisual (AV) methods for classroom teaching may be an innovative aid in order to demonstrate the related graphics and animations etc. In the case of clinical demonstration – DOAP (Demonstration – Observation – Assistance – Performance) is very well applicable.

8. Details of assessment

8.1 Overall Scheme of Assessment (Summative)

Sr. No	Professi	ional Course	Term	I (1-6 Months)	Term II (7-12 Months)		
1	Second BHMS	Professional	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	FUE (end of 12 r	months)
			10 Marks Viva	i) Viva voce -25 marks	10 Marks Viva	100 marks theory	100 marks (Clinical/practical+ Viva+ IA)

	i	i) Clinical		
		i) Clinical performance – 25		
		marks		
		Case taking and		
		Case taking and analysis and		
		evaluation		

8.2 Number of papers and marks distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical	/ Clinical	Viva Voce	Internal Assessment**	Grand Total
1	HomUG-OM-II	01	100 marks	50 marks		40 marks	10 marks	200marks
				i)	Case taking-		(Marks of PA I	
					10 marks		+ TT I + PA II)	
				ii)	Case			
					processing-25			
					marks			
				iii)	Case			
					presentation- 5			
					marks			
				iv)	Journal*-10			
					marks			

^{*}Journal with 10 cases needs to be maintained by the students which should include

Case Taking, Case Processing - Analysis & Evaluation, Investigations, Probable Diagnosis, Classification of disease in that case, Susceptibility

**Method of Calculation of Internal Assessment Marks for Final University Examination:

Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) $/ 70 \times 10$

8.3 Paper Layout

Summative assessment (FUE):

Theory- 100 marks

MCQ	10 marks
SAQ	40 marks
LAQ	50 marks

8.4 Distribution of questions for theory exam

Sr. No	Paper				D	
				Type of Questions		ons
	A	В	С	MCQ	SAQ	LAQ
	List of Topics	Term	Marks	(1 Mark)	(5Marks)	(10 Marks)
1	Aphorism 28- 70 and 83-104	I & II	Refer to table 8.5 below	4	2	2
2	Case taking -receiving-perceiving techniques prerequisites of physician,	I & II		2	2	1
	Symptomatology, Analysis, Evaluation, Totality of Symptoms					

3	Classification of disease with introduction to miasm (Aphorism 71-82); Its correlation with pathogenesis and Homoeopathic management		2	1	1
4	Anamnesis-evolution of disease, Disease its progress-complex disease, Individualization-its process, Susceptibility: types and factors modifying it	II		2	
5	Causation; Introduction to the concept of suppression	II		1	1

8.5 Theme-wise distribution

No	Chapter/ Topic	Term	Theme	Marks	LAQ	SAQ	MCQ
1	Aphorism 28-104	I & II	A	34	20	10	4
2	Case taking -receiving-perceiving techniques prerequisites of physician,	I&II	В	22	10	10	2
	Symptomatology, Analysis, Evaluation, Totality of Symptoms						
3	Classification of Disease with respect to Pathogenesis, miasm and correlation with	I	С	17	10	5	2
	homeopathic management						
4	Anamnesis-evolution of disease,	II	D	12		10	2
	Disease its progress-complex disease, Individualization-its process,						
	Susceptibility: types and factors modifying it						
5	Causation; Introduction to the concept of suppression	II	Е	15	10	5	
<u> </u>							

8.6 Question paper blueprint

A Question Serial Number	B Type of Question	Question Paper Format (Refer Table 8.5 for themes)
Q.1	Multiple choice Questions (MCQ) 10 Questions 1mark each All compulsory Must know part: 7 Desirable to know :3 Nice to know: Nil	1. Theme A 2. Theme A 3. Theme A 4. Theme A 5. Theme B 6. Theme B 7. Theme C 8. Theme C 9. Theme D 10. Theme D
Q.2.	Short answer Questions (SAQ) 8 Questions 5 marks each All Compulsory Must know part:5 Desirable to Know: 2 Nice to know:1	1. Theme A 2. Theme A 3. Theme B 4. Theme B 5. Theme C 6. Theme D 7. Theme D 8. Theme E
Q.3	Long answer Questions (LAQ) 5 Questions 10 marks each All Compulsory Must know part:3 Desirable to Know: 2 Nice to know:Nil	1. Theme A 2. Theme A 3. Theme B 4. Theme C 5. Theme E

9. List of recommended text/reference books

- Hahnemann Samuel, Organon of Medicine 6th edition translated By W. Boericke
- Hahnemann Samuel, Organon of Medicine 5th&6th combined edition translated By R. E. Dudgeon
- Kent J.T. Lectures on Homoeopathic Philosophy
- Roberts H. A. The Principle and Art of Cure By Homoeopathy
- Close Stuart, The Genius of Homoeopathy Lectures and Essay on Homoeopathic Philosophy
- Sarkar B. K., Commentary on Organon
- Das A. K., A Treatise on Organon of Medicine
- Schmidt Pierre, The Art of Case Taking and Interrogation
- Goel Sumit, A study on Organon of Medicine and Homoeopathic Philosophy

10. List of Contributors

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Subject Name- Homoeopathic Repertory and Case Taking Subject Code: HomUG-R-II

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1. Preamble

The repertory is a dictionary or storehouse or an index to the huge mass of symptoms of the Materia Medica. The repertory is organized in a practical form indicating the relative gradation of drugs. Repertories not only contain symptoms of proving but also clinical and pathological symptoms found in the Materia Medica and additions made by authors based on their clinical experience. As no mind can memorize all the symptoms of the Materia Medica with their relative grading, repertories serve as an instrument at the disposal of the physician for sifting through the maze of symptoms of the vast Materia Medica. Case taking is the elementary mode of collecting data from the patient and the principles and techniques of case taking will demand constant updating of knowledge of the disease processes and way of interacting with human beings.

Need of the repertory as a tool arose when the number of remedies went on increasing and it was becoming humanly difficult to remember all the symptoms. A simple solution was to index the symptoms with the name of the drug. Repertories aim at simplifying the work of the physician to find the indicated remedy by eliminating the non-indicated remedies. Repertorisation is not the end but means to arrive to the simillimum and reference to Materia Medica based on sound principles of Philosophy is the final court of appeal.

Each repertory has been compiled on the basis of distinct philosophy, structure and utility. To use these instruments effectively, one must understand thoroughly its conceptual base, construction and utility and limitations. Even though there are a number of repertories, the student at the undergraduate level is expected to learn the philosophy and application of basic core repertories namely Kent, BBCR and BTPB. The subject of Repertory must not be taught in isolation but must be taught in horizontal integration with Anatomy and Physiology in IBHMS, Pathology in II BHMS, Surgery and Gynaecology in III BHMS and Practice of Medicine in IV BHMS and vertically integrated with Materia Medica and Organon and Homoeopathic Philosophy in all the years. Integrated teaching over all the years will help the student to grasp and understand the subjects better and connect repertory to all other subjects.

Similarly, case taking demands virtually integrating all the subjects taught from the I through IV BHMS in the consulting room or at the bedside. The physician can never say that he has learnt all every new patient has a new lesson to teach.

The advent of computerization and resulting software has opened many new avenues to collate and correlate the vast information found in the Materia Medica through the repertories. Continued exploration of these connections will generate new data, new repertories and the new application to existing or new illnesses.

2. Course outcomes

At the end of BHMS course, the learner will be able to:

- i. Explain the need and utility of repertory as a tool to find the similimum and in the study of Materia Medica.
- ii. Describe the philosophical backgrounds, construction, utility and limitation of Kent repertory, BTBP, BBCR, Boericke repertory, other clinical repertories and modern repertories.
- iii. Able to describe the various dimension of case taking and able to demonstrate case taking in moderate and difficult cases.
- iv. Classify the symptoms, evaluate the symptoms according to their importance and construct the totality of symptoms based on different philosophies (DrKent, Dr Boenninghausen, Dr Hahnemann, Garth Boericke).
- v. Choose an appropriate approach for the case, construct the Repertorial Totality and select the appropriate rubrics and technique of repertorisation.
- vi. Identify the medium, method, process and technique of repertorization.
- vii. Display empathy with the patient and family during case taking.
- viii. Communicate to the patient and attendants the need for sharing patient related information for a complete homoeopathic case taking.
 - ix. Develop ability to apply different case taking skills.
 - x. Search for the appropriate rubrics in different repertory.
 - xi. Understanding and evolution of modern repertories, computerized repertories, operate and use software-based repertories for repertorization.

3. Learning objectives

At the end of II BHMS, the learner will be able to:

- 1. Describe the steps of case taking in acute and chronic cases
- 2. Perform simple case taking in acute and chronic case under guidance
- 3. Illustrate the structure of Boericke repertory
- 4. Locate different pathological rubrics from Boericke repertory and Kent's repertory

4. Course content and its term-wise distribution(theory)

4.1 Case Taking (Term I)

- 4.1.1 Demonstration of Homoeopathic case taking in simple, acute and chronic cases (refer to the table in **Annex-A** at the end defining category of the cases)
- 4.1.2 Instructions given in Organon regarding case taking

4.2 Correlation of Repertory with Disease and Pathology (Term II)

- 4.2.1 Introduction to Boericke's repertory
- 4.2.2 Representation of different pathologies and pathogenesis in Boericke and Kent repertory
- 4.2.3 Understanding holistic concept of disease, constitution, diathesis, susceptibility and temperament

5. Teaching hours

5.1. Gross division of teaching hours

Homoeopathic Repertory and Case Taking					
Year	Teaching hours- Lectures	Teaching hours- Non-lectures			
II BHMS	50	30			

5.2. Teaching hours theory

S. No.	List of Topics	Hours (Total 50 hrs)
	Term I	
1.	Demonstration of Homoeopathic case taking in simple acute cases	09
2.	Demonstration of Homoeopathic case taking in simple chronic cases	08
3.	Instruction given in Organon regarding case taking	05
	Total	22
	Term II	
4.	Introduction to Boericke repertory	10
5.	Representation of different pathologies and pathogenesis in Boericke and Kent repertory	06
6.	Understanding holistic concept of disease, constitution, diathesis, susceptibility and temperament	12
	Total	28

5.3. Teaching hours Non-lecture

Sr. No	Non-Lecture Activity	Hours
	Term I	
1	Clinical	15
2	Demonstrative	
2(a)	Seminar / Tutorials	01
2(b)	Problem based learning/ Case Based Learning	02
2(c)	Assignment/ Symposium / Group discussion	02
	Term II	
1	Clinical	05
2	Demonstrative	
2(a)	Seminar / Tutorials	01
2(b)	Problem based learning/ Case Based Learning	01
2(c)	Assignment/ Symposium / Group discussion// Rubric hunting exercises	03
	Total	30

6. Content mapping

6.1. Topic: - Demonstration of Homoeopathic Case Taking in simple acute cases (importance & its application) and instructions given in Organon regarding case taking

	Domain of	Miller's			Bloom/		Teaching-	Assess	ment	
Sl. No.	Competency	level	Content	SLO	Guilbert	Priority	Learning Method/Media	F	S	Integration
Hom UG-R- II-2.1	К/НО	Knows		Define an acute Disease	Cognitive/ Level -1 Remembers/ Recalls	Must Know	Lecture Small Group Discussion	SAQ Viva- voce	-	
Hom UG-R- II-2.2	К/НО	Knows	Acquiring knowledge,	Classify diseases as per Hahnemann's Philosophy	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Small Group Discussion	SAQ Viva- voce	-	Horizontal integration
Hom UG-R- II-2.3	К/НО	Knows	skill and attitude about patient and doctor communication and examination in simple acute	State the Aphorisms dealing with Acute Case Taking and classification of acute disease	Cognitive/ Level -1 Remembers/ Recalls	Must know	Lecture Integrated discussion	SAQ Viva- voce	ı	with Organon of Medicine Spiral Integration in III & IV BHMS
Hom UG-R- II-2.4	K/HO/PC	Knows how	disease	Explain the basic structure of case taking. List the steps of case taking in simple acute cases	Cognitive/ Level -1 Remembers/ Recalls	Must know	Lecture Integrated discussion	SAQ Viva- voce	ı	

	Domain of	Miller's			Bloom/		Teaching-	Assess	ment	
Sl. No.	Competency	level	Content	SLO	Guilbert	Priority	Learning Method/Media	F	S	Integration
Hom UG-R- II-2.5	К/НО/РС	Shows how		Demonstratio n of simple acute case taking	Psychomotor Level -1 Interpret/ Decide/ DemonstrateC ognitive/ Level - 2understand/ describe	Desirable	Clinical Class Small Group Discussion (I	SAQ Viva- voce	_	Horizontal integration with Pathology & Practice of Medicine
Hom UG-R- II-2.6	K/HO/PC	Shows how		Observe the skills of clinical examination of simple acute case	Psychomotor Level -1 Interpret/ Decide/ Demonstrate	Desirable	Clinical Class Small Group Discussion	SAQ Viva- voce	_	Spiral Integration in III & IV BHMS

6.2. Topic: - Demonstration of Homoeopathic Case Taking in simple Chronic cases (importance & its application) and instructions given in Organon regarding Case Taking

Sl. No.	Domain of	Miller's	Content SLO	Bloom/	Priority	Teaching- Learning	Assessmen t		Integration	
51. 110.	Compete ncy	level	Content	SLO	Guilbert	Friority	Method/Media	F	S	integration
Hom UG-R- II-2.7	К/НО	Knows	Acquiring knowledge, skill and attitude about	Define a Chronic Disease as per Hahnemann's Philosophy	Cognitive/ Level -1 Remembers/ Recalls	Must Know	Lecture Small Group Discussion	SAQ Viva - voce	_	Horizontal integration with Organon of Medicine,

Sl. No.	Domain of	Miller's	Content	SLO	Bloom/	Priority	Teaching- Learning	Assess	smen	- Integration	
51. 140.	Compete ncy	level	Content	SLO	Guilbert	litionity	Method/Media	F	S	integration	
Hom UG-R- II-2.8	К/НО	Knows	patient and doctor communicatio n and	Classify chronic diseases as per Hahnemann's Philosophy	Cognitive/ Level -1 Remembers/ Recalls	Desirabl e to Know	Lecture Small Group Discussion	SAQ Viva - voce	_	Spiral Integration in III & IV	
Hom UG-R- II-2.9	К/НО	Knows	examination in chronic disease	List the aphorisms dealing with Chronic Case Taking	Cognitive/ Level -1 Remembers/ Recalls	Must know	Lecture SAQ Viva Integrated discussion voce		_	BHMS	
Hom UG-R- II-2.10	K/HO/PC	Knows how		Explain the basic structure of chronic case taking. List the steps of chronic case taking	Cognitive/ Level -1 Remembers/ Recalls	Must know	Lecture Integrated discussion	SAQ Viva - voce	_		
Hom UG-R- II-2.11	K/HO/PC	Shows how		Demonstration of case taking simple chronic cases	Psychomotor Level -1 Interpret/ Decide/ Demonstrate	Desirabl e	Lecture/ Clinical Class Small Group Discussion Integrated discussion	SAQ Viva - voce	_	Horizontal integration with Organon of Medicine,Path ology &	
Hom UG-R- II-2.12	K/HO/PC	Shows how		Observe the skills of clinical examination of simple chronic case	Psychomotor Level -1 Interpret/ Decide/ Demonstrate Cognitive/ Level -2 understand/ describe	Desirabl e	Clinical Class Small Group Discussion	SAQ Viva - voce	_	Practice of Medicine Spiral Integration in III & IV BHMS	

6.3. Topic: - Introduction to Boericke's Repertory

Sl.	Domain of	Miller's			Bloom/		Teaching-	Assess	sment	Integrati
No.	Competency	level	Content	SLO	Guilbert	Priority	Learning Method/Media	F	S	on
Hom UG- R-II- 3.1	К/НО	Knows		Discuss the life history of Oscar Boericke with reference to his contributions to repertory	Cognitive/ Level -1 Remembers/ Recalls	Nice to Know	Lecture	Viva - voce	_	Horizonta l integratio
Hom UG- R-II- 3.2	К/НО	Knows		Outline the Plan of Boericke's Repertory	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Rubric Hunting	SAQ Viva - voce	_	n with Organon of Medicine
Hom UG- R-II- 3.3	К/НО	Knows	Acquiring knowledg e about Boericke'	Describe the Construction of Boericke's Repertory	Cognitive/ Level -1 Remembers/ Recalls	Must know	Lecture Rubric Hunting	SAQ Viva - voce	_	
Hom UG- R-II- 3.4	К/НО	Knows	s Repertory	Explain the Importance of knowledge of pathology and clinical medicine for using Boericke's Repertory	Cognitive/ Level -2 Remembers/ Recalls	Desirable to Know	Lecture Rubric Hunting	SAQ Viva - voce	_	Horizontal integration with Organon of Medicine, Pathology,
Hom UG- R-II- 3.5	К/НО	Knows how		Mention the Scope, Limitation & adaptability of Boericke's Repertory	Cognitive/ Level -2 Understands	Desirable	Lecture Rubric Hunting	SAQ Viva - voce	_	Practice of Medicine Spiral Integration in III & IV BHMS

6.4. Topic: - Representation of different pathologies and pathogenesis in Boericke and Kent

Sl.	Domain of	Miller's			Bloom/		Teaching-	Assessm	ent	
No.	Competency	level	Content	SLO	Guilbert	Priority	Learning Method/Media	F	S	Integration
Hom UG- R-II- 4.1	К/НО	Knows How	Identifying Representation of different	Identify the rubrics representing different pathologies and pathogenesis in Boericke repertory	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Rubric Hunting	MCQ Quiz	_	Horizontal integration with Pathology, Practice of
Hom UG- R-II- 4.2	К/НО	Knows How	pathologies and pathogenesis in Boericke and Kent Repertory	Identify the rubrics representing different pathologies and pathogenesis in Kent repertory	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Rubric Hunting	MCQ Quiz	_	Medicine Spiral Integration in III & IV BHMS

6.5. Topic: - Understanding holistic concept of disease, miasm, constitution, diathesis, susceptibility and temperament in Boericke and Kent Repertory

					Bloom/		Teaching-	Assessm	ent	
Sl. No.	Domain of Competency	Miller' s level	Content	SLO	Guilbe rt	Priorit y	Learning Method/ Media	F	S	Integration
Hom UG- R-II- 5.1	К/НО	Knows	Understanding the representation of constitution, diathesis, susceptibility and temperament in	Discuss the holistic concept of Health with relation to the study of repertory	Cogniti ve/ Level - 1 Underst ands	Desirab le to Know	Lecture	Viva- voce		Horizontal integration with Organon of
Hom UG- R-II- 5.2	К/НО	Knows		Discuss the concept of Disease with relation to the study of repertory	Cogniti ve/ Level - 1 Underst ands	Desirab le to Know	Lecture	Viva- voce		Medicine, Pathology, Practice of Medicine
Hom UG- R-II- 5.3	К/НО	Knows	Boericke and Kent Repertory	Define Constitution, diathesis, susceptibility& Temperament	Cogniti ve/ Level - 2 Underst ands & interpre t	Desirab le to Know	Lecture	Viva- voce		Spiral Integration in III & IV BHMS

					Bloom/		Teaching-	Assessm	ent	
Sl. No.	Domain of Competency	Miller' s level	Content	SLO	Guilbe rt	Priorit y	Learning Method/ Media	F	S	Integration
Hom UG- R-II- 5.4	К/НО	Knows How		Identify the rubrics representing different constitution, diathesis, susceptibility and temperament in Boericke repertory	Cogniti ve/ Level - 2 Underst ands & interpre t	Desirab le to Know	Lecture Rubric Hunting	MCQ Quiz	_	
Hom UG- R-II- 5.5	К/НО	Knows How		Identify the rubrics representing different constitution, diathesis, susceptibility and temperament in Kent repertory	Cogniti ve/ Level - 2 Underst ands & Interpre t	Desirab le to Know	Lecture Rubric Hunting	MCQ Quiz	_	

7. Teaching Learning Methods

Lectures (Theory)	Non-lectures (Practical/Demonstrative)
Lecture	Clinical Class
Small Group Discussion	Rubric hunting exercises
Integrated discussion with subjects of Organon of Medicine, Pathology & Practice of Medicine	Case based learning
	Seminar
	Tutorial
	Group Discussion

8. Details of assessment

<u>Note-</u> The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA)*

Professional Course/ Subject	Ter	rm I (1-6 Months)	Term II (7-12 Months)				
II BHMS/ Practice of Medicine	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	TT II (end of 12 months)			
	10 Marks Viva- A	50 Marks Clinical/Practical and Viva - E i) Viva voce -25 marks ii) Clinical/practical- 25 a. Recording of Simple acute case - 20 marks b. Analyse the case for acute and chronic disease as per Hahnemann's classification of disease - 05 marks	10 Marks Viva- B	50 Marks Clinical/Practical and Viva – F Viva voce -25 marks i) Clinical/practical- 25 a. Recording of Simple chronic case-15 marks c. Analyse the case for acute and chronic disease as per Hahnemann's classification of disease - 05 marks b. Locate the rubrics for pathologies in Boericke & Kent's repertory- 05 marks			

*Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:

Marks of PA I	Marks of PA II	Periodical Assessment Average PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test Average TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	В	D	${f E}$	${f F}$	G	D+G/2

9. List of recommended text/reference books

- Ahmed Munir R(2016). Fundamentals of repertories: Alchemy of homeopathic methodology.
- Bidwell GI.(1915). How to Use the Repertory.
- Boericke, W. (2003). New manual of homoeopathic materia medica and repertory.
- Hahnemann, S. (2014). Organon of Medicine.
- Kent, J. T. (2008). Lectures on Homeopathic Philosophy.
- Kent, J. T. (2016). Repertory of the homeopathic materia medica.
- Kent, J. T: How to study the Repertory, how to use the Repertory.
- Tiwari SK. (2007). Essentials of Repertorization.

10. List of contributors

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Annexure A (in reference of course content sub clause 4.1.1)

	Simple case	Moderate case	Difficult case
Acute case	by Hahnemann; which is presenting with complete symptoms of either one location or one system of single malady with no other comorbid	well incomplete symptoms) of multiple location or of single malady of functional level with other comorbid conditions of functional level. Cases where case processing needs a certain set of knowledge, skill	A case of acute nature as defined by Hahnemann; which is presented with mixed symptomatology of multiple locations with structural changes or a complex disease. Cases where case processing needs a certain set of knowledge, skill for construction of totality and rubric search/Repertorization is somewhat difficult then moderate cases.
Chronic case	A case of chronic nature as defined by Hahnemann; which is having complete symptoms of either one location or one system of single malady with no other comorbid conditions. Cases where case processing is easy and constructing Repertorial totality/rubric search/ Repertorization is easy.	A case of chronic nature as defined by Hahnemann; which is presenting with mixed symptomatology (complete as well incomplete symptoms) of multiple locations or of single malady of functional level with other comorbid conditions of functional level. Cases where case processing	A case of chronic nature as defined by Hahnemann; with mixed symptomatology of multiple locations with structural changes or a complex disease. Cases where case processing needs a certain set of knowledge, skill for construction of totality and rubric search/ Repertorization is somewhat difficult then moderate cases

Subject name: - Forensic Medicine and Toxicology

Subject code: HomUG-FMT

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1. Preamble

Forensic Medicine and Toxicology encompass a multifaceted understanding of the medical, legal, and medico-legal obligations incumbent upon physicians, alongside a profound comprehension of medical ethics, decorum, and the toxicological ramifications of poisons. This field intersects with the elucidation of symptoms associated with homeopathic remedies. It is imperative for every registered Homoeopathic medical practitioner, whether practicing privately or within governmental institutions, to undertake medico-legal examinations as mandated by statute. In the current landscape characterized by burgeoning consumerism in medical services, familiarity with laws pertinent to medical practice, doctrines of medical negligence, and ethical codes assumes paramount importance. Practitioners must be cognizant of their medico-legal responsibilities, adept at making astute observations, drawing logical inferences, and arriving at significant conclusions during investigations into criminal matters and associated medico-legal intricacies.

Furthermore, proficiency in identifying, diagnosing, and studying the management protocols of both acute and chronic poisonings is indispensable. Decisions regarding treatment and referral should be judiciously made, considering the prevailing circumstances and severity of the condition, thereby ensuring timely intervention. Moreover, an understanding of the medico-legal dimensions of poison-related incidents is crucial.

Additionally, recognizing that the toxicological manifestations of poisons may bear resemblance to either the proving or clinical symptoms of certain Homoeopathic remedies underscoring the importance of integration between these disciplines. Such integration not only sheds light on the evolving drug profiles but also enhances comprehension of toxicological and therapeutic principles.

2. Course outcomes

At the end of BHMS II course in Forensic Medicine and Toxicology, the student shall -

- i. Identify, examine and prepare reports / certificates in medico-legal cases/situations in accordance with the law of land.
- ii. Demonstrate awareness of legal/court procedures applicable to medico legal/medical practice
- iii. Acquire knowledge in Forensic medicine and recognize its scope and limitations in Homoeopathic practice
- iv. Be conversant with the code of ethics, etiquette, duties and rights of medical practitioners' profession towards patients, profession, society, state and humanity at large; infamous conduct, medical negligence, and punishment on violation of the code of ethics.
- v. Be able to identify poisons/poisoning, and management of poisoning within the scope of homoeopathy.

- vi. Develop knowledge of Materia Medica by application of knowledge gained by the study of Toxicology
- vii. Develop skills in medical documentation
- viii. Be aware of the principles of environmental, occupational and preventive aspects of general Toxicology

3. Course content and its term-wise distribution

SI. No.	List of Topics	Term
	Forensic Medicine	
1.	Introduction to Forensic Medicine	I
2.	Medical ethics	I
3.	Legal procedures	I
4.	Personal Identification	I
5.	Death and its medico-legal importance	I
	Toxicology	
1.	General Toxicology	I
2.	Clinical toxicology	I
3.	Injury and its medico-legal importance	II
4.	Forensic psychiatry	II
5.	Post-mortem examination (ML autopsy)	II
6.	Impotence and sterility	II
7.	Virginity, defloration; pregnancy and delivery.(Integration with OBG)	II
8.	Abortion and infanticide (Integration with OBG)	II
9.	Sexual Offences	II
10.	Clinical Toxicology	II
	Legislation relating to medical profession (relevant areas)	
1.	Legislation relating to medical profession	п

4. Teaching hours

4.1 Gross division of teaching hours

	Forensic Medicine and Toxicology	Forensic Medicine and Toxicology						
Year	Teaching hours- Lectures	Teaching hours- Non-lectures						
II BHMS	120	50						

4.2 Teaching hours theory

S. no.	List of Topics	Hours
1	Introduction to Forensic Medicine	02
2	Medical Ethics	03
3	Legal Procedures	04
4	Personal Identification	07
5	Death and its medicolegal importance	13
6	General Toxicology	07
7	Clinical Toxicology: Part-I	20
8	Injury and its medicolegal importance	10
9	Forensic Psychiatry	04
10	Postmortem Examination (ML Autopsy)	04
11	Impotence and Sterility	03

12	Virginity, Defloration, Pregnancy and Delivery (Integration with OBG)	03
13	Abortion and Infanticide (Integration with OBG)	04
14	Sexual Offences	06
15	Clinical Toxicology: Part-II	25
16	Legislation relating to Homoeopathic Medical Profession	05
	Total	120

4.3 Teaching hours: Non-lecture

Sr. No	Non-Lecture Activity	Term	Time Allotted per Activity (Hours)
1	Practical	I & II	35
1(a)	a) Weapons b) Toxicology - corrosives, irritants, systemic and miscellaneous poisons, gastric lavage c) Charts, diagrams, photographs, models, bones, x-ray films of medicolegal importance		10
1(b)	Certificate Writing a) Various certificates like sickness certificate, physical fitness certificate, death certificate, consent form, birth certificate.		3

	b) Knowledge of injury certificate, examination of rape victim and assailant, drunkenness, post-mortem examination report, age certification		
1(c)	Consent- Medical consent, implied consent, patient confidentiality, autonomy, role of care giver, audio-video recording of cases, safety and custody of medical		2
1(d)	records Demonstration of at least ten medica legal autonoises		20
1(d)	Demonstration of at least ten medico-legal autopsies. Demonstrative	I & II	15
2(a)	Court Procedures (Moot Court)		05
2(b)	Field Visits		10
	Total		50

Content mapping (competencies tables)

5.1. Topic: Introduction to Forensic Medicine-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessment	t	Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Definition	1.Define	C-I	MK	Interactive	MCQ,	Viva voce	None
UG-	CS		of forensic	forensic			lecture	Viva Voce		
FMT-	PBL		medicine,	medicine						
1.1	PRF		medical							
Hom		K	jurispruden	2. Define	C-I	MK	Interactive	MCQ,	Viva voce	
UG-			ce,	Medical			lecture	Viva Voce		
FMT-			History of	Jurispruden						
1.2			Forensic	ce.						
			medicine in							
			India.							
Hom		K		2. Describe	C-I	DK	Interactive	SAQ,	Theory -	
UG-				the history			lecture	Assignme	SAQ, Viva	
FMT-				of Forensic				nt	voce	
1.3				medicine in						
				India.						

5.2. Topic: Medical ethics-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessmen	t	Integration
								F	S	1
Hom UG- FMT- 2.1	KS PC HO CS PBL PRF	K	Medical Ethics and etiquette – Code of ethics, Infamous conduct, medical	Define medical ethics	C-I	MK	Interactive lecture, Small Group Discussions , Written Case	MCQ, Assignme nt	Viva voce	None
Hom			negligence, professiona l secrecy,	Discuss	C-II	MK	Scenario, Moot court. Interactive	SAQ	Theory -	_
UG- FMT- 2.2			privileged communica tion, Rights and duties of doctors and patients etc National Commissio n for Homoeopat hy and	professiona 1 misconduct with 2 examples.	C-II	MK	lectures, Written Case Scenario, Moot court.	LAQ, Tutorial Assignme nt	SAQ and LAQ, Viva voce	

Hom	State	Discuss	C-II	MK	Interactive	SAQ	Theory -
UG-	Homoeopat	medical			lectures,	LAQ,	SAQ and
FMT-	hic Medical	negligence			Written	Tutorial	LAQ, Viva
2.3	Councils	with 2			Case	Assignme	voce
	Structure,	examples.			Scenario,	nt	
	functions				Moot court.		
	and						
	legislation						
	Homoeopat						
	hic						
	Practitioner						
	S .						
	(Profession						
Hom	al Conduct,	Discuss	C-II	MK	Interactive	SAQ	Theory -
UG-	Etiquette and Code	privileged			lectures,	LAQ,	SAQ and
FMT-	of Ethics)	communica			Written	Tutorial	LAQ, Viva
2.4	Regulations	tion in			Case	Assignme	voce
	,1982 with	relation to			Scenario,	nt	
	amendment	rights and			Moot court.		
	s (up to	duties of					
	2014)	doctors and					
	Duties of	patients.					
	Registered						
	Homoeopat						
	hic Medical						
	practitioner						

Hom	in medico-	Explain the	C-II	MK	Interactive	LAQ	Theory -
UG-	legal cases.	duties of			Lectures,		LAQ , Viva
FMT-	Consent,	registered					voce
2.5	types of consent and its importanc e in practice Bioethics	Homoeopat hic medical practitioner in medicolega l cases.					Examination
Hom UG- FMT- 2.6	Introducti on and principles	Discuss the principles of bioethics.	C-II	DK	Interactive lectures, Problem Based Learning.	Assignme	Viva voce Examination

Hom		Explain	C-II	MK	Interactive	SAQ,	Theory -	
UG-		about the			lectures	LAQ	SAQ and	
FMT-		types of					LAQ	
2.7		consent and					Viva voce	
		its					examination	
		importance						
		in practice						

5.3. Topic: Legal procedures-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessmen	Assessment	
								F	S	
Hom	KS	K	Understandin	Define CrPC,	C-I	MK	Interactive	MCQ	Theory -	None
UG-	CS		g legal terms	IPC			lecture		Viva voce	
FMT-	PBL		- CrPC, IPC,							
3.1	PRF		IEA, offence,							
			civil and	D:00	G W	3.677		G 4 0		_
Hom			criminal	Differentiate	C-II	MK	Interactive	SAQ	Theory -	
UG-			cases	between civil			lecture	LAQ,	SAQ and	
FMT-			Inquest,	and criminal				Tutorial	LAQ, Viva	
3.2			types of	cases				Assignme	voce	
			inquest					nt		
Hom			Courts of law	Define	C-I	MK	Interactive	MCQ	Theory -	
UG-			in India,	Inquest			lecture		Viva voce	
FMT-			jurisdiction,							
3.3			hierarchy and							

Hom	power of	Explain the	C-II	MK	Interactive	SAQ	Theory -
UG-	different	different			lecture	LAQ,	SAQ and
FMT	courts of law	types of				Tutorial	LAQ, Viva
3.4	the sentences	Inquest.				Assignme	voce
	passed by					nt	
Hom	them (India)	Classify the	C-II	MK	Lecture,	MCQ,	Theory -
UG-	legal	different			Field visits.	SAQ	SAQ and
FMT-	procedure Medical	courts of Law				LAQ	LAQ, Viva
3.5	evidences in	in India					voce
	courts, dying						
	declaration,						
	dying						
	deposition,						
	including						
	medical						
	certificates						
	and medico-						
	legal reports.						

Hom	Recording of	Explain the	C-II	MK	Lecture,	SAQ	Theory -
UG-	evidence	power of			Field visits.	LAQ	SAQ and
FMT-	Witnesses	different					LAQ, Viva
3.6	and types	courts of law					voce
	Conduct and	in India.					
	duties of						
	doctors in						
	witness box						
Hom		Differentiate	C-II	MK	Interactive	SAQ	Theory -
UG-		between			lecture	LAQ,	SAQ and
FMT-		dying				Tutorial	LAQ, Viva
3.7		declaration				Assignme	voce
		and dying				nt	
		disposition					
Hom		Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-		types of			lecture	SAQ	MCQ, SAQ,
FMT-		witnesses					Viva voce
3.8							
Hom		Explain the	C-II	MK	Interactive	SAQ	Theory -
UG-		duties of			lecture,	LAQ	SAQ and
FMT-		doctors in			Moot court,		LAQ, Viva
					Field visit		voce

5.4. Topic: Personal identification-

Sl.	Competency	Miller	Content	SLO	Bloom	Priority	TL MM	Assessment	t	Integration
No.					/Guilbert			F	S	
Hom UG- FMT- 4.1	KS CS PBL PRF.	K	Determinati on of age, gender, race, religion in the living and the dead, Dactylogra	Explain the procedure for Identification of age, sex, race and religion in living and dead.	C-II	MK	Interactive lecture, , written case scenario.	SAQ LAQ, Tutorial Assignme nt	Theory - SAQ and LAQ, Viva voce	None
Hom UG- FMT- 4.2			phy, foot prints. Bones, scars and teeth, tattoo marks, handwriting, anthropome	Define Dactylography	C-I	MK	Interactive lecture,	Tutorial Assignme nt	Viva voce	

Hom	try and	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	other	medicolegal			lecture,	SAQ	SAQ and
FMT-	identificatio	importance of			written case	LAQ,	LAQ, Viva
4.3	n data	dactylography.			scenario.	Tutorial	voce
	Examinatio				Demonstrati	Assignme	
	n of				on	nt	
	biological						
	stains and						
	hair.						
	DNA finger						
	printing						
	Medicolega						
	1						
Hom	importance	Discuss the	C-II	MK	Interactive	MCQ,	Theory -
UG-		methods of			lecture,	SAQ	SAQ and
FMT-		identification			written case	LAQ,	LAQ, Viva
4.4		of data, with			scenario.	Tutorial	voce
		specific			Problem	Assignme	
		reference to			Based	nt	
		anthropometry.			Learning,		
					Demonstrati		
					on		
Hom		Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-		medicolegal			lecture,	SAQ	SAQ and
FMT-		importance of			Demonstrati	LAQ,	LAQ, Viva
4.5		DNA			on	Tutorial	voce
		fingerprinting				Assignme	
						nt	

5.5. Topic: death and its medicolegal importance-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessmen	t	Integration
No.	Competency				/Guilbert					
								F	S	1
Hom	KS	K	Thanatolog	Define	C-I	MK	Interactive	MCQ,	Viva voce	None
UG-	PRF		y, Death	Thanatology			lecture,	Tutorial		
FMT-	CS		and its				lecture	Assignme		
5.1			types, their					nt		
			medico-							
			legal							
Hom			importance	Differentiate	C-II	MK	Interactive	MCQ,	Theory -	1
UG-			somatic	between			lecture,	SAQ	SAQ and	
FMT-			death,	various types			lecture	LAQ,	LAQ, Viva	
5.2			molecular	of death.			demonstrati	Tutorial	voce	
			death,				on, written	Assignme		
			asphyxia,				case	nt		
			coma,				scenario.			
			syncope,				Field visits.			

Hom	suspended	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	animation	mechanism of			lecture,	SAQ	SAQ and
FMT-	Differentiat	drowning with			written case	LAQ,	LAQ, Viva
5.3	e cause,	its signs and			scenario,	Tutorial	voce
	manner and	symptoms and			Problem	Assignme	
	mode of	medicolegal			Based	nt	
	death	importance.			Learning		
	Pathology	-					
	of						
	asphyxial						
	death,						
	negative						
	autopsy,						
Hom	sudden	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	death and	mechanism of			lecture,	SAQ	SAQ and
FMT-	causes	hanging with			written case	LAQ,	LAQ, Viva
5.4	Organ	its signs and			scenario,	Tutorial	voce
	transplantat	symptoms and			Problem	Assignme	
	ion and the	medicolegal			Based	nt	
	laws	importance.			Learning		
	governing						
	organ						
	transplantat						
	ion						
	Signs of						
	death (1)						

Hom	immediate,	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	(2) early,	mechanism of			lecture,	SAQ	SAQ and
FMT-	(3) late and	coma.			written case	LAQ,	LAQ, Viva
5.5	their				scenario,	Tutorial	voce
	medico-				Problem	Assignme	
	legal				Based	nt	
	importance,				Learning		
	estimation						
	of post-						
	mortem						
	interval						
	Asphyxial						
	deaths						
Hom	(mechanica	Explain	C-II	MK	Interactive	MCQ,	Theory -
UG-	1 asphyxia	suspended			lecture,	SAQ	SAQ and
FMT-	and	animation			written case	LAQ,	LAQ, Viva
5.6	drowning).				scenario,	Tutorial	voce
	Death from				Problem	Assignme	
	starvation,				Based	nt	
	cold and				Learning		
Hom	heat etc.	Discuss	C-II	DK	Interactive	MCQ,	Theory -
UG-		medicolegal			lecture,	SAQ	SAQ and
FMT-		aspects of			written case	LAQ,	LAQ, Viva
5.7		Organ			scenario,	Tutorial	voce
		Transplantation			Problem	Assignme	
		and laws			Based	nt	
		governing it			Learning		

Hom		Explain the	C-II	MK	Interactive	MCQ,	Theory -	
UG-		immediate,			lecture,	SAQ	SAQ and	
FMT-		early and late			written case	LAQ,	LAQ, Viva	
5.8		signs of death			scenario,	Tutorial	voce	
		and their			Problem	Assignme		
		medicolegal			Based	nt		
		importance			Learning			

5.6. Topic: Injury and its medicolegal importance-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessment	t	Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Mechanical,	Differentiate	C-II	MK	Interactive	MCQ,	Theory -	None
UG-	CS		thermal,	between			lecture,	SAQ	SAQ and	
FMT-	PBL		firearm,	various types			lecture	LAQ,	LAQ, Viva	
6.1	PRF		regional,	of injuries.			demonstrati	Tutorial	voce	
			transportati				on, written	Assignme		
			on and				case	nt		
			traffic				scenario.			
			injuries;				Field visits.			

Hom	injuries	Explain the	C-II	MK	Interactive	MCQ,	Theory -	
UG-	from	types of			lecture,	SAQ	SAQ and	
FMT-	radiation,	mechanical			lecture	LAQ,	LAQ, Viva	
6.2	blast,	injuries with			demonstrati	Tutorial	voce	
	electrocutio	medico-legal			on, written	Assignme		
	n and	importance			case	nt		
	lightning				scenario.			
	and their				Field visits.			
	medicolegal							
	importance							
Hom		Explain the	C-II	MK	Interactive	MCQ,	Theory -	
UG-		types of			lecture,	SAQ	SAQ and	
FMT-		thermal			lecture	LAQ,	LAQ, Viva	
6.3		injuries with			demonstrati	Tutorial	voce	
		medico-legal			on, written	Assignme		
		importance			case	nt		
					scenario.			
					Field visits.			
Hom		Explain the	C-II	MK	Interactive	MCQ,	Theory -	
UG-		types of			lecture,	SAQ	SAQ and	
FMT-		firearm injuries			lecture	LAQ,	LAQ, Viva	
6.4		with medico-			demonstrati	Tutorial	voce	
		legal			on, written	Assignme		
		importance			case .	nt		
					scenario.			
					Field visits.			

Hom	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	types of			lecture,	SAQ	SAQ and
FMT-	regional			lecture	LAQ,	LAQ, Viva
6.5	injuries with			demonstrati	Tutorial	voce
	medico-legal			on, written	Assignme	
	importance			case	nt	
				scenario.		
				Field visits.		
Hom	Explain	C-II	DK	Interactive	MCQ,	Theory -
UG-	injuries from			lecture,	SAQ	SAQ and
FMT-	radiation, blast,			lecture	LAQ,	LAQ, Viva
6.6	electrocution			demonstrati	Tutorial	voce
	and lightning			on, written	Assignme	
	with medico-			case	nt	
	legal			scenario.		
	importance			Field visits.		
Hom	Define	C-I	MK	Interactive	MCQ,	Theory -
UG-	Ballistics			lecture	SAQ	MCQ, Viva
FMT-						voce
6.7						

5.7. Topic: Forensic psychiatry-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessmen	t	Integration
NO.	Competency				/Guilbert			F	S	
Hom UG- FMT- 7.1	KS CS PBL PRF	K	Definitions, delusion, delirium, illusion, hallucinatio n, impulse, obsession, mania, ICD-11 classificatio	Explain delusion.	C-II	MK	Interactive lecture, lecture demonstrati on. Field visits.	SAQ	Theory – SAQ, Viva- voce	None
Hom UG- FMT- 7.2			n of Insanity, mental subnormalit y. Definition and brief overview of common	Explain delirium.	C-II	MK	Interactive lecture	SAQ	Theory – SAQ, Viva- voce	

Hom	mental	Explain	C-II	MK	Interactive	SAQ	Theory –
UG-	illnesses.	Illusion.			lecture		SAQ, Viva-
FMT-	True and						voce
7.3	feigned						
	mental						
	illness.						
	Civil and						
	criminal						
	responsibili						
	ties of a						
Hom	person with	Explain	C-II	MK	Interactive	SAQ	Theory –
UG-	mental	hallucination.			lecture		SAQ, Viva-
FMT-	illness/disa						voce
7.4	bility.						
Hom	Developme	Explain	C-II	MK	Interactive	SAQ	Theory –
UG-	nt of	Impulsive	CH	IVIIX	lecture	Drig	SAQ, Viva-
FMT-	insanity,	obsession			lecture		
	diagnosis,	disorder.					voce
7.5	admission						
Hom	to mental	Explain mania.	C-II	MK	Interactive	SAQ	Theory –
UG-	asylum,				lecture		SAQ, Viva-
FMT-	care of						voce
7.6	mentally ill						
Hom	person and discharge.	Explain about	C-II	MK	Interactive	MCQ,	Theory And
UG-	discharge.	the ICD-11			lecture	SAQ	Practical
FMT-		classification				LAQ,	Examination
7.7		of Insanity,				Assignme	
		mental				nt	
		subnormality				111	

Hom UG- FMT- 7.8	Discuss civil and criminal responsibilities of person with mental illness.	MK	MCQ, Theory And SAQ Practical Examination Assignme nt
Hom UG- FMT- 7.9	Explain C-II Mental Health Act.	MK	MCQ, Theory And SAQ Practical LAQ, Examination Assignme nt
Hom UG- FMT- 7.10	Discuss about the admission of an insane person to mental asylum, care of mentally ill person and discharge.	MK	MCQ, Theory And SAQ Practical Examination Assignmen t

5.8. Topic: Postmortem examination (ML autopsy)-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessmen	t	Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Purpose,	Define autopsy	C-I	MK	Interactive	MCQ,	Viva voce	None
UG-	CS		procedure,				lecture		examination	
FMT-	PBL		legal							
8.1	PRF.		bindings;							
			difference							
			between							
			pathologica							
			1 and							
			medico-							
			legal							
			autopsies.							
			External							
			examinatio							
			n, internal							
			examinatio							
			n of adult,							
Hom	_		foetus and		C-II	MK	Interactive	SAQ	Theory –	_
UG-			skeletal	Enlist the	C II	MIX	lecture,	LAQ,	SAQ, LAQ	
FMT-			remains.	objectives of			lecture,	Assignme	And Viva	
			Artefacts	_				_		
0.2								111		
				Autopsy					Lammadon	
8.2			Artefacts	conducting a Medico legal Autopsy			demonstrati on,Field visits.	nt nt	voce Examination	

Hom UG- FMT- 8.3	Forensic science Laboratory	Define Artefacts	C-I	MK	Interactive lecture	MCQ, SAQ	Theory And Practical Examination
Hom UG- FMT- 8.4		Discuss in detail about the Forensic science Laboratory	C-II	DK	Interactive lecture, lecture demonstrati on,Field visits.	Assignme nt	Theory-SAQ And Viva voce Examination

5.9. Topic: Impotency and sterility-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessment	t	Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Impotence,	Define	C-I	MK	Interactive	MCQ,	Theory, Viva	Integration
UG-	CS		sterility,	Impotence and			lecture,	Assignme	voce	with OBG
FMT-	PBL		sterilization	Sterility				nt		
9.1	PRF.		, Artificial							
Hom			Inseminatio	Emple in the	C-II	MK	Integrated	SAQ	Theory -	
UG-			n,	Explain the factors leading			learning	LAQ,	SAQ and	
FMT-			surrogacy,	to impotency				Assignme	LAQ, Viva	
9.2			in-vitro	and sterility				nt	voce	
			fertilization							

Hom UG- FMT- 9.3	issues	Explain Artificial Insemination	C-II	MK	Interactive lecture	SAQ LAQ, Assignme nt	Theory - SAQ and LAQ, Viva voce	
H			C H	MIZ	Internal	CAO	The	
Hom UG- FMT- 9.4		Explain surrogacy with its medico-legal importance	C-II	MK	Interactive lecture	SAQ LAQ, Assignme nt	Theory - SAQ and LAQ, Viva voce	

Hom UG- FMT- 9.5	Explain invitro fertilization with its medico-legal importance	C-II	DK	Interactive lecture	SAQ LAQ, Assignme nt	Theory - SAQ and LAQ , Viva voce
Hom UG- FMT- 9.6	Explain the functions of sperm and ova banks with its medicolegal importance	C-II	NK	Interactive lecture	SAQ LAQ, Assignme nt	Theory - SAQ and LAQ , Viva voce

5.10. Topic: Sexual abuse, exploitation in all genders, defloration; pregnancy and delivery-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessmen	t	Integration
No.	Competency				/Guilbert					
								F	S	
Hom UG- FMT- 10.1	KS CS PBL PRF.	K	The presumptive, probable and positive signs of	Discuss about the presumptive, probable and positive signs of pregnancy	C-II	MK	Interactive lecture, lecture demonstra tion	MCQ, SAQ LAQ, Assignme nt	Theory - SAQ and LAQ, Viva voce	Integration with OBG
Hom UG- FMT- 10.2			pregnancy, sexual exploitation , sexual abuse,	Explain the medico Legal aspects of legitimacy	C-II	MK	Interactive lecture, lecture demonstra tion	MCQ, SAQ LAQ, Assignme nt	Theory - SAQ and LAQ, Viva voce	
Hom UG- FMT- 10.3			pregnancy, delivery, posthumous child, pseudocyes is, superfoetati on,superfec undation, legitimacy and	Explain superfoctation with its medicolegal importance.	C-II	MK		MCQ, SAQ LAQ, Assignme nt	Theory - SAQ and LAQ, Viva voce	

		paternity - legal aspects						
Hom			Explain	C-II	MK	MCQ,	Theory -	
UG-			superfecundati			SAQ	SAQ and	
FMT-			on with its			LAQ,	LAQ , Viva	
10.4			medicolegal			Assignme	voce	
			importance.			nt		

5.11. Topic: Abortion and infanticide-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessmen	t	Integration
No.	Competency				/Guilbert					
								F	S]
Hom	KS	K	Abortion:	Define	C-I	MK	Interactive	MCQ,	Theory -	Integration
UG-	CS		different	abortion.			lecture	SAQ	SAQ, Viva	with OBG
FMT-	PBL		methods,						voce	
11.1	PRF.		complicatio							
Hom			ns,	Explain	C-II	MK	Interactive	MCQ,	Theory -	
UG-			accidents	different			lecture,,	SAQ	SAQ and	
FMT-			following	methods of			group	LAQ,	LAQ, Viva	
11.2			criminal	abortion with			discussion	Assignme	voce	
			abortion,	its signs and			s,	nt		
			MTP,	symptoms and			Integrated			
			medicolegal	medicolegal			learning			
			importance	importance						

Hom UG- FMT- 11.3 Hom UG- FMT- 11.4 Hom UG- FMT- 11.5	Abortificen t drugs and methods Infant death, signs of live birth, legal definitions, battered baby syndrome, cot death, Munchause n's syndrome	Explain various signs of live birth Discuss the regulations of MTP Act 1971 Explain battered baby syndrome	C-II C-II	MK MK	Interactive lecture, , group discussion s, Integrated learning Interactive lecture, , group discussion s, Integrated learning Interactive lecture, , group discussion s, Integrated learning Interactive lecture, , group discussion	MCQ, SAQ LAQ, Assignme nt MCQ, SAQ LAQ, Assignme nt MCQ, SAQ LAQ, Assignme nt	Theory - SAQ and LAQ, Viva voce Theory - SAQ and LAQ, Viva voce Theory - SAQ, Viva voce	
Hom UG-		Explain cot	C-II	MK	s, Integrated learning Interactive lecture,	MCQ, SAQ	Theory - SAQ Viva	
FMT- 11.6		death.			group discussion s, Integrated learning	Assignme nt	voce	

Hom	Г. 1.	C-II	MK	Interactive	MCQ,	Theory -	
UG-	Explain Muncha			lecture,,	SAQ	SAQ Viva	
FMT-	syndrom			group		voce	
11.7	Syndioni			discussion			
				s,			
				Integrated			
				learning			

5.12. Topic: Sexual offences-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessmen	t	Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Natural	Enlist the	C-I	MK	Interactive	Assignme	Theory- SAQ	Integration
UG-	CS		sexual	various sexual			lecture,	nt	Viva voce	w
FMT-	PBL		offenses,	offences			small			ith OBG
12.1	PRF.		Unnatural				group			
			sexual				discussions			
			offenses,				Integrated			
			Sexual				learning			
Hom			perversions	Classify the	C-II	MK	Interactive	MCQ,	Theory -]
UG-			The clinical	various sexual			lecture,	SAQ	SAQ and	
FMT-			examinatio	offences.			small	LAQ,	LAQ, Viva	
12.2			n and				group	Assignme	voce	
			findings of				discussion	nt		
			victim and				s,			
			assailant				Integrated			
							learning			

Hom	The	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	medicolega	natural sexual			lecture,	SAQ	SAQ and
FMT-	l aspects of	offences.			small	LAQ,	LAQ, Viva
12.3	sexual				group	Assignme	voce
	offenses				discussion	nt	
	and				s,		
	perversions				Integrated		
	. IPC, CrPC				learning		
Hom	{	Explain the	C-II	MK	Interactive	MCQ,	Theory -
UG-	Bhartiya	unnatural			lecture,	SAQ	SAQ and
FMT-	Nyay	sexual			small	LAQ,	LAQ, Viva
12.4	Sanhita Bill	offences.			group	Assignme	voce
	2023 &				discussion	nt	
	Bharatiya				S,		
	Sakshya				Integrated		
	(Second)				learning		
Hom	Bill 2023}	Evaloia 4h o	C-II	MK	Interactive	MCQ,	Theory -
UG-		Explain the different sexual			lecture,	SAQ	SAQ and
FMT-		perversions.			small	LAQ,	LAQ, Viva
12.5		perversions.			group	Assignme	voce
					discussion	nt	
					s,		
					Integrated		
					learning		
Hom		Discuss the	C-II	MK	Interactive	SAQ	Theory -
UG-		clinical			lecture,	LAQ,	SAQ and
FMT-		examination			small	Assignme	LAQ , Viva
12.6		and findings of victim and			group	nt	voce

Hom UG- FMT- 12.7	assailant of a sexual offence Explain the medicolegal aspects of sexual offenses and perversions.	C-II	MK	discussion s, Integrated learning Interactive lecture, small group discussion s,	SAQ LAQ, Assignme nt	Theory - SAQ and LAQ , Viva voce	
				Integrated learning			
Hom UG- FMT- 12.8	Explain the provisions in the Bhartiya Nyay Sanhita Bill 2023 & Bharatiya Sakshya (Second) Bill 2023}	C-II	MK	Interactive lecture, small group discussion s, Integrated learning	LAQ, Assignme nt	Theory - LAQ , Viva voce	

5.13. Topic: General toxicology-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessmen	Assessment	
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Forensic	Classify	C-II	MK	Interactive	MCQ,	Theory -	None
UG-	PC		Toxicology	various types			lecture,	SAQ	SAQ and	
FMT-	НО		and	of poisons			lecture	LAQ,	LAQ, Viva	
13.1	CS		Poisons,				demonstra	Assignme	voce	
	PBL		Classificati				tion, group	nt		
	PRF.		on of				discussion			
			poisons				s,			
			Medico –				Integrated			
			legal				learning			
Hom			aspects of	Explain the	C-II	MK		SAQ	Theory -	
UG-			poisons,	general				LAQ,	SAQ and	
FMT-			Antidotes	principles of				Assignme	LAQ, Viva	
13.2			and types,	management of				nt	voce	
			Diagnosis	poisoning						
Hom			of	Explain the	C-II	MK		MCQ,	Theory -	
UG-			poisoning	types of				SAQ	SAQ and	
FMT-			in living	antidotes And				LAQ,	LAQ, Viva	
13.3			and dead,	its uses				Assignme	voce	
			General					nt		
Hom			principles	Explain the	C-II	MK		MCQ,	Theory -	
UG-			of	diagnosis of				SAQ	SAQ and	
FMT-			managemen	poisoning in				LAQ,	LAQ , Viva	
13.4			t of	living and dead				Assignme	voce	
			poisoning,	subjects,				nt		

		Duties of						
		Homoeopat						
		hic						
		Practitioner						
Hom	K	s in cases	Describe the	C-II	DK	MCQ,	Theory -	
UG-		of	duties of a			SAQ	SAQ and	
FMT-		poisoning	medical			LAQ,	LAQ , Viva	
13.5			practitioner in			Assignme	voce	
			the suspected			nt		
			case of					
			poisoning					

5.14. Topic: General toxicology-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessment		Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	i)	Describe the	C-II	MK	Interactive	MCQ,	Theory -	Integration
UG-	PC		Corrosives	action, signs and			lecture,,	SAQ	SAQ and	with
FMT-	НО		, Ii)	symptoms, fatal			group	LAQ,	LAQ, Viva	Materia
14.1	CS		Irritants	dose, fatal			discussion	Assignme	voce	medica
	PBL		iii)	period, post			S,	nt		
	PRF.		Asphyxian	mortem findings			Integrated			
			ts	and			learning			
			iv)	circumstances of						
			Neurotics	corrosive						
			v) cardiac	poisoning						

Hom	vi)	Describe the	C-II	MK	Interactive	MCQ,	Theory -
UG-	Miscellane	action, signs and			lecture,,	SAQ	SAQ and
FMT-	ous	symptoms, fatal			group	LAQ,	LAQ, Viva
T14.2	vii) food	dose, fatal			discussion	Assignme	voce
	Poisoning	period, post			s,	nt	
	viii) Drug	mortem findings			Integrated		
	dependenc	and			learning		
	e & drug	circumstances of					
	use.	asphyxiant					
		poisoning.					
Hom		Describe the	C-II	MK	Interactive	MCQ,	Theory -
UG-		action, signs and			lecture,,	SAQ	SAQ and
FMT-		symptoms, fatal			group	LAQ,	LAQ, Viva
14.3		dose, fatal			discussion	Assignme	voce
		period, post			S,	nt	
		mortem findings			Integrated		
		and			learning		
		circumstances of					
		neurotic					
		poisoning.					
Hom		Describe the	C-II	MK	Interactive	MCQ,	Theory -
UG-		action, signs and			lecture,,	SAQ	SAQ and
FMT-		symptoms, fatal			group	LAQ,	LAQ , Viva
14.4		dose, fatal period,			discussion	Assignme	voce
		post mortem			S,	nt	
		findings and			Integrated		
		circumstances of			learning		
		irritant poisoning.					

Hom	Describe the	C-II	MK	Interactive	MCQ,	Theory -
UG-	action, signs and			lecture,,	SAQ	SAQ and
FMT-	symptoms, fatal			group	LAQ,	LAQ, Viva
14.5	dose, fatal			discussion	Assignme	voce
	period, post			s,	nt	
	mortem findings			Integrated		
	and			learning		
	circumstances of					
	cardiac					
	poisoning.					
Hom	Explain	C-II	DK	Interactive	SAQ	Theory -
UG-	Medicolegal			lecture,,	LAQ,	SAQ and
FMT-	aspects in			group	Assignme	LAQ , Viva
14.6	different			discussion	nt	voce
	poisoning			s,		
				Integrated		
				learning		
Hom	Differentiate	C-II	MK	Interactive	MCQ,	Theory -
UG-	between the			lecture,,	SAQ	SAQ and
FMT-	various			group	LAQ,	LAQ , Viva
14.7	presentations of			discussion	Assignme	voce
	Arsenic and			s,	nt	
	Lead poisoning.			Integrated		
				learning		
Hom	Explain	C-II	MK	Interactive	MCQ,	Theory -
UG-	differential			lecture, , group	SAQ	SAQ and
FMT-	diagnosis of			discussions,	LAQ,	LAQ , Viva
14.8	Organophosphoru s poisoning			Integrated learning	Assignment	voce

Hom		D 1'	C-II	NK	Interactive	SAQ	Theory -	
UG-		Explain			lecture,,	LAQ,	SAQ and	
FMT-		bioterrorism with the			group	Assignme	LAQ , Viva	
14.9		bacterial borne /			discussions	nt	voce	
		microbial			,Integrated			
		infections,/			learning			
		biologic positing						

5.15. Topic: Legislation relating to medical profession – including latest amendments and superceeding acts as and when applicable-

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessment		Integration
No.	Competency				/Guilbert					
								F	S	
Hom	KS	K	Various	Explain the	C-II	MK	Interactive	MCQ,	Theory -	None.
UG-	PC		acts as	medicolegal			lecture,	SAQ	SAQ and	
FMT-	НО		described	aspects of			lecture	LAQ,	LAQ, Viva	
15	CS		in term	various acts			demonstra	Assignme	voce	
	PBL		wise	under Forensic			tion,	nt		
	PRF.		contents	Medicine and			Integrated			
				Toxicology			learning			

5.16. Topic: Demonstration of weapons, poisons (Practical)-

Sl. No.		Content	Competency / Outcome	Entry behaviour	Specific Learning Objectives	Learner activity	Assessment
Hom UG-	a)	Weapons		Enumerate different types of weapons. Enumerate	Identify various types of weapons Classify injury produced by them		
FMT- 16.1	b)	Toxicology - corrosives, irritants, systemic and		different types of injuries caused by weapons	Explain medicolegal importance of injuries produced by the weapons.		
Hom UG-		miscellaneous poisons, gastric lavage	KS CS	Enumerate the different names of poisons and	Identify various types of specimens of poisons Classify the poison as per their action	Demonstration, group discussions,	Practical
FMT- 16.2	c)	Charts, diagrams, photographs, models, bones, x-	PBL PRF	methods of poisoning	Explain medicolegal importance of poisons	Spotting, PBL	Examination
Hom UG-		ray films of medico-legal importance		Enumerate different emergency	Explain gastric lavage procedures,		
FMT- 16.3	conditions related to GIT where gastric lavage is indicated		Explain the merits of Gastric Lavage and its indications and contraindications.				

5.17. Topic: Certificate Writing (Practical)

Sl. No.	Content	Competency / Outcome	Entry behaviour	Specific Learning Objectives	Learner activity	Assessment
Hom UG- FMT- 17.1 Hom UG- FMT- 17.2	Various certificates like sickness certificate, physical fitness certificate, death certificate, consent form, birth certificate. Knowledge of injury certificate, examination of rape victim and assailant, drunkenness, post-mortem examination report, age certification	KS CS PBL PRF	Enlist the names of different medical certificates	Write various certificates like sickness certificate, physical fitness certificate, death certificate, consent form, birth certificate. Write a report of examination of rape victim, Injury Certificate, Post Mortem Examination report, Age Certification. Drunkenness Certificate.	- Certificate writing. Written case scenario.	Practical Examination

5.18. Topic: Consent (Practical)-

Sl. No.	Content	Competency / Outcome	Entry behaviour	Specific Learning Objectives	Learner activity	Assessment
Hom UG- FMT- 18	Medical consent, implied consent, patient confidentiality, autonomy, role of care giver, audio-video recording of cases, safety and custody of medical records	KS CS PBL PRF	Explain the meaning of consent.	Write consent in given format.	Written case scenario, Group discussion.	Practical Examination

6. Teaching learning methods

Lectures (Theory)	Non-lectures (Practical/Demonstrative)
Lectures	Clinical demonstration
Small group discussion	Problem based discussion
Integrated lectures	Case based learning
Structured interactive sessions	Tutorials
	Seminars
	Video clips
	Assignments
	Field visits (Court visit and Isolation hospitals).
	Self-learning

7. Details of assessment

7.1 Overall Scheme of Assessment (Summative)

Sr. No	Sr. No Professional Course		Ter	rm I (1-6 Months)	Term II(7-12 Months)			
1	Second BHMS	Professional	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	of 9 FUE (end of 12 months)		
			10 Marks Viva	50 Marks Practical/ Viva	10 Marks Viva	100 marks	100 marks	
				 Viva voce -25 marks Practical- 25 marks (Identification of weapons, poisons, X-Rays- 10 Marks, Certificate writing- 10 Marks Case Scenario of consent taking- 5 marks) 		theory	(Clinical/practical+ Viva+ IA)	

PA: Periodical Assessment; TT: Term Test; FUE: Final University Examinations; IA: Internal Assessment

7.2 Number of papers and Marks Distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical/ Clinical	Viva Voce	Internal	Grand Total
						Assessment*	
1	HomUG-FMT	01	100 marks	50 marks**	40 marks	10 marks (Marks of PA I + TT I + PA	200marks
						II)	

^{*}Method of Calculation of Internal Assessment Marks for Final University Examination:

Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) $/ 70 \times 10$

**Details of practical assessment at FUE

Sr No	Headings	Marks
1	6 spotters – Bones, weapons, Toxicology specimens, Photographs, models – with their medicolegal aspects - 5 marks Each	30
2	Certificate Writing	10
3	Journal	10
	Total	50

7.3 Paper Layout

Summative assessment(FUE):

Theory- 100 marks

MCQ	10 marks
SAQ	40 marks
LAQ	50 marks

7.4 Distribution of questions for theory exam

Sr.No	Paper			Type of Questions"Yes"can be asked. "No"should not be asked.		
	A List of Topics	B Term	C Marks	MCQ (1 Mark)	SAQ(5 Marks)	LAQ (10 Marks)
1	Introduction to Forensic Medicine& Medical Ethics Legal procedure	I	Refer Next Table 7.5	No	Yes	No
2	Personal Identification	I		Yes	Yes	No
3	Death and Its Medicolegal importance	I		Yes	No	Yes
4	Injury and Its medicolegal importance	II		Yes	No	Yes
5	Impotence and sterility	II		Yes	Yes	Yes

	Virginity, defloration pregnancy and Delivery Abortion and infanticide Sexual offences	II II			
6	General Toxicology	I	Yes	Yes	No
7	Clinical Toxicology- Corrosive Poisons	I	Yes	Yes	No
8	Clinical Toxicology- Irritant Poisons	I	Yes	No	Yes
9	Clinical Toxicology- Asphyxiant poisons	I	No	Yes	No
10	Clinical Toxicology- Neurotics Poisons	II	No	Yes	No
11	Clinical Toxicology- Cardiac Poisons	II	No	Yes	No
12	Clinical Toxicology- Miscellaneous Poisons	II	Yes	No	No
13	Clinical Toxicology- Food Poisoning, Drug Dependence and drug abuse	II	Yes	No	No
14	Legislation relating to medical profession	II	No	No	Yes

7.5 Theme-wise distribution of questions:

Theme	Topics	Term	Marks	MCQ's	SAQ's	LAQ's
A	Introduction to Forensic Medicine Medical ethics Legal procedure	I	5	0	5	0
В	Personal Identification	I	6	1	5	0
С	Death and Its Medicolegal importance	I	11	1	0	10
D	Injury and Its medicolegal importance	II	11	1	0	10
E	Impotence and sterility Virginity, defloration pregnancy and Delivery, Abortion, Infanticide Sexual offences	II	16	1	5	10
F	General Toxicology	I	6	1	5	0
G	Clinical Toxicology- Corrosive Poisons	I	6	1	5	0
Н	Clinical Toxicology- Irritant Poisons	I	11	1	0	10
I	Clinical Toxicology- Asphyxiant poisons	I	5	0	5	0
J	Clinical Toxicology- Neurotics Poisons	II	5	0	5	0
K	Clinical Toxicology- Cardiac Poisons	II	5	0	5	0
L	Clinical Toxicology- Miscellaneous Poisons	II	2	2	0	0
M	Clinical Toxicology- Food Poisoning, Drug Dependence and drug abuse	II	1	1	0	0
N	Legislation relating to medical profession	II	10	0	0	10

7.6 Question paper blueprint

A	В	Question Paper Format
Question Serial Number	Type of Question	(Refer table 7.5 for themes)
Q1	Multiple choice Questions (MCQ)	1. Theme B
	10 Questions	2. Theme C
	1 mark each	3. Theme D
	All compulsory	4. Theme E
	Must know part: 6 MCQ Desirable to know: 2 MCQ. Nice to	5. Theme F
	know:2MCQ	6. Theme G
		7. Theme H
		8. Theme L
		9. Theme L
		10. Theme M

Q2	Short answer Questions(SAQ)	1. Theme A
	8Questions	2. Theme B
	5 Marks Each , All compulsory Must know part:7 SAQ	3. Theme E
	Desirable to know: 1 SAQ	4. Theme F
	Nice to know: Nil	5. Theme G
		6. Theme I
		7. Theme J
		8. Theme K
Q3	Long answer Questions (LAQ) 5 Questions	1. Theme C
	10 Marks each	2. Theme D
	All compulsory	3. Theme E
		4. Theme H
		5. Theme N

8. List of recommended Books

- C. K. Parikh, 2019, Text Book of Medical Jurisprudence Forensic Medicine & Toxicology (edition 21st), CBS Publishers
- K.S. Narayan Murty, 2022, The Essentials of Forensic Medicine & Toxicology, Jaypee Publication,
- Modi, N.J ,A Text Book of Medical Jurisprudence and Toxicology
- Biswas Gautam, 2015, *Review of Forensic Medicine and Toxicology (Including Clinical & Pathological Aspects)*, Jaypee Brothers Medical Publisher (P) Ltd;.
- Nandy Apurba, Principles of Forensic Medicine Including Toxicology,
- Sharma D B, 2022, Essential of Forensic Medicine and Toxicology, (First edition), B. Jain Publishers

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Subject name : Pathology and Microbiology

Subject code: HomUG-Path-M

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1. Preamble

Pathology and Microbiology provide comprehensive knowledge of the pathologic basis of disease, to enable a complete understanding of the reaction of man to different morbid factors causing disease -its natural course, clinical manifestations, complications and sequel.

The students must be able to discriminate symptoms of the patient & disease satisfying the Hahnemannian requirements of physicians as mentioned in aphorism 3 of Organon of Medicine, make them competent in diagnosis and to substantiate miasmatic perspective with pathology for an accurate homoeopathic prescription.

Knowledge also helps in deciding the scope, limitation and prognosis of a case through the understanding of susceptibility. Immune-mediated illnesses are becoming important areas where homoeopathic interventions can play a significant part in alleviating suffering and in bringing about a cure. The teaching should be aligned and integrated vertically in organ systems recognizing deviations from normal structure and function and clinically correlated to provide an overall understanding of the aetiology, mechanisms, laboratory diagnosis and management of diseases and horizontally with Homoeopathic Philosophy, Homoeopathic Materia Medica and Repertory to understand the Homeopathic concept of Disease and its management. Pathology will need alignments with Anatomy and Physiology on one side and clinical subjects on the other side with the foundation of homoeopathic subjects.

2. Course outcomes

At the end of the II BHMS course the students will be able to:

- 1. Recognize the importance of study of Pathology and Microbiology in Homoeopathic systemof medicine
- 2. Understandthe morphological changes in cell structure in disease and recognize the mechanism of the etiological factors in the causation of such changes
- 3. Integrate the study of Pathology and Microbiology with Homoeopathic philosophy, Materia Medica, and Repertory.
- 4. Understand classification of diseases as per Master Hahnemann.
- 5. Understand common and important diseases based on their evolution, aetio-pathogenesis, pathology, progress and prognosis.
- 6. Develop skill in the identification of pathological features specifically histo-pathological features, and gross pathological specimens.
- 7. Able to interpret laboratory reports for diagnosis and treatment purpose.
- 8. Develop a positive attitude towards the role of Pathology and Microbiology in Homoeopathic system

3. Course content and its term-wise distribution

3.1 Contents for Term I

	Theory		
Sr. No.	Topic		
1.	Introduction to Pathology		
2.	General Pathology		
3.	Introduction to Microbiology		
4.	Sterilisation and Disinfection		
5.	Culture medias and methods		
6.	Infection and Disease		
7.	Human Microbiome		
8.	Gram positive bacterias		
9.	Introduction to Virology		
10.	Introduction to Parasitology		
11.	Protozoans		
	Non –lecture- Practical/Demonstrative		
1.	Demonstration of Instruments		
2.	Demonstration of Methods of sterilisation		

3.	Demonstration of culture medias
4.	Estimation of haemoglobin
5.	Total count of Red Blood Cells
6.	Total count of White Blood Cells
7.	Bleeding time and clotting time
8.	Blood grouping.
9.	Gram staining
10.	Demonstration of histopathological slides
11.	Demonstration of Pathological specimen/models

3.2 Contents for Term II

	Theory		
Sr. No.	Торіс		
1.	Systemic Pathology		
2.	Gram negative bacterias		
3.	Acid fast bacterias		
4.	Spirochaetes		
5.	Virology-DNA,RNA virus		

6.	Parasitology –Helminths
7.	Mycology
8.	Diagnostic procedures in Microbiology
	Non –lecture- Practical/Demonstrative
1.	Staining of thin and thick films.
2.	Differential count.
3.	Erythrocyte sedimentation rate-demonstration
4.	Urine examination-physical,chemical and microscopical examination.
5.	Examination of Faeces- demonstration
6.	Hanging drop preparation demonstration
7.	Acid fast staining –demonstration
8.	Interpretation of laboratory reports (serological tests, LFT, RFT, TFT etc) and its clinico pathological correlation
9.	Demonstration of common pathological specimens/models from each system
10.	Demonstration of common Pathological slides from each system

4. Teaching hours

4.1 Gross division of teaching hours

Pathology & Microbiology			
Year	Teaching hours- Lectures	Teaching hours- Non-lectures	
II BHMS	200	80	

4.2 Teaching hours theory

Sr. No	Topic	Hours
	Paper I	
1.	Introduction	3
	General Pathology	
1.	Cell Injury and cellular adaptation	10
2.	Inflammation and repair	10
3.	Neoplasia	10
4.	Immunopathology	8
5.	Haemodynamic disorders	10
6.	Environmental and Nutritional diseases	2

	Systemic Pathology	
1.	Diseases of the Haematopoietic system, bone marrow and blood	9
2.	Diseases of the Respiratory system.	5
3.	Diseases of the the oral cavity, salivary glands and gastro intestinal tract	6
4.	Diseases of liver, gall bladder, and biliary ducts	4
5.	Diseases of the Pancreas	1
6.	Diseases of blood vessels and lymphatics	2
7.	Diseases of Cardiovascular system	5
8.	Diseases of kidney and lower urinary tract	6
9.	Diseases of male reproductive system and prostate	1
10.	Diseases of the female genitalia and breast	4
11.	Diseases of the skin and soft tissue	1
12.	Diseases of the musculo-skeletal system.	2
13.	Diseases of Endocrine glands -thyroid	2
14.	Diseases of nervous system	1
	Total	102

	Paper II	
	Microbiology and Parasitology	
1.	General introduction, Bacterial structure, growth and metabolism & genetics	3
2.	Identification and cultivation of bacteria(staining, culture medias, methods)	3
3.	Sterilization and disinfection	2
4.	Infection and disease	2
5.	Gram positive cocci	5
6.	Gram negative cocci	2
7.	Gram positive aerobic bacilli	2
8.	Gram positive anaerobic bacilli	3
9.	Gram negative bacilli	9
10.	Acid Fast Bacterias	4
11.	Spirochaetes	3
12.	Fungi- general characters- cutaneous, systemic mycosis, opportunistic	3
13.	Introduction to parasitology	2
14.	Protozoans	9
15.	Helminths –cestodes, trematodes and nematodes	14
16.	Virology-introduction &,Bacteriophges	2
17.	DNA virus	11
18.	RNA viruses	12
19.	Emerging and re-emerging diseases	2
20.	Human Microbiome- homoeopathic concept	3
21.	Diagnostic procedures in Microbiology	2
	Total	98

4.3 Teaching hours Non-lecture

Sl. No.	Practicals	60 hrs
1.	Demonstration of common and latest equipments used in pathology and microbiology	4
	laboratory	
2.	Estimation of haemoglobin (by acidometer)	
		2
3.	Total count of Red Blood Cells	
		2
4.	Total count of White Blood Cells,	
		2
5.	Bleeding time and Clotting time.	
		2
6.	Blood grouping.	
		2
7.	Staining of thin and thick films- demonstration	
		2
8.	Differential count of WBC	
		2
9.	Erythrocyte sedimentation rate -demonstration	
		2
10.	Urine examination	4
	physical, chemical and microscopical examination.	
11.	Examination of Faeces- demonstration of	2
	physical, chemical (occult blood)and microscopical for ova and protozoa.	
12.	Demonstration of Methods of sterilisation	2

13.	Common culture medias- demonstration	1
14.	Gram staining	2
15.	Acid fast staining – demonstration	2
16.	Hanging drop preparation demonstration	2
17.	Interpretation of laboratory reports (serological tests, LFT, RFT, TFT etc) and its clinico pathological correlation.	5
18.	Demonstration of common pathological specimens/models	10
19.	Demonstration of common histopathological slides	10
	Demonstrative Activities	20
1.	Seminar/tutorials/ Symposium	8
2.	PBL/CBL	6
3.	Group discussion	6

5. Content mapping (competencies tables)

5.1. Introduction to Pathology-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competency				Guilbert	y	MM	F	S	
HomU G-Path M.1.1	KS	K	Basic definitions	Define the terms "Pathology", "Pathophysiology", "Health", "Disease"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	
HomU G-Path M.1.2	KS	K	Branches of Pathology	State the branches of Pathology	C1	MK	Lecture Slide present ation	Viva Voce MCQ	Viva Voce MCQ	
HomU G-Path M.1.3	KS	K	Contributions of important scientists to Pathology	List the contribution of important scientists to Pathology	C1	NK	Lecture Slide present ation	Viva Voce MCQ	NA	
HomU G-Path M.1.4	KS	K	Common terms for study of diseases	Enumerate the common terms for study of diseases	C1	MK	Lecture Slide present ation	Viva Voce MCQ	Viva Voce MCQ	
HomU G-Path M.1.5	KS	K	Definition of health as per Homoeopathic philosophy	Define Health according to Homoeopathic concept – Aphorism -9	C1	MK	Lecture Slide present ation	Viva Voce MCQ	Viva Voce MCQ	Organon of Medicine

HomU	KS	K	Definition of	Define Disease	according to	C1	MK	Lecture	Viva	Viva	Organon of
G-Path			disease as per	Homoeopathic	concept-			Slide	Voce	Voce	Medicine
M.1.6			Homoeopathic	Aphorism -11				present	MCQ	MCQ	
			philosophy					ation			
HomU	KS	K	Homoeopathic	Describe the	Homoeopathic	C1	MK	Lecture	Viva	Viva	Organon of
G-Path			concept of	concept of evolu	ition of disease			Slide	Voce	Voce	Medicine
M.1.7			evolution of	and cure				present	SAQ	SAQ	
			disease and cure					ation			

5.2. Cell injury and cellular adaptation-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessr	nent	Integration
	Competency				Guilbert	y	MM			
								F	S	
HomU	KS	K	Definition of	Define the term "Cell injury"	C 1	MK	Lecture	Viva	Viva	
G-Path			Cell injury				Slide	Voce	Voce	
M 2.1							present	MCQ	MCQ	
							ation			
HomU	KS	K	Etiology of cell	Describe the causes of cell	C 1	MK	Lecture	Viva	Viva	
G-Path			injury	injury			Slide	Voce	Voce	
M 2.2							present	SAQ	SAQ	
							ation	MCQ	MCQ	
HomU	KS	KH	Cellular	Describe the types of cellular	C 2	MK	Lecture	Viva	Viva	
G-Path			response to	response to injurious stimuli			Slide	Voce	Voce	
M 2.3			injurious stimuli	and stress.			present	MCQ	SAQ	
							ation		MCQ	

HomU	KS	K	Cellular	Define the term "cellular	C 1	MK	Lecture	Viva	Viva	
G-Path			adaptation	adaptation"				Voce	Voce	
M 2.4								SAQ	SAQ	
									LAQ	
HomU	KS	K		Discuss the various types of	C 1	MK	Lecture	Viva	Viva	
G-Path				cellular adaptation with			Slide	Voce	Voce	
M 2.5				examples			present	MCQ	MCQ	
							ation		SAQ	
									LAQ	
HomU	KS	K	Atrophy	Define the term "atrophy"	C 1	MK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.6								SAQ	SAQ	
								MCQ	MCQ	
									LAQ	
HomU	KS	KH		Explain the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path				atrophy with examples			Slide	Voce	Voce	
M 2.7							present	SAQ	SAQ	
							ation	MCQ	MCQ	
									LAQ	
HomU	KS	KH		Describe the morphologic	C 2	MK	Lecture	Viva	Viva	
G-Path				features of atrophied cell			Slide	Voce	Voce	
M 2.8							present	SAQ	SAQ	
							ation	MCQ	MCQ	
									LAQ	
HomU	KS	K	Hyperplasia	Define the term "Hyperplasia"	C 1	MK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.9								SAQ	SAQ	
								MCQ	MCQ	
									LAQ	

HomU	KS	KH		Describe types of hyperplasia	C 2	MK	Lecture	Viva	Viva	
G-Path				with examples			Slide	Voce	Voce	
M 2.10							present	SAQ	SAQ	
							ation	MCQ	MCQ	
									LAQ	
HomU	KS	KH		Discuss the morphologic	C 2	MK	Lecture	Viva	Viva	
G-Path				features of hyperplasia			Slide	Voce	Voce	
M 2.11							present	SAQ	SAQ	
							ation	MCQ	MCQ	
									LAQ	
HomU	KS	K	Hypertrophy	Define the term hypertrophy	C 1	MK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.12								SAQ	SAQ	
								MCQ	MCQ	
									LAQ	
HomU	KS	KH	_	Describe the types of	C 2	MK	Lecture	Viva	Viva	
G-Path				hypertrophy with examples.	-		Slide	Voce	Voce	
M 2.13				J. F. S. F. J. S. F. F. S. F. S. F. F. S. F. S. F.			present	SAQ	SAQ	
							ation	MCQ	MCQ	
									LAQ	
HomU	KS	KH		Describe the morphologic	C 2	MK	Lecture	Viva	Viva	
G-Path				features of hypertrophy			Slide	Voce	Voce	
M 2.14							present	SAQ	SAQ	
							ation	MCQ	MCQ	
									LAQ	
HomU	KS	KH	Differences	Enumerate differences between	C 2	MK	Lecture	Viva	Viva	
G-Path			between	Hypertrophy and Hyperplasia			Slide	Voce	Voce	
M 2.15			Hypertrophy and				present	SAQ	SAQ	
			Hyperplasia				ation	MCQ	MCQ	
			•••						LAQ	

HomU	KS	K	Metaplasia	Define the term "Metaplasia"	C 1	MK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.16								SAQ	SAQ	
								MCQ	MCQ	
									LAQ	
HomU	KS	KH		Describe the types of metaplasia	C 2	MK	Lecture	Viva	Viva	
G-Path				with examples.			G1: 1	Voce	Voce	
M 2.17							Slide	SAQ	SAQ	
							present	MCQ	MCQ	
							ation		LAQ	
HomU	KS	K	Dysplasia	Define the term "Dysplasia"	C 1	MK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.18								MCQ	MCQ	
									SAQ	
HomU	KS	KH		Explain the cytological changes	C 2	MK	Lecture	Viva	Viva	
G-Path				in Dysplasia			Slide	Voce	Voce	
M 2.19							present	MCQ	MCQ	
							ation		SAQ	
HomU	KS	KH	Biochemical and	Describe the sequential	C 2	MK	Lecture	Viva	Viva	
G-Path			ultra structural	biochemical and ultrastructural			Slide	Voce	Voce	
M 2.20			changes in	changes in reversible cell injury			present	SAQ	SAQ	
			reversible cell	due to Ischaemia and hypoxia			ation	MCQ	MCQ	
			injury						LAQ	
HomU	KS	KH	Biochemical and	Describe the sequential	C 2	MK	Lecture	Viva	Viva	
G-Path			ultrastructural	biochemical and ultrastructural			Slide	Voce	Voce	
M 2.21			changes in	changes in irreversible cell			present	MCQ	SAQ	
			Irreversible cell	injury due to Ischaemia and			ation	SAQ	MCQ	
			injury	hypoxia					LAQ	

HomU	KS	KH	Pathogenesis of	Describe the pathogenesis of	C 2	MK	Lecture	Viva	Viva	
G-Path			cell injury	Free Radical-mediated cell			Slide	Voce	Voce	
M 2.22				injury			present	SAQ	SAQ	
							ation	MCQ	MCQ	
HomU	KS	K	Morphology of	Enumerate the common	C1	MK	Lecture	Viva	Viva	
G-Path			Reversible cell	morphologic forms of			Slide	Voce	Voce	
M 2.23			injury	reversible cell injury			present	MCQ	MCQ	
							ation	SAQ	SAQ	
									LAQ	
HomU	KS	K	Hydropic	Define the term "Hydropic	C 1	MK	Lecture	Viva	Viva	
G-Path			change	change"				Voce	Voce	
M 2.24								MCQ	MCQ	
								SAQ	SAQ	
									LAQ	
HomU	KS	KH	Hydrophic	Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path			change	of Hydropic change			Slide	Voce	Voce	
M 2.25							present	MCQ	MCQ	
							ation	SAQ	SAQ	
									LAQ	
HomU	KS	KH		Describe morphology of	C 2	MK	Lecture	Viva	Viva	
G-Path	110			hydropic change with an	C 2	1,111	Loctaro	Voce	Voce	
M 2.26				example				MCQ	MCQ	
1,1 2,20				champie				SAQ	SAQ LAQ	
HomU	KS	K	Fatty change	Define the term "Fatty change"	C 1	MK	Lecture	Viva	Viva	
G-Path			,89					Voce	Voce	
M 2.27								MCQ	MCQ	
								SAQ	SAQ	
									LAQ	

HomU	KS	KH		Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path				of Fatty change			Slide	Voce	Voce	
M 2.28							present	MCQ	MCQ	
							ation	SAQ	SAQ	
									LAQ	
HomU	KS	KH		Describe morphology of Fatty	C 2	MK	Lecture	Viva	Viva	
G-Path				change in various organs			Slide	Voce	Voce	
M 2.29							present	MCQ	MCQ	
							ation	SAQ	SAQ	
									LAQ	
HomU	KS	KH	Types of mucoid	Describe the types of mucoid	C2	MK	Lecture	Viva	Viva	
G-Path			change with	change with examples				Voce	Voce	
M 2.30			examples					MCQ	MCQ	
								SAQ		
HomU	KS	KH	Types of	Describe the types of hyaline	C 2	MK	Lecture	Viva	Viva	
G-Path			Hyaline change	change with examples			Slide	Voce	Voce	
M 2.31			with examples				present	MCQ	MCQ	
							ation	SAQ		
HomU	KS	K	Morphological	List the Morphological forms of	C 1	MK	Lecture	Viva	Viva	
G-Path			forms of	Irreversible cell injury				Voce	Voce	
M 2.32			Irreversible cell injury					MCQ	MCQ	
HomU	KS	K	Necrosis	Define the term "Necrosis"	C 1	MK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.33								MCQ	MCQ	
								SAQ	SAQ	
									LAQ	

HomU	KS	K		Describe the types of Necrosis	C 1	MK	Lecture	Viva	Viva
G-Path				with examples				Voce	Voce
M 2.34								MCQ	MCQ
								SAQ	SAQ
									LAQ
HomU	KS	K	Coagulative	Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva
G-Path			Necrosis	of Coagulative necrosis			Slide	Voce	Voce
M 2.3							present	MCQ	MCQ
5							ation	SAQ	SAQ
									LAQ
HomU	KS	KH		Describe themorphological	C 2	MK	Lecture	Viva	Viva
G-Path				features of Coagulative necrosis			Slide	Voce	Voce
M 2.3				in affected organs			present	MCQ	MCQ
6							ation	SAQ	SAQ
									LAQ
HomU	KS	KH	Liquefactive	Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva
G-Path			necrosis	of liquefactive necrosis			Slide	Voce	Voce
M 2.3				-			present	MCQ	MCQ
7							ation	SAQ	SAQ
									LAQ
HomU	KS	KH		Describe the morphological	C 2	MK	Lecture	Viva	Viva
G-Path				features of liquefactive necrosis			Slide	Voce	Voce
M 2.3				in affected organs			present	MCQ	MCQ
8				_			ation	SAQ	SAQ
									LAQ
HomU	KS	KH	Differences	Enumerate differences between	C 2	MK	Lecture	Viva	Viva
G-Path			between	coagulative necrosis and				Voce	Voce
M			coagulative necrosis and	liquefactive necrosis			Slide	SAQ	SAQ
2.39			liquefactive	_			present		
			necrosis				ation	MCQ	MCQ

HomU	KS	KH	Caseous	Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path			necrosis	caseous necrosis			Slide	Voce	Voce	
M 2.40							present	MCQ	MCQ	
							ation	SAQ	SAQ	
									LAQ	
HomU	KS	KH		Describe themorphological	C 2	MK	Lecture	Viva	Viva	
G-Path				features of caseous necrosis			Slide	Voce	Voce	
M 2.41				inaffected organs			present	MCQ	MCQ	
							ation	SAQ	SAQ	
									LAQ	
HomU	KS	KH	Fat necrosis	Describe the etiopathogenesis,	C2	MK	Lecture	Viva	Viva	
G-Path				morphological features of fat			Slide	Voce	Voce	
M				necrosis			present	MCQ	MCQ	
2.42							ation	SAQ	SAQ	
HomU	KS	KH	Fibrinod	Describe the etiopathogenesis,	C2	MK	Lecture	Viva	Viva	
G-Path			necrosis	microscopic features of fibrinod			Slide	Voce	Voce	
M				necrosis			present	MCQ	MCQ	
2.43							ation	SAQ	SAQ	
HomU	KS	K	Gangrene	Define the term "Gangrene"	C 1	MK	Lecture	Viva	Viva	Surgery
G-Path								Voce	Voce	
M 2.4								MCQ	MCQ	
4								SAQ	SAQ	
									LAQ	
HomU	KS	K		State the types of gangrene	C 1	MK	Lecture	Viva	Viva	Surgery
G-Path								Voce	Voce	
M 2.4								MCQ	MCQ	
5								SAQ	SAQ	
									LAQ	

HomU	KS	KH	Dry gangrene	Explain the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	Surgery
G-Path				morphological features of dry				Voce	Voce	
M 2.4				gangrene with examples				MCQ	MCQ	
6								SAQ	SAQ	
									LAQ	
HomU	KS	KH	Wet gangrene	Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	Surgery
G-Path				morphological features of wet				Voce	Voce	
M 2.4				gangrene with examples				MCQ	MCQ	
7								SAQ	SAQ	
									LAQ	
HomU	KS	KH	Differences	Enumerate the differences	C 2	MK	Lecture	Viva	Viva	
G-Path			between dry	between dry gangrene and wet				Voce	Voce	
M 2.4			gangrene and	gangrene				SAQ	SAQ	
8			wet gangrene					MCQ	MCQ	
HomU	KS	KH	Etiopathology of	Explain the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path	KO	KII	Gas gangrene	and morphological features of	C 2	IVIK	Slide	Voce	Voce	
M 2.49			Gas gangrene	Gas gangrene				MCQ	MCQ	
W1 2.49				Gas gangrene			present ation	_	_	
							ation	SAQ	SAQ LAQ	
Hamil	KS	V	Dath alogical	Define the town "Dethelesisal	C 1	MK	Lastura	Visco	Viva	
HomU	K2	K	Pathological	Define the term "Pathological	CI	MIK	Lecture	Viva		
G-Path			calcification	calcification"			Slide	Voce	Voce	
M 2.50							present	MCQ	MCQ	
							ation	SAQ	SAQ	
HomU	KS	KH	-	Enumerate the types of	C 1	MK	Lecture	MCQ	MCQ	
G-Path				pathological calcification			Slide	Viva	Viva	
M 2.51							present ation	Viva	Viva	

HomU	KS	KH		Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path				of Dystrophic calcification with			Slide	Voce	Voce	
M 2.52				examples			present	MCQ	MCQ	
							ation	SAQ	SAQ	
HomU	KS	KH		Describe the etiopathogenesis	C 2	MK	Lecture	Viva	Viva	
G-Path				of Metastatic calcification with			Slide	Voce	Voce	
M 2.53				examples			present	MCQ	MCQ	
							ation	SAQ	SAQ	
HomU	KS	KH		Enumerate the differences	C 2	MK	Lecture	Viva	Viva	
G-Path				between Dystrophic				Voce	Voce	
M 2.54				calcification and Metastatic				MCQ	MCQ	
				calcification				SAQ	SAQ	
HomU	KS	K	Apoptosis	Define the term "Apoptosis"	C 1	DK	Lecture	Viva	Viva	
G-Path								Voce	Voce	
M 2.55								MCQ	MCQ	
								SAQ	SAQ	
HomU	KS	KH	-	Describe the role of apoptosis in	C 2	DK	Lecture	Viva	Viva	
G-Path				pathologic processes with			Slide	Voce	Voce	
M 2.56				examples			present	MCQ	MCQ	
							ation	SAQ	SAQ	
HomU	KS	K	Intracellular	Define the term "Intracellular	C 1	MK	Lecture	Viva	Viva	
G-Path			accumulation	accumulations"				Voce	Voce	
M 2.57								MCQ	MCQ	

HomU	KS	KH		Enumerate the types of	C 2	MK	Lecture	Viva	Viva	
G-Path				abnormal intracellular				Voce	Voce	
M 2.58				accumulations with examples				MCQ	MCQ	
HomU	KS	K	Definition of	Define the terms "Xanthomas	C 1	DK	Lecture	Viva	Viva	
G-Path			Xanthomas,	"Russell bodies", "Mallory				Voce	Voce	
M 2.59			"Russell	body", "Brown atrophy",				MCQ	MCQ	
			bodies",	"Heart failure cells"						
			"Mallory body",							
			"Brown							
			atrophy", "Heart							
			failure cells"							

5.3. Inflammation and repair-

Sl.No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priorit y	TL	Assessment		Integration
							MM	F	S	
HomU G-Path M.3.1	KS	K	Inflammation	Define the term "Inflammation"	C 1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology
HomU G-Path M.3.2	KS	K	Causes of inflammation	State the Causes of inflammation	C 1	MK	Lecture	Viva Voce SAQ	Viva Voce SAQ	
HomU G-Path M.3.3	KS	K	Types of inflammation	State the types of Inflammation	C 1	MK	Lecture	Viva Voce MCQ	SAQ Viva Voce MCQ	

HomU G-Path M.3.4	KS	K	Cardinal signs of inflammation	State the cardinal signs of inflammation	C 1	MK	Lecture	Viva Voce MCQ	SAQ Viva Voce MCQ
HomU G-Path M.3.5	KS	K	Definition of Acute inflammation"	Define the term "Acute inflammation"	C 1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ
Hom UG- Path M.3.6	KS	КН	Vascular events of the acute inflammation	Describe the mechanism of vascular events in acute inflammatory response	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
Hom UG- Path M.3.7	KS	КН	Cellular phase of acute inflammation	Describe the steps of cellular phase of acute inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
Hom UG- Path M.3.8	KS	КН	Process of Phagocytosis	Describe the three processes of Phagocytosis in cellular phase of acute inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.3.9	KS	K	Chemical mediators of inflammation	List the Chemical mediators of inflammation	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
Hom UG- Path M II.3.10	KS	KH	Role of cell derived Chemical mediators	State the various sources and functions of cell derived chemical mediators of inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ

HomU G-Path M.3.11	KS	КН	Role of plasma derived Chemical mediators	State the various sources and functions of Plasma derived chemical mediators of inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.3.12	KS	КН	Inflammatory cells	Describe the functions of cells participating in acute and chronic inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
HomU G-Path M.3.13	KS	КН	Giant cells	Describe the three types of macrophages derived giant cells	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
HomU G-Path M.3.14	KS	K	Morphologic Patterns of Acute Inflammation	State the Morphologic Patterns of Acute Inflammation	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
HomU G-Path M.3.15	KS	КН	Classification of inflammatory lesion	Describe the classification of inflammatory lesion based on duration, type of exudates, and anatomic location affected in acute inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ
HomU G-Path M.3.16	KS	КН	Systemic effects of inflammation	Describe the systemic effects of acute inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ

HomU G-Path M.3.17	KS	КН	Outcomes of Acute Inflammation	Describe the end result of Acute Inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ	
HomU G-Path M.3.18	KS	K	Chronic inflammation	Define the term "chronic inflammation"	CI	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.3.19	KS	K	Types of chronic inflammation	Mention the types of chronic inflammation	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.3.20	KS	КН	Morphologic Features of chronic inflammation	Describe the general features of chronic inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.3.21	KS	КН	Granulomatous inflammation	Describe chronic non-specific inflammation with examples	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G- PathM. 3.22	KS	КН	Granuloma	Describe the mechanism of evolution of a granuloma	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	

Hom UG- Path M 3.23	KS	КН		Describe the morphology of granuloma	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M 3.24	KS	К	Examples of granulomatous inflammation	State common examples of granulomatous inflammation	C1	MK	lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M 3.25	KS	КН	Systemic effects of chronic inflammation	State the systemic effects of chronic inflammation	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ	
HomU G-Path M.3.26	KS	К	Definition of Healing	Define the term "Healing"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.3.27	KS	КН	Repair and regeneration	Describe the processes involved in repair and regeneration	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.3.28	KS	КН	Wound healing by primary intention	Describe Wound healing by primary intention	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery

HomU G-Path M.3.29	KS	КН	Wound healing by secondary intention	Describe Wound healing by secondary intention	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery
HomU G-Path M.3.30	KS	КН	Complications in healing of skin wounds	Describe the complications in healing of skin wounds	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Surgery
HomU G-Path M.3.31	KS	K	Wound healing	Discuss difference in wound healing by primary and secondary intention	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.3.32	KS	K	Factors modifying the healing process	Explain the process of Fracture Healing	CI	NK	Lecture	Viva Voce	NA	
HomU G-Path M.3.33	KS	КН	Homoeopathic aspect in inflammation	Correlate the events of inflammation and outcome of various types of inflammation with miasm and representation in repertory and different MateriaMedica.	C 2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	OM, MM, Repertory

5.4. Haemodynamic disorders

Sl. No.	Domains of Competency	Miller	Content	SLO	Bloom / Guilbert	Priorit y	TL MM	Assessment		Integration
								F	S	
HomU G-Path M.4.1	KS	K	Definition of Oedema.	Define the term "Oedema"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology
HomU G-Path M.4.2	KS	КН	Types of Oedema.	Describe the pathogenesis of oedema	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.4.3	KS	КН	Transudate and exudate	Enumerate the differences between transudate and exudate	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.4.4	KS	КН	Etiopathogenesi s of Oedema	Describe the etiopathogenesis of various types of oedema with its clinical correlation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.4.5	KS	K	Definition of Hyperaemia	Define the term "Active Hyperemia"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	

HomU G-Path M.4.6	KS	K	Definition of Venous congestion	Define the term "Venous congestion" or "Passive hyperaemia"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	
HomU G-Path M.4.7	KS	КН	Chronic venous congestion	Describe the mechanisms involved in chronic venous congestion of different organs	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.4.8	KS	КН		Explain morphology of Chronic Venous Congestion in Lung	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.4.9	KS	K	Definitions	Define the terms "Haemorrhage", "Haematoma", "Ecchymosis", "Purpuras", "Petechiae",	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Forensic medicine
HomU G-Path M.4.10	KS	K	Shock	Define the term "Shock"	C1	MK	Lecture	Viva Voce MCQS AQ	Viva Voce MCQ SAQ LAQ	
Hom UG- Path M 4.11	KS	K		Classify shock based on aetiology	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery
Hom UG- Path M 4.12	KS	КН		Describe the pathogenesis of various types of shock	C2	MK	Lecture	Viva Voce MCQS AQ	Viva Voce MCQ SAQ LAQ	

Hom UG-	KS	KH		Describe the stages of shock	C2	MK	Lecture	Viva Voce	Viva Voce	Surgery
Path M								MCQ	MCQ	
4.13								SAQ	SAQ	
									LAQ	
Hom		K	Thrombosis	Define the term "Thrombosis"	C1	MK	Lecture	Viva	Viva	
UG-	KS			,"Thrombus" .				Voce	Voce	
Path								MCQ	MCQ	
M.4.14								SAQ	SAQ	
									LAQ	
Hom		K		Enumerate the primary events	C1	MK	Lecture	Viva	Viva	
UG-	KS			in Thrombogenesis-Virchow's				Voce	Voce	
Path				triad				MCQ	MCQ	
M.4.15								SAQ	SAQ	
									LAQ	
Hom	***	KH		Describe the etio-pathogenesis	C2	MK	Lecture	Viva	Viva	
UG-	KS			of thrombosis				Voce	Voce	
Path M.4.16								MCQ SAQ	MCQ	
W1.4.10								SAQ	SAQ	
									LAQ	
Hom		KH	_	Describe the morphologic	C2	MK	Lecture	Viva	Viva	
UG-	KS			features of thrombi				Voce	Voce	
Path								MCQ	MCQ	
M.4.17								SAQ	SAQ	
Hom			_	Describe the fate of thrombus			Lecture	Viva	Viva	
UG-	KS	KH			C2	DK		Voce	Voce	
Path								MCQ	MCQ	
M.4.18								SAQ	SAQ	

Hom UG- Path M.4.19	KS	КН	Clinical effects of thrombi	Describe the clinical effects of various types of thrombi	C2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M.4.20	KS	K	Embolism	Define the term "Embolism", "Embolus"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	
Hom UG- Path M 4.21	KS	K		Describe the various types of Emboli	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M 4.22	KS	КН	Etiopathogenesi s of Pulmonary thromboembolis m	Describe the aetiopathogenesis of Pulmonary thromboembolism	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M 4.23	KS	КН	Pathogenesis of Thromboemboli sm	Describe the consequences of pulmonary thromboembolism	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Practice of medicine
Hom UG- Path M 4.24	KS	KH	Pathogenesis of fat embolism	Describe the pathogenesis of fat embolism	C2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ	

Hom UG- Path M.4.25	KS	KH	Pathogenesis of air embolism	Describe the pathogenesis of air embolism	C2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ	
Hom UG- Path M.4.26	KS	КН	Pathogenesis of aminiotic fluid embolism		C2	NK	Lecture	NA		
Hom UG- Path M.4.27	KS	K	Ischaemia	Define the term "Ischaemia"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M.4.28	KS	КН		Describe the etiopathogenesis of Ischaemia	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M.4.29	KS	КН		Describe the factors determining severity of Ischaemic injury	C2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M.4.30	KS	K	Infarction	Define the term "Infarction"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG- Path M.4.31	KS	KH		Describe the etiopathogenesis of Infarction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Practice of medicine

Hom UG- Path M.4.32	KS	K	State the types of Infract	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
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5.5. Immunopathology-

Sl.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priorit y	TL MM	Assessi	ment	Integration
No.								F	S	
HomU G-Path M.5.1	KS	K	Definition of Immunity	Define the term "Immunity"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology
HomU G-Path M.5.2	KS	K	Types of immunity	State the types of immunity	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology
HomU G-Path M.5.3	KS	КН	Components of Innate immunity	Describe the four components of Innate immunity	C2	MK	Lecture Slide present ation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Physiology
HomU G-Path M.5.4	KS	КН	Functions of Innate immunity	Describe the functions of Innate immunity	C2	MK	Lecture Slide present ation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Physiology

HomU								Viva	Viva	
G-Path			Definition of	Define the term "Adaptive	C1	MK	Lecture	Voce	Voce	
M.5.5	KS	K	Adaptive "	immunity"				MCQ	MCQ	
		K	immunity"					SAQ	SAQ	
									LAQ	
HomU								Viva	Viva	
G-Path			Classification	Classify Adaptive immunity	C1	MK	Lecture	Voce	Voce	
M.5.6	KS	K	of Adaptive	with examples for each type				MCQ	MCQ	
			immunity					SAQ	SAQ	
									LAQ	
HomU								Viva	Viva	
G-Path			Features of	Describe the features of Active	C2	MK	Lecture	Voce	Voce	
M.5.7	KS		Active	immunity				MCQ	MCQ	
		KH	immunity					SAQ	SAQ	
								Brig	LAQ	
HomU								Viva	Viva	
G-Path			Features of	Describe the features of	C2	MK	Lecture	Voce	Voce	
M.5.8	KS		Passive	Passive immunity				MCQ	MCQ	
141.5.0	113	KH	immunity					SAQ	SAQ	
								SAQ	LAQ	
HomU								Viva	Viva	
G-Path			Local	Explain Local immunity	C1	MK	Lecture	Voce	Voce	
M.5.9	KS	K	immunity					MCQ	MCQ	
W1.3.9								SAQ	SAQ	
HomU								Viva	Viva	
G-Path	KS		Herd immunity	Explain Herd immunity	C1	MK	Lecture	Voce	Voce	
M.5.10	115	K						MCQ	MCQ	
								SAQ	SAQ	
HomU								Viva	Viva	
G-Path	KS	K	Organs of	State the organs of immune	C1	MK	Lecture	Voce	Voce SAQ	Physiology
M.5.11			immune system	system				SAQ	MCQ	
1,1.0.11								MCQ	LAQ	

HomU G-Path M.5.12	KS	K	Cells and Organs of Immune system	State the cells of the immune system	C1	MK	Lecture	Viva Voce SAQ MCQ	Viva Voce SAQ MCQ LAQ	Physiology
HomU G-Path M.5.13	KS	КН	Humoral immunity	Explain the mechanism of humoral immunity	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Physiology
HomU G-Path M.5.14	KS	КН	Differences between Primary and Secondary immune response	Enumerate the differences between Primary and Secondary immune response"	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.5.15	KS	КН	Mechanism of cell mediated immunity	Describe the mechanism of cell mediated immunity	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.5.16	KS	K	Definition of "Antigen"	Define the term "Antigen"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology
HomU G-Path M.5.17	KS	K	Definition of "Antibody", "Immunoglobu lin"	Define the terms "Antibody", "Immunoglobulin"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology

HomU G-Path M.5.18	KS	K	Immunoglobuli n and their function	State the types of Immunoglobulin classes and their function.	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.19	KS	КН	Biological functions of Complement	Describe the biological functions of Complement	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
HomU G-Path M.5.20	KS	K	Types of antigenantibody reaction with examples	Discuss the types of antigenantibody reactions with examples	C1	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.21	KS	K	Definition of Hypersensitivit y	Define the term "Hypersensitivity"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
HomU G-Path M.5.22	KS	K	Types of hypersensitivit y reactions	List the types of hypersensitivity reactions	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.23	KS	КН	Type I Hypersensitivit y	Describe the mechanism of type I hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ

HomU G-Path M.5.24	KS	KH	Type I Hypersensitivit y reaction with examples	Describe the examples of type I hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.25	KS	КН	Type II Hypersensitivit y reaction	Describe the mechanism of type II hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.26	KS	КН	Type II Hypersensitivit y reaction – examples	hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.27	KS	КН	Type III Hypersensitivit y reaction	Describe the mechanism of type III hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.5.28	KS	КН	Type III Hypersensitivit y reaction – examples	Describe the examples of type III hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ

HomU							Lecture	Viva	Viva	
G-Path			Type IV	Describe the mechanism of type	C2	MK		Voce	Voce	
M.5.29	KS	KH	Hypersensitivit	IV hypersensitivity reaction				MCQ	MCQ	
			y reaction					SAQ	SAQ	
									LAQ	
HomU			Type IV						Viva	
G-Path			Hypersensitivit	Describe the examples of type	C2	MK	Lecture	Viva	Voce	
M.5.30	KS	KH	y reaction –	IV hypersensitivity reaction				Voce	SAQ	
			examples					SAQ	MCQ	
							_	MCQ	LAQ	
HomU			Autoimmunity	Define the term	C1	DK	Lecture	Viva	Viva	
G-Path	KS	K	Autoimmunity	Define the term "Autoimmunity"	CI	DK		Voce	Voce	
M.5.31				Autominumty				MCQ SAQ	MCQ SAQ	
TT TT			_					_		
HomU				Describe the pathogenesis of	C2	DK	Lecture	Viva Voce	Viva Voce	
G-Path	KS	KH		autoimmunity	C2		Lecture	MCQ	MCQ	
M.5.32				autommunity				SAQ	SAQ	
HomU					C 1	DII		Viva	Viva	
G-Path	KS	17	Autoimmune	State the autoimmune diseases	C1	DK	Lecture	Voce	Voce	
M.5.33		K	diseases					MCQ	MCQ	
HomU								SAQ Viva	SAQ Viva	
			Amyloidosis	Define the term "Amyloidosis"	C1	MK	T .			
G-Path	KS	***	7 mily totalosis	Define the term 1 my lordesis	CI	17111	Lecture	Voce	Voce	
M.5.34	112	K						MCQ	MCQ	
								SAQ	SAQ	
HomU			1					Viva	Viva	
G-Path				Classify amyloidosis	C1	MK	Lecture	Voce	Voce	
M.5.35	KS							MCQ	MCQ	
141.5.55	110	K						SAQ	SAQ	
								SAQ	_	
							1	I	LAQ	

HomU G-Path M.5.36	KS	КН		Describe the pathogenesis of amyloidosis	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.5.37	KS	КН		Describe the features of amyloidosis of various organs .	C2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.5.38	KS	K	Homoeopathic concept of immunity	Explain the concept of immunity and hypersensitivity and correlate it with the Homoeopathic concepts of susceptibility	C1	NK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Organon of Medicine

5.6. Neoplasia-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priorit y	TL MM	Assessm	ent	Integration
								F	S	
HomU	KS	K	Definition of	Define the term "Neoplasia"	C 1	MK	Lecture	Viva	Viva	
G-Path			Neoplasia					Voce	Voce	
M.6.1								MCQ	MCQ	
								SAQ	SAQ	
HomU	KS	K	Nomenclature	Explain the nomenclature of	C 1	MK	Lecture	Viva	Viva	
G-Path			of tumours	tumours				Voce	Voce	
M.6.2								MCQ	MCQ	
								SAQ	SAQ	
									LAQ	

HomU G-Path M.6.3	KS	K	Classification of tumours	Classify tumours based on histogenesis and anticipated behaviour	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.6.4	KS	K	Special categories of tumours	State the special categories of tumours with examples	C 1	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
HomU G-Path M.6.5	KS	K	Characteristics of benign and malignant neoplasms	State the characteristics of tumours	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.6.6	KS	КН	Differentiating features of benign and malignant neoplasms	Differentiate benign and malignant neoplasms based on the clinical and gross features	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.6.7	KS	КН		Differentiate benign and malignant neoplasms based on microscopic features	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.6.8	KS	K	Definition of "Differentiatio n", "Anaplasia"	Define the terms "Differentiation", "Anaplasia"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ

HomU	KS	KH					Lecture	Viva	Viva	
G-Path				Differentiate benign and	C2	MK		Voce	Voce	
M.6.9				malignant neoplasms based on				MCQ	MCQ	
			Differentiating	their rate of growth				SAQ	SAQ	
			features of						LAQ	
HomU	KS	KH	benign and		~		Lecture	Viva	Viva	
G-Path			malignant	Differentiate benign and	C2	MK		Voce	Voce	
M.6.10			neoplasms	malignant neoplasms based on their spread - local invasion				MCQ	MCQ	
			neopiasins	and metastasis				SAQ	SAQ	
									LAQ	
HomU	KS	K			 .			Viva	Viva	
G-Path			Definition of	Define the term "Metastasis"	C1	MK	Lecture	Voce	Voce	
M.6.17			Metastasis					MCQ	MCQ	
								SAQ	SAQ	
									LAQ	
HomU	KS	K					Lecture	Viva	Viva	
G-Path			Routes of		C1	MK		Voce	Voce	Surgery
M.6.18			Metastasis	with examples				MCQ	MCQ	
								SAQ	SAQ	
									LAQ	
HomU	KS	KH			C2	3.477	Lecture	Viva	Viva	
G-Path			Lymphatic spread of	Describe the mechanism of lymphatic spread of malignant	C2	MK		Voce	Voce	
M.6.19			malignant	tumours				MCQ	MCQ	
			tumours	tumours				SAQ	SAQ	
									LAQ	
HomU	KS	KH	Unamataganas	Describe the mechanism of	C2	MK	Lecture	Viva	Viva	
G-Path			Haematogenou s metastasis	Haematogenous spread of	C2	IVIN		Voce	Voce	
M.6.20			5 inclustasis	malignant tumours				MCQ	MCQ	
								SAQ	SAQ	

HomU G-Path M.6.21	KS KS	KH	Spread of cancer along body cavities and natural passages Molecular	Describe the mechanism of	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ
G-Path M.6.22		KII	basis of cancer	cancer	C2	NK	Lecture	IVA	NA .
HomU G-Path M.6.23	KS	K	Definition of Carcinogenesis , Carcinogen	Define the terms "Carcinogenesis", "Carcinogen"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ
HomU G-Path M.6.24	KS	K	Carcinogens	Enumerate the various types of carcinogens	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.6.25	KS	KH	Chemical Carcinogenesis	Describe the three sequential stages in chemical carcinogenesis	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ
HomU G-Path M.6.26	KS	КН	Physical carcinogenesis	Describe the mechanism of physical carcinogenesis	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ

HomU	KS	KH	Biological	Describethe mechanism of				Viva	Viva	
G-Path			carcinogenesis	biological carcinogenesis	C2	MK	Lecture	Voce	Voce	
M.6.27								MCQ	MCQ	
								SAQ	SAQ	
HomU	KS	KH	Effects of				Lecture	Viva	Viva	
G-Path			tumour on the	Describe the effects of tumour	C2	MK		Voce	Voce	
M.6.28			host	on the host				MCQ	MCQ	
								SAQ	SAQ	
HomU	KS	K	Definition of		C 1	3.417	Lecture	X 7.	Viva	
G-Path			Paraneoplastic	Define the term "Paraneoplastic	C1	MK		Viva	Voce	
M.6.29			syndromes	syndromes"				Voce	MCQ	
								MCO	SAQ	
HomU	KS	KH	Paraneoplastic	State the various clinical			Lecture	Viva	Viva	
G-Path			syndromes	syndromes included in	C2	MK		Voce	Voce	
M.6.30				Paraneoplastic syndromes				MCQ	MCQ	
								SAQ	SAQ	
HomU	KS	KH					Lecture	Viva	Viva	Surgery
G-Path			Definition of	υ	C1	MK		Voce	Voce	
M.6.31			"Grading",	"Staging"				MCQ	MCQ	
			"Staging"				_	SAQ	SAQ	
HomU	KS	KH	Tumour	Explain about the grading of	C2	MK	Lecture	Viva	Viva	Surgery
G-Path			grading	tumour.	C2	IVIK		Voce	Voce	
M.6.32			grading	tumour.				MCQ	MCQ	
								SAQ	SAQ	
HomU	KS	KH					Lecture	Viva	Viva	Surgery
G-Path			Staging of		C2	MK		Voce	Voce	
M.6.33			tumours	tumour				MCQ	MCQ	
								SAQ	SAQ	

HomU G-Path M.6.34	KS	K	Laboratory Diagnosis of Cancer	State the various methods of Laboratory diagnosis of tumours	C1	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.6.35	KS	K	Tumour markers	State the important liquid based biomarkers in tumour diagnosis	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.6.36	KS	КН	Homoeopathic concept	Discuss about the miasmatic concept of neoplastic disorder	C 2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	OM,MM,Re pertory

5.7. Environmental and nutritional diseases-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priorit y	TL MM	Assessi	ment S	Integration
HomU G-Path M.7.1	KS	КН	Obesity	Define the term "Obesity"	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine
HomU G-Path M.7.2	KS	КН	Obesity	Describe the etiopathogenesis of Obesity	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine
HomU G-Path M.7.3	KS	КН	Pathogenesis of protein energy malnutrition	Describe the pathogenesis of protein energy malnutrition	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine

HomU G-Path M.7.4	KS	КН	Difference between Kwashiorkor and marasmus	Enumerate the differences between Kwashiorkor and Marasmus	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine
HomU G-Path M.7.5	KS	КН	Vitamin A	Describe the lesions in Vitamin A deficiency	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine
HomU G-Path M.7.6	KS	КН	Vitamin C	Describe the lesions in Vitamin C deficiency	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine
HomU G-Path M.7.7	KS	КН	Vitamin D	Describe the lesions in Vitamin D deficiency	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	Physiology Community medicine
HomU G-Path M.7.8	KS	КН	Vitamin E	Describe the lesions in Vitamin E deficiency	C 2	DK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology Community medicine
HomU G-Path M7.9	KS	КН	Vitamin K	Describe the lesions in Vitamin K deficiency	C 2	DK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology Community medicine
HomU G-Path M.7.10	KS	КН	Vitamin B1	Describe the lesions in Vitamin B1(Thiamine) deficiency	C 2	DK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology Community medicine
HomU G-Path M.7.11	KS	КН	Vitamin B2	Describe the lesions in Vitamin B2 (Riboflavin) deficiency	C 2	DK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology Community medicine

HomU G-Path M.7.12	KS	КН	Vitamin B3	Describe the lesions in Vitamin B3 (Niacin) deficiency	C 2	DK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology , Community medicine
HomU G-Path M.7.13	KS	КН	Vitamin B6	Describe the lesions in Vitamin B 6 (Pyridoxine) deficiency	C 2	DK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology , Community medicine

5.8. Diseases of the haematopoietic system, bone marrow and blood-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	nent	Integration
	Competency				Guilbert	y	MM	F	S	
HOMU G-Path M. 8.1	KS	K	Red cell disorders	Define the term "Anaemia"" Megaloblastic Anaemia"	C 1	MK	Lecture	Viva MCQ	SAQ Vivav oce MCQ	Physiology
HOMU G-Path M. 8.2	KS	КН	Classification of Anaemia	State the patho-physiologic classification of anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ SAQ Viva .MCQ	Physiology
HOMU G-Path M. 8.3	KS	K		State the morphologic classification of anaemia	C 1	MK	Lecture	Viva voce, MCQ	LAQS AQ. Viva MCQ	Physiology
HOMU G-Path M. 8.4	KS	КН		Explain the scheme of laboratory investigations for anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ, SAQ. Viva . MCQ	Physiology Practice of medicine
HOMU G-Path M. 8.5	KS	K	Iron deficiency Anaemia	Define Iron deficiency Anaemia	C 1	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	Physiology

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competency				Guilbert	y	MM	F	S	
HOMU G-Path M. 8.6	KS	КН		Describe the etio-pathogenesis of Iron deficiency anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ SAQ. Viva . MCQ	
HOMU G-Path M. 8.7	KS	КН		Describe the laboratory findings of iron deficiency anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ SAQ Viva MCQ	Practice of medicine
HOMU G-Path M. 8.8	KS	КН	Megaloblastic Anaemia	Describe the etio-pathogenesis of Megaloblastic anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ SAQ Viva MCQ	
HOMU G-Path M. 8.9	KS	КН		Describe the laboratory diagnosis of Megaloblastic Anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ SAQ. Viva . MCQ	Practice of medicine
HOMU G-Path M. 8.10	KS	K	Pernicious Anaemia	Define Pernicious Anaemia	C 1	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.11	KS	КН		Discuss the etio- pathogenesis of Pernicious Anaemia	C 2	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.12	KS	КН		Discuss the laboratory diagnosis of Pernicious Anaemia	C 2	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	Practice of medicine
HOMU G-Path M. 8.13	KS	K	Haemolytic Anaemia	Define the term "Haemolytic Anaemia"	C 1	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	nent	Integration
	Competency				Guilbert	y	MM	F	S	
HOMU	KS	KH		Classify Haemolytic Anaemias	C2	MK	Lecture	Viva	LAQ	
G-Path								voce,	SAQ.	
M. 8.14								MCQ	Viva.	
									MCQ	
HOMU	KS	KH		Describe laboratory evaluation	C 2	MK	Lecture	Viva	LAQ	
G-Path				of Haemolytic Anaemia				voce,	SAQ.	
M. 8.15								MCQ	Viva.	
									MCQ	
HOMU	KS	K	types of	Classify Haemoglobinopathies	C 1	DK	Lecture	Viva	SAQ.	
G-Path			Haemoglobinop					voce,	Viva.	
M. 8.16			athies					MCQ	MCQ	
HOMU	KS	K	Sickle cell	Define Sickle cell Anaemia	C 1	DK	Lecture	Viva	SAQ.	
G-Path			Anaemia					voce,	Viva.	
M. 8.17								MCQ	MCQ	
HOMU	KS	KH		Discuss theetio- pathogenesis of	C2	DK	Lecture	Viva	LAQS	
G-Path				sickle cell anaemia				voce,	AQ.	
M. 8.18								MCQ	Viva.	
									MCQ	
HOMU	KS	KH		Discuss the laboratory findings	C 2	DK	Lecture	Viva	LAQS	
G-Path				of sickle cell anaemia				voce,	AQ.	
M. 8.19								MCQ	Viva.	
1101 (77		***					-		MCQ	
HOMU	KS	K	Thalassemia	Define Thalassemia	C 1	MK	Lecture	Viva	SAQ.	
G-Path								voce,	Viva.	
M. 8.20								MCQ	MCQ	
M. 8.20								MCQ	MCQ	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competency				Guilbert	\mathbf{y}	MM	F	S	
HOMU	KS	KH		Classify Thalassaemia	C 2	MK	Lecture	Viva	SAQ.	
G-Path								voce,	Viva.	
M. 8.21								MCQ	MCQ	
HOMU	KS	KH		Discuss the pathophysiology of	C 2	MK	Lecture	Viva	LAQS	
G-Path				anaemia in Thalassemia				voce,	AQ.	
M. 8.22								MCQ	Viva . MCQ	
HOMU	KS	KH		Describe the laboratory findings	C 2	MK	Lecture	Viva	LAQS	Practice of
G-Path				of Thalassaemia.				voce,	AQ.	medicine
M. 8.23								MCQ	Viva.	
HOMU		K	Aplastic	Define the term "Aplastic	C 1	DK	Lecture	Viva	MCQ SAQ.	
G-Path		K	anaemia.	anaemia"	CI	DK	Lecture	voce,	Viva .	
M. 8.24	KS		anaemia.	anacima				MCQ	MCQ	
101. 0.24								1.120	1.10 Q	
HOMU	KS	KH	•	State the etiology of Aplastic	C 2	DK	Lecture	Viva	SAQ.	
G-Path				anaemia.				voce,	Viva.	
M. 8.25								MCQ	MCQ	
HOMU	KS	KH		Describe laboratory findings of	C 2	DK	Lecture	Viva	SAQ.	Practice of
G-Path	135	1311		Aplastic anaemia.	C 2	DK	Decidio	voce,	Viva	medicine
M. 8.26				ripiastic anacima.				MCQ	.MCQ	modicine
141. 0.20					_					
HOMU	KS	K	Polycythaemia	Define Polycythaemia	C 1	DK	Lecture	Viva	SAQ.	
G-Path								voce,	Viva.	
M. 8.27								MCQ	MCQ	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competency				Guilbert	y	MM	F	S	
HOMU G-Path M. 8.28	KS	KH	Classification of Polycythaemia	Classify Polycythaemia on the basis of etiology	C2	DK	Lecture ,	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.29	KS	КН	laboratory diagnosis of Polycythaemia	Describe laboratory features of Polycythaemia	C2	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	Practice of medicine
HOMU G-Path M. 8.29	KS	K	WBC disorders	Define the terms "Leukocytosis" "Leukopenia", "Leukaemoid reaction", "Leukaemias"	C 1	MK	Lecture	Viva voce, MCQ	Viva MCQ	
HOMU G-Path M. 8.30	KS	КН	Leukaemia	Classify Leukaemias	C2	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.31	KS	K		Describe the aetiology of Leukaemia	C1	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.32	KS	КН	Leukaemia	Describe the laboratory diagnosis of Chronic Myeloid Leukaemia	C 2	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	Practice of medicine
HOMU G-Path M. 8.33	KS	KH		Describe the laboratory diagnosis of Acute Myeloid Leukaemia	C 2	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	Practice of medicine

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competency				Guilbert	y	MM	F	S	
HOMU	KS	KH		Describe the laboratory	C 2	MK	Lecture	Viva	SAQ.	Practice of
G-Path				diagnosis of Acute				voce,	Viva .	medicine
M. 8.34				lymphoblastic Leukaemia				MCQ	MCQ	
HOMU	KS	K	Haemorrhagic	State the aetiology of bleeding	C 1	MK	Lecture	Viva	Viva	
G-Path			disorders	disorders				SAQ	SAQ	
M. 8.35								MCQ	MCQ	
HOMU	KS	K		Define Haemophilia A	C 1	MK	Lecture	Viva	Viva	
G-Path								MCQ	MCQ	
M. 8.36										
HOMU	KS	K		Describe the laboratory features	C 1	MK	Lecture	Viva	SAQ.	Practice of
G-Path				of Haemophilia A				MCQ	Viva .	medicine
M. 8.37									MCQ	
HOMU	KS	K		Define the terms	C 1	MK	Lecture	Viva	Viva.	
G-Path				"Thrombocytopenia",				MCQ	MCQ	
M. 8.38				"Thrombocytosis"						
HOMU	KS	K		State the causes of	C 1	MK	Lecture	Viva	SAQ.	
G-Path				Thrombocytopenia				SAQ	Viva.	
M. 8.39								MCQ	MCQ	
HOMU	KS	KH	Plasma cell	Define multiple myeloma.	C 2	DK	Lecture	Viva	SAQ.	
G-Path			myeloma					voce,	Viva .	
M. 8.40								MCQ	MCQ	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	nent	Integration
	Competency				Guilbert	y	MM	F	S	
HOMU	KS	KH	Plasma cell	Describe the laboratory	C 2	DK	Lecture	Viva	SAQ.	Practice of
G-Path			myeloma	diagnosis of Multiple myeloma				voce,	Viva.	medicine
M. 8.41								MCQ	MCQ	
HOMU	KS	K	Hodgkin's	Discuss features of Hodgkin's	C1	DK	Lecture	Viva	SAQ.	Practice of
G-Path			lymphoma	lymphoma				SAQ	Viva.	medicine
M. 8.42								MCQ	MCQ	
HOMU	KS	K		Explain the appearance of Reed	C 1	DK	Lecture	Viva	SAQ.	
G-Path				Sternberg cell in tissues				SAQ	Viva.	
M. 8.43								MCQ	MCQ	
HOMU	KS	K		Discuss features of Non	C 1	NK	Lecture	Viva	NA	Practice of
G-Path				Hodgkin's lymphoma				SAQ		medicine
M. 8.44								MCQ		
HOMU	KS	K	Splenomegaly	State the causes of	C1	DK	Lecture	Viva	Viva	
G-Path				Splenomegaly				SAQ	SAQ	
M. 8.45								MCQ	MCQ	

5.9. Diseases of the Respiratory System

l. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessn	nent	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 9.1	KS	K	Pulmonary Tuberculosis	Describe the three components of Primary complex or Ghon complex	C 1	MK	Lecture	Viva LAQ SAQ MCQ	LAQ SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.2	KS	K		Describe the fate of primary tuberculosis	C1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ Viva MCQ	
HOMUG- Path M. 9.3	KS	K		Describe the morphology of Secondary pulmonary tuberculosis	C1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ Viva MCQ	
HOMUG- Path M. 9.4	KS	K		Enumerate the differences between Primary tuberculosis and Secondary tuberculosis	C1	MK	Lecture	Viva SAQ MCQ	LAQ Viva SAQ MCQ	
HOMUG- Path M. 9.5	KS	K		Describe the fate of secondary pulmonary tuberculosis	C1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ Viva MCQ	
HOMUG- Path M. 9.6	KS	K		Discuss the diagnosis of pulmonary tuberculosis	C1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.7	KS	K	Pneumonia	Define the term "Pneumonia"	C1	MK	Lecture	Viva MCQ	Viva MCQ	

l. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessm	nent	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 9.8	KS	K		State the Anatomic classification of Pneumonia	C1	MK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.9	KS	K		State the Aetiologic classification of Pneumonia	C1	MK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.11	KS	КН		Discuss the morphologic features of lobar Pneumonia	C 2	MK	Lecture	Viva LAQ SAQ MCQ	LAQ SAQ Viva MCQ	
HOMUG- Path M. 9.12	KS	K		Discuss the morphologic features of bronchopneumonia	C1	MK	Lecture	Viva SAQ MCQ	Viva SAQ MCQ	
HOMUG- Path M. 9.16	KS	КН		State the complications of Pneumonia	C2	MK	Lecture	Viva voce, MCQ	SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.17	KS	K	Lung abscess	Define the term "Lung abscess"	C1	MK	Lecture	Viva MCQ	Viva MCQ	
HOMUG- Path M. 9.18	KS	КН		Describe aetiopathogenesis of lung abscess	C 2	MK	Lecture	Viva SAQ MCQ	Viva MCQ	Practice of medicine
HOMUG- Path M. 9.19	KS	КН		Explain the morphology of lung abscess	C2	DK	Lecture	Viva SAQ MCQ	Viva MCQ	
HOMUG- Path M. 9.20	KS	K	Obstructive lung diseases	Classify chronic obstructive lung diseases	C1	MK	Lecture	Viva SAQ MCQ	LAQ Viva SAQ MCQ	

l. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessn	ient	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 9.21	KS	K	Chronic bronchitis.	Define the term "Chronic Bronchitis"	C1	MK	Lecture	Viva MCQ	SAQ Viva MCQ	
HOMUG- Path M. 9.22	KS	КН		Describe the etio-pathogenesis of chronic bronchitis	C2	MK	Lecture	Viva LAQ SAQ MCQ	LAQ SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.23	KS	КН		Describe the morphologic features of chronic bronchitis.	C 2	DK	Lecture	Viva SAQ MCQ	LAQ SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.24	KS	K	Emphysema	Define the term "Emphysema"	C1	MK	Lecture	Viva MCQ	SAQ Viva MCQ	
HOMUG- Path M. 9.25	KS	K		Classify Emphysema	C1	MK	Lecture	Viva voce, MCQ	LAQ Viva SAQ MCQ	
HOMUG- Path M. 9.26	KS	КН		Explain the aetio-pathogenesis of Emphysema	C2	MK	Lecture	Viva SAQ MCQ	LAQ Viva SAQ MCQ	Practice of medicine
HOMUG- Path M. 9.27	KS	K	Emphysema	Describe the morphologic features of emphysema.	C1	DK	Lecture	Viva SAQ MCQ	LAQ Viva SAQ MCQ	Practice of medicine
HOMUG- Path M. 9.28	KS	K	Bronchial Asthma	Define the term "Bronchial Asthma"	C1	MK	Lecture	Viva MCQ	SAQ Viva MCQ	

l. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessm	ent	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M.	KS	K		Classify Bronchial Asthma	C1	MK	Lecture	Viva SAQ	LAQ Viva	
9.29								MCQ	SAQ MCQ	
HOMUG-	KS	K		Enumerate the differences	C1	MK	Lecture	Viva	LAQ	Practice of
Path M.				between Extrinsic Asthma and				SAQ	SAQ	medicine
9.30				Intrinsic Asthma				MCQ	Viva MCQ	
HOMUG-	KS	KH		Describe the morphologic	C 2	MK	Lecture	Viva	LAQ	
Path M.				features of Bronchial asthma				SAQ	Viva	
9.31								MCQ	SAQ MCQ	
HOMUG-	KS	K	Bronchiectasis	Define the term	C1	MK	Lecture	Viva	SAQ	
Path M. 9.32				"Bronchiectasis"				voce, MCQ	Viva MCQ	
HOMUG-	KS	KH		Describe the aetiopathogenesis	C 2	MK	Lecture	Viva	SAQ	Practice of
Path M. 9.33				of bronchiectasis				voce, MCQ	Viva MCQ	medicine
HOMUG-	KS	K		Describe the morphology of	C1	MK	Lecture	Viva	SAQ	
Path M. 9.34				bronchiectasis				voce, MCQ	Viva MCQ	
HOMUG-	KS	K	Pneumoconiosis	Define the term	C1	DK	Lecture	Viva	SAQ	
Path M. 9.35				"Pneumoconioses"				MCQ	Viva MCQ	
HOMUG-	KS	K		Classify Pneumoconiosis	C1	DK	Lecture	Viva	SAQ	
Path M. 9.36								SAQ MCQ	Viva MCQ	
HOMUG-	KS	KH	coal worker's	Describe the etio-pathogenesis	C2	DK	Lecture	Viva	SAQ	Practice of
Path M. 9.37			pneumoconiosis.	of coal worker's pneumoconiosis.				SAQ MCQ	Viva MCQ	medicine

l. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessm	ent	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 9.38	KS	K		Describe the morphologic features of coal worker's pneumoconiosis.	C1	DK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	
HOMUG- Path M. 9.39	KS	K	Lung cancer	Describe the aetiology of Lung cancer	C1	DK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	Practice of medicine
HOMUG- Path M. 9.40	KS	K		Describe the morphology of lung cancer	C1	DK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	
HOMUG- Path M. 9.41	KS	K		Explain the spread of lung cancer	C1	DK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	
HOMUG- Path M. 9.42	KS	КН		Describe the clinical features of lung cancer	C 2	NK	Lecture	Viva SAQ MCQ	NA	Practice of medicine, Surgery

5.10. Diseases of the oral cavity and salivary glands and gastrointestinal tract-

Sl. No.	Domain of	Domain of	Domain of	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessment		Integration
	Competency				Guilbert		MM	F	S				
HOMUG- Path M. 10.1	KS	K		Definition of "Stomatitis", "Glossitis"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva				
HOMUG- Path M. 10.2	KS	K	Oral leukoplakia	Define the term "Oral leucoplakia"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva				
HOMUG- Path M. 10.3	KS	K		Describe the aetiology of Oral Leukoplakia	C 1	DK	Lecture	Viva SAQ MCQ	SAQ, MCQ, Viva	Practice of medicine, Surgery			

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessi	ment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 10.4	KS	K		Describe the morphologic features of oral leukoplakia	C 1	NK	Lecture	Viva SAQ MCQ	SAQ, MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 10.5	KS	K	Diseases of GI system	Define reflux oesophagitis.	C1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 10.6	KS	КН	Reflux esophagitis	Describe the aetiopathogenesis of Reflux esophagitis	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 10.7	KS	КН		Describe the morphology of Reflux Oesophagitis	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ MCQ Viva	
HOMUG- Path M. 10.8	KS	КН	Barrett's oesophagus	Describe the aetiopathogenesis, of Barrett oesophagus	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine, Surgery
HOMUG- Path M. 10.9	KS	K		Describe the morphology of Barret oesophagus	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.10	KS	K	Carcinoma oesophagus	Describe the aetiology of carcinoma oesophagus	C 1	NK	Lecture	NA	NA	Practice of medicine, Surgery

Sl. No.	Domain of	Miller	Content SLO Bloom / Guilbert Pri	Priority	TL	Assessment		Integration		
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 10.11	KS	K		Describe the morphology of Carcinoma of oesophagus	C 1	NK	Lecture	Viva SAQ	NA	
								MCQ		
HOMUG- Path M. 10.12	KS	КН		Describe the spread of Carcinoma oesophagus.	C2	NK	Lecture	Viva SAQ	NA	Practice of medicine, Surgery
								MCQ		
HOMUG- Path M. 10.13	KS	K	Gastritis	Classify Gastritis	C 1	MK	Lecture	Viva SAQ MCQ	Viva SAQ MCQ	
HOMUG- Path M. 10.14	KS	K	Gastritis	Describe the aetiopathogenesis of Acute gastritis	C 1	MK	Lecture	Viva SAQ MCQ	Viva MCQ	Practice of medicine, Surgery
HOMUG- Path M. 10.15	KS	K		Describe the aetiopathogenesis of Chronic gastritis	C 1	MK	Lecture	Viva SAQ MCQ	Viva MCQ	
HOMUG- Path M. 10.16	KS	K	Peptic ulcer	Define the term "Peptic ulcer"	C 1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 10.17	KS	КН		Describe the aetiopathogenesis of chronic peptic ulcer	C 2	MK	Lecture	Viva SAQ MCQ	SAQ MCQ Viva LAQ	Practice of medicine, Surgery

Sl. No.	Domain of	Miller		Bloom /	Priority	TL	Assessment		Integration	
	Competency				Guilbert		MM	F	\mathbf{S}	
HOMUG- Path M. 10.18	KS	КН		Describe the morphology of chronic peptic ulcer	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 10.19	KS	КН		Describe the complications of Peptic ulcer	C2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 10.20	KS	КН		Discuss differences between gastric ulcer and duodenal ulcers.	C2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.21	KS	K	gastric carcinoma,	Describe the aetiology of Gastric carcinoma	C 1	DK	Lecture	Viva SAQ MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 10.22	KS	K	gastric carcinoma,	Describe morphology of gastric carcinoma	C 1	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 10.23	KS	K		Describe the spread of gastric carcinoma.	C 1	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.24	KS	K	Acute appendicitis	Define the term "Acute appendicitis"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 10.25	KS	КН		Describe the etio- pathogenesis of acute appendicitis	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ MCQ Viva	Practice of medicine, Surgery

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessi	ment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 10.26	KS	КН		Describe the morphology of Acute appendicitis	C2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ MCQ Viva	
HOMUG- Path M. 10.27	KS	KH	Inflammatory bowel disease	Describe the aetio- pathogenesis of Inflammatory bowel disease	C 2	MK	Lecture	Viva SAQ MCQ	SAQ, MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 10.28	KS	K		Describe the morphologic features of Crohn's disease	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 10.29	KS	K		Describe the morphologic features of Ulcerative colitis	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.30	KS	K	Inflammatory bowel disease	Enumerate the differences between Crohn's disease and Ulcerative Colitis.	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.31	KS	K		Discuss the complications of Inflammatory bowel disease	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.32	KS	K	Carcinoma Colon	Describe the aetiology of Colorectal cancer	C 1	DK	Lecture	Viva MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine, Surgery

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessi	ment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M.	KS	K		Describe the morphology of Colorectal cancer	C 1	DK	Lecture	Viva SAQ	LAQ SAQ,	
10.33				Colorectal cancer				MCQ	MCQ, Viva	
HOMUG- Path M. 10.34	KS	K		Describe the spread of Colorectal cancer	C 1	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 10.35	KS	K	Intestinal tuberculosis	Describe the pathology of Intestinal tuberculosis	C 1	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	

5.11. Diseases of liver, gall bladder and biliary ducts-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competenc				Guilbert	y	MM	F	S	
	y									
HOMUG-	KS	K	Liver Function	Discuss the liver function tests	C 1	MK	Lecture	OSPE	OSPEL	
Path M.			Tests	alongwith clinical significance				Viva	AQ	
11.1				of each				MCQ	SAQ	
									MCQ	
									Viva	
HOMUG-	KS	K	Jaundice	Define the term "Jaundice"	C 1	MK	Lecture	Viva	SAQ,	
Path M.								MCQ	MCQ,	
11.2									Viva	
HOMUG-	KS	K		State the pathophysiologic	C 1	MK	Lecture	Viva	LAQ	
Path M.				classification of jaundice.				SAQ	SAQ,	
11.3								MCQ	MCQ,	
									Viva	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competenc y				Guilbert	y	MM	F	S	
HOMUG- Path M. 11.4	KS	K	Cholestatisis	Define Cholestasis	C 1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 11.5	KS	K	Alcoholic Liver Disease	Define the term "Alcoholic liver disease"	C 1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 11.6	KS	K		Explain the pathogenesis of alcoholic liver disease	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HOMUG- Path M. 11.7	KS	K		Describe the morphologic spectrum of alcoholic liver disease	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 11.8	KS	K	Liver Cirrhosis	Define the term "Liver cirrhosis"	C 1	MK	Lecture	Viva voce, MCQ	LAQ SAQ, MCQVi va	
HOMUG- Path M. 11.9	KS	K	Liver Cirrhosis	Classify Cirrhosis based on morphology and aetiology	C 1	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQVi va	Practice of medicine
HOMUG- Path M. 11.10	KS	КН		Describe the morphology of Alcoholic cirrhosis	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQVi va	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priorit	TL	Assessi	ment	Integration
	Competenc y				Guilbert	y	MM	F	S	
HOMUG- Path M. 11.11	KS	K	Hepatocellular Carcinomas	State the aetiology of Hepatocellular Carcinomas	C 1	DK	Lecture	Viva SAQ MCQ	Viva SAQ MCQ	
HOMUG- Path M. 11.12	KS	K		Describe the morphology of hepatocellular carcinoma.	C 1	DK	Lecture	Viva SAQ MCQ	Viva SAQ MCQ	Practice of medicine, Surgery
HOMUG- Path M. 11.13	KS	K	Cholelithiasis.	State the risk factors of cholelithiasis.	C 1	MK	Lecture	Viva SAQ MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 11.14	KS	КН		Describe the pathogenesis of cholelithiasis/ gall stones	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 11.15	KS	K		Describe the various types of gall stones	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	

5.12. Diseases of the pancreas-

Sl. No.	Domain of	Miller	Content	SLO			Bloom /	Priority	TL	Assessn	ent	Integration
	Competency						Guilbert		MM	\mathbf{F}	\mathbf{S}	
HOMUG- Path M. 12.1	KS	K	Acute Pancreatitis	Define the pancreatitis"	term	"Acute	C 1	MK	Lecture	Viva MCQ	MCQ, Viva	
HOMUG- Path M. 12.2	KS	КН		Describe to pathogenesis pancreatitis	the of	aetio- acute	C 2	MK	Lecture	Viva MCQ	MCQ, Viva	Practice of medicine, Surgery

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessr	nent	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M.	KS	K		State the morphologic features of acute pancreatitis.	C 1	MK	Lecture	Viva voce,	MCQ, Viva	
12.3								SAQ MCQ	voce	
HOMUG- Path M. 12.4	KS	K	Chronic Pancreatitis	Define the term "Chronic pancreatitis"	C 1	DK	Lecture	Viva voce, MCQ	MCQ, Viva	
HOMUG- Path M. 12.5	KS	КН		Describe the aetio- pathogenesis of chronic Pancreatitis	C 2	DK	Lecture	Viva voce, SAQ MCQ	MCQ, Viva voce	Practice of medicine, Surgery
HOMUG- Path M. 12.6	KS	K		State the morphologic features of Chronic Pancreatitis.	C 1	DK	Lecture	Viva voce, SAQ MCQ	MCQ, Viva	
HOMUG- Path M. 12.7	KS	K	Diabetes mellitus	Define the term "Diabetes mellitus"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 12.8	KS	K		Enumerate the aetiologic classification of diabetes mellitus	C 1	DK	Lecture	Viva SAQ MCQ	MCQ Viva SAQ	
HOMUG- Path M. 12.9	KS	K		Describe the pathogenesis of Type1 diabetes mellitus	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva SAQ	Practice of medicine
HOMUG- Path M. 12.10	KS	K		Describe the pathogenesis of Type 2 diabetes mellitus	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva SAQ	Practice of medicine
HOMUG- Path M. 12.11	KS	K		Discuss the laboratory diagnosis of Diabetes Mellitus	C 1	MK	Lecture	Viva MCQ SAQ	LAQ MCQ Viva	Practice of medicine

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessr	nent	Integration
	Competency				Guilbert		MM	F	S	
									SAQ	
HOMUG- Path M. 12.12	KS	K		Describe the Acute metabolic complications of diabetes mellitus	C 1	MK	Lecture	Viva MCQ SAQ	LAQ MCQ Viva SAQ	Practice of medicine
HOMUG- Path M. 12.13	KS	K		Describe the Late systemic complications of diabetes mellitus	C 1	MK	Lecture	Viva MCQ SAQ	LAQ MCQ Viva SAQ	

5.13. Diseases of blood vessels and lymphatics-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assess	ment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 13.1	KS	K	Arteriosclerosis	Define Arteriosclerosis	C 1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 13.2	KS	K		State the types of Arteriosclerosis	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 13.3	KS	K	Atherosclerosis	Define the term "Atherosclerosis"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 13.4	KS	КН		Describe the aetiology of Atherosclerosis	C 2	MK	Lecture	Viva MCQ SAQ	LAQ SAQ MCQ Viva	Practice of medicine

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assess	ment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 13.5	KS	КН		Describe the pathogenesis of Atherosclerosis	C 2	MK	Lecture	Viva MCQ SAQ	LAQ SAQ MCQ Viva	
HOMUG- Path M.13.6	KS	K	Atherosclerosis	Describe the morphologic features of Atherosclerosis	C 1	MK	Lecture	Viva MCQ SAQ LAQ	LAQ SAQ, MCQ, Viva	
HOMUG- PathM.13.7	KS	K	Hypertension.	Define the term "Hypertension"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 13.8	KS	K		Enumerate the aetiologic classification of Hypertension	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 13.9	KS	КН		Describe the aetio- pathogenesis of Primary/essential Hypertension	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 13.10	KS	КН		Describe the aetio- pathogenesis of Secondary Hypertension	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 13.11	KS	KH		State the major effects of systemic hypertension on the organs	C 2	MK	Lecture	Viva voce, SAQ MCQ	LAQ SAQ, MCQ, Viva voce	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assess	ment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 13.12	KS	K	Aneurysm	Define the term "Aneurysm"	C 1	DK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 13.13	KS	K		Classify Aneurysm	C 1	DK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 13.14	KS	КН	Aneurysm	Describe the clinical effects of aneurysms	C 2	DK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 13.15	KS	K	Tumors of blood vessels	State the benign tumours of blood vessels	C 1	NK	Lecture	Viva voce, MCQ	NA	
HOMUG- Path M. 13.16	KS	K		State the malignant tumours of blood vessels	C 1	NK	Lecture	Viva voce, MCQ	NA	
HOMUG- Path M. 13.17	KS	K		Define the term "Lymphangitis"	C 1	NK	Lecture	Viva voce, MCQ	Viva MCQ	

5.14. Diseases of cardiovascular system-

Sl. No.	Domain of Competenc	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessi	ment	Integratio n
	y							F	S	
HomUG- Path M. 14.1	KS	K	Ischaemic Heart Disease	Define the term "Ischaemic Heart Disease"	C 1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HomUG- Path M. 14.2	KS	КН		Describe the etio- pathogenesis of Ischaemic Heart Disease	C 2	MK	Lecture	Viva MCQ SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HomUG- Path M. 14.3	KS	K		State the effects of Myocardial ischaemia	C 1	MK	Lecture	Viva MCQ SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HomUG- Path M. 14.4	KS	K	Angina Pectoris	Define the term "Angina Pectoris"	C 1	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva	
HomUG- Path M. 14.5	KS	K		Describe Stable or Typical angina	C 1	MK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	
HomUG- Path M. 14.6	KS	K		Explain Prinzmetal's variant Angina	C 1	MK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	
HomUG- Path M. 14.7	KS	K		Describe Unstable or Crescendo angina.	C 1	MK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	

Sl. No.	Domain of Competenc	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessi	ment	Integratio n
	y							F	S	
HomUG- Path M. 14.8	KS	КН	Myocardial Infarction.	Describe the aetio- pathogenesis of Myocardial Infarction.	C 2	MK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HomUG- Path M. 14.9	KS	КН		Describe the gross changes in Myocardial infarction	C 2	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HomUG- Path M. 14.10	KS	КН		Describe the microscopic changes in Myocardial infarction	C 2	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HomUG- Path M. 14.11	KS	КН		Describe the diagnosis of Myocardial Infarction.	C 2	MK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HomUG- Path M. 14.12	KS	K	Rheumatic heartdisease.	Define the terms "Rheumatic fever", "Rheumatic heart disease"	C 1	MK	Lecture	Viva voce, MCQ	MCQ, Viva voce	
HomUG- Path M. 14.13	KS	КН		Describe etio-pathogenesisof Rheumatic heart disease.	C 2	MK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HomUG- Path M. 14.14	KS	K		Describe the Cardiac lesions of Rheumatic heart disease	C 1	MK	Lecture	Viva voce, MCQ SAQ	LAQS AQ, MCQ, Viva voce	

Sl. No.	Domain of Competenc	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessi	ment	Integratio n
	y							F	S	
HomUG- Path M. 14.15	KS	K	Rheumatic heart disease.	Describe the extra-cardiac lesions in Rheumatic heart disease.	C 1	MK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	
HomUG- Path M. 14.16	KS	K		Enumerate the diagnostic criterion of Rheumatic heartdisease.	C 1	MK	Lecture	Viva voce, MCQ SAQ	LAQS AQ, MCQ, Viva voce	
HomUG- Path M. 14.17	KS	K	Infective Endocarditis	Define the term "Infective endocarditis"	C 1	DK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HomUG- Path M. 14.18	KS	КН	Infective Endocarditis	Describe the aetio- pathogenesis of Infective Endocarditis	C 2	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ, Viva	Practice of medicine
HomUG- Path M. 14.19	KS	K		Describe the morphologic changes of Infective Endocarditis	C 1	NK	Lecture	Viva MCQ SAQ	NA	
HomUG- Path M. 14.20	KS	K		Enumerate the Duke criteria for diagnosis of Infective endocarditis	C 1	NK	Lecture	Viva MCQ SAQ	NA	
HomUG- Path M. 14.21	KS	КН		Define the term "Pericardial effusion"	C 2	MK	Lecture	Viva MCQ	MCQ, Viva	
HomUG- Path . 14.22	KS	КН		Define the term "Pericarditis"	C 2	MK	Lecture	Viva MCQ	MCQ, Viva	Practice of medicine

5.15. Diseases of kidney and lower urinary tract-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assess	sment	Integratio
	Competenc y				Guilbert	Ţ	MM	F	S	n
HOMUG- Path M. 15.1	KS	K	Renal function tests	Discuss renal function tests in detail	C 1	MK	Lecture	Viva MC Q	OSPE LAQ SAQ MCQ Viva voce	Practice of medicine
HOMUG- Path M. 15.2	KS	K	Glomerular disease	Define the term "Glomerulonephritis" "Nephrotic syndrome" "Acute nephritic syndrome"	C 1	MK	Lecture	Viva MC Q SAQ	MCQ Viva SAQ	
HOMUG- Path M. 15.3	KS	K	Acute nephritic syndrome.	Enumerate the aetiology of Acute nephritic syndrome	C 1	DK	Lecture	Viva voce , MC Q SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 15.4	KS	КН	Acute nephritic syndrome.	Describe the clinical features of Acute nephritic syndrome.	C 2	DK	Lecture	Viva voce , MC Q SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HOMUG- Path M. 15.5	KS	K	Nephrotic syndrome	Enumerate the causes of Nephrotic syndrome	C 1	DK	Lecture	Viva MC Q SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Asses	sment	Integratio
	Competenc y				Guilbert	-	MM	F	S	n
HOMUG- Path M. 15.6	KS	K		Describe the characteristic features of Nephrotic syndrome	C 1	DK	Lecture	Viva MC Q SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 15.7	KS	KH		Enumerate the differences between Nephrotic syndrome and Acute Nephritic syndrome	C 2	MK	Lecture	Viva voce , MC Q SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 15.8	KS	K	Glomerulonep hritis	Define Glomerulonephritis	C 1	DK	Lecture	Viva MC Q	SAQ, MCQ, Viva	
HOMUG- Path M. 15.9	KS	КН	Acute Post- Streptococcal Glomerulonep hritis	Describe the aetio- pathogenesis of Acute post- streptococcal glomerulonephritis.	C 2	MK	Lecture	Viva MC Q SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 15.10	KS	K	Nephrolithiasis	State the types of Renal calculi	C 1	MK	Lecture	Viva voce , MC Q SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M.15.11	KS	K	Nephrolithiasis	Describe the etio-pathogenesis of each type of renal stones	C 1	МК	Lecture	Viva MC Q SAQ	LAQ SAQ, MCQ, Viva	

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Asses	sment	Integratio
	Competenc				Guilbert		MM	F	S	n
HOMUG- Path M.15.12	KS	K		Describe the morphology of each type of renal stones	C 1	MK	Lecture	Viva SAQ MC Q	LAQ SAQ MCQ Viva	
HOMUG- Path M.15. 13	KS	K	Urinary tract infections	Define the term "Acute pyelonephritis" "ureteritis", "Cystitis", "Urethritis"	C 1	MK	Lecture	Viva MC Q	SAQ, MCQ, Viva	
HOMUG- Path M. 15.14	KS	K	Renal Cell Carcinoma	Discuss the etiology of Renal Cell Carcinoma	C 1	DK	Lecture	Viva voce , MC Q SAQ	SAQ, MCQ, Viva voce	Practice of medicine, Surgery
HOMUG- Path M. 15.15	KS	K		Describe the morphology of Renal Cell Carcinoma	C 1	DK	Lecture	Viva voce , MC Q SAQ	SAQ, MCQ, Viva voce	
HOMUG- Path M. 15.16	KS	K	Wilm's tumour	Describe the morphology of Wilm's tumour	C 1	NK	Lecture	Viva voce , MC Q SAQ	NA	Practice of medicine, Surgery

5.16. Diseases of male reproductive system-

Sl. No.	Domain of Competenc	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessi	ment	Integratio n
	\mathbf{y}							F	S	
HOMUG- Path M. 16.1	KS	K	Inflammatory diseases	Define the terms "Orchitis", "Epididymitis"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG- Path M. 16.2	KS	K	Testicular Tumors	Classify testicular tumors	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ Viva	Practice of medicine, Surgery
HOMUG- Path M. 16.3	KS	K		Discuss the morphology of Germ cell tumors	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ Viva	
HOMUG- Path M. 16.4	KS	K	Inflammatory diseases	Define the term "Prostatitis"	C 1	NK	Lecture	Viva MCQ	NA	
HOMUG- Path M. 16.5	KS	K		State the types of Prostatitis	C 1	NK	Lecture	Viva MCQ	NA	Practice of medicine, Surgery
HOMUG- Path M. 16.6	KS	KH	Benign Nodular Hyperplasia Of Prostate	Describe the etio-pathogenesis of Benign nodular hyperplasia of prostate	C 2	MK	Lecture	Viva MCQ SAQ	LAQ SAQ MCQ, Viva	Practice of medicine, Surgery
HOMUG- Path M. 16.7	KS	KH		Describe the pathology of Benign nodular hyperplasia of prostate	C 2	MK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine, Surgery
HOMUG- Path M. 16.8	KS	K	Ca Prostate	Describe the aetiologyof Carcinoma of Prostate	C 1	NK	Lecture	Viva voce, MCQ SAQ	NA	

Sl. No.	Domain of Competenc	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessi	nent	Integratio n
	y							F	S	
HOMUG- Path M. 16.9	KS	КН		Describe the morphology of Carcinoma of Prostate	C 2	NK	Lecture	Viva voce, MCQ SAQ	NA	Practice of medicine, Surgery
HOMUG- Path M. 16.10	KS	КН	Ca Prostate	Explain the spread of Carcinoma of Prostate	C2	NK	Lecture	Viva MCQ SAQ	NA	

5.17. Diseases of the female genitalia and breast-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL MM	Assess	ment	Integration
	Competency				Guilbert			F	S	
HOMUG- Path M. 17.1	KS	K	Cervicitis	Define the term "Cervicitis"	C 1	DK	Lecture	Viva MCQ	MCQ, Viva	OBG
HOMUG- Path M. 17.2	KS	K		State the types of Cervicitis	C 1	DK	Lecture	Viva MCQ	MCQ, Viva	
HOMUG- Path M. 17.3	KS	K		Define the term Endometritis.	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva	
HOMUG- Path M. 17.4	KS	K		Define the term Endometriosis	C 1	DK	Lecture	Viva MCQ	MCQ, Viva	OBG

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL MM	Assess	sment	Integration
	Competency				Guilbert			F	S	
HOMUG- Path M. 17.5	KS	КН		Define the term Leiomyomas	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva SAQ	OBG
HOMUG- Path M. 17.6	KS	КН		Discuss the morphology of Leiomyoma uterus	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva SAQ	OBG
HOMUG- Path M. 17.7	KS	K		Define the term 'Adenomyosis'	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva	OBG
HOMUG- Path M. 17.8	KS	КН	Ovarian Tumors.	Classify ovarian tumours	C 1	MK	Lecture	Viva MCQ SAQ	LAQ MCQ Viva SAQ	OBG
HOMUG- Path M. 17.9	KS	K		Discuss the morphology of germ cell tumors of ovary	C 2	MK	Lecture	Viva MCQ SAQ	LAQ MCQ Viva SAQ	OBG
HOMUG- Path M. 17.10	KS	K		Discuss the morphology of serous tumors of ovary	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ MCQ, Viva	OBG
HOMUG- Path M. 17.11	KS	K		Discuss the morphology of mucinous tumors of ovary	C 2	MK	Lecture	Viva MCQ	LAQ SAQ, MCQ, Viva	OBG
HOMUG- Path M. 17.12	KS	КН		Describe the pathology of Fibroadenoma breast	C 2	MK	Lecture	Viva voce, MCQ	SAQ, MCQ,	

Sl. No.	Domain of	Miller	Content		SLO	Bloom /	Priority	TL MM	Assess	sment	Integration
	Competency					Guilbert			F	S	
									SAQ,	Viva voce	
HOMUG- Path M. 17.13	KS	K	Tumors breast	of	Classify breast tumors as per WHO	C 1	MK	Lecture	Viva MCQ SAQ	LAQ MCQ Viva SAQ	Surgery
HOMUG- Path M. 17.14	KS	K			Describe the etiology of Carcinoma Breast	C 1	MK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	Surgery
HOMUG- Path M. 17.15	KS	КН			Describe the morphologic features of Carcinoma Breast	C 2	MK	Lecture	Viva voce, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	

5.18. Diseases of the skin and soft tissue-

Sl. No.	Domain of	Miller	Content	t	SLO	Bloom /	Priority	TL MM	Assessr	nent	Integration
	Competency					Guilbert			F	S	
HOMUG- Path M. 18.1	KS	K	Tumors skin	of	State the predisposing conditions of Squamous cell carcinoma	C 1	DK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 18.2	KS	КН			Describe the pathology of squamous cell carcinoma of skin	C 2	DK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	
HOMUG- Path M. 18.3	KS	K			State the pre-disposing factors for basal cell carcinoma (Rodent ulcer)	C 1	NK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	
HOMUG- Path M. 18.4	KS	КН			Describe morphologic features of basal cell carcinoma of skin	C 2	NK	Lecture	Viva voce, MCQ SAQ	SAQ, MCQ, Viva voce	Practice of medicine, Surgery
HOMUG- Path M. 18.5	KS	КН	Soft tumors	tissue	Describe morphologic features of lipoma.	C 2	MK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva voce	

5.19. Diseases of the musculo-skeletal system-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessm	ent	Integration
	Competency				Guilbert	-	MM	F	S	
HOMUG- Path M. 19.1	KS	K	Bone tumors	Classify bone tumors	C 1	DK	Lecture	Viva voce, MCQ	SAQ, MCQ, Viva voce	
HOMUG- Path M. 19.2	KS	K	Bone tumors	Discuss morphology of osteosarcoma	C 1	MK	Lecture	Viva voce, MCQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HOMUG- Path M. 19.3	KS	K	Osteo - arthritis	Define Osteo Arthritis	C 1	MK	Lecture	Viva voce, MCQ	MCQ, Viva voce	Practice of medicine
HOMUG- Path M. 19.4	KS	K	Rheumatoid arthritis	Define rheumatoid arthritis	C 1	MK	Lecture	Viva voce, MCQ	MCQ, Viva voce	Practice of medicine
HOMUG- Path M. 19.5	KS	K	Gout	Define Gout	C 1	MK	Lecture	Viva voce, MCQ	MCQ, Viva voce	

5.20. Diseases of endocrine glands-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Asses	sment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 20.1	KS	КН	Thyroid function tests	Interpret the abnormalities in a panel containing thyroid function tests	C 2	MK	Lecture	Viva MC Q	OSPE MCQ, Viva SAQ	
HOMUG- Path M. 20.2	KS	K	Goitre	Define the term "Goitre"	C 1	MK	Lecture	Viva MC Q	SAQ, MCQ, Viva	
HOMUG- Path M. 20.3	KS	K		Describe the etio- pathogenesis of Goitre	C 2	MK	Lecture	Viva MC Q SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine
HOMUG- Path M. 20.4	KS	K		Classify Goitre on the basis of morphology	C 1	MK	Lecture	Viva voce , MC Q SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HOMUG- Path M. 20.5	KS	КН	Goitre	Describe the morphology of Colloid Goitre	C 2	MK	Lecture	Viva voce , MC Q SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG- Path M. 20.6	KS	K		Describe the morphology of Multi-nodular Goitre	C 1	MK	Lecture	Viva MC Q SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Asses	sment	Integration
	Competency				Guilbert		MM	F	S	
HOMUG- Path M. 20.7	KS	K	Cushing syndrome	State the aetiologic types of Cushing syndrome	C 1	DK	Lecture	Viva MC Q	MCQ, Viva	Practice of medicine
HOMUG- Path M. 20.8	KS	K		Describe the clinical features of Cushing syndrome	C 1	DK	Lecture	Viva MC Q SAQ	SAQ MCQ, Viva	
HOMUG- Path M. 20.9	KS	K	Gigantism	Describe the features of Gigantism	C 1	DK	Lecture	Viva MC Q SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 20.10	KS	K	Acromegaly	Describe the features of Acromegaly	C 1	DK	Lecture	Viva MC Q SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 20.11	KS	K	Diabetes Insipidus	Describe the features of Diabetes Insipidus	C 1	DK	Lecture	Viva MC Q SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 20.12	KS	K	differences between Diabetes Mellitus and Diabetes Insipidus	Discuss differences between Diabetes Mellitus and Diabetes Insipidus	C 1	DK	Lecture	Viva MC Q SAQ	SAQ, MCQ, Viva	

5.21. Diseases of the nervous system-

Sl. No.	Domain of	Miller	Content	SLO	Bloom /	Priority	TL	Assessi	ment	Integration
	Competency				Guilbert	•	MM	F	S	
HOMUG- Path M. 21.1	KS	K,	Meningitis	Define the term' Meningitis"	C 1	DK	Lecture	Viva MCQ	MCQ, Viva	
HOMUG- Path M. 21.2	KS	КН		Enumerate the CSF findings in Bacterial meningitis	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 21.3	KS	КН		Enumerate the CSF findings in Tubercular meningitis	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 21.4	KS	КН		Enumerate the CSF findings in Viral meningitis	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ, Viva	
HOMUG- Path M. 21.5	KS	K	CNS tumors	Classify CNS tumours	C 1	NK	Lecture	Viva MCQ	NA	

5.22. Introduction to Microbiology-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL	Assessi	ment	Integration
	Competency				Guilbert	-	MM	F	S	
HomUG-	KS	K	Basic	Define the terms	C1	NK	Lecture	Viva	Viva	
Path M.			definitions	"Microbiology", "Medical				voce	voce	
22.1				Microbiology "Clinical Microbiology".				MCQ	MCQ	
HomUG-	KS	K	Contributions	List the contribution of	C1	NK	Lecture	Viva	NA	
Path M			of important	important scientists to				Voce		
22.2			scientists to	Microbiology						
			Microbiology	50						
HomUG-	KS	K	Koch's	State the Koch's postulate	C1	MK	Lecture	Viva	SAQ	
Path M			postulate					voce	Viva	
22.3								MCQ	voce	
									MCQ	
HomUG-	KS	K	Normal	List the anatomical location	C1	MK	Lecture	MCQ	SAQ	
Path M			Human	of normal bacterial flora in the				Viva	MCQ	
22.4			microbiota	human body				voce	Viva	
									voce	
HomUG-	KS	KH	Role of	Explain the role of human	C2	MK	Lecture	MCQ	SAQ	
Path M.			normal	microbiota in health and				Viva	MCQ	
22.5			human	disease.				voce	Viva	
			microbiota						voce	
HomUG-	KS	KH	Role of	Explain the role of probiotics.	C2	MK	Lecture	MCQ	MCQ	
Path M			probiotics	•				Viva	Viva	
22.6								voce	voce	

5.23. Bacterial structure, growth and nutrition-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessr	nent	Integration
	Competency				Guilbert			F	S	
HomUG -Path M 23.1	KS	K	Morphology of bacteria	Explain the morphological characteristics of bacteria	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG -Path M 23.2	KS	K	Classificatio n of bacteria	Classify bacteria based on shape	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG -Path M 23.3	KS	KH	Bacterial Cell structure	Describe the detailed structure of the bacterial cell envelope	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG -Path M. 23.4	KS	K	Cell wall appendages	Define flagella	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG -Path M. 23.5	KS	КН		Describe the types of flagellar arrangement in a bacterial cell	C2	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG -Path M. 23.6	KS	КН	Bacterial spore	Describe the structure of bacterial spore	C2	DK	Lecture	Viva voce MCQ SAQ	Viva voce MCQ SAQ	
HomUG -Path M. 23.7	KS	КН		Describe the types of bacterial spores based on shape, position of spores	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	

HomUG -Path M. 23.8	KS	КН	Bacterial growth and nutrition	Describe bacterial growth curve	C2	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG -Path M 23.9	KS	КН		Describe the classification of bacteria based on energy requirements	C2	DK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG -Path M. 23.10	KS	КН		Describe the classification of bacteria based on oxygen requirements	C2	DK	Lecture	Viva voce MCQ	SAQViva voce MCQ	
HomUG -Path M. 23.11	KS	KH		Describe the classification of bacteria based on temperature requirements	C2	DK	Lecture	Viva voce MCQ	Viva voce MCQ	

5.24. Sterilization and disinfection-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessm	ent	Integration
	T T							F	S	
HomUG-	KS	K	Definitions	Define 'Sterilization',	C1	MK	Lecture	Viva	SAQ	
Path M				"Disinfection", "Asepsis",				voce	Viva	
24.1				"Decontamination", "Bactericidal				MCQ	voce	
				agents", "Bacteriostatic agents"					MCQ	
HomUG-	KS	K	Methods of	Describe the various methods of	C1	MK	Lecture	SAQ	LAQ	
Path M			sterilization	sterilization				MCQ	SAQ	
24.2								Viva	MCQ	
								voce	Viva	
									voce	
HomUG-	KS	KH	Physical	Describe the various physical	C2	MK	Lecture	SAQ	LAQ	
Path M			methods of	methods of sterilization				MCQ	SAQ	
24.3			sterilization					Viva	MCQ	
								voce	Viva	
									voce	

HomUG- Path M 24.4	KS	КН		Describe the procedure of sterilization using hot air oven	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva	
HomUG- Path M 24.5	KS	KH		Describe the procedure of sterilization using Autoclave	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 24.6	KS	KH		Explain the uses of Pasteurization in the process of sterilization	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 24.7	KS	KH	Chemical methods of sterilization	Discuss on various types of chemical agents of sterilization	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Community medicine
HomUG- Path M 24.8	KS	K		State the characteristics of disinfectant	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Community medicine

5.25. Staining, culture medias and methods-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
	Competency				Guilbert			F	S	
HomUG-	KS	K	Staining	Discuss the various staining	C1	MK	Lecture	MCQ	MCQ	
Path M			methods	methods of bacteria				Viva	Viva	
25.1								voce	Voce	
									SAQ	
HomUG-	KS	KH		Discuss the steps of gram staining	C2	MK	Lecture	MCQ	MCQ	
Path M								Viva	Viva	
25.2								voce	Voce	
									SAQ	
HomUG-	KS	KH	Classification	Classify bacteria based on gram	C1	MK	Lecture	MCQ	SAQ	
Path M			of bacteria	staining property				Viva	MCQ	
25.3								voce	Viva	
									voce	
HomUG-	KS	K	Staining	Discuss differences between gram	C1	MK	Lecture	SAQ	SAQ	
Path M			methods	positive and gram negative				MCQ	MCQ	
25.4				bacteria				Viva	Viva	
								voce	voce	
HomUG-	KS	K	Staining	Discuss the steps of Acid fast	C1	MK	Lecture	SAQ	MCQ	
Path M			methods	staining				MCQ	Viva	
25.5								Viva	Voce	
								voce	SAQ	
HomUG-	KS	K	Culture	Describe types of culture media	C1	MK	Lecture	SAQ	LAQ	
Path M			media	based on consistency with				MCQ	SAQ	
25.6				examples				Viva	MCQ	
								voce	Viva	
					~.			~	voce	
HomUG-	KS	K		Describe culture media based on	C1	MK	Lecture	SAQ	LAQ	
Path M				constituents with examples				MCQ	SAQ	
25.7								Viva	MCQ	
								voce	Viva	
H HC	IZ C	17	_	Describe colleges 1' 1 1	C1	1/17	T	CAO	voce	
HomUG-	KS	K		Describe culture media based on	C1	MK	Lecture	SAQ	LAQ	
Path M				functional requirement with				MCQ	SAQ	
25.8				examples					MCQ	

								Viva	Viva	
								voce	voce	
HomUG-	KS	K		Enumerate various methods used	C1	MK	Lecture	SAQ	SAQ	
Path M				for culturing bacteria.				MCQ	MCQ	
25.9			Culture					Viva	Viva	
			methods					voce	voce	
HomUG-	KS	K		Describe various anaerobic culture	C2	DK	Lecture	Not to	SAQ	
Path M				methods				be	MCQ	
25.10								assessed	Viva	
									voce	

5.26. Infection and disease-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
	Competency				Guilbert	_		F	S	
HomUG-	KS	K	Infection and	Define the terms" infection"	C1	MK	Lecture	Viva	SAQ	
Path M			Disease	pathogen, pathogenesis,				voce	Viva	
26.1				pathogenicity, Virulence",				MCQ	voce	
				infectious disease					MCQ	
HomUG-	KS	KH		Describe the various types of	C2	MK	Lecture	SAQ	LAQ	
Path M				infections				MCQ	SAQ	
26.2									MCQ	
									Viva	
									voce	
HomUG-	KS	KH		Describe the sources of infection	C2	MK	Lecture	SAQ	LAQ	
Path M								MCQ	SAQ	
26.3									MCQ	
									Viva	
									voce	
HomUG-	KS	KH		Describe the methods of	C2	MK	Lecture	SAQ	LAQ	
Path M				transmission of infection				MCQ	SAQ	
26.4									MCQ	
									Viva	
									voce	

HomUG- Path M 26.5	KS	K	Virulence of micro-organisms	State the factors influencing virulence of micro-organisms.	C1	MK	Lecture	Viva voce MCQ	LAQ SAQ Viva voce	
HomUG- Path M 26.6	KS	KH	Exotoxins and Endotoxins	Describe the features of exotoxins	C2	MK	Lecture	SAQ MCQ	MCQ SAQ MCQ Viva voce	
HomUG- Path M 26.7	KS	КН	-	Describe the features of Endotoxins	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 26.8	KS	КН		Differentiate the features of Exotoxins and Endotoxins	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 26.9	KS	K	Classification of infectious diseases	Describe the classification of infectious diseases	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 26.10	KS	K	Nosocomial infection	Define nosocomial infection	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 26.11	KS	K		Discuss some common nosocomial infections.	C1	MK	Lecture	SAQ MCQ	MCQ VIVA	

5.27. Gram positive bacterias-

Sl. No.	Domains of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
	Competency				Guilbert			F	S	
HomUG-	KS	K	Staphylococci	Explain the morphology of	C1	MK	Lecture	Viva	SAQ	
Path M				Staphylococci				voce	Viva voce	
27.1								MCQ	MCQ	
HomUG-	KS	K		List the virulence factors of	C1	MK	Lecture	SAQ	SAQ	
Path M				Staphylococcus aureus				MCQ	MCQ	
27.2								Viva	Viva	
								voce		
HomUG-	KS	KH		Explain the pathogenesis	C2	MK	Lecture	SAQ	LAQ	
Path M				of staphylococcus aureus				MCQ	SAQ	
27.3				infections				Viva	MCQ	
								voce	Viva voce	
HomUG-	KS	KH		Describe the laboratory	C2	DK	Lecture	SAQ	LAQ	Practice of
Path M				diagnosis of staphylococcal				MCQ	SAQ	medicine
27.4				infections				Viva	MCQ	
								voce	Viva voce	
HomUG-	KS	K	Pneumococci	Explain the morphology of	C1	MK	Lecture	Viva	SAQ	
Path M				Pneumococci				voce	MCQ	
27.5								MCQ	Viva voce	
HomUG-	KS	KH		Describe the virulence factors	C2	MK	Lecture	SAQ	SAQ	
Path M				of Pneumococci				MCQ	MCQ	
27.6								Viva	Viva voce	
								voce		
HomUG-	KS	KH		Describe the pathogenesis of	C2	MK	Lecture	SAQ	SAQ	
Path M				Pneumococcus				MCQ	MCQ	
27.7									Viva voce	
HomUG-	KS	KH		Describe the laboratory	C2	MK	Lecture	SAQ	SAQ	
Path M				diagnosis of Pneumococcal				MCQ	MCQ	
27.8				infections					Viva voce	

HomUG- Path M 27.9	KS	K	Streptococci	Explain the morphology of Streptococcus pyogenes	C1	MK	Lecture	Viva voce MCQ SAQ	SAQ MCQ Viva voce	
HomUG- Path M 27.10	KS	КН		Describe the virulence factors of Streptococcus pyogenes	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 27.11	KS	КН		Explain the pathogenicity of Streptococcus pyogenes	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 27.12	KS	КН		Explain the pathogenesis of post streptococcal sequelae caused by streptococcus pyogenes	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 27.13	KS	КН		Describe the laboratory diagnosis of streptococcal infections	C2	DK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ	
HomUG- Path M 27.14	KS	K	Corynebacterium diphtheriae	Explain the morphology of Corynebacterium diphtheriae	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 27.15	KS	КН		Describe the pathogenicity of Corynebacterium diphtheriae	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG- Path M 27.16	KS	K		Describe the laboratory diagnosis of diphtheria	C1	NK	Lecture	NA	NA	Practice of medicine

HomUG- Path M 27.17	KS	K	Bacillus anthracis	Explain the morphology of Bacillus anthracis	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 27.18	KS	КН		Describe the pathogenicity of Bacillus anthracis	C2	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M 27.19	KS	КН		Describe the clinical features of Human anthrax	C2	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 27.20	KS	КН		Describe the laboratory diagnosis of Human anthrax	C2	NK	Lecture	Not to be assessed	NA	
HomUG- Path M 27.21	KS	K	Bacillus cereus	Discuss the clinical manifestations of Bacillus cereus	C1	DK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 27.22	KS	K	Clostridium tetani	Explain the morphology of Clostridium tetani	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 27.23	KS	КН		Describe pathogenesis of Clostridium tetani	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG- Path M 27.24	KS	КН		Explain the Clinical manifestation of tetanus	C2	DK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	Community medicine, Practice of medicine

HomUG- Path M 27.25	KS	K		Describe the Laboratory diagnosis of tetanus	C1	NK	Lecture	NA	NA
HomUG- Path M 27.26	KS	K	Clostridium perfringens	Explain the morphology of Clostrium perfringens	C1	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce
HomUG- Path M 27.27	KS	КН		Describe the clinical manifestation of Clostridium perfringens	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce
HomUG- Path M 27.28	KS	K		Describe laboratory diagnosis of Clostridium perfringens	C1	NK	Lecture	NA	NA
HomUG- Path M 27.29	KS	K	Clostridium botulinum	Explain the morphology of Clostrium botulinum	C1	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce
HomUG- Path M 27.30	KS	КН	_	Describe pathogenicity of Clostridium botulinum	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce
HomUG- Path M 27.31	KS	K		Describe laboratory diagnosis of Clostridium botulinum	C1	NK	Lecture	NA	NA
HomUG- Path M 27.32	KS	КН	Clostridium Difficile	Describe the pathogenicity of Clostridium difficile	C2	NK	Lecture	NA	NA

5.28. Gram negative bacterias-

Sl.No.	Domain of	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
	Competency							F	S	7
Hamilic	KS	K	Neisseria	Explain the morphology of	C1	MK	Lecture	SAQ	SAQ	
HomUG- Path M			gonorrhoeae	Neisseria gonorrhoeae				MCQ	MCQ	
28.1								Viva	Viva	
20.1								voce	voce	
	KS	KH		Describe the pathogenesis of	C2	MK	Lecture	SAQ	LAQ	
HomUG-				Neisseria gonorrhoeae				MCQ	SAQ	
Path M								Viva	MCQ	
28.2								voce	Viva	
									voce	
HomUG- Path M 28.3	KS	K		Describe the laboratory diagnosis of Neisseria gonorrhoeae	C1	NK	Lecture	NA		
	KS	K	Neisseria	Explain the morphology of	C1	MK	Lecture	Viva	SAQ	
HomUG-			meningitidis	Neisseria meningitidis				voce	Viva	
Path M 28.4								MCQ	voce	
28.4									MCQ	
	KS	KH		Describe the clinical spectrum	C2	MK	Lecture	SAQ	SAQ	
				of meningococcal infections				Viva	Viva	
HomUG- Path M								voce	voce	
28.5								MCQ	MCQ	
HomUG- Path M	KS	K		Describe the laboratory diagnosis of Neisseria	C1	NK	Lecture	NA		
28.6				meningitidis						
HomUG-	KS	K	Escherichia coli	Explain the morphology of	C1	MK	Lecture	SAQ	SAQ	
Path M				Escherichia coli				MCQ	MCQ	
28.7								Viva	Viva	
								voce	voce	
HomUG-	KS	KH		Describe the virulence factors	C2	MK	Lecture	SAQ	MCQ	
Path M				of Escherichia coli				MCQ	Viva	
28.8									Voce	

HomUG- Path M 28.9	KS	KH		Describe the pathogenicity of Escherichia coli	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 28.10	KS	KH		Describe the clinical syndromes caused by Escherichia coli	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 28.11	KS	КН		Describe the laboratory diagnosis of Escherichia coli	C2	MK	Lecture	Viva voce MCQ	LAQ SAQ MCQ Viva voce	
HomUG- Path M 28.12	KS	KH	Shigella	Describe the pathogenicity of Shigella	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 28.13	KS	КН		Describe the clinical manifestations of Shigellosis.	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 28.14	KS	K		Describe the laboratory diagnosis of Shigellosis.	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M 28.15	KS	K	Salmonellae	Explain the morphology of Salmonellae	C1	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG- Path M 28.16	KS	КН		Describe the antigenic structure of Salmonellae	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	

HomUG-	KS	KH		State the clinical syndromes	C2	MK	Lecture	Viva	Viva	Community
Path M				caused by Salmonellae in				voce	voce	medicine
28.17				humans				MCQ	MCQ	Practice of
									SAQ	medicine
			_						LAQ	
HomUG-	KS	KH		Describe the pathogenesis and	C2	MK	Lecture	SAQ	LAQ	
Path M				clinical manifestations of				MCQ	SAQ	
28.18			_	Enteric fever					MCQ	
HomUG-	KS	KH		Explain the laboratory	C2	MK	Lecture	SAQ	LAQ	Practice of
Path M				diagnosis of Salmonella				MCQ	SAQ	medicine
28.19				infection					MCQ	
									Viva	
									voce	
HomUG-	KS	K	Klebsiella	Describe the morphology of	C1	MK	Lecture	Viva	Viva	
Path M				Klebsiella pneumonia				voce	voce	
28.20								MCQ	MCQ	
HomUG-	KS	KH		Describe the pathogenicity of	C2	MK	Lecture	SAQ	SAQ	
Path M				Klebsiella pneumoniae				MCQ	MCQ	
28.21									Viva	
									voce	
HomUG-	KS	K		Describe the laboratory	C2	MK	Lecture	SAQ	SAQ	
Path M				diagnosis of Klebsiella				MCQ	MCQ	
28.22				pneumoniae				Viva	Viva	
								voce	voce	
HomUG-	KS	KH	Proteus	Describe the pathogenicity of	C2	NK	Lecture			
Path M				Proteus bacilli						
28.23								Not to be	e assessed	
HomUG-	KS	KH	Yersinia	Describe the pathogenicity of	C2	NK	Lecture			
Path M				Yersinia pestis						
28.24										
HomUG-	KS	K	Vibrio cholera	Explain the morphology of	C1	MK	Lecture	Viva	MCQ	
Path M				Vibrio cholera				voce	Viva	
28.25								MCQ	voce	

HomUG- Path M	KS	KH		Describe pathogenesis and clinical features of cholera	C2	MK	Lecture	SAQ MCQ	LAQ SAQ	Community medicine,
28.26				chinear reatures of cholera				Viva voce	MCQ Viva	Practice of medicine
								voce	voce	medicine
HomUG- Path M 28.27	KS	КН		Describe the laboratory diagnosis of Cholera	C1	DK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 28.28	KS	КН	Pseudomonas	Describe the pathogenicity of pseudomonas aeruginosa	C1	NK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 28.29	KS	K	H.influenzae	State the diseases caused by H.influenzae	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 28.30	KS	K		Describe the laboratory diagnosis of H.influenzae	C1	NK	Lecture		assessed	
HomUG- Path M 28.31	KS	K	Bordetella pertussis	Explain the morphology of Bordetella pertussis	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 28.32	KS	КН		Describe the clinical manifestation of B.pertussis	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	Community medicine Practice of medicine
HomUG- Path M 28.33	KS	K		Describe the laboratory diagnosis of Bordetella Pertussis	C1	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	

HomUG-	KS	K	Brucella	Explain the morphology of	C1	DK	Lecture	Viva	Viva
Path M				Brucellae				voce	voce
28.34								MCQ	MCQ
HomUG-	KS	KH		Describe the pathogenesis of	C2	DK	Lecture	SAQ	MCQ
Path M				Brucellosis.				MCQ	Viva
28.35									voce
HomUG-	KS	K		Describe the laboratory	C1	NK	Lecture		
Path M				diagnosis of Brucellae				NA	NA
28.36									
HomUG-	KS	K	Helicobacter	Describe the morphology of	C1	NK	Lecture	NA	NA
Path M			pylori	Helicobacter pylori					
28.37									
HomUG-	KS	KH		Describe the pathogenicity of	C2	DK	Lecture	SAQ	SAQ
Path M				Helicobacter pylori infection				MCQ	MCQ
28.38								Viva	Viva
								voce	voce
HomUG-	KS	K	<u> </u>	Describe the laboratory	C1	NK	Lecture	NA	
Path M 28.39				diagnosis of Helicobacter pylori infection					NA
HomUG-	KS	K	Rickettsiae	Discuss the human diseases	C1	DK	Lecture	MCQ	MCQ
Path M				caused by Rickettsiae group of				Viva	Viva
28.40				organism				voce	voce
V V V	****	***	CL1 1:) W	•	***	X7.
HomUG-	KS	K	Chlamydia	Describe the diseases caused by	C1	MK	Lecture	Viva	Viva
Path M				chlamydia				voce	voce
28.41								MCQ	MCQ

5.29. Acid fast bacterias-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
	Competency				Guilbert			F	S	
HomUG- Path M. 29.1	KS	K	Mycobacterium tuberculosis	Explain the morphology of Mycobacterium tuberculosis	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 29.2	KS	КН		Explain the pathogenesis of Mycobacterium tuberculosis	C2	DK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Community medicine, Practice of medicine
HomUG- Path M. 29.3	KS	КН		Describe the pathology of Primary tuberculosis	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M. 29.4	KS	КН		Explain pathology of Secondary tuberculosis	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M. 29.5	KS	K		Explain laboratory diagnosis of Mycobacterial tuberculosis	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M. 29.6	KS	K	Mycobacterium leprae	Explain the morphology of Mycobacterium leprae	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 29.7	KS	КН		Discuss the pathology of Leprosy	C2	MK	Lecture	Viva voce MCQ	SAQ Viva voce	

									MCQ LAQ	
HomUG- Path M. 29.8	KS	КН	Differentiate Lepromatous and Tule leprosy	between berculoid	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ LAQ Viva voce	Community medicine, Practice of medicine
HomUG- Path M. 29.9	KS	K	Describe the la diagnosis of Mycob Leprae	aboratory pacterium	C1	DK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M. 29.10	KS	КН	Discuss Lepromin tes	t	C2	DK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	

5.30. Spirochaetes

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessmen	t	Integration
	Competency				Guilbert			F	S	
HomUG-	KS	K	Treponema	Explain the morphology of	C1	MK	Lecture	Viva voce	Viva	
Path M.			pallidum	Treponema pallidum				MCQ	voce	
30.1									MCQ	
HomUG-	KS	KH		Describe the pathogenesis of	C2	MK	Lecture	SAQ	LAQ	
Path M.				Syphilis				MCQViva	SAQ	
30.2								voce	MCQ	
									Viva	
									voce	
HomUG-	KS	KH		Describe the clinical	C2	MK	Lecture	SAQ	LAQ	Practice of
Path M.				manifestations of Syphilis				MCQViva	SAQ	medicine
30.3								voce	MCQ	
									Viva	
									voce	

HomUG- Path M. 30.4	KS	КН		Describe the laboratory diagnosis for syphilis	C2	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ LAQ Viva voce	
HomUG- Path M. 30.5	KS	K	Non venereal treponematoses	State the three distinct forms of non venerealtrepanomatoses	C1	NK	Lecture	Not to be as	l	
HomUG- Path M. 30.6	KS	K	_	Describe the features of Endemic syphilis	C1	NK	Lecture	NA		
HomUG- Path M. 30.7	KS	K		Describe the features of Yaws	C1	NK	Lecture			
HomUG- Path M. 30.8	KS	K	-	Describe the features of Pinta	C1	NK	Lecture	-		
HomUG- Path M. 30.9	KS	K	Borrelia	Mention the types of Borrelia	C1	NK	Lecture	NA	NA	
HomUG- Path M. 30.10	KS	K		State the diseases caused by Borrelia	C1	NK	Lecture	NA		
HomUG- Path M. 30.11	KS	K	Leptospira	Explain the morphology of Leptospira	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 30.12	KS	КН		Describe pathogenicity of Leptospira	C2	MK	Lecture	SAQ MCQViva voce	SAQ MCQ Viva voce	

HomUG-	KS	KH	Describe	the	clinical	C2	MK	Lecture	MCQViva	MCQVi	
Path M.			manifestatio	ons	of				voce	va voce	
30.13			Leptospiros	is							

5.31. Fungi

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessn	nent	Integration
	Competency				Guilbert	•		F	S	
HomUG-	KS	K	Fungi	State the characteristics of	C1	MK	Lecture	SAQ	SAQ	
Path M.				fungi				MCQ	MCQ	
31.1										
HomUG-	KS	K		Classify fungi based on	C1	DK	Lecture	SAQ	SAQ	
Path M.				morphological forms				MCQ	MCQ	
31.2								Viva	Viva voce	
								voce		
HomUG-	KS	K		Classify fungi based on type	C1	MK	Lecture	SAQ	SAQ	
Path M.				of infection				MCQ	MCQ	
31.3										
HomUG-	KS	K		Discuss the laboratory	C1	DK	Lecture	SAQ	SAQ	
Path M.				diagnosis of fungal infections				MCQ	MCQ	
31.4										
HomUG-	KS	K		State examples for	C1	MK	Lecture	Viva	Viva voce	
Path M.				superficial mycoses				voce	MCQ	
31.5								MCQ		
HomUG-	KS	K		State the types of	C1	MK	Lecture	Viva	Viva voce	
Path M.				Subcutaneous mycoses				voce	MCQ	
31.6								MCQ		
HomUG-	KS	K		State four fungi causing	C1	MK	Lecture	Viva	Viva voce	
Path M.				Systemic mycoses				voce	MCQ	
31.7								MCQ		
HomUG-	KS	K		State examples of fungi	C1	DK	Lecture	Viva	Viva voce	
Path M.				causing Opportunistic				voce	MCQ	
31.8				Mycoses				MCQ		

HomUG- Path M. 31.9	KS	КН		Describe the pathogenesis of Candidiasis	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M. 31.10	KS	КН	Homoeopathic concept	Explain the significance of susceptibility in fungal infections	C2	NK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	Organon of medicine

5.32. Parasitology: Introduction to Parasitology, Protozoans

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessn	nent	Integration
	Competenc				Guilbert			F	S	
	y									
HomUG-	KS	K	Introduction to	Define the terms	C1	MK	Lecture	Viva	Viva voce	
Path M			parasitology	"parasite","Host"				voce	MCQ	
32.1								MCQ		
HomUG-	KS	K		State the types of parasites	C1	MK	Lecture	Viva	Viva voce	
Path M				with examples				voce	MCQ	
32.2				-				MCQ		
HomUG-	KS	K		State the types of Host with	C1	MK	Lecture	Viva	Viva voce	
Path M				examples				voce	MCQ	
32.3				•				MCQ		
HomUG-	KS	K		List the three categories of	C1	MK	Lecture	Viva	SAQ	
Path M				host parasite relationship				voce	Viva voce	
32.4								MCQ	MCQ	
HomUG-	KS	K		Define the terms	C1	MK	Lecture	Viva	Viva voce	
Path M				Symbiosis, Commensalism, Pa				voce	MCQ	
32.5				rasitism				MCQ		
HomUG-	KS	K	Protozoa –	Describe the morphology of	C1	MK	Lecture	SAQ	LAQ	
Path M			Intestinal –	Entamoeba histolytica				MCQ	SAQ	
32.6			Entamoeba	_				Viva	MCQ	
			histolytica					voce	Viva voce	

HomUG- Path M 32.7	KS	KH		Describe the life cycle of Entamoeba histolytica	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 32.8	KS	КН		Describe the clinical manifestations of Entamoeba histolytica	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 32.9	KS	КН		Enumerate the differences between Amoebic dysentery and Bacillary dysentery	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 32.10	KS	K		Describe the laboratory diagnosis of amoebiasis	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 32.11	KS	K	Protozoa – Intestinal - Giardia lamblia	Describe the morphology of Giardia lamblia	C1	DK	Lecture	Viva voce MCQ	SAQViva voce MCQ	
HomUG- Path M 32.12	KS	КН		Describe the life cycle of Giardia lamblia	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M 32.13	KS	KH		Describe the pathogenicity and clinical features of Giardia lamblia	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 32.14	KS	K	Protozoa – Urogenital – Trichomonas vaginalis	Describe the morphology of Trichomonas vaginalis	C1	DK	Lecture	Viva voce MCQ	SAQViva voce MCQ	
HomUG- Path M 32.15	KS	КН		Describe the life cycle of Trichomonas vaginalis	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M 32.16	KS	КН		Describe the pathogenesis of Trichomonas vaginalis	C2	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	OBG

HomUG- Path M 32.17	KS	K	Blood and Tissues –	Explain the life cycle of Plasmodium species	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MGO	
HomUG- Path M 32.18	KS	КН	plasmodium - species	Describe the pathogenesis Plasmodium species	C2	MK	Lecture	SAQ MCQ Viva voce	MCQ SAQ MCQ Viva voce	
HomUG- Path M 32.19	KS	КН		Describe the clinical features of malaria.	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	Community medicine
HomUG- Path M 32.20	KS	K		Explain the laboratory diagnosis of malaria	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG- Path M 32.21	KS	K	Blood and Tissues – Toxoplasma gondii	Describe the Mode of transmission of Toxoplasma gondii	C1	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG- Path M 32.22	KS	KH		Describe the Pathogenesis of Toxoplasma gondii	C2	NK	Lecture			
HomUG- Path M 32.23	KS	КН		Describe the Clinical features of human toxoplasmosis	C2	DK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG- Path M 32.24	KS	K		Describe the Lab diagnosis of human toxoplasmosis	C1	NK	Lecture		e assessed	
HomUG- Path M 32.25	KS	K	Blood and Tissues –	Describe the Trypanosoma brucei	C1	NK	Lecture	SAQ MCQ	MCQ	

HomUG- Path M 32.26	KS	КН	Trypanosoma brucei	Describe the Life cycle of Trypanosoma brucei	C2	DK	Lecture	SAQ MCQ	MCQ	
HomUG- Path M 32.27	KS	КН		Describe the Pathogenecity of Trypanosoma brucei	C2	DK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG- Path M 32.28	KS	КН		Describe the Clinical features of trypanosomiasis	C2	DK	Lecture	SAQ MCQ Viva voce	SAQMCQ Viva voce	
HomUG- Path M 32.29	KS	K		Describe the Lab diagnosis of trypanosomiasis	C1	NK	Lecture	Not to b	e assessed	
HomUG- Path M 32.30	KS	K	Blood and Tissues – Trypanosoma	Describe the morphology of Trypanosoma Cruzi	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M 32.31	KS	K	Cruzi	Describe the Life cycle of Trypanosoma Cruzi	C1	MK	Lecture	SAQ MCQ	SAQ MCQ LAQ	
HomUG- Path M 32.32	KS	КН		Describe the Pathogenicity of Trypanosoma Cruzi	C2	MK	Lecture	SAQ MCQ	SAQ MCQ LAQ	
HomUG- Path M 32.33	KS	КН		Describe the Clinical features of Chagas disease	C2	MK	Lecture	SAQ MCQ	SAQ MCQ LAQ Viva voce	Community medicine
HomUG- Path M 32.34	KS	K		Describe the Lab diagnosis of Chagas disease	C1	СК	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	

HomUG-	KS	K	Blood a	nd Describe the morphology of	C1	MK	Lecture	Viva	Viva voce	
Path M			Tissues	 Leishmania donovani 				voce	MCQ	
32.35			Leishmania					MCQ		
HomUG-	KS	KH	species	Describe the Life cycle of	C2	MK	Lecture	SAQ	LAQ	
Path M				Leishmania donovani				MCQ	SAQ	
32.36									MCQ	
									Viva voce	
HomUG-	KS	KH		Describe the pathogenicity of	C2	MK	Lecture	SAQ	LAQ	
Path M				Leishmania donovani				MCQ	SAQ	
32.37									MCQ	
									Viva voce	
HomUG-	KS	KH		Describe the clinical features	C2	MK	Lecture	SAQ	LAQ	
Path M				of Leishmaniasis				MCQ	SAQ	
32.38									MCQ	
									Viva voce	
HomUG-	KS	K		Describe the Laboratory	C1	DK	Lecture	SAQ	LAQ	
Path M				diagnosis of Leishmaniasis.				MCQ	SAQ	
32.39									MCQ	
									Viva voce	

5.33. Helminths-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL	Assessmen	t	Integration
	Competency				Guilbert		MM	F	S	
HomUG- Path M 33.1	KS	K	Helminths – Cestodes – Echinococcus granulosus	Describe the morphology of Echinococcus	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 33.2	KS	КН		granulosis Describe the life cycle of Echinococcus granulosis	C2	MK	Lecture	SAQ MCQ	Viva LAQ SAQ MCQ Viva	
HomUG- Path M 33.3	KS	КН		Describe the pathogenesis of Echinococcus granulosis	C2	MK	Lecture	MCQ	LAQ SAQ MCQ Viva	
HomUG- Path M 33.4	KS	КН		Describe the clinical features of hydatid disease	C2	MK	Lecture	MCQ	LAQ SAQ MCQ Viva	
HomUG- Path M 33.5	KS	K		Describe Laboratory diagnosis of hydatid disease	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG- Path M 33.6	KS	K	Helminths – Cestodes – Taenia saginata and Taenia solium	Describe the morphological difference between T.saginata and T.solium	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva	
HomUG- Path M 33.7	KS	КН		Describe the life cycle of Taenia saginata	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG- Path M 33.8	KS	КН		Describe the life cycle of Taenia solium	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	

HomUG-	KS	KH		Describe the	C2	MK	Lecture	SAQ	LAQ	Community
Path M				pathogenicity and				MCQ	SAQ	medicine
33.9				clinical features of				Viva voce	MCQ	
				taeniasis					Viva voce	
HomUG-	KS	K		Describe the lab	C1	DK	Lecture	SAQ	LAQ	
Path M				diagnosis of taeniasis.				MCQ	SAQ	
33.10								Viva voce	MCQ	
									Viva	
HomUG-	KS	K	Helminths – Trematodes	Describe the	C1	DK	Lecture	Viva voce	Viva voce	
Path M			_	morphology of				MCQ	MCQ	
33.11			Paragonimuswestermani	Paragonimuswestermani						
HomUG-	KS	K		Describe the life cycle of	C1	DK	Lecture	SAQ	MCQ	
Path M				Paragonimuswestermani				MCQ		
33.12										
HomUG-	KS	KH		Describe the	C2	DK	Lecture	SAQ	MCQ	
Path M				pathogenicity and				MCQ	Viva voce	
33.13				clinical features of				Viva voce		
				Paragonimuswestermani						
HomUG-	KS	K		Describe the lab	C1	NK	Lecture	Not to be as	ssessed	
Path M				diagnosis of						
33.14				paragonimiasis						
HomUG-	KS	K	Helminths – Trematodes	Describe the	C1	MK	Lecture	SAQ	SAQ	
Path M			Schistosoma	morphology of				MCQ	MCQ	
33.15			haematobium	Schistosoma				Viva voce	Viva voce	
				haematobium						
HomUG-	KS	KH	1	Describe the life cycle of	C2	MK	Lecture	SAQ	SAQ	
Path M				Schistosoma				MCQ	MCQ	
33.16				haematobium					Viva voce	
HomUG-	KS	KH	1	Describe the	C2	MK	Lecture	SAQ	SAQ	
Path M				pathogenicity and				MCQ	MCQ	
33.17				clinical features of					Viva voce	
				Bilharziasis						
HomUG-	KS	K	1	Describe the lab	C1	DK	Lecture	SAQ	SAQ	
Path M				diagnosis of Bilharziasis				MCQ	MCQ	
33.18									Viva voce	

HomUG- Path M 33.19	KS	K	Helminths – Trematodes – F.hepatica	Describe the morphology of Fasciola hepatica	C1	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG- Path M 33.20	KS	K		Describe the life cycle of Fasciola hepatica	C1	NK	Lecture	NA	NA	
HomUG- Path M 33.21	KS	KH		Describe the pathogenicity of Fascioliasis	C2	DK	Lecture	MCQ Viva voce	MCQ Viva voce	
HomUG- Path M 33.22	KS	K	Helminths – Nematodes – Ankylostoma duodenale	Describe the morphology of Ancylostoma duodenale	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 33.23	KS	КН		Describe the life cycle of Ancylostoma duodenale	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG- Path M 33.24	KS	КН		Describe the pathogenicity and clinical features of hook worm infection.	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Community medicine
HomUG- Path M 33.25	KS	K		Describe the laboratory diagnosis of hook worm infection.	C1	DK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 33.26	KS	K	Helminth – Nematodes – Ascaris lumbricoides	Describe the morphology of Ascaris lumbricoides	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 33.27	KS	КН		Describe the life cycle of Ascaris lumbricoides	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	

HomUG- Path M 33.28	KS	КН		Describe the pathogenicity and clinical features of Ascariasis	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.29	KS	K		Describe laboratory diagnosis of Ascariasis	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.30	KS	K	Helminths – Nematodes – Enterobius vermicularis	Describe the morphology of Enterobius vermicularis	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.31	KS	КН		Describe the life cycle of Enterobius vermicularis	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.32	KS	K		Describe the pathogenicity and clinical features of Enterobiasis	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.33	KS	K		Describe the laboratory diagnosis of Enterobiasis	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.34	KS	K	Helminths – Nematodes – Strongyloidesstercoralis	Describe the morphology of Strongyloidesstercoralis	C1	NK	Lecture	NA	NA
HomUG- Path M 33.35	KS	КН		Describe the life cycle of Strongyloidesstercoralis	C1	NK	Lecture	NA	NA
HomUG- Path M 33.36	KS	КН		List the diseases caused by S.stercoralis	C2	NK	Lecture	NA	NA

HomUG- Path M 33.37	KS	K	Helminths – Nematodes –Trichuristrichiura	Describe the morphology of Trichuris trichiura	C1	DK	Lecture	Viva voce MCQ	Viva voce MCQ
HomUG- Path M 33.38	KS	KH		Describe life cycle of Trichuris trichiura	C2	DK	Lecture	SAQ MCQ	MCQ
HomUG- Path M 33.39	KS	КН		Describe the pathogenicity and clinical manifestation of Trichuritrichiura	C2	DK	Lecture	SAQ MCQ	MCQ
HomUG- Path M 33.40	KS	K		Describe the lab diagnosis of trichuriasis	C1	NK	Lecture	Not to be as	ssessed
HomUG- Path M 33.41	KS	K	Helminths – Filarial Nematodes – Wuchereriabancrofti	Describe the morphology of Wuchereriabancrofti	C1	MK	Lecture	SAQ MCQViva voce	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.42	KS	КН		Describe the life cycle of Wuchereriabancrofti	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce
HomUG- Path M 33.43	KS	КН		Describe pathogenesis of Wucheririabancrofti	C2	MK	Lecture	SAQ MCQViva voce	LAQ
HomUG- Path M 33.44	KS	K		Describe the lab diagnosis of Wuchereriasis	C1	MK	Lecture	SAQ MCQViva voce	LAQ SAQ MCQViva voce
HomUG- Path M 33.45	KS	КН	Helminths – Filarial Nematodes – Brugiamalayi	Describe pathogenesis of Brugiamalayi	C2	NK	Lecture	Viva voce MCQ	Viva voce MCQ

HomUG- Path M 33.46	KS	КН	Loa Loa	Describe pathogenesis of Loa Loa	C2	NK	Lecture	NA	NA	
HomUG- Path M 33.47	KS	КН	Onchocerca volvulus	Describe pathogenesis of Onchocerca volvulus	C2	NK	Lecture	NA	NA	
HomUG- Path M 33.48	KS	КН	Dracunculus medinensis	Describe pathogenesis of Dracunculus medinensis	C2	NK	Lecture	NA	NA	
HomUG- Path M 33.49	KS	КН	Homoeopathic concepts	Explain the Homoeopathic concepts in parasitic infections	C2	DK	Lecture	SAQ MCQ	SAQ MCQ	Organon of medicine
HomUG- Path M 33.50	KS	KH		Explain the application of Homoeopathic concepts in management of parasitic infections	C2	DK	Lecture	SAQ MCQ	SAQ MCQ	Organon of medicine

5.34. Virology: Introduction-

Sl.No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessme	ent	Integration
	Competency				Guilbert			F	S	İ
HomUG- Path M 34.1	KS	K	Virology – Introduction - Structure	Describe the morphology of virus	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 34.2	KS	K	Virology – Introduction – Viral replication	Discuss the steps of viral replication	C1	DK	Lecture	Viva voce MCQ	SAQ Viva voce MCQ	
HomUG- Path M 34.3	KS	K	Virology – Introduction – Viral inclusion bodies	Describe the viral inclusion bodies with examples	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 34.4	KS	K	Pathogenesis of viral infections	Describe the pathogenesis of viral infections	Cl	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 34.5	KS	K	Virology – Introduction – Lab diagnosis of Viral infections	Discuss about cultivation of viruses	Cl	NK	Lecture	Not to be assessed	Not to be assessed	

HomUG- Path M 34.6	KS	K	Virology – Introduction - Classification	Describe the classification of viruses based on type of nucleic acid	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG- Path M 34.7	KS	K	Virus host interactions and its Significance in Homoeopathy	State the various virus host interactions	C1	MK	Lecture	SAQ MCQ	MCQ Viva	
HomUG- Path M 34.8	KS	K	Bacteriophages	Explain the morphology of bacteriophage	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG- Path M 34.9	KS	K		Explain the significance of bacteriophages in medical microbiology	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	

5.35. DNA viruses-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessme	ent	Integration
	Competency				Guilbert			F	S	
HomUG-	KS	K	DNA virus – Pox virus-	State the pox virus	C1	MK	Lecture	Viva	Viva voce	
Path M				which infect humans				voce	MCQ	
35.1								MCQ		
HomUG-	KS	K		Describe the clinical	C1	MK	Lecture	SAQ	SAQ	
Path M				features of Molluscum				MCQ	MCQ	
35.2				contagiosum						
HomUG-	KS	K	DNA virus – Papova	Discuss the diseases	C1	MK	Lecture	SAQ	SAQ	
Path M			virus-Human	caused by Human				MCQ	MCQ	
35.3			papillomavirus	Papilloma virus						

HomUG- Path M 35.4	KS	KH	DNA virus –Herpes virus- Herpes simplex virus	Explain the pathogenesis of Herpes simplex virus	C2	MK	Lecture	SAQ MCQ	MCQ
HomUG- Path M 35.5	KS	K		Describe the clinical features of Herpes simplex virus infection	C1	MK	Lecture	SAQ MCQ	SAQ MCQ
HomUG- Path M 35.6	KS	K		Describe the laboratory diagnosis of Herpes virus infection	C1	MK	Lecture	SAQ MCQ	MCQ
HomUG- Path M 35.7	KS	K	DNA virus –Herpes virus- Varicella-zoster	Describe the pathogenesis of Varicella zoster	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ
HomUG- Path M 35.8	KS	KH		Describe the clinical manifestation and complications of Chicken pox	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ
HomUG- Path M 35.9	KS	КН		Describe the pathogenesis of Herpes zosteror shingles	C2	MK	Lecture	SAQ MCQ	SAQ MCQ
HomUG- Path M 35.10	KS	K		Explain the laboratory diagnosis of Varicella-zoster infection	C1	MK	Lecture	SAQ MCQ	SAQ MCQ
HomUG- Path M 35.11	KS	K	DNA virus –Herpes virus- Cytomegaloviruses	Explain the morphology of Cytomegalovirus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ
HomUG- Path M 35.12	KS	K		Describe the clinical features of Cytomegalovirus disease	C1	DK	Lecture	SAQ MCQ	SAQ MCQ Viva voce
HomUG- Path M 35.13	KS	K		Explain the laboratory diagnosis of Cytomegalovirus disease	C1	DK	Lecture	SAQ MCQ	MCQ Viva voce
HomUG- Path M 35.14	KS	K	DNA virus –Herpes virus-Human herpes virus	List the two variants of Human Herpes Virus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ

HomUG- Path M 35.15	KS	K		Explain the clinical features of Human Herpes virus	C1	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 35.16	KS	K	DNA virus –Herpes virus-Epstein –Barr virus	List the clinical conditions caused by Epstein-Barr virus	C1	MK	Lecture	Viva voce MCQ	SAQ MCQ Viva voce	
HomUG- Path M 35.17	KS	K		Describe the pathogenesis of Epstein –Barr virus infection	C1	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 35.18	KS	K		Describe the laboratory diagnosis of Epstein- Barr virus infection	C1	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 35.19	KS	КН	DNA virus – Adenoviruses	Describe the pathogenicity and clinical manifestations of Adenoviruses	C2	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 35.20	KS	K		Explain the laboratory diagnosis of Adenovirus disease	C1	DK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 35.21	KS	K	DNA virus –Hepadna virus – Hepatitis B virus	Explain the morphology of Hepatitis B virus	C1	MK	Lecture	SAQ MCQ	SAQ MCQ LAQ	
HomUG- Path M 35.22	KS	K		Describe the mode of transmission of Hepatitis B virus infection	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 35.23	KS	K		Describe the pathogenesis of hepatitis B virus infection	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	

HomUG- Path M 35.24	KS	K	Describe the clinical features of hepatitis B virus infection	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	Community medicine, Practice of medicine
HomUG- Path M 35.25	KS	K	Explain the laboratory diagnosis of Hepatitis B virus infection	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	

5.36. RNA viruses-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
	Competency				Guilbert			F	S	
HomUG- Path M 36.1	KS	K	RNA virus – Orthomyxovirus- Influenza virus	Describe the morphology of Influenza virus	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 36.2	KS	КН		Describe the pathogenesis of Influenza virus	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 36.3	KS	K		Describe the clinical features of Influenza virus infection	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	Community medicine, Practice of medicine
HomUG- Path M 36.4	KS	K		Explain the laboratory diagnosis of Influenza virus infection	C1	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M 36.5	KS	K	RNA virus – Paramyxovirus-Mumps	Explain the morphology of Mumps virus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 36.6	KS	K		Describe the clinical features of mumps	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	Community medicine, Practice of medicine

HomUG- Path M 36.7	KS	K		Explain the complications of Mumps	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 36.8	KS	K		Describe the laboratory diagnosis of Mumps virus infection	C1	NK	Lecture	Not to b	e assessed	
HomUG- Path M 36.9	KS	K	RNA virus – Paramyxovirus-Measles	Explain the morphology of Measles virus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 36.10	KS	КН		Explain the pathogenesis of Measles	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 36.11	KS	K		Describe the clinical features and complications of Measles	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	Community medicine, Practice of medicine
HomUG- Path M 36.12	KS	K		Describe the laboratory diagnosis of Measles virus	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M 36.13	KS	K	RNA virus – Paramyxovirus-Rubella virus	Explain the morphology of Rubella virus	`C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M 36.14	KS	K		Describe the clinical features of Rubella virus infection	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 36.15				Describe the features of congenital Rubella syndrome	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 36.16	KS	K		Explain the laboratory diagnosis of Rubella	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M 36.17	KS	K	RNA virus – Paramyxovirus-RSV	Describe the morphology of Respiratory syncytial virus	C1	NK	Lecture	Not to b	e assessed	

HomUG-	KS	KH		Describe the clinical	C2	DK	Lecture	SAQ	MCQ	
Path M 36.18				features of Respiratory syncytial virus infection				MCQ	Viva voce	
HomUG-	KS	K	RNA virua – Corona	Explain the morphology	C1	MK	Lecture	Viva	Viva voce	
Path M			virus	of Coronavirus				voce	MCQ	
36.19								MCQ		
HomUG-	KS	K		State the types of corona	C1	MK	Lecture	Viva	LAQ	
Path M				virus infecting humans				voce	SAQ	
36.20								MCQ	Viva voce	
									MCQ	
HomUG-	KS	K		Describe the clinical	C1	MK	Lecture	SAQ	LAQ	
Path M				features of Corona virus				MCQ	SAQ	
36.21				disease					MCQ	
** ***	****	**	_				-	g + 0	Viva voce	
HomUG-	KS	K		Explain the laboratory	C1	MK	Lecture	SAQ	LAQ	
Path M 36.22				diagnosis of Corona virus disease				MCQ	SAQ	
HomUG-	KS	K	RNA virus –	Explain the morphology	C1	MK	Lecture	Viva	MCQ Viva voce	
Path M	KΩ	K	Rhabdovirus – Rabies	of Rabies virus	CI	IVIK	Lecture	voce	MCQ	
36.23			virus – Rabies	of Rables virus				MCQ	MCQ	
HomUG-	KS	K	VII US	Describe the mode of	C1	MK	Lecture	SAQ	SAQ	
Path M	110	11		transmission of Rabies	01	1,111	Lecture	MCQ	MCQ	
36.24									Viva voce	
HomUG-	KS	K	-	Describe the	C1	MK	Lecture	SAQ	SAQ	
Path M.				pathogenicity of Rabies				MCQ	MCQ	
36.25									MCQ	
									Viva voce	
HomUG-	KS	K		Describe the clinical	C1	MK	Lecture	SAQ	SAQ	Community
Path M.				stages of Rabies				MCQ	MCQ Viva	medicine
36.26									voce	
HomUG-	KS	K		Explain the laboratory	C1	MK	Lecture	SAQ	SAQ	
Path M.				diagnosis of human				MCQ	MCQ	
36.27				rabies					Viva voce	

HomUG- Path M 36.28	KS	K	RNA virus –Picorna virus-Polio virus	Explain the morphology of Polio virus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 36.29	KS	K		Describe the pathogenesis of Polio virus infection	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M. 36.30	KS	K		Describe the clinical features of polio	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	Community medicine
HomUG- Path M 36.31	KS	K		Describe the laboratory diagnosis polio	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M. 36.32	KS	K	RNA virus –Arboviruses –	Describe the general features of Arboviruses	C1	NK	Lecture	NA	NA	
HomUG- Path M. 36.33	KS	K		Describe the types of Dengue	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M. 36.34	KS	K		Describe the pathogenesis and clinical classification of Dengue	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	Community medicine, Practice of medicine
HomUG- Path M 36.35	KS	K		Explain the laboratory diagnosis of Dengue	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M. 36.36	KS	K	RNA virus –Arbo virus – Chikungunya virus	Describe the clinical features of Chikungunya	C1	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M. 36.37	KS	K		Explain the laboratory diagnosis of Chikungunya	C1	MK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M. 36.38	KS	K	RNA virus –Arbo virus – Yellow fever	Describe the clinical features of Yellow fever	C1	NK	Lecture	Not to b	e assessed	

HomUG- Path M .36.39	KS	K	RNA viruses – Arbo virus – Japanese encephalitis -	Describe the clinical features of Japanese encephalitis	C1	DK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG- Path M. 36.40	KS	K	RNA viruses – Retro virus – HIV	Explain the morphology of Human immunodeficiency virus	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M. 36.41	KS	K		State the major antigens of HIV	C1	MK	Lecture	Viva voce MCQ	LAQ SAQ Viva voce MCQ	
HomUG- Path M. 36.42	KS	K		Describe the pathogenesis of HIV infection	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG- Path M. 36.43	KS	K		Describe the clinical features of HIV infection	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	Practice of medicine
HomUG- Path M. 36.44	KS	КН		Describe confirmatory tests for diagnosis of HIV and AIDS	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	Practice of medicine
HomUG- Path M. 36.45	KS	K	RNA viruses – Hepatitis virus – HAV	Describe the morphology of Hepatitis A virus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 36.46	KS	K		Describe the pathogenesis of type A Hepatitis	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M. 36.47	KS	K		Describe the clinical features of type A hepatitis	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	

HomUG- Path M. 36.48	KS	K		Describe the laboratory diagnosis of type A hepatitis	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG- Path M. 36.49	KS	K	RNA viruses – Hepatitis virus –C,D,E	Discuss the comparative features of the viral hepatitis type C,D and E viruses	C1	DK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 36.50	KS	K	Emerging/re-emerging infections	Describe the factors contributing to emerging and re-emerging infectious diseases	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG- Path M. 36.51	KS	K		State the emerging infections in India	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	

5.37. Homoeopathic correlation with microbiology-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessme	ent	Integration
	Competency				Guilbert			F	S	
HomUG- Path M 37.1	KS	K	Homoeopathic correlation	Discuss the correlation of study of microbiology and parasitologywith homoeopathic philosophy	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	Organon of medicine
HomUG- Path M 37.2	KS	K		Discuss Homoeopathic prophylaxis	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	Organon of medicine
HomUG- Path M 37.3	KS	K		Discuss genus epidemics	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	Organon of medicine
HomUG- Path M 37.4	KS	K		Discuss the correlation of study of microbiology and parasitology with	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	Materia medica

			homoeopathic materiamedica						
HomUG- Path M 37.5	KS	K	Discuss the correlation of study of microbiology and parasitologywith Repertory	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG- Path M 37.6	KS	K	Discuss the significance of study of microbiology and parasitologyfor homoeopathic physician	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	Organon of medicine

5.38. Practicals and demonstration-

Sl. No.	Content	Competency/ Outcome	Entry behaviour	Specific Learning Objectives	Learner activity	Assessment
HomU G-Path M38.1	Blood grouping-A B O Grouping – Slide technique	Learner should be able to perform the blood grouping test of the blood sample	ABO blood group system RH blood group system	1.Perform estimation of blood group and Rh system using slide method 2.Interpret the results of experiment to determine the blood group and Rh grouping of blood sample.	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.2	Estimation of Haemoglobin	Learner should be able to perform the estimation of Haemoglobin with accuracy and interpret the results	Normal Haemoglobin content in children, adult males, Adult females	1. Perform estimation of Haemoglobin using Sahli's haemoglobinometer 2. Interpret of Haemoglobin concentration of the blood sample	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.3	Red Blood Cell Count	Learner should be able to perform the RBC count with accuracy and interpret the results	Normal values of RBC count in children, Adult males, Adult females	1. Perform the counting of RBC using haemocytometer 2. Calculate total RBC count of blood sample.	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record practical record	Viva voce OSPE Checklist

HomU G-Path M38.4	Total White blood cell count	Learner should be able to do the WBC count with accuracy and interpret the results	Normal values of WBC count in children,Adultmales,A dult females	 Perform the counting of WBC using haemocytometer Calculate total WBC count of blood sample. 	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.5	Differential count and morphology	Learner should be able to perform the Differential count with accuracy and interpret the results	Normal values in percentage of each type of white blood cell. Morphology of various WBC	 Examine the blood smear for counting of differential leucocyte count. Calculate the differential leukocyte count of blood sample. 	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.6	Erythrocyte sedimentation rate [Demonstration]	Learner should be able to explain the significance of ESR and interpret the results	Stages of sedimentation of RBCs Normal values of ESR	 Observe the experiment using Westergren method. Interpret the value of ESR of blood sample 	1.Observe the procedure 2.Make entries into the pathology practical record	NA
HomU G-Path M38.7	Erythrocyte sedimentation rate [Demonstration]	Learner should be able to describe the significance of ESR and interpret the results	Stages of sedimentation of RBCs Normal values of ESR	 Observe the experiment using Wintrobe method. Interpret the value of ESR of blood sample 	1.Observe the procedure 2.Make entries into the pathology practical record	NA
HomU G-Path M38.8	Bleeding time – Duke's method	Learner should be able to perform with accuracy and reliability the bleeding time of the given sample of blood	Normal value of Bleeding time	 Perform the experiment using Duke's method Calculate the bleeding time of blood sample. 	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record practical record	Viva voce OSPE Checklist

HomU G-Path M38.9	Clotting time-fingertip method	Learner should be able to perform with accuracy and reliability the clotting time of the given sample of blood	Factors involved in blood clotting Sequence in clotting mechanism Normal value of clotting time	 Perform the experiment using fingertip method Calculate the clotting time of blood sample. 	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.10	Staining of thick and thin films [Demonstration]	Learner should be able to explain the procedure of staining of thin film,	Principle and technique of preparation of Staining of thick films	Observe the procedure of staining of thin blood film	1.Observe the procedure as per the methodology 2.Make entries into the pathology practical record	NA
HomU G-Path M38.11	Staining of thick and thick films [Demonstration]	Learner should be able to explain the procedure of staining of thick film,	Principle and technique of preparation of Staining of thin films	Observe the procedure of staining of thick blood film	1.Observe the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.12	Platelet count [Demonstration]	Learner should be able to describe the significance of platelet count and interpret the results	Normal value of Platelet count Principle and technique of counting of Platelet	 Observe the experiment of counting of Platelet of blood sample Calculate platelet count of blood sample 	1.Observe the procedure as per the methodology 2.Make entries into the pathology practical record	NA
HomU G-Path M38.13	Urine examination: Physical examination	Learner should be able to perform physical examination of urine with logical interpretation of results	Principle and technique of Physical examination of urine Clinical significance of physical examination of urine	 Perform the physical examination of urine sample Interpret the results 	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist

HomU G-Path M38.14	Urine examination: Chemical examination	Learner should be able to perform chemical examination of given sample of urine with logical interpretation of results	Principle and technique of Chemical examination of urine Clinical significance of chemical examination of urine	1. Perform the chemical examination of urine for presence of glucose, proteins, ketones, bile derivatives and blood 2. Interpret the results	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.15	Urine examination: Microscopic examination	Learner should be able to do microscopic examination of urine and interpret the results	Principle and technique of microscopical examination of urine Clinical significance of microscopical examination of urine	Perform the microscopical examination of urine sample Interpret the results	1.Perform the procedure as per the methodology 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38.16	Examination of Faeces:Physical [Demonstartion]	Learner should be able to describe the procedure of physical examination of feaces	Principle and technique of physical examination of faeces Clinical significance of physical examination of faeces	 Observe the procedure of physical examination of faeces Interpret the results of Physical Examination of Faeces 	1.Observe the procedure 2.Make entries into pathology practical record	NA
HomU G-Path M38.17	Examination of Faeces:Microscopi c for ova and protozoa [Demonstration]	Learner should be able to describe the procedure of microscopical examination of faeces and interpret the results	Principle and technique of microscopic examination of faeces Clinical significance of microscopic examination of faeces	 Observe the procedure of microscopical examination of faeces for ova and protozoa Interpret the results of microscopical Examination of Faeces 	1.Observe the procedure 2.Make entries into pathology practical record	NA

HomU G-Path M38.18	Examination of Faeces:Chemical (occult blood) [Demonstration]	Learner should be able to describe the procedure of chemical examination of faeces and interpret the results	Principle and technique of chemical examination of faeces Clinical significance of chemical examination of faeces	 Observe the procedure of chemical examination of faeces Interpret the results of chemical Examination of Faeces 	1.Observe the procedure 2.Make entries into pathology practical record	NA
HomU G-Path M38.19	Semen analysis [Demonstration]	Learner should be able to list the physical characteristics and microscopic features of semen	Principle and technique of Semen analysis Clinical significance of semen analysis	 Observe the procedure of examination of semen Interpret the results of the test 	1.Observe the procedure 2.Make entries into pathology practical record	Not to be assessed
HomU G-Path M38.20	Microbiology: Use of microscope	Learner should be familiar with the different parts of microscope and their uses	Parts of compound microscope	 Identify the different parts of microscope Learn the function of each part 	1.Will use and familiarise with the parts of microscope 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38. 21	Microbiology: Demonstration of Methods of sterilisation: Using Hot air oven, Autoclave,	Learner should be able to explain the methods of sterilization using Hot air oven, Autoclave,	Agents of sterilization Principles of dry heat and moist heat in process of sterilization	 Observe the method of sterilization using hot air oven Observe the method of sterilization using autoclave Observe the method of sterilization using flaming 	1.Observe the procedure 2.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38. 22	Microbiology: Motility preparation [Demonstration]	Learner should be able to explain the procedure of motility preparation	Principle and technique of Motility preparation	 Observe the procedure of Motility preparation Interpret the results 	1.Observe the procedure 2.Make entries into and pathology practical record	Not to be assessed

HomU G-Path M38. 23	Microbiology: Gram staining	Learner should be able to stain the given smear by gram stain and examine under microscope and interpret the results	Principle and technique of Gram staining	 Perform gram staining on the given sample Observe under the microscope Interpret the results. 	1.Perform the procedure 2.Make entries into pathology practical record	Viva voce OSPE Checklist
HomU G-Path M38. 24	Microbiology: Acid fast staining [Demonstration]	Learner should be able to list the steps in Acid fast staining	Principle and technique of Acid fast staining	 To observe the procedure of Acid fast staining To observe the slide for presence of acid fast bacteria 	1.Observe the procedure 2.Make entries into the pathology practical record	Not to be assessed
HomU G-Path M38. 25	Common culture medias: Preparation of common culture media [Demonstration]	Learner should be able to list the ingredients of culture medias	Principle and technique of culture media preparation	Observe the steps of preparation of common culture media	1.Observe the procedure 2.Make entries into the pathology practical record	Not to be assessed
Spotters						
HomU G-Path M38. 26	Commonly used instruments / Equipments in pathology laboratory: 1.Haemoglob: 2.RBC pipette 3.WBC pipette 4.Neubauer's chamber 5.ESR tubes:Wintrobe Westergren 6.Urinometer	Awareness of application and method of use of instruments, equipments in laboratory	Enumerate the commonly used instruments equipments in laboratory and its use	Identify the instrument / Equipment Enumerate the purpose/ use/utility of the instrument / Equipment	1.Identify,describe the parts and list the uses of the instrument / Equipment 2.Make entries into the pathology practical record	OSPE Checklist

HomU G-Path M38. 27	7.Hot air oven 8.Autoclave 9.Incubator 10.Petri dish 11.Centrifuge 12.Waterbath 13.Inoculating loop etc. Interpretation of laboratory reports and its clinico pathological correlation Complete Haemogram Urine reports Liver function tests Renal function tests Renal function tests Thyroid function tests Lipid profile Diabetic profile Serum cardiac biomarkers Enzyme markers for necrosis Serological tests, etc.	Learner should be able to interpret the values in the given laboratory reports	Significance of interpretation of laboratory tests for diagnosis	 Identify whether laboratory report is normal or abnormal in relation to physiological values Identify the probable reason for abnormal values in laboratory report and its clinical significance 	The tady the tadefacery	Viva voce OSPE Checklist
HomU G-Path M38. 28	Exposure to latest equipment:Auto-analyzer, Cell counter, ELISA reader etc. [Demonstration]	Learner should be able to explain the utility of latest equipment	De novo topic	 Identify the equipment Observe the functioning of the Equipment	1.Observe the procedure 2.Make entries into the pathology practical record	Not to be assessed

HomU G-Path M38. 29	Histopathology: (a)Demonstration of common slides Any 15	Learner should be able to do identify the slide and mention its distinguishing features	Histopathological changes of particular condition.	Observe the histopathology slide Identify the distinguishing features of the given histopathology slide	1.Identify the histopathology slide based on identification points. 2.Make entries into the pathology practical record	OSPE Checklist
HomU G-Path M38. 30	(b)Demonstration of gross pathological specimens / models Any 15	Learner should be able to identify the gross specimen	Gross pathological changes in specimen as per General pathology and Systemic pathology topics	Identify the specimen List three characteristic identification features of the specimen	1.Identify the gross pathological specimen based on identification points. 2.Make entries into the pathology practical record	OSPE Checklist

6. Teaching learning methods

Lectures (Theory)	Non-lectures (Practical/Demonstrative)
Lectures	Clinical demonstration
Group discussion	Practicals /Experiential learning
Integrated lectures	Problem based discussion
	Case based learning
	Tutorials/Seminars/Symposium
	Assignments
	Library reference
	Self-learning

Details of assessment

6.1 Overall Scheme of Assessment (Summative)

S	r. No	Professi	onal Course	Term I (1-6 Mo	nths)	Term II (7-12 Months)		
	1	Second BHMS	Professional	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	FUE (end of 12 months)	
				20 Marks Viva	i) Viva voce -50 marks ii) Practical – 50 marks	20 Marks Viva	200 marks theory	200 marks Practical+ Viva+ IA

PA: Periodical Assessment; TT: Term Test; FUE: Final University Examinations; IA: Internal Assessment

7.1 Number of papers and Mark Distribution for Final University Examination (FUE)

Sr. No.	Course Code	Papers	Theory	Practical/ Clinical	Viva Voce	Internal Assessment*	Grand Total
1	HomUG-Path M	02	200 marks*	100 marks	80 marks	20 marks (Marks of PA I + TT I + PA II)	400 marks

*Method of Calculation of Internal Assessment Marks for Final University Examination:

Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) $/ 140 \times 20$

7.2 Paper Layout

Summative assessment (FUE):

Theory- 200 marks

Paper I (100 Mark)		
General Pathology and Systemic Pathology		
1.	LAQ	50
2.	SAQ	40
3.	MCQ	10
Paper II (100)		
Microbiology and Parasitology		
1.	LAQ	50
2.	SAQ	40
3.	MCQ	10

7.3 Theme-wise distribution of questions for theory exam paper I

	PAPER – 1					
Theme	Topics	Term	Marks	LAQ's	SAQ's	MCQ's
A	Cell Injury and cellular adaptation, Inflammation and repair and Homoeopathic concept	I	21	Yes	Yes	Yes
В	Neoplasia ,Immunopathology and Homoeopathic concept	I	21	Yes	Yes	Yes
С	Haemodynamic disorders ,Environmental and Nutritional diseases and Homoeopathic concept	Ι	17	Yes	Yes	Yes
D	Diseases of the haemopoetic system, bone marrow and blood,CVS system blood vessels and lymphatics	II	17	Yes	Yes	Yes
Е	Diseases of Respiratory, GIT, Liver and gall bladder, Pancreas, kidney and lower urinary tract, Endocrine glands	II	17	Yes	Yes	Yes
F	Diseases of male and female reproductive system, skin and soft tissue, nervous, Musculo-skeletal system	II	7	No	Yes	Yes

7.4 Distribution of questions for theory exam paper II

	PAPER – 2					
Theme	Topics	Term	Marks	LAQ's	SAQ's	MCQ's
A	Bacteriology introduction, Human microbiome, Infection and diseases ,culture medias and methods ,Sterilisation and disinfection.	I	12	No	Yes	Yes
В	Gram positive bacterias	I	17	Yes	Yes	Yes
С	Parasites-protozoans, Virology introduction	I	17	Yes	Yes	Yes
D	Gram negative bacterias, Acid fast bacterias ,Spirochaetes	II	21	Yes	Yes	Yes
Е	DNA & RNA Viruses	II	17	Yes	Yes	Yes
F	Fungi and parasites –helminthes, Diagnostic procedures in Microbiology, Homoeopathic concept	II	16	Yes	Yes	Yes

7.5 Question paper blue print Paper I

A	В	Question Paper Format
Question Serial Number	Type of Question	(Refer table 7.4 for themes)
Q1	Multiple Choice Questions(MCQ)	1. Theme A
	10 Questions	2. Theme B
	10 Questions	3. Theme C
	1 mark each	4. Theme C
	All compulsory	5. Theme D
	An compulsory	6. Theme D
		7. Theme E

Q2	Short answer Questions (SAQ) Eight Questions 5 Marks Each All compulsory	8. Theme E 9. Theme F 10. Theme F 1. Theme A 2. Theme A 3. Theme B 4. Theme B 5. Theme C 6. Theme D 7. Theme E 8. Theme F
Q3	Long answer Questions (LAQ) Five Questions 10 marks each All compulsory	1. Theme A 2. Theme B 3. Theme C 4. Theme D 5. Theme E

7.7 Question paper blue print Paper II

A	В	Question Paper Format
Question Serial Number	Type of Question	(Refer table 7.4 for themes)
Q1	Multiple Choice Questions (MCQ)	1. Theme A
	10 Questions	2. Theme A
		3. Theme B
	1 mark each	4. Theme B
	All compulsory	5. Theme C
	7 in compassory	6. Theme C
		7. Theme D
		8. Theme E
		9.Theme E
		10. Theme F
Q2	Short answer Questions	1. Theme A
	(SAQ)	2.Theme A
	(SAQ)	3.Theme B
	Eight Questions	4. Theme C
	5 Marks Each	5. Theme D
	3 IVIAIRS Each	6. Theme D
	All compulsory	7.Theme E
		8.Theme F
Q3	Long answer Questions	1. Theme B
	(LAQ)	2. Theme C
	Five Questions	3. Theme D
	10 marks each	4. Theme E 5. Theme F
	All compulsory	J. Theme F

7.8 Details of practical assessment

	PRACTICAL EXAM				
1.	Laboratory reports		Marks	Total marks	Time
	Interpretation of laboratory reports and its	• Identify whether			
	clinico- pathological correlation: Complete	laboratory report is	3		
	Haemogram	normal or abnormal in			
	Urine reports	relation to physiological		10 marks	10 mins
	Liver function tests	values			
	Renal function tests	Discuss the probable			
	Thyroid function tests	reason for abnormal			
	Lipid profile	values in laboratory	7		
	Diabetic profile	report and its clinical			
	Serum cardiac biomarkers	significance			
	Enzyme markers for necrosis				
	Serological tests				
	Any one of the above				
2.	EXPERIMENT:			Total marks	Time
a.	Estimation of Haemoglobin %	Procedural and Practical	15		
b.	WBC -Total count	skills			
c.	RBC - Total count			25 marks	30 minutes
d.	Differential count	Result and Discussion			
e	Bleeding time and Clotting time		10		
f	Determination of Blood group				
f.	Physical examination of urine				
g.	Chemical examination of urine				
h.	Urine microscopy				
i.	Gram staining				
	Any one of the above				

3.		Spotters (5):25 marks				
		•Identify the spot	2			
	ANY FIVE SPOTTERS (Instruments/ Equipments/ Specimens / Models)	•List the characteristic features/ utility of the spot.	3	5 marks X 5 = 25 marks	3 minutes for each spotting=15 minutes	
4.		Spotting –Slides (5	5): 25 marks			
	Any five Slides	•Identify the slide	2			
	(Histopathology/parasitology/microbiology			5 marks $X = 25$		
		•List three features of the		marks	3 minutes for each	
		given slide	3		slide=15 minutes	
5.	Journal or Practical record			15 marks		
	Total Pra	ctical marks		100 marks		

8. OSPE STATIONS

Station #01 (Unobserved Station)

For Organizer:

Topic Specification: Lab report interpretation

Subject Material: Clinical scenario and Laboratory report

For Candidate:

Marks: 10 Time Allowed: 10 minutes.

Task: Carefully read the given clinical scenario and Laboratory report and answer the questions:

Answer the following questions:

1) Identify whether laboratory report is normal or abnormal in relation to physiological values (02)

2) Discuss the probable reason for abnormal values in laboratory report and its clinical significance (03)

For Examiner:

Sr. No	Key	Max. Marks
1.	Identify whether laboratory report is normal or abnormal in	2
	relation to physiological values	
2.	Discuss the probable reason for abnormal values in laboratory	3
	report and its clinical significance	

STATION # 02 (UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Identification of Histopathological slide(5 nos)

SAMPLE MATERIAL: Histopathological slide

For Candidate:

Max. Marks: 05 Time Allowed: 03minutes for each slide

Task: Carefully identify the spotter -Histopathological slide and answer the following questions:

•Identify the histopathology slide (2)

•List three features of the given histopathology slide (3)

For Examiner:

Sr. No	Key	Max. Marks
1.	Identify the histopathology slide	2
2.	•List three features of the given histopathology slide	3

STATION # 03 (UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Identification of appliances: (2 nos)

SAMPLE MATERIAL:Appliances

For Candidate:

Max. Marks: 05 Time Allowed: 03minutes- for each spotter

Task: Carefully identify the spotter -Appliance and answer the following questions:

•Identify the spotter (1)

• Description of the appliance (2)

• Uses of the appliance (2)

For Examiner:

Sr. No	Key	Max. Marks
1.	Identification	1
2.	Description	2
3.	Uses	2

STATION # 04 (UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Gross specimens/models(2 nos)

SAMPLE MATERIAL: Gross specimen /model

For Candidate:

Max. Marks: 05 Time Allowed: 03minutes -for each spotter

Task: Carefully identify the specimen/model and answer the following questions:

•Identify the specimen (2)

•List three characteristic features of the specimen (3)

For Examiner:

Sr. No	Key	Max. Marks
1.	Specimen identification	2
2.	three characteristic features of the specimen	3

STATION # 05(UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Spotter-disinfectant

SAMPLE MATERIAL: disinfectant

For Candidate:

Max. Marks: 05 Time Allowed: 03minutes.

Task: Carefully identify the spotter –disinfectant and answer the following questions:

•Identify the disinfectant (2)

•Enumerate the uses of the disinfectant (3)

For Examiner:

Sr. No	Key	Max. Marks
1.	Identify the disinfectant	2
2.	Enumerate the uses of the disinfectant	3

STATION # 06 (OBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Practical (haematology/urine/gram staining)

SAMPLE MATERIAL:Blood /Urine/Smeared slide

For Candidate:

Max.Marks: 25 Time Allowed: 30minutes.

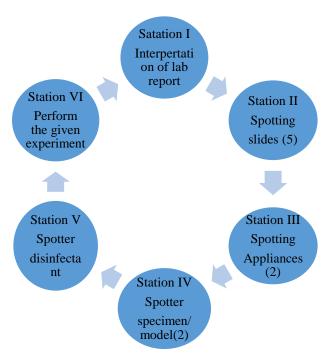
Task: Carefully perform the experiment given

- •Write the procedure and perform the experiment (15)
- •Write the result obtained and its Discussion (10)

For Examiner:

Sr. No	Key	Max. Marks
1.	Procedural and Practical skills	15
2.	Result and Discussion	10

OSPE STATIONS



9. List of recommended text/reference books

Theory

- 1. Harsh Mohan (2023), *Textbook of Pathology* (9 th Edition). Jaypee Publisher (CBME)
- 2. Vinay Kumar and Abul K Abbas(2023) , Robbins & Kumar Basic Pathology (11th SAE), Elsevier
- 3. Apurba S Sastry, Sandhya Bhat (2023), *Essentials of Medical Microbiology* (4 th Edition), ARYA Publications. (CBME) CBS publihers.
- 4. Ananthanarayan.R and Jayaram Paniker CK (2022), *Ananthanarayan and Paniker's Textbook of Microbiology* (12th Edition), Universities Press (CBME)
- 5. Chatterjee K D, (2023), Parasitology (Protozoology and Helminthology), (13th Edition), CBS publihers.
- 6. Ghosh Sougata (2021), Paniker's Textbook of Medical Parasitology, (9 th Edition), Jaypee Publisher (CBME)
- 7. Fiona Roberts, (2018), Pathology Illustrated International, (8th Edition), Elsevier
- 8. Nayak Ramadas(2017), Essentials in Hematology and Clinical Pathology, (2 nd Edition), Jaypee Publishers.
- 9. Sunil Kumar Mohanty (2014), Text Book of Immunology, (2 nd Edition), Jaypee Brothers Medical Publishers

Practical

- 1. Harsh Mohan, (RP 2023) Practical Pathology, (5th Edition). Jaypee Publisher (CBME)
- 2. Santosh Kumar Mondal, (2024) Pathology Practicals With OSPE, (2 nd Edition), CBS Publishers. (CBME)
- 3. Anamika Vyas, Sheethal. S (2023), Concise Workbook in Practical Microbiology, Jaypee Publishers. (CBME)
- 4. Dr Baveja C P(2021), Practical Microbiology for MBBS, (5 th Edition), ARYA Publications

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Subject code: HomUG PM-I

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1. Preamble

Practice of Medicine with Homoeopathic therapeutics is concerned with study of clinical methods, clinical presentations of systemic diseases, differential diagnosis and prognosis, general management and integration with Homoeopathic principles to evolve homoeopathic therapeutics.

Homoeopathy has a distinct approach to the concept of disease. It recognizes the ailing individual by studying him as a whole rather than in terms of sick parts and emphasizes the study of the man, his state of health, state of Illness. The emphasis is on study of man in respect of health, disposition, diathesis, disease, taking all predisposing and precipitating factors, i.e. fundamental cause, maintaining cause and exciting cause. The study of the concept of individualization is essential so that the striking features which are characteristic to the individual become clear, in contrast to the common picture of the respective disease condition. Hahnemann's theory of chronic miasms provides us an evolutionary understanding of the chronic diseases: psora, sycosis, tubercular and syphilis, and acute manifestations of chronic diseases and evolution of the natural disease shall be comprehended in the light of theory of chronic miasms.

This will demand correlation of the disease conditions with basics of anatomy, physiology, biochemistry and pathology. Application of Knowledge of Organon of Medicine and Homoeopathic Philosophy, Materia Medica and Repertory in dealing with the disease conditions should be actively taught.

Life style disorders have burgeoned in modern times. Homoeopathy has a great deal to offer through its classical holistic approach. There are plenty of therapeutic possibilities which Homoeopathy needs to exploit in the years to come.

2. Course outcomes

- i. Develop as a sound homoeopathic clinician who can function indifferent clinical settings by applying knowledge, clinical skills and attitudes in studying the individual as a whole.
- ii. Able to correlate the disease conditions with the basics of anatomy, physiology, biochemistry and pathology.
- iii. Able to apply the knowledge of causation, pathophysiology, pathogenesis, manifestations, and diagnosis (including differential diagnosis) to understand the disease.
- iv. Develop adequate knowledge for rational use of investigations and its interpretation to arrive at a final diagnosis of disease.
- v. Ability to make a rational assessment of prognosis and general management of different disease conditions.

- vi. Ability to understand and provide preventive, curative, palliative, rehabilitative and holistic care with compassion, following the principles of Homoeopathy.
- vii. Able to integrate the clinical state of the disease with the concepts of Organon of Medicine and Homoeopathic Philosophy, Repertory and Homoeopathic Materia Medica for the management of the patient.

3. Learning objectives

At the end of BHMS II course, the students should be able to-

- i. Clinico-pathological evaluation of common signs and symptoms with miasmatic integration.
 - **a.** Understanding Common Signs and Symptoms: By the end of the course, students will be proficient in recognizing and evaluating common signs and symptoms presented by patients, utilizing a holistic approach that integrates clinical and pathophysiological processes involved.
 - **b. Diagnostic Competence**: Through case-based learning and clinical exposure, students will develop the skills necessary to conduct comprehensive clinico-pathological evaluations, to identify underlying disease tendencies and susceptibilities.
 - c. Therapeutic Proficiency: Students will be able to able to select Homoeopathic remedies based on the disease expression.
- ii. Infectious Diseases general outline and introduction and common expression and investigation; Water & Electrolyte Disturbances, Acid Base Metabolism
 - **a.** Comprehensive Understanding: Students will acquire a comprehensive understanding of the principles of infectious diseases, including their aetiology, pathogenesis, epidemiology, and clinical manifestations, within the context of homeopathic philosophy.
 - **b. Recognition of Common Infections**: Through case studies and practical sessions, students will learn to identify common infectious diseases encountered in clinical practice, integrating homeopathic principles with conventional approaches to diagnosis.
 - **c. Diagnostic Approach**: Students will develop proficiency in employing diagnostic methods relevant to infectious diseases, including physical examination findings, laboratory tests, and imaging studies, while considering holistic aspects of the patient's health.

- **d.** Introduction to Prevention and Control Measures: Students will be able to define preventive strategies and public health measures aimed at controlling the spread of infectious diseases, incorporating principles of homeopathy into discussions of hygiene, immunity, and environmental factors.
- iii. General Considerations of Immunity & Susceptibility
 - **a.** Understanding Immune Function: Students will acquire a comprehensive understanding of the immune system, including its cellular and humoral components, mechanisms of recognition, and response to pathogens and foreign antigens.
 - **b. Exploration of Susceptibility**: Through theoretical study and clinical case discussions, students will explore the concept of susceptibility in homoeopathy, examining factors that influence an individual's predisposition to disease and their response to homoeopathic treatment.
 - **c. Integration of Immune Concepts**: Students will learn to integrate concepts of immunity and susceptibility into the homoeopathic framework, considering the role of constitutional factors, miasmatic influences, and environmental exposures in shaping an individual's health status.
- iv. Introduction to Medical Genetics
 - **a. Foundational Principles**: Students will gain aintroductory understanding of medical genetics, including principles of inheritance, genetic variation, and gene-environment interactions relevant to human health and disease.
 - **b. Genetic Disorders**: Through theoretical study, students will familiarize themselves with common genetic disorders, including single gene disorders, chromosomal abnormalities, and their clinical manifestations.

These course outcomes aim to equip second-year homoeopathy degree students with the knowledge, skills, and perspectives necessary to approach the evaluation and management of common clinical presentations, infectious diseases and establishing the relationship between knowledge of genetics and immunology with Homoeopathic concept of qualitative aspects of Susceptibility.

4. Course content and its term-wise distribution

	Theory	Non-lectures (Clinical/Demonstrative)
		Term I
	Clinico - pathological evaluation of common signs and symptoms with miasmatic integration* Introduction to Medical genetics*	Clinical: 10 Demonstrative: 2
		Term II
1.	Immunity & Susceptibility -	
	General considerations*	Clinical: 10
2.	Infectious Diseases and Tropical	Demonstrative: 2
	Diseases*	

^{*}Refer clause 5.4 and tables 5.4.1 – 5.4.5 for detailed content (topics breakup)

5. Teaching hours

5.1. Gross division of teaching hours

Practice of Medicine					
Year Teaching hours- Lectures Teaching hours- Non-lectures Total					
II BHMS 80		24	104		

5.2. Teaching hours theory

Sr. No.	Topic	Hours
1	Clinico - pathological evaluation of common signs and symptoms with miasmatic integration	35
2	Immunity & Susceptibility - General considerations	5
3	Introduction to Medical genetics	5
4	Infectious Diseases and Tropical Diseases	35
	Total	80

5.3. Teaching hours Non-lecture

Sr. No.	Non-lectures	Hours
	Clinical	
	Approach to Patient:	
1	a) Doctor & Patient: General Principles of History Taking	
1	b) Physical Examination General Principles	3
	c) Differential Diagnosis: The beginning of management plan	
	General Assessment:	
2	a) Psychological Assessment	3
	b) Nutritional Assessment	
3	General Physical Examination Skill	14
	Demonstrative	
4	Case Based / Problem Based Discussion on any of the topic of II BHMS Syllabus topic to be conducted	4
4	[as per availability of the case material or patient]	4
	Total	24

5.4. Distribution of teaching hours with breakup of each topic

5.4.1. Clinico - pathological evaluation of Common signs and symptoms with miasmatic integration

Cardinal Manifestations and Presentation of Diseases with relevant investigations

(Ref: Harison's Principles of Internal Medicine 21stEd)

Sr. No.	Topic	Topic breakup	Hours
1	Pain	1) Pain: Pathophysiology, types of pain	4
		2) Chest Discomfort	
		3) Abdominal Pain	
		4) Headache	
		5) Back and Neck Pain	
2	Alterations in Body Temperature	6) <i>Fever:</i> Definition, types of fever, aetiology, pathophysiology, physical examination, investigations and	3
		management	
		7) Fever and Rash: Definition of rash, Approach - causes and	
		its presentation, examinations, investigations and	
		management	
		8) Fever of Unknown Origin: Definition, types, aetiology and	
		epidemiology, diagnostic tests, differential diagnosis and	
		management	
3	Neurological Symptoms	9) <i>Syncope:</i> Definition, classification and its aetiology and its	6
		pathophysiology, clinical features as per the types,	
		investigations, management	
		10) Dizziness and Vertigo: Definition, clinical approach with	
		its pathophysiology and management	
		11) Fatigue: Definition, differential diagnosis, clinical	
		approach and management	

Sr. No.	Topic	Topic breakup	Hours
		12) Neurologic Causes of Weakness and Paralysis: Definition	
		[Weakness, Paralysis, Tone, Spasticity, Rigidity, Paratonia,	
		flaccidity, Fasciculations], Pathogenesis [Upper Motor	
		Neuron Weakness, Lower Motor Neuron Weakness,	
		Neuromuscular Junction Weakness, Myopathic Weakness,	
		& Psychogenic Weakness], Distribution and its approach.	
		13) Numbness, Tingling, and Sensory Loss: Definition,	
		pathophysiology and differential diagnosis	
		14) Gait Disorders, Imbalance, and Falls:	
		a) Anatomy and physiology related to Gait balance.	
		b) Definition, pathophysiology and clinical	
		significance related to different types of gait	
		disorders.	
		c) Definition, pathophysiology and clinical	
		manifestation of disorders of balance.	
		d) Assessment for the patient with falls.	
		15) Confusion and Delirium: Definition, epidemiology, risk	
		factors, pathogenesis, clinical features, physical	
		examinations, investigations, diagnostic criteria,	
		differential diagnosis and general management.	
		16) Coma and disorders of consciousness: Definition, stages,	
		Diagnostic approach: History, aetiology and its differential	
		diagnosis, neurological examinations, investigations,	
		management and prognosis	
		17) Dementia: Definition, functional anatomy of dementia,	
		aetiology and its differential diagnosis, Diagnostic	
		approach: History physical & neurological examinations,	

Sr. No.	Topic	Topic breakup	Hours
		cognitive and neuropsychiatric examination, investigations and management	
		18) Aphasia, Memory Loss, and Other Cognitive Disorders: Definition, applied anatomy, clinical examination	
		19) Sleep Disorders: Physiology of sleep and wakefulness, approach to sleep disorders and treatment; evaluation of insomnia and its treatment	
4	Circulatory and Respiratory Dysfunctions	20) Dyspnoea: Definition, epidemiology, mechanisms underlying dyspnoea, assessment, differential diagnosis; Clinical approach: history, physical examination, investigations and management.	6
		21) <i>Cough:</i> Definition, mechanism of cough, impaired cough, aetiology, classification, assessment of chronic cough, differential diagnosis, approach: history, physical examination, investigations and management.	
		22) <i>Haemoptysis:</i> Definition, understanding anatomy & physiology of it, aetiopathogenesis, evaluation of haemoptysis: history, physical examination, diagnostic evaluation, and management.	
		23) <i>Hypoxia and Cyanosis:</i> a) <i>Hypoxia:</i> Definition, response to hypoxia,	
		aetiology, pathophysiology, adaptation to hypoxia.	
		b) <i>Cyanosis:</i> Definition, types, differential diagnosis with its aetiology, approach to cyanosis.	
		24) <i>Oedema:</i> Definition, aetiopathogenesis, differential diagnosis – Generalized and Localized oedema;	

Sr. No.	Торіс	Topic breakup	Hours
		distribution of oedema; Approach: History taking, Clinical examination and investigations.	
		25) Palpitations: Definition, aetiopathogenesis, differential	
		diagnosis, Approach: History taking, Clinical examination, investigations and management.	
5	Abdominal/GIT Dysfunctions	26) Dysphagia: Definition, physiology of swallowing, pathophysiology; Approach: history taking, Clinical examination, diagnostic procedures and management.	6
		27) <i>Nausea, Vomiting and Indigestion:</i> Definition, mechanism, causes & differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.	
		28) <i>Diarrhoea and Constipation:</i> Definition, Normal physiology, types and causes, differential diagnosis,	
		Approach: history taking, Clinical examination, diagnostic testing and management.	
		29) Dysentery: Definition, causes, differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.	
		30) <i>Unintentional Weight Loss:</i> Definition, physiology of weight regulation with aging, causes and differential	
		diagnosis, assessment and testing, management.	
		31) Gastrointestinal Bleeding: Definition, source of the	
		bleeding and its causes and its mechanism, Approach: history taking, differentiation of UGIB & LGIB - its	
		assessment, evaluation and management.	

Sr. No.	Topic	Topic breakup	Hours
		32) <i>Jaundice:</i> Definition, clinical evaluation, metabolism of bilirubin, aetiopathogenesis, classification and its causes, differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management. 33) <i>Abdominal Swelling & Ascites:</i> Definition, causes, differential diagnosis, Approach: history taking, Clinical examination, investigations and its evaluation. Ascites: Definition, aetiopathogenesis, evaluation, management and complications.	
6	Renal and Urinary Tract Dysfunctions	 34) Interstitial Cystitis / Bladder Pain Syndrome: Definition, aetiopathogenesis, clinical presentation, investigations, diagnostic evaluation, management, complication and prognosis. 35) Dysuria: Definitions, aetiology, pathophysiology, assessment and diagnostic evaluation. 36) Azotaemia and Urinary Abnormalities: Definitions, aetiology, pathophysiology, assessment and diagnostic evaluation. 37) Fluid and Electrolyte Imbalance: Causes, 	4
7	Haematological alterations	pathophysiological evaluation, Investigations 38) <i>Anaemia</i> : Definition, applied anatomy & physiology of RBC, regulation of its production; classification, clinical presentation; Approach: History taking, clinical examination, investigations and diagnostic evaluation 39) <i>Leucocytosis</i> & <i>Leukopenia</i> : Definition, Aetiology, differential diagnosis.	4

Sr. No.	Topic	Topic breakup	Hours				
	40) Bleeding diatheses: Bleeding & Thrombosis: Definitions,						
		applied anatomy & physiology of Haemostasis, aetiology					
		of disorder of haemostasis, clinical presentation and history					
		taking, clinical examination, laboratory evaluation.					
		41) Interpretation of Peripheral Blood Smears					
8	Psychological symptoms	42) Causes of asthenia, anxiety, sadness, thought disorders and	2				
		delusions, perceptual disorders and hallucinations and					
		relevant investigations					
	Total						

5.4.2 Medical genetics:

Sr. No.	Topic lecture	Hours				
1	Cytogenetics - definition, classification of chromosomal abnormality	1				
2	Down's Syndrome	1				
3	Turner's & Klinefelter's Syndrome	1				
4	Cystic fibrosis, Huntington's disease & Marfan's syndrome	1				
5	Poly cystic kidney disease	1				
6	Neoplasia	1				
7	Rare diseases – basic concept	1				
8	Integrating concept of Genetics with Homoeopathy	1				
	Total					

5.4.3 Immunological factors in disease with concept of susceptibility:

Sr. No.	Topic lecture	Hours			
1	Introduction and Primary & Secondary Immunodeficiency States	1			
2	Hypersensitivity reactions: I, II, III, IV	1			
3	Autoimmune diseases	1			
4	Transplants, Graft rejection	1			
5	HIV	1			
6	Integrating concept of Immunity with Homoeopathy: Susceptibility	1			
	TOTAL				

- **5.4.4** For study of infectious and tropical diseases: Emphasis shall be on the following headings:
 - i. Definition
- ii. Causative agents
- iii. Epidemiology
- iv. Pathogenesis
- v. Clinical features
- vi. Investigations
- vii. Diagnostic features
- viii. Differential Diagnosis
- ix. Complications
- x. Management
- xi. Prevention
- xii. Prognosis
- xiii. Homoeopathic classification of disease with its reasons
- xiv. Repertorial coverage / reference related to the disease
- xv. Homoeopathic therapeutics to the disease

Sr. No.	Topic Lecture	Hours
1	Herpes simplex viruses [HSV] infections	1
2	Varicella-zoster virus (VZV) infection	1
3	Epstein-Barr virus [EBV] Infections	1
4	Poliovirus Infections	1
5	Measles	1
6	Mumps	1
7	Rabies	1
8	Dengue	1
9	Japanese B Encephalitis	1
10	BIRD FLU	
11	Influenza A H1N1 virus	2
12	Chikungunya	
13	COVID 19 Virus Infection	1
14	Yellow fever	1
15	Smallpox (variola) - poxvirus infection	1
16	HIV Infection	1
17	Zika virus infection	1
18	Rickettsial infection	1
19	Staphylococcal, streptococcal infections	1
20	Typhoid Fever	1
21	Gastroenteritis	1
22	Cholera	1
23	Tetanus	1
24	Anthrax, brucellosis, plague	1
25	Leprosy	1
26	Sexually Transmitted Disease, Syphilis	1

Sr. No.	Topic Lecture	Hours
27	Amoebiasis, Amoebic Liver Abscess	1
28	Filariasis / Worm infestations	1
29	Malaria &Kalazar	1
30	Leptospirosis	1
31	Tuberculosis	1
32	Extra pulmonary tuberculosis	1
33	Diphtheria	1
34	Pertussis (whooping cough)	1
35	Therapeutics of Infectious Disorders	3
	TOTAL	35

5.4.5 Teaching hours distribution to clinical / practical / demonstrative activities (Non-lectures):

Sr. No.	Non-lectures	Hours
1	Approach to Patient:	
	d) Doctor & Patient: General Principal of History Taking	3
	e) Physical Examination General Principal	3
	f) Differential Diagnosis: The beginning of management plan	
2	General Assessment:	
	c) Psychiatric Assessment	3
	d) Nutritional Assessment	
3	General Examination Skill:	14
	i.) Temp recording and its documentation and interpretation	1
	ii.) Pulse examination at different site and its documentation and interpretation	1
	iii.) RR examination and its documentation and interpretation	1
	iv.) BP Recoding and its documentation and its interpretation	1
	v.) Height measurement and its documentation and interpretation	1

Sr. No.	Non-lectures	Hours				
	vi.) Weight measurement and its documentation and interpretation					
	vii.) BMI and Nutrition Assessment and its documentation and interpretation					
	viii.) Observation of Appearance, Built, and assessing Body proportion: Documentation and					
	interpretation ix.) Observation of Gait and its Assessment& documentation	1				
	x.) Observation of Decubitus and its assessment& documentation					
	xi.) Ear examination and its documentation and interpretation					
	xii.) Nose examination and its documentation and interpretation	3				
	xiii.) Throat examination and its documentation and interpretation					
	xiv.) Eye examination and its documentation and interpretation	2				
	xv.) Face examination and its documentation and interpretation					
	xvi.) Mouth examination and its documentation and interpretation					
	xvii.) Lymph Nodes examination at different sites and documentation and interpretation					
	xviii.) Nails examination and its documentation and interpretation	3				
	xix.) Skin examination and its documentation and interpretation					
4	Case Based / Problem Based Discussion on any of the following topic to be conducted [as per					
	availability of the case material or patient]					
	a) Approach to Case of Fever with any system presenting symptoms [GIT / RS / Skin / Renal / MSS etc.]					
	b) Approach to Case presenting with Neurological Symptoms	4				
	c) Approach to Case presenting with Circulatory and / or Respiratory Symptoms	4				
	d) Approach to Case presenting with Abdominal/GIT Symptoms					
	e) Approach to Case presenting with Renal and Urinary Tract symptoms					
	f) Approach to Case presenting with Haematological symptoms					
	g) Approach to Case presenting with psychological symptoms					

6. Content mapping (competencies tables)

6.1. Competency tables for clinico-pathological evaluation of common signs and symptoms with miasmatic integration: 6.1.1. Pain-

Sl. No	Domain	Millers	Content	SLO	Blooms	Priority -	T-L	Asses	sment	Integration
	of Compete ncy	Level:			Domain/ Guilbert 's Level		Metho ds	Formative	Summative	
HomU G-PM I.1.1	K&S	K	Define pain and its types	 Define pain and Differentiate between acute and chronic pain 	C1	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.2		КН	Differentiate between types of pain	Differentiate between nociceptive, neuropathic, and inflammatory pain	C2	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.3			Role of inflammation in pain	Describe how inflammation contributes to pain sensation and hypersensitivity	C2	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.4		K	Define chest discomfort and its significance	1. define chest discomfort and 2. explain its importance in diagnosing	C1	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology

			various conditions						
HomU G-PM I.1.5	КН	Describe the common causes of chest discomfort	Describe the common etiologies of chest discomfort, such as angina, heartburn, and musculoskeletal pain	C2	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.6	K	Define abdominal discomfort and its significance	1. Define abdominal discomfort and 2. Explain its importance in diagnosing various conditions	C1	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.7	КН	Describe the common causes of abdominal discomfort	Describe the common etiologies of abdominal discomfort, such as gastritis, appendicitis, and constipation	C2	Must Know	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology

HomU G-PM I.1.8	K	Define headache and its types	1. define headache and 2. differentiate between primary and secondary headaches	C1	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.9	KH	Describe the common causes of headache	Describe the common etiologies of headache, such as tension-type headache, migraine, and cluster headache	C2	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.10	K	Define back and neck pain and their types	1. define back and neck pain and 2. differentiate between mechanical and non-mechanical causes	C1	MK	Lecture, Group discussi on	Quiz, Written test	SAQ, MCQ	Anatomy, Physiology
HomU G-PM I.1.11	KH	Describe the common causes of back and neck pain	Describe the common etiologies of back and neck pain, such as muscle strain, disc herniation, and osteoarthritis	C2	MK	Lecture, Group discussi on	Quiz, Written test	SAQ, MCQ	Anatomy, Physiology

HomU G-PM I.1.12	НО	K	Define the principles of homoeopathic management of pain	define homoeopathic principles for pain management, emphasizing 1. individualizatio n and 2. similars	C1	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Organon and Homoeopathic Philosophy
HomU G-PM I.1.13		KH	Describe the concept of the simillimum in homoeopathy	Describe how remedies are selected based on symptom similarity in pain management	C2	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Organon and Homoeopathic Philosophy
HomU G-PM I.1.14			Explain the role of repertories in homoeopathic prescribing	Discuss repertory usage to find the most suitable remedy for pain	C2	MK	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Repertory
HomU G-PM I.1.15		SH	Demonstrate the process of selecting a homoeopathic remedy	Demonstrate remedy selection based on totality symptoms in case of pain	P2	MK	Case studies	OSCE, Practical exam	Bedside examinatio n, Viva voce	Materia Medica
HomU G-PM I.1.16		КН	Explain the principles of case management in homoeopathy	Discuss posology in pain treatment	C2	Must Know	Lecture, Group discussi on	Quiz, Written test, MCQ	SAQ, MCQ	Organon, Homoeopthic Pharmacy

6.1.2. Fever-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Assessment		Integration
	of	Level			Domain/	ty -	Metho	F	S	
	Compete				Guilbert		ds			
	ncy				's Level					
HomU	K&S	K	Define fever and	Define fever and	C1	MK	Lecture,	Quiz,		Physiology,
G-PM			its significance	explain its role			Group	Written test		Pathology
I.2.1				in the body's			discussi			
				immune			on			
				response						
HomU		KH	Describe the	Describe	C2	MK	Lecture,	Quiz,		Physiology,
G-PM			types of fever	different types of			Group	Written test		Pathology
I.2.2			and their	fever, such as			discussi			
			characteristics	intermittent and			on			
				continuous						
HomU			Explain the	Explain the	C2	MK	Lecture,	Quiz,		Microbiology,
G-PM			causes of fever	causes of fever,			Group	Written test		Immunology
I.2.3				including			discussi			
				infection and			on			
				inflammation						
HomU		K	Define the	Explain the	C1	MK	Lecture,	Structured	Theory and	Internal
G-PM			different types of	characteristics			Small	Oral	Viva voce	Medicine,
I.2.4			fever (e.g.,	and patterns of			group	Examinatio		Infectious
			intermittent,	different types of			discussi	n, Tutorials,		Diseases
			remittent,	fever.			on	Assignment		
			continuous,					s, MCQs		
			relapsing).							

HomU G-PM I.2.5	КН	Describe the etiology of each type of fever.	Explain the underlying causes of intermittent, remittent, continuous, and relapsing fevers.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomU G-PM I.2.6		Discuss the clinical manifestations and symptoms associated with each type of fever.	Identify the clinical features and presentations of intermittent, remittent, continuous, and relapsing fevers.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomU G-PM I.2.7	K	Define fever with rash.	Explain the clinical presentation of fever accompanied by a rash.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases, Dermatology
HomU G-PM I.2.8	K	Identify the common causes of fever with rash (e.g., viral infections, bacterial infections, allergic reactions).	Describe the etiological factors contributing to the development of fever with rash.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases, Dermatology

HomU G-PM I.2.9	КН	Discuss the differential diagnosis of fever with rash.	Explain the process of differentiating between various infectious and non-infectious causes of fever with rash.	C2	Must Know	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases, Dermatology
HomU G-PM I.2.10	K	Define Fever of Unknown Origin (FUO).	Explain the criteria/definitio n of FUO.	C1	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomU G-PM I.2.11	KH	Discuss the etiology and pathophysiology of FUO.	Describe the possible causes and underlying mechanisms of FUO.	C2	MK	Lecture, Small group discussi on	Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomU G-PM I.2.12		Identify the diagnostic approach to FUO.	Explain the stepwise approach to diagnosing and investigating FUO.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomU G-PM I.2.13		Discuss the differential diagnosis of FUO.	Explain how to differentiate between various causes of FUO.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases

HomU		Describe t	he	Explain the	C2	MK	Lecture,	Structured	Theory and	Internal
G-PM		management		treatment			Small	Oral	Viva voce	Medicine,
I.2.14		strategies f	or	options and			group	Examinatio		Infectious
		FUO.		approaches for			discussi	n, Tutorials,		Diseases
				patients with			on	Assignment		
				FUO.				s, MCQs		
HomU	K	Describe t	he	Define how to	C1	MK	Lecture,	Totorials,		Organon,
G-PM		fever totality.		erect a fever			Small	Asignments		Repertory
I.2.15				totality			group			
							discussi			
							on			
HomU	KH	Discuss t	he	List the PQRS	C2	MK	Lecture,	Structured	Theory &	Materia
G-PM		characteristic		symptoms of a			Small	Oral	Viva voce	Medica
I.2.16		indications	of	drug in Fever			group	Examinatio		
		various					discussi	n, Tutorials,		
		indicated drug	ţS.				on	Assignment		
								s, MCQs		

6.1.3. Neurological Symptoms-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Asses	sment	Integration
	of Compete ncy	Level			Domain/ Guilbert 's Level	ty -	Metho ds	F	S	
HomU G-PM I.3.1	K&S	K	Define the pathophysiology of neurological symptoms (e.g., weakness, numbness, tingling).	Explain the underlying mechanisms that lead to neurological symptoms.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	MCQs	Anatomy, Physiology, Neurology
HomU G-PM I.3.2		КН	Describe the neuroanatomical basis of common neurological symptoms.	Explain how specific neurological structures are involved in producing symptoms such as weakness or sensory changes.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	SAQ, MCQs	Anatomy, Physiology, Neurology
HomU G-PM I.3.3			Discuss the pathophysiologi cal processes underlying various neurological conditions.	Explain how different diseases and disorders affect the nervous system to produce specific symptoms.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	SAQ, MCQs	Physiology, Pathology

HomU G-PM I.3.4			Identify the role of neurotransmitter s and receptors in neurological symptoms.	Explain how alterations in neurotransmissi on can lead to neurological symptoms.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	SAQ, MCQs	Physiology, Pathology
HomU G-PM I.3.5	K&S	КН	Define the principles of management for neurological symptoms.	Explain the basic approaches to managing common neurological symptoms.	C2	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	SAQ, MCQs	Physiology
HomU G-PM I.3.6		K	Describe the complete symptom	Define the symptom under LSMC	C1	MK	Lecture, Small group discussi on	Structured Oral Examinatio n, Tutorials, Assignment s, MCQs	LAQ, SAQ, Viva voce	Organon
HomU G-PM I.3.7		S	Demonstrate the process of selecting a homoeopathic remedy for neurological symptoms based on totality of symptoms	Student should be able to demonstrate how to select a homoeopathic remedy based on the totality of symptoms in a case of neurological symptoms	P2	MK	Lecture, Small group discussi on	Assignment s, Tutorials	SAQ, MCQs	Materia medica

HomU	KH	Discuss the	List the PQRS	C1	MK	Lecture,	Structured	SAQ, Viva	Materia
G-PM		characteristic	symptoms of a			Small	Oral	voce	medica
I.3.8		indications of	drug in different			group	Examinatio		
		various	Neurological			discussi	n, Tutorials,		
		indicated drugs	symptoms			on	Assignment		
							s, MCQs		

6.1.4. Circulatory and Respiratory Dysfunctions

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Asse	essment	Integration
	of	Level			Domain/	ty -	Meth	F	S	
	Compete				Guilbert 's Level		ods			
HomU G-PM I.4.1	K&S	K	Define dyspnea.	Define dyspnea as the sensation of difficult or uncomfortable breathing, often described as shortness of	C1	MK	Lectur e, Small group discus sion	Quizzes, Peer assessmen t	SAQ	Physiology
HomU G-PM I.4.2		KK	Describe the physiology of dyspnea.	breath. Explain the physiological mechanisms that contribute to the sensation of dyspnea, including neural and mechanical factors.	C2	MK	Lectur e, Small group discus sion	Structured Oral Examinati on, Tutorials, Assignme nts, MCQs	SAQ, MCQs	Physiology

HomU G-PM I.4.3		Discuss the etiology of dyspnea.	Explain the various conditions and diseases that can cause dyspnea, such as respiratory disorders, cardiovascular diseases, or	C2	MK	Lectur e, Small group discus sion	Structured Oral Examinati on, Tutorials, Assignme nts, MCQs	SAQ, MCQs	Physiology, Pathology
HomU G-PM I.4.4		Identify the clinical evaluation and diagnostic approach for patients presenting with dyspnea.	metabolic conditions. Explain the steps involved in assessing and diagnosing patients with dyspnea, including history taking, physical examination, and	C2	MK	Lectur e, Small group discus sion	Observati ons, Simulatio ns	OSCE, Bedside examination	Clinical Medicine
HomU G-PM I.4.5	K	Define cough.	diagnostic tests. Define cough as a protective reflex that helps clear the airways of mucus, irritants, or foreign particles.	C1	MK	Lectur e, Small group discus sion	Quizzes, Peer assessmen t	Written examination, Objective Structured Clinical Examination (OSCE)	Clinical Medicne
HomU G-PM I.4.6	KH	Describe the physiology of cough.	Explain the neural and mechanical processes involved in the	C2	MK	Lectur e, Small group	Case studies, Role- playing	OSCE, Practical examination	Clinical Medicine

				generation of a cough reflex.			discus sion			
HomU G-PM I.4.7			Discuss the different types of cough.	Explain the characteristics and classification of cough, such as acute, subacute, or chronic.	C2	MK	Lectur e, Small group discus sion	Problem- based learning	MCQs, Short-answer questions	Pathology
HomU G-PM I.4.8			Identify the common causes of cough.	Describe the etiology and pathophysiology of cough, including respiratory infections, asthma, and GERD.	C2	MK	Lectur e, Small group discus sion	Presentati ons, Group projects	Written examination, Case-based discussion	Physiology, Pathology
HomU G-PM I.4.9	K&S		Describe the characteristics of different types of cough.	Explain the differences between dry, wet, productive, and non-productive coughs, and their potential underlying causes.	C2	MK	Lectur e, Small group discus sion	Quizzes, Peer assessmen t	Written examination, OSCE	
HomU G-PM I.4.10		K	Define hemoptysis.	Define hemoptysis as the expectoration of blood that originates from the respiratory tract.	C2	MK	Lectur e, Small group discuss ion	Quizzes, Peer assessmen t	Written examination, OSCE	Pathology

HomU G-PM I.4.11		КН	Describe the etiology of hemoptysis.	Explain the various causes of hemoptysis, including respiratory infections, pulmonary embolism, and lung cancer.	C2	MK	Lectur e, Small group discus sion	Case studies, Role- playing	OSCE, Practical examination	Pathology
HomU G-PM I.4.12			Discuss the clinical evaluation and diagnostic approach for patients presenting with hemoptysis.	Explain the steps involved in evaluating patients with	C2	MK	Lectur e, Small group discus sion	Observati ons, Simulatio ns	OSCE, Practical examination	Pathology
HomU G-PM I.4.13	K&S		Discuss the complications associated with hemoptysis.		C2	MK	Lectur e, Small group discus sion	Problem- based learning, Assignme nts	MCQs, Short-answer questions	Pathology

HomU G-PM I.4.14	K	Define hypoxia and cyanosis.	Define hypoxia as a condition characterized by insufficient oxygen supply to tissues and cyanosis as a bluish discoloration of the skin and mucous membranes due to deoxygenated hemoglobin.	C1	MK	Lectur e, Small group discus sion	Quizzes	Written examination, Objective Structured Clinical Examination (OSCE)	Pulmonology, Cardiology, Critical Care Medicine
HomU G-PM I.4.15	КН	Describe the pathophysiolog y of hypoxia and cyanosis.	Explain the mechanisms that lead to hypoxia and cyanosis, including impaired oxygen delivery or utilization.	C2	MK	Lectur e, Small group discus sion	Case studies	OSCE, Practical examination	Pulmonology, Cardiology, Critical Care Medicine
HomU G-PM I.4.16		Discuss the common causes of hypoxia and cyanosis.	Explain the various conditions and diseases that can manifest with hypoxia and cyanosis, such as respiratory disorders, cardiac conditions, or anemia.	C2	MK	Lectur e, Small group discus sion	Case studies	MCQs, Short-answer questions	Pulmonology, Cardiology, Critical Care Medicine

HomU G-PM I.4.17	PC		Discuss the clinical evaluation and diagnostic approach for patients presenting with hypoxia and cyanosis.	Explain the steps involved in evaluating patients with hypoxia and cyanosis, including history taking, physical examination, and diagnostic tests.	C2	MK	Lectur e, Small group discus sion	Tutorials, Group projects	OSCE, Practical examination	Pulmonology, Cardiology, Critical Care Medicine
HomU G-PM I.4.18		K	Define edema.	Define edema as the accumulation of excessive fluid in the interstitial spaces, leading to swelling and tissue enlargement.	C1	MK	Lectur e, Small group discus sion	Quizzes, Peer assessmen t	SAQ	Cardiology, Nephrology, Internal Medicine
HomU G-PM I.4.19		КН	Describe the pathophysiolog y of edema.	Explain the mechanisms involved in the development of edema, including changes in hydrostatic pressure, oncotic pressure, and capillary permeability.	C2	MK	Lectur e, Small group discus sion	Case studies, MCQs	LAQ, SAQ	Cardiology, Nephrology, Internal Medicine

HomU G-PM I.4.20	Discuss the causes and classification of edema.	Explain the various factors that can lead to edema, such as heart failure, kidney disease, liver cirrhosis, and venous insufficiency. Classify edema based on its location and underlying cause.	C2	MK	Lectur e, Small group discus sion	Problem- based learning	MCQs, SAQ, LAQ	Cardiology, Nephrology, Internal Medicine
HomU G-PM I.4.21	Describe the pathophysiolog y of edema.	Explain the mechanisms that lead to the accumulation of fluid in tissues, including increased capillary permeability and impaired lymphatic drainage.	C2	MK	Lectur e, Small group discus sion	Tutorials, Assignme nts	SAQ, LAQ	Cardiology, Nephrology, Internal Medicine
HomU G-PM I.4.22	Identify the clinical features of edema.	Describe the signs and symptoms associated with edema, including swelling, pitting, and changes in skin texture.	C2	MK	Lectur e, Small group discus sion	Presentati ons, Group projects, Assignme nts	SAQ, LAQ	Cardiology, Nephrology, Internal Medicine

HomU G-PM I.4.23	K	Define palpitations.	Define palpitations as the sensation of a rapid, irregular, or forceful heartbeat that may be felt in the chest, throat, or neck.	C1	MK	Lectur e, Small group discus sion		SAQ	Cardiology, Internal Medicine
HomU G-PM I.4.24	KH	Describe the pathophysiolog y of palpitations.	mechanisms that	C2	MK	Lectur e, Small group discus sion	Assignme nts	SAQ, MCQs	Cardiology, Internal Medicine
HomU G-PM I.4.25		Discuss the common causes of palpitations.	Explain the various conditions	C2	MK	Lectur e, Small group discus sion	Tutorials, Assignme nts, MCQs	MCQs, Short-answer questions	Cardiology, Internal Medicine

HomU G-PM I.4.26		Identify the clinical features of palpitations.	Describe the signs and symptoms associated with palpitations, including palpitations at rest, palpitations with exertion, and associated dizziness or syncope.	C2	MK	Lectur e, Small group discus sion	Tutorials, Assignme nts, MCQs	MCQs, Short-answer questions	Cardiology, Internal Medicine
HomU G-PM I.4.27	K	Define the principles of homoeopathic management	Students should be able to define the basic principles of homoeopathic treatment	C1	MK	Lectur e, Group discus sion	Quiz, Assignme nts	SAQ	Homoeopathic Materia Medica
HomU G-PM I.4.28	KH	Describe the concept of the simillimum in homoeopathy	Students should be able to describe how the selection of the simillimum is based on the totality of symptoms in homoeopathic treatment	C2	MK	Lectur e, Group discus sion	Quiz, Assignme nts	SAQ	Homoeopathic Materia Medica
HomU G-PM I.4.29	SH	Demonstrate the process of selecting a homoeopathic remedy based	Students should be able to demonstrate how to select a homoeopathic remedy based on	C4	MK	Case studie s	Quiz, Assignme nts	SAQ	Homoeopathic Materia Medica, Repertory

		on totality of symptoms	the totality of symptoms						
HomU G-PM I.4.30	КН	Explain the principles of case management in homoeopathy	Students should be able to discuss the principles of case management, including the importance of follow-up and potency selection	C5	MK	Lectur e, Group discus sion	Quiz, Assignme nts	LAQ	Homoeopathic Materia Medica

6.1.5. Abdominal/GIT Dysfunctions

Sl.No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Asse	ssment	Integration
	of	Level			Domain/	ty -	Metho	F	S	
	Compete				Guilbert		ds			
	ncy				's Level					
HomU	K&S	KH	Describe the	Explain how	C2	MK	Lecture,	Quizzes,	SAQ	Pathology,
G-PM			common causes	factors such as			Small	Peer		Microbiology,
I.5.1			of GIT	diet, lifestyle,			group	assessmen		PSM
			dysfunctions.	stress, and			discussi	t		
				genetics can			on			
				contribute to the						
				development of						
				GIT						
				dysfunctions.						
HomU			Discuss the	Explain how	C2	MK	Lecture,	Case	LAQ, SAQ	Physiology,
G-PM			pathophysiologic	disturbances in			Small	studies,		Pathology
I.5.2			al mechanisms	gastrointestinal			group	MCQ		
			underlying GIT	motility,			discussi			
			dysfunctions.	secretion, and			on			

		absorption can lead to symptoms of GIT dysfunctions.						
HomU G-PM I.5.3	Identify the risk factors associated with GIT dysfunctions.	Describe how factors such as age, gender, diet, and medication use can increase the risk of developing GIT dysfunctions.	C2	DK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Physiology, Pathology
HomU G-PM I.5.4	Explain the role of inflammation in GIT dysfunctions.	Describe how inflammatory processes can contribute to conditions such as gastritis, enteritis, and colitis.	C2	MK	Lecture, Small group discussi on	MCQ, Assignme nts	SAQ	Pathology, Microbiology
HomU G-PM I.5.5	Discuss the role of the microbiome in GIT health.	Explain how alterations in the gut microbiome can impact GIT function and contribute to the development of GIT dysfunctions.	C2	DK	Lecture, Small group discussi on	Tutorials, Group projects	LAQ, SAQ	Physiology, Pathology

HomU G-PM I.5.6	Describe the pathophysiology of dysphagia.	Explain how dysphagia can result from structural abnormalities, neurological	C2	MK	Lecture, Small group discussi on	Quizzes, Peer assessmen t	LAQ, SAQ	Physiology, Pathology
		disorders, or muscular dysfunction.						
HomU G-PM I.5.7	Discuss the common causes of dysphagia.	Explain how conditions such as esophageal strictures, achalasia, and neurological diseases can lead to dysphagia.	C2	MK	Lecture, Small group discussi on	Case studies	SSQ	Pathology
HomU G-PM I.5.8	Identify the key symptoms and clinical features of dysphagia.	Describe how symptoms such as difficulty swallowing, pain with swallowing, and regurgitation can help diagnose dysphagia.	C2	MK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Clinical medicine

HomU G-PM I.5.9	НО	Discuss the role of homoeopathic remedies in the management of dysphagia.	remedies such as Lachesis,	C2	MK	Lecture, Small group discussi on	Assignme nts	MCQs, Short- answer questions	Homoeopathic Materia Medica
HomU G-PM I.5.11		Describe the pathophysiology of nausea and vomiting.	Explain how various triggers, such as chemical stimulation, sensory input, and central nervous system disorders, can lead to nausea and vomiting.	C2	MK	Lecture, Small group discussi on	Quizzes, Peer assessmen t	MCQs, Short- answer questions	Physiology, Pathology
HomU G-PM I.5.12		Discuss the common causes of nausea and vomiting.	Explain how conditions such as gastroenteritis, motion sickness, and pregnancy can cause nausea and vomiting.	C2	MK	Lecture, Small group discussi on	Case studies	MCQs, Short- answer questions	Physiology, Pathology

HomU G-PM I.5.13		Identify the key symptoms and clinical features of nausea and vomiting.	Describe how symptoms such as retching, hypersalivation, and pallor can help diagnose nausea and vomiting.	C2	MK	Lecture, Small group discussi on	Case studies	MCQs, Short- answer questions	Clinical medicine
HomU G-PM I.5.14	НО	Discuss the role of homoeopathic remedies in the management of nausea and vomiting.	Explain how remedies such as Ipecacuanha, Nux vomica, and Cocculus indicus can be used to treat symptoms of nausea and vomiting.	C2	MK	Lecture, Small group discussi on	Observati ons, Assignme nts	MCQs, Short- answer questions	Homoeopathic Materia Medica
HomU G-PM I.5.15	K&S	Describe the importance of hydration and dietary modifications in the management of nausea and vomiting.	Explain how maintaining hydration and following a bland diet can help alleviate symptoms of nausea and vomiting.	C2	DK	Lecture, Small group discussi on	Tutorials, Group projects	MCQs, Short- answer questions	Physiology

HomU	Define diarrhea	Define diarrhea	C1	MK	Lectu	MCQ	SAQ	Physiology
G-PM	and its	as the passage			re,			
I.5.16	characteristics.	of loose or			Small			
		watery stools			group			
		three or more			discussi			
		times a day,			on			
		often						
		accompanied by						
		abdominal						
		cramping,						
		bloating, and						
		urgency.						
HomU	Describe the	Explain how	C2	MK	Lectu	MCQ,	LAQ,	Physiology.
G-PM	pathophysiology	disturbances in			re,	Assignme	SAQ	Pathology
I.5.17	of diarrhea.	gastrointestinal			Small	nts		
		motility,			group			
		secretion, and			discussi			
		absorption can			on			
		lead to diarrhea.						
HomU	Discuss the	Explain how	C2	MK	Lectu	Case	SAQ	Pathology,
G-PM	common causes	infections,			re,	studies		Microbiology
I.5.18	of diarrhea.	dietary factors,			Small			
		medications,			group			
		and stress can			discussi			
		contribute to the			on			
		development of						
		diarrhea.						
HomU	Identify the key	Describe how	C2	MK	Lectu	SAQ,	LAQ,	Clinical
G-PM	symptoms and	symptoms such			re,	LAQ	SAQ	medicine
I.5.19	clinical features	as loose stools,			Small			
	of diarrhea.	abdominal			group			
		cramping, and			- 1			

			dehydration can help diagnose diarrhea.			discussi on			
HomU G-PM I.5.20	НО	Discuss the role of homoeopathic remedies in the management of diarrhea.	Explain how remedies such as Podophyllum, Arsenicum album, and Chamomilla can be used to treat symptoms of diarrhea.	C2	MK	Lectu re, Small group discussi on	Assign ments, MCQ	MCQs, Short- answer questions	Homoeopathic Materia Medica
HomU G-PM I.5.21	K&S	Describe the importance of fluid and electrolyte management in the management of diarrhea.	Explain how maintaining hydration and electrolyte balance is crucial in the treatment of diarrhea.	C2	MK	Lectu re, Small group discussi on	Tutorial s, Goup projects	LAQ, SAQ	Physiology
HomU G-PM I.5.22		Define constipation and its characteristics.	Define constipation as infrequent bowel movements or difficulty passing stools, often associated with hard, dry stools and straining.	C1	MK	Lecture, Small group discussi on	Quizzes, Peer assessmen t	SAQ	Physiology

HomU G-PM I.5.23	Describe the pathophysiology of constipation.	Explain how factors such as slow colonic transit, pelvic floor dysfunction, and lifestyle factors can contribute to constipation.	C2	MK	Lecture, Small group discussi on	Tutorials, Group projects	LAQ, SAQ	Physiology
HomU G-PM I.5.24	Discuss the common causes of constipation.	Explain how	C2	MK	Lecture, Small group discussi on	Tutorials, Assignme nts	MCQs, Short- answer questions	Physiology
HomU G-PM I.5.25	Identify the key symptoms and clinical features of constipation.	Describe how symptoms such	C2	MK	Lecture, Small group discussi on	MCQ, Assignme nts	MCQs, Short- answer questions	Clinical medicine

HomU G-PM I.5.26	НО	Discuss the role of homoeopathic remedies in the management of constipation.	Explain how remedies such as Bryonia, Nux vomica, and Lycopodium can be used to treat symptoms of constipation.	C2	MK	Lecture, Small group discussi on	Observati ons	MCQs, Short- answer questions	Homoeopathic Materia Medica
HomU G-PM I.5.27	K&S	Describe the importance of lifestyle modifications in the management of constipation.	Explain how dietary changes, increased physical activity, and regular bowel habits can help alleviate constipation.	C2	DK	Lecture, Small group discussi on	Tutorials, Assignme nts	LAQ, SAQ	Physiology
HomU G-PM I.5.28		Define dysentery and its characteristics.	Define dysentery as a type of diarrhea that contains blood or mucus, often accompanied by abdominal pain and fever.	C2	MK	Lecture, Small group discussi on	Quizzes, Peer assessmen t	SAQ	Physiology
HomU G-PM I.5.29		Describe the pathophysiology of dysentery.	Explain how infections, particularly bacterial and parasitic, can lead to	C2	MK	Lecture, Small group discussi on	Tutorials, Assignme nts	LAQ, SAQ	Pathology

			inflammation of the intestines and the characteristic symptoms of dysentery.						
HomU G-PM I.5.30		Discuss the common causes of dysentery.	Explain how pathogens such as Shigella, Salmonella, and Entamoeba histolytica can cause dysentery.	C2	MK	Lecture, Small group discussi on	Case studies	SAQ	Pathology
HomU G-PM I.5.31		Identify the key symptoms and clinical features of dysentery.	Describe how symptoms such as bloody diarrhea, abdominal cramps, and tenesmus can help diagnose dysentery.	C2	MK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Clinical medicine
HomU G-PM I.5.32	НО	Discuss the role of homoeopathic remedies in the management of dysentery.	Explain how remedies such as Merc sol,	C2	MK	Lecture, Small group discussi on	Observati ons	MCQs, Short- answer questions	Homoeopathic Materia Medica

HomU G-PM I.5.33	K&S	Describe the importance of hydration and electrolyte management in the management of dysentery.	Explain how maintaining hydration and electrolyte balance is crucial in the treatment of dysentery.	C2	MK	Lecture, Small group discussi on	Tutorials, Assignme nts	LAQ, SAQ	Physiology
HomU G-PM I.5.34		Define unintentional weight loss and its significance.	Define unintentional weight loss as a decrease in body weight that occurs without purposeful dieting or exercise, often indicating an underlying health issue.	C1	MK	Lecture, Small group discussi on	Quizzes, Peer assessmen t	SAQ	Physiology
HomU G-PM I.5.35		Describe the pathophysiology of unintentional weight loss.	Explain how various factors, such as increased metabolism, reduced nutrient absorption, and chronic inflammation, can lead to unintentional weight loss.	C2	MK	Lecture, Small group discussi on	Tutorials, Assignme nts	LAQ, SAQ, MCQ	Physiology

HomU G-PM		Discuss the common causes	Explain how conditions such	C2	MK	Lecture, Small	Case studies	SAQ	Physiology, Pathology
I.5.36		of unintentional weight loss.	as cancer, gastrointestinal disorders, hyperthyroidis m, and depression can cause unintentional weight loss.			group discussi on			T uniotogy
HomU G-PM I.5.37		Identify the key symptoms and clinical features associated with unintentional weight loss.	Describe how symptoms such as fatigue, weakness, and changes in appetite can help diagnose unintentional weight loss.	C2	MK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Clinical medicine
HomU G-PM I.5.38	НО	Discuss the role of homoeopathic remedies in the management of unintentional weight loss.	Explain how remedies such as Calcareacarboni ca, Natrum muriaticum, and Phosphorus can be used to address underlying causes of unintentional weight loss.	C2	MK	Lecture, Small group discussi on	Assignme	MCQs, Short- answer questions	Homoeopathic Materia Medica

HomU G-PM I.5.39	K&S	Describe the importance of a comprehensive evaluation in the management of unintentional weight loss.	Explain how assessing medical history, conducting physical examinations, and performing diagnostic tests are essential in identifying the cause of unintentional weight loss.	C2	DK	Lecture, Small group discussi on	Tutorials, Assignme nts	LAQ, SAQ	Clinical medicine
HomU G-PM I.5.40		Describe the pathophysiology of gastrointestinal bleeding	Explain the mechanisms by which various conditions, such as peptic ulcers, esophageal varices, and inflammatory bowel disease, can lead to GI bleeding.	C2	MK	Lecture, Small group discussi on	Tutorials, Assignme nts	LAQ, SAQ	Pathology
HomU G-PM I.5.41		Discuss the risk factors associated with GI bleeding	Identify and explain the risk factors, such as NSAID use, alcohol consumption, and coagulopathy,	C2	MK	Lecture, Small group discussi on	Case studies	MCQs, Short- answer questions	Physiology, Pathology

			that can predispose individuals to GI bleeding.						
HomU G-PM I.5.42		Explain the clinical presentation of GI bleeding	Describe the signs and symptoms, such as hematemesis, melena, and hematochezia, that are indicative of GI bleeding.	C2	MK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Clinical medicine
HomU G-PM I.5.43	НО	Describe the common homoeopathic remedies used in the management of GI bleeding	Explain the indications for remedies such as Phosphorus, Hamamelis, and Ferrummetallic um in treating various causes of GI bleeding.	C2	MK	Lecture, Small group discussi on	Case studies	MCQs, Short- answer questions	Homoeopathic Tteria Medica
HomU G-PM I.5.44		Explain the concept of miasmatic prescribing in homeopathy	Describe how miasmatic factors are considered in chronic cases of GI bleeding for long-term management.	C2	DK	Lecture, Small group discussi on	Observati ons, Simulatio ns	SAQ	Organon

HomU	Define jaundice	Define jaundice	C1	MK	Lecture,	Quizzes,	SAQ	Physiology,
G-PM	and its clinical	as the yellow			Small	Peer		Pathology
I.5.45	significance	discoloration of			group	assessmen		
		the skin and			discussi	t		
		mucous			on			
		membranes due						
		to elevated						
		bilirubin levels						
		and explain its						
		importance in						
		clinical						
		diagnosis.						
HomU	Describe the	Explain the	C2	MK	Lecture,	Case	LAQ, SAQ	Physiology,
G-PM	pathophysiology	mechanisms of			Small	studies,		Surgery
I.5.46	of jaundice	hyperbilirubine			group	Role-		
		mia, including			discussi	playing		
		hemolysis,			on			
		hepatocellular						
		dysfunction,						
		and biliary						
		obstruction,						
		leading to						
		jaundice.						
HomU	Discuss the	Identify and	C2	MK	Lecture,	Problem-	MCQs,	Physiology,
G-PM	causes of	explain the			Small	based	Short-	Surgery
I.5.47	jaundice	various etiologies of iaundice,			group	learning	answer	
		of jaundice, including viral			discussi		questions	
		hepatitis,			on			
		alcoholic liver						
		disease, and						
		biliary tract						
		obstruction.						

HomU		Explain	the	Describe	the	C2	MK	Lecture,	Observati	MCQs,	Clinical
G-PM		clinical 1		signs	and			Small	ons,	Short-	medicine
I.5.48		of jaundic	e	symptoms	of			group	Simulatio	answer	
				3				discussi	ns	questions	
				as yellowin	_			on			
				the skin,							
				urine, and	-						
				stools, and							
				significanc	e in						
				diagnosis.							
HomU	НО	Describe	the	Explain	the	C2	MK	Lecture,	Case	MCQs,	Homoeopathic
G-PM		common		indications				Small	studies,	Short-	Tteria Medica
I.5.49		homoeopa			such			group	Role-	answer	
		remedies		as Chelidon	-			discussi	playing	questions	
		the mana	-	Lycopodiu				on			
		of jaundic	e		atrum						
				sulphuricui	m in						
				treating							
		- 2		jaundice.				_			
HomU	K&S	Define	ascites		scites	C1	MK	Lecture,	Quizzes,	SAQ	Anatomy,
G-PM			clinical	as the abno				Small	Peer		Physiology
I.5.50		significan	ce	accumulati				group	assessmen		
				fluid in	the			discussi	t		
				peritoneal				on			
				cavity and							
				importance	e in						
				clinical							
				diagnosis.							

HomU G-PM I.5.51	r	Describe the pathophysiology of ascites	Explain mechanisms fluid accumulation ascites, including po hypertension hypoalbumin ia, lymphatic obstruction.	n in ortal	C2	MK	Lecture, Small group discussi on	Case studies, Role- playing	LAQ, SAQ	Physiology, Pathology
HomU G-PM I.5.52		Discuss the causes of ascites	cirrhosis, h	the of iver leart and	C2	MK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Pathology
HomU G-PM I.5.53	c	Explain the clinical features of ascites	Describe signs symptoms ascites, such abdominal distension shifting	the and of a sand and	C2	MK	Lecture, Small group discussi on	Observati ons, Simulatio ns	LAQ, SAQ	Surgery, Clinical Medicne

HomU G-PM I.5.54	Differentiate between transudative and exudative ascites	Define transudative and exudative ascites and the pathophysiologi cal differences between them.	C1	MK	Lecture, Small group discussi on	Quizzes, Peer assessmen t	SAQ	Pathology
HomU G-PM I.5.55	Discuss the classification of ascites based on the underlying cause	Explain the categorization of ascites as cirrhotic, cardiac, malignant, and tuberculous based on the underlying disease process.	C2	MK	Lecture, Small group discussi on	#NAME?	MCQs, Short- answer questions	Pathology
HomU G-PM I.5.56	Describe the grading of ascites based on severity	Explain the use of imaging modalities, such as ultrasound, in grading ascites from mild to severe based on fluid accumulation.	C2	MK	Lecture, Small group discussi on	Problem- based learning	MCQs, Short- answer questions	Pathology, Surgery
HomU G-PM I.5.57	Explain the role of ascitic fluid analysis in diagnosis	Describe the use of ascitic fluid analysis, including cell count, albumin gradient, and	C2	MK	Lecture, Small group discussi on	Presentati ons, Group projects	SAQ	Physiology, Laboratory Medicine

			culture, in diagnosing the cause of ascites.						
HomU G-PM I.5.58	НО	Describe the common homoeopathic remedies used in the management of ascites	*	C2	MK	Lecture, Small group discussi on	Case studies,	MCQs, Short- answer questions	Homoeopathic Materia Medica

6.1.6. Renal and Urinary Tract Dysfunctions

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Asses	sment	Integration
	of	Level			Domai	ty	Metho	F	S	
	Compet				n/		ds			
	ency				Guilbe					
					rt's					
					Level					
HomU	K&S	K	Define the terms	Students should	C1	MK	Lecture	MCQ,	SAQ	Anatomy,
G-PM			"renal	be able to define			, Group	Written		Pathology
I.6.1			dysfunction" and	these terms and			discuss	test		
			"urinary tract	differentiate			ion			
			dysfunction"	between						
				dysfunction of						
				the kidneys and						
				the urinary tract						

HomU G-PM I.6.2		Identify the various causes of renal dysfunction	Students should be able to list the factors that can lead to dysfunction of the kidneys	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ	Medicine, Pathology
HomU G-PM I.6.3		Identify the various causes of urinary tract dysfunction	Students should be able to list the factors that can lead to dysfunction of the urinary tract	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ	Medicine, Pathology
HomU G-PM I.6.4	KH	Describe the underlying pathophysiology of renal dysfunction	Students should be able to describe the pathophysiologic al processes involved in renal dysfunction	C2	NK	Lecture , Group discuss ion	MCQ, Written test	SAQ	Physiology, Pathology
HomU G-PM I.6.5	K	Define the terms "cystitis" and "bladder pain syndrome"	Students should be able to define these terms and differentiate between them	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Pathology, Surgery
HomU G-PM I.6.6		Describe the symptoms and clinical presentation of cystitis/bladder pain syndrome	Students should be able to list the common symptoms associated with cystitis and bladder pain syndrome	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Surgery, Urology

HomU G-PM I.6.7		КН	Discuss the causes and risk factors associated with cystitis/bladder pain syndrome	Students should be able to discuss the various factors that can lead to the development of cystitis and bladder pain syndrome	C2	NK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Pathology, Urology
HomU G-PM I.6.8	НО		Describe the principles of homoeopathic management for cystitis/bladder pain syndrome	Students should be able to describe the basic principles of homoeopathic treatment for cystitis and bladder pain syndrome	C2	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomU G-PM I.6.9		SH	Demonstrate the process of selecting a homoeopathic remedy for cystitis/bladder pain syndrome based on the totality of symptoms	Students should be able to demonstrate how to select a homoeopathic remedy for a case of cystitis/bladder pain syndrome	P2	MK	Role- playing , Simulat ion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica

HomU G-PM I.6.10	K&S	K	Define the term "dysuria" and differentiate it from other urinary symptoms	Students should be able to define dysuria with its characteristic features	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology, Urology
HomU G-PM I.6.11			Describe the various causes of dysuria	Students should be able to list the factors that can lead to the development of dysuria	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Pathology, Urology
HomU G-PM I.6.12		KH	Explain the underlying pathophysiology of dysuria	Students should be able to explain the pathological processes that cause dysuria	C2	NK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology
HomU G-PM I.6.13			Discuss the clinical features and presentation of dysuria	Students should be able to describe the common symptoms and signs associated with dysuria	C2	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Surgery, Pathology
HomU G-PM I.6.14	НО		Explain the principles of homoeopathic management for dysuria	Students should be able to describe the basic principles of homoeopathic treatment for dysuria	C2	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica

HomU G-PM I.6.15			Demonstrate the process of selecting a homoeopathic remedy for dysuria based on the totality of symptoms	Students should be able to demonstrate how to select a homoeopathic remedy for a case of dysuria	P2	MK	Role- playing , Simulat ion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomU G-PM I.6.16	K&S	K	Define the term "azotemia" and explain its significance	Students should be able to 1.defineazotemia and 2. understand its clinical implications	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology, Nephrology
HomU G-PM I.6.17			Describe the various causes and mechanisms leading to the development of azotemia	Students should be able to list the factors that can lead to the development of azotemia	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Pathology, Nephrology
HomU G-PM I.6.18		КН	Explain the underlying pathophysiologic al processes involved in the development of azotemia	Students should be able to explain the pathological processes that lead to elevated blood urea nitrogen (BUN) and creatinine levels in azotemia	C2	NK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology, Nephrology

HomU			Discuss the	Students should	C2	MK	Lecture	MCQ,	SAQ,	Nephrology
G-PM			clinical	be able to			, Group	Written	MCQ	
I.6.19			presentation and	describe the			discuss	test		
			signs associated	common clinical			ion			
			with azotemia	manifestations of						
				azotemia	~~		_	1.00		- 1
HomU			Discuss the	Students should	C2	NK	Lecture	MCQ,	SAQ,	Laboratory
G-PM			diagnostic tests	be able to discuss			, Group	Written	MCQ	Medicine,
I.6.20			and procedures	the clinical			discuss	test		Nephrology
			used to evaluate	investigations			ion			
			and diagnose	used to evaluate						
			azotemia	azotemia						
HomU	НО		Explain the	Students should	C2	MK	Lecture	MCQ,	SAQ,	Homoeopathic
G-PM			principles of	be able to			, Group	Written	MCQ	Materia Medica
I.6.21			homoeopathic	describe the basic			discuss	test		
			management for	principles of			ion			
			azotemia	homoeopathic						
				treatment for						
				azotemia						
HomU			Demonstrate the	Students should	P2	MK	Role-	MCQ,	SAQ,	Homoeopathic
G-PM			process of	be able to			playing	Written	MCQ	Materia Medica
I.6.22			selecting a	demonstrate how			,	test		
			homoeopathic	to select a			Simulat			
			remedy for	homoeopathic			ion			
			azotemia based	remedy for a case						
			on the totality of	of azotemia						
			symptoms							
KHom		K	Define the terms	Students should	C1	MK	Lecture	MCQ,	SAQ,	Physiology
UG-			"fluid imbalance"	be able to define			, Group	Written	MCQ	
PM			and "electrolyte	these terms			discuss	test		
I.6.23			imbalance"				ion			

HomU G-PM I.6.24		Describe the various causes and factors contributing to fluid and electrolyte imbalances	Students should be able to list the factors that lead to the development of fluid and electrolyte imbalances	C1	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Medicine, Physiology
HomU G-PM I.6.25	КН	Explain the underlying pathophysiologic al processes involved in the development of fluid and electrolyte imbalances	Students should be able to explain the pathological mechanisms that lead to fluid and electrolyte imbalance	C2	NK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology
HomU G-PM I.6.26		Discuss the clinical signs and symptoms associated with fluid and electrolyte imbalances	Students should be able to describe the common clinical manifestations seen in patients with fluid and electrolyte imbalances	C2	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology
HomU G-PM I.6.27		Identify the various risk factors that predispose individuals to the development of	Students should be able to discuss the factors that influence the fluid and	C2	NK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology

		fluid and electrolyte	electrolyte imbalances						
HomU G-PM I.6.28	НО	imbalances Explain the principles of homoeopathic management for fluid and electrolyte imbalances	Students should be able to describe the basic principles of homoeopathic treatment for fluid and electrolyte imbalances	C2	MK	Lecture , Group discuss ion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomU G-PM I.6.29		Demonstrate the process of selecting a homoeopathic remedy for fluid and electrolyte imbalance based on symptoms	Students should be able to demonstrate how to select a homoeopathic remedy in case of	P2	MK	Role- playing , Simulat ion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomU G-PM I.6.30	K&S	Discuss the impact of lifestyle factors such as diet and fluid intake on fluid and electrolyte balance	Students should be able to discuss how lifestyle	C2	NK	Lecture , Group discuss ion	MCQ, Written test	LAQ, SAQ, MCQ	Nutrition, Lifestyle Medicine

6.1.7. Hematological alterations-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Asses	sment	Integration
	of Compet ency	Level			Domai n/ Guilbe rt's Level	y	Meth ods	F	S	
7.1a 7.1a 7.1a 7.1a	K&S	K	Define the terminologies used.	Students should be able to define following hematological alterations with their characterestics 1. Anemia, 2. Leukocytosis, 3. Leucopenia, 4. Bleeding diatheses	C1	MK	Lectur e, Group discus sion	Quiz, Written test	MCQ, SAQ	Physiology, Pathology
HomU G-PM I.7.2		КН	Identify the various risk factors that predispose individuals to the development of hematological alterations	Students should be able to discuss the factors that increase the likelihood of developing the above hematological alterations	C2	MK	Lectur e, Group discus sion	Quiz, Written test	MCQ, SAQ	Physiology, Pathology

HomU G-PM I.7.3	Explain the underlying pathophysiologic al processes involved in the development of hematological alterations	be able to explain the pathological mechanisms that lead to the	C2	MK	Lectur e, Group discus sion	Quiz, Assignme nts, Written test	MCQ, SAQ	Physiology, Pathology
7.3a 7.3a 7.3a 7.3a	anciations	1. Anemia, 2. Leukocytosis, 3. Leucopenia, 4. Bleeding diatheses						
HomU G-PM I.7.4	Discuss the common signs and symptoms associated with hematological alterations	Students should be able to	C2	MK	Lectur e, Group discus sion	Quiz, Assignme nts, Written test	MCQ, LAQ, SAQ	Pathology, Hematology
7.4a 7.4a 7.4a		 Anemia, Leukocytosis, Leucopenia, 						
7.4a		4. Bleeding diatheses						

HomU	Discuss the	Students should	C2	MK	Lectur	Quiz,	MCQ,	Pathology,
G-PM	diagnostic tests	be able to discuss			e,	Assignme	SAQ	Laboratory
I.7.5	and procedures	the various tests			Group	nts,		Medicine,
	used to evaluate	and procedures			discus	Written		Hematology
	and diagnose	used to evaluate			sion	test		
	hematological	hematological						
	alterations	disorders						
HomU	Explain the	Students should	C2	MK	Lectur	Quiz,	SAQ	Organon of
G-PM	principles of	be able to			e,	Assignme		Medicine
I.7.6	homoeopathic	describe the basic			Group	nts,		
	management for	principles of			discus	Written		
	hematological	homoeopathic			sion	test		
	alterations	treatment for						
		hematological						
		disorders						
HomU	Explain how	Students should	C2	MK	Lectur	Quiz,	SAQ	Organon,
G-PM	homoeopathic	be able to explain			e,	Assignme		Materia medica
I.7.7	remedies are	the process of			Group	nts,		
	selected for	selection			discus	Written		
	hematological	homoeopathic			sion	test		
	alterations	remedies for						
		hematological						
		alterations						
HomU SH	Demonstrate the	Students should	P2	MK	Group	Assignme	SAQ	Organon,
G-PM	process of	be able to			Discu	nts		Materia medica
I.7.8	selecting a	demonstrate how			ssion,			
	homoeopathic	to select a			Case			
	remedy for	homoeopathic			study			
	hematologicalalt	remedy for a case						
	erations based on	of hematological						
	symptoms	dysfunction						

6.1.8. Psychological symptoms-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Asses	sment	Integration
	of	Level			Domain	ty	Metho	F	S	
	Compet				/		ds			
	ency				Guilber					
					t's					
					Level					
HomU	K&S	K	Define the terms	1. Psychological	C1	MK	Lecture	Quiz,	SAQ	Psychiatry,
G-PM			"psychological	disorders are patterns			, Group	Written		Psychology
I.8.1			symptoms" and	of behavioral or			discuss	test		
			explain their	psychological			ion			
			relevance	symptoms that						
				impact multiple areas						
				of life. 2. These						
				disorders create						
				distress for the person						
				experiencing the						
				symptoms.						
				3. They can be						
				temporary or						
				lifelong, and affect						
				how you think, feel,						
				and behave						
HomU			Define the term	Define fatigue and its	C1	MK	Lecture	Quiz,	SAQ	Physiology,
G-PM			"fatigue" and	significance			, Group	Written		Medicine
I.8.2			explain its				discuss	test		
	_		relevance				ion			
HomU			Describe the	List the factors that	C1	MK	Lecture	Quiz,	SAQ	Physiology,
G-PM			various factors	can contribute to the			, Group	Written		Medicine
I.8.3			and conditions	onset of fatigue			discuss	test		
			that can lead to				ion			
			fatigue							

HomU G-PM I.8.4	КН	Explain the underlying physiological processes involved in the development of fatigue	Explain the physiological mechanisms that underlie the manifestation of fatigue	C2	NK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Physiology, Medicine
HomU G-PM I.8.5	K	Define the term "asthenia"	Define asthenia and its significance	C1	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Physiology, Medicine
HomU G-PM I.8.6		Describe the various factors and conditions that can lead to asthenia	List the factors that can contribute to the onset of asthenia	C2	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Physiology, Medicine
HomU G-PM I.8.7	KH	Explain the underlying physiological processes involved in the development of asthenia	Explain the physiological mechanisms that underlie the manifestation asthenia	C2	NK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Physiology, Medicine
HomU G-PM I.8.8	K	Define the term "anxiety"	Define anxiety and its significance	C1	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.9		Describe the various factors and conditions that can lead to anxiety	List the factors that can contribute to the onset of anxiety	C2	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology

HomU G-PM I.8.10	КН	Explain the underlying physiological processes involved in the development of anxiety	Explain the physiological mechanisms that underlie the manifestation anxiety	C2	NK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Physiology, Psyc
HomU G-PM I.8.11	K	Define the term "sadness"	Define sadness and its significance	C1	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.12	KH	Describe the various factors and conditions that can lead to sadness	List the factors that can contribute to the onset of sadness	C2	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.13	K	Define the term "disorders of thought" and explain its relevance	Define disorders of thought and understand their significance	C1	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.14	КН	Describe the various factors and conditions that can lead to disorders of thought	List the factors that can contribute to the onset of disorders of thought	C2	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.15	K	Define the term "disorders of perception" and explain its relevance	Define disorders of perception and their significance	C1	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology

HomU G-PM I.8.16	КН	Describe the various factors and conditions that can lead to disorders of perception	List he factors that can contribute to the onset of disorders of perception	C2	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.17	K	Define the term "sleep disorders" and explain its relevance	Define sleep disorders.	C1	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.18	КН	Describe the various factors and conditions that can lead to sleep disorders	List the factors that can contribute to the onset of sleep disorders	C2	MK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomU G-PM I.8.19		Explain the underlying physiological processes involved in the development of sleep disorders	Explain the physiological mechanisms that underlie the manifestation sleep disorders	C2	NK	Lecture , Group discuss ion	Quiz, Written test	SAQ	Physiology, Psychiatry

6.2. Competency tables for immunity and susceptibility – general considerations 6.2.1. Introduction and primary & secondary immunodeficiency states-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Assessment		Integration
	of Compete ncy	Level			Domain/ Guilbert's Level	y	Meth ods	F	S	
HomU G-PM I.9.1	K&S	K	Explanation of primary and secondary immunodeficien cy states	Understanding the difference between primary and secondary immunodeficien cy	C1	MK	Lectur e, Discu ssion	Quizzes, Written test	SAQ	Physiology, Pathology, Microbiology
HomU G-PM I.9.2			Overview of common genetic and acquired causes	Recognition of common primary immunodeficien cy disorders	C2	MK	Case studie s, Group work	Quizzes, Written test	MCQ, SAQ	Pathology, Microbiology
HomU G-PM I.9.3		КН	Description of clinical signs and symptoms	Identification of clinical features suggestive of immunodeficien cy	C2	MK	Group Discu ssiion, Assig nment s	Quizzes, Written test, Tutorials	MCQ, SAQ	Pathology, Microbiology
HomU G-PM I.9.4			Description of therapeutic interventions and preventive measures	Demonstration of appropriate management plans for immunodeficien cy disorders	C3	DK	Debat es	Tutorials	SAQ	Pathology, Microbiology

6.2.2. Hypersensitivity reactions: I,II,III,IV-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Asses	sment	Integration
	of Compete ncy	Level			Domain/ Guilbert's Level	y	Meth ods	F	S	
HomU G-PM I.10.1	K&S	K	Explanation of hypersensitivity reaction types	Understanding the classification and mechanisms of hypersensitivit y reactions	C1	MK	Lectur e, Discu ssion	MCQ	SAQ	Pathology, Microbiology
01a				Type I hypersensitivit y reactions						
01b				Type II hypersensitivit y reactions						
01c				Type III hypersensitivit y reactions						
01d				Type IV hypersensitivit y reactions						
HomU G-PM I.10.2			Overview of common allergens and mediators such as IgE, histamine, and cytokines	Recognition of allergens and mediators associated with type I hypersensitivit	C2	MK	Group discus sion	Assignme nts, MCQ	SAQ	Pathology, Microbiology

HomU G-PM I.10.3	KH	Explanation of IgE-mediated mast cell degranulation	Understanding the sequence of events leading to type I hypersensitivit y reactions	C2	NK	Lectur e, Group Discu ssion	Assignme nts, MCQ	SAQ	Physiology, Pathology
HomU G-PM I.10.4		Description of allergic rhinitis, asthma, anaphylaxis, and atopic dermatitis	Identification of clinical features suggestive of type I hypersensitivit y	C2	MK	Lectur es, Group discus sion	MCQ	SAQ, Bedside examinati on	Physiology, Pathology, Clinical medicine
HomU G-PM I.10.5		Explanation of skin prick tests and serum IgE assays	Application of diagnostic strategies for type I hypersensitivit y assessment	C2	DK	Debat es	Tutorials	SAQ	Physiology, Pathology, Clinical medicine
HomU G-PM I.10.6	K	Overview of common antigens and antibodies such as blood group antigens and autoantibodies	Identify common antigens and antibodies involved in type II hypersensitivit y reactions	C1	MK	Lectur	Assignme nts, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomU G-PM I.10.7	КН	Explanation of antibody-mediated cell destruction and complement activation	Understanding the sequence of events leading to type II hypersensitivity reactions	C2	MK	Lectur e	Assignme nts, MCQ	SAQ	Physiology, Pathology

HomU G-PM I.10.8		Description of autoimmune hemolytic anemia, Goodpasture syndrome, and hemolytic disease of the newborn	Identification of clinical features suggestive of type II hypersensitivit y	C2	MK	Lectur e, case based learni ng	Assignme nts, MCQ	SAQ, Viva voce	Pathology, clinical medicine
HomU G-PM I.10.9		Explanation of direct and indirect Coombs tests	Application of diagnostic strategies for type II hypersensitivit y assessment	C2	DK	Debat es	Tutorials	SAQ, Viva voce	Physiology, pathology
HomU G-PM I.10.10	K	Overview of common antigens and antibodies such as immune complexes and autoantibodies	Identify common antigens and antibodies involved in type III hypersensitivit y reactions	C1	MK	Lectur e	Assignme nts, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomU G-PM I.10.11	КН	Explanation of immune complex deposition and complement activation	Understanding the sequence of events leading to type III hypersensitivit y reactions	C2	MK	Lectur e	Assignme nts, MCQ	SAQ	Physiology, Pathology

HomU G-PM I.10.12		Description of serum sickness, Arthus reaction, and systemic lupus erythematosus	Identification of clinical features suggestive of type III hypersensitivit y	C2	MK	Lectur e, case based learni ng	Assignme nts, MCQ	SAQ, Viva voce	Pathology, clinical medicine
HomU G-PM I.10.13		Explanation of laboratory tests such as complement levels and immunofluoresc ence	Application of diagnostic strategies for type III hypersensitivit y assessment	C2	DK	Debat es	Tutorials	SAQ, Viva voce	Physiology, pathology
HomU G-PM I.10.14	K	Overview of common antigens and cells such as haptens and T cells	Identify common antigens and cells involved in type IV hypersensitivit y reactions	C1	MK	Lectur	Assignme nts, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomU G-PM I.10.15	КН	Explanation of T cell-mediated inflammation and cytokine release	7	C2	MK	Lectur e	Assignme nts, MCQ	SAQ	Physiology, Pathology
HomU G-PM I.10.16		Description of contact dermatitis, tuberculin reaction, and	Identification of clinical features suggestive of type IV	C2	MK	Lectur e, case based	Assignme nts, MCQ	SAQ, Viva voce	Pathology, clinical medicine

		autoimmune	hypersensitivit			learni			
		diseases	у			ng			
HomU		Explanation of	Application of	C2	DK	Debat	Tutorials	SAQ,	Physiology,
G-PM		patch testing and	diagnostic			es		Viva voce	pathology
I.10.17		lymphocyte	strategies for						
		proliferation	type IV						
		assays	hypersensitivit						
			y assessment						

6.2.3. Autoimmune Diseases-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Assess	sment	Integration
	of Compete ncy	Level			Domai n/ Guilbe rt's	y	Method s	F	S	
					Level					
HomU G-PM I.11.1	K&S	K	Explanation of autoimmune disease etiology and pathogenesis	Understandin g the basics of autoimmune diseases and their mechanisms	C1	MK	Lecture, Discuss ion	MCQ	SAQ	Pathology, Microbiology
HomU G-PM I.11.2			Overview of common autoimmune disorders such as rheumatoid arthritis, systemic lupus erythematosus, and multiple sclerosis	Recognition of autoimmune diseases and their clinical presentations	C1	MK	Lecture, Discuss ion	Assignme nts, MCQ	SAQ, Viva voce	Pathology, Microbiology, Clinical medicine

HomU	KH	Explanation	of	Understandin	C2	MK	Proble	Tutorials,	SAQ,	Physiology,
G-PM		immune		g the			m-	MCQ	Viva voce	pathology
I.11.3		dysregulation	in	involvement			based			
		autoimmune		of			learning			
		disorders		autoantibodie						
				s and T cells						
				in						
				autoimmune						
				pathophysiol						
				ogy						
HomU		Description	of	Identification	C2	MK	Lecture,	Tutorials,	SAQ,	Pathology,
G-PM		systemic		of systemic			Discuss	MCQ	Viva voce	Clinical
I.11.4		symptoms a	and	and organ-			ion			medicine
		organ		specific						
		involvement	in	manifestation						
		autoimmune		s of						
		disorders		autoimmune						
				diseases						

6.2.4. HIV Disease-

Sl. No.	Domain	Millers	Content	SLO	Bloo	Priorit	T-L	Assess	sment	Integration
	of	Level			ms	y	Method	F	S	
	Compete				Doma		S			
	ncy				in/					
					Guilb					
					ert's					
					Level					
HomU	K&S	K	Explanation of	Understanding the	C1	MK	Lecture,	MCQ	SAQ	Pathology,
G-PM			HIV virus and its	basics of HIV/AIDS and its			Group			Microbiology
I.12.1			transmission	causative agent			Discuss			
							ion			

HomU G-PM		Overview of HIV	Identify common risk	C1	MK	Lecture, Group	Assignmen ts, MCQ	SAQ, Viva voce	Pathology, Microbiology
I.12.2		transmission routes such as sexual contact, blood exposure, and vertical transmission	factors and modes of transmission for HIV infection			Discuss ion	is, MCQ	viva voce	, PSM
HomU G-PM I.12.3	KH	Explanation of HIV progression from acute infection to AIDS	Understanding the stages and clinical course of HIV disease	C2	MK	Lecture s, case based learning	Tutorials, Assignmen ts, MCQ	SAQ, Viva voce	Clinical medicine
HomU G-PM I.12.4		Description of HIV-related symptoms and AIDS-defining illnesses	Identification of clinical features suggestive of HIV infection and AIDS	C2	MK	Worksh ops, Case- based learning	Assignmen ts, MCQ	SAQ, Viva voce	Clinical medicine
HomU G-PM I.12.5		Explanation of HIV replication and immune depletion	Understand the pathophysiolog y of HIV infection and its effects on the immune system	C2	DK	Lecture s, Group Discuss ion	Assignmen ts, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomU G-PM I.12.6	SH	Description of HIV prevention methods and harm reduction approaches	Demonstration of appropriate prevention strategies for HIV infection	P2	DK	Seminar s	Tutorials, Assignmen ts, MCQ	SAQ, Viva voce	Community outreach programs on HIV prevention

6.2.5. Transplants and graft rejection-

Sl. No	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Assess	sment	Integration
	of Compete ncy	Level			Domain / Guilber t's Level	y	Metho ds	F	S	
HomU G-PM I.13.1	K&S	K	Explanation of transplantation and immune response against grafts	Understandin g the basics of transplantatio n and graft rejection	C1	MK	Lectur e, Group Discus sion	MCQ	SAQ	Pathology, Microbiology
HomU G-PM I.13.2			Overview of different types of transplants and their sources	Recognition of various transplantatio n methods and their differences	C1	MK	Lectur e, Group Discus sion	Assignmen ts, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomU G-PM I.13.3		KH	Explanation of the alloimmune response and mechanisms of graft rejection	Understandin g the immune- mediated rejection process	C2	MK	Lectur es, case based learnin g	Tutorials, Assignmen ts, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomU G-PM I.13.4			Description of acute and chronic rejection symptoms	Identification of clinical features suggestive of graft rejection	C2	MK	Works hops, Case- based learnin g	Assignmen ts, MCQ	SAQ, Viva voce	Pathology, Microbiology

6.2.6. Homoeopathic relation of immunity and susceptibility-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Assess	sment	Integration
	of Compete ncy	Level			Domain/ Guilbert 's Level	y	Meth ods	F	S	
HomU G-PM I.14.1	K&S	K	Overview of factors such as genetic predisposition, miasmatic influence, and constitutional characteristics	Recognition of factors influencing individual's susceptibility according to homeopathic principles	C2	MK	Lectur e, Group Discus sion	Case presentatio ns, MCQ	SAQ, Viva voce	Organon and Hom. Philosophy
HomU G-PM I.14.3		КН	Description of the individualized approach in homeopathy	Identification of the importance of individualizat ion in homeopathic treatment based on susceptibility	C2	MK	Lectur es, Case- based learni ng	Quiz competitio ns, Tutorials	SAQ, Bedside examinati on	Organon and Hom. Philosophy
HomU G-PM I.14.4			Explanation of homeopathic remedies and constitutional treatment for improving vitality	Explain the role of homeopathic treatment strategies in enhancing immunity	C2	DK	Proble m-solvin g scenar ios, Group discus sions	Case presentatio n, Guided discussion s	Viva voce	Organon and Hom. Philosophy

HomU		Description of	Discuss the	C2	DK	Group	Tutorials,		Organon and
G-PM		the principle of	concept of the			Discus	Assignmen		Hom.
I.14.5		similars and its	similimum in			sions	ts		Philosophy
		role in	homeopathy						
		strengthening	and its						
		immunity	relation to						
			immunity and						
			susceptibility						
HomU	SH	Analysis of	Evaluation of	P1	DK	Patien		Objective	Organon and
G-PM		patient	the			t		Structured	Hom.
I.14.6		outcomes and	effectiveness			encou		Clinical	Philosophy
		changes in	of			nters -		Examinati	
		susceptibility	homeopathic			OPD		on	
		following	interventions					(OSCE)	
		homeopathic	on immunity						
		treatment	_						

6.3. Competency tables for medical genetics – an introduction **6.3.1.** Introduction-

Sl. No.	Domain of	Miller	Content	SLO	Blooms	Priorit	T-L	Assessme	ent	Integration
	Competenc	s Level			Domain/ Guilbert'	y	Methods	F	S	
	y				s Level					
HomUG -PM	K&S	K	Explanation of medical	Understanding the definition	C1	MK	Lecture, Discussion	MCQ	SAQ	Physiology, Biochemistry
I.15.1			genetics and its scope	and scope of medical						,
HomUG -PM I.15.2			Overview of Mendelian principles,	genetics Identify the basic principles of inheritance	C2	MK	Lecture, Discussion	MCQ, Assignemnts	Viva voce	Physiology, Pathology
			non- Mendelian inheritance, and genetic variation	inneritance						
HomUG -PM I.15.3		KH	Explanation of DNA structure, gene expression, and regulation	Describe the structure and function of DNA and genes	C2	MK	Problem- based learning	Assignments , MCQ	SAQ ,	Physiology, Biochemistry

HomUG		Description	Describe the	C2	MK	Interactive	MCQ,	SAQ	Pathology,
-PM		of	patterns of			workshops	Assignments		Clinical
I.15.4		inheritance	inheritance			, Case-	Č		medicine
		patterns	and genetic			based			
		(autosomal	disorders			learning			
		dominant,							
		autosomal							
		recessive, X-							
		linked, etc.)							
		and common							
		genetic							
		disorders							
HomUG		Explanation	Application of	C3	DK	Problem-	Tutorials,	SAQ	Biochemistry
-PM		of genetic	genetic			solving	MCQ	,	, Clinical
I.15.5		testing	counseling			scenarios,		Viva	Medicine
		methods,	principles			Group		voce	
		indications,				Discussion			
		and							
		implications							
HomUG	Shows	Description	Demonstratio	P1	DK	Seminars	Tutorials,		Clinical
-PM	how	of ELSI	n of				Assignments		Medicine,
I.15.6		(ethical,	understanding						PSM
		legal, and	ELSI						
		social	principles						
		implications							
) issues in							
		clinical							
		practice							

6.3.2. Cytogenetics-

Sl. No.	Domain of	Millers Level	Content	SLO	Blooms Domain/	Priority	T-L Methods	Assessn	nent	Integratio n
	Compete ncy				Guilbert 's Level			F	S	
HomU G-PM I.16.1	K&S	K	Explanation of cytogenetics and its role in studying chromosome s and their abnormalitie s	Understanding the definition and scope of cytogenetics	C1	MK	Lecture, Discussion	MCQ	SAQ	Pathology
HomU G-PM I.16.2			Overview of chromosome structure, function, and organization	basic structure and function	C1	MK	Lecture, Discussion	MCQ, Assignemnt s	Viva voce	Biochemist ry, pathology
HomU G-PM I.16.3		КН	Explanation of cytogenetic techniques such as karyotyping, FISH, and chromosoma 1 microarray	Understanding the principles and applications of cytogenetic methods	C2	MK	Lecture, Assgnments	Assignment s, MCQ	SAQ,	Pathology

HomU	Description	Identification	C2	MK	Workshops,	MCQ,	SAQ	Pathology
G-PM	of different	and			Case-based	Assignment		
I.16.4	types of	categorization			learning	s		
	chromosoma	of			_			
	1	chromosomal						
	abnormalitie	abnormalities						
	s (numerical							
	and							
	structural)							
	and their							
	subtypes							
	(e.g.,							
	trisomy,							
	translocation							
	, deletion)							
HomU	Explanation	Recognize	C2	MK	Interactive	Tutorials,	SAQ,	Physiology
G-PM	of	patterns of			workshops,	MCQ	Viva	,
I.16.5	inheritance	inheritance for			Case-based		voce	Biochemist
	patterns for				learning			ry,
	chromosoma	abnormalities						pathology
	1							
	abnormalitie							
	s (e.g.,							
	autosomal							
	dominant,							
	autosomal							
	recessive, X-							
	linked)							

6.3.3. Down's Syndrome-

Sl. No.	Domain of	Millers Level	Content	SLO	Blooms Domain/	Priority	T-L Methods	Assessment		Integratio n
	Compete ncy				Guilbert 's Level			F	S	
HomU G-PM I.17.1	K&S	K	Explanation of Down's Syndrome, its causes, and characteristics	Understandi ng the definition and basic features of Down's Syndrome	C1	MK	Lecture, Discussion	Quizzes, Class participatio n	SAQ	Pathology
HomU G-PM I.17.2		KH	Overview of trisomy 21 and the genetic mechanisms leading to Down's Syndrome	Describe the genetic basis of Down's Syndrome	C2	MK	Lecture, Discussion	MCQ, Assignemnt s	SAQ, Viva voce	Pathology
HomU G-PM I.17.3		Knows	Description of physical characteristics , developmental delays, and medical issues associated with Down's Syndrome	Identificatio n of clinical features suggestive of Down's Syndrome	C3	MK	Lecture, Assgnments	Assignment s, MCQ	SAQ, MCQ	Pathology, Paediatrics

HomU	Knows	Explanation of	Application	C4	DK	Workshops	MCQ,	SAQ	Pathology,
G-PM	how	prevalence,	of				Assignment		ObG, PSM,
I.17.4		risk factors,	knowledge				S		Paediatrics
		and screening	regarding						
		methods for	Down's						
		Down's	Syndrome						
		Syndrome	epidemiolog						
			y and risk						
			assessment						
HomU	Shows	Description of	Discuss the	C5	DK	Interactive	Tutorials,	SAQ,	Paediatrics
G-PM	how	medical	medical and			workshops,	MCQ	Viva	
I.17.5		interventions,	developmen			Case-based		voce	
		therapies, and	tal			learning			
		support	managemen						
		services for	t of						
		individuals	individuals						
		with Down's	with Down's						
		Syndrome	Syndrome						

6.3.4. Turner's Syndrome-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priority	T-L	Assessn	nent	Integratio
	of	Level			Domain/		Methods			n
	Compete				Guilbert			F	S	
	ncy				's Level					
HomU	K&S	K	Explanation of	Understandi	C1	MK	Lecture,	Quizzes,	SAQ	Pathology
G-PM			Turner's	ng the			Discussion	Class		
I.18.1			Syndrome, its	definition				participatio		
			causes, and	and basic				n		
			characteristics	features of						
				Turner's						
				Syndrome						

HomU	KH	Overview of	Describe the	C2	MK	Lecture,	MCQ,	SAQ,	Pathology
G-PM		monosomy X	genetic			Discussion	Assignemnt	Viva	
I.18.2		and the	basis of				s	voce	
		genetic	Turner's						
		mechanisms	Syndrome						
		leading to							
		Turner's							
		Syndrome							
HomU		Description of	Identificatio	C3	MK	Lecture,	Assignment	SAQ,	Pathology,
G-PM		physical	n of clinical			Assgnments	s, MCQ	MCQ	Paediatrics
I.18.3		characteristics	features				_		
		,	suggestive						
		developmental	of Turner's						
		issues, and	Syndrome						
		medical							
		conditions							
		associated							
		with Turner's							
		Syndrome							
HomU		Explanation of	Understand	C4	DK	Workshops	MCQ,	SAQ	Pathology,
G-PM		prevalence,	the				Assignment		ObG, PSM,
I.18.4		risk factors,	epidemiolog				s		Paediatrics
		and screening	y and risk						
		methods for	factors for						
		Turner's	Turner's						
		Syndrome	Syndrome						
HomU		Description of	Discuss the	C5	DK	Interactive	Tutorials,	SAQ,	Paediatrics
G-PM		medical	medical and			workshops,	MCQ	Viva	
I.18.5		interventions,	developmen			Case-based		voce	
		hormone	tal			learning			
		therapy, and	managemen						
		support	t of						

services	or individuals
individuals	with
with Turn	r's Turner's
Syndrome	Syndrome

6.3.5. Klinefelter's Syndrome-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priority	T-L	Ass	essment	Integratio
	of	Level			Domain/		Methods			n
	Compete				Guilbert			\mathbf{F}	S	
	ncy				's Level					
HomU	K&S	K	Explanation of	Understandin	C1	MK	Lecture,	Quizzes	SAQ	Pathology
G-PM			Klinefelter's	g the			Discussion	, Class		
I.19.1			Syndrome, its	definition and				particip		
			causes, and	basic features				ation		
			characteristics	of						
				Klinefelter's						
				Syndrome						
HomU		KH	Overview of	Describe the	C2	MK	Lecture,	MCQ,	SAQ, Viva	Pathology
G-PM			aneuploidy (47,	genetic basis			Discussion	Assigne	voce	
I.19.2			XXY) and the	of				mnts		
			genetic	Klinefelter's						
			mechanisms	Syndrome						
			leading to							
			Klinefelter's							
			Syndrome							

HomU	Description o	f Identification	C3	MK	Lecture,	Assign	SAQ, MCQ	Pathology
G-PM	physical	of clinical			Assgnments	ments,		,
I.19.3	characteristics,	features			_	MCQ		Paediatric
	developmental	suggestive of						S
	issues, and	l Klinefelter's						
	medical	Syndrome						
	conditions							
	associated with	ı						
	Klinefelter's							
	Syndrome							
HomU	Explanation o	f Understand	C4	DK	Workshops	MCQ,	SAQ	Pathology
G-PM	prevalence, ris	the				Assign		, ObG,
I.19.4	factors, and	l epidemiology				ments		PSM,
	screening	and risk						Paediatric
	methods fo	r factors for						S
	Klinefelter's	Klinefelter's						
	Syndrome	Syndrome						
HomU	Description o	f Discuss the	C5	DK	Interactive	Tutorial	SAQ, Viva	Paediatric
G-PM	medical	medical and			workshops,	s, MCQ	voce	S
I.19.5	interventions,	development			Case-based			
	hormone	al			learning			
	therapy, and	l management						
	support service	of individuals						
	for individual	with						
	with	Klinefelter's						
	Klinefelter's	Syndrome						
	Syndrome							

6.3.6. Cystic Fibrosis-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Asse	essment	Integration
	of Compete ncy	Level			Domain/ Guilbert' s Level	y	Methods	F	S	
HomU G-PM I.20.1	K&S	K	Explanation of CF, its causes, and characteristics	Understandin g the definition and basic features of CF	C1	MK	Lecture, Discussion	Quizzes , Class particip ation	SAQ	Pathology
HomU G-PM I.20.2			Overview of mutations in the CFTR gene and their effects on chloride transport	Describe the genetic basis of CF	C1	MK	Lecture, Discussion	MCQ, Assigne mnts	SAQ, Viva voce	Pathology
HomU G-PM I.20.3		KH	Description of respiratory, digestive, and other symptoms associated with CF	Identification of clinical features suggestive of CF	C2	MK	Lecture, Assgnments	Assign ments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomU G-PM I.20.4			Explanation of the mechanisms leading to mucus buildup and organ damage in CF	Understandin g the pathophysiolo gical processes underlying CF	C2	MK	Workshops	MCQ, Assign ments	SAQ	Pathology, ObG, PSM, Paediatrics

HomU	Description of	Discuss the	C2	DK	Interactive	Tutorial	SAQ, Viva	Paediatrics
G-PM	treatment	medical			workshops,	s, MCQ	voce	
I.20.5	modalities	management			Case-based			
	including	of CF			learning			
	airway							
	clearance							
	techniques,							
	medications,							
	and nutritional							
	support							

6.3.7. Huntington's disease-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priori	T-L	Asse	essment	Integration
	of	Level			Domain/	ty	Methods	F	S	
	Compete				Guilbert's					
	ncy				Level					
HomU	K&S	K	Explanation	Understandin	C1	MK	Lecture,	Quizze	SAQ	Pathology
G-PM			of HD, its	g the			Discussion	s, Class		
I.21.1			causes, and	definition and				particip		
			characteristi	basic features				ation		
			cs	of HD						
HomU			Overview of	Describe the	C1	MK	Lecture,	MCQ,	SAQ,	Pathology
G-PM			the mutation	genetic basis			Discussion	Assign	Viva voce	
I.21.2			in the HTT	of HD				emnts		
			gene and its							
			inheritance							
			pattern							

HomU	KH	Description	Identification	C2	MK	Lecture,	Assign	SAQ,	Pathology,
G-PM		of motor,	of clinical			Assgnments	ments,	MCQ	Paediatrics
I.21.3		cognitive,	features				MCQ		
		and	suggestive of						
		psychiatric	HD						
		symptoms							
		associated							
		with HD							
HomU		Explanation	Understandin	C2	MK	Workshops	MCQ,	SAQ	Pathology,
G-PM		of the	g the				Assign		ObG, PSM,
I.21.4		mechanisms	physiological				ments		Paediatrics
		leading to	processes						
		neuronal	underlying						
		dysfunction	HD						
		and							
		degeneration							
		in HD							
HomU		Explanation	Explain the	C2	DK	Workshop,	Tutoria		Psychology,
G-PM		of genetic	importance of			Seminar	ls,		PSM
I.21.5		counseling	genetic				assign		
		services,	counseling				ment		
		predictive	and testing in						
		testing, and	HD						
		family							
		planning							
		options for							
		HD							

6.3.8. Marfan's syndrome-

Sl. No.	Domain	Millers	Content	SLO	Blooms	Priorit	T-L	Assessn	ient	Integration
	of Compete ncy	Level			Domain/ Guilbert 's Level	y	Methods	F	S	
HomU G-PM I.22.1	K&S	K	Explanation of Marfan Syndrome, its causes, and characteristics	Understanding the definition and basic features of Marfan Syndrome	C1	MK	Lecture, Discussio n	Quizzes, Class participati on	SAQ	Pathology
HomU G-PM I.22.2			Overview of mutations in the FBN1 gene and their effects on connective tissue	Describe the genetic basis of Marfan Syndrome	C1	MK	Lecture, Discussio n	MCQ, Assignem nts	SAQ, Viva voce	Pathology
HomU G-PM I.22.3		KH	Description of skeletal, cardiovascular, and ocular manifestations associated with Marfan Syndrome	Identification of clinical features suggestive of Marfan Syndrome	C2	MK	Lecture, Assgnmen ts	Assignme nts, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomU G-PM I.22.4			Explanation of the mechanisms leading to connective tissue abnormalities and organ dysfunction in Marfan Syndrome	Understanding the pathophysiolo gical processes underlying Marfan Syndrome	C2	MK	Workshop s	MCQ, Assignme nts	SAQ	Pathology, ObG, PSM, Paediatrics

HomU	Description of	Discuss the	C2	DK	Interactive	Tutorials,	SAQ,	Paediatrics
G-PM	treatments	medical			workshops	MCQ	Viva	
I.22.5	including	management			, Case-		voce	
	medications,	of Marfan			based			
	surgery, and	Syndrome			learning			
	lifestyle							
	modifications for							
	managing Marfan							
	Syndrome							
	symptoms							
HomU	Explanation of	Explain the	C2	DK	Workshop	Tutorials,		Psychology,
G-PM	genetic counseling	importance of			, Seminar	assignme		PSM
I.22.6	services, family	genetic				nts		
	screening, and	counseling						
	prenatal testing for	and screening						
	Marfan Syndrome	in Marfan						
		Syndrome						

6.3.9. Polycystic kidney disease-

Sl. No.	Compete	Millers	Content	SLO	Blooms	Priorit	T-L	Assessment		Integration
	ncy	Level:			Domain	\mathbf{y}	Methods	F	S	
					/					
					Guilber					
					t's Level					
HomU	K&S	K	Explanation of	Understanding	C1	MK	Lecture,	Quizzes,	SAQ	Pathology
G-PM			PKD, its causes,	the definition			Discussio	Class		
I.23.1			and	and basic			n	participatio		
			characteristics	features of				n		
				PKD						

HomU G-PM I.23.2		Overview of mutations in the PKD1 and PKD2 genes and their effects on kidney development	Describe the genetic basis of PKD		MK	Lecture, Discussio n	MCQ, Assignemn ts	SAQ , Viva voce	Pathology
HomU G-PM I.23.3	KH	Description of renal and extrarenal manifestations associated with PKD	of clinical features suggestive of PKD	C2	MK	Lecture, Assgnmen ts	Assignmen ts, MCQ	SAQ , MC Q	Pathology, Paediatrics
HomU G-PM I.23.4		Explanation of the mechanisms leading to cyst formation, kidney enlargement, and renal dysfunction in PKD	the physiological processes underlying	C2	MK	Workshop s	MCQ, Assignmen ts	SAQ	Pathology, ObG, PSM, Paediatrics
HomU G-PM I.23.5		Description of treatments including blood pressure control, pain management, and dialysis/transplan tation for managing PKD complications	medical	C2	DK	Interactive workshops , Case- based learning	Tutorials, MCQ	SAQ , Viva voce	Paediatrics

HomU	Explanation of	Explain the	C2	DK	Workshop	Tutorials,	Psychology,
G-PM	genetic	importance of			, Seminar	assignment	PSM
I.23.6	counseling	genetic				S	
	services, family	counseling and					
	screening, and	screening in					
	prenatal testing	PKD					
	for PKD						

6.3.10. Neoplasia-

Sl. No.	Domain	Millers	Content		SLO	Blooms	Priorit	T-L	Assessn	nent	Integration
	of Compete ncy	Level				Domai n/ Guilber	y	Methods	F	S	
						t's Level					
HomU G-PM I.24.1	K&S	K	Explanation neoplasia, definition, characteristics	of its and	Understanding the definition and basic features of neoplasia	C1	MK	Lecture, Discussio n	Quizzes, Class participati on	SAQ	Pathology
HomU G-PM I.24.2			Overview benign malignant neoplasms, including carcinomas, sarcomas, hematologic malignancies	of and	Recognition of different types of neoplasms based on histological and molecular characteristics	C1	MK	Lecture, Discussio n	MCQ, Assignem nts	SAQ, Viva voce	Pathology

HomU G-PM I.24.3	КН	Description of the multistep process of carcinogenesis, including initiation, promotion, and progression	Understanding the molecular and cellular events leading to the development of cancer	C2	MK	Lecture, Assgnmen ts	Assignme nts, MCQ	SAQ, MCQ	Pathology
HomU G-PM I.24.4		Identification of environmental, genetic, and lifestyle factors contributing to cancer risk	Recognition of modifiable and non-modifiable risk factors for cancer	C2	MK	Workshop s	MCQ, Assignme nts	SAQ	PSM, Clinical medicine
HomU G-PM I.24.5		Description of screening tests and preventive measures for various types of cancer	Discuss the principles of cancer screening prevention	C2	DK	Interactive workshops , Case- based learning	Tutorials, MCQ	SAQ, Viva voce	PSM, Clinical medicine
HomU G-PM I.24.6		Description of common signs and symptoms associated with cancer, including pain, weight loss, and fatigue	Identification of clinical features suggestive of cancer	C2	MK	Interactive workshops , Case- based learning	Tutorials, MCQ	SAQ, Viva voce	Clinical medicine

HomU	Explanation of	Discuss	the	C2	DK	Assignme	Tutorials,	SAQ,	Clinical
G-PM	diagnostic tests	diagnostic				nts	MCQ	Viva	Medicine,
I.24.7	such as imaging,	workup	for					voce	Radiology,
	biopsy, and tumor	cancer							Laboratory
	markers used in								medicine,
	cancer diagnosis								Pathology

6.4. Competency Tables for Infectious Diseases and Tropical Diseases

Sl. No.	Domain of	Miller	Content	SL	O	Blooms	Priorit	T-L	Assessm	ent	Integration
	Competenc	S				Domain/	y	Methods	F	S	
	y	Level				Guilbert'					
II IIC	TZ 0. C	17	**	D ("	T.T.	s Level	3.417	т .	MGO	T 0	D (1 1
HomUG	K&S	K	Herpes	Define	Herpes	C1	MK	Lecture,	MCQ,	LQ,	Pathology,
-PM			simplex	simplex	viruses			Multimedia	Quiz, Case	SQ,	Community
I.25.1			viruses [HSV]	[HSV] in:	fections			presentatio	Based,	MCQ	Medicine,
			infections					n, Case	Morpholog	, Case	Paediatrics,
								Based	y Chart,	Based	Dermatolog
									Viva	, Viva	y
				Discuss		C2	MK	Lecture,			
				etiopatho	geneis			Case Based			
				for	HSV						
				Infections	S						
				Identify	the	C2	MK	Lecture,			Community
				epidemio	logy			field visit			Medicine
				dimension							
				HSV Infe	ections						
				Explain	how	C2	MK	Lecture,			Community
				-	fections			field visit			Medicine

	spreads from person to person		
	Describe the different clinical spectrum of HSV Infections	Lecture, Case Based	
	State the investigations to be done for the patient suffering from different clinical spectrum of HSV Infections	Lecture, Case Based	Pathology
KH	Enumerate the diagnostic features for HSV Infections	Lecture, Case Based	
	Describe the differential diagnosis of HSV Infections	Lecture, Case Based	
K	Describe the potential complications of HSV Infections	Lecture, Case Based	
KH	Discuss the prognosis of HSV Infections	Lecture, Case Based	

		K		Summarize the treatment and management options for HSV Infections Enumerate the indications of homoeopathic medicines for the	C2	MK MK	Lecture, Case Based Lecture, Case Based			Organon Materia Medica
		КН		Describe the strategies to prevent HSV Infections transmission	C2	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.2	K&S	K	Varicella- zoster virus (VZV) infection	Define Varicella- zoster virus infection (VZV)	C1	MK	Lecture, Multimedia presentatio n, Case Based	MCQ, Quiz, Case Based, Morpholog y Chart, Viva	LQ, SQ, MCQ , Case Based , Viva	Pathology, Community Medicine, Pediatrics, Dermatolog
				Discuss etiopathogeneis for Varicella- zoster virus (VZV) infection	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Varicella-zoster virus (VZV) infection	C2	MK	Lecture, field visit			Community Medicine

	Explain how	C2	MK	Lecture,		Community
	Varicella-zoster			field visit		Medicine
	virus (VZV)					
	infection spreads					
	from person to					
	person					
	Describe the	C2	MK	Lecture,		
	different clinical			Case Based		
	spectrum of					
	Varicella-zoster					
	virus (VZV)					
	infection					
	State the	C1	MK	Lecture,		Pathology
	investigations to			Case Based		
	be done for the					
	patient suffering					
	from Varicella-					
	zoster virus					
	(VZV) infection					
KH	Enumerate the	C1	MK	Lecture,		
	diagnostic			Case Based		
	features for					
	Varicella-zoster					
	virus (VZV)					
	infection					
	Describe the	C2	MK	Lecture,		
	differential			Case Based		
	diagnosis of					
	Varicella-zoster					
	virus (VZV)					
	infection					

		Describe the	C2	MK	Lecture,		
		potential		1,111	Case Based		
		complications			Cuse Buseu		
		arising from					
		Varicella-zoster					
		virus (VZV)					
		infection as per					
		the different					
		clinical spectrum					
		Discuss the	C2	MK	Lecture,		
		prognosis of			Case Based		
		different clinical					
		spectrum of					
		Varicella-zoster					
		virus (VZV)					
		infection					
		Summarize the	C2	MK	Lecture,	•	Organon
		treatment and			Case Based		8
		management					
		options for					
		different clinical					
		spectrum of					
		Varicella-zoster					
		virus (VZV) infection					
K	_		C1	MK	T a advised	-	Mataria
K		Enumerate the	C1	MK	Lecture,		Materia
		indications of			Case Based		Medica
		homoeopathic					
		medicines for					
		different clinical					
		spectrum of					
		Varicella-zoster					

				virus (VZV) infection						
		КН		Describe the strategies to prevent Varicella-zoster virus (VZV) infection	C2	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.3	K&S	K	Epstein-Barr virus [EBV] Infections	Define EBV Infections Discuss etiopathogeneis for EBV Infections	C1	MK MK	Lecture, Multimedia presentatio n, Assignmen t - Literature Review Lecture	MCQ, Quiz, Viva	LQ, SQ, MCQ , Viva	Pathology, Community Medicine, Pediatrics, Dermatolog y
				Identify the epidemiology dimension of EBV Infections	C2	MK	Lecture, field visit			Community Medicine
				Explain how EBV Infections spreads from person to person	C2	MK	Lecture, field visit			Community Medicine

	clinical presentations of EBV Infections - infectious	C2	MK	Lecture	
	investigations to be done for the patient suffering from EBV	C1	MK	Lecture	Pathology
КН	Infections Enumerate the diagnostic features for EBV Infections	C1	MK	Lecture	
		C2	MK	Lecture	
K	Describe the potential complications of EBV Infections	C2	MK	Lecture	
КН	Discuss the prognosis of EBV Infections	C2	MK	Lecture	
		C2	MK	Lecture	Organon

		K		Enumerate the indications of homoeopathic medicines for the EBV Infections Describe the strategies to prevent EBV Infections transmission	C1 C2	MK MK	Lecture			Materia Medica Community Medicine
HomUG -PM I.25.4	K&S	K	Poliovirus Infections	Define Poliovirus Infections	C1	DK	Lecture, Multimedia presentatio n, Assignmen t - Literature Review	MCQ, Quiz, Viva	LQ, SQ, MCQ , Viva	Pathology, Community Medicine, Pediatrics, Dermatolog
				Discuss etiopathogeneis for Poliovirus Infections	C2	DK	Lecture, Case Based			
				Identify the epidemiology dimension of Poliovirus Infections	C2	DK	Lecture, field visit			Community Medicine
				Describe the clinical presentations of Poliovirus Infections	C2	DK	Lecture, Case Based			

	State the investigations to be done for the patient suffering from Poliovirus	C1	DK	Lecture, Case Based	Pathology
KH	Infections Enumerate the diagnostic features for Poliovirus Infections	C1	DK	Lecture, Case Based	
	Describe the differential diagnosis of Poliovirus Infections	C2	DK	Lecture, Case Based	
K	Describe the potential complications of Poliovirus Infections	C2	DK	Lecture, Case Based	
KH	Discuss the prognosis of Poliovirus Infections	C2	DK	Lecture, Case Based	
	Summarize the treatment and management options for Poliovirus Infections	C2	DK	Lecture, Case Based	Organon, Immunolog y

		K		Enumerate the indications of homoeopathic medicines for the Poliovirus Infections	C1	DK	Lecture, Case Based			Materia Medica
		KH		Describe the strategies to prevent Poliovirus Infections transmission	C2	MK	Lecture, Case Based			Community Medicine, Immunolog y
HomUG -PM I.25.5	K&S	K	Measles	Define Measles	C1	MK	Lecture, Multimedia presentatio n, Case Based	MCQ, Quiz, Case Based, Morpholog y Chart,	LQ, SQ, MCQ , Case Based	Pathology, Virology Community Medicine
				Discuss etiopathogeneis for measles	C2	MK	Lecture, Case Based	Viva	, Viva	
				Identify the epidemiology dimension of measles	C2	MK	Lecture, field visit			Community Medicine
				Explain how measles Infections spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the clinical features of measles	C2	MK	Lecture, Case Based			

KH	State the investigations to be done for the patient suffering from Measles Enumerate the	C1	MK MK	Lecture, Case Based Lecture,	Pathology
	diagnostic features for Measles			Case Based	
K	Describe the potential complications of measles	C2	MK	Lecture, Case Based	
КН	Describe the differential diagnosis of measles	C2	MK	Lecture, Case Based	
	Discuss the prognosis of Measles	C2	MK	Lecture, Case Based	
	Summarize the treatment and management options for Measles	C2	MK	Lecture, Case Based	Organon, Immunolog y
K	Enumerate the indications of homoeopathic medicines for the Measles	C1	MK	Lecture, Case Based	Materia Medica

		KH		Describe the strategies to prevent Measles	C1	MK	Lecture, Case Based			Community Medicine, Immunolog
HomUG -PM I.25.6	K&S	K	Mumps	Define Mumps	C1	MK	Lecture, Multimedia presentatio n, Case Based	MCQ, Quiz, Case Based, Morpholog y Chart,	LQ, SQ, MCQ , Case Based	Pathology, Virology Community Medicine
				Discuss etiopathogeneis for Mumps	C2	MK	Lecture, Case Based	Viva	, Viva	
				Identify the epidemiology dimension of mumps	C2	MK	Lecture, field visit			Community Medicine
				Explain how mumps infections spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the clinical manifestations of Mumps	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Mumps	C1	MK	Lecture, Case Based			Pathology

KH	diagnostic features for Mumps Describe the potential complications of	c C2	MK MK	Lecture, Case Based Lecture, Case Based	
KH	Mumps Describe the differential diagnosis of Mumps		MK	Lecture, Case Based	
	Discuss the prognosis of Mumps		MK	Lecture, Case Based	
	Summarize the treatment and management options for Measles	1	MK	Lecture, Case Based	Organon, Immunolog y
K	Enumerate the indications of homoeopathic medicines for the Mumps	f	MK	Lecture, Case Based	Materia Medica
K	Describe the strategies to prevent Mumps		MK	Lecture, Case Based	Community Medicine, Immunolog y

HomUG	K&S	K	Rabies	Define Rabies	C1	DK	Lecture,	MCQ,	SQ,	Pathology,
-PM							Multimedia	Quiz, Viva	MCQ	Virology
I.25.7							presentatio		, Viva	Community
							n,			Medicine
							Assignmen			
							t -			
							Literature			
							Review			
				Discuss	C2	DK	Lecture			
				etiopathogeneis						
				for Rabies						
				Identify the	C2	DK	Lecture			Community
				epidemiology						Medicine
				dimension of						
				mumps						
				Explain how	C2	DK	Lecture			Community
				rabies infections						Medicine
				spreads from						
				person to person						
				Describe the	C2	DK	Lecture			
				different clinical						
				sprectrum of						
				Rabies						
				State the	C1	DK	Lecture			Pathology
				investigations to						
				be done for the						
				patient suffering						
				from Rabies						
				Enumerate the	C1	DK	Lecture			
		KH		diagnostic						
		1311		features for						
				different						

				spectrum of Rabies						
		K		Describe the potential complications of Rabies	C2	DK	Lecture			
		КН		Describe the differential diagnosis of Rabies	C2	DK	Lecture			
				Discuss the prognosis of Rabies	C2	DK	Lecture			
				Summarize the treatment and management options for Rabies	C2	DK	Lecture			Organon, Immunolog y
		K		Enumerate the indications of homoeopathic medicines for the Rabies	C1	DK	Lecture			Materia Medica
		K		Describe the strategies to prevent Rabies	C1	DK	Lecture			Community Medicine, Immunolog
HomUG -PM I.25.8	K&S	K	Dengue Virus Infection	Define Dengue	C1	MK	Lecture, Multimedia presentatio	MCQ, Quiz, Case	LQ, SQ, MCQ	Pathology, Virology,

				n, Case Based	based, Viva	Case Based Viva	Community Medicine
	Discuss etiopathogeneis for dengue infection	C2	MK	Lecture, Case Based		viva	
	Identify the epidemiology dimension of dengue infection	C2	MK	Lecture, field visit			Community Medicine
	State the risk factors and high risk patients for dengue infection	C1	MK	Lecture, Case Based			
	Describe the different clinical spectrum of dengue infection	C2	MK	Lecture, Case Based			
	State the investigations to be done for the patient suffering from Dengue infection	C1	MK	Lecture, Case Based			Pathology
KH	Enumerate the diagnostic features for dengue infection	C1	MK	Lecture, Case Based			

K	D	CO	MIZ	Tt	1	1
N	Describe the	C2	MK	Lecture,		
	complications of			Case Based		
	dengue					
	infections as per					
	the different					
	clinical spectrum					
KH	Describe the	C2	MK	Lecture,		
	differential			Case Based		
	diagnosis of					
	dengue infection					
	Discuss the	C2	MK	Lastura		
		C2	IVIK	Lecture,		
	r . 6			Case Based		
	dengue infection					
	as per the					
	different clinical					
	spectrum					
	Summarize the	C2	MK	Lecture,		Organon
	treatment and			Case Based		
	management					
	options for					
	dengue infection					
K	Enumerate the	C1	MK	Lecture,		Materia
12	indications of		IVIIX	Case Based		Medica
	homoeopathic			Case Based		Wiedica
	medicines for the					
	dengue					
	infections as per					
	the different					
	clinical spectrum					
K	Describe the	C1	MK	Lecture,		Community
	preventive stretegies			Case Based		Medicine
	for the dengue					
	infection					

HomUG -PM I.25.9	K&S	K	Japanese encephalitis virus [JEV] Infection	Define JEV Infection	C1	NK	Lecture, Multimedia presentatio n, Assignmen t - Literature Review	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for JEV infection	C2	NK	Lecture			
				Identify the epidemiology dimension of JEV infection	C2	NK	Lecture			Community Medicine
				Explain how JEV infections spreads from person to person	C2	NK	Lecture			Community Medicine
				Describe the different clinical sprectrum of JEV infection	C2	NK	Lecture			
				State the investigations to be done for the patient suffering from JEV infection	C1	NK	Lecture			Pathology

KH	Enumerate the C	C1 NK	Lastura		
KΠ			Lecture		
	diagnostic				
	features for				
	different				
	spectrum of JEV				
	infection				
K	Describe the C	C2 NK	Lecture		
	potential				
	complications of				
	JEV infection				
KH	Describe the C	C2 NK	Lecture	=	
	differential				
	diagnosis of JEV				
	infection				
		C2 NK	Lecture	1	
	prognosis of JEV				
	infection				
		C2 NK	Lecture	1	Organon
	treatment and		Lecture		Organon
	management				
	options for JEV				
	infection				
K		C1 NIZ	T4	-	Mataria
K		C1 NK	Lecture		Materia
	indications of				Medica
	homoeopathic				
	medicines for the				
	JEV infection]	
		C1 NK	Lecture		Community
	strategies to				Medicine
	prevent JEV				
	infection				

HomUG -PM I.25.10	K&S	K	BIRD FLU	Define BIRD FLU Infection	C1	NK	Lecture, Multimedia presentatio n, Assignmen t - Literature	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for BIRD FLU infection	C2	NK	Review Lecture			
				Identify the epidemiology dimension of BIRD FLU infection	C2	NK	Lecture, field visit			Community Medicine
				Explain how BIRD FLU Infections spreads from person to person	C2	NK	Lecture, field visit			Community Medicine
				Describe the clinical sprectrum of BIRD FLU infection	C2	NK	Lecture			
				State the investigations to be done for the patient suffering	C1	NK	Lecture			Pathology

		from BIRD	FLU						
		infection							
KH	H	Enumerate diagnostic features	the for	C1	NK	Lecture			
		different spectrum BIRD infection	of FLU						
K		Describe	the	C2	NK	Lecture			
		potential		02	111	Lecture			
		complicatio							
			FLU						
IZI.	<u> </u>	infection	41	CO	NIIZ	T4		ŀ	
KH	1	Describe differential	the	C2	NK	Lecture			
		diagnosis	of						
		BIRD	FLU						
		infection							
		Discuss	the	C2	NK	Lecture			
		prognosis	of						
		BIRD	FLU						
	-	infection	.1	C2	NIIZ	T .			
		Summarize treatment	the and	C2	NK	Lecture			Organon
		managemen							
		options for l							
		FLU infecti							

		K		Enumerate the indications of homoeopathic medicines for the BIRD FLU infection	C1	NK	Lecture			Materia Medica
				Describe the strategies to prevent JEV infection	C1	NK	Lecture			Community Medicine
HomUG -PM I.25.11	K&S	K	Influenza A H1N1 virus	Define Influenza A H1N1 virus Infection - Swine Flu	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case based, Viva	SQ, MCQ , Case Based , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Influenza A H1N1 virus Infection Identify the epidemiology dimension of Influenza A H1N1 virus Infection	C2	MK MK	Lecture, Case Based Lecture, field visit			Community Medicine

	Explain	how	C2	MK	Lecture,		Community
	iH1N1 Infe	ections			field visit		Medicine
	spreads	from					
	person to p						
	Describe	the	C2	MK	Lecture,		
	clinical				Case Based		
	sprectrum	of					
	Influenza	A					
	H1N1	virus					
	Infection	, 11 0.5					
	State	the	C1	MK	Lecture,		Pathology
	investigation	ons to			Case Based		
	be done for						
	patient suf	ffering					
	from Influe	enza A					
	H1N1	virus					
	Infection						
K	Enumerate	the	C1	MK	Lecture,		
	diagnostic				Case Based		
	features	for					
	different						
	spectrum	of					
	Influenza	A					
	H1N1	virus					
	Infection						
K	Describe	the	C2	MK	Lecture,		
	potential				Case Based		
	complication						
	Influenza	A					
	H1N1	virus					
	Infection						

KH	Describe the C	C2 MK	Lastura	
KΠ		2 NIK	Lecture,	
	differential		Case Based	
	diagnosis of			
	Influenza A			
	H1N1 virus			
	Infection			
	Discuss the C	C2 MK	Lecture,	
	prognosis of		Case Based	
	Influenza A			
	H1N1 virus			
	Infection			
	Summarize the C	C2 MK	Lecture,	Organon
	treatment and		Case Based	
	management			
	options for			
	Influenza A			
	H1N1 virus			
	Infection			
TZ.		21 3477	T .	N
K	Enumerate the C	C1 MK	Lecture,	Materia
	indications of		Case Based	Medica
	homoeopathic			
	medicines for the			
	Influenza A			
	H1N1 virus			
	Infection			
	Describe the C	C1 MK	Lecture,	Community
	strategies to		Case Based	Medicine
	prevent			
	Influenza A			
	H1N1 virus			
	Infection			
	IIIICCIIOII			

HomUG -PM I.25.12	K&S	K	Chikungunya virus Infection	Define Chikungunya virus Infection - Chikungunya virus Disease	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature	MCQ, Quiz, Case based, Viva	SQ, MCQ , Case Based , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Chikungunya virus Infection	C2	MK	Review Lecture, Case Based			
				Identify the epidemiological dimensions of Chikungunya virus Infection, and Explain how it spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the clinical features of Chikungunya virus Infection	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Chikungunya virus Infection	C1	MK	Lecture, Case Based			Pathology

	E	C1	MIZ	T4	
	Enumerate the	C1	MK	Lecture,	
	diagnostic			Case Based	
KH	features for				
	Chikungunya				
	virus Infection				
	Describe the	C2	MK	Lecture,	
	potential		1,111	Case Based	
	complications of			Case Basea	
K					
	Influenza A				
	H1N1 virus				
	Infection				
KH	Describe the	C2	MK	Lecture,	
	differential			Case Based	
	diagnosis of				
	Chikunguny				
	virus Infection				
	Discuss the	C2	MK	Lecture,	
		C2	IVIIX		
	1 0			Case Based	
	Chikungunya				
	virus Infection				
	Summarize the	C2	MK	Lecture,	Organon
	treatment and			Case Based	
	management				
	options for				
	Chikungunya				
	virus Infection				
K	Enumerate the	C1	MK	Lecture,	Materia
			IVIIX		
				Case Based	Medica
	homoeopathic				
	medicines for the				
	Chikungunya				
	virus Infection	1			

				Describe the strategies to prevent Chikungunya virus Infection	C1	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.13	K&S	K	COVID 19 Virus Infection	19 Virus Infection	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case based, Viva	SQ, MCQ , Case Based , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for COVID 19 Virus Infection	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of COVID 19 Virus Infection	C2	MK	Lecture, field visit			Community Medicine
				Explain how COVID 19 Virus Infections spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the different clinical sprectrum of	C2	MK	Lecture, Case Based			

	COVID 19 Virus Infection				
	State the investigations to be done for the patient suffering from different clincial spectrum of COVID 19 Virus Infection	C1	MK	Lecture, Case Based	Pathology
KH	Enumerate the diagnostic features for different spectrum of COVID 19 Virus Infection	C1	MK	Lecture, Case Based	
K	Describe the potential complications of COVID 19 Virus Infection		MK	Lecture, Case Based	
KH	Describe the differential diagnosis of COVID 19 Virus Infection		MK	Lecture, Case Based	
	Discuss the prognosis of	C2	MK	Lecture, Case Based	

				COVID 19 Virus Infection						
				Summarize the treatment and management options for COVID 19 Virus Infection	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for the COVID 19 Virus Infection	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent COVID 19 Virus Infection	C1	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.14	K&S	K	Yellow Fever virus [YFV] Infection	Define Yellow Fever virus [YFV] Infection	C1	NK	Lecture, Multimedia presentatio n	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Yellow Fever virus [YFV] Infection	C2	NK	Lecture, Case Based			

	Identify the epidemiology dimension of Yellow Fever virus [YFV] Infection	C2	NK	Lecture, field visit		Community Medicine
	Explain how Yellow Fever virus [YFV] Infection spreads from person to person	C2	NK	Lecture, field visit		Community Medicine
	Describe the clinicalsprectrum of Yellow Fever virus [YFV] Infection	C2	NK	Lecture, Case Based		
	State the investigations to be done for the patient suffering from Yellow Fever virus [YFV] Infection	C1	NK	Lecture, Case Based		Pathology
KH	Enumerate the diagnostic features for Yellow Fever virus [YFV] Infection	C1	NK	Lecture, Case Based		

K	Describe the potential complications of Yellow Fever virus [YFV] Infection	C2	NK	Lecture, Case Based		
K	Describe the differential diagnosis of Yellow Fever virus [YFV] Infection	C2	NK	Lecture, Case Based	_	
	Discuss the prognosis of Yellow Fever virus [YFV] Infection	C2	NK	Lecture, Case Based		
	Summarize the treatment and management options for Yellow Fever virus [YFV] Infection	C2	NK	Lecture, Case Based		Organon
K	Enumerate the indications of homoeopathic medicines for the Yellow Fever virus [YFV] Infection	C1	NK	Lecture, Case Based		Materia Medica

				Describe the strategies to prevent Yellow Fever virus [YFV] Infection	C1	NK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.15	K&S	K	Smallpox (variola) - poxvirus infection	Define Smallpox (variola) - poxvirus infection	C1	NK	Lecture, Multimedia presentatio n, Assignmen t - Literature Review	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Smallpox (variola) - poxvirus infection	C2	NK	Lecture			
				Identify the epidemiology dimension of Smallpox (variola) - poxvirus infection	C2	NK	Lecture			Community Medicine
				Explain how Smallpox (variola) - poxvirus infection spreads	C2	NK	Lecture			Community Medicine

	from person to person			
	Describe the C2 clinical sprectrum of Smallpox (variola) poxvirus infection	NK Lec	eture	
	State the investigations to be done for the patient suffering from clincial spectrum of Smallpox (variola) - poxvirus infection	NK Lec	eture	Pathology
KH	Enumerate the C1 diagnostic features of Smallpox (variola) poxvirus infection	NK Lec	eture	
K	Describe the potential complications of Smallpox (variola) - poxvirus infection	NK Lec	eture	

KH	Describe the C2 NK Lecture	
	differential	
	diagnosis of	
	Smallpox	
	(variola) -	
	poxvirus	
	infection	
	Discuss the C2 NK Lecture	
	prognosis of The Electure	
	Smallpox	
	(variola) -	
	poxvirus	
	infection	
	Summarize the C2 NK Lecture	Organon
	treatment and	Organon
	management options for	
	Smallpox (variola) -	
	poxvirus	
K	infection NV I I	3.4
K	Enumerate the C1 NK Lecture	Materia
	indications of	Medica
	homoeopathic	
	medicines for the	
	different stages	
	related to	
	Smallpox	
	(variola) -	
	poxvirus	
	infection	

				Describe the strategies to prevent Smallpox (variola) - poxvirus infection	C1	NK	Lecture			Community Medicine
HomUG -PM I.25.16	K&S	K	HIV Infection	Define the terms "HIV Infection" and "AIDS Syndrome"	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case based, Chart, Model, Viva	LQ, SQ, MCQ , Case Based , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for HIV Infection	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of HIV Infection	C2	MK	Lecture, field visit			Community Medicine
				Explain how HIV Infections spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the different clinical sprectrum of HIV Infection	C2	MK	Lecture, Case Based			

	State the investigations to be done for the patient suffering from different clincial spectrum of HIV Infection	C1 1	MK	Lecture, Case Based		Pathology
KH	Enumerate the diagnostic features for different spectrum of HIV Infection		MK	Lecture, Case Based		
K	Describe the potential complications of HIV Infection	C2 1	MK	Lecture, Case Based		
КН	Describe the differential diagnosis of HIV Infection	C2 1	MK	Lecture, Case Based		
	Discuss the prognosis of HIV Infection		MK	Lecture, Case Based		
	Summarize the treatment and management options for HIV Infection	C2 1	MK	Lecture, Case Based		Organon, Immunolog y

		K		Enumerate the indications of homoeopathic medicines for the HIV Infection Describe the strategies to prevent HIV	C1	MK MK	Lecture, Case Based Lecture, Case Based			Materia Medica Community Medicine
HomUG -PM I.25.17	K&S	K	Zika virus infection	Infection Define Zika virus infection	C1	NK	Lecture, Multimedia presentatio	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Zika virus infection	C2	NK	Lecture			
				Identify the epidemiology dimension of Zika virus infection	C2	NK	Lecture			Community Medicine
				Explain how Zika virus infection spreads from person to person	C2	NK	Lecture			Community Medicine
				Describe the different clinical sprectrum of Zika virus infection	C2	NK	Lecture			

	State the C1	NK	Lecture	Pathology
		1 ,12	200000	1 uniorogy
		NK	Lecture	
		111	Lecture	
KH				
K		NK	Lecture	
		111	Lecture	
КН		NK	Lecture	
		1111	Beetare	
		NK	Lecture	
		111	Lecture	
		NK	Lecture	Organon
		1115	Lecture	organon (
	virus infection			
	KH K	K Describe the C2 potential complications of Zika virus infection KH Describe the C2 differential diagnosis of Zika virus infection Discuss the C2 prognosis of Zika virus infection Summarize the C2 treatment and management options for Zika	investigations to be done for the patient suffering from clincial spectrum of Zika virus infection Enumerate the diagnostic features for Zika virus infection K Describe the potential complications of Zika virus infection KH Describe the C2 NK Describe the C2 NK differential diagnosis of Zika virus infection Discuss the prognosis of Zika virus infection Discuss the prognosis of Zika virus infection Summarize the treatment and management options for Zika	investigations to be done for the patient suffering from clincial spectrum of Zika virus infection Enumerate the diagnostic features for Zika virus infection K Describe the potential complications of Zika virus infection KH Describe the differential diagnosis of Zika virus infection Discuss the prognosis of Zika virus infection Discuss the prognosis of Zika virus infection Summarize the treatment and management options for Zika

		K		Enumerate the indications of homoeopathic medicines for the Zika virus infection	C1	NK	Lecture			Materia Medica
				Describe the strategies to prevent HIV Infection	C1	NK	Lecture			Community Medicine
HomUG -PM I.25.18	K&S	K	Rickettsial infection	Define Rickettsial infection	C1	NK	Lecture, Multimedia presentatio n	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Rickettsial infection	C2	NK	Lecture			
				Identify the epidemiology dimension of Rickettsial infection	C2	NK	Lecture			Community Medicine
				Explain how Rickettsial infection spreads from person to person	C2	NK	Lecture			Community Medicine
				Describe the common clinical sprectrum of Rickettsial infection	C2	NK	Lecture			

		State the	C1	NK	Lecture	Pathology
		investigations to		1117	Lecture	1 autology
		be done for the				
		patient suffering				
		from different				
		clincial spectrum				
		of Rickettsial				
		infection				
	KH	Enumerate the	C1	NK	Lecture	
	ХΠ		CI	INK	Lecture	
		diagnostic features for				
		different				
		spectrum of				
		Rickettsial				
		infection				
	K	Describe the	C2	NK	Lecture	
	IX .			1112	Lecture	
	KH		C2	NK	Lecture	
	TXTT		C2	1111	Lecture	
			C2	NK	Lecture	
				- 122		
		1 0				
	KH	potential complications of Rickettsial infection Describe the differential diagnosis of Rickettsial infection Discuss the prognosis of Rickettsial infection	C2	NK NK	Lecture	

				Summarize the treatment and management options for Rickettsial infection	C2	NK	Lecture			Organon
		K		Enumerate the indications of homoeopathic medicines for the Rickettsial infection	C1	NK	Lecture			Materia Medica
				Describe the strategies to prevent Rickettsial infection	C1	NK	Lecture			Community Medicine
HomUG -PM I.25.19	K&S	K	Staphylococc us aureus infection	Define Staphylococcus aureus infection	C1	DK	Lecture, Multimedia presentatio n, Case Based	MCQ, Quiz, Case Based, Morpholog y Chart,	SQ, MCQ , Case Based , Viva	
				State the factors predisposing to S. aureus colonisation and its infections / disease	C1	DK	Lecture, Case Based	Viva		
				Discuss etiopathogeneis for S. aureus infection	C2	DK	Lecture, Case Based			

Identify the	CO	DV	Lastura		Community
	C2	DK			Community
			field visit		Medicine
aureus infection					
Explain how S.	C2	DK	Lecture,		Community
aureus infection			field visit		Medicine
spreads from					
-					
	C1	DK	Lecture.		
_					
	C2	DV	Lactura		
	CZ	DK			
			Case Based		
	C1	DK	Lecture,		Pathology
investigations to			Case Based		
be done for the					
patient suffering					
from common					
clinical illness					
aureus infection					
	epidemiology dimension of S. aureus infection Explain how S. aureus infection spreads from person to person Enumate the common clinical illness caused by S. aureus infection Describe the clinical manifestation of coomon clinical illness which are caused by S. aureus infection State the investigations to be done for the patient suffering from common clinical illness caused by S.	epidemiology dimension of S. aureus infection Explain how S. aureus infection spreads from person to person Enumate the common clinical illness caused by S. aureus infection Describe the clinical manifestation of coomon clinical illness which are caused by S. aureus infection State the investigations to be done for the patient suffering from common clinical illness caused by S.	epidemiology dimension of S. aureus infection Explain how S. aureus infection spreads from person to person Enumate the common clinical illness caused by S. aureus infection Describe the clinical manifestation of coomon clinical illness which are caused by S. aureus infection State the investigations to be done for the patient suffering from common clinical illness caused by S.	epidemiology dimension of S. aureus infection Explain how S. aureus infection spreads from person to person Enumate the common clinical illness caused by S. aureus infection Describe the clinical manifestation of coomon clinical illness which are caused by S. aureus infection State the investigations to be done for the patient suffering from common clinical illness caused by S. aureus infection State the patient suffering from common clinical illness caused by S.	epidemiology dimension of S. aureus infection Explain how S. aureus infection spreads from person to person Enumate the common clinical illness caused by S. aureus infection Describe the clinical manifestation of coomon clinical illness which are caused by S. aureus infection State the investigations to be done for the patient suffering from common clinical illness caused by S. aureus infection State the patient suffering from common clinical illness caused by S. aureus infection Field visit Lecture, field visit Lecture, Case Based The patient suffering from common clinical illness caused by S. aureus infection State the patient suffering from common clinical illness caused by S.

KH	Enumerate the	C1 DK	Lecture, Case Based	
	diagnostic features for		Case Based	
	common clinical			
	illness caused by			
	S. aureus			
	infection			
K	Describe the	C2 DK	Lecture,	
	potential		Case Based	
	complications of			
	common clinical			
	illness caused by			
	S. aureus			
	infection			
KH	Describe the	C2 DK	Lecture,	
	differential		Case Based	
	diagnosis of			
	common clinical			
	illness caused by			
	S. aureus			
	infection			
	Discuss the		Lecture,	
	prognosis of		Case Based	
	common clinical			
	illness caused by			
	S. aureus			
	infection	G2 5.11	T	
	Summarize the	C2 DK	Lecture,	Organon
	treatment and		Case Based	
	management			
	options for			
	common clinical			

		K		illness caused by S. aureus infection Enumerate the indications of homoeopathic	C1	DK	Lecture, Case Based			Materia Medica
				medicines for the common clinical illness caused by S. aureus infection						
				Describe the strategies to prevent common clinical illness caused by S. aureus infection	C1	DK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.20	K&S	K	Streptococcal infections	Define Streptococcal infections	C1	DK	Lecture, Multimedia presentatio n, Case Based	MCQ, Quiz, Case Based, Morpholog y Chart,	SQ, MCQ , Case Based , Viva	Community
				Discuss etiopathogeneis for Streptococcal infections	C2	DK	Lecture, Case Based	Viva		
				Identify the epidemiology dimension of Streptococcal infections	C2	DK	Lecture, field visit			Community Medicine

	Explain how	C2	DK	Lecture,	Community
	Streptococcal			field visit	Medicine
	infections				1,100,101,110
	spreads from				
	person to person				
	Enumate the	C1	DK	Lecture,	
	common clinical		DK	Case Based	
				Case based	
	illness caused by				
	Streptococcal				
	infections				
	Describe the	C2	DK	Lecture,	
	clinical			Case Based	
	manifestation of				
	comon clinical				
	illness which are				
	caused by				
	Streptococcal				
	infections				
	State the	C1	DK	Lecture,	Pathology
	investigations to			Case Based	
	be done for the				
	patient suffering				
	from common				
	clinical illness				
	caused by				
	Streptococcal				
	infections				
KH	Enumerate the	C1	DK	Lecture,	
KII	diagnostic features		DIX	Case Based	
	for common clinical			Case Daseu	
	illness caused by S.				
	aureus infection				

W I	Degaribe 41:-	CO	DV	Lastrina		
K	Describe the	C2	DK	Lecture,		
	potential			Case Based		
	complications of					
	common clinical					
	illness caused by					
	S. aureus					
	infection					
KH	Describe the	C2	DK	Lecture,		
	differential			Case Based		
	diagnosis of					
	common clinical					
	illness caused by					
	Streptococcal					
	infections					
		CO	DIZ	T .		
	Discuss the	C2	DK	Lecture,		
	prognosis of			Case Based		
	common clinical					
	illness caused by					
	S. aureus					
	infection					
	Summarize the	C2	DK	Lecture,		Organon
	treatment and			Case Based		
	management					
	options for					
	common clinical					
	illness caused by					
	Streptococcal					
	infection					

		K		Enumerate the indications of homoeopathic medicines for the common clinical illness caused by Streptococcal infection	C1	DK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent common clinical illness caused by Streptococcal infection	C1	DK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.21	K&S	K	Typhoid Fever	Define Typhoid Fever	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case based, Viva	LQ, SQ, MCQ , Case Based , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogeneis for Typhoid Fever	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Typhoid Fever	C2	MK	Lecture, field visit			Community Medicine

	Explain how C Typhoid Fever spreads from person to person	C2 MK	Lecture, field visit	Community Medicine
	Describe the clinical course of clinical manisfestation of Typhoid Fever	C2 MK	Lecture, Case Based	
	State the investigations to be done for the patient suffering from Typhoid Fever	C1 MK	Lecture, Case Based	Pathology
КН	Enumerate the C diagnostic features for Typhoid Fever	C1 MK	Lecture, Case Based	
K	Describe the C potential complications of Typhoid Fever	C2 MK	Lecture, Case Based	
KH	differential diagnosis of Typhoid Fever	C2 MK	Lecture, Case Based	
	Discuss the prognosis of Typhoid Fever	C2 MK	Lecture, Case Based	

				Summarize the treatment and management options for Typhoid Fever	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for Typhoid Fever	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent Typhoid Fever	C1	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.22	K&S	K	Acute Viral Gastroenteriti s	Define Acute Viral Gastroenteritis	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case based, Viva	SQ, MCQ , Case Based , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogeneis for Acute Viral Gastroenteritis	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Acute Viral Gastroenteritis	C2	MK	Lecture, field visit			Community Medicine

	Explain how	C2	MK	Lecture,		Community
	infection of			field visit		Medicine
	Acute Viral					
	Gastroenteritis					
	spreads from					
	person to person					
		C2	MK	Lecture,		
	clinical			Case Based		
	manisfestation of					
	Acute Viral					
	Gastroenteritis					
	State the	C1	MK	Lecture,		Pathology
	investigations to			Case Based		
	be done for the					
	patient suffering					
	from Acute Viral					
	Gastroenteritis					
KH	Enumerate the	C1	MK	Lecture,		
	diagnostic			Case Based		
	features for					
	Acute Viral					
	Gastroenteritis					
K	Describe the	C2	MK	Lecture,		
	potential			Case Based		
	complications of					
	Acute Viral					
	Gastroenteritis					
KH	Describe the	C2	MK	Lecture,		
	differential			Case Based		
	diagnosis of					
	TAcute Viral					
	Gastroenteritis					

				Discuss the	C2	MK	Lecture,			
				prognosis of	C2	1111	Case Based			
				Acute Viral			Cuse Busea			
				Gastroenteritis						
				Summarize the	C2	MK	Lecture,	-		Organon
				treatment and	CZ	IVIIX	Case Based			Organon
				management			Case Dased			
				options for Acute						
				Viral						
				Gastroenteritis						
		K	-	Enumerate the	C1	MK	Lecture,	-		Materia
		K		indications of	CI	IVIK	Case Based			Medica
							Case Based			Medica
				homoeopathic medicines for						
				Acute Viral						
				Gastroenteritis						
				Describe the	C1	MK	Lecture,	-		Community
					CI	IVIK	Case Based			Medicine
							Case Based			Medicine
				prevent Acute Viral						
				Gastroenteritis						
HomUG	K&S	K	Cholera	Define Cholera	C1	MK	Lastuma	MCQ,	1.0	Dathalagy
-PM	Kas	K	Cholera	Define Cholera	CI	IVIK	Lecture, Multimedia	Quiz, Case	LQ,	Pathology,
I.25.23								based,	SQ, MCQ	Bacteriolog
1.23.23							presentatio n, Case	Viva		y Community
							based,	Viva	, Case Based	Medicine
									, Viva	Medicine
							Assignmen t -		, viva	
							Literature			
							Review			
							Review			

		Discuss		C2	MK	Lecture,		
		etiopathoge	neis		14117	Case Based		
		for Cholera				Case Dased		
	-			C2	MK	T a advisua		Community
		Identify	the	C2	IVIK	Lecture,		Community
		epidemiolog				field visit		Medicine
		dimension	of					
		Cholera						
		Explain	how	C2	MK	Lecture,		Community
		infection	of			field visit		Medicine
		Cholera sp	reads					
		from perso	n to					
		person						
		Describe	the	C2	MK	Lecture,		
		clinical				Case Based		
		manisfestati	on of					
		Cholera						
		State	the	C1	MK	Lecture,		Pathology
		investigation				Case Based		23
		be done fo						
		patient suff						
		from Choles						
KH		Enumerate	the	C1	MK	Lecture,		
		diagnostic	tiic		11111	Case Based		
		features	for			Case Dasea		
		Cholera	101					
K	-	Describe	the	C2	MK	Lactura		
V			uie	C2	IVIIX	Lecture, Case Based		
		potential				Case Based		
		complication	ns of					
****	-	Cholera		G2	3.677	-		
KH		Describe	the	C2	MK	Lecture,		
		differential				Case Based		

				prognosis Cholera Summarize treatment management options	of the of the and	C2 C2	MK MK	Lecture, Case Based Lecture, Case Based			Organon
		K		indications homoeopathic medicines Cholera	for	C1	MK	Lecture, Case Based			Materia Medica
				Describe strategies prevent Chole	the to era	C1	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.24	K&S	K	Tetanus	Define Tetanu	18	C1	NK	Lecture, Multimedia presentatio n	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogene for Tetanus	is	C2	NK	Lecture			
				Describe clinical manisfestation Tetanus	the n of	C2	NK	Lecture			

KH	Enumerate the	C1	NK	Lecture	
	diagnostic				
	features for				
	Tetanus				
K	Describe the	C2	NK	Lecture	
	potential				
	complications of				
	Tetanus				
KH	Describe the	C2	NK	Lecture	
	differential				
	diagnosis of				
	Tetanus				
	Discuss the	C2	NK	Lecture	
	prognosis of				
	Tetanus				
	Summarize the	C2	NK	Lecture	Organon
	treatment and				
	management				
	options for				
	Tetanus				
K	Enumerate the	C1	NK	Lecture	Materia
	indications of				Medica
	homoeopathic				
	medicines for				
	Tetanus				
	Describe the	C1	NK	Lecture	Community
	strategies to				Medicine
	prevent and / or				
	prophylaxis in				
	the wound				
	management of				
	Tetanus				

HomUG -PM I.25.25	K&S	K	Anthrax	Define Anthrax	C1	NK	Lecture, Multimedia presentatio n	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogeneis for Anthrax	C2	NK	Lecture			
				Identify the epidemiology dimension of Anthrax	C2	NK	Lecture			Community Medicine
				Explain how infection of Anthrax spreads from person to person	C2	NK	Lecture			Community Medicine
				Describe the clinical manisfestation of Anthrax / brucellosis / plague	C2	NK	Lecture			
				State the investigations to be done for the patient suffering from Anthrax	C1	NK	Lecture			Pathology
		КН		Enumerate the diagnostic features for Anthrax	C1	NK	Lecture			

		K		Describe potential complication Anthrax		C2	NK	Lecture			
		КН		Describe differential diagnosis Anthrax	the of	C2	NK	Lecture			
				Discuss prognosis Anthrax	the of	C2	NK	Lecture			
				Summarize treatment management options Anthrax	the and for	C2	NK	Lecture			Organon
		K		Enumerate indications homoeopathi medicines Anthrax	the of ic for	C1	NK	Lecture			Materia Medica
				Describe strategies prevent Anth	the to rax	C1	NK	Lecture			Community Medicine
HomUG -PM I.25.26	K&S	K	Brucellosis	Define Brucellosis		C1	NK	Lecture, Multimedia presentatio n	MCQ, Quiz, Viva	SQ, MCQ , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogen for Brucellos		C2	NK	Lecture			

	Identify the epidemiology dimension of Brucellosis	C2	NK	Lecture	Community Medicine
	Explain how infection of Brucellosissprea ds from person to	C2	NK	Lecture	Community Medicine
	person Describe the clinical manisfestation of Brucellosis	C2	NK	Lecture	
	State the investigations to be done for the patient suffering from Brucellosis	C1	NK	Lecture	Pathology
КН	Enumerate the diagnostic features for Brucellosis	C1	NK	Lecture	
K	Describe the potential complications of Brucellosis	C2	NK	Lecture	
КН	Describe the differential diagnosis of Brucellosis	C2	NK	Lecture	

				Diamer	41	C2	NIZ	T a advanta			1
					the	C2	NK	Lecture			
				prognosis	of						
				Brucellosis	_			_			
					the	C2	NK	Lecture			Organon
					and						
				management							
				1	for						
				Brucellosis							
		K		Enumerate	the	C1	NK	Lecture			Materia
				indications	of						Medica
				homoeopathic	;						
					for						
				Brucellosis							
					the	C1	NK	Lecture			Community
				strategies	to						Medicine
				prevent							
				Brucellosis							
HomUG	K&S	K	Plague	Define Plague	•	C1	DK	Lecture,	MCQ,	LQ,	Pathology,
-PM								Multimedia	Quiz, Viva	SQ,	Bacteriolog
I.25.27								presentatio		MCQ	y
								n,		, Viva	Community
								Assignmen		,	Medicine
								t -			
								Literature			
								Review			
				Discuss		C2	DK	Lecture			
				etiopathogene	ic	C2		Lecture			
				for Plague	15						
					the	C2	DK	Lecture			Community
						C2	אט	Lecture			
											Madiana
				epidemiology							Medicine
				dimension Plague	of						Medicine

	Explain how C2 infection of Plague spreads from person to person	DK Lectu	Medicine
	Describe the C2 clinical manisfestation of Plague	DK Lectu	ire
	State the investigations to be done for the patient suffering from Plague	DK Lectu	Pathology
KH	Enumerate the C1 diagnostic features for Plague	DK Lectu	ire
K	Describe the C2 potential complications of Plague	DK Lectu	ire
KH	Describe the C2 differential diagnosis of Plague	DK Lectu	ire
	Discuss the C2 prognosis of Plague	DK Lectu	ire

				Summarize the treatment and management options for Plague	C2	DK	Lecture			Organon
		K		Enumerate the indications of homoeopathic medicines for Plague	C1	DK	Lecture			Materia Medica
				Describe the strategies to prevent Plague	C1	DK	Lecture			Community Medicine
HomUG -PM I.25.28	K&S	K	Leprosy	Define Leprosy	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case Based, Model, Chart, Viva	LQ, SQ, MCQ , Case Based , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogeneis for Leprosy	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Leprosy	C2	MK	Lecture, field visit			Community Medicine
				Explain how infection of Leprosy spreads from person to person	C2	MK	Lecture, field visit			Community Medicine

	Describe the different clinical manisfestation of different types of Leprosy		MK Lecture, Case Based	
	State the investigations to be done for the patient suffering from Leprosy	C1	MK Lecture, Case Based	Pathology
КН	Enumerate the diagnostic features for different types of Leprosy	C1	MK Lecture, Case Based	
K	Describe the potential complications of different types of Leprosy	C2	MK Lecture, Case Based	
KH	Describe the differential diagnosis of different types of Leprosy	C2	MK Lecture, Case Based	
	Discuss the prognosis of different types of Leprosy	C2	MK Lecture, Case Based	

				Summarize the treatment and management options for different types of Leprosy	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for different types of Leprosy	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent different types of Leprosy	C1	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.29	K&S	K	Tuberculosis	Define Tuberculosis	C1	MK	Lecture, Multimedia presentatio n, Case based, Assignmen t - Literature Review	MCQ, Quiz, Case Based, Model, Chart, Viva	LQ, SQ, MCQ , Case Based , Viva	Pathology, Bacteriolog y Community Medicine
				Discuss etiopathogeneis for Tuberculosis	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Tuberculosis	C2	MK	Lecture, field visit			Community Medicine

	Explain how C2	MK	Lecture,	Community
	infection of		field visit	Medicine
	Tuberculosis			
	spreads from			
	person to person			
	Describe the C2	MK	Lecture,	
	different clinical		Case Based	
	manisfestation of			
	different types of			
	Tuberculosis			
	State the C1	MK	Lecture,	Pathology
	investigations to		Case Based	
	be done for the			
	patient suffering			
	from different			
	types of			
	Tuberculosis			
KH	Enumerate the C1	MK	Lecture,	
	diagnostic		Case Based	
	features of			
	different types of			
	Tuberculosis			
K	Describe the C2	MK	Lecture,	
	potential		Case Based	
	complications of			
	of different types			
	of Tuberculosis			
KH	Describe the C2	MK	Lecture,	
	differential		Case Based	
	diagnosis of of			
	different types of			
	Tuberculosis			

				Discuss the prognosis of of different types of Tuberculosis Summarize the treatment and management	C2	MK MK	Lecture, Case Based Lecture, Case Based			Organon
				options for different types of Tuberculosis						
		K		Enumerate the indications of homoeopathic medicines for different types of Tuberculosis	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent different types of Tuberculosis	C1	MK	Lecture, Case Based			Community Medicine
HomUG -PM I.25.30	K&S	K	Malaria Fever	Define Malaria Fever	C1	MK	Lecture, Multimedia presentatio n, Case Based	MCQ, Quiz, Case Based, Model, Chart,	LQ, SQ, MCQ , Case Based	Pathology, Parasitolog y Community Medicine
				Discuss etiopathogeneis for different types of Malaria Fever	C2	MK	Lecture, Case Based	Viva	, Viva	

	Identify the C2 epidemiology dimension of Malaria Fever	MK	Lecture, field visit	Community Medicine
	Explain how C2 infection of Malaria spreads from person to person	MK	Lecture, field visit	Community Medicine
	Describe the different clinical manisfestation of different types of Malaria Fever	MK	Lecture, Case Based	
	State the investigations to be done for the patient suffering from different types of Malaria Fever	MK	Lecture, Case Based	Pathology
KH	Enumerate the diagnostic features of different types of Malaria Fever	MK	Lecture, Case Based	
K	Describe the C2 potential complications of of different types of Malaria Fever	MK	Lecture, Case Based	

КН	Describe the differential diagnosis of of different types of Malaria Fever	C2	MK	Lecture, Case Based		
	Discuss the prognosis of of different types of Malaria Fever	C2	MK	Lecture, Case Based		
	Summarize the treatment and management options for different types of Malaria Fever	C2	MK	Lecture, Case Based		Organon
K	Enumerate the indications of homoeopathic medicines for different types of Malaria Fever	C1	MK	Lecture, Case Based		Materia Medica
	Describe the strategies to prevent different types of Malaria Fever	C1	MK	Lecture, Case Based		Community Medicine

6.5. Competency Tables for Bedside Clinics

Sl. No.	Domain	Miller	Content	SLO	Blooms	Priori	T-L	Assessi	ment	Integration
	of Compete ncy	s Level			Domain/ Guilbert's Level	ty	Methods	F	S	
HomUG -PM I.26.1	K&S	SH	Taking patient history including chief complaints, present illness, past medical history, family history, and personal history	Demonstra tion of effective communic ation and questionin g skills	A1/2	MK	Simulated patient encounters	Observation of history- taking sessions, Peer feedback	OSCE	Case discussions with clinical preceptors
HomU G-PM I.26.2	PC		Conducting a systematic physical examination including general examination, systemic examination, and regional examination	Demonstra tion of proficienc y in physical examinatio n techniques	P2	MK	Simulation, Bedside demonstratio ns	Observation of physical examination sessions, Peer feedback	OSCE	Clinical rotations with supervision

HomU	Analyzing	Demonstra	P2/A2	MK	Case-based	Case	Viva	Interactive
G-PM	patient	tion of	·		discussions,	analyses,	voce,	case-based
I.26.3	history,	critical			Problem-	Guided	Bedside	learning with
	physical	thinking			solving	discussions	examinati	faculty
	examination	and			scenarios	ans cassions	on	lacarty
	findings, and	clinical			5001101155			
	relevant	reasoning						
	investigation	skills						
	s to develop	SKIIIS						
	a list of							
	possible							
	diagnoses							
HomU	Developing	Demonstra	P2/A2	MK	Small group	Group	OSCE	Clinical
G-PM	appropriate	tion of	1 2/112	1111	discussions,	Discussions	OBCL	rotations with
I.26.4	management	knowledge			Clinical case	Discussions		treatment
1.20.1	strategies	of			presentations			planning
	including	evidence-			presentations			exercises
	pharmacolog	based						CACICISCS
	ical, non-	medicine						
	pharmacolog	and						
	ical, and	treatment						
	lifestyle	guidelines						
	interventions	guidennes						
HomU	Demonstrating	Demonstra	A2	MK	Simulated	Observation	OSCE	Communicati
G-PM	empathetic	tion of	112	IVIIX	patient	of	OBCL	on exercises
I.26.5	communication,	interperson			encounters	communicati		on exercises
1.20.3	active listening,	al and			cheoditicis	on skills,		
	and professionalism	communic				Peer		
	in patient	ation skills				feedback		
	interactions and	ation skins				Tecuback		
	team							
	communication							

HomU G-PM I.26.6	Recording patient history, examination findings, assessments, and management plans in a clear and organized manner	Demonstra tion of effective documenta tion skills	P3	MK	Charting exercises, Case note writing	Review of documentati on, Peer feedback	OSCE	Clinical rotations with documentation n review
HomU G-PM I.26.7	Adhering to professional standards, maintaining patient confidentialit y, and respecting patient autonomy and diversity	Demonstra tion of ethical decision- making and profession alism	A3	MK	Group Discussions	Observations of professional conduct, Peer evaluations	OSCE	Reflection exercises and discussions

7. Teaching learning methods

Tachunas	Non-lectures
Lectures	(clinical / practical / demonstrative)
Classroom lectures with oral presentation/ AV aid	Clinical Demonstration
Integrated teaching	Case Based Discussion
	PBL - Problem Based Learning
	Simulation – with mannequins
	OSCE – Objective Structure Clinical Examination
	Mini-CEX - mini clinical evaluation exercise
	Seminar: Integrated Medical Education Seminar
	Tutorials: Small Group Projects
	Chart and Model
	Assignment

8. Details of assessment

<u>Note-</u> The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the IV BHMS University Examination.

Overall Scheme of Internal Assessment (IA)**

Professional Course/ Subject	Term I (1-6 Months)		Term II (7-12 Months	
II BHMS/ Practice of Medicine	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	TT II (end of 12 months)
	20 Marks Viva- A	100 Marks Clinical/Practical and Viva - E i) Viva voce -50 marks ii) Clinical/practical*- 50	20 Marks Viva- B	100 Marks Clinical/Practical and Viva - F i) Viva voce -50 marks ii) Clinical/practical*- 50

*Practical Examinations:

- i. Case taking: 20 Marks for case taking, including history, symptoms of patient in detail.
- ii. Examination skills: 10 marks for the proper demonstration of skills.
- iii. Bedside Q n A session: 15 marks for demonstrating understanding of concepts and for applying knowledge to identify the problem.
- iv. Spotters: 5 marks (Instruments: Identification and Indications; Reports: Observations, Causes, Diagnosis/Differential Diagnosis)

**Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in IV BHMS:

	A	В	PA I+ PA II /2	Marks of TT I E	Marks of TT II F	TT I + TT II / 200 x 20	Marks D+G/2
Marks of PA I	Marks of PA II	Periodical Assessment			Terminal Test Average	Final Internal Assessment	

9. List of recommended text/reference books

- Alagappan, R. (2017). Manual of Practical Medicine (6th ed.). Jaypee Brothers Medical Publishers (P) Ltd.
- Penman I.D., Ralston S.H., Strachan M.W.J., & Hobson R. (2022). *Davidson's Principles and Practice of Medicine* (24th ed.) Elsevier Health Sciences.
- Anudeep, B. A. P. (2022). Insider's guide to clinical medicine (2nd ed). Jaypee Brothers Medical (P) Ltd.
- Golwala, A. F., & Vakil, R. J. (2008). Physical diagnosis A textbook of symptoms and signs (16th ed.). Media Promoters & Publishers.
- Glynn, M., & Drake, W. M. (2017). Hutchison's clinical methods: An Integrated Approach to Clinical Practice. Saunders.
- Harrison's principles of internal medicine (2vols) (21st ed.). (2022). McGraw-Hill.
- Bickley. (2016). Bates' pocket guide to physical exam & history taking (8th ed.). Wolters Kluwer India Pvt. Ltd.
- Dover, A. R., Innes, J. A., & Fairhurst, K. (2023). Macleod's clinical examination international edition. (15th ed.). Elsevier.
- Allen, H. C. (1998). Therapeutics of intermittent fever. B. Jain Publishers
- Bell, J. B. (2016). The homeopathic therapeutics of diarrhea, dysentery, cholera, cholera morbus, cholera infantum, and all other loose evacuations of the bowels (Classic reprint). Forgotten Books.

- Boericke, W. (2022). New Manual of Homoeopathic Materia Medica and Repertory with Relationship of Remedies: Including Indian Drugs, Nosodes Uncommon, Rare Remedies, Mother Tinctures, Relationship, Sides of the Body, Drug Affinities and List of Abbreviation (3rd ed.). B Jain Publishers Pvt Limited.
- Hahnemann, S. (2004). Organon of Medicine. B Jain Publishers Pvt Limited.
- Lilienthal, S. (2005). Homoeopathic therapeutics. B Jain Pub Pvt Limited.
- Nash, E. B. (2002). Leaders in homoeopathic therapeutics. B Jain Pub Pvt Limited.
- Tyler, M. L. (1993). Pointers to the common remedies. B. Jain Publishers

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Subject code- HomUG -Sur -I

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1. Preamble

Surgery involves addressing acute or chronic injuries, deformities, or diseases through physical intervention such as removal, repair, or reconstruction of a specific part or organ. Specialized fields like ENT, Ophthalmology, Dentistry, and Orthopedics, as well as super specialties like cardiac, neuro, and oncosurgery, have gained prominence.

Homoeopathy has proven to play a significant role in preventing several surgical interventions, provided that the physician can diagnose the condition early and administer the appropriate treatment while also considering supplementary measures. Therefore, a homoeopathic physician should possess a solid understanding of surgery. A student of homoeopathy should be able to diagnose clinical conditions to effectively address the scope and limitations of homoeopathy in surgical cases. It is essential for students to learn the Hahnemannian concept of surgical diseases, chronic diseases, and susceptibility for the effective management of surgical conditions.

The management of surgical cases according to both modern medicine and Organon is a crucial part of the education and training of homoeopathic students. A comprehensive understanding and application of Homoeopathic principles, along with the correct knowledge of Homoeopathic medicines, can extend the use of Homoeopathy to a range of acute and chronic surgical conditions that were previously considered beyond its scope. Understanding surgical conditions enables students to provide continuity of care, particularly when patients transition between surgical interventions and homeopathic management. Equipping homeopathic students with knowledge of surgical conditions allows them to make informed decisions and recommend suitable treatment options, whether surgical or non-surgical. By studying surgical conditions, homeopathic students can offer comprehensive and integrated healthcare to their patients, leading to improved health outcomes and patient satisfaction.

2. Course outcomes

At the end of BHMS course, the student shall be able to-

- i) Diagnose common surgical conditions.
- ii) Understand the role of Homoeopathic treatment in pseudo-surgical and true surgical diseases.
- Record the surgical case history that is complete and relevant to disease identification, help to find the correct Homoeopathic medicine that can be used for treating the condition.

- iv) Understand the fundamentals of examination of a patient with surgical problems.
- v) Demonstrate the ability to perform the bedside clinical procedures and the physical examination that is relevant for diagnosis and management of the disease.
- vi) Demonstrate ability to advise appropriate diagnostic tests (including radio-diagnosis) and interpretation of the test in the individual surgical case.
- vii) Perform basic management procedures of general surgery like wound dressing, ABC management, suturing, transport of the injured and fluid therapy etc.
- viii) Discuss causation, manifestations, management and prognosis of surgical conditions.
- ix) Understand the miasmatic background of surgical disorders, wherever applicable.
- x) Apply Materia medica (therapeutics) and posology in common surgical conditions.
- xi) Understand the use of repertory in Homoeopathic prescriptions for surgical conditions.

3. Learning objectives (to be edited according to the II BHMS content)

At the end of II BHMS course, the learner shall be able to-

- i. Understand surgical case taking.
- ii. Understand common surgical symptomatology and its differential approach.
- iii. Demonstrate the basic management procedures of general surgery. Eg. dressing, ABC management and fluid therapy
- iv. Describe the concepts required to diagnose surgical clinical conditions taught in II BHMS.
- v. Understand the role of examination and investigation in diagnosing surgical disorders.
- vi. Identify referral criteria for medical emergencies and surgical conditions.
- vii. Classify symptoms and integration with repertory.
- viii. Understand applied Materia Medica and posology in common surgical conditions (taught in II BHMS) which can be managed with Homoeopathy.

4. Course content and its term-wise distribution

Sl. No.	. Topic											
	Term I											
1.												
	organon of medicine											
2.	Trauma/Injury; different types of injuries- head injury; road traffic accident; injury to chest and abdomen											
3.	Wound and wound healing; scars and keloids											
4.	Haemorrhage and blood transfusion											
5.	Shock; various types of shock											
6.	Fluid, electrolyte and acid- base balance											
7.	Burns and Skin grafting											
8.	Nutrition											
9.	Common surgical infections											
	Term II											
10.	Special infections											
11.	Tumours and Cysts (Swellings)											
12.	Hernia											
13.	Ulcers											
14.	Sinus and fistula											

5. Teaching hours

5.1. Gross division of teaching hours

Surgery								
Year	Teaching hours- Lectures	Teaching hours- Non-lectures						
II BHMS	92	24						

5.2. Teaching hours theory

Sl. No.	Topic	Teaching hours
1.	Introduction to surgery, Scope and limitations of Homoeopathy in surgical conditions	3
2.	Injury – types	10
	Head injury;	
	Road traffic accident; injury to chest, abdomen	
3.	Wound & wound healing;	5
	Scar, keloid	
4.	Haemorrhage	4
	Blood transfusion	
5.	Shock	6
6.	Fluid, electrolytes and acid-base balance	6
7.	Burn, skin grafting	7
8.	Nutrition – consequents of malnutrition in surgical patients, nutritional requirement in	3
	surgical patients and methods of providing nutritional support	
9.	Common surgical infections-	8
	Boil, Carbuncle, Abscess, Cellulitis, and erysipelas, Hidradenitis suppurativa, septicaemia,	
	pyaemia	
10.	Special infections-	8

	Tuberculosis, syphilis, acquired immunodeficiency syndrome, actinomycosis, leprosy,	
	tetanus, infective gangrene	
11.	Concept of swellings-	12
	Tumours: Benign-Lipoma, fibroma, adenoma, neuroma, Neurilemmoma, Neurofibroma,	
	Haemangioma	
	Malignant-Carcinoma, sarcoma, fibrosarcoma; naevus, melanoma	
	Cysts – Classification	
12.	Hernia - Aetiology, General Classification, Abdominal hernias- Basic anatomy, Types,	10
	clinical features, management	
13.	Ulcers	8
14.	Sinus and fistula	2
	Total	
		92

5.3. Teaching hours Non-lecture

Sl No	Clinical	Hours
1	Case taking of surgical case	2
2	Examination of Trauma case, Transport of the injured	2
3	Examination of head injury case	2
3	J •	2
4	Examination of wound, suture technique	1
5	Examination of haemorrhagic case	1
6	Examination of shock	1
7	Fluid, electrolytes and acid base balance - Clinical Examination and evaluation	1
8	Burns - Clinical Examination	1
9	Common surgical infections - Clinical Examination	2
10	Special infections - Clinical examination	2
11	Examination of swelling- cysts and tumours	2
12	Examination of hernia	2

13	Examination of ulcer	2
14	Examination of sinus, fistula	1
15	ABC management, wound dressing, fluid therapy	2
	Total	24

6. Content mapping (competencies tables)

6.1. Introduction to Surgery, scope and limitations of Homoeopathy in surgical conditions and surgical case taking -

Sl.	Domain	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessi	nent	Integration
No.	of				Guilbert			F	S	
	Competen									
	cy									
Hom	НО	KH	Introduction to	Describe	C/2	Must know	Lecture	Viva	MCQ	Organon
UG-			surgery	surgical			Small		SAQ	
Sur-I				disease			group			
1.1				according to			discussion			
				Hahnemann.						
				Explain the						
				importance of						
				knowledge of						
				surgical						
				diseases for						
				Homoeopathic						
				practice						
Hom	НО	KH	Scope and	Explain scope	C/2	Must know	Lecture	Viva	SAQ	Organon
UG-			limitations of	and limitations			Small			
Sur-I			Homoeopathy	of			group			
1.2			in surgical	Homoeopathy			discussion			
			conditions	in surgical						
				conditions						

Hom UG- Sur-I 1.3	НО	КН	Homoeopathic perspective of surgical diseases	Hahnemmania n: Surgical disease	C/2	Must know	Lecture	Viva	LAQ	Organon
Hom UG- Sur-I 1.4	НО	КН	Homoeopathic perspective of surgical diseases	Explain the nature and significance of surgical disease on the basis of organon of medicine	C/2	Must know	Lecture	Viva	LAQ	Organon
Hom UG- Sur-I 1.5	KS	КН	Case taking of surgical cases	Discuss the steps of case taking in surgical conditions	C/2	Must know	Lecture, small group discussion	Viva		Organon Repertory and case taking
Hom UG- Sur-I 1.6	PC	SH	Case taking of surgical case	Observe surgical case taking in clinical set up	P/1	Must know	Observatio n Small group discussion	DOPS		

6.2. Trauma/ Injury and examination of trauma case-

Sl.	Domain	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	nent	Integratio
No.	of Competen cy				Guilbert			F	S	n
Hom UG- Sur-I 2.1	KS	КН	Types of injury	Classify different types of injury/ trauma according to causation and be effects	C/2	Must know	Lecture Audiovisual mode	Viva	MCQ SAQ	FMT
Hom UG- Sur-I 2.2	НО	КН	Homoeopathic therapeutics of injury	List	C/1	Must know	Lecture Small group discussion	Viva	SAQ	Materia Medica
Hom UG- Sur-I 2.3	KS	КН	Principles in the management of road traffic accident	components of	C/2	Must know	Lecture/ small group discussion	Viva OSCE	SAQ LAQ	

				Describe the components of Secondary survey in victims of road traffic accidents	C/2	Must know	Lecture/ small group discussion			
Hom UG- Sur-I 2.4	PBL	SH	Resuscitation in trauma cases	Basic life support - Initiation of resuscitation Opening of airway Defibrillation High quality CPR Ventilation-compression ratio Vascular access Termination of CPR	P/2	Must know	Skill lab training Audio visual aids DOPS	DOPS Viva	DOP S	
Hom UG- Sur-I 2.5	KS	КН	Resuscitation of trauma case	Discuss the principles of ATLS – advance trauma care management	C/2	Must know	Skill lab training Audio visual aids Small group discussion DOPS	Viva DOPS	MCQ SAQ LAQ DOP S	

Hom UG- Sur-I 2.6	KS	КН	Management of trauma case	Discuss the principles of pre-hospital care and causality management of a trauma victim including principles of triage	C/2	Must know	Skill lab training Audio visual aids Small group discussion Small project	Viva OSCE	MCQ SAQ LAQ	
Hom UG- Sur-I 2.7	PBL	SH	Resuscitation in trauma cases	Demonstrate the steps of Basic life support	P/2	Must know	Skill lab training Audiovisual aid DOPS	Viva OSCE Small project	OSC E	
Hom UG- Sur-I 2.8	PBL	SH	Management of trauma – Transport of injured	Demonstrate the transport of the injured in simulated setting	P/2	Desirable to know	Skill lab training Audiovisual aid	OSCE	OSC E	

6.3. Head injury; Examination of head injury case-

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integratio
	Competen cy				Guilbert			F	S	n
Hom UG- Sur-I 3.1	KS	K	Head injury and intracranial pressure	State the Monro Kellie doctrine about intracranial pressure	C/1	Nice to know	Lecture	Viva	SAQ	
				Enumerate the causes of raised intracranial pressure	C/2	Must know	Lecture		SAQ	
Hom UG- Sur-I 3.2	KS	КН	Head injury pathophysiol ogy, types	Describe Pathophysiology of head injuries Explain different	C/2	Must know	Lecture Audiovisu al aid Small group	Viva Clinical simulation	MCQ SAQ	
				types of head injuries like concussion, skull fracture, intracranial haemorrhage and diffuse axonal injuries	C/2	Must know	discussion Case based discussion			
Hom UG- Sur-I	KS	КН	Assessment of head injury	Describe Glasgow coma scale	C/1	Must know	Lecture/ small group	Viva OSCE Mini-CEX	MCQ SAQ LAQ	
3.3							discussion			

				Discuss the neurological	C/2		Audiovisu al mode			
				assessment of a		Must	Clinical			
				patient with		know	simulation			
				head injuries						
Hom	KS	KH	Investigations	Enumerate the	C/2	Must	Lecture/	Viva	LAQ	Radiology
UG-			and	appropriate		know	small	Audiovisual		
Sur-I			management	investigationsto			group	aids		
3.4			of head injury	done in case of			discussion			
				head injury			Audio			
							visual aid			
	НО	KH	Homoeopathi	Discuss the	C/1	Must			SAQ	Materia
			c therapeutics	Homoeopathic		know				Medica
			for head	therapeutics for						
			injury	head injuries						

6.4. Injury to chest and abdomen; Examination of chest and abdominal injury -

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessn	nent	Integration
No.	Competenc				Guilbert			F	S	
	y									
Hom	KS	KH	Clinical	Describe the	C/2	Must	Lecture	Viva	SAQ	
UG-			features,	clinical features of		know	Audiovisu	OSCE	LAQ	
Sur-I			investigation	chest injuries			al aid			
4.1			s and	List the summanuists	C/2	March	Case based			
			management of chest	List the appropriate	C/2	Must know	studies			
			injuries	investigations required in a case of		KIIOW	studies			
			injuries	chest injury						
				chest injury						
				Discuss the	C/2	Desirable				
				management of		to know				
				chest injury						
Hom	KS	KH	Chest injuries	Define flail chest	C/1	Must	Lecture	Viva	MCQ	
UG-			- flail chest			know	Audiovisu		SAQ	
Sur-I			and stove-in				al aid			
4.2			chest	features of flail	C/2	Must				
				chest		know				
				Discuss the						
				management of flail	C/2	Desirable				
				chest	C/Z	to know				
				CHOSt		to know				
				Explain stove-in	C/2	Nice to				
				chest		know				

Hom UG- Sur-I	KS	КН	Chest injuries -tension pneumothora	Define tension pneumothorax	C/1	Must know	Lecture Small group	Viva OSCE	SAQ LAQ MCQ	
4.3			X	Enumerate the cause of tension pneumothorax	C/2	Must know	discussion Audiovisu al aid Skill lab		meg	
				Discuss the clinical features of tension pneumothorax	C/2	Must know	simulation			
				Discuss the management of tension pneumothorax	C/2	Must know				
Hom UG- Sur-I 4.4	KS	КН	Chest injury - Thoracotomy	Enumerate the indications for Emergency thoracotomy	C/2	Desirable to know	Lecture	Viva	SAQ	
Hom UG- Sur-I 4.5	KS	КН	Abdominal injury - Clinical features, investigation s and management of abdominal injuries	Explain the clinical presentations of blunt abdominal trauma Enumerate the relevant investigations to be advised in a case of blunt abdominal	C/2 C/2	Must know Must know	Lecture Audiovisu al aid Small group discussion	Viva OSCE	MCQ SAQ LAQ	
				trauma						

				Discuss the surgical management of blunt abdominal trauma	C/2	Desirable to know			
Hom UG- Sur-I 4.6	KS	KH	Abdominal injuries-splenic trauma	Describe the clinical presentation of splenic trauma Discuss the	C/2	Must know	Lecture Audio visual aid Small group	Viva OSCE	MCQ SAQ LAQ
				diagnosis of splenic trauma Discuss the	C/2	Must know	discussion		
				management of splenic trauma	C/2	Desirable to know			
Hom UG- Sur-I 4.7	KS	КН	Abdominal injuries- Hepatic trauma	Describe the clinical presentation of Hepatic trauma Discuss the	C/2	Must know	Lecture Audiovisu al aid Small group	Viva	MCQ SAQ LAQ
				diagnosis of Hepatic trauma	C/2	Must know	discussion		
				Discuss the management of					
				Hepatic trauma	C/2	Desirable to know			
Hom UG- Sur-I 4.8	KS	КН	Abdominal injuries-pancreaticod uodenal	Describe the clinical presentation of pancreaticoduodena	C/2	Must know	Lecture Audiovisu al aid	Viva	MCQ SAQ LAQ
4.0			trauma	l trauma					

				Discuss diagnosis pancreaticodu l trauma	the of odena	C/2	Desirable to know	Small group discussion			
				Discuss management pancreaticodu l trauma	the of odena	C/2	Nice to know				
Hom UG- Sur-I 4.9	KS	КН	Abdominal injuries- Renal trauma	Explain the c presentations renal trauma	of	C/2	Must know	Lecture Audiovisu al aid Small	Viva	MCQ SAQ LAQ	
				Discuss diagnosis of trauma		C/2	Desirable to know	group discussion			
				Discuss management renal trauma	the of	C/2	Nice to know				

6.5. Wounds and wound healing; Scar and keloid; Examination of wounds-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integratio
No.	Competency				Guilbert			F	S	n
Hom UG- Sur-I 5.1	KS	K	Types of wounds	Discuss various types of closed wounds	C/1	Must know	Lecture Small group discussion	Viva	MCQ SAQ	FMT
				Discuss various types of open wounds		Must know				
Hom UG- Sur-I 5.2	KS	КН	Wound healing process and its types	Discuss the various stages of wound healing	C/1	Must know	Lecture Audiovisual aid Small project	Viva	SAQ MCQ	Pathology
				Discuss the factors affecting the wound healing	C/2	Desirable to know				
				Discuss the types of wound healing	C/2	Must know				
Hom UG- Sur-I 5.3	PBL	SH	Examinati on of wound	Demonstrate the evaluation and assessment of wound	P/2	Must know	Audiovisual aid Case based discussion DOPS	Viva Clinical performanc e OSCE		

Hom UG-	KS	KH	Wound manageme	Describe the principles	C/2	Must know	Lecture Audio-video	Viva	SAQ	
Sur-I			nt	acute wound			mode			
5.4				management			Skill lab simulation			
							Clinical	Clinical		
	PBL	SH		Demonstrate	P/2		Demonstration	performanc		
				cleaning and dressing of			Wound dressing	e OSCE		
				wound			Audiovisual	OSCE		
							aid			
							Small group			
							discussion DOPS			
							Small project			
Hom	KS	K	Surgical	Classify	C/1	Must	Lecture		MCQ	Pathology
UG- Sur-I			site infections	surgical site infections.		know	Audiovisual aid	Viva	SAQ	
5.5			infections	infections.			Small group		LAQ	
		KH		Enumerate the risk factors of	C/2	Must know				
		ΚП		surgical site	C/2	KHOW				
				infections						
				Discuss the		Must				
		KH		Discuss the clinical		know				
		1111		presentation of	C/ 2	1110 11				
				surgical site						
				infections						

	НО	КН	Homeopat hic manageme nt of surgical site infections	Discuss the Homeopathic therapeutics	C/1	Must know Must know				
	***			for surgical site infections	Q /2				a	2.5
Hom UG- Sur-I 5.6	НО	КН	Wound manageme nt	Discuss the homoeopathic therapeutics for various types of injuries	C/2	Must know	Lecture	Viva	SAQ	Materia Medica Repertory
Hom UG- Sur-I 5.7	PBL	K	Wound manageme nt	Enumerate different types of Suture materials	C/2	Desirable to know	Tutorial Small project	Viva	SAQ	
		SH		Demonstrate different types of Suture / knotting techniques	P/2	Nice to know	Skill lab simulation Audiovisual aid DOAP			
		KH		Discuss the Principles of anastomosis	C/2	Nice to know	Tutorial Audiovisual aid			

Hom	KS	KH	Scars and	Describe	C/2	Must	Lecture	Viva	SAQ	
UG-			keloid	hypertrophic		know				
Sur-I				scar and keloid						
5.8										
	НО			Discuss the	C/2	Must	Lecture	Viva	SAQ	Materia
				management of		know				Medica
				Scars and						
				Keloid along						
				with						
				Homoeopathic						
				Therapeutics						

6.6. Haemorrhage, blood transfusion; Examination of a haemorrhagic case -

Sl. No.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
	Competency				Guilbe			F	S	
					rt					
Hom	KS	K	Types of	Enumerate types	C/2	Must	Lecture	Viva	MCQ	
UG-			haemorrha	of haemorrhage		know			SAQ	
Sur-I			ge							
6.1										
Hom	KS	KH	Manageme	Explain the basic	C/1	Nice to	Lecture	Viva	SAQ	Physiology
UG-			nt of	concepts of		know	Audiovisual		LAQ	
Sur-I			haemorrha	hemostasis and			aid			
6.2			ge	mechanism of						
				Haemostasis						
Hom	НО	KH	Management	Discuss	C/2	Must	Lecture	Viva	SAQ	Materia
UG-			of	homoeopathic		know				Medica
Sur-I			haemorrhage with	therapeutics for						Repertory
6.3			homoeopathy	haemorrhage						

Hom	KS	KH	Blood	Enumerate	the	C/1	Must	Lecture	Viva	SAQ	Pathology
UG-			transfusion	Indications	for		know	Small group			
Sur-I			and blood	blood				discussion			
6.4			products	transfusion				OSCE			
								Small project			
				Explain	the						
				complication	s of						
				blood		C/2	Must		Viva	MCQ	
				transfusion			know			SAQ	
				.,							
				Describe var		G /0	.				
				blood prod		C/2	Desirable				
				and appropr			to know				
				indications	for						
TT	IZO	1711	Б	their use	41	C/1	3.4	A 1' ' 1	X7.	0.4.0	
Hom UG-	KS	KH	Examinatio	Discuss	the of	C/1	Must	Audiovisual aid	Viva	SAQ	
Sur-I			n of haemorrha	assessment patient	with		know	Clinical	OSCE		
6.5			gic case	haemorrhage				demonstration			
0.5			gic case	liaemonnage	,			Small group			
	PBL	SH		Demonstrate		P/2		discussion			
	IDL	511		examination		1/2		DOPS			
				haemorrhagio				DOLD			
				case							
Hom	PBL	S	Blood		lood	P/1	Nice to	Observing	Logbook		
UG-			transfusion	transfusion			know	blood			
Sur-I			procedure	procedure				transfusion			
6.6								procedure			

6.7. Shock; Examination of shock -

Sl.	Domain of	Miller	Content	SLO	Bloom	Priority	TL MM	Assessme	ent	Integration
No.	Competency				/ Guilb ert			F	S	
Hom UG- Sur-I 7.1	KS	KH	Shock types, pathophysiol ogy	Define shock Enumerate the various types of shock	C/1 C/2	Must know Must know	Lecture Lecture	Viva	MCQ SAQ LAQ	Pathology Physiology
				Explain the pathophysiolo gy of shock	C/2	Desirable to know	Lecture Audiovisual aid			
Hom UG- Sur-I 7.2	KS	КН	Clinical features, investigation s and management of shock	Explain the clinical features of shock	C/2	Must know	Lecture Audiovisual aid Small group discussion	Viva OSCE	MCQ SAQ LAQ	Pathology Practice of Medicine
				Discuss the diagnosis of various types of shock	C/2	Must know				
				Explain the complications of shock.	C/2	Must know				

				Discuss the management of shock	ne C/2	Must know				
Hom	НО	KH	Homeopathic	Discuss th	ne C/1	Must know	Lecture	Viva	SAQ	Materia
UG-			therapeutics	homoeopathic	2		Small group			Medica
Sur-I			for shock	therapeutics			discussion			
7.3				for shock						

6.8. Fluid, electrolyte and acid base balance; Clinical examination and evaluation-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment	ţ	Integration
No.	Competency				Guilbert	-		F	S	
Hom	KH	K	Fluid,	Describe the	C/1	Desirable	Tutorial	Viva	MCQ	Pathology
UG-			electrolyte	fluid		to know			SAQ	Physiology
Sur-I			and acid	compartments						
8.1			base	of the body						
			balance							
Hom	KH	KH	Fluid,	Identify the	C/2	Must	Lecture	Viva	SAQ	Biochemistry
UG-			electrolyte	indications of		know	Small	OSCE		
Sur-I			and acid	fluid			group			
8.2			base	replacement			discussion			
			balance				Small			
							project			
				Discuss the						
				methods of	C/2	Desirable				
				estimation and		to know				
				replacement						
				the Fluid and						
				electrolyte in						
				the surgical						
				patient						

Hom UG- Sur-I 8.3	КН	КН	Acid base balance	Enumerate the causes of metabolic acidosis	C/2	Must know	Lecture Small group discussion	Viva	MCQ SAQ	Biochemistry Pathology
				Describe the clinical features and laboratory findings of metabolic acidosis	C/2	Must know				
				acidosis	C/2	Must				
				Discuss the		know				
				management of						
				metabolic						
**	T.T.T.	7777		acidosis	G/2	3.5	 	***	1400	D' 1
Hom UG- Sur-I 8.4	КН	КН	Acid base balance	Enumerate the causes of metabolic alkalosis	C/2	Must know	Lecture Small group discussion	Viva	MCQ SAQ	Biochemistry Pathology
				Describe the clinical features and laboratory findings of metabolic alkalosis	C/2	Must know				
				Discuss the management of metabolic alkalosis	C/2	Must know				

Hom UG-	KS	KH	Acid base balance	Enumerate the causes of	C/2	Must know	Lecture Small	Viva	MCQ SAQ	Biochemistry Pathology
Sur-I			barance	respiratory acidosis		KIIOW	group discussion		SHQ	1 autology
8.5				00100515			313 G 35 T 3 T 1			
				Describe the clinical features and laboratory findings of respiratory acidosis	C/2	Must know				
				Discuss the management of respiratory acidosis	C/2	Must know				
Hom UG- Sur-I	KS	КН	Acid base balance	Enumerate the causes of respiratory alkalosis	C/2	Must know	Lecture Audiovisu al aid	Viva	MCQ SAQ	Biochemistry Pathology
8.6				Describe the clinical features and laboratory findings of respiratory alkalosis	C/2	Must know				
				Discuss the management of respiratory		Must				
				alkalosis	C/2	know				

Hom UG- Sur-I 8.7	KS	КН	Electrolyte balance – Potassium	Enumerate causes of Hyperkalemia	C/2	Must know	Lecture Small group discussion	Viva	SAQ	Biochemistry Practice of Medicine
				Describe the clinical features and diagnosis of hyperkalemia	C/2	Must know				
				Discuss the		Must				
				management of Hyperkalemia	C/2	know				
Hom UG- Sur-I 8.8	KS	КН	Electrolyte balance – Potassium	Enumerate causes of Hypokalemia	C/2	Must know	Lecture Small group discussion	Viva	SAQ	Biochemistry Practice of Medicine
				Describe the clinical features and diagnosis of hypokalemia	C/2	Must know				
				Discuss the	C/2	Must know				
				management of Hypokalemia						
Hom	KS	KH	Electrolyte	Enumerate	C/2	Must	Lecture	Viva	SAQ	Biochemistry
UG-			balance –	causes of		know				Practice of
Sur-I			Sodium	Hypernatremia						Medicine

8.9				Describe the clinical features and diagnosis of hypernatremia	C/2	Must know	Small group discussion			
				Discuss the management of Hypernatremia	C/2	Must know				
Hom UG- Sur-I 8.10	KS	КН	Electrolyte balance – Sodium	Enumerate causes of Hyponatremia	C/2	Must know	Lecture Small group discussion	Viva	SAQ	Biochemistry Practice of Medicine
				Describe the clinical features and diagnosis of hyponatremia	C/2	Must know				
				Discuss the management of Hyponatremia	C/2	Must know				
Hom UG- Sur-I 8.11	KS	K	Electrolyte balance – Calcium	Enumerate causes of Hypercalcemia	C/2	Must know	Lecture Small group discussion	Viva	SAQ	Biochemistry Practice of Medicine
				Describe the clinical features and	C/2	Desirable to know				

				diagnosis of hypercalcemia Discuss the management of Hypercalcemia	C/2	Nice to know				
Hom	KS	K	Electrolyte	Enumerate	C/2	Must	Lecture	Viva	SAQ	Biochemistry
UG-			balance –	causes of		know				Practice of
Sur-I			Calcium	Hypocalcemia						Medicine
8.12				Describe the clinical features and diagnosis of hypocalcemia	C/2	Desirable to know				
				Discuss the	C/2	Nice to				
				management of		know				
				Hypocalcemia						

Hom	PBL	KH	Fluid,	Describe the	P/2	Must	Case	Clinical	
UG-			electrolyte	assessment of		know	demonstrat	performanc	
Sur-I			and acid	fluid,			ion	e	
			base	electrolyte and				Case based	
8.13			balance	acid base				discussion	
				balance in a				Assignment	
				surgical case				S	
		SH		Fluid	P/2		Skill lab,		
				replacement			Simulation		
				therapy			Clinical		
							bedside		
							training		
							DOPS		

6.9. Burns, skin grafting; Clinical examination-

SL	Competency	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integration
No					Guilbe			F	S	
					rt					
Hom	KS	K	Burns and	Describe the	C/2	Must	Lecture	Viva	MCQ	Physiology
UG-			skin grafting	pathophysiolo		know	Audiovisual	OSCE	SAQ	
Sur-I				gy of burns			aid		LAQ	
9.1							Skill lab			
		KH		Discuss the	C/2	Must	simulation			
				assessment of		know				
				burn wound.						
				Assessing						
				size and depth						
				of burns						

				Explain the principles of fluid resuscitation in burns cases	C/2	Desirable to know				
				Discuss the management of burn wound	C/2	Must know				
Hom UG- Sur-I 9.2	НО	КН	Burns and skin grafting	Discuss the scope of Homoeopathy in the management of burns	C/2	Must know	Lecture small group discussion	Viva	SAQ	Materia Medica Repertory
				Discuss the homoeopathic therapeutics for burns						
Hom UG- Sur-I 9.3	PBL	SH	Burns and skin grafting	Examination of case of burns Assessment of burn wound	P/2	Desirable to know	Simulation and skill lab training DOPS	Logbook OSCE		

Hom	KS	K	Burns	and	Enumerate	C/2	Desirable	Lecture	Viva	SAQ	
UG-			skin graft	ing	the		to know	Audiovisual			
Sur-I					indications			aid			
9.4					for skir						
					grafting						
					Describe the						
					various types						
					of skir						
					grafting						

6.10. Nutrition-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
No.	Competency				Guilbert			F	S	
Hom	KS	KH	Nutrition	Enumerate the causes of	C/1	Must	Lecture	Viva	SAQ	Physiology
UG-				malnutrition in surgical		know	Small group			
Sur-I				patients			discussion			
10.1										
				Discuss the						
				consequences of						
				malnutrition in surgical						
				patient.	C/2			Viva	SAQ	
						Desirable				
						to know				
Hom	KS	KH	Nutrition	Discuss the nutritional	C/2	Must	Lecture	Viva	SAQ	Physiology
UG-				requirements of		know	Audiovisual			
Sur-I				surgical patients			aid			
10.2										

				Explain the methods of providing nutritional support.			Skill lab simulation		
Hom	PBL	SH	Nutrition	Demonstrate various	P/2	Desirable	Simulation	Viva	
UG-				types artificial		to know	skill lab	OSCE	
Sur-I				nutritional support in			Small project	DOPS	
10.3				surgical patients			DOPS		

6.11. Common surgical infections; Examination of common surgical infections-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessment		Integration
No.	Competency				Guilbert			F	S]
Hom UG- Sur-I	KS	K	Boil	Define boil	C/1	Must know	Lecture	Viva	MCQ SAQ	Pathology
11.1		КН		Discuss clinical features complication s of boil	C/2					
Hom UG- Sur-I	KS	KH	Carbuncle	Define carbuncle	C/1	Must know	Lecture Audiovisual mode	Viva	MCQ SAQ	Pathology
11.2				Describe the pathology of carbuncle	C/2	Must know	mode			
				Discuss the clinical features complications of carbuncle	C/2	Must know				

Hom UG-	KS	КН	Abscess	Define abscess	C/1	Must know	Lecture Audiovisual	Viva	MCQ SAQ	Pathology
Sur-I 11.3				Enumerate the various types of abscesses	C/2		aid			
				Explain clinical features of abscess	C/2					
				Discuss the management of abscess	C/2					
Hom UG- Sur-I	KS	KH	Cellulitis and erysipelas	Define cellulitis	C/1	Must know	Lecture Audiovisual aid	Viva	SAQ MCQ	Pathology
11.4				Explain clinical features of cellulitis	C/2	Must know				
				Define erysipelas	C/1	Must know				
				Explain the clinical features of erysipelas	C/2	Must know				

				Discuss the difference between cellulitis and erysipelas	C/2	Must know				
Hom UG- Sur-I 11.5	KS	КН	Hidradeniti s suppurativa	Discuss the pathology of Hidradenitis suppurativa	C/2	Must know	Lecture	Viva	SAQ MCQ	Pathology
				Explain the clinical features of Hidradenitis suppurativa	C/2	Must know				
Hom UG- Sur-I 11.6	KS	K	Septicaemi a and pyaemia	Define septicaemia. Enumerate	C/1	Must know Must know	Lecture Small group discussion	Viva	LAQ SAQ MCQ	Pathology
				the causes of septicemia discuss the clinical features of septicaemia	C/2					
Hom UG- Sur-I 11.7	KS	K	Systemic inflammato ry response syndrome	Define systemic inflammator y response syndrome (SIRS)	C/1	Must know	Lecture Audiovisual aid	Viva	LAQ SAQ MCQ	Pathology

		КН		Discuss the pathophysiol ogy of SIRS	C/2	Desirable to know				
Hom UG- Sur-I 11.8	PBL	SH	Common surgical infections	Demonstrate the examination of a case of common surgical infections like boil, carbuncle, cellulitis, erysipelas, hydradenitis suppurativa etc	P/2	Must know	Small group discussion Clinical demonstrati on DOPS	Viva OSCE DOPS	Case based discussio n Log book	
Hom UG- Sur-I 11.9	НО	K	Common surgical infections	Discuss the therapeutics with specific indications for common surgical infections like boil, carbuncle, cellulitis, erysipelas and hidradenitis suppurativa	C/2	Must know	Lecture	Viva	SAQ MCQ	Materia Medica Repertory

Hom	НО	KH	Common	Discuss	the	C/2	Must know	Lecture	Viva	SAQ	Materia
UG-			surgical	role	of			Small group			Medica
Sur-I			infections	Homoeop	oath			discussion			Repertory
11.10			Septicaemi	y	in						
			a and	septicaen	nia						
			pyaemia	and pyae	mia						
				Discuss	the						
				homoeop	athi						
				c							
				therapeut	ics						
				forseptica	aem						
				ia	and						
				pyaemia							

6.12. Special infections; Clinical examination-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessmer	nt	Integration
No.	Competency				Gilbert			F	S	
Hom	KS	KH	Tuberculosis	Describe the	C/1	Desirable	Lecture	Viva	LAQ	Pathology
UG-				pathology of		to know	Audiovisual aid		SAQ	Practice of
Sur-I				tuberculosis			Small group		MCQ	Medicine
12.1							discussion			
				Explain the	C/2	Must				
				clinicalfeature		know				
				s of						
				tuberculosis						
					C/2	Must				
						know				

				Discuss the diagnosis of tuberculosis						
Hom UG- Sur-I	KS	КН	Syphilis	Describe the pathology of syphilis	C/1	Desirable to know	Lecture Audiovisual aid	Viva	LAQ SAQ MCQ	Pathology Practice of Medicine
12.2				Explain the types and clinical features of Syphilis	C/2	Must know				
Hom UG- Sur-I 12.3	KS	КН	AIDS	Discuss the pathogenesis of AIDS	C/1	Desirable to know	Lecture	Viva	LAQ SAQ MCQ	Pathology Practice of Medicine
12.3				Explain the clinical features of AIDS	C/2	Must know				
Hom UG- Sur-I 12.4	KS	КН	Actinomycosi s	Discuss the pathogenesis of Actinomycosis	C/2	Desirable to know	Lecture	Viva	LAQ SAQ MCQ	Pathology Practice of Medicine
				Describe the clinical features of Actinomycosis	C/2	Must know				
Hom UG- Sur-I 12.5	KS	КН	Leprosy	Discuss the pathogenesis of leprosy	C/1	Desirable to know	Lecture	Viva	LAQ SAQ MCQ	Pathology Practice of Medicine

				Explain the types are	ne C/2	Must know				
				clinical						
				features leprosy	of					
Hom UG- Sur-I 12.6	KS	КН	Tetanus		ne C/1	Desirable to know	Lecture	Viva	LAQ SAQ MCQ	Pathology Practice of Medicine
12.0				clinical	ne C/2	Must know				
Hom UG- Sur-I	KS	KH	Infective gangrene	Define gangrene.	C/1	Must know	Lecture Audiovisual aid Small group	Viva	LAQ SAQ MCQ	Pathology Practice of Medicine
12.7				Enumerate the causes gangrene	of C/2	Must know	discussion Case based discussion			
				Discuss the clinical type of gangrene.	ne C/2	Must know				
				Describe the clinical features	c/2	Must know				
				Discuss the management of gangrene	C/2	Must know				

Hom UG- Sur-I 12.8	НО	K	Special infections	Discuss the homoeopathic therapeutics for special infections like Tuberculosis, Syphilis, AIDS, Actinomycosis, Leprosy and tetanus	C/2	Must know	Lecture/ small group discussion	Viva	SAQ MCQ	Materia Medica Repertory
Hom UG- Sur-I 12.9	НО	КН	Special infections – gangrene	Discuss the Homoeopathi c therapeutics for Gangrene	C/1	Must know	Lecture/ small group discussion	Viva	SAQ MCQ	Materia Medica Repertory
Hom UG- Sur-I 12.1	PBL	SH	Special infections – gangrene	Demonstrate the Examination of case of gangrene	P/2	Must know	Clinical demonstration Audiovisual aid Skill lab training	Case based discussio n OCSE	OSCE	

6.13. Concept of swelling- Tumours and Cysts; Clinical examination of swelling-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessm	ent	Integration
No.	Competency				Guilbert			F	S	
Hom UG- Sur-I 13.1	KS	K	Swelling concept	Define Tumour	C/1	Must Know	Lecture	Viva	MCQ	Pathology

Hom UG- Sur-I 13.2	KS	КН	Tumours	Discuss the differences between benign and malignant tumours Differentiate different tumours like sarcoma, Fibrosarcoma, Naevus, Melanoma etc	C/2	Must Know	Lecture Audiovi sual aid	Viva	SAQ LAQ	Pathology
Hom UG- Sur-I 13.3	НО	K	Tumours	Discuss Homoeopathic Therapeutics of Tumour	C/2	Must Know	Lecture	Viva	MCQ SAQ	Pathology Organon: Miasm Materia Medica
Hom UG- Sur-I 13.4	KS	K	Cyst	Define Cyst	C/1	Must Know	Lecture	Viva	MCQ	Pathology
Hom UG- Sur-I 13.5	KS	КН	Cyst	Explain Types of Cyst	C/2	Must Know	Lecture Audiovi sual aid	Viva	SAQ LAQ	Pathology

Hom UG- Sur-I 13.6	НО	K	Cyst	Discuss the homoeopathic therapeutics for Cyst	C/2	Must Know	Lecture	Viva	MCQ SAQ	Pathology Organon: Miasm Materia Medica
Hom UG- Sur-I 13.7	KS	КН	Lipoma, Fibroma, Adenoma, Neuroma, Neurofibro ma, Haemangio ma	Explain Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma	C/2	Must Know	Lecture Audiovi sual aid	Viva	SAQ LAQ MCQ	Pathology
Hom UG- Sur-I 13.8	НО	КН	of Lipoma, Fibroma, Adenoma, Neuroma, Neurofibr oma, Haemangi oma	Discuss the Homoeopathic therapeutics of Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma	C/2	Must Know	Lecture Small group discussi on	Viva	MCQ SAQ LAQ	Pathology Organon: Miasm Materia Medica
Hom UG- Sur-I 13.9	PBL	SH	Tumour & Swelling	Demonstrate examination of Tumour and swelling of different types	P/2	Must Know	Clinical demonstra tion DOPS Small group discussion	OSCE	Minicex OSCE	

6.14. Hernia - Abdominal hernias, Basic Anatomy, Types causes, Clinical features Complications, Management; Examination of hernia case-

Sl. No.	Domain of Competenc	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessm	ent	Integrati on
	y							F	S	-
Hom UG- Sur-I 14.1	KS	К	Hernia	Define Hernia Enumerate the causes of hernia Discuss the clinical classification of hernias Discuss the principles of management of hernias Discuss the operative approaches to hernias	C/1 C/2 C/2 C/2	Must Know Must know Must know Desirable to know	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ LAQ	Anatomy , Patholog y
Hom UG- Sur-I 14.2	KS	КН	Inguinal hernia	Describe the basic anatomy of inguinal canal	C/1	Must know	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	Anatomy

				Discuss the types, clinical presentation and diagnosis of inguinal hernia	C/2	Must know				
				Discuss the surgical management of inguinal hernia	C/2	Nice to know				
Hom	KS	KH	Femoral	Describe the	C/1	Must know	Lecture	Viva	MCQ	Anatomy
UG- Sur-I			hernia	basic anatomy of femoral canal			Audiovisual aids		SAQ	
14.3						Must know	Small group discussion		LAQ	
				Discuss the clinical features and diagnosis of femoral hernia	C/2		, , , , , , , , , , , , , , , , , , ,			
				Discuss the surgical management of Femoral hernia	C/2	Nice to know				
Hom	KS	KH	Umbilica	Describe the	C/2	Must know	Lecture	Viva	MCQ	
UG- Sur-I			l hernia	various types of umbilical hernia			Audiovisual aids		SAQ	
14.4				Discuss the clinical features					LAQ	
				and diagnosis Umbilical hernia	C/2	Must know				

Hom UG- Sur-I 14.5	KS	КН	Epigastri c hernia	Explain the pathology of epigastric hernia Describe the clinical features of epigastric hernia	C/2 C/2	Must know Must know	Lecture Audiovisual aids	Viva	MCQ SAQ LAQ
Hom UG- Sur-I 14.6	KS	KH	Incisiona 1 hernia	Describe etiology of incisional hernia Discuss the clinical features of incisional hernia Discuss the management of incisional hernia	C/2 C/2	Must know Must know Nice to know	Lecture Audiovisual aids	Viva	MCQ SAQ LAQ
Hom UG- Sur-I 14.7	KS	КН	Spigelian hernia	Explain spigelian hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ
Hom UG- Sur-I 14.8	KS	КН	Lumbar hernia	Explain lumbar hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ

Hom UG- Sur-I 14.9	KS	КН	Traumati c hernia	Explain traumatic hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG- Sur-I 14.10	KS	КН	Obturator hernia	Explain obturator hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG- Sur-I 14.11	НО	КН	Hernia	Discuss the Homoeopathic Therapeutics for Hernia	C/2	Must Know	Lecture Small group discussion	Viva	MCQ/ SAQ/ LAQ	Patholog y Organon: Miasm Materia Medica
Hom UG- Sur-I 14.12	PBL	SH	Hernia	Demonstrate examination of hernia	P/2	Must Know	Clinical demonstration DOPS Small group discussion	OSCE Mini- cex	Mini- cex	

6.15. Ulcers; Clinical examination of ulcer-

Sl. No.	Domain of	Miller	Content	SLO	Bloo m/Gu ilbert	Priorit y	TL MM	Assess	ment	Integration
	Compete ncy				nbert			F	S	
Hom UG- Sur-I 15.1	KS	К	Ulcer	Define Ulcer	C/1	Must Know	Lecture	Viva	MCQ	Pathology Organon: Miasm Materia Medica
Hom UG- Sur-I 15.2	KS	КН	Ulcer	Describe different classification of Ulcer	C/2	Must Know	lecture	Viva	MCQ SAQ LAQ	Pathology
Hom UG- Sur-I 15.3	НО	КН	Ulcer	Explain therapeutics of ulcer	C/1	Must Know	Lecture/ Small group discussion	Viva	MCQ/SAQ/LA Q	Pathology Organon: Miasm Materia Medica
Hom UG- Sur-I 15.4	PBL	SH	Ulcer	Demonstrate examination of ulcer	P/2	Must Know	Clinical demonstration DOPS OSCE Small group discussion	OSC E Mini- cex	OSCE Mini-cex	

6.16. Sinus and Fistula; Clinical examination of Sinus and Fistula-

Sl.	Domain of	Miller	Content	SLO	Bloom/	Priority	TL MM	Assessn	nent	Integration
No.	Competency				Guilbert			F	S	-
Hom UG- Sur-I 16.1	KS	K	Sinus and Fistula	Define sinus and fistula	C/1	Must Know	Lecture	Viva	MCQ	Pathology
Hom UG- Sur-I 16.2	KS	KH	Sinus and Fistula	Explain sinus and fistula	C/2	Must Know	Lecture	Viva	MCQ SAQ LAQ	Pathology Organon: Miasm Materia Medica
Hom UG- Sur-I 16.3	PBL	SH	Sinus and Fistula	Demonstrate examination of sinus and fistula	P/2	Must Know	Clinical demonstration DOPS Small group discussion	OSCE	OSCE	
Hom UG- Sur-I 16.4	НО	K	Sinus and Fistula	Explain therapeutics of sinus and fistula	C/1	Must Know	Lecture Small group discussion	Viva	MCQ SAQ LAQ	Organon: Miasm Materia Medica

7. Teaching learning methods

Lectures (Theory)	Non-lectures (Practical/Demonstrative)
Lectures	Clinical demonstration
Small group discussion	Problem based discussion
Integrated lectures	Case based learning
	Assignments
	Library reference
	Self-learning

8. Details of assessment

<u>Note-</u> The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA)*

Professional Course/ Subject	Term I (1-6 Months)		Term II (7-12 Months)		
II BHMS/	PA I (end of 3 months)	TT I (end of 6 months)	PA II (end of 9 months)	TT II (end of 12 months)	

Practice of Medicine	20 Marks Viva-	100 Marks Clinical/Practical and Viva	20 Marks Viva- B	100 Marks Clinical/Practical and Viva - F
	A	 i) Viva voce -50 marks ii) Clinical/practical- 50 Surgical Case taking - 25marks 		i) Viva voce -50 marksii) Clinical/practical- 50Surgical case taking and
		(Mandatory); Examination of wound/Cleaning and dressing of wound/Demonstration of Steps of Basic life support/Transport of the injured /Demonstration of suturing technique. (Demonstration of any one of the procedures mentioned) — 25 marks		Examination of surgical case – 15+15=30 marks; Surgical case file (5 cases)-20 marks

*Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:

Marks of PA I	Marks of PA II	Periodical Assessment Average PA I+ PA II /2	Marks of TT I	Marks of TT II	Terminal Test Average TT I + TT II / 200 x 20	Final Internal Assessment Marks
A	В	D	E	\mathbf{F}	$f{G}$	D+G/2

9. List of recommended text/reference books

- Williams, N., O'Connell, P. R., & McCaskie, A. (2018).
- Bailey and Love's Short Practice of Surgery, 27th Edition: the Collector's Edition. Chapman and Hall/CRC.
- Sriram Bhat. (2019). SRB's manual of surgery. Jaypee Brothers.
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- Das, S. (2024). A Manual on Clinical Surgery. Jaypee Brothers Medical Publishers Pvt Limited.
- Sriram, B. M. (2019). SRB's clinical methods in surgery. Jaypee Brothers Medical Publishers.
- Kulkarni, S. (2002). Surgery Therapeutics. B. Jain Publishers.
- Lilienthal, S. Homoeopathic Therapeutics.
- Willis Alonzo Dewey. (2018). Practical Homeopathic Therapeutics. B. Jain Publishers.

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Subject name: Gynaecology and Obstetrics

Subject code: HomUG-ObGy-I

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1. Preamble

Obstetrics stands at the forefront of maternal health, emphasizing the care and well-being of expectant mothers throughout pregnancy, childbirth, and the postpartum period. From prenatal care to labour and delivery, obstetricians play a pivotal role in ensuring safe pregnancies and healthy births. Gynaecology encompasses the diagnosis and treatment of conditions affecting the female reproductive system, from adolescence through menopause, including menstrual disorders, fertility concerns, sexually transmitted infections, and gynecological cancers. Infant care extends beyond the moment of birth, encompassing the critical early stage of a newborn's life. From breastfeeding guidance to newborn screening and immunization.

The fields of Obstetrics, Infant care and Gynaecology intersect to provide holistic care to women across the reproductive lifespan. By addressing the physical, emotional and social aspects of women's health, healthcare providers empower individuals to make informed decisions about their bodies and well-being. In the realm of obstetrics and gynaecology, homoeopathy offers a holistic approach that seeks to address the physical, emotional and spiritual aspects of women's health.

Homoeopathy, a system of medicine based on the principle of "like cures like" and individualized treatment, can play a significant role in promoting well-being and managing various conditions in obstetrics and gynaecology. Homoeopathy offers safe and gentle remedies to support women throughout pregnancy. From alleviating common discomforts such as nausea, fatigue, and back pain to addressing emotional concerns like anxiety and mood swings, homoeopathic treatments can provide relief without adverse effects on the developing fetus. Additionally, homoeopathy can aid in preparing the mother's body for labor and delivery, promoting a smooth and natural

In the postpartum period, homeopathy offers support for new mothers as they navigate the physical and emotional changes following childbirth, and breastfeeding difficulties, promote lactation, and support the overall recovery of the mother. Homeopathy provides a holistic approach to managing various gynaecological conditions, including menstrual disorders, hormonal imbalances, polycystic ovarian syndrome (PCOS), endometriosis, and menopausal symptoms. Homeopathy considers the individual's unique constitution and emotional state.

In conclusion, homoeopathy offers a holistic and patient-centred approach to obstetrics and gynaecology, addressing the physical, emotional, and spiritual aspects of women's health.

2. Course outcomes

At the end of BHMS II course, the students should be able to-

- i. Understand applied anatomy, endocrinology and physiology including abnormality of female reproductive system during puberty, menstruation, menopause and in different stages of womanhood.
- ii. Learn skills in case taking, physical examination, diagnostic procedures and managements of benign and malignant conditions, trauma, infections and inflammations related with female genitalia, and pre-malignancy screening procedures.
- iii. Integrate the various knowledges to get a holistic understanding of disease evolution and approach to disease diagnosis and management.
- iv. Understand developmental anomalies, uterine displacements and Sex and intersexuality
- v. Uunderstand the causes related with male and female Infertility, their diagnosis, Artificial Reproductive Techniques and skill in Homoeopathic management along with population dynamics and control of Conception.
- vi. Know skills required in case taking, clinical examination and common diagnostic modalities in Gynecology and Obstetrics.
- vii. Understand the process of normal pregnancy and minor ailments during pregnancy
- viii. Comprehend the process of diagnosis of normal pregnancy, prenatal, antenatal, postnatal maternal and fetal surveillance, care of newborn, care of puerperium
- ix. Uunderstanding common problems during abnormal pregnancy and labour to manage it through Homoeopathic perspective including scope, limitations and timely referral.
- x. Comprehending postnatal, puerperal care, diseases of fetus, new-born and medico legal aspects with Homoeopathic perspective.
- xi. Learning general and homoeopathic management of common Gynecological and Obstetric conditions

3. Learning objectives

At the end of the II BHMS course the student shall able to:

- 1. Understand the applied anatomy, endocrinology and physiology including abnormality of female reproductive system during puberty, menstruation, menopause and in different stages womanhood.
- 2. Integrate the knowledge with Anatomy, Physiology, Organon of medicine, Practice of medicine and Homoeopathic materia medica to get a holisti
- 3. c understanding of disease evolution and approach to disease diagnosis and management.
- 4. Discuss the developmental anomalies, Uterine displacements and Sex and intersexuality to understand the Predisposition including fundamental miasm, personality type known to develop particular disease, causation and modifying factors like exciting and maintaining factors.
- 5. Acquire skill in case taking, clinical examination and common diagnostic modalities in Gynaecology and Obstetrics.
- 6. Describe anatomical, physiological, endocrinological changes and minor ailments during pregnancy
- 7. Understand prenatal, antenatal, postnatal maternal and foetal surveillance, care of new-born, care of puerperium
- 8. Integrate the knowledge with Organon of medicine and Homoeopathic Materia medica for eradicating genetic dyscrasias in the mother and foetus.
- 9. Describe the mechanism and stages of normal labour, and intra-partum management.
- 10. Discuss general and Homoeopathic management for the related conditions through integration with repertorisation and therapeutics.

4. Course content and its term-wise distribution

4.1 Unit 1: Gynaecology and Homoeopathic Therapeutics

Sl. No.	List of Topics	Term
1.a	Introduction to Gynaecology with Definition of Hahnemannian classification of disease. Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books	I
1.b	A review of the applied anatomy of female reproductive system, development and Developmental anomalies	I
1.c	A review of the applied physiology of female reproductive system - Puberty, Menstruation and its disorders including, amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia, epimenorrhoea, AUB, Postmenopausal bleeding and menopause with related ailments and its scope and management in Homoeopathy and integrate wherever necessary with other disciplines	I
1.d	Gynaecological Case taking, physical examination, investigation and approach to clinical diagnosis and Differential diagnosis.	I
1.e	Epidemiology -Predisposition including fundamental miasm: personality type known to develop particular disease	I
1.f	Uterine displacements – Prolapse, Retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in homoeopathic perspective.	II
1.g	Sex & Intersexuality- Knowledge and scope to eradicate genetic Dyscrasias, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook.	II
1.h	General and Homoeopathic Management, repertorisation, therapeutics, posology, Formulation of prognostic criteria and Prognosis of related topics in Gynecology.	II

4.2. Unit 2: Obstetrics, new born care & Homoeopathic therapeutics

Sl. No.	List of topics	Term
2.a	Introduction to Obstetrics and Newborn care related with Homoeopathic Philosophy, Therapeutics and Repertorisation.	I
2.b	Fundamentals of reproduction	I
2.c	Development of intra uterine pregnancy	Ι
2.d	Diagnosis of pregnancy, investigations & examinations, applied anatomy & physiology, Normal pregnancy – physiological changes	Ι
2.e	Antenatal care – aims, objectives, visits, advise, procedures, investigations, identifying high risk cases, scope and limitation of management in Homoeopathy	I
2.f	Common conditions such as Vomiting, backache, constipation in pregnancy and Homoeopathic management	I
2.g	Normal labour with its causes of onset, anatomy, physiology, mechanism, stages, events and clinical course in each stage, importance of Homoeopathic scope and management	II
2.h	Postnatal & puerperal cure - scope and limitation of management in Homoeopathy	II
2.i	Care of new born in homoeopathic point of view	II
2.j	General and Homoeopathic Management, repertorisation, therapeutics, posology, Formulation of prognostic criteria and Prognosis of related topics in Obstetrics and new-born care.	II
2.k	Important Investigations for diagnosis in Obstetrics	II

5. Teaching hours

5.1. Gross division of teaching hours

	Gynaecology and Obstetrics						
Year	Year Teaching hours- Lectures						
II BHMS	100	24					

5.2. Teaching hours theory

5.2.1 Unit 1: Gynaecology and Homoeopathic Therapeutics

Sl. No.	List of topics	Lecture hours
1.a	Introduction to Gynecology with definition of Hahnemannian classification of disease. Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books	02 hrs.
1.b	A review of the applied anatomy of the female reproductive system.	03 hrs.
	Developmental anomalies	03 hrs.
1.c	A review of the applied physiology of the female reproductive system HPO axis & Menstruation	02 hrs.
	Puberty	03 hrs.
	Disorders of Menstruation including – Amenorrhoea, Dysmenorrhoea, Menorrhagia, Metrorrhagia, Epimenorrhoea, AUB.	09 hrs.
	Post-Menopausal Bleeding & Menopause with related ailments	05 hrs.

Total						
1.h	Correlate homoeopathic remedies, Therapeutics, posology. Formulation of prognostic criteria and prognosis related to Gynaecological conditions.	02 hrs				
1.g	Sex & Intersexuality – Knowledge and scope to eradicate genetic dyscrasians, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook	05 hrs.				
1.f	Uterine displacements- Prolapse, retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in homoeopathic perspective	08 hrs.				
1.e	Epidemiology – Predisposition including fundamental miasm; personality type known to develop particular disease.	04 hrs.				
1.d	Gynaecological case taking, Physical examination, investigation and approach to clinical diagnosis and differential diagnosis.	04 hrs.				

5.2.2. Unit 2: Obstetrics, new born care & Homoeopathic therapeutics

Sl. No.	List of topics	Teaching hours
2.a	Introduction to Obstetrics and Newborn Care Related with Homoeopathic Philosophy. Therapeutics and	02 hr.
	Repertorisation.	
2.b	Fundamentals of reproduction	04 hrs.
2.c	Development of intrauterine pregnancy- Placenta and foetus.	04 hrs.
2.d.	Diagnosis of pregnancy: Investigations & examinations, applied anatomy & physiology, Normal pregnancy – Physiological changes.	07 hrs.
2.e	Antenatal care – aims, objectives, visits, advice, procedures, investigations, identifying high-risk cases, scope and limitation of management in Homeopathy	06 hrs.

2.f	Vomiting in pregnancy	04 hrs.
2.g	Normal labour with its causes of onset, anatomy, physiology, mechanism, stages, events and clinical course in each stage and management	08 hrs.
2.h	Postnatal & puerperal cure – scope and limitation of management in Homoeopathy	06 hrs.
2.i	Care of New-born in a homoeopathic point of view	04 hrs.
2.j	Correlate homoeopathic remedies, Therapeutics, posology. formulation of prognostic criteria and prognosis related to Obstetrical conditions	02 hrs.
2.k	Important investigations for diagnosis in Obstetrics	03 hrs.
	Total	50 hrs.

5.2.3. Teaching hours Non-lecture

S. No.	Non lecture activity	Hours					
1.	Clinical						
a.	Gynaecological Case taking	04					
b.	Obstetrical Case taking	04					
c.	Gynaecological Examination	04					
d.	Obstetrical Examination	04					
e.	Investigations, Diagnosis , D/D	04					
2.	Demonstrative						
a.	Problem based / Case based learning-	04					
	Foetal skull & maternal pelvis						
	Demonstration of labour in Mannequin - skill lab						
	Total	24					

6. Content mapping (competencies tables)

Unit 1: Gynaecology & Homoeopathic therapeutics

6.1. Introduction to Gynecology with definition of Hahnemannian classification of disease. Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books

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Sl. No.	Domain of Competency	Miller's l	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration	
HomUG- ObGy-1 1.1	K & S	K	Introduction to Gynecology	Define Gynaecology	C1	MK	Lecture Small group discussion	MCQ			
HomUG- ObGy-1 1.2	K & S	K	History of Gynaecology	Discuss the history of Gynaecology	C1	NK	Lecture Small group discussion	MCQ			
HomUG- ObGy-1 1.3	НО	KH	Hahnemannian classification of disease.	Classify diseases according to Hahnemann	C1	MK	Lecture Small group discussion	MCQ		Organon of Medicine	
HomUG- ObGy-1 1.4	НО	КН	Homoeopathic literature	Discuss the Homoeopathic case taking in female complaints as per Organon of Medicine	CI	MK	Lecture/ Integrated Small Group discussion CBL	MCQ/		Organon of Medicine	

HomUG- ObGy-1 1.5	ΗО	КН		Discuss Hahnemann's concept of case taking in females according to different Homoeopathic authors	C1	MK	Lecture/ Small group discussion CBL PBL	MCQ/		Organon of Medicine
HomUG- ObGy-1 1.6	НО	КН	Materia Medica& Therapeutics Materia	Discuss the list of indicated medicines for the gynaecological conditions	C2	MK	Lecture / small group discussion PBL CBL	MCQ	SAQ	Materia Medica,
HomUG- ObGy-1 1.7	ΗО	КН		Discuss the characteristic indication of medicines mention in the list	C2	MK	Lecture / small group discussion PBL CBL	MCQ	SAQ	Materia Medica,
HomUG- ObGy-1 1.8	НО	КН		Discuss the differentiation of the remedies	C2	MK	Lecture / small group discussion PBL CBL	MCQ	SAQ	Materia Medica, Pathology
HomUG- ObGy-1 1.9	ΗО	КН		Discuss the remedy relationship wherever applicable	C2	MK	Lecture / small group discussion PBL CBL	MCQ		Materia Medica, Pathology
HomUG- ObGy-1 1.10	ΗО	КН	Repertory	Describe the selection of repertories in different gynaecological conditions	C2	MK	Lecture / small group discussion PBL CBL	MCQ		Repertory

HomUG- ObGy-1 1.11	НО	КН	Explain how to convert symptoms into rubrics from different repertories in gynaecological conditions	C2	MK	Lecture / small group discussion PBL CBL	MCQ	Repertory
HomUG- ObGy-1 1.12	НО	КН	Explain the selection of rubrics from different gynaecological conditions.	C2	MK	Lecture / small group discussion PBL CBL	MCQ	Repertory

6.2.1. Review of the applied anatomy of the female reproductive system.: Development of genital tract, malformations and their clinical significance

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Sl. No.	Competency	Miller	Content	Specific Learn Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG	K &	K	External genitalia	Name the external	CI	MK	Small group	MCQ		
-ObGy-I-	S		organs	genitalia organs			discussion			
2.1			_				Models			
HomUG	K &	K	Internal genitalia	Name the internal genitalia	CI	MK	Small group	MCQ		
-ObGy-I	S		organs	organs.			discussion			
2.2							Charts			
HomUG	K &	KH	Internal genitalia	Draw and label the	P2	MK	Small group	MCQ		
-ObGy-I-	S		organs	anatomy of the uterus			discussion			
2.3				,			Charts			

HomUG- ObGy-I- 2.4	K & S	K	Internal genitalia organs	Name the blood supply of the uterus	CI	MK	Small group discussion Charts	MCQ		
Hom-UG ObGy-I- 2.5	K & S	КН	Internal genitalia organs	Draw & Label the normal anatomy of the fallopian tubes.	P2	MK	Small group discussion Chars	MCQ	SAQ	
HomUG- ObGy-I- 2.6	K & S	КН	Gonads	Draw & Label the normal anatomy of the ovarian structures	P2	MK	Small group discussion Charts	MCQ	SAQ	
HomUG- ObGy-I- 2.7	K & S	K	Pelvic fascia, cellular tissues & ligaments	Name the pelvic floor muscles, ligaments and fascia.	CI	MK	Small group discussion Charts	MCQ	SAQ	
HomUG- ObGy-I- 2.8	K & S	K	Malformation of the vagina	Discuss the vaginal abnormalities	CI	MK	Small group discussion Charts	MCQ		
HomUG- ObGy-I- 2.9	K & S	K		Describe the clinical features of vaginal abnormalities	CI	MK	Small group discussion CBL CBL	MCQ		
HomUG- ObGy-I- 2.10	K & S	K	Malformation of the vagina	List the vaginal mal- developments	CI	MK	Small group discussion	MCQ		
Hom- UG- ObGy-I- 2.11	K & S	K		Discuss the aetiological factors for vaginal maldevelopment	CI	MK	Lecture Small group discussion Tutorials	MCQ		

HomUG- ObGy-I- 2.12	K & S	КН	Malformation of the uterus	Describe the various malformations of the uterus.	CI	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG -ObGy-I- 2.13	K & S	K		Discuss the clinical features of uterine anomalies	CI	MK	Small group discussion CBL	MCQ	SAQ	
HomUG -ObGy-I- 2.14	K & S	K	Malformation of the ovaries	List the anomalies of the ovaries	C2	MK	Lecture Small group discussion	MCQ		
HomUG- ObGy-I- 2.15	K & S	K	Malformation of the fallopian tubes	List the anomalies of the fallopian tubes	C2	MK	Lecture Small group discussion	MCQ		

6.3. A review of the applied physiology of female reproductive system - Puberty, Menstruation and its disorders including, amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia, epimenorrhoea, AUB, Postmenopausal bleeding and menopause with related ailments and its scope and management in Homoeopathy and integrate wherever necessary with other disciplines.

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Sl. No.	Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG -ObGy-I- 3.1	K & S	K	Endocrinology in puberty	List the hormones of Hypothalamus.	C1	MK	Lecture Small group discussion	MCQ		Physiology
HomUG -ObGy-I- 3.2	K & S	K		List the functions of hormones of Hypothalamus	C1	MK	Lecture Small group discussion Tutorials	MCQ		Physiology
HomUG- ObGy-I- 3.3	K & S	K		Name the hormones of Anterior Pituitary.	C1	MK	Lecture Small group discussion Tutorials	MCQ		Physiology
HomUG -ObGy-I- 3.4	K & S	K	Endocrinology in	List the functions of Anterior Pituitary hormones	C1	MK	Lecture Small group discussion Tutorials	MCQ		Physiology
HomUG -ObGy-I- 3.5	K & S	K	puberty	Name the hormones of Posterior Pituitary	C1	MK	Lecture Small group discussion Tutorials	MCQ		Physiology

HomUG -ObGy-I- 3.6	K & S	K		List the functions of Posterior Pituitary hormones	C1	MK	Lecture Small gro discussion Tutorials	oup	MCQ		Physiology
HomUG -ObGy-I- 3.7	K & S	K	Endocrinology in puberty	Name the hormones of Ovary	C1	MK	Lecture Small grodiscussion.	oup	MCQ		Physiology
HomUG -ObGy-I- 3.8	K & S	K	Endocrinology in puberty	List the functions of ovarian hormones.	C1	MK	Lecture Small gro discussion	oup	MCQ	SAQ	Physiology
HomUG -ObGy-I- 3.9	K & S	K		Discuss the Importance of HPO axis during Foetal life, Puberty & at Menopause	C1	MK	Lecture Small gro discussion	oup	MCQ	SAQ	Physiology
HomUG -ObGy-I- 3.10	K & S	K	Physiology of Menstruation	Define Menstruation	C1	MK	Lecture Small gro discussion Tutorials	oup	MCQ	SAQ	Physiology
HomUG - ObGy-I- 3.11	K & S	K		What are the Phases of Menstruation	C1	MK	Lecture Small gro discussion Tutorials	oup	MCQ	SAQ	Physiology
HomUG- ObGy- 13.12	K & S	K	Hormonal changes during each phase of menstruation	Discuss the Hormonal Changes during each Phase of Menstruation	C1	MK	Lecture Small grodiscussion Tutorials	oup	MCQ	SAQ	Physiology
HomUG- ObGy-I 3.13	K & S	K	Uterine changes during each phase of menstruation	Describe the Ovarian Changes during each phase of Menstruation	C1	MK	Lecture Small gro discussion	oup		SAQ	Physiology

HomUG- ObGy-I- 3.14	K & S	K		Describe the Uterine Changes occurs during each phase of Menstruation	C1	MK	Lecture Small discussion Tutorials	group		SAQ	Physiology
HomUG -ObGy-I- 3.15	K & S	K	Puberty	Define puberty	C1	MK	Lecture Small discussion	group	MCQ		
HomUG- ObGy-I- 3.16	K & S	K	Precocious puberty	Describe the Pubertal changes as per Tanner's Classification	C1	MK	Lecture Small discussion Tutorials	group		SAQ	
HomUG- ObGy-I- 3.17	K & S	K		Define Precocious puberty	C1	MK	Lecture Small discussion	group	MCQ	SAQ	
HomUG- ObGy-I- 3.18	K & S	K		Discuss the causes of Precocious puberty	C1	MK	Lecture Small discussion	group	MCQ	SAQ	
HomUG- ObGy-I- 3.19	K & S	K		Find the diagnostic features of Precocious puberty	C1	MK	Lecture Small discussion CBL CBL	group	MCQ		
Hom-UG ObGy-I- 3.20	K & S	K	Delayed puberty	Define Delayed puberty	C1	MK	Lecture Small discussion	group	MCQ		

HomUG- ObGy-I- 3.21	K & S	K		Discuss the causes for Delayed puberty	C1	MK	Lecture Small group discussion		SAQ	
HomUG- ObGy-I- 3.22	K & S	K		Discuss the characteristic features of delayed puberty	C1	MK	Lecture Small group discussion Tutorials		SAQ	
HomUG -ObGy-I- 3.23	K & S	K	Menorrhagia	Define puberty menorrhagia	C1	MK	Lecture Small group discussion	MCQ		
Hom- UG- ObGy-I- 3.24	K & S	K		Discuss the causes of Puberty menorrhagia	C1	MK	Lecture Small group discussion		SAQ	
HomUG -ObGy-I- 3.25	K & S	K		Discuss the Diagnostic features of Puberty menorrhagia	C1	MK	Lecture Small group discussion CBL PBL	MCQ		
HomUG- ObGy-I- 3.26	НО	K	Materia medica	Discuss the Homoeopathic remedies for delayed puberty	C1	MK	Lecture Small group discussion CBL PBL		SAQ	Materia medica
HomUG -ObGy-I- 3.27	НО	K	Therapeutics	Discuss the Homoeopathic remedies for puberty menorrhagia	C1	MK	Lecture Small group discussion CBL PBL		SAQ	Materia medica

HomUG -ObGy-I- 3.28	НО	K		Discuss the characteristic features of the indicated remedies	C1	MK	Lecture Small grodiscussion CBL PBL	oup		SAQ	Materia medica
HomUG- ObGy-I- 3.29	НО	K	Management	Explain the management for Anomalies of Gonadal Function	C1	MK	Lecture Small grodiscussion CBL CBL	oup	MCQ		Organon of medicine
HomUG- ObGy-I- 3.26	K & S	K	Amenorrhoea	Define Amenorrhoea	C1	MK	Lecture Small gro discussion CBL	oup	MCQ	SAQ	
HomUG- ObGy-I- 3.30	K & S	КН		Classify Amenorrhoea	C1	MK	Lecture Small gro discussion Tutorials	oup	MCQ	SAQ	
HomUG -ObGy-I- 3.31	K & S	K		Define Primary Amenorrhoea	C1	MK	Lecture Small gr discussion CBL PBL	roup	MCQ	SAQ	
HomUG- ObGy-I- 3.32	K & S	K	Primary amenorrhoea	Describe the causes of Primary amenorrhoea	C2	MK	Lecture Small grodiscussion CBL Tutorials	oup	MCQ	SAQ	
HomUG- ObGy-I- 3.33	K & S	K	Secondary amenorrhoea	Define Secondary amenorrhoea	C1	MK	Lecture Small gro discussion Tutorials	oup	MCQ	SAQ	

HomUG- ObGy-I- 3.34	K & S	K		Describe the causes of Secondary amenorrhoea	CI	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG- ObGy-I- 3.35	K & S	K	Cryptomenorrhoea	Define Cryptomenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ	
HomUG- ObGy-I- 3.36	K & S	K		Discuss the causes of Cryptomenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ	
HomUG- ObGy-I- 3.37	K & S	Shows	Examinations	Demonstrate the general physical, systemic and per vaginal examination in Primary amenorrhoea	Р3	MK	Clinical examinations CBL PBL			
HomUG- ObGy-I- 3.38	K & S	КН	Investigations	Explain the clinical, laboratory and radiological investigations done in Primary amenorrhoea	C2	MK	Lecture Small group discussion CBL			
HomUG -ObGy-I- 3.39	K & S	КН		Discuss clinical, laboratory and radiological investigations done in secondary amenorrhoea	C2	MK	Lecture Small group discussion CBL CBL	MCQ		

HomUG- ObGy-I- 3.40	НО	КН	Management	Discuss the general management for Primary amenorrhoea	C2	MK	Lecture Small group discussion CBL	MCQ/		
HomUG- ObGy-I- 3.41	НО	KH	Homoeopathic Materia medica & therapeutics	Discuss the Homoeopathic remedies for Primary amenorrhoea	C2	MK	Small group discussion PBL CBL	MCQ		Materia medica
HomUG- ObGy-I- 3.42	ΗО	КН		Discuss the Homeopathic remedies for Secondary Amenorrhoea	C2	MK	Lecture Small group discussion CBL Tutorials	MCQ		Materia Medica
HomUG- ObGy-I- 3.43	НО	K		Discuss the characteristic features of the indicated remedies	C2	MK	Lecture Small group discussion PBL CBL	MCQ		Materia Medica
HomUG- ObGy-I- 3.44	K & S	K	Hypomenorrhoea	Define Hypomenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ		
HomUG- ObGy-I- 3.45	K & S	K		Discuss the Causes of Hypomenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ	
HomUG- ObGy-I- 3.46	K & S	K	Oligomenorrhoea	Define Oligomenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ	

HomUG- ObGy-I- 3.47	K & S	K	Polymenorrhoea	Discuss the causes of Oligomenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ
HomUG- ObGy-I- 3.48	K & S	K		Define Polymenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	
HomUG- ObGy-I- 3.49	K & S	K		Discuss the causes of Polymenorrhoea	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ
HomUG- ObGy-I- 3.50	K & S	K	Metrorrhagia	Define Metrorrhagia	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	
HomUG- ObGy-I- 3.51	K & S	КН		Discuss the causes of Metrorrhagia	C1	MK	Lecture Small group discussion Tutorials CBL	MCQ	SAQ
HomUG- ObGy-I- 3.52	K & S	K	Menorrhagia	Define menorrhagia	C1	MK	Lecture Small group discussion CBL Tutorials		
HomUG- ObGy-I- 3.53	K & S	K		Discuss the causes of menorrhagia	C1	MK	Lecture Small group discussion Tutorials CBL		SAQ
HomUG- ObGy-I- 3.54	K & S	K	AUB	Define Abnormal Uterine Bleeding	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	

HomUG- ObGy-I- 3.55	K & S	KH		Classify Abnormal Uterine Bleeding	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	
HomUG- ObGy-I- 3.56	K & S	KH		Discuss the causes of AUB	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	
HomUG- ObGy-I- 3.57	K & S	КН	Investigations for AUB	Discuss the important investigation to be done in AUB	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	
HomUG- ObGy-I- 3.58	K & S	KH	Management of AUB	Explain the general Management of AUB	C2	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	
HomUG -ObGy-I- 3.59	K & S	K	Metropathia haemorrhagica	Define Metropathia haemorrhagica	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ		
HomUG- ObGy-I- 3.60	K & S	КН		Discuss the causes of metropathia hemorrhagica	C1	MK	Lecture Small group discussion CBL Tutorials		SAQ	
HomUG- ObGy-I- 3.61	НО	КН	Homoeopathic materia medica & therapeutics	Discuss the homoeopathic remedies for AUB	C1	MK	Lecture Small group discussion CBL Tutorials		SAQ	Materia Medica

HomUG- ObGy-I- 3.62	НО	КН		Discuss the characteristic features of the indicated remedies	C1	MK	Lecture Small group discussion Tutorials CBL PBL		SAQ	Materia Medica
HomUG- ObGy-I- 3.63	K & S	K	Dysmenorrhoea	Define dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials CBL PBL	MCQ	SAQ	
HomUG- ObGy-I- 3.64	K & S	KH		Classify dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials	SAQ/MCQ	SAQ	
HomUG- ObGy-I- 3.65	K & S	КН		Discuss the causes of Primary Dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials	SAQ/MCQ	SAQ	
HomUG- ObGy-I- 3.66	K & S	КН		Discuss the causes of Secondary dysmenorrhoea	CI		Lecture Small group discussion CBL Tutorials		SAQ	
HomUG -ObGy-I- 3.67	K & S	КН	Dysmenorrhoea	Discuss the clinical features Primary Dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials CBL PBL	MCQ	SAQ	
HomUG- ObGy-I- 3.68	K & S	КН		Discuss the clinical features Secondary Dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials CBL PBL	MCQ	SAQ	

HomUG- ObGy-I- 3.69	K & S	КН		Differentiate Primary and Secondary Dysmenorrhoea	C1	MK	Small groundiscussion Tutorials CBL PBL	ір М	MCQ	SAQ	
HomUG- ObGy-I- 3.70	K & S	K		Define Mittelschmerz's syndrome	C1	MK	Lecture Small groundiscussion CBL PBL		MCQ	SAQ	
HomUG- ObGy-I- 3.71	K & S	КН		Discuss the causes for Mittelschmerz's syndrome	C1	MK	Lecture Sma group discussion Tutorials		MCQ	SAQ	
HomUG- ObGy-I- 3.72	K & S	КН		Discuss the general Management of Dysmenorrhoea	C2	MK	Small groundiscussion Tutorials CBL PBL	ір М	MCQ	SAQ	
HomUG- ObGy-I- 3.73	НО	КН	Homoeopathic	Discuss the homoeopathic remedies in Spasmodic dysmenorrhoea	C2	MK	Small groundiscussion Tutorials CBL PBL	ір М	MCQ	SAQ	Materia Medica
HomUG -ObGy-I- 3.74	НО	КН	materia medica & therapeutics	Discuss the homoeopathic remedies in Congestive dysmenorrhoea	C2	MK	Small groundiscussion Tutorials PBL CBL	р М	MCQ	SAQ	Materia Medica

HomUG- ObGy-I- 3.75	НО	КН		Discuss the homoeopathic remedies in Membranous dysmenorrhoea	C2	MK	Small group discussion Tutorials CBL CBL	MCQ	SAQ	Materia Medica
HomU-G ObGy-I- 3.76	НО	КН		Discuss the characteristic features of indicated remedies in dysmenorrhoea	C2	MK	Lecture Small group discussion Tutorials CBL PBL	MCQ	SAQ	Materia Medica
HomUG- ObGy-I- 3.77	K & S	K	PMS	Define Premenstrual Syndrome	C1	MK	Lecture Small group discussion Tutorials CBL PBL	MCQ	SAQ	
HomUG- ObGy-I- 3.78	K & S	KH		Discuss the causes for premenstrual syndrome	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG- ObGy-I- 3.79	K & S	K		Discuss the clinical features of premenstrual syndrome	C1	MK	Lecture Small group discussion CBL PBL Tutorials	MCQ	SAQ	
HomUG- ObGy-I- 3.80	K & S	КН		Discuss the general management of premenstrual Syndrome	C1	MK	Lecture Small group discussion Tutorials CBL	MCQ	SAQ	

HomUG- ObGy-I- 3.81	НО	КН	Homoeopathic materia medica & therapeutics	Explain the Homoeopathic remedies in Premenstrual complaints	C1	MK	Small group discussion Tutorials CBL PBL	MCQ	SAQ	Materia Medica
HomUG- ObGy-I- 3.82	НО	КН		Discuss the characteristic features of indicated remedies in Premenstrual complaints	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	Materia Medica
HomUG- ObGy-I- 3.83	K & S	K	Menopause	Define Menopause	C1	MK	Lecture Small group discussion Tutorials	MCQ		
HomUG- ObGy-I- 3.84	K & S	K		Discuss the Pathophysiology of Menopause	C1	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	
HomUG- ObGy-I- 3.85	K & S	K		Discuss the Anatomical Changes taking place during menopause	C1	MK	Lecture Small 0	MCQ	SAQ	
HomUG- ObGy-I- 3.86	K & S	K		Discuss the clinical features of menopause	C1	MK	Lecture Small group discussion PBL CBL	SAQ/MCQ		
HomUG- ObGy-I- 3.87	K & S	K		Define Menopausal syndrome	C1	MK	Lecture small group discussion PBL CBL	MCQ	SAQ	

HomUG- ObGy-I- 3.88	K & S	K		Discuss the anatomical and metabolic changes taking place during menopause	C1	MK	Lecture small group discussion PBL CBL	MCQ	SAQ	C1
HomUG- ObGy-I- 3.89	K & S	K	Perimenopause	Define Perimenopause	C1	MK	Lecture small group discussion PBL CBL	MCQ	SAQ	C1
HomUG- ObGy-I- 3.90	K & S	K	Artificial menopause	Define Artificial menopause	C1	MK	Lecture small group discussion PBL CBL	MCQ	SAQ	C1
HomUG- ObGy-I- 3.91	K & S	K	Premature menopause	Define Premature Menopause	C1	MK	Lecture/ Small group discussion	MCQ		
HomUG- ObGy-I- 3.92	K & S	K		Discuss aetiology of Premature Menopause	C1	MK	Lecture/ Small group discussion		SAQ	
HomUG- ObGy-I- 3.93	K & S	K	Delayed menopause	Define delayed menopause	C1	MK	Lecture Small group discussion	MCQ		
HomUG- ObGy-I- 3.94	K & S	K		Discuss causes of delayed menopause	C1	MK	Lecture Small group discussion		SAQ	
HomUG- ObGy-I- 3.95	K & S	КН	Management	Discuss the general management of Menopause	C1	MK	Lecture small group discussion PBL CBL		SAQ	

HomUG- ObGy-I- 3.96	K & S	КН	Homoeopathic Materia medica & therapeutics	List the Homoeopathic remedies for Menopause.	C2	MK	Ssmall group discussion PBL CBL	MCQ	SAQ
HomUG- ObGy-I- 3.97	K & S	КН		Discuss the characteristic features of the indicated remedies.	C2	MK	Lecture small group discussion PBL CBL	MCQ	SAQ
HomUG- ObGy-I- 3.98	K & S	K	Postmenopausal bleeding Investigations	Define Postmenopausal bleeding	C1	MK	Lecture/ small group discussion PBL CBL	MCQ	SAQ
HomUG- ObGy-I- 3.99	K & S	КН		Discuss the causes for Postmenopausal bleeding	C1	MK	Lecture small group discussion PBL CBL	MCQ	SAQ
HomUG- ObGy-I- 3.100	K & S	KH		Discuss the important investigations required for postmenopausal bleeding	C2	MK	Lecture/ small group discussion PBL CBL	MCQ	SAQ
HomUG- ObGy-I- 3.101	K & S	КН	Investigations	Discuss what are the investigation required in case of post-menopausal bleeding	C2	MK	Lecture/ small group discussion PBL CBL	MCQ	SAQ
HomUG- ObGy-I- 3.102	K & S	КН	Differential diagnosis	Discuss the differential diagnosis for postmenopausal bleeding	C1	MK	Lecture / small group discussion PBL CBL	MCQ	SAQ

HomUG- ObGy-I- 3.103	K & S	КН	Materia Medica & therapeutics	Discuss the homoeopathic remedies for postmenopausal bleeding	C2	MK	Lecture / small group discussion PBL CBL	MCQ	SAQ	
HomUG -ObGy-I- 3.104	K & S	КН		Discuss the characteristic features of the indicated remedies.	C2	MK	Lecture/ small group discussion PBL CBL	MCQ	SAQ	

6.4 Gynaecological case taking, Physical examination, investigation and approach to clinical diagnosis and differential diagnosis

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SI. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 4.1	ΗО	K	Case taking	Discuss the format of history taking in gynaecological conditions.	C 2	MK	Small group discussion CBL			
HomUG- ObGy-1 4.2	ΗО	Shows		Explain the importance of communication skills while case taking.	P2	MK	Small group discussion CBL			
HomUG- ObGy-1 4.3	ΗО	КН		Explain the importance of clinical skills in case taking	CI	MK	Small group discussion CBL Clinical examination	VIVA		
HomUG- ObGy-1 4.4	НО	КН		Discuss the Homoeopathic case	C 2	MK	Small group discussion	VIVA		

				taking in female complaints as per Organon of Medicine			Case based learning CBL		
HomUG- ObGy-1 4.5	РС	Does	Physical examination	Demonstrate the general physical examination	P 2	MK	Small group discussion Clinical demonstration	MCQ	
HomUG- ObGy-1 4.6	PС	Does	Abdominal examination	Describe how to perform per abdominal examination.	P 2	MK	Small group discussion Tutorials CBL Bedside	MCQ	
Hom-UG ObGy-1 4.7	PC	Does	Vaginal examination	Describe how to perform per vaginal speculum examination.	P 2	MK	Small group discussion Tutorials CBL Bedside	MCQ	
HomUG- ObGy-1 4.8	K & S	КН	Investigations	Discuss the investigations required in dysmenorrhea	C 2	MK	Small group discussion Tutorials CBL PBL	MCQ	
HomUG- ObGy-1 4.9	K & S	KH		Discuss the investigation required in Amenorrhoea	C 2	MK	Small group discussion Tutorials CBL PBL	MCQ	
HomUG- ObGy-1	K & S	KH		Discuss the investigations	C 2	MK	Small group discussion	MCQ	

4.10 HomUG ObGy-1 4.11	K & S	КН		required in AUB case. Discuss the investigation required in malformations of the FGT	C 2	MK	Tutorials CBL PBL Small group discussion CBL PBL	MCQ	
Hom-UG- ObGy-1 4.12 HomUG- ObGy-1 4.13	K & S	КН	Clinical diagnosis Pathological diagnosis	Derive the clinical diagnosis from the signs & symptoms Derive the pathological diagnosis with a help of laboratory and	C 2	MK MK	Small group discussion CBL PBL Small group discussion CBL PBL	MCQ MCQ	
HomUG- ObGy-1 4.14	K & S	КН	Differential diagnosis	radiological findings. Discuss the differential diagnosis with relation to patient history & Signs & Symptoms,	C 2	MK	Small group discussion CBL PBL	MCQ	

6.5 Epidemiology – Predisposition including fundamental miasm; personality type known to develop particular disease

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SI. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 5.1	ΗО	K	Predisposition	Define predisposition	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG- ObGy-1 5.2	НО	K		Discuss the relevance of predisposing factors for the disease.	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG- ObGy-1 5.3	НО	K	Miasm	Define miasm	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG- ObGy-1 5.4	НО	K		Discuss the types of miasms	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG- ObGy-1 5.5	НО	K		Discuss the relevance of miasm for the disease conditions	C1	MK	Lecture Small group discussion	MCQ		Organon of medicine

							Tutorials		
HomUG- ObGy-1 5.6	ΗО	K	Fundamental miasm	Define fundamental miasm	C1	MK	Lecture Small group discussion Tutorials	MCQ	Organon of medicine
HomUG- ObGy-1 5.7	ΗО	K		Discuss the relevance of fundamental miasm for the disease	C1	MK	Lecture Small group discussion Tutorials	MCQ	Organon of medicine
HomUG- ObGy-1 5.8	ΗО	K	Personality type	Discuss the importance of personality of the patient for developing Disease condition.	C1	MK	Lecture Small group discussion Tutorials	MCQ	Organon of medicine

6.6 Uterine displacements- Prolapse, retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in homoeopathic perspective.

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Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 6.1	K & S	K	Genital Prolapse	Define Genital prolapse	C1	MK	Lecture Small group discussion Charts	MCQ	SAQ	
HomUG- ObGy-1 6.2	K & S	K		Discuss the aetiology of Genital prolapse	C1	MK	Lecture Small group discussion Tutorials Charts	MCQ	SAQ	
HomUG- ObGy-1 6.3	K & S	K		Classify genital prolapses	C1	MK	Lecture Small group discussion Tutorials Charts	MCQ	SAQ	
HomUG- ObGy-1 6.4	K & S	K	Rectocele	Define Rectocele	C1	MK	Lecture Small group discussion Tutorials Charts	MCQ	SAQ	
HomUG- ObGy-1 6.5	K & S	K	Cystocele	Define cystocele	C1	MK	Lecture Small group discussion	MCQ	SAQ	

HomUG -ObGy-1 6.6	K & S	K		Discuss the degrees of cystocele	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ
HomUG- ObGy-1 6.7	K & S	K	Uterine prolapse	Discuss the degrees of uterine prolapse	C1	MK	Lecture Small group discussion CBL PBL	MCQ	SAQ
HomUG- ObGy-1 6.8	K & S	K	Genital prolapse	Describe the aetiology of genital prolapse	C1	MK	Lecture Small group discussion Tutorials Charts	MCQ	SAQ
HomUG- ObGy-1 6.9	K & S	K		Discuss the Clinical Features of Genital prolapse	C2	MK	Lecture Small g Clinical examination CBL CBL	MCQ	SAQ
HomUG- ObGy-1 6.10	K & S	K		Discuss the Differential Diagnosis of Genital prolapse	C2	MK	Lecture Small group discussion	MCQ	SAQ
HomUG- ObGy-1 6.11	K & S	K		Discuss the Prophylaxis of Genital prolapse	C2	MK	Small group discussion Tutorials	MCQ	SAQ
HomUG- ObGy-1 6.12	K & S	K		Discuss the general management for Genital prolapse	C2	DK	Lecture Small group discussion Tutorials	MCQ	SAQ
HomUG- ObGy-1	K & S	K		Define Procidentia	C2	DK	Lecture	MCQ	SAQ

6.13 HomUG- ObGy-1 6.14	K & S	K		Discuss the complications of genital prolapse	C2	DK	Small group discussion Tutorials Lecture Small group discussion	MCQ	SAQ	
HomUG- ObGy-1 6.15	K & S	K	Homoeopathic Materia medica & therapeutics	Discuss the Homoeopathic remedies for genital prolapse	C2	MK	Tutorials Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG- ObGy-1 6.16	K & S	K	Discuss the	Discuss the Characteristic features of indicated remedies.	C2	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG- ObGy-1 6.17	K & S	K	Pessary treatment	Define Pessary treatment	C2	MK	Lecture Small group discussion Tutorials Charts	MCQ		
HomUG- ObGy-1 6.18	K & S	K		Discuss the indications & contraindications of pessary treatment	C2	MK	Lecture Small group discussion Tutorials	MCQ/	SAQ	
HomUG- ObGy-1 6.19	K & S	K	Surgical management	List the surgical management for genital prolapse	C2	DK	Lecture Small group discussion	MCQ		
HomUG- ObGy-1 6.20	K & S	K		Define retroversion of uterus	C1	MK	Lecture Small group discussion	MCQ		

HomUG- ObGy-1 6.21	K & S	K	Retroversion	Discuss the causes of retroverted uterus	C2	MK	Lecture Small group discussion	MCQ	SAQ
HomUG- ObGy-1 6.22	K & S	K		List the types of retroverted uterus	C1	MK	Lecture Small group discussion	MCQ	SAQ
HomUG- ObGy-1 6.23	K & S	K		Discuss the clinical features of retroverted uterus	C1	MK	Lecture Small group discussion	MCQ	SAQ
HomUG- ObGy-1 6.24	K & S	K	Retroversion degrees	Discuss the degrees of retroversion of uterus	CI	MK	Lecture Small group discussion	MCQ	SAQ
HomUG- ObGy-1 6.25	K & S	K	Differential diagnosis	Discuss the Differential Diagnosis of retroverted uterus	C2	MK	Lecture Small group discussion	MCQ	SAQ
HomUG- ObGy-1 6.26	K & S	K	Homoeopathic material medica & therapeutics	Discuss the Homoeopathic remedies for retroverted uterus	C2	MK	Lecture Small group discussion Tutorials	MCQ	SAQ
HomUG- ObGy-1 6.27	K & S	K	therapeaties	Discuss the characteristic features of indicated remedies.	C2	MK	Lecture Small group discussion Tutorials	MCQ	SAQ
HomUG- ObGy-1 6.28	K & S	K	Inversion	Define inversion of uterus	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ
HomUG- ObGy-1 6.29	K & S	K		Recall the aetiology of inverted uterus	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ

HomUG- ObGy-1 6.30	K & S	K		Classify the types of inversion of uterus	C2	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG- ObGy-1 6.31	K & S	K		Discuss the Clinical Features of inverted uterus	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG- ObGy-1 6.32	K & S	КН	Scope & Limitation of Homoeopathy	Discuss the scope & limitation of Homoeopathy in inversion of uterus	C2	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG- ObGy-1 6.33	K & S	КН	Homoeopathic materia medica & therapeutics	List the Homoeopathic remedies indicated in inversion of uterus	C2	MK	Small group discussion CBL PBL	MCQ	SAQ	

6.7 Sex & Intersexuality – Knowledge and scope to eradicate genetic Dyscrasias, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook

	4							Assess	ment	
Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 7.1	K & S	K	Sex & Intersexuality	Define Klinifelters syndrome	C1	DK	Lecture Small group discussion Tutorials Charts	MCQ		
HomUG - ObGy-1 7.2	K & S	K		Define Inter-sex	C2	DK	Lecture Small group discussion Tutorials Charts	MCQ		
HomUG- ObGy-1 7.3	K & S	K	Turner's syndrome	Explain Turner's syndrome	C1	DK	Lecture Small group discussion Tutorials Charts		SAQ	
HomUG- ObGy-1 7.4	K & S	K	Hermaphrodites	Discuss True Hermaphrodites & mention types	C2	DK	Lecture Small group discussion Tutorials Charts		SAQ	
HomUG- ObGy-1	K & S	K	Male intersex	Discuss the male Inter-sex	C2	DK	Lecture	VIVA		

7.5							Small group discussion Tutorials Charts		
HomUG- ObGy-1 7.6	НО	K	Personality Type	Discuss the relevance of Predisposition with respect to Intersexuality	C2	MK	Small group discussion Tutorials Charts	VIVA	Organon of medicine
HomUG- ObGy-1 7.7	НО	K	НО	Discuss the relevance of miasm with respect to intersexuality.	C2	MK	Lecture Small group discussion Tutorials	VIVA	Organon of medicine
HomUG- ObGy-1 7.8	НО	K	НО	Discuss the relevance of predisposition with respect to intersexuality	C2	MK	Lecture Small group discussion Tutorials	VIVA	Organon of medicine
HomUG- ObGy-1 7.9	НО	K	НО	Discuss the importance of personality of the patient for developing Disease condition	C2	MK	Lecture Small group discussion Tutorials	VIVA	Organon of medicine
HomUG- ObGy-1 7.10	НО	K	Homoeopathic materia medica & therapeutics	Discuss the homoeopathic matria medica therapeutics for Intersexuality	C2	DK	Lecture Small group discussion Tutorials	MCQ	Materia Medica

6.8 General & Homeopathic Management, Repertorisation, Therapeutics, Posology, Formulation of prognostic criteria and prognosis of related topics in Gynaecology

	5 .							Assess	ment	
Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 8.1	ΗО	КН	Management	Explain the general management in Dysmenorrhoea	C 2	MK	Lecture Small group discussion Tutorials CBL	Viva	SAQ	
HomUG- ObGy-1 8.2	НО	KH		Explain the general management in Amenorrhoea	C 2	MK	Lecture Small group discussion Tutorials CBL	Viva	SAQ	
HomUG- ObGy-1 8.3	НО	КН		Explain the general management in Genital prolapse	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA	SAQ	
HomUG- ObGy-1 8.4	НО	КН		Explain the general management in retroversion of the uterus	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA	SAQ	

HomUG- ObGy-1 8.5	ΗО	K	Repertory	Discuss the repertory medium used in different gynaecological conditions	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA	
HomUG- ObGy-1 8.6	ΗО	KH		Discuss the selection of repertory based on symptoms	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA	
HomUG- ObGy-1 8.7	ΗО	K	Homoeopathic Materia medica & therapeutics and posology	Co-relate the homoeopathic remedies, potency selection and repetition of dose in relation to gynaecological conditions	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA	

Unit 2: Obstetrics, Infant Care & Homoeopathic Therapeutics

6.9 Introduction to Obstetrics and Newborn care related with Homoeopathic Philosophy. Therapeutics and Repertorisation

								Asses	sment	
Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 9.1	K & S	K	Introduction to Obstetrics	Define Obstetrics	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 9.2	K & S	K	Introduction to newborn care	Define the term New born Infant	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 9.3	K & S	K	Introduction to newborn care	Define Still birth	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 9.4	НО	K	Homoeopathic case taking	Explain the Homoeopathic case taking in female complaints as per Organon of Medicine.	P1	MK	Lecture Tutorials Small group discussion	VIVA		Organon of medicine
HomUG- ObGy-1 9.5	НО	K		Describe the Hahnemann's concept of action of homoeopathic medicines in pregnant women & infants. Foot note aphorism 284	C2	MK	Lecture Small group discussion Tutorials	VIVA		Organon of medicine

HomUG-	ΗО	KH	Homoeopathic	Discuss the Homoeopathic	C2	MK	Lecture	VIVA	Organon
ObGy-1			Materia Medica	Materia Medica with			Small group		of
9.6			& Therapeutic	Obstetrics and new born			discussion		medicine
			source books	care from source books			Tutorials		
HomUG- ObGy-1 9.7	НО	K	Repertory	Discuss the repertory medium used in different obstetrical and new born care.	C2	MK	Lecture Small group discussion Tutorials	VIVA	Repertory
HomUG- ObGy-1 9.8	НО	K	Repertory	Discuss the selection of repertory based on symptoms in obstetrics.	C2	MK	Lecture Small group discussion Tutorials CBL	MCQ	Repertory
HomUG- ObGy-1 9.9	НО	K	Repertory	Discuss the selection of repertory based on symptoms in new born care.	C2	MK	Lecture Small group discussion Tutorials CBL	MCQ	Repertory

6.10 Fundamentals of reproduction

	1							Assessi	nent	
Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 10.1	K & S	K	Gametogenesis	Define oogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.2	K & S	КН		Discuss the stages of oogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 10.3	K & S	КН		Define Spermatogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.4	K & S	КН		Discuss the stages of spermatogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 10.5	K & S	КН	Ovulation	Define ovulation	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.6	K & S	K		Describe the mechanism of ovulation	C1	MK	Lecture Tutorials		SAQ	Physiology, Anatomy

							Small group discussion			
HomUG- ObGy-1 10.7	K & S	K		Describe the hormonal regulation of ovulation	C1	MK	Lecture Tutorials Small group discussion		SAQ	Physiology, Anatomy
HomUG- ObGy-1 10.8	K & S	K	Fertilization	Define Fertilization	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.9	K & S	K		Describe Morula	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.10	K & S	K		Describe Blastocyst	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.11	K & S	K	Implantation	Define Implantation	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.12	K & S	K		Discuss the Stages of Implantation	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.13	K & S	K		Discuss the functions of Trophoblast	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1	K & S	K	Decidua	Define Decidua	C1	MK	Lecture Tutorials	MCQ		Physiology, Anatomy

10.14							Small group discussion			
HomUG- ObGy-1 10.15	K & S	K		Define Decidual Reaction	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 10.16	K & S	K		Describe the layers of Decidua	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 10.17	K & S	K		Describe the Functions of Decidua	C1	MK	Lecture Tutorials Small group discussion		SAQ	Physiology, Anatomy
HomUG- ObGy-1 10.18	K & S	K	Chorion & Chorionic Villi	Define Chorion	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
Hom-UG ObGy-1 2.28	K & S	K		Describe the Chorionic Villi	C1	MK	Lecture Tutorials Small group discussion		SAQ	Physiology, Anatomy
HomUG- ObGy-1 10.19	K & S	K	Inner Cell Mass	Describe the development of Inner Cell Mass	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy

6.10.1 Development of Intra Uterine Pregnancy- Placenta and foetus.

	V			_	ert			Assessi	nent	
Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 11.1	K & S	K	Placenta	Define Placenta	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.2	K & S	K		Discuss the development of Placenta	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.3	K & S	K		Describe the Placenta at Term	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.4	K & S	K		Describe the Structure of Placenta	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.5	K & S	K		Describe the Placental Circulation	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.6	K & S	K		Discuss the changes with Placental Ageing	C1	DK	Lecture Tutorials	MCQ		Physiology, Anatomy

							Small group discussion			
HomUG- ObGy-1 11.7	K & S	K		List the Functions of Placenta	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.8	K & S	K		List the Hormones of Placenta	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.9	K & S	K		List Functions of the hormones of Placenta	C1	DK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.10	K & S	K	Foetal Membranes	Describe the Structure of Chorion	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.11	K & S	K		Describe Structure of Amnion	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.12	K & S	K		List the Functions of Foetal Membranes	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1 11.13	K & S	K	Amniotic Cavity, Amniotic Fluid	Discuss the development of Amniotic Cavity	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG- ObGy-1	K & S	K		Discuss the Circulation of Amniotic Fluid	C1	DK	Lecture Tutorials	MCQ		Physiology, Anatomy

11.14							Small group discussion			
HomUG- ObGy-1 11.15	K & S	K		Discuss the Physical Features of Amniotic Fluid	C1	DK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.16	K & S	K		Discuss the Composition of Amniotic Fluid	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.17	K & S	K		Discuss the Functions of Amniotic Fluid	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG- ObGy-1 11.18	K & S	K	Umbilical Cord	Discuss the development of Umbilical Cord	C1	DK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 11.19	K & S	K		Discuss the Structure of Umbilical Cord	C1	MK	Lecture Tutorials Small group discussion Charts	MCQ		
HomUG- ObGy-1 11.20	K & S	K		Discuss the Characteristics of Umbilical Cord	C1	DK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 11.21	K & S	K	The Foetus	List the periods of Prenatal Development of Foetus	C1	DK	Lecture Tutorials Small group discussion	MCQ		

HomUG- ObGy-1 11.22	K & S	K		Discuss the Criteria for assessment of Growth of Foetus	C1	NK	Lecture Tutorials Small group discussion Charts	MCQ		
HomUG- ObGy-1 11.23	K & S	K		Discuss the Systemic & Physiological changes occurs during intra uterine life.	C1	DK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG- ObGy-1 11.24	K & S	K		Discuss the Foetal Circulation	C1	MK	Lecture Tutorials Small group discussion Charts	MCQ	SAQ	
HomUG- ObGy-1 11.25	K & S	K		Discuss the changes in Foetal Circulation at birth.	C1	MK	Lecture Tutorials Small group discussion Charts	MCQ	SAQ	
HomUG- ObGy-1 11.26	K & S	K	Foetus in Utero	Define Lie	C1	MK	Lecture Tutorials Small group discussion Clinical	MCQ VIVA		
HomUG- ObGy-1 11.27	K & S	K		Define Presentation	C1	MK	Lecture Tutorials Small group discussion Manikin	MCQ VIVA		
HomUG- ObGy-1 11.28	K & S	K		Define Presenting part	C1	MK	Lecture Tutorials	MCQ VIVA		

							Small group discussion Manikin		
HomUG- ObGy-1 11.29	K & S	K		Define Attitude	CI P2	MK	Lecture Tutorials Small group discussion Manikin	MCQ VIVA	
HomUG- ObGy-1 11.30	K & S	K		Define Denominator	C1 P 2	MK	Lecture Tutorials Small group discussion Manikin	MCQ VIVA	
HomUG- ObGy-1 11.31	K & S	K		Define Position	Ci P2	MK	Lecture Tutorials Small group discussion Manikin	MCQ VIVA	
HomUG- ObGy-1 11.32	K & S	K	Foetal Skull and Maternal Pelvis	Demonstrate the Areas of Foetal Skull	CI P2	MK	Lecture Tutorials Small group discussion Charts	MCQ VIVA	
HomUG- ObGy-1 11.33	K & S	K		Demonstrate the Sutures of Foetal Skull	C1 P2	MK	Lecture Tutorials Small group discussion Demonstration	MCQ VIVA	
HomUG- ObGy-1 11.34	K & S	K		Demonstrate the Fontanels of Foetal Skull	C1 P2	MK	Lecture Tutorials Small group discussion	MCQ	

						Demonstration			
HomUG- ObGy-1 11.35	K & S	K	Demonstrate the Diameters of Foetal Skull	C1 P2	MK	Lecture Tutorials Small group discussion Demonstration	MCQ	SAQ	
HomUG- ObGy-1 11.36	K & S	K	Define Moulding	C1	MK	Lecture Tutorials Small group discussion	MCQ VIVA		
HomUG- ObGy-1 11.37	K & S	K	Describe Mechanism of Moulding	C1	MK	Lecture Tutorials Small group discussion Charts	MCQ VIVA		
HomUG- ObGy-1 11.38	K & S	K	Discuss the Importance of Moulding	C1	MK	Lecture Tutorials Small group discussion Dummy	VIVA		
HomUG- ObGy-1 11.30	K & S	K	Define Caput Succedaneum	C1	MK	Lecture Tutorials Small group discussion	MCQ VIVA	SAQ	
HomUG- ObGy-1 11.39	K & S	K	Describe Mechanism of formation of Caput Succedaneum	C1	MK	Lecture Tutorials Small group discussion Dummy	MCQ VIVA	SAQ	
HomUG- ObGy-1 11.40	K & S	K	Discuss Importance of Caput Succedaneum	C1	MK	Lecture Tutorials	MCQ VIVA	SAQ	

						Small group discussion Dummy		
HomUG- ObGy-1 11.41	K & S	K	Define False Pelvis	C 1 P 2	MK	Lecture Tutorials Small group discussion Charts	MCQ VIVA	
HomUG- ObGy-1 11.42	K & S	K	Define True Pelvis	C1 P 2	MK	Lecture Tutorials Small group discussion Pelvis	MCQ VIVA	
HomUG- ObGy-1 11.43	K & S	K	Describe the Inlet of the Pelvis	C 1 P 2	MK	Lecture Tutorials Small group discussion Pelvis	MCQ VIVA	
HomUG- ObGy-1 11.44	K & S	K	Demonstrate the diameters of the Pelvis	C1 P2	MK	Lecture Tutorials Small group discussion Pelvis	MCQ	
HomUG- ObGy-1 11.45	K & S	S	Demonstrate Inlet & outlet of the Pelvis	C1 P2	MK	Lecture Tutorials Small group discussion Pelvis	MCQ	
HomUG- ObGy-1 11.46	K & S	S	Demonstrate Mid pelvis	C1	MK	Lecture Tutorials Small group discussion	MCQ	

						Pelvis			
HomUG-	K &	S	Demonstrate the anterior	C 1	MK	Lecture	MCQ	SAQ	
ObGy-1	S		and transverse diameters	P 2		Tutorials			
11.47			of the pelvic inlet			Small group			
						discussion			
						Manikin			

6.11 Diagnosis of pregnancy, Investigations & examinations, applied anatomy & physiology, Normal pregnancy – Physiological Changes

	7							Assess	ment	
SI. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 12.1	K & S	K	Diagnosis of Pregnancy	Define Gestational age of Foetus	C1	DK	Lecture Tutorials Small group discussion Manikin	MCQ		
HomUG- ObGy-1 12.2	K & S	K		Define Ovulatory age of Foetus	C1	MK	Lecture Tutorials Small group discussion Manikin	MCQ		
HomUG- ObGy-1 12.3	K & S	K		Discuss the subjective symptoms in 1 st trimester of pregnancy.	C1	MK	Lecture Tutorials Small group discussion Manikin	MCQ		

HomUG- ObGy-1 12.4	K & S	K	Discuss the objective signs in 1 st trimester pregnancy.	C1	MK	Lecture Tutorials Small group discussion Manikin	MCQ	SAQ
HomUG- ObGy-1 12.5	K & S	K	List the Immunological tests for diagnosis of Pregnancy in 1 st Trimester	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.6	K & S	K	Discuss the subjective symptoms of 2 nd trimester of pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.7	K & S	K	Discuss the objective signs of 2 nd trimester of pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.8	K & S	K	List the investigations of 2 nd trimester of pregnancy	C 2	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.9	K & S	K	Discuss the subjective symptoms of 3 rd trimester of pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1	K & S	K	Discuss the objective signs of 3 rd trimester of pregnancy	C1	MK	Lecture Tutorials	MCQ	SAQ

12.10							Small group discussion		
HomUG- ObGy-1 12.11	K & S	K		List the investigations of 3 rd trimester of pregnancy	C2	MK	Lecture Tutorials Small group discussion\	MCQ	SAQ
HomUG- ObGy-1 12.12	K & S	K		Discuss the Differential Diagnosis of Pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.13	K & S	K		List the signs of previous childbirth	C1	DK	Lecture Tutorials Small group discussion	MCQ	
HomUG- ObGy-1 12.14	K & S	K		Describe the methods of calculation of EDD	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.15	K & S	S		Calculate EDD of Pregnant Woman using Nagele's formula	P1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.16	PC	S	Methods of Obstetrical Examination	Demonstrate the Abdominal Examination	P-2	MK	Tutorials Small group discussion Mannikin Bedside	MCQ	SAQ
HomUG- ObGy-1	PC	K		List the types of Obstetrical grips	C 1 P 2	MK	Lecture Tutorials	MCQ	SAQ

12.17							Small group		
							discussion		
HomUG- ObGy-1	PC	S		Demonstrate the Obstetrical grips	C 1 P I	MK	Lecture Tutorials	MCQ	
12.18							Small group discussion Mannikin Bedside		
HomUG- ObGy-1 12.19	PC	PI		Demonstrate the pelvic grips	C 1 P 2	MK	Lecture Tutorials Small group	MCQ	
							discussion		
HomUG- ObGy-1 12.20	K & S	K		Explain Braxton-Hicks contraction(3)	C1	MK	Lecture Tutorials Small group	MCQ	SAQ
							discussion		
HomUG- ObGy-1 12.21	K & S	K	Physiological changes during pregnancy	Describe the physiological changes occurs in the genital organs during pregnancy.	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.22	K & S	K		Describe the physiological changes occurring in Breast during pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.23	K & S	K	Cutaneous changes	Discuss the cutaneous changes occurs during pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.24	K & S	K	Weight gain	Discuss the physiological weight gain during pregnancy	C1	MK	Lecture Tutorials	MCQ	SAQ

HomUG- ObGy-1 12.25	K & S	K	Metabolic	Discuss the metabolic changes occurs during pregnancy	C1	MK	Small group discussion Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.26	K & S	K	Physiological changes	Discuss the haematological changes occurs during pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG- ObGy-1 12.27	K & S	K	Haematological changes	Discuss the Cardio vascular changes occurs during pregnancy					
HomUG- ObGy-1 12.28	K & S	K	CVS	Discuss the Systemic changes occurs during pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ

6.12 Antenatal care – aims, objectives, visits, advise, procedures, investigations, identifying high risk cases, scope and limitation of management in Homeopathy

	Α.							Asses	sment	Integration
Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	
HomUG- ObGy-1 13.1	K & S	K	Antenatal care	Define Antenatal Care	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 13.2	K & S	K		Discuss the Aims of Antenatal Care	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG- ObGy-1 13.3	K & S	K		Discuss the Objectives of Antenatal Care	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG- ObGy-1 13.4	PC	K		Discuss the procedure at first ANC visit	C1	MK	Tutorials Small group discussion	MCQ	SAQ	
HomUG- ObGy-1 13.5	PC	K		Discuss the procedure at subsequent visits	C1	MK	Tutorials Small group discussion	MCQ	SAQ	
HomUG- ObGy-1	PC	K		Discuss the important Investigations done for	C1	MK	Lecture Tutorials	MCQ	SAQ	

13.6			Clinical Asser Foetal well bei				Small discussion	group			
HomUG- ObGy-1 13.7	K & S	K	Discuss the Investigations Late Pregnancy	done in	C1	DK	Lecture Tutorials Small discussion	group	MCQ	SAQ	
HomUG- ObGy-1 13.8	K & S	K	Discuss the M Prenatal Screening	Iethods of Genetic	C1	MK	Lecture Tutorials Small discussion	group	MCQ	SAQ	
HomUG- ObGy-1 13.9	K & S	K	Discuss the procedures for Diagnosis	Invasive r Prenatal	C1	NK	Lecture Tutorials Small discussion	group	MCQ		
HomUG- ObGy-1 13.10	K & S	K	List the Non procedures for Diagnosis		C1	NK	Lecture Tutorials Small discussion	group	MCQ		
HomUG- ObGy-1 13.11	K & S	K	Explain the advice given mother	antenatal to the	C1 P I	MK	Lecture Tutorials Small discussion	group		SAQ	
HomUG- ObGy-1 13.12	K & S	K	Discuss the i of Antenatal ca	_	C1 P I	MK	Lecture Tutorials Small discussion	group		SAQ	
HomUG- ObGy-1 13.13	K & S	K	Discuss the re- Pre-conception Counselling		C1	MK	Lecture Tutorials Small discussion	group	VIVA		

HomUG- ObGy-1 13.14	PC	KH	Antenatal visits	Discuss the normal antenatal visits during pregnancy	C2	MK	Lecture Tutorials Small discussion	group	VIVA			
HomUG- ObGy-1 13.15	PC	КН	Antenatal diet	Discuss the antenatal diet to the pregnant mother	C2	MK	Lecture Tutorials Small discussion Chart	group	MCQ			
HomUG- ObGy-1 13.16	ΗО	KH	Scope of homoeopathy	Discuss the Scope of Homoeopathic management in antenatal complaints	C I P 1	MK	Lecture Tutorials Small discussion	group		SAQ		
HomUG- ObGy-1 13.17	НО	KH	Management in Homoeopathy	Discuss the Scope of Homoeopathic management in high risk cases pregnancy	C1 P1	MK	Lecture Tutorials Small discussion CBL	group	MCQ VIVA		Organon Medicine, Medica, Re	of Materia epertory
HomUG- ObGy-1 13.18	НО	K	Scope & Limitations	Discuss the Limitations of Homoeopathic management in high risk pregnancy	C1 P 1	MK	Lecture Tutorials Small discussion CBL	group	VIVA		Organon Medicine, Medica, Re	of Materia epertory

6.13 Common conditions such as Vomiting, backache, constipation in pregnancy and Homoeopathic Management

	A			gin .	ert			Assessi	ment	Integration
SI. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	
HomUG- ObGy-1 14.1	K & S	K	Vomiting in pregnancy	Define simple vomiting in pregnancy	C1	MK	Lecture/ Integrated teaching/ AV aids	MCQ VIVA		
HomUG- ObGy-1 14.2	K & S	K		Define hyperemesis gravidarum	C1	MK	Lecture/ Integrated teaching/ AV aids	MCQ VIVA		
HomUG- ObGy-1 14.3	K & S	K		List aetiology of Hyperemesis gravidarum	C1	MK	Lecture/ Integrated teaching/ AV aids		LA SAQ	
HomUG- ObGy-1 14.4	K & S	K		Discuss the clinical features of Hyperemesis gravidarum	C1	MK	Lecture/ Integrated teaching/ AV aids		SAQ	
HomUG- ObGy-1 14.5	K & S	K		Explain the Investigations required for Hyperemesis gravidarum	C1	MK	Lecture/ Integrated teaching/ AV aids		SAQ	
HomUG- ObGy-1 14.6	K & S	K		Discuss the Complications of Hyperemesis gravidarum	C1	MK	Lecture/ Integrated teaching/ AV aids		SAQ	

HomUG- ObGy-1 14.7	K & S	K		Discuss the Management of Hyperemesis gravidarum	C1	MK	Lecture/ Integrated teaching/ AV aids		SAQ	
HomUG- ObGy-1 14.8	НО	K	Homoeopathic Management	Discuss the homoeopathic Therapeutics for Hyperemesis Gravidarum	C2	MK	Lecture/ Integrated teaching/ Project Based Learning		SAQ	Materia Medica
HomUG- ObGy-1 14.9	K & S	K	Backache	List the causes of backache during pregnancy	C1	MK	Lecture/ Integrated teaching/ AV aids	MCQ VIVA	SAQ	Physiology
HomUG- ObGy-1 14.10	K & S	K		Discuss the Auxilliary management of backache during pregnancy	C2	MK	Lecture/ Integrated teaching/ AV aids	MCQ VIVA		Physiology
HomUG- ObGy-1 14.11	НО	K	Homoeopathic Management	Discuss the homoeopathic Therapeutics for Backache during Pregnancy	C2	MK	Lecture/ Integrated teaching/ Project Based Learning	MCQ VIVA	SAQ	Materia Medica
HomUG- ObGy-1 14.12	K & S	K	Constipation	Discuss the Physiological cause for constipation during pregnancy	C1	MK	Lecture/ Integrated teaching/ AV aids		SAQ	Physiology
HomUG- ObGy-1 14.13	НО	K	Homoeopathic Management	Discuss the homoeopathic Therapeutics for Constipation during Pregnancy	C2	MK	Lecture/ Integrated teaching/ Project Based Learning	MCQ VIVA	SAQ	Materia Medica
HomUG- ObGy-1 14.14	НО	K		Discuss the homoeopathic Therapeutics for Minor Ailments during Pregnancy	C2	MK	Lecture/ Integrated teaching/ Project Based Learning	MCQ VIVA	SAQ	Materia Medica

6.13.1 Normal labour with its causes of onset, anatomy, physiology, mechanism, stages, events and clinical course in each stage, importance of Homoeopathic Scope and management

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessi	ment	Integrated
	Dom			Spe	BIC			Forma tive	Sum mati ve	
HomUG -ObGy-1 15.1	K & S	K		Define Normal labour	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG -ObGy-1 15.2	K & S		Normal labour	Define Eutocia	CI	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG -ObGy-1 15.3	K & S	K		Define Abnormal Labour	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG -ObGy-1 15.4	K & S	K		Discuss the causes of onset of labour	C1	MK	Lecture Tutorials Small group discussion		LA SAQ	Physiology
HomUG -ObGy-1 15.5	K & S	K		Describe the features of True labour pains	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG -ObGy-1 15.6	K & S	K		Describe the features of False labour pains	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	

HomUG	K &	KH		Differentiate true labour	C2	MK	Lecture		SAQ
-ObGy-1	S			pains from false labour			Tutorials		
15.7				pains			Small group discussion		
HomUG	K &	K		Describe the	C1	MK	Lecture	MCQ	
-ObGy-1	S			characteristic features of			Tutorials		
15.8				pre-term labour			Small group discussion		
HomUG	K &	K	Normal	Describe the Physiology	C1	MK	Lecture		
-ObGy-1	S		labour	of Normal Labour			Tutorials		SAQ
15.9							Small group discussion		
HomUG	K &	K		Classify the Stages of	C1	MK	Lecture	MCQ	SAQ
-ObGy-1	S		Stages of	Normal Labour			Tutorials		
15.10			labour				Small group discussion		
HomUG	K &	K	idoodi	Describe the Stages of	C1	MK	Lecture		SAQ
-ObGy-1	S			Normal Labour			Tutorials		
15.11							Small group discussion		
HomUG	K &	K		Discuss the events taking	C 1	MK	Lecture		SAQ
-ObGy-1	S			place in 1 st stage of labour			Tutorials		
15.12							Small group discussion		
HomUG	K &	K		Discuss the events taking	C1	MK	Lecture		SAQ
-ObGy-1	S			place in 2nd stage of			Tutorials		
15.13				labour			Small group discussion		
HomUG	K &	K		Discuss the events taking	C1	MK	Lecture		SAQ
-ObGy-1	S		Events 1 st ,	place in 3 rd stage of			Tutorials		
15.14			2 nd and 3 rd	labour			Small group discussion		
HomUG	K &	K	stage of	Discuss the 1st stage of	C 1	MK	Lecture	MCQ	SAQ
-ObGy-1	S		labour	labour & the duratration			Tutorials		
15.15							Small group discussion		
HomUG	K &	K		Discuss the 2 nd stage of	C1	MK	Lecture	MCQ	SAQ
-ObGy-1	S			labour & the duration			Tutorials		
15.16							Small group discussion		

HomUG -ObGy-1 15.17	K & S	K		Discuss the 3 rd stage of labour & the duration	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG -ObGy-1 15.18	K & S	K		Discuss the 4 th stage of labour	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG -ObGy-1 15.19	K & S	K		Define Episiotomy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ
HomUG -ObGy-1 15.20	K & S	K	Stages of	Discuss the types of episiotomy	C1	MK	Lecture Tutorials Small group discussion Mannikin	MCQ	SAQ
HomUG -ObGy-1 15.21	K & S	KH	1 st , 2 nd and 3 rd stage of labour	Discuss the complications of episiotomy	C2	MK	Lecture Tutorials Small group discussion		SAQ
HomUG -ObGy-1 15.22	K & S	K		Describe the mechanism of labour	C1 PI	MK	Lecture Tutorials Small group discussion Clinical demonstration Mannikin		LA SAQ
HomUG -ObGy-1 15.23	K & S	K	Episiotomy	Define crowning	C1	MK	Lecture Tutorials Small group discussion Mannikin	MCQ	SAQ
HomUG -ObGy-1 15.24	K & S	K		Define Restitution	C1	MK	Lecture Tutorials Small group discussion Mannikin	MCQ	SAQ
HomUG -ObGy-1 15.25	K & S	КН		Discuss the management of 1 st stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ

HomUG -ObGy-1 15.26	K & S	КН		Discuss the management of 2 nd stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ
HomUG -ObGy-1 15.27	K & S	KH	Mechanism of labour	Discuss the management of 3 rd stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ
HomUG -ObGy-1 15.28	K & S	КН	Managemen t of 1 st , 2 nd 3 rd , and 4 th stage of labour	Discuss the management of 4 th stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ
HomUG -ObGy-1 15.29	НО	КН	Scope and limitation of homeopathy	Discuss the Scope of Homoeopathic in Labour normal Labour	C2	MK	Lecture Tutorials Small group discussion		LA SAQ
HomUG -ObGy-1 15.30	НО	K	Scope and limitation of homeopathy	Discuss the limitation of Homoeopathy Labour	C1 P I	MK	Lecture Tutorials Small group discussion		LA SAQ
HomUG -ObGy-1 15.31	НО	KH	Homoeopat hic Materia medica	Discuss the homoeopathic remedies in labour	C2	MK	Lecture Tutorials Small group discussion	MCQ	LA SAQ
HomUG -ObGy-1 15.32	НО	КН	&therapeuti cs	Discuss the characteristic features of indicated remedies	C2	MK	Lecture Tutorials Small group discussion	MCQ	LA SAQ

6.14 Postnatal & puerperal care – scope and limitation of management in Homoeopathy

_	petency	_	ıt	rning	ilbert	A	×	Assessment		Integration
SI. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	
HomUG- ObGy-1 16.1	K & S	K	Postnatal care	Define postnatal care	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 16.2	K & S	K	Puerperium	Define Puerperium	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 16.3	K & S	K	•	Explain the duration of normal puerperium	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 16.4	K & S	K		Define Involution	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG- ObGy-1 16.5	K & S	K		Define Sub-involution	C1	MK	Lecture Tutorials Small group discussion	MCQ		

HomUG-	K &	K	Discuss the Anatomical	C1	MK	Lecture	MCQ	
ObGy-1 16.6	S		Consideration of Involution of Uterus			Tutorials Small group		
10.0			involution of Oterus			discussion		
HomUG-	K &	K	Discuss the	C1	MK	Lecture	MCQ	
ObGy-1	S		Physiological			Tutorials		
16.7			Consideration of			Small group		
			Involution of Uterus			discussion		
HomUG-	K &	D	Demonstrate the clinical	P-1	MK	Lecture	MCQ	SAQ
ObGy-1	S		Assessment of Involution			Tutorials	VIVA	
16.8			of Uterus			Small group		
						discussion		
HomUG-	K &	K	Discuss the Involution of	C1	MK	Lecture	VIVA	
ObGy-1	S		other Pelvic Structures			Tutorials		
16.9						Small group		
H HC	TZ 0	17	D. C. 1. 1.	C1	3.417	discussion	1400	
HomUG-	K &	K	Define lochia	C1	MK	Lecture	MCQ	
ObGy-1 16.10	S					Tutorials Small group		
10.10						Small group discussion		
HomUG-	K &	K	Describe the types of	C1	MK	Lecture	MCQ	SAQ
ObGy-1	S	10	Lochia Lochia		IVIIX	Tutorials	MCQ	SAQ
16.11			Locina			Small group		
10.11						discussion		
HomUG-	K &	K	Discuss the composition	C1	MK	Lecture	MCQ	SAQ
ObGy-1	S		of lochia			Tutorials		
16.12						Small group		
						discussion		
HomUG-	K &	K	Mention the normal	C1	MK	Lecture	MCQ	
ObGy-1	S		duration of Lochia			Tutorials		
16.13						Small group		
						discussion		

HomUG-	K &	K		Discuss the clinical	C1	MK	Lecture		SAQ	
ObGy-1 16.14	S			importance of Lochia			Tutorials Small group			
1011							discussion			
HomUG-	K &	K		Discuss the Normal	C1	MK	Lecture		SAQ	
ObGy-1	S			Physiological changes			Tutorials			
16.15				occurs during puerperium.			Small group discussion			
HomUG-	K &	K		Discuss the general	C1	MK	Lecture		SAQ	
ObGy-1	S			management during		1,111	Tutorials			
16.16				Puerperium			Small group			
							discussion			
HomUG-	ΗО	KH	Homoeopathic	Discuss the	C2	MK	Lecture		SAQ	
ObGy-1 16.17			Management	homoeopathic remedies for puerperium.			Tutorials Small group			
10.17				Tor puerperrum.			Small group discussion			
HomUG-	ΗО	KH		Discuss the characteristic	C2	MK	Lecture		SAQ	
ObGy-1				features of indicated			Tutorials			
16.18				remedies			Small group			
11 110	TT 0	**		D Cl. I	G1	3.577	discussion	1100		
HomUG-	K &	K		Define Lactation	C1	MK	Lecture	MCQ VIVA		
ObGy-1 16.19	S						Tutorials Small group	VIVA		
10.17							discussion			
HomUG-	K &	K		Define Colostrum	C1	MK	Lecture	MCQ	SAQ	
ObGy-1	S						Tutorials			
16.20							Small group			
H HC	17.0	17		Ti de Constitution	C1	MIZ	discussion	MCO	CAO	
HomUG- ObGy-1	K & S	K		List Composition of Colostrum	C1	MK	Lecture TutorialsSmall	MCQ	SAQ	
16.21	3			Colostiuili			group			
10.21							discussion			

HomUG-	K &	K		Describe the 4 stages in	C1	MK	Lecture		SAQ	
ObGy-1	S			Physiology of Lactation			Tutorials			
16.22							Small group			
							discussion			
HomUG-	ΗО	KH	Homoeopathic	Discuss the	C2	MK	Lecture		SAQ	Materia
ObGy-1			Management	homoeopathic remedies			Tutorials			Medica
16.23				for increasing the milk			Small group			
							discussion			
HomUG-	K &	KH		Discuss the characteristic	C2	MK	Lecture		SAQ	Materia
ObGy-1	S			features of indicated			Tutorials			Medica
16.24				remedy			Small group			
							discussion			
HomUG-	K &	K	Postnatal care	Define Postnatal care	C1	MK	Lecture	MCQ		
ObGy-1	S						Tutorials			
16.25							Small group			
							discussion			
HomUG-	K &	K		Discuss the Objectives of	C1	MK	Lecture	MCQ	SAQ	
ObGy-1	S			postnatal care			Tutorials			
16.26							Small group			
							discussion			
HomUG-	K &	S		Demonstrate the	C1	DK	Lecture			
ObGy-1	S			procedure of Postnatal			Tutorials			
16.27				examination of the			Small group			
	77.0	~		Mother			discussion			
HomUG-	K &	S		Demonstrate the	C1	DK	Lecture			
ObGy-1	S			procedure of Postnatal	PΙ		Tutorials			
16.28				examination of the Baby			Small group			
	77.0	**		5: 1 1:		3.577	discussion		G 4 O	
HomUG-	K &	K		Discuss the advice given	PΙ	MK	Lecture		SAQ	
ObGy-1	S			to the postnatal mother			Tutorials			
16.29							Small group			
							discussion			

HomUG- ObGy-1 16.30	НО	КН	Homoeopathic management	Discuss the Scope of Homoeopathic remedies in Postnatal care	C2	MK	Lecture Tutorials Small group discussion	SAQ	Materia medica
HomUG- ObGy-1 16.31	НО	K		Discuss the Limitation of Homoeopathic management in postnatal puerperal case	C1 P 1	MK	Lecture Tutorials Small group discussion	SAQ	Organon of medicine

6.15 Care of new born in homoeopathic point of view:

				g u	rt			Assess	ment	
SI. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 17.1	K & S	K	New born infant	Define New born infant	C1	MK	Lecture Tutorials Small group discussion	MCQ		Paediatrics
HomUG- ObGy-1 17.2	K & S	K		Explain weaning of infant.	C1 PI	MK	Lecture Tutorials Small group discussion Clinical demonstration	VIVA		

HomUG- ObGy-1 17.3	K & S	K			Describe the physical features of new born infant at birth		MK	Lecture Tutorials Small gr discussion Clinical demonstration	roup		SAQ	
HomUG- ObGy-1 17.4	K & S	S	New infant	born	Demonstrate the vital signs of new born infant immediate after birth.	PI	MK	Lecture Tutorials Small gr discussion Manikin Bedside	roup	MCQ		
HomUG- ObGy-1 17.5	K & S	S			Demonstrate the general physical examination findings of new born		MK	Lecture Tutorials Small gr discussion Clinical demonstration	roup	MCQ		
HomUG- ObGy-1 17.6	K & S	S			Elicit the reflexes of new born	C1	MK	Lecture Tutorials Small gr discussion Clinical bed s demonstration	roup	MCQ		
HomUG- ObGy-1 17.7	K & S	KH			Explain the Immediate care of new born	C1 PI	MK	Lecture Tutorials Small gr discussion Manikin Bedside	roup		SAQ	
HomUG- ObGy-1 17.8	K & S	K			Discuss the advantage of breast feeding	C1 P I	MK	Lecture Tutorials Small gr discussion	roup		SAQ	

HomUG-	K &	K	Breast feeding	Discuss the	C1	MK	Lecture			SAQ	
ObGy-1	S	IX.	Dreast recuing	contraindications for breast	PΙ	IVIIX	Tutorials			SAQ	
17.9	5			feeding	1 1		Small	group			
17.7				recuing			discussion	group			
HomUG-	K &	KH		Describe the indication for	C 2	MK	Lecture			SAQ	
ObGy-1	S	KII			C 2	IVIX	Tutorials			SAQ	
17.10	3			Artificial feeding.			Small				
17.10							discussion	group			
HomUG-	17 0-	1/11		Discuss the difficulties	C2	MK				CAO	
	K &	KH			C2	MK	Lecture			SAQ	
ObGy-1	S			faced during breast feeding			Tutorials				
17.11				due to mother & Baby			Small	group			
		ļ					discussion				
HomUG-	K &	KH		Discuss the Daily	C2	DK	Lecture			SAQ	Paediatrics
ObGy-1	S			Observation and care of			Tutorials				
17.12				new born			Small	group			
							discussion				
HomUG-	K &	S		Discuss Infant Growth	C1	NK	Lecture			SAQ	Paediatrics
ObGy-1	S			Assessment			Tutorials				
17.13							Small	group			
							discussion				
HomUG-	K &	K		Define APGAR Score of	C1	MK	Lecture		MCQ	SAQ	Paediatrics
ObGy-1	S			Newborn			Tutorials				
17.14							Small	group			
							discussion				
							Clinical				
							demonstratio	on			
HomUG-	K &	K		Describe the parameters of	C1	MK	Lecture			SAQ	Paediatrics
ObGy-1	S			APGAR Scoring of New-	P 1		Tutorials				
17.15				born			Small	group			
							discussion				
							Clinical				
							demonstratio	on			
HomUG-	K &	K		Discuss importance of	C1	DK	Lecture		MCQ	SAQ	Paediatrics
ObGy-1	S			performing APGAR			Tutorials		- •		
17.16				The state of the s						1	
		1					l				

				Scoring at intervals after birth			Small discussion	group			
HomUG- ObGy-1 17.17	ΗО	KH	Homoeopathic Management	Discuss the Scope of Homoeopathy in New born Care	C2	MK	Lecture Tutorials Small discussion	group		SAQ	Organon of medicine
HomUG- ObGy-1 17.18	НО	KH	Homoeopathic Management	Discuss Homoeopathic remedies in new born care	C2	MK	Lecture Tutorials Small discussion	group	SAQ		Materia medica
HomUG- ObGy-1 17.19	НО	K		Discuss the characteristic features of indicated remedies	C2	MK	Lecture Tutorials Small discussion	group	SAQ		Materia medica

6.16 General and Homoeopathic management, repertorisation, therapeutics, posology. Formulation of prognostic criteria and Prognosis of related topics in Obstetrics and new born care

	ncy			ಶ	ıt.			Assess	sment	
Sl. No.	Domain Competency	Miller	Content	Specific learning objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integrated
HomUG- ObGy-1 18.1	НО	КН	Homoeopathic therapeutics	Discuss the Homoeopathic materia medica & therapeutics in Antenatal ailments	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia medica
HomUG- ObGy-1 18.2	НО	КН	-	List the Homoeopathic remedies commonly used in obstetrics	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia medica
HomUG- ObGy-1 18.3	НО	КН		Discuss the characeteristic features of the indicated remedies.	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia medica
HomUG- ObGy-1 18.4	НО	КН		List the Homoeopathic remedies commonly used in New born care	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia medica
HomUG- ObGy-1 18.5	НО	KH		Discuss the characteristic features of indicated remedies	C2	MK	Lecture Tutorials		SAQ	Materia medica

							Small discussion	group		
HomUG-	ΗО	KH		Discuss the differentiation of	C1	MK			MCQ	Materia
ObGy-1 18.6				the remedies			Tutorials Small	group		medica
10.0							discussion	group		
HomUG-	ΗО	KH		Discuss the remedy relationship	C1	MK	Lecture		MCQ	Materia
ObGy-1				wherever applicable			Tutorials			medica
18.7							Small	group		
							discussion			
HomUG-	ΗО	KH	D	Discuss the selection of	C-3	MK			MCQ	Repertory
ObGy-1 18.8			Repertorisation	repertories in Obstetrical care			Tutorials Small	~**		
18.8							discussion	group		
HomUG-	ΗО	KH		Discuss the selection of	C-3	MK			MCQ	Repertory
ObGy-1	110	1311		repertories in New born care		IVIIX	Tutorials		Med	Repetiory
18.9				repertories in the Woodin care			Small	group		
							discussion			
HomUG-	ΗО	S		Explain how to convert	C-3	MK	Lecture		MCQ	Repertory
ObGy-1				symptoms into rubrics from			Tutorials			
18.10				different repertories in			Small	group		
				Obstetricas.			discussion			
HomUG-	ΗО	S		Explain how to convert	C-3	MK			MCQ	Repertory
ObGy-1				symptoms into rubrics from			Tutorials			
18.11				different repertories in New			Small	group		
HomUG-	НО	K		born care. Discuss the selection of	C-	MK	discussion Lecture		MCQ	Repertory
ObGy-1	110	K		repertory based on	1	IVIIX	Tutorials		MCQ	Repetiory
18.12				symptomatology	1		Small	group		
13.12				s) mp committee gy			discussion	510 4 P		

HomUG-	ΗО	KH		Discuss the selection of	C1	MK	Lecture		MCQ	Organon
ObGy-1			Posology	similimum based on			Tutorials			of
18.13				symptomatology			Small	group		medicine
							discussion			
HomUG-	ΗО	KH		Describe methods of potency	C1	MK	Lecture		MCQ	Organon
ObGy-1				selection			Tutorials			of
18.14							Small	group		medicine
							discussion	-		
HomUG-	ΗО	K		Discuss the factors for selection	C1	MK	Lecture		MCQ	Organon
ObGy-1				of posology.			Tutorials			of
18.15							Small	group		medicine
							discussion	-		
HomUG-	ΗО	K		Discuss the criteria for repetition	C1	MK	Lecture		MCQ	Organon
ObGy-1				of doses			Tutorials			of
18.16							Small	group		medicine
							discussion	- 1		

6.17 Important Investigations for diagnosis in Obstetrics

	ıcy							Assess	ment	
SI. No.	Domain Competency	Miller	Content	Specific learning objectives	Bloom/ Guilbert	Priority	TL MM	Formative	Summative	Integration
HomUG- ObGy-1 19.1	PC	K		Discuss the indications for USG in 1 st trimester.	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG- ObGy-1 19.2	PC	K	Ultrasonography	Discuss the findings of hydatidiform mole in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG- ObGy-1 19.3	PC	K		Discuss the finding of abortion in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG- ObGy-1 19.4	PC	K		Discuss the findings of normal pregnancy in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology

HomUG- ObGy-1 19.5	PC	K	Discuss the findings of Anterio – posterior diameters of the fetal skull in USG.	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Radiology
HomUG- ObGy-1 19.6	PC	K	Discuss the findings of biparietal (BPD) diameters of the fetal skull in USG.		MK	Small discussion Tutorials CBL PBL	group	MCQ	Radiology
HomUG- ObGy-1 19.7	PC	K	Discuss the findings of Crown Rump Length in USG	C1	MK	discussion Tutorials CBL PBL	group	MCQ	Radiology
HomUG- ObGy-1 19.8	PC	K	Discuss the findings of Amniotic fluid in USG	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Radiology
HomUG- ObGy-1 19.9	PC	K	Discuss the findings of foetal growth in each trimester in USG	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Radiology
HomUG- ObGy-1 19.10	PC	K	Discuss the findings of Malformations of the foetus in USG	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Radiology

HomUG- ObGy-1 19.11	PC	K		Discuss the findings of malformation of the uterus in USG	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Radiology
HomUG- ObGy-1 19.12	PC	K		Discuss the urine test pregnancy test in amenorrhoea women	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Biochemistry
HomUG- ObGy-1 19.13	PC	K		Discuss the immunological test for pregnancy	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Biochemistry
HomUG- ObGy-1 19.14	PC	K		Discuss the conditions where B-HCG tests are done.	C1	DK	Small discussion Tutorials CBL PBL	group		Biochemistry
HomUG- ObGy-1 19.15	PC	K	Blood test	Discuss the importance of Hb in pregnancy.	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Biochemistry
HomUG- ObGy-1 19.16	PC	K		Discuss the importance of blood group & Rh group in pregnancy.	C1	MK	Small discussion Tutorials CBL PBL	group	MCQ	Biochemistry

HomUG-	PC	K	Discuss th	e imp	ortance	of	C1	MK	Small	group	MCQ	
ObGy-1			FBS, RBS	and	PPBS	in			discussion			
19.17			pregnancy						Tutorials			
									CBL			
									PBL			
HomUG-	PС	K	Describe th	ne imp	ortance	of	C1	MK	Small	group	MCQ	
ObGy-1			Thyroid for	unction	tests	in			discussion			
19.18			pregnancy						Tutorials			
			-						CBL			
									PBL			

7 Teaching learning methods

Lectures (Theory)	Non-lectures (Practical/Demonstrative)
Lectures	Clinical demonstration
Small group discussion	Problem based discussion
Integrated lectures	Case based learning
	Assignments
	Library reference
	Self-learning

8 Details of assessment

<u>Note-</u> The assessment in II BHMS shall be done only as Internal Assessment (IA) in terms of Periodical Assessments (PA) and Term Tests (TT) as detailed below. There shall not be any Final University Examination (FUE) at this level. The marks obtained in IA during II BHMS will be added to the marks of IA in the III BHMS University Examination.

Overall Scheme of Internal Assessment (IA)***

Professional	Tei	rm I (1-6 Months)	Term II (7-12 Months)			
Course/ Subject						
II BHMS/	PA I (end of 3	TT I (end of 6 months)	PA II (end of 9	TT II (end of 12 months)		
	months)		months)			
Practice of Medicine						
	20 Marks Viva- A	100 Marks Clinical/Practical and	20 Marks Viva- B	100 Marks Clinical/Practical and		
		Viva - E		Viva - F		
		i) Viva voce -50 marks		i) Viva voce -50 marks		
		ii) Clinical/practical*- 50		ii) Clinical/practical**- 50		

*Practical Examinations TT I:

- a) Case taking: Recording of case in Obstetrics & Gynaecology. (20 marks)
- b) Demonstration: (15 Marks)
- General physical examination
- Per abdominal examination
- Pelvic grips
- c) Lab Investigations: Suggest the relevant lab investigations for 1st, 2nd and 3rd trimester (**5 marks**)
- d) Demonstration of foetal skull & Pelvic diameters (10 marks)

**Practical Examinations TT II:

- a) Case taking: Recording of case taking in Obstetrics & Gynaecology. (20 marks).
- b) Examination of the patient (10 marks)
- General physical examination
- Breast examination
- Obstetric examinations
- Post-natal examinations.
- New born care examination
- c) Analysis of the case (5 marks)
- d) Journal submission 5 cases (10 marks)

Journal shall have following cases with analysis-

Gynaec-3, ANC-1, PNC-1

e) Dummy & Pelvis: Demonstration of fetal skull diameters, Sutures and pelvic diameters. (05 marks)

***Method of Calculation of Internal Assessment Marks in II BHMS for Final University Examination to be held in III BHMS:

A	Marks of PA II	PA I+ PA II /2	Marks of TT I	Marks of TT II	TT I + TT II / 200 x 20	Assessment Marks D+G/2
Marks of PA I	M 1 CDAH	Periodical Assessment			Terminal Test Average	Final Internal

9 List of recommended text/reference books

- Dutta, D.C, (2023). Text book of Obstetrics, 10thedition, New Central Book Agency Pvt Ltd.,
- Dutta D.C (2020). Text book of Gynaecology, 8th edition, New Central Book Agency Pvt Ltd.
- Lilienthal Samuel (Reprint 2003), Homoeopathic Therapeutics, 5 edition B Jain Publishers (P) Ltd
- Guernsey H.N. Principles & Practice of Homoeopathy in Obstetrics & Paediatrics.
- Minton, Uterine therapeutics Materiamedica & Repertory, B Jain publishers (P) Ltd.

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