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 itis 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. Thiscoupling 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 lookat 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. Design of curriculum: 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. Teacher training: 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. Assessment: 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. Student issues: 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 long range '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 better grasp 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

1) 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

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 behaviouralsciences, and apply these in the context of patient care.

1. 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 fora 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.
9. 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 ofpatients 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 respectingboundaries 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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4. Arora Aman (2020) Building Generic Competencies Model Conference: International Conference on Recent Trends and Innovations in Business Management, Social Sciences and Technology - NCIBM 2020, New Delhi accessed at https://www.researchgate.net/publication/345001112 on 5th December 2022

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 andGuibert'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 Causation & Prevention and Homoeopathy									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
								Formative	Summative	
Hom UG CM I-T 2.1	KS	KH	Concept of health	Discuss the history of health Discuss the biomedical, ecological, psychological, and spiritual dimensions of holistic health	C-II	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ, SAQ	Organon of Medicine
Hom UG CM I-T 2.2	KS	K	Health	Define the term "Health" as per WHO.	C-I	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ,	

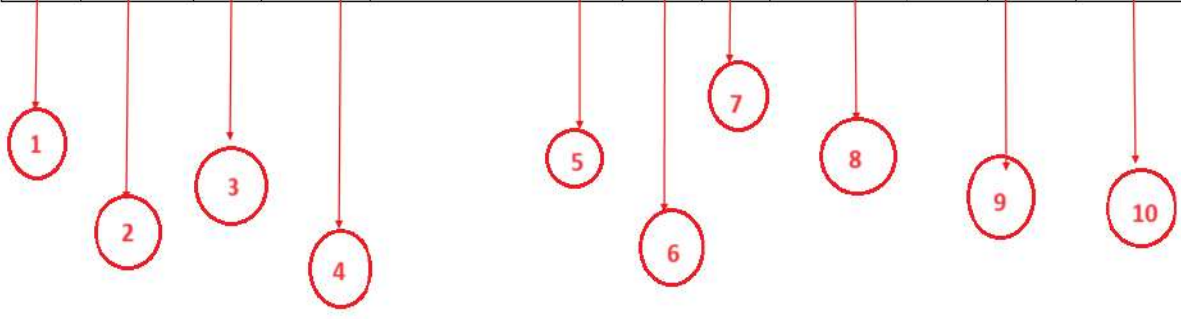

Table 1: Description of the Competencies table

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 (orsubject) be elaborated in terms of the outcomes that are to be achieved by the learner at theend 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 of Health, Disease Causation & Prevention and Homoeopathy									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
								Formative	Summative	
Hom UG CM I-T 2.1	KS	KH	Concept of health	Discuss the history of health Discuss the biomedical, ecological, psychological, and spiritual dimensions of holistic health	C-II	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ, SAQ	Organon of Medicine
Hom UG CM I-T 2.2	KS	K	Health	Define the term "Health" as per WHO.	C-I	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ,	

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 competencyis 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									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
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Hom UG CM I-T 2.2	KS	K	Health	Define the term "Health" as per WHO.	C-I	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ,	

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									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
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Hom UG CM I-T 2.2	KS	K	Health	Define the term "Health" as per WHO.	C-I	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ,	

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									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
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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									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
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Hom UG CM I-T 2.2	KS	K	Health	Define the term "Health" as per WHO.	C-I	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ,	

The Teaching- Learning methods and media have been identified that are most suitable to the SpecificLearning Objectives (SLOs) formed for each topic and as per the Domain of eachof 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									
Competency No	Domain of Competency	Miller	Content	Specific Learning Objectives	Bloom/Guilbert	Priority	T-L M/M	Assessment		Integration
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Hom UG CM I-T 2.2	KS	K	Health	Define the term "Health" as per WHO.	C-I	DK	1. Lecture 2. Small Group Discussion	MCQ Viva Quiz	MCQ,	

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

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.	CO	Course outcomes
3.	ACO	Annual Course Objectives
4.	SLO	Specific Learning Objective
5.	KS	Knowledge and Scholarship
6.	PC	Patient Care
7.	HO	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

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 vary in 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' andcan relate them meaningfully to reach the 'knows how' capacity. These phases would largelybe 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 dimensionof 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

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 skillsof 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 symptomsof 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 ofinterpretation 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

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.	Competency	Millers Level:	Content	SLO/ Outcome	Blooms Domain / Guilbert's Level	Priority	T-L Methods/ media	Assessment		Integration
								Formative	Summative	
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 Discussion	MCQ, viva	MCQ SAQ LAQ	**Spiral integration** with Homoeopathic Materia Medica **Vertical integration** with Anatomy,Physiology,Pharmacy, Psychology, Organon)
HomUG-HMM-II-2.1			Different approaches for studying Homoeopathic Materia medica	Enumerate the different approaches for studying Homoeopathic Materia medica	C2	MK	Lecture PPT Library references	MCQ Assignment Project viva	SAQ	**Horizontal integration** with subjects of Pathology , Toxicology , Physiology Organon , Anatomy , Psychology and Homoeopathic pharmacy
HomUG-HMM-II-2.2				Explore the scope and limitation of each approaches for studying Homoeopathic Materia Medica						

Sl. No.	Competency	Millers Level:	Content	SLO/ Outcome	Blooms Domain / Guilbert's Level	Priority	T-L Methods/ media	Assessment		Integration
								Formative	Summative	
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 Assignment 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
HomUG-HMM-II-4.3				List the sphere of action	C1	MK	Lecture Self – learning	Assignment Project	LAQ SAQ MCQ	**Horizontal**

Sl. No.	Competency	Millers Level:	Content	SLO/ Outcome	Blooms Domain / Guilbert's Level	Priority	T-L Methods/ media	Assessment		Integration
								Formative	Summative	
								MCQ	Viva	**Integration**with Pathology, Toxicology,
HomUG-HMM-II-4.4				Narrate the 'ailments from'	C1		Small Group Discussion Black Board PPT Handouts Role play PBL	Viva		ObGy,PM, Surgery and Organon **Vertical integration** with Anatomy Pharmacy , Psychology and Physiology
HomUG-HMM-II-4.5				Describe the constitution and temperament	C1					
HomUG-HMM-II-4.6				Explain the mental symptoms	C1					
HomUG-HMM-II-4.7				Explain the physical generals	C1					
HomUG-HMM-II-4.8				Outline the general modalities	C1					
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.	Competency	Millers Level:	Content	SLO/ Outcome Gynaecology-Obstetrics and miasm	Blooms Domain / Guilbert's Level	Priority	T-L Methods/ media	Assessment		Integration
								Formative	Summative	
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 Competency	Millers Level:	Content	SLO/ Outcome	Blooms Domain / Guilbert's Level	Priority	T-L Methods/media	Assessment		Integration
								Formative	Summative	
HomUG-HMM-II-5.1	K & S PC HO CS PBLI Prf	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 and Organon
HomUG-HMM-II-5.2			Clinical examination	Demonstrate the basic clinical examination skills	P/A2					
HomUG-HMM-II-5.3			Interpretation 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,Physical 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 Course	Term I (1-6 Months)		Term II (7-12 Months)		
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	50 Marks Practical/ 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 Assessment**	Grand Total
1	HomUG-HMM-II	01	100 marks*	50 marks i) Journal -10 marks (Five acute and 5 chronic cases) ii) Case taking and analysis of symptoms --- 40 marks	40 marks	10 marks (Marks of PA I + TT I + PA II)	200marks

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

****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 X 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**		
	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
E	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 Question Serial Number	B Type of Question	Question Paper Format (Refer table 8.5 for themes)
Q1	Multiple Choice Questions(MCQ) 10 Questions 1 mark each All compulsory Must know part: 7 MCQ Desirable to know: 2 MCQ. Nice to know: 1 MCQ	1. Theme A-D 2. Theme A-D 3. Theme A-D 4. Theme A-D 5. Theme A-D 6. Theme F 7. Theme F 8. Theme F 9. Theme F 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	1. Theme A-D 2. Theme A-D 3. Theme A-D 4. Theme E 5. Theme F 6. Theme F 7. Theme F 8. 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
- ChoudhuriN.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 Classicfication, (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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Subject Name: Organon of Medicine and Homeopathic Philosophy
Subject Code: HomUG-OM-II

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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 acoording 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. No	List of Topics	Hours
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, Disease its progress-complex disease, Individualization-its process, Susceptibility- types and factors modifying it	16
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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-OM-II 1.1	K& S HO	K	**Aphorism 28-33** Artificial disease is stronger than Natural disease	Define modus opernadi of homoeopathic cure	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ SAQ	MCQ SAQ, Viva	Spiral Pharmacy
HomUG-OM-II 1.2				Define and differentiate between Natural and Artificial Disease						
HomUG-OM-II 1.3				Identify factors differentiating Natural & Artificial Disease						
HomUG-OM-II 1.4				Compare the strength of Natural Disease vis-à-vis Artificial Disease						
HomUG-OM-II 1.5				Justify the superiority of Artificial Disease						

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

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

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

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

Sl. No	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-OM-II 3.1	K & S HO	K	**Aphorism 71** Homeopathic System of Medicine	List the points necessary in the operation of curing	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ SAQ	MCQ SAQ Viva	**Organon (Spiral) Aphorism 3**
HomUG-OM-II 3.2				Discuss Hahnemann's classification of disease						
HomUG-OM-II 3.3	K & S HO P C	K H	**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	**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 Pharmacology **(H)**

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

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

6.4 Case taking (Aphorisms 83-103)

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

				Discuss the importance of these observations Co-relate with Materia Medica and Repertory	interpret Level II Psychomotor 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 K H	**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	K H	**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	K H	**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** Dispositions of patients in case taking	Differentiate the dispositions of patients while answering Differentiate between Hypochondriacs 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) **Symptomatology 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 disease	acute diseases vis-à-vis chronic case	interpret Level II		Small Group Discussion			
HomUG-OM-II 4.12	K & S HO P C Community Health	K	**Aphorism 100-103** Case taking in epidemic and sporadic disease	Discuss the salient points of case taking in an epidemic or sporadic disease Differentiate between common and characteristic symptom in above cases Discuss the concept of Genus epidemicus	Cognitive Understand and interpret Level II	Must Know	Lecture Small Group Discussion	MCQ SAQ	MCQ SAQ Viva	**Organon (S)**

6.5 Symptomatology

Sl. No	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-OM-II 5.1	K & S	K	Define Symptoms and their importance	Define Objective and subjective symptoms	Cognitive Understand and interpret Level II	Must Know	Class room lecture, Group discussions	MCQ SAQ	LAQ	Horizontal with Pathology Vertical with POM, OBG, Surgery
HomUG-OM-II 5.2				Enumerate different types of symptoms						
HomUG-OM-II 5.3		K		Explain symptoms according to Hahnemann's view						
HomUG-OM-II 5.4	K & S	K		Define Totality of symptoms	Cognitive/ Understand & Interpret level II	Must Know	Class room lecture, Group discussions Caselets	MCQ	LAQ VIVA	
HomUG-OM-II 5.5				Explain types of modalities						

HomUG-OM-II 5.6	K & S	K	Define Symptomatology 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	Caselets P B L	SAQ	LAQ SAQ	Vertical with Repertory
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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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-OM-II 6.2		S H		List the dos and don'ts of case taking						
HomUG-OM-II 6.3				Difference between acute 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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-OM-II 7.1	K & S P C	K H S H D	Analysis	Define Analysis Identify different groups to analyse the symptoms Justify the analysis	Cognitive Level III	Must Know	Lecture Small Group Discussion Case simulation OPD/IPD	MCQ SAQ Checklist	MCQ SAQ LAQ	
HomUG-OM-II 7.2	P B L		Evaluation	Define Evaluation Justify and defend the evaluated symptoms	Cognitive Level III					
HomUG-OM-II 7.3			Investigation	Discuss the investigation Plan the case	Cognitive Level III					**Pathology (H)**
HomUG-OM-II 7.4			Diagnosis	Examine the case	Cognitive Level III Psychomotor Level I &II					**Practice of Medicine(H)**
HomUG-OM-II 7.5	K & S	K	Develop Portrait of Disease by integrating Hahnemannian concept	Define Disease portrait (Kent -Ch- 30), (Roberts- Ch-9),(Close- Ch- 11, 12)	Cognitive/ Understand & Interpret level II	Must Know	Caselets / Classroom discussion/ DOPS	MCQ SAQ	LAQ	Horizontal with Pathology, Materia Medica, Repertory

6.8 Totality of symptoms

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

6.9 Susceptibility

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

6.10 Record keeping

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

6.11 Various systems of medicine

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

			Application of Law of Cure							
HomUG-OM-II 11.3		K	**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	K	**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	K	**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		K H	**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		KH	**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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-OM-II 12.1	K & S	K	Etiology Concept of Disease	Recall the various concept of disease	Cognitive Level II Understand and Interpret	Must know	Lectures Small group Discussion	MCQ SAQ	MCQ SAQ LAQ Viva	**Organon (S)**
HomUG-OM-II 12.2	K & S		Biological Concept of disease	Discuss the biological concept of disease		Desirable to know				**Pathology (H)**
HomUG-OM-II 12.3	C S		Environmental and Constitutional Factors	Discuss the concept of stress/ strain / Conflict		Must know				**Psychology (S)** Personality Adaptation
HomUG-OM-II 12.4	P C		Importance of diagnosis in Homeopathy	List the importance of diagnosis in daily practice		Must know				**Practice of Medicine (H & V)**
HomUG-OM-II 12.5			Concept of causation & relating it with homoeopathy	Define fundamental(miasm), exciting & maintaining cause	Cognitive Level II Understand and Interpret	Must know	Lectures Small group Discussion	MCQ SAQ	MCQ SAQ LAQ Viva	Horizontal with Pathology, Materia Medica, Repertory
HomUG-OM-II 12.6	K & S and Scholarship	K	Classification of Disease	Classification of disease as per Hahnemann and other stalwarts like Sarkar	Cognitive/ Understand & Interpret level II	Must Know	Classroom discussion Case Based Learning	MCQ SAQ	LAQ	

6.11 Introduction to the evolutionary concept of miasm

Sl. No	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
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	Cognitive Level II Understand and Interpret	Desirable to know	Lecture Small group discussion	MCQSAQ	MCQ SAQ LAQ Viva	**Organon (S)**
HomUG-OM-II 13.2	K & S	K	Hahnemann classification of disease	Define Hahnemann's concept of miasm	Cognitive / Understand & Interpret Level II	Must Know	Class room lecture / Small group Discussions / Caselets	MCQ SAQ	LAQ	Horizontal with Pathology
HomUG-OM-II 13.3				Explain pathological consideration and general survey of disease Hahnemann's theory of Chronic Disease & bacteriology Acute miasm						
HomUG-OM-II 13.4	K & S	K	Miasm	Explain characteristic of Psora	Cognitive / Understand & Interpret level II	Desirable to know	Classroom discussion/ group discussions	MCQ SAQ	LAQ	
HomUG-OM-II 13.5				Explain characteristic of Sycosis						

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

6.12 Individuality

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

6.13 Anamnesis- evolution of disease

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

6.14 Disease-its progress- complex disease relation with miasm

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

6.15 Introduction to the concept of suppression

Sl. No	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-OM-II 17.1	K & S HO P C	K	Suppression Causes Effects and Management	Define Suppression	Cognitive Level II Understand and Interpret	Nice to Know	Lecture Caselet Case based Lerarning	MCQ SAQ	SAQ	**Pathology (H)**
HomUG-OM-II 17.2				Enumerate the types and causes of Suppression						
HomUG-OM-II 17.3				Discuss the effects of Suppression						
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	Professional Course	Term I (1-6 Months)		Term II (7-12 Months)		
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	50 Marks Practical/ Viva i) Viva voce -25 marks	10 Marks Viva	100 marks theory	100 marks (Clinical/practical+ Viva+ IA)

			ii) Clinical performance – 25 marks 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 i) Case taking- 10 marks ii) Case processing-25 marks iii) Case presentation- 5 marks iv) Journal*-10 marks	40 marks	10 marks (Marks of PA I + TT I + PA II)	200marks

*****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 X 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**		
	A **List of Topics**	**B** **Term**	**C** **Marks**	**MCQ** **(1 Mark)**	**SAQ** **(5Marks)**	**LAQ** **(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, Symptomatology, Analysis, Evaluation, Totality of Symptoms	I & II		2	2	1

3	Classification of disease with introduction to miasm (Aphorism 71-82); Its correlation with pathogenesis and Homoeopathic management	I		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, Symptomatology, Analysis, Evaluation, Totality of Symptoms	I&II	B	22	10	10	2
3	Classification of Disease with respect to Pathogenesis, miasm and correlation with homeopathic management	I	C	17	10	5	2
4	Anamnesis-evolution of disease, Disease its progress-complex disease, Individualization-its process, Susceptibility: types and factors modifying it	II	D	12		10	2
5	Causation; Introduction to the concept of suppression	II	E	15	10	5	

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*

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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 I BHMS, 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 symptomsbased 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

Sl. No.	Domain of Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/Media	Assessment		Integration
								F	S	
Hom UG-R-II-2.1	K/HO	Knows	Acquiring knowledge, skill and attitude about patient and doctor communication and examination in simple acute disease	Define an acute Disease	Cognitive/ Level -1 Remembers/ Recalls	Must Know	Lecture Small Group Discussion	SAQ Viva-voce	–	Horizontal integration with Organon of Medicine Spiral Integration in III & IV BHMS
Hom UG-R-II-2.2	K/HO	Knows		Classify diseases as per Hahnemann's Philosophy	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Small Group Discussion	SAQ Viva-voce	–	
Hom UG-R-II-2.3	K/HO	Knows		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	–	
Hom UG-R-II-2.4	K/HO/PC	Knows how		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	–	

Sl. No.	Domain of Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/Media	Assessment		Integration
								F	S	
Hom UG-R-II-2.5	K/HO/PC	Shows how		Demonstration of simple acute case taking	Psychomotor Level -1 Interpret/ Decide/ DemonstrateCognitive/ Level -2understand/ describe	Desirable	Clinical Class Small Group Discussion (I	SAQ Viva-voce	–	Horizontal integration with Pathology & Practice of Medicine Spiral Integration in III & IV BHMS
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	–	

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 Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/Media	Assessment		Integration
								F	S	
Hom UG-R-II-2.7	K/HO	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 Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/Media	Assessment		Integration
								F	S	
Hom UG-R-II-2.8	K/HO	Knows	patient and doctor communication and examination in chronic disease	Classify chronic diseases as per Hahnemann's Philosophy	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Small Group Discussion	SAQ Viva - voce	–	Spiral Integration in III & IV BHMS
Hom UG-R-II-2.9	K/HO	Knows		List the aphorisms dealing with Chronic Case Taking	Cognitive/ Level -1 Remembers/ Recalls	Must know	Lecture Integrated discussion	SAQ Viva - voce	–	
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	Desirable	Lecture/ Clinical Class Small Group Discussion Integrated discussion	SAQ Viva - voce	–	Horizontal integration with Organon of Medicine,Pathology & Practice of Medicine Spiral Integration in III & IV BHMS
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	Desirable	Clinical Class Small Group Discussion	SAQ Viva - voce	–	

6.3. Topic: - Introduction to Boericke's Repertory

Sl. No.	Domain of Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/Media	Assessment		Integration
								F	S	
Hom UG-R-II-3.1	K/HO	Knows	Acquiring knowledge about Boericke's Repertory	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	–	Horizontal integration with Organon of Medicine
Hom UG-R-II-3.2	K/HO	Knows		Outline the Plan of Boericke's Repertory	Cognitive/ Level -1 Remembers/ Recalls	Desirable to Know	Lecture Rubric Hunting	SAQ Viva - voce	–	
Hom UG-R-II-3.3	K/HO	Knows		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	K/HO	Knows		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, Practice of Medicine Spiral Integration in III & IV BHMS
Hom UG-R-II-3.5	K/HO	Knows how		Mention the Scope, Limitation & adaptability of Boericke's Repertory	Cognitive/ Level -2 Understands	Desirable	Lecture Rubric Hunting	SAQ Viva - voce	–	

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

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

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

Sl. No.	Domain of Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/ Media	Assessment		Integration
								F	S	
Hom UG-R-II-5.1	K/HO	Knows	Understanding the representation of constitution, diathesis, susceptibility and temperament in Boericke and Kent Repertory	Discuss the holistic concept of Health with relation to the study of repertory	Cognitive/ Level - 1 Understands	Desirable to Know	Lecture	Viva-voce		Horizontal integration with Organon of Medicine, Pathology, Practice of Medicine Spiral Integration in III & IV BHMS
Hom UG-R-II-5.2	K/HO	Knows		Discuss the concept of Disease with relation to the study of repertory	Cognitive/ Level - 1 Understands	Desirable to Know	Lecture	Viva-voce		
Hom UG-R-II-5.3	K/HO	Knows		Define Constitution, diathesis, susceptibility& Temperament	Cognitive/ Level - 2 Understands & interpret	Desirable to Know	Lecture	Viva-voce		

Sl. No.	Domain of Competency	Miller's level	Content	SLO	Bloom/ Guilbert	Priority	Teaching-Learning Method/ Media	Assessment		Integration
								F	S	
Hom UG-R-II-5.4	K/HO	Knows How		Identify the rubrics representing different constitution, diathesis, susceptibility and temperament in Boericke repertory	Cognitive/ Level - 2 Understands & interpret	Desirable to Know	Lecture Rubric Hunting	MCQ Quiz	–	
Hom UG-R-II-5.5	K/HO	Knows How		Identify the rubrics representing different constitution, diathesis, susceptibility and temperament in Kent repertory	Cognitive/ Level - 2 Understands & Interpret	Desirable 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

Note- ***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/ 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	**B**	**D**	**E**	**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	A case of acute nature as defined by Hahnemann; which is presenting with 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 totality/ rubric search for reference/ Repertorization is easy.	A case of acute nature as defined by Hahnemann; which is presenting with mixed symptomatology (complete as 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 for construction of totality and rubric search/ Repertorization is somewhat more difficult then simple cases.	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 needs a certain set of knowledge, skill for construction of totality and rubric search/ Repertorization is somewhat difficult then simple cases.	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	II

4. Teaching hours

4.1 Gross division of teaching hours

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)	**Demonstration** a) Weapons b) Toxicology - corrosives, irritants, systemic and miscellaneous poisons, gastric lavage c) Charts, diagrams, photographs, models, bones, x-ray films of medico-legal 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 records		2
1(d)	Demonstration of at least ten medico-legal autopsies.		20
2	**Demonstrative**	I & II	**15**
2(a)	Court Procedures (Moot Court)		05
2(b)	Field Visits		10
	Total		**50**

5 Content mapping (competencies tables)

5.1. Topic: Introduction to Forensic Medicine-

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

5.2. Topic: Medical ethics-

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

Hom UG-FMT-2.3			State Homoeopathic Medical Councils Structure, functions and legislation Homoeopathic Practitioners (Professional Conduct, Etiquette and Code of Ethics) Regulations ,1982 with amendments (up to 2014) Duties of Registered Homoeopathic Medical practitioner	Discuss medical negligence with 2 examples.	C-II	MK	Interactive lectures, Written Case Scenario, Moot court.	SAQ LAQ, Tutorial Assignment	Theory - SAQ and LAQ , Viva voce	
Hom UG-FMT-2.4				Discuss privileged communication in relation to rights and duties of doctors and patients.	C-II	MK	Interactive lectures, Written Case Scenario, Moot court.	SAQ LAQ, Tutorial Assignment	Theory - SAQ and LAQ , Viva voce	

Hom UG-FMT-2.5			in medico-legal cases. Consent, types of consent and its importance in practice Bioethics - Introduction and principles	Explain the duties of registered Homoeopathic medical practitioner in medicolegal cases.	C-II	MK	Interactive Lectures,	LAQ	Theory - LAQ , Viva voce Examination	
Hom UG-FMT-2.6				Discuss the principles of bioethics.	C-II	DK	Interactive lectures, Problem Based Learning.	Assignment	Viva voce Examination	

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

5.3. Topic: Legal procedures-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-FMT-3.1	KS CS PBL PRF	K	Understanding legal terms – CrPC, IPC, IEA, offence, civil and criminal cases Inquest, types of inquest Courts of law in India, jurisdiction, hierarchy and	Define CrPC, IPC	C-I	MK	Interactive lecture	MCQ	Theory - Viva voce	None
Hom UG-FMT-3.2				Differentiate between civil and criminal cases	C-II	MK	Interactive lecture	SAQ LAQ, Tutorial Assignment	Theory - SAQ and LAQ , Viva voce	
Hom UG-FMT-3.3				Define Inquest	C-I	MK	Interactive lecture	MCQ	Theory - Viva voce	

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

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

5.4. Topic: Personal identification-

Sl. No.	Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-FMT-4.1	KS CS PBL PRF.	K	Determination of age, gender, race, religion in the living and the dead, Dactylography, foot prints. Bones, scars and teeth, tattoo marks, handwriting, anthropome	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 Assignment	Theory - SAQ and LAQ , Viva voce	None
Hom UG-FMT-4.2				Define Dactylography	C-I	MK	Interactive lecture,	Tutorial Assignment	Viva voce	

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

5.5. Topic: death and its medicolegal importance-

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

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

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

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

5.6. Topic: Injury and its medicolegal importance-

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

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

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

5.7. Topic: Forensic psychiatry-

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

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

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

5.8. Topic: Postmortem examination (ML autopsy)-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-FMT-8.1	KS CS PBL PRF.	K	Purpose, procedure, legal bindings; difference between pathological and medico-legal autopsies. External examination, internal examination of adult, foetus and skeletal remains. Artefacts	Define autopsy	C-I	MK	Interactive lecture	MCQ,	Viva voce examination	None
Hom UG-FMT-8.2				Enlist the objectives of conducting a Medico legal Autopsy	C-II	MK	Interactive lecture, lecture demonstration,Field visits.	SAQ LAQ, Assignment	Theory – SAQ, LAQ And Viva 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 demonstration,Field visits.	Assignment	Theory-SAQ And Viva voce Examination	

5.9. Topic: Impotency and sterility-

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

Hom UG-FMT-9.3			Legal issues related to impotence, sterility and artificial insemination, surrogacy, in-vitro fertilization legitimacy, sperm donation, sperm banks, ova banks, freezing of gametes, frozen embroys, medicolegal importance	Explain Artificial Insemination	C-II	MK	Interactive lecture	SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	
Hom UG-FMT-9.4				Explain surrogacy with its medico-legal importance	C-II	MK	Interactive lecture	SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	

Hom UG-FMT-9.5				Explain in-vitro fertilization with its medico-legal importance	C-II	DK	Interactive lecture	SAQ LAQ, Assignment	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, Assignment	Theory - SAQ and LAQ , Viva voce	

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

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom /Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-FMT-10.1	KS CS PBL PRF.	K	The presumptive, probable and positive signs of pregnancy, sexual exploitation, sexual abuse, pregnancy, delivery, posthumous child, pseudocyesis, superfoetation,superfecundation, legitimacy and	Discuss about the presumptive, probable and positive signs of pregnancy	C-II	MK	Interactive lecture, lecture demonstration	MCQ, SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	Integration with OBG
Hom UG-FMT-10.2				Explain the medico Legal aspects of legitimacy	C-II	MK	Interactive lecture, lecture demonstration	MCQ, SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	
Hom UG-FMT-10.3				Explain superfoetation with its medicolegal importance.	C-II	MK		MCQ, SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	

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

5.11. Topic: Abortion and infanticide-

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

Hom UG-FMT-11.3			Abortificent drugs and methods Infant death, signs of live birth, legal definitions, battered baby syndrome, cot death, Munchausen's syndrome	Explain various signs of live birth	C-II	MK	Interactive lecture, , group discussions, Integrated learning	MCQ, SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	
Hom UG-FMT-11.4				Discuss the regulations of MTP Act 1971	C-II	MK	Interactive lecture, , group discussions, Integrated learning	MCQ, SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	
Hom UG-FMT-11.5				Explain battered baby syndrome	C-II	MK	Interactive lecture, , group discussions, Integrated learning	MCQ, SAQ Assignment	Theory - SAQ, Viva voce	
Hom UG-FMT-11.6				Explain cot death.	C-II	MK	Interactive lecture, , group discussions, Integrated learning	MCQ, SAQ Assignment	Theory - SAQ Viva voce	

Hom UG-FMT-11.7				Explain Munchausen's syndrome	C-II	MK	Interactive lecture, , group discussions, Integrated learning	MCQ, SAQ	Theory - SAQ Viva voce	

5.12. Topic: Sexual offences-

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

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

				assailant of a sexual offence			discussions, Integrated learning			
Hom UG-FMT-12.7				Explain the medicolegal aspects of sexual offenses and perversions.	C-II	MK	Interactive lecture, small group discussions, Integrated learning	SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	
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 discussions, Integrated learning	LAQ, Assignment	Theory - LAQ , Viva voce	

5.13. Topic: General toxicology-

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

			Duties of Homoeopathic Practitioners in cases of poisoning							
Hom UG-FMT-13.5		K		Describe the duties of a medical practitioner in the suspected case of poisoning	C-II	DK		MCQ, SAQ LAQ, Assignment	Theory - SAQ and LAQ , Viva voce	

5.14. Topic: General toxicology-

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

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

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

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

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

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

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

Sl. No.	Content	Competency / Outcome	Entry behaviour	Specific Learning Objectives	Learner activity	Assessment
Hom UG-FMT-16.1	a) Weapons b) Toxicology - corrosives, irritants, systemic and miscellaneous poisons, gastric lavage c) Charts, diagrams, photographs, models, bones, x-ray films of medico-legal importance	KS CS PBL PRF	Enumerate different types of weapons. Enumerate different types of injuries caused by weapons	Identify various types of weapons	Demonstration, group discussions, Spotting, PBL	Practical Examination
				Classify injury produced by them		
				Explain medicolegal importance of injuries produced by the weapons.		
Hom UG-FMT-16.2			Enumerate the different names of poisons and methods of poisoning	Identify various types of specimens of poisons		
				Classify the poison as per their action		
				Explain medicolegal importance of poisons		
Hom UG-FMT-16.3			Enumerate different emergency conditions related to GIT where gastric lavage is indicated	Explain gastric lavage procedures ,		
				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	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.	Certificate writing. Written case scenario.	Practical Examination
Hom UG-FMT-17.2				Write a report of examination of rape victim, Injury Certificate, Post Mortem Examination report, Age Certification. Drunkenness Certificate.		

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	Professional Course	Term I (1-6 Months)		Term II(7-12 Months)		
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	50 Marks Practical/ Viva 1. Viva voce -25 marks 2. Practical– 25 marks (Identification of weapons, poisons, X-Rays- 10 Marks, Certificate writing- 10 Marks Case Scenario of consent taking- 5 marks)	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

7.2 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-FMT	01	100 marks	50 marks**	40 marks	10 marks (Marks of PA I + TT I + PA II)	200marks

***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 X 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**			**D** **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 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
B	Personal Identification	I	6	1	5	0
C	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
H	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 Question Serial Number	B Type of Question	Question Paper Format (Refer table 7.5 for themes)
Q1	Multiple choice Questions (MCQ) 10 Questions 1 mark each All compulsory Must know part: 6 MCQ Desirable to know: 2 MCQ. Nice to know:2MCQ	1. Theme B 2. Theme C 3. Theme D 4. Theme E 5. Theme F 6. Theme G 7. Theme H 8. Theme L 9. Theme L 10. Theme M

Q2	Short answer Questions(SAQ) 8Questions 5 Marks Each , All compulsory Must know part:7 SAQ Desirable to know: 1 SAQ Nice to know: Nil	1. Theme A 2. Theme B 3. Theme E 4. Theme F 5. Theme G 6. Theme I 7. Theme J 8. Theme K
Q3	Long answer Questions (LAQ) 5 Questions 10 Marks each All compulsory	1. Theme C 2. Theme D 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 ofPathology 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.	**Topic**
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 laboratory	4
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 physical, chemical and microscopical examination.	4
11.	Examination of Faeces- demonstration of physical, chemical (occult blood)and microscopical for ova and protozoa.	2
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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-PathM.1.1	KS	K	Basic definitions	Define the terms "Pathology", "Pathophysiology", "Health", "Disease"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	
HomUG-PathM.1.2	KS	K	Branches of Pathology	State the branches of Pathology	C1	MK	Lecture Slide presentation	Viva Voce MCQ	Viva Voce MCQ	
HomUG-PathM.1.3	KS	K	Contributions of important scientists to Pathology	List the contribution of important scientists to Pathology	C1	NK	Lecture Slide presentation	Viva Voce MCQ	NA	
HomUG-PathM.1.4	KS	K	Common terms for study of diseases	Enumerate the common terms for study of diseases	C1	MK	Lecture Slide presentation	Viva Voce MCQ	Viva Voce MCQ	
HomUG-PathM.1.5	KS	K	Definition of health as per Homoeopathic philosophy	Define Health according to Homoeopathic concept – Aphorism -9	C1	MK	Lecture Slide presentation	Viva Voce MCQ	Viva Voce MCQ	Organon of Medicine

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

5.2. Cell injury and cellular adaptation-

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

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

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

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

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

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

HomUG-PathM 2.34	KS	K		Describe the types of Necrosis with examples	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomUG-PathM 2.35	KS	K	Coagulative Necrosis	Describe the etiopathogenesis of Coagulative necrosis	C 2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomUG-PathM 2.36	KS	KH		Describe themorphological features of Coagulative necrosis in affected organs	C 2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomUG-PathM 2.37	KS	KH	Liquefactive necrosis	Describe the etiopathogenesis of liquefactive necrosis	C 2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomUG-PathM 2.38	KS	KH		Describe the morphological features of liquefactive necrosis in affected organs	C 2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomUG-PathM 2.39	KS	KH	Differences between coagulative necrosis and liquefactive necrosis	Enumerate differences between coagulative necrosis and liquefactive necrosis	C 2	MK	Lecture Slide presentation	Viva Voce SAQ MCQ	Viva Voce SAQ MCQ	

HomU G-Path M 2.40	KS	KH	Caseous necrosis	Describe the etiopathogenesis caseous necrosis	C 2	MK	Lecture Slide present ation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M 2.41	KS	KH		Describe themorphological features of caseous necrosis inaffected organs	C 2	MK	Lecture Slide present ation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M 2.42	KS	KH	Fat necrosis	Describe the etiopathogenesis, morphological features of fat necrosis	C2	MK	Lecture Slide present ation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M 2.43	KS	KH	Fibrinod necrosis	Describe the etiopathogenesis, microscopic features of fibrinod necrosis	C2	MK	Lecture Slide present ation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M 2.44	KS	K	Gangrene	Define the term “Gangrene”	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery
HomU G-Path M 2.45	KS	K		State the types of gangrene	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery

HomU G-Path M 2.46	KS	KH	Dry gangrene	Explain the etiopathogenesis morphological features of dry gangrene with examples	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery
HomU G-Path M 2.47	KS	KH	Wet gangrene	Describe the etiopathogenesis morphological features of wet gangrene with examples	C 2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Surgery
HomU G-Path M 2.48	KS	KH	Differences between dry gangrene and wet gangrene	Enumerate the differences between dry gangrene and wet gangrene	C 2	MK	Lecture	Viva Voce SAQ MCQ	Viva Voce SAQ MCQ	
HomU G-Path M 2.49	KS	KH	Etiopathology of Gas gangrene	Explain the etiopathogenesis and morphological features of Gas gangrene	C 2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M 2.50	KS	K	Pathological calcification	Define the term "Pathological calcification"	C 1	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M 2.51	KS	KH		Enumerate the types of pathological calcification	C 1	MK	Lecture Slide presentation	MCQ Viva Voce	MCQ Viva Voce	

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

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

5.3. Inflammation and repair-

Sl.No.	**Domain of Competency**	**Miller**	**Content**	**SLO**	**Bloom / Guilbert**	**Priority**	**TL MM**	**Assessment**		**Integration**
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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	

HomUG-PathM.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	
HomUG-PathM.3.5	KS	K	Definition of Acute inflammation"	Define the term "Acute inflammation"	C 1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	
HomUG-PathM.3.6	KS	KH	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	
HomUG-PathM.3.7	KS	KH	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	
HomUG-PathM.3.8	KS	KH	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	
HomUG-PathM.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	
HomUG-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	KH	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	KH	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	KH	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	KH	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	KH	Systemic effects of inflammation	Describe the systemic effects of acute inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ	

HomUG-PathM.3.17	KS	KH	Outcomes of Acute Inflammation	Describe the end result of Acute Inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ	
HomUG-PathM.3.18	KS	K	Chronic inflammation	Define the term “chronic inflammation"	CI	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomUG-PathM.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	
HomUG-PathM.3.20	KS	KH	Morphologic Features of chronic inflammation	Describe the general features of chronic inflammation	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomUG-PathM.3.21	KS	KH	Granulomatous inflammation	Describe chronic non-specific inflammation with examples	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomUG-PathM.3.22	KS	KH	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	KH		Describe the morphology of granuloma	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG-Path M 3.24	KS	K	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	KH	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	K	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	KH	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	KH	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	KH	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	KH	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 LAQ	
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	KH	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	Priority	TL MM	Assessment		Integration
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HomUG-PathM.4.1	KS	K	Definition of Oedema.	Define the term “Oedema”	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology
HomUG-PathM.4.2	KS	KH	Types of Oedema.	Describe the pathogenesis of oedema	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomUG-PathM.4.3	KS	KH	Transudate and exudate	Enumerate the differences between transudate and exudate	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomUG-PathM.4.4	KS	KH	Etiopathogenesis 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	
HomUG-PathM.4.5	KS	K	Definition of Hyperaemia	Define the term “Active Hyperemia”	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	

HomUG-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	
HomUG-Path M.4.7	KS	KH	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	
HomUG-Path M.4.8	KS	KH		Explain morphology of Chronic Venous Congestion in Lung	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomUG-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
HomUG-Path M.4.10	KS	K	Shock	Define the term "Shock"	C1	MK	Lecture	Viva Voce MCQSAQ	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	KH		Describe the pathogenesis of various types of shock	C2	MK	Lecture	Viva Voce MCQSAQ	Viva Voce MCQ SAQ LAQ	

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

Hom UG-Path M.4.19	KS	KH	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	KH	Etiopathogenesis of Pulmonary thromboembolism	Describe the aetiopathogenesis of Pulmonary thromboembolism	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG-Path M 4.23	KS	KH	Pathogenesis of Thromboembolism	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	KH	Pathogenesis of aminiotic fluid embolism	Describe the pathogenesis 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	KH		Describe the etiopathogenesis of Ischaemia	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
Hom UG-Path M.4.29	KS	KH		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	

5.5. Immunopathology-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-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
HomUG-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
HomUG-Path M.5.3	KS	KH	Components of Innate immunity	Describe the four components of Innate immunity	C2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Physiology
HomUG-Path M.5.4	KS	KH	Functions of Innate immunity	Describe the functions of Innate immunity	C2	MK	Lecture Slide presentation	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	Physiology

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

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	KH	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	KH	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	KH	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", "Immunoglobulin"	Define the terms "Antibody", "Immunoglobulin"	C1	MK	Lecture	Viva Voce MCQ	Viva Voce MCQ	Physiology

HomU G-Path M.5.18	KS	K	Immunoglobulin 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	KH	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 antigen-antibody reaction with examples	Discuss the types of antigen-antibody 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 Hypersensitivity	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 hypersensitivity 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	KH	Type I Hypersensitivity	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 Hypersensitivity 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	KH	Type II Hypersensitivity 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	KH	Type II Hypersensitivity reaction – examples	Describe the examples of type II hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.5.27	KS	KH	Type III Hypersensitivity 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	KH	Type III Hypersensitivity reaction – examples	Describe the examples of type III hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	

HomU G-Path M.5.29	KS	KH	Type IV Hypersensitivity reaction	Describe the mechanism of type IV hypersensitivity reaction	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.5.30	KS	KH	Type IV Hypersensitivity reaction – examples	Describe the examples of type IV hypersensitivity reaction	C2	MK	Lecture	Viva Voce SAQ MCQ	Viva Voce SAQ MCQ LAQ	
HomU G-Path M.5.31	KS	K	Autoimmunity	Define the term "Autoimmunity"	C1	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.5.32	KS	KH		Describe the pathogenesis of autoimmunity	C2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.5.33	KS	K	Autoimmune diseases	State the autoimmune diseases	C1	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.5.34	KS	K	Amyloidosis	Define the term "Amyloidosis"	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.5.35	KS	K		Classify amyloidosis	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	

HomU G-Path M.5.36	KS	KH		Describe the pathogenesis of amyloidosis	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ LAQ	
HomU G-Path M.5.37	KS	KH		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	Priority	TL MM	Assessment		Integration
								F	S	
HomU G-Path M.6.1	KS	K	Definition of Neoplasia	Define the term “Neoplasia”	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.6.2	KS	K	Nomenclature of tumours	Explain the nomenclature of tumours	C 1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ 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	KH	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	KH		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 “Differentiation”, “Anaplasia”	Define the terms “Differentiation”, “Anaplasia”	C1	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	

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

HomU G-Path M.6.21	KS	KH	Spread of cancer along body cavities and natural passages	Describe the mechanism of spread of cancer along body cavities and natural passages	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	
HomU G-Path M.6.22	KS	KH	Molecular basis of cancer	Describe Molecular basis of cancer	C2	NK	Lecture	NA	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	KH	Physical carcinogenesis	Describe the mechanism of physical carcinogenesis	C2	MK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	

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

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	KH	Homoeopathic concept	Discuss about the miasmatic concept of neoplastic disorder	C 2	DK	Lecture	Viva Voce MCQ SAQ	Viva Voce MCQ SAQ	OM,MM,Repertory

5.7. Environmental and nutritional diseases-

Sl. No.	**Domain of Competency**	**Miller**	**Content**	**SLO**	**Bloom / Guilbert**	**Priority**	**TL MM**	**Assessment**		**Integration**
								F	**S**	
HomU G-Path M.7.1	KS	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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	KH	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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Vivavoce MCQ	Physiology
HOMU G-Path M. 8.2	KS	KH	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	LAQSAQ. Viva MCQ	Physiology
HOMU G-Path M. 8.4	KS	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMU G-Path M. 8.6	KS	KH		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	KH		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	KH	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	KH		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	KH		Discuss the etio- pathogenesis of Pernicious Anaemia	C 2	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.12	KS	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
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HOMUG-PathM. 8.14	KS	KH		Classify Haemolytic Anaemias	C2	MK	Lecture	Viva voce, MCQ	LAQ SAQ. Viva . MCQ	
HOMUG-PathM. 8.15	KS	KH		Describe laboratory evaluation of Haemolytic Anaemia	C 2	MK	Lecture	Viva voce, MCQ	LAQ SAQ. Viva . MCQ	
HOMUG-PathM. 8.16	KS	K	types of Haemoglobinopathies	Classify Haemoglobinopathies	C 1	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMUG-PathM. 8.17	KS	K	Sickle cell Anaemia	Define Sickle cell Anaemia	C 1	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMUG-PathM. 8.18	KS	KH		Discuss theetio- pathogenesis of sickle cell anaemia	C2	DK	Lecture	Viva voce, MCQ	LAQSAQ. Viva . MCQ	
HOMUG-PathM. 8.19	KS	KH		Discuss the laboratory findings of sickle cell anaemia	C 2	DK	Lecture	Viva voce, MCQ	LAQSAQ. Viva . MCQ	
HOMUG-PathM. 8.20	KS	K	Thalassemia	Define Thalassemia	C 1	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMU G-Path M. 8.21	KS	KH		Classify Thalassaemia	C 2	MK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.22	KS	KH		Discuss the pathophysiology of anaemia in Thalassemia	C 2	MK	Lecture	Viva voce, MCQ	LAQSAQ. Viva . MCQ	
HOMU G-Path M. 8.23	KS	KH		Describe the laboratory findings of Thalassaemia.	C 2	MK	Lecture	Viva voce, MCQ	LAQSAQ. Viva . MCQ	Practice of medicine
HOMU G-Path M. 8.24	KS	K	Aplastic anaemia.	Define the term "Aplastic anaemia"	C 1	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.25	KS	KH	.	State the etiology of Aplastic anaemia.	C 2	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	
HOMU G-Path M. 8.26	KS	KH		Describe laboratory findings of Aplastic anaemia.	C 2	DK	Lecture	Viva voce, MCQ	SAQ. Viva .MCQ	Practice of medicine
HOMU G-Path M. 8.27	KS	K	Polycythaemia	Define Polycythaemia	C 1	DK	Lecture	Viva voce, MCQ	SAQ. Viva . MCQ	

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

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

5.9. Diseases of the Respiratory System

l. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		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	KH		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	KH		Describe aetiopathogenesis of lung abscess	C 2	MK	Lecture	Viva SAQ MCQ	Viva MCQ	Practice of medicine
HOMUG-Path M. 9.19	KS	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		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	KH		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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 9.29	KS	K		Classify Bronchial Asthma	C1	MK	Lecture	Viva SAQ MCQ	LAQ Viva SAQ MCQ	
HOMUG-Path M. 9.30	KS	K		Enumerate the differences between Extrinsic Asthma and Intrinsic Asthma	C1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ Viva MCQ	Practice of medicine
HOMUG-Path M. 9.31	KS	KH		Describe the morphologic features of Bronchial asthma	C 2	MK	Lecture	Viva SAQ MCQ	LAQ Viva SAQ MCQ	
HOMUG-Path M. 9.32	KS	K	Bronchiectasis	Define the term "Bronchiectasis"	C1	MK	Lecture	Viva voce, MCQ	SAQ Viva MCQ	
HOMUG-Path M. 9.33	KS	KH		Describe the aetiopathogenesis of bronchiectasis	C 2	MK	Lecture	Viva voce, MCQ	SAQ Viva MCQ	Practice of medicine
HOMUG-Path M. 9.34	KS	K		Describe the morphology of bronchiectasis	C1	MK	Lecture	Viva voce, MCQ	SAQ Viva MCQ	
HOMUG-Path M. 9.35	KS	K	Pneumoconiosis	Define the term "Pneumoconioses"	C1	DK	Lecture	Viva MCQ	SAQ Viva MCQ	
HOMUG-Path M. 9.36	KS	K		Classify Pneumoconiosis	C1	DK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	
HOMUG-Path M. 9.37	KS	KH	coal worker's pneumoconiosis.	Describe the etio-pathogenesis of coal worker's pneumoconiosis.	C2	DK	Lecture	Viva SAQ MCQ	SAQ Viva MCQ	Practice of medicine

l. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH	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	KH		Describe the morphology of Reflux Oesophagitis	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ MCQ Viva	
HOMUG-Path M. 10.8	KS	KH	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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 10.11	KS	K		Describe the morphology of Carcinoma of oesophagus	C 1	NK	Lecture	Viva SAQ MCQ	NA	
HOMUG-Path M. 10.12	KS	KH		Describe the spread of Carcinoma oesophagus.	C2	NK	Lecture	Viva SAQ MCQ	NA	Practice of medicine, Surgery
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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 10.18	KS	KH		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	KH		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	KH		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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 10.26	KS	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 10.33	KS	K		Describe the morphology of Colorectal cancer	C 1	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, 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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 11.1	KS	K	Liver Function Tests	Discuss the liver function tests alongwith clinical significance of each	C 1	MK	Lecture	OSPE Viva MCQ	OSPEL AQ SAQ MCQ Viva	
HOMUG-Path M. 11.2	KS	K	Jaundice	Define the term “Jaundice”	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG-Path M. 11.3	KS	K		State the pathophysiologic classification of jaundice.	C 1	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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, MCQViva	
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, MCQViva	Practice of medicine
HOMUG-Path M. 11.10	KS	KH		Describe the morphology of Alcoholic cirrhosis	C 2	MK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQViva	

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

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 12.3	KS	K		State the morphologic features of acute pancreatitis.	C 1	MK	Lecture	Viva voce, SAQ MCQ	MCQ, Viva 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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		Describe the aetiology of Atherosclerosis	C 2	MK	Lecture	Viva MCQ SAQ	LAQ SAQ MCQ Viva	Practice of medicine

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 13.5	KS	KH		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	KH		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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH	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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M. 14.8	KS	KH	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	KH		Describe the gross changes in Myocardial infarction	C 2	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HomUG-Path M. 14.10	KS	KH		Describe the microscopic changes in Myocardial infarction	C 2	DK	Lecture	Viva SAQ MCQ	LAQ SAQ, MCQ, Viva	
HomUG-Path M. 14.11	KS	KH		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	KH		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	LAQSAQ, MCQ, Viva voce	

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	LAQSAQ, 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	KH	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	KH		Define the term “Pericardial effusion”	C 2	MK	Lecture	Viva MCQ	MCQ, Viva	
HomUG-Path . 14.22	KS	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 15.1	KS	K	Renal function tests	Discuss renal function tests in detail	C 1	MK	Lecture	Viva MCQ	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 MCQ 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, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG-Path M. 15.4	KS	KH	Acute nephritic syndrome.	Describe the clinical features of Acute nephritic syndrome.	C 2	DK	Lecture	Viva voce, MCQ 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 MCQ SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 15.6	KS	K		Describe the characteristic features of Nephrotic syndrome	C 1	DK	Lecture	Viva MCQ 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, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	
HOMUG-Path M. 15.8	KS	K	Glomerulonephritis	Define Glomerulonephritis	C 1	DK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG-Path M. 15.9	KS	KH	Acute Post-Streptococcal Glomerulonephritis	Describe the aetio-pathogenesis of Acute post-streptococcal glomerulonephritis.	C 2	MK	Lecture	Viva MCQ 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, MCQ 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	MK	Lecture	Viva MCQ SAQ	LAQ SAQ, MCQ, Viva	

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M.15.12	KS	K		Describe the morphology of each type of renal stones	C 1	MK	Lecture	Viva SAQ MCQ	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 MCQ	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, MCQ 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, MCQ 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, MCQ SAQ	NA	Practice of medicine, Surgery

5.16. Diseases of male reproductive system-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 16.9	KS	KH		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	KH	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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 17.5	KS	KH		Define the term Leiomyomas	C 1	DK	Lecture	Viva MCQ SAQ	MCQ Viva SAQ	OBG
HOMUG-Path M. 17.6	KS	KH		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	KH	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	KH		Describe the pathology of Fibroadenoma breast	C 2	MK	Lecture	Viva voce, MCQ	SAQ, MCQ,	

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
								SAQ,	Viva voce	
HOMUG-Path M. 17.13	KS	K	Tumors of breast	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	KH		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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 18.1	KS	K	Tumors of skin	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	KH		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	KH		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	KH	Soft tissue tumors	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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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 Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HOMUG-Path M. 20.1	KS	KH	Thyroid function tests	Interpret the abnormalities in a panel containing thyroid function tests	C 2	MK	Lecture	Viva MCQ	OSPE MCQ, Viva SAQ	
HOMUG-Path M. 20.2	KS	K	Goitre	Define the term "Goitre"	C 1	MK	Lecture	Viva MCQ	SAQ, MCQ, Viva	
HOMUG-Path M. 20.3	KS	K		Describe the etio-pathogenesis of Goitre	C 2	MK	Lecture	Viva MCQ 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, MCQ SAQ	LAQ SAQ, MCQ, Viva voce	Practice of medicine
HOMUG-Path M. 20.5	KS	KH	Goitre	Describe the morphology of Colloid Goitre	C 2	MK	Lecture	Viva voce, MCQ 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 MCQ SAQ	LAQ SAQ, MCQ, Viva	Practice of medicine

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

5.21. Diseases of the nervous system-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom / Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		Enumerate the CSF findings in Bacterial meningitis	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ, Viva	
HOMUG-Path M. 21.3	KS	KH		Enumerate the CSF findings in Tubercular meningitis	C 1	DK	Lecture	Viva MCQ SAQ	SAQ, MCQ, Viva	
HOMUG-Path M. 21.4	KS	KH		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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M. 22.1	KS	K	Basic definitions	Define the terms "Microbiology", "Medical Microbiology "Clinical Microbiology".	C1	NK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 22.2	KS	K	Contributions of important scientists to Microbiology	List the contribution of important scientists to Microbiology	C1	NK	Lecture	Viva Voce	NA	
HomUG-Path M 22.3	KS	K	Koch's postulate	State the Koch's postulate	C1	MK	Lecture	Viva voce MCQ	SAQ Viva voce MCQ	
HomUG-Path M 22.4	KS	K	Normal Human microbiota	List the anatomical location of normal bacterial flora in the human body	C1	MK	Lecture	MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M. 22.5	KS	KH	Role of normal human microbiota	Explain the role of human microbiota in health and disease.	C2	MK	Lecture	MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 22.6	KS	KH	Role of probiotics	Explain the role of probiotics.	C2	MK	Lecture	MCQ Viva voce	MCQ Viva voce	

5.23. Bacterial structure, growth and nutrition-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	Classification 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	KH		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	KH	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	KH		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	KH	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	KH		Describe the classification of bacteria based on energy requirements	C2	DK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M. 23.10	KS	KH		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	Assessment		Integration
								F	S	
HomUG-Path M 24.1	KS	K	Definitions	Define 'Sterilization', "Disinfection", "Asepsis", "Decontamination", "Bactericidal agents" ,"Bacteriostatic agents"	C1	MK	Lecture	Viva voce MCQ	SAQ Viva voce MCQ	
HomUG-Path M 24.2	KS	K	Methods of sterilization	Describe the various methods of sterilization	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG-Path M 24.3	KS	KH	Physical methods of sterilization	Describe the various physical methods of sterilization	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	

HomUG-Path M 24.4	KS	KH		Describe the procedure of sterilization using hot air oven	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M 25.1	KS	K	Staining methods	Discuss the various staining methods of bacteria	C1	MK	Lecture	MCQ Viva voce	MCQ Viva Voce SAQ	
HomUG-Path M 25.2	KS	KH		Discuss the steps of gram staining	C2	MK	Lecture	MCQ Viva voce	MCQ Viva Voce SAQ	
HomUG-Path M 25.3	KS	KH	Classification of bacteria	Classify bacteria based on gram staining property	C1	MK	Lecture	MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 25.4	KS	K	Staining methods	Discuss differences between gram positive and gram negative bacteria	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 25.5	KS	K	Staining methods	Discuss the steps of Acid fast staining	C1	MK	Lecture	SAQ MCQ Viva voce	MCQ Viva Voce SAQ	
HomUG-Path M 25.6	KS	K	Culture media	Describe types of culture media based on consistency with examples	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG-Path M 25.7	KS	K		Describe culture media based on constituents with examples	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG-Path M 25.8	KS	K		Describe culture media based on functional requirement with examples	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	

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

5.26. Infection and disease-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M 26.1	KS	K	Infection and Disease	Define the terms" infection" pathogen, pathogenesis, pathogenicity, Virulence", infectious disease	C1	MK	Lecture	Viva voce MCQ	SAQ Viva voce MCQ	
HomUG-Path M 26.2	KS	KH		Describe the various types of infections	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG-Path M 26.3	KS	KH		Describe the sources of infection	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG-Path M 26.4	KS	KH		Describe the methods of transmission of infection	C2	MK	Lecture	SAQ MCQ	LAQ SAQ 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 MCQ	
HomUG-Path M 26.6	KS	KH	Exotoxins and Endotoxins	Describe the features of exotoxins	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M 26.7	KS	KH		Describe the features of Endotoxins	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M 26.8	KS	KH		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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M 27.1	KS	K	Staphylococci	Explain the morphology of Staphylococci	C1	MK	Lecture	Viva voce MCQ	SAQ Viva voce MCQ	
HomUG-Path M 27.2	KS	K		List the virulence factors of Staphylococcus aureus	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva	
HomUG-Path M 27.3	KS	KH		Explain the pathogenesis of staphylococcus aureus infections	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG-Path M 27.4	KS	KH		Describe the laboratory diagnosis of staphylococcal infections	C2	DK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Practice of medicine
HomUG-Path M 27.5	KS	K	Pneumococci	Explain the morphology of Pneumococci	C1	MK	Lecture	Viva voce MCQ	SAQ MCQ Viva voce	
HomUG-Path M 27.6	KS	KH		Describe the virulence factors of Pneumococci	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 27.7	KS	KH		Describe the pathogenesis of Pneumococcus	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M 27.8	KS	KH		Describe the laboratory diagnosis of Pneumococcal infections	C2	MK	Lecture	SAQ MCQ	SAQ MCQ 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	KH		Describe the virulence factors of Streptococcus pyogenes	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 27.11	KS	KH		Explain the pathogenicity of Streptococcus pyogenes	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG-Path M 27.12	KS	KH		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	KH		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	KH		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	KH		Describe the pathogenicity of Bacillus anthracis	C2	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG-Path M 27.19	KS	KH		Describe the clinical features of Human anthrax	C2	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 27.20	KS	KH		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	KH		Describe pathogenesis of Clostridium tetani	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG-Path M 27.24	KS	KH		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	KH		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	KH		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	KH	Clostridium Difficile	Describe the pathogenicity of Clostridium difficile	C2	NK	Lecture	NA	NA	

5.28. Gram negative bacterias-

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

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

HomUG-Path M 28.26	KS	KH		Describe pathogenesis and clinical features of cholera	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Community medicine, Practice of medicine
HomUG-Path M 28.27	KS	KH		Describe the laboratory diagnosis of Cholera	C1	DK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG-Path M 28.28	KS	KH	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	Not to be 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	KH		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-Path M 28.34	KS	K	Brucella	Explain the morphology of Brucellae	C1	DK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 28.35	KS	KH		Describe the pathogenesis of Brucellosis.	C2	DK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG-Path M 28.36	KS	K		Describe the laboratory diagnosis of Brucellae	C1	NK	Lecture	NA	NA	
HomUG-Path M 28.37	KS	K	Helicobacter pylori	Describe the morphology of Helicobacter pylori	C1	NK	Lecture	NA	NA	
HomUG-Path M 28.38	KS	KH		Describe the pathogenicity of Helicobacter pylori infection	C2	DK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 28.39	KS	K		Describe the laboratory diagnosis of Helicobacter pylori infection	C1	NK	Lecture	NA	NA	
HomUG-Path M 28.40	KS	K	Rickettsiae	Discuss the human diseases caused by Rickettsiae group of organism	C1	DK	Lecture	MCQ Viva voce	MCQ Viva voce	
HomUG-Path M 28.41	KS	K	Chlamydia	Describe the diseases caused by chlamydia	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	

5.29. Acid fast bacterias-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		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	KH		Describe the pathology of Primary tuberculosis	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	
HomUG-Path M. 29.4	KS	KH		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	KH		Discuss the pathology of Leprosy	C2	MK	Lecture	Viva voce MCQ	SAQ Viva voce	

									MCQ LAQ	
HomUG-Path M. 29.8	KS	KH		Differentiate between Lepromatous and Tuberculoid leprosy	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 laboratory diagnosis of Mycobacterium Leprae	C1	DK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M. 29.10	KS	KH		Discuss Lepromin test	C2	DK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	

5.30. Spirochaetes

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

HomUG-Path M. 30.4	KS	KH		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 assessed		
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	KH		Describe pathogenicity of Leptospira	C2	MK	Lecture	SAQ MCQViva voce	SAQ MCQ Viva voce	

HomUG-Path M. 30.13	KS	KH		Describe the clinical manifestations of Leptospirosis	C2	MK	Lecture	MCQViva voce	MCQViva voce	

5.31. Fungi

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

HomUG-Path M. 31.9	KS	KH		Describe the pathogenesis of Candidiasis	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M. 31.10	KS	KH	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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M 32.1	KS	K	Introduction to parasitology	Define the terms "parasite","Host"	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 32.2	KS	K		State the types of parasites with examples	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 32.3	KS	K		State the types of Host with examples	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 32.4	KS	K		List the three categories of host parasite relationship	C1	MK	Lecture	Viva voce MCQ	SAQ Viva voce MCQ	
HomUG-Path M 32.5	KS	K		Define the terms Symbiosis,Commensalism,Parasitism	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 32.6	KS	K	Protozoa – Intestinal – Entamoeba histolytica	Describe the morphology of Entamoeba histolytica	C1	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ 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	KH		Describe the clinical manifestations of Entamoeba histolytica	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG-Path M 32.9	KS	KH		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	KH		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	KH		Describe the life cycle of Trichomonas vaginalis	C1	DK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG-Path M 32.16	KS	KH		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 – plasmodium - species	Explain the life cycle of Plasmodium species	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG-Path M 32.18	KS	KH		Describe the pathogenesis Plasmodium species	C2	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 32.19	KS	KH		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	KH		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	Not to be 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	KH	Trypanosoma brucei	Describe the Life cycle of Trypanosoma brucei	C2	DK	Lecture	SAQ MCQ	MCQ	
HomUG-Path M 32.27	KS	KH		Describe the Pathogenecity of Trypanosoma brucei	C2	DK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG-Path M 32.28	KS	KH		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 be assessed		
HomUG-Path M 32.30	KS	K	Blood and Tissues – Trypanosoma Cruzi	Describe the morphology of Trypanosoma Cruzi	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG-Path M 32.31	KS	K		Describe the Life cycle of Trypanosoma Cruzi	C1	MK	Lecture	SAQ MCQ	SAQ MCQ LAQ	
HomUG-Path M 32.32	KS	KH		Describe the Pathogenicity of Trypanosoma Cruzi	C2	MK	Lecture	SAQ MCQ	SAQ MCQ LAQ	
HomUG-Path M 32.33	KS	KH		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	CK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	

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

5.33. Helminths-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M 33.1	KS	K	Helminths – Cestodes – Echinococcus granulosus	Describe the morphology of Echinococcus granulosis	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG-Path M 33.2	KS	KH		Describe the life cycle of Echinococcus granulosis	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG-Path M 33.3	KS	KH		Describe the pathogenesis of Echinococcus granulosis	C2	MK	Lecture	MCQ	LAQ SAQ MCQ Viva	
HomUG-Path M 33.4	KS	KH		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	KH		Describe the life cycle of Taenia saginata	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	
HomUG-Path M 33.8	KS	KH		Describe the life cycle of Taenia solium	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva	

HomUG-Path M 33.9	KS	KH		Describe the pathogenicity and clinical features of taeniasis	C2	MK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva voce	Community medicine
HomUG-Path M 33.10	KS	K		Describe the lab diagnosis of taeniasis.	C1	DK	Lecture	SAQ MCQ Viva voce	LAQ SAQ MCQ Viva	
HomUG-Path M 33.11	KS	K	Helminths – Trematodes – Paragonimuswestermani	Describe the morphology of Paragonimuswestermani	C1	DK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 33.12	KS	K		Describe the life cycle of Paragonimuswestermani	C1	DK	Lecture	SAQ MCQ	MCQ	
HomUG-Path M 33.13	KS	KH		Describe the pathogenicity and clinical features of Paragonimuswestermani	C2	DK	Lecture	SAQ MCQ Viva voce	MCQ Viva voce	
HomUG-Path M 33.14	KS	K		Describe the lab diagnosis of paragonimiasis	C1	NK	Lecture	Not to be assessed		
HomUG-Path M 33.15	KS	K	Helminths – Trematodes – Schistosoma haematobium	Describe the morphology of Schistosoma haematobium	C1	MK	Lecture	SAQ MCQ Viva voce	SAQ MCQ Viva voce	
HomUG-Path M 33.16	KS	KH		Describe the life cycle of Schistosoma haematobium	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M 33.17	KS	KH		Describe the pathogenicity and clinical features of Bilharziasis	C2	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M 33.18	KS	K		Describe the lab diagnosis of Bilharziasis	C1	DK	Lecture	SAQ MCQ	SAQ MCQ 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	KH		Describe the life cycle of Ancylostoma duodenale	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG-Path M 33.24	KS	KH		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	KH		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	KH		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	KH		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	KH		Describe the life cycle of Strongyloidesstercoralis	C1	NK	Lecture	NA	NA	
HomUG-Path M 33.36	KS	KH		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	KH		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 assessed		
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	KH		Describe the life cycle of Wuchereriabancrofti	C2	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG-Path M 33.43	KS	KH		Describe pathogenesis of Wucheririabancrofti	C2	MK	Lecture	SAQ MCQViva voce	LAQ SAQ MCQViva voce	
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	KH	Helminths – Filarial Nematodes – Brugiamalayi	Describe pathogenesis of Brugiamalayi	C2	NK	Lecture	Viva voce MCQ	Viva voce MCQ	

HomUG-Path M 33.46	KS	KH	Loa Loa	Describe pathogenesis of Loa Loa	C2	NK	Lecture	NA	NA	
HomUG-Path M 33.47	KS	KH	Onchocerca volvulus	Describe pathogenesis of Onchocerca volvulus	C2	NK	Lecture	NA	NA	
HomUG-Path M 33.48	KS	KH	Dracunculus medinensis	Describe pathogenesis of Dracunculus medinensis	C2	NK	Lecture	NA	NA	
HomUG-Path M 33.49	KS	KH	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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
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	C1	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	C1	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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
HomUG-Path M 35.1	KS	K	DNA virus – Pox virus-	State the pox virus which infect humans	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 35.2	KS	K		Describe the clinical features of Molluscum contagiosum	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	
HomUG-Path M 35.3	KS	K	DNA virus – Papova virus-Human papillomavirus	Discuss the diseases caused by Human Papilloma virus	C1	MK	Lecture	SAQ MCQ	SAQ MCQ	

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	KH		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	KH	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	C1	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	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	

5.36. RNA viruses-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	KH		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 be 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	KH		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 be assessed		

HomUG-Path M 36.18	KS	KH		Describe the clinical features of Respiratory syncytial virus infection	C2	DK	Lecture	SAQ MCQ	MCQ Viva voce	
HomUG-Path M 36.19	KS	K	RNA virua – Corona virus	Explain the morphology of Coronavirus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 36.20	KS	K		State the types of corona virus infecting humans	C1	MK	Lecture	Viva voce MCQ	LAQ SAQ Viva voce MCQ	
HomUG-Path M 36.21	KS	K		Describe the clinical features of Corona virus disease	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ Viva voce	
HomUG-Path M 36.22	KS	K		Explain the laboratory diagnosis of Corona virus disease	C1	MK	Lecture	SAQ MCQ	LAQ SAQ MCQ	
HomUG-Path M 36.23	KS	K	RNA virus – Rhabdovirus – Rabies virus	Explain the morphology of Rabies virus	C1	MK	Lecture	Viva voce MCQ	Viva voce MCQ	
HomUG-Path M 36.24	KS	K		Describe the mode of transmission of Rabies	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	
HomUG-Path M. 36.25	KS	K		Describe the pathogenicity of Rabies	C1	MK	Lecture	SAQ MCQ	SAQ MCQ MCQ Viva voce	
HomUG-Path M. 36.26	KS	K		Describe the clinical stages of Rabies	C1	MK	Lecture	SAQ MCQ	SAQ MCQ Viva voce	Community medicine
HomUG-Path M. 36.27	KS	K		Explain the laboratory diagnosis of human rabies	C1	MK	Lecture	SAQ MCQ	SAQ MCQ 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 be 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	KH		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 Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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
HomUG-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
HomUG-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
HomUG-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,Adult females	1. Perform the counting of WBC using haemocytometer 2. 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	1. Examine the blood smear for counting of differential leucocyte count. 2. 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	1. Observe the experiment using Westergren method. 2. 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	1. Observe the experiment using Wintrobe method. 2. 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	1. Perform the experiment using Duke's method 2. 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	1. Perform the experiment using fingertip method 2. 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	1. Observe the experiment of counting of Platelet of blood sample 2. 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	1. Perform the physical examination of urine sample 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 M38.14	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	1. Perform the microscopical examination of urine sample 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 M38.16	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	1. Observe the procedure of physical examination of faeces 2. 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:Microscopic 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	1. Observe the procedure of microscopical examination of faeces for ova and protozoa 2. 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	1. Observe the procedure of chemical examination of faeces 2. 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	1. Observe the procedure of examination of semen 2. 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	1. Identify the different parts of microscope 2. 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	1. Observe the method of sterilization using hot air oven 2. Observe the method of sterilization using autoclave 3. 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	1. Observe the procedure of Motility preparation 2. 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	1. Perform gram staining on the given sample 2. Observe under the microscope 3. 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	1. To observe the procedure of Acid fast staining 2. 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.Haemoglobinometer 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

	7.Hot air oven 8.Autoclave 9.Incubator 10.Petri dish 11.Centrifuge 12.Waterbath 13.Inoculating loop etc.					
HomUG-PathM38.27	**Interpretation of laboratory reports and its clinico pathological correlation** Complete Haemogram Urine reports Liver 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	1.Study the laboratory reports 2.Interpret the values in the laboratory reports 3.Make entries into the pathology practical record	Viva voce OSPE Checklist
HomUG-PathM38.28	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

HomUG-PathM38.29	**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
HomUG-PathM38.30	(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)

Sr. No	Professional Course	Term I (1-6 Months)		Term II (7-12 Months)		
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)	
		20 Marks Viva	100 Marks Practical/ 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 X 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
B	Neoplasia ,Immunopathology and Homoeopathic concept	I	21	Yes	Yes	Yes
C	Haemodynamic disorders ,Environmental and Nutritional diseases and Homoeopathic concept	I	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
E	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
B	Gram positive bacterias	I	17	Yes	Yes	Yes
C	Parasites-protozoans , Virology introduction	I	17	Yes	Yes	Yes
D	Gram negative bacterias, Acid fast bacterias ,Spirochaetes	II	21	Yes	Yes	Yes
E	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 **Question Serial Number**	**B** **Type of Question**	**Question Paper Format** **(Refer table 7.4 for themes)**
Q1	Multiple Choice Questions(MCQ) 10 Questions 1 mark each All compulsory	1. Theme A 2. Theme B 3. Theme C 4. Theme C 5. Theme D 6. Theme D 7. Theme E

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

7.8 Details of practical assessment

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

3.	**Spotters (5):25 marks**				
	ANY FIVE SPOTTERS (Instruments/ Equipments/ Specimens / Models)	•Identify the spot •List the characteristic features/ utility of the spot.	2 3	5 marks X 5 = 25 marks	3 minutes for each spotting=15 minutes
4.	**Spotting –Slides (5): 25 marks**				
	Any five Slides (Histopathology/parasitology/microbiology)	•Identify the slide •List three features of the given slide	2 3	5 marks X 5 = 25 marks	3 minutes for each slide=15 minutes
5.	Journal or Practical record	------	----	15 marks	
	Total Practical 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 andLaboratory 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 relation to physiological values	2
2.	Discuss the probable reason for abnormal values in laboratory report and its clinical significance	3

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

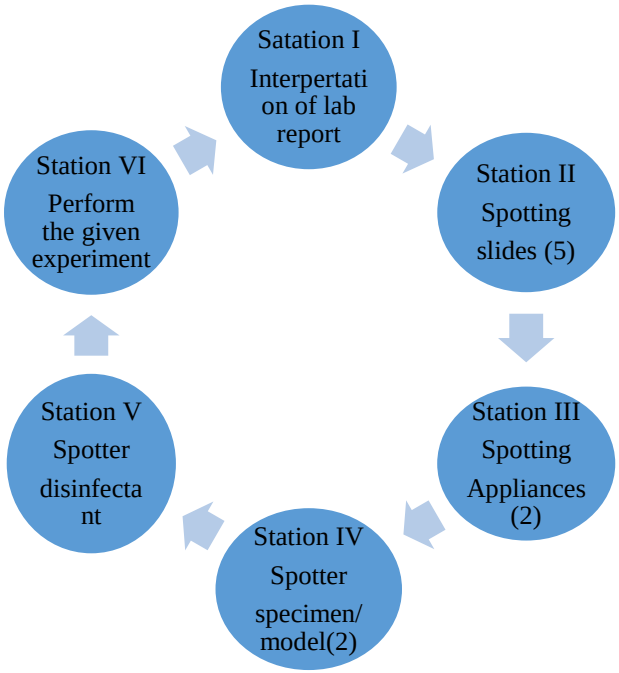
•Write the procedure and perform the experiment (15)

•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: Practice of Medicine

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

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	
1	Approach to Patient: a) Doctor & Patient: General Principles of History Taking b) Physical Examination General Principles c) Differential Diagnosis: The beginning of management plan	3
2	General Assessment: a) Psychological Assessment b) Nutritional Assessment	3
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 *[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) ***Fever:*** Definition, types of fever, aetiology, pathophysiology, physical examination, investigations and management	3
		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) ***Syncope:*** Definition, classification and its aetiology and its pathophysiology, clinical features as per the types, investigations, management	6
		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) ***Cough:*** Definition, mechanism of cough, impaired cough, aetiology, classification, assessment of chronic cough, differential diagnosis, approach: history, physical examination, investigations and management.	
		22) ***Haemoptysis:*** Definition, understanding anatomy & physiology of it, aetiopathogenesis, evaluation of haemoptysis: history, physical examination, diagnostic evaluation, and management.	
		23) ***Hypoxia and Cyanosis:*** a) ***Hypoxia:*** Definition, response to hypoxia, aetiology, pathophysiology, adaptation to hypoxia. b) ***Cyanosis:*** Definition, types, differential diagnosis with its aetiology, approach to cyanosis.	
		24) ***Oedema:*** Definition, aetiopathogenesis, differential diagnosis – Generalized and Localized oedema;	

Sr. No.	Topic	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) ***Nausea, Vomiting and Indigestion:*** Definition, mechanism, causes & differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.	
		28) ***Diarrhoea and Constipation:*** 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) ***Unintentional Weight Loss:*** 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) ***Jaundice:*** Definition, clinical evaluation, metabolism of bilirubin, aetiopathogenesis, classification and its causes, differential diagnosis, Approach: history taking, Clinical examination, diagnostic testing and management.	
		33) ***Abdominal Swelling & Ascites:*** 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.	4
		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, pathophysiological evaluation, Investigations	
7	Haematological alterations	38) ***Anaemia:*** Definition, applied anatomy & physiology of RBC, regulation of its production; classification, clinical presentation; Approach: History taking, clinical examination, investigations and diagnostic evaluation	4
		39) ***Leucocytosis & Leukopenia:*** Definition, Aetiology, differential diagnosis.	

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 delusions, perceptual disorders and hallucinations and relevant investigations	2
Total			**35**

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	
4	Cystic fibrosis, Huntington's disease & Marfan's syndrome	1
5	Poly cystic kidney disease	
6	Neoplasia	1
7	Rare diseases – basic concept	
8	Integrating concept of Genetics with Homoeopathy	1
Total		**5**

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	
5	HIV	1
6	Integrating concept of Immunity with Homoeopathy: Susceptibility	1
TOTAL		**5**

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	2
11	Influenza A H1N1 virus	
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	
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 e) Physical Examination General Principal f) Differential Diagnosis: The beginning of management plan	3
2	**General Assessment:** c) Psychiatric Assessment d) Nutritional Assessment	3
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	
	iii.) RR examination and its documentation and interpretation	1
	iv.) BP Recoding and its documentation and its interpretation	
	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	1
	ix.) Observation of Gait and its Assessment& documentation	
	x.) Observation of Decubitus and its assessment& documentation	
	xi.) Ear examination and its documentation and interpretation	3
	xii.) Nose examination and its documentation and interpretation	
	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	2
	xvi.) Mouth examination and its documentation and interpretation	
	xvii.) Lymph Nodes examination at different sites and documentation and interpretation	3
	xviii.) Nails examination and its documentation and interpretation	
	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]***	4
	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	
	c) Approach to Case presenting with Circulatory and / or Respiratory Symptoms	
	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 of Competency	Millers Level:	Content	SLO	Blooms Domain/ Guilbert's Level	Priority -	T-L Methods	Assessment		Integration
								Formative	Summative	
HomUG-PMI.1.1	K&S	K	Define pain and its types	1. Define pain and 2. Differentiate between acute and chronic pain	C1	MK	Lecture, Group discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.1.2		KH	Differentiate between types of pain	Differentiate between nociceptive, neuropathic, and inflammatory pain	C2	MK	Lecture, Group discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.1.3			Role of inflammation in pain	Describe how inflammation contributes to pain sensation and hypersensitivity	C2	MK	Lecture, Group discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.1.4		K	Define chest discomfort and its significance	1. define chest discomfort and 2. explain its importance in diagnosing	C1	MK	Lecture, Group discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology

				various conditions						
HomUG-PMI.1.5		KH	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 discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.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 discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.1.7		KH	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 discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology

HomUG-PMI.1.8		K	Define headache and its types	1. define headache and 2. differentiate between primary and secondary headaches	C1	MK	Lecture, Group discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.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 discussion	Quiz, Written test, MCQ	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.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 discussion	Quiz, Written test	SAQ, MCQ	Anatomy, Physiology
HomUG-PMI.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 discussion	Quiz, Written test	SAQ, MCQ	Anatomy, Physiology

HomUG-PMI.1.12	HO	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
HomUG-PMI.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
HomUG-PMI.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
HomUG-PMI.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
HomUG-PMI.1.16		KH	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 of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority -	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.2.1	K&S	K	Define fever and its significance	Define fever and explain its role in the body's immune response	C1	MK	Lecture, Group discussion	Quiz, Written test		Physiology, Pathology
HomUG-PMI.2.2		KH	Describe the types of fever and their characteristics	Describe different types of fever, such as intermittent and continuous	C2	MK	Lecture, Group discussion	Quiz, Written test		Physiology, Pathology
HomUG-PMI.2.3			Explain the causes of fever	Explain the causes of fever, including infection and inflammation	C2	MK	Lecture, Group discussion	Quiz, Written test		Microbiology, Immunology
HomUG-PMI.2.4		K	Define the different types of fever (e.g., intermittent, remittent, continuous, relapsing).	Explain the characteristics and patterns of different types of fever.	C1	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases

HomUG-PMI.2.5		KH	Describe the etiology of each type of fever.	Explain the underlying causes of intermittent, remittent, continuous, and relapsing fevers.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomUG-PMI.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 discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomUG-PMI.2.7		K	Define fever with rash.	Explain the clinical presentation of fever accompanied by a rash.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases, Dermatology
HomUG-PMI.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 discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases, Dermatology

HomUG-PMI.2.9		KH	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 discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases, Dermatology
HomUG-PMI.2.10		K	Define Fever of Unknown Origin (FUO).	Explain the criteria/definition of FUO.	C1	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomUG-PMI.2.11		KH	Discuss the etiology and pathophysiology of FUO.	Describe the possible causes and underlying mechanisms of FUO.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomUG-PMI.2.12			Identify the diagnostic approach to FUO.	Explain the stepwise approach to diagnosing and investigating FUO.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomUG-PMI.2.13			Discuss the differential diagnosis of FUO.	Explain how to differentiate between various causes of FUO.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases

HomUG-PMI.2.14			Describe the management strategies for FUO.	Explain the treatment options and approaches for patients with FUO.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory and Viva voce	Internal Medicine, Infectious Diseases
HomUG-PMI.2.15		K	Describe the fever totality.	Define how to erect a fever totality	C1	MK	Lecture, Small group discussion	Totorials, Asignments		Organon, Repertory
HomUG-PMI.2.16		KH	Discuss the characteristic indications of various indicated drugs	List the PQRS symptoms of a drug in Fever	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	Theory & Viva voce	Materia Medica

6.1.3. Neurological Symptoms-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority -	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.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 discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	MCQs	Anatomy, Physiology, Neurology
HomUG-PMI.3.2		KH	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 discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, MCQs	Anatomy, Physiology, Neurology
HomUG-PMI.3.3			Discuss the pathophysiological processes underlying various neurological conditions.	Explain how different diseases and disorders affect the nervous system to produce specific symptoms.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, MCQs	Physiology, Pathology

HomUG-PMI.3.4			Identify the role of neurotransmitters and receptors in neurological symptoms.	Explain how alterations in neurotransmission can lead to neurological symptoms.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, MCQs	Physiology, Pathology
HomUG-PMI.3.5	K&S	KH	Define the principles of management for neurological symptoms.	Explain the basic approaches to managing common neurological symptoms.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, MCQs	Physiology
HomUG-PMI.3.6		K	Describe the complete symptom	Define the symptom under LSMC	C1	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	LAQ, SAQ, Viva voce	Organon
HomUG-PMI.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 discussion	Assignments, Tutorials	SAQ, MCQs	Materia medica

HomUG-PMI.3.8		KH	Discuss the characteristic indications of various indicated drugs	List the PQRS symptoms of a drug in different Neurological symptoms	C1	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, Viva voce	Materia medica

6.1.4. Circulatory and Respiratory Dysfunctions

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority -	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.4.1	K&S	K	Define dyspnea.	Define dyspnea as the sensation of difficult or uncomfortable breathing, often described as shortness of breath.	C1	MK	Lecture, Small group discussion	Quizzes, Peer assessment	SAQ	Physiology
HomUG-PMI.4.2		KK	Describe the physiology of dyspnea.	Explain the physiological mechanisms that contribute to the sensation of dyspnea, including neural and mechanical factors.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, MCQs	Physiology

HomUG-PMI.4.3			Discuss the etiology of dyspnea.	Explain the various conditions and diseases that can cause dyspnea, such as respiratory disorders, cardiovascular diseases, or metabolic conditions.	C2	MK	Lecture, Small group discussion	Structured Oral Examination, Tutorials, Assignments, MCQs	SAQ, MCQs	Physiology, Pathology
HomUG-PMI.4.4			Identify the clinical evaluation and diagnostic approach for patients presenting with dyspnea.	Explain the steps involved in assessing and diagnosing patients with dyspnea, including history taking, physical examination, and diagnostic tests.	C2	MK	Lecture, Small group discussion	Observations, Simulations	OSCE, Bedside examination	Clinical Medicine
HomUG-PMI.4.5		K	Define cough.	Define cough as a protective reflex that helps clear the airways of mucus, irritants, or foreign particles.	C1	MK	Lecture, Small group discussion	Quizzes, Peer assessment	Written examination, Objective Structured Clinical Examination (OSCE)	Clinical Medicne
HomUG-PMI.4.6		KH	Describe the physiology of cough.	Explain the neural and mechanical processes involved in the	C2	MK	Lecture, Small group	Case studies, Role-playing	OSCE, Practical examination	Clinical Medicine

				generation of a cough reflex.			discussion			
HomUG-PMI.4.7			Discuss the different types of cough.	Explain the characteristics and classification of cough, such as acute, subacute, or chronic.	C2	MK	Lecture, Small group discussion	Problem-based learning	MCQs, Short-answer questions	Pathology
HomUG-PMI.4.8			Identify the common causes of cough.	Describe the etiology and pathophysiology of cough, including respiratory infections, asthma, and GERD.	C2	MK	Lecture, Small group discussion	Presentations, Group projects	Written examination, Case-based discussion	Physiology, Pathology
HomUG-PMI.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	Lecture, Small group discussion	Quizzes, Peer assessment	Written examination, OSCE	
HomUG-PMI.4.10		K	Define hemoptysis.	Define hemoptysis as the expectoration of blood that originates from the respiratory tract.	C2	MK	Lecture, Small group discussion	Quizzes, Peer assessment	Written examination, OSCE	Pathology

HomUG-PMI.4.11		KH	Describe the etiology of hemoptysis.	Explain the various causes of hemoptysis, including respiratory infections, pulmonary embolism, and lung cancer.	C2	MK	Lecture, Small group discussion	Case studies, Role-playing	OSCE, Practical examination	Pathology
HomUG-PMI.4.12			Discuss the clinical evaluation and diagnostic approach for patients presenting with hemoptysis.	Explain the steps involved in evaluating patients with hemoptysis, including history taking, physical examination, and diagnostic tests.	C2	MK	Lecture, Small group discussion	Observations, Simulations	OSCE, Practical examination	Pathology
HomUG-PMI.4.13	K&S		Discuss the complications associated with hemoptysis.	Explain the potential complications of hemoptysis, such as respiratory compromise or hemorrhagic shock, and their management.	C2	MK	Lecture, Small group discussion	Problem-based learning, Assignments	MCQs, Short-answer questions	Pathology

HomUG-PMI.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	Lecture, Small group discussion	Quizzes	Written examination, Objective Structured Clinical Examination (OSCE)	Pulmonology, Cardiology, Critical Care Medicine
HomUG-PMI.4.15		KH	Describe the pathophysiology of hypoxia and cyanosis.	Explain the mechanisms that lead to hypoxia and cyanosis, including impaired oxygen delivery or utilization.	C2	MK	Lecture, Small group discussion	Case studies	OSCE, Practical examination	Pulmonology, Cardiology, Critical Care Medicine
HomUG-PMI.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	Lecture, Small group discussion	Case studies	MCQs, Short-answer questions	Pulmonology, Cardiology, Critical Care Medicine

HomUG-PMI.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	Lecture, Small group discussion	Tutorials, Group projects	OSCE, Practical examination	Pulmonology, Cardiology, Critical Care Medicine
HomUG-PMI.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	Lecture, Small group discussion	Quizzes, Peer assessment	SAQ	Cardiology, Nephrology, Internal Medicine
HomUG-PMI.4.19		KH	Describe the pathophysiology of edema.	Explain the mechanisms involved in the development of edema, including changes in hydrostatic pressure, oncotic pressure, and capillary permeability.	C2	MK	Lecture, Small group discussion	Case studies, MCQs	LAQ, SAQ	Cardiology, Nephrology, Internal Medicine

HomUG-PMI.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	Lecture, Small group discussion	Problem-based learning	MCQs, SAQ, LAQ	Cardiology, Nephrology, Internal Medicine
HomUG-PMI.4.21			Describe the pathophysiology of edema.	Explain the mechanisms that lead to the accumulation of fluid in tissues, including increased capillary permeability and impaired lymphatic drainage.	C2	MK	Lecture, Small group discussion	Tutorials, Assignments	SAQ, LAQ	Cardiology, Nephrology, Internal Medicine
HomUG-PMI.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	Lecture, Small group discussion	Presentations, Group projects, Assignments	SAQ, LAQ	Cardiology, Nephrology, Internal Medicine

HomUG-PMI.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	Lecture, Small group discussion	Quizzes	SAQ	Cardiology, Internal Medicine
HomUG-PMI.4.24		KH	Describe the pathophysiology of palpitations.	Explain the mechanisms that can lead to palpitations, including cardiac arrhythmias, structural heart disease, and stimulant use.	C2	MK	Lecture, Small group discussion	Assignments	SAQ, MCQs	Cardiology, Internal Medicine
HomUG-PMI.4.25			Discuss the common causes of palpitations.	Explain the various conditions and factors that can cause palpitations, such as atrial fibrillation, ventricular tachycardia, anxiety, and caffeine intake.	C2	MK	Lecture, Small group discussion	Tutorials, Assignments, MCQs	MCQs, Short-answer questions	Cardiology, Internal Medicine

HomUG-PMI.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	Lecture, Small group discussion	Tutorials, Assignments, MCQs	MCQs, Short-answer questions	Cardiology, Internal Medicine
HomUG-PMI.4.27		K	Define the principles of homoeopathic management	Students should be able to define the basic principles of homoeopathic treatment	C1	MK	Lecture, Group discussion	Quiz, Assignments	SAQ	Homoeopathic Materia Medica
HomUG-PMI.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	Lecture, Group discussion	Quiz, Assignments	SAQ	Homoeopathic Materia Medica
HomUG-PMI.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 studies	Quiz, Assignments	SAQ	Homoeopathic Materia Medica, Repertory

			on totality of symptoms	the totality of symptoms						
HomUG-PMI.4.30		KH	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	Lecture, Group discussion	Quiz, Assignments	LAQ	Homoeopathic Materia Medica

6.1.5. Abdominal/GIT Dysfunctions

Sl.No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority -	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.5.1	K&S	KH	Describe the common causes of GIT dysfunctions.	Explain how factors such as diet, lifestyle, stress, and genetics can contribute to the development of GIT dysfunctions.	C2	MK	Lecture, Small group discussion	Quizzes, Peer assessment	SAQ	Pathology, Microbiology, PSM
HomUG-PMI.5.2			Discuss the pathophysiological mechanisms underlying GIT dysfunctions.	Explain how disturbances in gastrointestinal motility, secretion, and	C2	MK	Lecture, Small group discussion	Case studies, MCQ	LAQ, SAQ	Physiology, Pathology

				absorption can lead to symptoms of GIT dysfunctions.						
HomUG-PMI.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 discussion	Problem-based learning	MCQs, Short-answer questions	Physiology, Pathology
HomUG-PMI.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 discussion	MCQ, Assignments	SAQ	Pathology, Microbiology
HomUG-PMI.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 discussion	Tutorials, Group projects	LAQ, SAQ	Physiology, Pathology

HomUG-PMI.5.6			Describe the pathophysiology of dysphagia.	Explain how dysphagia can result from structural abnormalities, neurological disorders, or muscular dysfunction.	C2	MK	Lecture, Small group discussion	Quizzes, Peer assessment	LAQ, SAQ	Physiology, Pathology
HomUG-PMI.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 discussion	Case studies	SSQ	Pathology
HomUG-PMI.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 discussion	Problem-based learning	MCQs, Short-answer questions	Clinical medicine

HomUG-PMI.5.9	HO		Discuss the role of homoeopathic remedies in the management of dysphagia.	Explain how remedies such as Lachesis, Phosphorus, and Belladonna can be used to treat symptoms of dysphagia.	C2	MK	Lecture, Small group discussion	Assignments	MCQs, Short-answer questions	Homoeopathic Materia Medica
HomUG-PMI.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 discussion	Quizzes, Peer assessment	MCQs, Short-answer questions	Physiology, Pathology
HomUG-PMI.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 discussion	Case studies	MCQs, Short-answer questions	Physiology, Pathology

HomUG-PMI.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 discussion	Case studies	MCQs, Short-answer questions	Clinical medicine
HomUG-PMI.5.14	HO		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 discussion	Observations, Assignments	MCQs, Short-answer questions	Homoeopathic Materia Medica
HomUG-PMI.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 discussion	Tutorials, Group projects	MCQs, Short-answer questions	Physiology

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

				dehydration can help diagnose diarrhea.			discussion			
HomUG-PMI.5.20	HO		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	Lecture, Small group discussion	Assignments, MCQ	MCQs, Short-answer questions	Homoeopathic Materia Medica
HomUG-PMI.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	Lecture, Small group discussion	Tutorials, Goup projects	LAQ, SAQ	Physiology
HomUG-PMI.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 discussion	Quizzes, Peer assessment	SAQ	Physiology

HomUG-PMI.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 discussion	Tutorials, Group projects	LAQ, SAQ	Physiology
HomUG-PMI.5.24			Discuss the common causes of constipation.	Explain how factors such as inadequate dietary fiber, dehydration, sedentary lifestyle, and certain medications can cause constipation.	C2	MK	Lecture, Small group discussion	Tutorials, Assignments	MCQs, Short-answer questions	Physiology
HomUG-PMI.5.25			Identify the key symptoms and clinical features of constipation.	Describe how symptoms such as straining, lumpy or hard stools, and a feeling of incomplete evacuation can help diagnose constipation.	C2	MK	Lecture, Small group discussion	MCQ, Assignments	MCQs, Short-answer questions	Clinical medicine

HomUG-PMI.5.26	HO		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 discussion	Observations	MCQs, Short-answer questions	Homoeopathic Materia Medica
HomUG-PMI.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 discussion	Tutorials, Assignments	LAQ, SAQ	Physiology
HomUG-PMI.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 discussion	Quizzes, Peer assessment	SAQ	Physiology
HomUG-PMI.5.29			Describe the pathophysiology of dysentery.	Explain how infections, particularly bacterial and parasitic, can lead to	C2	MK	Lecture, Small group discussion	Tutorials, Assignments	LAQ, SAQ	Pathology

				inflammation of the intestines and the characteristic symptoms of dysentery.						
HomUG-PMI.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 discussion	Case studies	SAQ	Pathology
HomUG-PMI.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 discussion	Problem-based learning	MCQs, Short-answer questions	Clinical medicine
HomUG-PMI.5.32	HO		Discuss the role of homoeopathic remedies in the management of dysentery.	Explain how remedies such as Merc sol, Aloe socotrina, and Podophyllum can be used to treat symptoms of dysentery.	C2	MK	Lecture, Small group discussion	Observations	MCQs, Short-answer questions	Homoeopathic Materia Medica

HomUG-PMI.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 discussion	Tutorials, Assignments	LAQ, SAQ	Physiology
HomUG-PMI.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 discussion	Quizzes, Peer assessment	SAQ	Physiology
HomUG-PMI.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 discussion	Tutorials, Assignments	LAQ, SAQ, MCQ	Physiology

HomUG-PMI.5.36			Discuss the common causes of unintentional weight loss.	Explain how conditions such as cancer, gastrointestinal disorders, hyperthyroidism, and depression can cause unintentional weight loss.	C2	MK	Lecture, Small group discussion	Case studies	SAQ	Physiology, Pathology
HomUG-PMI.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 discussion	Problem-based learning	MCQs, Short-answer questions	Clinical medicine
HomUG-PMI.5.38	HO		Discuss the role of homoeopathic remedies in the management of unintentional weight loss.	Explain how remedies such as Calcareacarbonica, Natrum muriaticum, and Phosphorus can be used to address underlying causes of unintentional weight loss.	C2	MK	Lecture, Small group discussion	Assignments	MCQs, Short-answer questions	Homoeopathic Materia Medica

HomUG-PMI.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 discussion	Tutorials, Assignments	LAQ, SAQ	Clinical medicine
HomUG-PMI.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 discussion	Tutorials, Assignments	LAQ, SAQ	Pathology
HomUG-PMI.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 discussion	Case studies	MCQs, Short-answer questions	Physiology, Pathology

				that can predispose individuals to GI bleeding.						
HomUG-PMI.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 discussion	Problem-based learning	MCQs, Short-answer questions	Clinical medicine
HomUG-PMI.5.43	HO		Describe the common homoeopathic remedies used in the management of GI bleeding	Explain the indications for remedies such as Phosphorus, Hamamelis, and Ferrummetallicum in treating various causes of GI bleeding.	C2	MK	Lecture, Small group discussion	Case studies	MCQs, Short-answer questions	Homoeopathic Tteria Medica
HomUG-PMI.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 discussion	Observations, Simulations	SAQ	Organon

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

HomUG-PMI.5.48			Explain the clinical features of jaundice	Describe the signs and symptoms of jaundice, such as yellowing of the skin, dark urine, and pale stools, and their significance in diagnosis.	C2	MK	Lecture, Small group discussion	Observations, Simulations	MCQs, Short-answer questions	Clinical medicine
HomUG-PMI.5.49	HO		Describe the common homoeopathic remedies used in the management of jaundice	Explain the indications for remedies such as Chelidonium, Lycopodium, and Natrum sulphuricum in treating jaundice.	C2	MK	Lecture, Small group discussion	Case studies, Role-playing	MCQs, Short-answer questions	Homoeopathic Tteria Medica
HomUG-PMI.5.50	K&S		Define ascites and its clinical significance	Define ascites as the abnormal accumulation of fluid in the peritoneal cavity and its importance in clinical diagnosis.	C1	MK	Lecture, Small group discussion	Quizzes, Peer assessment	SAQ	Anatomy, Physiology

HomUG-PMI.5.51			Describe the pathophysiology of ascites	Explain the mechanisms of fluid accumulation in ascites, including portal hypertension, hypoalbuminemia, and lymphatic obstruction.	C2	MK	Lecture, Small group discussion	Case studies, Role-playing	LAQ, SAQ	Physiology, Pathology
HomUG-PMI.5.52			Discuss the causes of ascites	Identify the various etiologies of ascites, including liver cirrhosis, heart failure, and malignancy.	C2	MK	Lecture, Small group discussion	Problem-based learning	MCQs, Short-answer questions	Pathology
HomUG-PMI.5.53			Explain the clinical features of ascites	Describe the signs and symptoms of ascites, such as abdominal distension and shifting dullness, and their significance in diagnosis.	C2	MK	Lecture, Small group discussion	Observations, Simulations	LAQ, SAQ	Surgery, Clinical Medicne

HomUG-PMI.5.54			Differentiate between transudative and exudative ascites	Define transudative and exudative ascites and the pathophysiological differences between them.	C1	MK	Lecture, Small group discussion	Quizzes, Peer assessment	SAQ	Pathology
HomUG-PMI.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 discussion	#NAME?	MCQs, Short-answer questions	Pathology
HomUG-PMI.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 discussion	Problem-based learning	MCQs, Short-answer questions	Pathology, Surgery
HomUG-PMI.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 discussion	Presentations, Group projects	SAQ	Physiology, Laboratory Medicine

				culture, in diagnosing the cause of ascites.						
HomUG-PMI.5.58	HO		Describe the common homoeopathic remedies used in the management of ascites	Explain the indications for remedies such as Apis mellifica, Lycopodium, and Carduus marianus in treating ascites.	C2	MK	Lecture, Small group discussion	Case studies,	MCQs, Short-answer questions	Homoeopathic Materia Medica

6.1.6. Renal and Urinary Tract Dysfunctions

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.6.1	K&S	K	Define the terms "renal dysfunction" and "urinary tract dysfunction"	Students should be able to define these terms and differentiate between dysfunction of the kidneys and the urinary tract	C1	MK	Lecture, Group discussion	MCQ, Written test	SAQ	Anatomy, Pathology

HomUG-PMI.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 discussion	MCQ, Written test	SAQ	Medicine, Pathology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ	Medicine, Pathology
HomUG-PMI.6.4		KH	Describe the underlying pathophysiology of renal dysfunction	Students should be able to describe the pathophysiological processes involved in renal dysfunction	C2	NK	Lecture, Group discussion	MCQ, Written test	SAQ	Physiology, Pathology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Pathology, Surgery
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Surgery, Urology

HomUG-PMI.6.7		KH	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 discussion	MCQ, Written test	SAQ, MCQ	Pathology, Urology
HomUG-PMI.6.8	HO		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 discussion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomUG-PMI.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, Simulation	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica

HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Physiology, Urology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Pathology, Urology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Surgery, Pathology
HomUG-PMI.6.14	HO		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 discussion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica

HomUG-PMI.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, Simulation	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology, Nephrology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Pathology, Nephrology
HomUG-PMI.6.18		KH	Explain the underlying pathophysiological 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 discussion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology, Nephrology

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

HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Medicine, Physiology
HomUG-PMI.6.25		KH	Explain the underlying pathophysiological 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 discussion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Physiology
HomUG-PMI.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 discussion	MCQ, Written test	SAQ, MCQ	Physiology, Pathology

			fluid and electrolyte imbalances	electrolyte imbalances						
HomUG-PMI.6.28	HO		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 discussion	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomUG-PMI.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 fluid and electrolyte imbalance	P2	MK	Role-playing, Simulation	MCQ, Written test	SAQ, MCQ	Homoeopathic Materia Medica
HomUG-PMI.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 changes can help manage fluid and electrolyte imbalances	C2	NK	Lecture, Group discussion	MCQ, Written test	LAQ, SAQ, MCQ	Nutrition, Lifestyle Medicine

6.1.7. Hematological alterations-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.7.1	K&S	K	Define the terminologies used.	Students should be able to define following hematological alterations with their characterestics	C1	MK	Lecture, Group discussion	Quiz, Written test	MCQ, SAQ	Physiology, Pathology
7.1a				1. Anemia,						
7.1a				2. Leukocytosis,						
7.1a				3. Leucopenia,						
7.1a				4. Bleeding diatheses						
HomUG-PMI.7.2		KH	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	Lecture, Group discussion	Quiz, Written test	MCQ, SAQ	Physiology, Pathology

HomUG-PMI.7.3			Explain the underlying pathophysiological processes involved in the development of hematological alterations	Students should be able to explain the pathological mechanisms that lead to the following hematological disorders	C2	MK	Lecture, Group discussion	Quiz, Assignments, Written test	MCQ, SAQ	Physiology, Pathology
7.3a				1. Anemia,						
7.3a				2. Leukocytosis,						
7.3a				3. Leucopenia,						
7.3a				4. Bleeding diatheses						
HomUG-PMI.7.4			Discuss the common signs and symptoms associated with hematological alterations	Students should be able to describe the typical clinical manifestations observed in patients with following hematological disorders	C2	MK	Lecture, Group discussion	Quiz, Assignments, Written test	MCQ, LAQ, SAQ	Pathology, Hematology
7.4a				1. Anemia,						
7.4a				2. Leukocytosis,						
7.4a				3. Leucopenia,						
7.4a				4. Bleeding diatheses						

HomUG-PMI.7.5			Discuss the diagnostic tests and procedures used to evaluate and diagnose hematological alterations	Students should be able to discuss the various tests and procedures used to evaluate hematological disorders	C2	MK	Lecture, Group discussion	Quiz, Assignments, Written test	MCQ, SAQ	Pathology, Laboratory Medicine, Hematology
HomUG-PMI.7.6			Explain the principles of homoeopathic management for hematological alterations	Students should be able to describe the basic principles of homoeopathic treatment for hematological disorders	C2	MK	Lecture, Group discussion	Quiz, Assignments, Written test	SAQ	Organon of Medicine
HomUG-PMI.7.7			Explain how homoeopathic remedies are selected for hematological alterations	Students should be able to explain the process of selection homoeopathic remedies for hematological alterations	C2	MK	Lecture, Group discussion	Quiz, Assignments, Written test	SAQ	Organon, Materia medica
HomUG-PMI.7.8		SH	Demonstrate the process of selecting a homoeopathic remedy for hematologicalalterations based on symptoms	Students should be able to demonstrate how to select a homoeopathic remedy for a case of hematological dysfunction	P2	MK	Group Discussion, Case study	Assignments	SAQ	Organon, Materia medica

6.1.8. Psychological symptoms-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain / Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.8.1	K&S	K	Define the terms "psychological symptoms" and explain their relevance	1. Psychological disorders are patterns of behavioral or psychological 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	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.8.2			Define the term "fatigue" and explain its relevance	Define fatigue and its significance	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Physiology, Medicine
HomUG-PMI.8.3			Describe the various factors and conditions that can lead to fatigue	List the factors that can contribute to the onset of fatigue	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Physiology, Medicine

HomUG-PMI.8.4		KH	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 discussion	Quiz, Written test	SAQ	Physiology, Medicine
HomUG-PMI.8.5		K	Define the term "asthenia"	Define asthenia and its significance	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Physiology, Medicine
HomUG-PMI.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 discussion	Quiz, Written test	SAQ	Physiology, Medicine
HomUG-PMI.8.7		KH	Explain the underlying physiological processes involved in the development of asthenia	Explain the physiological mechanisms that underlie the manifestation of asthenia	C2	NK	Lecture, Group discussion	Quiz, Written test	SAQ	Physiology, Medicine
HomUG-PMI.8.8		K	Define the term "anxiety"	Define anxiety and its significance	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.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 discussion	Quiz, Written test	SAQ	Psychiatry, Psychology

HomUG-PMI.8.10		KH	Explain the underlying physiological processes involved in the development of anxiety	Explain the physiological mechanisms that underlie the manifestation of anxiety	C2	NK	Lecture, Group discussion	Quiz, Written test	SAQ	Physiology, Psyc
HomUG-PMI.8.11		K	Define the term "sadness"	Define sadness and its significance	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.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 discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.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 discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.8.14		KH	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 discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.8.15		K	Define the term "disorders of perception" and explain its relevance	Define disorders of perception and their significance	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Psychiatry, Psychology

HomUG-PMI.8.16		KH	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 discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.8.17		K	Define the term "sleep disorders" and explain its relevance	Define sleep disorders.	C1	MK	Lecture, Group discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.8.18		KH	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 discussion	Quiz, Written test	SAQ	Psychiatry, Psychology
HomUG-PMI.8.19			Explain the underlying physiological processes involved in the development of sleep disorders	Explain the physiological mechanisms that underlie the manifestation of sleep disorders	C2	NK	Lecture, Group discussion	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 of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.9.1	K&S	K	Explanation of primary and secondary immunodeficiency states	Understanding the difference between primary and secondary immunodeficiency	C1	MK	Lecture, Discussion	Quizzes, Written test	SAQ	Physiology, Pathology, Microbiology
HomUG-PMI.9.2			Overview of common genetic and acquired causes	Recognition of common primary immunodeficiency disorders	C2	MK	Case studies, Group work	Quizzes, Written test	MCQ, SAQ	Pathology, Microbiology
HomUG-PMI.9.3		KH	Description of clinical signs and symptoms	Identification of clinical features suggestive of immunodeficiency	C2	MK	Group Discussiion, Assignments	Quizzes, Written test, Tutorials	MCQ, SAQ	Pathology, Microbiology
HomUG-PMI.9.4			Description of therapeutic interventions and preventive measures	Demonstration of appropriate management plans for immunodeficiency disorders	C3	DK	Debates	Tutorials	SAQ	Pathology, Microbiology

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

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.10.1	K&S	K	Explanation of hypersensitivity reaction types	Understanding the classification and mechanisms of hypersensitivity reactions	C1	MK	Lecture, Discussion	MCQ	SAQ	Pathology, Microbiology
01a				Type I hypersensitivity reactions						
01b				Type II hypersensitivity reactions						
01c				Type III hypersensitivity reactions						
01d				Type IV hypersensitivity reactions						
HomUG-PMI.10.2			Overview of common allergens and mediators such as IgE, histamine, and cytokines	Recognition of allergens and mediators associated with type I hypersensitivity	C2	MK	Group discussion	Assignments, MCQ	SAQ	Pathology, Microbiology

HomUG-PMI.10.3		KH	Explanation of IgE-mediated mast cell degranulation	Understanding the sequence of events leading to type I hypersensitivity reactions	C2	NK	Lecture, Group Discussion	Assignments, MCQ	SAQ	Physiology, Pathology
HomUG-PMI.10.4			Description of allergic rhinitis, asthma, anaphylaxis, and atopic dermatitis	Identification of clinical features suggestive of type I hypersensitivity	C2	MK	Lectures, Group discussion	MCQ	SAQ, Bedside examination	Physiology, Pathology, Clinical medicine
HomUG-PMI.10.5			Explanation of skin prick tests and serum IgE assays	Application of diagnostic strategies for type I hypersensitivity assessment	C2	DK	Debates	Tutorials	SAQ	Physiology, Pathology, Clinical medicine
HomUG-PMI.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 hypersensitivity reactions	C1	MK	Lecture	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomUG-PMI.10.7		KH	Explanation of antibody-mediated cell destruction and complement activation	Understanding the sequence of events leading to type II hypersensitivity reactions	C2	MK	Lecture	Assignments, MCQ	SAQ	Physiology, Pathology

HomUG-PMI.10.8			Description of autoimmune hemolytic anemia, Goodpasture syndrome, and hemolytic disease of the newborn	Identification of clinical features suggestive of type II hypersensitivity	C2	MK	Lecture, case based learning	Assignments, MCQ	SAQ, Viva voce	Pathology, clinical medicine
HomUG-PMI.10.9			Explanation of direct and indirect Coombs tests	Application of diagnostic strategies for type II hypersensitivity assessment	C2	DK	Debates	Tutorials	SAQ, Viva voce	Physiology, pathology
HomUG-PMI.10.10		K	Overview of common antigens and antibodies such as immune complexes and autoantibodies	Identify common antigens and antibodies involved in type III hypersensitivity reactions	C1	MK	Lecture	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomUG-PMI.10.11		KH	Explanation of immune complex deposition and complement activation	Understanding the sequence of events leading to type III hypersensitivity reactions	C2	MK	Lecture	Assignments, MCQ	SAQ	Physiology, Pathology

HomUG-PMI.10.12			Description of serum sickness, Arthus reaction, and systemic lupus erythematosus	Identification of clinical features suggestive of type III hypersensitivity	C2	MK	Lecture, case based learning	Assignments, MCQ	SAQ, Viva voce	Pathology, clinical medicine
HomUG-PMI.10.13			Explanation of laboratory tests such as complement levels and immunofluorescence	Application of diagnostic strategies for type III hypersensitivity assessment	C2	DK	Debates	Tutorials	SAQ, Viva voce	Physiology, pathology
HomUG-PMI.10.14		K	Overview of common antigens and cells such as haptens and T cells	Identify common antigens and cells involved in type IV hypersensitivity reactions	C1	MK	Lecture	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomUG-PMI.10.15		KH	Explanation of T cell-mediated inflammation and cytokine release	Understanding the sequence of events leading to type IV hypersensitivity reactions	C2	MK	Lecture	Assignments, MCQ	SAQ	Physiology, Pathology
HomUG-PMI.10.16			Description of contact dermatitis, tuberculin reaction, and	Identification of clinical features suggestive of type IV	C2	MK	Lecture, case based	Assignments, MCQ	SAQ, Viva voce	Pathology, clinical medicine

			autoimmune diseases	hypersensitivity			learning			
HomUG-PMI.10.17			Explanation of patch testing and lymphocyte proliferation assays	Application of diagnostic strategies for type IV hypersensitivity assessment	C2	DK	Debates	Tutorials	SAQ, Viva voce	Physiology, pathology

6.2.3. Autoimmune Diseases-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.11.1	K&S	K	Explanation of autoimmune disease etiology and pathogenesis	Understanding the basics of autoimmune diseases and their mechanisms	C1	MK	Lecture, Discussion	MCQ	SAQ	Pathology, Microbiology
HomUG-PMI.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, Discussion	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology, Clinical medicine

HomUG-PMI.11.3		KH	Explanation of immune dysregulation in autoimmune disorders	Understanding the involvement of autoantibodies and T cells in autoimmune pathophysiology	C2	MK	Problem-based learning	Tutorials, MCQ	SAQ, Viva voce	Physiology, pathology
HomUG-PMI.11.4			Description of systemic symptoms and organ involvement in autoimmune disorders	Identification of systemic and organ-specific manifestations of autoimmune diseases	C2	MK	Lecture, Discussion	Tutorials, MCQ	SAQ, Viva voce	Pathology, Clinical medicine

6.2.4. HIV Disease-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.12.1	K&S	K	Explanation of HIV virus and its transmission	Understanding the basics of HIV/AIDS and its causative agent	C1	MK	Lecture, Group Discussion	MCQ	SAQ	Pathology, Microbiology

HomUG-PMI.12.2			Overview of HIV transmission routes such as sexual contact, blood exposure, and vertical transmission	Identify common risk factors and modes of transmission for HIV infection	C1	MK	Lecture, Group Discussion	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology, PSM
HomUG-PMI.12.3		KH	Explanation of HIV progression from acute infection to AIDS	Understanding the stages and clinical course of HIV disease	C2	MK	Lectures, case based learning	Tutorials, Assignments, MCQ	SAQ, Viva voce	Clinical medicine
HomUG-PMI.12.4			Description of HIV-related symptoms and AIDS-defining illnesses	Identification of clinical features suggestive of HIV infection and AIDS	C2	MK	Workshops, Case-based learning	Assignments, MCQ	SAQ, Viva voce	Clinical medicine
HomUG-PMI.12.5			Explanation of HIV replication and immune depletion	Understand the pathophysiology of HIV infection and its effects on the immune system	C2	DK	Lectures, Group Discussion	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomUG-PMI.12.6		SH	Description of HIV prevention methods and harm reduction approaches	Demonstration of appropriate prevention strategies for HIV infection	P2	DK	Seminars	Tutorials, Assignments, MCQ	SAQ, Viva voce	Community outreach programs on HIV prevention

6.2.5. Transplants and graft rejection-

Sl. No	Domain of Competency	Millers Level	Content	SLO	Blooms Domain / Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.13.1	K&S	K	Explanation of transplantation and immune response against grafts	Understanding the basics of transplantation and graft rejection	C1	MK	Lecture, Group Discussion	MCQ	SAQ	Pathology, Microbiology
HomUG-PMI.13.2			Overview of different types of transplants and their sources	Recognition of various transplantation methods and their differences	C1	MK	Lecture, Group Discussion	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomUG-PMI.13.3		KH	Explanation of the alloimmune response and mechanisms of graft rejection	Understanding the immune-mediated rejection process	C2	MK	Lectures, case based learning	Tutorials, Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology
HomUG-PMI.13.4			Description of acute and chronic rejection symptoms	Identification of clinical features suggestive of graft rejection	C2	MK	Workshops, Case-based learning	Assignments, MCQ	SAQ, Viva voce	Pathology, Microbiology

6.2.6. Homoeopathic relation of immunity and susceptibility-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.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	Lecture, Group Discussion	Case presentations, MCQ	SAQ, Viva voce	Organon and Hom. Philosophy
HomUG-PMI.14.3		KH	Description of the individualized approach in homeopathy	Identification of the importance of individualization in homeopathic treatment based on susceptibility	C2	MK	Lectures, Case-based learning	Quiz competitions, Tutorials	SAQ, Bedside examination	Organon and Hom. Philosophy
HomUG-PMI.14.4			Explanation of homeopathic remedies and constitutional treatment for improving vitality	Explain the role of homeopathic treatment strategies in enhancing immunity	C2	DK	Problem-solving scenarios, Group discussions	Case presentation, Guided discussions	Viva voce	Organon and Hom. Philosophy

HomUG-PMI.14.5			Description of the principle of similars and its role in strengthening immunity	Discuss the concept of the similimum in homeopathy and its relation to immunity and susceptibility	C2	DK	Group Discussions	Tutorials, Assignments		Organon and Hom. Philosophy
HomUG-PMI.14.6		SH	Analysis of patient outcomes and changes in susceptibility following homeopathic treatment	Evaluation of the effectiveness of homeopathic interventions on immunity	P1	DK	Patient encounters - OPD		Objective Structured Clinical Examination (OSCE)	Organon and Hom. Philosophy

6.3. Competency tables for medical genetics – an introduction

6.3.1. Introduction-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PM I.15.1	K&S	K	Explanation of medical genetics and its scope	Understanding the definition and scope of medical genetics	C1	MK	Lecture, Discussion	MCQ	SAQ	Physiology, Biochemistry,
HomUG-PM I.15.2			Overview of Mendelian principles, non-Mendelian inheritance, and genetic variation	Identify the basic principles of inheritance	C2	MK	Lecture, Discussion	MCQ, Assignemnts	Viva voce	Physiology, Pathology
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-PM I.15.4			Description of inheritance patterns (autosomal dominant, autosomal recessive, X-linked, etc.) and common genetic disorders	Describe the patterns of inheritance and genetic disorders	C2	MK	Interactive workshops, Case-based learning	MCQ, Assignments	SAQ	Pathology, Clinical medicine
HomUG-PM I.15.5			Explanation of genetic testing methods, indications, and implications	Application of genetic counseling principles	C3	DK	Problem-solving scenarios, Group Discussion	Tutorials, MCQ	SAQ, Viva voce	Biochemistry, Clinical Medicine
HomUG-PM I.15.6		Shows how	Description of ELSI (ethical, legal, and social implications) issues in clinical practice	Demonstration of understanding ELSI principles	P1	DK	Seminars	Tutorials, Assignments		Clinical Medicine, PSM

6.3.2. Cytogenetics-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.16.1	K&S	K	Explanation of cytogenetics and its role in studying chromosomes and their abnormalities	Understanding the definition and scope of cytogenetics	C1	MK	Lecture, Discussion	MCQ	SAQ	Pathology
HomUG-PMI.16.2			Overview of chromosome structure, function, and organization	Identify the basic structure and function of chromosomes	C1	MK	Lecture, Discussion	MCQ, Assignemnts	Viva voce	Biochemistry, pathology
HomUG-PMI.16.3		KH	Explanation of cytogenetic techniques such as karyotyping, FISH, and chromosomal microarray	Understanding the principles and applications of cytogenetic methods	C2	MK	Lecture, Assgnments	Assignments, MCQ	SAQ,	Pathology

HomUG-PMI.16.4			Description of different types of chromosomal abnormalities (numerical and structural) and their subtypes (e.g., trisomy, translocation, deletion)	Identification and categorization of chromosomal abnormalities	C2	MK	Workshops, Case-based learning	MCQ, Assignments	SAQ	Pathology
HomUG-PMI.16.5			Explanation of inheritance patterns for chromosomal abnormalities (e.g., autosomal dominant, autosomal recessive, X-linked)	Recognize patterns of inheritance for chromosomal abnormalities	C2	MK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	Physiology, Biochemistry, pathology

6.3.3. Down's Syndrome-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.17.1	K&S	K	Explanation of Down's Syndrome, its causes, and characteristics	Understanding the definition and basic features of Down's Syndrome	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology
HomUG-PMI.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, Assignemnts	SAQ, Viva voce	Pathology
HomUG-PMI.17.3		Knows how	Description of physical characteristics, developmental delays, and medical issues associated with Down's Syndrome	Identification of clinical features suggestive of Down's Syndrome	C3	MK	Lecture, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics

HomUG-PMI.17.4		Knows how	Explanation of prevalence, risk factors, and screening methods for Down's Syndrome	Application of knowledge regarding Down's Syndrome epidemiology and risk assessment	C4	DK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics
HomUG-PMI.17.5		Shows how	Description of medical interventions, therapies, and support services for individuals with Down's Syndrome	Discuss the medical and developmental management of individuals with Down's Syndrome	C5	DK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	Paediatrics

6.3.4. Turner's Syndrome-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.18.1	K&S	K	Explanation of Turner's Syndrome, its causes, and characteristics	Understanding the definition and basic features of Turner's Syndrome	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology

HomUG-PMI.18.2		KH	Overview of monosomy X and the genetic mechanisms leading to Turner's Syndrome	Describe the genetic basis of Turner's Syndrome	C2	MK	Lecture, Discussion	MCQ, Assignemnts	SAQ, Viva voce	Pathology
HomUG-PMI.18.3			Description of physical characteristics, developmental issues, and medical conditions associated with Turner's Syndrome	Identification of clinical features suggestive of Turner's Syndrome	C3	MK	Lecture, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomUG-PMI.18.4			Explanation of prevalence, risk factors, and screening methods for Turner's Syndrome	Understand the epidemiology and risk factors for Turner's Syndrome	C4	DK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics
HomUG-PMI.18.5			Description of medical interventions, hormone therapy, and support	Discuss the medical and developmental management of	C5	DK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	Paediatrics

			services for individuals with Turner's Syndrome	individuals with Turner's Syndrome						

6.3.5. Klinefelter's Syndrome-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.19.1	K&S	K	Explanation of Klinefelter's Syndrome, its causes, and characteristics	Understanding the definition and basic features of Klinefelter's Syndrome	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology
HomUG-PMI.19.2		KH	Overview of aneuploidy (47, XXY) and the genetic mechanisms leading to Klinefelter's Syndrome	Describe the genetic basis of Klinefelter's Syndrome	C2	MK	Lecture, Discussion	MCQ, Assignemnts	SAQ, Viva voce	Pathology

HomUG-PMI.19.3			Description of physical characteristics, developmental issues, and medical conditions associated with Klinefelter's Syndrome	Identification of clinical features suggestive of Klinefelter's Syndrome	C3	MK	Lecture, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomUG-PMI.19.4			Explanation of prevalence, risk factors, and screening methods for Klinefelter's Syndrome	Understand the epidemiology and risk factors for Klinefelter's Syndrome	C4	DK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics
HomUG-PMI.19.5			Description of medical interventions, hormone therapy, and support services for individuals with Klinefelter's Syndrome	Discuss the medical and developmental management of individuals with Klinefelter's Syndrome	C5	DK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	Paediatrics

6.3.6. Cystic Fibrosis-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.20.1	K&S	K	Explanation of CF, its causes, and characteristics	Understanding the definition and basic features of CF	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology
HomUG-PMI.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, Assignemnts	SAQ, Viva voce	Pathology
HomUG-PMI.20.3		KH	Description of respiratory, digestive, and other symptoms associated with CF	Identification of clinical features suggestive of CF	C2	MK	Lecture, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomUG-PMI.20.4			Explanation of the mechanisms leading to mucus buildup and organ damage in CF	Understanding the pathophysiological processes underlying CF	C2	MK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics

HomUG-PMI.20.5			Description of treatment modalities including airway clearance techniques, medications, and nutritional support	Discuss the medical management of CF	C2	DK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	Paediatrics

6.3.7. Huntington's disease-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.21.1	K&S	K	Explanation of HD, its causes, and characteristics	Understanding the definition and basic features of HD	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology
HomUG-PMI.21.2			Overview of the mutation in the HTT gene and its inheritance pattern	Describe the genetic basis of HD	C1	MK	Lecture, Discussion	MCQ, Assignemnts	SAQ, Viva voce	Pathology

HomUG-PMI.21.3		KH	Description of motor, cognitive, and psychiatric symptoms associated with HD	Identification of clinical features suggestive of HD	C2	MK	Lecture, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomUG-PMI.21.4			Explanation of the mechanisms leading to neuronal dysfunction and degeneration in HD	Understanding the physiological processes underlying HD	C2	MK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics
HomUG-PMI.21.5			Explanation of genetic counseling services, predictive testing, and family planning options for HD	Explain the importance of genetic counseling and testing in HD	C2	DK	Workshop, Seminar	Tutorials, assignment		Psychology, PSM

6.3.8. Marfan's syndrome-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.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, Discussion	Quizzes, Class participation	SAQ	Pathology
HomUG-PMI.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, Discussion	MCQ, Assignments	SAQ, Viva voce	Pathology
HomUG-PMI.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, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomUG-PMI.22.4			Explanation of the mechanisms leading to connective tissue abnormalities and organ dysfunction in Marfan Syndrome	Understanding the pathophysiological processes underlying Marfan Syndrome	C2	MK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics

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

6.3.9. Polycystic kidney disease-

Sl. No.	Competency	Millers Level:	Content	SLO	Blooms Domain / Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.23.1	K&S	K	Explanation of PKD, its causes, and characteristics	Understanding the definition and basic features of PKD	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology

HomUG-PMI.23.2			Overview of mutations in the PKD1 and PKD2 genes and their effects on kidney development	Describe the genetic basis of PKD	C1	MK	Lecture, Discussion	MCQ, Assignemnts	SAQ, Viva voce	Pathology
HomUG-PMI.23.3		KH	Description of renal and extrarenal manifestations associated with PKD	Identification of clinical features suggestive of PKD	C2	MK	Lecture, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology, Paediatrics
HomUG-PMI.23.4			Explanation of the mechanisms leading to cyst formation, kidney enlargement, and renal dysfunction in PKD	Understanding the physiological processes underlying PKD	C2	MK	Workshops	MCQ, Assignments	SAQ	Pathology, ObG, PSM, Paediatrics
HomUG-PMI.23.5			Description of treatments including blood pressure control, pain management, and dialysis/transplantation for managing PKD complications	Discuss the medical management of PKD	C2	DK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	Paediatrics

HomUG-PMI.23.6			Explanation of genetic counseling services, family screening, and prenatal testing for PKD	Explain the importance of genetic counseling and screening in PKD	C2	DK	Workshop, Seminar	Tutorials, assignments		Psychology, PSM

6.3.10. Neoplasia-

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.24.1	K&S	K	Explanation of neoplasia, its definition, and characteristics	Understanding the definition and basic features of neoplasia	C1	MK	Lecture, Discussion	Quizzes, Class participation	SAQ	Pathology
HomUG-PMI.24.2			Overview of benign and malignant neoplasms, including carcinomas, sarcomas, and hematologic malignancies	Recognition of different types of neoplasms based on histological and molecular characteristics	C1	MK	Lecture, Discussion	MCQ, Assignments	SAQ, Viva voce	Pathology

HomUG-PMI.24.3		KH	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, Assgnments	Assignments, MCQ	SAQ, MCQ	Pathology
HomUG-PMI.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	Workshops	MCQ, Assignments	SAQ	PSM, Clinical medicine
HomUG-PMI.24.5			Description of screening tests and preventive measures for various types of cancer	Discuss the principles of cancer screening and prevention	C2	DK	Interactive workshops, Case-based learning	Tutorials, MCQ	SAQ, Viva voce	PSM, Clinical medicine
HomUG-PMI.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

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

6.4. Competency Tables for Infectious Diseases and Tropical Diseases

Sl. No.	Domain of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								F	S	
HomUG-PMI.25.1	K&S	K	**Herpes simplex viruses [HSV] infections**	Define Herpes simplex viruses [HSV] infections	C1	MK	Lecture, Multimedia presentation, Case Based	MCQ, Quiz, Case Based, Morphology Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Community Medicine, Paediatrics, Dermatology
				Discuss etiopathogeneis for HSV Infections	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of HSV Infections	C2	MK	Lecture, field visit			Community Medicine
				Explain how HSV Infections	C2	MK	Lecture, field visit			Community Medicine

				spreads from person to person						
				Describe the different clinical spectrum of HSV Infections	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from different clinical spectrum of HSV Infections	C1	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features for HSV Infections	C1	MK	Lecture, Case Based			
				Describe the differential diagnosis of HSV Infections	C2	MK	Lecture, Case Based			
		K		Describe the potential complications of HSV Infections	C2	MK	Lecture, Case Based			
		KH		Discuss the prognosis of HSV Infections	C2	MK	Lecture, Case Based			

				Summarize the treatment and management options for HSV Infections	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for the HSV Infections	C1	MK	Lecture, Case Based			Materia Medica
		KH		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 presentation, Case Based	MCQ, Quiz, Case Based, Morphology Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Community Medicine, Pediatrics, Dermatology
				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 Varicella-zoster virus (VZV) infection spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the different clinical spectrum of Varicella-zoster virus (VZV) infection	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Varicella-zoster virus (VZV) infection	C1	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features for Varicella-zoster virus (VZV) infection	C1	MK	Lecture, Case Based			
				Describe the differential diagnosis of Varicella-zoster virus (VZV) infection	C2	MK	Lecture, Case Based			

				Describe the potential complications arising from Varicella-zoster virus (VZV) infection as per the different clinical spectrum	C2	MK	Lecture, Case Based			
				Discuss the prognosis of different clinical spectrum of Varicella-zoster virus (VZV) infection	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for different clinical spectrum of Varicella-zoster virus (VZV) infection	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for different clinical spectrum of Varicella-zoster	C1	MK	Lecture, Case Based			Materia Medica

				virus (VZV) infection						
		KH		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	C1	MK	Lecture, Multimedia presentation, Assignment - Literature Review	MCQ, Quiz, Viva	LQ, SQ, MCQ, Viva	Pathology, Community Medicine, Pediatrics, Dermatology
				Discuss etiopathogeneis for EBV Infections	C2	MK	Lecture			
				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

				Describe the clinical presentations of EBV Infections - infectious mononucleosis	C2	MK	Lecture			
				State the investigations to be done for the patient suffering from EBV Infections	C1	MK	Lecture			Pathology
		KH		Enumerate the diagnostic features for EBV Infections	C1	MK	Lecture			
				Describe the differential diagnosis of EBV Infections	C2	MK	Lecture			
		K		Describe the potential complications of EBV Infections	C2	MK	Lecture			
		KH		Discuss the prognosis of EBV Infections	C2	MK	Lecture			
				Summarize the treatment and management options for EBV Infections	C2	MK	Lecture			Organon

		K		Enumerate the indications of homoeopathic medicines for the EBV Infections	C1	MK	Lecture			Materia Medica
		KH		Describe the strategies to prevent EBV Infections transmission	C2	MK	Lecture			Community Medicine
HomUG-PM I.25.4	K&S	K	**Poliovirus Infections**	Define Poliovirus Infections	C1	DK	Lecture, Multimedia presentation, Assignment - Literature Review	MCQ, Quiz, Viva	LQ, SQ, MCQ, Viva	Pathology, Community Medicine, Pediatrics, Dermatology
				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 Infections	C1	DK	Lecture, Case Based			Pathology
		KH		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, Immunology

		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, Immunology
HomUG-PM I.25.5	K&S	K	**Measles**	Define Measles	C1	MK	Lecture, Multimedia presentation, Case Based	MCQ, Quiz, Case Based, Morphology Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Virology Community Medicine
				Discuss etiopathogeneis for measles	C2	MK	Lecture, Case Based			
				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			

				State the investigations to be done for the patient suffering from Measles	C1	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features for Measles	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of measles	C2	MK	Lecture, Case Based			
		KH		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, Immunology
		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, Immunology
HomUG-PM I.25.6	K&S	K	**Mumps**	Define Mumps	C1	MK	Lecture, Multimedia presentation, Case Based	MCQ, Quiz, Case Based, Morphology Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Virology Community Medicine
				Discuss etiopathogeneis for Mumps	C2	MK	Lecture, Case Based			
				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		Enumerate the diagnostic features for Mumps	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of Mumps	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of Mumps	C2	MK	Lecture, Case Based			
				Discuss the prognosis of Mumps	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for Measles	C2	MK	Lecture, Case Based			Organon, Immunology
		K		Enumerate the indications of homoeopathic medicines for the Mumps	C1	MK	Lecture, Case Based			Materia Medica
		K		Describe the strategies to prevent Mumps	C1	MK	Lecture, Case Based			Community Medicine, Immunology

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

				spectrum of Rabies						
		K		Describe the potential complications of Rabies	C2	DK	Lecture			
		KH		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, Immunology
		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, Immunology
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			
				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		Describe the complications of dengue infections as per the different clinical spectrum	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of dengue infection	C2	MK	Lecture, Case Based			
				Discuss the prognosis of dengue infection as per the different clinical spectrum	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for dengue infection	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for the dengue infections as per the different clinical spectrum	C1	MK	Lecture, Case Based			Materia Medica
		K		Describe the preventive stretegies for the dengue infection	C1	MK	Lecture, Case Based			Community Medicine

HomUG-PM I.25.9	K&S	K	**Japanese encephalitis virus [JEV] Infection**	Define JEV Infection	C1	NK	Lecture, Multimedia presentation, Assignment - 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 diagnostic features for different spectrum of JEV infection	C1	NK	Lecture			
		K		Describe the potential complications of JEV infection	C2	NK	Lecture			
		KH		Describe the differential diagnosis of JEV infection	C2	NK	Lecture			
				Discuss the prognosis of JEV infection	C2	NK	Lecture			
				Summarize the treatment and management options for JEV infection	C2	NK	Lecture			Organon
		K		Enumerate the indications of homoeopathic medicines for the JEV infection	C1	NK	Lecture			Materia Medica
				Describe the strategies to prevent JEV infection	C1	NK	Lecture			Community Medicine

HomUG-PM I.25.10	K&S	K	**BIRD FLU**	Define BIRD FLU Infection	C1	NK	Lecture, Multimedia presentation, Assignment - Literature Review	MCQ, Quiz, Viva	SQ, MCQ, Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for BIRD FLU infection	C2	NK	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		Enumerate the diagnostic features for different spectrum of BIRD FLU infection	C1	NK	Lecture			
		K		Describe the potential complications of BIRD FLU infection	C2	NK	Lecture			
		KH		Describe the differential diagnosis of BIRD FLU infection	C2	NK	Lecture			
				Discuss the prognosis of BIRD FLU infection	C2	NK	Lecture			
				Summarize the treatment and management options for BIRD FLU infection	C2	NK	Lecture			Organon

		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 presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case based, Viva	SQ, MCQ, Case Based, Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Influenza A H1N1 virus Infection	C2	MK	Lecture, field visit			Community Medicine

				Explain how iH1N1 Infections spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the clinical sprectrum of Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Influenza A H1N1 virus Infection	C1	MK	Lecture, Case Based			Pathology
		K		Enumerate the diagnostic features for different spectrum of Influenza A H1N1 virus Infection	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			

		KH		Describe the differential diagnosis of Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			
				Discuss the prognosis of Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for the Influenza A H1N1 virus Infection	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent Influenza A H1N1 virus Infection	C1	MK	Lecture, Case Based			Community Medicine

HomUG-PM I.25.12	K&S	K	**Chikungunya virus Infection**	Define Chikungunya virus Infection - Chikungunya virus Disease	C1	MK	Lecture, Multimedia presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case based, Viva	SQ, MCQ, Case Based, Viva	Pathology, Virology, Community Medicine
				Discuss etiopathogeneis for Chikungunya virus Infection	C2	MK	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

		KH		Enumerate the diagnostic features for Chikungunya virus Infection	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of Influenza A H1N1 virus Infection	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of Chikunguny virus Infection	C2	MK	Lecture, Case Based			
				Discuss the prognosis of Chikungunya virus Infection	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for Chikungunya virus Infection	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for the Chikungunya virus Infection	C1	MK	Lecture, Case Based			Materia Medica

				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**	Define COVID 19 Virus Infection	C1	MK	Lecture, Multimedia presentation, Case based, Assignment - 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	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of COVID 19 Virus Infection	C2	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 presentation	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 presentation, Assignment - 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 clinical sprectrum of Smallpox (variola) - poxvirus infection	C2	NK	Lecture			
				State the investigations to be done for the patient suffering from clincial spectrum of Smallpox (variola) - poxvirus infection	C1	NK	Lecture			Pathology
		KH		Enumerate the diagnostic features of Smallpox (variola) - poxvirus infection	C1	NK	Lecture			
		K		Describe the potential complications of Smallpox (variola) - poxvirus infection	C2	NK	Lecture			

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

				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 presentation, Case based, Assignment - 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	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features for different spectrum of HIV Infection	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of HIV Infection	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of HIV Infection	C2	MK	Lecture, Case Based			
				Discuss the prognosis of HIV Infection	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for HIV Infection	C2	MK	Lecture, Case Based			Organon, Immunology

		K		Enumerate the indications of homoeopathic medicines for the HIV Infection	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent HIV Infection	C1	MK	Lecture, Case Based			Community Medicine
HomUG-PM I.25.17	K&S	K	**Zika virus infection**	Define Zika virus infection	C1	NK	Lecture, Multimedia presentation	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 investigations to be done for the patient suffering from clincial spectrum of Zika virus infection	C1	NK	Lecture			Pathology
		KH		Enumerate the diagnostic features for Zika virus infection	C1	NK	Lecture			
		K		Describe the potential complications of Zika virus infection	C2	NK	Lecture			
		KH		Describe the differential diagnosis of Zika virus infection	C2	NK	Lecture			
				Discuss the prognosis of Zika virus infection	C2	NK	Lecture			
				Summarize the treatment and management options for Zika virus infection	C2	NK	Lecture			Organon

		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 presentation	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 investigations to be done for the patient suffering from different clincial spectrum of Rickettsial infection	C1	NK	Lecture			Pathology
		KH		Enumerate the diagnostic features for different spectrum of Rickettsial infection	C1	NK	Lecture			
		K		Describe the potential complications of Rickettsial infection	C2	NK	Lecture			
		KH		Describe the differential diagnosis of Rickettsial infection	C2	NK	Lecture			
				Discuss the prognosis of Rickettsial infection	C2	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	**Staphylococcus aureus infection**	Define Staphylococcus aureus infection	C1	DK	Lecture, Multimedia presentation, Case Based	MCQ, Quiz, Case Based, Morphology Chart, Viva	SQ, MCQ, Case Based, Viva	Pathology, Bacteriology Community Medicine
				State the factors predisposing to S. aureus colonisation and its infections / disease	C1	DK	Lecture, Case Based			
				Discuss etiopathogeneis for S. aureus infection	C2	DK	Lecture, Case Based			

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

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

				illness caused by S. aureus infection						
		K		Enumerate the indications of homoeopathic medicines for the common clinical illness caused by S. aureus infection	C1	DK	Lecture, Case Based			Materia Medica
				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 presentation, Case Based	MCQ, Quiz, Case Based, Morphology Chart, Viva	SQ, MCQ, Case Based, Viva	Pathology, Bacteriology Community Medicine
				Discuss etiopathogeneis for Streptococcal infections	C2	DK	Lecture, Case Based			
				Identify the epidemiology dimension of Streptococcal infections	C2	DK	Lecture, field visit			Community Medicine

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

		K		Describe the potential complications of common clinical illness caused by S. aureus infection	C2	DK	Lecture, Case Based			
		KH		Describe the differential diagnosis of common clinical illness caused by Streptococcal infections	C2	DK	Lecture, Case Based			
				Discuss the prognosis of common clinical illness caused by S. aureus infection	C2	DK	Lecture, Case Based			
				Summarize the treatment and management options for common clinical illness caused by Streptococcal infection	C2	DK	Lecture, Case Based			Organon

		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 presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case based, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Bacteriology 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 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
		KH		Enumerate the diagnostic features for Typhoid Fever	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of Typhoid Fever	C2	MK	Lecture, Case Based			
		KH		Describe the 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 Gastroenteritis**	Define Acute Viral Gastroenteritis	C1	MK	Lecture, Multimedia presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case based, Viva	SQ, MCQ, Case Based, Viva	Pathology, Bacteriology 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 infection of Acute Viral Gastroenteritis spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the clinical manisfestation of Acute Viral Gastroenteritis	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Acute Viral Gastroenteritis	C1	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features for Acute Viral Gastroenteritis	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of Acute Viral Gastroenteritis	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of TAcute Viral Gastroenteritis	C2	MK	Lecture, Case Based			

				Discuss the prognosis of Acute Viral Gastroenteritis	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for Acute Viral Gastroenteritis	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for Acute Viral Gastroenteritis	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent Acute Viral Gastroenteritis	C1	MK	Lecture, Case Based			Community Medicine
HomUG-PM I.25.23	K&S	K	**Cholera**	Define Cholera	C1	MK	Lecture, Multimedia presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case based, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Bacteriology Community Medicine

				Discuss etiopathogeneis for Cholera	C2	MK	Lecture, Case Based			
				Identify the epidemiology dimension of Cholera	C2	MK	Lecture, field visit			Community Medicine
				Explain how infection of Cholera spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the clinical manisfestation of Cholera	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Cholera	C1	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features for Cholera	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of Cholera	C2	MK	Lecture, Case Based			
		KH		Describe the differential	C2	MK	Lecture, Case Based			

				diagnosis of Cholera						
				Discuss the prognosis of Cholera	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for Cholera	C2	MK	Lecture, Case Based			Organon
		K		Enumerate the indications of homoeopathic medicines for Cholera	C1	MK	Lecture, Case Based			Materia Medica
				Describe the strategies to prevent Cholera	C1	MK	Lecture, Case Based			Community Medicine
HomUG-PM I.25.24	K&S	K	**Tetanus**	Define Tetanus	C1	NK	Lecture, Multimedia presentation	MCQ, Quiz, Viva	SQ, MCQ, Viva	Pathology, Bacteriology Community Medicine
				Discuss etiopathogeneis for Tetanus	C2	NK	Lecture			
				Describe the clinical manisfestation of Tetanus	C2	NK	Lecture			

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

HomUG-PM I.25.25	K&S	K	**Anthrax**	Define Anthrax	C1	NK	Lecture, Multimedia presentation	MCQ, Quiz, Viva	SQ, MCQ, Viva	Pathology, Bacteriology 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
		KH		Enumerate the diagnostic features for Anthrax	C1	NK	Lecture			

		K		Describe the potential complications of Anthrax	C2	NK	Lecture			
		KH		Describe the differential diagnosis of Anthrax	C2	NK	Lecture			
				Discuss the prognosis of Anthrax	C2	NK	Lecture			
				Summarize the treatment and management options for Anthrax	C2	NK	Lecture			Organon
		K		Enumerate the indications of homoeopathic medicines for Anthrax	C1	NK	Lecture			Materia Medica
				Describe the strategies to prevent Anthrax	C1	NK	Lecture			Community Medicine
HomUG-PM I.25.26	K&S	K	**Brucellosis**	Define Brucellosis	C1	NK	Lecture, Multimedia presentation	MCQ, Quiz, Viva	SQ, MCQ, Viva	Pathology, Bacteriology Community Medicine
				Discuss etiopathogeneis for Brucellosis	C2	NK	Lecture			

				Identify the epidemiology dimension of Brucellosis	C2	NK	Lecture			Community Medicine
				Explain how infection of Brucellosisspreads from person to person	C2	NK	Lecture			Community Medicine
				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
		KH		Enumerate the diagnostic features for Brucellosis	C1	NK	Lecture			
		K		Describe the potential complications of Brucellosis	C2	NK	Lecture			
		KH		Describe the differential diagnosis of Brucellosis	C2	NK	Lecture			

				Discuss the prognosis of Brucellosis	C2	NK	Lecture			
				Summarize the treatment and management options for Brucellosis	C2	NK	Lecture			Organon
		K		Enumerate the indications of homoeopathic medicines for Brucellosis	C1	NK	Lecture			Materia Medica
				Describe the strategies to prevent Brucellosis	C1	NK	Lecture			Community Medicine
HomUG-PM I.25.27	K&S	K	**Plague**	Define Plague	C1	DK	Lecture, Multimedia presentation, Assignment - Literature Review	MCQ, Quiz, Viva	LQ, SQ, MCQ, Viva	Pathology, Bacteriology Community Medicine
				Discuss etiopathogeneis for Plague	C2	DK	Lecture			
				Identify the epidemiology dimension of Plague	C2	DK	Lecture			Community Medicine

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

				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 presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case Based, Model, Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Bacteriology 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	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from Leprosy	C1	MK	Lecture, Case Based			Pathology
		KH		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 presentation, Case based, Assignment - Literature Review	MCQ, Quiz, Case Based, Model, Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Bacteriology 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 infection of Tuberculosis spreads from person to person	C2	MK	Lecture, field visit			Community Medicine
				Describe the different clinical manisfestation of different types of Tuberculosis	C2	MK	Lecture, Case Based			
				State the investigations to be done for the patient suffering from different types of Tuberculosis	C1	MK	Lecture, Case Based			Pathology
		KH		Enumerate the diagnostic features of different types of Tuberculosis	C1	MK	Lecture, Case Based			
		K		Describe the potential complications of of different types of Tuberculosis	C2	MK	Lecture, Case Based			
		KH		Describe the differential diagnosis of of different types of Tuberculosis	C2	MK	Lecture, Case Based			

				Discuss the prognosis of of different types of Tuberculosis	C2	MK	Lecture, Case Based			
				Summarize the treatment and management options for different types of Tuberculosis	C2	MK	Lecture, Case Based			Organon
		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 presentation, Case Based	MCQ, Quiz, Case Based, Model, Chart, Viva	LQ, SQ, MCQ, Case Based, Viva	Pathology, Parasitology Community Medicine
				Discuss etiopathogeneis for different types of Malaria Fever	C2	MK	Lecture, Case Based			

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

		KH		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 of Competency	Millers Level	Content	SLO	Blooms Domain/ Guilbert's Level	Priority	T-L Methods	Assessment		Integration
								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	Demonstration of effective communication and questioning skills	A1/2	MK	Simulated patient encounters	Observation of history-taking sessions, Peer feedback	OSCE	Case discussions with clinical preceptors
HomUG-PM I.26.2	PC		Conducting a systematic physical examination including general examination, systemic examination, and regional examination	Demonstration of proficiency in physical examination techniques	P2	MK	Simulation, Bedside demonstrations	Observation of physical examination sessions, Peer feedback	OSCE	Clinical rotations with supervision

HomUG-PMI.26.3			Analyzing patient history, physical examination findings, and relevant investigations to develop a list of possible diagnoses	Demonstration of critical thinking and clinical reasoning skills	P2/A2	MK	Case-based discussions, Problem-solving scenarios	Case analyses, Guided discussions	Viva voce, Bedside examination	Interactive case-based learning with faculty
HomUG-PMI.26.4			Developing appropriate management strategies including pharmacological, non-pharmacological, and lifestyle interventions	Demonstration of knowledge of evidence-based medicine and treatment guidelines	P2/A2	MK	Small group discussions, Clinical case presentations	Group Discussions	OSCE	Clinical rotations with treatment planning exercises
HomUG-PMI.26.5			Demonstrating empathetic communication, active listening, and professionalism in patient interactions and team communication	Demonstration of interpersonal and communication skills	A2	MK	Simulated patient encounters	Observation of communication skills, Peer feedback	OSCE	Communication exercises

HomUG-PMI.26.6			Recording patient history, examination findings, assessments, and management plans in a clear and organized manner	Demonstration of effective documentation skills	P3	MK	Charting exercises, Case note writing	Review of documentation, Peer feedback	OSCE	Clinical rotations with documentation review
HomUG-PMI.26.7			Adhering to professional standards, maintaining patient confidentiality, and respecting patient autonomy and diversity	Demonstration of ethical decision-making and professionalism	A3	MK	Group Discussions	Observations of professional conduct, Peer evaluations	OSCE	Reflection exercises and discussions

7. Teaching learning methods

Lectures	Non-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

Note- ***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:**

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	**B**	**D**	**E**	**F**	**G**	**D+G/2**

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 name – Surgery

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.

iii) 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.	Introduction to surgery, Scope and limitations of Homoeopathy in surgical conditions, Surgical diseases explained in relation to 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 Head injury; Road traffic accident; injury to chest, abdomen	10
3.	Wound & wound healing; Scar, keloid	5
4.	Haemorrhage Blood transfusion	4
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 surgical patients and methods of providing nutritional support	3
9.	Common surgical infections- Boil, Carbuncle, Abscess, Cellulitis, and erysipelas, Hidradenitis suppurativa, septicaemia, pyaemia	8
10.	Special infections-	8

	Tuberculosis, syphilis, acquired immunodeficiency syndrome, actinomycosis, leprosy, tetanus, infective gangrene	
11.	Concept of swellings- Tumours: Benign-Lipoma, fibroma, adenoma, neuroma, Neurilemmoma, Neurofibroma, Haemangioma Malignant-Carcinoma, sarcoma, fibrosarcoma; naevus, melanoma Cysts – Classification	12
12.	Hernia - Aetiology, General Classification, Abdominal hernias- Basic anatomy, Types, clinical features, management	10
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
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. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-I 1.1	HO	KH	Introduction to surgery	Describe surgical disease according to Hahnemann. Explain the importance of knowledge of surgical diseases for Homoeopathic practice	C/2	Must know	Lecture Small group discussion	Viva	MCQ SAQ	Organon
Hom UG-Sur-I 1.2	HO	KH	Scope and limitations of Homoeopathy in surgical conditions	Explain scope and limitations of Homoeopathy in surgical conditions	C/2	Must know	Lecture Small group discussion	Viva	SAQ	Organon

Hom UG-Sur-I 1.3	HO	KH	Homoeopathic perspective of surgical diseases	Classification of Disease Hahnemmania n: Surgical disease	C/2	Must know	Lecture	Viva	LAQ	Organon
Hom UG-Sur-I 1.4	HO	KH	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	KH	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. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-I 2.1	KS	KH	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	HO	KH	Homoeopathic therapeutics of injury	List homeopathic remedies that are commonly used for specific types of injuries	C/1	Must know	Lecture Small group discussion	Viva	SAQ	Materia Medica
Hom UG-Sur-I 2.3	KS	KH	Principles in the management of road traffic accident	Describe the components of primary survey in victims of road traffic accidents	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	Demonstrate the steps of 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	DOPS	---
Hom UG-Sur-I 2.5	KS	KH	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 DOPS	--

Hom UG-Sur-I 2.6	KS	KH	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	OSCE	---
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	OSCE	

6.3. Head injury; Examination of head injury case-

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

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

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

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

Hom UG-Sur-I 4.3	KS	KH	Chest injuries -tension pneumothorax	Define tension pneumothorax Enumerate the cause of tension pneumothorax Discuss the clinical features of tension pneumothorax Discuss the management of tension pneumothorax	C/1 C/2 C/2 C/2	Must know Must know Must know Must know	Lecture Small group discussion Audiovisual aid Skill lab simulation	Viva OSCE	SAQ LAQ MCQ	
Hom UG-Sur-I 4.4	KS	KH	Chest injury - Thoracotomy	Enumerate the indications for Emergency thoracotomy	C/2	Desirable to know	Lecture	Viva	SAQ	
Hom UG-Sur-I 4.5	KS	KH	Abdominal injury - Clinical features, investigations 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 trauma	C/2 C/2	Must know Must know	Lecture Audiovisual aid Small group discussion	Viva OSCE	MCQ SAQ LAQ	

				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 diagnosis of splenic trauma Discuss the management of splenic trauma	C/2 C/2 C/2	Must know Must know Desirable to know	Lecture Audio visual aid Small group discussion	Viva OSCE	MCQ SAQ LAQ	
Hom UG-Sur-I 4.7	KS	KH	Abdominal injuries-Hepatic trauma	Describe the clinical presentation of Hepatic trauma Discuss the diagnosis of Hepatic trauma Discuss the management of Hepatic trauma	C/2 C/2 C/2	Must know Must know Desirable to know	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	
Hom UG-Sur-I 4.8	KS	KH	Abdominal injuries-pancreaticoduodenal trauma	Describe the clinical presentation of pancreaticoduodenal trauma	C/2	Must know	Lecture Audiovisual aid	Viva	MCQ SAQ LAQ	

				Discuss the diagnosis of pancreaticoduodenal trauma Discuss the management of pancreaticoduodenal trauma	C/2 C/2	Desirable to know Nice to know	Small group discussion			
Hom UG-Sur-I 4.9	KS	KH	Abdominal injuries-Renal trauma	Explain the clinical presentations of renal trauma Discuss the diagnosis of renal trauma Discuss the management of renal trauma	C/2 C/2 C/2	Must know Desirable to know Nice to know	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	

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

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

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

	HO	KH	Homeopathic management of surgical site infections	Discuss the scope of Homoeopathy in surgical site infections. Discuss the Homeopathic therapeutics for surgical site infections	C/1 C/1	Must know Must know				
Hom UG-Sur-I 5.6	HO	KH	Wound management	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 SH KH	Wound management	Enumerate different types of Suture materials Demonstrate different types of Suture / knotting techniques Discuss the Principles of anastomosis	C/2 P/2 C/2	Desirable to know Nice to know Nice to know	Tutorial Small project Skill lab simulation Audiovisual aid DOAP Tutorial Audiovisual aid	Viva	SAQ	

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

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

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

Hom UG-Sur-I 6.4	KS	KH	Blood transfusion and blood products	Enumerate the Indications for blood transfusion Explain the complications of blood transfusion Describe various blood products and appropriate indications for their use	C/1 C/2 C/2	Must know Must know Desirable to know	Lecture Small group discussion OSCE Small project	Viva Viva	SAQ MCQ SAQ	Pathology
Hom UG-Sur-I 6.5	KS PBL	KH SH	Examination of haemorrhagic case	Discuss the assessment of patient with haemorrhage Demonstrate examination of a haemorrhagic case	C/1 P/2	Must know	Audiovisual aid Clinical demonstration Small group discussion DOPS	Viva OSCE	SAQ	
Hom UG-Sur-I 6.6	PBL	S	Blood transfusion procedure	Observe blood transfusion procedure	P/1	Nice to know	Observing blood transfusion procedure	Logbook	--	--

6.7. Shock; Examination of shock -

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

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

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

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

Hom UG-Sur-I 8.3	KH	KH	Acid base balance	Enumerate the causes of metabolic acidosis Describe the clinical features and laboratory findings of metabolic acidosis Discuss the management of metabolic acidosis	C/2 C/2 C/2	Must know Must know Must know	Lecture Small group discussion	Viva	MCQ SAQ	Biochemistry Pathology
Hom UG-Sur-I 8.4	KH	KH	Acid base balance	Enumerate the causes of metabolic alkalosis Describe the clinical features and laboratory findings of metabolic alkalosis Discuss the management of metabolic alkalosis	C/2 C/2 C/2	Must know Must know Must know	Lecture Small group discussion	Viva	MCQ SAQ	Biochemistry Pathology

Hom UG-Sur-I 8.5	KS	KH	Acid base balance	Enumerate the causes of respiratory acidosis Describe the clinical features and laboratory findings of respiratory acidosis Discuss the management of respiratory acidosis	C/2 C/2 C/2	Must know Must know Must know	Lecture Small group discussion	Viva	MCQ SAQ	Biochemistry Pathology
Hom UG-Sur-I 8.6	KS	KH	Acid base balance	Enumerate the causes of respiratory alkalosis Describe the clinical features and laboratory findings of respiratory alkalosis Discuss the management of respiratory alkalosis	C/2 C/2 C/2	Must know Must know Must know	Lecture Audiovisual aid	Viva	MCQ SAQ	Biochemistry Pathology

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

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

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

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

6.9. Burns, skin grafting; Clinical examination-

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

				Explain the principles of fluid resuscitation in burns cases Discuss the management of burn wound	C/2 C/2	Desirable to know Must know				
Hom UG-Sur-I 9.2	HO	KH	Burns and skin grafting	Discuss the scope of Homoeopathy in the management of burns Discuss the homoeopathic therapeutics for burns	C/2	Must know	Lecture small group discussion	Viva	SAQ	Materia Medica Repertory
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 UG-Sur-I 9.4	KS	K	Burns and skin grafting	Enumerate the indications for skin grafting Describe the various types of skin grafting	C/2	Desirable to know	Lecture Audiovisual aid	Viva	SAQ	

6.10. Nutrition-

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

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

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

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

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

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

		KH		Discuss the pathophysiology 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 demonstration DOPS	Viva OSCE DOPS	Case based discussion Log book	
Hom UG-Sur-I 11.9	HO	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 UG-Sur-I 11.10	HO	KH	Common surgical infections Septicaemia and pyaemia	Discuss the role of Homoeopathy in septicaemia and pyaemia Discuss the homoeopathic therapeutics forsepticaemia and pyaemia	C/2	Must know	Lecture Small group discussion	Viva	SAQ	Materia Medica Repertory

6.12. Special infections; Clinical examination-

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

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

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

Hom UG-Sur-I 12.8	HO	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	HO	KH	Special infections – gangrene	Discuss the Homoeopathic therapeutics for Gangrene	C/1	Must know	Lecture/ small group discussion	Viva	SAQ MCQ	Materia Medica Repertory
Hom UG-Sur-I 12.10	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 discussion OCSE	OSCE	

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

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	KH	Tumours	Discuss the differences between benign and malignant tumours Differentiate different tumours like sarcoma, Fibrosarcoma, Naevus, Melanoma etc	C/2	Must Know	Lecture Audiovisual aid	Viva	SAQ LAQ	Pathology
Hom UG-Sur-I 13.3	HO	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	KH	Cyst	Explain Types of Cyst	C/2	Must Know	Lecture Audiovisual aid	Viva	SAQ LAQ	Pathology

Hom UG-Sur-I 13.6	HO	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	KH	Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma	Explain Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma	C/2	Must Know	Lecture Audiovisual aid	Viva	SAQ LAQ MCQ	Pathology
Hom UG-Sur-I 13.8	HO	KH	of Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma	Discuss the Homoeopathic therapeutics of Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma	C/2	Must Know	Lecture Small group discussion	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 demonstration DOPS Small group discussion	OSCE	Mini-cex OSCE	

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

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-I 14.1	KS	K KH	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 C/2	Must Know Must know Must know Desirable to know Nice to know	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ LAQ	Anatomy, Pathology
Hom UG-Sur-I 14.2	KS	KH	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 Discuss the surgical management of inguinal hernia	C/2 C/2	Must know Nice to know				
Hom UG-Sur-I 14.3	KS	KH	Femoral hernia	Describe the basic anatomy of femoral canal Discuss the clinical features and diagnosis of femoral hernia Discuss the surgical management of Femoral hernia	C/1 C/2 C/2	Must know Must know Nice to know	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ LAQ	Anatomy
Hom UG-Sur-I 14.4	KS	KH	Umbilical hernia	Describe the various types of umbilical hernia Discuss the clinicalfeatures and diagnosis Umbilical hernia	C/2 C/2	Must know Must know	Lecture Audiovisual aids	Viva	MCQ SAQ LAQ	

Hom UG-Sur-I 14.5	KS	KH	Epigastric 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	Incisional hernia	Describe etiology of incisional hernia Discuss the clinical features of incisional hernia Discuss the management of incisional hernia	C/2 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	KH	Spigelian hernia	Explain spigelian hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-I 14.8	KS	KH	Lumbar hernia	Explain lumbar hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ	

Hom UG-Sur-I 14.9	KS	KH	Traumatic hernia	Explain traumatic hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-I 14.10	KS	KH	Obturator hernia	Explain obturator hernia	C/2	Desirable to know	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-I 14.11	HO	KH	Hernia	Discuss the Homoeopathic Therapeutics for Hernia	C/2	Must Know	Lecture Small group discussion	Viva	MCQ/ SAQ/ LAQ	Pathology 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 Competency	Miller	Content	SLO	Bloom/Gilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-I 15.1	KS	K	Ulcer	Define Ulcer	C/1	Must Know	Lecture	Viva	MCQ	Pathology Organon: Miasm Materia Medica
Hom UG-Sur-I 15.2	KS	KH	Ulcer	Describe different classification of Ulcer	C/2	Must Know	lecture	Viva	MCQ SAQ LAQ	Pathology
Hom UG-Sur-I 15.3	HO	KH	Ulcer	Explain therapeutics of ulcer	C/1	Must Know	Lecture/ Small group discussion	Viva	MCQ/SAQ/LAQ	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	OSCE Mini-cex	OSCE Mini-cex	

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

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	HO	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

Note- ***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- **A**	100 Marks Clinical/Practical and Viva - **E** i) Viva voce -50 marks ii) Clinical/practical- 50 Surgical Case taking - 25marks (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	20 Marks Viva- **B**	100 Marks Clinical/Practical and Viva - **F** i) Viva voce -50 marks ii) Clinical/practical- 50 Surgical case taking and 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	**B**	**D**	**E**	**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.
- A concise text book of surgery, 11th edition – S Das
- 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	I
2.d	Diagnosis of pregnancy, investigations & examinations, applied anatomy & physiology, Normal pregnancy – physiological changes	I
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	**Teaching hours- Lectures**	**Teaching hours- Non-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.

1.d	Gynaecological case taking, Physical examination, investigation and approach to clinical diagnosis and differential diagnosis.	04 hrs.
1.e	Epidemiology – Predisposition including fundamental miasm; personality type known to develop particular disease.	04 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.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.h	Correlate homoeopathic remedies, Therapeutics, posology. Formulation of prognostic criteria and prognosis related to Gynaecological conditions.	02 hrs
Total		**50 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 Repertorisation.	02 hr.
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- Foetal skull & maternal pelvis Demonstration of labour in Mannequin - skill lab	04
	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

Sl. No.	Domain of Competency	Miller's level	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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	H O	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	H O	KH	Homoeopathic literature	Discuss the Homoeopathic case taking in female complaints as per Organon of Medicine	C I	MK	Lecture/ Integrated Small Group discussion CBL	MCQ/		Organon of Medicine

HomUG-ObGy-1 1.5	H O	KH		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	H O	KH	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	H O	KH		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	H O	KH		Discuss the differentiation of the remedies	C2	MK	Lecture / small group discussion PBL CBL	MCQ	SAQ	Materia Medica, Pathology
HomUG-ObGy-1 1.9	H O	KH		Discuss the remedy relationship wherever applicable	C2	MK	Lecture / small group discussion PBL CBL	MCQ		Materia Medica, Pathology
HomUG-ObGy-1 1.10	H O	KH	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	H O	KH		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	H O	KH		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

Sl. No.	Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG -ObGy-I-2.1	K & S	K	External genitalia organs	Name the external genitalia organs	C I	MK	Small group discussion Models	MCQ		
HomUG -ObGy-I 2.2	K & S	K	Internal genitalia organs	Name the internal genitalia organs.	C I	MK	Small group discussion Charts	MCQ		
HomUG -ObGy-I-2.3	K & S	KH	Internal genitalia organs	Draw and label the anatomy of the uterus	P2	MK	Small group discussion Charts	MCQ		

HomUG-ObGy-I-2.4	K & S	K	Internal genitalia organs	Name the blood supply of the uterus	C I	MK	Small group discussion Charts	MCQ		
Hom-UG ObGy-I-2.5	K & S	KH	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	KH	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.	C I	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 mal-development	CI	MK	Lecture Small group discussion Tutorials	MCQ		

HomUG-ObGy-I-2.12	K & S	KH	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.

Sl. No.	Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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	Endocrinology in puberty	Name the hormones of Anterior Pituitary.	C1	MK	Lecture Small group discussion Tutorials	MCQ		Physiology
HomUG -ObGy-I-3.4	K & S	K		List the functions of Anterior Pituitary hormones	C1	MK	Lecture Small group discussion Tutorials	MCQ		Physiology
HomUG -ObGy-I-3.5	K & S	K		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 group discussion Tutorials	MCQ		Physiology
HomUG -ObGy-I-3.7	K & S	K	Endocrinology in puberty	Name the hormones of Ovary	C1	MK	Lecture Small group discussion.	MCQ		Physiology
HomUG -ObGy-I-3.8	K & S	K	Endocrinology in puberty	List the functions of ovarian hormones.	C1	MK	Lecture Small group discussion	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 group discussion	MCQ	SAQ	Physiology
HomUG -ObGy-I-3.10	K & S	K	Physiology of Menstruation	Define Menstruation	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	Physiology
HomUG - ObGy-I-*3*.11	K & S	K		What are the Phases of Menstruation	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	Physiology
HomUG- ObGy-1*3*.12	K & S	K	Hormonal changes during each phase of menstruation	Discuss the Hormonal Changes during each Phase of Menstruation	C1	MK	Lecture Small group discussion Tutorials	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 group discussion		SAQ	Physiology

HomUG- ObGy-I-3.14	K & S	K		Describe the Uterine Changes occurs during each phase of Menstruation	C1	MK	Lecture Small group discussion Tutorials		SAQ	Physiology
HomUG -ObGy-I-3.15	K & S	K	Puberty	Define puberty	C1	MK	Lecture Small group discussion	MCQ		
HomUG- ObGy-I-3.16	K & S	K	Precocious puberty	Describe the Pubertal changes as per Tanner's Classification	C1	MK	Lecture Small group discussion Tutorials		SAQ	
HomUG- ObGy-I-3.17	K & S	K		Define Precocious puberty	C1	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG- ObGy-I-3.18	K & S	K		Discuss the causes of Precocious puberty	C1	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG- ObGy-I-3.19	K & S	K		Find the diagnostic features of Precocious puberty	C1	MK	Lecture Small group discussion CBL CBL	MCQ		
Hom-UG ObGy-I-3.20	K & S	K	Delayed puberty	Define Delayed puberty	C1	MK	Lecture Small group discussion	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	H O	K	Materia medica Therapeutics	Discuss the Homoeopathic remedies for delayed puberty	C1	MK	Lecture Small group discussion CBL PBL		SAQ	**Materia medica**
HomUG -ObGy-I-3.27	H O	K		Discuss the Homoeopathic remedies for puberty menorrhagia	C1	MK	Lecture Small group discussion CBL PBL		SAQ	**Materia medica**

HomUG -ObGy-I-3.28	H O	K		Discuss the characteristic features of the indicated remedies	C1	MK	Lecture Small group discussion CBL PBL		SAQ	**Materia medica**
HomUG- ObGy-I-3.29	H O	K	Management	Explain the management for Anomalies of Gonadal Function	C1	MK	Lecture Small group discussion CBL CBL	MCQ		**Organon of medicine**
HomUG- ObGy-I-3.26	K & S	K	Amenorrhoea	Define Amenorrhoea	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ	
HomUG- ObGy-I-3.30	K & S	KH		Classify Amenorrhoea	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG -ObGy-I-3.31	K & S	K		Define Primary Amenorrhoea	C1	MK	Lecture Small group discussion CBL PBL	MCQ	SAQ	
HomUG- ObGy-I-3.32	K & S	K	Primary amenorrhoea	Describe the causes of Primary amenorrhoea	C2	MK	Lecture Small group discussion CBL Tutorials	MCQ	SAQ	
HomUG- ObGy-I-3.33	K & S	K	Secondary amenorrhoea	Define Secondary amenorrhoea	C1	MK	Lecture Small group discussion Tutorials	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	P3	MK	Clinical examinations CBL PBL			
HomUG-ObGy-I-3.38	K & S	KH	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	KH		Discuss clinical, laboratory and radiological investigations done in secondary amenorrhoea	C2	MK	Lecture Small group discussion CBL CBL	MCQ		

HomUG-ObGy-I-3.40	H O	KH	Management	Discuss the general management for Primary amenorrhoea	C2	MK	Lecture Small group discussion CBL	MCQ/		
HomUG-ObGy-I-3.41	H O	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	H O	KH		Discuss the Homeopathic remedies for Secondary Amenorrhoea	C2	MK	Lecture Small group discussion CBL Tutorials	MCQ		**Materia Medica**
HomUG-ObGy-I-3.43	H O	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	KH		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	MCQ		
HomUG-ObGy-I-3.53	K & S	K		Discuss the causes of menorrhagia	C1	MK	Lecture Small group discussion Tutorials CBL	MCQ	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	KH	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	KH		Discuss the causes of metropathia hemorrhagica	C1	MK	Lecture Small group discussion CBL Tutorials		SAQ	
HomUG-ObGy-I-3.61	H O	KH	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	H O	KH		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	KH		Discuss the causes of Primary Dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials	SAQ/MCQ	SAQ	
HomUG-ObGy-I-3.66	K & S	KH		Discuss the causes of Secondary dysmenorrhoea	C I		Lecture Small group discussion CBL Tutorials		SAQ	
HomUG -ObGy-I-3.67	K & S	KH	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	KH		Discuss the clinical features Secondary Dysmenorrhoea	C1	MK	Lecture Small group discussion Tutorials CBL PBL	MCQ	SAQ	

HomUG-ObGy-I-3.69	K & S	KH		Differentiate Primary and Secondary Dysmenorrhoea	C1	MK	Small group discussion Tutorials CBL PBL	MCQ	SAQ	
HomUG-ObGy-I-3.70	K & S	K		Define Mittelschmerz's syndrome	C1	MK	Lecture Small group discussion CBL PBL	MCQ	SAQ	
HomUG-ObGy-I-3.71	K & S	KH		Discuss the causes for Mittelschmerz's syndrome	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG-ObGy-I-3.72	K & S	KH		Discuss the general Management of Dysmenorrhoea	C2	MK	Small group discussion Tutorials CBL PBL	MCQ	SAQ	
HomUG-ObGy-I-3.73	H O	KH	Homoeopathic materia medica & therapeutics	Discuss the homoeopathic remedies in Spasmodic dysmenorrhoea	C2	MK	Small group discussion Tutorials CBL PBL	MCQ	SAQ	Materia Medica
HomUG -ObGy-I-3.74	H O	KH		Discuss the homoeopathic remedies in Congestive dysmenorrhoea	C2	MK	Small group discussion Tutorials PBL CBL	MCQ	SAQ	Materia Medica

HomUG- ObGy-I-3.75	H O	KH		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	H O	KH		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	KH		Discuss the general management of premenstrual Syndrome	C1	MK	Lecture Small group discussion Tutorials CBL	MCQ	SAQ	

HomUG-ObGy-I-3.81	H O	KH	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	H O	KH		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	KH	Management	Discuss the general management of Menopause	C1	MK	Lecture small group discussion PBL CBL		SAQ	

HomUG-ObGy-I-3.96	K & S	KH	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	KH		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	KH		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	KH	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	KH	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	KH	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	KH		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

Sl. No. .	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG-ObGy-1 4.1	H O	K	Case taking	Discuss the format of history taking in gynaecological conditions.	C 2	MK	Small group discussion CBL			
HomUG-ObGy-1 4.2	H O	Shows		Explain the importance of communication skills while case taking.	P2	MK	Small group discussion CBL			
HomUG-ObGy-1 4.3	H O	KH		Explain the importance of clinical skills in case taking	C I	MK	Small group discussion CBL Clinical examination	VIVA		
HomUG-ObGy-1 4.4	H O	KH		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	P C	Does	Physical examination	Demonstrate the general physical examination	P 2	MK	Small group discussion Clinical demonstration	MCQ		
HomUG- ObGy-1 4.6	P C	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	P C	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	KH	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				required in AUB case.			Tutorials CBL PBL			
HomUG ObGy-1 4.11	K & S	KH		Discuss the investigation required in malformations of the FGT	C 2	MK	Small group discussion CBL PBL	MCQ		
Hom-UG- ObGy-1 4.12	K & S	KH	Clinical diagnosis	Derive the clinical diagnosis from the signs & symptoms	C 2	MK	Small group discussion CBL PBL	MCQ		
HomUG- ObGy-1 4.13	K & S	KH	Pathological diagnosis	Derive the pathological diagnosis with a help of laboratory and radiological findings.	C 2	MK	Small group discussion CBL PBL	MCQ		
HomUG- ObGy-1 4.14	K & S	KH	Differential diagnosis	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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG-ObGy-15.1	H O	K	Predisposition	Define predisposition	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG-ObGy-15.2	H O	K		Discuss the relevance of predisposing factors for the disease.	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG-ObGy-15.3	H O	K	Miasm	Define miasm	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG-ObGy-15.4	H O	K		Discuss the types of miasms	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG-ObGy-15.5	H O	K		Discuss the relevance of miasm for the disease conditions	C1	MK	Lecture Small group discussion	MCQ		Organon of medicine

							Tutorials			
HomUG-ObGy-15.6	H O	K	Fundamental miasm	Define fundamental miasm	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG-ObGy-15.7	H O	K		Discuss the relevance of fundamental miasm for the disease	C1	MK	Lecture Small group discussion Tutorials	MCQ		Organon of medicine
HomUG-ObGy-15.8	H O	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.

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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-16.6	K & S	K		Discuss the degrees of cystocele	C1	MK	Lecture Small group discussion CBL	MCQ	SAQ	
HomUG-ObGy-16.7	K & S	K	Uterine prolapse	Discuss the degrees of uterine prolapse	C1	MK	Lecture Small group discussion CBL PBL	MCQ	SAQ	
HomUG-ObGy-16.8	K & S	K	Genital prolapse	Describe the aetiology of genital prolapse	C1	MK	Lecture Small group discussion Tutorials Charts	MCQ	SAQ	
HomUG-ObGy-16.9	K & S	K		Discuss the Clinical Features of Genital prolapse	C2	MK	Lecture Small g Clinical examination CBL CBL	MCQ	SAQ	
HomUG-ObGy-16.10	K & S	K		Discuss the Differential Diagnosis of Genital prolapse	C2	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG-ObGy-16.11	K & S	K		Discuss the Prophylaxis of Genital prolapse	C2	MK	Small group discussion Tutorials	MCQ	SAQ	
HomUG-ObGy-16.12	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							Small group discussion Tutorials			
HomUG-ObGy-1 6.14	K & S	K		Discuss the complications of genital prolapse	C2	DK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG-ObGy-1 6.15	K & S	K	Homoeopathic Materia medica & therapeutics	Discuss the Homoeopathic remedies for genital prolapse	C2	MK	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-16.21	K & S	K	Retroversion	Discuss the causes of retroverted uterus	C2	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG-ObGy-16.22	K & S	K		List the types of retroverted uterus	C1	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG-ObGy-16.23	K & S	K		Discuss the clinical features of retroverted uterus	C1	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG-ObGy-16.24	K & S	K	Retroversion degrees	Discuss the degrees of retroversion of uterus	CI	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG-ObGy-16.25	K & S	K	Differential diagnosis	Discuss the Differential Diagnosis of retroverted uterus	C2	MK	Lecture Small group discussion	MCQ	SAQ	
HomUG-ObGy-16.26	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-16.27	K & S	K		Discuss the characteristic features of indicated remedies.	C2	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG-ObGy-16.28	K & S	K	Inversion	Define inversion of uterus	C1	MK	Lecture Small group discussion Tutorials	MCQ	SAQ	
HomUG-ObGy-16.29	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	Scope & Limitation of Homoeopathy	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	KH		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	KH	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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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	H O	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	H O	K	H O	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	H O	K	H O	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	H O	K	H O	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	H O	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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG-ObGy-18.1	H O	KH	Management	Explain the general management in Dysmenorrhoea	C 2	MK	Lecture Small group discussion Tutorials CBL	Viva	SAQ	
HomUG-ObGy-18.2	H O	KH		Explain the general management in Amenorrhoea	C 2	MK	Lecture Small group discussion Tutorials CBL	Viva	SAQ	
HomUG-ObGy-18.3	H O	KH		Explain the general management in Genital prolapse	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA	SAQ	
HomUG-ObGy-18.4	H O	KH		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	H O	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	H O	KH		Discuss the selection of repertory based on symptoms	C 2	MK	Lecture Small group discussion Tutorials CBL	VIVA		
HomUG- ObGy-1 8.7	H O	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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG-ObGy-19.1	K & S	K	Introduction to Obstetrics	Define Obstetrics	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-19.2	K & S	K	Introduction to newborn care	Define the term New born Infant	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-19.3	K & S	K	Introduction to newborn care	Define Still birth	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-19.4	H O	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-19.5	H O	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-ObGy-19.6	H O	KH	Homoeopathic Materia Medica & Therapeutic source books	Discuss the Homoeopathic Materia Medica with Obstetrics and new born care from source books	C2	MK	Lecture Small group discussion Tutorials	VIVA		Organon of medicine
HomUG-ObGy-19.7	H O	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-19.8	H O	K	Repertory	Discuss the selection of repertory based on symptoms in obstetrics.	C2	MK	Lecture Small group discussion Tutorials CBL	MCQ		Repertory
HomUG-ObGy-19.9	H O	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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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	KH		Discuss the stages of oogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG-ObGy-1 10.3	K & S	KH		Define Spermatogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG-ObGy-1 10.4	K & S	KH		Discuss the stages of spermatogenesis	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG-ObGy-1 10.5	K & S	KH	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.

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG-ObGy-11.1	K & S	K	Placenta	Define Placenta	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG-ObGy-11.2	K & S	K		Discuss the development of Placenta	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG-ObGy-11.3	K & S	K		Describe the Placenta at Term	C1	DK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG-ObGy-11.4	K & S	K		Describe the Structure of Placenta	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	Physiology, Anatomy
HomUG-ObGy-11.5	K & S	K		Describe the Placental Circulation	C1	MK	Lecture Tutorials Small group discussion	MCQ		Physiology, Anatomy
HomUG-ObGy-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	C I P 2	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-ObGy-1 11.47	K & S	S		Demonstrate the anterior and transverse diameters of the pelvic inlet	C 1 P 2	MK	Lecture Tutorials Small group discussion Manikin	MCQ	SAQ	

6.11 Diagnosis of pregnancy, Investigations & examinations, applied anatomy & physiology, Normal pregnancy – Physiological Changes

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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 1st 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 1st 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 1st Trimester	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 12.6	K & S	K		Discuss the subjective symptoms of 2nd 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 2nd trimester of pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 12.8	K & S	K		List the investigations of 2nd 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 3rd trimester of pregnancy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1	K & S	K		Discuss the objective signs of 3rd 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 3rd 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	P C	S	Methods of Obstetrical Examination	Demonstrate the Abdominal Examination	P-2	MK	Tutorials Small group discussion Mannikin Bedside	MCQ	SAQ	
HomUG-ObGy-1	P C	K		List the types of Obstetrical grips	C 1 P 2	MK	Lecture Tutorials	MCQ	SAQ	

12.17							Small group discussion			
HomUG-ObGy-1 12.18	P C	S		Demonstrate the Obstetrical grips	C 1 P I	MK	Lecture Tutorials Small group discussion Mannikin Bedside	MCQ		
HomUG-ObGy-1 12.19	P C	PI		Demonstrate the pelvic grips	C 1 P 2	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 12.20	K & S	K		Explain Braxton-Hicks contraction(3)	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
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	

							Small group discussion			
HomUG-ObGy-1 12.25	K & S	K	Metabolic	Discuss the metabolic changes occurs during pregnancy	C1	MK	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	C V S	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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	P C	K		Discuss the procedure at first ANC visit	C1	MK	Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 13.5	P C	K		Discuss the procedure at subsequent visits	C1	MK	Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1	P C	K		Discuss the important Investigations done for	C1	MK	Lecture Tutorials	MCQ	SAQ	

13.6				Clinical Assessment of Foetal well being			Small group discussion			
HomUG-ObGy-1 13.7	K & S	K		Discuss the important Investigations done in Late Pregnancy	C1	DK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 13.8	K & S	K		Discuss the Methods of Prenatal Genetic Screening	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 13.9	K & S	K		Discuss the Invasive procedures for Prenatal Diagnosis	C1	NK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 13.10	K & S	K		List the Non Invasive procedures for Prenatal Diagnosis	C1	NK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 13.11	K & S	K		Explain the antenatal advice given to the mother	C1 P I	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 13.12	K & S	K		Discuss the importance of Antenatal care	C1 P I	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 13.13	K & S	K		Discuss the relevance of Pre-conceptional Counselling	C1	MK	Lecture Tutorials Small group discussion	VIVA		

HomUG-ObGy-1 13.14	P C	KH	Antenatal visits	Discuss the normal antenatal visits during pregnancy	C2	MK	Lecture Tutorials Small group discussion	VIVA		
HomUG-ObGy-1 13.15	P C	KH	Antenatal diet	Discuss the antenatal diet to the pregnant mother	C2	MK	Lecture Tutorials Small group discussion Chart	MCQ		
HomUG-ObGy-1 13.16	H O	KH	Scope of homoeopathy	Discuss the Scope of Homoeopathic management in antenatal complaints	C I P 1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 13.17	H O	KH	Management in Homoeopathy	Discuss the Scope of Homoeopathic management in high risk cases pregnancy	C1 P1	MK	Lecture Tutorials Small group discussion CBL	MCQ VIVA		Organon of Medicine, Materia Medica, Repertory
HomUG-ObGy-1 13.18	H O	K	Scope & Limitations	Discuss the Limitations of Homoeopathic management in high risk pregnancy	C1 P 1	MK	Lecture Tutorials Small group discussion CBL	VIVA		Organon of Medicine, Materia Medica, Repertory

6.13 Common conditions such as Vomiting, backache, constipation in pregnancy and Homoeopathic Management

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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	H O	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	H O	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	H O	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	H O	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	Assessment		Integrated
								Formative	Summative	
HomUG-ObGy-115.1	K & S	K	Normal labour	Define Normal labour	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-115.2	K & S			Define Eutocia	C I	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-115.3	K & S	K		Define Abnormal Labour	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-115.4	K & S	K		Discuss the causes of onset of labour	C1	MK	Lecture Tutorials Small group discussion		LA SAQ	Physiology
HomUG-ObGy-115.5	K & S	K		Describe the features of True labour pains	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-115.6	K & S	K		Describe the features of False labour pains	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	

HomUG-ObGy-15.7	K & S	KH		Differentiate true labour pains from false labour pains	C2	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.8	K & S	K		Describe the characteristic features of pre-term labour	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-15.9	K & S	K	Normal labour	Describe the Physiology of Normal Labour	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.10	K & S	K	Stages of labour	Classify the Stages of Normal Labour	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-15.11	K & S	K		Describe the Stages of Normal Labour	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.12	K & S	K		Discuss the events taking place in 1st stage of labour	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.13	K & S	K		Discuss the events taking place in 2nd stage of labour	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.14	K & S	K	Events 1st, 2nd and 3rd stage of labour	Discuss the events taking place in 3rd stage of labour	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.15	K & S	K		Discuss the 1st stage of labour & the duratration	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-15.16	K & S	K		Discuss the 2nd stage of labour & the duration	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	

HomUG-ObGy-15.17	K & S	K	Stages of 1st, 2nd and 3rd stage of labour	Discuss the 3rd stage of labour & the duration	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-15.18	K & S	K		Discuss the 4th stage of labour	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-15.19	K & S	K		Define Episiotomy	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-15.20	K & S	K		Discuss the types of episiotomy	C1	MK	Lecture Tutorials Small group discussion Mannikin	MCQ	SAQ	
HomUG-ObGy-15.21	K & S	KH		Discuss the complications of episiotomy	C2	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-15.22	K & S	K		Describe the mechanism of labour	C1 P I	MK	Lecture Tutorials Small group discussion Clinical demonstration Mannikin		LA SAQ	
HomUG-ObGy-15.23	K & S	K	Episiotomy	Define crowning	C1	MK	Lecture Tutorials Small group discussion Mannikin	MCQ	SAQ	
HomUG-ObGy-15.24	K & S	K		Define Restitution	C1	MK	Lecture Tutorials Small group discussion Mannikin	MCQ	SAQ	
HomUG-ObGy-15.25	K & S	KH		Discuss the management of 1st stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ	

HomUG-ObGy-15.26	K & S	KH		Discuss the management of 2nd stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ	
HomUG-ObGy-15.27	K & S	KH	Mechanism of labour	Discuss the management of 3rd stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ	
HomUG-ObGy-15.28	K & S	KH	Management of 1st, 2nd 3rd, and 4th stage of labour	Discuss the management of 4th stage of labour	C2	MK	Lecture Tutorials Small group discussion Mannikin		SAQ	
HomUG-ObGy-15.29	H O	KH	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-15.30	H O	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-15.31	H O	KH	Homoeopathic Materia medica &therapeutics	Discuss the homoeopathic remedies in labour	C2	MK	Lecture Tutorials Small group discussion	MCQ	LA SAQ	
HomUG-ObGy-15.32	H O	KH		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

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								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-ObGy-1 16.6	K & S	K		Discuss the Anatomical Consideration of Involution of Uterus	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 16.7	K & S	K		Discuss the Physiological Consideration of Involution of Uterus	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 16.8	K & S	D		Demonstrate the clinical Assessment of Involution of Uterus	P-1	MK	Lecture Tutorials Small group discussion	MCQ VIVA	SAQ	
HomUG-ObGy-1 16.9	K & S	K		Discuss the Involution of other Pelvic Structures	C1	MK	Lecture Tutorials Small group discussion	VIVA		
HomUG-ObGy-1 16.10	K & S	K		Define lochia	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 16.11	K & S	K		Describe the types of Lochia	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 16.12	K & S	K		Discuss the composition of lochia	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 16.13	K & S	K		Mention the normal duration of Lochia	C1	MK	Lecture Tutorials Small group discussion	MCQ		

HomUG-ObGy-1 16.14	K & S	K		Discuss the clinical importance of Lochia	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 16.15	K & S	K		Discuss the Normal Physiological changes occurs during puerperium.	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 16.16	K & S	K		Discuss the general management during Puerperium	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 16.17	H O	KH	Homoeopathic Management	Discuss the homoeopathic remedies for puerperium.	C2	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 16.18	H O	KH		Discuss the characteristic features of indicated remedies	C2	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 16.19	K & S	K		Define Lactation	C1	MK	Lecture Tutorials Small group discussion	MCQ VIVA		
HomUG-ObGy-1 16.20	K & S	K		Define Colostrum	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 16.21	K & S	K		List Composition of Colostrum	C1	MK	Lecture TutorialsSmall group discussion	MCQ	SAQ	

HomUG-ObGy-1 16.22	K & S	K		Describe the 4 stages in Physiology of Lactation	C1	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 16.23	H O	KH	Homoeopathic Management	Discuss the homoeopathic remedies for increasing the milk	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia Medica
HomUG-ObGy-1 16.24	K & S	KH		Discuss the characteristic features of indicated remedy	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia Medica
HomUG-ObGy-1 16.25	K & S	K	Postnatal care	Define Postnatal care	C1	MK	Lecture Tutorials Small group discussion	MCQ		
HomUG-ObGy-1 16.26	K & S	K		Discuss the Objectives of postnatal care	C1	MK	Lecture Tutorials Small group discussion	MCQ	SAQ	
HomUG-ObGy-1 16.27	K & S	S		Demonstrate the procedure of Postnatal examination of the Mother	C1	DK	Lecture Tutorials Small group discussion			
HomUG-ObGy-1 16.28	K & S	S		Demonstrate the procedure of Postnatal examination of the Baby	C1 P I	DK	Lecture Tutorials Small group discussion			
HomUG-ObGy-1 16.29	K & S	K		Discuss the advice given to the postnatal mother	P I	MK	Lecture Tutorials Small group discussion		SAQ	

HomUG-ObGy-1 16.30	H O	KH	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	H O	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:

Sl. No.	Domain Competency	Miller	Content	Specific Learning Objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
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 P I	MK	Lecture Tutorials Small group discussion Clinical demonstration	VIVA		

HomUG-ObGy-1 17.3	K & S	K	New born infant	Describe the physical features of new born infant at birth	C 1	MK	Lecture Tutorials Small group discussion Clinical demonstration		SAQ	
HomUG-ObGy-1 17.4	K & S	S		Demonstrate the vital signs of new born infant immediate after birth.	C 1 P I	MK	Lecture Tutorials Small group discussion Manikin Bedside	MCQ		
HomUG-ObGy-1 17.5	K & S	S		Demonstrate the general physical examination findings of new born	C1 P I	MK	Lecture Tutorials Small group discussion Clinical demonstration	MCQ		
HomUG-ObGy-1 17.6	K & S	S		Elicit the reflexes of new born	C1	MK	Lecture Tutorials Small group discussion Clinical bed side demonstration	MCQ		
HomUG-ObGy-1 17.7	K & S	KH		Explain the Immediate care of new born	C1 P I	MK	Lecture Tutorials Small group discussion Manikin Bedside		SAQ	
HomUG-ObGy-1 17.8	K & S	K		Discuss the advantage of breast feeding	C1 P I	MK	Lecture Tutorials Small group discussion		SAQ	

HomUG-ObGy-1 17.9	K & S	K	Breast feeding	Discuss the contraindications for breast feeding	C1 P I	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 17.10	K & S	KH		Describe the indication for Artificial feeding.	C 2	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 17.11	K & S	KH		Discuss the difficulties faced during breast feeding due to mother & Baby	C2	MK	Lecture Tutorials Small group discussion		SAQ	
HomUG-ObGy-1 17.12	K & S	KH		Discuss the Daily Observation and care of new born	C2	DK	Lecture Tutorials Small group discussion		SAQ	Paediatrics
HomUG-ObGy-1 17.13	K & S	S		Discuss Infant Growth Assessment	C1	NK	Lecture Tutorials Small group discussion		SAQ	Paediatrics
HomUG-ObGy-1 17.14	K & S	K		Define APGAR Score of Newborn	C1	MK	Lecture Tutorials Small group discussion Clinical demonstration	MCQ	SAQ	Paediatrics
HomUG-ObGy-1 17.15	K & S	K		Describe the parameters of APGAR Scoring of New-born	C1 P 1	MK	Lecture Tutorials Small group discussion Clinical demonstration		SAQ	Paediatrics
HomUG-ObGy-1 17.16	K & S	K		Discuss importance of performing APGAR	C1	DK	Lecture Tutorials	MCQ	SAQ	Paediatrics

				Scoring at intervals after birth			Small group discussion			
HomUG-ObGy-1 17.17	H O	KH	Homoeopathic Management	Discuss the Scope of Homoeopathy in New born Care	C2	MK	Lecture Tutorials Small group discussion		SAQ	Organon of medicine
HomUG-ObGy-1 17.18	H O	KH	Homoeopathic Management	Discuss Homoeopathic remedies in new born care	C2	MK	Lecture Tutorials Small group discussion	SAQ		Materia medica
HomUG-ObGy-1 17.19	H O	K		Discuss the characteristic features of indicated remedies	C2	MK	Lecture Tutorials Small group discussion	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

Sl. No.	Domain Competency	Miller	Content	Specific learning objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integrated
								Formative	Summative	
HomUG-ObGy-1 18.1	H O	KH	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	H O	KH		List the Homoeopathic remedies commonly used in obstetrics	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia medica
HomUG-ObGy-1 18.3	H O	KH		Discuss the characeteristic features of the indicated remedies.	C2	MK	Lecture Tutorials Small group discussion		SAQ	Materia medica
HomUG-ObGy-1 18.4	H O	KH		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	H O	KH		Discuss the characteristic features of indicated remedies	C2	MK	Lecture Tutorials		SAQ	Materia medica

							Small group discussion			
HomUG-ObGy-1 18.6	H O	KH		Discuss the differentiation of the remedies	C1	MK	Lecture Tutorials Small group discussion	MCQ		Materia medica
HomUG-ObGy-1 18.7	H O	KH		Discuss the remedy relationship wherever applicable	C1	MK	Lecture Tutorials Small group discussion	MCQ		Materia medica
HomUG-ObGy-1 18.8	H O	KH	Repertorisation	Discuss the selection of repertories in Obstetrical care	C-3	MK	Lecture Tutorials Small group discussion	MCQ		Repertory
HomUG-ObGy-1 18.9	H O	KH		Discuss the selection of repertories in New born care	C-3	MK	Lecture Tutorials Small group discussion	MCQ		Repertory
HomUG-ObGy-1 18.10	H O	S		Explain how to convert symptoms into rubrics from different repertories in Obstetricas.	C-3	MK	Lecture Tutorials Small group discussion	MCQ		Repertory
HomUG-ObGy-1 18.11	H O	S		Explain how to convert symptoms into rubrics from different repertories in New born care.	C-3	MK	Lecture Tutorials Small group discussion	MCQ		Repertory
HomUG-ObGy-1 18.12	H O	K		Discuss the selection of repertory based on symptomatology	C-1	MK	Lecture Tutorials Small group discussion	MCQ		Repertory

HomUG-ObGy-1 18.13	H O	KH	Posology	Discuss the selection of similimum based on symptomatology	C1	MK	Lecture Tutorials Small group discussion	MCQ		Organon of medicine
HomUG-ObGy-1 18.14	H O	KH		Describe methods of potency selection	C1	MK	Lecture Tutorials Small group discussion	MCQ		Organon of medicine
HomUG-ObGy-1 18.15	H O	K		Discuss the factors for selection of posology.	C1	MK	Lecture Tutorials Small group discussion	MCQ		Organon of medicine
HomUG-ObGy-1 18.16	H O	K		Discuss the criteria for repetition of doses	C1	MK	Lecture Tutorials Small group discussion	MCQ		Organon of medicine

6.17 Important Investigations for diagnosis in Obstetrics

Sl. No.	Domain Competency	Miller	Content	Specific learning objectives	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								Formative	Summative	
HomUG-ObGy-119.1	P C	K	Ultrasonography	Discuss the indications for USG in 1st trimester.	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.2	P C	K		Discuss the findings of hydatidiform mole in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.3	P C	K		Discuss the finding of abortion in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.4	P C	K		Discuss the findings of normal pregnancy in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology

HomUG-ObGy-119.5	P C	K		Discuss the findings of Anterio – posterior diameters of the fetal skull in USG.	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.6	P C	K		Discuss the findings of biparietal (BPD) diameters of the fetal skull in USG.	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.7	P C	K		Discuss the findings of Crown Rump Length in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.8	P C	K		Discuss the findings of Amniotic fluid in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.9	P C	K		Discuss the findings of foetal growth in each trimester in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-119.10	P C	K		Discuss the findings of Malformations of the foetus in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology

HomUG-ObGy-1 19.11	P C	K		Discuss the findings of malformation of the uterus in USG	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Radiology
HomUG-ObGy-1 19.12	P C	K		Discuss the urine test pregnancy test in amenorrhoea women	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Biochemistry
HomUG-ObGy-1 19.13	P C	K		Discuss the immunological test for pregnancy	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Biochemistry
HomUG-ObGy-1 19.14	P C	K	Blood test	Discuss the conditions where B-HCG tests are done.	C1	DK	Small group discussion Tutorials CBL PBL			Biochemistry
HomUG-ObGy-1 19.15	P C	K		Discuss the importance of Hb in pregnancy.	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Biochemistry
HomUG-ObGy-1 19.16	P C	K		Discuss the importance of blood group & Rh group in pregnancy.	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		Biochemistry

HomUG-ObGy-119.17	P C	K		Discuss the importance of FBS, RBS and PPBS in pregnancy	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		
HomUG-ObGy-119.18	P C	K		Describe the importance of Thyroid function tests in pregnancy	C1	MK	Small group discussion Tutorials CBL PBL	MCQ		

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

Note- ***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/ 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 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:**

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	**B**	**D**	**E**	**F**	**G**	**D+G/2**

9 List of recommended text/reference books

- Dutta,D.C,(2023).*Text book of Obstetrics*,10th edition, 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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