

## COMPETENCY BASED DYNAMIC CURRICULUM FOR THIRD BHMS PROFESSIONAL COURSE

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

(Surgery)



**HOMOEOPATHY EDUCATION BOARD**  
**NATIONAL COMMISSION FOR HOMOEOPATHY**  
**MINISTRY OF AYUSH, GOVERNMENT OF INDIA**

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# AIM Homoeopathy

**Subject name – Surgery**

**Subject code – HomUG-Sur-II**

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# AIM Homoeopathy

## 1. Preamble

Surgery addresses acute and chronic injuries, deformities, and diseases that require physical intervention through the removal, repair, or reconstruction of specific organs or tissues. Specialties such as ENT, Ophthalmology, Dentistry, and Orthopaedics have gained prominence, alongside super specialties like Cardiac Surgery, Neurosurgery, and Oncosurgery. While homeopathic physicians are limited in performing surgical procedures, they must possess foundational knowledge of surgery to appropriately identify surgical cases, determine their scope, and understand their limitations. This knowledge equips the physician to diagnose surgical diseases accurately, identify early complications, and refer patients to higher centres when necessary. Moreover, this understanding aids in administering effective first aid and providing comprehensive care.

Experience demonstrates that Homeopathy can play a significant role in preventing certain surgical procedures when evolving conditions are diagnosed early and the simillimum is administered at the appropriate time. Homeopathic physicians can utilize their training to manage early stages of conditions conservatively, thereby potentially avoiding invasive interventions. Additionally, they can judiciously use homeopathic medicines to alleviate symptoms, enhance recovery, and prevent complications. Ancillary management strategies, including proper hygiene, dietary advice, and physical support, further improve patient outcomes.

A thorough understanding of pathology is essential to accurately evaluate the state and stage of a disease. Knowledge of pathological processes enables homeopathic students to identify critical symptoms and signs, aiding in the early detection of complications and timely referrals to specialists. Incorporating the Hahnemannian classification of disease in the curriculum bridges surgical conditions with the fundamental tenets of homeopathic philosophy. Concepts such as chronic disease and susceptibility guide the application of correct posology and individualized treatment plans, ensuring effective and safe management. By understanding these principles, students learn to balance modern medical diagnostics with homeopathic therapeutic approaches.

The education and training of homeopathic students must include the management of surgical cases, integrating both modern medical approaches and the principles outlined in the Organon of Medicine. Training in surgical conditions enhances the physician's ability to provide first aid effectively in emergencies, such as controlling bleeding, stabilizing fractures, and managing wounds. Homeopathic principles can also complement modern medicine by promoting natural healing, reducing inflammation, and improving post-surgical recovery. Additionally, students should be trained to advise on accessory measures such as physiotherapy, wound care, and dietary modifications, ensuring holistic management.

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Advanced knowledge of homeopathic principles and a precise understanding of the *Materia Medica* can expand the application of homeopathy to a range of acute and chronic surgical conditions previously considered beyond its scope. This includes managing post-surgical complications, alleviating pain, and enhancing recovery. The integration of homeopathic therapeutics with modern surgical knowledge fosters a comprehensive approach, allowing the physician to play a supportive role in multidisciplinary care teams.

In conclusion, the integration of homeopathic philosophy with surgical knowledge equips the homeopathic physician to address surgical cases comprehensively. This training enhances their ability to diagnose and manage surgical conditions effectively, refer cases promptly when necessary, provide first aid, and utilize homeopathy judiciously. Such an approach ultimately contributes to delivering effective and holistic patient care.

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## 2. Course outcomes (CO)-

**At the end of III BHMS students shall able to**

- i) Understand the Management of Complex Surgical Cases
- ii) Integrate Surgical Specialties with Pathological Principles
- iii) Synthesize Homoeopathic and Surgical Concepts of Causation and Disease Expression
- iv) Apply miasmatic Understanding to Surgical Cases. Analyse surgical cases through a miasmatic framework, utilizing homoeopathic philosophy to provide a comprehensive understanding and management of the disease process.
- v) Correlate Patient Susceptibility with Posology in Surgical Management. Evaluate the relationship between a patient's susceptibility and the dosage (posology) of homoeopathic remedies, ensuring individualized and precise therapeutic interventions.
- vi) Differentiate Remedies Based on Pathogenesis. Develop advanced skills in studying and differentiating homoeopathic remedies based on their pathogenesis to enhance treatment outcomes in surgical cases.
- vii) Promote ancillary Measures and Patient Education for Improved Outcomes. Recognize the role of supportive measures and patient education in improving clinical outcomes, including post-operative recovery and long-term health maintenance.
- viii) Address post-surgical complaints, complications, and their sequelae using Homoeopathic principles to support holistic recovery, alleviate post-operative issues, and improve the quality of life through comprehensive and integrative care.
- ix) Evaluate and Manage Surgical Complications and Sequelae. Assess and address surgical complications and their sequelae through homoeopathic interventions, ensuring comprehensive and integrative patient care.
- x) Provide Preventive Counselling and Emphasize Regular Screenings. Counsel patients on preventive strategies, the importance of regular health screenings, and appropriate management pathways to promote early detection and prevent disease progression.
- xi) Deliver empathetic and comprehensible education to patients, enhancing their understanding of diagnoses, therapeutic options, and the importance of follow-up care for sustained health outcomes.

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### 3. Learning objectives (LO)-

- i. Understand the fundamental principles of diagnostic and therapeutic approaches for surgical and medical conditions.
- ii. Demonstrate the ability to integrate knowledge of anatomy, pathology, surgery, and medicine to analyse complex clinical scenarios.
- iii. Identify clinical signs and symptoms of surgical diseases through comprehensive history-taking and physical examination.
- iv. Differentiate between conditions based on clinical findings, imaging results, and laboratory investigations with accuracy.
- v. Conduct systematic and focused examinations for specific conditions such as breast lumps, abdominal masses, or dysphagia.
- vi. Analyse patient presentations and correlate clinical findings to formulate accurate differential diagnoses.
- vii. Interpret diagnostic results, including imaging studies, endoscopic findings, and biopsy reports, to guide clinical decision-making.
- viii. Evaluate the effectiveness of treatment strategies and make necessary modifications to optimize patient outcomes.
- ix. Effectively communicate examination findings and management plans to peers, the healthcare team, and patients.
- x. Counsel patients on preventive measures, regular screening, and appropriate management strategies for various conditions.
- xi. Educate patients about their diagnosis, treatment options, and follow-up care in an empathetic and comprehensible manner.
- xii. Uphold ethical principles in patient interactions, ensuring respect, confidentiality, informed consent, and professionalism.
- xiii. Apply theoretical concepts to practical situations, enhancing diagnostic and therapeutic decision-making in clinical practice.
- xiv. Recognize the role of Homoeopathy in managing surgical cases and its integration with conventional medical approaches.
- xv. Prescribe homoeopathic remedies based on a comprehensive understanding of pathogenesis and differentiation of remedies.
- xvi. Identify red flag signs and symptoms and ensure timely referral of patients to specialized centres for advanced management.
- xvii. Apply first aid principles effectively in emergency situations requiring immediate intervention.

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- xviii. Utilize homoeopathic medicines appropriately in pre-surgical preparation and post-surgical recovery phases.
- xix. Use of Repertories and Materia Medica tools to identify the simillimum in surgical cases, whenever indicated
- xx. Incorporate the miasmatic background of surgical conditions through the integration of homoeopathic philosophy, enhancing the overall management of surgical pathologies

## 4. Course content and its term-wise distribution

Sl. No.	Topic
<b>Term I</b>	
1.	Diseases of Blood vessels and nerves – Arteries. Veins, Lymphatics & Peripheral nerves
2.	Diseases of Alimentary tract – Palate, cheek, Tongue, Floor of mouth, Oesophagus, Peritoneum, Retroperitoneal space, stomach and Duodenum, Small intestine, large intestine, Rectum and Anal canal
3.	Diseases of Liver, Gallbladder, Bile duct, Pancreas and Spleen
4.	Orthopedics
<b>Term II</b>	
5.	Diseases of Thorax, Heart and Pericardium
6.	Diseases of Urogenital system – Kidney, Urinary Bladder, Prostate, Urethra, Penis, Scrotum, Testes
7.	ENT, Thyroid and other Neck swellings
8.	Diseases of Breast
9.	Ophthalmology

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10.	Dentistry
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## 5. Teaching hours

### 5.1. Gross division of teaching hours

Surgery		
Year	Teaching hours- Lectures	Teaching hours- Non-lectures
III BHMS	120	100

### 5.2. Teaching hours theory

Sl. No.	Topic	Teaching hours
1.	Diseases of Blood vessels and nerves – Arteries. Veins, Lymphatics & Peripheral nerves	10
2.	Diseases of Alimentary tract – Palate, cheek, Tongue, Floor of mouth, Oesophagus, Peritoneum, Retroperitoneal space, stomach and Duodenum, Small intestine, large intestine, Rectum and Anal canal	20
3.	Diseases of Liver, Gallbladder, Bile duct, Pancreas and Spleen	7
4.	Diseases of Thorax, Heart and Pericardium, Breast	10
5.	Diseases of Urogenital system – Kidney, Urinary Bladder, Prostate, Urethra, Penis, Scrotum, Testes	20
6.	ENT, Thyroid and other Neck swellings	16
7.	Orthopedics	22

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8.	Ophthalmology	10
9.	Dentistry	5
<b>Total</b>		<b>120</b>

### 5.3. Teaching hours Non-lecture

Sl. No	Non-Lecture Activity -Clinical /Practical	Term
<b>Total Time Allotted: 70 hours</b>		
1	Clinical examination of Gangrene	I
2	Clinical examination of the varicose vein	I
3	Clinical examination of the Lymphatic system	I
4	Clinical examination of the lesion of peripheral nerves.	I
5	Clinical examination of the Oral cavity/Tongue/Salivary Glands	I
6	Examination of a case of Dysphagia	I
7	Counselling patients with peptic ulcer on lifestyle modifications	I
8	Clinical examinations to identify signs of appendicitis	I
9	Clinical examination – Acute Abdomen /Chronic abdomen	I
10	Examination of Rectal case	I
11	Examination of abdominal lump	I
12	Examination of liver & Gall Bladder	I

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13	Clinical Examination of spleen	I
14	Clinical examination of a case of low back pain	I
15	Clinical examination for shoulder injuries, and assess for humerus fractures	I
16	Clinical examination for upper limb injuries	I
17	Clinical examination to assess for pelvic fracture, including inspection, palpation, and stability tests	I
18	Clinical examination to assess for fracture of the neck of femur	I
19	Clinical examination of the knee joint	I
20	Clinical examination of the leg, ankle, and foot	I
21	Clinical examination of the spine	I
22	Clinical examination for traumatic paraplegia	I
23	Observe/ Perform emergency care of fractures, including immobilization techniques (e.g., splinting), managing open fractures (e.g., wound dressing), and assessing for neurovascular injury	I
24	Clinical examination to assess for pelvic fracture, including inspection, palpation, and stability tests	I
25	Clinical examination to assess for fracture of the neck of femur	I
26	Patient education and counselling on BOO management, including lifestyle modifications	II
27	Examination of urinary case	II
28	Urethral catheterisation	II
29	Examination of inguinoscrotal swelling	II
30	Examination of groin swelling	II

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31	Examination of scrotal swelling	II
32	Examination of penis	II
33	Examination of disease of chest	II
34	Ear examination	II
35	Examination of case of Deafness	II
36	Examination of the case of Vertigo	II
37	Examination of Nose: Anterior Rhinoscopy & Posterior Rhinoscopy & paranasal sinus	II
38	Examination of Pharynx	II
39	Examination of Larynx	II
40	Examination of the thyroid gland	II
41	Examination of Neck swelling	II
42	Breast examination	II
43	Examination of Teeth and Gums	II
44	Examination of Eye/Vision – Visual acuity and Colour vision	II
<b>Sl. No</b>	<b>Non-Lecture Activity</b>  <b>Demonstrative- Skill lab/Simulation training/Role play/ Seminar/Tutorial/Assignment</b>  <b>Total Time Allotted: 30 hours</b>	<b>Term</b>
1	Case-based/problem based discussions	I/II

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2	Observe/Perform ICD on a mannequin	II
3	Perform /Observe pericardiocentesis under supervision	II
4	X- ray, Instruments and Surgical items for demonstration	II
5	Seminars	I/II
6	Tutorials	I/II
7	Assignments	II
10	Role play	I /II

## 6. Content mapping (competencies tables)

Topic: **Hom UG-Sur II – 1. Diseases of Transporting channels – Arteries, Veins, Lymphatics and Peripheral nerves -**

### Arterial System

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur II-1.1	KS	K	<b>Disease of Arteries</b>	Describe Cause, Effects, pathology, symptoms and signs of lower limb arterial stenosis or occlusion	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Pathology</b>
	PBL	KH		Discuss the investigations indicated in arterial stenosis – doppler ultrasound, angiography	C/1	DK	Audiovisual Skill lab Simulation			

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	<b>KS</b>	<b>K</b>		Discuss management of arterial occlusion – transluminal angioplasty & stenting & Bypass	C/1	NK				
Hom UG-Sur-II-1.2	<b>KS</b>	<b>K</b>	Gangrene	Define Gangrene	C/2	MK	Lecture Audiovisual mode Skill lab Simulation Case based clinical discussion OSCE	Viva	MCQ SAQ LAQ	<b>Pathology</b>  <b>Materia Medica Repertory</b>
	<b>PBL</b>	<b>KH</b>		Describe types of gangrene	C/2	MK				
	<b>HO</b>	<b>KH</b>		Discuss management of gangrene  Demonstrate clinical examination of Gangrene	C/1  P/2	DK  MK			OSCE	
Hom UG-Sur-II-1.3	<b>KS</b>	<b>K</b>	Acute arterial occlusion	Discuss Types and causes of acute arterial occlusion  Describe management of acute arterial occlusion  Discuss homoeopathic treatment for acute arterial occlusion	C/1  C/1  C/1	DK  DK  DK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Pathology</b>
Hom	<b>KS</b>	<b>K</b>	Amputation	Discuss types and	C/1	DK	Lecture	Viva	MCQ	<b>Anatomy</b>

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UG-Sur-II-1.4				indication of amputation			Audiovisual mode		SAQ	
Hom UG-Sur-II-1.5	<b>KS</b>	<b>K</b>	Aneurysm	Define Aneurysm Discuss Classification, types, investigations in Aneurysm  Discuss management for Aneurysm  Discuss homoeopathic treatment for Aneurysm	C/2  C/2  C/1	MK  NK  MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Pathology</b>
Hom UG-Sur-II-1.6	<b>KS</b>	<b>K</b>	Arteritis &Vasospastic condition	Describe Cause, symptoms, investigation in Thrombo-angiitis obliterans (Buerger's disease), Raynaud's disease  Discuss management of Burger's disease & Raynaud's disease	C/2  C/2	MK  NK	Lecture Audiovisual mode	Viva	MCQ SAQ	
Hom UG-Sur-II-1.7	<b>KS</b>	<b>K</b>	Embolism	Discuss definition, aetiology, types, clinical sign and symptoms, investigation of Embolism  Describe management of embolism  Discuss homoeopathic	C/2  C/1  C/2	MK  NK  MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Pathology</b>
	<b>HO</b>	<b>KH</b>								<b>Materia</b>

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				treatment of the Embolism						Medica Repertory
Hom UG-Sur-II-1.8	<b>KS</b>  <b>HO</b>	<b>K</b>  <b>KH</b>	Thrombosis	Discuss definition, Aetiology, types, symptoms, investigation of thrombosis  Describe management of Thrombosis  Discuss homoeopathic treatment of the thrombosis.	C/2  C/1  C/2	MK  MK  MK	Lecture Audiovisual mode  Skill lab  Simulation  Cased based clinical discussion and demonstration  OSCE  Integrated teaching	Viva	MCQ SAQ  MCQ SAQ OSCE	<b>Pathology</b>  <b>Materia Medica Repertory</b>

## Venous system

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II-1.9	<b>KS</b>  <b>PBL</b>	<b>K</b>  <b>SH</b>	<b>Disease of Veins</b>  <b>Varicose Vein</b>	Describe Anatomy of veins  Discuss pathophysiology of venous disease Describe Epidemiology, classification, clinical features of varicose vein  Demonstrate the physical examination of the varicose vein	C/2  C/1  P/1	<b>MK</b>  MK  MK	Lecture Audiovisual mode  Skill lab  Simulation  Cased based clinical discussion and demonstration  OSCE  Integrated teaching	Viva	MCQ SAQ OSCE  MCQ SAQ OSCE	<b>Pathology</b>

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	<b>PBL</b>	<b>KH</b>		Discuss the investigations indicated in varicose vein disease – ultrasound	C/2	MK					
	<b>HO</b>	<b>K</b>		Discuss management of Varicose vein	C/1	NK					
Hom UG- Sur- II- 1.10	<b>KS</b>	<b>K</b>	<b>Venous thrombosis, DVT</b>	Discuss homoeopathic treatment for the varicose vein	C/2	MK					<b>Repertory Materia Medica</b>
	<b>PBL</b>	<b>KH</b>		Describe aetiology, pathology, clinical features and diagnosis of Venous Thrombosis, DVT	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ		<b>Pathology</b>
	<b>KS</b>	<b>K</b>		Describe Investigations indicated for the venous thrombosis, DVT	C/2	NK					
	<b>HO</b>	<b>KH</b>		Discuss management of Venous thrombosis, DVT	C/2	NK					<b>Materia Medica Repertory</b>
Hom	<b>KS</b>	<b>K</b>	<b>Leg Ulcer</b>	Discuss homoeopathic treatment for the venous thrombosis, DVT	C/2	MK	Lecture	Viva	MCQ		<b>Pathology</b>

# AIM Homoeopathy

UG-Sur-II-1.11	PBL	KH		pathology, clinical features and diagnosis of Leg Ulceration  Describe Investigations indicated for the Leg Ulceration	C/2	NK	Audiovisual mode		SAQ	
	KS	K		Discuss management of Leg Ulceration	C/2	NK				
	HO	KH		Discuss homoeopathic treatment for the Leg Ulceration	C/2	MK				Materia Medica Repertory

## Lymphatic system

Sl No	Competency	Miller	Content	SLO	Bloom/Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II-1.12	KS	K	Disease of Lymphatics	Describe Anatomy of Lymphatics and lymph node  Discuss pathophysiology of Lymphatics  Describe Epidemiology, classification, clinical features, management of acute lymphangitis	C/2  C/1	MK  MK	Lecture Audiovisual mode Skill lab Simulation OSCE Cased based clinical discussion and demonstration Integrated teaching	Viva	MCQ SAQ	Pathology

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		<b>K</b>		Describe definition, aetiology, types, pathology, clinical sign and symptoms of Lymphoedema	C/2	MK					
KS	<b>SH</b>			Demonstrate the physical examination of the Lymphatic system	P/1	MK					
	<b>KH</b>			Discuss the investigations indicated in Lymphoedema: USG, CT, MRI, Lymphangiography	C/2	NK			OSCE		
	<b>K</b>			Discuss management of Lymphoedema	C/1	NK				<b>Repertory Materia Medica</b>	
	<b>KH</b>			Discuss homoeopathic treatment for the Lymphoedema	C/2	MK					
	<b>K</b>			Describe Cause, clinical features and diagnosis of	C/1	NK					

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		<b>KH</b>		Filariasis  Discuss Management of Filariasis  Describe homoeopathic medicines of filariasis	C/1  C/1	NK  MK				<b>Repertory Materia Medica</b>
Hom UG-Sur-II-1.13	<b>KS</b>  <b>HO</b>	<b>K</b>  <b>KH</b>		Discuss various types of acute and chronic lymphadenitis  Discuss homoeopathic treatment of acute and chronic lymphadenitis	<b>C/1</b>	<b>MK</b>	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Repertory Materia Medica</b>
Hom UG-Sur-II-1.14	<b>KS</b>	<b>K</b>		Describe definition, types of reticuloses	<b>C/1</b>	<b>DK</b>	Lecture Audiovisual mode	Viva	MCQ SAQ	
Hom UG-Sur-II-1.15	<b>KS</b>  <b>KS</b>  <b>KS</b>	<b>K</b>  <b>K</b>  <b>K</b>		Describe pathology, clinical features, staging, investigations in Hodgkin's disease  Describe pathology, clinical features, investigation in Non hodgkin's lymphoma  Discuss pathology and clinical features for the Burkitt tumor	<b>C/1</b>  <b>C/1</b>  <b>C/1</b>	<b>DK</b>  <b>DK</b>  <b>NK</b>	Lecture Audiovisual mode	Viva	MCQ SAQ LAQ	

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	<b>HO</b>	<b>KH</b>		Discuss homoeopathic treatment for the Reticulosis, Hodgkin's lymphoma and non Hodgkin's lymphoma, Burkitt tumor	<b>C/2</b>	<b>DK</b>				<b>Repertory Materia Medica</b>
	<b>KS</b>	<b>K</b>		Discuss clinical features, pathology, investigation and diagnosis of Sarcoidosis	<b>C/1</b>	<b>NK</b>				
	<b>HO</b>	<b>KH</b>		Discuss homoeopathic treatment for the Sarcoidosis	<b>C/2</b>	<b>NK</b>				

## Peripheral nerves

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II 1.16	<b>KS</b>	<b>K</b>	<b>Disease of Nerves</b>	Discuss the types, pathology, clinical features of nerve injury.	<b>C/2</b>	<b>MK</b>	Lecture Audiovisual mode Skill lab Simulation OSCE	Viva	MCQ SAQ	<b>Pathology</b>
	<b>KS</b>	<b>K</b>		Discuss management of the nerve injury: medical, suturing of nerves	<b>C/1</b>	<b>DK</b>				
	<b>KS</b>	<b>K</b>		Discuss injuries of	<b>C/1</b>	<b>MK</b>				

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	<b>KS</b>	<b>K</b>		brachial plexus, radial nerve, ulnar nerve, median nerve injuries.  Discuss claw hand, foot drop, sciatic nerve injury, Carpel tunnel syndrome	C/1	MK					
	<b>PBL</b>	<b>SH</b>		Describe examination of the lesion of peripheral nerves.	P/1	MK			OSCE		
	<b>HO</b>	<b>KH</b>		Describe homoeopathic treatment for the peripheral nerve injury	C/2	MK				<b>Materia Medica Repertory</b>	

**Topic: Hom UG-Sur II – 2. Diseases of Alimentary Canal –**

**Palate, Cheek, Tongue & Floor of the mouth**

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II-2.1	<b>KS</b>	<b>K</b>	<b>Disease of Mouth</b>	Describe classification, symptoms and signs of cleft lip  Describe classification, clinical features of cleft palate	C/1  C/1	<b>DK</b>  DK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Pathology</b>

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Materia Medica Repertory						
HO	K		Discuss management of cleft lip and cleft palate	C/1	NK	
KS	K		Discuss types, clinical features, investigation of stomatitis	C/2	MK	
KS	K		Describe homoeopathic treatment for the stomatitis	C/1	MK	
KS	K		Describe causes, clinical examination, investigations in ulcer of tongue, Ca tongue	C/2	MK	
PBL	SH		Discuss homoeopathic medicines for the ulcer of tongue	C/1	MK	Lecture, Audiovisual Integrated Teaching
KS	K		Describe physical examination of the Oral cavity	P/2	MK	Audiovisual Demonstration Clinical case discussion and demonstration
KS	K		Describe Ranula	C/1	DK	

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## Salivary Glands

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur- II- 2.2	KS	K	Disease of Salivary Glands	Discuss anatomy and physiological aspects of Salivary glands	C/1	DK	Lecture Audiovisual mode	Viva	MCQ SAQ	Pathology     Materia Medica Repertory
	KS	K		Describe investigations used for investigation of Salivary gland – USG, FNAC, PET, CT, MRI, Biopsy	C/1	DK				
	KS	K		Describe cause, types, Clinical features, diagnosis of cyst, tumor of salivary gland	C/1	MK				
	HO	KH		Discuss cause, clinical features, diagnosis of Sublingual gland & submandibular glands.	C/2	MK				
	KS	K		Discuss homoeopathic medicines for the salivary gland disease,	C/1	MK				

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				sublingual glands & submandibular glands.						
Hom UG-Sur-II- 2.3	<b>KS</b>	<b>K</b>	<b>Disease of parotid gland</b>	Discuss anatomical and physiological aspects of parotid gland.	C/1	MK	Lecture Audiovisual mode Clinical case discussion and demonstration	Viva	MCQ SAQ	Pathology
	<b>KS</b>	<b>KH</b>		Describe investigations used for investigation of Parotid gland – USG, FNAC, PET, CT, MRI, Biopsy	C/2	DK				Materia Medica Repertory
	<b>KS</b>	<b>K</b>		Describe cause, clinical features, investigation of parotitis	C/2	DK				
	<b>KS</b>	<b>K</b>		Discuss cause, clinical features, investigation and diagnosis of Parotid gland tumor	C/1	NK				
	<b>HO</b>	<b>KH</b>		Discuss homoeopathic treatment for the parotitis and tumor of parotid gland	C/2	MK				Materia Medica Repertory
	<b>PBL</b>	<b>KH</b>		Demonstrate physical examination of parotid gland and other salivary glands	P/1	MK				

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## Oesophagus

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG- Sur-II- 2.4	KS	K	Oesophagus	Review the concepts of applied anatomy of Oesophagus	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	Anatomy
Hom UG- Sur-II- 2.5	KS	K	Oesophagus	Review the concepts of functions of Oesophagus	C/2	MK	Lecture Audiovisual mode			Physiology
Hom UG- Sur-II- 2.5	PC	SH	Oesophagus	Discuss various investigations used in disease of Oesophagus: X-ray, Barium Swallow, CT- Scan, Oesophagoscopy	P/1	DK	Observation, small group discussion	DOPS	--	
Hom UG- Sur-II- 2.6	KS	K	Oesophagus	Describe aetiology, types, sign& symptoms, differential diagnosis, investigations in case of Dysphagia	C/1	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	Anatomy

# AIM Homoeopathy

Hom UG-Sur-II-2.7	KS	K	Oesophagus	<p>Discuss aetiology, clinical features, investigations &amp; treatment of stricture of Oesophagus, plummer vinson syndrome, achalasia cardia, carcinoma of oesophagus</p> <p>Describe homoeopathic treatment for the dysphagia, stricture of oesophagus</p>	C/1	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	Anatomy
Hom UG-Sur-II-2.8	KS	K	GERD-Gastroesophageal reflux disease	<p>Define GERD</p> <p>Describe the mechanisms of GERD, including lower oesophageal sphincter dysfunction, delayed gastric emptying, and oesophageal mucosal damage.</p> <p>Discuss the</p>	C/1  C/1  C/2	MK  DK  MK	Lecture Audiovisual aids	Viva	SAQ	Practice of Medicine

# AIM Homoeopathy

		KH		manifestations of GERD  Explain indications, procedures, and findings of investigations like endoscopy, oesophageal pH monitoring, and manometry.	C/2	MK					
		KH		Recognize complications such as oesophageal stricture, Barrett's oesophagus, and oesophageal adenocarcinoma.	C/2	MK					
	HO	K		Discuss the Homoeopathic therapeutics for GERD	C/1	MK					
Hom UG-Sur-II-2.9	KS	K	Hiatus Hernia	Describe Hiatus Henia, types, Clinical presentations and management	C/2	MK	Lecture	Viva	SAQ		
Hom UG-Sur-II-2.10	KS/PBL	K	Examination of a case of Dysphagia	Define dysphagia and classify its causes	C/1	MK	Lecture Small group discussion	Viva	MCQ SAQ OSCE		

# AIM Homoeopathy

		KH		Identify the clinical features and history suggestive of dysphagia	C/1	MK	Case based learning DOPS				
		SH		Perform a systematic clinical examination for dysphagia	P/2	MK					
		KH		Differentiate between oropharyngeal and oesophageal dysphagia based on clinical findings	C/2	MK					
		KH		Discuss the red flag signs in dysphagia requiring urgent intervention	C/3	MK					

# AIM Homoeopathy

## Diseases of Peritoneum

Sl No	Competency	Miller	Content	SLO	Bloom/Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II- 2.11	KS	<b>K</b>  <b>K</b>  <b>KH</b>  <b>KH</b>	Peritoneum - Peritonitis	Define peritonitis and classify its types (primary, secondary, tertiary)  Explain the pathophysiology of peritonitis  Identify the clinical features of peritonitis, such as abdominal pain, tenderness, guarding, and systemic signs like fever and tachycardia  Discuss diagnostic investigations, including complete blood count (CBC), serum lactate,	C/1  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aids Case based discussion Case studies	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

		<b>KH</b>		blood cultures, and imaging techniques like X-ray, ultrasound, and CT scan  Describe the role of paracentesis in diagnosing peritonitis, including analysis of ascitic fluid	C/3	NK				
		<b>KH</b>		Discuss surgical management, including indications for laparotomy and source control of infection	C/2	NK				
		<b>KH</b>		Recognize complications of peritonitis, such as sepsis, abscess formation, and multi-organ failure	C/2	MK				
	<b>HO</b>	<b>K</b>		Discuss the homoeopathic therapeutics for peritonitis	C/1	MK				
Hom UG-Sur-	<b>KS</b>	<b>K</b>	Pelvic abscess	Define pelvic abscess and	C/1	MK	Lecture Audiovisual	Viva	SAQ	

# AIM Homoeopathy

II- 2.12		<b>KH</b>		describe its etiological factors  Describe the clinical features of pelvic abscess	C/2	MK	aids Small group discussion			
		<b>KH</b>		Discuss the diagnostic investigations, including blood tests (CBC, CRP), imaging techniques (ultrasound, CT, and MRI), and aspiration for culture	C/2	DK				
		<b>KH</b>		Recognize complications of pelvic abscess	C/2	NK				

  

Hom UG-Sur- II- 2.13	<b>KS</b>	<b>K</b>	Subphrenic abscess	Define subphrenic abscess and describe its etiological factors	C/1	MK	Lecture Audiovisual aids	Viva	MCQ SAQ	
		<b>KH</b>		List and recognize the clinical features of subphrenic abscess, such as fever, referred	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		shoulder pain, and restricted diaphragm movement  Discuss diagnostic investigations, including CBC, inflammatory markers, and imaging techniques such as ultrasound, CT, and X-rays	C/3	NK					
		<b>KH</b>		Explain the imaging findings typical of subphrenic abscess on X-ray, ultrasound, and CT scans	C/2	NK					
		<b>KH</b>		Discuss the indications for surgical drainage in cases of subphrenic abscess	C/2	DK					
		<b>KH</b>		Recognize potential	C/2	DK					

# AIM Homoeopathy

				complications of untreated or poorly managed subphrenic abscess						
Hom UG-Sur-II- 2.14	<b>KS</b>	<b>K</b>	Mesenteric cyst	Describe mesenteric cyst	C/1	DK	Lecture Audiovisual aid	Viva	SAQ	
Hom UG-Sur-II- 2.15	<b>KS</b>	<b>K</b>	Psoas abscess	Define psoas abscess	C/1	MK	Lecture Audiovisual aid	Viva	MCQ SAQ	
		<b>K</b>		Describe the anatomical relationship of the psoas muscle and its relevance in the spread of infection	C/1	DK	Case based discussion			
		<b>K</b>		List and describe common aetiologies, such as tuberculosis, enteric infections, and post-surgical infections	C/1	MK				
		<b>KH</b>		Recognize the clinical features of psoas abscess, including fever, flank pain and limp	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		Discuss diagnostic investigations, including blood tests (CBC, ESR, CRP), imaging techniques (ultrasound, CT, MRI), and aspiration for culture	C/2	DK				
		<b>KH</b>		Explain the findings of imaging modalities such as CT and MRI in identifying psoas abscess	C/2	DK				
		<b>KH</b>		Explain the indications and surgical approaches for abscess drainage in case of psoas abscess	C/2	NK				
		<b>KH</b>		Identify complications of untreated or poorly managed psoas abscess,	C/2	NK				

# AIM Homoeopathy

				such as sepsis, deep vein thrombosis, or vertebral osteomyelitis						
Hom UG-Sur-II- 2.16	<b>KS</b>	<b>K</b>	Diseases of stomach and duodenum- Gastritis	Define gastritis and classify it into acute and chronic types  Explain the pathophysiology of gastritis, including the role of H. pylori, NSAIDs, and autoimmune processes  Enumerate the etiological factors for gastritis, such as infections, medications, alcohol, and stress  Recognize the clinical features of gastritis, including epigastric pain, nausea, vomiting, and loss of appetite	C/1  C/1  C/1  C/2	MK  MK  MK  MK	Lecture Audiovisual aids Small group discussion Case discussion	Viva	MCQ SAQ LAQ	Practice of medicine Materia Medica

# AIM Homoeopathy

		<b>KH</b>		Discuss diagnostic investigations, including endoscopy, biopsy, and tests for <i>H. pylori</i>	C/2	DK				
		<b>KH</b>		Explain the findings of endoscopy in acute and chronic gastritis	C/2	NK				
		<b>KH</b>		Explain complications of chronic gastritis, such as gastric ulcers, atrophic gastritis, and increased risk of gastric carcinoma	C/2	MK				
	<b>HO</b>	<b>K</b>		Discuss the homoeopathic therapeutics for gastritis	C/1	MK				
Hom	<b>KS</b>	<b>K</b>	Peptic ulcer	Define peptic	C/1	MK	Lecture	Viva	MCQ	Practice of

# AIM Homoeopathy

UG-Sur-II- 2.17		<b>K</b>	– Gastric and Duodenal ulcer	ulcer and differentiate between gastric and duodenal ulcers  Explain the pathophysiology of peptic ulcer disease, including the role of acid, pepsin, and protective mechanisms	C/2	MK	Audiovisual aids Clinical case discussion Radiological image interpretation Sessions Role play patient counselling session	Image interpretation session	SAQ LAQ OSCE on diagnosis and management planning	Medicine Materia Medica Repertory
		<b>K</b>		Enumerate the etiological factors, including H. pylori infection, NSAID use, stress, and smoking	C/1	MK				
		<b>KH</b>		Describe the clinical features and its complications of peptic ulcer	C/2	MK				
		<b>KH</b>		Discuss diagnostic investigations for peptic ulcer such as upper GI endoscopy,	C/2	DK				

# AIM Homoeopathy

				biopsy, and tests for H. pylori							
		<b>KH</b>		Explain the endoscopic findings of gastric and duodenal ulcers	C/2	NK					
		<b>KH</b>		Discuss indications for surgical intervention in peptic ulcer complications	C/2	NK					
<b>PC</b>	<b>S</b>			Explain preventive strategies, including lifestyle modifications, avoidance of NSAIDs, and prophylactic measures in high risk patients	A/2	NK					
<b>PC</b>	<b>S</b>			Counsel patients on symptoms, treatment options, and dietary modifications for peptic ulcer disease	A/3	NK					

# AIM Homoeopathy

	<b>HO</b>	<b>K</b>		Discuss the Homoeopathic therapeutics for peptic ulcer	C/1	MK				
Hom UG-Sur-II- 2.18	<b>KS</b>	<b>K</b>	Pyloric stenosis	Define pyloric stenosis and differentiate between congenital and acquired forms	C/1	MK	Lecture Audiovisual aids Small groups discussion	Viva	MCQ SAQ	
		<b>K</b>		Explain the pathophysiology of pyloric stenosis, including hypertrophy and obstruction	C/2	MK				
		<b>K</b>		List the clinical features of pyloric stenosis, such as projectile vomiting and dehydration	C/2	MK				
		<b>KH</b>		Explain the complications such as metabolic alkalosis,	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		dehydration, and malnutrition in pyloric stenosis	C/3	DK				
		<b>KH</b>		Discuss diagnostic tools like ultrasound, upper GI contrast studies, and lab investigations for pyloric stenosis	C/3	NK				
		<b>KH</b>		Correlate clinical findings with imaging and lab results to confirm the diagnosis of pyloric stenosis	C/3	NK				
		<b>KH</b>		Describe surgical management of pyloric stenosis	C/3	NK				
Hom UG-Sur-II- 2.19	<b>KS</b>	<b>K</b>	Gastric outlet obstruction	Define gastric outlet obstruction and list its common causes	C/1	MK	Lecture Audiovisual aids Small group discussion Radiology image interpretation sessions	Viva	MCQ SAQ LAQ	
		<b>K</b>		Discuss the clinical features of Gastric outlet obstruction	C/2	MK				
		<b>K</b>		Enumerate	C/1	MK				

# AIM Homoeopathy

				complications of Gastric outlet obstruction							
HO	K	KH		Discuss diagnostic tools, including upper GI endoscopy, barium meal, ultrasound, and CT in case of gastric outlet obstruction	C/2	MK					
				Differentiate benign causes (peptic ulcer disease, pyloric stenosis) from malignant causes (gastric cancer, pancreatic tumours)	C/3	MK					
				Describe surgical options, for Gastric outlet obstruction management	C/2	DK					
				Discuss the scope of Homoeopathy along with relevant homoeopathic	C/2	MK					

# AIM Homoeopathy

				therapeutics in the management of gastric outlet obstruction						
Hom UG-Sur-II- 2.20	<b>KS</b>	<b>K</b>	Hematemesis	Define hematemesis	C/1	MK	Lecture Small group discussion	Viva	SAQ LAQ	Materia Medica Repertory
		<b>K</b>		List the common causes of hematemesis	C/1	MK				
		<b>KH</b>		Recognize the clinical features and associated symptoms	C/2	MK				
		<b>KH</b>		Explain the management of acute hematemesis	C/2	MK				
		<b>KH</b>		Describe the endoscopic techniques for managing hematemesis	C/3	NK				
		<b>K</b>		Discuss the homoeopathic therapeutics for Haematemesis	C/2	MK				
Hom UG-Sur-	<b>KS</b>	<b>K</b>	Carcinoma of stomach (CA)	Explain the epidemiology and	C/1	MK	Lecture Small group	Viva	MCQ SAQ	

# AIM Homoeopathy

II- 2.21		<b>K</b>	Stomach)/Gastric Carcinoma	risk factors of CA stomach  List the etiological factors of gastric carcinoma	C/1	MK	discussion Audiovisual aids Case discussion		LAQ	
		<b>K</b>		Describe the pathological types of gastric carcinoma	C/1	DK				
		<b>KH</b>		Recognize the clinical features of gastric carcinoma, such as weight loss, anaemia, and epigastric pain	C/2	MK				
		<b>KH</b>		Explain diagnostic approaches, including endoscopy, biopsy, imaging (CT/MRI), and tumour markers	C/2	DK				
		<b>KH</b>		Outline the TNM staging of gastric carcinoma and its clinical significance	C/2	DK				

# AIM Homoeopathy

		<b>KH</b>		Recognize complications of gastric carcinoma, such as obstruction, perforation, and bleeding	C/3	DK				
		<b>KH</b>		Describe treatment options for Carcinoma of stomach	C/2	NK				
	<b>HO</b>	<b>K</b>		Discuss the homoeopathic therapeutics for Carcinoma of stomach	C/1	MK				
Hom UG-Sur-II- 2.22	<b>KS</b>	<b>K</b>	Ulcerative colitis	Define ulcerative colitis and differentiate it from other inflammatory bowel diseases (IBD)	C/1	MK	Lecture Small group discussion Audiovisual aid Case based discussion	Viva	MCQ SAQ LAQ	Practice of Medicine Materia Medica
		<b>K</b>		Describe the aetiology and risk factors of ulcerative colitis	C/1	MK				
		<b>K</b>		Explain the pathogenesis and pathology of	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		ulcerative colitis  Identify the clinical features of ulcerative colitis, such as diarrhoea, rectal bleeding, and abdominal pain	C/2	MK					
		<b>KH</b>		Discuss extra-intestinal manifestations of ulcerative colitis	C/2	MK					
		<b>KH</b>		Discuss the complications of ulcerative colitis, such as toxic megacolon, perforation, and colorectal cancer	C/2	MK					
		<b>KH</b>		Explain the role of diagnostic tools, including colonoscopy, histopathology, and imaging studies in ulcerative colitis	C/2	DK					
<b>HO</b>	<b>K</b>			Discuss the homoeopathic therapeutics for	C/2	MK					

# AIM Homoeopathy

				ulcerative colitis						
Hom UG-Sur-II- 2.23	<b>KS</b>	<b>K</b>	Ischemic colitis	Define ischemic colitis	C/1	MK	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ	
		<b>K</b>		Describe the etiological factors and risk factors for ischemic colitis	C/1	MK				
		<b>KH</b>		Recognize the clinical features of ischemic colitis	C/2	MK				
		<b>KH</b>		Discuss the classification of ischemic colitis, including transient, chronic, and gangrenous forms	C/2	MK				
		<b>KH</b>		Describe the differential diagnosis of ischemic colitis	C/2	DK				
		<b>KH</b>		Discuss complications of ischemic colitis	C/2	DK				

# AIM Homoeopathy

		<b>KH</b>		Outline diagnostic approaches in cases of ischemic colitis	C/2	DK				
Hom UG-Sur-II- 2.24	<b>KS</b>	<b>K</b>	Crohn's disease	Define Crohn's disease and describe its epidemiology	C/1	MK	Lecture Small group discussion Audiovisual aid Case based discussion	Viva	MCQ SAQ LAQ	Practice of Medicine Materia Medica
		<b>K</b>		Explain the aetiology and risk factors for Crohn's disease	C/1	MK				
		<b>K</b>		Describe the pathophysiology of Crohn's disease	C/2	DK				
		<b>KH</b>		Discuss the clinical manifestations of crohn's disease	C/2	MK				
		<b>KH</b>		Discuss extra-intestinal manifestations of crohn's disease	C/2	MK				
		<b>KH</b>		Outline the diagnostic methods for	C/2	DK				

# AIM Homoeopathy

		<b>KH</b>		Crohn's disease  Differentiate Crohn's disease from ulcerative colitis and other causes of chronic diarrhoea  Recognize complications, such as abscess formation, obstruction, and increased colorectal cancer risk in Crohn's disease  Discuss the Homoeopathic therapeutics for Crohn's disease	C/2  C/3  C/1	DK  DK  MK				
Hom UG-Sur-II- 2.25	<b>KS</b>	<b>K</b>	Intussusception	Define intussusception and explain its epidemiology, including common age groups affected  Explain the pathophysiology of intussusception	C/1  C/1	MK  MK	Lecture Small group discussion Audiovisual aid Case based discussion	Viva	MCQ SAQ	Materia Medica Repertory

# AIM Homoeopathy

		<b>KH</b>		Identify the clinical features of intussusception, including intermittent abdominal pain, bloody stools, and palpable mass	C/2	MK				
		<b>KH</b>		Discuss the diagnostic approaches, including ultrasonography and other imaging studies	C/2	DK				
		<b>KH</b>		Explain complications of intussusception	C/2	DK				
	<b>HO</b>	<b>K</b>		Discuss the homoeopathic therapeutics for intussusception	C/1	MK				
Hom UG-Sur-II- 2.26	<b>KS</b>	<b>K</b>	Peutz-Jeghers syndrome	Describe Peutz-Jeghers syndrome	C/2	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II- 2.27	<b>KS</b>	<b>K</b>	Carcinoid tumour	Describe Carcinoid tumour	C/2	DK	Lecture	Viva	SAQ	
Hom UG-Sur-	<b>KS</b>	<b>K</b>	Small bowel malignancy	Classify small intestinal	C/1	MK	Lecture Small group	Viva	MCQ SAQ	

# AIM Homoeopathy

II- 2.28		<b>K</b>		malignancies Describe the epidemiology, including incidence and risk factors	C/1	MK	discussion Audiovisual aid Case based discussion		LAQ	
		<b>K</b>		Explain the pathophysiology of malignant tumours in the small intestine including tumour progression and metastasis	C/1	MK				
		<b>KH</b>		Discuss the clinical features of small intestine malignancies	C/2	MK				
		<b>KH</b>		Discuss diagnostic approaches, including imaging (CT, MRI, PET), endoscopy, and biopsy in small bowel malignancies	C/2	DK				
		<b>KH</b>		Describe complications	C/2	DK				

# AIM Homoeopathy

		<b>KH</b>		associated with malignant tumours of the small intestine  Discuss prognostic factors in small bowel malignancies  Outline the treatment options, including surgery in small bowel malignancies	C/2	DK				
Hom UG-Sur-II- 2.29	<b>KS</b>	<b>K</b>	Intestinal polyposis	Define intestinal polyposis and classify its types (Inflammatory, Metaplastic, Hamartomatous, Neoplastic)  Describe the epidemiology and risk factors of intestinal polyposis, including genetic conditions  Describe the	C/1	MK	Lecture Small group discussion Audiovisual aid Case based discussion	Viva	MCQ SAQ LAQ OSCE on history-taking and symptom analysis	Practice of medicine Materia Medica

# AIM Homoeopathy

		<b>KH</b>		clinical features of intestinal polyposis							
		<b>KH</b>		Discuss the diagnostic approaches, including colonoscopy, biopsy, and imaging techniques in intestinal polyposis	C/2	DK					
		<b>KH</b>		Outline the management strategies in intestinal polyposis	C/2	NK					
		<b>KH</b>		Describe the complications of untreated intestinal polyposis	C/2	NK					
		<b>K</b>		Discuss the therapeutics for intestinal polyposis	C/2	MK					
Hom UG-Sur-II- 2.30	<b>KS</b>	<b>K</b>	Large intestinal malignancy	Describe the epidemiology and risk factors of	C/1	MK	Lecture Small group discussion	Viva	MCQ SAQ LAQ	Practice of medicine Materia	

# AIM Homoeopathy

		<b>K</b>		large intestinal malignancies  Explain the pathology of large intestinal malignancy	C/1	MK	Audiovisual aid Case based discussion		OSCE on history-taking and symptom analysis, patient education and screening	Medica
		<b>KH</b>		Discuss the clinical features such as altered bowel habits, rectal bleeding, abdominal pain, and anaemia in colon cancer	C/2	MK				
		<b>KH</b>		Discuss diagnostic approaches of colon cancer including imaging studies and biopsy	C/2	DK				
		<b>KH</b>		Describe the staging systems (e.g., TNM) and their importance in prognosis and management large intestinal malignancy	C/3	NK				
		<b>KH</b>		Discuss complications of	C/2	NK				

# AIM Homoeopathy

		<b>KH</b>		large intestinal malignancy such as obstruction, perforation, and metastasis  Outline treatment modalities, including surgery for malignancies of large intestine	C/2	NK				
		<b>KH</b>		Explain preventive measures, including screening protocols (e.g., colonoscopy, faecal occult blood testing) for malignancies of large intestine	C/2	NK				
	<b>HO</b>	<b>K</b>		Discuss the homoeopathic therapeutics for large intestinal malignancies	C/1	MK				
Hom UG-Sur-II- 2.31	<b>KS</b>	<b>K</b>	Intestinal diverticula	Define intestinal diverticula and classify them	C/1	MK	Lecture Small group discussion	Viva	MCQ SAQ LAQ	Practice of medicine

# AIM Homoeopathy

		<b>K</b>		Describe the epidemiology and risk factors for diverticula	C/2	MK	Audiovisual aid Case based discussion		OSCE on history-taking and symptom analysis, patient education and diagnostic interpretations	
		<b>KH</b>		Explain the pathophysiology of diverticula formation and complications like diverticulitis and perforation	C/2	DK				
		<b>KH</b>		Discuss the clinical presentation and complications of diverticulitis, including abscess, fistula, and obstruction	C/2	MK				
		<b>KH</b>		Explain diagnostic approaches, including CT scan, colonoscopy, and contrast studies in detecting diverticula	C/2	DK				
		<b>KH</b>		Outline	C/2	NK				

# AIM Homoeopathy

		<b>KH</b>		management of uncomplicated diverticula  Describe surgical management of complicated diverticulitis	C/2	NK				
		<b>KH</b>		Discuss preventive strategies for diverticular disease, including lifestyle modifications and dietary recommendations	C/2	NK				
Hom UG-Sur-II- 2.32	<b>KS</b>	<b>K</b>	Meckel's diverticulum	Describe Meckel's diverticulum	C/1	DK	Lecture Audiovisual aid	Viva	SAQ	
Hom UG-Sur-II- 2.33	<b>KS</b>	<b>K</b>	Colostomy /Ileostomy	Define colostomy and describe its types (e.g., loop, end, and double-barrel colostomy)  Explain indications for colostomy  Describe the surgical techniques for creating	C/1  C/2  C/2	DK  NK  NK	Lecture Audiovisual aids  Small group discussion  Clinical case scenarios and demonstration  Skill lab simulation	Viva	SAQ	

# AIM Homoeopathy

		<b>KH</b>		colostomy and stomas  Discuss the complications of colostomy and stomas	C/3	NK				
	<b>PC/KS</b>	<b>KH</b>		Discuss the role of follow-up care and rehabilitation in colostomy patients	C/2	NK				
	<b>PC/KS</b>	<b>KH</b>		Outline post-operative care, including stoma care, appliance management, and infection prevention	C/3	NK				
Hom UG-Sur-II- 2.34	<b>PC/KS</b>	<b>K</b>	Barium enema	Understand the indications for performing a barium enema in gastrointestinal (GI) disorders  Explain the	C/1	MK	Small group discussion Lecture Image interpretations Audiovisual aids Case based	Spot test image interpretation	SAQ OSCE	Radiology

# AIM Homoeopathy

		<b>KH</b>		contraindications, risks, and complications of a barium enema  Demonstrate knowledge of preparation protocols for patients undergoing a barium enema	C/2	DK	learning			
		<b>KH</b>		Describe the step-by-step procedure of a barium enema, including equipment and contrast medium used	C/2	DK				
		<b>KH</b>		Identify normal and abnormal findings on a barium enema, including strictures, polyps, diverticula, volvulus, and malignancies	C/2	MK				
Hom UG-Sur- II- 2.35	<b>KS</b>	<b>K</b>	Intestinal obstruction	Define intestinal obstruction and classify it (e.g., mechanical vs. functional	C/1	MK	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ LAQ OSCE on diagnostic	

# AIM Homoeopathy

		<b>K</b>		obstruction)  Describe the common causes of intestinal obstruction (e.g., adhesions, hernias, tumours, volvulus, intussusception)	C/2	MK	Clinical case scenarios Image interpretation sessions		interpretation	
		<b>K</b>		Explain the pathophysiology of intestinal obstruction, including the consequences of bowel ischemia and perforation	C/2	MK				
		<b>KH</b>		Discuss the clinical features of intestinal obstruction	C/2	MK				
		<b>KH</b>		Describe the signs of strangulated obstruction and its urgency	C/2	MK				
		<b>KH</b>		Discuss the role of imaging (e.g.,	C/2	DK				

# AIM Homoeopathy

		<b>KH</b>		X-ray, ultrasound, CT scan) in diagnosing intestinal obstruction  Outline the initial management of intestinal obstruction, including resuscitation and decompression	C/2	MK				
		<b>KH</b>		Describe the indications for surgical intervention in intestinal obstruction	C/3	NK				
	<b>HO</b>	<b>K</b>		Discuss the homoeopathic treatment for intestinal obstruction	C/2	MK				
Hom UG-Sur-II- 2.36	<b>KS</b>	<b>K</b>	Volvulus	Define Volvulus and classify its types (Volvulus of small intestine, Caecal Volvulus, Sigmoid volvulus)	C/1	MK	Lecture Small group discussion	Viva	MCQ SAQ	
		<b>KH</b>		Describe the	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		clinical features of volvulus  Discuss the role of imaging techniques (e.g., abdominal X-ray, CT scan, contrast enema) in diagnosing volvulus	C/2	DK				
		<b>KH</b>		Explain the management of volvulus	C/2	Nice to know				
Hom UG-Sur-II- 2.37	<b>KS</b>	<b>K</b>	Paralytic ileus	Describe paralytic ileus, its causes clinical features and management	C/2	MK	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-II-2.38	<b>KS</b>	<b>K</b>	Hirschsprung 's disease	Describe Hirschsprung's disease	C/2	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II- 2.39	<b>KS</b>	<b>K</b>	Abdominal tuberculosis	Describe the pathophysiology of abdominal TB, including its spread and effects on various organs  Explain the clinical features of abdominal tuberculosis  Discuss the role	C/2	MK	Lecture Small group discussion Audiovisual aids	Viva	MCQ SAQ	Practice of Medicine Pathology Materia Medica Repertory
		<b>KH</b>			C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		of laboratory investigations in diagnosing abdominal TB  Explain the imaging modalities used in abdominal TB diagnosis and management  Discuss the homoeopathic therapeutics for abdominal tuberculosis	C/2  C/2  C/1	DK  NK  MK				
Hom UG-Sur-II- 2.40	<b>KS</b>	<b>K</b>	Appendicitis	Describe the epidemiology and aetiology of appendicitis  Explain the pathology of appendicitis, including inflammation, infection, and perforation  Describe the clinical features of appendicitis  Describe the	C/1  C/2  C/2  C/2	MK  MK  MK  MK	Lecture Audiovisual aids Small group discussion Clinical case scenarios Bedside demonstration DOPS	Viva	MCQ SAQ LAQ OSCE on clinical examination skills	Materia Medica Repertory

# AIM Homoeopathy

				clinical examination findings in appendicitis and signs to elicit in appendicitis (Pointing sign, Rovsing's sign, Psoas sign, Obturator sign)							
	<b>SH</b>			Perform clinical examinations to identify signs of appendicitis	P/2	MK					
	<b>KH</b>			Discuss the role of laboratory tests and imaging (ultrasound) in diagnosing appendicitis	C/2	MK					
	<b>KH</b>			Discuss the differential diagnoses for right iliac fossa pain	C/3	MK					
	<b>KH</b>			Describe the indications and techniques for surgical intervention in appendicitis	C/3	NK					

# AIM Homoeopathy

	<b>HO</b>	<b>KH</b>		Recognize complications of appendicitis  Discuss the scope of homoeopathic treatment in appendicitis with relevant therapeutics	C/2  C/2	MK  MK				
Hom UG-Sur-II- 2.41	<b>KS/PC</b>	<b>K</b>  <b>KH</b>  <b>SH</b>	Clinical examination - Acute abdomen	Define acute abdomen and describe its causes  Understand the pathophysiology of pain in acute abdomen, including visceral and somatic pain  Take a detailed history, focusing on pain characteristics, associated symptoms, and relevant medical history  Perform a thorough physical	C/1  C/2  P/1  P/2	MK  MK  MK  MK	Small group discussion Bedside teaching and demonstration DOPS session Case based discussion Image interpretation sessions	Viva Clinical examination skills	SAQ LAQ OSCE on abdominal examination	

# AIM Homoeopathy

		<b>SH</b>		examination, including inspection, palpation, percussion, and auscultation of the abdomen							
		<b>KH</b>		Recognize key clinical signs, including rebound tenderness, guarding, Murphy's sign, and Rovsing's sign	P/3	<b>MK</b>					
		<b>KH</b>		Formulate a differential diagnosis for acute abdomen based on clinical findings	C/3	<b>MK</b>					
		<b>KH</b>		Discuss the role of laboratory tests in evaluating acute abdomen	C/3	<b>DK</b>					
		<b>KH</b>		Describe the indications and interpretation of imaging studies (e.g., X-ray, ultrasound, CT	C/3	<b>DK</b>					

# AIM Homoeopathy

		<b>KH</b>		scan) in acute abdomen Recognize red flags and indications for surgical intervention in cases of acute abdomen	C/3	NK				
Hom UG-Sur-II-2.42	<b>KS/PC</b>	<b>K</b>  <b>KH</b>  <b>SH</b>	Examination of chronic abdomen	Define chronic abdominal conditions and describe their common causes  Obtain a comprehensive history for chronic abdominal conditions, including pain characteristics, duration, and associated symptoms  Perform a detailed abdominal examination, including inspection, palpation,	C/1  C/2  P/2	MK  MK  MK	Lecture Bedside teaching and demonstration DOPS Case discussions Audiovisual aids Image interpretations	Viva Clinical examination feedback	MCQ OSCE on abdominal examination Bedside viva	

# AIM Homoeopathy

		<b>SH</b>		percussion, and auscultation with a focus on chronic conditions							
		<b>KH</b>		Identify and interpret specific signs associated with chronic abdominal conditions (e.g., organomegaly, abdominal masses, ascites)	P/3	MK					
		<b>KH</b>		Formulate differential diagnoses for chronic abdominal pain based on clinical findings	C/3	MK					
		<b>KH</b>		Discuss the role of laboratory investigations (e.g., liver function tests, kidney function tests, haematological parameters) in chronic abdominal	C/2	DK					

# AIM Homoeopathy

		<b>KH</b>		conditions Describe imaging modalities (e.g., ultrasound, CT scan, MRI) used in evaluating chronic abdominal conditions and their indications	C/2	DK				
		<b>KH</b>		Explain the importance of endoscopic evaluations (e.g., upper GI endoscopy, colonoscopy) in chronic abdominal conditions	C/2	NK				
Hom UG-Sur-II- 2.43	<b>PC/KS</b>	<b>K</b>	Examination of abdominal lump	List common causes of abdominal lumps  Describe the anatomy relevant to abdominal lump examination (e.g., quadrants, planes, landmarks)	C/1  C/1	MK  MK	Lecture Bedside teaching and demonstration DOPS Case discussions Audiovisual aids Image interpretations	Viva Clinical examination feedback	MCQ OSCE on abdominal examination Bedside viva	

# AIM Homoeopathy

		<b>K</b>		Classify abdominal lumps based on location and underlying pathology	C/2	MK					
		<b>SH</b>		Perform a systematic clinical examination of an abdominal lump	P/2	MK					
		<b>KH</b>		Distinguish between intra-abdominal and abdominal wall lumps	C/2	MK					
		<b>KH</b>		Identify features suggestive of malignancy in abdominal lump	C/2	MK					
		<b>KH</b>		Discuss the role of imaging modalities in evaluating abdominal lumps	C/2	DK					
		<b>KH</b>		Explain the laboratory investigations for abdominal lumps	C/2	DK					
		<b>KH</b>		Formulate a differential	C/2	MK					

# AIM Homoeopathy

				diagnosis of abdominal lumps based on their location in specific quadrants of abdomen and other clinical findings						
Hom UG-Sur-II- 2.44	KS	K	Diseases of rectum & Anal Canal-Anatomy of rectum and anal canal-Structural components and vascular supply	Describe vascular and lymphatic supply of rectum and anal canal  Explain anatomical relationships with surrounding structures	C/1  C/1	MK  MK	Lecture, Diagrams, Audiovisual aids	Viva	MCQ	Anatomy
Hom UG-Sur-II- 2.45	KS	KH	Diseases of rectum & Anal Canal-Investigation : Proctoscopy, biopsy	Identify methods for rectal examination (e.g., DRE, proctoscopy).  Explain examination techniques such as proctoscopy and anoscopy.	C/1  C/2	MK  MK	Lecture, Demonstration, Simulation	OSCE, Clinical Case Study	OSCE	
Hom UG-Sur-II- 2.46	KS	KH	Diseases of rectum & Anal Canal-Investigation -Proctoscopy	Discuss the indications and contraindications Proctoscopy	C/2	MK	Demonstration, Simulation	OSCE, Clinical Case Study	OSCE	

# AIM Homoeopathy

Hom UG-Sur-II- 2.47	PBL/PC	SH K	Examination: Rectum and anal canal	Conduct thorough examination of rectum and anal canal  Relate findings to rectal diseases	P/2  C/2	MK  MK	Case-Based Learning Case Demonstration DOPS	Viva, OSCE	SAQ, OSCE	
Hom UG-Sur-II- 2.48	HO	K	Homeopathic therapeutics-Ano-rectal diseases	Homeopathic therapeutics for presenting conditions of common Ano-rectal diseases	C/1	MK	Lectures, case studies	Viva	MCQs, SAQ, LAQ	
Hom UG-Sur-II- 2.49	KS	K KH	Fissure in Ano	Discuss etiopathogenesis and clinical features  Explain non-surgical and surgical treatments.	C/2  C/2	MK  NK	Problem-Based Learning	Viva	SAQ, LAQ	
Hom UG-Sur-II- 2.50	KS	K K	Piles/ Haemorrhoids	Explain vascular anatomy of hemorrhoidal plexus  Differentiate internal vs external haemorrhoids	C/1  C/2	MK  MK	Lectures, Diagrams, Audiovisual aids	Viva	MCQ, SAQ	

# AIM Homoeopathy

		KH		Describe the etiopathogenesis, clinical features & management.	C/2	MK				
Hom UG-Sur-II- 2.51	PC/KS	K	Piles/ Haemorrhoids	Discuss interventions (banding, sclerotherapy)	C/2	NK	Lectures, Diagrams, Audiovisual aids	Viva	MCQ, SAQ	
Hom UG-Sur-II- 2.52	KS	K	Pruritus Ani	Identify causes such as infections, irritants, or systemic diseases	C/2	DK	Small Group Discussion	Viva	SAQ	
Hom UG-Sur-II- 2.53	PC	K	Pruritus Ani	- Explain diagnostic approaches and management strategies	C/2	DK	Small Group Discussion	Viva	SAQ	
Hom UG-Sur-II- 2.54	KS	K	Prolapse of Rectum	Classify rectal prolapse (partial vs complete)	C/2	MK	Lectures, Audio-visual aids	Viva	MCQ, SAQ	Anatomy
Hom UG-Sur-II- 2.55	PC	K	Prolapse of Rectum	Discuss surgical and non-surgical management options	C/2	DK	Lectures, Case Discussions	Viva	SAQ, Clinical Case Study	
Hom UG-Sur-II- 2.56	KS	K	Fistula in Ano	Discuss causes and clinical features of fistula in ano	C/2	MK	Lectures, Case discussions	Viva,	MCQ, SAQ	
Hom UG-Sur-II- 2.57	KS	K	Fistula in Ano	Explain diagnostic approaches and management strategies	C/2	MK	Problem-Based Learning	Viva	SAQ	Radiology
Hom	KS	K	Ano-rectal	Discuss	C/1	MK	Lecture, Case-	Viva	SAQ	

# AIM Homoeopathy

UG-Sur-II- 2.58			Abscess	etiology, pathogenesis and clinical features  Relate lymphatic drainage to abscess spread	C/2	DK	Based Learning			
Hom UG-Sur-II- 2.59	PC	KH	Ano-rectal Abscess	Describe surgical drainage and post-operative care	C/2	DK	Simulation, Case-Based Learning	Viva	SAQ	

## Topic: Hom UG-Sur-II-3. Diseases of Liver, Gallbladder, Bile duct, Pancreas, Spleen

Sl No	Competency	Miller	Content	SLO	Bloom/Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II-3.1	KS	K	Anatomy of liver	Describe the gross anatomy of the liver, including its lobes, surfaces, and segments	C/1	MK	Audiovisual aids Small group discussion	Viva	MCQ	Anatomy
Hom UG-Sur-II-3.2	KS	K	Anatomy of liver	Explain the blood supply to the liver, including the hepatic artery, portal vein, and hepatic veins	C/1	MK	Audiovisual aids Small group discussion	Viva	MCQ	Anatomy
Hom UG-Sur-II-3.3	KS	K	Anatomy of liver	interpret anatomical relationships of the liver with surrounding structures (e.g., diaphragm, gallbladder, stomach, pancreas)	C/1	MK	Audiovisual aids Small group discussion Anatomical model demonstration	Viva	MCQ	Anatomy

# AIM Homoeopathy

Hom UG- Sur- II-3.4	<b>KS</b>	<b>K</b>	Acute and Chronic liver insufficiency / Acute liver failure & Chronic liver failure	Define liver insufficiency and distinguish between acute and chronic liver insufficiency  Describe the pathophysiology of Liver insufficiency	C/2	MK	Lecture Audiovisual aids Small group discussion Assignments	Viva	MCQ SAQ LAQ	
		<b>KH</b>		Interpret diagnostic tests (e.g., liver function tests, coagulation profile, imaging) used to assess liver insufficiency	C/2	MK				
		<b>KH</b>		Discuss complications of liver insufficiency, such as hepatic encephalopathy, variceal bleeding, and hepatorenal syndrome	C/2	MK				
	<b>HO</b>	<b>KH</b>		Discuss the Homoeopathic therapeutics for liver insufficiency	C/1	MK				
Hom UG- Sur-	<b>KS</b>	<b>KH</b>	Diseases of liver – imaging of	Explain the role of ultrasound in liver diseases, particularly for	C/2	DK	Lecture Small group discussion	Viva	MCQ SAQ OSCE	Radiology

# AIM Homoeopathy

II-3.5			the liver	<p>detecting liver masses, fatty liver, and ascites</p> <p>Explain the role of CT and MRI in diagnosing liver pathologies, such as tumours, cirrhosis, and vascular abnormalities</p> <p>Interpret imaging findings from liver CT and MRI scans, including tumours, cysts, and vascular structures</p> <p>Explain the technique, indications, and complications of ERCP (Endoscopic Retrograde Cholangiopancreatography) and PTC (Percutaneous Transhepatic Cholangiography)</p> <p>Describe the role of angiography in liver diseases, particularly in assessing and managing hepatic artery and portal vein disorders</p>	C/2  P/1  C/2  C/2	NK  DK  DK  NK	Audiovisual aids Case based imaging studies		
Hom UG-Sur-II-3.6	<b>KS</b>	<b>K</b>	Diseases of liver – liver trauma	Understand the types of liver trauma, including blunt and penetrating injuries, and their	C/1	MK	Lecture Small group discussion Simulation	Viva Clinical skill assessment	MCQ SAQ OSCE

# AIM Homoeopathy

		<b>KH</b>		common causes (e.g., motor vehicle accidents, stab wounds)  Explain the clinical signs and symptoms of liver trauma	C/2	MK	based learning Case based discussions	using trauma scenarios		
		<b>KH</b>		Interpret imaging modalities used in liver trauma, including Focused Assessment with Sonography for Trauma, CT scan, and angiography	C/3	NK				
		<b>KH</b>		Discuss the management of liver trauma	C/2	NK				
Hom UG-Sur-II-3.7	<b>KS</b>	<b>K</b>	Diseases of Liver- Portal hypertension and oesophageal varices	Define portal hypertension and oesophageal varices, and describe their common aetiologies  Explain the pathophysiology of portal hypertension and how it leads to oesophageal varices formation  Describe the clinical signs and symptoms related to	C/1  C/2  C/2	MK  DK  MK	Lecture Small group discussion Audiovisual aids	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

		<b>KH</b>		portal hypertension  Explain the role of diagnostic modalities in detecting oesophageal varices, including endoscopy, Doppler ultrasound, and cross-sectional imaging  Describe the management of variceal bleeding	C/2  C/2	DK  NK				
Hom UG-Sur-II-3.8	<b>KS</b>	<b>K</b>	Diseases of Liver-Budd-Chiari Syndrome	Describe Budd-chiari syndrome	C/1	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II-3.9	<b>KS</b>	<b>K</b>	Diseases of Liver-Caroli's disease	Describe Caroli's disease	C/1	NK	Lecture	Viva	SAQ	
HO M UG-SUR-II-3.10	<b>KS</b>	<b>K</b>	Diseases of Liver- Benign liver tumours	Understand the classification of benign liver tumours (e.g., haemangioma, focal nodular hyperplasia [FNH], hepatic adenoma)  Recognize the clinical features of benign liver tumours, including asymptomatic	C/1  C/2	MK  MK	Lecture Audiovisual aids Small group discussion Hands-on imaging interpretation Case based discussions	Viva	MCQ SAQ LAQ OSCE	

# AIM Homoeopathy

		<b>KH</b>		presentations, right upper quadrant pain, hepatomegaly etc  Interpret imaging findings (ultrasound, CT, MRI) and differentiate benign liver tumours based on radiological characteristics (e.g., haemangioma with peripheral enhancement)	C/2	DK				
Hom UG- Sur- II- 3.11	<b>KS</b>	<b>K</b>  <b>KH</b>	Diseases of liver- Hepatocellular carcinoma (HCC)	Define hepatocellular carcinoma (Primary liver cancer)  Explain the risk factors for HCC, such as chronic hepatitis B and C infections, cirrhosis, alcohol use, aflatoxin exposure, and non-alcoholic fatty liver disease (NAFLD)  Explain the clinical features of HCC  Interpret diagnostic investigations for HCC, including liver function tests, alpha-fetoprotein	C/1  C/2  C/2  C/3	MK  MK  MK  DK	Lecture Audiovisual aid Small group discussion Clinical case presentations	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

				(AFP), ultrasound, CT, MRI, and liver biopsy findings						
Hom UG-Sur-II-3.12	<b>KS</b>	<b>K</b>	Diseases of liver- Sclerosing Cholangitis	Describe primary sclerosing cholangitis	C/1	DK	Lecture	Viva	MCQ SAQ	
Hom UG-Sur-II-3.13	<b>KS</b>	<b>K</b>	Diseases of liver- Pyogenic liver abscess	Explain the pathophysiology of pyogenic liver abscess, including the routes of bacterial spread	C/1	MK	Lecture Audiovisual aids Bedside teaching	Viva	MCQ SAQ	
		<b>KH</b>		Discuss the clinical presentation of pyogenic liver abscess	C/2	MK				
		<b>KH</b>		Explain the diagnostic approach for pyogenic liver abscess including imaging techniques and laboratory tests	C/1	DK				
		<b>KH</b>		Explain the indications for percutaneous drainage, surgical intervention, and conservative management in the treatment of pyogenic liver abscess	C/2	NK				
		<b>KH</b>		Discuss the potential complications of pyogenic	C/2	DK				

# AIM Homoeopathy

	<b>HO</b>	<b>K</b>		liver abscess  Discuss the homoeopathic therapeutics for liver abscess	C/1	MK				
Hom UG- Sur- II- 3.14	<b>KS</b>	<b>K</b>	Diseases of liver- Amoebic liver abscess	Discuss the epidemiology of amoebic liver abscess, including geographic distribution, transmission routes, and risk factors	C/2	MK	Lecture Audiovisual aids Small group discussion Integrated seminar	Viva	MCQ SAQ	Pathology
		<b>KH</b>		Describe the clinical features of amoebic liver abscess	C/2	MK				
		<b>KH</b>		Explain the diagnostic criteria for amoebic liver abscess, including laboratory investigations and imaging techniques	C/2	DK				
		<b>KH</b>		Compare the differential diagnosis of amoebic liver abscess with other liver diseases (e.g., pyogenic liver abscess, hydatid cyst)	C/2	MK				
		<b>KH</b>		Explain the role of drainage procedures in the management of amoebic liver	C/2	NK				

# AIM Homoeopathy

		<b>KH</b>		Discuss potential complications of untreated amoebic liver abscess, such as rupture, peritonitis, and pleuropulmonary involvement	C/2	DK				
Hom UG-Sur-II-3.15	<b>KS</b>	<b>KH</b>	Diseases of liver- Hydatid liver disease	Describe Hydatid liver disease	C/2	DK	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-II-3.16	<b>KS</b>	<b>K</b> <b>KH</b>	Diseases of liver- Hepatomegaly	List the common causes of hepatomegaly  Compare and contrast benign causes of hepatomegaly (e.g., simple hepatic cysts) with malignant causes (e.g., hepatocellular carcinoma, metastases)	C/1  C/2	MK  MK	Lecture Small group discussion Case based learning	Viva	SAQ	
Hom UG-Sur-II-3.17	<b>PBL</b>	<b>K</b> <b>KH</b>	Examination of liver	Identify the anatomical location of the liver and its surface markings  Describe the steps in the physical examination of the liver, including inspection, palpation,	C/1  C/2	MK  MK	Lecture Demonstration Bedside clinical examination DOPS	Bedside clinical examination and feedback	Evaluation of bedside clinical skills	

# AIM Homoeopathy

		<b>SH</b>		percussion, and auscultation	P/2	MK				
		<b>KH</b>		Perform palpation of the liver to assess for liver size, tenderness, and surface texture	C/2	MK				
				Correlate liver examination findings with potential liver diseases	C/3	MK				
Hom UG-Sur-II-3.18	<b>KS</b>	<b>KH</b>	Diseases of liver- Hydatid liver disease	Describe Hydatid live disease	C/2	DK	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-II-3.19	<b>KS</b>	<b>K</b>	Diseases of Gallbladder and bile duct- Investigations for Gallbladder and biliary system diseases	Describe the basic anatomy and physiology of the gallbladder and biliary system	C/1	MK	Lecture Audiovisual aids Radiology workshop Case based discussion	Viva	SAQ Image interpretation	Radiology
		<b>K</b>		Explain the indications for imaging studies in suspected gallbladder and biliary disease	C/1	MK				
		<b>K</b>		Explain the role of liver function tests (LFTs) in assessing biliary obstruction and	C/1	DK				

# AIM Homoeopathy

		<b>K</b>		differentiating between hepatic and post-hepatic causes of jaundice  Explain the role of ERCP (Endoscopic Retrograde Cholangiopancreatography) and MRCP (Magnetic Resonance Cholangiopancreatography) in diagnosing and managing biliary obstruction	C/2	NK				
Hom UG-Sur-II-3.20	<b>KS</b>	<b>K</b>	Gallbladder and biliary system diseases- Gallstone	Define gallstones and describe the types (cholesterol stones, pigment stones, mixed stones) and their composition  Describe the risk factors for gallstone formation  Identify the clinical features of gallstones, such as biliary colic, jaundice, and nausea	C/1  C/1  C/2	MK  MK  MK	Lecture Audiovisual aids  Viva			
Hom UG-Sur-II-3.21	<b>KS</b>	<b>KH</b>	Gallbladder and biliary system diseases- Cholecystitis	Describe the aetiology of cholecystitis, including gallstone-related and acalculous	C/2	MK	Lecture Audiovisual aids Demonstration Simulation-	Viva Feedback on counseling skills	MCQ SAQ	Materia medica Repertory

# AIM Homoeopathy

		<b>K</b>		Identify and describe clinical features of acute and chronic cholecystitis, including right hypochondrium pain, fever, jaundice, and Murphy's sign	C/2	MK	based learning				
<b>PBL</b>	<b>SH</b>			Perform a clinical examination in suspected cholecystitis, focusing on abdominal examination and assessing Murphy's sign	P/2	MK					
		<b>KH</b>		Describe the diagnostic approach in cholecystitis, including lab tests (CBC, LFTs) and imaging (ultrasound as first-line modality)	C/1	DK					
<b>KS</b>	<b>KH</b>			Outline the management of chronic cholecystitis, including elective cholecystectomy and lifestyle modifications	C/2	NK					
		<b>KH</b>		Describe potential complications of cholecystitis, such as gangrene, perforation, and biliary peritonitis	C/2	DK					

# AIM Homoeopathy

	<b>HO</b>	<b>KH</b>		Counsel patients on lifestyle modifications and postoperative care following cholecystectomy for chronic cholecystitis  Discuss the Homoeopathic therapeutics for Cholecystitis	C/2  C/1	NK  MK				
Hom UG-Sur-II-3.22	<b>KS</b>	<b>K</b>  <b>K</b>  <b>KH</b>	Diseases of gallbladder and bile duct	Define choledocholithiasis and describe its types (primary vs. secondary stones) and composition  Explain the aetiology and risk factors for choledocholithiasis, including gallstones, infections, and bile stasis  Identify the clinical manifestations of bile duct stones, such as biliary	C/1  C/1  C/2	MK  MK  MK	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ	

# AIM Homoeopathy

		<b>K</b>		colic, jaundice, and fever (Charcot's triad)							
		<b>K</b>		Explain the diagnostic approach in choledocholithiasis, including laboratory tests (LFTs) and initial imaging (ultrasound)	C/2	DK					
		<b>K</b>		Describe advanced imaging options like MRCP and ERCP for choledocholithiasis, and their indications in complex cases	C/3	NK					
		<b>K</b>		Describe the complications of choledocholithiasis	C/2	DK					
Hom UG-Sur-II-3.23	<b>KS</b>	<b>K</b>	Diseases of Gallbladder and bile duct	Describe the causes and risk factors for biliary strictures	C/1	MK	Lecture Audiovisual aid	Viva	MCQ SAQ		
		<b>K</b>		Explain the pathophysiology of biliary strictures and their effect on bile flow and liver function	C/2	DK					
		<b>KH</b>		Describe the clinical	C/2	MK					

# AIM Homoeopathy

		<b>K</b>		manifestations of biliary strictures  Explain the role of advanced imaging modalities like MRCP and ERCP in evaluating and diagnosing biliary strictures	C/2	DK				
		<b>K</b>		Discuss the therapeutic role of ERCP in biliary strictures, including stricture dilation and stent placement  Describe complications of untreated biliary strictures, such as cholangitis, liver abscess, and secondary biliary cirrhosis	C/2	NK				
		<b>KH</b>			C/2	DK				
Hom UG-Sur-II-3.24	<b>KS</b>	<b>K</b>	Diseases of gallbladder and bile duct – Surgical jaundice	Define surgical jaundice  Describe the causes of surgical jaundice  Explain the pathophysiology of surgical jaundice, focusing on obstruction and cholestasis	C/1  C/1  C/1	MK  MK  MK	Lecture Audiovisual aids Small group discussion Clinical discussion	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

		<b>KH</b>		Identify the clinical manifestations of surgical jaundice, including jaundice, pruritus, abdominal pain, and fever (in cases of cholangitis)	C/2	MK				
		<b>KH</b>		Describe <b>Courvoisier's Law</b> and explain its significance in differentiating causes of surgical jaundice, specifically between malignant and benign causes of bile duct obstruction	C/2	MK				
		<b>KH</b>		Describe the diagnostic workup, including liver function tests and basic imaging (ultrasound), and explain the role of advanced imaging like MRCP and CT in assessing biliary strictures and tumours in surgical jaundice	C/2	DK				
		<b>KH</b>		Describe complications of untreated surgical jaundice	C/2	DK				
Hom UG-Sur-II-	<b>KS</b>	<b>K</b>	Diseases of gallbladder and bile duct – Carcinoma	Describe the risk factors for gallbladder cancer, including gallstones, chronic inflammation, and	C/1	MK	Lecture Audiovisual aids Small group	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

3.25			of gallbladder	lifestyle factors  Explain the pathophysiology of gallbladder carcinoma and the stages of progression	C/2	MK	discussion			
		<b>K</b>		Describe the clinical manifestations of CA gallbladder	C/2	MK				
		<b>KH</b>		Describe initial diagnostic workup, including liver function tests and tumour markers	C/2	DK				
		<b>KH</b>		Explain the role of advanced imaging (USG, CT, MRI, MRCP, PET) in assessing tumour stage, spread, of the Gallbladder carcinoma	C/2	NK				
		<b>K</b>		Outline the TNM staging system for gallbladder carcinoma and its clinical significance	C/2	DK				
		<b>KH</b>		Recognize the complications and prognosis of gallbladder carcinoma	C/2	NK				

# AIM Homoeopathy

	<b>HO</b>	<b>K</b>		Discuss the Homoeopathic therapeutics for Carcinoma of gallbladder	C/1	MK				
Hom UG-Sur-II-3.26	<b>KS</b>	<b>K</b>	Surgical diseases of spleen – Splenomegaly	<p>Describe the anatomy and physiology of the spleen relevant to splenomegaly</p> <p>List the causes of splenomegaly</p>	C/1	MK	<p>Lecture</p> <p>Audiovisual aids</p> <p>Small group discussion</p> <p>Demonstration</p> <p>Simulation-based learning</p>	Viva	LAQ	Practice of Medicine
		<b>K</b>		<p>Discuss the clinical manifestations and symptoms associated with splenomegaly, such as fullness, pain, and hypersplenism signs</p> <p>Describe the initial diagnostic workup, including CBC, liver function tests, and imaging (ultrasound, CT)</p>	C/1	MK				
		<b>KH</b>		<p>Explain the role of advanced diagnostic tools like bone marrow biopsy, splenic biopsy, and MRI for further evaluation</p> <p>Perform a physical</p>	C/2	MK				
		<b>KH</b>			C/2	DK				
		<b>KH</b>			C/2	NK				

# AIM Homoeopathy

	<b>PBL</b>  <b>HO</b>	<b>SH</b>  <b>K</b>		examination of the abdomen, focusing on palpating and percussing an enlarged spleen  Discuss the therapeutics for Splenomegaly	P/2  C/1	MK  MK				
Hom UG-Sur-II-3.27	<b>KS</b>	<b>K</b>  <b>K</b>  <b>KH</b>  <b>KH</b>	Diseases of spleen- Splenic artery aneurysm	List risk factors for splenic artery aneurysms  Describe common clinical manifestations of splenic artery aneurysms  Explain the diagnostic approach for splenic artery aneurysms  Discuss the surgical and non-surgical management of splenic artery aneurysm	C/1  C/1  C/2  C/2	DK  DK  NK  NK	Lecture Audiovisual aids	Viva	MCQ SAQ	
Hom UG-Sur-II-3.28	<b>KS</b>	<b>K</b>  <b>K</b>  <b>KH</b>	Diseases of spleen- Splenic infarction	List common causes and risk factors of splenic infarction  Describe the clinical signs and symptoms associated with splenic infarction  Describe diagnostic	C/1  C/2  C/2	DK  DK  NK	Lecture Audiovisual aids	Viva	MCQ SAQ	

# AIM Homoeopathy

		<b>KH</b>		approaches, including lab tests and imaging techniques in splenic infarction  Discuss the surgical indications in splenic infarction	C/1	NK				
Hom UG- Sur- II- 3.29	<b>KS</b>	<b>K</b>	Diseases of spleen – splenic abscess	<p>List the common causes and risk factors for splenic abscess, including infections, trauma, and immunocompromised states</p> <p>Describe the pathophysiology of abscess formation in the spleen</p> <p>Identify clinical manifestations of splenic abscess, including fever, left upper quadrant pain, and systemic symptoms</p> <p>Discuss the role of laboratory investigations and imaging modalities used in the diagnosis of splenic abscess</p>	C/1	MK	<p>Lecture Audiovisual aids Small group discussion</p>	Viva	MCQ SAQ	

# AIM Homoeopathy

		<b>KH</b>		Discuss the management of splenic abscess including indications of surgical indications  Identify complications of splenic abscess, including rupture, sepsis, and fistula formation	C/2  C/2	NK  NK				
Hom UG-Sur-II-3.30	<b>HO</b>	<b>K</b>	Diseases of spleen – Homoeopathic therapeutics for diseases of spleen	Discuss the homoeopathic therapeutics for various affections of spleen	C/2	MK	Lecture Small group discussion Seminar	Viva	MCQ	Materia Medica Repertory
Hom UG-Sur-II-3.31	<b>KS</b>	<b>K</b> <b>K</b> <b>K</b>	Diseases of pancreas – investigations for pancreatic pathologies	Describe the anatomical and physiological aspects of the pancreas relevant to its diseases  List common pancreatic diseases, including acute and chronic pancreatitis, pancreatic cysts, and neoplasms  Explain the role of blood tests, including serum amylase, lipase, glucose, and tumour markers (e.g., CA 19-9), in diagnosing	C/1  C/1  C/2	MK  MK  DK	Lecture Small group discussion Audiovisual aids	Viva	MCQ	Radiology

# AIM Homoeopathy

		<b>K</b>		pancreatic diseases  Discuss the indications and limitations of imaging modalities like ultrasound (USG), CT scan, MRI, and endoscopic ultrasound (EUS) for pancreatic diseases	C/2	DK				
		<b>K</b>		Explain the utility of advanced techniques such as MRCP (Magnetic Resonance Cholangiopancreatography) and ERCP (Endoscopic Retrograde Cholangiopancreatography) in diagnosing pancreatic pathologies	C/2	NK				
Hom UG-Sur-II-3.32	<b>KS</b>	<b>K</b>	Diseases of pancreas – Acute pancreatitis	Define acute pancreatitis and describe its incidence, aetiology, and risk factors  Explain the pathophysiology of acute pancreatitis, including enzymatic autodigestion and inflammatory responses	C/1  C/2	MK  MK	Lecture Small group discussion Audiovisual aids Clinical discussions	Viva	MCQ SAQ LAQ	Materia medica Repertory
		<b>KH</b>		Identify clinical features	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>	of acute pancreatitis, such as abdominal pain, nausea, vomiting, and systemic symptom								
		<b>KH</b>	Discuss laboratory investigations, including serum amylase, lipase, and inflammatory markers, in diagnosing acute pancreatitis	C/2	MK						
		<b>KH</b>	Describe the role of imaging modalities (e.g., USG, CT, MRI) in diagnosing and assessing complications of acute pancreatitis	C/2	MK						
		<b>KH</b>	Discuss the complications of acute pancreatitis, such as necrosis, pseudocyst formation, and organ failure	C/3	MK						
		<b>KH</b>	Describe indications for endoscopic interventions (ERCP), and surgical approaches in acute pancreatitis	C/3	DK						

# AIM Homoeopathy

Hom UG- Sur- II- 3.33	<b>KS</b>	<b>K</b>	Diseases of pancreas – chronic pancreatitis	Define chronic pancreatitis and describe its epidemiology and risk factors	C/1	MK	Lecture Small group discussion Audiovisual aids Clinical discussions Image interpreting sessions Case based learning	Viva	MCQ SAQ LAQ	Radiology Practice of Medicine
		<b>K</b>		Explain the pathophysiology of chronic pancreatitis, including recurrent inflammation, fibrosis, and loss of pancreatic function	C/1	MK				
		<b>K</b>		Explain the clinical features, including recurrent abdominal pain, malabsorption, and diabetes	C/2	MK				
		<b>KH</b>		Discuss laboratory investigations, such as serum amylase, lipase, faecal elastase, and blood glucose levels, in diagnosing chronic pancreatitis	C/2	DK				
		<b>KH</b>		Describe the role of imaging modalities, such as ultrasound, CT, MRI, and MRCP, in diagnosing structural changes in chronic pancreatitis	C/3	DK				

# AIM Homoeopathy

		<b>KH</b>		Explain the importance of endoscopic ultrasound (EUS) and ERCP in identifying ductal changes and complications of chronic pancreatitis	C/3	NK				
		<b>KH</b>		Discuss the indications and techniques for endoscopic or surgical interventions, such as pancreatic duct stenting	C/3	NK				
		<b>KH</b>		Recognize complications of chronic pancreatitis, including pseudocysts, biliary obstruction, and pancreatic cancer	C/3	MK				
Hom UG-Sur-II-3.34	<b>KS</b>	<b>K</b>	Diseases of pancreas – Carcinoma of pancreas	<p>Describe its epidemiology, risk factors, pathology and progression of Carcinoma of pancreas</p> <p>Identify clinical features, including abdominal pain, jaundice, weight loss, and diabetes onset</p> <p>Discuss laboratory investigations, including tumour markers like CA 19-9, liver function tests, and blood glucose levels</p> <p>Describe imaging</p>	<p>C/1</p> <p>C/2</p> <p>C/2</p>	<p>MK</p> <p>MK</p> <p>DK</p>	<p>Lecture</p> <p>Small group discussion</p> <p>Audiovisual aids</p> <p>Clinical discussions</p> <p>Image interpreting sessions</p> <p>Case based learning</p>	Viva	<p>MCQ</p> <p>SAQ</p> <p>LAQ</p>	<p>Radiology</p> <p>Practice of Medicine</p>

# AIM Homoeopathy

		<b>KH</b>		modalities such as ultrasound, CT, MRI, and PET-CT in diagnosing and staging pancreatic carcinoma	C/2	DK						
		<b>KH</b>		Outline the TNM staging system and its importance in pancreatic cancer prognosis	C/2	DK						
		<b>KH</b>		Describe surgical approaches, including the Whipple procedure and distal pancreatectomy, and their indications	C/2	NK						
		<b>KH</b>		Recognize complications of pancreatic carcinoma, such as biliary obstruction, duodenal obstruction, and metastasis	C/2	DK						

# AIM Homoeopathy

Hom UG- Sur- II- 3.35	<b>HO</b>	<b>K</b>	Diseases of pancreas – Homoeopathic therapeutics for pancreatic diseases	Discuss the Homoeopathic therapeutics for Pancreatitis and Carcinoma of pancreas	C/1	MK	Lecture Small group discussion Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
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## Topic: Hom UG-Sur-II-4. Diseases of the thorax

Sl No	Domain of Competency	Miller Level	Content	SLO	Bloom /Guilbert Level	Priority	Teaching-Learning Methods (TL)	Assessment		Integration
								F	S	
Hom UG- Sur-II- 4.1	KS	K	Pleural effusion and pleural tapping	Describe the anatomy of the pleural cavity and its relevance	C/1	MK	Lectures, anatomical model demo Small group discussions Case discussions	Viva	MCQ, SAQ LAQ	Radiology Pathology
				Discuss the cause of pleural effusion	C/2	MK				
				Explain indications, contraindications, and complications pleural tapping	C/2	DK				

# AIM Homoeopathy

	HO	KH K		Interpret pleural fluid findings for diagnosis  Discuss the homoeopathic management of pleural effusion	C/3  C/1	NK  MK				
Hom UG-Sur-II-4.2	KS	KH  K	Bronchoscopy	Describe bronchial anatomy and its relevance  Explain indications and contraindications	C/1  C/2	MK  MK	Lecture Model demonstrations Case discussions	Viva	MCQ SAQ	Radiology
Hom UG-Sur-II-4.3	KS	KH  K  KH	Flail chest and stove-in chest	Define and describe flail chest  Explain biomechanics of paradoxical movement  Plan stabilization techniques	C/1  C2/  C/2	MK  MK  DK	Lecture Audiovisual aids Simulation labs	Viva	MCQ SAQ OSCE	Radiology
Hom UG-Sur-II-4.4	KS	K  KH  KH	Manage pneumothorax and tension pneumothorax	Define pneumothorax and its types  Explain pathophysiology of tension pneumothorax  Discuss the management of tension pneumothorax	C/1  C/2  C/2	MK  MK  MK	Lecture Case discussions Audiovisual aids Skill-based training	Viva OSCE	MCQ SAQ LAQ OSCE	Radiology Practice of medicine

# AIM Homoeopathy

Hom UG- Sur-II- 4.5	KS	KH KH	Investigate and manage haemothorax	Describe pathophysiology and clinical presentation  Plan treatment including intercostal drainage	C/1  C/3	MK  DK	Lecture, imaging-based learning	Viva	MCQ SAQ SAQ	Radiology
Hom UG- Sur-II- 4.6	KS	KH KH	Investigate and treat empyema thoracis	Explain stages of empyema development  Discuss the management of empyema	C/1  C/2	MK  DK	Interactive lecture Case-based learning	Viva	MCQ SAQ OSCE	
Hom UG- Sur-II- 4.7	KS	KH K	Investigate and manage lung abscess	Explain pathogenesis and radiologic features  Discuss indications for surgical drainage	C/2  C/2	MK  DK	Lecture, Imaging workshops Case studies	Viva	MCQ SAQ	Radiology
Hom UG- Sur-II- 4.8	KS	KH SH	Intercostal tube drainage (ICD)	Explain indications and steps of ICD  Observe/Perform ICD on a mannequin	C/1  P/2	DK  NK	Lecture Simulation training	Viva OSCE	MCQ SAQ OSCE	
Hom UG- Sur-II- 4.9	KS	K K	ARDS	Define ARDS and its aetiology  Explain ventilatory management strategies	C/1  C/2	MK  DK	Lecture Case-based learning	Viva	MCQSA Q	Practice of Medicine-Critical Care Radiology

# AIM Homoeopathy

Hom UG- Sur-II- 4.10	KS	K  KH	Pulmonary embolism	Explain causes pathophysiology and clinical features  Explain diagnostic modalities	C/1  C/2	MK  MK	Lecture  Imaging workshops	Viva	MCQ SAQ LAQ	Practice of Medicine- Critical Care Radiology
Hom UG- Sur-II- 4.11	KS	KH  KH	Surgical emphysema	Explain causes and imaging features  Discuss the management of surgical emphysema	C/2  C/2	MK  MK	Lecture  Case discussions	Viva Case Studies	SAQ	Radiology
Hom UG- Sur-II- 4.12	KS	KH  KH	Lung cysts	Define types and explain radiologic features  Discuss indications for resection	C/2  C/2	MK  DK	Imaging-based learning  Case discussions	Viva	MCQ SAQ	
Hom UG- Sur-II- 4.13	KS	K  KH  KH	Classify and manage mediastinal tumours	Classify mediastinal tumours (thymoma, lymphoma, etc.)  Describe diagnostic modalities & differential diagnosis (CT, biopsy)  Outline treatment, including indications of surgery and chemotherapy	C/1  C/2  C/3	MK  DK  NK	Interactive lecture, audiovisual aids  Imaging workshops  Case discussions	Viva	MCQ, SAQ, LAQ Imaging Assessme nt	Radiology

# AIM Homoeopathy

Hom UG- Sur-II- 4.14	KS	K KH KH	Pancoast tumours	Define Pancoast tumours and list clinical features  Explain superior vena cava syndrome and its management  Explain indications of surgical management	C/1 C/2 C/3	MK DK NK	Lecture, case discussions Audiovisual aids Skill-based learning	Viva Group Discussions	MCQ, SAQ	Radiology
Hom UG- Sur-II- 4.15	KS	KH K	Classify and manage chest wall tumours	Classify chest wall tumours and describe clinical features  Discuss indications of surgical management	C/1 C/2	MK NK	Interactive teaching Problem-based learning	Viva Group Case Discussions	MCQ, SAQ LAQ	Radiology
Hom UG- Sur-II- 4.16	KS	K KH HO	Acute and chronic pericarditis	Define pericarditis and its types  Explain complications &management  Discuss the homoeopathic therapeutics for pericarditis	C/1 C/2 C/2	MK DK MK	Lecture Case discussions	Viva Case Studies	MCQ, SAQ	

# AIM Homoeopathy

Hom UG-Sur-II-4.17	KS/PC	KH SH	Cardiac tamponade	Describe pathophysiology and clinical features  Perform /Observe pericardiocentesis under supervision	C/2  P/2	MK  NK	Lecture, audiovisual aids  Skill-based simulation	Viva OSCE	SAQ, MCQ OSCE	Practice of Medicine-Critical Care
Hom UG-Sur-II-4.18	KS	KH KH	Identify congenital cardiac anomalies	Explain ASD, VSD, PDA, Coarctation of Aorta and Tetralogy of Fallot  Discuss the complications, diagnostic and therapeutic approaches.	C/2  C/2	MK  DK	Audiovisual learning Case-based teaching	Viva Group Discussion	MCQ, SAQ Case Analysis	Radiology
Hom UG-Sur-II-4.19	KS  HO	KH KH K	Valvular heart diseases	List common valvular disorders and their aetiology, pathophysiology, clinical features, & complications  Explain management including surgical interventions  Discuss the role of homoeopathy in the management of Valvular heart diseases	C/2  C/2  C/2	MK  DK  C/2	Lecture Audiovisual aids	Viva Group Discussion	MCQ SAQ LAQ	

# AIM Homoeopathy

Hom UG-Sur-II-4.20	KS	KH	Diaphragmatic hernias	Describe congenital and acquired hernias  Discuss the indications for surgical repair	C/2  C/3	MK  MK	Lecture, case studies  Problem-based discussions	Viva OSCE	MCQ SAQ	Radiology
Hom UG-Sur-II-4.21	KS/PBL/PC	K  KH  SH  KH  KH  KH	Examination of disease of chest	Define and classify diseases of the chest  Identify symptoms and clinical presentations associated with chest diseases  Perform a systematic clinical examination of the chest, including inspection, palpation, percussion, and auscultation  Correlate clinical findings with specific chest diseases  Identify red flag signs in chest diseases requiring urgent intervention  Propose an initial diagnostic and management plan for chest diseases	C/1  C/2  P/2  C/3  C/2  C/2	MK  MK  MK  MK  DK  NK	Lecture Case demonstration DOPS	Viva	OSCE Case presentation	Practice of Medicine

# AIM Homoeopathy

## Topic: Hom UG-Sur-II-5. Diseases of urogenital system.

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II-5.1	KS	K	Diseases of Urogenital system – investigations in urology	Define the indications of urine examination	C/1	MK	Lecture Small group discussion	Viva	MCQ SAQ	Pathology Biochemistry
				Discuss urine examination – Microscopic, cytological, bacteriological, and biochemical examination	C/2	DK				
				Discuss the clinical significance of abnormal urine findings	C/2	MK				
Hom UG-Sur-II-5.2	KS	K	Diseases of Urogenital system – investigations in urology	Describe the common renal function tests including creatinine, blood urea nitrogen	C/2	DK	Small group discussion Lecture	Viva	MCQ	Pathology Biochemistry
				Interpret the creatinine and blood urea nitrogen	C/2	MK				

# AIM Homoeopathy

				levels and their clinical significance						
Hom UG-Sur-II-5.3	KS	K	Diseases of Urogenital system – investigations in urology	Define the purpose and indications of plain X-ray KUB examination	C/2	MK	Small group discussion Lecture X-ray image interpretations Case based discussions	Viva OSCE	MCQ SAQ OSCE	Radiology
		KH		Discuss the normal and abnormal findings on a plain X-ray KUB including identifying renal calculi, bowel gas pattern and organ size etc	C/2	MK				
		KH		Interpret Plain X-ray KUB findings in clinical context such as renal calculi, urinary tract obstruction	C/2	MK				
Hom UG-Sur-II-5.4	K	K	Diseases of Urogenital system – investigations in urology	Define the indications of intravenous urography	C/1	MK	Small group discussion Lecture Identification and interpretation of Intravenous urogram X-rays	Viva	SAQ	Radiology
		KH		Describe the procedure of intravenous urography	C/2	MK				
		KH		Discuss the normal and abnormal radiological findings on a Intravenous urography examination	C/2	MK				

# AIM Homoeopathy

Hom UG- Sur- II- 5.5	KS	K K KH KH	Diseases of Urogenital system – investigations in urology	Define retrograde urogram  Describe the indications of retrograde urogram  Describe the technique of retrograde ureteropyelography (retrograde urogram)  Describe the normal and abnormal findings on retrograde urogram including identifying urinary tract obstruction, calculi and anatomical abnormalities	C/1  C/2  C/2  C/2	MK  MK  NK  DK	Small group discussion Lecture Image interpretation sessions	Viva	SAQ	Radiology
Hom UG- Sur- II- 5.6	KS	K	Diseases of Urogenital system – investigations in urology	Discuss the importance of ultrasonography in the diagnosis of various diseases of urogenital system	C/2	NK	Small group discussion	Viva	SAQ	Radiology
Hom UG- Sur- II- 5.7	KS HO	K K	Diseases of Urogenital system – Kidney & Ureter	Enumerate the causes of Haematuria  Discuss the homoeopathic therapeutics for Haematuria	C/1  C/1	MK  MK	Lecture Small group discussion	Viva	MCQ SAQ	Materia Medica
Hom	KS	K	Diseases of	Describe horseshoe	C/1	DK	Lecture	Viva	SAQ	

# AIM Homoeopathy

UG-Sur-II-5.8		K KH	Urogenital system – Kidney & Ureter	<p>kidney</p> <p>Explain the clinical significance of horseshoe kidney</p> <p>Discuss the radiological modalities used in diagnosis of horseshoe kidney and radiological findings in horseshoe kidney</p>	C/2 C/2	DK NK	Small group discussion Audiovisual aids			
Hom UG-Sur-II-5.9	KS	K K KH K	Diseases of Urogenital system – Kidney & Ureter	<p>Define polycystic kidney disease (PKD)</p> <p>Describe the pathophysiology of polycystic kidney disease</p> <p>Discuss the clinical features of polycystic kidney disease</p> <p>Discuss the diagnostic modalities for Polycystic kidney disease</p> <p>Discuss the management of Polycystic kidney disease</p>	C/1 C/2 C/2 C/2 C/2	MK DK MK MK DK	Lecture Small group discussion	Viva	SAQ	

# AIM Homoeopathy

Hom UG- Sur- II- 5.10	KS	K  K  KH  KH  KH  KH	Diseases of Urogenital system – Kidney & Ureter	<p>Describe the causes and risk factors of renal calculi</p> <p>Enumerate different type of renal stones</p> <p>Discuss the clinical manifestations of renal stones including symptoms and complications</p> <p>Explain the diagnostic approach to renal calculi including imaging studies, laboratory tests and urine analysis</p> <p>Discuss the management of renal stones including conservative measures and surgical interventions</p> <p>Discuss the long-term outcome of renal stones including stone passage, stone recurrence and impact on renal function</p>	C/2  C/1  C/2  C/2  C/2  C/2	MK  MK  MK  DK  DK  NC	<p>Lecture Audiovisual aid</p> <p>Small group discussion</p> <p>Clinical case demonstratio n</p>	Viva OSCE	MCQ SAQ LAQ	Materia Medica Repertory

# AIM Homoeopathy

	HO	KH		Discuss the homoeopathic therapeutics for Renal Calculi	C/2	MK				
Hom UG-Sur-II-5.11	KS	K K K KH KH	Diseases of Urogenital system – Kidney & Ureter	Define Hydronephrosis  Enumerate the causes of hydronephrosis  Describe the pathology of hydronephrosis  Explain the clinical features of hydronephrosis  Discuss the diagnostic approach to hydronephrosis including imaging studies  Discuss the management strategies for hydronephrosis	C/1  C/1  C/2  C/2  C/2	MK  MK  MK  DK  DK	Lecture Audiovisual aids Small group discussion Image interpretation session	Viva	MCQ SAQ LAQ	Radiology
Hom UG-Sur-II-5.12	KS	K	Diseases of Urogenital system – Kidney & Ureter	Discuss the pathophysiology of ureteric calculi  Explain the clinical	C/2  C/2	MK  MK	Lecture Small group discussion	Viva	MCQ SAQ LAQ	Radiology

# AIM Homoeopathy

		K KH KH		features of ureteric calculi  Discuss the diagnostic approach to ureteric calculi including imaging studies  Discuss the management of ureteric calculi	C/2	DK					
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# AIM Homoeopathy

	KS	K	Diseases of Urogenital system – Kidney & Ureter	Define acute pyelonephritis  Discuss the etiology and pathology of acute pyelonephritis Explain the clinical features of acute pyelonephritis including symptoms, signs and complications  Discuss the diagnostic approach to acute pyelonephritis including laboratory tests, imaging studies and diagnostic criteria  Discuss the homoeopathic therapeutics for pyelonephritis	C/1  C/2  C/2	MK  MK  DK	Lecture Small group discussion	Viva	SAQ	Practice of Medicine Materia Medica
Hom UG-Sur-II-	KS	K	Diseases of Urogenital system – Kidney & Ureter	Describe the clinical features of chronic pyelonephritis	C/2	MK	Lecture Small group discussion	Viva	SAQ	Practice of Medicine

# AIM Homoeopathy

5.13		KH		Discuss the diagnosis and management of chronic pyelonephritis	C/2	DK				
Hom UG-Sur-II-5.14	KS	K K KH	Diseases of Urogenital system – Kidney & Ureter	Define pyonephrosis  Discuss the clinical features of pyonephrosis  Explain the diagnosis and management of pyonephrosis	C/1  C/2  C/2	DK  MK  DK	Lecture Audiovisual aids	Viva	SAQ	
Hom UG-Sur-II-5.15	KS	K K KH	Diseases of Urogenital system – Kidney & Ureter	Define renal carbuncle  Discuss the clinical features of renal carbuncle  Explain the diagnosis and management of renal carbuncle	C/1  C/2  C/2	DK  DK  NK	Lecture	Viva	SAQ	
Hom UG-Sur-II-5.16	KS	K K KH	Diseases of Urogenital system – Kidney & Ureter	Define Wilm's tumour  Explain the pathology of Wilm's tumour  Describe the clinical manifestation of Wilm's tumour including symptoms, and diagnostic findings  Discuss the	C/1  C/2  C/2  C/2	MK  DK  MK  DK	Lecture Audiovisual aid	Viva	SAQ	

# AIM Homoeopathy

		K		management of Wilm's tumour						
Hom UG-Sur-II-5.17	KS	K	Diseases of Urogenital system – Kidney & Ureter	Define Grawitz's tumour  Explain the pathology of Grawitz's tumour  Describe the clinical manifestation of Grawitz's tumour including symptoms, and diagnostic findings  Discuss the management of Grawitz's tumour	C/1  C/2  C/2  C/2	MK  DK  MK  NK	Lecture     	Viva     	SAQ     	
Hom UG-Sur-II-5.18	KS	K	Diseases of Urogenital system – Kidney & Ureter	Describe the etiology and risk factors of Renal cell carcinoma  Explain the histopathological features of renal cell carcinoma  Discuss the clinical presentation of renal cell carcinoma	C/1  C/2  C/2	MK  DK  MK	Lecture Audiovisual aid    	Viva     	MCQ SAQ LAQ    	

# AIM Homoeopathy

		KH		Outline the diagnostic modalities used in Renal cell carcinoma	C/2	DK				
		KH		Evaluate the treatment options for renal cell carcinoma	C/2	DK				
		KH		Discuss the prognosis and long-term outcome of Renal cell carcinoma	C/2	NK				
Hom UG-Sur-II-5.19	HO	K	Diseases of Urogenital system – Kidney & Ureter	Discuss the Homoeopathic therapeutics for Ranal tumours	C/2	MK	Lecture Small group discussion	viva	SAQ	Materia Medica Repertory
Hom UG-Sur-II-5.20	KS	K	Diseases of Urogenital system –Urinary bladder	Enumerate the causes of acute retention of urine  Explain the clinical presentation of acute retention of urine  Explain and interpret the diagnostic modalities and tests used to confirm acute urinary retention, including physical examinations	C/1  C/2  C/2	MK  MK  DK	Lecture Small group discussion Audiovisual aid	viva	MCQ SAQ LAQ	

# AIM Homoeopathy

		KH		and imaging studies  Discuss the management strategies for acute retention of urine, including catheterization, and surgical interventions	C/2	DK					
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# AIM Homoeopathy

Hom UG- Sur- II- 5.21	KS  PBL/PC	K  SH	Diseases of Urogenital system –Urethral catheterization	Discuss the indications of urethral catheterization  Observe the correct technique of urethral catheterization  Describe Foley's catheter, its size, uses in clinical practice	C/1  P/2  C/2	MK  DK  NK	Small group discussion Audiovisual aid DOPS Skill lab simulation	Viva	SAQ	
Hom UG- Sur- II- 5.22	KS	KH  K  KH	Diseases of Urogenital system –Urinary incontinence	Explain the various types of urinary incontinence like stress incontinence, over active bladder, overflow incontinence, neurogenic bladder dysfunction etc  Discuss the causes of incontinence of urine  Interpret and analyse diagnostic tests	C/2  C/2  C/2	MK  MK  DK	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	Materia Medica

# AIM Homoeopathy

				commonly used in assessing urinary incontinence, such as urodynamic studies, cystoscopy, ultrasound, and pelvic floor electromyography (EMG).						
HO	KH	K		Discuss the management plan for urinary incontinence, including lifestyle modifications, behavioural therapies, and surgical options if necessary.	C/2	DK				
				Discuss the homoeopathic therapeutics for urinary incontinence	C/2	MK				
Hom UG-Sur-II-5.23	KS	KH	Diseases of Urogenital system –Bladder stones	Describe the composition, formation process, and etiological factors of bladder stones	C/2	MK	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

		K		Describe the clinical features and symptoms associated with bladder stones and its possible complications	C/2	MK					
		KH		Interpret and analyse diagnostic tests commonly used in assessing bladder stones, such as urinalysis, abdominal ultrasound, and cystoscopy findings	C/2	DK					
		KH		Discuss a management plan for bladder stones, including conservative measures medical therapy, and surgical interventions	C/2	NK					
		K		Discuss the Homeopathic therapeutics for bladder stones	C/2	MK					
Hom UG-Sur-II-5.24	KS	K	Diseases of Urogenital system – diverticulum of the bladder	Define bladder diverticulum  Describe the pathology of bladder diverticulum	C/1  C/2	MK  DK	Lecture	Viva	MCQ SAQ		

# AIM Homoeopathy

		KH		Discuss the clinical features and complications of bladder diverticulum	C/2	DK				
Hom UG-Sur-II-5.25	KS	K K	Diseases of Urogenital system – Urinary fistulae	Describe Vesicovaginal fistulae  Describe congenital urinary fistulae	C/2  C/2	MK NK	Lecture	Viva	SAQ	Gynecology
Hom UG-Sur-II-5.26	KS  HO  KS	K K K	Diseases of Urogenital system – urinary tract infection	Explain the predisposing factors of urinary tract infection  Describe the clinical features of lower urinary tract infection  Discuss the Homoeopathic therapeutics for Lower urinary tract infection  Describe Interstitial cystitis (Hunner's ulcer)	C/1  C/2  C/2  C/2	MK MK MK NK	Lecture Audiovisual aid	Viva	MCQ SAQ	Gynecology Practice of Medicine Materia Medica
Hom UG-Sur-II-5.27	KS	K K	Diseases of Urogenital system – Carcinoma of bladder	Discuss the aetiology of carcinoma of bladder  Enumerate the different histological types of carcinomas of bladder	C/2  C/2	MK MK	Lecture Audiovisual aid Small group discussion Image	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

		K		Describe clinical features and TNM classification of Carcinoma of bladder	C/2	MK	interpretation sessions			
		KH		Interpret diagnostic tests commonly used in assessing bladder carcinoma, such as urinalysis, urine cytology, imaging studies (CT, MRI), cystoscopy findings (tumour location, appearance), and biopsy results (histopathology, immunohistochemistry).	C/2	DK				
		KH		Discuss the management of Carcinoma of bladder	C/2	NK				
HO	K			Discuss the Homoeopathic therapeutics for Carcinoma of bladder	C/2	MK				

# AIM Homoeopathy

Hom UG- Sur- II- 5.28	KS	K K K	Diseases of Urogenital system- Prostate and PSA	Explain the surgical anatomy of prostate gland  Define PSA (Prostate Specific Antigen)  Describe the physiological role of PSA and its significance as a biomarker for prostate health and disease.	C/1  C/1  C/2	DK  DK  NK	Lecture Audiovisual aid	Viva	MCQ SAQ	
Hom UG- Sur- II- 5.29	KS	K K K KH	Diseases of Urogenital system- Benign Hypertrophy of Prostate- BHP / Benign Prostatic Hyperplasia -BPH	Discuss the pathophysiology of Benign Prostatic Hyperplasia  Explain the clinical features of Benign Prostatic Hyperplasia  Describe the digital rectal examination findings in BHP  Interpret diagnostic tests commonly used in assessing BPH such as urinary flow rate measurements, urine analysis, and imaging	C/2  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aids Small group discussion	Viva	MCQ SAQ LAQ	Materia Medica Repertory

# AIM Homoeopathy

	HO	K K		studies (ultrasound) Discuss the surgical management of BHP  Discuss the Homoeopathic therapeutics of BHP	C/2  C/2	NK  MK				
Hom UG- Sur- II- 5.30	KS	K  KH  KH  KH	Diseases of Urogenital system- Carcinoma of prostate d	Describe the pathology and histological grading of carcinoma of prostate (Gleason Score)  Describe the clinical features including digital rectal examination findings of Carcinoma of prostate.  Discuss the TNM staging for prostate cancer  Interpret diagnostic tests commonly used in assessing patients with suspected prostate cancer, such as PSA levels, imaging studies (MRI, CT), biopsy results, bone scans, and lymph node assessments	C/2  C/2  C/2  C/2	MK  MK  DK  DK	Lecture Audiovisual aid	Viva	MCQ SAQ LAQ	Materia medica Repertory

# AIM Homoeopathy

	HO	KH K		Discuss the management of carcinoma of prostate  Discuss the homoeopathic therapeutics for carcinoma of prostate	C/2  C/1	NK  MK				
Hom UG- Sur- II- 5.31	KS  HO	K K K K	Diseases of Urogenital system-Prostatitis	Discuss the aetiology of acute prostatitis  Explain the clinical features of prostatitis  Discuss the clinical features of chronic prostatitis  Discuss the common diagnostic tests for prostatitis and their interpretations  Discuss the homoeopathic therapeutics for	C/2  C/2  C/2  C/2	MK MK MK DK MK	Lecture	Viva	SAQ	Materia Medica Repertory

# AIM Homoeopathy

				prostatitis							
Hom UG- Sur- II- 5.32	KS	K  K  KH	Diseases of Urogenital system-BOO (Bladder outflow obstruction)	Define BOO  Enumerate the causes of BOO  Explain the symptoms associated with BOO  Interpret diagnostic tests commonly used in assessing patients with BOO, such as urinalysis, urine culture, post-void residual (PVR) volume measurement, uroflowmetry, cystoscopy, ultrasound, CT/MRI scans, and urodynamic studies  Discuss the management plan for patients with BOO including conservative measures and surgical interventions  Provide patient	C/1  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aid  Small group discussion  Case based discussion  Role play	Viva OSCE	MCQ SAQ LAQ	Radiology	

# AIM Homoeopathy

				education and counselling on BOO management, including lifestyle modifications (bladder training, pelvic floor exercises), importance of follow-up care (urodynamic studies, imaging), recognizing and managing complications (UTIs, urinary retention), and when to seek medical attention (red flags)						
Hom UG-Sur-II-5.33	KS	K	Diseases of Urogenital system- Examination of urinary case	Define the purpose and importance of physical examination in renal cases, including the assessment of renal function, detection of abnormalities, identification of relevant signs and symptoms, and contribution to differential diagnosis.	C/1	MK	Lecture Audiovisual aid Small group discussion Skill lab simulation Bedside case demonstration DOAP session	Viva OSCE	SAQ	
	PBL	SH		Demonstrate proficiency in performing an abdominal examination with a focus on kidney	P/2	MK				

# AIM Homoeopathy

				palpation, including techniques for assessing kidney size, tenderness, and presence of masses						
Hom UG-Sur-II-5.34	KS	K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Congenital disorders	Describe posterior urethral valve	C/1	DK	Lecture Audiovisual aids	Viva	SAQ	
		K		Describe Hypospadias	C/1	DK				
		K		Describe Epispadias	C/1	DK				
		K		Describe Urethral diverticulum	C/1	NK				
Hom UG-Sur-II-5.35	KS	K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Rupture of urethra	Discuss the aetiology and pathophysiology of rupture of bulbar urethra and membranous urethra	C/2	MK	Lecture Audiovisual aid	Viva	MCQ SAQ LAQ	
		K		Explain the clinical features and complications of rupture of bulbar urethra and membranous urethra	C/2	MK				

# AIM Homoeopathy

		KH  K		Interpret diagnostic tests and imaging studies for urethral rupture diagnosis  Discuss the management for urethral rupture	C/2  C/2	DK  NK				
Hom UG- Sur- II- 5.36	KS   HO	K  K  KH  K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Urethritis	Enumerate the aetiological factors for urethritis  Explain the clinical features and complications of urethritis  Interpret the diagnostic tests and laboratory findings used in the evaluation of urethritis  Discuss the homoeopathic therapeutics for urethritis	C/2  C/2  C/2  C/2	MK  MK  DK  MK	Lecture	Viva	MCQ SAQ	Materia Medica

# AIM Homoeopathy

Hom UG- Sur- II- 5.37	KS	K	Diseases of Urogenital system- Diseases of Male Urethra and Penis –Peri urethral abscess	Describe the types and clinical features of periurethral abscess	C/2	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 5.38	KS	K K K KH KH	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Urethral stricture	Enumerate the cause of stricture urethra  Explain the pathophysiology of urethral stricture  Describe the clinical features of stricture urethra  Interpret the diagnostic tests and imaging studies used in the evaluation of stricture urethra, including urethroscopy, cystoscopy, retrograde urethrogram, uroflowmetry, imaging studies like CT scan and MRI scan  Discuss the management of urethral stricture  Discuss the	C/1  C/2  C/2  C/2	MK  MK  MK  NK	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	Radiology Materia Medica

# AIM Homoeopathy

	HO	K		homoeopathic therapeutics for urethral stricture	C/1	MK				
Hom UG-Sur-II-5.39	KS	K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Urethral calculi	Explain the clinical features and treatment of urethral calculi	C/2	MK	Lecture	Viva	SAQ	
Hom UG-Sur-II-5.40	KS	K K K KH K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Phimosis	Define phimosis  Discuss the aetiology and pathophysiology of phimosis  Explain the clinical features and complications of phimosis  Discuss the management of phimosis  Discuss the homoeopathic therapeutics for phimosis	C/1  C/2  C/2  C/2	MK  MK  MK  MK	Lecture Audiovisual aid	Viva	MCQ SAQ	Materia Medica Repertory

# AIM Homoeopathy

Hom UG- Sur- II- 5.41	KS	K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Paraphimosis	Describe paraphimosis, its clinical features and management	C/2	MK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 5.42	KS	K	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Balanoposthitis	Describe Balanoposthitis and its clinical features	C/2	MK	Lecture	Viva	SAQ	Materia Medica Repertory
	HO	K		Discuss the Homoeopathic therapeutics for Balanoposthitis	C/2	MK				

# AIM Homoeopathy

Hom UG- Sur- II- 5.44	KS	KH K KH	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Priapism	Define priapism  Discuss the aetiology and clinical features of priapism  Discuss the treatment plan for priapism	C/1  C/2  C/2	DK  DK  NK	Lecture	Viva	MCQ SAQ	
Hom UG- Sur- II- 5.45	KS	K K K KH	Diseases of Urogenital system- Diseases of Male Urethra and Penis – Carcinoma of Penis	Enumerate the causes of carcinoma of penis  Explain the pathology and TNM staging of carcinoma of penis  Discuss the clinical presentation of carcinoma of penis including precancerous , Bowen's disease and erythroplasia of Queyrat  Discuss the treatment of carcinoma of penis	C/2  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aid	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

Hom UG-Sur-II-5.46	KS	K  K	Diseases of Urogenital system-Diseases of Scrotum and Testes – Embryology and Anatomy	Describe the embryological development of testes  Recognize the external anatomy of the testes and scrotum, including the position of the testes within the scrotal sac, the structure of the scrotal skin, cremaster muscle, dartos muscle, and spermatic cord	C/1  C/1	DK  NK	Lecture Small group discussion	Viva	SAQ	Anatomy
Hom UG-Sur-II-5.47	KS	K  K  K  KH	Diseases of Urogenital system-Diseases of Scrotum and Testes-undescended testes	Define undescended testes  Explain the pathology of undescended testes  Discuss the clinical features and consequence of undescended testes  Discuss the surgical management of	C/1  C/2  C/2  C/2	MK  MK  MK  NK	Lecture Audiovisual aid	Viva	MCQ SAQ	

# AIM Homoeopathy

				undescended testes						
Hom UG- Sur- II- 5.48	KS	K	Diseases of Urogenital system-Diseases of Scrotum and Testes- Retractile testes	Describe Retractile testes	C/1	NK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 5.49	KS	K K KH KH	Diseases of Urogenital system-Diseases of Scrotum and Testes- Torsion of Testes	Describe the pathophysiology of torsion of testes  Explain the signs and symptoms of torsion of testes  Discuss the differential diagnosis of torsion of testes  Describe the management of torsion of testes	C/2  C/2  C/2	MK  MK  DK	Lecture Audiovisual aids	Viva	MCQ SAQ	

# AIM Homoeopathy

Hom UG- Sur- II- 5.50	KS	K K KH KH	Diseases of Urogenital system-Diseases of Scrotum and Testes- Varicocele	Define varicocele  Discuss the aetiology and clinical features of varicocele  Discuss the effect of Varicocele in spermatogenesis  Enumerate the treatment options for varicocele	C/1  C/2  C/2  C/2	MK  MK  DK  DK	Lecture Audiovisual aid	Viva	MCQ SAQ	
Hom UG- Sur- II- 5.51	KS	K KH KH	Diseases of Urogenital system-Diseases of Scrotum and Testes- Hydrocele	Define hydrocele  Describe the causes, types, clinical presentation and clinical examination findings of hydrocele  Discuss the management options specific to each type of hydrocele	C/2  C/2  C/2	MK  MK  DK	Lecture Audiovisual aids  Clinical case discussion	Viva	SAQ LAQ	

# AIM Homoeopathy

Hom UG- Sur- II- 5.52	KS	K  K  K  KH	Diseases of Urogenital system-Diseases of Scrotum and Testes- Fournier's gangrene	Define Fournier's gangrene  Describe the etiology pathophysiology and rapid progression of Fournier's gangrene  Recognize the clinical signs, and symptoms, of Fournier's gangrene  Evaluate the management strategies for Fournier's gangrene	C/1  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aids	Viva	SAQ	
Hom UG- Sur- II- 5.53	KS	K  KH	Diseases of Urogenital system-Diseases of Scrotum and Testes- Epididymo-orchitis	Define Epididymo-orchitis  Enumerate the clinical signs, symptoms, and risk factors associated with epididymo-orchitis	C/1  C/2	MK  MK	Lecture Audiovisual aids	Viva	MCQ SAQ	Materia medica Repertory

# AIM Homoeopathy

	HO	K		Discuss the Homoeopathic therapeutics for Epididymo-orchitis	C/2	MK				
Hom UG-Sur.-II-5.54	KS	K	Diseases of Urogenital system-Diseases of Scrotum and Testes-Tumours of testes	<p>Classify the testicular tumours according to their cellular type</p> <p>Describe the pathophysiology and risk factors associated with testicular tumours</p> <p>Discuss the clinical features and differential diagnosis of testicular tumours</p> <p>Interpret diagnostic tests (e.g., tumor markers, ultrasound, CT scans) for testicular tumours</p> <p>Discuss the prognosis, follow-up care, and potential complications in patients with</p>	<p>C/1</p> <p>C/2</p> <p>C/2</p> <p>C/3</p> <p>C/2</p>	<p>MK</p> <p>MK</p> <p>MK</p> <p>DK</p> <p>NK</p>	<p>Lecture Audiovisual aids</p>	<p>Viva</p>	<p>MCQ SAQ LAQ</p>	<p>Materia medica Repertory</p>

# AIM Homoeopathy

	HO	K		testicular tumours  Discuss the homoeopathic therapeutics for testicular tumours	C/2	MK				
Hom UG-Sur-II-5.55	PC/KS	K	Examination of inguinoscrotal swelling	Understand the anatomy of the inguinal canal and scrotum	C/1	MK	Small group discussion Clinical skill assessment with simulated patients	Viva Skill assessment with simulated patients	LAQ OSCE	
		SH		Explain the common causes of inguinoscrotal swelling	C/2	MK				
		KH		Perform a systematic clinical examination of inguinoscrotal swelling, including inspection, palpation, and transillumination	P/2	MK	Case based clinical examination and demonstration			
		KH		Differentiate between types of inguinoscrotal swellings based on clinical examination findings	C/3	MK	Case discussion on imaging studies DOPS			
		KH		Interpret relevant diagnostic tests (e.g., ultrasound, Doppler studies) in the assessment of inguinoscrotal swelling	C/3	DK				

# AIM Homoeopathy

Hom UG- Sur- II- 5.56	PC/KS	K  K  SH  KH	Examination of groin swelling	Understand the anatomy of the groin region, including the inguinal canal, femoral triangle, and lymph nodes  List and discuss the causes of groin swelling  Perform a systematic clinical examination of a groin swelling, including inspection, palpation and specific manoeuvre  Differentiate between the types of groin swellings (e.g., inguinal vs. femoral hernia, cysts, or masses) based on clinical examination findings	C/1  C/2  P/2  C/3	MK  MK  MK  MK	Small group discussion Audiovisual aid Case based discussion DOPS	Viva Skill assessm ent with simulat ed patients	LAQ OSCE	

# AIM Homoeopathy

Hom UG- Sur- II- 5.57	PC/KS	K	Examination of scrotal swelling	Understand the anatomy of the scrotum and its contents, including the testes, epididymis, and spermatic cord  List and explain common causes of scrotal swelling (e.g., hydrocele, varicocele, epididymo-orchitis, testicular torsion, tumors)  Perform a systematic clinical examination of scrotal swelling, including inspection, palpation, and transillumination  Differentiate between types of scrotal swelling (e.g., hydrocele vs. varicocele, testicular torsion, and tumours) based on clinical examination findings  Interpret relevant diagnostic tests (e.g., ultrasound, Doppler	C/1  C/2  P/1  P/2  C/3	MK  MK  MK  MK  NK	Small group discussion Audiovisual aids Case based discussion Case discussion on diagnostic imaging DOPS	Viva Skill assessment with simulated patients	LAQ OSCE Interpretation of image findings	
		KH								

# AIM Homoeopathy

				studies) in the assessment of scrotal swelling						
Hom UG-Sur-II-5.58	PC/KS	K	Examination of penis	Understand the anatomy of the penis, including the corpora cavernosa, corpus spongiosum, urethra, and associated vasculature  Identify and explain common causes of penile conditions (e.g., phimosis, paraphimosis, Peyronie's disease, balanitis, trauma, STIs)  Perform a comprehensive clinical examination of the penis, including inspection and palpation, assessing for lesions, deformities, and discharge  Differentiate between conditions affecting the penis based on clinical examination findings	C/1    C/2	MK    MK	Small group discussion Audiovisual aids Case based discussion DOPS   P/1	Viva Skill assessment with simulated patients	SAQ OSCE Interpretation of image findings	

# AIM Homoeopathy

				(e.g., Peyronie's disease, balanitis, penile cancer)							
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## Topic: Hom UG-Sur-II-6. Orthopedics

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II-6.1	KS	K	Infections of bones and joints – Acute osteomyelitis	Define osteomyelitis	C/1	MK	Lecture Audio video aids Small group discussion Case based discussion	Viva	MCQ SAQ LAQ	
				Discuss the etiopathogenesis of osteomyelitis	C/2	MK				
				Describe the clinical features of osteomyelitis	C/2	MK				
		KH		Explain the diagnostic workup for osteomyelitis	C/2	MK				
				Discuss the principles of management of osteomyelitis	C/2	MK				
Hom	KS	K	Infections of	Discuss the	C/2	MK	Lecture	Viva		Materia

# AIM Homoeopathy

UG-Sur-II-6.2	HO	K K K	bones and joints – chronic osteomyelitis	pathology and clinical features of chronic osteomyelitis  Describe the diagnostic workup specific to chronic osteomyelitis  Discuss the management of chronic osteomyelitis  Discuss the homoeopathic therapeutics for osteomyelitis	C/2  C/2  C/1	DK  DK  MK	Audio video aids Small group discussion		MCQ SAQ LAQ	Medica Repertory
Hom UG-Sur-II-6.3		K K	Infections of bones and joints	Define Garre's osteomyelitis  Describe the clinical features and diagnosis of Garre's osteomyelitis	C/1  C/2	DK  DK	Lecture Audiovisua l aid	Viva	SAQ	
Hom UG-Sur-II-6.4	KS	K	Infections of bones and joints	Describe Brodies abscess	C/1	DK	Lecture	Viva	SAQ	
Hom	KS	K	Infections of	Explain the	C/2	MK	Lecture	Viva		

# AIM Homoeopathy

UG-Sur-II-6.5		K  KH	bones and joints	etiopathology of septic arthritis  Discuss the clinical features and diagnosis of septic arthritis  Discuss the management of septic arthritis	C/2  C/2	MK  DK			SAQ	
Hom UG-Sur-II-6.6	KS	K	Infections of bones and joints	Describe Tom Smith arthritis	C/1	NK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.7	KS	K  K  K  KH	Infections of bones and joints	Define Pott's disease  Describe the pathology of Pott's disease  Discuss the clinical features of Pott's disease  Identify radiological findings specific to Pott's disease in imaging studies like X-ray, MRI and CT scan	C/1  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aid Small group discussion	Viva	MCQ SAQ LAQ	Practice of Medicine  Radiology

# AIM Homoeopathy

		KH		Discuss the management of tuberculosis of spine (Potts disease )	C/2	DK				
Hom UG-Sur-II-6.8	KS	K	Infections of bones and joints	Describe Pott's paraplegia	C/1	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.9	KS	K K K KH	Infections of bones and joints	Describe the pathology of Tb of hip joint  Enumerate the stages of hip joint TB  Explain the clinical features, diagnosis of TB of Hip joint  Discuss the management of TB of Hip joint	C/2  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisua l aid	Viva	SAQ LAQ	
Hom UG-Sur-II-6.10	HO	K	Infections of bones and joints	Discuss the Homoeopathic therapeutics for infections of bones and joints	C/2	MK	Lecture Small group discussion	Viva	SAQ	Materia Medica Repertory
Hom UG-Sur-II-	KS	K	Bone tumors	Describe osteomas	C/1	MK	Lecture	Viva	SAQ	

# AIM Homoeopathy

6.11										
Hom UG- Sur- II- 6.12	KS	K	Bone tumors	Describe Osteoid osteoma	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.13	KS	K	Bone tumors	Describe osteoblastoma, chondroblastoma, adamantinoma and chordoma	C/1	NK	Lecture Small group discussion	Viva	SAQ MCQ	
Hom UG- Sur- II- 6.14	KS	K	Bone tumors	Describe the clinical features and diagnosis of Osteoclastoma (Giant cell tumor)	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.15	KS	K	Bone tumors	Discuss the pathology, clinical features, diagnosis and management of osteosarcoma	C/1	MK	Lecture	Viva	SAQ LAQ	
Hom UG- Sur- II- 6.16	KS	K	Bone tumors	Describe Ewing's sarcoma	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.17	KS	K	Bone tumors	Discuss the pathology and clinical features of multiple myeloma	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur-	KS	K	Bone tumors	Describe Osteochondroma	C/1	NK	Lecture	Viva	SAQ	

# AIM Homoeopathy

II-6.18										
Hom UG-Sur-II-6.19	KS	K	Bone tumors	Describe Enchondromas	C/1	NK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.20	HO	KH	Bone tumors	Discuss the therapeutics of bone tumors	C/1	MK	Lecture	Viva	SAQ	Materia Medica Repertory
Hom UG-Sur-II-6.21	KS	K	Diseases of bones	Describe Paget's disease of bone	C/1	NK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.22	KS	K	Diseases of bones	Describe Osteopetrosis	C/1	NK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.23	KS	K	Diseases of bones	Describe Perthe's disease	C/1	NK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.24	KS	K KH	Diseases of bones	Explain the Causes of avascular necrosis bone.  How to diagnosis of Avascular necrosis	C/1 C/2	DK DK	Lecture	Viva	SAQ	

# AIM Homoeopathy

Hom UG- Sur- II- 6.25	KS	K	Miscellaneous regional orthopedic conditions	Define Torticollis ( Wry neck). Discuss the causes of Torticollis	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.26	KS	K	Miscellaneous regional orthopedic conditions	Describe Cervical rib. Discuss the clinical features and differential diagnosis of cervical rib	C/2	NK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.27	KS	K K K KH	Miscellaneous regional orthopedic conditions	Describe the relevant anatomy of arch of foot.  Describe flat foot  Discuss the causes of flat foot  Discuss the management of Flat foot	C/1  C/1  C/1  C/2	NK  NK  NK  NK	Small group discussion A V mode	Viva	SAQ	
Hom UG- Sur- II- 6.28	KS	K KH	Miscellaneous regional orthopedic conditions	Define Knock knee ( Genu Valgum)  Discuss the causes and treatment of Genu Valgum	C/1  C/2	NK  NK	Lecture	Viva	SAQ	

# AIM Homoeopathy

Hom UG- Sur- II- 6.29	KS	K KH	Miscellaneous regional orthopedic conditions	Define Genu Varum  Discuss the causes and treatment of Genu Varum	C/1  C/2	NK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.30	KS	K	Miscellaneous regional orthopedic conditions	Describe Hallux Valgus	C/1	NK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.31	KS	K	Miscellaneous regional orthopedic conditions	Disrobe Osteogenesis imperfecta	C/1	NK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.32	KS	K KH	Prolapsed intervertebral disc	Describe relevant Anatomy of Intervertebral disc  Discuss the changes in the spine, clinical features and diagnosis of intervertebral disc prolapse	C/1  C/2	MK  MK	Lecture Audiovisua l aid	Viva	SAQ MCQ	
Hom UG- Sur- II-	KS	K KH	Spinal deformities	Define scoliosis  Discuss the	C/1  C/2	MK  MK	Lecture	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

6.33				causes, diagnosis and principles of management of Scoliosis						
Hom UG-Sur-II-6.34	KS	K KH	Spinal deformities	Define Kyphosis  Discuss the causes, diagnosis and principles of management of Kyphosis	C/1  C/2	MK	Lecture	Viva	LAQ	
Hom UG-Sur-II-6.35	KS	K	Spinal deformities	Describe spondylolisthesis	C/1	MK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.36	KS	K	Spinal deformities - Low back pain	Discuss the various causes of low back pain	C/1	MK	Lecture Small group discussion	Viva	MCQ LAQ	
Hom UG-Sur-II-6.37	PBL	SH	Spinal deformities  Low back pain	Examination of Spine  Clinical examination of a case of low back pain	P/2	MK	Clinical demonstration Small group discussion Simulation	Viva Observation Demonstration	Clinical demonstration OSCE	

# AIM Homoeopathy

							based learning DOPS			
Hom UG-Sur-II-6.38	KS HO	K K K	Low back pain-Sciatica	Define Sciatica  Discuss the causes of sciatica  Discuss the therapeutics of sciatica	C/1 C/1 C/1	MK MK MK	Lecture Audiovisua l aids  Small group discussion	Viva	SAQ	Materia Medica Repertory
Hom UG-Sur-II-6.39	KS	Kh	Diseases of joints - Arthritis and related diseases	Discuss the etiopathology, stages, clinical features, diagnosis and management of Rheumatoid arthritis	C/2	DK	Lecture Small group discussion	Viva	SAQ	Practice of medicine
Hom UG-Sur-II-6.40	KS HO	KH K	Diseases of joints - Arthritis and related diseases	Discuss the etiology, pathology, clinical features investigation and management of Ankylosing Spondylitis  Discuss the Homoeopathic therapeutics for Ankylosing spondylitis	C/2 C/1	MK	Lecture Small group discussion	Viva	MCQ SAQ LAQ	Practice of medicine Materia Medica
Hom UG-	KS	KH	Diseases of joints Arthritis	Describe the types, pathology,	C/2	MK	Lecture AV mode	Viva	MCQ SAQ	Materia Medica

# AIM Homoeopathy

Sur-II-6.41	HO	K	and related diseases	clinical features, diagnosis and management of Osteoarthritis  Discuss the Homoeopathic therapeutics for osteoarthritis	C/1		Small group discussion		LAQ	
Hom UG-Sur-II-6.42	PBL/PC	S	Knee joint examination	Demonstrate the clinical examination of knee joint	P/2	MK	Clinical demonstration. AV mode	Clinical demonstration	Clinical demonstration	
Hom UG-Sur-II-6.43	KS	K	Diseases of joints – spine	Discuss the pathology, clinical features, diagnosis and management of Cervical spondylosis  Discuss the Homoeopathic therapeutics for cervical spondylosis	C/2	MK	Lecture A V mode Small group discussion	Viva	MCQ SAQ LAQ	
Hom UG-Sur-II-6.44	HO	K	Diseases of joints- spine	Discuss the pathology, clinical features, diagnosis and management of lumbar spondylosis	C/1	MK		Viva	MCQ SAQ	Materia Medica

# AIM Homoeopathy

	HO	K		Discuss the Homoeopathic therapeutics for Lumbar spondylosis	C/1	MK				
Hom UG-Sur-II-6.45	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe Dupuytren's contracture	C/1	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.46	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe Tennis elbow	C/1	MK	Lecture Small group discussion	Viva	SAQ	Materia Medica
	HO	K		Discuss the homoeopathic therapeutics for tennis elbow	C/1	MK				
Hom UG-Sur-II-6.47	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe Golfer's elbow	C/1	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.48	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe De Quervain's Tenosynovitis	C/1	DK	Lecture	Viva	SAQ	
Hom UG-	KS	K	Affections of soft tissues –	Describe Trigger finger	C/1	DK	Lecture	Viva	SAQ	

# AIM Homoeopathy

Sur-II-6.49			Tendons, fascia, muscles etc							
Hom UG-Sur-II-6.50	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Define ganglion	C/1	DK	Lecture	Viva	SAQ	
	HO	K		Discuss the Homoeopathic therapeutics for ganglion	C/1	DK				
Hom UG-Sur-II-6.51	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe Carpel tunnel syndrome	C/1	DK	Lecture	Viva	SAQ	
Hom UG-Sur-II-6.52	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe Frozen shoulder	C/1	DK	Lecture	Viva	SAQ	
	HO	KH		Discuss the clinical features and management of Frozen shoulder	C/2	MK				
Hom UG-Sur-	KS	K	Affections of soft tissues – Tendons,	Describe Plantar fasciitis	C/1	DK	Lecture	Viva	SAQ	

# AIM Homoeopathy

II- 6.53	HO	K	fascia, muscles etc	Discuss the homoeopathic therapeutics for plantar fasciitis	C/1					
Hom UG- Sur- II- 6.54	KS	K	Affections of soft tissues – Tendons, fascia, muscles etc	Describe painful arc syndrome	C/1	DK	Lecture	Viva	SAQ	

# AIM Homoeopathy

Hom UG- Sur- II-6. 55	KS	K	Fracture	Define fracture  Discuss the various stages of fracture healing	C/1  C/2	MK  MK	Lecture Audiovisua l aids Small group discussion	Viva	MCQ SAQ LAQ	Radiology Materia Medica
		KS		Enumerate the factors affecting fracture healing	C/2	MK				
		KS		Describe the types of fractures (e.g., simple, compound, comminuted) and the basic principles of fracture management	C/1	MK				
		KS		Identify the signs and symptoms of a fracture (e.g., pain, swelling, deformity, loss of function)	C/2	MK				
	PBL	SH		Observe / Perform emergency care of fractures, 157	P/2	MK	Hands-on clinical simulation (skill lab)	OSCE on emergency management techniques	OSCE station on emergency fracture care	

# AIM Homoeopathy

				including immobilization techniques (e.g., splinting), managing open fractures (e.g., wound dressing), and assessing for neurovascular injury			Practical demonstrations			
		KH		Interpret imaging techniques (e.g., X-rays, CT scans) to diagnose fractures, assess fracture type	C/2	MK	Hands-on imaging interpretation			
KS	KH			Explain various treatment plan for fractures, including conservative management (e.g., casting, traction) and surgical options (e.g., internal fixation,	C/2	MK	Lecture Small group discussion Clinical workshop			

# AIM Homoeopathy

	KS	KH		external fixation)  Describe the pathophysiology of immediate complications of fractures, such as haemorrhage, compartment syndrome, and fat embolism	C/1	MK	Lecture Audiovisual aids Small group discussion			
	PBL/KS	KH/S		Explain/Recognise early complications of fractures, including infection, DVT (deep vein thrombosis), and acute respiratory distress syndrome (ARDS), and understand their clinical features	C/1	MK	Lecture Audiovisual aids Hands-on clinical simulation, Case demonstrations			
	KS	KH		Discuss the management plans for immediate complications,	C/2	MK				

# AIM Homoeopathy

				such as compartment syndrome (fasciotomy), haemorrhage control, and fat embolism syndrome (supportive care)							
KS	KH			Explain the late complications of fracture	C/2	MK	Lecture Audiovisual aids				
HO	KH			Discuss the scope of Homoeopathy in fracture cases along with the indications Homoeopathic medicines for fracture	C/2	MK	Lecture Small group discussion				

# AIM Homoeopathy

Hom UG- Sur- II- 6.56	KS	K	Fracture -	Describe compartment syndrome	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.57	KS	K	Fracture	Describe Sudeck's dystrophy	C/1	NK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.58	KS	K	Fracture	Describe Myositis ossificans (Post traumatic ossificans)	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.59	KS	K KH	Joint injury	Define dislocation and subluxation of joints  Explain the clinical features of joint dislocation	C/1  C/2	MK  MK	Lecture Audiovisual aid	Viva	SAQ	
UG- Sur- II- 6.60	KS	K	Fracture of Clavicle	Recall the anatomy of the clavicle, including its ossification, vascular, and neurological relations.	MK	C/1	Lecture Audiovisual aid X-ray image interpretations	Viva	MCQ SAQ	

# AIM Homoeopathy

		K		Describe the mechanism of injury leading to clavicular fractures (direct trauma, fall on outstretched hand, etc.)	MK	C/1					
		K		Classify clavicular fractures based on anatomical location	MK	C/1					
		KH		Identify clinical features of clavicular fractures, including swelling, deformity, pain, and restricted shoulder movement.	MK	C/2					
		KH		Assess for complications such as brachial plexus injury, subclavian vessel injury, and non-union.	DK	C/2					

# AIM Homoeopathy

		KH		Interpret radiographic findings of clavicular fractures using standard X-ray views  Describe the management of clavicular fracture	NK  NK	C/3  C/3			
Hom UG-Sur-II-6.61	KS	K  KH	Injury around shoulder and fracture of Humerus	Describe the anatomy of the shoulder joint and humerus, including the glenohumeral joint, rotator cuff, and neurovascular structures  Classify different types of shoulder injuries (e.g., dislocations, rotator cuff tears, labral tears) and humeral fractures (e.g., proximal, mid-shaft, distal)	C/1  C/2	MK  MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration s, Simulation-based learning	Viva OSCE	MCQ SAQ LAQ OSCE

# AIM Homoeopathy

		<p>KH</p> <p>KH</p> <p>KH</p>	<p>Identify clinical signs and symptoms of shoulder injuries (e.g., limited range of motion, deformity) and humerus fractures (e.g., swelling, pain, deformity)</p> <p>Outline the emergency management of shoulder dislocations (e.g., reduction techniques) and humeral fractures (e.g., splinting)</p> <p>Explain the complications of shoulder injuries (e.g., recurrent dislocation, rotator cuff tear) and humerus fractures (e.g., malunion, nerve injury)</p>	<p>C/2</p> <p>C/2</p> <p>C/2</p>	<p>MK</p> <p>MK</p> <p>MK</p>				
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# AIM Homoeopathy

	PBL	SH		Perform a clinical examination for shoulder injuries, and assess for humerus fractures	P/2	MK				
Hom UG-Sur-II-6.62	KS	K	Injuries around the elbow	<p>Describe the anatomy of the elbow joint, including bony structures (humerus, radius, ulna), ligaments (collateral ligaments), and neurovascular structures</p> <p>KH</p> <p>Classify common elbow injuries, including fractures (e.g., supracondylar, radial head)</p>	C/1	MK	<p>Lecture</p> <p>Audiovisual aid</p> <p>Hands-on clinical simulation,</p> <p>Patient examinations</p> <p>Practical demonstration</p> <p>Simulation-based learning</p> <p>Imaging interpretation sessions</p>	Viva OSCE	<p>MCQ</p> <p>SAQ</p> <p>LAQ</p> <p>OSCE</p>	

# AIM Homoeopathy

		KH		fractures, olecranon fracture), dislocations and soft tissue injuries		C/2	DK				
		KH		Explain the mechanisms of injury for common elbow conditions (e.g., fall on an outstretched hand leading to supracondylar fracture, elbow hyperextension causing dislocation)		C/2	MK				
		KH		Identify the clinical signs and symptoms of elbow fractures		C/2	DK				
		KH		Interpret imaging studies, including X-rays		C/2	DK				
		KH		Describe the emergency management of elbow		C/2	DK				

# AIM Homoeopathy

		KH		dislocations and fractures, including immobilization, neurovascular assessment  Recognize the complications of elbow injuries, such as stiffness, malunion, non-union, compartment syndrome, and nerve palsies	C/2	DK				
Hom UG- Sur- II- 6.63	KS	K	Injuries around elbow	Describe pulled elbow	C/1	DK	Lecture	Viva	SAQ	
Hom UG- Sur- II- 6.64	KS	K	Injuries of the forearm and wrist	Describe the anatomy of the forearm and wrist, including bones (radius, ulna, carpal bones), ligaments, muscles, tendons, and neurovascular structures	C/1	MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration s, Simulation-based learning Imaging interpretation	Viva OSCE	MCQ SAQ LAQ OSCE	

# AIM Homoeopathy

		<p>KH</p> <p>KH</p> <p>KH</p>	<p>Explain the common forearm and wrist injuries, including fractures (e.g., Colles' fracture, Monteggia fracture, dislocation, Galeazzi fracture, Smith's fracture)</p> <p>Interpret imaging studies (e.g., X-rays for fractures) to diagnose forearm and wrist injuries and assess the severity</p> <p>Describe the emergency management of forearm and wrist injuries, including immobilization (splints or casts)</p>	<p>C/2</p> <p>C/2</p> <p>C/2</p>	<p>MK</p> <p>DK</p> <p>MK</p>	<p>sessions</p>			
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# AIM Homoeopathy

Hom UG- Sur- II- 6.65	KS	KH	Injuries of hand	Explain Bennett's fracture dislocation, Rolando's fracture, fracture of metacarpals, and fracture of phalanges  Interpret imaging studies (e.g., X-rays for fractures) to diagnose hand injuries to assess the severity  Describe the management of hand injuries, including immobilization (splints or casts)	C/2  C/2  C/2	DK  NK  NK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstrations, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE	
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# AIM Homoeopathy

Hom UG- Sur- II- 6.66	KS/PBL	K	Examination of Injuries of upper limb	Recall the anatomy of upper limb bones, including the shoulder girdle, humerus, radius, ulna, and hand bones	C/1	MK	Audiovisual aids Case based discussion and demonstration Small group discussion Simulated case scenarios DOPS X-ray Interpretations OSCE	Viva	MCQ SAQ OSCE	
		K		Describe the mechanism of injury and types of fractures involving the upper limb (e.g., clavicle fractures, humeral fractures, forearm fractures, hand fractures)	C/1	MK				
		KH		Identify clinical features and signs of fractures, including swelling, deformity, pain, abnormal mobility, and functional impairment.	C/2	MK				

# AIM Homoeopathy

		SH		Perform a systematic examination of suspected fractures, including inspection, palpation, and range of motion assessment.	P/1	MK					
				Assess neurovascular status (e.g., brachial plexus, radial, ulnar, and median nerve function; vascular assessment).	P/2	MK					
				Interpret radiographic findings of fractures involving the upper limb.	P/2	DK					

Hom UG-Sur-II-6.67	KS	K	Pelvic fracture	Describe the anatomy of the pelvis, including its bones, ligaments, and major blood vessels	C/1	MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration s, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE		
PBL	KH	KH	KH	Understand the mechanism of injury in pelvic fractures (e.g., high-energy trauma, falls) and their classification (e.g., stable vs. unstable, Type A, Type B and Type C)	C/2	MK	Practical demonstration s, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE		
				Identify the clinical features of pelvic fractures, including pain, inability to bear weight, and associated injuries (e.g., genitourinary and vascular injuries )	C/2	MK					
				Perform a clinical examination to assess for pelvic fracture, including inspection, palpation, and 172 stability tests	P/2	MK					
	KS	SH	KH	Interpret imaging studies	C/2	DK					
	KS	SH		Interpret imaging studies	C/2	DK					

# AIM Homoeopathy

Hom UG- Sur- II- 6.68	KS	K	Dislocation of Hip	Describe the anatomy of the hip joint, including bones, ligaments, muscles, and blood supply	C/1	MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstrations, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE	
		KH		Understand the mechanism of injury leading to hip dislocation and fracture, including trauma from high-energy impacts (e.g., road traffic accidents, falls)	C/2	MK				
		KH		Recognize the clinical features of hip fracture dislocation, including pain, deformity, and inability to move the limb	C/2	MK				
		KH		Interpret imaging studies (X-rays, CT scans, MRIs) for the diagnosis of hip fracture	C/2	DK				

# AIM Homoeopathy

		KH		dislocation Discuss the initial emergency and different treatment options for hip fracture dislocation	C/2	DK					
		KH		Discuss potential complications of hip fracture dislocation, such as avascular necrosis (AVN), nerve injury, osteoarthritis, and thromboembolism	C/2	MK					

# AIM Homoeopathy

Hom UG- Sur- II- 6.69	KS	K	Fracture of neck of femur	Describe the anatomy of the femoral neck and its blood supply, including the role of the medial circumflex femoral artery	C/1	MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration s, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE	
		K		Understand the mechanism of injury leading to femoral neck fractures, particularly in elderly patients with osteoporosis and in high-impact trauma	C/2	MK				
		K		Recognize the clinical features of femoral neck fractures, including hip pain, shortened leg, and external rotation of the limb	C/2	MK				
		KH		Interpret imaging studies,	C/2	DK				

# AIM Homoeopathy

PBL	SH	KH		including X-rays and CT scans, for the diagnosis of femoral neck fractures  Discuss the emergency management and different treatment options for femoral neck fracture  Perform a clinical examination to assess for fracture of the neck of femur, including inspection, palpation, and assessment of limb shortening	C/2	NK					

# AIM Homoeopathy

Hom UG- Sur- II- 6.70	KS	K	Fracture shaft of femur	Describe the anatomy of the femur, focusing on the structure of the shaft, muscles, and blood supply	C/1	MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE	
		K		Understand the mechanisms of injury leading to femoral shaft fractures, including high-energy trauma like road traffic accidents and falls	C/2	MK				
		K		Recognize the clinical presentation of femoral shaft	C/2	MK				
		KH		Interpret imaging studies (X-rays, CT scans) for diagnosis and classification of femoral shaft fractures	C/2	DK				
		KH		Discuss the	C/2					

# AIM Homoeopathy

		KH		initial emergency management and treatment options for femoral shaft fracture  Discuss potential complications of femoral shaft fractures, including fat embolism syndrome, compartment syndrome, and delayed union/non-union	C/2					
Hom UG-Sur-II-6.71	KS	K	Injuries around the knee	Describe the anatomy of the knee joint, including bones, ligaments, menisci, and cartilage  Understand the mechanisms of common knee injuries, including ligament tears, meniscal	C/1  C/2	MK  MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration, Simulation-based learning Imaging interpretation sessions	Viva OSCE	MCQ SAQ LAQ OSCE	

# AIM Homoeopathy

		K		<p>injuries, fractures, and dislocations</p> <p>Recognize clinical features of knee injuries such as swelling, pain, instability, locking, and reduced range of motion</p>	C/2	MK	DOPS			
		KH		<p>Interpret imaging studies (X-rays, MRI, and CT scans) for diagnosing knee injuries, including fractures, ligament tears, and meniscal injuries</p>	C/2	DK				
		KH		<p>Discuss the initial emergency management of knee injuries and treatment options for knee injuries</p>	C/2	NK				

# AIM Homoeopathy

		K		Discuss common complications of knee injuries, such as stiffness, chronic instability, post-traumatic arthritis, and ligament failure	C/2	DK				
PBL	SH			Perform a clinical examination of the knee, including inspection, palpation, range of motion assessment, and special tests (e.g., Lachman's test, McMurray's test, Drawer test)	P/2	MK				
Hom UG-Sur-II-6.72	KS	K	Injuries to the Leg, Ankle and Foot	Describe the anatomy of the leg, ankle, and foot, including bones (tibia, fibula, tarsals, metatarsals, phalanges),	C/1	MK	Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations	Viva OSCE	MCQ SAQ LAQ OSCE	

# AIM Homoeopathy

		K	ligaments, and muscles  Understand the mechanisms of common leg, ankle, and foot injuries, including fractures (e.g., tibia, fibula, calcaneum, talus, Metatarsal and Phalanges of toes), ligament sprains (e.g., ankle sprains), tendon injuries, and dislocations	C/2	MK	Practical demonstration, Simulation-based learning Imaging interpretation sessions		
		K	Recognize the clinical features of leg, ankle, and foot injuries, such as pain, deformity, swelling, instability, and difficulty bearing weight	C/2	MK			
		KH	Interpret imaging studies	C/2	DK			

# AIM Homoeopathy

PBL	SH	KH	(X-rays, MRI, CT scans) for diagnosing fractures, ligament injuries, and dislocations in the leg, ankle, and foot	Discuss the initial emergency management and treatment options of leg, ankle, and foot injuries	Perform a clinical examination of the leg, ankle, and foot, including inspection, palpation, range of motion, and special tests	C/2	NK	MK			

# AIM Homoeopathy

Hom UG- Sur- II- 6.73	KS	K	Spinal injuries	<p>Describe the anatomy of the spine, including vertebrae, intervertebral discs, spinal cord, nerve roots, and ligaments</p> <p>Understand the mechanisms of spinal injuries, including trauma (e.g., road traffic accidents, falls), sports injuries, and pathologic fractures</p> <p>Recognize the clinical features of spinal injuries, such as neck or back pain, paralysis, sensory loss, and neurogenic shock</p> <p>Interpret imaging studies (X-rays, MRI, CT scans) for</p>	C/1    C/2   C/2  C/2	MK    MK   MK  DK	<p>Lecture Audiovisual aid Hands-on clinical simulation, Patient examinations Practical demonstration s, Simulation-based learning Imaging interpretation sessions DOPS</p>	Viva OSCE	MCQ SAQ LAQ OSCE	
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# AIM Homoeopathy

		KH		diagnosing spinal fractures, dislocations, and cord injuries							
		KH		Discuss the initial emergency management including spinal immobilization, neuroprotection and treatment options for spinal injuries	C/2	DK					
PBL	SH			Discuss common complications of spinal injuries, including spinal cord injury complications (e.g., paraparesis), pressure sores, deep vein thrombosis (DVT), and respiratory issues	C/2	DK					
				Perform a clinical examination of the spine,	P/2	MK					

# AIM Homoeopathy

				including inspection, palpation, neurological assessment, and special tests (e.g., straight-leg raise test)						
Hom UG-Sur-II-6.74	KS	K	Traumatic paraplegia	Define traumatic paraplegia and describe its common causes, such as spinal cord injury due to trauma (e.g., road traffic accidents, falls, sports injuries)  Recognize the clinical features of traumatic paraplegia, including motor and sensory deficits, autonomic dysfunction (e.g., bladder, bowel control),	C/1  C/2	MK  MK	Lecture Audiovisual aids Small group discussion Case based discussion and demonstration Simulation based learning			

# AIM Homoeopathy

				and secondary complications							
PBL	SH	KH		Discuss the initial emergency management of traumatic paraplegia, including spinal immobilization, airway management, and prevention of secondary injury	C/2	MK					
		KH		Explain the definitive treatment options for traumatic paraplegia	C/2	NK					
		KH		Discuss the long-term complications of traumatic paraplegia, including	C/2	DK					
				Perform a clinical	P/2	MK					

# AIM Homoeopathy

				examination for traumatic paraplegia, including neurological assessment (motor and sensory testing), deep tendon reflexes, and autonomic function assessment							
HO	K			Discuss the Homoeopathic therapeutics for traumatic paraplegia	C/1	MK					

# AIM Homoeopathy

**Topic: Hom UG-Sur-II.7. Diseases of Ear, Nose and Paranasal Sinuses, Throat (External/Internal) & Neck**

## Ear

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.7.1	KS	K	Ear	Review the concepts of applied anatomy of Ear-External, middle, inner ear	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	Anatomy
Hom UG-Sur-II.7.2	KS	K		Review the concepts of physiology of Ear: Hearing & Equilibrium	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	Physiology
Hom UG-Sur-II.7.3	KS	K		Discuss the steps of case taking of Ear Case	C/2	MK	Lecture, small group discussion	Viva	--	Organon Repertory and case taking
Hom UG-Sur-II.7.4	PC	SH		Observe Ear examination	P/1	MK	Observation, small group discussion	DOPS	--	

# AIM Homoeopathy

Hom UG- Sur- II.7.5	KS	K	Disease of External Ear	Discuss Congenital defects, trauma & infections of external ear  Management of Trauma of Ear  Discuss Wax, Foreign bodies, Neoplasm  Management of Wax & Foreign body removal	C/2  C/2  C/2	MK  MK  MK	Lecture, small group discussion  Audiovisual aids		MCQ SAQ	Anatomy
Hom UG- Sur- II.7.6	HO	KH	Homoeopathic therapeutics of external ear	Describe the homeopathic remedies for diseases of external ear	C/1	MK	Lecture Small group discussion  Inter departmental seminar		SAQ	Materia medica  Repertory
Hom UG- Sur- II.7.7	KS	K	Disease of Middle ear	Discuss aetiology of ASOM  Discuss Pathology of	C/1  C/1	MK  MK	Lecture, small group discussion  Audiovisual aids	Viva	MCQ SAQ LAQ	Anatomy

# AIM Homoeopathy

				<p>ASOM</p> <p>Describe Clinical features of ASOM</p> <p>Discuss investigations in ASOM</p> <p>Describe the treatment of ASOM – procedure: Aural toilet &amp; Surgical: myringotomy</p>	C/2    C/1	MK    NK				
Hom UG- Sur- II.7.8	HO	KH	Homoeopathic therapeutics of ASOM	Describe the homeopathic remedies for ASOM	C/1	MK	Lecture Small group discussion  Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
Hom UG- Sur- II.7.9	KS	K	Disease of Middle ear: Chronic suppurative otitis media	<p>Describe the types of CSOM</p> <p>Discuss the etiology of CSOM</p> <p>Describe the pathology of CSOM</p>	C/1   C/2  C/1	MK   MK  MK	Lecture Small group discussion  Inter departmental seminar	Viva	MCQ SAQ LAQ	

# AIM Homoeopathy

				<p>Describe the clinical features of CSOM</p> <p>Discuss investigations in CSOM</p> <p>Discuss the differential diagnosis CSOM</p> <p>Describe the management of CSOM: conservative and surgical – tympanoplasty, mastoidectomy</p> <p>Describe the complications of Otitis media: Mastoid infection, intracranial infection, extracranial infection</p>	C/2	MK					
Hom UG-Sur-II.7.10	HO	KH	Homoeopathic therapeutics of CSOM	Describe homeopathic remedies for CSOM	C/1	MK	Lecture Small group discussion Inter departmental seminar	Viva	SAQ	Materia Medica Repertory	
Hom UG-Sur-II.7.11	KS	K	Disease of middle ear: Chronic Non suppurative	Describe Eustachian catarrh, Serous otitis media, atelectasis of the tympanum, tympanosclerosis	C/2	DK	Lecture Small group discussion	Viva	SAQ	Anatomy	

# AIM Homoeopathy

			otitis Media							
Hom UG- Sur- II.7.12	KS	K	Earache	Define Aetiology, investigation of Otalgia	C/2	MK	Lecture Small group discussion	Viva	SAQ	
Hom UG- Sur- II.7.13	HO	KH	Homeopathic Therapeutics of Earache	Describe homoeopathic remedies for earache	C/2	MK	Lecture Small group discussion  Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
Hom UG- Sur- II.7.14	KS	K	Otorrhea	Describe Aetiology, Features, Investigation and management of Otorrhea	C/2	MK	Lecture Small group discussion	Viva	SAQ	
Hom UG- Sur- II.7.15	HO	KH	Homeopathic Therapeutics Otorrhea	Describe homoeopathic remedies for Otorrhea	C/2	MK	Lecture Small group discussion  Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
Hom UG.Sur- II.7.16	KS	K	Deafness	Describe Types of Deafness  Discuss Causes of Deafness  Discuss Management of Deafness	C/2  C/2	MK MK	Lecture Small group discussion	Viva	SAQ	

# AIM Homoeopathy

				Hearing aids & Implants	C/2	NK				
Hom UG-Sur-II.7.17	PBL	SH		Demonstrate examination of case of Deafness – hearing test	P/2	MK	Clinical demonstration. AV mode	Clinical demonstration	Clinical demonstration	
Hom UG-Sur-II.7.18	HO	KH	Homeopathic Therapeutics Deafness	Describe homoeopathic remedies for Deafness	C/2	MK	Lecture Small group discussion Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
Hom UG-Sur-II.7.19	KS	K	Tinnitus	Describe Types of Tinnitus  Discuss Causes of Tinnitus  Discuss Investigations and Management of Tinnitus	C/2  C/2  C/2	MK  MK  NK	Lecture Small group discussion	Viva	SAQ	
Hom UG-Sur-II.7.20	HO	KH	Homeopathic Therapeutics Tinnitus	Describe homoeopathic remedies for Tinnitus	C/2	MK	Lecture Small group discussion Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
Hom UG-	KS	K	Vertigo	Describe Causes of Vertigo	C/2	MK	Lecture Small group	Viva	SAQ	

# AIM Homoeopathy

Sur-II.7.21				Discuss Investigations and Management of Vertigo	C/2	NK	discussion			
Hom UG-Sur-II.7.22	PBL	SH		Demonstrate examination of the case of Vertigo	P/2	MK	Clinical demonstration. AV mode	Clinical demonstration	Clinical demonstration	
Hom UG-Sur-II.7.23	HO	K	Homeopathic Therapeutics Vertigo	Describe homoeopathic remedies for Vertigo	C/2	MK	Lecture Small group discussion Inter departmental seminar	Viva	SAQ	Materia Medica Repertory
Hom UG-Sur-II.7.24	KS HO	K K		Discuss aetiology, pathology, clinical features, investigation, management of Menier's disease  Discuss homoeopathic therapeutics of Menier's disease	C/2 C/1	MK MK	Lecture Small group discussion AV mode	Viva	MCQ SAQ	
Hom UG-Sur-II.7.25	KS	K		Discuss aetiology, pathology, clinical features, investigation, management of Benign positional vertigo, acoustic neuroma	C/2	MK	Lecture Small group discussion	Viva	MCQ SAQ	

# AIM Homoeopathy

	HO	K		Discuss homoeopathic therapeutics of Benign positional vertigo, acoustic neuroma	C/1	MK	AV mode			Materia Medica Repertory
Hom UG- Sur- II.7.26	KS HO	K K		Discuss aetiology, pathology, clinical features, investigation, management of Facial paralysis, Bell's Palsy  Discuss homoeopathic therapeutics of Facial paralysis, Bell's Palsy	C/2  C/1	MK MK	Lecture Small group discussion AV mode	Viva	MCQ SAQ	Materia Medica Repertory

# AIM Homoeopathy

## Nose and Paranasal sinuses

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.7.27	KS	K	Nose & paranasal sinus	Review the concepts of applied anatomy of Nose and paranasal sinus	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	Anatomy, Physiology
Hom UG-Sur-II.7.26	KS	K		Review the concepts of functions of Nose and paranasal sinus	C/2	MK	Lecture Audiovisual mode			
Hom UG-Sur-II.7.28	KS	K	Case Taking	Discuss the steps of case taking of Case of Nose and Paranasal sinus	C/2	MK	Lecture, small group discussion	Viva	--	Organon Repertory and case taking
Hom UG-Sur-II.7.29	PC	SH	Examination of Nose and Paranasal sinus	Observe examination of Nose: Anterior Rhinoscopy & Posterior Rhinoscopy & paranasal sinus	P/1	MK	Observation, small group discussion	DOPS	--	
Hom UG-Sur-	KS	K	Disease of external nose	Discuss Deformity, fracture of nose, vestibulitis,	C/1	NK	Lecture Audiovisual mode	Viva	MCQ/SAQ/LAQ	

# AIM Homoeopathy

II.7.30										
Hom UG- Sur- II.7.31	KS	K	Deviated Nasal Septum	Describe Etiology of DNS  Discuss Pathology of the DNS  Discuss the symptoms, complication, Differential diagnosis of DNS  Discuss management of DNS  Discuss homoeopathic therapeutics of DNS	C/1  C/1  C/1  C/1  C/1	MK  MK  MK  NK  DK	Lecture Audiovisual mode	Viva	MCQ/SAQ	
	HO	K								<b>Materia Medica Repertory</b>
Hom UG- Sur- II.7.32	KS	K	Rhinitis	Discuss Types of Rhinitis	C/1	MK	Lecture Audiovisual mode	Viva	MCQ/SAQ	
Hom UG- Sur- II.7.33	KS	K	Rhinitis	Describe aetiology, clinical feature, D/D, Complications, treatment of Common cold  Discuss homoeopathic therapeutics of common cold	C/1  C/2	MK  MK	Lecture Audiovisual mode	Viva	MCQ/SAQ/LA Q	
	HO	K								<b>Materia Medica Repertory</b>

# AIM Homoeopathy

	KS	K		Describe different types of Chronic rhinitis e.g Chronic simple rhinitis, chronic hypertrophic rhinitis, Atrophic rhinitis, Rhinitis sciaa, Rhinosporidiosis, Rhinoscleroderma	C/2	NK				
Hom UG-Sur-II.7.34	KS	K	Allergic rhinitis	<p>Discuss etiology of Allergic rhinitis</p> <p>Describe mechanism and pathology of Allergic rhinitis</p> <p>Discuss clinical types and symptoms of allergic rhinitis</p> <p>Describe diagnosis and treatment of allergic rhinitis</p>	<p>C/1</p> <p>C/1</p> <p>C/1</p> <p>C/1</p>	<p>MK</p> <p>MK</p> <p>MK</p> <p>DK</p>	<p>Lecture</p> <p>Audiovisual mode</p> <p>Small group discussion</p>	Viva	MCQ/SAQ/LA Q	
Hom UG-Sur-II.7.35	KS	K	Vasomotor Rhinitis	Describe aetiology, pathology, clinical features, treatment of Vasomotor rhinitis	C/1	DK	Lecture	Viva	MCQ/SAQ	
Hom UG-	HO	KH	Therapeutics of Rhinitis	Describe homoeopathic treatment of rhinitis	C/2	MK	Lecture AV	Viva	MCQ/SAQ/LA Q	<b>Materia Medica Repertory</b>

# AIM Homoeopathy

Sur-II.7.36							Small group discussion			
Hom UG-Sur-II.7.37	KS	K	Nasal Polyp	Define Nasal Polyp  Describe types, etiology, pathology, clinical features, investigation of Nasal Polyp  Describe management of nasal polyp	C/1  C/2  C/1	MK  MK  DK	Lecture Audiovisual mode	Viva	MCQ/SAQ/LA Q	
Hom UG-Sur-II.7.38	HO	KH	Therapeutics of Nasal polyp	Describe homoeopathic treatment for nasal polyp	C/2	MK	Lecture AV Small group discussion	Viva	MCQ/SAQ/LA Q	<b>Materia Medica Repertory</b>
Hom UG-Sur-II.7.39	KS	K	Miscellaneous disease of Nose and sinus	Discuss Cerebrospinal rhinorrhoea, Foreign body, rhinolith, choanal atresia, oroantral fistula, proptosis	C/1	NK	Lecture Audiovisual mode	Viva	MCQ/SAQ	
Hom UG-Sur-II.7.40	KS	K	Epistaxis	Describe Causes, site, clinical features, investigation and management of Epistaxis	C/1	MK	Lecture Audiovisual mode	Viva	MCQ/SAQ	
Hom UG-Sur-II.7.41	HO	KH		Describe homoeopathic treatment for epistaxis	C/2	MK	Lecture AV Small group discussion	Viva	MCQ/SAQ/LA Q	<b>Materia Medica Repertory</b>
Hom UG-Sur-	KS	K	Sinusitis	Describe cause, pathology, clinical features, investigation,	C/1	MK	Lecture Audiovisual mode	Viva	MCQ/SAQ/LA Q	

# AIM Homoeopathy

II.7.42				differential diagnosis, complication of Acute Maxillary sinusitis  Discuss management of Acute Maxillary sinusitis	C/1	NK				
Hom UG-Sur-II.7.43	KS	K		Describe cause, pathology, clinical features, investigation, differential diagnosis, complication of Acute frontal sinusitis  Discuss management of Acute frontal sinusitis	C/1	MK	Lecture Audiovisual mode	Viva	MCQ/SAQ/LAQ	
Hom UG-Sur-II.7.44	KS	K		Discuss Management of chronic maxillary sinusitis & chronic frontal sinusitis	C/1	NK	Lecture Audiovisual mode	Viva	MCQ/SAQ	
Hom UG-Sur-II.7.45	KS	K	Tumor, cyst of Nose and Sinus	Discuss benign tumor & Cyst & Malignant tumor of Nose & Sinus	C/1	NK	Lecture Audiovisual mode	Viva	MCQ/SAQ	
Hom UG-Sur-II.7.46	HO	KH	Therapeutics of Nose and paranasal sinus diseases	Describe homoeopathic treatment for Sinusitis  Discuss homoeopathic treatment for the cyst and tumour of nose and sinus	C/2	MK	Lecture AV Small group discussion	Viva	MCQ/SAQ/LAQ	<b>Materia Medica Repertory</b>

# AIM Homoeopathy

## Pharynx

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.7.47	KS	K	Pharynx	Review the concepts of applied anatomy of pharynx	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Anatomy</b>
Hom UG-Sur-II.7.48	KS	K		Review the concepts of functions of Pharynx	C/2	MK	Lecture Audiovisual mode			<b>Physiology</b>
Hom UG-Sur-II.7.49	PC	SH	Examination of Pharynx	Observe examination of Pharynx	P/1	MK	Observation, small group discussion	DOPS	--	
Hom UG-Sur-II.7.50	KS	K	Tonsillitis	Describe aetiology, types, sign& symptoms, differential diagnosis complication of acute and chronic tonsilitis  Management of acute and chronic tonsilitis, tonsillectomy	C/1  C/1	MK  NK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Anatomy</b>

# AIM Homoeopathy

Hom UG-Sur-II.7.51	KS	K	Adenoids	<p>Describe aetiology, clinical features, diagnosis, differential diagnosis of adenoids</p> <p>Management of adenoids, adenoidectomy</p>	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Anatomy</b>
Hom UG-Sur-II.7.52	HO	KH	Therapeutics of tonsilitis & Adenoids	Describe homoeopathic treatment for Acute and chronic tonsillitis and adenoids	C/2	MK	Lecture AV Small group discussion	Viva	MCQ/SAQ/LAQ	<b>Materia Medica Repertory</b>
Hom UG-Sur-II.7.53	KS	K	Diseases of pharynx	<p>Describe aetiology, pathology, clinical features, differential diagnosis of acute and chronic pharyngitis</p> <p>Discuss Vincent's angina, diphtheritic pharyngitis, Thrush,</p> <p>Discuss Pharyngeal Abscess: Quinsy, acute &amp; chronic retropharyngeal abscess, parapharyngeal abscess</p> <p>Discuss pharyngeal</p>	C/2	MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Anatomy Pathology</b>

# AIM Homoeopathy

				diverticulum, stylohyoid syndrome, Globus hystericus  Describe types, aetiology, symptoms, diagnosis and treatment of pharyngeal tumours	C/2  C/1	NK  NK				
Hom UG-Sur- II.7.54	HO	KH	Homoeopathic therapeutic principles for Pharynx	Describe homeopathic treatment for Acute & chronic pharyngitis  Describe homoeopathic treatment for pharyngeal abscess, tumours other diseases	C/1  C/1	MK  NK	Lecture AV Small group discussion	Viva	MCQ/SAQ/LA Q	<b>Materia Medica Repertory</b>

## Larynx and Trachea

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-	KS	K	Larynx	Review the concepts of applied anatomy of	C/2	MK	Lecture Audiovisual	Viva	MCQ SAQ	<b>Anatomy</b>

# AIM Homoeopathy

II.7.55				Larynx			mode			
Hom UG-Sur-II.7.56	KS	K		Review the concepts of functions of Larynx	C/2	MK	Lecture Audiovisual mode			<b>Physiology</b>
Hom UG-Sur-II.7.57	PC	SH	Examination of Larynx	Observe examination of Larynx	P/1	MK	Observation, small group discussion	DOPS	--	
Hom UG-Sur-II.7.58	KS	K	Laryngitis	Describe aetiology, types, sign& symptoms, differential diagnosis complication of acute and chronic Laryngitis  Management of acute and chronic Laryngitis  Homoeopathic treatment for acute & chronic Laryngitis	C/1  C/1  C/2	MK  NK  MK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Anatomy</b>
Hom UG-Sur-II.7.59	KS	K	Disease of Larynx	Describe aetiology, types, sign& symptoms, differential diagnosis complication of Laryngeal Paralysis  Discuss Homoeopathic treatment for the laryngeal paralysis	C/1  C/1	DK  NK	Lecture Audiovisual mode	Viva	MCQ SAQ	<b>Anatomy</b>
	HO	KH								

# AIM Homoeopathy

	KS	K		Discuss aetiology, symptoms, investigation & management of Laryngeal web, singer's nodes, Laryngocele, stridor	C/2	NK					
	KS	K		Discuss aetiology, symptoms, types, investigation & management of Laryngeal tumors	C/2	MK					
	HO	KH		Discuss Homoeopathic treatment for stridor, laryngeal web, tumors	C/1	NK					
	KS	KH		Discuss aetiology, mechanism, investigation & treatment of Hoarseness of voice & Disorder of voice	C/1	MK					
	HO	K		Discuss homoeopathic treatment for hoarseness of voice	C/1	MK	Hands-on imaging interpretation				
	PBL	KH		Interpret imaging techniques (e.g., X-rays, CT scans, MRI, ) to diagnose Laryngeal	C/1	DK					

# AIM Homoeopathy

disease											
Hom UG-Sur-II.7.60	KS	K	Trachea	Describe classification, functions, indication, contraindication, complication and sequelae of tracheostomy	C/1	MK	Lecture Audiovisual mode	Viva	MCQ SAQ		
	PBL	KH		Procedure of tracheostomy	C/2	NK	DOPS				

## Thyroid

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.7.61	KS	K	Disease of Thyroid	Discuss anatomy and physiological aspects of Thyroid Gland	C/1	DK	Lecture Audiovisual mode	Viva	MCQ SAQ	Pathology
	KS	K		Describe investigations used for investigation of thyroid gland – USG, FNAC, PET, CT, MRI, Isotope scanning	C/1	DK				

# AIM Homoeopathy

	<b>KS</b>	<b>K</b>		Describe cause, types, Clinical features, diagnosis of thyroid swelling (Goiter)	C/1	MK						<b>Materia Medica Repertory</b>
	<b>HO</b>	<b>KH</b>		Discuss homoeopathic medicines for the Goitre	C/2	MK						<b>Materia Medica Repertory</b>
	<b>KS</b>	<b>K</b>		Describe cause, clinical features, investigation of Hypothyroidism	C/1	MK						<b>Materia Medica Repertory</b>
	<b>HO</b>	<b>KH</b>		Discuss homoeopathic treatment for the hypothyroidism	C/2	MK						<b>Materia Medica Repertory</b>
	<b>KS</b>	<b>K</b>		Describe cause, clinical features, investigation of Hyperthyroidism, thyrotoxicosis	C/2	MK						<b>Materia Medica Repertory</b>
	<b>HO</b>	<b>KH</b>		Discuss homoeopathic treatment for the hyperthyroidism, thyrotoxicosis	C/2	MK						<b>Materia Medica Repertory</b>

# AIM Homoeopathy

	<b>KS</b> <b>HO</b> <b>PBL</b>	<b>K</b> <b>KH</b> <b>SH</b>		Describe aetiology, types, clinical features, investigation of Cancer of Thyroid  Discuss homoeopathic treatment for the cancer of thyroid  Describe the physical examination of the thyroid gland	C/1  C/2  P/2	NK  DK  DK	Lecture, Audiovisual Integrated Teaching  Audiovisual Demonstration			<b>Materia Medica Repertory</b>
Hom UG-Sur-II.7.62	KS  PBL/PC	K  K  S  SH	Examination of Neck swelling	Describe the boundaries, triangles, and important anatomical landmarks of the neck.  Classify neck swellings based on their location (Midline and lateral swellings ) and pathology  Obtain a detailed history focusing on onset, duration, progression, associated symptoms, and systemic  Demonstrate thorough physical examination	C/1  C/1  P/1  P/2	MK  MK  MK  MK	Lecture Audiovisual aids Simulated patients Case based discussion and demonstration DOPS  Viva Observation of Clinical demonstration	LAQ OSCE		

# AIM Homoeopathy

		SH		of neck swelling including, inspection, palpation and auscultation  Examine the lymph nodes, thyroid gland, and other structures to identify associated findings.	P/2	MK				
		KH		Correlate clinical findings with likely causes, including inflammatory lymphadenopathy, thyroid swellings, and neoplastic lesions.	C/3	MK				

## Topic: Hom UG-Sur-II.8. Diseases of breast-

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.8.1	KS	K	Describe the anatomy of the breast	Identify lobes, ducts, and connective tissue of the breast	C/1	MK	Lecture, Diagrams, Models, Audiovisual aids	Viva	MCQ, SAQ	Anatomy
Hom UG-Sur-II.8.2	KS	K	Anatomy: Vascular and lymphatic supply	Describe vascular and lymphatic supply	C/1	MK	Lecture, Diagrams, Models	Viva	MCQ, SAQ	Anatomy
Hom	KS	KH	Anatomy: Clinical	Relate anatomy to	C/2	MK	Lecture,	Viva	MCQ, SAQ	Anatomy

# AIM Homoeopathy

UG-Sur-II.8.3			relevance	common breast diseases			Diagrams, Models			
Hom UG-Sur-II.8.4	KS	K	Mammography: Diagnostic and screening utility	Interpret mammography findings	C/3	MK	Case-Based Learning	Viva	SAQ	Radiology
Hom UG-Sur-II.8.5	PC	KH	Mammography: Diagnostic and screening utility	Discuss indications and limitations of mammography  Differentiate between screening and diagnostic mammography	C/3	DK	Case-Based Learning	Viva	SAQ	Radiology
Hom UG-Sur-II.8.6	KS	K KH	Aberration of Normal Development and Involution (ANDI)  Pathophysiology, clinical features, and imaging	Define ANDI and its subtypes	C/1  C/2	MK  MK	Lecture, Case Studies	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.7	PC	K	Aberration of Normal Development and Involution (ANDI)  Clinical features and diagnostic tools including Imaging	Discuss clinical presentations and diagnostic tools	C/3	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.8	HO	K	Aberration of Normal Development and Involution (ANDI)	Explain Homeopathic therapeutics for ANDI	C/1	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	

# AIM Homoeopathy

			Homoeopathic management							
Hom UG-Sur-II.8.9	KS	K	Fibroadenosis and Fibrocystic Disease Etiopathogenesis	Define & Differentiate between fibroadenosis and fibrocystadenosis	C/2	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.10	KS	K	Fibroadenosis and Fibrocystic Disease Clinical features & Investigations	Describe clinical features of Fibroadenosis and Fibrocystic Disease  Describe investigations for Fibroadenosis and Fibrocystic Disease	C/2  C/2	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.11	HO	K	Fibroadenosis and Fibrocystic Disease Homeopathic Therapeutics	Discuss management strategies, including homeopathy	C/2	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.12	KS	K	Phyllodes Tumour -Tumour classification	Define & Classify phyllodes tumour	C/1	MK	Lecture	Viva	MCQ SAQ	
Hom UG-Sur-II.8.13	PC	K	Phyllodes Tumour - Clinical features & Investigations	Describe clinical features & investigations	C/1	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.14	HO	K	Phyllodes Tumour Homeopathic Therapeutics	Discuss management strategies, including homeopathy	C/1	MK	Lecture, Case Studies	Viva,	MCQ, SAQ, LAQ	
Hom UG-	KS	K	Mastalgia: Types and	- Identify types of mastalgia (cyclical,	C/1	MK	Lecture, Case-Based	Viva,	MCQ, SAQ, LAQ	

# AIM Homoeopathy

Sur-II.8.15			pathophysiology	non-cyclical)			Learning			
Hom UG-Sur-II.8.16	PC	K KH	Mastalgia: Diagnosis and treatment	Correlate mastalgia with hormonal changes  Explain treatment approaches	C/1  C/2	MK  DK	Lecture, Small Group Discussion	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.17	HO	K	Mastalgia: Homeopathic therapeutics	- Discuss homeopathic management for cyclical mastalgia	C/1	MK	Lecture	Viva,	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.18	KS	K	Traumatic Fat Necrosis: Aetiopathogenesis	Explain causes and clinical findings of fat necrosis	C/2	MK	Lecture, Small Group Discussion	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.19	PC	KH KH	Traumatic Fat Necrosis: Diagnosis and treatment	Discuss imaging findings and differential diagnoses  Outline management strategies	C/2  C/2	DK  DK	Case-Based Learning	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.20	HO		Traumatic Fat Necrosis: Homeopathic therapeutics	- Discuss homeopathic management for cyclical mastalgia	C/1	MK	Lecture, Case-Based Learning	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.21	KS	K KH	Galactocele: Etiology and imaging	Define galactocele  Discuss clinical and imaging findings	C/1  C/2	MK  MK	Lecture, Case-Based Learning	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.22	HO	K	Galactocele: Homeopathic therapeutics	Discuss the homeopathic treatments for galactocele	C/1	MK	Lecture, Case-Based Learning	Viva,	MCQ, SAQ	
Hom	KS	K	Mastitis&	Differentiate between	C/1	MK	Lecture, Case-	Viva,	MCQ, SAQ	

# AIM Homoeopathy

UG-Sur-II.8.23			Antibioma: Pathogenesis and classification	infective and non-infective mastitis  Describe Antibioma	C/1	MK	Based Learning			
Hom UG-Sur-II.8.24	PC	KH	Mastitis: Diagnosis and treatment	Discuss diagnostic methods - Explain medical and surgical management options	C/2	MK	Lecture, Case-Based Learning	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.25	HO	K	Mastitis: Homeopathic therapeutics	- Discuss homeopathic options for mastitis management	C/1	MK	Lecture, Case-Based Learning	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.26	KS	K	Duct Ectasia: Pathogenesis and diagnosis	Identify clinical presentations and imaging findings	C/3	DK	Small Group Discussion	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.27	PC	K	Mondor's Disease: Clinical and management	Explain the management of superficial thrombophlebitis (Mondor's disease)	C/3	NK	Lecture, Case-Based Learning	Viva,	MCQ, SAQ	
Hom UG-Sur-II.8.28	KS	KH	Breast Cysts: Pathogenesis and classification	Differentiate simple and complex cysts	C/1	MK	Lecture, Case-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-II.8.29	KS	K	Breast Cysts: Diagnosis and treatment	Explain imaging and aspiration techniques	C/2	MK	Case-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-II.8.30	HO	K	Breast Cysts: Homeopathy	Discuss homeopathic treatments for breast cysts	C/1	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ	
Hom	KS	K	Galactorrhoea:	Explain hormonal	C/2	MK	Lecture, Small	Viva	MCQ, SAQ	

# AIM Homoeopathy

UG-Sur-II.8.31			Pathogenesis and endocrinology	and systemic causes of galactorrhoea			Group Discussion			
Hom UG-Sur-II.8.32	KS	K K KH	Gynaecomastia:	Define Gynaecomastia  Enumerate the causes of Gynaecomastia  Discuss surgical and medical treatment options	C/1  C/2	MK  MK  DK	Lecture, Case-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-II.8.33	HO	K	Homeopathic management of Gynaecomastia	Outline homeopathic approaches to treating gynaecomastia	C/1	MK	Lecture	Viva	MCQ, SAQ	
Hom UG-Sur-II.8.34	KS	K	Mammary Fistula: Etiology and pathogenesis	Explain causes and clinical presentation of mammary fistula	C/3	DK	Lecture, Case-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-II.8.35	KS	K K KH KH	Carcinoma Breast	Classify carcinoma of the breast  Explain the risk factors and etiopathogenesis of breast cancer  Identify the clinical features of breast cancer, including symptoms and signs  Outline the role of	C/1  C/2  C/2  C/2	MK  MK  MK  DK	Lecture Audiovisual aids	Viva	MCQ, SAQ, LAQ	Materia Medica Repertory

# AIM Homoeopathy

		KH		diagnostic tools such as Mammogram, Ultrasound and biopsy  Explain the staging of breast cancer based on TNM classification  Discuss the treatment options  Discuss the complications of breast cancer and its treatments	C/2  C/2  C/3	MK  DK  NK				
Hom UG-Sur-II.8.36	HO	K	Carcinoma Breast: Homeopathic therapeutics	- Discuss homeopathic remedies for carcinoma breast	C/1	Must Know	Case-Based Learning	Viva	MCQ, SAQ, LAQ	
Hom UG-Sur-II.8.37	KS	K	Male Breast Carcinoma: Clinical presentation	Recognize symptoms and diagnostic signs	C/1	DK	Lecture, Small Group Discussion	Viva	MCQ, SAQ	
Hom UG-Sur-II.8.38	KS	K	Nipple Retraction: Diagnosis and treatment	Discuss causes, diagnostic techniques, and management	C/2	MK	Case-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-	HO	K	Homeopathy: Male Breast Carcinoma	Outline homeopathic approaches to male breast carcinoma	C/1	MK	Lecture	Viva	MCQ, SAQ	

# AIM Homoeopathy

II.8.39											
Hom UG- Sur- II.8.40	KS/PBL	K	Breast examination	List common conditions affecting the breast both benign and malignant lesions  Describe the clinical features of breast diseases  Explain the indications and techniques of breast examination  Observe breast examination.	C/1	MK	Lecture Clinical demonstrations Audiovisual aids DOPS Case based learning Image interpretations Integrated case discussion and examination with Gynaecology department	Viva	SAQ OSCE (Examination skills, Case presentation)	Gynecology	
		K			C/1	MK					
		K			C/2	MK					
		S			P/1						
		SH			P/2						
		S			P/3	MK					
		KH			C/3	MK					

# AIM Homoeopathy

Topic: HOM UG-SUR-II.9. Ophthalmology -

SI No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.9.1	KS	K	Describe the anatomy and physiology of vision	Identify the anatomy of the eye, including cornea, lens, retina, and optic nerve, orbit	C/1	MK	Lecture, Audiovisual aids	Viva	MCQ, SAQ	Anatomy Physiology
				Describe the physiology of vision, including accommodation, color vision, and adaptation Visual pathway	C/1					
				Explain reflex arcs like pupillary and corneal reflexes	C/1					
Hom UG-Sur-II.9.2	KS	K	Optics: Basics of refraction	Explain the principles of refraction, accommodation, and visual acuity	C/2	MK	Lecture, Audiovisual aids	Viva	MCQ, SAQ	Physiology
Hom UG-Sur-II.9.3	KS	K	Define, classify and describe the management of refractive errors.	Definition of myopia, hypermetropia and astigmatism	C/1	MK	Lecture, Audiovisual aids	Viva	MCQ, SAQ, LAQ	
				Describe the etiopathogenesis, Types, Clinical	C/2	MK				

# AIM Homoeopathy

		<b>KH</b>		features, investigations & management of myopia, hypermetropia, astigmatism.  Describe the indications and advantages, complications of contact lenses	C/2	DK				
<b>Hom UG-Sur-II.9.4</b>	<b>PC</b>	<b>SH</b>	Demonstrate the steps in performing the visual acuity assessment and colour vision	Assess visual acuity using Snellen's chart, pin hole testing and interpret the findings  Assess near vision using Times new Roman charts. Assess color vision using Ishihara's color plates	P/2	MK	DOAP, Case study	Viva, DOAP	DOAP	
<b>Hom UG-Sur-II.9.5</b>	<b>HO</b>	<b>K</b>	Homeopathic management of refractive errors.	Discuss the Homeopathic management of refractive errors.	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.6</b>	<b>KS</b>	<b>K</b>	Diseases of Conjunctiva	Discuss causes and clinical features of conjunctivitis	C/2	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.7</b>	<b>PC</b>	<b>K</b>	Diseases of Conjunctiva	Explain diagnostic and therapeutic approaches for bacterial, viral, and	C/2	DK	Lectures, Case-Based Learning	Viva	MCQ, SAQ, LAQ	

# AIM Homoeopathy

				allergic conjunctivitis						
<b>Hom UG-Sur-II.9.8</b>	<b>HO</b>	<b>K</b>	Homeopathic management of Diseases of Conjunctiva.	Discuss the Homeopathic management of Diseases of Conjunctiva.	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	<b>Materia Medica Repertory</b>
<b>Hom UG-Sur-II.9.9</b>	<b>KS</b>	<b>K</b>	Diseases Of Cornea	Describe corneal anatomy and its role in refractive power	C/1	MK	Lecture, Audiovisual aids, Models	Viva	MCQ, SAQ	<b>Anatomy</b>
<b>Hom UG-Sur-II.9.10</b>	<b>KS</b>	<b>K</b>	Diseases Of Cornea	Discuss the aetiology, and clinical features of Keratitis, Corneal ulcers and Corneal abrasions	C/2	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ, LAQ	
		<b>KH</b>		Discuss management of keratitis, ulcers, and corneal abrasions	C/2	DK				
<b>1 Hom UG-Sur-II.9.11</b>	<b>HO</b>	<b>K</b>	Homeopathic management of Diseases of Cornea.	Discuss the Homeopathic management of Diseases of Cornea.	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.12</b>	<b>KS</b>	<b>K</b>	Glaucoma	Define Glaucoma	C/1	MK	Lecture, Models, Case studies	Viva	MCQ, SAQ, LAQ	
		<b>K</b>		Differentiate types of glaucoma (open-angle, angle-closure)	C/2	MK				
<b>Hom UG-Sur-II.9.13</b>	<b>PC</b>	<b>KH</b>	Glaucoma: Clinical features, Diagnostic tools and treatment	Describe the clinical features of Glaucoma. Explain the use of	C/2	MK	Lectures, Simulation, Case Studies	Viva	MCQ, SAQ, LAQ	

# AIM Homoeopathy

				tonometry, perimetry, and OCT in diagnosis						
<b>Hom UG-Sur-II.9.14</b>	<b>HO</b>	<b>K</b>	Homeopathic management of Glaucoma	Discuss the Homeopathic management of Glaucoma.	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.15</b>	<b>KS</b>	<b>K</b>	Retina: Structural and functional aspects	Explain retinal anatomy, including layers and blood supply	C/1	MK	Lecture, Models	Viva	MCQ, SAQ	<b>Anatomy</b>
<b>Hom UG-Sur-II.9.16</b>	<b>PC</b>	<b>K</b> <b>K</b> <b>KH</b>	Retinal diseases	Recognize common retinal diseases (e.g., diabetic retinopathy, retinal detachment, ARMD)  Describe the clinical features and pathophysiology of retinal diseases.  Discuss management of common retinal diseases (diabetic retinopathy, AMD)	C/1  C/2  C/2	MK  MK  DK	Lecture, Problem-Based Learning	Viva	MCQ, SAQ	
<b>Hom UG-Sur-II.9.17</b>	<b>HO</b>	<b>K</b>	Homeopathic management of Retinal diseases	Discuss the Homeopathic management of Retinal diseases	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.18</b>	<b>KS</b>	<b>K</b>	Diseases of Sclera	Identify structural features and common disorders of the sclera	C/1	MK	Lecture, Models	Viva	MCQ, SAQ	

# AIM Homoeopathy

<b>Hom UG- Sur- II.9.19</b>	<b>PC</b>	<b>K</b>	Diseases of Sclera	Discuss scleritis and episcleritis and their management	C/2	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ	
<b>Hom UG- Sur- II.9.20</b>	<b>HO</b>	<b>K</b>	Homeopathic management of Diseases of Sclera	Discuss the Homeopathic management of Diseases of Sclera	C/1	MK	Lecture	Viva	MCQ, SAQ	
<b>Hom UG- Sur- II.9.21</b>	<b>KS</b>	<b>K</b>	Diseases of the uveal tract	Explain the structure and role of the uveal tract	C/1	MK	Lecture, Models	Viva	MCQ, SAQ	
<b>Hom UG- Sur- II.9.22</b>	<b>KS</b>	<b>K</b>	Diseases of the uveal tract	Discuss types of uveitis	C/2	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ, LAQ	
<b>Hom UG- Sur- II.9.23</b>	<b>HO</b>	<b>K</b>	Diseases of the uveal tract	Discuss the Homeopathic management of Diseases of the uveal tract	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG- Sur- II.9.24</b>	<b>KS</b>	<b>K</b>	Diseases of the lens	Explain lens structure and its role in focusing	C/1	MK	Lecture, Models	Viva	MCQ, SAQ, LAQ	<b>Anatomy</b>
<b>Hom UG- Sur- II.9.25</b>	<b>KS</b>	<b>K</b>	Diseases of the lens	Discuss types of cataract and surgical options	C/2	MK	Lecture, Small Group Discussion, Case based Learning	Viva	MCQ, SAQ, LAQ	
<b>Hom UG- Sur- II.9.26</b>	<b>HO</b>	<b>K</b>	Diseases of the lens	Discuss the Homeopathic management of Diseases of the lens	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom</b>	<b>KS</b>	<b>K</b>	Neuro-	Explain the	C/3	DK	Lecture, Small	Viva	MCQ,	<b>Physiology,</b>

# AIM Homoeopathy

UG-Sur-II.9.27			ophthalmological disorders	relationship between visual pathways and neurological disorders			Group Discussion,		SAQ,	Practice of Medicine
2 Hom UG-Sur-II.9.28	PC	K	Neuro-ophthalmological disorders	Discuss optic neuritis, papilledema, and cranial nerve palsies affecting vision	C/2	MK	Lecture, Small Group Discussion, Case based Learning	Viva	MCQ, SAQ,	Practice of Medicine
Hom UG-Sur-II.9.29	HO	K	Neuro-ophthalmological disorders	Discuss the Homeopathic management of Neuro-ophthalmological disorders	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
Hom UG-Sur-II.9.30	KS	K	Strabismus and Nystagmus	Define Strabismus  Explain types of strabismus (esotropia, exotropia)	C/1  C/2	MK  MK	Lecture, Small Group Discussion,	Viva	MCQ, SAQ,	
Hom UG-Sur-II.9.31	PC	K	Strabismus and Nystagmus	Define Nystagmus  Discuss types of nystagmus and their clinical relevance	C/1  C/2	MK  MK	Lecture, Small Group Discussion, Case based Learning	Viva	MCQ, SAQ,	
Hom UG-Sur-II.9.32	HO	K	Strabismus and Nystagmus	Discuss the Homeopathic management of Strabismus and Nystagmus	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
Hom UG-	KS	K	Diseases of the eyelids	Describe the anatomy of the	C/1	MK	Lecture, Diagrams	Viva	MCQ, SAQ	

# AIM Homoeopathy

<b>Sur-II.9.33</b>				eyelids and common disorders						
<b>Hom UG-Sur-II.9.34</b>	<b>PC</b>	<b>K</b>	Diseases of the eyelids	Discuss blepharitis, chalazion, and eyelid tumors and their management	C/2	MK	Lecture, Small Group Discussion, Case based Learning	Viva	MCQ, SAQ,	
<b>Hom UG-Sur-II.9.35</b>	<b>HO</b>	<b>K</b>	Diseases of the eyelids	Discuss the Homeopathic management of Diseases of the eyelids	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.36</b>	<b>KS</b>	<b>K</b>	Diseases of the lacrimal apparatus	Explain the anatomy of the lacrimal glands and ducts	C/1	MK	Lecture, Diagrams, Models	Viva	MCQ, SAQ	
<b>Hom UG-Sur-II.9.37</b>	<b>PC</b>	<b>K</b>	Diseases of the lacrimal apparatus	Discuss acute & Chronic Dacryocystitis, dry eye syndrome, and their treatments	C/2	MK	Lecture, Small Group Discussion, Case based Learning	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.38</b>	<b>HO</b>	<b>K</b>	Diseases of the lacrimal apparatus	Discuss the Homeopathic management of Diseases of the lacrimal apparatus	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.39</b>	<b>KS</b>	<b>K</b>	Ocular injuries	Describe types of ocular injuries and their mechanisms	C/2	MK	Lecture, Simulation	Viva	MCQ, SAQ,	
<b>Hom UG-Sur-II.9.40</b>	<b>KS/PB</b>	<b>KH</b>	Ocular injuries	Discuss and understand emergency management of chemical burns, blunt	C/3	DK	Problem-Based Learning	Viva	MCQ, SAQ	<b>Emergency Medicine</b>

# AIM Homoeopathy

				trauma, and penetrating injuries						
<b>Hom UG-Sur-II.9.41</b>	<b>HO</b>	<b>KH</b>	Ocular injuries	Discuss the Homeopathic management of Ocular injuries	C/1	MK	Lecture	Viva	MCQ, SAQ, LAQ	
<b>Hom UG-Sur-II.9.42</b>	<b>KS</b>	<b>K</b>	Examination of the eye and vision	Describe techniques like visual acuity testing, fundoscopy, and slit-lamp examination	C/3	DK	Demonstration, Simulation	Viva	OSCE	
<b>Hom UG-Sur-II.9.43</b>	<b>KS/PC</b>	<b>KH</b>	Examination of the eye and vision- Diagnostic relevance	Interpret examination findings for various ocular conditions	C/3	MK	Simulation, Small Group Discussion	Viva	OSCE	

## Topic: Hom UG-Sur-II.10. Dentistry-

Sl No	Competency	Miller	Content	SLO	Bloom/ Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-II.10.1	KS	K	Describe dental anatomy Structural and functional aspects	Identify the anatomy of teeth, including enamel, dentin, pulp, and periodontal structures	C/1	MK	Lecture, Models, Audiovisual aids	Viva	MCQ, SAQ	Anatomy
Hom UG-Sur-II.10.2	KS	K	Dental Anatomy: Occlusion and alignment	Explain occlusal surfaces, alignment, and their functional relevance	C/1	MK	Lecture, Models, Audiovisual aids	Viva	MCQ, SAQ	Anatomy

# AIM Homoeopathy

Hom UG-Sur-II.10.3	KS	K	Jaw Tumours: Types and pathogenesis	Classify jaw tumours (benign and malignant)	C/2	MK	Lecture, Case-Based Learning	Viva	MCQ, SAQ, LAQ	
Hom UG-Sur-II.10.4	KH	KH	Jaw Tumours: Diagnosis and treatment	Explain clinical and radiographic features  Discuss surgical and non-surgical options	C/2  C/2	MK  NK	Lecture, Case-Based Learning  Image interpretation session	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.5	HO	K	Homeopathic therapeutics for Jaw tumors	Outline homeopathic remedies for managing jaw tumours	C/1	MK	Lecture, Case-Based Learning	Viva	MCQ, SAQ, LAQ	
Hom UG-Sur-II.10.6	KS	K	Epulis: Types and pathophysiology	Classify epulis (fibrous, granulomatous, giant cell)	C/1	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.7	KS	K	Epulis: Diagnosis and treatment	Discuss clinical presentations and histological findings	C/2	MK	Lecture Audiovisual aids Problem-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.8	HO	K	Epulis: Homeopathy	Explain homeopathic approaches to epulis treatment	C/1	MK	Lecture	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.9	KS	KH	Ameloblastoma: Pathogenesis and classification	Classify ameloblastoma subtypes (unicystic,	C/2	DK	Lecture, Case-Based Learning	Viva	MCQ, SAQ	

# AIM Homoeopathy

				multicystic)						
Hom UG-Sur-II.10.10	KS	K	Ameloblastoma: Surgical and non-surgical options	Explain treatment approaches, including enucleation and resection	C/2	NK	Small Group Discussion	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.11	HO	K	Homeopathic therapeutics for ameloblastoma	Discuss homeopathic therapeutics for ameloblastoma	C/1	MK	Lecture	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.12	KS	K	Dentigerous Cysts: Pathogenesis and diagnosis	Identify radiological and clinical findings of dentigerous cysts	C/2	MK	Lecture, Simulation	Viva	MCQ, SAQ	Radiology
Hom UG-Sur-II.10.13	KS	K	Dentigerous Cysts: Surgical management	Explain surgical enucleation and follow-up protocols	C/2	MK	Lecture Problem-Based Learning	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.14	KS	KH	Dental Cysts: Pathogenesis and types	Classify dental cysts (radicular, residual, odontogenic keratocyst)	C/1	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ	
Hom UG-Sur-II.10.15	KS	K	Dental Cysts: Diagnosis and treatment	Discuss clinical presentations and radiological findings	C/2	MK	Problem-Based Learning	Viva	MCQ, SAQ	Radiology
Hom UG-Sur-II.10.16	KS	K	Alveolar Abscess: Etiology and diagnosis	Explain causes and clinical features of alveolar abscess	C/1	MK	Lecture, Small Group Discussion	Viva	MCQ, SAQ	
Hom UG-Sur-	KS	KH	Alveolar Abscess: Management	Discuss drainage techniques	C/2	DK	Lecture Case-Based Learning	Viva	MCQ, SAQ	

# AIM Homoeopathy

II.10.17										
Hom UG- Sur- II.10.18	HO	K	Homeopathic therapeutics for Alveolar Abscess	Outline homeopathic management for dental abscesses	C/1	MK	Lecture	Viva	MCQ, SAQ	
Hom UG- Sur- II.10.19	KS/PBL/PC	K	Examination of teeth and gums	Recall the anatomy of teeth and gums, including structure, types, and functions	C/1	MK	Lecture Case based learning Clinical demonstration DOPS Role play Small group discussion	Viva	MCQ SAQ OSCE	
		K		Identify normal dentition and gum appearance	C/1	MK				
		K		Recognize common dental and gum conditions (e.g., caries, gingivitis, periodontitis)	C/2	MK				
		S		Perform inspection of the teeth for alignment, caries, discoloration, or damage	P/1	MK				
		S		Assess the gums for signs of inflammation, bleeding, recession, or any lesions	P/1	MK				

# AIM Homoeopathy

		S		Examine for malocclusion and jaw alignment abnormalities	P/1	MK				
		SH		Document and communicate findings effectively to the patient	P/2	MK				
		SH		Counsel the patient on oral hygiene practices and the importance of dental care	P/2	NK				

## Topic: Hom UG-Sur-II.11.1. Instruments for demonstration-

Sl No	Domain of Competency	Miller Level	Content	SLO	Bloom/ Guilbert Level	Priority	Teaching-Learning Methods (TL)	Assessment		Integration
								F	S	
Hom UG-Sur-II.11.1	KS	SH/KH	*List of instruments:  Allis tissueforceps Curved allis Mosquito forceps Tooth forceps Chittal forceps Needle holder Sponge holding	Identify the surgical instruments  Describe the function of various surgical instruments  Handle basic surgical instruments appropriately	P/1  C/2  P/2	MK  MK  MK	Lectures Small group discussions Demonstration	Viva	OSCE	

# AIM Homoeopathy

		<p>KH</p> <p>forceps Simple forceps Rubber catheter Folley's catheter Cannula Tracheal tube Straight scissor Artery forceps Scissors Proctoscope Suture material Dressing material Ryle's tube Catheter Dressing tray Kidney tray Tray Dressing drum Auroscope Stethoscope Measuring tape Hammer Ophthalmoscope Tonometer Dental instruments ENT instruments Infant feeding tube Laryngoscope Retractor Sim's speculum</p> <p>*List of instruments and</p>	<p>Identify the situations to select the appropriate instrument for specific procedures</p> <p>Explain the maintenance and sterilization process for surgical instruments</p>	C/3	DK				
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# AIM Homoeopathy

			surgical items as per "The National Commission for Homoeopathy Minimum Essential Standards for Homoeopathic Medical Colleges and Attached Hospitals Regulation – 2024"									
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**For X-rays and Procedures please refer the Competency table under relevant sections**

## 7. Teaching learning methods

<b>Lectures (Theory)</b>	<b>Non-lectures (Practical/Demonstrative)*</b>
Lectures	Clinical demonstration- DOAP, DOPS
Audio visual aid	Problem based discussion, small group discussions, seminar, tutorials
Integrated lectures	Case based learning
	OSCE, Skill lab
	Radiology workshops
	Assignments
	Library reference
	Self-learning

# AIM Homoeopathy

## **\*Training- Practical – Lab work – Field – Clinical Hospital work**

- a.) Students should undergo clinical postings in General Surgery outpatient departments (OPDs) and surgery wards. Additionally, rotations should be arranged in ENT, Ophthalmology, Orthopedics, Dental Surgery units and Casualty, either within the collegiate hospital or in affiliated hospitals with which a Memorandum of Understanding (MOU) has been established for such training.
- b.) OPD/ IPD posting of students: All students should have their clinical register.

### **CLINICAL REGISTER – 3<sup>RD</sup> BHMS**

Name Of Student: \_\_\_\_\_

Roll No: \_\_\_\_\_

Batch: \_\_\_\_\_

Sr. No.	Date	Reg No.	Name of patient	Age/ Sex	Clinical Diagnosis	Treatment	OPD/ Rural	Department	Work advised	Working done	Sign of Teacher	
						Operation	IPD	Physician		Working checked		
						Procedure	Casualty			Feedback received		

- c.) The clinical register should be checked by teaching faculty.
- d.) The topics already taught in the classroom should be demonstrated to students through clinical teaching.
- e.) Students should be trained in proper history taking, clinical examination, advising relevant investigations, interpreting the results, and applying Homoeopathic management effectively.
- f.) Journal/Record: Students should document 10 cases from General Surgery/Systemic surgery and 10 cases from each of the special surgery units, including Ophthalmology, ENT, Dental, and Orthopaedics, during the third year. It should be integrating the Surgery, Organon, Materia medica and repertory.
- g.) Students should be posted in surgery wards of collegiate hospital and tie-up hospitals for exposure of minor surgical procedures.

# AIM Homoeopathy

## 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	Third 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  Viva voce -50 marks Practical – 50 marks a) Surgical case taking, analysis and evaluation-30 marks. b) OSCE- 20 marks	20 Marks Viva	200 marks theory	200 marks ( refer table 8.8) Practical+ Viva+ IA

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

# AIM Homoeopathy

## 8.2 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	Hom-UG Sur-II	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:**

$$\text{Marks of IA (M)} = S + T / 2$$

**S = Marks of IA in II BHMS**

**T = Marks of IA in III BHMS = (Marks of PA-1 + Marks of TT + Marks of PA-2) / 140 X 20**

**\*\*Refer to the table 7.8 for the details of practical/clinical exam and marks distribution in FUE**

## 8.3 Paper Layout

**Summative assessment (FUE):**

**Theory- 200 marks**

Paper-1 (100 marks) General Surgery-with therapeutics ENT, Ophthalmic, dentistry and Orthopaedic with therapeutics		
1	LAQ	50 marks
2	SAQ	40 marks
3	MCQ	10 marks

# AIM Homoeopathy

## Paper-2 (100 marks)

Systemic Surgery (Peripheral vascular, Lymphatics, Nerve, GIT, GUT, Thorax, abdominal wall, umbilicus, breast, hernias, heart and pericardium along with therapeutics

1	LAQ	50 marks
2	SAQ	40 marks
3	MCQ	10 marks

## 8.4 Theme-wise distribution of questions for theory exam paper I

Theme	Topics	Term	LAQ	SAQ	MCQ	Marks
A  Trauma /Injury	<p>Introduction to surgery, Scope and limitations of Homoeopathy in surgical conditions</p> <p><b>Injury – types</b> Head injury; Road traffic accident; injury to chest, abdomen</p> <p><b>Wound &amp; wound healing</b> Scar, keloid Ulcers, Sinus and fistula Haemorrhage Blood transfusion Shock Fluid, electrolytes and acid-base balance Nutrition Burn, skin grafting</p> <p><b>Homoeopathic Therapeutics</b> for – Injuries, Scar, Keloid, Ulcers, Sinus &amp; Fistula, Haemorrhage, Shock, Burns</p>	I	NO	YES	YES	20
B-	<p><b>Common surgical infections</b> Boil, Carbuncle, Abscess, Cellulitis, and erysipelas,</p>	I	NO	YES	YES	5

# AIM Homoeopathy

<b>Concept of Infectious Disease and Host Response</b>	Hidradenitis suppurativa, septicaemia, pyaemia <b>Homoeopathic Therapeutics</b>					
	<b>Special infections-</b> Tuberculosis, syphilis, acquired immunodeficiency syndrome, actinomycosis, leprosy, tetanus, infective gangrene <b>Homoeopathic therapeutics</b>	I	NO	YES	YES	
<b>C- Concept of Swelling</b>	Tumours: Benign, malignant; Carcinoma, sarcoma, fibrosarcoma; naevus, melanoma Lipoma, fibroma, adenoma, neuroma, Neurilemmoma, Neurofibroma, Haemangioma Cysts <b>Homoeopathic therapeutics</b>	I	YES	YES	YES	15
<b>D- Orthopedics</b>	Diseases of the bones, cranium, vertebral column, fractures and dislocations Diseases of the joints. Diseases of the muscles, tendons and fascia <b>Homoeopathic therapeutics</b> for orthopaedic conditions	II	YES	YES	YES	15
<b>E- Ophthalmology</b>	Applied Anatomy, Physiology of eye Examination of eye Identification of bitot spots, pallor, conjunctival injection, pupillary reactions, to identify systemic and eye conditions. Diseases of eyelids, eyelashes and lachrymal drainage system. Diseases of Eyes including injury related problems. Acuity of vision, visual field and vision defects Accommodation defects <b>Homoeopathic therapeutics</b> for diseases of Eyes	II	YES	YES	YES	15

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<b>F- ENT, Thyroid, Neck</b>	<p>Applied anatomy and applied physiology of ear          Examination of ear          Diseases of external, middle and inner ear</p> <p>Applied anatomy and physiology of nose and paranasal sinuses.          Examination of nose and paranasal sinuses          Diseases of nose and paranasal sinuses</p> <p>Applied Anatomy and applied Physiology of pharynx, larynx, tracheobronchial tree,          Examination of pharynx, larynx, tracheobronchial tree, oesophagus          Diseases of the Throat External/ and Internal,          Thyroid  <b>Homoeopathic therapeutics for Diseases of Nose and Paranasal sinuses, Ear and Throat (External and Internal)</b></p>	II	YES	YES	YES	20
<b>G- Dentistry and diseases of oral cavity</b>	<p>Applied anatomy, physiology of teeth and gums;          Milestones related to teething.          Examination of Oral cavity          Diseases of gums          Diseases of teeth          Problems of dentition          Oral malignancies          Oral hygiene          Oral health in systemic disorders  <b>Homoeopathic therapeutics for diseases of Teeth and Gums</b></p>	II	YES	YES	YES	10

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## 8.5 Distribution of questions for theory exam paper II

Theme	Topics	Term	LAQ	SAQ	MCQ	Marks
<b>A- Diseases of transportin g channels</b>	<p>Diseases of blood vessels:</p> <p><b>A. Arteries:</b> Arterial occlusion; Ischemic disease of arteries, Injury, Aneurysm, Embolism, Thrombosis, Atherosclerosis, Gangrene, Thrombo-angiitis obliterans (Burger's Disease), Raynaud's disease,</p> <p><b>B. Veins:</b> Thrombosis: Thrombophlebitis, Deep Vein Thrombosis, Varicose veins, Venous ulcer</p> <p><b>C. Lymphatics and lymph nodes:</b> - lymphangiography, lymphoedema, lymphomas, Hodgkin's lymphoma, non-Hodgkin's lymphoma, Burkitt's lymphoma, cutaneous T cell lymphoma, chylous ascites, chylothorax, sarcoidosis Acute lymphangitis, Acute lymphadenitis, chronic lymphadenitis</p> <p><b>D. Diseases nerves</b></p> <p><b>E. Nerves: Peripheral nerves</b> - injury of Brachial plexus, Median nerve, Ulnar nerve, Radial nerve, axillary, common perineal, long thoracic, medial Popliteal, Carpal tunnel syndrome, claw hand, foot drop</p> <p><b>F. Homoeopathic therapeutics</b> for diseases of Arteries, Veins, Lymphatics and Nerves</p>	I & II	YES	YES	YES	20
<b>B- Diseases of the alimentary</b>	a. Diseases of palate, Cheek, Tongue, Floor of the mouth & Salivary Glands	I & II	YES	YES	YES	25

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tract	<ul style="list-style-type: none"> <li>b. Oesophagus: Esophagitis, investigations, Congenital abnormalities, Perforation, Injuries, GERD, Hiatus hernia, tumours</li> <li>c. Peritoneum: Peritonitis - Acute, Biliary, Postoperative; Pelvic abscess, Subphrenic abscesses, Mesenteric cysts</li> <li>d. Retroperitoneal Spaces: Fibrosis, Swelling, Tumours, Psoas Abscess</li> <li>e. Stomach &amp; Duodenum: Test for gastric secretion, Gastritis, Peptic ulcer, gastric &amp; duodenal ulcer, Hematemesis, Gastric outlet Obstruction, Pyloric stenosis, Neoplasm, duodenum diverticula, fistula</li> <li>f. Small intestine &amp; Large intestine: Congenital, Diverticulum, ulcerative colitis, Ischemic colitis, Faecal fistula, Tumours, Barium enema, Intestinal obstruction, Intussusception, Adhesion and Bands</li> <li>g. Appendix: Appendicitis</li> <li>h. Abdominal Tuberculosis</li> <li>i. Rectum &amp; anal canal: Investigation, examination, fissure in ano, piles, pruritus ani, prolapse of rectum, fistula in ano, anorectal abscess</li> <li>j. Abdominal hernias</li> <li>k. <b>Homoeopathic therapeutics</b> for diseases of alimentary tract , Hernias</li> </ul>					
<b>C- Diseases of liver, spleen, gall bladder</b>	A) Liver: Liver Tumours: Benign, Primary malignant; Portal HTN - oesophageal varices, Ascites, Hepatic failure, Hepatic encephalopathy	I & II	YES	YES	YES	20

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and bile duct	<p>B) Liver: Liver insufficiency, investigations, injuries, Hepatomegaly, Infection of liver - Amoebic liver abscess, Hydatid cyst, Actinomycosis, Pyogenic</p> <p>C) Gall bladder &amp; bile duct: Investigations, injuries, gall stone, Acute and chronic cholecystitis, stone in common bile duct, Biliary stricture, biliary fistula, Surgical jaundice, CA</p> <p>D) Spleen: Investigation, Injury, Splenomegaly, splenic artery aneurysm infarct &amp; rupture, Cyst of spleen, TB, Abscess, Neoplasm</p> <p>E) Pancreas: investigations, Anomalies, Pancreatitis, Abscess, Calculus, Trauma, Fistula, Cyst, Tumours</p> <p>F) <b>Homoeopathic therapeutics</b> for diseases of Liver, Gallbladder, Pancreas and Spleen</p>					
D. Thorax, heart and pericardium	<p>Pleural tap, Bronchoscopy, Flail Chest and Stove in chest, Pneumothorax, Tension Pneumothorax, Haemothorax, Emphysema, Lung Abscess, Intercostal tube drainage, Shock lung (Stiff lung) Pulmonary embolism, Surgical emphysema, Lung cysts, Mediastinal tumour, Pancoast tumours, Chest wall tumours, , Diaphragmatic hernia, Pericardium &amp; Heart:</p> <p>Cardiac tamponade, Congenital cardiac disease, valvular disease, Pericarditis</p> <p><b>Homoeopathic therapeutics</b> for diseases of Thorax, Heart and Pericardium</p> <p>Diseases of Breast with Homoeopathic therapeutics</p>	I & II	YES	YES	YES	10
E. Diseases of	A. Urology: Investigation- Urine, renal	II	YES	YES	YES	25

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<b>urogenital system.</b>	<p>function, urography, pyelography, cystography, USG</p> <p>B. <b>Kidney:</b> Haematuria, PCKD, Injuries to Kidney, Renal TB, Hydronephrosis, Pyonephrosis, Perinephric abscess, Renal calculus, Ureteric calculi, Wilm's tumour, Renal cell carcinoma,</p> <p>C. <b>Urinary Bladder:</b> Anomalies, Vesical calculus, Cystitis, Recurrent cystitis, Bladder tumour, Bladder injury, Neurogenic bladder, Vesicoureteric reflux, Urinary fistula</p> <p>D. <b>Prostate:</b> BPH, Prostatitis, Ca prostate</p> <p>E. <b>Urethra:</b> Injury, Stricture, Hypospadias, Urethral calculi, Urethritis, Retention of urine</p> <p>F. <b>Penis:</b> Phimosis, paraphimosis, Circumcision, Ca of Penis</p> <p>G. <b>Scrotum:</b> Hydrocele, Haematocele, Pyocele, Cyst of Epididymis, varicocele</p> <p>H. <b>Testis:</b> Undescended testis, Ectopic testis, Torsion of testis, Orchitis, epididymis</p> <p>I. <b>Homoeopathic therapeutics</b> for diseases Genitourinary system</p>					
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## 8.6 Question paper blue print Paper I

Question serial No	Type of Question	Theme Table for Framing Question paper - Refer Theme Table No 8.4 for themes
Q. 1	Multiple choice Question (MCQ) Total 10 questions – 1 Mark each Attempt all questions	Theme – A Theme – B Theme – C Theme – D Theme – E Theme – F Theme – G
Q.2	Short answer questions (SAQ) Total - 8 questions - 5 marks each Attempt all questions	Theme – A Theme – B Theme – C Theme – D Theme – E Theme – F Theme – G
Q.3	Long answer questions (LAQ) Total – 5 questions – 10 marks each Attempt all questions	Theme – A Theme – C Theme – D Theme – E Theme – F

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## 8.7 Question paper blue print Paper I

Question serial No	Type of Question	Theme Table for Framing Question paper - Refer Theme Table No II: for themes
Q. 1	Multiple choice Question (MCQ) Total 10 questions – 1 Mark each Attempt all questions	Theme – A Theme – B Theme – C Theme – D Theme – E
Q.2	Short answer questions (SAQ) Total - 8 questions - 5 marks each Attempt all questions	Theme – A Theme – B Theme – C Theme – D Theme – E
Q.3	Long answer questions (LAQ) Total – 5 questions – 10 marks each Attempt all questions	Theme – A Theme – B Theme – C Theme – E

## 8.8 Details of practical assessment

Sl.no.	Practical/clinical activity	Marks
	<b>Clinical</b>	
A.	<b>Surgical case-taking</b>	
a.	One Surgical case taking – bedside case taking with case analysis	15 marks

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b.	Demonstration of clinical examination of the surgical case- OSCE	15 marks
c.	Provisional diagnosis and differential diagnosis	10 marks
d.	Management General, Accessory, Surgical and Homoeopathic Therapeutics.	10 marks
<b>Practical</b>		
B.	Identification of Instruments	15 marks
C.	X-ray interpretation	10 marks
D.	Journal/ Surgical case record	20 marks
E.	Clinical register maintenance	05 marks
F.	<b>Viva Voce -Clinical and therapeutics (Theory)</b>	<b>80 marks</b>
G.	<b>Internal assessment</b>	<b>20 marks</b>
	<b>Total</b>	<b>200 marks</b>

## 9. Recommended books

### *Text books*

1. P. Ronan O'Connell, McCaskie, A. W., & Williams, N. S. (2018). *Bailey & Love's Short Practice of Surgery, 27th Edition*. CRC Press.
2. Somen Das. (2008). *A concise textbook of surgery*. Dr S. Das.
3. Chatterjee B.M, & Agarwal, L. P. (2008). *Handbook of Ophthalmology*
4. Dhingra, P. L., & Shruti Dhingra. (2017). *Diseases of ear, nose and throat*. Elsevier India.
5. J Maheshwari, & Mhaskar, V. A. (2019). *Essential orthopaedics: including clinical methods*. Jaypee Brothers Medical Publishers.

### *Clinical Examination skill books*

1. Das, S. (2022). *A Manual on Clinical Surgery*. Jaypee Brothers Medical Publishers Pvt Limited.
2. Bailey, H., & Clain, A. *Hamilton Bailey's Demonstrations of Physical Signs in Clinical Surgery*.

### *Therapeutics books*

1. Kulkarni, S. (2002). *Surgery Therapeutics*. B. Jain Publishers.
2. Lilenthal, S. *Homoeopathic Therapeutics*.
3. Dewey, W. A. (1997). *Practical homeopathic therapeutics*. B. Jain.

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## *Reference books*

1. *Sriram Bhat. (2019). SRB's manual of surgery. Jaypee Brothers.*
2. *Khurana, A., Khurana, A. K., & Khurana, B. P. (2023). Comprehensive Ophthalmology. Jaypee Brothers Medical Publishers Pvt Limited.*
3. *Sriram, B. M. (2019). SRB's clinical methods in surgery. Jaypee Brothers Medical Publishers.*
4. *Tandon, R. (2019). Parsons' Diseases of the Eye. Elsevier India.*
5. *Makhan Lal Saha. (2018). Bedside clinics in surgery : long and short cases, surgical problems, x-rays, surgical pathology, preoperative preparations, minor surgical procedures, instruments, operative surgery and surgical anatomy. Jaypee Brothers Medical Publishers.*

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