THE CURRICULUM (SECOND BHMS)

Subjects.—Subjects for study and examination for the 2^{nd} B.H.M.S (Degree) Course shall be as under, namely:—

Sl.No	Name of the Subject	Subject taught during	Holding of	
			examination	
1.	Organon of Medicine with	First B.H.M.S, Second	At the end of Second,	
	Homoeopathic Philosophy	B.H.M.S, Third B.H.M.S	Third and Fourth	
		and Fourth B.H.M.S. B.H.M.S.		
2.	Homoeopathic Materia Medica	First B.H.M.S, Second	At the end of Second,	
	_	B.H.M.S, Third B.H.M.S	Third and Fourth	
		and Fourth B.H.M.S.	B.H.M.S.	
3.	Pathology	Second B.H.M.S.	At the end of Second	
			B.H.M.S.	
4.	Forensic Medicine and	Second B.H.M.S.	At the end of Second	
	Toxicology		B.H.M.S.	
5.	Surgery	Second B.H.MS. and Third	At the end of Third	
		B.H.M.S.	B.H.M.S.	
6.	Gynecology and Obstetrics	Second B.H.MS. and Third	At the end of Third	
		B.H.M.S.	B.H.M.S.	

Syllabus for 2^{nd} BHMS Degree Course. – The following shall be the syllabus for 2^{nd} B.H.M.S (Degree) Course.

ORGANON OF MEDICINE WITH HOMOEOPATHIC PHILOSOPHY

- I (a) Organon of Medicine with Homoeopathic Philosophy is a vital subject which builds up the conceptual base of the physician;
 - (b) It illustrates those principles which when applied in practice enable the physician to achieve results, which he can explain logically and rationally in medical practice with greater competence;
 - (c) Focus of the education and training should be to build up the conceptual base of Homoeopathic Philosophy for use in medical practice.
- II Homoeopathy should be taught as a complete system of medicine with logical rationality of its holistic, individualistic and dynamistic approach to life, health, disease, remedy and cure and in order to achieve this, integration in the study of logic, psychology and the fundamentals of Homoeopathy becomes necessary.
- III (a) It is imperative to have clear grasp of inductive and deductive logic, and its application and understanding of the fundamentals of Homoeopathy;
 - (b) Homoeopathic approach in therapeutics is a holistic approach and it demands a comprehension of patient as a person, disposition, state of his mind and body, along with the study of the disease process and its causes;
 - (c) Since Homoeopathy lays great emphasis on knowing the mind, preliminary and basic knowledge of the psychology becomes imperative for a homoeopathic physician and introduction to psychology will assist the student in building up his conceptual base in this direction.
- IV The department of organon of medicine shall co-ordinate with other departments where students are sent for the pre-clinical and clinical trainin and this will not only facilitate integration with other related departments, but also enhance the confidence of the students when they will be attending specialty clinics.

FIRST B.H.M.S.

A. Theory:

- 1. Introductory lectures
 - 1.1. Evolution of medical practice of the ancients (Prehistoric Medicine, Greek Medicine, Chinese medicine, Hindu medicine and Renaissance) and tracing the empirical, rationalistic and vitalistic thoughts.
 - 1.2. Short history of Hahnemann's life, his contributions, and discovery of Homoeopathy, situation leading to discovery of Homoeopathy
 - 1.3. Brief life history and contributions of early pioneers of homoeopathy like C.V. Boenninghausen, J.T. Kent, C.Hering, Rajendra Lal Dutta, M.L. Sircar
 - 1.4. History and Development of Homoeopathy in India, U.S.A. and European countries
 - 1.5. Fundamental Principles of Homoeopathy.
 - 1.6. Basic concept of:
 - 1.6.1. Health: Hahnemann's concept and modern concept.
 - 1.6.2. Disease: Hahnemann's concept and modern concept.
 - 1.6.3. Cure.
 - 1.7. Different editions and constructions of Hahnemann's Organon of Medicine.

2. Logic

To understand organon of medicine and homoeopathic philosophy, it is essential to be acquainted with the basics of LOGIC to grasp inductive and deductive reasonings.

Preliminary lecturers on inductive and deductive logic (with reference to philosophy book of Stuart Close Chapter 3 and 16).

3. Psychology

- 3.1. Basics of Psychology.
- 3.2. Study of behavior and intelligence.
- 3.3. Basic concepts of Sensations.
- 3.4. Emotion, Motivation, Personality, Anxiety, Conflict, Frustration, Depression, Fear, Psychosomatic Manifestations
- 3.5 Dreams.
- 4. Aphorisms 1 to 28 of organon of medicine
- 5. Homoeopathic Prophylaxis
- B. Examination: There shall be no examination in the subject in First B.H.M.S.

SECOND B.H.M.S.

A. Theory:

- 1. Aphorisms 29-104 including foot notes of Organon of Medicine (5th & 6th Editions translated by R.E. Dudgeon and W. Boericke).
- 2. Homoeopathic philosophy:
 - 2.1. Chapters of Philosophy books of J.T. Kent (Chapters 1 to 17, 23 to 27, 31 to 33), Stuart Close (Chapters- 8,9, 11, 12) and H.A. Roberts (Chapters 3,4,5,6, 8, 9, 11, 17, 18, 19,20), related to Aphorisms 29-104 of Organon of Medicine
 - 2.2. Symptomatology:

Details regarding Symptomatology are to be comprehended by referring to the relevant aphorisms of organon of medicine and chapters of the books on homoeopathic philosophy.

2.3. Causations:

Thorough comprehension of the evolution of disease, taking into account pre-disposing, fundamental, exciting and maintaining causes.

2.4. Case taking:

The purpose of homoeopathic case taking is not merely collection of the disease symptoms from the patient, but comprehending the patient as a whole with the correct appreciation of the factors responsible for the genesis and maintenance of illness. Hahnemann's concept and method of case taking, as stated in his Organon of Medicine is to be stressed upon.

- 2.5. Case processing: This includes,
 - (i) Analysis of Symptoms,
 - (ii) Evaluation of Symptoms,
 - (iii) Miasmatic diagnosis,
 - (iv) Totality of symptoms

B. Practical or clinical:

- 1. Clinical posting of students shall be started from Second B.H.M.S onwards.
- 2. Each student shall maintain case records of at least ten acute cases

C. Examination:

- 1. Theory
 - 1.1. No. of papers -01
 - 1.2. Marks: 100
 - 1.3. Distribution of marks:
 - 1.3.1. Logic 15 marks
 - 1.3.2. Psychology 15 marks
 - 1.3.3. Fundamentals of homoeopathy and aphorisms 1 to 104 50 marks
 - 1.3.4. Homoeopathic philosophy 20 marks
- 2. Practical including viva voce or oral:
 - 2.1. Marks: 100

2.2. Distribution of marks:	<u>Marks</u>
2.2.1. Case taking and Case processing	40
2.2.2. Maintenance of practical	
record or journal	10
2.2.4. Viva voce (oral)	50
Total	<u>100</u>

HOMOEOPATHIC MATERIA MEDICA

- I (a) Homoeopathic Materia Medica is differently constructed as compared to other Materia Medicas;
 - (b) Homoeopathy considers that study of the action of drugs on individual parts or systems of the body or on animal or their isolated organs is only a partial study of life processes under such action and that it does not lead us to a full appreciation of the action of the medicinal substance, the drug substance as a whole is lost sight of.
- II Essential and complete knowledge of the drug action as a whole can be ascertained only by qualitative drug proving on healthy persons and this alone can make it possible to elicit all the symptoms of a drug with reference to the psychosomatic whole of a person and it is just such a person as a whole to whom the knowledge of drug action is to be applied.
- III (a) The Homoeopathic Materia Medica consists of a schematic arrangement of symptoms produced by each drug, incorporating no theories for explanations about their interpretation or interrelationship;
 - (b) Each drug should be studied synthetically, analytically and comparatively, and this alone would enable a Homoeopathic student to study each drug individually and as a whole and help him to be a good prescriber.
- IV (a) The most commonly indicated drugs for day to day ailments should be taken up first so that in the clinical classes or outdoor duties the students become familiar with their applications and they should be thoroughly dealt with explaining all comparisons and relationship;
 - (b) Students should be conversant with their sphere of action and family relationships and the rarely used drugs should be taught in outline, emphasizing only their most salient features and symptoms.

- V Tutorials must be introduced so that students in small numbers can be in close touch with teachers and can be helped to study and understand Materia Medica in relation to its application in the treatment of the sick.
- VI (a) While teaching therapeutics an attempt should be made to recall the Materia Medica so that indications for drugs in a clinical condition can directly flow out from the proving of the drugs concerned;
 - (b) The student should be encouraged to apply the resources of the vast Materia Medica in any sickness and not limit himself to memorise a few drugs for a particular disease and this Hahnemannian approach will not only help him in understanding the proper perspective of symptoms as applied and their curative value in sickness but will even lighten his burden as far as formal examinations are concerned;
 - (c) Application of Materia Medica should be demonstrated from case-records in the outdoor and the indoor;
 - (d) Lectures on comparative Materia Medica and therapeutics as well as tutorials should be integrated with lectures on clinical medicine;
- VII For the teaching of drugs, the department should keep herbarium sheets and other specimens for demonstrations to the students and audio-visual material shall be used for teaching and training purposes.
- VIII (a) There is a large number of Homoeopathic medicines used today and much more medicines being experimented and proved at present and more will be added in future and some very commonly used Homoeopathic medicines are included in this curriculum for detail study;
 - (b) It is essential that at the end of this course each student should gain basic and sufficient knowledge of "How to study Homoeopathic Materia Medica" and to achieve this objective basic and general topic of Materia Medica should be taught in details during this curriculum, general topics should be taught in all the classes;
 - (c) The medicines are to be taught under the following headings, namely:-
 - 1. Common name, family, habitat, parts used, preparation, constituents (of source material).
 - 2. Proving data.
 - 3. Sphere of action.
 - 4. Symptomatology of the medicine emphasizing the characteristic symptoms (mental, physical generals and particulars including sensations, modalities and concomitants) and constitution.
 - 5. Comparative study of medicines.
 - 6. Therapeutic applications (applied Materia Medica).

FIRST B.H.M.S.

A. Theory:

General topics of Materia Medica:-(including introductory lectures)

- (a) Basic Materia Medica
 - 1. Basic concept of Materia Medica
 - 2. Basic construction of various Materia Medicas
 - 3. Definition of Materia Medica
- (b) Homoeopathic Materia Medica
 - 1. Definition of Homoeopathic Materia Medica
 - 2. Basic concept and construction of Homoeopathic Materia Medica.
 - 3. Classification of Homoeopathic Materia Medica.
 - 4. Sources of Homoeopathic Materia Medica.
 - 5. Scope and Limitations of Homoeopathic Materia Medica

Note: There shall be no examination in First B.H.M.S.

SECOND B.H.M.S

A. Theory:

- (a) In addition to syllabus of First B.H.M.S. Course, following shall be taught, namely:-
 - (i) Science and philosophy of homoeopathic materia medica.
 - (ii) Different ways of studying homoeopathic materia medica (e.g. psycho-clinical, pathological, physiological, synthetic, comparative, analytical, remedy relationships, group study, portrait study etc.)
 - (iii) Scope and limitations of homoeopathic materia medica.
 - (iv) Concordance or remedy relationships.
 - (v) Comparative homoeopathic materia medica, namely:- Comparative study of symptoms, drug pictures, drug relationships.
 - (vi) Theory of biochemic system of medicine, its history, concepts and principles according to Dr. Wilhelm Heinrich Schuessler. Study of 12 biochemic medicines. (tissue remedies).
- (b) Homoeopathic Medicines to be taught in Second B.H.M.S as per Appendix –I.

APPENDIX-I

- 1. Aconitum napellus
- 2. Aethusa cynapium
- 3. Allium cepa
- 4. Aloe socotrina
- 5. Antimonium crudum
- 6. Antimonium tartaricum
- 7. Apis mellifica
- 8. Argentum nitricum
- 9. Arnica Montana
- 10. Arsenicum album
- 11. Arum triphyllum
- 12. Baptisia tinctoria
- 13. Bellis perrenis
- 14. Bryonia alba
- 15. Calcarea carbonica
- 16. Calcarea fluorica
- 17. Calcarea phosphoric
- 18. Calcarea sulphurica
- 19. Calendula officinalis
- 20. Chamomilla
- 21. Cina
- 22. Cinchona officinalis
- 23. Colchicum autumnale
- 24. Colocynthis
- 25. Drosera
- 26. Dulcamara
- 27. Euphrasia
- 28. Ferrum phosphoricum
- 29. Gelsemium
- 30. Hepar sulph
- 31. Hypericum perforatum
- 32. Ipecacuanha
- 33. Kali muriaticum
- 34. Kali phosphoricum
- 35. Kali sulphuricum
- 36. Ledum palustre
- 37. Lycopodium clavatum

- 38. Magnesium phosphoricum
- 39. Natrum muriaticum
- 40. Natrum phosphoricum
- 41. Natrum sulphuricum
- 42. Nux vomica
- 43. Pulsatilla
- 44. Rhus toxicodendron
- 45. Ruta graveolens
- 46. Silicea
- 47. Spongia tosta
- 48. Sulphur
- 49. Symphytum officinale
- 50. Thuja occidentalis
- B. Practical or clinical:

This will cover,-

- (i) case taking of acute and chronic patients
- (ii) case processing including totality of symptoms, selection of medicine, potency and repetition schedule

Each student shall maintain practical record or journal with record of five cases.

C. Examination:

The syllabus covered in First BHMS and Second BHMS course are the following, namely:-

- 1. Theory:
 - **1.1.** Number of papers-01
 - **1.2.** Marks: 100
 - **1.3.** Distribution of marks:
 - 1.3.1. Topics of I BHMS- 50 Marks
 - 1.3.2. Topics of II BHMS- 50 Marks
- 2. Practical including viva voce or oral:
 - 2.1. Marks:100

2.2. Distribution of marks;	<u>Marks</u>
2.2.1. Case taking and Case Processing of one long case	30
2.2.2. Case taking of one short Case	10
2.2.3.Maintenance of Practical record or journal	10
2.2.4. Viva voce (oral)	50
Total	100

PATHOLOGY

- I (a) Pathology and microbiology shall be taught in relation to the concept of miasms as evolved by Samuel Hahnemann and further developed by JT Kent, H.A. Robert, J.H. Allen and other stalwarts, with due reference to Koch's postulate, correlation with immunity, susceptibility and thereby emphasizing homoeopathic concept of evolution of disease and cure;
 - (b) Focus will be given on the following points, namely:-
 - (1) Pathology in relation with Homoeopathic Materia Medica.
 - (2) Correlation of miasms and pathology.
 - (3) Characteristic expressions of each miasm.
 - (4) Classification of symptoms and diseases according to pathology.
 - (5) Pathological findings of diseases; their interpretation, correlation and usage in the management of patients under homoeopathic treatment.

(c) To summarise, all the topics in the general and systemic pathology and microbiology should be correlated, at each juncture, with homoeopathic principles so that the importance of pathology in Homoeopathic system could be understood by the students.

A. Theory:

(a) General Pathology

- 1. Cell Injury and cellular adaptation
- 2. Inflammation and repair (Healing).
- 3. Immunity
- 4. Degeneration
- 5. Thrombosis and embolism
- 6. Oedema
- 7. Disorders of metabolism
- 8. Hyperplasia and hypertrophy
- 9. Anaplasia
- 10. Metaplasia
- 11. Ischaemia
- 12. Haemorrhage
- 13. Shock
- 14. Atrophy
- 15. Regeneration
- 16. Hyperemia
- 17. Infection
- 18. Pyrexia
- 19. Necrosis
- 20. Gangrene
- 21. Infarction
- 22. Amyloidosis
- 23. Hyperlipidaemia and lipidosis
- 24. Disorders of pigmentation
- 25. Neoplasia (Definition, variation in cell growth, nomenclature and taxonomy, characteristics of neoplastic cells, aetiology and pathogenesis, grading and staging, diagnostic approaches, interrelationship of tumor and host, course and management).
- 26. Calcification
- 27. Effects of radiation
- 28. Hospital infection

(b) Systemic pathology

In each system, the important and common diseases should be taught, keeping in view their evolution, aetio-pathogenesis, mode of presentation, progress and prognosis, namely:—

- 1. Mal-nutrition and deficiency diseases.
- 2. Diseases of Cardiovascular system
- 3. Diseases of blood vessels and lymphatics
- 4. Diseases of kidney and lower urinary tract
- 5. Diseases of male reproductive system and prostate
- 6. Diseases of the female genitalia and breast.
- 7. Diseases of eye, ENT and neck
- 8. Diseases of the respiratory system.
- 9. Diseases of the oral cavity and salivary glands.
- 10. Diseases of the G.I. system
- 11. Diseases of liver, gall bladder, and biliary ducts
- 12. Diseases of the pancreas (including diabetes mellitus)
- 13. Diseases of the haemopoetic system, bone marrow and blood
- 14. Diseases of glands-thymus, pituitary, thyroid, and parathyroid, adrenals, parotid.
- 15. Diseases of the skin and soft tissue.

- 16. Diseases of the musculo-skeletal system.
- 17. Diseases of the nervous system.
- 18. Leprosy

(c) Microbiology

(I) General Topics:

- 1. Introduction
- 2. History and scope of medical microbiology
- 3. Normal bacterial flora
- 4. Pathogenicity of micro-organisms
- 5. Diagnostic microbiology

(II) Immunology:

- 1. Development of immune system
- 2. The innate immune system
- 3. Non-specific defense of the host
- 4. Acquired immunity
- 5. Cells of immune system; T cells and Cell mediated immunity; B cells and Humoral immunity
- 6. The compliment system
- 7. Antigen; Antibody; Antigen Antibody reactions (Anaphylactic and Atopic); Drug Allergies
- 8. Hypersensitivity
- 9. Immuno-deficiency
- 10. Auto-immunity
- 11. Transplantation
- 12. Blood group antigens
- 13. Clinical aspect of immuno-pathology.

(III) Bacteriology:

- 1. Bacterial structure, growth and metabolism
- 2. Bacterial genetics and bacteriophage
- 3. Identification and cultivation of bacteria
- 4. Gram positive aerobic and facultative anaerobic cocci, eg. Streptococci, Pneumococci.
- 5. Gram positive anaerobic cocci, e.g. peptostreptococci
- 6. Gram negative aerobic cocci, eg. neisseria, moraxella, kingella.
- 7. Gram positive aerobic bacilli, eg. corynebacterium, aacillus anthrax, cereus subtitis, mycobacterium tuberculosis, M. leprae, actinomycetes; nocardia, organism of enterobacteriac group.
- 8. Gram positive anaerobic bacilli, eg. genus clostridium, lactobacillus.
- 9. Gram negative anaerobic bacilli, eg. bacteroides, fragilus, fusobacterium.
- 10. Others like- cholerae vibrio, spirochaetes, leptospirae, mycoplasma, chlamydiae, rickettsiae, yersinia and pasturella.

(IV) Fungi and Parasites:

- 1. Fungi
 - (1) True pathogens (cutaneous, sub-cutaneous and systemic infective agents),
 - (2) Opportunistic pathogens.
- Protozoa
 - (1) Intestinal (Entamoeba histolytica, Giardia lamblia, Cryptosporidum parvum),
 - (2) Urogenital (Trichomonas vaginalis)
 - (3) Blood and Tissues (Plasmodium-species, Toxoplasma gondii, Trypanosoma species, leishmania species).
- 3. Helminths
 - (1) Cestodes (tapeworms)- Echinococcus granulosus, Taenia solium, Taenia saginata,
 - (2) Trematodes (Flukes): Paragonimus westermani, Schistosoma mansoni, Schistosoma haematobium

(3) Nematodes— Ancylostoma duodenale, Ascaris lumbricoides, Enterobius vermicularis, Strongyloides, Stercoralis, Trichuris trichiura, Brugia malayi, Dracunculus medinensis, Loa loa, Onchocerca volvulus, Wuchereria bancroftii).

(V) Virology:

- 1. Introduction
- 2. Nature and classification of viruses
- 3. Morphology and replication of viruses
- 4. DNA viruses:
 - (i) parvo virus
 - (ii) herpes virus, varicella virus, CMV, EBV.
 - (iii) hepadna virus (hepatitis virus)
 - (iv) papova virus
 - (v) adeno virus
 - (vi) pox virus- variola virus, vaccinia virus, molluscum contagiosum etc.

5. RNA viruses:

- (a) orthomyxo virus:
 - (i) entero virus
 - (ii) rhino virus
 - (iii) hepato virus
- (b) paramyxo virus- rubeola virus, mumps virus, Influenza virus etc.
- (c) phabdo virus
- (d) rubella virus (german measles)
- (e) corona virus
- (f) retro virus
- (g) yellow fever virus
- (h) dengue, vhikungunya virus
- (i) Miscellaneous virus:
 - (i) arena virus
 - (ii) corona virus
 - (iii) rota virus
 - (iv) bacteriophages

(VI) Clinical microbiology:

- (1) Clinically important micro organisms
- (2) Immunoprophylaxis,
- (3) Antibiotic Sensitivity Test (ABST)

(VII) Diagnostic procedures in microbiology:

- (1) Examination of blood and stool
- (2) Immunological examinations.
- (3) Culture methods
- (4) Animal inoculation.

(VIII) Infection and Disease:

- (1) Pathogenicity, mechanism and control
- (2) Disinfection and sterilisation
- (3) Antimicrobial chemotherapy
- (4) Microbial pathogenicity

(d) Histopathology:

- 1. Teaching of histopathological features with the help of slides of common pathological conditions from each system.
- 1. Teaching of gross pathological specimens for each system.
- Histopathological techniques, e.g. fixation, embedding, sectioning and staining by common dyes and stains.
- 3. Frozen sections and its importance.
- 4. Electron microscopy; phase contrast microscopy.

B. Practical or clinical:

- (1) Clinical and Chemical Pathology: estimation of haemoglobin (by acidometer) count of Red Blood Cells and White Blood Cells, bleeding time, clotting time, blood grouping, staining of thin and thick films, differential counts. blood examination for parasites. erythrocyte sedimentation rate.
- (2) Urine examination, physical, chemical microscopical, quantity of albumin and sugar.
- (3) Examination of Faeces: physical, chemical (occult blood) and microscopical for ova and protozoa.
- (4) Methods of sterilisation, preparation of a media, use of microscope. gram and acid fast stains. motility preparation. gram positive and negative cocci and bacilli. special stains for corynebacterium gram and acid fast stains of pus and sputum.
- (5) Preparation of common culture medias, e.g. nutrient agar, blood agar, Robertson's Cooked Meal media (RCM) and Mac conkey's media.
- (6) Widal test demonstration.
- (7) Exposure to latest equipment, viz. auto-analyzer, cell counter, glucometer.
- (8) Histopathology
 - (a) Demonstration of common slides from each system.
 - (b) Demonstration of gross pathological specimens.
 - (c) Practical or clinical demonstration of histopathological techniques, i.e. fixation, embedding.
 - (d) Sectioning, staining by common dyes and stain. frozen section and its importance.
 - (e) Electron microscopy, phase contrast microscopy.

C. Examination:

1. Theory:

- 1.1 Number of papers 02
- 1.2 Marks: Paper I-100; Paper II-100
- 1.3 Contents:

1.3.1 Paper-I:	Section A- General Pathology	- 50 marks
	Section B- Systemic Pathology	- 50 marks
1.3.2. Paper- II:	Section A-	

Bacteriology - 25 marks
Fungi and Parasites - 25 marks

Section B-

• Virology - 20 marks

 Clinical Microbiology and Diagnostic procedures

agnostic procedures - 10 marks

• Microbiological control and

mechanism of pathogenicity
General Topics Immuno-pathology
10 marks
10 marks

2. Practical including viva voce or oral:

2.1. Marks: 100

2.2. Distribution of marks;		<u>Marks</u>
2.2.1.	Practicals	15
2.2.2.	Spotting	20 (4 spottings)
2.2.3.	Histopathological slides	10 (2 slides)
2.2.4.	Journal or practical record	05
2.2.5.	Viva voce (oral) (Including 5 marks for interpretation	50
	of routine pathological reports)	

Total

<u>100</u>

FORENSIC MEDICINE AND TOXIOCOLOGY

Instructions:

- I (a) Medico-legal examination is the statutory duty of every registered medical practitioner, whether he is in private practice or engaged in Government sector and in the present scenario of growing consumerism in medical practice, the teaching of Forensic Medicine and Toxicology to the students is highly essential;
 - (b) This learning shall enable the student to be well-informed about medico-legal responsibility in medical practice and he shall also be able to make observations and infer conclusions by logical deductions to set enquire on the right track in criminal matters and connected medico-legal problems;
 - (c) The students shall also acquire knowledge of laws in relation to medical practice, medical negligence and codes of medical ethics and they shall also be capable of identification, diagnosis and treatment of the common poisonings in their acute and chronic state and also dealing with their medico-legal aspects;
 - (d) For such purposes, students shall be taken to visit district courts and hospitals to observe court proceedings and post-mortem as per Annexure 'B'.

I. Forensic Medicine

A. Theory:

- 1. Introduction
 - (a) Definition of forensic medicine.
 - (b) History of forensic medicine in India.
 - (c) Medical ethics and etiquette.
 - (d) Duties of registered medical practitioner in medico-legal cases.
- 2. Legal procedure
 - (a) Inquests, courts in India, legal procedure.
 - (b) Medical evidences in courts, dying declaration, dying deposition, including medical certificates, and medico-legal reports.
- 3. Personal identification
 - (a) Determination of age and sex in living and dead; race, religion.
 - (b) Dactylography, DNA finger printing, foot print.
 - (c) Medico-legal importance of bones, scars and teeth, tattoo marks, handwriting, anthropometry.
 - (d) Examination of biological stains and hair.
- 4. Death and its medico-legal importance
 - (a) Death and its types, their medico-legal importance
 - (b) Signs of death (1) immediate, (2) early, (3) late and their medico-legal importance
 - (c) Asphyxial death (mechanical asphyxia and drowning).
 - (d) Deaths from starvation, cold and heat etc.
- 5. Injury and its medico-legal importance

Mechanical, thermal, firearm, regional, transportation and traffic injuries; injuries from radiation, electrocution and lightening.

- 6. Forensic psychiatry
 - (a) Definition; delusion, delirium, illusion, hallucinations; impulse and mania; classification of Insanity.
 - (b) Development of insanity, diagnosis, admission to mental asylum.
- 7. Post-mortem examination (autopsy)
 - (a) Purpose, procedure, legal bindings; difference between pathological and medico-legal autopsies.
 - (b) External examination, internal examination of adult, foetus and skeletal remains.
- 8. Impotence and sterility

Impotence; Sterility; Sterilisation; Artificial Insemination; Test Tube Baby; Surrogate mother.

- 9. Virginity, defloration; pregnancy and delivery
- 10. Abortion and infanticide

- (a) Abortion: different methods, complications, accidents following criminal abortion, MTP.
- (b) Infant death, legal definition, battered baby syndrome, cot death, legitimacy.

11. Sexual Offences

Rape, incest, sodomy, sadism, masochism, tribadism, bestiality, buccal coitus and other sexual perversions.

II. Toxicology

1. General Toxicology

- (a) Forensic Toxicology and Poisons
- (b) Diagnosis of poisoning in living and dead,
- (c) General principles of management of poisoning,
- (d) Medico-legal aspects of poisons,
- (e) Antidotes and types.

2. Clinical toxicology

- (a) Types of Poisons:
 - (i) Corrosive poisons (Mineral acids, Caustic alkalis, Organic acids, Vegetable acids)
 - (ii)Irritant poisons (Organic poisons Vegetable and animal; Inorganic poisons metallic and non-metallic; Mechanical poisons)
 - (iii) Asphyxiant poisons (Carbon monoxide; Carbon dioxide; Hydrogen sulphide and some war gases)
 - (iv) Neurotic poisons (Opium, Nux vomica, Alcohol, Fuels like kerosene and petroleum products, Cannabis indica, Dhatura, Anaesthetics Sedatives and Hypnotics, Agrochemical compounds, Belladonna, Hyoscyamus, Curare, Conium)
 - (v) Cardiac poisons (Digitalis purpurea, Oleander, Aconite, Nicotine)
 - (vi) Miscellaneous poisons (Analgesics and Antipyretics, Antihistaminics, Tranquillisers, antidepressants, Stimulants, Hallucinogens, Street drugs etc.)

III. Legislations relating to medical profession

- (a) the Homoeopathy Central Council Act, 1973 (59 of 1973);
- (b) the Consumer Protection Act, 1986 (68 of 1986);
- (c) the Workmen's compensation Act, 1923 (8 of 1923);
- (d) the Employees State Insurance Act, 1948 (34 of 1948);
- (e) the Medical Termination of Pregnancy Act, 1971 (34 of 1971);
- (f) the Mental Health Act, 1987 (14 of 1987);
- (g) the Indian Evidence Act, 1872 (1 of 1872);
- (h) the Prohibition of Child Marriage Act, 2006 (6 of 2007);
- (i) the Personal Injuries Act, 1963 (37 of 1963)
- (j) the Drugs and Cosmetics Act, 1940 (23 of 1940) and the rules made therein;
- (k) the Drugs and Magic Remedies (Objectionable Advertisements) Act, 1954 (21 of 1954);
- (l) the Transplantation of Human Organs Act, 1994 (42 of 1994);
- (m) the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 (57 of 1994);
- (n) the Homoeopathic Practitioners (Professional Conduct, Etiquette and Code of Ethics) Regulations, 1982;
- (o) the Drugs Control Act, 1950 (26 of 1950);
- (p) the Medicine and Toiletry Preparations (Excise Duties) Act, 1955 (16 of 1955);
- (q) the Indian Penal Code (45 of 1860) and the Criminal Procedure Code (2 of 1974) {relevant provsions)
- (r) the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (1 of 1996);
- (s) the Clinical Establishment (Registration and Regulation) Act, 2010 (23 of 2010).

B. Practical:

1. Demonstration:

- (a) Weapons
- (b) Organic and inorganic poisons
- (c) Poisonous plants

- (d) Charts, diagrams, photographs, models, x-ray films of medico-legal importance
- (e) Record of incidences reported in newspapers or magazines and their explanation of medicolegal importance.
- (f) Attending demonstration of ten medico-legal autopsies.

2. Certificate Writing:

Various certificates like sickness certificate, physical fitness certificate, birth certificate, death certificate, injury certificate, rape certificate, chemical analyzer (Regional Forensic Laboratory), certificate for alcohol consumption, writing post-mortem examination report.

C. Examination:

1. Theory:

1.1. Number of papers-01

1.2. Marks: 100

2. Practical including viva voce or oral:

2.1. Marks: 100

2.2. Distribution of marks;	<u>Marks</u>
2.2.1. Medico-legal aspect of 4 specimens	40
2.2.3. Journal or practical records	10
2.2.4. Viva voce (oral)	50
Total	<u>100</u>

GYNAECOLOGY AND OBSTETRICS

Instructions:

- I (a) Homoeopathy adopt the same attitude towards this subject as it does towards Medicine and Surgery, but while dealing with Gynaecology and Obstetrical cases, a Homoeopathic physician must be trained in special clinical methods of investigation for diagnosing local conditions and individualising cases, the surgical intervention either as a life saving measure or for removing mechanical obstacles, if necessary, as well as their management by using homoeopathic medicines and other auxiliary methods of treatment;
 - (b) Pregnancy is the best time to eradicate genetic dyscrasias in women and this should be specially stressed. And students shall also be instructed in the care of new born;
 - (c) The fact that the mother and child form a single biological unit and that this peculiar close physiological relationship persists for at least the first two years of the child's life should be particularly emphasised.
- II A course of instructions in the principles and practice of gynaecology and obstetrics and infant hygiene and care including the applied anatomy and physiology of pregnancy and labour, will be given.
- III Examinations and investigations in gynaecological and obstetrical cases shall be stressed and scope of homoeopathy in this subject shall be taught in details.
- IV The study shall start in Second B.H.M.S and shall be completed in Third B.H.M.S. and examinations will be held in Third B.H.M.S and following topics shall be taught, namely:-

Second B.H.M.S

A. Theory:

1. Gynaecology

- a) A review of the applied anatomy of female reproductive systems-development and malformations.
- b) A review of the applied physiology of female reproductive systems-puberty, menstruation and menopause.
- c) Gynaecological examination and diagnosis.
- d) Developmental anomalies
- e) Uterine displacements.
- f) Sex and intersexuality.
- g) General Management and therapeutics of the above listed topics in Gynaecology.

2. Obstetrics

- a) Fundamentals of reproduction.
- b) Development of the intrauterine pregnancy-placenta and foetus.
- c) Diagnosis of pregnancy-investigations and examination.
- d) Antenatal care.
- e) Vomiting in pregnancy.
- f) Preterm labour and post maturity.
- g) Normal labour and puerperium
- h) Induction of labour
- i) Postnatal and puerperal care.
- i) Care of the new born.
- k) Management and therapeutics of the above listed topics in obstetrics.

B. Practical or clinical:

Practical or clinical classes shall be taken on the following topics both in Second and Third B.H.M.S

- (a) Gynaecological case taking
- (b) Obstetrical case taking
- (c) Gynaecological examination of the patient
- (d) Obstetrical examination of the patient including antenatal, intranatal and post- natal care
- (e) Bed side training
- (f) Adequate grasp over Homoeopathic principles and management
- (g) Identification of Instruments and models

Record of ten cases each in gynaecology and obstetrics.

Examination:

It will be conducted in Third B.H.M.S (not in Second B.H.M.S).

SURGERY

- I (a) Homoeopathy as a science needs clear application on part of the physician to decide about the best course of action(s) required to restore the sick, to health;
 - (b) Knowledge about surgical disorders is required to be grasped so that the Homoeopathic Physician is able to:-
 - 1. Diagnose common surgical conditions.
 - 2. Institute homoeopathic medical treatment wherever possible.
 - 3. Organise Pre and Post-operative Homoeopathic medicinal care besides surgical intervention with the consent of the surgeon.
- II For the above conceptual clarity and to achieve the aforesaid objectives, an effective co-ordination between the treating surgeons and homoeopathic physicians is required keeping in view the holistic care of the patients and it will also facilitate the physician in individualising the patient, necessary for homoeopathic treatment and management.
- III The study shall start in Second B.H.MS and complete in Third B.H.M.S. and examination shall be conducted in Third B.H.MS.
- IV (a) Following is a plan to achieve the above and it takes into account about the Second and Third year B.H.M.S syllabus and respective stage of development;
 - (b) Throughout the whole period of study, the attention of the students should be directed by the teachers of this subject to the importance of its preventive aspects.
- V There shall be periodical inter-departmental seminars, to improve the academic knowledge, skill and efficiency of the students and the study shall include training on,
 - a) principles of surgery,
 - b) fundamentals of examination of a patient with surgical problems
 - c) use of common instruments for examination of a patient.
 - d) physiotherapy measures.
 - e) applied study of radio-diagnostics.

- f) knowledge of causation, manifestations, management and prognosis of surgical disorders.
- g) miasmatic background of surgical disorders, wherever applicable.
- h) bedside clinical procedures.
- i) correlation of applied aspects, with factors which can modify the course of illness, including application of medicinal and non-medicinal measures.
- j) role of homoeopathic treatment in pseudo-surgical and true surgical diseases.

Second B.H.M.S

A. Theory:

General Surgery:-

- 1. Introduction to surgery and basic surgical principles.
- 2. Fluid, electrolytes and acid-base balance.
- 3. Haemorrhage, haemostasis and blood transfusion.
- 4. Boil, abscess, carbuncle, cellulitis and erysipelas.
- 5. Acute and chronic infections, tumors, cysts, ulcers, sinus and fistula.
- 2. Injuries of various types; preliminary management of head injury
- 3. Wounds, tissue repair, scars and wound infections.
- a. 8.Special infections (Tuberculosis, Syphilis, Acquired Immuno Defeciency Syndrome, Actinomycosis, Leprosy).
- 4. Burn
- 5. Shock
- 6. Nutrition
- 7. Pre-operative and post-operative care.
- 8. General management, surgical management and homoeopathic therapeutics of the above topics will be covered.

Examination: There will be no examination in the subject in Second B.H.M.S.

Practical or clinical:

(To be taught in Second and Third B.H.M.S.)

- 1. Every student shall prepare and submit twenty complete histories of surgical cases, ten each in the Second and Third B.H.M.S. classes respectively.
- 2. Demonstration of surgical Instruments, X-rays, specimens etc.
- 3. Clinical examinations in Surgery.
- 4. Management of common surgical procedures and emergency procedures as stated below:
 - (a) Wounds
 - (b) Abscesses: incision and drainage.
 - (c) Dressings and plasters.
 - (d) Suturing of various types.
 - (b) Pre-operative and post-operative care.
 - (c) Management of shock.
 - (d) Management of acute haemorrhage.
 - (e) Management of acute injury cases.
 - (f) Preliminary management of a head Injury case.

Examination:

It will be conducted in Third B.H.M.S (not in Second B.H.M.S).

SECOND BHMS EXAMINATION

- (i) Second B.H.M.S examination.— Subject to the provisions of sub-clause (c) of clause (iii) of regulation 11, no candidate shall be admitted to the Second B.H.M.S examination unless he has passed the First B.H.M.S examination and has required attendance as per clause (iii) of regulation 13 to the satisfaction of the Head of the Homoeopathic Medical College.
- (ii) The Second BHMS examination shall be held in the 24th month of admission to First BHMS.
- (iii) The minimum number of hours for lecture, demonstration or practical or clinical classes and seminar in the subjects shall be as follows, namely:—

Sl. No.	Subject	Theoretical lecture (in hours)	Practical or clinical or tutorial or seminar (in hours)
1.	Pathology	200	80
2.	Forensic Medicine and Toxicology	80	40
3.	Organon of Medicine with Homoeopathic Philosophy	160	60
4.	Homoeopathic Materia Medica	160	60
5.	Surgery	80	60 (One term of three months in surgical ward and outpatient department).
6.	Gynaecology and Obstetrics	40 and 40=80	60 (One term of three months in gynaecology and obstetrics ward and outpatient department).

- (iv) In order to pass the Second B.H.M.S examination, a candidate has to pass all the subjects of examination.
- (v) Full marks for each subject and minimum marks required for pass are as follows, namely:-

Subject	Written		Practical or clinical including oral		Total	
	Full marks	Pass marks	Full marks	Pass marks	Full marks	Pass marks
Pathology	200	100	100	50	300	150
Forensic medicine and toxicology	100	50	100	50	200	100
Homoeopathic materia medica	100	50	100	50	200	100
Organon of medicine	100	50	100	50	200	100