

Subject: Surgery
 Subject code: Hom UG-Sur-I
 Year of Examination: 2028



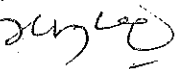

Max. Marks: 200
 Theory: Paper I: 100
 Paper II: 100

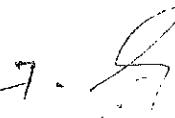



Instructions for paper setters:

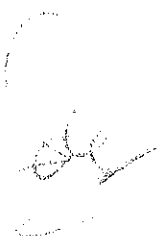
1. Paper 1 and paper 2 shall carry 100 marks each.
2. All questions compulsory.
3. Attempt questions in serial order.
4. Illustrate your answers with well labeled diagrams where ever necessary.

Distribution of marks:

5. MCQs 10marks (1 mark each)
6. Short answer questions 40 marks (5 marks each)
7. Long answer questions 50 marks (10 marks each)

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Subject name - Surgery

Subject code- HomUG -Sur -I

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1. Preamble

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

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

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

2. Course outcomes

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

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

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

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

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

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

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4. Course content and its term-wise distribution

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

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5. Teaching hours

5.1. Gross division of teaching hours

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

5.2. Teaching hours theory

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

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

5.3. Teaching hours Non-lecture

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

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

6. Content mapping (competencies tables)

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

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

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Theory: Paper 1- 100
Paper 2- 100

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

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6.2. Trauma/ Injury and examination of trauma case-

Sl. No.	Domain of Competency	Miller	Content	SLO	Bloom/Guilbert	Priority	TL MM	Assessment		Integration
								F	S	
Hom UG-Sur-I 2.1	KS	KH	Types of injury	Classify different types of injury/ trauma according to causation and be effects	C/2	Must know	Lecture Audiovisual mode	Viva	MCQ SAQ	FMT
Hom UG-Sur-I 2.2	HO	KH	Homoeopathic therapeutics of injury	List homeopathic remedies that are commonly used for specific types of injuries	C/1	Must know	Lecture Small group discussion	Viva	SAQ	Materia Medica
Hom UG-Sur-I 2.3	KS	KH	Principles in the management of road traffic accident	Describe the components of primary survey in victims of road traffic accidents	C/2	Must know	Lecture/ small group discussion	Viva OSCE	SAQ LAQ	--

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

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

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6.3. Head injury; Examination of head injury case-

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

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

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

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

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| Hom
UG-
Sur-I
4.3 | KS | KH | Chest injuries
-tension
pneumothorax | Define tension
pneumothorax

Enumerate the
cause of tension
pneumothorax

Discuss the clinical
features of tension
pneumothorax

Discuss the
management of
tension
pneumothorax | C/1

C/2

C/2

C/2 | Must
know

Must
know

Must
know

Must
know | Lecture
Small
group
discussion
Audiovisu
al aid
Skill lab
simulation | Viva
OSCE | SAQ
LAQ
MCQ | |
| Hom
UG-
Sur-I
4.4 | KS | KH | Chest injury -
Thoracotomy | Enumerate the
indications for
Emergency
thoracotomy | C/2 | Desirable
to know | Lecture | Viva | SAQ | |
| Hom
UG-
Sur-I
4.5 | KS | KH | Abdominal
injury -
Clinical
features,
investigation
s and
management
of abdominal
injuries | Explain the clinical
presentations of
blunt abdominal
trauma

Enumerate the
relevant
investigations to be
advised in a case of
blunt abdominal
trauma | C/2

C/2 | Must
know

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

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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

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Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom/Guilbert | Priority | TL MM | Assessment | | Integration |
|------------------|----------------------|--------|-------------------------------------|--|----------------|----------------------------|--|--------------------------------------|------------|-------------|
| | | | | | | | | F | S | |
| Hom UG-Sur-I 5.1 | KS | K | Types of wounds | Discuss various types of closed wounds

Discuss various types of open wounds | C/1 | Must know

Must know | Lecture
Small group discussion | Viva | MCQ
SAQ | FMT |
| Hom UG-Sur-I 5.2 | KS | KH | Wound healing process and its types | Discuss the various stages of wound healing | C/1 | Must know | Lecture
Audiovisual aid
Small project | Viva | SAQ
MCQ | Pathology |
| | | | | Discuss the factors affecting the wound healing | C/2 | Desirable to know | | | | |
| | | | | Discuss the types of wound healing | C/2 | Must know | | | | |
| Hom UG-Sur-I 5.3 | PBL | SH | Examination of wound | Demonstrate the evaluation and assessment of wound | P/2 | Must know | Audiovisual aid
Case based discussion
DOPS | Viva
Clinical performance
OSCE | | |

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Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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|------------------|-----|----|--|--|----------------|----------------------------|---|------|-----|--------------------------|
| | HO | KH | Homeopathic management of surgical site infections | Discuss the scope of Homoeopathy in surgical site infections.

Discuss the Homeopathic therapeutics for surgical site infections | C/1

C/1 | Must know

Must know | | | | |
| Hom UG-Sur-I 5.6 | HO | KH | Wound management | Discuss the homoeopathic therapeutics for various types of injuries | C/2 | Must know | Lecture | Viva | SAQ | Materia Medica Repertory |
| Hom UG-Sur-I 5.7 | PBL | K | Wound management | Enumerate different types of Suture materials | C/2 | Desirable to know | Tutorial
Small project | Viva | SAQ | |
| | | SH | | Demonstrate different types of Suture / knotting techniques | P/2 | Nice to know | Skill lab simulation
Audiovisual aid
DOAP | | | |
| | | KH | | Discuss the Principles of anastomosis | C/2 | Nice to know | Tutorial
Audiovisual aid | | | |

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

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

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

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

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6.7. Shock; Examination of shock -

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

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

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

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

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Subject: Surgery
Subject code: HomUG-Sur-I
Year of Exam: 2028

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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

Subject: Surgery
Subject code: HomUG-Sur-I
Year of Exam: 2028

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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10/11/2028
9/11/2028

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|--------------------------------|----|----|----------------------|--|-----------------------------------|--|---|------|------------|---------------------------|
| Hom
UG-
Sur-I

8.5 | KS | KH | Acid base
balance | Enumerate the
causes of
respiratory
acidosis

Describe the
clinical features
and laboratory
findings of
respiratory
acidosis

Discuss the
management of
respiratory
acidosis | C/2

C/2

C/2 | Must
know

Must
know

Must
know | Lecture
Small
group
discussion | Viva | MCQ
SAQ | Biochemistry
Pathology |
| Hom
UG-
Sur-I

8.6 | KS | KH | Acid base
balance | Enumerate the
causes of
respiratory
alkalosis

Describe the
clinical features
and laboratory
findings of
respiratory
alkalosis

Discuss the
management of
respiratory
alkalosis | C/2

C/2

C/2 | Must
know

Must
know

Must
know | Lecture
Audiovisu
al aid | Viva | MCQ
SAQ | Biochemistry
Pathology |

10/11/2028
9/11/2028
8/11/2028

10/11/2028
9/11/2028
8/11/2028

Subject: Surgery
Subject code: HomUG-Sur-I
Year of Exam: 2028

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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

9-10

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

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

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|---------------------------------|-----|----|--|--|-----|--------------|---|--|------|--|
| Hom
UG-
Sur-I

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

6.9. Burns, skin grafting; Clinical examination-

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

| | | | | | | | | | | |
|------------------|-----|----|-------------------------|--|-----|-------------------|--|--------------|-----|--------------------------|
| | | | | Explain the principles of fluid resuscitation in burns cases | C/2 | Desirable to know | | | | |
| | | | | Discuss the management of burn wound | C/2 | Must know | | | | |
| Hom UG-Sur-I 9.2 | HO | KH | Burns and skin grafting | Discuss the scope of Homoeopathy in the management of burns

Discuss the homoeopathic therapeutics for burns | C/2 | Must know | Lecture small group discussion | Viva | SAQ | Materia Medica Repertory |
| Hom UG-Sur-I 9.3 | PBL | SH | Burns and skin grafting | Examination of case of burns

Assessment of burn wound | P/2 | Desirable to know | Simulation and skill lab training DOPS | Logbook OSCE | -- | -- |

101
101

| | | | | | | | | | | |
|----------------------------|----|---|----------------------------|--|-----|----------------------|-------------------------------|------|-----|--|
| Hom
UG-
Sur-I
9.4 | KS | K | Burns and
skin grafting | Enumerate the
indications
for skin
grafting

Describe the
various types
of skin
grafting | C/2 | Desirable
to know | Lecture
Audiovisual
aid | Viva | SAQ | |
|----------------------------|----|---|----------------------------|--|-----|----------------------|-------------------------------|------|-----|--|

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6.10. Nutrition-

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

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

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

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

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

| | | | | | | | | | | |
|-------------------|----|----|---|--|----------------|----------------------------|-----------------------------------|------|-------------------|-----------|
| | | | | Discuss the difference between cellulitis and erysipelas | C/2 | Must know | | | | |
| Hom UG-Sur-I 11.5 | KS | KH | Hidradenitis suppurativa | Discuss the pathology of Hidradenitis suppurativa

Explain the clinical features of Hidradenitis suppurativa | C/2

C/2 | Must know

Must know | Lecture | Viva | SAQ
MCQ | Pathology |
| Hom UG-Sur-I 11.6 | KS | K | Septicaemia and pyaemia | Define septicaemia.

Enumerate the causes of septicemia discuss the clinical features of septicaemia | C/1

C/2 | Must know

Must know | Lecture
Small group discussion | Viva | LAQ
SAQ
MCQ | Pathology |
| Hom UG-Sur-I 11.7 | KS | K | Systemic inflammatory response syndrome | Define systemic inflammatory response syndrome (SIRS) | C/1 | Must know | Lecture
Audiovisual aid | Viva | LAQ
SAQ
MCQ | Pathology |

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

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|------------------------------|----|----|--|--|-----|-----------|--------------------------------------|------|-----|--------------------------------|
| Hom
UG-
Sur-I
11.10 | HO | KH | Common
surgical
infections
Septicaemi
a and
pyaemia | Discuss the
role of
Homoeopath
y in
septicaemia
and pyaemia

Discuss the
homoeopathi
c
therapeutics
forsepticaem
ia and
pyaemia | C/2 | Must know | Lecture
Small group
discussion | Viva | SAQ | Materia
Medica
Repertory |
|------------------------------|----|----|--|--|-----|-----------|--------------------------------------|------|-----|--------------------------------|

6.12. Special infections; Clinical examination-

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

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

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

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

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

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

10.1

| | | | | | | | | | | |
|-----------------------------|----|----|---------|--|-----|-----------|------------------------------------|------|----------------|---|
| Hom
UG-
Sur-I
13.2 | KS | KH | Tumours | Discuss the
differences between
benign and malignant
tumours

Differentiate
different tumours like
sarcoma,
Fibrosarcoma,
Naevus, Melanoma
etc | C/2 | Must Know | Lecture

Audiovi
sual aid | Viva | SAQ

LAQ | Pathology |
| Hom
UG-
Sur-I
13.3 | HO | K | Tumours | Discuss
Homoeopathic
Therapeutics of
Tumour | C/2 | Must Know | Lecture | Viva | MCQ
SAQ | Pathology

Organon:
Miasm

Materia
Medica |
| Hom
UG-
Sur-I
13.4 | KS | K | Cyst | Define Cyst | C/1 | Must Know | Lecture | Viva | MCQ | Pathology |
| Hom
UG-
Sur-I
13.5 | KS | KH | Cyst | Explain Types of
Cyst | C/2 | Must Know | Lecture

Audiovi
sual aid | Viva | SAQ
LAQ | Pathology |

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9.5

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|-------------------|-----|----|---|---|-----|-----------|--|------|-------------------|--|
| Hom UG-Sur-I 13.6 | HO | K | Cyst | Discuss the homoeopathic therapeutics for Cyst | C/2 | Must Know | Lecture | Viva | MCQ
SAQ | Pathology
Organon:
Miasm
Materia Medica |
| Hom UG-Sur-I 13.7 | KS | KH | Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma | Explain Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma | C/2 | Must Know | Lecture
Audiovisual aid | Viva | SAQ
LAQ
MCQ | Pathology |
| Hom UG-Sur-I 13.8 | HO | KH | of Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma | Discuss the Homoeopathic therapeutics of Lipoma, Fibroma, Adenoma, Neuroma, Neurofibroma, Haemangioma | C/2 | Must Know | Lecture
Small group discussion | Viva | MCQ
SAQ
LAQ | Pathology
Organon:
Miasm
Materia Medica |
| Hom UG-Sur-I 13.9 | PBL | SH | Tumour & Swelling | Demonstrate examination of Tumour swelling of different types | P/2 | Must Know | Clinical demonstration
DOPS
Small group discussion | OSCE | Mini-cex
OSCE | |

4.5
10.1

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

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom/Guilbert | Priority | TL MM | Assessment | | Integration |
|-------------------|----------------------|-------------|-----------------|---|----------------|-------------------|--|------------|-------------------|---------------------------|
| | | | | | | | | F | S | |
| Hom UG-Sur-I 14.1 | KS | K

KH | Hernia | Define Hernia | C/1 | Must Know | Lecture | Viva | MCQ
SAQ
LAQ | Anatomy
,
Pathology |
| | | | | Enumerate the causes of hernia | C/2 | | Audiovisual aids | | | |
| | | | | Discuss the clinical classification of hernias | C/2 | Must know | Small group discussion | | | |
| | | | | Discuss the principles of management of hernias | C/2 | Must know | | | | |
| | | | | Discuss the operative approaches to hernias | C/2 | Desirable to know | | | | |
| Hom UG-Sur-I 14.2 | KS | KH | Inguinal hernia | Describe the basic anatomy of inguinal canal | C/1 | Must know | Lecture
Audiovisual aid
Small group discussion | Viva | MCQ
SAQ
LAQ | Anatomy |

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

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| | | | | | | | | | | |
|-----------------------------|----|----|----------------------|--|---------------------------|---|---------------------------------|------|---------------------------|--|
| Hom
UG-
Sur-I
14.5 | KS | KH | Epigastric
hernia | Explain the
pathology of
epigastric hernia

Describe the
clinical features
of epigastric
hernia | C/2

C/2 | Must know

Must know | Lecture

Audiovisual aids | Viva | MCQ

SAQ

LAQ | |
| Hom
UG-
Sur-I
14.6 | KS | KH | Incisional
hernia | Describe
etiology of
incisional hernia

Discuss the
clinical features
of incisional
hernia

Discuss the
management of
incisional hernia | C/2

C/2

C/2 | Must know

Must know

Nice to
know | Lecture

Audiovisual aids | Viva | MCQ

SAQ

LAQ | |
| Hom
UG-
Sur-I
14.7 | KS | KH | Spigelian
hernia | Explain spigelian
hernia | C/2 | Desirable
to know | Lecture

Audiovisual aids | Viva | MCQ

SAQ | |
| Hom
UG-
Sur-I
14.8 | KS | KH | Lumbar
hernia | Explain lumbar
hernia | C/2 | Desirable
to know | Lecture

Audiovisual aids | Viva | MCQ

SAQ | |

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

6.15. Ulcers; Clinical examination of ulcer-

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom/Guilbert | Priority | TL MM | Assessment | | Integration |
|-------------------|----------------------|--------|---------|--|----------------|-----------|--|------------------|-------------------|---|
| | | | | | | | | F | S | |
| Hom UG-Sur-I 15.1 | KS | K | Ulcer | Define Ulcer | C/1 | Must Know | Lecture | Viva | MCQ | Pathology
Organon: Miasm
Materia Medica |
| Hom UG-Sur-I 15.2 | KS | KH | Ulcer | Describe different classification of Ulcer | C/2 | Must Know | lecture | Viva | MCQ
SAQ
LAQ | Pathology |
| Hom UG-Sur-I 15.3 | HO | KH | Ulcer | Explain therapeutics of ulcer | C/1 | Must Know | Lecture/ Small group discussion | Viva | MCQ/SAQ/LAQ | Pathology
Organon: Miasm
Materia Medica |
| Hom UG-Sur-I 15.4 | PBL | SH | Ulcer | Demonstrate examination of ulcer | P/2 | Must Know | Clinical demonstration
DOPS
OSCE
Small group discussion | OSCE
Mini-cex | OSCE
Mini-cex | |

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

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|-------------------|----------------------|--------|-------------------|--|-----------------|-----------|--|------------|-------------------|--|
| | | | | | | | | F | S | |
| Hom UG-Sur-I 16.1 | KS | K | Sinus and Fistula | Define sinus and fistula | C/1 | Must Know | Lecture | Viva | MCQ | Pathology |
| Hom UG-Sur-I 16.2 | KS | KH | Sinus and Fistula | Explain sinus and fistula | C/2 | Must Know | Lecture | Viva | MCQ
SAQ
LAQ | Pathology

Organon:
Miasm

Materia Medica |
| Hom UG-Sur-I 16.3 | PBL | SH | Sinus and Fistula | Demonstrate examination of sinus and fistula | P/2 | Must Know | Clinical demonstration
DOPS

Small group discussion | OSCE | OSCE | |
| Hom UG-Sur-I 16.4 | HO | K | Sinus and Fistula | Explain therapeutics of sinus and fistula | C/1 | Must Know | Lecture

Small group discussion | Viva | MCQ
SAQ
LAQ | Organon:
Miasm

Materia Medica |

7. Teaching learning methods

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

8. Details of assessment

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

Overall Scheme of Internal Assessment (IA)*

| Professional Course/
Subject | Term I (1-6 Months) | | Term II (7-12 Months) | |
|---------------------------------|------------------------|------------------------|-------------------------|--------------------------|
| II BHMS/ | PA I (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | TT II (end of 12 months) |

| | | | | |
|---------|------------------|---|------------------|--|
| Surgery | 20 Marks Viva- A | 100 Marks Clinical/Practical and Viva - E

i) Viva voce -50 marks
ii) Clinical/practical- 50
Surgical Case taking - 25marks (Mandatory);

Examination of wound/Cleaning and dressing of wound/Demonstration of Steps of Basic life support/Transport of the injured /Demonstration of suturing technique.
<i>(Demonstration of any one of the procedures mentioned)</i> - 25 marks | 20 Marks Viva- B | 100 Marks Clinical/Practical and Viva - F

i) Viva voce -50 marks
ii) Clinical/practical- 50
Surgical case taking and

Examination of surgical case - 15+15=30 marks;

Surgical case file (5 cases)-20 marks |
|---------|------------------|---|------------------|--|

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

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

9. List of recommended text/reference books

- Williams, N., O'Connell, P. R., & McCaskie, A. (2018).
- *Bailey and Love's Short Practice of Surgery, 27th Edition: the Collector's Edition.* Chapman and Hall/CRC.
- Sriram Bhat. (2019). *SRB's manual of surgery.* Jaypee Brothers.
- A concise text book of surgery, 11th edition – S Das
- Das, S. (2024). *A Manual on Clinical Surgery.* Jaypee Brothers Medical Publishers Pvt Limited.
- Sriram, B. M. (2019). *SRB's clinical methods in surgery.* Jaypee Brothers Medical Publishers.
- Kulkarni, S. (2002). *Surgery Therapeutics.* B. Jain Publishers.
- Lilienthal, S. *Homoeopathic Therapeutics.*
- Willis Alonzo Dewey. (2018). *Practical Homeopathic Therapeutics.* B. Jain Publishers.

10. List of Contributors:

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Professor in Department of Surgery
Smt. Malini Kishore Sanghvi Homoeopathic Medical College & Hospital
Karjan, Dist: Vadodara, Gujarat

Subject: Homoeopathic Materia Medica
Subject code: Hom UG-HMM-II
Year of Examination: 2027

Max. Marks: 100
Theory: 100

Instructions for paper setters:

1. There will be one paper only of 100 marks.
2. All questions compulsory.
3. Attempt questions in serial order.
4. Illustrate your answers with well labeled diagrams where ever necessary.

Distribution of marks:

5. MCQs 10marks (1 mark each)
6. Short answer questions 40 marks (5 marks each)
7. Long answer questions 50 marks (10 marks each)

1.

6. 20

3. 20

4. 10

5. 10

6. 10

7. 10

8. 10

9. 10

10. 10

11. 10

Subject: Homoeopathic Materia Medica

Subject code: HomUG-HMM-II

Year of Exam: 2027

Maximum marks:100

Theory: 100

✓

Subject: Homoeopathic Materia Medica

Subject code: HomUG-HMM-II

Index

| S.No | Description | Page Number |
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| 2. | Course Outcomes (CO) | 3 |
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1. Preamble

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

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

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

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

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

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2. Course outcomes

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

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3. Learning objectives

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

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

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

4.1 Introductory lectures

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

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4.2 Homoeopathic medicines:

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

4.3 Content for Term I

4.3.1 Introductory Lectures:

4.3.1.1 Assessment of Entry Behavior for I BHMS syllabus

4.3.1.1.1 Different approaches for studying Homoeopathic Materia Medica

4.3.1.2 Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia Medica

4.3.2 Homoeopathic medicines:

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

4.4 Contents for Term II:

Homoeopathic medicines:

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

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

5. Teaching hours

5.1. Gross division of teaching hours

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

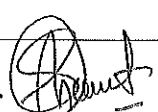
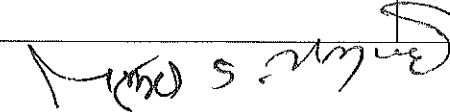
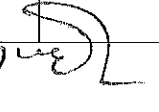
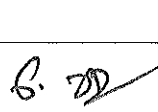
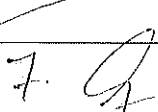
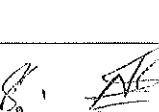
5.2. Teaching hours theory


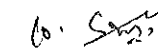
| S. No. | List of Topics | Hours |
|--------|--|-------|
| 1. | Assessment of Entry Behavior of I BHMS syllabus | 2 |
| 2. | Different approaches for studying Homoeopathic Materia Medica | 4 |
| 3. | Integrating the knowledge of Pathology and Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics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


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5.3. Teaching hours Non-lecture

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

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6. Content mapping (competencies table)

6.1 Competencies table theory

| Sl. No. | Competency | Millers Level: | Content | SLO/ Outcome | Blooms Domain / Guilbert, s Level | Priority | T-L Methods/ media | Assessment | | Integration |
|------------------|-------------------|----------------|---|--|-----------------------------------|----------|---------------------|---------------------|-------------------|--|
| | | | | | | | | Formative | Summative | |
| HomUG-HMM-II-1. | K & S
PC
HO | KH

K | Assessment of Entry Behaviour of I BHMS syllabus | Recall the knowledge of I BHMS syllabus for Materia Medica | C1 | MK | Group Discussion | MCQ, viva | MCQ
SAQ
LAQ | Spiral integration with Homoeopathic Materia Medica
Vertical integration with Anatomy, Physiology, Pharmacy, Psychology, Organon) |
| HomUG-HMM-II-2.1 | | | Different approaches for studying Homoeopathic Materia medica | Enumerate the different approaches for studying Homoeopathic Materia medica | C2 | MK | Lecture

PPT | MCQ
Assignm ent | SAQ | Horizontal integration with subjects of Pathology , Toxicology , Physiology Organon , Anatomy , Psychology and Homoeopathic pharmacy |
| HomUG-HMM-II-2.2 | | | | Explore the scope and limitation of each approaches for studying Homoeopathic Materia Medica | | | Library reference s | Project

viva | | |

| Sl. No. | Competency | Millers Level: | Content | SLO/ Outcome | Blooms Domain / Guilbert, s Level | Priority | T-L Methods/ media | Assessment | | Integration |
|------------------|-------------------|----------------|---|---|-----------------------------------|----------|--------------------------|--------------------------------------|-------------------|---|
| | | | | | | | | Formative | Summative | |
| HomUG-HMM-II-3. | | | Integrating the knowledge of Pathology, Toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in better understanding of Homoeopathic Materia medica | Integrate the knowledge of Pathology, toxicology, Practice of Medicine, Surgery and Gynaecology-Obstetrics in understanding the evolution of symptoms of remedies | C2 | MK | Lecture
Team teaching | MCQ
Assignment
Project
viva | SAQ | Horizontal integration with subjects of Pathology Toxicology , and Organon |
| HomUG-HMM-II-4.1 | K & S
PC
HO | KH
K | Individual Homoeopathic medicines | Mention the common name, source/ family/kingdom and the prover | C1 | NK | Lecture/ Specimen | MCQ
Viva | MCQ | Vertical integration with Pharmacy |
| HomUG-HMM-II-4.2 | | | | Correlate with doctrine of signature | C2 | NK | Lecture/ Specimen | MCQ
Viva | MCQ | Vertical integration with Pharmacy and Physiology |
| HomUG-HMM-II-4.3 | | | | List the sphere of action | C1 | MK | Lecture
Self-learning | Assignment
Project | LAQ
SAQ
MCQ | Horizontal |

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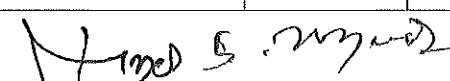
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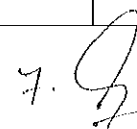

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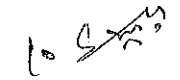

| Sl. No. | Competency | Millers Level: | Content | SLO/ Outcome | Blooms Domain / Guilbert, s Level | Priority | T-L Methods/ media | Assessment | | Integration |
|-------------------|------------|----------------|---------|---|-----------------------------------|----------|------------------------|------------|-----------|--|
| | | | | | | | | Formative | Summative | |
| | | | | | | | | MCQ | Viva | Integration with Pathology, Toxicology, |
| HomUG-HMM-II-4.4 | | | | Narrate the 'ailments from' | C1 | | Small Group Discussion | Viva | | ObGy, PM, Surgery and Organon |
| HomUG-HMM-II-4.5 | | | | Describe the constitution and temperament | C1 | | Black Board | | | Vertical integration with
Anatomy
Pharmacy,
Psychology and
Physiology |
| HomUG-HMM-II-4.6 | | | | Explain the mental symptoms | C1 | | PPT | | | |
| HomUG-HMM-II-4.7 | | | | Explain the physical generals | C1 | | Handouts
Role play | | | |
| HomUG-HMM-II-4.8 | | | | Outline the general modalities | C1 | | PBL | | | |
| HomUG-HMM-II-4.9 | | | | Describe the particular symptoms and modalities | C2 | | | | | |
| HomUG-HMM-II-4.10 | | | | Correlate pathogenesis with knowledge of Toxicology, Pathology, Practice of Medicine, Surgery and | C2 | | | | | |

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| Sl. No. | Competency | Millers Level: | Content | SLO/ Outcome | Blooms Domain / Guilbert, s Level | Priority | T-L Methods/ media | Assessment | | Integration |
|-------------------|------------|----------------|---------|--|-----------------------------------|----------|--------------------|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| | | | | Gynaecology-Obstetrics and miasm | | | | | | |
| HomUG-HMM-II-4.11 | | | | Mention the Relationships of medicines | C2 | | | | | |
| HomUG-HMM-II-4.12 | | | | Compare and contrast from the related remedies of First and Second BHMS Syllabus | C2 | | | | | |

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6.2 Competencies table practical/clinical

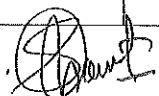
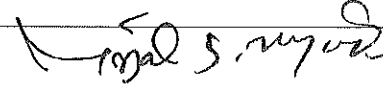
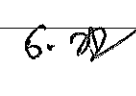
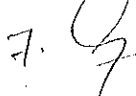


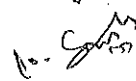

| S. No. | Domain of Competency | Millers Level: | Content | SLO/ Outcome | Blooms Domain / Guilbert's Level | Priority | T-L Methods/media | Assessment | | Integration |
|------------------|-------------------------|----------------|---------------------------------|--|----------------------------------|----------|----------------------------|------------------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

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7. Teaching learning methods

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



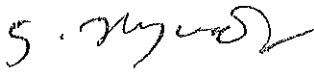
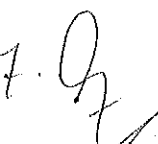
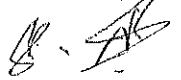
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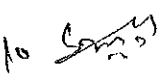

8. Details of assessment

8.1 Overall Scheme of Assessment (Summative)

| Sr. No | Professional Course | Term I (1-6 Months) | | Term II (7-12 Months) | | |
|--------|--------------------------|------------------------|--|-------------------------|------------------------|--|
| 1 | Second Professional BHMS | PA I (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | FUE (end of 12 months) | |
| | | 10 Marks Viva | 50 Marks Practical/ Viva
i) Viva voce -25 marks
ii) Clinical performance - 25 marks (Case Taking and analysis of symptoms) | 10 Marks Viva | 100 marks theory | 100 marks (Clinical/practical+ Viva+ IA) |

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

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

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

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

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

Marks of IA- (Marks of PA-1 + Marks of TT I + Marks of PA-2) / 70 X 10

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8.3 Paper Layout

Summative assessment (FUE): **Theory- 100 marks**

| | |
|-----|----------|
| MCQ | 10 marks |
| SAQ | 40 marks |
| LAQ | 50 marks |

8.4 Distribution of questions for theory exam

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

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8.5 Theme-wise distribution:

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

8.6 Question paper blueprint

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

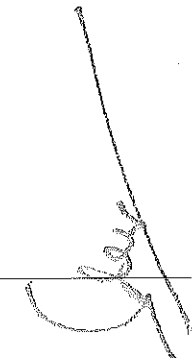
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 A. K. Singh

S. Singh

6. Singh

7. Singh

8. Singh



9. Singh

10. Singh

Subject: Homoeopathic Materia Medica
Subject code: HomUG-HMM-II
Year of Exam: 2027

Maximum marks: 100
Theory: 100

20

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

3. <i>Phosphorus</i>
4. <i>Nitric Acid</i>
5. <i>Hydrocyanic Acid</i>
6. <i>Opium</i>
7. <i>Stramonium</i>
8. <i>Scopolamine</i>
9. <i>Hyoscyamus</i>
10. <i>Atropa</i> |

21

9. List of recommended text/reference books

- Allen H.C. (2005). Keynotes Rearranged and Classified with Leading Remedies of the Materia Medica and Bowel Nosodes, (Reprint 2nd edition), B.Jain Publishers, New Delhi
- Choudhuri N.M. (2006). A Study On Materia Medica Enriched with real case studies, (Reprint revised edition). B.Jain Publishers, New Delhi.
- Kent J.T. (2015). Lectures on Homoeopathic Materia Medica (Reprint edition,) B.Jain Publishers, New Delhi.
- Burt W. (2009). Physiological Materia Medica, (Third edition) B.Jain Publishers, New Delhi.
- Nash E.B. (2007). Leaders in Homeopathic Therapeutics with Grouping and Classification, (Sixth edn.) B Jain Publishers, New Delhi.
- Tyler M.L. (2007). Homoeopathic Drug Picture. (First edition), B Jain Publishers, New Delhi.
- Farrington E.A. (2007) Lectures on Clinical Materia Medica in family order (Fourth edition.) B Jain Publishers Pvt Ltd, New Delhi.
- Farrington E.A. (2005), Comparative Materia Medica. (Reprint edition.) B.Jain Publishers, New Delhi.
- Boericke W, Dewey W, 2016, The Twelve Tissue Remedies by Schussler, Reprint edition, B.Jain Publishers, New Delhi
- All source books.

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Subject: Gynaecology and Obstetrics

Subject code: Hom UG-ObGy-I

Year of Examination: 2028

Max. Marks: 200

Theory: Paper I: 100

Paper II: 100



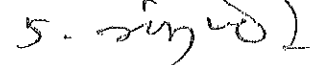
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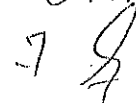


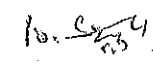
1. Paper 1 and paper 2 shall carry 100 marks each.
2. All questions compulsory.
3. Attempt questions in serial order.
4. Illustrate your answers with well labeled diagrams where ever necessary.

Distribution of marks:

5. MCQs 10marks (1 mark each)
6. Short answer questions 40 marks (5 marks each)
7. Long answer questions 50 marks (10 marks each)



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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028


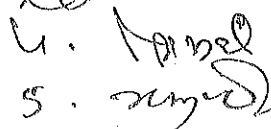
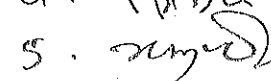



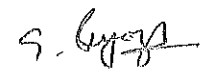



Maximum marks:200
Theory- Paper1- 100
Paper2- 100

Subject name: Gynaecology and Obstetrics

Subject code: HomUG-ObGy-I

Index

| S.No | Description | Page Number |
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1. **Preamble**

Obstetrics stands at the forefront of maternal health, emphasizing the care and well-being of expectant mothers throughout pregnancy, childbirth, and the postpartum period. From prenatal care to labour and delivery, obstetricians play a pivotal role in ensuring safe pregnancies and healthy births. Gynaecology encompasses the diagnosis and treatment of conditions affecting the female reproductive system, from adolescence through menopause, including menstrual disorders, fertility concerns, sexually transmitted infections, and gynecological cancers. Infant care extends beyond the moment of birth, encompassing the critical early stage of a newborn's life. From breastfeeding guidance to newborn screening and immunization.

The fields of Obstetrics, Infant care and Gynaecology intersect to provide holistic care to women across the reproductive lifespan. By addressing the physical, emotional and social aspects of women's health, healthcare providers empower individuals to make informed decisions about their bodies and well-being. In the realm of obstetrics and gynaecology, homeopathy offers a holistic approach that seeks to address the physical, emotional and spiritual aspects of women's health.

Homeopathy, a system of medicine based on the principle of "like cures like" and individualized treatment, can play a significant role in promoting well-being and managing various conditions in obstetrics and gynaecology. Homeopathy offers safe and gentle remedies to support women throughout pregnancy. From alleviating common discomforts such as nausea, fatigue, and back pain to addressing emotional concerns like anxiety and mood swings, homeopathic treatments can provide relief without adverse effects on the developing fetus. Additionally, homeopathy can aid in preparing the mother's body for labor and delivery, promoting a smooth and natural

In the postpartum period, homeopathy offers support for new mothers as they navigate the physical and emotional changes following childbirth, and breastfeeding difficulties, promote lactation, and support the overall recovery of the mother. Homeopathy provides a holistic approach to managing various gynaecological conditions, including menstrual disorders, hormonal imbalances, polycystic ovarian syndrome (PCOS), endometriosis, and menopausal symptoms. Homeopathy considers the individual's unique constitution and emotional state.

In conclusion, homeopathy offers a holistic and patient-centred approach to obstetrics and gynaecology, addressing the physical, emotional, and spiritual aspects of women's health.

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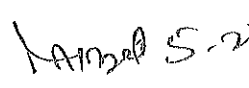


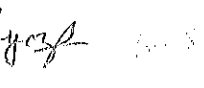

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2. Course outcomes

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

- i. Understand applied anatomy, endocrinology and physiology including abnormality of female reproductive system during puberty, menstruation, menopause and in different stages of womanhood.
- ii. Learn skills in case taking, physical examination, diagnostic procedures and managements of benign and malignant conditions, trauma, infections and inflammations related with female genitalia, and pre-malignancy screening procedures.
- iii. Integrate the various knowledges to get a holistic understanding of disease evolution and approach to disease diagnosis and management.
- iv. Understand developmental anomalies, uterine displacements and Sex and intersexuality
- v. Understand the causes related with male and female Infertility, their diagnosis, Artificial Reproductive Techniques and skill in Homoeopathic management along with population dynamics and control of Conception.
- vi. Know skills required in case taking, clinical examination and common diagnostic modalities in Gynecology and Obstetrics.
- vii. Understand the process of normal pregnancy and minor ailments during pregnancy
- viii. Comprehend the process of diagnosis of normal pregnancy, prenatal, antenatal, postnatal maternal and fetal surveillance, care of newborn, care of puerperium
- ix. Understanding common problems during abnormal pregnancy and labour to manage it through Homoeopathic perspective including scope, limitations and timely referral.
- x. Comprehending postnatal, puerperal care, diseases of fetus, new-born and medico legal aspects with Homoeopathic perspective.
- xi. Learning general and homoeopathic management of common Gynecological and Obstetric conditions

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3. Learning objectives

At the end of the II BHMS course the student shall be able to:

1. Understand the applied anatomy, endocrinology and physiology including abnormality of female reproductive system during puberty, menstruation, menopause and in different stages of womanhood.
2. Integrate the knowledge with Anatomy, Physiology, Organon of medicine, Practice of medicine and Homoeopathic materia medica to get a holistic
3. A understanding of disease evolution and approach to disease diagnosis and management.
4. Discuss the developmental anomalies, Uterine displacements and Sex and intersexuality to understand the Predisposition including fundamental miasm, personality type known to develop particular disease, causation and modifying factors like exciting and maintaining factors.
5. Acquire skill in case taking, clinical examination and common diagnostic modalities in Gynaecology and Obstetrics.
6. Describe anatomical, physiological, endocrinological changes and minor ailments during pregnancy
7. Understand prenatal, antenatal, postnatal maternal and foetal surveillance, care of new-born, care of puerperium
8. Integrate the knowledge with Organon of medicine and Homoeopathic Materia medica for eradicating genetic dyscrasias in the mother and foetus.
9. Describe the mechanism and stages of normal labour, and intra-partum management.
10. Discuss general and Homoeopathic management for the related conditions through integration with repertorisation and therapeutics.

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4. Course content and its term-wise distribution

4.1 Unit 1: Gynaecology and Homoeopathic Therapeutics

| Sl. No. | List of Topics | Term |
|---------|--|------|
| 1.a | Introduction to Gynaecology with Definition of Hahnemannian classification of disease. Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books | I |
| 1.b | A review of the applied anatomy of female reproductive system, development and Developmental anomalies | I |
| 1.c | A review of the applied physiology of female reproductive system - Puberty, Menstruation and its disorders including, amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia, epimenorrhoea, AUB, Postmenopausal bleeding and menopause with related ailments and its scope and management in Homoeopathy and integrate wherever necessary with other disciplines | I |
| 1.d | Gynaecological Case taking, physical examination, investigation and approach to clinical diagnosis and Differential diagnosis. | I |
| 1.e | Epidemiology -Predisposition including fundamental miasm: personality type known to develop particular disease | I |
| 1.f | Uterine displacements - Prolapse, Retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in homoeopathic perspective. | II |
| 1.g | Sex & Intersexuality- Knowledge and scope to eradicate genetic Dyscrasias, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook. | II |
| 1.h | General and Homoeopathic Management, repertorisation, therapeutics, posology, Formulation of prognostic criteria and Prognosis of related topics in Gynecology. | II |

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4.2 . Unit 2: Obstetrics, new born care & Homoeopathic therapeutics

| Sl. No. | List of topics | Term |
|---------|---|------|
| 2.a | Introduction to Obstetrics and Newborn care related with Homoeopathic Philosophy, Therapeutics and Repertorisation. | I |
| 2.b | Fundamentals of reproduction | I |
| 2.c | Development of intra uterine pregnancy | I |
| 2.d | Diagnosis of pregnancy, investigations & examinations, applied anatomy & physiology, Normal pregnancy - physiological changes | I |
| 2.e | Antenatal care - aims, objectives, visits, advise, procedures, investigations, identifying high risk cases, scope and limitation of management in Homoeopathy | I |
| 2.f | Common conditions such as Vomiting, backache, constipation in pregnancy and Homoeopathic management | I |
| 2.g | Normal labour with its causes of onset, anatomy, physiology, mechanism, stages, events and clinical course in each stage, importance of Homoeopathic scope and management | II |
| 2.h | Postnatal & puerperal cure - scope and limitation of management in Homoeopathy | II |
| 2.i | Care of new born in homoeopathic point of view | II |
| 2.j | General and Homoeopathic Management, repertorisation, therapeutics, posology, Formulation of prognostic criteria and Prognosis of related topics in Obstetrics and new-born care. | II |
| 2.k | Important Investigations for diagnosis in Obstetrics | II |

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5. Teaching hours

5.1. Gross division of teaching hours

| Gynaecology and Obstetrics | | |
|----------------------------|--------------------------|------------------------------|
| Year | Teaching hours- Lectures | Teaching hours- Non-lectures |
| II BHMS | 100 | 24 |

5.2. Teaching hours theory

5.2.1 Unit 1: Gynaecology and Homoeopathic Therapeutics

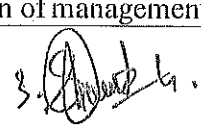
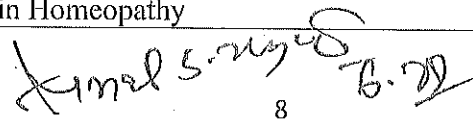
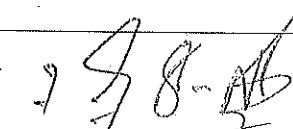
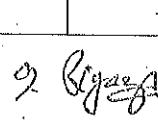
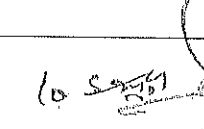
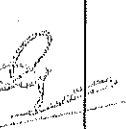
| Sl. No. | List of topics | Lecture hours |
|---------|---|---------------|
| 1.a | Introduction to Gynecology with definition of Hahnemannian classification of disease.
Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books | 02 hrs. |
| 1.b | A review of the applied anatomy of the female reproductive system. | 03 hrs. |
| | Developmental anomalies | 03 hrs. |
| 1.c | A review of the applied physiology of the female reproductive system
HPO axis & Menstruation | 02 hrs. |
| | Puberty | 03 hrs. |
| | Disorders of Menstruation including - Amenorrhoea, Dysmenorrhoea, Menorrhagia, Metrorrhagia, Epimenorrhoea, AUB. | 09 hrs. |
| | Post-Menopausal Bleeding & Menopause with related ailments | 05 hrs. |

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| | | |
|--------------|--|----------------|
| 1.d | Gynaecological case taking, Physical examination, investigation and approach to clinical diagnosis and differential diagnosis. | 04 hrs. |
| 1.e | Epidemiology - Predisposition including fundamental miasm; personality type known to develop particular disease. | 04 hrs. |
| 1.f | Uterine displacements- Prolapse, retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in homoeopathic perspective | 08 hrs. |
| 1.g | Sex & Intersexuality - Knowledge and scope to eradicate genetic dyscrasians, predisposition, miasm and personality types known to develop particular diseases through Homoeopathic outlook | 05 hrs. |
| 1.h | Correlate homoeopathic remedies, Therapeutics, posology. Formulation of prognostic criteria and prognosis related to Gynaecological conditions. | 02 hrs. |
| Total | | 50 hrs. |

5.2.2. Unit 2: Obstetrics, new born care & Homoeopathic therapeutics

| Sl. No. | List of topics | Teaching hours |
|---------|--|----------------|
| 2.a | Introduction to Obstetrics and Newborn Care Related with Homoeopathic Philosophy. Therapeutics and Repertorisation. | 02 hr. |
| 2.b | Fundamentals of reproduction | 04 hrs. |
| 2.c | Development of intrauterine pregnancy- Placenta and foetus. | 04 hrs. |
| 2.d | Diagnosis of pregnancy: Investigations & examinations, applied anatomy & physiology, Normal pregnancy - Physiological changes. | 07 hrs. |
| 2.e | Antenatal care - aims, objectives, visits, advice, procedures, investigations, identifying high-risk cases, scope and limitation of management in Homeopathy | 06 hrs. |

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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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| 2.f | Vomiting in pregnancy | 04 hrs. |
| 2.g | Normal labour with its causes of onset, anatomy, physiology, mechanism, stages, events and clinical course in each stage and management | 08 hrs. |
| 2.h | Postnatal & puerperal cure - scope and limitation of management in Homoeopathy | 06 hrs. |
| 2.i | Care of New-born in a homoeopathic point of view | 04 hrs. |
| 2.j | Correlate homoeopathic remedies, Therapeutics, posology. formulation of prognostic criteria and prognosis related to Obstetrical conditions | 02 hrs. |
| 2.k | Important investigations for diagnosis in Obstetrics | 03 hrs. |
| Total | | 50 hrs. |

5.2.3. Teaching hours Non-lecture

| S. No. | Non lecture activity | Hours |
|--------|--|-----------|
| 1. | Clinical | |
| a. | Gynaecological Case taking | 04 |
| b. | Obstetrical Case taking | 04 |
| c. | Gynaecological Examination | 04 |
| d. | Obstetrical Examination | 04 |
| e. | Investigations, Diagnosis , D/D | 04 |
| 2. | Demonstrative | |
| a. | Problem based / Case based learning-
Foetal skull & maternal pelvis
Demonstration of labour in Mannequin - skill lab | 04 |
| | Total | 24 |

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6. Content mapping (competencies tables)

Unit 1: Gynaecology & Homoeopathic therapeutics

6.1. Introduction to Gynecology with definition of Hahnemannian classification of disease. Importance in the review of the Homoeopathic literature, Therapeutics and Repertory source books

| Sl.No | Domain of Competency | Miller's level | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|----------------------|----------------|---|--|-----------------|----------|---|------------|-----------|---------------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
1.1 | K & S | K | Introduction to Gynecology | Define Gynaecology | CI | MK | Lecture
Small group discussion | MCQ | | |
| HomUG-ObGy-I
1.2 | K & S | K | History of Gynaecology | Discuss the history of Gynaecology | CI | NK | Lecture
Small group discussion | MCQ | | |
| HomUG-ObGy-I
1.3 | H O | KH | Hahnemannian classification of disease. | Classify diseases according to Hahnemann | CI | MK | Lecture
Small group discussion | MCQ | | Organon of Medicine |
| HomUG-ObGy-I
1.4 | H O | KH | Homoeopathic literature | Discuss the Homoeopathic case taking in female complaints as per Organon of Medicine | CI | MK | Lecture/
Integrated
Small Group discussion
CBL | MCQ/ | | Organon of Medicine |

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| HomUG-ObGy-I
1.5 | H O | KH | | Discuss Hahnemann's concept of case taking in females according to different Homoeopathic authors | C1 | MK | Lecture/ Small group discussion
CBL
PBL | MCQ/ | | Organon of Medicine |
| HomUG-ObGy-I
1.6 | H O | KH | Materia Medica & Therapeutics
Materia | Discuss the list of indicated medicines for the gynaecological conditions | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | SAQ | Materia Medica |
| HomUG-ObGy-I
1.7 | H O | KH | | Discuss the characteristic indication of medicines mention in the list | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | SAQ | Materia Medica |
| HomUG-ObGy-I
1.8 | H O | KH | | Discuss the differentiation of the remedies | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | SAQ | Materia Medica,
Pathology |
| HomUG-ObGy-I
1.9 | H O | KH | | Discuss the remedy relationship wherever applicable | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | | Materia Medica,
Pathology |
| HomUG-ObGy-I
1.10 | H O | KH | Repertory | Describe the selection of repertories in different gynaecological conditions | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | | Repertory |

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|----------------------|-----|----|--|--|----|----|--|-----|--|-----------|
| HomUG-ObGy-I
1.11 | H O | KH | | Explain how to convert symptoms into rubrics from different repertories in gynaecological conditions | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | | Repertory |
| HomUG-ObGy-I
1.12 | H O | KH | | Explain the selection of rubrics from different gynaecological conditions. | C2 | MK | Lecture / small group discussion
PBL
CBL | MCQ | | Repertory |

6.2.1. Review of the applied anatomy of the female reproductive system.: Development of genital tract, malformations and their clinical significance

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

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|--------------------|-------|----|---|--|----|----|--|-----|-----|--|
| HomUG-ObGy-I-2.4 | K & S | K | Internal genitalia organs | Name the blood supply of the uterus | CI | MK | Small group discussion Charts | MCQ | | |
| Hom-UG ObGy-I-2.5 | K & S | KH | Internal genitalia organs | Draw & Label the normal anatomy of the fallopian tubes. | P2 | MK | Small group discussion Chars | MCQ | SAQ | |
| HomUG-ObGy-I-2.6 | K & S | KH | Gonads | Draw & Label the normal anatomy of the ovarian structures | P2 | MK | Small group discussion Charts | MCQ | SAQ | |
| HomUG-ObGy-I-2.7 | K & S | K | Pelvic fascia, cellular tissues & ligaments | Name the pelvic floor muscles, ligaments and fascia. | CI | MK | Small group discussion Charts | MCQ | SAQ | |
| HomUG-ObGy-I-2.8 | K & S | K | Malformation of the vagina | Discuss the vaginal abnormalities | CI | MK | Small group discussion Charts | MCQ | | |
| HomUG-ObGy-I-2.9 | K & S | K | | Describe the clinical features of vaginal abnormalities | CI | MK | Small group discussion CBL CBL | MCQ | | |
| HomUG-ObGy-I-2.10 | K & S | K | Malformation of the vagina | List the vaginal mal-developments | CI | MK | Small group discussion | MCQ | | |
| Hom-UG-ObGy-I-2.11 | K & S | K | | Discuss the aetiological factors for vaginal mal-development | CI | MK | Lecture Small group discussion Tutorials | MCQ | | |

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6. 22 7 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

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|-------------------|-------|----|-------------------------------------|--|----|----|-----------------------------------|-----|-----|--|
| HomUG-ObGy-I-2.12 | K & S | KH | Malformation of the uterus | Describe the various malformations of the uterus. | C1 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I-2.13 | K & S | K | | Discuss the clinical features of uterine anomalies | C1 | MK | Small group discussion
CBL | MCQ | SAQ | |
| HomUG-ObGy-I-2.14 | K & S | K | Malformation of the ovaries | List the anomalies of the ovaries | C2 | MK | Lecture
Small group discussion | MCQ | | |
| HomUG-ObGy-I-2.15 | K & S | K | Malformation of the fallopian tubes | List the anomalies of the fallopian tubes | C2 | MK | Lecture
Small group discussion | MCQ | | |

Dr. Nand S. Singh 6.12.27 8.12.27 10.12.27

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6.3. A review of the applied physiology of female reproductive system - Puberty, Menstruation and its disorders including, amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia, epimenorrhoea, AUB, Postmenopausal bleeding and menopause with related ailments and its scope and management in Homoeopathy and integrate wherever necessary with other disciplines.

| Sl. No. | Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|------------------|------------|--------|--------------------------|---|-----------------|----------|---|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I-3.1 | K & S | K | Endocrinology in puberty | List the hormones of Hypothalamus. | C1 | MK | Lecture
Small group
discussion | MCQ | | Physiology |
| HomUG-ObGy-I-3.2 | K & S | K | | List the functions of hormones of Hypothalamus | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Physiology |
| HomUG-ObGy-I-3.3 | K & S | K | Endocrinology in puberty | Name the hormones of Anterior Pituitary. | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Physiology |
| HomUG-ObGy-I-3.4 | K & S | K | | List the functions of Anterior Pituitary hormones | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Physiology |
| HomUG-ObGy-I-3.5 | K & S | K | | Name the hormones of Posterior Pituitary | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Physiology |

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| HomUG-ObGy-I-3.6 | K & S | K | | List the functions of Posterior Pituitary hormones | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Physiology |
| HomUG-ObGy-I-3.7 | K & S | K | Endocrinology in puberty | Name the hormones of Ovary | C1 | MK | Lecture
Small group
discussion. | MCQ | | Physiology |
| HomUG-ObGy-I-3.8 | K & S | K | Endocrinology in puberty | List the functions of ovarian hormones. | C1 | MK | Lecture
Small group
discussion | MCQ | SAQ | Physiology |
| HomUG-ObGy-I-3.9 | K & S | K | | Discuss the Importance of HPO axis during Foetal life, Puberty & at Menopause | C1 | MK | Lecture
Small group
discussion | MCQ | SAQ | Physiology |
| HomUG-ObGy-I-3.10 | K & S | K | Physiology of Menstruation | Define Menstruation | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | SAQ | Physiology |
| HomUG-ObGy-I-3.11 | K & S | K | | What are the Phases of Menstruation | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | SAQ | Physiology |
| HomUG-ObGy-I-3.12 | K & S | K | Hormonal changes during each phase of menstruation | Discuss the Hormonal Changes during each Phase of Menstruation | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | SAQ | Physiology |
| HomUG-ObGy-I-3.13 | K & S | K | Uterine changes during each phase of menstruation | Describe the Ovarian Changes during each phase of Menstruation | C1 | MK | Lecture
Small group
discussion | | SAQ | Physiology |

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| HomUG-ObGy-I-3.14 | K & S | K | | Describe the Uterine Changes occurs during each phase of Menstruation | CI | MK | Lecture
Small group discussion
Tutorials | | SAQ | Physiology |
| HomUG-ObGy-I-3.15 | K & S | K | Puberty | Define puberty | CI | MK | Lecture
Small group discussion | MCQ | | |
| HomUG-ObGy-I-3.16 | K & S | K | Precocious puberty | Describe the Pubertal changes as per Tanner's Classification | CI | MK | Lecture
Small group discussion
Tutorials | | SAQ | |
| HomUG-ObGy-I-3.17 | K & S | K | | Define Precocious puberty | CI | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I-3.18 | K & S | K | | Discuss the causes of Precocious puberty | CI | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I-3.19 | K & S | K | | Find the diagnostic features of Precocious puberty | CI | MK | Lecture
Small group discussion
CBL
CBL | MCQ | | |
| Hom-UG ObGy-I-3.20 | K & S | K | Delayed puberty | Define Delayed puberty | CI | MK | Lecture
Small group discussion | MCQ | | |

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| HomUG-ObGy-I-3.21 | K & S | K | | Discuss the causes for Delayed puberty | C1 | MK | Lecture
Small group discussion | | SAQ | |
| HomUG-ObGy-I-3.22 | K & S | K | | Discuss the characteristic features of delayed puberty | C1 | MK | Lecture
Small group discussion
Tutorials | | SAQ | |
| HomUG-ObGy-I-3.23 | K & S | K | Menorrhagia | Define puberty menorrhagia | C1 | MK | Lecture
Small group discussion | MCQ | | |
| HomUG-ObGy-I-3.24 | K & S | K | | Discuss the causes of Puberty menorrhagia | C1 | MK | Lecture
Small group discussion | | SAQ | |
| HomUG-ObGy-I-3.25 | K & S | K | | Discuss the Diagnostic features of Puberty menorrhagia | C1 | MK | Lecture
Small group discussion
CBL
PBL | MCQ | | |
| HomUG-ObGy-I-3.26 | H O | K | Materia medica Therapeutics | Discuss the Homoeopathic remedies for delayed puberty | C1 | MK | Lecture
Small group discussion
CBL
PBL | | SAQ | Materia medica |
| HomUG-ObGy-I-3.27 | H O | K | | Discuss the Homoeopathic remedies for puberty menorrhagia | C1 | MK | Lecture
Small group discussion
CBL
PBL | | SAQ | Materia medica |

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|-------------------|-------|----|-----------------------|---|----|----|--|-----|-----|---------------------|
| HomUG-ObGy-I-3.28 | H O | K | | Discuss the characteristic features of the indicated remedies | C1 | MK | Lecture
Small group
discussion
CBL
PBL | | SAQ | Material medica |
| HomUG-ObGy-I-3.29 | H O | K | Management | Explain the management for Anomalies of Gonadal Function | C1 | MK | Lecture
Small group
discussion
CBL
CBL | MCQ | | Organon of medicine |
| HomUG-ObGy-I-3.26 | K & S | K | Amenorrhoea | Define Amenorrhoea | C1 | MK | Lecture
Small group
discussion
CBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.30 | K & S | KH | | Classify Amenorrhoea | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.31 | K & S | K | | Define Primary Amenorrhoea | C1 | MK | Lecture
Small group
discussion
CBL
PBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.32 | K & S | K | Primary amenorrhoea | Describe the causes of Primary amenorrhoea | C2 | MK | Lecture
Small group
discussion
CBL
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.33 | K & S | K | Secondary amenorrhoea | Define Secondary amenorrhoea | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | SAQ | |

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|-------------------|-------|-------|------------------|---|----|----|---|-----|-----|--|
| HomUG-ObGy-I-3.34 | K & S | K | | Describe the causes of Secondary amenorrhoea | C1 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I-3.35 | K & S | K | Cryptomenorrhoea | Define Cryptomenorrhoea | C1 | MK | Lecture
Small group discussion
CBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.36 | K & S | K | | Discuss the causes of Cryptomenorrhoea | C1 | MK | Lecture
Small group discussion
CBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.37 | K & S | Shows | Examinations | Demonstrate the general physical, systemic and per vaginal examination in Primary amenorrhoea | P3 | MK | Clinical examinations
CBL
PBL | | | |
| HomUG-ObGy-I-3.38 | K & S | KH | Investigations | Explain the clinical, laboratory and radiological investigations done in Primary amenorrhoea | C2 | MK | Lecture
Small group discussion
CBL | | | |
| HomUG-ObGy-I-3.39 | K & S | KH | | Discuss clinical, laboratory and radiological investigations done in secondary amenorrhoea | C2 | MK | Lecture
Small group discussion
CBL
CBL | MCQ | | |

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3.34-3.39
6.00 - 9.00
10.00 - 12.00

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|-------------------|-------|----|--|---|----|----|--|------|-----|----------------|
| HomUG-ObGy-I-3.40 | H O | KH | Management | Discuss the general management for Primary amenorrhoea | C2 | MK | Lecture
Small group
discussion
CBL | MCQ/ | | |
| HomUG-ObGy-I-3.41 | H O | KH | Homoeopathic Materia medica & therapeutics | Discuss the Homoeopathic remedies for Primary amenorrhoea | C2 | MK | Small group
discussion
PBL
CBL | MCQ | | Materia medica |
| HomUG-ObGy-I-3.42 | H O | KH | | Discuss the Homeopathic remedies for Secondary Amenorrhoea | C2 | MK | Lecture
Small group
discussion
CBL
Tutorials | MCQ | | Materia Medica |
| HomUG-ObGy-I-3.43 | H O | K | | Discuss the characteristic features of the indicated remedies | C2 | MK | Lecture
Small group
discussion
PBL
CBL | MCQ | | Materia Medica |
| HomUG-ObGy-I-3.44 | K & S | K | Hypomenorrhoea | Define Hypomenorrhoea | C1 | MK | Lecture
Small group
discussion
CBL | MCQ | | |
| HomUG-ObGy-I-3.45 | K & S | K | | Discuss the Causes of Hypomenorrhoea | C1 | MK | Lecture
Small group
discussion
CBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.46 | K & S | K | Oligomenorrhoea | Define Oligomenorrhoea | C1 | MK | Lecture
Small group
discussion
CBL | MCQ | SAQ | |

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| HomUG-ObGy-I
3.47 | K & S | K | Polymenorrhoea | Discuss the causes of Oligomenorrhoea | C1 | MK | Lecture Small group discussion CBL | MCQ | SAQ | |
| HomUG-ObGy-I
3.48 | K & S | K | | Define Polymenorrhoea | C1 | MK | Lecture Small group discussion CBL | MCQ | | |
| HomUG-ObGy-I
3.49 | K & S | K | | Discuss the causes of Polymenorrhoea | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
3.50 | K & S | K | Metrorrhagia | Define Metrorrhagia | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | | |
| HomUG-ObGy-I
3.51 | K & S | KH | | Discuss the causes of Metrorrhagia | C1 | MK | Lecture Small group discussion Tutorials CBL | MCQ | SAQ | |
| HomUG-ObGy-I
3.52 | K & S | K | Menorrhagia | Define menorrhagia | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | | |
| HomUG-ObGy-I
3.53 | K & S | K | | Discuss the causes of menorrhagia | C1 | MK | Lecture Small group discussion Tutorials CBL | MCQ | SAQ | |
| HomUG-ObGy-I
3.54 | K & S | K | AUB | Define Abnormal Uterine Bleeding | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | | |

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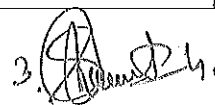
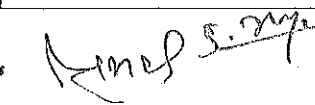
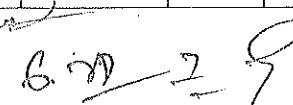
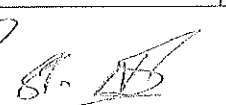
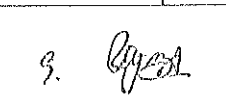

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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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|-------------------|-------|----|--|---|----|----|--|-----|-----|----------------|
| HomUG-ObGy-I-3.55 | K & S | KH | | Classify Abnormal Uterine Bleeding | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.56 | K & S | KH | | Discuss the causes of AUB | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.57 | K & S | KH | Investigations for AUB | Discuss the important investigation to be done in AUB | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.58 | K & S | KH | Management of AUB | Explain the general Management of AUB | C2 | MK | Lecture Small group discussion CBL Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.59 | K & S | K | Metropathia haemorrhagica | Define Metropathia haemorrhagica | C1 | MK | Lecture Small group discussion CBL Tutorials | MCQ | | |
| HomUG-ObGy-I-3.60 | K & S | KH | | Discuss the causes of metropathia hemorrhagica | C1 | MK | Lecture Small group discussion CBL Tutorials | | SAQ | |
| HomUG-ObGy-I-3.61 | H O | KH | Homoeopathic materia medica & therapeutics | Discuss the homoeopathic remedies for AUB | C1 | MK | Lecture Small group discussion CBL Tutorials | | SAQ | Materia Medica |

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|-------------------|-------|----|---------------|---|----|----|---|---------|-----|----------------|
| HomUG-ObGy-I-3.62 | H O | KH | | Discuss the characteristic features of the indicated remedies | C1 | MK | Lecture Small group discussion
Tutorials
CBL
PBL | | SAQ | Materia Medica |
| HomUG-ObGy-I-3.63 | K & S | K | Dysmenorrhoea | Define dysmenorrhoea | C1 | MK | Lecture Small group discussion
Tutorials
CBL
PBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.64 | K & S | KH | | Classify dysmenorrhoea | C1 | MK | Lecture Small group discussion
Tutorials | SAQ/MCQ | SAQ | |
| HomUG-ObGy-I-3.65 | K & S | KH | | Discuss the causes of Primary Dysmenorrhoea | C1 | MK | Lecture Small group discussion
Tutorials | SAQ/MCQ | SAQ | |
| HomUG-ObGy-I-3.66 | K & S | KH | | Discuss the causes of Secondary dysmenorrhoea | C1 | | Lecture Small group discussion
CBL
Tutorials | | SAQ | |
| HomUG-ObGy-I-3.67 | K & S | KH | Dysmenorrhoea | Discuss the clinical features Primary Dysmenorrhoea | C1 | MK | Lecture Small group discussion
Tutorials
CBL
PBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.68 | K & S | KH | | Discuss the clinical features Secondary Dysmenorrhoea | C1 | MK | Lecture Small group discussion
Tutorials
CBL
PBL | MCQ | SAQ | |

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

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| HomUG-ObGy-I-3.75 | H O | KH | | Discuss the homoeopathic remedies in Membranous dysmenorrhoea | C2 | MK | Small group discussion
Tutorials
CBL
CBL | MCQ | SAQ | Materia Medica |
| HomUG-ObGy-I-3.76 | H O | KH | | Discuss the characteristic features of indicated remedies in dysmenorrhoea | C2 | MK | Lecture
Small group discussion
Tutorials
CBL
PBL | MCQ | SAQ | Materia Medica |
| HomUG-ObGy-I-3.77 | K & S | K | PMS | Define Premenstrual Syndrome | C1 | MK | Lecture Small group discussion
Tutorials
CBL
PBL | MCQ | SAQ | |
| HomUG-ObGy-I-3.78 | K & S | KH | | Discuss the causes for premenstrual syndrome | C1 | MK | Lecture Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.79 | K & S | K | | Discuss the clinical features of premenstrual syndrome | C1 | MK | Lecture Small group discussion
CBL
PBL
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.80 | K & S | KH | | Discuss the general management of premenstrual Syndrome | C1 | MK | Lecture Small group discussion
Tutorials
CBL | MCQ | SAQ | |

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| HomUG-ObGy-I-3.81 | H O | KH | Homoeopathic materia medica & therapeutics | Explain the Homoeopathic remedies in Premenstrual complaints | CI | MK | Small group discussion
Tutorials
CBL
PBL | MCQ | SAQ | Materia Medica |
| HomUG-ObGy-I-3.82 | H O | KH | | Discuss the characteristic features of indicated remedies in Premenstrual complaints | CI | MK | Lecture Small group discussion
CBL
Tutorials | MCQ | SAQ | Materia Medica |
| HomUG-ObGy-I-3.83 | K & S | K | Menopause | Define Menopause | CI | MK | Lecture Small group discussion
Tutorials | MCQ | | |
| HomUG-ObGy-I-3.84 | K & S | K | | Discuss the Pathophysiology of Menopause | CI | MK | Lecture Small group discussion
CBL
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I-3.85 | K & S | K | | Discuss the Anatomical Changes taking place during menopause | CI | MK | Lecture Small 0 | MCQ | SAQ | |
| HomUG-ObGy-I-3.86 | K & S | K | | Discuss the clinical features of menopause | CI | MK | Lecture Small group discussion
PBL
CBL | SAQ/MCQ | | |
| HomUG-ObGy-I-3.87 | K & S | K | | Define Menopausal syndrome | CI | MK | Lecture small group discussion
PBL
CBL | MCQ | SAQ | |

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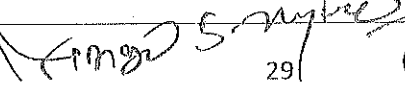
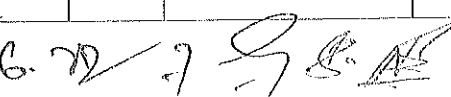
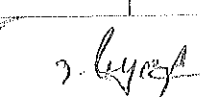

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|-------------------|-------|----|----------------------|--|----|----|--|-----|-----|----|
| HomUG-ObGy-I-3.28 | K & S | K | | Discuss the anatomical and metabolic changes taking place during menopause | C1 | MK | Lecture small group discussion
PBL
CBL | MCQ | SAQ | C1 |
| HomUG-ObGy-I-3.29 | K & S | K | Perimenopause | Define Perimenopause | C1 | MK | Lecture small group discussion
PBL
CBL | MCQ | SAQ | C1 |
| HomUG-ObGy-I-3.90 | K & S | K | Artificial menopause | Define Artificial menopause | C1 | MK | Lecture small group discussion
PBL
CBL | MCQ | SAQ | C1 |
| HomUG-ObGy-I-3.91 | K & S | K | Premature menopause | Define Premature Menopause | C1 | MK | Lecture/ Small group discussion | MCQ | | |
| HomUG-ObGy-I-3.92 | K & S | K | | Discuss aetiology of Premature Menopause | C1 | MK | Lecture/ Small group discussion | | SAQ | |
| HomUG-ObGy-I-3.93 | K & S | K | Delayed menopause | Define delayed menopause | C1 | MK | Lecture Small group discussion | MCQ | | |
| HomUG-ObGy-I-3.94 | K & S | K | | Discuss causes of delayed menopause | C1 | MK | Lecture Small group discussion | | SAQ | |
| HomUG-ObGy-I-3.95 | K & S | KH | Management | Discuss the general management of Menopause | C1 | MK | Lecture small group discussion
PBL
CBL | | SAQ | |

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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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|--------------------|-------|----|--|---|----|----|--|-----|-----|
| HomUG-ObGy-I-3.96 | K & S | KH | Homoeopathic Materia medica & therapeutics | List the Homoeopathic remedies for Menopause. | C2 | MK | Ssmall group discussion
PBL
CBL | MCQ | SAQ |
| HomUG-ObGy-I-3.97 | K & S | KH | | Discuss the characteristic features of the indicated remedies. | C2 | MK | Lecture small group discussion
PBL
CBL | MCQ | SAQ |
| HomUG-ObGy-I-3.98 | K & S | K | Postmenopausal bleeding Investigations | Define Postmenopausal bleeding | C1 | MK | Lecture/ small group discussion
PBL
CBL | MCQ | SAQ |
| HomUG-ObGy-I-3.99 | K & S | KH | | Discuss the causes for Postmenopausal bleeding | C1 | MK | Lecture small group discussion
PBL
CBL | MCQ | SAQ |
| HomUG-ObGy-I-3.100 | K & S | KH | | Discuss the important investigations required for postmenopausal bleeding | C2 | MK | Lecture/ small group discussion
PBL
CBL | MCQ | SAQ |
| HomUG-ObGy-I-3.101 | K & S | KH | Investigations | Discuss what are the investigation required in case of post-menopausal bleeding | C2 | MK | Lecture/ small group discussion
PBL
CBL | MCQ | SAQ |
| HomUG-ObGy-I-3.102 | K & S | KH | Differential diagnosis | Discuss the differential for postmenopausal bleeding | C1 | MK | Lecture / small group discussion
PBL
CBL | MCQ | SAQ |

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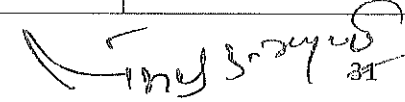
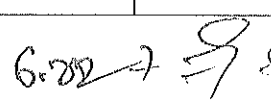
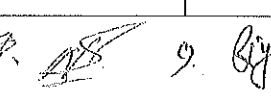
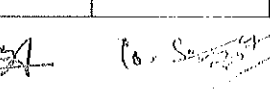
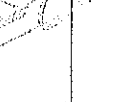
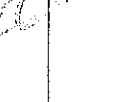
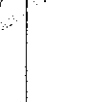
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| HomUG-
ObGy-I-
3.103 | K &
S | KH | Materia Medica &
therapeutics | Discuss the
homoeopathic remedies
for postmenopausal
bleeding | C2 | MK | Lecture / small
group discussion
PBL
CBL | MCQ | SAQ | |
| HomUG
-ObGy-I-
3.104 | K &
S | KH | | Discuss the
characteristic features of
the indicated remedies. | C2 | MK | Lecture/ small
group discussion
PBL
CBL | MCQ | SAQ | |

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6.4 Gynaecological case taking, Physical examination, investigation and approach to clinical diagnosis and differential diagnosis

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|-------------------|--------|-------------|--|-----------------|----------|---|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
4.1 | H O | K | Case taking | Discuss the format of history taking in gynaecological conditions. | C 2 | MK | Small group discussion
CBL | | | |
| HomUG-ObGy-I
4.2 | H O | Shows | | Explain the importance of communication skills while case taking. | P2 | MK | Small group discussion
CBL | | | |
| HomUG-ObGy-I
4.3 | H O | KH | | Explain the importance of clinical skills in case taking | C 1 | MK | Small group discussion
CBL
Clinical examination | VIVA | | |
| HomUG-ObGy-I
4.4 | H O | KH | | Discuss the Homoeopathic case | C 2 | MK | Small group discussion | VIVA | | |

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| | | | | taking in female complaints as per Organon of Medicine | | | Case based learning CBL | | | |
| HomUG-ObGy-I 4.5 | P C | Does | Physical examination | Demonstrate the general physical examination | P 2 | MK | Small group discussion
Clinical demonstration | MCQ | | |
| HomUG-ObGy-I 4.6 | P C | Does | Abdominal examination | Describe how to perform abdominal examination. | P 2 | MK | Small group discussion
Tutorials
CBL
Bedside | MCQ | | |
| HomUG-ObGy-I 4.7 | P C | Does | Vaginal examination | Describe how to perform per vaginal speculum examination. | P 2 | MK | Small group discussion
Tutorials
CBL
Bedside | MCQ | | |
| HomUG-ObGy-I 4.8 | K & S | KH | Investigations | Discuss the investigations required in dysmenorrhea | C 2 | MK | Small group discussion
Tutorials
CBL
PBL | MCQ | | |
| HomUG-ObGy-I 4.9 | K & S | KH | | Discuss the investigation required in Amenorrhoea | C 2 | MK | Small group discussion
Tutorials
CBL
PBL | MCQ | | |
| HomUG-ObGy-I | K & S | KH | | Discuss the investigations | C 2 | MK | Small group discussion | MCQ | | |

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|-----------------------|-------|----|------------------------|---|-----|----|--------------------------------------|-----|--|--|
| 4.10 | | | | required in AUB case. | | | Tutorials
CBL
PBL | | | |
| HomUG-ObGy-I
4.11 | K & S | KH | | Discuss the investigation required in malformations of the FGT | C 2 | MK | Small group discussion
CBL
PBL | MCQ | | |
| Hom-UG-ObGy-I
4.12 | K & S | KH | Clinical diagnosis | Derive the clinical diagnosis from the signs & symptoms | C 2 | MK | Small group discussion
CBL
PBL | MCQ | | |
| HomUG-ObGy-I
4.13 | K & S | KH | Pathological diagnosis | Derive the pathological diagnosis with a help of laboratory and radiological findings. | C 2 | MK | Small group discussion
CBL
PBL | MCQ | | |
| HomUG-ObGy-I
4.14 | K & S | KH | Differential diagnosis | Discuss the differential diagnosis with relation to patient history & Signs & Symptoms, | C 2 | MK | Small group discussion
CBL
PBL | MCQ | | |

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6.5 Epidemiology - Predisposition including fundamental miasm; personality type known to develop particular disease

| Sl No.: | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|-------------------|--------|----------------|--|-----------------|----------|--|------------|-----------|---------------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
5.1 | H O | K | Predisposition | Define predisposition | CI | MK | Lecture
Small group discussion
Tutorials | MCQ | | Organon of medicine |
| HomUG-ObGy-I
5.2 | H O | K | | Discuss the relevance of predisposing factors for the disease. | CI | MK | Lecture
Small group discussion
Tutorials | MCQ | | Organon of medicine |
| HomUG-ObGy-I
5.3 | H O | K | Miasm | Define miasm | CI | MK | Lecture
Small group discussion
Tutorials | MCQ | | Organon of medicine |
| HomUG-ObGy-I
5.4 | H O | K | | Discuss the types of miasms | CI | MK | Lecture
Small group discussion
Tutorials | MCQ | | Organon of medicine |
| HomUG-ObGy-I
5.5 | H O | K | | Discuss the relevance of miasm for the disease conditions | CI | MK | Lecture
Small group discussion | MCQ | | Organon of medicine |

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| | | | | | | | Tutorials | | | |
|---------------------|-----|---|----------------------|---|----|----|---|-----|--|------------------------|
| HomUG-ObGy-I
5.6 | H O | K | Fundamental
miasm | Define fundamental miasm | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Organon of
medicine |
| HomUG-ObGy-I
5.7 | H O | K | | Discuss the relevance of
fundamental miasm for the
disease | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Organon of
medicine |
| HomUG-ObGy-I
5.8 | H O | K | Personality
type | Discuss the importance of
personality of the
patient for developing
Disease condition. | C1 | MK | Lecture
Small group
discussion
Tutorials | MCQ | | Organon of
medicine |

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6.6 Uterine displacements- Prolapse, retroversion and inversion with its exciting and maintaining causes, disease manifestations, prognosis, management and scope in homoeopathic perspective.

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|-------------------|--------|------------------|---|-----------------|----------|--|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
6.1 | K & S | K | Genital Prolapse | Define Genital prolapse | C1 | MK | Lecture
Small group discussion
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
6.2 | K & S | K | | Discuss the aetiology of Genital prolapse | C1 | MK | Lecture
Small group discussion
Tutorials
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
6.3 | K & S | K | | Classify genital prolapses | C1 | MK | Lecture
Small group discussion
Tutorials
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
6.4 | K & S | K | Rectocele | Define Rectocele | C1 | MK | Lecture
Small group discussion
Tutorials
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
6.5 | K & S | K | Cystocele | Define cystocele | C1 | MK | Lecture
Small group discussion | MCQ | SAQ | |

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|----------------------|-------|---|------------------|--|----|----|--|-----|-----|--|
| HomUG-ObGy-I
6.6 | K & S | K | | Discuss the degrees of cystocele | C1 | MK | Lecture
Small group discussion
CBL | MCQ | SAQ | |
| HomUG-ObGy-I
6.7 | K & S | K | Uterine prolapse | Discuss the degrees of uterine prolapse | C1 | MK | Lecture
Small group discussion
CBL
PBL | MCQ | SAQ | |
| HomUG-ObGy-I
6.8 | K & S | K | Genital prolapse | Describe the aetiology of genital prolapse | C1 | MK | Lecture
Small group discussion
Tutorials
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
6.9 | K & S | K | | Discuss the Clinical Features of Genital prolapse | C2 | MK | Lecture
Small g
Clinical examination
CBL
CBL | MCQ | SAQ | |
| HomUG-ObGy-I
6.10 | K & S | K | | Discuss the Differential Diagnosis of Genital prolapse | C2 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
6.11 | K & S | K | | Discuss the Prophylaxis of Genital prolapse | C2 | MK | Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.12 | K & S | K | | Discuss the general management for Genital prolapse | C2 | DK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I | K & S | K | | Define Procidentia | C2 | DK | Lecture | MCQ | SAQ | |

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| 6.13 | | | | | | | Small group discussion
Tutorials | | | |
| HomUG-ObGy-I
6.14 | K & S | K | | Discuss the complications of genital prolapse | C2 | DK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.15 | K & S | K | Homoeopathic Materia medica & therapeutics | Discuss the Homoeopathic remedies for genital prolapse | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.16 | K & S | K | Discuss the | Discuss the Characteristic features of indicated remedies. | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.17 | K & S | K | Pessary treatment | Define Pessary treatment | C2 | MK | Lecture
Small group discussion
Tutorials
Charts | MCQ | | |
| HomUG-ObGy-I
6.18 | K & S | K | | Discuss the indications & contraindications of pessary treatment | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ/ | SAQ | |
| HomUG-ObGy-I
6.19 | K & S | K | Surgical management | List the surgical management for genital prolapse | C2 | DK | Lecture
Small group discussion | MCQ | | |
| HomUG-ObGy-I
6.20 | K & S | K | | Define retroversion of uterus | C1 | MK | Lecture
Small group discussion | MCQ | | |

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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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| HomUG-ObGy-I
6.21 | K & S | K | Retroversion | Discuss the causes of retroverted uterus | C2 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
6.22 | K & S | K | | List the types of retroverted uterus | C1 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
6.23 | K & S | K | | Discuss the clinical features of retroverted uterus | C1 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
6.24 | K & S | K | Retroversion degrees | Discuss the degrees of retroversion of uterus | C1 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
6.25 | K & S | K | Differential diagnosis | Discuss the Differential Diagnosis of retroverted uterus | C2 | MK | Lecture
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
6.26 | K & S | K | Homoeopathic material medica & therapeutics | Discuss the Homoeopathic remedies for retroverted uterus | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.27 | K & S | K | | Discuss the characteristic features of indicated remedies. | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.28 | K & S | K | Inversion | Define inversion of uterus | C1 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.29 | K & S | K | | Recall the aetiology of inverted uterus | C1 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |

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| HomUG-ObGy-I
6.30 | K & S | K | Scope & Limitation of Homoeopathy | Classify the types of inversion of uterus | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.31 | K & S | K | | Discuss the Clinical Features of inverted uterus | C1 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.32 | K & S | KH | | Discuss the scope & limitation of Homoeopathy in inversion of uterus | C2 | MK | Lecture
Small group discussion
Tutorials | MCQ | SAQ | |
| HomUG-ObGy-I
6.33 | K & S | KH | Homoeopathic materia medica & therapeutics | List the Homoeopathic remedies indicated in inversion of uterus | C2 | MK | Small group discussion
CBL
PBL | MCQ | SAQ | |

Dr. N. S. Kumar 6.30 6.31 6.32 6.33 9. 10. 11. 12. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.

Dr. N. S. Kumar


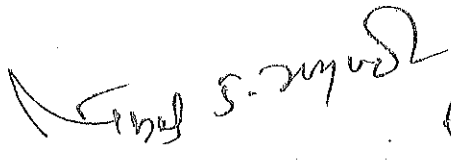
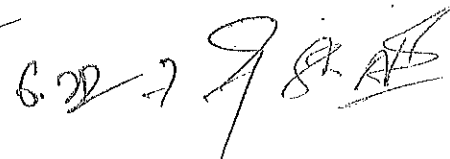
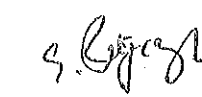
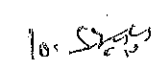
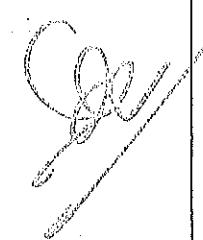
6.7 Sex & Intersexuality - Knowledge and scope to eradicate genetic Dyscrasias, predisposition, miasm and personality types known to develop particular diseases through Homocopathic outlook

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|----------------------|---|-----------------|----------|--|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
7.1 | K & S | K | Sex & Intersexuality | Define Klinifelters syndrome | C1 | DK | Lecture
Small group discussion
Tutorials
Charts | MCQ | | |
| HomUG -ObGy-I
7.2 | K & S | K | | Define Inter-sex | C2 | DK | Lecture
Small group discussion
Tutorials
Charts | MCQ | | |
| HomUG-ObGy-I
7.3 | K & S | K | Turner's syndrome | Explain Turner's syndrome | C1 | DK | Lecture
Small group discussion
Tutorials
Charts | | SAQ | |
| HomUG-ObGy-I
7.4 | K & S | K | Hermaphrodites | Discuss True Hermaphrodites & mention types | C2 | DK | Lecture
Small group discussion
Tutorials
Charts | | SAQ | |
| HomUG-ObGy-I | K & S | K | Male intersex | Discuss the male Inter-sex | C2 | DK | Lecture | VIVA | | |

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| 7.5 | | | | | | | Small group discussion
Tutorials
Charts | | | |
| HomUG-ObGy-I
7.6 | H O | K | Personality Type | Discuss the relevance of Predisposition with respect to Intersexuality | C2 | MK | Small group discussion
Tutorials
Charts | VIVA | | Organon of medicine |
| HomUG-ObGy-I
7.7 | H O | K | H O | Discuss the relevance of miasm with respect to intersexuality. | C2 | MK | Lecture
Small group discussion
Tutorials | VIVA | | Organon of medicine |
| HomUG-ObGy-I
7.8 | H O | K | H O | Discuss the relevance of predisposition with respect to intersexuality | C2 | MK | Lecture
Small group discussion
Tutorials | VIVA | | Organon of medicine |
| HomUG-ObGy-I
7.9 | H O | K | H O | Discuss the importance of personality of the patient for developing Disease condition | C2 | MK | Lecture
Small group discussion
Tutorials | VIVA | | Organon of medicine |
| HomUG-ObGy-I
7.10 | H O | K | Homoeopathic materia medica & therapeutics | Discuss the homoeopathic matria medica therapeutics for Intersexuality | C2 | DK | Lecture
Small group discussion
Tutorials | MCQ | | Materia Medica |

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6.8 General & Homeopathic Management, Repertorisation, Therapeutics, Posology, Formulation of prognostic criteria and prognosis of related topics in Gynaecology

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|-------------------|--------|------------|--|-----------------|----------|---|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
8.1 | H O | KH | Management | Explain the general management in Dysmenorrhoea | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | Viva | SAQ | |
| HomUG-ObGy-I
8.2 | H O | KH | | Explain the general management in Amenorrhoea | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | Viva | SAQ | |
| HomUG-ObGy-I
8.3 | H O | KH | | Explain the general management in Genital prolapse | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | VIVA | SAQ | |
| HomUG-ObGy-I
8.4 | H O | KH | | Explain the general management in retroversion of the uterus | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | VIVA | SAQ | |

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| HomUG-ObGy-I
8.5 | H O | K | Repertory | Discuss the repertory medium used in different gynaecological conditions | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | VIVA | | |
| HomUG-ObGy-I
8.6 | H O | KH | | Discuss the selection of repertory based on symptoms | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | VIVA | | |
| HomUG-ObGy-I
8.7 | H O | K | Homoeopathic Materia medica & therapeutics and posology | Co-relate the homoeopathic remedies, potency selection and repetition of dose in relation to gynaecological conditions | C 2 | MK | Lecture
Small group discussion
Tutorials
CBL | VIVA | | |

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Unit 2: Obstetrics, Infant Care & Homoeopathic Therapeutics

6.9 Introduction to Obstetrics and Newborn care related with Homoeopathic Philosophy, Therapeutics and Repertorisation

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|-------------------|--------|------------------------------|--|-----------------|----------|--|------------|-----------|---------------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-1
9.1 | K & S | K | Introduction to Obstetrics | Define Obstetrics | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-1
9.2 | K & S | K | Introduction to newborn care | Define the term New born Infant | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-1
9.3 | K & S | K | Introduction to newborn care | Define Still birth | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-1
9.4 | H O | K | Homoeopathic case taking | Explain the Homoeopathic case taking in female complaints as per Organon of Medicine. | P1 | MK | Lecture
Tutorials
Small group discussion | VIVA | | Organon of medicine |
| HomUG-ObGy-1
9.5 | H O | K | | Describe the Hahnemann's concept of action of homoeopathic medicines in pregnant women & infants. Foot note aphorism 284 | C2 | MK | Lecture
Small group discussion
Tutorials | VIVA | | Organon of medicine |

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| HomUG-ObGy-I
9.6 | H O | KH | Homoeopathic Materia Medica & Therapeutic source books | Discuss the Homoeopathic Materia Medica with Obstetrics and new born care from source books | C2 | MK | Lecture
Small group discussion
Tutorials | VIVA | | Organon of medicine |
| HomUG-ObGy-I
9.7 | H O | K | Repertory | Discuss the repertory medium used in different obstetrical and new born care. | C2 | MK | Lecture
Small group discussion
Tutorials | VIVA | | Repertory |
| HomUG-ObGy-I
9.8 | H O | K | Repertory | Discuss the selection of repertory based on symptoms in obstetrics. | C2 | MK | Lecture
Small group discussion
Tutorials
CBL | MCQ | | Repertory |
| HomUG-ObGy-I
9.9 | H O | K | Repertory | Discuss the selection of repertory based on symptoms in new born care. | C2 | MK | Lecture
Small group discussion
Tutorials
CBL | MCQ | | Repertory |

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6.10 Fundamentals of reproduction

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Link with |
|----------------------|-------------------|--------|---------------|---------------------------------------|-----------------|----------|--|------------|-----------|---------------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
10.1 | K & S | K | Gametogenesis | Define oogenesis | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.2 | K & S | KH | | Discuss the stages of oogenesis | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
10.3 | K & S | KH | | Define Spermatogenesis | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.4 | K & S | KH | | Discuss the stages of spermatogenesis | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
10.5 | K & S | KH | Ovulation | Define ovulation | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.6 | K & S | K | | Describe the mechanism of ovulation | C1 | MK | Lecture
Tutorials | | SAQ | Physiology, Anatomy |

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| | | | | | | | Small group discussion | | | |
| HomUG-ObGy-I
10.7 | K & S | K | | Describe the hormonal regulation of ovulation | CI | MK | Lecture
Tutorials
Small group discussion | | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
10.8 | K & S | K | Fertilization | Define Fertilization | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.9 | K & S | K | | Describe Morula | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.10 | K & S | K | | Describe Blastocyst | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.11 | K & S | K | Implantation | Define Implantation | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.12 | K & S | K | | Discuss the Stages of Implantation | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.13 | K & S | K | | Discuss the functions of Trophoblast | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I | K & S | K | Decidua | Define Decidua | CI | MK | Lecture
Tutorials | MCQ | | Physiology, Anatomy |

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| 10.14 | | | | | | | Small group discussion | | | |
| HomUG-ObGy-I
10.15 | K & S | K | | Define Decidual Reaction | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
10.16 | K & S | K | | Describe the layers of Decidua | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
10.17 | K & S | K | | Describe the Functions of Decidua | CI | MK | Lecture
Tutorials
Small group discussion | | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
10.18 | K & S | K | Chorion & Chorionic Villi | Define Chorion | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| Hom-UG ObGy-I
2.28 | K & S | K | | Describe the Chorionic Villi | CI | MK | Lecture
Tutorials
Small group discussion | | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
10.19 | K & S | K | Inner Cell Mass | Describe the development of Inner Cell Mass | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |

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6.10.1 Development of Intra Uterine Pregnancy- Placenta and foetus.

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|----------|---|-----------------|----------|--|------------|-----------|---------------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
11.1 | K & S | K | Placenta | Define Placenta | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.2 | K & S | K | | Discuss the development of Placenta | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.3 | K & S | K | | Describe the Placenta at Term | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.4 | K & S | K | | Describe the Structure of Placenta | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.5 | K & S | K | | Describe the Placental Circulation | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.6 | K & S | K | | Discuss the changes with Placental Ageing | C1 | DK | Lecture
Tutorials | MCQ | | Physiology, Anatomy |

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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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|-----------------------|-------|---|---------------------------------|--|----|----|--|-----|-----|---------------------|
| | | | | | | | Small group discussion | | | |
| HomUG-ObGy-I
11.7 | K & S | K | | List the Functions of Placenta | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.8 | K & S | K | | List the Hormones of Placenta | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.9 | K & S | K | | List Functions of the hormones of Placenta | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.10 | K & S | K | Foetal Membranes | Describe the Structure of Chorion | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.11 | K & S | K | | Describe Structure of Amnion | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.12 | K & S | K | | List the Functions of Foetal Membranes | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I
11.13 | K & S | K | Amniotic Cavity, Amniotic Fluid | Discuss the development of Amniotic Cavity | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | Physiology, Anatomy |
| HomUG-ObGy-I | K & S | K | | Discuss the Circulation of Amniotic Fluid | C1 | DK | Lecture
Tutorials | MCQ | | Physiology, Anatomy |

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|-----------------------|-------|---|----------------|--|----|----|--|-----|-----|---------------------|
| 11.14 | | | | | | | Small group discussion | | | |
| HomUG-ObGy-I
11.15 | K & S | K | | Discuss the Physical Features of Amniotic Fluid | CI | DK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.16 | K & S | K | | Discuss the Composition of Amniotic Fluid | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.17 | K & S | K | | Discuss the Functions of Amniotic Fluid | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | Physiology, Anatomy |
| HomUG-ObGy-I
11.18 | K & S | K | Umbilical Cord | Discuss the development of Umbilical Cord | CI | DK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
11.19 | K & S | K | | Discuss the Structure of Umbilical Cord | CI | MK | Lecture
Tutorials
Small group discussion
Charts | MCQ | | |
| HomUG-ObGy-I
11.20 | K & S | K | | Discuss the Characteristics of Umbilical Cord | CI | DK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
11.21 | K & S | K | The Foetus | List the periods of Prenatal Development of Foetus | CI | DK | Lecture
Tutorials
Small group discussion | MCQ | | |

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S3

Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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|-----------------------|-------|---|-----------------|--|----|----|--|-------------|-----|--|
| HomUG-ObGy-I
11.22 | K & S | K | | Discuss the Criteria for assessment of Growth of Foetus | C1 | NK | Lecture
Tutorials
Small group discussion
Charts | MCQ | | |
| HomUG-ObGy-I
11.23 | K & S | K | | Discuss the Systemic & Physiological changes occurs during intra uterine life. | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
11.24 | K & S | K | | Discuss the Foetal Circulation | C1 | MK | Lecture
Tutorials
Small group discussion
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
11.25 | K & S | K | | Discuss the changes in Foetal Circulation at birth. | C1 | MK | Lecture
Tutorials
Small group discussion
Charts | MCQ | SAQ | |
| HomUG-ObGy-I
11.26 | K & S | K | Foetus in Utero | Define Lie | C1 | MK | Lecture
Tutorials
Small group discussion
Clinical | MCQ
VIVA | | |
| HomUG-ObGy-I
11.27 | K & S | K | | Define Presentation | C1 | MK | Lecture
Tutorials
Small group discussion
Manikin | MCQ
VIVA | | |
| HomUG-ObGy-I
11.28 | K & S | K | | Define Presenting part | C1 | MK | Lecture
Tutorials | MCQ
VIVA | | |

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| | | | | | | | Small group discussion
Manikin | | | |
| HomUG-ObGy-I
1139 | K & S | K | | Define Attitude | C I
P 2 | MK | Lecture
Tutorials
Small group discussion
Manikin | MCQ
VIVA | | |
| HomUG-ObGy-I
1130 | K & S | K | | Define Denominator | C I
P 2 | MK | Lecture
Tutorials
Small group discussion
Manikin | MCQ
VIVA | | |
| HomUG-ObGy-I
1131 | K & S | K | | Define Position | C I
P 2 | MK | Lecture
Tutorials
Small group discussion
Manikin | MCQ
VIVA | | |
| HomUG-ObGy-I
1132 | K & S | K | Foetal Skull and Maternal Pelvis | Demonstrate the Areas of Foetal Skull | C I
P 2 | MK | Lecture
Tutorials
Small group discussion
Charts | MCQ
VIVA | | |
| HomUG-ObGy-I
1133 | K & S | K | | Demonstrate the Sutures of Foetal Skull | C I
P 2 | MK | Lecture
Tutorials
Small group discussion
Demonstration | MCQ
VIVA | | |
| HomUG-ObGy-I
1134 | K & S | K | | Demonstrate the Fontanelles of Foetal Skull | C I
P 2 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |

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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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|-----------------------|-------|---|--|--|----------|---------------|---|-------------|-----|
| | | | | | | Demonstration | | | |
| HomUG-ObGy-I
11.35 | K & S | K | | Demonstrate the Diameters of Foetal Skull | C1
P2 | MK | Lecture
Tutorials
Small group discussion
Demonstration | MCQ | SAQ |
| HomUG-ObGy-I
11.36 | K & S | K | | Define Moulding | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ
VIVA | |
| HomUG-ObGy-I
11.37 | K & S | K | | Describe Mechanism of Moulding | C1 | MK | Lecture
Tutorials
Small group discussion
Charts | MCQ
VIVA | |
| HomUG-ObGy-I
11.38 | K & S | K | | Discuss the Importance of Moulding | C1 | MK | Lecture
Tutorials
Small group discussion
Dummy | VIVA | |
| HomUG-ObGy-I
11.30 | K & S | K | | Define Succedaneum Caput | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ
VIVA | SAQ |
| HomUG-ObGy-I
11.39 | K & S | K | | Describe Mechanism of formation of Caput Succedaneum | C1 | MK | Lecture
Tutorials
Small group discussion
Dummy | MCQ
VIVA | SAQ |
| HomUG-ObGy-I
11.40 | K & S | K | | Discuss Importance of Caput Succedaneum | C1 | MK | Lecture
Tutorials | MCQ
VIVA | SAQ |

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| | | | | | | Small group discussion
Dummy | | | |
| HomUG-ObGy-I
11.41 | K & S | K | | Define False Pelvis | C 1
P 2 | MK | Lecture
Tutorials
Small group discussion
Charts | MCQ
VIVA | |
| HomUG-ObGy-I
11.42 | K & S | K | | Define True Pelvis | C1
P 2 | MK | Lecture
Tutorials
Small group discussion
Pelvis | MCQ
VIVA | |
| HomUG-ObGy-I
11.43 | K & S | K | | Describe the Inlet of the Pelvis | C 1
P 2 | MK | Lecture
Tutorials
Small group discussion
Pelvis | MCQ
VIVA | |
| HomUG-ObGy-I
11.44 | K & S | K | | Demonstrate the diameters of the Pelvis | C1
P2 | MK | Lecture
Tutorials
Small group discussion
Pelvis | MCQ | |
| HomUG-ObGy-I
11.45 | K & S | S | | Demonstrate Inlet & outlet of the Pelvis | C1
P2 | MK | Lecture
Tutorials
Small group discussion
Pelvis | MCQ | |
| HomUG-ObGy-I
11.46 | K & S | S | | Demonstrate Mid pelvis | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | |

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| HomUG-ObGy-I
11.47 | K & S | S | | Demonstrate the anterior and transverse diameters of the pelvic inlet | C 1
P 2 | MK | Pelvis
Lecture
Tutorials
Small group discussion
Manikin | MCQ | SAQ | |
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6.11 Diagnosis of pregnancy, Investigations & examinations, applied anatomy & physiology, Normal pregnancy - Physiological Changes

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|------------------------|--|-----------------|----------|---|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
12.1 | K & S | K | Diagnosis of Pregnancy | Define Gestational age of Foetus | C1 | DK | Lecture
Tutorials
Small group discussion
Manikin | MCQ | | |
| HomUG-ObGy-I
12.2 | K & S | K | | Define Ovulatory age of Foetus | C1 | MK | Lecture
Tutorials
Small group discussion
Manikin | MCQ | | |
| HomUG-ObGy-I
12.3 | K & S | K | | Discuss the subjective symptoms in 1 st trimester of pregnancy. | C1 | MK | Lecture
Tutorials
Small group discussion
Manikin | MCQ | | |

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57 6.22 8.16 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

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| HomUG-
ObGy-I
12.4 | K &
S | K | | Discuss the objective signs
in 1 st trimester pregnancy. | C1 | MK | Lecture
Tutorials
Small group
discussion
Manikin | MCQ | SAQ | |
| HomUG-
ObGy-I
12.5 | K &
S | K | | List the Immunological tests
for diagnosis of Pregnancy
in 1 st Trimester | C1 | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-
ObGy-I
12.6 | K &
S | K | | Discuss the subjective
symptoms of 2 nd trimester of
pregnancy. | C1 | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-
ObGy-I
12.7 | K &
S | K | | Discuss the objective signs
of 2 nd trimester of pregnancy | C1 | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-
ObGy-I
12.8 | K &
S | K | | List the investigations of 2 nd
trimester of pregnancy | C 2 | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-
ObGy-I
12.9 | K &
S | K | | Discuss the subjective
symptoms of 3 rd trimester
of pregnancy | C1 | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-
ObGy-I | K &
S | K | | Discuss the objective signs
of 3 rd trimester of pregnancy | C1 | MK | Lecture
Tutorials | MCQ | SAQ | |


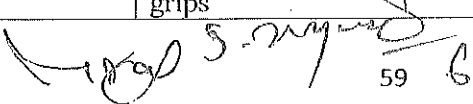
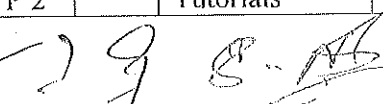
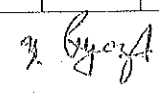
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Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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| 12.10 | | | | | | | Small group discussion | | | |
| HomUG-ObGy-I
12.11 | K & S | K | | List the investigations of 3 rd trimester of pregnancy | C2 | MK | Lecture
Tutorials
Small group discussion\ | MCQ | SAQ | |
| HomUG-ObGy-I
12.12 | K & S | K | | Discuss the Differential Diagnosis of Pregnancy | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.13 | K & S | K | | List the signs of previous childbirth | C1 | DK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
12.14 | K & S | K | | Describe the methods of calculation of EDD | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.15 | K & S | S | | Calculate EDD of Pregnant Woman using Nagele's formula | P1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.16 | P C | S | Methods of Obstetrical Examination | Demonstrate the Abdominal Examination | P-2 | MK | Tutorials
Small group discussion
Mannikin
Bedside | MCQ | SAQ | |
| HomUG-ObGy-I | P C | K | | List the types of Obstetrical grips | C 1
P 2 | MK | Lecture
Tutorials | MCQ | SAQ | |

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|-----------------------|-------|----|--|---|------------|----|---|-----|-----|--|
| 12.17 | | | | | | | Small group discussion | | | |
| HomUG-ObGy-I
12.18 | P C | S | | Demonstrate the Obstetrical grips | C I
P I | MK | Lecture
Tutorials
Small group discussion
Mannikin
Bedside | MCQ | | |
| HomUG-ObGy-I
12.19 | P C | PI | | Demonstrate the pelvic grips | C I
P 2 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
12.20 | K & S | K | | Explain Braxton-Hicks contraction(3) | C I | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.21 | K & S | K | Physiological changes during pregnancy | Describe the physiological changes occurs in the genital organs during pregnancy. | C I | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.22 | K & S | K | | Describe the physiological changes occurring in Breast during pregnancy | C I | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.23 | K & S | K | Cutaneous changes | Discuss the cutaneous changes occurs during pregnancy | C I | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-I
12.24 | K & S | K | Weight gain | Discuss the physiological weight gain during pregnancy | C I | MK | Lecture
Tutorials | MCQ | SAQ | |

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| | | | | | | | Small group discussion | | | |
| HomUG-ObGy-1
12.25 | K & S | K | Metabolic | Discuss the metabolic changes occurs during pregnancy | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-1
12.26 | K & S | K | Physiological changes | Discuss the haematological changes occurs during pregnancy | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG-ObGy-1
12.27 | K & S | K | Haematological changes | Discuss the Cardio vascular changes occurs during pregnancy | | | | | | |
| HomUG-ObGy-1
12.28 | K & S | K | C V S | Discuss the Systemic changes occurs during pregnancy | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |

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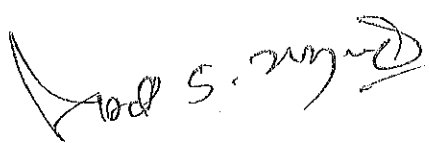
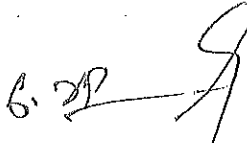
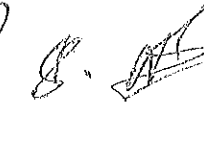
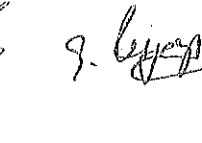
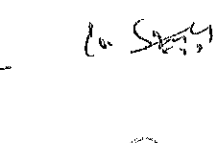
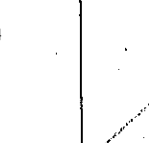
6.12 Antenatal care - aims, objectives, visits, advise, procedures, investigations, identifying high risk cases, scope and limitation of management in Homeopathy

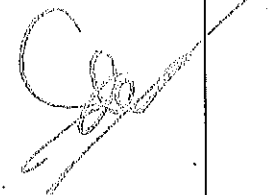
| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|----------------|---|-----------------|----------|---|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
13.1 | K & S | K | Antenatal care | Define Antenatal Care | CI | MK | Lecture
Tutorials
Small group
discussion | MCQ | | |
| HomUG-ObGy-I
13.2 | K & S | K | | Discuss the Aims of Antenatal Care | CI | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-ObGy-I
13.3 | K & S | K | | Discuss the Objectives of Antenatal Care | CI | MK | Lecture
Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-ObGy-I
13.4 | P C | K | | Discuss the procedure at first ANC visit | CI | MK | Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-ObGy-I
13.5 | P C | K | | Discuss the procedure at subsequent visits | CI | MK | Tutorials
Small group
discussion | MCQ | SAQ | |
| HomUG-ObGy-I | P C | K | | Discuss the important Investigations done for | CI | MK | Lecture
Tutorials | MCQ | SAQ | |

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

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

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

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|-----------------------|--|-----------------|----------|---|-------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
14.1 | K & S | K | Vomiting in pregnancy | Define simple vomiting in pregnancy | CI | MK | Lecture/
Integrated
teaching/ AV aids | MCQ
VIVA | | |
| HomUG-ObGy-I
14.2 | K & S | K | | Define hyperemesis gravidarum | CI | MK | Lecture/
Integrated
teaching/ AV aids | MCQ
VIVA | | |
| HomUG-ObGy-I
14.3 | K & S | K | | List aetiology of Hyperemesis gravidarum | CI | MK | Lecture/
Integrated
teaching/ AV aids | | LA
SAQ | |
| HomUG-ObGy-I
14.4 | K & S | K | | Discuss the clinical features of Hyperemesis gravidarum | CI | MK | Lecture/
Integrated
teaching/ AV aids | | SAQ | |
| HomUG-ObGy-I
14.5 | K & S | K | | Explain the Investigations required for Hyperemesis gravidarum | CI | MK | Lecture/
Integrated
teaching/ AV aids | | SAQ | |
| HomUG-ObGy-I
14.6 | K & S | K | | Discuss the Complications of Hyperemesis gravidarum | CI | MK | Lecture/
Integrated
teaching/ AV aids | | SAQ | |

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| HomUG-ObGy-I
14.7 | K & S | K | | Discuss the Management of Hyperemesis gravidarum | C1 | MK | Lecture/
Integrated
teaching/ AV aids | | SAQ | |
| HomUG-ObGy-I
14.8 | H O | K | Homoeopathic Management | Discuss the homoeopathic Therapeutics for Hyperemesis Gravidarum | C2 | MK | Lecture/
Integrated
teaching/ Project
Based Learning | | SAQ | Materia Medica |
| HomUG-ObGy-I
14.9 | K & S | K | Backache | List the causes of backache during pregnancy | C1 | MK | Lecture/
Integrated
teaching/ AV aids | MCQ
VIVA | SAQ | Physiology |
| HomUG-ObGy-I
14.10 | K & S | K | | Discuss the Auxilliary management of backache during pregnancy | C2 | MK | Lecture/
Integrated
teaching/ AV aids | MCQ
VIVA | | Physiology |
| HomUG-ObGy-I
14.11 | H O | K | Homoeopathic Management | Discuss the homoeopathic Therapeutics for Backache during Pregnancy | C2 | MK | Lecture/
Integrated
teaching/ Project
Based Learning | MCQ
VIVA | SAQ | Materia Medica |
| HomUG-ObGy-I
14.12 | K & S | K | Constipation | Discuss the Physiological cause for constipation during pregnancy | C1 | MK | Lecture/
Integrated
teaching/ AV aids | | SAQ | Physiology |
| HomUG-ObGy-I
14.13 | H O | K | Homoeopathic Management | Discuss the homoeopathic Therapeutics for Constipation during Pregnancy | C2 | MK | Lecture/
Integrated
teaching/ Project
Based Learning | MCQ
VIVA | SAQ | Materia Medica |
| HomUG-ObGy-I
14.14 | H O | K | | Discuss the homoeopathic Therapeutics for Minor Ailments during Pregnancy | C2 | MK | Lecture/
Integrated
teaching/ Project
Based Learning | MCQ
VIVA | SAQ | Materia Medica |

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Maximum marks:200
Theory- Paper1- 100
Paper2- 100

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integrability |
|--------------------|-------------------|--------|---------------|---|-----------------|----------|--|------------|-----------|---------------|
| | | | | | | | | Formative | Summative | |
| HomUG -ObGy-1 15.1 | K & S | K | Normal labour | Define Normal labour | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG -ObGy-1 15.2 | K & S | | | Define Eutocia | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG -ObGy-1 15.3 | K & S | K | | Define Abnormal Labour | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG -ObGy-1 15.4 | K & S | K | | Discuss the causes of onset of labour | C1 | MK | Lecture
Tutorials
Small group discussion | | LA
SAQ | Physiology |
| HomUG -ObGy-1 15.5 | K & S | K | | Describe the features of True labour pains | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |
| HomUG -ObGy-1 15.6 | K & S | K | | Describe the features of False labour pains | C1 | MK | Lecture
Tutorials
Small group discussion | MCQ | SAQ | |

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

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

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|---------------------------|----------|----|--|---|-----------|----|--|-----|-----------|--|
| HomUG
-ObGy-I
15.26 | K &
S | KH | | Discuss the management
of 2 nd stage of labour | C2 | MK | Lecture
Tutorials
Small group discussion
Mannikin | | SAQ | |
| HomUG
-ObGy-I
15.27 | K &
S | KH | Mechanism
of labour | Discuss the management
of 3 rd stage of labour | C2 | MK | Lecture
Tutorials
Small group discussion
Mannikin | | SAQ | |
| HomUG
-ObGy-I
15.28 | K &
S | KH | Managemen
t of 1 st , 2 nd

3 rd , and 4 th
stage of
labour | Discuss the management
of 4 th stage of labour | C2 | MK | Lecture
Tutorials
Small group discussion
Mannikin | | SAQ | |
| HomUG
-ObGy-I
15.29 | H O | KH | Scope and
limitation
of
homeopathy | Discuss the Scope of
Homoeopathic in Labour
normal Labour | C2 | MK | Lecture
Tutorials
Small group discussion | | LA
SAQ | |
| HomUG
-ObGy-I
15.30 | H O | K | Scope and
limitation
of
homeopathy | Discuss the limitation of
Homoeopathy Labour | C1
P I | MK | Lecture
Tutorials
Small group discussion | | LA
SAQ | |
| HomUG
-ObGy-I
15.31 | H O | KH | Homoeopat
hic Materia
medica | Discuss the homoeopathic remedies
in labour | C2 | MK | Lecture
Tutorials
Small group discussion | MCQ | LA
SAQ | |
| HomUG
-ObGy-I
15.32 | H O | KH | &therapeuti
cs | Discuss the characteristic
features of indicated
remedies | C2 | MK | Lecture
Tutorials
Small group discussion | MCQ | LA
SAQ | |

3. Pratik, Kunal S. Singh, G. N. J. J. A. B. 9. Gijay (or S. Singh)

6.14 Postnatal & puerperal care - scope and limitation of management in Homoeopathy

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|----------------|---|-----------------|----------|--|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
16.1 | K & S | K | Postnatal care | Define postnatal care | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
16.2 | K & S | K | Puerperium | Define Puerperium | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
16.3 | K & S | K | | Explain the duration of normal puerperium | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
16.4 | K & S | K | | Define Involution | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | |
| HomUG-ObGy-I
16.5 | K & S | K | | Define Sub-involution | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | |

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Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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|----|-------|----|---------|------------------------|---|----|----|----|----|----|----|
| | | | | Small group discussion | | | | | | | |
| 3. | Doubt | 4. | Kor 5-7 | 6-10 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |

Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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

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

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|-----------------------|-----|----|-------------------------|---|-----------|----|--|--|-----|---------------------|
| HomUG-ObGy-I
16.30 | H O | KH | Homoeopathic management | Discuss the Scope of Homoeopathic remedies in Postnatal care | C2 | MK | Lecture
Tutorials
Small group discussion | | SAQ | Maternal medicine |
| HomUG-ObGy-I
16.31 | H O | K | | Discuss the Limitation of Homoeopathic management in postnatal puerperal case | C1
P 1 | MK | Lecture
Tutorials
Small group discussion | | SAQ | Organon of medicine |

6.15 Care of new born in homoeopathic point of view:

| Sl. No. | Domain Competency | Miller | Content | Specific Learning Objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|----------------------|-------------------|--------|-----------------|------------------------------|-----------------|----------|--|------------|-----------|-------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I
17.1 | K & S | K | New born infant | Define New born infant | CI | MK | Lecture
Tutorials
Small group discussion | MCQ | | Paediatrics |
| HomUG-ObGy-I
17.2 | K & S | K | | Explain weaning of infant. | CI
P 1 | MK | Lecture
Tutorials
Small group discussion
Clinical demonstration | VIVA | | |

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

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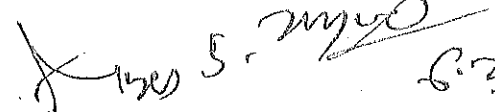
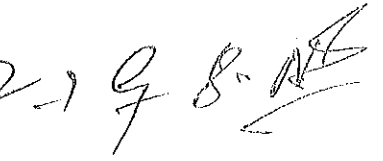

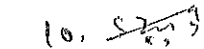

Subject: Gynaecology and Obstetrics
Subject code: HomUG-ObGy-I
Year of Exam: 2028

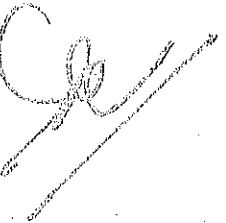
Maximum marks:200
Theory- Paper1- 100
Paper2- 100

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

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

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6.16 General and Homoeopathic management, repertorisation, therapeutics, posology. Formulation of prognostic criteria and Prognosis of related topics in Obstetrics and new born care

| Sl. No. | Domain Competency | Miller | Content | Specific learning objectives | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integrated |
|-------------------|-------------------|--------|---------------------------|--|-----------------|----------|--|------------|-----------|----------------|
| | | | | | | | | Formative | Summative | |
| HomUG-ObGy-I 18.1 | H O | KH | Homoeopathic therapeutics | Discuss the Homoeopathic materia medica & therapeutics in Antenatal ailments | C2 | MK | Lecture
Tutorials
Small discussion group | | SAQ | Materia medica |
| HomUG-ObGy-I 18.2 | H O | KH | | List the Homoeopathic remedies commonly used in obstetrics | C2 | MK | Lecture
Tutorials
Small discussion group | | SAQ | Materia medica |
| HomUG-ObGy-I 18.3 | H O | KH | | Discuss the characteristic features of the indicated remedies. | C2 | MK | Lecture
Tutorials
Small discussion group | | SAQ | Materia medica |
| HomUG-ObGy-I 18.4 | H O | KH | | List the Homoeopathic remedies commonly used in New born care | C2 | MK | Lecture
Tutorials
Small discussion group | | SAQ | Materia medica |
| HomUG-ObGy-I 18.5 | H O | KH | | Discuss the characteristic features of indicated remedies | C2 | MK | Lecture
Tutorials | | SAQ | Materia medica |

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| | | | | | | | Small discussion group | | | |
| HomUG-ObGy-I
13.6 | H O | KH | | Discuss the differentiation of the remedies | C1 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Materia medica |
| HomUG-ObGy-I
13.7 | H O | KH | | Discuss the remedy relationship wherever applicable | C1 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Materia medica |
| HomUG-ObGy-I
13.8 | H O | KH | Repertorisation | Discuss the selection of repertories in Obstetrical care | C-3 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Repertory |
| HomUG-ObGy-I
13.9 | H O | KH | | Discuss the selection of repertories in New born care | C-3 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Repertory |
| HomUG-ObGy-I
13.10 | H O | S | | Explain how to convert symptoms into rubrics from different repertories in Obstetrics. | C-3 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Repertory |
| HomUG-ObGy-I
13.11 | H O | S | | Explain how to convert symptoms into rubrics from different repertories in New born care. | C-3 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Repertory |
| HomUG-ObGy-I
13.12 | H O | K | | Discuss the selection of repertory based on symptomatology | C-1 | MK | Lecture
Tutorials
Small discussion group | MCQ | | Repertory |

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

3. (14) Total 5 marks - 6.12.23 8.12.23 9.12.23 10.12.23

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3.17 Important Investigations for diagnosis in Obstetrics

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

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| HomUG-ObGy-I
19.5 | P C | K | | Discuss the findings of Anterio - posterior diameters of the fetal skull in USG. | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | Radiology |
| HomUG-ObGy-I
19.6 | P C | K | | Discuss the findings of biparietal (BPD) diameters of the fetal skull in USG. | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | Radiology |
| HomUG-ObGy-I
19.7 | P C | K | | Discuss the findings of Crown Rump Length in USG | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | Radiology |
| HomUG-ObGy-I
19.8 | P C | K | | Discuss the findings of Amniotic fluid in USG | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | Radiology |
| HomUG-ObGy-I
19.9 | P C | K | | Discuss the findings of foetal growth in each trimester in USG | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | Radiology |
| HomUG-ObGy-I
19.10 | P C | K | | Discuss the findings of Malformations of the foetus in USG | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | Radiology |

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

3. 4. 5. 6. 7. 8. 9. 10.

| | | | | | | | | | |
|-----------------------|-----|---|--|----|----|--|-----|--|--|
| HomUG-ObGy-I
19.17 | P C | K | Discuss the importance of FBS, RBS and PPBS in pregnancy | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | |
| HomUG-ObGy-I
19.18 | P C | K | Describe the importance of Thyroid function tests in pregnancy | CI | MK | Small group
discussion
Tutorials
CBL
PBL | MCQ | | |

7 Teaching learning methods

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

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Details of assessment

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

Overall Scheme of Internal Assessment (IA)***

| Professional Course/ Subject | Term I (1-6 Months) | | Term II (7-12 Months) | |
|--|------------------------|--|-------------------------|---|
| | PA I (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | TT II (end of 12 months) |
| IIBHMS/
Obstetrics &
Gynaecology | 20 Marks Viva- A | 100 Marks Clinical/Practical and Viva - E

i) Viva voce -50 marks
ii) Clinical/practical*- 50 | 20 Marks Viva- B | 100 Marks Clinical/Practical and Viva - F

i) Viva voce -50 marks
ii) Clinical/practical**- 50 |

*Practical Examinations TTI:

- Case taking:** Recording of case in Obstetrics & Gynaecology. (20 marks)
- Demonstration: (15 Marks)**
 - General physical examination
 - Per abdominal examination
 - Pelvic grips
- Lab Investigations:** Suggest the relevant lab investigations for 1st, 2nd and 3rd trimester (5 marks)
- Demonstration of foetal skull & Pelvic diameters (10 marks)**


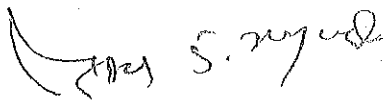
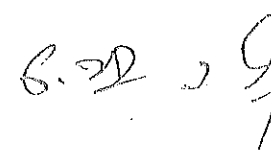
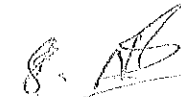
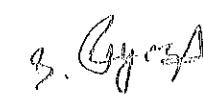

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****Practical Examinations TT II:**

- Case taking:** Recording of case taking in Obstetrics & Gynaecology. (20 marks).
- Examination of the patient (10 marks)**
 - General physical examination
 - Breast examination
 - Obstetric examinations
 - Post-natal examinations.
 - New born care examination
- Analysis of the case (5 marks)**
- Journal submission - 5 cases (10 marks)**
Journal shall have following cases with analysis-
Gynaec-3, ANC-1, PNC-1
- Dummy & Pelvis:** Demonstration of fetal skull diameters, Sutures and pelvic diameters. (05 marks)

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

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

3.  5.  6.  7.  8.  9. 

9 List of recommended text/reference books

- Dutta,D.C,(2023).*Text book of Obstetrics*, 10th edition, New Central Book Agency Pvt Ltd.,
- Dutta D.C (2020).*Text book of Gynaecology*, 8th edition, New Central Book Agency Pvt Ltd.
- Lilienthal Samuel (Reprint 2003), *Homoeopathic Therapeutics*, 5 edition B Jain Publishers (P) Ltd
- Guernsey H.N. *Principles & Practice of Homoeopathy in Obstetrics & Paediatrics*.
- Minton, *Uterine therapeutics Materia medica & Repertory*, B Jain publishers (P) Ltd.

10 List of contributors:

- I. **Dr. Vilma Meera Dsouza** - Vice Principal, Professor & Hod, Department Of Gynaecology & Obstetrics, Father Muller Homoeopathic Medical College And Hospital, Deralakatte, Mangalore.
- II. **Dr. Nectu Singh** - Professor & Hod, Department Of Gynaecology & Obstetrics, Mangilal Nirban Homoeopathic Medical College And Research Institute, Bikaner, Rajasthan.
- III. **Dr Rekha Thomas** - Professor And Hod, Department Of Gynecology And Obstetrics, Nehru Homoeopathic Medical College And Hospital, New Delhi.

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Subject: Forensic Medicine and Toxicology
Subject code: HomUG-FMT
Year of Examination: 2027

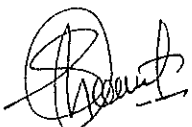
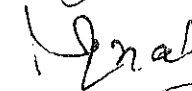
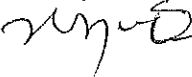
Max. Marks: 100
Theory: 100

Instructions for paper setters:

1. There will be one paper only of 100 marks.
2. All questions compulsory.
3. Attempt questions in serial order.
4. Illustrate your answers with well labeled diagrams where ever necessary.



Distribution of marks:

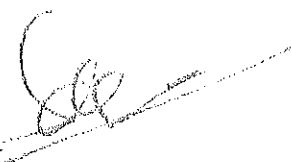
5. MCQs 10marks (1 mark each)
6. Short answer questions 40 marks (5 marks each)
7. Long answer questions 50 marks (10 marks each)

3. 
4. 
5. 

9. 

10. 

6.  8. 



2

Subject name: - Forensic Medicine and Toxicology

Subject code: HomUG-FMT

Index

| S. No | Description | Page Number |
|-------|--|-------------|
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| 9. | List of Contributors | 50 |

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1. Preamble

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

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

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

2. Course outcomes

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

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

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

3. Course content and its term-wise distribution

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

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4. Teaching hours

4.1 Gross division of teaching hours

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

4.2 Teaching hours theory

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

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

4.3 Teaching hours: Non-lecture

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

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

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5 Content mapping (competencies tables)

5.1. Topic: Introduction to Forensic Medicine-

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

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5.2. Topic: Medical ethics-

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom /Gilbert | Priority | TL MM | Assessment | | Integration |
|----------------|------------------------------------|--------|--|--|----------------|----------|---|------------------------------|----------------------------------|-------------|
| | | | | | | | | F | S | |
| Hom UG-FMT-2.1 | KS
PC
HO
CS
PBL
PRF | K | Medical Ethics and etiquette - Code of ethics, Infamous conduct, medical negligence, professional secrecy, | Define medical ethics | C-I | MK | Interactive lecture, Small Group Discussions , Written Case Scenario, Moot court. | MCQ, Assignment | Viva voce | None |
| Hom UG-FMT-2.2 | | | privileged communication, Rights and duties of doctors and patients etc

National Commission for Homoeopathy and | Discuss professional misconduct with 2 examples. | C-II | MK | Interactive lectures, Written Case Scenario, Moot court. | SAQ LAQ, Tutorial Assignment | Theory - SAQ and LAQ , Viva voce | |

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

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

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 10. 5/25/27

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

5.3. Topic: Legal procedures-

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

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

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

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5.4. Topic: Personal identification-

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

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

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5.5. Topic: death and its medicolegal importance-

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

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

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

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

5.6. Topic: Injury and its medicolegal importance-

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

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

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

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5.7. Topic: Forensic psychiatry-

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

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

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

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5.8. Topic: Postmortem examination (ML autopsy)-

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

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

5.9. Topic: Impotency and sterility-

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

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

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

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

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

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

5.11. Topic: Abortion and infanticide-

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

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

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

5.12. Topic: Sexual offences-

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

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|----------------------------|--|--|---|---|------|----|---|---------------------------------------|---|----|
| Hom
UG-
FMT-
12.3 | | | The
medicolega
l aspects of
sexual
offenses
and
perversions
. IPC, CrPC | Explain the
natural sexual
offences. | C-II | MK | Interactive
lecture,
small
group
discussion
s,
Integrated
learning | MCQ,
SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | 1. |
| Hom
UG-
FMT-
12.4 | | | {
Bhartiya
Nyay
Sanhita Bill
2023 &
Bharatiya
Sakshya
(Second)
Bill 2023} | Explain the
unnatural
sexual
offences. | C-II | MK | Interactive
lecture,
small
group
discussion
s,
Integrated
learning | MCQ,
SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | |
| Hom
UG-
FMT-
12.5 | | | | Explain the
different sexual
perversions. | C-II | MK | Interactive
lecture,
small
group
discussion
s,
Integrated
learning | MCQ,
SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | |
| Hom
UG-
FMT-
12.6 | | | | Discuss the
clinical
examination
and findings of
victim and | C-II | MK | Interactive
lecture,
small
group | SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | |

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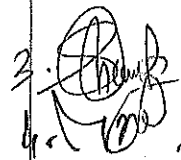

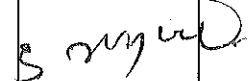
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|-----------------|--|--|--|---|------|----|--|---------------------|----------------------------------|--|
| | | | | assailant of a sexual offence | | | discussion s, Integrated learning | | | |
| Hom UG-FMT-12.7 | | | | Explain the medicolegal aspects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

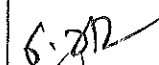


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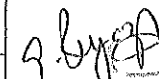
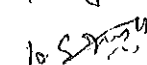
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5.13. Topic: General toxicology-

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom /Guilbert | Priority | TL MM | Assessment | | Integration |
|-----------------|-------------------------------------|--------|---|---|-----------------|----------|--|--------------------------|----------------------------------|--|
| | | | | | | | | F | S | |
| Hom UG-FMT-13.1 | KS
PC
HO
CS
PBL
PRF. | K | Forensic Toxicology and Poisons, Classification of poisons Medico - legal | Classify various types of poisons | C-II | MK | Interactive lecture, lecture demonstration, group discussions, Integrated learning | MCQ, SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | None

3. 
4. 
5. 

6. 
7. 
8. 

9. 
10.  |
| Hom UG-FMT-13.2 | | | aspects of poisons, Antidotes and types, Diagnosis of | Explain the general principles of management of poisoning | C-II | MK | | SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | |
| Hom UG-FMT-13.3 | | | poisoning in living and dead, General principles | Explain the types of antidotes And its uses | C-II | MK | | MCQ, SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | |
| Hom UG-FMT-13.4 | | | of management of poisoning, | Explain the diagnosis of poisoning in living and dead subjects, | C-II | MK | | MCQ, SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | |

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

5.14. Topic: General toxicology-

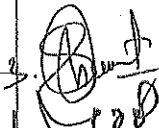
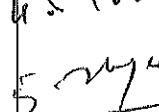
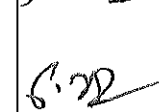


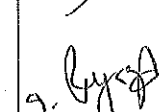
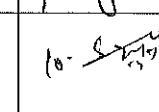
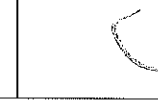
| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom /Guilbert | Priority | TL MM | Assessment | | Integration |
|-----------------|-------------------------------------|--------|--|--|-----------------|----------|---|---------------------------|----------------------------------|---------------------------------|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

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|-----------------------------|--|--|---|---|------|----|--|---------------------------------------|---|--|
| Hom
UG-
FMT-
T14.2 | | | vi)
Miscellane
ous
vii) food
Poisoning
viii) Drug
dependenc
e & drug
use. | Describe the
action, signs and
symptoms, fatal
dose, fatal
period, post
mortem findings
and
circumstances of
asphyxiant
poisoning. | C-II | MK | Interactive
lecture, ,
group
discussion
s,
Integrated
learning | MCQ,
SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | <p>3. </p> <p>4. </p> <p>5. </p> <p>6. </p> <p>7. </p> <p>8. </p> <p>9. </p> <p>10. </p> |
| Hom
UG-
FMT-
14.3 | | | | Describe the
action, signs and
symptoms, fatal
dose, fatal
period, post
mortem findings
and
circumstances of
neurotic
poisoning. | C-II | MK | Interactive
lecture, ,
group
discussion
s,
Integrated
learning | MCQ,
SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | |
| Hom
UG-
FMT-
14.4 | | | | Describe the
action, signs and
symptoms, fatal
dose, fatal period,
post mortem
findings and
circumstances of
irritant poisoning. | C-II | MK | Interactive
lecture, ,
group
discussion
s,
Integrated
learning | MCQ,
SAQ
LAQ,
Assignme
nt | Theory -
SAQ and
LAQ , Viva
voce | |

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| | | | | | | | | | | |
|----------------------------|--|--|--|---|------|----|--|--------------------------|----------------------------------|--|
| Hom
UG-
FMT-
14.5 | | | | Describe the action, signs and symptoms, fatal dose, fatal period, post mortem findings and circumstances of cardiac poisoning. | C-II | MK | Interactive lecture, , group discussion s, Integrated learning | MCQ, SAQ LAQ, Assignment | Theory- SAQ and LAQ , Viva voce | |
| Hom
UG-
FMT-
14.6 | | | | Explain Medicolegal aspects in different poisoning | C-II | DK | Interactive lecture, , group discussion s, Integrated learning | SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | 3. 
4. 
5. 
6. 
7. 
8. 
9. 
10.  |
| Hom
UG-
FMT-
14.7 | | | | Differentiate between the various presentations of Arsenic and Lead poisoning. | C-II | MK | Interactive lecture, , group discussion s, Integrated learning | MCQ, SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | |
| Hom
UG-
FMT-
14.8 | | | | Explain differential diagnosis of Organophosphorus poisoning | C-II | MK | Interactive lecture, , group discussions, Integrated learning | MCQ, SAQ LAQ, Assignment | Theory - SAQ and LAQ , Viva voce | |

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

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

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

[Handwritten signatures and marks]

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

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

[Handwritten signatures and marks]

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5.17. Topic: Certificate Writing (Practical)-

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

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8. 9. 10.

5.18. Topic: Consent (Practical)-

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

6. Teaching learning methods

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

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7. Details of assessment

7.1 Overall Scheme of Assessment (Summative)

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

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

3. 4. 5. 6. 7. 8. 9. 10.

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

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

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

Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) / 70 X 10

****Details of practical assessment at FUE**

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

3. 4. 5. 6. 7. 8. 9. 10.

7.3 Paper Layout

Summative assessment(FUE):

Theory- 100 marks

| | |
|-----|----------|
| MCQ | 10 marks |
| SAQ | 40 marks |
| LAQ | 50 marks |

7.4 Distribution of questions for theory exam

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

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

3. 4. 5. 6. 7. 8. 9. 10.

48

7.5 Theme-wise distribution of questions:

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

4a

7.6 Question paper blueprint

| A
Question
Serial
Number | B
Type of Question | Question Paper Format
(Refer table 7.5 for themes) |
|-----------------------------------|---|---|
| Q1 | Multiple choice Questions (MCQ)
10 Questions

1 mark each

All compulsory

Must know part: 6 MCQ Desirable to know: 2 MCQ. Nice to know: 2 MCQ | 1. Theme B

2. Theme C

3. Theme D

4. Theme E

5. Theme F

6. Theme G

7. Theme H

8. Theme L

9. Theme L

10. Theme M |

3. Print 4. Have 5. my 8 6. 22 7. 9
 8. 10 9. By 10 10. 5-10

50

| | | |
|----|--|--|
| Q2 | Short answer Questions(SAQ)
8 Questions

5 Marks Each , All compulsory
Must know part:7 SAQ

Desirable to know: 1 SAQ
Nice to know: Nil | 1. Theme A

2. Theme B

3. Theme E

4. Theme F

5. Theme G

6. Theme I

7. Theme J

8. Theme K |
| Q3 | Long answer Questions (LAQ) 5 Questions

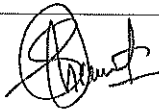
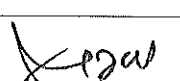
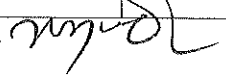
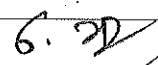
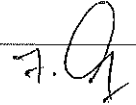
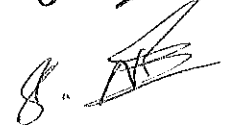

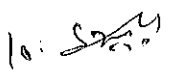
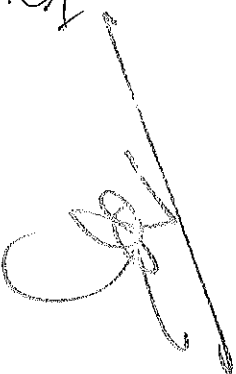
10 Marks each
All compulsory | 1. Theme C

2. Theme D

3. Theme E

4. Theme H

5. Theme N |

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8. List of recommended Books

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

9. List of contributors :

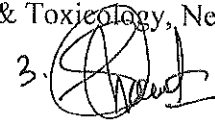
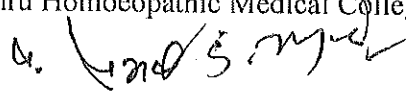
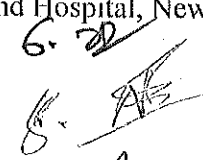

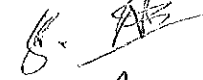

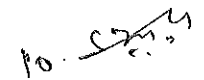

I. Dr. Dharmendra B. Sharma

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II. Dr. Shiv Kumar Mishra

Professor, Department of Forensic Medicine & Toxicology, Nehru Homoeopathic Medical College and Hospital, New Delhi

3.  4.  6.  7. 
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10. 


Subject: Pathology & Microbiology
Subject code: Hom UG-Path-M
Year of Examination: 2027

Max. Marks: 200
Theory: Paper I: 100
Paper II: 100

Instructions for paper setters:

1. Paper 1 and paper 2 shall carry 100 marks each.
2. All questions compulsory.
3. Attempt questions in serial order.
4. Illustrate your answers with well labeled diagrams where ever necessary.

Distribution of marks:

5. MCQs 10marks (1 mark each)
6. Short answer questions 40 marks (5 marks each)
7. Long answer questions 50 marks (10 marks each)

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1. Preamble

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

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

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

2. Course outcomes

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

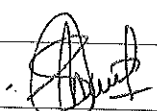
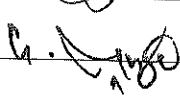
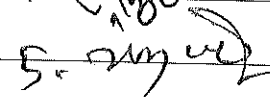
1. Recognize the importance of study of Pathology and Microbiology in Homoeopathic system of medicine
2. Understand the morphological changes in cell structure in disease and recognize the mechanism of the etiological factors in the causation of such changes
3. Integrate the study of Pathology and Microbiology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



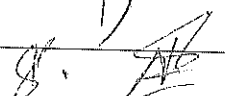
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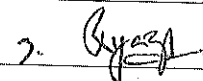
3. Course content and its term-wise distribution

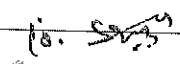
3.1 Contents for Term I

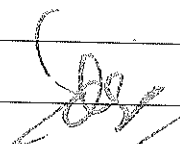
| Theory | |
|---------------------------------------|---|
| Sr. No. | Topic |
| 1. | Introduction to Pathology |
| 2. | General Pathology |
| 3. | Introduction to Microbiology |
| 4. | Sterilisation and Disinfection |
| 5. | Culture medias and methods |
| 6. | Infection and Disease |
| 7. | Human Microbiome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

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

3.2 Contents for Term II

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

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4. ~~Micro~~
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8. ~~AT~~

9. ~~Group~~

10. ~~Specimen~~

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

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4. Teaching hours

4.1 Gross division of teaching hours


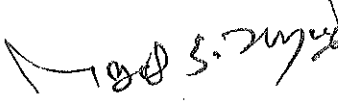
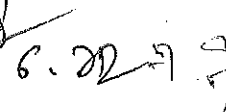

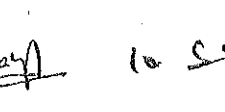
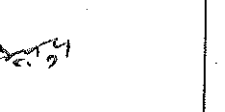

| Pathology & Microbiology | | |
|--------------------------|--------------------------|------------------------------|
| Year | Teaching hours- Lectures | Teaching hours- Non-lectures |
| II BHMS | 200 | 80 |

4.2 Teaching hours theory

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

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

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

3.  4.  5.  6.  7.  8.  9.  10.

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

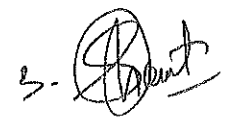

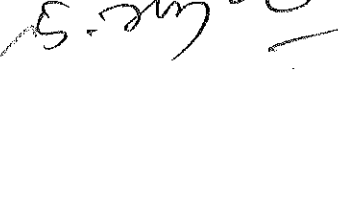
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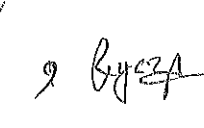
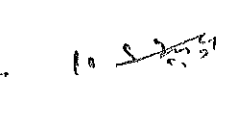
4.3 Teaching hours Non-lecture

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

3. 6. 7. 8. 9. 10. 11. 12.

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

3. 
4. 
5. 

6.  7.  8.  9.  10. 

5. Content mapping (competencies tables)

5.1. Introduction to Pathology-

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

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

5.2. Cell injury and cellular adaptation-

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

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

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

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

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

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

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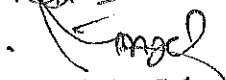

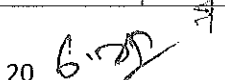

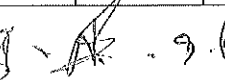
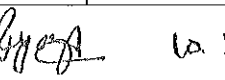
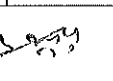
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|------------------------------|----|----|--|---|-----|----|--------------------------------------|----------------------------|-----------------------------------|--|
| HomU
G-Path
M 2.34 | KS | K | | Describe the types of Necrosis with examples |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

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

| | | | | | | | | | | |
|------------------------------|----|----|---|--|-----|----|--------------------------------------|----------------------------|-----------------------------------|---------|
| HomU
G-Path
M 2.4
6 | KS | KH | Dry gangrene | Explain the etiopathogenesis morphological features of dry gangrene with examples | C 2 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | Surgery |
| HomU
G-Path
M 2.4
7 | KS | KH | Wet gangrene | Describe the etiopathogenesis morphological features of wet gangrene with examples | C 2 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | Surgery |
| HomU
G-Path
M 2.4
8 | KS | KH | Differences between dry gangrene and wet gangrene | Enumerate the differences between dry gangrene and wet gangrene | C 2 | MK | Lecture | Viva
Voce
SAQ
MCQ | Viva
Voce
SAQ
MCQ | |
| HomU
G-Path
M 2.49 | KS | KH | Etiopathology of Gas gangrene | Explain the etiopathogenesis and morphological features of Gas gangrene | C 2 | MK | Lecture
Slide
present
ation | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | |
| HomU
G-Path
M 2.50 | KS | K | Pathological calcification | Define the term "Pathological calcification" | C 1 | MK | Lecture
Slide
present
ation | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | |
| HomU
G-Path
M 2.51 | KS | KH | | Enumerate the types of pathological calcification | C 1 | MK | Lecture
Slide
present
ation | MCQ
Viva
Voce | MCQ
Viva
Voce | |


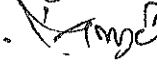
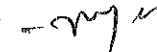
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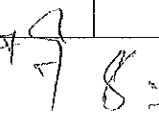
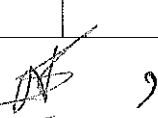
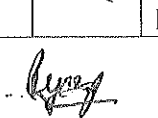
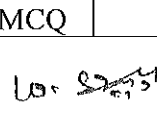

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| HomU
G-Path
M 2.52 | KS | KH | | Describe the etiopathogenesis of Dystrophic calcification with examples | C 2 | MK | Lecture
Slide
present
ation | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | |
| HomU
G-Path
M 2.53 | KS | KH | | Describe the etiopathogenesis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

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

5.3. Inflammation and repair-


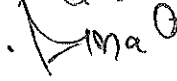
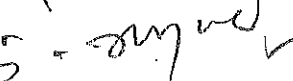
| Sl.No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
|-------------------------|----------------------|--------|------------------------|----------------------------------|------------------|----------|---------|---------------------|----------------------------|-------------|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

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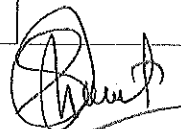
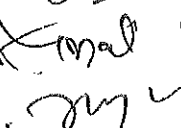
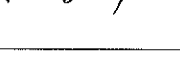
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| HomU
G-Path
M.3.4 | KS | K | Cardinal signs of inflammation | State the cardinal signs of inflammation | C 1 | MK | Lecture | Viva
Voce
MCQ | SAQ
Viva
Voce
MCQ | |
| HomU
G-Path
M.3.5 | KS | K | Definition of Acute inflammation | Define the term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

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


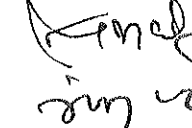

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| HomU
G-Path
M.3.17 | KS | KH | Outcomes of
Acute
Inflammation | Describe the end result of Acute
Inflammation | C2 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ | |
| HomU
G-Path
M.3.18 | KS | K | Chronic
inflammation | Define the term "chronic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

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

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

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5.4. Haemodynamic disorders

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

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

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

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

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

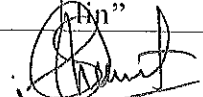
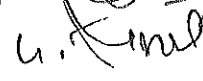
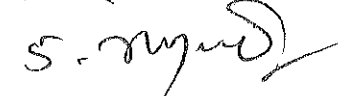
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| HomUG-Path
M.4.32 | KS | K | | State the types of Infract | C1 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | |
|----------------------|----|---|--|----------------------------|----|----|---------|----------------------------|----------------------------|--|

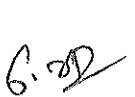


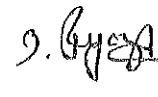
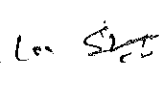
5.5. Immunopathology-

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|----------------------|--------|-------------------------------|---|------------------|----------|-------------------------------|----------------------------|-----------------------------------|-------------|
| | | | | | | | | F | S | |
| HomUG-Path
M.5.1 | KS | K | Definition of Immunity | Define the term "Immunity" | C1 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | Physiology |
| HomUG-Path
M.5.2 | KS | K | Types of immunity | State the types of immunity | C1 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | Physiology |
| HomUG-Path
M.5.3 | KS | KH | Components of Innate immunity | Describe the four components of Innate immunity | C2 | MK | Lecture
Slide presentation | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | Physiology |
| HomUG-Path
M.5.4 | KS | KH | Functions of Innate immunity | Describe the functions of Innate immunity | C2 | MK | Lecture
Slide presentation | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | Physiology |


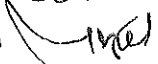
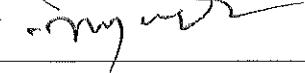
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| HomU
G-Path
M.5.5 | KS | K | Definition of
Adaptive
immunity" | Define the term "Adaptive
immunity" | C1 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | |
| HomU
G-Path
M.5.6 | KS | K | Classification
of Adaptive
immunity | Classify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

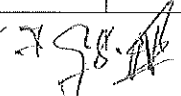



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| HomU
G-Path
M.5.12 | KS | K | Cells and Organs of Immune system | State the cells of the immune system | C1 | MK | Lecture | Viva
Voce
SAQ
MCQ | Viva
Voce
SAQ
MCQ
LAQ | Physiology |
| HomU
G-Path
M.5.13 | KS | KH | Humoral immunity | Explain the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

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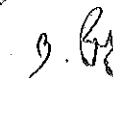
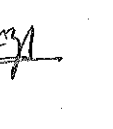
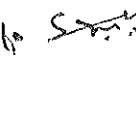
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|--------------------------|----|----|--|---|----|----|---------|----------------------------|-----------------------------------|--|
| HomU
G-Path
M.5.18 | KS | K | Immunoglobulin and their function | State the types of Immunoglobulin classes and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

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

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

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

5.6. Neoplasia-

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

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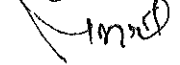

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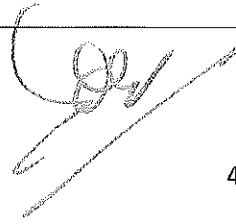
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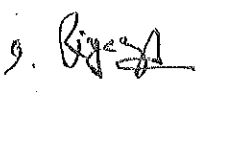
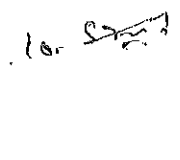
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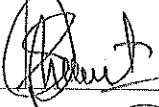

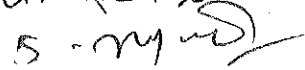
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| HomU
G-Path
M.6.3 | KS | K | Classification
of tumours | Classify tumours based on
histogenesis and anticipated
behaviour | C 1 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | |
| HomU
G-Path
M.6.4 | KS | K | Special
categories of
tumours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

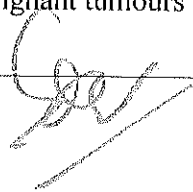
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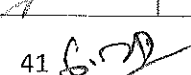

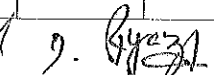


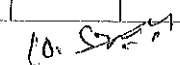
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| HomU
G-Path
M.6.9 | KS | KH | | Differentiate benign and malignant neoplasms based on their rate of growth | C2 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ
LAQ | |
| HomU
G-Path
M.6.10 | KS | KH | Differentiating features of benign and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

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

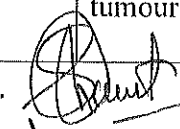

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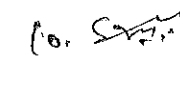
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| HomU
G-Path
M.6.27 | KS | KH | Biological
carcinogenesis | Describe the mechanism of
biological carcinogenesis | C2 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | |
| HomU
G-Path
M.6.28 | KS | KH | Effects of
tumour on the
host | Describe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

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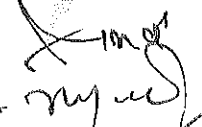
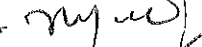
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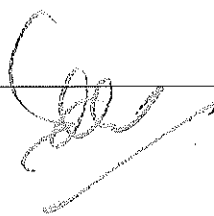
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|--------------------------|----|----|--------------------------------------|--|-----|----|---------|----------------------------|----------------------------|---------------------|
| HomU
G-Path
M.6.34 | KS | K | Laboratory
Diagnosis of
Cancer | State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

5.7. Environmental and nutritional diseases-

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


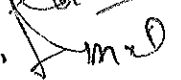

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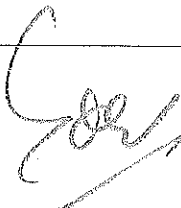


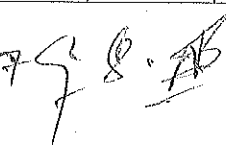
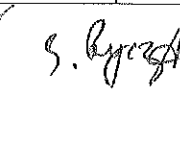
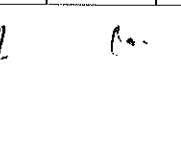
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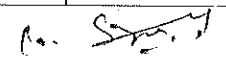
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| HomU
G-Path
M.7.4 | KS | KH | Difference between Kwashiorkor and marasmus | Enumerate the differences between Kwashiorkor and Marasmus | C 2 | MK | Lecture | Viva
Voce
MCQ
SAQ | Viva
Voce
MCQ
SAQ | Physiology
Community
medicine |
| HomU
G-Path
M.7.5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

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Maximum marks:200

Theory: Paper 1- 100

Paper 2- 100

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

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




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

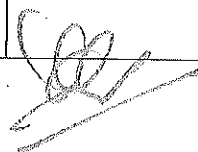
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|---------------------------|------------------------|------------------------|------------------------|------------------------|---------------------------|----------------------------|
| 3. Anaemia | | | | | voce, MCQ | Viva . MCQ |
| 1. <i>Iron deficiency</i> | <i>Iron deficiency</i> | <i>Iron deficiency</i> | <i>Iron deficiency</i> | <i>Iron deficiency</i> | 9. <i>Iron deficiency</i> | 10. <i>Iron deficiency</i> |
| 5. <i>Iron deficiency</i> | <i>Iron deficiency</i> | <i>Iron deficiency</i> | <i>Iron deficiency</i> | <i>Iron deficiency</i> | | |

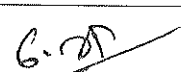
Subject: Pathology and Microbiology
Subject code: HomUG-Path-M
Year of Exam: 2027

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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

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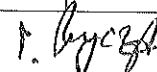


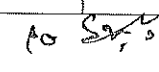
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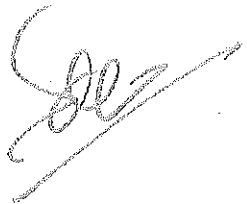
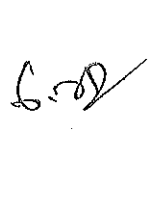

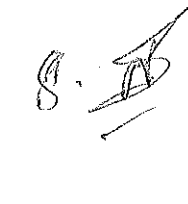


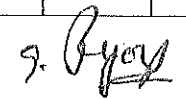
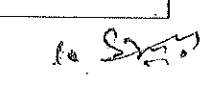
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| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priorit y | TL MM | Assessment | | Integration |
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| | | | | | | | | F | S | |
| HOMU G-Path M. 8.14 | KS | KH | | Classify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

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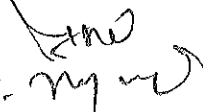

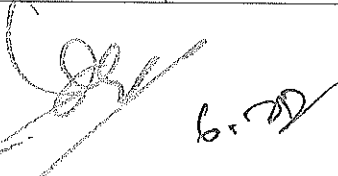

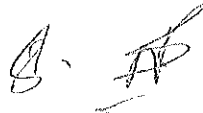


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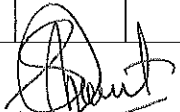
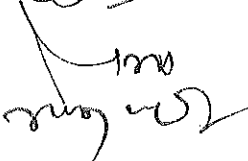
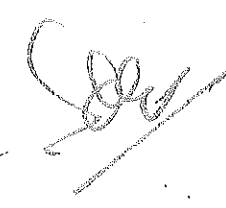
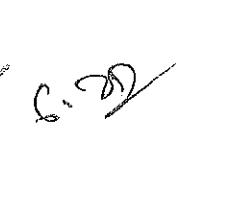
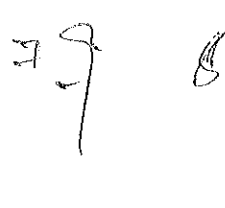
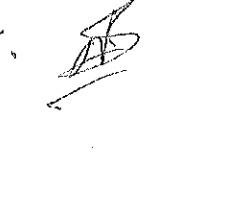
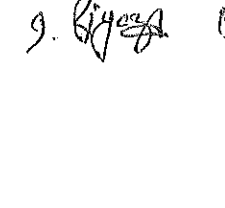
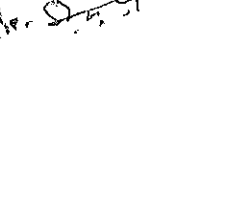
Subject: Pathology and Microbiology
Subject code: HomUG-Path-M
Year of Exam: 2027

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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

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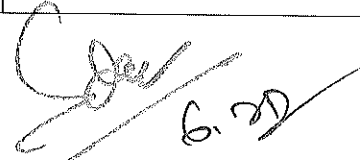
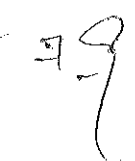

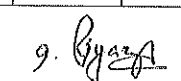
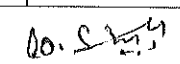
| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
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| | | | | | | | | F | S | |
| HOMU G-Path M. 8.28 | KS | KH | Classification of Polycythaemia | Classify Polycythaemia on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

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Subject: Pathology and Microbiology
Subject code: HomUG-Path-M
Year of Exam: 2027

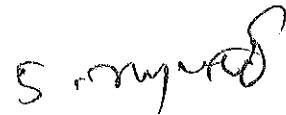
Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

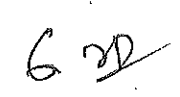



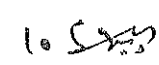
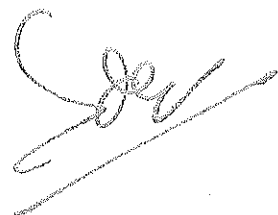
| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
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| HOMU G-Path M. 8.34 | KS | KH | | Describe the laboratory diagnosis of Acute lymphoblastic Leukaemia | C 2 | MK | Lecture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

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| HOMU G-Path M. 8.41 | KS | KH | Plasma cell myeloma | Describe the laboratory diagnosis of Multiple myeloma | C 2 | DK | Lecture | Viva voce, MCQ | SAQ. Viva . MCQ | Practice of medicine |
| HOMU G-Path M. 8.42 | KS | K | Hodgkin's lymphoma | Discuss features of Hodgkin's lymphoma | C1 | DK | Lecture | Viva SAQ MCQ | SAQ. Viva . MCQ | Practice of medicine |
| HOMU G-Path M. 8.43 | KS | K | | Explain the appearance of Reed Sternberg cell in tissues | C 1 | DK | Lecture | Viva SAQ MCQ | SAQ. Viva . MCQ | |
| HOMU G-Path M. 8.44 | KS | K | | Discuss features of Non Hodgkin's lymphoma | C 1 | NK | Lecture | Viva SAQ MCQ | NA | Practice of medicine |
| HOMU G-Path M. 8.45 | KS | K | Splenomegaly | State the causes of Splenomegaly | C1 | DK | Lecture | Viva SAQ MCQ | Viva SAQ MCQ | |

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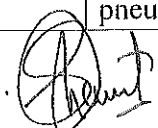
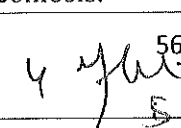

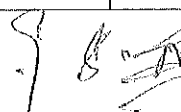
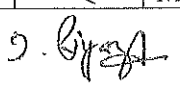
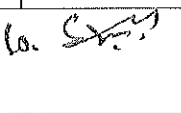

5.9. Diseases of the Respiratory System

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

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

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

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

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

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

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

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

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

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


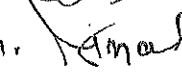
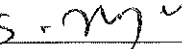
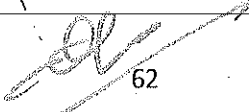
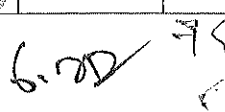
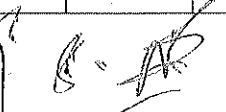
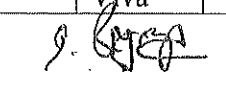
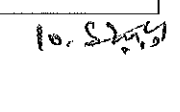
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| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
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| | | | | | | | | F | S | |
| HOMUG-Path M. 10.26 | KS | KH | | Describe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



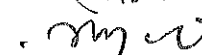
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| | | | | | | | | F | S | |
| HOMUG-Path M. 10.33 | KS | K | | Describe the morphology of Colorectal cancer | C 1 | DK | Lecture | Viva
SAQ
MCQ | LAQ
SAQ,
MCQ,
Viva | |
| HOMUG-Path M. 10.34 | KS | K | | Describe the spread of Colorectal cancer | C 1 | DK | Lecture | Viva
SAQ
MCQ | LAQ
SAQ,
MCQ,
Viva | |
| HOMUG-Path M. 10.35 | KS | K | Intestinal tuberculosis | Describe the pathology of Intestinal tuberculosis | C 1 | DK | Lecture | Viva
SAQ
MCQ | LAQ
SAQ,
MCQ,
Viva | |

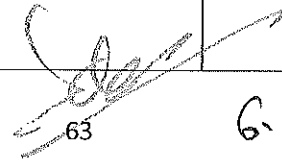
5.11. Diseases of liver, gall bladder and biliary ducts-

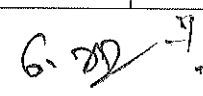

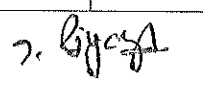
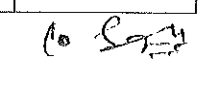
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| | | | | | | | | F | S | |
| HOMUG-Path M. 11.1 | KS | K | Liver Function Tests | Discuss the liver function tests alongwith clinical significance of each | C 1 | MK | Lecture | OSPE
Viva
MCQ | OSPE
LAQ
SAQ
MCQ
Viva | |
| HOMUG-Path M. 11.2 | KS | K | Jaundice | Define the term "Jaundice" | C 1 | MK | Lecture | Viva
MCQ | SAQ,
MCQ,
Viva | |
| HOMUG-Path M. 11.3 | KS | K | | State the pathophysiologic classification of jaundice. | C 1 | MK | Lecture | Viva
SAQ
MCQ | LAQ
SAQ,
MCQ,
Viva | |

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| | | | | | | | | F | S | |
| HOMUG-Path M. 11.4 | KS | K | Cholestasis | Define Cholestasis | C 1 | MK | Lecture | Viva voce, MCQ | SAQ, MCQ, Viva | |
| HOMUG-Path M. 11.5 | KS | K | Alcoholic Liver Disease | Define the term "Alcoholic liver disease" | C 1 | MK | Lecture | Viva voce, MCQ | SAQ, MCQ, Viva | |
| HOMUG-Path M. 11.6 | KS | K | | Explain the pathogenesis of alcoholic liver disease | C 1 | MK | Lecture | Viva SAQ MCQ | LAQ SAQ, MCQ, Viva | |
| HOMUG-Path M. 11.7 | KS | K | | Describe the morphologic spectrum of alcoholic liver disease | C 1 | MK | Lecture | Viva SAQ MCQ | LAQ SAQ, MCQ, Viva | Practice of medicine |
| HOMUG-Path M. 11.8 | KS | K | Liver Cirrhosis | Define the term "Liver cirrhosis" | C 1 | MK | Lecture | Viva voce, MCQ | LAQ SAQ, MCQViva | |
| HOMUG-Path M. 11.9 | KS | K | Liver Cirrhosis | Classify Cirrhosis based on morphology and aetiology | C 1 | DK | Lecture | Viva SAQ MCQ | LAQ SAQ, MCQViva | Practice of medicine |
| HOMUG-Path M. 11.10 | KS | KH | | Describe the morphology of Alcoholic cirrhosis | C 2 | MK | Lecture | Viva SAQ MCQ | LAQ SAQ, MCQViva | |

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

5.12. Diseases of the pancreas-

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


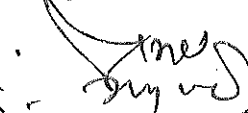

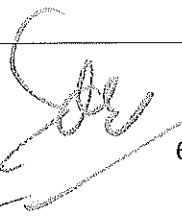
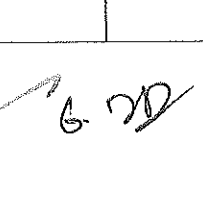
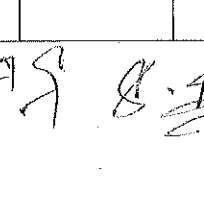
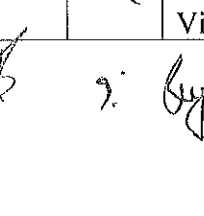
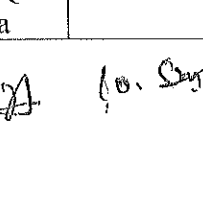
| Sl. No. | Name | Describe the pathogenesis of acute pancreatitis | C 2 | MR | Lecture | Viva MCQ | MCQ, Viva | Practice of medicine, Surgery |
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| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment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

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




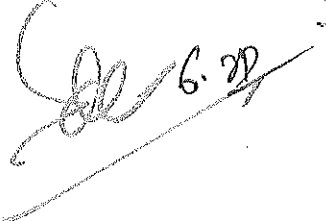

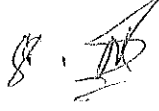
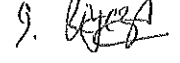

5.13. Diseases of blood vessels and lymphatics-

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

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

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

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5.14. Diseases of cardiovascular system-

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

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| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
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| HomUG-Path M. 14.8 | KS | KH | Myocardial Infarction. | Describe the aetio-pathogenesis of Myocardial Infarction. | C 2 | MK | Lecture | Viva voce, MCQ, SAQ | LAQ, SAQ, MCQ, Viva voce | Practice of medicine |
| HomUG-Path M. 14.9 | KS | KH | | Describe the gross changes in Myocardial infarction | C 2 | DK | Lecture | Viva SAQ, MCQ | LAQ, SAQ, MCQ, Viva | |
| HomUG-Path M. 14.10 | KS | KH | | Describe the microscopic changes in Myocardial infarction | C 2 | DK | Lecture | Viva SAQ, MCQ | LAQ, SAQ, MCQ, Viva | |
| HomUG-Path M. 14.11 | KS | KH | | Describe the diagnosis of Myocardial Infarction. | C 2 | MK | Lecture | Viva voce, MCQ, SAQ | LAQ, SAQ, MCQ, Viva voce | Practice of medicine |
| HomUG-Path M. 14.12 | KS | K | Rheumatic heartdisease. | Define the terms "Rheumatic fever", "Rheumatic heart disease" | C 1 | MK | Lecture | Viva voce, MCQ | MCQ, Viva voce | |
| HomUG-Path M. 14.13 | KS | KH | | Describe etio-pathogenesis of Rheumatic heart disease. | C 2 | MK | Lecture | Viva voce, MCQ, SAQ | LAQ, SAQ, MCQ, Viva voce | Practice of medicine |
| HomUG-Path M. 14.14 | KS | K | | Describe the Cardiac lesions of Rheumatic heart disease | C 1 | MK | Lecture | Viva voce, MCQ, SAQ | LAQ, SAQ, MCQ, Viva voce | |

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

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5.15. Diseases of kidney and lower urinary tract-

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

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

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
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| HOMUG-Path M.15.12 | KS | K | | Describe the morphology of each type of renal stones | C I | MK | Lecture | Viva
SAQ
MCQ | LAQ
SAQ
MCQ
Viva | |
| HOMUG-Path M.15.13 | KS | K | Urinary tract infections | Define the term "Acute pyelonephritis", "ureteritis", "Cystitis", "Urethritis" | C I | MK | Lecture | Viva
MCQ | SAQ, MCQ, Viva | |
| HOMUG-Path M.15.14 | KS | K | Renal Cell Carcinoma | Discuss the etiology of Renal Cell Carcinoma | C I | DK | Lecture | Viva voce, MCQ, SAQ | SAQ, MCQ, Viva voce | Practice of medicine, Surgery |
| HOMUG-Path M.15.15 | KS | K | | Describe the morphology of Renal Cell Carcinoma | C I | DK | Lecture | Viva voce, MCQ, SAQ | SAQ, MCQ, Viva voce | |
| HOMUG-Path M.15.16 | KS | K | Wilm's tumour | Describe the morphology of Wilm's tumour | C I | NK | Lecture | Viva voce, MCQ, SAQ | NA | Practice of medicine, Surgery |

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5.16. Diseases of male reproductive system-

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

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|----------------------|--------|-------------|--|------------------|----------|---------|--------------------|----|-------------------------------|
| | | | | | | | | F | S | |
| HOMUG-Path M. 16.9 | KS | KH | | Describe the morphology of Carcinoma of Prostate | C 2 | NK | Lecture | Viva voce, MCQ SAQ | NA | Practice of medicine, Surgery |
| HOMUG-Path M. 16.10 | KS | KH | Ca Prostate | Explain the spread of Carcinoma of Prostate | C2 | NK | Lecture | Viva MCQ SAQ | NA | |


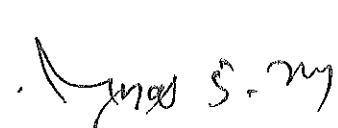
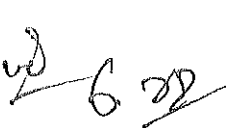

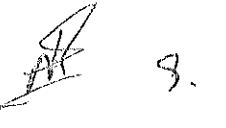

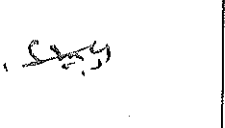

5.17. Diseases of the female genitalia and breast-

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

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

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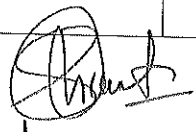
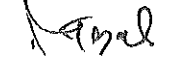
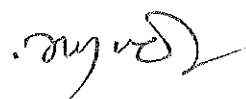
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| | | | | | | | | F | S | |
| | | | | | | | | SAQ, | Viva voce | |
| HOMUG-Path M. 17.13 | KS | K | Tumors of breast | Classify breast tumors as per WHO | C 1 | MK | Lecture | Viva MCQ SAQ | LAQ MCQ Viva SAQ | Surgery |
| HOMUG-Path M. 17.14 | KS | K | | Describe the etiology of Carcinoma Breast | C 1 | MK | Lecture | Viva voce, MCQ SAQ | LAQ SAQ, MCQ, Viva voce | Surgery |
| HOMUG-Path M. 17.15 | KS | KH | | Describe the morphologic features of Carcinoma Breast | C 2 | MK | Lecture | Viva voce, MCQ SAQ | LAQ SAQ, MCQ, Viva voce | |



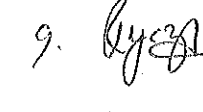
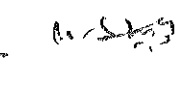

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5.18. Diseases of the skin and soft tissue-



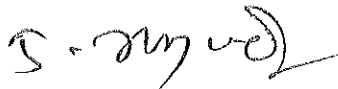
| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom / Guilbert | Priority | TL MM | Assessment | | Integration |
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| | | | | | | | | F | S | |
| HOMUG-Path M. 18.1 | KS | K | Tumors of skin | State the predisposing conditions of Squamous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


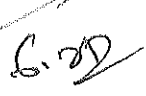


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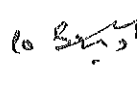
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5.19. Diseases of the musculo-skeletal system-

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

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5.20. Diseases of endocrine glands-

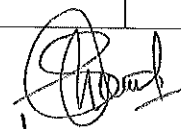

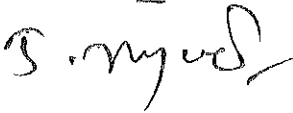
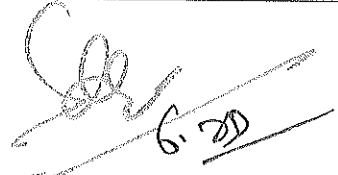
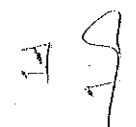



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| | | | | | | | | F | S | |
| HOMUG-Path M. 20.1 | KS | KH | Thyroid function tests | Interpret the abnormalities in a panel containing thyroid function tests | C 2 | MK | Lecture | Viva MC Q | OSPE MCQ, Viva SAQ | |
| HOMUG-Path M. 20.2 | KS | K | Goitre | Define the term "Goitre" | C 1 | MK | Lecture | Viva MC Q | SAQ, MCQ, Viva | |
| HOMUG-Path M. 20.3 | KS | K | | Describe the etio-pathogenesis of Goitre | C 2 | MK | Lecture | Viva MC Q SAQ | LAQ SAQ, MCQ, Viva | Practice of medicine |
| HOMUG-Path M. 20.4 | KS | K | | Classify Goitre on the basis of morphology | C 1 | MK | Lecture | Viva voce, MC Q SAQ | LAQ SAQ, MCQ, Viva voce | Practice of medicine |
| HOMUG-Path M. 20.5 | KS | KH | | Describe the morphology of Colloid Goitre | C 2 | MK | Lecture | Viva voce, MC Q SAQ | LAQ SAQ, MCQ, Viva voce | |
| HOMUG-Path M. 20.6 | KS | K | | Describe the morphology of Multi-nodular Goitre | C 1 | MK | Lecture | Viva MC Q SAQ | LAQ SAQ, MCQ, Viva | Practice of medicine |

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

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5.21. Diseases of the nervous system-

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

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5.22. Introduction to Microbiology-

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

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5.23. Bacterial structure, growth and nutrition-

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

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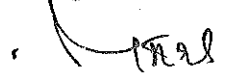
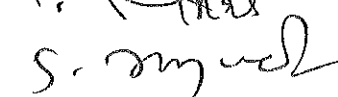

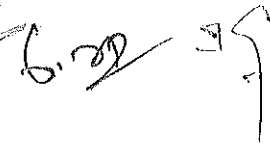

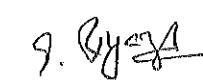

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| HomUG
-Path M.
23.8 | KS | KH | Bacterial growth and nutrition | Describe bacterial growth curve | C2 | DK | Lecture | SAQ
MCQ
Viva voce | SAQ
MCQ
Viva voce | |
| HomUG
-Path M
23.9 | KS | KH | | Describe the classification of bacteria based on energy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

5.24. Sterilization and disinfection-

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

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

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5.25. Staining, culture medias and methods-

| Sl. No. | Domain of Competency | Miller | Content | SLO | Bloom/
Guilbert | Priority | TL MM | Assessment | | Integration |
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| | | | | | | | | F | S | |
| HomUG-Path M 25.1 | KS | K | Staining methods | Discuss the various staining methods of bacteria | C1 | MK | Lecture | MCQ
Viva voce | MCQ
Viva Voce
SAQ | |
| HomUG-Path M 25.2 | KS | KH | | Discuss the steps of gram staining | C2 | MK | Lecture | MCQ
Viva voce | MCQ
Viva Voce
SAQ | |
| HomUG-Path M 25.3 | KS | KH | Classification of bacteria | Classify bacteria based on gram staining property | C1 | MK | Lecture | MCQ
Viva voce | SAQ
MCQ
Viva voce | |
| HomUG-Path M 25.4 | KS | K | Staining methods | Discuss differences between gram positive and gram negative bacteria | C1 | MK | Lecture | SAQ
MCQ
Viva voce | SAQ
MCQ
Viva voce | |
| HomUG-Path M 25.5 | KS | K | Staining methods | Discuss the steps of Acid fast staining | C1 | MK | Lecture | SAQ
MCQ
Viva voce | MCQ
Viva Voce
SAQ | |
| HomUG-Path M 25.6 | KS | K | Culture media | Describe types of culture media based on consistency with examples | C1 | MK | Lecture | SAQ
MCQ
Viva voce | LAQ
SAQ
MCQ
Viva voce | |
| HomUG-Path M 25.7 | KS | K | | Describe culture media based on constituents with examples | C1 | MK | Lecture | SAQ
MCQ
Viva voce | LAQ
SAQ
MCQ
Viva voce | |
| HomUG-Path M 25.8 | KS | K | | Describe culture media based on functional requirement with examples | C1 | MK | Lecture | SAQ
MCQ | LAQ
SAQ
MCQ | |

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

5.26. Infection and disease-

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

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

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5.27. Gram positive bacterias-

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

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

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

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

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5.28. Gram negative bacterias-

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

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

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

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|-----------------------|----|----|----------------------|---|----|----|---------|----------------------------|-----------------------------------|---|
| HomUG-Path M
28.26 | KS | KH | | Describe pathogenesis and clinical features of cholera | C2 | MK | Lecture | SAQ
MCQ
Viva
voce | LAQ
SAQ
MCQ
Viva
voce | Community
medicine,
Practice of
medicine |
| HomUG-Path M
28.27 | KS | KH | | Describe the laboratory diagnosis of Cholera | C1 | DK | Lecture | SAQ
MCQ | LAQ
SAQ
MCQ | |
| HomUG-Path M
28.28 | KS | KH | Pseudomonas | Describe the pathogenicity of pseudomonas aeruginosa | C1 | NK | Lecture | SAQ
MCQ | MCQ
Viva
voce | |
| HomUG-Path M
28.29 | KS | K | H.influenzae | State the diseases caused by H.influenzae | C1 | MK | Lecture | Viva
voce
MCQ | Viva
voce
MCQ | |
| HomUG-Path M
28.30 | KS | K | | Describe the laboratory diagnosis of H.influenzae | C1 | NK | Lecture | Not to be assessed | | |
| HomUG-Path M
28.31 | KS | K | Bordetella pertussis | Explain the morphology of Bordetella pertussis | C1 | MK | Lecture | Viva
voce
MCQ | Viva
voce
MCQ | |
| HomUG-Path M
28.32 | KS | KH | | Describe the clinical manifestation of B.pertussis | C2 | MK | Lecture | SAQ
MCQ | SAQ
MCQ
Viva
voce | Community
medicine
Practice of
medicine |
| HomUG-Path M
28.33 | KS | K | | Describe the laboratory diagnosis of Bordetella Pertussis | C1 | DK | Lecture | SAQ
MCQ
Viva
voce | SAQ
MCQ
Viva
voce | |

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|--------------------|----|----|---------------------|--|----|----|---------|-------------------|-------------------|--|
| HomUG-Path M 28.34 | KS | K | Brucella | Explain the morphology of Brucellae | C1 | DK | Lecture | Viva voce MCQ | Viva voce MCQ | |
| HomUG-Path M 28.35 | KS | KH | | Describe the pathogenesis of Brucellosis. | C2 | DK | Lecture | SAQ MCQ | MCQ Viva voce | |
| HomUG-Path M 28.36 | KS | K | | Describe the laboratory diagnosis of Brucellae | C1 | NK | Lecture | NA | NA | |
| HomUG-Path M 28.37 | KS | K | Helicobacter pylori | Describe the morphology of Helicobacter pylori | C1 | NK | Lecture | NA | NA | |
| HomUG-Path M 28.38 | KS | KH | | Describe the pathogenicity of Helicobacter pylori infection | C2 | DK | Lecture | SAQ MCQ Viva voce | SAQ MCQ Viva voce | |
| HomUG-Path M 28.39 | KS | K | | Describe the laboratory diagnosis of Helicobacter pylori infection | C1 | NK | Lecture | NA | NA | |
| HomUG-Path M 28.40 | KS | K | Rickettsiae | Discuss the human diseases caused by Rickettsiae group of organism | C1 | DK | Lecture | MCQ Viva voce | MCQ Viva voce | |
| HomUG-Path M 28.41 | KS | K | Chlamydia | Describe the diseases caused by chlamydia | C1 | MK | Lecture | Viva voce MCQ | Viva voce MCQ | |

5.29. Acid fast bacterias-

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

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LAQ | |
|------------------------|----|----|--|---|----|----|---------|----------------------------|-----------------------------------|---|
| HomUG-Path M.
29.8 | KS | KH | | Differentiate between Lepromatous and Tuberculoid leprosy | C2 | MK | Lecture | SAQ
MCQ
Viva
voce | SAQ
MCQ
LAQ
Viva
voce | Community medicine,
Practice of medicine |
| HomUG-Path M.
29.9 | KS | K | | Describe the laboratory diagnosis of Mycobacterium Leprae | C1 | DK | Lecture | SAQ
MCQ | SAQ
MCQ
Viva
voce | |
| HomUG-Path M.
29.10 | KS | KH | | Discuss Lepromin test | C2 | DK | Lecture | SAQ
MCQ | SAQ
MCQ
Viva
voce | |

5.30. Spirochaetes

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

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|---------------------|----|----|-----------------------------|---|----|----|---------|----------------------------------|--------------------------------|--|
| HomUG-Path M. 30.4 | KS | KH | | Describe the laboratory diagnosis for syphilis | C2 | DK | Lecture | SAQ
MCQ
Viva voce | SAQ
MCQ
LAQ
Viva voce | |
| HomUG-Path M. 30.5 | KS | K | Non venereal treponematoses | State the three distinct forms of non venereal trepanomatoses | C1 | NK | Lecture | Not to be assessed

NA | | |
| HomUG-Path M. 30.6 | KS | K | | Describe the features of Endemic syphilis | C1 | NK | Lecture | | | |
| HomUG-Path M. 30.7 | KS | K | | Describe the features of Yaws | C1 | NK | Lecture | | | |
| HomUG-Path M. 30.8 | KS | K | | Describe the features of Pinta | C1 | NK | Lecture | | | |
| HomUG-Path M. 30.9 | KS | K | Borrelia | Mention the types of Borrelia | C1 | NK | Lecture | NA | NA | |
| HomUG-Path M. 30.10 | KS | K | | State the diseases caused by Borrelia | C1 | NK | Lecture | NA | | |
| HomUG-Path M. 30.11 | KS | K | Leptospira | Explain the morphology of Leptospira | C1 | MK | Lecture | Viva voce
MCQ | Viva voce
MCQ | |
| HomUG-Path M. 30.12 | KS | KH | | Describe pathogenicity of Leptospira | C2 | MK | Lecture | SAQ
MCQ
Viva voce | SAQ
MCQ
Viva voce | |

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|---------------------|----|----|--|---|----|----|---------|---------------|----------------|--|
| HomUG-Path M. 30.13 | KS | KH | | Describe the clinical manifestations of Leptospirosis | C2 | MK | Lecture | MCQ Viva voce | MCQ Vi va voce | |
|---------------------|----|----|--|---|----|----|---------|---------------|----------------|--|

5.31. Fungi

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

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

5.32. Parasitology: Introduction to Parasitology, Protozoans

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

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

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|--------------------|----|----|--|--|----|----|---------|-------------------|-----------------------|--------------------|
| HomUG-Path M 32.17 | KS | K | Blood and Tissues – plasmodium species | Explain the life cycle of Plasmodium species | C1 | MK | Lecture | SAQ MCQ | LAQ SAQ MCQ | |
| HomUG-Path M 32.18 | KS | KH | | Describe the pathogenesis Plasmodium species | C2 | MK | Lecture | SAQ MCQ Viva voce | SAQ MCQ Viva voce | |
| HomUG-Path M 32.19 | KS | KH | | Describe the clinical features of malaria. | C2 | MK | Lecture | SAQ MCQ Viva voce | SAQ MCQ Viva voce | Community medicine |
| HomUG-Path M 32.20 | KS | K | | Explain the laboratory diagnosis of malaria | C1 | MK | Lecture | SAQ MCQ | LAQ SAQ MCQ Viva voce | |
| HomUG-Path M 32.21 | KS | K | Blood and Tissues – Toxoplasma gondii | Describe the Mode of transmission of Toxoplasma gondii | C1 | MK | Lecture | SAQ MCQ Viva voce | MCQ Viva voce | |
| HomUG-Path M 32.22 | KS | KH | | Describe the Pathogenesis of Toxoplasma gondii | C2 | NK | Lecture | | | |
| HomUG-Path M 32.23 | KS | KH | | Describe the Clinical features of human toxoplasmosis | C2 | DK | Lecture | SAQ MCQ Viva voce | MCQ Viva voce | |
| HomUG-Path M 32.24 | KS | K | | Describe the Lab diagnosis of human toxoplasmosis | C1 | NK | Lecture | | Not to be assessed | |
| HomUG-Path M 32.25 | KS | K | Blood and Tissues – | Describe the Trypanosoma brucei | C1 | NK | Lecture | SAQ MCQ | MCQ | |

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

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

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5.33. Helminths-

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

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

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

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

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Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

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|---|---------------------------|----|-----------------|-------|-------|------------------|------------------|
| | Nematodes
Brugiamalayi | - | of Brugiamalayi | | | Viva voce
MCQ | Viva voce
MCQ |
| 3 | Phent | 6. | 113 | 5. 20 | 7. 15 | 8. 15 | 9. 15 |

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

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5.34. Virology : Introduction-

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

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

5.35. DNA viruses-

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

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2016. 2017. 2018. 2019. 2020. 2021. 2022. 2023. 2024. 2025. 2026. 2027. 2028. 2029. 2030. 2031. 20

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

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

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| HomUG-Path M 35.24 | KS | K | | Describe the clinical features of hepatitis B virus infection | C1 | MK | Lecture | SAQ
MCQ | LAQ
SAQ
MCQ | Community medicine, Practice of medicine |
| HomUG-Path M 35.25 | KS | K | | Explain the laboratory diagnosis of Hepatitis B virus infection | C1 | MK | Lecture | SAQ
MCQ | LAQ
SAQ
MCQ | |

5.36. RNA viruses-

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

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

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| HomUG-Path M 36.18 | KS | KH | | Describe the clinical features of Respiratory syncytial virus infection | C2 | DK | Lecture | SAQ
MCQ | MCQ
Viva voce | |
| HomUG-Path M 36.19 | KS | K | RNA virus – Corona virus | Explain the morphology of Coronavirus | C1 | MK | Lecture | Viva voce
MCQ | Viva voce
MCQ | |
| HomUG-Path M 36.20 | KS | K | | State the types of corona virus infecting humans | C1 | MK | Lecture | Viva voce
MCQ | LAQ
SAQ
Viva voce
MCQ | |
| HomUG-Path M 36.21 | KS | K | | Describe the clinical features of Corona virus disease | C1 | MK | Lecture | SAQ
MCQ | LAQ
SAQ
MCQ
Viva voce | |
| HomUG-Path M 36.22 | KS | K | | Explain the laboratory diagnosis of Corona virus disease | C1 | MK | Lecture | SAQ
MCQ | LAQ
SAQ
MCQ | |
| HomUG-Path M 36.23 | KS | K | | Explain the morphology of Rabies virus | C1 | MK | Lecture | Viva voce
MCQ | Viva voce
MCQ | |
| HomUG-Path M 36.24 | KS | K | RNA virus – Rhabdovirus – Rabies virus | Describe the mode of transmission of Rabies | C1 | MK | Lecture | SAQ
MCQ | SAQ
MCQ
Viva voce | |
| HomUG-Path M. 36.25 | KS | K | | Describe the pathogenicity of Rabies | C1 | MK | Lecture | SAQ
MCQ | SAQ
MCQ
MCQ
Viva voce | |
| HomUG-Path M. 36.26 | KS | K | | Describe the clinical stages of Rabies | C1 | MK | Lecture | SAQ
MCQ | SAQ
MCQ
Viva voce | Community medicine |
| HomUG-Path M. 36.27 | KS | K | | Explain the laboratory diagnosis of human rabies | C1 | MK | Lecture | SAQ
MCQ | SAQ
MCQ
Viva voce | |

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

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

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

5.37. Homoeopathic correlation with microbiology-

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

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2016. 2017. 2018. 2019. 2020.

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

5.38. Practicals and demonstration-

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

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

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

Principle and technique of counting of Platelet | 1. Observe the experiment of counting of Platelet of blood sample
2. Calculate platelet count of blood sample | 1.Observe the procedure as per the methodology
2.Make entries into the pathology practical record | NA |
| HomU
G-Path
M38.13 | Urine examination:
Physical examination | Learner should be able to perform physical examination of urine with logical interpretation of results | Principle and technique of Physical examination of urine
Clinical significance of physical examination of urine | 1. Perform the physical examination of urine sample
2. Interpret the results | 1.Perform the procedure as per the methodology
2.Make entries into the pathology practical record | Viva voce
OSPE
Checklist |

3. 4. 5. 6. 7. 8. 9. 10.

| | | | | | | |
|--------------------------|--|--|--|---|--|--------------------------------|
| HomU
G-Path
M38.14 | Urine examination:
Chemical
examination | Learner should be able to perform chemical examination of given sample of urine with logical interpretation of results | Principle and technique of Chemical examination of urine

Clinical significance of chemical examination of urine | 1. Perform the chemical examination of urine for presence of glucose, proteins, ketones, bile derivatives and blood
2. Interpret the results | 1.Perform the procedure as per the methodology
2.Make entries into the pathology practical record | Viva voce
OSPE
Checklist |
| HomU
G-Path
M38.15 | Urine examination:
Microscopic
examination | Learner should be able to do microscopic examination of urine and interpret the results | Principle and technique of microscopic examination of urine

Clinical significance of microscopic examination of urine | 1. Perform the microscopical examination of urine sample
2. Interpret the results | 1.Perform the procedure as per the methodology
2.Make entries into the pathology practical record | Viva voce
OSPE
Checklist |
| HomU
G-Path
M38.16 | Examination of Faeces:Physical [Demonstration] | Learner should be able to describe the procedure of physical examination of faeces | Principle and technique of physical examination of faeces

Clinical significance of physical examination of faeces | 1. Observe the procedure of physical examination of faeces
2. Interpret the results of Physical Examination of Faeces | 1.Observe the procedure
2.Make entries into pathology practical record | NA |
| HomU
G-Path
M38.17 | Examination of Faeces:Microscopic for ova and protozoa [Demonstration] | Learner should be able to describe the procedure of microscopic examination of faeces and interpret the results | Principle and technique of microscopic examination of faeces

Clinical significance of microscopic examination of faeces | 1. Observe the procedure of microscopical examination of faeces for ova and protozoa
2. Interpret the results of microscopical Examination of Faeces | 1.Observe the procedure
2.Make entries into pathology practical record | NA |

| | | | | | | |
|------------------------------|---|--|--|---|---|--------------------------------|
| HomU
G-Path
M38.18 | Examination of
Faeces:Chemical
(occult blood)
[Demonstration] | Learner should be able
to describe the
procedure of chemical
examination of faeces
and interpret the results | Principle and
technique of chemical
examination of faeces

Clinical significance
of chemical
examination of faeces | 1. Observe the procedure of
chemical examination of
faeces

2. Interpret the results of
chemical Examination of
Faeces | 1.Observe the
procedure

2.Make entries into
pathology practical
record | NA |
| HomU
G-Path
M38.19 | Semen analysis
[Demonstration] | Learner should be able
to list the physical
characteristics and
microscopic features of
semen | Principle and
technique of Semen
analysis

Clinical significance
of semen analysis | 1. Observe the procedure of
examination of semen

2. Interpret the results of the
test | 1.Observe the
procedure

2.Make entries into
pathology practical
record | Not to be
assessed |
| HomU
G-Path
M38.20 | Microbiology: Use
of microscope | Learner should be
familiar with the
different parts of
microscope and their
uses | Parts of compound
microscope | 1. Identify the different parts
of microscope

2. Learn the function of each
part | 1. Will use and
familiarise with the
parts of microscope

2. Make entries into the
pathology practical
record | Viva voce
OSPE
Checklist |
| HomU
G-Path
M38.
21 | Microbiology:
Demonstration of
Methods of
sterilisation: Using
Hot air oven,
Autoclave, | Learner should be able
to explain the methods
of sterilization using
Hot air oven, Autoclave, | Agents of sterilization
Principles of dry heat
and moist heat in
process of sterilization | 1. Observe the method of
sterilization using hot air
oven

2. Observe the method of
sterilization using autoclave

3. Observe the method of
sterilization using flaming | 1.Observe the
procedure

2.Make entries into the
pathology practical
record | Viva voce
OSPE
Checklist |
| HomU
G-Path
M38.
22 | Microbiology:
Motility
preparation
[Demonstration] | Learner should be able
to explain the procedure
of motility preparation | Principle and
technique of Motility
preparation | 1. Observe the procedure of
Motility preparation

2. Interpret the results | 1.Observe the procedure

2.Make entries into and
pathology practical
record | Not to be
assessed |

| | | | | | | |
|------------------------------|--|--|--|---|---|--------------------------------|
| HomU
G-Path
M38.
23 | Microbiology:
Gram staining | Learner should be able to stain the given smear by gram stain and examine under microscope and interpret the results | Principle and technique of Gram staining | 1. Perform gram staining on the given sample
2. Observe under the microscope
3. Interpret the results. | 1.Perform the procedure
2.Make entries into pathology practical record | Viva voce
OSPE
Checklist |
| HomU
G-Path
M38.
24 | Microbiology:
Acid fast staining
[Demonstration] | Learner should be able to list the steps in Acid fast staining | Principle and technique of Acid fast staining | 1. To observe the procedure of Acid fast staining
2. To observe the slide for presence of acid fast bacteria | 1.Observe the procedure
2.Make entries into the pathology practical record | Not to be assessed |
| HomU
G-Path
M38.
25 | Common culture medias:
Preparation of common culture media
[Demonstration] | Learner should be able to list the ingredients of culture medias | Principle and technique of culture media preparation | Observe the steps of preparation of common culture media | 1.Observe the procedure
2.Make entries into the pathology practical record | Not to be assessed |

Spotters



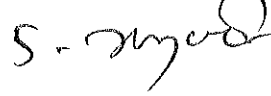
| | | | | | | |
|------------------------------|--|--|--|---|---|-------------------|
| HomU
G-Path
M38.
26 | Commonly used instruments / Equipments in pathology laboratory:
1.Haemoglobinometer
2.RBC pipette
3.WBC pipette
4.Neubauer's chamber
5.ESR tubes: Wintrobe
6.Urinometer | Awareness of application and method of use of instruments,equipments in laboratory | Enumerate the commonly used instruments equipments in laboratory and its use | <ul style="list-style-type: none"> Identify the instrument / Equipment Enumerate the purpose/ use/utility of the instrument / Equipment | 1.Identify,describe the parts and list the uses of the instrument / Equipment
2.Make entries into the pathology practical record | OSPE
Checklist |
|------------------------------|--|--|--|---|---|-------------------|


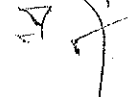
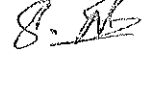

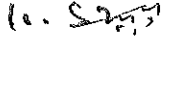
3. Bijaya

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| | | | | | | |
|------------------------------|---|--|--|---|--|--------------------------------|
| | 7.Hot air oven
8.Autoclave
9.Incubator
10.Petri dish
11.Centrifuge
12.Waterbath
13.Inoculating loop
etc. | | | | | |
| HomU
G-Path
M38.
27 | Interpretation of laboratory reports and its clinico pathological correlation
Complete
Haemogram
Urine reports
Liver function tests
Renal function tests
Thyroid function tests
Lipid profile
Diabetic profile
Serum cardiac biomarkers
Enzyme markers for necrosis
Serological tests, etc. | Learner should be able to interpret the values in the given laboratory reports | Significance of interpretation of laboratory tests for diagnosis | <ul style="list-style-type: none"> Identify whether laboratory report is normal or abnormal in relation to physiological values Identify the probable reason for abnormal values in laboratory report and its clinical significance | 1.Study the laboratory reports
2.Interpret the values in the laboratory reports
3.Make entries into the pathology practical record | Viva voce
OSPE
Checklist |
| HomU
G-Path
M38.
28 | Exposure to latest equipment:Auto-analyzer, Cell counter, ELISA reader etc.
[Demonstration] | Learner should be able to explain the utility of latest equipment | De novo topic | <ul style="list-style-type: none"> Identify the equipment Observe the functioning of the Equipment | 1.Observe the procedure
2.Make entries into the pathology practical record | Not to be assessed |

| | | | | | | |
|------------------------------|---|--|--|--|--|-------------------|
| HomU
G-Path
M38.
29 | Histopathology:
(a) Demonstration
of common slides
Any 15 | Learner should be able
to do identify the slide
and mention its
distinguishing features | Histopathological
changes of particular
condition. | <ul style="list-style-type: none"> Observe the histopathology slide Identify the distinguishing features of the given histopathology slide | 1. Identify the histopathology slide based on identification points.
2. Make entries into the pathology practical record | OSPE
Checklist |
| HomU
G-Path
M38.
30 | (b) Demonstration
of gross
pathological
specimens / models
Any 15 | Learner should be able
to identify the gross
specimen | Gross pathological
changes in specimen
as per General
pathology and
Systemic pathology
topics | <ul style="list-style-type: none"> Identify the specimen List three characteristic identification features of the specimen | 1. Identify the gross pathological specimen based on identification points.
2. Make entries into the pathology practical record | OSPE
Checklist |

3. 
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6.  7.  8.  9.  10. 

6. Teaching learning methods

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

Details of assessment

6.1 Overall Scheme of Assessment (Summative)

| Sr. No | Professional Course | Term I (1-6 Months) | | Term II (7-12 Months) | | |
|--------|-----------------------------|------------------------|---|-------------------------|------------------------|----------------------------------|
| 1 | Second Professional
BHMS | PA I (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | FUE (end of 12 months) | |
| | | 20 Marks Viva | 100 Marks Practical/ Viva
i) Viva voce -50 marks
ii) Practical – 50 marks | 20 Marks Viva | 200 marks theory | 200 marks
Practical+ Viva+ IA |

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

3. [Signature] 4. [Signature] 5. [Signature] 6. [Signature] 7. [Signature] 8. [Signature] 9. [Signature] 10. [Signature]

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

| Sr. No. | Course Code | Papers | Theory | Practical/
Clinical | Viva Voce | Internal
Assessment* | Grand Total |
|---------|--------------|--------|-------------|------------------------|-----------|--|-------------|
| 1 | HomUG-Path M | 02 | 200 marks * | 100 marks | 80 marks | 20 marks

(Marks of PA I
+ TT I + PA
II) | 400 marks |

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

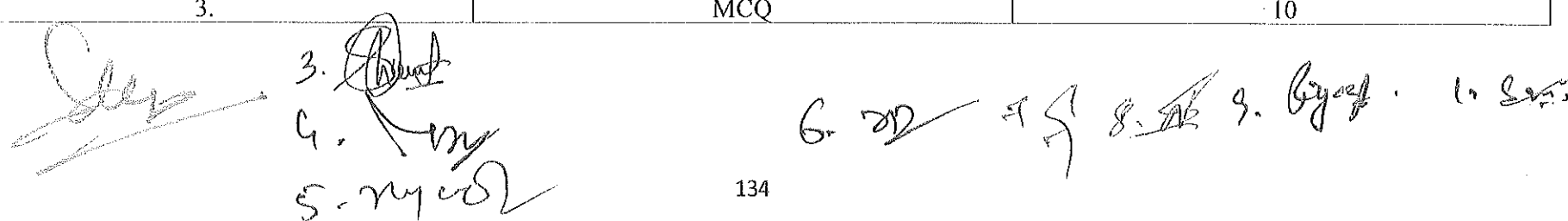
Marks of IA- (Marks of PA-I + Marks of TT + Marks of PA-2) / 140 X 20.

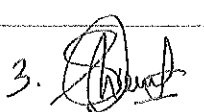
7.2 Paper Layout


Summative assessment (FUE):

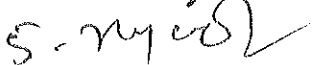
Theory- 200 marks


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





 3. 

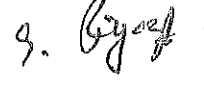
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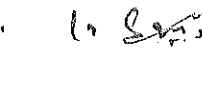
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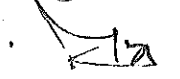
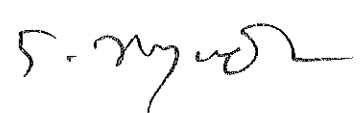
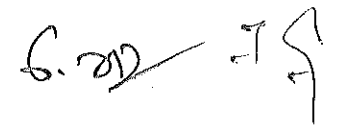
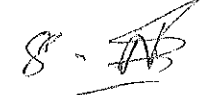
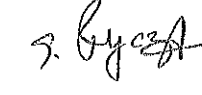
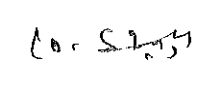
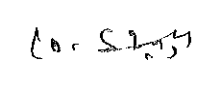
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7.3 Theme-wise distribution of questions for theory exam paper I

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

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6. 
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8. 
9. 
10. 

7.7 Question paper blue print Paper II

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

| PRACTICAL EXAM | | | | | |
|--|---|--|---|--------------------|-------------|
| 1. | Laboratory reports | | Marks | Total marks | Time |
| | Interpretation of laboratory reports and its clinico- pathological correlation: Complete Haemogram
Urine reports
Liver function tests
Renal function tests
Thyroid function tests
Lipid profile
Diabetic profile
Serum cardiac biomarkers
Enzyme markers for necrosis
Serological tests

Any one of the above | <ul style="list-style-type: none"> Identify whether laboratory report is normal or abnormal in relation to physiological values Discuss the probable reason for abnormal values in laboratory report and its clinical significance | <p style="text-align: center;">3</p> <p style="text-align: center;">7</p> | 10 marks | 10 mins |
| 2. | EXPERIMENT: | | | Total marks | Time |
| a.
b.
c.
d.
e.
f.
g.
h.
i. | Estimation of Haemoglobin %
WBC -Total count
RBC - Total count
Differential count
Bleeding time and Clotting time
Determination of Blood group
Physical examination of urine
Chemical examination of urine
Urine microscopy
Gram staining
Any one of the above | Procedural and Practical skills

Result and Discussion | <p style="text-align: center;">15</p> <p style="text-align: center;">10</p> | 25 marks | 30 minutes |

| | | | | | |
|----|---|--|---|---------------------------|---|
| 3. | Spotters (5):25 marks | | | | |
| | ANY FIVE SPOTTERS

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

8. OSPE STATIONS

Station # 01 (Unobserved Station)

For Organizer:

Topic Specification: Lab report interpretation

Subject Material: Clinical scenario and Laboratory report

For Candidate:

Marks: 10 Time Allowed:10 minutes.

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

Answer the following questions :

- 1) Identify whether laboratory report is normal or abnormal in relation to physiological values (02)
- 2) Discuss the probable reason for abnormal values in laboratory report and its clinical significance (03)

3. [Signature]
4. [Signature]
5. [Signature]

140 [Signature] [Signature] [Signature] [Signature] [Signature]

For Examiner:

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

STATION # 02 (UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Identification of Histopathological slide(5 nos)

SAMPLE MATERIAL:Histopathological slide

For Candidate:

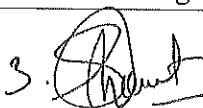

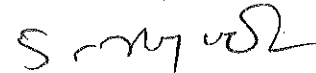
Max. Marks: 05 Time Allowed: 03minutes for each slide

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

- Identify the histopathology slide (2)
- List three features of the given histopathology slide (3)

For Examiner:

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

3. 
4. 
5. 

STATION # 03 (UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Identification of appliances: (2 nos)

SAMPLE MATERIAL: Appliances

For Candidate:

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

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

- Identify the spotter (1)
- Description of the appliance (2)
- Uses of the appliance (2)

For Examiner:

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

STATION # 04 (UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Gross specimens/models(2 nos)

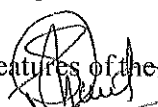


SAMPLE MATERIAL: Gross specimen /model




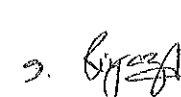
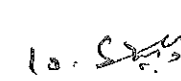
For Candidate:

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

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

- Identify the specimen (2)
- List three characteristic features of the specimen (3)

3. 
4. 
5. 

6. 
7. 
8. 
9. 
10. 

For Examiner:

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

STATION # 05(UNOBSERVED STATION)

For Organizer:

TOPIC SPECIFICATION: Spotter-disinfectant

SAMPLE MATERIAL: disinfectant

For Candidate:

Max. Marks: 05 Time Allowed: 03minutes.

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

- Identify the disinfectant (2)
- Enumerate the uses of the disinfectant (3)

For Examiner:

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

STATION # 06 (OBSERVED STATION)

For Organizer:

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

SAMPLE MATERIAL: Blood /Urine/Smeared slide

[Handwritten signatures and marks]

143

For Candidate:

Max.Marks: 25 Time Allowed: 30minutes.

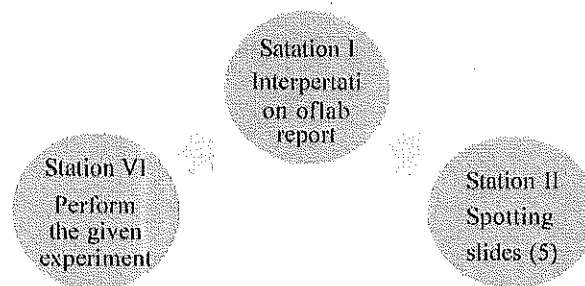
Task: Carefully perform the experiment given

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

For Examiner:

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

OSPE STATIONS



3. 4. 5. 6. 7. 8. 9. 10.

Subject: Pathology and Microbiology
Subject code: HomUG-Path-M
Year of Exam: 2027

Maximum marks:200
Theory: Paper 1- 100
Paper 2- 100

Station V
Spotter
disinfectant

Station IV
Spotter
specimen/
model(2)

Station III
Spotting
Appliances
(2)

144

3. Disinfectant

4. Specimen

5. Model

6. Spotting

7. Appliances

8. Disinfectant

9. Specimen

Solara



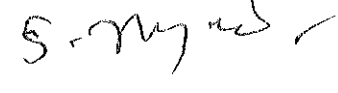


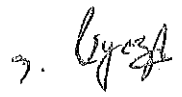

9. List of recommended text/reference books

Theory

1. Harsh Mohan (2023), *Textbook of Pathology* (9th Edition). Jaypee Publisher (CBME)
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2. Santosh Kumar Mondal , (2024) *Pathology Practicals With OSPE*, (2nd Edition), CBS Publishers. (CBME)
3. Anamika Vyas, Sheethal. S (2023), *Concise Workbook in Practical Microbiology*, Jaypee Publishers. (CBME)
4. Dr Baveja C P(2021), *Practical Microbiology for MBBS*, (5th Edition), ARYA Publications

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1. Preamble

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

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

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

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

2. Course outcomes

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

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

3. Learning objectives

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

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

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

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

4. Course content and its term-wise distribution

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

**Refer clause 5.4 and tables 5.4.1 - 5.4.5 for detailed content (topics breakup)*

5. Teaching hours

5.1. Gross division of teaching hours

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

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5.2. Teaching hours theory

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

5.3. Teaching hours Non-lecture

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

5.4. Distribution of teaching hours with breakup of each topic

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

Cardinal Manifestations and Presentation of Diseases with relevant investigations

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

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

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

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

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

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

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| Sr. No. | Topic | Topic breakup | Hours |
|--------------|------------------------|---|-----------|
| | | 40) <i>Bleeding diatheses: Bleeding & Thrombosis</i> : Definitions, applied anatomy & physiology of Haemostasis, aetiology of disorder of haemostasis, clinical presentation and history taking, clinical examination, laboratory evaluation. | |
| | | 41) <i>Interpretation of Peripheral Blood Smears</i> | |
| 8 | Psychological symptoms | 42) Causes of asthenia, anxiety, sadness, thought disorders and delusions, perceptual disorders and hallucinations and relevant investigations | 2 |
| Total | | | 35 |

5.4.2 Medical genetics:

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

5.4.3 Immunological factors in disease with concept of susceptibility:

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

7- 10- 11- 12- 13- 14- 15- 16- 17- 18- 19- 20- 21- 22- 23- 24- 25- 26- 27- 28- 29- 30- 31- 32- 33- 34- 35- 36- 37- 38- 39- 40- 41- 42- 43- 44- 45- 46- 47- 48- 49- 50- 51- 52- 53- 54- 55- 56- 57- 58- 59- 60- 61- 62- 63- 64- 65- 66- 67- 68- 69- 70- 71- 72- 73- 74- 75- 76- 77- 78- 79- 80- 81- 82- 83- 84- 85- 86- 87- 88- 89- 90- 91- 92- 93- 94- 95- 96- 97- 98- 99- 100- 101- 102- 103- 104- 105- 106- 107- 108- 109- 110- 111- 112- 113- 114- 115- 116- 117- 118- 119- 120- 121- 122- 123- 124- 125- 126- 127- 128- 129- 130- 131- 132- 133- 134- 135- 136- 137- 138- 139- 140- 141- 142- 143- 144- 145- 146- 147- 148- 149- 150- 151- 152- 153- 154- 155- 156- 157- 158- 159- 160- 161- 162- 163- 164- 165- 166- 167- 168- 169- 170- 171- 172- 173- 174- 175- 176- 177- 178- 179- 180- 181- 182- 183- 184- 185- 186- 187- 188- 189- 190- 191- 192- 193- 194- 195- 196- 197- 198- 199- 200- 201- 202- 203- 204- 205- 206- 207- 208- 209- 210- 211- 212- 213- 214- 215- 216- 217- 218- 219- 220- 221- 222- 223- 224- 225- 226- 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1520- 1521- 1522- 1523- 1524- 1525- 1526- 1527- 1528- 1529- 1530- 1531- 1532- 1533- 1534- 1535- 1536- 1537- 1538- 1539- 1540- 1541- 1542- 1543- 1544- 1545- 1546- 1547- 1548- 1549- 1550- 1551- 1552- 1553- 1554- 1555- 1556- 1557- 1558- 1559- 1560- 1561- 1562- 1563- 1564- 1565- 1566- 1567- 1568- 1569- 1570- 1571- 1572- 1573- 1574- 1575- 1576- 1577- 1578- 1579- 1580- 1581- 1582- 1583- 1584- 1585- 1586- 1587- 1588- 1589- 1590- 1591- 1592- 1593- 1594- 1595- 1596- 1597- 1598- 1599- 1600- 1601- 1602- 1603- 1604- 1605- 1606- 1607- 1608- 1609- 1610- 1611- 1612- 1613- 1614- 1615- 1616- 1617- 1618- 1619- 1620- 1621- 1622- 1623- 1624- 1625- 1626- 1627- 1628- 1629- 1630- 1631- 1632- 1633- 1634- 1635- 1636- 1637- 1638- 1639- 1640- 1641- 1642- 1643- 1644- 1645- 1646- 1647- 1648- 1649- 1650- 1651- 1652- 1653- 1654- 1655- 1656- 1657- 1658- 1659- 1660- 1661- 1662- 1663- 1664- 1665- 1666- 1667- 1668- 1669- 1670- 1671- 1672- 1673- 1674- 1675- 1676- 1677- 1678- 1679- 1680- 1681- 1682- 1683- 1684- 1685- 1686- 1687- 1688- 1689- 1690- 1691- 1692- 1693- 1694- 1695- 1696- 1697- 1698- 1699- 1700- 1701- 1702- 1703- 1704- 1705- 1706- 1707- 1708- 1709- 1710- 1711- 1712- 1713- 1714- 1715- 1716- 1717- 1718- 1719- 1720- 1721- 1722- 1723- 1724- 1725- 1726- 1727- 1728- 1729- 1730- 1731- 1732- 1733- 1734- 1735- 1736- 1737- 1738- 1739- 1740- 1741- 1742- 1743- 1744- 1745- 1746- 1747- 1748- 1749- 1750- 1751- 1752- 1753- 1754- 1755- 1756- 1757- 1758- 1759- 1760- 1761- 1762- 1763- 1764- 1765- 1766- 1767- 1768- 1769- 1770- 1771- 1772- 1773- 1774- 1775- 1776- 1777- 1778- 1779- 1780- 1781- 1782- 1783- 1784- 1785- 1786- 1787- 1788- 1789- 1790- 1791- 1792- 1793- 1794- 1795- 1796- 1797- 1798- 1799- 1800- 1801- 1802- 1803- 1804- 1805- 1806- 1807- 1808- 1809- 1810- 1811- 1812- 1813- 1814- 1815- 1816- 1817- 1818- 1819- 1820- 1821- 1822- 1823- 1824- 1825- 1826- 1827- 1828- 1829- 1830- 1831- 1832- 1833- 1834- 1835- 1836- 1837- 1838- 1839- 1840- 1841- 1842- 1843- 1844- 1845- 1846- 1847- 1848- 1849- 1850- 1851- 1852- 1853- 1854- 1855- 1856- 1857- 1858- 1859- 1860- 1861- 1862- 1863- 1864- 1865- 1866- 1867- 1868- 1869- 1870- 1871- 1872- 1873- 1874- 1875- 1876- 1877- 1878- 1879- 1880- 1881- 1882- 1883- 1884- 1885- 1886- 1887- 1888- 1889- 1890- 1891- 1892- 1893- 1894- 1895- 1896- 1897- 1898- 1899- 1900- 1901- 1902- 1903- 1904- 1905- 1906- 1907- 1908- 1909- 1910- 1911- 1912- 1913- 1914- 1915- 1916- 1917- 1918- 1919- 1920- 1921- 1922- 1923- 1924- 1925- 1926- 1927- 1928- 1929- 1930- 1931- 1932- 1933- 1934- 1935- 1936- 1937- 1938- 1939- 1940- 1941- 1942- 1943- 1944- 1945- 1946- 1947- 1948- 1949- 1950- 1951- 1952- 1953- 1954- 1955- 1956- 1957- 1958- 1959- 1960- 1961- 1962- 1963- 1964- 1965- 1966- 1967- 1968- 1969- 1970- 1971- 1972- 1973- 1974- 1975- 1976- 1977- 1978- 1979- 1980- 1981- 1982- 1983- 1984- 1985- 1986- 1987- 1988- 1989- 1990- 1991- 1992- 1993- 1994- 1995- 1996- 1997- 1998- 1999- 2000- 2001- 2002- 2003- 2004- 2005- 2006- 2007- 2008- 2009- 2010- 2011- 2012- 2013- 2014- 2015- 2016- 2017- 2018- 2019- 2020- 2021- 2022- 2023- 2024- 2025- 2026- 2027- 2028- 2029- 2030- 2031- 2032- 2033- 2034- 2035- 2036- 2037- 2038- 2039- 2040- 2041- 2042- 2043- 2044- 2045- 2046- 2047- 2048- 2049- 2050- 2051- 2052- 2053- 2054- 2055- 2056- 2057- 2058- 2059- 2060- 2061- 2062- 2063- 2064- 2065- 2066- 2067- 2068- 2069- 2070- 2071- 2072- 2073- 2074- 2075- 2076- 2077- 2078- 2079- 2080- 2081- 2082- 2083- 2084- 2085- 2086- 2087- 2088- 2089- 2090- 2091- 2092- 2093- 2094- 2095- 2096- 2097- 2098- 2099- 2100- 2101- 2102- 2103- 2104- 2105- 2106- 2107- 2108- 2109- 2110- 2111- 2112- 2113- 2114- 2115- 2116- 2117- 2118- 2119- 2120- 2121- 2122- 2123- 2124- 2125- 2126- 2127- 2128- 2129- 2130- 2131- 2132- 2133- 2134- 2135- 2136- 2137- 2138- 2139- 2140- 2141- 2142- 2143- 2144- 2145- 2146- 2147- 2148- 2149- 2150- 2151- 2152- 2153- 2154- 2155- 2156- 2157- 2158- 2159- 2160- 2161- 2162- 2163- 2164- 2165- 2166- 2167- 2168- 2169-

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26.

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

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

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

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

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10-5-2029
10-5-2029

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6. Content mapping (competencies tables)

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

6.1.1. Pain-

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

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

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

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

6.1.2. Fever-

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

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

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

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

6.1.3. Neurological Symptoms-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority - | T-L Methods | Assessment | | Integration |
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| HomU
G-PM
I.3.1 | K&S | K | Define the pathophysiology of neurological symptoms (e.g., weakness, numbness, tingling). | Explain the underlying mechanisms that lead to neurological symptoms. | C2 | MK | Lecture, Small group discussion | Structured Oral Examination, Tutorials, Assignments, MCQs | MCQs | Anatomy, Physiology, Neurology |
| HomU
G-PM
I.3.2 | | KH | Describe the neuroanatomical basis of common neurological symptoms. | Explain how specific neurological structures are involved in producing symptoms such as weakness or sensory changes. | C2 | MK | Lecture, Small group discussion | Structured Oral Examination, Tutorials, Assignments, MCQs | SAQ, MCQs | Anatomy, Physiology, Neurology |
| HomU
G-PM
I.3.3 | | | Discuss the pathophysiological processes underlying various neurological conditions. | Explain how different diseases and disorders affect the nervous system to produce specific symptoms. | C2 | MK | Lecture, Small group discussion | Structured Oral Examination, Tutorials, Assignments, MCQs | SAQ, MCQs | Physiology, Pathology |

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

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| HomU
G-PM
I.3.8 | | KH | Discuss the characteristic indications of various indicated drugs | List the PQRS symptoms of a drug in different Neurological symptoms | C1 | MK | Lecture, Small group discussion | Structured Oral Examination, Tutorials, Assignments, MCQs | SAQ, Viva voce | Materia medica |
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6.1.4. Circulatory and Respiratory Dysfunctions

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

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

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

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

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

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

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

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| HomU
G-PM
I.4.23 | | K | Define palpitations. | Define palpitations as the sensation of a rapid, irregular, or forceful heartbeat that may be felt in the chest, throat, or neck. | C1 | MK | Lecture, Small group discussion | Quizzes | SAQ | Cardiology, Internal Medicine |
| HomU
G-PM
I.4.24 | | KH | Describe the pathophysiology of palpitations. | Explain the mechanisms that can lead to palpitations, including cardiac arrhythmias, structural heart disease, and stimulant use. | C2 | MK | Lecture, Small group discussion | Assignments | SAQ, MCQs | Cardiology, Internal Medicine |
| HomU
G-PM
I.4.25 | | | Discuss the common causes of palpitations. | Explain the various conditions and factors that can cause palpitations, such as atrial fibrillation, ventricular tachycardia, anxiety, and caffeine intake. | C2 | MK | Lecture, Small group discussion | Tutorials, Assignments, MCQs | MCQs, Short-answer questions | Cardiology, Internal Medicine |

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

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| | | | on totality of symptoms | the totality of symptoms | | | | | | |
| HomUG-PM
I.4.30 | | KH | Explain the principles of case management in homoeopathy | Students should be able to discuss the principles of case management, including the importance of follow-up and potency selection | C5 | MK | Lecture, Group discussion | Quiz, Assignments | LAQ | Homoeopathic Materia Medica |

6.1.5. Abdominal/GIT Dysfunctions

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

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

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

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| HomU
G-PM
I.5.9 | HO | | Discuss the role of homoeopathic remedies in the management of dysphagia. | Explain how remedies such as Lachesis, Phosphorus, and Belladonna can be used to treat symptoms of dysphagia. | C2 | MK | Lecture, Small group discussion | Assignments | MCQs, Short-answer questions | Homoeopathic Materia Medica |
| HomU
G-PM
I.5.11 | | | Describe the pathophysiology of nausea and vomiting. | Explain how various triggers, such as chemical stimulation, sensory input, and central nervous system disorders, can lead to nausea and vomiting. | C2 | MK | Lecture, Small group discussion | Quizzes, Peer assessment | MCQs, Short-answer questions | Physiology, Pathology |
| HomU
G-PM
I.5.12 | | | Discuss the common causes of nausea and vomiting. | Explain how conditions such as gastroenteritis, motion sickness, and pregnancy can cause nausea and vomiting. | C2 | MK | Lecture, Small group discussion | Case studies | MCQs, Short-answer questions | Physiology, Pathology |

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

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

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

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| HomU
G-PM
I.5.23 | | | Describe the pathophysiology of constipation. | Explain how factors such as slow colonic transit, pelvic floor dysfunction, and lifestyle factors can contribute to constipation. | C2 | MK | Lecture, Small group discussion | Tutorials, Group projects | LAQ, SAQ | Physiology |
| HomU
G-PM
I.5.24 | | | Discuss the common causes of constipation. | Explain how factors such as inadequate dietary fiber, dehydration, sedentary lifestyle, and certain medications can cause constipation. | C2 | MK | Lecture, Small group discussion | Tutorials, Assignments | MCQs, Short-answer questions | Physiology |
| HomU
G-PM
I.5.25 | | | Identify the key symptoms and clinical features of constipation. | Describe how symptoms such as straining, lumpy or hard stools, and a feeling of incomplete evacuation can help diagnose constipation. | C2 | MK | Lecture, Small group discussion | MCQ, Assignments | MCQs, Short-answer questions | Clinical medicine |

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

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

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

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

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

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

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

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

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

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| HomU
G-PM
1.5.54 | | | Differentiate between transudative and exudative ascites | Define transudative and exudative ascites and the pathophysiological differences between them. | C1 | MK | Lecture, Small group discussion | Quizzes, Peer assessment | SAQ | Pathology |
| HomU
G-PM
1.5.55 | | | Discuss the classification of ascites based on the underlying cause | Explain the categorization of ascites as cirrhotic, cardiac, malignant, and tuberculous based on the underlying disease process. | C2 | MK | Lecture, Small group discussion | #NAME? | MCQs, Short-answer questions | Pathology |
| HomU
G-PM
1.5.56 | | | Describe the grading of ascites based on severity | Explain the use of imaging modalities, such as ultrasound, in grading ascites from mild to severe based on fluid accumulation. | C2 | MK | Lecture, Small group discussion | Problem-based learning | MCQs, Short-answer questions | Pathology, Surgery |
| HomU
G-PM
1.5.57 | | | Explain the role of ascitic fluid analysis in diagnosis | Describe the use of ascitic fluid analysis, including cell count, albumin gradient, and | C2 | MK | Lecture, Small group discussion | Presentations, Group projects | SAQ | Physiology, Laboratory Medicine |

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

6.1.6. Renal and Urinary Tract Dysfunctions

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

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

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

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

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

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

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

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

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6.1.7. Hematological alterations-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|----------------|----------------------|---------------|---|---|---------------------------------|----------|---------------------------|--------------------|----------|-----------------------|
| | | | | | | | | F | S | |
| HomUG-PM I.7.1 | K&S | K | Define the terminologies used. | Students should be able to define following hematological alterations with their characteristics | C1 | MK | Lecture, Group discussion | Quiz, Written test | MCQ, SAQ | Physiology, Pathology |
| 7.1a | | | | | | | | | | |
| 7.1a | | | | | | | | | | |
| 7.1a | | | | | | | | | | |
| 7.1a | | | | | | | | | | |
| HomUG-PM I.7.2 | K&S | KH | Identify the various risk factors that predispose individuals to the development of hematological alterations | Students should be able to discuss the factors that increase the likelihood of developing the above hematological alterations | C2 | MK | Lecture, Group discussion | Quiz, Written test | MCQ, SAQ | Physiology, Pathology |
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| HomU
G-PM
I.7.3 | | | Explain the underlying pathophysiological processes involved in the development of hematological alterations | Students should be able to explain the pathological mechanisms that lead to the following hematological disorders | C2 | MK | Lecture, Group discussion | Quiz, Assignments, Written test | MCQ, SAQ | Physiology, Pathology |
| 7.3a | | | | 1. Anemia, | | | | | | |
| 7.3a | | | | 2. Leukocytosis, | | | | | | |
| 7.3a | | | | 3. Leucopenia, | | | | | | |
| 7.3a | | | | 4. Bleeding diatheses | | | | | | |
| HomU
G-PM
I.7.4 | | | Discuss the common signs and symptoms associated with hematological alterations | Students should be able to describe the typical clinical manifestations observed in patients with following hematological disorders | C2 | MK | Lecture, Group discussion | Quiz, Assignments, Written test | MCQ, LAQ, SAQ | Pathology, Hematology |
| 7.4a | | | | 1. Anemia, | | | | | | |
| 7.4a | | | | 2. Leukocytosis, | | | | | | |
| 7.4a | | | | 3. Leucopenia, | | | | | | |
| 7.4a | | | | 4. Bleeding diatheses | | | | | | |

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

6.1.8. Psychological symptoms-

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

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

| | | | | | | | | | | |
|------------------------|--|----|---|---|----|----|----------------------------|--------------------|-----|------------------------|
| HomU
G-PM
1.8.10 | | KH | Explain the underlying physiological processes involved in the development of anxiety | Explain the physiological mechanisms that underlie the manifestation of anxiety | C2 | NK | Lecture , Group discussion | Quiz, Written test | SAQ | Physiology, Psyc |
| HomU
G-PM
1.8.11 | | K | Define the term "sadness" | Define sadness and its significance | C1 | MK | Lecture , Group discussion | Quiz, Written test | SAQ | Psychiatry, Psychology |
| HomU
G-PM
1.8.12 | | KH | Describe the various factors and conditions that can lead to sadness | List the factors that can contribute to the onset of sadness | C2 | MK | Lecture , Group discussion | Quiz, Written test | SAQ | Psychiatry, Psychology |
| HomU
G-PM
1.8.13 | | K | Define the term "disorders of thought" and explain its relevance | Define disorders of thought and understand their significance | C1 | MK | Lecture , Group discussion | Quiz, Written test | SAQ | Psychiatry, Psychology |
| HomU
G-PM
1.8.14 | | KH | Describe the various factors and conditions that can lead to disorders of thought | List the factors that can contribute to the onset of disorders of thought | C2 | MK | Lecture , Group discussion | Quiz, Written test | SAQ | Psychiatry, Psychology |
| HomU
G-PM
1.8.15 | | K | Define the term "disorders of perception" and explain its relevance | Define disorders of perception and their significance | C1 | MK | Lecture , Group discussion | Quiz, Written test | SAQ | Psychiatry, Psychology |

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

6.2.1. Introduction and primary & secondary immunodeficiency states-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|-----------------|----------------------|---------------|--|--|---------------------------------|----------|-------------------------------|----------------------------------|----------|-------------------------------------|
| | | | | | | | | F | S | |
| HomU G-PM I.9.1 | K&S | K | Explanation of primary and secondary immunodeficiency states | Understanding the difference between primary and secondary immunodeficiency | C1 | MK | Lecture, Discussion | Quizzes, Written test | SAQ | Physiology, Pathology, Microbiology |
| HomU G-PM I.9.2 | | | Overview of common genetic and acquired causes | Recognition of common primary immunodeficiency disorders | C2 | MK | Cases, Group work | Quizzes, Written test | MCQ, SAQ | Pathology, Microbiology |
| HomU G-PM I.9.3 | | KH | Description of clinical signs and symptoms | Identification of clinical features suggestive of immunodeficiency | C2 | MK | Group Discussion, Assignments | Quizzes, Written test, Tutorials | MCQ, SAQ | Pathology, Microbiology |
| HomU G-PM I.9.4 | | | Description of therapeutic interventions and preventive measures | Demonstration of appropriate management plans for immunodeficiency disorders | C3 | DK | Debates | Tutorials | SAQ | Pathology, Microbiology |

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

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|-----------------|----------------------|---------------|--|--|---------------------------------|----------|---------------------|------------------|-----|-------------------------|
| | | | | | | | | F | S | |
| HomUG-PM I.10.1 | K&S | K | Explanation of hypersensitivity reaction types | Understanding the classification and mechanisms of hypersensitivity reactions | C1 | MK | Lecture, Discussion | MCQ | SAQ | Pathology, Microbiology |
| 01a | | | | Type I hypersensitivity reactions | | | | | | |
| 01b | | | | Type II hypersensitivity reactions | | | | | | |
| 01c | | | | Type III hypersensitivity reactions | | | | | | |
| 01d | | | | Type IV hypersensitivity reactions | | | | | | |
| HomUG-PM I.10.2 | K&S | K | Overview of common allergens and mediators such as IgE, histamine, and cytokines | Recognition of allergens and mediators associated with type I hypersensitivity | C2 | MK | Group discussion | Assignments, MCQ | SAQ | Pathology, Microbiology |
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| HomU
G-PM
I.10.3 | | KH | Explanation of IgE-mediated mast cell degranulation | Understanding the sequence of events leading to type I hypersensitivity reactions | C2 | NK | Lecture, Group Discussion | Assignments, MCQ | SAQ | Physiology, Pathology |
| HomU
G-PM
I.10.4 | | | Description of allergic rhinitis, asthma, anaphylaxis, and atopic dermatitis | Identification of clinical features suggestive of type I hypersensitivity | C2 | MK | Lectures, Group discussion | MCQ | SAQ, Bedside examination | Physiology, Pathology, Clinical medicine |
| HomU
G-PM
I.10.5 | | | Explanation of skin prick tests and serum IgE assays | Application of diagnostic strategies for type I hypersensitivity assessment | C2 | DK | Debates | Tutorials | SAQ | Physiology, Pathology, Clinical medicine |
| HomU
G-PM
I.10.6 | | K | Overview of common antigens and antibodies such as blood group antigens and autoantibodies | Identify common antigens and antibodies involved in type II hypersensitivity reactions | C1 | MK | Lecture | Assignments, MCQ | SAQ, Viva voce | Pathology, Microbiology |
| HomU
G-PM
I.10.7 | | KH | Explanation of antibody-mediated cell destruction and complement activation | Understanding the sequence of events leading to type II hypersensitivity reactions | C2 | MK | Lecture | Assignments, MCQ | SAQ | Physiology, Pathology |

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

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

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

6.2.3. Autoimmune Diseases-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|--------------------|----------------------|---------------|--|--|---------------------------------|----------|---------------------|------------------|----------------|--|
| | | | | | | | | F | S | |
| HomUG-PM
I.11.1 | K&S | K | Explanation of autoimmune disease etiology and pathogenesis | Understanding the basics of autoimmune diseases and their mechanisms | C1 | MK | Lecture, Discussion | MCQ | SAQ | Pathology, Microbiology |
| HomUG-PM
I.11.2 | | | Overview of common autoimmune disorders such as rheumatoid arthritis, systemic lupus erythematosus, and multiple sclerosis | Recognition of autoimmune diseases and their clinical presentations | C1 | MK | Lecture, Discussion | Assignments, MCQ | SAQ, Viva voce | Pathology, Microbiology, Clinical medicine |

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

6.2.4. HIV Disease-

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

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

6.2.6. Homoeopathic relation of immunity and susceptibility-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|-----------------|----------------------|---------------|---|--|---------------------------------|----------|--|---------------------------------------|--------------------------|-----------------------------|
| | | | | | | | | F | S | |
| HomUG-PM I.14.1 | K&S | K | Overview of factors such as genetic predisposition, miasmatic influence, and constitutional characteristics | Recognition of factors influencing individual's susceptibility according to homeopathic principles | C2 | MK | Lecture, Group Discussion | Case presentations, MCQ | SAQ, Viva voce | Organon and Hom. Philosophy |
| HomUG-PM I.14.3 | | KH | Description of the individualized approach in homeopathy | Identification of the importance of individualization in homeopathic treatment based on susceptibility | C2 | MK | Lectures, Case-based learning | Quiz competitions, Tutorials | SAQ, Bedside examination | Organon and Hom. Philosophy |
| HomUG-PM I.14.4 | | | Explanation of homeopathic remedies and constitutional treatment for improving vitality | Explain the role of homeopathic treatment strategies in enhancing immunity | C2 | DK | Problem-solving scenarios, Group discussions | Case presentation, Guided discussions | Viva voce | Organon and Hom. Philosophy |

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6.2.5. Transplants and graft rejection-

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

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

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6.3. Competency tables for medical genetics – an introduction

6.3.1. Introduction-

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

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

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6.3.2. Cytogenetics-

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

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

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6.3.3. Down's Syndrome-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|------------------------|----------------------|---------------|---|--|---------------------------------|----------|----------------------|------------------------------|----------------|------------------------|
| | | | | | | | | F | S | |
| HomU
G-PM
I.17.1 | K&S | K | Explanation of Down's Syndrome, its causes, and characteristics | Understanding the definition and basic features of Down's Syndrome | C1 | MK | Lecture, Discussion | Quizzes, Class participation | SAQ | Pathology |
| HomU
G-PM
I.17.2 | | KH | Overview of trisomy 21 and the genetic mechanisms leading to Down's Syndrome | Describe the genetic basis of Down's Syndrome | C2 | MK | Lecture, Discussion | MCQ, Assignemnts | SAQ, Viva voce | Pathology |
| HomU
G-PM
I.17.3 | | Knows how | Description of physical characteristics, developmental delays, and medical issues associated with Down's Syndrome | Identification of clinical features suggestive of Down's Syndrome | C3 | MK | Lecture, Assignments | Assignments, MCQ | SAQ, MCQ | Pathology, Paediatrics |

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

6.3.4. Turner's Syndrome-

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

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

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

6.3.5. Klinefelter's Syndrome-

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

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

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6.3.6. Cystic Fibrosis-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|------------------|----------------------|---------------|--|--|---------------------------------|----------|----------------------|------------------------------|----------------|----------------------------------|
| | | | | | | | | F | S | |
| HomU G-PM I.20.1 | K&S | K | Explanation of CF, its causes, and characteristics | Understanding the definition and basic features of CF | C1 | MK | Lecture, Discussion | Quizzes, Class participation | SAQ | Pathology |
| HomU G-PM I.20.2 | | | Overview of mutations in the CFTR gene and their effects on chloride transport | Describe the genetic basis of CF | C1 | MK | Lecture, Discussion | MCQ, Assignments | SAQ, Viva voce | Pathology |
| HomU G-PM I.20.3 | | KH | Description of respiratory, digestive, and other symptoms associated with CF | Identification of clinical features suggestive of CF | C2 | MK | Lecture, Assignments | Assignments, MCQ | SAQ, MCQ | Pathology, Paediatrics |
| HomU G-PM I.20.4 | | | Explanation of the mechanisms leading to mucus buildup and organ damage in CF | Understanding the pathophysiological processes underlying CF | C2 | MK | Workshops | MCQ, Assignments | SAQ | Pathology, ObG, PSM, Paediatrics |

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

6.3.7. Huntington's disease-

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

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

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6.3.8. Marfan's syndrome-

| Sl. No. | Domain of Competency | Millers Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|------------------|----------------------|---------------|---|---|---------------------------------|----------|----------------------|------------------------------|----------------|----------------------------------|
| | | | | | | | | F | S | |
| HomU G-PM I.22.1 | K&S | K | Explanation of Marfan Syndrome, its causes, and characteristics | Understanding the definition and basic features of Marfan Syndrome | C1 | MK | Lecture, Discussion | Quizzes, Class participation | SAQ | Pathology |
| HomU G-PM I.22.2 | | | Overview of mutations in the FBN1 gene and their effects on connective tissue | Describe the genetic basis of Marfan Syndrome | C1 | MK | Lecture, Discussion | MCQ, Assignments | SAQ, Viva voce | Pathology |
| HomU G-PM I.22.3 | | KH | Description of skeletal, cardiovascular, and ocular manifestations associated with Marfan Syndrome | Identification of clinical features suggestive of Marfan Syndrome | C2 | MK | Lecture, Assignments | Assignments, MCQ | SAQ, MCQ | Pathology, Paediatrics |
| HomU G-PM I.22.4 | | | Explanation of the mechanisms leading to connective tissue abnormalities and organ dysfunction in Marfan Syndrome | Understanding the pathophysiological processes underlying Marfan Syndrome | C2 | MK | Workshops | MCQ, Assignments | SAQ | Pathology, ObG, PSM, Paediatrics |

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

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6.3.9. Polycystic kidney disease-

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

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

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

6.3.10. Neoplasia-

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

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

9. 14/07/2029

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

6.4. Competency Tables for Infectious Diseases and Tropical Diseases

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

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

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|------------------------|-----|---|--|---|----|----|--|---|-------------------------------|--|
| HomUG
-PM
1.25.2 | K&S | K | Varicella-zoster virus (VZV) infection | Summarize the treatment and management options for HSV Infections | C2 | MK | Lecture, Case Based | | | Organon |
| | | | | Enumerate the indications of homoeopathic medicines for the HSV Infections | C1 | MK | Lecture, Case Based | | | Materia Medica |
| | | | | Describe the strategies to prevent HSV Infections transmission | C2 | MK | Lecture, Case Based | | | Community Medicine |
| | | K | Varicella-zoster virus (VZV) infection | Define Varicella-zoster virus infection (VZV) | C1 | MK | Lecture, Multimedia presentation, Case Based | MCQ, Quiz, Case Based, Morphology Chart, Viva | LQ, SQ, MCQ, Case Based, Viva | Pathology, Community Medicine, Pediatrics, Dermatology |
| | | | | Discuss etiopathogenesis for Varicella-zoster virus (VZV) infection | C2 | MK | Lecture, Case Based | | | |
| | | | | Identify the epidemiology dimension of Varicella-zoster virus (VZV) infection | C2 | MK | Lecture, field visit | | | Community Medicine |

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

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

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

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

Co-Supervisor
S. S. S.

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

5-5-25
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|--|--|----|--|--|----|----|---------------------|--|--|---------------------|
| | | KH | | State the investigations to be done for the patient suffering from Poliovirus Infections | C1 | DK | Lecture, Case Based | | | Pathology |
| | | | | Enumerate the diagnostic features for Poliovirus Infections | C1 | DK | Lecture, Case Based | | | |
| | | | | Describe the differential diagnosis of Poliovirus Infections | C2 | DK | Lecture, Case Based | | | |
| | | | | Describe the potential complications of Poliovirus Infections | C2 | DK | Lecture, Case Based | | | |
| | | | | Discuss the prognosis of Poliovirus Infections | C2 | DK | Lecture, Case Based | | | |
| | | | | Summarize the treatment and management options for Poliovirus Infections | C2 | DK | Lecture, Case Based | | | Organon, Immunology |

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

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

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

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|--|--|----|--|---|----|----|---------------------|--|--|--------------------------------|
| | | KH | | Enumerate the diagnostic features for Mumps | C1 | MK | Lecture, Case Based | | | |
| | | K | | Describe the potential complications of Mumps | C2 | MK | Lecture, Case Based | | | |
| | | KH | | Describe the differential diagnosis of Mumps | C2 | MK | Lecture, Case Based | | | |
| | | | | Discuss the prognosis of Mumps | C2 | MK | Lecture, Case Based | | | |
| | | | | Summarize the treatment and management options for Measles | C2 | MK | Lecture, Case Based | | | Organon, Immunology |
| | | K | | Enumerate the indications of homoeopathic medicines for the Mumps | C1 | MK | Lecture, Case Based | | | Materia Medica |
| | | K | | Describe the strategies to prevent Mumps | C1 | MK | Lecture, Case Based | | | Community Medicine, Immunology |

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

| | | | | | | | | | | | | | | |
|------------------|-----|----|------------------------|---|--|----|---------------------------------|-----------------|-------------|--|---------------------|----------------|--------------------------------|----------------------|
| | | | | spectrum of Rabies | | | | | | | | | | |
| | | K | | Describe the potential complications of Rabies | C2 | DK | Lecture | | | | Organon, Immunology | | | |
| | | KH | | Describe the differential diagnosis of Rabies | C2 | DK | Lecture | | | | | Materia Medica | | |
| | | | | Discuss the prognosis of Rabies | C2 | DK | Lecture | | | | | | Community Medicine, Immunology | |
| | | | | Summarize the treatment and management options for Rabies | C2 | DK | Lecture | | | | | | | Pathology, Virology, |
| | | | | K | Enumerate the indications of homoeopathic medicines for the Rabies | C1 | DK | | | | | | | |
| | | K | | Describe the strategies to prevent Rabies | C1 | DK | Lecture | | | | | | | |
| HomUG -PM 1.25.8 | K&S | K | Dengue Virus Infection | Define Dengue | C1 | MK | Lecture, Multimedia presentatio | MCQ, Quiz, Case | LQ, SQ, MCQ | | | | | |

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6-9
10/11/25

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Maximum marks: NA
Theory: NA

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

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

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

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|--|--|----|---|----|----|---------|--|--|--------------------|
| | | KH | Enumerate the diagnostic features for different spectrum of JEV infection | C1 | NK | Lecture | | | |
| | | K | Describe the potential complications of JEV infection | C2 | NK | Lecture | | | |
| | | KH | Describe the differential diagnosis of JEV infection | C2 | NK | Lecture | | | |
| | | | Discuss the prognosis of JEV infection | C2 | NK | Lecture | | | |
| | | | Summarize the treatment and management options for JEV infection | C2 | NK | Lecture | | | Organon |
| | | K | Enumerate the indications of homoeopathic medicines for the JEV infection | C1 | NK | Lecture | | | Materia Medica |
| | | | Describe the strategies to prevent JEV infection | C1 | NK | Lecture | | | Community Medicine |

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9/8/2029

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

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| | | | | | | | | | |
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| | | | from BIRD FLU infection | | | | | | |
| | | KH | Enumerate the diagnostic features for different spectrum of BIRD FLU infection | C1 | NK | Lecture | | | |
| | | K | Describe the potential complications of BIRD FLU infection | C2 | NK | Lecture | | | |
| | | KH | Describe the differential diagnosis of BIRD FLU infection | C2 | NK | Lecture | | | |
| | | | Discuss the prognosis of BIRD FLU infection | C2 | NK | Lecture | | | |
| | | | Summarize the treatment and management options for BIRD FLU infection | C2 | NK | Lecture | | | Organon |

9.8.2029 10.5.2029

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

10.5.2024
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| | | | | | | | | | |
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| | | | Explain how
H1N1 Infections
spreads from
person to person | C2 | MK | Lecture,
field visit | | | Community
Medicine |
| | | | Describe the
clinical
spectrum of
Influenza A
H1N1 virus
Infection | C2 | MK | Lecture,
Case Based | | | |
| | | | State the
investigations to
be done for the
patient suffering
from Influenza A
H1N1 virus
Infection | C1 | MK | Lecture,
Case Based | | | Pathology |
| | K | | Enumerate the
diagnostic
features for
different
spectrum of
Influenza A
H1N1 virus
Infection | C1 | MK | Lecture,
Case Based | | | |
| | K | | Describe the
potential
complications of
Influenza A
H1N1 virus
Infection | C2 | MK | Lecture,
Case Based | | | |

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

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Maximum marks: NA
Theory: NA

Dr. J. H. Smith
600 S. 1st St.

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

6-2-5-09 Vaidya

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9. ~~By~~ 10. ~~Sept~~

Maximum marks: NA
Theory: NA

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

| | | | | | | | | | | |
|-------------------|-----|---|------------------------------------|--|----|----|----------------------------------|-----------------|---------------|---|
| | | K | | COVID 19 Virus Infection | | | | | | |
| | | | | Summarize the treatment and management options for COVID 19 Virus Infection | C2 | MK | Lecture, Case Based | | | |
| | | | | Enumerate the indications of homoeopathic medicines for the COVID 19 Virus Infection | C1 | MK | Lecture, Case Based | | | |
| | | | | Describe the strategies to prevent COVID 19 Virus Infection | C1 | MK | Lecture, Case Based | | | |
| HomUG -PM 1.25.14 | K&S | K | Yellow Fever virus [YFV] Infection | Define Yellow Fever virus [YFV] Infection | C1 | NK | Lecture, Multimedia presentation | MCQ, Quiz, Viva | SQ, MCQ, Viva | Pathology, Virology, Community Medicine |
| | | | | Discuss etiopathogenesis for Yellow Fever virus [YFV] Infection | C2 | NK | Lecture, Case Based | | | |

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

6. 10. 2029
9. 10. 2029

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

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

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

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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| | | KH | | Describe the differential diagnosis of Smallpox (variola) poxvirus infection - | C2 | NK | Lecture | | | | |
| | | Discuss the prognosis of Smallpox (variola) poxvirus infection - | | C2 | NK | Lecture | | | | | |
| | | Summarize the treatment and management options for Smallpox (variola) poxvirus infection - | | C2 | NK | Lecture | Organon | | | | |
| | | K | | Enumerate the indications of homoeopathic medicines for the different stages related to Smallpox (variola) poxvirus infection - | C1 | NK | Lecture | | | | Materia Medica |
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| | | | | Describe the strategies to prevent Smallpox (variola) poxvirus infection | C1 | NK | Lecture | | | Community Medicine |
| HomUG -PM
1.25.16 | K&S | K | HIV Infection | Define the terms "HIV Infection" and "AIDS Syndrome" | C1 | MK | Lecture, Multimedia presentation, Case based, Assignment - Literature Review | MCQ, Quiz, Case based, Chart, Model, Viva | LQ, SQ, MCQ, Case Based, Viva | Pathology, Virology, Community Medicine |
| | | | | Discuss etiopathogenesis for HIV Infection | C2 | MK | Lecture, Case Based | | | |
| | | | | Identify the epidemiology dimension of HIV Infection | C2 | MK | Lecture, field visit | | | Community Medicine |
| | | | | Explain how HIV Infections spreads from person to person | C2 | MK | Lecture, field visit | | | Community Medicine |
| | | | | Describe the different clinical spectrum of HIV Infection | C2 | MK | Lecture, Case Based | | | |

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

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

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| | | | State the investigations to be done for the patient suffering from clinical spectrum of Zika virus infection | C1 | NK | Lecture | | | Pathology |
| | | KH | Enumerate the diagnostic features for Zika virus infection | C1 | NK | Lecture | | | |
| | | K | Describe the potential complications of Zika virus infection | C2 | NK | Lecture | | | |
| | | KH | Describe the differential diagnosis of Zika virus infection | C2 | NK | Lecture | | | |
| | | | Discuss the prognosis of Zika virus infection | C2 | NK | Lecture | | | |
| | | | Summarize the treatment and management options for Zika virus infection | C2 | NK | Lecture | | | Organon |

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

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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| | | | State the investigations to be done for the patient suffering from different clinical spectrum of Rickettsial infection | C1 | NK | Lecture | | | Pathology |
| | | KH | Enumerate the diagnostic features for different spectrum of Rickettsial infection | C1 | NK | Lecture | | | |
| | | K | Describe the potential complications of Rickettsial infection | C2 | NK | Lecture | | | |
| | | KH | Describe the differential diagnosis of Rickettsial infection | C2 | NK | Lecture | | | |
| | | | Discuss the prognosis of Rickettsial infection | C2 | NK | Lecture | | | |

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10. Sept. 1915

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

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

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
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|-------------------------|-----|---|-----------------------------|--|----|----|---|---|---|---|
| HomUG
-PM
I.25.20 | K&S | K | Streptococcal
infections | illness caused by
S. aureus
infection | | | | MCQ,
Quiz, Case
Based,
Morphology Chart,
Viva | SQ,
MCQ
, Case
Based
, Viva | |
| | | | | Enumerate the
indications of
homoeopathic
medicines for the
common clinical
illness caused by
S. aureus
infection | C1 | DK | Lecture,
Case Based | | | Materia
Medica |
| | | | | Describe the
strategies to
prevent common
clinical illness
caused by S.
aureus infection | C1 | DK | Lecture,
Case Based | | | Community
Medicine |
| | | | | Define
Streptococcal
infections | C1 | DK | Lecture,
Multimedia
presentation, Case
Based | | | Pathology,
Bacteriology
Community
Medicine |
| | | | | Discuss
etiopathogenesis
for Streptococcal
infections | C2 | DK | Lecture,
Case Based | | | |
| | | | | Identify the
epidemiology
dimension of
Streptococcal
infections | C2 | DK | Lecture,
field visit | | | Community
Medicine |

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

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

1. Syed 10.5.2029

[Handwritten signatures and marks]

| | | | | | | | | | | |
|-------------------|-----|---|---------------|---|----|----|--|-----------------------------|-------------------------------|---|
| | | K | | Enumerate the indications of homoeopathic medicines for the common clinical illness caused by Streptococcal infection | C1 | DK | Lecture, Case Based | | | Materia Medica |
| | | | | Describe the strategies to prevent common clinical illness caused by Streptococcal infection | C1 | DK | Lecture, Case Based | | | Community Medicine |
| HomUG -PM 1.25.21 | K&S | K | Typhoid Fever | Define Typhoid Fever | C1 | MK | Lecture, Multimedia presentation, Case based, Assignment - Literature Review | MCQ, Quiz, Case based, Viva | LQ, SQ, MCQ, Case Based, Viva | Pathology, Bacteriology, Community Medicine |
| | | | | Discuss etiopathogenesis for Typhoid Fever | C2 | MK | Lecture, Case Based | | | |
| | | | | Identify the epidemiology dimension of Typhoid Fever | C2 | MK | Lecture, field visit | | | Community Medicine |

10-2-24
2. 8/2/24

3. 8/2/24
4. 8/2/24
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6. 8/2/24
7. 8/2/24
8. 8/2/24
9. 8/2/24
10. 8/2/24

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

144 is 144

[Handwritten signatures and marks]

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|----------------------|-----|---|-----------------------------|---|----|----|--|-----------------------------|---------------------------|---|
| | | K | | Summarize the treatment and management options for Typhoid Fever | C2 | MK | Lecture, Case Based | | | Organon |
| | | | | Enumerate the indications of homoeopathic medicines for Typhoid Fever | C1 | MK | Lecture, Case Based | | | Materia Medica |
| | | | | Describe the strategies to prevent Typhoid Fever | C1 | MK | Lecture, Case Based | | | Community Medicine |
| HomUG -PM
1.25.22 | K&S | K | Acute Viral Gastroenteritis | Define Acute Viral Gastroenteritis | C1 | MK | Lecture, Multimedia presentation, Case based, Assignment - Literature Review | MCQ, Quiz, Case based, Viva | SQ, MCQ, Case Based, Viva | Pathology, Bacteriology, Community Medicine |
| | | | | Discuss etiopathogenesis for Acute Viral Gastroenteritis | C2 | MK | Lecture, Case Based | | | |
| | | | | Identify the epidemiology dimension of Acute Viral Gastroenteritis | C2 | MK | Lecture, field visit | | | Community Medicine |

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Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

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[Handwritten signatures and marks]

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

9. 10. 2024 60-80%

[Handwritten signatures and marks]

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

12/11/24
10/11/24
12/11/24

[Handwritten signatures and marks]

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

5/25.07/2029
6.

[Handwritten signatures and marks]

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

9/11/21 to 5/11/21

[Handwritten signatures and marks]

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| HomUG
-PM
1.25.25 | K&S | K | Anthrax | Define Anthrax | C1 | NK | Lecture, Multimedia presentation | MCQ, Quiz, Viva | SQ, MCQ, Viva | Pathology, Bacteriology, Community Medicine |
| | | | | Discuss etiopathogenesis for Anthrax | C2 | NK | Lecture | | | |
| | | | | Identify the epidemiology dimension of Anthrax | C2 | NK | Lecture | | | Community Medicine |
| | | | | Explain how infection of Anthrax spreads from person to person | C2 | NK | Lecture | | | Community Medicine |
| | | | | Describe the clinical manifestation of Anthrax / brucellosis / plague | C2 | NK | Lecture | | | |
| | | | | State the investigations to be done for the patient suffering from Anthrax | C1 | NK | Lecture | | | Pathology |
| | | | | KH | Enumerate the diagnostic features for Anthrax | C1 | NK | | | Lecture |

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

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9.8.2029

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

Handwritten signature and text:
J. Singh

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3. 1. 5. 6. 7. 8.

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

Handwritten signature and date: 10-5-2024

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

9/2/2020

[Handwritten signatures and marks]

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

| | | | | | | | | | | |
|----------------------|-----|---|---------|--|----|----|--|---|-------------------------------|---|
| | | | | Summarize the treatment and management options for Plague | C2 | DK | Lecture | | | Organon |
| | | K | | Enumerate the indications of homoeopathic medicines for Plague | C1 | DK | Lecture | | | Materia Medica |
| | | | | Describe the strategies to prevent Plague | C1 | DK | Lecture | | | Community Medicine |
| HomUG -PM
1.25.28 | K&S | K | Leprosy | Define Leprosy | C1 | MK | Lecture, Multimedia presentation, Case based, Assignment - Literature Review | MCQ, Quiz, Case Based, Model, Chart, Viva | LQ, SQ, MCQ, Case Based, Viva | Pathology, Bacteriology, Community Medicine |
| | | | | Discuss etiopathogenesis for Leprosy | C2 | MK | Lecture, Case Based | | | |
| | | | | Identify the epidemiology dimension of Leprosy | C2 | MK | Lecture, field visit | | | Community Medicine |
| | | | | Explain how infection of Leprosy spreads from person to person | C2 | MK | Lecture, field visit | | | Community Medicine |

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|--|--|----|--|---|----|----|---------------------|--|--|--|
| | | | | Describe the different clinical manifestation of different types of Leprosy | C2 | MK | Lecture, Case Based | | | |
| | | | | State the investigations to be done for the patient suffering from Leprosy | C1 | MK | Lecture, Case Based | | | |
| | | | | Enumerate the diagnostic features for different types of Leprosy | C1 | MK | Lecture, Case Based | | | |
| | | | | Describe the potential complications of different types of Leprosy | C2 | MK | Lecture, Case Based | | | |
| | | | | Describe the differential diagnosis of different types of Leprosy | C2 | MK | Lecture, Case Based | | | |
| | | | | Discuss the prognosis of different types of Leprosy | C2 | MK | Lecture, Case Based | | | |
| | | KH | | | | | | | | |
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98/10/2029

[Handwritten signatures and marks]

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

| | | | | | | | | | | |
|----------------------|-----|---|--------------|--|----|----|--|---|-------------------------------|---|
| | | K | | Summarize the treatment and management options for different types of Leprosy | C2 | MK | Lecture, Case Based | | | Organon |
| | | | | Enumerate the indications of homoeopathic medicines for different types of Leprosy | C1 | MK | Lecture, Case Based | | | Materia Medica |
| | | | | Describe the strategies to prevent different types of Leprosy | C1 | MK | Lecture, Case Based | | | Community Medicine |
| HomUG -PM
1.25.29 | K&S | K | Tuberculosis | Define Tuberculosis | C1 | MK | Lecture, Multimedia presentation, Case based, Assignment - Literature Review | MCQ, Quiz, Case Based, Model, Chart, Viva | LQ, SQ, MCQ, Case Based, Viva | Pathology, Bacteriology, Community Medicine |
| | | | | Discuss etiopathogenesis for Tuberculosis | C2 | MK | Lecture, Case Based | | | |
| | | | | Identify the epidemiology dimension of Tuberculosis | C2 | MK | Lecture, field visit | | | Community Medicine |

10. Sept 2024
9. Sept 2024

[Handwritten signatures and marks]

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

15.12.24
10.5.24
1.8.24

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

Handwritten signature and date: 10.5.2029

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Maximum marks: NA
Theory: NA

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

Subject: Practice of Medicine
Subject code: HomUG PM-I
Year of Exam: 2029

Maximum marks: NA
Theory: NA

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

10.5.2024

10.5.2024

[Handwritten signatures and marks]

6.5. Competency Tables for Bedside Clinics

| Sl. No. | Domain of Competency | Miller's Level | Content | SLO | Blooms Domain/ Guilbert's Level | Priority | T-L Methods | Assessment | | Integration |
|------------------|----------------------|----------------|--|---|---------------------------------|----------|------------------------------------|---|------|---|
| | | | | | | | | F | S | |
| HomUG -PM I.26.1 | K&S | SH | Taking patient history including chief complaints, present illness, past medical history, family history, and personal history | Demonstration of effective communication and questioning skills | A1/2 | MK | Simulated patient encounters | Observation of history-taking sessions, Peer feedback | OSCE | Case discussions with clinical preceptors |
| HomUG-PM I.26.2 | PC | | Conducting a systematic physical examination including general examination, systemic examination, and regional examination | Demonstration of proficiency in physical examination techniques | P2 | MK | Simulation, Bedside demonstrations | Observation of physical examination sessions, Peer feedback | OSCE | Clinical rotations with supervision |

5/11/2029
10/5/2029
9/6/2029

6/2/2029
9/6/2029
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3/8/2139

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

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

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H. S. S.

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Maximum marks: NA
Theory: NA

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

8. Details of assessment

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

Overall Scheme of Internal Assessment (IA)**

| Professional Course/
Subject | Term I (1-6 Months) | | Term II (7-12 Months) | |
|----------------------------------|------------------------|--|-------------------------|--|
| | PA I (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | TT II (end of 12 months) |
| II BHMS/
Practice of Medicine | 20 Marks Viva- A | 100 Marks Clinical/Practical and Viva - E

i) Viva voce -50 marks
ii) Clinical/practical*- 50 | 20 Marks Viva- B | 100 Marks Clinical/Practical and Viva - F

i) Viva voce -50 marks
ii) Clinical/practical*- 50 |

*Practical Examinations:

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

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

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

9. List of recommended text/reference books

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

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

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Father Muller Homoeopathic Medical College & Hospital,
University Road, Deralakatte, Mangalore 575018

Subject Name: Organon of Medicine and Homeopathic Philosophy
Subject Code: HomUG-OM-II

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1. Preamble

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

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

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

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

See 3. Preamble 4. Miasm. 5. 6 22 7 8. 9. 10. 11.

2. Course outcomes

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

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

3. Learning outcomes

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

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4. Course content and its term-wise distribution

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

5. Teaching hours

5.1. Gross division of teaching hours

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

5.2 Teaching hours theory

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

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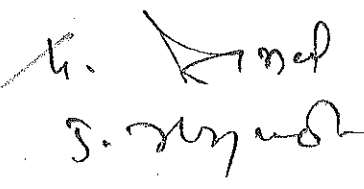
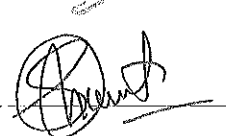
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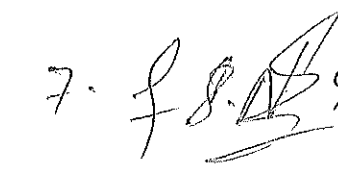
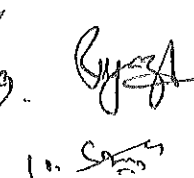
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| | | |
|----|--|------------|
| 11 | Anamnesis-evolution of disease,
Disease its progress-complex disease,
Individualization-its process,
Susceptibility- types and factors modifying it | 16 |
| 12 | Introduction to the concept of suppression | 3 |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

5.3. Teaching hours Non-lecture

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

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6. Competencies tables

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

| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/
Guilbert | Priority | TL MM | Assessment | | Integration |
|--------------------|----------------------|--------|---|--|---|-----------|-----------------------------------|------------|------------------|-----------------|
| | | | | | | | | F | S | |
| HomUG-OM-II
1.1 | K& S
HO | K | Aphorism 28-33

Artificial disease is stronger than Natural disease | Define modus operandi of homoeopathic cure | Cognitive Understand and interpret Level II | Must Know | Lecture
Small Group Discussion | MCQ
SAQ | MCQ
SAQ, Viva | Spiral Pharmacy |
| HomUG-OM-II
1.2 | | | | Define and differentiate between Natural and Artificial Disease | | | | | | |
| HomUG-OM-II
1.3 | | | | Identify factors differentiating Natural & Artificial Disease | | | | | | |
| HomUG-OM-II
1.4 | | | | Compare the strength of Natural Disease vis-à-vis Artificial Disease | | | | | | |
| HomUG-OM-II
1.5 | | | | Justify the superiority of Artificial Disease | | | | | | |

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

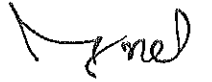

| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/
Guilbert | Priority | TL MM | Assessment | | Integration |
|--------------------|----------------------|--------|---|---|---|-----------|--------------------------------------|------------|---------------------|-------------|
| | | | |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

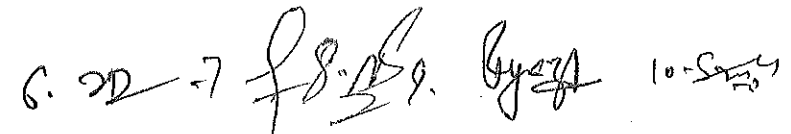
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 9. *[Signature]*

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

3. 

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6. 

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

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

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

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

6.4 Case taking (Aphorisms 83-103)

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

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

Subject: Organon of Medicine and Homeopathic Philosophy
Subject code: HomUG-OM-II
Year of Exam: 2027

Maximum marks:100
Theory: 100

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| HomUG
-OM-II
4.8 | K & S
HO
P C | K H | Aphorism
95
Case taking
in chronic
disease | Design the case
taking in
chronic disease
Evaluate the
importance of
accessory
symptoms | Cognitive
Decision
/Problem
Solving
Level III | Must
Know | Lecture
Small
Group
Discussion
Case
simulation
OPD/IPD | MCQ
SAQ | MCQ
SAQ
LAQ
Viva | |
| HomUG
-OM-II
4.9 | K & S
HO
C S | K | Aphorism
96-97
Disposition
s of patients
in case
taking | Differentiate the
dispositions of
patients while
answering
Differentiate
between
Hypochondriac
s and Feigners
(malingering)
Analyse the
reasons behind
the disposition | Cognitive
Understand
and
interpret
Level II | Must
Know | Lecture
Small
Group
Discussion
Case
simulation
OPD/IPD | MCQ
SAQ | MCQ
SAQ
Viva | Fundamentals
of Psychology
(S)

Symptomatology Organon |
| HomUG
-OM-II
4.10 | K & S
HO
P B L
C S | K | Aphorism
98
Demands of
Case taking | Analyse the
answers given
by the friends
and attendants
Compare that
with the
patient's answer
Listen to the
patients'
answers | Cognitive
Understand
and
interpret
Level II

Affective
Level I | Must
Know | Lecture
Small
Group
Discussion
Case
simulation
OPD/IPD | MCQ
SAQ | MCQ
SAQ
Viva | Psychology
(S) |
| HomUG
-OM-II
4.11 | K & S
HO | K | Aphorism
99 | Discuss the
advantages of
case taking in | Cognitive
Understand
and | Must
Know | Lecture | MCQ
SAQ | MCQ
SAQ
Viva | |

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

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6.5 Symptomatology



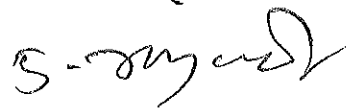




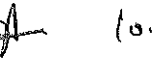
| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/Guilbert | Priority | TL MM | Assessment | | Integration |
|-----------------|----------------------|--------|--------------------------------------|--|---|-----------|--|------------|-----------|--|
| | | | | | | | | F | S | |
| HomUG-OM-II 5.1 | K & S | K | Define Symptoms and their importance | Define Objective and subjective symptoms | Cognitive Understand and interpret Level II | Must Know | Class room lecture , Group discussions | MCQ SAQ | LAQ | Horizontal with Pathology

Vertical with POM, OBG, Surgery |
| HomUG-OM-II 5.2 | | | | Enumerate different types of symptoms | | | | | | |
| HomUG-OM-II 5.3 | | K | | Explain symptoms according to Hahnemann's view | | | | | | |
| HomUG-OM-II 5.4 | K & S | K | | Define Totality of symptoms | Cognitive/ Understand & Interpret level II | Must Know | Class room lecture , Group discussions Caselet s | MCQ | LAQ VIV A | |
| HomUG-OM-II 5.5 | | | | Explain types of modalities | | | | | | |

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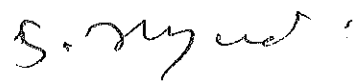


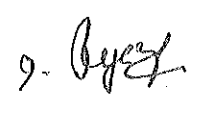
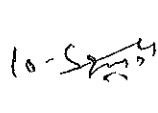

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| | | | | | | | | | | |
|------------------------|-------|---|---|--|---|--------------|-----------------------|-----|------------|----------------------------|
| HomUG
-OM-II
5.6 | K & S | K | Define
Symptomatology
in relevance
with Dr. KENT | Understandin
g the method
of forming the
TOS for
prescribing
Identify the
nature and
value of
symptoms | Psychomotor
/
Problem
Solving
Level I | Must
Know | Caselet
s
P B L | SAQ | LAQ
SAQ | Vertical with
Repertory |
| HomUG
-OM-II
5.7 | | | | Analysis of
the case
Explain the
grade of
symptoms of
disease | | | | | | |
| HomUG
-OM-II
5.8 | | | | Explain the
grade of
symptoms of
drug | | | | | | |

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6.6 Case taking (Homoeopathic Philosophy)

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

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6:7 Case processing

| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/
Guilbert | Priority | TL MM | Assessment | | Integration |
|--------------------|-------------------------------|-----------------|--|--|---|--------------|--|-------------------------|-------------------|---|
| | | | | | | | | F | S | |
| HomUG-OM-II
7.1 | K & S

P C

P B L | K H
S H
D | Analysis | Define
Analysis
Identify
different
groups to
analyse the
symptoms
Justify the
analysis | Cognitive
Level III | Must
Know | Lecture
Small
Group
Discussion
Case
simulation
OPD/IPD | MCQ
SAQ
Checklist | MCQ
SAQ
LAQ | |
| HomUG-OM-II
7.2 | | | Evaluation | Define
Evaluation
Justify and
defend the
evaluated
symptoms | Cognitive
Level III | | | | | |
| HomUG-OM-II
7.3 | | | Investigation | Discuss the
investigation
Plan the case | Cognitive
Level III | | | | | Pathology (H) |
| HomUG-OM-II
7.4 | | | Diagnosis | Examine the
case | Cognitive
Level III
Psychomotor
Level I & II | | | | | Practice of
Medicine(H) |
| HomUG-OM-II
7.5 | K & S | K | Develop
Portrait of
Disease by
integrating
Hahnemannian
concept | Define
Disease
portrait (Kent
-Ch- 30),
(Roberts- Ch-
9),(Close-
Ch- 11, 12) | Cognitive/
Understand &
Interpret level
II | Must
Know | Caselets /
Classroom
discussion/
DOPS | MCQ
SAQ | LAQ | Horizontal with
Pathology,
Materia Medica,
Repertory |

6.8 Totality of symptoms

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

6.9 Susceptibility

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

6.10 Record keeping

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

6.11 Various systems of medicine

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


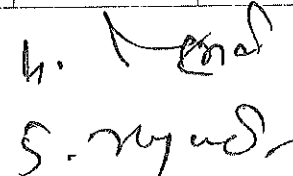
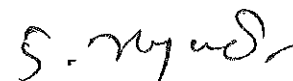
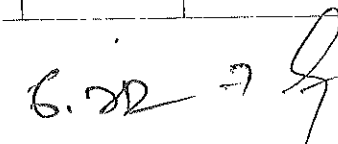
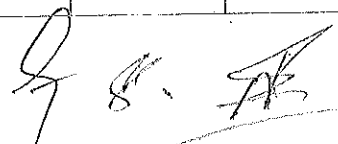
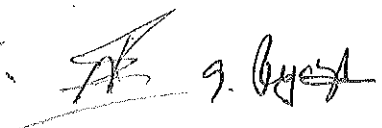

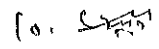
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Subject: Organon of Medicine and Homeopathic Philosophy
 Subject code: HomUG-OM-II
 Year of Exam: 2027

Maximum marks:100
 Theory: 100

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

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

Subject: Organon of Medicine and Homeopathic Philosophy
 Subject code: HomUG-OM-II
 Year of Exam: 2027

Maximum marks:100
 Theory: 100

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

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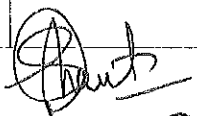

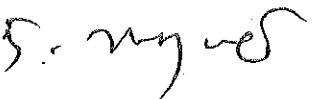




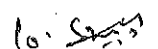
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6.10 Causation

| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/Guilbert | Priority | TL MM | Assessment | | Integration |
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| | | | | | | | | F | S | |
| HomUG-OM-II
12.1 | K & S | K | Etiology Concept of Disease | Recall the various concept of disease | Cognitive Level II Understand and Interpret | Must know | Lectures
Small group
Discussion | MCQ
SAQ | MCQ
SAQ
LAQ
Viva | Organon (S) |
| HomUG-OM-II
12.2 | K & S | | Biological Concept of disease | Discuss the biological concept of disease | | Desirable to know | | | | Pathology (H) |
| HomUG-OM-II
12.3 | C S | | Environmental and Constitutional Factors | Discuss the concept of stress/ strain / Conflict | | Must know | | | | Psychology (S)
Personality
Adaptation |
| HomUG-OM-II
12.4 | P C | | Importance of diagnosis in Homeopathy | List the importance of diagnosis in daily practice | | Must know | | | | Practice of Medicine (H & V) |
| HomUG-OM-II
12.5 | | | Concept of causation & relating it with homeopathy | Define fundamental(miasm), exciting & maintaining cause | Cognitive Level II Understand and Interpret | Must know | Lectures
Small group
Discussion | MCQ
SAQ | MCQ
SAQ
LAQ
Viva | Horizontal with Pathology, Materia Medica, Repertory |
| HomUG-OM-II
12.6 | K & S and Scholarship | K | Classification of Disease | Classification of disease as per Hahnemann and other stalwarts like Sarkar | Cognitive/ Understand & Interpret level II | Must Know | Classroom discussion
Case Based Learning | MCQ
SAQ | LAQ | |

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6.11 Introduction to the evolutionary concept of miasm

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

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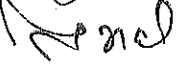
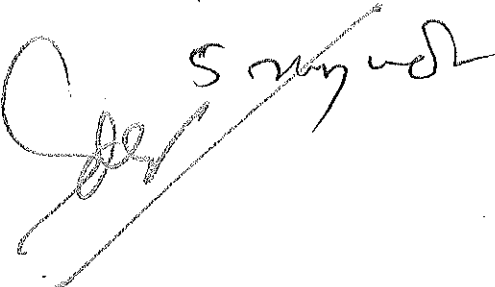
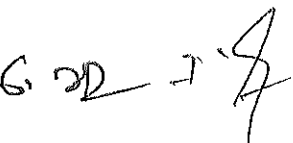
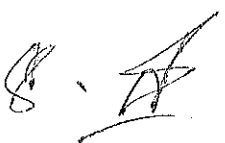
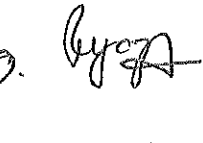
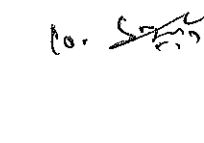
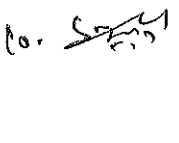
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|---------------------|-------|---|---|--|---|-------------------|----------------------------------|---------|-----|---------------------------|
| HomUG-OM-II
13.6 | | | | Explain characteristic of Syphilis
Foot note: 74, 76, 77, 78, 79, 80 | | |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

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6.12 Individuality


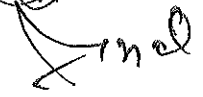
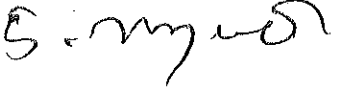
| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/ Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|----------------------|--------|------------------------|--|---|-----------|--|------------|---------------------------|---|
| | | | | | | | | F | S | |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

6.13 Anamnesis- evolution of disease


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

6.14 Disease-its progress- complex disease relation with miasm

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

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6.15 Introduction to the concept of suppression

| Sl. No | Domain of Competency | Miller | Content | SLO | Bloom/
Guilbert | Priority | TL MM | Assessment | | Integration |
|---------------------|------------------------|--------|--|---|--|-----------------|---|------------|-----|---------------|
| | | | | | | | | F | S | |
| HomUG-OM-II
17.1 | K & S

HO
P C | K | Suppression
Causes
Effects and
Management | Define
Suppression | Cognitive
Level II
Understand
and Interpret | Nice to
Know | Lecture
Caselet

Case
based
Learning | MCQ
SAQ | SAQ | Pathology (H) |
| HomUG-OM-II
17.2 | | | | Enumerate the
types and causes
of Suppression | | | | | | |
| HomUG-OM-II
17.3 | | | | Discuss the
effects of
Suppression | | | | | | |
| HomUG-OM-II
17.4 | | | | Explain the
management | | | | | | |

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7. Teaching learning methods

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

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

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

8. Details of assessment

8.1 Overall Scheme of Assessment (Summative)

| Sr. No | Professional Course | Term I (1-6 Months) | | Term II (7-12 Months) | | |
|--------|-----------------------------|-----------------------|--|-------------------------|------------------------|---|
| 1 | Second Professional
BHMS | PAI (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | FUE (end of 12 months) | |
| | | 10 Marks Viva | 50 Marks Practical/ Viva
i) Viva voce -25 marks | 10 Marks Viva | 100 marks theory | 100 marks
(Clinical/practical+ Viva+ IA) |

Subject: Organon of Medicine and Homeopathic Philosophy
 Subject code: HomUG-OM-II
 Year of Exam: 2027

Maximum marks:100
 Theory: 100

| | | | | | | |
|--|--|--|--|--|--|--|
| | | | ii) Clinical performance - 25 marks
Case taking and analysis and evaluation | | | |
|--|--|--|--|--|--|--|


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

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


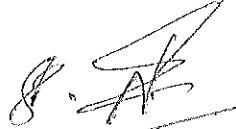

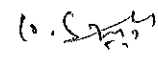
*Journal with 10 cases needs to be maintained by the students which should include Case Taking, Case Processing -Analysis & Evaluation, Investigations, Probable Diagnosis, Classification of disease in that case, Susceptibility

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

Marks of IA- (Marks of PA-1 + Marks of TT + Marks of PA-2) / 70 X 10

3.  L. Verma
S. Singh

6. 

8.3 Paper Layout

Summative assessment (FUE):
Theory- 100 marks

| | |
|-----|----------|
| MCQ | 10 marks |
| SAQ | 40 marks |
| LAQ | 50 marks |

8.4 Distribution of questions for theory exam

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

Symptomatology, Analysis, Evaluation, Totality of Symptoms | I & II | | 2 | 2 | 1 |

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

8.5 Theme-wise distribution

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

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8.6 Question paper blueprint

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

Handwritten signatures and notes:
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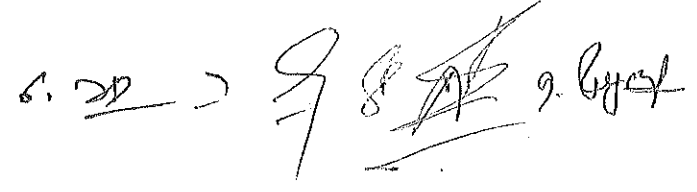
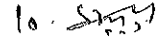
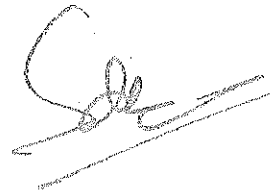
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9. List of recommended text/reference books

- Hahnemann Samuel, Organon of Medicine 6th edition translated By W. Boericke
- Hahnemann Samuel, Organon of Medicine 5th&6th combined edition translated By R. E. Dudgeon
- Kent J.T. Lectures on Homoeopathic Philosophy
- Roberts H. A. The Principle and Art of Cure By Homoeopathy
- Close Stuart, The Genius of Homoeopathy Lectures and Essay on Homoeopathic Philosophy
- Sarkar B. K., Commentary on Organon
- Das A. K., *A Treatise on Organon of Medicine, Chronic Diseases and Homoeopathic Philosophy* 3rd edition
- Schmidt Pierre, *The Art of Case Taking and Interrogation*
- Goel Sumit, *A study on Organon of Medicine and Homoeopathic Philosophy*

10. List of Contributors

- I. Dr. Prabhakar Devadiga, MD (Hom), Professor and HOD Smt. Chandaben Mohanbhai Patel Homeopathic Medical College, Mumbai, Maharashtra 400056
- II. Dr. S. M. Sharma, MD (Hom) Professor, Department of Organon and Principal, Dr. Madan Pratap Khunteta Homeopathic Medical College, Jaipur, Rajasthan
- III. Dr. Neeraj Gupta, MD (Hom) Officiating Principal and HOD Dr. B. R. Sur Homeopathic Medical College Hospital Research Centre, Nankpura, Moti Baug, New Delhi 110021

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Subject: Homoeopathic Repertory And Case Taking
Subject code: HomUG-R-II
Year of Exam: 2028

Maximum marks:100
Theory: 100

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

Index

| S.No | Description | Page Number |
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| 2. | Course Outcomes (CO) | 3 |
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1. Preamble

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

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

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

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

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

2. Course outcomes

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

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

3. Learning objectives

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

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


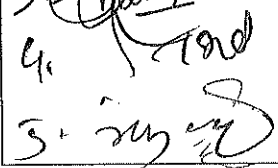
4. Course content and its term-wise distribution(theory)

4.1 Case Taking (Term I)

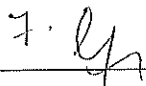
- 4.1.1 Demonstration of Homoeopathic case taking in simple, acute and chronic cases (*refer to the table in Annex-A at the end defining category of the cases*)
- 4.1.2 Instructions given in Organon regarding case taking


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

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


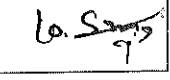
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Subject: Homoeopathic Repertory And Case Taking
Subject code: HomUG-R-II
Year of Exam: 2028

Maximum marks:100
Theory: 100

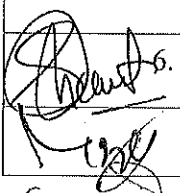
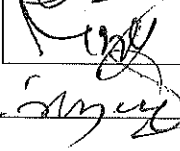
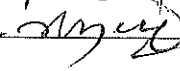
5. Teaching hours

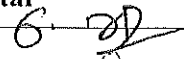
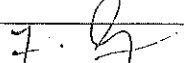
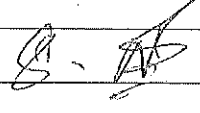
5.1. Gross division of teaching hours

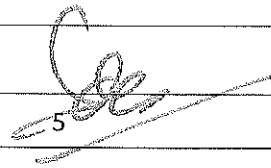
| Homoeopathic Repertory and Case Taking | | |
|--|--------------------------|------------------------------|
| Year | Teaching hours- Lectures | Teaching hours- Non-lectures |
| II BHMS | 50 | 30 |

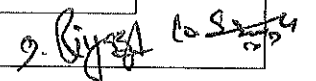
5.2. Teaching hours theory

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

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Subject: Homoeopathic Repertory And Case Taking
Subject code: HomUG-R-II
Year of Exam: 2028

Maximum marks:100
Theory: 100

5.3. Teaching hours Non-lecture

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

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6. Content mapping

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

| Sl. No. | Domain of Competency | Miller's level | Content | SLO | Bloom/ Guilbert | Priority | Teaching-Learning Method/Media | Assessment | | Integration |
|-----------------|----------------------|----------------|--|---|--|-------------------|--------------------------------|---------------|---|--|
| | | | | | | | | F | S | |
| Hom UG-R-II-2.1 | K/HO | Knows | Acquiring knowledge, skill and attitude about patient and doctor communication and examination in simple acute disease | Define an acute Disease | Cognitive/ Level -1 Remembers/ Recalls | Must Know | Lecture Small Group Discussion | SAQ Viva-voce | - | Horizontal integration with Organon of Medicine

Spiral Integration in III & IV BHMS |
| Hom UG-R-II-2.2 | K/HO | Knows | | Classify diseases as per Hahnemann's Philosophy | Cognitive/ Level -1 Remembers/ Recalls | Desirable to Know | Lecture Small Group Discussion | SAQ Viva-voce | - | |
| Hom UG-R-II-2.3 | K/HO | Knows | | State the Aphorisms dealing with Acute Case Taking and classification of acute disease | Cognitive/ Level -1 Remembers/ Recalls | Must know | Lecture Integrated discussion | SAQ Viva-voce | - | |
| Hom UG-R-II-2.4 | K/HO/PC | Knows how | | Explain the basic structure of case taking. List the steps of case taking in simple acute cases | Cognitive/ Level -1 Remembers/ Recalls | Must know | Lecture Integrated discussion | SAQ Viva-voce | - | |

Subject: Homoeopathic Repertory And Case Taking
Subject code: HomUG-R-II
Year of Exam: 2028

Maximum marks:100
Theory: 100

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

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

| Sl. No. | Domain of Competency | Miller's level | Content | SLO | Bloom/Guilbert | Priority | Teaching-Learning Method/Media | Assessment | | Integration |
|-----------------|----------------------|----------------|---|--|--|-----------|--------------------------------|---------------|---|--|
| | | | | | | | | F | S | |
| Hom UG-R-II-2.7 | K/HO | Knows | Acquiring knowledge, skill and attitude about | Define a Chronic Disease as per Hahnemann's Philosophy | Cognitive/ Level -1 Remembers/ Recalls | Must Know | Lecture Small Group Discussion | SAQ Viva-voce | — | Horizontal integration with Organon of Medicine, |

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

6.3. Topic: - Introduction to Boericke's Repertory

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

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


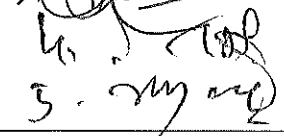
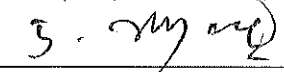
| Sl. No. | Domain of Competency | Miller's level | Content | SLO | Bloom/ Guilbert | Priority | Teaching-Learning Method/Media | Assessment | | Integration |
|-----------------|----------------------|----------------|---|--|--|-------------------|--------------------------------|------------|---|---|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

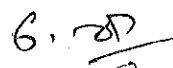
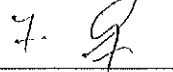
Subject: Homoeopathic Repertory And Case Taking
Subject code: HomUG-R-II
Year of Exam: 2028

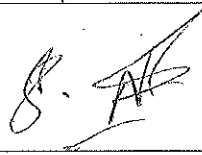
Maximum marks:100
Theory: 100

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

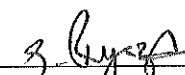
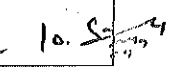
| Sl. No. | Domain of Competency | Miller, s level | Content | SLO | Bloom/ Guilbe rt | Priorit y | Teaching- Learning Method/ Media | Assessment | | Integration |
|-----------------|----------------------|-----------------|--|--|--|-------------------|----------------------------------|------------|---|--|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

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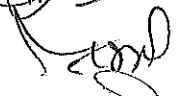
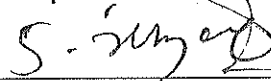
| Sl. No. | Domain of Competency | Miller, s level | Content | SLO | Bloom/ Guilbe rt | Priorit y | Teaching- Learning Method/ Media | Assessment | | Integration |
|-----------------|----------------------|-----------------|---------|---|---|--------------------|----------------------------------|------------|---|-------------|
| | | | | | | | | F | S | |
| Hom UG-R-II-5.4 | K/HO | Knows How | | Identify the rubrics representing different constitution, diathesis, susceptibility and temperament in Boericke repertory | Cogniti ve/ Level - 2 Underst ands & interpre t | Desirab le to Know | Lecture Rubric Hunting | MCQ Quiz | - | |
| Hom UG-R-II-5.5 | K/HO | Knows How | | Identify the rubrics representing different constitution, diathesis, susceptibility and temperament in Kent repertory | Cogniti ve/ Level - 2 Underst ands & Interpre t | Desirab le to Know | Lecture Rubric Hunting | MCQ Quiz | - | |



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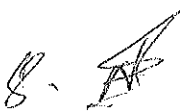
Maximum marks:100
Theory: 100

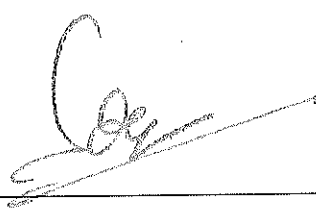
7. Teaching Learning Methods

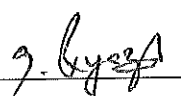
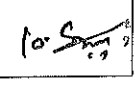
| Lectures (Theory) | Non-lectures (Practical/Demonstrative) |
|--|--|
| Lecture | Clinical Class |
| Small Group Discussion | Rubric hunting exercises |
| Integrated discussion with subjects of Organon of Medicine, Pathology & Practice of Medicine | Case based learning |
| | Seminar |
| | Tutorial |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

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8. Details of assessment

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

Overall Scheme of Internal Assessment (IA)*

| Professional Course/ Subject | Term I (1-6 Months) | | Term II (7-12 Months) | |
|------------------------------|------------------------|---|-------------------------|--|
| II BHMS/
Repertory | PA I (end of 3 months) | TT I (end of 6 months) | PA II (end of 9 months) | TT II (end of 12 months) |
| | 10 Marks Viva- A | 50 Marks Clinical/Practical and Viva - E

i) Viva voce -25 marks
ii) Clinical/practical- 25
a. Recording of Simple acute case - 20 marks
b. Analyse the case for acute and chronic disease as per Hahnemann's classification of disease - 05 marks | 10 Marks Viva- B | 50 Marks Clinical/Practical and Viva - F Viva voce -25 marks

i) Clinical/practical- 25
a. Recording of Simple chronic case-15 marks
c. Analyse the case for acute and chronic disease as per Hahnemann's classification of disease - 05 marks
b. Locate the rubrics for pathologies in Boericke & Kent's repertory- 05 marks |

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

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

9. List of recommended text/reference books

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

10. List of contributors

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

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