

Curriculum Document

M.D. (Homoeopathy) Psychiatry

I. Title of the Specialty Course, and its abbreviation.

MD (Homoeopathy) Psychiatry

II. Components of the Curriculum

II (1). Part I

- (i) Fundamentals of Psychiatry;
- (ii) Fundamentals of Homoeopathy in Psychiatry; and
- (iii) Research Methodology and Biostatistics.

II (2). Part II

- (i) Homoeopathic Psychiatry Paper 1
- (ii) Homoeopathic Psychiatry. Paper 2

III. Brief description of specialty and its relevance in homoeopathy post-graduate course.

Psychiatry is a branch of medicine focused on the study, diagnosis, treatment and prevention of mental, emotional and behavioural disorders in the individual and in the community. A person's mental health is influenced by a combination of factors that are both specific to an individual as well as related to interactions with the society, community, and family.

The purpose of Psychiatry in homoeopathic postgraduate education is to create specialists who are competent to provide high-quality mental health care using Homoeopathic intervention with Counselling (if required, as an adjuvant). During the course, they should be competent to enrich the system through research. A postgraduate specialist is required to utilize the training in Psychiatry under the domain of the Homoeopathic system of medicine to observe and recognize the mental health needs of the community and to manage mental health illnesses and crises effectively. Along with preventive, promotive, curative and rehabilitative approaches towards mental health, the postgraduate student should be equipped with basic skills in medical and paramedical teaching, especially from Homoeopathic discipline and develop a research aptitude in mental health.

The major components of the postgraduate curriculum need to include the relevant theoretical knowledge to master most of the competencies. It is also necessary to integrate the speciality required for the needs at the secondary and tertiary levels with the principles of Homoeopathic discipline and be aware of the contemporary advances in the discipline as well. The curriculum must be appropriate to develop practical and clinical skills and attitudes required for competent and ethical evidence-based practice along with communication skills, training in research methodology and thesis writing skills. There should be an emphasis on acquiring the spirit of scientific inquiry, research methodology, epidemiology and basic skills in teaching the medical and paramedical Homoeopathic professionals.

Primarily, postgraduate candidates of Psychiatry are therefore expected to understand the knowledge of mental health management adequately coupled with Homoeopathic discipline for systematic use at all levels i.e., pathological, clinical, psychosomatic, etc, and in all clinical

situations. They are expected to provide health services with empathy and a humane approach toward patients and their families.

IV. Course Objectives.(Entrustable Professional Activities–EPAs)

1. Demonstrates the components of Psychiatric screening/history taking by striking a compassionate Doctor-Patient relationship.
2. Traces the evolution of psychopathology in every case for establishing a comprehensive clinical and personal diagnosis
3. Documents all the relevant information comprehensively in the case record
4. Performs essential General, Systemic, and Neurological examinations and conducts Mental Status Examination (MSE).
5. Integrates data from history taking, case evolution, and patient assessment to differentiate and conclude the diagnosis as per ICD-11, DSM-V, and Hahnemannian classification systems.
6. Formulates a comprehensive strategy for general and homoeopathic management
7. Manage patients with psychiatric emergencies and guide relatives accordingly.
8. Formulates comprehensive Acute, Chronic or Miasmatic totalities based on homoeopathic principles.
9. Chooses appropriate repertories for identifying the similimum.
10. Applies knowledge of homoeopathic materia medica as therapeutic agents for the management of various psychiatric conditions.
11. Identifies the stage and time for the need for second opinions or referrals for clinical consultation or management respectively
12. Writes a comprehensive psychiatric report for any referral patient.
13. Identifies the need for and acts on clinical psychologist's intervention for psychotherapeutic or diagnostic interventions.
14. Identifies, evaluates and manages co-morbidities resulting from psychiatric conditions or resulting in psychiatric conditions as per homoeopathic principles.
15. Prescribes various ancillary measures based on the comprehensive problem definition of patients with mental illness
16. Identifies the actions, doses and adverse effects of psychiatric or psychotropic drugs.
17. Develop a safe handover and comprehensive discharge plan.
18. Performs periodic clinical audits to improve patient care and outcomes
19. Applies knowledge of mental health and mental hygiene for performing mental health work in the community.
20. Trains and teaches undergraduates/interns related to psychology and psychiatry
21. Evaluates and takes germane decisions as per the guidelines of Mental Health Care Act 2017 for the benefit of patients and the community.
22. Participates in National Mental Health Programmes while applying the knowledge of Homoeopathic Psychiatry as relevant
23. Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.
24. Engage in research activities relevant to the field of Homoeopathic Psychiatry by employing relevant competencies required for handling patients

25. Publish evidence-driven documentation of clinical outcomes based on homeopathic psychiatry practices in reputable and credible journals.
26. Collaborate effectively as a member of an interprofessional team, fostering a multidisciplinary approach to patient care, research, and training in Psychiatry.
27. Demonstrate effective leadership skills when leading a team engaged in community health care research, and training activities.

IV(1). Mapping of EPAs and Domain Competencies

KS: Knowledge & Scholarship

PC: Patient care

HO: Homeopathic Orientation

CS: Communication skills

PBL: Practice based learning

PRF: Professionalism

Sl. No	EPA	KS	PC	HO	CS	PBL	PRF
1.	Demonstrates the components of Psychiatric screening / history taking by striking a compassionate Doctor Patient relationship.	√	√	-	√	√	√
2.	Traces the evolution of psychopathology in every case for establishing a comprehensive clinical and person diagnosis.	√	√	√	√	√	√
3.	Documents all the relevant information comprehensively in case record	√	√	√	√	√	√
4.	Performs essential General, Systemic, Neurological examinations and conduct MSE	√	√	-	-	√	√
5.	Integrates data from history taking, case evolution, and patient assessment to differentiate and concludes the diagnosis as per ICD-11, DSM-V, and Hahnemannian classification systems.	√	√	√	√	√	√
6.	Formulates a comprehensive strategy for general and homeopathic management	√	√	√	-	√	√
7.	Manages patients with psychiatric emergencies and guide relatives accordingly.	√	√	√	√	√	√
8.	Formulates comprehensive Acute, Chronic or Miasmatic totalities based on homeopathic principles	√	√	√	-	√	√
9.	Chooses appropriate repertories for identifying similimum.	√	√	√	-	√	√

10	Appliesthe knowledge of homoeopathic materiamedica as therapeutic agents for the management of various psychiatric conditions.	√	√	√	-	√	√
11	Identifiesthe stage and time for the need for second opinions or referrals for clinical consultation or management respectively	√	√	√	√	√	√
12	Writes a comprehensive psychiatric report for any referral patients	√	√	-	√	√	√
13	Identifiesthe need for and acts on clinical psychologist's intervention for psychotherapeutic or diagnostic interventions.	√	√	-	√	√	√
14	Identifies, evaluates and manages co-morbidities resulting from psychiatric conditions or resulting in psychiatric conditions as per homoeopathic principles.	√	√	√	√	√	√
15	Prescribes various ancillary measures based on the comprehensive problem definition of patients with mental illness	√	√	√	√	√	√
16	Identifies the actions, doses and adverse effects of psychiatric or psychotropic drugs.	√	√	-	√	√	√
17	Develops a safe hand over and comprehensive discharge plan	√	√	-	√	√	√
18	Performs periodic clinical audit to improve patient care and outcomes	√	√	-	√		√
19	Applies knowledge of mental health and mental hygiene for performing mental health work in the community.	√	√	√	√	-	√
20	Trains and teaches undergraduates / interns related to psychology and psychiatry.	√	√	√	√	√	√
21	Evaluates and takes germane decisions as per the guidelines of mental health care act 2017 for benefit the patients and the community.	√	√	√	√	√	√
22	Participates in National Mental Health Programmes while applying the knowledge of Homoeopathic Psychiatry as relevant	√	√	√	√	√	√
23	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	√			√	√	√

24	Engage in research activities relevant to the field of Homoeopathic Psychiatry by employing relevant competencies required for handling patients.	√			√	√	√
25	Publish evidence-driven documentation of clinical outcomes based on homeopathic psychiatry practices in reputable and credible journals	√			√	√	√
26	Collaborate effectively as a member of an interprofessional team, fostering a multidisciplinary approach to patient care, research, and training in Psychiatry.		√		√	√	√
27	Demonstrate effective leadership skills when leading a team engaged in community health care research, and training activities.	√	√		√	√	√

IV(2). Semester wise table EPA levels and competencies applicable to each EPA.

EPA Level:

1 = No permission to act

2 = Permission to act with direct, proactive supervision present in the room

3 = Permission to act with indirect supervision, not present but quickly available if needed

4 = Permission to act under distant supervision not directly available (unsupervised)

5 = Permission to provide supervision to junior trainees

	EPAs	Hom-PG-PS Part 1			Hom-PG-PS Part 2		
		Sem / Mod 1	Sem / Mod 2	Sem / Mod 3	Sem / Mod 4	Sem / Mod 5	Sem / Mod 6
1	Demonstrates the components of Psychiatric screening / history taking by striking a compassionate Doctor Patient relationship.	2 Demonstrates ability to identify the essence of information produced screening and learns to record observations of case taking as an observer.	2 Carries out screening in the OPD and can assess the immediate needs of the patient. Carries out a supervised interview and is able to undertake self-analysis. Demonstrates respect for patient's privacy and autonomy. Seeks feedback	2 Can perform an independent interview and, discuss the dynamics of case taking with the observer. Is able to successfully interact with the relatives. Is able to conduct Casualty case receiving	3 Is able to carry out case receiving in the OPD, Community and IPD set ups and report objectively about his experiences	4 Is able to carry through case receiving of a variety of clinical conditions and take the help of a junior observer for assessing his performance	5 Is able to guide the junior Postgraduate in fundamentals of screening and can be an effective observer to the case taking efforts by giving constructive feedback

			from the supervisor over case taking				
2	Traces the evolution of psychopathology in every case for establishing a comprehensive clinical and person diagnosis.	2 Evaluates and documents the whole chronology of complaints and the essential characteristics of the person	2 Develops ability to classify the symptoms as per psychiatric symptomatology and evaluate psychopathology and connect with the person. Documents and communicates assessment with supervisors. Becomes aware of the use of knowledge, skills and emotional limitations of self in the process of eliciting	3 Is able to arrive at a probable clinical diagnosis and diagnosis of the person. Is able to establish a correlation between the two to Develops ability to withstand and cope with stress associated with receiving and managing patients Is sensitized to different aspects of receiving cases with psychopathology	4 Is able to arrive at a firm diagnosis with differential diagnosis. Is able to present a comprehensive statement of the problem of the patient incorporating significant aspects of psychopathology and the manner in which it is responsible for the symptomatology	4 Is able to guide the junior in evaluation of complaints and of the person.	5 Is able to guide the Postgraduate juniors in establishing the psychopathology and connecting these to the clinical diagnosis and the type of person.

			and interpreti ng psychopat hology				
3	Document s all the relevant informatio n comprehe nsively in case record	2 Document s all complaint s accurately and legibly.	2 Documen ts all entries at the correct location in the case record	3 Is able to justify the location of entries and make corrections, if any	4 Is able to guide the postgraduat e junior is the need to document all information and explain the character of the case record	4 Is able to guide the junior in essential classificat ion assisting the correct entries in the case record	5 Develops ability to correct and give constructive feedback to Postgraduate juniors on their case record submissions
4	Performs essential General, Systemic, and Neurologi cal examinati ons and conduct MSE)	2 Performs and concludes general, systemic and neurologi cal examinati on Demonstr ates empatheti c approach required to examine non- compliant patients	2 Performs and concludes general and systemic examinati on along with MSE	3 Performs and documents all examination s and communicat es the findings in terms of clinical diagnosis	3 Is able to guide the juniors for general, systemic and neurologica l examinatio n	4 Is able to guide the Postgradu ate juniors in conductin g the MSE	5 Ensures juniors follow steps defined accurately.

5	Integrates data from history taking, case evolution, and patient assessment to differentiate and conclude the diagnosis as per ICD-11, DSM-V, and Hahnemannian classification systems.	2 Comprehensively records the data of the evolution of the primary complaints and life events in the case record Classifies the symptoms to help to arrive at a spectrum of clinical diagnosis	2 Effectively assesses the phases of psychiatric illness in cases to understand the diagnostic travel Effectively classifies the condition as per DSM-V and ICD-11 and as per Hahnemannian classification	3 Effectively differentiates the probable diagnosis and arrives at the final diagnosis. Effectively classifies as per Hahnemannian classification to arrive at the Homoeopathic diagnosis	4 Guides the junior resident in the correct documentation of the complaints and classification of the symptoms	4 Guides the junior resident in the correct differential diagnosis and Hahnemannian classifications	5 Transfers the knowledge by teaching the postgraduate juniors
6	Formulates a comprehensive strategy for general and homoeopathic management		2 Recognizes the deviated physical and psychological processes in a wide variety of cases	2 Defines the therapeutic problem and opines about the general management related to the same	3 Formulates the comprehensive strategy for general and homoeopathic management of the case Demonstrates willingness	4 Recognizes the need of developing ability of self-assessment to improve the skills of processing of the case/clinical	5 Orients juniors the various steps required for accurate processing of case

					to receive feedback and improve the skills of formulating management strategy of the case	conditions	
7	Manages patients with psychiatric emergencies and guides relatives accordingly.	2 Observe patients with emergencies and document the observations Develop empathy towards patients and relatives who are facing emergencies.	3 Assists the CMO/Senior resident in the casualty to conclude the assessment Receives and communicates with patients/relatives in the emergency room and documents all the observations for clinical and homoeopathic management	4 Is able to formulate accurate diagnostic evaluations of patients with psychiatric emergencies and discuss the plan of action with the senior resident/supervisor	4 Is able to formulate and implement management plans for patients with psychiatric emergencies and effectively communicates the same with the relatives/patients	5 Is able to guide the junior resident to the basic emergency management procedures in the casualty	5 Guides and Orients juniors the various steps required for accurate assessment and management of such emergencies
8	Formulate comprehensive		2 Classifies	3 Documents	4 Documents	4	5 Train the

	nsive Acute, Chronic or Miasmatic totalities based on homoeopa thic principles		and evaluates acute psychiatri c symptom atology and evolves acute totality	ccurately to derive the miasm and formulates acute and chronic totality based on Hahnemanni an guidelines	and formulate acute, chronic and come to miasmatic totality of the case based on guidelines	Works effectivel y in any situation of acute or chronic cases	junior residents about the same
9	Chooses appropriat e repertories for identifyin g similimum .	2	3 Can convert symptom s into rubrics in acute cases Demonstr ates knowledg e of choice of an appropria te repertory for the case (Basic, regional, clinical, modern, with use of software etc), remedy relationsh ip section of repertory for acute cases	3 Demonstrate s proper conversion of rubrics in chronic cases. Demonstrate s the knowledge of choice of an appropriate repertory and software for chronic cases	4	4	5 Is able to guide the juniors in the choice and use of repertories for acute and chronic management of cases

10	Applies knowledge of homoeopathic materia medica as therapeutic agents for the management of various psychiatric conditions.		2 Demonstrates the knowledge of arriving at the group of remedies after formulating appropriate totalities for the management of acute conditions.	2 Demonstrate the knowledge of arriving at a group of remedies after formulating appropriate totalities for chronic conditions.	3 Differentiates remedies based on the clinical characteristics related to various conditions and comes to the final remedy	4	5 Ensures juniors follow steps defined accurately. Transfer the knowledge to Undergraduate students through teaching.
11	Identifies stage and time for the need for second opinions or referrals for clinical consultation or management respectively			2 Recognizes when the therapeutic plan as planned and implemented is not producing plans as expected. Is able to spot the lacunae	3 Is able to share and discuss with the patient/relatives on the assessment and the need for a second opinion or advise on management strategy	4	5 Trains the juniors to create appropriate questions and retrieve evidence to supportive care
12	Writes a comprehensive psychiatric report for any			2 Communicates effectively with supervisors	3 Documents the rough psychiatric report of case/s and	4 Write comprehensive psychiatric reports	5 Train the juniors for psychiatric report writing by ensuring

	referral patients			about the findings and probable plan for action	subject to discussion for inputs	with specific comprehensive inclusion of homeopathic management	the all defined guidelines
1 3	Identifies need for and acts on clinical psychologist's intervention for psychotherapeutic or diagnostic interventions.		2 Identifies the cases needing psychological intervention Is able to communicate to the patient/relative the need and the benefit from the consultation	3 Effectively assesses the diagnostic state and understands the need of psychologist's opinion and its indications Effectively communicates the psychiatric report to the psychologist	3 Studies and analyses the findings from the analysts and utilize them in management	4	5 Ensures to keep juniors alongside for training/guiding them
1 4	Identifies, evaluates and manages co-morbidities resulting from psychiatric conditions or resulting in psychiatric		3 Identifies the occurrence of co-morbidities as a result of the clinical condition being treated or those which	3 Assesses and analyses the connection between two or more clinical conditions present in any given case Discusses with the patient/relative	4 Comprehensively formulates the Hahnemannian classification of the of mental illnesses and indicates the management	4	5 Demonstrate the knowledge and skill for guiding the juniors

	c conditions as per homoeopa thic principles.		have preceded the condition being treated	ve of the need for care of the condition identified	nt plan		
1 5	Prescribes various ancillary measures based on the comprehe nsive problem definition of patients with mental illness		2 Assesses and defines the therapeuti c problem of the patients	2 Constructs a comprehensi ve diagnostic formulation	3 Assesses and formulates a comprehen sive diagnostic strategy for the case manageme nt helpful in indicating a suitable ancillary measure or referral to specialists (eg. Psychologi st)	4 Prescribe and assess the outcome of the ancillary measures and modify them if needed	4 Guide the junior Postgraduate residents for the same.
1 6	Identifies the actions, doses and adverse effects of psychiatri c or psychotro pic drugs.				4 Knows and assesses the effect of various modern psychiatric drugs including their side effects if any	4 Knows and assessesth e modifying effects in homoeopa thic totality	5 Guide the same to junior students

17	Develops a safe hand over and comprehensive discharge plan			3 Formulates a plan for hand over/discharge and gets it evaluated from a supervisor	4 Orients the family/patient with the discharge plan. Formulates the final discharge plan	4 Effectively replicates the application of documentation, safe hand over and discharge plan	5 Trains the juniors to create appropriate documentation, legal and ethical issues while admission, safe hand over and discharge plan
18	Performs periodic clinical audit to improve patient care and outcomes			3 Learns to assess quality of therapeutic outcome compared to the initially formulated management plans in individual cases. Learns to write case reports for publication	4 Learns to compile individual case assessments to a case series and write up reports on case series. Prepares reports for publication	4 Drafts recommendations for improving the therapeutic outcome of clinical conditions and discusses with the supervising staff	5 Implements the changes finalized to improve clinical outcomes
19	Applies knowledge of mental health and mental hygiene for performing mental health work in the community.	1 Becomes aware of importance of the principles of mental health and hygiene	2 Explores the components of mental hygiene and practice on the self and near surroundings	2 Sensitize to the different aspects of mental health and hygiene and practice in patients seen in the OPD and IPD	4 Sensitizes to the different aspects of mental health and hygiene and practice it at various community levels colleges, villages,	4 Sensitizes with different aspects of mental health and hygiene and practice it at various community levels colleges, villages,	5 Guide and demonstrate the same with junior students

					companies etc.	companies etc. and assess the feedback for further improvement	
20	Trains and teaches undergraduates / interns related to psychology and psychiatry.				4 Formulates the lesson plan related to assigned topic and prepares and presents case based material to interns by keeping an observer for evaluation/feedback	4 Seeks feedback post lecture/presentation from an observer	4 Effectively guides and helps other team members and juniors for such teaching activities
21	Evaluates and takes germane decisions as per the guidelines of mental health care act 2017 for benefit of the patients and the community.				3 Becomes aware of the various clauses of the mental health care act and various rights of the patients with mental illness	3 Practices the rights of confidentiality and rights to treatment in set up of practice with human care	4 Implements the rights in cases of violation. Transfers the knowledge by guiding the juniors on the same.
22	Participates in National Mental Health				Becomes aware of the various National Mental	Visits the sites where such National	Participates in one such programme run by the Institution/Dis

	Programmes while applying the knowledge of Homoeopathic Psychiatry as relevant				Health Programmes of the Government	Programmes are being run	strict/Local authority
2 3	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.	Justify the need for educational methodology as a component of PG Course.	Identify the learning objectives for their domain in Bloom's taxonomy. Identify the contexts of learning.	Recognise the levels of Guilbert. Indicate the level in Miller's Pyramid. Select appropriate instructional activities.	Write objectives for all domains of Bloom and levels of Guilbert. Identify assessment tools appropriate for the context.	Conduct evidence driven TL and Assessment of UG students.	Apply various teaching-learning techniques for imparting undergraduate and postgraduate education.
2 4	Engage in research activities relevant to the field of Homoeopathic Psychiatry by employing relevant competencies required for handling patients.	1 Orients self to research methodology as a subject	2 Proactively seeks guidance in application of research methodology	3 Identifies the avenues and processes that can be taken	3 Concludes the topic to work and applies the learnt processes	4 Conducts the research on the topic selected and consolidates the findings	5 Reviews the conclusions and identifies future areas for research

25	Publish evidence-driven documentation of clinical outcomes based on homeopathic psychiatry practices in reputable and credible journals	1 Becomes aware of importance	2 Explores the documentation already published	2 Consolidates the process to adopted	3 Attempts to document	3 Effectively documents	4 Ensures publication of research conducted
26	Collaborate effectively as a member of an interprofessional team, fostering a multidisciplinary approach to patient care, research, and training in Psychiatry .	1 Becomes aware of need	2 Identifies situations by observation	2 Proactively participates	3 Proactively seeks others participation	3 Attempts to seek feedback on self's lacunae in the process	4 Effectively contributes as a team member
27	Demonstrate effective leadership skills when leading a	1 Becomes aware of essential leadership qualities	2 Proactively seeks leadership role	2 Attempts to deliver leadership role	3 Seeks feedback on self's leadership traits	3 Explores opportunities to demonstrate leadership	4 Demonstrates effective leadership

team engaged in community health care research, and training activities.						
--	--	--	--	--	--	--

PART I Paper 1:

V.Topic and Topic Objectives.

Part 1: Paper 1:

- HOM- PG -- PS -- 01: Neuro-biological foundations of Psychiatry and the homoeopathic implications
- HOM- PG -- PS -- 02: Psychosocial foundations of Psychiatry and the homoeopathic implications
- HOM- PG -- PS -- 03: Concept of Personality and various approaches with homoeopathic implications
- HOM- PG -- PS -- 04 : History of Psychiatry in the West and in India and contribution of Homoeopathy
- HOM- PG -- PS -- 05: Case receiving and Examination of Psychiatric patient(adult and children)
- HOM- PG -- PS -- 06: Clinical manifestations of Psychiatric disorders and understanding of psychopathology
- HOM- PG --PS -- 07: Classification of Psychiatric disorders and correlation with the Hahnemannian approach
- HOM- PG -- PS -- 08: Diagnostic process in Psychiatry and correlation with Hahnemannian diagnosis

VI. Course description

Topic Name: HOM- PG – PS -- 01: Neuro-biological foundations of Psychiatry and the homoeopathic implications

Course Overview:	This course will provide the students of MD Homoeopathic Psychiatry with the knowledge of Neuro-biological foundations of Psychiatry and the implication in Homoeopathic fundamentals
Learning Outcomes	<p>Competency: HOM- PG – PS – 01- 1</p> <p>Neuroanatomical and neurophysiological and neurogenetics basis of the mental processes</p> <p><u>Cognitive/Knowledge:</u></p> <p>Neuro-biological foundations of Psychiatry</p> <p>a) Types c) Functioning d) Clinical significance</p> <ul style="list-style-type: none">Recall the basic neuroanatomical and neurophysiological basis of the mental processes- neuron, nerve transmission, parts of brain and the functioning, limbic system, neurotransmitters, neurotransmission, general adaptation syndrome, HPA axis, etc. <p><u>Skill/ Application:</u></p> <ul style="list-style-type: none">Correlate the symptoms with the relevant neurobiological function <p><u>Reflection:</u></p> <ul style="list-style-type: none">Recollecting the neuroanatomical and neurophysiological basis of the mental processes
Learning Outcomes	<p>Competency: HOM- PG – PS – 01- 2</p> <p>Study the homoeopathic implications of neurobiological foundations of Psychiatry</p> <p><u>Cognitive/Knowledge:</u></p> <p>Discuss the implication of in Homoeopathy with respect to</p> <p>a) Susceptibility b) Sensitivity c) Reactivity d) Vitality e) Relevant rubrics f) Materiamedica indications</p> <p><u>Psychomotor/ Skill:</u></p> <p>Assess the onset, duration, progression, susceptibility, fundamental and dominant miasm, hunting the rubrics in repertory, differentiating the remedies based on the presentation</p> <p><u>Reflection:</u></p> <p>Able to apply the knowledge of neurobiology to Organon, HMM and</p>

	Repertory
Learning methods	<ul style="list-style-type: none"> • Peer based learning methods: Problem based • Individual based learning methods: self-regulated learning, Library based, e- learning, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ <p>Checklist, Rating scales</p>
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Homoeopathic Orientation

Topic Name: HOM - PG – PS – 02 Psychosocial foundations of Psychiatry and the homoeopathic implications

Learning Outcomes	<p>Competency HOM - PG – PS – 02 - 1</p> <p>Studying the Psychosocial foundations of Psychiatry</p> <p><u>Cognitive/knowledge</u></p> <ul style="list-style-type: none"> • Discuss the psychological determinants- psychodynamics, stress and conflict, defence mechanisms, psychological pre-disposing factors, precipitating and maintaining factors • Discuss the Social determinants- social predisposing, precipitating and maintaining factors • Recall the developmental traits responsible for the evolution of individual and species. • Recall the aphorism 6 of Organon of Medicine <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Display the skill of case taking and case receiving with the help of this knowledge <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Relate the concept of Organon with the understanding the psychosocial foundations of Psychiatry.
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods: Problem based, Case based, ward rounds • Individual based learning methods: Self-regulated learning, deliberate practice
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ

	<ul style="list-style-type: none"> • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, Rubric
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Professionalism

Topic Name: HOM - PG -- PS – 03- Concept of Personality and various approaches with homoeopathic implications

Learning Outcomes	<p>Competency: HOM - PG -- PS – 03- 1</p> <p>Understanding the basic concept of Personality</p> <p><u>Cognitive/knowledge</u></p> <p>a) Personality b) Trait c) Temperament d) Definition e) Types f) Temperaments in Homoeopathy</p> <p><u>Skill/ Psychomotor:</u> Identifying the trait, temperament and personality in cases</p> <p><u>Reflection:</u> Recognizing the concept of trait, temperament and personality and their application in cases.</p>
Learning Outcomes	<p>Competency: HOM - PG -- PS – 03-2</p> <p>Understanding Sigmund Freud's psychosexual approach and its case application</p> <p><u>Cognitive/knowledge</u></p> <p>Define and discuss-</p> <p>a) Structure of the mind b) Levels of consciousness c) Psychosexual theory d) Defense mechanisms</p> <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Demonstrate Freud's structure of mind in cases • Identify the Id-Ego-Superego balance in cases • Define the problem of the patient with the help of the theoretical concept. <p><u>Reflection:</u></p> <p>Recognizing the Freudian concepts to cases and their Homoeopathic applications.</p>
Learning Outcomes	<p>Competency : HOM - PG -- PS – 03-3</p> <p>Learn the concepts of the Neo-Freudian Theories</p>

	<p><u>Cognitive/knowledge</u></p> <p>Discuss the theoretical concepts of Neo-Freudian theories by</p> <ol style="list-style-type: none"> 1. Alfred Adler- Recall Adler's personality theory in detail Carl Jung- Recall Jungian concept of Complexes, Archetypes, Unconscious (personal and collective), Symbols and Personality structure 2. Eric Fromm- Recall Fromm's personality theory in detail Kohlberg- Recall the stages of moral development 3. Harry Stack Sullivan- Discuss Sullivan's Interpersonal theory in detail Erik Erikson- Recall the stages of psychosocial theory Karen Horney- Recall 4. John Bowlby- Recall the attachment styles and stages of attachment <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Apply the concept Neo-Freudian theories in cases • Define the problem of the patient with the help of the theoretical concept. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Recognizing the Neo-Freudian theories in cases and their Homoeopathic applications.
Learning Outcomes	<p>Competency: HOM - PG -- PS – 03-4</p> <p>Studying the various personality theories and assessment</p> <p><u>Cognitive/knowledge</u></p> <p>Discuss the Personality theories in detail</p> <p>a) Behavioural b) Humanistic c) Social learning theories</p> <p>Discuss techniques and methods used for the assessment of Personality</p> <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Demonstrate the application of the theories in understanding psychopathology and utility in Homoeopathy. • Apply the knowledge of personality to arrive at the similimum • Apply the knowledge to assess Personality using various methods <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Recognizing the Personality theories in relation to fundamentals of Homoeopathy and their application in cases.
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods: Problem based; Case based • Individual based learning methods: self-regulated, deliberate practice
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral

	examination, OSCE <ul style="list-style-type: none"> • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Practice based learning / Professionalism

Topic Name: HOM - PG -- PS -- 04: History and Evolution of Psychiatry in the West and India and the contribution of Homoeopathy

Learning Outcomes	<p>Competency : HOM - PG -- PS – 04-1</p> <p>History and Evolution of Psychiatry in the West and India and the contribution of Homoeopathy</p> <p><u>Cognitive/knowledge</u></p> <ul style="list-style-type: none"> • Discuss the history of Psychiatry dating back to Greek and Roman including in India up to recent advancements of DSM and ICD. • Know the contribution of pioneers who contributed to the movement of psychiatric thought • Recall Hahnemannian concept of mental illnesses • Compare general concept of Psychiatry with Hahnemannian concept <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Applying the knowledge of classification as per DSM V and ICD 11 to arrive at a probable diagnosis • Apply the knowledge to assess Personality of various methods <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Reflect the Historical evolution of Psychiatry and its correlation with Homoeopathy
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods: Problem- based • Individual based learning methods: self-regulated learning, Portfolio- based, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, DOPS, Viva voce
Prescribed Texts:	Refer to list attached

Domains of Competencies	Knowledge & Scholarship/Homoeopathic Orientation
--------------------------------	--

Topic Name: HOM- PG -- PS -- 05: Case receiving and Examination of Psychiatric patient(adult and children)

Learning Outcomes	<p>Competency : HOM - PG -- PS – 05-1</p> <p>Receiving a psychiatric case- case taking, case receiving, psychiatric interview and examination in adult and children</p> <p><u>Cognitive/knowledge</u></p> <ul style="list-style-type: none"> • Discuss the structure and sequence of a child interview • Enumerate and discuss Child Interview techniques and examination- play techniques, projective techniques and direct questioning and mental status examination • Discuss the steps of interviewing and examination of adult psychiatric patient- emphasize on interview techniques and mental status examination. <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Display the skill of case receiving in a psychiatric interview • Demonstrate the techniques of interview • Conduct a mental status examination <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Reflect the concept of case receiving and examination in a psychiatric interview with unprejudiced.
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods: Bedside wards, ward rounds, out-patient based, lab-based • Individual based learning methods: Self-regulated learning, deliberate practice, formative self- assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales,OSCE
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Practice based learning / Professionalism

Topic Name: HOM - PG -- PS -- 06: Clinical manifestations of Psychiatric disorders and understanding of psychopathology

Learning Outcomes	<p>Competency : HOM - PG -- PS – 06-1</p> <p>Understanding the clinical manifestations of Psychiatric disorders Studying psychiatric symptomatology</p> <p><u>Cognitive/knowledge</u></p> <ul style="list-style-type: none"> • Discuss the significance and inter-relation between the basic psychological processes • Classify the psychiatric symptomatology <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Demonstrate case taking of psychiatric patients • Elicit the mental status examination with the knowledge of symptomatology • Arrive at a probable diagnosis or spectrum <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Reflect the symptomatology of psychiatric cases and arrive at the probable diagnosis
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods: Problem-based learning, case-based, Brainstorming, bedside, ward rounds, out- patient based. • Individual based learning methods: self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, DOPS, Viva voce
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Practice based learning

Topic Name: HOM - PG -- PS -- 07: Classification of Psychiatric disorders and correlation with the Hahnemannian approach

Learning Outcomes	<p>Competency : HOM - PG -- PS – 07-1</p> <p>Studying the evolution of the classification of Psychiatric disorders Studying Hahnemannian classification of Psychiatric disorders</p> <p><u>Cognitive/knowledge</u></p> <ul style="list-style-type: none"> • Discuss the evolution of the classification of Psychiatric disorders • Discuss the evolution of DSM and ICD • Compare and contrast DSM versus ICD • Recall the salient features of DSM-5 and ICD-11 • Discuss the Hahnemannian classification of Psychiatric disorders (Aphorism 210-230) <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Apply the knowledge of classification as per DSM V and ICD 11 to arrive at a probable diagnosis • Apply the knowledge of Hahnemannian classification of mental disorders and management strategies to cases <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Reflect the classification of Psychiatric disorder and Hahnemannian classification to arrive at a clinical and Hahnemannian diagnosis.
Learning methods	<ul style="list-style-type: none"> • Peer based learning methods: Problem-based, case based, ward rounds, out-patient based • Individual based learning methods: self-regulated learning, spaced repetition, deliberate practice, formative self-assessment.
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Check list, Rating scales
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation

Topic Name: HOM - PG -- PS -- 08: Diagnostic process in Psychiatry and correlation with Hahnemannian diagnosis

<p>Learning Outcomes</p>	<p>Competency : HOM - PG -- PS – 08-1</p> <p>Diagnostic process in psychiatry and correlation with Hahnemannian diagnosis</p> <p><u>Cognitive/knowledge</u></p> <ul style="list-style-type: none"> • Discuss the basic psychological processes in arriving at a diagnosis. • Recall the parameters to derive the Hahnemannian diagnosis-onset, duration, progression, susceptibility, sensitivity, reactivity, causation, etc. • Discuss in detail the indications, structure, evolution and interpretation of different psychometric tests- Personality tests (objective and projective), IQ assessment, scales for autism, etc. • Recall the indications for lab investigations- radiological tests, CT scan, MRI, haematological investigation, etc. • Define diagnostic formulation and explain the general principles and structure of diagnostic formulation <p><u>Skill :</u></p> <ul style="list-style-type: none"> • Construct the Conation-Cognition-Affect model to diagnose a psychiatric clinical condition • Arrive at the diagnostic formulations of cases of psychiatric disorders. • Apply the concept of susceptibility and sensitivity to cases • Apply the knowledge of classification of Psychiatric disorder as mentioned in Organon of Medicine to arrive at the Hahnemannian diagnosis <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Reflect the process of arriving at a clinical and Hahnemannian diagnosis
<p>Learning Methods</p>	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based , case based • Individual based learning methods: Self regulated learning, formative self assessment
<p>Assessment:</p>	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ

	<ul style="list-style-type: none"> Check list, Rating scales, OSCE, Viva voce
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship/ Patient care / Homoeopathic Orientation / Communication skills/ Practice based learning / Professionalism

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Psychiatry	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Psychiatry	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (Benchmarked by the module-wise distribution.)**VII (2a). Distribution of topics for Theory-Based Assessment.**

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Problem Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 1. Topic Numbers

- HOM- PG -- PS -- 01: Neuro-biological foundations of Psychiatry and the homoeopathic implications
- HOM- PG -- PS -- 02: Psychosocial foundations of Psychiatry and the homoeopathic implications
- HOM -PG -- PS -- 03: Concept of Personality and various approaches with homoeopathic implications
- HOM- PG -- PS --04: History of Psychiatry in the West and India and correlation with Homoeopathy
- HOM- PG -- PS -- 05: Case receiving and Examination of Psychiatric patient(adult and children)
- HOM- PG -- PS -- 06: Clinical manifestations of Psychiatric disorders and understanding of psychopathology
- HOM- PG --PS -- 07: Classification of Psychiatric disorders and correlation with the Hahnemannian approach
- HOM - PG -- PS -- 08: Diagnostic process in Psychiatry and correlation with Hahnemannian diagnosis

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Problem Based	Problem Based Question HOM-PG-PS– 02 OR 03 OR 06 OR 08	20
2	LAQ	HOM-PG-PS – 04 OR 01	10
3	LAQ	HOM-PG-PS – 05 OR 07	10
4	LAQ	HOM-PG-PS – 03 OR 02	10
5	LAQ	HOM-PG-PS – 06 OR 08	10

6	SAQ	HOM-PG-PS – 01	5
7	SAQ	HOM-PG-PS – 08	5
8	SAQ	HOM-PG-PS – 02	5
9	SAQ	HOM-PG-PS – 07	5
10	SAQ	HOM-PG-PS – 06	5
11	SAQ	HOM-PG-PS – 03	5
12	SAQ	HOM-PG-PS – 04	5
13	SAQ	HOM-PG-PS – 05	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination.

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	50 Marks
3	One Short case	20 Marks
4	Logbook	05 Marks
5	Micro Teaching	05 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

1. A Zelko, F. (n.d.). *Psychiatry and Behavioral Sciences (Child Psychology)*.
2. Adolph Von., L. (2002). *Keynotes & Redline Symptoms Of Materia Medica*. B Jain Publishers.
3. Ahmed R, M. (n.d.). *Fundamentals of Repertories:Alchemy of Homeopathic Methodology*. 7 April 2016.
4. Allen, H. C. (2008). *Allen's Keynotes and Characteristics with Comparisons of some of the Leading Remedies of the Materia Medica with Bowl Nosodes*.
5. Ameen, S., & Grover, S. (2018). *A Primer of Research, Publication and Presentation*.
6. B., M., Kay, J., Maj, M., Lieberman, J. A., & Allan, A. (n.d.). *Psychiatry* (3rd Edition).
7. Banerjea, S. K. (2003). *Miasmatic Diagnosis*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=HcgweF9jcywC>

8. Benjamin James, S., Virginia Alcott, S., & Ruiz, S. (2017). *Kaplan & Sadock's Comprehensive Textbook of Psychiatry* (10th ed.).
9. Bhatia, M. S. (2012). *Differential Diagnosis of Mental Health Disorders*. CBS.
10. Bhatia, M. S. (2019). *Essentials of Psychiatry* (9th Edition).
11. Bhugra, D. (1993). *CASE PRESENTATIONS IN PSYCHIATRY*.
12. Bhuiyan, P., Supe, A., & Rege, N. (2015). *The Art of Teaching Medical Students—E-Book*. Elsevier Health Sciences. <https://books.google.co.in/books?id=LTqLCgAAQBAJ>
13. Blackwell, Wiley. (2018). *The Maudsley Prescribing Guidelines in Psychiatry* (13th Edition).
14. Blackwood, A. L. (2023). *Manual of Materia Medica Therapeutics and Pharmacology*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=o9zCswEACAAJ>
15. Boericke, W., & Boericke, W. (2002). *Pocket Manual of Homoeopathic Materia Medica & Repertory: Comprising of the Characteristic and Guiding Symptoms of All Remedies (clinical and Pathogenetic [sic]) Including Indian Drugs*. Kuldeep Jain for B. Jain Publishers. <https://books.google.co.in/books?id=roNzBBiIkXgC>
16. Casey, P., & Kelly, B. (n.d.). *Fish's Clinical Psychopathology: Signs and Symptoms in Psychiatry* (3rd Edition).
17. Chavan, B. S., Gupta, N., Arun, P., Sidana, A., & Jadhav, S. (2013). *Community Mental Health in India*. Jaypee Brothers Medical Publishers Pvt. Limited. <https://books.google.co.in/books?id=vgaZMQEACAAJ>
18. Close, S. (2017). *Genius of Homeopathy Lectures and Essays On Homeopathic Philosophy*. B. Jain Publishing.
19. David, D., Fleminger, S., Kopelman, M., Lovestone, S., Mellers, J., & Folstein, M. (2011). *Lishman's Organic Psychiatry: A Textbook of Neuropsychiatry*. Wiley. https://books.google.co.in/books?id=O16BNn_286sC
20. Dhawale, M. L. (2014). *Principles & Practice of Homoeopathy*.
21. Dubovsky, S. L. (n.d.). *Concise Guide to Clinical Psychiatry* (First Edition).
22. Faridi, W. A. (2013). *Genetics and Genomics*. Pearson Education India. <https://books.google.co.in/books?id=JkY8BAAQBAJ>
23. Farrington, E. A. (2003). *Lectures on Clinical Materia Medica*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=8oY4Hrq36WoC>
24. Gangadhar, B. N., Laxman, G., Andrade, C., Janakiramaiah, G., & Channabasavanna, S. M. (1988). *The nimhans model ect instrument: A technical report*. *Indian journal of psychiatry*, 30(3), 247–251. (n.d.).
25. Geddes, J. R., Andreasen, N. C., & Goodwin, G. M. (2020). *New Oxford Textbook of Psychiatry*. Oxford University Press. https://books.google.co.in/books?id=i_3VxQEACAAJ
26. Hahnemann, S., Dudgeon, R. E., Boericke, W., & Krauss, J. (2013). *Organon of Medicine 5 and 6 Edition*. B. Jain Publishers Pvt. Limited. https://books.google.co.in/books?id=_JGwDAEACAAJ
27. Harden, R. M., & Laidlaw, J. M. (2016). *Essential Skills for a Medical Teacher: An Introduction to Teaching and Learning in Medicine*. Elsevier Health Sciences. https://books.google.co.in/books?id=yTE_DAAAQBAJ

28. Jiloha, R. C., Kukreti, P., & Kataria, D. (2018). *Forensic Psychiatry: An Indian Perspective*. Jaypee Brothers Medical Publishers Pvt. Limited. <https://books.google.co.in/books?id=CIuZvAEACAAJ>
29. Kaufman, D. M., & Milstein, M. J. (2012). *Kaufman's Clinical Neurology for Psychiatrists E-Book*. Elsevier Health Sciences. https://books.google.co.in/books?id=7fXzaAT_pwkC
30. Kent, J. T. (1900). *Lectures on Homoeopathic Philosophy*. Indian Books & Periodicals Publishers. <https://books.google.co.in/books?id=j604AAAAMAAJ>
31. Kent, J. T. (1989). *Lectures on Homoeopathic Materia Medica: Together with Kent's "New Remedies" Incorporated and Arranged in One Alphabetical Order*. Jain. <https://books.google.co.in/books?id=F7drtLJiPDwC>
32. Loscalzo, J., Fauci, A. S., Kasper, D. L., Hauser, S., Longo, D., & Jameson, J. L. (n.d.). *Harrison's Principles of Internal Medicine, Twenty-First Edition* (Twenty-First Edition, 1– (Vol.1 & Vol.2)). McGraw-Hill Education / Medical.
33. Marks, D. F., Murray, M., Evans, B., & Estacio, E. V. (2010). *Health Psychology: Theory, Research and Practice*. SAGE Publications. <https://books.google.co.in/books?id=z-1w8VzMJsYC>
34. Mayer-Gross, W., Slater, E., & Roth, M. (1969). *Clinical Psychiatry*. Baillière, Tindall & Cassell. <https://books.google.co.in/books?id=YcBrAAAAMAAJ>
35. Morgan, C., King, R. A., Weisz, J. R., & Schopler, J. (2017). *Introduction to Psychology 7th Ed* (Standard Edition).
36. Munn, N. L. (1962). *Introduction to Psychology*. Houghton Mifflin. <https://books.google.co.in/books?id=3JT5zQEACAAJ>
37. N M, C. (n.d.). *Study on Materia Medica*. B. Jain Publishers Pvt. Limited.
38. Nash, E. B. (2002). *Leaders in Homoeopathic Therapeutics: With Grouping and Classification: 6th Edition*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=yzFvPAAACAAJ>
39. Niraj, A. (2010). *Niraj Ahuja A Short Textbook Of Psychiatry* (20th ed.). Jaypee Brothers Med.
40. Nussbaum, R. L., McInnes, R. R., & Willard, H. F. (2015). *Thompson & Thompson Genetics in Medicine, 8e*.
41. Oyeboode, F. (2022). *Sims' Symptoms in the Mind: Textbook of Descriptive Psychopathology*. CRC Press.
42. Patel, R. P. (n.d.). *Analysis and Evaluation of Rubrics/Symptoms of Dr. Kent's Repertory of Homeopathic Materia Medica* (6th corrected edition). UBSPD.
43. Penmann, I. D., Ralston, S. H., Strachan, M. W. J., & Hobson, R. (2022). *Davidson's Principles and Practice of Medicine* (24th Edition).
44. Prasad, K., Yadav, R., & Spillane, J. (2023). *Bickerstaff's. Neurological Examination in. Clinical Practice* (SEVENTH ADAPTED EDITION.). wiley.
45. Robert, B., Pedro, R., & Marcia, V. (2021). *Kaplan & Sadock's Synopsis of Psychiatry*.
46. Roberts, H. A. (n.d.). *The Principles and Art of Cure by Homoeopathy: A Modern Textbook*. B. Jain Publishers Pvt. Limited.
47. Rush, A. J., First, M. B., & Blacker, D. (2009). *Handbook of Psychiatric Measures*. American Psychiatric Publishing. <https://books.google.co.in/books?id=NnhyDwAAQBAJ>
48. Sarafino, E. P., & Smith, T. W. (2014). *Health Psychology: Biopsychosocial Interactions*. Wiley. <https://books.google.co.in/books?id=ypODBgAAQBAJ>

49. Sims, A. C. P. (1998). *Symptoms in the Mind: An Introduction to Descriptive Psychopathology* (9th ed.).
50. Speight, P. (1991). *A Comparison of the Chronic Miasms: (Psora, Pseudo-psora, Syphilis, Sycosis)*. Jain Publishers Company.
<https://books.google.co.in/books?id=MNMdzQEACAAJ>
51. Stahl, S. M. (n.d.). *Stahl's Essential Psychopharmacology* (5th ed.). Cambridge University Press.
52. Strub, R. L., & Black, F. W. (n.d.). *The mental status examination in neurology, Richard L. Strub, F. William Black; foreword by Norman Geschwind. F. A. Davis.*
<https://books.google.co.in/books?id=la6i0AEACAAJ>
53. Tasman, A., Riba, M. B., Alarcón, R. D., Alfonso, C. A., Kanba, S., Lecic-Tosevski, D., Ndeti, D. M., Ng, C. H., & Schulze, T. G. (2024). *Tasman's Psychiatry*. Springer International Publishing. <https://books.google.co.in/books?id=HtOPzQEACAAJ>
54. TAYLOR. (2008). *HEALTH PSYCHOLOGY 7E*. McGraw-Hill Education / Asia.
55. Tiwari, S. K. (2007). *Essentials of Repertorization*. B. Jain Publishers (P) Limited.
<https://books.google.co.in/books?id=rO5QPAAACAAJ>

Note: Part I Paper 2 separately after Part II Paper 1 & 2.

Part II Paper 1,2

V. Topics and Topic Objectives.

Part II – Paper I:

All clinical states will include the homoeopathic application and hence will include

- i) Homoeopathic case taking
- ii) Hahnemannian classification
- iii) Causation including correlation with biological and psychosocial correlates
- iv) Psychological correlation with miasmatic states
- v) Assessment of susceptibility
- vi) Approach to totality and processing
- vii) Homoeopathic and ancillary management including differential Materia Medica

- HOM - PG – PS – 09: Homoeopathy in Common Mental Disorders
- HOM - PG – PS – 10: Homoeopathy in Major Psychiatric disorders
- HOM - PG –PS –11: Scope and limitation of Homoeopathy in Substance related disorders
- HOM -PG -PS- 12: Scope and limitation of Homoeopathy in Emergency Psychiatry and Acute Organic syndromes
- HOM -PG - PS -13: Scope and limitation of Homoeopathy in Personality disorders including disorders of Impulse control
- HOM - PG - PS -14: Scope and limitation of Homoeopathy in Sexuality, Sexual dysfunction and Gender identity disorders
- HOM -PG - PS -15: Homoeopathy in Eating and Sleeping disorders

Part II – Paper 2:

- HOM - PG–PS– 16 Psychosomatic disorders
- HOM - PG – PS– 17: Homoeopathy in Geriatric Psychiatry including illnesses involving Cognitive decline
- HOM -PG --PS --18: Homoeopathy in Special situations: PTSD, Culture bound syndromes, Adjustment disorder and Factitious disorder and Liaison Psychiatry
- HOM -PG -- PS -- 19: Child Psychiatry
- HOM - PG--PS--20: Preventive aspects of Mental Disorders, Psychotherapies, Psychopharmacological treatments, Rehabilitative Psychiatry. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness
- HOM -PG – PS– 21: Homoeopathy in Community Psychiatry and National Mental Health Programmes
- HOM- PG – PS – 22: Forensic Psychiatry, Mental Health Act 2017 and Ethics of Psychiatric treatments

VI. Topic description

Part- II/ PAPER-I

Topic name: HOM-PG – PS – 09 Common Mental Disorders

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry
------------------------	--

	<p>with a general conceptual and evidence-based approach for the application of Homoeopathy In common mental disorders</p> <ul style="list-style-type: none"> • Anxiety disorders including Panic disorders and phobias • Somatoform disorders • Dissociative disorders • Obsessive compulsive disorders
Learning Outcomes:	<p>Competency- : HOM-PG – PS – 09 -1 : Students should demonstrate a basic ability to elicit a psychiatric history, showing awareness of key areas of importance for diagnosing in cases of Anxiety disorders and other neurotic disorder</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Recognize alteration of normal anxiety to an abnormal state • Recognize and explain the neurological/Biological aspects of Anxiety disorders • Describe Anxiety disorders its types, clinical presentation, diagnostic criteria as per ICD11/ DSM V, scale to evaluate and management • Illustrate the clinic-psycho-pathological correlation of Anxiety disorders and its types, integrate these with mental diseases understanding from Organon of medicine <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> • Trace the relevant information from patient, and from bystanders • Identify and assemble the relevant observations on records • Trace the pre-morbid and morbid state. • Collect developmental history effectively along with psychodynamics of the case • Perform General medical examination, • Perform Mental status examination • Use ICD 11, DSM V for diagnosis • Perform and interpret necessary investigations • Assess report of basic investigations to identify and rule out if any biological conditions responsible • Construct the homoeopathic diagnosis as per Hahnemann or various stalwarts of Homoeopathy • Construct the totality of symptoms with as per Organon of medicine • Choose the suitable repertory appropriate to the Case for repertorization • Select the appropriate similimum with reference to Materiamedica • Explain the patient or patient caretaker plan of treatment

Reflection:

- Review scope and limitation of management of current or the chronic state of the patient with anxiety disorder
- Generate and publish case reports or case series from various clinical experiences

Competency : HOM-PG – PS – 09 -2

Students should demonstrate a basic ability to elicit a psychiatric history, showing awareness of key areas of importance for diagnosing in cases of Somatoform disorders

Cognitive/Knowledge:

- Describe the clinical features of somatoform disorders
- Recall and describe somatoform disorders and its types, clinical presentation, diagnostic criteria as per ICD 11, DSM V , scale to evaluate and management
- Evolve clinic-psycho-pathological correlation of somatoform disorders and its types, integrate these with mental diseases understanding from Organon of medicine
- Justify the application of homoeopathic philosophies in psychiatric cases of somatoform disorders

Procedure/skill:

- Organize by gathering the relevant clinical and personal information from patient, and from bystanders by demonstrating the compassion
- Identify and record relevant observations
- Detect pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case
- Conduct General medical examination,
- Conduct Mental status examination
- Use ICD 11, DSM V for diagnosis
- Perform and interpret appropriate investigation
- Classify the diseases as per Hahnemann and various stalwarts' guidelines.
- Demonstrate General management/Supportive therapy care
- Select appropriate repertory and perform repertorial analysis
- Select appropriate similimum with due reference to Materia medica.
- Explain the patient/care takers regarding plan of treatment.

Reflection:

- Review scope and limitation of management of current or the chronic state of the patient with somatoform disorders
- Generate and publish case reports or case series from various clinical experiences

Competency : HOM-PG – PS – 09 -3

Identify and Diagnose, Dissociative disorders

Cognitive/Knowledge:

- Recall and Describe Dissociative Disorders its types , classification, diagnostic criteria and general management
- Illustrate the use of various scales to evaluate and manage cases of dissociative disorders
- Compare the Classification of the diseases per Hahnemann ad various stalwarts

Procedure/skill:

- Demonstrate the psychiatric interview techniques for gathering relevant clinical and psychological information from patient, or bystanders.
- Assemble all the relevant observations on record
- Trace the pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case
- Conduct General medical examination,
- Conduct Mental status examination
- Select ICD11, DSM V for diagnosis
- Construct the disease classification as per Hahnemann or various stalwarts of Homoeopathy
- Construct the totality of symptoms with as per Organon of medicine
- Select appropriate repertory for repertorization
- Select the appropriate similimum with reference to Materia medica
- Explain the patient or patient caretaker plan of treatment
- Plan for ancillary measurements in various conditions

Reflection:

- Orient and guide the patient and relatives about the disease, its prognosis and further management plan over the course of time in acute or chronic cases
- Review the Scope and limitation of homoeopathy for these conditions and plan out therapeutic plan based on clinical

	<p>experiences</p> <ul style="list-style-type: none"> • Generate and publish case reports or case series from various clinical experiences <p>Competency : HOM-PG – PS – 09 -4</p> <p>Identify and diagnose Obsessive compulsive disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Describe Obsessive compulsive Disorders and its related disorders. Their classification, aetiology, clinical features, diagnostic criteria as per ICD 11/DSM V, scales to evaluate and its management • Compare the Classification of the disorder as per Hahnemann and various stalwarts <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> • Perform psychiatric interview to gather relevant information from patient, and from bystanders • Identify and Record relevant observations • Detect pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Select ICD11, DSM V for diagnosis • Perform and interpret appropriate investigation • Construct disease classification as per Hahnemann and various stalwarts' guidelines. • Organize general management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Obsessive compulsive disorders • Prepare and publish case report or case series from vast clinical experiences
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based

	<ul style="list-style-type: none"> Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ Check list, Rating scales, DOPS
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM-PG – PS – 10 Homoeopathy in Major psychiatric disorders

Topic Overview:	<p>This topic will provide students of MD Homoeopathic Psychiatry with knowledge about Major psychiatric cases and role of homeopathy in understanding and management of major psychiatric conditions viz.</p> <ul style="list-style-type: none"> Mood disorders Schizophrenia spectrum disorders
Learning Outcomes:	<p>Competency : HOM-PG – PS – 10 -1 Recognize the concept of general philosophy as applied in homoeopathy in co-relation to Mood disorders and puerperal disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> List and state Mood and its qualities in normal expression along with travel to abnormality Explain Mood disorder/s, its prevalence and symptoms Recognize and explain the neurological/biological/psychological aspects of mood disorder/s Recall and describe mood disorders and its types, clinical presentation, diagnostic criteria as per ICD 11, DSM V, scale to evaluate and management Illustrate clinic-psycho-pathological correlation of mood disorders and its types, integrate these with mental diseases understanding from Organon of medicine Justify the application of individualization in the cases of

Mood disorders

Procedure/skill:

- Perform the psychiatric interview and gather relevant information from patient, and from bystanders
- Identify and record relevant observations
- Detect pre-morbid and morbid state.
- Trace the developmental history effectively along with psychodynamics of the case/s
- Conduct General medical examination,
- Conduct Mental status examination
- Use ICD11, DSM V for diagnosis
- Construct disease classification as per Hahnemann and various stalwarts' guidelines.
- Sketch General management/Supportive therapy care
- Construct the totality of symptoms as per Principles of Organon of medicine using appropriate repertory
- Select appropriate similimum with due reference to Materia medica.
- Explain the patient/care takers regarding plan of treatment.

Reflection:

- To understand the scope and limitation of holistic, individualization concepts of homoeopathy for Mood Disorder cases
- Write an original article on the concept/s and its application in mental health, illness and cure.

Competency : HOM-PG – PS – 10 -2

Know, remember and apply the role of homoeopathy in cases of Schizophrenia spectrum disorders

Cognitive/Knowledge:

- Recall and describe perception, its qualities and its alteration to abnormality
- Recall and describe Schizophrenia spectrum disorders its types, clinical presentation, diagnostic criteria, scale to evaluate and management
- Comparing the different ways in which ICD 11 and DSM V approach the classification of schizophrenia spectrum disorders
- Describe the neurodevelopmental and neurodegenerative aspects of Schizophrenia spectrum disorders
- Explain clinic-psycho-pathological correlation of schizophrenia spectrum disorders and its types, integrate

	<p>these with mental diseases understanding from Organon of medicine</p> <ul style="list-style-type: none"> • Explain various therapeutic measures to manage cases of schizophrenia <p><u>Procedure/skills:</u></p> <ul style="list-style-type: none"> • Organize relevant information from patient, and from bystanders on record • Identify and Record relevant observations • Detect the pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case/s • Conduct General medical examination, • Conduct Mental status examination • Use ICD 11, DSM V for diagnosis • Perform and interpret appropriate investigation • Construct the classification of the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <p>Scope of homoeopathic in Schizophrenia spectrum disorders Prepare and publish case report/s or case series on these conditions</p>
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Bedside, ward rounds, out-patient based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, DOPS, OSCE
Prescribed Texts:	Refer to list attached

Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning
--------------------------------	---

Topic name: HOM-PG – PS – 11 Scope and limitation of homoeopathy in Substance related disorders

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy for Substance related and addictive disorders
Learning Outcomes:	<p>Competency: HOM-PG – PS – 11 -1</p> <p>Review Scope and limitation of homoeopathy for Substance related and addictive disorders viz. (Alcohol, Tobacco, Cannabis, Cocaine, Caffeine, Hallucinogens, Inhalant, Methadone, Amphetamines etc.)</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Recall and describe the type and uses of various substances along with their psycho-neurological actions Recall and describe the Bio-psycho-social factors which underlie the substance related and addictive disorders Illustrate clinic-psycho-pathological correlation of substance related and addictive disorders, its types, integrate these with mental diseases understanding from Organon of medicine explain the integration of the fundamental and dominant miasms in the causation of Substance related and addictive disorders Illustrate the concept of susceptible constitutions and relate to the determinants of Substance related and addictive disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> Conduct psychiatric interview to gather relevant information from patient, and from bystanders Identify and Record relevant observations Trace the pre-morbid and morbid state. Trace the developmental history effectively along with psychodynamics of the case Conduct General medical examination, Conduct Mental status examination Select ICD 11, DSM V for diagnosis Perform and interpret appropriate investigation Construct the classification as per Hahnemann and various stalwarts' guidelines. Sketch the General management/Supportive therapy care Construct the totality of symptoms as per Principles of Organon

	<p>of medicine.</p> <ul style="list-style-type: none"> • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Substance related and addictive disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Learning methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, Case-based, Bedside, ward rounds, out-patient based, role play • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment : Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, OSCE
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM - PG – PS – 12 Scope and limitation of homoeopathy in Emergency Psychiatry and Acute organic Syndromes

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy in cases of Psychiatric emergencies and acute organic syndromes
Learning Outcomes:	<p>Competency : HOM-PG – PS – 12 -1</p> <p>Review Scope and limitation of homoeopathy in cases of emergency Suicide, Acute Psychotic episodes, Violent patients, Neglect or abuse in children, Rape etc. in psychiatry and acute organic disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • State the type of psychiatric emergencies are and their clinical presentations • Describe various challenges and steps required to manage

	<p>psychiatric emergencies from psychiatric texts and Hahnemannian guidelines</p> <ul style="list-style-type: none"> • Discuss and explain the Bio-psycho-social factors which underlie various psychiatric emergencies • Explain the concept of susceptible constitutions and relate to the determinants of Substance related and addictive disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Isolate the patient or vacant the casualty room for patient/s, nursing staffs and themselves • Assemble all the relevant information gathered from patient, and from bystanders • Display the relevant observations • Conduct the medical and psychiatric triage • Trace the pre-morbid and morbid state. • Conduct General medical examination, • Conduct Mental status examination • Use ICD11, DSM V for diagnosis • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Perform the restrain processes effectively • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Psychiatric emergencies • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment:

	<p>LAQ SAQ</p> <ul style="list-style-type: none"> • Check list, Rating scales, OSCE
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning
Learning Outcomes:	<p>Competency : HOM-PG – PS – 12 -2</p> <p>Review Scope and limitation of homoeopathy in cases of acute organic disorders (Delirium, Acute confusion state, Intoxications, Organic psychosis, Transient amnesia etc) and organic brain syndrome(dementia)</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • State the type of acute organic syndromes and their clinical presentations • Describe various challenges and steps required to manage acute organic syndromes from psychiatric texts and Hahnemannian guidelines • Describe various challenges and steps required to manage organic brain syndrome from psychiatric texts and Hahnemannian guidelines • Discuss and explain the Bio-psycho-social factors which underlie various psychiatric emergencies • Explain the concept of susceptible constitutions and relate to the determinants of Substance related and addictive disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Isolate the patient or vacant the casualty room for patient/s, nursing staffs and themselves • Assemble all the relevant information gathered from patient, and from bystanders • Display the relevant observations • Conduct General medical examination, • Conduct Mental status examination • Conduct the neuropsychiatric mental status examination • Use ICD11, DSM V for diagnosis • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Perform the restrain processes effectively • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis

	<ul style="list-style-type: none"> • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Acute organic syndromes • Scope and limitation of homoeopathy for organic brain syndrome • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, brain storming, ward rounds, out-patient based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, OSCE
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM-PG – PS – 13 Scope and limitation of homoeopathy in Personality disorders including disorders of impulse control

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy for cases of Personality and Impulse control disorders
Learning Outcomes:	<p>Competency : HOM-PG – PS – 13 -1</p> <p>Review Scope and limitation of homoeopathy in cases of personality disorders as per ICD 11 Trait qualifier and specifiers (Mild, Moderate or severe personality disorder), and disorders of impulse control (Intermittent explosive disorders, kleptomania, pyromania, Gambling, Internet/porn addictions)</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Recall and describe the type and their features of various

	<p>personality disorders and impulse control disorders</p> <ul style="list-style-type: none"> • Describe various Bio-Psycho-Social causes of various personality and impulse control disorders • Illustrate the integration of the fundamental and dominant miasms in the causation of Personality and Impulse control disorders • Estimate the nature of susceptible constitutions and relate to that with personality and impulse control disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Perform psychiatric interview to Gather relevant information from patient, and from bystanders • Identify and Record relevant observations • Trace the pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Perform and interpret appropriate investigation • Use ICD11, DSM V for diagnosis • Construct the disease classification as per Hahnemann and various stalwarts' guidelines. • Sketch the General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Personality and Impulse control disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based, case based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment : Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE

	<ul style="list-style-type: none"> • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, DOPS
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM- PG – PS – 14 Scope and limitation of homoeopathy in Sexuality, Sexual dysfunction and Gender identity disorders

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy in Sexuality, Sexual dysfunction (Hypoactive sexual desire, Sexual arousal disorders, Erectile dysfunction, Orgasm disorders, Sexual pain disorders, Premature ejaculation etc) and gender identity disorders (Gender dysphoria)
Learning Outcomes:	<p>Competency : HOM-PG – PS – 14 -1</p> <p>Review Scope and limitation of homoeopathy in Sexuality, Sexual dysfunctions and Gender identity disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Recall and describe the normal sexuality and its development over the course of time • Describe various psychosexual factors like sexual identity, gender identity and sexual orientation • Describe the types of sexual dysfunctions of each genders • Describe Gender dysphoria with its clinical features • Describe the Bio-psycho-social factors which underlie the sexual dysfunctions and gender identity disorders • Illustrate the integration of the fundamental and dominant miasms in the causation of Sexual dysfunction and gender identity disorders • Apply the concept of susceptible constitutions and relate to the determinants of Sexual dysfunction and gender identity disorder cases <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Conduct psychiatric interview to gather relevant information from patient, and from bystanders • Demonstrate the elaborative and effective sex history evaluation • Identify and record relevant observations

	<ul style="list-style-type: none"> Trace pre-morbid and morbid state. Trace the developmental history effectively along with psychodynamics of the case Conduct General medical examination, Conduct Mental status examination Select ICD11, DSM V for diagnosing Perform and interpret appropriate investigation Classify the diseases as per Hahnemann and various stalwarts' guidelines. Sketch the General management/Supportive therapy care Construct the totality of symptoms as per Principles of Organon of medicine. Select appropriate repertory and perform repertorial analysis Select appropriate similimum with due reference to Materia medica. Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> Scope and limitation of homoeopathy for Sexual dysfunction and Gender identity disorders Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
Learning Methods	<ul style="list-style-type: none"> Peer based learning methods : Problem-based, ward rounds, out-patient based Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ Check list, Rating scales, Viva voce
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM - PG – PS – 15 Homoeopathy in Eating and Sleeping disorders

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry to review Scope and limitation of homoeopathy in Eating and Sleeping disorders
------------------------	---

Learning Outcomes:	<p>Competency : HOM-PG – PS – 15 -1</p> <p>Review Scope and limitation of homoeopathy for Eating and Sleeping disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Describe Eating and Sleeping disorders with their types and clinical features • Describe various etiological factors from Bio-Psycho-Social perspective responsible for genesis of these disorders • State the use of various scales for assessment and management of these disorders • Illustrate the integration of the fundamental and dominant miasms with the causation of these disorders • Apply the concept of susceptible constitutions and relate to the determinants of these disorders <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Conduct the psychiatric interview and gather relevant information from patient, and from bystanders • Identify and record relevant observations • Trace pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics of the case • Conduct General medical examination, • Conduct Mental status examination • Use ICD11, DSMV for diagnosis • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Sketch General management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materiamedica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for Eating and Sleeping disorders • Publish and case report or case series demonstrating the effectiveness of homoeopathy in management of these disorders
	<p>Learning Methods</p> <ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-

	<p>patient based</p> <ul style="list-style-type: none"> Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case, long case, objective structured oral examination, OSCE Written Examinations: Problem Based Learning assessment: LAQ SAQ Checklist, Rating scales, OSCE
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Part II (Paper 2):

Topic name: HOM - PG – PS – 16 Homoeopathy in Psychosomatic Disorders

Topic Overview:	<p>This topic will provide students of MD Homoeopathic Psychiatry to review and explore scope of homoeopathic in Psychosomatic Disorders</p> <ul style="list-style-type: none"> Somatic symptom disorder affecting different systems (Functional GIT, palliative condition like Cancer) Illness anxiety disorder Functional neurological symptom disorders
Learning Outcomes:	<p>Competency: HOM-PG – PS – 16 -1</p> <p>Review and explore scope of homoeopathic psychiatry in Psychosomatic disorders</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Recall and discuss the concept of Psychosomatic medicine and psychosomatic disorders Recall and describe various types of psychosomatic disorders and differentiate their clinical features Discuss various trends in understand and evaluating the cases of psychosomatic disorders Describe the Bio-Psycho-Social concept of etiopathogenesis of Psychosomatic disorders and integrate it with the concept of causation as per Homoeopathic philosophy Describe the general guidelines of managing these conditions and co-relate with the Hahnemannian guidelines of management <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> Conduct psychiatric interview to gather relevant information from patient, and from bystanders

	<ul style="list-style-type: none"> ▪ Identify and Record relevant observations ▪ Trace the pre-morbid and morbid state. ▪ Trace the developmental history effectively along with psychodynamics of the case ▪ Perform and interpret appropriate investigation for differentiating between medical condition and the psychosomatic disorders ▪ Perform General medical examination ▪ Conduct Mental status examination ▪ Select ICD11, DSMV for diagnosis ▪ Classify the diseases as per Hahnemann and various stalwarts' guidelines. ▪ Give General management/Supportive therapy care, like palliative care in conditions like cancer ▪ Arrive at the totality of symptoms as per Principles of Organon of medicine. ▪ Select appropriate repertory and perform repertorial analysis ▪ Select appropriate similimum with due reference to Materiamedica. <p>Explain the patient/care takers regarding plan of treatment.</p> <p><u>Reflection:</u></p> <p>Explore scope of homoeopathic psychiatry in cases of Psychosomatic Disorders</p>
--	---

Topic name: HOM-PG – PS – 17 Homoeopathy in Geriatric psychiatry including illness involving cognitive decline

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry understanding and application of Homoeopathy in Geriatric psychiatry (Delirium, Depressive disorders, Late life depression, psychosis) and illness involving cognitive decline (Neurocognitive disorders- Major or Minor, illness related)
Learning Outcomes:	<p>Competency: HOM-PG – PS – 17 -1</p> <p>Review and explore scope and limit of homoeopathic psychiatry in Geriatric psychiatry and cognitive decline.</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> ▪ Describe the age and aging along with bio-psycho-social changes ▪ Describe and explain the old age development according to various psychologists viz. Freud, Erickson etc. ▪ Illustrate and explain the neuropsychological evaluation in cases of geriatric cases ▪ Compare and illustrate a sound understanding of the Bio-Psycho-Social concept of etiopathogenesis in Geriatric psychiatric cases

	<p>and integrate it with the concept of causation as per Homoeopathic philosophy</p> <p><u>Procedure/skills:</u></p> <ul style="list-style-type: none"> ▪ Select to secure the causality for themselves, for patients, for nursing staff etc. ▪ Trace the relevant information from patient, and from bystanders ▪ Identify and record relevant observations ▪ Trace the pre-morbid and morbid state. ▪ Trace the developmental history effectively along with psychodynamics of the cases ▪ Perform General medical examination, ▪ Conduct Mental status examination ▪ Conduct neuropsychiatric mental status examination or MMSE ▪ Select ICD11, DSM V for diagnosis ▪ Assess the need for any of the active investigations like EEG, CT, MRI etc. ▪ Construct the disease classification as per Hahnemann and various stalwarts' guidelines. ▪ Sketch the general management/Supportive therapy care ▪ Construct the totality of symptoms as per Principles of Organon of medicine. ▪ Select appropriate repertory and perform repertorial analysis ▪ Select appropriate similimum with due reference to Materiamedica. ▪ Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> ▪ Explore scope and limit of homoeopathy in Geriatric Psychiatry and cases with cognitive disorders ▪ Formulate a paper on the role of homoeopathy in emergency psychiatry conditions
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, OSCE
Prescribed Texts:	Refer to list attached
Domain	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation /

competencies	Practice Based Learning
--------------	-------------------------

Topic name: HOM-PG – PS – 18 Homoeopathy in special situations: PTSD, Culture bound syndromes, adjustment disorder and factitious disorder and Liaison psychiatry

Topic Overview:	<p>This topic will provide students of MD Homoeopathic Psychiatry an exposure to understand and experience the role and scope of Homeopathy in various special situations-</p> <p>PTSD</p> <p>Culture bound syndromes</p> <p>Adjustment disorders</p> <p>Factitious disorders</p> <p>Liaison psychiatry</p>
Learning Outcomes:	<p>Competency: HOM-PG – PS – 18 -1</p> <p>Identify and diagnose cases of PTSD, Culture bound syndrome, Adjustment disorders and apply the understanding of Liaison psychiatry</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Define above mentioned psychiatric conditions with their clinical features • Describe various Bio-Psycho-Social factors responsible for the development of these psychiatric conditions • Diagnose these conditions with use of various psychiatric classification systems • Describe and justify the relationship between medical and psychiatric disorders <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> • Demonstrate the collection of relevant information from patient, and from bystanders • Identify and record relevant observations • Identify and record pre-morbid and morbid state. • Trace the developmental history effectively along with psychodynamics • Perform General medical examination, • Perform Mental status examination • Diagnose as per ICD11, DSMV • Perform and interpret appropriate investigation • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Demonstrate the relation between medical condition with that of psychiatric aspects and guide the general management/Supportive therapy care • Construct the totality of symptoms as per Principles of Organon

	<p>of medicine.</p> <ul style="list-style-type: none"> • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for special situations and as an liaison psychiatry • Prepare and publish case report or case series from vast clinical experiences
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment (including Problem Based Learning assessment: 20% (weightage) • Practical exam - 100% • Written Examinations: 2 x 3 hour written papers. 80% • Checklist, Rating scales
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning
Learning Outcomes:	<p>Competency : HOM-PG – PS – 18 -2 Describe role and scope of homoeopathy in Liaison psychiatry</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Define consultation liaison psychiatry • Describe various clinical conditions which call for the need of consultation liaison psychiatry • Describe role of consultation liaison psychiatry in special situations • Describe the role of homoeopathic psychiatrist as an active in field of consultation psychiatry <p><u>Procedure/skill:</u></p> <ul style="list-style-type: none"> • Demonstrate the method of consulting across multiple specialties needing the assistance of a homoeopathic psychiatrist • Demonstrate the method of evolving a relationship with patients/relatives across the wide spectrum of clinical conditions needing the intervention of homoeopathic psychiatrist • Demonstrate the method of assessing the mental health needs of patients across the spectrum needing the assistance of

	<p>homoeopathic psychiatrist</p> <ul style="list-style-type: none"> • Demonstrate the method of advising effective and meaningful intervention in referred patients and the follow up • Demonstrate the method of advising the consultants of other specialties who have sought assistance for their patients. <p><u>Reflection:</u></p> <ul style="list-style-type: none"> • Scope and limitation of homoeopathy for special situations and as an liaison psychiatry • Prepare and publish case report or case series from vast clinical experiences
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based, case based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM-PG – PS – 19 Homoeopathy in Child Psychiatry

Topic Overview:	<p>This topic will provide students of MD Homoeopathic Psychiatry an exposure to understand and experience the role and scope of Homeopathy in child psychiatry – Intellectual Disability, Learning Disability, Communication disorders, PDD, ADD, Conduct, Elimination disorder, School mental health, Anxiety, Motor disorder, Mood and Psychotic disorders</p>
Learning Outcomes:	<p>Competency: HOM-PG – PS – 19 -1</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Describe the developmental disorders of speech and language • Describe specific developmental disorders of scholastic skills • Describe Pervasive developmental disorders and its clinical features • Describe and discuss anxiety, mood and psychotic disorders in

	<p>children</p> <ul style="list-style-type: none"> • Describe the conduct disorders and its clinical features • Plan and organize school mental health activities to identify and address child psychiatric conditions <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Demonstrate the collection of relevant information from children, care takers or teachers • Identify and record relevant observations • Identify and record pre-morbid and morbid state. • Trace the developmental history effectively • Perform General medical examination, • Perform Mental status examination • Diagnose as per ICD11, DSM V • Perform and interpret appropriate investigation, Tests etc. • Classify the diseases as per Hahnemann and various stalwarts' guidelines. • Construct the totality of symptoms as per Principles of Organon of medicine. • Select appropriate repertory and perform repertorial analysis • Select appropriate similimum with due reference to Materia medica. • Explain the patient/care takers regarding plan of treatment <p><u>Reflection:</u></p> <p>Scope of Homoeopathy in childhood disorder. Write and publish articles on various case experiences</p>
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based, case based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment : Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, DOPS
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM-PG – PS – 20 Preventive aspects of Mental Disorders, Psychotherapies, Psychopharmacological treatment, Rehabilitative Psychiatry. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry understanding and application of Homoeopathy for Preventing mental illnesses, Rehabilitation of psychiatric conditions and role of Psychotherapies in their management
Learning Outcomes:	<p>Competency : HOM-PG – PS – 20 -1</p> <p>Review Scope & limitations knowledge related to Psychotherapies and Psychopharmacological treatment. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> Plan and organize mental health promotion activities in various fields Describe and justify the use of various psychotherapies in various psychiatric conditions Describe and explain the role of various modern psychiatric drugs and their effects/side effects Define and state the importance of aphorism 210 to 230 <p><u>Procedure/skills:</u></p> <ul style="list-style-type: none"> Demonstrate the application of preventive aspect of psychiatry by conducting various awareness camps Measure the effect of various psychotherapies on various psychiatric conditions Measure the effect of various psychopharmacological drugs for planning the homoeopathic posology Demonstrate the comparative effects of Homoeopathy with other system for management of mental illness <p><u>Reflection:</u></p> <ul style="list-style-type: none"> Scope & limitations of Homoeopathy in comparison to other systems of medicine in Preventive and rehabilitative aspects of mental illnesses
Learning Methods	<ul style="list-style-type: none"> Peer based learning methods : Problem-based, Community postings Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment, Port-folio based
Assessment:	<ul style="list-style-type: none"> Continuous / Programmatic assessment : Assignments, MCQ Practical exam – short case, long case, objective structured

	oral examination, OSCE <ul style="list-style-type: none"> • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Check list, Rating scales
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM-PG – PS – 21 Homoeopathy in Community psychiatry and National mental health programmes

Topic Overview:	This topic will provide students of MD Homoeopathic Psychiatry understanding and application of Homoeopathy in community care and their role in various National mental health programmes
Learning Outcomes:	<p>Competency : HOM-PG – PS – 21 -1</p> <p>Cognitive/Knowledge:</p> <ul style="list-style-type: none"> • Describe various mental health promotional activities in community care • Describe national mental health and its various policies • Plan and organize community activities as per need under guidelines of National mental health programmes <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Demonstrate the active role in planning and conducting mental health related activities in community • Measure various clinical conditions prevalence in community and use of various scales <p><u>Reflection:</u></p> <p>Scope of Homoeopathy in community psychiatry and role in National mental health programmes</p>
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, Community postings • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist,Rating scales,OSCE

Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

Topic name: HOM- PG – PS – 22 Forensic Psychiatry, Mental Health Act 2017 and ethics of psychiatry treatment

Topic Overview:	This topic will provide MD Homoeopathy Psychiatry students the knowledge related to forensic psychiatry and various ethics required in practice of psychiatry practices
Learning Outcomes:	<p>Competency : HOM-PG – PS – 22 -1</p> <p><u>Cognitive/Knowledge:</u></p> <ul style="list-style-type: none"> • Describe forensic psychiatry and its role for homoeopaths • Describe mental health care act 2017 and various striking features • Describe various ethics in psychiatric practices <p><u>Procedure/Skills:</u></p> <ul style="list-style-type: none"> • Demonstrate the application of above knowledge in handling and management of psychiatric cases in various health care set ups <p><u>Reflection:</u></p> <p>Scope of forensic psychiatry and ethics in psychiatry for Homoeopathic psychiatrists</p>
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, Library bases, e-learning • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessment:	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales
Prescribed Texts:	Refer to list attached
Domains of Competencies	Knowledge & Scholarship / Patient Care / Homoeopathic Orientation / Practice Based Learning

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training 2nd Term Test: During twelfth month of training	During eighteenth month of training

VII (1). M.D. (Homoeopathy) Part-II examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Psychiatry	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Psychiatry	100	50		
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of Topics for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Problem Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 2 – Paper 1. Topic Numbers

- HOM-PG – PS – 09: Homoeopathy in Common Mental Disorders
- HOM-PG – PS – 10: Homoeopathy in Major Psychiatric disorders
- HOM-PG –PS –11: Scope and limitation of Homoeopathy in Substance related disorders
- HOM- PG -PS- 12: Scope and limitation of Homoeopathy in Emergency Psychiatry and Acute Organic syndromes
- HOM-PG - PS -13: Scope and limitation of Homoeopathy in Personality disorders including disorders of Impulse control
- HOM-PG - PS -14: Scope and limitation of Homoeopathy in Sexuality, Sexual dysfunction and Gender identity disorders
- HOM-PG - PS -15: Homoeopathy in Eating and Sleeping disorders

Part 2 – Paper 2: Topic Numbers

- HOM- PG–PS– 16 Psychosomatic disorders
- HOM- PG – PS– 17: Homoeopathy in Geriatric Psychiatry including illnesses involving Cognitive decline
- HOM-PG --PS --18: Homoeopathy in Special situations: PTSD, Culture bound syndromes, Adjustment disorder and Factitious disorder and Liaison Psychiatry
- HOM-PG -- PS -- 19: Child Psychiatry
- HOM-PG--PS--20: Preventive aspects of Mental Disorders, Psychotherapies, Psychopharmacological treatments, Rehabilitative Psychiatry. Homoeopathy in comparison to other systems of medicine in the treatment of mental illness
- HOM-PG – PS– 21: Homoeopathy in Community Psychiatry and National Mental Health Programmes
- HOM-PG – PS – 22: Forensic Psychiatry, Mental Health Act 2017 and Ethics of Psychiatric treatments

VII (2b). Question Paper Layout

Paper 1

Q. No.	Type of Question	Content	Marks
1	Problem Based	Problem Based Question HOM-PG-PS- 9 OR 10 OR 11(Substance related disorder) OR 12 (Acute Organic Syndromes) OR (Personality disorder) OR 15 (Sleeping disorder)	20
2	LAQ	HOM-PG-PS – 12 (Emergency Psychiatry) OR 11 (Substance related disorder)	10
3	LAQ	HOM-PG-PS – 13 (Disorder of Impulse control) OR 10	10
4	LAQ	HOM-PG-PS – 14	10
5	LAQ	HOM-PG-PS – 15 (Eating disorder) OR 13 (Personality disorder) OR 9 (Common mental disorder)	10
6	SAQ	HOM-PG-PS – 09	5
7	SAQ	HOM-PG-PS – 10	5
8	SAQ	HOM-PG-PS – 11	5
9	SAQ	HOM-PG-PS – 12 (Acute Organic Syndrome)	5
10	SAQ	HOM-PG-PS – 13 (Personality disorder)	5
11	SAQ	HOM-PG-PS – 15 (Sleeping disorder)	5
12	SAQ	HOM-PG-PS – 14 (Sexuality and sexual dysfunction)	5
13	SAQ	HOM-PG-PS – 12 (Emergency Psychiatry)	5

Paper 2

Q. No.	Type of Question	Content	Marks
1	Application Based	Case Based Question HOM-PG-PS- 16 OR 19 OR 20 OR 21 OR 22	20
2	LAQ	HOM-PG-PS – 18 OR 22 (Ethics of Psychiatric treatments)	10
3	LAQ	HOM-PG-PS – 16 OR 22 (Forensic Psychiatry)	10
4	LAQ	HOM-PG-PS – 19 OR 17	10
5	LAQ	HOM-PG-PS – 20 OR 21	10
6	SAQ	HOM-PG-PS – 22	5
7	SAQ	HOM-PG-PS – 18 (Culture based Syndromes,Adjustment disorder)	5
8	SAQ	HOM-PG-PS – 16	5
9	SAQ	HOM-PG-PS – 17	5
10	SAQ	HOM-PG-PS – 18	5
11	SAQ	HOM-PG-PS – 19	5
12	SAQ	HOM-PG-PS – 20	5
13	SAQ	HOM-PG-PS – 21	5

VII (3). Assessment Blueprint –Practical / Viva.**VII (3a). Clinical examination.**

Clinical		
1	Internal Assessment	20 Marks
2	One Long Case	50 Marks
3	One Short case	20 Marks
4	Logbook	05 Marks
5	Micro Teaching	05 Marks
Total		100 Marks

VII (3b). Viva Voce.

Viva		
1	Internal Assessment	20 Marks
1	Discussion of Synopsis	20 Marks
2	Viva (Applied Homoeopathy, Clinical understanding, Laboratory / Imaging investigations – 20 + 20 + 20)	60 Marks
Total		100 Marks

VIII. List of Reference Books (As per APA Format).

1. A Zelko, F. (n.d.). *Psychiatry and Behavioral Sciences (Child Psychology)*.
2. Adolph Von., L. (2002). *Keynotes & Redline Symptoms Of Materia Medica*. B Jain Publishers.
3. Ahmed R, M. (n.d.). *Fundamentals of Repertories:Alchemy of Homeopathic Methodology*. 7 April 2016.
4. Allen, H. C. (2008). *Allen's Keynotes and Characteristics with Comparisons of some of the Leading Remedies of the Materia Medica with Bowl Nosodes*.
5. Ameen, S., & Grover, S. (2018). *A Primer of Research, Publication and Presentation*.
6. B., M., Kay, J., Maj, M., Lieberman, J. A., & Allan, A. (n.d.). *Psychiatry* (3rd Edition).
7. Banerjea, S. K. (2003). *Miasmatic Diagnosis*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=HcgweF9jcywC>
8. Benjamin James, S., Virginia Alcott, S., & Ruiz, S. (2017). *Kaplan & Sadock's Comprehensive Textbook of Psychiatry* (10th ed.).
9. Bhatia, M. S. (2012). *Differential Diagnosis of Mental Health Disorders*. CBS.
10. Bhatia, M. S. (2019). *Essentials of Psychiatry* (9th Edition).
11. Bhugra, D. (1993). *CASE PRESENTATIONS IN PSYCHIATRY*.
12. Bhuiyan, P., Supe, A., & Rege, N. (2015). *The Art of Teaching Medical Students—E-Book*. Elsevier Health Sciences. <https://books.google.co.in/books?id=LTqLCgAAQBAJ>

13. Blackwell, wiley. (2018). *The Maudsley Prescribing Guidelines in Psychiatry* (13th Edition).
14. Blackwood, A. L. (2023). *Manual of Materia Medica Therapeutics and Pharmacology*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=o9zCswEACAAJ>
15. Boericke, W., & Boericke, W. (2002). *Pocket Manual of Homoeopathic Materia Medica & Repertory: Comprising of the Characteristic and Guiding Symptoms of All Remedies (clinical and Pahtogenetic [sic]) Including Indian Drugs*. Kuldeep Jain for B. Jain Publishers. <https://books.google.co.in/books?id=roNzBBilKXgC>
16. Casey, P., & Kelly, B. (n.d.). *Fish's Clinical Psychopathology: Signs and Symptoms in Psychiatry* (3rd Edition).
17. Chavan, B. S., Gupta, N., Arun, P., Sidana, A., & Jadhav, S. (2013). *Community Mental Health in India*. Jaypee Brothers Medical Publishers Pvt. Limited. <https://books.google.co.in/books?id=vgaZMQEACAAJ>
18. Close, S. (2017). *Genius of Homeopathy Lectures and Essays On Homeopathic Philosophy*. B. Jain Publishing.
19. David, D., Fleminger, S., Kopelman, M., Lovestone, S., Mellers, J., & Folstein, M. (2011). *Lishman's Organic Psychiatry: A Textbook of Neuropsychiatry*. Wiley. https://books.google.co.in/books?id=O16BNn_286sC
20. Dhawale, M. L. (2014). *Principles & Practice of Homoeopathy*.
21. Dubovsky, S. L. (n.d.). *Concise Guide to Clinical Psychiatry* (First Edition).
22. Faridi, W. A. (2013). *Genetics and Genomics*. Pearson Education India. <https://books.google.co.in/books?id=JkY8BAAAQBAJ>
23. Farrington, E. A. (2003). *Lectures on Clinical Materia Medica*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=8oY4Hrq36WoC>
24. Gangadhar, B. N., Laxmanna, G., Andrade, C., Janakiramaiah, G., & Channabasavanna, S. M. (1988). *The nimhans model ect instrument: A technical report*. *Indian journal of psychiatry*, 30(3), 247–251. (n.d.).
25. Geddes, J. R., Andreasen, N. C., & Goodwin, G. M. (2020). *New Oxford Textbook of Psychiatry*. Oxford University Press. https://books.google.co.in/books?id=i_3VxQEACAAJ
26. Hahnemann, S., Dudgeon, R. E., Boericke, W., & Krauss, J. (2013). *Organon of Medicine 5 and 6 Edition*. B. Jain Publishers Pvt. Limited. https://books.google.co.in/books?id=_JGwDAEACAAJ
27. Harden, R. M., & Laidlaw, J. M. (2016). *Essential Skills for a Medical Teacher: An Introduction to Teaching and Learning in Medicine*. Elsevier Health Sciences. https://books.google.co.in/books?id=yTE_DAAAQBAJ
28. Jiloha, R. C., Kukreti, P., & Kataria, D. (2018). *Forensic Psychiatry: An Indian Perspective*. Jaypee Brothers Medical Publishers Pvt. Limited. <https://books.google.co.in/books?id=CIuZvAEACAAJ>
29. Kaufman, D. M., & Milstein, M. J. (2012). *Kaufman's Clinical Neurology for Psychiatrists E-Book*. Elsevier Health Sciences. https://books.google.co.in/books?id=7fXzaAT_pwkC
30. Kent, J. T. (1900). *Lectures on Homoeopathic Philosophy*. Indian Books & Periodicals Publishers. <https://books.google.co.in/books?id=j604AAAAMAAJ>

31. Kent, J. T. (1989). *Lectures on Homoeopathic Materia Medica: Together with Kent's "New Remedies" Incorporated and Arranged in One Alphabetical Order*. Jain. <https://books.google.co.in/books?id=F7drtLJiPDwC>
32. Loscalzo, J., Fauci, A. S., Kasper, D. L., Hauser, S., Longo, D., & Jameson, J. L. (n.d.). *Harrison's Principles of Internal Medicine, Twenty-First Edition* (Twenty-First Edition, 1–(Vol.1 & Vol.2)). McGraw-Hill Education / Medical.
33. Marks, D. F., Murray, M., Evans, B., & Estacio, E. V. (2010). *Health Psychology: Theory, Research and Practice*. SAGE Publications. <https://books.google.co.in/books?id=z-1w8VzMJsYC>
34. Mayer-Gross, W., Slater, E., & Roth, M. (1969). *Clinical Psychiatry*. Baillière, Tindall & Cassell. <https://books.google.co.in/books?id=YcBrAAAAMAAJ>
35. Morgan, C., King, R. A., Weisz, J. R., & Schopler, J. (2017). *Introduction to Psychology 7th Ed* (Standard Edition).
36. Munn, N. L. (1962). *Introduction to Psychology*. Houghton Mifflin. <https://books.google.co.in/books?id=3JT5zQEACAAJ>
37. N M, C. (n.d.). *Study on Materia Medica*. B. Jain Publishers Pvt. Limited.
38. Nash, E. B. (2002). *Leaders in Homoeopathic Therapeutics: With Grouping and Classification: 6th Edition*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=yzFvPAAACAAJ>
39. Niraj, A. (2010). *Niraj Ahuja A Short Textbook Of Psychiatry* (20th ed.). Jaypee Brothers Med.
40. Nussbaum, R. L., McInnes, R. R., & Willard, H. F. (2015). *Thompson & Thompson Genetics in Medicine, 8e*.
41. Oyeboode, F. (2022). *Sims' Symptoms in the Mind: Textbook of Descriptive Psychopathology*. CRC Press.
42. Patel, R. P. (n.d.). *Analysis and Evaluation of Rubrics/Symptoms of Dr. Kent's Repertory of Homeopathic Materia Medica* (6th corrected edition). UBSPD.
43. Penmann, I. D., Ralston, S. H., Strachan, M. W. J., & Hobson, R. (2022). *Davidson's Principles and Practice of Medicine* (24th Edition).
44. Prasad, K., Yadav, R., & Spillane, J. (2023). *Bickerstaff's. Neurological Examination in. Clinical Practice* (SEVENTH ADAPTED EDITION.). wiley.
45. Robert, B., Pedro, R., & Marcia, V. (2021). *Kaplan & Sadock's Synopsis of Psychiatry*.
46. Roberts, H. A. (n.d.). *The Principles and Art of Cure by Homoeopathy: A Modern Textbook*. B. Jain Publishers Pvt. Limited.
47. Rush, A. J., First, M. B., & Blacker, D. (2009). *Handbook of Psychiatric Measures*. American Psychiatric Publishing. <https://books.google.co.in/books?id=NnhyDwAAQBAJ>
48. Sarafino, E. P., & Smith, T. W. (2014). *Health Psychology: Biopsychosocial Interactions*. Wiley. <https://books.google.co.in/books?id=ypODBgAAQBAJ>
49. Sims, A. C. P. (1998). *Symptoms in the Mind: An Introduction to Descriptive Psychopathology* (9th ed.).
50. Speight, P. (1991). *A Comparison of the Chronic Miasms: (Psora, Pseudo-psora, Syphilis, Sycosis)*. Jain Publishers Company. <https://books.google.co.in/books?id=MNMdzQEACAAJ>
51. Stahl, S. M. (n.d.). *Stahl's Essential Psychopharmacology* (5th ed.). Cambridge University Press.

52. Strub, R. L., & Black, F. W. (n.d.). *The mental status examination in neurology*, Richard L. Strub, F. William Black; foreword by Norman Geschwind. F. A. Davis. <https://books.google.co.in/books?id=la6i0AEACAAJ>
53. Tasman, A., Riba, M. B., Alarcón, R. D., Alfonso, C. A., Kanba, S., Lecic-Tosevski, D., Ndeti, D. M., Ng, C. H., & Schulze, T. G. (2024). *Tasman's Psychiatry*. Springer International Publishing. <https://books.google.co.in/books?id=HtOPzQEACAAJ>
54. TAYLOR. (2008). *HEALTH PSYCHOLOGY 7E*. McGraw-Hill Education / Asia.
55. Tiwari, S. K. (2007). *Essentials of Repertorization*. B. Jain Publishers (P) Limited. <https://books.google.co.in/books?id=rO5QPAAACAAJ>

Part I Paper 2

I. Title of the Speciality Course, and its abbreviation

MD (Homoeopathy) Fundamentals of Homoeopathy in Homoeopathic Psychiatry

II. Brief description of speciality and its relevance in homoeopathy post-graduate course.

Homeopath as termed by Dr. Samuel Hahnemann in Aphorism 4 is a “Preserver of Health” who works for the mission of restoring the sick to health, to cure as in Aphorism 1. For a Homeopathic psychiatrist to achieve this shall require the knowledge of Psychology integrated with the fundamentals of Homeopathy. The mental level of being is the most crucial for the individual’s existence and maintains within itself a hierarchy very useful for understanding the normal functioning of the mind and its deviation. Therefore, understanding and applying the key concepts of Health, Man, Disposition, Predisposition, Diathesis, Homoeopathic causation, Disease, guidelines of management needs to be applied in psychiatry. Hahnemann in the Organon and other masters have laid down the foundation of these concepts and guidelines for practice along with exploring repertorial references and laying down the approach to the study of HMM. Training for prevention, promotion and rehabilitation needs to be mastered from a homoeopathic practice perspective.

Study of the Fundamentals of Homeopathy should thus allow the Homoeopathic psychiatry postgraduate students to utilize the above-mentioned knowledge in preventive, promotive, curative, and rehabilitative care in psychiatry and apply the operational understanding of Repertory and MateriaMedica in clinical practice. That would allow him to render a mild and gentle cure with the complete removal of obstacles to cure.

III . Courses and Course Objectives.

Course outcome

At the end of studying this course the postgraduate student of MD (Homoeopathic Psychiatry) should possess the following competencies and thus should be able to–

1. Display how Aphorisms 1-6 of the ‘Organon of Medicine’ provide a comprehensive base for a Homoeopathic psychiatrist to understand the evolution of mind.
2. Apply knowledge of Organon & Homoeopathic Philosophy, repertory and HMM in case taking and Psychiatric Evaluation
3. Identify the conceptual basis of the travel of the patient from Health to Disease in the light of Bio-psycho-socio-spiritual factors and its application to the practice of Homoeopathic Psychiatry
4. Apply knowledge of homoeopathic principles in the preservation of mental health and to prepare for the management of mental illness
5. Illustrate evidence-based case approach in Homoeopathic psychiatry

6. Display case-taking skills for knowing illness and person through the inter-relationship between Man and environment determining the fundamental, exciting and maintaining causes and their application in preventive, promotive and curative measures.
7. Demonstrate the documentation of the case in standardized format as per guidelines stated in Organon of Medicine
8. Classify psychiatric symptomatology and identify common and characteristics symptoms and its significance in management.
9. Explain the role of qualitative and quantitative susceptibility in mental diseases
10. Illustrate the assessment of susceptibility in acute and chronic psychiatric cases.
11. Derive the influence of miasmatic forces in affecting disease expressions, disease course and outcome in psychiatric cases.
12. Demonstrate the method of processing of the case utilizing appropriate homoeopathic principles to arrive at Hahnemannian totality.
13. Identify the acute, phase, chronic and Intercurrent totalities in a given case
14. Perform Repertorial Analysis, Remedy Selection and deciding the guidelines of case management in homoeopathic psychiatry
15. Validate the correspondence using source books and commentaries of MateriaMedica drug pictures.
16. Comply with the principles of Homoeopathic management and use of medicinal forces appropriately with respect to time of administration, potency and repetition.
17. Plan the use of ancillary measures, diet and patient education, etc. useful to restore the patient to health.

Course contents:

Part 1 Paper 2: Fundamentals of Homoeopathy in Psychiatry (HOM-PG-FHPS)

(I) Hom-PG-FHPS-01

- 1. Hahnemannian concept of Man, Vital Force, Health and Disease applied to the study of Mind and mental disorders**
 - A. Health, disease, causation, vital force and their role in mental health and disease
 - B. Evolution of disease: predisposition-disposition-diathesis-disease as reflected in development of mental illnesses
 - C. Mission and knowledges of the physician especially at the level of function & structure of Mind – state of balance & imbalance
 - D. Hahnemannian concept of man and its further extension by Kent, Boenninghausen and Boger – relative importance given by them to mind, mental expressions and mental state in totalities.
 - E. Philosophical basis, construction. arrangement of the original repertories (Kent, TPB, BBCR) representation of above concepts in Chapter Mind of the repertories
 - F. Science and philosophy of HMM, its utility in study of Mind
 - G. Psychological MM

(II) Hom-PG-FHPS-02

2. Concept of Dynamism, Recovery and Cure and Obstacles to Cure in Mental illnesses

- A. Concept of vital force in maintaining health and in genesis of mental disease
- B. Concepts of homoeopathic causation (Fundamental, Exciting and Maintaining causes) in genesis of mental disease.
- C. Concepts of recovery and cure and the essential difference between the two with respect to mental illness.
- D. Concept of idiosyncratic and pseudo chronic diseases as applicable to mental illnesses.
- E. Knowledge of various factors - mental and physical - which derange health and act as obstacles to cure and how to remove them to ensure cure.
- F. Role of miasm in causing and maintaining mental disease and addressing the same to ensure cure. (Further elaborated in theme 7)
- G. Understanding the above concepts, its representation and utility in study of Mind in evolutionary manner from HMM and its representation in different standard Repertories

(III) Hom-PG-FHPS -03

3. Concept of Artificial Disease and Portrait of Disease

- A. Knowledges of physician
- B. Drug proving
- C. Process of recording and system of recording mental diseases (sudden explosion of latent psora, Psycho – somatic, somato-psychic, mental illness due to prolonged emotional causes)
- D. Creating portraits of mental disease and learning the art of matching
- E. Art of creating portrait of polychrest remedies through analysis, evaluation and construction at Mental and Physical level
- F. Creating portrait of the disease through repertorial study of specific remedy

(IV) Hom-PG-FHPS-04

4. Concept of Unprejudiced observation and Case taking in psychiatric illnesses

- A. Studying the guidelines given by Hahnemann for psychiatric case taking and evolve a standardised case record for homoeopathic practice related to psychiatry.
- B. Demonstrating the concept of unprejudiced observer in case taking, bed side examination, Mental status examination, demonstration analysis of Doctor- patient therapeutic interview based on homoeopathic principles
- C. Utilising the concept of unprejudiced observer in perceiving the psychiatric patient and constructing totality for correct prescribing. (ORG)
- D. Understanding the concept of man as per Kent, Boger and Boenninghausen and its influence on their writing of repertory and HMM

(V) Hom-PG-FHPS-05

5. Concept of Symptomatology as applied to mental illnesses

- A. Symptomatology and value of a symptom from the standpoint of Homoeopathic Practice in psychiatry
- B. Concept of individualisation and Generalisation given by Kent and Boenninghausen and essential difference between the two.
- C. Concept of individualization and generalisation in the construction of Repertory (Kent, Boenninghausen and Boger especially chapter Mind and psycho-somatic representation in Repertory.
- D. Understanding the concept of classification and its utility in study of HMM
- E. Understanding the concept of generalisation vs individualization, and its utility in generalising the individual drugs symptoms in to group symptoms and deriving group characteristics)
- F. Studying Mind from MateriaMedica with the help of concept of generalisation.
 - a. A list of group of remedies is demonstrative to understand the process rather than to learn all the groups in detail.

(VI) Hom-PG-FHPS-06

6. Concept of Susceptibility and Acute and Chronic Disease in Mental illnesses

- A. Various parameters in determining susceptibility in different types of mental diseases s and its application in practicing clinical psychiatry.
- B. Application of the knowledge of Hahnemannian classification of mental disease and modern psychiatry in defining the scope and limitations by demonstrating its application in different types of cases.
- C. Understanding Repertories related to Mind and chapter of Mind from Other Repertories- (Kent, Boericke, Phatak, Boger, Boennighausen)

(VII) Hom-PG-FHPS-07

7. Concept of Suppression and Miasms as applied to mental illnesses

- A. Concept of suppression in homoeopathy and its types (surgical/non-surgical) in progression of psychiatric disease and its management through clinical cases.
- B. Concept of Miasm from Hahnemannian perspective and its further expansion by Allen, Kent and M L Dhawale and application to mental illnesses
- C. Use of Miasm in classifying and understanding the evolution of different remedies (HMM)
- D. Utilising the knowledge of indications of anti-miasmatic remedies as per list in mental illness
- E. Role of miasm as a fundamental cause and `its influence in the expressions in psychiatric disease and remedies through the Miasms of Psora, Sycosis, Tubercular

and Syphilis.

- F. Rubrics of suppression from different repertories
- G. Rubrics of Mental Expressions of Miasm from different repertories and study of different related Miasmatic rubrics

(VIII) Hom-PG-FHPS-08

8. Concept of Totality with respect to mental illnesses

- A. Process of constructing acute, chronic and intercurrent totalities in mental illnesses.
- B. Mastering the concept of classification and evaluation of symptoms including mental symptoms
- C. Understanding the process of repertorial and non-repertorial approach and how to select one in patients with mental illness
- D. Selecting the suitable approach and constructing repertorial totality as per Kent, Boenninghausen and Boger with emphasis on psychiatric patients.
- E. Solving the case with the help of softwares like HOMPAT and RADAR.
- F. Understanding the non-repertorial approach namely structuralization, synthetic approach and key-note in psychiatric disorders.
- G. Differentiation of similar remedies in acute and chronic cases by reference to source books, commentators and clinical materia medica.
- H. Building up totalities of different remedies through source books and other commentators from the list.(HMM)

(IX) Hom-PG-FHPS-09

9. Concept of Similar and Similimum

- A. Understanding single, simple, minimum substance as similimum following from the Law of Similars.
- B. Learning the concept of concordances as evolved by Boenninghausen and its utility in Psychiatric practice.
- C. Finer differentiation of similar remedies by learning to refer to source books, commentaries and clinical materia medica.
- D. Understanding remedy relationships and its implications in psychiatric practice - complementary, inimical, antidotal, follows well, similar with examples.

(X) Hom-PG-FHPS-10

10. Concept of Therapeutic Management as applicable in psychiatric illnesses

- A. Practical application of Kent's 12 observations in the assessment of remedy response and in the second prescription in psychiatric disorders.
- B. Utility of knowledge of disease, knowledge of investigations, psychological tests and recent advances in the field of Psychiatry to assess comprehensive response to

homoeopathic remedies.

- C. Remedy relationship in determining these prescription.
- D. Patient & Family Psycho-education and orientation.
- E. Use of ancillary measures in acute and chronic diseases, namely diet, exercise, yoga, relaxation techniques, supplements for aiding recovery and preventing the progress of mental illnesses. .

V. Topic description

Table 01 Topic : Hom-PG-FHPS-01

Topic Overview	1. Hahnemannian Concept of man, vital force, Health and Disease as applied to the study of Mind and mental disorders
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Define Vital force, Health, Disease, Cure and Recovery with respect to mental illnesses as per homoeopathic philosophy 2. Explain evolution of Mental disease in terms of predisposition-disposition-diathesis – stress diathesis model and Basic psychological processes. 3. Apply the concept of evolution of mental disease in psychiatry 4. Discuss Hahnemannian concept of man and importance to mind given by Boenninghausen, Kent and Boger in their concept of Man 5. Define Mental health as per by WHO 6. Discuss mission of the physician 7. Summarize the Knowledge of Physician relevant in maintaining mental health in individual and community 8. Summarize the science and philosophy of HMM and its utility in study of Mind 9. Discuss relevance of psychological HMM <p>Skills</p> <ol style="list-style-type: none"> 1. Demonstrate the relevance of psychological HMM in understanding harmony and disharmony of vital force with respect health and disease respectively 2. Perform psychiatric case taking to elicit disease evolution following disease chronology <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the mission of the physician in homeopathic psychiatry 2. Reason out the utility of psychological HMM to understand mental health and its deviations
Learning	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based

Methods	<ul style="list-style-type: none"> Individual based learning methods : Self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> Continuous / Programmatic assessment :Assignments, MCQ Practical exam – short case Written Examinations: Problem Based Learning assessment: LAQ SAQ Checklist, Rating scales,Rubric
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 02 Topic : Hom-PG-FHPS-02

Topic Overview	Concept of Dynamism, Recovery, cure and obstacle to cure in Mental Illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Discuss the role of vital force in maintaining mental health 2. Discuss the role of vital force in genesis of mental disease 3. Differentiate cure and recovery in Mental diseases 4. Explain evolution of Mental illness from phases of diathesis to functional and structural, reversible to irreversible phases of disease as per neurophysiological & neuroanatomical basis 5. Summarize Classification of Mental disease given by Dr.Hahnemann. 6. Explain idiosyncratic & pseudo chronic disease as applicable in mental illnesses 7. List various Bio-Psycho- Social factors which derange Mental health and also act as obstacle to cure and explain how to remove these factors to achieve cure 8. Infer role of miasms as a causative and maintaining factor in mental disease 9. Apply the knowledge of Miasm as causation to attain cure 10. Discuss role of causation in study of Homoeopathic MM and repertory with respect to Mental diseases <p>Skills</p> <ol style="list-style-type: none"> 1. Demonstrate the utility of Bio- Psycho-social & Homoeopathic causation in management of the psychiatric cases 2. Demonstrate the application of repertory and HMM from causative perspective in community for mental illnesses <p>Reflection</p> <ol style="list-style-type: none"> 1. Relating the vital force concept with mental health and disease 2. Reason out the web of causation (BPS- Homoeopathic Causation) in mental illnesses

	<ol style="list-style-type: none"> 3. Relate with chronic mental disease and miasm 4. Report the utility of causations in practice of homoeopathic psychiatry
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based • Individual based learning methods : Self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, objective,structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, Rubric
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 03 Topic : Hom-PG-FHPS-03

Topic Overview	Concept of artificial and natural diseases
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Discuss the knowledge of physician related to psychiatric symptomatology for formulating the portrait of disease 2. Display the system and process of recording artificial and natural disease in mental diseases <p>Skills</p> <ol style="list-style-type: none"> 1. Participate in drug proving 2. Construct & match the portrait of artificial and natural disease 3. Classify the data from artificial and natural disease through analysis and evaluation 4. Construct the portrait of disease through study of relevant rubrics in repertory <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the knowledge of physician to the psychiatric symptomatology in clinical cases 2. Respond to the need of portrait of disease in psychiatry cases 3. Reconstruct rubrics in to portrait of mental illnesses
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based • Individual based learning methods : self-regulated learning, spaced repetition, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments,MCQ

	<ul style="list-style-type: none"> • Practical exam – short case, long case, structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, Rubric
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 04 Topic : Hom-PG-FHPS-04

Topic Overview	Concept of unprejudiced observation and case taking in psychiatric illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Discuss the guidelines given by Hahnemann for psychiatric case taking 2. Describe techniques of psychiatric case taking 3. Discuss the concept of unprejudiced observation in psychiatric cases 4. Describe the process of evolution of unprejudiced observation through physician patient interaction based on transference – countertransference in therapeutic setting. 5. Summarize the concept of man and relative importance of mind as per Kent, Boger and Boenninghausen and its influence on their repertory and HMM <p>Skills</p> <ol style="list-style-type: none"> 1. Display the skill of perceiving the patient and identify the ones blocks /prejudices 2. Construct g totality through unprejudiced observation in psychiatric cases <p>Reflection</p> <ol style="list-style-type: none"> 3. Relate the role of prejudices in perceiving and constructing totality 4. Contextualizing the knowledge of case taking and unprejudiced observation to construction of totality
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based, case received • Individual based learning methods : self-regulated learning, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment : Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ

	<ul style="list-style-type: none"> • Checklist, Rating scales
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 05 Topic : Hom-PG-FHPS-05

Topic Overview	Concept of Symptomatology as applied to mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain Homoeopathic symptomatology and psychiatric symptomatology 2. Illustrate the value of symptom through classification and evaluation with its application in HMM and psychiatric cases 3. Differentiate the Kent and Boenninghausen concept of individualization and generalization in psychiatric cases 4. Discuss the concept of individualization and generalization in construction of Kent, TPB, BBCR and BSK repertory with respect to mind and psycho- somatic illnesses 5. Sketch the HMM portrait through symptomatology, individualization and generalization (demonstrative list) <p>Skills</p> <ol style="list-style-type: none"> 1. Construct the totality by using concept of generalization and individualization in psychiatric cases 2. Construct the totality of the group symptoms through generalization (some reflective group study) <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the application of group study to psychiatric clinical practice 2. Reason out the process of generalization and individualization in totality formation in psychiatric cases 3. Contextualize the value of symptom in matching HMM and referring repertory in psychiatric cases
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based • Individual based learning methods : Self-regulated learning, deliberate practice, formative self-assessment
Assessments	Refer to list attached
Prescribed	<ul style="list-style-type: none"> • Continuous / Programmatic assessment : Assignments, MCQ

texts	<ul style="list-style-type: none"> • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales
Domains of competencies	KS, PC, HO, CS, PBL

Table 06 Topic : Hom-PG-FHPS-06

Topic Overview	Concept susceptibility, acute and chronic disease in mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain the various parameter in determining the susceptibility in acute, chronic, intermittent, periodic / episodic illnesses in psychiatry. 2. Describe the scope and limitation of homoeopathy through knowledge of susceptibility considering psycho-biological and social determinants for acute & chronic mental illness, 3. Summaries the construction of different repertories related to mind,chapter mind and psycho-somatic representations in various repertories based on psycho-bio-social determinants. 4. Application of the concept of susceptibility to homoeopathic psychiatry 5. Apply clinical MateriaMedica in psychiatry <p>Skills</p> <ol style="list-style-type: none"> 1. Apply concept of susceptibility t in clinical management of psychiatric cases and study of HMM 2. Perform differential materiamedica in psychiatricl cases <p>Reflection</p> <ol style="list-style-type: none"> 1. Report the utility of repertories for acute & chronic illness in psychiatry. 2. Relate the susceptibility to homoeopathic practice
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based • Individual based learning methods : Self-regulated learning, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales
Prescribed texts	Refer to list attached
Domains of competencies	KS,PC,HO,CS,PBL

Table 07 Topic : Hom-PG-FHPS-07

Topic Overview	Concept of suppression and miasm as applied to mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Explain the suppression in homoeopathic psychiatric practice 2. Identify rubrics of suppression from standard repertories 3. Discuss the evolution of Mental disease resulting from suppression 4. Discuss on one sided mental illnesses 5. Describe evolution of miasm through chronic Mental disease 6. Explain Miasmatic theory from Hahnemannian writing and its further expansion by Kent, Allen and Dhawale 7. Apply knowledge of miasm in study of HMM and application to mental illnesses 8. Discuss indication of anti-miasmatic remedies in psychiatric cases, 9. Deriving the different rubrics from standard repertories representing different Miasm <p>Skills</p> <ol style="list-style-type: none"> 1. Conclude the suppression in clinical cases 2. Derive fundamental & dominant miasm in acute and chronic mental disease 3. Choose anti-miasmatic in clinical cases <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate the evolution of mental disease with miasm 2. Reconstruct the miasmatic evolution from clinical cases 3. Contextualize the concept suppression
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based, ward rounds, out-patient based • Individual based learning methods : Self-regulated learning, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales,OSCE
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 08 Topic : Hom-PG-FHPS-08

Topic Overview	Concept of Totality with respect to mental illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Apply classification and evaluation of psychiatric symptoms 2. Apply the concept of causation web in formulating totality 3. Discuss the repertorial and non-repertorial approach and their indication in psychiatric cases. 4. Justify the selection of repertorial and non-repertorial approach in a psychiatric case 5. Select suitable approach and construct totality based on need of clinical case. <p>Skills</p> <ol style="list-style-type: none"> 1. Construct acute, chronic and intercurrent totalities in mental illnesses 2. Construct repertorial totality in patients with mental illnesses 3. Solving the case with suitable software 4. Perform differentiation of remedies using different HMM viz source book, commentators, clinical Materia Medica and key notes in psychiatric disorders <p>Reflection</p> <ol style="list-style-type: none"> 1. Relate to clinical cases in psychiatry for construction of the totality 2. Reason out the bases for different approaches and references to repertory in psychiatric cases 3. Report the bases of differential HMM in psychiatric cases
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based • Individual based learning methods : Self-regulated learning, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment : Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ, SAQ • Checklist, Rating scales, OSCE
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 09 Topic : Hom-PG-FHPS-09

Topic Overview	Concept of similar and similitum
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Describe fundamental laws of homoeopathy 2. Conclude the potency and repetition in psychiatric cases 3. Discuss concordance and remedy relationship in psychiatric cases <p>Skills</p> <ol style="list-style-type: none"> 1. Apply fundamental laws in psychiatric cases 2. Apply the remedy relationship in clinical practice <p>Reflection</p> <ol style="list-style-type: none"> 1. Recollect the fundamental laws of homoeopathy observed in clinical cases 2. Reason out the posology in psychiatric practice 3. Relate the concordance and remedy relationship in psychiatric cases
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based • Individual based learning methods : Self-regulated learning, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales
Prescribed texts	Refer to list attached
Domains of competencies	KS, PC, HO, CS, PBL

Table 10 Topic : Hom-PG-FHPS-10

Topic Overview	Concept of Therapeutic management as applicable in psychiatric illnesses
Learning Outcomes	<p>Knowledge</p> <ol style="list-style-type: none"> 1. Diagnose the Kent's twelve observation in assessment of remedy response in psychiatric disorders 2. Describe Hahnemannian guidelines on management of mental diseases from Organon of medicine 3. Apply the knowledge of investigation and recent advances in the field of medicine and psychiatry to asses remedy response in psychiatric cases 4. Select second prescription based on remedy relationship in psychiatric cases <p>Skills</p> <ol style="list-style-type: none"> 1. Choose the correct line of management as per Hahnemannian guidelines in mental illnesses. 2. Choose second prescription based on remedy response of Kent's observation in psychiatric cases 3. Perform patient & family psycho- education and orientation 4. Organize the ancillary management in acute and chronic mental diseases 5. Perform the ancillary management in mental diseases <p>Reflection</p> <ol style="list-style-type: none"> 1. Recollect the remedy response in psychiatric cases. 2. Reflect role of investigation and current advances in judging remedy response in psychiatric cases 3. Contextualize the ancillary management in psychiatric cases
Learning Methods	<ul style="list-style-type: none"> • Peer based learning methods : Problem-based • Individual based learning methods : Self-regulated learning, deliberate practice, formative self-assessment
Assessments	<ul style="list-style-type: none"> • Continuous / Programmatic assessment :Assignments, MCQ • Practical exam – short case, long case, objective structured oral examination, OSCE • Written Examinations: Problem Based Learning assessment: LAQ SAQ • Checklist, Rating scales, OSCE

List of repertory (examples) beside Kent, TPB, BBCR following repertory are suggested

- Phatak's repertory,
- Murphy's repertory
- Boericke's repertory
- Repertories related to mind – (Farokh Master)

List of remedies for different aspects of the study of applied materia medica (examples)

Clinical HMM	Drug picture	Group study	Anti-miasmatic
1. Aconite	1. Alumina	1. sodium	1. Bacillinum
2. Aesculus	2. Antimony crud	2. Magnesium	2. Tuberculinum
3. Aethusa	3. Apismel	3. Calcareo	3. Thuja
4. Agaricus	4. Arg met	4. Kali	4. Medorrhinum
5. Aloes	5. Arg nit	8. Loganiaceae	5. Psorinum
6. Ammonium carb	6. Arsalb	9. Solanaceae	6. Sulphur
7. Anacardium	7. Aurum met	10. Compositae	7. Syphilinum
8. Arnica	8. Baryta carb.	11. Ophidia	
9. Arsenic	9. Baryta mur.	12. Spider	
10. Baptisia	10. Calc. carb.	13. Metals	
11. Bell.	11. Calc. f.	15. Acids	
12. Bellis p.	12. Calc. iod.	16. Lac	
13. Berberis v.	13. Calc. phos.		
14. Borax	14. Calc. sulph.		
15. Bry. alb.	15. Calc. sil		
17. Cactus g.	16. Causticum		
18. Calc. ars.	17. China		
19. Carbo. an	18. Conium		
20. Canth.	19. Ferrum met.		
21. Carb. veg.	20. Ferrum phos.		
22. Caulophyllum	21. Fluoric acid		
23. Cham.	22. Graph.		
24. Chelid. m.	23. Ignatia		
25. Chin. ars.	24. Iodine		
26. Cicuta v.	25. Kali bichrom.		
27. Cimicifuga	26. Kali brom.		
28. Cina	27. Kali carb.		
29. Coca	28. Kali iod.		
30. Coccus	29. Kali mur.		
31. Coccus cacti	30. Kali sulph.		
32. Collinsonia	31. Lac. can.		
33. Coloc.	32. Lachesis		
34. Corallium rubrum	33. Lycopodium		
35. Crataegus	34. Lyssin		
36. Crotalus h.	35. Mag. carb.		
37. Croton tig	36. Mag. mur		
38. Cup. met.	37. Mag. phos.		
39. Digitalis	38. Mag. sulph		
40. Dioscorea	39. Medorrhinum		
41. Drosera	40. Mercurius sol.		
42. Dulcamara	41. Naja		

43. Echinacia	42. Natrum carb.		
44. Euphrasia	43. Natrummur.		
45. Gelsemium	44. Natrumphos.		
46. Glonoine	45. Natrumsulph.		
47. Hammamelis	46. Nitric acid		
48. Helleborus	47. Nuxvom.		
49. Hep. sulph	48. Opium		
50. Hyosc.	49. Petroleum		
51. Hyper.	50. Phos.		
52. Ipecac	51. Phos. ac		
53. Kali ars.	52. Platina		
54. Ledum	53. Psorinum		
55. Liliuntig.	54. Puls.		
56. Manganum	55. Rhustox.		
57. Merc. dul.	56 Sepia		
58. Merc. iod. fl.	57. Silica		
59. Merc. ior. r.	58. Stannum met.		
60. Mercurius cor.	59. Staph		
61. Mezereum	60. Stram.		
62. Mur. ac.	61. Sulphur		
63. Murex	62. Tarent h.		
64. Nuxmoschata	63. Thuja		
65. Phytolacca	64. Tuberculinumbov		
66. Plumbum	65. Verat. alb.		
67. Podophyllum	66. Zincum		
68. Pyrogen			
69. Ranunculuc bulb			
70. Ratanhia			
71. Rheum			
72. Rhododendron			
73. Rumex			
74. Ruta g.			
75. Sabadilla			
76. Sabina			
77. Sambucus			
78. Sanguinaria			
79. Sarsaparilla			
80. Secale cor.			
81. Selenium			
82. Senega			
83. Spigelia			
84. Spongia			
85. Sticta			
86. Symph.			
87. Tarent. c.			

88. Tarentula H			
89. Thlaspi bursa			
90. Verat. vir.			

VII. Assessment

	Formative Assessment (Internal Assessment)	Summative Assessment (University Examination)
M.D.(Hom.) Part-I	1st Term Test: During sixth month of training	During eighteenth month of training
	2nd Term Test: During twelfth month of training	

VII (1). M.D. (Homoeopathy) Part-I examination –Maximum marks for each subject and minimum marks required to pass shall be as follows:

Subjects	Theory		Practical or Clinical Examination, including Viva	
	Maximum Marks	Pass Marks	Maximum Marks	Pass Marks
i. Fundamentals of Psychiatry	100	50	200* (160 + 40) (Summative Assessment 160 Marks) (Internal Assessment 40 Marks)	100* (80 + 20) (Summative Assessment 80 Marks) (Internal Assessment 20 Marks)
ii. Fundamentals of Homoeopathy in Psychiatry;				
iii. Research Methodology and Biostatistics	100	50	-	-

(*A common practical exam for paper I and II (100 marks practical + 100 marks viva) shall be conducted; twenty per cent. weightage shall be for internal assessment, which shall be calculated for practical or clinical including viva voce only. One internal assessment of 40 marks [20 marks (practical or clinical) + 20 marks (viva voce)] after each term of six months and average of two terms shall be considered. *eighty per cent. weightage shall be for summative assessment).

VII (2). Assessment Blueprint – Theory (*Benchmarked by the module-wise distribution.*)

VII (2a). Distribution of topics for Theory-Based Assessment.

Types of Questions with Marks

Types of question	No. of questions to be asked	Marks per question	Total
Problem Based Question	01	20	20
Long Answer Question	04	10	40
Short Answer Question	08	05	40
Total			100

Part 1 – Paper 2. Topic Numbers

Hom-PG-FHPS-01 - Hahnemannian Concept of man, vital force, Health and Disease as applied to the study of Mind and mental disorders

Hom-PG-FHPS-02 - Concept of Dynamism, Recovery, cure and obstacle to cure in Mental Illnesses

Hom-PG-FHPS -03 -Concept of artificial and natural diseases

Hom-PG-FHPS-04 - Concept of unprejudiced observation and case taking in psychiatric illnesses

Hom-PG-FHPS-05 - Concept of Symptomatology as applied to mental illnesses

Hom-PG-FHPS-06 - Concept of Concept susceptibility, acute and chronic disease in mental illnesses

Hom-PG-FHPS-07 - Concept of Suppression and miasm as applied to mental illnesses

Hom-PG-FHPS-08 - Concept of Totality with respect to mental illness

Hom-PG-FHPS-09 - Concept of Similar and Simillimum

Hom-PG-FHPS-10 - Concept of Therapeutic management as applicable in Psychiatric illness

VII (2b). Question Paper Layout

Q. No.	Type of Question	Content	Marks
1	Problem Based	Problem Based Question Hom-PG-FHPS—06 or 08 or 09	20
2	LAQ	Hom-PG-FHPS—07	10
3	LAQ	Hom-PG-FHPS—04	10
4	LAQ	Hom-PG-FHPS—03	10
5	LAQ	Hom-PG-FHPS—05	10
6	SAQ	Hom-PG-FHPS—03	5
7	SAQ	Hom-PG-FHPS—02	5
8	SAQ	Hom-PG-FHPS—06	5
9	SAQ	Hom-PG-FHPS—10 (For example -Repertory related to Mind, Mind chapter in various Repertories, Psycho-somatic representation in various repertories or clinical HMM)	5
10	SAQ	Hom-PG-FHPS—08	5
11	SAQ	Hom-PG-FHPS—01	5

12	SAQ	Hom-PG-FHPS–09	5
13	SAQ	Hom-PG-FHPS–04 (Group study in Psychiatric Cases)	5

VII (3). Assessment Blueprint –Practical / Viva.

VII (3a). Clinical examination: A Common Practical/viva for Part I Paper 1 and 2.

VIII. List of Reference Books (As per APA Format).

1. Allen, J. H. (1997). *Diseases and Therapeutics of the Skin*. B. Jain Publishers,.
2. Bailey, P. M. (2024). *Homeopathy Psychology Personality Profiles of the Major Constitutional Remedies*. B. Jain Publishers (P) Limited. <https://books.google.co.in/books?id=SnFfPgAACAAJ>
3. Benjamin, J., Sadock, Virginia, A., Sadock, & Pedro, R. M. (2017). *Kaplan and Sadock's Comprehensive Textbook of Psychiatry* (50th Anniversary-Tenth). Lippincott Williams and Wilkins.
4. Bhugra, D., Ranjith, G., & Patel, V. (2005). *Handbook of Psychiatry: A South Asian Perspective*. Anshan. <https://books.google.co.in/books?id=hhTPOwAACAAJ>
5. Boericke, W. (2006). *New Manual of Homoeopathic Materia Medica and Repertory with Relationship of Remedies* (3rd ed.). B Jain Publishers.
6. Boger, C. M. (2008). *A Synoptic Key of the Materia Medica*. B Jain Publishers.
7. Carol, A., Bernstein, Molly i, E., Poag e, & Mort, R. (2018). *On Call Psychiatry*. Elsevier India Pvt. Limited.
8. Casey, P., Casey, P. R., & Kelly, B. (2019). *Fish's Clinical Psychopathology: Signs and Symptoms in Psychiatry*. Cambridge University Press. <https://books.google.co.in/books?id=CNqgwGEACAAJ>
9. Choudhuri, N. M. (2003). *Study on Materia Medica*. B. Jain Publishers (P) Limited. <https://books.google.co.in/books?id=fAVIPgAACAAJ>
10. Clarke, J. H. (1900). *A Dictionary of Practical Materia Medica* (Issue v. 1). Homœopathic Publishing Company. <https://books.google.co.in/books?id=78NLmAEACAAJ>
11. Close, S. (1967). *The Genius of Homeopathy: Lectures and Essays on Homeopathic Philosophy*. Haren & Brother. <https://books.google.co.in/books?id=hFT6zQEACAAJ>
12. Dhawale, M. L. (2014). *Principles & Practice of Homoeopathy*. B Jain Publishers.
13. Hahnemann, C. F. (2010). *Organon of Medicine* (R. E. Dudgeon, Trans.; 5th edition with additions and alterations as per sixth edition). Indian Books and Periodicals Publishers.
14. Hahnemann, S. (1999). *The Chronic Diseases: Their Peculiar Nature and Their Homoeopathic Cure*. B. Jain Publishers. <https://books.google.co.in/books?id=324BckRTCJgC>
15. Hahnemann, S. (2003). *Materia Medica Pura*. B. Jain Publishers Pvt. Limited. <https://books.google.co.in/books?id=Af6lPwAACAAJ>

16. Harrison, P. J., Cowen, P., Burns, T., & Fazel, M. (2017). *Shorter Oxford Textbook of Psychiatry*. Oxford University Press.
<https://books.google.co.in/books?id=8WfXAQAACAAJ>
17. Hering, C. (2020). *The Guiding Symptoms Of Our Materia Medica (Volume III)*. Alpha Editions. <https://books.google.co.in/books?id=HDwQzgEACAAJ>
18. Jameson, J. L., Fauci, A. S., Kasper, D. L., Hauser, S. L., Longo, D. L., & Loscalzo, J. (2018). Editors. In *Harrison's Principles of Internal Medicine, 20e* (1–Book, Section). McGraw-Hill Education. accessmedicine.mhmedical.com/content.aspx?aid=1190788599
19. Kent, J. (1998). *Lectures on Homoeopathic Materia Medica*. South Asia Books.
20. Kent, J. T. (2010). *Lectures on Homoeopathic Materia Medica: Together With Kent's "New Remedies" Incorporated and Arranged in One Alphabetical Order* (1st ed.). B Jain Publishers.
21. Kumar, V., Abbas, A. K., & Aster, J. C. (2014). *Robbins and Cotran Pathologic Basis of Disease, Professional Edition E-Book*. Elsevier Health Sciences.
<https://books.google.co.in/books?id=5NbsAwAAQBAJ>
22. Master, F. J., Dhingreja, J., Panchal, P., Dabu, F., Bilimoria, P. A., Sreenivasan, S., & Soni, G. (1999). *Clinical Observations of Children's Remedies*. B. Jain Publishers (P) Limited.
<https://books.google.co.in/books?id=2eHuoAEACAAJ>
23. Morgan, C. T., King, R. A., Weisz, J. R., & Schopler, J. (1986). *Introduction to Psychology*. McGraw-Hill. <https://books.google.co.in/books?id=zU5EAAAAYAAJ>
24. Namboodri. (2004). *Concise Textbook of Psychiatry, 3/e*. Elsevier India Pvt. Limited.
https://books.google.co.in/books?id=qZ_dHIN3AvGC
25. Paul Herscu, N. D., & Vithoulkas, G. (1993). *The Homeopathic Treatment of Children: Pediatric Constitutional Types*. North Atlantic Books.
https://books.google.co.in/books?id=uLoNHLf_NfIC
26. Phatak, S. (1999). *Materia Medica of Homoeopathic Medicines* (2nd revised). B Jain Publishers.
27. Roberts, H. A. (2002). *The Principles and Art of Cure by Homoeopathy*. B. Jain Publishers,.
28. Sankaran, R. (2014). *The Soul of Remedies*. Homoeopathic Medical Publishers.
29. Tortora, G. J., & Derrickson, B. H. (2008). *Principles of Anatomy and Physiology*. John Wiley & Sons. <https://books.google.co.in/books?id=uNwfOPPYgKAC>
30. Tyler, M. L. (2008). *Homoeopathic Drug Pictures*. B. Jain Publishers Pvt. Limited.
https://books.google.co.in/books?id=__l5jwEACAAJ
31. Vithoulkas, G. (2009). *The Essence of Materia Medica*. B. Jain Publishers (P) Limited.
<https://books.google.co.in/books?id=KAFAPgAACAAJ>

IX. List of contributors:

- I. Dr. R Bhuwaneshwari ,M.D.(Hom.)**
Professor, National Homoeopathy Research Institute in Mental Health
- II. Dr.Kathika Chattopadhyay, M.D.(Hom.)**
Professor, Bakson Homoeopathic Medical College
- III. Dr. Girish Navada, M.D.(Hom.)**
Professor,Father Muller Homoeopathic Medical College