



राष्ट्रीय होम्योपैथीआयोग  
**National Commission for Homoeopathy**  
JawaharLal Nehru BhartiyaChikitsaAvum Homoeopathy  
AnusandhanBhavan  
No.61-65, Institutional Area, Opp. 'D' Block, Janakpuri, New Delhi-110 058

Phone: (Direct) 011-28522906  
Email: nchindia21@gmail.com  
Website :[www.nch.org.in](http://www.nch.org.in)



F.No.3-78/2021/NCH/HEB/CBDC/6557-6568

Dated

09 SEP 2022

To,

1. The Commissioner/Director of AYUSH / ISM&H - All State & U.T.
2. The Principal Secretary/ Secretary, (Department of AYUSH / ISM&H / Medical Education / Health & FW - All State & U.T.
3. The Registrars of Universities (Including Deemed Universities) having affiliated/Constituent Homoeopathic Medical Colleges - All State & U.T.
4. The Registrars, Homoeopathic/Boards/Councils - All State & U.T.
5. The Principal of all the Homoeopathic Medical Colleges and Hospital (including Director, N.I.H. Kolkata & NEIAH, Shillong).
6. All Homoeopathic Associations and Federations/Society.
7. All other Stake Holders/ General Public.


**Sub: Comments/ Suggestions over the draft regulations namely 'National Commission for Homoeopathy (Homoeopathy Degree Course – B.H.M.S.) Regulations- 2022' and 'National Commission for Homoeopathy (Minimum Standards of Requirement for Homoeopathic Colleges and attached Hospitals) Regulations- 2022'- Regarding.**

Madam/Sir,

I am directed by the Competent Authority to circulate draft regulations '**National Commission for Homoeopathy (Homoeopathy Degree Course – B.H.M.S.) Regulations- 2022**' and '**National Commission for Homoeopathy (Minimum Standards of Requirement for Homoeopathic Colleges and attached Hospitals) Regulations- 2022**' through website of the Commission ([www.nch.org.in](http://www.nch.org.in)) for seeking Comments /suggestions over the draft regulations within the period of 30 days w.e.f. 09.09.2022 as per the Rule 23 sub-rule (d) of G.S.R 772 (E) Ministry of Ayush notification dated 18.12.2020.

The Comments /suggestions be sent on email: [heb.nch@gmail.com](mailto:heb.nch@gmail.com).


Yours faithfully,

  
(Prof. Dr. Sanjay Gupta)  
Secretary

Copy to:-

1. The Secretary, Ministry of Ayush, Govt. of India, AYUSH Bhawan, B-Block, GPO Complex, INA, New Delhi- 110023.
2. Chairperson, National Commission for Homoeopathy, 61-65, Institutional Area, Janakpuri, New Delhi- 110058.
3. IT Consultant with the direction to upload the above draft regulations on website.
4. Guard File.

Yours faithfully,

  
(Prof. Dr. Sanjay Gupta)  
Secretary

## THE NATIONAL COMMISSION FOR HOMOEOPATHY

### NOTIFICATION

New Delhi, the August, 2022

**F. No. HEB/Regulation/UG/ /2022.** - In exercise of the powers conferred by sub-section (2) of section 55 of the **National Commission for Homoeopathy Act, 2020 (15 of 2020)**, and in supersession of the Homoeopathy Central Council Act, 1973 (Homoeopathy (Degree course) B.H.M.S.) Regulation, 1983 except as respects thing done or omitted to be done before such supersession, the Commission hereby makes the following regulations, namely: -

#### 1 Short title and commencement:

- (a) These regulations may be called “**National Commission for Homoeopathy (Homoeopathy Degree Course – B.H.M.S.) Regulations-2022.**”
- (b) They shall come into force on the date of their publication in the Official Gazette.

#### 2 Definitions:

- (a) In these regulations, unless the context otherwise requires:
  - (i) “Act” means the National Commission for Homoeopathy, Act, 2020 (15 of 2020);
  - (ii) “Annexure” means an annexure appended to these regulations;
  - (iii) “Appendix” means an appendix appended to these regulations.
  - (iv) “Electives” means an optional course of studies devised to enrich the educational expression of the student.
- (b) The words and expressions used herein and not defined but defined in the Act shall have the same meanings as respectively assigned to them in the Act.

#### 3. Bachelor of Homoeopathic Medicine and Surgery programme:

The Bachelor of Homoeopathy education namely, the Bachelor of Homoeopathy Medicine and Surgery (B.H.M.S.) shall produce Graduates, having profound knowledge of Homoeopathy with contemporary advances in the field, supplemented with knowledge of scientific and technological advances in modern health sciences and related technology along with extensive practical training, be able to function as an efficient holistic health care practitioner in health care services in the urban and rural areas.

#### 4. Objectives Of Homoeopathy Degree Training Programme: Following objectives need to be realized at the end of BHMS programme: -

- (a) **NATIONAL GOALS:** At the end of undergraduate program, the medical student should be able to:
  - (i) Recognize the strength of homoeopathy, its applicability and limitations in health care of society and the individual;
  - (ii) Learn the integration of medical services for effective delivery of health care;

- (iii) Recognize the goals enshrined in National Health Policy and health right of all citizens and undergo training to achieve the realization of this social responsibility;
- (iv) Achieve competence in the practice of homoeopathy with holistic approach, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases;
- (v) Develop a scientific temper, acquire educational experience for proficiency in profession and promote healthy living based on contemporary knowledge and principles of homoeopathy;
- (vi) Become an exemplary citizen by observing medical ethics and fulfilling social and professional obligations so as to respond to national aspirations;
- (vii) Develop skills to perpetuate homoeopathy & practice it with zeal so that it stands parallel to other scientific healing methods.

(b) **INSTITUTIONAL GOALS:**

In consonance with the national goals, each medical institution should evolve institutional goals to define the kind of trained homoeopathic professionals they intend to produce. The undergraduate students coming out of a homoeopathic medical institute should:

- (i) Be competent in clinical diagnosis and homoeopathic management of health problems of the individual and the community, commensurate with his/her position as a member of the health team at the primary, secondary or tertiary levels, using his/her clinical skills based on history, physical examination and relevant investigations;
- (ii) Be competent to use homoeopathic medicines scientifically for health problems in preventive, promotive, curative palliative and rehabilitative mode;
- (iii) Appreciate the rationale for the use of different therapeutic modalities & engage in cross- referral when required;
- (iv) Be able to appreciate the socio-psychological, cultural, economic and environmental factors affecting health and develop a humane attitude towards patients in discharging professional responsibilities;
- (v) Be able to identify community health problems and learn to work to resolve these

by understanding, designing, instituting corrective steps as per homoeopathic principles and evaluating outcome of such measures;

- (vi) Develop sensitivity to environmental sustainability and engage in community work towards achieving it with responsibility and commitment;
- (vii) Be trained in critical thinking, evidence-based practice and possess research aptitude and documentation skills necessary in professional work;
- (viii) Possess the attitude for lifelong learning and be ready to develop competencies as and when conditions of practice demand it;
- (ix) Be familiar with the basic factors which are essential for the implementation and integration of the National Health Programmes with homoeopathy including practical aspects of Family Welfare and Mother and Child Health (MCH), Sanitation and water supply, Prevention and control of communicable and non-communicable diseases, Immunization and Health Education;
- (x) Acquire basic management skills in the area of human resources, materials and resource management related to homoeopathy in health care delivery, general and hospital management, principal inventory skills and counseling;
- (xi) Be able to work as an active and responsible partner in health care teams and acquire proficiency in communication skills with colleagues, patients and the community at large;
- (xii) Be competent to work in a variety of health care settings;
- (xiii) Develop personal characteristics and attitudes required for professional life such as personal integrity, sense of responsibility, dependability and ability to relate to or show concern for other individuals.

**5. Eligibility criteria for admission and manner of admissions: -**

The eligibility to seek admission in Bachelor of Homoeopathy Medicine and Surgery programme shall be asunder:

- (a) The candidate shall have passed 10+2 or its equivalent examination from any recognised Board with Physics, Chemistry, Biology and have obtained minimum of fifty per-cent marks taken together in Physics, Chemistry and Biology in the case of students belonging to general category and forty per cent. marks in the case of students belonging to the Scheduled Castes, Scheduled Tribes and other Backward Classes;
- (b) Provided that in respect of persons with disability candidate specified under the Rights

(Homoeopathy Degree Course – B.H.M.S.) Regulation-2022.

of Persons with Disabilities Act, 2016 (49 of 2016), the minimum qualifying marks in the said examinations shall be forty-five per cent. in the case of General category and forty per cent in the case of the Scheduled Castes, Scheduled Tribes and Other Backward Classes;

- (c) No candidate shall be admitted to Bachelor of Homoeopathy Medicine and Surgery programme unless the candidate attained the age of seventeen years on or before the 31<sup>st</sup> day of December of the year of admission in the first year of the programme;
- (d) National Eligibility -cum-Entrance Test.- There shall be a uniform entrance examination for all medical institutions at the under-graduate level, namely the National Eligibility-cum- Entrance Test (NEET) for admission to under-graduate programme in each academic year and shall be conducted by an authority designated by the National Commission for Homoeopathy.
- (i) In order to consider for admission to under-graduate programme for an academic year, it shall be necessary for a candidate to obtain minimum of marks at 50<sup>th</sup> percentile in the National Eligibility-cum- Entrance Test for under-graduate programme held for the said academic year:

Provided that in respect of candidates, -

- a) belonging to the Scheduled Castes, Scheduled Tribes and Other Backward Classes, the minimum marks shall at 40<sup>th</sup> percentile;
- b) with specified disabilities under the Rights of Persons with Disabilities Act, 2016 (49 of 2016) the minimum marks shall be at 45<sup>th</sup> percentile in the case of general category and 40<sup>th</sup> percentile in the case of the Scheduled Castes, Scheduled Tribes and Other Backward Classes:

provided further that if sufficient number of candidates in the respective category fail to secure minimum marks in the National Eligibility - cum - Entrance Test held for any academic year for admission to undergraduate programme, the National Commission for Homoeopathy in consultation with the Central Government may lower the minimum marks required for admission to undergraduate programme for candidates belonging to respective category and marks so lowered by the Central Government shall be applicable for that academic year only.

- (ii) An All-India common merit list as well as State-wise merit list of the eligible candidates shall be prepared on the basis of the marks obtained in the National Eligibility-cum-Entrance Test and the candidates within the respective category shall be considered for admission to under-graduate programme from the said merit lists only.
- (iii) The seat matrix for admission in the Government institution, Government-aided Institution and Private Institution shall be fifteen per-cent, for all-India quota and eighty-five per-cent, for the State and Union territory quota:

Provided that, -

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- a) the all-India quota for the purpose of admission in all the Deemed Universities both Government and private shall be hundred per-cent.;
- b) the University and institute which are already having more than fifteen per-cent, all-India quota seats shall continue to maintain that quota;
- c) five per-cent of the annual sanctioned intake capacity in Government and Government-aided Institution shall be filled up by candidate with specified disability in accordance with the provisions of the Rights of Persons with Disabilities Act, 2016 (49 of 2016) and based on the merit list of National Eligibility -cum-Entrance Test.

Explanation.- For the purpose of this clause, the specified disability contained in the Schedule to the Rights of Persons with Disabilities Act, 2016 (49 of 2016) specified in **Appendix “A”** and the eligibility of candidate to pursue a programme in Homoeopathy with specified disability shall be in accordance with the guidelines specified in **Appendix “B”** and if the seats reserved for the persons with disabilities in a particular category remain unfilled on account of unavailability of candidates, the seats shall be included in the annual sanctioned seats for the respective category.

(iv) The designated authority for counseling of State and Union territory quota for admissions to undergraduate programme in all medical institutions in the States and Union territories including institutions established by the State Government, University, Trust, Society, Minority Institution, Corporation or Company shall be the respective State or Union territory in accordance with the relevant rules and regulations of the concerned State or Union territory, as the case maybe.

(v)

- a) The counselling for admission to Bachelor of Homoeopathic Medicine and Surgery Programme for seat under all-India quota as well as for all medical Institutions established by the Central Government shall be conducted by the authority designated by the Central Government in this behalf;
- b) The counselling for all admissions to Bachelor of Homoeopathic Medicine and Surgery Programme for hundred percent seats of all Deemed Universities both Government and Private shall be conducted by the authority designated by the Central Government, in this behalf.

(vi)

- a) All seats irrespective of category (Central quota, State quota or management etc.) except foreign nationals are to be admitted through counselling (Central, State or UT) only. Direct admission by any means other than above specified manner shall not be approved and any institution found admitting the students not following the specified manner, shall be denied permission for taking admission for further academic years;
- b) The institutions shall have to submit the list of students admitted in the

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format specified by National Commission for Homoeopathy (NCH) on or before six pm on the cutoff date for admissions specified by National Commission for Homoeopathy from time to time for verification;

- c) The medical institutions shall approve the admission of those candidates (except foreign nationals) who have been allotted through counseling (Central, State or Union territory as the case maybe)
- (vii) Any candidate who has failed to obtain the minimum eligibility marks under this regulation shall not be admitted to under-graduate programme in the said academic year.
- (viii) No medical institution shall admit any candidate to the under-graduate programme in contravention of the criteria or procedure laid down in these regulations in respect of admission and any admission made in contravention of the said criteria or procedure shall be cancelled by the National Commission for Homoeopathy forthwith.
- (ix) The medical institution which grants admission to any student in contravention of the criteria or procedure laid down in these regulations shall be liable accordingly, under the clause (f) of sub section (1) of section 28 of the Act.
- (x) For foreign national candidate, any other equivalent qualification approved by the Central Government or documents issued by Association of Indian Universities (AIU), New Delhi shall be allowed and sub-regulation (2) of regulation 14 of the Act shall not be applicable.
- (xi) The medical Institutions shall send intimation to the National Commission for Homoeopathy about the number of students admitted by them within one month of their joining and it shall be open to the National Commission for Homoeopathy to undertake verification of the compliance of the provisions of the regulations by the Colleges at any point of time.

6. **Duration of B.H.M.S. course** -The duration of the B.H.M.S. Programme shall be five years and six months as per the following table, namely:

**Table-1**  
**(Duration of B.H.M.S. course)**

<b>Sl. No.</b>	<b>B.H.M.S. course</b>	<b>Duration</b>
(a)	First Professional B.H.M.S.	Eighteen Months
(b)	Second Professional B.H.M.S.	Twelve Months
(c)	Third Professional B.H.M.S.	Twelve Months
(d)	Fourth (Final) Professional B.H.M.S.	Twelve Months
(e)	Compulsory Rotatory Internship	Twelve Months

7. **Degree to be awarded.** -The candidate shall be awarded Bachelor of Homoeopathic Medicine and Surgery (B.H.M.S) Degree after passing all the examinations and completion of the laid down course of study extending over the laid down period and the compulsory rotatory internship extending over twelve months.

**8. Medium of instruction.** -The medium of instruction for the programme shall be English

**9. Pattern of study.** -

- (a) The B.H.M.S. course shall consist of **main programme and electives** and the pattern of study shall be followed in the following manner, namely: -
- (i)
- a) After admission, the student shall be inducted to the B.H.M.S. programme through a **Foundation Programme** not less than fifteen working days and not less than 90 hours and every day may consist of six hours based on the ‘Content for Foundation Course’ which intends to introduce newly admitted student to Homoeopathy system of medicine and skills required to make him well aware of the B.H.M.S. course he is going to undergo for next five years and six months.
- b) During the Foundation Programme, the student of Homoeopathy shall learn history of Homoeopathy, get oriented to developments in the Homoeopathy science across the globe, understanding on improvising interpersonal communication skills, management of stress & time, basic life support and first-aid along with other subjects as per syllabus laid down in **Annexure -i**
- (b) Total teaching hours for first professional session shall be not less 2268 hours to be accomplished in three hundred and twenty-four days while for second, third & fourth professional session, a minimum of 1512 hours teaching is required to be accomplished in two hundred and sixteen days in each year.
- (c)
- (i) Total working days for the First Professional session shall have three hours of clinical classes per week either in OPD or IPD or in community or peripheral OPD of Hospital during morning hours, except during fifteen days for the foundation program.
- (ii) Total teaching hours for First Professional session shall not be less than 2268 hours.
- (d) Total teaching hours for Second, Third and Fourth Professional session shall not be less than 1512 in each professional year which will comprise of three hours of clinical classes at OPD or IPD or community or peripheral OPD during morning hours.
- (e) Working hours may be increased by the University or institution as per requirement to complete the stipulated period of teaching and requisite activity.

Explanation.-For the purposes of this regulation the expression “Lectures” means Didactic teaching i.e., classroom teaching and the expression “Non-lectures” includes Practical / Clinical and Demonstrative teaching and the Demonstrative teaching includes Small group teaching / Tutorials / Seminars / Symposiums / Assignments / Role play / Drug Picture presentation / Pharmacy training / Laboratory training / Dissection / Field visits / Skill lab training / Integrated learning / Problem based learning / Case based learning / Early clinical exposure / Evidence based learning etc. as per the requirement of the subject and in Non-lectures, the Clinical/Practical part shall be seventy per cent and demonstrative teaching shall be thirty per cent.



- (f) There shall be minimum of one hour each for library and physical education per week and one hour of recreation (expression of talent and extra-curricular activities) per month to be allotted in the regular time table of all batches. These hours are over and above the hours mentioned above in point (c) and (d)
- (g) New departments and subjects like Fundamentals of psychology, Yoga, introduction to modern pharmacology and research methodology and biostatistics are introduced in degree course to provide holistic and integrated knowledge of all the health sciences along with development of research aptitude.

**(i) Department and Subjects in professional B.H.M.S. Course**

**Table number 2**

S.No.	Department	Subject
1	Homoeopathic Materia Medica	Homoeopathic Materia Medica
2	Organon of Medicine with Homoeopathic Philosophy	Organon of Medicine with Homoeopathic Philosophy and Fundamentals of Psychology
3	Homoeopathic Pharmacy	Homoeopathic Pharmacy
4	Repertory	Repertory and Case Taking
5	Human Anatomy	Anatomy, Histology and Embryology
6	Human Physiology and Biochemistry	Physiology and Biochemistry
7	Forensic Medicine & Toxicology	Forensic Medicine & Toxicology
8	Pathology & Microbiology	Pathology & Microbiology
9	Community Medicine and public health	Community Medicine and public health
10	Surgery	Surgery
11	Gynaecology and Obstetrics	Gynaecology and Obstetrics
12	Practice of Medicine	Practice of Medicine with Introduction to Modern Pharmacology
13	Research Methodology & Biostatistics	Research Methodology & Biostatistics
14	Fundamentals of Yoga	Yoga in context to Homoeopathic philosophy

**(Detailed syllabus and curriculum will be notified separately in the form of booklet by Homoeopathy Education Board after approval of National Commission for Homoeopathy)**

- (ii) The subjects to be taught in each Professional Year have been mentioned in the Tables 3 to 6. This does not reflect the subjects for which the student will be examined. Subject for which the student shall be examined are as per table number 11,13,15 and 17 in these regulations.
- (iii) The following subjects shall be taught as per the syllabus laid down by Homoeopathy education board and approved by the National Commission for Homoeopathy, namely: -

**Table-3**

**(Subjects to be taught in First Professional B.H.M.S.)**

Sl. No.	Subject Code	Subject
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1	HomUG-HMM-I	Homoeopathic Materia medica
2	HomUG-OM-I	Organon of medicine with Homoeopathic philosophy
3	HomUG-R-I	Repertory and case taking
4	HomUG-HP	Homoeopathic Pharmacy
5	HomUG-AHE	Anatomy, Histology and Embryology
6	HomUG-PB	Physiology & Bio-chemistry
7	HomUG-FPH	Fundamentals of Psychology in relation to Homoeopathy
8	HomUG-Yoga	Fundamentals of Yoga
9	Electives (Minimum two)	

- (iv) The Second Professional session shall ordinarily start after completion of First Professional examination and the following subjects shall be taught as per the syllabus laid down by the Homoeopathy education board and approved by National Commission for Homoeopathy, namely:-

**Table-4**

**(Subjects to be taught in Second Professional B.H.M.S.)**

Sl. No.	Subject Code	Subject
1.	HomUG-HMM-II	Homoeopathic Materia Medica
2.	HomUG-OM-II	Organon of Medicine with Homoeopathic Philosophy
3.	HomUG-R-II	Repertory and case taking
4.	HomUG-FMT	Forensic Medicine and Toxicology
5.	HomUG-Path M	Pathology and Microbiology
6.	HomUG-CM	Community Medicine
7.	HomUG-Sur-I	Surgery
8.	HomUG-ObGy-I	Gynecology & Obstetrics
9.	Hom-UG PM-1	Practice of Medicine
10.	Electives (Minimum Two )	

- (v) The Third Professional session shall ordinarily start after completion of Second Professional examination and following subjects shall be taught as per the syllabus laid down by Homoeopathy education board and approved by the National Commission for Homoeopathy, namely: -

**Table-5**

**(Subjects to be taught in Third Professional B.H.M.S.)**

<b>Sl. No.</b>	<b>Subject Code</b>	<b>Subject</b>
1	HomUG-HMM-III	Homoeopathic Materia Medica
2	HomUG-OM-III	Organon of Medicine with Homoeopathic Philosophy
3	HomUG-R-III	Repertory and case taking
4	HomUG-PM-II	Practice of Medicine
5	HomUG-Mod.Pharm	Principles of Modern Pharmacology vis-à-vis Homoeopathic Materia Medica
6	HomUG-Sur-II	Surgery
7	HomUG-ObGy-II	Gynecology & Obstetrics
8	Electives (Minimum Two)	

- (vi) The Fourth Professional session shall ordinarily start after completion of Third Professional examination and following subjects shall be taught as per the syllabus laid down by Homoeopathy education board and approved by the National Commission for Homoeopathy from, namely: -

**Table-6**

**(Subjects to be taught in Fourth Professional B.H.M.S.)**

<b>Sl. No.</b>	<b>Subject Code</b>	<b>Subject</b>
1	HomUG-HMM-IV	Homoeopathic Materia Medica
2	HomUG-OM-IV	Organon of Medicine with Homoeopathic Philosophy
3	HomUG-R-IV	Repertory and case taking

4	HomUG-PM-III	Practice of Medicine
5	HomUG-RM-Stat	Research Methodology and Biostatistics
6	HomUG-Yoga.II	Therapeutic yoga and life style management

- (vii) **Academic calendar:** University, Institution and College shall prepare Academic Calendar of that particular batch in accordance with the template of tentative Academic Calendar provided in these regulations in *Annexure-ii* and the same shall be circulated to students and hosted in respective websites and followed accordingly
- (viii) **Electives-** Commission has decided to introduce electives to be implemented at the BHMS course from academic year 2023-24. Electives have been a feature in medical education in many parts of the world. It constitutes an optional course of study devised to enrich the educational experience of the student.
- The elective program will start in second term of the Ist BHMS and extend through the II and III years.
  - A list of elective topics will be provided as a guideline for the BHMS course student.
  - Each student will be required to choose two electives each in first, second and third BHMS and complete six electives till the end of third BHMS.
  - The student will make a choice and communicate the topic selected to the coordinator of respective year.
  - Electives are not part of classroom work. The institute will not be required to organize any formal course or teaching program for the student to do the elective. However, institute will assign students to teacher (HOD/Guide/Mentor) of that particular year who would be responsible for encouraging and guiding student to complete the chosen electives.
  - Electives will be submitted one month prior to the final examination of respective year.
  - The institute will ensure that electives are freshly undertaken every year and are not copy-pasted from year to year.
  - All electives will be graded and grades will be part of final mark sheet of that year.
  - No student will be promoted unless the electives have been submitted.
- (ix) **Clinical training.** - Clinical training of the student shall start from the First Professional session onwards and subject related clinical training shall be provided in the attached hospital by the concerned faculty and department in non-lecture hours as per the requirement of the subject as mentioned below-
- During first professional session, clinical training shall be provided in outpatient Department (OPD), inpatient Department (IPD), community and peripheral clinics. Clinical exposure may also be arranged through appropriate audio-visual media or simulated patients as per the decision of the College. Students shall be posted to Hospital pharmacy to get familiar with prescription patterns, medicine names, dosage, dispensing of medicines etc.
  - During second, third and fourth professional session, clinical training shall be provided through the specialty outpatient Department (OPD) and inpatient Department (IPD), peripheral OPD and community postings where in

teachers of the above departments are consultants. Students shall be involved in screening OPD, case taking & analysis, clinical examination, repertorization & investigations (including Radiology, Hematology & Pathology Laboratory) and prescription writing.

- c) Training/ orientation on add on therapy: Training for yoga, physiotherapy & diet and nutrition shall be provided to the students by the concerned consultant.
  - (i) Clinical training for the Second Professional session shall be as per sub-clause (d) of regulation 9 and clinical attendance shall be maintained by the concerned faculty and department.
- d) Clinical training for the Second Professional session shall be provided in accordance with the requirement of subjects as under-
  - i. Department of Community Medicine will provide training through specialty clinics/village adoption/health programmes i.e. awareness camps, campaigns & public health programs and IPD for waste management, prophylaxis & health education programs. IPD nutritional assessment of cases under Dietitian of Hospital should be followed. Awareness about nutritional disorders and balanced diet to be included.
  - ii. Clinical OPD, IPD and clinics functioning under School Health Programs
- e) Homoeopathic OPD, peripheral OPD and community OPD
- f) Clinical training for the Third Professional session shall be as mentioned under sub-clause (d) of regulation 9 shall be on rotation basis as per the non-lecture/clinical batches and in accordance with the clinical/ non-lecture teaching hours stipulated for the following subjects, namely: -
  - i. Homoeopathic special and general OPD and IPD with compulsory repertorization through software
  - ii. Practice of Medicine: OPD, IPD and specialty clinics like pediatrics, pulmonology, cardiology, nephrology, gastroenterology, Dermatology, Psychiatry, Oncology or any other, functioning under the department, in attached hospital/Superspeciality hospital with MoU.
  - iii. Surgery: Eye, ENT, dental OPD and any other related specialty clinics ; Operation Theater Unit: Preparation room, post operative recovery room, Sterilization, wound care & infection control, bio-waste management and any specialty units in the attached hospital/Superspeciality hospital with MoU.
  - iv. Gynecology and Obstetrics: OPD, IPD, Labour room, procedural room, and other related specialty clinics for reproductive, mother & child health, if any
- g) the clinical training for the Fourth Professional session shall be provided in accordance with the requirement of subjects, (OPD and IPD, Physiotherapy room) during the Fourth (Final) Professional session as mentioned under sub-clause (d) of regulation 9 shall be on rotation basis as per the non-lecture/clinical batches and in accordance with the clinical/ non-lecture teaching hours stipulated for the following subjects, namely: -

- i. General and special Homoeopathic OPD and IPD
- ii. Emergency/casualty department in hospital
- iii. Skill lab in hospital
- iv. Practice of Medicine: OPD, IPD and specialty clinics (pediatrics, pulmonology, cardiology, nephrology, gastroenterology, Dermatology, Psychiatry, Oncology) functioning under the department if any, in attached hospital /Superspeciality hospital with MoU.

**10. Methodology for supplementing modern advances, research and technology in Homoeopathy (SMART-Hom.)-**

- (a) To accomplish the requirement under subsection (f) of section 2 of National Commission for Homoeopathy Act 2020, regarding supplementation of modern advances, scientific and technological developments in Homoeopathy System of Medicine, all the fourteen Departments as mentioned in table number 2 of regulation 9, shall be supplemented, enriched and updated with relevant and appropriate advances/developments in the area of diagnostic tools, conceptual advancements and emerging areas as under-
  - (i) Innovations or advances or new developments in Basic Sciences like biology, chemistry, physics, mathematics, microbiology, bioinformatics, molecular biology etc.;
  - (ii) Diagnostic Advancements;
  - (iii) Pharmaceutical Technology including quality and standardization of drugs, drug development etc.;
  - (iv) Teaching, Training Methods and Technology;
  - (v) Research Methods, Parameters, Equipment and Scales etc.;
  - (vi) Technological automation, Software, Artificial Intelligence, Digitalization, Documentation etc.;
  - (vii) Biomedical Advancements;
  - (viii) Medical equipment;
  - (ix) Any other innovations, advances, technologies and developments that are useful for understanding, validating, teaching, investigations, diagnosis, treatment, prognosis, documentation, standardization and conduction of research in Homoeopathy.
- (b) There shall be multidisciplinary core committee constituted by the Commission for the purpose of supplementation of modern advances, scientific and technological developments in Homoeopathy, that identify the advances and developments that are suitable and appropriate to include in anyone or multiple departments.
- (c) There shall be an expert committee for each department constituted by Homoeopathy Education Board, to define and suggest the method of adaptation and incorporation of the said advances and developments and also specify the inclusion of the same at under-graduate or post-graduate level. The expert committee shall develop detailed methodology for usage, standard operating procedure and interpretation as required.
- (d) Any teaching staff, practitioner, researchers, students and innovators etc. may send their suggestions through a portal specified by National Commission for Homoeopathy regarding supplementation of modern advances, scientific and

technological developments in Homoeopathy and such suggestions shall be placed by Homoeopathy education board before core committee for consideration.

- (e) The modern advances shall be incorporated with due interpretation of the said advances based on the principles of Homoeopathy, supported by the studies and after five years of inclusion of such advances in syllabus, they shall be considered as part of Homoeopathy syllabus.
- (f) Once core committee approves the recommendations of the expert committee, National Commission for Homoeopathy shall direct the Homoeopathy education board, to include the same in curriculum of under-graduate or post-graduate as specified by expert committee and the Commission shall issue guidelines or if required to conduct orientation of teachers for incorporation of the recommended modern advancement or scientific and technological development.
- (g) Composition of the Committees for SMART-Hom. -There shall be a Core Committee and an Expert Committee for each department and the composition of such committees shall be as under-
  - (i) Composition of SMART-Hom. Core Committee (Homoeopathy):  
The SMART-Hom. shall be an eleven-member committee comprising of, -
    - a) President, Homoeopathy Education Board–Chairman;
    - b) four experts from Homoeopathy (one expert from Materia Medica, Organon of Medicine, repertory and practice of medicine)–members;
    - c) one expert (either retired or in service) each from CCRH, NIH, pharma industry, public health – member;
    - d) one Educational Technologist–member;
    - e) Member of Homoeopathy Education Board-Member Secretary.

Provided that the core committee can co-opt any expert as per the specific needs with due permission of the Chairperson, National Commission for Homoeopathy.

- (h) Terms of Reference. -
  - (i) The term of the Committee shall be three years from the date of its constitution.
  - (ii) The committee shall meet at least twice in a year.
  - (iii) The committee shall identify any modern advances, scientific and technical developments as listed above that are relevant and applicable to Homoeopathy either to, -
    - a) Understand, validate, or for conduction of research activities in Homoeopathy;
    - b) Useful for diagnosis or prognostication of a specific clinical condition and treatment;
    - c) Useful for teaching and training;
    - d) Useful for health care services through Homoeopathy.
  - (iv) The committee shall ensure the applicability of the identified

modern advancement or scientific and technical development to basic principles of Homoeopathy with the help of the four expert members of Homoeopathy.

- (v) To identify and recommend suitable experts for the Expert Committee to develop methodology for identification of modern advance or development.
- (vi) To suggest the application of the advances or developments in terms of its usage in specific department or to incorporate in under-graduate or post-graduate syllabus etc. as the case may be.
- (vii) As the modern science and technology is ever changing, the core committee shall identify the outdated part of the modern science and technology and suggest to the National Commission for Homoeopathy to replace it with the appropriate modern advances.

(i) Composition of Expert Committee (Homoeopathy).-

The Expert Committee shall be constituted by Homoeopathy Education Board comprising of five members as under-

- (i) Subject Expert as decided by Homoeopathy Education Board– Chairman;
- (ii) two experts from relevant Homoeopathy subjects (one from UG and One from PG) –members;
- (iii) one expert from relevant modern subject–member;
- (iv) one expert from teaching technology –member.

Provided that the Expert Committee can co-opt concerned expert in accordance to the selected area with the permission of President, Homoeopathy Education Board.

(j) Terms of Reference. –

- (i) The term of the committee shall be three years from the date of its constitution;
- (ii) The expert committee shall meet as many times as per the direction of the President Homoeopathy Education Board (HEB);
- (iii) The expert committee shall work on the suggestion from the core committee and decide how to incorporate it in the syllabus, its mode of teaching (i.e., lecture/non-lecture) and the assessment with the help of educational technologist, experts;
- (iv) The expert committee shall first understand the application of modern advances that are identified to incorporate and its relevance to the basic principles of Homoeopathy;
- (v) The expert committee shall also identify the need of advance technology in Homoeopathy particular to that vertical and identify the suitable technology and recommend its usage along with the standard operating procedure or methodology;



- (vi) The expert committee shall suggest core committee regarding the modern advances and technology to be included at under-graduate or post-graduate level.

## 11. Examination. -

### (a) GENERAL GUIDELINES FOR EXAMINATION, RESULT AND READMISSION

- (i) The Universities shall conduct the examination for the degree course in various states or the agencies empowered by an Act of Parliament.
- (ii) The examining body shall ensure that the minimum number of hours for lecture/demonstration/practical/seminar etc. in the subjects in each BHMS examination as specified in respective regulations are followed before allowing medical institutions to send the students for university examination.

The examining body shall ensure that the students of the medical institutions, who do not fulfill the criteria laid down in these regulations are not sent for the University Examination.

Each student shall be required to maintain minimum seventy-five percent attendance in each subject in theory (i.e., lecture hours) practical and clinical (i.e., non-lecture hours) separately for appearing in examination.

- (iii) Where the institute is maintaining physical register, it shall be recorded in cumulative numbering method as per *Annexure-iii* and at the end of the course/ term/ part of the course, after obtaining each student signature, the same is to be certified by respective Head of the Department and approved by Head of the Institute.
- (iv) The approved attendance shall be forwarded to the university.
- (v) Internal assessment examinations to be conducted by medical institutions during Ist, II<sup>nd</sup>, III<sup>rd</sup> and IV<sup>th</sup> BHMS professional years. The weightage of internal assessment shall be 20 per-cent of the total marks specified for each subject for main university examination.
- (vi) Internal assessment examination shall include 01 periodic assessment and 01 term test in each term of 6 months.
- (vii) It is compulsory for every student to pass with minimum 50% marks in the internal assessment examinations prior to filling the final university examination form of the respective professional year. Head of medical institution will send the marks of internal assessment and term test to the University prior to final examination of any professional year.
- (viii) There shall be no separate class for odd batch student (those students who could not keep the term) and the student has to attend the class along with regular batch or with junior batch as applicable.
- (ix) To become eligible for joining the Compulsory Rotatory Internship programme, all four professional examinations shall be passed and qualified in six electives and entire course of BHMS (including internship) should be completed within a period of maximum ten years.
- (x) The theory examination shall have twenty per cent. marks for Multiple Choice Questions (MCQ), forty per cent. marks for Short Answer Questions (SAQ) and

forty per cent. marks for Long Explanatory Answer Questions (LAQ) and these questions shall cover the entire syllabus of the subject.

- (xi) Each theory examination shall be of two and half hour duration.
- (xii) The minimum marks required for passing the examination shall be fifty percent. in theory component and fifty percent in practical component (that include practical, clinical, viva-voice, internal assessment and electives wherever applicable) separately in each subject.
- (xiii) Evaluation of electives: Electives shall be assessed in terms of attendance and assessment by grading: -
  - a) Grading shall be only for two electives per professional session.
  - b) Grading shall be mentioned in the University mark sheet of student.
  - c) The examination branch of the institution shall compile the grade of electives obtained by students and submit to university through the head of institution so that the University shall add the same to final mark sheet of the student.
- (xiv) Grading of electives:
  - a) Electives will be assessed by the teacher who has guided to the student.
  - b) The following points would guide the assessor:
    - i. Depth of problem definition – 15%
    - ii. Extent of work undertaken – 20%
    - iii. Innovation – 15%
    - iv. Logical and integrated way of presentation – 20%
    - v. Quality of learning derived – 20%
    - vi. Adequacy of references undertaken – 10%
  - c) The final grades would be as follows:
    - i. “A” – Excellent (above 70%)
    - ii. “B” – Good (above 60 %)
    - iii. “C” – Average (around 50%)
    - iv. “D” – below average (around 40%)
    - v. “E” – Poor (below 40%)
  - d) The student will need to get a minimum ‘C’ grade in all the electives in order to pass the BHMS course
- (xv) The Practical/oral examination shall be completed immediately after the theory examination.
- (xvi) The examining body shall hold examinations on such date and time as the examining body may determine. The theory and practical examination shall be held in the premises of the Homoeopathic Medical College concerned.

- (xvii) There shall be a regular examination and a supplementary examination in a year and the supplementary examination shall be conducted within six months of declaration of results (including issue of mark sheets).
- (xviii) A candidate obtaining sixty-five per cent. and above marks shall be awarded first class in the subject and seventy-five percent and above marks shall be awarded distinction in the subject.
- (xix) The award of class and distinction shall not be applicable for supplementary examinations.
- (xx) For non-appearance in an examination, a candidate shall not have any liberty for availing additional chance to appear in that examination.
- (xxi) If a student fails to appear in regular examination for cognitive reasons, he may appear in supplementary examination as regular student and his non-appearance in regular examination shall not be treated as an attempt.
- (xxii) Any diploma/degree qualification, at present included in II and III schedule of the Homoeopathy central council act where nomenclature is not in consonance with these regulations shall cease to be recognised medical qualification when granted after commencement of these regulations. However, this clause will not apply to the students who are already admitted to these courses before the enforcement of these regulations.
- (xxiii)
- a) APPOINTMENT OF EXAMINERS:
- i. No person shall be appointed as an external or internal examiner or paper setter or moderator in any of the subjects the Professional examination leading to and including the final Professional examinations for the award of the BHMS degree unless he has taken at least five years previously, a M.D.(Hom.) degree of a recognized university or an equivalent qualification in the particular subject as per recommendation of the Commission on teachers' eligibility qualifications and has had at least five years of total teaching experience in the subject concerned in a college affiliated to a recognized university at a faculty position.
  - ii. non-medical scientists engaged in the teaching of medical students as whole time teachers, may be appointed examiners in their concerned subjects provided they possess requisite PG qualifications and five-year teaching experience of medical students after obtaining their postgraduate qualifications. Provided further that the 50% of the examiners (Internal & External) are from the medical qualification stream
  - iii. External examiners shall not be from the same university and preferably be from outside the state.
  - iv. The internal examiner in a subject shall not accept external examinership for a college from which external examiner is appointed in his subject.
  - v. A university having more than one college shall have separate sets of examiners for each college, with internal examiners from the concerned college.
  - vi. External examiners shall rotate at an interval of 2 years.
  - vii. There shall be a Chairman of the Board of paper-setters who shall be an internal examiner and shall moderate the questions.

- viii. Except Head of the department of subject concerned in a college/institution, all other with the rank of reader or equivalent and above with requisite qualifications and experience shall be appointed internal examiners by rotation in their subjects; provided that where there are no posts of readers, then an Assistant Professor of 5 years standing as Assistant Professor may be considered for appointment as examiner.

**b) University Examination**

- i. **First B.H.M.S Examination:**
  - a. The student shall be admitted to the First B.H.M.S examination provided that he/she has required attendance as per clause (ii) of sub section (a) of regulation 11 and to the satisfaction of head of the medical institution.
  - b. The process of examination conduction and its results of First BHMS must be completed between 17<sup>th</sup> to the 18<sup>th</sup> Month from the date of admission.
  - c. In order to be declared as “Passed” in First BHMS examination, a candidate has to pass all the subjects of university examination including the internal assessments examination.
- ii. **Second B.H.M.S Examination:**
  - a. No candidate shall be admitted to the Second B.H.M.S examination unless he/she has passed the First B.H.M.S examination and has required attendance as per clause (ii) of sub section (a) of regulation 11 and to the satisfaction of the Head of the Homoeopathic Medical College.
  - b. The process of examination conduction and its results of Second BHMS must be completed between 29<sup>th</sup> to the 30<sup>th</sup> Month from the date of admission.
  - c. In order to be declared “passed” in the Second BHMS examination, a candidate has to pass all the subjects of university examination including the internal assessments examination.
- iii. **Third B.H.M.S Examination:**
  - a. No candidate shall be admitted to the Third B.H.M.S examination unless he/she has passed the Second B.H.M.S examination and has required attendance as per clause (ii) of sub section (a) of regulation 11 and to the satisfaction of the Head of the Homoeopathic Medical College.
  - b. The process of examination conduction and its results of Third BHMS must be completed between 41<sup>st</sup> to the 42<sup>nd</sup> Month from the date of admission.
  - c. In order to be declared as “passed” in the Third BHMS examination, a candidate has to pass all the subjects of university examination including the internal assessments examination.
- iv. **Fourth Year Examination:**
  - a. No candidate shall be admitted to the Fourth BHMS examination unless he/she has passed the Third BHMS examination and has required attendance as per clause (ii) of sub section (a) of regulation 11 and to the satisfaction of the Head of the Homoeopathic Medical College.
  - b. The process of examination conduction and its results of Third BHMS must be completed between 53<sup>rd</sup> to the 54<sup>th</sup> Month from the date of admission.

- c. In order to be declared as “passed” in the Fourth BHMS examination, a candidate has to pass all the subjects of university examination including the internal assessments examination.

**c) Result**

- i. The examining body shall ensure that the results of the examination are published within one month of the last date of examination so that students can complete the course in 5 ½ yrs. after admission.
- ii. Candidates who have passed in one or more subjects need not to appear in that subject or those subjects again in the subsequent examinations if the candidate passes the whole examination within four chances including the original examination.
- iii. Facility to keep term: Notwithstanding with the foregoing regulations, the students shall be allowed the facility to keep term on the following conditions:
  - a. The candidate shall pass First B.H.M.S examination in all the subjects at least one term (six months) before he/she is allowed to appear in the Second B.H.M.S examination.
  - b. The candidate must pass the Second BHMS examination at least one term (6 months) before he/she is allowed to appear in the Third BHMS examination.
  - c. The candidate must pass the Third BHMS examination at least one term (6 months) before he/she is allowed to appear in the Fourth BHMS examination.
- iv. The student who has not passed any of the four professional examinations even after exhausting all four attempts, shall not be allowed to continue his or her studies; provided that in case of serious personal illness of student and in any unavoidable circumstances, the vice chancellor of concerned university may provide two more chances in any one of four professional examinations.
- v. The examining body may under exceptional circumstances, partially or wholly cancel any examination conducted by it under intimation to the National commission for Homoeopathy and arrange for conducting re-examination in those subjects within a period of thirty days from the date of such cancellation.
- vi. The University or examining authority shall have the discretion to award grace marks at the maximum up to ten marks in total if a student fails in one or more subjects.

**12. Assessment.** -Assessment of students shall be in the form of Formative and Summative Assessments as under-

(a) **Formative Assessment.**-Students shall be assessed periodically to assess their performance in the class, to determine the understanding of B.H.M.S. course material and their learning out come in the following manner:-

- (i) Periodical Assessment shall be carried out in theory and at the end of teaching of a topic or module or a particular portion of syllabus. The following evaluation method may be adopted as appropriate to the content.

**Table -7**  
**Evaluation Method for Periodical Assessment**

Sl. No.	Evaluation criteria
---------	---------------------

1.	Practical/Clinical Performance
2.	Viva Voce, MCQs, MEQ(Modified Essay Questions/Structured Questions)
3.	Open Book Test (Problem Based)
4.	Summary Writing (Research Papers/Synopsis)
5.	Class Presentations; Work Book Maintenance
6.	Problem Based Assignment
7.	Objective Structured Clinical Examination (OSCE), Objective Structured Practical Examination (OPSE), Mini Clinical Evaluation Exercise (Mini-CEX), Direct Observation of Procedures (DOP), Case Based Discussion(CBD)
8.	Extra-curricular Activities, (Social Work, Public Awareness, Surveillance/ Prophylaxis Activities, Sports or Other Activities which may be decided by the Department).\
9.	Small Project

(ii)

- a) **I BHMS:** There shall be minimum three periodical assessments for each subject (ordinarily at 4<sup>th</sup>, 9<sup>th</sup>, and 14<sup>th</sup> month) and two term (ordinarily at 6<sup>th</sup> and 11<sup>th</sup> month) and pre university examination (ordinarily at 16<sup>th</sup> month) before final University examinations.
- b) **II BHMS, III BHMS & IV BHMS:** There shall be minimum two periodical assessment at 4<sup>th</sup> and 9<sup>th</sup> month and one term exam at 6<sup>th</sup> month and pre university examination at 10<sup>th</sup> month conducted by the College before final university examination.
- c) the example for first BHMS scheme and calculation of assessment shall be as per the following tables, namely:-



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																		) D		
1.	OM	10	6/1 0	5/1 0	7/ 1 0	18/3 0	18*1 0/30 =6	30/ 40	10/ 6	25/ 40	10/ 7	/3 54 0	10 /9 20= 6	90* 10/1 20= 6	8	6			6+6/2=6/ 10	8
2.	AH E	20						80	80	80	80	80	80							
3.	PB	20						80	80	80	80	80	80							
4.	HP	20						80	20	80	20	80	20							
5.	HM M	10						40	10	40	10	40	10							
6.	FP H	10						40	10	40	10	40	10							

\*Above chart applicable for subjects of 100 marks (80+20) and Subjects of 50 marks (40+10). Those subjects with 02 theory papers with 80 marks each, the final internal assessment score should be multiplied by 2. Similar pattern can be adopted for IInd, IIIrd and IV BHMS.



Table-9

**[Scheme of Assessment (Formative and Summative)]**

Sl. No.	Professional Course	Duration of Professional Course			
		First Term	Second Term	Third Term and University exam	
1	First Professional B.H.M.S.	First PA and First TT-1	Second PA and Second TT-2	Third PA and PE	First Professional B.H.M.S. Exam
		First Term	Second Term and University exam		
2	Second Professional B.H.M.S.	First PA and First TT-1	Second PA and PE		Second Professional B.H.M.S exam
3	Third Professional B.H.M.S.	First PA and First TT	Second PA and PE		Third Professional B.H.M.S exam
4	Fourth (Final) Professional B.H.M.S.	First PA and First TT	Second PA and PE		Fourth (Final) Professional exam

PA: Periodical Assessment; TT: Term Test; PE: pre university exam  
 UE: University Examinations

**(b) Summative Assessment. –**

- (i) Final University examinations conducted at the end of each professional B.H.M.S. shall be the Summative Assessment.
- (ii) There shall be double valuation system and shall be no provision for revaluation.
- (iii) There shall be two examiners (one internal and one external) University practical/clinical/viva voce examinations. It shall increase to 4 (2 internal and two external) for 200 marks
- (iv) While declaring the results of Summative Assessment, Internal Assessment component shall be considered as per the distribution of marks pattern provided in **Tables 11,13,15 and 17.**

13. **The Profession wise Subjects, Number of Papers, Teaching Hours and Marks Distribution shall be as per the following tables, namely: -**

<b>Table -10 First Year B.H.M.S (3 terms)</b>			
<i>No. of Hours per Day:7, Working Days:324; divide in three terms Teaching hours : 2268; Foundation Course=15 Working days (90 hours) Remaining Hours :2178</i>			
<b>Subject</b>	<b>Number of teaching hours</b>		
	<b>Lectures</b>	<b>Non- Lectures</b>	<b>Total</b>
<b>Hom UG-OM-I</b>	150	143	293
<b>Hom UG-AHE</b>	325	325	650
<b>Hom UG-PB</b>	325	325	650
<b>Hom UG-HP</b>	100	120	220
<b>Hom UG-HMM-I</b>	120	75	195
<b>Hom UG-Rep-I</b>	20	-	20
<b>Hom UG-FPH</b>	30	20	50
<b>HomUG-Yoga</b>	50	50	100
<b>Total</b>	<b>1120</b>	<b>1058</b>	<b>2178</b>

**Table-11 (Number of Papers and Marks Distribution for First Professional B.H.M.S. Subjects)**

<b>Sl No</b>	<b>Subject Code</b>	<b>Pape rs</b>	<b>Theor y</b>	<b>IA</b>	<b>Practical or Clinical Assessment</b>					<b>Grand Total</b>
					<b>Practi cal/ Clinic al</b>	<b>Viva</b>	<b>IA</b>	<b>Electives grade obtained</b>	<b>Marks obtained</b>	
1	<i>HomUG-OM-I</i>	1	<b>40</b>	10	20	20	10			100
2	<i>HomUG-AHE</i>	2	<b>160</b>	40	80	80	40			400
3	<i>HomUG-PB</i>	2	<b>160</b>	40	80	80	40			400
4	<i>HomUG-HP</i>	1	<b>80</b>	20	40	40	20			200
5	<i>HomUG-HMM-I</i>	1	<b>40</b>	10	20	20	10			100
6	<i>HomUG-FPH</i>	1	<b>40</b>	10	30	10	10			100
7	<i>HomUG-Yoga</i>	1	<b>40</b>	10	30	10	20			100
<b>Grand Total</b>										<b>1400</b>

<b>Table-12 Second Professional B.H.M.S.</b>				
<i>Working days=216,Teachinghours=1512</i>				
<b>Sl. No.</b>	<b>Subject Code</b>	<b>Number of teaching hours</b>		
		<b>Lectures</b>	<b>Non-Lectures</b>	<b>Total</b>
1	<b>HomUG-HMM-II</b>	150	30	180
2	<b>HomUG-OM-II</b>	150	30	180
3	<b>HomUG Rep-II</b>	20	30-	50
4	<b>HomUG-FMT</b>	120	50	170
5	<b>HomUG-Path-Micr</b>	200	80	280
6	<b>HomUG-CM</b>	135	100	235
7	<b>HomUG-PM-I</b>	80	92	172
8	<b>Hom UG Surgery I</b>	54	45	99
9	<b>Hom UG Gynecology I</b>	80	66	146
		989	523	1512

**Table-13 (Number of Papers and Marks Distribution for Second Professional B.H.M.S. Subjects)**

Sl. No.	Subject Code	Papers	Theory	Practical or Clinical	Practical or Clinical Assessment					
					Viva	Ele cti ve	IA		Sub Total (mar ks obtai ned)	Grand Total
							Theo ry	Pract ical		
1.	<i>HomUG-HMM-II</i>	1	80	40	40		20	20		200
2.	<i>HomUG-OM-II</i>	1	80	40	40		20	20		200
3.	<i>HomUG-FMT-I</i>	1	80	40	40		20	20		200
4.	<i>HomUG-Path Micr</i>	2	160	40	40		40	20		300
5.	<i>HomUG-CM</i>	1	80	40	40		20	20		200
<b>Grand Total</b>										<b>1200</b>

**Table-14 Third Professional B.H.M.S.***Working days=216,Teachinghours=1512*

Sl. No.	Subject Code	Number of teaching hours		
		Lectures	Non-Lectures	Total
1	<b>HomUG- -HMM-III</b>	150	80	230
2	<b>HomUG-OM-III</b>	150	80	230
3	<b>HomUG-R-III</b>	100	80	180
4	<b>HomUG-PM-II</b>	150	150	300
5	<b>Hom UG Surgery II</b>	150	120	270
6	<b>Hom UG Gynec II</b>	150	107	257
7	<b>Hom.UG-Mod. Phar-I</b>	45	-	45
	<b>Grand Total</b>	895	617	1512

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<b>Table-15 (Number of Papers and Marks Distribution for Third Professional B.H.M.S. Subjects)</b>										
Sl. No.	Subject Code	Papers	Theory	Practical or Clinical Assessment					Sub Total	Grand Total
				Practical or Clinical	Viva	Electives	IA			
							Theory	practical		
1	<i>HomUG-HMM-III</i>	1	80	40	40		20	20		200
2	HomUG-OM-III	1	80	40	40		20	20		200
3	<i>Hom-UG-R-III</i>	1	80	40	40		20	20		200
4	<i>Hom-UG SurgeryII</i>	2	160	80	80		40	40		400
5	<i>Hom-UG GynII</i>	2	160	80	80		40	40		400
6	<i>HomUG-Mod.Pharm</i>	1	40	-	40		20	---		100
<b>Grand Total</b>										1500

<b>Table-16 Fourth Professional B.H.M.S.</b>				
<i>Working days=216,Teachinghours=1512</i>				
Sl. No.	Subject Code	Number of teaching hours		
		Lectures	Non-Lectures	Total
1	HomUG-HMM-IV	202	100	302
2	HomUG-ORG-IV	150	100	250
3	HomUG-REP-IV	50	150	200
4	HomUG-PM-III	300	350	650
5	HomUG-RM-Stat.	35	25	60
6	HomUG-Yoga-II	25	25	50
	<b>Total</b>	737	775	
<b>Grand Total</b>				<b>1512</b>

<b>Table-17(Number of Papers and Marks Distribution for Fourth Professional B.H.M.S. Subjects)</b>									
Sl. No.	Subject Code	Papers	Theory	Practical or Clinical	Practical or Clinical Assessment			Sub Total (marks obtained)	Grand Total
					Viva	IA			
						Theory	Practical		
1	<i>HomUG-HMM-IV</i>	2	160	80	80	20	20		400
2	HomUG-ORGIV	1	80	40	40	20	20		200
3	HomUG-REP IV	1	80	40	40	20	20		200
4	HomUG-PM-III	3	240	80	80	60	40		500
5	<i>HomUG-RM-Stat.</i>	1	40	20	20	10	10		100
6	<i>HomUG-Yoga-II</i>	1	40	20	20	10	10		100
<b>Grand Total</b>									<b>1500</b>

#### 14. Migration of Student during the study: -

- (a) The student may be allowed to take the migration to continue their study to another college after passing the First professional examination, but failed student's transfer and mid-term migration shall not be allowed.
- (b) For migration, the students shall have to obtain the mutual consent of both colleges and Universities and it shall be against the vacant seat.

#### 15 COMPULSORY ROTATORY INTERNSHIP TRAINING

- (a) Objectives of the Internship Programme
  - (i) To expose intern to Clinical and Homoeopathic training to become a competent Homoeopathic Physician capable of functioning independently and effectively under Rural and Urban set ups;
  - (ii) To develop and sharpen sensitivity and sensibility to receive patient;
  - (iii) To develop clinical diagnostic skills, documentation, communication skills and professional ethical attitudes;
  - (iv) To develop and foster clinical judgment and decision-making skills;
  - (v) Learn to integrate various knowledge and apply to manage different clinical conditions;
  - (vi) Know the functioning of the health care system in the community;
  - (vii) Get acquainted with the National Health Programmes
- (b)
  - (i) Each candidate shall be required to undergo compulsory rotatory internship including internship orientation and finishing programme within one year from passing of fourth B.H.M.S. examination.
  - (ii) Ordinarily the internship programme shall commence on first working day of April for regular batch students and first working day of September for supplementary batch

students.

- (iii) The student shall be eligible to join the compulsory internship programme after passing all the subjects from First to Fourth (Final) Professional examination including six electives and after getting Provisional Degree Certificate from respective Universities and Provisional Registration Certificates from respective State Board or Council for Compulsory Rotatory Internship.
- (c) **Stipend:** During internship, to the interns belonging to Central Government, State Government and Union territory institution and all the private homoeopathy medical colleges/institution, the stipend shall be paid at par with other medical systems under respective Government and there shall not be any discrepancy between medical systems.
- (d) **Migration during Internship.-**
  - (i) Migration of internship shall be with the consent of both the Colleges and University; in the case where migration is between the colleges of two different Universities.
  - (ii) If migration is only between colleges of the same university, the consent of both the colleges shall be required.
  - (iii) Migration shall be accepted by the university on the production of the character certificate issued by the institute or college and the application forwarded by the college and university with a 'No Objection Certificate' as the case maybe.
- (e) **Orientation Programme:** The objective of the orientation programme is to introduce the activities to be undertaken during the internship
  - (i) The interns shall mandatorily attend an orientation programme regarding internship and it shall be the responsibility of the teaching institution to conduct the orientation before the commencement of the internship.
  - (ii) The orientation shall be conducted with an intention to make the intern to acquire the requisite knowledge about
    - a) Rules and Regulations of the Medical Practice and Profession,
    - b) Medical Ethics,
    - c) Medico Legal Aspects,
    - d) Medical Records,
    - e) Medical Insurance,
    - f) Medical Certification,
    - g) Communication Skills,
    - h) Conduct and Etiquette,
    - i) National and State Health Care Programme.
    - j) Project work
  - (iii) The orientation workshop shall be organized at the beginning of internship and an e-log book shall be maintained by each intern, in which the intern shall enter date-wise details of activities under taken by him during orientation.
  - (iv) The period of orientation shall be for 7 days.
  - (v) The manual for conducting the orientation as prescribed from time to time by the National Commission for Homoeopathy shall be followed.
- (f) **Finishing Programme**
  - (i) There will be a finishing programme for 3 days at the end of the internship
  - (ii) **Programme Description:** This programme is designed for the interns and will consist of ten sessions spread over a period of three days. The program may include both online and offline modes of training. It is aimed to enlighten the interns on various career opportunities available after successful completion of the program and how to equip themselves to meet the requirements and fulfill their dreams.
  - (iii) **Programme Outcomes:** After successful completion of this training the student will be able to
    - a) List the various career opportunities available after successful completion of the degree program.
    - b) Identify their Strengths and Weakness

- c) Choose a career of their choice
  - d) Enumerate the requirements to be met to become a successful professional
  - e) Demonstrate positive outlook and attitude towards the profession
  - f) Exhibit better skills in communication, problem solving, writing, team building, time management, decision making etc.
  - g) Demonstrate ethical and professional values and be a compassionate and caring citizen / professional.
- (iv) Training Components:
- a) Job opportunities after successful completion of the program
  - b) Study opportunities in India and abroad after successful completion of the program
  - c) Entrepreneurship opportunities after successful completion of the program
  - d) Research opportunities after successful completion of the program
  - e) Public Service opportunities after successful completion of the program
  - f) Training and awareness about Competitive exams
  - g) Self analysis to choose the right option
  - h) Building Interpersonal & Soft Skills including Interview skills, Leadership skills, Resume writing skills, problem solving and decision making skills
  - i) Certificate writing and prescription writing and medico-legal issues relevant to the profession
  - j) Loan assistance and other scholarship facilities available for establishment and study.
  - k) Ethical / Professional and Social responsibilities after successful completion of internship
- (g) Activities during Internship.-These will be two fold
- (i) **Clinical work** in the OPD/ College hospital/ MoU hospital/ Primary Health Centre or Community Health Centre or Research unit of Central Council for Research in Homoeopathy or Rural Hospital or District Hospital or Civil Hospital or any Government Hospital of Modern Medicine or Homoeopathy Medicine or NABH (National Accreditation Board for Hospitals) accredited private hospital of Homoeopathy.

The daily working hours of intern shall be not less than eight hours; the intern shall maintain an e-log book containing all the activities under taken by him/her during internship

Clinical work during internship can be done as per options provided below:

- a) **Option I.**-Divided into clinical training of nine months in the Homoeopathy hospital attached to the college and three months in Primary Health Centre or Community Health Centre or Research unit of Central Council for Research in Homoeopathy or Rural Hospital or District Hospital or Civil Hospital or any Government Hospital of Modern Medicine or Homoeopathy Medicine or NABH (National Accreditation Board for Hospitals) accredited private hospital of Homoeopathy.
  - i. The interns shall be posted in any of the following centers where National Health Program are being implemented and these postings shall be to get oriented and acquaint the knowledge of implementation of National Health Programme in regard to,-
    - a. Primary Health Centre;
    - b. Community Health Centre or Civil Hospital or District Hospital;
    - c. Any recognized or approved Homeopathy Hospital or Dispensary;
    - d. In a clinical unit/Hospital of Central Council for Research in Homoeopathy;
  - ii. All the above institutes mentioned in clauses (a) to (d) shall have to be recognized by the concerned University or Government designated authority for providing such training.
  - iii. During the three months internship training in Primary Health Centre or Research unit of Central Council for Research in Homoeopathy or Rural Hospital or Community Health Centre or District Hospital or any recognized or approved hospital of Modern Medicine or Homoeopathy Hospital or Dispensary, the interns shall:
    - a. get acquainted with routine of the Primary



- Health Centre and maintenance of their records;
- b. get acquainted with the diseases more prevalent in rural and remote areas and their management;
  - c. involve in teaching of health care methods to rural population and also various immunization programme;
  - d. get acquainted with the routine working of the medical or non-medical staff of Primary Health Centre and be always in contact with the staff in this period;
  - e. develop research aptitude;
  - f. get familiarized with the work of maintaining the relevant register like daily patient register, family planning register, surgical register, etc. and take active participation in different Government health schemes or programme;
  - g. participate actively in different National Health Programme implemented by the State Government.
- iv. The record of attendance during three months in (PHC/CHC/Dispensory/clinical unit/Hospital of Central Council for Research in Homoeopathy) must be maintained by the student according to their posting and should be certified by the medical officer where student undergone the training and shall be submitted and counter certified to Principal of college on monthly basis.
- b) **Option II.**-All twelve months in Homoeopathy hospital attached to the college.
- i. The record of attendance during twelve months in hospital attached to college must be maintained by the student according to their posting and should be certified by the medical officer where student undergone the training and shall be submitted and counter certified by dean/ Principal of college on monthly basis.
- c) **Division of Clinical work during posting in Option I & option II is as below:**

**Table-18**  
**(Distribution of Internship)**

Sl. No.	Departments	Option I	Option II
1.	Practice of Medicine OPD including Psychiatry and Yoga, Dermatology, and related specialties and respective IPD	2 months	3 months
2.	Surgery OPD including OT, related specialties and Ophthalmology, ENT respective IPD	1.5 months	2 months
3.	Gynecology & Obstetrics OPD, related specialties including OT, and respective IPD	1.5 months	2 months
4.	Pediatric OPD related specialties including NICU, and respective IPD	1 month	2 months
5.	Community Medicine OPD related specialties including Rural/Public Health /MCH respective IPD	2 months	2 months
6.	Casualty	1 month	1 month
7.	Primary Health Centre or Community Health Centre or Research unit of Central Council for Research in Homoeopathy or Rural Hospital or District Hospital or Civil Hospital or any Government Hospital of Modern Medicine or Homoeopathy Medicine or NABH (National Accreditation Board for Hospitals) accredited private hospital of Homoeopathy	3 months	

- The intern shall undertake the following activities in respective department in the hospital attached to the College, namely: -

1. **Practice of Medicine.** -

The intern shall be practically trained to acquaint with and to make him competent to deal with following, namely: -

- (a) all routine works such as case taking, investigations, diagnosis and management of diseases with Homoeopathic medicine;
- (b) routine clinical pathological work such as hemoglobin estimation, complete haemogram, urine analysis, microscopic examination of blood parasites, sputum examination, stool examination, interpretation of laboratory data and clinical findings and arriving at a diagnosis and all pathological and radiological investigations useful for monitoring the deterioration of different disease conditions;
- (c) Training in routine ward procedures and supervision of patients in respect of their diet, habits and verification of medicine schedule.

2. **Surgery.**-The intern shall be practically trained to acquaint with and to make him competent to deal with following, namely:-

- (a) Clinical examination, Diagnosis and Management of common surgical disorders according to Homoeopathic principles using homoeopathic medicines;
- (b) Management of certain surgical emergencies such as fractures and dislocations, acute abdomen;
- (c) Intern shall be involved in Pre-operative and Post-operative managements;
- (d) Surgical procedures in Ear, Nose, Throat, Dental problems, Ophthalmic problems;
- (e) Examinations of Eye, Ear, Nose, Throat and Refractive Error with the supportive instruments in Out-Patient Department; and
- (f) Practical training of a septic and antiseptic techniques, sterilization;
- (g) Practical use of local anesthetic techniques and use of anesthetic drugs;
- (h) Radiological procedures, clinical interpretation of X-ray, Intra Venous Pyelogram, Barium meal, Sonography and Electro Cardio Gram;
- (i) Surgical procedures and routine ward techniques such as-
  - (i) suturing of fresh injuries;
  - (ii) dressing of wounds, burns, ulcers and similar ailments;
  - (iii) incision and drainage of abscesses;
  - (iv) excision of cysts and;
  - (v) venesection;

3. **Gynecology &Obstetrics.** –The intern shall be practically trained to acquaint with and to make him competent to deal with following, namely:-

- (a) Antenatal and post-natal problems and their remedies, antenatal and post-natal care;
- (b) Management of normal and abnormal labors; and
- (c) Minor and major obstetric surgical procedures.
- (d) all routine works such as case taking, investigations, diagnosis and management of common Gynecological conditions with Homoeopathic medicine;
- (e) Screening of common carcinomatous conditions in women.

4. **Pediatrics:** The intern shall be practically trained to acquaint with and to make him competent to deal with following, namely:-

- (a) Care of newborn along with immunization programme;

- (b) Important pediatric problems and their Homoeopathic management;
5. **Community Medicine.**- The intern shall be practically trained to acquaint with and to make him competent to deal with following, namely:-
- (a) Programme of prevention and control of locally prevalent endemic diseases including nutritional disorders, immunization, management of infectious diseases, etc.;
  - (b) Family welfare planning programme;
  - (c) All National Health Programmes of Central Government at all levels
  - (d) Homoeopathic prophylaxis and management in cases of epidemic/endemic/pandemic diseases.
6. **Emergency or Casualty Management.**-The intern shall be practically trained to acquaint with and to make him competent to deal with all emergency conditions and participate actively in casualty section of the hospital in identification of casualty and trauma cases and their first aid treatment and also procedure for referring such cases to the identified hospitals.

**(ii) Project work**

- a) Each intern will undertake a Project utilizing the knowledge of Research Methodology and Biostatistics acquired in the IV BHMS.
  - b) It would be the responsibility of the intern to choose the topic of the subject (clinical/community/education) within the first month of the internship and will communicate to the Intern programme coordinator
  - c) The Project will run through 3 phases of Planning (3 months), Data collection (3months) and Finalization and writing (3 months)
  - d) The writing will be as per the format taught in the course on Research Methodology and will be minimal 1500 words. It will be typewritten and submitted in a spiral binding as well as in the electronic format
  - e) The Project will end with a brief presentation to the IV BHMS students
  - f) The Principal will assign a teacher to evaluate the project which will be with respect to the following
    - i. Originality of the idea
    - ii. Scientific methodology followed in formulating the idea and the design
    - iii. Analysis
    - iv. Results and conclusion
    - v. Merits of writing
    - vi. The grades will range from A (70% and above), B (60 - 70%), C (50-60%) and D (below 50%)
- a) A Certificate will be awarded to the Intern stating the Title of the Project and grade received.

**(h) Electronic Logbook. -**

(i) It shall be compulsory for an intern to maintain the record of procedures done/assisted/observed by him on day-to-day basis in a specified e-logbook and the intern shall maintain a record of work, which is to be verified and certified by the Medical Officer or Head of the Unit or Department under whom he works.

(ii) Failure to produce e-logbook, complete in all respects duly certified by the concerned authority to the Dean / Principal / Director at the end of Internship Training Programme, may result in cancellation of his performance in any or all disciplines of Internship Training Programme.

(iii) The institution shall retain soft copy of the completed and certified -log book and is to be made available for the verification.

- (i) **Evaluation of Internship.** -(i) The evaluation system shall assess the skills of a candidate while performing the minimum number of procedures as enlisted with an objective that successful learning

of these procedures will enable the candidates to conduct the same in his actual practice.

(ii)The evaluation shall be carried out by respective Head of Department at the end of each posting and the reports shall be submitted to Head of the institute in Form-1 under **Annexure-iv**

(iii)On completion of one year of compulsory rotatory internship including submission of project, the Head of the Institute evaluate all the assessment reports in the prescribed Form-1 under **Annexure-iv**, provided by various Head of the Department at the end of respective posting and if found satisfactory, the intern shall be issued Internship Completion Certificate in Form-2 under **Annexure-v** within seven working days.

(iv)If a candidate's performance is declared as unsatisfactory upon obtaining below fifteen marks as per Form-2 under **Annexure-v** or less than fifty per cent. of marks, in an assessment in any of the Departments, he shall be required to repeat the posting in the respective department for a period of thirty per-cent of the total number of days, laid down for that department in Internship Training and posting.

(v)Candidate shall have the right to register his grievance in any aspects of conduct of evaluation and award of marks, separately to the concerned Head of the Department and Head of the Institution, within three days from the date of completion of his evaluation, and on receipt of such grievance, the Head of the Institution in consultation with the Head of the concerned Department shall redress and dispose of the grievance in an amicable manner within seven working days.

(j) **Leave for interns. -**

(i)During compulsory rotatory internship of one year, 12 days of leaves are permitted.

(ii)Any kind of absence beyond 12 days shall be extended accordingly.

(iii)Intern cannot take more than three days including prefix or suffix of any kind of holidays leave at a time.

(k) **Completion of internship:** If there is any delay in the commencement of internship or abnormal break during internship due to unavoidable conditions, in such cases, internship period shall be completed within maximum period of 24 months from the date of passing the qualifying examination of Forth (Final) Professional B.H.M.S.

(i) Provided that in such cases, the student shall take prior permission from the Head of the institution in writing with all supporting documents thereof;

(ii) It shall be the responsibility of the head of the institution/college to scrutinized the documents, and assess the genuine nature of the request before issuing permission letter;

(iii) While rejoining internship, the student shall submit the request letter along with supporting documents, and all necessary documents supporting his application.

**16. Tuition Fee.**-Tuition fee as laid down and fixed by respective governing or fee fixation committees as applicable shall be charged for four and half years only and no tuition fee shall be charged for extended duration of study in case of failing in examinations or by any other reasons and there shall not be any fee for internship doing in the same institute.

Dr. Tarkeshwar Jain

President, Homoeopathy Education Board,  
National Commission for Homoeopathy, New  
Delhi

**Appendix (A)**

**(See Regulation 6(4))**

SCHEDULE relating to “SPECIFIED DISABILITY” referred to in clause (zc) of section 2 of the Rights of Persons with Disabilities Act, 2016 (49 of 2016), provides as under:-

1. Physical disability-

- (a) Loco motor disability (a person’s inability to execute distinctive activities associated with movement of self and objects resulting from affliction of musculoskeletal or nervous system or both), including-
- (i) “Leprosy cured person” means a person who has been cured of leprosy but is suffering from-
    - a) Loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifest deformity,
    - b) Manifest deformity and paresis but having sufficient mobility in their hands and feet to enable them to engage in normal economic activity,
    - c) Extreme physical deformity as well as advanced age which prevents him/her from undertaking any gainful occupation, and the expression “leprosy cured” shall construed accordingly,
  - (ii) “Cerebral palsy” means a Group of non-progressive neurological condition affecting body movements and muscle coordination, caused by damage to one or more specific areas of the brain, usually occurring before, during or shortly after birth.
  - (iii) “Dwarfism” means a medical or genetic condition resulting in an adult height of 4 feet 10 inches (147 centimetres) or less,
  - (iv) “Muscular dystrophy” means a group of hereditary genetic muscle disease that weakens the muscles that move the human body and persons with multiple dystrophy have incorrect and missing information in their genes, which prevents them from making the proteins they need for health muscular. It is characterized by progressive skeletal muscle weakness, defects in muscle proteins, and the death of muscle cells and tissue,
  - (v) “acid attack victims” means a person disfigured due to violent assaults by throwing of acid or similar corrosive substance.
- (b) Visual impairment-
- (i) “blindness” means a condition where a person has any of the following conditions, after best correction-
    - a) Total absence of sight, or
    - b) Visual acuity less than 3/60 or less than 10/200 (Snellen) in the better eye with best possible correction, or
    - c) Limitation of the field of vision subtending an angle of less than 10 degree.
  - (ii) “Low-vision” means a condition where a person has any of the following conditions, namely:-
    - a) Visual acuity not exceeding 6/18 or less than 20/60 upto 3/60 or upto 10/200 (Snellen) in the better eye with best possible corrections; or
    - b) Limitation of the field of vision subtending an angle of less than 40 degree up to 10 degree.
- (c) Hearing impairment-
- (i) “Deaf” means persons having 70 DB hearing loss in speech frequencies in both ears;
  - (ii) “Hard of hearing” means person having 60 DB hearing loss in speech

frequencies in both ear,

- (d) “Speech and language disability” means a permanent disability arising out of conditions such as laryngectomy or aphasia affecting one or more components of speech and language due to organic or neurological causes.
  - (e) Intellectual disability a condition characterized by significant limitation both in intellectual functioning (reasoning, learning, problem solving) and in a dative behaviour which covers a range of every day, social and practical skills, including-
    - (i) “Specific learning disabilities” means a heterogeneous group of condition conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do mathematic calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia.
    - (ii) “Autism spectrum disorder” means a neuro-developmental condition typically appearing in the first three years of life that significantly affects a person’s ability to communicate, understand relationships and relate to others and is frequently associated with unusual or stereotypical rituals or behaviours.
2. Mental behaviour- “means illness” means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviours, capacity to recognize reality or ability to meet the ordinary demands of life, but does not include retardation which is a condition of arrested or incomplete development of mind of a person,
3. Disability caused due to-
- (a) Chronic neurological conditions, such as-
    - (i) “Multiple sclerosis” means an inflammatory, nervous system disease in which the myelin sheaths around the axons of nerve cells of the brain and spinal cord are damaged, leading to demyelisation and affecting the ability of nerve cells in the brain and spinal cord to communicate with each other.
    - (ii) “Parkinson’s disease” means a progressive disease of the nervous system marked by tremor, muscular rigidity and slow, imprecise movement, chiefly affecting middle-aged and elderly people associated with degeneration of the basal ganglia of the brain and a deficiency of the neurotransmitter dopamine.
  - (b) Blood disorder-
    - (i) “Haemophilia” means an inheritable disease, usually affecting only male but transmitted by women to their male children, characterized by loss or impairment of the normal clotting ability of bold so that a minor would may result in fatal bleeding,
    - (ii) “Thalassemia” means a group of inherited disorders characterized by reduced or absent amounts of haemoglobin.
    - (iii) “Sickle cell disease” means a haemolytic disorder characterised by chronic anaemia, painful events, and various complication due to associated tissue and organ damage, “Haemolytic” refers to the destruction of cell membrane of red blood cells resulting in the release of haemoglobin,
4. Multiple Disabilities (more than one of the above specified disabilities) including deaf blindness which means a condition in which a person may have combination of hearing and visual impairments causing severe communication, developmental, and educational problems.
5. Any other category as may be notified by the Central Government from time to time.

**Appendix B**

(See regulation 6 (4))

**Guidelines regarding admission of students, with “Specified Disabilities” under the Rights of Persons with Disabilities Act, 2016 (49 of 2016), in B.H.M.S.**

1. The “Certificate of Disability” shall be issued in accordance with the Rights of Persons with Disabilities Rules, 2017, published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-section (i), vide number G.S.R. 591 (E), dated the 15th June, 2017.
2. The extent of “specified disability” in a person shall be assessed in accordance with the “guidelines for the purpose of assessing the extent of specified disability in a person included under the Rights of Persons with Disabilities Act, 2016 (49 of 2016)”, published in the Gazette of India, Extraordinary, Part II, section 3, Sub-section (ii), vide number S.O. 76 (E), dated the 4<sup>th</sup> January, 2018.
3. The minimum degree of disability should be 40% (Benchmark Disability) in order to be eligible for availing reservation for persons with specified disability.
4. The term ‘Persons with Disabilities’ (PwD) is to be used instead of the term ‘Physically Handicapped’ (PH)

**TABLE**

Sl. No.	Disability Category	Type of Disabilities	Specified Disability	Disability Range		
				(5)		
(1)	(2)	(3)	(4)	Eligible for B.H.M.S. Programme, Not Eligible for	Eligible for B.H.M.S. Programme, Eligible for PwD Quota	Not Eligible for Programme,

				PwD Quota		
1.	Physical Disability	(A) Locomotor Disability, including Specified Disabilities (a to f).	(a) Leprosy cured person* (b) Cerebral Palsy** (c) Dwarfism (d) Muscular Dystrophy (e) Acid attack victims (f) Other* ** such as Amputation, Poliomyelitis, etc.	Less than 40% disability	40-80% disability Persons with more than 80% disability may also be allowed on case to case basis and their function a incompetency will the aid of assistive devices, if it is being used, to see if its is brought below 80% and whether they possess sufficient motor ability as required to pursue and complete the programme satisfactorily.	More than 80%

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			<p>* Attention should be paid to loss of sensations in fingers and hands, amputation, as well as involvement of eyes and corresponding recommendations be looked at.</p> <p>** Attention should be paid to impairment of vision, hearing, cognitive function etc. and corresponding recommendations be looked at.</p> <p>*** Both hands intact, with intact sensations, sufficient strength and range of motion are essential to be considered eligible for B.H.M.S. programme.</p>		
		(B) Visual Impairment (*)	(a) Blindness	Less than 40% disability (i.e. Category '0 (10%)' I (20%)' & II (30%)	Equal to or More than 40% Disability (i.e. Category III and above)
			(b) Low vision		
		(C) Hearing Impairment @	(a) Deaf	Less than 40% Disability	Equal to or more than 40% Disability
			(b) Hard of hearing		
			<p>(*) Persons with Visual impairment/ visual disability of more than 40% may be made eligible to pursue Graduate B.A.M.S. Education and may be given reservation, subject to the condition that the visual disability is brought to a level of less than the benchmark of 40% with advanced low vision aids such as telescopes / magnifier etc.</p> <p>@ Persons with hearing disability of more than 40% may be made eligible to pursue Graduate B.A.M.S. Education and may be given reservation, subject to the condition that the hearing disability is brought to a level of less than the benchmark of 40% with the aid of assistive devices.</p> <p>In addition to this, the individual should have a speech discrimination score of more than 60%.</p>		
		(D) Speech & language	Organic/neurological causes	Less than 40%	Equal to or more than

		disability		Disability	40% Disability
		<p>It is proposed that for admission to B.H.M.S. programme the Speech Intelligibility Affected (SIA) score shall not exceed 3 (Which will correspond to less than 40%) to be eligible to pursue the B.H.M.S. programme. The individuals beyond this score will not be eligible for admission to the B.H.M.S. programme.</p> <p>Persons with an Aphasia Quotient (AQ) upto 40% may be eligible to pursue B.H.M.S. programme but beyond that they will neither be eligible to pursue the B.H.M.S. programme nor will they have any reservation.</p>			



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2.	Intellectual disability		(a) Specific learning disabilities (Perceptual disabilities, Dyslexia, Dyscalculia, Dyspraxia & Developmental aphasia)#	# currently there is no Quantification scale available to assess the severity of SpLD, therefore the cut-off of 40% is arbitrary and more evidence is needed.  Less than 40% Disability	Equal to or more than 40% disability But selection will be based on the learning competency evaluated with the help of the remediation/assisted technology/aids/infrastructural changes by the Expert Panel.	
			(b) Autism spectrum disorders	Absence or Mild Disability, Asperger syndrome (disability of 40-60% as per ISAA) where the individual is deemed fit for B.H.M.S. programme by an expert panel	Currently not recommended due to lack of objective method to establish presence and extent of mental illness.  However, the benefit of reservation/quot a may be considered in future after developing better methods of disability assessment.	Equal to or more than 60 % disability or presence of cognitive/intellectual disability and or if the person is deemed unfit for pursuing B.H.M.S. programme by an expert panel.
3.	Mental Behaviour		Mental illness	Absence or mild Disability: less than 40% (under IDEAS)	Currently not recommended due to lack of objective method to establish presence and extent of mental illness.  However, the benefit of reservation/quota may be considered in future after developing better methods of disability assessment.	Equal to or more than 40 % disability or if the person is deemed unfit to perform hi/her duties. Standards may be drafted for the definite of “fitness to practice medicine” as are used by several institutions of countries other than India.

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4.	Disability caused due to	(a) Chronic Neurological Conditions	(i) Multiple Sclerosis	Less than 40% Disability	40% 80% disability	More than 80%
			(ii) Parkinsonism			
		(b) Blood Disorders	(i) Haemophilia	Less than 40% Disability	40% 80% disability	More than 80%
			(ii) Thalassemia			
(iii) Sickle cell disease						
5.	Multiple disabilities including deaf blindness		More than one of the above specified disabilities	<p>Must consider all above while deciding in individual cases recommendations with respect to presence any of the above, namely , visual, Hearing, Speech &amp; Language disability, Intellectual Disability, and Mental Illness as a component of Multiple Disability.</p> <p>Combining formula as notified by the related Gazette Notification issued by the Govt. of India</p> $\frac{a+b(90-a)}{90}$ <p>(where a=higher value of disability % and b=lower value of disability % as calculated for different disabilities)</p> <p>Is recommended for computing the disability arising when more than one disabling condition is present in a given individual. This formula may be used in cases with multiple disabilities, and recommendations regarding admission and/or reservation made as per the specific disabilities present in a given individual</p>		

**Note:** For selection under PwD category, candidates will be required to produce Disability Certificate before their schedule date of counselling from one of the disability assessment boards as designated by concerned Authority of Government of India.

## **Foundation Course**

### **BACKGROUND**

Homoeopathic Medical education in India requires the orientation of the new entrant to a basic philosophical orientation, a need to think in an integrated and holistic manner, an ability to function in a team at the bedside and a capacity to invest in a life-long learning pattern. Homoeopathy, though more than 250 years old, is relatively young as a scientific discipline and has attracted a number of negative community exposure due to a variety of reasons. In India, we are aware that the student who enters the portals of a homoeopathic college rarely does so out of his volition. It is often an exercise as the last choice or one which is adopted as a stepping stone to a 'medical' degree. Hence the mind-set of the new entrant is rarely informed, positive and self-affirming.

However, we know that like all medical disciplines, homoeopathy training includes a wide spectrum of domains that involves exposure to human interactions and interpersonal relationships in various settings including hospital, community, clinics etc. The training is intense and demands great commitment, resilience and lifelong learning. It is desirable to create a period of acclimatization and familiarization to the new environment. This would include an introduction to the course structure, learning methods, technology usage, and peer interactions which would facilitate their smooth transition from Junior college to homoeopathic college.

This is planned to be achieved through a dedicated 15 days exclusive "Foundation Course", at the beginning of the BHMS course to orient and sensitize the student to the various identified areas.

### **Goals and Objectives**

Broad goals of the Foundation Course in Homoeopathy include:

1. Orienting the students to various aspects of homoeopathic system of medicine.
2. Creating in them the conscious awareness of the 'Mission' as defined by Master Hahnemann
3. Equipping them with certain basic, but important skills required for going through this professional course and taking care of patients.
4. Enhancing their communication, language, computer and learning skills.
5. Providing an opportunity for peer and faculty interactions and introducing an orientation to various learning methodologies.

### **Objectives**

(a) Orient the learner to:

- (i) The medical profession and the mission of a homoeopath in society
- (ii) The BHMS programme
- (iii) Vision and Mission of the Institute
- (iv) Concept of Holistic and Positive health and ways to acquire and maintain it
- (v) History of Medicine and Homoeopathy and the status of Homoeopathy in the world
- (vi) Medical ethics, attitudes and professionalism
- (vii) Different Health systems available in the country
- (viii) Health care system and its delivery
- (ix) National health priorities and policies
- (x) Principles of primary care (general and community-based care)
- (xi) Concept of mentorship programme

- (b) Enable the learner to appreciate the need to enhance skills in:
- (i) Language
  - (ii) Observation, documentation & understanding of basic medical technologies
  - (iii) Interpersonal relationships and Team behavior
  - (iv) Communication across ages and cultures
  - (v) Time management
  - (vi) Stress management
  - (vii) Use of information technology
- (c) Train the learner to provide:
- (i) First-aid/ Emergency management
  - (ii) Basic life support
  - (iii) Universal precautions and vaccinations
  - (iv) Patient safety and biohazard safety
- (d) Language and Computer skills
- (i) Local language programme
  - (ii) English language programme
  - (iii) Computer skills

These may be arranged as per the needs of the particular batch and extra coaching may be continued after the Foundation programme

### **Content and Methodology**

The programme will be run in Sessions which must be interactive.

The major components of the Foundation Course include:

#### **1) Orientation Program:**

This includes orienting students to all the components mentioned below with special emphasis on the role of Homoeopathy and homoeopath in today's times.

#### **2) Skills Module (Basic):**

This involves skill sessions such as Basic Life Support/ Emergency Management, First Aid, Universal Precautions and Biomedical Waste and Safety Management that students need to be trained prior to entering the patient care areas.

#### **3) Field visit to Community and Primary Health Centre:**

These visits provide orientation to the care delivery through community and primary health centres, and include interaction with health care workers, patients and their families.

#### **4) Professional development including Ethics:**

This is an introduction to the concept of Professionalism and Ethics and is closely related to Hahnemann's emphasis on the conduct of a physician. This component will provide students with understanding that clinical competence, communication skills and sound ethical principles are the foundation of professionalism. It will also provide understanding of the consequences of unethical and unprofessional behavior, value of honesty, integrity and respect in all interactions. Professional attributes such as accountability, altruism, pursuit of excellence, empathy, compassion and humanism will be addressed. It should inculcate respect and sensitivity for gender, background, culture, regional and language diversities. It should also include respect towards the differently abled persons. It introduces the students to the basic concept of compassionate care and functioning as a part of a health care team. It sensitizes students to "learning" as a behavior and to the appropriate methods of learning.

**5) Enhancement of Language / Computer skills / Learning Skills:**

These are sessions to provide opportunity for the students from diverse background and language competence to undergo training for speaking and writing English, fluency in local language and basic computer skills. The students should be sensitized to various learning methodologies such as small group discussions, skills lab, simulations, documentation and concept of Self-Directed learning.

**Structure of the program for students**

<b>Serial No.</b>	<b>Topic</b>	<b>Type of activity</b>	<b>Duration hrs.</b>
1.	Welcome and Introduction to Vision Mission of the Institute	Lecture	1
2.	Mission and role of a Homoeopathy and Homoeopath in society including showcasing effects of Homoeopathy	Interactive discussion	6
3.	BHMS Course of study and introducing to first year faculty	Presentation	1
4.	Visit to institution / campus / facilities	Walking tour	4
5.	Concept of Holistic and Positive health	Interactive discussion	2
6.	History of Medicine and Homoeopathy and state of Homoeopathy in the world	Presentation	2
7.	Adult Learning principles	Interactive	2
8.	Health care system and delivery	Visit to PHC/ Urban health centre and interaction with staff	3
9.	Different health care systems recognized in the country and the concept of pluralistic health care systems	Presentation	1
10.	Primary Community care	Interaction	2
11.	Basic Life support	Demonstration video and practice	4
12.	Communication – its nature and importance in different social and professional settings	Practical with scenarios and enactment with observation	4
13.	Medical ethics – role in enhancing patient care	Role play	2
14.	Who is professional?	Debate between two sides on a topic	2
15.	Time management	Practical exercise	3
16.	First aid – principles and techniques	Demonstration and presentation	2
17.	National health priorities and policies	Presentation	1
18.	Importance of Mental Health and Hygiene to a medical student in the medical profession  Stress management including importance of Sports and Extracurricular activities	Practical demonstration / video	14
19.	Concept and practice of Mentoring	Interactive discussion	4
20.	Constitutional values, Equality, Gender sensitization and ragging policy	Presentation and Interactive	3
21.	Universal precautions and vaccinations	Presentation followed by discussion	1
22.	Importance of Observation and Documentation in Homoeopathic practice	Practice exercise through video observation	6

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23.	Team working	Game and debriefing	4
24.	Patient safety and Biomedical hazards	Video and presentation	2
25.	Computer skills	Demonstration and Practice of basic use of word, Excel and PPT	4
26.	Language skills	Language labs	10
	<b>TOTAL</b>		<b>90</b>

**TENTATIVE TEMPLATE OF ACADEMIC CALENDAR**

**FIRST PROFESSIONAL B.H.M.S.**

(18 MONTHS)

<b>Sl. No.</b>	<b>DATE / PERIOD</b>	<b>ACADEMIC ACTIVITY</b>
1.	First Working Day of October	Course Commencement
2.	15 working Days	Foundation Course
	First periodic assessment	January- Internal Assessment (PA-1)
3.	Fourth Week of March	First Terminal Test -Internal Assessment (TT-1)
	Second periodic assessment	June -Internal Assessment (PA-2)
4.	First week of August	Second Terminal Test -Internal Assessment (TT-2)
5.	Third periodic assessment	November – Internal Assessment – (PA-3_
	Second week of January	Preliminary Exam (PE)
5.	Second Week of February to March	University Examination
6.		
7.	<i>First Working Day of April</i>	<i>Start of second professional year</i>
	<b>NOTE.-</b> <ol style="list-style-type: none"><li>1. Universities / Institutions / Colleges shall specify dates and year while preparing academic calendar of that particular batch of students. The same is to be informed to students and displayed in respective websites.</li><li>2. Institutions/Colleges established in Extreme Weather Conditions may adjust the timings as required by maintaining the stipulated hours of teaching. However, the structure of academic calendar shall not be altered.</li><li>3. Academic calendar may be modified according to directions of National Commission for Homoeopathy issued from time to time.</li></ol>	

**A. TENTATIVE TEMPLATE OF ACADEMIC CALENDAR**  
**SECOND/THIRD/ FOURTH PROFESSIONAL B.H.M.S.**

(12 MONTHS)

<b>Sl. No.</b>	<b>DATE /PERIOD</b>	<b>ACADEMIC ACTIVITY</b>
1.	First Working Day of April	Course Commencement
2.	Fourth Week of July	First periodic - Internal Assessment (PT-1)
3.	Fourth week of September	First terminal exam- Internal Assessment (TT-1)
4.	Fourth week of December	Second periodic - Internal Assessment (PT-2)
5.	Second Week of January	Preliminary exam
6.	Third Week of February	University Examination
7.	<i>First Working Day of April</i>	<i>Commencement of third/fourth/internship professional year</i>
	<b>NOTE. -</b> 1. Universities / Institutions / Colleges shall specify dates and year while preparing academic calendar of that particular batch of students. The same is to be informed to students and displayed in respective websites. 2. Institutions / Colleges established in Extreme Weather Conditions may adjust the timings as required by maintaining the stipulated hours of teaching. However, the structure of academic calendar shall not be altered 3. Academic calendar may be modified according to directions of National Commission for Homoeopathy issued from time to time.	



**Annexure-iii**

**GUIDELINES FOR ATTENDANCE MAINTENANCE  
(THEORY/PRACTICAL/CLINICAL/NON-LECTURE  
HOURS)**

Institutes, Colleges offering education in Homoeopathy are recommended to maintain online attendance system. However, in case physical registers are being maintained for recording attendance of various teaching/training activities, the following guidelines are to be followed:

- (1) Attendance is to be marked in cumulative numbering fashion.
  - (a) In case presence is to be marked as 1, 2, 3, 4, 5, 6.....so on;
  - (b) In case of absence, it must be marked as 'A' ;
  - (c) Example: P PPP A P P AA P P P.... may be marked as (1, 2, 3, 4, A, 5, 6, A, A, 7, 8, 9...).
- (2) Avoid strictly marking 'P' for presence.
- (3) Separate register for Theory and practical/clinical/non-lecture activities are to be maintained.
- (4) At the end of term or course or part of syllabus, the last number to be taken as total attendance.
- (5) The total attendance after students signature to be certified by respective HOD followed by approval by Principal.
- (6) In case of multiple terms, at the end of course all term attendance is to be summarised and percentage is to be calculated separately for theory and practical including clinicals & non-lecture hours.

[Note : \*If any discrepancy is found between Hindi and English version, the English version will be treated as final.]

**FORM 1**

[See regulation 15(e) (ix) (B) (C) (D)]  
**(NAME OF THE COLLEGE AND ADDRESS)**

**(BACHELOR OF HOMOEOPATHIC MEDICINE AND SURGERY (B.H.M.S)  
PROGRAMME**

**DEPARTMENT OF-----**

**CERTIFICATE OF ATTENDANCE & ASSESSMENT OF INTERNSHIP**

1) **Name of the Intern :**

2) **Attendance during internship**

Period of training From-----To-----

(b) No. of Working Days :

(c) No. of Days Attended :

(d) No. of Days Leave availed :

(e) No. of Days Absent :

**Assessment of Internship**

Sr. No.		Category	Marks Obtained
<b>1.</b>		<b>General</b>	<b>Maximum10</b>
	a.	Responsibility and Punctuality	(____)outof2
	b.	Behavior with sub-ordinates, Colleagues and superiors	(____)outof2
	c.	Documentation ability	(____)outof2
	d.	Character and conduct	(____)outof2
	e.	Aptitude of research	(____)outof2
<b>2.</b>		<b>Clinical</b>	<b>Maximum20</b>
	a.	Proficiency in Fundamentals of subject	(____)outof4
	b.	Bedside manners & Rapport with patient	(____)outof4
	c.	Clinical Acumen and Competency as acquired	(____)outof4
	i.	By Performing Procedures	
	ii.	By Assisting in Procedures	(____)outof4
	iii.	By Observing Procedures	(____)outof4
<b>Total Score obtained</b>			<b>(____)out of30</b>

**Performance Grade of marks**

Poor < 8, Below average 9-14, Average 15-21, Good 22-25, Excellent 26andabove

Note: An intern obtained unsatisfactory score (below 15) shall be required to repeat one third of the total period of posting in the concerned department.

Date:

Place:

Signature of the Intern

Signature of the Head of the Department Office Seal

**FORM 2**

[See regulation 15 (e) (ix) (C) (D)]

**(NAME OF THE COLLEGE AND ADDRESS)**

**(BACHELOR OF HOMOEOPATHIC MEDICINE AND SURGERY – B.H.M.S)**

**PROGRAMME CERTIFICATE OF**

**COMPLETION OF THE COMPULSORY ROTARY INTERNSHIP**

This is to certify that (name of the intern) Intern of (NAME OF THE COLLEGE AND ADDRESS), has completed his/her Compulsory Rotatory Internship at the (NAME OF COLLEGE AND ADDRESS / PLACE OF POSTING), for the duration of one year from \_\_\_\_\_ to \_\_\_\_\_ in the following departments,

Sl. No.	Name of the Department	Period of training From (dd/mm/yyyy)	Period of training to (dd/mm/yyyy)

**During the internship period the conduct of the student is \_\_\_\_\_**

**Date:**

**Place:**

**Signature of the Principal/Dean/Director Office Seal**