# FIRST BHMS PROFESSIONAL COURSE

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

(HOMOEOPATHIC REPERTORY and CASE TAKING)



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

JAWAHAR LAL NEHRU BHARTIYA CHIKITSA AVUM HOMOEOPATHY ANUSANDHAN BHAVAN No.61-65, Institutional Area, opp. 'D' block, Janak Puri, New Delhi-110 058

#### HOMOEOPATHIC REPERTORY and CASE TAKING(I PROFESSIONAL BHMS)

1. COURSE CODE: HomUG-R-I

**SUBJECT NAME: HOMOEOPATHIC REPERTORY and CASE TAKING** 

## **PREAMBLE**

The Homoeopathic Materia Medica has expanded manifold since the proving of "Cinchona Bark" by Dr. Samuel Hahnemann and today we have over five thousand remedies in the Materia Medica. It is impossible for any human mind to memorise all the symptoms of each drug and to recall those symptoms while prescribing. Therefore, the need of indexing of these symptoms along with the drugs producing those symptoms were felt by Dr. Samuel Hahnemann himself and subsequently by other homoeopaths for prescribing at the bedside of the patient.

Homoeopathic Repertory is a Dictionary or Storehouse or an index to the huge mass of symptoms of the Homoeopathic Materia Medica. The repertory is organized in a practical form indicating the relative gradation of drugs. Repertories not only contain symptoms of proving but also clinical and pathological symptoms found in the Homoeopathic Materia Medica. Repertories serve as an instrument at the disposal of the physician for sifting through the maze of symptoms of the vast Homoeopathic Materia Medica.

Repertories aim at simplifying the work of the physician to find the indicated remedy by eliminating the non-indicated remedies. Repertorisation is not the end but a means to arrive to the simillimum and reference to Homoeopathic Materia Medica based on sound principles of Philosophy is the final court of appeal.

Each repertory has been compiled on the basis of distinct philosophy, structure and utility. In order to use these instruments effectively, one must understand thoroughly its conceptual base, construction and utility and limitations. Even though there are a number of repertories, the student at the under graduate level is expected to learn the philosophy and application of basic core repertories namely Kent, Boger's BoenninghausenCharacteristics and Repertory and Boenninghausen's Therapeutic Pocket Book. The subject of Repertory must not be taught in isolation but must be taught in horizontal integration with Anatomy, Physiology in I BHMS; Pathology, Surgery, Gynaecology and Practice of Medicine in II BHMS; Surgery, Gynaecology, Practice of Medicine in III BHMS and Practice of Medicine in IV BHMS and vertically integrated with Homoeopathic Materia Medica and Organon and Homoeopathic Philosophy in all the years. Integrated teaching in all the years will help the student to grasp and understand the subjects better and connect repertory to all other subjects.

Similarly, case taking demands virtual integration of all the subjects taught from the 1st BHMS to IV BHMS in the consulting room or at the bedside. The physician can never say that he has learnt all that is to the case taking process. Every new patient has a new lesson to teach.

The advent of computerization and resulting software has opened up vast newer avenues to collate and correlate the vast information found in the Homoeopathic Materia Medica through the repertories. Continued exploration of these connections will generate new data, newer repertories and the newer application to existing or newer illnesses.

#### 1. PROGRAMME OUTCOMES:

At the end of the course of the undergraduate studies, the homoeopathic physician must

- 1.Develop the knowledge, skills, abilities and confidence as a primary care homoeopathic practitioner to attend to the health needs of the community in a holistic manner
- 2.Correctly assess and clinically diagnose common clinical conditions prevalent in the community from time to time
- 3.Identify and incorporate the socio-demographic, psychological, cultural, environmental & economic factors affecting health and disease in clinical work
- 4. Recognize the scope and limitation of homoeopathy in order to apply Homoeopathic principles for curative, prophylactic, promotive, palliative, and rehabilitative primary health care for the benefit of the individual and community
- 5. Be willing and able to practice homoeopathy as per medical ethics and professionalism.
- 6. Discern the scope and relevance of other systems of medical practice for rational use of cross referrals and role of life saving measures to address clinical emergencies
- 7. Develop the capacity for critical thinking, self-reflection and a research orientation as required for developing evidence based homoeopathic practice.
- 8. Develop an aptitude for lifelong learning to be able to meet the changing demands of clinical practice
- 9. Develop the necessary communication skills and enabling attitudes to work as a responsible team member in various healthcare settings and contribute towards the larger goals of national health policies such as school health, community health and environmental conservation.

# 2. COURSE OUTCOMES (CO):

At the end of course in Repertory, the Final BHMS student shall be able to

- Describe the philosophical background, construction, utility and limitations of various repertories
- 2. Demonstrate case taking and show empathy with the patient and family during case taking
- 3. Demonstrate various steps for systematic case processing viz. analysis of case, evaluation of symptoms as per Homoeopathic principles to form Totality of symptoms
- 4. Choose the appropriate repertorial approach, Method and Technique to repertorize a case
- 5. Utilize Repertory as a tool to find out simillimum in all types of cases and in the study of Materia Medica
- 6. Integrate other subjects in understanding the construction and utility of repertories
- 7. Utilize different software for Repertorization, patient data management and record keeping.
- 8. Demonstrate aptitude to utilize repertory for research in Homoeopathy and lifelong learning

#### **COURSE OUTCOMES OF REPERTORY FOR I BHMS**

At the end of IBHMS, the student should be able to,

- 1. Define Repertory.
- 2. Explain the need and utility of repertory to find simillimum and in the study of Materia Medica
- 3. Define various terminologies used in repertory and explain their utility
- 4. Locate different rubrics related to anatomy, physiology and psychology in Kent's Repertory
- 5. Illustrate the construction of Kent's Repertory as per the Hahnemannian Anatomical schema

# **3. TEACHING HOURS**

Total Number of Teaching Hours: 21									
Course Name	Lectures	Non-Lectures	Total						
Homoeopathic Repertory and Case Taking	21	-	21						
(HomUG-R-I)									

# 4. COURSE CONTENT( HomUG-R-I)

S. No	List of Topics	Lecture Hours
1	Introduction to Repertory, Definition and Meaning of	3
	Repertory	
	❖ General Introduction to Repertory	
	❖ Origin of Repertory	
	❖ Need of Repertory	
	❖ Definition of Repertory	
	❖ Meaning of REPERTORIUM	
2	Need and uses of repertory and repertorization	3
	<ul> <li>Uses and Scopes of Repertory</li> </ul>	
	❖ Limitations of Repertory	
	❖ Definition of Repertorization	
	Introduction to Methods and Techniques of	
	Repertorization	
3	Terminologies relevant toRepertory	3
	❖ Repertory	
	❖ Rubric	
	Gradation	
	❖ Cross Reference	
	❖ Synonym	
	❖ Repertorization	
	❖ Totality of Symptoms	
	❖ Repertorial Totality	
	❖ Potential Differential Field	
	❖ Conceptual Image	

	❖ Case taking	
	❖ Analysis of a case	
	Evaluation of a Case	
	❖ Longitudinal case Study	
	<ul> <li>Cross Section Study of a case</li> </ul>	
	❖ General Repertory	
	❖ Regional Repertory	
	❖ Logico-Utilitarian Repertory	
	❖ Puritan Repertory	
4	Schematic representation of chapters in Kent's repertory	6
	❖ Introduction to Kent'sRepertory	
	Listing of Chapters in Kent's Repertory	
	Correlation of Chapters in Kent's Repertory to	
	Hahnemannian Anatomical Schema	
	Chapters and Rubrics related to anatomical structures, physiological processes and psychology in	
	Kent's Repertory	
5	Correlation of Anatomy, Physiology and Psychology	6
•	with Repertory	
	Introduction to correlationwithAnatomy, Physiology	
	Introduction to correlationwithAnatomy, Physiology and Psychology with Repertory	
	1	
	and Psychology with Repertory  Chapters and Rubrics related to Anatomical parts in	
	<ul> <li>and Psychology with Repertory</li> <li>Chapters and Rubrics related to Anatomical parts in Dr. Kent's Repertory</li> <li>Chapters and Rubrics related to Physiology in Dr.</li> </ul>	

# 5. Teaching Learning Methods

Theory	Practicals/ Clinics
Lectures	Clinical Bedside Teaching
Small Group Discussion	Integrated Clinics
Integrated Lectures	Case Study
Integrated Seminars	Rubric Banks
Assignments	
Rubric Banks	
Library Reference	

# 6. Content Mapping (Theory) of Course HomUG-R-I

S. No	Generic	Subjec	Millers	Specific	SLO/	Blooms	Guilbert's	Must	T - L	Formati	Sum	Integrati
	Compet	t Area	Level:	Compete	Outcome	Domain	Level	Know	Method	ve	mativ	on
	ency		Does/S	ncy				/	S	Assess	е	Departm
			hows					Desir		ment	Asses	ents-
			how/					able			smen	Horizont
			Knows					to			t	al/
			how/					know				Vertical/
								/ nice				Spiral
			Knows					to				
								know				
	Tonic 1- Ir	l htroductie	n to Rene	rtory Defini	 ition and Mea	ning of Re	nertory					
	-	T	·		1			ı	T	T	ı	T
HomUG-	Gatherin	Introd	Knows	Get	<i>Define</i> the	Cognitiv	Level I	Must	Lecture,	MCQ,		Horizont
R-I-1.1	g and	uction		acquainte	term	е	(Rememb	Know	Small	SAQ,		al
	Integrati	to		d with	Repertory		er/ recall)		Group	Viva		Integrati
	on of	Repert		tools					discussi	Voce		on with
	informat	ory		required					on			Materia
	ion			to search								Medica
				for								and
				remedy.								Organon
HomUG-			Knows		Explain	Cognitiv	Level I	Desir	Lecture,	MCQ,		of
R-I-1.2					the	е	(Rememb	able	Small	SAQ,		medicine
					meaning		er/ recall)	to	Group	Viva		, Spiral
					of		,	know	discussi	Voce		Integrati
					Repertory				on			on in II,
HomUG-			Vo avva		Disques	Cognitie	Level II	Nico	Lastura	NACO		III and IV BHMS
			Knows		Discuss	Cognitiv		Nice	Lecture,	MCQ,		CIVILIO
R-I-1.3					the origin	е	(Understa	to	Small	SAQ,		
					of the		nd)	know	Group	Viva		

					word Repertory				discussi on	Voce		
HomUG- R-I-1.4			Knows		List three uses and three limitations of Repertory	Cognitiv e	Level I (Rememb er/ recall)	Must Know	Lecture, Integrat ed teachin g (with Materia Medica ) Small Group discussi on	MCQ, SAQ, Viva Voce		
	TOPIC 2: No	eed and	uses of re	pertory and	repertorisat	ion					•	
HomUG- R-I-2.1	g and Integrati on of informat ion	Need and uses of repert ory and repert orisati on	Knows	Get acquainte d with tools required to search for remedy.	Explain the need of repertory	Cognitiv e	Level II (Understa nd)	Must know	Lecture, Small Group discussi on	MCQ, SAQ, Viva Voce		Horizont al Integrati on with Materia Medica and Organon of medicine , Spiral Integrati on in II, III and IV

								BHMS
HomUG- R-I-2.2	Knows	Explain the need of Repertoriz ation to find a simillimum	Cognitiv e	Level II (Understa nd)	Desir able to know	Lecture, Small Group discussi on	MCQ, SAQ, Viva Voce	
HomUG- R-I-2.3	Knows	Describe the uses of Repertory	Cognitiv e	Level II (Understa nd)	Must know	Lecture, Small Group discussi on	MCQ, SAQ, Viva Voce	
HomUG- R-I-2.4	Knows	Describe the limitations of Repertory	Cognitiv e	Level II (Understa nd)	Must know	Lecture, Small Group discussi on	MCQ, SAQ, Viva Voce	
HomUG- R-I-2.5	Knows	Discuss the use of Repertory as a tool to select the remedy for a given case	Cognitiv e	Level II (Understa nd)	Desir able to know	Lecture, Small Group discussi on, Clinical Teachin g	MCQ, SAQ, Viva Voce	

	TOPIC 3: 1	Terminolo	gies relev	ant to Reper	tory						
HomUG-	Gatherin	Termin	Knows	То	Define	Cognitiv	Level I	Must	Lecture,	MCQ,	 Horizont
R-I-3.1	g and	ologies		understa	different	е	(Rememb	know	Small	SAQ,	 al
	Integrati	used		nd the	terminolo		er/ recall)		Group	Viva	Integrati
	on of	in		definition	gy				discussi	Voce	on with
	informat	repert		of various	associated				on,		Materia
	ion	ory		terminolo	with						Medica
				gies used	repertory						and
				in							Organon
				repertory							of
				in order							medicine
				to apply							, Spiral
				them for							Integrati
				Repertori							on in II,
				zation							III and IV
											BHMS
HomUG-			Knows		Explain	Cognitiv	Level II	Must	Lecture,	MCQ,	
R-I-3.2					the	е	(Understa	know	Small	SAQ,	
					meaning		nd)		Group	Viva	
					and use of				discussi	Voce	
					each				on,		
					terminolo				Clinical		
					gy				teachin		
									g		
HomUG-			Knows		<i>Apply</i> the	Cognitiv	Level II	Must	Lecture,	MCQ,	
R-I-3.3					terminolo	е	(Understa	know	Small	SAQ,	
					gy in the		nd)		Group	Viva	
					process of				discussi	Voce	
					Repertoriz				on,		

					ation				Clinical teachin g			
	TOPIC 4: S	 Schemation	represen	 tation of cha	  pters in Kent	 's repertor	<u> </u> y					
HomUG- R-I-4.1	Gatherin g and Integrati on of informat ion, Problem Solving	Schem atic repres entati on of chapte rs in Kent's repert ory	Knows	To understa nd the arrangem ent of Chapters in Dr. Kent's Repertor y	Listthe 37 chapters of Kent's Repertory in the proper order	Cognitiv	Level I (Rememb er/ recall)	Must	Lecture, Small Group discussi on, Clinical teachin g	MCQ, SAQ, Viva Voce, OSPE	-	Horizontal Integratio n with Materia Medica and Organon of medicine, Spiral Integratio n in II, III and IV BHMS
HomUG- R-I-4.2			Shows		Demonstr atethe relation of chapters in Kent's Repertory to Anatomy and Physiology and mental rubrics to	Cognitiv e	Level II (Understa nd)	Must	Lecture, Small Group discussi on, Clinical teachin g	MCQ, SAQ, Viva Voce, OSPE	-	

l					Psycholog							
					у							
HomUG-			Knows		Discuss	Cognitiv	Level II	Desir	Lecture,	MCQ,		
R-I-4.3					the	e	(Understa	able	Small	SAQ,	_	
					correlation		nd)	to	Group	Viva		
					of		,	know	discussi	Voce,		
					<i>chapters</i> in				on,	OSPE		
					Kent's				Clinical			
					Repertory				teachin			
					to the				g			
					schematic							
					representa							
					tion of							
					remedies							
					in Materia							
					Medica							
TODIC E.	Corrolation	of Apato	my Dhysis	logy and De	ychology with	Poportor						
TOPIC 5:	Correlation	of Anato	my, Physic	logy and Psy	chology with	n Repertory	<u> </u>					
TOPIC 5: (	Correlation Gatherin	of Anato	my, Physic	ology and Psy	ychology with Apply the	Repertory  Cognitiv	Level II	Must	Lecture,	MCQ,		Integrate
	_	T					T	Must	Lecture, Small	MCQ, SAQ,		Integrate d
HomUG-	Gatherin	Correl		То	Apply the	Cognitiv	Level II			-		_
HomUG-	Gatherin g and	Correl ation		To correlate	Apply the correlatio	Cognitiv	Level II (Understa		Small	SAQ,		d
HomUG-	Gatherin g and Integrati	Correl ation of		To correlate the	Apply the correlatio	Cognitiv	Level II (Understa		Small Group	SAQ, Viva		d teaching
HomUG-	Gatherin g and Integrati on of	Correl ation of Anato		To correlate the knowledg	Apply the correlatio	Cognitiv	Level II (Understa		Small Group discussi	SAQ, Viva Voce,		d teaching with
HomUG-	Gatherin g and Integrati on of informat	Correl ation of Anato my,		To correlate the knowledg e of	Apply the correlation of Anatomica	Cognitiv	Level II (Understa		Small Group discussi on,	SAQ, Viva Voce,		d teaching with
HomUG-	Gatherin g and Integrati on of informat ion,	Correl ation of Anato my, Physiol		To correlate the knowledg e of Anatomy,	Apply the correlatio n of Anatomica I Structures	Cognitiv	Level II (Understa		Small Group discussi on, Clinical	SAQ, Viva Voce,		d teaching with
HomUG-	Gatherin g and Integrati on of informat ion, Problem	Correl ation of Anato my, Physiol ogy		To correlate the knowledg e of Anatomy, physiolog	Apply the correlation of Anatomica I Structures to	Cognitiv	Level II (Understa		Small Group discussi on, Clinical teachin	SAQ, Viva Voce,		d teaching with
HomUG-	Gatherin g and Integrati on of informat ion, Problem	Correl ation of Anato my, Physiol ogy and		To correlate the knowledg e of Anatomy, physiolog y And	Apply the correlation of Anatomica I Structures to Chapters	Cognitiv	Level II (Understa		Small Group discussi on, Clinical teachin	SAQ, Viva Voce,		d teaching with
HomUG-	Gatherin g and Integrati on of informat ion, Problem	Correl ation of Anato my, Physiol ogy and Psycho		To correlate the knowledg e of Anatomy, physiolog y And Psycholog	Apply the correlation of Anatomica I Structures to Chapters and	Cognitiv	Level II (Understa		Small Group discussi on, Clinical teachin	SAQ, Viva Voce,		d teaching with

	ory		Repertor y and Rubrics								
HomUG- R-I-5.2		Knows		Relate physiologi cal Processes to the Chapters and Rubrics in Kent's Repertory	Cognitiv e	Level II (Understa nd)	Must know	Lecture, Small Group discussi on, Clinical teachin g	MCQ, SAQ, Viva Voce, OSPE	-	Integrate d teaching with Physiolog y
HomUG- R-I-5.3		Knows		Apply the correlation of psychology in Mind Chapterand Rubrics in Kent's Repertory	Cognitiv e	Level II (Understa nd)	Must know	Lecture, Small Group discussi on, Clinical teachin g	MCQ, SAQ, Viva Voce, OSPE	-	Integrate d teaching with Psycholo gy
HomUG- R-I-5.4		Shows how		Locate rubrics related to Anatomy, Physiology and Psycholog	Psycho motor	Level II (Control)	Must know	Lecture, Small Group discussi on, Clinical teachin	MCQ, SAQ, Viva Voce, OSPE	-	

		y in Kent's repertory				g			
HomUG- R-I-5.5	Knows	Apply rubrics related to Anatomy, Physiology and Psycholog y in understan ding remedies in Materia Medica and Repertory	Cognitiv e	Level II (Understa nd)	Must	Lecture, Small Group discussi on, Clinical teachin g	MCQ, SAQ, Viva Voce, OSPE	-	Integrate d teaching with Materia Medica

# 7. List of Practical Topics

S. No	Name of Topic	Activity/ Practical	TL Method
1	Basic Structure of Repertory showing arrangement of rubric of anatomy, physiology and psychology	Arrangement of Chapters and rubrics related to anatomical structures, physiology and psychology (Emotions, intellect and behaviour) in Kent's Repertory	Integrated teaching in Clinics in I BHMS

# 8. Internal Assessment

9A – Scheme of Assessment (Formative)

Sr.No	Professional Course	1 <sup>st</sup> term(1-6 Months)	2 <sup>nd</sup> Term(7-12 Months)	3 <sup>rd</sup> Term(13-1	18 Months)
1	First Professional BHMS	FirstPA+1 <sup>ST</sup> TT	2 <sup>nd</sup> PA+2 <sup>ND</sup> TT	3 <sup>rd</sup> PA	

Sr.	Professional	1 <sup>st</sup> term(1-6Months)		2 <sup>nd</sup> Term(7-12Months)		3 <sup>rd</sup> Term(13-
No	Course					18Months)
1	First	1 <sup>st</sup> PA	1 <sup>ST</sup> TT	2 <sup>nd</sup> PA	2 <sup>ND</sup> TT	3 <sup>rd</sup> PA
	Professional	10 Marks	50 Marks	10 Marks	50 Marks	10 Marks
	BHMS	Viva	Practical/Viva	Viva	Practical/Viva	Viva

9B: Calculation Table of Marks

PA1	PA2	PA3	Periodic	TT1	TT2	Termina	Final Internal
Pract ical/ Viva (10M arks)	Practical/Vi va (10 Marks)	Practical/ Viva (10 Marks)	al Assess ment Average PA1+PA2+PA 3/3	Practical/ Viva (50Marks )	Practical/ Viva (50Marks)	I Test Average TT1+T T2/10 0*10	Assessment Marks
A	В	С	D	E	F	G	D+G/2

**PA**-Periodical Assessment; **TT**-Terminal Test

9C: Evaluation Methods for Internal Assessment

PA-Periodical Assessment	TT-TerminalTest
Viva Voce	Viva Voce
	OSPE
	Rubric Hunting
	Short case

## 9. List of Recommended Books

- ❖ Dhawale ML (2000) Principles and Practice of Homoeopathy
- ♦ Hahnemann S (2017). Organon of Medicine 6<sup>th</sup> Edition
- ❖ Kent, JT- Repertory of the Homoeopathic Materia Medica (Sixth American Edition)
- ❖ Kishore, Jugal (2004) -Evolution of Homoeopathic Repertories and Repertorization
- ❖ Munir Ahmed R (2016). Fundamentals of Repertories: Alchemy of homeopathic methodology
- ❖ Patel, R.P (1998): The Art of Case Taking and Practical Repertorization
- Tiwari, Shashikant (2005) Essentials of Repertorisation

# **List of contributors:**

# 1. Dr. Manish Arya

Professor and HOD, Department of Repertory, Dr. D.Y. Patil Homoeopathic Medical College and Research Centre, Pune

# 2. Dr. Lokanath Behera

Associate Professor& Head of the Department (Repertory) National Institute of Homoeopathy

## 3. Dr. Kamlesh Mehta

Former HOD, CMP College, Mumbai

## 4. Dr. Hema Parikh

Prof, MKSH, Karjan

## 5. Dr. Manisha Patel

HOD, Dr. R A Patel HMC, Mehsana

# 6. Dr. Uttara Agale

Reader, YMT, Kharghar