

I PROFESSIONAL BHMS

1. COURSE CODE: HomUG-R-I

SUBJECT NAME: HOMOEOPATHIC REPERTORY and CASE TAKING

INDEX

S.No	Description	Page Number
1	Preamble	654
2	Program Outcomes (PO)	656
3	Course outcomes (CO)	657
4	Teaching Hours	658
5	Course Contents of HomUG-Rep-I	659
6	Teaching Learning methods	662
7	Content mapping-Learning Objectives (Theory) of Course Hom UG-Rep-I	669
8	List of Practical Topics	670
9	List of Recommended Books	671
10	List of Contributors	672

1. 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. Reperatorisation 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 Boenninghausen Characteristics 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 Ist 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.

2. 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.

3.COURSE OUTCOMES (CO):

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

1. 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 for the study of Materia Medica
3. Define various terminologies used in repertory
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

4. TEACHING HOURS

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

5. COURSE CONTENT (Hom - UG-R-I)

S.No	List of Topics	Lecture Hours
1	Introduction to Repertory, Definition and Meaning of Repertory ❖ General Introduction to Repertory ❖ Origin of Repertory ❖ Need of Repertory ❖ Definition of Repertory ❖ Meaning of REPERTORIUM	3
2	Need and uses of repertory and repertorisation ❖ Uses and Scopes of Repertory ❖ Limitations of Repertory ❖ Definition of Repertorization ❖ Introduction to Methods and Techniques of Repertorization	3
3	Terminologies relevant to Repertory ❖ Repertory ❖ Rubric	3

	❖ 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 ❖ Cross Section Study of a case ❖ General Repertory ❖ Regional Repertory ❖ Logico-Utilitarian Repertory ❖ Puritan Repertory	
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4	Correlation of Anatomy, Physiology and Psychology with Repertory ❖ Introduction to correlation Anatomy, Physiology and Psychology with Repertory ❖ Chapters and Rubrics related to Anatomical parts in Dr. Kent's Repertory ❖ Chapters and Rubrics related to Physiology in Dr. Kent's Repertory ❖ Rubrics related to emotions, intellect and memory in Mind chapter of Dr.Kent Repertory	6
5	Schematic representation of chapters in Kent's repertory ❖ Introduction to Kent's Repertory ❖ 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	6

6. 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	

7. Content Mapping (Theory) of Course Hom UG-R-I

S.No	Generic Competency	Subject Area	Millers Level: Does/Shows how/ Knows how/ Knows	Specific Competency	SLO/ Outcome	Blooms Domain	Guilbert's Level	Must Know/ Desirable to know/ nice to know	T-L Methods	Formative Assessment	Summative Assessment	Integration Departments- Horizontal/ Vertical/ Spiral
Topic 1- Introduction to Repertory, Definition and Meaning of Repertory												
HomUG-R-I-1.1	Gathering and Integration of information	Introduction to Repertory	Knows	Get acquainted with tools required to search for remedy.	<i>Define</i> the term Repertory	Cognitive	Level I (Remember / recall)	Must Know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	Horizontal Integration with Materia Medica and Organon of medicine, Spiral Integration in II, III and IV BHMS
HomUG-R-I-1.2			Knows		<i>Explain</i> the meaning of Repertory	Cognitive	Level I (Remember / recall)	Desirable to know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	
HomUG-R-I-1.3			Knows		<i>Discuss</i> the origin of the word Repertory	Cognitive	Level II (Understand)	Nice to know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	

HomUG-R-I-1.4			Knows		List three uses and three limitations of Repertory	Cognitive	Level I (Remember / recall)	Must Know	Lecture, Integrated teaching (with Materia Medica) Small Group discussion	MCQ, SAQ, Viva Voce	----- -	
TOPIC 2: Need and uses of repertory and repertorisation												
HomUG-R-I-2.1	Gathering and Integration of information	Need and uses of repertory and repertorisation	Knows	Get acquainted with tools required to search for remedy.	Explain the need of repertory	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	Horizontal Integration with Materia Medica and Organon of medicine, Spiral Integration in II, III and IV BHMS

HomUG-R-I-2.2			Knows		<i>Explain</i> the need of Repertorization to find a simillimum	Cognitive	Level II (Understand)	Desirable to know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	
HomUG-R-I-2.3			Knows		<i>Describe</i> the uses of Repertory	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	
HomUG-R-I-2.4			Knows		<i>Describe</i> the limitations of Repertory	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion	MCQ, SAQ, Viva Voce	----- -	
HomUG-R-I-2.5			Knows		<i>Discuss</i> the use of Repertory as a tool to select the remedy for a given case	Cognitive	Level II (Understand)	Desirable to know	Lecture, Small Group discussion, Clinical Teaching	MCQ, SAQ, Viva Voce	----- -	
TOPIC 3: Terminologies relevant to Repertory												

HomUG-R-I-3.1	Gathering and Integration of information	Terminologies used in repertory	Knows	To understand the definition of various terminologies used in repertory in order to apply them for Repertorization	<i>Define</i> different terminology associated with repertory	Cognitive	Level I (Remember / recall)	Must know	Lecture, Small Group discussion,	MCQ, SAQ, Viva Voce	----- -	Horizontal Integration with Materia Medica and Organon of medicine, Spiral Integration in II, III and IV BHMS
HomUG-R-I-3.2			Knows		<i>Explain</i> the meaning and use of each terminology	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce	----- -	
HomUG-R-I-3.3			Knows		<i>Apply</i> the terminology in the process of Repertorization	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce	----- -	

	TOPIC 4: Correlation of Anatomy, Physiology and Psychology with Repertory											
HomUG-R-I-4.1	Gathering and Integration of information, Problem Solving	Correlation of Anatomy, Physiology and Psychology with Repertory	Knows	To correlate the knowledge of Anatomy, physiology And Psychology in construction of Repertory and Rubrics	Apply the correlation of Anatomical Structures to Chapters and Rubrics in Kent's Repertory	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	Integrated teaching with Anatomy
HomUG-R-I-4.2			Knows		Relate normal physiological Processes to the Chapters and Rubrics in Kent's Repertory	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	Integrated teaching with Physiology

HomUG-R-I-4.3			Knows		Apply the correlation of psychology Chapters and Rubrics in Kent's Repertory	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	Integrated teaching with Psychology
HomUG-R-I-4.4			Shows how		Locate to Anatomy, Physiology and Psychology in Kent's repertory	Psychomotor	Level II (Control)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	
HomUG-R-I-4.5			Knows		Apply rubrics related to Anatomy, Physiology and Psychology in understanding remedies in Materia	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	Integrated teaching with Materia Medica

					Medica and Repertory							
	TOPIC 5: Schematic representation of chapters in Kent's repertory											
HomUG-R-I-5.1	Gathering and Integration of information, Problem Solving	Schematic representation of chapters in Kent's repertory	Knows	To understand the arrangement of Chapters in Dr. Kent's Repertory	List the 37 chapters of Kent's Repertory in the proper order	Cognitive	Level I (Remember / recall)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	Horizontal Integration with Materia Medica and Organon of medicine, Spiral Integration in II, III and IV BHMS
HomUG-R-I-5.2			Shows how		Demonstrate the relation of chapters in Kent's Repertory to Anatomy and	Cognitive	Level II (Understand)	Must know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	

					Physiology and mental rubrics to Psychology							
HomUG-R-I-5.3			Knows		<i>Discuss the correlation of chapters in Kent's Repertory to the schematic representation of remedies in Materia Medica</i>	Cognitive	Level II (Understand)	Desirable to know	Lecture, Small Group discussion, Clinical teaching	MCQ, SAQ, Viva Voce, OSPE	-----	

8. 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	Integrated teaching in Clinics in I BHMS

		behaviour) in Kent's Repertory	
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9. List of Recommended Books

- ❖ Dhawale ML (2000) - Principles and Practice of Homoeopathy, 3rd Edition, Institute of Clinical Research Mumbai
- ❖ Hahnemann S (2017). Organon of Medicine 6th edition, 48th Impression, B. Jain Publishers
- ❖ Kent, JT- Repertory of the Homoeopathic Materia Medica (Sixth American Edition), 54th Impression (2017), B. Jain Publishers
- ❖ Kishore, Jugal (2004) - Evolution of Homoeopathic Repertories and Repertorization, Revised Edition, B. Jain Publishers
- ❖ Munir Ahmed R (2016). Fundamentals of Repertories: alchemy of homeopathic methodology. Hi-Line Publishers, Bengaluru.
- ❖ Patel, R.P (1998): The Art of Case Taking and Practical Repertorization, 6th Edition. Sai Homoeopathic Book Corporation
- ❖ Tiwari, Shashikant (2005) - Essentials of Repertorisation, 4th Edition, B. Jain Publishers

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