44014

Fourth B.H.M.S. (2015) Examination, Summer (Phase - III All Other Remaining UG/PG Courses) - 2020 REPERTORY

Total Duration: 3 Hours

Total Marks: 100

Instructions: 1)

- Use blue/black ball point pen only.
- 2) **Do not** write anything on the **blank portion of the question** paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.
- 3) All questions are compulsory.
- 4) The number to the right indicates full marks.
- 5) Draw diagrams wherever necessary.
- 6) Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipulated frame. The Question paper pattern is a mere guideline. Questions can be asked from any paper's syllabus into any question paper. Students cannot claim that the Question is out of syllabus. As it is only for the placement sake, the distribution has been done.
- 1. Write short answer (any ten out of fifteen):

 $[10 \times 2 = 20]$

- a) What is word reportory means?
- b) What is Keynote symptom?
- c) What is mean by Clinical repertory?
- d) Give four examples of mechanically aided repertory.
- e) What is general symptom?
- f) Define deductive logic with one example of repertory.
- g) What is mean by cross reference?
- h) Define hunting of rubric.
- i) Define concordance repertory.

- j) What is repertorial syndrom?
- k) Define eliminating symptom.
- l) What is alphabetical repertory? Give two examples.
- m) Define Rubric and Sub Rubric.
- n) Give four examples of card repertory.
- o) Write any two objectives of case taking.
- 2. Write short answer (any four out of six):

 $[4\times 5=20]$

- a) Compare Rubrics Buffoonery and Stupidity.
- b) Boger's Synoptic key.
- c) Intermittent fever.
- d) Compare and contrast rubrics Complaining vs. Lamenting.
- e) Bell's Diarrhoea.
- f) Compare and contrast rubrics-Busy vs Industrious.
- 3. Write short answer (any four out of six):

 $[4\times5=20]$

- a) Describe theory of grand generalization.
- b) Explain casetaking in Unconscious patient.
- c) Describe Knerr's Concordance repertory.
- d) Explain in detail the plan and construction of synthesis repertory.
- e) What are the difficulties in taking chronic case?
- f) Explain in detail RADAR.

4. Long answer question (any two out of four):

 $[2 \times 10 = 20]$

- a) Describe in detail the relation of Repertory with HMM and Organon of Medicine.
- b) Write down the Methods and Techniques of Repertorization.
- c) Describe the history and evolution of repertory.
- d) Write down the classification of repertories in detail with two examples of each.

Long answer question (any one from Q.No. 5, 6 and 7):

- 5. Describe history, Philosophy, Sources Plan and construction and scope of BBCR in detail. $[1 \times 20 = 20]$
- 6. Describe TPB in respect of its History, Philosophy, Sources, Plan and Construction with scope in detail. $[1 \times 20 = 20]$
- 7. Describe Kent's repertory with its History, Philosophical background, Sources Plan and Construction with its scope and limitation in detail. $[1 \times 20 = 20]$



[Total No. of Pages: 3

04804

Fourth BHMS (New) Examination, Summer (Phase - III All Other Remaining UG/PG Courses) - 2020 CASE TAKING AND REPERTORY

Total Duration: 3 Hours

Total Marks: 100

Instructions:

- 1) Use blue/black ball point pen only.
- 2) **Do not** write anything on the **blank portion of the question paper**. If written anything, such type of act will be considered as an attempt to resort to unfair means.
- 3) All questions are compulsory.
- 4) The number to the **right** indicates **full** marks.
- 5) Draw diagrams wherever necessary.
- 6) Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipulated frame. The Question paper pattern is a mere guideline. Questions can be asked from any paper's syllabus into any question paper. Students cannot claim that the Question is out of syllabus. As it is only for the placement sake, the distribution has been done.
- 1. Write short answer (any ten out of fifteen):

 $[10 \times 2 = 20]$

- a) What are dos of Case Taking which will facilitate repertorization?
- b) How knowledge of repertory may prejudice case taking?
- c) Write names of two authors and their respective publications which are additions to Dr. Kent's repertory?
- d) What is importance of 'Quibus auxillis' in repertorization of a case?
- e) What is utility of Keynote symptoms in repertorisation?
- f) What is importance of 'Observations' in repertorisation?
- g) State two advantages of Puritan type of repertory.
- h) State two advantages of Regional type of repertory.
- i) State two disadvantages of Logico-Utilitarian type of repertory.

- j) Define Concomitant Symptoms; give an example of the same.
- k) What is difference between General rubric and General symptom?
- l) What is word origin and word meaning of 'Rubric'?
- m) Define 'Particular rubric' as per Dr. J.T. Kent; give an example of the same.
- n) Define 'Cross-reference rubric' as stated in Dr. J.T. Kent's repertory; give an example of the same from its Mind chapter.
- o) What is Maze of Symptom?
- 2. Write short answer (any four out of six):

 $[4 \times 5 = 20]$

- a) What are limitations of repertory? Write corrective measures of the same.
- b) What are the steps of repertorisation?
- c) Write in brief about 'Elimination Method' of repertorisation?
- d) How do miasmatic symptoms help in prescribing Homoeopathic remedy?
- e) What are disadvantages of Homoeopathic software in the practice?
- f) Write about the concept of totality of Dr. Boenninghausen.
- 3. Write short answer (any four out of six):

 $[4\times 5=20]$

- a) State about publications, advantages and disadvantages of Dr. Bell's repertory on 'Diarrhoea'.
- b) Compare 'Clinical type of repertory' with 'Regional type of repertory'.
- c) What are disadvantages of Clinical types of repertory? How to overcome these disadvantages?
- d) What are the salient features of construction of Dr. H.C. Allen's repertory 'Therapeutics of Fever'?
- e) Give your views on the statement 'Evaluation of Symptoms has impact on Repertorial Totality'.
- f) What is relation between 'Totality of Symptoms' and 'Repertorial Totality'?

4. Long answer question (any two out of four):

 $[2 \times 10 = 20]$

a) 'What are advantages of Card repertory?' What are different methods of Record Keeping?

Warrier.

- b) Compare 'Puritan type of repertory' with 'Logico-Utilitarian type of repertory'. State most important features of Dr. William Gentry's 'The Concordance Repertory of Materia Medica'.
- c) Mention Hahnemannian guidelines to overcome expected difficulties in taking a chronic case.
- d) Give your views with explanation on the statement 'Homoeopathic Materia Medica is a material that makes repertory whereas Homoeopathic Organon and Philosophy is foundation of repertorisation'.

Long answer question (any one from Q. No.5, 6 and 7):

- 5. Write evolution, Concept and philosophy, silent features of it's construction, scope and limitations of Dr. Boenninghausen's Characteristics and Repertory compiled by Dr. C.M. Boger (BBCR). $[1 \times 20 = 20]$
- Discuss contribution of Masters Dr. Samuel Hahnemann, Dr. Boenninghausen,
 Dr. J.T. Kent in the Evolution of Repertory. [1 × 20 = 20]
- 7. Write importance of Case taking, Case recording. Analysis of Symptoms and Materia Medica references with regards to Requisites of Repertorization.

 $[1 \times 20 = 20]$

