COURSE CURRICULUM FOR THIRD PROFESSIONAL BAMS (PRESCRIBED BY NCISM)



Kaumarabhritya (Pediatrics)

(SUBJECT CODE : AyUG-KB)

(Applicable from 2021-22 batch, from the academic year 2024-25 onwards for 5 batches or until further notification by NCISM, whichever is earlier)



BOARD OF AYURVEDA NATIONAL COMMISSION FOR INDIAN SYSTEM OF MEDICINE NEW DELHI-110026



NCISM III Professional Ayurvedacharya (BAMS) Subject Code : AyUG-KB Kaumarabhritya

(Pediatrics)

Summary

Total number of Teaching hours: 275									
Lecture (LH) - Theory									
Paper I	100	100	100(LH)						
Non-Lecture (NLHT)									
Paper I	53	53	175(NLH)						
Non-Lecture (NLHP)									
Paper I	122	122							

Examination (Papers & Mark Distribution)									
Item	Theory Component Marks	Practical Component Marks							
		Practical	Viva	Elective	IA				
Paper I	100	100	60	10 (Set-TB)	30				
Sub-Total	100	200							
Total marks		300							

Important Note :- The User Manual III BAMS is a valuable resource that provides comprehensive details about the curriculum file. It will help you understand and implement the curriculum. Please read the User Manual III before reading this curriculum file. The curriculum file has been thoroughly reviewed and verified for accuracy. However, if you find any discrepancies, please note that the contents related to the MSE should be considered authentic. In case of difficulty and questions regarding curriculum write to **syllabus24ayu@ncismindia.org**

PREFACE

Kaumarabhritya, the branch of Ayurveda dedicated to child health, has been restructured to align with the principles of an outcome-based dynamic curriculum. This revised syllabus ensures that BAMS graduates are well-prepared to address the comprehensive healthcare needs of children, starting from preconception through early childhood and beyond. A key focus of this curriculum is the first 1000 days of life, a crucial period that shapes a child's future health and development. By integrating Ayurvedic wisdom with modern medical knowledge, the syllabus provides a holistic approach to pediatric care, allowing students to understand Ayurveda's role in preventing and managing childhood diseases while complementing contemporary healthcare practices.

The curriculum emphasizes a systematic and interconnected understanding of the human body, moving beyond a linear approach to highlight the interdependence of different bodily systems. Practical learning is given priority, with hands-on training in Bala Panchakarma procedures, Ayurvedic therapies, and modern pediatric interventions. The course also focuses on research updates, effective communication skills, and building strong relationships with children and caregivers. To ensure successful implementation, a supportive academic environment is emphasized, encouraging continuous learning and collaboration among students and faculty.

At the end of the course, students will be able to assess normal growth and development, identify deviations, and provide Ayurvedic-based preventive and curative solutions. The syllabus also instills a deep understanding of child rights, diversity, and ethical considerations in pediatric healthcare. In alignment with national health policies, this curriculum contributes to building a healthy future generation and serves as a valuable reference for academicians, researchers, and practitioners in Ayurveda and integrative medicine.

INDEX

Course Code and Name of Course	
Table 1 : Course learning outcomes and mapped PO	5
Table 2 : Contents of Course	6
Paper 1	6
Table 3 : Learning objectives of Course	
Paper 1	
Table 4 : NLHT Activity	144
Table 5 : List of Practicals	147
Table 6 : Assessment Summary: Assessment is subdivided in A to H points	151
6 A : Number of Papers and Marks Distribution	151
6 B : Scheme of Assessment (Formative and Summative)	151
6 C : Calculation Method for Internal assessment Marks	151
6 D : Evaluation Methods for Periodical Assessment	152
6 E : Question Paper Pattern	153
6 F : Distribution of theory examination	154
Paper 1	154
6 G : Instructions for UG Paper Setting & Blue print	155
6 H : Distribution of Practical Exam	156
References Books/ Resources	158
Syllabus Committee	161
Abbreviations	166

Course Code and Name of Course

Course code	Name of Course
AyUG-KB	Kaumarabhritya

Table 1 : Course learning outcomes and mapped PO

SR1 CO No	A1 Course learning Outcomes (CO) AyUG-KB At the end of the course AyUG-KB, the students should be able to-	B1 Course learning Outcomes mapped with program learning outcomes.
CO 1	Evaluate normal growth and development and its deviation in children.	PO1,PO2
CO 2	Diagnose and manage Bala Roga (Paediatric diseases) using both Ayurveda principles and contemporary medical science.	PO1,PO2,PO3,PO5,P O9
CO 3	Demonstrate knowledge and skills in assessing and intervening child health through Ayurveda with research updates.	PO2,PO5,PO7,PO9
CO 4	Demonstrate effective communication skills to build a good rapport with child/care taker that encourage participation in the shared decision making for the child health care.	PO3,PO5,PO6
CO 5	Formulate Ayurveda methods of building good health and immunity for a child	PO1,PO2
CO 6	Construct the ability to customize the Ahara and Vihara with respect to Vaya, Ahara Prakarana, Prakruti and Roga Avasta of the child	PO1,PO3,PO7,PO8,P O9
CO 7	Demonstrate the skill of handling the child and perform the Panchakarma in Balaroga.	PO4,PO5,PO9
CO 8	Advocate the child rights, Respect the diversity and abide to the ethical and legal code of conduct in the child health care	PO5,PO6

гар	er 1 (KAUMARABHRITYA)				•	
Sr. No	A2 List of Topics	B2 Term	C2 Marks	D2 Lecture hours	E2 Non- Lecture hours Theory	E2 Non- Lecture hours Practica l
1	Introduction to Kaumarabhritya	1	1	2	0	0
	 Definitions of Kaumarabhritya, Scope and importance of Kaumarabhritya and terminologies used in Kaumarabhritya. Vayobedha (Classification of age with recent Understanding) along with its rationale. 					
2	Bala Samvardhana (Growth and Development)	1	7	5	3	13
	 Growth, Shareera Vridhikara Bhavas (Factors affecting growth of child). Patterns of growth. Parameters used for assessment of growth in infants, children and adolescents Status of Dhatu in a child with reference to growth assessment. Development, factors influencing the development. Childhood Samskaras Developmental milestones. Developmental delay Danta Vijnana 					
3	 Navajata Vijnana (Neonatology) 1. Garbha Vridhi and Vikasa 2. Terminologies used in neonatology. 3. Navajata Shishu Paricharya 4. Pranapratyagamana (Neonatal resuscitation) 5. Definition and management of Term, Pre term, Post term and High Risk Neonate. 6. Examination of newborn and assessment of gestational age. 7. Ayu Pariksha Vidhi [Assessment of Longevity and Standard of Living] 8. Etiology, clinical features and management of Navajata Rogas- Swasavarodha (Respiratory distress), Ulbaka (Meconium aspiration syndrome), 	1	11	13	3	12

	Birth Injuries, Upashirshaka, Haemorhagic diseases, Kamala (Jaundice), Hypoglycaemia, Akshepaka (Seizures), Abhishyanda (Neonatal Conjunctivitis).					
4	 Stanya Vijnana (Breast Milk) 1. Stanyotpatti (physiology of lactation), Stanya Guna, Shuddha Stanya Lakshana (Qualities of normal Breast Milk), Piyusha (Colostrum), Composition and types of breastmilk. 2. Stanyapana (breastfeeding), techniques and contraindications of breastfeeding. 3. Stanya Abhava and Complementary feeding 4. Stanyapanayana 5. Stanya Dusti, Stanya Kshaya and Stanya Vruddi. 6. Stanyadushti Rogas-Ksheeralasaka, Ahiputana and Kumarashosha. 7. Concept and practice of Prashana 	1	11	5	5	4
5	 Bala Poshana (Child Nutrition) & Vyadhikshamatva (Immunity) 1. Importance of Ahara in health and disease, Agerelated nutritional needs including micronutrients and vitamins. 2. Nutritional assessment 3. Assess the status of Dhatu and Dhatu Pradoshaja Vikara 4. Nutritional diet in different ages. 5. Methods to improve Vyadhikshamatwa and Bala, Swarnaprashana and Lehana. 6. Universal Immunization Program and National Immunization Schedule. 7. Reproductive Child Health (RCH) program 8. Garbhopakrama, Sutikopakrama, Balaparicharya up to 2 years (Care during the First 1000 days of life). 	1		5	5	8
6	 Kuposhana Rogas (Nutritional disorders) 1. Phakka Roga, Kumarasosha, Karshya, Parigarbhika and Sthaulya. 2. Severe Acute Malnutrition (SAM), Moderate Acute Malnutrition (MAM) and Failure to thrive (FTT) 3. Concept of deficiency diseases with respect to Ahara Guna, Koshta, Agni and other disease conditions. 	2	7	6	3	4
7	Balaroga Pariksha Vidhi & Chikitsa	2		5	0	16

	Siddhantha (Pediatric Examination and treatment principles)					
	 Paediatric Examination and Case-Taking Vedana Parijnana Samanya Chikitsa Siddhanta Oushadha Matra Nirdharana (Posology) 					
8	Kulaja and Sahaja Rogas (Genetic and Congenital Disorders)	2	5	5	2	5
	 Kulaja Vikaras, Muscular Dystrophies (DMD) and Thalassemia. Sahajavikaras, Congenital disorders like Sahaja Hridaya Vikara (Congenital Heart Disease), Khandaushtha (Cleft lip), Khanda Talu (Cleft Palate), Pada Vikruti (Talipes), Sannirudha Guda (Imperforated Anus) and Neural Tube Defects, Down syndrome, Turners syndrome Preconception care for healthy Ritu, Kshetra, Ambu and Beeja. 					
9	Graha Rogas and Aupasargika Rogas (Infectious Diseases)	2	8	7	4	3
	 Graharogas Romantika (Measles), Karnamoola Sotha (Mumps), Rubella, Masurika (Chickenpox), Hand Foot Mouth Disease, Rohini (Diphtheria), Typhoid, Tuberculosis, Pertussis, Dhanurvata (Tetanus), Meningitis, Malaria, Dengue and Hepatitis. Krimiroga (Helminthic infestation). 					
10	Swasana Rogas [Disorders of Respiratory system]	2	10	5	4	6
	 Pratishaya, Kasa and Shwasa(Common Cold, Tonsilitis, Pharyngitis, Talukantaka, Adenoid hypertrophy, Bronchial Asthma, Pneumonia). Knowledge of medicines, procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria. 					
11	Mahasrota Roga [Gastro Intestinal Disorders]	2		6	3	6
	 Examination of Annavaha Srotas Chardi (Vomiting), Atisara, Grahani and Pravahika- (Diarrheal disease), Vibanda (Constipation), Udara Soola (Infantile Colic and Abdominal Pain) and Parikartika (Fissure in ano), 					

	Mukha Paka (Stomaitis).3. Dehydration and Oral Rehydration Therapies.4. Knowledge of medicines, Procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria.					
12	Rasa Rakta Rogas [Disorders of blood and cardiovascular system]1. Examination of Rasavahas Srotas and Raktavaha Srotas2. Pandu (Anemia), Kamala (Jaundice), Raktapitta (Haemorrhagic disease), Yakrit Udara and Pleehodara (Hepatosplenomegaly)3. Knowledge of medicines, procedure-based therapies, Pathyapathya, Counseling of the parent and Referral criteria.	2	10	3	3	6
13	 Antahsravee Granthi Rogas (Disorders of Endocrine System) 1. Sahaja Prameha (Type 1 Diabetes), Thyroid dysfunctions and Precocious and Delayed Puberty. 2. Knowledge of medicines, procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria. 	2		3	2	2
14	Mutravaha Sroto Rogas (Disorders of Genito urinary system) 1. Examination of Mutravaha srotas 2. Niruddha Prakasha (Phimosis) 3. Mutra Rogas (UTI, Glomerular Nephritis, Chronic Renal Failure, Nephrotic syndrome, Hematuria, Proteinuria). 4. Knowledge of medicines, procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria.	3	5	3	2	2
15	 Sandhi Rogas (Rheumatological Disorders) 1. Amavata, Vatarakta, Sandigata Vata(Rheumatological disorders). 2. Knowledge regarding medicines, Procedure- based therapies, Pathyapathya, counseling of the parent and Referral criteria. 	3		3	2	2
16	Twak Rogas (Dermatological Disorders) 1. Kushta, Charmadala, Arumshika and Visarpa (Scabies, Eczema, Atopic Dermatitis and	3	13	3	2	3

	Psoriasis). 2. Knowledge of medicines, Procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria.					
17	Sira Snayu Rogas (Nervous system disorders) 1. Examination of the nervous system 2. Jalaseershaka (Hydrocephalus), Apasmara (Epilepsy) Ataxia, Floppiness, Cerebral Palsy.	3		7	3	9
	3. Knowledge of medicines, procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria.					
18	Unmada Rogas (Behavioral and Neurobehavioral disorders)	3		3	4	9
	 Bala Unmada (ADHD, ASD, Temper tantrum) Learning Disabilities, Scholastic backwardness, Breath holding spells, Mritbhakshana (Pica), Thumb sucking and Shayyamutra (Enuresis). Buddhi Mandya (Mental retardation). Integrated Child Development Centre. Knowledge of medicines, procedure-based therapies, Pathyapathya, counseling of the parent and Referral criteria. 					
19	 Atyayika Rogas (Emergency Paediatrics) 1. Paediatric emergencies–Status epilepticus, Febrile seizures, Acute breathlessness, Poisoning, Shock, Burns, Foreign body Aspiration, Insect bite, Cardiorespiratory Arrest. 2. Fluid resuscitation techniques, IV access, Nebulization and PR medications in different conditions. 	3	12	3	2	3
20	Bala Panchakarma	3		5	0	8
	Practice of Panchakarma in children -Rukshana, Snehana, Swedana, Vamana, Virechana, Basti, Nasya, Raktamokshana, Netrakalpa, Nasa, Karna procedures.					
21	Kishora Swasthya (Adolescent Health)	3		2	0	1
	 Knowledge regarding adolescent health and diseases Sexual Maturity Rating Scale 					
22	Anya Rogas (Miscellaneous Diseases)	3		1	1	0

Inborn Errors of Metabolism, Congenital Rubella Syndrome, Celiac Disease, Spinal Muscular Atrophy, Guillain Barre Syndrome, Sickle Cell Anemia, Wilsons Disease,Kukunaka, Utphullika, Ajagallika and TaluKantaka.					
Total Marks		100	100	53	122

Table 3 : Learning objectives of Course

Paper 1	(KAUN	/ARABHRITYA)									
A3 Cour se out come	Le	B3 earning Objective (At the end of the session, th students should be able to)	e C3 Doma n/sub		E3 Level	F3 T-L method	G3 Assessmen t	H3 Assess ment Type	I3 Ter m	K3 Integra tion	L3 Type
Topic 1	Intro	duction to Kaumarabhritya (LH :2 NLHT: 0	NLHP: 0)								
A3		B3	C3	D3	E3	F3	G3	Н3	I 3	К3	L3
CO 1,CO 3	Define	Kaumarabhritya	СК	МК	K	DIS,RE C,L	INT,PUZ	F&S	Ι	-	LH
CO 1,CO 3		he scope and importance of Kaumarabhritya. a the term Jatamatra, Navajata, Sadyojata, Bala, and a.	CC	DK	K	L&PPT ,DIS	CR-W,S- LAQ,WP	F&S	Ι	-	LH
CO 1,CO 3	Enlist to Classify	v Vayo Bheda. erminologies associated with different stages of life. y age as per recent advances. e rationale behind Vayo Bheda.	Flife. CAN MK KH BS,L& INT,CR- GD W,DEB F&S I - LH					LH			
Non Le	ecture H	Iour Theory		•							
S.No		Name of Activity	Description	of Theory	Activity						
Non Le	cture H	Iour Practical									
S.No		Name of Practical	Description	of Practica	al Activity	,					
Topic 2	Bala S	Samvardhana (Growth and Development) (LH	H :5 NLHT: 3	NLHP: 13	B)						
A3		B3	C3	D3	E3	F 3	G3	НЗ	I 3	К3	L3

CO 1,CO 3	Define Growth and Describe factors affecting Growth and Development	СК	МК	K	BS,DIS, L&PPT	INT,T-CS	F&S	Ι	-	LH
CO 1,CO 3	Recognise patterns of Growth during Infancy, Childhood and Adolescence.	СК	МК	KH	BS,L&P PT ,DIS	PA,QZ ,M- MOD	F&S	Ι	-	LH
CO 1,CO 3	Demonstrate different parameters used for assessment of growth in infants, children and adolescents including WHO standard and Indian Standard Parameters.	PSY- GUD	МК	SH	D,D- BED,PT	SP,P- PRF,CHK	F&S	Ι	-	NLHP2.1
CO 1,CO 3	Screen and plot normal and abnormal growth in different age groups independently.	PSY- MEC	МК	SH	PT,D,D- BED	CHK,PP-Pr actical,P- PRF	F&S	Ι	-	NLHP2.2
CO 1,CO 3	Examine the status of Dhatu in a child with reference to growth assessment.	САР	МК	SH	D,PT	CHK,P-SU R,PP- Practical	F&S	Ι	-	NLHP2.3
CO 1,CO 3	Measure Anthropometry, investigate undernourishment and evaluate the nutritional status of child	PSY- MEC	МК	SH	PT,PBL ,D	Mini- CEX,P- PRF	F&S	Ι	-	NLHP2.4
CO 1	Define Development, enlist normal developmental milestones in - Gross Motor, Fine Motor skills, Personal-Social and general understanding, Language, Vision and Hearing.	СК	МК	K	EDU,L &PPT ,L_VC	O-GAME,P A,M-MOD	F&S	Ι	-	LH
CO 1,CO 2,CO 3	Define Developmental Delay	СК	МК	K	L_VC,L &PPT	INT	F&S	Ι	-	LH
СО	Assess Developmental Milestones in normal child & interpret the	CE	МК	SH	PBL,SI	Mini-CEX,	F&S	Ι	-	NLHP2.5

1,CO 4	observations.				M,PT	CHK,P- CASE				
CO 1,CO 2,CO 4	Assess Developmental Delay in children using DDST -Denver developmental screening test	CE	МК	SH	W,PBL, PT	P-PRF,CH K,P-CASE	F&S	Ι	-	NLHP2.6
CO 1,CO 2,CO 4	Record a case of Developmental Delay using the skill of history taking and DDST assessment.	PSY- MEC	МК	SH	CD,CB L,SIM	P-CASE,SP ,CHK	F&S	I	-	NLHP2.7
CO 1	Describe Danta and enlist types of Danta.	СК	DK	K	DIS,L& GD	M-MOD,W P,INT	F&S	Ι	-	LH
CO 1,CO 3	Describe primary and secondary Dentition.	СК	MK	K	DIS,L& PPT	M-MOD,P RN,INT	F&S	Ι	-	LH
CO 1,CO 3	Explain process of Dantotpatti.	CC	DK	K	BL,L& GD	INT,M- CHT,PRN	F&S	Ι	-	LH
CO 1,CO 2,CO 3	Enlist complications of Dantotpatti and explain its management.	CC	МК	K	RLE,L &GD,P SM	PM,T-CS	F&S	Ι	-	LH
CO 1,CO 3,CO 5,CO 6	Explain Childhood Samskaras.	CC	NK	К	L&GD, BS,L_V C	INT,WP,O- GAME	F&S	Ι	-	LH

CO Analyse the role of Samskaras in the 1,CO 3,CO 5,CO 6	rocess of development.	CAN	DK	КН	DIS,BS, FC	CHK,COM, M-MOD	F&S	Ι	-	NLHT2.1
Non Lecture Hour Theory			1	1	-				1	•
S.No Name of Activity	Name of Activity Description of Theory Activity									
NLHT 2.1 Childhood Samskaras	By th prior By th Class 1. Stu 2. Ea 3. Stu Key J Nishl miles Class 1. Gr 2. Ott 3. Re Role 1. Fa 2. As Chec 1. Pro 2. Ac 3. An	to the active the Student of Activity: adents are a ch group is adents are a points of di kramana Sa atones the c s Activity: oup leader ther groups cord and su of Teache cilitate gro sess teamwerklist: Yes/ e-preparedir curately id	- The teac vity. - Students Group dis divided in g assigned given time scussion - umskara he hild must a Present a present the are expect ubmit the s r during A up discussi vork and pu No ness of the entifies the ole of same	cher provid are expect scussion- groups (m 1 or 2 Chil for group Role of Sa lps child t achieve by ion and eve eir inputs t ed to add for activity ion. resentation subject e mileston skara in ch	eted to go th 1 hour in 5 and ma Idhood Sam discussion amskara in o adjust wir to that age. valuation - to the class. to the discuss to the dis	ssion. ssion. e checklist.	ource mate (group). n class stre developm environm	rials pri ength ar ent. Exa	or to the a nd number ample – A	of groups. nalyse how

		5. Active collaboration						
NLHP 2.1 Assessment of Growth I Duration: 3 hours Pre-preparation By the Teacher: Arranging the equipment necessary for assessment of growth. By the Students: Student is expected to come prepared with the concept of growth and its assessment. Clinical Classroom: 1. Students are briefed about the parameters used for the assessment of growth including anthropometry (weight, height, head circumference, chest circumference, MAC other relevant parameters) 2. Demonstration of measurement on Patient/Student by the teacher. Bedside: 1. Students are divided into groups (min 5 to max 10) and sent to OPD/IPD 2. Each group is assigned 1 or 2 patients. 3. Students are instructed to take proper anthropometry of the given child by using fibre glass measuring tape, stadiometer, weighing machine and other equipment. Use appropriate growth formulae for assessing growth. Clinical Classroom								
S.No	Name of Practical	Description of Practical Activity						
NLHP 2.1	Assessment of Growth I							
		1. Students are briefed about the parameters used for the assessment of growth including						
		· ·						
		1. Students are divided into groups (min 5 to max 10) and sent to OPD/IPD						
		formulae for assessing growth.						
		Clinical Classroom						
		1. Discussion: Check for Growth deviations if any, age-specific growth, Indian and WHO standard.						
		2. Students present their observations and record.						
		Evaluation: Teacher evaluates student performance using a checklist.						
		Checklist: Yes/No						
		1. Pre-preparedness of the subject						
		2. Check for Zero level of scale						
		3. Handles baby/child gently						
		4. Remove parallax while taking the reading						
		5. Record the measurement accurately						

		6. Compare with formulas and standard chart
NLHP 2.2	Assessment of Growth II	Duration: 1 hour
		Pre-Preparation:
		By the Teacher: Measurement Instruments are to be arranged prior to the activity.
		By the Student: Students are expected to come prepared with the knowledge of Growth and its assessment.
		Activity
		Clinical classroom:
		1. Students are initially briefed on the factors affecting the growth, and anthropometric measurements according to the different age classification and their variations.
		2. Students are sent to OPD/IPD.
		Bedside
		1. Students are instructed to take proper anthropometric measurements of the given child to screen for normal and abnormal growth independently.
		2. Use appropriate growth formulas (WHO & Indian standard parameters) to differentiate normal and abnormal growth.
		3. Take a brief history of the child.
		4. Plot normal & abnormal growth according to different age groups.
		Clinical Classroom
		Students present their findings and variations found and discuss the factors that affected the growth.
		Evaluation: Students are evaluated using the checklist/observation.
		Checklist: Yes/No
		1. Record the measurements accurately
		2. Plot the measurement on the growth chart
		3. Interpret the graph
		4. List the possible factors affecting growth
NLHP 2.3	Status of Dhatu	Duration: 1 hour
		Pre-Preparation

		 By the Teacher: Group division and arranging the Case for discussion. By the Student: The student is expected to come prepared with the knowledge of Dhatu Sara Lakshana, Dhatu Vriddhi Lakshana and Dhatu Kshaya Lakshana. Clinical Classroom: Students are briefed with Dhatu Sara Lakshana, Vriddhi and Kshaya Lakshanas Students are grouped into batches(min 4 to max 8)and sent to OPD/IPD Bedside: Students are instructed to examine the assigned child for proper Rasa, Rakta, Mamsa and other Dhatu Sara Lakshana, Vriddhi and Kshaya Lakshanas. Record the observations. Clinical Classroom:Each group will discuss their assessment. Evaluation: Teacher assesses students' performance using a checklist. Checklist: Yes/No Rapport building with the child and caretaker Demographic data recorded Ask appropriate questions to assess the status Assess Dhatu Sara, Vruddi and Kashya Lakshana precisely Presents their finding confidently
NLHP 2.4	Undernourished child	Duration: 1 hour Pre-Preparation By the Teacher: 1. Group division and arranging real case/case vignettes. 2. Arranging necessary equipment for measurements. By the Students: Student is expected to come prepared with the knowledge of anthropometry, growth chart, nutritional assessment and the features of micro-nutrient and vitamin deficiencies. Activity Clinical classroom: Students are divided in groups and sent to OPD/IPD Bedside 1. Rapport building 2. Record anthropometric measurements and plot on the graph.

		 3. Examine the features of micro-nutrients and vitamin deficiencies. Clinical classroom Discuss the anthropometric measurements of the given case Evaluate the nutritional status of the child Make a judgment on the nutritional status of the child. Role of Teacher: Observe the communication skills during Case Taking, provide inputs on the case and Assess student performance through a checklist.
NLHP 2.5	Assessment of Developmental Milestones in normal child	Duration : 3 hours Pre-preparation By the Teacher: 1. Arranging the materials or objects necessary for assessment of development. 2. Arranging Real Patient/Videos By the Students: Student is expected to come prepared with developmental milestones before the session. Clinical Classroom: Students are briefed about the parameters used for the assessment of development. Bedside (In real case) 1. Students are divided in groups (8-12 in one group). 2. Students are sent to OPD/IPD 3. Students should assess the developmental milestones of a given child. Clinical Classroom Students present and record their observations. Role of Teacher: The teacher evaluates student performance using a checklist. Checklist: Yes/No 1. Pre-preparedness of the topic. 2. Rapport building established. 3. Handle the baby/child gently. 4. Ask relevant questions to find the age of achievement of milestones. 5. Interpret the development as per age accurately.

NLHP 2.6	Assessment of Developmental Delay	Duration: 2 hours
		Pre-preparation
		By the Teacher:
		1. Arranging the materials or objects necessary for assessment of development.
		2. Arranging Real Patient/Videos
		By the Students: Student is expected to come prepared with developmental milestones and DDST
		scale before the session.
		Clinical Classroom:
		Students are briefed about DDST Scale in the classroom.
		Bedside (In real case)
		1. Students are divided in groups (8-12 in one group).
		2. Students are sent to OPD/IPD
		3. Students should assess the developmental milestones of a given child using DDST Scale.
		Clinical Classroom
		Students present and record the observations.
		Role of Teacher: Teacher evaluates student performance using a checklist.
		Checklist: Yes/No
		1. Rapport building established
		2. Handle the baby/child gently
		3. Use DDST scale to assess the developmental milestone accurately
		4. Interpret the development as per age accurately
NLHP 2.7	Case of Developmental Delay	Duration: 2 hours
		Pre-Preparation -
		By the Teacher: Group division and arranging the Case for discussion
		By the Student: The student is expected to come prepared with the knowledge of Developmental
		milestones, Developmental delay and history taking.
		Bedside activity:
		1. Students are divided in groups (Min 4 max 8) and sent to OPD/IPD
		2. Each group is assigned a developmental delay case. (Real case/Simulated case/Clinical case video)

	 3. Students are expected to - A. Build Rapport with the patient and guardian. History taking (More importance to be given on developmental milestones like when baby achieves social smile, neck control, and other developmental milestones which include gross motor, fine motor, social and language development). B. Assess the child using DDST scale. C. Record the case Clinical Classroom: Present the case and discuss the observation. Role of Teacher: Observe the communication skills during Case Taking, provide inputs on the case and Assess student performance through a checklist. Checklist: Yes/No 1. Pre-preparedness of the topic 2. Rapport building established 3. Demographic data and family history documented 4. Developmental milestones assessed using DDST scale 5. History of developmental delay explained.
	6. Analyse the probable cause for developmental delay based on history.

Topic 3 Navajata Vijnana (Neonatology) (LH :13 NLHT: 3 NLHP: 12)

								-		
A3	B3	C3	D3	E3	F3	G3	H3	I 3	K3	L3
CO 1	Explain Garbha Vriddhi and Vikasa. Explain fetal development.	CC	NK	K	L_VC,L &PPT	QZ ,M-CH T,O-GAME	F&S	Ι	H-SP	LH
CO 1,CO 2,CO 3	Define the terms - SGA, LGA, AGA, LBW, VLBW, ELBW, Fetus, Live birth and Stillbirth. Describe the characteristics of Normal Term Neonate. Describe the characteristics of High-Risk Neonate. Recite Swasta Bala Lakshana.	СК	МК	К	DIS,L& PPT ,REC	O-GAME,I NT,WP	F&S	Ι	-	LH
CO 2,CO 3	Explain Navajata Shishu Paricharya including Pranapratyagamana. Explain recent advances in neonatal care.	CC	МК	K	L_VC,L &PPT	S-LAQ,M- CHT,INT	F&S	Ι	-	LH

CO 2,CO 3	Explain Nabhi Nala Chedana. Enlist and explain complications of Nabhi Nala Chedana, Nabhi Paka, Umbilical sepsis and its management. Explain the management of Umbilical Hernia	CC	МК	К	L&GD, L_VC,D IS	C-VC,T- CS	F&S	Ι	-	LH
CO 3,CO 7,CO 8	Analyse the scientificity of Navajata Shishu Paricharya & Pranapratyagamana with respect to: Receiving the baby, Temperature maintenance, Stimulation of breathing and Cord care	CAN	МК	КН	BS,FC,I BL	PRN,CHK, DEB	F&S	Ι	-	NLHT3.1
CO 1,CO 2,CO 3	Explain the care of Post term and Preterm Neonates.	CC	МК	K	L&PPT ,L_VC, CD	QZ ,T-CS, C-VC	F&S	I	-	LH
CO 2,CO 3	Explain Neonatal Resuscitation. Enlist complications of Neonatal Resuscitation and Explain management. Recognise the Preventive Strategies at the time of delivery.	CC	МК	КН	D-M,BS ,L&PPT	CL-PR,INT ,O-GAME	F&S	Ι	-	LH
CO 3,CO 7,CO 8	Perform Neonatal Resuscitation on manikin. Demonstrate Intranatal care and receiving a baby in normal delivery.	PSY- GUD	МК	SH	D- M,W,P T	CHK,DOP S,OSCE,D OPS	F&S	I	-	NLHP3.1
CO 1,CO 7	Examine Newborn baby and assess gestational age of Newborn.	PSY- GUD	МК	SH	D- M,W,P T	CHK,OSC E,P-PRF	F&S	Ι	-	NLHP3.2
CO 3,CO 4,CO 7	Demonstrate Navajata Abhyanga, Snana and administer Prashanam. Counsel and educate the caretakers regarding "Newborn Care after discharge"	PSY- GUD	МК	SH	D-M,RP	CHK,PA,R S	F&S	Ι	-	NLHP3.3
CO 3,CO	Explain Rakshakarma Vidhi. Analyse scientificity of Raksha Karma.	CAN	МК	КН	SDL,L &GD	CL-PR,DE B,PUZ	F&S	I	-	LH

5										
CO 1,CO 3	Infer Ayu Pariksha Vidhi [Assessment of Longevity and Standard of Living]	CAN	NK	КН	W,EDU ,PL	RS,CHK,P- SUR	F&S	Ι	-	NLHT3.2
CO 2,CO 3	Describe the etiology, clinical features and management of neonatal respiratory distress. Describe the etiology, clinical features and management of meconium aspiration syndrome. Explain Ulbakam and its Chikitsa.	CC	МК	K	L&PPT ,LRI,X- Ray	T-CS, C- VC,INT	F&S	Ι	-	LH
CO 2,CO 3	Enlist and analyze complications of Akalapravahana. Define and enumerate birth injuries and analyze their causes. Describe the clinical features, pathophysiology and management of Caput succedaneum and cephalohematoma. Explain Upasheershakam and its Chikitsa. Describe the clinical features, pathophysiology and management of Erb's Palsy.	CAN	МК	КН	L&PPT ,DIS,C D	C-VC,PUZ ,T-CS	F&S	I	-	LH
CO 2,CO 3	Describe etiology, clinical features and management of haemorrhagic diseases.	СК	МК	К	CD,DIS ,L&PPT	PM,CBA,T- CS	F&S	Ι	-	LH
CO 2,CO 3	Diagnose Neonatal seizures. Analyse the concept of Akshepaka and Skandapasmara in the context of neonatal seizures	CE	МК	КН	SIM,CB L,PT	SBA,Mini- CEX,CHK	F&S	Ι	-	NLHP3.4
CO 2,CO 3	Describe etiology, clinical features and management of Neonatal hypothermia, Neonatal hypoglycemia and neonatal seizures.	СК	МК	К	L_VC,C D,L&PP T	CBA,T-CS	F&S	Ι	-	LH
CO 2,CO	Diagnose Neonatal Hypothermia, Hypoglycemia, Septicemia, Conjunctivitis, Respiratory Distress, Meconium Aspiration	PSY- GUD	МК	SH	CBL,C D,PT	CHK,Mini- CEX,P-	F&S	Ι	-	NLHP3.5

3	Hemorr Observe	me, Caput Succedaneum, Cephalohematoma, Erb hagic diseases. Diagnose Umbilical Hernia and s e the umbilical area of neonates and screen for un ternia. Recognize red flags for referrals of umbilio	epsis. Ibilical					CASE				
CO 2,CO 3		escribe etiology, clinical features and management of neonatal pticemia and neonatal conjunctivitis.		CC	МК	K	CD,L& PPT	T-CS,O- GAME	F&S	Ι	-	LH
CO 2,CO 3	Explain mechanism of Neonatal jaundice. Describe etiology, clinical features and management of Neonatal Jaundice.		ogy,	CC	МК	К	L_VC,L &PPT ,LRI	M-CHT, C- VC	F&S	Ι	-	LH
CO 2,CO 3	Diagnose and manage the case of Neonatal Jaundice.			PSY- GUD	МК	SH	PT,LRI, CBL	CHK,Mini- CEX,P- CASE	F&S	Ι	-	NLHP3.6
CO 3,CO 5,CO 6	principl hypothe	the scope of complimentary approach of Ayurveres and practices in the management and prevention ermia, hypoglycemia, seizure, septicemia, conjunct ndice in neonate.	on of	CAN	NK	КН	TBL,FC ,BS	CHK,DEB, CL-PR	F&S	Ι	-	NLHT3.3
Non L	ecture H	Iour Theory						·		•		
S.No		Name of Activity	Desc	ription of	Theory A	Activity						
NLHT	Pranapratyagamana Pre-Pr By the one we By the 1. Iden			eek before e Student ntify a que	n: Schedulir e the sessic stion (Wh	n. ich Procec	lures of Na	ion, dividing t vajata Shishu l ure maintenan	Paricharya	and Pra	anapratyag	gamana have

		 Conduct background research (Explore or study the topics such as Ashmanosanghatanokarnayormulam , Sheetodakenaushnodakena Mukha Parisheka, and initial steps involved in the labour room) Formulate hypothesis if necessary: Predict how specific Paricharya helps in stimulation of breathing, maintenance of temperature and card care. Plan and conduct investigations (interview with senior Ayurveda pediatricians or collecting research articles) Analyse Data: Gather and analyse information. Class activity: Group discussion on collected findings - 10 mins Communicate findings: one group leader presents the findings through a report/presentation. Open discussion/ debate on the findings of each group. Submit the report.
NLHT 3.2	Ayu Pariksha Vidhi	 Duration: 1 hour Pre-Preparation By the Teacher: Prepare a questionnaire of each organ character. Group division (5-8 in one group) By the Student: Student is expected to come prepared with the knowledge of Lakshana Adhyaya Activity: Teacher briefs about Ayupariksha Vidhi and the questionnaire prepared Examine peers/children Mark each character based on its presence Cross-check with their current health status/professional status etc as interpretation Discuss based on opportunities received, lifestyle adapted etc Discuss on the feasibility of Lakshan Adhyaya. Role of a teacher: Guide students on interpreting the questionnaire Evaluation: The teacher evaluates students using the Checklist form and gives feedback.

	 Correctly identify the features Interprets the inference Active participation
NLHT 3.3 Neonatal disorders	Duration : 1 hour Prerequisite\ preparation - By the Teacher: 1. Dividing the class into six groups and assigning one condition to each group (hypothermia, hypoglycemia, seizure, septicemia, conjunctivitis and jaundice) one-two weeks prior to the session. 2. Guiding the student to collect references and document the findings By the Student: Student is expected to collect references, document and present their opinion. Class Activity 1.Students gather in assigned groups and discuss: 10 mins 2. One from each group is expected to present the Ayurveda principles and practices in the management and prevention of allotted disease with their peers. (For example : Stanyapana (Exclusive breastfeeding) in the management and prevention of neonatal hypoglycemia, Triphala Kwatha Parisheka in neonatal conjunctivitis) 3. Debate and Discuss the presented findings. Role of a teacher: 1.Facilitate group discussion 2.Evaluation is done using a checklist and inputs are provided based on their performance. Checklist: Yes/No 1. Pre-preparedness on the topic 2. Correctly identify the preventive and complementary strategies 3. Justifies the strategies with evidence 4. Good collaboration

S.No	Name of Practical	Description of Practical Activity
NLHP 3.1	Neonatal Resuscitation and Intranatal care.	Duration: 3 hours Pre-Preparation By the Teacher: Arranging the Manikins, instruments and equipment necessary for Neonatal resuscitation. By the Student: Student is expected to come prepared with the knowledge of Neonatal resuscitation. Activity in clinical classroom/simulation lab: 1. Teacher enlists the aseptic measures and Neonatal resuscitation and 2. Demonstration of neonatal resuscitation and intranatal care by the trainer. 3. Demonstration of communication skills with the mother during birth by the trainer. 4. Students are divided in groups.(6-10 in each group) 5. Each group is provided with manikin. 6. Students are instructed to perform neonatal resuscitation in turns. Role of a teacher: 1. Guide students on appropriate methods of performing neonatal resuscitation. 2. Teacher evaluates students using the Checklist/DOAP form. Checklist: Yes/No 1. Handling the manikin gently 2. Follow the proper steps of resuscitation 3. Quick decision taken during change of procedures 4. Performs the steps efficiently and skillfully.
NLHP 3.2	Examination of Newborn and Assessment of gestational age.	Duration: 2 hours Pre-Preparation By the Teacher: Arranging the Manikin/Real case and instruments and equipment necessary for Neonatal examination. By the Student: Student is expected to come prepared with the knowledge of the Neonatal examination Activity in clinical classroom/simulation lab: 1. Students are divided in groups.(6-10 in each group)

		 2. Each group is provided with a manikin/real case. 3. Teacher demonstrates the newborn examination on a manikin/real case. 4. Students perform the following examination on a manikin/real case. a. Examination immediately after birth b. Examination on the second day of life c. Examination on the day of discharge Role of a teacher: 1. Guide students on appropriate methods of performing neonatal examination. 2. Teacher evaluates students using the Checklist form. Checklist: Yes/No 1. Establish rapport with parent/caretaker 2. Handle the baby/manikin gently 3. Performs the examination efficiently 4. Identifies the gestation maturity based on the physical and neurological maturity of the child.
NLHP 3.3	Newborn care after discharge	 Duration: 2 hours Pre-Preparation By the Teacher: Arranging the Manikin and instruments necessary for demonstrating Navajata abhyanga, Snana and administering Prashanam. Preparing a Role Play skit/pre-recorded video of the demonstration By the Student: Student is expected to come prepared with the knowledge of Abhyanga, Snana and Prashanam. Activity in clinical classroom/simulation lab: Teacher demonstrates the Newborn care post discharge including Abhyanga, Snana and Prashanam on Manikin or real baby/displays the pre-recorded video. Students gather in groups to practice on Manikin and with peers. Components of role-play demonstration include: Building a Rapport with the mother and ensuring her on Newborn Care. Explaining the signs of a healthy baby and a sick baby. Demonstrating the breastfeeding position and burping. Explaining the frequency

		 4. Demonstrating Abhyanga and Snana 5. Demonstrating Prashanam. 6. Explaining cleaning and clothing of the baby 7. Demonstrating Cord care 8. Demonstrating Shiro Pichu 9. Ensuring if the mother has understood the communication and has no doubts. Role of a teacher: Demonstration of Role play and guide students on right practice. Teacher evaluates the student skill by using Check list and gives feedback. Checklist: Yes/No Rapport building established Explains signs of healthy baby and sick baby efficiently. Demonstrates the breastfeeding position and burping Demonstrates Abhyanga, Snana and Prashanam. Explains the cleaning and clothing of the baby. Demonstrates Cord care and Shiro Pichu. 7. Ensures that the mother has understood the communication.
NLHP 3.4	Neonatal seizures /Akshepaka and Skandapasmara.	Duration: 1 Hour Preparation /pre-requisites By the teacher: 1. Scheduling the case taking and arranging the case (Real Patient / simulated patient/ Case Vignette) 2. Make the student understand the OPD/IPD manners during case-taking 3. Preparing the checklist for the concerned activity. By the student: 1. Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa Apasmara, the concept of Akshepaka and Skandapasmara and neonatal seizure. 2. Rapport building, proper history taking, thorough examination, appropriate Investigation ACTIVITY In clinical classroom: Students are divided in groups (5-8 members in one group) and assigned one case (Real/Simulated/Case Vignette)

		 Bedside: Case taking as per the format (in case of real patients) Building rapport with patient History taking Clinical examination In clinical classroom: Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, plan investigations if needed & identify the Samprapti Ghatakas Plan the management and justify the Samprapti Vighatana Analyse the Symptoms with the Lakshana of Akshepaka and Skandapasmara Presentation of the case [Each group will present entire case or any sub-point of the case] Recording the case in the record book. Teacher's role: Teacher evaluates students' performance based on a checklist/rating scale. Checklist: Yes/No Rapport building established Explain the history and symptoms in sequence Plans the management and justifies Analyze the Symptoms with Akshepaka and Skandapasmara
NLHP 3.5	Neonatal diseases	 Duration: 3 Hours Preparation /pre-requisites By the teacher: Scheduling the case taking and arranging the case (Real Patient / simulated patient/ Case Vignette) Make the student understand the OPD/IPD manners during case-taking Preparing the checklist for the concerned activity. By the student: The student is expected to come prepared with the concept of Neonatal Diseases Rapport building, proper history taking, thorough examination, appropriate Investigation ACTIVITY In clinical classroom: Students are paired and assigned one case (Real/Simulated/Case Vignette) of Neonatal Hypothermia, Hypoglycemia, Septicemia, Conjunctivitis, Respiratory distress, Meconium

		 aspiration syndrome, Caput Succedaneum, Cephalohematoma, Erbs palsy, Hemorrhagic diseases, Umbilical Hernia and Umbilical sepsis. Bedside: Case taking as per the format (in case of real patients) – 1 hour 1. Building rapport with patient 2. History taking 3. Clinical examination In clinical classroom: 2 hour 1. Students discuss the diagnosis, interpret the investigation report 2. Identify red flag signs for referral 3. Plan the management and justify 4. Presentation of the case [Each group will present the case assigned to them] 5. Recording the case in the record book. Teacher's role: The teacher evaluates students' performance based on a checklist/rating scale. Checklist: Yes/No 1. Rapport building established in real case 2. Explain the birth history and symptoms in sequence 3. Interpret the investigation report accurately 4. Diagnose the case and justifies the differential diagnosis 5. Plan the possible management 6. Good collaboration
NLHP 3.6	Case of Neonatal Jaundice.	Duration: 1 Hour Preparation /pre-requisites By the teacher: 1. Scheduling the case taking and arranging the case (Real Patient / simulated patient/ Case Vignette) 2. Make the student understand the OPD/IPD manners during case-taking 3. Preparing the checklist for the concerned activity. By the student: 1. The student is expected to come prepared with the concept of Neonatal Jaundice 2. Rapport building, proper history taking, thorough examination, appropriate Investigation

		ACTIVITY n clinical class ase (Real/Simu Physiological/I Bedside: Case f . Building rapp 2. History takin 3. Clinical exan n clinical class . Students disc 2. Plan the man 3. Discuss the p 4. Presentation 5. Recording th	Ilated/Case Pathologica taking as poort with pa g nination sroom: uss the dia agement an ractical choof the case	Vignette) I) er the form atient gnosis, int d justify allenges in [Each gro	of varying nat (in case erpret the in the manag up will pres	severity of Ne of real patients nvestigation ement plan and	conatal Jau S) d alternativ	ves		
Tonia	4 Stanya Vijnana (Breast Milk) (LH :5 NLHT: 5 NLH	P: 4)	-		-			-		
robic				1	1			1		
A3	B3	C3	D3	E3	F3	G3	Н3	13	К3	L3

6	colostrum and enlist the advantages.									
CO 3,CO 5,CO 6		CC	МК	К	TUT,L_ VC,DIS	WP,M-CH T,O-GAME	F&S	Ι	-	LH
CO 4,CC 7,CC		AFT- RES	МК	SH	RP,SIM ,D	CHK,M- POS,P-RP	F&S	I	-	NLHP4.1

8										
CO 5,CO 6	Identify Complementary feeding arrangements in the absence of Stanya.	CC	DK	KH	FC,DIS, TBL	PRN,CHK, DEB	F&S	Ι	-	NLHT4.1
CO 5,CO 6	Discuss Complementary feeding arrangements in absence of Breastmilk	СК	МК	K	FC,TBL ,DIS	PUZ,CHK, M-CHT	F&S	Ι	-	NLHT4.2
CO 5,CO 6	Discuss the Complementary feeding arrangements in the absence of breast milk	CAN	МК	KH	FV,TP W	CR- W,COM	F&S	Ι	-	NLHP4.2
CO 1,CO 2,CO 3	Explain Nidana, Bheda, Lakshana and Chikitsa of Stanya Dushti. Explain Nidana, Lakshana of Stanya Vriddhi and Kshaya. Recite Stanya Vardhaka Gana and Stanya Shodhana Gana.	CC	МК	K	REC,L &GD,T UT	QZ ,WP,T- CS	F&S	Ι	-	LH
CO 1,CO 3,CO 4,CO 8	Analyse Nidana, Lakshana of Stanya Vriddhi and Kshaya. Perform Stanya Pareeksha.	PSY- GUD	МК	SH	DL,W, KL	CHK,P-SU R,DOPS,D OPS	F&S	I	-	NLHP4.3
CO 2,CO 3,CO 6	Enlist the Diseases due to Stanyadushti. Explain Nidana, Samprapti, Lakshana and Chikitsa of Ksheeralasaka. Explain Nidana, Samprapti, Lakshana and Chikitsa of Ahiputana/GudaKutta.	CC	МК	K	DIS,L& PPT ,CD	T-CS, C- VC,SBA	F&S	Ι	-	LH
CO 2,CO 3,CO 5,CO	Explain Nidana, Samprapti, Lakshana and Chikitsa of Kumarashosha. Describe etiopathogenesis, features, investigations and management of Lactose Intolerance. Explain method and practices of Swarnaprashana.	СС	МК	K	DIS,CD ,L&PPT	T-CS,S- LAQ,CBA	F&S	Ι	-	LH

Stanya) Pr B 1. 2. ac				Duration: 1 hour Pre-preparation By the Teacher: 1. Students are divided in groups (8-12 students in one group) 2. The teacher assigns the topic of discussion and the list of references one week before the class activity. By the Student: Students are expected to study the concept and come prepared for discussion.									
S.No		Name of Activity	Desci	Description of Theory Activity									
Non Lo	ecture H	lour Theory		-	1	•				-	-		
CO 2,CO 3	O diseases in Breastfeeding babies.			CAN	МК	КН	PBL,FC	CHK,RS,C L-PR	F&S	Ι	-	NLHT4.5	
CO 4,CO 5,CO 8	0			AFT- RES	NK	SH	TPW,R LE	INT,C-INT	F	I	-	NLHT4.4	
CO 5,CO 7				PSY- GUD	МК	SH	PT,D	P-PRF,DO PS,Log book,DOPS	F&S	Ι	-	NLHP4.4	
CO 3,CO 5	Analyse	e the scientific benifits of Swarnaprashana.		CAN	DK	КН	BS,IBL, DIS	DEB,CHK, CR-RED,C L-PR	F&S	I	_	NLHT4.3	
6	I												

Key points of discussion: Stanya Abhave kim Dheyam (complementary or alternative feeding arrangements)

Class Activity :

1. Students gather in divided groups.

		 2. Facilitator open the discussion. 3. Students are expected to discuss Complementary feeding arrangements in absence of Stanya in their respective groups with their peers. 4. Each group will identify a complementary feeding arrangement. 5. Students are supposed to justify the answers with references. 6. One group leader presents the key points of discussion.
NLHT 4.2	Complementary feeding II (in the absence of Breastmilk)	Duration: 1 hour Pre-preparation By the Teacher: 1. Students are divided in groups (8-12 students in one group) 2. The teacher gives the topic of discussion and the list of references one week before the class activity. By the Student: Students are expected to study the concept and come prepared for discussion. Key points of discussion: complementary or alternative feeding arrangements Class Activity : 1. Students gather in divided groups. 2. Facilitator open the discussion. 3. Students are expected to discuss Complementary feeding arrangements in absence of breastmilk in their respective groups with their peers. 4. Each group will identify complementary feeding arrangement. 5. Students are supposed to justify the answers with references. 6. One group leader presents the key points of discussion.
NLHT 4.3	Swarnaprashana	Duration: 1 hour Pre-preparation By the Teacher: Teacher informs the topic and group division (Min 10 to 12) 1 week before the class activity. By the Student: 1. Identify a Question on the topic.

		 Conduct Background Research: Literature research, Collecting articles/research work on Swarnaprashana Formulate a hypothesis if needed Plan and Conduct Investigations: Interviewing healthcare professionals about Swarnaprashana they use in their practice and thier benifits. Surveys can also be planned in public. Analyse Data: Analyse data from surveys or interviews to understand the scientific benefits of Swarnaprashana. Class activity: Students gather in their respective groups Group discussion: 10 mins Communicate findings: Present findings through a report/presentation with evidence. Role of a Teacher: Direct the research and facilitate group discussion Evaluate students' performance based on checklist/rating scale Checklist: Yes/No Preparation: evidence of prior study and research Participation: All group members actively contribute to the discussion Justification: The scientific benefits of Swarnaprashana are justified with appropriate evidence and answers the query with justification. Communication: clear and confident expression during the discussion and presentation Presentation: Presentation well-organized, relevant, and delivered effectively
NLHT 4.4	Breast feeding week program.	 Students are expected to attend Breastfeeding Week program celebration either online or offline mode. The main aim of the program is to educate, encourage breastfeeding and promote good health in children. Objectives of attending the program. 1. Learning about breastfeeding benefits for mother. 2. Learning about breastfeeding benefits for children. 3. Importance of breastfeeding. 4. Educating families regarding breastfeeding. Outcome: Students are able to encourage and educate the importance of breastfeeding to public.

NLHT 4.5	Ksheeralasaka	 Duration: 1 hour Pre-preparation By the Teacher: Teacher divides the group and assigns one problem/Case Vignette to each group one week before the acivity. By the Student: Student is expected to understand the problem and study various resources available and prepare for group discussion. Class activity: Introduction: Teacher introduces students to the problem or case to be solved and provides an overview of Ksheeralasaka, malnutrition and chronic GI diseases. 1. Students gather in divided groups (8-12 in one group). 2. Students should analyze the symptoms of malnutrition and chronic GI diseases in a given case vignette with Ksheeralasaka by considering its Nidana, Samprapti and Lakshanas in groups. 3. The group leader presents their opinion or observations to the class.
	e Hour Practical	
S.No	Name of Practical	Description of Practical Activity
NLHP 4.1	Breastfeeding techniques	 Duration: 1 Hour Pre-preparation By the Teacher: Dividing the groups and arranging the manikin. Sharing the PPT/Prerecorded video Guiding the students to build a script and validate it before the session. By the Student: The student is expected to study breastfeeding techniques before the session. Build a script for role play (Explaining the breastfeeding technique to the parent/caretaker with Do's and Don'ts) Activity: Introduction: The teacher introduces students to different techniques of breastfeeding and its importance on a child's health.

		 Students assemble in groups and role-play the script. Role of Teacher: Facilitate group discussion, feedback & evaluation. Students performance will be evaluated using a checklist. Checklist: Yes/No Self-introduction and rapport building Demonstrates the different techniques of breastfeeding efficiently. Demonstrates burping Explains the frequency and duration of Breastfeeding Clear explanation in simple and local language Feedback of communication (Made sure that parents understood the technique)
NLHP 4.2	Complementary feeding Survey	Duration: 1 hour Pre-Preparation: By the Teacher: 1. Teacher has to identify the place of the survey visit and make necessary arrangements. 2. Divide the students in groups By the Student: 1. Students has to come prepared with the complementary feedings used in the absence of breastmilk. Activity 1. Students should visit nearby pharmacy/dispensary to identify the present complementary food available according to age groups. 2. Compare the composition of different companies and different age groups. 3. Analyse the difference in combinations of different companies. 4. Submit a report of the findings and its reflection. Role of a teacher: Teacher evaluates student based on the survey report and team performance.
NLHP 4.3	Stanya Vriddhi, Stanya Kshaya and Stanya Pareeksha	Duration: 1 Hour Activity 1: To perform Stanya Pareeksha (30Mins) Pre-Preparation : By the Teacher:

	 By the Teacher: Introduction: Initially teacher will brief about different methods of preparation of Swarnaprashana and its administration through Handouts/videos. By the Student: Students are expected to study Swarnaprashana preparation in detail before coming to the class. Activity 1.Students are divided into groups. 2. Each group is instructed to follow any one method of preparation of Swarnaprashana or a method that they adopt or practice in college or in their particular region. 3. Students are instructed to prepare Swarnaprashana followed by administration of the same. 4. Analyse the dose according to age
--	---

Topic 5	Bala Poshana	(Child Nutrition)) & Vvadhiksha	matva (Immunity)	(LH :5 NLHT: 5	5 NLHP: 8)
		(-, , ,		(

A3	B3	C3	D3	E3	F3	G3	H3	I3	K3	L3
CO 1,CO 5,CO 6	Describe age related nutritional needs of infants, children and adolescents	СК	МК	К	DIS,BL, L&PPT	INT,PRN,O- QZ	F&S	Ι	V-SW	LH
CO 1,CO 5,CO 6	Describe the method of calculating micronutrients in children	CC	NK	КН	EDU,PS M,L&P PT	T-CS,O-G AME,PRN	F	Ι	-	LH
CO 1,CO 3,CO 5	Describe the tools and methods for assessment of nutrition in children.Classify the nutritional status of infants, children and adolescents	CC	МК	K	DIS,L& PPT ,PSM	O-QZ,T-CS	F&S	Ι	-	LH
CO 1,CO	Assess and classify the nutrition status of infants, children and adolescents and recognize deviations. Assess the quality of each	AFT- RES	МК	SH	D-BED, SIM,PT	CHK,DOP S,DOPS,P-	F&S	Ι	V-SW	NLHP5.1

4,CO 5,CO 6	Dhatu and its deviations. Assess the Ayurveda attributes of Ahara in a given child. [Agni, Guna of Ahara, Satmya and Asatmya]. Educate parents and child regarding the importance of Ahara, Pathya, Apathya and other possible Ahara Gunas. Plan an appropriate diet for each child using nutritional principles and Ahara Niyamas and communicate the plan to caregivers.					CASE				
CO 3,CO 5	Analyse factors affecting Vyadhikshamatwa/ Bala and Immunity in the present era.	CAN	MK	КН	FC,DIS, BS	INT,PRN,C HK	F&S	Ι	-	NLHT5.1
CO 3,CO 5,CO 6	Enlist methods to improve Vyadhikshamatwa / Bala and Immunity including Oushadhas, Kriyakramas, Lehana, Rasayana, Prakarayoga, Samskara and Immunization	СК	МК	K	FC,SDL ,TBL	CR-W,CO M,CHK	F&S	Ι	-	NLHT5.2
CO 3,CO 4,CO 5	Counsel the parents about methods to improve Immunity in children.	AFT- RES	МК	SH	SIM,RP ,EDU	RS,CHK,P- RP	F&S	Ι	-	NLHP5.2
CO 4,CO 5,CO 6	List and explain the components, Key strategies, and highlights of the Reproductive Child Health (RCH) program. Explore Ayurveda concept, practices and scope of preconception and antenatal care aimed at ensuring the birth of a healthy child. Construct the care plan for the first 1,000 days of the child's life from conception until 2 years of age (24 months).	CAN	МК	КН	IBL,PrB L,TPW	CHK,COM, PRN	F&S	Ι	-	NLHT5.3
CO 5,CO 8	Explain the Universal Immunization Program	CC	MK	К	L&GD, ML,L_ VC	PRN,QZ ,O- GAME	F&S	Ι	-	LH
СО	Demonstrate the correct administration of different vaccines on a	PSY-	MK	SH	RP,D-	DOPS,OSC	F&S	Ι	-	NLHP5.3

4,CO 5,CO 7,CO 8	manikin. Observe the method of administration and recognize the adverse events following Immunization. Document Immunization in an Immunization record	GUD			M,PT	E,DOPS,C HK					
CO 5,CO 8	Explain the components of National Immunisation Schedule.	CC	МК	K	L&GD, L_VC,E DU	PRN,M- CHT,QZ	F&S	Ι	-	LH	

Non Lecture Hour Theory

S.No	Name of Activity	Description of Theory Activity
NLHT 5.1	Vyadhikshamatwa and Immunity I	Duration: 1 hour
		Pre-Preparation:
		1. The teacher informs the topic of discussion one week prior to the activity.
		2. The student is expected to come prepared for the group discussion.
		Key points for discussion:
		1. Concept of Immunity in the Pediatric Population
		2. Role of environmental factors, diet and regimen in Immune regulation
		Class Activity
		1. Students will be divided into groups (15-20 in one group)
		2. The facilitator will open the discussion
		3. Students are expected to discuss and analyze the factors affecting Vyadhikshamatwa
		4. Each group will present their opinions
		5. Consensus building; students will draw an opinion near the conclusion.
NLHT 5.2	Vyadhikshamatwa and Immunity II	Pre-Preparation:
		1. The teacher informs the topic of discussion 1 week before the activity.
		2. Students are expected to come prepared with the topic discussion.
		Key points for discussion:
		1. Concept of Immune modulation

		 2. Role of medicines and procedure-based therapies in Immune regulation 3. Concept of Lehana, Bala Rasayana, Prakarayoga and Samskaras 4. National Immunization Schedule - updated version Class Activity: Group Discussion 1 hour 1. Students will be divided into groups (15-20 in one group) 2. The facilitator will open the discussion 3. Students are expected to discuss the methods to improve Vyadhikshamatwa Presentation: 1 hour 1. Each group will present their opinions 2. Consensus building; students will draw an opinion near the conclusion Teachers Role:Student's performance will be evaluated using a checklist. Checklist- Yes/No 1. Pre-preparedness of the subject 2. Factors modulating immunity detailed 3. Role of Oushadha in Immune modulation detailed 4. Role of Kriyakrama in Immune modulation detailed 5. Role of Lehana and Rasayana in Immune modulation detailed 6. Role of Samskara in Immune modulation detailed 8. Active participation
NLHT 5.3	RCH programmes and Perinatal care for Healthy Child	Pre-preparation By the Teacher: The teacher informs the topic and group division (Min 6 to 10) 1 week before the class activity. By the Student: 1. Identify a Question: What factors in the Antenatal & Postnatal period have an impact on a child's growth and development? 2. Conduct Background Research: Explore topics such as nutrition, breastfeeding, immunization, preconception, antenatal, perinatal and post-natal care. Factors affecting Vyadhikshamatwa in children. Role of Garbhopakrama, Soothikopakrama and Balopakrama (first 1000 day care) in Immune modulation.

	 3. Formulate Hypothesis: Predict how specific factors (e.g., breastfeeding, maternal diet) might influence a child's physical and cognitive development. RCH programs and their effect on child health. Role of Garbhini, Soothika and Bala Upakrama in Immune modulation. 4. Plan and Conduct Investigations: Interviewing healthcare professionals about the impact of Antenatal & Postnatal on the child's growth and development. Surveys can also be planned in public. 5. Analyze Data: Analyze data from surveys or interviews to understand the impacts of various factors. Class activity Group Discussion: Ihour 1. Students sit in their respective groups and discuss on the assigned topic. Presentation: 1 hour 1. Communicate findings: Present findings through a report/presentation emphasizing the importance of Antenatal (Garbhopakrama) & Postnatal (Soothikopakrama & first 1000-day child care)in shaping a child's future. Teachers role: 1. Facilitate group discussion and guide students with references 2. Evaluate student's performance based on checklist/rating scale
--	--

Non Lecture Hour Practical

S.No	Name of Practical	Description of Practical Activity
NLHP 5.1	Nutritional Assessment in children	Duration: 3 hours
		Preparation /Pre-requisites
		By the teacher:
		1. Arrange Healthy children and malnourished cases/ simulated patient/ case vignettes in all age
		groups - infants, children and adolescents
		2. Equipment for recording anthropometry
		By the Student: Student is expected to come prepared with the knowledge of methods for assessment
		and classification of nutritional status, age-related nutritional needs of infants, children and
		adolescents, normal functions of each Dhatu, Vridhi Kshaya Lakshana, Ahara guna and Ahara niyamas
		Activity
		Clinical Classroom

NLHP 5.2	Parent Counselling on Immune modulation	Duration - 2 hours
		7. Educating parents regarding the importance of diet and regimen
		6. Attributes of Ahara assessed
		4. Nutritional status assessed 5. Quality of each Dhatu assessed
		3. Chronology of the case sheet maintained4. Nutritional status assessed
		2. Rapport building with the patient was good
		1. Pre-preparedness of the subject
		Checklist- Yes/No
		Teachers role: Teachers evaluate students' performance through a checklist/DOAP Form.
		6. Recording case in the record book.
		other Ahara gunas
		5. Role-play – Counsel the parent and child regarding the importance of Ahara, Pathya, Apathya and
		4. Presentation of the case [Each group will present the assigned case]
		3. Plan a diet schedule in the given case considering Ahara Niayamas
		2. Discuss Ahara Guna, level of Agni and other factors affecting poshana
		1. Discuss the assessment of nutritional status in the allotted group
		Clinical classroom -2 hours
		3. Clinical examination
		2. History taking (Details on diet and regimen)
		1. Rapport building
		Bedside - Case taking -1 hour
		Group V – Malnourished adolescent
		Group III – Healthy adolescent
		Group IV – Malnourished child
		Group III – Healthy child
		Group II – Malnourished infant
		Group I – Healthy infant
		be assigned a healthy/ malnourished case from a specific age group.

		Roles and Responsibilities1. One student will be assuming the role of parent of an Immunocompromised child2. One student will be assuming the role of physician providing Counselling to the parent Pre-preparation by the students 1. The Student has to be aware of the role of Oushadha, Ahara, Vihara, Rasayana and samskara inImmunity2. Read the references3. Students should have empathy and good communication skills Execution of Role Play: Enacting the role of the parent and the physician providing Counseling afterestablishing good rapport Feedback and Debriefing: The teacher evaluates students' performance based on a checklist/rating scale and provides inputs.The teacher summarises the points to be noted during Parental counseling. Checklist- Yes/No 1. Pre-preparedness of the subject2. Role of Oushadha, Ahara, Vihara, Rasayana and Samskara in Immunity explained3. Active participation4. Empathetic5. Good Communication skills6. Ensure that parents understand the instructions
NLHP 5.3	Immunization in children	Duration - 3 hoursPreparation /Pre-requites by teacher1. Identifying children who are fit for vaccination: Provide handouts 1 week before the session2. Procure the vaccines in the NIS3. Preparation of equipment and manikin and its sizes/numbers for vaccination4. Check for the expiry of vaccination if any5. Check for colour changes of vaccines if any6. Check if cold storage is maintainedPreparation /Pre-requites by studentThe student is expected to come prepared with the knowledge of the National Immunization schedule,

different vaccines with dosage schedules, mode of administration and contraindications
Observation (1 hour) Students are divided into groups (3-8 members in one group) and sent to
vaccination centre. Each group will be given a chance to observe vaccination in children.
1. Observe for fitness of vaccination
2. Observe the procedure of vaccination and check for any adverse events
Clinical classroom (2 hours)
1. Discuss different vaccines, with dosage schedules, mode of administration and contraindications
2. Discuss the adverse effects
3. Presentation of the case [Each group will present one case of vaccination]
4. Document the case in the record book.
5. Teacher the demonstrates the administration of vaccine on a manikin. Each group will be
demonstrates the entire procedure of vaccination on a manikin.
Teachers Role: Evaluation using checklist
Checklist- Yes/No
1. Checks for fitness for immunization
2. Choose the correct vaccines according to age
3. Check for expiry of the vaccine.
4. Administers vaccine on manikin efficiently.
 5. Teacher the demonstrates the administration of vaccine on a manikin. Each group will be demonstrates the entire procedure of vaccination on a manikin. Teachers Role: Evaluation using checklist Checklist- Yes/No 1. Checks for fitness for immunization 2. Choose the correct vaccines according to age 3. Check for expiry of the vaccine.

Topic 6 Kuposhana Rogas (Nutritional disorders) (LH :6 NLHT: 3 NLHP: 4)

A3	B3	C3	D3	E3	F3	G3	Н3	I3	K3	L3
CO 1,CO 2,CO 3	Define Malnutrition and Classify Undernutrition according to WHO. Define Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM). Describe the etio-pathogenesis, clinical features, complication and management of Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM)	CC	МК	К	CD,DIS ,L&PPT	T-CS,CBA, C-VC	F&S	II	-	LH
CO 2,CO 3	Define Failure to Thrive(FTT) and describe the etiopathogenesis, clinical features and management of a child with FTT	СК	МК	K	L_VC,C D,DIS	T-CS,CBA, PM	F&S	II	-	LH

S.No		Name of Activity	Descriptio	n of Tl	heory A	ctivity						
Non L	ecture H	our Theory										
CO 2,CO 3	2,CO anemia.		ey Ci	K	MK	K	LRI,L& PPT ,CD	PM,O- QZ,T-CS	F&S	II	-	LH
CO 2,CO 3,CO 6	 analyse the lakshana, samprapthi and management of Kumarashosha, Karshya and Parigarbhika 		and PS GU		MK	SH	CBL,PT ,RP	CHK,SP,P- CASE	F&S	II	-	NLHP6.1
CO 2,CO 3	Compare and analyse Kumarashosha, Karshya and Parigarbhika with SAM, MAM and Failure to thrive		ika CA	N	МК	KH	FC,BS, BL	CHK,DEB, PRN	F&S	II	-	NLHT6.2
CO 2,CO 3		Phakka Roga with Neuromotor disabilities, SAM, M ure to thrive and plan the management	IAM CA	N	МК	KH	CD,CB L,PBL	C-VC,T- CS	F&S	II	-	NLHT6.1
CO 2,CO 3,CO 6	Define l	nidana, samprapti, lakshana and chikitsa of Karshya. Parigarbhikam and explain the nidana, samprapti, laks titsa of Parigarbhikam		C	МК	КН	L&GD, CD,L_V C	INT,T-CS, C-VC	F&S	II	-	LH
CO 2,CO 3,CO 6		Kumara Shosha and explain nidana, samprapti, laksha titsa of Kumara Shosha	una CO	C	МК	K	L&GD, CD	CBA,T- CS,PM	F&S	II	-	LH
CO 2,CO 3		Phakka Roga and explain the Nidana, Bheda, Samprap a and Chikitsa of Phakka Roga.	pti, CO	C	MK	К	L&GD, RLE,C D	T-CS, C- VC,PM	F&S	II	-	LH

NLHP 6.1	Case Discussion: Malnutrition	Preparation /Pre-requisites
		By the Teacher:
		Arrange Real Case/ Simulated case/ Case Vignette
		By the Student:
		1. The student is expected to come prepared with etiopathology, symptomatology, management, and
		pathya-apathya of Malnutrition, Kumarashosha, Karshya and Parigarbhika.
		2. Growth chart, measuring tape, weight and height machine.
		Activity
		Students are divided into groups of 5-8 members and sent to OPD/IPD. Assign 2 cases to each group
		Bedside (in real case) Case taking/ Building the case – 2 hours
		1. Rapport building
		2. History taking
		3. Clinical Examination and Anthropometric evaluation
		Clinical classroom discussion - 2 hours
		Groups are expected to:
		1. Plot the measurement on a graph and analyze the growth of the child.
		2. Classify Malnutrition according to WHO.
		3. Analyse the etiopathology and symptomatology of Malnutrition with Karshya/ Parigarbhika/
		Kumara Shosha.
		4. Frame the Samprapti for the disease in the given case.
		5. Plan management and justify Samprapti Vigatana.
		6. Each group will present their case.
		7. Role-play – Explain the care plan, Pathya Ahara and Vihara to the child and parent.
		8. Record the case in a record book.
		Teachers role : Guide students in analyzing the case and evaluate using a checklist.
		Checklist- Yes/ No
		1. Rapport building established
		2. Empathy & communication skills noticed
		3. Record the case history in detail
		4. Performs clinical examination and anthropometric screening effectively
		5. Proper utilization and recording of the Growth chart

	7. M 8. Ex	ames Samp anagement xplain diet a	strategy fra nd regime	amed effe n to the pa	atient effect				B 10	
A3	7 Balaroga Pariksha Vidhi & Chikitsa Siddhantha (Pediati B3		D3	E3	F3	G3	H3		K3	L3
CO 3,CO 4,CO 8	Construct a Paediatric case taking format	САР	МК	КН	W,L&G D,DIS	INT,CWS	F&S	II	V-RN	LH
CO 2,CO 3,CO 8	Explain Bheshaja Matra for Shodana and Shamana in children	CC	МК	K	L&PPT ,ML,DI S	T-CS,WP	F&S	II	-	LH
CO 2,CO 3	Explain different methods of drug dose determination in paediatric population	CC	МК	К	TUT,L &GD,M L	P-PS,T-CS, O-GAME	F&S	II	-	LH
CO 2,CO 3	Demonstrate calculation of different drug dosages in paediatric conditions.	PSY- MEC	МК	SH	PBL,ED U,PSM	T-CS,P- PS,CHK	F&S	II	-	NLHP7.1
CO 2,CO 3,CO 8	Explain general treatment principles in children	CC	МК	К	L&GD, TUT	DEB,WP,C R-W	F&S	II	-	LH
CO 2,CO 3	Analyse Vedana Vijnana and observe various clinical presentations	CAN	МК	КН	BS,DIS, L&GD	DEB,INT	F&S	II	-	LH

CO 2,CO 4,CO 7		ate examination of Dosha, Dhatu, Koshta, Agn rakriti, Rogamarga of each disease in Paediatri		PSY- MEC	МК	SH	SIM,PT, D-BED	CHK,P- CASE,SP	F&S	II	-	NLHP7.2	
CO 2,CO 3		a possible Samprapti for various diseases (usin porvarupa, Roopa and Upashaya)	ng	САР	МК	КН	PT,FC, CBL	CHK,T- CS,M-CHT	F&S	II	-	NLHP7.3	
CO 2,CO 3,CO 6,CO 7	Perform clinical case taking including history taking, clinical examination, diagnostic workup, analysis of Samprapti Ghatakas and Chikitsa Nirnaya.		nical	PSY- GUD	МК	SH	SIM,D- BED,PT	CWS ,CHK ,P-CASE	F&S	П	-	NLHP7.4	
CO 2,CO 4,CO 6,CO 8	Educate the caretaker on the prescription including name of medicine, mode of administration, anupana and time of administration.		of the	AFT- RES	МК	SH	SIM,RP ,TBL	CHK,SP,P- RP	F&S	П	-	NLHP7.5	
CO 2,CO 3,CO 6	2,CO 3,CO discuss their medicinal uses		ce and	СК	DK	К	FV	P-ID,QZ ,O- QZ	F	II	V-DG	NLHP7.6	
Non L	ecture Hou	ur Theory											
S.No	N	lame of Activity	Desc	ription of	Theory A	Activity							
Non L	ecture Hou	ur Practical	-										
S.No	N	ame of Practical	Desc	Description of Practical Activity									
NLHP '	7.1 C	alculation of Pediatric Drug Doses	Dura	tion - 2 ho	urs								

		 Pre-Preparation By the teacher: Arrange real case/case vignette. Provide reference or handout on overview of Posology By the Student: The student is expected to study drug dosage schedules in different ages with different Kalpanas in specific therapeutic indications like Shamana and Shodhana Activity Students are divided in groups Assigned 1 real case / Case Vignette Students are expected to- Record the weight of the child Assess the status of Agni and Koshta Calculate drug dosage in different ages/ Kalpanas / therapeutic indications Record dosage, Anupama and Oushadha kala Discuss the assessment of drug dose in the allotted group Discuss role of age, level of Agni, other factors affecting dosage like Oushadha Kalpana and treatment indications like Shamana, Sodhana Teacher's Role: The teacher will assess using a checklist. Checklist - Yes/ No Assess the status of Agni and Koshta effectively. Calculated drug dosage in different ages, Kalpanas & therapeutic indications efficiently. Explains dosage schedule, Anupana and Oushadha kala in a given case accurately.
NLHP 7.2	Application of Samprapti Gatakas in a Pediatric Case: Part I	Duration: 2 hours Pre-preparation: By the Teacher: Arrange the real case/Simulated case/ Case Vignette. Provide an overview of Samprapthi ghatakas By the Student : The student is expected to know Samprapti Ghatakas Activity Students are divided into groups (3-8 members in one group) and sent to OPD/ IPD. Each group will be given cases for assessment

		 Bedside: 1 hour 1. Rapport building 2. Clinical examination 3. Comment on Prakruti of child 4. Assess the Dosha and Dhatu 5. Assess the status of Agni, Koshta 6. Frame Samprapti of disease and comment on Rogamarga Clinical classroom: 1 hour 1. Group discussion about Vyadhi Ghatakas 2. Justify analysis of Vyadhi Ghatakas with logical explanations and classical references 3. Presentation of the case [Each group will present one case] 4. Recording the case in the record book.
NLHP 7.3	Application of Samprapti Gatakas in a Pediatric Case: Part II	 Duration: 1 hour Pre-preparation: By the Teacher: Arrange the real case/Simulated case/ Case Vignette. Provide an overview of Samprapthi Ghatakas By the Student : The student is expected to know Nidana Panchaka and Samprapti Ghatakas Activity Students are divided into groups (3-8 members in one group) and sent to OPD/ IPD. Each group will be given cases for assessment Bedside – Rapport building Clinical examination Analyzing the history and clinical examination findings concerning Samprapti Ghatakas Frame Samprapti of disease and comment on Nidana Panchaka Group discussion about Nidana Panchaka and Vyadhi Ghatakas Justify the analysis of Vyadhi Ghatakas with logical explanations and classical references Discussion on Samprapti and Nidana Panchaka

		5. Recording the case in the record book.
NLHP 7.4	Clinical case taking	Duration - 9 hours
		(One group should analyze, present and record minimum 5 cases)
		Pre-preparation:
		By the Teacher: Arrange and assign the real case/Simulated case/ Case Vignette.
		By the Student: Student is expected to have knowledge about clinical case taking and Samprapti
		ghatakas.
		Activity
		Students are divided into groups (3-8 members in one group) and sent to OPD/ IPD. Each group will
		be assigned cases for analysis
		Bedside
		1. Rapport building
		2. History taking
		3. Clinical examination
		4. Analyse evidence from history and clinical examination findings in respect to Samprapti Ghatakas
		5. Frame Samprapti of disease and comment on Nidana Panchaka
		Clinical classroom
		1. Group discussion about Vyadhi Ghatakas
		2. Justify the analysis of Vyadhi Ghatakas with logical explanations and classical references
		3. Discussion on Samprapti and Nidana Panchaka
		4. Perform the diagnostic workup with investigations and differential diagnosis
		5. Frame a management protocol for the disease (Teacher will provide a prescription with logical
		explanations)
		6. Discuss the Upasaya and Anupasaya of the given treatment.
		7. Presentation of the case [Each group will present a Minimum of 5 cases]
		8. Record the case in a record book.
NLHP 7.5	Conseling regarding patient care	Duration - 1 hour
		Purpose – Sensitise parents regarding the administration of medicine.

		Pre -Preparation By the Teacher: Arrange prescriptions of common diseases. By the Student: Students should have the knowledge about the common medications, pediatric posology, Anupana, Oushadhakala and mode of administration. Activity: Students are assigned prescriptions and are expected to role-play randomly. Roles and Responsibilities 1. One student will be assuming the role of parent 2. One student will assume the role of Kaumarabhritagyna, educating to the parent on the administration of medicine. 3. Execution of Role Play Teacher role: Feedback and Debriefing Summarise the points to be noted during Parental education on the administration of medicine.
NLHP 7.6	Pediatric Ethobotonical Survey of Herbal Garden	 Duration - 1 hour Pre-Preparation: By the Teacher: Identify common single drugs that can be used in Paediatric practice in Herbal garden and plan the visit. By the student: The student is expected to know about commonly used single drugs in Paediatric Practice Activity Herbal garden: 40 mins 1. Teachers introduce the single drugs that can be used in Paediatric practice in Herbal garden 2. Students are divided into groups (3-8 members in one group) and sent to the Herbal garden. Each group will be given a drug for a detailed study 3. Plant identification with morphological features 4. Identify the medicinal part of the plant 5. Rasa, Guna, Veerya, Vipaka, Prabhava and Amayika Prayoga Clinical classroom: 20 mins 1. Discuss the Pharmacodynamics 2. Group discussion about different uses of the drug, dose and Anupama 3. Justify with classical references if any

Topic 8	8 Kulaja and Sahaja Rogas (Genetic and Congenital Disord	ers) (LH	:5 NLH7	Г: 2 NLH	(P: 5)					
A3	B3	C3	D3	E3	F3	G3	H3	I3	K3	L3
CO 2,CO 3	Describe the clinical presentations of Cleft Palate, Cleft Lip and Tracheo-Esophageal Fistula.	СК	DK	K	TUT,L &PPT	QZ ,P-ID, C-VC	F&S	II	-	LH
CO 2,CO 3	Describe the clinical presentations of Spinal Dysraphism and Congenital Talipes Equinovarus.	СК	DK	K	L_VC,L &PPT	O-QZ, C- VC	F&S	II	-	LH
CO 2,CO 3	Describe the clinical presentations of Congenital Hypertrophic Pyloric Stenosis and Congenital Anomalies of Anus.	СК	DK	K	TUT,L &PPT ,L_VC	P-ID,O- GAME, C- VC	F&S	II	-	LH
CO 2,CO 3	Describe the clinical presentations of Congenital Heart Disease.	СК	DK	K	L&PPT ,L_VC, LRI	O-QZ,P-ID, C-VC	F&S	II	-	LH
CO 2,CO 3,CO 6,CO 8	Analyse the scope of Kriyakrama (Procedure based therapies) and Oushadhas in Sahaja Vyadhis	CAN	DK	К	CBL,FC ,EDU	PRN,CHK, CBA	F&S	П	-	NLHT8.1
CO 2,CO 3,CO 8	Recognise the indications of surgical intervention and referral criteria in different Congenital and Chromosomal disorders.	CAN	DK	КН	CBL,DI S,FC	CBA,SBA, CHK	F&S	II	-	NLHT8.2
СО	Identify the Chromosomal abnormality, clinical features,	CAN	MK	КН	FC,LRI,	P-CASE, C-	F&S	II	_	NLHP8.1

2,CO 3,CO 8	<u> </u>	sis, risk factors and and plan the management in syndrome	a case of				CBL	VC,CHK				
CO 2,CO 3,CO 8	diagnosis, risk factors and plan the management in a case ofDown syndrome. Interpret normal Karyotype and recognize			CAN	МК	КН	LRI,FC, CBL	C-VC,CH K,P-CASE	F&S	II	-	NLHP8.2
CO 2,CO 3,CO 4,CO 8	 2,CO Ambu and Beeja) in preventing congenital diseases. 3,CO Educate the caregivers about the scope of Ayurveda in the prevention of congenital anomalies through preconception care. 			AFT- RES	DK	SH	BS,RP, FC	CHK,P- RP,CR-W	F&S	П	-	NLHP8.3
CO 2,CO 3,CO 6	 2,CO 3,CO 6 Dystrophies. Describe the etiopathogenesis, clinical features and management of Duchenne Muscular dystrophy (DMD). Derive complementary and alternative treatment protocol to DMD. 		САР	МК	К	TUT,DI S,L&PP T	T-CS, C- VC	F&S	II	-	LH	
S.No		Iour Theory Name of Activity	Desc	rintion of	Theory /	Activity						
NLHT	8.1	Procedure based therapies and Oushadhas in Sahaja Vyadhis	Dura Pre-p By th persp By th therap Activ 1. Stu 2. Stu	Description of Theory ActivityDuration - 1 hourPre-preparationBy the teacher: Arrange the problem /case to be solved & provide an perspective on Sahaja Vyadhis and procedure-based therapies throughBy the Student: Student is expected to study Sahaja Vyadhis, general therapeutic indication of Kriyakrama (Procedure based therapies)Activity1. Students are divided in groups and assigned a case vignette to each general therapeutic gather in groups and are expected to –A. Note clinical features of Sahaja Vyadhis and interpret the Dosha, Discrete the				through h , general tr ies) to each gr	andouts reatmen coup	s or PPT. t guideline	es and a	

		 B. Plan management strategy and suitable procedure-based therapies C. Discuss the management plan with the selection of medicines D. Discuss the Samprapti Ghatakas of the specific Sahaja Vyadhi E. Discuss specific stages of the disease and change in the selection of Kriyakrama and analyze the Samprapti Vighatana
NLHT 8.2	Surgical intervention and referral criteria of Congenital and Chromosomal disorders	Duration - 1 hour Pre-preparation By the teacher: The teacher introduces the students to the problem /case to be solved & provides an overview of the scope of surgical intervention in Sahaja Vyadhis one week before the activity. Divide the students in group and assign one case to each group. By the Student: Student is expected to study Sahaja Vyadhis and management strategy. Activity 1. Students gather in group 2. Students are expected to discuss- A. Note clinical features and clinical examination findings of given Sahaja Vyadhis B. Screen for any emergency situations if any C. Screen for the scope of surgical intervention in the given case. D. Discuss the referral criteria in the case E. Counsel the parent for referral and give a proper Referral card F. Present the findings to the class.
Non Lecture	Hour Practical	

Name of Practical	Description of Practical Activity
Turner syndrome	Duration - 1 hour
	Pre-preparation
	By the teacher: Provide an overview of Turner syndrome and its Ayurveda perspective through
	handouts/PPT/Pre-recorded Video.
	By the student: Student is expected to study Turner syndrome and analyse the Samprapti Ghatakas of

		the disease Activity 1. Students are divided in groups 2. Provide 1 real case/ simulated case/ case vignette/ case video to each group 3. Students are expected – A. Perform/record clinical examination of given Turner syndrome case (Bedside if real case) B. Analyze the Samprapti Ghatakas C. Discuss the Karyotype report D. Discuss the management protocol considering the Samprapti Ghatakas E. Enlist the risk factors and complications
NLHP 8.2	Down syndrome	Duration - 3 hoursObjective:1. Discuss the genetic composition and clinical features of Down syndrome2. Frame diagnostic workout including Karyotyping3. Frame management protocol4. Enlist the risk factors and complicationsPre-preparationBy the teacher:1. Provide an overview of Down syndrome and its Ayurveda perspective through handouts/PPT/Pre-recorded Video.2. Divide the students in group and assign one real case/case vignette (Different presentation of down syndrome to each group)By the Student: The student is expected to study Down syndrome and analyze the Samprapti Ghatakas of the diseaseBedside (in real case) 1 hour1. Students are divided into 5- 6 groups and assigned a case2. Students are expected to-A. Take the historyB. Perform/record clinical examinationC. Check for any associated diseases

		 D. Check whether antenatal screening was done E. Check for etiology and predisposing factors F. Collect the Karyotype report G. Enlist the risk factors and complications Clinical classroom discussion and presentation - 2 hours Each group will be allotted a specific topic for discussion and will be given 10 minutes to present their findings 1. Discuss the clinical features and examination findings of given Down syndrome 2. Discuss the etiology and predisposing factors 3. Discuss the antenatal screening measures 4. Discuss the common associations 5. Discuss the diagnostic workup 6. Discuss the Samprapti Ghatakas and frame management strategy 8. Analyze the risk factors 9. Conclusion and summarise the disease by the teacher. Teacher Role: Facilitate group discussion and guide on interpretation of investigation reports.
NLHP 8.3	Prevention of Congenital anomalies	Duration - 1 hour Pre-preparation By the Teacher: 1. Divide the students in 2 groups and assign the activity 1 week prior. 2. Pre-validation of role play. Roles and Responsibilities 1. One student will be assuming the role of parent 2. One student will assume the role of Kaumarabhritagyna educating the caregiver. By the Student: 1. The student has to be aware of the details of preconception care for the prevention of Congenital anomalies 2. Analyze the role of preconception care (ideal Ritu, Kshetra, Ambu and Beeja) in preventing congenital diseases.

Topic	1. First preven 2. Sec Counst Feedb Summ	nting congroup ond group beling after back and I harise the p Kshetra, A	esents the enital disea executes t establishin Debriefing points to be mbu and B	ases. he Role P ng a good e noted du geeja) in p	lay. Enactir rapport ring Parenta reventing c	on care (ideal ng the role of t al education ar ongenital dise	he parent	and the of prec	Physician onception	providing
A3	B3	C3	D3	E3	F3	G3	H3	I3	K3	L3
CO 2,CO 3	Explain Lakshana(clinical features) and Chikitsa(management) of Rohini(Diphtheria), Masurika(Chicken pox), Romantika(Measles).	CC	МК	К	LRI,L& PPT ,CD	T-CS, C- VC,WP	F&S	II	-	LH
CO 2,CO 3	Explain Lakshana(clinical features) and Chikitsa(management) of Karnamoola Shotha(Mumps), Hand foot Mouth Disease(Masurika).	CC	МК	К	CD,LRI ,L&PPT	QZ , C- VC,T-CS	F&S	II	-	LH
CO 2,CO 3	Describe etiopathogenesis, clinical features, complications and management(Chikitsa) of Malaria, Hepatitis and Dengue.	СК	МК	К	LRI,L& GD,CD	T-CS, C- VC,O-QZ	F&S	II	-	LH
CO 2,CO 3	Describe etiopathogenesis, clinical features, complications and management(Chikitsa) of Whooping cough and Tuberculosis.	СК	МК	K	X-Ray, L&GD, CD	INT,T-CS	F&S	Π	-	LH
CO 3,CO 6,CO 8	Discuss the management(Chikitsa) of tuberculosis with the caregivers.	AFT- RES	МК	SH	TBL,RP	CHK,RS	F&S	II	-	NLHT9.1

CO 2,CO 3	Describe pathogenesis, clinical features, diagnosis and management(Chikitsa) of Tetanus and Meningitis.	СК	МК	К	L&PPT ,LRI	INT, C- VC,PM	F&S	II	-	LH
CO 2,CO 3	Discuss concept of Graha Roga in context of infectious diseases. Describe Samanyalakshana Purvarupa and Bheda of Graharogas.	САР	DK	KH	TBL,DI S,PER	INT,CHK, RS	F&S	II	-	NLHT9.2
CO 3,CO 6	Analyze the concept and management of Jwara with respect to different types of fever. Identify Dosha and Dushya involved in different types of fevers. Enlist Oushadha Yogas indicated in Jwara. Enlist the ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used in Jwara Chikitsa.	CAN	МК	КН	FC,DIS, TBL	RS,CL- PR,CHK	F&S	II	-	NLHT9.3
CO 2,CO 3	Explain Nidana, Lakshana, Samprapti, Bheda and Chikitsa of different types of Krimi.	CC	MK	K	TUT,L &GD,C D	WP,T-CS	F&S	II	-	LH
CO 2,CO 3	Describe etiopathogenesis, clinical features, complications and management of helminthic infestations in children.	СК	MK	K	L&PPT ,CD	T-CS,PUZ	F&S	II	-	LH
CO 2,CO 3	Enlist Oushadha yogas used for Krimi Chikitsa. Enlist ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used in Krimi Chikitsa and analyze its Samprapti Vighatana.	CC	МК	K	TBL,CB L,FC	CL-PR,RS, CHK	F	II	-	NLHT9.4
CO 2,CO 3,CO 4	Examine a case of Aupasargika Jwara(Fever of Infectious origin) and Krimi Roga. Analyze Nidanpanchaka, Management(Chikitsa) & Samprapti Vighatana of Aupasargika Jwara's.	PSY- GUD	МК	SH	LRI,D- BED,C BL	P-CASE,C HK,CWS	F&S	Π	-	NLHP9.1

6,CO 1 8 1	,CO management of Jwara. Perceive two Kriyakrama used in the		PSY- SET	МК	КН	D-M,D	CHK,INT	F&S	II	-	NLHP9.2	
Non Lecture Hour Theory						_						
S.No	Name of Activity	Desc	ription of	f Theory A	Activity							
NLHT 9.	9.1 Management(Chikitsa) of tuberculosis in children.	Pre-pi By the 1. Div A. Gro Enlist that m B. Gro Post A C. Gro Center 2. Pro 3. Val By the 1. Stue directe 2. Rol Activi 1. Stue 2. Pres 3. Rol	roup 1: Con at the complemative may happen roup 2: Alte AKT Mana roup 3: List er) through ovide referent alidate the r he Student : udents are even ted by the t oble play gro vity: udents discu- esentation co oble play by a of Teacher	on: r: class into 3 omplementa blications of on in tubercu- ternative ma- agement, P- st the criteri in role-play. rences for p- role-play so t: expected to teacher. oup is expec- cuss with tho of the assign group 3 -10	ary manage of tuberculo culosis and hanagemen Pathya-Apa ria for refer preparation script. o prepare t ected to wr he groups a gned topic 10 mins	gement appro- osis in the a l enlist the p nt approach athya and R erral and the n the topic for rite the scrip assigned -10 c by the grou	ng the topic to a roach in tuberci anatomy & phy possible Ayurv in tuberculosis Rasayana (Adju e importance of or presentation. pt and validate 0 mins oup leader -20 m	culosis ysiology of veda manag is uvant appro f case regis . Gather inf e before the mins	f lungs a gement. oach) stration formation	and Side ef (District T on using re	ffects of AKT Fuberculosis	

NLHT 9.2	Concept of Graha Roga in context of infectious diseases.	Duration: 1 Hour Pre-Preparation: By the Teacher: 1. Dividing the class into groups and assigning one Graha to each group one week prior to the activity. 2. Guide the students about references and guidelines for comparison with one example. By the Student: 1. Students are expected to study literature regarding Graha Roga and Samanya Lakshana Purvarupa and Bheda of Graharoga. 2. Comparison of different Graha Rogas with infectious and noninfectious diseases prior to class. Activity: 1. Students discuss in groups -10 mins 2. Presentation of each Graha Roga and related infectious and noninfectious diseases by group leader – 45 mins 3. Compilate the discussion of all the groups.
NLHT 9.3	Management of different type of Jwara.	Duration: 1 Hour Pre-preparation By the Teacher: Dividing the class into groups and assigning each group with one type of Jwara one week prior to class activity. By the Student: 1. Students are expected to study the type of Jwara assigned to them. Compare with different types of fever 2. Identify Dosha and Dushya involved. 3. Enlist Oushadha Yogas indicated in Jwara. 4. Enlist the ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used in Jwara Chikitsa. 5. Understand the Samprapti Vighatana Class Activity 1. Students discuss with the groups assigned -10 mins 2. Presentation of assigned topic by the group leader -40 mins

		 3. Open discussion between group and feedback 4. Compile discussion of all the group. Role of the Teacher: Evaluate the students using checklist/rating scale. Checklist: Yes/No 1. Pre-preparedness on the topic 2. Proper use of recourses provided 3. Discuss and Compare Jwara type with different types of fever. 4. Identify Dosha and Dushya involved in Jwara. 5. Enlist Oushadha Yogas indicated in Jwara 6. Enlist the ingredients and indications of Samanya and Vishesha Oushadha Yogas use in regional practice 7. Discuss the Oushadha Yogas and Justify Samprapti Vighatana 8. Shows active collaboration in group and justifies the queries raised
NLHT 9.4	Oushadha yogas used for Krimi Chikitsa.	 Duration: 1 Hour Pre-preparation By the Teacher: Preparation of Case Vignette (Different type/presentation of Krimi) Divide the Class into groups (Min 5 to Max 8). Assign one/two case to each group one week prior to the class activity. By the Student: Study the Krimi Roga and its Chikitsa in detail. Analyse the case assigned Class Activity: Students discuss with the groups assigned -10 mins Presentation of case by the group leader - 40 mins Analyze the case assigned Bignose the case Enlist Oushadha yogas used for Krimi Chikitsa. Enlist ingredients and indications of at least two Samanya Oushadha Yoga and Vishesha Yogas used in Krimi Chikitsa and its role in Samprapti Vighatana.

		5. Open discussion between group and summarize the key points by the teacher.					
Non Lecture Hour Practical							
S.No	Name of PracticalDescription of Practical Activity						
NLHP 9.1	Case Discussion: Auspasagika Jwara and Krimi Roga	Duration: 2 Hours Preparation /Pre-Requisites By the teacher: 1. Scheduling the case taking and arranging the case (Real Patient / simulated patient/ Case Vignette 2. Preparing the checklist for evaluation By the student: 1. Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa of Aupasargika Jwara and Krimi Roga 2. Rapport building, proper history taking, thorough examination, appropriate Investigation 3. Present their views in clinical classroom discussion Activity In the clinical classroom:Students are divided in groups (5-8 members in one group) and sent to OPD/IPD for Bedside - Case taking Bedside: Case taking as per the format(Real case) 1. Building rapport with patient 2. History taking 3. Clinical examination In the clinical classroom: 1. Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, plan investigations if needed & identify the Samprapti Ghatakas 2. Plan the management and justify the Samprapti Vighatana 3. Presentation of the case [Each group will present one disease or any sub-point of the case] Role-Play 1. Explain the care plan, Ahara Vihara & prognosis to parent. 2. Recording the case in record book. <t< td=""></t<>					

		 Checklist: Yes/No 1. Pre-preparedness of the topic 2. Rapport building established 3. Explain the history and symptoms of Aupasargika Jwara in sequence. 4. Explain the history and symptoms of Krimi Rogas in sequence. 5. Local and systemic clinical examination performed. 6. Explain the examination findings accurately. 7. Explain Nidana Panchaka and identify the Dosha-Dushya. 8. Plan Investigations and finalize the diagnosis. 9. Plan the management and Justify Samprapti Vighatana. 10. Explain the care plan and Ahara Vihara to the parent. 11. Explain the prognosis to the parent. 12. Showed active collaboration in group and justifies the queries raised.
NLHP 9.2	Pathya and Kriyakrama used in Jwara and Krimi.	 Duration: 1 Hour Activity 1: 40 minutes Perceive two Kriyakrama used in the management of Jwara. Perceive two Kriyakrama used in the management of Krimi. Pre-preparation: By the Teacher: Identify the Kriyakrama (Procedure based therapy) used in Jwara Identify the Kriyakrama (Procedure based therapy) used in Krimi Scheduling the demonstration and arranging the patient. By the Student: Students are expected to study the Jwara and Krimi and its management in detail prior to the Activity. Activity: Teacher/therapist demonstrate the kriyakrama on the patient. Students are expected to observe – Pre-procedure specific to procedure (like Handwashing, Wearing Cap/gloves/mask if needed, Collecting the ingredients and equipment's, preparation of medicine, getting the consent, fitness certificate if required, counselling the patient and caretaker)

	 B. Procedure (Technique of procedure, communication with the patient and caretaker) C. Post procedure specific to procedure and explaining the Do's and Don't to follow. 3. Assignment: Write the mode of action/Samprapti Vigatana of the procedure) Activity 2: - 20 mins Plan Ahara and Vihara for different types of Jwara. Plan Ahara and Vihara for different types of Krimi. Pre-preparation: By the teacher: 1. Dividing the class into 2 groups and assigning disease to each group one week prior to the class. 2. Guiding the students to prepare the Ahara and Vihara chart of the particular disease assigned. By the student: Students are expected to study the disease in detail and prepare the Ahara Vihara chart based on the guidelines given by the teacher. Activity: 1. Each group present their Ahara and Vihara chart of the particular disease assigned. 2. Peer discussion on the chart.
--	---

Topic 10 Swasana Rogas [Disorders of Respiratory system] (LH :5 NLHT: 4 NLHP: 6)

A3	B3	C3	D3	E3	F3	G3	Н3	I3	K3	L3
CO 2,CO 3	Describe possible etiology, clinical features, diagnosis and management of Recurrent Upper Respiratory Tract Infections i) Common Cold	СК	MK	K	L&PPT ,CD	PM,CBA,T- CS	F&S	II	-	LH
CO 2,CO 3	Describe the etiology, clinical features, diagnosis and management of Recurrent Upper Respiratory Infection ii) Tonsillitis. Describe the etiology, clinical features, diagnosis and management of Recurrent Upper Respiratory Infection iii) Pharyngitis	СК	МК	К	CD,L& PPT	PM,T-CS, C-VC	F&S	II	-	LH
СО	Describe the etiology, clinical features, diagnosis and	СК	МК	К	X-Ray,	PM,T-CS	F&S	II	-	LH

2,CO 3	management of Recurrent Upper Respiratory Infection iv) Adenoid Hypertrophy.				L&PPT ,CD					
CO 2,CO 3	Describe the etiology, clinical features, diagnosis and management of Pneumonia.	СК	МК	K	X-Ray, CD,L& PPT	C-VC,PM, T-CS	F&S	II	-	LH
CO 2,CO 3	Describe the etiology, clinical features, diagnosis and management of Bronchial Asthma.	СК	МК	K	X-Ray, L&PPT ,CD	C-VC,PM, INT	F&S	II	-	LH
CO 2,CO 3	Enlist Oushadha yogas used for Pratishaya, Kasa, Shwasa. Enlist the ingredients and indications of atleast two Samanya Oushadha Yogas and two Vishesha (condition specific) Yogas used in Pratishaya, Kasa, Shwasa Chikitsa and analyze its Samprapti Vighatana.	CAN	МК	КН	TBL,FC ,DIS	CHK,INT, QZ	F	П	-	NLHT10.1
CO 4,CO 6,CO 8	Plan and explain Ahara and Vihara for Pratishaya, Kasa, Shwasa.	AFT- RES	МК	SH	RP,PER	CHK,P- RP,RS	F&S	Π	-	NLHT10.2
CO 2,CO 3,CO 7	Perform otoscopic examination of ear. Perform throat examination in the case of Adenoid Hypertropy, Pharyngitis or Tonsillitis.	PSY- GUD	МК	SH	L_VC, W,KL, D	C-VC,DOP S,CHK,DO PS	F&S	II	H-SHL	NLHP10.1
CO 2,CO 3,CO 4	Demonstate examination, diagnosis and plan Chikitsa for a case of Pratishyaya.	PSY- GUD	МК	SH	RP,D-B ED,CB L	P-CASE,R S,CHK	F&S	II	-	NLHP10.2
CO 2,CO	Demonstate examination, diagnosis and plan Chikitsa for a case of Kasa. Identify the referral criteria for Kasa Roga.	PSY- GUD	МК	SH	D-BED, RP,CBL	CHK,CWS ,P-CASE	F&S	II	-	NLHP10.3

3,CO 4 CO 2,CO 3,CO 4		strate examination, diagnosis and plan the Chikitsa Shwasa. Identify the referral criteria for Shwasa R		PSY- GUD	МК	SH	CD,D-B ED,CB L	Mini-CEX, P- CASE,CH K	F&S	II	-	NLHP10.4	
CO 7,CO 8	COPerceive two Kriyakrama used in the management of7,COPratishaya, Kasa & Shwasa. Analyse Samprapti Vighatana in		in PSY-	МК	KH	D-BED, D-M	CHK,INT, QZ	F&S	II	Н-РК	NLHP10.5		
Non L	ecture I	Hour Theory		•	1	1			1		1		
S.No		Name of Activity	Desc	Description of Theory Activity									
NLHT	HT 10.1Oushadha Yoga in Pratishaya, Kasa, Shwasa Pre-Preparation: By the Teacher: 1. The teacher will give an overview of the formulations used in Pratishaya, Kasa, Shwasa their rationale. 2. Select any two relevant formulations used in Pratishaya, Kasa, Shwasa, which are refe Ayurveda Classical Texts and are frequently used by practitioners of the respective state. By the Student: Students are expected to come with knowledge of the management of P Kasa, Shwasa. Activity: 1 Hour 1. Discuss the list of formulations used in Pratishaya and highlight the two relevant form in Pratishaya. 2. Explain the formulation 3. Discuss the conceptual meaning and interpretation. 4. Divide the students in group 5. Analyze the Samprapti Vighatana in group. 6. Encourage questions and discussion in group.					renced in region. ratishaya,							

		 Discuss the list of formulations used in Kasa, Shwasa, and highlight the two relevant formulations used in Kasa and Shwasa. Explain the formulation Discuss the conceptual meaning and interpretation. Divide the students in group Analyze the Samprapti Vighatana in group.
		6. Encourage questions and discussion in group.
NLHT 10.2	Ahara and Vihara for Pratishaya, Kasa, Shwasa	Pre-preparation: By the Teacher: 1. Divide the class into 3 groups 2. Assign 1 disease to each group (eg Pratishaya, Kasa, Shwasa) 3. Provide guidelines to prepare the Ahara Vihara Chart, role play and highlight the important component of communication. 4. Validate the Role Play script prepared by the student Prior to the activity. 5. Ensure the language is simple and easy to understand by the local people. By the Student: 1. Students is expected to understand the disease, Ahara Vihara which is indicated for the particular disease assigned to them. 2. Student is expected to prepare the Ahara Vihara chart and the script of the role and get it validated by the teacher prior to the activity Activity: Group discussion 1 hour 1. Students assemble in groups assigned. 2. Group leader present the Ahara Vihara Chart in different types of Pratishaya, Kasa and Shwasa. Activity: Role play 1 hour 1. Each group executes the role play Role of a Teacher: Teacher evaluates students' performance based on a checklist/rating scale. Checklist: 1. Clear explanation of the chart 2. Plans the Diet Chart effectively. 3. List of activities that can be performed

		 4. Mentions Satvavajaya Chikista if needed 5. Yoga/Pranayama (Demonstration and explanation) 6. Any internal medications (Explain the importance, dose, route and frequency) 7. Demonstrates empathy and understanding of the patient's emotional state 8. Actively engage the patient, allowing for questions and checking if the caretaker/patient understood. 9. Maintains appropriate eye contact throughout the interaction/presentation 10. Maintains professionalism throughout the interaction/presentation.
	Hour Practical	
S.No	Name of Practical	Description of Practical Activity
NLHP 10.1	Examination of Ear and Throat	 Duration - 1 Hour Pre-Preparation By the Teacher: Keeping the examination video ready Keeping the Otoscope and other tools required for throat examination ready Dividing the class into groups Arranging the real cases/clinical video cases and assigning them to each group. By the student: Studying the ENT examination before the session Activity Teacher displays the video of Otoscopic and throat examination Special precautions and handling the child shall be explained by the teacher. Teacher explains the interpretation of examination finding in different diseases Students gather in the groups assigned Examine the assigned patient/ interpret the examination finding in the given video cases
NLHP 10.2	Case Discussion: Pratishyaya.	Duration: 1 Hour Preparation /Pre-Requisites By the Teacher: Scheduling the case taking and arranging different type of Partishaya case (Real

		 Patient / simulated patient/ Case Vignette) By the student: Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa of Pratishyaya Rapport building, proper history taking, thorough examination, appropriate Investigation ACTIVITY Clinical classroom: Students are divided in groups (5-8 members in one group) and sent to OPD/IPD for Bedside - Case taking Bedside: Case taking as per the format Building rapport with patient History taking Clinical examination In clinical classroom: Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, plan investigations if needed & identify the Samprapti Ghatakas Plan the management and justify the Samprapti Vighatana Presentation of the case [Each group will present any one sub point of the case] ROLE-PLAY – Explain the care plan, Ahara vihara & prognosis to parent.
NLHP 10.3	Case Discussion: Kasa.	 Duration: 1 Hour Preparation /Pre-Requisites By the teacher: Scheduling the case taking and arranging different types of Kasa Case (Real Patient / simulated patient/ Case Vignette) By the student: Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa of Kasa Rapport building, proper history taking, thorough examination, appropriate Investigation ACTIVITY In clinical classroom: Students are divided in groups (5-8 members in one group) and sent to OPD/IPD for Bedside - Case taking Bedside: Case taking as per the format

		 Building rapport with patient History taking Clinical examination In clinical classroom: Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, plan investigations if needed & identify the Samprapti Ghatakas Plan the management and justify the Samprapti Vighatana Presentation of the case [Each group will present any one sub point of the case] Identify the referral criteria for Kasa Roga. ROLE-PLAY – Explain the care plan, Ahara vihara & prognosis to parent. Recording the case in record book.
NLHP 10.4	Case Discussion: Shwasa.	Duration: 1 Hour Preparation /Pre-Requisites By the teacher: Scheduling the case taking and arranging different types of Shawsa Case (Real Patient / simulated patient/ Case Vignette) By the student: 1. Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa of Shwasa 2. Rapport building, proper history taking, thorough examination, appropriate Investigation ACTIVITY In clinical classroom: Students are divided in groups (5-8 members in one group) and sent to OPD/IPD for Bedside - Case taking Bedside: Case taking as per the format 1. Building rapport with patient 2. History taking 3. Clinical examination In clinical classroom: 1. Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, plan investigations if needed & identify the Samprapti Ghatakas 2. Plan the management and justify the Samprapti Vighatana 3. Presentation of the case [Each group will present any one sub point of the case]

		5. ROI	 4. Identify the referral criteria for Shawsa Roga. 5. ROLE-PLAY – Explain the care plan, Ahara vihara & prognosis to parent. 6. Recording the case in record book. 								
NLHP	10.5 Kriyakrama used in management of Pratishaya,Kasa & Shwasa	Pre-pr By the 1. Iden 2. Sche By the manag Activi 1. Tea 2. Stuc A. Pre Collec certific B. Pro C. Pos 3. Assi	 Duration: 2 Hour Pre-preparation: By the Teacher: 1. Identify the Kriyakrama (Procedure based therapy) used in Pratishaya,Kasa and Shwasa 2. Scheduling the demonstration and arranging the patient. By the Student: Students are expected to study the concept of Pratishaya,Kasa & Shwasa and its management in detail prior to the Activity. Activity: 1. Teacher/therapist demonstrates the kriyakrama on the patient. 2. Students are expected to observe – A. Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed, Collecting the ingredients and equipment, preparation of medicine, getting the consent, fitness certificate if required, counseling the patient and caretaker) B. Procedure (Technique of procedure, communication with the patient and caretaker) C. Post procedure specific to procedure and explain the Do's and Don't to follow. 3. Assignment: Write the mode of action/Samprapti Vigatana of the procedure) 4. Recording the procedure in the record book. 						and its if needed,		
Topic A3	11 Mahasrota Roga [Gastro Intestinal Disord B3	ders] (LH :6 NI	LHT: 3 N C3	LHP: 6)	E3	F3	G3	НЗ	I3	К3	L3
CO 2,CO 3,CO	Describe etio-pathogenesis, classification, clinical and management(Chikitsa) of diarrheal diseases in Describe stages of diarrheal dehydration.	•	СК	MK	K	L&PPT ,CD,DI S	T-CS,PM,S BA	F&S	II	-	LH

CO 2,CO 3	Diagnose and plan Chikitsa for Atisara, Grahani and Pravahika in children. Analyze Samprapti Vigatana.	CE	MK	КН	L&PPT ,CD	T-CS,PM,S BA	F&S	II	-	LH
CO 2,CO 3,CO 6	Describe etio-pathogenesis, classification, clinical presentation and management(Chikitsa) of vomiting in children. Diagnose and plan Chikitsa for Chhardi in children.	CE	МК	КН	CD,L& PPT	T-CS,SBA, PM	F&S	II	-	LH
CO 2,CO 3,CO 6	Define constipation, describe the etiology, diagnosis, complication and management(Chikitsa) of constipation. Diagnose and plan Chikitsa for Vibandha in children. Analyse Samprapti Vigatana.	CE	МК	КН	CD,L& PPT ,DIS	T-CS,PM	F&S	II	-	LH
CO 2,CO 3	Describe etio-pathogenesis, clinical presentation and management(Chikitsa) of stomatitis, rectal prolapse and Fissure in Ano in children.	СК	MK	К	DIS,L& PPT ,CD	PM,T- CS,SBA	F&S	II	-	LH
CO 2,CO 3	Explain etio-pathogenesis, clinical presentation and management(Chikitsa) of Infantile Colic.	CC	MK	K	L&PPT ,CD,DI S	T-CS, C- VC,PM	F&S	II	-	LH
CO 3,CO 4,CO 6	Enlist the Oushadha Yogas used in Atisara, Grahani and Pravahika. Enlist the ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition-specific) Yogas used for Aatisara, Grahani, and Pravahika Chikitsa and analyze its Samprapti Vighatana. Communicate the plan of Ahara and Vihara for Atisara, Grahani and Pravahika to the caregivers.	AFT- RES	МК	SH	FC,RP, CBL	QZ ,CHK,RS	F&S	II	-	NLHT11.1
CO 3,CO 4,CO 6	Enlist Oushadha Yoga use for Chhardi. Enlist ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used for Chhardi and analyze Samprapti Vighatana.	AFT- RES	МК	SH	TBL,RP ,FC	P-RP,CHK, RS	F&S	II	-	NLHT11.2

	Communicate the plan of Ahara and Vihara for Chhardi to the caregivers.									
CO 2,CO 3,CO 6	Enlist Oushadha Yoga use for Vibandha. Enlist ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used in Vibandha and analyze its samprapti Vighatana. Communicate the plan of Ahara and Vihara for Vibandha to the caregivers.	AFT- RES	МК	SH	PER,FC ,RP	P-RP,RS,C HK	F&S	Π	-	NLHT11.3
CO 3,CO 4,CO 6	Analyse physiological basis of ORT. Compare composition of various types of ORS. Communicate and educate parents on home based ORS.	AFT- RES	МК	SH	RP,IBL	CL-PR,RS, CHK	F&S	II	-	NLHP11.1
CO 3,CO 7,CO 8	Perceive two Kriyakrama used in the management of Chhardi and analyse its Samprapti Vighatana.	PSY- SET	МК	КН	D- BED,D	INT,CHK, QZ	F&S	II	-	NLHP11.2
CO 3,CO 7,CO 8	Perceive two Kriyakrama used in the management of Vibandha and analyse its Samprapti Vighatana.	PSY- SET	МК	КН	D-M,D- BED	QZ ,CHK,INT	F&S	II	H-PK	NLHP11.3
CO 2,CO 3	Diagnose and plan Chikitsa for Mukhapaaka, Gulma, Gudabramsa and Parikartika in children and analyse Samprapti Vighatana.	CE	DK	SH	FC,CBL ,PBL	CWS ,RS,CHK	F&S	II	-	NLHP11.4
CO 2,CO 3	Identify the signs and symptoms of GI and Liver disorders (Jaundice, Pallor, Gynaecomastia, Spider angioma, Palmar erythema, Icthyosis, Caput medusa, Clubbing, Failing to thrive). Identify Dosha and Dhatu involved in GI and Liver disorders. Identify signs and symptoms of Vitamin A and D deficiency.	САР	МК	КН	FC,PBL ,PL	CHK,P- ID,RS	F&S	П	-	NLHP11.5

	Identify the referral criteria of Mahash	hrotogata Vikaras									
CO 2,CO 3,CO 4	Examine and plan the management for Vikaras.	nine and plan the management for a case of Maha Stroto ras.			SH	CD,PT, D-BED	SP,P- CASE,CH K	F&S	II	-	NLHP11.6
Non I	Lecture Hour Theory						4	1			-
S.No	Name of Activity	De	escription of	f Theory	Activity						
NLHT	Y 11.1 Oushadha Yogas, Pathya in A Pravahika.	Divide the cla Assign 1 dises Provide guide mponent of co Validate the F Ensure the lar the Student: Students is explicated by the student is indicated Student is explicated by the stivity: Students assen Teacher will ger rationale. Select the release frequently us	a: ist of Oush ass into 3 g ease to each elines to pr communica Role Play s inguage is s xpected to ted for the pected to p e teacher pr emble in gr give an over levant 2 for used by pra-	groups h group (e, repare the ation. script prep simple and understand particular prepare the rior to the roups assig verview of rmulations actitioners	eg Atisara, C Ahara Viha pared by the d easy to un ad the disease disease assi e Ahara Vih activity. gned. formulation s used in Ation	Atisara, Graha Grahani and Pra ara Chart, role e student Prior inderstand by the se, Prepare the signed to them. hara chart and t isara, Grahani ve state/ region ractical relevan	ravahika) play and h to the activ he local peo list of Ous the script o sara, Graha and Praval n.	highligh ivity. ople. shadha of the ro ani and l ahika, w	nt the impo Yogas, Al ole play an Pravahika vith referen	hara Vihara nd get it a along with nce and which	

		5. Group leader present the Ahara Vihara Chart in Atisara, Grahani and Pravahika.6. Each group executes the role play.Role of Teacher: Facilitate group discussion and provide inputs
NLHT 11.2	Oushadha Yogas and Pathya used in Chhardi.	Duration: 1 Hour Pre-Preparation: By the Teacher: 1. Prepare the list of Oushadha Yogas used for Chhardi. 2. Divide the class into 5 groups 3. Assign 1 type of Chhardi to each group 4. Provide guidelines to prepare the Ahara Vihara Chart, role play and highlight the important component of communication. 5. Validate the Role-Play script prepared by the student Prior to the activity. 6. Ensure the language is simple and easy to understand by the local people. By the Student: 1. Students is expected to understand the disease, Oushadha Yogas which is indicated for Chhardi and analyze Samprapti Vighatana. 2. Student is expected to prepare the Ahara Vihara chart and the script of the role play and get it validated by the teacher prior to the activity. Activity: 1. Students assemble in groups assigned. 2. Teacher will give an overview of formulations used in Chhardi along with their rationale. 3. Select the relevant 2 formulations used in Chhardi with reference and which are frequently used by practitioners of respective state/ region. 4. Analyze the Samprapti Vighatana in Chhardi. 5. Enlist ingredients, indications and explain Practical relevance. 6. Group leader present the Ahara Vihara Chart in different types of Chhardi. 7. Each group executes the role play. Role of Teacher: Facilitate group discussion and provide fe

ga and Pathya in Vibandha.	Duration: 1 Hour
	Pre-Preparation:
	By the Teacher:
	1. Prepare the list of Oushadha Yogas used for Vibandha.
	2. Divide the class into 5 groups
	3. Assign 1 stimulated or hypothesised cases of Vibandha (varying level of severity/different age
	groups)
	4. Provide guidelines to prepare the list of Oushadha Yogas Ahara Vihara Chart, role play and
	highlight the important component of communication.
	5. Validate the Role- play script prepared by the student prior to the activity.
	6. Ensure the language is simple and easy to understand by the local people.
	By the Student:
	1. Students is expected to understand the disease, enlist Oushadha Yogas which is indicated for the
	Vibandha and analyze its samprapti Vighatana.
	2. Student is expected to prepare the Ahara Vihara chart and the script of the role play and get it
	validated by the teacher prior to the activity.
	Activity:
	1. Students assemble in groups assigned.
	2. Teacher will give an overview of formulations used in Vibandha along with their rationale.
	3. Select the relevant 2 formulations used in Vibandha with reference and which are frequently used by
	practitioners of the respective state/ region.
	4. Analyze the samprapti Vighatana in Vibandha.
	5. Enlist ingredients, indications and explain practical relevance.
	6. Group leader present the Ahara Vihara Chart in different types of Vibandha.
	7. Each group executes the role play.
	Role of Teacher: Facilitate group discussion and provide feedback on participation and analysis.
1	
octical	Description of Practical Activity
	tical

NLHP 11.1	Physiological basis and composition of various ORT	Duration: 1 HoursPre-preparationBy the Teacher:1. Teacher informs the topic and group division (Min 6 to 10) 1 week before the class activity.Group 1: Analyse physiological basis of ORT.Group 2: Comparison of various types of ORS.Group 3: Advice and instruct parents on home-based ORS – Role play2. Validate the role play script before the session.3. Prepare the checklist for evaluation.By the Student:1. Identify a Question: Physiological basis of ORT, Comparison of various types of ORS andPreparation of Home-based ORS2. Conduct Background Research: Visit nearby Pharmacy/dispensaries.3. Formulate hypothesis if needed4. Plan and Conduct Investigations: Interviewing healthcare professionals about ORTs they use in their practice. Surveys can also be planned in public.5. Analyze Data: Analyze data from surveys or interviews to understand the physiological basis of ORT, compare various types of ORS and Preparation of Home based ORSClass Activity:1. Students sit in their respective groups2. Group discussion: 10 mins3. Communicate findings: Present findings through a report/presentation on the physiological basis of ORT, and compare various types of ORS.4. Group 3 role play to plan and instruct the parents on home-based ORS.Teachers' role: Facilitate group discussion and guide students on resources.
NLHP 11.2	Kriyakrama used in the management(Chikitsa) of Chhardi.	Duration: 1 Hour Pre-preparation: By the Teacher: 1. Identify two Kriyakrama (Procedure based therapy) used in Chhardi 2. Scheduling the demonstration and arranging the patient.

		 By the Student: Students are expected to study the concept of Chhardi and its management in detail prior to the Activity. Activity: Teacher/therapist demonstrates the Kriyakrama on the patient. Students are expected to observe – Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed, Collecting the ingredients and equipment, preparation of medicine, getting consent, fitness certificate if required, counseling the patient and caretaker) Procedure (Technique of procedure, communication with the patient and caretaker) Post procedure specific to procedure and explain the Do's and Don't to follow. Record the procedure in the record book. Assignment: Write the mode of action/Samprapti Vighatana of the procedure)
NLHP 11.3	Kriyakrama used in the management of Vibandha.	 Duration: 1 Hour Pre-preparation: By the Teacher: Identify two Kriyakrama (Procedure based therapy) used in Vibandha Scheduling the demonstration and arranging the patient. By the Student: Students are expected to study the concept of Vibandha and its management in detail prior to the Activity. Activity: Teacher/therapist demonstrates the Kriyakrama on the patient. Students are expected to observe – Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed, Collecting the ingredients and equipment, preparation of medicine, getting consent, fitness certificate if required, counseling the patient and caretaker) Procedure (Technique of procedure, communication with the patient and caretaker) Post procedure specific to procedure and explain the Do's and Don't to follow. Record the procedure in the record book. Assignment: Write the mode of action/Samprapti Vighatana of the procedure)

NLHP 11.4	Case Discussion:Mukhapaaka, Gulma, Gudabramsa and Parikartika.	 Duration: 1 Hour Preparation /Pre-Requisites By the Teacher: Diving the students in 4 groups and assigning structured case vignette for each group (Mukhapaaka, Gulma, Gudabramsa and Parikartika respectively) one week before the session By the Student: Understand the case assigned, diagnose and plan the management Ask for more triggers or direction to solve the case before the session Activity: In the clinical classroom: Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, and identify the Samprapti Ghatakas. Plan the management and justify the Samprapti Vighatana Presentation of the case [Each group will present the assigned case] Recording the case in record book.
NLHP 11.5	Signs and symptoms of GI and Liver disorders	 Duration: 1 Hour Pre-preparation By the Teacher 1. Preparing the resource material which includes signs and symptoms of GI and liver disorders. 2. Dividing the students in groups and assigning case vignette to each group By the students (SDL) 1. Learning the resource material and Identifying signs and symptoms of GI and liver disorders in the case vignette assigned. 2. Identify Dosha and Dhatu involved in GI and liver disorders. 3. Identify signs and symptoms of Vitamin A and D deficiencies. Activity: 1. Introduction: Teacher briefly explains the objectives and importance of diagnosing GI and liver disorders in Ayurveda and contemporary medicine. 2. Case Discussion: Each group present their findings briefly. 3. Teacher Facilitate a discussion to referral criteria of Mahashrotogata Vikaras

NLHP 11.6	Case Discussion: Maha Stroto Vikara.	Durat	tion: 1 Ho	ur										
		Prepa	ration /Pr	e-Requisi	tes									
		By the teacher:												
		1. Scheduling the case taking and arranging the case (Real Patient / simulated patient/ Case vignette)												
		2. Ma	ke the stud	lent unders	tand the O	PD/IPD m	anners during	g case-takii	ng					
		3. Preparing the checklist for the concerned activity.												
		By the	e student:											
		1. Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa												
		Stroto Vikara												
		2. Rap	oport build	ing, prope	history ta	king, thore	ough examina	tion, appro	priate I	nvestigatio	n			
		3. Pre	sent their v	views in cli	nical class	room disc	ussion							
		Activity:												
		In the clinical classroom: Students are divided in groups (5-8 members in one group) and sent to												
		OPD/IPD for Bedside - Case taking												
		Bedside: Case taking as per the format (in case of real patients)												
		A. Bu	ilding rapp	ort with p	atient									
		B. His	story taking	b										
		C. Cli	nical exam	ination										
		In the	e clinical c	lassroom:										
		1. Stu	dents discu	iss the Nid	ana Panch	aka in the	allotted group	, different	ial diag	nosis, plan				
		investigations if needed & identify the Samprapti Ghatakas												
		2. Plan the management and justify the Samprapti Vighatana												
		3. Presentation of the case [Each group will present one disease or any sub-point of the case]												
		4. Recording the case in the record book.												
onic 12 Ra	sa Rakta Rogas [Disorders of blood and ca	rdiovascula	r system]	LH:3	NLHT: 3	NLHP 6	0							
-		ii aio i uscula								W2				
43	B3		C3	D3	E3	F3	G3	H3	I 3	K3	L3			

A3	B3	C3	D3	E3	F3	G3	H3	I 3	K3	L3
CO 2,CO	Describe etio-pathogenesis, clinical features, classification, diagnosis and approach to a child with anaemia.	СК	МК	К	LRI,L& PPT	PM,T-CS	F&S	II	-	LH

3										
CO 2,CO 3	Explain Mritbhakshanajanya Pandu. Enumerate diseases originating from Mritikabhakshana.	CC	МК	K	L&PPT ,L_VC, CD	PM,INT,T- CS	F&S	II	-	LH
CO 2,CO 3	Diagnose and plan Chikitsa for Kamala in children. Define and describe types, etiology, clinical features, diagnosis and management(Chikitsa) of Jaundice in children. Identify referral criteria for cases of Jaundice.	CS	МК	KH	L_VC,L RI,CD	INT,T-CS, C-VC	F&S	II	-	LH
CO 2,CO 3	Analyze Bheda of Pandu with Anemia. Identify referral criteria for cases of anaemia.	CAN	МК	KH	PBL,FC	RS,CHK,P RN	F	II	-	NLHT12.1
CO 2,CO 3	Enlist haemorrhagic diseases in children. Discuss etio- pathogenesis, clinical features and management(Chikitsa) of Haemolytic anemia, Thalassemia Major, Sickle Cell Anemia, Hereditary Spherocytosis. Diagnose and plan management(Chikitsa) of Haemolytic anemia, Thalassemia Major, Sickle cell anaemia, Hereditary spherocytosis.	CS	DK	КН	CBL,FC ,LRI	CHK,PRN, RS	F&S	П	-	NLHT12.2
CO 2,CO 3	Enumerate causes of hepatomegaly and splenomegaly. Analyze concept of Udara Roga with reference to hepatomegaly and splenomegaly.	CAN	DK	KH	BS,DIS	CHK,RS,IN T	F	II	-	NLHT12.3
CO 2,CO 3,CO 6	 Plan complementary and alternative scope of treatment protocol for cases of Anemia. Communicate the plan of Ahara and Vihara for Pandu to the caregivers. Enlist Oushadha Yogas used in Pandu. Enlist ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used in Pandu Chikitsa and analyze its Samprapti Vighatana. 	AFT- RES	МК	SH	CBL,FC ,RP	PRN,CHK, RS	F&S	II	-	NLHP12.1

NLHT 12.1 Bheda and referral criteria of Pandu and Anemia. Duration: 1 Hour Pre-preparation: By the Teacher: Dividing the students in groups (Min 8 and Max 10 groups) vignette to each group (different kind of Pandu and varying severity) 1 week By the students (SDL)						-	-	-				
S.No		Name of Activity	Descri	ption of	Theory A	ctivity						
Non L	ecture H	Iour Theory	-									
CO 3,CO 7,CO 8 CO 2,CO 3,CO 4,CO 6	Analys	e two Kriyakrama used in the management of Kama e Samprapti Vighatana in Kamala ne and Plan the treatment for cases of Pandu, Anaemi n.		PSY- SET PSY- GUD	MK DK	КН SH	D,D- BED CBL,D- BED	INT,CHK RS,P- CASE,CH K	F&S F	П	-	NLHP12.4 NLHP12.5
CO 2,CO 3,CO 6	protoco Commu caregiv Enlist C indicati Vishesh	mplementary and alternative scope of Ayurveda trea of for the cases of Kamala. Inicate the plan of Ahara and Vihara for Kamala to the ers. Dushadha Yogas used in Kamala. Enlist ingredients a ons of at least two Samanya Oushadha Yoga and two ha (condition specific) Yogas used in Kamala Chikits is its Samprapti Vighatana.	he and o	AFT- RES	МК	SH	RP,CBL ,L&GD	PRN,RS,C HK	F&S	Π	-	NLHP12.3
CO 3,CO 7,CO 8		e two Kriyakrama used in the management of Pandu e Samprapti Vighatanah in Pandu	1.	PSY- SET	МК	КН	D- BED,D	INT,CHK	F&S	Π	-	NLHP12.2

		 Identifying the problem and ask for triggers Diagnose the type of Pandu and type of Anaemia Analyze Bheda of Pandu with Anaemia. Identify referral criteria for cases of anaemia Ask for triggers to find the answers prior to the session Activity: Introduction: Teacher briefly explains the objectives of the session and activity. Case Discussion: Each group present their findings briefly. Students discuss the new knowledge of comparison and the process of learning Teacher facilitates a discussion to correct misconceptions and reinforce key points.
NLHT 12.2	Haemorrhagic Diseases in children.	Duration: 1 Hour Pre-preparation: By the Teacher: Preparing the resource material (Hemorrhagic Diseases in children) and sharing it to the students (handouts/recorded videos/ppts) 1-2 week prior to the class activity. Dividing the students in groups and assigning case vignettes to each group. By the students (SDL): 1. Learning the resource material and understanding the etiopathogenesis, clinical features and management (Chikitsa) of Hemolytic anemia, Thalassemia Major, Sickle Cell Anemia, Hereditary Spherocytosis. 2. Diagnosing the case vignette assigned and planning the management. Activity: 1. Introduction: Teacher briefly explain the objectives and list out the hemorrhagic diseases in children. 2. Group discussion: Students discuss in group on assigned case vignette 3. Case Discussion: Each group present their findings briefly and explain the etio-pathogenesis, clinical features and management (Chikitsa) of the case assigned to the group. 4. Teacher Facilitate a discussion to correct misconceptions and reinforce key points.
NLHT 12.3	Udara Roga: hepatomegaly and splenomegaly.	Duration: 1 Hour

	 Pre-preparation: By the Teacher: Preparing the list of references (Udara Roga, hepatomegaly and splenomegaly) and sharing it with students. By the students (SDL): Understanding the concept of Udara Roga, hepatomegaly and splenomegaly from the given references. Carrying the references to the session Activity: Introduction: Teacher briefly explain the objectives of the session and activity. Diving the class into group (min 6-8 in one group) Group discussion: Students discuss in groups on the causes of hepatomegaly and splenomegaly and also analyze concept of Udara Roga with reference to hepatomegaly and splenomegaly using the references. Each group present their discussion. Teacher facilitates discussion among different groups to correct misconceptions and reinforce key points.
--	---

Non Lecture Hour Practical

S.No	Name of Practical	Description of Practical Activity
NLHP 12.1	Complementary, alternative treatment protocol,	Duration: 1 Hour
	Pathya in Anemia.	Pre-Preparation:
		By the Teacher:
		1. Prepare the list of Oushadha Yogas used in Pandu
		2. Divide the students into 5 groups
		3. Assign 1 real case/ stimulated or case vignette (different types of Pandu/Anemia)
		4. Provide guidelines to prepare the Ahara Vihara Chart, role play and highlight the important
		components of communication.
		5. Validate the Role Play script prepared by the student Prior to the activity.
		6. Ensure the language is simple and easy to understand by the local people.
		By the Student:

		 Students is expected to understand the disease, Ahara Vihara which is indicated for the particular disease assigned to them. Student is expected to prepare the Ahara Vihara chart and the script of the role play which explains the Ahara Vihara Chart to the parents/caretaker and get it validated by the teacher prior to the activity. Student is expected to enlist the Oushadha Yogas use in Pandu Chikitsa and study the details of any two Samanya & Vishesh Yogas. Activity: Students assemble in groups assigned. Teacher explains the Plan complementary and alternative scope of treatment protocol for cases of Anemia. Teacher will give an overview of formulations used in Pandu along with their rationale. Select the relevant 2 formulations used in Pandu with reference and which are frequently used by practitioners of respective state/ region. Enlist ingredients, indications and explain Practical relevance. Discuss the Oushadha Yogas and justify Samprapti Vighatana. Group leader present the Ahara Vihara Chart in different types of Pandu. Each group executes the role play.
NLHP 12.2	Kriyakrama used in management of Pandu	Duration: 1 Hour Pre-preparation: By the Teacher: 1. Identify two Kriyakrama (Procedure-based therapy) used in Pandu. 2. Scheduling the demonstration and arranging the patient. By the Student: Students are expected to study the concept of Pandu and its management in detail prior to the Activity. Activity: 1. Teacher/therapist demonstrates the Kriyakrama on the patient. 2. Students are expected to observe – A. Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed, Collecting the ingredients and equipment, preparation of medicine, getting the consent, fitness certificate if required, counseling the patient and caretaker)

		 B. Procedure (Technique of procedure, communication with the patient and caretaker) C. Post procedure specific to procedure and explain the Do's and Don't to follow. 3. Record the procedure in the record book. 4. Assignment: Write the mode of action/Samprapti Vighatana of the procedure.
NLHP 12.3	Complementary, alternative treatment protocol, Pathya in Kamala.	 Duration: 1 Hour Pre-Preparation: By the Teacher: Prepare the list of Oushadha Yogas used in Kamala Divide the students into 3 groups Assign 1 real case/ stimulated or case vignette (varying level of severity) Provide guidelines to prepare the Ahara Vihara Chart, role play and highlight the important components of communication. Validate the Role Play script prepared by the student Prior to the activity. Ensure the language is simple and easy to understand by the local people. By the Student: Students is expected to understand the disease, Ahara Vihara which is indicated for the particular disease assigned to them. Student is expected to prepare the Ahara Vihara chart and the script of the role play which explains the Ahara Vihara Chart to the parents/caretaker and get it validated by the teacher prior to the activity. Activity: Students assemble in groups assigned. Teacher explains the Plan complementary and alternative scope of treatment protocol for cases of Kamala. Teacher will give an overview of formulations used in Kamala along with their rationale. Select the relevant 2 formulations used in Pandu with reference and which are frequently used by practitioners of respective state/ region. Enlist ingredients, indications and explain Practical relevance. Discuss the Oushadha Yogas and justify Samprapti Vighatana. Group leader present the Ahara Vihara Chart in different types of Kamala.

NLHP 12.4	Kriyakrama used in the management of Kamala.	Duration: 1 Hour
		Pre-preparation:
		By the Teacher:
		1. Identify two Kriyakrama (Procedure-based therapy) used in Kamala.
		2. Scheduling the demonstration and arranging the patient.
		By the Student: Students are expected to study the concept of Kamala and its management in detail
		prior to the Activity.
		Activity:
		1. Teacher/therapist demonstrates the Kriyakrama on the patient.
		2. Students are expected to observe –
		A. Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed,
		Collecting the ingredients and equipment, preparation of medicine, getting the consent, fitness
		certificate if required, counseling the patient and caretaker)
		B. Procedure (Technique of procedure, communication with the patient and caretaker)
		C. Post procedure specific to procedure and explain the Do's and Don't to follow.
		3. Record the procedure in the record book.
		4. Assignment: Write the mode of action/Samprapti Vighatana of the procedure.
NLHP 12.5	Case Discussion: Pandu, Anaemia and Kamala.	Duration: 2 Hour
		Preparation /Pre-Requisites:
		By the Teacher:
		1. Scheduling the case taking and arranging the cases of Pandu, Anemia and Kamala. (Real Patient / simulated patient/ Case Vignette)
		2. Preparing the checklist for the concerned activity.
		By the student:
		1. Student is expected to come prepared with the content of Nidana Panchaka and Chikitsa of Pandu
		and Kamala.
		2. Rapport building, proper history taking, thorough examination, appropriate Investigation
		Activity:
		Clinical classroom: Students are divided in groups (5-8 members in one group) and sent to OPD/IPD for Bedside - Case taking

I I	Bedside (in case of real case): Case taking as per the format
	1. Building rapport with patient
	2. History taking
	3. Clinical examination
	In clinical classroom:
	1. Students discuss the Nidana Panchaka in the allotted group, differential diagnosis, plan
	investigations if needed & identify the Samprapti Ghatakas
	2. Plan the management and justify the Samprapti Vighatana
	3. Presentation of the case [Each group will present any one sub point of the case]
	4. ROLE-PLAY – Explain the care plan, Ahara vihara & prognosis to parent.
	5. Recording the case in record book.
	Teacher's role: Teacher evaluates students' performance based on checklist/rating scale.
	Checklist: Yes/No
	1. Rapport building established
	2. Explains the history and symptoms in sequence of disease Pandu, Anemia and Kamala accurately.
	3. Explains local and systemic clinical examination performed.
	4. Identifies the Nidana Panchaka accurately and discuss differential diagnosis.
	5. Identifies the Samprapti Ghatakas in disease Pandu, Anemia and Kamala as per the allotment of
	respective groups.
	6. Plan the management and Justifies Samprapti Vighatana.
	7. Explain care plan, Ahara vihara & prognosis to parent.
	8. Shows active collaboration in group and justifies the queries raised.
	9. Language is simple and easy to understand by the local people.

Topic 13 Antahsravee Granthi Rogas (Disorders of Endocrine System) (LH :3 NLHT: 2 NLHP: 2)

A3	B3	С3	D3	E3	F3	G3	Н3	I 3	К3	L3
CO 2,CO 3,CO 6	Enlist Thyroid dysfunctions. Define Hyperthyroidism, Hashimoto's Thyroiditis in children. Analyze Samprapti in Thyroid dysfunction and plan Chikitsa. Diagnose and manage Hypothyroidism.	CE	МК	КН	LRI,L& PPT ,L&GD	T-CS,QZ , C-VC	F&S	II	-	LH

CO 2,CO 3	Interpret and explain Neonatal and Childhood Thyroid screening report. Identify referral criteria for the cases of Thyroid dysfunction	CC	МК	K	TUT,L &PPT ,LRI	T-CS,SBA, O-QZ	F&S	II	-	LH
CO 2,CO 3,CO 6	Explain Sahaja Prameha. Describe etio-pathogenesis, clinical features, diagnosis, complications ,management and referral criteria of Type-1 Diabetes mellitus. Analyze the concept of Prameha with reference to Diabetes.	CAN	МК	КН	DIS,BS, L&PPT	CR-W,SBA ,T-CS	F&S	II	-	LH
CO 2,CO 3,CO 6	Enlist ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition-specific) Yogas used for T1DM and analyse the Samprapti Vigatana. Prescribe and explain Ahara - Vihara for Thyroid Dysfunctions and T1DM.	CS	МК	KH	BS,L& GD,ML	CL-PR,O- QZ,WP	F&S	Π	-	LH
CO 2,CO 3,CO 4,CO 6	Plan Chikitsa for Diabetes Mellitus (Prameha), glycaemic control and analyze Samprapti Vagatana. Identify referral criteria for the cases of Diabetes Mellitus. Prescribe and explain Ahara- Vihara for T1DM.	CS	МК	КН	PBL,FC ,CBL	CHK, C- VC,SP	F&S	Π	-	NLHT13.1
CO 2,CO 3,CO 7	Enlist and perceive any two Kriyakrama used in the management of T1DM . Analyse Samprapti Vighatana	PSY- SET	МК	КН	D- M,D,PT	QZ ,INT,CHK	F&S	II	-	NLHP13.1
CO 1,CO 2,CO 3,CO 6	Predict the case of precocious and delayed puberty. Identify deviations in growth and plan appropriate management.	САР	NK	КН	FC,PER ,SDL	QZ ,CHK,RS	F&S	II	-	NLHT13.2
Non Lo	ecture Hour Theory			•	•			-		

S.No	Name of Activity	Description of Theory Activity
NLHT 13.1	Diabetes Mellitus (Prameha)	Duration: 1 hour
		Pre-Preparation:
		By the Teacher:
		1. Preparation of Case Vignette (different age group/different glycemic levels/)
		2. Divide the Class into groups.
		3. Assign one case to each group one week prior to the class activity.
		By the Students: Student is expected to study Diabetes Mellitus & glycemic control measures Ahara
		Vihara, referral criteria, by referring classical texts or by conduct a survey before the session.
		Activity:
		1. Students assemble in assigned group
		2. Group Discussion on the assigned topic.
		3. Students are expected to present:-
		A. Chikitsa Sutra if any
		B. Shamana Protocol and analyze Samprapti Vighatana if any
		C. Prescribe dose a/c to age
		D. Shodana protocol if needed and justify the indication.
		E. Satvavajaya measures if any
		F. Glycemic control measures
		G. Prescribe a diet regimen
		H. follow-up plan
		I. Criteria to refer
		Role of the Teacher: Facilitate group discussion and summarize the key points.
NLHT 13.2	Precocious and Delayed Puberty	Duration: 1 Hour
		Pre-Preparation
		By the Teacher: Dividing the students in groups (Min 8 and Max 10 groups) and assigning the topic
		one week before the activity.
		By the Students: Students are expected to study puberty & growth deviations before coming to class
		Activity:

1. Students are divided into three groups (precocious, delayed, and deviated growth).
2. Provide one case to each group
3. Students are expected to identify –
a. Types of puberty
b. Chronological development of signs & symptoms during puberty.
d. Current manifestations/ symptoms
e. Familial history if any
f. Principle of growth and development
g. Growth patterns in the charts
h. Causative factors for deviated growth if any
Teacher's role: Teacher asses using a checklist.
Checklist: Yes/ No
1. Identifies Puberty types accurately
3. Mentions Chronological development of puberty symptoms accurately
4. Explains current manifestations/ symptoms
5. Mentions appropriate Causative factors
6. Mentions familial history
7. Analysis of growth and development
8. Explains the growth pattern using the chart.

Non Lecture Hour Practical

S.No	Name of Practical	Description of Practical Activity
NLHP 13.1	KriyaKrama in T1DM	Duration: 2 hours
		Pre-preparation:
		By the Teacher:
		1. Identifying Kriyakrama used in T1DM
		2. Scheduling the demonstration and arranging the patient.
		By the Student: Students are expected to study the disease and its management in detail prior to the
		activity.
		Activity:

	 Teacher/therapist demonstrates Kriyakrama on the patient. Students are expected to observe – A. Pre-procedure (Handwashing, Wearing Cap/gloves/mask, Collecting the ingredients and equipment's, preparation of medicine, getting the consent, fitness certificate if required, counselling the patient and caretaker) B. Procedure (Technique of procedure, communication with the patient and caretaker)
	B. Procedure (Technique of procedure, communication with the patient and caretaker) C. Post procedure (Explaining the Do's and Don't to follow)
	3. Assignment: Students are asked to write the mode of action/Samprapti Vighatana of the procedure)

Topic 14 Mutravaha Sroto Rogas (Disorders of Genito urinary system) (LH :3 NLHT: 2 NLHP: 2)

-		, ``	•		· · · · · · · · · · · · · · · · · · ·					
A3	B3	C3	D3	E3	F3	G3	H3	I 3	K3	L3
CO 2,CO 3,CO 6	Diagnose and plan the Chikitsa of Mutrakrichra in children. Diagnose and plan the management of Urinary Tract infection in children. Describe the etiopathogenesis, clinical features, diagnosis, complications and management of Glomerular Nephritis in children.	CE	МК	КН	L&PPT ,DIS,LR I	PM,T-CS, C-VC	F&S	III	-	LH
CO 2,CO 3,CO 6	Explain the approach to the case of Proteinuria and Hematuria. Describe the etio-pathogenesis, clinical features, diagnosis complications and management of Chronic Renal Failure in Children. Describe the etio-pathogenesis, clinical features, diagnosis complications and management of Nephrotic Syndrome in Children	CC	МК	K	L&PPT ,DIS,LR I	PM, C- VC,T-CS	F&S	III	-	LH
CO 2,CO 3	Identify referral criteria for Proteinuria, Hematuria. Identify referral criteria for Genitourinary disorder	СК	МК	K	EDU,F C,PBL	C-VC,QZ ,O-GAME	F&S	III	H-SH	NLHT14.1
CO 2,CO	Enlist the ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas	CE	МК	КН	L_VC,D IS,L&P	C-VC,SBA ,T-CS	F&S	III	H-SH	LH

3,CO 6	Vigatar and pla	Genito Urinary disease and Analyse the Samprapha. Diagnose Niruddha Praksha/Niruddha Mani ir n the Chikitsa. Ne and Plan the management for Phimosis.	•				РТ					
CO 2,CO 3,CO 6	2,CO treatment protocol for the cases of Mutra Vaha Sroto Vikara.3,CO Prescribe and Explain Ahara and Vihara for Genitourinary		CS	МК	КН	TBL,PB L,L&G D	P-PS,SBA, CBA	F&S	III	-	NLHT14.2	
CO 2,CO 3,CO 4		ne status of Kelda, Agni, Koshta in a case of Mutr Vaha Sroto Dusti.	ra and	PSY- GUD	МК	SH	D- BED,PT	P-PRF,CH K,P-CASE	F&S	III	-	NLHP14.1
CO 3,CO 4,CO 7		e two Kriyakrama used in the management of Mu Vikara. Analyze Samprapti Vighatana	utra Vaha	PSY- SET	МК	КН	D-M,D	CHK,INT, QZ	F&S	III	-	NLHP14.2
Non L	ecture I	Hour Theory		ł			•					
S.No		Name of Activity	Desci	ription of	Theory A	Activity						
NLHT	14.1	Refererral criteria of Genito urinary disorders	Pre-P By the 1. Div referen 2. Prej 3. Ass prior t By the	nces paration of sign one/tv to the class	n: class into f f Case Vig vo cases to s activity : Students	nette each grou	up ((Protein	prior to the ac uria, Haematu available liter	ria, Genito	o urinar	y, Phimos	is) one week

		 Activity: 1. Facilitator opens discussion 2. Students are expected to A. Explain the history and symptoms in the case. B. Mention the examination findings. C. Interpret the investigation findings. D. Diagnose the case and its subtype. E. Explain the referral criteria and justify the reason.
NLHT 14.2	Scope of treatment & ahara-vihara plan in Mutra vaha Sroto Vikara	Duration: 1 hour Pre-Preparation: By the Teacher: Dividing the class into groups (different Mutra Vaha Sroto Vikara)one week prior to the activity and assigning them a problem. Guide the students about references By the Student: 1. Students are expected to study available literature regarding Mootra Vaha Sroto Vikara. 2. Understand the case and plan Ahara and Vihara for the case Activity: 1. Teacher explains the complementary and alternative scope of Ayurveda treatment protocol for the cases of Mutra Vaha Sroto Vikara. 2. Students are expected to diagnose the case and present the Ahara Vihara chart of given case. 3. Analyse the chart and discuss the complementary and alternative scope of Ayurveda treatment protocol.
Non Lecture	Hour Practical	
S.No	Name of Practical	Description of Practical Activity
NLHP 14.1	Examination of kleda agni kosta in mutra and shukra vaha srotas	Duration: 1 Hour Pre Preparation By The Teacher 1. Introduce students about the importance of Agni, Kosta, Kleda examination in Mutra Sukra Vaha

		 Srotas through handouts. Divide students in groups with 10-15 students in a team Provide a real case/case vignette to each group Prepare questionnaire to assess Kelda, Agni, Koshta. By The Student: Student should understand the questionnaire. Activity: Students gather in group. Bedside (real case) Build rapport Examine the child. Assess Agni (Krura, Madhyama, Mrudu, Sama) Assess Kleda parameter in all types of Kostas (Krura ,Madhyama ,Mrudu, Sama) Clinical Classroom: Discuss the findings and difficulties faced in assessment.
NLHP 14.2	Kriya karma in Mutra Vaha Sroto Vikara	 Duration: 1 hour Pre-preparation: By the Teacher: Identifying Kriyakrama (procedure-based therapy) used in Mutra Vaha Sroto Vikara Scheduling the demonstration and arranging the patient/ model By the Student: Students are expected to study the disease and its management in detail prior to the Activity. Activity: Teacher/therapist demonstrates the Kriyakrama on the patient. Students are expected to observe – Pre-procedure (Handwashing, Wearing Cap/gloves/mask, Collecting the ingredients and equipment, preparation of medicine, getting consent, fitness certificate if required, counseling the patient and caretaker) Procedure (Technique of procedure, communication with the patient and caretaker) Post-procedure (Explaining the Do's and Don't to follow) Assignment: Students are asked to write the mode of action/Samprapti Vigatana of the procedure)

A3	B3	C3	D3	E3	F3	G3	H3	I3	K3	L3
CO 2,CO 3,CO 6	Enumerate Rheumatological problems in children. Diagnose and plan Chikitsa of Amavata.	CE	МК	КН	L_VC,L &PPT ,X-Ray	T-CS, C- VC,CBA	F&S	III	-	LH
CO 2,CO 3,CO 6	Diagnose and plan Chikitsa of Sandhigata Vata.	CE	МК	КН	CD,X-R ay,L&G D	C-VC,T- CS,SBA	F&S	III	-	LH
CO 2,CO 3,CO 6	Diagnose and plan Chikitsa of Vatarakta. Enlist ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition specific) Yogas used for Rheumatological disorders and Analyse the Samprapti Vigatana.	CE	МК	КН	L&PPT ,DIS,LR I	C-VC,T- CS	F&S	III	-	LH
CO 2,CO 3,CO 6	Identify referral criteria in Rheumatological disorders. Prescribe and explain Ahara-Vihara in Rheumatological disorders.	CS	МК	КН	CD,PBL ,CBL	RS,Mini- CEX,CHK	F&S	III	-	NLHT15.1
CO 2,CO 3,CO 6	Formulate integrated treatment protocol for the cases of Rheumatological disorders	CS	DK	КН	FC,BS, TBL	RS,SBA,PR N	F&S	III	-	NLHT15.2
CO 3,CO 7,CO 8	Perceive two Kriyakrama used in the management of Rheumatological disorders. Analyse Samprapti Vighatana	PSY- SET	МК	КН	D,D- M,PT	QZ ,CHK,INT	F&S	III	-	NLHP15.1

CO 2,CO 3,CO 4,CO 7 CO 2,CO 3,CO 4	 Amavata. Demonstarte the case history of Rheumatology and explain nidar panchaka Demonstarte the case history of Rheumatology and explain nidar panchaka 		GUD GUD CBL HK,Mini- CEX								NLHP15.2 NLHP15.3
	ecture Hour Theory		L		<u> </u>						
S.No	Name of Activity	Desci	ription of	Theory A	Activity						
NLHT 1	15.1 Referral criteria & Pathya in Rheumatological disorders.	Pre-P By the 1. Div 2. Prej 3. Ass By the Activi 1. Dia 2. Inte 3. Exp 4. Exp	eparation of sign one/tw e Student: ity: Studer agnose the erpret the in plain referr plain Ahara	n: class into g f Case Vig vo case to e : Students a nts are expe case nvestigatio ral criteria a for all sta	nette each grouj are expect ected to- ons ages of the	p one week	•	ass activit	у		references
NLHT 1	15.2 Integrated treatment for Rheumatological Disorders	Pre-P	tion: 1 hou Preparation le Teacher	n:							

 1. Dividing the class into groups one week prior to the activity. 2. Provide references on the integrated approach through PPT/Handouts/pre-recorded videos. By the Student: Students are expected to study literature prior to class. Collect and study scientific articles on the topic. Activity: Students are expected to- Discuss the scope of Ayurveda and complementary medicine in the treatment of Sandhigata Rochildren. Discuss recent advances in Ayurveda & other systems Present new research points available from the journals and analyse them. Build a stage-wise protocol (mind mapping) Discuss the avantages and limitations of the treatment aspects in all system Each group present their findings. Teacher summarises the key points on the integrated approach. 	oga in
---	--------

Non Lecture Hour Practical

S.No	Name of Practical	Description of Practical Activity			
NLHP 15.1	Kriya Krama in Rheumatological disorders	Duration: 1 Hour			
		Pre-preparation:			
		By the Teacher:			
		1. Identifying Kriyakrama used in Rheumatological disorders			
		2. Scheduling the demonstration and arranging the patient.			
		By the Student: Students are expected to study the disease and its management in detail prior to the			
		Activity.			
		Activity:			
		1. Teacher/therapist demonstrates the kriyakrama on the patient.			
		2. Students are expected to observe –			
		A. Pre-procedure (Handwashing, Wearing Cap/gloves/mask, Collecting the ingredients and equipment, preparation of medicine, getting consent, fitness certificate if required, counseling the patient and			

		 caretaker) B. Procedure (Technique of procedure, communication with the patient and caretaker) C. Post-procedure (Explaining the Do's and Don't to follow) 3. Assignment: Students are asked to write the mode of action/Samprapti Vigatana of the procedure)
NLHP 15.2	Case Discussion: Amavata	Duration: 3 HoursPre-Preparation:By the Teacher: Divide the class into groups (5-8/group) assign 1/2 real case/simulated case/case
		vignette (different presentation of Amavata) By the Student: Student is expected come prepared with the knowledge of Nidanapanchaka and Chikitsa of diseases Amavata.
		 Activity: Student gather in group and build the case Bedside (in real case) 1. Rapport building 2. History taking
		3. Clinical Examination (General & Joint Examination)Clinical classroom:
		 Students will discuss Samprapti Ghatakas of given case of Amavata. Plan the management and justify Samprapti Vigatana Students are asked to present different cases/ parts of a case (e.g. History, Examination, Differential
		Diagnosis, Investigations, Management)4. Teacher has to facilitate discussion to clear doubts of students.
		 5. Explain the care plan, Ahara and Vihara to parent/ guardian with a help of Role Play 6. Students will record the case in record book. Role of a teacher: Facilitate group discussion and evaluate the student using a checklist.
		Checklist: Yes/No 1. Rapport building established
		 Record history precisely. Performs/explain General and specific examination Interprets investigation report accurately.
		5. Justifies differential diagnosis

		6. Accurately diagnose the case and explain the Avastha7. Plans the treatment protocol and justifies the Samprapti Vigatana8. Plans the Ahara Vihara efficiently.9. Explains the prognosis of diseases and treatment effectively.
NLHP 15.3	Nidanapnachaka of Rheumatological disorders	Duration: 1 Hour Pre-preparation By the teacher: 1. Scheduling the case taking and arranging the case (Real Patient / simulated patient/ Hypothesised Case) 2. Make the student understand the OPD/IPD manners during case-taking By the student: 1. Students are expected to come prepared with history taking & the content of Nidana Panchaka of Rheumatological disorders 2. Rapport building, proper history taking, Nidana Panchaka finding in the given patient 3. Present their views in clinical classroom discussion Activity: In clinical classroom: Students are divided in groups (5-8 members in one group) and sent to OPD/IPE for Bedside - Case taking Bedside: (in real case) 1. Building rapport with patient 2. History taking In the clinical classroom 1. Students discuss the case in group 2. Frame the Nidana Panchaka and Samprapti Gatakas. 3. Present the history, examination finding and interpret the investigation reports. 3. Presents the Nidana Panchaka and Samprapti Gatakas to the class. 4. Teachers summarise the key points.

A3	B3	C3	D3	E3	F3	G3	Н3	I 3	K3	L3
CO 2,CO 3,CO 6	Enumerate Twak Rogas in Children. Diagnose and plan Chikitsa for Kushta.	CE	МК	КН	L&PPT ,L_VC, TUT	PM, C- VC,T-CS	F&S	III	V-AT	LH
CO 2,CO 3,CO 6	Diagnose and plan Chikitsa for Visarpa and Charmadala.	CE	МК	КН	L_VC,L &PPT ,TUT	PM,T-CS, C-VC	F&S	III	-	LH
CO 2,CO 3,CO 4,CO 6	Examine, diagnose and plan the management of Kusta/ Charmadala/ Visarpa. Identify the referral Criteria for Twak Rogas	PSY- GUD	МК	SH	SIM,CB L,D- BED	P- CASE,CH K	F&S	III	-	NLHP16.1
CO 2,CO 3,CO 6	Diagnose and plan Chikitsa for Arumshika.	CE	МК	КН	DIS,L& PPT	C-VC,PM	F&S	III	-	NLHT16.1
CO 2,CO 4,CO 6	Communicate the plan of Ahara and Vihara for Twak Rogas to caregivers.	AFT- RES	МК	SH	RP,SIM	CHK,RS,P- RP	F&S	III	-	NLHT16.2
CO 2,CO 3,CO 6	Describe etiopathogenesis, clinical features, complications and management of Scabies and Eczema.	СК	МК	K	ML,L& PPT ,TUT	C-VC,T- CS	F&S	III	-	LH
СО	Diagnose and plan the management of Erythema Toxicum	CE	DK	KH	ML,L_	C-VC,O-G	F&S	III	-	LH

2,CO 3,CO 6		orum, Adenoma Sebaceum, Cutis Marmora neic Dermatitis.	ta and				VC,L& PPT	AME,T-CS				
CO 2,CO 3	CO and indications of at least two Samanya Oushadha Yoga and two			СК	МК	КН	TBL,L &GD,D IS	INT,P- ID,WP	F&S	III	-	NLHT16.3
CO 4,CO 7,CO 8	management of Twak Roga and analyze the Samprapti Vighatana.			PSY- SET	МК	КН	D,D- BED	INT,CHK	F&S	III	-	NLHP16.2
Non L	ecture H	Iour Theory										
S.No		Name of Activity	Desci	ription of	Theory A	Activity						
NLHT 16.1 Case Discussion: Arumshika Duration: 20 Minutes Pre-preparation By the Teacher: Introduces the topic covering the prevalence of the disease Arumshika in child and its Nidana Panchaka and Chikitsa [PPT/ Handouts or Video]. By the Student: Expected to come prepared with a detailed Knowledge of Arumshika. Activity: 1. The teacher will lead the discussion, incorporating key points and utilizing images, videos or a Power Point presentation. 2. Discuss on Different presentation. 3. Discuss Differential diagnosis of the clinical presentation 4. Twak Pareeksha & Clinical examination. 5. Final diagnosis of Arumshika 6. Management and different medications and their application Role of teacher: Facilitate the discussion with required inputs.												

		Students are evaluated using Clinical Video Cases.
NLHT 16.2	Pathya in Twak Roga.	Duration: 40 Minutes Pre-preparation: By the teacher: Divide the group and assign the topic/Case one week before the session By the Student: 1. Frame the Ahara and Vihara Chart for Twak Roga 2. Writes the script and validate it before the class Script contains A. Name of the student: Role played by the student B. Script dialogues C. Using of Manikins/task trainers wherever necessary Activity: (Clinical classroom/class) 1. Faculty introduce the topic 2. Groups execute the role play 3. Discussions on points to be highlighted A. Ahara in different Twak Roga B. Vihara in different Twak Roga
NLHT 16.3	Oushadha Yogas used in Twak Roga	Duration: 1 HourPre-Preparation:By the teacher:1. The teacher will give an overview of the formulations used in Twak Roga 1 week before the session.2. Select any two relevant formulations used in Twak Roga, which are referenced in AyurvedaClassical Texts and are frequently used by practitioners of the respective state/ region.By the student:1. Students are expected to come with knowledge of the Management of Twak Roga.2. Collect the references of Oushadha Yoga used in the Twak Roga from various Samhitas.Activity:1. Students enlist Oushadha Yoga used in the Twak Roga from various Samhitas

 2. Enlist two Samanya Oushadha Yoga and two Vishesha (condition-specific) Oushadha Yoga used in Twak Roga by the teacher 3. Explain the Sloka word-by-word and highlight key terms. 4. Discuss the conceptual meaning and interpretation. 5. Explain Practical relevance. 6. Encourage questions and participant involvement. 7. Analyze the role of formulation in Samprati Vighatana 8. Analyze the practical application of the formulations in multiple disease conditions. 9. Cross-reference with related Sloka or commentaries.
9. Cross-reference with related Sloka or commentaries.
Role of Teacher: Ensure proper pronunciation and understanding of appropriate meaning.

Non Lecture Hour Practical

S.No	Name of Practical	Description of Practical Activity
NLHP 16.1	Case Discussion: Kusta/ Charmadala/ Visarpa.	Duration: 2 Hours
		Pre - Preparation:
		By the teacher:
		1. Schedule and ensure the availability of real/ simulated cases/ Case vignettes of Kusta/ Charmadala/ Visarpa
		2. Students are divided into groups (5-8 members in one group) and assigned a case.
		3. Make the student understand the OPD/IPD manners during case-taking
		4. Preparing the checklist for the concerned activity.
		By the student: The student is expected to come prepared with the knowledge of Nidanapanchaka and
		Chikitsa of diseases Kusta/ Charmadala/ Visarpa.
		Activity
		In the clinical classroom: Assign one case to each group Kusta/ Charmadala/ Visarpa (real case/
		simulated case)
		Bedside: Case taking as per the protocol (in real case)
		A. Rapport building
		B. History taking
		C. Clinical Examination (General & Skin and integumentary system)

NLHP 16.2 Kriyakramas (Procedure-based therapy) in Twak Roga. Duration: 1 Hour Pre-Preparation: By the Teacher: Identify two Kriyakrama (procedure-based therapy) used in Twak Roga that are referred to in Ayurveda Classical Texts and are frequently used by practitioners of the respective state/ region. Scheduling the demonstration and arranging the patient/ manikin. By the Student: Students are expected to study Twak Roga and its management in detail before th Activity. Activity: The teacher/therapist demonstrates the kriyakrama on the patient/manikin. Students are expected to observe – A. Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if need Collecting the ingredients and equipment, preparation of medicine, getting consent, fitness certifi if required, counselling the patient and caretaker)		1. Stude 2. Stude Diagno 3. Plan 4. Role 5. Teac	ents will o ents are a osis, Inves the mana play - Ex cher opens	sked to pre tigations, l gement an splain the c s the discus	mprapti Gł esent differ Manageme d justify Sa care plan, A	rent cases/ ent) amprapti V Ahara-Viha ferral Crite	the given case parts of a case Vighatana ara and progno eria for Twak	e (e.g. Hist osis to the	tory, Ex	amination	•
Topic 17 Sira Snavu Rogas (Nervous system disorders) (LH :7 NLHT: 3 NLHP: 9)	NLHP 16.2	Pre-PrBy the1. IdentAyurve2. ScheBy theActivityActivityActivity1. The2. StudeA. Pre-Collectif requiB. ProcC. Post3. Disc	reparation Teacher: tify two K eda Classi eduling the Student: S y. ty. teacher/the ents are e procedure ting the in ired, coun cedure (Teacher) teacher (Teacher)	n: Criyakrama cal Texts a e demonstr Students an erapist den xpected to e specific t gredients a selling the echnique o re specific ode of acti	nd are free ration and a re expected monstrates observe – o the proce and equipm patient and f procedure to procedure	quently use arranging t I to study T the kriyak edure (like nent, prepa d caretaken e, commun re and exp	ed by practitio he patient/ ma Fwak Roga an rama on the p Handwashing ration of med c) hication with t lain the Do's	oners of the anikin. d its mana atient/mar g, Wearing icine, getti he patient and Don't	e respec agement nikin. GCap/gl ang cons and car	tive state/ in detail b oves/mask sent, fitnes etaker)	region. efore the if needed,
		_H :7 NLI			F3	F3	C3	НЗ	13	КЗ	L3

CO 2,CO 3,CO 6	Explain Nidana Lakshana & Chikitsa of Jalasheershaka. Describe etiopathogenesis, classification, clinical features, complications and management of Hydrocephalus.	CC	МК	K	L_VC,L RI,L&P PT	T-CS, C- VC,INT	F&S	III	-	LH
CO 2,CO 3,CO 4	Diagnose and plan the management for a case of Jalasheershaka (Hydrocephalus).	CE	МК	КН	SIM,D, CBL	CHK,RS,P- CASE,SP	F&S	III	-	NLHT17.1
CO 2,CO 3,CO 6	Diagnose and plan Chikitsa of Apasmara.	CE	МК	КН	CD,L& GD,L_ VC	C-VC,T- CS	F&S	III	-	LH
CO 2,CO 3	Analyse the concept of Skanda Apasmara with epilepsy.	CAN	NK	KH	L&GD, BS,DIS	INT,CR- RED,CR-W	F	III	-	LH
CO 2,CO 3	Describe etiopathogenesis, clinical features, complications and management of Febrile Seizures in children. Define Epilepsy. Describe the pathogenesis, types, clinical features, diagnosis and management of Epilepsy in children.	СК	МК	K	L&PPT ,L_VC, LRI	T-CS, C- VC	F&S	III	-	LH
CO 2,CO 3,CO 4,CO 7	Examine and plan the management for a case of Apasmara.	PSY- GUD	МК	SH	D-BED, CBL,SI M	P-CASE,C HK,SP	F&S	III	-	NLHP17.1
CO 2,CO 3	Enumerate the causes of floppiness in an infant and discuss the differential diagnosis and management.	CC	DK	K	L_VC,B S,L&G D	INT,T-CS	F&S	III	-	LH

CO 2,CO 3	Describe etiopathogenesis, clinical features and management of Ataxia in children.	СК	МК	K	L_VC,L &PPT	C-VC,PM, T-CS	F&S	III	-	LH
CO 2,CO 3	Define Cerebral Palsy. Describe the etiology, types, clinical features, diagnosis and management of a child with Cerebral Palsy.	СК	МК	K	L&PPT ,TUT,L _VC	C-VC,T-C S,O-GAME	F&S	III	-	LH
CO 2,CO 3,CO 4,CO 7	Examine and plan the management for a case of Cerebral palsy.	PSY- GUD	МК	SH	D-BED, CBL,SI M	CHK,SP,P- CASE	F&S	III	-	NLHP17.2
CO 2,CO 3	Describe the classification, clinical features and management of Communication Disorders.	СК	MK	K	L&PPT ,TUT,L _VC	T-CS,PM, C-VC	F&S	III	-	LH
CO 2,CO 3,CO 4,CO 7	Diagnose and plan the management for a case of Communication Disorders.	CE	МК	SH	CBL,D- BED,SI M	SP,P-PS,C HK,RS	F&S	III	-	NLHT17.2
CO 4,CO 6,CO 8	Communicate the plan of Ahara and Vihara for Neurological Disorders to the caregivers.	AFT- RES	МК	SH	SIM,RP	RS,P- RP,CHK	F&S	III	-	NLHT17.3
CO 2,CO 3	Enlist the Oushadha Yogas used in Neurological Disorders. Enlist the ingredients and indications of at least two Samanya Oushadha Yoga and two Vishesha (condition-specific) Yogas used for Neurological Disorders and analyze their role in Samprapti Vighatana, Identify the referral criteria in Neurological	СК	МК	K	L&GD, BS,DIS	O-GAME,I NT,WP	F&S	III	-	NLHT17.4

	Disorders.									
CO 2,CO 3,CO 7,CO 8	Perceive two Kriyakramas (Procedure-based therapy) used in the management of Neurological Disorders in children and analyse the Samprapti Vighatana.	PSY- SET	МК	КН	D-M,D, D-BED	DOPS,DOP S	F&S	III	-	NLHP17.3
Non L	Non Lecture Hour Theory									

S.No	Name of Activity	Description of Theory Activity
S.No NLHT 17.1	Name of Activity Jalasheershaka (Hydrocephalus)	Description of Theory ActivityPre-preparationBy the Teacher:1. Schedule and give simulated cases/case vignettes of Jalasheershaka (Hydrocephalus).2. Students are divided into groups (5-8 members in one group) and assign cases with different presentations of Jalasheershaka (Hydrocephalus) to each groupBy the Student: The student is expected to come prepared with the knowledge of etiopathology, types, clinical features and management of the disease Jalasheershaka (Hydrocephalus).Activity in the classroom: Group Discussion - 1 hour1. Teacher gives a brief introduction of Jalasheershaka (Hydrocephalus)2. Students gather in assigned groups3. Develop the case as per the protocol with a complete history and clinical examination 4. Discuss Samprapti Ghatakas of a given case of Jalasheershaka5. Plan the management and with Samprapti VighatanaPresentation - 1 hour1. Students are asked to present different cases/ parts of a case (e.g. History, Examination, Differential
		 3. ROLE-PLAY - Explain the care plan, Ahara-Vihara, and prognosis to the parent/ guardian 4. Record the case in the record book. 5. Teacher summarizes the key points on the management of Jalasheershaka (Hydrocephalus).

NLHT 17.2	Communication Disorders.	Duration: 1 Hour Pre-preparation By the Teacher: 1. Schedule and give simulated cases/case vignette of Communication Disorder. 2. Students are divided into groups (5-8 members in one group) and assign cases with different presentations of Communication Disorder to each group By the Student: The student is expected to come prepared with the knowledge of etiopathology, types, clinical features and management of disease Communication Disorders. Activity in the classroom 1. Students gather in assigned groups 2. Develop the case as per the protocol with a complete history and clinical examination 3. Discuss Samprapti Ghatakas of a given case of Communication Disorder 4. Plan the management and with Samprapti Vighatana 5. Each group present different cases/ parts of a case (e.g. History, Examination, Differential Diagnosis, Investigations, Management) 6. Explain the management plan and justify the Samprapti Vigatana. 7. Explain the care plan, Ahara-Vihara, and prognosis to the parent/ guardian 8. Record the case in the record book.
NLHT 17.3	Pathya in Neurological Disorders.	Duration: 1 Hour Pre-preparation: By the teacher: Divide the students into groups and assign the topic one week before the session By the Student: 1. Frame the Ahara and Vihara Chart for Neurological Disorders. 2. Writes the script and validate it before the class Script contains A. Name of the student: Role played by the student B. Script dialogues (in local langugae/ esay to understand dialogues) C. Using of Manikins/task trainers wherever necessary Activity: (Clinical classroom/class) 1. Faculty introduce the topic

Non Lecture H	Hour Practical	
		 Neurological Disorders by the teacher 3. Explain the Sloka word-by-word and highlight key terms. 4. Discuss the conceptual meaning and interpretation. 5. Explain Practical relevance. 6. Encourage questions and participant involvement. 7. Analyze the Samprapti Vighatana 8. Analyze the practical application of the formulations in multiple disease conditions. 9. Discuss the referral criteria in Neurological Disorders.
		 Activity: 1. Enlist the Oushadha Yogas used in Neurological Disorders by the students mentioned in different Samhitas 2. Enlist the two Samanya Oushadha Yoga and two Vishesha (condition-specific) Yogas used for
NLHT 17.4	Oushadha Yogas used in Neurological Disorders.	 3. Discussions on points to be highlighted A. Ahara in different Neurological Disorders B. Vihara in different Neurological Disorders. Duration: 1 Hour Pre-Preparation: By the teacher: The teacher will give an overview of formulations used in Neurological Disorders along with their rationale. Select the relevant 2 formulations used in Neurological Disorders, which have a reference in Ayurveda Classical Texts and are frequently used by practitioners of the respective state/ region. By the student: Students are expected to come with the knowledge of Management of Neurological Disorders. Collect the references of Oushadha Yogas used in Neurological Disorders

NLHP 17.1	Case Discussion: Apasmara.	Duration: 3 Hours
	^	Preparation:
		By the teacher:
		1. Schedule and ensure the availability of real/simulated case/case vignette of Apasmara (different types of Apasmara)
		2. Students are divided into groups (5-8 members in one group) and assigned a case.
		3. Make the student understand the OPD/IPD manners during case-taking
		By the student: The student is expected to come prepared with the knowledge of Nidanapanchaka and
		Chikitsa of the disease Apasmara.
		Activity
		In the clinical classroom: Assign 1/2 real case/ simulated case/Case Vignette of Apasmara to each
		group
		Bedside: Case taking as per the protocol(real case)
		A. Rapport building
		B. History taking
		C. Clinical Examination
		Back in the clinical classroom:
		1. Students will discuss Samprapti Ghatakas of a given case of Apasmara.
		2. Students are asked to present entire cases/ parts of a case (e.g. History, Examination, Differential Diagnosis, Investigations, Management)
		3. Explain the management and justify Samprapti Vighatana
		4. ROLE-PLAY - Explain the care plan, Ahara-Vihara and prognosis to the parent/ guardian
		5. Record the case in the record book.
NLHP 17.2	Case Discussion: Cerebral palsy	Duration: 3 Hours
		Preparation:
		By the teacher:
		1. Schedule and ensure the availability of real/simulated cases/case vignette of Cerebral Palsy
		(Different types of Cerebral Palsy)
		2. Students are divided into groups (5-8 members in one group) and assigned a case.
		3. Make the student understand the OPD/IPD manners during case-taking

		 4. Preparing the checklist for the concerned activity. By the student: The student is expected to come prepared with the knowledge of Nidanapanchaka and Chikitsa of diseases Cerebral Palsy. Activity In the clinical classroom: Assign 1/2 real case/ simulated case/case vignette of Cerebral Palsy to each group Bedside: Case taking as per the protocol (in real case) A. Rapport building B. History taking C. Clinical Examination Back in the clinical classroom: 1. Students will discuss Samprapti Ghatakas of a given case of Cerebral Palsy. 2. Students are asked to present different cases/ parts of a case (e.g. History, Examination, Differential Diagnosis, Investigations, Management) 3. Explain the management and justify Samprapti Vighatana 4. ROLE-PLAY - Explain the care plan, Ahara-Vihara and prognosis to the parent/ guardian 5. Record the case in the record book.
NLHP 17.3	Kriyakramas (Procedure-based therapy) in Neurological Disorders in Children	 Duration: 3 Hour Pre-Preparation: By the Teacher: Identify two Kriyakramas (Procedure-based therapy) used in Neurological Disorders in children that have a reference in Ayurveda Classical Texts and are frequently used by practitioners of the respective state/ region. Scheduling the demonstration and arranging the patient/ Simulator. By the Student: Students are expected to study Neurological Disorders in children and their management in detail before the Activity. Activity: The teacher/therapist demonstrates the Kriyakrama to the patient. Students are expected to observe – A. Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed,

Topic 18 Unmada Rogas (Behavioral and Neurobehavioral disorders) (LH :3 NLHT: 4 NLHP: 9)

-										
A3	B3	C3	D3	E3	F3	G3	Н3	I 3	К3	L3
CO 2,CO 3	Diagnosis and management of Bala Unmada.	CE	MK	KH	CD,L& PPT ,DIS	C-VC,T- CS	F&S	III	-	LH
CO 2,CO 3	Enlist Behavioural and Neurobehavioral Disorders in Children. Describe the aetiology, clinical features, diagnosis and management of a child with Autism Spectrum Disorders (ASD).	СК	MK	К	DIS,ML ,L&PPT	O-GAME, C-VC,T-CS	F&S	III	-	LH
CO 2,CO 3	Diagnosis and management of Buddhi Mandya.	CE	DK	KH	BS,L& GD,DIS	T-CS, C- VC	F&S	III	-	LH
CO 2,CO 3,CO 8	Describe the etiology, clinical features, diagnosis and management of a child with Intellectual Disability (Mental retardation). Describe the types, clinical features, diagnosis and management of a child with Learning Disability and Scholastic Backwardness.	СК	МК	K	L&PPT ,BS,DIS	C-VC,O-G AME,T-CS	F&S	Ш	-	LH
CO 2,CO 3,CO	Describe the etiology, clinical features, diagnosis and management of a child with Attention Deficit Hyperactivity Disorder (ADHD). Describe the diagnosis and management of a	СК	МК	K	CD,L& PPT ,L_VC	T-CS, C- VC,PUZ	F&S	III	-	LH

8	child with Temper Tantrums and Breath-holding spells.									
CO 2,CO 3,CO 4,CO 7	Demonstrate the skill in diagnosis and management of ASD/ ADHD/ Intellectual Disability/ Learning Disability.	PSY- GUD	МК	SH	D-BED, CBL,SI M	CWS ,CHK ,P-CASE	F&S	III	-	NLHP18.1
CO 2,CO 3	Explain the etiology, types, clinical features, diagnosis and management of a child with Shayyamutra (Enuresis), Mritbhakshana (Pica) and Thumbsucking.	CC	МК	K	FC,CBL ,BL	C-VC,CH K,PM	F&S	III	-	NLHT18.1
CO 2,CO 3,CO 4,CO 7	Demonstrate the skill in diagnosis and management of Shayyamutra/ Breath-holding spells. Discuss the referral criteria for Neurobehavioural Disorders.	PSY- GUD	МК	SH	CBL,D- BED,SI M	CWS ,P- CASE,CH K	F&S	Ш	-	NLHP18.2
CO 2,CO 3,CO 8	Predict the multidisciplinary approach in children with Behavioural and Neurobehavioral Disorders.	САР	МК	КН	CBL,FC ,DIS	CL-PR,CH K,QZ	F	III	-	NLHT18.2
CO 3,CO 8	Explain Integrated Child Development Centre (ICDC).	CC	МК	KH	RLE,FV	CR-W,RK	F	III	-	NLHP18.3
CO 4,CO 6,CO 8	Plan and Explain the Ahara and Vihara for Behavioral and Neurobehavioral Disorders.	AFT- RES	МК	SH	SIM,RP	CHK,P- RP,RS	F&S	III	-	NLHT18.3
CO 2,CO	Enlist the Oushadha Yogas used in the Behavioural and Neurobehavioural Disorders. Enlist the ingredients and	CAN	МК	K	DIS,L	WP,QZ	F&S	III	-	NLHT18.4

3	Vishesh Neurob Vighata		nd apti						Eac			
2,CO 3,CO 4,CO 7	B,COAnalyse the Samprapti Vighatana for Behavioral and Neurobehavioral Disorders.			PSY- SET	МК	КН	D	DOPS,DOP S	F&S	III	-	NLHP18.4
Non L	ecture F	Hour Theory										
S.No		Name of Activity	Descr	iption of	Theory A	Activity						
NLHT 18.1 Shayyamutra (Enuresis), Breath Holding Spells, Mritbhakshana (Pica) and Thumbsucking.				numbsuck de the stud ign one ca e Student ty dents asser up discuss dents are e ef about th ntify the sy ntify the et gnose the n the Samp	rce materia ing (PPT/ dents into ase to each Expected mble in as sion on ass expected to be disease f ymptoms tiology case and is	Tutorial vid group(8-10 a group d to study t ssigned grou signed case o – from the re- dentify the	deo/Hando O students) the resource ups e -10 mins esource ma) ce material and	-	-		shana (Pica)

		6. Justify the treatment plan.
NLHT 18.2	Multidisciplinary approach in Behavioural and Neurobehavioral Disorder	 Duration: 1 Hour Pre-preparation By the Teacher: 1.Divide the students in groups (5 to 8 students each) and assign different cases of Behavioural and Neurobehavioral Disorders. 2.Provide the references of multidisciplinary approach in Behavioural and Neurobehavioral Disorders. By the Student: 1.Students are expected to come prepared with different multidisciplinary management approaches in children with Behavioural and Neurobehavioral Disorders. 2.Understand the case assigned and apply the multidisciplinary approach. Activity: 1. Students assemble in groups 2. Group Discussion 10 mins 3. One of the group member presents the following A. Explain the status of the child in brief B. Point out the required multidisciplinary integration for the management of the child based on present status. C. Frame a multidisciplinary management protocol. D. Explain the mode of action of all disciplines and the pivotal role of Ayurveda in the management of present behavioral and neurobehavioral disorders.
NLHT 18.3	Pathya Behavioral and Neurobehavioral Disorders	 Duration: 1 Hour Pre-preparation: By the teacher: Divide the group and assign the topic well in advance By the Student: 1. Frame the Ahara and Vihara Chart for Neurological Disorders. 2. Writes the script and validate it before the class Script contains

		 A. Name of the student: Role played by the student B. Script dialogues C. Using of Manikins/task trainers wherever necessary Activity: (Clinical classroom/class) 1. Faculty introduce the topic 2. Groups execute the role play 3. Discussions on points to be highlighted A. Ahara in different Behavioral and Neurobehavioral disorders B. Vihara in different Behavioral and Neurobehavioral disorders Role of the faculty during activity: The teacher evaluates the students using a rating scale/checklist and provides feedback and inputs based on their performance. Rating scale 1. Clarity of explanation - 1 (Poor) to 5 (Excellent) 2. Demonstrates empathy and understanding of the patient's emotional state - 1 (Poor) to 5 (Excellent) 3. Uses understandable words for explaining Ahara and Vihara - 1 (Poor) to 5 (Excellent) 4. Actively engages the patient, allowing for questions and checking the reception of information - 1 (Poor) to 5 (Excellent) 5. Maintains appropriate eye contact throughout the interaction - 1 (Poor) to 5 (Excellent) 6. Displays open and approachable body language - 1 (Poor) to 5 (Excellent) 7. Manages tone of voice to suit the context 1 (Poor) to 5 (Excellent) 8. Maintains professionalism throughout the interaction - 1 (Poor) to 5 (Excellent)
NLHT 18.4	Oushadha Yogas used in Behavioural and Neurobehavioural Disorders.	Duration: 1 Hour Pre-Preparation: By the teacher: 1. The teacher will give an overview of formulations used in Behavioural and Neurobehavioural Disorders along with their rationale. 2. Select two relevant formulations used in Behavioural and Neurobehavioural Disorders, which have a reference in Ayurveda Classical Texts and are frequently used by practitioners of the respective state/ region. By the student:

Role of Teacher: Ensure proper pronunciation and understanding of appropriate meaning.
--

Non Lecture Hour Practical

S.No	Name of Practical	Description of Practical Activity
NLHP 18.1	Case Discussion: ASD/ ADHD/ Intellectual	Duration: 3 Hours
	Disability/ Learning Disability	Pre - Preparation:
		By the teacher:
		1. Schedule and ensure the availability of real or simulated cases/ case vignettes of ASD/ ADHD/
		Intellectual Disability/ Learning Disability
		2. Students are divided into groups (5-8 members in one group) and assigned a case.
		3. Make the student understand the OPD/IPD manners during case-taking.
		By the student: The student is expected to come prepared with knowledge of Nidanapanchaka and
		Chikitsa for the diseases ASD/ ADHD/ Intellectual Disability/ Learning Disability.
		Activity
		In the clinical classroom: Assign a real/ simulated case/case vignette of ASD/ ADHD/ Intellectual

		 Disability/ Learning Disability to each group Bedside: Case taking as per the protocol (in real case) A. Rapport building B. History taking C. Clinical Examination Back in the clinical classroom: Students will discuss Samprapti Ghatakas of a given case of ASD/ ADHD/ Intellectual Disability/ Learning Disability. Students are asked to present different cases/ parts of a case (e.g. History, Examination, Differential Diagnosis, Investigations, Management) Explain the management and justify Samprapti Vighatana Roleplay - Explain the care plan, Ahara-Vihara and prognosis to the parent/ guardian Record the case in the record book.
NLHP 18.2	Case Discussion: Shayyamutra (Enuresis)/ Breath- Holding Spells	 Duration: 3 Hours Preparation: By the teacher: 1. Schedule and ensure the availability of real/simulated cases/case vignette of Shayyamutra (Enuresis)/ Breath Holding Spells. 2. Students are divided into groups (5-8 members in one group) and assigned a case. 3. Make the student understand the OPD/IPD manners during case-taking By the student: The student is expected to come prepared with the knowledge of Nidanapanchaka and Chikitsa of diseases Shayyamutra (Enuresis)/ Breath Holding Spells. Activity In the clinical classroom: Assign real or simulated cases of Shayyamutra (Enuresis)/ Breath Holding Spells to each group Bedside: Case taking as per the protocol (in real case) A. Rapport building B. History taking C. Clinical Examination Back in the clinical classroom:

		 Students will discuss Samprapti Ghatakas of a given case of Shayyamutra (Enuresis)/ Breath Holding Spells. Students are asked to present different cases/ parts of a case (e.g. History, Examination, Differential Diagnosis, Investigations, Management) Explain the management and justify Samprapti Vighatana ROLE-PLAY - Explain the care plan, Ahara-Vihara and prognosis to the parent/ guardian Record the case in the record book. The teacher should discuss the referral criteria for Neurobehavioural Disorders.
NLHP 18.3	Integrated Child Development Center	Duration: 2 HoursObjective: To provide students with a comprehensive understanding of the function of the Integrated Child Development Centre (ICDC) and how various health, nutrition and stimulation activities are carried out in collaboration with different caregivers.Pre-Preparation: By the Teacher: The teacher has to identify the suitable ICDC for the visit and make necessary arrangements.By the Student: Students have to come prepared with different types of multidisciplinary interventions in a child with Behavioural and Neuro-Developmental Disorders of children.Activity1. Students should visit the identified ICDC and observe the ongoing interventions.2. The teacher assists in clarifying queries of the students or facilitates it by arranging interaction with the staff of ICDC.3. Each student will submit a brief report of the observations in ICDC and structured feedback.
NLHP 18.4	Kriyakramas (Procedure-based therapy) in Behavioural and Neurobehavioral Disorders.	Duration: 1 Hour Pre-Preparation: By the Teacher: 1. Identify two Kriyakrama (procedure-based therapy) used in Behavioural and Neurobehavioral Disorders, which are referenced in Ayurveda classical texts and frequently used by practitioners of the

	 respective state/ region. 2. Scheduling the demonstration and arranging the patient/ Simulator. By the Student: Students are expected to study Behavioural and Neurobehavioral Disorders and their management in detail before the Activity. Activity: 1. The teacher/ therapist demonstrates the Kriyakrama to the patient. 2. Students are expected to observe – A. Pre-procedure specific to the procedure (like Handwashing, Wearing Cap/gloves/mask if needed, Collecting the ingredients and equipment, preparation of medicine, getting consent, fitness certificate if required, counseling the patient and caretaker) B. Procedure (Technique of procedure, communication with the patient and caretaker) C. Post-procedure specific to the procedure and explain the Do's and Don't to follow. 3. Assignment: Write the mode of action/ Samprapti Vighatana of the procedure
--	---

Topic 19 Atyayika Rogas (Emergency Paediatrics) (LH :3 NLHT: 2 NLHP: 3)

-			/							
A3	B3	C3	D3	E3	F3	G3	Н3	I 3	K3	L3
CO 2,CO 3	Define Status Epilepticus and describe the symptoms and management of Status Epilepticus.	СК	MK	K	CD,L& PPT ,L_VC	T-CS,PM, C-VC	F&S	III	-	LH
CO 2,CO 3	Describe the symptoms and management of Acute Breathlessness, Cardiorespiratory Arrest and Foreign Body in Respiratory Tract.	СК	MK	К	L_VC,C D,L&PP T	PM, C- VC,T-CS	F&S	III	-	LH
CO 2,CO 3	Describe the symptoms and management of Poisoning and Insect bites.	СК	MK	K	CD,L_V C,L&G D	PM, C- VC,PUZ	F&S	III	-	LH
CO 2,CO	Describe the symptoms and management of Shock in children.	СК	MK	К	CD,L& PPT	T-CS,O- QZ,PM	F	III	-	LH

NLHT 19.1 Fluid resuscitation methods and techniques. Duration – 1 hour Pre-Preparation By the Teacher 1. Preparing the resource material on fluid resuscitation methods and techniques in paedia emergencies (PPT/Videos/Handouts) 2. Manikin/real patient, Instruments, and equipment to demonstrate By the student: Study the resource material provided thoroughly.								ıtric				
S.No		Name of Activity	Description of Theory Activity									
Non L	ecture I	Iour Theory										
CO 2,CO 3	Identify	v life-saving medications and enlist their indication.		САР	DK	K	EDU,F C,GBL	O-GAME, CHK,RS	F	III	-	NLHP19.3
CO 2,CO 3	CO medications used in paediatric practice.		l	CAP	DK	KH	EDU,F C,GBL	CHK,O- GAME,RS	F&S	III	-	NLHT19.2
CO 2,CO 7,CO 8	CO CO			PSY- GUD	DK	SH	RP,SIM ,W,D-M	CHK,DOP S,DOPS,RS	F&S	III	-	NLHP19.2
CO 2,CO 4,CO 7	Demon trainers	strate the procedure of IV cannulation on pediatric ta	ask	PSY- GUD	DK	SH	RP,W,D- M	CHK,DOP S,RS,DOPS	F&S	III	-	NLHP19.1
CO 2,CO 3	Apply the emerge	he fluid resuscitation methods and techniques in pae ncies.	ediatric	CAP	DK	KH	PBL,FC ,D	O-GAME, CHK,PM	F&S	III	-	NLHT19.1
3							,L_VC					

		Activity:
		1. Dividing the class into small groups for edutainment
l		2. Faculty displays a case vignette (which includes assessment of fluid status and weight measurement)
		at each round of the game with varying difficulty.
		3. Student is expected to select the Type of fluid and plan the dose.
		4. Demonstration of the fluid resuscitation technique on manikin or real patient by the faculty.
		5. Compile fluid resuscitation methods and techniques in paediatric emergencies.
NLHT 19.2	Nebulization and per rectal medications used in	Duration: 1 Hour
	Paediatric practice.	Pre preparation
	*	By the Teacher :
		1. The teacher briefly introduces students to various indications of nebulization and per-rectal
		medications in paediatric practice by sharing the handouts/PPTs.
		2. Required material /case vignettes (video, animations, movie clips, respiratory sounds, clinical case recordings, clinical drama, images, etc.) to be collected before the session.
		By the student: Student is expected to have minimum/prior knowledge about indications of
		nebulization and per rectal medications before the session.
		Activity
		1. Students are divided into groups
		2. The teacher randomly displays animation/videos/sounds/movie clips etc related to the indication of the above procedures with varying levels of case difficulty at each level.
		3. Students should identify the following
		a. Disease
		b. Procedure required
		c. Select a suitable drug, duration and dose
		Role of a Teacher: The teacher evaluates students' performance based on a checklist /rating
		scale/Scorecard.
Non Lecture	Hour Practical	
S.No	Name of Practical	Description of Practical Activity

NLHP 19.1	IV cannulation	Duration - 1 hour
		Prerequisite /preparation
		By the Teacher:
		1. Prepare the IV cannula KIT, Manikin/task trainer before the session.
		2. Share the resource material (PPT/Video/recorded lecture) on IV cannulation 1 week before the
		activity.
		By the Student: Students are expected to study the resource material before the activity.
		Activity –
		1. Demonstration of IV cannulation by the faculty on task trainer/mannikin.
		2. Students are divided into groups (5-8 students in one group)
		3. Students are asked to demonstrate the procedure to their peers and practice the procedure.
		4. Record the standard operative procedure in the activity record/logbook
		Evaluation: Faculty will evaluate using rating scale based on the student's performance.
		Rating Scale [Done: 2, Partly done: 1, Not Done: 0]
		1. Pre-procedure:
		A. Rapport building and assuring the patient for the procedure
		B. Hand hygiene and gloving
		C. Tourniquet application
		D. Site cleansing
		2. Procedure:
		A. Stabilize the vein
		B. Cannula selection
		C. Inserting the cannula and remove the needle
		D. Securing the cannula
		3. Post-procedure:
		A. Care for an IV cannula.
NLHP 19.2	Cardio-pulmonary resuscitation	Duration: 1 hour
		Prerequisite/preparation
		By the Teacher:
		1. Sharing the resource material on CPR (Handout and Video)

		 2. Preparing the instrument/equipment and paediatric Manikins before the session. By the Student: Learning the resource material before the session. Activity – Students are divided into groups (5-8 members in one group) Demonstration of CPR on the paediatric manikin by the faculty Demonstration of CPR on the paediatric manikin by the students in the group Record the procedure. Role of a Teacher: The teacher evaluates students' performance based on a checklist /rating scale/Scorecard. Rating Scale: [Done: 2, Partly done: 1, Not done: 0] Pre - Procedure : Rapport building and assuring the caretaker for the procedure.(if present) Procedure Assessing the patient by stimulus Call for help Position the manikin Position of the rescuer Perform chest compressions Perform chest compressions Perform rescue breaths Continue CPR/ weaning CPR
NLHP 19.3	Lifesaving medications.	Duration: 1 Hour Pre-Preparation By the Teacher: 1. The teacher briefly introduces students to various emergency medicines (Related to Acute Breathlessness, Cardiorespiratory Arrest, Shock, Poisoning and Status Epilepticus) used in paediatric practice by sharing the handouts/PPT.A list of emergency medicines will be given to students.(See Appendix)

2. Required material /case vignettes (video, animations, movie clips, respiratory sounds, clinical case recordings, clinical drama, images) to be collected before the session.

By the student: The student is expected to come prepared with the provided resource material. **Activity:**

1. Students are divided into groups

2. The teacher randomly displays emergency conditions through animation/videos/sounds/movie clips with varying levels of case difficulty at each level.

3. Students should identify the following

a. Diagnose the condition

b. Identify life-saving medications

c. Enlist their indication.

Role of a Teacher: The teacher evaluates students on their performance.

LIST OF EMERGENCY MEDICINES USED IN PAEDIATRICS

Respiratory Emergencies

- Swasanandam Gulika
- Rasasindooram
- Swasakutara rasa
- Abraka Bhasma
- Kastooribhairava rasa
- Salbutamol (Albuterol) Bronchodilator for asthma and bronchospasm
- Ipratropium bromide Anticholinergic bronchodilator
- Adrenaline (Epinephrine) For anaphylaxis and severe asthma
- Dexamethasone Corticosteroid for croup or severe asthma

2. Cardiovascular Emergencies

- Prabhakara vati
- Danwantharam Gulika

- Sringabhasma
- Yogendra rasa
- Sidhamakaradwaja
- Adrenaline (Epinephrine) Cardiac arrest, anaphylaxis, bradycardia
- Atropine For bradycardia or heart block
- Amiodarone Antiarrhythmic for ventricular arrhythmias
- Dopamine Inotropic support for shock or heart failure
- Norepinephrine (Noradrenaline) Vasopressor for septic shock

3. Seizures and Neurological Emergencies

- Mansyadi kashaya
- Vatakulanthaka rasa
- Brihatvata Chintamani rasa
- Kalyanaka Grita
- Samvardhana ghrita
- Vacha churna
- Diazepam For status epilepticus or febrile seizures
- Midazolam For status epilepticus (intranasal or IV)
- Phenytoin For seizure management
- Phenobarbital For neonatal seizures or status epilepticus
- 4. Infections/Sepsis
 - Rasasindoora
 - Kaisoragulgulu
 - Gandhakarasayana
 - Rasamanikya
 - Rasapippari

• Ceftriaxone – Broad-spectrum antibiotic for sepsis or meningitis • Ampicillin - Antibiotic for bacterial infections, including meningitis • Vancomycin - For resistant bacterial infections • Clindamycin – For anaerobic infections and toxic shock syndrome 5. Metabolic and Endocrine Emergencies • Karpoora rasa • Balarka rasa • Sankabhasma • Sanjeevani vati • Dextrose 10%, 25%, or 50% – For hypoglycemia • Calcium gluconate - For hypocalcemia, hyperkalemia, or cardiac support • Hydrocortisone – For adrenal insufficiency or severe shock • Insulin – For diabetic ketoacidosis (DKA) 6. Allergic Reactions/Anaphylaxis • Haridrakhanda • Gandhakarasayana • Arogyavardhini Rasa • Laghusootasekhara rasa • Adrenaline (Epinephrine) – First-line treatment for anaphylaxis • Diphenhydramine (Benadryl) – Antihistamine for allergic reactions • Methylprednisolone - Corticosteroid for severe allergic reactions 7. Fluid and Electrolyte Management

- Panchamrutha parpati
- Rasaparpati
- Karpoora churna
- Normal saline (0.9% NaCl) For dehydration and shock
- Ringer's lactate Fluid resuscitation
- Oral Rehydration Solution (ORS) For mild to moderate dehydration
- Potassium chloride For hypokalemia

8. Pain and Fever Management

- Swarnamuktadi gulika
- Vettumaran Gulika
- Anandhabhairava rasa
- Sudarsana ghana vati
- Guluchee satwa
- Sootasekhara rasa
- Gulgulutiktakam ghrita
- Paracetamol (Acetaminophen) For fever and mild pain
- Ibuprofen For pain, fever, and inflammation

9. Poisoning and Overdose

- Villwadi Gulika
- Doshee vishari Gulika
- Sireeshadi vati
- Activated charcoal For ingested poisons
- Naloxone For opioid overdose
- N-Acetylcysteine (NAC) For paracetamol (acetaminophen) overdose

	10. Miscellaneous
	• Magnesium sulfate – For torsades de pointes, severe asthma, or eclampsia
	 Sodium bicarbonate – For severe metabolic acidosis, hyperkalemia, or certain poisonings Furosemide – For fluid overload or pulmonary edema

Topic 20 Bala Panchakarma (LH :5 NLHT: 0 NLHP: 8)

A3	B3	C3	D3	E3	F3	G3	H3	I3	K3	L3
CO 3,CO 7	Enlist Rukshana methods. plain the indications, contraindications and methods of Udwartana.	CC	MK	K	L_VC,L &GD	CL-PR,WP, M-POS	F&S	III	-	LH
CO 3,CO 7,CO 8	Analyze the selection of medicines for Udwartana. Perceive the steps of Udwartana.	PSY- SET	МК	КН	D-M,D, DIS	P-PRF,INT, SBA	F&S	III	-	NLHP20.1
CO 3,CO 7	Enlist Bahya and Abhyanthara Snehana methods. Explain the indications, contraindications and methods of Abhyanaga, Moordhnitaila and Snehapana.	CC	MK	К	RLE,L_ VC,L& GD	CL-PR,M- POS,QZ	F&S	III	-	LH
CO 3,CO 7,CO 8	Analyze the selection of medicines for Abhyanaga, Moordha Taila and Snehapana. Demonstrate Abhyanga & Pichu.	PSY- GUD	МК	SH	D,D-BE D,DIS, D-M	P-PRF,SBA ,INT	F&S	III	-	NLHP20.2
CO 3,CO 7	Enlist types and methods of Swedana. Explain the indications, contraindications and methods of Pinda Sweda, Nadisweda and Upanaha.	CC	MK	К	L_VC,L &GD	M-MOD,W P,PUZ	F&S	III	-	LH
CO 3,CO	Analyze the selection of medicine and duration for Pinda Sweda, Nadisweda and Upanaha.	CAN	МК	КН	DIS,L& GD,D	INT,SBA	F&S	III	-	NLHP20.3

S.No	Name of Practical	Descriptio	on of Pr	actical	Activity						
Non L	ecture Hour Practical										
S.No	Name of Activity	Descriptio	on of Th	neory A	ctivity						
Non L	ecture Hour Theory										
CO 2,CO 4,CO 7,CO 8	Perceive Kriyakalpa in children (Ashchyotana, Seka, Tarpana Karnapurana)	a and PS SE		МК	КН	D- M,PT,D	CHK,INT,L og book	F	III	H-SH	NLHP20.6
CO 3,CO 7	Discuss the application of other Karmas - Ashchyotana, Seka Anjana, Tarpana, Karnapurana, Karnadhoopana, Kavala, Gandusha.	ı, C	C	DK	КН	DIS,RL E,L&G D	M-POS,PU Z,INT	F	III	-	LH
CO 7,CO 8	Perceive Vamana, Virechana, Vasti, Nasya and Raktamokash	nana. PS SE		МК	КН	PT,D,D- M	Log book,I NT,CHK	F&S	III	-	NLHP20.5
CO 3,CO 8	Explain the Indications, Contraindications, selection of medic and SOPs of Vamana, Virechana, Nasya and Rakthamokasha Explain the indications, contraindications, selection of medic and SOPs of Vasti.	ina.	C	МК	K	L&GD, DIS,SD L	INT,M- CHT	F&S	III	-	LH
7,CO 8 CO 3,CO 4,CO 7,CO 8	Demonstrate Shashtika Shali Pinda Sweda, Nadisweda and Upanaha.	PS GU		МК	SH	D-M,D- BED,D	DOPS,CH K,P- PRF,DOPS	F&S	III	-	NLHP20.4

NLHP 20.1	Udwartana.	 Duration: 1 Hour Pre-Preparation By the Teacher: Arranging the real patient/manikin/pre-recorded video for a demonstration of Udwartana Collection of various Udwartana Churna used in paediatric practice. By the student: Students should come prepared with Rukshana Methods in children and Udwartana procedure Activity Teacher or therapist demonstrates the method of Udwartana Churna used in different disease Record the procedure Role of a Teacher: Demonstration of procedure and making sure that students analyse the selection of medicine. The teacher evaluates students based on the interaction and by giving a case scenario and asking the students to choose the appropriate Udwartana Churna.
NLHP 20.2	Snehana.	 Duration: 1 Hour Pre-Preparation By the Teacher: Arranging the real patient/manikin/pre-recorded Video for demonstration of Abhyanaga, Moordha Taila and Snehapana in children. Collection of various Snehanas (Different Ghrita/Taila etc) used in Kaumarabhritya practice. By the student: Students should come prepared with the topic Snehana in children. Activity The teacher or therapist demonstrates the method of Abhyanga, Moordha Taila and Snehapana in children. The teacher opens a discussion on different kinds of Snehana used in different disease Observe and record the post-procedure regimens and activity. Hands-on training of different methods of Snehanas. Role of a Teacher: Demonstration of procedure and making sure that students analyse the selection of medicine. The teacher evaluates the students based on the interaction and by giving a case scenario and

		asking the students to choose the appropriate method of Snehana and appropriate medicine.
NLHP 20.3	Swedana I - Selection of method and dravya	Duration: 1 Hour Pre-Preparation By the Teacher: 1. Arranging the real patient/clinical video of patients requiring Pinda Sweda, Nadisweda and Upanaha 2. Collection of various Swedana Dravya By the student: Students should come prepared with the topic Swedana in children. Activity 1. The teacher opens a discussion on different methods of Swedana in different diseases in children. 2. The teacher presents different clinical cases of patients requiring Pinda Sweda, Nadisweda and Upanaha and discusses different Dravyas used. Role of a Teacher: The teacher evaluates students based on the interaction by giving a case scenario and asking the students to choose the appropriate method of Swedana and appropriate Dravya.
NLHP 20.4	Swedana II.	Duration: 1 Hour Pre-Preparation By the Teacher: 1. Arranging the real patient/manikin/recorded Video for demonstration of Shashtika Shali Pinda Sweda, Nadisweda and Upanaha in children. 2. Collection of various Swedana Dravya and equipment used in paediatric practice. By the student: Students should come prepared with the topic Swedana in children. Activity 1. The teacher or therapist demonstrates the method of Shashtika Shali Pinda Sweda, Nadisweda and Upanaha in children. 2. Observe and record the post-procedure regimens and activity. 3. Hands-on training of different methods of Swedana i.e., Shashtika Shali Pinda Sweda, Nadisweda and Upanaha in children. Role of a Teacher: The teacher evaluates students based on their performance using a checklist. Checklist: Yes/No

NLHP 20.6	Kriyakalpa in children	Duration: 1 hour Pre-preparation:
		 Checklist: 1. Skills of obtaining the consent: Perceived/Not perceived 2. Pre-procedure: Perceived/Not perceived A. Rapport building and assuring the patient of the procedure B. Collection of necessary Dravya and equipment 3. Procedure (SOP of Vamana, Virechana, Vasti, Nasya, and Raktamokashana in children): Perceived/Not perceived 4. Post-procedure (Post procedure regimens and activity): Perceived/Not perceived.
		 pre-recorded video. 2. Discussion on Pre-procedure, Procedure and Post-procedure regimen and activity. 3. Record the procedure in the log book. Role of a Teacher: The teacher evaluates students based on the interaction and Checklist
NLHP 20.5	Panchakarma in children	Duration: 3 hours Prerequisite /preparation By the Teacher: 1. Arranging the real patient/recorded Video for demonstration of Vamana, Virechana, Vasti, Nasya and Raktamokshana in children. 2. Ensure the arrangements in the theatre with all necessary prerequisites for the procedure. 3. Instruct the students about the code of conduct during the procedure. By the student: Students are expected to come prepared with the topic Panchakarma in children. Activity – 1. Demonstration of Vamana, Virechana, Vasti, Nasya and Raktamokshana in children on real patient
		 Explains the procedure and take the consent Explains the pre-procedure Perform Shashtika Shali Pinda Sweda, Nadisweda and Upanaha optimally. Explain the post-procedure regimens efficiently.

	 By the Teacher: 1. Arranging the real patient/recorded video for a demonstration of Ashchyotana, Seka, Tarpana and Karnapurana in children. 2. Ensure the arrangements in the theatre with all necessary prerequisites for the procedure. 3. Instruct the students about the code of conduct during the procedure. By the student: Students are expected to come prepared with the topic of Ashchyotana, Seka, Tarpana and Karnapurana. Activity – 1. Demonstration of Ashchyotana, Seka, Tarpana and Karnapurana on real patient/ pre-recorded video. 2. Discussion on Pre-procedure, Procedure and Post-procedure regimen and activity. 3. Record the procedure. Role of a Teacher: The teacher evaluates students based on the interaction.
--	---

Topic 21 Kishora Swasthya (Adolescent Health) (LH :2 NLHT: 0 NLHP: 1)

A3	B3	С3	D3	E3	F3	G3	Н3	I3	K3	L3
CO 1,CO 3,CO 8	Analyze the understanding of Kishora Swasthya (adolescent health) in Ayurveda. Define adolescence. Explain the stages of adolescence. Explain the physical, physiological and psychological changes during adolescence.	CAN	DK	КН	PER,PL ,FC,DIS	CL-PR,INT ,DEB	F&S	III	-	LH
CO 1,CO 3	Assess the physical, physiological and psychological changes during adolescence.	CE	DK	КН	GBL,PB L,EDU	O-QZ,O- GAME	F&S	III	-	NLHP21.1
CO 1,CO 2,CO 8	Enlist the health problems during adolescence. Explain adolescent sexuality	CC	МК	K	DIS,L& PPT	WP,O- QZ,QZ	F&S	III	-	LH
Non Lo	ecture Hour Theory									

S.No	Name of Activity	Description of Theory Activity							
Non Lecture	Hour Practical	·							
S.No Name of Practical Description of Practical Activity									
NLHP 21.1	Adolescence.	Duration: 1 Hour							
		Pre-Preparation							
		By the Teacher:							
		1. Dividing the students into groups							
		2. Case vignettes (videos/images) to be arranged before the session.							
		By the student: The student is expected to come prepared with the topic							
		Activity							
		1. Students gather in groups.							
		2. Teacher randomly displays videos/images.							
		3. Students should assess the physical, physiological and psychological changes.							
		Role of a Teacher: The teacher evaluates students' performance based on a checklist /rating							
		scale/Scorecard.							
		Checklist:							
		1. Identifies the normal growth and development according to age accurately							
		2. Identifies physical, physiological and psychological changes in adolescence precisely							
		3. Identify the deviation in normal changes during adolescence.							
		4. Good Team Collaboration.							

Topic 22 Anya Rogas (Miscellaneous Diseases) (LH :1 NLHT: 1 NLHP: 0)

A3	B3	C3	D3	E3	F3	G3	Н3	I3	К3	L3
CO 2,CO 3	Describe the Inborn errors of metabolism, Congenital Rubella Syndrome, Celiac Disease, Spinal Muscular Atrophy, Guillain Barre Syndrome, Sickle Cell Anemia, Wilson's Disease, Utpullika, Ajagallika, Kukunaka and Talu Kantaka.	СК	DK	Κ	DIS,L_ VC,L& PPT	O- GAME,QZ ,WP	F	III	-	LH

2,CO 3 U	2,CO Syndrome, Celiac Disease, Spinal Muscular Atrophy, Guillain			DK	КН	PBL,FC ,ML,ED U	CHK,RS,O- GAME	F	III	-	NLHT22.1	
S.No	Name of Activity	Dega	wintian of	Theory A	. ativity							
NLHT 22	•	Dura Pre-F By th 1. Div 2. Cas By th 1. Stu Rubel Anem session Activ 1. Stu 2. Tea 3. Stu A. Ide B. Dia Role scale/ Chec 1. Ide 2. Dia	tion: 1 Ho reparation e Teacher viding the se vignette e student: dent is exp lla Syndromia/ Wilson on. ity dents gath acher rando dents are e entify the s agnose the of a Teach Scorecard klist: ntifies the	our students in students in s (videos/i pected to co me/ Celiac n's Disease, er in group omly display expected symptoms case her: The te symptom a case correction	to groups mages) to ome prepa Disease/S (Utphullik os ays videos acher eval	ared with the Spinal Mus a/Ajagallik s/images	ed before the se e topic Inborn cular Atrophy/ a/ Kukunaka/T	errors of n Guillain I Galu Kanta	Barre S	yndrome/ re coming	Sickle Cell to the	

Non Lecture Hour Practical						
S.No	Name of Practical	Description of Practical Activity				

Activity No*	CO No	Activity details
2.1	CO 1,CO 3,CO 5,CO 6	Childhood Samskaras
3.1	CO 3,CO 7,CO 8	Navajata Shishu Paricharya and Pranapratyagamana
3.2	CO 1,CO 3	Ayu Pariksha Vidhi
3.3	CO 3,CO 5,CO 6	Neonatal disorders
4.1	CO 5,CO 6	Complementary feeding I (in the absence of Stanya)
4.2	CO 5,CO 6	Complementary feeding II (in the absence of Breastmilk)
4.3	CO 3,CO 5	Swarnaprashana
4.4	CO 4,CO 5,CO 8	Breast feeding week program.
4.5	CO 2,CO 3	Ksheeralasaka
5.1	CO 3,CO 5	Vyadhikshamatwa and Immunity I
5.2	CO 3,CO 5,CO 6	Vyadhikshamatwa and Immunity II
5.3	CO 4,CO 5,CO 6	RCH programmes and Perinatal care for Healthy Child
6.1	CO 2,CO 3	Concept of Phakka Roga
6.2	CO 2,CO 3	Kuposhana Janya Vyadhis and Nutritional Deficiency Disorders
8.1	CO 2,CO 3,CO 6,CO 8	Procedure based therapies and Oushadhas in Sahaja Vyadhis
8.2	CO 2,CO 3,CO 8	Surgical intervention and referral criteria of Congenital and Chromosomal disorders
9.1	CO 3,CO 6,CO 8	Management(Chikitsa) of tuberculosis in children.

9.2	CO 2,CO 3	Concept of Graha Roga in context of infectious diseases.
9.3	CO 3,CO 6	Management of different type of Jwara.
9.4	CO 2,CO 3	Oushadha yogas used for Krimi Chikitsa.
10.1	CO 2,CO 3	Oushadha Yoga in Pratishaya, Kasa, Shwasa
10.2	CO 4,CO 6,CO 8	Ahara and Vihara for Pratishaya, Kasa, Shwasa
11.1	CO 3,CO 4,CO 6	Oushadha Yogas, Pathya in Aatisara, Grahani and Pravahika.
11.2	CO 3,CO 4,CO 6	Oushadha Yogas and Pathya used in Chhardi.
11.3	CO 2,CO 3,CO 6	Oushadha Yoga and Pathya in Vibandha.
12.1	CO 2,CO 3	Bheda and referral criteria of Pandu and Anemia.
12.2	CO 2,CO 3	Haemorrhagic Diseases in children.
12.3	CO 2,CO 3	Udara Roga: hepatomegaly and splenomegaly.
13.1	CO 2,CO 3,CO 4,CO 6	Diabetes Mellitus (Prameha)
13.2	CO 1,CO 2,CO 3,CO 6	Precocious and Delayed Puberty
14.1	CO 2,CO 3	Refererral criteria of Genito urinary disorders
14.2	CO 2,CO 3,CO 6	Scope of treatment & ahara-vihara plan in Mutra vaha Sroto Vikara
15.1	CO 2,CO 3,CO 6	Referral criteria & Pathya in Rheumatological disorders.
15.2	CO 2,CO 3,CO 6	Integrated treatment for Rheumatological Disorders

16.1	CO 2,CO 3,CO 6	Case Discussion: Arumshika
16.2	CO 2,CO 4,CO 6	Pathya in Twak Roga.
16.3	CO 2,CO 3	Oushadha Yogas used in Twak Roga
17.1	CO 2,CO 3,CO 4	Jalasheershaka (Hydrocephalus)
17.2	CO 2,CO 3,CO 4,CO 7	Communication Disorders.
17.3	CO 4,CO 6,CO 8	Pathya in Neurological Disorders.
17.4	CO 2,CO 3	Oushadha Yogas used in Neurological Disorders.
18.1	CO 2,CO 3	Shayyamutra (Enuresis), Breath Holding Spells, Mritbhakshana (Pica) and Thumbsucking.
18.2	CO 2,CO 3,CO 8	Multidisciplinary approach in Behavioural and Neurobehavioral Disorder
18.3	CO 4,CO 6,CO 8	Pathya Behavioral and Neurobehavioral Disorders
18.4	CO 2,CO 3	Oushadha Yogas used in Behavioural and Neurobehavioural Disorders.
19.1	CO 2,CO 3	Fluid resuscitation methods and techniques.
19.2	CO 2,CO 3	Nebulization and per rectal medications used in Paediatric practice.
22.1	CO 2,CO 3	Miscellaneous diseases

Practica l No*	CO No	Practical Activity details				
2.1	CO 1,CO 3	Assessment of Growth I				
2.2	CO 1,CO 3	Assessment of Growth II				
2.3	CO 1,CO 3	Status of Dhatu				
2.4	CO 1,CO 3	ndernourished child				
2.5	CO 1,CO 4	Assessment of Developmental Milestones in normal child				
2.6	CO 1,CO 2,CO 4	Assessment of Developmental Delay				
2.7	CO 1,CO 2,CO 4	Case of Developmental Delay				
3.1	CO 3,CO 7,CO 8	Neonatal Resuscitation and Intranatal care.				
3.2	CO 1,CO 7	Examination of Newborn and Assessment of gestational age.				
3.3	CO 3,CO 4,CO 7	Newborn care after discharge				
3.4	CO 2,CO 3	Neonatal seizures /Akshepaka and Skandapasmara.				
3.5	CO 2,CO 3	Neonatal diseases				
3.6	CO 2,CO 3	Case of Neonatal Jaundice.				
4.1	CO 4,CO 7,CO 8	Breastfeeding techniques				
4.2	CO 5,CO 6	Complementary feeding Survey				
4.3	CO 1,CO 3,CO 4,CO 8	Stanya Vriddhi, Stanya Kshaya and Stanya Pareeksha				

4.4	CO 5,CO 7	Preparation of Swarnaprashana
5.1	CO 1,CO 4,CO 5,CO 6	Nutritional Assessment in children
5.2	CO 3,CO 4,CO 5	Parent Counselling on Immune modulation
5.3	CO 4,CO 5,CO 7,CO 8	Immunization in children
6.1	CO 2,CO 3,CO 6	Case Discussion: Malnutrition
7.1	CO 2,CO 3	Calculation of Pediatric Drug Doses
7.2	CO 2,CO 4,CO 7	Application of Samprapti Gatakas in a Pediatric Case: Part I
7.3	CO 2,CO 3	Application of Samprapti Gatakas in a Pediatric Case: Part II
7.4	CO 2,CO 3,CO 6,CO 7	Clinical case taking
7.5	CO 2,CO 4,CO 6,CO 8	Conseling regarding patient care
7.6	CO 2,CO 3,CO 6	Pediatric Ethobotonical Survey of Herbal Garden
8.1	CO 2,CO 3,CO 8	Turner syndrome
8.2	CO 2,CO 3,CO 8	Down syndrome
8.3	CO 2,CO 3,CO 4,CO 8	Prevention of Congenital anomalies
9.1	CO 2,CO 3,CO 4	Case Discussion: Auspasagika Jwara and Krimi Roga
9.2	CO 6,CO 8	Pathya and Kriyakrama used in Jwara and Krimi.
10.1	CO 2,CO 3,CO 7	Examination of Ear and Throat
10.2	CO 2,CO 3,CO 4	Case Discussion: Pratishyaya.
10.3	CO 2,CO 3,CO 4	Case Discussion: Kasa.

10.4	CO 2,CO 3,CO 4	Case Discussion: Shwasa.
10.5	CO 7,CO 8	Kriyakrama used in management of Pratishaya,Kasa & Shwasa
11.1	CO 3,CO 4,CO 6	Physiological basis and composition of various ORT
11.2	CO 3,CO 7,CO 8	Kriyakrama used in the management(Chikitsa) of Chhardi.
11.3	CO 3,CO 7,CO 8	Kriyakrama used in the management of Vibandha.
11.4	CO 2,CO 3	Case Discussion:Mukhapaaka, Gulma, Gudabramsa and Parikartika.
11.5	CO 2,CO 3	Signs and symptoms of GI and Liver disorders
11.6	CO 2,CO 3,CO 4	Case Discussion: Maha Stroto Vikara.
12.1	CO 2,CO 3,CO 6	Complementary, alternative treatment protocol, Pathya in Anemia.
12.2	CO 3,CO 7,CO 8	Kriyakrama used in management of Pandu
12.3	CO 2,CO 3,CO 6	Complementary, alternative treatment protocol, Pathya in Kamala.
12.4	CO 3,CO 7,CO 8	Kriyakrama used in the management of Kamala.
12.5	CO 2,CO 3,CO 4,CO 6	Case Discussion: Pandu, Anaemia and Kamala.
13.1	CO 2,CO 3,CO 7	KriyaKrama in T1DM
14.1	CO 2,CO 3,CO 4	Examination of kleda agni kosta in mutra and shukra vaha srotas
14.2	CO 3,CO 4,CO 7	Kriya karma in Mutra Vaha Sroto Vikara
15.1	CO 3,CO 7,CO 8	Kriya Krama in Rheumatological disorders
15.2	CO 2,CO 3,CO 4,CO 7	Case Discussion: Amavata
15.3	CO 2,CO 3,CO 4	Nidanapnachaka of Rheumatological disorders
16.1	CO 2,CO 3,CO 4,CO	Case Discussion: Kusta/ Charmadala/ Visarpa.

	6	
16.2	CO 4,CO 7,CO 8	Kriyakramas (Procedure-based therapy) in Twak Roga.
17.1	CO 2,CO 3,CO 4,CO 7	Case Discussion: Apasmara.
17.2	CO 2,CO 3,CO 4,CO 7	Case Discussion: Cerebral palsy
17.3	CO 2,CO 3,CO 7,CO 8	Kriyakramas (Procedure-based therapy) in Neurological Disorders in Children
18.1	CO 2,CO 3,CO 4,CO 7	Case Discussion: ASD/ ADHD/ Intellectual Disability/ Learning Disability
18.2	CO 2,CO 3,CO 4,CO 7	Case Discussion: Shayyamutra (Enuresis)/ Breath-Holding Spells
18.3	CO 3,CO 8	Integrated Child Development Center
18.4	CO 2,CO 3,CO 4,CO 7	Kriyakramas (Procedure-based therapy) in Behavioural and Neurobehavioral Disorders.
19.1	CO 2,CO 4,CO 7	IV cannulation
19.2	CO 2,CO 7,CO 8	Cardio-pulmonary resuscitation
19.3	CO 2,CO 3	Lifesaving medications.
20.1	CO 3,CO 7,CO 8	Udwartana.
20.2	CO 3,CO 7,CO 8	Snehana.
20.3	CO 3,CO 7,CO 8	Swedana I - Selection of method and dravya
20.4	CO 3,CO 4,CO 7,CO 8	Swedana II.
20.5	CO 7,CO 8	Panchakarma in children
20.6	CO 2,CO 4,CO 7,CO 8	Kriyakalpa in children
21.1	CO 1,CO 3	Adolescence.

Subject	Papers	Theory]	Practical/Clinical Assessment (200)				
Code			Practical	Viva	Elective	IA	Sub Total	Total
AyUG-KB	1	100	100	60	10 (Set- TB)	30	200	300

6 A : Number of Papers and Marks Distribution

6 B : Scheme of Assessment (Formative and Summative)

PROFESSIONAL	FOR	SUMMATIVE		
COURSE	First Term (1-6 Months)	Second Term (7-12 Months)	Third Term (13-18 Months)	ASSESSMENT
Third	3 PA & First TT	3 PA & Second TT	3 PA	UE**

PA: Periodical Assessment; **TT:** Term Test; **UE:** University Examinations; **NA:** Not Applicable. **University Examination shall be on entire syllabus

6 C : Calculation Method for Internal assessment Marks

	PERIODICAL ASSESSMENT*					TERM TEST**	TE ASSESS	
	A 6	В	С	D	E	F	G	Н
TERM	1 (15 Marks)	2 (15 Marks)	3 (15 Marks)	Average (A+B+C/3)	Converted to 30 Marks (D/15*30)	Term Test (Marks converted to 30)	Sub Total _/60 Marks	Term Assessmen t (/30)
FIRST							E+F	(E+F)/2
SECOND							E+F	(E+F)/2
THIRD						NIL		Е
Final IA	Average of 7	Three Term A	ssessment M	arks as Show	n in 'H' Colu	mn.	·	
	Maximum Marks in Parentheses *Select an Evaluation Method which is appropriate for the objectives of Topics from the Table 6 D for Periodic assessment. Conduct 15 marks assessment and enter marks in A, B, and C. ** Conduct Theory (100 Marks)(MCQ(20*1 Marks), SAQ(8*5), LAQ(4*10)) and Practical (100 Marks) Then convert to 30 marks.							

6 D : Evaluation Methods for Periodical Assessment

S. No.	Evaluation Methods
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/ Samhitas)
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 Activities, Sports or Other Activities which may be decided by the department).
9.	Small Project
10.	Activities Indicated in Table 3 - Column G3 as per Indicated I, II or III term in column I3.

Topics for Periodic Assessments

	Paper 1	
PA 1	Topic 1,2	
PA 2	Topic 3	
PA 3	Topic 4	
Term Test 1	Entire Syllabus of Term 1	
PA 4	Topic 6,7,8	
PA 5	Topic 9,10,11	
PA 6	Topic 11,12	
Term Test 2	Entire Syllabus of Term 2	
PA 7	Topic 14,15,16	
PA 8	Topic 16,17,18	
PA 9	Topic 19,20,21	

III PROFESSIONAL BAMS EXAMINATIONS AyUG-KB PAPER-I

Time: 3 Hours Maximum Marks: 100 INSTRUCTIONS: All questions compulsory

		Number of Questions	Marks per question	Total Marks
Q 1	MULTIPLE CHOICE QUESTIONS (MCQ)	20	1	20
Q 2	SHORT ANSWER QUESTIONS (SAQ)	8	5	40
Q 3	LONG ANSWER QUESTIONS (LAQ)	4	10	40
				100

6 F : Distribution of theory examination

Pape	er 1 (KAUMARABHRITYA)				
Sr. No	A List of Topics	B Marks	MCQ	SAQ	LAQ
1	Introduction to Kaumarabhritya	1	Yes	No	No
2	Bala Samvardhana (Growth and Development)	7	Yes	Yes	No
3	Navajata Vijnana (Neonatology)	11	Yes	Yes	Yes
4	Stanya Vijnana (Breast Milk)	11	Yes	Yes	Yes
5	Bala Poshana (Child Nutrition) & Vyadhikshamatva (Immunity)		Yes	Yes	Yes
6	Kuposhana Rogas (Nutritional disorders)	7	Yes	Yes	No
7	Balaroga Pariksha Vidhi & Chikitsa Siddhantha (Pediatric Examination and treatment principles)		Yes	Yes	No
8	Kulaja and Sahaja Rogas (Genetic and Congenital Disorders)	5	Yes	Yes	No
9	Graha Rogas and Aupasargika Rogas (Infectious Diseases)	8	Yes	Yes	No
10	Swasana Rogas [Disorders of Respiratory system]	10	Yes	Yes	Yes
11	Mahasrota Roga [Gastro Intestinal Disorders]		Yes	Yes	Yes
12	Rasa Rakta Rogas [Disorders of blood and cardiovascular system]	10	Yes	Yes	Yes
13	Antahsravee Granthi Rogas (Disorders of Endocrine System)		Yes	Yes	Yes
14	Mutravaha Sroto Rogas (Disorders of Genito urinary system)	5	Yes	Yes	No
15	Sandhi Rogas (Rheumatological Disorders)		Yes	Yes	No
16	Twak Rogas (Dermatological Disorders)	13	Yes	Yes	Yes
17	Sira Snayu Rogas (Nervous system disorders)		Yes	Yes	Yes
18	Unmada Rogas (Behavioral and Neurobehavioral disorders)		Yes	Yes	Yes
19	Atyayika Rogas (Emergency Paediatrics)	12	Yes	Yes	Yes
20	Bala Panchakarma		Yes	Yes	Yes
21	Kishora Swasthya (Adolescent Health)		Yes	No	No
22	Anya Rogas (Miscellaneous Diseases)		Yes	No	No
Tota	l Marks	100		-	-

6 G : Instructions for UG Paper Setting & Blue print

- 1. All questions shall be compulsory.
- 2. Questions shall be drawn based on Table 6F, which provides the topic name, types of questions (MCQ(Multiple Choice Question), SAQ(Short Answer Question), LAQ(Long Answer Question)).
- 3. The marks assigned in Table 6F for each topic/group of topics shall be considered as the maximum allowable marks for that topic/group of topics.
- 4. Ensure that the total marks allocated per topic/group of topics do not exceed the limits specified in Table 6F.
- 5. Refer to Table 6F before setting the questions. Questions shall be framed only from topics where the type is marked as "YES", and avoided if marked as "NO".
- 6. Each 100-mark question paper shall contain:
 - 20 MCQs
 - 8 SAQs
 - 4 LAQs
- 7. MCQs:
 - Majority shall be drawn from the Must to Know part of the syllabus.
 - Questions from the Desirable to Know part of syllabus shall not exceed 3.
 - Questions from the Nice to Know part of syllabus shall not exceed 2.
- 8. SAQs:
 - Majority shall be drawn from the Must to Know part of the syllabus.
 - Questions from the Desirable to Know part of syllabus shall not exceed 1.
 - No questions shall be drawn from the Nice to Know part of syllabus.
 - SAQs shall assess understanding, application, and analysis, rather than simple recall.
- 9. LAQs:
 - All LAQs shall be drawn exclusively from the Must to Know part of the syllabus.
 - No questions shall be taken from the Desirable to Know or Nice to Know part of the syllabus.
 - Number of LAQs should not exceed one per topic unless maximum marks exceed 20 for the topic.
- 10. Long Answer Questions shall be structured to assess higher cognitive abilities, such as application, analysis, and synthesis.
- 11. Follow the guidelines in User Manual III for framing MCQs, SAQs, and LAQs.

6 H : Distribution of Practical Exam

S.No	Heads	Marks
1	Skill based Examination	30 Marks
	 Diagnostic station (Lab report/Xray Report/USG report etc): 5 marks Demonstration Station (Newborn resuscitation/Breastfeeding/Breast milk examination etc): 10 marks Case-based evaluation/Situational Judgment test & referral Station: 5 marks Prescription writing Station: 5 marks Dosage station/PathyaPathya Station: 5 marks 	
2	Practical CaseTaking	60 Marks
	A. History taking: 5 marks	
	B. Preliminary data, Growth, and Development Assessment: 5marks	
	C. Systemic examination: 10 marks	
	D. Dosha, Dhatu Pareesha: 5 marks	
	E. Investigations: 5 marks	
	F. Differential Diagnosis/diagnosis: 5 marks	
	G. Treatment protocol and justification: 10 marks	
	H. Prescription and counseling of parent/ caretaker: 10 marks	
	I. Communication skill, Confidence, Body language: 5 marks	
3	Structured Viva	60 Marks
	Total 15 questions of varied difficulty level like easy, medium and difficult.	
	 Question 1: Topic 1,2,3 Question 2: Topic 4,5 Question 3: Topic 6,7,8,9 Question 4: Topic 10,11,12,13 Question 5: Topic 14,15,16 	

	larks	200
6	Internal Assessment	30 Marks
5	Elective	10 Marks
	• Sroto Vikara Case Sheet - 10	
	• Nutritional deficiency Disorders -2	
	 Developmental Disorder Case Sheet - 4 Nutrition Assessment Case Sheet - 2 	
	• Assessment of Growth (Status of Dhatu and Undernourishment) - 4	
	• Neonatal Case Sheet - 3	
	Record Content -	
	4. Minimum number of cases (4 marks)	
	3. Documentation and presentation (2 marks)	
	2. Complete case record (2 mark)	
	1. Comprehensive and Veracity (2 mark)	
4	Practical Record	10 Marks
	Communication & Confidence: 5 Marks	
	• Question 15: Topic 14,15,16,17,18,19,20,21,22	
	 Question 13: Topic 1,2,3,4,5 Question 14: Topic 6,7,8,9,10,11,12,13 	
	• Question 12: Topic 18,19,20,21,22	
	• Question 11: Topic 14,15,16,17,	
	 Question 9: Topic 6,7,8,9, Question 10: Topic 10,11,12,13 	
	• Question 8: Topic 1,2,3,4,5	
	Question 6: Topic 17,18,19Question 7: Topic 20,21,22	

References Books/ Resources

S.No	Resources
1	Acharya SK. Acharyas textbook of Kaumarabhritya. Varanasi: Chaukhambha Orientalia; 1st ed, 201
2	Agnivesha, Charaka. Samhita, Revised by Charaka and Dridhabhala, edited by Vaidya Yadavji Trikamji Acharya. Varanasi: Chaukhambha Surabharati Prakashan; 2008.
3	Bhaishajya Ratnavali, Revised by Ambikadatta Shastri, edited by Rajeshwaradatta Shastri. Varanasi: Chaukhambha Sanskrit Samsthana; 2001.
4	Bhatt R, Kumar P, Verma I, Vidhyasagar D. Practical neonatology. Indian Journal of Paediatrics; 2021.
5	Gupta P, Menon PSN, Ramji S. Ghai Essential Pediatrics. 10th ed. New Delhi: CBS Publishers & Distributors; 2023.
6	Kumar A. Ayurvedic Concepts of Human Embryology. 1st ed. New Delhi: Chaukhabha Sanskrit Pratisthan; 2009.
7	Kumar A. Child Health Care in Ayurveda. Delhi: Sri Satguru Publications; 1999.
8	Kliegman RM, St Geme JW, Blum NJ, Shah SS, Tasker RC, Wilson KM. Nelson Textbook of Pediatrics. 21st ed. Philadelphia: Elsevier; 2020.
9	Lekshmi MK, Sareena K. A Compendium of Paediatric Formulations in Ayurveda. Trivandrum: Sahithy Publications; 1st ed, 2024.
10	Murthy KR. Astanga Samgraha of Vagbhata. Varanasi: Chaukhambha Orientalia; reprint edition, 2017.
11	Murthy SK, editor. Ashtanga Hridaya of Vagbhata, Sutrasthana, ch 11, ver. 4. Varanasi: Chaukhambha Krishnadas Academy; 2014.
12	Parthasarathy A. IAP Textbook of Paediatrics. 5th ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd; 2013.
13	Singh BM. Pranapratyagamanam (Cardio Respiratory Resuscitation). 1st ed. Varanasi: Chaukhamba Orientalia; 2010.
14	Singh M. Paediatric Clinical Methods. 5th ed. Delhi: CBS Publishers; 2019.

15	Sastry CH. Chavali's Principle and Practice of Pediatrics in Ayurveda. 1st ed. Hassan: Chaukambha VishvaBharati; 2015.
16	Sushruta. Sushruta Samhita, Revised by Dalhana, edited by Vaidya Yadavji Trikamji Acharya, Nidanasthana, chap 13. Varanasi: Chaukhambha Orientalia; 2007.
17	Tewari PV. Kashyapa Samhitha or Vriddha Jivakiya Tantra. In Chikitsa Sthana. 8th ed. Varanasi: Chaukhambha Sanskrit Sansthana; 2023.
18	Tripathi RD. Charaka Samhita. Varanasi: Chaukhambha Sanskrit Sansthan; 2021.
19	Vriddha Jeevaka. Kashyapa Samhita, Revised by Vatsya, edited by Pandit Hemaraja Sharma and Satyapala Bhishagacharya. Varanasi: Chaukhambha Sanskrit Samsthana; 2009.
20	Agrawal M. Textbook of Pediatrics. 3rd ed. New Delhi: CBS Publishers and Distributors; 2024.
21	chrome-extension://kdpelmjpfafjppnhbloffcjpeomlnpah/https://www.unicef.org/southafrica/media/551/fil e/ZAF-First-1000-days-brief-2017.pdf
22	Upadhyaya Y. N., editor. Madhava Nidana of Madhavakara, Amavata Nidana, 25. Varanasi: Chaukhambha Sanskrita Series; 1970. Sanskrit commentary by Sri Vijayarakshita and Sri Kanthadatta and Vidyotini Hindi commentary noted by Sri Sudarshana Shastri
23	Dr. Lal Krishna. Arogya Raksha Kalpadruma. 1 st ed. Varanasi. Chowkhamba Sanskrit Series Office: 2006.
24	Dinesh KS, Krishnendhu C, Balakrishnan G, Swapna Chitra S, Santhi Krishna AS, George MJ, Patel A. Effect of Ayurveda in the management of dysbiosis with special reference to Bifidobacterium in children with Autism Spectrum Disorders. Biomedicine. 2022;42(2):325-332.
25	Vallish BN, Dang D, Dang A. Nature and mechanism of immune-boosting by Ayurvedic medicine: A systematic review of randomized controlled trials. World J Methodol. 2022 May 20;12(3):132-147. doi: 10.5662/wjm.v12.i3.132.
26	Singh M. Medical Emergencies in Children. 6th ed. New Delhi: CBS Publishers and Distributors; 2021. ISBN: 9789390709328.
27	Kumar S, Sreedevi R. Manual of Newborn Care. 3rd ed. Chennai: Paras Medical Publisher; 2024.

Jyothy KB, Sheshagiri S, Patel KS, Rajagopala S. A critical appraisal on Swarnaprashana in children.
Ayu. 2014 Oct-Dec;35(4):361-5. doi: 10.4103/0974-8520.158978.

Syllabus Committee

	KAUMARABHRITYA
Emine	ent Recourse Panel - Kaumarbharitya (UG)
1.	Vaidya Jayant Deopujari, Chairperson NCISM
2.	Dr. B.S. Prasad, President, Board of Ayurveda, NCISM
3.	Dr Atul Babu Varshney, Member, Board of Ayurveda, NCISM
4.	Dr. K. K. Dwivedi, Member, Board of Ayurveda, NCISM
Curric	culum Coordination Team
1.	Dr Mohan Joshi, Professor, AIIA, Goa Campus, Manohar Airport Road, Goa, Chief Co-ordinator
2.	Dr. Yogini R. Kulkarni, Professor and Head, Department of Research, P.G. Director, P.D.E.A. s College of Ayurveda and Research Centre, Nigdi, Pune, Co-Coordinator
Chairı	man
1.	Dr Shrinidhi Kumar K, Associate Professor, National Institute of Ayurveda, Jaipur
Co-Ch	airman
1.	Dr Dinesh K S, Professor VPSV Ayurveda college Kottakal, Kerala
Consu	Itant Experts
1.	Dr Shailaja U, Professor, SDM College of Ayurveda and Hospital Hassana
2.	Dr K Lakshmeesh Upadhya, Professor, (Retd.), Yenepoya Ayurvedic Medical College, Mangalore
3.	Dr N Krishnaiah, Professor (Retd.) Tirupati
4.	Dr Durga Prasad Dash, Professor, Sri Sri Ayurveda University, Orissa
5.	Dr Aziz Ahmed Arbar, Professor, KLE Ayurveda Mahavidyalaya, Belagavi
6.	Dr Reena Kulakarni, Professor, SDM Institute of Ayurveda and Hospital, Bengaluru
7.	Dr Ved Vyas, Associate Professor, All India Institute of Ayurveda
8.	Dr Swati Ghate, Consultant Pediatrician,
9.	Dr Ved Prakash Sharma, Practitioner, K L Memorial Sharma Medical Centre, Gurugram
Exper	t Members
1.	Dr LokeswariH S, Professor, Shri Kalabyaraveswara Swamy Ayurvedic Medical College, Bengaluru, Karnataka
2.	Dr. Roshini Anirudhan, Professor, Government Ayurveda College, Trivandrum, Kerala
3.	Dr Rachana Devendra Ramteke, Associate Professor, Shri Ayurved Mahavidyalaya Nagpur, Maharashtra
4.	Dr Nayan Kumar, Associate Professor, SDM College of Ayurveda and Hospital, Hassan, Karnataka
5.	Dr B. Nagalakshmi, Associate Professor, Shri Venkateswara Ayurvedic College, Tirupati, Andhra Pradesh
6.	Dr. Lokesh, Associate Professor, Government Ayurveda College, Rewa, M.P.
Health	n Science Education Technology (HSET) Expert
1.	Dr Manpreet Patil, Assistant Professor, Poornima Ayurvedic Medical College, Raichur, Karnataka

INTERNATIONAL MULTIDISCIPLINARY ADVISORY COMMITTEE

Chairman

Vaidya	Jayant Deopujari, Chairperson, NCISM, New Delhi
Membe	
1.	Dr. B.S. Prasad, President, Board of Ayurveda, NCISM
2.	Dr. K. Jagannathan, President, BUSS, NCISM
3.	Dr. Raghugamma Bhatta U. President, MARBISM, NCISM
4.	Vd. Rakesh Sharma President, BOER, NCISM
5.	Dr. B.L. Mehra, Member, MARBISM, NCISM
6.	Dr Atul Varshney, Member, BoA, NCISM
7.	Dr KK Dwivedi, Member, BoA, NCISM
8.	Dr Mathukumar, Member, BUSS, NCISM
9.	Dr. P.S. Arathi, Member, MARBISM, NCISM
10.	Prof. (Dr.) Sushrut Kanaujia, Member, MARBISM, NCISM
11.	Dr. Narayan S. Jadhav. Member, BERISM, NCISM
12.	Dr. Siddalingesh M. Kudari, Member, BERISM, NCISM
13.	Dr. Rajani A. Nayar, Member, BERISM, NCISM
14.	Prof. (Hakim) Mohammed Mazahir Alam, Member, BERISM, NCISM
15.	Dr. Manoj Nesari Advisor to the Government of India, Ministry of AYUSH
16.	Dr. Kousthubha Upadhyaya Advisor to the Government of India, Ministry of AYUSH
17.	Prof. Sanjeev Sharma, The Director/Vice Chancellor, National Institute of Ayurveda, (Deemed to be University) Jaipur, Rajasthan
18.	Dr Kartar Singh Dhiman, Vice Chancellor, Shri Krishna Ayush University, Umri Road, Sector 8, Kurukshetra, Haryana
19.	Dr Mukul Patel, Vice-Chancellor, Gujarat Ayurved University, Jamnagar, Gujarat,
20.	Prof. Rabinarayan Acharya, Director General, Central Council for Research in Ayurvedic Sciences (CCRAS), New Delhi 58
21.	Dr Pradeep Kumar Prajapati, Vice Chancellor, Dr Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur.
22.	Prof. Tanuja Manoj Nesari, Director, ITRA, Jamnagar
23.	Dr Kashinath Samagandhi, Director, Morarji Desai National Institute of Yoga, Ministry of Ayush, Govt. or India, New Delhi 01
24.	Dr. A Raghu, Deputy DG, Health service
25.	Dr. Viswajanani J. Sattigeri, Head, CSIR-TKDL Unit, New Delhi 67
26.	Dr Mitali Mukarji, Professor and HOD, Department of Bioscience & Bioengineering, Indian Institute of Technology, Jodhpur
27.	Prof. Mahesh Kumar Dadhich, Chief Executive Officer, National Medicinal Plants Board, Ministry of Ayush Government of India, New Delhi 01
28.	Director, North Eastern Institute on Ayurveda and Homoeopathy, Shillong
29.	Dr Sujata Dhanajirao Kadam. Director, All India Institute of Ayurveda, New Delhi.
30.	Dr. Raman Mohan Singh, Director, Pharmacopoeia Commission for Indian Medicine & Homoeopathy (PCIM&H), Ghaziabad.
31.	Prof. B.J. Patgiri, Director Incharge, Institute of Teaching and Research in Ayurveda

32.	Dr. Ahalya S, Vice Chancellor, Karnataka Samskrit University
33.	Dr. Vandana Siroha, Director Rashtriya Ayurveda Vidyapeeth (National Academy of Ayurveda) New Delhi 26
34.	Dr. Sangeeta Kohli, Professor, Department of Mechanical Engineering, Indian Institute of Technology, Delhi,
35.	Dr. Payal Bansal, Chair Professor, Medical Education, Maharashtra University of Health Sciences, Nashik, Maharashtra
Interna	ational Experts
36.	Dr. Geetha Krishnan, Unit Head, Evidence and Learning, WHO Global Treatment Center, Jamnagar
37.	Dr. Pawan Kumar Ramesh Godatwar, Technical Officer (Traditional Medicine) Department of UHC/Health Systems, Regional Office for South-East Asia (SEARO) World Health Organization (WHO),
38.	Dr. Pradeep Dua, Technical Officer at the World Health Organization s (WHO) headquarters in Geneva,
39.	Dr Shantala Priyadarshini, Ayurveda Chair, University of Latvia, LATVIA
40.	Dr. Rajagopala S., Academic Chair in Ayurvedic Science at Western Sydney University, Australia,
41.	Dr Venkata Narayan Joshi, Director, Association Ayurveda Academy UK.
42.	Dr. Suresh Swarnapuri, Director of Association Europe Ayurveda Academy, NIMES France
43.	Dr Prathima Nagesh, Director, Gurukula (United Kingdom),
44.	Prof. Dr. Asmita Wele, Former Ayurveda Chair, University of Debrecen, Hungary
45.	Dr. Shekhar Annambotla, Practitioner, USA,
Curric	ulum Expert
46.	Dr Mohan Joshi, Associate Dean, Professor, Samhita Siddhant and Sanskrit Dept. All India Institute of Ayurveda, Goa.

HSET Training c	ommittee
-----------------	----------

Master Trainer- Dr Mohan R. Joshi, Associate Dean, Professor, Samhita Siddhant and Sanskrit Dept. All India Institute of Ayurveda, Goa.

011190	
1.	Dr. Madhumati S. Nawkar, Associate Professor, HOD, Department of Samhita –Siddhant, R. T. Ayurved Mahavidyalay, Akola, Maharashtra.
2.	Dr. Priya Vishal Naik Assistant professor Dept of Sanskrit Samhita Siddhant, R A Podar medical College Worli Mumbai, Maharashtra
3.	Dr. Aparna Prasanna Sole, Associate Professor, Kayachikitsa, Ashtang Ayurved Mahavidyalaya, Pune
4.	Dr. Gaurav Sawarkar, Professor, Mahatma Gandhi Ayurved College Hospital and Research centre, Wardha, Maharashtra,
5.	Dr. Gurumahantesh TM, Associate Professor, Dept of Panchakarma, Shree jagadguru gavisiddheshwara ayurvedic medical College and hospital, Koppal, Karnataka
6.	Dr. Robin J Thomson, Professor, Principal & Medical Director, Mannam Ayurveda Co-operative Medical College, Pandalam, Pathanamthitta, Kerala
7.	Dr. Amrita Mishra, Associate professor, Department of Prasuti tantra and Stree Rog, RA Podar College Worli Mumbai,
8.	Dr. Pradeep S. Shindhe, Professor and HoD department of Shalyatantra, KAHER S Sri BMK Ayurveda Mahavidyalaya, Shahapur, Belagavi
9.	Dr. Renu Bharat Rathi, Professor , Head, Kaymarbhritya Dept., Mahatma Gandhi Ayurved College Hospital and Research centre, Salod, Wardha, Maharashtra

10.	Dr. Priti Desai, Professor, Dept of Rachana Sharir, Sardar Patel Ayurved Medical College & Hospital, Balaghat (MP)
11.	Dr. Manpreeth Mali Patil, Assistant professor, Department of Kaumarabhritya, Poornima Ayurvedic Medical College hospital and research centre, Raichur, Karnataka
12.	Dr. Puja CN Pathak , Assistant Professor, Department of Kaumarabhritya, Shri Ramchandra Vaidya Ayurvedic Medical College and Hospital, Lucknow, Uttar Pradesh
13.	Dr. Nilakshi Shekhar Pradhan, Professor & HOD Shalakya, SSAM, Hadapsar Pune, Maharashtra
14.	Dr. Vaishali Pavan Mali, Assistant Professor, Department of Samhita –Siddhant, Ch. Brahm Prakash Ayurved Charak Sansthan, New Delhi
15.	Dr Maya V. Gokhale, HOD, Professor Department of Panchakarma, SSAM, Hadapsar, Pune Maharashtra

Curriculum Development Software Coordination Committee

Chairman :-

Dr. B.S. Prasad, President, Board of Ayurveda, NCISM

Dr. K. Jagannathan, President, BUSS, NCISM

Coordinator

Dr Mohan R. Joshi, Associate Dean, Professor, Samhita Siddhant and Sanskrit Dept. All India Institute of Ayurveda, Goa.

Member	rs
1.	Dr. Nitesh Raghunath Joshi, Associate Professor, Dept. of Swasthavritta & Yoga, MAM s Sumatibhai Shah Ayurveda Mahavidyalaya, Hadapsar, Pune.,
2.	Dr. Vilobh Vijay Bharatiya, Assistant Professor, Vidarbha Ayurved Mahavidyalaya, Amrawati, Maharashtra,
3.	Dr. Sumith Kumar M, Associate Professor, Guru Gorakshnath Institute of Medical Sciences, Gorakhpur, Uttar Pradesh
4.	Mr Niteen P Revankar, Managing Director, Belgaum.

Phase Coordination Committee

Chief Coordinator Dr Mohan R. Joshi, Associate Dean, Professor, Samhita Siddhant and Sanskrit Dept. All India Institute of Ayurveda, Goa.

Subjects: Rachana Sharira (PG), Kriya Sharira (PG), Ayurveda Biology (PG), DravyagunaVijnana (PG), Rasashastra & Bhaishajyakalpana (PG), Agada Tantra evam Vidhi Vaidyaka (PG), Roganidana – Vikriti Vijnana (PG), Swasthavritta (PG)

1.	Co-ordinator:-Dr. Yogini R. Kulkarni, Professor and Head, Department of Research, P.G. Director, P.D.E.A. s College of Ayurveda and Research Centre, Nigdi, Pune
2.	Member: - Dr. Anand Katti, Professor, Department of Ayurved Samhita & Siddhant, Government, Ayurvedic Medical College, Bangalore, Karnataka,
-	c ts: Shalya Tantra (UG & PG), Shalakya Tantra (UG), Shalakya Tantra (PG)-Karna Naasa & Mukha, Shalakya (PG)-Netra, Streeroga & Prasuti Tantra (UG & PG), Samhita Adhyayana-III (UG), Samhita & Siddhanta (PG)
1.	Co-ordinator:- Dr. Byresh A, Principal, Adichunchanagiri Ayurvedic Medical College Hospital & Research Centre, Bengaluru North, Karnataka,

2.	Member:- Dr. Reena K, Professor & Head, Department of Kaumarabhritya, SDM Institute of Ayurveda and Hospital, Bengaluru, Karnataka								
3.	Member:- Dr. Aditaya Nath Tewari, Associate Professor, PG Department of RNVV, Ch Brahm Prakash Ayurved Charak Sansthan, New Delhi,								
	ts: Kayachikitsa (UG) including atyaika chikitsa, Kayachikitsa (PG) including atyaika chikitsa, Manasaroga asayana & Vajikarana (PG), Kaumarabhritya (UG & PG), Panchakarma (UG & PG)								
1.	Co-ordinator Dr. Aziz Arbar, Professor, KAHER s Shri BM Kankanawadi Ayurveda Mahavidyalaya, Post Graduate Studies and Research Centre, Belagavi, Karnataka,								
2.	Member: Vd. Kiran Nimbalkar, Professor, Ayurved & Unani Tibbia College and Hospital, New Delhi,								
3.	Member: Dr. Shivanand Patil, Assistant Professor, Department of Agada Tantra, All India Institute of Ayurveda, Goa,								

Abbreviations

Domain		T L Method		Level		Asse	ssment	Integration	
CK	Cognitive/Knowledge	L	Lecture	К	Know	T-CS	Theory case study	V-RS	V RS
СС	Cognitive/Comprehensi on	L&PP T	Lecture with PowerPoint presentation	КН	Knows how	T-OBT	Theory open book test	V-KS	V KS
CAP	Cognitive/Application	L&GD	Lecture & Group Discussion	SH	Shows how	P- VIVA	Practical Viva	Н-КС	Н КС
CAN	Cognitive/Analysis	L_VC	Lecture with Video clips	D	Does	P-REC	Practical Recitation	H-SH	H SH
CS	Cognitive/Synthesis	REC	Recitation			P-EXA M	Practical exam	H-PK	Н РК
CE	Cognitive/Evaluation	SY	Symposium			PRN	Presentation	H-SHL	H SHL
PSY- SET	Psychomotor/Set	TUT	Tutorial			P-PRF	Practical Performance	H-SP	H SP
PSY- GUD	Psychomotor/Guided response	DIS	Discussions			P-SUR	Practical Survey	Н-КВ	Н-КВ
PSY- MEC	Psychomotor/Mechanis m	BS	Brainstorming			P-EN	Practical enact	H-Sam hita	H-Samhita
PSY- ADT	Psychomotor Adaptation	IBL	Inquiry-Based Learning			P-RP	Practical Role play	V-DG	V DG
PSY- ORG	Psychomotor/Originatio n	PBL	Problem-Based Learning			P- MOD	Practical Model	V-RN	V RN
AFT- REC	Affective/ Receiving	CBL	Case-Based Learning			P-POS	Practical Poster	V-RS	V RS
AFT- RES	Affective/Responding	PrBL	Project-Based Learning			P- CASE	Practical Case taking	V-AT	V AT
AFT- VAL	Affective/Valuing	TBL	Team-Based Learning			P-ID	Practical identification	V-SW	V SW
AFT- SET	Affective/Organization	TPW	Team Project Work			P-PS	Practical Problem solving		
AFT- CHR	Affective/ characterization	FC	Flipped Classroom			QZ	Quiz		
PSY- PER	Psychomotor/perceptio n	BL	Blended Learning			PUZ	Puzzles		
PSY- COR	Psychomotor/ Complex Overt Response	EDU	Edutainment			CL-PR	Class Presentation		
		ML	Mobile Learning			DEB	Debate		
		ECE	Early Clinical Exposure			WP	Word puzzle		
		SIM	Simulation			O-QZ	Online quiz		
		RP	Role Plays			O-GA ME	Online game-based assessment		
		SDL	Self-directed learning			M- MOD	Making of Model		
		PSM	Problem-Solving Method			M- CHT	Making of Charts		
		KL	Kinaesthetic Learning			M- POS	Making of Posters		

	., 1			O D T		
		Workshops			Conducting interview	
		Game-Based Learning		INT	Interactions	
L	.S	Library Session		CR- RED	Critical reading papers	
Р	۲L	Peer Learning		CR-W	Creativity Writing	
R	RLE	Real-Life Experience		C-VC	Clinical video cases	
Р	PER	Presentations		SP	Simulated patients	
D		Demonstration on Model		PM	Patient management problems	
Р	т	Practical		СНК	Checklists	
х	K-Ray	X-ray Identification		Mini- CEX	Mini-CEX	
C	CD	Case Diagnosis		DOPS	DOPS	
L	.RI	Lab Report Interpretation		CWS	CWS	
D	DA	Drug Analysis		RS	Rating scales	
D)	Demonstration		RK	Record keeping	
)- BED	Demonstration Bedside		СОМ	Compilations	
D	DL	Demonstration Lab		Portfol ios	Portfolios	
D)G	Demonstration Garden		Log book	Log book	
F	7V	Field Visit		TR	Trainers report	
				SA	Self-assessment	
				PA	Peer assessment	
				360D	360-degree evaluation	
				PP-Pra ctical	Practical	
				VV- Viva	Viva	
				DOAP	Demonstration Observation Assistance Performance	
				SBA	Scenario Based Assessment	
				СВА	Case based Assessment	
				S-LAQ	Structured LAQ	
				OSCE	Observed Structured Clinical Examination	
				OSPE	Observed Structured Practical Examination	
				DOPS	Direct observation of procedural skills	