

INTRODUCTION

Department of Pharmacy

Specimen No: 01

Name of the Drug: Aegle folia

Common Name: Bilwa Patra, Bael

Botanical Name: Aegle Folia

Class And Ratio: class: III, Ratio: ~ 1:2

Family/Natural Order: Rutaceae

Part Used: Fresh leaves

Habitat: Throughout the world.

Drug Proved by: Dr. Samuel Hahnemann

Method of Preparation: class III - (old method)

Drug ratio - 1:2


Drug strength - 1/6

Physical Characteristic: It is slow growing tree attaining a height of 30-40 feet in many years, having rough bark & hard wood. The leaves are peculiarly arranged, three leaves being fixed a petiole.

Sphere of Action: Respiratory tract, Gastrointestinal tract, Urinary system, cardio-vascular system, skin and mucous membrane

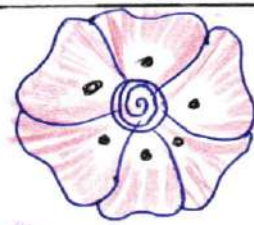
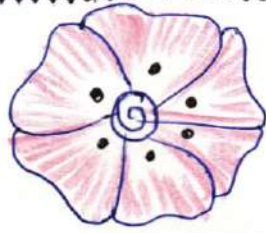
Specimen Collected by: Dhanani Nafisa Salim.

Date: 13/01/2020


Dept. In charge



Herbarium



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| 3 | Allium Sativa | 03 | 14/01/2020 | |
| 4 | Anacardium orientale | 04 | 14/01/2020 | |
| 5 | Asafoetida | 05 | 15/01/2020 | |
| 6 | Brassica Nigra | 06 | 15/01/2020 | |
| 7 | Cactus grandiflorus. | 07 | 16/01/2020 | |
| 8 | calendula officinalis | 08 | 16/01/2020 | |
| 9 | camphora | 09 | 17/01/2020 | |
| 10 | Capsicum annum | 10 | 17/01/2020 | |
| 11 | Carica papaya | 11 | 19/01/2020 | |
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| 28 | Tabacum | 28 | 28/01/2020 | |
| 29 | Thuja occidentalis | 29 | 29/01/2020 | |
| 30 | Vinca Minor. | 30 | 29/01/2020 | |



INTRODUCTION

Department of Pharmacy

Specimen No: 02

Name of the Drug: Allium cepa

Common Name: Onion

Botanical Name: Allium Cepa Linn.

Class And Ratio: class : III , Ratio in 1:2

Family/Natural Order: Liliaceae

Part Used: Red, mature bulb.

Habitat: It is very commonly cultivated in India.

Drug Proved by: Dr. Constantine Hearing

Method of Preparation: According to class III - old method.

Drug ratio - 1:2

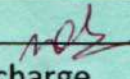
Drug strength - 1/6

Physical Characteristic: A bulbous plant with fistular shape swelling towards the base. Approximately 1m height & is surrounded by a large globular umbel of greenish white

Sphere of Action: Its main seats of action are conjunctiva, mucous membrane of nose, respiratory & gastro-intestinal tract, nerves & veins.

Specimen Collected by: Dhanani Najesa Salim.

Date: 18/01/2020


Dept. In charge



MOTIWALA EDUCATION AND WELFARE TRUST'S
MOTIWALA HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
AND
F. G. MOTIWALA POST GRADUATE INSTITUTE OF
HOMOEOPATHY & RESEARCH CENTRE
NASHIK



Certificate

We, the staff Members of the PHARMACY Department hereby
certify that ~~Mr./Mrs./Miss.~~ DARDI NAVNEETKAUR AMARJEETSINGH

Surname Name Father's / Husband's Name

Has undergone the Practicals in HOM. PHARMACY for I BHMS Course,
as prescribed by the Maharashtra University of Health Sciences and
that His / Her performance and attendance has been Satisfactory / Good /
Excellent during the academic year 2019 to 2020 He / she is hereby allowed
to appear for the ^{Pharmacy}~~Pathology~~ Practical Examination of the Maharashtra
University of Health Sciences to be held on _____

Internal Examiner

Signature
14/10/20

External Examiner

Signature
14/10/20

Head of Department



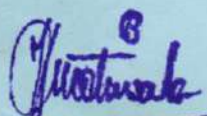
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Certificate

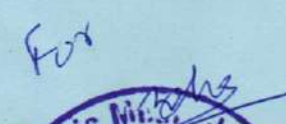
We, the staff Members of the Pharmacy Department hereby
certify that ~~Mr./Mrs./Miss.~~ Dhanani Nafisa Salim
Surname Name Father's / Husband's Name

Has undergone the Practicals in _____ for _____ Course,
as prescribed by the **Maharashtra University of Health Sciences** and
that ~~His~~ / Her performance and attendance has been Satisfactory / Good /
Excellent during the academic year 2019 to 2020 ~~He~~ / she is hereby allowed
to appear for the pharmacy Practical
Examination of the **Maharashtra University of Health Sciences** to be
held on _____


Principal


Internal Examiner


External Examiner


Head of Department

Maharashtra University of Health Sciences



| Date | Watering | Work Done | Clearing | Fertiliser | Sign of Growth | Handwritten |
|------------|----------|-----------|----------|------------|----------------|-------------|
| JAN. 2021 | | | | | | |
| 2/1/2021 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 14/1/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 18/1/21 | X | ✓ | ✓ | X | Mrs | BT |
| 22/1/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 25/1/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 30/1/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| FEB. 2021 | | | | | | |
| 2/2/21 | X | X | X | X | Mrs | BT |
| 5/2/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 11/2/21 | X | ✓ | ✓ | X | Mrs | BT |
| 16/2/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 20/2/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 26/2/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| MARCH 2021 | | | | | | |
| 1/3/2021 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 6/3/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 10/3/21 | X | ✓ | ✓ | X | Mrs | BT |
| 15/3/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 18/3/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 24/3/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 25/3/21 | X | ✓ | ✓ | X | Mrs | BT |

| Date | Watering | Work Done | Clearing | Fertiliser | Sign of Growth | Handwritten |
|-------------------|----------|-----------|----------|------------|----------------|-------------|
| APRIL 2021 | | | | | | |
| 1/4/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 9/4/21 | X | ✓ | ✓ | X | Mrs | BT |
| 17/4/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 26/4/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| MAY - 2021 | | | | | | |
| V A C A T I O N S | | | | | | |
| 28/5/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| JUNE - 2021 | | | | | | |
| 4/6/21 | X | ✓ | ✓ | X | Mrs | BT |
| 10/6/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 17/6/21 | ✓ | X | ✓ | X | Mrs | BT |
| 25/6/21 | X | X | ✓ | X | Mrs | BT |
| JULY 2021 | | | | | | |
| 1/7/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 8/7/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 17/7/21 | X | X | ✓ | X | Mrs | BT |
| 23/7/21 | ✓ | ✓ | ✓ | X | Mrs | BT |
| 31/7/21 | X | X | ✓ | X | Mrs | BT |

