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| For Academic Affairs and Research Use Only | |
| CIP Code: |  |
| Degree Code: |  |

**Letter of Notifications**

**[ x] Undergraduate Curriculum Council**

**[ ] Graduate Council**

Signed paper copies of proposals submitted for consideration are no longer required. Please type approver name and enter date of approval.

Email completed proposals to [curriculum@astate.edu](mailto:curriculum@astate.edu) for inclusion in curriculum committee agenda.

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| --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Deanna Barymon | 11/28/2017 |   **Department Curriculum Committee Chair** | |  |  | | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |   **COPE Chair (if applicable)** |
| |  |  | | --- | --- | | Cheryl DuBose | 11/7/2017 |   **Department Chair:** | |  |  | | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |   **Head of Unit (If applicable)** |
| |  |  | | --- | --- | | Deanna Barymon | 11/28/2017 |   **College Curriculum Committee Chair** | |  |  | | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |   **Undergraduate Curriculum Council Chair** |
| |  |  | | --- | --- | | Susan Hanrahan | 11/28/2017 |   **College Dean** | |  |  | | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |   **Graduate Curriculum Committee Chair** |
| |  |  | | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |   **General Education Committee Chair (If applicable)** | |  |  | | --- | --- | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |   **Vice Chancellor for Academic Affairs** |

**If you require to fill out a Letter of Notification, please email** [**curriculum@astate.edu**](mailto:curriculum@astate.edu) **or contact Academic Affairs and Research at (870) 972-2030 for guidance PRIOR TO submitting these through the curricular process.**

**1.Contact Person** (Name, Email Address, Phone Number)

Cheryl DuBose

[cdubose@astate.edu](mailto:cdubose@astate.edu)

870-972-2772

**Bulletin Changes**

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| **Instructions** |
| **Please visit** [**http://www.astate.edu/a/registrar/students/bulletins/index.dot**](http://www.astate.edu/a/registrar/students/bulletins/index.dot) **and select the most recent version of the bulletin. Copy and paste all bulletin pages this proposal affects below. Follow the following guidelines for indicating necessary changes.**  **\*Please note: Courses are often listed in multiple sections of the bulletin. To ensure that all affected sections have been located, please search the bulletin (ctrl+F) for the appropriate courses before submission of this form.**  - Deleted courses/credit hours should be marked with a red strike-through (~~red strikethrough~~)  - New credit hours and text changes should be listed in blue using enlarged font (blue using enlarged font).  - Any new courses should be listed in blue bold italics using enlarged font (***blue bold italics using enlarged font***)  *You can easily apply any of these changes by selecting the example text in the instructions above, double-clicking the ‘format painter’ icon 🡪 , and selecting the text you would like to apply the change to.*  *Please visit* [*https://youtu.be/yjdL2n4lZm4*](https://youtu.be/yjdL2n4lZm4) *for more detailed instructions.* |

Pages 339-340

Certificate of Proficiency in Radiologic Sciences Administration

The program will provide students with the fundamental leadership principles needed to direct a Medical Imaging and Therapy department or outpatient center. A certificate of proficiency is awarded to those students who complete the required coursework and who meet RT(R) or BSRS graduation requirements.

Requirements: Sem. Hrs.

RT(R) or BSRS graduation requirements met

RS 3122 Legal and Regulatory Environment of Radiology

RS 3142 Advanced Imaging and Therapy I

RS 3152 Advanced Imaging and Therapy II

RS 4343 Radiologic Administrative Concepts

RS 4463 Statistics for Medical Imaging

RS 4822 Psychosocial Factors in Health Care Delivery

RS 436V Independent Study (1 credit hour)

HP 3413 Cultural Competence in the Health Professions

Total Required Hours: 18

**LETTER OF NOTIFICATION – 8**

**UNDERGRADUATE CERTIFICATE PROGRAM**

(6-21 SEMESTER CREDIT HOURS)

1. Institution submitting request: Arkansas State University - Jonesboro
2. Contact person/title: Cheryl DuBose, Dept Chair of Medical Imaging and Radiation Sciences
3. Phone number/e-mail address: 870-972-2772; [cdubose@astate.edu](mailto:cdubose@astate.edu)
4. Proposed effective date: Summer 2018
5. Name of proposed Undergraduate Certificate Program (Program must consist of 6-21 semester credit hours):
   1. Certificate of Proficiency in Radiologic Sciences Administration
6. Proposed CIP Code: 51.0907
7. Reason for proposed program implementation: To fulfill a need in our community for educationally prepared administrators in medical imaging and therapy departments. This certificate will allow students currently enrolled in radiography courses to specialize in an additional area and obtain a fundamental understanding of administrative concepts necessary to sit for the Certified Radiology Administrator (CRA) exam. These courses are drawn from an existing degree program and will require no additional faculty or institutional resources.
8. Provide the following:
   * 1. Curriculum outline - List of courses in new program – Underline required courses
        1. RS 3122 Legal and Regulatory Environment of Radiology\*
        2. RS 3142 Advanced Imaging and Therapy I\*
        3. RS 3152 Advanced Imaging and Therapy II\*
        4. RS 4343 Radiologic Administrative Concepts\*
        5. RS 4463 Statistics for Medical Imaging\*
        6. RS 4822 Psychosocial Factors in Health Care Delivery\*
        7. RS 436V Independent Study\*
        8. HP 3413 Cultural Competence in the Health Professions\*
     2. Total semester credit hours required for proposed program (Program range: 6-21 semester credit hours):
        1. 18 credit hours
     3. New courses and new course descriptions: None
     4. Program goals and objectives
        1. Program Goals
           1. Students will be clinically competent.
           2. Students will demonstrate communication skills.
           3. Students will develop critical thinking skills.
           4. Students will model professionalism.

* + - 1. Program Objectives: Students will:
         1. Demonstrate an understanding of the various modalities found within a medical imaging and therapy department or outpatient center
         2. Recognize legal and ethical issues specific to the radiologic sciences
         3. Critique published research used in the decision making process
         4. Design a medical imaging and therapy department or outpatient center
    1. Expected student learning outcomes
       1. Students will demonstrate written communication skills.
       2. Students will demonstrate oral communication skills.
       3. Students will adapt policies and procedures based on current and emerging practices.
       4. Students will critique research used in the decision making process.
       5. Students will demonstrate positive work ethics.
       6. Students will summarize the value of life-long learning.
    2. Documentation that program meets employer needs:
       1. Not applicable. This certificate is part of a viable degree program that meets employer’s needs.
    3. Student demand (projected enrollment) for proposed program: 20 students/year
    4. Program approval letter from licensure/certification entity, if required:
       1. Not applicable.
    5. Name of institutions offering similar programs and the institution(s) used as model to develop proposed program:
       1. University of Kentucky, College of Health Sciences, Lexington, KY
       2. Florida Gulf Coast University, Dept of Health Sciences, Cape Coral, FL
       3. Jefferson College of Health Sciences, Roanoke, VA
       4. New York Medical College, Valhalla, NY
    6. Scheduled program review date (within 10 years of program implementation):
       1. The Joint Review Committee on Education in Radiologic Technology requires coursework review on an annual basis. The certificate program will be reviewed annually to meet these requirements.

1. Institutional curriculum committee review/approval date:
2. Will this program be offered on-campus, off-campus, or via distance delivery? If yes, indicate mode of distance delivery. Mark \*distance technology courses.
   1. Yes, this program will be offered via web bases distance delivery.
3. Identify off-campus location. Provide a copy of email notification to other institutions in the area of the proposed off-campus program offering.
4. Provide additional program information if requested by ADHE staff.

President/Chancellor Approval Date:

Board of Trustees Notification Date:

Chief Academic Officer: Date: