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

**New or Modified Course Proposal Form**

**[ ] Undergraduate Curriculum Council**

**[X ] Graduate Council**

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| **[ ]New Course, [ ]Experimental Course (1-time offering), or [X ]Modified Course (Check one box)** |

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

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| --- | --- |
| Christie Black 3/30/2020**Department Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**COPE Chair (if applicable)** |
| Christie Black 3/30/2020**Department Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Head of Unit (if applicable)**   |
| Shanon Brantley 3/31/2021**College Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Undergraduate Curriculum Council Chair** |
| N/A Enter date…**Director of Assessment (new courses only)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Graduate Curriculum Committee Chair** |
| Susan Hanrahan 3/31/21 Enter date…**College Dean** | Alan Utter 4/28/2021**Vice Chancellor for Academic Affairs** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**General Education Committee Chair (if applicable)**   |  |

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

Christie Black

czitzelberger@astate.edu

870-680-8314

1. **Proposed starting term and Bulletin year for new course or modification to take effect**

Fall 2020

**Instructions:**

*Please complete all sections unless otherwise noted. For course modifications, sections with a “Modification requested?” prompt need not be completed if the answer is “No.”*

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|  | **Current (Course Modifications Only)** | **Proposed (New or Modified)** *(Indicate “N/A” if no modification)* |
| **Prefix** | **NURS** | **N/A** |
| **Number\*** | **8423** | **N/A** |
| **Title** | **DNP Advanced Physiology and Pathophysiology I** | **N/A** |
| **Description\*\*** | The course provides a comprehensive study of normal and abnormal physiology on specific organ systems’ functions. The course focus is normal and abnormal physiological alterations and their effect on homeostasis for health promotion and anesthetic care across the lifespan. Restricted to DNP Nurse Anesthesia Program. Prerequisite, NURS 8414. | The course provides a comprehensive study of normal and abnormal physiology on specific organ systems’ functions. The course focus is normal and abnormal physiological alterations and their effect on homeostasis for health promotion and anesthetic care across the lifespan. Restricted to DNP Nurse Anesthesia Program. |

 ***\**** (Confirm with the Registrar’s Office that number chosen has not been used before and is available for use. For variable credit courses, indicate variable range. *Proposed number for experimental course is 9*. )

\*\*Forty words or fewer as it should appear in the Bulletin.

1. **Proposed prerequisites and major restrictions** **[Modification requested? Yes**

(Indicate all prerequisites. If this course is restricted to a specific major, which major. If a student does not have the prerequisites or does not have the appropriate major, the student will not be allowed to register).

1. Yes Are there any prerequisites?
	1. If yes, which ones?

Restricted to DNP Nurse Anesthesia Program

* 1. Why or why not?

Students must be in the DNP in Nurse Anesthesia Program to take this course.

1. Yes Is this course restricted to a specific major?
2. If yes, which major? See bulletin changes below
	1. DNP in Nurse Anesthesia
3. **Proposed course frequency [Modification requested? No]**

(e.g. Fall, Spring, Summer; if irregularly offered, please indicate, “irregular.”) *Not applicable to Graduate courses.*

1. **Proposed course type [Modification requested? No**

Will this course be lecture only, lab only, lecture and lab, activity (e.g., physical education), dissertation/thesis, capstone, independent study, internship/practicum, seminar, special topics, or studio? Please choose one.

1. **Proposed grade type [Modification requested? No**

What is the grade type (i.e. standard letter, credit/no credit, pass/fail, no grade, developmental, or other [please elaborate])

 **Yes / No** Is this course dual-listed (undergraduate/graduate)? **N/A**

 **Yes / No** Is this course cross-listed? **N/A**

*(If it is, all course entries must be identical including course descriptions. Submit appropriate documentation for requested changes. It is important to check the course description of an existing course when adding a new cross-listed course.)*

**a.** – If yes, please list the prefix and course number of the cross-listed course.

 **N/A**

 **b.** – **Yes / No** Can the cross-listed course be used to satisfy the prerequisite or degree requirements this course satisfies?

 **N/A**

1. **No** Is this course in support of a new program?

a. If yes, what program?

 **N/A**

1. **No** Will this course be a one-to-one equivalent to a deleted course or previous version of this course (please check with the Registrar if unsure)?

a. If yes, which course?

**N/A**

**Course Details**

1. **Proposed outline** **[Modification requested? No**

(The course outline should be topical by weeks and should be sufficient in detail to allow for judgment of the content of the course.)

**N/A**

1. **Proposed special features** **[Modification requested? No**

(e.g. labs, exhibits, site visitations, etc.)

**N/A**

1. **Department staffing and classroom/lab resources**

1. Will this require additional faculty, supplies, etc.?

 **No**

 **No** Does this course require course fees?

 *If yes: please attach the New Program Tuition and Fees form, which is available from the UCC website.*

**Justification**

**Modification Justification (Course Modifications Only)**

1. Justification for Modification(s)

**The information in the bulletin is incorrect.** There are no prerequisites other than being admitted to the DNP in Nurse Anesthesia Program. The prerequisite currently listed in the bulletin (NURS 8414 is incorrect).  It should simply read “Restricted to DNP Nurse Anesthesia Program”.

**New Course Justification (New Courses Only)**

1. Justification for course. Must include:

 a. Academic rationale and goals for the course (skills or level of knowledge students can be expected to attain)

 **N/A**

b. How does the course fit with the mission of the department? If course is mandated by an accrediting or certifying agency, include the directive.

 **N/A**

c. Student population served.

**N/A**

d. Rationale for the level of the course (lower, upper, or graduate).

**N/A**

**Assessment**

**Assessment Plan Modifications (Course Modifications Only)**

1. **No** Do the proposed modifications result in a change to the assessment plan?

 *If yes, please complete the Assessment section of the proposal*

**Relationship with Current Program-Level Assessment Process (Course modifications skip this section unless the answer to #18 is “Yes”)**

1. What is/are the intended program-level learning outcome/s for students enrolled in this course? Where will this course fit into an already existing program assessment process?

**N/A**

1. Considering the indicated program-level learning outcome/s (from question #19), please fill out the following table to show how and where this course fits into the program’s continuous improvement assessment process.

*For further assistance, please see the ‘Expanded Instructions’ document available on the UCC - Forms website for guidance, or contact the Office of Assessment at 870-972-2989.*

|  |  |
| --- | --- |
| **Program-Level Outcome 1 (from question #19)** | **N/A** |
| Assessment Measure | N/A  |
| Assessment Timetable | **N/A** |
| Who is responsible for assessing and reporting on the results? | **N/A** |

 *(Repeat if this new course will support additional program-level outcomes)*

 **Course-Level Outcomes**

1. What are the course-level outcomes for students enrolled in this course and the associated assessment measures?

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| --- | --- |
| **Outcome 1** | **N/A** |
| Which learning activities are responsible for this outcome? | **N/A** |
| Assessment Measure  | N/A |

*(Repeat if needed for additional outcomes)*

**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. Please include a before (with changed areas highlighted) and after of all affected sections.** **\*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.**  |

 ***BEFORE: pg. 381***

**NURS 8423. DNP Advanced Physiology and Pathophysiology I** The course provides a comprehensive study of normal and abnormal physiology on specific organ systems’ functions. The course focus is normal and abnormal physiological alterations and their effect on homeostasis for health promotion and anesthetic care across the lifespan. Restricted to DNP Nurse Anesthesia Program. ~~Prerequisite, NURS 8414~~ **Restricted to DNP Nurse Anesthesia Program**.

***AFTER: pg 381***

**NURS 8423. DNP Advanced Physiology and Pathophysiology I** The course provides a comprehensive study of normal and abnormal physiology on specific organ systems’ functions. The course focus is normal and abnormal physiological alterations and their effect on homeostasis for health promotion and anesthetic care across the lifespan. Restricted to DNP Nurse Anesthesia Program.

 ***(Prerequisite NURS 8414 should be deleted as shown above).***