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

**New or Modified Course Proposal Form**

**[X] Undergraduate Curriculum Council**

**[ ] Graduate Council**

|  |
| --- |
| **[ ]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.

|  |  |
| --- | --- |
| Mollie Manning 2/22/2021**Department Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**COPE Chair (if applicable)** |
| Mollie Manning 2/22/2021**Department Chair/** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Head of Unit (if applicable)**   |
| Shanon Brantley 2/25/2021**College Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Undergraduate Curriculum Council Chair** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Director of Assessment (new courses only)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**Graduate Curriculum Committee Chair** |
| Susan Hanrahan 2/26/21 Enter date…**College Dean** | Alan Utter 3/15/2021**Vice Chancellor for Academic Affairs** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…**General Education Committee Chair (if applicable)**   |  |

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

Dr. Mollie Manning, mmanning@astate.edu, 870-972-3074

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

Spring 2022

**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.”*

|  |  |  |
| --- | --- | --- |
|  | **Current (Course Modifications Only)** | **Proposed (New or Modified)** *(Indicate “N/A” if no modification)* |
| **Prefix** | **NRS** | **N/A** |
| **Number\*** | **4012** | **N/A** |
| **Title** | **Essentials of Obstetric Nursing****Essentials Obstetric Nursing** | **N/A** |
| **Description\*\*** | Theoretical basis for professional nursing care of the childbearing family. Emphasis is on nursing care of the woman, the fetus, and the infant within the family environment. | **N/A** |

 ***\**** (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?

(Traditional BSN) NRS 3205, NRS 3312, and NRSP 3205

(Accelerated BSN) NRS 3422, NRS 3473, NRS 4424, and NRSP 3453

* 1. Why or why not?

The BSN program has a lock-step plan of study requiring courses to be taken in order.

1. YES Is this course restricted to a specific major?
	1. If yes, which major? Nursing
2. **Proposed course frequency [Modification requested? No]**

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

Enter text...

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.

Enter text...

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])

Enter text...

1. NO Is this course dual-listed (undergraduate/graduate)?
2. NO Is this course cross-listed?

*(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.

 Enter text...

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

 Enter text...

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

a. If yes, what program?

 Enter text...

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?

Enter text...

**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.)

Enter text...

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

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

Enter text...

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

No additional faculty or classroom resources are needed.

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

 No

1. 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 course is currently offered in the traditional BSN program. With the reduction of credit hours in the overall accelerated plan of study with the 2-hour Obstetric course rather than 3 credit hours – the use of an existing equivalent course will fulfill this need rather than creating a new course. See program modification for justification for reducing specialty hours.

**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)

 Enter text...

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.

 Enter text...

c. Student population served.

Enter text...

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

Enter text...

**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?

Enter text...

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)** | Type outcome here. What do you want students to think, know, or do when they have completed the course? |
| Assessment Measure | Please include direct and indirect assessment measure for outcome.  |
| Assessment Timetable | What semesters, and how often, is the outcome assessed? |
| Who is responsible for assessing and reporting on the results? | Who (person, position title, or internal committee) is responsible for assessing, evaluating, and analyzing results, and developing action plans? |

 *(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** | Type outcome here. What do you want students to think, know, or do when they have completed the course? |
| Which learning activities are responsible for this outcome? | List learning activities. |
| Assessment Measure  | What will be your assessment measure for this outcome?  |

*(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 Page 360: **Major in Nursing**

 **Bachelor of Science in Nursing**

 **Second Degree Accelerated Program**

|  |  |
| --- | --- |
| **Admission Requirements:** |  |
| 1. Earned Bachelor Degree
2. Overall GPA of 2.5
3. Acceptable immunization status
4. Completion of the following courses with a “C” or better:

BIO 2103 **AND** 2101, Microbiology for Nursing and Allied Health and Laboratory BIO 2203 **AND** 2201, Human Anatomy/Physiology I and LaboratoryBIO 2223 **AND** 2221, Human Anatomy/Physiology II and LaboratoryCHEM 1043 **AND** 1041, Fundamental Concepts of Chemistry I and Laboratory **OR**CHEM 1013 **AND** 1011, General Chemistry I and Laboratory CHEM 1052, Fundamental Concepts of Organic and Biochemistry ENG 1003, Composition IENG 1013, Composition IIPSY 2013, Introduction to Psychology SOC 2213, Introduction to Sociology Statistics elective - 3 credit hoursHIST 2763, The United States to 1876 **OR**HIST 2773, The United States Since 1876 **OR**POSC 2103, Introduction to United States GovernmentMATH 1023, College Algebra MATH course that requires MATH 1023 as a prerequisite |  |
| **Major Requirements:** | **Sem. Hrs.** |
| NRS 2392, Health Assessment | 2 |
| NRS 2423, Introduction to Essentials of Nursing | 3 |
| NRS 2433, Essentials of Medical-Surgical Nursing I | 3 |
| NRS 2443, Essentials of Nursing Care of the Child-Bearing Family | 3 |
| NRS 3312, Introduction to Nursing Research | 2 |
| NRS 3422, Essentials of Mental Health Nursing | 2 |
| NRS 3423, Essentials of Community Heath | 3 |
| NRS 3445, Essentials of Medical-Surgical Nursing II | 5 |
| NRS 3463, Pathophysiology Based Pharmacology I | 3 |
| NRS 3473, Pathophysiology Based Pharmacology II | 3 |
| NRS 4362, Professional Role Development | 2 |
| NRS 4425, Essentials of Medical-Surgical Nursing III | 5 |
| NRS 4443, Essentials of High Acuity Nursing | 3 |
| NRS 4542, Health Care Administration | 2 |
| NRSP 1422, Foundations of Nursing Practice | 2 |
| NRSP 2391, Health Assessment Practicum | 1 |
| NRSP 2432, Clinical Experience I | 2 |
| NRSP 3433, Clinical Experience II | 3 |
| NRSP 3453, Clinical Experience III | 3 |
| NRSP 4433, Clinical Experience IV | 3 |
| NRSP 4456, Clinical Experience V | 6 |
| NRSP 4466, Clinical Experience VI | 6 |
| **Total Required Hours:** | **67** |

After page 360: **Major in Nursing**

 **Bachelor of Science in Nursing**

 **Second Degree Accelerated Program**

|  |  |
| --- | --- |
| **Admission Requirements:** |  |
| 1. Earned Bachelor Degree
2. Overall GPA of 2.5
3. Acceptable immunization status
4. Completion of the following courses with a “C” or better:

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| **Major Requirements:** | **Sem. Hrs.** |
| NRS 2392, Health Assessment | 2 |
| NRS 2423, Introduction to Essentials of Nursing | 3 |
| NRS 2433, Essentials of Medical-Surgical Nursing I | 3 |
| ~~NRS 2443, Essentials of Nursing Care of the Child-Bearing Family~~ | ~~3~~ |
| NRS 3312, Introduction to Nursing Research | 2 |
| NRS 3422, Essentials of Mental Health Nursing | 2 |
| NRS 3423, Essentials of Community Heath | 3 |
| NRS 3445, Essentials of Medical-Surgical Nursing II | 5 |
| NRS 3463, Pathophysiology Based Pharmacology I | 3 |
| NRS 3473, Pathophysiology Based Pharmacology II | 3 |
| NRS 4012, Essentials of Obstetric Nursing | 2 |
| NRS 4362, Professional Role Development | 2 |
| NRS 4425, Essentials of Medical-Surgical Nursing III | 5 |
| NRS 4443, Essentials of High Acuity Nursing | 3 |
| NRS 4542, Health Care Administration | 2 |
| NRSP 1422, Foundations of Nursing Practice | 2 |
| NRSP 2391, Health Assessment Practicum | 1 |
| NRSP 2432, Clinical Experience I | 2 |
| NRSP 3433, Clinical Experience II | 3 |
| NRSP 3453, Clinical Experience III | 3 |
| NRSP 4433, Clinical Experience IV | 3 |
| NRSP 4456, Clinical Experience V | 6 |
| NRSP 4466, Clinical Experience VI | 6 |
| **Total Required Hours:** | **67** |

**Before page 532:**

**NRS 4012. Essentials of Obstetric Nursing** Theoretical basis for professional nursing care of the childbearing family. Emphasis is on nursing care of the woman, the fetus, and the infant within the family environment. Fall, Spring.

**After page 532:**

**NRS 4012. Essentials of Obstetric Nursing** Theoretical basis for professional nursing care of the childbearing family. Emphasis is on nursing care of the woman, the fetus, and the infant within the family environment. Corequisites: NRS 3205, NRS 3312, and NRSP 3205 (Traditional BSN), NRS 3422, NRS 3473, NRS 4424, and NRSP 3453 (Accelerated BSN). Fall, Spring.