FORM A
College of Allied Health Sciences

Revised 05/08/2009

PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Medical Informatics Minor Pre-Requisite Change

Initiating Unit or Individual: Paula Hagstrom
Contact Person’s Name: Paula Hagstrom e-mail: hagstrop@ferris.edu phone: x2316
Date or Term of Proposal Implementation: Spring 2012
☐ Group I - A – New degree/major or major, redirection of a current offering, or elimination of a
degree, major or minor
☐ Group I - B – New minors or concentrations
X☐ Group II - A – Minor curriculum clean-up and course changes
☐ Group II - B – New Course
☐ Group III - Certificates
☐ Group IV – Off-Campus Programs

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<tr>
<th>Group/Individual</th>
<th>Signature</th>
<th>Date</th>
<th>Vote/Action *</th>
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<td>Program Faculty</td>
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<td>11/14/11</td>
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* Support with Concerns or Not Support must include a list of specific concerns. Votes must be shown for faculty groups. Administrators check appropriate action taken.

To be completed by Academic Affairs

President (Date Approved)       Board of Trustees (Date Approved)       President’s Council (Date Approved)
1. Proposal Summary
   (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights. Additional rationale may be attached.)
   The course description for CAHS 498 Medical Informatics Capstone states that this course is the “final course” in the Medical Informatics Minor. We want to clarify that students should not take the capstone course in the same semester as other required classes for the Medical Informatics Minor. To assure that students take this as their last course, the following pre-requisites will be required: MRIS 103, CAHS 300, STQM 342, ISYS 411, and ISIN 302.

2. Summary of All Course Action Required*
   a. Newly Created Courses to FSU:
      Prefix     Number     Title

   b. Courses to be Deleted From FSU Catalog:
      Prefix     Number     Title

   c. Existing Course(s) to be Modified:
      Prefix     Number     Title
      CAHS       498       Medical Informatics Capstone

   d. Addition of existing FSU courses to program
      Prefix     Number     Title

   e. Removal of existing FSU courses from program
      Prefix     Number     Title
3. Summary of All Consultations

| Form Sent (B or C) | Date Sent | Responding Dept. | Date Received & by Whom |

4. Will External Accreditation be Sought? (For new programs or certificates only)

__________ Yes __________ No

If yes, name the organization involved with accreditation for this program.

5. Program Checksheets affected by this proposal.
I. ACTION TO BE TAKEN: MODIFY AN EXISTING COURSE

Notes:
1. Complete all parts of Sections I and II. Complete only those items in Section III that represent changes.
2. If either prefix or number is being changed, use 'Delete Course' and 'Create New Course' forms rather than this form.

a. List the changes to be made (See Proposed Changes a through p below): Change course pre-requisites.

b. Term Effective (6 digit code only): 201201 Examples: 200801(Spring), 200805(Summer), 200808(Fall)
Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. CURRENT: Include information that is in the current course database.

a. Course Prefix: CAHS
b. Number: 498
   Lecture: [ ] Lab: [ ] INDependent Study – Check (x) Practicum: [ ] Seminar: 3

d. Course Title: Medical Informatics Capstone

e. College Code: [] f. Department Code: []

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: [ ] Variable [ ] Fixed h. Maximum Credit Hours: [] i. Minimum Credit Hours: []

ej. May Be Repeated for Added Credit: Check (x) [ ] Yes [ ] No

k. Levels: Check (x) [ ] Undergraduate [ ] Graduate [ ] Professional

l. Grade Method: Check (x) [ ] Normal Grading [ ] Credit/No Credit only (Pass/Fail)

m. CATALOG DESCRIPTION – Limit to 75 words – PLEASE BE CONCISE.

n. Term(s) Offered: [ ] (See instructions for listing.) o. Max. Section Enrollment: [ ]

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. MRIS 103 and CAHS 300 and STQM 342 and ISYS 411 and ISIN 302

III. PROPOSED CHANGES: Complete only those boxes that represent proposed changes identified in Section I. Leave all other spaces blank.

a. Course Prefix: [] b. Number: [] c. Enter Contact Hours per week in boxes.
   Lecture: [] Lab: [] INDependent Study – Check (x) Practicum: [] Seminar: []

d. Course Title: [ ] (Limit to 30 characters/spaces.)

e. College Code: [ ] f. Department Code: [ ]

Credit Hours: Check (x) type and enter maximum and minimum hours in boxes.

g. Type: [ ] Variable [ ] Fixed h. Maximum Credit Hours [ ] i. Minimum Credit Hours [ ]

j. May Be Repeated for Added Credit: Check (x) [ ] Yes [ ] No

k. Levels: Check (x) [ ] Undergraduate [ ] Graduate [ ] Professional

l. Grade Method: Check (x) [ ] Normal Grading [ ] Credit/No Credit only (Pass/Fail)

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n. Term(s) Offered: [ ] (See instructions for listing.) o. Max. Section Enrollment: [ ]

p. Prerequisites/Co-requisites/Restrictions: Limited to 100 spaces. MRIS 103 and CAHS 300 and STQM 342 and ISYS 411 and ISIN 302

__/__/2012

To be completed by Academic Affairs Office: Standard & Measures Coding and General Education Code

[ ] Basic Skill (BS) [ ] General Education (GE) [ ] Occupational Education (OC) [ ] G.E. Codes

Office of the Registrar use ONLY

Date Rec’d: [ ] Date Completed: [ ] Entered: SCACRSE [ ] SCADETL [ ] SCARRES [ ] SCAPREQ [ ]
Ferris State University - College of Allied Health
DEPARTMENT
MEDICAL INFORMATICS MINOR - 22 Credits

NAME: _________________________ Stu. ID#: ________________ MAJOR: ________________

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<th>REQUIRED</th>
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<td>Medical Terminology</td>
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<td>CAHS 300</td>
<td>Healthcare Informatics (Junior Status)</td>
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<td>CAHS 498</td>
<td>Medical Informatics Capstone</td>
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<td>STQM 270</td>
<td>Introduction to Data Mining (STQM 260 w/ C- or better)</td>
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<td>ISIN 302</td>
<td>Business Intelligence in Healthcare</td>
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REQUIRED COURSES - 22 Credits Required

NOTES:
1. Students must complete CCHS 101 Orientation to Healthcare prior to admission into the minor.
2. In consultation with the AFIS Dept. Head, BUS 212, the student will complete an accountancy minor check sheet, indicating the courses he/she plans to complete. Signatures of the student and the department head are required. The approved check sheet will then be forwarded to Student Records in the College of Business.
3. Grades of the completed courses for the medical informatics minor will be posted on the student's check sheet.
4. Upon completion of the medical informatics minor, the student will notify the Graduation Secretary in the College of Allied Health in VFS 200. Upon verification that the student has completed the bachelor's degree requirements, the Dean's Office will then notify the Registrar who will note completion of the minor on the student's official transcript.
5. No more than 50% of the credits in this minor may be transferred from another institution, nor will this minor be granted if more than 6 of the minor credits are specifically required in the students major.
6. A 2.00 GPA is required for completion of the medical informatics minor.

NOTICE REGARDING WITHDRAWAL, RE-ADMISSION AND INTERRUPTION OF STUDIES
Students who return to the university after an interrupted enrollment (not including summer semester) must normally meet the requirements of the curriculum which are in effect at the time of their return, not the requirements which were in effect when they were originally admitted.

NOTE: Ferris reserves the right to correct check sheet errors at any time.

(SEE BACK FOR DECLARATION)

EFFECTIVE: Spring 2010
Ferris State University - College of Allied Health

DEPARTMENT
MEDICAL INFORMATICS MINOR - 22 Credits

NAME: ___________________  Stu. ID#: ___________________  MAJOR: ___________________

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EFFECTIVE: Fall 2012