PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Cancer Information Management

Initiating Individual: Paula Koning MM, RHIA Initiating Department or Unit: Clinical Lab/Respiratory Care/Health Administration, College of Health Professions

Contact Person's Name: Paula Koning MM, RHIA Email: paulakoning@ferris.edu Phone: 616-643-5726

☐ Group I-A – New Degree, major, concentration, minor, or redirection of a current offering
☐ Group I-B – Deletion of a degree, major, concentration, or minor
☐ Group II-A – New Course, modification of a course, deletion of a course
☐ Group II-B – Minor Curriculum Clean-up
☐ Group III – Certificate (☐ College Credit ☐ Non-credit ☒ New Certificate)
☐ Group IV – Other site location (☐ College Credit ☐ Non-credit )

<table>
<thead>
<tr>
<th>PLEASE PRINT AND SIGN YOUR NAME</th>
<th>DATE</th>
<th>VOTE/ACTION * Number Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Representative **</td>
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<tr>
<td>Paula Hagstrom</td>
<td>10/20/15</td>
<td>☐ Support</td>
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<td>☒ Support with Concerns</td>
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<td>Department/School/Faculty</td>
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<td>Representative Vote **</td>
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<td>Greg Zimmerman</td>
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<td>Committee/Faculty</td>
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<td>Mark Hutchinson</td>
<td>10-22-15</td>
<td>☐ Support</td>
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<td>☐ Not Support</td>
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<td>Mark Hanson</td>
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<td>Committee **</td>
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<td>Matthew Hedden</td>
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<td>Academic Affairs</td>
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</tbody>
</table>

* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

** Number Count must be given for all members present and/or voting.
1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)

Click here to enter text. The proposed program is a certificate program in Cancer Information Management. This program will be available to working professionals who have already completed an Associate Degree in a health related field and desire to further their education to become specialized as a cancer registrar. Also, students currently enrolled in an Associate or Bachelor Degree program in the College of Health Professions would be able to complete the certificate program in cancer registry management. Upon completion of the certificate program and accreditation of the program by the National Cancer Registrar’s Association (NCRA), students will be prepared and may be eligible to take the cancer tumor registrar (CTR) certification examination.

Cancer information management professionals are data management experts who find, interpret and record a wide range of demographic and medical information on individuals with cancer. Cancer registrars capture/abstract information from health record review to complete a summary of patient history, diagnosis, treatment and status for each cancer patient in the United States. The information is submitted to state and national registries for use in research, treatment and prevention of cancer. This program is designed to provide individuals with the knowledge and skills necessary to maintain a cancer data collection system that meets the requirements of local, state and national registries.

In 2015, the American College of Surgeons revised the standards for cancer programs accredited by the Commission on Cancer. The standards now require cancer registry staff who are abstracting cancer information to be certified tumor registrars (CTR). Cancer registrars may work at federal and state registries, freestanding cancer centers, hospitals, cancer registry employment agencies and other vendors.

The state of Michigan currently does not have a university/community college offering a cancer information management program. This program will provide an opportunity to obtain the professional credentials and fill vacancies anticipated in the field as a result of retirement and expansion of various cancer programs and registries. Employment of health information technicians including cancer registrars is expected to increase by 21% through 2020 per the Bureau of Labor Statistics. http://www.bls.gov/ooh/Healthcare/Medical-records-and-health-information-technicians.htm

Minimum requirements for admission:

Path 1
1. Associate Degree in health related field
2. GPA 2.5

Path 2
1. Enrolled in Associate/Bachelor Degree program in health related field
2. GPA 2.5

Admission requirements and the proposed curriculum meet the NCRA accreditation program curriculum standards and the eligibility requirements for the CTR certification examination.

2. Summary of Curricular Action (Check all that apply to this proposal)
   □ Degree □ Major □ Minor □ Concentration □ Certificate □ Course
   □ New □ Modification □ Deletion
   Name of Degree, Major, etc.: Cancer Information Management Certificate

3. Summary of All Course Action Required:
A. Newly Created Courses to be Added to the Catalog

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRIS</td>
<td>150</td>
<td>Registry Structure &amp; Management</td>
</tr>
<tr>
<td>MRIS</td>
<td>160</td>
<td>Cancer Registry Operations</td>
</tr>
<tr>
<td>MRIS</td>
<td>170</td>
<td>Cancer Disease Management</td>
</tr>
<tr>
<td>MRIS</td>
<td>180</td>
<td>Oncology Coding &amp; Staging</td>
</tr>
<tr>
<td>MRIS</td>
<td>250</td>
<td>Abstracting Methods</td>
</tr>
<tr>
<td>MRIS</td>
<td>260</td>
<td>Multiple Primary Histology &amp; Hematopoetics</td>
</tr>
<tr>
<td>MRIS</td>
<td>270</td>
<td>Follow up, Data Quality &amp; Utilization</td>
</tr>
<tr>
<td>MRIS</td>
<td>295</td>
<td>Cancer Registry Internship</td>
</tr>
</tbody>
</table>

B. Courses to be Deleted from FSU Catalog

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
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</thead>
<tbody>
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<td></td>
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</table>

C. Existing Courses to be Modified

<table>
<thead>
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<th>Prefix</th>
<th>Number</th>
<th>Title</th>
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<tbody>
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</table>

D. Addition of existing FSU courses to program

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
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</thead>
<tbody>
<tr>
<td>MRIS</td>
<td>103</td>
<td>Medical Terminology</td>
</tr>
<tr>
<td>BIOL</td>
<td>109</td>
<td>Anatomy &amp; Physiology</td>
</tr>
<tr>
<td>MRIS</td>
<td>210</td>
<td>Fundamentals of Disease Processes</td>
</tr>
</tbody>
</table>

E. Removal of existing FSU courses from program

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Title</th>
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<tbody>
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</table>

4. Summary of All Consultations

<table>
<thead>
<tr>
<th>Form Sent (B or C)</th>
<th>Date Sent</th>
<th>Responding Department</th>
<th>Date Received &amp; By Whom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form B</td>
<td>9/28/15</td>
<td>Biology Department</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Form B</td>
<td>9/24/15</td>
<td>CRHA – Health Information Technology/Management</td>
<td></td>
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<tr>
<td>Form C</td>
<td>9/28/15</td>
<td>FLITE</td>
<td></td>
</tr>
</tbody>
</table>

5. Will External Accreditation be sought? (For new programs or certificates only)

☑ Yes □ No

If yes, name the organization involved with accreditation for this program. National Cancer Registrars Association (NCRA)

6. Is a PCAF required? ☑ Yes □ No

Is the PCAF approved? ☑ Yes □ No (If yes, supply link on Academic Affairs website where PCAF is posted.


7. Program Checksheets affected by this proposal (Check all that apply to this proposal)

☐ Add Course      ☐ Delete Course      ☐ Modify Course      ☐ Change Prerequisite      ☐ Move from required to elective
☐ Move from elective to required  ☐ Change Outcomes and Assessment Plan  ☐ Change Credit hours

No current program checksheets are affected.

8. List all Checksheets affected by this proposal:

<table>
<thead>
<tr>
<th>College</th>
<th>Department</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Health Professions</td>
<td>Clinical Lab, Respiratory Care, Health Administration</td>
<td>Cancer Information Management</td>
</tr>
</tbody>
</table>
Hi all--
1st, please know I appreciate all the work you do for the curriculum committee--

My concern with the Cancer Certificate presented today is the amount of credits it carries.
As a consumer, I would not invest in this cost for a certificate.

Is it possible to present it with fewer credits, for the certificate status, having your curriculum mapped out to promote the aas degree, as soon as that is possible?

Thanks for all you do.
ca

---
Catherine WJ Archer  RDH, BS, MS/CTE
Ferris State University
Assistant Professor: Dental Hygiene
200 Ferris Drive, CHP, VFS 315
Big Rapids, MI 49307
231-591-2282

We cannot direct the Wind... But we Can adjust the Sails....  (unknown)
Hi,

I understand your concern re: the number of credits required for a certificate program. Unfortunately, the accreditation standards are the same for a certificate and an associate degree program in cancer information management. Without the prerequisites to the program, the core courses equal 25 credits. Unfortunately, the prerequisites are also part of the accreditation standards and can not be removed. The accreditation standards are very specific in content requirements as well as the internship/practicum hours/experience. I would be happy to forward a copy of the standards to you or you may contact Mark H. to view a copy.

Please feel free to contact me if you have any additional concerns/questions.
Thank you,

Paula Koning, MM, RHIA
Ferris State University
Instructor, Health Management Program
151 Fountain St, NE
Grand Rapids, MI 49503
616-643-5726

--

Hi all--
1st, please know I appreciate all the work you do for the curriculum committee--

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Thanks for all you do.
ca

Catherine WJ Archer  RDH, BS, MS/CTE
Ferris State University
Assistant Professor: Dental Hygiene
200 Ferris Drive, CHP, VFS 315
To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.

2. The department must respond within 10 business days of receipt of this form to ensure inclusion in the final proposal. The completed original is returned to the Academic Senate Office to be inserted into the proposal and a copy is returned to the initiator.

   The department must acknowledge receipt of this form and the proposal in writing to the initiator.

   Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title: Cancer Information Management Certificate

Initiator(s): Paula Koning, MM, RHIA

Proposal Contact: Paula Koning, MM, RHIA Date Sent: 9/28/15

Department: College of Health Professions/CRHA Campus Address: Rm 139, 151 Fountain St. Grand Rapids, MI
(please type)

Responding Department: College of Arts & Sciences, Biology Department

Administrator: Dr. Joseph Lipar Date Received: Click here to enter text. Date Returned: Click here to enter text.

Based upon department faculty review on Click here to enter text. (Date) we:

☐ Support the above proposal.

☒ Support the above proposal with the modifications and concerns listed below.

☐ Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary. Click here to enter text.

12 Supported and 6 Support with Concerns: The listed concerns were the inclusion of BIOL 205 as another option besides BIOL 205 to meet the prerequisite. One member was concerned that BIOL 109 was not adequate for understanding of disease states.
To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.

2. The department must respond within 10 business days of receipt of this form to insure inclusion in the final proposal. The completed original is returned to the Academic Senate Office to be inserted into the proposal and a copy is returned to the initiator.

   The department must acknowledge receipt of this form and the proposal in writing to the initiator.

   **Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.**

3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title  Cancer Information Management Certificate

Initiator(s): Paula Koning, MM, RHIA

Proposal Contact: Paula Koning, MM, RHIA  Date Sent: 9/24/15

Department: College of Health Professions/CRHA

(Please type)

Campus Address: 151 Fountain St. Grand Rapids

Responding Department: College of Health Professions, CRHA/Health Information Technology/Management

Administrator: Paula Hagstrom, MM, RHIA

Date Received: [Click here to enter text]  Date Returned: [Click here to enter text]

Based upon department faculty review on [Click here to enter text] (Date) we:

☐ Support the above proposal.

☐ Support the above proposal with the modifications and concerns listed below.

☐ Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary. [Click here to enter text]
FLITE SERVICES CONSULTATION FORM

To be completed by the liaison librarian and approved by the Dean of FLITE. FLITE must return the original form to the Academic Senate office to be inserted in the proposal and a copy to the initiator. FLITE must respond within 10 business days of receipt of this form to insure that the form is included in the final proposal.

Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

RE: Proposal Title: Cancer Information Management Certificate

Projected number of students per year affected by proposed change: 15

Initiator(s): Paula Koning, MM, RHIA
Proposal Contact: Paula Koning, MM, RHIA Date Sent: 9/28/15
Department: COHP/Clinical Lab, Respiratory Care, Health Administration Campus Address: 151 Fountain St, Grand Rapids
(Please type)

Liaison Librarian Signature: Allison Konieczny Date Received: Click here to enter text.
Dean of FLITE Signature: Click here to enter text Date Returned: Click here to enter text.

Based upon our review on (date), FLITE concludes that:

☐ Library resources to support the proposed curriculum change are currently available.

☐ Additional Library resources are needed but can be obtained from current funds.

☐ Support, but significant additional Library funds/resources are required in the amount of $, Click here to enter text.

☐ Does not support the proposal for reasons listed below.

Comment regarding the impact this proposal will have on library resources, collection development, or other FLITE programs. Use additional pages if necessary. Click here to enter text.
MAJOR, MAJOR WITH CONCENTRATION, MINOR OR CERTIFICATE CHECKSHEET(S)

Insert both the current curriculum checksheet (if applicable) and the proposed curriculum checksheet.

- LABEL CHECKSHEETS AS "FORM D CURRENT" and "FORM D PROPOSED."

CHECKSHEET GUIDELINES

Because checksheets are a summary of the requirements for completing a major, major with concentration, minor or certificate granted by Ferris State University, it is essential that all University checksheets contain all of the information listed below:

- Total credits required; specifying the minimum number of credits earned at FSU

- General Education requirements per catalog guidelines; include course levels, prerequisites and semester offered (if applicable)

- Minimum number of 300 and 400 level courses

- All course prerequisites

- Any special admissions, continuation, or graduation requirements

- Student Learning Outcomes clearly linked to measurable Program Assessment Strategies (See Appendix D Writing Student Learning Outcomes)

A Term-by-Term plan for completion of the offering is recommended.

It is recommended that checksheets include information about when required courses are typically offered.

Cancer Information Management Certificate Catalog Description:

The Cancer Information Management Certificate program is designed to allow current healthcare professionals possessing/obtaining a health related associate’s degree to specialize in the cancer registry profession. It is offered in an online/mixed delivery format. The program has been developed under the guidelines of the National Cancer Registrars Association.
Cancer information management professionals are data management experts who find, interpret and record a wide range of demographic and medical information on individuals with cancer. Cancer registrars capture/abstract information from health record review to complete a summary of patient history, diagnosis, treatment and status for each cancer patient in the United States. The information is submitted to state and national registries for use in research, treatment and prevention of cancer. This program is designed to provide individuals with the knowledge and skills necessary to maintain a cancer data collection system that meets the requirements of local, state and national registries.

**CERTIFICATE OUTCOMES**

<table>
<thead>
<tr>
<th>PROGRAM LEARNING OUTCOMES</th>
<th>ASSESSMENT METHODS</th>
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<tbody>
<tr>
<td>1. Accurately abstract health information into a cancer registry to allow for uniform data collection.</td>
<td>Completion of 30 abstracts on internship</td>
</tr>
<tr>
<td>2. Demonstrate the academic knowledge and technical skills for the entry-level cancer registrar.</td>
<td>National Certification Exam-CTR</td>
</tr>
<tr>
<td>3. Produce cancer related information to assist healthcare providers in patient care and research including the cancer committee.</td>
<td>Written assignments, case analyses &amp; individual exercises</td>
</tr>
<tr>
<td>4. Apply legal, ethical, accreditation and certification standards to health record data collection and use.</td>
<td>Observation and evaluation by internship preceptor</td>
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</table>
# CANCER INFORMATION MANAGEMENT – Certificate

## REQUIRED COURSES

<table>
<thead>
<tr>
<th>COURSE</th>
<th>COURSE TITLE (Pre-requisites)</th>
<th>CREDITS</th>
</tr>
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<tbody>
<tr>
<td>BIOL 109</td>
<td>Basic Human Anatomy &amp; Physiology (none) grade of “C” or better</td>
<td>4</td>
</tr>
<tr>
<td>MRIS 103</td>
<td>Medical Terminology (none)</td>
<td>4</td>
</tr>
<tr>
<td>MRIS 210</td>
<td>Fundamentals of Disease Processes (MRIS 103 and BIOL 109 or BIOL 205, both with grades of “C” or better)</td>
<td>4</td>
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## CANCER INFORMATION MANAGEMENT MAJOR REQUIREMENTS

**CIM Courses 25 Credits Required**

<table>
<thead>
<tr>
<th>COURSE</th>
<th>COURSE TITLE</th>
<th>CREDITS</th>
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</thead>
<tbody>
<tr>
<td>MRIS 150</td>
<td>Registry Structure &amp; Management</td>
<td>3</td>
</tr>
<tr>
<td>MRIS 160</td>
<td>Cancer Registry Operations</td>
<td>3</td>
</tr>
<tr>
<td>MRIS 170</td>
<td>Cancer Disease Management</td>
<td>3</td>
</tr>
<tr>
<td>MRIS 180</td>
<td>Oncology Coding &amp; Staging</td>
<td>3</td>
</tr>
<tr>
<td>MRIS 250</td>
<td>Abstracting Methods</td>
<td>3</td>
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<tr>
<td>MRIS 260</td>
<td>Multiple Primary Histology &amp; Hematopoletics</td>
<td>3</td>
</tr>
<tr>
<td>MRIS 270</td>
<td>Follow up, Data Quality &amp; Utilization</td>
<td>3</td>
</tr>
<tr>
<td>MRIS 295</td>
<td>Cancer Registry Internship</td>
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**Total Program Credits**

37

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**OTHER PROGRAM INFORMATION: Progression / Graduation**

- **Program Grade Requirements:**
  - Prior to CIM 295, all students enrolled in the Cancer Information Management certificate program must earn at least a “C” in all cancer information management courses.

- **Program Progression Policy:**
  - Students who earn less than “C” in any of the above listed courses will be required to repeat the course. Two unsuccessful attempts (less than “C”) in any CIM course will result in dismissal from the Cancer Information Management certificate program.
  - A GPA of 2.25 is required for graduation.

- **FSU Sunset Policy:**
  - If a student returns to the university after an interrupted enrollment (not including summer semester), the requirements of the curriculum (including General Education) which are in force at the time of return must be met, not the requirements in effect at the time of original admission. In special circumstances, the academic department head/chair may permit the student to finish under the program requirements in force at the time of original admission to the program.

*Updated: 2015*
### Suggested Sequence for Completion of the Cancer Information Management Certificate Program

<table>
<thead>
<tr>
<th>Fall Semester</th>
<th>Spring Semester</th>
<th>Summer Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRIS 150 – Registry Structure &amp; Management</td>
<td>MRIS 170 – Cancer Disease Management</td>
<td>MRIS 250 – Abstracting Methods</td>
</tr>
<tr>
<td>MRIS 160 – Cancer Registry Operations</td>
<td>MRIS 180 – Oncology Coding &amp; Staging</td>
<td>MRIS 260 - Multiple Primary Histology &amp; Hematopoietics</td>
</tr>
<tr>
<td>Fall Semester</td>
<td>Spring Semester</td>
<td>Summer Semester</td>
</tr>
<tr>
<td>MRIS 270 – Follow up, Data Quality &amp; Utilization</td>
<td>MRIS 295 – Cancer Registry Internship</td>
<td></td>
</tr>
</tbody>
</table>
COURSE INFORMATION FORM

Complete all items below (New or Current).

Check all boxes where modifications are being made. Enter the modification to be made (Proposed).

Course Identification

☐ XPrefix (current)  ☐ XNumber (current)  ☐ XLEC X  LAB ___  SEM ___ (current)

(proposed) MRS  (proposed) 150  (Enter Contact Hours per week)

☐ XTitle (current)

(proposed) Registry Structure & Management

☐ XCredit Hours (current)  ☐ Prerequisites (current)  ☐ Co-requisite (current)

(proposed) 3  (proposed)  (proposed)

☐ XCourse Description (current): (125 words maximum)

(proposed): This course is an introduction to the basic concepts of the structure & management of hospital based and central cancer registries including the purpose of cancer registries, confidentiality, and the role of data standards in standard setting organizations in cancer data management.

☐ XCourse Outcomes and Assessment Plan (current)

(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Analyze the professional and standard setting organizations and how they impact the various types of registries</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>2. Identify the purpose of a registry</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>3. Examine the necessary components for registry management</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>4. Assess the legal/ethical requirements of registry including confidentiality</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)

(proposed)

History of cancer registry (3 hrs)
Purpose and types of cancer registry, description of cancer registrar education/training and responsibilities. (6 hrs)
Laws, regulations, and policies governing, release of information, use of health records and research. (3 hrs)
Maintaining confidentiality of protected health information (HIPAA) & NCRA Code of Ethics. (6 hrs)
Roles & functions of registry-relevant organizations (CoC, NAACCR, NPCR, NCI, NCCN, CAP, NCDB, NCRA) (12 hrs)
Requirements of standard setting agencies (ACoS, SEER, NPCR, NAACCR, CCR, NAPBC, TJC) including programmatic, data and clinical requirements and standardized data sets. (12 hrs)
International registries/other cancer partners and uses for facility and central cancer registry data (3 hrs)
COURSE INFORMATION FORM

FORM E
Rev. May 2013

Complete all items below (New or Current).

Check all boxes where modifications are being made. Enter the modification to be made (Proposed).

Course Identification

☐ XPrefix (current) XNumber (current) ☐ LEC X LAB ___ SEM ___ (current)
(proposed)MRIS (proposed)160 (Enter Contact Hours per week)
LEC ___ LAB ___ SEM ___ (proposed):

☐ XTtitle (current)

Cancer Registry Operations

☐ XCredit Hours (current) ☐ Prerequisites (current) ☐ Co-requisite (current)
(proposed)3 (proposed) (proposed)

☐ XCourse Description (current): (125 words maximum)
(proposed):
This course will focus on management functions including budgeting, annual reports, staffing, Commission on Cancer standards including cancer conferences/committees. Basic operational tasks will be introduced; case ascertainment, abstracting, data management and cancer agency networking.

☐ XCourse Outcomes and Assessment Plan (current)
(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Determine appropriate sources for potential cases to report.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>2. Examine the different sections of registry abstracts</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>3. Establish the budget and equipment needs for registry operation</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>4. Apply the approved cancer program components and standards set by the CoC.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)
(proposed)
Registry standards required for central registries and CoC approved cancer programs including case finding/ascertainment. (21 hrs)
Human resource management principles including education and training. (6 hrs)
Development and maintenance of cancer registry policies and procedures. (3 hrs)
Cancer registry budget development and monitoring principles (6 hrs)
Staffing, productivity and time-motion studies (6 hrs)
Cancer Committee and Conference/Tumor Board (3 hrs)
Complete all items below (New or Current).

Check all boxes where modifications are being made.
Enter the modification to be made (Proposed).

Course Identification

☐ XPrefix (current)  ☐ XNumber (current)  ☐ LEC X LAB ___ SEM ___ (current)
(proposed) MRIS  (proposed) 170

☐ XTitle (current)
Cancer Disease Management

☐ XCredit Hours (current)  ☐ XPrerequisites (current)  ☐ Co-requisite (current)
(proposed) 3

☐ XCourse Description (current): (125 words maximum)
(proposed): This course is an introduction to the pathophysiology of cancer including symptomatology, diagnostic and treatment modalities specific to the types of cancer and staging.

☐ XCourse Outcomes and Assessment Plan (current)

(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Differentiate between the major categories of cancer.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>2. Classify the characteristics of cancer by cell type/location.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>3. Examine how each treatment modality works against cancer.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>4. Describe the clinical trial process and how they are used in the cancer registry.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)
(proposed)

Characteristics of cancer by cell type. (6 hrs)
Various types of cancers and their disease course. (15 hrs)
Oncology treatment and coding (surgery, radiation, chemotherapy, immunotherapy, hormonal therapy and others). (15 hrs)
Alternative, palliative and experimental treatments. (6 hrs)
Clinical trials (3 hrs)
COURSE INFORMATION FORM

Complete all items below (New or Current).

Check all boxes where modifications are being made. Enter the modification to be made (Proposed).

Course Identification

☐ XPrefix (current) ☐ XNumber (current) ☐ XLEC X ___ LAB ___ SEM ___ (current)

(proposed) MRIS (proposed) 180

☐ XTitle (current)

(proposed)
Ncology
Coding &
Staging

☐ XCredit Hours (current) ☐ XPrerequisites (current) Co-requisite (current)

(proposed) 3
MRIS 150, MRIS 160, BIOL 109, MRIS 103, MRIS 210 (proposed)

☐ XCourse Description (current): (125 words maximum)

(proposed): General overview of various nomenclature and classification systems, ICD-O, AJCC, Collaborative Staging, & SEER staging and other coding standards and principles used in the cancer registry. Practices used in coding and abstracting cancer data.

☐ XCourse Outcomes and Assessment Plan (current)

(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Recognize the importance of coding information for data retrieval/usage.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>2. Determine the impact that stage of disease has on treatment decisions and</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment, case studies and quiz.</td>
</tr>
<tr>
<td>prognosis.</td>
<td></td>
</tr>
<tr>
<td>3. Differentiate between the various staging schemes and the relationship with</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment, case studies and quiz.</td>
</tr>
<tr>
<td>Collaborative Stage.</td>
<td></td>
</tr>
<tr>
<td>4. Assign stage of disease using the two main staging systems used in the U.S.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment, case studies and quiz.</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)

(proposed)
Using ICD-O-3 tumor classification system (6 hrs)
Applying diagnosis codes, appropriate code sequencing and evaluating the extent of disease. (9 hrs)
Understanding diagnostic and staging procedures performed on cancer patients. (3 hrs)
Review SEER cancer staging summaries, TNM and collaborative staging and their use. (27 hrs)
COURSE INFORMATION FORM

Complete all items below (New or Current).

Check all boxes where modifications are being made. Enter the modification to be made (Proposed).

Course Identification

☐ XPrefix (current) XNumber (current) ☐ XLEC X__ LAB __ SEM ___ (current)

(proposed) MRIS (proposed) 250

(Enter Contact Hours per week)

LEC ___ LAB ___ SEM ___ (proposed):

XTitle (current)

Abstracting Methods

☐ XCredit Hours (current) ☐ XPPrerequisites (current) Co-requisite (current)

3 (proposed) MRIS 170, MRIS 180 (proposed)

XCourse Description (current): (125 words maximum)

(proposed): Identify and apply the fundamentals of cancer registry abstracting. Assessment of clinical information and determine how the information would be reported using the accepted standards for data collection.

☐ XCourse Outcomes and Assessment Plan (current)

(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Ascertain the general principles of abstracting.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>2. Interpret the standards for cancer data collection &amp; reporting.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment, case studies and quiz.</td>
</tr>
<tr>
<td>3. Determine the information that needs to be recorded in the cancer registry abstract.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment, case studies and quiz.</td>
</tr>
<tr>
<td>4. Apply specific coding instructions for abstracting clinical data.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment, case studies and quiz.</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)

(proposed)

Source documents and information used for abstracting (3 hrs)

Abstracting principles, processes, suspense list and standards for a complete abstract (9 hrs)

Analyze/abstract source documents to interpret, stage and code primary cancer characteristics/information. (12 hrs)

Analyze/abstract source documents to code first course of treatment and code facility specific information (9 hrs)

Analyze and abstract information for major disease sites, i.e. lung, prostate, breast & colon (6 hrs)

Review source documents to determine the text information pertinent for recording in text format on abstract (3 hrs)

Abstract data submission and dissemination (3 hrs)
Complete all items below (New or Current).

Check all boxes where modifications are being made. Enter the modification to be made (Proposed).

**Course Identification**

- [ ] XPrefix (current) XNumber (current) [ ] XLEC ___ X__ LAB ___ SEM ___ (current)
  (proposed) MRIS (proposed) 260
  (Enter Contact Hours per week)
  LEC ___ LAB ___ SEM ___ (proposed): ___

- [ ] XTitle (current)

**Multiple Primary Histology & Hematopoietics**

- [ ] XCredit Hours (current) [ ] XPrerequisites (current) Co-requisite (current)
  (proposed) 3
  MRIS 170, MRIS 180 (proposed) (proposed)

- [ ] XCourse Description (current): (125 words maximum)

(proposed): In this course students will use the general and site-specific coding rules for determining the number of primary diagnoses when there are multiple tumors and/or histologic types. It will also review the standards that apply to abstracting and coding of hematopoietic and lymphoid neoplasms.

- [ ] XCourse Outcomes and Assessment Plan (current)

(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Distinguish between single/multiple primaries using appropriate registry standards.</td>
<td>90% of the students will receive at least 80% on grading rubric for case studies.</td>
</tr>
<tr>
<td>2. Apply coding guidelines for appropriate code selection for abstracting.</td>
<td>90% of the students will receive at least 80% on grading rubric for case studies.</td>
</tr>
<tr>
<td>3. Utilize the Multiple Primary Histology Coding Rules Database.</td>
<td>90% of the students will receive at least 80% on grading rubric for case studies.</td>
</tr>
<tr>
<td>4. Apply coding rules for entry in data abstract.</td>
<td>90% of the students will receive at least 80% on grading rubric for case studies.</td>
</tr>
</tbody>
</table>

- [ ] XCourse Outline including Time Allocation (current)

(proposed)

Review disease and diagnostic process for main cancer locations: breast, colon, lung, and prostate (3 hrs)
Analyze and interpret the coding rules for multiple primary histology coding. (18 hrs)
Analyze and interpret the coding rules for hematopoietic and lymphoid neoplasm coding with introduction to appropriate databases. (18 hrs)
COURSE INFORMATION FORM

FORM E
Rev. May 2013

Course Identification

☐ XPrefix (current) ☐ XNumber (current) ☐ XLEC _ X _ LAB ___ SEM ___ (current)
(proposed)MRIS (proposed)270 (Enter Contact Hours per week)
LEC _3_ LAB ___ SEM ___(proposed):

☐ XTitle (current)

Follow up, Data Quality & Utilization

☐ XCredit Hours (current) ☐ XPrerequisites (current) ☐ Co-requisite (current)
(proposed)3 MRIS 250, MRIS 250 (proposed)

☐ XCourse Description (current): (125 words maximum)
(proposed):
This course will provide best practices currently being used in the field for obtaining life-long follow up for appropriate cases. Explanation will be provided on data quality methods, database management and statistics/epidemiology used in a cancer registry.

☐ XCourse Outcomes and Assessment Plan (current)
(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. identify the best practices for cancer patient follow up.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>2. Report the specific methods/requirements for ensuring cancer data quality.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>3. Determine computer principles and database management.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
<tr>
<td>4. Apply biostatistical and epidemiological methodologies for clinical trials and research activities.</td>
<td>90% of the students will receive at least 80% on grading rubric for assignment and quiz.</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)
(proposed)
Statistical concepts & terminology (3 hrs)
Statistical calculations/techniques and statistical reports (6 hrs)
Survival Analysis and data presentation (3 hrs)
Epidemiology concepts, activities and study design (6 hrs)
Data Quality & performance improvement studies (3 hrs)
Clinical Practice guidelines and monitoring/improving quality of care (3 hrs)
Quality improvement principles and quality control plan (3 hrs)
Computer principles, required elements and management of a computerized cancer registry (3 hrs)
Database management-collecting, data storage and retrieval, data classification (6 hrs)
Interpret/update cancer registry information and cases including corrections to previously reported cases (3 hrs)
Active and passive follow up processes and file maintenance (3 hrs)
Death certificate clearance, database searches, case consolidation/record linkage for follow up (3 hrs)
COURSE INFORMATION FORM

Complete all items below (New or Current).
Check all boxes where modifications are being made.
Enter the modification to be made (Proposed).

Course Identification
☐ XPrefix (current) ☐ XNumber (current) ☐ LEC ___ LAB ___ SEM ___ (current)
(proposed) MRIS
(proposed) 295
(Enter Contact Hours per week)
LEC ___ LAB ___ SEM ___ (proposed):

☐ XTitle (current)

Cancer Registry Internship (proposed)

☐ XCredit Hours (current) ☐ XPrerequisites (current) Co-requisite (current)
(proposed) 4

Department Approval (proposed)

☐ XCourse Description (current): (125 words maximum)
(proposed) Clinical practice experience in a cancer registry to include all aspects of data collection, coding and abstracting cancer data, exposure to cancer conference/committee functions, data quality management and follow up activities.

☐ XCourse Outcomes and Assessment Plan (current)
(proposed):

<table>
<thead>
<tr>
<th>Course Outcomes</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Complete 30 abstracts using ICD-O, Staging (CS, AJCC TNM, SEER Summary and Treatment) with 95% accuracy rate.</td>
<td>90% of the student will receive at least 95% on cancer registrar evaluation of student abstract completion</td>
</tr>
<tr>
<td>2. Attend one Cancer Committee &amp; one Cancer Conference.</td>
<td>90% of the students will receive at least 80% on internship project</td>
</tr>
<tr>
<td>3. Complete the required number of internship hours in the specific cancer registry areas.</td>
<td>Clinical Hours Report/Cancer registrar review</td>
</tr>
</tbody>
</table>

☐ XCourse Outline including Time Allocation (current)
(proposed)

Internship/Clinical Practicum – total 160 hrs
Data collection (abstracting), ICD-O coding, CS staging, Treatment - 50%
Follow up – 11%
Cancer committee activities – 6%
Data utilization and reporting – 6%
Quality control – 6%
Required files (suspense, MPI, P&P, etc.) – 5%
Quality management studies – 5%
Case finding – 4%
Cancer conferences – 3%
Central registry operations - 2%
Legal requirements – 1%
Basic computer orientation – 1%
CREATE NEW COURSE
Course Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F’s that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective: 201608 (Fall)
Examples: 201301(Spring), 201305(Summer), 201308(Fall)
Note: The first four digits indicate year, the next two digits indicate month in which term begins.

II. NEW COURSE ATTRIBUTES:

a. Course Prefix MRS
b. Number 150
c. Contact Hours LECure 3 [LAB Seminar]
[Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.]
d. , Practicum , Independent Study
[Check (x) box as appropriate. See definitions in Appendix E.]
e. Course Title: Registry Structure & Management (Limit to 30 characters including punctuation and spaces.)
f. College Code: COHP
g. Department Code: CRHA
h. Credit Hours: Check (x) Type Variable
i. Enter number in box: 3 Minimum Credit Hours Min. Credit Hours k.
May Be Repeated for Added Credit: Check (x) Yes No
If yes, Max Times or Max Credits Awarded
l. Levels: Check (x) Undergraduate Graduate Professional
m. Grade Method: Check (x) Normal Grading Credit/No Credit (Pass/Fail)

n. Does proposed new course replace an equivalent course? Check (x) Yes No
o. Equivalent Course: Prefix Number
p. CATALOG DESCRIPTION - Limit to 125 words - PLEASE BE CONCISE.

This course is an introduction to the basic concepts of the structure & management of hospital based and central cancer registries including the purpose of cancer registries, confidentiality, and the role/data standards in standard setting organizations in cancer data management.

q. Term(s) Offered: Fall r. Max Section Enrollment: 20 Lecture: X Lab: s. Prerequisites or Restrictions: (If none, leave blank. Limit to 100 characters including punctuation and spaces.)

l. Co-requisites: courses must be taken concurrently (If none, leave blank. Limit to 100 characters including punctuation and spaces.)

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

Basic Skill (BS) General Education (GE) Occupational Education (OE)

G.E. Codes

UCC Chair Signature/Date: ___________________________ / ___________________________

Academic Affairs Approval Signature/Date: ___________________________ / ___________________________

Office of the Registrar use ONLY

Date Rec’d: _________ Date Completed: _________ Entered: SCACRSE ______ SCADTL ______ SCARRES ______ SCAPREO _______

20
CREATE NEW COURSE
Form Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F’s that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective: 201301 (Fall)  Examples: 201301 (Spring), 201305 (Summer), 201309 (Fall)

II. NEW COURSE Attributes:

a. Course Prefix/MRIS
b. Number 160

c. Contact Hours  LECTURE 3  LAB  Seminar
(Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.)

d.  Plazaicum  INDependent Study
[Check (x) box as appropriate. See definitions in Appendix E.]

e. Course Title: Cancer Registry Operations

f. College Code: COHP

g. Department Code: CRHA

h. Credit Hours: Check (x) type  Variable  X Fixed

i. Enter number in box.  Minimum Credit Hours  Maximum Credit Hours k.

j. May Be Repeated for Added Credit: Check (x)  Yes  No
If yes, Max Times  or Max Credits Awarded

k. Levels: Check (x)  Undergraduate  Graduate  Professional

l. Grade Method: Check (x)  XNormal Grading  XCredit/No Credit (Pass/Fail)

m. Does proposed new course replace an equivalent course? Check (x)  Yes  XNo

n. Equivalent course: Prefix  Number

p. CATALOG DESCRIPTION – Limit to 125 words – PLEASE BE CONCISE.

This course will focus on management functions including budgeting, annual reports, staffing, Commission on Cancer standards including cancer conferences/committees. Basic operational tasks will be introduced; case ascertainment, abstracting, data management and cancer agency networking.

q. Term(s) Offered: Fall  s. Max Section Enrollment: 20  x. Lecture: X  Lab:  y. Prerequisites or Restrictions: (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

z. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

__________________________

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

E. Basic Skill (BS)  G. General Education (GE)  O. Occupational Education (OC)

__________________________

UCC Chair Signature/Date:  Academic Affairs Approval Signature/Date:

__________________________

Office of the Registrar use ONLY

Date Rec’d:  Date Completed:  Entered:  SCACRES  SCADTL  SCARRES  SCAPREQ
CREATE NEW COURSE

Course Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F's that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective 201701 (Spring) Examples: 201301(Spring), 201305(Summer), 201309(Fall)

II. NEW COURSE ATTRIBUTES:

a. Course Prefix: MRRS

b. Number: 170

c. Contact Hours: Lecture 3 Lab □ Seminar
[Enter hours per week in box. See formula for contact hours to credit hours in Appendix E]

d. □ Practicum □ INDependent Study
[Check (x) box as appropriate. See definitions in Appendix E]

e. Course Title: Cancer Disease Management

f. College Code: CHHP  g. Department Code: CRHA  h. Credit Hours: Check (x) □ Variable □ XFixed

i. Enter number in box 3 Minimum Credit Hours j. Maximum Credit Hours k.

May Be Repeated for Added Credit: Check (x) □ Yes □ No
Il yes, Max Times or Max Credits Awarded

l. Levels: Check (x) □ XUndergraduate □ Graduate □ Professional

m. Grade Method: Check (x) □ XNormal Grading □ Credit/No Credit (Pass/Fail)

n. Does proposed new course replace an equivalent course? Check (x) □ Yes □ XNo

o. Equivalent course: Prefix Number

p. CATALOG DESCRIPTION - Limit to 125 words - PLEASE BE CONCISE.

This course is an introduction to the pathophysiology of cancer including symptomatology, diagnostic and treatment modalities specific to the type/site of cancer and staging.

q. Term(s) Offered: Spring

r. Max Section Enrollment: 20 Lecture: 3 Lab:

s. Prerequisites or Restrictions: BIOL 109, MRRS 210 (If none, leave blank. Limit to 100 characters including punctuation and spaces.)

t. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

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

UCC Chair Signature/Date:

Academic Affairs Approval Signature/Date:

Office of the Registrar use ONLY

Data Rec’d: Entered: SCACRSE □ SCADTEL □ SCARRES □ SCAPREQ
CREATE NEW COURSE
Course Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F’s that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective 201701 (Spring)  Examples: 201301(Spring), 201305(Summer), 201308(Fall)

II. NEW COURSE ATTRIBUTES:

a. Course Prefix MRIS  b. Number 180  c. Contact Hours LECTure 3  LAB  

Seminar  [Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.]

d.  Practicum  Independent Study  

[Check (x) box as appropriate. See definitions in Appendix E.]

e. Course Title: Oncology Coding & Staging

f. College Code: COHP  g. Department Code:CRHA  h. Credit Hours: Check (x) type Variable  

XFixed

i. Enter number in box 3  Minimum Credit Hours  

j. Maximum Credit Hours k.

May Be Repeated for Added Credit: Check (x)  

Yes  No

If yes, Max Times  

or Max Credits Awarded

l. Levels: Check (x)  Undergraduate  Graduate  Professional  

m. Grade Method: Check (x)  XNormal Grading  Credit/No Credit (Pass/Fail)

n. Does proposed new course replace an equivalent course? Check (x)  

Yes  XNo

o. Equivalent course? Prefix  Number

p. CATALOG DESCRIPTION – Limit to 125 words – PLEASE BE CONCISE.

General overview of various nomenclature and classification systems, ICD-O, AJCC, Collaborative Staging, & SEER staging and other coding standards and principles used in the cancer registry. Practices used in coding and abstracting cancer data.

q. Term(s) Offered: Spring  r. Max Section Enrollment: 20  Lecture:  

s. Lab:   

s. Prerequisites or Restrictions: BIOL 109, MRIS 103, MRIS 210

l. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

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

UCC Chair Signature/Date:  Academic Affairs Approval Signature/Date:

/ /  / /  

Office of the Registrar only

Date Rec’d:  Date Completed:  Entered: SCACRSE  SCADTL  SCARRES  SCAPREQ
CREATE NEW COURSE
Course Data Entry Form

FORM F
Rev. September 2012

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F's that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective 201705 (Summer) Examples: 201301 (Spring), 201305 (Summer), 201308 (Fall).

II. NEW COURSE ATTRIBUTES:

a. Course Prefix MRIS
b. Number 259

c. Contact Hours
   Lecture 3
   Lab 0
   Seminar
   [Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.]

d. ☐ Practicum
   ☐ Independent Study
   [Check (x) box as appropriate. See definitions in Appendix E.]

e. Course Title: Abstracting Methods

f. College Code: COHP
   g. Department Code: CRHA
   h. Credit Hours: Check (x) type: ☐ Variable ☐ XFixed

I. Enter number in box. ☐ Maximum Credit Hours:

May Be Repeated for Added Credit: Check (x) ☐ Yes ☐ No
If yes, Max Times or Max Credits Awarded

I. Levels: Check (x) ☐ Undergraduate ☐ Graduate ☐ Professional

m. Grade Method: Check (x) ☐ XNormal Grading ☐ Credit/No Credit (Pass/Fail)

n. Does proposed new course replace an equivalent course? Check (x) ☐ Yes ☐ XNo

o. Equivalent course: Prefix Number

p. CATALOG DESCRIPTION—Limit to 125 words—PLEASE BE CONCISE.

Identify and apply the fundamentals of cancer registry abstracting. Assessment of clinical information and determine how the information would be reported using the accepted standards for data collection.

c. Term(s) Offered: Summer
   r. Max Section Enrollment: 20
   Lecture: 3
   Lab: 0
   s. Prerequisites or Restrictions: MRIS 170, MRIS 180

I. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

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

☐ Basic Skill (BS) ☐ General Education (GE) ☐ Occupational Education (CC) ☐ G.E. Codes

UCC Chair: Signature/Date: ____________________________ / / Academic Affairs Approval Signature/Date: ____________________________ / /

Office of the Registrar use ONLY

Date Rec’d: _________ Date Completed: _______ Entered: SCACRSE ______ SCADETL: ______ SCARRES: ______ SCAPREQ: ______
CREATE NEW COURSE
Course Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F’s that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE
   Desired Term Effective: 2017/05 (Summer)   Examples: 201301(Spring), 201305(Summer), 201308(Fall)

II. NEW COURSE ATTRIBUTES:
   a. Course Prefix MRIS
   b. Number 250
   c. Contact Hours LECTURE 3 LAB [Seminar]
   [Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.]
   d. Pracicum  INDependent Study
   [Check (x) box as appropriate. See definitions in Appendix E.]
   e. Course Title: Multiple Primary Histology & Hematopoietics
   f. College Code: COHP
   g. Department Code: CRHA
   h. Credit Hours: Check (x) by: [ ] Variable [ ] XFixed
   i. Enter number in box: 3 Minimum Credit Hours: 3 Maximum Credit Hours:
   j. May Be Repeated for Added Credit Check (x) [ ] Yes [ ] XNo
   k. If yes, Max Times or Max Credits Awarded:
   l. Levels: Check (x) [ ] XUndergraduate [ ] Graduate [ ] Professional
   m. Grade Method: Check (x) [ ] XNormal Grading [ ] Credit/No Credit [ ] Pass/Fail
   n. Does proposed new course replace an equivalent course? Check (x) [ ] Yes [ ] XNo
   o. Equivalent course: Prefix Number
   p. CATALOG DESCRIPTION—Limit to 125 words—PLEASE BE CONCISE.
   In this course students will use the general and site-specific coding rules for determining the number of primary diagnoses when there are multiple tumors and/or histologic types. It will also review the standards that apply to abstracting and coding of hematopoietic and lymphoid neoplasms.
   q. Term(s) Offered: Summer
   r. Max Section Enrollment: 20
   s. Prerequisites or Restrictions: MRIS 170, MRIS 160
   t. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

To be completed by Academic Affairs Officer: Standard & Measures Coding and General Education Code
[ ] Basic Skill (BS) [ ] General Education (GE) [ ] Occupational Education (OC) [ ] G.E. Codes

UCC Chair Signature/Date: ______________________  / /

Academic Affairs Approval Signature/Date: ______________________  / /

Office of the Registrar use ONLY
Date Rec’d: __________ Date Completed: ______ Entered: SCACRSE ______ SCADETL ______ SCARRES ______ SCAPREQ ______
CREATE NEW COURSE
Course Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F's that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective: 201708 (Fall)
Examples: 201301 (Spring), 201305 (Summer), 201308 (Fall)

II. NEW COURSE ATTRIBUTES:

a. Course Prefix: MRIS
b. Number: 270

c. Contact Hours: LECTURE 3 LAB 0 Seminar
[Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.]

d. ☐ Practicum
☐ Independent Study
[Check (x) box as appropriate. See definitions in Appendix E.]

e. Course Title: Follow up, Data Quality & Utilization

f. College Code: CHHP

Department Code: CRHA
h. Credit Hours: Check (x) type ☐ Variable ☐ X Fixed

i. Enter number in box:

Minimum Credit Hours
Maximum Credit Hours

May Be Repeated for Added Credit: Check (x) ☐ Yes ☐ No

If yes, Max Times or Max Credits Awarded

j. Levels: Check (x) ☐ Undergraduate ☐ Graduate ☐ Professional

m. Grade Method: Check (x) ☐ Normal Grading ☐ Credit/No Credit (Pass/Fail)

n. Does proposed new course replace an equivalent course? Check (x) ☐ Yes ☐ No

o. Equivalent course: Prefix ☐ Number

p. CATALOG DESCRIPTION -- Limit to 125 words -- PLEASE BE CONCISE.

This course will provide best practices for obtaining life-long follow up for appropriate cases. Explanation will be provided on data quality methods, database management and statistics/epidemiology used in a cancer registry.

q. Term(s) Offered: Fall
r. Max Section Enrollment: 20 Lecture: 3 Lab:
s. Prerequisites or Restrictions: MRIS 250, MRIS 260

t. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

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

UCC Chair Signature/Date: ___________________________ / /

Academic Affairs Approval Signature/Date: ___________________________ / /

Office of the Registrar use ONLY

Date Rec'd: __________ Date Completed: ______ Entered: SCACRSE ____ SCADTL ____ SCARRES ____ SCAPREQ ____
CREATE NEW COURSE

Course Data Entry Form

COMPLETE ALL SECTIONS BELOW. If this course is to be used as a prerequisite for other university courses, Form F is that reflect the prerequisite change must be submitted for those courses as well. See Appendix E Instructions for Completing Forms.

I. ACTION TO BE TAKEN: CREATE A NEW COURSE

Desired Term Effective: 201301 (Spring)

Examples: 201301 (Spring), 201305 (Summer), 201309 (Fall).

II. NEW COURSE ATTRIBUTES:

a. Course Prefix: MRIS  
b. Number: 295    
c. Contact Hours: Lecture: 4  
LAB: 4    
Seminar

[Enter hours per week in box. See formula for contact hours to credit hours in Appendix E.]

d. ☐ XPracticum

☐ Independent Study

[Check (x) box as appropriate. See definitions in Appendix E.]

e. Course Title: Cancer Registry Internship

f. College Code: COHP  
g. Department Code: CRHA  
h. Credit Hours: Check (x) type [ ] Variable  
☐ XFixed

I. Enter number in box: 4  
Minimum Credit Hours: 4  
Maximum Credit Hours: 8

May Be Repeated for Added Credit

Check (x)  
☐ Yes  
☐ No

If yes, Max Times  
or Max Credits Awarded

k. Levels: Check (x)  
☐ Undergraduate  
☐ Graduate  
☐ Professional

l. Grade Method: Check (x)  
☐ XNormal Grading  
☐ Credit/No Credit (Pass/Fail)

m. Does proposed new course replace an equivalent course? Check (x)  
☐ Yes  
☐ No

n. Equivalent Course: Prefix  
Number

p. CATALOG DESCRIPTION—Limit to 125 words—PLEASE BE CONCISE.

160 hours of clinical practice experience in a cancer registry under the direct supervision of a CTR. Topics to be covered include all aspects of data collection, coding and abstracting cancer data, exposure to cancer conferences/committee functions, data quality management and follow up activities.

q. Term(s) Offered: Spring  
r. Max Section Enrollment: 20  
Lecture: Lab:  
s. Prerequisites or Restrictions: Department Approval

t. Co-requisites: courses must be taken concurrently (if none, leave blank. Limit to 100 characters including punctuation and spaces.)

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

UGC Chair Signature/Date:  
__________________________  
/ /

Academic Affairs Approval Signature/Date:  
__________________________  
/ /

Office of the Registrar use ONLY

Date Rec’d:_______  
Date Completed:____ Enter: SCGRSE:  
SCADET:__  
SCARES:___  
SCAPREQ:____
FORM FIN

To be completed by the Director of Financial Aid (DFA). The DFA must return the original form to the Academic Senate Office to be inserted in the proposal and a copy to the initiator. The DFA must respond within 10 business days of receipt of this form to ensure that the form is included in the final proposal.

Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

RE: Proposal Title: Cancer Information Management

Initiators: Paula Koning, MM, RHIA

Proposal Contact: Paula Koning, MM, RHIA

Department: Clinical Lab/Respiratory Care/Health Administration

Date Sent: 5/28/15

151 Fountain St, Grand Rapids

Date Returned: 6-28-15

Director of Financial Aid Signature:

Please check all that apply:

- The new program is remedial as it prepares students for study at the postsecondary level. This program is not an eligible program per Federal requirements; therefore students in this program are not eligible to receive financial aid.

- The new program is considered a preparatory program as it prepares a student for a given program, i.e., they do not meet the academic criteria to be admitted into the program. Student is only eligible for Federal Direct Loans for one year.

- The new program is a certificate program. Certificate programs are not eligible programs per Federal requirements; therefore students in this program are not eligible to receive financial aid.

- The new program is a teacher certification program where it provides coursework required for a professional State credential necessary for employment as an elementary or secondary school teacher, but for which the institution awards no academic credential. Students are eligible for Federal Direct Loans only at an undergraduate level.

X The new program is a teacher certification program that will award a certificate credential. Certificate programs are not eligible program per Federal requirements; therefore students in this program are not eligible to receive financial aid.

- The new program is a Bachelor Completion program; a two-year degree completion program that requires an associate degree or the successful completion of at least two years of college coursework as a prerequisite for admission. These are aid eligible programs and students may receive financial aid.

- The new program is a Master's, Professional, or Doctoral Degree/Major program that allows students to take some undergraduate courses where some deficiency exists. Please note, students are eligible to receive Federal loans for the program, but undergraduate courses will not be included in the total credit count to determine loan eligibility. Students must be half time (Graduate/Professional = 5 credits, Doctoral = 3 credits) in graduate level courses to receive Federal aid.

- The new program is an Associate's, Bachelor's, Master's, Professional, or Doctoral Degree/Major and is conferred upon graduation. Per Federal requirements, these are aid eligible programs and students may receive financial aid.
Please include the number of credit hours to earn the degree or credential being sought. This is required as it must be reported to the Department of Education as well as the National Student Loan Clearinghouse, regardless if students are receiving federal aid.

Credits Required to Earn Degree:
Certificate  37 credits

Revised 4/30/14 sd
GENERAL EDUCATION APPROVAL FORM

Form G plus justification of the General Education designation being sought must be sent to the General Education Coordinator (preferably electronically). The criteria for each designation can be found FSU General Education website:
http://www.ferris.edu/HTMLS/academics/gened/gened.html

Upon review, the form below will be completed by the University General Education Committee for the courses that will meet General Education requirements. The form must be included in the proposal packet.

Course Prefix: **BIOL**  Course Number: **109**

**Course Title:** Basic Human Anatomy-Physiology  **G. E. Codes Requested:** **ZL**

| G.E. Codes: G=Global Consciousness; R=Race/Ethnicity/Gender Issues; S=Social Awareness; C=Cultural Enrichment; W=Writing Intensive; Z=Scientific Understanding; ZL=Scientific Understanding (Lab) |

Initiator: Paula Koning, MM, RHIA  Date Sent: **9/28/15**

Proposal Contact: Paula Koning, MM, RHIA  Email: paulakoning@ferris.edu

Department: Clinical Lab/Respiratory Care/Health Administration  Campus Address: 151 Fountain St, Grand Rapids

Please Print

University General Education Committee: ****

Chair: _____ Date Returned: _____

Based upon University General Education Committee review on _____(date), we

☐ Support the request to designate the course listed above as a _____(insert Gen. Ed. Designation(s).)

☐ Do not support the request to designate the course listed above as a _____(insert Gen. Ed. Designation(s) for reasons listed below.

Comments:

_____