

CHANGE MASTERS DEGREE PROGRAM FORM

1. GENERAL INFORMATION

College:	Medicine	Department:	Nutritional Sciences
Current Major Name:	Nutritional Sciences	Proposed Major Name:	same
Current Degree Title:	M.S. in Nutritional Sciences	Proposed Degree Title:	M.S. in Nutritional Sciences
Formal Option(s):		Proposed Formal Option(s):	
Specialty Fields w/in Formal Option:		Proposed Specialty Fields w/in Formal Options:	
Date of Contact with Associate Provost for Academic Administration ¹ :	no one with that title on provost website		
Bulletin (yr & pgs):	2012-3, p 245	CIP Code ¹ :	30.1901
Today's Date:	Oct. 8, 2013		
Accrediting Agency (if applicable):			
Requested Effective Date:	<input checked="" type="checkbox"/> Semester following approval.	OR	<input type="checkbox"/> Specific Date ² :
Dept. Contact Person:	Howard P. Glauert	Phone:	257-7789
Email:	hglauert@uky.edu		

2. CHANGE(S) IN PROGRAM REQUIREMENTS

		<u>Current</u>	<u>Proposed</u>
1.	Number of transfer credits allowed (Maximum is Graduate School limit of 9 hours or 25% of course work)	N/A	<i>There are no changes to program requirements 1-7, 9-10 listed below</i>
2.	Residence requirement (if applicable)	N/A	
3.	Language(s) and/or skill(s) required	N/A	
4.	Termination criteria	N/A	
5.	Plan A Degree Plan requirements ³ (thesis)	N/A	
6.	Plan B Degree Plan requirements ³ (non-thesis)	N/A	
7.	Distribution of course levels required (At least one-half must be at 600+ level & two-thirds must be in organized courses.)	N/A	
8.	Required courses (if applicable)	See Attached Course Changes	<i>See Attached Course Changes</i>
9.	Required distribution of courses within program (if applicable)	N/A	
10.	Final examination requirements	N/A	

¹ Prior to filling out this form, you MUST contact the Associate Provost for Academic Administration (APAA). If you do not know the CIP code, the APAA can provide you with that during the contact.

² Program changes are typically made effective for the semester following approval. No changes will be made effective until all approvals are received.

³ If there is only one plan for the degree, plans involving a thesis (or the equivalent in studio work, etc.) should be discussed under Plan A and those not involving a thesis should be discussed under Plan B.

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11.	Explain whether the proposed changes to the program (as described in sections 1 to 10) involve courses offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s).</u>
	One new IBS courses has been added as an alternative to an existing core course: IBS 611 can be taken instead of STA 570. In the Molecular and Biochemical Nutrition emphasis, a new IBS course, IBS 602, can be taken instead of BCH 608.
12.	List any other requirements not covered above?
13.	Please explain the rationale for changes. If the rationale involves accreditation requirements, please include specific references to those requirements.
	These course changes are in response to changes in the Integrated Biomedical Sciences (IBS) program, which took effect Fall semester, 2013. IBS 611, Practical Statistics, is a new course that has been designed to provide practical statistics training for biomedical sciences students; we propose that students be allowed to take this course instead of STA 570, Basic Statistical Analysis. IBS 602 has been modified: this course will combine elements of Molecular Biology (IBS602/BCH 608 in old curriculum; DNA/RNA structure, DNA repair, Replication, Transcription, Translation) and Genetics (IBS605 in old curriculum; Mendelian principles, mouse genetics, genomics, bioinformatics). We propose that students be allowed to take either IBS 602 or BCH 608 to add flexibility to the program.

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Signature Routing Log

General Information:

Proposal Name: Nutritional Sciences M.S. Program Change

Proposal Contact Person Name: Howard P. Glauert Phone: 257-
7789 Email: hglauert@uky.edu

INSTRUCTIONS:

Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

Internal College Approvals and Course Cross-listing Approvals:

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
Nutritional Sciences faculty	09/30/2013	Shuxia Wang / 3-4933 / swang7@uky.edu	
IBS Program		Brett Spear / 7-5167 / bspear@uky.edu	
		/ /	
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁴
Undergraduate Council			
Graduate Council	4/11/14	<i>Roshan Nikou</i>	
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

⁴ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.

Master's in Nutritional Sciences

Total Credits Required for **Degree 30**

Prerequisite – 200 level or equivalent physiology course.

Prerequisite a 400 level or equivalent biochemistry course.

Core Courses for MS NS

Course #, Title, (Credits)

CNU/NS 601 Integrated Nutritional Sciences Part I (3)

NS/ASC/CNU 602 Integrated Nutritional Sciences Part II (3)

CNU/NS/FSC 603 Integrated Nutritional Sciences Part III (2)

NS/CNU/NFS 704 Current Topics (1)

STA 570 Basic Statistical Analysis (4)

NS 771* Seminar (1 cr) ** (0 credit)

NS/CNU/NFS 782 Special Problems* (1-6)

CNU/NS 609 Ethics (1)

Core Credits 15

** Plan B only * Plan A only

Courses for Emphasis in Clinical Nutrition

Course #, Title, (Credits)

Prerequisite – B.S. in Dietetics and/or meeting AND dietetics requirements for internship

CNU 501 Nutraceuticals and Functional Foods or

CNU 502 Obesity Cell to Community (2)

CNU/NS 702 Clinical Nutrition Problem Based Case Studies (1-3)

CNU 611 Advanced Medical Nutrition Therapy (2) (New course)

CNU 612 Examination Skills for the Clinical Nutritionist (2)

Emphasis Credits 7 to 9

Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Wellness and Sports Nutrition

Course #, Title, (Credits)

CNU/NS 605 Wellness and Sports Nutrition (3)
KHP 600 Exercise Stress Testing and Prescription (3)
KHP 620 Advanced Exercise Physiology (3)
CNU 501 Nutraceuticals and Functional Foods (2)
Emphasis Credits 11
Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Community Nutrition

Course #, Title, (Credits)

CPH 605 Epidemiology (3)
DHN 603 Advanced Community Program Development (3)
(Every other Fall)
DHN 607 Food Related Behaviors (3)(Every Other Spring)
Emphasis Credits 9
Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Molecular and Biochemical Nutrition

Course #, Title, (Credits)

BCH607 (IBS 601) Biochemistry (3) or CHE550 (3 credits)
BCH 608 (IBS 602) Biochemistry (3) or CHE552 (3 credits)
NS/CNU 606 Molecular Biology Applications in Nutrition (2)
Emphasis Credits 8
Electives to equal a minimum of 30 credit hours

Revised Program: Master's in Nutritional Sciences

Deleted: New

Total Credits Required for Degree: **30**

Prerequisite – 200 level or equivalent physiology course.

Prerequisite - a 400 level or equivalent biochemistry course.

Core Courses for MS NS

Course #, Title, (Credits)

CNU/NS 601 Integrated Nutritional Sciences Part I (3)

NS/ASC/CNU 602 Integrated Nutritional Sciences Part II (3)

CNU/NS/FSC 603 Integrated Nutritional Sciences Part III (2)

NS/CNU/NFS 704 Current Topics (1)

STA 570 Basic Statistical Analysis (4)

OR IBS 611 Practical Statistics (1)

NS 771* Seminar (1 cr) ** (0 credit)

NS/CNU/NFS 782 Special Problems* (1-6)

CNU/NS 609 Ethics (1)

Core Credits 12-15

** Plan B only * Plan A only

Courses for Emphasis in Clinical Nutrition

Course #, Title, (Credits)

Prerequisite – B.S. in Dietetics and/or meeting AND dietetics requirements for internship

CNU 501 Nutraceuticals and Functional Foods or

CNU 502 Obesity Cell to Community (2)

CNU/NS 702 Clinical Nutrition Problem Based Case Studies (1-3)

CNU 611 Advanced Medical Nutrition Therapy (2) (New course)

CNU 612 Examination Skills for the Clinical Nutritionist (2)

Emphasis Credits 7 to 9

Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Wellness and Sports Nutrition

Course #,Title, (Credits)

CNU/NS 605 Wellness and Sports Nutrition (3)
KHP 600 Exercise Stress Testing and Prescription (3)
KHP 620 Advanced Exercise Physiology (3)
CNU 501 Nutraceuticals and Functional Foods (2)
Emphasis Credits 11
Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Community Nutrition

Course #,Title, (Credits)

CPH 605 Epidemiology (3)
DHN 603 Advanced Community Program Development (3)
(Every other Fall)
DHN 607 Food Related Behaviors (3)(Every Other Spring)
Emphasis Credits 9
Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Molecular and Biochemical Nutrition

Course #,Title, (Credits)

BCH607 (IBS 601) Biomolecules and Metabolism (3)
BCH 608 Biomolecules and Molecular Biology (3)
OR IBS 602 Molecular Biology and Genetics (3)
NS/CNU 606 Molecular Biology Applications in Nutrition (2)
Emphasis Credits 8
Electives to equal a minimum of 30 credit hours

Revised Program: Master's in Nutritional Sciences

Total Credits Required for Degree: **30**

Prerequisite – 200 level or equivalent physiology course.

Prerequisite - a 400 level or equivalent biochemistry course.

Core Courses for MS NS

Course #, Title, (Credits)

CNU/NS 601 Integrated Nutritional Sciences Part I (3)

NS/ASC/CNU 602 Integrated Nutritional Sciences Part II (3)

CNU/NS/FSC 603 Integrated Nutritional Sciences Part III (2)

NS/CNU/NFS 704 Current Topics (1)

STA 570 Basic Statistical Analysis (4)

OR IBS 611 Practical Statistics (1)

NS 771* Seminar (1 cr) ** (0 credit)

NS/CNU/NFS 782 Special Problems* (1-6)

CNU/NS 609 Ethics (1)

Core Credits 12-15

** Plan B only * Plan A only

Courses for Emphasis in Clinical Nutrition

Course #, Title, (Credits)

Prerequisite – B.S. in Dietetics and/or meeting AND dietetics requirements for internship

CNU 501 Nutraceuticals and Functional Foods or

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CNU 612 Examination Skills for the Clinical Nutritionist (2)

Emphasis Credits 7 to 9

Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Wellness and Sports Nutrition

Course #, Title, (Credits)

CNU/NS 605 Wellness and Sports Nutrition (3)
KHP 600 Exercise Stress Testing and Prescription (3)
KHP 620 Advanced Exercise Physiology (3)
CNU 501 Nutraceuticals and Functional Foods (2)
Emphasis Credits 11
Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Community Nutrition

Course #, Title, (Credits)

CPH 605 Epidemiology (3)
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(Every other Fall)
DHN 607 Food Related Behaviors (3)(Every Other Spring)
Emphasis Credits 9
Electives to equal a minimum of 30 credit hours

Courses for Emphasis in Molecular and Biochemical Nutrition

Course #, Title, (Credits)

BCH607 (IBS 601) Biomolecules and Metabolism (3)
BCH 608 Biomolecules and Molecular Biology (3)
OR IBS 602 Molecular Biology and Genetics (3)
NS/CNU 606 Molecular Biology Applications in Nutrition (2)
Emphasis Credits 8
Electives to equal a minimum of 30 credit hours

CHANGE MASTERS DEGREE PROGRAM FORM
Signature Routing Log

General Information:

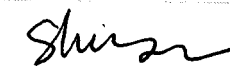

Proposal Name: Nutritional Sciences M.S. Program Change

Proposal Contact Person Name: Howard P. Glauert Phone: 257-7789 Email: hglauert@uky.edu

INSTRUCTIONS:

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Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
Nutritional Sciences faculty	09/30/2013	Shuxia Wang / 3-4933 / swang7@uky.edu	
IBS Program	10/10/13	Brett Spear / 7-5167 / bspear@uky.edu	
		/ /	
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁴
Undergraduate Council			
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

⁴ Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council

SIGNATURE ROUTING LOG

General Information:

Proposal Type: Course Program Other

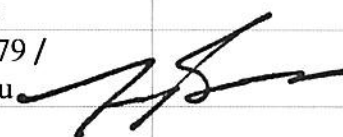
Proposal Name¹ (course prefix & number, pgm major & degree, etc.): Nutritional Science MS Program Change

Proposal Contact Person Name: Howard Glauert Phone: 257-7789 Email: hglauert@uky.edu

INSTRUCTIONS:

Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

Internal College Approvals and Course Cross-listing Approvals:

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
COM Curriculum Committee	12/16/13	Melissa Wilkeson / 859-257-5286 / melissa.wilkeson@uky.edu	
COM Faculty Council	2/18/14	Hollie Swanson / 859-323-1463 / hswan@email.uky.edu	
Dean, College of Medicine	3/3/14	Fred deBeer / 859-323-5079 / Fedebel@email.uky.edu	
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ²
Undergraduate Council			
Graduate Council			
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

¹ Proposal name used here must match name entered on corresponding course or program form.

² Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.