APPLICATION FOR CHANGE IN EXISTING COURSE: MAJOR and MINOR

1.	Submitted by the College of Health Sciences Date: 10/4/07							
	Department/Division offering course: Clinical Sciences/ Physician Assistant Studies							
2.	What type of change is being proposed? Major Minor* *See the description at the end of this form regarding what constitutes a minor change. Minor changes are sent directly from the dean of the college to the Chair of the Senate Council.							
	If the Senate Council chair deems the change not to be minor, the form will be sent to the appropriate Council for normal processing and an email notification will be sent to the contact person.							
	PROPOSED CHANGES							
	Please complete <u>all</u> "Current" fields.							
	Fill out the " <i>Proposed</i> " field only for items being changed. Enter N/A if not changing.							
	Circle the number for each item(s) being changed. For example: (6.)							
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<i>3.)</i>	Current prefix & number: PAS 851 Proposed prefix & number: PAS 651							
4.	Current Title Introduction to the PA Profession							
	Proposed Title [†] N/A							
	† If title is longer than 24 characters (including spaces), write a sensible title (24 characters or less) for use on transcripts:							
	Intro PA Profession							
5.	Current number of credit hours: 2 Proposed number of credit hours: N/A							
	Troposeu number of creat nours							
6.	Currently, is this course repeatable? YES NO If YES, current maximum credit hours:							
	Proposed to be repeatable? YES NO If YES, proposed maximum credit hours:							
7.	Current grading system: Letter (A, B, C, etc.) Pass/Fail							
	Proposed grading system: Letter (A, B, C, etc.) Pass/Fail							
8.	Courses must be described by at least one of the categories below. Include the number of actual contact hours per week for each							
	category, as applicable.							
	Current:							
	() CLINICAL () COLLOQUIUM () DISCUSSION () LABORATORY (_2) LECTURE							
	() INDEPEND. STUDY () PRACTICUM () RECITATION () RESEARCH () RESIDENCY () SEMINAR () STUDIO () OTHER – Please explain:							
	Proposed:							
	() CLINICAL () COLLOQUIUM () DISCUSSION () LABORATORY () LECTURE () INDEPEND. STUDY () PRACTICUM () RECITATION () RESEARCH () RESIDENCY							
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0								
9.	Requested effective date (term/year): Spring / 2008							
10.	Current teaching method: N/A Community-Based Experience Service Learning Component Both							

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	Proposed teaching method (if applicable):	☐ Community-Basea	Experience 🔲 Service Learr	ning Component 🔲 Both					
11.	Current cross-listing: N/A	Prefix and Number	NAME of current cross-lis	ting DEPARTMENT					
	a. Proposed – REMOVE the current cross-listing:								
	b. Proposed – ADD a cross-listing:	Prefix and Number	Signature of chair of prope	osed cross-listing department					
12.	Current prerequisites: Enrollment in the Physician Assistant Program								
	Proposed prerequisites: N/A		/						
13.	Current Bulletin description: This course provides an overview of se first half of the semester is devoted to e demographics and regulations, principal second half of the semester is devoted principles and ethical theories, as well a primary care providers in the 20th and	examination of the history als of quality assurance, to the study of the ethica as a series of seminar di 21st centuries.	y and evolution of the PA proferisk management, and medical dimensions of PA practice. T	ession, current PA practice I literature evaluation. The Fopics include moral hical issues confronting					
	Proposed Bulletin description: N/A								
14.	What has prompted this change? When switching to a graduate degree program, all course numbers were not changed to graduate numbers and this proposal will correct this.								
15.	If there are to be significant changes in the N/A								
16.	Please list any other department that could		•						
17.	Will changing this course change the degre If YES [‡] , list below the programs that required the course required for the Masters of Scientific Course Course required for the Masters of Scientific Course Course required for the Masters of Scientific Course required for the Masters of Scientific Course Course required for the Masters of Scientific Course required for the Masters of Scientif	e requirements for ANY prethis course:	ogram on campus?	≥ YES □ NO PAS 851 to PAS 651.					
	‡ In order for the <u>course</u> change to be consi	dered, <u>program</u> change for	n(s) for the programs above must	also be submitted.					
18	Is this course currently included in the Uni	versity Studies Program?		□ Ves ⊠ No					

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19.	Check box if changed to 400G or 500.	graduate students by	If changed to 400G- or 500-level, <i>you must include a syllabus showing differentiation</i> for undergraduate and graduate students by (i) requiring additional assignments by the graduate students; and/or (ii) the establishment of different grading criteria in the course for graduate students. (See SR 3.1.4)					
20.	Within the department,	who should be contact			sed course change?			
3.1	I I'. CII DID	D.A. C.		3-1100, ext	r ''			
Nan	ne: Julie Gurwell, PhD,	PA-C	Phone: 80	843	Email: jagur@uky.edu			
21.	Signatures to report	approvals:						
	DATE of Approval by	7-07	Harano). Staff	Ph. Sho			
	DATE of Approval by	Department Faculty	printed name	Report	ed by Department Chair	signature		
	/2 - /O - DATE of Approval I	07	Sharon C	Skurt	Maion & L	Swart		
	DATE of Approval I	by College Faculty	printed name	Repo	orted by College Dean	signature		
					/			
	*DATE of Approval		printed name	Reported by	Undergraduate Council Chair	signature		
					/			
	*DATE of Approval b	y Graduate Council	printed name	Reported	by Graduate Council Chair	signature		
					1			
	*DATE of Approva Colleges Coun		printed name	Reported by He	alth Care Colleges Council Chair	signature		
	*DATE of Approval	by Senate Council		Reported by	Office of the Senate Council			
	*DATE of Approval	-		Reported by th	ne Office of the Senate Council			
*	If applicable, as provided b	by the <i>University Senat</i>	te Rules. (<u>http://www.s</u>	uky.edu/USC/Nev	v/RulesandRegulationsMain.htm)			
			*****	**				
	Excerpt from <i>Univ</i>	ersity Senate Rules:						
		e <mark>finition.</mark> A request ma teria:	ay be considered a min	nor change if it m	eets one of the following			
					does not imply change in			
	c. a change in prerequisite(s) which does not imply change in content or emphasis, or which is made necessary by the elimination or significant alteration of the							
		prerequisite(s); d. a cross-listing of	fa course under condi	tions sat forth in	CD 2 2 0 E.			
			ographical errors.	mons set toldi ill i	JK J.J.U.D,			