Wilkes University Curriculum Committee

PROPOSAL SUBMITTAL FORM

Directions:
- Use this set of forms for all proposals sent to the Curriculum Committee.
- Pages 1-3 of this document are required. Any unnecessary forms should be deleted from the packet before submissions. If multiple forms are needed (course addition, course deletion, etc), simply copy and paste additional forms into this packet.
- Note that all new programs (majors and minors), program eliminations, significant program revisions and all general education core revisions must be reviewed and approved by the Provost and Academic Planning Committee (APC) prior to submission to the Curriculum Committee. The Provost will make the decision if a program revision requires APC review.
- Completed and signed forms are due no later than the first Tuesday of every month. Submit one signed original hard copy and a scanned electronic copy with all signatures to the Chair of the Curriculum Committee.

1. Originator: Name Mary Jane Miskovsky DNP CRNP NP-C Department Graduate Nursing Phone and email maryjane.miskovsky@wilkes.edu 408-3811 186 530

2. Proposal Title: Advanced Pathophysiology

3. Check only one type of proposal: (double click on the appropriate check box and change default value to “checked”).

☐ New Program. (Major or Minor Degree Programs). This requires prior review and approval by the Provost and APC.

☐ Elimination of Program. (Major or Minor Degree Programs). This requires prior review and approval by the Provost and APC.

☐ Program Revision. Significant revisions to a program require review and approval by the Provost. The Provost determines if review and approval by APC is necessary.

☐ General Education Revision. Submissions only accepted from the General Education Committee (GEC). Must be reviewed and approved by the Provost.

☐ Creation of new departments, elimination of existing department. This requires prior review and approval by the Provost and APC.

☐ Course additions or deletions not affecting programs (such as elective courses, transition of “topics” courses to permanent courses).

☐ Change in course credit or classroom hours.

☐ Incidental Changes. Includes changes in course/program title, course descriptions, and course prerequisites. (Although these changes do require approval by the Curriculum Committee, they do not go before the full faculty for approval).

☐ Other (Specify)
Indicate the number of course modification forms that apply to this proposal:

______ Course Addition Form (plus syllabi)
______ Course Deletion Form
______ X__ Course Change Form

4. Executive Summary of Proposal.

Briefly summarize this proposal. The breadth and depth of this executive summary should reflect the complexity and significance of the proposal. Include an overview of the proposal, background and reasoning behind the proposal and a description of how the proposal relates to the mission and strategic long-range plan of the unit and/or university. For incidental changes a one or two sentence explanation is adequate.

Course title, description, and course outcomes need to be changed to reflect the nationally recognized nursing standards for APRN’s, which include Nurse Practitioners. The following documents contain the national standards for APRN’s: the Consensus Model for APRN regulation: Licensure, accreditation, certification, and education, the Essentials of Masters Education for Advanced Nursing Practice, and the Essential of Doctoral Education for Advanced Nursing Practice.

5. Other specific information. (Not applicable for incidental changes.)

What other programs, if any, will be affected by this proposal? Describe what resources are available for this proposal. Are they adequate? What would be the effect on the curriculum of all potentially affected programs if this proposal were adopted? Include any potential effects to the curriculum of current programs, departments and courses.

This change will not affect any other program. Resources are adequate. This change is required in order to reflect the current standards that guide APRN programs.

6. Program Outline. (Not applicable for incidental changes).

A semester-by-semester program outline as it would appear in the bulletin for a new program or any modified program with all changes clearly indicated.
7. Signatures and Recommendations. (please date)
   - Signatures of involved Department chair(s) and Dean(s) indicate agreement with the proposal and that adequate resources (library, faculty, technology) are available to support proposal.
   - If a potential signatory disagrees with a proposal he/she should write “I disagree with this proposal” and a signed statement should be attached to this submission.

Mary Ann Merrigan  Assoc. Dean  Mary Ann Merrigan  9/15/14
Print Name/Title  Signature  Date
Department chair(s) of all potentially affected programs

Bernard Graham  Dean  Bruce Delano  9/15/14
Print Name/Title  Signature  Date
Dean(s) of any potentially affected College/School.

Susan Hritzak  4/16/14
Print Name  Signature  Date
Registrar

Print Name  Signature  Date
Provost (For new programs, significant revisions and revisions to the General Education Program revisions only).
   Provost should check here _____ if this proposal is a program revision AND the significance of the revision requires review and approval by APC prior to Curriculum Committee.

Print Name  Signature  Date
Chair, Academic Planning Committee. For new programs, program revisions sent via the provost. Signature indicates that the proposal has been reviewed and approved by APC.

Print Name  Signature  Date
Chair, General Education Committee. For revisions to General Education program only. (Signature indicates that the proposal has been approved by GEC).
Wilkes University Curriculum Committee  
COURSE CHANGE FORM

Directions: Use this form to change information relating to an existing course. Please note, changes to course number require separate course addition/deletion forms (not this form!). Only indicate changes that are proposed (existing and proposed), other fields should be left blank.

<table>
<thead>
<tr>
<th>Course Number:</th>
<th>N530</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Title:</td>
<td>Pathophysiology for Advanced Practice</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Existing</th>
<th>Proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Title</td>
<td>Pathophysiology for Advanced Practice</td>
</tr>
<tr>
<td>Course Credit hours. (Indicate classroom, lab or “other” hours.)</td>
<td>3</td>
</tr>
<tr>
<td>Course Prerequisites</td>
<td>Graduate Standing</td>
</tr>
<tr>
<td>Course Description (as proposed for Bulletin)</td>
<td>The course presupposes an understanding of human anatomy and physiology at an undergraduate level. At an advanced practice level the course will explore pathophysiology, assessment, and diagnosis of adults with selected episodic/chronic health problems.</td>
</tr>
</tbody>
</table>

1 Course descriptions provide an overview of the topics covered. If the course is offered on a scheduled basis, i.e. every other year, or only during a set semester, note this in the description. Course descriptions should be no more than two to three sentences in length.