

Course Proposal: Modify Course

This proposal will change the following elements of the course.

Prerequisites

1. Course prefix and number: **NUR 437**
2. Effective Term/Year: **FALL 2013**
3. CIP CODE/10 digit program code: **51.1601.00 No Change**
4. Short Course Title: **RN-BSN Health Assessment**
Modified Short Course Title:
5. What is the primary reason you are modifying this course?
Currently this course is listed as an elective for BSN transition students. It is now a required course.
6. Enter course description exactly as it now appears in the general/graduate bulletin.
Two semester hours, one hour didactic and three hours clinical practicum. Acquisition and application of nursing assessment skills for clients throughout the lifespan to provide a basis for critical thinking and nursing practice decisions.

Enter modified course description exactly as it will appear in the general/graduate bulletin?
Two semester hours, one hour didactic and three hours clinical practicum. Acquisition and application of nursing assessment skills for clients throughout the lifespan to provide a basis for critical thinking and nursing practice decisions.

7. Current Prerequisites:
Admission into Nursing Transition Program.
Modified Course Prerequisites:
RN license, NUR 434, NUR 435
8. College: **College of Science and Mathematics**
9. Department Teaching Course: **Nursing**
- 10a. Instruction Type: **Lecture No Change**
- 10b. Credit Hours: **No Change**
Current - Maximum: **2** Minimum: **2** Maximum Hours counted toward degree: **2**
Modified- Maximum: Minimum: Maximum Hours counted toward degree:
- 11a. Second Instruction Type: **ns**
- 11b. Second Credit Hours:
Current - Maximum: Minimum: Maximum Hours counted toward degree:
Modified- Maximum: Minimum: Maximum Hours counted toward degree:
12. Maximum contact hours each week fall semester:
Lecture: **1** Lab: **3** Other:
13. May this course be taken more than one time each semester: **No**
14. Grade Type: **Regular: A-F No Change**
15. Describe the place of the modified course within your current curriculum. Will it be elective or required? Part of a major or a minor? (Enter NA if no change is being made.)
It is now required for the RN-BSN Transition Program.
16. How does the modified course differ from similar courses being offered at Stephen F. Austin? (Enter NA if no change is being made.)
NA
17. Syllabus: Course Learning Goals
List course objectives; describe what students who complete the course will know or be able to do.
(Enter NA if no change is being made.)
NA
18. Syllabus: Course Outline
List the topics that the modified course will cover and indicate the approximate proposed

amount of time to be devoted to each, either by percent of course time or number of weeks. Please indicate which topics will be required in all sections of the course and which may vary.
(Enter NA if no change is being made.)
NA

19. Syllabus: Modified Textbook/Assigned Reading Materials for course.
Selected readings.

20. Any Other Information

Dept. Chair _____ Date: _____
College Curriculum Chair _____ Date: _____
College Dean _____ Date: _____
Grad Dean/Univ Curr Chair _____ Date: _____