# http://www.ric.edu/webcommunications/images/SealWithText_Small_Black.pnggraduate COMMITTEE curriculum PROPOSAL FORM

## Cover page Scroll over blue text to see further [instructions](#instructions)

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| --- | --- | --- | --- | --- | --- | --- |
| A.1. [Course or program](#Proposal) | **NURS 523 Surgical First assist** | | | | |  |
| [Replacing](#Ifapplicable) |  | | | | |  |
| A.2. [Proposal type](#type) | **Course: revision** | | | | |  |
| A.3. [Originator](#Originator) | **Kara Misto** | | [Home department](#home_dept) | | **School of Nursing, Graduate Dept.** | |
| A.4. [Rationale](#Rationale)/Context | **The purpose of this proposal is to revise the prerequisites for NURS 523. Currently MSN graduate students are allowed to register for NURS 523 if they are enrolled in, or have completed, the MSN program; or have approval of the MSN director. This allows students who have not yet completed any clinical practicum course to register for this NURS 523. The School of Nursing - Graduate Department faculty, as well as the director of the MSN program, feel it is necessary that students have successfully completed their Advanced Health Assessment Course (NURS 506), as well as their Adult/Older Adult Health/Illness I course (NURS 510) and its counterpart practicum course (NURS 530/540, prior to taking NURS 523). Completion of NURS 506, as well as NURS 510 and 530/540, will allow students to have developed the necessary skills, and knowledge required, for understanding of and development of first assistant theory and procedures.**  ***Thus, the proposed change to the course requirements would read:***  **Prerequisite: M.S.N. program enrollment and prior completion of NURS 506, NURS 510, NURS 530/540 and concurrent enrollment in NURS 610; Or permission of the MSN director.** | | | | | |
| A.5. [Student impact](#student_impact) | **Students will be required to successfully complete NURS 506, 510 and 530/540 prior to enrolling in NURS 523.** | | | | | |
| A.6. Impact on other programs | **None** | | | | | |
| A.7. [Resource impact](#Resource) | *[Faculty PT & FT](#faculty" \o "Need to hire new full-time or part-time faculty? This is where you indicate if this proposal will be affecting FLH in your department/program.)*: | **None** | | | | |
|  | [*Library*:](#library) | **None** | | | | |
|  | [*Technology*](#technology) | **None** | | | | |
|  | [*Facilities*](#facilities): | **None** | | | | |
|  | Promotion/ Marketing needs | **None** | | | | |
| A.8. [Semester effective](#Semester_effective) | **Fall 2019** | A.9. Rationale if sooner than next fall | |  | | |

B. [NEW OR REVISED COURSES](#delete_if):

|  | Old ([for revisions only](#Revisions) – list only information that is being revised) | New |
| --- | --- | --- |
| B.1. [Course prefix and number](#cours_title) |  |  |
| B.2. Cross listing number if any |  |  |
| B.3. [Course title](#title) |  |  |
| B.4. [Course description](#description) |  |  |
| B.5. [Prerequisite(s)](#prereqs) | M.S.N. program enrollment or completion and approval of M.S.N. program director | **M.S.N. program enrollment and prior completion of NURS 506, NURS 510, NURS 530/540 and concurrent enrollment in NURS 610; Or permission of the MSN director.** |
| B.6. [Offered](#Offered) |  |  |
| B.7. [Contact hours](#contacthours) |  |  |
| B.8. [Credit hours](#credits) |  |  |
| B.9. [Justify differences if any](#differences) |  | |
| B.10. [Grading system](#grading) |  |  |
| B.11. [Instructional methods](#instr_methods) |  |  |
| B.12.[Categories](#required) |  |  |
| B.13. [How will student performance be evaluated?](#performance) |  |  |
| B.14. [Redundancy with, existing courses](#competing) |  |  |
| B. 15. Other changes, if any |  | |

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| **INSTRUCTIONS FOR PREPARING THE CATALOG COPY**: The proposal must include all relevant pages from the college catalog, and must show how the catalog will be revised. (1) Go to the “Forms and Information” page on the Graduate Committee website. Scroll down until you see the Word files for the current catalog. (2) Download ALL catalog sections relevant for this proposal, including course descriptions and/or other affected programs. (3) Place ALL relevant catalog copy into a single file. Put page breaks between sections and delete any catalog pages not relevant for this proposal. (4) Using the track changes function, revise the catalog pages to demonstrate what the information should look like in next year’s catalog. (5) Check the revised catalog pages against the proposal form, especially making sure that program totals are correct if adding/deleting course credits. |

## D. Signatures

* Changes that directly impact more than one department/program MUST have the signatures of all relevant department chairs, program directors, and relevant dean (e.g. when creating/revising a program using courses from other departments/programs).
* Proposals that do not have appropriate approval signatures will not be considered.
* Type in name of person signing and their position/affiliation.
* Send electronic files of this proposal and accompanying catalog copy to [graduatecommittee@ric.edu](mailto:graduatecommittee@ric.edu) and a printed or electronic signature copy of this form to the current Chair of Graduate Committee. Check Graduate Committee website for due dates.

##### D.1. Approvals: required from programs/departments/deans who originate the proposal. may include multiple departments, e.g., for joint/interdisciplinary prposals.

| Name | Position/affiliation | [Signature](#_Signature" \o "Insert electronic signature, if available, in this column) | Date |
| --- | --- | --- | --- |
|  | Program Director of |  |  |
|  | Chair of |  |  |
|  | Dean of |  |  |

##### D.2. [Acknowledgements](#acknowledge): REQUIRED from OTHER PROGRAMS/DEPARTMENTS IMPACTED BY THE PROPOSAL. SIGNATURE DOES NOT INDICATE APPROVAL, ONLY AWARENESS THAT THE PROPOSAL IS BEING SUBMITTED. List all other programs and departments affected by this proposal. Signatures from these departments are required in the signature section. CONCERNS SHOULD BE BROUGHT TO THE GRADUATE COMMITTEE MEETING FOR DISCUSSION.

| Name | Position/affiliation | [Signature](#Signature_2) | Date |
| --- | --- | --- | --- |
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