

FLORIDA ATLANTIC UNIVERSITY™

Graduate Programs—NEW COURSE PROPOSAL¹

UGPC APPROVAL _____
 UFS APPROVAL _____
 SCNS SUBMITTAL _____
 CONFIRMED _____
 BANNER POSTED _____
 CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF
NURSING

COLLEGE: NURSING

RECOMMENDED COURSE IDENTIFICATION:

PREFIX _____ NGR _____ COURSE NUMBER 6301 LAB CODE (L or C) _____

(TO OBTAIN A COURSE NUMBER, CONTACT RSHIMAN@FAU.EDU)

COMPLETE COURSE TITLE: CARE OF CHILDREN: NURSING SITUATIONS IN ADVANCE PRACTICE

EFFECTIVE DATE
(first term course will be offered)

CREDITS:²
3 THREE

TEXTBOOK INFORMATION:

Hay, W., Levin, M., Deterding, R., & Abzug, M. (2012). Current diagnosis and treatment: Pediatrics (21st ed.) McGraw-Hill. ISBN-13:9780071779708.

Collins-Bride, G., Saxe, J. (2013). Clinical guidelines for advanced practice nursing: An interdisciplinary approach (2nd ed.). Jones and Bartlett: Burlington, MA.

GRADING (SELECT ONLY ONE GRADING OPTION): REGULAR X SATISFACTORY/UNSATISFACTORY _____

COURSE DESCRIPTION, NO MORE THAN THREE LINES: This course focuses on the care of children from infancy through adolescence using nursing situations in advanced practice including health promotion; disease prevention, health protection, assessment, diagnosis, and management of health in the primary care setting. The course emphasizes an appreciation of the wholeness and uniqueness of the individual and family in relation to psychosocial, cultural, spiritual, developmental, and political issues affecting the health and wellbeing of children.

PREREQUISITES*:

NGR 6141, NGR 6002, NGR and NGR 6200 and 6200L

COREQUISITES*: NONE

REGISTRATION CONTROLS (MAJOR, COLLEGE, LEVEL)*:

Specialty Course for Family Nurse Practitioner Track

* PREREQUISITES, COREQUISITES AND REGISTRATION CONTROLS WILL BE ENFORCED FOR ALL COURSE SECTIONS.

MINIMUM QUALIFICATIONS NEEDED TO TEACH THIS COURSE: INSTRUCTIONAL PERSONNEL TEACHING GRADUATE COURSES HOLD THE DOCTORATE OR APPROPRIATE TERMINAL DEGREE IN THE TEACHING DISCIPLINE OR A RELATED DISCIPLINE.

Faculty contact, email and complete phone number:
Beth King
Bking@fau.edu
561-297-3249

Please consult and list departments that might be affected by the new course and attach comments.³
None

Approved by:

Department Chair: Shirley Brown
 College Curriculum Chair: Beth King
 College Dean: Marlene Smith
 UGPC Chair: Nancy Kason Pugh
 Graduate College Dean: Pam Brown
 UFS President: _____
 Provost: _____

Date:

2/11/13
2/11/13
2/11/13
2/20/13
2-25-13

1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf
2. Review Provost Memorandum: **Definition of a Credit Hour** www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf
3. Consent from affected departments (attach if necessary)

NQR - 6342

Approved by: Department Chair: <u>Shepherd</u> College Curriculum Chair: <u>Beth Ky</u> College Dean: <u>Marlaue Smith</u> UGPC Chair: <u>Nancy Lynn Park</u> Graduate College Dean: <u>Doug Brown</u> UFS President: _____ Provost: _____	Date: <u>2/11/13</u> <u>2/11/13</u> <u>2/11/13</u> <u>2/20/13</u> <u>2.25.13</u> _____ _____	1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf 2. Review Provost Memorandum: Definition of a Credit Hour www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf 3. Consent from affected departments (attach if necessary)
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Email this form and syllabus to UGPC@fau.edu one week before the University Graduate Programs Committee meeting so that materials may be viewed on the UGPC website prior to the meeting.

DNP Curriculum / Plan of Study Change

Approved by:	Date:
Department Chair: <u>Shelby Brad</u>	<u>2/11/13</u>
College Curriculum Chair: <u>Beth King</u>	<u>2/11/13</u>
College Dean: <u>Margaret Smith</u>	<u>2/11/13</u>
UGPC Chair: <u>Nancy Lynn Parks</u>	<u>2/20/13</u>
Graduate College Dean: <u>Brynn Romer</u>	<u>2.25.13</u>
UFS President: _____	_____
Provost: _____	_____

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BSN-DNP Curriculum Change

Approved by: Department Chair: <u>Shelby</u> College Curriculum Chair: <u>Beth Key</u> College Dean: <u>Maxine Givens</u> UGPC Chair: <u>Wally Kasprinski</u> Graduate College Dean: <u>Ray Roman</u> UFS President: _____ Provost: _____	Date: <u>2/11/13</u> <u>2/11/13</u> <u>2/11/13</u> <u>2/20/13</u> <u>2-25-13</u> _____ _____
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FLORIDA ATLANTIC UNIVERSITY™

Graduate Programs—PROGRAM CHANGE REQUEST

UGPC APPROVAL _____
 UFS APPROVAL _____
 CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING

COLLEGE: NURSING

PROGRAM NAME:

Advanced Holistic Nursing Track in the Master of Science with Major in Nursing

EFFECTIVE DATE

(PROVIDE TERM/YEAR)

SUMMER 2013

PLEASE EXPLAIN THE REQUESTED CHANGE(S) AND OFFER RATIONALE BELOW AND/OR ATTACHED:

Reducing the clinical hours to 135 hours for NGR 6296L + NGR 6297L, ~~for~~

Rationale: To align with AHNA standards and CCNE standards

Faculty contact, email and complete phone number:

Beth King
bking@fau.edu
 561-297-3249

Consult and list departments that might be affected by the change and attach comments.

None

Approved by:

Department Chair: Shirley Green
 College Curriculum Chair: Beth King
 College Dean: Marlaeae Smith
 UGPC Chair: Mandy Kason Parks
 Graduate College Dean: Tommy Brown
 UFS President: _____
 Provost: _____

Date:

2/11/13
4/1/13
2/11/13
2/20/13
2.25.13

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Graduate Programs—PROGRAM CHANGE REQUEST

UGPC APPROVAL _____

UFS APPROVAL _____

CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING

COLLEGE: NURSING

PROGRAM NAME:

Individualized Track in the Master of Science with Major in Nursing

EFFECTIVE DATE

(PROVIDE TERM/YEAR)

FALL 2013

PLEASE EXPLAIN THE REQUESTED CHANGE(S) AND OFFER RATIONALE BELOW AND/OR ATTACHED:

Terminate the Individualized Track in the Master of Science with Major in Nursing

Rationale: Currently no one enrolled.

Faculty contact, email and complete phone number:

 Beth King
bking@fau.edu
 561-297-3249

Consult and list departments that might be affected by the change and attach comments.

None

Approved by:

 Department Chair: Shelby Good

 College Curriculum Chair: M. King

 College Dean: Marlene Powell

 UGPC Chair: Nancy Lynn Parley

 Graduate College Dean: Greg Brown

UFS President: _____

Provost: _____

Date:
2/11/13
2-11-13
2/13/13
2/20/13
2.25.13

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FLORIDA ATLANTIC UNIVERSITY™

Graduate Programs—COURSE CHANGE REQUEST¹

UGPC APPROVAL _____
 UFS APPROVAL _____
 SCNS SUBMITTAL _____
 CONFIRMED _____
 BANNER POSTED _____
 CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING	COLLEGE: NURSING
COURSE PREFIX AND NUMBER: NGR 6634	CURRENT COURSE TITLE: Advanced Nursing Situations: Care of the Childbearing/Childrearing Family
CHANGE(S) ARE TO BE EFFECTIVE (LIST TERM): 2014	<input checked="" type="checkbox"/> TERMINATE COURSE (LIST FINAL ACTIVE TERM):
CHANGE TITLE TO: CHANGE PREFIX FROM: TO: CHANGE COURSE NO. FROM: TO: CHANGE CREDITS ² FROM: TO: CHANGE GRADING FROM: TO: CHANGE DESCRIPTION TO:	CHANGE PREREQUISITES/MINIMUM GRADES TO*: CHANGE COREQUISITES TO*: CHANGE REGISTRATION CONTROLS TO: *Please list both existing and new pre/corequisites, specify AND or OR, and include minimum passing grade. Rationale: Replaced with new course to meet CCNE standards <div style="text-align: center; border: 1px solid black; padding: 10px; font-family: cursive; font-size: 2em;">Termination</div>
Attach syllabus for ANY changes to current course information.	
Should the requested change(s) cause this course to overlap any other FAU courses, please list them here. No	Please consult and list departments ³ that might be affected by the change(s) and attach comments. None

Faculty contact, email and complete phone number: Beth King
bking@fau.edu 561-297-3249

Approved by: Department Chair: <u>Shy Gude</u> College Curriculum Chair: <u>Beth King</u> College Dean: <u>Marlaivie Smith</u> UGPC Chair: <u>Marcy Kagan Parks</u> Graduate College Dean: <u>Bony Kern</u> UFS President: _____ Provost: _____	Date: <u>2/11/13</u> <u>2/11/13</u> <u>2/11/13</u> <u>2/20/13</u> <u>2.25.13</u> _____ _____	<ol style="list-style-type: none"> 1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf 2. Review Provost Memorandum: Definition of a Credit Hour www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf 3. Consent from affected departments (attach if necessary)
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Graduate Programs—COURSE CHANGE REQUEST¹

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DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING	COLLEGE: NURSING
COURSE PREFIX AND NUMBER: NGR 6167	CURRENT COURSE TITLE: Foundations of Holistic Nursing
CHANGE(S) ARE TO BE EFFECTIVE (LIST TERM): 2013	<input checked="" type="checkbox"/> SUMMER <input type="checkbox"/> WINTER <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input checked="" type="checkbox"/> TERMINATE COURSE (LIST FINAL ACTIVE TERM):
CHANGE TITLE TO: CHANGE PREFIX FROM: TO: CHANGE COURSE NO. FROM: TO: CHANGE CREDITS ² FROM: TO: CHANGE GRADING FROM: TO: CHANGE DESCRIPTION TO:	CHANGE PREREQUISITES/MINIMUM GRADES TO*: CHANGE COREQUISITES TO*: CHANGE REGISTRATION CONTROLS TO: *Please list both existing and new pre/corequisites, specify AND or OR, and include minimum passing grade. RATIONALE: TO ALIGN WITH AHNA STANDARDS CURRENT COURSE DESCRIPTION: Foundations of Holistic Nursing (NGR 6167) 6 credits Corequisites: RN students with bachelor's degree; others only with instructor's permission Foundational course in holistic nursing begins with holistic nursing, grounded in caring for self, continues with complementary therapies within the context of holistic practice, and concludes with ways to integrate these learning's into personal and professional life.
Attach syllabus for ANY changes to current course information.	
Should the requested change(s) cause this course to overlap any other FAU courses, please list them here. No	Please consult and list departments that might be affected by the change(s) and attach comments. ³ None

Faculty contact, email and complete phone number: Beth King
 bking@fau.edu 561-297-3249

Approved by: Department Chair: <u>Shirley Groll</u> College Curriculum Chair: <u>Beth King</u> College Dean: <u>Margaret Sweet</u> UGPC Chair: <u>Nancy Kason Pinter</u> Graduate College Dean: <u>Brynn Rasmussen</u> UFS President: _____ Provost: _____	Date: <u>2/11/13</u> <u>2/11/13</u> <u>2/11/13</u> <u>2/20/13</u> <u>2-25-13</u> _____ _____	<ol style="list-style-type: none"> 1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf 2. Review Provost Memorandum: Definition of a Credit Hour www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf 3. Consent from affected departments (attach if necessary)
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Graduate Programs—COURSE CHANGE REQUEST¹

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 BANNER POSTED _____
 CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING	COLLEGE: NURSING
COURSE PREFIX AND NUMBER: NGR 6634L	CURRENT COURSE TITLE: Advanced Nursing Situations in Practice: Care of the Childbearing/Childrearing Family
CHANGE(S) ARE TO BE EFFECTIVE (LIST TERM): 2014	<input checked="" type="checkbox"/> TERMINATE COURSE (LIST FINAL ACTIVE TERM):
CHANGE TITLE TO: CHANGE PREFIX FROM: TO: CHANGE COURSE NO. FROM: TO: CHANGE CREDITS ² FROM: TO: CHANGE GRADING FROM: TO: CHANGE DESCRIPTION TO:	CHANGE PREREQUISITES/MINIMUM GRADES TO*: CHANGE COREQUISITES TO*: CHANGE REGISTRATION CONTROLS TO: *Please list both existing and new pre/corequisites, specify AND or OR, and include minimum passing grade. Rationale: Replaced with new course to meet CCNE standards
Attach syllabus for ANY changes to current course information.	
Should the requested change(s) cause this course to overlap any other FAU courses, please list them here. No	Please consult and list departments that might be affected by the change(s) and attach comments. ³ None

Faculty contact, email and complete phone number: Beth King
 bking@fau.edu 561-297-3249

Approved by: Department Chair: <u>Shelbra</u> College Curriculum Chair: <u>Beth King</u> College Dean: <u>Marlaeie Jones</u> UGPC Chair: <u>Nancy Karm Pinter</u> Graduate College Dean: <u>Benny Rom</u> UFS President: _____ Provost: _____	Date: <u>2/13/11</u> <u>2/13/11</u> <u>2/13/11</u> <u>2/20/13</u> <u>2.25.13</u> _____ _____	<ol style="list-style-type: none"> 1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf 2. Review Provost Memorandum: Definition of a Credit Hour www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf 3. Consent from affected departments (attach if necessary)
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 FAUchange—Revised September 2012

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 CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING	COLLEGE: NURSING
COURSE PREFIX AND NUMBER: NGR 6298L	CURRENT COURSE TITLE: Advanced Holistic Nursing: Development of Holistic Nursing in Professional Settings
CHANGE(S) ARE TO BE EFFECTIVE (LIST TERM): 2013	<input checked="" type="checkbox"/> TERMINATE COURSE (LIST FINAL ACTIVE TERM):
CHANGE TITLE TO: CHANGE PREFIX FROM: TO: CHANGE COURSE NO. FROM: TO: CHANGE CREDITS ² FROM: TO: CHANGE GRADING FROM: TO: CHANGE DESCRIPTION TO:	CHANGE PREREQUISITES/MINIMUM GRADES TO*: CHANGE COREQUISITES TO*: CHANGE REGISTRATION CONTROLS TO: *Please list both existing and new pre/corequisites, specify AND or OR, and include minimum passing grade. Rationale: To align with AHNA Standards Course Description: Advanced Holistic Nursing: Development of Holistic Nursing in Professional Settings (NGR 6298L) 3 credits Prerequisite: NGR 6297L This course provides a culminating experience focused on developing the emerging role of the holistic nurse, and preparing the student for transition to professional practice. Emphasis is placed on synthesis in practice of holistic nursing skills, professional role development as an expert holistic nurse, and an appreciation of international perspectives that enhance caring in culturally diverse practice situations.
Attach syllabus for ANY changes to current course information.	
Should the requested change(s) cause this course to overlap any other FAU courses, please list them here. No	Please consult and list departments that might be affected by the change(s) and attach comments. ³ None

Faculty contact, email and complete phone number: Beth King
 bking@fau.edu 561-297-3249

Approved by: Department Chair: <u>Shirley Cook</u> College Curriculum Chair: <u>Beth King</u> College Dean: <u>Marla Mae Joubert</u> UGPC Chair: <u>Nancy Keen Ponder</u> Graduate College Dean: <u>Tom Rauer</u> UFS President: _____ Provost: _____	Date: <u>2/11/13</u> <u>2/13/13</u> <u>2/11/13</u> <u>2/20/13</u> <u>2.25.13</u> _____ _____	<ol style="list-style-type: none"> 1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf 2. Review Provost Memorandum: Definition of a Credit Hour www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf 3. Consent from affected departments (attach if necessary)
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 CATALOG _____

DEPARTMENT: CHRISTINE E. LYNN COLLEGE OF NURSING	COLLEGE: NURSING
COURSE PREFIX AND NUMBER: NGR 6295L	CURRENT COURSE TITLE: Advanced Nursing Situations: Experiential Survey of Holistic Modalities
CHANGE(S) ARE TO BE EFFECTIVE (LIST TERM): 2013	<input checked="" type="checkbox"/> TERMINATE COURSE (LIST FINAL ACTIVE TERM):
CHANGE TITLE TO: CHANGE PREFIX FROM: TO: CHANGE COURSE NO. FROM: TO: CHANGE CREDITS ² FROM: TO: CHANGE GRADING FROM: TO: CHANGE DESCRIPTION TO:	CHANGE PREREQUISITES/MINIMUM GRADES TO*: CHANGE COREQUISITES TO*: CHANGE REGISTRATION CONTROLS TO: *Please list both existing and new pre/corequisites, specify AND or OR, and include minimum passing grade. RATIONALE: To ALIGN WITH AHNA STANDARDS CURRENT COURSE CATALOG: Advanced Nursing Situations: Experiential Survey of Holistic Modalities (NGR 6295L) 3 credits Corequisite: NGR 6169 Course provides a broad survey of holistic modalities through which deeper understandings may be achieved of the nature of mind/body/spirit connectedness as integral to healing and health. Experiential emphasis is on holistic modalities within mind-body practices, manipulative and body-based practices, and energetic healing practices. Students are guided in their choices for integrating these healing modalities in advanced holistic nursing.
Attach syllabus for ANY changes to current course information.	
Should the requested change(s) cause this course to overlap any other FAU courses, please list them here. No	Please consult and list departments that might be affected by the change(s) and attach comments. ³ None

Faculty contact, email and complete phone number: Beth King
 bking@fau.edu 561-297-3249

Approved by: Department Chair: <u>Shylach</u> College Curriculum Chair: <u>Beth King</u> College Dean: <u>Margaret Sweet</u> UGPC Chair: <u>Nancy Kason Pugh</u> Graduate College Dean: <u>Brynn</u> UFS President: _____ Provost: _____	Date: <u>2/11/13</u> <u>2/11/13</u> <u>2/11/13</u> <u>2/20/13</u> <u>2.25.13</u> _____ _____	1. Syllabus must be attached; see guidelines for requirements: www.fau.edu/provost/files/course_syllabus.2011.pdf 2. Review Provost Memorandum: Definition of a Credit Hour www.fau.edu/provost/files/Definition_Credit_Hour_Memo_2012.pdf 3. Consent from affected departments (attach if necessary)
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