

APPLICATION FOR NEW COURSE

1. Submitted by the College of Health Sciences Date: 10/4/07

Department/Division proposing course: Clinical Sciences/Physician Assistant Studies

2. Proposed designation and Bulletin description of this course:

a. Prefix and Number PAS 678

b. Title* Health Promotion and Disease Prevention

*If title is longer than 24 characters, write a sensible title (24 characters or less) for use on transcripts:

Hlth Pro & Disease Prev

c. 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.

() CLINICAL () COLLOQUIUM () DISCUSSION () LABORATORY (2) LECTURE
() INDEPEND. STUDY () PRACTICUM () RECITATION () RESEARCH () RESIDENCY
() SEMINAR () STUDIO () OTHER – Please explain: _____

d. Please choose a grading system: Letter (A, B, C, etc.) Pass/Fail

e. Number of credit hours: 2

f. Is this course repeatable? YES NO If YES, maximum number of credit hours: _____

g. Course description:

This course is designed to focus on health promotion and disease prevention in primary care medical practice. The course reflects concerns expressed in Healthy People 2010 which call for an increased emphasis on preventive medicine and reflects the need for additional disease education for physician assistant students. The course will address topics such as immunizations, genetic counseling, complementary and alternative medicine, and health and wellness.

h. Prerequisite(s), if any:

Enrollment in the Physician Assistant Program.

i. Will this course be offered through Distance Learning? YES NO

If YES, please circle one of the methods below that reflects how the majority of the course content will be delivered:

Internet/Web-based

Interactive video

Extended campus

Kentucky Educational Television (KET/teleweb)

Other

Please describe "Other": _____

3. Teaching method: N/A or Community-Based Experience Service Learning Component Both

4. To be cross-listed as: N/A
Prefix and Number

Signature of chair of cross-listing department

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5. Requested effective date (term/year): Summer II / 2008
6. Course to be offered (please check all that apply): Fall Spring Summer
7. Will the course be offered every year? YES NO
If NO, please explain: _____
8. Why is this course needed?
The proposed course addresses topics related to best practice for physician assistants and is consistent with curriculum content recommended by the Accreditation Review Commission for the Education of Physician Assistants (ARC-PA). To date, this course content has been addressed in PAS 680: Seminar in Physician Assistant Studies. Students register for PAS 680 twice for a total of 4 credits. Two credits pertain to health promotion and disease prevention and the remaining two credits pertain to a variety of subjects pertinent to clinical practice and professional life of the PA. The proposed course provides a title and course description that better reflect the topic and purposes for the course and indicates the importance of these topics.

9. a. By whom will the course be taught? David Fahringer, MHA, PA-C
- b. Are facilities for teaching the course now available? YES NO
If NO, what plans have been made for providing them?

10. What yearly enrollment may be reasonably anticipated?
54 students
11. a. Will this course serve students primarily within the department? Yes No
- b. Will it be of interest to a significant number of students outside the department? YES NO
If YES, please explain.

12. Will the course serve as a University Studies Program course[†]? YES NO
If YES, under what Area? _____
[†]AS OF SPRING 2007, THERE IS A MORATORIUM ON APPROVAL OF NEW COURSES FOR USP.
13. Check the category most applicable to this course:
- traditional – offered in corresponding departments at universities elsewhere
 - relatively new – now being widely established
 - not yet to be found in many (or any) other universities
14. Is this course applicable to the requirements for at least one degree or certificate at UK? Yes No
15. Is this course part of a proposed new program? YES NO

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If YES, please name: _____

16. Will adding this course change the degree requirements for ANY program on campus? YES NO
 If YES[‡], list below the programs that will require this course:
 PAS 678 will be added to the list of required courses for graduation from the PAS master's program. However, the total number of hours required for graduation will not change. At present, students take PAS 680 for a total of 4 credits (2 per semester). With the addition of the proposed course, students will take PAS 680 for 2 credits and PAS 678 for 2 credits.

[‡]In order to change the program(s), a program change form(s) must also be submitted.

17. The major teaching objectives of the proposed course, syllabus and/or reference list to be used are attached.
18. Check box if course is 400G or 500. If the course is 400G- or 500-level, you must include a syllabus showing differentiation 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)
19. Within the department, who should be contacted for further information about the proposed new course?

Name: Julie Gurwell, PhD, PA-C Phone: 323-1100, 80843 Email: jagur@uky.edu

20. Signatures to report approvals:

11-7-07
 DATE of Approval by Department Faculty

Karen A. Stoff / [Signature]
 printed name Reported by Department Chair signature

12-10-07
 DATE of Approval by College Faculty

Sharon R. Stewart / [Signature]
 printed name Reported by College Dean signature

* DATE of Approval by Undergraduate Council

/
 printed name Reported by Undergraduate Council Chair signature

* DATE of Approval by Graduate Council

/
 printed name Reported by Graduate Council Chair signature

* DATE of Approval by Health Care Colleges Council (HCCC)

/
 printed name Reported by Health Care Colleges Council Chair signature

* DATE of Approval by Senate Council

/
 Reported by Office of the Senate Council

* DATE of Approval by University Senate

/
 Reported by Office of the Senate Council

*If applicable, as provided by the *University Senate Rules*. (<http://www.uky.edu/USC/New/RulesandRegulationsMain.htm>)