

**UNIVERSITY OF KENTUCKY
APPLICATION FOR NEW COURSE**

1. Submitted by College of Medicine Date February 26, 2002

Department/Division offering course School of Public Health

2. Proposed designation and Bulletin description of this course

a. Prefix and Number SPH 632 b. Title* Mixed Models in Public Health

*NOTE: If the title is longer than 24 characters (including spaces), write
A sensible title (not exceeding 24 characters) for use on transcripts Mixed Models

c. Lecture/Discussion hours per week 2 d. Laboratory hours per week 2

e. Studio hours per week 0 f. Credits 3

g. Course description
Students will learn statistical techniques for analyzing those longitudinal studies in public health that involve repeated measures and random effects. This course will cover multilevel regression models, Poisson regression models, logistic Models with random effects, crossover experiments, and nonlinear pharmacokinetic models.

h. Prerequisites (if any)
STA 580 or equivalent

i. May be repeated to a maximum of N/A (if applicable)

4. To be cross-listed as

Prefix and Number Signature, Chairman, cross-listing department

5. Effective Date Fall 2003 (semester and year)

6. Course to be offered Fall Spring Summer

7. Will the course be offered each year? Yes No
(Explain if not annually)

8. Why is this course needed?

This is one of four selective courses in the Biostatistics track of the MPH degree program. Students must complete three of the selectives. This selective concerns mixed models which are now the accepted method for analyzing responses from longitudinal studies in public health.

9. a. By whom will the course be taught? Richard Kryscio, Ziyad Mahfoud

b. Are facilities for teaching the course now available? Yes No
If not, what plans have been made for providing them?

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10. What enrollment may be reasonably anticipated? 25

11. Will this course serve students in the Department primarily? Yes No

Will it be of service to a significant number of students outside the Department?
If so, explain. Yes No

Although primarily serving SPH students, some students in Medicine, Pharmacy, Agriculture, and Statistics might enroll in this course.

Will the course serve as a University Studies Program course? Yes No

If yes, under what Area? _____

12. Check the category most applicable to this course

- traditional; offered in corresponding departments elsewhere;
- relatively new, now being widely established
- not yet to be found in many (or any) other universities

13. Is this course part of a proposed new program: Yes No
If yes, which?

14. Will adding this course change the degree requirements in one or more programs? * Yes No
If yes, explain the change(s) below

This course is needed to meet the existing requirements of the Biostatistics track of the MPH degree program.

15. Attach a list of the major teaching objectives of the proposed course and outline and/or reference list to be used.

16. If the course is a 100-200 level course, please submit evidence (e.g., correspondence) that the Community College System has been consulted.

17. Within the Department, who should be contacted for further information about the proposed course?

Name Richard J. Kryscio Phone Extension 7-4064

*NOTE: Approval of this course will constitute approval of the program change unless other program modifications are proposed.

Signatures of Approval:

[Signature]
Department Chair

11/08/01

Date

Dean of the College

[Signature]

3-12-02

Date

Date of Notice to the Faculty

1/25/02

Date

[Signature]
Curriculum Committee / Undergraduate Council

3/1/02

Date

Faculty Council / *University Studies

11/11/03

Date

[Signature]
*Graduate Council

4/28/03

Date

[Signature]
*Academic Council for the Medical Center

*Senate Council (Chair)

Date of Notice to University Senate

*If applicable, as provided by the Rules of the University Senate

ACTION OTHER THAN APPROVAL

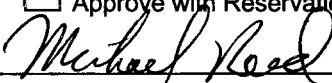
**GRADUATE COUNCIL
INVESTIGATOR REPORT**

Course/Courses/Program SPH 632

Category (check one): New Change Drop

Date for Council Review: October 2, 2003

Recommendation (circle one): Approve Approve with Reservation Disapprove

Investigator's Signature 

INSTRUCTIONS:

The following questions are included as an outline only. Be as specific and as brief as possible. If the investigation was routine, please indicate this. Attach supplements as needed. Please return the form to Lissa Holland, 355 P.O.T., 0027, at least two days before the next Council meeting.

List any modifications made in the course proposal as submitted originally and reason(s) why.

None

2. If no modifications were made, review considerations which arose during the investigation and the resolutions.

3. List contact(s) with program units and the considerations discussed therein

Spoke with Richard Kryscio about the application. He has a joint appointment between Statistics and the School of Public Health. He brought the proposed new course before the Statistics Department to see whether they wanted to cross-list the course. They chose not to cross-list. Statistics had no problem with the new course proposal.

4. Additional information as needed.