

CBM003 ADD/CHANGE FORM

<input checked="" type="checkbox"/> Undergraduate Council
<input checked="" type="checkbox"/> New Course <input type="checkbox"/> Course Change
Core Category: <u>NONE</u> Effective Fall <u>2007</u>

or

<input type="checkbox"/> Graduate/Professional Studies Council
<input type="checkbox"/> New Course <input type="checkbox"/> Course Change
Effective Fall <u> </u>

1. Department: Communication College: CLASS
2. Person Submitting Form: Jim Query, Ph.D. Telephone: 3-8608
3. Course Information on New/Revised course:
 - Instructional Area / Course Number / Long Course Title:
COMM / 3301 / Doctor-Patient Interaction
 - Instructional Area / Course Number / Short Course Title (30 characters max.)
COMM / 3301 / DOCTOR-PATIENT INTERACTION
 - SCH: 3.00 Level: JR CIP Code: 0909050001 Lect Hrs: 3 Lab Hrs: 0
4. Justification for adding/changing course: Successfully taught as a selected topics course
5. Was the proposed/revised course previously offered as a special topics course? Yes No
If Yes, please complete:
 - Instructional Area / Course Number / Long Course Title:
COMM / 4397 / Doctor-Patient Interaction
 - Content ID: 284458 Start Date (yyyy3): 20063
6. Is this course offered for undergraduate credit only? Yes No
7. Authorized Degree Program(s): B. A. Comm
 - Does this course affect major/minor requirements in the College/Department? Yes No
 - Does this course affect major/minor requirements in other Colleges/Departments? Yes No
 - Are special fees attached to this course? Yes No
 - Can the course be repeated for credit? Yes No
8. Grade Option: Letter (A, B, C ...) Instruction Type: lecture
9. If this form involves a change to an existing course, please obtain the following information from the course inventory: Instructional Area / Course Number / Long Course Title
 / /
 - Start Date (yyyy3): Content I.D.:
10. Proposed Catalog Description:
Cr: (3-0). Prerequisites: junior standing or consent of instructor. Description (30 words max.): Explores the nature of physician-patient interaction focusing on communication skills and advocacy development for both groups across the spectrum of health care delivery and examining selected theories.

RECEIVED SEP 14 2006

APPROVED FEB 21 2007

11. Dean's Signature: _____ Date: 9/11/06

Print/Type Name: Dr. Sarah Fishman-Boyd