

Undergraduate Council
 New Course Course Change
Core Category: _____ Effective Fall 2007

or

Graduate/Professional Studies Council
 New Course Course Change
Effective Fall __

1. Department: PPS College: PHAR

RECEIVED OCT 03 2006

2. Person Submitting Form: Kelly Standifer/Shara Zatopek Telephone: 3-1771/3-1262

3. Course Information on New/Revised course:

APPROVED JAN 24 2007

PHPS

- Instructional Area / Course Number / Long Course Title:
PHSC / 4301 / Medicinal Chemistry I

PHPS

- Instructional Area / Course Number / Short Course Title (30 characters max.)
PHSC / 4301 / Medicinal Chemistry I

- SCH: 3.00 Level: SR CIP Code: _____ Lect Hrs: 3 Lab Hrs: 0

4. Justification for adding/changing course: To provide for new discipline areas

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:
____ / ____ / _____

- Content ID: _____ Start Date (yyyy3): _____

6. Is this course offered for undergraduate credit only? Yes No

7. Authorized Degree Program(s): B.S. Pharmaceutical Sciences

- 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: (If there are no prerequisites, type in "none".)

Cr:3 (3-0). Prerequisites: PHSC 3101. Description (30 words max.): The chemistry of drugs used to modulate the autonomic nervous system, and for the treatment of diseases, including allergic disorders, asthma, cancer, pain and heart disease.

11. Dean's Signature: _____

Date: 9/7/06

Print/Type Name: Sunny E. Ohia, Ph.D.