CBM003 ADD/CHANGE FORM

☐ Undergraduate Council  ☐ New Course  ☐ Course Change
Core Category: ______________________ Effective Fall 2009

☐ Graduate/Professional Studies Council  ☐ New Course  ☐ Course Change
Effective Fall ______

1. Department: ET College: TECH

2. Person Submitting Form: G. Zouridakis  Telephone: 3-8656

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     ELET / 4331 / Medical Imaging
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     ELET / 4331 / MEDICAL IMAGING
   - SCH: 3.00  Level: SR  CIP Code: 11090100  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:
     ELET / 4397 / Medical Imaging
   - Content ID: 57835  Start Date (yyyy3): 20083

6. Authorized Degree Program(s): BS, Computer Engineering Technology
   - 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

7. Grade Option: Letter (A, B, C...)  Instruction Type: lecture ONLY  (Note: Lect/Lab info. must
   match item 3, above.)

8. 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.: ______

9. Proposed Catalog Description: (If there are no prerequisites, type in "none").
   Cr: 3. (3-0).  Prerequisite: Senior status in CETE or consent of the instructor.  Description (30 words
   max.): Physical principles underlying current medical imaging procedures, including: X-Ray Imaging,
   Computed Tomography, Magnetic Resonance Imaging, Positron Emission Tomography, Ultrasound
   Imaging, Electro- and Magneto-encephalography, Near Infrared Spectroscopy, and Thermal Imaging.

10. Dean's Signature: ____________________________ Date: 10/23/08

Print/Type Name: Fred Lewallen, Associate Dean

- Created on 10/13/2008 4:38:00 PM -