VC 12624 13F
APPROVED APR 2 3 2014

CBM003 ADD/CHANGE FORM

☑ Undergraduate Committee or □			☐ Graduate/Professional Studies Committee
	New Course 🛛 Course Change		☐ New Course ☐ Course Change
Cor	e Category: <u>NONE</u> Effective Fall <u>2014</u>		Effective Fall 2014
1.	Department: Health and Human Performance	College:	
2.	Faculty Contact Person: Claudia Scott Teleph	hone: <u>3-4</u>	25 Email: cwscott@uh.edu M.M.
3.	Course Information on New/Revised course: • Instructional Area / Course Number (*see CBM003 instructions) / Long Course Title: NUTR / 4347 / Medical Nutrition Therapy- Metabolic		
	 Instructional Area / Course Number / Short <u>NUTR</u> / <u>4347</u> / <u>MNT- METABOLIC</u> 	Course T	itle (30 characters max.)
	 SCH: 3.00 Level: <u>SR</u> CIP Code: <u>19.050</u> Term(s) Course is Offered (*see CBM003 i 		
4.	Justification for adding/changing course: To reflect change in prerequisite course		
5. Was the proposed/revised course previously offered as a special topics course? Yes Yes			special topics course? Yes No
	• Instructional Area / Course Number / Long	Course T	itle:
	/		
	Course ID: Effective Date (current)	tly active	row):
6.	Authorized Degree Program(s): <u>BS in Human Sciences Tracks</u>)	<u>Nutrition</u>	and Foods (ACEND Accredited & Nutritional
	• Does this course affect major/minor require	ements in	the College/Department?
	• Does this course affect major/minor require	ements in	other Colleges/Departments? Yes No
	• Can the course be repeated for credit?	Yes Yes	No (if yes, include in course description)
7.	Grade Option: <u>Letter (A, B, C)</u> Instrumatch item 3, above. *See CBM003 instruction		e: <u>lecture ONLY</u> (Note: Lect/Lab info. must
8.	If this form involves a change to an existing co	ourse, ple	ase obtain the following information from
	the course inventory: Instructional Area / Cou	ırse Numl	per / Long Course Title
	NUTR / 4347 / Medical Nutrittion Therapy- M	<u>Ietabolic</u>	
	• Course ID: <u>35396</u> Effective Date (current	tly active	row): <u>82712</u>
9.	Proposed Catalog Description: (If there are no	prerequis	sites, type in "none".)
	Cr: 3. (3-0). Prerequisites: junior standing and NUTR 3336 and NUTR 4312 Description (30 words		
	max.): Medical nutrition therapy in the manag	ement of	liver, gall bladder, respiratory, cancer, and
	infectious disease states.		}
10.	Dean's Signature:		Date: 10/19/2
	Print/Tyne Name: Sarah Fishman		/ / -