

CBM003 ADD/CHANGE FORM

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:

*PHPS* • Instructional Area / Course Number / Long Course Title:  
PHSC / 4400 / Pharmacology I

APPROVED JAN 24 2007

*PHPS* • Instructional Area / Course Number / Short Course Title (30 characters max.)  
PHSC / 4400 / PHARMACOLOGY I

• SCH: 4.00 Level: SR CIP Code: \_\_\_\_\_ Lect Hrs: 4 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: 4 (4-0). Prerequisites: PHSC 3400. Description (30 words max.): Study of the mechanism of action 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.