NEW OR MODIFIED COURSE PROPOSAL FORM

[ ]   **Undergraduate Curriculum Council**

[X]   **Graduate Council**

[X]**New Course,** [ ]**Experimental Course (1-time offering), or [ ]Modified Course**   (Check one box)

Signed paper copies of proposals submitted for consideration are no longer required. Please type approver name and enter date of approval.

ENTER DATE… **Department Curriculum Committee Chair**	ENTER DATE… **COPE Chair (if applicable)**
ENTER DATE… **Department Chair**	Jennifer Bouldin 3/3/2023 **Head of Unit (if applicable)**
ENTER DATE… **College Curriculum Committee Chair**	ENTER DATE… **Undergraduate Curriculum Council Chair**
Mary Elizabeth Spence 3/3/2023 Office of Accreditation and Assessment **(new courses only)**	ENTER DATE… **Graduate Curriculum Committee Chair**
Mickey Latour 3/3/2023 **College Dean**	__Len Frey_____ ENTER DATE 4/5/23__ **Vice Chancellor for Academic Affairs**
ENTER DATE… **General Education Committee Chair (if applicable)**	

1.   **Contact Person (Name, Email Address, Phone Number)**
Jennifer Bouldin
jbouldin@astate.edu
870-972-3079

2. Proposed starting term and Bulletin year for new course or modification to take effect
Fall 2025

Instructions:
Please complete all sections unless otherwise noted. For course modifications, sections with a "Modification requested?" prompt need not be completed if the answer is "No."

3.

	Current (Course Modifications Only)	Proposed (New or Modified) *(Indicate "N/A" if no modification)*
Prefix		**DRVM**
Number*		**7332**
Title (include a short title that's 30 characters or fewer)		**Professional Skills III**
Description*		**Students will be introduced to more complexities related to client communication, conflict management, financial literacy, veterinary team dynamics, Euthanasia conversations, and Medical Ethics. Students will demonstrate development in communication, leadership, and professional skills related to the increasing professional complexities.**

* Confirm with the Registrar's Office that number chosen has not been used before and is available for use. For variable credit courses, indicate variable range. *Proposed number for experimental course is 9*.
**Forty words or fewer (excepting prerequisites and other restrictions) as it should appear in the Bulletin.

4. Proposed prerequisites and major restrictions   [Modification requested? Yes/No]
(Indicate all prerequisites. If this course is restricted to a specific major, which major. If a student does not have the prerequisites or does not have the appropriate major, the student will not be allowed to register).

       a.   Yes   Are there any prerequisites?
           a.   If yes, which ones?
                Successful completion of the previous year
           b.   Why or why not?
               Continuation of DRVM education

       b.   **YES**   Is this course restricted to a specific major?
           a.   If yes, which major?   Doctor of Veterinary Medicine

5. Proposed course frequency   [Modification requested? Yes/No]
(e.g. Fall, Spring, Summer; if irregularly offered, please indicate, "irregular.") *Not applicable to Graduate courses.*

Enter text...

6. Proposed course type <mark>[Modification requested?</mark> Yes/No]
Will this course be lecture only, lab only, lecture and lab, activity (e.g., physical education), dissertation/thesis, capstone, independent study, internship/practicum, seminar, special topics, or studio? Please choose one.
Lab only

7. Proposed grade type <mark>[Modification requested?</mark> Yes/No]
What is the grade type (i.e. standard letter, credit/no credit, pass/fail, no grade, developmental, or other [please elaborate])
Standard letter

8. No   Is this course dual-listed (undergraduate/graduate)?

9. No   Is this course cross-listed?
(If it is, all course entries must be identical including course descriptions. <u>Submit appropriate documentation for requested changes.</u> It is important to check the course description of an existing course when adding a new cross-listed course.)

> **a.** – If yes, please list the prefix and course number of the cross-listed course.
> Enter text...
> **b.** – **Yes / No** Can the cross-listed course be used to satisfy the prerequisite or degree requirements this course satisfies?
> Enter text...

10. Yes   Is this course in support of a new program?
   a. If yes, what program?
      Doctor of Veterinary Medicine

11. No   Will this course be a one-to-one equivalent to a deleted course or previous version of this course (please check with the Registrar if unsure)?
   a. If yes, which course?
      Enter text...

Course Details

12. Proposed outline <mark>[Modification requested?</mark> Yes/No]
(The course outline should be topical by weeks and should be sufficient in detail to allow for judgment of the content of the course.)

Professional Skills Activities
Second Opinions & referrals / Presenting to a Clinician
Euthanasia & Unexpected Death
Small Group Communications
Medical Ethics
Veterinary team dynamics/ Engagement/ Delegation
OSCE 2 case simulated client interactions
Patient Safety Event

Large Animal Communication Skills
Limiting Liability
Communication Camp
Practice OSCE
Self-Assessment
Practice Acts
Financial Literacy
Interview/Negotiations
Partnering with Disabilities
Final OSCE

13. Proposed special features   ==[Modification requested?== **Yes/No]**
(e.g. labs, exhibits, site visitations, etc.)
Enter text...

14. Department staffing and classroom/lab resources
College of VM new staffing and resources

    a.   Will this require additional faculty, supplies, etc.?
       DRVM Faculty & supplies

15. No   Does this course require course fees?
    If yes: please attach the New Program Tuition and Fees form, which is available from the UCC website.

Justification

Modification Justification (==Course Modifications Only==)
16. Justification for Modification(s)
Enter text...

New Course Justification (==New Courses Only==)
17. Justification for course. Must include:
    a. Academic rationale and goals for the course (skills or level of knowledge students can be expected to attain)
       Students will be introduced to more complexities related to client communication, conflict management, financial literacy, veterinary team dynamics and engagement, Euthanasia conversations, and Medical Ethics.

    b. How does the course fit with the mission of the department? If course is mandated by an accrediting or certifying agency, include the directive.
       General education for DRVM students

    c. Student population served.
       DRVM students

d. Rationale for the level of the course (lower, upper, or graduate).
   Graduate only to fulfill requirements of DRVM program

Assessment

Assessment Plan Modifications (Course Modifications Only)

18. YES   Do the proposed modifications result in a change to the assessment plan?
If yes, please complete the Assessment section of the proposal

Relationship with Current Program-Level Assessment Process (Course modifications skip this section unless the answer to #18 is "Yes")

19. What is/are the intended program-level learning outcome/s for students enrolled in this course? Where will this course fit into an already existing program assessment process?

AVMA Standards
1. Comprehensive patient diagnosis (problem solving skills), appropriate use of clinical laboratory testing, and record management;
2. Comprehensive treatment planning including patient referral when indicated;
3. Anesthesia and pain management, patient welfare;
4. Basic surgery skills, experience, and case management;
5. Basic medicine skills, experience and case management;
6. Emergency and intensive care case management;
7. Health promotion, disease prevention/biosecurity, zoonosis, and food safety;
8. Client communications and ethical conduct; and
9. Critical analysis of new information and research findings relevant to veterinary medicine

20. Considering the indicated program-level learning outcome/s (from question #19), please fill out the following table to show how and where this course fits into the program's continuous improvement assessment process.

For further assistance, please see the 'Expanded Instructions' document available on the UCC - Forms website for guidance, or contact the Office of Assessment at 870-972-2989.

Comprehensively, the Doctor of Veterinary Medicine program will be assessed through successful completion of licensure/board examinations. Formatively, this program's assessment plan will be constructed by the school's Dean and faculty with the assistance of the Office of Assessment and Accreditation.

Program-Level Outcome 1 (from question #19)	Type outcome here. What do you want students to think, know, or do when they have completed the course?
Assessment Measure	Please include direct and indirect assessment measure for outcome.
Assessment Timetable	What semesters, and how often, is the outcome assessed?

Who is responsible for assessing and reporting on the results?	Who (person, position title, or internal committee) is responsible for assessing, evaluating, and analyzing results, and developing action plans?

(Repeat if this new course will support additional program-level outcomes)

Course-Level Outcomes

21. What are the course-level outcomes for students enrolled in this course and the associated assessment measures?

By the end of this course, students should have knowledge of, and ability to demonstrate skills listed for this course, which represent the following domains:

1.Outline and demonstrate communication skills necessary in collegial communication and case presentation scenarios.

2.Summarize methods in Evidence based Medicine studies and associate them to Clinical Outcomes

3.Compare and contrast different perspectives in Medical Ethics

4.Explain Veterinary team dynamics and engagement and demonstrate skills to support them.

5.Discuss strategies of complex Communication and adapt skills to demonstrate them.

The course outcomes described above will be measured by direct means such as written exams and rubrics (assessing papers, presentations, oral exams, etc.) Final measurement instruments will be determined by course faculty.

Bulletin Changes

Instructions
Please visit http://www.astate.edu/a/registrar/students/bulletins/index.dot and select the most recent version of the bulletin. Copy and paste all bulletin pages this proposal affects below. Please include a before (with changed areas highlighted) and after of all affected sections. ***Please note: Courses are often listed in multiple sections of the bulletin. To ensure that all affected sections have been located, please search the bulletin (ctrl+F) for the appropriate courses before submission of this form.**

Paste bulletin pages here…