ROUTE APPROVAL

APPROVAL INFORMATION

First Name: Penny
Last Name: Jakes
Email: penny.jakes@umontana.edu
Approver Name: Penny Jakes
Approval Date:
Status: APPROVE
Comment: 

☑ I am aware that my approval via e-Curr is equivalent to my signature.

SUBMIT
Summary

Course Form Action: UPDATE  
Catalog Year: 2016-2017  
Prefix: AHXR  
Course #: 240  
Course Title: Radiological Methods II  
Course Dept.*: MC: Health Professions  
Default subcommittee review: Forestry & Biomedical Science (ASCRC)

If the course requires review by more than one subcommittee due to interdisciplinary content please select:

Course Changes*

Please check one or more of the following and enter the corresponding changes in the course catalog details:

- Course Title
- Description
- Learning Outcomes
- Prerequisites
- Other
- Credits
- Level
- Course Number

Justification/explanation*

For new courses please provide rationale for why the course is needed, how it fits with existing curriculum and whether there are curricular adjustments (see procedure 201.30.)

This course change is part of a proposed revision in Program Scope & Sequence. Under the proposal, didactic courses would be clustered in the first year, and clinical courses in the second year. This would eliminate overlapping clinical rotations among first and second-year students, reducing crowding at clinical sites and enhancing student success.

Course Information

Current Course Catalog

Prefix: AHXR