CURRICULUM COMMITTEE CHECKLIST

NAME OF PROGRAM: NURS 2510 Competency Revisions  Date: 4/24/26

Step 1  Reviewed change at division meeting.  YES NO

Step 2  Presented as informational item at Division Chair Meeting(s) and checked if it affects other departments. Like programs must meet with Division Chairs on all affected campuses (North Mankato and Faribault).

Division Chair’s signature

Step 3  Instructional Dean reviewed and indicated need for Curriculum Committee approval.  YES NO

Instructional Dean’s signature

Step 4  Advisory Committee approval indicated in meeting minutes if necessary. Minutes provided to Curriculum Committee.

Step 5  Curriculum Committee made recommendations (changes, additional approvals, etc.). If no, skip to Step 7.

Step 6  Committee’s recommendations completed. (Skip if not applicable.)

Step 7  Curriculum Committee approved.

Curriculum Committee Chair’s signature

Step 8  Minutes and necessary materials provided to VP of Academic Affairs.

Step 9  Vice President of Academic Affairs approved.

Vice President of Academic Affairs’ signature

Step 10 New  Course Maximum Enrollment to Shared Governance.

Step 11 President’s approval for all changes requiring MnSCU approval.

President’s signature

5/3/13
# New Course or Course Change Proposal Form

**Date of Proposal:** 4/23/13  
**Author:** Cathy Sandmann

**Proposition Type:**  (*) New Course  [Modify Course]  [Delete Course]  
**Contact for the Course:** Cathy Sandmann

**Course Designator, Number and Title** (i.e.: ACCT 1800, Business Law):  
**NURS 2510**

**Number of Credits:** 2

**Prerequisites:** NURS 2410, NURS 2450, Biol 270, Comm 130  *Only NURS 2410 enforced in registration, other courses enforced manually by nursing department.*

**Course Description:** This course provides the student with the opportunity to synthesize learning from previous semesters into the holistic care of patients with complex needs experiencing crisis or end of life. The impact of an individual's illness on families and communities will be addressed. Nursing roles in addition to direct caregiver will be explored including advocacy, educator, manager.

**Grading Method:**  
<table>
<thead>
<tr>
<th>Grade</th>
<th>Pass/Fail</th>
</tr>
</thead>
</table>

**Scheduling:**  
<table>
<thead>
<tr>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
<th>Alternate Years</th>
<th>Variable</th>
<th>On Demand</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lecture-online</td>
<td>Lab</td>
<td>Lecture/Lab</td>
<td>Internship</td>
<td>Seminar</td>
</tr>
</tbody>
</table>

(*) **Class Maximum:** (For New Courses Only) / All Unlimited faculty members of a program or discipline must sign.

**Faculty Name**  
Cathy Sandmann  
**Faculty Signature**  
![Signature]

**Class Max**  
40  
**Date**  
4/24/13

**Dean's Name**  
MC Sanders  
**Dean's Signature**  
![Signature]

**Date**  
4/24/13

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*If there is not enough space provided, please use the back of this form for additional signatures or click on a row with the right button of the mouse, select insert and then select insert rows below to add rows to the table.*

Is this Course Proposed as a Liberal Arts Course:  
**Yes**  
**No**

If Yes, Which MnTC Area/Areas Will it Fulfill (http://www.mntransfer.org)?

Is This Course a Requirement/Elective for a Specific Program or Programs?  
**Yes**  
**No**

If Yes, Which Program(s)? Requirement in ASN program

Describe What is Changing/Being Added, and the Rationale: Course competencies rewritten to provide clarity, leveling of the course and align with student learning outcomes. Work was done for accreditation preparation.

What Impact Will This New Course or Change Have on Other Programs or Areas? **NONE**

> Attach Common Course Outline to this Form.