Course Revision

1. Course Title: Maternal-Newborn Nursing I
   Prefix & Num: NURS 1200

2. Pre-requisite(s): NURS 1100, NURS 1120
   NURS 1220, 1250, 1260, 1300
   Co-requisite(s):
   Instructor permission required: No
   Credits: 2.00
   Class Hours/Week: *LEC: 1.30  *LBC w/cr: 0.17  *LNC w/no cr: 0.00
   Clinical: 1.07  Practicum: 0.00  Independent Study: 0.00

3. Semester to be Implemented: Spring, 2010
   Day: ☒  Extended Day: ☐  Grade type: Regular

4. Cost Code: HEA103  Lab Fee: Additional Fees: $0.00  Potential WLF: 0.00

5. Is this course designed for a specific group? Yes
   Who? Students enrolled in the PN program

6. Catalog Description: ☐ Now in Print, or ☒ Proposed Below:
   Focus on meeting basic human needs of the family and newborn throughout the childbearing cycle. Increased development of nursing skills is based on an understanding of principles and facts relative to nursing care during and immediately after childbirth. Focus on the normal pregnancy, labor/delivery, newborn, and postpartum clients. Prerequisites: NURS 1100, 1120. Corequisites: NURS 1220, 1250, 1260, 1300. 1.3 lecture hours per week, total 2.5 lab hours, total 16 clinical hours.

7. Course justification (attach sheets if needed):
   Course description being revised to reflect deletion of NURS 1201, 1205.

8. Are library resources adequate to support this change? Yes
   If not, how are those resources to be acquired?

9. Are technical and other resources available? Yes
   If not, how are those resources to be acquired?

10. Relationship to the curriculum: Would the course fill a G.E. requirement? No
    If yes, which G.E. area? If it does not fill a G.E. requirement, would the course offer elective credit? Yes

11. Transferability of the course: List comparable courses at other colleges and universities:

<table>
<thead>
<tr>
<th>G.E.</th>
<th>Elective</th>
<th>Course Title</th>
<th>Credits</th>
<th>Prefix &amp; Num.</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>☞</td>
<td>☞</td>
<td></td>
<td></td>
<td>DSC</td>
<td></td>
</tr>
<tr>
<td>☞</td>
<td>☞</td>
<td></td>
<td></td>
<td>DSC</td>
<td></td>
</tr>
<tr>
<td>☞</td>
<td>☞</td>
<td></td>
<td></td>
<td>DSC</td>
<td></td>
</tr>
</tbody>
</table>

Approval Signatures:

Department Chair: [Signature]  Date: 10/22/09

Associate Dean/Dean: [Signature]  Date: 10/22/09

Curriculum Chair: _____________________________  Date: __________

Academic VP: _____________________________  Date: __________