

PURDUE UNIVERSITY  
REQUEST FOR ADDITION, EXPIRATION,  
OR REVISION OF A COURSE

DEPARTMENT Biomedical Engineering

EFFECTIVE SESSION 1&2/04, EFD26-03

INSTRUCTIONS: Please check the items below which describe the purpose of this request.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> 1. New course with supporting documents | <input type="checkbox"/> 7. Change in course attributes   |
| <input type="checkbox"/> 2. Add existing course offered at another campus   | <input type="checkbox"/> 8. Change in instructional hours |
| <input type="checkbox"/> 3. Expiration of a course                          | <input type="checkbox"/> 9. Change in course description  |
| <input type="checkbox"/> 4. Change in course number                         | <input type="checkbox"/> 10. Change in course requisites  |
| <input type="checkbox"/> 5. Change in course title                          | <input type="checkbox"/> 11. Change in semesters offered  |
| <input type="checkbox"/> 6. Change in course credit/type                    |   |

<b>PROPOSED:</b> Subject Abbreviation <u>BME</u> Course Number <u>405</u> Long Title <u>BME Design Project</u> Short Title _____ Abbreviated title will be entered by the Office of the Registrar if omitted. (22 CHARACTERS ONLY)	<b>EXISTING:</b> Subject Abbreviation _____ Course Number _____	<b>TERMS OFFERED</b> Check All That Apply: Summer <input type="checkbox"/> Fall <input checked="" type="checkbox"/> Spring <input checked="" type="checkbox"/>
		<b>CAMPUS(ES) INVOLVED</b> Calumet <input type="checkbox"/> Fort Wayne <input type="checkbox"/> Indianapolis <input type="checkbox"/> N. Central <input type="checkbox"/> W.Lafayette <input checked="" type="checkbox"/> Cont Ed <input type="checkbox"/> Tech Statewide <input type="checkbox"/>

<b>CREDIT TYPE</b> 1. Fixed Credit: Cr. Hrs. <u>4</u> 2. Variable Credit Range: Minimum Cr. Hrs _____ Or _____ (Check One) To _____ Maximum Cr. Hrs _____ 3. Equivalent Credit: Yes <input type="checkbox"/> No <input type="checkbox"/> 4. Thesis Credit: Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>COURSE ATTRIBUTES: Check All That Apply.</b> 1. Pass/Not Pass Only <input type="checkbox"/> 2. Satisfactory/Unsatisfactory Only <input type="checkbox"/> 3. Repeatable <input type="checkbox"/> Maximum repeatable credit: _____ 4. Credit by Examination <input type="checkbox"/> 5. Designator Required <input type="checkbox"/> 6. Special Fees <input type="checkbox"/>	7. Registration Approval Type Department <input checked="" type="checkbox"/> Instructor <input type="checkbox"/> 8. Variable Title <input type="checkbox"/> 9. Remedial <input type="checkbox"/> 10. Honors <input type="checkbox"/> 11. Full Time Privilege <input type="checkbox"/> 12. Off Campus Experience <input type="checkbox"/>
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Instructional Type	Minutes Per Mtg	Meetings Per Week	Weeks Offered	% of Credit Allocated	Delivery Method (Asyn. Or Syn.)	Delivery Medium (Audio, Internet, Live, Text-Based, Video)
Lecture	50	1	16			Live
Recitation						
Presentation						Live
Laboratory	240	2	16			Live
Lab Prep						
Studio						
Distance						
Clinic						
Experiential						
Research						
Ind. Study						
Pract/Observ						

COURSE DESCRIPTION (INCLUDE REQUISITES):

Sem. 1 and 2. Class 1. Lab. 9, Cr. 4., Prerequisite: BME 390 and senior standing

Design and management of biomedical engineering projects. Teams design and implement a solution to a biomedical engineering problem utilizing skills gained in previous course work. Oral and written presentation of design and demonstration of function, are required.

Calumet Undergrad Curriculum Committee	Date	Calumet Department Head	Date	Calumet School Dean	Date
Fort Wayne Department Head	Date	Fort Wayne School Dean	Date	Fort Wayne Chancellor	Date
Indianapolis Department Head	Date	Indianapolis School Dean	Date	<i>Robert Montgomery</i> 2/10/04	Date
North Central Department Head	Date	North Central Chancellor	Date	Date Approved by Graduate Council	
<i>Steph W. ...</i> 2/6/04	Date	<i>Walt H. ...</i> 2/9/04	Date	Graduate Council Secretary	Date
West Lafayette Department Head	Date	West Lafayette School Dean	Date	<i>Deb Shurt</i> 2/13/04	Date
Graduate Area Committee Convener	Date	Graduate Dean	Date	West Lafayette Registrar	Date

Handwritten notes or signature at the bottom left.

RECEIVED

FEB 23 2004

ADMINISTRATION