PURDUE UNIVERSITY
REQUEST FOR ADDITION, EXPIRATION,
OR REVISION OF AN UNDERGRADUATE COURSE
(10000-40000 LEVEL)

DEPARTMENT: Biomedical Engineering
EFFECTIVE SESSION: Summer 2011

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

- New course with supporting documents
- Add existing course offered at another campus
- Expiration of a course
- Change in course number
- Change in course title
- Change in course credit type
- Change in course attributes (department head signature only)
- Change in instructional hours
- Change in course description
- Change in course requisites
- Change in semesters offered (department head signature only)
- Transfer from one department to another

PROPOSED:

Subject Abbreviation: BME
Course Number: 38199
Long Title: Professional Practice Co-Op I
Short Title: Professional Practice Co-Op I

EXISTING:

Subject Abbreviation
Course Number

TERMS OFFERED:
Check All That Apply:
- Summer
- Fall
- Spring

CAMPUS (ES) INVOLVED
- Calumet
- Cont Ed
- Ft. Wayne
- Tech Statewide
- Indianapolis
- N. Central
- W. Lafayette

Abbreviated title will be entered by the Office of the Registrar if omitted. (50 CHARACTERS ONLY)

CREDIT TYPE

1. Fixed Credit: Cr. Hrs. 0
2. Variable Credit Range: Minimum Cr. Hrs. (Check One) To Maximum Cr. Hrs.
3. Equivalent Credit: Yes No

COURSE ATTRIBUTES: Check All That Apply

- Pass/Not Pass Only
- Satisfactory/Unsatisfactory Only
- Repeatable
- Maximum Repeatable Credit:
- Credit by Examination
- Special Fees
- Registration Approval Type
- Department
- Instructor

Schedule Type

- Lecture
- Recitation
- Laboratory
- Lab Prep
- Studio
- Distance
- Clinic
- Experiential
- Research
- Ind. Study
- Pract/Observ

Meeting Per Week

- Minutes
- Per Mg
- % of Credit Allocated
- Weeks Offered

COURSE DESCRIPTION (INCLUDE REQUIREMENTS/RESTRICTIONS): Restriction: Professional Practice students only.
Prerequisites: Junior standing or consent of instructor.
To obtain professional practice with qualified employers within industry, government, or small business.

* COURSE LEARNING OUTCOMES:

Calumet Department Head Date
Calumet School Dean Date
Fort Wayne Department Head Date
Fort Wayne School Dean Date
Indianapolis Department Head Date
Indianapolis School Dean Date
North Central Department Head Date
North Central Chancellor: Date
West Lafayette Department Head Date
West Lafayette College School Dean Date
West Lafayette Registrar: Date

OFFICE OF THE REGISTRAR
PURDUE UNIVERSITY
REQUEST FOR ADDITION, EXPIRATION, OR REVISION OF AN UNDERGRADUATE COURSE
(10000-40000 LEVEL)

DEPARTMENT Biomedical Engineering
EFFECTIVE SESSION Summer 2010

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

1. New course with supporting documents
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9. Change in course description
10. Change in course requisites
11. Change in semesters offered (department head signature only)
12. Transfer from one department to another

PROPOSED:
Subject Abbreviation: BME
Course Number: 38299
Long Title: Professional Practice Session Co-Op II
Short Title: Prof. Pract. Co-Op II

EXISTING:
Subject Abbreviation
Course Number

TERMS OFFERED
Check All That Apply:

- [x] Summer
- [ ] Fall
- [x] Spring

CAMPUS(ES) INVOLVED
- Calumet
- Cont Ed
- Ft. Wayne
- Indianapolis
- N. Central
- Tech Statewide
- X W. Lafayette

Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

CREDIT TYPE
1. Fixed Credit: Cr. Hrs.
2. Variable Credit Range:
   Minimum Cr. Hrs. (Check One)
   - [ ] To
   - [x] Or
   Maximum Cr. Hrs.
3. Equivalent Credit: Yes [ ] No [x]

COURSE ATTRIBUTES: Check All That Apply
6. Registration Approval Type
   - [x] Department
   - [ ] Instructor
7. Variable Title
8. Honors
9. Full Time Privilege
10. Off Campus Experience

Schedule Type
- Lecture
- Recitation
- Presentation
- Laboratory
- Lab Prep
- Studio
- Distance
- Clinic
- Experiential
- Research
- Ind. Study
- Pract/Observe

Minutes Per Mtg
Meetings Per Week
Weeks Offered
% of Credit Allocated

COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):
Restriction: Professional Practice students only.
Prerequisites: BME 38199
To obtain professional practice with qualified employers within industry, government, or small business.

*COURSE LEARNING OUTCOMES:

Calumet Department Head Date
Calumet School Dean Date

Fort Wayne Department Head Date
Fort Wayne School Dean Date

Indianapolis Department Head Date
Indianapolis School Dean Date

W. Lafayette Department Head Date
West Lafayette College/School Dean Date
West Lafayette Registrar Date

OFFICE OF THE REGISTRAR
**PURDUE UNIVERSITY**

REQUEST FOR ADDITION, EXPIRATION, OR REVISION OF AN UNDERGRADUATE COURSE
(10000-40000 LEVEL)

**DEPARTMENT** Biomedical Engineering

**EFFECTIVE SESSION** Summer 2010

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

1. New course with supporting documents
2. Add existing course offered at another campus
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8. Change in instructional hours
9. Change in course description
10. Change in course requisites
11. Change in semesters offered (department head signature only)
12. Transfer from one department to another

**PROPOSED:**

Subject Abbreviation: BME

Course Number: 38399

Long Title: Professional Practice Co-Op III

Short Title: Prof. Pract. Co-Op III

**EXISTING:**

Subject Abbreviation

Course Number

Long Title

Short Title

**TERMS OFFERED:**

Check All That Apply:

- Summer
- Fall
- Spring

**CAMPUS (ES) INVOLVED:**

- Calumet
- N. Central
- Cont Ed
- Tech Statewide
- Ft. Wayne
- Indianapolis
- W. Lafayette

**CREDIT TYPE**

1. Fixed Credit: Cr. Hrs. 0

2. Variable Credit Range:
   - Minimum Cr. Hrs. (Check One)
   - Maximum Cr. Hrs.
   - Equivalent Credit: Yes [X] No

3. Schedule Type
   - Lecture
   - Recitation
   - Lab
   - Lab Prep
   - Studio
   - Distance
   - Clinic
   - Experiential
   - Research
   - Ind. Study
   - Pract/Observ

4. Minutes Per Mfg

5. Meetings Per Week

6. Weeks Offered

7. % of Credit Allocated

**COURSE ATTRIBUTES:**

- Pass/Not Pass Only
- Satisfactory/Unsatisfactory Only
- Repeatable
- Maximum Repeatable Credit:
- Credit by Examination
- Registration Approval Type

- Department
- Instructor

- Variable Title
- Honors
- Full Time Privilege

- Off Campus Experience

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

Restriction: Professional Practice students only.

Prerequisites: BME 38299

To obtain professional practice with qualified employers within industry, government, or small business.

**COURSE LEARNING OUTCOMES:**

**Cross-Listed Courses**

**Calumet Department Head**

**Date**

**Calumet School Dean**

**Date**

**Fort Wayne Department Head**

**Date**

**Fort Wayne School Dean**

**Date**

**Indianapolis Department Head**

**Date**

**Indianapolis School Dean**

**Date**

**North Central Department Head**

**Date**

**North Central Chancellor**

**Date**

**West Lafayette Department Head**

**Date**

**West Lafayette College/School Dean**

**Date**

**West Lafayette Registrar**

**Date**
# PURDUE UNIVERSITY
REQUEST FOR ADDITION, EXPIRATION, OR REVISION OF AN UNDERGRADUATE COURSE
(10000-40000 LEVEL)

**ARTMENT: Biomedical Engineering**

**EFFECTIVE SESSION: Summer 2011**

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

<table>
<thead>
<tr>
<th>Purpose of Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. New course with supporting documents</td>
</tr>
<tr>
<td>2. Add existing course offered at another campus</td>
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<tr>
<td>3. Expiration of a course</td>
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<td>4. Change in course number</td>
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<tr>
<td>5. Change in course title</td>
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<tr>
<td>6. Change in course credit/typology</td>
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<tr>
<td>7. Change in course attributes (department head signature only)</td>
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<tr>
<td>8. Change in instructional hours</td>
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<tr>
<td>9. Change in course description</td>
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<tr>
<td>10. Change in course requisites</td>
</tr>
<tr>
<td>11. Change in semesters offered (department head signature only)</td>
</tr>
<tr>
<td>12. Transfer from one department to another</td>
</tr>
</tbody>
</table>

### PROPOSED:

- **Subject Abbreviation:** BME
- **Course Number:** 38199
- **Long Title:** Professional Practice's session Co-Op I
- **Short Title:** Prof. Pract. Co-Op I

### EXISTING:

- **Subject Abbreviation:**
- **Course Number:**

### TERMS OFFERED

- Check All That Apply:
  - [X] Summer
  - [X] Fall
  - [X] Spring

### CAMPUS(ES) INVOLVED

- [ ] Calumet
- [ ] Cont Ed
- [ ] N. Central
- [ ] Tech Statewide
- [ ] Ft. Wayne
- [X] W. Lafayette
- [X] Indianapolis

### CREDIT TYPE

| Credit Type                      | 1. Fixed Credit: Cr. Hrs. | 2. Variable Credit: Range
<table>
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<tr>
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<tr>
<td></td>
<td>0</td>
<td>Minimum Cr. Hrs. (Check One) To [ ] Or [ ]</td>
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<tr>
<td></td>
<td></td>
<td>Maximum Cr. Hrs.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Equivalent Credit: Yes [X] No [ ]</td>
</tr>
</tbody>
</table>

### COURSE ATTRIBUTES

- [X] Pass/Not Pass Only
- [X] Satisfactory/Unsatisfactory Only
- [ ] Repeatable
- [ ] Maximum Repeatable Credit:
- [ ] Credit by Examination
- [X] Special Fees

### Schedule/Type

- [ ] Lecture
- [ ] Laboratory
- [ ] Studio
- [ ] Distance
- [ ] Clinic
- [ ] Experiential
- [ ] Research
- [ ] Ind. Study
- [X] Pract/Observe

### Meetings Per Week

- 480

### Weeks Offered

- 5

### % of Credit Allocated

- 100

### Cross-Listed Courses

- [ ]

### COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

*Restriction:* Professional Practice students only.

Prerequisites: Junior standing or consent of instructor.

To obtain professional practice with qualified employers within industry, government, or small business.

### COURSE LEARNING OUTCOMES:

- [ ]

### Signatures

- **Calumet Department Head:** [Signature] 3/14/10
- **Calumet School Dean:** [Signature] 3/14/10
- **Fort Wayne Department Head:** [Signature] 3/14/10
- **Fort Wayne School Dean:** [Signature] 3/14/10
- **Indianapolis Department Head:** [Signature] 3/14/10
- **Indianapolis School Dean:** [Signature] 3/14/10
- **North Central Department Head:** [Signature] 3/14/10
- **North Central Chancellor:** [Signature] 3/14/10
- **West Lafayette Department Head:** [Signature] 3/14/10
- **West Lafayette College School Dean:** [Signature] 3/14/10
- **West Lafayette Registrar:** [Signature] 3/14/10

### OFFICE OF THE REGISTRAR
**PURDUE UNIVERSITY**
REQUEST FOR ADDITION, EXPIRATION, OR REVISION OF AN UNDERGRADUATE COURSE
(10000-40000 LEVEL)

**ARTMENT** Biomedical Engineering

**EFFECTIVE SESSION** Summer 2040

1. New course with supporting documents
2. Add existing course offered at another campus
3. Expiration of a course
4. Change in course number
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11. Change in semesters offered (department head signature only)
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### PROPOSED:
- **Subject Abbreviation:** BME
- **Course Number:** 38299
- **Long Title:** Professional Practice 9-semester Co-Op II
- **Short Title:** Prof. Pract. Co-Op II

### EXISTING:

### TERMS OFFERED
- **Check All That Apply:**
  - Summer
  - Fall
  - Spring

### CAMPUS(ES) INVOLVED
- Calumet
- Cont Ed
- Ft. Wayne
- Indianapolis
- N. Central
- Tech Statewide
- W. Lafayette

### Abbreviated title will be entered by the Office of the Registrar if omitted. (30 CHARACTERS ONLY)

### CREDIT TYPE

<table>
<thead>
<tr>
<th>1. Fixed Credit: Cr. Hrs.</th>
<th>2. Variable Credit Range: Minimum Cr. Hrs.</th>
<th>(Check One) To</th>
<th>Maximum Cr. Hrs.</th>
<th>3. Equivalent Credit: Yes</th>
<th>No</th>
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<td>0</td>
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<td>Or</td>
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<td>No</td>
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### COURSE ATTRIBUTES: Check All That Apply

<table>
<thead>
<tr>
<th>1. Pass/Not Pass Only</th>
<th>2. Satisfactory/Unsatisfactory Only</th>
<th>6. Registration Approval Type</th>
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<tbody>
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<td>Department</td>
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<td>Instructor</td>
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<th>3. Repeatable</th>
<th>4. Credit by Examination</th>
<th>7. Variable Title</th>
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<td>Credit by Examination</td>
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### Schedule

<table>
<thead>
<tr>
<th>Schedule</th>
<th>Minutes Per Mtg</th>
<th>Meetings Per Week</th>
<th>Weeks Offered</th>
<th>% of Credit Allocated</th>
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<tr>
<td>Course</td>
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### COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):

Restriction: Professional Practice students only.
Prerequisites: BME 38199

To obtain professional practice with qualified employers within industry, government, or small business.

### COURSE LEARNING OUTCOMES:

<table>
<thead>
<tr>
<th>Calumet Department Head</th>
<th>Date</th>
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<tbody>
<tr>
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<tr>
<td>Calumet School Dean</td>
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<td>Fort Wayne Department Head</td>
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**OFFICE OF THE REGISTRAR**
**INSTRUCTIONS:** Please check the items below which describe the purpose of this request.

1. New course with supporting documents
2. Add existing course offered at another campus
3. Expiration of a course
4. Change in course number
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**PROPOSED:**

<table>
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<tbody>
<tr>
<td>Course Number</td>
<td>38399</td>
</tr>
<tr>
<td>Long Title</td>
<td>Professional Practice Co-Op III</td>
</tr>
</tbody>
</table>

**EXISTING:**

<table>
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<tbody>
<tr>
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<td></td>
</tr>
<tr>
<td>Long Title</td>
<td></td>
</tr>
</tbody>
</table>

**TERMS OFFERED**

- Summer
- Fall
- Spring

**CAMPUS(ES) INVOLVED**

- Calumet
- Cont Ed
- Ft. Wayne
- Indianapolis
- W. Lafayette

**CREDIT TYPE**

- Fixed Credit: Cr. Hrs.: 0
- Variable Credit Range:
  - Minimum Cr. Hrs. (Check One):
    - To
    - Or
  - Maximum Cr. Hrs.:
  - Equivalent Credit: Yes ☒ No ☐

**COURSE ATTRIBUTES:** Check All That Apply

- Pass/Not Pass Only ☒
- Satisfactory/Unsatisfactory Only ☐
- Repeatable ☐
- Maximum Repeatable Credit
- Credit by Examination ☒
- Registration Approval Type
  - Department ☐
  - Instructor ☒

**Schedule/Type**

<table>
<thead>
<tr>
<th>Minutes</th>
<th>Meetings Per Week</th>
<th>% of Credit Allocated</th>
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</thead>
<tbody>
<tr>
<td>400</td>
<td>5</td>
<td>100</td>
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</tbody>
</table>

**COURSE DESCRIPTION (INCLUDE REQUISITES/RESTRICTIONS):**

- Restriction: Professional Practice students only.
- Prerequisites: BME 38299
- To obtain professional practice with qualified employers within industry, government, or small business.

**COURSE LEARNING OUTCOMES:**

**APPENDIX**

- Calumet Department Head
  - Date
- Calumet School Dean
  - Date
- Fort Wayne Department Head
  - Date
- Fort Wayne School Dean
  - Date
- Indianapolis Department Head
  - Date
- Indianapolis School Dean
  - Date
- North Central Department Head
  - Date
- North Central Chancellor
  - Date
- West Lafayette Department Head
  - Date
- West Lafayette College/School Dean
  - Date
- West Lafayette Registrar
  - Date

**OFFICE OF THE REGISTRAR**
TO: Faculty of the College of Engineering
FROM: Faculty of the School of Biomedical Engineering
DATE: November 13, 2008
RE: New Courses BME 38199, BME 38299, BME 38399

The faculty of the School of Biomedical Engineering has approved the following new courses. This action is now submitted to the Engineering Faculty with a recommendation for approval.

**BME 38199  Professional Practice 3-Session Co-op I**
Sem 1, 2, and SS. Credits: 0
Restrictions: Professional Practice students only
Prerequisites: Junior standing or consent of instructor

To obtain professional practice with qualified employers within industry, government, or small business.

**BME 38299  Professional Practice 3-Session Co-op II**
Sem 1, 2, and SS. Credits: 0
Restrictions: Professional Practice students only
Prerequisites: BME 38199

To obtain professional practice with qualified employers within industry, government, or small business.

**BME 38399  Professional Practice 3-Session Co-op III**
Sem 1, 2, and SS. Credits: 0
Restrictions: Professional Practice students only
Prerequisites: BME 38299

To obtain professional practice with qualified employers within industry, government, or small business.

**Reason:** Transferring the 3-session Professional Practice courses into each individual discipline.

George R. Wodicka, Head
School of Biomedical Engineering

*APPROVED FOR THE FACULTY OF THE SCHOOLS OF ENGINEERING BY THE ENGINEERING CURRICULUM COMMITTEE*

ECC Minutes 6
Date 11/3/09