

**The Ohio State University  
Colleges of the Arts and Sciences New Course Request**

SHS 0799

Academic Unit  
SPH/HRNG

Book 3 Listing (e.g., Portuguese)  
930.02                      Audiology Practice Management

Number	Title	G	3
Practice Mgmt.			
18-Character Title Abbreviation		Level	Credit Hours

Summer  Autumn  Winter  Spring  Year 2007

Proposed effective date, choose one quarter and put an "X" after it; and fill in the year. See the OAA curriculum manual for deadlines.

**A. Course Offerings Bulletin Information**

Follow the instructions in the OAA curriculum manual. If this is a course with decimal subdivisions, then use one New Course Request form for the generic information that will apply to all subdivisions; and use separate forms for each new decimal subdivision, including on each form the information that is unique to that subdivision. If the course offered is less than a quarter or a term, please complete the Flexibly Scheduled/Off Campus/Workshop Request form.

Description (not to exceed 25 words):

Students will gain knowledge of the many decisions and issues involved in the management of an audiology department or practice.

Quarter offered: SU                                              Distribution of class time/contact hours: 1 4hr cl

Quarter and contact/class time hours information should be omitted from Book 3 publication (yes or no):

Prerequisite(s):

Exclusion or limiting clause:

Repeatable to a maximum of \_\_\_ credit hours.

Cross-listed with:

Grade Option (Please check): Letter  S/U  Progress  What course is last in the series? \_\_\_\_\_

Honors Statement: Yes  No

GEC: Yes  No

Admission Condition

Off-Campus: Yes  No

EM: Yes  No

Course: Yes  No

Embedded Honors Statement: Yes  No

Other General Course Information: Taught in English

(e.g. "Taught in English." "Credit does not count toward BSBA degree.")

**B. General Information**

Subject Code                      510202

Subsidy Level (V, G, T, B, M, D, or

P) \_\_\_\_\_ M \_\_\_\_\_

If you have questions, please email Jed Dickhaut at [dickhaut.1@osu.edu](mailto:dickhaut.1@osu.edu).

1. Provide the rationale for proposing this course:

This course is already a part of our current AuD program curriculum. The AuD program was approved in 2003, however this course has been temporarily taught as a 693/893. We now want to add this as a permanent course number. Audiology as a doctoring profession suggests that the practicing audiologist may find themselves in a position of running an independent practice or in a management role. An understanding of practice management is essential to be successful in this arena.

2. Please list Majors/Minors affected by the creation of this new course. Attach revisions of all affected programs.  
 This course is (check one):  Required on major(s)/minor(s)  A choice on major(s)/minors(s)  
 An elective within major(s)/minor(s)  A general elective:

3. Indicate the nature of the program adjustments, new funding, and/or withdrawals that make possible the implementation of this new course.  
 None is needed; this course has already been taught as a 693/893.

4. Is the approval of this request contingent upon the approval of other course requests or curricular requests?  
 Yes  No  List:

5. If this course is part of a sequence, list the number of the other course(s) in the sequence: \_\_\_\_\_

6. Expected section size: 15 Proposed number of sections per year: 1

7. Do you want prerequisites enforced electronically (see OAA manual for what can be enforced)? Yes  No

8. This course has been discussed with and has the concurrence of the following academic units needing this course or with academic units having directly related interests (List units and attach letters and/or forms):  
 Not Applicable

9. Attach a course syllabus that includes a topical outline of the course, student learning outcomes and/or course objectives, off-campus field experience, methods of evaluation, and other items as stated in the OAA curriculum manual and e-mail to [ascurofc@osu.edu](mailto:ascurofc@osu.edu).

Approval Process The signatures on the lines in ALL CAPS ( e.g. ACADEMIC UNIT) are required.

1. Academic Unit Undergraduate Studies Committee Chair Printed Name Date

*Lawrence L. Feth*

Lawrence L. Feth

12/8/06

2. Academic Unit Graduate Studies Committee Chair Printed Name Date

*Robert A. Fox*

Robert A. Fox

12/28/06

3. ACADEMIC UNIT CHAIR/DIRECTOR Printed Name Date

4. After the Academic Unit Chair/Director signs the request, forward the form to the ASC Curriculum Office, 105 Brown Hall, 190 West 17<sup>th</sup> Ave. or fax it to 688-5678. Attach the syllabus and any supporting documentation in an e-mail to [ascurofc@osu.edu](mailto:ascurofc@osu.edu). The ASC Curriculum Office will forward the request to the appropriate committee.

5. COLLEGE CURRICULUM COMMITTEE Printed Name Date

6. ARTS AND SCIENCES EXECUTIVE DEAN Printed Name Date

7. Graduate School (if appropriate) Printed Name Date

8. University Honors Center (if appropriate) Printed Name Date

9. Office of International Education (if appropriate) Printed Name Date