SOUTH DAKOTA BOARD OF REGENTS
Revised Course Request: Unique Course

This form is to be used to request a substantive change in a unique course.

Institution Division/Department Institutional Approval Signature Date

P. Tille         Kathleen Donovan         8/31/2012
Form Initiator Dean’s Approval Signature Date

Section 1. Current Course Title and Description

Prefix & No. Course Title Credits
MLS 451L Immunohematology II Lab 1

Course Description as it currently appears in the system course database:

Advanced laboratory in immunohematology including complex incompatibilities, trouble shooting, transfusion medicine, clinical correlations and advanced laboratory methods in immunohematology.

Section 2. Modification(s) Requested

1. This modification will include (check all that apply):

   X  A change in instructional method

   Current C Revised L

   Term Change will be effective Spring 2013

2. Provide a justification for all of the changes noted.
   • Changed to reflect more accurately the nature of the course content & instructional method.

Section 3. To be Completed by Academic Affairs

University Dept Code SCHEM

Course Form #7 AAC 12/2006