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|  | **SOUTH DAKOTA BOARD OF REGENTS**  ACADEMIC AFFAIRS FORMS |
| Minor Program Modification |
|  |  |

Use this form to request minor changes in existing programs (majors, minors, certificates, or specializations). The university Vice President for Academic Affairs approves minor program modifications and they are included in the Annual Minor Program Modification Summary form.

|  |  |
| --- | --- |
| **UNIVERSITY:** | DSU |
| **PROGRAM TITLE:** | Health Informatics and Information Management Minor |
| **CIP CODE:** |  |
| **UNIVERSITY DEPARTMENT:** | Health Information Management |
| **BANNER DEPARTMENT CODE:** | DHIM |
| **UNIVERSITY DIVISION:** | College of BIS |
| **BANNER DIVISION CODE:** | DBIS |

**University Approval**

*To the Board of Regents and the Executive Director: I certify that I have read this proposal, that I believe it to be accurate, and that it has been evaluated and approved as provided by university policy.*

|  |  |  |
| --- | --- | --- |
| A picture containing text  Description automatically generated |  | 10/28/2024 |
| Vice President of Academic Affairs or President of the University |  | Date |

|  |
| --- |
|  |

1. **This modification addresses a change in (*place an “X” in the appropriate box*):**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Course *deletions* that do not change the nature of the program, or distribution of courses in the program, or change of total credit hours required |  | Course *additions* that do not change the nature of the program, or distribution of courses in the program, or change of total credit hours required |
|  |  |  |  |
|  | Revised courses in the program. |  |  |

1. **Effective date of change: 5/18/2025**
2. **Program Degree Level (*place an “X” in the appropriate box*):**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Associate |  | Bachelor’s |  | Master’s |  | Doctoral |  |

1. **Category (*place an “X” in the appropriate box*):**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Certificate |  | Specialization |  | Minor |  | Major |  |

1. **Is the program associated with a current articulation agreement?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Yes |  |  | No |  |

* 1. **If yes, will the articulation agreement need to be updated with the partner institution as a result of this minor program modification? Why or why not?**

1. **Primary Aspects of the Modification (*add lines or adjust cell size as needed*):**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Existing Curriculum* | | | | *Proposed Curriculum (highlight changes)* | | | | | |
| **Pref.** | **Num.** | **Title** | **Cr.**  **Hrs.** |  | **Pref.** | | **Num.** | **Title** | **Cr. Hr.** |
| HIM | 130 | Basic Medical Terminology | 2 |  | HIM | | 130 | Basic Medical Terminology | 3 |
| HIM | 150 | Introduction to Digital Health Informatics & Information Management | 4 |  | HIM | | 150 | Introduction to Digital Health Informatics & Information Management | 3 |
| ~~HIM~~ | ~~169~~ | ~~Legal Aspects of Health Information I~~ | ~~1~~ |  |  | |  |  |  |
| ~~HIM~~ | ~~170~~ | ~~Legal Aspects of Health Information II~~ | ~~2~~ |  |  | |  |  |  |
| HIM | 225 | Digital Health Information Systems | 3 |  | HIM | | 225 | Digital Health Information Systems | 3 |
| ~~HIM~~ | ~~252~~ | ~~Health Statistics~~ | ~~3~~ |  |  | |  |  |  |
| ~~HIM~~ | ~~265~~ | ~~Health Data Quality and Outcomes~~ | ~~3~~ |  |  | |  |  |  |
|  |  |  |  |  | HIM | | 444 | Digital Health Technology | 3 |
|  |  |  |  |  | Select 2 courses from the following: 6 | | | | |
|  |  |  |  |  | HIM | | 265 | Health Data Quality and Outcomes | 3 |
|  |  |  |  |  | HIM | | 364 | Healthcare Standards and Interoperability | 3 |
|  |  |  |  |  | HIM | | 380 | Digital Health Data Analytics | 3 |
|  |  |  |  |  | HIM | | 440 | Healthcare Information Governance | 3 |
|  |  |  |  |  | HIM | | 450 | Digital Health Informatics and Information Management Research | 3 |
| Total number of hours required for major, minor, or specialization | | | 18 |  | | Total number of hours required for major, minor, or specialization | | | 18 |
| Total number of hours required for degree | | | 18 |  | | Total number of hours required for degree | | | 18 |

1. **Explanation of the Change:**

Some courses included in the minor will not be taught in the future so additional replacement courses are being added with an option added for student choice.