APPROVED

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FEB 19 2015

COLLEGE OF GRADUATE STUDIES

University of Toledo

Graduate Program Revision

Contact Person	Cheryl Gies	Phone (XXX-XXXX)	383-5826
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Present

College: Nursing

Dept/Academic Unit: Nursing

Program Code:

Program Name: Doctor of Nursing Practice

Minimum number of credit hours for completion (if changed):

List all courses which comprise the certificate or degree and identify term offered (Summer/Fall/Spring)

Identify delivery method: In Class

Proposed

College: Nursing

Dept/Academic Unit: Nursing

Program Code:

Program Name: Doctor of Nursing Practice

Minimum number of credit hours for completion (if changed):

List all courses which comprise the certificate or degree and identify term offered (Summer/Fall/Spring)

Provide rationale and summary of changes (as attachment)

This is a name change only. The name on the degree currently reads Pediatric Nurse Practitioner. The name would change to read Pediatric Primary Care Nurse Practitioner. The American Nurses Credentialing Center has change the certification name from Pediatric Nurse Practitioner to Pediatric Primary Care Nurse Practitioner to clarify that the ANCC PNP certification is primary care focused. The course content and plan of study will remain the same.

Identify delivery method: In Class

Proposed Effective Term: 2015 40 (Fall)

Program Approval

Department Curriculum Authority	Cheryl E. Gies	Date	2/16/2015
Department Chairperson	Kelly Phillips	Date	2-16-15
College Curriculum Authority or Chair	Susan Sorbaka	Date	2-16-15
College Dean	Timothy Gaspar	Date	2-19-15
Graduate Council	[signature]	Date	5-7-2015 GC 3.24.15
Dean of Graduate Studies		Date	5-7-2015
Office of the Provost		Date	

For Administrative Use Only

Effective Date	
CIP Code	
Subsidy Taxonomy	
Program Code	
Instruction Level	