### Course Revision Form

1. Will this course revision affect a current program? [ ] Yes [ ] No
   If “yes”, has a Program Revision Form been submitted concurrently? [ ] Yes [ ] No

2. Teaching Department: Physiology

3. Administering Faculty/Unit: Science

4. Campus
   (Downtown, Macdonald, Off Campus, Distance Ed, Other – specify)
   [ ] Downtown

5. Effective Term of Implementation
   (Ex. Sept. 2004 = 200409)
   Term: 200709
   [ ] Retirement

6. Responsible Instructor: Ann Wechsler & Alvin Shrier

7. Credit Weight
   (or CEU's for non-credit CE courses):
   3
   Old Credit Weight or CEU's (if applicable):

8. Course Number(s)
   Indicate course number & the number of terms spanned:
   (tick all that apply)
   Subject/course number: PHGY 209
   Course(s) Span:
   [x] 1 term
   [ ] 2 consecutive terms (D1, D2)
   [ ] 2 non-consecutive terms (N1, N2)
   [ ] 3 consecutive terms (J1, J2, J3)

9. Number Change From:

10. Consolidation of Courses:

11. Split of Multi-Term Course:

12. Course Title (Limit 30 char.) - required for all courses.
   Mammalian Physiology 1
   Old Course Title (if applicable):

13. Course Title to Appear in the Calendar (Optional)
   (Limit 59 characters):
   Note: This can ONLY be an expansion of word(s) abbreviated in the 30 character course title in Box 12.
   Mammalian Physiology 1

14. Rationale for revised course
   The rationale for revising the course description is to better reflect the content of the course.
   The prerequisites have been made more explicit.

15. New Course Description
   (as it will appear in the Calendar [maximum 50 words]):
   (N.B. Faculty of Medicine must append complete course outline)
   Physiology of body fluids, blood, body defense mechanisms, muscle, peripheral, central, and autonomic nervous systems.

16. Old Course Description
   (may be found in the Calendar or Banner)
   The course covers the physiology of body fluids, blood, body defense mechanisms, peripheral and central nervous system, muscle. Students must be prepared to attend evening (19:00-20:00) class tests.
17. Supplementary information to appear in the Calendar in addition to the course description. Such as: equivalent course(s), contact hours, enrolment limitations, language of instruction etc. Please enter the information as it should appear in the calendar notes.

18. Schedule Types(s):
(Enter all that apply – see course guidelines for a complete list.)

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<thead>
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<th>Hours per Week</th>
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Total Hours per Week:  
Total Number of Weeks:  

19. Projected Enrolment:  

20. Revised Prerequisite(s) (Courses or Tests) (in full)
Specify course number(s) or name(s) of test(s):

BIOL 112, CHEM 110, CHEM 120, PHYS 101 or PHYS 131, and PHYS 102 or PHYS 142. Pre-/co-requisites BIOL 200, CHEM 212 or equivalent.

If the student does not have a prerequisite should web registration be blocked?  
☐ Yes  ☐ No

If “Yes” complete A and B:

A. Indicate minimum grade or test score(s) the student must attain in prerequisite course(s) or test(s):

B. Can the prerequisite course(s) or test(s) be taken in the same term as this course?  
☐ Yes  ☐ No

Old prerequisite course number(s) or test score title(s) (if applicable)
as for PHGY 201and 202. Pre-/co-requisites: BIOL 200, BIOL 201 or BIOC 212.

21. Revised Corequisite(s) Course Number(s) (in full):
Specify course number(s):

If the student does not register for the corequisite in the same term should web registration be blocked?  
☐ Yes  ☐ No
Old corequisite(s) course numbers (if applicable):

22. Revised Restriction(s):

Old Restriction(s):

23. Additional Course Charges (must be approved by the Fee Policy Committee)
Description of Fee  (e.g. screening fee)  Amount

24. Requires Teaching, Physical, or Financial Resources
Not Currently Available (attach explanation)  
☐ Yes  ☐ No

25. Consultation Reports Attached  
☐ Yes  ☐ N/A
### INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE

<table>
<thead>
<tr>
<th>To be completed by the Faculty</th>
<th>To be completed by ARR</th>
<th>For Continuing Education Use</th>
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<tbody>
<tr>
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<td>Flat Rate: CdnFlat Rate:</td>
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#### 26. Approvals:

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<thead>
<tr>
<th>Routing Sequence</th>
<th>Departmental Meeting</th>
<th>Departmental Chair</th>
<th>Other Faculty</th>
<th>Curric/Academic Committee</th>
<th>Faculty</th>
<th>SCTP</th>
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<tbody>
<tr>
<td>Name</td>
<td>Ann Wechsler</td>
<td>John Orlowksi</td>
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<tr>
<td>Departmental Contact Person (name/phone/email)</td>
<td>Sonia Viselli x3689  <a href="mailto:sonia.viselli@mcgill.ca">sonia.viselli@mcgill.ca</a></td>
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