### 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:** Teresa Trippenbach

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

- **8. Course Number(s)**
  - Indicate course number & the number of terms spanned:
  - (tick all that apply)
    - Subject/course number: PHGY 210
    - Course(s) Span:
      - 1 term
      - 2 consecutive terms (D1, D2)
      - 3 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 2

- **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 2

- **14. Rationale for revised course**
  - The rationale for revising the course description is to better reflect the content of the course.
  - The rationale for revising the restriction is because PHGY 211 hasn’t existed since 1995.
  - 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 cardiovascular, respiratory, digestive, endocrine and renal systems.

- **16. Old Course Description**
  - (may be found in the Calendar or Banner)
  - Physiology of the autonomic nervous system; cardiovascular, respiratory, digestive and renal systems; exercise physiology.
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.)

<table>
<thead>
<tr>
<th>Hours per Week</th>
<th>Hours per Week</th>
<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, BIOL 201 or BIOL 202, 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 201 and 202. Pre-/co-requisites: BIOL 200, BIOL 201 or BIOL 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):
Not open to students who have taken PHGY 202

Old Restriction(s):
Not open to students who have taken PHGY 211 or PHGY 202

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

<table>
<thead>
<tr>
<th>Amount</th>
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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>Slot Course:</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>CIP Code</td>
<td></td>
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**To be completed by the Faculty**

<table>
<thead>
<tr>
<th>Thesis Component:</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>Flat Rate:</td>
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**To be completed by ARR**

<table>
<thead>
<tr>
<th>CE Admin. Unit:</th>
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<tr>
<td>CE Non-Grant Courses:</td>
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**For Continuing Education Use**

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Teresa Trippenbach</td>
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<tr>
<td>John Orlowski</td>
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</tbody>
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| Departmental Contact Person | Sonia Viselli x3689  sonia.viselli@mcgill.ca |

**Routing Sequence**

- **Departmental Meeting**
- **Departmental Chair**
- **Other Faculty**
- **Curric/Academic Committee**
- **Faculty**
- **SCTP**