

(It is the student's responsibility to maintain and update this advisement record and bring it to meetings with his/her advisor.)

Student ID No. \_\_\_\_\_ Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City, State, ZIP Code \_\_\_\_\_

**Program Requirements**

The 39 credits required for your degree are listed below. This Program of Study form reflects the curricular requirements listed on the **College of Health Related Professions • College of Nursing website (www.downstate.edu)**. Students are responsible for familiarizing themselves with the website, the **most recent** SUNY Downstate Medical Center **Student Handbook** and the individual program student manual.

**Transfer Courses**

Please refer to the **most recent Student Handbook** for specific information and guidelines regarding the award of transfer credit.

**Year One - Fall Semester Courses (10 credits)**

Term Planned	Term Completed	Grade Earned	Course #	Course Title	Credits
_____	_____	_____	*MIMS 5001	Computer Science for Medical Informatics	3
<b>OR</b>					
_____	_____	_____	**ADMN 5400	Health Care Delivery in the US <b>AND</b>	1.5
_____	_____	_____	**MIMS 5103	Health Care Professional Seminar	1.5
_____	_____	_____	MIMS 5100	Introduction to Medical Informatics	3
_____	_____	_____	MIMS 5110	Healthcare Computer Network Architecture	4

**Year One - Spring Semester Courses (9 credits)**

Term Planned	Term Completed	Grade Earned	Course #	Course Title	Credits
_____	_____	_____	* MIMS 5002	Internet Integration in Healthcare	3
<b>OR</b>					
_____	_____	_____	** MIMS 5102	Health Care Across the Lifespan	3
_____	_____	_____	MIMS 5101	Database System Applications in Biomedicine	3
_____	_____	_____	MIMS 5111	Research Methods	3

**Year One - Summer Semester Courses (5 credits)**

Term Planned	Term Completed	Grade Earned	Course #	Course Title	Credits
_____	_____	_____	MIMS 5201	Topics in Medical Informatics	2
_____	_____	_____	MIMS 5202	User Interface in Medical Informatics	3

**Year Two - Fall Semester Courses (9-15 credits)**

Term Planned	Term Completed	Grade Earned	Course #	Course Title	Credits
_____	_____	_____	MIMS 5112	Medical Decision Support Systems	3
_____	_____	_____	MIMS 5203	Information Retrieval & Digital Libraries	3
_____	_____	_____	MIMS 5204	Medical Imaging Systems	3
_____	_____	_____	MIMS 5206	Independent Study (Elective)	1-3
_____	_____	_____	***MIMS 5208	Clinical Internship in Medical Informatics I	1.5
_____	_____	_____	***MIMS 5209	Clinical Internship in Medical Informatics II	1.5

**Year Two - Spring Semester Courses (3-6 credits)**

Term Planned	Term Completed	Grade Earned	Course #	Course Title	Credits
_____	_____	_____	MIMS 5121	Master's Essay in Medical Informatics	3
_____	_____	_____	***MIMS 5208	Clinical Internship in Medical Informatics I	1.5
_____	_____	_____	***MIMS 5209	Clinical Internship in Medical Informatics II	1.5

**TOTAL CREDITS REQUIRED 39**

\*Students with **NO Computer Programming** courses.

\*\*Students with **NO Health related** courses.

\*\*\*MIMS 5208 and MIMS 5209 can be taken together or separately in the Fall or Spring semester for Year Two.

Anticipated Date of Graduation (Circle Month & Year): May August December 2020 2021 2022

I acknowledge that the courses listed above are the courses I am required to successfully complete to be awarded the degree of Master of Science from the State University of New York Health Science Center at Brooklyn. The academic policies regarding the other components of the degree are published in the **most recent** SUNY Downstate Medical Center **Student Handbook**, and should be reviewed to ensure my academic success.

Orientation:

\_\_\_\_\_  
Signature of Student Date Signatures of Faculty Advisor (Date) (Date)