

## Master of Science in Health Informatics 2020-2021 Academic Degree Plan

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Core Courses (24 credit hours)</b>	<b>Credit</b>	<b>Term &amp; Year</b>
HLTS 05101 Introduction to Health Informatics and Technology	3	
HLTM 05203 Business and Financial Skills for Health Informatics Professionals	3	
HLTI 05101 Information Systems Management	3	
HLTI 05102 Systems Analysis and Design	3	
HLTI 06102 Leadership Skills for Health Informatics Professionals	3	
HLTI 05202 Legal and Ethical Issues in Health Informatics	3	
HLTM 05202 Project Management	3	
RMET 05101 Research Methods in Healthcare	3	
	<b>Total Credits</b>	<b>24</b>

**Choose one of the 3 tracks listed below:**

<b>Healthcare Leadership (12 credit hours) Choose 3 + CAPS08106</b>	<b>Credit</b>	<b>Term &amp; Year</b>
HLTI 05201 Data Management in Healthcare	3	
<i>HLTM 06100 Informatics, Quality, and Strategy in HealthCare Organizations</i>	3	
HLTM 07101 Organizational Change and Development	3	
HLTI 05103 Consumer Health Informatics	3	
CAPS 08106 Professional Track	3	
	<b>Total Credits</b>	<b>12</b>

<b>Data Analytics (12 credit hours) Choose 3 + CAPS08106</b>	<b>Credit</b>	<b>Term &amp; Year</b>
HLTI 05201 Data Management in Healthcare	3	
<i>HLTI 06200 Programming for Health Data Analytics</i>	3	
HLTI 06201 Mining, Modeling, and Machine Learning	3	
HLTI 06202 Information Design and Visual Analytics	3	
CAPS 08106 Professional Track	3	
	<b>Total Credits</b>	<b>12</b>

\*Classes Highlighted in Yellow are New

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<b>Applied Informatics(12 credit hours) Choose 3 + CAPS08106</b>	<b>Credit</b>	<b>Term &amp; Year</b>
HLTI 05201 Data Management in Healthcare	3	
<i>HLTM 05201 Operations in Healthcare Organizations</i>	3	
HLTI 05103 Consumer Health Informatics	3	
<i>HLTS 06100 Healthcare Economics</i>	3	
HLTS 06106 Healthcare Policy	3	
<i>HLTI 05300 End User Information Systems</i>	3	
CAPS 08106 Professional Track	3	
	<b>Total Credits</b>	

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Director signature only required for approval of courses not on the standard ADP