* Transforming Data to Power Human Health™*

**Certificate of Biomedical Informatics**

**OLLU Pharmacy Informatics Certificate Plan**

**Major Chemistry BA/BS**

**Fall 2024**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ SBMI Advisor name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Pharmacy Informatics Certificate Requirements**

Each student will develop a degree plan with the written approval of their academic advisor. The student must file a signed degree plan each academic year in the Fall and Spring terms listing the required and/or elective courses as specified for their certificate program. **OLLU students with a major in Chemistry will be able to apply 9 of the required 15 credit hours to their OLLU Chemistry degree.** To view more information about how credits from SBMI are transferred and applied to your program, please view the [Academic Catalog](https://sbmi.uth.edu/current-students/).

**Using This Certificate Planner**

UTHSC-H SBMI Required Courses:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **COURSE** | **TITLE** | **TYPE** | **CREDIT HOURS** | **Pre-Requisite** | **Expected Term Completion** | **Grade Earned** |
| BMI 5300 | [Introduction to Biomedical Informatics](https://sbmi.uth.edu/current-students/catalog-of-courses-bmi/bmi-5300.htm) | Basic | 3 | N/A |  |  |
| BMI 5328 | [System Analysis and Project Management](https://sbmi.uth.edu/current-students/catalog-of-courses-bmi/bmi-5328.htm) | Basic | 3 | N/A |  |  |
| BMI 5390 | [Methods in Pharmacy Informatics](https://sbmi.uth.edu/current-students/catalog-of-courses-bmi/bmi-5390.htm) | Basic | 3 | N/A |  |  |
| BMI 5391 | [Synthesis Project in Pharmacy Informatics](https://sbmi.uth.edu/current-students/catalog-of-courses-bmi/bmi-5391.htm) | Basic | 3 | BMI 5300, 5390 |  |  |
| BMI 6340 | [Health Information Visualization & Visual Analytics](https://sbmi.uth.edu/current-students/catalog-of-courses-bmi/bmi-6340.htm) | Basic | 3 | N/A |  |  |

**Signatures**

This Certificate of Pharmacy Informatics Plan must be completed in collaboration with and signed by the academic advisor. Changes to planned coursework may be made and submitted to the faculty advisor for approval.

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

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