



Students in the College of Health Professions majoring in **Biomedical Sciences** have the ability select **one of two** certificate degree planners.

**Biomedical Informatics Certificate: Genomics**

**Public Health Informatics Certificate**

Please ensure you speak with an SBMI academic advisor to discuss which is option best fits with your ultimate academic and career goals.

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

**Biomedical Informatics Certificate Requirements**

Each student will develop a degree plan with 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 elective courses as specified for their certificate program. This plan is a set of predefined coursework, totaling 15 credit hours.

**UTRGV students with a major of Biomedical Sciences with the focus area of Genomics, will be able to apply 9 of the required 15 credits hours to their UTRGV Biomedical Sciences degree.** To view more information about how credits from SBMI are transferred and applied to your program, please view the Undergraduate Accelerated Master's (4+1) Program Course Equivalency FAQ.

**Using This Certificate Planner**

UTHSC-H SBMI Required Courses:

COURSE NUMBER	COURSE TITLE	TYPE	CREDIT HOURS	Pre-Requisite	Expected Term Completed	Grade Earned
BMI 5300	<a href="#">Introduction to Biomedical Informatics</a>	Basic	3	N/A		
BMI 5330	<a href="#">Introduction to Bioinformatics</a>	Basic	3	N/A		
BMI 5332	<a href="#">Statistical Analysis of Genomic Data</a>	Research	3	N/A		
BMI 5333	<a href="#">Systems Medicine: Principles and Practice</a>	Research	3	N/A		
BMI 5352	<a href="#">Statistical Methods in Biomedical Informatics</a>	Research	3	N/A		

**Signatures**

This Certificate of Biomedical 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: \_\_\_\_\_ Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

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

**Public Health Informatics Certificate Requirements**

Each student will develop a degree plan with 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 elective courses as specified for their certificate program. This plan is a set of predefined coursework, totaling 16 credit hours. **UTRGV students with a major of Biomedical Sciences will be able to apply 9 of the required 15 credits hours to their UTRGV Biomedical Sciences degree.** To view more information about how credits from SBMI are transferred and applied to your program, please view the Undergraduate Accelerated Master's (4+1) Program Course Equivalency FAQ.

**Using This Certificate Planner**

UTHSC-H SBMI Required Courses:

COURSE NUMBER	COURSE TITLE	TYPE	CREDIT HOURS	Pre-Requisite	Expected Term Completed	Grade Earned
BMI 5300	<a href="#">Introduction to Biomedical Informatics</a>	Basic	3	N/A		
BMI 5380	<a href="#">Principles and Foundations of Public Health Informatics</a>	Basic	3	N/A		
PHM 1690	<a href="#">Introduction to Biostatistics in Public Health</a>	N/A	4	N/A		
PHM 2612	<a href="#">Epidemiology I</a>	N/A	3	N/A		
<b>Fifth Course Selection Options: Choose 1</b>						
BMI 5313*	<a href="#">Foundations of Electronic Health Records and Clinical Information Systems</a>	Basic	3	N/A		
BMI 5381*	<a href="#">Methods in Public Health Informatics</a>	Basic	3	N/A		
BMI 5382*	<a href="#">Synthesis Project of Public Health Informatics</a>	Advanced	3	N/A		
PHM 1110*	<a href="#">Health Promotion and Behavioral Sciences in Public Health</a>	N/A	3	N/A		
PHM 2110*	<a href="#">Public Health Ecology &amp; the Human Environment</a>	N/A	3	N/A		
PHM 3715*	<a href="#">Management and Policy Concepts in PH</a>	N/A	3	N/A		

\* Students, in conjunction with their Academic Advisor, will select only one of the (\*) courses as their fifth course for enrollment.

**Signatures**

This Certificate of Public Health 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: \_\_\_\_\_ Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_