

**Department of Biomedical Engineering**  
**Medical Product Development Concentration Course Plan of Study Form**  
*(for students without a prior Masters degree)*

- This completed form is due to Maria Steele 3 weeks after the start of the term in which the student enters.
- Although the advisor's signature is not required on this form, students are required to review this form with their Graduate Academic Advisor and Research Advisor, if applicable.

Date \_\_\_\_\_ Term/Year Entered \_\_\_\_\_ Name \_\_\_\_\_

Prerequisites *	Course # and School	# Credits	Term/Year
Biology Course with Lab or Physiology Course with Lab	_____	_____	_____
Biological Science	_____	_____	_____
Physics (2 terms)	_____	_____	_____
Mathematics (through ordinary differential equations)	_____	_____	_____
Engineering (minimum of 4 courses)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

\* Students may elect to waive 1 of their prerequisites at their own risk without submitting a petition to the Graduate Education Committee (GEC). If the student receives a grade of less than a B in a course requiring the waived prerequisite, the student will be required to take the prerequisite and retake the course.

MS Requirements	Course # and School	Requires Petition	# Credits	Term/Year
Medical Product Development (2 courses)	_____	_____	_____	_____
	_____	_____	_____	_____
General (2 courses)	_____	_____	_____	_____
	_____	_____	_____	_____
Mathematics	_____	_____	_____	_____
Bioinstrumentation	_____	_____	_____	_____
Statistics	_____	_____	_____	_____
Life Science (2 courses)	_____	_____	_____	_____
	_____	_____	_____	_____
Technical Electives (2 courses)	_____	_____	_____	_____
	_____	_____	_____	_____

TOTAL (minimum 30) \_\_\_\_\_