Population Health PhD Curriculum Audit (Epidemiology Option)*

NAME: _____________________________________ DATE: ____________________

Required Core Courses:

_____ PHS 451 (1 cr before Fall 2015, 2 cr after)  _____ PHS 795 (3 cr)  _____ PHS 805 or 806 (3 cr)
_____ PHS 551 (3 cr)  _____ PHS 796 (3 cr)  _____ PHS 820 (2 cr-must take twice)
_____ PHS 552 (3 cr)  _____ PHS 797 (3 cr)  _____ PHS 699 (no more than 6 cr)
_____ PHS 794 (2 cr) (if no bio-med sci background)  _____ PHS 798 (3 cr)  _____ PHS 990 (no more than 11 cr)
 _____ Medical Ethics (Med Hist 545 (1); Med Hist 734 (1-3); Nursing 802 (1); Med Hist 728 (1-3))

PhD Minor (Must be approved by Graduate Program Coordinator)

Minor__________________ # credits (10 required): ______________

Approved Electives**

471 (Spring) Intro to Environmental Health (3 credits)
502 (Fall) Air Pollution and Human Health (3 credits)
621 (Spring*) Intro to Nutritional Epidemiology (1 credit) [*every other spring]
650 (Infreq) Secondary Analysis of Large Data Sets of Pop Health (3 credits)
650-023 (Sum) Public Health Genomics (1 credit)
713 (Sum) HIV/AIDS Epidemiology (1 credit)
740 (Spring) Health Impact Assessment of Global Envir. Change (3 credits)
750 (Spring) Cancer Epidemiology (2 credits)
780 (Fall) Public Health Principles and Practice (3 credits)
791 (Spring) Physical Activity Epidemiology (3 credits)
801 (Spring) Epidemiology of Infectious Diseases (3 credits)
904-102 (Fall) Genetic Epidemiology (3 credits)
904-103 (Sum) Analytic Methods of Genetic Epidemiology (3 credits)
904-104 (Fall) Global Health Epidemiology (2 credits)
904-105 (Fall) Cardiovascular Epidemiology (2 credits)
955 (Spring) Seminar in Physical Activity Epidemiology (1 credit)

_________________ 6-9 credits (two courses) of approved electives from the list above

Other Elective Coursework:____________________________________________________________________________

Total Credits: Completed____ In Progress _____ (48 cr for students matriculated before 9/2014 and
51 cr for those matriculated after 9/2014)

Signature of Advisor: ________________________________________________________________

(Please give copy of this completed form to the Graduate Program Office)

*This document is meant for guidance only. There is no assurance that it accurately represents the graduation requirements of the Population Health Department or the Graduate School. Please see the website or academic guide for the most recent information.

**For elective courses, not all topics offered apply. Please see “Curriculum” section of website for more information on which Topics are relevant

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