**East Carolina University**

**College of Allied Health Sciences and Information Management**

**Master of Science in Health Information Management**

**Plan of Studies**

Name:       Banner ID:       Year: 0

Address:       City:       State:       Zip Code:

Home Phone:       Cell Phone:

East Carolina University Electronic Mail Address:

**Instructional Method:** Face to Face: Distance:

**77Required Courses:**

(Please indicate the year and semester you plan to take each course)

HIMA 6060  COHE 6410  COHE 6420

COHE 6430  COHE 6440  COHE 6450

COHE 6470  COHE 6480  COHE 6550

COHE 6590  COHE 6615  COHE 6630    
COHE 6803  COMPREHENSIVE EXAM

|  |  |
| --- | --- |
| **Course** | **Semester Offered** |
| HIMA 6060 – Health Informatics | Fall, Spring |
| COHE 6410 – Electronic Health Records | Spring |
| COHE 6420 – Evaluation Methods in Health Informatics | Fall |
| COHE 6430 – Health Data Management | Fall |
| COHE 6440 – e-Health Care Information Systems | Summer |
| COHE 6450 – Decision Support in Health Care | Fall |
| COHE 6470 – Health Information Privacy and Security | Fall |
| COHE 6480 – Health Data Structures | Summer |
| COHE 6550 – Health Informatics Project | Spring |
| COHE 6590 – Health Data Analytics | Spring |
| COHE 6615 – Social and Organizational Issues in Health Informatics | Spring |
| COHE 6630 – Quality Management in Health Care | Spring |
| COHE 6803 – Internship | Fall, Spring, Summer |