

**OUACHITA TECHNICAL COLLEGE  
BUSINESS INFORMATION TECHNOLOGY  
DEGREE PLAN**

**Certificate of Proficiency  
Medical Office Administration**

Name \_\_\_\_\_ System ID \_\_\_\_\_

Advisor \_\_\_\_\_

<b>Semester</b>	<b>Grade</b>	<b>Course Number</b>	<b>Course Name</b>	<b>Prerequisite(s)</b>
_____	_____	MEDT 1123	Medical Terminology I	
_____	_____	MEDT 1133	Medical Office Administration	
_____	_____	DATA 1123	Fundamentals of Information Technology	Pass Keyboarding Entrance Exam