

Thesis Project Proposal Department of Art as Applied to Medicine

Preceptors name:

Title:

Department:

Location of lab/office:

Email:

Phone number:

1. Brief description of the topic with a working title for the thesis:

2. Please describe the need for the visualization of the subject matter. What is the novel visual contribution of the thesis?

3. What materials are currently accessible to the student for the study?
(specimens, data, radiologic image sets, clinical algorithms, etc.)

4. Will you be available to meet with the student on the schedule below? Yes / No

- Monthly/bi-monthly from July - Dec.
- Bi-weekly Jan - Feb.
- Weekly for first 3 weeks of March.

5. Did you attend the Thesis Presentations this year on April 20, 2018? Yes / No

Please submit to Cory Sandone by May 15, 2018

csandon1@jhmi.edu