Professional Master's Degree Oral Medicine





Professional Master's Degree Oral Medicine

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online

Website: www.techtitute.com/pk/dentistry/professional-master-degree/master-oral-medicine

Index



01 Introduction

Oral Medicine enables dentists to diagnose and treat pathologies of the oral cavity and adjacent tissues, thereby expanding the dentist's repertoire of practical applications and ensuring that the patient's entire oral anatomy is examined. Thanks to this TECH academic program, you will be able to expand your knowledge, balancing it with your work life through a methodology that is adapted to the student in a 100% online way and accessible through any device with an Internet connection, which is an innovative advantage over other teaching dynamics.

Introduction | 05 tech

Help your patients improve their oral health by completing this comprehensive program designed by TECH"

tech 06 | Introduction

This Professional Master's Degree in Oral Medicine is based on the student acquiring in-depth knowledge of different types of oral cavity and adjoining tissue lesions, both benign and malignant, as well as diagnostic and surgical techniques, correct treatment approaches, professional application and preventive usefulness

It is a very useful branch, since it complements the rest of the specialties, being a fundamental pillar prior to any treatment, avoiding negligence due to the lack of knowledge and making it possible to detect and treat pathologies, which may potentially save a patient's life

This academic program is characterized by its dynamic methodology that intersperses clinical cases for the student to identify and associate the subject matter explained with its corresponding image, as well as questionnaires to evaluate their knowledge and test them, bringing it as close as possible to those situations that will be presented daily in the office, to be able to focus and manage them in a coordinated, efficient and planned way, all under the guidance of working professionals who will help during the learning process to achieve a complete education in all aspects

It is based on promoting lasting and quality learning through schematically structured scientific information, always focusing on the main aspects of each pathology in order to be able to apply it in daily practice immediately after each unit

The dentist will strengthen their personal confidence and decision-making abilities when practising, with special emphasis on diagnostic and preventive aspects, differentiating, according to specific characteristics, the different types of lesions so that their learning is fluid and effective

As it is an online Professional Master's Degree, the student is not hindered by fixed schedules or the need to move to a physical location, but can access the contents at any time of the day, balancing their professional or personal life with their academic life

This **Professional Master's Degree in Oral Medicine** contains the most complete and up to date scientific program on the market. The most important features include:

- More than 75 clinical cases presented by experts in Oral Medicine
- The graphic, schematic and practical contents of the course are designed to provide all the essential information required for professional practice
- Exercises where the self-assessment process can be carried out to improve learning
- Algorithm-based interactive learning system for decision making for the orally impaired
 patient
- Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- Content that is accessible from any fixed or portable device with an Internet connection

Only with adequate education will you learn the best way to advise your patients in Oral Medicine cases"

Introduction | 07 tech

ENTALINSURANCE

D

li.

This Professional Master's Degree is the best investment you can make in the selection of a refresher program for two reasons: in addition to updating your knowledge in Oral Medicine, you will obtain a qualification from TECH Technological University"

It includes, in its teaching staff, professionals belonging to the field of Oral Medicine, who contribute their work experience to this program, as well as leading specialists from prestigious societies and universities

The multimedia content, developed with the latest educational technology, will provide the professional with situated and contextual learning, i.e., a simulated environment that will provide immersive training programmed to train in real situations

This program is designed around Problem-Based Learning, whereby the professional must try to solve the different professional practice situations that arise throughout the program. To do so, the professional will be assisted by an innovative interactive video system created by renowned and experienced experts in Oral Medicine

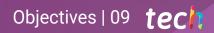
This Professional Master's Degree offers training in simulated environments which provides an immersive learning experience designed to train for real-life situations.

This 100% online Professional 'Master's Degree will allow you to balance your studies with your professional work while increasing your knowledge in this field.

rennal Details

02 **Objectives**

The Oral Medicine program is designed to facilitate the dentist's performance with patients with oral health problems and generate a sense of security that will allow them to be more effective in their daily practice.



This refresher program will provide you with a sense of confidence in your daily work, which will help you grow both personally and professionally"

tech 10 | Objectives



General Objectives

- Receive an extensive theoretical update in a comprehensive framework covering injuries, diagnosis, prevention, treatment and rehabilitation
- Encourage problem solving and critical thinking through practical cases applicable to working life, strengthening the professional's confidence when expressing themselves and their autonomy as a healthcare professional
- Support empathy and multidisciplinary treatment, emphasizing that as a professional, one must have a global vision of the patient's state of health in order to avoid possible repercussions secondary to misinformation
- Promote knowledge based on evidence and learn to see beyond dental pathology, expanding its diagnostic protocol, being able to detect serious pathologies earlier, such as oral cancer
- Integrate a technical and theoretical practice in the daily treatment knowing how to approach complex cases related to systemic diseases or adjacent pathologies of the patient, through sessions and clinical cases mediated by quality audiovisual means
- Obtain advanced medical knowledge that will enable you to excel in the healthcare field by correctly interpreting data and tests, through the understanding and application of knowledge that encompasses the patient's health holistically
- Improve public speaking and communication skills so that the receiver of the message, regardless of whether they know the subject matter, can fully understand the professional's explanation, as well as prioritize ethics and a sense of morality when dealing with a case



Specific Objectives

Module 1. Oral Medicine and Diagnostic Methods

- Gain in-depth knowledge of the origins, applications and characteristics of Oral Medicine, as well as the relevant figures in its development
- Establish an optimal relationship between science and oral medicine, applying this knowledge to daily practice
- Explore in-depth the current uses of Oral Medicine in dentistry, as well as the latest advances and techniques
- Promote updating and health research when developing new techniques and means to prevent and cure pathologies
- Learn how to take a complete and detailed clinical history, going through all its phases for both health and legal purposes
- Attain in-depth knowledge of the legal, bioethical and moral implications for dentists, as well as patient duties with respect to the dentist
- Place health care in managerial and administrative framework that allows professionals to better perform in their daily clinical practice
- Apply all the complementary diagnostic tests, as well as the tests, techniques and methods that validate them
- Have the necessary knowledge to adequately search for or produce scientific research articles

Module 2. Applied Anatomopathology and Elementary Lesions

- Specialize in anatomopathology and its branches to be able to apply this knowledge at the clinical level within a scientifically justified theoretical framework
- * Perform exhaustive anatomical reviews at the macro and microscopic level
- * Gain in-depth knowledge of the various applications of pathological anatomy

- * Assess the various methods of specimen studies and various techniques
- Learn and manage biopsy techniques, indications and contraindications, as well as various staining techniques
- Achieve a technical, theoretical and professional update that will allow you to make a difference at the professional level
- Learn to perform schematic classifications of the different types of elementary lesions and their differences

Module 3. Inflammatory and Infectious Oral Pathology

- Recognize and differentiate bacterial, viral and fungal infections, as well as their treatments, evolution and etiology
- Diagnose the different vesicular-ampullary diseases, being , able to break them down according to their etiology and epidermal location
- Gain in-depth knowledge of the sequelae, prognosis and diagnosis of various systemic diseases, as well as their clinical management and oral manifestations
- Reflect on the correlation between different syndromes and pathologies associated with oral mucosa
- Identify and distinguish the different pathologies according to their location
- Learn and handle the necessary terminology and pharmacology to elaborate adequate treatment plans for any of these pathological manifestations
- * Manage prevention, rehabilitation, treatment plans and patient monitoring

tech 12 | Objectives

Module 4. Special Patients: Relation between Systemic Diseases and Oral Pathologies

- Delve deeper into the different types of systemic diseases through a classification applied to dental skills
- Gain in-depth knowledge of the different systemic alterations, updating knowledge about them for their clinical detection
- Specialize in the various types of medical pathologies that may arise in daily practice in order to avoid sequelae or complications when practicing dentistry
- Know how to manage, prevent and act in case of anaphylactic shock, and learn its main characteristics
- Know in depth the secondary lesions, as well as the treatment to be given to the polymedicated patient and their pharmacological interactions with the means of choice when treating them (anesthesia, bleeding, etc.)
- * Learn to follow an established protocol for dealing with complex cases
- Improve professional communication and anamnesis skills in order to gather vital information for adequate practice
- Learn palliative and quality of life improvement techniques for patients undergoing oncologic treatment

Module 5. Salivary Gland and TMJ Pathology

- Gain an understanding of salivary functions, as well as the temporomandibular joint, its possible organic involvement and the syndromes associated to it
- Perform anatomical reinforcement on salivary glands and the TMJ, emphasizing the importance of adequate exploration methods
- Distinguish the different glandular and TMJ malformations, as well as infectious, tumoral and obstructive pathologies, with their relevant tests
- Obtain a concrete classification of the various specific radiological tests for these areas, as well as their indications, contraindications and adverse effects
- Know what further complementary tests can be used in order to make a firm and comprehensive diagnosis

Module 6. Bone Lesions and Maxillary Cysts

- * Learn the classification and characteristics of the different lesions
- Understand the etiology and development of bone lesions, as well as the importance of their diagnosis
- Know how to recognize the different types of epithelial cysts, both odontogenic and nonodontogenic, and their current prevalence
- Gain in-depth knowledge of other fundamental pathologies such as those derived from chemotherapy or radiotherapy (osteoradionecrosis)
- Verify the importance of bisphosphonates and other drugs related to bone aspects and their interaction in clinical performance (osteonecrosis)
- Delve deeper into the prevention, treatment and monitoring necessary to cope with these lesions
- Verify essential patient bedside manner in every instance, as well as patient rights to information and adequate performance of medical interconsultations

Module 7. Benign Tumors

- Specialize in the classification of benign tumors, making a clear distinction between benignity and malignancy
- * Delve deeper into the different predisposing factors to such pathologies
- Acquire the ability to act, reflect and be ethical when treating benign lesions
- Select the most effective and appropriate techniques based on scientific learning through review articles and one's own clinical experience
- Gain in-depth knowledge of the different variants that may exist within benign tumors
- Promote and encourage clinical reasoning and speaking skills, as well as communication with other professionals, since these patients may require multidisciplinary treatment
- * Distinguish the pharmacological and treatment dynamics in these cases

Introduction | 13 tech

Module 8. White and Premalignant Lesions

- Explain and classify the different premalignant lesions, as well as the importance of predisposing factors and etiology
- * Gain in-depth knowledge of the different concepts and types of premalignant lesions
- Adequately describe the anatomopathology of a lesion
- Consider the changes and monitoring of a lesion to prevent trauma or malignization as much as possible
- Specialize in the concept of dysplasia, its degrees and the protocols to be followed
- Encourage a relaxed atmosphere toward patients by communicating in such a way as not to induce panic while making patients aware of their pathology
- Interrelate dentistry with medicine to achieve a multidisciplinary field of action in order to improve patient health
- Verify what clinical actions can be taken to prevent possible malignization

Module 9. Oral Cancer and Malignant Tumors

- Recognize anatomopathologies and know the diagnostic protocols for oral cancer, as well as its etiology, prevention guidelines, monitoring and oral rehabilitation
- Know how to make a clear distinction between the different types of tumors and the specific monitoring of those that do not follow the normal protocol
- Specialize in disorders related to the lymphatic system and their potential consequences
- Recognize the different surgical techniques and their fundamentals when applying them to malignant lesions
- * Reflect on research updates regarding malignant pathologies
- Know how to interpret the side effects and collateral effects of cancer with respect to dental treatments in order to apply them responsibly and judiciously
- Present updated monitoring of patients, and express empathic and humanitarian work, developing communication skills and expressive delicacy in professionals
- * Specialize in patient safety before making any health care decision
- Gain a deep understanding of patients' right to information and professionals' duty to inform

Module 10. Neuropathologies

- Know how to correctly assess pain in patients
- Describe the different types of pain and their clinical manifestation
- Delve deeper into the different neuralgias, as well as their possible initial manifestations and sequelae
- Perform differential diagnoses for paralysis, and know the treatments and potential sequelae they may have
- * Establish a pathological index depending on the anatomical points affected
- * Specialize in other neuropathies in addition to the most frequent ones
- * Display correct therapeutic management and reassuring patient bedside manner
- Identify neuralgias related to systemic alterations and their characteristics
- * Delve deeper into their treatment, monitoring and clinical management
- Gain a deeper understanding of the techniques and procedures available to cope with neuropathies



03 **Skills**

After passing the evaluations of the Professional Master's Degree in Oral Medicine, the professional will have acquired the necessary professional competencies for a quality and up to date practice based on the latest scientific evidence.

With this program you will be able to master the management of Oral Medicine and provide better care for your patients"

tech 16 | Skills



General Skills

- Achieve a certain diagnosis through a syllabus based on protocols and organization, which are fundamental for a sound health
- Know the different diagnostic and surgical techniques applicable to oral pathologies
- Perform differential diagnoses, being able to decisively choose diagnostic tests and, therefore, facilitate the process of finding out the etiology and nature of a lesion

666 Prepare yourself for professional success with this highly academic Professional Master's Degree"



Skills | 17 tech

Specific Skills

- Know the pathologies of the oral mucosa and adjoining tissues, as well as the correlation of various clinical pictures with the oral cavity
- Develop health reasoning based on learning oriented to daily practice by means of comprehensive didactics
- Extend its scope and experience to regions adjacent to the oral cavity
- Analyze action protocols in oral pathologies, as well as the indications and contraindications of several treatments
- Understand the functions of saliva and the structure systems that make up the TMJ
- Promote the skills in perception, anamnesis, visual and pragmatic dexterity, as well as prudence and caution when prescribing treatments that may interfere with these bone pathologies
- Describe, locate and correctly diagnose oral tumors
- Prevent the malignancy of a lesion through patient awareness
- Gain in-depth knowledge of malignant tumors affecting the oral cavity
- Recognize and differentiate the different variants of pain and be able to classify them according to pathologies and types

04 Course Management

The teaching team, experts in Oral Medicine, has ample recognition in the profession and are professionals with years of teaching experience who have come together to help the student give a boost to their profession. To this end, they have developed this Professional Master's Degree with recent updates in the field that will allow you to get education and increase your skills in this sector.

GG

Learn from the best professionals and become a successful professional yourself"

tech 20 | Course Management

Management



Dr. Sánchez Sánchez, Almudena

- Founding Partner, Medical Director, SMILE FACTORY Clinic, Advanced Dentistry, Since 2014.
- Daily clinical practice of Oral Surgery, Implantology, Oral Medicine, Periodontics and Implantoprosthetics since 2006.
- Degree in Dentistry from the European University of Madrid UEM, 2001-2006
- Professional Master's Degree in Oral Surgery and Implantology, (Hospital Universitario de Madrid) 2010-2013
- Master's Degree in Oral Medicine, UCM, 2006-2007
- Member of the Spanish Society of Oral Medicine (SEMO), 2007-Present
- Member of the Spanish Society of Oral Laser (SELO), 2019.

Course Management | 21 tech

Professors

Dr. Casañas Gil, Elizabeth

- Professor for the Oral Medicine Master's Degree at Universidad Complutense de Madrid (UCM)
- Dentist Specialist in Prosthodontics
- Dentist specializing in Periodontics and Implantoprosthodontics at Clínica Dental Ortodent
- General Dentist at Clínica Dental RUTHAL, SAP
- PhD in Dental Sciences from Universidad Complutense de Madrid
- Degree in Restorative Dentistry Based on New Technologies (Universidad Complutense de Madrid)
- Official Master's Degree in Dental Sciences from Universidad Complutense de Madrid

Dr. Concha Jerónimo, Ada

- Oral Surgeon and Implantology, Prosthodontics and esthetics in private clinic, Dental Torrox, Malaga, From 2019
- Develops clinical doctoral thesis, research in Oral Implantology, Chair of Oral Surgery, Doctor Pablo Galindo, UGR, Since 2017.
- Professional Master's Degree in Aesthetic Multidisciplinary Dentistry, University of Granada, 2017-2019
- Professional Master's Degree in Dental Sciences, University of Granada, 2017-2018.
- Professional Master's Degree in Oral Surgery and Implant Dentistry, University Hospital of Madrid, 2010-2013
- Degree in Dentistry, European University of Madrid, 2005-2010
- Oral Surgeon, Prosthodontics and Aesthetics, Clínica Fernandez Abarca, Motril, Since 2018
- Clinical Research Applied to Implantology, Faculty of Dentistry, UGR, Since 2017.

Dr. Delás Cotrina, Lola

- General Dentistry, Oral Surgery, Implantology and Endodontics in Delás Dental Clinic in Majadahonda
- Residency with maxillofacial surgeon Adolfo Céspedes at the Dental Clinic of Dr. Lopez
 Bahillo
- Practicing as a General Dentist at the Dentist without Borders Clinic in Madrid
- Degree in Dentistry from CEU San Pablo University in Madrid
- Oral and Maxillofacial Medicine from CEU San Pablo University in Madrid

Dr. Feijóo Lamas, Simón

- Medical Director at Adeslas Dental Fuenlabrada II, Since 2019
- Degree in Dentistry, Alfonso X El Sabio University, Madrid, 2009-2014.
- Professional Master's Degree in Medical-Surgical Periodontics, CEU Madrid University, 2014-2015.
- Training in X-Ray Apparatus Manager, Alfonso X El Sabio University, Madrid, 2014.
- Periodontist at Clínica Adeslas Dental Fuenlabrada, Since 2016
- Periodontist at Clínica Adeslas Dental Tres Cantos, Since 2016
- Periodontist Surgeon Sanitas Tres Cantos, At the present time

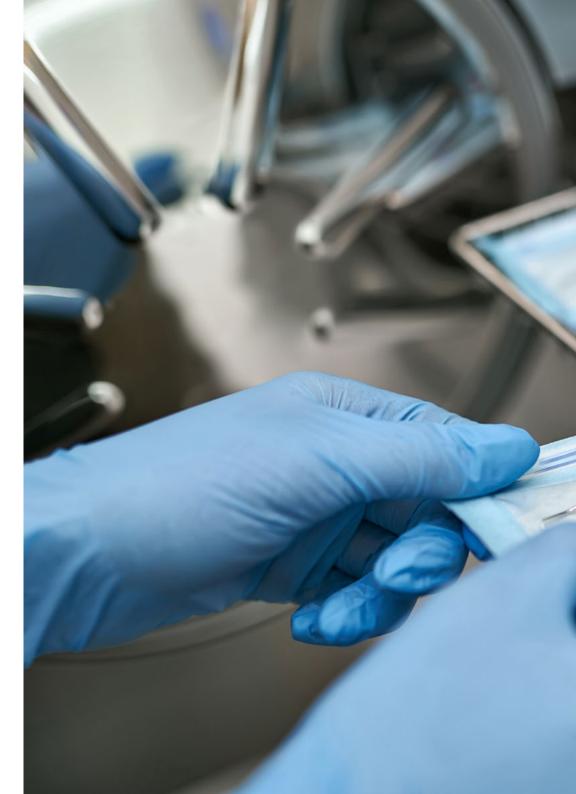
tech 22 | Course Management

Dr. Hernánz Martín, Jaime

- Daily Clinical Practice in Implant Dentistry, Periodontics, Oral Surgery and Implant
 Prosthetics
- Degree in Dentistry at the University of Alfonso X El Sabio
- One year residency for the Master's Degree in Oral Surgery and Implantology at Hospitales de Madrid
- Master's Degree in Implant Surgery, Prosthesis and Periodontics at Alfonso X El Sabio University
- Associate Professor in the Faculty of Dentistry Medicine at Alfonso X El Sabio University
- Professor for the Master's Degree in Implant Surgery, Prosthetics and Peri-implantology at Alfonso X El Sabio University
- Lecturer in courses and webinars at the national and international level
- Co-author of national and international publications

Dr. Jiménez Núñez, Francisco

- General Dentistry, Implantology and Periodontics at Dental BarMar Clinic
- General Dentistry, Pediatric Dentistry and Periodontics at Virgen del Pilar Clinic
- Master's Degree in Oral Surgery and Implantology from the University Hospital of Madrid
- Master's Degree in Dental Sciences from the Complutense University of Madrid
- Degree in Dentistry from the Complutense University of Madrid





Course Management | 23 tech

Dr. Lizaur Ajuria, Bárbara

- Implantologist and Implant Prosthetist at Dr. Bárbara Lizaur Dental Clinic, Madrid Since
 2015
- Degree in Dentistry from the Complutense University Madrid (2001 2006)
- Master's Degree in Oral Surgery and Implantology, Hospital de Madrid (2009-2012)
- Specialization in Oral Medicine from Complutense University, Madrid (2008-2009)
- Course in Periodontal and Peri-Implant Plastic Surgery at the Complutense University of Madrid (2018-19)
- Collaborating Professor in Professional Master's Degree in Oral Surgery, Periodontics and Implantoprosthetics, IPAO Center (Madrid), Since 2018.
- Implantologist and Implant Prosthetist at Dr. Bárbara Lizaur Uriol (Madrid), Since 2017

Dr. Ortega Gayoso, Guillermo

- General Dentistry and Implantology, Private practice in own practice in Paris, Since 2017.
- Clinical Professional Master's Degree in Implant Prosthetics, Paris Diderot University, Paris, 2015-2017.
- Certificate of higher studies (CES) Prosthetic dentistry with mention in fixed prosthetics, Université Paris Diderot, Paris, 2017.
- Professional Master's Degree in Oral Surgery and Implant Dentistry, University Hospital of Madrid, 2010-2013
- Degree in Dentistry, Universidad CEU San Pablo, Madrid, 2005-2010
- Implantology and Implant Rehabilitation Practitioner in Paris, 2014-2020
- Lecturer in national and international conferences

05 Structure and Content

The structure of the contents has been designed by a team of professionals knowledgeable about the implications of the program in daily practice, aware of the current relevance of education in Oral Medicine and committed to quality teaching through new educational technologies.

We have the most complete and up-to-date programme on the market. We seek excellence and we want to help you achieve it too"

tech 26 | Structure and Content

Module 1. Oral Medicine and Diagnostic Methods

- 1.1. Pathology and Oral Medicine
 - 1.1.1. In-Depth Oral Medicine
 - 1.1.2. Relevant Figures
 - 1.1.3. Oral Medicine Applied to Health Care Branches
 - 1.1.4. Current Uses of Oral Medicine in Dentistry
 - 1.1.5. Advances and Technology
- 1.2. Medical History
 - 1.2.1. Medical History
 - 1.2.2. Personal and Family History
 - 1.2.3. Exploration
 - 1.2.4. Diagnosis
 - 1.2.5. Treatment Plan
- 1.3. Informed Consent
 - 1.3.1. Origins and Fundamentals
 - 1.3.2. Features
 - 1.3.3. Applicable Exceptions
 - 1.3.4. The Right to Information
 - 1.3.5. The Right to Confidentiality
- 1.4. Legal Implications in Health Care
 - 1.4.1. Origin and Fundamentals
 - 1.4.2. Legal Principles Applied to Health Care
 - 1.4.3. Obligations and Rights of the Professional
 - 1.4.4. Legal Relevance of Medical Records
 - 1.4.5. Relationship between Health and Administrative Management
- 1.5. Complementary Tests
 - 1.5.1. Radiography
 - 1.5.2. Nuclear Magnetic Resonance (NMR)
 - 1.5.3. CT or CBCT
 - 1.5.4. Electromyography
 - 1.5.5. Sialometry
 - 1.5.6. Ultrasound
 - 1.5.7. Analytics



Structure and Content | 27 tech

- 1.5.8. Urinalysis
- 1.5.9. Capillary Glycemia
- 1.5.10. INR
- 1.5.11. Exudates
- 1.5.12. FNA, Biopsy and Cytology
- 1.5.13. Mantoux Test
- 1.5.14. Breath Test
- 1.5.15. Endocrine Tests
- 1.5.16. Pulse Oximetry and Densimetry
- 1.5.17. Photography.
- 1.6. Radiography
 - 1.6.1. Intraoral X-Rays Types
 - 1.6.2. Extraoral X-Rays Projections
- 1.7. Diagnostic Tests in Oral Medicine
 - 1.7.1. Clinical Tests
 - 1.7.2. Patch Test
 - 1.7.3. Diagnostic Imaging
 - 1.7.4. Contrast Diagnostics
 - 1.7.5. Nuclear medicine
 - 1.7.6. Culture Techniques
 - 1.7.7. Immunological and Immunohistochemical Techniques
- 1.8. Biopsy
 - 1.8.1. Fundamentals.
 - 1.8.2. Indications and Applications
 - 1.8.3. Types and Procedures
 - 1.8.4. Most Frequent Errors
 - 1.8.5. Technical Contraindications for Biopsies
 - 1.8.5.1. Materials
 - 1.8.5.2. Incisional
 - 1.8.5.3. Excisional
 - 1.8.5.4. FNA
 - 1.8.5.5. Cytology

- 1.9. Validity of Diagnostic Tests
 - 1.9.1. Sensitivity
 - 1.9.2. Specificity
 - 1.9.3. Safety
 - 1.9.4. Predictive Values
 - 1.9.5. Accuracy
 - 1.9.6. Precision
- 1.10. Research
 - 1.10.1. Observation or Research?
 - 1.10.2. Types of Studies
 - 1.10.3. Systematic Reviews
 - 1.10.4 Meta-analytical Study
 - 1.10.5. Clinical Trials
 - 1.10.6. Publication and Scientific Articles: Criteria

Module 2. Applied Anatomopathology and Elementary Lesions

- 2.1. Pathology Branches
 - 2.1.1. General Pathology
 - 2.1.2. Systemic Pathology
 - 2.1.3. Molecular Pathology
 - 2.1.4. Molecular Biology
 - 2.1.5. Dental and Health Care Applications
- 2.2. Oral Mucosal Histopathology
 - 2.2.1. Anatomy Recap.
 - 2.2.2. Histological Structure
 - 2.2.3. Microscopic Elementary Lesions of the Oral Mucosa
 - 2.2.4. Epithelial Tissue
 - 2.2.4.1. Keratinized
 - 2.2.4.2. Non-Keratinized
 - 2.2.5. Epithelial Cell Junctions
 - 2.2.5.1. Desmosome
 - 2.2.5.2. Hemidesmosomes
 - 2.2.5.3. Others

tech 28 | Structure and Content

Pathological Anatomy Fundamentals 2.3. 2.3.1. Applications 2.3.2. Techniques 2.3.3. Study Method 2.3.3.1. Autopsy 2.3.3.2. Experimental Method 2.4. Functional Classification of Oral Mucosa 2.6.2. Papule 2.4.1. External Labial Mucosa 2.6.3. Nodes 2.4.2. Lining Mucosa 2.6.4. Bleb 2.4.3. Specialized Mucosa 2.6.5. Tuber Elementary Lesions 2.5. 2.5.1. Features 2.5.2. Classification 2.5.3. Etiology 2.5.4. Chemical Agents 2.5.4.1. Chemical Burns: Substances and Drugs 2.5.4.2. Post-Anesthesia Necrosis 2.7.3. 2.5.4.3. Secondary Drug Lesions 2.5.5. Physical Agents 2.7.5. Cyst 2.5.5.1. Burns 2.8. Secondary Lesions 2.5.5.1.1. Thermal 2.5.5.1.2. Electrical 2.5.6. Mechanical Agents 283 2.5.6.1. Alba Line 2.9. Staining 2.5.6.2. Frictional Hyperkeratosis 2.5.6.3. Leukoedema 2.5.6.4. Nibbling 2.5.6.5. Trauma 2.10. Other Lesions 2.5.6.6. Ulcers 2.5.6.6.1. Decubitus 2.5.6.6.2. Traumatic

2.5.7. Allergic Oral Pathology 2.5.7.1. Angioedema 2.5.7.2. Allergic Contact Stomatitis 2.5.7.3. Anaphylactic Shock 2.5.8. latrogenesis 2.6. Solid Content Primary Lesions 2.6.1. Macula 2.6.6. Rubber 2.6.7. Keratosis 2.6.8. Tumors 2.7. Liquid Content Primary Lesions 2.7.1. Phylctena 2.7.2. Gall Bladder Blister 2.7.4. Pustules 2.8.1. Continuity Solution 2.8.2. Removable Residue Restorative Processes 2.9.1. Oral Mucosa Dyschromia 2.9.2. Exogenous 2.9.3. Endogenous 2.10.1. Sclerosis 2.10.2 Ulcers and Frosion 2.10.3. Lichenification 2.10.4. Intertrigo 2.10.5. Infiltration 2.10.6. Ocular Involvement

Structure and Content | 29 tech

Module 3. Inflammatory and Infectious Oral Pathology

- 3.1. Bacterial Infections
 - 3.1.1. Features
 - 3.1.2. Scarlet Fever
 - 3.1.3. Impetigo
 - 3.1.4. Angular Cheilitis
 - 3.1.5. Telangiectatic Granuloma
 - 3.1.6. Cellulite
 - 3.1.6.1. Acute
 - 3.1.6.2. Chronic
 - 3.1.7. Necrotizing Gingivitis
 - 3.1.8. Gonococcal Pharyngitis
 - 3.1.9. Syphilis
 - 3.1.9.1. Primary
 - 3.1.9.2. Secondary
 - 3.1.9.3. Tertiary
 - 3.1.10. TB
 - 3.1.11. Leprosy
 - 3.1.12. Actinomycosis
 - 3.1.13. Gonorrhoea
 - 3.1.14. Adenitis
 - 3.1.15. Fistulas.
- 3.2. Fungal Infections
 - 3.2.1. Etiology
 - 3.2.2. Classification
 - 3.2.2.1. Thrush or Acute Pseudomembranous Candidiasis
 - 3.2.2.2. Erythematous Candidiasis
 - 3.2.2.3. Leukoplastic Candidiasis
 - 3.2.2.4. Erythematous Candidiasis: Erosive Atrophic
 - 3.2.2.5. Angular Cheilitis
 - 3.2.2.6. Rhomboid Glossitis
 - 3.2.2.7. Prosthetic Stomatitis
 - 3.2.2.8. Deep Mucositis
 - 3.2.2.9. Blastomycosis

3.3. Viral Infections

- 3.3.1. Characteristics and Treatment
- 3.3.2. Papillomas
- 3.3.3. Warts
- 3.3.4. Focal Epithelial Hyperplasia
- 3.3.5. Condyloma Acuminatum
- 3.3.6. Oral Condylomatosis
- 3.3.7. HSV Recurrent Herpes Labialis
- 3.3.8. Herpetic Primoinfection, Varicella Zoster and Herpes Zoster
- 3.3.9. Molluscum Contagiosum
- 3.3.10. Coxsackie
- 3.3.11. Herpangina
- 3.3.12. Hand-Foot-Mouth Disease
- 3.3.13. Paramyxovirus
- 3.3.14. Measles
- 3.3.15. CMV Mononucleosis
- 3.3.16. Epstein-Barr
- 3.3.17. Kawasaki Syndrome
- 3.4. Benign Exophytic Lesions
 - 3.4.1. Etiology
 - 3.4.2. Reactive Hyperplasia
 - 3.4.2.1. Fibroepithelial Hyperplasia
 - 3.4.2.2. Diapneusia
 - 3.4.2.3. Papillary Palatine Hyperplasia
 - 3.4.2.4. Fissured Granuloma
 - 3.4.2.5. Fibrous Nodule
 - 3.4.2.6. Reactive Granulomas
 - 3.4.2.7. Peripheral Giant Cell Granuloma
 - 3.4.3. Salivary Cysts3.4.3.1. Caused by Retention3.4.3.2. Caused by Extravasation3.4.4. Benign Tumors
 - 3.4.4.1. Epithelial
 - 3.4.4.2. Connective

tech 30 | Structure and Content

3.5.1. Sjögren's Syndrome

- 3.5.2. Lupus Erythematosus
- 3.5.3. Systemic Sclerosis
- 3.5.4. Rheumatoid Arthritis.
- 3.5.5. Connective Tissue Tumors 3.5.5.1. Fibroma
 - 3.5.5.2. Angioma
- 3.6. Maxillary and Mandibular Pathology
 - 3.6.1. Features
 - 3.6.2. Agnathia
 - 3.6.3. Macrognathia
 - 3.6.4. Micrognathia
 - 3.6.5. Cleft Palate
 - 3.6.6. Asymmetries
 - 3.6.7. Treatment
- 3.7. Labial Pathology
 - 3.7.1. Features
 - 3.7.2. Fistulas and Labial Pits
 - 3.7.3. Cleft Lip
 - 3.7.4. Morsicatio Buccarum
 - 3.7.5. Cheilitis
 - 3.7.5.1. Cheilitis Simplex
 - 3.7.5.2. Actinic Cheilitis
 - 3.7.5.3. Allergic Contact Cheilitis
 - 3.7.5.4. Cheilitis Glandularis
 - 3.7.5.5. Exfoliative Cheilitis
 - 3.7.5.6. Granulomatous Cheilitis
 - 3.7.5.7. Macrocheilitis
 - 3.7.6. Peutz-Jeghers Syndrome
 - 3.7.7. Mucocele
 - 3.7.8. Tumors and Pseudotumors

- 3.8. Lingual Pathology
 - 3.8.1. Features
 - 3.8.2. Hair Removal
 - 3.8.3. Saburral Tongue
 - 3.8.4. Macroglossia
 - 3.8.5. Ankyloglossia
 - 3.8.6. Median Rhomboidal Glossitis
 - 3.8.7. Hairy Tongue
 - 3.8.8. Fissured Tongue
 - 3.8.9. Lingual Varicosities
 - 3.8.10. Migratory Glossitis
 - 3.8.11. Geographic Tongue
 - 3.8.12. Cleft Tongue
 - 3.8.13. Forked Tongue
 - 3.8.14. Tumours
 - 3.8.15. Motor Disturbances
 - 3.8.16. Sensory Alterations
- 3.9. Blistering-Vesicular Diseases
 - 3.9.1. Features and Types
 - 3.9.2. Pemphigus 3.9.2.1. Vulgar
 - 3.9.2.2. Erythematous
 - 3.9.2.3. Foliaceous
 - 3.9.2.4. Vegetans
 - 3.9.2.5. Paraneoplastic
 - 3.9.3. Pemphigoid
 - 3.9.3.1. Cicatricial
 - 3.9.3.2. Blistered
 - 3.9.4. Linear IgA Dermatosis 3.9.4.1. Infantile 3.9.4.2. Adults
 - 3.9.5. Exudative Erythema Multiforme 3.9.5.1. Features
 - 3.9.5.2. Etiology and Predisposing Factors

Structure and Content | 31 tech

	3.9.6.	 3.9.5.3. Sevens-Johnson Syndrome 3.9.5.4. Toxic Epidermal Necrolysis 3.9.5.5. Evolution, Prognosis, and Treatment Recurrent Aphthous Stomatitis (RAS) 3.9.6.1. Features 3.9.6.2. Etiology and Predisposing Factors 3.9.6.3. Major RAS 		3.11.4. 3.11.5. 3.11.6. 3.11.7.	Vit B2 Vit B3 Vit C Folic Acid Zinc.	
		3.9.6.4. Minor RAS			lule 4. Special Patients: Relation between Systemic Diseases and Oral	
	3.9.6.5. Herpetiform Aphthous Stomatitis		Pathologies			
	0 0 7	3.9.6.6. Treatment	4.1.		ologic Alterations	
	3.9.7.	Associated Pathology and Syndromes				
		3.9.7.1. Celiac Disease 3.9.7.2. Crohn's Disease		4.1.2.	Red Series Diseases	
		3.9.7.2. Cronn's Disease 3.9.7.3. Neutropenia			4.1.2.1. Anaemia 4.1.2.2. Polyglobulia	
		3.9.7.4. Behçet's Disease		4.1.3.	White Blood Cell Disorders	
3 10	Oral Lic	hen Planus		4.1.0.	4.1.3.1. Transplant Recipients: Before and After	
0.10.	3.10.1. Etiology				4.1.3.2. HIV	
		Classification			4.1.3.3. Oncology Patients	
		3.10.2.1. Papular			4.1.3.4. Immunosuppressive Therapy for Autoimmune Pathology	
		3.10.2.2. Reticular		4.1.4.	Coagulation Disorders	
		3.10.2.3. Atrophic			4.1.4.1. Pharmacological Anticoagulants	
		3.10.2.4. Erosive			4.1.4.2. Haemophilia	
		3.10.2.5. Blistered			4.1.4.3. Secondary to Other Pathologies	
		3.10.2.6. Plaque-type		4.1.5.	Langerhans Cell Histiocytosis	
		3.10.2.7. Others	4.2. Endocrine Disorders			
	3.10.3.	Diagnosis		4.2.1.	Introduction	
		Treatment		4.2.2.	Glands and Organs	
		Dermatitis Herpetiformis			4.2.2.1. Adrenal Gland	
3.11.		nal Alterations			4.2.2.2. Pancreas.	
	3.11.1.	Metabolic Alterations			4.2.2.3. Kidneys	
		3.11.1.1 Amyloidosis			4.2.2.4. Brain	
		3.11.1.2. Lipoid Proteinosis			4.2.2.5. Genital System	
		3.11.1.3. Fabry Disease		4.2.3.	Endocrine-Metabolic Pathology	

tech 32 | Structure and Content

4.2.4.

4.3.

4.4.

4.5.

4.3.2. 433

4.3.4.

4.3.5.

4.3.6.

4.3.7.

4.3.8.

4.4.2. 4.4.3.

4.4.4.

4.4.5.

4.4.6.

4.4.7.

4.5.1. 4.5.2.

4.5.3.

4.5.4.

Pericardiopathies

4.5.5. Aorta Diseases Dialysis 4.2.5. Adrenal Insufficiency 4.5.6. Hypertension 4.2.5.1. Primary: Addison's Disease 4.5.7. Action Protocol 4.2.5.2. Secondary: 4.2.6. Diabetes Mellitus 4.2.6.1. Types 4.6. Neurological Alterations: 4.2.6.2. Protocol 4.6.1. Nervous system 4.2.6.3. Hemochromatosis or Bronzed Diabetes 4.2.7. Thyroid Pathology 4.2.7.1. Hyperthyroidism 4.6.2. Cerebrovascular Diseases. 4.2.7.2. Hypothyroidism 4.6.3. Cerebrovascular Accidents 4.2.7.3. Tumours Digestive Alterations 4.6.4. Epilepsy 4.3.1. Anatomy 4.6.5. Related Oral Pathology Crohn's Disease Ulcerative Colitis 466 Prevention Gastroesophageal Reflux 4.6.7. Action Protocol Hepatopathy or Liver Disease Dependent Patients 4.7. Uremic Stomatitis 4.7.1. Types Related Oral Pathology and Treatment 4.7.2. Prevention Pulmonary Alterations 4.4.1. Anatomy Types and Diagnostic Tests COPD Wegner Disease Sarcoidosis Related Oral Pathology Action Protocol Cardiovascular Problems **Circulatory System** Valvulopathies 4.7.6. Cardiomyopathies

Geriatric Patient 4.7.3. Addicted Patients 4.7.3.1. Tobacco 4.7.3.2. Alcohol 4.7.3.3. Drugs 4.7.3.4. Drugs: 4.7.3.5. Unhealthy Habits 4.7.4. Disability 4.7.4.1. Intellectual 4.7.4.2. Sensory 4.7.4.3. Motor 4.7.5. Related Oral Pathology Prevention 4.7.7. Action Protocol

4.5.7.1. Antibiotic Prophylaxis

4.5.7.2. Anesthesia

4.6.1.1. Central

4.6.1.2. Peripheral

4.6.3.1. Hemorrhagic

4.6.3.2. Ischemic

Structure and Content | 33 tech

4.8. Pregnancy

- 4.8.1. Definition
- 4.8.2. Nursing
- 4.8.3. Related Oral Pathology
 - 4.8.3.1. Gingivitis
 - 4.8.3.2. Pyogenic Granuloma
 - 4.8.3.3. Cavities
 - 4.8.3.4. Periodontal Disease
- 4.8.4. Dental Emergencies
- 4.8.5. Prevention
- 4.8.6. Action Protocol
- 4.9. Emergencies
 - 4.9.1. Cognitive Alterations
 - 4.9.2. Respiratory Alterations
 - 4.9.3. Cardiac Alterations
 - 4.9.4. Allergies.
 - 4.9.5. Thoracic or Abdominal Pain
 - 4.9.6. Anaphylactic Shock
 - 4.9.7. Action Protocol
- 4.10. Oncology Patients
 - 4.10.1. Definition
 - 4.10.2. Types of Treatment
 - 4.10.2.1. Radiotherapy
 - 4.10.2.2. Chemotherapy
 - 4.10.2.3. Brachytherapy
 - 4.10.2.4. Surgical
 - 4.10.3. Oncologic Treatment Phases
 - 4.10.4. Related Oral Pathology
 - 4.10.5. Prevention
 - 4.10.6. Action Protocol

 5.1. Saliva and Salivary Gland Anatomy 5.1.1. Composition 5.1.2. Functions 5.1.3. Saliva Flow Variations 5.1.4. Applications and Diagnostic Use 5.1.5. Salivary Gland Anatomy Recap 5.1.5.1. Parotid Gland 5.1.5.2. Sublingual Gland 5.1.5.3. Submaxillary Gland 					
 5.1.2. Functions 5.1.3. Saliva Flow Variations 5.1.4. Applications and Diagnostic Use 5.1.5. Salivary Gland Anatomy Recap 5.1.5.1. Parotid Gland 5.1.5.2. Sublingual Gland 					
 5.1.3. Saliva Flow Variations 5.1.4. Applications and Diagnostic Use 5.1.5. Salivary Gland Anatomy Recap 5.1.5.1. Parotid Gland 5.1.5.2. Sublingual Gland 					
5.1.4. Applications and Diagnostic Use5.1.5. Salivary Gland Anatomy Recap5.1.5.1. Parotid Gland5.1.5.2. Sublingual Gland					
5.1.5. Salivary Gland Anatomy Recap 5.1.5.1. Parotid Gland 5.1.5.2. Sublingual Gland					
5.1.5.1. Parotid Gland 5.1.5.2. Sublingual Gland					
5.1.5.2. Sublingual Gland					
5.1.5.3. Submaxillary Gland					
5.1.5.4. Minor or Accessory Salivary Glands					
5.2. Salivary Gland Malformations and Pathologies	Salivary Gland Malformations and Pathologies				
5.2.1. Exploration					
5.2.2. Fistulas.					
5.2.3. Stafne Cavity					
5.2.4. Pathologies and Causes					
5.2.5. Diagnostic tests					
5.2.5.1. Radiological Diagnosis					
5.2.5.2. Sialography Uses					
5.2.5.3. Gammagraphy Uses					
5.2.6. Complementary Tests					
5.2.7. Serologic Test					
Sialadenitis					
5.3.1. Features					
5.3.2. Pathologies					
5.3.2.1. Bacterial Suppurative					
5.3.2.2. Viral					
5.3.2.2.1. Epidemic Mumps					
5.3.2.2.2. Cytomegalic Mumps					
5.3.3. Chronicle					
5.3.3.1. Bacterial					
5.3.3.1.1. Tuberculous					
5.3.3.1.2. Actinomycosis					
5.3.3.1.3. Syphilitic					

tech 34 | Structure and Content

5.3.3.2. Allergic/Toxic 5.8. TMJ Etiopathogenesis 5.3.3.3. Post Radiotherapy 5.8.1. Endocrine/Rheumatic Factors 5.3.3.4. Sclerosant 5.8.2. Trauma 5.8.3. Psychosocial Factors 5.3.3.5. Recurrent (Juvenile) 5.4. Sialolithiasis Pathologies. Classification 5.9. 5.9.1. Congenital and Developmental Disorders 5.4.1. Features 5.9.2. Condylar Pathology 5.4.2. Types 5.4.2.1. Pathologies 5.9.3. Masticatory Muscle Disorders 5.9.4. Bone Pathology 5.4.2.2. Chronicle 5.9.4.1. Ankylosis 5.4.3. Mucocele 5.9.4.2. Arthritis 5.4.4. Garel's Hernia Salivary Colic 5.9.5. Tumorous Pathology 5.4.5. 5.10. Exploration and Treatment 5.4.6. Sialodochitis 5.4.7. Cannula 5 10 1 Clinical Examination 5.4.8. Treatment 5.10.2. Diagnostic tests Sialoadenosis 5.10.2.1. Ultrasound 5.5.1. Features 5.10.2.2. Arthroscopy 5.5.2. Sarcoidosis 5.10.2.3. Resonance 5.5.3. Cystic fibrosis 5.10.2.4. CAT Sjögren's Syndrome 5.10.2.5. Open Mouth/Closed Mouth X-ray 5.5.4. Tumor Pathology and Other Involvements 5.10.2.6. Osteoprotegerin (OPG) 5.6.1. Features 5.10.3. Treatment 5.6.2. Retention Cysts 5.10.3.1. Unloading Splint 5.10.3.2. Occlusal Adjustment 5.6.3. Tumours 5.6.4. Frey Syndrome 5.6.5. Necrotizing Sialometaplasia TMJ Anatomy 5.10.3.3. Pharmacological 5.10.3.4. Botulinum toxin 5.7.1. Bone Anatomy 5.7.2. Muscular Anatomy 5.10.3.5. Physiotherapy Ligaments 5.10.3.6. Surgical 5.7.3. 5.7.4. Buttresses

5.10.3.2.1. Selective Grinding

5.10.3.2.2. Orthodontics

5.7.5. Disks

55

5.6.

5.7.

Structure and Content | 35 tech

Module 6. Bone Lesions and Maxillary Cysts

- 6.1. General Information on Bone Tissue
 - 6.1.1. Bone Tissue and Histology
 - 6.1.2. Transformation and Remodeling 6.1.2.1. Systemic Factors
 - 6.1.2.2. Local Factors
 - 6.1.3. Concepts and Terminology 6.1.3.1. Hyperplasia

 - 6.1.3.2. Dysplasia
 - 6.1.3.3. Neoplasia
- 6.2. Etiopathogenesis and Classification
 - 6.2.1. Classification
 - 6.2.2. Predisposing Factors
 - 6.2.3. Etiology
 - 6.2.4. Diagnostic Tests
- 6.3. Bone Pathology
 - 6.3.1. Osteoporosis
 - 6.3.2. Osteomalacia
 - 6.3.3. Osteoclerosis
 - 6.3.4. Fibrous Dysplasia
 - 6.3.5. Parathyroid Osteosis
 - 6.3.6. Lymphomas
 - 6.3.7. Myelomas
- 6.4. Maxillary Bone Infections
 - 6.4.1. Periodontitis
 - 6.4.2. Cellulite
 - 6.4.2.1. Pathologies 6.4.2.2. Chronic
 - 6.4.3. Fistulae.
 - 6.4.3.1. Acquired 6.4.3.2. Chronic
 - 6.4.4. Osteitis
 - 6.4.5. Osteomyelitis
 - 6.4.6. Osteoperiostitis

- 6.5. Other Bone Pathologies
 - 6.5.1 Osteogenesis Imperfecta
 - 6.5.2. Osteonecrosis
 - 6.5.3. Osteoradionecrosis
 - 6.5.4. Bisphosphonates
 - 6.5.4.1. Features
 - 6.5.4.2. Clinical Management
- 6.6. Developmental Epithelial Odontogenic Cysts
 - 6.6.1. Infant Gingival Cyst or Epstein Pearls
 - 6.6.2. Primordial Cyst
 - 6.6.3. Dentigerous or Follicular Cysts
 - 6.6.4. Eruption Cyst
 - 6.6.5. Lateral Periodontal Cyst
 - 6.6.6. Adult Gingival Cyst
 - 6.6.7. Glandular Odontogenic Cyst
 - 6.6.8. Odontogenic Keratocyst
- 6.7. Non-Odontogenic Developmental Epithelial Cysts
 - 6.7.1. Nasopalatine Duct Cyst
 - 6.7.2. Nasolabial Cyst
 - 6.7.3. Globulomaxillary Cyst
 - 6.7.4. Median Alverolary, Palatine and Mandibular Cysts
 - 6.7.5. Differential Diagnosis
- 6.8. Inflammatory Epithelial Cysts
 - 6.8.1. Radicular Cyst
 - 6.8.1.1. Apical and Lateral Cyst
 - 6.8.1.2. Residual Cyst
 - 6.8.2. Paradental Cyst
 - 6.8.3. Differential Diagnosis
- 6.9. Non-Neoplastic Bone Lesions or Pseudocysts
 - 6.9.1. Solitary Bone Cyst
 - 6.9.2. Aneurysmal Bone Cyst
 - 6.9.3. Differential Diagnosis

tech 36 | Structure and Content

	6.10.	Osteofibrous	Diseases
--	-------	--------------	----------

- 6.10.1. Maxillary Fibrous Dysplasia
- 6.10.2. Cemento-Osseous Dysplasias
 - 6.10.2.1. Periapical Cemento-Osseous Dysplasia 6.10.2.2. Florid Cemento-Osseous Dysplasia
 - 0.10.2.2.1 Iond Cernento-Osseous Dyspids
- 6.10.3. Cherubism
- 6.10.4. Giant Cell Central Granuloma
- 6.10.5. Albright Syndrome
- 6.10.6. Paget's Disease
- 6.10.7. Caffey's Disease
- 6.10.8. Histiocytosis X
- 6.10.9. Syndrome Syndrome
- 6.10.10. Osteogenic Neoplasms

Module 7. Benign Tumors

- 7.1. Etiopathogenesis and Classification
 - 7.1.1. Histology
 - 7.1.2. Classification
 - 7.1.3. Predisposing Factors
 - 7.1.4. Etiology
- 7.2. Connective Tissue and Muscular Tumors
 - 7.2.1. Features
 - 7.2.2. Fibroma
 - 7.2.3. Myxoma
 - 7.2.4. Xanthoma Verruciformis
 - 7.2.5. Nodular Fasciitis
 - 7.2.6. Fibrous Hyperplasia
 - 7.2.7. Tuberosity Bilateral Fibrous Hyperplasia
 - 7.2.8. Fibrous Gingival Epulis
 - 7.2.9. Cracked Epulis
 - 7.2.10. Peripheral Giant Cell Granuloma (PGCG)
 - 7.2.11. Myomas
 - 7.2.12. Rhabdomyomas
 - 7.2.13. Treatment

- 7.3. Vascular Tumours.
 - 7.3.1. Features
 - 7.3.2. Hemangioma
 - 7.3.3. Lymphangioma
 - 7.3.4. Hemangioendothelioma
 - 7.3.5. Features
 - 7.3.6. Hemangiopericytoma
 - 7.3.7. Glomus tumour
 - 7.3.8. Pyogenic Granuloma
 - 7.3.9. Pregnancy Epulis
 - 7.3.10. Action Protocol
- 7.4. Neurogenic Tumors
 - 7.4.1. Features
 - 7.4.2. Neuromas
 - 7.4.2.1. Traumatic
 - 7.4.2.2. Neurofibromas
 - 7.4.2.3. Von Recklinghausen Disease
 - 7.4.3. Neurofibromas
 - 7.4.4. Schwannoma
 - 7.4.5. Action Protocol
- 7.5. Adipose Lineage Tumors
 - 7.5.1. Features
 - 7.5.2. Lipoma
 - 7.5.3. Fordyce Granules
 - 7.5.4. Superficial Abscesses
 - 7.5.5. Differential Diagnosis
 - 7.5.6. Treatment
- 7.6. Osteoforming Tumors
 - 7.6.1. Torus 7.6.1.1. Mandibular 7.6.1.2. Palatal
 - 7.6.2. Central and Peripheral Osteoma
 - 7.6.3. Osteoma Osteoid
 - 7.6.4. Osteoblastoma

Structure and Content | 37 tech

- 7.6.5. Chondroma
- 7.6.6. Osteochondroma
- 7.6.7. Condroblastoma
- 7.6.8. Ossifying Fibroma
- 7.7. Non-Osteoforming Tumors
 - 7.7.1. Fibrous Tumors
 - 7.7.1.1. Non-Specific Fibroma
 - 7.7.1.2. Chondromyxoid Fibroma
 - 7.7.1.3. Desmoplastic Fibroma
 - 7.7.2. Giant Cell Tumor
 - 7.7.2.1. PGCG
 - 7.7.2.2. Giant Cell Tumor
- 7.8. Ectomesenchymal with or without Odontogenic Epithelium Inclusion
 - 7.8.1. Odontogenic Fibroma
 - 7.8.2. Myxoma
 - 7.8.3. Benign Cementoblastoma
 - 7.8.4. Cemento-Ossifying Fibroma
- 7.9. Benign Odontogenic Tumors of Odontogenic Epithelium without Odontogenic Ectomesenchyma
 - 7.9.1. Ameloblastomas
 - 7.9.2. Calcifying Odontogenic Tumor or Pindborg's Tumor
 - 7.9.3. Adenomatoid Squamous
 - 7.9.4. Adenomatoid OT
 - 7.9.5. Keratocystic OT
- 7.10. Benign Odontogenic Tumors of Odontogenic Epithelium without Odontogenic Ectomesenchyma
 - 7.10.1. Ameloblastic Fibroma
 - 7.10.2. Ameloblastic Fibrodentinoma (Dentinoma)
 - 7.10.3. Odontoameloblastoma
 - 7.10.4. Adenomatoid Odontogenic Tumor
 - 7.10.5. Calcifying Odontogenic Tumor
 - 7.10.6. Complex and Composite Odontoma
 - 7.10.7. Calcifying Cystic Odontogenic Tumor or Gorlin's Cyst

Module 8. White and Premalignant Lesions

- 8.1. White Lesions
 - 8.1.1. Classification
 - 8.1.1.1. Hereditary Disorders
 - 8.1.1.2. Reactive Lesions
 - 8.1.1.3. Immunological Basis
 - 8.1.1.4. Infectious Origin
 - 8.1.1.5. Miscellaneous
 - 8.1.2. Clinical Management
- 8.2. Premalignant Lesions
 - 8.2.1. Concept of Premalignant Lesion
 - 8.2.2. Histological Level
 - 8.2.3. Classification
 - 8.2.4. Predisposing Factors to Malignancy
 - 8.2.5. Clinical Management
- 8.3. Leukoplakia
 - 8.3.1. Features
 - 8.3.2. Predisposing Factors
 - 8.3.3. Etiology
 - 8.3.4. Localization
 - 8.3.5. Types
 - 8.3.5.1. Homogeneous
 - 8.3.5.2. Non-Homogeneous
 - 8.3.5.2.1. Erythroleukoplakia
 - 8.3.5.2.2. Nodular
 - 8.3.5.2.3. Exophytic
 - 8.3.5.2.3.1. Verrucose
 - 8.3.5.2.3.2. Proliferative Verrucosa
 - 8.3.6. Pathologic Anatomy/Pathogenesis
 - 8.3.6.1. Stages
 - 8.3.6.2. Dysplasia
 - 8.3.7. Diagnosis
 - 8.3.8. Treatment
 - 8.3.9. Prognosis

tech 38 | Structure and Content

8.4.	Erythroplakia.			
	8.4.1.	Features		
	8.4.2.	Predisposing Factors		
	8.4.3.	Etiology		
	8.4.4.	Localisation		
	8.4.5.	Турез		
		8.4.5.1. Homogeneous	8.7.	
		8.4.5.2. Non-Homogeneous		
		8.4.5.3. Erythroleukoplakia		
	8.4.6.	Diagnosis		
	8.4.7.	Treatment		
	8.4.8.	Prognosis	8.8.	
8.5.	Actinic Cheilitis.			
	8.5.1.	Features		
	8.5.2.	Predisposing Factors		
	8.5.3.	Etiology		
	8.5.4.	Treatment	8.9.	
	8.5.5.	Prognosis		
8.6.	Melanic Alterations			
	8.6.1.	Features		
	8.6.2.	Etiology		
	8.6.3.	Diagnosis	8.10.	
	8.6.4.	Nevi		
	8.6.5.	Pigmentary Nevus		
		8.6.5.1. Lentigo.		
		8.6.5.2. Melanocytic Nevus		
		8.6.5.3. Acquired Melanocytic Nevus	8.11.	
		8.6.5.3.1. Junctional or Union Nevus		
		8.6.5.3.2. Composite Nevus		
		8.6.5.3.3. Intradermal Nevus		

	8.6.6.	Organoid Nevus		
		8.6.6.1. Epithelial		
		8.6.6.2. Conjunctive		
		8.6.6.3. Vascular		
	8.6.7.	Prevention		
	8.6.8.	Treatment		
	Submud	cosal Oral Fibrosis		
	8.7.1.	Features		
	8.7.2.	Predisposing Factors		
	8.7.3.	Etiology		
	8.7.4.	Treatment		
	Xeroderma Pigmentosum			
	8.8.1.	Features		
	8.8.2.	Predisposing Factors		
	8.8.3.	Etiology		
	8.8.4.	Treatment		
	Plummer Vinson Disease			
	8.9.1.	Features		
	8.9.2.	Predisposing Factors		
	8.9.3.	Etiology		
	8.9.4.	Treatment		
).		tosis Congenita		
	8.10.1.	Features		
	8.10.2.	Predisposing Factors		
	8.10.3.	Etiology		
	8.10.4.	Treatment		
		nolysis Bullosa		
	8.11.1.	Features		
		Predisposing Factors		
		Etiology		
	8.11.4.	Treatment		

Structure and Content | 39 tech

Module 9. Oral Cancer and Malignant Tumors

- 9.1.1. Histology
- 9.1.2. Classification
- 9.1.3. Predisposing Factors
- 9.1.4. Etiology
- 9.1.5. Prevalence
- 9.2. Malignant Odontogenic Tumors: Odontogenic Carcinomas
 - 9.2.1. Malignant Ameloblastoma
 - 9.2.2. Primary Intraosseous Carcinoma
 - 9.2.3. Sclerosing Odontogenic Carcinoma
 - 9.2.4. OC Clear Cells
 - 9.2.5. OC Ghost Cell OC
 - 9.2.6. Odontogenic Cysts Presenting Malignant Changes
- 9.3. Malignant Odontogenic Tumors: Odontogenic Sarcoma
 - 9.3.1. Ameloblastic Fibrosarcoma
 - 9.3.2. Ameloblastic Fibrodentinosarcoma and Ameloblastic Fibro-Odontosarcoma
 9.3.2.1. Odontogenic Carcinosarcoma
- 9.4. Squamous Cell Oral Carcinoma
 - 9.4.1. Features
 - 9.4.2. Etiology
 - 9.4.3. Histology
 - 9.4.4. Diagnosis
 - 9.4.5. Prevention
 - 9.4.6. Treatment
 - 9.4.7. Prognosis
 - 9.4.8. Evolution
- 9.5. Verrucous Carcinoma
 - 9.5.1. Features
 - 9.5.2. Etiology
 - 9.5.3. Diagnosis
 - 9.5.4. Prevention

- 9.5.5. Treatment
- 9.5.6. Prognosis
- 9.5.7. Evolution
- 9.6. Adenocarcinoma
 - 9.6.1. Features
 - 9.6.2. Etiology
 - 9.6.3. Diagnosis
 - 9.6.4. Classification and Types
 - 9.6.5. Prevention
 - 9.6.6. Treatment
 - 9.6.7. Prognosis
 - 9.6.8. Evolution
- 9.7. Oral Melanoma
 - 9.7.1. Features
 - 9.7.2. Classification
 - 9.7.3. Etiology
 - 9.7.4. Diagnosis
 - 9.7.5. Prevention
 - 9.7.6. Treatment
 - 9.7.7. Prognosis
 - 9.7.8. Evolution
- 9.8. Lymphatic Disorders
 - 9.8.1. Features
 - 9.8.2. Etiology
 - 9.8.3. Diagnosis
 - 9.8.4. Classification and Types
 - 9.8.5. Prevention
 - 9.8.6. Treatment
 - 9.8.7. Prognosis
 - 9.8.8. Evolution

tech 40 | Structure and Content

9.9. Sarcomas

9.9.1. Features

- 9.9.2. Etiology
- 9.9.3. Diagnosis
- 9.9.4. Classification and Types
- 9.9.5. Prevention
- 9.9.6. Treatment
- 9.9.7. Prognosis
- 9.9.8. Evolution
- 9.10. Minor Salivary Gland Neoplasms
 - 9.10.1. Features
 - 9.10.2. Etiology
 - 9.10.3. Diagnosis
 - 9.10.4. Prevention
 - 9.10.5. Treatment
 - 9.10.6. Prognosis
 - 9.10.7. Evolution

Module 10. Neuropathologies

- 10.1. Features
- 10.2. Origin
 - 10.2.1. Lobes and Involvements
 - 10.2.2. Function Alterations
 - 10.2.3. Predisposing Factors
 - 10.2.4. Etiology

10.3. Pain

- 10.3.1. Nomenclature
- 10.3.2. Nerve Fibers
 - 10.3.2.1. Types
 - 10.3.2.2. Neurotransmitters
- 10.3.3. Pathophysiology of Pain
- 10.3.4. Types of Pain
- 10.3.5. Treatment

10.4. Neuralgia 10.4.1. Definition 10.4.2. Types 10.4.3. Classification 10.4.4. Cranial Nerves 10.4.5. Spinal Nerves 10.4.6. Diagnosis 10.4.7. Treatment 10.4.8. Others 10.4.8.1. Facial Hemiatrophy 10.4.8.2. Minor Neuralgia 10.4.8.3. Fibromyalgia 10.4.8.4. Myofascial Pain 10.5. Trigeminal Neuralgia 10.5.1. Features 10.5.2. Origin 10.5.3. Predisposing Factors 10.5.4. Etiology 10.5.5. Diagnosis 10.5.6 Treatment 10.5.7. Evolution 10.6. Glossopharyngeal Neuralgia 10.6.1. Features 10.6.2. Origin 10.6.3. Predisposing Factors 10.6.4. Etiology 10.6.5. Diagnosis 10.6.6. Treatment 10.6.7. Evolution 10.7. Headaches and Cephalalgias 10.7.1. Clinical Classification 10.7.2. Pathophysiology

Structure and Content | 41 tech

10.7.3. Migraines. Vascular-Type Algia 10.7.4. Cluster Headache 10.7.5. Other Orofacial Pain 10.7.5.1. Burning Mouth Syndrome 10.7.5.2. Atypical Facial Algia 10.7.5.3. Pterygoides Hamulus Syndrome 10.7.5.4. Pterygoid Process Syndrome 10.7.6. Palliative Techniques for Pain 10.8. Burning Mouth Syndrome 10.8.1. Features 10.8.2. Origin 10.8.3. Predisposing Factors 10.8.4. Etiology 10.8.5. Diagnosis 10.8.6. Treatment 10.8.7. Evolution 10.9. Facial Paralysis 10.9.1. Etiology 10.9.1.1. Pathology 10912 Traumatic 10.9.1.3. Congenital 10.9.1.4. Idiopathic 10.9.1.5. latrogenic 10.9.2. Types 10.9.2.1. Central Facial Paralysis 10.9.2.2. Peripheral Facial Paralysis 10.9.3. Treatment 10.9.4. Miscellaneous 10.9.4.1. Guillain-Barré Syndrome 10.9.4.2. Paget's Disease 10.9.4.3. Melkersson-Rosenthal Syndrome 10.9.4.4. Myofascial Syndrome

10.9.4.5. Lupus 10.9.4.6. ALS 10.9.4.7. Diabetic Neuropathy 10.10. Bell's Palsy 10.10.1. Features 10.10.2. Origin 10.10.3. Predisposing Factors 10.10.4. Etiology 10.10.5. Diagnosis 10.10.6. Treatment 10 10 7 Evolution 10.11. Ramsay Hunt Syndrome 10.11.1. Features 10.11.2. Origin 10.11.3. Predisposing Factors 10.11.4. Etiology 10.11.5. Diagnosis 10.11.6 Treatment 10.11.7. Evolution

> A unique, key, and decisive training experience to boost your professional development"

06 **Methodology**

This academic program offers students a different way of learning. Our methodology uses a cyclical learning approach: **Relearning.**

This teaching system is used, for example, in the most prestigious medical schools in the world, and major publications such as the **New England Journal of Medicine** have considered it to be one of the most effective.

Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"

tech 44 | Methodology

At TECH we use the Case Method

In a given situation, what should a professional do? Throughout the program, students will face multiple simulated clinical cases, based on real patients, in which they will have to do research, establish hypotheses, and ultimately resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

With TECH you will experience a way of learning that is shaking the foundations of traditional universities around the world.

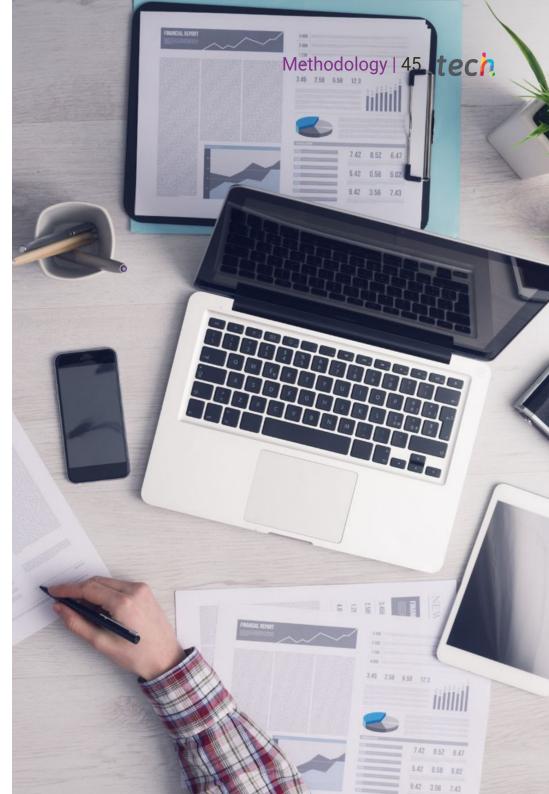


According to Dr. Gérvas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, trying to recreate the real conditions in the dentist's professional practice.

Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method"

The effectiveness of the method is justified by four fundamental achievements:

- 1. Dentists who follow this method not only grasp concepts, but also develop their mental capacity by means of exercises to evaluate real situations and apply their knowledge.
- 2. Learning is solidly translated into practical skills that allow the student to better integrate into the real world.
- 3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
- 4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



tech 46 | Methodology

Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

This university is the first in the world to combine the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, a real revolution with respect to the mere study and analysis of cases.

The student will learn through real cases and by solving complex situations in simulated learning environments. These simulations are developed using state-of-the-art software to facilitate immersive learning.



Methodology | 47 tech

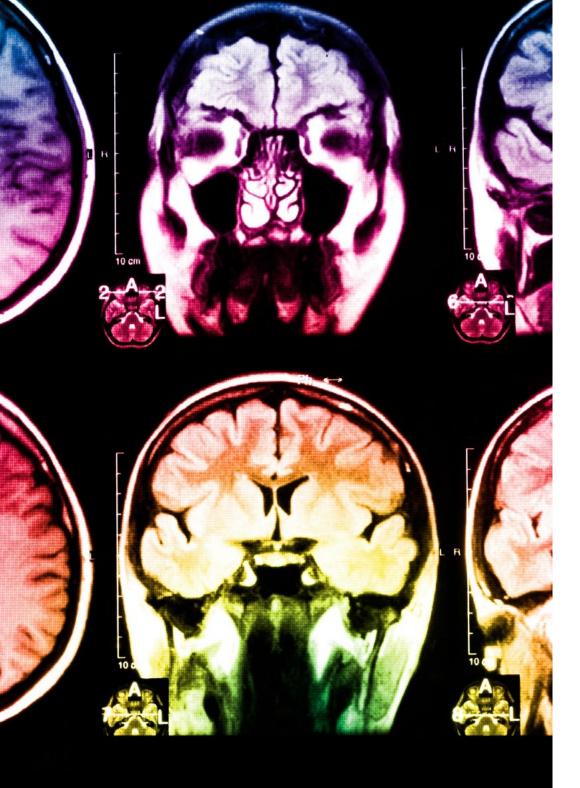
At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

With this methodology we have trained more than 115,000 dentists with unprecedented success, in all specialties regardless of the workload. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

Relearning will allow you to learn with less effort and better performance, involving you more in your training, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation for success.

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by TECH's learning system is 8.01, according to the highest international standards.



tech 48 | Methodology

This program offers the best educational material, prepared with professionals in mind:



Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is highly specific and precise.

20%

15%

3%

15%

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



Educational Techniques and Procedures on Video

TECH introduces students to the latest techniques, the latest educational advances, and to the forefront of medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many times as you like.



Interactive Summaries

The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".



Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.

Methodology | 49 tech



Expert-Led Case Studies and Case Analysis

Effective learning ought to be contextual. Therefore, TECH presents real cases in which the expert will guide students, focusing on and solving the different situations: a clear and direct way to achieve the highest degree of understanding.

20%

7%

3%

17%



Testing & Retesting

We periodically evaluate and re-evaluate students' knowledge throughout the program, through assessment and self-assessment activities and exercises, so that they can see how they are achieving their goals.



Classes

There is scientific evidence suggesting that observing third-party experts can be useful.

Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



Quick Action Guides

TECH offers the most relevant contents of the course in the form of worksheets or quick action guides. A synthetic, practical, and effective way to help students progress in their learning.

07 **Certificate**

The Professional Master's Degree in Oral Medicine guarantees, in addition to the most rigorous and up to date education, access to a Professional Master's Degree issued by TECH Technological University.



GG

Successfully complete this program and receive your university qualification without having to travel or fill out laborious paperwork"

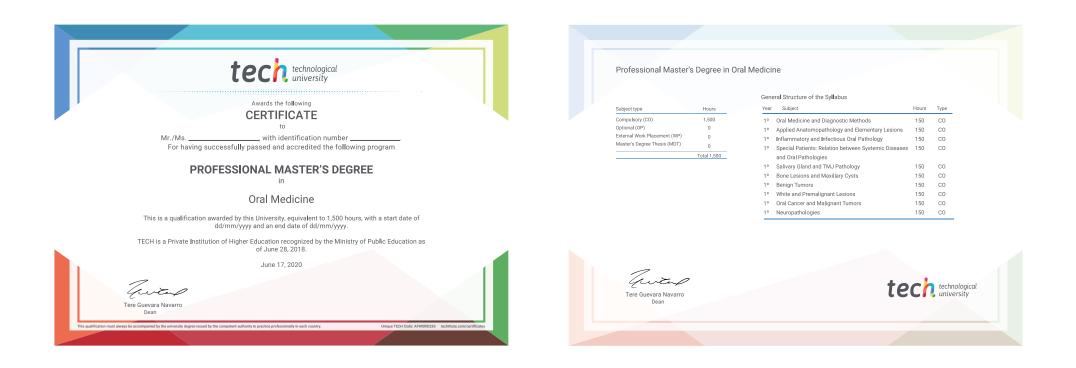
tech 52 | Certificate

This **Professional Master's Degree in Oral Medicine** contains the most complete and up to date scientific program on the market.

After the student has passed the assessments, they will receive their corresponding **Professional Master's Degree** issued by **TECH Technological University** via tracked delivery*.

The certificate issued by **TECH Technological University** will reflect the qualification obtained in the Professional Master's Degree, and meets the requirements commonly demanded by labor exchanges, competitive examinations and professional career evaluation committees.

Title: Professional Master's Degree in Oral Medicine Official N° of Hours: 1,500 h.



*Apostille Convention. In the event that the student wishes to have their paper certificate issued with an apostille, TECH EDUCATION will make the necessary arrangements to obtain it, at an additional cost.

technological university

Professional Master's Degree Oral Medicine

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online

Professional Master's Degree Oral Medicine

