



Hybrid Professional Master's Degree

Home Hospitalization

Modality: Hybrid (Online + Clinical Internship)

Duration: 12 months

Certificate: TECH Global University

60 + 5 créditos ECTS

 $We bsite: {\color{blue} {\bf www.techtitute.com/us/medicine/hybrid-professional-master-degree-home-hospitalization} \\$

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Following the pandemic, home hospitalization has positioned itself as one of the key units for shortening stays, guaranteeing continuity of care and avoiding admissions, therefore relieving the hospital's own burden. Healthcare professionals from areas such as nursing, psychology, or physiotherapy usually integrate these work teams, resulting in a heterogeneous group of multidisciplinary specialists.

This distinctive feature raises the level of demand on the area's own specialists, since the complexity involved in following and dealing with a given clinical case is compounded by the possible difficulties of Home Hospitalization, such as infections at home, subsidiary syndromes, or pain management outside the clinical center.

For this reason, TECH has created a complete program that delves into all these issues, giving the specialist the opportunity to update and catch up on the latest developments. An exceptional teaching staff of highly qualified professionals in Home Hospitalization has elaborated all the present content. In this way, the student will deepen in topics such as serotherapy and EV medication, home enteral nutrition, comprehensive assessment in palliative care, and other issues of special urgency.

In addition to all this teaching, which is carried out without the pressure of in-person classes or fixed schedules, there is also a practical stay in a first-class clinical center. In this way, the student will become part of a dynamic team of Home Hospitalization, being able to check on-site all the novelties and work methodology previously reviewed. You will be accompanied at all times by a designated tutor, who will guide you through the entire process so that you can get the most out of your 3 weeks of actual practice.

For all these reasons, this Hybrid Professional Master's Degree in Home Hospitalization is presented as a privileged educational alternative for all specialists in the area, as it allows them to access in a comfortable and flexible way to both the most current theory and the most rigorous clinical practice.

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

- Development of more than 100 case studies presented by medical professionals, experts in intensive care and university professors with extensive experience in Home Hospitalization
- Its graphic, schematic, and eminently practical contents provide essential information on those disciplines that are indispensable for professional practice
- Follow-up and monitoring of patients in Home Hospitalization units
- Preparation and organization of the clinical history of a home hospitalization unit
- Detection of the pathologies and casuistry of a home admission, acting accordingly
- Necessary differentiation in Home Hospitalization between oncologic, pediatric, and geriatric patients
- All this will be complemented by 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
- In addition, you will be able to do an internship in one of the best companies



Access the Virtual Campus 24 hours a day, without the pressure of a fixed schedule or in-person classes"



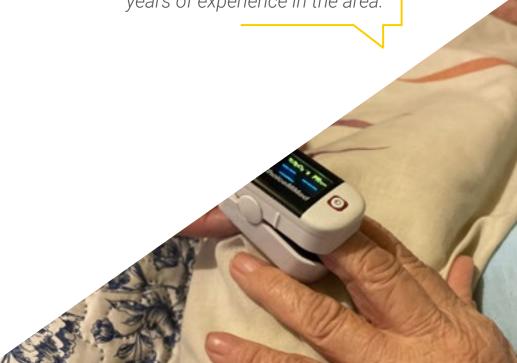
Incorporate into your own daily practice the most advanced work methodology, which you will acquire during 3 intense weeks of stay"

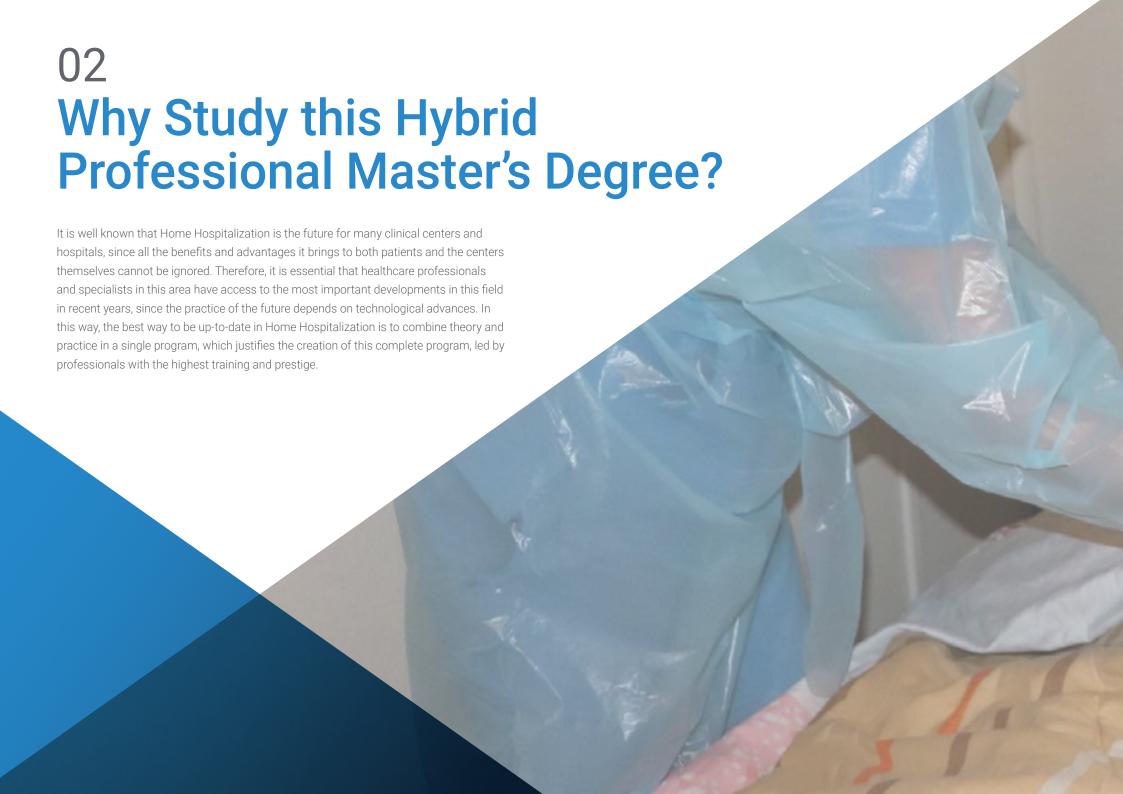
In this proposal for a Master's Degree, of a professionalizing nature and hybrid learning modality, the program is aimed at updating specialists who perform their functions in Home Hospitalization units. The contents are based on the latest scientific evidence, and oriented in an educational way to integrate theoretical knowledge into practice, and the theoretical-practical elements will facilitate knowledge update and decision-making in patient management.

Thanks to their multimedia content developed with the latest educational technology, they will allow the La medical professional to learn in a contextual and situated learning environment, i.e., a simulated environment that will provide immersive learning programmed to train in real situations. The design of this program is focused on Problem-Based Learning, through which the student will have to try to solve the different professional practice situations that will arise throughout the program. For this purpose, the students will be assisted by an innovative interactive video system created by renowned and experienced experts.

You will be able to download all the available content in the virtual campus from any device with an Internet connection.

You will update your knowledge in Home Hospitalization based on the approaches of professionals with years of experience in the area.







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1. Updating from the Latest Technology Available

The Students have access to the most up-to-date apparatus for monitoring, organization and clinical management possible. This is especially relevant since the clinical performance of the unit itself depends to a great extent on these equipment and means, and it is therefore essential to know the most advanced technology available.

2. Gaining In-depth Knowledge from the Experience of Top Specialists

A team of advanced professionals and specialists in Home Hospitalization will accompany the students throughout their practical stay, ensuring that they can make the most of their own experience by caring for patients with different pathologies and clinical conditions. In addition, the program's teaching staff is made up of distinguished specialists in the field, which also ensures the quality of the theoretical section itself.

3. Entering First-Class Clinical Environments

All the centers chosen by TECH for its practical programs meet the highest standards of clinical and care quality. In this way, students not only learn about the latest developments in Home Hospitalization, but also delve into the keys to the day-to-day work of a comprehensive and advanced team, leading in their own field.





Why Study this Hybrid Professional | 11 tech Master's Degree?

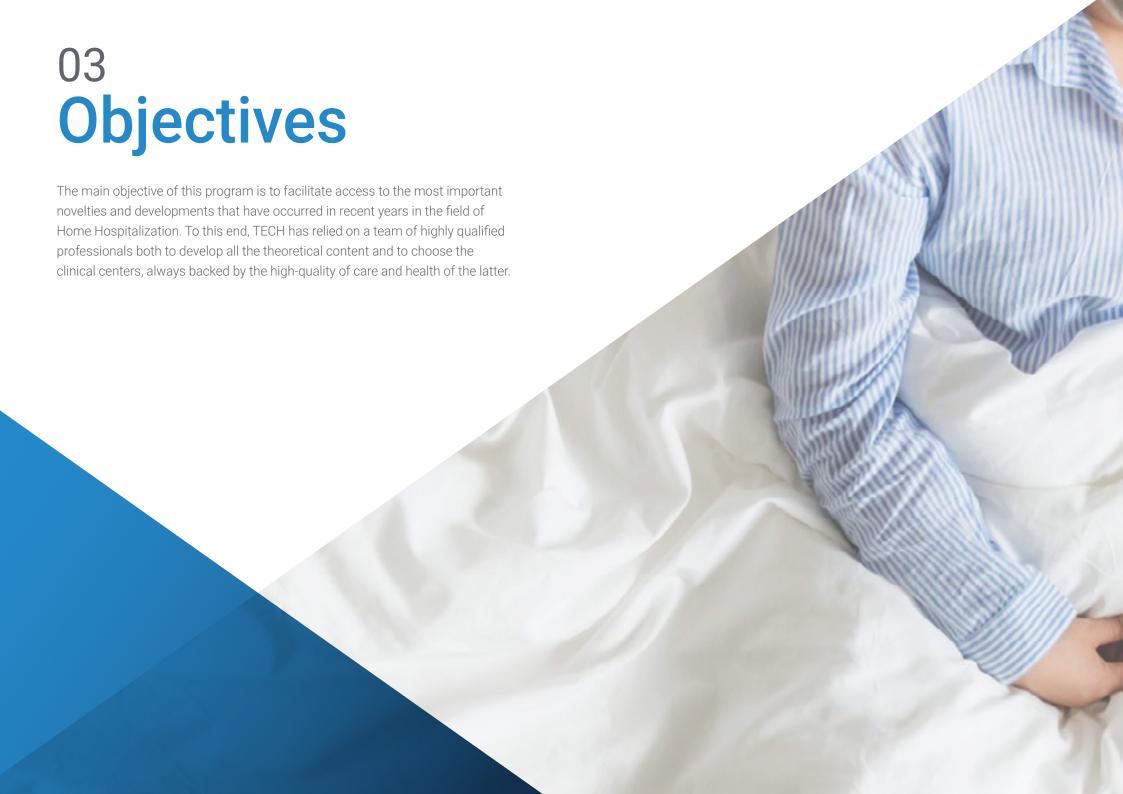
4. Combining the Best Theory with State-of-the-Art Practice

Thanks to the methodology developed by TECH for this Hybrid Professional Master's Degree, the specialist will combine the most current theoretical postulates in Home Hospitalization with the most advanced clinical practice in the field, therefore providing a comprehensive and complete educational experience for the student.

5. Expanding the Boundaries of Knowledge

TECH offers the possibility of carrying out this Hybrid Professional Master's Degree not only in centers of national importance, but also internationally. This way, the specialist will be able to expand their frontiers and catch up with the best professionals, who practice in first class centers and in different continents. A unique opportunity that only TECH, the largest online university in the world, could offer.







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General Objective

• The student will find, in the first instance, a careful and detailed syllabus, divided into modules that cover the most important and relevant areas of Home Hospitalization. In this way, you will be able to improve your skills based on the evaluation, admission, diagnosis, and treatment criteria of the leading home hospitalization units in the field. All this will be very useful in the second part of the program, where you will apply all the theory during the 3 weeks of practical stay in the chosen clinical center



You will surpass even your most demanding expectations thanks demanding expectations thanks to the care and detail of the entire syllabus"





Module 1. Organization of Home Hospitalization

- Develop skills for the implementation of care plans for the prevention of these pathologies
- Assess and interpret the characteristics and special conditions of patients with hospital needs, but for application in their home
- Provide students with advanced, in-depth, up-to-date and multidisciplinary information that allows them to comprehensively approach the process of health and illness in the home

Module 2. General Aspects. Research and Teaching

- Assess patient for admission or transfer to primary care
- Manage discharges, transfers and hospital readmissions
- Manage cases according to medical history and legality

Module 3. Care for Different Specific Types of Patients

- Identify needs according to patient age
- Manage complex chronic patients
- Address psychiatric patients by managing the particularities of mental health monitoring at home

Module 4. Management of Subsidiary Syndromes at Home

- Integrate knowledge of admission and exclusion criteria
- Manage the main symptoms and complications in post-surgical patients
- Diagnose and apply the adjusted treatment of diseases with their own characteristics at home

Module 5. Management of Infections at Home Criteria for Admission and Exclusion, Management, Discharge Criteria

- Manage infectious diseases in the home setting
- Integrate knowledge of common types of diseases
- Categorize admission and exclusion criteria for patient referral

Module 6. Palliative Care in Oncological Patients

- Highlight the importance of morbidity and mortality due to multiresistant infections in complex patients with special needs
- Explain the most common pathogenic mechanisms and neoplasms associated with advanced palliative needs
- Study the current pathophysiological elements between non-transmissible chronic diseases and infections
- Gain an in-depth understanding of the most innovative clinical, diagnostic and therapeutic elements of diseases at home

Module 7. Pain Management in Home Hospitalization

- Know the concept of pain and identify other associated factors involved in pain
- Determine types of pain according to physiopathology
- Recognize the main clinical syndromes with possibilities of treatment and follow-up from the Home Hospitalization

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Module 8. Nutrition in Home Hospitalization

- Review basic concepts in nutrition for the hospitalized patient at home
- Diagnose, manage and nourish geriatric patients
- Care based on the nursing care plan and apply health education to the patient and the family

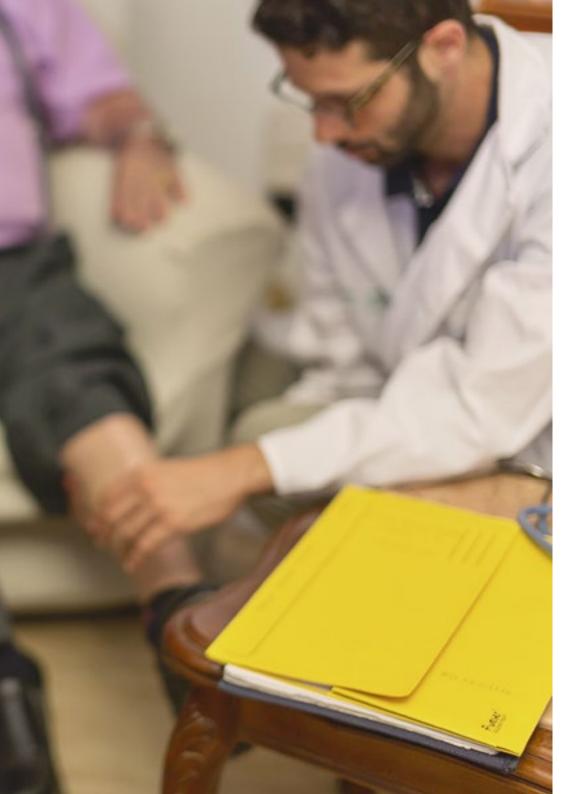
Module 9. Special Treatments

- Explain the management of complex chronic patients from the home, in order to avoid exacerbations and reduce the severity
- Identify the important role of the management figure in cases both in hospital as well as in the community
- Highlight the need to consider vaccination in patients with special needs in order to reduce the burden of disease

Module 10. Pediatric Patients in Home Hospitalization

- Provide the necessary coping skills for the managing hospitalization stress in early stages of life
- Complete the specific home assessment involving the family
- Process procedures, classification and specific considerations for the pediatric patient





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Module 11. Preventative Medicine in Home Hospitalization

- Justify the importance of chronic disease management in times of stability for the reduction of morbidity and mortality, emergency room visits and conventional admissions
- Add knowledge about germs and measures against them at home
- Implement different treatments according to therapeutic suitability

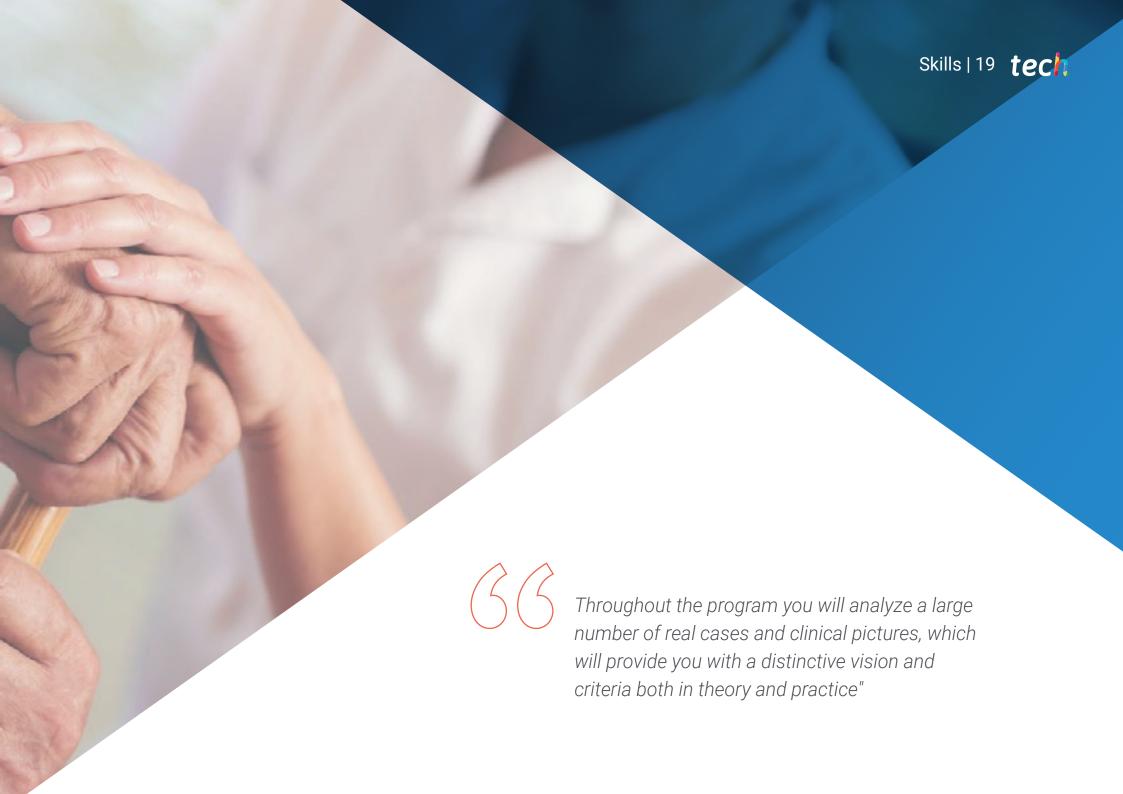
Module 12. Therapeutic Techniques

- Highlighting palliative needs as one of the fields with the greatest progression in home hospitalization
- Develop the concept of dignified death, nursing care and accompaniment in the last moments of life
- Integrate knowledge of the latest therapeutic techniques in the field of home nursing

Module 13. Diagnostic Techniques

- Provide training and practical theoretical improvement that will enable a reliable clinical diagnosis supported by the efficient use of diagnostic methods to indicate an effective integral treatment
- Provide theoretical content on the latest techniques in hospital home treatment



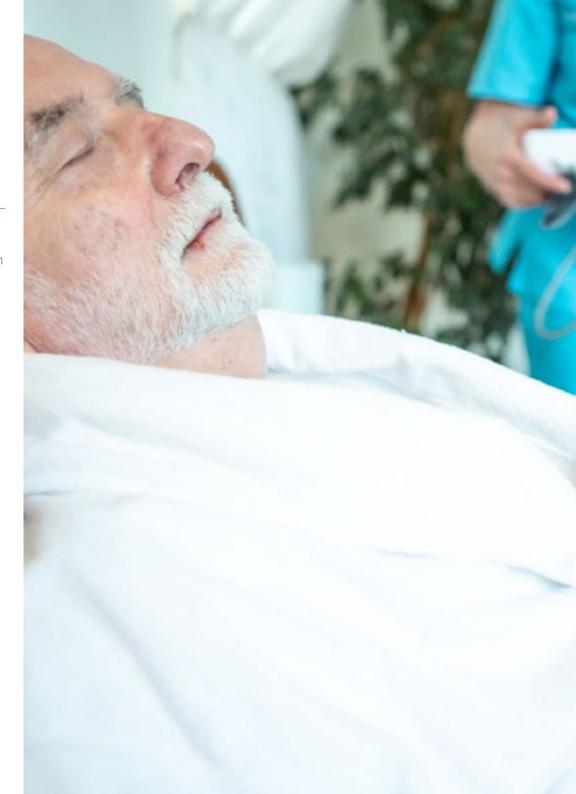


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General Skills

- Apply epidemiological and clinical methods in collective or individual care to solve the main health problems related to health at home
- Conduct critical reading of the scientific literature on these diseases and at the same time have the tools to communicate research results
- Collect, process and analyze in very diverse clinical and epidemiological contexts, any scientific information for diagnostic and therapeutic decision-making in the field of home hospitalization specifically and health care in general
- Develop learning as one of the most important skills for any professional nowadays, who is obliged to constantly train and improve their professional skills due to the dizzying and accelerated process of scientific knowledge production
- Increase diagnostic and therapeutic capabilities for dealing with complex chronic diseases and the general health care of patients in their homes, through the in-depth study of the epidemiological, clinical, pathophysiological, diagnostic, and therapeutic elements of these diseases
- Hone skills to manage, advise or lead multidisciplinary teams to care for complex patients in communities or individual patients, as well as scientific research teams
- Develop skills for self-improvement, in addition to being able to provide training and professional improvement activities due to the high level of scientific and professional preparation acquired with this program
- Educate the population in the field of complex chronic diseases in order to acquire and develop a culture of prevention based on healthy lifestyles





- Understand the biological, epidemiological and social determiners which make chronic diseases the most prolific diseases in La society and their impact on the rates of morbidity and mortality
- Identify and analyze the latest scientific information in home-based care, in order to design plans and programs to control it
- Apply existing control measures to prevent the exacerbation of these diseases and strain on emergency services
- Evaluate the epidemiological aspects related to chronic diseases that will permit implementation actions for their control in the community, in real and/or simulated conditions
- Timely diagnosis, based on clinical manifestations, of the most frequent or new diseases in order to ensure their correct treatment, rehabilitation and control
- Justify the importance of vaccination as an important public health measure for the control of flare-ups of diseases or the appearance of new diseases relating to those preexisting ones
- Identify the occupational, social and environmental risk factors, that favor the development of these diseases in the community
- Identify the main clinical syndromes susceptible to home-based control and treatment
- Apply prevention and control measures to reduce morbidity and mortality in chronic diseases
- Master the control of symptoms in diseases with palliative care needs
- Master knowledge of the correct doctor-patient relationship, bringing humanization into the process

- Educate the community on the prevention of flare-ups and how to control them
- Identify the fundamental aspects of the pathogenesis and the main clinical features of the diseases studied
- Halt the progression of antibiotic resistance, based on reasoned treatment and supported by the best scientific evidence
- Develop skills for practising diagnostic and therapeutic techniques in the home



Get up-to-date in the mastery of the technological means and diagnostic criteria with greater preponderance in the Home Hospitalization units"





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Management



Dr. Lafuente Sanchis, Manuel Pablo

- Head of the Home Hospitalization and Palliative Care Service at La Ribera University Hospital, Valencia
- Specialist in Family and Community Medicine at the Virgen de los Lirios Hospital, Alcoy
- Clinical Simulation Instructor, Catholic University of Murcia
- University Professor in Nursing Studies
- Expert in Palliative Care, International University of La Rioja
- University Expert in University Teaching from the Catholic University of Valencia
- Degree in Medicine and Surgery from the University of Valencia
- Member of Spanish Society of Home Hospitalization, Spanish Society of Clinical Simulation

Professors

Ms. Amoros Cantero, Aurora

- Nurse at the Preventive Medicine Service of La Ribera University Hospital
- Nurse at the Neurosurgery, Education and Development Foundation (NED)
- University Diploma in Nursing from the University of Valencia

Ms. Alcover Pons, Marta

- Nurse Specialist in Preventive Medicine
- Nurse of the Preventive Medicine Service of La Ribera University Hospital in Valencia
- University Diploma in Nursing from the University of Valencia

Dr. Ciancotti Oliver, Lucía

- Attending Physician in the Preventative Medicine Unit at the Ribera University Hospital, Valencia
- Technician of Health Promotion and Prevention of the stages of life
- Specialist in Family and Community Medicine at the Lluis Alcanyis Hospital, Valencia
- Specialist in Preventive Medicine, Public Health and Hygiene Dr. Peset University Hospital, Valencia
- Degree in Medicine and Surgery from the University of Valencia
- Master's Degree in Public Health and Healthcare Management, University of Valencia
- Is a member of Spanish Society of Preventive Medicine, Public Health and Hygiene



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Dr. Flor Bustos, Loida

- Specialist in Family and Community Medicine
- Assistant Physician of the Family and Community Medicine Area of the Manises Hospital
- Specialist Physician of the Home Hospitalization and Palliative Care Unit at La Ribera University Hospital, Valencia
- PhD in Medicine and Surgery from the University of Valencia

Mr. García-Noblejas Julià, Pablo

- Primary Care Nurse with Expertise in Cardiovascular Risk
- Nurse of the Home Hospitalization and Palliative Care Unit of La Ribera University Hospital
- Master's Degree in Hospital Management, Catholic University of Valencia
- Degree in Nursing from the University of Valencia
- Member of the Valencian Primary Care Nursing Society

Dr. Jara Calabuig, Irina

- · Alzira Health Care Physician at La Bassa Health Center
- Physician at La Fàbrica Health Center
- Physician at the Muro d' Alcoi Health Center Auxiliary Clinics
- Physician at the Banyeres de Mariola Health Center
- Teaching collaborator in continuous care at La Fàbrica Health Center (Alcoy), Cocentaina and Carlet
- Specialist in Family and Community Medicine at the Virgen de Los Lirios Hospital
- $\bullet\,$ Degree in Medicine and Surgery from the University of Reus , Spain
- Master's Degree in Palliative Care from the University of Valladolid
- Member of Palliative Care Working Group SEMERGEN

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Dr. Martín Marco, Antonio

- Internal Medicine Specialist at Arnau de Vilanova Hospital, Valencia
- Attending Physician in the Home Hospitalization and Palliative Care Unit
- Head of Teaching and Research in the Palliative Care in Unit
- Master's Degree in Emergency Medical Care
- Master's Degree in Emergency Medicine and Surgery
- Degree in Medicine and Surgery from the University of Zaragoza
- Member of the Spanish Society of Medical Oncology, Spanish Society of Internal Medicine

Ms. Marqués Aguilar, Elvira

- Nursing Supervisor, Home Hospitalization and Palliative Care Unit
- University Diploma in Nursing at the University of Valencia
- Master's Degree in School Health
- · Case manager for complex chronic patients, Valencia School of Health Studies

Dr. Santander López, Jorge

- Specialist in Home Hospitalization and Palliative Care
- Assistant Physician of the Home Hospitalization and Palliative Care Unit at La Fe Hospital, Valencia, Spain
- Degree in Medicine and Surgery from the University of Mendoza, Argentina
- Specialist in Family and Community Medicine at La Fe University Hospital of Valencia
- University Expert in Pain

Ms. Sanchis Aguilar, Paula

- Nurse in the Home Hospitalization and Palliative Care Unit at La Ribera University Hospital, Valencia
- Case Manager of Complex Chronic Patients at the Valencian School of Health Studies (EVES)
- University Diploma in Nursing





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Dr. Tarraso Gómez, María Luisa

- Specialist in Family and Community Medicine
- Attending Physician in the Home Hospitalization and Palliative Care Units at La Ribera University Hospital, Valencia
- Assistant Physician in the Pain Unit at La Ribera University Hospital, Valencia
- Master's Degree in Palliative Care from the University of Valladolid
- Member of the Spanish Society of Palliative Care

Dr. Torrijos Pastor, Antonio

- Attending Physician of Home Hospitalization and Palliative Care Unit
- Specialist in Family and Community Medicine at the Marina Baixa Hospital, Alicante
- Degree in Medicine and Surgery from the University of Cadiz
- University Master's Degree in Palliative Care from the University of Valladolid

Ms. Vila Herranz, Mireia

- Nurse in the Home Hospitalization and Palliative Care Unit
- Professor of Palliative Care at the Valencian School of Health Studies (EVES)
- University Diploma in Nursing at the Catholic University of Valencia
- Training in Terminal Illness and Palliative Care for Nursing

Dr. Bou Monterde, Ricardo

- Medical Epidemiologist specialized in Preventive Medicine and Public Health
- Head of Epidemiology and Preventive Medicine at La Ribera University Hospital, Valencia
- Epidemiologist at the Department of Health of Catalonia
- Doctor in Medicine and Surgery from the University of Catalonia
- Master's Degree in Clinical Trials from the School of Hygiene and Tropical Medicine, University of London





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Module 1. Organization of Home Hospitalization

- 1.1. Introduction and Justification
 - 1.1.1. Introduction
 - 1.1.2. Justification
- 1.2. History of Home Hospitalization
 - 1.2.1. Historical Recap
 - 1.2.2. Reference Units
 - 1.2.3. The Present and Future of Home Hospitalization
- 1.3. Organizational Models
 - 1.3.1. Hospital-Based Home Care
 - 1.3.2. Care Based on Primary Care
 - 1.3.3. Support Service at Home
- 1.4. Differences Between HH and Home Care from Primary Care and Other Models of Home Care (HDOM)
 - 1.4.1. HH
 - 1.4.2. Home Care Models
- 1.5. Evidence-Based Medicine
 - 1.5.1. Advantages and Disadvantages of the HaD Model in Relation to Conventional Hospitalization
- 1.6 Portfolio of services
 - 1.6.1. Early Discharge Scheme
 - 1.6.2. High-Tech Scheme
 - 1.6.3. Support Function Scheme
- 1.7. General Criteria for Inclusion and Exclusion
 - 1.7.1. Wilfulness
 - 1.7.2. Social criteria
 - 1.7.3. Geographical Criteria
 - 1.7.4. Medical Criteria
- 1.8. Integration with Different Care Levels
 - 1.8.1. Primary Care
 - 1.8.2. Emergencies
 - 1.8.3. Conventional Hospitalization
 - 1.8.4. Social-Health Centers
 - 1.8.5. Residences
- 1.9. Structure and Resources of HH
 - 1.9.1. Structure of HH
 - 1.9.2. Resources in HH

Module 2. General Aspects. Research and Teaching in HH

- 2.1. Process Management
 - 2.1.1. Pre-Admission Assessment
 - 2.1.2. Admission
 - 2.1.3. Discharge and Transfer to Primary Care
 - 2.1.4. Re-admission
 - 2.1.5. Case Management
- 2.2. Electronic Medical History, Peculiarities of HH (mobility and accessability)
 - 2.2.1. Telemedicine
- 2.3. Quality Indicators
 - 2.3.1. Management Indicators
 - 2.3.2. Clincial Indicators
- 2.4. Research in HH
 - 2.4.1. Future and Present Lines of Work in the HaD
- 2.5. Undergraduate and Postgraduate Courses Teaching
 - 2.5.1. Undergraduate Teaching
 - 2.5.2. Postgraduate Teaching
- 2.6. Future Perspectives
 - 2.6.1. Future Challenges
- 2.7. Telemedicine
 - 2.7.1. Concept and Considerations
- 2.8. Case Management
 - 2.8.1. Nursing Management of Hospital Cases
 - 2.8.2. Nursing Management of Community Cases
 - 2.8.3. Management of Medicine-Based Cases

Module 3. Care for Different Specific Types of Patients

- 3.1. Fragile Geriatric Patient
 - 3.1.1. Peculiarities in a Geriatric Patient
 - 3.1.2. Relationship Model with Assisted Care Residences
 - 3.1.3. Treatment of Geriatris Patients
- 3.2. Complex Chronic Patient
 - 3.2.1. Definition
 - 3.2.2. Management Models for Complex Chronic Patients
 - 3.2.3. Terminal Criteria
- 3.3. Palliative Patient
 - 3.3.1. Differences Between an Oncologic or Non-Oncologic Palliative Patient
 - 3.3.2. Terminal Criteria
 - 3.3.3. Management Models for Palliative Patients
- 3.4. Polyfrequency Patients
 - 3.4.1. Case Management
- 3.5. Home-Based Antibiotic Therapy
 - 3.5.1. General Aspects
 - 3.5.2. Home Intravenous Antibiotic Therapy
- 3.6. Psychiatric Patient
 - 3.6.1. Peculiarities of Home-Based Mental Health Monitoring
- 3.7 Pediatric Patient
 - 3.7.1. Considerations in a Pediatric Patient

Module 4. Management of Subsidiary Syndromes at Home

- 4.1. Heart Failure
 - 4.1.1. Criteria for Admission and Exclusion
 - 4.1.2. Management of Treatment and Symptoms in the Home
 - 4.1.3. Criteria for Discharge
- 4.2. COPD
 - 4.2.1. Criteria for Admission and Exclusion
 - 4.2.2. Management of Treatment and Symptoms in the Home
- 4.3. Caring for a Patient Post-Surgery
 - 4.3.1. Criteria for Admission and Exclusion
 - 4.3.2. Management of the Main Symptoms and Complications in Post-Surgery Patients
- 4.4. Neurological Patient
 - 4.4.1. Dementia
 - 4.4.2. Multiple Sclerosis
 - 4.4.3. ALS
- 4.5. DVT and PE
 - 4.5.1. Home-Based Diagnosis
 - 4.5.2. Treatment Adjusted to the Home
 - 4.5.3. Admission Criteria in Conventional Hospitalization
- 4.6. Home-Based Rehabilitation Loss of Functionality Fractures
 - 4.6.1. Scales of Functionality
 - 4.6.2. Possibilities for Home-Based Rehabilitation
- 4.7. Nephrourological Syndromes
 - 4.7.1. Pyelonephritis
 - 4.7.2. Urinary Tract Infections
 - 4.7.3. Prostate Disease
 - 4.7.4. Acute and Chronic Kidney Disease
- 4.8. Patient with Digestive Diseases
 - 4.8.1. Cirrhosis
 - 4.8.2. Hepatic Encephalopathy
 - 4.8.3. Small Intestine

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Module 5. Management of Infections at Home Criteria for Admission and Exclusion, Management, Discharge Criteria

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- 5.1.1. Diagnosis
- 5.1.2. Home-Based Management
- 5.1.3. Bronchoaspirations Prevention and Management
- 5.2. Infections of the Urinary Tract
 - 5.2.1. Pyelonephritis
 - 5.2.2. Urinary Tract Infections
 - 5.2.3. Prostatitis
- 5.3. Intra-Abdominal Infections
 - 5.3.1. Liver Abscesses
 - 5.3.2. Post-Surgery Abscesses
 - 5.3.3. Cholecystitis and Cholangitis
 - 5.3.4. Diverticulitis
 - 5.3.5. Infectious Pancreatitis
- 5.4. Abscesses
 - 5.4.1. General Aspects
 - 5.4.2. Treatment
 - 5.4.3. Types of Cure
- 5.5. Soft Tissue Infections
 - 5.5.1. Concept
 - 5.5.2. Classification
- 5.6. Infection of Surgical Wounds
 - 5.6.1. Concept
 - 5.6.2. Classification
- 5.7. Osteomyelitis
 - 5.7.1. Concept
 - 5.7.2. Classification
- 5.8. Endocarditis
 - 5.8.1. Concept
 - 5.8.2. Classification





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- 5.9. Prosthesis and Intra-Vascular Device Infections
 - 5.9.1. Concept
 - 5.9.2. Classification
- 5.10. Febrile Neutropenia
 - 5.10.1. Diagnosis
 - 5.10.2. Treatment

Module 6. Palliative Care in Oncological Patients

- 6.1. Comprehensive Assessment in Palliative Care
 - 6.1.1. Medical History Model in Palliative Care
 - 6.1.2. Anamnesis in Palliative Care
 - 6.1.3. The Importance of Family and Social Circumstances in a Comprehensive Assessment
- 6.2. Assessment Scales in Palliative Care
 - 6.2.1. ECOG
 - 6.2.2. Barthel
 - 6.2.3. Karnofsky
 - 6.2.4. VAS
 - 6.2.5. Edmonton Symptom Assessment Scale
 - 6.2.6. Gijón Scale
 - 6.2.7. Family APGAR
 - 6.2.8. Pfeiffer
 - 6.2.9. Nutritional Assessment
- 6.3. Continuous Care Models in Palliative Oncology Patients
 - 6.3.1. Palliative Patients
 - 6.3.1.1. Models
- 6.4. Pain Management in Palliative Care
 - 6.4.1. Analgesic Ladder
 - 6.4.2. First Step
 - 6.4.3. Second Step
 - 6.4.4. Third Step

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	6.4.5.	Coadjuvants		
6.5.	Control of Dyspnea			
	6.5.1.	Diagnosis		
	6.5.2.	Etiology		
	6.5.3.	Home-Based Management		
6.6.	Delirium Control			
	6.6.1.	Diagnosis		
	6.6.2.	Etiology		
	6.6.3.	Home-Based Management		
6.7.	Nausea and Vomiting Control			
	6.7.1.	Diagnosis		
	6.7.2.	Etiology		
	6.7.3.	Home-Based Management		
6.8.	Alterations in Intestinal Rhythm Diarrhea and Constipation			
	6.8.1.	Diagnosis		
	6.8.2.	Etiology		
	6.8.3.	Home-Based Management		
6.9.	Anorexia-Cachexia			
	6.9.1.	Diagnosis		
	6.9.2.	Etiology		
	6.9.3.	Home-Based Management		
6.10.	Anxiety-Insomnia			
	6.10.1.	Diagnosis		
	6.10.2.	Etiology		
	6.10.3.	Home-Based Management		
6.11.	Situation in a Patient's Last Days and Palliative Sedation			
	6.11.1.	Terminal Criteria		
	6.11.2.	Palliative Sedation vs. Passive Euthanasia vs. Active Euthanasia		
	6.11.3.	Home-Based Management		
6.12.	Grief and Family Care			
	6.12.1.	Grief		

6.12.2. Family Circle 6.13. Spanish and European Legality on Palliative Care 6.13.1. Legal Aspects of Palliative Care in Europe 6.13.2. Legal Aspects of Palliative Care in Spain 6.14. Anticipated Wishes 6.14.1. Definition 6.14.2. Most Important Asepcts to Take Into Account Module 7. Pain Management in Home Hospitalization 7.1. Pain Management 7.1.1. General Aspects 7.1.2. Considerations in the Home 7.2. Scales and Assessment of Patient in Pain 7.2.1. Classification 7.2.2. Patient Assessment 7.3. First-Line Analgesic Treatment 7.3.1. Treatment 7.3.2. Procedures in the Home 7.4. 2nd Line Analgesic Treatment 7.4.1. Treatment

7.4.2. Procedures in the Home7.5. Third Step Treatment Opioids

7.5.2. Procedures in the Home

7.7. Interventional Pain Management

7.8.1. Current Spanish Legal Framework

7.8. Current Legality in the Management of Opioid Analgesics

7.5.1. Treatment

7.6. Coadjuvants7.6.1. Classification7.6.2. Procedures

7.7.1. Interconsultation7.7.2. Procedures in the Home

Module 8. Nutrition in Home Hospitalization

- 8.1. Nutritional Assessment Scales
 - 8.1.1. MUST
 - 8.1.2. MNA
 - 8.1.3. Laboratory Parameters
 - 8.1.4. Clinical Parameters
- 8.2. Dysphagia
 - 8.2.1. Diagnosis
 - 8.2.2. Etiology
 - 8.2.3. Home-Based Management
- 8.3. Oncology Patients
 - 8.3.1. Nutritional Needs in Oncology Patients
 - 8.3.2. Peculiarities
- 8.4. Geriatric Patient
 - 8.4.1. Nutritional Needs in Geriatric Patients
 - 8.4.2. Peculiarities
- 8.5. Patient with Infectious Diseases
 - 8.5.1 Nutritional Needs in Infectious Patients
 - 8.5.2 Peculiarities
- 8.6. Enteral Nutrition at Home
 - 8.6.1. Types of Nutrition
 - 8.6.2. Normocaloric-Normoprotein
 - 8.6.3. Hyperproteic-Hypercaloric
 - 8.6.4. Hyperproteic-Normocaloric
 - 8.6.5. Special Supplementation
- 8.7. Parenteral Home Nutrition
 - 8.7.1. Types of Nutrition
 - 8.7.2. Probes

Module 9. Special Treatments

- 9.1. Serotherapy and EV Medication
 - 9.1.1. Peripheral Routes
 - 9.1.2. Central Routes
 - 9.1.3. Drug Combinations
- 9.2. Administration of Blood Products
 - 9.2.1. Red blood Cell Concentrates
 - 9.2.2. Platelet Pool
 - 9.2.3. Plasma
 - 9.2.4. Protocols for Transfusion of Blood Derivatives at Home
- 9.3. Subcutaneous Medication
 - 9.3.1. Elastomeric Infusers
 - 9.3.2. Treatment with the Possibility of Subcutaneous Administration
 - 9.3.3. Drug Combinations
- 9.4. Chemotherapy at Home
 - 9.4.1 Classification
 - 9.4.2. Considerations
- 9.5. Intravenous Treatment on Home Perfusion Pump
 - 9.5.1 Classification
 - 9.5.2. Considerations
- 9.6. Bladder and Digestive Probes
 - 9.6.1. Home Replacement Protocols
 - 9.6.2 Technical Videos
- 9.7. PEG Replacement
 - 9.7.1. Home Replacement Protocols
 - 9.7.2. Technical Videos
- 9.8. Tracheostomy Replacement
 - 9.8.1. Home Replacement Protocols
 - 9.8.2. Technical Videos
- 9.9. Obtaining and Transporting Samples: Analytical, Cultures, etc

tech 36 | Educational Plan

Module 10. Pediatric Patient in Home Hospitalization

- 10.1. Introduction
 - 10.1.1. Pediatric Patient Particularities
- 10.2. Specific Pediatric Assessment at Home
 - 10.2.1. Considerations
- 10.3. Pediatric Oncology
- 10.4. Infections in Pediatrics
 - 10.4.1. Classification
 - 10.4.2. Procedures
- 10.5. Congenital Diseases
 - 10.5.1. Classification
 - 10.5.2. Considerations
- 10.6. Legality in Pediatric Patient Care
 - 10.6.1. Spanish Legal Framework
 - 10.6.2. Considerations

Module 11. Preventative Medicine in Home Hospitalization

- 11.1. Preventive Medicine
 - 11.1.1. Concepts and Overviews
- 11.2. Hygiene
 - 11.2.1. Considerations
 - 11.2.2. Procedures in the Home
- 11.3. Colonization in Infection by Multiresistant Germs Home Measurements
 - 11.3.1. Colonization
 - 11.3.2. Multiresistant Germs
 - 11.3.3. Home Measurements
- 11.4. Adequacy of Antibiotic Treatment at Home
 - 11.4.1. Types of Treatment
 - 11.4.2. Therapeutic Suitability
- 11.5. Vaccination in Special Patients
 - 11.5.1. Vaccines
 - 11.5.2. Special Patients



Module 12. Therapeutic Techniques

12.1. Paracentesis

12.1.1. Procedure

12.1.2. Home Paracentesis

12.2. Thoracentesis

12.2.1. Procedure

12.2.2. Home Thoracentesis

12.3. Arthrocentesis

12.3.1. Procedure

12.3.2. Home Arthrocentesis

12.4. Oxygen Therapy

12.4.1. Procedure

12.4.2. Home Oxygen Therapy

12.5. Aerosol Therapy

12.5.1. Procedure

12.5.2. Home Aerosol Therapy

12.6. Mechanical Ventilation

12.6.1. Procedure

12.6.2. Home Mechanical Ventilation

Module 13. Diagnostic Techniques

13.1. ECG

13.1.1. Procedure

13.1.2. ECG at Home

13.2. Ultrasound

13.2.1. Procedure

13.2.2. Ultrasound at Home

13.3. Pulse Oximetry

13.3.1. Procedure

13.3.2. Pusioximetry at Home

13.4. Analysis

13.4.1. Procedure

13.4.2. Blood Analysis at Home

13.5. Cultures

13.5.1. Procedure

13.5.2. Blood Analysis at Home

13.6. Scales (Functional, Cognitive, Nutritional Assessment, etc.)

13.6.1. Procedure

13.6.2. Classification



You will gain access to an essential reference guide in Home Hospitalization, which will be useful even after you complete your program"

07 Clinical Internship

After the theoretical period, where the student deepens in the main advances in Home Hospitalization, there is a practical stay of 3 weeks in a first-level clinical center. In this way, the student will join a real specialized team, being able to see firsthand all the advances and methodologies acquired to obtain a distinctive practical perspective in the daily practice of home hospitalization.

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Choose one of the leading clinical centers in the field of Home Hospitalization, integrating you from the first day in their work group"

tech 40 | Clinical Internship

In this training proposal, completely practical in nature, the activities are aimed at developing and perfecting the skills necessary for the provision of healthcare in areas and conditions that require a high level of qualification, and which are oriented to the specific training for the exercise of the activity, in a safe environment for the patient and a high professional performance.

The practical education will be carried out with the active participation of the student performing the activities and procedures of each area of competence (learning to learn and learning to do), with the accompaniment and guidance of teachers and other fellow trainees who facilitate teamwork and multidisciplinary integration as transversal competencies for the practice of Home Hospitalization (learning to be and learning to relate).



Develop and perfect your skills in the day-to-day work of a demandi the day-to-day work of a demanding, dynamic and intensive Home Hospitalization unit, where you will get the most out of all the theory you have acquired"





Clinical Internship | 41 tech

The procedures described below will be the basis of the practical part of the training, and their implementation will be subject to the center's own availability and workload, the proposed activities being the following:

Module	Practical Activity
Organization and Management of Home Hospitalization	Integrate in the daily tasks of coordination and management of a Home Hospitalization team
	Prepare and organize the clinical history of the Home Hospitalization Unit
	Become familiar with the most advanced organization and telemedicine technology
	Participate in the integral coordination of the patient before the admission decision, assessing indications and contraindications
Subsidiary syndromes of admission to the home and management of infections	Assess the limitations of home hospitalization according to the pathology presented
	Determine the equipment available (palliative, cardiovascular, respiratory, etc.) and the criteria to be taken into account for each case
	Analyze complementary examinations in cases of Home Hospitalization
	Manage special cases of Home Hospitalization such as psychiatric or rehabilitation patients
Infections, pain and palliative care in Home Hospitalization	Manage home kinesic, respiratory and neuromuscular care with the appropriate tools
	Prepare the epicrisis of the patient in the Home Hospitalization unit based on admission criteria, exclusion or possible infections
	Coordinate with the psychopathology and family support services in the care of oncology patients
	Recognize possible complications, adverse effects or interactions of drugs administered in sedation analgesia
Preventive medicine and special treatments in Home Hospitalization	Manage all the apparatus and approach methods related to peripheral and central lines, ostomies and tracheostomy cannula changes
	Practice the use of drains, use of bitubulated flasks and hemosuptores
	Dose the available material in the Home Hospitalization unit based on the circumstances and possibilities of each clinical case
	Practice decolonization of patients admitted to the Home Hospitalization unit after a long period in the ICU



Civil Liability Insurance

This institution's main concern is to guarantee the safety of the trainees and other collaborating agents involved in the internship process at the company. Among the measures dedicated to achieve this is the response to any incident that may occur during the entire teaching-learning process.

To this end, this entity commits to purchasing a civil liability insurance policy to cover any eventuality that may arise during the course of the internship at the center.

This liability policy for interns will have broad coverage and will be taken out prior to the start of the practical training period. That way professionals will not have to worry in case of having to face an unexpected situation and will be covered until the end of the internship program at the center.



General Conditions of the Internship Program

The general terms and conditions of the internship agreement for the program are as follows:

- 1. TUTOR: During the Hybrid Professional Master's Degree, students will be assigned with two tutors who will accompany them throughout the process, answering any doubts and questions that may arise. On the one hand, there will be a professional tutor belonging to the internship center who will have the purpose of guiding and supporting the student at all times. On the other hand, they will also be assigned with an academic tutor whose mission will be to coordinate and help the students during the whole process, solving doubts and facilitating everything they may need. In this way, the student will be accompanied and will be able to discuss any doubts that may arise, both clinical and academic.
- **2. DURATION:** The internship program will have a duration of three continuous weeks, in 8-hour days, 5 days a week. The days of attendance and the schedule will be the responsibility of the center and the professional will be informed well in advance so that they can make the appropriate arrangements.
- 3. ABSENCE: If the students does not show up on the start date of the Hybrid Professional Master's Degree, they will lose the right to it, without the possibility of reimbursement or change of dates. Absence for more than two days from the internship, without justification or a medical reason, will result in the professional's withdrawal from the internship, therefore, automatic termination of the internship. Any problems that may arise during the course of the internship must be urgently reported to the academic tutor.

- **4. CERTIFICATION**: Professionals who pass the Hybrid Professional Master's Degree will receive a certificate accrediting their stay at the center.
- **5. EMPLOYMENT RELATIONSHIP:** the Hybrid Professional Master's Degree shall not constitute an employment relationship of any kind.
- **6. PRIOR EDUCATION:** Some centers may require a certificate of prior education for the Hybrid Professional Master's Degree. In these cases, it will be necessary to submit it to the TECH internship department so that the assignment of the chosen center can be confirmed.
- 7. DOES NOT INCLUDE: The Hybrid Professional Master's Degree will not include any element not described in the present conditions. Therefore, it does not include accommodation, transportation to the city where the internship takes place, visas or any other items not listed

However, students may consult with their academic tutor for any questions or recommendations in this regard. The academic tutor will provide the student with all the necessary information to facilitate the procedures in any case.

Where Can I Do the Clinical Internship?

All the centers chosen by TECH for this program meet the highest quality standards. This is the only way to ensure that the student obtains a reliable update in the most relevant areas of Home Hospitalization, thus guaranteeing access to both the highest quality technical equipment and the most experienced group of people in the field.

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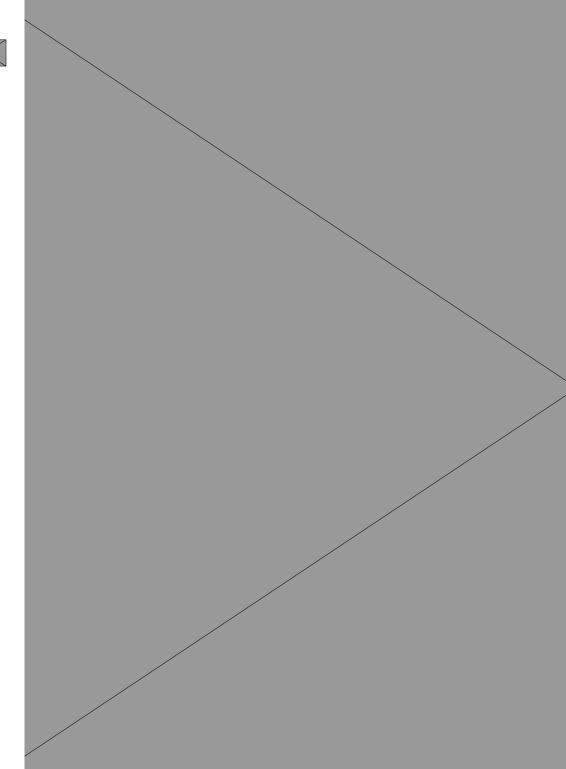
Get involved from day one in the organization and daily management of a modern and advanced Home Hospitalization unit"

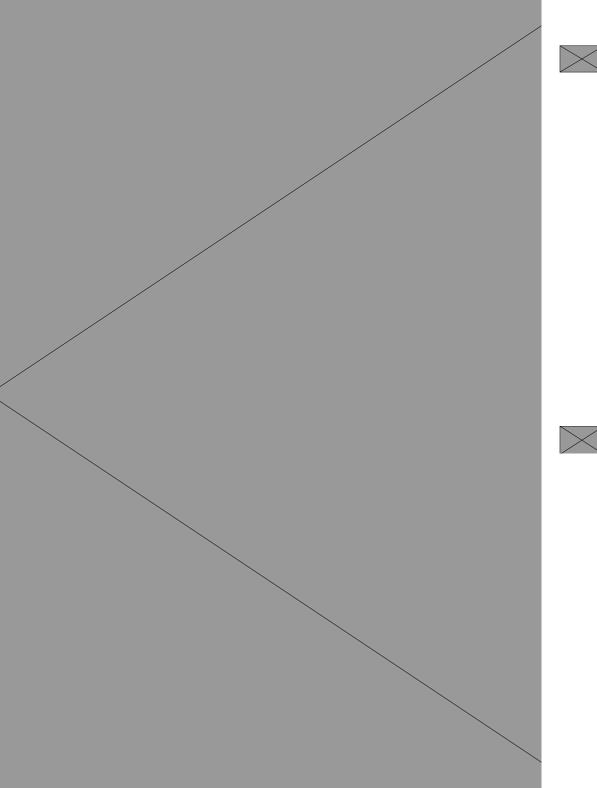
tech 46 | Where Can I Do the Clinical Internship?

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The student will be able to complete the practical part of this Hybrid Professional Master's Degree at the following centers:









Where Can I Do the Clinical Internship? | 47 tech





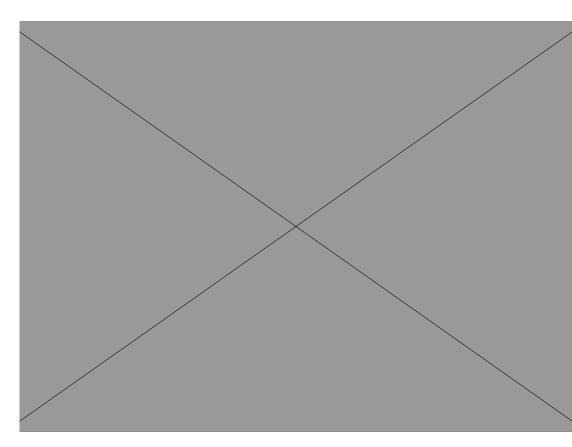


tech 50 | Methodology

At TECH we use the Case Method

What should a professional do in a given situation? 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 physician'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:

- Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that evaluate real situations and the application of 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.





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.

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





Methodology | 53 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, more than 250,000 physicians have been trained with unprecedented success in all clinical specialties regardless of surgical load. 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 specialization, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation to 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 54 | 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.

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.



Surgical Techniques and Procedures on Video

TECH introduces students to the latest techniques, the latest educational advances and to the forefront of current 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.

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.



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 on the usefulness of learning by observing experts.

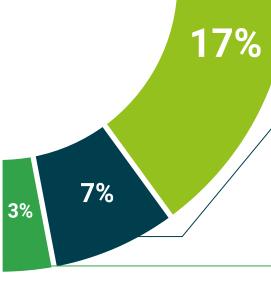
The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



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.









tech 58 | Certificate

This program will allow you to obtain your **Hybrid Professional Master's Degree diploma in Home Hospitalization** endorsed by **TECH Global University**, the world's largest online university.

TECH Global University is an official European University publicly recognized by the Government of Andorra (*official bulletin*). Andorra is part of the European Higher Education Area (EHEA) since 2003. The EHEA is an initiative promoted by the European Union that aims to organize the international training framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of collaborative tools and strengthening its quality assurance mechanisms to enhance collaboration and mobility among students, researchers and academics.

Mr./Ms. ______with identification document ______has successfully passed and obtained the title of:

Hybrid Professional Master's Degree in Home Hospitalization

This is a program of 1.620 hours of duration equivalent to 65 ECTS, with a start date of dd/mm/yyyy and an end date of dd/mm/yyyy.

TECH Global University is a university officially recognized by the Government of Andorra on the 31st of January of 2024, which belongs to the European Higher Education Area (EHEA).

In Andorra la Vella, on the 28th of February of 2024

This **TECH Global University** title is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: Hybrid Professional Master's Degree in Home Hospitalization

Course Modality: Hybrid (Online + Clinical Internship)

Duration: 12 months

Certificate: TECH Global University

Recognition: **60 + 5 ECTS Credits**



^{*}Apostille Convention. In the event that the student wishes to have their paper diploma issued with an apostille, TECH Global University will make the necessary arrangements to obtain it, at an additional cost.

health confidence people
education information tutors
guarantee accreditation teaching
institutions technology learning
community commitment



Hybrid Professional Master's Degree

Home Hospitalization

Modality: Hybrid (Online + Clinical Internship)

Duration: 12 months

Certificate: TECH Global University

60 + 5 créditos ECTS

Hybrid Professional Master's Degree

Home Hospitalization

