

Hybrid Professional Master's Degree

Minimally Invasive
Gynecologic Surgery





Hybrid Professional Master's Degree Minimally Invasive Gynecologic Surgery

Modality: Hybrid (Online + Clinical Internship)

Duration: 12 months.

Certificate: TECH Technological University

Teaching Hours: 1,620 hours.

Website: www.techtute.com/us/medicine/hybrid-professional-master-degree/hybrid-professional-master-degree-minimally-invasive-gynecologic-surgery

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01

Introduction

The latest advances in Minimally Invasive Surgery in the area of Gynecology have meant a transformation of the discipline. Therefore, procedures such as hysteroscopy or mini-laparotomy can be used to treat extremely complex pathologies such as endometriosis or large fibroids. For this reason, this field is constantly evolving, requiring the specialist to keep up to date with the latest techniques. Given this situation, TECH has created this program, which will allow the student to master the most advanced procedures in Laparoscopy or Robotic Surgery. In addition, once the 100% online learning phase is completed, you will transfer all your knowledge to practice in an intensive 3-week internship at a renowned clinical center





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You will master, thanks to this degree, the most innovative procedures in Robotic Surgery applied to the field of Gynecology”

Technological advances are continuously taking hold in the field of gynecological surgery, opening up the clinical panorama to new methods of action in this specialty. In this sense, there are countless advances in advanced laparoscopy or robotic surgery that allow small incisions to treat complex pathologies efficiently. As a result, patient recovery times are significantly reduced, with patients often being discharged within 12 to 24 hours after surgery. For this reason, in view of the benefits offered by these advances, surgeons are obliged to incorporate them into their medical practice in order to be at the forefront of this sector.

That is why TECH has opted to offer the Semipresential Master in Minimally Invasive Surgery in Gynecology, which will allow students to assimilate the latest developments in their profession through an excellent theoretical and practical method. Throughout the 12 months of this program, the student will adopt the most updated procedures for the treatment of Benign Uterine Pathology and Dysgenesis or will manage the most effective suturing techniques to promote fast wound healing. Likewise, you will master hysteroscopic myomectomy to remove submucosal fibroids.

Once the theoretical learning phase has been completed, which is 100% online in order to favor learning adapted to the needs of each student, the doctor will have access to a highly prestigious hospital for 3 weeks. In this experience, you will be part of a multidisciplinary work team made up of high-level professionals, who will provide you with the most up-to-date competencies to perfect your health skills.

This **Professional Master' Hybrid in Minimally Invasive Gynecologic Surgery** contains the most complete and up-to-date scientific program on the market. The most important features include:

- ♦ More than 100 clinical cases presented by surgeons experts in the management of the Laparoscopic Techniques in Gynecologic Cancer
- ♦ The graphic, schematic, and practical contents with which they are created, provide scientific and practical information on the disciplines that are essential for professional practice.
- ♦ Up-to-date imaging techniques used for the diagnosis of Endometriosis.
- ♦ State-of-the-art procedures for the treatment of different types of gynecologic cancers
- ♦ Mastery of the latest robotic systems used in surgical procedures.
- ♦ All of 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
- ♦ Furthermore, you will be able to carry out a clinical internship in one of the best hospital centers



This Hybrid Professional Master's Degree allows you to exercise in simulated environments, which provide immersive learning programmed to train in real situations"

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The didactic materials offered in this program, written by physicians specialized in this field, will allow you to acquire knowledge with full real applicability in your work"

In this Hybrid Professional Master's Degree, with a vocational nature and blended learning modality, the program is aimed at updating Medicine professionals who demand a high level of qualification. The content is based on the latest scientific evidence and is organized in a didactic way to integrate theoretical knowledge into Doctor practice. The theoretical-practical elements allow professionals to bringing their knowledge up-to-date and help them to make the right decisions in patient care.

Thanks to their multimedia content developed with the latest educational technology, they will allow the Medicine professional to obtain situated and contextual learning, i.e. a simulated environment that will provide immersive learning programmed to train in real situations. This program is designed around Problem-Based Learning, whereby the physician must try to solve the different professional practice situations that arise during the course. For this purpose, the students will be assisted by an innovative interactive video system created by renowned and experienced experts.

In only 12 months and through 100% online learning, you will update your knowledge in your medical discipline without leaving your home.

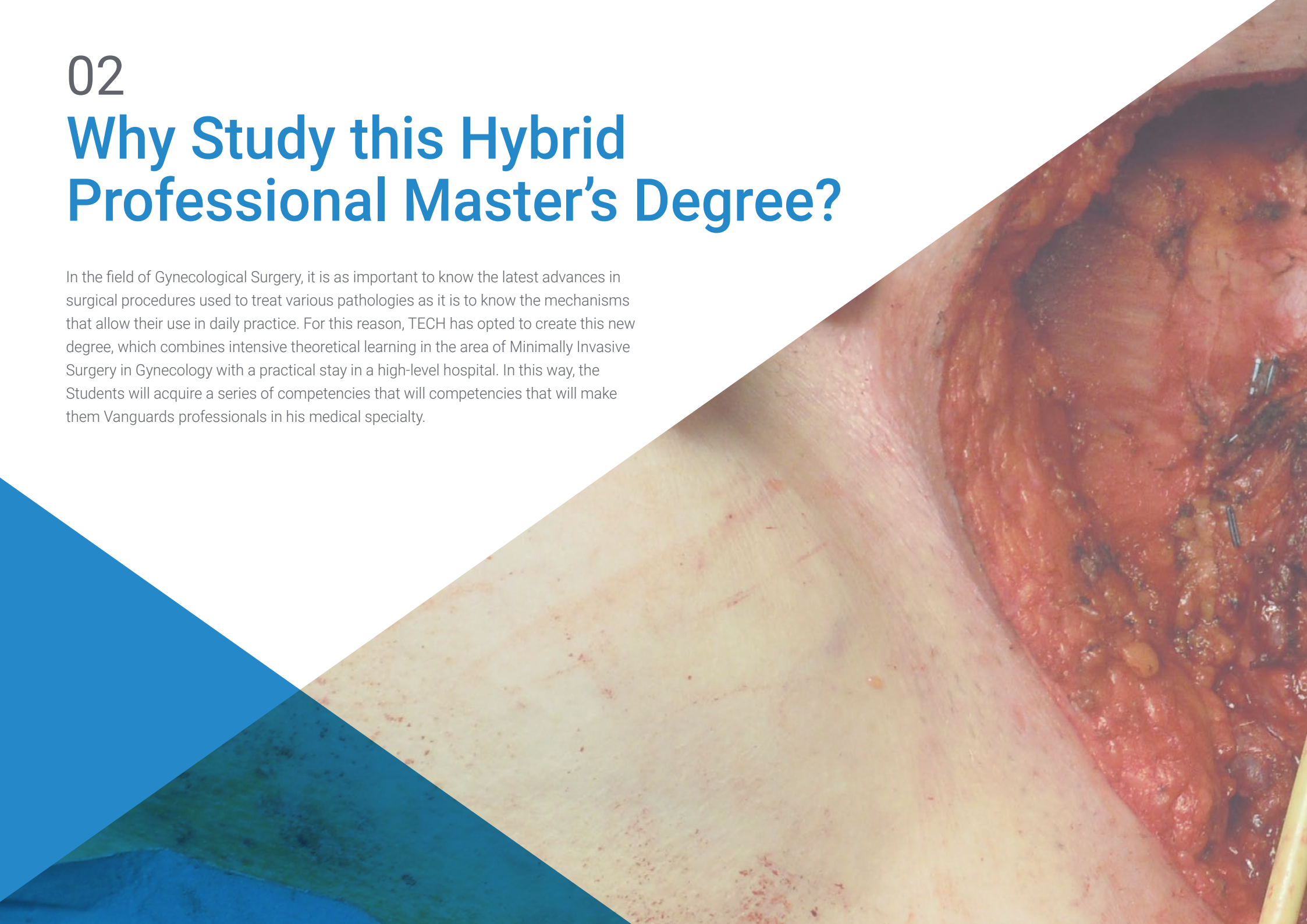
Take this blended master's degree to be at the forefront of medicine and enhance the services you offer to your patients.



02

Why Study this Hybrid Professional Master's Degree?

In the field of Gynecological Surgery, it is as important to know the latest advances in surgical procedures used to treat various pathologies as it is to know the mechanisms that allow their use in daily practice. For this reason, TECH has opted to create this new degree, which combines intensive theoretical learning in the area of Minimally Invasive Surgery in Gynecology with a practical stay in a high-level hospital. In this way, the Students will acquire a series of competencies that will make them Vanguard professionals in his medical specialty.





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TECH offers you a unique opportunity to combine advanced theoretical learning in Minimally Invasive Surgery in Gynecology with a practical stay of 120 hours in a hospital with the best technologies"

1. Updating from the Latest Technology Available

Gynecology has experienced a notorious advance in recent years thanks to the application of robotic surgery or laparoscopic and hysteroscopic techniques to address various diseases in a safer and faster way. For this reason, TECH has designed this blended Master, with the intention of updating the knowledge of the professional of Gynecological Surgery in a theoretical and practical way.

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

During his practical stay, the student will be surrounded by the best professionals in gynecological surgery, who will provide him with the best advice and useful skills to face all his daily challenges with solvency. Accompanied at all times by a tutor, you will be able to acquire the latest techniques and procedures in Minimally Invasive Surgery in Gynecology.

3. Entering First-Class Clinical Environments

TECH carefully selects all the centers available for internships. Thanks to this, the specialist will have guaranteed access to a prestigious clinical environment in the field of Minimally Invasive Gynecologic surgery. In this way, you will be able to see the day-to-day work of a demanding, rigorous and exhaustive sector, always applying the latest theses and scientific postulates in its work methodology.



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

In today's educational landscape, the vast majority of educational programs offer a never-ending series of content that lacks real applicability. For this reason, TECH has created a degree that combines theoretical and practical learning, with the aim of ensuring that everything learned is useful in the work environment.

5. Expanding the Boundaries of Knowledge

TECH offers the possibility of carrying out the internships of this blended Master in the best hospitals. Therefore, the specialist will be able to up-to-date their knowledge with cutting-edge professionals who practice in first-class hospitals. A unique opportunity that only TECH, the largest online university in the world, could offer.

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You will have full practical immersion at the center of your choice”

03 Objectives

The Semipresential Master in Minimally Invasive Surgery in Gynecology will allow students to up-to-date their knowledge and skills in their profession through intensive theoretical and practical learning. In this program, you will delve into the intricacies of robotic surgery or assimilate the new techniques that favor a safe intervention and a quick recovery for the patient. To ensure this learning, a series of general and specific objectives have been outlined.





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You will up-to-date your knowledge in Minimally Invasive Surgery in Gynecology in only 12 months and through a combination of theoretical and practical learning".

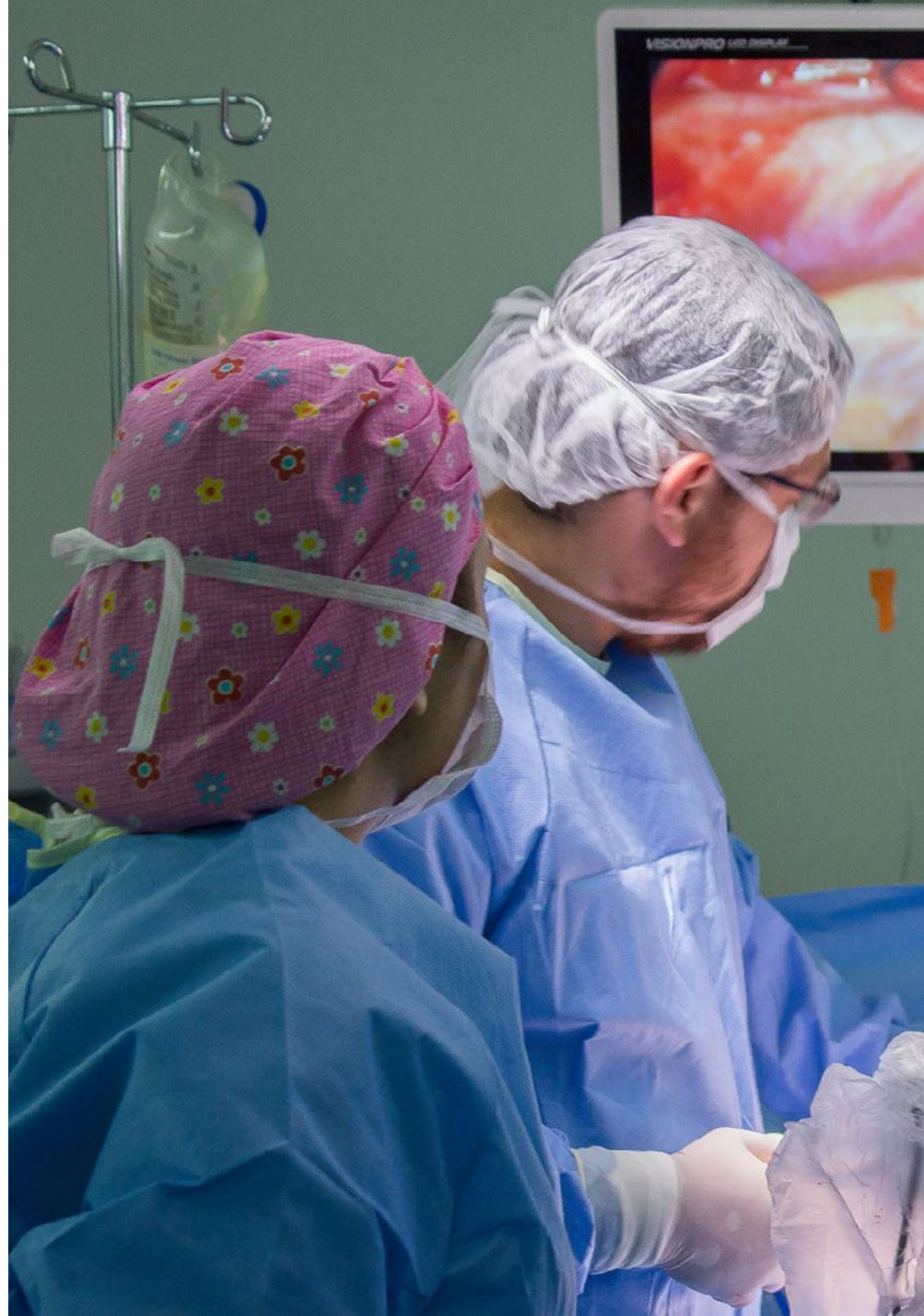


General Objective

- The general objective of the Hybrid Professional Master's Degree in Minimally Invasive Surgery in Gynecology is to enable physicians to update their diagnostic and therapeutic knowledge in a theoretical and practical way, combining excellent theoretical learning with a stay in a first class hospital center surrounded by the best professionals in this field.

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Through this Hybrid Professional Master's Degree, you will detect the advantages offered by the different ultra-mini-invasive techniques in gynecological interventions"





Specific Objectives

Module 1. Minimally Invasive Surgery

- ♦ Delve deeper into the history of laparoscopy
- ♦ Gain a deeper understanding of how to prepare the endoscopic operating room
- ♦ Know the correct postural factors and ergonomics
- ♦ Approach the management of patients pre- and post-operatively
- ♦ Know the details of conventional laparoscopic operating rooms
- ♦ Determine the anesthetic and recovery details of patients
- ♦ Learn Fast-Track postoperative management and the ERAS protocol
- ♦ Describe the main features irrigation and suction systems

Module 2. Instrumentation, Materials and Electrosurgery

- ♦ Manage the preparation of the surgical site before each operation
- ♦ Establish skin cleansing and asepsis
- ♦ Learn how to position patients on the operating table
- ♦ Learn the peculiarities of integrated operating rooms
- ♦ Increase knowledge of anesthetic aspects related to endoscopy
- ♦ Learn the different applications of bipolar and monopolar energy in instrumentation
- ♦ Acquire information about electrosurgery for its use in clinical practice
- ♦ Select morcellation instruments and apply them safely
- ♦ Describe the main features of specimen extraction bags
- ♦ Determine the types and use of tissue sealants

Module 3. General Training in Minimally Invasive Surgery

- ♦ Identify dissection and cutting instruments for laparoscopy and the use of each piece of equipment
- ♦ Select the correct optics for each specific patient
- ♦ Differentiate between entry trocars used in surgeries
- ♦ Perform pelvitrainer simulation exercises
- ♦ Learn how to assemble a homemade pelvitrainer
- ♦ Explain the use of learning pyramids
- ♦ Identify the types of laparoscopic simulators
- ♦ Acquire up-to-date knowledge of animal simulation procedures
- ♦ Bring new advances to cadaver simulation procedures
- ♦ Apply simulated organ models
- ♦ Acquire up-to-date knowledge of simple laparoscopic suturing procedures

Module 4. Laparoscopic Suture Training

- ♦ Explore all the material for laparoscopic suturing, including suture holders, suture threads, needles and other instruments
- ♦ Give a detailed description of all the accessory material for gynecological laparoscopy
- ♦ Distinguish the types of recorders available for surgery
- ♦ Acquire up-to-date knowledge of the orientation of laparoscopic vision systems
- ♦ Identify the types of insufflators and how they work
- ♦ Identify general surgical instruments

Module 5. Female Surgical Anatomy

- ♦ Review the anatomy of the abdominal wall
- ♦ Review the anatomy of the pelvic and abdominal visceral system, including the upper abdomen
- ♦ Refresh understanding of pelvic vascular system anatomy and review the para-aortic vascular system and the vena cava
- ♦ Identify the different parts of the lymphatic system and their detailed laparoscopic management
- ♦ Learn about the functional anatomy of the female pelvic floor
- ♦ Determine vulvo-vaginal area exploration and its relation to pelvic floor pathology
- ♦ Study sympathetic and parasympathetic nerve anatomy of the female pelvis

Module 6. Hysteroscopic Surgery

- ♦ Prepare the material for diagnostic and surgical hysteroscopy
- ♦ Update the new technological advances in hysteroscopy, such as morcellators, lasers and endometrial ablation systems
- ♦ Describe the tools to perform hysteroscopy in the office
- ♦ Acquire up-to-date knowledge of the literature on advances in hysteroscopy
- ♦ Explain advanced techniques, such as malformation treatment or hysteroscopic myomectomy
- ♦ Improve success rate in consultation
- ♦ Acquire up-to-date knowledge of the indications for office or surgical hysteroscopy
- ♦ Learn the latest developments in hysteroscopic surgery

- ♦ Acquire skills to resolve hysteroscopic complications, typical of the technique, such as perforations or vasovagal syndrome
- ♦ Identify the different techniques used in uterine morcellation and myoma morcellation laparoscopically in a watertight manner to avoid the possibility of dissemination in case of uterine sarcoma
- ♦ Select the different endoscopy applications within the different modalities of complexity in hysterectomy
- ♦ Acquire up-to-date knowledge of the use of laparoscopy in uterine malformations and their resolution
- ♦ Incorporate the advances of the laparoscopic neovagina technique
- ♦ Incorporate theoretical knowledge related to vaginal vault dehiscence
- ♦ Identify the different types of uterine mobilizers
- ♦ Acquire up-to-date knowledge of the evaluation procedures for pelvic floor defects
- ♦ Acquire up-to-date knowledge of procedures to manage ectopic pregnancy using laparoscopy
- ♦ Acquire up-to-date knowledge of procedures to manage ovarian torsion using laparoscopy
- ♦ Acquire up-to-date knowledge of the procedures to manage pelvic infections using laparoscopy
- ♦ Establish the strategy to adequately access the abdominal cavity
- ♦ Describe the process of taking an exploratory biopsy and abdominal cytology using laparoscopy
- ♦ Acquire up-to-date knowledge of the laparoscopic management of ovarian remnant syndrome
- ♦ Update the procedures to manage uterine fibroids
- ♦ Establish the strategy to reduce bleeding in laparoscopic myomectomy

Module 7. Exploratory Laparoscopy and Benign Adnexal Pathology

- ♦ Define the specific technique in suturing and intracorporeal and extracorporeal knotting
- ♦ Adapt the avascular spaces for endoscopic surgery
- ♦ Acquire fluency in the resolution of simple pathologies, such as polyps and endometrial hyperplasia

Module 8. Benign Uterine Pathology and Dysgenesis

- ♦ Acquire up-to-date knowledge of management procedures for benign ovarian and tubal pathology, including cystectomy and adnexectomy
- ♦ Update procedures to manage large complex tumors OR

Module 9. Pelvic Floor Pathology and Vaginal Mesh Use

- ♦ Determine vulvo-vaginal area exploration and its relation to pelvic floor pathology
- ♦ Review the functional anatomy of the female pelvic floor
- ♦ Review the sympathetic and parasympathetic nervous anatomy of the female pelvis
- ♦ Identify abdomino-pelvic vascular abnormalities
- ♦ Select the different types of laparoscopic and vaginal meshes for the resolution of such abnormalities
- ♦ Incorporate advances in the application of cystoscopy after reparative techniques
- ♦ Review the scientific evidence on the use of endoscopy in pelvic floor pathology
- ♦ Gain a detailed understanding of the use of laparoscopic sacrocolpopexy
- ♦ Foresee complications and their management in pelvic floor pathology
- ♦ Explain the procedures for laparoscopic repair of paravaginal defects
- ♦ Explain the placement procedure for different meshes to resolve urinary incontinence

Module 10. Laparoscopy in Endometriosis

- ♦ Conduct detailed analyses of patients with possible endometriosis
- ♦ Incorporate advances in the application of imaging techniques and tumor markers to diagnose endometriosis
- ♦ Describe the classifications of endometriosis by different authors
- ♦ Explain the therapeutic possibilities of endometriosis in each specific case
- ♦ Acquire up-to-date knowledge of the procedures to manage endometriosis in the recto vaginal and ovarian septum
- ♦ Acquire up-to-date knowledge of the procedures to manage patients with endometriosis involving the lateral compartment
- ♦ Acquire up-to-date knowledge of the management procedures for the recommended medical treatment of endometriosis
- ♦ Acquire up-to-date knowledge of treatment in cases of intestinal endometriosis
- ♦ Acquire up-to-date knowledge of laparoscopic management procedures for endometriosis of urinary origin
- ♦ Describe the main characteristics of extra pelvic endometriosis, such as in the abdominal wall, in the lungs and other organs
- ♦ Know the reproductive effects of endometriosis treatment

Module 11. Endoscopic Surgery in Gynecologic Oncology

- ♦ Acquire up-to-date knowledge of exploratory laparoscopy for gynecologic cancer
- ♦ Foresee the possible oncologic complications due to the specific endoscopic technique used
- ♦ Describe the main characteristics of port of entry metastases
- ♦ Know the effect of mobilizers and pneumoperitoneum in gynecological cancer
- ♦ Acquire up-to-date knowledge of the lymphadenectomy procedures in the gynecological context
- ♦ Acquire up-to-date knowledge of the procedures involved in the specific technique of systematic transperitoneal and extraperitoneal para-aortic lymphadenectomy
- ♦ Select which type of laparoscopy should be used for inguinal lymphadenectomy
- ♦ Acquire up-to-date knowledge of the applications of endoscopy in ovarian, cervical and endometrial cancer
- ♦ Acquire up-to-date knowledge of the procedures involved in specific techniques, such as laparoscopic trachelectomy and parametrectomy in the context of cervical cancer
- ♦ Acquire up-to-date knowledge of sentinel lymph node application procedures in endoscopy and gynecology
- ♦ Identify the different types of tracers and fluorescence
- ♦ Explain the technique for pelvic exenteration using laparoscopy
- ♦ Acquire up-to-date knowledge of the procedures involved in minimally invasive surgery for recurrences of different gynecologic cancers
- ♦ Acquire up-to-date knowledge of the procedures involved in laparoscopic management of borderline ovarian tumors
- ♦ Acquire up-to-date knowledge of the procedures involved in laparoscopic management of lymph node recurrences in genital cancer

Module 12. Complications in Minimally Invasive Surgery

- ♦ Acquire up-to-date knowledge of the procedures to manage vascular lesions using endoscopy
- ♦ Acquire up-to-date knowledge of the procedures to manage intestinal lesions using endoscopy
- ♦ Acquire up-to-date knowledge of the procedures used to manage urological lesions using endoscopy
- ♦ Identify the main characteristics of abdominal wall injuries and complications
- ♦ Explain how to manage complications in radical hysterectomy
- ♦ Select the use of hemostatic agents in endoscopy
- ♦ Foresee the complications derived from pelvic floor meshes
- ♦ Foresee the complications that occur intraoperatively, as well as those that go unnoticed during surgery
- ♦ Determine nervous and other complications, such as pulmonary thromboembolism (PTE), infections, etc.

Module 13. Stress and its Impact on Fertility

- ♦ Describe the peculiarities of endoscopy and its use in pregnant patients
- ♦ Update the procedures used in tubal recanalization techniques
- ♦ Identify the different uses of endoscopy in relation to the fertility of patients
- ♦ Acquire up-to-date knowledge of the literature on the effects of endoscopy on fertility

Module 14. Ultra-Minimally Invasive Surgery

- ♦ Explain the main characteristics of adhesions and how to prevent them
- ♦ Describe laparoscopic tubal chromopertubation
- ♦ Incorporate the advances in the 3 mm laparoscopic technique
- ♦ Select specific instruments for mini-laparoscopy
- ♦ Acquire up-to-date knowledge of the specific technique for 3 mm ports
- ♦ Incorporate the novel aspects of single-port laparoscopy
- ♦ Describe the main characteristics of the instrumentation specific single-port
- ♦ Update *single-glove* technique performance
- ♦ Updating the specific technique for *Single-Port* ports
- ♦ Describe the advantages of each of the ultra mini-invasive techniques
- ♦ Foresee technical problems derived from using these methods in interventions

Module 15. Robotic Surgery in Gynecology

- ♦ Incorporate new options, such as surgery without entry trocars, into practice
- ♦ List the advantages and disadvantages of robotic surgery in gynecology
- ♦ Acquire up-to-date knowledge of the different types of robotic systems for surgery, such as the Da Vinci, Zeus or Amadeus
- ♦ Identify how to apply this type of surgery in gynecology
- ♦ Describe the specific instrumentation procedures used in robotic surgery
- ♦ Evaluate the financial aspects of robotic surgery
- ♦ Foresee the complications typical of robotic surgery
- ♦ Identify how to apply single-port in gynecologic robotic surgery
- ♦ Acquire up-to-date knowledge of on new robotic advances

04

Competencies

After passing the evaluations of the Semipresential Master in Minimally Invasive Surgery in Gynecology, the physician will have updated skills to perform innovative interventions in this medical area. Therefore, this program has an eminently practical focus, and all its contents are aimed at updating the specialist's clinical practice.





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This program will enable you to increase your skills in laparoscopic surgery through a combination of high quality theoretical and practical learning”



General Skills

- Possess and understand knowledge that provides a basis or opportunity to be original in the development and/or application of ideas, often in a research context
- Know how to apply acquired knowledge and problem-solving skills in new or unfamiliar environments within broader (or multidisciplinary) contexts related to the area of study.
- Know how to communicate their knowledge and conclusions to specialized and non-specialized audiences in a clear and unambiguous way
- Know the general application of laparoscopy in gynecologic surgery for , both benign and malignant processes
- Establish the basis of electrosurgery for its application in the field of endoscopy



At the end of the Semipresential Master in Minimally Invasive Surgery in Gynecology, you will master the most innovative treatments for benign pathologies of the uterus"





Specific Skills

- ◆ Trace out specialized programs use all the resources available for the study of endoscopy
- ◆ Perform adequate training in endoscopic suturing
- ◆ Develop an exhaustive Delve of the visceral and accessory anatomy of the female pelvis and abdomen to apply it in the operating room
- ◆ Diagnose and treat benign uterus and appendage pathology involving the female genital tract with minimum invasion
- ◆ Identify and classify the different types of endometriosis to treat them with minimally invasive surgery
- ◆ Determine the epidemiology and main characteristics of pelvic floor processes in women and how to treat them with or without meshes
- ◆ Establish the diagnostic and therapeutic procedures of the different types of cancer in women based on the latest advances in gynecologic oncology
- ◆ Adequately manage gynecologic tumor recurrences
- ◆ Detect endoscopic surgery complications and their intraoperative and postoperative management
- ◆ Master medical practice, according to the latest scientific evidence, in the correct use of new mini-invasive technologies
- ◆ Point out the main advantages of robotic surgery systems and how to apply them in gynecological surgery

05

Course Management

One of TECH's priorities when designing its programs is the formation of a teaching staff that provides knowledge and experience. For this reason, for this Hybrid Professional Master's Degree, it has selected outstanding professionals with a great trajectory in the area of Minimally Invasive Surgery for Gynecology. They will present to the students, through audiovisual resources and practical exercises, the most recent advances and updates in the field, therefore providing them with exclusive and highly useful material.



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TECH has selected for you the best teachers in the area, committed to your professional training”

International Guest Director

As one of the pioneer surgeons in Brazil by introducing advanced techniques of Laparoscopic Oncologic Surgery in Paraná, Dr. Reitan Ribeiro is one of the most prolific figures in this specialty. So much so that he has even received recognition as an honorary citizen of the city of Curitiba, highlighting his work in the creation and development of the technique of Uterine Transposition.

The IJGC, International Journal of Gynecologic Cancer, has also recognized the outstanding work of Dr. Reitan Ribeiro. His publications on Uterine Robotic Transposition in Cervical Cancer, Uterine Transposition after Radical Trachelectomy and directed research in the technique of Uterine Transposition for patients with gynecological cancers who want to preserve fertility are highlighted. He has received the national award for medical innovation for his research in the field of Uterine Transposition, highlighting these advances in the preservation of the patient's fertility.

His professional career is not without success, as he holds numerous positions of responsibility in the prestigious Erasto Gaertner Hospital. He directs the research program in Gynecologic Oncology of this center, being also director of the Fellowship program in this specialty, in addition to coordinating the training program in Robotic Surgery focused on Gynecologic Oncology.

At the academic level, he has completed internships at numerous prestigious centers, including Memorial Sloan Kettering Cancer Center, McGill University and the National Cancer Institute of Brazil. He balances his clinical responsibilities with consulting work for leading medical and pharmaceutical companies, mainly Johnson & Johnson and Merck Sharp & Dohme.



Dr. Ribeiro, Reitan

- ♦ from Research Director, from Gynecologic Oncology Department - Erasto Gaertner Hospital - Brazil
- ♦ Director of the Fellowship Program in Gynecologic Oncology at the Erasto Gaertner Hospital.
- ♦ Director of the Robotic Surgery Training Program of the Gynecologic Oncology Department of the Erasto Gaertner Hospital.
- ♦ Senior Surgeon in the Department of Gynecologic Oncology, Erastus Gaertner Hospital.
- ♦ Director of the Resident Oncologist Program at the Erasto Gaertner Hospital.
- ♦ Consultant at Johnson & Johnson and Merck Sharp & Dohme
- ♦ Degree in Medicine at the Federal University of Porto Alegre
- ♦ Fellowship in Gynecologic Oncologic Surgery at Memorial Sloan Kettering Cancer Center
- ♦ Fellowship in Minimally Invasive Surgery, McGill University
- ♦ Internships at Governador Celso Ramos Hospital, National Cancer Institute of Brazil and Erasto Gaertner Hospital.
- ♦ Certification in Oncologic Surgery by the Oncologic Surgery Society of Brazil.

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Thanks to TECH you will be able to learn with the best professionals in the world"

06

Educational Plan

The syllabus of this degree is made up of 15 modules with which the student will significantly expand their knowledge in the field of Minimally Invasive Surgery in Gynecology. The didactic materials that you will have access to during the duration of this Blended Learning Master are available in a wide range of textual and multimedia formats to favor an optimized learning process. In addition, its 100% online methodology will enable the student to enjoy the contents offered 24 hours a day.





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Through materials in formats such as the interactive summary or the explanatory video, you will acquire valuable knowledge in a convenient way that will enrich your medical practice"

Module 1. Minimally Invasive Surgery

- 1.1. General Introduction
- 1.2. History of Laparoscopy
- 1.3. Introduction to Hysteroscopic Surgery
- 1.4. Ergonomics in Laparoscopy
- 1.5. Asepsis and Antisepsis
 - 1.5.1. Hand Washing
 - 1.5.2. Preparing Instrumentation: Sterilization.
 - 1.5.3. Preparing the Surgical Field
 - 1.5.3.1. Skin Cleansing
 - 1.5.3.2. Proper Cloth Placement
- 1.6. Laparoscopic Operating Room
 - 1.6.1. Conventional Operating Rooms
 - 1.6.2. Integrated Operating Rooms
 - 1.6.3. Future Perspectives
- 1.7. Preoperative Preparation for Laparoscopy
 - 1.7.1. Physical Preparation for Patients
 - 1.7.2. Preoperative Medication and Bowel Preparation
 - 1.7.3. Patient Position on the Operating Table
- 1.8. *Fast-Track/* ERAS Program
- 1.9. Anesthetic Considerations in Endoscopic Surgery
 - 1.9.1. General Aspects
 - 1.9.2. Circulatory System Involvement
 - 1.9.3. Respiratory System Involvement
 - 1.9.4. Spinal Catheter Placement and Other Blockages
 - 1.9.5. Postoperative Recovery

Module 2. Instrumentation, Materials and Electrosurgery

- 2.1. Laparoscopy Tower and General Supplies
- 2.2. Specific Vision Systems
 - 2.2.1. Full HD High Definition Systems
 - 2.2.2. 3D Vision Systems
 - 2.2.3. 4K Vision Systems
- 2.3. Endoscopy
 - 2.3.1. Rigid Endoscopy
 - 2.3.2. Flexible and Angle Adjustable Endoscopes
 - 2.3.3. Small Bore Endoscopes
- 2.4. Insufflation Systems
 - 2.4.1. General Functioning
 - 2.4.2. Smoke Extraction Systems
- 2.5. Image Recording Modules
- 2.6. Access Instrumentation
 - 2.6.1. Veress Needle
 - 2.6.2. First Access Trocars
 - 2.6.3. Accessory Trocars
- 2.7. Grasping Instruments
 - 2.7.1. Types of Instruments
 - 2.7.2. Most Appropriate Uses for Each
- 2.8. Cutting Instruments
- 2.9. Electrosurgery
 - 2.9.1. Electrosurgery in Medicine
 - 2.9.2. Monopolar Energy
 - 2.9.3. Bipolar Energy
 - 2.9.4. Electrical Isolation of Instruments
 - 2.9.5. Precautions to Avoid Accidents
- 2.10. Endoscopic Tissue Sealants
- 2.11. Bags and Specimen Extraction
- 2.12. EndoGIA and General Surgery Instrumentation
- 2.13. Morcellators and Containment Systems
- 2.14. Other Instruments: Aspiration, Suction, Retractors, Organ Suspension Systems, Port Closure Systems, Tie Rods, etc.

Module 3. General Training in Minimally Invasive Surgery

- 3.1. Introduction and Learning Pyramid
- 3.2. Different Types of Options for Learning Endoscopy
 - 3.2.1. Conducting Training Courses and Programs
 - 3.2.2. Laparoscopic Simulators
 - 3.2.2.1. Physical Simulations
 - 3.2.2.2. Virtual Simulators
 - 3.2.3. Animal Models in Gynecologic Endoscopy
 - 3.2.4. Human Models for Simulation
- 3.3. How to Build a Homemade Pelvitrainer
- 3.4. Different Types of Practical Pelvitrainer Exercises
- 3.5. Organ Bank and Artificial Phantoms

Module 4. Laparoscopic Suture Training

- 4.1. Introduction and Suture Use in Endoscopy
- 4.2. Types of Needles
- 4.3. Types of Sutures Used
 - 4.3.1. Conventional Sutures
 - 4.3.2. Vascular Suture
 - 4.3.3. Bearded Suture
 - 4.3.4. Automatic Suture Systems
- 4.4. Specific Instrumentation
 - 4.4.1. Types of Needle Holders
 - 4.4.2. Low Knots
 - 4.4.3. LapraTy Applicator
 - 4.4.4. Others
- 4.5. Technical Aspects
 - 4.5.1. Introducing the Needle into the Cavity
 - 4.5.2. Needle Placement in Holder
 - 4.5.3. Types of Sutures
 - 4.5.4. Intracorporeal Knotting
 - 4.5.5. Extracorporeal Knotting
 - 4.5.6. Single-Port Knotting
 - 4.5.7. Sutures and Special Types of Knots (Vascular, Intestinal)
 - 4.5.8. Suture Removal

Module 5. Female Surgical Anatomy

- 5.1. Anatomy of the Abdominal Wall
- 5.2. Musculo-Fascial Anatomy of the Female Pelvis
- 5.3. Visceral System of the Upper Abdomen
 - 5.3.1. Diaphragm
 - 5.3.2. Liver
 - 5.3.3. Omentum and Spleen
 - 5.3.4. Small Intestine, Large Intestine, and Stomach
 - 5.3.5. Rest of Organs in Upper Abdomen
- 5.4. Pelvic Visceral System
 - 5.4.1. Uterus and Ovaries
 - 5.4.2. Recto and Sigma
 - 5.4.3. Bladder and Ureters
- 5.5. Abdomino-Pelvic Vascular System
- 5.6. Abdominal and Pelvic Nervous System
- 5.7. Lymphatic System in Abdomen and Pelvis
- 5.8. Dissection and Limits of Avascular Spaces
- 5.9. Vascular Anomalies.
 - 5.9.1. Abnormalities in the Pelvic Area
 - 5.9.2. Corona Mortis
 - 5.9.3. Abdominal and Aortic Area Abnormalities
 - 5.9.4. Use of Preoperative Imaging Techniques
- 5.10. Anatomy of Vulva and Vagina
- 5.11. Functional Anatomy of the Pelvic Floor

Module 6. Female Surgical Anatomy

- 6.1. Introduction to Hysteroscopic Surgery
- 6.2. Organization of an Outpatient Hysteroscopy Consultation
- 6.3. Hysteroscopy Equipment and Instruments in Consultation
 - 6.3.1. Peculiarities of the Hysteroscopy Tower
 - 6.3.2. Types of Diagnostic Hysteroscopes
 - 6.3.3. Types of Instruments

- 6.4. Hysteroscopy in Consultation
 - 6.4.1. Indications for In-Consultation Hysteroscopy
 - 6.4.2. In-Consultation Hysteroscopy Technique
 - 6.4.3. How to Increase Success Rate
- 6.5. Surgical Hysteroscopy
 - 6.5.1. Surgical Hysteroscopies Indications
 - 6.5.2. Peculiarities of the Procedure in the Operating Room
- 6.6. Systematic Endometrial Exploration and Biopsy
- 6.7. Hysteroscopic Polypectomy
- 6.8. Foreign Body Removal (IUD, Essures)
- 6.9. Hysteroscopic Myomectomy
 - 6.9.1. Limits to In-Consultation Interventions
 - 6.9.2. Types of Hysteroscopic Morcellators
 - 6.9.3. Suitable Techniques
- 6.10. Resection of Septum and Intracavitary Malformations
- 6.11. Intratubal Devices
- 6.12. Endometrial Ablation
 - 6.12.1. Resectoscope Use
 - 6.12.2. Novasure and Other Devices
- 6.13. Complications and Post-Procedural Management in Hysteroscopy
 - 6.13.1. Uterine or Cervical Perforation
 - 6.13.2. Infections
 - 6.13.3. Vasovagal Syndrome
 - 6.13.4. Bleeding
 - 6.13.5. Postoperative Pain
 - 6.13.6. Hyperosmolar Syndrome
 - 6.13.7. Others
- 6.14. New Developments in Hysteroscopy
 - 6.14.1. Using Monopolar vs. Bipolar
 - 6.14.2. Use of Laser in Hysteroscopy
 - 6.14.3. Other Developments

Module 7. Exploratory Laparoscopy and Benign Adnexal Pathology

- 7.1. General Considerations in the Operating Room
- 7.2. Use of Veress vs. Hasson's Trocar
- 7.3. Placement of Accessory Trocars
 - 7.3.1. Choosing the Right Trocar
 - 7.3.2. How to Avoid Complications
 - 7.3.3. Use of Direct Vision Trocars
- 7.4. Performing the Pneumoperitoneum
- 7.5. Systematic Exploration of the Cavity: Biopsies and Cytology
- 7.6. Simple Adnexectomy and Salpingectomy
- 7.7. Ovarian Cystectomy of Simple Cysts
- 7.8. Management of Complex Non-Endometriotic Cysts
 - 7.8.1. Ovarian Teratomas
 - 7.8.2. Large Cysts
 - 7.8.3. Adnexal Torsion
 - 7.8.4. Ectopic Pregnancy
 - 7.8.5. Pelvic Abscess and Inflammatory Disease
- 7.9. Remaining Ovary Syndrome

Module 8. Benign Uterine Pathology and Dysgenesis

- 8.1. Laparoscopic Myomectomy
 - 8.1.1. Medical Treatment of Myomas
 - 8.1.2. Surgical Treatment. Indications
 - 8.1.3. Prevention of Bleeding
 - 8.1.3.1. Injection of Vasoconstrictors
 - 8.1.3.2. Temporary Clipping of Uterine Arteries
 - 8.1.4. Basic Surgical Techniques
 - 8.1.4.1. Choosing the Incision
 - 8.1.4.2. Myomatous Dissection and Removal
 - 8.1.4.3. Bed Suture
 - 8.1.4.4. Morcellation of the Part
 - 8.1.4.4.1. Risk of Uterine Sarcoma
 - 8.1.4.4.2. Sealed Morcellation Systems

- 8.1.5. Fertility after Myomectomy
 - 8.1.5.1. Obstetric Outcomes and Recommendations
 - 8.1.5.2. Non-Stick Systems
- 8.2. Laparoscopic Hysterectomy
 - 8.2.1. Use of Uterine Mobilizers
 - 8.2.1.1. Types of Mobilizers
 - 8.2.1.2. Fitting the Mobilizers
 - 8.2.1.3. Advantages of Mobilizers
 - 8.2.1.4. Automatic Uterine Mobilization Systems
 - 8.2.2. Basic Simple Hysterectomy Technique
 - 8.2.3. Technique in Complex Situations
 - 8.2.4. Vaginal Vault Suture and Dehiscence
- 8.3. Genital Malformation Syndromes
 - 8.3.1. Classification of Malformation Syndromes
 - 8.3.2. Laparoscopic Resolution of Malformation Syndromes
 - 8.3.3. Laparoscopic Neovagina

Module 9. Pelvic Floor Pathology and Vaginal Mesh Use

- 9.1. Pathophysiology of Genital Prolapse
- 9.2. Etiopathogenesis of Chronic Pelvic Pain
- 9.3. Global Assessment of the Patient and the Approach Route
- 9.4. Prosthetic Materials and Mesh Types
 - 9.4.1. Types of Material
 - 9.4.2. Meshes for Genital Prolapses
 - 9.4.3. Urinary Incontinence Meshes
- 9.5. Laparoscopic Sacrocolpopexy
 - 9.5.1. Choosing the Right Mesh
 - 9.5.2. Surgical Technique
 - 9.5.2.1. When to Preserve the Uterus
 - 9.5.3. Technique Complications
 - 9.5.4. A Learning Curve

- 9.6. Treatment of Urinary Incontinence
 - 9.6.1. Pre-Operative Study
 - 9.6.2. Endoscopic Treatment of Incontinence
 - 9.6.3. Vaginal Treatment of Incontinence
 - 9.6.4. Placement of Mini-Slings
 - 9.6.5. Placement of TVT - TOT
 - 9.6.6. Other Procedures
- 9.7. Endoscopic Repair of Paravaginal Defects
- 9.8. Role of Cystoscopy in Gynecologic Surgery

Module 10. Laparoscopy in Endometriosis

- 10.1. Laparoscopy in the Treatment of Endometriosis
- 10.2. General Diagnosis of Endometriosis
 - 10.2.1. Clinical Examination
 - 10.2.2. Imaging Techniques
 - 10.2.3. The Role of Tumor Markers
- 10.3. Endometriosis Classification
 - 10.3.1. Classification Systems by Authors
 - 10.3.2. Clinical Utility of Classifications
- 10.4. Medical Treatment of Endometriosis
 - 10.4.1. Non-Hormonal Treatment
 - 10.4.2. Hormonal Treatment
 - 10.4.2.1. Contraceptives
 - 10.4.2.2. Progestogens
 - 10.4.2.3. Danazol
 - 10.4.2.4. Gestrinone
 - 10.4.2.5. Others
- 10.5. Treatment of Ovarian and Peritoneal Endometriosis
 - 10.5.1. Types of Peritoneal Disease
 - 10.5.2. Adhesion Formation and Release
 - 10.5.3. Ovarian Endometriosis

- 10.6. Management of Deep Endometriosis
 - 10.6.1. General concepts
 - 10.6.2. Endometriosis Rectum Vaginal Septum
 - 10.6.3. Lateral and Sciatic Compartment
 - 10.6.4. Intestinal Endometriosis
 - 10.6.5. Endometriosis in the Urinary Tract
- 10.7. Extrapelvic Endometriosis
- 10.8. Reproductive Effects of Laparoscopy and Endometriosis
- 10.9. New Developments in Endometriosis and Laparoscopy

Module 11. Endoscopic Surgery in Gynecologic Oncology

- 11.1. Oncologic Laparoscopy
 - 11.1.1. Effect of Pneumoperitoneum and Dissemination
 - 11.1.2. Port-Site Metastasis
 - 11.1.3. Uterine Manipulator and Dissemination
 - 11.2. Tumor Dissemination Routes
 - 11.2.1. Peritoneal Dissemination
 - 11.2.2. Lymphatic dissemination:
 - 11.2.3. Hematogenous Dissemination
 - 11.3. Nodal Selective Study
 - 11.3.1. Sentinel Lymph Node in Ovarian Cancer
 - 11.3.2. Sentinel Lymph Node in Cervical Cancer
 - 11.3.3. Sentinel Lymph Node in Endometrial Cancer
 - 11.3.4. Types of Tracers
 - 11.3.5. Sentinel Lymph Node Detection and Dissection Technique
 - 11.4. Laparoscopy and Ovarian Cancer
 - 11.4.1. Exploratory Laparoscopy in Ovarian Cancer
 - 11.4.1.1. Suspicious Adnexal Masses
 - 11.4.1.2. Advanced Ovarian Cancer: Laparoscopic Scores
 - 11.4.2. *Borderline* Tumor Management
 - 11.4.2.1. Laparoscopic Staging
 - 11.4.2.2. Surgical Re-Staging
 - 11.4.3. Staging Procedures
 - 11.4.3.1. Abdominal Peritonectomy
 - 11.4.3.2. Pelvic Lymphadenectomy
 - 11.4.3.3. Para-Aortic Lymphadenectomy
 - 11.4.3.3.1. Extraperitoneal
 - 11.4.3.3.2. Transperitoneal
 - 11.4.3.4. Laparoscopic Omentectomy
 - 11.4.3.5. Other Procedures
 - 11.4.4. Laparoscopy in Ovarian Cancer Recurrences
 - 11.4.5. Laparoscopy in Interval Surgery
- 11.5. Laparoscopy in Cervical Cancer
 - 11.5.1. Laparoscopy Indications
 - 11.5.2. Laparoscopic Radical Hysterectomy
 - 11.5.2.1. Radical Hysterectomy Classification
 - 11.5.2.2. Nerve Preservation
 - 11.5.2.3. Radicality Modulation
 - 11.5.2.4. Detailed Surgical Technique
 - 11.5.3. Special Characteristics of Radical Trachelectomy
 - 11.5.3.1. Indications
 - 11.5.3.2. Uterine Artery Preservation
 - 11.5.3.3. Cervical Cerclage
 - 11.5.3.4. Ovarian Oophoropexy
 - 11.5.4. Laparoscopic Parametrectomy
 - 11.5.5. Laparoscopic Treatment of Recurrences
 - 11.5.5.1. Single Recurrences
 - 11.5.5.2. Laparoscopic Exenteration
 - 11.6. Laparoscopy in Endometrial Cancer
 - 11.6.1. Laparoscopy and Staging in Endometrial Cancer
 - 11.6.2. Laparoscopic Lymph Nodal Debulking
 - 11.6.3. Other Particularities
 - 11.7. Laparoscopic Inguinal Lymphadenectomy

Module 12. Complications in Minimally Invasive Surgery

- 12.1. Access and Abdominal Wall Complications
 - 12.1.1. Arterial Wall Injury
 - 12.1.2. Vascular Lesions upon Entry
 - 12.1.3. Intestinal Lesions upon Entry
 - 12.1.4. Port-of-Entry Herniation
 - 12.1.5. Infections
 - 12.1.6. Others
- 12.2. Intraoperative Vascular Complications
 - 12.2.1. Prevalence and Etiology
 - 12.2.2. Resolution
 - 12.2.3. Postoperative Aftercare.
- 12.3. Intraoperative Intestinal Complications
 - 12.3.1. Prevalence and Etiology
 - 12.3.2. Resolution
 - 12.3.3. Postoperative Aftercare.
- 12.4. Urologic Complications
 - 12.4.1. Prevalence and Etiology
 - 12.4.2. Resolution
 - 12.4.3. Postoperative Monitoring
- 12.5. Nerve Complications
- 12.6. Inadvertent Complications
- 12.7. Complications Specific to Radical Hysterectomy
- 12.8. Complications Arising from the Meshes
- 12.9. Other Complications: Lymphoceles, Infections, Pulmonary Thromboembolism (PTE), etc.

Module 13. Stress and its Impact on Fertility

- 13.1. Utility of Laparoscopy in Reproduction
- 13.2. Restoration of Fertility
 - 13.2.1. Removing Essure Devices Using Laparoscopy
 - 13.2.2. Tubal Recanalization
- 13.3. Adhesive Syndrome and Laparoscopy
- 13.4. Chromopertubation Use
- 13.5. Laparoscopic Surgery and Pregnancy

Module 14. Ultra-Minimally Invasive Surgery

- 14.1. Introduction to Ultra Minimally Invasive Surgery
- 14.2. Single-Port Surgery
 - 14.2.1. Evidence in Gynecology for Its Use
 - 14.2.2. Specific Instruments.
 - 14.2.3. Surgical Technique by Procedures
 - 14.2.4. *Single-Glove*
- 14.3. Mini-Laparoscopic Surgery
 - 14.3.1. Evidence in Gynecology for Its Use
 - 14.3.2. Specific Instruments.
 - 14.3.3. Surgical Technique by Procedures
- 14.4. Surgery without Ports of Entry
 - 14.4.1. Evidence in Gynecology for Its Use
 - 14.4.2. Specific Instruments.
 - 14.4.3. Surgical Technique by Procedures
- 14.5. Other Ultra-Mini-Invasion Breakthroughs
- 14.6. Comparison between the Different Techniques

Module 15. Robotic Surgery in Gynecology

- 15.1. Introduction and Advantages of Robotic Surgery
- 15.2. Different Types of Robotic Systems
 - 15.2.1. Da Vinci System
 - 15.2.2. Zeus System
 - 15.2.3. Amadeus-Titan System
 - 15.2.4. Others
- 15.3. Instrumentation in Robotic Surgery
- 15.4. *Docking and Setting* Surgical Robots
- 15.5. Comparison between the Robotic Pathway and Other Pathways
- 15.5. Financial Factors and Robotic Efficiency
- 15.6. Complications in Robotic Surgery
- 15.7. *Single-Port* in Robotics
- 15.8. New Developments in Robotics

07

Clinical Internship

Once the theoretical learning phase is completed, the specialist will enjoy a practical experience in a hospital center for 3 weeks. You will also join a multidisciplinary medical team with whom you will learn about the latest procedures in Minimally Invasive Surgery applied to Gynecology. And they will do so in a real working environment in which he will apply different innovative techniques in this clinical area.





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*Do your clinical internship in one of
the best international hospital centers"*

The Internship Hybrid Professional Master's Degree consists of a practical stay in a prestigious transfer center, a 3-week period, from Monday to Friday with 8 consecutive hours of work with an on the subject specialist. This stay will allow the student to deal with real patients alongside a team of professionals of reference in the surgical area, applying the most updated intervention techniques to address various gynecological pathologies.

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.

It is, without any doubt, an excellent opportunity to assimilate new skills through a real experience in a state-of-the-art medical environment, where performing rigorous and safe interventions is the basis for guaranteeing the patient's quality of life.

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 that facilitate teamwork and multidisciplinary integration as transversal competencies for Current Pediatric practice (learning to be and learning to relate).



The procedures described below will form the basis of the practical part of the internship, and their implementation is subject to both the suitability of the patients and the availability of the center and its workload, with the proposed activities being as follows:

Module	Practical Activity
Hysteroscopic and Laparoscopic Surgery in Endometriosis	Based Interventions as the use of the techniques of uterine morcellation and myoma morcellation laparoscopically in a watertight fashion to reduce the Probability of dissemination in case of uterine sarcoma Pediatric Dental
	Reducing patient bleeding in laparoscopic myomectomy through the application of updated medical strategies.
	Solvent and safe management of Endometriosis in the rectal vaginal and ovarian septum.
Ultra mini-invasive surgery and laparoscopic suturing	Perform surgery on a patient using single-port surgery.
	Operate on patients with various gynecological pathologies through surgery without access ports
	Suture the wound of the patient undergoing surgery by conventional or vascular methods.
Pathology pelvic floor and benign uterine	Diagnose the extent of the patient's pelvic floor pathology and determine if her situation requires surgical intervention.
	Perform a surgical procedure to remove uterine fibroids through laparoscopic myomectomy.
	Perform genital prolapse surgery, using the most up-to-date techniques according to the latest scientific evidence.
Robotic Surgery in Gynecology	Performing surgery on a patient using trocarless surgery management entry trocarless surgery
	Perform surgery using state-of-the-art methods such as the Da Vinci or Zeus System.
	Urgent intervention to solve possible complications that may arise during robotic surgery.

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 program agreement shall be 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.

08

Where Can I Do the Clinical Internship?

In the final stretch of this blended Master, a practical stay in a reputed prestigious hospital is contemplated, where the student will develop all the knowledge acquired during the duration of the program in a real environment. In addition, the geographical variety of centers offered by TECH for this experience will allow students to choose the option that best suits their needs.





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Surrounded by the best experts in gynecologic laparoscopy and in a state-of-the-art medical environment, you will transfer the theoretical knowledge acquired in this program into practice"



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



Medicine

Hospital Maternidad HM Belén

Country	City
Spain	La Coruña

Management: R. Filantropía, 3, 15011, A Coruña

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Update in Assisted Reproduction
- Hospitals and Health Services Management



Medicine

Hospital HM Rosaleda

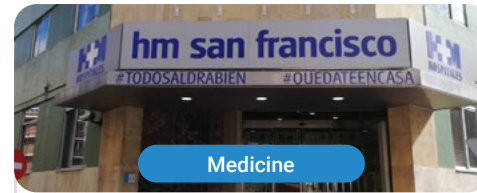
Country	City
Spain	La Coruña

Management: Rúa de Santiago León de Caracas, 1, 15701, Santiago de Compostela, A Coruña

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Hair Transplantation
- Orthodontics and Dentofacial Orthopedics



Medicine

Hospital HM San Francisco

Country	City
Spain	León

Management: C. Marqueses de San Isidro, 11, 24004, León

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Update in Anesthesiology and Resuscitation
- Nursing in the Traumatology Department



Medicine

Hospital HM Regla

Country	City
Spain	León

Management: Calle Cardenal Landázuri, 2, 24003, León

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Update on Psychiatric Treatment in Minor Patients



Medicine

Hospital HM Nou Delfos

Country	City
Spain	Barcelona

Management: Avinguda de Valcarca, 151, 08023 Barcelona

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Aesthetic Medicine
- Clinical Nutrition in Medicine



Medicine

Hospital HM Madrid

Country	City
Spain	Madrid

Management: Pl. del Conde del Valle de Súchil, 16, 28015, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Palliative Care
- Anaesthesiology and Resuscitation



Medicine

Hospital HM Montepíncipe

Country	City
Spain	Madrid

Management: Av. de Montepíncipe, 25, 28660, Boadilla del Monte, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Palliative Care
- Aesthetic Medicine



Medicine

Hospital HM Torrelodones

Country	City
Spain	Madrid

Management: Av. Castillo Olivares, s/n, 28250, Torrelodones, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Anaesthesiology and Resuscitation
- Palliative Care



Medicine

Hospital HM Sanchinarro

Country	City
Spain	Madrid

Management: Calle de Oña, 10, 28050, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Anaesthesiology and Resuscitation
- Palliative Care



Medicine

Hospital HM Nuevo Belén

Country	City
Spain	Madrid

Management: Calle José Silva, 7, 28043, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- General and Digestive System Surgery
- Clinical Nutrition in Medicine



Medicine

Policlínico HM Distrito Telefónica

Country	City
Spain	Madrid

Management: Ronda de la Comunicación, 28050, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Optical Technologies and Clinical Optometry
- General and Digestive System Surgery



Medicine

Policlínico HM Gabinete Velázquez

Country	City
Spain	Madrid

Management: C. de Jorge Juan, 19, 1° 28001, 28001, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Clinical Nutrition in Medicine
- Aesthetic Plastic Surgery



Medicine

Hospital HM Puerta del Sur

Country	City
Spain	Madrid

Management: Av. Carlos V, 70, 28938, Móstoles, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Palliative Care
- Clinical Ophthalmology



Medicine

Policlínico HM Cruz Verde

Country	City
Spain	Madrid

Management: Plaza de la Cruz Verde, 1-3, 28807, Alcalá de Henares, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Advanced Clinical Podiatry
- Optical Technologies and Clinical Optometry



Medicine

Policlínico HM La Paloma

Country	City
Spain	Madrid

Management: Calle Hilados, 9, 28850, Torrejón de Ardoz, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Advanced Operating Room Nursing
- Orthodontics and Dentofacial Orthopedics



Medicine

Policlínico HM Las Tablas

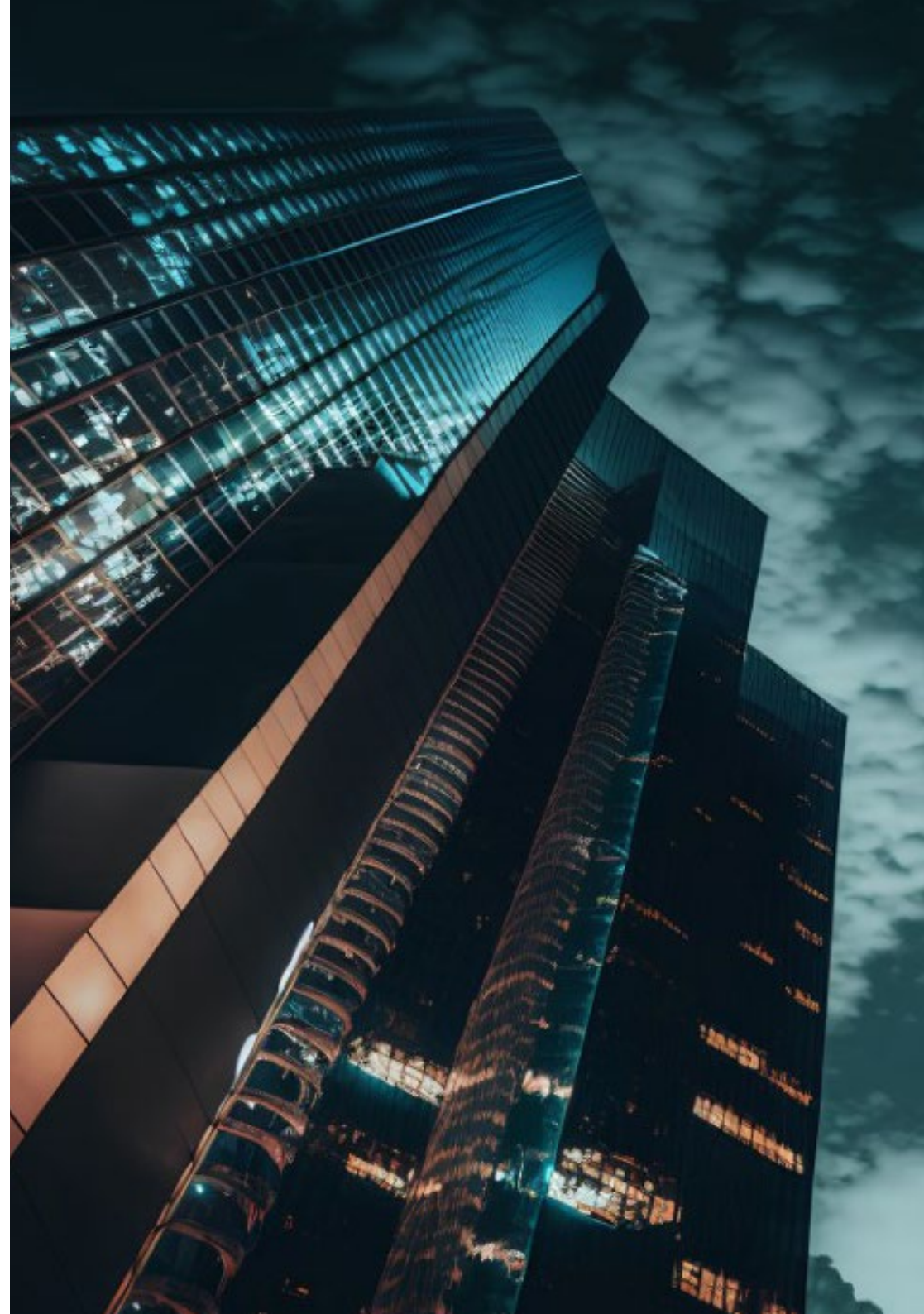
Country	City
Spain	Madrid

Management: C. de la Sierra de Atapuerca, 5, 28050, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Nursing in the Traumatology Department
- Diagnosis in Physiotherapy





Policlínico HM Moraleja

Country	City
Spain	Madrid

Management: P.º de Alcobendas, 10, 28109, Alcobendas, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Rehabilitation Medicine in Acquired Brain Injury Management



Policlínico HM Sanchinarro

Country	City
Spain	Madrid

Management: Av. de Manoteras, 10, 28050, Madrid

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Minimally Invasive Gynecologic Surgery



Policlínico HM Rosaleda Lalín

Country	City
Spain	Pontevedra

Management: Av. Buenos Aires, 102, 36500, Lalín, Pontevedra

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Advances in Hematology and Hemotherapy
- Neurological Physiotherapy



Policlínico HM Imi Toledo

Country	City
Spain	Toledo

Management: Av. de Irlanda, 21, 45005, Toledo

Network of private clinics, hospitals and specialized centers distributed throughout Spain.

Related internship programs:

- Electrotherapy in Rehabilitation Medicine
- Hair Transplantation

09

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.



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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"

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. Gervas, 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:

1. 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.



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.



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.



10 Certificate

The Professional Hybrid Professional Master's in Minimally Invasive Surgery in Gynecology guarantees students, in addition to the most rigorous and up-to-date education, access to a Professional Master's Hybrid issued by TECH Technological University.



“

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

This **Hybrid Professional Master's Degree in Home Hospitalization for Nursing** contains the most complete and up-to-date program on the professional and academic field.

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

In addition to the Certificate, students will be able to obtain an academic transcript, as well as a certificate outlining the contents of the program. In order to do so, students should contact their academic advisor, who will provide them with all the necessary information.

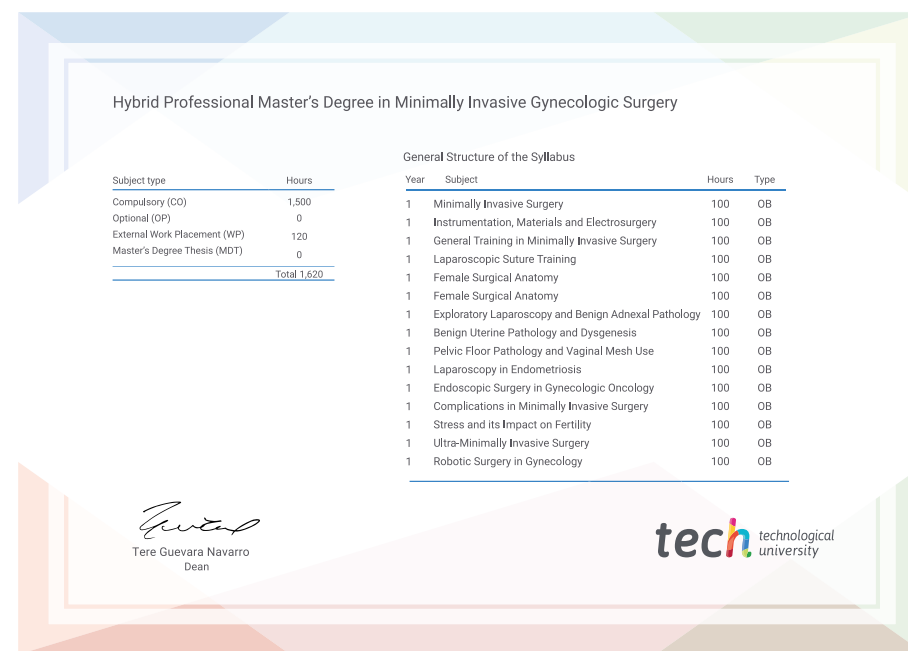
Title: **Hybrid Master's Degree in Minimally Invasive Surgery in Gynecology**

Modality: **Hybrid (Online + Clinical Internship)**

Duration: **12 months.**

Certificate: **TECH Technological University**

Teaching Hours: **1,620 hours.**



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



Hybrid Professional Master's Degree
Minimally Invasive
Gynecologic Surgery

Modality: Hybrid (Online + Clinical Internship)

Duration: 12 months.

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Teaching Hours: 1,620 hours.

Hybrid Professional Master's Degree

Minimally Invasive
Gynecologic Surgery

