



Professional Master's Degree

Foot and Ankle Surgery

» Modality: online

» Duration: 12 months

» Certificate: TECH Technological University

» Dedication: 16h/week

» Schedule: at your own pace

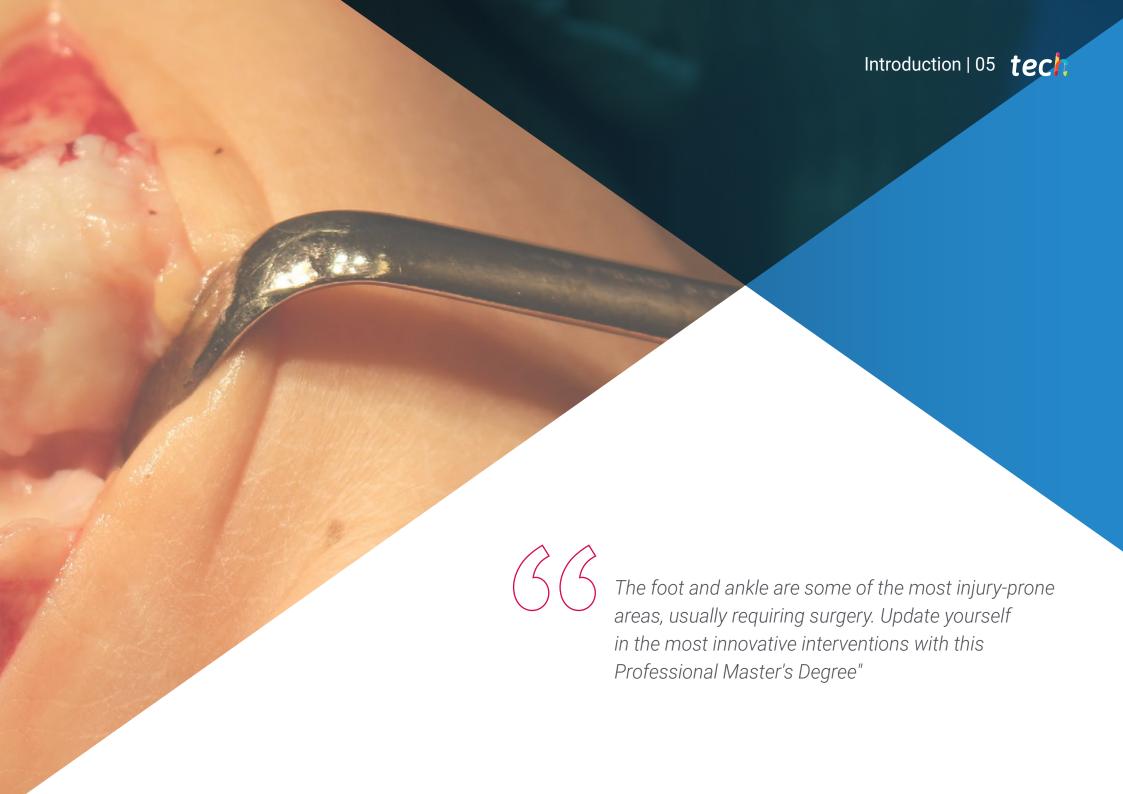
» Exams: online

Website: www.techtitute.com/in/medicine/professional-master-degree/master-foot-ankle-surgery

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The foot and ankle are two of the most injury-prone areas of the human body due to their role in tasks such as walking, running and jumping. These are parts of the human morphology subject to great stress and for that reason, they tend to fracture and suffer various pathologies that require careful attention by doctors.

However, in order to carry out this surveillance and apply the correct treatments and surgical interventions, specific and in-depth knowledge is required. This Professional Master's Degree in Foot and Ankle Surgery offers physicians and professionals in traumatology and orthopedics the necessary skills to perform all types of surgeries applied to these areas of the body.

In this way, throughout this degree, specialists will be able to delve into all types of surgical operations on feet and ankles. Surgeons and physicians taking this program will therefore be able to delve into different surgical techniques applied to injuries of the forefoot, such as Hallux Valgus or metatarsalgia, the midfoot and rearfoot, such as plantar fasciitis, or the ankle, such as osteoarthritis and other pathologies.

All of this through an innovative program, completely online, with no presential classes or fixed schedules. The specialists will be free to adapt the syllabus to their own pace, being able to download it in its entirety from the virtual campus. As such, they will gain access to a must-have reference guide to Foot and Ankle Surgery, with high-level multimedia content provided by experts with many years of experience in the field.

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

- The development of practical cases presented by experts in Foot and Ankle Surgery.
- 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.
- Practical exercises where the self-assessment process can be carried out to improve learning.
- Its special emphasis on innovative methodologies
- 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



This is one of the most sought-after and demanding areas of surgical specialization, so this update will be decisive in your medical practice"



This qualification contains all the most rigorous knowledge so that you can incorporate the most successful Foot and Ankle Surgery methodology and approaches into your clinical practice"

The program's teaching staff includes professionals from the sector who contribute their work experience to this educational program, as well as renowned specialists from leading societies and prestigious universities.

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

This program is designed around Problem-Based Learning, whereby professionals must try to solve the different professional practice situations that arise during the academic year. For this purpose, the student will be assisted by an innovative interactive video system created by renowned and experienced experts.

You will have access to high quality multimedia topics, with detailed videos and real cases of advanced surgical techniques in Foot and Ankle Surgery.

> It delves into fractures of different types, including topics on fractures of the tarsometatarsal joint, complex malleolar or Lisfranc fractures.







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General Objectives

- Establish the causes of pathologies for a better understanding of foot and ankle disorders
- Determine the origin of congenital injuries, as well as the analysis of foot, gait and footprint, static and dynamic for the prognosis of injuries or alterations
- Demonstrate the different alternatives of comprehensive assessment of the foot and ankle, with new tools for analysis and management of foot problems
- Analyze the factors that predispose the athlete to suffer injuries
- Develop key concepts of microsurgery, soft tissue grafting and osteomyelitis



Exceed your most demanding expectations with this Professional Master's Degree, which covers both the theoretical and practical aspects of Foot and Ankle Surgery through numerous real and simulated cases"







Specific Objectives

Module 1. Morphophysiology and Biomechanics of the Foot and Ankle

- Identify the anatomical and functional details of the biomechanics of the foot and gait
- Establish assessment schemes in the pathologies presented
- Examine the different clinical and paraclinical studies for the comprehensive study of the foot
- Determine the anesthetic and analgesic alternatives that are frequently used in these pathologies
- Compile the alternatives of procedures or treatments in nail bed lesions
- Consider the use of supports and insoles in multiple gait or running disorders
- Establish study patterns and analysis of the complexity of neuropathy in the foot, as well as complications and management

Module 2. Sports Injuries and Shockwave-Induced Surgery

- Identify predisposing factors for sports injuries
- Review athlete assessment techniques
- Explain specific surgical techniques for high-performance athletes in tendon injuries of the foot and ankle
- Review indications for orthobiologic treatment of foot and ankle sports injuries
- Review ligament injuries of the foot and ankle in high-performance athletes
- Review the indications and technique of shockwave-induced surgery

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Module 3. Foot and Ankle Fractures

- Expose the ideal methods for the assessment of fractures with emphasis on anatomy and biomechanics that allow a better appropriate management of such injuries
- Establish a physical assessment algorithm to determine the type of injury presented by the patient with fractures around the foot and ankle
- Mention radiological or paraclinical studies useful in the diagnosis of fractures and ruling out associated injuries
- List alternatives of osteosynthesis material for each fracture and associated injuries
- Minimize complications and recovery time after patient's surgeries
- Propose treatment alternatives in the case of patients with various consolidation disorders in foot and ankle surgery

Module 4. Forefoot: Pathologies of the First Radius

- Develop the anatomical and pathophysiological basis of the problems affecting the first radius of the forefoot
- Examine the best and specific surgical techniques for each problem affecting the first radius and evaluate the pros and cons of each surgical option
- Analyze the most frequent complications and how to avoid them

Module 5. Forefoot: Pathologies of Triphalangeal and Metatarsal Toes

- Examine the anatomical and pathophysiological basis of the problems affecting metatarsalgia and triphalangeal toes
- Assess the different complementary tests for the determination and staging of metatarsalgia and triphalangeal toes
- Determine the ideal conservative or surgical treatment options and know how to establish a therapeutic algorithm
- Acquire knowledge about the most frequent complications and how to avoid them



Module 6. Midfoot Pathologies

- Compile the topographic anatomy, as well as the osteoarticular anatomy for correct anamnesis
- Review the main approaches used in open surgery as well as minimally invasive surgery
- Develop the main surgical techniques, material used and tips & tricks

Module 7. Hindfoot Pathology

- Develop European guidelines and those of the most important societies, as well as update the literature and articles of interest
- Specify the surgical indications and their decision algorithm
- Establish contraindications as well as special situations

Module 8. Foot and Ankle Arthroscopy

- Understand the operation of the arthroscope to optimize its use
- Analyze arthroscopic surgical techniques in the foot and ankle
- Establish the frequent complications and how to avoid them
- Update inclusion and exclusion criteria for patients who are candidates for foot and ankle arthroscopy
- Review cases presented in the literature on novel techniques in foot and ankle arthroscopy

Module 9. Ankle Arthrosis and Arthroplasty

- Generate specialized knowledge on the pathophysiology of ankle osteoarthritis
- Develop the most innovative surgical techniques for the treatment of ankle osteoarthritis
- Determine the criteria for the selection of the ideal patients for each surgical technique
- Mention frequent complications and how to avoid them
- Update inclusion and exclusion criteria for patients who are candidates for ankle prosthesis treatment
- Analyze in depth the basic principles and biomechanics of ankle prostheses

Module 10. Reconstruction of Cutaneous Defects of the Foot and Ankle Osteomyelitis of bones of the foot and ankle

- Understand the pathophysiology of osteomyelitis
- Examine the anatomy of the leg, ankle, and foot area to develop anatomical guides
- Determine high and low complexity techniques to provide a range of options
- Select the appropriate graft or flap based on the type of defect present
- List criteria for selection of ideal patients for each surgical technique
- Detail indispensable principles for the realization of a graft or flap in the coverage of skin defects at the level of the foot and ankle





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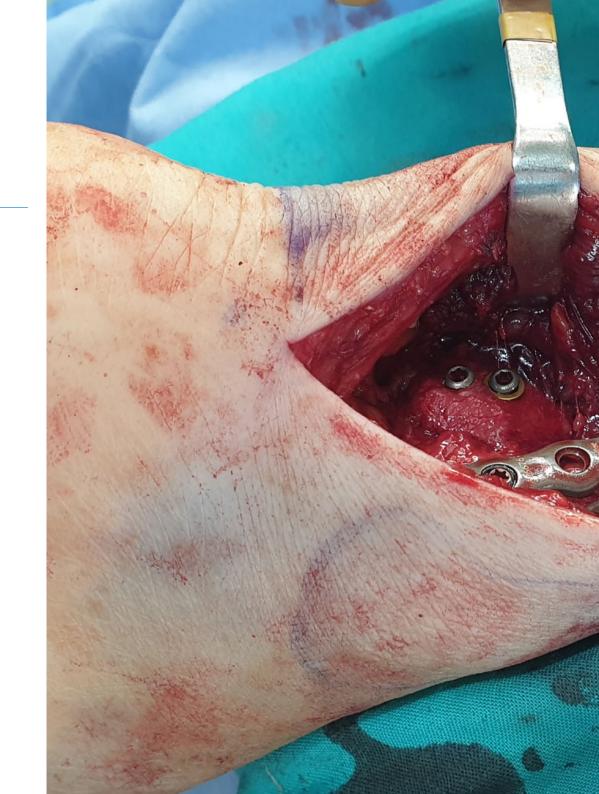


General Skills

- Examine the physical assessment of the athlete in the office and on the playing field
- Diagnose intrinsic foot factors and triggers of disorders
- Accurately assess and diagnose fractures, with probable associated injuries for surgical management if indicated for early recovery of patients
- Determine the best complementary tests and possible pre-treatment studies
- · Assess, in the clinical history and physical examination, the main causes
- Develop treatment algorithms and description of current surgical techniques
- Implement a treatment and approach guide for this type of complications



Expand your most distinguished skills with the latest research and advances in Soft Tissue Reconstruction, Foot and Ankle Immobilizations and Orthoses, and Diagnostic Imaging"







Specific Skills

- Assess the physical examination and the aspects to be taken into account in the problems of triphalangeal toes
- Determine arthroscopic techniques for different procedures and pathologies of the foot and ankle
- Approach, in a comprehensive manner, the degenerative and articular cartilage pathology at the ankle level
- Analyze the different orthoses and their alternatives for the functional reincorporation of patients with sequelae
- Determine the criteria for the selection of ideal patients for arthroscopy
- Develop treatment guidelines to facilitate the understanding of reconstruction of soft tissue defects
- Determine the specific and ideal surgical techniques for each problem affecting the metatarsalgia, triphalangeal toes and fifth toe, the pros and cons of each surgical option
- Know how to assess the different complementary tests for the evaluation and staging of the pathologies of the first radius
- Plan in detail the management, clinical and surgical approach, single or multiple, of fractures of the foot and ankle
- Systematize fracture surgical options





Management



Dr. Pacheco Gutiérrez, Victor Alexander

- Specialist in Orthopedics and Sports Medicine, Dr. Sulaiman Al Habib Hospital
- Specialist, Department of Shoulder and Elbow Orthopedics and Sports Medicine, La Isabelica Clinical Center
- Medical Advisor, Venezuelan Cycling Federation
- Medical advisor to several baseball clubs and to the Carabobo Boxing Association
- Degree in Medicine, University of Carabobo
- Specialty in Orthopedics and Traumatology, Dr. Enrique Tejera Hospital City

Professors

Dr. Ballester Alomar, Manel

- Head of Orthopedic Surgery and Traumatology at Hospital Mataró, Barcelona
- Coordinator of the Traumatology Group of Creu Blanca Clinic
- Head of the foot/ankle pathology, surgery and sports traumatology unit
- at Creu Blanca Clinic
- Responsible and Coordinator of the Emergency Department of Creu Blanca Clinic
- Medical Coordinator of the surgical area of Creu Blanca Clinic
- Degree in Medicine and Surgery from the Autonomous University of Barcelona
- Specialist in Orthopedic Surgery and Traumatology at the Mataró Hospital
- Fellowship in the Department of Foot and Ankle Surgery at the University Hospital Balgrist Klinik in Zurich, Switzerland

Dr. López Guevara, Daniel

- Medical Sonographer and specialist in Traumatology and Orthopedics in SAMAM Clinic
- Medical specialist in Traumatology and Orthopedic Surgery in various clinical centers in the city of Valencia
- Medical specialist in Traumatology and Orthopedics in the Upper Limb and Reconstructive Microsurgery Unit of the Hospital City Dr. Enrique Tejera
- Graduated in Medicine and Surgery at the University of Carabobo, Venezuela
- Specialist in Traumatology and Orthopedics at the Dr. Enrique Tejera Hospital City

Dr. Morrillo, Francisco

- Specialist Physician at the Traumatology and Orthopedics Service of the Angel Larralde University Hospital
- General Physician at the Coca-Cola FEMSA Medical Service
- Medical Specialist in Traumatology and Orthopedics at Hospital Molina Sierra IVSS
- Graduated in Medicine and Surgery at the University of Carabobo
- Specialist in Traumatology and Orthopedics at the University Hospital Dr. Angel Larralde.
- Master's Degree in Hand Surgery at the University of Barcelona

Dr. Díaz Figueroa, Omar

- Specialist in Reconstruction of Complex Extremity Injuries at the Central Hospital of Valencia
- Specialist in Hand Surgery and Reconstructive Microsurgery at Guerra Mendez Medical Center
- Graduated in Medicine and Surgery at the University of Carabobo
- Specialist in Traumatology and Orthopedics at the University Hospital Dr. Angel Larralde
- Sub-specialist in Hand Surgery and Reconstructive Microsurgery at The Campbell Clinic - Hand Surgery and Reconstructive, in Memphis, USA

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Dr. Guerrero Forero, Santiago

- Orthopedic Foot and Ankle Surgeon and Instructor at the Foot and Ankle Clinic at San José Hospital
- Orthopedist and traumatologist at Country Clinic
- President of FLAMECIPP
- Orthopedist and Foot and Ankle Surgeon at Colmedica Medical Centers
- Orthopedist and traumatologist in Clinisanitas
- Head of the Orthopedics and Traumatology Service at Kennedy's Hospital Occidente
- Graduated in Medicine and Surgery at Nuestra Señora del Rosario College
- Specialist in Orthopedics and Traumatology at San Jose Hospital
- Sub-specialist in Foot and Ankle Surgery at Jackson Memorial Hospital, Miami

Dr. Lucar López, Gustavo

- Specialist in the Foot and Ankle Unit and Sports Traumatology at Creu Blanca Clinic
- Head of the Foot and Ankle Unit at Mataró Hospital
- Graduated in Medicine and Surgery at the University of Carabobo
- Specialist in Orthopedic Surgery and Traumatology at the Mataró Hospital

Dr. Mauro Reyes, José Francisco

- Specialist in Traumatology at the Julios Dopefner Hospital
- Specialist in Traumatology and Orthopedics at the University Military Hospital Carlos Arvel
- Graduated in Medicine and Surgery at the University of Carabobo
- Specialist in traumatology and orthopedics at the Military University Hospital Dr. Carlos Arvelo
- Fellowship in Reconstructive Foot and Ankle Surgery at the Foot and Ankle Surgery Unit of the Caracas Clinicas Hospital







- Specialist Physician at the Traumatology and Orthopedics Service of the Angel Larralde University Hospital
- Private practice specialist at the Metropolitan Hospital of the North
- Traumatologist doctor of the U-13 men's field soccer team in Venezuela
- Graduated in Medicine and Surgery at the University of Carabobo
- Specialist in Traumatology and Orthopedics at the University Hospital Dr. Angel Larralde

Dr. Ibarra Bolívar, Roraima Carolina

- Anesthesiologist at the Maternal and Child Hospital Julia Esther Gonzalez Delgado
- Anesthesiologist at Clinic Hospital Nataly
- Anesthesiologist at the Moderna Clinic Hospital
- Anesthesiologist at the Hospital Plant of the Technical University of Loja
- Graduated in Medicine and Surgery at the Rómulo Gallegos University
- Specialist in Anesthesiology at Hospital Militar Dr. Carlos Arvelo

Dr. Belandria Araque, Urimare

- Specialist in Foot and Ankle Surgery in the Traumatology and Orthopedic Surgery Unit of the Ana Francisca Pérez de León Hospital 2
- Specialist in Foot and Ankle Surgery, Traumatology and Orthopedic Surgery at Biomedical Forteza
- Specialist in Traumatology and Orthopedics at the Clinic Corazón y Vaso
- Graduated in Medicine and Surgery at the University of Los Andes
- Fellowship in Foot and Ankle Surgery at Caracas Clinicas Hospital
- Specialist in Orthopedic Surgery and Traumatology at the Military Hospital Dr. Carlos Arvelo







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Module 1. Morphophysiology and Biomechanics of the Foot and Ankle

- 1.1. Embryology and Anatomy of the Foot and Ankle
 - 1.1.1. Embryological Origin
 - 1.1.2. Foot Formation During Pregnancy
 - 1.1.3. Congenital Malformations of the Foot and Ankle
 - 1.1.4. Normal Foot Anatomy and Variations
 - 1.1.5. Foot Types
 - 1.1.6. Biomechanical and Functional Implications of Foot Variability
- 1.2. Semiological Anatomy
 - 1.2.1. Inspection
 - 1.2.2. Palpitation
 - 1.2.3. Active Mobility, Passive Mobility, Counter Resistance
 - 1.2.4. Assessment of the Foot, Ankle and Leg as a Whole
- 1.3. Gait Biomechanics
 - 1.3.1. Gait Cycles
 - 1.3.2. Normal Gait Components
 - 1.3.3. Normal Gait Prerequisites
 - 1.3.4. Positioning of the Foot and Ankle during Gait
 - 1.3.5. Factors Affecting Gait
- 1.4. Running Biomechanics
 - 1.4.1. Running Cycle
 - 1.4.2. Running Prerequisite
 - 1.4.3. Foot and Ankle Positioning
 - 1.4.4. Factors Affecting Running
- 1.5. Footstep Studies
 - 1.5.1. Conventional Studies
 - 1.5.2. Pressure and Baropodometry Study
 - 1.5.3. Dynamic Gait Examinations
 - 1.5.4. Use of Insoles According to Studies of the Footstep

- .6. Anesthesia in Foot and Ankle Surgery
 - 1.6.1. Conventional Anesthesia
 - 1.6.2. Echo-Guided Peripheral Nerve Blockade
 - 1.6.3. Peripheral Nerve Blockade with Neurostimulation
 - 1.6.4. Anatomical Local Anesthetic Blockade
- 1.7. Diagnostic Imaging of the Foot and Ankle
 - 1.7.1. Main Radiological Studies
 - 1.7.2. Complementary Studies and Projections of Foot and Ankle Pathologies
 - 1.7.3. MRI and CT Scans. Use, Indications
 - 1.7.4. Importance of Ultrasound in Various Pathologies
 - 1.7.5. Analysis of Radiological Studies of the Foot and Ankle
- 1.8. Principles of Diabetic Foot
 - 1.8.1. Classification and Stages
 - 1.8.2. Ulcerative Lesions
 - 1.8.3. Comprehensive Management
 - 1.8.4. Footwear and Supports
- .9. Immobilizations and Orthoses of the Foot and Ankle
 - 1.9.1. Clinical Assessment of Injuries
 - 1.9.2. Criteria for Conservative Management of Multiple Injuries
 - 1.9.3. Classic and Dynamic Immobilization
 - .9.4. Passive Foot and Ankle Orthoses
 - 1.9.5. Frequently Used Dynamic Orthoses
 - 1.9.6. Advantages and Disadvantages in the Use of Orthoses
- 1.10. Toenail Injuries
 - 1.10.1. Main Nail Pathologies
 - 1.10.2. Onychocryptosis, Clinical and Surgical Management
 - 1.10.3. Subsequent Handling Procedures on Nails

Module 2. Sports Injuries and Shockwave-Induced Surgery

- 2.1. Physical Assessment and Predisposing Factors in Athletes
 - 2.1.1. Intrinsic and Extrinsic Factors
 - 2.1.2. Physical Examination. Recommendations
 - 2.1.3. Static Assessment
 - 2.1.4. Dynamic Assessment
 - 2.1.4.1. Stability
 - 2.1.4.2. Mobility
 - 2.1.5. Impact
- 2.2. Tendinopathies and Plantar Fasciitis in the Athlete's Foot and Ankle
 - 2.2.1. Anatomy and Histology of the Tendon
 - 2.2.2. Literature Review
 - 2.2.3. Pathogenesis
 - 2.2.4. Common Tendinopathies of the Athlete
 - 2.2.5. Treatment
 - 2.2.6. Complications
- 2.3. Achilles Tendon Injuries in Professional Athletes
 - 2.3.1. Anatomy
 - 2.3.2. Literature Review
 - 2.3.3. Conservative Treatment
 - 2.3.4. Surgical Management
 - 2.3.4.1. Indications
 - 2342 Contraindications
 - 2.3.4.3. Preoperative Planning
 - 2.3.4.4. Approach
 - 2.3.4.5. Surgical Technique
 - 2.3.5. Complications
 - 2.3.6. Post-Operative Care

- 2.4. Peroneal Tendon Instability in Athletes
 - 2.4.1. Anatomy
 - 2.4.2. Literature Review
 - 2.4.3. Indications
 - 2.4.4. Contraindications
 - 2.4.5. Preoperative Planning
 - 2.4.6. Approach
 - 2.4.7. Surgical Technique
 - 2.4.8. Complications
 - 2.4.9. Post-Operative Care
- 2.5. Posterior Tibial Injuries in Athletes
 - 2.5.1. Anatomy
 - 2.5.2. Literature Review
 - 2.5.3. Indications
 - 2.5.4. Contraindications
 - 2.5.5. Preoperative Planning
 - 2.5.6. Approach
 - 2.5.7. Surgical Technique
 - 2.5.8. Complications
 - 2.5.9. Post-Operative Care
- 2.6. Ligament Injuries of the Athlete's Ankle
 - 2.6.1. Anatomy
 - 2.6.1.1. Medial Complex
 - 2.6.1.2. Lateral Complex
 - 2.6.2. Literature Review
 - 2.6.3. Non-Surgical Treatment

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2.7.

2.8.

2.9.

2.9.6. Recommendations

2.6.4.	Surgical Management				
	2.6.4.1. Indications				
	2.6.4.2. Contraindications				
	2.6.4.3. Preoperative Planning				
	2.6.4.4. Approach				
	2.6.4.5. Surgical Technique				
	2.6.4.6. Post-Operative Care				
2.6.5.	Complications				
Sports I	njuries in Immature Skeleton				
2.7.1.	Anatomy of the Immature Skeleton				
2.7.2.	Sever's Disease				
2.7.3.	Tendinopathies				
2.7.4.	Scaphoid Avascular Necrosis				
2.7.5.	Metatarsal Avascular Necrosis				
2.7.6.	Treatment				
2.7.7.	Complications				
2.7.8.	Recommendations				
Basic P	rinciples of Shockwaves				
2.8.1.	Physical Characteristics of Shockwaves				
2.8.2.	Types of Wave-Generating Equipment				
2.8.3.	Mechanical and Biological Effects: Mechanotransduction				
2.8.4.	Clinical Expression of the Shockwave Effect				
2.8.5.	Regulation of the Use of Shockwaves				
2.8.6.	Indications				
2.8.7.	Contraindications				
Shockw	raves and Sports Injuries of the Foot and Ankle				
2.9.1.	Indications				
2.9.2.	Protocol in Tendinopathies				
2.9.3.	Protocol in Bone Injuries				
2.9.4.	Contraindications				
295	Complications				





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2.10. Orthobiologicals in Sports Injuries

2.10.1. Uses of Hyaluronic Acid

2.10.1.1. Literature Review

2.10.1.2. Indications

2.10.1.3. Contraindications

2.10.1.4. Technique

2.10.1.5. Complications

2.10.1.6. Recommendations

2.10.2. Platelet-Rich Plasma

2.10.2.1. Literature Review

2.10.2.2. Recommendations for Use

2.10.2.3. Contraindications

2.10.2.4. Technique

2.10.2.5. Complications

2.10.2.6. Recommendations

Module 3. Foot and Ankle Fractures

3.1. Posterior Malleolar Fractures

- 3.1.1. Anatomy
- 3.1.2. Literature Review
- 3.1.3. Indications
- 3.1.4. Contraindications
- 3.1.5. Preoperative Planning
- 3.1.6. Approach
- 3.1.7. Surgical Technique
- 3.1.8. Complications
- 3.1.9. Post-Operative Treatment

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3.2.	Complex Malleolar Fractures			
	3.2.1.	Anatomy		
	3.2.2.	Literature Review.		
	3.2.3.	Indications		
	3.2.4.	Contraindications		
	3.2.5.	Preoperative Planning		
	3.2.6.	Approach		
	3.2.7.	Surgical Technique		
	3.2.8.	Complications		
	3.2.9.	Post-Operative Treatment		
3.3.	Acute a	and Chronic Syndesmosis Injuries		
	3.3.1.	Anatomy		
	3.3.2.	Literature Review.		
	3.3.3.	Indications		
	3.3.4.	Contraindications		
	3.3.5.	Preoperative Planning		
	3.3.6.	Approach		
	3.3.7.	Surgical Technique		
	3.3.8.	Complications		
	3.3.9.	Post-Operative Treatment		
3.4.	Tibial F	Tibial Pylon Fracture		
	3.4.1.	Anatomy		
	3.4.2.	Literature Review.		
	3.4.3.	Indications		
	3.4.4.	Contraindications		
	3.4.5.	Preoperative Planning		
	3.4.6.	Approach		
	3.4.7.	Surgical Technique		
	3.4.8.	Complications		
	3.4.9.	Post-Operative Treatment		

3.5.		ractures of the Neck and Body of the Talus			
		Anatomy			
	3.5.2.	Literature Review			
	3.5.3.	Indications			
	3.5.4.	Contraindications			
	3.5.5.	Preoperative Planning			
	3.5.6.	Approach			
	3.5.7.	Surgical Technique			
	3.5.8.	Complications			
	3.5.9.	Post-Operative Treatment			
3.6.	Fractures of the Forefoot and of the Diaphysis and Distal Segment of the Fifth Metatarsal				
	3.6.1.	Anatomy			
	3.6.2.	Literature Review			
	3.6.3.	Indications			
	3.6.4.	Contraindications			
	3.6.5.	Preoperative Planning			
	3.6.6.	Approach			
	3.6.7.	Surgical Technique			
	3.6.8.	Complications			
	3.6.9.	Post-Operative Treatment			
3.7.	Calcan	eal Fractures			
	3.7.1.	Anatomy			
	3.7.2.	Literature Review			
	3.7.3.	Indications			
	3.7.4.	Contraindications			
	3.7.5.	Preoperative Planning			
		Approach			
	3.7.7.	Surgical Technique			
		Complications			
	3.7.9.	Post-Operative Treatment			

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3.8. Scaphoid Fractures	3.8.	Sca	phoid	Fract	ures
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- 3.8.1. Anatomy
- 3.8.2. Literature Review
- 3.8.3. Indications
- 3.8.4. Contraindications
- 3.8.5. Preoperative Planning
- 3.8.6. Approach
- 3.8.7. Surgical Technique
- 3.8.8. Complications
- 3.8.9. Post-Operative Treatment

3.9. Lisfranc Fractures

- 3.9.1. Anatomy
- 3.9.2. Literature Review
- 3.9.3. Indications
- 3.9.4. Contraindications
- 3.9.5. Preoperative Planning
- 3.9.6. Approach
- 3.9.7. Surgical Technique
- 3.9.8. Complications
- 3.9.9. Post-Operative Treatment

3.10. Vicious Consolidation of Fractures of the Foot and Ankle

- 3.10.1. Anatomy
- 3.10.2. Literature Review
- 3.10.3. Indications
- 3.10.4. Contraindications
- 3.10.5. Preoperative Planning
- 3.10.6. Approach
- 3.10.7. Surgical Technique
- 3.10.8. Complications
- 3.10.9. Postoperative Treatment

Module 4. Forefoot: Pathologies of the First Radius

- 4.1. Anatomy
 - 4.1.1. Topographic Anatomy
 - 4.1.2. Osteoarticular and Ligament Anatomy
 - 4.1.3. Basic Biomechanics of the First Radius
- 4.2. Diagnostic Imaging
 - 4.2.1. Radiographic Anatomy
 - 4.2.2. Value of CT in the Pathologies of the First Radius
 - 4.2.3. Benefits of Magnetic Resonance in the Pathologies of the First Radius
- 4.3. Treatment Update
 - 4.3.1. Associated Problems in the First Radius
 - 4.3.2. Differentiating Hallux Valgus, Hallux Varus, Hallux Rigidus
 - 4.3.3. Problems Associated with the Sesamoid Complex
 - 4.3.4. Treatment Update on Hallux Valgus, Hallux Varus, Hallux Rigidus, and Sesamoid Complex Problems
 - 435 Current Controversies
- 4.4. Indications
 - 4.4.1. Assessment of Hallux Valgus
 - 4.4.2. Assessment of Hallux Rigidus
 - 4.4.3. Assessment of Hallux Varus
 - 4.4.4. Assessment of Sesamoid Problems
 - 4.4.5. Treatment Update on Hallux Problems
 - 4.4.6. Controversies
- 4.5. Contraindications
 - 4.5.1. Absolute Contraindications
 - 4.5.2. Relative Contraindications
 - 4.5.3. Multidisciplinary Control
- 4.6. Preoperative Planning
 - 4.6.1. Patient Optimization
 - 4.6.2. Preoperative Measures to Improve Results
 - 4.6.3. Multidisciplinary Management

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- 4.7. Approach Routes
 - 4.7.1. Medial Approach for First Radius Pathology
 - 4.7.2. Dorsal Approach for First Radius Pathology
 - 4.7.3. Minimally Invasive Approach to First Radius Problems
- 4.8. Surgical Technique
 - 4.8.1. Surgical Techniques for the Treatment of Hallux Valgus
 - 4.8.2. Surgical Techniques for the Treatment of Hallux Rigidus
 - 4.8.3. Surgical Techniques for the Treatment of Hallux Varus
 - 4.8.4. Surgical Techniques for the Treatment of Problems of the Sesamoid Complex
- 4.9. Complications
 - 4.9.1. Most Common Problems in the Treatment of Hallux Valgus and Hallux Varus
 - 4.9.2. Most Common Problems in the Treatment of Hallux Rigidus
 - 4.9.3. Most Common Problems in the Treatment of Sesamoid Problems
 - 4.9.4. Surgical Rescue Techniques for First Radius Problems
 - 4.9.5. Post-Surgical Infections and Treatment Options
 - 4.9.6. Other Complications
- 4.10. Post-Operative Care
 - 4.10.1. Post-Operative Guidelines for First Radius Surgery
 - 4.10.2. Controls and Follow-Up after First Radius Surgery
 - 4.10.3. Follow-Up Discharge

Module 5. Forefoot: Pathologies of Triphalangeal and Metatarsal Toes

- 5.1. Anatomy
 - 5.1.1. Topographic Anatomy
 - 5.1.2. Osteoarticular, Ligamentous and Muscular Anatomy
 - 5.1.3. Basic Biomechanics of the Metatarsal and Triphalangeal Toes
- 5.2. Diagnostic Imaging
 - 5.2.1. Radiographic Anatomy
 - 5.2.2. Value of CT in the Pathologies of the Metatarsal and Triphalangeal Toes
 - 5.2.3. Value of Magnetic Resonance Imaging in the pathology of the Metatarsal d and Triphalangeal Toes





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- 5.3. Problems Associated with Metatarsalgia and Triphalangeal Toes
 - 5.3.1. Concepts on the Associated Problems of Metatarsalgia and Triphalangeal Toes
 - 5.3.2. Types of Metatarsalgia and Metatarsophalangeal Complex Problems
 - 5.3.3. Problems Associated with Triphalangeal Toes
 - 5.3.4. Update on Metatarsalgia and Triphalangeal Toes
 - 5.3.5. Current Controversies
- 5.4. Indications to Problems Associated with Metatarsalgia and Triphalangeal Toes
 - 5.4.1. Assessment of Metatarsalgia and Metatarsophalangeal Complex Problems
 - 5.4.2. Assessment of Triphalangeal Toes
 - 5.4.3. Assessment of Fifth Radius or Toe Problems
 - 5.4.4. Treatment Update on Metatarsalgia and Metatarsophalangeal Complex Problems
 - 5.4.5. Current Controversies
- 5.5. Contraindications
 - 5.5.1. Absolute Contraindications
 - 5.5.2. Relative Contraindications
 - 5.5.3. Multidisciplinary Control
- 5.6. Preoperative Planning
 - 5.6.1. Patient Optimization
 - 5.6.2. Preoperative Measures to Improve Results
 - 5.6.3. Multidisciplinary Management
- 5.7. Approach Routes
 - 5.7.1. Types of Approach for Metatarsal and Metatarsophalangeal Pathology
 - 5.7.2. Approach to Triphalangeal Toe Problems
 - 5.7.3. Approach to Problems of the Fifth Radius
 - 5.7.4. Minimally Invasive Approach in Metatarsalgia and Metatarsophalangeal Complex Problems
- 5.8. Surgical Technique
 - 5.8.1. Surgical Techniques for the Treatment of Metatarsalgia and the Metatarsophalangeal Complex
 - 5.8.2. Surgical Techniques for the Treatment of Triphalangeal Toes
 - 5.8.3. Surgical Techniques for the Treatment of Fifth Radius

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5.9. Complications 5.9.1. Common Problems in the Treatment of Metatarsalgia and the Metatarsophalangeal Complex 5.9.2. Most Common Problems in the Treatment of Triphalangeal Toes

- 5.9.3. Most Common Problems in the Treatment of the Fifth Radius Problem
- 5.9.4. Surgical Rescue Techniques for Metatarsalgia and Triphalangeal Toe Problems
- 5.9.5. Post-Surgical Infections and Treatment Options
- 5.9.6. Other Complications
- 5.10. Post-Operative Care
 - 5.10.1. Post-Operative Guidelines for Metatarsalgia and Triphalangeal Toe Surgery
 - 5.10.2. Controls and Follow-up After Surgery for Metatarsalgia and Triphalangeal Toes
 - 5.10.3. Follow-up Discharge

Module 6. Midfoot Pathologies

- 6.1. Lapidus Arthrodesis
 - 6.1.1. Anatomy
 - 6.1.2. Literature Review
 - 6.1.3. Indications/Contraindications
 - 6.1.4. Surgical Technique
 - 6.1.5. Post-Operative
- 6.2. Osteoarthritis of the Tarsometatarsal Joint
 - 6.2.1. Anatomy
 - 6.2.2. Literature Review
 - 6.2.3. Indications/Contraindications
 - 6.2.4. Surgical Technique
 - 6.2.5. Post-Operative

- 6.3. Fractures of the Tarsometatarsal Joint
 - 6.3.1. Anatomy
 - 6.3.2. Literature Review
 - 6.3.3. Preoperative Planning
 - 6.3.4. Approach Routes
 - 6.3.5. Surgical Technique
 - 6.3.6. Post-Operative
- 6.4. Stress Fracture and Pseudoarthrosis of the Tarsal Navicular
 - 6.4.1. Anatomy
 - 6.4.2. Approach Routes
 - 6.4.3. Surgical Technique
 - 6.4.4. Post-Operative
- 6.5. Cuboid Fracture
 - 6.5.1. Anatomy
 - 6.5.2. Approach Routes
 - 6.5.3. Surgical Technique
 - 6.5.4. Post-Operative
- 6.6. Fractures of the Proximal Segment of the Fifth Metatarsal
 - 6.6.1. Anatomy
 - 6.6.2. Literature Review
 - 6.6.3. Surgical Technique
 - 6.6.4. Pseudarthrosis Surgical Treatment
 - 6.6.5. Post-Operative
- 6.7. Müller-Weiss Syndrome
 - 6.7.1. Literature Review
 - 6.7.2. Indications
 - 6.7.3. Contraindications
 - 6.7.4. Surgical Technique
 - 6.7.5. Post-Operative

- 6.8. Scaphoid-Astragalar Osteoarthritis
 - 6.8.1. Anatomy
 - 6.8.2. Literature Review
 - 6.8.3. Surgical Technique
 - 6.8.4. Pseudarthrosis Surgical Treatment
 - 6.8.5. Post-Operative
- 6.9. Charcot Neuropathy
 - 6.9.1. Charcot Neuropathy
 - 6.9.2. Indications/Contraindications
 - 6.9.3. Preoperative Planning
 - 6.9.4. Surgical Technique
 - 6.9.5. Complications
- 6.10. Treatment of Seguelae
 - 6.10.1. Acute Infection
 - 6.10.2. Chronic Infection
 - 6.10.3. Skin Defects
 - 6.10.4. Pseudarthrosis

Module 7. Hindfoot Pathology

- 7.1. Posterior Tibial Insufficiency
 - 7.1.1. Anatomy
 - 7.1.2. Indications/Contraindications
 - 7.1.3. Surgical Technique
 - 7.1.4. Post-Operative
- 7.2. Peroneal Tendon Injuries
 - 7.2.1. Anatomy
 - 7.2.2. Approach Route
 - 7.2.3. Surgical Technique
 - 7.2.4. Rescue Techniques
- 7.3. Achilles Injuries
 - 7.3.1. Anatomy
 - 7.3.2. Surgical Technique
 - 7.3.3. Rescue Techniques

- 7.4. Plantar Fasciitis
 - 7.4.1. Anatomy
 - 7.4.2. Surgical Technique
 - 7.4.3. Rescue Techniques
- 7.5. Pes Cavus
 - 7.5.1. Anatomy
 - 7.5.2. Surgical Technique
 - 7.5.3. Post-Operative
- 7.6. Subtalar Arthrodesis
 - 7.6.1. Indications/Contraindications
 - 7.6.2. Surgical Technique
 - 7.6.3. Post-Operative
- 7.7. Triple Arthrodesis
 - 7.7.1. Anatomy
 - 7.7.2. Approach Routes
 - 7.7.3. Surgical Technique
 - 7.7.4. Rescue Techniques
- 7.8. Posterior Tibial Nerve Compression
 - 7.8.1. Anatomy
 - 7.8.2. Surgical Technique
 - 7.8.3. Post-Operative
 - 7.8.4. Treatment of Seguelae
- 7.9. Osteochondral Injury of Talus
 - 7.9.1. Anatomy
 - 7.9.2. Approach Routes
 - 7.9.3. Surgical Technique
 - 7.9.4. Post-Operative
 - 7.9.5. Complications
- 7.10. Treatment of Seguelae
 - 7.10.1. Acute Chronic Infection
 - 7.10.2. Role of Arthroscopy in Sequelae
 - 7.10.3. Pseudarthrosis
 - 7.10.4. Rescue with External Fixator

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Module 8. Foot and Ankle Arthroscopy

- 8.1. Arthroscopy
 - 8.1.1. The Endoscope. Components
 - 8.1.2. Instruments for Foot and Ankle Arthroscopy
 - 8.1.3. The Operating Room for Foot and Ankle Arthroscopy
- 3.2. Patient Positioning on the Operating Table
 - 8.2.1. Articular Distractors for Ankle Arthroscopy
 - 8.2.2. Posterior Ankle Arthroscopy
 - 8.2.3. Anterior Ankle Arthroscopy
 - 8.2.4. Subtalar Arthroscopy
- 8.3. Arthroscopic Posterior Approach to the Ankle
 - 8.3.1. Arthroscopic Anatomy
 - 8.3.2. Indications
 - 8.3.3. Contraindications
 - 8.3.4. Surgical Technique
 - 8.3.5. Complications
 - 8.3.6. Post-Operative Care
- 8.4. Anterior Ankle Impingement
 - 8.4.1. Arthroscopic Anatomy
 - 8.4.2. Indications
 - 8.4.3. Contraindications
 - 8.4.4. Surgical Technique
 - 8.4.5. Complications
 - 8.4.6. Post-Operative Care
- 8.5. Posterior Ankle Impingement
 - 8.5.1. Arthroscopic Anatomy
 - 8.5.2. Indications
 - 8.5.3. Contraindications
 - 8.5.4. Surgical Technique
 - 8.5.5. Complications
 - 8.5.6. Post-Operative Care





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8.6. Arthroscopy of the First Metatarsophalangeal	Joint
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- 8.6.1. Anatomy
- 8.6.2. Literature Review
- 8.6.3. Indications
- 8.6.4. Contraindications
- 8.6.5. Scope of the Technique

8.7. Subtalar Arthroscopy

- 8.7.1. Arthroscopic Anatomy
- 8.7.2. Indications
- 8.7.3. Contraindications
- 8.7.4. Surgical Technique
- 8.7.5. Complications
- 8.7.6. Post-Operative Care

8.8. Tendoscopy

- 8.8.1. Anatomy
- 8.8.2. Indications
- 8.8.3. Contraindications
- 8.8.4. Preoperative Planning
- 8.8.5. Surgical Technique
- 8.8.6. Complications

8.9. Arthroscopic Reconstruction of Lateral Ankle Ligaments

- 8.9.1. Anatomy
- 8.9.2. Indications
- 8.9.3. Contraindications
- 8.9.4. Preoperative Planning
- 8.9.5. Surgical Technique
- 8.9.6. Complications

8.10. Arthroscopically Assisted Fractures

- 8.10.1. Indications
- 8.10.2. Contraindications
- 8.10.3. Preoperative Planning
- 8.10.4. Complications
- 8.10.5. Post-Operative Treatment

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Module 9. Ankle Arthrosis and Arthroplasty

- 9.1. Ankle Arthrosis
 - 9.1.1. Etiology
 - 9.1.2. Signs and Symptoms
 - 9.1.3. Image Interpretation
 - 9.1.4. Conservative Treatment Alternatives
- 9.2. The Role of Arthroscopy in Osteoarthritis of the Ankle
 - 9.2.1. Scope of Treatment
 - 9.2.2. Benefit of the Treatment
 - 9.2.3. Surgical Technique
- 9.3. Ankle Arthrodiastasis
 - 9.3.1. Scientific Evidence
 - 9.3.2. Indications
 - 9.3.3. Surgical Technique
- 9.4. Osteochondral Injury of the Heel
 - 9.4.1. Reconstructive Alternatives
 - 9.4.2. Scientific Evidence
 - 9.4.3. Surgical Technique
 - 9 4 4 Clinical Cases
- 9.5. Arthrodesis of Ankle
 - 9.5.1 Indications
 - 9.5.2. Contraindications
 - 9.5.3. Arthroscopic Ankle Arthrodesis
 - 9.5.4. Tibiotalar and Tibiotalocalcaneal Arthrodesis with Plates
 - 9.5.5. Tibiotalocalcaneal Arthrodesis with Retrograde Nailing
- 9.6. Supramalleolar Osteotomy in Ankle Osteoarthritis
 - 9.6.1. Indications
 - 9.6.2. Contraindications
 - 9.6.3. Surgical Technique
 - 9.6.4. Scientific Evidence

- 9.7. Total Ankle Arthroplasty
 - 9.7.1. Evolution of the Technique
 - 9.7.2. Implants
 - 9.7.3. The Winning Patient
 - 9.7.4. Indications
 - 9.7.5. Contraindications
 - 9.7.6. Complications
- 9.8. Total Ankle Arthroplasty with Osteochondral Defect of Talar Dome
 - 9.8.1. Definition
 - 9.8.2. Surgical Technique
 - 9.8.3. Post-Operative Management
- 9.9. Total Ankle Arthroplasty with Valgus Deformity
 - 9.9.1. Definition
 - 9.9.2. Surgical Technique
 - 9.9.3. Post-Operative Management
- 9.10. Total Ankle Arthroplasty with Varus Deformity
 - 9.10.1. Definition
 - 9.10.2. Surgical Technique
 - 9.10.3. Postoperative Management

Module 10. Reconstruction of Cutaneous Defects of the Foot and Ankle Osteomyelitis of Bones of the Foot and Ankle

- 10.1. Anatomy of the Foot and Ankle Applied to the Reconstruction of Skin and Bone Defects
 - 10.1.1. Functional Anatomy
 - 10.1.2. Anatomical Guide to Soft Tissue Reconstruction
 - 10.1.3. Anatomical Guide for Bone Tissue Reconstruction
- 10.2. General Principles of Soft Tissue Reconstruction
 - 10.2.1. Surgical Equipment
 - 10.2.2. Patient Assessment and Decision-Making
 - 10.2.3. Preparation and Initial Management of Skin Defects of the Foot and Ankle



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- 10.3. Soft Tissue Reconstruction with Low Complexity Procedures
 - 10.3.1. Negative Pressure Therapy
 - 10.3.2. Acellular Dermal Matrix
 - 10.3.3. Skin Grafts
- 10.4. Soft Tissue Reconstruction with Pedicled Regional Flaps
 - 10.4.1. Indications
 - 10.4.2. Preoperative Planning and Most Commonly Used Flaps
 - 10.4.3. Complications
- 10.5. Soft Tissue Reconstruction with Microsurgical Techniques
 - 10.5.1. Indications
 - 10.5.2. Preoperative Planning and Most Commonly Used Free Flaps
 - 10.5.3. Complications
- 10.6. Reverse Sural Flap
 - 10.6.1. Anatomy
 - 10.6.2. Flap Design
 - 10.6.3. Surgical Dissection Technique
- 10.7. Supramalleolar Flap
 - 10.7.1. Anatomy
 - 10.7.2. Flap Design
 - 10.7.3. Surgical Dissection Technique
- 10.8. Anterolateral Thigh Flap
 - 10.8.1. Anatomy
 - 10.8.2. Flap Design
 - 10.8.3. Surgical Dissection Technique
- 10.9. Antebrachial Radial Artery Flap
 - 10.9.1. Anatomy
 - 10.9.2. Flap Design
 - 10.9.3. Dissection Technique
- 10.10. Osteomyelitis of Bones of the Foot and Ankle
 - 10.10.1. Osteomyelitis
 - 10.10.2. Management of Bone Defects Secondary to Osteomyelitis
 - 10.10.3. Role of Soft Tissue Reconstruction in the Management of Foot and Ankle Infections





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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 | 45 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.

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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.

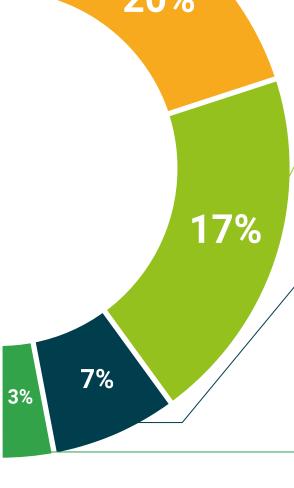
The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



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 50 | Certificate

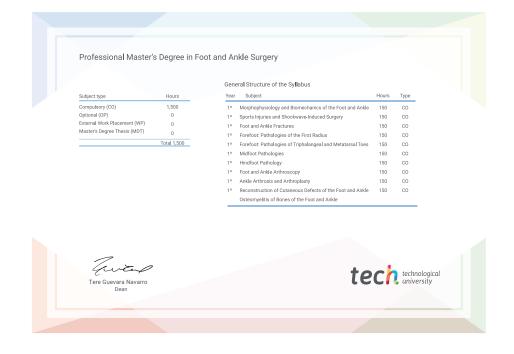
This **Professional Master's Degree in Foot and Ankle Surgery** contains the most complete and up-to-date scientific program on the market.

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

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

Title: **Professional Master's Degree in Foot and Ankle Surgery** Official N° of Hours: **1,500 h.**





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

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Professional Master's Degree

Foot and Ankle Surgery

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

