

# Professional Master's Degree

## Gynecologic Oncology



## Professional Master's Degree Gynecologic Oncology

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

Website: [www.techtitute.com/us/medicine/professional-master-degree/master-gynecologic-oncology](http://www.techtitute.com/us/medicine/professional-master-degree/master-gynecologic-oncology)

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# 01

# Introduction

The social and emotional burden of gynecologic cancer in current day society, is making it an area of increasing scientific and professional interest. The advances in surgery and gynecologic oncology make it essential for specialists to receive ongoing professional training in order to continue providing quality care to patients. This Professional Master's Degree provides an opportunity to bring your expertise up to date in a practical way.







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*New circumstances in Gynecologic Oncology have pushed us to introduce new educational programs that meet the real needs of experienced professionals, so that they can incorporate new advances into their daily practice"*

Gynecologic Oncology has undergone remarkable development in the past few years. Both specialties, gynecology and oncology, face increasingly complex challenges associated with the development of diagnostic and therapeutic techniques, as well as technological and informatics innovations and the use of biomaterials and new, much more conservative surgical procedures.

These developments force specialists to constantly update their knowledge and understanding, by studying the available evidence and developing new skills. This allows them to keep up with technological and social changes to improve patient health.

The Professional Master's Degree in Gynecologic Oncology allows the specialist to access this information in a practical way, without compromising on the science involved, adapting the process to their personal and professional needs.

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

- Development of more than 80 clinical cases, recorded with POV (Point Of View) systems from different angles, presented by experts in gynecology and other specialities. 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
- Presentation of practical workshops on procedures and techniques
- An algorithm-based interactive learning system for decision-making in the clinical situations presented throughout the course
- Action protocols and clinical practice guidelines, which cover the most important latest developments in this specialist area
- All of this will be complemented by theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments.
- With a special emphasis on evidence-based medicine and research methodologies in the surgical process
- Content that is accessible from any fixed or portable device with an Internet connection



*This Professional Master's Degree in Gynecologic Oncology contains the most complete and up-to-date scientific program on the market"*

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*This Professional Master's Degree may be the best investment you can make when selecting a refresher program for two reasons: in addition to updating your knowledge in Gynecologic Oncology, you will obtain a Professional Master's Degree from TECH Technological University"*

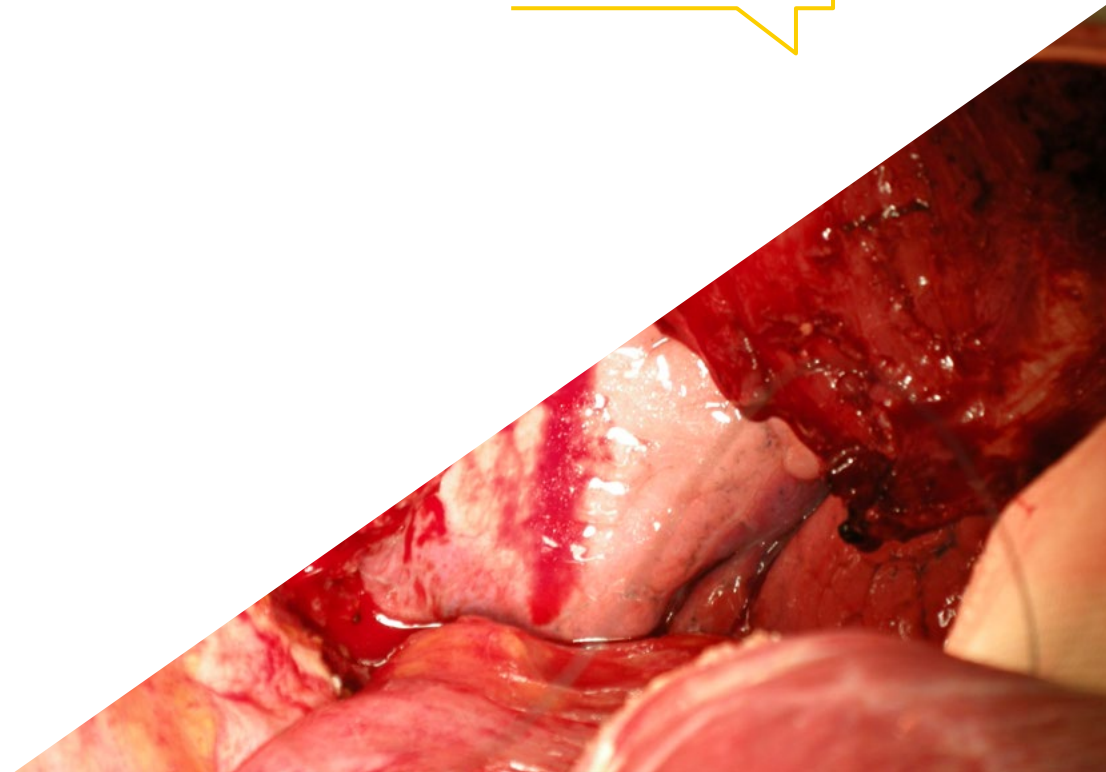
*Increase your decision-making confidence by updating your knowledge through this Professional Master's Degree.*

*Improve your medical-surgical practice in gynecologic oncology with this targeted program.*

The teaching staff comprises a team of renowned health professionals who bring their professional experience to the program, in addition to recognized specialists belonging to leading scientific societies.

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 an immersive training program to train in real situations.

This program is designed around Problem-Based Learning, whereby the professional must try to solve the different professional practice situations that arise throughout the program. For this reason, you will be assisted by an innovative, interactive video system created by renowned and experienced experts in the field of gynecology and oncology with extensive teaching experience.



# 02 Objectives

This professional refresher and recertification program is one of the first in the world and achieves the triple objective of updating scientific-technical knowledge (*Relearning*), updating specialists' professional skills (*Reskilling*), and updating professional certificates and accreditations (*Recertification*).







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*This refresher program will generate a sense of security in the performance of medical and surgical practice, and will help you grow professionally"*



## General Objective

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- Gain up-to-date, specialist knowledge of the procedures and techniques performed in gynecologic oncology, incorporating the latest advances in the discipline in order to increase the quality of daily medical practice

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*Take advantage of the opportunity and take the step to get up-to-date on the latest developments in Gynecologic Oncology”*







## Specific Objectives

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### Module 1. Biological Basis of Cancer

- ◆ Recognize and understand the molecular bases of carcinogenesis as well as its development and metastasis production
- ◆ Define the basis of cellular growth regulation
- ◆ Understand the role of carcinogens in the formation of genital cancer
- ◆ Gain up-to-date knowledge of cancer genetics
- ◆ Understand the cellular mechanisms of programmed cell death and apoptosis and their relationship and activity with malignant pathology
- ◆ Interpret the mechanisms of cancer production and distant metastasis at a molecular level
- ◆ Identify the origins of genetic alterations that provoke cancer
- ◆ Identify the epigenetic changes and oncogenes related with genital tract tumor pathology
- ◆ Explain the mechanisms tumor neof ormation in blood vessels
- ◆ Recognize respiratory symptomatology, such as that caused by pleural effusion, in the treatment of gynecologic cancer

### Module 2. Basis of Chemotherapy Treatment, Adverse Effects and New Therapies

- ♦ Identify the essentials for the use of chemotherapy in gynecologic oncology as well as adverse effects and complications
- ♦ Identify the basic factors that are involved in chemotherapy treatment
- ♦ Highlight the influence of chemotherapy in the cellular cycle
- ♦ Identify the action mechanisms of antineoplastic agents
- ♦ Recognize the mechanisms for the resistance of medical treatments in gynecologic cancer
- ♦ Gain up-to-date knowledge of toxicity and side effects
- ♦ Review the available antineoplastic drugs and their characteristics
- ♦ Identify cases in which patient observation can be used without using adjuvant treatment
- ♦ Understand the role of new tests such as positron emission tomography for cervical cancer
- ♦ Evaluate the role of tumor markers such as SCC
- ♦ Update the role of laparoscopy in the performance of radical hysterectomy and para-aortic staging lymphadenectomy for non-early tumor stages
- ♦ Evaluate the use of medical and surgical therapy in metastatic, recurrent or persistent illness
- ♦ Study and analyze the postoperative care of patients to identify any complications early on
- ♦ Appropriately assess the role of chemotherapy in gestational trophoblastic disease
- ♦ Manage the progression of pelvic tumor disease in the most effective way

### Module 3. Endometrial Cancer I

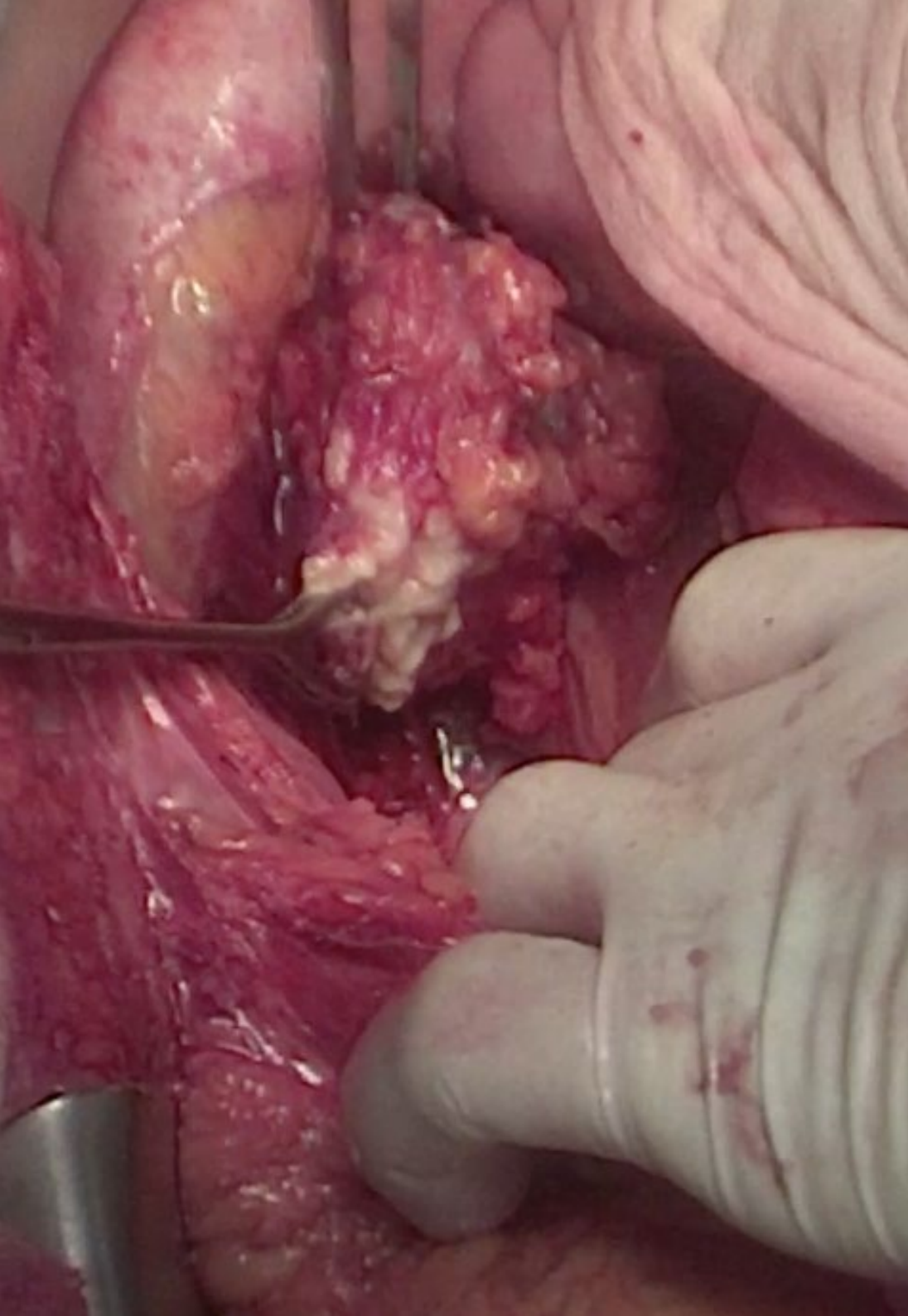
- ♦ Identify the different types of endometrial cancer and perform the appropriate diagnostic and disease extension methods
- ♦ Gain up-to-date knowledge on the epidemiology etiopathogenesis of endometrial cancer
- ♦ Evaluate patients with a family history of hereditary carcinomas such as Lynch Syndrome
- ♦ Understand the diagnostic process for endometrial cancer
- ♦ Implement new molecular diagnostic tests for premalignant and malignant endometrial pathology

- ♦ Know and apply surgical treatments appropriately in endometrial cancer
- ♦ Establish the different uses of the surgical approach both by laparotomy and laparoscopy in endometrial cancer, and update knowledge on the application of robotic surgery in endometrial cancer
- ♦ Review adjuvant therapeutic options after primary treatment of endometrial cancer
- ♦ Analyze the role of radiotherapy and adjuvant chemotherapy in endometrial cancer
- ♦ Understand the applications of hormonal treatment in endometrial cancer

### Module 4. Endometrial Cancer II

- ♦ Evaluate the distinct types of patients with endometrial cancer in order to implement the most appropriate treatment in each individual case
- ♦ Recognize precancerous endometrial lesions and apply the most appropriate treatment
- ♦ List the different histological types of endometrial cancer and the different tumor types
- ♦ Recognize and interpret the different imaging tests needed for the diagnosis and staging of endometrial cancer
- ♦ Interpret the distinct tumor markers and their use in the possible screening of endometrial cancer
- ♦ Classify endometrial pathology by FIGO prognostic classification
- ♦ Classify the different high and low-risk endometrial tumors
- ♦ Study the new surgical techniques for treating high risk endometrial cancer
- ♦ Gain up-to-date knowledge on the treatment of some specific endometrial tumors such as the clear cell and serous papillary types
- ♦ Review how to deal with recurring endometrial cancer including surgery, radiotherapy and / or chemotherapy as well as evidence on the follow-up treatment and prognosis of endometrial tumors





### Module 5. Cervical Cancer I

- ◆ Identify pre-invasive pathologies of the cervix and correctly apply early diagnosis methods
- ◆ Laparoscopic removal of pelvic sentinel lymph node
- ◆ Determine the etiology and etiopathogenesis of cervical cancer and its stages of development
- ◆ Gain up-to-date knowledge of the distant imaging techniques for diagnosing cervical cancer such as magnetic resonance and scanning
- ◆ Acquire up-to-date knowledge of the treatment for preinvasive cervical lesions including surgery and immunotherapy
- ◆ Identify the role of the sentinel node in cervical cancer and the pelvic sentinel node labeled with indocyanine green
- ◆ Gain up-to-date knowledge of the use of concurrent and neoadjuvant chemotherapy in cervical cancer
- ◆ Compare the characteristics of squamous cell carcinoma and cervical adenocarcinoma

### Module 6. Cervical Cancer II

- ◆ Classify and treat cervical cancers in the most appropriate way
- ◆ Know the risk factors for contracting the human papillomavirus
- ◆ Review the application of techniques for early diagnosis of cervical cancer and hereditary-familial diseases affecting the cervix
- ◆ Evaluate the role of FIGO and TNM classification in cervical cancer and its prognostic role
- ◆ Revise the different invasive surgical techniques for cervical cancer, especially the different types of radical hysterectomy with or without nerve preservation
- ◆ Identify the indications of chemotherapy and radiotherapy in cervical cancer
- ◆ Gain up-to-date knowledge of the invasive cervical adenocarcinoma and adenocarcinoma in situ

### Module 7. Ovarian Cancer I

- ♦ Identify patients at risk of ovarian cancer and perform a precise preoperative diagnosis
- ♦ Review the epidemiology and etiopathogenesis of ovarian and fallopian tube cancer
- ♦ Review the possibilities of screening by ultrasound and the tumor markers for the early detection of ovarian cancer
- ♦ Establish the new criteria for pathological and molecular classification of ovarian cancer
- ♦ Evaluate the different clinical manifestations, highlighting the value of ultrasound, magnetic resonance imaging and scanning in the diagnosis of ovarian cancer
- ♦ Analyze the role of tumor serological markers CA125, CA19.9, CEA, HE4 and other rare tumor serological markers in ovarian cancer
- ♦ Specifically analyze the role of complete cytoreduction and its prognostic implications
- ♦ Analyze the role of interval surgery in ovarian cancer and establish the most appropriate adjuvant chemotherapy steps and biological treatments for each case
- ♦ Identify the possibilities available for the follow-up of patients with ovarian cancer
- ♦ Analyze the controversies on the management of ovarian and fallopian tube cancer

### Module 8. Ovarian Cancer II

- ♦ Apply the most appropriate surgical or chemotherapy treatment for each case of ovarian cancer
- ♦ To evaluate STIC tubal lesions as precursors of ovarian cancer
- ♦ Gain up-to-date knowledge on hereditary-familial ovarian cancer and new predisposing genetic mutations
- ♦ Indicate the distinct pathological types of ovarian and fallopian tube cancer and relate them to the different diagnostic tests for studying the extension and initial diagnosis of each one
- ♦ Classify the different types of ovarian cancer according to the FIGO classification and determine the general surgical procedures of approach

- ♦ Evaluate when a patient should preferentially receive neoadjuvant chemotherapy for ovarian cancer
- ♦ Analyze the role of radiotherapy and hormone therapy in endometrial cancer
- ♦ Review and gain up-to-date knowledge on intraperitoneal chemotherapy treatments and hyperthermic therapy in ovarian and peritoneal cancer

### Module 9. Vulvar Cancer I

- ♦ Identify the premalignant pathology in the vulva and apply the appropriate diagnostic techniques in each case
- ♦ Interpret normal colposcopic and vulvar examination, and interpret abnormal findings on both colposcopic and vulvosopic examination
- ♦ Describe the etiology of vulva cancer and its relationship to recurrent HPV infection
- ♦ Assess the role of possible vulvar cancer screening and hereditary risk factors in pathological alterations
- ♦ Describe the different histological types of vulvar cancer and the most efficient tests for diagnosis and extension study
- ♦ Review the use of tumor markers in vulvar cancer
- ♦ Review the procedure for addressing a primary vulvar lesion
- ♦ Update on the management of advanced vulvar cancer, both primary tumor and lymph node chains
- ♦ Evaluate how to deal with a recurrent vulva carcinoma
- ♦ Review the follow-up care of vulvar cancer patients for early detection of recurrences
- ♦ Study the characteristics and treatment of tumors of the Bartholin's glands and basal cell carcinomas of the vulva

**Module 10. Vulvar Cancer II**

- ♦ Diagnose Invasive Paget's Disease of the vulva. Assess the most appropriate management for each case of the disease
- ♦ Review the etiopathogenesis of precancerous lesions of the vulva and VIN and VAIN lesions
- ♦ Review staging of vulvar cancer according to FIGO classification.
- ♦ Review the prevalence, and identify the types, clinical manifestations, diagnosis and treatment of non-invasive Paget's disease in the vulvar area
- ♦ Relate the clinical manifestations of invasive carcinoma of the vulva to its dissemination routes
- ♦ Revise the treatment and handling of the inguinal and pelvic ganglionic chains
- ♦ Assess the sentinel lymph node technique for vulvar pathology
- ♦ Analyze the role of chemotherapy and radiotherapy in advanced vulvar cancer
- ♦ Study the prognosis of the different types of vulva carcinoma.
- ♦ Evaluate the clinical and diagnostic characteristics as well as how to manage melanoma of the vulva
- ♦ Review the clinical aspects of verrucous carcinoma of the vulva and the different types of vulvar sarcoma, as well as their characteristics and management

**Module 11. Uterine Sarcoma I**

- ♦ Identify and classify the different anatomopathological forms of uterine sarcoma
- ♦ Appropriately manage early and advanced stage sarcomatous pathology of the uterus and adequate assessment of its prognosis
- ♦ Revise the epidemiology of a uterine sarcoma
- ♦ Acquire up-to-date knowledge of the anatomopathologic characteristics of the different histologic types of uterine sarcoma
- ♦ Evaluate the role of tumor markers in sarcoma of the uterus

- ♦ Review the indications and surgical techniques, as well as radiotherapy and chemotherapy, for the treatment of early stage uterine leiomyosarcoma
- ♦ Study the prognostic factors in uterine leiomyosarcoma
- ♦ Review the treatment and management of the early stages of endometrial stromal sarcoma

**Module 12. Uterine Sarcoma II**

- ♦ Identify and classify the different anatomopathological forms of uterine sarcoma
- ♦ Identify the risk factors associated with the development of a uterine sarcoma
- ♦ Review the different clinical manifestations of uterine sarcomas and the use of magnetic resonance in the diagnosis procedures
- ♦ Classify the uterine sarcomas according to the international FIGO classification model
- ♦ Gain up-to-date knowledge on the management of recurrent or metastatic disease in uterine leiomyosarcoma
- ♦ Analyze the management of recurrent endometrial stromal sarcoma
- ♦ Study the treatment of a metastatic disease and the prognostic factors of an endometrial stromal sarcoma
- ♦ Review the treatment and management of the early stages of undifferentiated endometrial sarcoma

### Module 13. Fertility Preservation

- ◆ Determine the different fertility preservation techniques in young patients and their oncological implications
- ◆ Identify the options for preserving fertility in gynecologic cancer, as well as gamete preservation
- ◆ Revise the surgical techniques for preserving fertility in each of the cancers affecting the female genital tract
- ◆ Update on the management of pregnant patients with gynecologic cancer
- ◆ Review new options for preserving ovarian tissue
- ◆ Gain up-to-date knowledge on the current status of uterine transplantation and the most recent results obtained to date

### Module 14. Uncommon Gynecologic Tumors

- ◆ Identify the different types of less common genital tumors and the corresponding treatment and evolution
- ◆ Revise the clinical manifestations and diagnosis of vaginal cancer
- ◆ Review the different histological types and classify the different types of vaginal cancer
- ◆ Evaluate and create an appropriate diagnostic and management plan for vaginal cancer
- ◆ Establish the follow-up plan for vaginal cancer to be able to detect and recurrences
- ◆ Identify the prognosis for each type of vaginal cancer
- ◆ Review the epidemiology of gestational trophoblastic disease and the clinical features of hydatidiform mole
- ◆ Study the clinical characteristic of gestational trophoblastic neoplasia
- ◆ Appropriately evaluate the different forms of gestational trophoblastic disease with imaging techniques
- ◆ Gain up-to-date knowledge of the histologic shapes of molar and invasive forms
- ◆ Appropriately perform staging of placental invasive disease
- ◆ Study the different types of surgical treatment suitable for treating the different forms of molar disease in pregnancy







- ◆ Recognize and implement the most appropriate methods for follow-up treatment of molar disease in pregnancy
- ◆ Appropriately classify the prognosis of gestational trophoblastic disease
- ◆ Identify and assess the different tumors that can metastasize in the female genital tract
- ◆ Study the way to deal with metastasized cancers in the genital tract
- ◆ Analyze and treat neuroendocrine tumors in the female genital tract
- ◆ Review the way to deal with tumors of the rectovaginal septum, as well as symptomatology associated with gynecological tumors
- ◆ Evaluate the pain, the different types and the treatment of these types of tumors
- ◆ Assess the presence of ascites in the context of gynecologic tumors in an appropriate way
- ◆ Classify edema and manage it appropriately
- ◆ Identify deep vein thrombosis and evaluate the most appropriate anticoagulant treatment for each case

#### **Module 15. Palliative Care and Nutrition**

- ◆ Study and understand the basis of palliative care and terminal phase of an oncological illness
- ◆ Evaluate the usefulness of PET-CT for the assessment of metabolism in suspected malignant lesions
- ◆ Gain up-to-date knowledge of gastrointestinal symptomatology
- ◆ Identify the distant metastasis and assess how to manage it
- ◆ Describe the indications and the surgical technique specific to palliative pelvic exenteration
- ◆ Comprehensive care of a dying patient and learning how to help them in the final phase of the disease
- ◆ Study and treat patients with anxiety and depression in a specific way

# 03 Competencies

After passing the assessments on the Professional Master's Degree in Gynecologic Oncology, the student will have acquired the necessary professional skills for quality, up-to-date practice based on the most recent scientific evidence.





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*With this program you will be able to master new diagnostic and treatment procedures for gynecologic oncology patients”*





## General Skills

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- ♦ 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 field of study
- ♦ Integrate knowledge and face the challenge of making judgements based on incomplete or limited information. In addition, include reflections on the social and ethical responsibilities linked to implementing this knowledge and judgement
- ♦ Know how to communicate conclusions, knowledge, and supporting arguments to specialized and non-specialized audiences in a clear and unambiguous way
- ♦ Acquire the learning skills that will enable further studying in a largely self-directed or autonomous manner







## Specific Skills

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- ♦ Develop within the profession in terms of working with other health professionals, acquiring skills to work as a team
- ♦ Recognize the need to maintain your professional skills and keep them up to date, with special emphasis on autonomous and continuous learning of new information
- ♦ Develop the capacity for critical analysis and professional research. Describe the biological principles of oncology procedures
- ♦ Identify and classify the different types of cancer found in the female reproductive system
- ♦ Determine the epidemiology and principle characteristics of oncology processes in women
- ♦ Establish the diagnostic and treatment procedures for the different types of cancer affecting women based on the latest advances in gynecologic oncology
- ♦ Identify the signs and symptoms specific to uterine sarcoma and the latest diagnostic and therapeutic procedures used to address them
- ♦ Describe the surgical procedures related to the different types of cancers affecting women
- ♦ Know ways in which to adequately preserve the fertility of a woman with cancer
- ♦ Identify new research paths and literature updates on gynecologic oncology
- ♦ Determine the signs and symptoms of infrequent tumors in women and identify new diagnostic and therapeutic procedures in their care
- ♦ Implement the correct form of medical practice to care for a dying patient, in accordance with the latest scientific evidence
- ♦ Highlight the main pathologies associated with eating disorders and the actions aimed at their prevention and treatment.



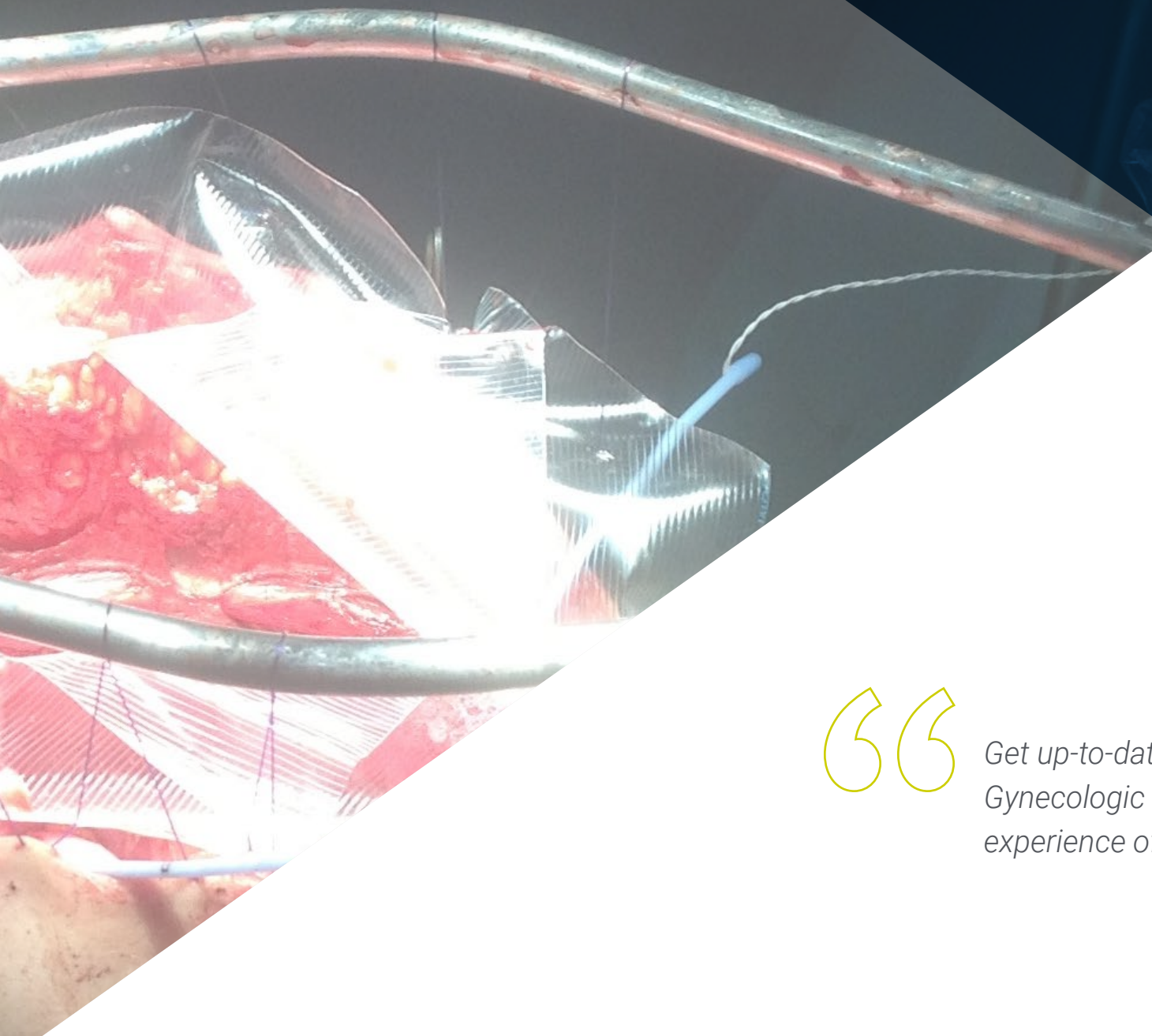
*A unique specialization course that will enable you to acquire superior education for development in this field".*

# 04

# Course Management

Including renowned international directors, all the content of this program is focused on the most current clinical practice. In this way, the specialist will have access to a privileged teaching content, enriched with a multitude of real examples and practical cases analyzed. In this way, the most outstanding advances in Gynecologic Oncology can be incorporated into daily practice, endorsed by recognized experts with multiple recognitions and accumulated clinical merits.





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*Get up-to-date with the latest advances in Gynecologic Oncology, supported by the experience of leading specialists in the field"*



## International Guest Director

Dr. Anil K. Sood is a leading gynecologic oncologist and scientist internationally recognized for his contributions to the study and treatment of Ovarian Cancer. In this regard, he has served as Vice Chair of Translational Research in the Departments of Gynecologic Oncology and Cancer Biology at The University of Texas MD Anderson Cancer Center, where he has also served as Co-Director of the RNA Interference and Non-Coding RNA Center. In addition, he has directed the Blanton-Davis Multidisciplinary Ovarian Cancer Research Program and co-led the Ovarian Cancer Moon Shot Program. In fact, his research focus has been on Cancer Biology, with emphasis on Angiogenesis, Metastasis and RNAi Therapy.

He has also pioneered the development of new strategies for the delivery of interfering RNA (siRNA) in cancer treatments, achieving significant advances in the creation of targeted therapies for targets previously considered “untreatable”. His research has also addressed the influence of Neuroendocrine Stress on tumor growth and the mechanisms of resistance to anticancer treatments. This research has allowed crucial advances in the understanding of how the tumor microenvironment and neural effects impact the progression of Gynecologic Cancer.

He is the recipient of multiple awards, including the Research Professor Award from the American Cancer Society and the Claudia Cohen Research Foundation Prize for Outstanding Researcher in Gynecologic Cancer. In turn, he has contributed more than 35 book chapters and numerous peer-reviewed scientific publications, as well as filing 11 patents and technology licenses. In short, his work has been instrumental in academia and clinical practice, where he has continued to share his expertise as an invited lecturer and leader in Gynecologic Cancer research.





## Dr. Sood, Anil K.

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- Vice Chair of Translational Research at MD Anderson Cancer Center, Texas, United States
- Co-Director of the Center for RNA Interference and Non-Coding RNA at MD Anderson Cancer Center
- Director of the Blanton-Davis Multidisciplinary Ovarian Cancer Research Program
- Co-Director of the Ovarian Cancer Moon Shot Program
- Fellow in Gynecologic Oncology at the University of Iowa Hospitals
- Doctor of Medicine from the University of North Carolina
- Member of: American Society for Clinical Investigation (ASCI), American Association for the Advancement of Science (AAAS) and Association of American Physicians (AAP)

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*Thanks to TECH, you will be able to learn with the best professionals in the world”*

## International Guest Director

Dr. Allan Covens is an international eminence in the field of **Gynecologic Oncology**. Throughout his distinguished professional career, the Postgraduate Diploma has investigated **germ cell tumors, Gestational Trophoblastic Disease, Cervical Cancer**, as well as radical and reconstructive surgical techniques. In particular, he is a reference for his medical innovations that, after different types of surgeries, aim at preserving the fertility of patients. Thanks to these contributions, he has accumulated more than 32 awards and grants.

In addition, this eminent specialist has performed **live interventions in several continents**, also taking his medical contributions to nearly 30 countries around the world through lectures. He is also the **author of more than 135 peer-reviewed publications** and has participated in 16 textbooks on Gynecologic Oncology. Another of his works is a DVD/book on **advanced laparoscopic techniques** in this field of women's health.

In turn, Dr. Covens has chaired the **Division of Gynecologic Oncology at the University of Toronto and Sunnybrook Health Sciences Centre**. At the latter institution, he directed his fellowship to train potential scientists for 13 years. He also serves on the board of the Global Curriculum Review Committee and coordinates the Rare Tumor Committee. He is also a member of MAGIC, a **multidisciplinary team developing protocols for malignant germ cell tumors**.

In addition, this distinguished scientist is on the **editorial board of the journal Cancer** and reviews articles for **Lancet Oncology, Gynecologic Oncology, International Journal of Gynecologic Cancer**, among many other specialized publications.



## Dr. Covens, Allan

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- Director of the Division of Gynecologic Oncology at the University of Toronto
- Advisor to Moi University, Eldoret, Kenya
- Past President of the International Gynecologic Cancer Society (IGCS)
- Advisor to the Editorial Board of the journal Cancer
- Specialist in Obstetrics and Gynecology from the University of Western Ontario
- Medical Degree from the University of Toronto
- Research Fellowship in Gynecologic Oncology at the University of Toronto/McMaster's Degree in Gynecologic Oncology
- Member of: Rare Tumor Committee, Gynecology, Cervical and Gestational Trophoblastic Committee of the NRG Postgraduate Certificate in Treatment and Management of Uterine Sarcoma



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

## 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

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- ♦ Research Director, 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, Erasto 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"*

05

# Structure and Content

The syllabus has been designed by a team of professionals aware of the importance of medical education in Gynecologic Oncology and who are committed to excellent teaching using new educational technologies.





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*This Professional Master's Degree will allow you to learn about the latest advances in Gynecologic Oncology using the latest educational technology”*



## Module 1. Biological Basis of Cancer

- 1.1. Cell Growth Regulation
- 1.2. Carcinogenesis and Carcinogens
- 1.3. Genetics of Cancer
- 1.4. Mechanisms of Apoptosis and Programmed Cell Death
- 1.5. Molecular Mechanisms of Cancer Production and Metastasis
- 1.6. Origin of Genetic Alterations
- 1.7. Epigenetic Changes and Oncogenes
- 1.8. Angiogenesis

## Module 2. Basis of Chemotherapy Treatment, Adverse Effects and New Therapies

- 2.1. Introduction
- 2.2. Justification for the Use of Chemotherapy
- 2.3. Development of Cancer and the Influence of Chemotherapy
  - 2.3.1. Tumor Growth
  - 2.3.2. Cellular Cycle
  - 2.3.3. Specific Drugs for each of the Cellular Phases
- 2.4. Factors that Influence Treatment
  - 2.4.1. Tumor Characteristics
  - 2.4.2. Patient Tolerance
  - 2.4.3. Treatment Objectives
  - 2.4.4. Pharmacological Factors and Administration Routes
- 2.5. Principles of Resistance to Drugs
- 2.6. Combined Therapies
- 2.7. Treatment or Dosis Adjustments
- 2.8. Drug Toxicity
- 2.9. General Management of Secondary Effects and Complications of Chemotherapy
- 2.10. Antineoplastic Agents in Gynecology
  - 2.10.1. Alkylating Agents
  - 2.10.2. Antibiotics
  - 2.10.3. Antimetabolites
  - 2.10.4. Plant Alkaloids
  - 2.10.5. Topoisomerase 1 Inhibitors

- 2.10.6. Antiangiogenic Drugs
  - 2.10.7. PARP Inhibitors
  - 2.10.8. Tyrosine Kinase Inhibitors
  - 2.10.9. Other Drugs
- 2.11. Future Indications

## Module 3. Endometrial Cancer I

- 3.1. Epidemiology and Etiopathogenesis
- 3.2. Precancerous Lesions
- 3.3. Hereditary Carcinoma
- 3.4. Pathological Anatomy and Different Types of Tumors
- 3.5. Diagnostic Process
- 3.6. Imaging Tests, Tumor Markers and Possible *Screening*
- 3.7. Molecular Diagnostic Tests
- 3.8. FIGO Classification and Others

## Module 4. Endometrial Cancer II

- 4.1. Introduction
- 4.2. General Aspects of Surgical Treatment
- 4.3. Low Risk Tumors (Stage I, Grade 1)
- 4.4. High Risk Tumors (Grade 2-3, Serous or Clear Cells)
- 4.5. Laparotomy vs. Laparoscopy
- 4.6. Introduction of Robotic Surgery
- 4.7. Surgical Technique for High Risk Tumors
- 4.8. Adjuvant Treatment
  - 4.8.1. Observation without Additional Treatment
    - 4.8.1.1. Low Risk, Early Stage, Low Grade
  - 4.8.2. Adjuvant Radiotherapy
    - 4.8.2.1. Early Stage, Intermediate and High Risk
    - 4.8.2.2. Advanced Stages
  - 4.8.3. Adjuvant Chemotherapy
  - 4.8.4. Peculiarities of Serous Tumors and Clear Cells





- 4.9. Hormonal Treatment
- 4.10. Recurrent Endometrial Cancer
  - 4.10.1. Surgical Management
  - 4.10.2. Radiotherapy
  - 4.10.3. Chemotherapy
- 4.11. Follow-up Treatment of Endometrial Cancer
- 4.12. Prognosis

### Module 5. Cervical Cancer I

- 5.1. Epidemiology and Etiopathogenesis of the Disease
- 5.2. Precancerous Lesions and the Evolutionary Process
- 5.3. Risk Factors for Contracting the Disease
- 5.4. Notions about Cervical Pathology and HPV
- 5.5. Normal Colposcopy and Vulvoscopy
- 5.6. Abnormal Colposcopy and Vulvoscopy
- 5.7. Cervical Cancer Screening
- 5.8. Hereditary Carcinoma
- 5.9. Forms of Presentation in Anatomic Pathology
- 5.10. Diagnostic Process: Imaging Tests and Tumor Markers
- 5.11. Role of New Technologies such as PET-CT
- 5.12. FIGO and TNM Classification in Cervical Carcinoma

### Module 6. Cervical Cancer II

- 6.1. Treatment of Cervical Intraepithelial Neoplasia (CIN)
  - 6.1.1. CIN Surgery
  - 6.1.2. CIN Immunotherapy
- 6.2. Invasive Treatment of Cervical Cancer
  - 6.2.1. Radical Hysterectomy with Nerve Preservation
  - 6.2.2. Less Radical Hysterectomy
  - 6.2.3. Radical Endoscopic Hysterectomy
  - 6.2.4. Selective Sentinel Node Biopsy
  - 6.2.5. Para-Aortic Advanced Stage Lymphadenectomy Staging

- 6.3. Radiotherapy and Chemotherapy
  - 6.3.1. Concurrent Chemoradiotherapy
  - 6.3.2. Enhanced Radiation Therapy Treatment Modalities
  - 6.3.3. Chemotherapy Modalities in Concurrent Treatment
  - 6.3.4. Preoperative Chemoradiotherapy
  - 6.3.5. Adjuvant Therapy after a Radical Hysterectomy
  - 6.3.6. Neoadjuvant Chemotherapy
  - 6.3.7. Adjuvant Therapy after Neoadjuvant and Previous Surgery
- 6.4. Treatment of Metastasis, Recurrent or Persistent Disease
  - 6.4.1. Surgical Management
  - 6.4.2. Chemotherapy
- 6.5. Management of Cervical Adenocarcinoma
  - 6.5.1. Adenocarcinoma in Situ (AIS)
  - 6.5.2. Comparison Between Squamous Cell Carcinomas and Adenocarcinomas
  - 6.5.3. Surgery vs. Radiotherapy in Invasive Adenocarcinoma
  - 6.5.4. Chemotherapy
- 6.6. Monitoring

## Module 7. Ovarian Cancer I

- 7.1. Epidemiology of Ovarian and Fallopian Tube Cancer
- 7.2. Etiopathogenesis and tubal origin, new trends
- 7.3. Precancerous Lesions in the Fallopian Tubes
- 7.4. Ovarian Cancer Screening
- 7.5. Hereditary Carcinoma and How to Evaluate It
- 7.6. Histological Forms and Pathological Anatomy
- 7.7. Diagnostic Process
  - 7.7.1. Clinical Symptoms
  - 7.7.2. Ultrasound
  - 7.7.3. Computerized Tomography
  - 7.7.4. Magnetic Resonance
  - 7.7.5. Positron Emission Tomography

- 7.8. Serum Tumor Markers
  - 7.8.1. CA125
  - 7.8.2. HE4
  - 7.8.3. CA19.9
  - 7.8.4. CEA
  - 7.8.5. Other Markers
- 7.9. FIGO Classification of the Disease

## Module 8. Ovarian Cancer II

- 8.1. General Surgical Treatment
- 8.2. Complete Cytoreduction and Primary Debulking
- 8.3. Neoadjuvant Treatment and When to Choose It
- 8.4. Interval and Second Look Treatments
- 8.5. Adjuvant Therapy: Carboplatin-Taxol and Other Options
- 8.6. Radiotherapy: What Role Does it Play?
- 8.7. Hormonal Therapy Possibilities in Ovarian Cancer
- 8.8. Prognosis and Disease-Free Interval
- 8.9. Monitoring and Treatment of Relapses
- 8.10. Controversies in the Management of Ovarian Cancer
- 8.11. Peritoneal Carcinomas Hyperthermic Therapy
- 8.12. Intraperitoneal Chemotherapy, Indications and Results

## Module 9. Vulvar Cancer I

- 9.1. Epidemiology and Relationship with HPV
- 9.2. Etiopathogenesis and Precancerous Lesions
- 9.3. VIN I, II, III VAIN and Other Lesions
- 9.4. Vulvar Cancer Screening
- 9.5. Hereditary Carcinoma
- 9.6. Anatomical Pathology and Histological Types
- 9.7. Imaging Tests and Extension Study
- 9.8. Tumor Markers: SCC





## Module 10. Vulvar Cancer II

- 10.1. Introduction
- 10.2. Vulvar Paget's Disease
  - 10.2.1. General Aspects
  - 10.2.2. Paget's Disease Type 1
    - 10.2.2.1. Prevalence
    - 10.2.2.2. Clinical Characteristics
    - 10.2.2.3. Diagnosis
    - 10.2.2.4. Treatment
  - 10.2.3. Paget's Disease Type 2 and 3
- 10.3. Invasive Paget's Disease
  - 10.3.1. General Aspects
  - 10.3.2. Prognosis
- 10.4. Invasive Vulva Carcinoma
  - 10.4.1. Squamous Cell Carcinoma
  - 10.4.2. Clinical Characteristics
  - 10.4.3. Diagnosis
  - 10.4.4. Dissemination Pathways
  - 10.4.5. Staging
  - 10.4.6. Treatment
    - 10.4.6.1. Primary Lesion Management
    - 10.4.6.2. Local Control after Primary Surgical Treatment
    - 10.4.6.3. Management of Ganglionic Chains
    - 10.4.6.4. Post-Operative Care
      - 10.4.6.4.1. Early postoperative complications
      - 10.4.6.4.2. Late Postoperative Complications
    - 10.4.6.5. Use of Sentinel Lymph Node
      - 10.4.6.5.1. Advanced Disease
      - 10.4.6.5.2. General Aspects
      - 10.4.6.5.3. Management of Ganglionic Chains
      - 10.4.6.5.4. Management of Primary Tumor

- 10.4.6.5.4.1. Surgery
      - 10.4.6.5.4.2. Radiotherapy
      - 10.4.6.5.4.3. Chemotherapy
    - 10.4.6.6. Role of radiotherapy in vulvar cancer.
  - 10.4.7. Recurrent Vulvar Cancer
  - 10.4.8. Prognosis
  - 10.4.9. Monitoring
- 10.5. Vulva Melanoma
  - 10.5.1. Introduction
  - 10.5.2. Clinical Characteristics
  - 10.5.3. Pathologic Anatomy
  - 10.5.4. Staging
  - 10.5.5. Treatment
    - 10.5.5.1. Primary Lesion Management
    - 10.5.5.2. Management of Ganglionic Chains
  - 10.5.6. Prognosis
- 10.6. Bartholin's Gland Carcinoma
  - 10.6.1. General Aspects
  - 10.6.2. Treatment
  - 10.6.3. Prognosis
- 10.7. Basal Cell Carcinoma
- 10.8. Verrucous Carcinoma
- 10.9. Vulva Sarcoma
  - 10.9.1. Introduction
  - 10.9.2. Leiomyosarcoma
  - 10.9.3. Epithelioid Sarcoma
  - 10.9.4. Rhabdomyosarcoma
  - 10.9.5. Merkel Cells Carcinoma

## Module 11. Uterine Sarcoma I

- 11.1. Introduction
- 11.2. Epidemiology
  - 11.2.1. Incidence
  - 11.2.2. Age
  - 11.2.3. Histological Distribution
  - 11.2.4. Racial Distribution
- 11.3. Risk Factors
  - 11.3.1. Heritage
  - 11.3.2. Hormone Therapy
  - 11.3.3. Radiation Exposure
- 11.4. Pathologic Anatomy
  - 11.4.1. Leiomyosarcoma
  - 11.4.2. STUMP
  - 11.4.3. Benign Metastasizing Leiomyoma
  - 11.4.4. Carcinosarcoma
  - 11.4.5. Endometrial Stromal Neoplasms
  - 11.4.6. Stromal Nodule
  - 11.4.7. Endometrial Stromal Sarcoma
  - 11.4.8. Mullerian Adenosarcoma
- 11.5. Clinical Manifestations
- 11.6. Imaging Tests
  - 11.6.1. Magnetic Resonance
  - 11.6.2. Tumor Markers
- 11.7. FIGO Staging
- 11.8. Conclusions



**Module 12. Uterine Sarcoma II**

- 12.1. Introduction
- 12.2. Uterine Leiomyosarcoma
  - 12.2.1. Early Stages
    - 12.2.1.1. Surgery
    - 12.2.1.2. Adjuvant Radiotherapy
    - 12.2.1.3. Chemotherapy
  - 12.2.2. Recurrent or Metastatic Disease
    - 12.2.2.1. Surgery
    - 12.2.2.2. Chemotherapy
    - 12.2.2.3. Hormone Therapy
  - 12.2.3. Prognostic Factors
- 12.3. Endometrial Stromal Sarcoma
  - 12.3.1. Early Stages
    - 12.3.1.1. Surgery
    - 12.3.1.2. Pelvic Radiotherapy
    - 12.3.1.3. Hormone Therapy
  - 12.3.2. Recurrent or Metastatic Disease
    - 12.3.2.1. Surgery
    - 12.3.2.2. Chemotherapy or Radiotherapy
  - 12.3.3. Prognostic Factors
- 12.4. Undifferentiated Endometrial Sarcoma
  - 12.4.1. Early Stages
    - 12.4.1.1. Surgery
    - 12.4.1.2. Adjuvant Radiotherapy
    - 12.4.1.3. Chemotherapy
  - 12.4.2. Recurrent or Metastatic Disease
    - 12.4.2.1. Surgery
    - 12.4.2.2. Chemotherapy or Radiotherapy
  - 12.4.3. Prognostic Factors
- 12.5. Conclusions

**Module 13. Fertility Preservation**

- 13.1. Indications of Fertility Preservation
- 13.2. Gametes Preservation
- 13.3. Role of Assisted Reproduction Techniques
- 13.4. Conservative Surgical Treatment
- 13.5. Oncological Prognosis after Fertility Conservation
- 13.6. Reproductive Results
- 13.7. Dealing with Pregnant Women with Gynecologic Cancer
- 13.8. New research paths and literature updates
- 13.9. Conservation of Ovarian Tissue
- 13.10. Uterine and Gonadal Tissue Transplantation

**Module 14. Uncommon Gynecologic Tumors**

- 14.1. Vagina Cancer
  - 14.1.1. Introduction
  - 14.1.2. Clinical Manifestations
  - 14.1.3. Diagnosis
  - 14.1.4. Pathologic Anatomy
    - 14.1.4.1. Squamous Carcinoma
    - 14.1.4.2. Adenocarcinoma
    - 14.1.4.3. Sarcoma
    - 14.1.4.4. Melanoma
  - 14.1.5. Tumor Staging
  - 14.1.6. Treatment of Disease
    - 14.1.6.1. Surgery
    - 14.1.6.2. Radiotherapy
    - 14.1.6.3. Treatment Complications
  - 14.1.7. Monitoring
  - 14.1.8. Prognosis

- 14.2. Gestational Trophoblastic Disease
    - 14.2.1. Introduction and Epidemiology
    - 14.2.2. Clinical Forms
      - 14.2.2.1. Hydatidiform Mole
        - 14.2.2.1.1. Complete Hydatidiform Mole
        - 14.2.2.1.2. Partial Hydatidiform Mole
      - 14.2.2.2. Gestational Trophoblastic Neoplasm
        - 14.2.2.2.1. After Molar Pregnancy
          - 14.2.2.2.1.1. Persistent Gestational Trophoblastic Neoplasm
        - 14.2.2.2.2. After Non-Molar Pregnancy
          - 14.2.2.2.2.1. Choriocarcinoma
          - 14.2.2.2.2.2. Placental Site Trophoblastic Tumor
    - 14.2.3. Diagnosis
      - 14.2.3.1. Human Chorionic Gonadotropin
      - 14.2.3.2. Ultrasound Study
        - 14.2.3.2.1. Complete Mole
        - 14.2.3.2.2. Partial Mole
        - 14.2.3.2.3. Invasive Mole
        - 14.2.3.2.4. Choriocarcinoma and Placental Site Tumor
      - 14.2.3.3. Other Imaging Techniques
    - 14.2.4. Pathologic Anatomy
      - 14.2.4.1. Hydatidiform Mole
        - 14.2.4.1.1. Complete Mole
        - 14.2.4.1.2. Partial Mole
      - 14.2.4.2. Invasive Mole
      - 14.2.4.3. Choriocarcinoma
      - 14.2.4.4. Placental Site Trophoblastic Tumor
      - 14.2.4.5. Epithelioid Trophoblastic Tumor
    - 14.2.5. Staging
    - 14.2.6. Treatment
      - 14.2.6.1. Chemotherapy
        - 14.2.6.1.1. Low Risk Disease
        - 14.2.6.1.2. High Risk Disease and Metastasis
        - 14.2.6.1.3. Chemoresistant Disease
      - 14.2.6.2. Surgery
        - 14.2.6.2.1. Molar Evacuation
        - 14.2.6.2.2. Hysterectomy
        - 14.2.6.2.3. Myometrial Resection
        - 14.2.6.2.4. Pulmonary Resection
        - 14.2.6.2.5. Craniotomy
        - 14.2.6.2.6. Other Surgical Procedures
        - 14.2.6.2.7. Selective Arterial Embolization
  - 14.2.7. Post-Treatment Monitoring
    - 14.2.7.1. Monitoring after Molar Evacuation
    - 14.2.7.2. Monitoring after Gestational Neoplasm Treatment
  - 14.2.8. Prognosis
- 14.3. Metastatic Tumor in the Genital Tract
  - 14.3.1. Introduction
  - 14.3.2. Clinical Manifestations
    - 14.3.2.1. Secondary Tumors in the Uterine Body or Cervix
      - 14.3.2.2.1. From Genital or Pelvic Organs
      - 14.3.2.2.2. From Extragenital or Pelvic Organs
    - 14.3.2.2. Secondary Tumors in the Vagina
    - 14.3.2.3. Secondary Tumors on the Vulva
    - 14.3.2.4. Secondary Tumors in the Ovaries
  - 14.3.3. Diagnosis
  - 14.3.4. Pathologic Anatomy
    - 14.3.4.1. Gastrointestinal Tumors
      - 14.3.4.1.1. Metastasis of Intestinal Cancer
      - 14.3.4.1.2. Krukenberg Tumor
    - 14.3.4.2. Ovarian Lymphoma
  - 14.3.5. Treatment and Prognosis
- 14.4. Neuroendocrine Tumors
  - 14.4.1. Introduction
  - 14.4.2. Pathologic Anatomy
    - 14.4.2.1. Well-Differentiated Tumors
    - 14.4.2.2. Poorly-Differentiated Tumors

- 14.4.3. Clinical Manifestations and Diagnosis
  - 14.4.3.1. Small Cell Tumor in the Vulva and Vagina
  - 14.4.3.2. Small Cell Tumor in the Uterus
  - 14.4.3.3. Neuroendocrine Tumors in the Cervix
    - 14.4.3.3.1. Small Cell Neuroendocrine Carcinoma
    - 14.4.3.3.2. Carcinoma neuroendocrino células grandes
  - 14.4.3.4. Ovarian, Fallopian Tube and Wide Ligament Tumor
    - 14.4.3.4.1. Ovarian Carcinoid
      - 14.4.3.4.1.1. Insular Carcinoid
      - 14.4.3.4.1.2. Trabecular Carcinoid
      - 14.4.3.4.1.3. Mucinous Carcinoid
      - 14.4.3.4.1.4. Strumal Carcinoid
    - 14.4.3.4.2. Small Cell Lung Type
    - 14.4.3.4.3. Undifferentiated Non-Small Cell Carcinoma
- 14.4.4. Treatment
- 14.4.5. Monitoring
- 14.4.6. Prognosis
- 14.5. Rectovaginal Septum Tumors

## Module 15. Palliative Care and Nutrition

- 15.1. Introduction
  - 15.1.1. Symptomology Associated with Gynecologic Tumors
- 15.2. Pain
- 15.3. Gastrointestinal Symptoms
  - 15.3.1. Diarrhea
  - 15.3.2. Constipation
  - 15.3.3. Malignant Intestinal Obstruction
    - 15.3.3.1. Conservative Treatment
    - 15.3.3.2. Surgical Management
- 15.4. Ascites
- 15.5. Respiratory symptoms.
  - 15.5.1. Pleural Effusion

- 15.6. Edema
- 15.7. Anorexia and Weight Loss
- 15.8. Deep Vein Thrombosis
- 15.9. Pelvic Disease Progression
  - 15.9.1. Vaginal Bleeding
  - 15.9.2. Fistulas.
- 15.10. Palliative Pelvic Exenteration
- 15.11. Metastasis of Other Organs
  - 15.11.1. Liver
  - 15.11.2. Brain
  - 15.11.3. Bone
    - 15.11.3.1. Hypercalcemia
- 15.12. Anxiety and Depression
- 15.13. Dying Patient Care



*A unique, key, and decisive educational experience to boost your professional development"*

06

# Methodology

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

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







“

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

## 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.





# 07 Certificate

The Professional Master's Degree in Gynecologic Oncology guarantees students, in addition to the most rigorous and up-to-date education, access to a Professional Master's Degree diploma issued by TECH Technological University.





“

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

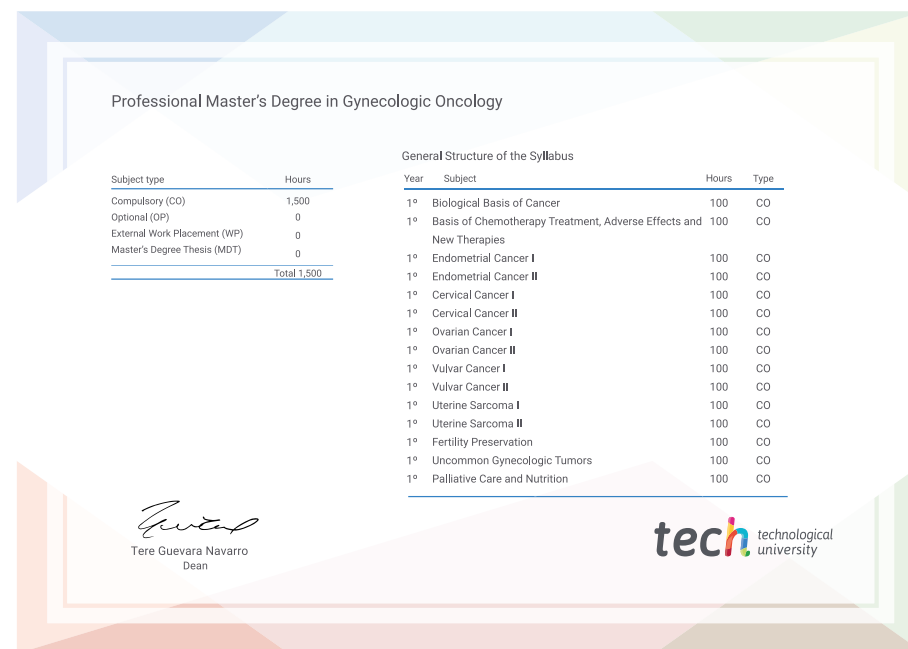
This **Professional Master's Degree in Gynecologic Oncology** contains the most complete and up-to-date scientific on the market.

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 diploma 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 Gynecologic Oncology**

Official N° of Hours: **1,500 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.

future

health

confidence people

education information tutors

guarantee accreditation teaching

institutions technology learning

community commitment

**tech** technological  
university

personalized service innovation

knowledge preservation

online training

development languages

virtual classroom

## Professional Master's Degree Gynecologic Oncology

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

# Professional Master's Degree

## Gynecologic Oncology

