

# Professional Master's Degree Hepatobiliopancreatic Surgery





## Professional Master's Degree Hepatobiliopancreatic Surgery

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Global University
- » Credits: 60 ECTS
- » Schedule: at your own pace
- » Exams: online

Website: [www.techtute.com/us/medicine/professional-master-degree/master-hepatobiliopancreatic-surgery](http://www.techtute.com/us/medicine/professional-master-degree/master-hepatobiliopancreatic-surgery)

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# 01

# Introduction

In view of the continuous advances in hepatobiliary surgery and therapeutic techniques for pancreatic pathologies, specialists need to update their knowledge on a regular basis. However, this is an arduous task, considering the scarcity of specialized programs in digestive surgery. In this context, surgeons run the risk of using less effective practices to treat their patients. Moreover, this lack of scientific evidence would add further uncertainty in clinical cases and even directly impact therapy processes. For this reason, TECH responds to this need by implementing a pioneering program in Hepatobiliopancreatic Surgery. It is worth mentioning that it is taught in a 100% online modality for the convenience of students.





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*You will handle the computed tomography procedure and create much more detailed images with X-rays”*

The hepato-bilio-pancreatic area is presented as a vital area for the functioning of the body, but its anatomy is complex and sometimes its anatomical evaluation by radiological and endoscopic tests is difficult. Eighty percent of hepatobiliopancreatic surgeries are performed by minimally invasive surgery, resulting in less postoperative pain, less blood loss and shorter hospital stay. To this end, it is vital for specialists to be at the forefront of the most innovative procedures, providing the most accurate diagnoses and applying the safest treatments for patients.

Surgeons face the constant challenge of combining the updating of their knowledge with the improvement of their technical skills. In view of this, TECH has created a complete Professional Master's Degree, through which students will have access to the most updated contents in pancreatic, hepatic and biliary pathology. Throughout this study plan, emerging technologies (abdominal ultrasound or magnetic resonance imaging), used for diagnostic imaging of hepatic focal lesions will be addressed.

Likewise, the classification of less frequent liver tumors (such as hepatoblastomas) will be studied in depth in order to contribute to early diagnosis and promote scientific research. The most up-to-date procedures, such as the laparoscopic technique and robotic surgery, will also be discussed. In this sense, these contemporary therapeutic approaches will enable graduates to make informed decisions and consider multidisciplinary treatment options.

In addition, the methodology of this program reinforces its innovative character. TECH offers a 100% online educational environment, tailored to the needs of busy professionals seeking to advance their careers. It also employs the Relearning methodology, based on the repetition of key concepts to fix knowledge and facilitate learning. In this way, the combination of flexibility and a robust pedagogical approach makes it highly accessible.

This **Professional Master's Degree in Hepatobiliopancreatic 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 Hepatobiliopancreatic 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 process of self-assessment can be used 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



*You will diagnose the least common epithelial tumors with the best digital university in the world, according to Forbes”*

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*You will achieve your goals thanks to TECH's didactic tools, including explanatory videos and interactive summaries"*

The program's teaching staff includes professionals from the field 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 the professional must try to solve the different professional practice situations that arise during the academic year. For this purpose, the students will be assisted by an innovative interactive video system created by renowned and experienced experts.

*You will perform the most complete ultrasound scans with the help of ultrasonic probes. And in only 12 months!*

*You will detect upper gastrointestinal bleeding in order to apply the most appropriate primary prophylaxis, according to your personal needs.*



# 02

## Objectives

This academic pathway will allow the physicians to acquire a complete approach to hepatobiliarypancreatic surgery. To do so, they will learn about the diagnosis, indications and treatment of the different pathologies presented in patients. In addition, they will learn about the advances that this digestive branch has undergone in recent years. In this way, the graduates will perform a differential analysis, which will allow them to predict postoperative complications and manage them appropriately.





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*Get the most out of continuous monitoring for postoperative care in pulmonary hypertension. Enroll now!”*



## General Objectives

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- ◆ Develop a thorough understanding of the normal anatomy of the liver, including vascular distribution, hepatic segmentation and anatomical relationships
- ◆ Establish a solid foundation in normal liver physiology to facilitate identification of pathologic deviations
- ◆ Establish a thorough understanding of the pathophysiology of benign liver diseases, including steatosis, chronic hepatitis, and other conditions
- ◆ Improve ethical decision making in the selection and application of diagnostic procedures, considering patient safety and welfare
- ◆ Stimulate interest in pancreatic disease research and promote constant updating on therapeutic and technological advances



*You will delve into devascularization procedures to effectively manage the blood flow of patients”*





## Specific Objectives

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### Module 1. Surgical anatomy of the liver

- ♦ Recognize and manage anatomical variations relevant to surgical interventions, preparing participants for diverse clinical situations
- ♦ Integrate anatomical knowledge with contemporary surgical techniques, facilitating accurate planning and execution of hepatic interventions
- ♦ Acquire specific skills for laparoscopic liver surgery, considering the anatomy in a minimally invasive environment
- ♦ Encourage active participation through practice in virtual anatomical dissection, case studies and interactive discussions

### Module 2. Hepatic Pathology

- ♦ Develop the ability to identify and classify various liver diseases, including hepatitis, cirrhosis and metabolic disorders
- ♦ Become familiar with the various laboratory tests and imaging techniques used to evaluate liver disease, allowing for a comprehensive patient assessment
- ♦ Evaluate the risk factors associated with liver disease and understand the progression of these conditions
- ♦ Develop skills in the planning and execution of treatment strategies, considering pharmacological and surgical approaches

### Module 3. Benign Liver Disease

- ♦ Establish a thorough understanding of the pathophysiology of benign liver diseases, including steatosis, chronic hepatitis, and other conditions
- ♦ Become familiar with diagnostic techniques specific to benign liver diseases, such as laboratory tests and imaging studies, for accurate assessment
- ♦ Identify potential complications associated with benign liver diseases and learn how to prevent and manage them effectively
- ♦ Encourage the integration of a holistic approach in the management of patients with benign liver disease, considering medical, psychosocial, and nutritional aspects
- ♦ Develop skills to educate patients about their condition, promoting active participation in their care and management
- ♦ Improve evidence-based clinical decision making skills, considering the individualization of treatment for each patient

#### **Module 4. Malignant Liver Disease**

- ♦ Establish a thorough understanding of the biological and pathophysiological mechanisms involved in malignant liver diseases, such as hepatocarcinoma and cholangiocarcinoma
- ♦ Develop skills to identify and classify different types of hepatic neoplasms, considering their origin and histological characteristics
- ♦ Become familiar with state-of-the-art diagnostic techniques, such as computed tomography, magnetic resonance imaging and specific biomarkers, for an accurate assessment
- ♦ Analyze specific risk factors and prognostic features associated with malignant liver diseases to guide therapeutic decisions
- ♦ Encourage interest in oncologic research and continuous updating on therapeutic advances and emerging technologies
- ♦ Improve ethical decision making skills in the management of hepatic malignancies

#### **Module 5. Hepatic and Duodenopancreatic Trauma.**

- ♦ Establish a solid understanding of the anatomy and physiology of the hepatic, duodenal and pancreatic region, particularly in the context of traumatic injuries
- ♦ Develop the ability to identify and classify the different mechanisms of injury affecting the liver, duodenum and pancreas in traumatic situations
- ♦ Become familiar with emergency diagnostic techniques, such as computed tomography and ultrasound, for rapid and accurate assessment of traumatic injuries
- ♦ Acquire specific surgical skills for the management of traumatic injuries, including techniques of hemostasis and repair of compromised organs
- ♦ Develop skills to anticipate and manage complications that may arise during and after treatment of traumatic injuries in these areas
- ♦ Improve reconstruction techniques in complex injuries, particularly in situations involving the duodenum and pancreas

#### **Module 6. Study and Diagnosis of the Biliary Tract**

- ♦ Establish a solid understanding of the normal anatomy and physiology of the biliary tract, including the gallbladder, bile ducts and sphincter of Oddi
- ♦ Become familiar with specific imaging techniques for the evaluation of the biliary tract, such as cholangiography and cholangioresonance imaging
- ♦ Develop the ability to identify and classify different disorders affecting the duct
- ♦ Become familiar with non-invasive diagnostic methods, such as ultrasound and computed tomography, for a complete evaluation of the biliary tract
- ♦ Understand the interpretation of specific laboratory tests related to bile duct function, such as liver tests and bilirubin levels
- ♦ Keep up-to-date with emerging diagnostic technologies, such as liver elastography, to improve diagnostic accuracy

#### **Module 7. Pancreatic Disease**

- ♦ Establish an in-depth understanding of the normal pathophysiology of the pancreas and the imbalances that lead to diseases such as acute and chronic pancreatitis
- ♦ Develop the ability to identify and classify different pancreatic diseases, including benign and malignant tumors
- ♦ Become familiar with advanced diagnostic techniques, such as endoscopic retrograde cholangiopancreatography (ERCP) and pancreatic MRI, for accurate assessment
- ♦ Assess risk factors associated with pancreatic diseases and understand the progression of these conditions
- ♦ Identify potential complications associated with pancreatic diseases and learn how to prevent and manage them effectively

**Module 8. Benign Pathology of the Bile Duct and Pancreas**

- ♦ Establish an in-depth understanding of the pathophysiology of benign diseases affecting the bile duct and pancreas, including biliary lithiasis, pancreatic cysts, and other conditions
- ♦ Develop the ability to identify and classify different benign conditions in the bile duct and pancreas, recognizing their distinguishing features
- ♦ Become familiar with diagnostic techniques specific to benign disease, such as abdominal ultrasonography and cholangiography, for accurate evaluation
- ♦ Identify possible complications associated with benign disease and learn how to prevent and manage them effectively

**Module 9. Malignant Pathology of the Bile Duct and Pancreas**

- ♦ Establish a thorough understanding of the biological and pathophysiological mechanisms involved in malignant diseases of the bile duct and pancreas, such as pancreatic cancer and cholangiocarcinoma
- ♦ Develop skills to identify and classify different types of malignant neoplasms in the biliary tract and pancreas, considering their origin and histological characteristics
- ♦ Become familiar with advanced diagnostic techniques, such as computed tomography, magnetic resonance imaging and endoscopy, for accurate and early evaluation of malignant conditions
- ♦ Analyze specific risk factors

**Module 10. Surgery for portal hypertension**

- ♦ Establish an in-depth understanding of the pathophysiologic mechanisms leading to portal hypertension, including liver cirrhosis and other causes
- ♦ Develop skills in identifying and classifying the different etiologies of portal hypertension, such as cirrhosis, portal thrombosis, and other underlying conditions
- ♦ Acquire skills in the preoperative evaluation of patients with portal hypertension, considering risk factors and benefit of surgery
- ♦ Foster collaboration with other healthcare professionals, such as hepatologists, interventional radiologists and anesthesiologists, for a comprehensive and coordinated approach

# 03

## Competencies

The structure of the contents of this program has been designed by a team of professionals, aware of the need for specialization in the surgical practice of hepatobiliary and pancreatic pathology. Taking into account the current importance of this training, physicians will be offered the most advanced techniques to treat patients with digestive system problems. The graduates will apply the most cutting-edge procedures, while perfecting their communication skills in interpersonal relationships.





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*This Professional Master's Degree will keep you up to date in the diagnosis and treatment of patients with hepatobiliary and pancreatic difficulties"*



## General Skills

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- ◆ Develop an in-depth view of the normal anatomy of the liver, including vascular distribution, hepatic segmentation and the anatomical relationships that are established
- ◆ Acquire skills in the design and application of therapeutic strategies encompassing surgical approaches, radiotherapy and systemic therapies, promoting a comprehensive approach
- ◆ Enhance skills to anticipate and manage intraoperative and postoperative complications associated with interventions in portal hypertension, including hepatic encephalopathy and renal failure
- ◆ Keep current with emerging technologies and advanced surgical approaches in the field of portal hypertension surgery to improve accuracy and outcomes
- ◆ Develop skills to educate patients about their benign condition

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*Looking to update your daily medical practice? You will master the most innovative vascular management techniques in liver surgery”*







## Specific Skills

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- ◆ The students will be able to delve into the anatomy from the perspective of prevention of intraoperative and postoperative complications, promoting patient safety
- ◆ Identify potential complications of liver disease and learn how to prevent and manage them effectively
- ◆ Acquire skills in the design and application of effective therapeutic strategies, considering medical and surgical approaches
- ◆ Develop skills in educating patients about portal hypertension surgery, promoting understanding and active participation in the treatment process
- ◆ Master the specific surgical techniques used in the management of portal hypertension, such as portosystemic shunts and portal decongestion procedures
- ◆ Apply personalized therapeutic strategies, considering the diversity of clinical presentations
- ◆ Improve communication skills to effectively inform both patients and their families on the management and prognosis of traumatic injuries

# 04

## Course Management

In its commitment to offer the highest quality education, TECH has a prestigious teaching staff. Through their guidance, the physicians will update their knowledge and renew their skills in hepatobiliopancreatic surgery. These professionals have an extensive professional background, which has allowed them to be part of prestigious international hospitals. Thanks to this, the study plan will provide the specialist with the latest scientific advances in this health field. Students will have the guarantees they need to keep up to date in a continuously evolving sector.





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*Get up to date with the latest trends  
in Hepatobiliopancreatic Surgery,  
with the support of the best specialists”*

## International Guest Director

Surgery and liver transplantation are the fields of research to which the eminent French physician and researcher Eric Vibert has devoted his professional career. For almost three decades, this expert has been involved in the holistic approach to primary liver cancer. Based on these interests, he has positioned himself as a true reference in this field, making significant contributions.

Dr. Vibert also leads a consortium called BOPA, which includes the University Paris-Saclay, the Ecole Mines Télécom and the Hepatobiliary Center of the Paul-Brousse Hospital (AP-HP). The aim of this project is to improve safety in operating rooms. To this end, its innovations are based on digital technologies, in gestation or already existing, which make it possible to increase the range of vision, speech and touch of the medical staff before any type of operation. These contributions, first implemented in simulated surgical rooms, have allowed the validation of multiple disruptive procedures.

In addition, this scientific pioneer is committed to connecting professionals from different fields in order to reinvent surgical practices. That is why his teams bring together engineers and computer scientists, as well as physicians, anesthesiologists, nurses and many other specialists. A work strategy that he continually integrates into his responsibilities and into the leadership of the Department of Surgery and Liver Transplantation at the Paul-Brousse de Villejuif Hospital in Paris.

In terms of academic impact, Dr. Vibert has more than 130 communications at international conferences and 30 plenary lectures. He also has an impressive H-index of 43, having authored 212 publications in first impact journals. He is also the author of the book *Droit à l'Erreur, Devoir de Transparence*, which deals with transparency and error management in medicine, and is the creator of the Week-End de l'Innovation Chirurgicale, with which he has left an everlasting medical-surgical mark.



## Dr. Vibert, Eric

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- Chief of Surgery and Liver Transplantation at the Paul-Brousse de Villejuif Hospital, Paris, France
- Head of the Surgical Innovation Group at the University of Paris Sud
- Specialist in Liver and Biliary Tract Cancer Surgery
- Head of the Surgical Innovation Group of GH Paris Sud
- Director of Research, Biomedical/Medical Engineering at the University Paris-Sud
- Creator and Organizer of the Week-End de l'Innovation Chirurgicale
- Doctor of Medicine, St. Antoine Faculty of Medicine, University Paris VI

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

## Management



### Dr. Al Shwely Abduljabar, Farah

- ♦ Head of the Hepatobiliopancreatic Surgery Unit of the University Hospital of Guadalajara
- ♦ PhD in Medicine, University of Alcalá
- ♦ Specialist in General and Digestive System Surgery at the University Hospital of Guadalajara
- ♦ *Astellas Fellowship* in Hepatobiliopancreatic Surgery and liver and pancreatic transplantation
- ♦ Official Master's Degree in Hepatology and Clinical Research at the University of Barcelona
- ♦ Official Master's Degree in Medical Expertise and Valuation of Bodily Injury by the University of Barcelona
- ♦ Degree in Medicine from the University of Alcalá, Spain
- ♦ Reviewer of the Central European Journal of Medicine
- ♦ Member of the Spanish Association of Surgeons
- ♦ Editor of: Journal of Liver and Clinical Research, EC Orthopaedics, Austin Pancreatic Disorders and Annals of Clinical Cytology and Pathology

## Professors

### Dr. Catalán Garza, Vanessa

- ♦ Specialist in General and Digestive System Surgery at the University Hospital of Guadalajara
- ♦ Physician at the Clinical Hospital San Carlos
- ♦ Professional in Pediatrics in Clinical Medicine at the Camilo José Cela University
- ♦ Degree in Medicine from the University of Zaragoza

### Dr. Gemio, Ignacio

- ♦ Specialist in General and Digestive System Surgery
- ♦ Professor in the Department of Surgery, Medical and Social Sciences
- ♦ Professional Master's Degree in Major Outpatient Surgery, Francisco de Vitoria University
- ♦ Degree in Medicine from the University of Alcalá

**Dr. Bajawi, Mariam**

- ♦ Specialist in General and Digestive System Surgery at the University Hospital of Guadalajara
- ♦ Clinical Professor of General and Digestive Surgery
- ♦ PhD in Health and Life Sciences from the University of Alcalá de Henares
- ♦ Professional Master's Degree in Digestive Oncology ( CEU Cardenal Herrera University) and Clinical Medicine (Camilo José Cela University)
- ♦ Degree in Medicine from the University of Jordan

**Dr. López Marcano, Aylhin**

- ♦ Physician in the Hepatobiliopancreatic Surgery Unit of the University Hospital of Guadalajara
- ♦ PhD in Medicine, University of Alcalá
- ♦ Specialist in General and Digestive System Surgery
- ♦ Graduated from the Luis Razetti School of Medicine
- ♦ Degree in Medicine from the Central of Caracas University

**Dr. Díaz Candelas, Daniel Alejandro**

- ♦ Specialist in General and Digestive System Surgery, University Hospital of Guadalajara, Mexico
- ♦ Postgraduate Diploma in Bases in Esophagogastric Surgery
- ♦ Degree in Medicine from the Central University of Venezuela
- ♦ Professor at the University Hospital of Guadalajara

**Dr. Picardo, María Dolores**

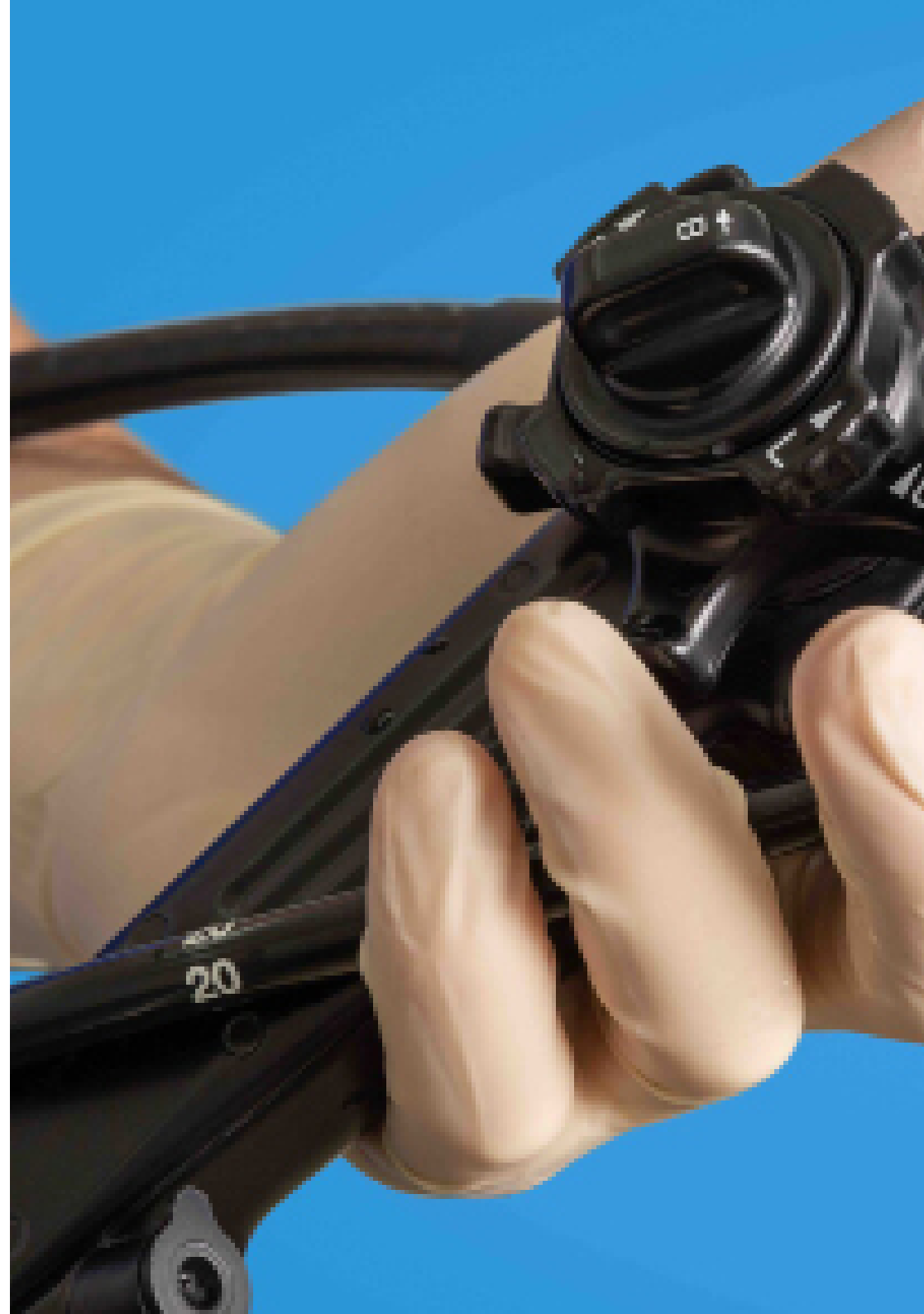
- ♦ General and Digestive System Surgeon at the University Hospital of Guadalajara
- ♦ Director of doctoral theses and final projects at La Paz University Hospital
- ♦ R+D+i management and participation in scientific committees
- ♦ Teacher in courses and seminars oriented to university teaching training
- ♦ Degree in Medicine from the Autonomous University of Madrid
- ♦ Member of the Technical-Assistance Board of the Integrated Care Management of Guadalajara

**Dr. García Gil, José Manuel**

- ♦ Specialist in Esophagogastric and Endocrine Surgery at the University Hospital of Guadalajara
- ♦ Doctor of General Surgery and Digestive System at the University Hospital of Móstoles
- ♦ Professional Master's Degree in Updating in General Surgery and Digestive System by Cardenal Herrera University
- ♦ Teaching experience in Emergency Surgical Pathology courses
- ♦ Regular attendee at congresses and scientific conferences to update his knowledge
- ♦ Member of the Spanish Association of Surgeons

**Dr. González Sierra, Begoña**

- ◆ Specialist in General and Digestive System Surgery at the University Hospital of Guadalajara
- ◆ Professional Master's Degree in General Surgery Updating by the Spanish Confederation of Universities
- ◆ Professional Master's Degree in Integration and Clinical Problem Solving in Medicine from the University of Alcalá, Spain
- ◆ Professional Master's Degree in Aesthetic Medicine, Universidad Rey Juan Carlos, Madrid
- ◆ Degree in Medicine from the Complutense University of Madrid
- ◆ Postgraduate Certificate in Physiotherapy from the Rey Juan Carlos University







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

05

# Structure and Content

This program will offer students the most updated contents on pancreatic and hepatic pathology, as well as biliary tract. The syllabus will allow specialists to make a differential diagnosis, taking into account the typology of the patients, both in urgent and programmed surgery. The didactic materials will delve into the surgical anatomy of the liver, analyzing the methods for the management of bleeding, such as transfusions. Likewise, the different benign liver tumors will be addressed, so that students understand their causes, symptoms and diagnoses. In addition, an update on the surgical treatment of portal hypertension will be offered in order to prevent complications.





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*A syllabus that contains the most complete and updated scientific program on the market. Enroll now!”*

## Module 1. Surgical anatomy of the liver

- 1.1. Liver Anatomy
  - 1.1.1. General Aspects
  - 1.1.2. Embryonic development of the liver of the bile duct
  - 1.1.3. Conclusions
- 1.2. Anatomical relationships of the liver
  - 1.2.1. Superior relationships
  - 1.2.2. Anterior relationships
  - 1.2.3. Lateral Relationships
- 1.3. Hepatic vascularization
  - 1.3.1. Definition
  - 1.3.2. Types
  - 1.3.3. Conclusions
- 1.4. Anatomy of the biliary tree
  - 1.4.1. Organs
  - 1.4.2. Hepatic ducts
  - 1.4.3. Conclusions
- 1.5. Hepatic segmentation
  - 1.5.1. Anatomical segmentation
  - 1.5.2. Division into Eight Segments
  - 1.5.3. Clinical Significance
- 1.6. Ultrasound exploration of the hepatic anatomy
  - 1.6.1. Position of the Patient
  - 1.6.2. Ultrasonic probe
  - 1.6.3. Exploration of the liver
- 1.7. Type of hepatic anatomical approaches
  - 1.7.1. Hepatectomy
  - 1.7.2. Segmentectomy
  - 1.7.3. Wedge resection
- 1.8. Management of bleeding in liver surgery
  - 1.8.1. Use of hemostatics and sealants
  - 1.8.2. Suture technique
  - 1.8.3. Blood transfusion

- 1.9. Techniques of vascular control in liver surgery
  - 1.9.1. Main Techniques
  - 1.9.2. Most used techniques
  - 1.9.3. Conclusions
- 1.10. Hemostatic agents in liver surgery
  - 1.10.1. Hemostatic sponges
  - 1.10.2. Absorbable gelatins
  - 1.10.3. Tissue adhesives

## Module 2. Hepatic Pathology

- 2.1. Pre-Operative Study
  - 2.1.1. Medical History
  - 2.1.2. Hepatic Function Tests (LFTs)
  - 2.1.3. Other Tests
- 2.2. Liver function
  - 2.2.1. Key liver functions
  - 2.2.2. Bile production
  - 2.2.3. Conclusions
- 2.3. Classification of liver diseases
  - 2.3.1. Infectious
  - 2.3.2. Metabolic
  - 2.3.3. Genetics
- 2.4. Pre-operative and intraoperative diagnostic methods for liver disease
  - 2.4.1. Imaging tests
  - 2.4.2. Hepatic biopsy
  - 2.4.3. Hepatic scintigraphy
  - 2.4.4. Other Tests
- 2.5. Study of Liver Function
  - 2.5.1. Markers
  - 2.5.2. Coagulation time
  - 2.5.3. Laboratory Tests

- 2.6. Hepatic volumetry
  - 2.6.1. Computed Tomography (CT) and Magnetic Resonance Imaging (MRI)
  - 2.6.2. Hepatic Ultrasound Scan
  - 2.6.3. Hepatic scintigraphy
- 2.7. Diagnostic imaging of focal hepatic lesions in patients with chronic liver disease
  - 2.7.1. Abdominal ultrasound
  - 2.7.2. Computed Tomography (CT)
  - 2.7.3. Magnetic Resonance Imaging (MRI)
- 2.8. Incidental hepatic lesions
  - 2.8.1. Differential Diagnosis
  - 2.8.2. Types of Lesions
  - 2.8.3. Treatment
- 2.9. Interventional radiology in the management of liver disease
  - 2.9.1. Image-guided liver biopsy
  - 2.9.2. Percutaneous drainage of hepatic abscesses
  - 2.9.3. Transarterial Embolization (TAE) and Chemoembolization (TACE)
- 2.10. Anesthetic management in hepatic surgery
  - 2.10.1. Preoperative Evaluation
  - 2.10.2. Hemodynamic control
  - 2.10.3. Coagulation management

### Module 3. Benign Liver Disease

- 3.1. Classification of benign hepatic tumors
  - 3.1.1. Hepatic hemangiomas
  - 3.1.2. Focal Nodular Hyperplasia (FNH)
  - 3.1.3. Hepatic adenomas
- 3.2. Benign hepatocellular epithelial tumors
  - 3.2.1. Hepatocellular adenoma
  - 3.2.2. Focal Nodular Hyperplasia (FNH)
  - 3.2.3. Nodular Regeneration Focus (NRF)
- 3.3. Benign cholangiocellular epithelial tumors
  - 3.3.1. Biliary papilloma
  - 3.3.2. Biliary adenoma
  - 3.3.3. Ductopenia
- 3.4. Benign mesenchymal tumors
  - 3.4.1. Hepatic fibroma
  - 3.4.2. Hepatic leiomyoma
  - 3.4.3. Conclusions
- 3.5. Pyogenic Hepatic Abscesses
  - 3.5.1. Causes and Risk Factors
  - 3.5.2. Symptoms
  - 3.5.3. Diagnosis
- 3.6. Amoebic Liver Abscesses
  - 3.6.1. Causes
  - 3.6.2. Symptoms
  - 3.6.3. Diagnosis
- 3.7. Hepatic hydatidosis
  - 3.7.1. Causes
  - 3.7.2. Symptoms
  - 3.7.3. Diagnosis
- 3.8. Complications of hepatic abscesses
  - 3.8.1. Rupture of the abscess
  - 3.8.2. Fistula formation
  - 3.8.3. Other Complications
- 3.9. Simple liver cysts
  - 3.9.1. Polycystic liver cyst
  - 3.9.2. Diagnosis
  - 3.9.3. Treatment
- 3.10. Other benign liver lesions
  - 3.10.1. Hamartoma
  - 3.10.2. Inflammatory pseudotumor
  - 3.10.3. Other Lesions

## Module 4. Malignant Liver Disease

- 4.1. Malignant Liver Disease
  - 4.1.1. Main Diseases
  - 4.1.2. Risk Factors
  - 4.1.3. Lifestyle
- 4.2. Hepatocellular Carcinoma
  - 4.2.1. Risk Factors
  - 4.2.2. Symptoms
  - 4.2.3. Diagnosis
- 4.3. Intrahepatic Cholangiocarcinoma
  - 4.3.1. Risk Factors
  - 4.3.2. Symptoms
  - 4.3.3. Diagnosis
- 4.4. Other less frequent epithelial tumors
  - 4.4.1. Hepatic cystadenocarcinoma
  - 4.4.2. Fibrolamellar carcinoma
  - 4.4.3. Hepatoblastoma
- 4.5. Mesenchymal Tumors
  - 4.5.1. Undifferentiated embryonal sarcoma
  - 4.5.2. Epidermoid hemangioendothelioma
  - 4.5.3. Angiosarcoma. Lymphoma
- 4.6. Hepatic metastases of colorectal cancer
  - 4.6.1. Risk Factors
  - 4.6.2. Symptoms
  - 4.6.3. Diagnosis
- 4.7. Clinical scenarios and factors to be taken into account for treatment choice
  - 4.7.1. Causes
  - 4.7.2. Control of Risk Factors
  - 4.7.3. Possible treatments
- 4.8. Surgical strategies for malignant hepatic pathology
  - 4.8.1. Hepatic resection
  - 4.8.2. Liver transplantation
  - 4.8.3. Others

- 4.9. Hepatic metastases of colorectal cancer and neuroendocrine tumors
  - 4.9.1. Risk Factors
  - 4.9.2. Symptoms
  - 4.9.3. Treatment
- 4.10. Liver metastases not from colorectal cancer or neuroendocrine tumors
  - 4.10.1. Risk Factors
  - 4.10.2. Symptoms
  - 4.10.3. Treatment

## Module 5. Hepatic and Duodenopancreatic Trauma

- 5.1. Mechanism of injury in hepatic traumatism
  - 5.1.1. Degrees of injury
  - 5.1.2. Injury management
  - 5.1.3. Conclusions
- 5.2. Evaluation, exploration and classification of hepatic traumatism
  - 5.2.1. Assessment
  - 5.2.2. Exploration
  - 5.2.3. Classification
- 5.3. Conservative management of hepatic trauma
  - 5.3.1. Types of Lesions
  - 5.3.2. Strategies
  - 5.3.3. Conclusions
- 5.4. Surgical management of hepatic traumatism
  - 5.4.1. Type of lesions
  - 5.4.2. Strategy
  - 5.4.3. Conclusions
- 5.5. Injuries to the vena cava and suprahepatic veins in liver trauma
  - 5.5.1. Cava Vein
  - 5.5.2. Suprahepatic veins
  - 5.5.3. Diagnosis and Management
- 5.6. Mechanism of injury in duodenal and pancreatic traumatism
  - 5.6.1. Trauma
  - 5.6.2. Associated injuries
  - 5.6.3. Treatment

- 5.7. Evaluation, examination and classification of duodenal and pancreatic trauma
  - 5.7.1. Assessment
  - 5.7.2. Exploration
  - 5.7.3. Classification
- 5.8. Diagnosis of duodenal and pancreatic trauma
  - 5.8.1. Clinical Assessment
  - 5.8.2. Diagnostic Tests
  - 5.8.3. Treatment
- 5.9. Treatment of duodenal and pancreatic traumatism
  - 5.9.1. Duodenal trauma
  - 5.9.2. Pancreatic trauma
  - 5.9.3. Special considerations
- 5.10. Complications of duodenal and pancreatic traumatism
  - 5.10.1. Management of complications
  - 5.10.2. Evaluation of complications
  - 5.10.3. Conclusions

## Module 6. Study and Diagnosis of the Biliary Tract

- 6.1. Surgical and vascular anatomy of the biliary tract
  - 6.1.1. Liver
  - 6.1.2. Gallbladder
  - 6.1.3. Cystic duct
- 6.2. Physiology of bile
  - 6.2.1. Production
  - 6.2.2. Storage
  - 6.2.3. Functions
- 6.3. Pathophysiology of the gallbladder and biliary tract
  - 6.3.1. Calculations
  - 6.3.2. Tumours
  - 6.3.3. Others
- 6.4. Clinical history, laboratory tests in the patient with biliary pathology
  - 6.4.1. Medical history
  - 6.4.2. Risk Factors
  - 6.4.3. Conclusions

- 6.5. Imaging study of the biliary tract
  - 6.5.1. Abdominal ultrasound
  - 6.5.2. Cholangiography by Magnetic Resonance (MRCP)
  - 6.5.3. Abdominal Computed Tomography (CT)
- 6.6. Colelithiasis
  - 6.6.1. Coledocolithiasis
  - 6.6.2. Causes
  - 6.6.3. Symptoms
- 6.7. Endoscopic treatment of choledocholithiasis
  - 6.7.1. Endoscopic Retrograde Endoscopic Cholangiopancreatography (ERCP)
  - 6.7.2. Echoendoscopy
  - 6.7.3. Others
- 6.8. Interventional radiology in the diagnosis of biliary tract pathology
  - 6.8.1. Transhepatic Percutaneous Transhepatic Cholangiography (TPC)
  - 6.8.2. Magnetic Resonance Cholangiography (MRCP) with MRI Cholangiography
  - 6.8.3. Endoscopic Retrograde Endoscopic Cholangiopancreatography (ERCP)
- 6.9. Surgical management of lithiasic pathology of the biliary tract
  - 6.9.1. Description
  - 6.9.2. Advantages
  - 6.9.3. Procedures
- 6.10. New therapeutic approaches to biliary tract lithiasic pathology
  - 6.10.1. Laparoscopic approach
  - 6.10.2. Robotic Surgery
  - 6.10.3. Others

## Module 7. Pancreatic Disease

- 7.1. Pancreas Anatomy
  - 7.1.1. Location
  - 7.1.2. Divisions of the pancreas
  - 7.1.3. Relationship with other organs
- 7.2. Surgical anatomy of the pancreas
  - 7.2.1. Head
  - 7.2.2. Body
  - 7.2.3. Tail
- 7.3. Embryology of the pancreas
  - 7.3.1. Initial development
  - 7.3.2. Formation of the parts
  - 7.3.3. Conclusions
- 7.4. Vascularization and venous drainage
  - 7.4.1. Pancreatic arteries
  - 7.4.2. Accessory pancreatic arteries
  - 7.4.3. Drainages
- 7.5. Lymphatic drainage (lymph node stations)
  - 7.5.1. Peripancreatic lymph node station
  - 7.5.2. Splenic Hilum Lymph Nodal Station
  - 7.5.3. Hepatic Hilum Nodal Station
- 7.6. Pancreatic physiology
  - 7.6.1. Exocrine function of the pancreas
  - 7.6.2. Endocrine Function of the Pancreas
  - 7.6.3. Regulation of the endocrine function
- 7.7. Regulation of pancreatic secretion
  - 7.7.1. Neuronal stimulation
  - 7.7.2. Hormonal stimulus
  - 7.7.3. Negative feedback mechanisms
- 7.8. Medical History
  - 7.8.1. Physical Examination
  - 7.8.2. Complementary Tests
  - 7.8.3. Others

- 7.9. Imaging studies of pancreatic pathology
  - 7.9.1. Abdominal Computed Tomography (CT)
  - 7.9.2. Magnetic Resonance Imaging (MRI) of the Pancreas
  - 7.9.3. Abdominal ultrasound
- 7.10. Echoendoscopy in the diagnosis of pancreatic disease
  - 7.10.1. Detailed visualization of the pancreas
  - 7.10.2. Evaluation of pancreatic tumors
  - 7.10.3. Detection of small lesions

## Module 8. Benign Pathology of the Bile Duct and Pancreas

- 8.1. Lithiasic pathology
  - 8.1.1. Cholecystitis
  - 8.1.2. Cholangitis
  - 8.1.3. Diagnosis and Treatment
- 8.2. Iatrogenic lesions of the biliary tract
  - 8.2.1. Cholecystectomy
  - 8.2.2. Liver Surgery
  - 8.2.3. Others
- 8.3. Obstructive jaundice
  - 8.3.1. Causes
  - 8.3.2. Symptoms
  - 8.3.3. Treatment
- 8.4. Choledochal cysts
  - 8.4.1. Types
  - 8.4.2. Causes
  - 8.4.3. Symptoms
- 8.5. Acute Pancreatitis
  - 8.5.1. Classification
  - 8.5.2. Nomenclature
  - 8.5.3. Treatment
- 8.6. Management of acute pancreatitis
  - 8.6.1. Hospitalization
  - 8.6.2. Pain Management
  - 8.6.3. Hydration



- 8.7. Chronic Pancreatitis
  - 8.7.1. Types
  - 8.7.2. Causes
  - 8.7.3. Symptoms
- 8.8. Management of Chronic Pancreatitis
  - 8.8.1. Supplements
  - 8.8.2. Diet
  - 8.8.3. Complications
- 8.9. Pancreatic Cystic Tumors
  - 8.9.1. Types
  - 8.9.2. Causes
  - 8.9.3. Symptoms
- 8.10. Surgical indications for pancreatic cystic tumors
  - 8.10.1. Size
  - 8.10.2. Features
  - 8.10.3. Tumor location
- 9.5. Anatomopathologic study of the pancreatectomy specimen
  - 9.5.1. Obtaining the specimen
  - 9.5.2. Fixation and processing
  - 9.5.3. Histological sections
- 9.6. Adenocarcinoma of the gallbladder
  - 9.6.1. Description
  - 9.6.2. Staging of adenocarcinoma of the gallbladder
  - 9.6.3. Conclusions
- 9.7. Treatment of adenocarcinoma of the gallbladder
  - 9.7.1. Surgery
  - 9.7.2. Chemotherapy
  - 9.7.3. Radiotherapy
- 9.8. Extrahepatic cholangiocarcinoma
  - 9.8.1. Description
  - 9.8.2. Diagnosis of extrahepatic cholangiocarcinoma
  - 9.8.3. Conclusions
- 9.9. Classification of extrahepatic cholangiocarcinoma
  - 9.9.1. Types
  - 9.9.2. Symptoms
  - 9.9.3. Risk Factors
- 9.10. Treatment of extrahepatic cholangiocarcinoma
  - 9.10.1. Surgery
  - 9.10.2. Chemotherapy
  - 9.10.3. Radiotherapy

## Module 9. Malignant Pathology of the Bile Duct and Pancreas

- 9.1. Pancreatic ductal adenocarcinoma
  - 9.1.1. Features
  - 9.1.2. Symptoms
  - 9.1.3. Treatment
- 9.2. Classification of ductal adenocarcinoma according to resectability
  - 9.2.1. Types
  - 9.2.2. Causes
  - 9.2.3. Conclusions
- 9.3. Multidisciplinary treatment of adenocarcinoma of the pancreas
  - 9.3.1. Multidisciplinary team
  - 9.3.2. Initial evaluation and staging
  - 9.3.3. Surgery
- 9.4. Surgical Techniques
  - 9.4.1. Cephalic duodenopancreatectomy
  - 9.4.2. Corporocaudal splenopancreatectomy
  - 9.4.3. Cephalic pancreatectomy

## Module 10. Surgery for portal hypertension

- 10.1. Pathophysiology of portal hypertension
  - 10.1.1. Obstruction of blood flow
  - 10.1.2. Increased resistance to flow
  - 10.1.3. Development of portosystemic collaterals
- 10.2. Etiology
  - 10.2.1. Classification
  - 10.2.2. Hepatic Cirrhosis
  - 10.2.3. Chronic Hepatitis
- 10.3. Primary prophylaxis of esophageal variceal bleeding
  - 10.3.1. Treatment of the underlying cause
  - 10.3.2. Beta-Blockers
  - 10.3.3. Endoscopic sclerotherapy
- 10.4. Secondary prophylaxis of bleeding from esophageal varices
  - 10.4.1. Beta-Blockers
  - 10.4.2. Endoscopic sclerotherapy or elastic ligation
  - 10.4.3. Development of continuous monitoring plans
- 10.5. Treatment of acute esophageal variceal hemorrhage
  - 10.5.1. Stabilization of the Patient
  - 10.5.2. Fluid Therapy and Transfusions
  - 10.5.3. Pharmacological Therapy
- 10.6. Portosystemic shunts
  - 10.6.1. Procedure
  - 10.6.2. Objectives
  - 10.6.3. Indications
- 10.7. Devascularization procedures
  - 10.7.1. Selective devascularization
  - 10.7.2. Splenic devascularization
  - 10.7.3. Gastric devascularization





- 10.8. Surgical treatment of portal hypertension
  - 10.8.1. Transjugular Intrahepatic Portosystemic Intrahepatic Shunt (TIPS)
  - 10.8.2. Surgical Portosystemic Surgical Portosystemic Bypass
  - 10.8.3. Splenectomy
- 10.9. Postoperative care in the surgery of the PHT
  - 10.9.1. Continuous Monitoring
  - 10.9.2. Care
  - 10.9.3. Pain Management
- 10.10. Outcomes of portal hypertension surgery
  - 10.10.1. Reduction of portal pressure
  - 10.10.2. Prevention of complications
  - 10.10.3. Symptom improvement

“*With the Relearning system  
you will integrate all the concepts  
in a natural and progressive way*”

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.



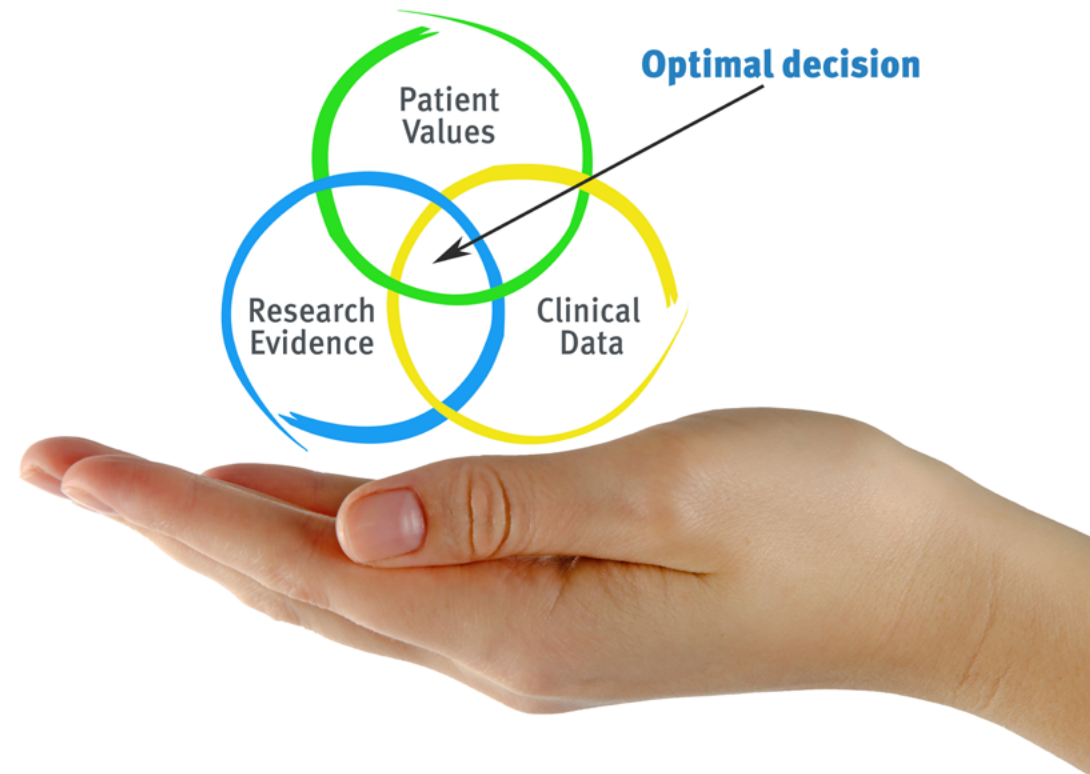
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*Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"*

## At TECH we use the Case Method

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

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



According to Dr. 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:

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.*





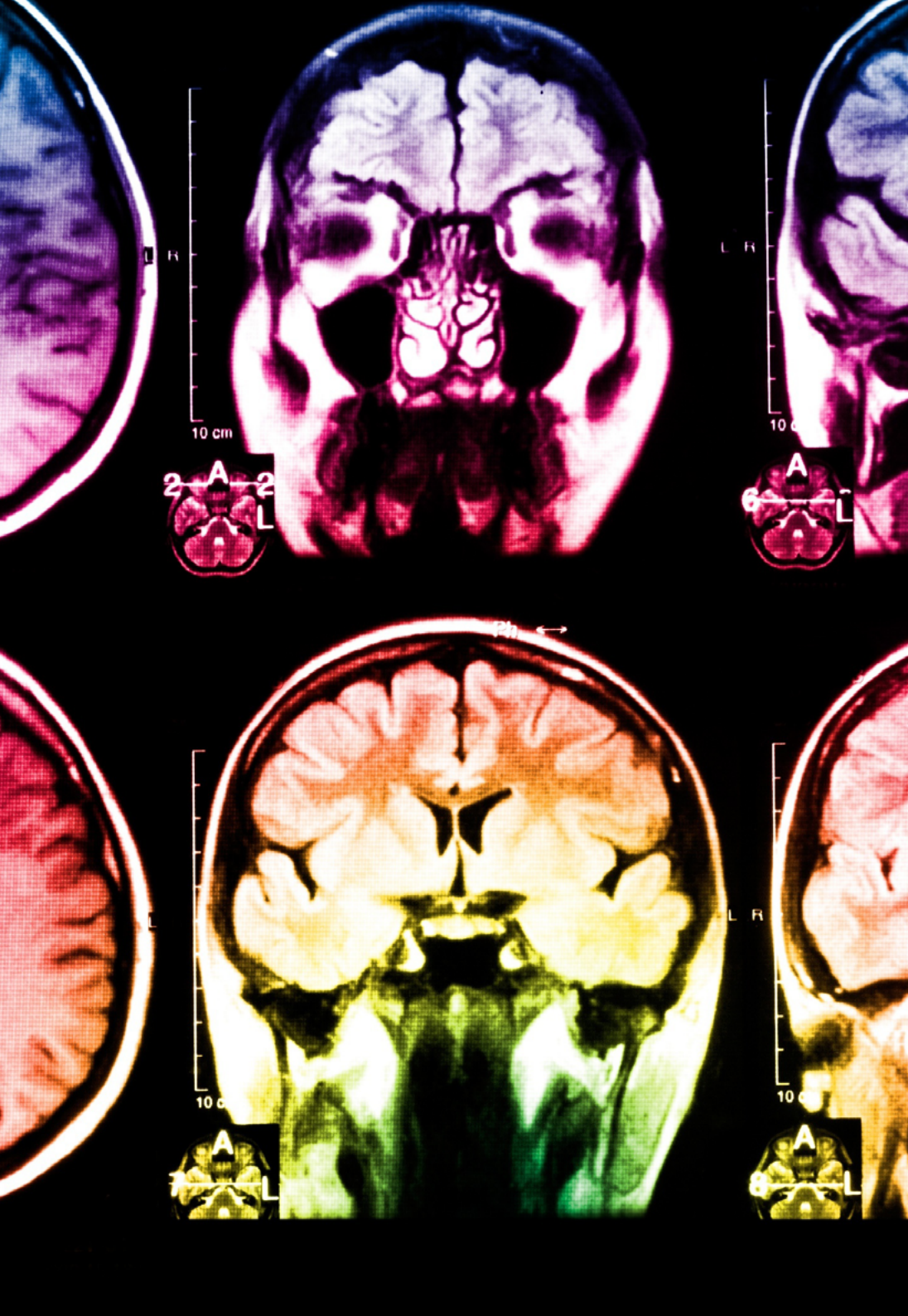
At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

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 Hepatobiliopancreatic Surgery guarantees students, in addition to the most rigorous and up-to-date education, access to a Professional Master's Degree diploma issued by TECH Global University.



“

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

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

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

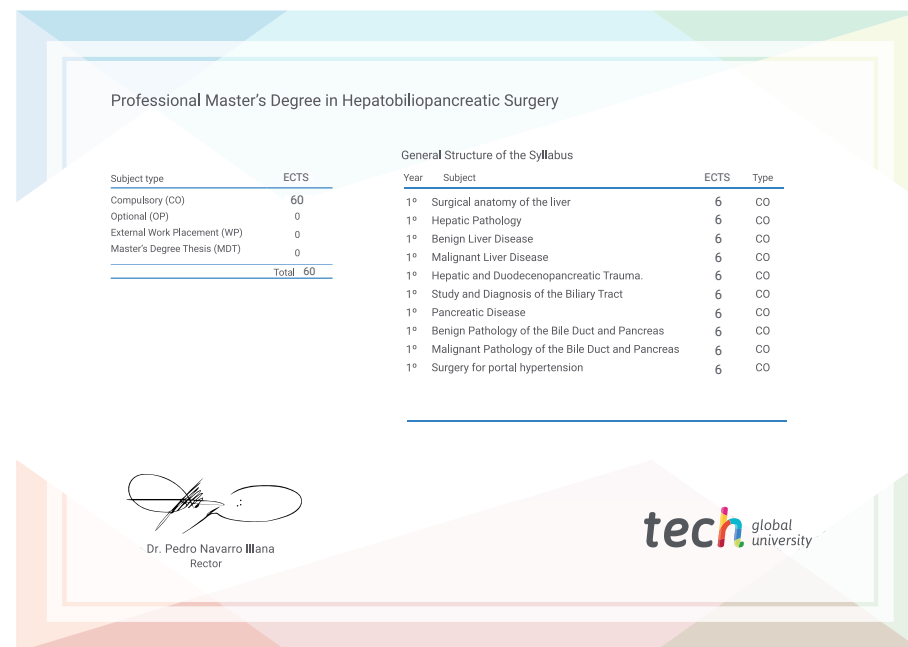
This **TECH Global University** title is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: **Professional Master's Degree in Hepatobiliarypancreatic Surgery**

Modality: **online**

Duration: **12 months**

Accreditation: **60 ECTS**



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



**Professional Master's  
Degree**  
Hepatobiliopancreatic Surgery

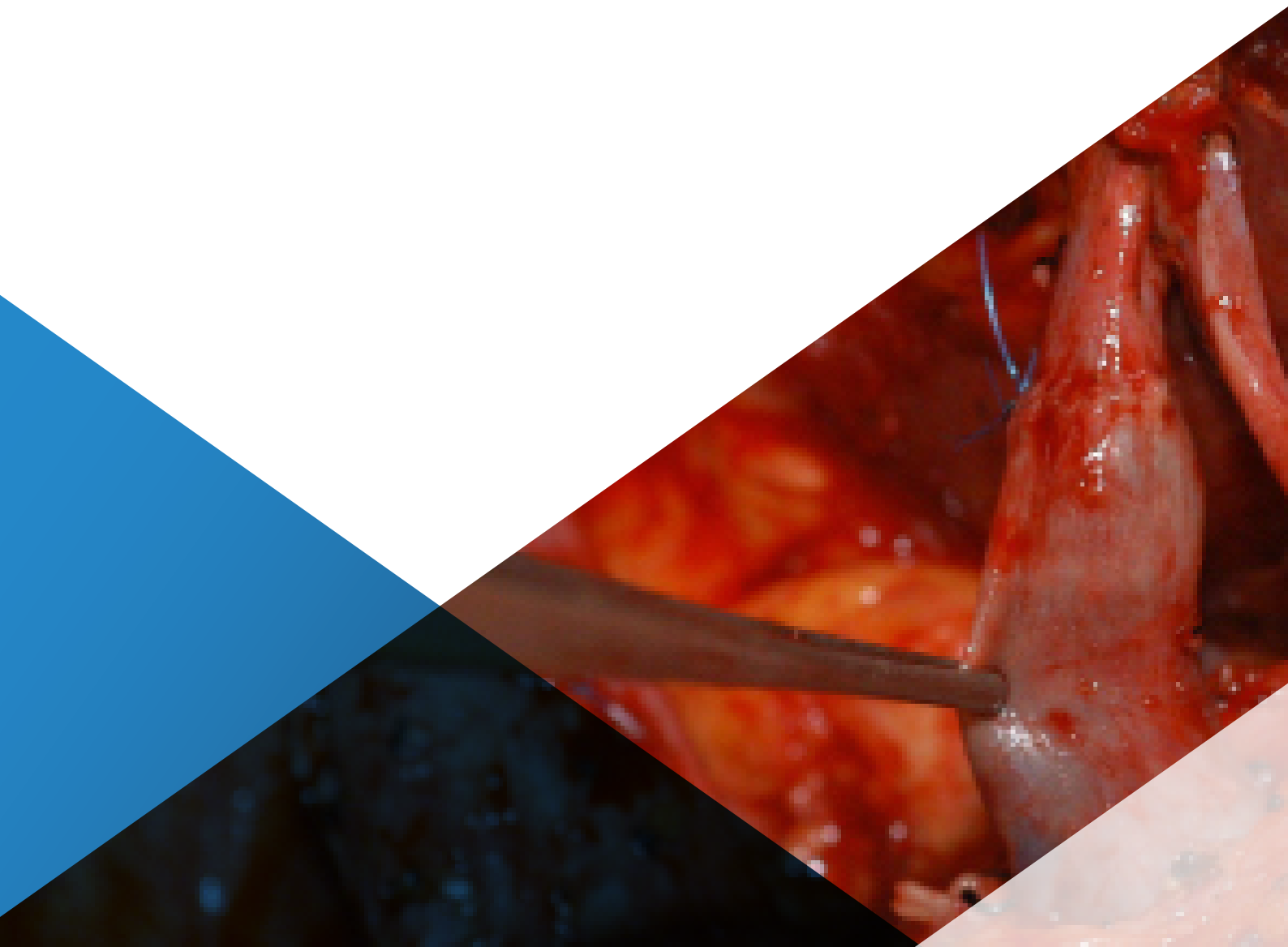
- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Global University
- » Credits: 60 ECTS
- » Schedule: at your own pace
- » Exams: online

# Professional Master's Degree Hepatobiliopancreatic Surgery





Professional Master's Degree  
Hepatobiliopancreatic Surgery





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# on

urgery and therapeutic techniques  
their knowledge on a regular basis.  
city of specialized programs in digestive  
less effective practices to treat their  
uld add further uncertainty in clinical  
r this reason, TECH responds to this  
obiliopancreatic Surgery. It is worth  
for the convenience of students.





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*You will handle the  
procedure and create  
images with X-ray*

a vital area for the functioning  
sometimes its anatomical evaluation  
eighty percent of hepatobiliarypancreatic  
surgery, resulting in less  
hospital stay. To this end, it is vital  
innovative procedures, providing  
safest treatments for patients.

ing the updating of their knowledge  
view of this, TECH has created  
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focal lesions will be addressed.

tumors (such as hepatoblastomas)  
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cepts to fix knowledge and facilitate  
y and a robust pedagogical approach

This **Professional Master's Degree in Hepatobiliarypancreatic 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 Hepatobiliarypancreatic 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 process of self-assessment can be used 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



*You will diagnose the least common epithelial tumors with the best digital university in the world, according to Forbes"*



*You will achieve your goals thanks to TECH's didactic tools, including explanatory videos and interactive summaries"*

The program's teaching staff includes professionals from the field 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 the professional must try to solve the different professional practice situations that arise during the academic year. For this purpose, the students will be assisted by an innovative interactive video system created by renowned and experienced experts.

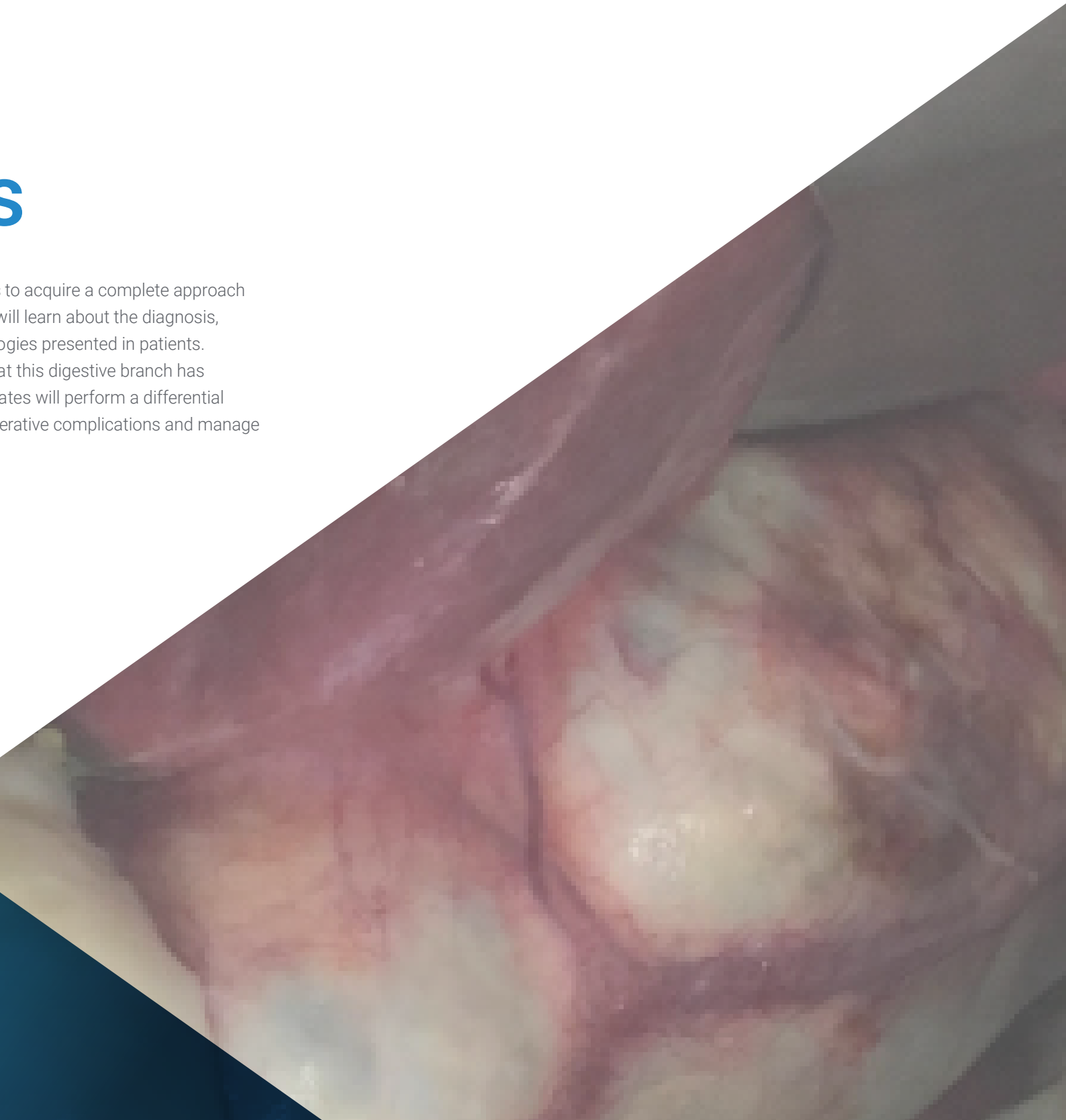
*You will perform  
ultrasound studies  
of ultrasonic  
12 months!*

*You will detect  
bleeding in or  
appropriate  
according to*



S

to acquire a complete approach  
will learn about the diagnosis,  
ologies presented in patients.  
at this digestive branch has  
ates will perform a differential  
erative complications and manage







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Get the most out of  
monitoring for pulmonary hypertension  
in pulmonary hypertension

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anatomy of the liver, including vascular  
relationships  
ology to facilitate identification

physiology of benign liver diseases,  
conditions  
and application of diagnostic procedures,

and promote constant updating

*to devascularization  
effectively manage  
of patients”*





## Specific Objectives

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### Module 1. Surgical anatomy of the liver

- ◆ Recognize and manage anatomical variations relevant to surgical interventions, preparing participants for diverse clinical situations
- ◆ Integrate anatomical knowledge with contemporary surgical techniques, facilitating accurate planning and execution of hepatic interventions
- ◆ Acquire specific skills for laparoscopic liver surgery, considering the anatomy in a minimally invasive environment
- ◆ Encourage active participation through practice in virtual anatomical dissection, case studies and interactive discussions

### Module 2. Hepatic Pathology

- ◆ Develop the ability to identify and classify various liver diseases, including hepatitis, cirrhosis and metabolic disorders
- ◆ Become familiar with the various laboratory tests and imaging techniques used to evaluate liver disease, allowing for a comprehensive patient assessment
- ◆ Evaluate the risk factors associated with liver disease and understand the progression of these conditions
- ◆ Develop skills in the planning and execution of treatment strategies, considering pharmacological and surgical approaches

### Module 3. Benign Liver Disease

- ◆ Establish a thorough understanding of benign liver diseases, including steatosis, chronic hepatitis, and hemangiomas
- ◆ Become familiar with diagnostic techniques used to evaluate liver disease, such as laboratory tests and imaging studies
- ◆ Identify potential complications associated with benign liver disease and strategies to prevent and manage them effectively
- ◆ Encourage the integration of a holistic approach to patient care, considering medical, surgical, and lifestyle factors in the management of benign liver disease
- ◆ Develop skills to educate patients about their condition and the importance of adherence to treatment and lifestyle changes in their care and management
- ◆ Improve evidence-based clinical decision-making skills, considering the latest research and guidelines in the selection of treatment for each patient

ical and pathophysiological mechanisms  
atocarcinoma and cholangiocarcinoma  
types of hepatic neoplasms, considering  
techniques, such as computed tomography,  
ers, for an accurate assessment  
ures associated with malignant liver  
continuous updating on therapeutic  
management of hepatic malignancies

### **Abdominal Trauma.**

and physiology of the hepatic, duodenal  
of traumatic injuries  
ferent mechanisms of injury affecting  
situations  
niques, such as computed tomography  
ent of traumatic injuries  
ent of traumatic injuries, including  
nised organs  
ations that may arise during and after  
injuries, particularly in situations involving

### **Module 6. Study and Diagnosis of the Biliary Tract**

- Establish a solid understanding of the normal anatomy and physiology of the biliary tract, including the gallbladder, bile ducts and sphincter of Oddi
- Become familiar with specific imaging techniques for the evaluation of the biliary tract, such as cholangiography and cholangioresonance imaging
- Develop the ability to identify and classify different disorders affecting the duct
- Become familiar with non-invasive diagnostic methods, such as ultrasound and computed tomography, for a complete evaluation of the biliary tract
- Understand the interpretation of specific laboratory tests related to bile duct function, such as liver tests and bilirubin levels
- Keep up-to-date with emerging diagnostic technologies, such as liver elastography, to improve diagnostic accuracy

### **Module 7. Pancreatic Disease**

- Establish an in-depth understanding of the normal pathophysiology of the pancreas and the imbalances that lead to diseases such as acute and chronic pancreatitis
- Develop the ability to identify and classify different pancreatic diseases, including benign and malignant tumors
- Become familiar with advanced diagnostic techniques, such as endoscopic retrograde cholangiopancreatography (ERCP) and pancreatic MRI, for accurate assessment
- Assess risk factors associated with pancreatic diseases and understand the progression of these conditions
- Identify potential complications associated with pancreatic diseases and learn how to prevent and manage them effectively

### **Module 8. Benign Pathology of the Bile Duct and Pancreas**

- ♦ Establish an in-depth understanding of the pathophysiology of benign diseases affecting the bile duct and pancreas, including biliary lithiasis, pancreatic cysts, and other conditions
- ♦ Develop the ability to identify and classify different benign conditions in the bile duct and pancreas, recognizing their distinguishing features
- ♦ Become familiar with diagnostic techniques specific to benign disease, such as abdominal ultrasonography and cholangiography, for accurate evaluation
- ♦ Identify possible complications associated with benign disease and learn how to prevent and manage them effectively

### **Module 9. Malignant Pathology of the Bile Duct and Pancreas**

- ♦ Establish a thorough understanding of the biological and pathophysiological mechanisms involved in malignant diseases of the bile duct and pancreas, such as pancreatic cancer and cholangiocarcinoma
- ♦ Develop skills to identify and classify different types of malignant neoplasms in the biliary tract and pancreas, considering their origin and histological characteristics
- ♦ Become familiar with advanced diagnostic techniques, such as computed tomography, magnetic resonance imaging and endoscopy, for accurate and early evaluation of malignant conditions
- ♦ Analyze specific risk factors

### **Module 10. Surgery for portal hypertension**

- ♦ Establish an in-depth understanding of the pathophysiology of portal hypertension, including liver cirrhosis and portal hypertension
- ♦ Develop skills in identifying and classifying different causes of portal hypertension, such as cirrhosis, portal thrombosis, and splenic vein thrombosis
- ♦ Acquire skills in the preoperative evaluation of portal hypertension, considering risk factors and benefit of surgery
- ♦ Foster collaboration with other healthcare professionals, such as radiologists and anesthesiologists, for a comprehensive approach to the patient

# ncies

s been designed by a team  
ation in the surgical practice  
g into account the current importance  
st advanced techniques to treat  
aduates will apply the most cutting-  
ation skills in interpersonal relationships.





“

*This Professional  
keep you up to date  
and treatment of  
and pancreatic d*

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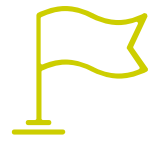
of the liver, including vascular distribution,  
relationships that are established  
therapeutic strategies encompassing surgical  
aspects, promoting a comprehensive approach  
preoperative and postoperative complications  
management, including hepatic encephalopathy

Advanced surgical approaches in the field  
Efficacy and outcomes  
High condition

*“Integrate your daily medical  
knowledge to master the most  
complex and particular management  
of liver surgery”*







## Specific Skills

- The students will be able to delve into the details of intraoperative and postoperative complications
- Identify potential complications of liver surgery and manage them effectively
- Acquire skills in the design and application of various medical and surgical approaches
- Develop skills in educating patients about their condition, understanding and active participation in their care
- Master the specific surgical techniques such as portosystemic shunts and portocaval anastomosis
- Apply personalized therapeutic strategies based on the patient's condition
- Improve communication skills to effectively interact with the patient on the management and prognosis of their condition

# Management

ation, TECH has a prestigious teaching  
update their knowledge and renew their  
professionals have an extensive professional  
prestigious international hospitals.  
Specialist with the latest scientific advances  
services they need to keep up to date





“

*Get up to date with  
in Hepatobiliopan  
with the support of*

research to which the eminent French physician  
career. For almost three decades, this  
primary liver cancer. Based on these interests,  
field, making significant contributions.

includes the University Paris-Saclay, the  
the Paul-Brousse Hospital (AP-HP). The aim  
To this end, its innovations are based on  
which make it possible to increase the range  
any type of operation. These contributions,  
allowed the validation of multiple

connecting professionals from different fields in  
ams bring together engineers and computer  
urses and many other specialists. A work  
ibilities and into the leadership of the  
e Paul-Brousse de Villejuif Hospital in Paris.

130 communications at international  
impressive H-index of 43, having authored  
e author of the book *Droit à l'Erreur, Devoir*  
error management in medicine, and is the  
with which he has left an everlasting medical-



## Dr. Vibert, Eric

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- Chief of Surgery and Liver Transplantation at the Paul-Brousse de Villejuif Hospital, Paris, France
- Head of the Surgical Innovation Group at the University of Paris Sud
- Specialist in Liver and Biliary Tract Cancer Surgery
- Head of the Surgical Innovation Group of GH Paris Sud
- Director of Research, Biomedical/Medical Engineering at the University Paris-Sud
- Creator and Organizer of the Week-End de l'Innovation Chirurgicale
- Doctor of Medicine, St. Antoine Faculty of Medicine, University Paris VI

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## Dr. Al Shwely Abduljabar, Farah

- ♦ Head of the Hepatobiliopancreatic Surgery Unit of the University Hospital of Guadalajara
- ♦ PhD in Medicine, University of Alcalá
- ♦ Specialist in General and Digestive System Surgery at the University Hospital of Guadalajara
- ♦ *Astellas Fellowship* in Hepatobiliopancreatic Surgery and liver and pancreatic transplantation
- ♦ Official Master's Degree in Hepatology and Clinical Research at the University of Barcelona
- ♦ Official Master's Degree in Medical Expertise and Valuation of Bodily Injury by the University of Barcelona
- ♦ Degree in Medicine from the University of Alcalá, Spain
- ♦ Reviewer of the Central European Journal of Medicine
- ♦ Member of the Spanish Association of Surgeons
- ♦ Editor of: Journal of Liver and Clinical Research, EC Orthopaedics, Austin Pancreatic Disorders and Annals of Clinical Cytology and Pathology

ry at the University Hospital

the Camilo José Cela University

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## Dr. Gemio, Ignacio

- ♦ Specialist in General and Digestive System Surgery
- ♦ Professor in the Department of Surgery, Medical and Social Sciences
- ♦ Professional Master's Degree in Major Outpatient Surgery, Francisco de Vitoria University
- ♦ Degree in Medicine from the University of Alcalá

### **Dr. Bajawi, Mariam**

- ◆ Specialist in General and Digestive System Surgery at the University Hospital of Guadalajara
- ◆ Clinical Professor of General and Digestive Surgery
- ◆ PhD in Health and Life Sciences from the University of Alcalá de Henares
- ◆ Professional Master's Degree in Digestive Oncology ( CEU Cardenal Herrera University) and Clinical Medicine (Camilo José Cela University)
- ◆ Degree in Medicine from the University of Jordan

### **Dr. López Marcano, Aylhin**

- ◆ Physician in the Hepatobiliopancreatic Surgery Unit of the University Hospital of Guadalajara
- ◆ PhD in Medicine, University of Alcalá
- ◆ Specialist in General and Digestive System Surgery
- ◆ Graduated from the Luis Razetti School of Medicine
- ◆ Degree in Medicine from the Central of Caracas University

### **Dr. Díaz Candelas, Daniel Alejandro**

- ◆ Specialist in General and Digestive System Surgery, University Hospital of Guadalajara, Mexico
- ◆ Postgraduate Diploma in Bases in Esophagogastric Surgery
- ◆ Degree in Medicine from the Central University of Venezuela
- ◆ Professor at the University Hospital of Guadalajara

### **Dr. Picardo, María Dolores**

- ◆ General and Digestive System Surgeon
- ◆ Director of doctoral theses and final projects
- ◆ R+D+i management and participation in projects
- ◆ Teacher in courses and seminars oriented to the specialty
- ◆ Degree in Medicine from the Autonomous University of Guadalajara
- ◆ Member of the Technical-Assistance Board of the University Hospital of Guadalajara

### **Dr. García Gil, José Manuel**

- ◆ Specialist in Esophagogastric and Endoscopic Surgery, University Hospital of Guadalajara
- ◆ Doctor of General Surgery and Digestive System Surgery
- ◆ Professional Master's Degree in Updating in Endoscopic Surgery by Cardenal Herrera University
- ◆ Teaching experience in Emergency Surgery
- ◆ Regular attendee at congresses and scientific meetings
- ◆ Member of the Spanish Association of Endoscopic Surgeons

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- 1.9. Techniques of vascular control in liver surgery
  - 1.9.1. Main Techniques
  - 1.9.2. Most used techniques
  - 1.9.3. Conclusions
- 1.10. Hemostatic agents in liver surgery
  - 1.10.1. Hemostatic sponges
  - 1.10.2. Absorbable gelatins
  - 1.10.3. Tissue adhesives

**Module 2. Hepatic Pathology**

- 2.1. Pre-Operative Study
  - 2.1.1. Medical History
  - 2.1.2. Hepatic Function Tests (LFTs)
  - 2.1.3. Other Tests
- 2.2. Liver function
  - 2.2.1. Key liver functions
  - 2.2.2. Bile production
  - 2.2.3. Conclusions
- 2.3. Classification of liver diseases
  - 2.3.1. Infectious
  - 2.3.2. Metabolic
  - 2.3.3. Genetics
- 2.4. Pre-operative and intraoperative diagnostic methods for liver disease
  - 2.4.1. Imaging tests
  - 2.4.2. Hepatic biopsy
  - 2.4.3. Hepatic scintigraphy
  - 2.4.4. Other Tests
- 2.5. Study of Liver Function
  - 2.5.1. Markers
  - 2.5.2. Coagulation time
  - 2.5.3. Laboratory Tests

- 2.6. Hepatic volumetry
  - 2.6.1. Computed Tomography (CT) and Magnetic Resonance Imaging (MRI)
  - 2.6.2. Hepatic Ultrasound Scan
  - 2.6.3. Hepatic scintigraphy
- 2.7. Diagnostic imaging of focal hepatic lesions in patients with chronic liver disease
  - 2.7.1. Abdominal ultrasound
  - 2.7.2. Computed Tomography (CT)
  - 2.7.3. Magnetic Resonance Imaging (MRI)
- 2.8. Incidental hepatic lesions
  - 2.8.1. Differential Diagnosis
  - 2.8.2. Types of Lesions
  - 2.8.3. Treatment
- 2.9. Interventional radiology in the management of liver disease
  - 2.9.1. Image-guided liver biopsy
  - 2.9.2. Percutaneous drainage of hepatic abscesses
  - 2.9.3. Transarterial Embolization (TAE) and Chemoembolization (TACE)
- 2.10. Anesthetic management in hepatic surgery
  - 2.10.1. Preoperative Evaluation
  - 2.10.2. Hemodynamic control
  - 2.10.3. Coagulation management

### Module 3. Benign Liver Disease

- 3.1. Classification of benign hepatic tumors
  - 3.1.1. Hepatic hemangiomas
  - 3.1.2. Focal Nodular Hyperplasia (FNH)
  - 3.1.3. Hepatic adenomas
- 3.2. Benign hepatocellular epithelial tumors
  - 3.2.1. Hepatocellular adenoma
  - 3.2.2. Focal Nodular Hyperplasia (FNH)
  - 3.2.3. Nodular Regeneration Focus (NRF)

- 3.3. Benign cholangiocellular epithelial tu
  - 3.3.1. Biliary papilloma
  - 3.3.2. Biliary adenoma
  - 3.3.3. Ductopenia
- 3.4. Benign mesenchymal tumors
  - 3.4.1. Hepatic fibroma
  - 3.4.2. Hepatic leiomyoma
  - 3.4.3. Conclusions
- 3.5. Pyogenic Hepatic Abscesses
  - 3.5.1. Causes and Risk Factors
  - 3.5.2. Symptoms
  - 3.5.3. Diagnosis
- 3.6. Amoebic Liver Abscesses
  - 3.6.1. Causes
  - 3.6.2. Symptoms
  - 3.6.3. Diagnosis
- 3.7. Hepatic hydatidosis
  - 3.7.1. Causes
  - 3.7.2. Symptoms
  - 3.7.3. Diagnosis
- 3.8. Complications of hepatic abscesses
  - 3.8.1. Rupture of the abscess
  - 3.8.2. Fistula formation
  - 3.8.3. Other Complications
- 3.9. Simple liver cysts
  - 3.9.1. Polycystic liver cyst
  - 3.9.2. Diagnosis
  - 3.9.3. Treatment
- 3.10. Other benign liver lesions
  - 3.10.1. Hamartoma
  - 3.10.2. Inflammatory pseudotumor
  - 3.10.3. Other Lesions

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- 4.9. Hepatic metastases of colorectal cancer and neuroendocrine tumors
  - 4.9.1. Risk Factors
  - 4.9.2. Symptoms
  - 4.9.3. Treatment
- 4.10. Liver metastases not from colorectal cancer or neuroendocrine tumors
  - 4.10.1. Risk Factors
  - 4.10.2. Symptoms
  - 4.10.3. Treatment

## Module 5. Hepatic and Duodenopancreatic Trauma

- 5.1. Mechanism of injury in hepatic traumatism
  - 5.1.1. Degrees of injury
  - 5.1.2. Injury management
  - 5.1.3. Conclusions
- 5.2. Evaluation, exploration and classification of hepatic traumatism
  - 5.2.1. Assessment
  - 5.2.2. Exploration
  - 5.2.3. Classification
- 5.3. Conservative management of hepatic trauma
  - 5.3.1. Types of Lesions
  - 5.3.2. Strategies
  - 5.3.3. Conclusions
- 5.4. Surgical management of hepatic traumatism
  - 5.4.1. Type of lesions
  - 5.4.2. Strategy
  - 5.4.3. Conclusions
- 5.5. Injuries to the vena cava and suprahepatic veins in liver trauma
  - 5.5.1. Cava Vein
  - 5.5.2. Suprahepatic veins
  - 5.5.3. Diagnosis and Management
- 5.6. Mechanism of injury in duodenal and pancreatic traumatism
  - 5.6.1. Trauma
  - 5.6.2. Associated injuries
  - 5.6.3. Treatment

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- 5.7. Evaluation, examination and classification of duodenal and pancreatic trauma
  - 5.7.1. Assessment
  - 5.7.2. Exploration
  - 5.7.3. Classification
- 5.8. Diagnosis of duodenal and pancreatic trauma
  - 5.8.1. Clinical Assessment
  - 5.8.2. Diagnostic Tests
  - 5.8.3. Treatment
- 5.9. Treatment of duodenal and pancreatic traumatism
  - 5.9.1. Duodenal trauma
  - 5.9.2. Pancreatic trauma
  - 5.9.3. Special considerations
- 5.10. Complications of duodenal and pancreatic traumatism
  - 5.10.1. Management of complications
  - 5.10.2. Evaluation of complications
  - 5.10.3. Conclusions

## Module 6. Study and Diagnosis of the Biliary Tract

- 6.1. Surgical and vascular anatomy of the biliary tract
  - 6.1.1. Liver
  - 6.1.2. Gallbladder
  - 6.1.3. Cystic duct
- 6.2. Physiology of bile
  - 6.2.1. Production
  - 6.2.2. Storage
  - 6.2.3. Functions
- 6.3. Pathophysiology of the gallbladder and biliary tract
  - 6.3.1. Calculations
  - 6.3.2. Tumours
  - 6.3.3. Others
- 6.4. Clinical history, laboratory tests in the patient with biliary pathology
  - 6.4.1. Medical history
  - 6.4.2. Risk Factors
  - 6.4.3. Conclusions

- 6.5. Imaging study of the biliary tract
  - 6.5.1. Abdominal ultrasound
  - 6.5.2. Cholangiography by Magnetic Resonance
  - 6.5.3. Abdominal Computed Tomography
- 6.6. Colelitiasis
  - 6.6.1. Coledocolitiasis
  - 6.6.2. Causes
  - 6.6.3. Symptoms
- 6.7. Endoscopic treatment of choledocholithiasis
  - 6.7.1. Endoscopic Retrograde Cholangiopancreatography
  - 6.7.2. Echoendoscopy
  - 6.7.3. Others
- 6.8. Interventional radiology in the diagnosis and treatment of biliary pathology
  - 6.8.1. Transhepatic Percutaneous Cholangiography
  - 6.8.2. Magnetic Resonance Cholangiopancreatography
  - 6.8.3. Endoscopic Retrograde Cholangiopancreatography
- 6.9. Surgical management of lithiasic pathology
  - 6.9.1. Description
  - 6.9.2. Advantages
  - 6.9.3. Procedures
- 6.10. New therapeutic approaches to biliary pathology
  - 6.10.1. Laparoscopic approach
  - 6.10.2. Robotic Surgery
  - 6.10.3. Others

- 7.9. Imaging studies of pancreatic pathology
  - 7.9.1. Abdominal Computed Tomography (CT)
  - 7.9.2. Magnetic Resonance Imaging (MRI) of the Pancreas
  - 7.9.3. Abdominal ultrasound
- 7.10. Echoendoscopy in the diagnosis of pancreatic disease
  - 7.10.1. Detailed visualization of the pancreas
  - 7.10.2. Evaluation of pancreatic tumors
  - 7.10.3. Detection of small lesions

## **Module 8. Benign Pathology of the Bile Duct and Pancreas**

- 8.1. Lithiasic pathology
  - 8.1.1. Cholecystitis
  - 8.1.2. Cholangitis
  - 8.1.3. Diagnosis and Treatment
- 8.2. Iatrogenic lesions of the biliary tract
  - 8.2.1. Cholecystectomy
  - 8.2.2. Liver Surgery
  - 8.2.3. Others
- 8.3. Obstructive jaundice
  - 8.3.1. Causes
  - 8.3.2. Symptoms
  - 8.3.3. Treatment
- 8.4. Choledochal cysts
  - 8.4.1. Types
  - 8.4.2. Causes
  - 8.4.3. Symptoms
- 8.5. Acute Pancreatitis
  - 8.5.1. Classification
  - 8.5.2. Nomenclature
  - 8.5.3. Treatment
- 8.6. Management of acute pancreatitis
  - 8.6.1. Hospitalization
  - 8.6.2. Pain Management
  - 8.6.3. Hydration



- 8.7. Chronic Pancreatitis
  - 8.7.1. Types
  - 8.7.2. Causes
  - 8.7.3. Symptoms
- 8.8. Management of Chronic Pancreatitis
  - 8.8.1. Supplements
  - 8.8.2. Diet
  - 8.8.3. Complications
- 8.9. Pancreatic Cystic Tumors
  - 8.9.1. Types
  - 8.9.2. Causes
  - 8.9.3. Symptoms
- 8.10. Surgical indications for pancreatic cystic tumors
  - 8.10.1. Size
  - 8.10.2. Features
  - 8.10.3. Tumor location

## Module 9. Malignant Pathology of the Bile Duct and Pancreas

- 9.1. Pancreatic ductal adenocarcinoma
  - 9.1.1. Features
  - 9.1.2. Symptoms
  - 9.1.3. Treatment
- 9.2. Classification of ductal adenocarcinoma according to resectability
  - 9.2.1. Types
  - 9.2.2. Causes
  - 9.2.3. Conclusions
- 9.3. Multidisciplinary treatment of adenocarcinoma of the pancreas
  - 9.3.1. Multidisciplinary team
  - 9.3.2. Initial evaluation and staging
  - 9.3.3. Surgery
- 9.4. Surgical Techniques
  - 9.4.1. Cephalic duodenopancreatectomy
  - 9.4.2. Corporocaudal splenopancreatectomy
  - 9.4.3. Cephalic pancreatectomy

- 9.5. Anatomopathologic study of the pancreas
  - 9.5.1. Obtaining the specimen
  - 9.5.2. Fixation and processing
  - 9.5.3. Histological sections
- 9.6. Adenocarcinoma of the gallbladder
  - 9.6.1. Description
  - 9.6.2. Staging of adenocarcinoma
  - 9.6.3. Conclusions
- 9.7. Treatment of adenocarcinoma of the gallbladder
  - 9.7.1. Surgery
  - 9.7.2. Chemotherapy
  - 9.7.3. Radiotherapy
- 9.8. Extrahepatic cholangiocarcinoma
  - 9.8.1. Description
  - 9.8.2. Diagnosis of extrahepatic cholangiocarcinoma
  - 9.8.3. Conclusions
- 9.9. Classification of extrahepatic cholangiocarcinoma
  - 9.9.1. Types
  - 9.9.2. Symptoms
  - 9.9.3. Risk Factors
- 9.10. Treatment of extrahepatic cholangiocarcinoma
  - 9.10.1. Surgery
  - 9.10.2. Chemotherapy
  - 9.10.3. Radiotherapy

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- 10.8. Surgical treatment of portal hypertension
  - 10.8.1. Transjugular Intrahepatic Portosystemic Shunt
  - 10.8.2. Surgical Portosystemic Shunt
  - 10.8.3. Splenectomy
- 10.9. Postoperative care in the surgery of portal hypertension
  - 10.9.1. Continuous Monitoring
  - 10.9.2. Care
  - 10.9.3. Pain Management
- 10.10. Outcomes of portal hypertension surgery
  - 10.10.1. Reduction of portal pressure
  - 10.10.2. Prevention of complications
  - 10.10.3. Symptom improvement

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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.

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*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.



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## Additional material, prepared with professionals in mind:

### Study Material

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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 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.

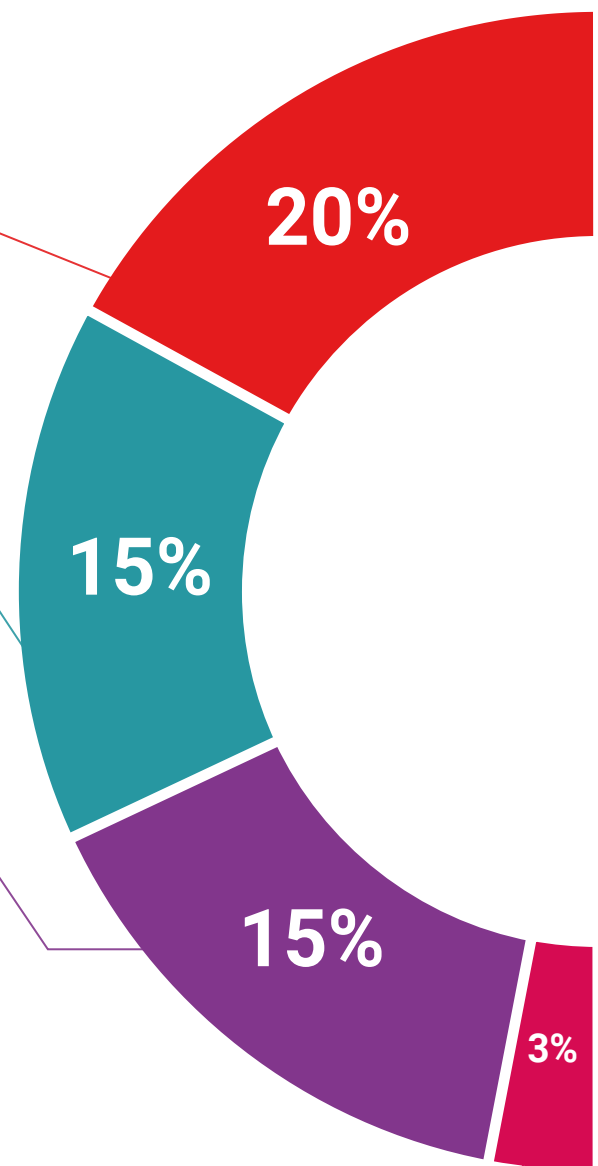
### Interactive Summaries

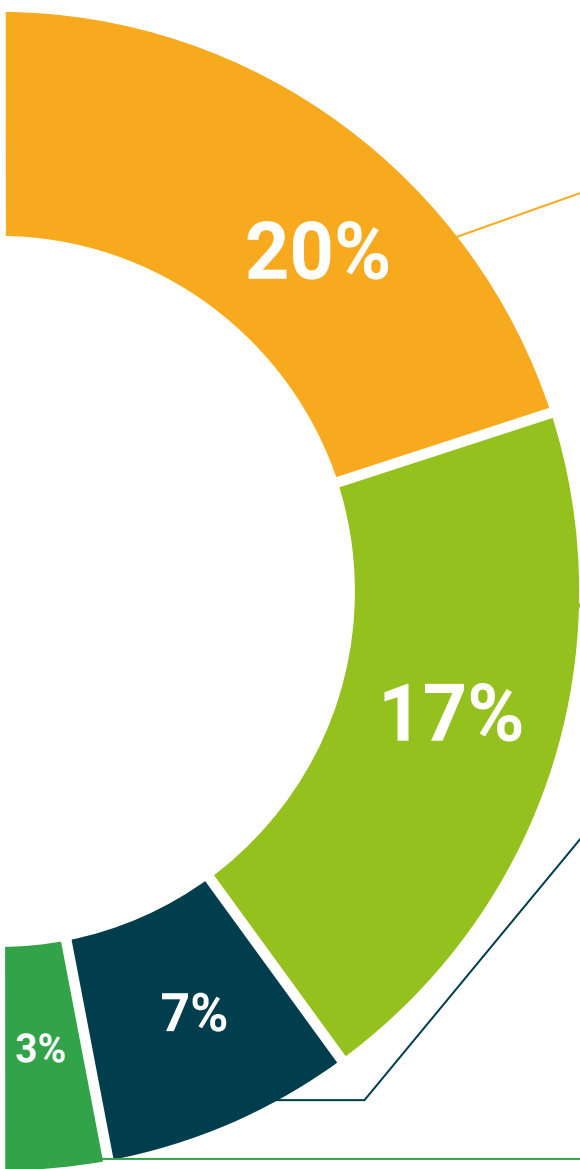
The TECH team presents the contents attractively and dynamically in multimedia sessions that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

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.

### Classroom

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.

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Modality: **online**

Duration: **12 months**

Accreditation: **60 ECTS**

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Professional Master's Degree in Hepatobiliopancreatic Surgery

Subject type	ECTS
Compulsory (CO)	60
Optional (OP)	0
External Work Placement (WEP)	0
Master's Degree Thesis (MDT)	0
<b>Total</b>	<b>60</b>

General Structure of the Syllabus

Year	Subject	ECTS	Type
1º	Surgical anatomy of the liver	6	CO
1º	Hepatic Pathology	6	CO
1º	Benign Liver Disease	6	CO
1º	Malignant Liver Disease	6	CO
1º	Hepatic and Duodenocephopancreatic Trauma.	6	CO
1º	Study and Diagnosis of the Biliary Tract	6	CO
1º	Pancreatic Disease	6	CO
1º	Benign Pathology of the Bile Duct and Pancreas	6	CO
1º	Malignant Pathology of the Bile Duct and Pancreas	6	CO
1º	Surgery for portal hypertension	6	CO

  
Dr. Pedro Navarro Illana  
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# Master's Degree Pancreatic Surgery



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