

# Advanced Master's Degree Obstetrics and Maternal Care for Midwives





## Advanced Master's Degree Obstetrics and Maternal Care for Midwives

- » Modality: online
- » Duration: 2 years
- » Certificate: TECH Global University
- » Credits: 120 ECTS
- » Schedule: at your own pace
- » Exams: online

Website: [www.techtute.com/us/nursing/advanced-master-degree/advanced-master-degree-obstetric-maternal-care-midwives](http://www.techtute.com/us/nursing/advanced-master-degree/advanced-master-degree-obstetric-maternal-care-midwives)

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# 01

# Introduction

Obstetrics and Maternal Care are an essential specialty in maternal and child health, facing challenges in a constantly evolving healthcare environment. Keeping up to date in knowledge, skills and clinical practices based on scientific evidence and woman-centered care is crucial. Thus, this program offers an updated and rigorous analysis of this specialty, with a comprehensive and multidisciplinary approach. Adapted to the needs of practicing professionals, the midwife will delve into breastfeeding, obstetric emergencies, specific gynecological care and pregnancy pathologies. In a 100% online format, this program offers a unique opportunity for professional updating for midwives, based on the latest scientific postulates.





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*Upgrade your knowledge and skills in Obstetrics and Maternal Care with this innovative 100% online program, designed specifically for practicing midwives"*

Obstetrics and Maternal Care are a fundamental specialty in the field of maternal and child health, and their constant professional updating is essential to ensure quality care for mothers and newborns. In fact, such professional updating has become an imperative need for practicing midwives, as advances in research and technology, as well as changing patterns of care and population demands, require Obstetrics and Maternal Care professionals to be up-to-date on the latest knowledge, skills and clinical practices.

In addition, the importance of woman-centered care, based on scientific evidence and interprofessional approach, highlights the need for up-to-date and specialized teaching in this area. For this reason, TECH has created this Advanced Master's Degree in Obstetrics and Maternal Care for Midwives, designed specifically for professionals who already practice this specialty and are looking to keep up to date in a constantly changing environment.

This university program offers a comprehensive and up-to-date review of the most relevant and emerging topics in the field of Midwifery and Maternal Care. With a comprehensive and multidisciplinary approach, the program is tailored to the needs of adapts to the needs of professionals already practicing this specialty, providing them with updated tools and knowledge to face the current challenges in maternal and child health care.

One of the outstanding advantages of this program is its 100% online modality. This allows professionals to access content and carry out all activities in a flexible manner, adapting to their schedules and work and personal responsibilities. The online platform offers an interactive learning environment, with updated resources, practical activities and communication tools that facilitate the exchange of knowledge and experiences among participants.

In addition, the program has a faculty of experts in the specialty, with extensive clinical experience. The participants will also have access to an extensive network of professionals dedicated to Obstetrics and Maternal Care, which fosters collaborative learning and the exchange of best practices.

This **Advanced Master's Degree in Obstetrics and Maternal Care for Midwives** contains the most complete and up-to-date scientific program on the market. The most important features include:

- ♦ The development of case studies presented by experts in Obstetrics and maternal care
- ♦ 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 self-assessment can be used to improve learning
- ♦ Its special emphasis on innovative methodologies in the care of pregnant women during the entire pregnancy and delivery process
- ♦ 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



*Learn from experts in the field and access up-to-date resources in an interactive learning environment that adapts to your schedule and work and personal responsibilities"*

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*Delve into the most recent in pregnancy pathologies, obstetric of pregnancy, obstetric emergencies and breastfeeding”*

*Get updated and deepen in the latest advances in research, technology and care guidelines in Obstetrics and Maternal Care.*

*Enroll in this program and join a community of professionals committed to constant updating.*

The teaching staff includes nursing professionals who bring their experience to this training program, as well as renowned specialists from leading societies and prestigious universities.

Its multimedia content, developed with the latest educational technology, will provide the professional with situated and contextual learning, i.e., a simulated environment that will deliver an immersive learning experience, programmed to train in real situations.

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



# 02

# Objectives

This Advanced Master's Degree in Obstetrics and Maternal Care for Midwives aims to offer an advanced and specialized update for practicing professionals, deepening skills and clinical practice and strengthening the management of the pregnant woman throughout the process of pregnancy, childbirth and postpartum. For this reason, the entire program is largely based on real clinical cases, adequately contextualizing all the topics covered.





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*The program is offered 100% online, with total flexibility so that you can access the Virtual Campus at any time and place"*



## General Objectives

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- Acquire knowledge in specific gynecological and obstetric care
- Promote work strategies based on a comprehensive approach to the patient as a reference model for achieving excellence in care
- Favour the acquisition of technical skills and abilities, through a powerful audiovisual system, and the possibility of development through specific training
- Integrate new knowledge about fetal deformities, their causes and their resolution
- Instruct on the hemorrhagic pathology of the first trimester and its possible diagnoses
- Get up to date on the different prophylactic treatments for patients with heart disease in pregnancy
- Detect the different obstetric emergencies during pregnancy, delivery and puerperium as early as possible in order to apply the latest treatments and achieve a satisfactory obstetric outcome, thereby reducing maternal-fetal morbidity and mortality
- Update knowledge in Breastfeeding



*The program is based on the latest scientific evidence and best clinical practices, which guarantees you a quality update in the field of obstetrics and maternal care"*





## Specific Objectives

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### Module 1. Anatomy and Physiology of the Human Reproductive System

- ♦ Describe the anatomy and physiology of the male and female sexual apparatus
- ♦ Explain reproductive endocrinology
- ♦ Explain the development of sex differentiation
- ♦ Describe the ovarian and uterine cycle
- ♦ Explain male physiology

### Module 2. Puberty, Menstruation and Climacteric Period

- ♦ Understand the neurohormonal regulation of reproductive function
- ♦ Describe the physiological process of the climacteric stage
- ♦ Describe the physiology of sexuality
- ♦ Define concepts related to menstrual symptoms
- ♦ Explain the procedure in gynecological examinations
- ♦ Describe the biological process of reproduction and the female sexual cycle and its psychological and social implications
- ♦ Explain the various pathologies that occur during puberty
- ♦ Describe the different menstrual disorders

### Module 3. Gynecological Infectious Pathology and Sexually Transmitted Diseases

- ♦ Differentiate between hypothalamic and pituitary amenorrhea
- ♦ Describe the various functional uterine hemorrhages
- ♦ Explain the pathologies and treatments during the climacteric stage
- ♦ Describe sexually transmitted infections
- ♦ Explain the epidemiological aspects of sexually transmitted infections
- ♦ Describe the various treatments for sexually transmitted infections

### Module 4. Care for Women with Gynecologic Problems

- ♦ Prepares health education strategies for at-risk populations
- ♦ Define the various types of primary prevention methods
- ♦ Defining pain of pelvic origin
- ♦ Classify the various malformations of the genital apparatus
- ♦ List the types of benign tumors
- ♦ Describe benign gynecologic pathology
- ♦ Explain the various alternations of genital statics
- ♦ Describe vulvovaginal pathology
- ♦ Describe cervical pathology and its treatment
- ♦ Get to know the uterine pathology and its treatment
- ♦ Learn about adnexal pathology and its treatment
- ♦ Update knowledge on early diagnosis of breast and gynecological cancer

### Module 5. Gynecological Surgery

- ♦ Update knowledge on gynecological surgery
- ♦ Get to know the different types of gynecological anesthesia
- ♦ Get to know about preoperative and postoperative care
- ♦ Identify the various postoperative complications
- ♦ Learn about abdominal hysterectomy
- ♦ Get to know the laparoscopic and hysteroscopic surgery
- ♦ Acquire knowledge about robotic surgery applied to gynecology

### **Module 6. Urinary Incontinence (UI)**

- ♦ Acquire knowledge about urinary incontinence and its epidemiology
- ♦ Explain the diagnosis and treatment of urinary incontinence

### **Module 7. Midwifery Care in the Preconception Consultation**

- ♦ Apply up-to-date scientific-technical and unified care criteria that ensure continuity of care
- ♦ Establish coordination strategies between the professionals involved in the process
- ♦ Make a diagnosis with clear recommendations prior to labor
- ♦ Develop a protocol to be followed to facilitate labor for the first-time mother

### **Module 8. Pregnancy**

- ♦ Identify the educational needs that the pregnant woman and her family members may require
- ♦ Implement prevention strategies and promotion of obstetric health and, therefore, the health of the future child
- ♦ Describe the normal and pathological evolution of a breastfeeding patient

### **Module 9. Maternity Education Program**

- ♦ Develop communicative strategies to establish an appropriate therapeutic link with the woman and their family
- ♦ Design strategies that favor an environment of trust, security, and intimacy, respecting the privacy, dignity and confidentiality of the women involved
- ♦ Create a guide with the main care of the newborn
- ♦ Develop strategies and action plans in the event of a newborn complication

### **Module 10. Concept of risk gestation. First trimester bleeding. Congenital Fetal Defects. Prenatal Diagnosis**

- ♦ Know the hemorrhagic pathology of the first trimester, such as miscarriage, molas and ectopic pregnancy, as well as their main causes, diagnosis and treatment, since this type of pathology is frequently found in the work units of midwives
- ♦ Get up to date knowledge on prenatal diagnosis and the latest protocols for suspected fetal malformations
- ♦ Analyze the different infectious diseases that can cause congenital fetal defects, in order to be able to act on their prevention in daily healthcare practice
- ♦ Know how to manage pregnancies with sociodemographic risk, such as adolescent pregnancies, in order to be able to act with scientific rigor before them

### **Module 11. Pregnant Woman with Pathology derived from the Digestive System**

- ♦ Get up to date knowledge on some of the most frequent pathologies in pregnancy, such as hyperemesis gravidarum, a pathology that occurs frequently in pregnancy, and which is the object of the work of midwives in emergency and high obstetric risk units
- ♦ Know the importance of the early diagnosis of pathologies such as intrahepatic cholestasis of pregnancy, which can have fatal consequences if not treated correctly
- ♦ Broaden their knowledge about viral hepatitis in pregnancy, which, due to, its special considerations in childbirth, is the subject of detailed study by midwives
- ♦ Describe the pathology that affects gastric discomfort during pregnancy, such as reflux, an issue for which pregnant women consult throughout pregnancy on numerous occasions
- ♦ Describe the main hygienic measures to combat it

**Module 12. Pregnant with Hematological and Cardiac Problems**

- ♦ Learn about the management of the main hematological pathologies that occur frequently during pregnancy, such as gestational anemia and thrombopenias
- ♦ Learn in depth about perinatal hemolytic disease, which was a cause of death until a few years ago due to its lack of knowledge
- ♦ Discuss the main issues involved in cardiac pathologies in pregnancy, as some of them may hinder pregnancy

**Module 13. Pregnant with neurological, musculoskeletal, dermatological and autoimmune problems**

- ♦ Expand knowledge in neurological pathologies that are in continuous research and evolution, such as multiple sclerosis, a complex pathology in which midwives must be training to perform a correct clinical and psychological approach
- ♦ Update knowledge on antiepileptic medication, since many of these drugs are teratogenic, and are the subject of consultation by patients
- ♦ Study dermatological pathology in depth, which will allow the student to be able to perform an adequate approach in emergency and consultation units
- ♦ Analyze the autoimmune diseases that affect pregnancy, since many of them are an indication for an early termination of pregnancy, such as lupus and antiphospholipid syndrome
- ♦ Instruct on musculoskeletal pathology, since, although it is not generally serious, it is something that affects the majority of pregnant women who consult for solutions

**Module 14. Pregnant with Respiratory and Urological/Renal Problems. Tropical and Subtropical Diseases**

- ♦ Update the knowledge of bronchial asthma and pregnancy, since it is estimated that 1% of pregnant women suffer from it, being the most frequent respiratory pathology
- ♦ Deepen the knowledge about the influenza virus and its influence on pregnancy, due to the main complications it presents, and because it is the object of hospital admission on numerous occasions
- ♦ Learn how to make a differential diagnosis between different urological and renal pathologies, very frequent during pregnancy, so much so that asymptomatic bacteriuria is screened and midwives must know how and when it should be performed
- ♦ Know the effects of tropical and subtropical diseases on the fetus and gestation in general, as this is a new topic that is under continuous study

**Module 15. Pathology of Fetal Growth and Gestational Duration. Premature Labor and Multiple Gestation. Pulmonary and Neurological Maturity**

- ♦ Describe the obstetric management of a fetus diagnosed with RIC or fetal macrosomia, as it concerns midwives during the entire gestation, as well as during labor and delivery and in the puerperium due to the special care of the neonate
- ♦ Learn about the exhaustive management of preterm labor and prolonged gestation, as due to their incidence, midwives must know their diagnosis, treatment and complications for both the mother and the fetus and/or neonate
- ♦ Know how multiple gestations occur and how they are classified according to their chorionicity
- ♦ Study the administration protocols of magnesium sulfate and antenatal corticosteroids for neuroprotection and fetal lung maturation, respectively

**Module 16. Pathology of the Placenta and Fetal Appendages. Obstetric Accidents**

- ♦ Learn about obstetric accidents and how to act is an essential part midwife's work, since in most cases it is necessary to act within seconds to avoid fatal consequences
- ♦ Training on placental problems that may occur in any of the trimesters and about which patients will often refer their concerns to the obstetrical staff
- ♦ To understand in depth the pathology of the umbilical cord, since some of its defects are accompanied by fetal anomalies, and it is the midwife who is the first to be able to objectify it on many occasions

**Module 17. Endocrine Problems during Pregnancy. Gynecologic Cancer and Pregnancy. Hypertensive States of Pregnancy**

- ♦ Know everything related to preeclampsia, the new protocols for prediction, prevention, treatment and diagnosis
- ♦ Learn about the management of the severe complications of preeclampsia, which are per se obstetric emergencies, so professionals must be equipped with the best and most updated knowledge
- ♦ Get up to dated on the management of diabetes, since midwives are the competent professionals to carry out an adequate follow-up during pregnancy, delivery and the postpartum period of patients and neonates of diabetic mothers
- ♦ Have an in-depth knowledge of gynecological-oncological issues in pregnant women, as more and more patients are suffering from these pathologies, and for whom it is essential to follow protocols based on the best evidence



**Module 18. Pathology of Puerperium. Psychological Issues during the Postpartum Period. Cardiopulmonary Resuscitation in Pregnant Women and Neonates. Legal Termination of Pregnancy**

- ♦ Learn about infectious pathology in the postpartum period, since it is the midwives who receive the woman in the postpartum visits, and whose early referral is essential for a successful outcome
- ♦ Instruct on breastfeeding problems, a subject that is almost exclusively the responsibility of midwives
- ♦ Have an in-depth understanding of psychological care such as postpartum depression and puerperal psychosis
- ♦ Know the causes of postpartum hemorrhages, since midwives are in charge of attending euthyroid deliveries and monitoring the immediate postpartum period in all hospitalization units
- ♦ Be familiar with the appropriate treatment depending on the etiology of the bleeding and its aftercare
- ♦ Get up to date in both maternal and neonatal CPR, since midwives are in charge of the first neonatal assessment in most maternity wards, and their protocols are updated from time to time to offer the best care based on scientific evidence

**Module 19. Non-obstetric Pathologies during Pregnancy**

- ♦ Recognize and initiate timely management of the most frequent pathologies that could have obstetric repercussions
- ♦ Demonstrate midwifery skills to deal with these pathologies
- ♦ Be able to carry out a multidisciplinary approach to these pathologies promoting communication and coordination between healthcare practitioners

**Module 20. Infections During Pregnancy**

- ♦ Recognize and initiate timely management of the most frequent Infections that could have obstetric repercussions
- ♦ Demonstrate midwifery skills to deal with these Infections
- ♦ Be able to deliver effective and targeted health education to prevent the pregnant woman from becoming infected and to avoid infecting the fetus

**Module 21. Obstetric Emergencies in the First Trimester**

- ♦ Recognize and initiate timely management pathologies occurring in the first trimester of pregnancy
- ♦ Demonstrate midwifery skills to deal with these pathologies
- ♦ Promote continuity of care for women suffering from first trimester pathology whether they are admitted to the hospital ward or discharged
- ♦ Be able to deliver effective and targeted health education for each of these pathologies

**Module 22. Obstetric Emergencies in the Second and Third Trimester**

- ♦ Recognize and initiate timely management of pathologies occurring in the second and third trimester of pregnancy
- ♦ Demonstrate midwifery skills to deal with these pathologies
- ♦ Promote continuity of care and communication with the rest of healthcare practitioners who will attend those pathologies that generally require hospital admission

### **Module 23. Obstetric Emergencies during the Dilation Phase of Labor**

- ♦ Recognize and initiate timely management of urgent situations that may occur during the dilation phase of labor
- ♦ Identify and know how to perform the obstetric maneuvers indicated to solve each urgent situation during the dilation phase of labor
- ♦ Demonstrate midwifery skills to deal with these situations

### **Module 24. Obstetric emergencies during labor: expulsion phase and childbirth**

- ♦ Recognize and initiate timely management of urgent situations that may occur during the third stage of labor and delivery
- ♦ Identify and know how to perform the obstetric maneuvers indicated to solve each urgent situation during the third stage of labor and delivery
- ♦ Demonstrate midwifery skills to deal with these situations

### **Module 25. Postpartum Emergencies**

- ♦ Recognize and initiate timely management of urgent situations that may occur during the postpartum period
- ♦ Identify and know how to perform the obstetric maneuvers indicated to solve each urgent situation during the postpartum period
- ♦ Demonstrate midwifery skills to deal with these situations

### **Module 26. Special Situations in the Obstetrics Emergency Department**

- ♦ Recognize and identify specific situations that occur less frequently in an obstetric emergency
- ♦ Initiate timely management of these situations
- ♦ Be able to carry out an adequate health education specific to each situation

- ♦ Demonstrate midwifery skills to deal with these situations
- ♦ Have a thorough understanding of the legal bases of informed consent in an emergency situation

### **Module 27. Breastfeeding Today and Throughout History**

- ♦ Conduct a review of the current global epidemiology of breastfeeding
- ♦ Encourage the proper development of the mother-child relationship, reducing the number of children who are assaulted, abandoned and who fail to progress without organic cause
- ♦ Encourage breastfeeding to achieve adequate growth and development, preventing future health problems

### **Module 28. Physiology and Clinical History in Breastfeeding**

- ♦ Update knowledge about the Physiology of Breastfeeding
- ♦ Describe the anatomy of the lactating breast
- ♦ Define the characteristics of a milk bank

### **Module 29. Breastfeeding Care and Breastfeeding Women's Health**

- ♦ Provide information on nutrition for the breastfeeding mother
- ♦ Describe the rights of women during Breastfeeding

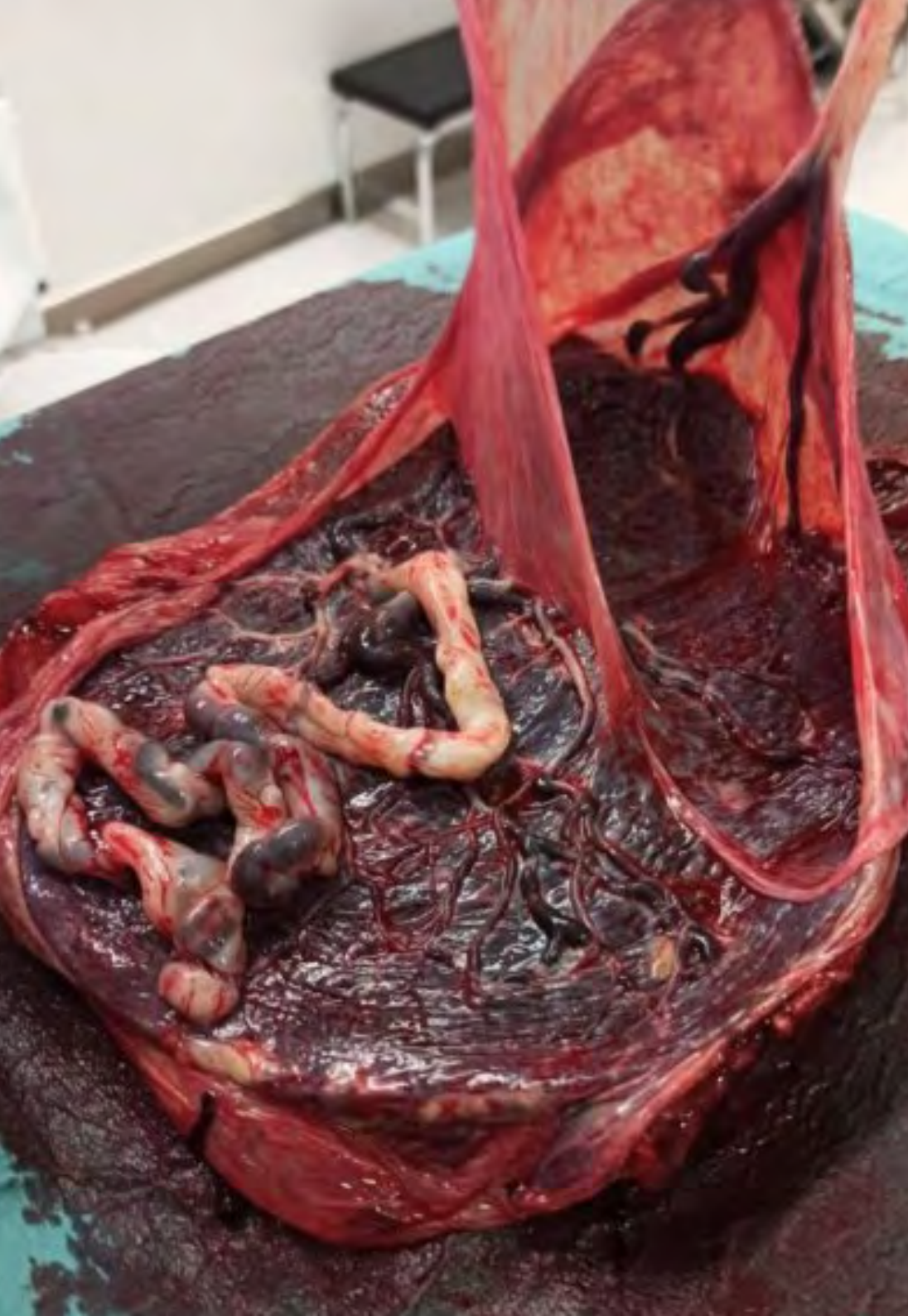
### **Module 30. Problems During Breastfeeding**

- ♦ Train mothers in newborn care and in the resolution of common infant health problems
- ♦ Detect bad latching positions of the baby that may alter the baby's feeding development

### **Module 31. Other Types of Breastfeeding**

- ♦ Explain other types of infant feeding and their substitution or combination with breastfeeding
- ♦ Explain the different bottle preparation techniques and their advantages and disadvantages





### **Module 32. Breastfeeding in Special Situations**

- ◆ Explain the benefits of physical activity during Breastfeeding
- ◆ Describe the main contraindications of breastfeeding

### **Module 33. Common Situations During Breastfeeding**

- ◆ Counsel the mother who works outside the home and wishes to continue breastfeeding
- ◆ Teach the steps to be followed to achieve successful exclusive breastfeeding

### **Module 34. Drugs and Breastfeeding**

- ◆ Obtain knowledge about the transfer of drugs to breast milk in order to guide women in their doubts when taking medications
- ◆ Define appropriate treatment of breast and nipple associated complications

### **Module 35. Associations of Breastfeeding Initiatives and Legislation**

- ◆ Describe paternal involvement in the breastfeeding process
- ◆ Promote active participation in the care of the NB and in the monitoring of its growth and development

### **Module 36. Diseases and Breastfeeding**

- ◆ Debunk false myths and false contraindications of breastfeeding
- ◆ Coverage of HIV and Hepatitis condition with respect to breastfeeding
- ◆ Study the possible difficulties of the newborn in special breastfeeding situations
- ◆ Understand the impact of breastfeeding on maternal conditions

# 03 Skills

The Advanced Master's Degree in Obstetrics and Maternal Care for Midwives develops clinical, leadership and management competencies, as well as research and analytical skills. Participating midwives will update their clinical knowledge in relevant areas, strengthen leadership and management skills, and acquire research and analytical competencies to improve the quality of maternal and child care in their professional practice.



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*Expand your competence in the management of gynecological infectious pathologies and common sexually transmitted diseases during pregnancy, allowing for a specific approach"*



## General Skills

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- ◆ Apply acquired knowledge and problem-solving skills in new or unfamiliar environments within broader (or multidisciplinary) contexts related to the field of study
- ◆ Communicate its conclusions - and the ultimate knowledge and rationale behind them to specialized and non-specialized audiences in a clear and unambiguous manner
- ◆ Know and recognize the pathologies of the three trimesters of fetal formation and know how to apply the appropriate protocols for each case
- ◆ Know and recognize digestive pathologies in relation to pregnancy and know how to act accordingly
- ◆ Ability to act effectively in the follow-up of cardiac and hematologic pathologies in pregnancy
- ◆ Deal with all types of neonatal emergencies
- ◆ Perform critical maneuvers to resolve obstetric emergencies at the end of labor
- ◆ Master up-to-date neonatal resuscitation
- ◆ Intervene in special cases of the mother and infant





## Specific Skills

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- ♦ Participate in and, if necessary, lead and energize maternal and child health, women's health, sexual health, reproductive health and climacteric programs
- ♦ Provide affective sexual and reproductive counseling to women, youth and families
- ♦ Collaborate in the implementation of activities for the promotion, prevention, assistance and recovery of women's sexual and reproductive health
- ♦ Detect risk factors and gynecological problems in women
- ♦ Have the skills to perform instrumental and cesarean deliveries among others
- ♦ Be able to evaluate and act in hypertensive pathologies of pregnancy such as endocrine and gynecological cancers in pregnancy
- ♦ Recognize and act on gestational pathologies that affect gestational duration and fetal maturation
- ♦ Develop an action protocol for obstetric emergencies at the end of labor
- ♦ Treat obstetric emergencies that may arise in the dilation phase of labor and delivery
- ♦ Resolve possible complications during breastfeeding
- ♦ Build detailed knowledge of life support in pregnancy
- ♦ Know what type of exercise is recommended during lactation
- ♦ Recognize contraindicated maternal pathologies
- ♦ Recognize contraindicated childhood pathologies
- ♦ Mastering breastfeeding techniques



*Provides in-depth management of pregnant women with pathologies derived from the digestive, hematological, cardiac, neurological, musculoskeletal, dermatological and autoimmune systems"*

# 04

# Course Management

The teachers of the Advanced Master's Degree in Obstetrics and Gynecology are highly qualified and experienced experts in the field of maternal and child health. They have an extensive academic background and clinical experience in obstetrics and gynecology, which allows them to teach theoretical and practical knowledge in a comprehensive manner. Their approach is practical and up-to-date, combined with their commitment to education and quality care, ensuring a first class update in the field of obstetrics and gynecology.



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*The teachers are leaders in the field of obstetrics and will provide the knowledge and skills you need to meet clinical challenges with confidence and competence”*

## International Guest Director

Dr. Christelle Vauloup Fellous is an internationally recognized virologist who has served as Vice-President of the Research Group on Infections during Pregnancy (GRIG) in France. She has been a member of prestigious scientific societies, such as the European Society of Clinical Virology, the French Society of Microbiology (SFL) and the French Society of Infectious Pathology (SPILF).

She has also been Coordinator of the National Reference Center (CNR) for Maternal-Fetal Rubeolar Infections, where she has played a crucial role in the centralization and improvement of diagnostics related to this disease. She has also been Head of the World Health Organization (WHO) National Reference Laboratory for Rubella, consolidating her position as an authority in the investigation and management of viral infections affecting pregnant women and their children.

In addition to her responsibilities in the field of Rubella, she has become a key figure in serological and prenatal diagnosis in hospital centers in France. In fact, her work in this field has allowed her to significantly improve the detection and treatment of infections during pregnancy. She is also an active member of several working groups for the French Ministry of Health, where she has contributed to the implementation of protocols for the systematic detection of Cytomegalovirus (CMV) in gamete and embryo donors, as well as in pregnant women.

Throughout her career, Dr. Christelle Vauloup Fellous has been a prolific author and researcher, with outstanding publications exploring topics such as transplacental transfer of neutralizing anti-SARS-CoV-2 antibodies and the prevalence of maternal and congenital toxoplasmosis. In this regard, her work has had a direct impact on improving maternal-fetal health globally.





## Dra.Christell Vauloup Fellous

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- ♦ Vice-President of the Research Group on Infections during Pregnancy (GRIG), France
- ♦ Coordinator of the National Reference Center (CNR) for Maternal-Fetal Rubellar Infections
- ♦ Head of the WHO National Reference Laboratory for Rubella
- ♦ Head of Serological and Prenatal Diagnosis in Hospital Centers
- ♦ Member of the Working Group on Cytomegalovirus Detection in Gamete and Embryo Donors (French Ministry of Health)
- ♦ Member of the Working Group on Systematic Detection of CMV Infection during Pregnancy (French Ministry of Health)
- ♦ Member of the Working Group on Implementation of Compulsory Rubella Declaration (French Ministry of Health)
- ♦ Member of the Working Group on Prevention of Cytomegalovirus Infection in Pregnant Women (French Ministry of Health)
- ♦ Doctor in Virology, University Pierre and Marie Curie
- ♦ Master's Degree in Medical Virology, Denis Diderot University, France
- ♦ Degree in Pharmacy from the University Paris-Sud
- ♦ Degree in Biology from the University Paris-Sud
- ♦ Member of: French Society of Microbiology (SFL), Francophone Society of Infectious Pathology (SPILF), European Society of Clinical Virology

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

## International Guest Director

Dr. Olivier Picone is a leading international expert in the field of Obstetrics and Prenatal Diagnostics. Indeed, his expertise has focused on a wide range of techniques, including screening and diagnostic ultrasound, amniocentesis and trophoblast biopsies. In this regard, he has contributed significantly to the advancement of maternal and fetal medical care.

In addition to his clinical work, he has played important roles in leading health organizations in France. For instance, as President of the French Federation of Prenatal Diagnostic Centers of the CPDPN, he has led initiatives to improve the quality and accessibility of prenatal diagnostic services beyond the country's borders.

Likewise, his commitment to research and prevention of viral infections during pregnancy has led him to publish numerous articles and to participate in working groups of international renown, such as the High Authority of Health and the High Council of Public Health. His research interests include Obstetrics, Gynecology, Gynecological Surgery, Obstetric Surgery, Gynecological Ultrasound, Pathological Pregnancy and Obstetric Ultrasound. In this way, his dedication to critical issues, such as CMV and Zika, has been fundamental in developing management protocols and clinical recommendations.

Also, it is worth mentioning his position as President of the Research Group on Infections during Pregnancy (GRIG), being co-author of academic reference books, such as Maternal Pathologies and Pregnancy, contributing significantly to scientific knowledge in his field. Likewise, his leadership in the creation of the University Diploma in Infectious Diseases of Pregnant Women has demonstrated his commitment to medical education and the strengthening of perinatal care worldwide.



## Dr. Picone, Olivier

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- President of the French Federation of Prenatal Diagnostic Centers of the CPDPN, Paris, France
- President of the Research Group on Infections during Pregnancy (GRIG)
- Gynecologist, Obstetrician and Head of Prenatal Diagnosis in public and private practices
- Specialist in Obstetrical Gynecology at the University of Paris Cité
- Qualified to Conduct Research (HDR) by the University of Paris Cité
- Doctor in Medicine by the University of Paris Cité
- Member of: French National College of Obstetrical Gynecologists (CNGOF), Women's Health Fund, Foch Hospital Foundation, French Fetal Medicine Club at the French College of Fetal Ultrasound (CNGOF)



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## International Guest Director

Dr. Leah McCoy is a specialist in **Nursing** and **Obstetrics** and holds the position of **Director of the Obstetric Nursing Education Program** at the Mayo Clinic in Minnesota, United States. Here she seeks to provide an innovative pathway for nurses to pursue a career as a **midwife**. With a special interest in ensuring quality care, she has dedicated herself to overseeing patient safety.

After a long career as an **Obstetric Nurse**, she has specialized in outpatient cervical dilation, postpartum hemorrhage management and obstetric emergencies. One of her main responsibilities has been **delivery care**, but she has also dedicated herself to **prenatal care** and the general health of the pregnant woman. In addition, she has experience as a trainer for professionals who wish to specialize in this branch of nursing.

In addition, Dr. Leah McCoy has been a member of the United States **Navy Nurse Corps**. After working for several years as a midwife, she decided to broaden her knowledge and enlisted with the motivation to travel while providing a service for her country. With her recognized expertise, she is also a member of the **American Board of Midwifery Certification** and a Fellow of the **American College of Obstetric Nurses**.

In the field of research, she has worked on various projects in the area of **Obstetrics**. Some of the studies in which she has participated have focused on analyzing weight gain during gestation or applying intermittent auscultation in low-risk women. She has also collaborated in a project to reduce the duration of labor induction in order to reduce by 10% the length of stay prior to delivery of the baby.



## Dr. McCoy, Leah

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- Director of the Obstetric Nursing Education Program at Mayo Clinic, Minnesota, United States
  - Nurse in the Department of Obstetrics and Gynecology at Mayo Clinic
  - Instructor of the Obstetrics and Gynecology Area of the Mayo Clinic
  - Doctorate in Obstetrical Nursing from Baylor University
  - Graduate Degree in Nursing from Marquette University
- Member of: American College of Obstetric Nurses, U.S. Navy Nurse Corps

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## Management



### Dr. Rodríguez Díaz, Luciano

- ♦ Nursing Specialist in Obstetrics and Gynecology
- ♦ Head of Studies of the Obstetric-Gynecological Nursing Teaching Unit (Midwife) of the University Hospital of Ceuta
- ♦ Midwife Bellvitge University Hospital
- ♦ Teacher at the University Centre of Nursing of Ronda
- ♦ Teacher in the Ceuta Midwifery Teaching Unit
- ♦ SEEUE obstetric-gynecologic emergencies group member
- ♦ Responsible for Perinatal Health: Reproductive Sexual Health and Normal Childbirth of Ingesa
- ♦ Member of the Clinical Commission for Research and Continuing Education of the University Hospital of Ceuta
- ♦ Member: Institute of Ceuta Studies, Editorial Board of the European Journal of Health Research, Spanish Society of Emergencies, Institute of Ceuta Studies
- ♦ PhD from the University of Granada
- ♦ Master's Degree in Physical Education and Health. University of Granada
- ♦ Master's Degree in Gynecological Nursing. Cardenal Herrera University
- ♦ Master's Degree in Obstetric Nursing. Cardenal Herrera University
- ♦ Obstetric-Gynecological Nursing Specialist. University of Malaga
- ♦ University Diploma in Nursing. Cádiz University
- ♦ Uned Community Health Promotion Expert



### **Dr. Vázquez Lara, Juana María**

- Primary Care Nurse
- Emergency Service 061 Nurse of the Health Management Area of Ceuta Doctorate from the University of Granada
- Acting midwife in the delivery service. Bellvitge University Hospital
- Head of Studies of the Ceuta Midwifery Teaching Unit
- Professor of the Ceuta Midwifery Teaching Unit
- National Coordinator of the Obstetrical-Gynecological Emergencies Working Group of the Spanish Society of Emergency Nursing (SEEUE)
- Master's Degree of the Official Doctoral Program in Physical Education and Health
- University Expert on "Health Promotion in the Community" UNED
- Specialty in Obstetric and Gynecological Nursing (Midwife), Hospital Costa del Sol de Marbella University School of Nursing and Midwifery of Malaga, University of Malaga
- University Diploma in Nursing "Salus Infirmorum" University School of Nursing, University of Cádiz



### Ms. Hernando Orejudo, Isabel

- Nurse specialized in Obstetrics and Gynecology
- Midwife in San Carlos Clinical Hospital
- Outpatient Nurse at the University Hospital La Paz
- University Diploma in Nursing from the Autonomous University of Madrid



### Ms. Fernández López-Mingo, Raquel Desirée

- Midwife at Gregorio Marañón General University Hospital and San Rafael Hospital
- Midwife at the Cerro Almodovar Health Center in Madrid
- Graduate in Nursing at the Complutense University of Madrid
- EIR of Obstetrics and Gynecology, Gregorio Marañón General University Hospital
- Master's Degree in from Integration in Care and Clinical Problem Solving in Nursing, University of Alcalá de Henares





### **Ms. Muñoz Serrano, María del Carmen**

- Midwife at the University del Sureste Hospital, in Arganda del Rey, and the HLA Moncloa Hospital in Madrid
- Midwife in the Infanta Sofía Hospital in in San Sebastián de los Reyes
- Degree in Nursing from the University of Granada
- EIR Anesthesiology Gynecology, Gregorio Marañón General University Hospital
- Master's Degree in from Integration in Care and Clinical Problem Solving in Nursing, University of Alcalá de Henares
- University Expert in Gynecologic, Obstetric and Neonatal Emergencies at the Catholic University of Avila



### **Ms. Aguilar Ortega, Juana María**

- Breastfeeding Coordinator at Hospital 12 de Octubre
- Neonatal Nurse at the 12 de Octubre Hospital
- Co-author of studies on Breastfeeding during Puerperium
- Teacher in university studies of Nurses
- Certified Lactation Consultant

## Professors

### Ms. Andrés Núñez, Carmen Patricia

- ♦ Specialist in Obstetrics and Gynecology at the University Hospital of Ceuta
- ♦ Specialist in Gynecology and Obstetrics. Quirónsalud Campo of Gibraltar Hospital
- ♦ INGESA Specialist Physician
- ♦ Gynecology Clinical Management Unit. Hospital Universitario San Cecilio , Granada
- ♦ Degree in Medicine and Surgery

### Ms. Carrasco Racero, María Mercedes

- ♦ Nurse Practitioner in Gynecological Care
- ♦ Internship Coordinator at the University Center for Nursing. Ronda, Spain
- ♦ Degree in Nursing
- ♦ Teacher

### Ms. De Dios Pérez, María Isabel

- ♦ Midwife at the Zaragoza University Hospital
- ♦ Postgraduate Certificate in Nursing
- ♦ Nurse Specialist in Obstetrics and Gynecology

### Ms. Díaz Lozano, Paula

- ♦ Midwife in the University Hospital Virgen de Valme
- ♦ Midwife in the Ceuta Health Area
- ♦ Nurse Specialist in Obstetrics and Gynecology, University Hospital of Ceuta
- ♦ Teacher specialized in Obstetrics
- ♦ Diploma in Nursing, Faculty of Nursing and Physiotherapy of Cádiz

### Ms. Gilart Cantizano, Patricia

- ♦ Nurse specialized in Obstetrics and Gynecology
- ♦ Midwife of Specialized Care in Campo de Gibraltar
- ♦ Midwife Quirónsalud Campo de Gibraltar Hospital
- ♦ EIR Midwife in the Andalusian Health Service
- ♦ Critical Care and Emergency Care Nurse in the Andalusian Health Service
- ♦ Teacher
- ♦ Postgraduate Certificate in Nursing
- ♦ Postgraduate Diploma in Pharmacy Nutrition at the IFBBB
- ♦ Postgraduate Diploma in cardiovascular risks III at the IFBBB
- ♦ Postgraduate Diploma in Urgencies and Emergencies by the Complutense University of Madrid

### Ms. Llinás Prieto, Lucía

- ♦ Nurse Practitioner in Gynecological Care
- ♦ Teacher
- ♦ Postgraduate Certificate in Nursing

**Mr. Márquez Díaz, Antonio**

- ♦ Midwife of Primary Care in the Junta de Andalucía
- ♦ Midwife, El Angel Hospital HLA Group
- ♦ Midwife of Vithas Hospital
- ♦ EIR Nursing Plan Tutor
- ♦ OPOSALUD Tutor
- ♦ Emergency Nurse at Hospital El Angel
- ♦ DUE of the ICU Pediatrics and Neonatal Unit at Hospital El Angel
- ♦ Resident Midwife in the Junta de Andalucía
- ♦ Midwife at Costa del Sol Hospital
- ♦ Midwife at Hospital Quirón Campo de Gibraltar
- ♦ Official Master's Degree in Health Economics, Health Management and Rational Use of Medicines at the University of Malaga
- ♦ Official Master's Degree in New Trends in Research in Health Sciences by the University of Malaga
- ♦ Master's Degree in Public Health from the University of Almeria
- ♦ Master's Degree in Nurse Prescription and Pharmacotherapeutic Monitoring by the University of Valencia
- ♦ Master's Degree in Pharmacotherapy, University of Valencia
- ♦ Diploma in Nursing from the University of Malaga

**Ms. Mérida Téllez, Juan Manuel**

- ♦ Nurse specialized in Obstetrics and Gynecology
- ♦ Midwife Costa del Sol de Marbella Hospital
- ♦ Teacher
- ♦ Diploma in Nursing

**Ms. Mérida Yáñez, Beatriz**

- ♦ Nurse specialized in Obstetrics and Gynecology
- ♦ Midwife of the Andalusian Health Service
- ♦ Midwife of the Vithas Hospital
- ♦ Midwife of the Murcia Health Service
- ♦ Doctor in Health Sciences
- ♦ Postgraduate Certificate in Nursing
- ♦ Member of the scientific committee of the First International Congress of Research and Innovation in Nursing and Physiotherapy of Ceuta and Melilla
- ♦ Member of the Scientific Committee of the Revista Nacional Sanitaria

**D. Muñoz Vela, Francisco Javier**

- ♦ Nurse specialized in Obstetrics and Gynecology
- ♦ Nursing internship coordinator at the Maternity and Infant Care Center of Málaga
- ♦ Midwife Hospital Regional Universitario Carlos Haya
- ♦ Midwife Hospital Parque San Antonio
- ♦ Midwife in Specialized Care at the Maternal-Children's Hospital of Malaga
- ♦ Associate Professor Faculty of Nursing. University of Malaga
- ♦ Diploma in Nursing. University of Malaga

**Ms. Palomo Gómez, Rocío**

- ♦ Nurse specialized in Gynecology and Obstetrics
- ♦ Ceuta Specialized Care Midwife
- ♦ Midwife in Carlos Haya Regional University Hospital, Málaga
- ♦ Málaga Midwifery Teaching Unit
- ♦ Teacher
- ♦ Postgraduate Certificate in Nursing

**Ms. Revidiego Pérez, María Dolores**

- ♦ Nurse specialized in Gynecology and Obstetrics
- ♦ Midwife of Specialized Care in Campo de Gibraltar
- ♦ Midwife Quirón Campo de Gibraltar Hospital
- ♦ Teacher
- ♦ Postgraduate Certificate in Nursing

**Ms. Rivero Gutiérrez, Carmen**

- ♦ Midwife. Primary Care in the Ceuta Health Area
- ♦ Midwife Ingesa Ceuta
- ♦ Midwife Puerta del Mar University Hospital Complex - San Carlos
- ♦ Professor and Tutor of the Ceuta Midwifery Teaching Unit
- ♦ Postgraduate Certificate in Nursing

**Mr. Rodríguez Díaz, David**

- ♦ Nurse at Nuestra Señora de Candelaria University Hospital
- ♦ Teacher
- ♦ Diploma in Nursing





**Mr. Vázquez Lara, Francisco José**

- ◆ Specialist in Biological Sciences
- ◆ Teacher
- ◆ PhD Polytechnic University of Valencia
- ◆ Degree in Biological Sciences

**Ms. Vázquez Lara, María Dolores**

- ◆ Nurse specialized in primary care of pregnant women
- ◆ Campo de Gibraltar Primary Care Nurse
- ◆ Teacher
- ◆ Diploma in Nursing

**Ms. Hernández Lachehab, Sonia**

- ◆ Nurse of the Rural Attention Service in Madrid
- ◆ Midwife at Hospital Universitario Clínico San Carlos in Madrid
- ◆ Primary Care Nurse in SERMAS
- ◆ Nursing Diploma from the University of Alcalá
- ◆ Nursing in Out-of-Hospital Emergencies
- ◆ Specialist in Obstetrics and Gynecology / Midwifery by the Teaching Unit of Madrid
- ◆ Postgraduate Diploma in Nursing Intervention Processes for Pediatric Patients in Risk Situations

**Ms. De la Torre Arandilla, Ana**

- ♦ Midwife in the Obstetrics Service of the University Hospital Puerta de Hierro
- ♦ Midwife in Hospital in San Carlos Clinical Hospital
- ♦ Obstetric-Gynecological Specialty by the Hospital Universitario Puerta De Hierro
- ♦ Teacher at the CTO Academy
- ♦ Member of the research team of the doctoral thesis "Clinical application of nursing science, present reality or pending task?" at the Hospital Universitario La Paz
- ♦ University Diploma in Nursing from the Autonomous University of Madrid

**D. Márquez Espinar, Gumersindo**

- ♦ Midwife in San Carlos Clinical Hospital
- ♦ Teacher at the Universidad Pontificia de Salamanca
- ♦ Degree in Nursing
- ♦ Podiatry Degree
- ♦ Postgraduate Diploma in Care Research

**Mr. De Miguel González, María José**

- ♦ Nurse at the Obstetrics and gynaecology-Ophthalmology Unit at the San Carlos Clinical Hospital
- ♦ Associate Nurse at the Hospital Clínico San Carlos
- ♦ Nurse by the University of Salamanca

**Ms. Hernando Alonso, Alba**

- ♦ Midwife and Pediatric ICU Nurse
- ♦ Midwives at the 12 de Octubre University Hospital
- ♦ Midwife at Gregorio Marañón General University Hospital
- ♦ Nurse in Pediatric ENT, Gregorio Marañón General University Hospital
- ♦ Degree in Nursing from the University of Burgos

**Mr. García Jerez, Pablo**

- ♦ Nurse Specialist in Obstetrics and Gynecology
- ♦ Specialist Nurse in Obstetrics and Gynecology at the Infanta Cristina University Hospital and HLA Moncloa University Hospital
- ♦ Specialist Nurse at the Infanta Sofia University Hospital, La Riera Health Center and Germans Trias i Pujol University Hospital
- ♦ General nurse at Hospital Universitario Puerta de Hierro, Hospital San Rafael, Centro de Salud Avenida de Aragón and Hospital Universitario Ramón y Cajal
- ♦ Graduate in Nursing from the Universidad Pontificia de Comillas
- ♦ Postgraduate Diploma in Gynecological, Obstetric and Neonatal Emergencies for Midwives by the Catholic University of Avila

**Ms. Durán Sierra, Sonia**

- ♦ Midwife at the Ortigueira Health Center, in A Coruña, Spain
- ♦ Midwife in various health centers in Ferrol
- ♦ Midwife at the Entrevías Health Center
- ♦ Graduate in Nursing from the University of Coruña
- ♦ EIR in Obstetrics and Gynecology , Gregorio Marañón University Hospital
- ♦ Postgraduate Diploma for Midwives in Gynecologic, Obstetric and Neonatal Emergencies at the Catholic University of Avila

**Ms. Botella Domenech, Pilar**

- ♦ Midwife at Infanta Sofía University Hospital
- ♦ Midwife at Gregorio Marañón Hospital
- ♦ Midwives at La Paz University Hospital
- ♦ Nurse Specialist in Obstetrics and Gynecology at Gregorio Marañón General University Hospital
- ♦ University Diploma in Nursing from the University of Alicante
- ♦ Grade in Human Nutrition and Dietetics from the Autonomous University of Madrid
- ♦ University Expert of the obstetric emergency Gynecologic Cancer by the Catholic University of Ávila

**Ms. De la Cabeza Molina Castillo, María**

- ♦ Expert midwife in Gynecobstetric Triages
- ♦ Midwife at Churriana de la Vega Health Center
- ♦ Midwife in the Obstetrics Service of the Maternal and Child Hospital of Jaén
- ♦ Midwife at the University Hospital of Ceuta
- ♦ Member of Andalusian Association of Midwives

**Ms. Gómez González, Irene**

- ♦ Midwife Ceuta University Hospital

**Ms. De Santiago Ochoa, Sofía**

- ♦ Nurse of the Nephrology and Dialysis Unit at the Gregorio Marañón University Hospital
- ♦ Midwife at Gregorio Marañón University Hospital
- ♦ Midwife at the Entrevías, Jose María Llanos, Moratalaz and Buenos Aires Health Centers
- ♦ Midwife in the Delivery, Emergency and High-Risk Hospitalization Service at the Gregorio Marañón University Hospital
- ♦ Postgraduate Diploma in family and community Nursing from the University of Alcalá
- ♦ Postgraduate Diploma in Nursing for Assisted Reproduction at the Universidad Rey Juan Carlos
- ♦ Postgraduate Diploma in Outpatient Urgencies and Emergencies at Universidad Complutense de Madrid
- ♦ Postgraduate Diploma in Critical Care at the Complutense University of Madrid  
Diploma in Nursing from the Universidad Autónoma de Madrid

**D. Carrasco Guerrero, Manuel**

- ♦ Midwife at the Ceuta University Hospital
- ♦ Obstetric-Gynecological Nursing Specialization
- ♦ Prize for the best oral communication at the International Congress of Nursing and Physiotherapy of Ceuta and Melilla

**Ms. Sánchez Boza, Pilar**

- ◆ Midwife, specialist in sexuality and couple relationships
- ◆ Midwife at Gregorio Marañón University Hospital
- ◆ Midwife in Mauritania with Rotary Club in humanitarian aid project
- ◆ Sex coaching at Fundación Sexpol (sex education talks), university centers (Universidad de Alcalá de Henares and Universidad Europea de Madrid) and health centers (Espronceda, Villablanca)
- ◆ Speaker at annual conferences against gender violence for SUMMA
- ◆ Adjunct professor at Universidad Europea as a head professor of the subject Women's Care and assistant professor in adult care II, child and adolescent care in Nursing Degree
- ◆ Diploma in Nursing. Comillas Pontifical University of Madrid
- ◆ Humanitarian Health Aid Master's Degree. Alcalá Alcalá de Henares University
- ◆ Accredited Postgraduate Diploma in Urgencies and Emergencies. School of Health Sciences University Center attached to the Complutense University of Madrid

**Ms. Hachero Rodríguez, Carmen María**

- ◆ Midwife Zaragoza Hospital
- ◆ Member of the Board of Directors of the Andalusian Association of Midwives
- ◆ Training spokesperson

**Ms. Armijo Navarro, Elena**

- ◆ Midwife San Sebastián Hospital







**Ms. Martínez Martín, Roxana**

- ♦ Midwife at Gregorio Marañón Maternal-Child Hospital
- ♦ Hematology Service Nurse in La Paz General University Hospital
- ♦ Fetal Physiopathology Service Nurse, Puerperium and Maternity Emergencies in La Paz Maternal-Children's University Hospital
- ♦ Nurse in the Anesthesia and Resuscitation Unit of the La Paz University Maternity Hospital
- ♦ Diploma in Nursing in the Autonomous University of Madrid
- ♦ EIR in Obstetrical-Gynecological Nursing at Nuestra Señora de Sonsoles Hospital
- ♦ Official Master's Degree in Emergency Nursing and Health Transport at CEU San Pablo University

**Ms. Del Pozo Álvarez, Lidia**

- ♦ Expert nurse midwife in Gynecology and Obstetrics
- ♦ Midwife at University Hospital of Ceuta
- ♦ Midwife in health centers in Cordoba
- ♦ Midwife in health centers in Lanzarote



*Take the opportunity to learn about the latest advances in this field in order to apply it to your daily practice"*

# 05

## Structure and Content

The program is designed with a clear focus on the practice of maternal and child health. In this way, the student will address fundamental topics such as anatomy and physiology of the human reproductive system, obstetric and gynecologic pathology, prenatal and postnatal care, breastfeeding, and much more. With a rigorous and structured curriculum, this program has high quality multimedia material, including detailed videos, interactive summaries and practical guides.





“

*You will delve into essential topics in maternal and child health, including obstetric and gynecological pathology, prenatal and postnatal care or breastfeeding, among others”*

## Module 1. Anatomy and Physiology of the Human Reproductive System

- 1.1. Anatomy of Male and Female Genital Tract
  - 1.1.1. Female Description
  - 1.1.2. Male Description
- 1.2. Histology of the Genital Organs and Breast
  - 1.2.1. Histological Description
- 1.3. Introduction to the Cellular and Genetic Basis of Female Gametogenesis
  - 1.3.1. Cellular and Genetic Description
- 1.4. Basis of Reproductive Endocrinology
  - 1.4.1. The Reproductive Hormonal Process
- 1.5. Sex Acquisition
  - 1.5.1. Sexual Differentiation
- 1.6. Female Physiology
  - 1.6.1. Ovarian Cycle
  - 1.6.2. Uterine Cycle
  - 1.6.3. Cycle and Physiology of the Vagina and Vulva
- 1.7. Male Physiology
  - 1.7.1. Testes and Gametogenesis
  - 1.7.2. Testicular Functional Regulation
  - 1.7.3. Male Sex Accessory Glands
  - 1.7.4. Ejaculation. The Ejaculate and its Composition
- 1.8. Neurohormonal Regulation of the Reproductive function. The Diencephalon-Pituitary-Gonads Axis
  - 1.8.1. Process of Hormonal Regulation
  - 1.8.2. Feedback
- 1.9. Puberty
  - 1.9.1. Concept
  - 1.9.2. Differentiation
- 1.10. Climacteric Physiology
  - 1.10.1. Chronology
  - 1.10.2. Phenomenology
  - 1.10.3. Mechanisms
- 1.11. Human Sexuality
  - 1.11.1. Sexual Physiology: Neuroendocrine and Psychological Aspects

- 1.12. Symptoms of Gynecological Diseases, Menstrual Symptoms
  - 1.12.1. Terminology and General Considerations
  - 1.12.2. General Discharge and its Treatments
- 1.13. Complementary Gynecological Examinations
  - 1.13.1. Cervical Cytology
  - 1.13.2. Speculoscopy
  - 1.13.3. Manual Vaginal Examination
  - 1.13.4. Vaginal Exudate
  - 1.13.5. Colposcopy
  - 1.13.6. Hysteroscopy

## Module 2. Puberty, Menstruation and Climacteric Period

- 2.1. Pathology of Puberty
  - 2.1.1. Precocious Puberty
  - 2.1.2. Pubertal Delay
- 2.2. Menstrual Disturbances
  - 2.2.1. Hypothalamic Amenorrhea
  - 2.2.2. Amenorrhea of the Pituitary Type
  - 2.2.3. Hyperprolactinemia
- 2.3. Uterine Amenorrhea
  - 2.3.1. Protocol
  - 2.3.2. Diagnosis
- 2.4. Functional Uterine Bleeding
  - 2.4.1. Ovulatory Bleeding
  - 2.4.2. Anovulatory Bleeding
  - 2.4.3. Extragenital Bleeding
- 2.5. Climacteric Pathology
  - 2.5.1. Treatment of Climacteric Pathology: HRT
  - 2.5.2. Hormone Replacement Therapy and Gynecologic Cancer
  - 2.5.3. Complementary or Alternative Measures in Menopause
  - 2.5.4. Phytoestrogens

**Module 3. Gynecological Infectious Pathology and Sexually Transmitted Diseases**

- 3.1. Sexually Transmitted Infections
  - 3.1.1. Etiology
  - 3.1.2. Epidemiology
- 3.2. Infectious Processes of the Reproductive System
  - 3.2.1. Etiology
  - 3.2.2. Classification
  - 3.2.3. Treatment
- 3.3. Vulvovaginitis
  - 3.3.1. Description
  - 3.3.2. Treatment
- 3.4. Vaginal Candidiasis
  - 3.4.1. Description
  - 3.4.2. Treatment
- 3.5. Bacterial Vaginosis
  - 3.5.1. Description
  - 3.5.2. Treatment
- 3.6. Vaginal Trichomoniasis
  - 3.6.1. Description
  - 3.6.2. Treatment
- 3.7. Syphilis
  - 3.7.1. Description
  - 3.7.2. Treatment
- 3.8. Chancroid
  - 3.8.1. Description
  - 3.8.2. Treatment
- 3.9. Lymphogranuloma Venereum
  - 3.9.1. Description
  - 3.9.2. Treatment
- 3.10. Simple Herpes
  - 3.10.1. Description
  - 3.10.2. Treatment
- 3.11. Infections Leading to Urethritis and Cervicitis
  - 3.11.1. Description
  - 3.11.2. Treatment
- 3.12. Condylomata Acuminata
  - 3.12.1. Description
  - 3.12.2. Treatment
- 3.13. Contagious Molusco
  - 3.13.1. Description
  - 3.13.2. Treatment
- 3.14. Scabies
  - 3.14.1. Description
  - 3.14.2. Treatment
- 3.15. Pediculosis Pubis
  - 3.15.1. Description
  - 3.15.2. Treatment
- 3.16. HIV
  - 3.16.1. Description
  - 3.16.2. Treatment
- 3.17. Pelvic Inflammatory Disease
  - 3.17.1. Description
  - 3.17.2. Treatment
- 3.18. Papillomavirus Infection
  - 3.18.1. Description
  - 3.18.2. Treatment

## Module 4. Care for Women with Gynecologic Problems

- 4.1. Pain of Pelvic Origin
  - 4.1.1. Dysmenorrhea
  - 4.1.2. Premenstrual Syndrome, Endometriosis and Others
- 4.2. Malformations of the genital tract
  - 4.2.1. Malformations of the Vulva
  - 4.2.2. Malformations of the Vagina
  - 4.2.3. Malformations of the Cervix
  - 4.2.4. Malformations of the Uterine Body
  - 4.2.5. Ovarian Malformations
  - 4.2.6. Malformations of the Lower Urinary Organs Urogenital Fistulas
  - 4.2.7. Female Genital Mutilation
  - 4.2.8. Breast Malformations
- 4.3. Benign Tumors
  - 4.3.1. Benign Tumors of the Vulva
  - 4.3.2. Benign Tumors of the Vagina
  - 4.3.3. Benign Tumors of the Ovary
- 4.4. Benign Gynecologic Pathology
  - 4.4.1. Benign Pathology of the Uterine Cervix
  - 4.4.2. Benign Pathology of the Uterine and Endometrial Body
  - 4.4.3. Benign Pathology of the Fallopian Tube
- 4.5. Alterations of Genital Statics
  - 4.5.1. Uterine Prolapse
  - 4.5.2. Cystocele
  - 4.5.3. Rectocele
  - 4.5.4. Enterocele
- 4.6. Vulvovaginoperineal Tears and Rectovaginal Fistulas
- 4.7. Vulvovaginal Pathology
  - 4.7.1. Vulvovaginitis
  - 4.7.2. Bartholinitis
  - 4.7.3. Lichen Sclerosus
  - 4.7.4. Paget's Disease
  - 4.7.5. Vulvar and Vaginal Cancer





- 4.8. Cervical Pathology
  - 4.8.1. Cervicitis
  - 4.8.2. Polyps
  - 4.8.3. Cervical Cancer
- 4.9. Uterine Pathology
  - 4.9.1. Uterine Myoma
  - 4.9.2. Endometrial Cancer
- 4.10. Adnexal Pathology
  - 4.10.1. Pelvic Inflammatory Disease (PID)
  - 4.10.2. Polycystic Ovary Syndrome (PCOS)
  - 4.10.3. Endometriosis
  - 4.10.4. Ovarian Carcinoma

## Module 5. Gynecological Surgery

- 5.1. Gynecological Surgical Interventions
  - 5.1.1. Gynecological Surgery
  - 5.1.2. Breast Surgery
- 5.2. The Hospitalized Gynecologic Patient
  - 5.2.1. Preoperative Care
  - 5.2.2. Postoperative Care
  - 5.2.3. Complications
- 5.3. Anesthesia in Gynecology
  - 5.3.1. Description of the Different Techniques
  - 5.3.2. Nursing Care
- 5.4. Endoscopic Surgery (Laparoscopy)
  - 5.4.1. Description
  - 5.4.2. Action Protocol
- 5.5. Endoscopic Surgery (Hysteroscopy)
  - 5.5.1. Description
  - 5.5.2. Action Protocol
- 5.6. Tubal Surgery
  - 5.6.1. Description
  - 5.6.2. Action Protocol

- 5.7. Robotic Surgery Applied to Gynecology
  - 5.7.1. Description
  - 5.7.2. Nursing Care

## Module 6. Urinary Incontinence (UI)

- 6.1. Epidemiology of Urinary Incontinence
  - 6.1.1. Prevalence
  - 6.1.2. Incidence
- 6.2. Types of Urinary Incontinence
  - 6.2.1. Concept
  - 6.2.2. Classification
- 6.3. Assessment of Midwives in Urinary Incontinence
- 6.4. Nursing Diagnoses in Urinary Incontinence
  - 6.4.1. Exploratory Methods
  - 6.4.2. Diagnostic Techniques
- 6.5. Treatment of Urinary Incontinence
  - 6.5.1. Non-Surgical Treatment
  - 6.5.2. Surgical Management
- 6.6. Prevention and Management of Urinary Incontinence in Women
  - 6.6.1. Health Education

## Module 7. Midwifery Care in the Preconception Consultation

- 7.1. Need for a Preconception Consultation
- 7.2. Content of a Midwife Consultation
  - 7.2.1. Medical History
  - 7.2.2. Physical Examination
  - 7.2.3. Complementary Tests
- 7.3. Education and Promotion of Health on the Part of the Midwife
- 7.4. Pharmacological Supplements and Midwife Recommendations

## Module 8. Pregnancy

- 8.1. Duration of pregnancy. Nomenclature
- 8.2. Anatomic-Physiological Modifications
  - 8.2.1. Cardiovascular and Cardiac Changes
    - 8.2.1.1. Cardiac Changes
    - 8.2.1.2. Hematological Changes
    - 8.2.1.3. Vascular Changes
  - 8.2.2. Respiratory Changes
    - 8.2.2.1. Anatomical Changes
    - 8.2.2.2. Functional Changes
  - 8.2.3. Renal and Urinary Changes
    - 8.2.3.1. Anatomical Modifications
    - 8.2.3.2. Functional Modifications
  - 8.2.4. Metabolic Changes
    - 8.2.4.1. Weight Gain
    - 8.2.4.2. Basal Metabolism
    - 8.2.4.3. Carbohydrate Metabolism
    - 8.2.4.4. Lipid Metabolism
    - 8.2.4.5. Protein Metabolism
    - 8.2.4.6. Acid-base Equilibrium
    - 8.2.4.7. Water Metabolism
    - 8.2.4.8. Minerals and Vitamins
  - 8.2.5. Genital and Mammary Changes
    - 8.2.5.1. External Genitalia
    - 8.2.5.2. Internal Genitals
    - 8.2.5.3. Breast Changes
  - 8.2.6. Endocrine Changes
    - 8.2.6.1. Constitution of the Fetoplacental Unit
    - 8.2.6.2. Pituitary
    - 8.2.6.3. Thyroid
    - 8.2.6.4. Parathyroid
    - 8.2.6.5. Pancreas
    - 8.2.6.6. Adrenal Gland



- 8.2.7. Skin and Eye Changes
  - 8.2.7.1. Vascular Changes
  - 8.2.7.2. Pigmentation Changes
  - 8.2.7.3. Tegumentary System
  - 8.2.7.4. Eye Changes
- 8.2.8. Gastrointestinal Changes
  - 8.2.8.1. Mouth
  - 8.2.8.2. Esophagus and Stomach
  - 8.2.8.3. Intestine
  - 8.2.8.4. Liver
  - 8.2.8.5. Gallbladder
- 8.2.9. Musculoskeletal Changes
  - 8.2.9.1. Change of the Center of Gravity
  - 8.2.9.2. Pelvis
  - 8.2.9.3. Musculoskeletal Alterations
- 8.3. Diagnosis of Pregnancy for Midwives
  - 8.3.1. Diagnosis of Pregnancy
  - 8.3.2. Biochemical Tests
    - 8.3.2.1. Biological Tests
    - 8.3.2.2. Immunological Tests
  - 8.3.3. Ultrasound
  - 8.3.4. Signs and Symptoms
    - 8.3.4.1. Signs
    - 8.3.4.2. Symptoms
- 8.4. Prenatal Care. Midwife's program of gestational control
  - 8.4.1. Prenatal Care
  - 8.4.2. Pregnancy Control Program
    - 8.4.2.1. First Pregnancy Check-up Visit (< 10 weeks)
    - 8.4.2.2. Successive Prenatal Visits
  - 8.4.3. Perinatal Risk Assessment
- 8.4.4. Prenatal Control Protocols
  - 8.4.4.1. Definition
  - 8.4.4.2. Objectives
  - 8.4.4.3. Personnel Involved
  - 8.4.4.4. Process
- 8.5. Prenatal Diagnosis
  - 8.5.1. Non-Invasive Techniques
  - 8.5.2. Invasive Techniques
  - 8.5.3. Couple Counselling in Prenatal Diagnosis
    - 8.5.3.1. Definition
    - 8.5.3.2. General Objectives
    - 8.5.3.3. Specific Objectives
    - 8.5.3.4. Targeted Population
    - 8.5.3.5. Description of the Process
- 8.6. Midwife's Health Education for the Pregnant Woman
  - 8.6.1. Health Education for the Pregnant Woman
  - 8.6.2. Healthy Habits
    - 8.6.2.1. Feeding
    - 8.6.2.2. Consumption of Harmful Substances
    - 8.6.2.3. Work
    - 8.6.2.4. Sports
    - 8.6.2.5. Travel
    - 8.6.2.6. Hygiene, Clothing, and Footwear
    - 8.6.2.7. Violence in Pregnancy
  - 8.6.3. Sexuality
  - 8.6.4. Common Discomforts During Pregnancy
    - 8.6.4.1. Cardiovascular
    - 8.6.4.2. Dermatological
    - 8.6.4.3. Digestive
    - 8.6.4.4. Locomotor
    - 8.6.4.5. Respiratory
    - 8.6.4.6. Genitourinary

- 8.6.5. Warning Signs
- 8.6.6. Promotion of Breastfeeding
- 8.6.7. Birth Plan
- 8.7. Nutrition of the Pregnant Woman
  - 8.7.1. Evaluation of the Diet
    - 8.7.1.1. Energy Requirements
    - 8.7.1.2. Food Selection
    - 8.7.1.3. Supplements During Pregnancy
    - 8.7.1.4. Weight Gain
  - 8.7.2. Special Situations
    - 8.7.2.1. Medical treatment
    - 8.7.2.2. Vegetarians
  - 8.7.3. Dietary Counseling During Pregnancy
- 8.8. Pharmaceuticals in Pregnancy
  - 8.8.1. Pharmaceuticals in Pregnancy
  - 8.8.2. Pharmacology in Pregnancy
  - 8.8.3. Mechanisms of Action in the Mother and Fetus
    - 8.8.3.1. Mother
    - 8.8.3.2. Placenta
    - 8.8.3.3. Fetus
  - 8.8.4. Use and Management of Pharmaceuticals in Pregnancy
  - 8.8.5. Indications, Pharmaceutical Interaction, and Dosage
    - 8.8.5.1. Anti-inflammatory, Analgesic, and Antipyretic Medications
    - 8.8.5.2. Gastroesophageal Reflux Prophylactics and Antiulcer Medications
    - 8.8.5.3. Anticoagulants
    - 8.8.5.4. Laxatives
    - 8.8.5.5. E. Vitamins
    - 8.8.5.6. Antianemic Medications
    - 8.8.5.7. Antiarrhythmics
    - 8.8.5.8. Antihypertensives
    - 8.8.5.9. Hormones
    - 8.8.5.10. Oral Contraceptives

- 8.8.5.11. Oral Antidiabetics
- 8.8.5.12. Corticoids
- 8.8.5.13. Dermatological Treatments
- 8.8.5.14. N. Antiviral Treatments
- 8.8.5.15. Trichomonocides
- 8.8.5.16. Antibiotics
- 8.8.5.17. Antiasthmatics
- 8.8.5.18. Antitussives
- 8.8.5.19. Rhinologicals
- 8.8.5.20. Antihistamines
- 8.8.5.21. Antiepileptics
- 8.8.5.22. Antidepressants
- 8.8.5.23. Antipsychotics
- 8.8.6. Annex. FDA Classification of the Different Groups of Medications
- 8.9. Psychosocial Aspects of Pregnancy
  - 8.9.1. Psychosocial Aspects of Pregnancy
  - 8.9.2. Cultural and Religious influences
  - 8.9.3. The Meaning and Impact of Pregnancy on the Couple and on the Family and Social Surroundings
  - 8.9.4. Psychological Changes in Pregnancy
    - 8.9.4.1. First Trimester
    - 8.9.4.2. Second Trimester
    - 8.9.4.3. Third Trimester
  - 8.9.5. Bonding

## Module 9. Maternity Education Program

- 9.1. History
- 9.2. Objectives
  - 9.2.1. General Objective
  - 9.2.2. Specific Objectives
- 9.3. Theoretical and Practical Content
  - 9.3.1. Course Content
  - 9.3.2. Methodology
- 9.4. Physical Exercises, Pelvic Floor Exercises, and Body Statics

- 9.5. Breathing Techniques for Midwives
  - 9.5.1. Breathing Classification
  - 9.5.2. Current Trends
- 9.6. Relaxation Techniques Applied by the Midwife
  - 9.6.1. Theoretical Basis of Childbirth Education
  - 9.6.2. Different Schools
- 9.7. Use of the Birthing Ball or Spherodynamics
- 9.8. The Midwife and Aquatic Maternal Education
- 9.9. Pilates Method for Pregnant Women

## Module 10. Concept of risk gestation. First trimester bleeding. Congenital Fetal Defects. Prenatal Diagnosis

- 10.1. Addressing High-risk Pregnancies
  - 10.1.1. Socio-demographic Risk
    - 10.1.1.1. Adolescent Pregnancy. Special considerations
    - 10.1.1.2. Mother with Drug Dependency Problems
      - 10.1.1.2.1. Principles of DrugInduced Teratogenesis
      - 10.1.1.2.2. Alcohol
      - 10.1.1.2.3. Cocaine
      - 10.1.1.2.4 Heroin
      - 10.1.1.2.5 Other drugs: Marijuana, Cannabis
  - 10.1.2. Occupational Risk in Pregnancy. Ergonomics. Radiation Exposure
  - 10.1.3. Risks to Reproductive Health
  - 10.1.4. Current Gestational Risk
  - 10.1.5. Medical Risk
- 10.2. Miscarriage
  - 10.2.1. Definition and Epidemiology
  - 10.2.2. Main Causes of Miscarriage
  - 10.2.3. Clinical Forms of Abortion
    - 10.2.3.1. Threat of Abortion
    - 10.2.3.2. Abortion in Progress
    - 10.2.3.3. Complete Abortion
    - 10.2.3.4. Incomplete Abortion
    - 10.2.3.5. Deferred Abortion
    - 10.2.3.6. Repeated Abortions: Concept and Approach
  - 10.2.4. Diagnosis
    - 10.2.4.1. Medical History
    - 10.2.4.2. Physical Examination
    - 10.2.4.3. Ultrasound
    - 10.2.4.4. Determination of B-hCG
  - 10.2.5. Treatment of Spontaneous Abortion
    - 10.2.5.1. Medical Treatment
    - 10.2.5.2. Surgical Management
  - 10.2.6. Complications
    - 10.2.6.1. Sepsis or Septic Abortion
    - 10.2.6.2. Hemorrhage and Disseminated Intravascular Coagulation (DIC)
  - 10.2.7. Postabortion Care
- 10.3. Ectopic or Extrauterine Pregnancy
  - 10.3.1. Definition and Risk Factors
  - 10.3.2. Clinical Symptoms
  - 10.3.3. Clinical and Ultrasound Diagnosis
  - 10.3.4. Types of Extrauterine Gestation: Tubal, Ovarian, Abdominal, etc
  - 10.3.5. Therapeutic Management and Aftercare
- 10.4. Gestational Trophoblastic Disease
  - 10.4.1. Concept
  - 10.4.2. Clinical forms of Hydatidiform Mole
    - 10.4.2.1. Partial Mole
    - 10.4.2.2. Complete Mole
  - 10.4.3. Clinical forms of Trophoblastic Neoplasia
    - 10.4.3.1. Invasive Mole and Placental Bed Tumor
    - 10.4.3.2. Choriocarcinoma

- 10.4.4. Clinical and Ultrasound Diagnosis
- 10.4.5. Treatment
- 10.4.6. Aftercare and Complications
- 10.5. Congenital fetal defects due to genetic causes
  - 10.5.1. Types of Chromosome Abnormalities
    - 10.5.1.1. Aneuploidies
    - 10.5.1.2. Structural Abnormalities
    - 10.5.1.3. Sexrelated Disorders
  - 10.5.2. Prenatal Diagnostic Techniques. Inclusion Criteria
    - 10.5.2.1. Invasive Techniques
    - 10.5.2.2. Non-Invasive Techniques
  - 10.5.3. Genetic Counseling
- 10.6. Congenital Fetal Defects Secondary to Infections: TORCH.I
  - 10.6.1. Toxoplasma
    - 10.6.1.1. Etiologic Agent, Clinic and Epidemiology
    - 10.6.1.2. Prevention
    - 10.6.1.3. Diagnosis
    - 10.6.1.4. Treatment
    - 10.6.1.5. Congenital Toxoplasma Infection
  - 10.6.2. Rubella
    - 10.6.2.1. Etiologic Agent, Clinic and Epidemiology
    - 10.6.2.2. Prevention and Vaccination
    - 10.6.2.3. Diagnosis
    - 10.6.2.4. Treatment
    - 10.6.2.5. Congenital rubella infection
- 10.7. Congenital Fetal Defects Secondary to Infections: TORCH.II
  - 10.7.1. Cytomegalovirus
    - 10.7.1.1. Etiologic Agent, Clinic and Epidemiology
    - 10.7.1.2. Prevention
    - 10.7.1.3. Diagnosis
    - 10.7.1.4. Treatment
    - 10.7.1.5. Congenital Cytomegalovirus Infection
  - 10.7.2. Chickenpox
    - 10.7.2.1. Etiologic Agent, Clinic and Epidemiology
    - 10.7.2.2. Prevention and Vaccination
    - 10.7.2.3. Diagnosis
    - 10.7.2.4. Treatment
    - 10.7.2.5. Congenital Chickenpox Infection
    - 10.7.2.6. Chickenpox Complications in Mothers
- 10.8. Congenital Fetal Defects Secondary to Infections: TORCH.III
  - 10.8.1. Herpes Simplex Virus
    - 10.8.1.1. Etiologic Agent, Clinic and Epidemiology
    - 10.8.1.2. Prevention
    - 10.8.1.3. Diagnosis
    - 10.8.1.4. Treatment
    - 10.8.1.5. Congenital Herpes Simplex Infection
  - 10.8.2. Syphilis
    - 10.8.2.1. Etiologic Agent, Clinic and Epidemiology
    - 10.8.2.2. Prevention
    - 10.8.2.3. Diagnosis
    - 10.8.2.4. Treatment
    - 10.8.2.5. Congenital syphilis
- 10.9. Other Infections that cause Fetal Problems
  - 10.9.1. Parvovirus B19
    - 10.9.1.1. Etiologic Agent, Clinic and Epidemiology
    - 10.9.1.2. Prevention
    - 10.9.1.3. Diagnosis
    - 10.9.1.4. Treatment
    - 10.9.1.5. Congenital parvovirus Infection
  - 10.9.2. Listeria
    - 10.9.2.1. Etiologic Agent, Clinic and Epidemiology
    - 10.9.2.2. Prevention and Vaccination
    - 10.9.2.3. Diagnosis
    - 10.9.2.4. Treatment
    - 10.9.2.5. Congenital Listeria Infection

- 10.10. HIV and Gestation
  - 10.10.1. Epidemiology
  - 10.10.2. Gestational Screening and Diagnosis
  - 10.10.3. Clinical Management and Treatment
  - 10.10.4. Delivery of an HIV-positive Woman
  - 10.10.5. Neonatal Care and Vertical Infection

## Module 11. Pregnant Woman with Pathology derived from the Digestive System

- 11.1. Neurovegetative Disorders:
  - 11.1.1. Appetite Disorders
  - 11.1.2. Sialorrhea
  - 11.1.3. Nausea and Vomiting
- 11.2. Hyperemesis Gravidarum:
  - 11.2.1. Concept
  - 11.2.2. Etiopathogenesis
  - 11.2.3. Clinical Manifestations
  - 11.2.4. Diagnosis
  - 11.2.5. Treatment and Care
- 11.3. Mouth Conditions
  - 11.3.1. Cavities During Pregnancy
  - 11.3.2. Epulis Gravidarum
  - 11.3.3. Gingivitis
  - 11.3.4. Perimyolysis
  - 11.3.5. Xerostomia
- 11.4. Pyrosis and Peptic Ulcers in Pregnant Women
  - 11.4.1. Concept
  - 11.4.2. Effect of Pregnancy on Heartburn and Peptic Ulcers
  - 11.4.3. Treatment and Hygienic Precautions
- 11.5. Constipation in Pregnancy
  - 11.5.1. Definition: ROMA criteria
  - 11.5.2. Etiology
  - 11.5.3. Diagnosis
  - 11.5.4. Treatment
    - 11.5.4.1. Non-Pharmacological Treatment
    - 11.5.4.2. Medical treatment
- 11.6. Inflammatory Bowel Disease
  - 11.6.1. Crohn's Disease
    - 11.6.1.1. Preconception Counseling
    - 11.6.1.2. Impact of Gestation on the Disease
    - 11.6.1.3. Diagnosis during Pregnancy
    - 11.6.1.4. Treatment
  - 11.6.2. Ulcerative Colitis
    - 11.6.2.1. Preconception Counseling
    - 11.6.2.2. Impact of Gestation on the Disease
    - 11.6.2.3. Diagnosis during Pregnancy
    - 11.6.2.4. Treatment
- 11.7. Appendicitis and Intestinal Obstruction
  - 11.7.1. Acute Appendicitis
    - 11.7.1.1. Concept
    - 11.7.1.2. Special Diagnostic Considerations in Pregnancy
    - 11.7.1.3. Treatment
  - 11.7.2. Intestinal Obstruction
    - 11.7.2.1. Concept
    - 11.7.2.2. Special Diagnostic Considerations in Pregnancy
    - 11.7.2.3. Treatment
- 11.8. Gallbladder and Liver Pathologies
  - 11.8.1. Cholecystitis
    - 11.8.1.1. Special Considerations and Management in Gestation
  - 11.8.2. Colelitis
    - 11.8.2.1. Special Considerations and Management in Gestation

- 11.8.3. Fatty Liver or Acute Hepatic Degeneration:
  - 11.8.3.1. Definition and Aetiology
  - 11.8.3.2. Clinical Symptoms
  - 11.8.3.3. Diagnosis
  - 11.8.3.4. Treatment
- 11.9. Intrahepatic Cholestasis of Pregnancy
  - 11.9.1. Concept
  - 11.9.2. Clinical Symptoms
  - 11.9.3. Diagnosis
  - 11.9.4. Treatment
  - 11.9.5. Fetal Impact and Prognosis
- 11.10. Chronic viral hepatitis and Gestation
  - 11.10.1. Hepatitis B
    - 11.10.1.1. Epidemiology
    - 11.10.1.2. Diagnosis and Screening
    - 11.10.1.3. Clinical Management
    - 11.10.1.4. Delivery of an HIV-positive Woman
    - 11.10.1.5. Neonatal Care and Vertical Infection
  - 11.10.2. Hepatitis C:
    - 11.10.2.1. Epidemiology
    - 11.10.2.2. Diagnosis and Screening
    - 11.10.2.3. Clinical Management
    - 11.10.2.4. Delivery of an HIV-positive Woman
    - 11.10.2.5. Neonatal Care and Vertical Infection
- 11.11. Pancreas
  - 11.11.1. Acute Pancreatitis in Pregnancy
    - 11.11.1.1. Definition and Risk Factors
    - 11.11.1.2. Clinical Symptoms
    - 11.11.1.3. Treatment

## Module 12. Pregnant with Hematological and Cardiac Problems

- 12.1. Gestational Anemia
  - 12.1.1. Concept
  - 12.1.2. Etiopathogenesis and the Effect on the Fetus
  - 12.1.3. Types of Anemias
    - 12.1.3.1. Microcytic Anemia
    - 12.1.3.2. Normocytic Anemia
    - 12.1.3.3. Macrocytic Anemia
  - 12.1.4. Treatment and Prophylaxis
  - 12.1.5. Other Forms of Anemia
    - 12.1.5.1. Faciform or Sickle Cell Anemia
    - 12.1.5.2. Thalassemia
- 12.2. Thrombocytopenia
  - 12.2.1. Essential Trombopenia in Pegnancy
    - 12.2.1.1. Causes and Incidence
    - 12.2.1.2. Diagnosis
    - 12.2.1.3. Obstetric Behavior
  - 12.2.2. Idiopathic Thrombocytopenic Purpura
    - 12.2.2.1. Causes and Incidence
    - 12.2.2.2. Diagnosis
    - 12.2.2.3. Obstetric Behavior
  - 12.2.3. Alloimmune Neonatal Thrombopenia
    - 12.2.3.1. Causes and Incidence
    - 12.2.3.2. Diagnosis
    - 12.2.3.3. Obstetric Behavior
  - 12.2.4. Thrombopenia Associated with Hypertensive States of Pregnancy
  - 12.2.5. Therapeutic Management of Thrombopenias in Pregnancy
  - 12.2.6. Therapeutic Management of the Newborn of a Mother with Thrombopenia
- 12.3. Coagulation Problems
  - 12.3.1. Von Willebrand Disease
    - 12.3.1.1. Definition and Epidemiology
    - 12.3.1.2. Considerations in Childbirth

- 12.3.2. Hemophilia
  - 12.3.2.1. Definition and Epidemiology
  - 12.3.2.2. Types
    - 12.3.2.2.1. Hemophilia A
    - 12.3.2.2.2. Hemophilia B
  - 12.3.2.3. Chromosomal Inheritance Patterns of Hemophilia
  - 12.3.2.4. Considerations in Childbirth
- 12.4. Varicose Syndrome
  - 12.4.1. Definition and Pathophysiology
  - 12.4.2. Clinical Symptoms
  - 12.4.3. Diagnosis
  - 12.4.4. Hemorrhoids
  - 12.4.5. Vulvar Varicose Veins
- 12.5. Perinatal Hemolytic Disease
  - 12.5.1. Concept
  - 12.5.2. Pathophysiology
  - 12.5.3. Rh Isoimmunization
  - 12.5.4. ABO Isoimmunization
- 12.6. Thromboembolic Disease in Pregnancy and Puerperium: Deep vein Thrombosis and Pulmonary Thromboembolism
  - 12.6.1. Aetiopathogenesis and Risk Factors
  - 12.6.2. Treatment
- 12.7. Gestational Heart Disease. Cardiac Exploration in Pregnancy
  - 12.7.1. Cardiac Modification in Pregnancy
  - 12.7.2. Epidemiology of Cardiac Pathology in Pregnancy
  - 12.7.3. Risk Classification of Gestational Heart Disease during pregnancy
  - 12.7.4. Preconception Counseling for Pregnant Women with Heart Disease
  - 12.7.5. Situations that Hinder Gestation
  - 12.7.6. Management and Choice of Delivery Method

- 12.8. Pregnant Women with Valvular Heart Disease
  - 12.8.1. Mitral Senosis
  - 12.8.2. Aortic Stenosis
  - 12.8.3. Mitral Insufficiency
  - 12.8.4. Aortic Insufficiency
  - 12.8.5. Tricuspid insufficiency
  - 12.8.6. Valve Prosthesis
- 12.9. Arrhythmias in Pregnancy
  - 12.9.1. Paroxysmal Supraventricular Tachycardia
  - 12.9.2. Atrial Fibrillation
  - 12.9.3. Ventricular Arrhythmias
  - 12.9.4. Bradyarrhythmias
- 12.10. Pregnant Women with Congenital Cardiac Pathology
  - 12.10.1. Tetralogy of Fallot
  - 12.10.2. Coarctation of Aorta
  - 12.10.3. Marfan Syndrome
  - 12.10.4. Single Ventricle
  - 12.10.5. Fontan
  - 12.10.6. Pregnant Women with Cardiac Transplants

## Module 13. Pregnant with neurological, musculoskeletal, dermatological and autoimmune problems

- 13.1. Epilepsy
  - 13.1.1. Management and Treatment Compatible with Gestation: Preconception Counseling
  - 13.1.2. Effects of Epilepsy on Pregnancy
  - 13.1.3. Effects of Pregnancy on Epilepsy
  - 13.1.4. Crisis Management during Childbirth
  - 13.1.5. Newborns of Epileptic Mothers: Malformations and Congenital Anomalies
- 13.2. Multiple Sclerosis (MS)
  - 13.2.1. Effects of MS on Pregnancy
  - 13.2.2. Effects of Pregnancy on MS
  - 13.2.3. Clinical Management during Gestation and Pharmacotherapy
  - 13.2.4. Clinical Management during Labor
  - 13.2.5. The Postpartum Period in Women with Multiple Sclerosis

- 13.3. Peripheral Neuropathies
  - 13.3.1. Carpal Tunnel Syndrome
  - 13.3.2. Radiculopathies: Lumbalgias and Sciatalgias
  - 13.3.3. Herniated Disc
  - 13.3.4. Bell's Palsy
  - 13.3.5. Meralgia Paresthetica
  - 13.3.6. Cyphoscoliosis
- 13.4. Spinal Cord Injuries
  - 13.4.1. Clinical Management of Women with a Spinal Cord Injury during Pregnancy
  - 13.4.2. Clinical Management during Labor. Epidural Analgesia
  - 13.4.3. Specific Considerations during the Postpartum Period
- 13.5. Other Neurological Pathologies present during Gestation
  - 13.5.1. Migraine and headaches
  - 13.5.2. Guillén-Barré syndrome
  - 13.5.3. Myasthenia Gravis
  - 13.5.4. Cerebrovascular Diseases
  - 13.5.5. Brain Neoplasms
- 13.6. Dermatological Problems during Pregnancy
  - 13.6.1. Dermatological Changes during Pregnancy
    - 13.6.1.1. Stretch Marks
    - 13.6.1.2. Pregnancy Hyperpigmentation: Melasma Gravidarum and Nevus
  - 13.6.2. Vascular Changes
    - 13.6.2.1. Spider Veins
    - 13.6.2.2. Palmar Erythema
    - 13.6.2.3. Haemangiomas
- 13.7. Specific Dermatopathologies of Pregnancy
  - 13.7.1. Herpes Gestationis
    - 13.7.1.1. Clinical Symptoms
    - 13.7.1.2. Diagnosis
    - 13.7.1.3. Differential Diagnosis
    - 13.7.1.4. Prognosis
    - 13.7.1.5. Treatment
  - 13.7.2. Impetigo Herpetiformis
    - 13.7.2.1. Clinical Symptoms
    - 13.7.2.2. Diagnosis
    - 13.7.2.3. Differential Diagnosis
    - 13.7.2.4. Prognosis
    - 13.7.2.5. Treatment
  - 13.7.3. Gestational Prurigo
    - 13.7.3.1. Clinical Symptoms
    - 13.7.3.2. Diagnosis
    - 13.7.3.3. Differential Diagnosis
    - 13.7.3.4. Prognosis
    - 13.7.3.5. Treatment
  - 13.7.4. Papular Dermatoses of Pregnancy
    - 13.7.4.1. Clinical Symptoms
    - 13.7.4.2. Diagnosis
    - 13.7.4.3. Differential Diagnosis
    - 13.7.4.4. Prognosis
    - 13.7.4.5. Treatment
  - 13.7.5. Polymorphous Rash in Pregnancy
    - 13.7.5.1. Clinical Symptoms
    - 13.7.5.2. Diagnosis
    - 13.7.5.3. Differential Diagnosis
    - 13.7.5.4. Prognosis
    - 13.7.5.5. Treatment
- 13.8. Systemic Lupus Erythematosus and Pregnancy
  - 13.8.1. Preconception Check-up
  - 13.8.2. Gestation control
    - 13.8.2.1. First Trimester
    - 13.8.2.2. Second Trimester
    - 13.8.2.3. Third Trimester
  - 13.8.3. Childbirth and Postpartum



- 13.9. Antiphospholipid Syndrome (APS)
  - 13.9.1. Concept
  - 13.9.2. Pregestational Monitoring of Women with APS
  - 13.9.3. Gestational control of the woman with PAS
  - 13.9.4. Treatment
  - 13.9.5. Childbirth and Postpartum
- 13.10. Rheumatoid Arthritis
  - 13.10.1. Concept
  - 13.10.2. How Rheumatoid Arthritis affects Gestation
  - 13.10.3. How Gestation affects Rheumatoid Arthritis
  - 13.10.4. Treatment

## Module 14. Pregnant with Respiratory and Urological/Renal Problems. Tropical and Subtropical Diseases

- 14.1. Bronchial Asthma
  - 14.1.1. Concept
  - 14.1.2. Course of bronchial asthma during pregnancy
  - 14.1.3. Treatment
  - 14.1.4. Asthmatic Crisis and Clinical Management
  - 14.1.5. Observations in the delivery of a pregnant woman with bronchial asthma
- 14.2. Community-acquired Pneumonia and Aspiration Pneumonia
  - 14.2.1. Etiology
  - 14.2.2. Treatment
  - 14.2.3. Specific Factors during Gestation
  - 14.2.4. Newborn from a Mother with Pneumonia
- 14.3. Influenza
  - 14.3.1. Etiology
  - 14.3.2. Prevention
  - 14.3.3. Pregnancy Issues
  - 14.3.4. Treatment
  - 14.3.5. Criteria for Hospitalization
  - 14.3.6. Newborn from a Mother with flu
- 14.4. Asymptomatic Bacteriuria
  - 14.4.1. Concept
  - 14.4.2. Etiology
  - 14.4.3. Diagnostic Criteria
  - 14.4.4. Treatment
- 14.5. Acute Cystitis and Urethral Syndrome
  - 14.5.1. Concept
  - 14.5.2. Etiology
  - 14.5.3. Diagnostic Criteria
  - 14.5.4. Treatment
  - 14.5.5. Monitoring
- 14.6. Acute Pyelonephritis
  - 14.6.1. Concept
  - 14.6.2. Clinical Symptoms
  - 14.6.3. Diagnosis
  - 14.6.4. Treatment
  - 14.6.5. Admission and Discharge Criteria
  - 14.6.6. Complications
- 14.7. Obstructive Uropathy
  - 14.7.1. Concept
  - 14.7.2. Clinical Symptoms
  - 14.7.3. Exploration and Specialized Tests
  - 14.7.4. Diagnosis
  - 14.7.5. Treatment
  - 14.7.6. Complications
- 14.8. Renal Transplantation and Gestation
  - 14.8.1. Effects of Transplantation on Pregnancy
  - 14.8.2. Effects of Pregnancy on Transplants
  - 14.8.3. Considerations during Labor, Postpartum and Lactation

14.9. Tropical and Subtropical Diseases I

14.9.1. Zika

14.9.1.1. Epidemiology

14.9.1.2. Transmission

14.9.1.3. Clinical Symptoms

14.9.1.4. Diagnosis

14.9.1.5. Fetal impact and congenital Zika infection

14.9.1.6. Treatment and Prevention

14.9.2. Ebola

14.9.2.1. Epidemiology

14.9.2.2. Transmission

14.9.2.3. Clinical Symptoms

14.9.2.4. Diagnosis

14.9.2.5. Effects on the Fetus

14.9.2.6. Treatment and Prevention

14.9.3. Chagas Disease

14.9.3.1. Epidemiology

14.9.3.2. Transmission

14.9.3.3. Clinical Symptoms

14.9.3.4. Diagnosis

14.9.3.5. Effects on the Fetus

14.9.3.6. Treatment and Prevention

14.10. Tropical and Subtropical Diseases II

14.10.1. Dengue

14.10.1.1. Epidemiology

14.10.1.2. Transmission

14.10.1.3. Clinical Symptoms

14.10.1.4. Diagnosis

14.10.1.5. Effects on the Fetus

14.10.1.6. Treatment and Prevention

14.10.2. Malaria

14.10.2.1. Epidemiology

14.10.2.2. Transmission

14.10.2.3. Clinical Symptoms

14.10.2.4. Diagnosis

14.10.2.5. Effects on the Fetus

14.10.2.6. Treatment and Prevention

14.10.3. Chikungunya

14.10.3.1. Epidemiology

14.10.3.2. Transmission

14.10.3.3. Clinical Symptoms

14.10.3.4. Diagnosis

14.10.3.5. Effects on the Fetus

14.10.3.6. Treatment and Prevention

**Module 15. Pathology of Fetal Growth and Gestational Duration. Premature Labor and Multiple Gestation. Pulmonary and Neurological Maturity**

15.1. Intrauterine Growth Restriction (IGR)

15.1.1. Concept

15.1.2. Pathogenesis and Etiological Factors

15.1.3. Prediction

15.1.4. Diagnosis and Classification

15.1.5. Differential diagnosis with small-for-gestational-age fetus (SGAF)

15.1.6. Treatment and Completion of the Gestation

15.2. Fetal Macrosomia

15.2.1. Concept

15.2.2. Risk Factors

15.2.3. Obstetric Follow-up and Control

15.2.4. Completion of pregnancy

15.2.5. Maternal and Fetal Complications

- 15.3. Chronologically Prolonged Gestation
    - 15.3.1. Concept
    - 15.3.2. Etiology and Prevention
    - 15.3.3. Fetal Complications
    - 15.3.4. Obstetric Behavior
    - 15.3.5. Induction in Week 41 Vs. Week 42
  - 15.4. Premature birth
    - 15.4.1. Threat of Premature Delivery
      - 15.4.1.1. Definition and Risk Factors
      - 15.4.1.2. Diagnosis: Ultrasound and Fibronectin test
      - 15.4.1.3. Obstetric management and tocolytic treatment
    - 15.4.2. Route of delivery in premature fetus and specific considerations
  - 15.5. Cervical incompetence and cerclage
    - 15.5.1. Cervical incompetence concept
    - 15.5.2. Signs of Cervical Cerclage
    - 15.5.3. Cerclage Techniques
    - 15.5.4. Pre- and Post-cerclage Considerations
    - 15.5.5. Complications
    - 15.5.6. Cerclage Removal
  - 15.6. Suspected Chorioamnionitis and Clinical Chorioamnionitis
    - 15.6.1. Definition of Chorioamnionitis
    - 15.6.2. Criteria for Suspecting Chorioamnionitis
    - 15.6.3. Diagnosis
    - 15.6.4. Treatment
    - 15.6.5. Specific Considerations in Childbirth
  - 15.7. Multiple Gestation
    - 15.7.1. Concept and Classification
    - 15.7.2. Fetal and Maternal Complications
    - 15.7.3. Diagnosis and Determination of Chorionicity
    - 15.7.4. Prenatal Diagnosis and Screening of Chromosomopathies
    - 15.7.5. Gestational Screening
    - 15.7.6. End of Gestation and Delivery Route
  - 15.8. Feto-Fetal Transfusion Syndrome
    - 15.8.1. Definition and Pathophysiology
    - 15.8.2. Diagnostic Criteria
    - 15.8.3. Differential Diagnosis
    - 15.8.4. Treatment
      - 15.8.4.1. Technique of Laser Photocoagulation of Vascular Communications
      - 15.8.4.2. Subsequent monitoring
  - 15.9. Corticosteroid Therapy to Accelerate Fetal Lung Maturation
    - 15.9.1. Concept
    - 15.9.2. Indications
    - 15.9.3. Contraindications
    - 15.9.4. Dosages
    - 15.9.5. Specific Factors according to Gestational Age
    - 15.9.6. Special Situations
  - 15.10. Magnesium Sulfate as a Fetal Neuroprotector
    - 15.10.1. Concept
    - 15.10.2. Indications
    - 15.10.3. Contraindications
    - 15.10.4. Drug Administration and Monitoring
    - 15.10.5. Concomitant use of Tocolytics in suspected Preterm Labor
    - 15.10.6. Side Effects
- Module 16. Pathology of the Placenta and Fetal Appendages. Obstetric Accidents**
- 16.1. Placenta Accrete
    - 16.1.1. Definition and Forms of Placenta Accrete
      - 16.1.1.1. Placenta Accreta
      - 16.1.1.2. Placenta Increta
      - 16.1.1.3. Placenta Percreta
    - 16.1.2. Risk Factors
    - 16.1.3. Morbimortality
    - 16.1.4. Diagnosis
    - 16.1.5. Clinical Management and Delivery of Pregnant Women with Placental Accreta

- 16.2. Placenta Previa
  - 16.2.1. Concept
  - 16.2.2. Classification
  - 16.2.3. Risk Factors
  - 16.2.4. Morbimortality
  - 16.2.5. Diagnosis
  - 16.2.6. Management of gestation and delivery of the pregnant woman with placenta previa
- 16.3. Placental Morphological and Functional Abnormalities
  - 16.3.1. Size Alterations
  - 16.3.2. Morphological Changes
    - 16.3.2.1. Bilobed Placenta
    - 16.3.2.2. Circumvallate Placenta
    - 16.3.2.3. Placenta Succenturiata
    - 16.3.2.4. Espuria
  - 16.3.3. Placental Insufficiency
- 16.4. Umbilical Cord Anomalies
  - 16.4.1. Variants of Umbilical Cord Length and its Complications: Knots
  - 16.4.2. Umbilical Cord Anomalies in relation to Appearance
    - 16.4.2.1. Procubitus
    - 16.4.2.2. Laterocidence
    - 16.4.2.3. Prolapses
      - 16.4.2.3.1 Causes
      - 16.4.2.3.2 Action to be taken in case of Cord Prolapse
  - 16.4.3. Placental Insertion Abnormalities
    - 16.4.3.1. Velamentous Insertion
    - 16.4.3.2. Marginal Insertion
    - 16.4.3.3. Previous Vasa
  - 16.4.4. Vascular Anomalies
    - 16.4.4.1. Thrombosis
    - 16.4.4.2. Hematomas
    - 16.4.4.3. The Single Umbilical Artery
- 16.5. Alterations of the Amniotic Membranes
  - 16.5.1. Amnion Nodosum
  - 16.5.2. Amniotic Bands
  - 16.5.3. Extramembranous Pregnancy
  - 16.5.4. Premature rupture of membranes and chorioamnionitis
- 16.6. Abnormalities of amniotic fluid
  - 16.6.1. Default: Oligohydramnios and Anhydramnios
    - 16.6.1.1. Concept and Epidemiology
    - 16.6.1.2. Etiological Factors
    - 16.6.1.3. Diagnosis
    - 16.6.1.4. Effects on the Fetus and Neonate
    - 16.6.1.5. Clinical Management and Treatment
  - 16.6.2. In Excess: Polyhydramnios
    - 16.6.2.1. Concept and Epidemiology
    - 16.6.2.2. Etiological Factors
    - 16.6.2.3. Diagnosis
    - 16.6.2.4. Effects on the Fetus and Neonate
    - 16.6.2.5. Clinical Management and Treatment. Delivery Assistance
- 16.7. Uterine Rupture
  - 16.7.1. Concept
  - 16.7.2. Types
  - 16.7.3. Risk Factors
  - 16.7.4. Clinical Diagnosis
  - 16.7.5. Treatment
- 16.8. Premature Detachment of a Normally Positioned Placenta
  - 16.8.1. Concept
  - 16.8.2. Risk Factors
  - 16.8.3. Clinical Diagnosis
  - 16.8.4. Clinical Management

- 16.9. Amniotic Fluid Embolism
  - 16.9.1. Concept
  - 16.9.2. Risk Factors
  - 16.9.3. Pathophysiology
  - 16.9.4. Clinical Symptoms
  - 16.9.5. Diagnosis and Treatment

- 16.10. Shoulder Dystocia
  - 16.10.1. Concept
  - 16.10.2. Risk Factors
  - 16.10.3. Diagnosis
  - 16.10.4. Delivery Method case of Placental Abruption
    - 16.10.4.1. Primary Level Techniques
    - 16.10.4.2. Secondary Level Techniques
    - 16.10.4.3. Tertiary Level Techniques
  - 16.10.5. Postnatal Care and Assessment

## Module 17. Endocrine Problems during Pregnancy. Gynecologic Cancer and Pregnancy. Hypertensive States of Pregnancy

- 17.1. Thyroid Pathology and Gestation
  - 17.1.1. hypothyroidism
    - 17.1.1.1. Diagnosis
    - 17.1.1.2. Clinical Symptoms
    - 17.1.1.3. Etiology
    - 17.1.1.4. Clinical Management
  - 17.1.2. Hyperthyroidism and Thyrotoxicosis
    - 17.1.2.1. Diagnosis
    - 17.1.2.2. Clinical Symptoms
    - 17.1.2.3. Etiology
    - 17.1.2.4. Clinical Management
  - 17.1.3. Treatment during Gestation
  - 17.1.4. Effects on the Fetus

- 17.2. Diabetes Mellitus and Pregnancy
  - 17.2.1. Pregestational Management
  - 17.2.2. Gestational Screening
  - 17.2.3. Criteria for the Termination of Pregnancy
  - 17.2.4. Considerations during Labor
  - 17.2.5. Newborn from a Mother with Diabetes Mellitus
- 17.3. Gestational Diabetes
  - 17.3.1. Concept
  - 17.3.2. Risk Factors
  - 17.3.3. Diagnosis and Screening Protocol
  - 17.3.4. Gestational Screening
  - 17.3.5. Criteria for the Termination of Pregnancy
  - 17.3.6. Clinical Management during Labor and Post-partum
  - 17.3.7. Newborn from a Mother with Gestational Diabetes
- 17.4. Obesity and Pregnancy
  - 17.4.1. Definition and Classification of Obesity
  - 17.4.2. Impact of Obesity on Gestation
  - 17.4.3. repercussion of Gestation on Obesity
  - 17.4.4. Obese Women and the Postpartum Period
- 17.5. Breast Cancer and Pregnancy
  - 17.5.1. Concept and Epidemiology
  - 17.5.2. Diagnosis
  - 17.5.3. Treatment
  - 17.5.4. Prognosis
- 17.6. Cervical Cancer and Pregnancy
  - 17.6.1. Concept and Epidemiology
  - 17.6.2. Cytology in Gestation
  - 17.6.3. Colposcopy in Gestation
  - 17.6.4. Diagnosis and Treatment
- 17.7. Ovarian Cancer and Pregnancy
  - 17.7.1. Concept and Epidemiology
  - 17.7.2. Clinical Symptoms
  - 17.7.3. Diagnosis
  - 17.7.4. Treatment

- 17.8. Pregnancy Hypertensive States I
  - 17.8.1. Concept
  - 17.8.2. Classification of Hypertension in Pregnancy
  - 17.8.3. Determination of the Degree of Severity
  - 17.8.4. Prediction and Prevention
  - 17.8.5. Treatment and Clinical Management
  - 17.8.6. Criteria for the Termination of Pregnancy
- 17.9. Pregnancy Hypertensive states II
  - 17.9.1. Eclampsia
    - 17.9.1.1. Diagnosis
    - 17.9.1.2. Clinical Management and Treatment
  - 17.9.2. Hellp's Syndrome
    - 17.9.2.1. Diagnosis
    - 17.9.2.2. Clinical Management and Treatment
  - 17.9.3. Subsequent Follow-up of Pregnant Women with Hypertension Problems
- 17.10. Antepartum Fetal Death
  - 17.10.1. Concept
  - 17.10.2. Classification
  - 17.10.3. Etiological Factors
  - 17.10.4. Diagnosis
  - 17.10.5. Clinical and Psychological Management
  - 17.10.6. Follow-up Genetic Counseling

**Module 18.** Pathology of Puerperium. Psychological Issues during the Postpartum Period. Cardiopulmonary Resuscitation in Pregnant Women and Neonates. Legal Termination of Pregnancy

- 18.1. Postpartum Infection
  - 18.1.1. Concept and Etiology
  - 18.1.2. Risk Factors
  - 18.1.3. Forms of Propagation
  - 18.1.4. Clinical Forms
  - 18.1.5. Clinical Symptoms
  - 18.1.6. Treatment and Prophylaxis
- 18.2. Postpartum Hemorrhage
  - 18.2.1. Concept
  - 18.2.2. Etiology
    - 18.2.2.1. Uterine Tone
    - 18.2.2.2. Obstetric Trauma and Uterine Inversion
    - 18.2.2.3. Fabric
    - 18.2.2.4. Coagulation Problems
  - 18.2.3. Treatment
- 18.3. Main problems in breastfeeding I
  - 18.3.1. Cracked Nipples
  - 18.3.2. Mammary Ingurgitation and Obstruction
  - 18.3.3. Eczema and Candidiasis of the Nipple
  - 18.3.4. Hypogalactia
- 18.4. Main problems in breastfeeding II
  - 18.4.1. Acute Mastitis
    - 18.4.1.1. Definition, Etiology and Clinical Manifestations
    - 18.4.1.2. Prevention
    - 18.4.1.3. Treatment
    - 18.4.1.4. Complications
- 18.5. Psychological Issues during the Postpartum Period
  - 18.5.1. Maternity Blues or Postpartum Depression
  - 18.5.2. Postpartum Depression
    - 18.5.2.1. Concept
    - 18.5.2.2. Risk Factors
    - 18.5.2.3. Prevention
    - 18.5.2.4. Treatment
  - 18.5.3. Puerperal Psychosis
    - 18.5.3.1. Concept
    - 18.5.3.2. Risk Factors
    - 18.5.3.3. Prevention
    - 18.5.3.4. Treatment

- 18.6. Perinatal Bereavement
  - 18.6.1. Concept
  - 18.6.2. Clinical Manifestations
  - 18.6.3. Types of Grief
  - 18.6.4. Phases of Perinatal Bereavement
  - 18.6.5. Psychological Handling
- 18.7. Postdural Puncture Headache
  - 18.7.1. Concept
  - 18.7.2. Differential Diagnosis
  - 18.7.3. Treatment and Prophylaxis
  - 18.7.4. Complications
- 18.8. Cardiopulmonary Resuscitation in Pregnant Women
  - 18.8.1. Main Causes of Cardio-Respiratory Arrest in Pregnant Women
  - 18.8.2. Algorithm for Cardiopulmonary Resuscitation
  - 18.8.3. Pregnancy-specific Considerations
  - 18.8.4. Fetal Extraction
- 18.9. Neonatal Cardiopulmonary Resuscitation
  - 18.9.1. Main Causes of Cardio-Respiratory in Neonates
  - 18.9.2. Algorithm for Cardiopulmonary Resuscitation
  - 18.9.3. Neuroprotection and Hypothermia in Infants
    - 18.9.3.1. Definition and Mechanism of Action of Hypothermia
    - 18.9.3.2. Inclusion and Exclusion Criteria
    - 18.9.3.3. Treatment Phases and Cooling
    - 18.9.3.4. Limitation of Therapeutic Exercise in Newborns with Hypoxic-Ischemic Encephalopathy
- 18.10. Legal Termination of Pregnancy
  - 18.10.1. Concept
  - 18.10.2. Legislative Framework
  - 18.10.3. Methods Dependent on the Number of Weeks of Gestation
  - 18.10.4. Feticide

## Module 19. Non-obstetric Pathologies during Pregnancy

- 19.1. Respiratory System Diseases
  - 19.1.1. Physiological Changes in the Pregnant Woman
  - 19.1.2. Pathology in Pregnant Women
- 19.2. Hematologic and Circulatory Abnormalities
  - 19.2.1. Physiological Changes in the Pregnant Woman
  - 19.2.2. Anemias
    - 19.2.2.1. Microcytes
    - 19.2.2.2. Normocytes
    - 19.2.2.3. Macrocytes
    - 19.2.2.4. Rare
  - 19.2.3. Plateletopenia/Thrombocytopenia
  - 19.2.4. Von Willebrand Disease
  - 19.2.5. Circulatory Disorders
    - 19.2.5.1. Antiphospholipid Syndrome
    - 19.2.5.2. Hereditary Thrombophilias
    - 19.2.5.3. Varicose Veins
    - 19.2.5.4. Deep Vein Thrombosis
    - 19.2.5.5. Pulmonary Embolism
- 19.3. Heart Disease and Pregnancy
  - 19.3.1. Physiological Changes in the Pregnant Woman
  - 19.3.2. Risk Classification in Pregnant Women with Heart Disease
  - 19.3.3. Management of Heart Disease During Pregnancy
  - 19.3.4. Management of Heart Disease in Childbirth
  - 19.3.5. Management of Postpartum Heart Disease
- 19.4. Diseases the Urinary System
  - 19.4.1. Physiological Changes in the Pregnant Woman
  - 19.4.2. Asymptomatic Bacteriuria
  - 19.4.3. Cystitis
  - 19.4.4. Acute Pyelonephritis
  - 19.4.5. Obstructive Uropathy (Urolithiasis)

- 19.5. Skin Disorders
  - 19.5.1. Physiological Changes in the Pregnant Woman
  - 19.5.2. Pregnancy-Specific Dermatoses
    - 19.5.2.1. Gestational Herpes or Pterygoid Herpes in Pregnancy
    - 19.5.2.2. Polymorphous Rash in Pregnancy
    - 19.5.2.3. Gestational Prurigo
    - 19.5.2.4. Pruritic Folliculitis in Pregnancy
  - 19.5.3. Impetigo Herpetiformis
  - 19.5.4. Differential Diagnosis of Pruritus during Pregnancy
- 19.6. Endocrine System Diseases
  - 19.6.1. Physiological Changes in the Pregnant Woman
  - 19.6.2. Diabetes
    - 19.6.2.1. Types of Diabetes
    - 19.6.2.2. Hypoglycemia/Hyperglycemia
    - 19.6.2.3. Diabetic Ketosis
    - 19.6.2.4. Chronic Metabolic Complications
  - 19.6.3. Thyroid Disorders
    - 19.6.3.1. Hypothyroidism and Pregnancy
    - 19.6.3.2. Hyperthyroidism and Pregnancy
    - 19.6.3.3. Thyrotoxic Crisis
  - 19.6.4. Adrenal Gland Disorders
    - 19.6.4.1. Pheochromocytoma
- 19.7. Digestive System Diseases
  - 19.7.1. Physiological Changes in the Pregnant Woman
  - 19.7.2. Pathology in Pregnant Women
- 19.8. Nervous System Diseases
  - 19.8.1. Headaches and Migraines
  - 19.8.2. Bell's Palsy
  - 19.8.3. Epilepsy
  - 19.8.4. CVA
  - 19.8.5. Autonomous Dysreflexia

- 19.9. Autoimmune and Musculoskeletal Diseases during Pregnancy
  - 19.9.1. Physiological Changes in the Pregnant Woman
  - 19.9.2. Pathology in Pregnant Women
- 19.10. Psychiatric Disorders during Pregnancy
  - 19.10.1. Physiological Changes in the Pregnant Woman
  - 19.10.2. Pathology in Pregnant Women

## Module 20. Infections During Pregnancy

- 20.1. Fever in Pregnant Women
  - 20.1.1. Fever, fever of short evolution, long evolution, fever of unknown origin, bacterial, systemic inflammatory response syndrome, sepsis
  - 20.1.2. Possible Causes of Fever in Pregnant woman
  - 20.1.3. Differential Diagnosis
- 20.2. Acute Gastroenteritis
  - 20.2.1. Types of Gastroenteritis
  - 20.2.2. Clinical Symptoms
  - 20.2.3. Diagnosis
  - 20.2.4. Treatment during Pregnancy
- 20.3. Bartholinitis
  - 20.3.1. Diagnosis
  - 20.3.2. Risk Factors
  - 20.3.3. Treatment
- 20.4. Vulvovaginitis
  - 20.4.1. Bacterial Vaginosis
  - 20.4.2. Candidiasis
- 20.5. Sexually Transmitted Diseases Bacterial and Parasitic Diseases
  - 20.5.1. Chlamydia
  - 20.5.2. Gonorrhoea
  - 20.5.3. Trichomoniasis
  - 20.5.4. Syphilis
- 20.6. Viral sexually transmitted diseases
  - 20.6.1. HIV
  - 20.6.2. Genital Herpes



- 20.7. Tropical Diseases
  - 20.7.1. Trypanosomiasis or Chagas Disease
  - 20.7.2. Zika
  - 20.7.3. Dengue
  - 20.7.4. Malaria
  - 20.7.5. Cholera
  - 20.7.6. Leishmaniasis
- 20.8. Toxoplasmosis and Cytomegalovirus
  - 20.8.1. Toxoplasmosis
  - 20.8.2. Cytomegalovirus
- 20.9. Epstein Barr Virus, Parvovirus B19, Listeriosis
  - 20.9.1. Epstein Barr Virus
  - 20.9.2. Parvovirus B19
  - 20.9.3. Listeriosis
- 20.10. Rubella, Chickenpox and Measles
  - 20.10.1. Rubella
  - 20.10.2. Chickenpox
  - 20.10.3. Measles

## Module 21. Obstetric Emergencies in the First Trimester

- 21.1. Hyperemesis Gravidarum:
  - 21.1.1. Etiology and Risk Factors
  - 21.1.2. Clinical Symptoms
  - 21.1.3. Diagnosis
  - 21.1.4. Treatment. Importance of Nutrition
- 21.2. Abdominal-Pelvic Pain in Pregnant Women
  - 21.2.1. Etiology
  - 21.2.2. Importance of Differential Diagnosis
  - 21.2.3. Complementary Tests
- 21.3. Metrorrhagia in the First Half of Pregnancy
  - 21.3.1. Threat of Abortion
  - 21.3.2. Intrauterine Hematomas: Retroplacental, Subchorionic, Subamniotic and Supracervical
- 21.4. Abortion
  - 21.4.1. Types
  - 21.4.2. Etiology and Risk Factors
  - 21.4.3. Diagnosis
- 21.5. Abortion Treatment and Complications
  - 21.5.1. Treatment
  - 21.5.2. Complications
- 21.6. Repeat Abortion and Psychoemotional Aspects
  - 21.6.1. Repeat Abortion
  - 21.6.2. Psychoemotional Aspects
- 21.7. Voluntary Termination of Pregnancy (VTP)
  - 21.7.1. Introduction
  - 21.7.2. Legal Assumptions of VTP
  - 21.7.3. Treatment
  - 21.7.4. Complications
  - 21.7.5. Selective Fetal Reduction or Discontinuation
- 21.8. Ectopic Pregnancy
  - 21.8.1. Uncertain Location Pregnancy
  - 21.8.2. Types of Ectopic Pregnancy
  - 21.8.3. Etiology and Risk Factors
  - 21.8.4. Diagnosis
  - 21.8.5. Treatment
- 21.9. Trophoblastic Disease
  - 21.9.1. Hydatidiform Mole
  - 21.9.2. Gestational Trophoblastic Tumor
- 21.10. HPV and Cervical Cancer in Pregnancy
  - 21.10.1. Screening during Gestation
  - 21.10.2. Treatment

## Module 22. Obstetric Emergencies in the Second and Third Trimester

- 22.1. Threat of Premature Delivery
  - 22.1.1. Etiology and Risk Factors
  - 22.1.2. Clinical Symptoms
  - 22.1.3. Diagnosis
  - 22.1.4. Treatment
- 22.2. Premature Rupture of Membranes
  - 22.2.1. Etiology and Risk Factors
  - 22.2.2. Diagnosis
  - 22.2.3. Treatment
- 22.3. Chorioamnionitis
  - 22.3.1. Etiology and Risk Factors
  - 22.3.2. Clinical Symptoms
  - 22.3.3. Diagnosis
  - 22.3.4. Treatment
- 22.4. Cervical Deficiency
  - 22.4.1. Etiology and Risk Factors
  - 22.4.2. Diagnosis
  - 22.4.3. Treatment
- 22.5. Placenta Previa. Previous Vasa
  - 22.5.1. Etiology and Risk Factors
  - 22.5.2. Diagnosis
  - 22.5.3. Treatment
- 22.6. Detachment of a Normally Positioned Placenta
  - 22.6.1. Etiology and Risk Factors
  - 22.6.2. Diagnosis
  - 22.6.3. Treatment of Placental Abruption
- 22.7. Hepatopathy in Pregnancy
  - 22.7.1. Intrahepatic Cholestasis
  - 22.7.2. Fatty Liver

- 22.8. Hypertensive states of Pregnancy (EHE)
  - 22.8.1. Classification
  - 22.8.2. Etiology and Risk Factors
  - 22.8.3. Diagnosis
  - 22.8.4. Determination of the Degree of Severity
- 22.9. Preeclampsia in Pregnancy
  - 22.9.1. Preeclampsia
- 22.10. Eclampsia and HELLP syndrome
  - 22.10.1. Eclampsia
  - 22.10.2. HELLP Syndrome

## Module 23. Obstetric Emergencies during the Dilation Phase of Labor

- 23.1. Labour and Delivery
  - 23.1.1. Prodromes of Labor
  - 23.1.2. Delivery
  - 23.1.3. Stages in the Birth Process
  - 23.1.4. Admission Criteria
- 23.2. Analgesia during the Dilatation Period
  - 23.2.1. Non-Pharmacological Pain Relief Methods
  - 23.2.2. Pharmacological Pain Relief Methods
  - 23.2.3. Complications
- 23.3. Methods of Monitoring Fetal Well-Being
  - 23.3.1. External Fetal Monitoring
  - 23.3.2. Internal Fetal Monitoring
  - 23.3.3. Basic Parameters for the Interpretation of Cardiotocographic Recordings
- 23.4. Risk of Loss of Fetal Well-Being
  - 23.4.1. Pathology Parameters for the Interpretation of Cardiotocographic Recordings
  - 23.4.2. Interpretation of the Register according to Different Agencies
  - 23.4.3. Other Complementary Tests
  - 23.4.4. Intrauterine Fetal Resuscitation
- 23.5. Dystocia during Childbirth Maternal Causes Dynamic Dystocia
  - 23.5.1. Dynamic Dystocia
  - 23.5.2. Diagnosis of Non-Progression of Labor

- 23.6. Birth Canal Dystocia
    - 23.6.1. Soft Canal Dystocia
    - 23.6.2. Boned Canal Dystocia
    - 23.6.3. Positioning during Delivery Fetal Descent
  - 23.7. Labor Dystocias: Ovarian Causes
    - 23.7.1. Umbilical Cord Knots
    - 23.7.2. Umbilical Cord Circulars
    - 23.7.3. Umbilical Cord Prolapse
  - 23.8. Labor Dystocias: Ovarian Causes
    - 23.8.1. Types of Podalic Presentation
    - 23.8.2. Vaginal Breech Delivery
    - 23.8.3. Complications
  - 23.9. Labor Dystocias: Other Presentations
    - 23.9.1. Anomalous Presentations: Face, Forehead, Chin
    - 23.9.2. Anomalous Presentations: Oblique and Transverse Situations
    - 23.9.3. Compound Presentations
  - 23.10. Amniotic Fluid Embolism
    - 23.10.1. Etiology and Risk Factors
    - 23.10.2. Diagnosis
    - 23.10.3. Performance
- Module 24. Obstetric emergencies during labor: expulsion phase and childbirth**
- 24.1. Shoulder Dystocia
    - 24.1.1. Risk Factors
    - 24.1.2. First, Second and Third Level Maneuvers
    - 24.1.3. Effects on the Fetus
  - 24.2. Instrumental Delivery
    - 24.2.1. Types of Instrumental Delivery
  - 24.3. Emergency Cesarean
    - 24.3.1. Indication for Urgent Cesarean Section
    - 24.3.2. Preparation of the Pregnant Woman for Urgent Caesarean Section
    - 24.3.3. Analgesia in Emergency Cesarean Section
  - 24.4. Special Situations during Delivery
    - 24.4.1. Preterm Delivery
    - 24.4.2. Twin Delivery
  - 24.5. Hemorrhage associated with Childbirth and early Puerperium
    - 24.5.1. Etiology and Risk Factors
    - 24.5.2. Classification
    - 24.5.3. Diagnosis and Quantification of Hemorrhage
  - 24.6. Uterine Atony and Coagulation Disturbances in Hemorrhage Associated with Childbirth and Early Puerperium
    - 24.6.1. Uterine Atony
      - 24.6.1.1. Medical treatment
      - 24.6.1.2. Surgical Management
    - 24.6.2. Coagulation Alterations
  - 24.7. Trauma to the Birth Canal
    - 24.7.1. Cervico-Vaginal and Perineal Trauma
  - 24.8. Retention of Placenta or Ovarian Adnexa
    - 24.8.1. Retention of Placenta or Ovarian Adnexa
      - 24.8.1.1. Diagnosis
      - 24.8.1.2. Etiology and Risk Factors
      - 24.8.1.3. Delivery Maneuvers
      - 24.8.1.4. Performance and Treatment
      - 24.8.1.5. Umbilical Cord Breakage
  - 24.9. Placental Accreta and Uterine Inversion
    - 24.9.1. Placenta Accrete
      - 24.9.1.1. Diagnosis
      - 24.9.1.2. Etiology
      - 24.9.1.3. Treatment
    - 24.9.2. Uterine Inversion
      - 24.9.2.1. Diagnosis
      - 24.9.2.2. Degrees of Uterine Inversion
      - 24.9.2.3. Performance and Maneuvers

- 24.10. Uterine Rupture
  - 24.10.1. Classification (Dehiscence and Tearing)
  - 24.10.2. Diagnosis
  - 24.10.3. Treatment

## Module 25. Postpartum Emergencies

- 25.1. Postpartum Infection
  - 25.1.1. Genital Tract and Pelvic Infections
    - 25.1.1.1. Risk Factors
    - 25.1.1.2. Signs and Symptoms by Extent
      - 25.1.1.2.1. Endometritis
      - 25.1.1.2.2. Salpingitis
      - 25.1.1.2.3. Pelviperitonitis
      - 25.1.1.2.3. Pelvic Celulitis or Parametritis
      - 25.1.1.2.5. Pelvic Thrombophlebitis
      - 25.1.1.2.6. Generalized Peritonitis
      - 25.1.1.2.7. Perineum, Vagina and Cervix Infection
      - 25.1.1.2.8. Cesarean Wound Infection
      - 25.1.1.2.9. Septicemia
    - 25.1.1.3. Treatment and Care
  - 25.1.2. Urinary Infection
  - 25.1.3. Respiratory infection. Mendelson's Syndrome
- 25.2. Birth Canal Complications
  - 25.2.1. Dehiscence
    - 25.2.1.1. Risk Factors
    - 25.2.1.2. Treatment
  - 25.2.2. Vulvar/Perineal Haematoma
    - 25.2.2.1. Risk Factors
    - 25.2.2.2. Treatment
- 25.3. Urinary Disturbances in the Postpartum Period
  - 25.3.1. Voiding Dysfunction and Urinary Retention
  - 25.3.2. Urinary Incontinence
- 25.4. Thromboembolic Disease in the Puerperium
  - 25.4.1. Etiology and Risk Factors
  - 25.4.2. Most Common Postpartum Thrombosis
  - 25.4.3. Diagnosis
  - 25.4.4. Treatment and Prevention
- 25.5. Cardiac and Endocrine Disorders
  - 25.5.1. Puerperal Hypertension
  - 25.5.2. Peripartum Cardiomyopathy
  - 25.5.3. Postpartum Thyroiditis
  - 25.5.4. Sheehan Syndrome
- 25.6. Psychosocial Maladjustment in the Postpartum Period
  - 25.6.1. Mother-Baby Bonding Issues
  - 25.6.2. Postpartum Depression: Maternity Blues
  - 25.6.3. Puerperal Psychosis
- 25.7. Breast Pathology
  - 25.7.1. Breast Lesions. Cracks
  - 25.7.2. Candidiasis
  - 25.7.3. Raynaud's Phenomenon
- 25.8. Breast Engorgement and Milk Pearls
  - 25.8.1. Mammary Ingurgitation
  - 25.8.2. Milk Pearls
- 25.9. Breast Duct Obstruction
  - 25.9.1. Mastitis
  - 25.9.2. Breast Abscess
- 25.10. Post Epidural Puncture Headache
  - 25.10.1. Risk Factors
  - 25.10.2. Diagnosis
  - 25.10.3. Clinical Symptoms
  - 25.10.4. Treatment

**Module 26. Special Situations in the Obstetrics Emergency Department**

- 26.1. Out-of-Hospital Birth
  - 26.1.1. Performance
  - 26.1.2. Necessary Material for Childbirth Care
  - 26.1.3. Precautions and Recommendations
  - 26.1.4. Attention upon Arrival at the Hospital
- 26.2. Drug Addiction and Pregnancy
  - 26.2.1. Management during Pregnancy and Postpartum
  - 26.2.2. Effects on the Fetus
- 26.3. Domestic Violence during Pregnancy
  - 26.3.1. Concept of Violence and Risk Factors in Pregnancy
  - 26.3.2. Types of Violence
  - 26.3.3. The Cycle of Violence
  - 26.3.4. Detection of Domestic Violence
  - 26.3.5. Action Protocol for Domestic Violence
- 26.4. Sexual Assault during Pregnancy
  - 26.4.1. Types of Sexual Offenses based on the Penal Code
  - 26.4.2. Action Protocol
- 26.5. Pseudocyesis
  - 26.5.1. Prevalence and Epidemiology
  - 26.5.2. Pathogenesis and Risk Factors
  - 26.5.3. Diagnosis
  - 26.5.4. Treatment
- 26.6. Antepartum Fetal Death
  - 26.6.1. Causes and Risk Factors
  - 26.6.2. Action Protocol
  - 26.6.3. Bereavement Care
- 26.7. Cancer and Pregnancy: Chemotherapy Drugs in Pregnancy
- 26.8. Transplants and Pregnancy
- 26.9. SARS CoV2 Infection and Pregnancy

- 26.10. Informed Consent in Urgent Care
  - 26.10.1. Types of Consent
  - 26.10.2. Revocation of Informed Consent
  - 26.10.3. Special Considerations for the Urgent Care of Minors
  - 26.10.4. Special Considerations for the Urgent Care of Persons under Guardianship

**Module 27. Breastfeeding Today and Throughout History**

- 27.1. Concepts Related to Breastfeeding
  - 27.1.1. Evolution of the Concept of Breastfeeding
  - 27.1.2. Breastfeeding Concepts
- 27.2. History of Breastfeeding
  - 27.2.1. Natural History of Breastfeeding
  - 27.2.2. Historical Development of The Importance of Breastfeeding
- 27.3. False Myths
  - 27.3.1. Misconceptions About Breastfeeding
  - 27.3.2. Correct Beliefs About Breastfeeding
- 27.4. Care Strategy for Normal Childbirth
  - 27.4.1. Encouraging Breastfeeding after Childbirth
  - 27.4.2. Benefits of Breastfeeding in Childbirth
- 27.5. Epidemiology
  - 27.5.1. Epidemiological Course of Breastfeeding Development
  - 27.5.2. Social Evolution of Breastfeeding
- 27.6. Human Milk Banks
  - 27.6.1. Milk Bank Concept
  - 27.6.2. Characteristics of a Milk Bank
- 27.7. Counseling and Support for Women Who Do Not Wish to Breastfeed
  - 27.7.1. Health Education for Women Do Not Wish to Breastfeed
  - 27.7.2. Specific Information on Care for Non Lactating Women
- 27.8. Womens Rights During Breastfeeding
  - 27.8.1. The Immediate Rights of the Infant
  - 27.8.2. Social Benefits in Breastfeeding Women

- 27.9. Paternal Involvement in Breastfeeding
  - 27.9.1. The Father as a Supporting Figure in Breastfeeding
  - 27.9.2. The father as a Breastfeeding Consultant
- 27.10. Protection of Breastfeeding Worldwide: WHO Recommendations
  - 27.10.1. WHO Recommendations
  - 27.10.2. Global Protection in Breastfeeding

## Module 28. Physiology and Clinical History in Breastfeeding

- 28.1. Anatomy of the Breast
  - 28.1.1. Surrounding Bony Structure of the Breast
  - 28.1.2. Muscular Structure of the Breast
- 28.2. Physiology of Breastfeeding
  - 28.2.1. Physiological Development of Breastfeeding
  - 28.2.2. Hormonal Circuit of Breastfeeding
- 28.3. Benefits of Breastfeeding for the Mother
  - 28.3.1. Concept
  - 28.3.2. The Benefits for the Mother in Breastfeeding
- 28.4. Benefits of Breastfeeding for the Baby
  - 28.4.1. Concept
  - 28.4.2. The Benefits for the Baby in Breastfeeding
- 28.5. Evaluation of the Intake
  - 28.5.1. Indications on the Intake
  - 28.5.2. Inadequate Actions on the Intake
- 28.6. Signs of Good and Bad Hitching
  - 28.6.1. Hitching Concept
  - 28.6.2. Benefits of a Good Hitch
- 28.7. Recommended Positions
  - 28.7.1. Proper Breastfeeding Positions
  - 28.7.2. Inadequate Breastfeeding Positions

## Module 29. Breastfeeding Care and Breastfeeding Women's Health

- 29.1. First Recommendations during Pregnancy
  - 29.1.1. Evolution of Breastfeeding in Pregnancy
  - 29.1.2. Breastfeeding Care in Pregnancy
- 29.2. Breast Care during Breastfeeding
  - 29.2.1. General Care
  - 29.2.2. Specific Advice
- 29.3. Proper Techniques for Breastfeeding
  - 29.3.1. Different Breastfeeding Techniques
  - 29.3.2. Incorrect Breastfeeding Measures
- 29.4. Effects of Breastfeeding on Women's Health in the Short Term
  - 29.4.1. Immediate Benefits of Breastfeeding in Women
  - 29.4.2. Positive Breastfeeding Tips
- 29.5. Effects of Breastfeeding on Women's Health in the Mid- and Long-Term
  - 29.5.1. Long-term Benefits of Breastfeeding
  - 29.5.2. Mid-term Benefits of Breastfeeding
- 29.6. Maternal Diet and Breastfeeding
  - 29.6.1. Foods that alter Breast Milk
  - 29.6.2. Foods that benefit Breastfeeding
- 29.7. Physical Activity and Breastfeeding
  - 29.7.1. Encouraging Physical Activity During Breastfeeding
  - 29.7.2. Contraindications to Physical Activity During Breastfeeding

## Module 30. Problems During Breastfeeding

- 30.1. Contraindications for Breastfeeding
  - 30.1.1. Situations that Contraindicate Breastfeeding
  - 30.1.2. Nutritional
- 30.2. Maternal Pathologies that Contraindicate Breastfeeding
  - 30.2.1. List Maternal Pathologies that Contraindicate Breastfeeding
  - 30.2.2. Counseling on Contraindications to Breastfeeding
- 30.3. Newborn Pathologies that Contraindicate Breastfeeding
  - 30.3.1. List Neonatal Pathologies that Contraindicate Breastfeeding
  - 30.3.2. Counseling on Contraindications to Breastfeeding

- 30.4. Nipple Problems
  - 30.4.1. Different Types of Nipple
  - 30.4.2. Support to the Mother
- 30.5. Mammary Ingurgitation
  - 30.5.1. Concept
  - 30.5.2. Adequate Treatment
- 30.6. Mastitis
  - 30.6.1. Concept
  - 30.6.2. Adequate Treatment
- 30.7. Aids and Devices to Assist in Breastfeeding
  - 30.7.1. Different Breastfeeding Devices
  - 30.7.2. How to help Breastfeeding?

### Module 31. Other Types of Breastfeeding

- 31.1. Artificial Breastfeeding
  - 31.1.1. Concept
  - 31.1.2. Development of the Technique
- 31.2. Formula Milk: Handling and Disadvantages
  - 31.2.1. Formula Milk Preparation
  - 31.2.2. Benefits and Drawbacks
- 31.3. Preparation of a Baby Bottle
  - 31.3.1. Technique for Preparing a Baby Bottle
  - 31.3.2. Sterilizing Baby Bottles
- 31.4. Mixed Breastfeeding
  - 31.4.1. Concept
  - 31.4.2. How to Carry it Out?
- 31.5. Relactation
  - 31.5.1. Concept
  - 31.5.2. Indications
- 31.6. Combination of Breastfeeding with Nutrition
  - 31.6.1. Complementary Nutrition
  - 31.6.2. Nutritional Needs

### Module 32. Breastfeeding in Special Situations

- 32.1. Hypogalactia
  - 32.1.1. Concept
  - 32.1.2. Measures to Treat
- 32.2. Sick Newborns
  - 32.2.1. Different Pathologies
  - 32.2.2. Breastfeeding in Children with Pathologies
- 32.3. Prematurity
  - 32.3.1. Definition of Prematurity
  - 32.3.2. Breastfeeding in Premature Infants
- 32.4. Teenage Mothers
  - 32.4.1. Breastfeeding in Teenage Mothers
  - 32.4.2. Problems in Teenage Mothers
- 32.5. Breastfeeding and LAM
  - 32.5.1. Concept
  - 32.5.2. Benefits of LAM
- 32.6. Cleft Lip and Lip Malformations
  - 32.6.1. Concept
  - 32.6.2. Support for Newborns and Breastfeeding Mothers
- 32.7. Breastfeeding and New Pregnancy
  - 32.7.1. Tandem Breastfeeding
  - 32.7.2. Nutritional
- 32.8. Breastfeeding and Stress
  - 32.8.1. Stress as a Detriment to Breastfeeding
  - 32.8.2. Measures to Cope with Stress

### Module 33. Common Situations During Breastfeeding

- 33.1. Crying and Breast Refusal
  - 33.1.1. Concept
  - 33.1.2. Immediate Attention
- 33.2. Breastfeeding Strike
  - 33.2.1. Concept
  - 33.2.2. Strike Counseling
- 33.3. Prolonged and Tandem Breastfeeding
  - 33.3.1. Concept
  - 33.3.2. Benefits
- 33.4. Co-Sleeping
  - 33.4.1. Concept
  - 33.4.2. Benefits of Co-sleeping
- 33.5. Working Outside the Home and Breastfeeding
  - 33.5.1. Incorporation into Work
  - 33.5.2. Support in this Situation
- 33.6. Milk Extraction: Methods and Tools
  - 33.6.1. Parts of the Breast Pump
  - 33.6.2. Use of the Breast Pump
- 33.7. Transport and Storage of Breast Milk
  - 33.7.1. Milk Storage Mechanisms
  - 33.7.2. Milk Transport

### Module 34. Drugs and Breastfeeding

- 34.1. Transfer of Drugs and Other Elements into Breast Milk
  - 34.1.1. Concept
  - 34.1.2. Medication Administration Contraindications
- 34.2. Drug Interaction and Breastfeeding
  - 34.2.1. Drug Interaction
  - 34.2.2. Medication administration
- 34.3. Most Commonly Used Drugs During Breastfeeding
  - 34.3.1. Drugs Indicated for Breastfeeding
  - 34.3.2. Indications

- 34.4. Web-based Resources and Tools on Drugs and Breastfeeding
  - 34.4.1. Web about Breastfeeding and Drugs
  - 34.4.2. How to Search Online?
- 34.5. Harmful Substances and Breastfeeding
  - 34.5.1. Different Harmful Substances in Breastfeeding
  - 34.5.2. Attitude Towards the Ingestion of Harmful Substances

### Module 35. Associations of Breastfeeding Initiatives and Legislation

- 35.1. Support Groups
  - 35.1.1. Concept
  - 35.1.2. Different Support Groups
- 35.2. Lactation Consultants
  - 35.2.1. Concept of Consultants
  - 35.2.2. Consultant's Roles
- 35.3. Innocenti Statement
  - 35.3.1. Protecting Breastfeeding Globally
  - 35.3.2. Protection Treaty
- 35.4. WHO Baby-Friendly Hospital Initiative (BFHI)
  - 35.4.1. Characteristics of the Initiative
  - 35.4.2. Objectives to be Met
- 35.5. Legislation for the Protection of Breastfeeding
  - 35.5.1. Current Legislation
  - 35.5.2. Rights and Responsibilities
- 35.6. Recommended Websites
  - 35.6.1. Online queries
  - 35.6.2. Credibility of Web Pages





## Module 36. Diseases and Breastfeeding

- 36.1. Concept
  - 36.1.1. Definition of Diseases and Breastfeeding
  - 36.1.2. Performance
- 36.2. Absolute and False Contraindications
  - 36.2.1. Contraindications
  - 36.2.2. False Myths
- 36.3. HIV and Breastfeeding
  - 36.3.1. Concept
  - 36.3.2. Indications for Breastfeeding
- 36.4. Hepatitis and Breastfeeding
  - 36.4.1. Concept
  - 36.4.2. Indications for Breastfeeding
- 36.5. Oncological Processes and Breastfeeding
  - 36.5.1. Cancer and Breastfeeding
  - 36.5.2. Indications for Oncologic Process and Breastfeeding Mother
- 36.6. Special Situations in the Newborn that make Breastfeeding Difficult
  - 36.6.1. Newborn Special Situations
  - 36.6.2. Mechanisms for Adapting Special Situations and Breastfeeding
- 36.7. How to Promote Breastfeeding in Maternal-Fetal Conditions?
  - 36.7.1. Concept
  - 36.7.2. Encourage Breastfeeding In Situ

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*The program adapts to you, allowing you to study at your own pace and access course materials online without sacrificing your professional or personal responsibilities”*

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 Nursing School we use the Case Method

In a given situation, what should a professional do? 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. Nurses learn better, faster, and more sustainably over time.

*With TECH, nurses can experience a learning methodology 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, in an attempt to recreate the real conditions in professional nursing 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. Nurses who follow this method not only grasp concepts, but also develop their mental capacity, by evaluating real situations and applying their knowledge.
2. The learning process has a clear focus on practical skills that allow the nursing professional to better integrate knowledge acquisition into the hospital setting or primary care.
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 case studies with a 100% online learning system based on repetition combining a minimum of 8 different elements in each lesson, which is a real revolution compared to the simple study and analysis of cases.



*The nurse will learn through real cases and by solving 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 we have trained more than 175,000 nurses with unprecedented success in all specialities regardless of practical workload. 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 really 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.



### Nursing Techniques and Procedures on Video

We introduce you to the latest techniques, to the latest educational advances, 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 them as many times as you want.



### 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 suggesting that observing third-party experts can be useful.  
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 Advanced Master's Degree in Obstetrics and Maternal Care for Midwives guarantees students, in addition to the most rigorous and up to date education, access to an Advanced Master's Degree issued by TECH Global University.



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*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 **Advanced Master's Degree diploma in Obstetrics and Maternal Care for Midwives** 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: **Advanced Master's Degree in Obstetrics and Maternal Care for Midwives**

Modality: **online**

Duration: **2 years**

Accreditation: **120 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.



## Advanced Master's Degree Obstetrics and Maternal Care for Midwives

- » Modality: online
- » Duration: 2 years
- » Certificate: TECH Global University
- » Credits: 120 ECTS
- » Schedule: at your own pace
- » Exams: online

# Advanced Master's Degree Obstetrics and Maternal Care for Midwives

