Hybrid Professional Master's Degree Pathologies of Pregnancy for Nursing





Hybrid Professional Master's Degree Pathologies of Pregnancy for Nursing

Modality: Hybrid (Online + Clinical Internship) Duration: 12 months Certificate: TECH Global University 60 + 5 ECTS Credits

Website: www.techtitute.com/us/nursing/hybrid-professional-master-degree/hybrid-professional-master-degree-pathologies-pregnancy-nursing

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01 Introduction

Nurses have the important mission of identifying early alterations and performing comprehensive evaluations of pregnant patients and their evolution. With technological advances, more and better tools are available to develop personalized care plans for different gestational pathologies. Paradoxically, not all professionals in this healthcare field are up to date with its management. For this reason, TECH has designed this program with a pioneering academic modality. This program includes 1,500 hours of theoretical learning, on a 100% online and interactive platform. At the end of this stage, a practical, on-site, intensive internship will take place in a prestigious hospital facility. In this way, together with great experts, the physician will be able to elevate his practice to the highest level of excellence.

This Hybrid Professional Master's Degree is everything you need to become an up-to-date nurse capable of dealing with complex pathologies affecting pregnant women"

tech 06 | Introduction

Recently, technological innovation and new therapeutic strategies have led to the development of increasingly sophisticated techniques for the assessment and monitoring of diseases in both the pregnant woman and the fetus. Nurses involved in providing care to these at-risk populations must keep abreast of the latest trends in this area. However, in most cases, they encounter programs with a high theoretical load that prevents them from developing practical skills and completing an excellent refresher course.

TECH goes one step beyond this difficulty and develops a pioneering educational modality to achieve both objectives. This program combines two fundamental stages. The first phase is a theoretical approach, from a 100% online and interactive platform, in which the nurse will have the opportunity to dedicate 1,500 hours to the study of the latest concepts in this field. During this period, innovative teaching methodologies, such as Relearning, and multimedia resources, such as videos and infographics, will be used to facilitate learning.

Afterwards, the graduates will carry out a 3-week intensive on-site internship in a prestigious hospital center. This pedagogical moment will be ideal to apply the knowledge acquired in the theoretical phase in the care of real patients. In addition, you will work closely with leading experts and have the opportunity to learn firsthand from their more complex experiences. All this will be possible thanks to the specialized guidance of an assistant tutor who will allow the nurse to assimilate the most modern care dynamics and incorporate them into his or her daily practice. This **Hybrid Professional Master's Degree in Pathologies of Pregnancy for Nursing** contains the most complete and up-to-date scientific program on the market. The most important features include:

- Development of more than 100 clinical cases presented by Nursing professionals
- The graphic, schematic, and practical contents with which they are created, provide scientific and practical information on the disciplines that are essential for professional practice
- Presentation of practical workshops on procedures diagnosis, and treatment techniques
- An algorithm-based interactive learning system for decision-making in the clinical situations presented throughout the course
- All of this will be complemented by theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- Content that is accessible from any fixed or portable device with an Internet connection
- In addition, you will be able to carry out a clinical internship in one of the best hospitals in the world



Throughout this Hybrid Professional Master's Degree, you will acquire a broad knowledge of the most important theoretical concepts to be taken into account when dealing with pathologies that affect pregnant women"

Introduction | 07 tech

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Complete 3 weeks of intensive, face-to-face learning, in which you will add modern skills to your nursing practice with this TECH program"

In this Hybrid Professional Master's Degree proposal, of a professionalizing nature and blended learning modality, the program is aimed at updating Nursing professionals. The contents are based on the latest scientific evidence, and oriented in a didactic way to integrate theoretical knowledge in nursing practice and will allow decision making in patient management.

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

You will examine the academic modules of this curriculum in depth and add to your body of knowledge the latest scientific evidence on nurse managed preeclampsia.

Complete your training with a clinical stay of the utmost rigor, under the close supervision of an associate tutor with a long professional career in the field of postpartum Nursing.

02 Why Study this Hybrid Professional Master's Degree?

This Hybrid Professional Master's Degree is the best option to update nurses' knowledge and practical skills in the management of pathologies during pregnancy. The program offers innovative and updated theoretical training through an online platform that includes innovative teaching methodologies and multimedia resources. In addition, it includes a practical, on-site and intensive stay in a prestigious hospital center. From it, professionals will be able to apply the latest techniques and tools in the care of real patients with different complications of their gestational state. All this will contribute to improve their praxis and will allow them to provide quality care to pregnant women with pathologies. Why Study this Hybrid Professional Master's Degree? | 09 tech

TECH, through this Hybrid Professional Master's Degree, will turn you into a nurse expert in the detection of infections such as bacterial vaginosis in pregnant women"

tech 10 | Why Study this Hybrid Professional Master's Degree?

1. Updating from the latest technology available

For several years now, the study of Pathologies of Pregnancy for Nursing has been complemented by increasingly sophisticated technological resources. In a short time, these devices have been able to expand the assessment and monitoring of complex maternal and fetal conditions. With TECH, you will master all of them in a practical and theoretical way.

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

During this Hybrid Professional Master's Degree, the specialist will have access to the best experts. In the initial, theoretical learning phase, you will have a faculty of excellence to guide your progress. Then, in clinical practice, the physician will complete a rigorous internship with experienced professionals.

3. Entering First-Class Clinical Environments

Based on a careful selection, TECH has coordinated first class clinical internships for the hospital stay to be developed during the second half of this Hybrid Professional Master's Degree. During this academic phase, the nurse will have access to state-of-the-art healthcare resources. In addition, you will be able to put them into practice for the benefit of real patients under the close supervision of a prestigious team of experts and an experienced assistant tutor.



Why Study this Hybrid Professional Master's Degree? | 11 tech

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

In an educational market poorly adapted to the practical learning requirements of Nursing professionals, TECH breaks into the market with a pioneering study model of its kind. Thus, after completing an online learning period of 1,500 hours, the doctor will complete a 100% practical and face-to-face stay, in which they will be updated on the main innovations in relation to the approach to Pathology in Pregnancy.

5. Expanding the Boundaries of Knowledge

TECH offers the possibility to carry out the clinical practice of this program in centers of international importance. In this way, nurses will expand their academic frontiers based on global knowledge and the implementation of resources according to the standards of different geographic latitudes. This is, without a doubt, a study opportunity only within reach of TECH, the largest digital university in the world.

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

03 **Objectives**

This program offers the nurse a theoretical and practical training of excellence in relation to the most modern clinical procedures to assist Pathologies in Pregnancy. This is possible thanks to an innovative academic modality composed of two distinct stages. In the first one, the physician will study recent concepts from a 100% online learning platform. Afterwards, you will develop a practical, face-to-face and intensive stay in prestigious hospitals, equipped with the latest scientific and technological resources for the care of pregnant women and their babies.

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As a nurse, you will be able to identify some predictive signs of postpartum hemorrhage thanks to this TECH program"

tech 14 | Objectives



General Objective

• The general objective of this Hybrid Professional Master's Degree is to update the nurse on the pathologies of the first trimester of pregnancy. In turn, it will delve into the most common endocrine conditions in pregnant women and how to manage and monitor them. In this way, they will broaden their skills and contribute to ensure a better prognosis for their patients based on the most modern technological resources and therapeutic procedures



666 One of the main objectives of this program is to update your skills in the management of pregnant women with gestational diabetes"



Specific Objectives

Module 1. 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 the management of gestations with sociodemographic risk, such as adolescent gestations, in order to be able to act with scientific rigor when faced with them

Module 2. Pregnant Woman with Pathology derived from the Digestive System

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

Module 3. 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
- Delve into perinatal hemolytic disease in an exhaustive way, which was a cause of death until a few years ago due to its lack of knowledge
- Discuss the main controversies of cardiac pathologies in pregnancy, as some of them may contraindicate pregnancy

Module 4. 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 trained 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
- Delve into dermatological pathology, which will allow the student to perform an adequate approach in the emergency and consultation units
- Analyze the autoimmune diseases that affect pregnancy, since many of them are an indication for 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

tech 16 | Objectives

Module 5. 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
- Delve into 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 the different urological and renal pathologies, which are very frequent during pregnancy, so much so that asymptomatic bacteriuria is screened and midwives must know how and when it should be performed
- To learn about the effects of tropical and subtropical diseases on the fetus and gestation in general, since this is a new topic that is under continuous study

Module 6. Pathology of Fetal Growth and Gestational Duration. Premature Labor and Multiple Gestation. Pulmonary and Neurological Maturity

- Describe the obstetric treatment of a fetus diagnosed with RIC or fetal macrosomia, as it concerns nurses throughout gestation, as well as during delivery and postpartum due to the special care required for the neonate
- Learn about the exhaustive management of preterm labor and prolonged gestation, as due to their incidence, nurses 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 7. 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
- Train on placental problems that may occur in any of the trimesters and about which patients will often refer their concerns to the obstetrical staff
- 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 8. Variations in Normal Delivery and the Onset of Labor. Mother Carrying Group B streptococci B

- Learn exhaustively the different ways of initiating labor, whether spontaneous, induced or by premature rupture of membranes, is essential in the midwife's work, since all pregnant women will go through this process
- Learning about births that are not euthanized is of utmost importance for the midwife to have the skills and knowledge to refer patients and advise obstetricians in an optimal way
- Instruct on the main protocols for pregnant women with group B streptococcus during the third trimester of pregnancy

Objectives | 17 tech

Module 9. 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 speed on the management of diabetes, since nurses 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 Anesthesia 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 10. Pathology of the Puerperium. Psychological Issues during the Postpartum Period. Cardiopulmonary Resuscitation in Pregnant Women and Neonates. Legal Termination of Pregnancy

- Learn about infectious pathology in the puerperium, since it is the midwives who receive the woman in puerperal 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 nurses 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 nurses 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

04 **Skills**

This Hybrid Professional Master's Degree in Pathologies of Pregnancy for Nursing facilitates an update through an innovative mode of study, consisting of two distinct stages. At the end of both phases, graduates will be ready to implement the latest clinical protocols and healthcare tools in their daily practice.

Skills | 19 tech

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You will master, thanks to TECH, the main protocols in relation to pregnant women carrying group B streptococcus"

tech 20 | Skills



General Skills

- 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



Enroll in this Hybrid Professional Master's Degree and get updated about placental problems that may occur in any of the trimesters and how to control them from the Nursing area"



Skills | 21 tech



Specific Skills

- Provide effective treatment for pregnant women in cases of neurological, autoimmune and cardiac pathologies
- Be familiar with and know how to act in the case of other diseases affecting gestation: respiratory, urological, tropical and subtropical
- Recognize and act on gestational pathologies that affect gestational duration and fetal maturation
- Learn about placental and umbilical cord pathology
- 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
- Be familiar with and know how to act in case of postpartum and breastfeeding complications
- Know about the legal framework for abortion

05 Course Management

The professors of this program have extensive experience in the management of Pregnancy Pathology from a Nursing perspective. Through their professional trajectory, they have achieved a sharp mastery of the most innovative technologies and procedures in this field. This faculty, in turn, has integrated a rigorous and demanding academic plan that includes all these new developments and offers physicians the opportunity to assimilate them quickly and flexibly with the help of cutting-edge teaching methods, implemented by TECH for this Hybrid Professional Master's Degree.

The teachers of this faculty remain active, assisting pregnant women from different Nursing units"

tech 24 | Course Management

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

- Vice-President of the Research Group on Infections during Pregnancy (GRIG), France
- Coordinator of the National Reference Center (CNR) for Maternal-Fetal Rubeolar 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

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

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

- 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

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

tech 28 | Course Management

Management



Ms. Hernando Orejudo, Isabel

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

Professors

Mr. Márquez Espinar, Gumersindo

- Midwives at Clinical Hospital San Carlos, Madrid
- Teacher at the Pontificia University of Salamanca
- Degree in Nursing
- Degree in Podiatry
- Master's Degree in Research in Care

Ms. De Miguel González, María José

- Nurse in the Obstetrics and gynaecology-Ophthalmology Unit at the San Carlos Clinical Hospital
- Nurse Assistant to at Clinical Hospital San Carlos
- Graduate Nurse from the University of Salamanca

Course Management | 29 tech



Ms. De la Torre Arandilla, Ana

- Midwives in the Obstetrics Service of the University Hospital Puerta de Hierro
- Midwife in Hospital in San Carlos Clinical Hospital
- Specialty in Gynecological from the Puerta de Hierro University Hospital
- CTO Academy Teacher
- 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

Ms. Hernández Lachehab, Sonia

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

TECH has chosen for this team of teachers the best nurses, with a high pedagogical capacity"

06 Educational Plan

For this Hybrid Professional Master's Degree, TECH has integrated an avant-garde syllabus that brings together the most innovative Nursing contents related to Pregnancy Pathologies. The program includes several academic modules where you will delve into strategies for managing the group B streptococcal carrier mother. The entire program will take place on a 100% online learning platform and will implement didactic resources such as infographics, interactive summaries and videos.

The first stage of this program relies on a 100% online and interactive learning platform, with no restrictive schedules or pre-established evaluation timelines"

tech 32 | Educational Plan

Module 1. Concept of risk gestation. First trimester bleeding. Congenital Fetal Defects. Prenatal Diagnosis

- 1.1. Addressing High-risk Pregnancies
 - 1.1.1. Socio-demographic Risk
 - 1.1.1.1. Adolescent Pregnancy. Special considerations
 - 1.1.1.2. Mother with Drug Dependency Problems
 - 1.1.1.2.1. Principles of Drug Induced Teratogenesis
 - 1.1.1.2.2. Alcohol
 - 1.1.1.2.3. Cocaine
 - 1.1.1.2.4. Heroin
 - 1.1.1.2.5. Other drugs: Marijuana, Cannabis
 - 1.1.2. Occupational Risk in Pregnancy. Ergonomics. Radiation Exposure
 - 1.1.3. Risks to Reproductive Health
 - 1.1.4. Current Gestational Risk
 - 1.1.5. Medical Risk
- 1.2. Miscarriage
 - 1.2.1. Definition and Epidemiology
 - 1.2.2. Main Causes of Miscarriage
 - 1.2.3. Clinical Forms of Abortion
 - 1.2.3.1. Threat of Abortion
 - 1.2.3.2. Abortion in Progress
 - 1.2.3.3. Complete Abortion
 - 1.2.3.4. Incomplete Abortion
 - 1.2.3.5. Deferred Abortion
 - 1.2.3.6. Repeated Abortions: Concept and Approach
 - 1.2.4. Diagnosis
 - 1.2.4.1. Medical History
 - 1.2.4.2. Physical Examination
 - 1.2.4.3. Ultrasound
 - 1.2.4.4. Determination of B-hCG
 - 1.2.5. Treatment of Spontaneous Abortion
 - 1.2.5.1. Medical Treatment
 - 1.2.5.2. Surgical Management

- 1.2.6. Complications
 - 1.2.6.1. Sepsis or Septic Abortion
 - 1.2.6.2. Hemorrhage and Disseminated Intravascular Coagulation (DIC)
- 1.2.7. Postabortion Care
- 1.3. Ectopic or Extrauterine Pregnancy
 - 1.3.1. Definition and Risk Factors
 - 1.3.2. Clinical Symptoms
 - 1.3.3. Clinical and Ultrasound Diagnosis
 - 1.3.4. Types of Extrauterine Gestation: Tubal, Ovarian, Abdominal, etc
 - 1.3.5. Therapeutic Management and Aftercare
- 1.4. Gestational Trophoblastic Disease
 - 1.4.1. Concept
 - 1.4.2. Clinical forms of Hydatidiform Mole 1.4.2.1. Partial Mole
 - 1.4.2.2. Complete Mole
 - 1.4.3. Clinical forms of Trophoblastic Neoplasia1.4.3.1. Invasive Mole and Placental Bed Tumor1.4.3.2. Choriocarcinoma
 - 1.4.4. Clinical and Ultrasound Diagnosis
 - 1.4.5. Treatment
 - 1.4.6. Aftercare and Complications
- 1.5. Congenital fetal defects due to genetic causes
 - 1.5.1. Types of Chromosome Abnormalities
 - 1.5.1.1. Aneuploidies
 - 1.5.1.2. Structural Abnormalities
 - 1.5.1.3. Sex-related Disorders
 - 1.5.2. Prenatal Diagnostic Techniques. Inclusion Criteria 1.5.2.1. Invasive Techniques
 - 1.5.2.2. Non-Invasive Techniques
 - 1.5.3. Genetic Counseling

Educational Plan | 33 tech

1.6. Congenital Fetal Defects Secondary to Infections: TORCH I 1.6.1. Toxoplasma 1.6.1.1. Etiologic Agent, Clinic and Epidemiology 1.6.1.2. Prevention 1.6.1.3. Diagnosis 1.6.1.4. Treatment 1.6.1.5. Congenital Toxoplasma Infection 1.6.2. Rubella 1.6.2.1. Etiologic Agent, Clinic and Epidemiology 1.6.2.2. Prevention and Vaccination 1.6.2.3. Diagnosis 1.6.2.4. Treatment 1.6.2.5. Congenital rubella infection Congenital Fetal Defects Secondary to Infections: TORCH II 1.7. 1.7.1. Cytomegalovirus 1.7.1.1. Etiologic Agent, Clinic and Epidemiology 1.7.1.2. Prevention 1.7.1.3. Diagnosis 1.7.1.4. Treatment 1.7.1.5. Congenital Cytomegalovirus Infection 1.7.2. Chickenpox 1.7.2.1. Etiologic Agent, Clinic and Epidemiology 1.7.2.2. Prevention and Vaccination 1.7.2.3. Diagnosis 1.7.2.4. Treatment 1.7.2.5. Congenital Chickenpox Infection 1.7.2.6. Maternal complications due to chickenpox Congenital Fetal Defects Secondary to Infections: Congenital fetal defects 1.8. secondary to infections: 1.8.1. Herpes Simplex Virus 1.8.1.1. Etiologic Agent, Clinic and Epidemiology 1.8.1.2. Prevention 1.8.1.3. Diagnosis 1.8.1.4. Treatment

1.8.1.5. Congenital Herpes Simplex Infection

- 1.8.2. Syphilis 1.8.2.1. Etiologic Agent, Clinic and Epidemiology 1.8.2.2. Prevention 1.8.2.3. Diagnosis 1.8.2.4. Treatment 1.8.2.5. Congenital syphilis Other Infections that cause Fetal Problems 19 1.9.1. Parvovirus B19 1.9.1.1. Etiologic Agent, Clinic and Epidemiology 1.9.1.2. Prevention 1.9.1.3. Diagnosis 1.9.1.4. Treatment 1.9.1.5. Congenital parvovirus Infection 192 Listeria 1.9.2.1. Etiologic Agent, Clinic and Epidemiology 1.9.2.2. Prevention and Vaccination 1.9.2.3. Diagnosis 1.9.2.4. Treatment 1.9.2.5. Congenital Listeria Infection 1.10. HIV and Gestation 1.10.1. Epidemiology 1.10.2. Gestational Screening and Diagnosis 1.10.3. Clinical Management and Treatment 1.10.4. Delivery of an HIV-positive Woman
 - 1.10.5. Neonatal Care and Vertical Infection

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Module 2. Pregnant Woman with Pathology derived from the Digestive System

- 2.1. Neurovegetative Disorders:
 - 2.1.1. Appetite Disorders
 - 2.1.2. Sialorrhea
 - 2.1.3. Nausea and Vomiting
- 2.2. Hyperemesis Gravidarum:
 - 2.2.1. Concept
 - 2.2.2. Etiopathogenesis
 - 2.2.3. Clinical Manifestations
 - 2.2.4. Diagnosis
 - 2.2.5. Treatment and Care
- 2.3. Mouth Disorders
 - 2.3.1. Cavities During Pregnancy
 - 2.3.2. Epulis Gravidarum
 - 2.3.3. Gingivitis
 - 2.3.4. Perimylolysis
 - 2.3.5. Xerostomia
- 2.4. Pyrosis and Peptic Ulcers in Pregnant Women
 - 2.4.1. Concept
 - 2.4.2. Effect of Pregnancy on Heartburn and Peptic Ulcers
 - 2.4.3. Treatment and Hygienic Precautions
- 2.5. Constipation in Pregnancy
 - 2.5.1. Definition: ROMA criteria
 - 2.5.2. Etiology
 - 2.5.3. Diagnosis
 - 2.5.4. Treatment
 - 2.5.4.1. Non-Pharmacological Treatment
 - 2.5.4.2. Medical treatment
- 2.6. Inflammatory Bowel Disease
 - 2.6.1. Crohn's Disease
 - 2.6.1.1. Preconception Counseling
 - 2.6.1.2. Impact of Gestation on the Disease
 - 2.6.1.3. Diagnosis during Pregnancy
 - 2.6.1.4. Treatment

- 2.6.2. Ulcerative Colitis
 - 2.6.2.1. Preconception Counseling
 - 2.6.2.2. Impact of Gestation on the Disease
 - 2.6.2.3. Diagnosis during Pregnancy
 - 2.6.2.4. Treatment
- 2.7. Appendicitis and Intestinal Obstruction
 - 2.7.1. Acute Appendicitis
 - 2.7.1.1. Concept
 - 2.7.1.2. Special Diagnostic Considerations in Pregnancy
 - 2.7.1.3. Treatment
 - 2.7.2. Intestinal Obstruction
 - 2.7.2.1. Concept
 - 2.7.2.2. Special Diagnostic Considerations in Pregnancy
 - 2.7.2.3. Treatment
- 2.8. Gallbladder Pathologies
 - 2.8.1. Cholecystitis2.8.1.1. Special Considerations and Management in Gestation
 - 2.8.2. Colelitiasis2.8.2.1. Special Considerations and Management in Gestation
 - 2.8.3. Fatty Liver or Acute Hepatic Degeneration:
 - 2.8.3.1. Definition and Aetiology
 - 2.8.3.2. Clinical Symptoms
 - 2.8.3.3. Diagnosis
 - 2.8.3.4. Treatment
- 2.9. Intrahepatic Cholestasis of Pregnancy
 - 2.9.1. Concept
 - 2.9.2. Clinical Symptoms
 - 2.9.3. Diagnosis
 - 2.9.4. Treatment
 - 2.9.5. Fetal Impact and Prognosis

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2.10. Chronic viral hepatitis and Gestation

2.10.1. Hepatitis B

- 2.10.1.1. Epidemiology
- 2.10.1.2. Diagnosis and Screening
- 2.10.1.3. Clinical Management
- 2.10.1.4. Delivery of an HIV-positive Woman
- 2.10.1.5. Neonatal Care and Vertical Infection
- 2.10.2. Hepatitis C:
 - 2.10.2.1. Epidemiology
 - 2.10.2.2. Diagnosis and Screening
 - 2.10.2.3. Clinical Management
 - 2.10.2.4. Delivery of an HIV-positive Woman
 - 2.10.2.5. Neonatal Care and Vertical Infection

2.11. Pancreas

- 2.11.1. Acute Pancreatitis in Pregnancy
 - 2.11.1.1. Definition and Risk Factors
 - 2.11.1.2. Clinical Symptoms
 - 2.11.1.3. Treatment

Module 3. Pregnant with Hematological and Cardiac Problems

- 3.1. Gestational Anemia
 - 3.1.1. Concept
 - 3.1.2. Etiopathogenesis and the Effect on the Fetus
 - 3.1.3. Types of Anemias
 - 3.1.3.1. Microcytic Anemia
 - 3.1.3.2. Normocytic Anemia
 - 3.1.3.3. Macrocytic Anemia
 - 3.1.4. Treatment and Prophylaxis
 - 3.1.5. Other Forms of Anemia
 - 3.1.5.1. Faciform or Sickle Cell Anemia
 - 3.1.5.2. Thalassemia

- 3.2. Thrombocytopenia
 - 3.2.1. Essential Trombopenia in Pegnancy 3.2.1.1. Causes and Incidence
 - 3.2.1.2. Diagnosis
 - 3.2.1.3. Obstetric Behavior
 - 3.2.2. Idiopathic Thrombocytopenic Purpura3.2.2.1. Causes and Incidence3.2.2.2. Diagnosis
 - 3.Z.Z.Z. Diagnosis
 - 3.2.2.3. Obstetric Behavior
 - 3.2.3. Alloimmune Neonatal Thrombopenia 3.2.3.1. Causes and Incidence
 - 3.2.3.2. Diagnosis
 - 3.2.3.3. Obstetric Behavior
 - 3.2.4. Thrombopenia Associated with Hypertensive States of Pregnancy
 - 3.2.5. Therapeutic Management of Thrombopenias in Pregnancy
 - 3.2.6. Therapeutic Management of the Newborn of a Mother with Thrombopenia
- 3.3. Coagulation Problems
 - 3.3.1. Von Willebrand Disease
 - 3.3.1.1. Definition and Epidemiology 3.3.1.2. Considerations in Childbirth
 - 3.3.2. Hemophilia
 - 3.3.2.1. Definition and Epidemiology
 - 3.3.2.2. Types
 - 3.3.2.2.1. Hemophilia A
 - 3.3.2.2.2. Hemophilia B
 - 3.3.2.3. Chromosomal Inheritance Patterns of Hemophilia
 - 3.3.2.4. Considerations in Childbirth
- 3.4. Varicose Syndrome
 - 3.4.1. Definition and Pathophysiology
 - 3.4.2. Clinical Symptoms
 - 3.4.3. Diagnosis
 - 3.4.4. Hemorrhoids
 - 3.4.5. Vulvar Varicose Veins

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- 3.5. Perinatal Hemolytic Disease
 - 3.5.1. Concept
 - 3.5.2. Pathophysiology
 - 3.5.3. Rh Isoimmunization
 - 3.5.4. ABO Isoimmunization
- 3.6. Thromboembolic Disease in Pregnancy and Puerperium: Deep vein Thrombosis and Pulmonary Thromboembolism
 - 3.6.1. Aetiopathogenesis and Risk Factors
 - 3.6.2. Treatment
- 3.7. Gestational Heart Disease. Cardiac Exploration in Pregnancy
 - 3.7.1. Cardiac Modification in Pregnancy
 - 3.7.2. Epidemiology of Cardiac Pathology in Pregnancy
 - 3.7.3. Risk Classification of Gestational Heart Disease
 - 3.7.4. Preconception Counseling for Pregnant Women with Heart Disease
 - 3.7.5. Situations that Hinder Gestation
 - 3.7.6. Management and Choice of Delivery Method
- 3.8. Pregnant Women with Valvular Heart Disease
 - 3.8.1. Mitral Senosis
 - 3.8.2. Aortic Stenosis
 - 3.8.3. Mitral Insufficiency
 - 3.8.4. Aortic Insufficiency
 - 3.8.5. Tricuspid Regurgitation
 - 3.8.6. Valve Prosthesis
- 3.9. Arrhythmias in Pregnancy
 - 3.9.1. Paroxysmal Supraventricular Tachycardia
 - 3.9.2. Atrial Fibrillation
 - 3.9.3. Ventricular Arrhythmias
 - 3.9.4. Bradyarrhythmias
- 3.10. Pregnant Women with Congenital Cardiac Pathology
 - 3.10.1. Tetralogy of Fallot
 - 3.10.2. Coarctation of Aorta
 - 3.10.3. Marfan Syndrome
 - 3.10.4. Single Ventricle
 - 3.10.5. Fontan
 - 3.10.6. Pregnant Women with Cardiac Transplants

Module 4. Pregnant with neurological, musculoskeletal, dermatological and autoimmune problems

- 4.1. Epilepsy
 - 4.1.1. Management and Treatment Compatible with Gestation: Preconception Counseling
 - 4.1.2. Effects of Epilepsy on Pregnancy
 - 4.1.3. Effects of Pregnancy on Epilepsy
 - 4.1.4. Crisis Management during Childbirth
 - 4.1.5. Newborns of Epileptic Mothers: Malformations and Congenital Anomalies
- 4.2. Multiple Sclerosis (MS)
 - 4.2.1. Effects of MS on Pregnancy
 - 4.2.2. Effects of Pregnancy on MS
 - 4.2.3. Clinical Management during Gestation and Pharmacotherapy
 - 4.2.4. Clinical Management during Labor
 - 4.2.5. The Postpartum Period in Women with Multiple Sclerosis
- 4.3. Peripheral Neuropathies
 - 4.3.1. Carpal Tunnel Syndrome
 - 4.3.2. Radiculopathies: Lumbalgias and Sciatalgias
 - 4.3.3. Herniated Disc
 - 4.3.4. Bell's Palsy
 - 4.3.5. Meralgia Paresthetica
 - 4.3.6. Cyphoscoliosis
- 4.4. Spinal Cord Injuries
 - 4.4.1. Clinical Management of Women with a Spinal Cord Injury during Pregnancy
 - 4.4.2. Clinical Management during Labor. Epidural Analgesia
 - 4.4.3. Specific Considerations during the Postpartum Period
- 4.5. Other Neurological Pathologies present during Gestation
 - 4.5.1. Migraine and headaches
 - 4.5.2. Guillén-Barré syndrome
 - 4.5.3. Myasthenia Gravis
 - 4.5.4. Cerebrovascular Diseases
 - 4.5.5. Brain Neoplasms

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- 4.6. Dermatological Problems during Pregnancy
 - 4.6.1. Dermatological Changes during Pregnancy
 - 4.6.1.1. Stretch Marks
 - 4.6.1.2. Hyperpigmentation of Pregnancy: Melasma Gravidarum and Nevus
 - 4.6.2. Vascular Changes
 - 4.6.2.1. Spider Veins
 - 4.6.2.2. Palmar Erythema
 - 4.6.2.3. Haemangiomas
- 4.7. Specific Dermatopathologies of Pregnancy
 - 4.7.1. Herpes Gestationis
 - 4.7.1.1. Clinical Symptoms
 - 4.7.1.2. Diagnosis
 - 4.7.1.3. Differential Diagnosis
 - 4.7.1.4. Prognosis
 - 4.7.1.5. Treatment
 - 4.7.2. Impetigo Herpetiformis
 - 4.7.2.1. Clinical Symptoms
 - 4.7.2.2. Diagnosis
 - 4.7.2.3. Differential Diagnosis
 - 4.7.2.4. Prognosis
 - 4.7.2.5. Treatment
 - 4.7.3. Gestational Prurigo
 - 4.7.3.1. Clinical Symptoms
 - 4.7.3.2. Diagnosis
 - 4.7.3.3. Differential Diagnosis
 - 4.7.3.4. Prognosis
 - 4.7.3.5. Treatment
 - 4.7.4. Papular Dermatosis of Pregnancy
 - 4.7.4.1. Clinical Symptoms
 - 4.7.4.2. Diagnosis
 - 4.7.4.3. Differential Diagnosis
 - 4.7.4.4. Prognosis
 - 4.7.4.5. Treatment

- 4.7.5. Polymorphous Rash in Pregnancy
 - 4.7.5.1. Clinical Symptoms
 - 4.7.5.2. Diagnosis
 - 4.7.5.3. Differential Diagnosis
 - 4.7.5.4. Prognosis
 - 4.7.5.5. Treatment
- 4.8. Systemic Lupus Erythematosus and Pregnancy
 - 4.8.1. Preconception Check-up
 - 4.8.2. Check-ups during Gestation
 - 4.8.2.1. First Trimester
 - 4.8.2.2. Second Trimester
 - 4.8.2.3. Third Trimester
 - 4.8.3. Childbirth and Postpartum
- 4.9. (Antiphospholipid Syndrome APS)
 - 4.9.1. Concept
 - 4.9.2. Pregestational Monitoring of Women with APS
 - 4.9.3. Pregestational Monitoring of Women with APS
 - 4.9.4. Treatment
 - 4.9.5. Childbirth and Postpartum
- 4.10. Rheumatoid Arthritis
 - 4.10.1. Concept
 - 4.10.2. How Rheumatoid Arthritis affects Gestation
 - 4.10.3. How Gestation affects Rheumatoid Arthritis
 - 4.10.4. Treatment

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Module 5. Pregnant with Respiratory and Urological/Renal Problems. Tropical and Subtropical Diseases

- 5.1. Bronquial Asthma
 - 5.1.1. Concept
 - 5.1.2. Bronchial Asthma during Gestation
 - 5.1.3. Treatment
 - 5.1.4. Asthmatic Crisis and Clinical Management
 - 5.1.5. Observations in the delivery of a pregnant woman with bronchial asthma
- 5.2. Community-acquired Pneumonia and Aspiration Pneumonia
 - 5.2.1. Etiology
 - 5.2.2. Treatment
 - 5.2.3. Specific Factors during Gestation
 - 5.2.4. Newborn from a Mother with Pneumonia
- 5.3. Influenza
 - 5.3.1. Etiology
 - 5.3.2. Prevention
 - 5.3.3. Pregnancy Issues
 - 5.3.4. Treatment
 - 5.3.5. Criteria for Hospitalization
 - 5.3.6. Newborn from a Mother with Influenza
- 5.4. Asymptomatic Bacteriuria
 - 5.4.1. Concept
 - 5.4.2. Etiology
 - 5.4.3. Diagnostic Criteria
 - 5.4.4. Treatment
- 5.5. Acute Cystitis and Urethral Syndrome
 - 5.5.1. Concept
 - 5.5.2. Etiology
 - 5.5.3. Diagnostic Criteria
 - 5.5.4. Treatment
 - 5.5.5. Monitoring

- 5.6. Acute Pyelonephritis
 - 5.6.1. Concept
 - 5.6.2. Clinical Symptoms
 - 5.6.3. Diagnosis
 - 5.6.4. Treatment
 - 5.6.5. Admission and Discharge Criteria
 - 5.6.6. Complications
- 5.7. Obstructive Uropathy
 - 5.7.1. Concept
 - 5.7.2. Clinical Symptoms
 - 5.7.3. Exploration and Specialized Tests
 - 5.7.4. Diagnosis
 - 5.7.5. Treatment
 - 5.7.6. Complications
- 5.8. Renal Transplantation and Gestation
 - 5.8.1. Effects of Transplantation on Pregnancy
 - 5.8.2. Effects of Pregnancy on Transplants
 - 5.8.2. Considerations during Labor, Postpartum and Lactation
- 5.9. Tropical and Subtropical Diseases I
 - 5.9.1. Zika
 - 5.9.1.1. Epidemiology
 - 5.9.1.2. Transmission
 - 5.9.1.3. Clinical Symptoms
 - 5.9.1.4. Diagnosis
 - 5.9.1.5. Effects on the Fetus and Congenital Zika Infection
 - 5.9.1.6. Treatment and Prevention
 - 5.9.2. Ebola
 - 5.9.2.1. Epidemiology
 - 5.9.2.2. Transmission
 - 5.9.2.3. Clinical Symptoms
 - 5.9.2.4. Diagnosis
 - 5.9.2.5. Effects on the Fetus
 - 5.9.2.6. Treatment and Prevention

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5.9.	3. Chagas Disease	Module 6. Pathology of Fetal Growth and Gestational Duration. Prema
	5.9.3.1. Epidemiology	Labor and Multiple Gestation. Pulmonary and Neurological Maturity
	5.9.3.2. Transmission	6.1. Intrauterine Growth Restriction (IGR)
	5.9.3.3. Clinical Symptoms	6.1.1. Concept
	5.9.3.4. Diagnosis	
	5.9.3.5. Effects on the Fetus	
	5.9.3.6. Treatment and Prevention	6.1.3. Prediction 6.1.4. Diagnosis and Classification
Trop	pical and Subtropical DiseasesII	
5.10	D.1. Dengue	
	5.10.1.1. Epidemiology	6.1.6. Treatment and Completion of the Gestation 6.2. Fetal Macrosomia
	5.10.1.2. Transmission	
	5.10.1.3. Clinical Symptoms	6.2.1. Concept
	5.10.1.4. Diagnosis	6.2.2. Risk Factors
	5.10.1.5. Effects on the Fetus	6.2.3. Obstetric Follow-up and Control
	5.10.1.6. Treatment and Prevention	6.2.4. Completion of Gestation
5.10	D.2. Malaria	6.2.5. Maternal and Fetal Complications
	5.10.2.1. Epidemiology	6.3. Chronologically Prolonged Gestation
	5.10.2.2. Transmission	6.3.1. Concept
	5.10.2.3. Clinical Symptoms	6.3.2. Etiology and Prevention
	5.10.2.4. Diagnosis	6.3.3. Fetal Complications
	5.10.2.5. Effects on the Fetus	6.3.4. Obstetric Behavior
	5.10.2.6. Treatment and Prevention	6.3.5. Induction in Week 41 Vs. Week 42
5.10	D.3. Chikungunya	6.4. Premature birth
	5.10.3.1. Epidemiology	6.4.1. Threat of Premature Delivery
	5.10.3.2. Transmission	6.4.1.1. Definition and Risk Factors
	5.10.3.3. Clinical Symptoms	6.4.1.2. Diagnosis: Ultrasound and Fibronectin test
	5.10.3.4. Diagnosis	6.4.1.3. Obstetric management and tocolytic treatment
	5.10.3.5. Effects on the Fetus	6.4.2. Delivery Method in Premature Fetus and Specific Considerations
	5.10.3.6. Treatment and Prevention	6.5. Cervical Incompetence and Cerclage
	6. ro.o.o. Heatment and rickention	6.5.1. Definition of Cervical Incompetence
		6.5.2. Signs of Cervical Cerclage
		6.5.3. Cerclage Techniques
		6 E.A. Dre and Deat aprelana Canaidarations

5.10.

- 6.5.4. Pre- and Post-cerclage Considerations
- 6.5.5. Complications
- 6.5.6. Cerclage Removal

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- 6.6. Suspected Chorioamnionitis and Clinical Chorioamnionitis
 - 6.6.1. Definition of Chorioamnionitis
 - 6.6.2. Criteria for Suspecting Chorioamnionitis
 - 6.6.3. Diagnosis
 - 6.6.4. Treatment
 - 6.6.5. Specific Considerations in Childbirth
- 6.7. Multiple Gestation
 - 6.7.1. Concept and Classification
 - 6.7.2. Fetal and Maternal Complications
 - 6.7.3. Diagnosis and Determination of Chorionicity
 - 6.7.4. Prenatal Diagnosis and Screening of Chromosomopathies
 - 6.7.5. Gestational Screening
 - 6.7.6. End of Gestation and Delivery Route
- 6.8. Feto-Fetal Transfusion Syndrome
 - 6.8.1. Definition and Pathophysiology
 - 6.8.2. Diagnostic Criteria
 - 6.8.3. Differential Diagnosis
 - 6.8.4. Treatment
 - 6.8.4.1. Technique of Laser Photocoagulation of Vascular Communications
 - 6.8.4.2. Subsequent monitoring
- 6.9. Corticosteroid Therapy to Accelerate Fetal Lung Maturation
 - 6.9.1. Concept
 - 6.9.2. Indications
 - 6.9.3. Contraindications
 - 6.9.4. Dosages
 - 6.9.5. Specific Factors according to Gestational Age
 - 6.9.6. Special Situations
- 6.10. Magnesium Sulfate as a Fetal Neuroprotector
 - 6.10.1. Concept
 - 6.10.2. Indications
 - 6.10.3. Contraindications
 - 6.10.4. Drug Administration and Monitoring
 - 6.10.5. Concomitant use of Tocolytics in suspected Preterm Labor
 - 6.10.6. Side Effects

Module 7. Pathology of the Placenta and Fetal Appendages. Obstetric Accidents

- 7.1. Placenta Accrete
 - 7.1.1. Definition and Forms of Placenta Accrete
 - 7.1.1.1. Placenta Accreta
 - 7.1.1.2. Placenta Increta
 - 7.1.1.3. Placenta Percreta
 - 7.1.2. Risk Factors
 - 7.1.3. Morbimortality
 - 7.1.4. Diagnosis
 - 7.1.5. Clinical Management and Delivery of Pregnant Women with Placental Accreta
- 7.2. Placenta Previa
 - 7.2.1. Concept
 - 7.2.2. Classification
 - 7.2.3. Risk Factors
 - 7.2.4. Morbimortality
 - 7.2.5. Diagnosis
 - 7.2.6. Management of gestation and delivery of the pregnant woman with placenta previa
- 7.3. Placental Morphological and Functional Abnormalities
 - 7.3.1. Size Alterations
 - 7.3.2. Morphological Changes
 - 7.3.2.1. Bilobed Placenta
 - 7.3.2.2. Circumvallate Placenta
 - 7.3.2.3. Placenta Succenturiata
 - 7.3.2.4. Espuria
 - 7.3.3. Placental Insufficiency
- 7.4. Umbilical Cord Anomalies
 - 7.4.1. Variants of Umbilical Cord Length and its Complications: Knots
 - 7.4.2. Umbilical Cord Anomalies in relation to Appearance
 - 7.4.2.1. Procubitus
 - 7.4.2.2. Laterocidence
 - 7.4.2.3. Prolapses
 - 7.4.2.3.1. Causes
 - 7.4.2.3.2. Action to be taken in case of Cord Prolapse

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7.4.3. Placental Insertion Abnormalities

- 7.4.3.1. Velamentous Insertion
- 7.4.3.2. Marginal Insertion
- 7.4.3.3. Previous Vasa
- 7.4.4. Vascular Anomalies
 - 7.4.4.1. Thrombosis
 - 7.4.4.2. Hematomas
 - 7.4.4.3. The Single Umbilical Artery
- 7.5. Alterations of the Amniotic Membranes
 - 7.5.1. Amnion Nodosum
 - 7.5.2. Amniotic Bands
 - 7.5.3. Extramembranous Pregnancy
 - 7.5.4. Premature rupture of membranes and chorioamnionitis
- 7.6. Abnormalities of amniotic fluid
 - 7.6.1. Default: Oligohydramnios and Anhydramnios
 - 7.6.1.1. Concept and Epidemiology
 - 7.6.1.2. Etiological Factors
 - 7.6.1.3. Diagnosis
 - 7.6.1.4. Effects on the Fetus and Neonate
 - 7.6.1.5. Clinical Management and Treatment
 - 7.6.2. In Excess: Polyhydramnios
 - 7.6.2.1. Concept and Epidemiology
 - 7.6.2.2. Etiological Factors
 - 7.6.2.3. Diagnosis
 - 7.6.2.4. Effects on the Fetus and Neonate
 - 7.6.2.5. Clinical Management and Treatment. Delivery Assistance
- 7.7. Uterine Rupture
 - 7.7.1. Concept
 - 7.7.2. Types
 - 7.7.3. Risk Factors
 - 7.7.4. Clinical Diagnosis
 - 7.7.5. Treatment

- 7.8. Premature Detachment of a Normally Positioned Placenta
 - 7.8.1. Concept
 - 7.8.2. Risk Factors
 - 7.8.3. Clinical Diagnosis
 - 7.8.4. Clinical Management
- 7.9. Amniotic Fluid Embolism
 - 7.9.1. Concept
 - 7.9.2. Risk Factors
 - 7.9.3. Pathophysiology
 - 7.9.4. Clinical Symptoms
 - 7.9.5. Diagnosis and Treatment
- 7.10. Shoulder Dystocia
 - 7.10.1. Concept
 - 7.10.2. Risk Factors
 - 7.10.3. Diagnosis
 - 7.10.4. Delivery Method case of Placental Abruption
 - 7.10.4.1. Primary Level Techniques
 - 7.10.4.2. Secondary Level Techniques
 - 7.10.4.3. Tertiary Level Techniques
 - 7.10.5. Postnatal Care and Assessment

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Module 8. Variations in Normal Delivery and the Onset of Labor. Mother Carrying Group B streptococci B

- 8.1. Instrumental Delivery
 - 8.1.1. Concept
 - 8.1.2. Indications
 - 8.1.3. Contraindications
 - 8.1.4. Criteria for using the Different Instruments
 - 8.1.4.1. Forceps
 - 8.1.4.2. Thierry Spatulas
 - 8.1.4.3. Cupping
- 8.2. Breech Delivery
 - 8.2.1. Concept
 - 8.2.2. Classification
 - 8.2.3. Etiology
 - 8.2.4. Diagnosis
 - 8.2.5. Vaginal Delivery Criteria and Management
- 8.3. Vaginal Delivery after Cesarean Section
 - 8.3.1. Choice of Delivery Route
 - 8.3.2. Contraindications for Vaginal Delivery with Previous Cesarean Section
 - 8.3.3. Planned Cesarean
 - 8.3.4. Labor Induction
- 8.4. Cervical Ripening and Induction of Labor
 - 8.4.1. Concept
 - 8.4.2. Indications
 - 8.4.3. Contraindications
 - 8.4.4. Risks from Induction
 - 8.4.5. Methods to Labor
- 8.5. Fetal Hydrops
 - 8.5.1. Concept
 - 8.5.1.1. Immune Hydrops
 - 8.5.1.2. Non-Immune Hydrops
 - 8.5.2. Pathophysiology
 - 8.5.3. Diagnosis
 - 8.5.4. Clinical Management

- 8.6. Mother Carrying Group B Streptococcus B(SGB)
 - 8.6.1. Concept
 - 8.6.2. Sample Collecting and Screening
 - 8.6.3. Treatment
 - 8.6.4. Management of Newborns of Mothers who are Carriers of GBS
- 8.7. Cesarean Section
 - 8.7.1. Indications
 - 8.7.2. Classification
 - 8.7.3. Cesarean Section Considerations
 - 8.7.4. Surgical Technique
 - 8.7.5. Post-Operative Care
- 8.8. External Cephalic Version
 - 8.8.1. Concept
 - 8.8.2. Indications
 - 8.8.3. Contraindications
 - 8.8.4. Complete Technique and Procedure
 - 8.8.5. Complications 8.8.5.1. Pharmacological Methods

 - 8.8.5.2. Non-Pharmacological Methods
- 8.9. Premature Rupture of Membranes
 - 8.9.1. Etiology
 - 8.9.2. Diagnosis
 - 8.9.3. Preterm Premature Rupture of Membranes
 - 8.9.4. Full-term Premature Rupture of Membranes
- 8.10. Obstetric Anal Sphincter Injuries
 - 8.10.1. Prevention
 - 8.10.2. Classification
 - 8.10.2.1. Third Degree Tear
 - 8.10.2.2. Fourth Degree Tear
 - 8.10.3. Reparation of Perineal Tears
 - 8.10.4. Follow-up and Delivery after Anal Sphincter Injury

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Module 9. Endocrine Problems during Pregnancy. Gynecologic Cancer and Pregnancy. Hypertensive States of Pregnancy

- 9.1. Thyroid Pathology and Gestation
 - 9.1.1. Hypothyroidism
 - 9.1.1.1. Diagnosis
 - 9.1.1.2. Clinical Symptoms
 - 9.1.1.3. Etiology
 - 9.1.1.4. Clinical Management
 - 9.1.2. Hyperthyroidism and Thyrotoxicosis
 - 9.1.2.1. Diagnosis
 - 9.1.2.2. Clinical Symptoms
 - 9.1.2.3. Etiology
 - 9.1.2.4. Clinical Management
 - 9.1.3. Treatment during Gestation
 - 9.1.4. Effects on the Fetus
- 9.2. Diabetes Mellitus and Pregnancy
 - 9.2.1. Pre-gestational Management
 - 9.2.2. Gestational Screening
 - 9.2.3. Criteria for the Termination of Pregnancy
 - 9.2.4. Considerations during childbirth
 - 9.2.5. Newborn from a Mother with Diabetes Mellitus
- 9.3. Gestational Diabetes
 - 9.3.1. Concept
 - 9.3.2. Risk Factors
 - 9.3.3. Diagnosis and Screening Protocol
 - 9.3.4. Gestational Screening
 - 9.3.5. Criteria for the Termination of Pregnancy
 - 9.3.6. Clinical Management during Labor and Post-partum
 - 9.3.7. Newborn from a Mother with Gestational Diabetes
- 9.4. Obesity and Pregnancy
 - 9.4.1. Definition and Classification of Obesity
 - 9.4.2. Impact of Obesity on Gestation
 - 9.4.3. Impact of gestation on obesity
 - 9.4.4. Obese Women and the Postpartum Period

- 9.5. Breast Cancer and Pregnancy
 - 9.5.1. Concept and Epidemiology
 - 9.5.2. Diagnosis
 - 9.5.3. Treatment
 - 9.5.4. Prognosis
- 9.6. Cervical Cancer and Pregnancy
 - 9.6.1. Concept and Epidemiology
 - 9.6.2. Cytology in Gestation
 - 9.6.3. Colposcopy in Gestation
 - 9.6.4. Diagnosis and Treatment
- 9.7. Ovarian Cancer and Pregnancy
 - 9.7.1. Concept and Epidemiology
 - 9.7.2. Clinical Symptoms
 - 9.7.3. Diagnosis
 - 9.7.4. Treatment
- 9.8. Hypertensive States of Pregnancy I
 - 9.8.1. Concept
 - 9.8.2. Classification of Hypertension in Pregnancy
 - 9.8.3. Determination of the Degree of Severity
 - 9.8.4. Prediction and Prevention
 - 9.8.5. Treatment and Clinical Management
 - 9.8.6. Criteria for the Termination of Pregnancy
- 9.9. Hypertensive states of Pregnancy II
 - 9.9.1. Eclampsia
 - 9.9.1.1. Diagnosis
 - 9.9.1.2. Clinical Management and Treatment
 - 9.9.2. Hellp's Syndrome
 - 9.9.2.1. Diagnosis
 - 9.9.2.2. Clinical Management and Treatment
 - 9.9.3. Subsequent Follow-up of Pregnant Women with Hypertension Problems
- 9.10. Antepartum Fetal Death
 - 9.10.1. Concept
 - 9.10.2. Classification
 - 9.10.3. Etiological Factors
 - 9.10.4. Diagnosis
 - 9.10.5. Clinical and Psychological Management
 - 9.10.6. Follow-up Genetic Counseling

tech 44 | Educational Plan

Module 10. Pathology of the Puerperium. Psychological Issues during the Postpartum Period. Cardiopulmonary Resuscitation in Pregnant Women and Neonates. Legal Termination of Pregnancy

10.1. Postpartum Infection

10.1.1. Concept and Etiology

10.1.2. Risk Factors

10.1.3. Forms of Propagation

10.1.4. Clinical Forms

10.1.5. Clinical Symptoms

10.1.6. Treatment and Prophylaxis

10.2. Postpartum Hemorrhage

10.2.1. Concept

10.2.2. Etiology

10.2.2.1. Uterine Tone 10.2.2.2. Obstetric Trauma and Uterine Inversion

10.2.2.3. Fabric

10.2.2.4. Coagulation Problems

10.2.3. Treatment

10.3. Main problems in breastfeeding I

10.3.1. Cracked Nipples

10.3.2. Mammary Ingurgitation and Obstruction

10.3.3. Eczema and Candidiasis of the Nipple

10.3.4. Hypogalactia

10.4. Main problems in breastfeeding II

10.4.1. Acute Mastitis

10.4.1.1. Definition, Etiology and Clinical Manifestations

10.4.1.2. Prevention

10.4.1.3. Treatment

10.4.1.4. Complications

10.5. Psychological Issues during the Postpartum Period

10.5.1. Maternity Blues or Postpartum Depression

10.5.2. Postpartum Depression

10.5.2.1. Concept

10.5.2.2. Risk Factors

10.5.2.3. Prevention

10.5.2.4. Treatment



Educational Plan | 45 tech

- 10.5.3. Puerperal Psychosis
 - 10.5.3.1. Concept
 - 10.5.3.2. Risk Factors
 - 10.5.3.3. Prevention
 - 10.5.3.4. Treatment
- 10.6. Perinatal Bereavement
 - 10.6.1. Concept
 - 10.6.2. Clinical Manifestations
 - 10.6.3. Types of Grief
 - 10.6.4. Phases of Perinatal Bereavement
 - 10.6.5. Psychological Handling
- 10.7. Postdural Puncture Headache
 - 10.7.1. Concept
 - 10.7.2. Differential Diagnosis
 - 10.7.3. Treatment and Prophylaxis
 - 10.7.4. Complications
- 10.8. Cardiopulmonary Resuscitation in Pregnant Women
 - 10.8.1. Main Causes of Cardio-Respiratory Arrest in Pregnant Women
 - 10.8.2. Algorithm for Cardiopulmonary Resuscitation
 - 10.8.3. Pregnancy-specific Considerations
 - 10.8.4. Fetal Extraction
- 10.9. Neonatal Cardiopulmonary Resuscitation
 - 10.9.1. Main Causes of Cardio-Respiratory Cardiorespiratory in Neonates
 - 10.9.2. Algorithm for Cardiopulmonary Resuscitation
 - 10.9.3. Neuroprotection and Hypothermia in Infants
 - 10.9.3.1. Definition and Mechanism of Action of Hypothermia
 - 10.9.3.2. Inclusion and Exclusion Criteria
 - 10.9.3.3. Treatment Phases and Cooling

10.9.3.4. Limitation of Therapeutic Exercise in Newborns with Hypoxic-Ischemic Encephalopathy

- 10.10. Legal Termination of Pregnancy
 - 10.10.1. Concept
 - 10.10.2. Legislative Framework
 - 10.10.3. Methods Dependent on the Number of Weeks of Gestation 10.10.4. Feticide

07 Clinical Internship

At the end of the first stage of this Hybrid Professional Master's Degree, TECH will provide the nurse with a rigorous practice. This stay, in a prestigious hospital institution, has a face-to-face and immersive design focused on the development of the most requested skills for the management of Pregnancy Pathologies.

You will apply, in a direct way and in real cases, the Nursing therapeutic procedures to relieve perineal pain after childbirth through Kegel exercises"

tech 48 | Clinical Internship

The clinical practicum of this program devotes 3 weeks of intensive and immersive learning to training the nurse in the latest innovations in Pregnancy Pathology care. The academic modality is distributed in consecutive 8-hour days, from Monday to Friday, in a renowned hospital entity. In this facility, the professional will handle the latest technological devices and apply state-of-the-art procedures for monitoring and examining pregnant women with different conditions.

At the same time, you will get to work closely with experts with extensive professional experience. Their advice will enable you to assimilate new experiences quickly and in line with the latest scientific evidence. In addition, an assistant tutor will monitor all progress closely, providing personalized guidance at all times to help the graduate become involved in the different dynamics of the center where this training takes place.

The practical part will be carried out with the active participation of the student performing the activities and procedures of each area of competence (learning to learn and learning to do), with the accompaniment and guidance of the professors and other fellow trainees that facilitate teamwork and multidisciplinary integration as transversal competencies for Nursing praxis (learning to be and learning to relate).



Clinical Internship | 49 tech

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

Module	Practical Activity
	Perform fetal ultrasounds, as indicated by the physician, using state-of-the-art ultrasound equipment that facilitates the detection of anomalies
Fetal Birth Defects	Extract a small amount of amniotic fluid from the uterus to send to the laboratory for amniocentesis
Assessment by Nurses	Collecting and properly archiving the results of diagnostic tests such as Amniocentesis or Cordocentesis
	To apply, by medical indication, a blastocyst biopsy to patients with a predisposition to pass congenital defects to embryos after implantation
	Control blood sugar levels in pregnant women with Gestational Diabetes by monitoring an appropriate diet
Nursing action in the	Administer insulin as needed to mothers with high blood sugar levels
Nursing action in the face of pathologies affecting the mother	Monitoring blood pressure in pregnant women with hypertension
	Increasing the intake of nutrients such as iron in a controlled fashion in pregnant women with anemia
	Check that pregnant women do not suffer from urinary tract infections and bacterial vaginosis during gestation through periodic testing
	Periodically evaluate the symptoms of preeclampsia, such as high blood pressure, swelling, among other indicators
	Administer medications to prevent more serious complications such as Eclampsia
Puerperium Pathologies attended	Prevent puerperal infections by monitoring symptoms such as fever and abdominal pain
by Nurses	Supervise the intake of antibiotic drugs in cases of puerperal infections
	Examine and monitor for signs of postpartum hemorrhage
	Relieving perineal pain after childbirth through Kegel exercises

tech 50 | Clinical Internship

Civil Liability Insurance

This institution's main concern is to guarantee the safety of the trainees and other collaborating agents involved in the internship process at the company. Among the measures dedicated to achieve this is the response to any incident that may occur during the entire teaching-learning process.

To this end, this educational entity undertakes to take out civil liability insurance to cover any eventuality that may arise during the stay at the internship center.

This liability policy for interns will have broad coverage and will be taken out prior to the start of the practical training period. In this way, the professional will not have to worry in case they have to face an unexpected situation and will be covered until the end of the practical program at the center.



General Conditions of the Internship Program

The general terms and conditions of the internship agreement for the program are as follows:

1. TUTOR: During the Hybrid Professional Master's Degree, students will be assigned with two tutors who will accompany them throughout the process, answering any doubts and questions that may arise. On the one hand, there will be a professional tutor belonging to the internship center who will have the purpose of guiding and supporting the student at all times. On the other hand, they will also be assigned with an academic tutor whose mission will be to coordinate and help the students during the whole process, solving doubts and facilitating everything they may need. In this way, the student will be accompanied and will be able to discuss any doubts that may arise, both clinical and academic.

2. DURATION: The internship program will have a duration of three continuous weeks, in 8-hour days, 5 days a week. The days of attendance and the schedule will be the responsibility of the center and the professional will be informed well in advance so that they can make the appropriate arrangements.

3. ABSENCE: If the students does not show up on the start date of the Hybrid Professional Master's Degree, they will lose the right to it, without the possibility of reimbursement or change of dates. Absence for more than two days from the internship, without justification or a medical reason, will result in the professional's withdrawal from the internship, therefore, automatic termination of the internship. Any problems that may arise during the course of the internship must be urgently reported to the academic tutor. **4. CERTIFICATION:** Professionals who pass the Hybrid Professional Master's Degree will receive a certificate accrediting their stay at the center.

5. EMPLOYMENT RELATIONSHIP: The Hybrid Professional Master's Degree shall not constitute an employment relationship of any kind.

6. PRIOR EDUCATION: Some centers may require a certificate of prior education for the Hybrid Professional Master's Degree. In these cases, it will be necessary to submit it to the TECH internship department so that the assignment of the chosen center can be confirmed.

7. DOES NOT INCLUDE: The Hybrid Professional Master's Degree will not include any element not described in the present conditions. Therefore, it does not include accommodation, transportation to the city where the internship takes place, visas or any other items not listed.

However, students may consult with their academic tutor for any questions or recommendations in this regard. The academic tutor will provide the student with all the necessary information to facilitate the procedures in any case.

08 Where Can I Do the Clinical Internship?

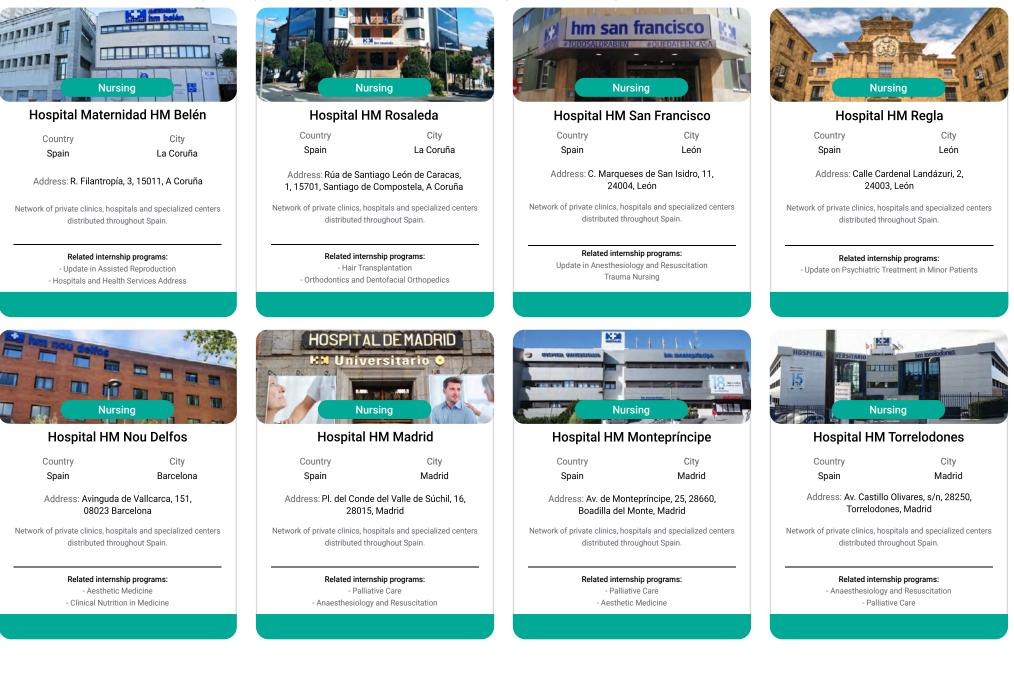
This Hybrid Professional Master's Degree culminates with an intensive and immersive on-site stay in a prestigious hospital institution. During this clinical practice, the nurse will have access to the best state-of-the-art care resources. In this way, you will be able to update your skills based on the latest scientific evidence and the most innovative devices on the healthcare market.

Where can I do the clinical internship? | 53 tech

Do your internship in a prestigious hospital institution and get excellent practical skills in the Nursing sector that provides care to pregnant women with different pathologies"

tech 54 | Where Can I Do the Clinical Internship?

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





Where Can I Do the Clinical Internship? | 55 tech



Hospital HM Sanchinarro

Country City Spain Madrid

Address: Calle de Oña, 10, 28050, Madrid

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

Related internship programs: - Anaesthesiology and Resuscitation - Palliative Care



Hospital HM Puerta del Sur

Country	City
Spain	Madrid

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

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

Related internship programs: - Palliative Care - Clinical Ophthalmology



Hospital HM Nuevo Belén

Country

Spain

City Madrid

Address: Calle José Silva, 7, 28043, Madrid

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

Related internship programs: - General and Digestive System Surgery - Clinical Nutrition in Medicine



Policlínico HM Cruz Verde

Country	City
Spain	Madrid

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

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

Related internship programs: - Advanced Clinical Podiatry - Optical Technologies and Clinical Optometry

tech 56 | Where Can I Do the Clinical Internship?

City

Madrid



Policlínico HM Distrito Telefónica

Country Spain

Address: Ronda de la Comunicación, 28050, Madrid

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

> Related internship programs: - Optical Technologies and Clinical Optometry - General and Digestive System Surgery



Policlínico HM Gabinete Velázquez

Country City Madrid

Spain

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

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

> Related internship programs: - Clinical Nutrition in Medicine - Aesthetic Plastic Surgery



Policlínico HM La Paloma

Country	City
Spain	Madrid

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

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

> Related internship programs: - Advanced Operating Room Nursing - Orthodontics and Dentofacial Orthopedics



Policlínico HM Las Tablas

Country	City
Spain	Madrid

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

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

> Related internship programs: Trauma Nursing - Diagnosis in Physiotherapy





Where Can I Do the Clinical Internship? | 57 tech



Policlínico HM Moraleja

Country City Spain Madrid

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

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

Related internship programs: - Rehabilitation Medicine in Acquired Brain Injury Management



Policlínico HM Rosaleda Lalín

Country	City
Spain	Pontevedra

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

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

Related internship programs: - Advances in Hematology and Hemotherapy Neurological Physiotherapy



Policlínico HM Sanchinarro

Country Spain

> Address: Av. de Manoteras, 10, 28050, Madrid

City

Madrid

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

Related internship programs: - Gynecological Care for Midwives - Nursing in the Digestive Tract Department



Policlínico HM Imi Toledo

Country	City
Spain	Toledo

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

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

Related internship programs: - Electrotherapy in Rehabilitation Medicine - Hair Transplantation

09 **Methodology**

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

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

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"

tech 60 | Methodology

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.



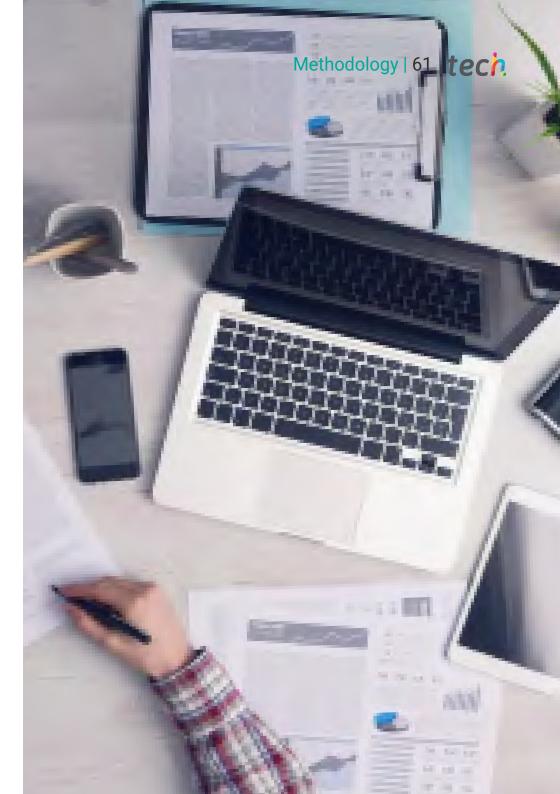
According to Dr. Gérvas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, in an attempt to recreate the real conditions in professional nursing practice.

66

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:

- 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.
- 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.



tech 62 | Methodology

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.



Methodology | 63 tech

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

With this methodology 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.



tech 64 | Methodology

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.

20%

15%

3%

15%

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.

Methodology | 65 tech



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.

20%

3%

7%

17%

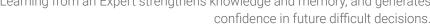


Testing & Retesting

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.



There is scientific evidence suggesting that observing third-party experts can be useful. Learning from an Expert strengthens knowledge and memory, and generates





Quick Action Guides

TECH offers the most relevant contents of the course in the form of worksheets or quick action guides. A synthetic, practical, and effective way to help students progress in their learning.

10 **Certificate**

This Hybrid Professional Master's Degree in Pathologies of Pregnancy for Nursing guarantees students, in addition to the most rigorous and up-to-date education, access to a Hybrid Professional Master's Degree diploma issued by TECH Global University.



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

tech 68 | Certificate

This program will allow you to obtain your **Hybrid Professional Master's Degree diploma in Pathologies of Pregnancy for Nursing** 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.

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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.

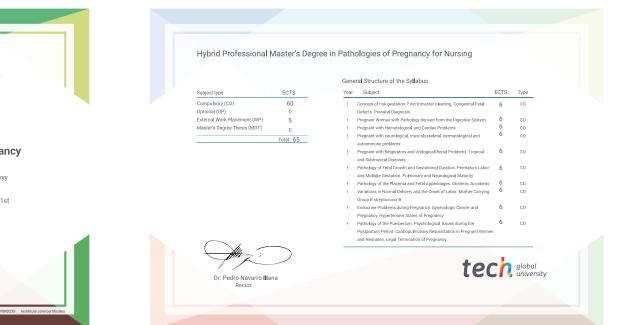
Title: Hybrid Professional Master's Degree in Pathologies of Pregnancy for Nursing

Course Modality: Hybrid (Online + Clinical Internship)

Duration: 12 months

Certificate: TECH Global University

Recognition: 60 + 5 ECTS Credits



*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.

tech global university Hybrid Professional Master's Degree Pathologies of Pregnancy for Nursing Modality: Hybrid (Online + Clinical Internship) Duration: 12 months Certificate: TECH Global University 60 + 5 ECTS Credits

Hybrid Professional Master's Degree Pathologies of Pregnancy for Nursing

