



### Professional Master's Degree

### Palliative Care for Nursing

» Modality: online

» Duration: 12 months

» Certificate: TECH Global University

» Accreditation: 60 ECTS

» Schedule: at your own pace

» Exams: online

Website: www.techtitute.com/us/nursing/professional-master-degree/master-palliative-care-nursing

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### tech 06 | Introduction

With a holistic approach that encompasses physical, psychological, social and spiritual aspects, Palliative Nursing plays a crucial role in the management of pain and other symptoms, ensuring that treatment aligns with the patient's preferences and values. However, the challenge of integrating humanization in health care remains a central issue, promoting compassionate and personalized care.

This is how this Professional Master's Degree was created, which will provide nurses with an exhaustive preparation in the comprehensive care and management of patients with advanced and terminal illnesses. Therefore, the syllabus will cover a broad spectrum of knowledge, starting with learning the skills needed to provide compassionate care tailored to the individual needs of each patient.

Likewise, skills will be developed to work with the families of palliative patients, recognizing the importance of the family unit in the care process. In this regard, professionals will be able to communicate effectively and provide the necessary support for caregivers and other family members to better manage the stress and emotional burden associated with caring for a terminally ill loved one.

Finally, the latest scientific evidence related to the diagnosis and treatment of symptoms and syndromes prevalent in Palliative Care will be included. Therefore, graduates will delve into the most relevant therapeutic techniques, learning to use these tools in the daily follow-up of their patients. In addition, solid knowledge on specific nutrition for patients with advanced diseases will be integrated in order to improve prognosis and reduce complications.

In this way, TECH has implemented an exhaustive program, 100% online and flexible, adapted to the individual needs of the students, who will only need an electronic device with an Internet connection to access the didactic materials. In addition, it will be based on the innovative Relearning methodology, consisting of the reiteration of key concepts for the optimal and organic assimilation of the contents.

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

- The development of practical case studies presented by experts in Palliative Care for Nursing
- The graphic, schematic, and practical contents with which they are created, provide scientific and practical information on the disciplines that are essential for professional practice
- Practical exercises where the self-assessment process can be carried out to improve learning
- \* Its special emphasis on innovative methodologies
- Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- Content that is accessible from any fixed or portable device with an Internet connection



You'll delve into the physical, emotional and spiritual needs of patients and their families, empowering you to provide more empathetic and compassionate care. Enroll now!"



You will analyze the latest scientific evidence in Palliative Care for Nursing, thanks to the best didactic materials, at the forefront of technology and academia"

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

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

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

You will acquire fundamental competencies to provide high quality care, focusing on maximizing both quality of life and dignity in the dying process.

You will be specialized in the complexities of the pathologies faced by palliative patients, both oncologic and non-oncologic, equipping you to meet the unique challenges of this area.







### tech 10 | Objectives



### **General Objectives**

- Have a solid understanding of the fundamentals and models of care in palliative care, as well as aspects such as epidemiology or pathophysiology of chronic diseases
- Enhance clinical skills for the comprehensive assessment of patients, including the management of complex symptoms and the approach to total distress
- Adopt an individualized approach to care focused on both the preferences and values of users, respecting their autonomy at all stages of the pathology
- Gain empathetic and effective communication skills, both with affected individuals and their families
- Apply knowledge of specific nutrition to improve prognosis and reduce complications in patients with advanced diseases
- Keep abreast of innovations in matters such as diagnostic and therapeutic techniques most relevant to the follow-up of palliative patients





#### Module 1. Palliative Care

- Know the origin and development of Palliative Care
- Delve into the different types of organization in Palliative Care
- Develop practical skills in symptom management (such as pain control, dyspnea management or fatigue management)
- Acquire skills to provide emotional support to patients and families facing serious pathologies

#### Module 2. Palliative Care in Oncology Patients

- Understand the functioning of Oncology Services
- · Analyze the different types of cancer by apparatus and systems

#### Module 3. Pain Treatment

- Deepen the knowledge of pain
- Analyze conventional treatments
- Provide patients with information about their pain condition, as well as selfregulation and self-care strategies to manage it effectively
- Investigate alternative and novel techniques for their implementation in clinical practice

#### Module 4. Symptom Control

- Understand the physiological and pathological basis of common symptomatology
- Accurately identify the different types of symptoms
- Perform comprehensive end-user health examinations
- Acquire skills to treat each symptom in an optimal way

#### Module 5. Palliative Care Emergencies

- Differentiate between palliative and terminal patients
- Recognize the most frequent emergencies in palliative patients
- Carry out a correct clinical management of palliative emergencies
- Adjust the most appropriate treatments according to the specific needs of the patient

#### Module 6. Palliative Care in Non-Oncological Processes

- Delve into the palliative criteria of the most frequent non-oncologic pathologies
- Obtain skills to identify patients with non-oncological palliative needs
- Apply the most appropriate treatments according to the pathology
- Provide personalized care that respects individual preferences, values and beliefs

#### Module 7. Palliative Care Nursing Procedures

- Know the importance of nursing in the management and care of palliative patients
- Know the NIC and NOC
- Know how to apply assessment scales to palliative patients
- Discover the new techniques in complex ulcer care
- Learn about nursing techniques with therapeutic potential
- Delve into the management of endovenous and subcutaneous pumps

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#### Module 8. Family and Bereavement Support in Palliative Care

- Recognize the importance of psychology in palliative care
- Manage innovative techniques of approaching family members
- Establish the differences between palliative sedation and euthanasia
- Develop advanced strategies to help families manage bereavement
- Design procedures to avoid the conspiracy of silence
- Empower communication skills to interact with patients' loved ones and inform them honestly about issues such as prognosis of illnesses

#### Module 9. Nutrition in the Palliative Patient

- Acquire skills to diagnose malnutrition in palliative patients from early stages
- Perform an optimal approach to Cachexia and Sarcopenia
- Have a deep understanding of the types of diets depending on the pathology
- Master the tube nutrition method

#### Module 10. Pediatric Palliative Care

- Be aware of the peculiarities of Pediatric Palliative Care
- Analyze the epidemiology of cancer in children
- Delve into the management of the most common symptoms in pediatric palliative care
- Manage weight-based dosing in pediatrics







You will be prepared to make informed, evidence-based decisions crucial to effective and ethical end-of-life patient care through a comprehensive library of multimedia resources"



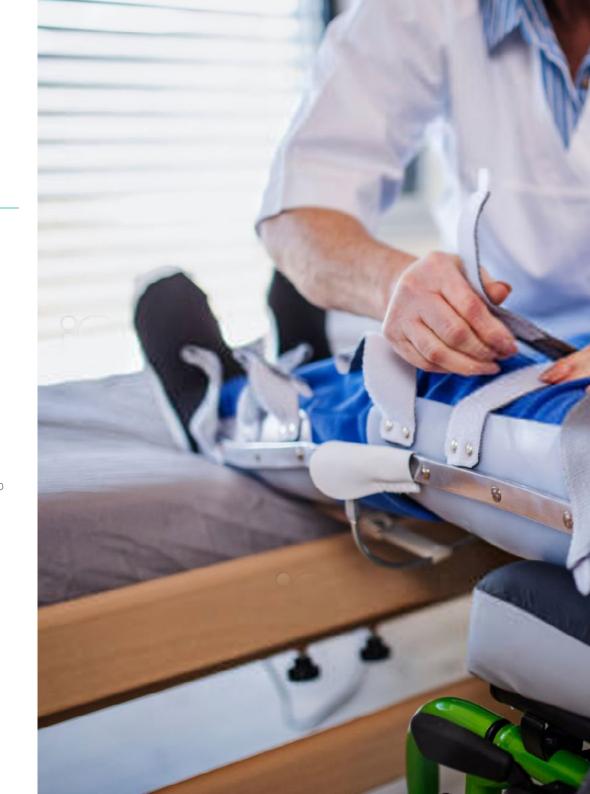


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#### **General Skills**

- Develop skills to provide comprehensive and personalized care to patients with advanced and terminal illnesses
- Acquire skills to effectively manage the treatment of pain and other complex symptoms in palliative care
- Become skilled in empathetic and effective communication with palliative patients and their families, adapting to their emotional and psychological needs
- Promote ethical and professional decision-making in highly complex situations associated with end-of-life care
- Integrate up-to-date knowledge of oncologic and non-oncologic pathologies requiring palliative care
- Apply advanced diagnostic and therapeutic techniques in the context of palliative care to improve clinical management
- Use adapted nutrition strategies to improve the quality of life of patients and minimize the effects of advanced illnesses
- Actively participate in multidisciplinary teams to provide a holistic approach to palliative care
- Promote and apply current research and evidence to optimize palliative care practice
- Strengthen personal and professional resilience in the face of the emotional and ethical challenges of caring for terminally ill patients



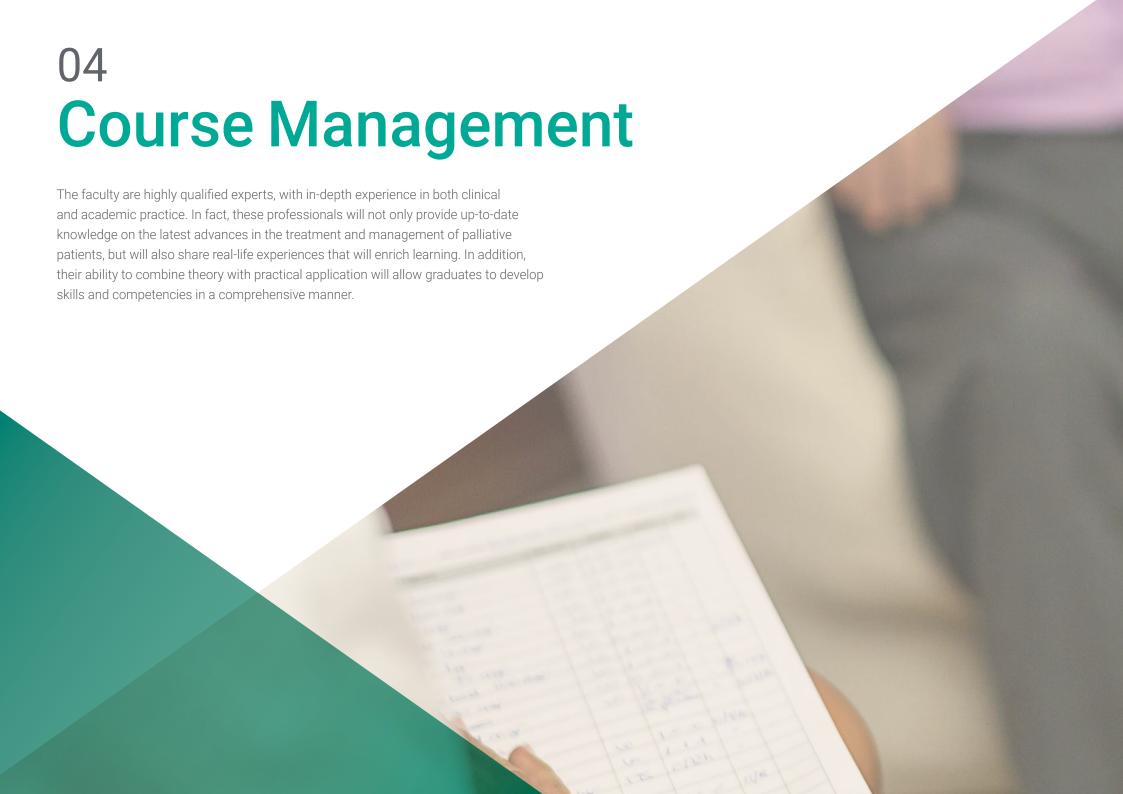


- Evaluate the efficacy and efficiency of palliative medicine from clinical and economic perspectives
- Update knowledge on the presence of palliative medicine in scientific publications and professional societies
- Identify and address the most frequent tumors in different systems and devices
- Apply knowledge of current cancer treatments, including chemotherapy, radiation therapy and emerging therapies such as immunotherapy
- Implement effective pharmacologic and non-pharmacologic pain treatments
- Utilize opioids safely and effectively in palliative patients
- Appropriately diagnose and treat a wide range of symptoms in palliative patients
- Manage palliative care emergencies quickly and effectively
- Apply scientific evidence to improve patient prognoses
- Recognize and appropriately manage non-oncologic palliative processes
- Decide on the limitation of therapeutic effort in appropriate contexts
- Apply specific nursing scales and techniques for palliative patients
- Develop and apply new nursing therapies to improve symptom control and quality of life

- Understand and manage the psychological and spiritual dimension of patients and their families
- Design and implement nutritional plans adapted to the specific needs of each patient
- Adequately manage symptom control and emotional support for patients' families



You will strengthen your skills in palliative care, enabling you to provide compassionate and effective care to those facing advanced illness and end of life"



#### Management



#### Dr. Lafuente Sanchis, Manuel Pablo

- Head of the Home Hospitalization and Palliative Care Service at La Ribera University Hospital, Valencia
- Specialist in Family and Community Medicine at the Virgen de los Lirios Hospital, Alcoy
- Clinical Simulation Instructor, Catholic University of Murcia
- University Professor in Nursing Studies
- Expert in Palliative Care, International University of La Rioja
- University Expert in University Teaching from the Catholic University of Valencia
- Degree in Medicine and Surgery from the University of Valencia
- · Member of: Spanish Society of Home Hospitalization and Spanish Society of Clinical Simulation

#### **Professors**

#### Dr. Santander López, Jorge

- Assistant Physician of the Home Hospitalization and Palliative Care Unit at La Fe Hospital, Spain
- Specialist in Family and Community Medicine
- Specialist in Home Hospitalization and Palliative Care
- Degree in Medicine and Surgery from the University of Mendoza, Argentina

#### Dr. Martín Marco, Antonio

- Internal Medicine Specialist at Arnau de Vilanova Hospital, Valencia
- Attending Physician in the Home Hospitalization and Palliative Care Unit
- Head of Teaching and Research in the Palliative Care in Unit
- Master's Degree in Emergency Medical Care
- Master's Degree in Emergency Medical Care
- Degree in Medicine and Surgery from the University of Zaragoza
- Member of: Spanish Society of Medical Oncology and Spanish Society of Internal Medicine

#### Dr. Torrijos Pastor, Antonio

- Physician in Home Hospitalization Unit Hospital Universitario La Ribera
- Outpatient Emergency Physician in Centro de Salud Integrado Carlet
- Specialist in Family and Community Medicine at the Marina Baixa Hospital, Alicante
- Degree in Medicine and Surgery from the University of Cadiz
- University Master's Degree in Palliative Care from the University of Valladolid
- Master's Degree in Clinical Medicine Research from the Miguel Hernández University
- Member of: Home Care Working Group of SVMFYC, the Palliative Care Working Group of SEMERGEN and National Working Group of Mental Health of SEMFYC

#### Dr. Clep, Camelia Alina

- Specialist in Internal Medicine at La Ribera University Hospital
- Degree in Medicine and Surgery from Iuliu-Hatieganu University, Cluj-Napoca Romania
- Attending Physician in the Home Hospitalization and Palliative Care Unit
- Specialist Degree in Palliative Care. International University of La Rioja
- Master's Degree in Cronic Diseases. University of Barcelona
- Member of: Spanish Society of Internal Medicine, Spanish Society of Home Hospitalization and Spanish Society of Palliative Care

#### Dr. Duart Clemente, Cristina

- Specialist in Family and Community Medicine in the Valencia Health System
- Specialist of the Disability Assessment Team of the Valencian Provincial Directorate
- Specialist in Family and Community Medicine at La Ribera University Hospital
- Master's Degree in Palliative Care from the University of Valladolid
- Degree in Medicine and Surgery from the University of Navarra

#### Dr. Tarraso Gómez, María Luisa

- Attending Physician of the Home Hospitalization and Palliative Care Unit of the Hospital Universitario de La Ribera
- Specialist Physician of the Pain Unit at the University Hospital of La Ribera
- Specialist in Family and Community Medicine. Residency at Dr. Peset Hospital
- Master's Degree in Palliative Care from the University of Valladolid
- Degree in Medicine and Surgery from the University of Valencia
- Member of: Valencian Society of Home Hospitalization and Palliative Group of the Spanish Multidisciplinary Society of Pain

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#### Dr. Borda, Miguel Germán

- Geriatrician at Riviera Hospital
- Research Physician at the University Hospital of Stavanger
- Specialist in Geriatric Medicine
- Expert in Clinical Trials
- Advisor at the Foundation for Alzheimer's Families
- Post-doctorate in Dementias at Stavanger University Hospital
- Promoter of the SABE Bogota Study, funded by the Colombian Ministry of Science
- Best Original Research Award by the International Congress on Aging in Cartagena, Colombia
- Member of the Colombian Association of Gerontology and Geriatrics

#### Ms. Sanchís Aguilar, Paula

- Nurse in Home Hospitalization and Palliative Care Unit of La Ribera University Hospital
- Nurse at Solimar Tavernes Residence
- Case Manager of Complex Chronic Patients at the Valencian School of Health Studies (EVES)
- University Diploma in Nursing from the University of Valencia

#### Ms. Vila Herranz, Mireia

- Nurse Case Manager in Hospital Universitario de La Ribera
- Home Hospitalization Nurse in University Hospital of La Ribera
- Emergency Nurse at University Hospital of La Ribera
- Diploma in Nursing from the Catholic University of Valencia





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#### Ms. Esparza Chust, Miryam Pau

- Nurse in the Home Hospitalization Unit at the University Hospital of La Ribera
- Specialist in Internal Medicine Hospitalization
- Master's Degree in School Health Education at the University of Valencia
- Diploma in Nursing from the University of Valencia
- Regular speaker at Health Congresses such as the "XI Jornada de la Sociedad Valenciana de Hospitalización a Domicilio" (XI Conference of the Valencian Society of Home Hospitalization)

#### Dr. Monroy Antón, José Luis

- Attending Physician, Specialist in Radiation Oncology at the University Hospital of La Ribera
- Medical Services Doctor at the Infantry Academy of Toledo
- Director of Medical Radiodiagnostic Installations
- Occupational Risk Prevention Service Physician
- Expert of the Medical Association for Madrid Courts
- Degree in Medicine and Surgery from the Autonomous University of Madrid.
- Collaborating Doctor in the Spanish Association Against Cancer
- Member of the Advisory Group to the Scientific Committee of the Spanish Society of Radiological Protection
- ESTRO Fellow Certification
- Member of: Spanish Society of Palliative Care, Spanish Society for Therapeutic Radiation Oncology and European Society for Therapeutic Radiology and Oncology

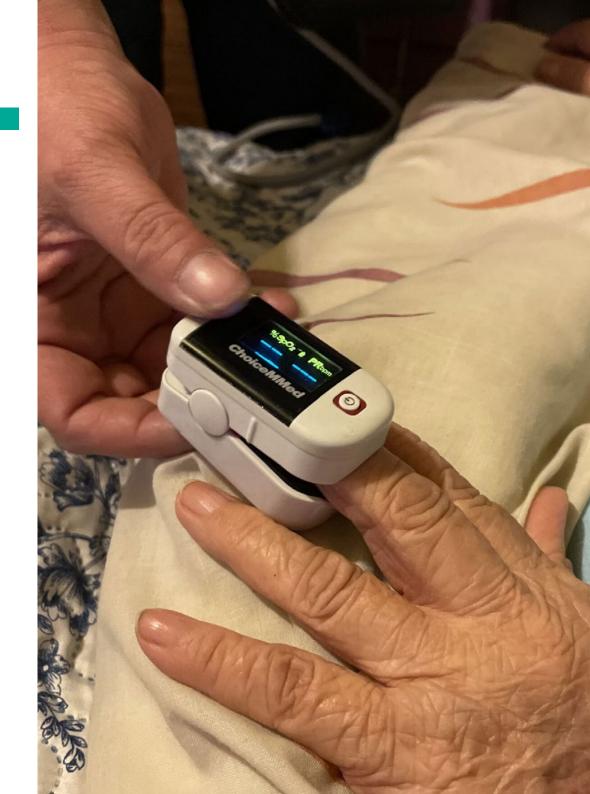




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#### Module 1. Palliative Care

- 1.1. Current Situation in Palliative Care
  - 1.1.1. Death in Modern Society
  - 1.1.2. Evolution of the Speciality
  - 1.1.3. Units at the European Level
  - 1.1.4. Units at the International Level
- 1.2. Palliative Care from the Perspective of International Law
  - 1.2.1. Human Rights
  - 1.2.2. European Legality
  - 1.2.3. International Legality
- 1.3. Study Plans
  - 1.3.1. Accreditation
  - 1.3.2. Pre-university Teaching
  - 1.3.3. Post-university Teaching
- 1.4. Scientific Societies
  - 1.4.1. National BORRAR
  - 1.4.2. Regional
  - 1.4.3. International
- 1.5. Economic Perspective of Palliative Care in the Health Care System
  - 1.5.1. Economic Impact of Palliative Care on Health Care Systems
  - 1.5.2. Efficiency of Palliative Care Units
  - 1.5.3. Impact on the Family Economy
- 1.6. Organization of Palliative Care
  - 1.6.1. Hospital
  - 1.6.2. Home Hospitalization Units
  - 1.6.3. Palliative Care based in Primary Care
- 1.7. Development of International Standards
  - 1.7.1. Historical Evolution of Palliative Care
  - 1.7.2. Birth of Modern Palliative Care
  - 1.7.3. Development of Palliative Care Units
- 1.8. Palliative Care Research
  - 1.8.1. Evolution of Scientific Publications in Palliative Care
  - 1.8.2. Impact Journals in Palliative Care
  - 1.8.3. Latest Publications
- 1.9. Clinical History in Palliative Medicine
  - 1.9.1. Clinical Evaluation of Symptoms
  - 1.9.2. Scales in Palliative Medicine
  - 1.9.3. Evaluation of the Family and Primary Caregiver



#### Module 2. Palliative Care in Oncology Patients

- 2.1. Biology and Epidemiology of Cancer
  - 2.1.1. Epidemiology
  - 2.1.2. Genetic and Environmental Factors
  - 2.1.3. Evolution over the Years
  - 2.1.4. Chronification of Cancer
- 2.2. Medical Oncology
  - 2.2.1. Development of the Specialty
  - 2.2.2. Organization
  - 2.2.3. Expectations for the Future
- 2.3. Anticancer Treatments
  - 2.3.1. Chemotherapy
  - 2.3.2. Radiotherapy
  - 2.3.3. Immunotherapy
- 2.4. Syndromes Related to Cancer
  - 2.4.1. Hypercalcemia
  - 2.4.2. Vena Cava Syndrome
  - 2.4.3. Oral Complications
  - 2.4.4. Paraneoplastic Syndromes
  - 2.4.5. Coagulation Disorders
- 2.5. Respiratory Cancer
  - 2.5.1. Most Common Types
  - 2.5.2. Treatment
  - 2.5.3. Frequent Complications
- 2.6. ORL Cancer
  - 2.6.1. Most Common Types
  - 2.6.2. Treatment
  - 2.6.3. Frequent Complications
- 2.7. Breast and Genitourinary Cancer
  - 2.7.1. Most Common Types
  - 2.7.2. Treatment
  - 2.7.3. Frequent Complications
- 2.8. Digestive Cancer
  - 2.8.1. Most Common Types
  - 282 Treatment
  - 2.8.3. Frequent Complications

- 2.9. Neurological Cancer
  - 2.9.1. Most Common Types
  - 2.9.2. Treatment
  - 2.9.3. Frequent Complications
- 2.10. Hematologic Cancer
  - 2.10.1. Most Common Types
  - 2.10.2. Treatment
  - 2.10.3. Frequent Complications

#### Module 3. Pain Treatment

- 3.1. Pain in Palliative Care
  - 3.1.1. Approach to Pain in Palliative Care
  - 3.1.2. Epidemiology
  - 3.1.3. Most Common Types of Pain in Palliative Care Patients
- 3.2. Anatomy of Pain
  - 3.2.1. Topographic Atlas
  - 3.2.2. Pain Pathways
- 3.3. Classification
  - 3.3.1. According to Duration
  - 3.3.2. According to Origin
  - 3.3.3. According to Severity
  - 3.3.4. According to Pathophysiology
- 3.4. Pain Assessment and Diagnosis
  - 3.4.1. Anamnesis and Examination
  - 3.4.2. Scales and Algorithms
  - 3.4.3. Imaging Techniques
- 3.5. Pharmacological Treatment of Pain in the Palliative Patient
  - 3.5.1. Standard Pharmacological Treatment
  - 3.5.2. Pharmacological Treatment of the Most Frequent Comorbidities: IR, CHF, Hepatic Insufficiency, Cognitive Impairment
  - 3.5.3. Opioid Rotation
- 3.6. Non-Pharmacological Treatment
  - 3.6.1. Physical Therapy
  - 3.6.2. Radiotherapy
  - 3.6.3. Rehabilitation

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- 3.7. Pain in the Palliative Oncology Patient
  - 3.7.1. Consultation Approach
  - 3.7.2. Most Frequent Types of Pain
  - 3.7.3. Treatment and Follow-Up Guidelines
- 3.8. Intervention Techniques
  - 3.8.1. Lymph Node Ablation
  - 3.8.2. Infiltrations
  - 3.8.3. Plexus
  - 3.8.4. Drug Infusion Pumps
  - 3.8.5. Neuro-modulators
- 3.9. Pain Associated with Antineoplastic Treatment
  - 3.9.1. Hypercalcemia
  - 3.9.2. Tumor Lysis
  - 3.9.3. Related to Radiotherapy
- 3.10. Repercussions of Pain
  - 3.10.1. On Quality of Life
  - 3.10.2. On the Emotional Sphere
  - 3.10.3. Economic Repercussions

#### Module 4. Symptom Control

- 4.1. Symptom Control
  - 4.1.1. Consultation Approach
  - 4.1.2. How to Reflect Symptom Severity
  - 4.1.3. Scales
- 4.2. Anorexia-Cachexia
  - 4.2.1. Approach
  - 4.2.2. Monitoring
  - 4.2.3. Treatment
- 4.3. Anxiety-Depression
  - 4.3.1. Approach
  - 4.3.2. Monitoring
  - 4.3.3. Treatment

- 4.4. Digestive Symptoms
  - 4.4.1. Nausea
  - 4.4.2. Constipation
  - 4.4.3. Dysphagia
- 4.5. Respiratory symptoms.
  - 4.5.1. Cough
  - 4.5.2. Hemoptysis.
  - 4.5.3. Stators
- 4.6. Hiccup
  - 4.6.1. Approach
  - 4.6.2. Monitoring
  - 4.6.3. Treatment
- 4.7. Delirium
  - 4.7.1. Approach
  - 4.7.2. Monitoring
  - 4.7.3. Treatment
- 4.8. Asthenia
  - 4.8.1. Approach
  - 4.8.2. Monitoring
  - 4.8.3. Treatment
- 4.9. Pruritus
  - 4.9.1. Approach
  - 4.9.2. Monitoring
  - 4.9.3. Treatment
- 4.10. Seizures
  - 4.10.1. Approach
  - 4.10.2. Monitoring
  - 4.10.3. Treatment

#### Module 5. Palliative Care Emergencies

- 5.1. Febrile Neutropenia
  - 5.1.1 Infections in Palliative Medicine
  - 5.1.2. Approach and Diagnosis
  - 5.1.3. Treatment
- 5.2. Tumor Lysis Syndrome
  - 5.2.1. Approach
  - 5.2.2. Diagnosis
  - 5.2.3. Treatment
- 5.3. Spinal Cord Compression
  - 5.3.1. Approach
  - 5.3.2. Diagnosis
  - 5.3.3. Treatment
- 5.4. Hypercalcemia
  - 5.4.1. Approach
  - 5.4.2. Diagnosis
  - 5.4.3. Treatment
- 5.5. DVT- PE
  - 5.5.1. Approach
  - 5.5.2. Diagnosis
  - 5.5.3. Treatment
- 5.6. Anxiety Attack.
  - 5.6.1. Approach
  - 5.6.2. Diagnosis
  - 5.6.3. Treatment
- 5.7. Intestinal Occlusion
  - 5.7.1. Approach
  - 5.7.2. Diagnosis
  - 5.7.3. Treatment
- 5.8. Massive Hemorrhage
  - 5.8.1. Approach
  - 5.8.2. Diagnosis
  - 5.8.3. Treatment

- 5.9. Oncologic Breakthrough Pain
  - 5.9.1. Approach
  - 5.9.2. Diagnosis
  - 5.9.3. Treatment
- 5.10. Others in Emergency Situations
  - 5.10.1. Hemoptysis.
  - 5.10.2. Gastrointestinal bleeding.
  - 5.10.3. Dyspnoea

#### Module 6. Palliative Care in Non-Oncological Processes

- 6.1. Heart Failure
  - 6.1.1. Diagnosis
  - 6.1.2. Palliation Criteria
  - 6.1.3. Treatment
- 6.2. COPD
  - 6.2.1. Diagnosis
  - 6.2.2. Palliation Criteria
  - 6.2.3. Treatment
- 6.3. Pulmonary Fibrosis
  - 6.3.1. Diagnosis
  - 6.3.2. Palliation Criteria
  - 6.3.3. Treatment
- 6.4. Chronic Renal Insufficiency
  - 6.4.1. Diagnosis
  - 6.4.2. Palliation Criteria
  - 6.4.3. Treatment
- 6.5. Hepatopathy or Liver Disease
  - 6.5.1. Diagnosis
  - 6.5.2. Palliation Criteria
  - 6.5.3. Treatment
- 6.6. Cognitive Impairment
  - 6.6.1. Diagnosis
  - 6.6.2. Palliation Criteria
  - 6.6.3. Treatment

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- 6.7. ALS
  - 6.7.1. Diagnosis
  - 6.7.2. Palliation Criteria
  - 6.7.3. Treatment
- 6.8. Multiple Sclerosis
  - 6.8.1. Diagnosis
  - 6.8.2. Palliation Criteria
  - 6.8.3. Treatment
- 6.9. Parkinson's Disease
  - 6.9.1. Diagnosis
  - 6.9.2. Palliation Criteria
  - 6.9.3. Treatment
- 6.10. Peripheral Arterial Failure
  - 6.10. 1 Diagnosis
  - 6.10.2. Palliation Criteria
  - 6.10.3. Treatment

#### Module 7. Palliative Care Nursing Procedures

- 7.1. Nursing Assessment
  - 7.1.1. Nursing Consultation
  - 7.1.2. Anamnesis in Nursing
  - 7.1.3. Examination in Nursing
  - 7.1.4. NIC-NOC
- 7.2. Nursing Scales
  - 7.2.1. Norton
  - 7.2.2. Barthel
  - 7.2.3. EVA Pain
  - 7.2.4. CONUT Index
  - 7.2.5. MUST
  - 7.2.6. MNA
  - 7.2.7. Pfeiffer
  - 7.2.8. Family APGAR scale
  - 7.2.9. Risk of Caregiver Overload

- 7.3. Health Education
  - 7.3.1. Skin Care
  - 7.3.2. Hygiene
  - 7.3.3. Nutrition and Physical Activity
- 7.4. Advanced Treatments
  - 7.4.1. VAC
  - 7.4.2. Larval Therapy
  - 7.4.3. Mechanical and Chemical Debriding
- 7.5. Stomata
  - 7.5.1. Management of Stomas
  - 7.5.2. Change of Stomata
  - 7.5.3. Treatments
- 7.6. Handling of Intravenous Pumps
  - 7.6.1. Types of Pumps
  - 7.6.2. Pump Handling
  - 7.6.3. Compatible Drugs
- 7.7. Nutrition
  - 7.7.1. Pumps
  - 7.7.2. Bolus Nutrition
  - 7.7.3. PEG
- 7.8. Subcutaneous Medication Management
  - 7.8.1. Elastomeric Infusers
  - 7.8.2. Subcutaneous Treatments
  - 7.8.3. Compatible Mixtures in Infusors
- 7.9. Non-invasive Techniques in Pain Control
  - 7.9.1. Capsaicin
  - 7.9.2. Radiofrequency
  - 7.9.3. Physical Exercise
- 7.10. Midline-PICC
  - 7.10.1. Use of Ultrasound in Nursing
  - 7.10.2. Midline Canalization in the Clinic or at Home
  - 7.10.3. Treatment of Tracts

#### Module 8. Family and Bereavement Support in Palliative Care

- 8.1. Psycho-Oncology
  - 8.1.1. Psychological Assessment of the Palliative Care Patient
  - 8.1.2. Process of Adaptation at the End of Life
  - 8.1.3. Support for the Terminally III Patient
- 8.2. The Family of the Palliative and Terminally III Patient
  - 8.2.1. Assessment of the Family and Functioning
  - 8.2.2. The Process of Family Adaptation to the End-of-Life Situation
  - 8.2.3. Support for the Family in the Terminal Phase
  - 8.2.4. The Caregiver's Burden in Palliative Care
- 8.3. Bereavement in Palliative Care
  - 8.3.1. Assessment
  - 8.3.2. Symptoms of Bereavement
  - 8.3.3. Complicated or Pathological Grief
  - 8.3.4. Psychological Assessment and Counseling in Bereavement
- 8.4. Spirituality and Palliative Care
  - 8.4.1. Spirituality Approach in Consultation
  - 8.4.2. Facilitating Spiritual Services
  - 8.4.3. Empathy
- 8.5. Anticipated Wishes
  - 8.5.1. What Does It Involve
  - 8.5.2. Current Legality
  - 853 Formalities
  - 8.5.4. Benefits of Having Advance Directives
- 8.6. Last Days of Life (LDS) Situation
  - 8.6.1. Characteristics and Diagnosis of LDS
  - 8.6.2. General Care in LDS
  - 8.6.3. Symptomatic Control in LDS
- 8.7. Non-pharmacological Measures in the Last Days of Life
  - 8.7.1. Psychological Support
  - 8.7.2. Hydration
  - 8.7.3. Advice to Family Members
  - 8.7.4. Instrumental Support at Home
- 8.8. Refractory Symptoms
  - 8.8.1. What do They Consist of?
  - 8.8.2. Most Common Symptoms at the End of Life
  - 8.8.3. Management of Refractory Symptoms

- 3.9. Palliative Sedation
  - 8.9.1. Type
  - 8.9.2. Indications for Palliative Sedation
  - 8.9.3. Pharmacology of Sedation
  - 8.9.4. Differences between Sedation and Euthanasia
- 8.10 Futhanasia in Palliative Care
  - 8.10.1. Differences between Palliative Sedation and Euthanasia
  - 8.10.2. Current Legality
  - 8.10.3. Formalities
  - 8.10.4. Euthanasia Process

#### Module 9. Nutrition in the Palliative Patient

- 9.1. Disease-related Malnutrition
  - 9.1.1. Diagnosis
  - 9.1.2. Monitoring
  - 9.1.3. Treatment
- 9.2. Cachexia Tumor
  - 9.2.1. Diagnosis
  - 9.2.2. Monitoring
  - 9.2.3. Treatment
- 9.3. Specific Diets
  - 9.3.1. Hyperproteic
  - 9.3.2. Hypercaloric
  - 9.3.3. Restrictive.
- 9.4. Diets for the Treatment of Anemias
  - 9.4.1. What do They Consist of?
  - 9.4.2. Iron Deficiency
  - 9.4.3. Megaloblastic Anemia
- 9.5. Objectives of Diabetes Mellitus Control
  - 9.5.1. Management in Special Situations (Fasting, Vomiting)
  - 9.5.2. Blood Sugar Levels.
  - 9.5.3. Treatment
- 9.6. Diets for Specific Pathologies
  - 9.6.1. Chronic Heart Failure (CHF)
  - 9.6.2. COPD
  - 9.6.3. Hepatic Insufficiency
  - 9.6.4. Renal Insufficiency

### tech 32 | Structure and Content

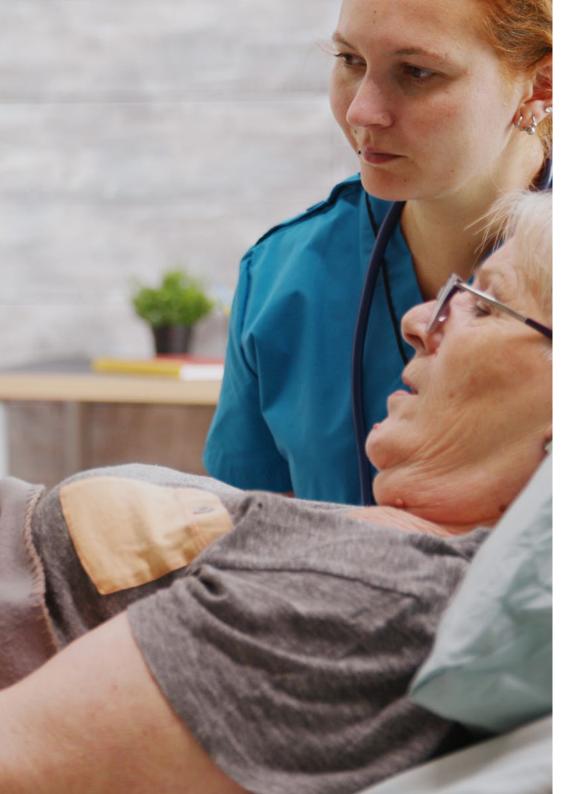
- 9.7. Dysphagia
  - 9.7.1. Diagnosis
  - 9.7.2. Diets with Adapted Textures
  - 9.7.3. Monitoring
- 9.8. Nutrition by SNG / PEG
  - 9.8.1. Types of Feeding Tubes
  - 9.8.2. Artificial Nutrition
  - 9.8.3. Treatment
  - 9.8.4. Monitoring
- 9.9. Interactions between Nutrition and Pharmaceuticals
  - 9.9.1. Incompatibilities.
  - 9.9.2. Treatment Adjustments
  - 9.9.3. Monitoring
- 9.10. End of Life Hydration
  - 9.10.1. Medical Aspects
  - 9.10.2. Ethical Aspects
  - 9.10.3. Legal Aspects

#### Module 10. Pediatric Palliative Care

- 10.1. Pediatric Palliative Care
  - 10.1.1. Differences with Adult Palliative Care
  - 10.1.2. Current Situation in Pediatric Palliative Care
  - 10.1.3. Reference Units
- 10.2. Family Care in the Pediatric Palliative Patient
  - 10.2.1. Family Approach
  - 10.2.2. Treatment of the Family Unit
  - 10.2.3. Monitoring
- 10.3. Childhood Cancer
  - 10.3.1. Epidemiology
  - 10.3.2. Most Common Cancers
  - 10.3.3. Treatment







- 10.4. Symptom Control in Pediatric Patients
  - 10.4.1. Differential Aspects with Adults
  - 10.4.2. The Child in the Face of Illness
  - 10.4.3. Most Common Symptoms
- 10.5. Treatment of Pain in Pediatrics
  - 10.5.1. Types of Pain
  - 10.5.2. Analgesia Pharmacology in the Pediatric Age
  - 10.5.3. Dosage
- 10.6. Treatment of Dyspnea in Pediatrics
  - 10.6.1. Types of Dyspnea
  - 10.6.2. Diagnosis
  - 10.6.3. Treatment
- 10.7. Anxiety and Psychological Symptoms Associated with the Disease
  - 10.7.1. Diagnosis
  - 10.7.2. Treatment
  - 10.7.3. Monitoring
- 10.8. Drug Dosage in Pediatrics
  - 10.8.1. Differences with Adult Pharmacology
  - 10.8.2. Dosage in Analgesia
  - 10.8.3. Dosage in Antibiotherapy
  - 10.8.4. Dosage in Emotional Sphere Treatments
- 10.9. Last Days Situation in Pediatric Patients
  - . Last Days Situation in a calatilo
  - 10.9.1. Sedation
  - 10.9.2. Refractory Symptoms
  - 10.9.3. Treatment
- 10.10. Bereavement in Pediatrics
  - 10.10.1. Differences with Adult Bereavement
  - 10.10.2. Diagnosis
  - 10.10.3. Treatment and Follow-up of Family Members



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.

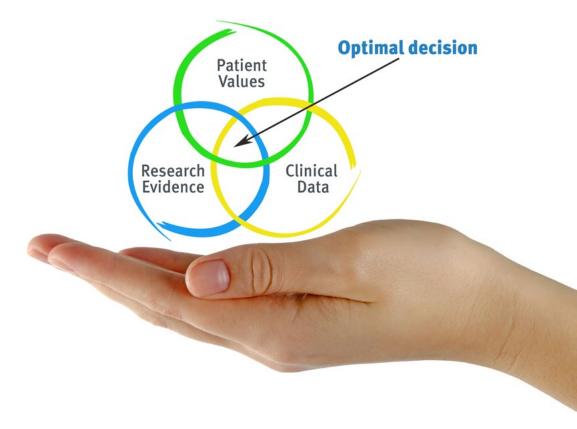


### tech 36 | Methodology

#### 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.



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.
- 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.



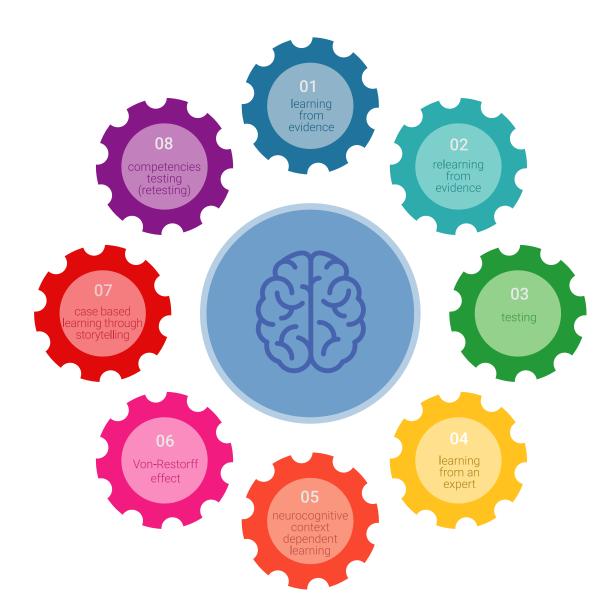
### Relearning Methodology

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.



### Methodology | 39 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 40 | 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.

These contents are then adapted in 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**

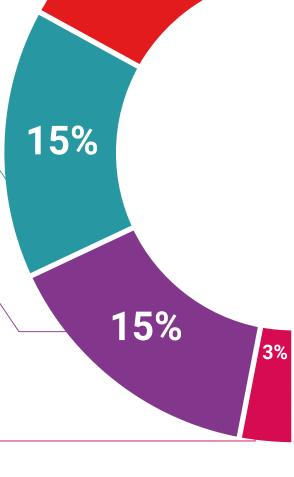
We introduce you to the latest techniques, to the latest educational advances, to the forefront of current medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch them as many times as you 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 | 41 tech



#### **Testing & Retesting**

The student's knowledge is periodically assessed and re-assessed throughout the program, through evaluative and self-evaluative activities and exercises: in this way, students can check how they are doing in terms of achieving their goals.



#### Classes

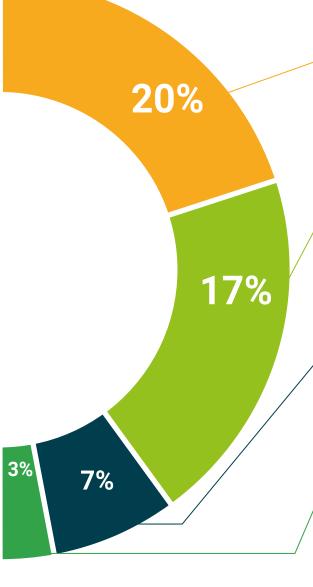
There is scientific evidence suggesting that observing third-party experts can be useful.



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.







### tech 44 | Certificate

This private qualification will allow you to obtain a **Professional Master's Degree diploma in Palliative Care 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.

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

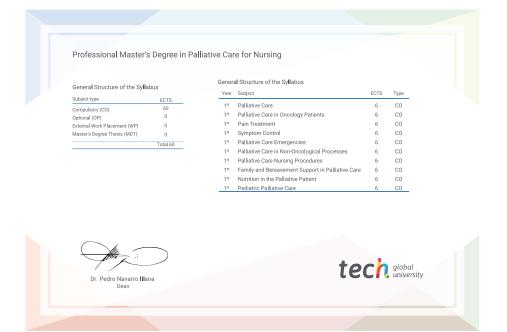
Title: Professional Master's Degree in Palliative Care for Nursing

Modality: online

Duration: 12 months

Accreditation: 60 ECTS





<sup>\*</sup>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.

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## Professional Master's Degree

Palliative Care for Nursing

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

