

# Professional Master's Degree

## Pregnancy Pathologies for Midwives



## Professional Master's Degree Pregnancy Pathologies for Midwives

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

Website: [www.techtute.com/us/nursing/professional-master-degree/master-pregnancy-pathologies-midwives](http://www.techtute.com/us/nursing/professional-master-degree/master-pregnancy-pathologies-midwives)

# Index

01

Introduction

---

*p. 4*

02

Objectives

---

*p. 8*

03

Skills

---

*p. 14*

04

Course Management

---

*p. 18*

05

Structure and Content

---

*p. 24*

06

Methodology

---

*p. 42*

07

Certificate

---

*p. 50*

# 01

# Introduction

Pregnancy and the hormonal changes a woman undergoes during pregnancy can affect her health and the proper development of the baby. There are multiple risk factors that nursing professionals must contemplate when treating a patient during pregnancy: age, previous or hereditary diseases, previous problems, etc., and based on this establish specialized clinical care to avoid fetal defects, complications during pregnancy and obstetric accidents. To get up to date with the new developments that have emerged in the field of healthcare for midwives, specialists can count on this intensive program, designed by experts in the healthcare field and presented in a convenient and flexible 100% online format.







“

*TECH presents this Professional Master's Degree as a unique opportunity to update your obstetric knowledge through a 100% online, multidisciplinary and intensive academic experience"*

The difficulties that can arise during pregnancy, childbirth and the postpartum period are diverse, and on many occasions the midwife can avoid them or, at least, reduce the level of damage caused to the mother and the baby, through an up to date and specialized nursing practice in each case. In recent decades, intervention protocols in this type of context have evolved considerably, making clinical activity safer and more comfortable for patients. Thanks to this, it is now possible to carry out prenatal treatments in women carrying infectious bacteria, establish early diagnostic guidelines in ectopic gestations or motivate pulmonary and neurological maturation in premature neonates, among other things.

Based on this, it is a clinical area in constant change, implementing new techniques and strategies. That is why TECH, in its commitment to the health professions, has developed a comprehensive program through which specialists in this field can be updated on the recommended clinical management of the different pathologies that may arise during pregnancy. For this purpose, you will have 1,500 hours of diverse material with which you will be able to delve into the latest issues related to risk gestation, congenital fetal defects and prenatal diagnosis, among others.

On the other hand, in this program participates a prestigious International Guest Director who has an outstanding experience in the Obstetrics sector and will give 10 exhaustive *Masterclasses*. Therefore, it is a perfect academic experience to implement the most innovative strategies and clinical techniques in the obstetric sector, attending an update of your knowledge in a 100% online way. This will allow you to work on it without schedules or face-to-face classes, since the Virtual Campus of this Professional Master's Degree is compatible with any device with an Internet connection, so you can connect whenever you want and from wherever you want.

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

- ♦ The development of practical cases presented by experts in Nursing Obstetrics
- ♦ 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



*With this program you will delve into the pathologies of pregnancy by the hand of a renowned International Guest Director, who will give 10 very complete Masterclasses"*

“

*In the Virtual Campus you will find 1,500 hours of the best theoretical, practical and additional material, selected exclusively for this program and designed based on the latest developments in the field of Obstetric Nursing”*

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

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

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

*Looking for a program to update you on the legal termination of pregnancy? With this program you will be able to delve into the specifics to be taken into account, so that you can guide your patients in the right way.*

*You will be able to implement in your practice the most effective therapeutic strategies related to the prevention of psychological problems during the postpartum period, such as postpartum depression.*



# 02 Objectives

Obstetrics is a highly demanded specialty in the field of Nursing, since its professionals are responsible for ensuring the health of the mother and baby during pregnancy and the postpartum period. For this reason, and given the important role that midwives play in the process, TECH and its team of experts have developed this very complete Professional Master's Degree with the aim of serving as a guide for graduates in their up-to-date information on the latest developments related to the management of pathologies in pregnant women, those caused by childbirth or those that may arise after childbirth.





“

*You will have the most relevant and innovative information related to puerperal infection, from risk factors to treatments and prophylaxis for its prevention"*



## General Objectives

---

- ◆ Update students' knowledge of the pathology of the first trimester of gestation
- ◆ Integrate new knowledge about fetal deformities, their causes and their resolution
- ◆ Instruct on the hemorrhagic pathology of the first trimester and its possible diagnoses
- ◆ Update the student's knowledge in everything related to the pathology of the digestive system and its interaction with pregnancy
- ◆ Inform about the medication of digestive pathologies and their possible teratogenesis
- ◆ Integrate the diagnostic difficulties of digestive diseases in pregnancy due to the physiological changes that occur during pregnancy
- ◆ Update knowledge in hematological and cardiac matters, as well as their main peculiarities in pregnancy
- ◆ Integrate the different genetic transmissions of hematological diseases
- ◆ Get up to Learn on the different prophylactic treatments for patients with heart disease in pregnancy



*Whatever your goals are, TECH will provide you with everything you need to achieve them and reach the highest level of quality in obstetric care"*





## 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 how to manage pregnancies with sociodemographic risk, such as adolescent pregnancies, in order to be able to act with scientific rigor before them

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

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

### **Module 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
- ◆ Learn in depth about perinatal hemolytic disease, which was a cause of death until a few years ago due to its lack of knowledge
- ◆ Discuss the main 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 qualified 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 an early termination of pregnancy, such as lupus and antiphospholipid syndrome
- ◆ Instruct on musculoskeletal pathology, since, although it is not generally serious, it is something that affects the majority of pregnant women who consult for solutions

### **Module 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 the knowledge about the influenza virus and its influence on pregnancy, due to the main complications it presents and because it is the object of hospital admission on numerous occasions
- ♦ Learn how to make a differential diagnosis between different urological and renal pathologies, very frequent during pregnancy, so much so that asymptomatic bacteriuria is screened and midwives must know how and when it should be performed
- ♦ Know the effects of tropical and subtropical diseases on the fetus and gestation in general, as this is a new topic that is under continuous study

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

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

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

- ♦ Knowledge of obstetric accidents and how to act is an indispensable role in the midwife's work, since in most cases it is necessary to act within seconds to avoid fatal consequences
- ♦ Specializing 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 Carrier of Group B Streptococcus**

- ♦ Learn exhaustively the different ways of initiating labor, whether spontaneous, induced or by premature rupture of membranes, is essential in the work of the midwife, as all pregnant women will go through this process
- ♦ Learn 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 in relation to pregnant women with group B streptococcus during the third trimester of pregnancy



**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 dated on the management of diabetes, since midwives are the competent professionals to carry out an adequate follow-up during pregnancy, delivery and the postpartum period of patients and neonates of diabetic mothers
- ♦ Have an in-depth knowledge of gynecological-oncological issues in pregnant women, as more and more patients are suffering from these pathologies and for whom it is essential to follow protocols based on the best evidence

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

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

# 03 Skills

In addition to serving as a guide in its update through the acquisition of the latest theoretical knowledge of the nursing sector, TECH has designed this program with the aim of providing the graduate with all the information they need to improve their skills in obstetric practice. Thanks to this, you will be able to implement in your practice the most effective clinical strategies to prevent complications during pregnancy, childbirth and postpartum through the resolution of real cases, in which you will have to apply what has been developed in the syllabus.





“

*You will have real clinical cases, so that you can improve your obstetric skills through simulated practice in frequent and not so frequent clinical contexts"*





## 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

“

*Investing your time in this Professional Master's Degree will become a sure bet to guarantee a more specialized obstetric health care with an unequalled quality"*







## 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

# 04

# Course Management

TECH has selected for this Professional Master's Degree a faculty versed in Nursing, more specifically in the area of Obstetrics. A group of midwives who are currently working in important clinical centers of reference in the international medical field, will be in charge of guiding the specialist during the academic experience. But that's not all, as they will also be available to answer any questions that may arise regarding the program, the exercises or the profession.



“

*The teaching team, formed by expert Midwives in Obstetric Nursing, will be at your disposal to solve your questions during the 12 months in which this academic experience is distributed"*



## International Guest Director

Dr. Leah McCoy is a specialist in **Nursing and Midwifery** and serves as the **Director of the Nurse Midwifery Education Program** at the Mayo Clinic in Minnesota, USA. 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 coach 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 expand her knowledge and enlisted with the motivation to travel while providing a service to her country. Due to her recognized expertise, she is also a member of the **American Board of Midwifery Certification** and a Fellow of the **American College of Nurse Midwives**.

In the field of research, she has worked on several 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 the birth of the baby.





## Dr. McCoy, Leah

---

- Director of the Nurse Midwifery Education Program, Mayo Clinic, Minnesota, USA. USA
- Nurse, Department of Obstetrics and Gynecology, Mayo Clinic, USA
- Instructor of the Obstetrics and Gynecology Area of the Mayo Clinic
- PhD in Obstetrical Nursing from Baylor University
- Degree in Nursing from Marquette University
- Member of: American College of Nurse Midwives and the United States Navy Nurse Corps

“

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

## Management



### Ms. Hernando Orejudo, Isabel

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

## Professors

### D. Márquez Espinar, Gumersindo

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

### Ms. De Miguel González, María José

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

### Ms. Hernández Lachehab, Sonia

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



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

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

“

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

# 05

# Structure and Content

This Professional Master's Degree has been designed by TECH based on 3 main criteria: the immediate actuality of the Obstetric Nursing sector, the professional guidelines of the teaching team and the innovative and effective *Relearning* methodology. Thanks to this, it has been possible to create an academic experience through which the professional will be able to catch up without having to invest extra time in memorizing. In addition, you will have hundreds of hours of diverse additional material with which you will be able to contextualize the syllabus and delve in a personalized way in the different sections of the same. All this in a 100% online way, without schedules or face-to-face classes.







“

*The best program to work on the most frequent obstetric accidents and the strategies for their prevention based on the most innovative and effective safety protocols"*

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

- 1.1. Addressing High-risk Pregnancies
  - 1.1.1. Sociodemographic 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 DrugInduced 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 Neoplasia
    - 1.4.3.1. Invasive Mole and Placental Bed Tumor
    - 1.4.3.2. 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. Sexrelated 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
- 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
- 1.7. Congenital Fetal Defects Secondary to Infections: TORCH.II
  - 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. Chickenpox Complications in Mothers

- 1.8. Congenital Fetal Defects Secondary to Infections: TORCH.III
  - 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
- 1.9. Other Infections that cause Fetal Problems
  - 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
  - 1.9.2. 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

## 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 Conditions
  - 2.3.1. Cavities During Pregnancy
  - 2.3.2. Epulis Gravidarum
  - 2.3.3. Gingivitis
  - 2.3.4. Perimyololysis
  - 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 and Liver Pathologies
  - 2.8.1. Cholecystitis
    - 2.8.1.1. Special Considerations and Management in Gestation
  - 2.8.2. Colelitis
    - 2.8.2.1. Special Considerations and Management in Gestation
  - 2.8.3. Fatty liver or acute liver 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
- 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 Thrombopenia in Pregnancy
    - 3.2.1.1. Causes and Incidence
    - 3.2.1.2. Diagnosis
    - 3.2.1.3. Obstetric Behavior
  - 3.2.2. Idiopathic Thrombocytopenic Purpura
    - 3.2.2.1. Causes and Incidence
    - 3.2.2.2. 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
- 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 Postpartum: 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 insufficiency
    - 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. Clinical 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. Guillain-Barré Syndrome
    - 4.5.3. Myasthenia Gravis
    - 4.5.4. Cerebrovascular Diseases
    - 4.5.5. Brain Neoplasms
  - 4.6. Dermatological Problems during Pregnancy
    - 4.6.1. Dermatological Changes during Pregnancy
      - 4.6.1.1. Stretch Marks
      - 4.6.1.2. Pregnancy Hyperpigmentation: 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. Prurigo Gestationis
  - 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 Dermatitis 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. Gestation control
    - 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. Gestational control of the woman with PAS
  - 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

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

- 5.1. Bronchial Asthma.
  - 5.1.1. Concept
  - 5.1.2. Course of bronchial asthma during pregnancy
  - 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 flu

- 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
  - 5.8.3. 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. Fetal impact 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
  - 5.9.3. Chagas Disease
    - 5.9.3.1. Epidemiology
    - 5.9.3.2. Transmission
    - 5.9.3.3. Clinical Symptoms
    - 5.9.3.4. Diagnosis
    - 5.9.3.5. Effects on the Fetus
    - 5.9.3.6. Treatment and Prevention
- 5.10. Tropical and Subtropical Diseases II
  - 5.10.1. Dengue.
    - 5.10.1.1. Epidemiology
    - 5.10.1.2. Transmission
    - 5.10.1.3. Clinical Symptoms
    - 5.10.1.4. Diagnosis
    - 5.10.1.5. Effects on the Fetus
    - 5.10.1.6. Treatment and Prevention



- 5.10.2. Malaria
  - 5.10.2.1. Epidemiology
  - 5.10.2.2. Transmission
  - 5.10.2.3. Clinical Symptoms
  - 5.10.2.4. Diagnosis
  - 5.10.2.5. Effects on the Fetus
  - 5.10.2.6. Treatment and Prevention
- 5.10.3. Chikungunya
  - 5.10.3.1. Epidemiology
  - 5.10.3.2. Transmission
  - 5.10.3.3. Clinical Symptoms
  - 5.10.3.4. Diagnosis
  - 5.10.3.5. Effects on the Fetus
  - 5.10.3.6. Treatment and Prevention

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

- 6.1. Intrauterine Growth Restriction (IGR)
  - 6.1.1. Concept
  - 6.1.2. Pathogenesis and Etiological Factors
  - 6.1.3. Prediction
  - 6.1.4. Diagnosis and Classification
  - 6.1.5. Differential Diagnosis with Small Fetus for Gestational Age (SGAF)
  - 6.1.6. Treatment and Completion of the Gestation
- 6.2. Fetal Macrosomia
  - 6.2.1. Concept
  - 6.2.2. Risk Factors
  - 6.2.3. Obstetric Follow-up and Control
  - 6.2.4. Completion of pregnancy
  - 6.2.5. Maternal and Fetal Complications

- 6.3. Chronologically Prolonged Gestation
    - 6.3.1. Concept
    - 6.3.2. Etiology and Prevention
    - 6.3.3. Fetal Complications
    - 6.3.4. Obstetric Behavior
    - 6.3.5. Induction in Week 41 Vs. Week 42
  - 6.4. Premature birth
    - 6.4.1. Threat of Premature Delivery
      - 6.4.1.1. Definition and Risk Factors
      - 6.4.1.2. Diagnosis: Ultrasound and Fibronectin test
      - 6.4.1.3. Obstetric management and tocolytic treatment
    - 6.4.2. Route of delivery in premature fetus and specific considerations
  - 6.5. Cervical incompetence and cerclage
    - 6.5.1. Cervical incompetence concept
    - 6.5.2. Signs of Cervical Cerclage
    - 6.5.3. Cerclage Techniques
    - 6.5.4. Pre- and Post-cerclage Considerations.
    - 6.5.5. Complications
    - 6.5.6. Cerclage Removal
  - 6.6. Suspected Chorioamnionitis and Clinical Chorioamnionitis
    - 6.7.1. Definition of Chorioamnionitis
    - 6.7.2. Criteria for Suspecting Chorioamnionitis
    - 6.7.3. Diagnosis
    - 6.7.4. Treatment
    - 6.7.5. 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 presentation
    - 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
  - 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. Defect: 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

### Module 8. Variations in Normal Delivery and the Onset of Labor. Mother Carrier of Group B Streptococcus

- 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 Route of Delivery
  - 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 streptococci (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

## 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. Pregestational Management
  - 9.2.2. Gestational Screening.
  - 9.2.3. Criteria for the Termination of Pregnancy
  - 9.2.4. Considerations during Labor
  - 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. repercussion 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. Pregnancy Hypertensive States 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. Pregnancy Hypertensive states II
  - 9.9.1. Eclampsia
    - 9.9.1.1. Diagnosis
    - 9.9.1.2. Clinical Management and Treatment
  - 9.9.2. HELLP 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

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

- 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
  - 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. Post Dural 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 Cardiorespiratory 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 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

“

*Would you like to get up to date on the most innovative prenatal diagnostic guidelines? Then opt for an academic experience that will provide you with everything you need to achieve this in a guaranteed way"*

06

# Methodology

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

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





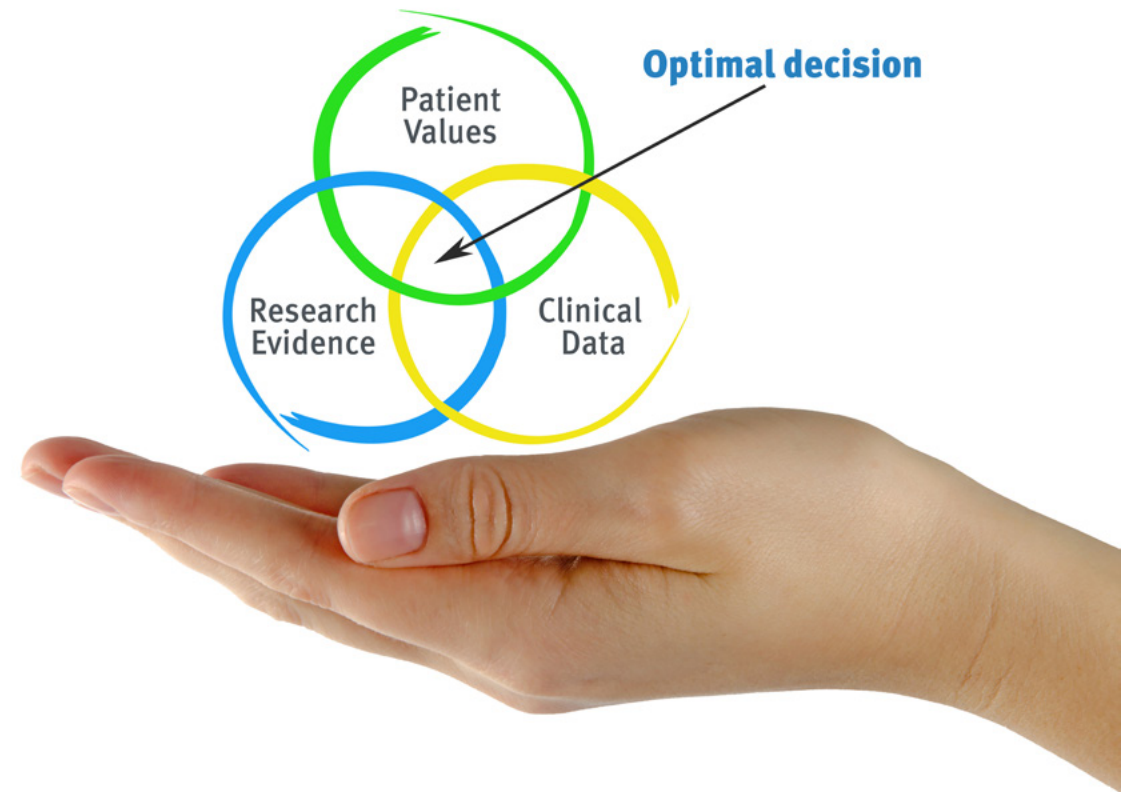
“

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

## At TECH Nursing School we use the Case Method

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

*With TECH, nurses can experience a learning methodology that is shaking the foundations of traditional universities around the world.*



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



“

*Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method”*

The effectiveness of the method is justified by four fundamental achievements:

1. Nurses who follow this method not only grasp concepts, but also develop their mental capacity, by evaluating real situations and applying their knowledge.
2. The learning process has a clear focus on practical skills that allow the nursing professional to better integrate knowledge acquisition into the hospital setting or primary care.
3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



## Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

This university is the first in the world to combine case studies with a 100% online learning system based on repetition combining a minimum of 8 different elements in each lesson, which is a real revolution compared to the simple study and analysis of cases.



*The nurse will learn through real cases and by solving complex situations in simulated learning environments. These simulations are developed using state-of-the-art software to facilitate immersive learning.*



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

With this methodology we have trained more than 175,000 nurses with unprecedented success in all specialities regardless of practical workload. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

*Relearning will allow you to learn with less effort and better performance, involving you more in your specialization, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation to success.*

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by TECH's learning system is 8.01, according to the highest international standards.



This program offers the best educational material, prepared with professionals in mind:



### Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is really specific and precise.

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



### Nursing Techniques and Procedures on Video

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



### Interactive Summaries

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

This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".



### Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.







#### Expert-Led Case Studies and Case Analysis

Effective learning ought to be contextual. Therefore, TECH presents real cases in which the expert will guide students, focusing on and solving the different situations: a clear and direct way to achieve the highest degree of understanding.



#### Testing & Retesting

We periodically evaluate and re-evaluate students' knowledge throughout the program, through assessment and self-assessment activities and exercises, so that they can see how they are achieving their goals.



#### Classes

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

Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



#### Quick Action Guides

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



# 07 Certificate

The Professional Master's Degree in Pregnancy Pathologies for Midwives guarantees, in addition to the most rigorous and up to date education, access to a Professional Master's Degree diploma issued by TECH Global University.



“

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



This private qualification will allow you to obtain a **Professional Master's Degree in Pregnancy Pathologies for Midwives** endorsed by TECH Global University, the largest digital university in the world.

**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 educational framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of joint 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 continuous education and professional updating that guarantees the acquisition of competencies in its area of knowledge, conferring a high curricular value to the student who completes the program.

Title: **Professional Master's Degree in Pregnancy Pathologies for Midwives**

Modality: **online**

Duration: **12 months**

Accreditation: **60 ECTS**



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



future  
health confidence people  
education information tutors  
guarantee accreditation teaching  
institutions technology learning  
community commitment  
personalized service innovation  
knowledge present  
development language  
classroom



## Professional Master's Degree

### Pregnancy Pathologies for Midwives

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

# Professional Master's Degree

## Pregnancy Pathologies for Midwives

