



# Professional Master's Degree

### Pregnancy Pathologies 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-pregnancy-pathologies-nursing

# Index

01		02			
Introduction		Objectives			
	p. 4		p. 8		
03		04		05	
Skills		Course Management		Structure and Content	
	p. 16		p. 20		p. 28
		06		07	
		Study Methodology		Certificate	
			p. 46		p. 54





### tech 06 | Presentation

Pregnancy can have serious consequences on the mother's health, since the hormonal changes that women undergo from fertilization to delivery are extremely high, contributing, on many occasions, to an imbalance that ends up causing digestive, hematological, cardiac, neurological problems and a long etcetera. In addition, it is necessary to consider the consequences that these pathologies can cause on the correct fetal development. For this reason, during pregnancy, pregnant women are subjected to strict control and multiple tests to diagnose possible conditions early and establish the most effective treatments as soon as possible.

In order that nursing professionals can learn in detail the developments that have emerged in recent years regarding the clinical management of such cases, TECH and its team of experts in Obstetrics and Gynecology have developed a complete Professional Master's Degree for it. Thanks to this program, nurses will be able to delve into the latest scientific evidence related to care during pregnancy, especially in cases of risk. Throughout 1,800 hours of the best theoretical and practical content, they will learn about the advances in the treatment of the most common problems that usually appear during pregnancy, childbirth and postpartum, as well as the most innovative and accurate early diagnosis techniques. In addition, this program has the participation of two prestigious International Guest Directors, who will give 10 Masterclasses each in their respective fields of specialization.

All this can be done 100% online, since the content of this program and its control will be done through the Virtual Campus. Therefore, professionals will be able to connect whenever they want, from wherever they want and through any device with Internet connection, be it PC, Tablet or cell phone. And they will be able to keep up to date and combined with their work activity in the hospital or clinic.

This **Professional Master's Degree in Pregnancy Pathologies for Nursing** 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 Obstetric Nursing
- The graphic, schematic and eminently practical contents with which it is conceived gather scientific and practical information on those disciplines that are essential for professional practice
- Practical exercises where self-assessment can be used to improve learning
- Its special emphasis on innovative methodologies
- Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- Content that is accessible from any fixed or portable device with an Internet connection



You will delve into specific concepts and procedures thanks to the Masterclasses of two renowned International Guest Directors, who have extensive experience in Obstetrics and Virolog"



You will update your knowledge about miscarriage and its clinical management, so that you can work with mothers from empathy and specialized psychology"

The program includes in its teaching staff professionals from the sector who bring to this program the experience of their work, as well as recognized 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 students must try to solve the different professional practice situations that arise throughout the program. For this purpose, students will be assisted by an innovative interactive video system created by renowned and experienced experts.

A program without limits: you can connect from anywhere and at any time, as long as you have a device with an Internet connection.

The program also includes a specific section to update the nurse on post-abortion care.







### tech 10 | Objectives



### **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 date on the different prophylactic treatments for patients with heart disease in pregnancy





# 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
- Update 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

- Gain 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 riskunits
- Know the importance of the early diagnosis of pathologies such as intrahepatic cholestasis of pregnancy, which can have fatal consequences 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 issues involved in cardiac pathologies in pregnancy, as some of them may hinder 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
- Study dermatological pathology in depth, which will allow the student to be able to perform an adequate approach in emergency and consultation units
- Analyze the autoimmune diseases that affect pregnancy, since many of them are an indication for an early termination of pregnancy, such as lupus and antiphospholipid syndrome
- Instruct on musculoskeletal pathology since, although it is not generally serious, it is something that affects the majority of pregnant women who seek solutions

### tech 12 | Objectives

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

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

# Module 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 labor and delivery and in postpartum due to the special care of the neonate
- Learn about the exhaustive management of preterm labor and prolonged pregnancy, as due to their incidence, midwives must know their diagnosis, treatment and complications for both the mother and the fetus and/or newborn
- Know how multiple pregnancies 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

- Gain knowledge about 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
- Learn about placental problems that may occur in any of the trimesters and which patients will often refer their concerns to obstetricians
- 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

- Gain in-depth knowledge about 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 do not take place ethically is of utmost importance for the midwife to have the skills and knowledge to refer patients and advise obstetricians in an optimal way
- Instruct on the main protocols for pregnant women with group B streptococcus during the third trimester of pregnancy



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

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





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

BORRAR

- 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



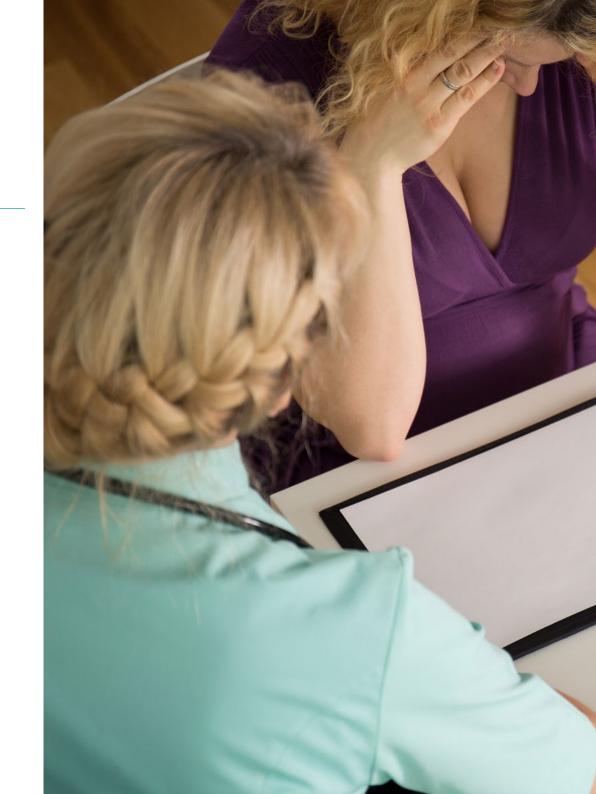


### tech 18 | Skills



### **General Skills**

- Know and recognize the pathologies of the three trimesters of fetal formation and know how to apply the appropriate protocols for each case
- Know and recognize digestive pathologies in relation to pregnancy and know how to act accordingly
- ◆ Be able to act effectively in the follow-up of cardiac and hematological pathologies in pregnancy







#### **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



A program that prepares you to offer a clinical service of the highest level through the inclusion in your practice of the strategies recommended by experts in Gynecology and Obstetrics"





#### **International Guest Director**

Dr. Leah McCoy is a **Nurse Midwifery** specialist and **Director** of the **Nurse Midwifery Education Program** at the Mayo Clinic in Minnesota, USA. This center seeks to offer nurses an innovative pathway to pursue a career as a **midwife**. With a special interest in ensuring quality care, she is dedicated 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 been involved in **prenatal care** and the general health of the pregnant woman. In addition, she has experience as a trainer for professionals who wish to specialize in this branch of nursing.

In addition, Dr. Leah McCoy has been a member of the United States Navy Nurse Corps. After working for several years as a midwife, she decided to broaden her knowledge and enlisted with the motivation to travel while offering a service for her country. Thanks to her recognized expertise, she also serves on the American Midwifery Certification Board and is a member 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 pregnancy or applying intermittent auscultation in low-risk women. She has also collaborated in a project to reduce the duration of labor induction with the aim of reducing by 10% the length of stay prior to delivery of the baby.



### Dr. McCoy, Leah

- Director, Nurse Midwifery Education Program, Mayo Clinic, Minnesota, USA
  USA
- Nurse in the Department of Obstetrics and Gynecology at Mayo Clinic
- Instructor of Obstetrics and Gynecology at the Mayo Clinic
- Doctorate 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



#### **International Guest Director**

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

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

Viral Infections affecting pregnant women and their children.

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

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



### Dr. Vauloup Fellous, Christell

- Vice-President of the Research Group on Infections during Pregnancy (GRIG), France
- Coordinator of the National Reference Center (CNR) for Maternal-Fetal Rubeolar Infections
- Responsible for the WHO National Reference Laboratory for Rubella
- Responsible for Serologic and Prenatal Diagnosis in Hospital Centers
- Member of the Working Group on Cytomegalovirus Detection in Gamete and Embryo Donors (French Ministry of Health)
- Member of the Working Group on Systematic Detection of CMV Infection during Pregnancy (French Ministry of Health)
- Member of the Working Group on the Implementation of the Mandatory Declaration of Rubella (French Ministry of Health)
- Member of the Working Group on Prevention of Cytomegalovirus Infection in Pregnant Women (French Ministry of Health)
- PhD in Virology, Pierre and Marie Curie University

- Master's Degree of Science, Medical Virology, Université Denis Diderot
- Degree in Pharmacy from the University Paris-Sud
- Degree in Biology from the University Paris-Sud
- Member of: French Society of Microbiology (SFL), French Society of Infectious Pathology (SPILF) and European Society of Clinical Virology



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

### tech 26 | Course Management

#### Management



#### Ms. Hernando Orejudo, Isabel

- Nurse specialized in Obstetrics and Gynecology
- · Midwife. San Carlos Clinical Hospital
- Outpatient Nurse. La Paz University Hospita
- 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



### Course Management | 27 tech

#### 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 Alcala
- 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 Hospital Universitario La Paz.
- University Diploma in Nursing from the Autonomous University of Madrid.





### tech 30 | Structure and Content

# **Module 1.** Concept of Risk Gestation First Trimester Bleeding Congenital Fetal Defects Prenatal Diagnosis

- 1.1. Addressing High-Risk Pregnancies
  - 1.1.1. Socio-Demographic Risk
    - 1.1.1.1. Adolescent Pregnancy Special Considerations
    - 1.1.1.2. Mother with Drug Dependency Problems
      - 1.1.1.2.1. Principles of Drug Induced Teratogenesis
      - 1.1.1.2.2. Alcohol
      - 1.1.1.2.3. Cocaine
      - 1.1.1.2.4. Heroin
      - 1.1.1.2.5. Other Drugs: Marijuana, Cannabis
    - 1.1.1.3. Occupational Risk in Pregnancy Ergonomics Radiation Exposure
  - 1.1.2. Reproductive Risk
  - 1.1.3. Current Gestational Risk
  - 1.1.4. 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
  - 1.2.3. Clinical Forms of Abortion
    - 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 Treatment
- 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. Post-Abortion 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. Sex-Related Disorders
  - 1.5.2. Prenatal Diagnostic Techniques Inclusion Criteria
    - 1.5.2.1. Invasive Techniques
    - 1.5.2.2. Non-Invasive Techniques
  - 1.5.3. Genetic Counseling

### Structure and Content | 31 tech

<ol> <li>Congenital Fetal Defects Secondary to Infect</li> </ol>	tions:	: TORCH
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- 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.

- 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. Complications due to Chickenpox in Mothers

#### 1.8. Congenital Fatal 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

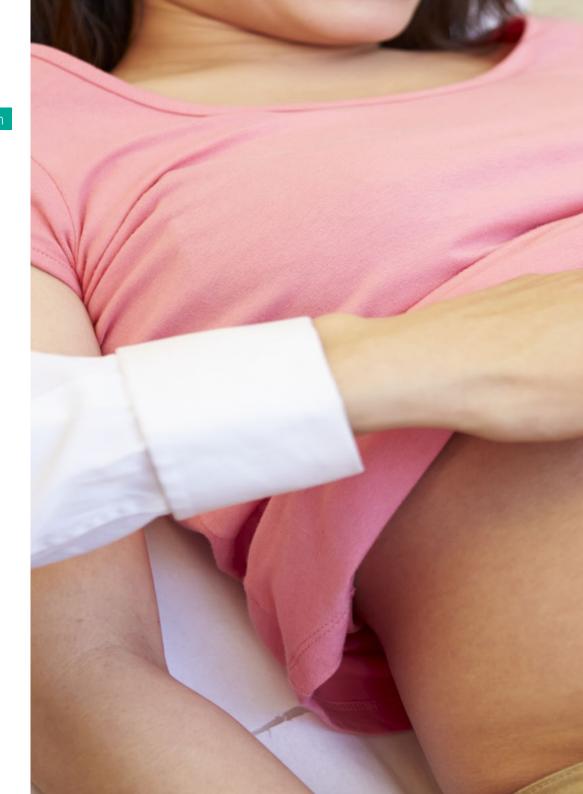
#### 1.10. HIV and Gestation

- 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

### tech 32 | Structure and Content

#### **Module 2.** Pregnant Women 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 (Hyperemesis Gravidarum will be Described in a Separate Chapter due to its Importance and Incidence in Pregnancy)
- 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. Perimylolysis
  - 2.3.5. Xerostomia
- 2.4. Pyrosis and Peptic Ulcers in Pregnant Women
  - 2.4.1. Concept
  - 2.4.2. Effect of Pregnancy on Heartburn and Peptic Ulcers
  - 2.4.3. Treatment and Hygienic Precautions
- 2.5. Constipation in Pregnancy
  - 2.5.1. Definition: ROMA Criteria
  - 2.5.2. Etiology
  - 2.5.3. Diagnosis
  - 2.5.4. Treatment
    - 2.5.4.1. Non-Pharmacological Treatment
    - 2.5.4.2. Pharmacological Treatment





### Structure and Content | 33 tech

2.6.	Inflammatory	Bowel Disease	2

- 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 Pathology: (Intrahepatic Cholestasis in Pregnancy and Chronic Viral Hepatitis are Treated in a Separate Chapter due to their Importance in Pregnancy)
  - 2.8.1. Cholecystitis
    - 2.8.1.1. Special Considerations and Management in Gestation
  - 2.8.2. Colelitiasis
    - 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

### tech 34 | Structure and Content

2.9.	Intrahep	patic 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.	Pancrea	as .		
	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

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- 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 of 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 (Module 9)
- 3.2.5. Therapeutic Management of Thrombopenias in Pregnancy
- 3.2.6. Therapeutic Management of the Newborn of a Mother with Thrombopenia

### Structure and Content | 35 tech

3.3.	Coagul	Coagulation Problem				
	0 0 1	\ /	\			

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. Concept and Physiopathology

3.4.2. Clinical Symptoms

3.4.3. Diagnosis

344 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 Puerperium: Deep Venous Thrombosis and Pulmonary Thromboembolism

3.6.1. Etiopathogenesis 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 Stenosis
  - 3.8.2. Aortic Stenosis
  - 3.8.3. Mitral Insufficiency
  - 3.8.4. Aortic Insufficiency
  - 3.8.5. Tricuspid Regurgitation
  - 3.8.6. Valve Prosthesis
- 3.9. Arrhythmias in Pregnancy
  - 3.9.1. Paroxysmal Supraventricular Tachycardia
  - 3.9.2. Atrial Fibrillation
  - 3.9.3. Ventricular Arrhythmias
  - 3.9.4. Bradyarrhythmias
- 3.10. Pregnant Women with Congenital Cardiac Pathology
  - 3.10.1. Tetralogy of Fallot
  - 3.10.2. Coarctation of Aorta
  - 3.10.3. Marfan Syndrome
  - 3.10.4. Single Ventricle
  - 3.10.5. Fontan
  - 3.10.6. Pregnant Women with Cardiac Transplantation

### tech 36 | Structure and Content

# **Module 4.** Pregnancy with Neurological, Musculoskeletal, Dermatological and Autoimmune Problems

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

- 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. Hemangiomas
- 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
  - 1.7.2. Impetigo Herpetiformis
    - 4.7.2.1. Clinical Symptoms
    - 4.7.2.2. Diagnosis
    - 4.7.2.3. Differential Diagnosis
    - 4.7.2.4. Prognosis
    - 4.7.2.5. Treatment
  - 4.7.3. Gestational Prurigo
    - 4.7.3.1. Clinical Symptoms
    - 4.7.3.2. Diagnosis
    - 4.7.3.3. Differential Diagnosis
    - 4.7.3.4. Prognosis
    - 4.7.3.5. Treatment

### Structure and Content | 37 tech

Module 5. Pregnancy with F	Respiratory and	Urological/Rena	I Problems	Tropica
and Subtropical Diseases				

5.1. Bronchial Asthm	а

- 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. Considerations in the Delivery of a Pregnant Women with Bronchial Asthma

### 5.2. Community-Acquired Pneumonia and Aspiration Pneumonia

- 5.2.1. Etiology
- 5.2.2. Treatment
- 5.2.3. Specific Considerations during Gestation
- 5.2.4. Newborn of a Mother with Pneumonia

#### 5.3. Influenza

- 5.3.1. Etiology
- 5.3.2. Prevention
- 5.3.3. Pregnancy Considerations
- 5.3.4. Treatment
- 5.3.5. Criteria for Hospitalization
- 5.3.6. Newborn of Mother with Influenza

### 5.4. Asymptomatic Bacteriuria

- 5.4.1. Concept
- 5.4.2. Etiology
- 5.4.3. Diagnostic Criteria
- 5.4.4. Treatment

### 5.5. Acute Cystitis and Urethral Syndrome

- 5.5.1. Concept
- 5.5.2. Etiology
- 5.5.3. Diagnostic Criteria
- 5.5.4. Treatment
- 5.5.5. Monitoring

### 4.7.4. Papular Dermatosis of Pregnancy

- 4.7.4.1. Clinical Symptoms
- 4.7.4.2. Diagnosis
- 4.7.4.3. Differential Diagnosis
- 4.7.4.4. Prognosis
- 4.7.4.5. Treatment

#### 4.7.5. Polymorphous Rash of 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
  - 4821 First Trimester
  - 4.8.2.2. Second Trimester
  - 4.8.2.3. Third Trimester
- 4.8.3. Childbirth and Postpartum

### i.9. Antiphospholipid Syndrome (APS)

- 4.9.1. Concept
- 4.9.2. Pregestational Monitoring of Women with APS
- 4.9.3. Gestational Control of Women with APS
- 4.9.4. Treatment
- 4.9.5. Childbirth and Postpartum

#### 4.10. Rheumatoid Arthritis

- 4.10.1. Concept
- 4.10.2. How Rheumatoid Arthritis affects Gestation
- 4.10.3. How Gestation affects Rheumatoid Arthritis
- 4.10.4. Treatment

## tech 38 | Structure and Content

5.6.	Acute P	yelonephritis
	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.	Obstruc	tive Uropathy
	5.7.1.	Concept
	5.7.2.	Clinical Symptoms
	5.7.3.	Exploration and Specific Tests
	5.7.4.	Diagnosis
	5.7.5.	Treatment
	5.7.6.	Complications
5.8.	Renal T	ransplantation and Gestation
	5.8.1.	Effects of Transplantation on Pregnancy
	5.8.2.	Effects of Pregnancy on Transplantation
	5.8.2.	Considerations during Childbirth, Postpartum and Lactation
5.9.	Tropica	and Subtropical Diseases
	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
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

5.10.

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

- 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-For-Gestational-Age Fetus (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 (Expanded in Later Module)
  - 6.4.2. Route of Delivery in Preterm Fetus and Specific Considerations

- 5.5. Cervical Insufficiency and Cerclage
  - 6.5.1. Cervical Insufficiency 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
  - 6.5.7. Cerclage Removal
- 6.6. Suspected Chorioamnionitis and Clinical Chorioamnionitis
  - 6.6.1. Concept of Chorioamnionitis
  - 6.6.2. Criteria for Suspecting Chorioamnionitis
  - 6.6.3. Diagnosis
  - 6.6.4. Treatment
  - 6.6.5. Specific Considerations in Childbirth
- 6.7. Multiple Gestation
  - 6.7.1. Concept and Classification
  - 6.7.2. Fetal and Maternal Complications
  - 6.7.3. Diagnosis and Determination of Chorionicity
  - 6.7.4. Prenatal Diagnosis and Screening of Chromosomopathies
  - 6.7.5. Gestational Screening
  - 6.7.6. End of Gestation and Delivery Route
- 6.8. Feto-Fetal Transfusion Syndrome
  - 6.8.1. Definition and Pathophysiology
  - 6.8.2. Diagnostic Criteria
  - 6.8.3. Differential Diagnosis
  - 6.8.4. Treatment
    - 6.8.4.1. Technique of Laser Photocoagulation of Vascular Communications
    - 6.8.4.2. Subsequent Monitoring

### tech 40 | Structure and Content

6.9.	Cortico	steroid 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.	Magnes	sium Sulfate as a Fetal Neuroprotector
	6.10.1.	Concept
		Indications
	6.10.3.	Contraindications
	6.10.4.	Drug Administration and Monitoring
	6.10.5.	Concomitant Use of Tocolytics in Threatened Preterm Labor
		Side Effects
Mod	ule 7. F	athology of the Placenta and Fetal Appendages Obstetric Accide
7.1.		al Accretion
	7.1.1.	Concept and Forms of Accretism
		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.	Clinical Symptoms and Morbimortality
	7.1.4.	Diagnosis
	7.1.5.	Clinical Management and Delivery of Pregnant Women with Placental Accreta
7.2.	Placent	a Previa
	7.2.1.	Concept
	7.2.2.	Classification
	7.2.3.	Risk Factors
	7.2.4.	Clinical Symptoms and Morbimortality
	7.2.5.	Diagnosis
	7.2.6.	Management of Gestation and Delivery of Pregnant Women with Placenta Previa

- Placental Morphological and Functional Abnormalities 7.3.1. Size Alterations 7.3.2. Morphological Alterations 7.3.2.1. Bilobulated 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 and Circles 7.4.2. Umbilical Cord Anomalies in relation to Presentation 7.4.2.1. Procubitus 7.4.2.2. Laterocidence 7.4.2.3. Prolapse 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. Single Umbilical Artery
- 7.5. Alterations of the Amniotic Membranes 7.5.1. Amnion Nodosum
  - 7.5.2. Amniotic Band Syndrome
  - 7.5.3. Extramembranous Pregnancy
  - 7.5.4. Premature Rupture of Membranes and Chorioamnionitis (Explained Above)

7.6.	Abnorn	nalities of Amniotic Fluid
	7.6.1.	Default: Oligohydramnios and Anhydramnios
		7.6.1.1. Concept and Epidemiology
		7.6.1.2. Etiological Factors
		7.6.1.3. Diagnosis
		7.6.1.4. Effects on the Fetus and Neonate
		7.6.1.5. Clinical Management and Treatment
	7.6.2.	In Excess: Polyhydramnios
		7.6.2.1. Concept and Epidemiology
		7.6.2.2. Etiological Factors
		7.6.2.3. Diagnosis
		7.6.2.4. Effects on the Fetus and Neonate
		7.6.2.5. Clinical Management and Treatment. Delivery Assistance
7.7.	Uterine	Rupture
	7.7.1.	Concept
	7.7.2.	Types
	7.7.3.	Risk Factors
	7.7.4.	Clinical Symptoms and Diagnosis
	7.7.5.	Treatment
7.8.	Premat	ture Detachment of a Normally Inserted Placenta
	7.8.1.	Concept
	7.8.2.	Risk Factors
	7.8.3.	Clinical Symptoms and Diagnosis
	7.8.4.	Clinical Management
7.9.	Amniot	tic 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.	Should	er Dystocia
	7.10.1.	Concept
	7.10.2.	Risk Factors
	7.10.3.	Diagnosis
	7.10.4.	Resolution Maneuvers
		7.10.4.1. Primary Maneuvers
		7.10.4.2. Secondary Maneuvers
		7.10.4.3. Tertiary Maneuvers
	7.10.5.	Postnatal Care and Assessment
Mod	lule 8. \	/ariations in Normal Delivery and the Onset of Labor Mother C
Grou	ıp B Str	eptococcus
8.1.	Instrum	nental Delivery
	8.1.1.	Concept
	8.1.2.	Indications
	8.1.3.	Contraindications
	8.1.4.	Criteria for using Different Instruments
		8.1.4.1. Forceps
		8.1.4.2. Thierry Spatulas
		8.1.4.3. Cupping
8.2.		Delivery
	8.2.1.	•
	8.2.2.	
	8.2.3.	Etiology
	8.2.4.	Diagnosis
	8.2.5.	Vaginal Delivery Criteria and Management
8.3.	Vaginal	Delivery after Cesarean Section
	8.3.1.	Choice of Delivery Route
	8.3.2.	Contraindications for Vaginal Delivery with Previous Cesarean Section
	8.3.3.	Planned Cesarean

8.3.4. Labor Induction

### tech 42 | Structure and Content

3.4.	Obstetri	c Anal Sphincter Injuries
	8.4.1.	Prevention
	8.4.2.	Classification
		8.4.2.1. Third Degree Tear
		8.4.2.2. Fourth Degree Tear
	8.4.3.	Repair of Perineal Tears
	8.4.4.	Follow-Up and Delivery after Anal Sphincter Injury
3.5.	Cesarea	n Section
	8.5.1.	Indications
	8.5.2.	Classification
	8.5.3.	Cesarean Section Considerations
	8.5.4.	Surgical Technique
	8.5.5.	Post-Operative Care
3.6.	External	Cephalic Version
	8.6.1.	Concept
	8.6.2.	Indications
	8.6.3.	Contraindications
	8.6.4.	Complete Technique and Procedure
	8.6.5.	Complications
3.7.	Cervical	Ripening and Induction of Labor
	8.7.1.	Concept
	8.7.2.	Indications
	8.7.3.	Contraindications
	8.7.4.	Risks from Induction
	8.7.5.	Labor Induction Methods
		8.7.5.1. Pharmacological Methods
		8.7.5.2. Non-Pharmacological Methods
8.8.	Fetal Hy	drops
	8.8.1.	Concept
		8.9.1.1. Immune Hydrops
		8.9.1.2. Non-Immune Hydrops
	8.8.2.	Pathophysiology
	8.8.3.	Diagnosis
	8.8.4.	Clinical Management

- 8.9. Mother Carrying Group B Streptococcus (GBS)
  - 8.9.1. Concept
  - 8.9.2. Sample Collecting and Screening
  - 8.9.3. Treatment
  - 8.9.4. Care of Newborns Born to GBS Carrier Mothers
- 8.10. Premature Rupture of Membranes
  - 8.10.1. Etiology
  - 8.10.2. Diagnosis
  - 8.10.3. Preterm Premature Rupture of Membranes
  - 8.10.4. Full-Term Premature Rupture of Membranes

# **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

### Structure and Content | 43 tech

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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 in Pregnancy
- 9.4.3. Gestational Impact 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.	Hypertens	sive	States	of Prea	nancv	(1
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- 9.8.1. Concept
- 9.8.2. Classification of Hypertension in Pregnancy
- 9.8.3. Severity Criteria
- 9.8.4. Prediction and Prevention
- 9.8.5. Treatment and Clinical Management
- 9.8.6. Criteria for the Termination of Pregnancy

### 9.9. Hypertensive States of Pregnancy (II)

- 9.9.1. Eclampsia
  - 9.9.1.1. Diagnosis
  - 9.9.1.2. Clinical Management and Treatment
- 9.9.2. Hellp's Syndrome
  - 9.9.2.1. Diagnosis
  - 9.9.2.2. Clinical Management and Treatment
- 9.9.3. Subsequent Follow-Up of Pregnant Women with Hypertension Problems

#### 9.10. Antepartum Fetal Death

- 9.10.1. Concept
- 9.10.2. Classification
- 9.10.3. Etiological Factors
- 9.10.4. Diagnosis
- 9.10.5. Clinical and Psychological Management (Covered in Module 10)
- 9.10.6. Follow-Up Genetic Counseling

### tech 44 | Structure and Content

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

1	0.1	Po	stnai	rtum	Infec	tion

- 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. Tissue
  - 10.2.2.4. Coagulation Problems
- 10.2.3. Treatment
- 10.3. Main Problems in Breastfeeding
  - 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. Concept, Etiology and Clinical Features
    - 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 Grief
  - 10.6.1. Concept
  - 10.6.2. Clinical Manifestations
  - 10.6.3. Types of Grief
  - 10.6.4. Phases of Perinatal Grief
  - 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 Cardio-Respiratory Arrest in Pregnant Women
  - 10.8.2. Algorithm for Cardiopulmonary Resuscitation
  - 10.8.3. Pregnancy-Specific Considerations
  - 10.8.4. Fetal Extraction



### Structure and Content | 45 tech

10.9. Neonatal Cardiopulmonary Resuscitation

10.9.1. Main Causes of Cardio-Respiratory Arrest in Neonates

10.9.2. Algorithm for Cardiopulmonary Resuscitation

10.9.3. Neuroprotection and Hypothermia in the Newborn

10.9.3.1. Definition and Mechanism of Action of Hypothermia

10.9.3.2. Inclusion and Exclusion Criteria for Treatment

10.9.3.3. Treatment Phases and Cooling

10.9.3.4. Limitation of Therapeutic Effort in Newborns with Hypoxic-

Ischemic Encephalopathy

10.10. Legal Termination of Pregnancy

10.10.1. Concept

10.10.2. Legislative Framework

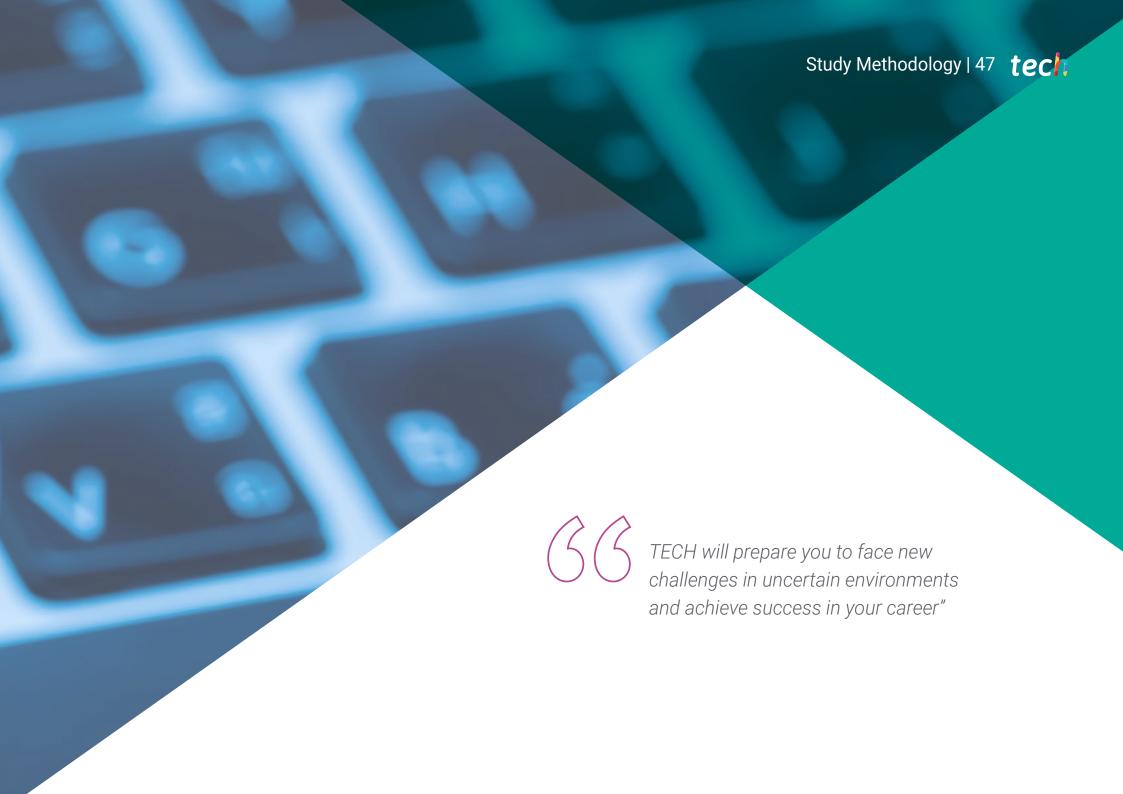
10.10.3. Methods According to Weeks of Gestation

10.10.4. Feticide



A qualification that will give you the guidelines to assist vaginal and cesarean deliveries based on the latest obstetric criteria, to ensure the health of the mother and baby in the first instance"



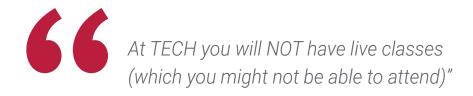


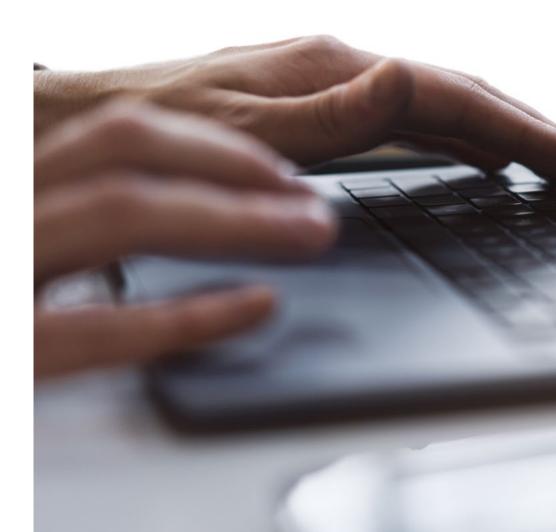
### The student: the priority of all TECH programs

In TECH's study methodology, the student is the main protagonist.

The teaching tools of each program have been selected taking into account the demands of time, availability and academic rigor that, today, not only students demand but also the most competitive positions in the market.

With TECH's asynchronous educational model, it is students who choose the time they dedicate to study, how they decide to establish their routines, and all this from the comfort of the electronic device of their choice. The student will not have to participate in live classes, which in many cases they will not be able to attend. The learning activities will be done when it is convenient for them. They can always decide when and from where they want to study.







### The most comprehensive study plans at the international level

TECH is distinguished by offering the most complete academic itineraries on the university scene. This comprehensiveness is achieved through the creation of syllabi that not only cover the essential knowledge, but also the most recent innovations in each area.

By being constantly up to date, these programs allow students to keep up with market changes and acquire the skills most valued by employers. In this way, those who complete their studies at TECH receive a comprehensive education that provides them with a notable competitive advantage to further their careers.

And what's more, they will be able to do so from any device, pc, tablet or smartphone.



TECH's model is asynchronous, so it allows you to study with your pc, tablet or your smartphone wherever you want, whenever you want and for as long as you want"

### tech 50 | Study Methodology

### Case Studies and Case Method

The case method has been the learning system most used by the world's best business schools. Developed in 1912 so that law students would not only learn the law based on theoretical content, its function was also to present them with real complex situations. In this way, they could make informed decisions and value judgments about how to resolve them. In 1924, Harvard adopted it as a standard teaching method.

With this teaching model, it is students themselves who build their professional competence through strategies such as Learning by Doing or Design Thinking, used by other renowned institutions such as Yale or Stanford.

This action-oriented method will be applied throughout the entire academic itinerary that the student undertakes with TECH. Students will be confronted with multiple real-life situations and will have to integrate knowledge, research, discuss and defend their ideas and decisions. All this with the premise of answering the question of how they would act when facing specific events of complexity in their daily work.



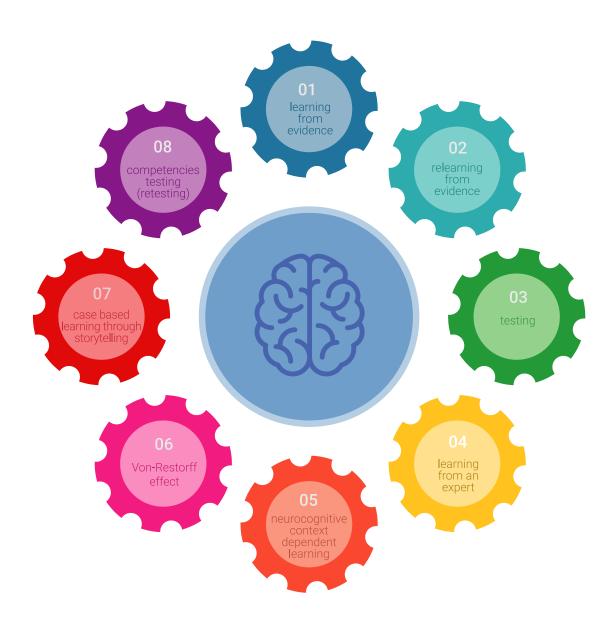
### Relearning Methodology

At TECH, case studies are enhanced with the best 100% online teaching method: Relearning.

This method breaks with traditional teaching techniques to put the student at the center of the equation, providing the best content in different formats. In this way, it manages to review and reiterate the key concepts of each subject and learn to apply them in a real context.

In the same line, and according to multiple scientific researches, reiteration is the best way to learn. For this reason, TECH offers between 8 and 16 repetitions of each key concept within the same lesson, presented in a different way, with the objective of ensuring that the knowledge is completely consolidated during the study process.

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.





### A 100% online Virtual Campus with the best teaching resources

In order to apply its methodology effectively, TECH focuses on providing graduates with teaching materials in different formats: texts, interactive videos, illustrations and knowledge maps, among others. All of them are designed by qualified teachers who focus their work on combining real cases with the resolution of complex situations through simulation, the study of contexts applied to each professional career and learning based on repetition, through audios, presentations, animations, images, etc.

The latest scientific evidence in the field of Neuroscience points to the importance of taking into account the place and context where the content is accessed before starting a new learning process. Being able to adjust these variables in a personalized way helps people to remember and store knowledge in the hippocampus to retain it in the long term. This is a model called Neurocognitive context-dependent e-learning that is consciously applied in this university qualification.

In order to facilitate tutor-student contact as much as possible, you will have a wide range of communication possibilities, both in real time and delayed (internal messaging, telephone answering service, email contact with the technical secretary, chat and videoconferences).

Likewise, this very complete Virtual Campus will allow TECH students to organize their study schedules according to their personal availability or work obligations. In this way, they will have global control of the academic content and teaching tools, based on their fast-paced professional update.



The online study mode of this program will allow you to organize your time and learning pace, adapting it to your schedule"

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

- 1. Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that assess real situations and the application of knowledge.
- 2. Learning is solidly translated into practical skills that allow the student to better integrate into the real world.
- 3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
- 4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.

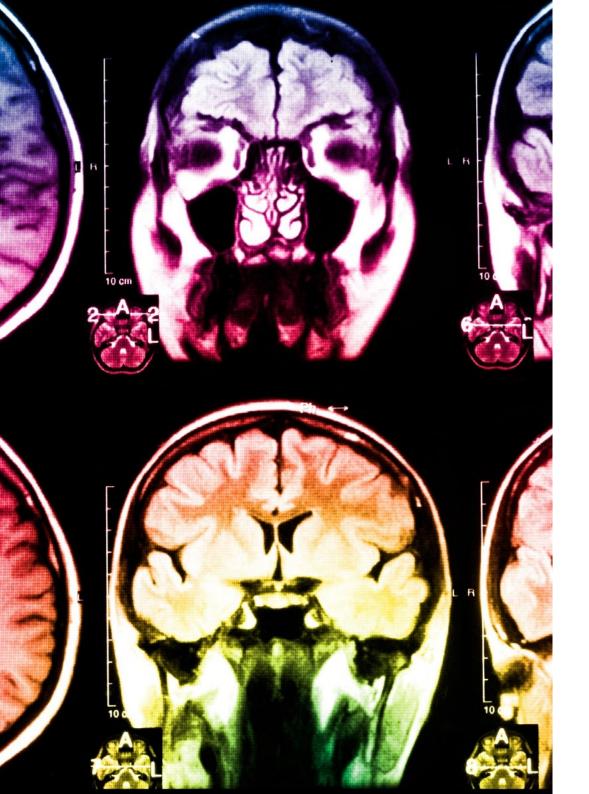


The results of this innovative teaching model can be seen in the overall satisfaction levels of TECH graduates.

The students' assessment of the quality of teaching, quality of materials, course structure and objectives is excellent. Not surprisingly, the institution became the best rated university by its students on the Trustpilot review platform, obtaining a 4.9 out of 5.

Access the study contents from any device with an Internet connection (computer, tablet, smartphone) thanks to the fact that TECH is at the forefront of technology and teaching.

You will be able to learn with the advantages that come with having access to simulated learning environments and the learning by observation approach, that is, Learning from an expert.



### tech 54 | Study Methodology

As such, the best educational materials, thoroughly prepared, will be available in this program:



### **Study Material**

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

This content is then adapted in an audiovisual format that will create our way of working online, with the latest techniques that allow us to offer you high quality in all of the material that we provide you with.



### **Practicing Skills and Abilities**

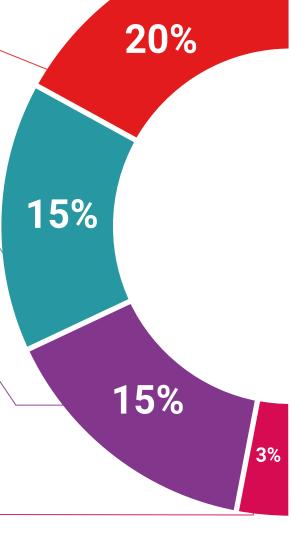
You will carry out activities to develop specific competencies and skills in each thematic field. Exercises and activities to acquire and develop the skills and abilities that a specialist needs to develop within the framework of the globalization we live in.



#### **Interactive Summaries**

We present 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, international guides... In our virtual library you will have access to everything you need to complete your education.

### **Case Studies**

Students will complete a selection of the best case studies in the field. Cases that are presented, analyzed, and supervised by the best specialists in the world.

### **Testing & Retesting**



We periodically assess and re-assess your knowledge throughout the program. We do this on 3 of the 4 levels of Miller's Pyramid.

### **Classes**



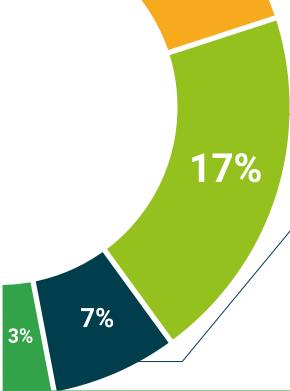
There is scientific evidence suggesting that observing third-party experts can be useful.

Learning from an expert strengthens knowledge and memory, and generates confidence for 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 56 | Diploma

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

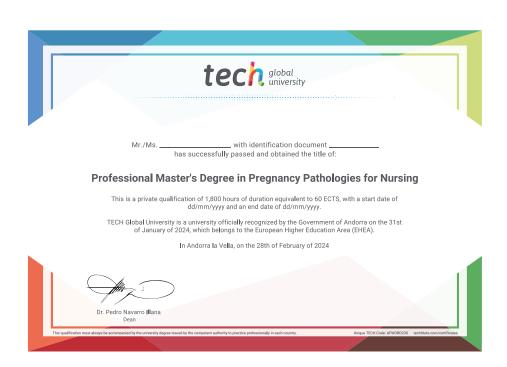
This **TECH Global University** private qualification, is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: Professional Master's Degree in Pregnancy Pathologies 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...

health confidence people education information tutors guarantee accreditation teaching institutions technology learning



## Professional Master's Degree

Pregnancy Pathologies for Nursing

- » 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 Nursing

