



Master's Degree

Oral Medicine

» Modality: online

» Duration: 12 months

» Certificate: TECH Global University

» Credits: 60 ECTS

» Schedule: at your own pace

» Exams: online

Website: www.techtitute.com/us/dentistry/master-degree/master-oral-medicine

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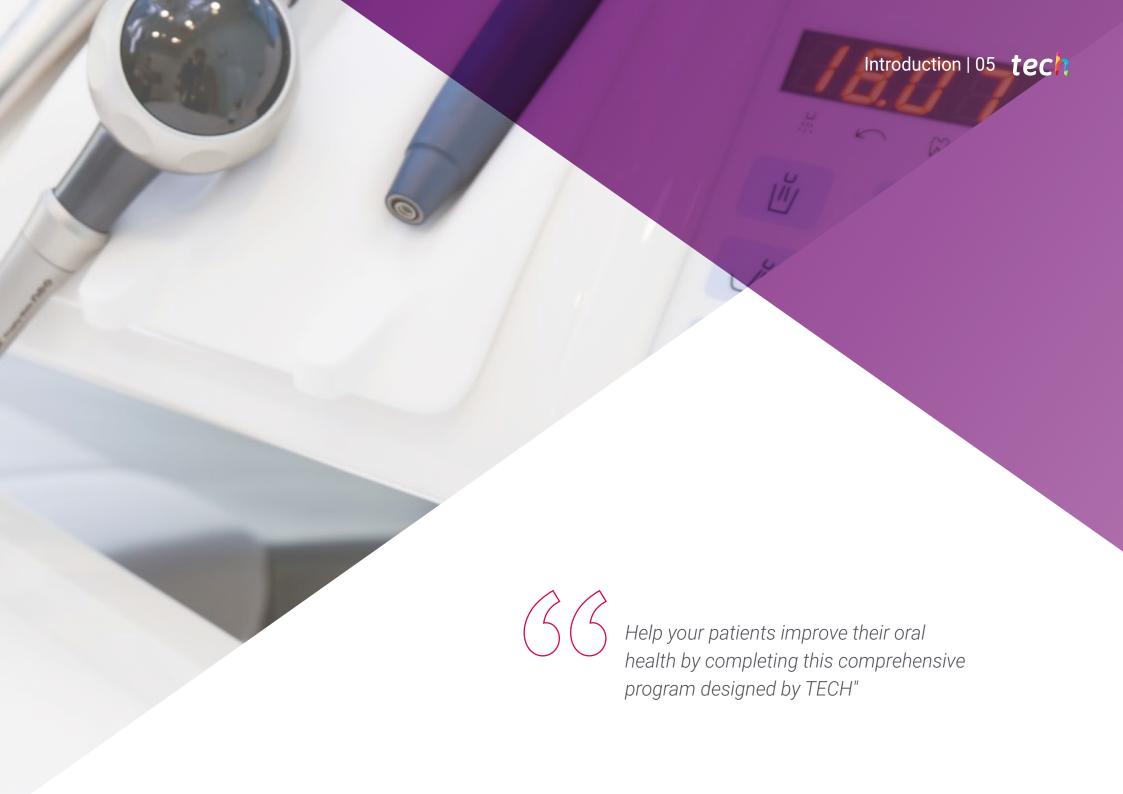
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Oral Medicine enables dentists to diagnose and treat pathologies of the oral cavity and adjacent tissues, thereby expanding the dentist's repertoire of practical applications and ensuring that the patient's entire oral anatomy is examined. Thanks to this TECH academic program, you will be able to expand your knowledge, balancing it with your work life through a methodology that is adapted to the student in a 100% online way and accessible through any device with an Internet connection, which is an innovative advantage over other teaching dynamics.



tech 06 | Introduction

This Master's Degree in Oral Medicine is based on the student acquiring in-depth knowledge of different types of oral cavity and adjoining tissue lesions, both benign and malignant, as well as diagnostic and surgical techniques, correct treatment approaches, professional application and preventive usefulness

It is a very useful branch, since it complements the rest of the specialties, being a fundamental pillar prior to any treatment, avoiding negligence due to the lack of knowledge and making it possible to detect and treat pathologies, which may potentially save a patient's life

This academic program is characterized by its dynamic methodology that intersperses clinical cases for the student to identify and associate the subject matter explained with its corresponding image, as well as questionnaires to evaluate their knowledge and test them, bringing it as close as possible to those situations that will be presented daily in the office, to be able to focus and manage them in a coordinated, efficient and planned way, all under the guidance of working professionals who will help during the learning process to achieve a complete education in all aspects

It is based on promoting lasting and quality learning through schematically structured scientific information, always focusing on the main aspects of each pathology in order to be able to apply it in daily practice immediately after each unit

The dentist will strengthen their personal confidence and decision-making abilities when practising, with special emphasis on diagnostic and preventive aspects, differentiating, according to specific characteristics, the different types of lesions so that their learning is fluid and effective

As it is an online Master's Degree, the student is not hindered by fixed schedules or the need to move to a physical location, but can access the contents at any time of the day, balancing their professional or personal life with their academic life

This **Master's Degree in Oral Medicine** contains the most complete and up to date scientific program on the market. The most important features include:

- More than 75 clinical cases presented by experts in Oral Medicine
- The graphic, schematic and practical contents of the course are designed to provide all the essential information required for professional practice
- Exercises where the self-assessment process can be carried out to improve learning
- Algorithm-based interactive learning system for decision making for the orally impaired patient
- 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



Only with adequate education will you learn the best way to advise your patients in Oral Medicine cases"

Introduction | 07 tech



This Master's Degree is the best investment you can make in the selection of a refresher program for two reasons: in addition to updating your knowledge in Oral Medicine, you will obtain a qualification from TECH Global University"

It includes, in its teaching staff, professionals belonging to the field of Oral Medicine, who contribute their work experience to this program, as well as leading specialists from prestigious societies and 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 training programmed to train in real situations

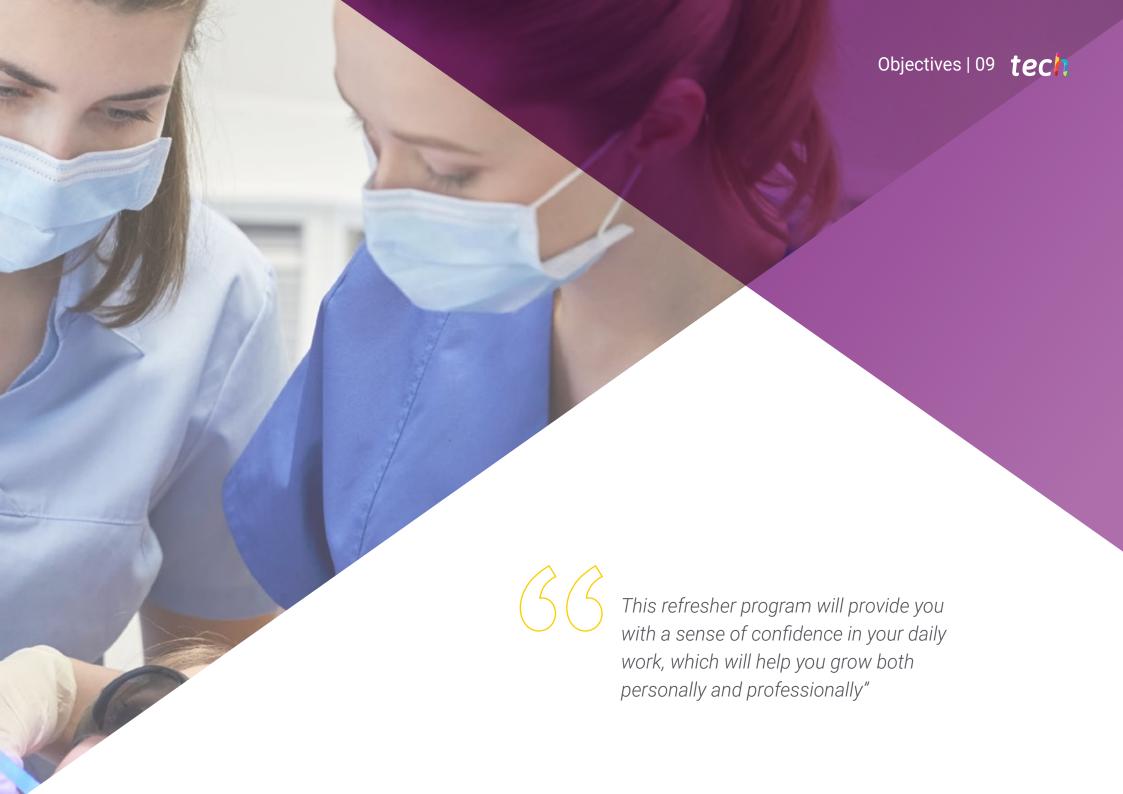
This program is designed around Problem-Based Learning, whereby the professional must try to solve the different professional practice situations that arise throughout the program. To do so, the professional will be assisted by an innovative interactive video system created by renowned and experienced experts in Oral Medicine

This Master's Degree offers training in simulated environments which provides an immersive learning experience designed to train for real-life situations.

This 100% online Master's Degree will allow you to balance your studies with your professional work while increasing your knowledge in this field.







tech 10 | Objectives



General Objectives

- Receive an extensive theoretical update in a comprehensive framework covering injuries, diagnosis, prevention, treatment and rehabilitation
- Encourage problem solving and critical thinking through practical cases applicable to working life, strengthening the professional's confidence when expressing themselves and their autonomy as a healthcare professional
- Support empathy and multidisciplinary treatment, emphasizing that as a professional, one must have a global vision of the patient's state of health in order to avoid possible repercussions secondary to misinformation
- Promote knowledge based on evidence and learn to see beyond dental pathology, expanding its diagnostic protocol, being able to detect serious pathologies earlier, such as oral cancer
- Integrate a technical and theoretical practice in the daily treatment knowing how to approach complex cases related to systemic diseases or adjacent pathologies of the patient, through sessions and clinical cases mediated by quality audiovisual means
- Obtain advanced medical knowledge that will enable you to excel in the healthcare field by correctly interpreting data and tests, through the understanding and application of knowledge that encompasses the patient's health holistically
- Improve public speaking and communication skills so that the receiver of the message, regardless of whether they know the subject matter, can fully understand the professional's explanation, as well as prioritize ethics and a sense of morality when dealing with a case





Specific Objectives

Module 1. Oral Medicine and Diagnostic Methods

- Gain in-depth knowledge of the origins, applications and characteristics of Oral Medicine, as well as the relevant figures in its development
- Establish an optimal relationship between science and oral medicine, applying this knowledge to daily practice
- Explore in-depth the current uses of Oral Medicine in dentistry, as well as the latest advances and techniques
- Promote updating and health research when developing new techniques and means to prevent and cure pathologies
- Learn how to take a complete and detailed clinical history, going through all its phases for both health and legal purposes
- Attain in-depth knowledge of the legal, bioethical and moral implications for dentists, as well as patient duties with respect to the dentist
- Place health care in managerial and administrative framework that allows professionals to better perform in their daily clinical practice
- Apply all the complementary diagnostic tests, as well as the tests, techniques and methods that validate them
- Have the necessary knowledge to adequately search for or produce scientific research articles

Module 2. Applied Anatomopathology and Elementary Lesions

- Specialize in anatomopathology and its branches to be able to apply this knowledge at the clinical level within a scientifically justified theoretical framework
- Perform exhaustive anatomical reviews at the macro and microscopic level
- Gain in-depth knowledge of the various applications of pathological anatomy

- Assess the various methods of specimen studies and various techniques
- Learn and manage biopsy techniques, indications and contraindications, as well as various staining techniques
- Achieve a technical, theoretical and professional update that will allow you to make a difference at the professional level
- Learn to perform schematic classifications of the different types of elementary lesions and their differences

Module 3. Inflammatory and Infectious Oral Pathology

- Recognize and differentiate bacterial, viral and fungal infections, as well as their treatments, evolution and etiology
- Diagnose the different vesicular-ampullary diseases, being , able to break them down according to their etiology and epidermal location
- Gain in-depth knowledge of the sequelae, prognosis and diagnosis of various systemic diseases, as well as their clinical management and oral manifestations
- Reflect on the correlation between different syndromes and pathologies associated with oral mucosa
- Identify and distinguish the different pathologies according to their location
- Learn and handle the necessary terminology and pharmacology to elaborate adequate treatment plans for any of these pathological manifestations
- * Manage prevention, rehabilitation, treatment plans and patient monitoring



Module 4. Special Patients: Relation between Systemic Diseases and Oral Pathologies

- Delve deeper into the different types of systemic diseases through a classification applied to dental skills
- Gain in-depth knowledge of the different systemic alterations, updating knowledge about them for their clinical detection
- Specialize in the various types of medical pathologies that may arise in daily practice in order to avoid sequelae or complications when practicing dentistry
- Know how to manage, prevent and act in case of anaphylactic shock, and learn its main characteristics
- Know in depth the secondary lesions, as well as the treatment to be given to the
 polymedicated patient and their pharmacological interactions with the means of choice
 when treating them (anesthesia, bleeding, etc.)
- Learn to follow an established protocol for dealing with complex cases
- Improve professional communication and anamnesis skills in order to gather vital information for adequate practice
- Learn palliative and quality of life improvement techniques for patients undergoing oncologic treatment

Module 5. Salivary Gland and TMJ Pathology

- Gain an understanding of salivary functions, as well as the temporomandibular joint, its possible organic involvement and the syndromes associated to it
- Perform anatomical reinforcement on salivary glands and the TMJ, emphasizing the importance of adequate exploration methods
- Distinguish the different glandular and TMJ malformations, as well as infectious, tumoral and obstructive pathologies, with their relevant tests
- Obtain a concrete classification of the various specific radiological tests for these areas, as well as their indications, contraindications and adverse effects
- Know what further complementary tests can be used in order to make a firm and comprehensive diagnosis

Module 6. Bone Lesions and Maxillary Cysts

- Learn the classification and characteristics of the different lesions
- Understand the etiology and development of bone lesions, as well as the importance of their diagnosis
- Know how to recognize the different types of epithelial cysts, both odontogenic and nonodontogenic, and their current prevalence
- Gain in-depth knowledge of other fundamental pathologies such as those derived from chemotherapy or radiotherapy (osteoradionecrosis)
- Verify the importance of bisphosphonates and other drugs related to bone aspects and their interaction in clinical performance (osteonecrosis)
- Delve deeper into the prevention, treatment and monitoring necessary to cope with these lesions
- Verify essential patient bedside manner in every instance, as well as patient rights to information and adequate performance of medical interconsultations

Module 7. Benign Tumors

- Specialize in the classification of benign tumors, making a clear distinction between benignity and malignancy
- Delve deeper into the different predisposing factors to such pathologies
- Acquire the ability to act, reflect and be ethical when treating benign lesions
- Select the most effective and appropriate techniques based on scientific learning through review articles and one's own clinical experience
- Gain in-depth knowledge of the different variants that may exist within benign tumors
- Promote and encourage clinical reasoning and speaking skills, as well as communication with other professionals, since these patients may require multidisciplinary treatment
- Distinguish the pharmacological and treatment dynamics in these cases

Module 8. White and Premalignant Lesions

- Explain and classify the different premalignant lesions, as well as the importance of predisposing factors and etiology
- Gain in-depth knowledge of the different concepts and types of premalignant lesions
- * Adequately describe the anatomopathology of a lesion
- Consider the changes and monitoring of a lesion to prevent trauma or malignization as much as possible
- * Specialize in the concept of dysplasia, its degrees and the protocols to be followed
- Encourage a relaxed atmosphere toward patients by communicating in such a way as not to induce panic while making patients aware of their pathology
- Interrelate dentistry with medicine to achieve a multidisciplinary field of action in order to improve patient health
- * Verify what clinical actions can be taken to prevent possible malignization

Module 9. Oral Cancer and Malignant Tumors

- Recognize anatomopathologies and know the diagnostic protocols for oral cancer, as well as its etiology, prevention guidelines, monitoring and oral rehabilitation
- Know how to make a clear distinction between the different types of tumors and the specific monitoring of those that do not follow the normal protocol
- Specialize in disorders related to the lymphatic system and their potential consequences
- Recognize the different surgical techniques and their fundamentals when applying them to malignant lesions
- * Reflect on research updates regarding malignant pathologies
- Know how to interpret the side effects and collateral effects of cancer with respect to dental treatments in order to apply them responsibly and judiciously
- Present updated monitoring of patients, and express empathic and humanitarian work, developing communication skills and expressive delicacy in professionals
- Specialize in patient safety before making any health care decision
- Gain a deep understanding of patients' right to information and professionals' duty to inform

Module 10. Neuropathologies

- Know how to correctly assess pain in patients
- Describe the different types of pain and their clinical manifestation
- Delve deeper into the different neuralgias, as well as their possible initial manifestations and sequelae
- Perform differential diagnoses for paralysis, and know the treatments and potential sequelae they may have
- Establish a pathological index depending on the anatomical points affected
- * Specialize in other neuropathies in addition to the most frequent ones
- * Display correct therapeutic management and reassuring patient bedside manner
- Identify neuralgias related to systemic alterations and their characteristics
- Delve deeper into their treatment, monitoring and clinical management
- Gain a deeper understanding of the techniques and procedures available to cope with neuropathies





After passing the evaluations of the Master's Degree in Oral Medicine, the professional will have acquired the necessary professional competencies for a quality and up to date practice based on the latest scientific evidence.



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General Skills

- Achieve a certain diagnosis through a syllabus based on protocols and organization, which are fundamental for a sound health
- Know the different diagnostic and surgical techniques applicable to oral pathologies
- Perform differential diagnoses, being able to decisively choose diagnostic tests and, therefore, facilitate the process of finding out the etiology and nature of a lesion









Specific Skills

- Know the pathologies of the oral mucosa and adjoining tissues, as well as the correlation of various clinical pictures with the oral cavity
- Develop health reasoning based on learning oriented to daily practice by means of comprehensive didactics
- Extend its scope and experience to regions adjacent to the oral cavity
- Analyze action protocols in oral pathologies, as well as the indications and contraindications of several treatments
- Understand the functions of saliva and the structure systems that make up the TMJ
- Promote the skills in perception, anamnesis, visual and pragmatic dexterity, as well as prudence and caution when prescribing treatments that may interfere with these bone pathologies
- Describe, locate and correctly diagnose oral tumors
- Prevent the malignancy of a lesion through patient awareness
- Gain in-depth knowledge of malignant tumors affecting the oral cavity
- Recognize and differentiate the different variants of pain and be able to classify them according to pathologies and types





International Guest Director

Dr. Pierre Bouletreau is an expert in Maxillofacial, Oral and Facial Plastic Surgery referenced internationally for his high level of research and surgical excellence. His professional career, moreover, has been framed by multiple awards in Europe and in his own country. In particular, this specialist has won the Antonin Poncet and Leibinger awards, as well as the Les Gueules cassées scholarship and national recognition from the Hospital Clinic Program.

Throughout his career, this physician has been linked to leading medical institutions and has been a disciple of true scientific eminences in the field of Oral Surgery. Specifically, he has collaborated with several institutions in Lyon, becoming a member and later Head of Service of the Department of Maxillofacial, Oral and Facial Plastic Surgery of the Lyon Sud Hospital. At the same time, he has carried out clinical training internships at the New York University Medical Center, the Division of Plastic and Reconstructive Surgery at Stanford University and Orthognathic Surgery internships with Dr. G. W. Arnett in Santa Barbara, California.

On the other hand, from the academic point of view, he has maintained a continuous updating of his skills and has developed studies in areas such as Clinical and Economic Analysis of Medical Decisions, Experimental Microsurgical Techniques, Biological and Medical Engineering, among others. From this scientific work, he has collaborated with research projects and is the author of more than 80 articles published in national and international journals. At the same time, he stands out for his assiduous participation in specialized congresses.

Dr. Bouletreau is also a reviewer for publications such as the Journal of Dental Science and Research. He is also a member of the French Society of Maxillofacial, Stomatological and Oral Surgery.



Dr. Bouletreau, Pierre

- Head of Maxillofacial, Oral and Facial Plastic Surgery, Lyon Sud Hospital, Lyon, France
- Assistant Practitioner at the UFR Laënnec
- Doctorate in Medicine from the University Claude Bernard Lyon I
- Research internship at the New York University Medical Center
- Internship at the Institute of Plastic and Reconstructive Surgery at the New York University Medical Center
- Training in the Division of Plastic and Reconstructive Surgery at Stanford University School of Medicine
- Postgraduate Diploma in General Surgery
- University Diploma in Clinical and Economic Analysis of Medical Decisions
- International Reviewer for the Journal of Dental Science and Research
- Member of: French Society of Maxillofacial, Stomatologic and Oral Surgery Association of Facial Surgeons



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

Management



Dr. Sánchez Sánchez, Almudena

- Founding Partner, Medical Director, SMILE FACTORY Clinic, Advanced Dentistry, Since 2014.
- Daily clinical practice of Oral Surgery, Implantology, Oral Medicine, Periodontics and Implantoprosthetics since 2006.
- Degree in Dentistry from the European University of Madrid UEM, 2001-2006
- Master's Degree in Oral Surgery and Implantology, (Hospital Universitario de Madrid) 2010-2013
- Master's Degree in Oral Medicine, UCM, 2006-2007
- Member of the Spanish Society of Oral Medicine (SEMO), 2007-Present
- Member of the Spanish Society of Oral Laser (SELO), 2019.

Professors

Dr. Casañas Gil, Elizabeth

- Professor for the Oral Medicine Master's Degree at Universidad Complutense de Madrid (UCM)
- Dentist Specialist in Prosthodontics
- Dentist specializing in Periodontics and Implantoprosthodontics at Clínica Dental Ortodent
- · General Dentist at Clínica Dental RUTHAL, SAP
- PhD in Dental Sciences from Universidad Complutense de Madrid
- Degree in Restorative Dentistry Based on New Technologies (Universidad Complutense de Madrid)
- Official Master's Degree in Dental Sciences from Universidad Complutense de Madrid

Dr. Concha Jerónimo, Ada

- Oral Surgeon and Implantology, Prosthodontics and esthetics in private clinic, Dental Torrox, Malaga, From 2019
- Develops clinical doctoral thesis, research in Oral Implantology, Chair of Oral Surgery,
 Doctor Pablo Galindo, UGR, Since 2017.
- Master's Degree in Aesthetic Multidisciplinary Dentistry, University of Granada, 2017-2019
- Master's Degree in Dental Sciences, University of Granada, 2017-2018.
- Master's Degree in Oral Surgery and Implant Dentistry, University Hospital of Madrid, 2010-2013
- Degree in Dentistry, European University of Madrid, 2005-2010
- Oral Surgeon, Prosthodontics and Aesthetics, Clínica Fernandez Abarca, Motril, Since 2018
- Clinical Research Applied to Implantology, Faculty of Dentistry, UGR, Since 2017.

Dr. Delás Cotrina, Lola

- General Dentistry, Oral Surgery, Implantology and Endodontics in Delás Dental Clinic in Majadahonda
- Residency with maxillofacial surgeon Adolfo Céspedes at the Dental Clinic of Dr. Lopez Bahillo
- Practicing as a General Dentist at the Dentist without Borders Clinic in Madrid
- Degree in Dentistry from CEU San Pablo University in Madrid
- Oral and Maxillofacial Medicine from CEU San Pablo University in Madrid

Dr. Feijóo Lamas, Simón

- Medical Director at Adeslas Dental Fuenlabrada II, Since 2019
- Degree in Dentistry, Alfonso X El Sabio University, Madrid, 2009-2014.
- Master's Degree in Medical-Surgical Periodontics, CEU Madrid University, 2014-2015.
- Training in X-Ray Apparatus Manager, Alfonso X El Sabio University, Madrid, 2014.
- Periodontist at Clínica Adeslas Dental Fuenlabrada, Since 2016
- Periodontist at Clínica Adeslas Dental Tres Cantos, Since 2016
- Periodontist Surgeon Sanitas Tres Cantos, At the present time

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Dr. Hernánz Martín, Jaime

- Daily Clinical Practice in Implant Dentistry, Periodontics, Oral Surgery and Implant Prosthetics
- Degree in Dentistry at the University of Alfonso X El Sabio
- One year residency for the Master's Degree in Oral Surgery and Implantology at Hospitales de Madrid
- Master's Degree in Implant Surgery, Prosthesis and Periodontics at Alfonso X El Sabio University
- Associate Professor in the Faculty of Dentistry Medicine at Alfonso X El Sabio University
- Professor for the Master's Degree in Implant Surgery, Prosthetics and Peri-implantology at Alfonso X El Sabio University
- Lecturer in courses and webinars at the national and international level
- Co-author of national and international publications

Dr. Jiménez Núñez, Francisco

- General Dentistry, Implantology and Periodontics at Dental BarMar Clinic
- General Dentistry, Pediatric Dentistry and Periodontics at Virgen del Pilar Clinic
- Master's Degree in Oral Surgery and Implantology from the University Hospital of Madrid
- Master's Degree in Dental Sciences from the Complutense University of Madrid
- Degree in Dentistry from the Complutense University of Madrid





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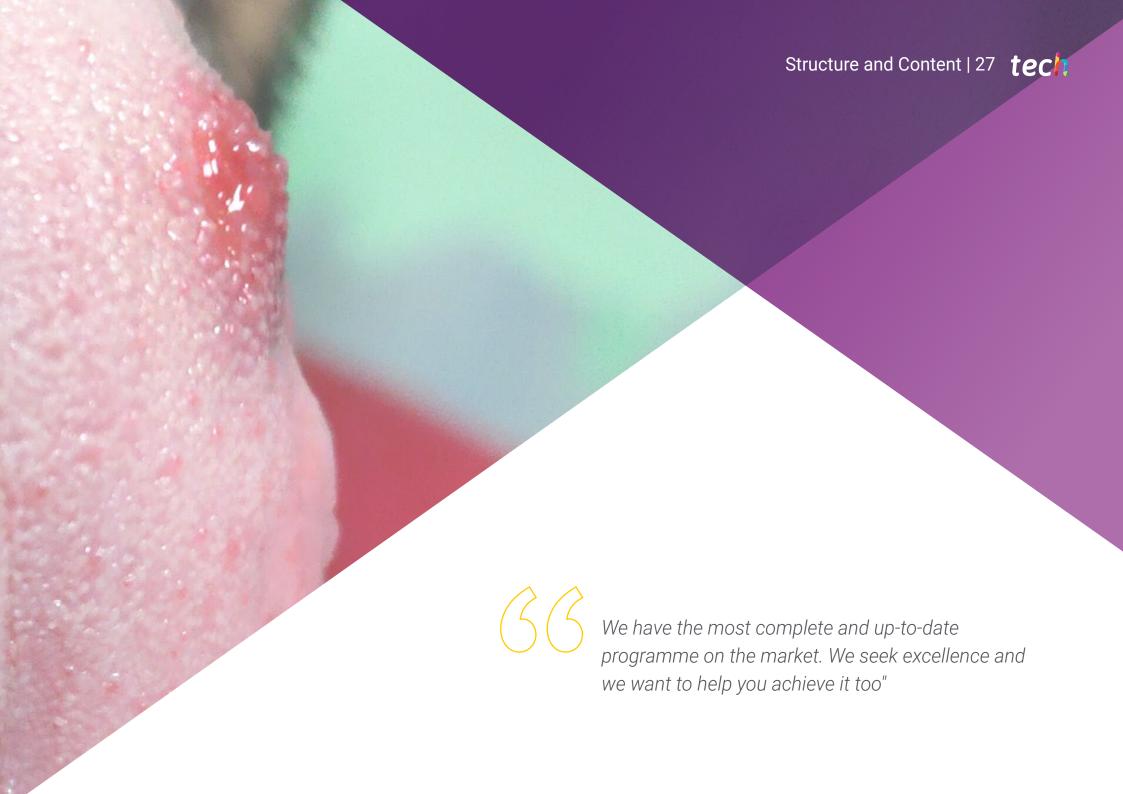
Dr. Lizaur Ajuria, Bárbara

- Implantologist and Implant Prosthetist at Dr. Bárbara Lizaur Dental Clinic, Madrid Since 2015
- Degree in Dentistry from the Complutense University Madrid (2001 2006)
- Master's Degree in Oral Surgery and Implantology, Hospital de Madrid (2009-2012)
- Specialization in Oral Medicine from Complutense University, Madrid (2008-2009)
- Course in Periodontal and Peri-Implant Plastic Surgery at the Complutense University of Madrid (2018-19)
- Collaborating Professor in Master's Degree in Oral Surgery, Periodontics and Implantoprosthetics, IPAO Center (Madrid), Since 2018.
- Implantologist and Implant Prosthetist at Dr. Bárbara Lizaur Uriol (Madrid), Since 2017

Dr. Ortega Gayoso, Guillermo

- General Dentistry and Implantology, Private practice in own practice in Paris, Since 2017.
- Clinical Master's Degree in Implant Prosthetics, Paris Diderot University, Paris, 2015-2017.
- Certificate of higher studies (CES) Prosthetic dentistry with mention in fixed prosthetics, Université Paris Diderot, Paris, 2017.
- Master's Degree in Oral Surgery and Implant Dentistry, University Hospital of Madrid, 2010-2013
- Degree in Dentistry, Universidad CEU San Pablo, Madrid, 2005-2010
- Implantology and Implant Rehabilitation Practitioner in Paris, 2014-2020
- Lecturer in national and international conferences





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Module 1. Oral Medicine and Diagnostic Methods

- 1.1. Pathology and Oral Medicine
 - 1.1.1. In-Depth Oral Medicine
 - 1.1.2. Relevant Figures
 - 1.1.3. Oral Medicine Applied to Health Care Branches
 - 1.1.4. Current Uses of Oral Medicine in Dentistry
 - 1.1.5. Advances and Technology
- 1.2. Medical History
 - 1.2.1. Medical History
 - 1.2.2. Personal and Family History
 - 1.2.3. Exploration
 - 1.2.4. Diagnosis
 - 1.2.5. Treatment Plan
- 1.3. Informed Consent
 - 1.3.1. Origins and Fundamentals
 - 1.3.2. Features
 - 1.3.3. Applicable Exceptions
 - 1.3.4. The Right to Information
 - 1.3.5. The Right to Confidentiality
- 1.4. Legal Implications in Health Care
 - 1.4.1. Origin and Fundamentals
 - 1.4.2. Legal Principles Applied to Health Care
 - 1.4.3. Obligations and Rights of the Professional
 - 1.4.4. Legal Relevance of Medical Records
 - 1.4.5. Relationship between Health and Administrative Management
- 1.5. Complementary Tests
 - 1.5.1. Radiography
 - 1.5.2. Nuclear Magnetic Resonance (NMR)
 - 1.5.3. CT or CBCT
 - 1.5.4. Electromyography
 - 1.5.5. Sialometry
 - 1.5.6. Ultrasound
 - 1.5.7. Analytics



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- 1.5.8. Urinalysis
- 1.5.9. Capillary Glycemia
- 1.5.10. INR
- 1.5.11. Exudates
- 1.5.12. FNA, Biopsy and Cytology
- 1.5.13. Mantoux Test
- 1.5.14. Breath Test
- 1.5.15. Endocrine Tests
- 1.5.16. Pulse Oximetry and Densimetry
- 1.5.17. Photography.
- 1.6. Radiography
 - 1.6.1. Intraoral X-Rays Types
 - 1.6.2. Extraoral X-Rays Projections
- 1.7. Diagnostic Tests in Oral Medicine
 - 1.7.1. Clinical Tests
 - 1.7.2. Patch Test
 - 1.7.3. Diagnostic Imaging
 - 1.7.4. Contrast Diagnostics
 - 1.7.5. Nuclear medicine
 - 1.7.6. Culture Techniques
 - 1.7.7. Immunological and Immunohistochemical Techniques
- 1.8. Biopsy
 - 1.8.1. Fundamentals.
 - 1.8.2. Indications and Applications
 - 1.8.3. Types and Procedures
 - 1.8.4. Most Frequent Errors
 - 1.8.5. Technical Contraindications for Biopsies
 - 1.8.5.1. Materials
 - 1.8.5.2. Incisional
 - 1.8.5.3. Excisional
 - 1.8.5.4. FNA
 - 1.8.5.5. Cytology

- 1.9. Validity of Diagnostic Tests
 - 1.9.1. Sensitivity
 - 1.9.2. Specificity
 - 1.9.3. Safety
 - 1.9.4. Predictive Values
 - 1.9.5. Accuracy
 - 1.9.6. Precision
- 1.10. Research
 - 1.10.1. Observation or Research?
 - 1.10.2. Types of Studies
 - 1.10.3. Systematic Reviews
 - 1.10.4 Meta-analytical Study
 - 1.10.5. Clinical Trials
 - 1.10.6. Publication and Scientific Articles: Criteria

Module 2. Applied Anatomopathology and Elementary Lesions

- 2.1. Pathology Branches
 - 2.1.1. General Pathology
 - 2.1.2. Systemic Pathology
 - 2.1.3. Molecular Pathology
 - 2.1.4. Molecular Biology
 - 2.1.5. Dental and Health Care Applications
- 2.2. Oral Mucosal Histopathology
 - 2.2.1. Anatomy Recap.
 - 2.2.2. Histological Structure
 - 2.2.3. Microscopic Elementary Lesions of the Oral Mucosa
 - 2.2.4. Epithelial Tissue
 - 2.2.4.1. Keratinized
 - 2.2.4.2. Non-Keratinized
 - 2.2.5. Epithelial Cell Junctions
 - 2.2.5.1. Desmosome
 - 2.2.5.2. Hemidesmosomes
 - 2.2.5.3. Others

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2.3.	Pathological Anatomy Fundamentals					
	2.3.1.	Applications				
	2.3.2.	Techniques				
	2.3.3.	Study Method				
		2.3.3.1. Autopsy				
		2.3.3.2. Experimental Method				
2.4.	Functio	onal Classification of Oral Mucosa				
	2.4.1.	External Labial Mucosa				
	2.4.2.	Lining Mucosa				
	2.4.3.	Specialized Mucosa				
2.5.	Elemer	ntary Lesions				
	2.5.1.	Features				
	2.5.2.	Classification				
	2.5.3.	Etiology				
	2.5.4.	Chemical Agents				
		2.5.4.1. Chemical Burns: Substances and Drugs				
		2.5.4.2. Post-Anesthesia Necrosis				
		2.5.4.3. Secondary Drug Lesions				
	2.5.5.	Physical Agents				
		2.5.5.1. Burns				
		2.5.5.1.1. Thermal				
		2.5.5.1.2. Electrical				
	2.5.6.	Mechanical Agents				
		2.5.6.1. Alba Line				
		2.5.6.2. Frictional Hyperkeratosis				
		2.5.6.3. Leukoedema				
		2.5.6.4. Nibbling				
		2.5.6.5. Trauma				
		2.5.6.6. Ulcers				
		2.5.6.6.1. Decubitus				
		2.5.6.6.2. Traumatic				

	2.5./.	Allergic Oral Pathology			
		2.5.7.1. Angioedema			
		2.5.7.2. Allergic Contact Stomatiti			
		2.5.7.3. Anaphylactic Shock			
	2.5.8.	latrogenesis			
2.6.	Solid Content Primary Lesions				
	2.6.1.	Macula			
	2.6.2.	Papule			
	2.6.3.	Nodes			
	2.6.4.	Bleb			
	2.6.5.	Tuber			
	2.6.6.	Rubber			
	2.6.7.	Keratosis			
	2.6.8.	Tumors			
2.7.	Liquid C	Content Primary Lesions			
	2.7.1.	Phylotena			
	2.7.2.	Gall Bladder			
	2.7.3.	Blister			
	2.7.4.	Pustules			
	2.7.5.	Cyst			
2.8.	Secondary Lesions				
	2.8.1.	Continuity Solution			
	2.8.2.	Removable Residue			
	2.8.3.	Restorative Processes			
2.9.	Staining				
	2.9.1.	Oral Mucosa Dyschromia			
	2.9.2.	Exogenous			
	2.9.3.	Endogenous			
2.10.	Other Le	esions			
	2.10.1.	Sclerosis			
	2.10.2.	Ulcers and Erosion			
	2.10.3.	Lichenification			
	2.10.4.	Intertrigo			
	2.10.5.	Infiltration			
	2.10.6.	Ocular Involvement			

Mod	lule 3. li	nflammatory and Infectious Oral Pathology
3.1.	Bacteria	al Infections
	3.1.1.	Features
	3.1.2.	Scarlet Fever
	3.1.3.	Impetigo
	3.1.4.	Angular Cheilitis
	3.1.5.	Telangiectatic Granuloma
	3.1.6.	Cellulite
		3.1.6.1. Acute
		3.1.6.2. Chronic
	3.1.7.	Necrotizing Gingivitis
	3.1.8.	Gonococcal Pharyngitis
	3.1.9.	Syphilis
		3.1.9.1. Primary
		3.1.9.2. Secondary
		3.1.9.3. Tertiary
	3.1.10.	ТВ
	3.1.11.	Leprosy
	3.1.12.	Actinomycosis
	3.1.13.	Gonorrhoea
	3.1.14.	Adenitis
	3.1.15.	Fistulas.
3.2.	Fungal	Infections
	3.2.1.	Etiology
	3.2.2.	Classification
		3.2.2.1. Thrush or Acute Pseudomembranous Candidiasis
		3.2.2.2. Erythematous Candidiasis
		3.2.2.3. Leukoplastic Candidiasis
		3.2.2.4. Erythematous Candidiasis: Erosive Atrophic
		3.2.2.5. Angular Cheilitis
		3.2.2.6. Rhomboid Glossitis
		3.2.2.7. Prosthetic Stomatitis
		3.2.2.8. Deep Mucositis
		3.2.2.9. Blastomycosis

3.3.	Viral Inf	ections
	3.3.1.	Characteristics and Treatment
	3.3.2.	Papillomas
	3.3.3.	Warts
	3.3.4.	Focal Epithelial Hyperplasia
	3.3.5.	Condyloma Acuminatum
	3.3.6.	Oral Condylomatosis
	3.3.7.	HSV Recurrent Herpes Labialis
	3.3.8.	Herpetic Primoinfection, Varicella Zoster and Herpes Zoster
	3.3.9.	Molluscum Contagiosum
	3.3.10.	Coxsackie
	3.3.11.	Herpangina
	3.3.12.	Hand-Foot-Mouth Disease
	3.3.13.	Paramyxovirus
	3.3.14.	Measles
	3.3.15.	CMV Mononucleosis
	3.3.16.	Epstein-Barr
	3.3.17.	Kawasaki Syndrome
3.4.	Benign	Exophytic Lesions
	3.4.1.	Etiology
	3.4.2.	Reactive Hyperplasia
		3.4.2.1. Fibroepithelial Hyperplasia
		3.4.2.2. Diapneusia
		3.4.2.3. Papillary Palatine Hyperplasia
		3.4.2.4. Fissured Granuloma
		3.4.2.5. Fibrous Nodule
		3.4.2.6. Reactive Granulomas
		3.4.2.7. Peripheral Giant Cell Granuloma
	3.4.3.	Salivary Cysts
		3.4.3.1. Caused by Retention
		3.4.3.2. Caused by Extravasation
	3.4.4.	Benign Tumors
		3.4.4.1. Epithelial
		3.4.4.2. Connective

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3.5.	Connec	ctive Tissue Alterations	3.8.	Lingual	Pathology	
	3.5.1.	Sjögren's Syndrome		3.8.1.	Features	
	3.5.2.	Lupus Erythematosus		3.8.2.	Hair Removal	
	3.5.3.	Systemic Sclerosis		3.8.3.	Saburral Tongue	
	3.5.4.	Rheumatoid Arthritis.		3.8.4.	Macroglossia	
	3.5.5.	Connective Tissue Tumors		3.8.5.	Ankyloglossia	
		3.5.5.1. Fibroma		3.8.6.	Median Rhomboidal Glossitis	
		3.5.5.2. Angioma		3.8.7.	Hairy Tongue	
3.6. Maxi	Maxilla	ry and Mandibular Pathology		3.8.8.	Fissured Tongue	
	3.6.1.	Features		3.8.9.	Lingual Varicosities	
	3.6.2.	Agnathia		3.8.10.	Migratory Glossitis	
	3.6.3.	Macrognathia		3.8.11.	Geographic Tongue	
	3.6.4.	Micrognathia		3.8.12.	Cleft Tongue	
	3.6.5.	Cleft Palate		3.8.13.	Forked Tongue	
	3.6.6.	Asymmetries		3.8.14.	Tumours	
	3.6.7.	Treatment		3.8.15.	Motor Disturbances	
3.7.	Labial F	Pathology		3.8.16.	Sensory Alterations	
	3.7.1. Features		3.9.	Blisteri	Blistering-Vesicular Diseases	
	3.7.2.	Fistulas and Labial Pits		3.9.1.	Features and Types	
	3.7.3.	Cleft Lip		3.9.2.	Pemphigus	
	3.7.4.	Morsicatio Buccarum			3.9.2.1. Vulgar	
	3.7.5.	Cheilitis			3.9.2.2. Erythematous	
		3.7.5.1. Cheilitis Simplex			3.9.2.3. Foliaceous	
		3.7.5.2. Actinic Cheilitis			3.9.2.4. Vegetans	
		3.7.5.3. Allergic Contact Cheilitis			3.9.2.5. Paraneoplastic	
		3.7.5.4. Cheilitis Glandularis		3.9.3.	Pemphigoid	
		3.7.5.5. Exfoliative Cheilitis			3.9.3.1. Cicatricial	
		3.7.5.6. Granulomatous Cheilitis			3.9.3.2. Blistered	
		3.7.5.7. Macrocheilitis		3.9.4.	Linear IgA Dermatosis	
	3.7.6.	Peutz-Jeghers Syndrome			3.9.4.1. Infantile	
	3.7.7.	Mucocele			3.9.4.2. Adults	
	3.7.8.	Tumors and Pseudotumors		3.9.5.	Exudative Erythema Multiforme	
					3.9.5.1. Features	

3.9.5.2. Etiology and Predisposing Factors

		3.9.5.3. Sevens-Johnson Syndrome				
		-				
		3.9.5.4. Toxic Epidermal Necrolysis				
		3.9.5.5. Evolution, Prognosis, and Treatmen				
	3.9.6.	Recurrent Aphthous Stomatitis (RAS)				
		3.9.6.1. Features				
		3.9.6.2. Etiology and Predisposing Factors				
		3.9.6.3. Major RAS				
		3.9.6.4. Minor RAS				
		3.9.6.5. Herpetiform Aphthous Stomatitis				
		3.9.6.6. Treatment				
	3.9.7.	Associated Pathology and Syndromes				
		3.9.7.1. Celiac Disease				
		3.9.7.2. Crohn's Disease				
		3.9.7.3. Neutropenia				
		3.9.7.4. Behçet's Disease				
3.10.	Oral Lic	Oral Lichen Planus				
	3.10.1.	Etiology				
	3.10.2.	Classification				
		3.10.2.1. Papular				
		3.10.2.2. Reticular				
		3.10.2.3. Atrophic				
		3.10.2.4. Erosive				
		3.10.2.5. Blistered				
		3.10.2.6. Plague-type				
		3.10.2.7. Others				
	3.10.3.	Diagnosis				
	3.10.4.	Treatment				
		Dermatitis Herpetiformis				
3.11.	Nutritional Alterations					
		Metabolic Alterations				

3.11.1.1. Amyloidosis

3.11.1.3. Fabry Disease

3.11.1.2. Lipoid Proteinosis

3.11.2.	Vit A					
3.11.3.	Vit B2					
3.11.4.	Vit B3					
3.11.5.	Vit C					
3.11.6.	Folic Acid					
3.11.7.	Zinc.					
odule 4. Special Pa						
thologies						

Module 4. Special Patients: Relation between Systemic Diseases and Oral Pathologies

4.1.	Hematologic Alterations	
	4.1.1. Introduction	

4.1.2. Red Series Diseases

4.1.2.1. Anaemia

4.1.2.2. Polyglobulia

4.1.3. White Blood Cell Disorders

4.1.3.1. Transplant Recipients: Before and After

4.1.3.2. HIV

4.1.3.3. Oncology Patients

4.1.3.4. Immunosuppressive Therapy for Autoimmune Pathology

4.1.4. Coagulation Disorders

4.1.4.1. Pharmacological Anticoagulants

4.1.4.2. Haemophilia

4.1.4.3. Secondary to Other Pathologies

4.1.5. Langerhans Cell Histiocytosis

4.2. Endocrine Disorders

4.2.1. Introduction

4.2.2. Glands and Organs

4.2.2.1. Adrenal Gland

4.2.2.2. Pancreas.

4.2.2.3. Kidneys

4.2.2.4. Brain

4.2.2.5. Genital System

4.2.3. Endocrine-Metabolic Pathology

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	4.2.4.	Dialysis				
	4.2.5.	Adrenal Insufficiency				
		4.2.5.1. Primary: Addison's Disease				
		4.2.5.2. Secondary:				
	4.2.6.	Diabetes Mellitus				
		4.2.6.1. Types				
		4.2.6.2. Protocol				
		4.2.6.3. Hemochromatosis or Bronzed Diabetes				
	4.2.7.	Thyroid Pathology				
		4.2.7.1. Hyperthyroidism				
		4.2.7.2. Hypothyroidism				
		4.2.7.3. Tumours				
4.3.	0	ve Alterations				
		Anatomy				
		Crohn's Disease				
		Ulcerative Colitis				
	4.3.4.	Gastroesophageal Reflux				
	4.3.5.	Hepatopathy or Liver Disease				
		Uremic Stomatitis				
	4.3.7.	Related Oral Pathology and Treatment				
	4.3.8.	Prevention				
4.4.	Pulmon	ary Alterations				
	4.4.1.	Anatomy				
	4.4.2.	Types and Diagnostic Tests				
	4.4.3.					
		Wegner Disease				
		Sarcoidosis				
		Related Oral Pathology				
		Action Protocol				
4.5.		ascular Problems				
		Circulatory System				
		Valvulopathies				
		Cardiomyopathies				
	4.5.4.	Pericardiopathies				

	4.5.5.	Aorta Diseases
	4.5.6.	Hypertension
	4.5.7.	Action Protocol
		4.5.7.1. Antibiotic Prophylaxis
		4.5.7.2. Anesthesia
4.6.	Neurolo	ogical Alterations:
	4.6.1.	Nervous system
		4.6.1.1. Central
		4.6.1.2. Peripheral
	4.6.2.	Cerebrovascular Diseases.
	4.6.3.	Cerebrovascular Accidents
		4.6.3.1. Hemorrhagic
		4.6.3.2. Ischemic
	4.6.4.	Epilepsy
		Related Oral Pathology
		Prevention
	4.6.7.	Action Protocol
4.7.	Depend	lent Patients
	4.7.1.	Types
	4.7.2.	Geriatric Patient
	4.7.3.	Addicted Patients
		4.7.3.1. Tobacco
		4.7.3.2. Alcohol
		4.7.3.3. Drugs
		4.7.3.4. Drugs:
		4.7.3.5. Unhealthy Habits
	4.7.4.	Disability
		4.7.4.1. Intellectual
		4.7.4.2. Sensory
		4.7.4.3. Motor
	4.7.5.	Related Oral Pathology
		Prevention
	4.7.7.	Action Protocol

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4.8.	Pregnar	ncy			
	4.8.1.	Definition			
	4.8.2.	Nursing			
	4.8.3.	Related Oral Pathology			
		4.8.3.1. Gingivitis			
		4.8.3.2. Pyogenic Granuloma			
		4.8.3.3. Cavities			
		4.8.3.4. Periodontal Disease			
	4.8.4.	Dental Emergencies			
	4.8.5.	Prevention			
	4.8.6.	Action Protocol			
4.9.	Emerge	ncies			
	4.9.1.	Cognitive Alterations			
	4.9.2.	Respiratory Alterations			
	4.9.3.	Cardiac Alterations			
	4.9.4.	Allergies.			
	4.9.5.	Thoracic or Abdominal Pain			
	4.9.6.	Anaphylactic Shock			
	4.9.7.	Action Protocol			
4.10.	Oncology Patients				
	4.10.1.	Definition			
	4.10.2.	Types of Treatment			
		4.10.2.1. Radiotherapy			
		4.10.2.2. Chemotherapy			
		4.10.2.3. Brachytherapy			
		4.10.2.4. Surgical			
	4.10.3.	Oncologic Treatment Phases			
	4.10.4.	Related Oral Pathology			
	4 10 5	Prevention			

4.10.6. Action Protocol

Module 5. Salivary Gland and TMJ Pathology

5.1.	Saliva	and	Salivary	Gland '	Anatom	y
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- 5.1.1. Composition
- 5.1.2. Functions
- 5.1.3. Saliva Flow Variations
- 5.1.4. Applications and Diagnostic Use
- 5.1.5. Salivary Gland Anatomy Recap
 - 5.1.5.1. Parotid Gland
 - 5.1.5.2. Sublingual Gland
 - 5.1.5.3. Submaxillary Gland
 - 5.1.5.4. Minor or Accessory Salivary Glands

5.2. Salivary Gland Malformations and Pathologies

- 5.2.1. Exploration
- 5.2.2. Fistulas.
- 5.2.3. Stafne Cavity
- 5.2.4. Pathologies and Causes
- 5.2.5. Diagnostic tests
 - 5.2.5.1. Radiological Diagnosis
 - 5.2.5.2. Sialography Uses
 - 5.2.5.3. Gammagraphy Uses
- 5.2.6. Complementary Tests
- 5.2.7. Serologic Test

5.3. Sialadenitis

- 5.3.1. Features
- 5.3.2. Pathologies
 - 5.3.2.1. Bacterial Suppurative
 - 5.3.2.2. Viral
 - 5.3.2.2.1. Epidemic Mumps
 - 5.3.2.2.2. Cytomegalic Mumps

5.3.3. Chronicle

- 5.3.3.1. Bacterial
 - 5.3.3.1.1. Tuberculous
 - 5.3.3.1.2. Actinomycosis
 - 5.3.3.1.3. Syphilitic

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5.3.3.2. Allergic/Toxic

		5.3.3.3. Post Radiotherapy	
		5.3.3.4. Sclerosant	
		5.3.3.5. Recurrent (Juvenile)	
5.4.	Sialolithiasis		
	5.4.1.	Features	
	5.4.2.	Types	
		5.4.2.1. Pathologies	
		5.4.2.2. Chronicle	
	5.4.3.	Mucocele	
	5.4.4.	Garel's Hernia	
	5.4.5.	Salivary Colic	
	5.4.6.	Sialodochitis	
	5.4.7.	Cannula	
	5.4.8.	Treatment	
5.5.	Sialoadenosis		
	5.5.1.	Features	
	5.5.2.	Sarcoidosis	
	5.5.3.	Cystic fibrosis	
	5.5.4.	Sjögren's Syndrome	
5.6.	Tumor Pathology and Other Involvements		
	5.6.1.	Features	
	5.6.2.	Retention Cysts	
	5.6.3.	Tumours	
	5.6.4.	Frey Syndrome	
		Necrotizing Sialometaplasia	
5.7.	,		
	5.7.1.	Bone Anatomy	
	5.7.2.	Muscular Anatomy	
	5.7.3.	Ligaments	
		Buttresses	
	5.7.5.	Disks	

5.8.	TMJ Etiopathogenesis		
	5.8.1.	Endocrine/Rheumatic Factors	
	5.8.2.	Trauma	
	5.8.3.	Psychosocial Factors	
5.9.	Pathologies. Classification		
	5.9.1.	Congenital and Developmental Disorders	
	5.9.2.	Condylar Pathology	
	5.9.3.	Masticatory Muscle Disorders	
	5.9.4.	Bone Pathology	
		5.9.4.1. Ankylosis	
		5.9.4.2. Arthritis	
	5.9.5.	Tumorous Pathology	
5.10.	Exploration and Treatment		
	5.10.1.	Clinical Examination	
	5.10.2.	Diagnostic tests	
		5.10.2.1. Ultrasound	
		5.10.2.2. Arthroscopy	
		5.10.2.3. Resonance	
		5.10.2.4. CAT	
		5.10.2.5. Open Mouth/Closed Mouth X-ray	
		5.10.2.6. Osteoprotegerin (OPG)	
	5.10.3.	Treatment	
		5.10.3.1. Unloading Splint	
		5.10.3.2. Occlusal Adjustment	
		5.10.3.2.1. Selective Grinding	
		5.10.3.2.2. Orthodontics	
		5.10.3.3. Pharmacological	
		5.10.3.4. Botulinum toxin	
		5.10.3.5. Physiotherapy	
		5.10.3.6. Surgical	

Module 6. Bone Lesions and Maxillary Cysts

- 6.1. General Information on Bone Tissue
 - 6.1.1. Bone Tissue and Histology
 - 6.1.2. Transformation and Remodeling
 - 6.1.2.1. Systemic Factors
 - 6.1.2.2. Local Factors
 - 6.1.3. Concepts and Terminology
 - 6.1.3.1. Hyperplasia
 - 6.1.3.2. Dysplasia
 - 6.1.3.3. Neoplasia
- 6.2. Etiopathogenesis and Classification
 - 6.2.1. Classification
 - 6.2.2. Predisposing Factors
 - 6.2.3. Etiology
 - 6.2.4. Diagnostic Tests
- 6.3. Bone Pathology
 - 6.3.1. Osteoporosis
 - 6.3.2 Osteomalacia
 - 6.3.3 Osteoclerosis
 - 6.3.4. Fibrous Dysplasia
 - 6.3.5. Parathyroid Osteosis
 - 6.3.6. Lymphomas
 - 6.3.7. Myelomas
- 6.4. Maxillary Bone Infections
 - 6.4.1. Periodontitis
 - 6.4.2. Cellulite
 - 6.4.2.1. Pathologies
 - 6.4.2.2. Chronic
 - 6.4.3. Fistulae.
 - 6.4.3.1. Acquired
 - 6.4.3.2. Chronic
 - 6.4.4. Osteitis
 - 6.4.5. Osteomyelitis
 - 6.4.6. Osteoperiostitis

- 6.5. Other Bone Pathologies
 - 6.5.1 Osteogenesis Imperfecta
 - 6.5.2. Osteonecrosis
 - 6.5.3. Osteoradionecrosis
 - 6.5.4. Bisphosphonates
 - 6.5.4.1. Features
 - 6.5.4.2. Clinical Management
- 6.6. Developmental Epithelial Odontogenic Cysts
 - 6.6.1. Infant Gingival Cyst or Epstein Pearls
 - 6.6.2. Primordial Cyst
 - 6.6.3. Dentigerous or Follicular Cysts
 - 6.6.4. Eruption Cyst
 - 6.6.5. Lateral Periodontal Cyst
 - 6.6.6. Adult Gingival Cyst
 - 6.6.7. Glandular Odontogenic Cyst
 - 6.6.8. Odontogenic Keratocyst
- 6.7. Non-Odontogenic Developmental Epithelial Cysts
 - 6.7.1. Nasopalatine Duct Cyst
 - 6.7.2. Nasolabial Cyst
 - 6.7.3. Globulomaxillary Cyst
 - 6.7.4. Median Alverolary, Palatine and Mandibular Cysts
 - 6.7.5. Differential Diagnosis
- 6.8. Inflammatory Epithelial Cysts
 - 6.8.1. Radicular Cyst
 - 6.8.1.1. Apical and Lateral Cyst
 - 6.8.1.2. Residual Cyst
 - 6.8.2. Paradental Cyst
 - 6.8.3. Differential Diagnosis
- 6.9. Non-Neoplastic Bone Lesions or Pseudocysts
 - 6.9.1. Solitary Bone Cyst
 - 6.9.2. Aneurysmal Bone Cyst
 - 6.9.3. Differential Diagnosis

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6.10.	Osteofibrous Diseases			
	6.10.1.	Maxillary Fibrous Dysplasia		
	6.10.2.	Cemento-Osseous Dysplasias		
		6.10.2.1. Periapical Cemento-Osseous Dysplasia		
		6.10.2.2. Florid Cemento-Osseous Dysplasia		
	6.10.3.	Cherubism		
	6.10.4.	Giant Cell Central Granuloma		
	6.10.5.	Albright Syndrome		
	6.10.6.	Paget's Disease		
	6.10.7.	Caffey's Disease		
	6.10.8.	Histiocytosis X		
	6.10.9.	Syndrome Syndrome		
	6.10.10	. Osteogenic Neoplasms		
Mod	ule 7. E	Benign Tumors		
7.1.	Etiopathogenesis and Classification			
		Histology		
	7.1.2.	Classification		
	7.1.3.	Predisposing Factors		
	7.1.4.	Etiology		
7.2.	Connec	tive Tissue and Muscular Tumors		
	7.2.1.	Features		
	7.2.2.	Fibroma		
	7.2.3.	Myxoma		
	7.2.4.	Xanthoma Verruciformis		
	7.2.5.	Nodular Fasciitis		
	7.2.6.	Fibrous Hyperplasia		
	7.2.7.	Tuberosity Bilateral Fibrous Hyperplasia		
	7.2.8.	Fibrous Gingival Epulis		
	7.2.9.	Cracked Epulis		
	7.2.10.	Peripheral Giant Cell Granuloma (PGCG)		
	7.2.11.	Myomas		
	7.2.12.	Rhabdomyomas		
	7.2.13.	Treatment		

	7.3.1.	Features
	7.3.2.	Hemangioma
	7.3.3.	Lymphangioma
	7.3.4.	Hemangioendothelioma
	7.3.5.	Features
	7.3.6.	Hemangiopericytoma
	7.3.7.	Glomus tumour
	7.3.8.	Pyogenic Granuloma
	7.3.9.	Pregnancy Epulis
	7.3.10.	Action Protocol
.4.	Neurog	enic Tumors
	7.4.1.	Features
	7.4.2.	Neuromas
		7.4.2.1. Traumatic
		7.4.2.2. Neurofibromas
		7.4.2.3. Von Recklinghausen Disease
	7.4.3.	Neurofibromas
	7.4.4.	Schwannoma
	7.4.5.	Action Protocol
.5.	Adipos	e Lineage Tumors
	7.5.1.	Features
	7.5.2.	Lipoma
	7.5.3.	Fordyce Granules
	7.5.4.	Superficial Abscesses
	7.5.5.	Differential Diagnosis
	7.5.6.	Treatment
.6.	Osteof	orming Tumors
	7.6.1.	Torus
		7.6.1.1. Mandibular
		7.6.1.2. Palatal
	7.6.2.	Central and Peripheral Osteoma
	7.6.3.	Osteoma Osteoid
	7.6.4.	Osteoblastoma

7.3. Vascular Tumours.

	7.6.5.	Chondroma			
	7.6.6.	Osteochondroma			
	7.6.7.	Condroblastoma			
	7.6.8.	Ossifying Fibroma			
7.7.	Non-Os	teoforming Tumors			
	7.7.1.	Fibrous Tumors			
		7.7.1.1. Non-Specific Fibroma			
		7.7.1.2. Chondromyxoid Fibroma			
		7.7.1.3. Desmoplastic Fibroma			
	7.7.2.	Giant Cell Tumor			
		7.7.2.1. PGCG			
		7.7.2.2. Giant Cell Tumor			
7.8.	Ectomesenchymal with or without Odontogenic Epithelium Inclusion				
	7.8.1.	Odontogenic Fibroma			
	7.8.2.	Myxoma			
	7.8.3.	Benign Cementoblastoma			
	7.8.4.	Cemento-Ossifying Fibroma			
7.9.	Benign Odontogenic Tumors of Odontogenic Epithelium without Odontogenic Ectomesenchyma				
	7.9.1.	Ameloblastomas			
	7.9.2.	Calcifying Odontogenic Tumor or Pindborg's Tumor			
	7.9.3.	Adenomatoid Squamous			
	7.9.4.	Adenomatoid OT			
	7.9.5.	Keratocystic OT			
7.10.	Benign Odontogenic Tumors of Odontogenic Epithelium without Odontogenic Ectomesenchyma				
	7.10.1.	Ameloblastic Fibroma			
	7.10.2.	Ameloblastic Fibrodentinoma (Dentinoma)			
	7.10.3.	Odontoameloblastoma			
	7.10.4.	Adenomatoid Odontogenic Tumor			
	7.10.5.	Calcifying Odontogenic Tumor			
	7.10.6.	Complex and Composite Odontoma			
	7.10.7.	Calcifying Cystic Odontogenic Tumor or Gorlin's Cyst			

7.7.

Module 8. White and Premalignant Lesions				
3.1.	White Lesions			
	8.1.1.	Classification		
		8.1.1.1. Hereditary Disorders		
		8.1.1.2. Reactive Lesions		
		8.1.1.3. Immunological Basis		
		8.1.1.4. Infectious Origin		
		8.1.1.5. Miscellaneous		
	8.1.2.	Clinical Management		
3.2.	Premal	lignant Lesions		
	8.2.1.	Concept of Premalignant Lesion		
	8.2.2.	Histological Level		
	8.2.3.	Classification		
	8.2.4.	Predisposing Factors to Malignancy		
	8.2.5.	Clinical Management		
3.3.	Leukoplakia			
	8.3.1.	Features		
	8.3.2.	Predisposing Factors		
	8.3.3.	Etiology		
	8.3.4.	Localization		
	8.3.5.	Types		
		8.3.5.1. Homogeneous		
		8.3.5.2. Non-Homogeneous		
		8.3.5.2.1. Erythroleukoplakia		
		8.3.5.2.2. Nodular		
		8.3.5.2.3. Exophytic		
		8.3.5.2.3.1. Verrucose		
		8.3.5.2.3.2. Proliferative Verrucosa		
	8.3.6.	Pathologic Anatomy/Pathogenesis		
		8.3.6.1. Stages		
		8.3.6.2. Dysplasia		
	8.3.7.	Diagnosis		
	8.3.8.	Treatment		

8.3.9. Prognosis

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8.4.	Erythroplakia.				
	8.4.1.	Features			
	8.4.2.	Predisposing Factors			
	8.4.3.	Etiology			
	8.4.4.	Localisation			
	8.4.5.	Types			
		8.4.5.1. Homogeneous			
		8.4.5.2. Non-Homogeneous			
		8.4.5.3. Erythroleukoplakia			
	8.4.6.	Diagnosis			
	8.4.7.	Treatment			
	8.4.8.	Prognosis			
8.5.	Actinic Cheilitis.				
	8.5.1.	Features			
	8.5.2.	Predisposing Factors			
	8.5.3.	Etiology			
	8.5.4.	Treatment			
	8.5.5.	Prognosis			
8.6.	Melanic Alterations				
	8.6.1.	Features			
	8.6.2.	Etiology			
	8.6.3.	Diagnosis			
	8.6.4.	Nevi			
	8.6.5.	Pigmentary Nevus			
		8.6.5.1. Lentigo.			
		8.6.5.2. Melanocytic Nevus			
		8.6.5.3. Acquired Melanocytic Nevus			
		8.6.5.3.1. Junctional or Union Nevus			
		8.6.5.3.2. Composite Nevus			
		8.6.5.3.3. Intradermal Nevus			

	8.6.6.	Organoid Nevus	
		8.6.6.1. Epithelial	
		8.6.6.2. Conjunctive	
		8.6.6.3. Vascular	
	8.6.7.	Prevention	
	8.6.8.	Treatment	
8.7.	Submud	cosal Oral Fibrosis	
	8.7.1.	Features	
	8.7.2.	Predisposing Factors	
	8.7.3.	Etiology	
	8.7.4.	Treatment	
8.8.	Xeroderma Pigmentosum		
	8.8.1.	Features	
	8.8.2.	Predisposing Factors	
	8.8.3.	Etiology	
	8.8.4.	Treatment	
8.9.	Plumme	er Vinson Disease	
	8.9.1.	Features	
	8.9.2.	Predisposing Factors	
	8.9.3.	Etiology	
	8.9.4.	Treatment	
8.10.	Dyskeratosis Congenita		
	8.10.1.	Features	
	8.10.2.	Predisposing Factors	
	8.10.3.	Etiology	
	8.10.4.	Treatment	
8.11.	Epidermolysis Bullosa		
	8.11.1.	Features	
	8.11.2.	Predisposing Factors	
	8.11.3.	Etiology	
	8.11.4.	Treatment	

Module 9. Oral Cancer and Malignant Tumors

- 9.1. Etiopathogenesis and Classification
 - 9.1.1. Histology
 - 9.1.2. Classification
 - 9.1.3. Predisposing Factors
 - 9.1.4. Etiology
 - 9.1.5. Prevalence
- 9.2. Malignant Odontogenic Tumors: Odontogenic Carcinomas
 - 9.2.1. Malignant Ameloblastoma
 - 9.2.2. Primary Intraosseous Carcinoma
 - 9.2.3. Sclerosing Odontogenic Carcinoma
 - 9.2.4. OC Clear Cells
 - 9.2.5. OC Ghost Cell OC
 - 9.2.6. Odontogenic Cysts Presenting Malignant Changes
- 9.3. Malignant Odontogenic Tumors: Odontogenic Sarcoma
 - 9.3.1. Ameloblastic Fibrosarcoma
 - 9.3.2. Ameloblastic Fibrodentinosarcoma and Ameloblastic Fibro-Odontosarcoma9.3.2.1. Odontogenic Carcinosarcoma
- 9.4. Squamous Cell Oral Carcinoma
 - 9.4.1. Features
 - 9.4.2. Etiology
 - 9.4.3. Histology
 - 9.4.4. Diagnosis
 - 9.4.5. Prevention
 - 9.4.6. Treatment
 - 9.4.7. Prognosis
 - 9.4.8. Evolution
- 9.5. Verrucous Carcinoma
 - 9.5.1. Features
 - 9.5.2. Etiology
 - 9.5.3. Diagnosis
 - 9.5.4. Prevention

- 9.5.5. Treatment
- 9.5.6. Prognosis
- 9.5.7. Evolution
- 9.6. Adenocarcinoma
 - 9.6.1. Features
 - 9.6.2. Etiology
 - 9.6.3. Diagnosis
 - 9.6.4. Classification and Types
 - 9.6.5. Prevention
 - 9.6.6. Treatment
 - 9.6.7. Prognosis
 - 9.6.8. Evolution
- 9.7. Oral Melanoma
 - 9.7.1. Features
 - 9.7.2. Classification
 - 9.7.3. Etiology
 - 9.7.4. Diagnosis
 - 9.7.5. Prevention
 - 9.7.6. Treatment
 - 9.7.7. Prognosis
 - 9.7.8. Evolution
- 9.8. Lymphatic Disorders
 - 9.8.1. Features
 - 9.8.2. Etiology
 - 9.8.3. Diagnosis
 - 9.8.4. Classification and Types
 - 9.8.5. Prevention
 - 9.8.6. Treatment
 - 9.8.7. Prognosis
 - 9.8.8. Evolution

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9.9.	Sarcom	as	10.4	Neuralg	nia
	9.9.1.	Features		_	Definition
	9.9.2.	Etiology		10.4.2.	
	9.9.3.	Diagnosis			Classification
	9.9.4.	Classification and Types			Cranial Nerves
	9.9.5.	Prevention			Spinal Nerves
	9.9.6.	Treatment			Diagnosis
	9.9.7.	Prognosis			Treatment
	9.9.8.	Evolution			Others
		alivary Gland Neoplasms			10.4.8.1. Facial Hemiatroph
5.10.		Features			10.4.8.2. Minor Neuralgia
		Etiology			10.4.8.3. Fibromyalgia
		Diagnosis			10.4.8.4. Myofascial Pain
		Prevention	10.5	Trigemi	nal Neuralgia
		Treatment	10.0.	_	Features
		Prognosis		10.5.2.	
		Evolution			Predisposing Factors
	3.10.7.	Evolution			Etiology
Mod	ule 10.	Neuropathologies			Diagnosis
10.1.	Feature	S			Treatment
10.2.	Origin				Evolution
		Lobes and Involvements	10.6		pharyngeal Neuralgia
	10.2.2.	Function Alterations			Features
	10.2.3.	Predisposing Factors		10.6.2.	
		Etiology			Predisposing Factors
10.3.	Pain	3,			Etiology
	10.3.1.	Nomenclature			Diagnosis
		Nerve Fibers			Treatment
		10.3.2.1. Types			Evolution
		10.3.2.2. Neurotransmitters	10.7		thes and Cephalalgias
	10.3.3.	Pathophysiology of Pain	10.7.		Clinical Classification
		Types of Pain			Pathophysiology
		Treatment		١٥./.۷.	1 attrophysiology

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10.7.3. Migraines. Vascular-Type Algia

10.7.4. Cluster Headache

10.7.5. Other Orofacial Pain

10.7.5.1. Burning Mouth Syndrome

10.7.5.2. Atypical Facial Algia

10.7.5.3. Pterygoides Hamulus Syndrome

10.7.5.4. Pterygoid Process Syndrome

10.7.6. Palliative Techniques for Pain

10.8. Burning Mouth Syndrome

10.8.1. Features

10.8.2. Origin

10.8.3. Predisposing Factors

10.8.4. Etiology

10.8.5. Diagnosis

10.8.6. Treatment

10.8.7. Evolution

10.9. Facial Paralysis

10.9.1. Etiology

10.9.1.1. Pathology

10.9.1.2. Traumatic

10.9.1.3. Congenital

10.9.1.4. Idiopathic

10.9.1.5. latrogenic

10.9.2. Types

10.9.2.1. Central Facial Paralysis

10.9.2.2. Peripheral Facial Paralysis

10.9.3. Treatment

10.9.4. Miscellaneous

10.9.4.1. Guillain-Barré Syndrome

10.9.4.2. Paget's Disease

10.9.4.3. Melkersson-Rosenthal Syndrome

10.9.4.4. Myofascial Syndrome

10.9.4.5. Lupus

10.9.4.6. ALS

10.9.4.7. Diabetic Neuropathy

10.10. Bell's Palsy

10.10.1. Features

10.10.2. Origin

10.10.3. Predisposing Factors

10.10.4. Etiology

10.10.5. Diagnosis

10.10.6. Treatment

10.10.7. Evolution

10.11. Ramsay Hunt Syndrome

10.11.1. Features

10.11.2. Origin

10.11.3. Predisposing Factors

10.11.4. Etiology

10.11.5. Diagnosis

10.11.6. Treatment

10.11.7. Evolution



A unique, key, and decisive training experience to boost your professional development"



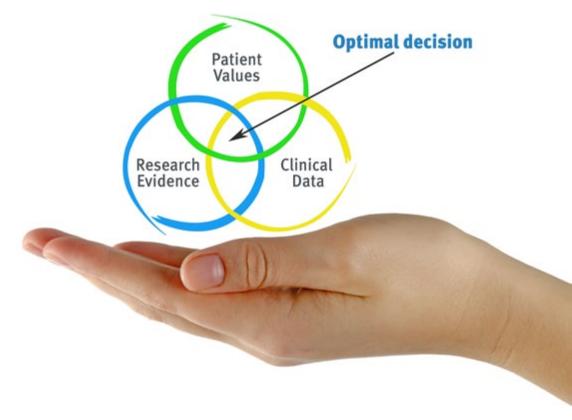


tech 46 | Methodology

At TECH 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. Specialists learn better, faster, and more sustainably over time.

With TECH you will experience a way of learning 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, trying to recreate the real conditions in the dentist's professional 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:

- Dentists who follow this method not only grasp concepts, but also develop their mental capacity by means of exercises to evaluate real situations and apply their 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.





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 the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, a real revolution with respect to the mere study and analysis of cases.

The student will learn through real cases and by solving complex situations in simulated learning environments.

These simulations are developed using state-of-the-art software to facilitate immersive learning.



Methodology | 49 tech

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

With this methodology we have trained more than 115,000 dentists with unprecedented success, in all specialties regardless of the 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 training, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation for 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 highly 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.



Educational Techniques and Procedures on Video

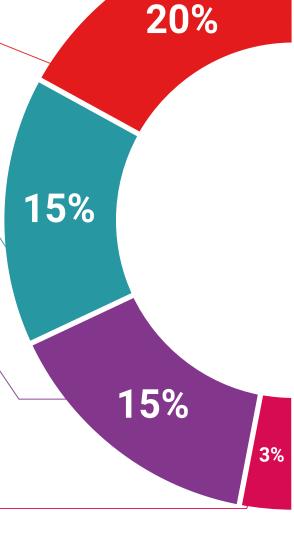
TECH introduces students to the latest techniques, the latest educational advances, and to the forefront of medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many times as you like.



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.

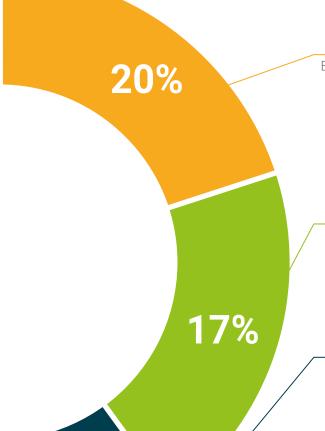
This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".





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.



7%

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.





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 54 | Certificate

This program will allow you to obtain your **Master's Degree diploma in Oral Medicine** endorsed by **TECH Global University**, the world's largest online university.

TECH Global University is an official European University publicly recognized by the Government of Andorra (*official bulletin*). Andorra is part of the European Higher Education Area (EHEA) since 2003. The EHEA is an initiative promoted by the European Union that aims to organize the international training framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of collaborative tools and strengthening its quality assurance mechanisms to enhance collaboration and mobility among students, researchers and academics.

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

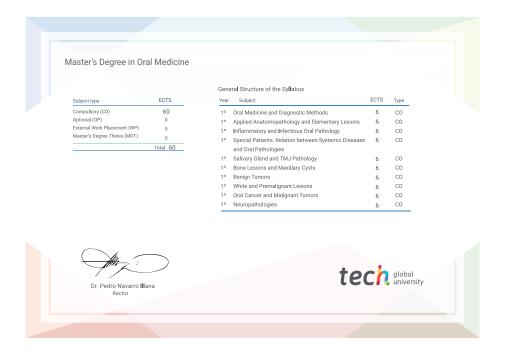
Title: Master's Degree in Oral Medicine

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 will make the necessary arrangements to obtain it, at an additional cost.



Master's Degree

Oral Medicine

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

