Hybrid Professional Master's Degree Urooncology





Hybrid Professional Master's Degree Urooncology

Course Modality: Hybrid (Online + Clinical Internship) Duration: 12 months Certificate: TECH Technological University Teaching Hours: 1,620 h. Website: www.techtitute.com/us/medicine/hybrid-professional-master-degree/hybrid-professional-master-degree-urooncology

Index

01	02	03	04	
Introduction	Why Study this Hybrid Professional Master's Degree?	Objectives	Skills	
	p. 4 p. 8	p	. 12	p. 16
	05	06	07	
	Course Management	Educational Plan	Clinical Internship	
	р. 20	p	. 24	р. 34
	08	09	10	
	Where Can I Do the Clinical Internship?	Methodology	Certificate	
	p. 40	p	. 46	p. 54

01 Introduction

Immunotherapy, the multidisciplinary approach, the use of specific biomarkers, or technologies such as multiparametric magnetic resonance imaging, offer new possibilities for the diagnosis and treatment of malignant tumors in the urological area. Thus, Urooncology has become a leading interdisciplinary health specialty, where advances in intervention techniques are continuous. For this reason, this program has compiled the most innovative content in this regard in a theoretical phase, the assimilation of which will be carried out on the TECH online platform. In addition, the student will be provided with a first level on-site practical training in prestigious health institutions that will receive the student for 3 weeks. A high quality opportunity to be at the forefront of intervention in this field.

GG

This program constitutes a complete, updated and practical compilation of all the advances that scientific and technological research has contributed to the early diagnosis and treatment of urological tumors"

tech 06 | Introduction

Medical specialties have evolved throughout history to the present situation, but in view of their own history we are fully aware that in the future they will undergo further reforms and changes. In the specific field of urology and its oncological treatments, it is enough to review the recent years to realize the immediate future. This discipline now draws on a variety of medical advances as diverse as laparoscopic surgery and other quality surgical techniques. This scientific and technological dynamism has made this medical specialty one of the most innovative of recent times.

For this reason, TECH has developed a program that combines, with excellence, the theoretical subjects and practical skills essential for this academic sector. This learning model consists of two fundamental phases. The first of these addresses, in an interactive and 100% online study platform, the latest content in this area. Particularly, it delves into those surgical techniques that treat the genital and urinary system, taking into account the differences that encompass male and female patients. It also includes all types of surgical procedures such as removal of malignant and benign tumors, removal of large and complex kidney stones, reconstruction of narrowing of the ureter, testicular biopsies, andrological surgeries, among others. Likewise, the student will have the personalized guidance of the best teachers.

In addition, the program includes a 3-week intensive on-site stay at an internationally renowned medical facility. In this practical environment, the professional will learn first-hand the work dynamics of a specialist in Urooncology, providing direct care to real patients, analyzing technical data on their evolution and discussing innovative treatments with professionals with extensive experience. A magnificent opportunity to incorporate the most recent advances in this academic field into daily work practice, with both a theoretical and clinical perspective.

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

- Development of more than 100 clinical cases, presented by specialists in Urooncology and other specialties
- The graphic, schematic and eminently practical contents of the book contain scientific and assistance information on those medical disciplines that are essential for professional practice
- Presentation of practical workshops on procedures and techniques
- Algorithm-based interactive learning system for decision making in clinical situations
- Action protocols and clinical practice guidelines, where to disseminate the most important novelties of the specialty
- With a special emphasis on evidence-based medicine and research methodologies in Radiology
- All this will be complemented with theoretical lessons, questions to the expert, discussion forums on controversial issues and individual reflection work
- Availability of content from any fixed or portable device with an Internet connection
- In addition, you will be able to carry out a clinical internship in one of the best hospitals in the world. hospital centers

You will have access to multiple theoretical contents, updated according to international trends, throughout this innovative Hybrid Professional Master's Degree"

Introduction | 07 tech

You will have, thanks to TECH, 3 weeks of direct training in one of the best clinical centers, which will provide you with a complete immersion in the reality of state-of-the-art urooncological intervention"

In this Hybrid Professional Master's Degree proposal, of a professionalizing nature and blended learning modality, the program is aimed at updating medical professionals who perform their functions in the Urooncology unit, and who require a high level of qualification. The contents are based on the latest scientific evidence and oriented in a didactic way to integrate theoretical knowledge into medical practice. The theoreticalpractical elements allow professionals to update their knowledge and allow them to make decisions more confidently when dealing with patients.

Thanks to their multimedia content developed with the latest educational technology, they will allow the healthcare professional to learn in a contextual and situated learning environment, that is, a simulated environment that will provide immersive learning 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. For this purpose, the student will be assisted by an innovative interactive video system created by renowned experts.

Multidisciplinary, immersive and highly intensive, this Hybrid Professional Master's Degree will give you the opportunity to put into practice everything you have studied, putting your learning into practice in a real and direct way.

Update your knowledge through this Hybrid Professional Master's Degree studying the theoretical part in a comfortable way and adapted to your needs, with the best methodology of the online teaching market.

02 Why Study this Hybrid Professional Master's Degree?

This Hybrid Professional Master's Degree is of vital importance for all those specialists who wish to update their knowledge in Urooncology. Through this innovative program, devised by TECH, students will master the most prestigious care trends and surgical techniques of today. In addition, this program offers a practical and on-site stay, the only one of its kind in the educational market due to its international scope, which enables students to quickly and flexibly assimilate the technological tools that are essential for this professional field.

Why Study this Hybrid Professional | 09 **tech** Master's Degree?

Urooncologic surgery has become a specialty for medical units fighting cancer. This program is ideal for you to master all its international standards"

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

1.Upgrade from the latest technology available

Medical technologies are constantly evolving to fight cancer more effectively. The field of Urooncology is no exception and, in addition, this discipline is committed to the use of minimally invasive surgical instruments, whose sophisticated tools require highly qualified professionals. This theoretical and practical knowledge will provide students with competitive and demanding employment opportunities where they will stand out for their competitive skills.

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

Throughout as this Hybrid Professional Master's Degree in, Communication Management will have a team of excellent teachers who will provide them with personalized guidance at all times.

These professors have chosen the contents of the syllabus based on their daily practical experiences, thus providing the program with an in-depth analysis of the most common problems of daily work practice.

3. Entering First-Class Clinical Environments

In a second stage of this program, TECH has foreseen the needs of its students in terms of the handling of the most complex technological tools in the healthcare field from Urolooncology. For this reason, it has planned a practical on-site stay where students will work side by side with leading experts in this professional field and in hospital facilities of international scope.



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

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

At the academic level, few programs of study manage to unify the theoretical field with practical activity with greater excellence than TECH. From its Hybrid Professional Master's Degree model, students achieve a holistic mastery of the trends and techniques embodied in its educational content. They also have 3 weeks of classroom activity in a prestigious center to apply everything they have learned in the productive dynamics.

5. Expanding the Boundaries of Knowledge

This Hybrid Professional Master's Degree aims to enable all students to broaden their professional horizons from an international perspective. This is possible thanks to the breadth of contacts and collaborators within reach of TECH, the world's largest digital university. In this way, students will have the opportunity to interact with experts from different latitudes and become familiar with global standards related to Urooncology.

66 You will have full hands-on immersion at the center of your choice"

03 **Objectives**

Urooncology is a highly demanded area of the medical field, but it requires constant updating due to the continuous advances being made in it. Based on this issue, TECH and its team of experts in the clinical field have developed this comprehensive program with the aim of providing the graduate with all the information they need to get up to date on the latest and most effective diagnostic, prevention and treatment strategies.

Whatever your objectives are, with this program you will work to achieve them through the best theoretical syllabus and the most dynamic and intensive practical experience"

tech 14 | Objectives



General Objective

 This Hybrid Professional Master's Degree in Urooncology has been launched by TECH with the aim of enabling medical professionals in this field to deepen their clinical developments, increasing the quality and safety of their medical practice. In addition, they will be able to acquire a global vision of the specialty, beyond their field of action, as well as a perfect handling of the necessary tools to be able to lead multidisciplinary groups in the healthcare environment

66 w int

With this comprehensive and innovative program, you will implement in your practice the advances in the diagnosis, treatment and follow-up of prostate cancer".



Objectives | 15 tech



Specific Objectives

Module 1. Update on Oncological Principles, Functional Sequelae and Supportive Treatment of Patients with Urologic Tumors

- Use from the different tumor markers and their diagnostic implication in Urooncology
- Identify the different paraneoplastic syndromes related to urologic oncologic pathology
- Apply the basic principles of tumor genetics in urologic oncology
- Manage the main oncologic emergencies in Urology
- Apply the principles of oncologic surgery in Urology
- Debate the relationship and importance of the clinical trial in the urological oncology patient
- Treat the functional genitourinary sequelae of oncological treatments in Urology: andrological and reconstructive surgery
- Apply Nuclear Medicine and Molecular Imaging in oncological tumor pathology

Module 2. Advances in the Diagnosis, Treatment and Monitoring of Non-Muscle Invasive Bladder Carcinoma

- Recognize the different types of histopathological changes in urothelial carcinoma
- Adequately stratify patients by risk groups with urologic cancer
- Apply the indications and radical therapeutic options in non-muscle invasive bladder tumor
- Make the correct use of the new diagnostic tools available

Module 3. Advances in the Diagnosis, Treatment and Monitoring of Muscle Invasive Bladder Carcinoma

- Correct application of the different therapeutic options depending on the tumor stage
- Proper use of the methods for correct staging of urothelial tumor

Module 4. Advances in the Diagnosis, Treatment and Monitoring of Testicular Cancer

- Apply molecular biology techniques to cancer in Uro-Oncology and specifically to the different urological tumors
- To perform an adequate follow-up of the patients and to know the options for systemic and surgical systemic and surgical salvage treatment options for retroperitoneal recurrence and residual retroperitoneal mass

Module 5. Advances in the Diagnosis, Treatment, and Monitoring of Penile Cancer

- Recognize tumor histology, as well as premalignant lesions
- Apply treatment of nodal disease

Module 6. Advances in the Diagnosis, Treatment and Monitoring of Renal, Adrenal Gland and Retroperitoneal Carcinoma

- Application of immunotherapy in uro-oncologic pathology
- Apply the diagnostic and therapeutic algorithm for adrenal masses in clinical practice

Module 7. Advances in the Diagnosis, Treatment and Monitoring of Prostate Cancer

- Perform surgery in the different locations of urological cancer
- Perform the application of therapeutic options with curative intent
- · Correct use criteria for Focal Therapy and its different energy sources
- Correct use of new drugs for the treatment of urological cancer in its different locations
- Adequate management of metastatic patients in all its implications

04 **Skills**

After passing the evaluations of the Hybrid Professional Master's Degree in Urooncology, the medical professional will have acquired the professional competencies necessary for quality medical care, and updated based on the latest scientific evidence.

Skills | 17 tech

Designed to turn theoretical study into real-life skills, this program will enable you to learn how to use the latest diagnostic and treatment tools for such prevalent cancers as prostate carcinoma"

tech 18 | Skills



General Skills

- Apply acquired knowledge and problem-solving skills in new or unfamiliar environments within broader (or multidisciplinary) contexts related to the field of study
- Integrate knowledge and face the complexity of making judgments based on incomplete or limited information, including reflections on the social and ethical responsibilities related to the application of their knowledge and judgments
- Communicate their conclusions and the ultimate knowledge and rationale behind them to specialized and non-specialized audiences in a clear and unambiguous manner
- Acquire the learning skills that will enable them to continue studying in a way that will be largely self-directed or in a way that will be largely self-directed or autonomous
- Develop the profession with respect for other health professionals, acquiring teamwork skills, as well as the capacity for critical analysis and research in the field of their profession
- Recognize the need to maintain your professional skills and keep them up to date, with special emphasis on autonomous and continuous learning of new information



Skills | 19 tech

Specific Skills

- Complete knowledge with some non-systematizable techniques and broaden the vision of Interventional Radiology with new horizons based on new biomaterials, techniques, post-processing and biomarkers in medical imaging
- Master the management models, indicators, development of strategic plans and organization in Interventional Radiology
- Manage local anesthetic, pain management and sedation and anesthetic block techniques with ultrasound
- Incorporate the protocols for medical management in diseases commonly managed in Interventional Radiology and Diagnostic Radiology
- Manage the architectural and technical requirements required for the implementation of an image-guided therapy service or section
- Use rigorously, safely and confidently the diagnostic aids characterized by complex technology
- Establish an effective therapeutic relationship with patients and families.
- Manage scientific databases for carrying out reviews and bibliographic searches of scientific studies
- Formulate, implement and evaluate standards, action guidelines and protocols specific to the practice of medicine
- Conduct a critical and in-depth study on a topic of scientific interest in the field of Urooncology
- Communicate result findings after having analyzed, evaluated, and synthesized the data
- Manage healthcare resources with efficiency and quality criteria

05 Course Management

The creation of the theoretical materials has been carried out by a team of professionals of reference in Uro-Oncology, who perform their professional activity in the main hospital centers and the most important intensive care units in the country, transferring to the program the experience gained in their jobs throughout their careers.

Take advantage of the knowledge of the best and most prestigious experts in Uro-Oncology, with a practical vision of the most recent diagnostic advances and treatments in the area"

International Guest Director

Kai Tsao, M.D., is the Medical Director of the Ruttenberg Treatment Center at the Tisch Cancer Institute at Mount Sinai Hospital. His mission in this position is to lead the multidisciplinary treatment center to provide the highest quality of patient-centered care to those affected by Cancer and blood disorders.

He is an Associate Professor of Medicine, Hematology and Medical Oncology at the Icahn School of Medicine at Mount Sinai and is on the staff of the Tisch Cancer Institute at Mount Sinai Hospital and the Mount Sinai Queens Infusion Center.

Dr. Tsao is board certified in Internal Medicine, Hematology and Medical Oncology. He is actively involved in research on the development of new therapies in the treatment of genitourinary cancers. He has received several merit awards from the American Society of Clinical Oncology. Its main objective is to define the clinical and molecular phenotype of prostate, kidney and bladder cancers, as well as new therapies in these disease states. He is principal investigator on several ongoing clinical trials and has authored more than 40 peer-reviewed publications.



Dr. Kai Tsao

- Medical Director of the Ruttenberg Treatment Center of the Tisch Cancer Institute at Mount Sinai Hospital
- Principal investigator in several clinical trials
- Participant in research on the development of new therapies for the treatment of genitourinary cancers
- * Lecturer at the Icahn School of Medicine at Mount Sinai
- Author of more than 40 scientific publications
- * Winner of several merit awards from the American Society of Clinical Oncology
- Member of: American Society of Clinical Oncology, American Association of Oncologic Research, American Society of Hematology

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

06 Educational Plan

The syllabus of this Hybrid Professional Master's Degree consists of several academic modules. In them, the student will find a wide range of surgical techniques for the removal and reconstruction of anatomical parts of the urinary system affected by malignant tumors. At the same time, he will delve into the most innovative technologies for the diagnosis of oncological problems in this area of the body and will go in depth about the advances and applications of Nuclear Medicine in this field of human health.

This curriculum has the most up-to-date content and is accompanied by a variety of multimedia resources to facilitate your immediate absorption of new skills"

tech 26 | Educational Plan

Module 1. Update on Oncological Principles, Functional Sequelae and Supportive Treatment of Patients with Urologic Tumors

- 1.1. Molecular Biology of Cancer
- 1.2. Prognostic Factors, Tumor Markers and Paraneoplastic Syndromes in Urologic Oncologic Pathology
- 1.3. Tumor Genetics
- 1.4. Oncologic Emergencies in Urology
- 1.5. Oncologic Principles: Etiology, Susceptibility, Epidemiology
- 1.6. Principles of Urologic Surgical Oncology
- 1.7. Clinical Trials in Urologic Oncology Patients
- 1.8. Supportive Care of the Oncologic Patient in Urology
- 1.9. Genitourinary Functional Sequelae of Oncologic Treatments in Urology
 - 1.9.1. Surgical Andrology
 - 1.9.2. Reconstructive Surgery
- 1.10. Nuclear Medicine and Molecular Imaging in Oncologic Tumor Pathology
 - 1.10.1. Scientific Evidence in Urologic Oncology
 - 1.10.2. New Tracers

Module 2. Advances in the Diagnosis, Treatment and Monitoring of Non-Muscle Invasive Bladder Carcinoma

- 2.1. Epidemiology and Etiopathogenesis
- 2.2. Pathological Anatomy
 - 2.2.1. TNM
 - 2.2.2. WHO
 - 2.2.3. Biopsies/Samples
 - 2.2.4. Risk Factors
 - 2.2.5. Other Factors: T1a-a, Lymphovascular Invasion, Variants, Markers, etc
 - 2.2.6. CIS
- 2.3. Diagnosis Part I
 - 2.3.1. Clinical Symptoms
 - 2.3.2. Imaging Tests
 - 2.3.3. Urine Cytology
 - 2.3.4. Molecular Markers (Clinical Applications to Date)

- 2.4. Diagnosis Part II
 - 2.4.1. Cystoscopy
 - 2.4.2. Photodynamic Diagnosis
 - 2.4.3. NBI
 - 2.4.4. Second TURP
- 2.5. Risk Groups
 - 2.5.1. EORTC
 - 2.5.2. Risk and Progression Charts; CUETO
 - 2.5.3. CIS
- 2.6. Adjuvant Treatment with Chemotherapy
 - 2.6.1. Single Dose Post-TURP
 - 2.6.2. Adjuvant
 - 2.6.3. Options to Increase Efficiency
- 2.7. Adjuvant Treatment with BCG
 - 2.7.1. Advantages
 - 2.7.2. Strains
 - 2.7.3. Toxicity and Treatment
 - 2.7.4. Dose
 - 2.7.5. Treatment Plans
- 2.8. Endovesical Alternatives
 - 2.8.1. Doxorubicin
 - 2.8.2. Epirubicin
 - 2.8.3. Gemcitabine
 - 2.8.4. Oncotiotepa
- 2.9. Adjuvant Treatment of CIS
- 2.10. Treatment Plans in the Event of Standard Treatment Failure
 - 2.10.1. Definition of Failure
 - 2.10.2. After Chemotherapy
 - 2.10.3. After BCG
- 2.11. Radical Cystectomy in Non-Muscle Invasive Bladder Carcinoma
 - 2.11.1. Fundamentals
 - 2.11.2. Immediate vs. Early Onset
 - 2.11.3. After BCG Failure
- 2.12. Monitoring

Educational Plan | 27 tech

Module 3. Advances in the Diagnosis, Treatment and Monitoring of Muscle Invasive Bladder Carcinoma

3.1. Pathologic Anatomy

- 3.1.1. Lymph Node Involvement
- 3.1.2. Lymph Node Involvement
- 3.1.3. Histological Variants
- 3.1.4. Muscle Invasion Pattern
- 3.1.5. Markers: p53, etc
- 3.1.6. TNM
- 3.2. Urethral Involvement and Concomitant Prostate Cancer
- 3.3. Staging
 - 3.3.1. Local: MRI and CT
 - 3.3.2. Lymph Node: MRI; CT; PET
 - 3.3.3. TUS: UROTAC
 - 3.3.4. Future: FDG-PET-CT; DCE-MRI; DWI-MRI
- 3.4. Radiotherapy
 - 3.4.1. Neoadjuvant
 - 3.4.2. Palliative
 - 3.4.3. Adjuvant
- 3.5. Neoadjuvant Chemotherapy
- 3.6. Radical Cystectomy
 - 3.6.1. Risk Assessment
 - 3.6.2. Delay Time
 - 3.6.3. Lymphadenectomy: Extent and Number
 - 3.6.4. Urinary Diversion
 - 3.6.5. Perioperative Complications
 - 3.6.6. Palliative Cystectomy
 - 3.6.7. Laparoscopic vs Robotic Surgery
- 3.7. Bladder Preservation Programs
 - 3.7.1. RTU_V
 - 3.7.2. Radiotherapy
 - 3.7.3. Chemotherapy
 - 3.7.4. Multimodal Treatments

- 3.8. Neoadjuvant Chemotherapy
- 3.9. Metastatic Cancer
 - 3.9.1. Poor Prognosis Factors
 - 3.9.2. Prognostic Groups/Adverse Factors
 - 3.9.3. Definition of Cisplatin "Ineligible"
 - 3.9.4. Single-Agent Chemotherapy
 - 3.9.5. Standard Patient Treatment Cisplatin "Eligible"
 - 3.9.6. Alternative/2nd Line Treatment of Cisplatin "Eligible" Patients
 - 3.9.7. Treating "Ineligible" Patients
 - 3.9.8. Treating Symptomatic Patients
- 3.10. Monitoring
 - 3.10.1. Treatment of Bone Metastases
 - 3.10.2. Rescue Surgery
 - 3.10.3. Urothelial Recurrence: Urethra and TUS
- 3.11. Role of Immunotherapy
- 3.12. Major Ongoing Clinical Trials
- 3.13. Particularities of Other Histologies

Module 4. Advances in the Diagnosis, Treatment and Monitoring of Testicular Cancer

- 4.1. Epidemiology and Staging
- 4.2. Diagnosis and Clinical Staging
 - 4.2.1. Physical Examination
 - 4.2.2. Doppler Ultrasound
 - 4.2.3. Tumor Markers
 - 4.2.4. CAT and MRI
 - 4.2.5. FDG-PET-CAT
 - 4.2.6. TNM
- 4.3. Staging
 - 4.3.1. Risk Groups
 - 4.3.2. Risk Factors/Prognosis

tech 28 | Educational Plan

- 4.4. Orchiectomy
 - 4.4.1. Indications
 - 4.4.2. Role of Deferred Surgery
 - 4.4.3. Conservative Surgery
 - 4.4.4. Contralateral Biopsy
- 4.5. Pathological Anatomy
 - 4.5.1. Role of the Pathologist in the Diagnosis of Testicular Neoplasms
 - 4.5.2. WHO 2016 Classification of Germinal Neoplasms
 - 4.5.3. Diagnostic Algorithm for Non-Germinal Neoplasms
 - 4.5.4. Staging
- 4.6. Stage I Treatment: Seminoma
 - 4.6.1. Monitoring
 - 4.6.2. Radiotherapy
 - 4.6.3. Adjuvant Chemotherapy
 - 4.6.4. Retroperitoneal Lymphadenectomy
 - 4.6.5. Risk-Adapted Treatment
- 4.7. Stage I Treatment: Non-Seminoma
 - 4.7.1. Monitoring
 - 4.7.2. Adjuvant Chemotherapy
 - 4.7.3. Retroperitoneal Lymphadenectomy
 - 4.7.4. Risk-Adapted Treatment
- 4.8. Treatment of Metastatic Germ Cell Tumors
- 4.9. Residual Tumor Mass
- 4.10. Systemic Treatment of Tumor Relapse
- 4.11. Monitoring
- 4.12. Testicular Stromal Tumors: Diagnosis, Treatment and Monitoring

Module 5. Advances in the Diagnosis, Treatment, and Monitoring of Penile Cancer

- 5.1. Epidemiology, Etiology, and Risk Factors
- 5.2. Pathologic Anatomy
 - 5.2.1. Premalignant Lesions
 - 5.2.2. Histological Subtypes of Carcinoma of the Penis
 - 5.2.3. TNM
 - 5.2.4. Prognostic Factors
 - 5.2.5. Molecular Biology
- 5.3. Diagnosis and Staging
 - 5.3.1. Clinical Symptoms
 - 5.3.2. Physical Examination
 - 5.3.3. Imaging Tests: Ultrasound; MRI; CT; PET-CT-FDG
- 5.4. Images of Penile and Urethral Cancer
- 5.5. Anatomical Considerations of the Penis and Lymphatic Drainage
- 5.6. Treatment of Penile Cancer I: Surgical Treatment of the Primary Tumor
 - 5.6.1. Non-Invasive Superficial Disease: CIS
 - 5.6.2. Invasive Disease Confined to the Glans Penis: Ta/T1a
 - 5.6.3. Invasive Disease: T1b/T2
 - 5.6.3.1. Confined to Corpus Spongiosum
 - 5.6.3.2. Invasion of Corpus Cavernosum
 - 5.6.4. Invasive Urethral Disease: T3
 - 5.6.5. Invasive Disease of Adjacent Structures: T4
- 5.7. Treatment of Carcinoma of the Penis II: Lymph Nodes
 - 5.7.1. Daseler's Inguinal Anatomical Zones
 - 5.7.2. General Considerations
 - 5.7.3. Risk Stratification for Nodal Involvement in cN05.7.3.1. Monitoring5.7.3.2. Lymph Node Staging
 - 5.7.4. Modified Lymphadenectomy
 - 5.7.5. Dynamic Sentinel Lymph Node Biopsy 5.7.5.1. cN1/cN2
 - 5.7.5.2. Radical Inguinal Lymphadenectomy
 - 5.7.5.3. Pelvic Lymphadenectomy

Educational Plan | 29 tech

5.7.6. cN3

- 5.7.7. Controversies in Ilioinguinal Lymphadenectomy
- 5.8. Penile Cancer Treatment III: Radiotherapy
 - 5.8.1. Indications
 - 5.8.1.1. Ta/T1a
 - 5.8.1.2. T2
 - 5.8.2. Lymph Node Involvement
- 5.9. Penile Cancer Treatment IV: Systemic
 - 5.9.1. Adjuvant Chemotherapy
 - 5.9.2. Neoadjuvant Chemotherapy
 - 5.9.3. Palliative Chemotherapy
 - 5.9.4. Targeted Therapy
- 5.10. Monitoring
 - 5.10.1. General Aspects
 - 5.10.2. Clinical Guides
 - 5.10.3. Local Recurrence
 - 5.10.4. Regional Recurrence
- 5.11. Quality of Life
- 5.12. Primary Urethral Carcinoma

Module 6. Advances in the Diagnosis, Treatment and Monitoring of Renal, Adrenal Gland and Retroperitoneal Carcinoma

- 6.1. Epidemiology and Etiopathogenesis
- 6.2. Diagnostic Imaging and Clinical Staging
 - 6.2.1. Doppler and Contrast Ultrasound: Evaluation of Complicated Renal Cyst, Renal Mass and Dissemination
 - 6.2.2. MRI and CT: Diagnosis, Staging and Monitoring
- 6.3. Pathologic Anatomy
 - 6.3.1. WHO
 - 6.3.2. ISUP
 - 6.3.3. Fuhrman
 - 6.3.4. Clear Cells
 - 6.3.5. Papillary
 - 6.3.6. Chromophobic
 - 6.3.7. Other Histologies

- 6.4. Renal Tumor Biopsy
 - 6.4.1. Technical Aspects
 - 6.4.2. Indications
 - 6.4.3. Side Effects
 - 6.4.4. Efficacy
 - 6.4.5. Cystic Lesions
- 6.5. Prognostic Factors
 - 6.5.1. TNM
 - 6.5.2. Histological Factors
 - 6.5.3. Clinical Factors
 - 6.5.4. Molecular Factors
- 6.6. Localized Renal Carcinoma
 - 6.6.1. Monitoring
 - 6.6.2. Radical Surgery vs. Nephron-Sparing Surgery
 - 6.6.3. Nephron-Sparing Surgery
 - 6.6.4. Adrenalectomy
 - 6.6.5. Lymphadenectomy
 - 6.6.6. Pre-Nephrectomy Embolization
 - 6.6.7. Ablative Treatments
- 6.7. Advanced Localized Renal Carcinoma
 - 6.7.1. cN+
 - 6.7.2. Unresectable Tumors
 - 6.7.3. IVC Thrombosis
 - 6.7.4. Adjuvant and Neoadjuvant Treatment
 - 6.7.5. Clinical Trials
- 6.8. Advanced or Metastatic Renal Carcinoma
 - 6.8.1. The Role of Radical Nephrectomy
 - 6.8.2. Cytoreductive Surgery + Immunotherapy
 - 6.8.3. Role of Metastasectomy
 - 6.8.4. Radiotherapy
 - 6.8.5. Embolization
 - 6.8.6. Symptomatic Treatment of Patients With Renal Carcinoma

tech 30 | Educational Plan

- 6.9. Systemic Treatment
 - 6.9.1. Chemotherapy
 - 6.9.2. Immunotherapy6.9.2.1. Advances in Immunotherapy
 - 6.9.2.2. α- IFN
 - 6.9.2.3. IL-2
 - 6.9.2.4. Vaccines and Targeted Immunotherapies
 - 6.9.2.4.1. Tumor Antigen 5T4 + 1st Line Therapies
 - 6.9.2.4.2. Anti PD-1 or PD-L1 Antibodies
 - 6.9.3. Targeted Therapy
 - 6.9.3.1. Advances in Targeted Therapy
 - 6.9.3.2. IMDC Risk/Prognostic Groups: Therapeutic Implication 6.9.3.3. Tyrosine Kinase Inhibitors
 - 6.9.3.4. Monoclonal Antibodies Against Circulating VEGF 6.9.3.5. mTOR Inhibitors
 - 6.9.4. 1st Line Treatment: Sunitinib
 - 6.9.5. 1st Line Treatment: Pazopanib
 - 6.9.6. 1st Line Treatment: Other Options
 - 6.9.7. 1st Line Treatment in Patients with Poor Prognosis: Temsirolimus
 - 6.9.8. 1st Line Treatment Positioning
 - 6.9.9. 2nd Line Treatment: Axitinib
 - 6.9.10. 2nd Line Treatment: Everolimus
 - 6.9.11. 2nd Line Treatment: Cabozantinib
 - 6.9.12. 2nd Line Treatment: Nivolumab
 - 6.9.13. 2nd Line Treatment: Subsequent Options
 - 6.9.14. Therapeutic Sequencing in Renal Carcinoma: Treatment Positioning
 - 6.9.15. Symptomatic Treatment of Patients With Renal Carcinoma
 - 6.9.16. Non-Clear Cell Carcinomas
- 6.10. Monitoring
 - 6.10.1. Imaging Tests
 - 6.10.2. Recurrence: Local and Distant
 - 6.10.3. Ablative Treatments
- 6.11. Drug Resistance Mechanism
- 6.12. Major Developments in Metastatic Kidney Cancer: Ongoing Clinical Trials



Educational Plan | 31 tech

6.13. Suprarenal Mass

- 6.13.1. Differential Diagnosis
- 6.13.2. Functioning Mass Diagnosis
- 6.13.3. Surgical Management
- 6.13.4. Metastatic Cancer
- 6.14. Primary Retroperitoneal Tumors
 - 6.14.1. Differential Diagnosis
 - 6.14.2. Diagnostic Techniques
 - 6.14.3. Surgical Management
 - 6.14.4. Metastatic Cancer

Module 7. Advances in the Diagnosis, Treatment and Monitoring of Prostate Cancer

- 7.1. Epidemiology and Risk Factors
- 7.2. Diagnosis
 - 7.2.1. TR
 - 7.2.2. PSA: Density, Kinetics, Ratio, PHI, etc
 - 7.2.3. Other Markers: Genetic, PCA3, 4K, etc
 - 7.2.4. Prostate Biopsy
- 7.3. Screening vs. Early Diagnosis
- 7.4. Diagnostic Imaging
 - 7.4.1. Ultrasonography: Sonoelastography, Contrast, Histoscanning, etc
 - 7.4.2. Bone Scan
 - 7.4.3. CAT
 - 7.4.4. MRI
 - 7.4.5. PET-CAT
 - 7.4.6. mpMRI: Technical Aspects
- 7.5. Pathologic Anatomy
 - 7.5.1. Biopsies
 - 7.5.2. RP Piece
- 7.6. Clinical and Pathologic Staging

- 7.7. Deferred Treatment
 - 7.7.1. Localized Prostate Cancer: AS vs. WW
 - 7.7.2. Locally Advanced
 - 7.7.3. Metastatic
- 7.8. Localized Prostate Cancer
 - 7.8.1. RT: General Information
 - 7.8.1.1. IMRT/IGRT
 - 7.8.1.2. Dose Escalation
 - 7.8.1.3. Hormone Therapy
 - 7.8.1.4. RxT + CT
 - 7.8.1.5. Dose Escalation + Hormone Therapy
 - 7.8.2. PR: General Information
 - 7.8.2.1. Surgical Technique: Open-Laparoscopic-Robotic 7.8.2.2. Conservation of Neurovascular Bundles
 - 7.8.3. Focal Therapy
- 7.9. Radical Prostatectomy
 - 7.9.1. Low-Risk
 - 7.9.2. Medium-Risk
 - 7.9.3. High-Risk and Locally Advanced
 - 7.9.4. Lymphadenectomy and Lymph Node Involvement
 - 7.9.5. Adjuvant and Neoadjuvant Hormone Therapy
 - 7.9.6. Conservation of Neurovascular Bundles: Indications and Results
- 7.10. Radiotherapy
 - 7.10.1. Low-Risk
 - 7.10.2. Medium-Risk
 - 7.10.3. High-Risk
 - 7.10.4. Locally Advanced: MRC P23/PR07; TAP 32; SPCG-7/SFUO-3
 - 7.10.5. Ganglion Chains: RTOG 85-31; UK-STAMPEDE
 - 7.10.6. Proton Therapy
 - 7.10.7. Low-Dose-Rate Brachytherapy
 - 7.10.8. High-Dose-Rate Brachytherapy
 - 7.10.9. RxT after RP: EORTC 22911; ARO; SWOG 8794
 - 7.10.10. Nodes

tech 32 | Educational Plan

7.11. Cryosurgery

7.12. HIFU

7.13. Focal Therapy

7.13.1. Negative Biopsy + Elevated PSA

7.13. 2. mpMRI

7.13.3. Biomarkers

7.13.4. Future

- 7.13.5. PI-RADS Scientific Evidence
- 7.13.6. Ultrasound-Guided Prostate Biopsy +MRNR

7.13.6.1. Advances in Ultrasound-Guided Prostate Biopsy

7.13.6.2. Material

- 7.13.6.3. Technique: Transrectal/Transperineal
- 7.13.7. Fusion Biopsy
- 7.13.8. Cognitive Biopsy
- 7.13.9. Scientific Evidence
- 7.13.10. Cost-Effectiveness of MRI in the Detection of Prostate Cancer
- 7.13.11. Focal Therapy: Index Lesion; Clonal Theory
- 7.13.12. Selection Criteria. Risk Stratification
- 7.13.13. Energy Sources: HIFU, Cryotherapy, Brachytherapy, Electroporation, Photodynamic Therapy, Cyberknife
- 7.13.14. Monitoring and Recurrence
- 7.14. Metastatic Prostate Cancer
 - 7.14.1. Standard Treatment: Hormone Therapy
 - 7.14.2. SWOG: Risk Groups
 - 7.14.3. Intermittent Blocking
- 7.15. Castration Resistance: Etiology
- 7.16. CRPC Definition New Criteria
- 7.17. Clinicopathological Prognostic Factors in CRPC. Androgen Deprivation in mCPRC. Response Markers
- 7.18. Non-Metastatic CRPC (CRPC-M0). Clinical Management. Monitoring Criteria
- 7.19. Hormonal Maneuvers in CRPC. Scientific Evidence





Educational Plan | 33 tech

- 7.20. 1st Line Chemotherapy Treatment: Docetaxel7.20.1. mCRPC7.20.2. CRPC
- 7.21. Non-1st Line Chemotherapy Treatment: Cabazitaxel. Other Drugs
- 7.22. Hormone Treatment in CRPC Abiraterone 7.22.1. mCRPC
 - 7.22.2. CRPC
- 7.23. Hormone Treatment in CRPC Enzalutamide
 - 7.23.1. mCRPC
 - 7.23.2. CRPC
- 7.24. Treatment with Bone-Targeted Agents
 - 7.24.1. Bisphosphonates
 - 7.24.2. Denosumab
 - 7.24.3. Radium-223
- 7.25. Immunotherapy in mCRPC
- 7.26. Symptomatic Treatment of Patients with CRPC
- 7.27. Treatment Algorithm in CRPC: Positioning and Sequencing
- 7.28. Mechanisms of Resistance to Hormonal Treatment in CRPC: AR-V7 and Other Related Factors
- 7.29. Molecular Biology of CRPC: BRCA and Related Genes
- 7.30. Molecular Biology of CRPC: Epigenetic Angiogenesis
- 7.31. Molecular Biology of CRPC: Other Molecular Pathways Involved
- 7.32. Main Ongoing Clinical Trials in CRPC
- 7.33. Future Outlook of CRPC



This program will provide you with an adjunct mentor who will familiarize you with the dynamics of day-to-day practice in the area of Uroonncology"

07 Clinical Internship

After passing the online preparation period, the program includes a practical training period in a reference clinical center. The student will have at their disposal the support of a tutor who will accompany them during the whole process, both in the preparation and in the development of the clinical internship.

Immerse yourself in the reality of Uro-Oncology in a quality hospital, learning with its specialists about real patients and pathologies"

tech 36 | Clinical Internship

The Internship Program's Internship Program consists of a 3-week practical stay, from Monday to Friday, with 8 consecutive hours of practical training with an assistant specialist. This stay will allow you to see real patients alongside a team of professionals of reference in the area of the Urooncology, applying the most innovative diagnostic procedures and planning the latest generation therapeutics for in each pathology.

In this completely practical Internship Program, the activities are aimed at developing and perfecting the skills necessary to provide healthcare care in areas and conditions that require highly qualified professionals, and are oriented towards specific expertise for practicing the activity, in a safe environment for the patient and with highly professional performance.

It is undoubtedly an opportunity to learn by working in the innovative hospital of the future where real-time health monitoring of patients is at the heart of the digital culture of its professionals. This is a new way of understanding and integrating health processes, making it the ideal teaching scenario for this innovative experience in the improvement of professional medical competencies for the 21st century.

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

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



Clinical Internship | 37 tech



Module	Practical Activity
New diagnostic and follow-up procedures in urological tumor pathologies	Use tumor markers as a diagnostic and assessment method for oncologic pathology
	Use the main procedures of nuclear medicine and molecular imaging in the approach to oncological tumor pathology
	Addressing urological cancer from the tools available in the genetics laboratory
Diagnostic techniques, treatment and follow- up of non-muscle invasive and muscle invasive bladder carcinoma	Diagnosis of non-muscle invasive bladder carcinoma by endovesical studies
	Using molecular markers for the diagnosis of non-muscle invasive bladder carcinoma
	Apply state-of-the-art cystoscopy in the assessment of the bladder and urethra
	Surgical intervention of the bladder based on the latest techniques
	Perform radical cystectomy
	Use of different radiotherapeutic techniques in bladder cancer
	Use of neoadjuvant chemotherapy and immunotherapy in muscle invasive bladder carcinoma
	Using doppler ultrasound to diagnose and follow up testicular cancer
Diagnostic techniques	Apply tumor markers for the diagnosis and assessment of testicular cancer
treatment and follow-	Employing CT, MRI and FDG-CT-PET as follow-up tools in testicular cancer
up of penile and testicular cancer	Performing the orchiectomy procedure
	Apply the latest techniques in penile surgery
	Perform modified lymphadenectomy
Advances in the diagnosis, treatment and follow- up of prostate cancer	Apply, depending on the specific case, the most accurate prostate biopsy technique
	Perform imaging studies in prostate cancer
	Application of prostate surgery and cryosurgery

tech 38 | Clinical Internship

Civil Liability Insurance

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

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

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



General Conditions of the Internship Program

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

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

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

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

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

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

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

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

08 Where Can I Do the Clinical Internship?

To ensure that the updating process is the best possible, TECH proposes the realization of this on-site stay in a prestigious center that can provide the physician with the latest advances. This is a very complex and broad field, so it requires updating by the specialist, and the role of the hospital institutions proposed here is vital in this process, since they will offer the most advanced knowledge in the specialty.

Where Can I Do the Clinical Internship? | 41 tech

Get up to date on the most important developments in Uro-Oncology surrounded by professionals who master their theoretical and practical specificities with excellence"

a ca

tech 42 | Where Can I Do the Clinical Internship?

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



Hospital HM Modelo

Country City Spain La Coruña

Address: Rúa Virrey Osorio, 30, 15011, A Coruña

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

Related internship programs: - Anaesthesiology and Resuscitation - Palliative Care



Related internship programs: - Aesthetic Medicine - Clinical Nutrition in Medicine



Hospital HM Rosaleda

Country City Spain La Coruña

Address: Rúa de Santiago León de Caracas, 1, 15701, Santiago de Compostela, A Coruña

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

Related internship programs: - Hair Transplantation - Orthodontics and Dentofacial Orthopedics



Hospital HM San Francisco

Country	City
Spain	León

Address: C. Marqueses de San Isidro, 11, 24004, León

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

Related internship programs: Update in Anesthesiology and Resuscitation Trauma Nursing



Hospital HM Regla

Country	City
Spain	León

Address: Calle Cardenal Landázuri, 2, 24003, León

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

Related internship programs: - Update on Psychiatric Treatment in Minor Patients



Hospital HM Madrid

Country	City
Spain	Madrie

Address: Pl. del Conde del Valle de Súchil, 16, 28015, Madrid

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

Related internship programs: - Palliative Care - Anaesthesiology and Resuscitation



Hospital HM Montepríncipe

Country	City
Spain	Madrid

Address: Av. de Montepríncipe, 25, 28660, Boadilla del Monte, Madrid

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

Related internship programs: - Palliative Care - Aesthetic Medicine

Where Can I Do the Clinical Internship? | 43 tech



tech 44 | Where Can I Do the Clinical Internship?



Policlínico HM Arapiles ^{Country}City Spain Madrid

Address: C. de Arapiles, 8, 28015, Madrid

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

Related internship programs: - Anaesthesiology and Resuscitation Pediatric Dentistry



Policlínico HM Gabinete Velázquez

Country	City
Spain	Madrid

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

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

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



Madrid

Spain

Address: Ronda de la Comunicación, 28050, Madrid

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

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



Policlínico HM Imi Toledo

Country	City
Spain	Toledo

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

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

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





Where Can I Do the Clinical Internship? | 45 tech



56 Tak to s

Take advantage of this opportunity to surround yourself with expert professionals and learn from their work methodology"

09 **Methodology**

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

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



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

tech 48 | Methodology

At TECH we use the Case Method

What should a professional do in a given situation? 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 physician's professional practice.

66

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

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

 Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that evaluate 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.
- Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



tech 50 | Methodology

Relearning Methodology

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

This university is the first in the world to combine 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.

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



Methodology | 51 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, more than 250,000 physicians have been trained with unprecedented success in all clinical specialties regardless of surgical load. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

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

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

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



tech 52 | Methodology

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



Study Material

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

20%

15%

3%

15%

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



Surgical Techniques and Procedures on Video

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

Methodology | 53 tech



Expert-Led Case Studies and Case Analysis

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

20%

7%

3%

17%



Testing & Retesting

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



Classes

There is scientific evidence on the usefulness of learning by observing experts. The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



Quick Action Guides

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

10 **Certificate**

The Hybrid Professional Master's Degree in Urooncology guarantees students, in addition to the most rigorous and up-to-date education, access to a Hybrid Professional Master's Degree issued by TECH Technological University.



66

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

tech 56 | Certificate

This **Hybrid Professional Master's Degree in Urooncology** contains the most complete and up-to-date program on the professional and educational field.

After the student has passed the assessments, they will receive their corresponding Hybrid Professional Master's Degree diploma issued by TECH Technological University via tracked delivery*.

In addition to the diploma, students will be able to obtain an academic transcript, as well as a certificate outlining the contents of the program. In order to do so, students should contact their academic advisor, who will provide them with all the necessary information. Title: Hybrid Professional Master's Degree in Urooncology Course Modality: Hybrid (Online + Clinical Internship) Duration: 12 months Certificate: TECH Technological University Teaching Hours: 1,620 h.



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

technological university Hybrid Professional Master's Degree Urooncology Course Modality: Hybrid (Online + Clinical Internship) Duration: 12 months Certificate: TECH Technological University Teaching Hours: 1,620 h.

Hybrid Professional Master's Degree Urooncology

