



Master's Degree Major Outpatient Surgery

» Modality: online

» Duration: 12 months

» Certificate: TECH Global University

» Credits: 60 ECTS

» Schedule: at your own pace

» Exams: online

We b site: www.techtitute.com/us/medicine/professional-master-degree/master-major-outpatient-surgery

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Research on the development and implementation of Major Outpatient Surgery as opposed to traditional surgical models confirms the numerous advantages of its promotion. Among its benefits are rapid patient recovery, cost reduction, quality of care and patient safety.

All this, in turn, leads to advances in diagnostic procedures and surgical techniques in the main pathologies addressed in this area. A progression that leads the medical professional to perform an update on the same and with the maximum rigorousness granted by the existing clinical studies. In this sense, TECH has decided to design this Master's Degree in Major Outpatient Surgery of 1,500 teaching hours, which allows a complete update from the hand of the best experts in this field.

It is a program that will take the graduate over 12 months to make an academic journey through the main Digestive, Oncological, Endocrine, Breast, Ophthalmological and Otological surgeries, the most accurate methodologies used, as well as the resolution of the most frequent complications. All this, in addition to multimedia didactic material, specialized readings and case studies that provide greater dynamism and attractiveness to this program.

In addition, thanks to the Relearning system, based on the continuous reiteration of the most important concepts, students will progress through the syllabus in a natural way, reducing the long hours of memorization.

A unique academic option that facilitates the balance of daily professional and/or personal activities with a quality program. And the fact is that, with no classroom attendance or fixed schedules, the graduate has greater freedom to access the syllabus and manage their study time. An exceptional opportunity that only TECH, the world's largest digital university, can offer.

This **Master's Degree in Major Outpatient Surgery** contains the most complete and up-todate scientific program on the market. The most important features include:

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



Learn through the latest teaching material about minimally invasive techniques for the approach of chronic laryngitis"



After 12 months of updating you will be up-to-date on the main complications of Major Outpatient Surgery and the procedures to solve them effectively"

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

Its 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 an immersive education programmed to learn in real situations.

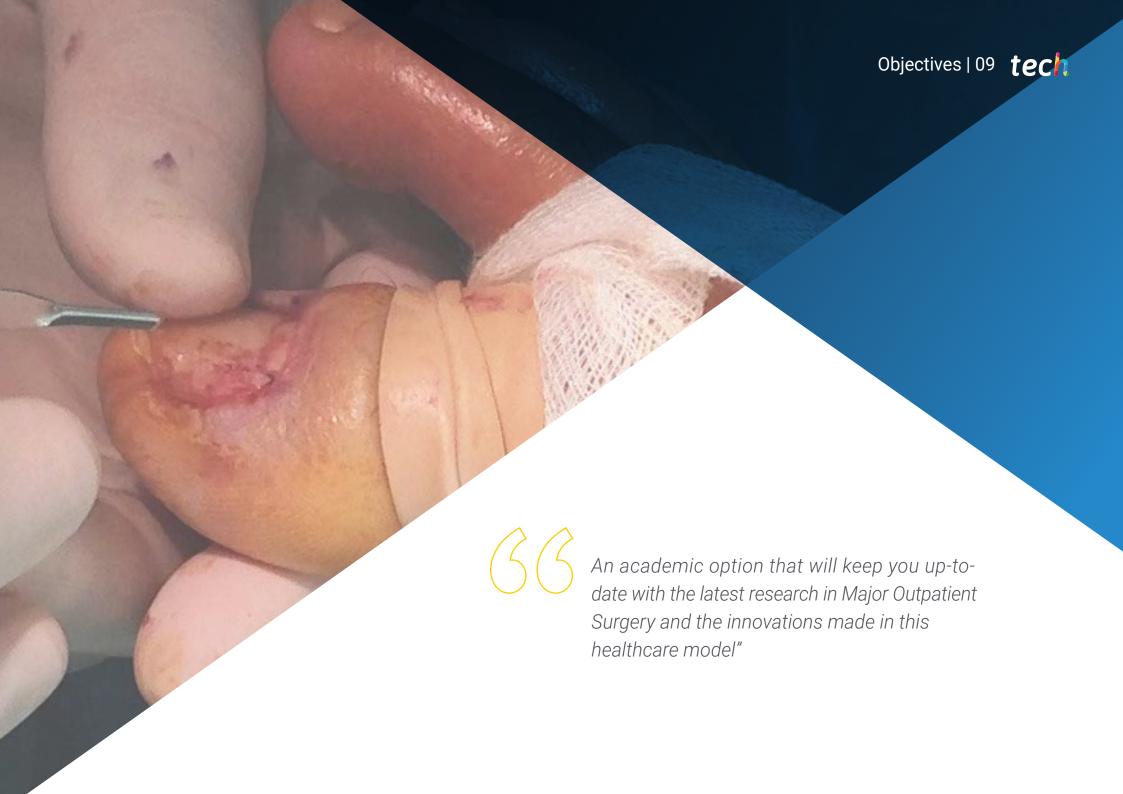
The design of this program focuses on Problem-Based Learning, by means of which the professional must try to solve the different professional practice situations that are presented throughout the academic course. For this purpose, the student will be assisted by an innovative interactive video system created by renowned experts.

TECH has designed a program designed for professionals like you who want a quality program, compatible with their daily activities.

Thanks to the Relearning methodology used by TECH you will reduce the hours of memorization, consolidating in a simple way the new concepts covered.







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General Objectives

- Delve into the different pathologies approached in Major Outpatient Surgery
- Delve into the anatomy and physiology necessary to understand the main procedures in Major Outpatient Surgery
- Delve deeper into the main surgeries in Major Outpatient Surgery
- Improve knowledge on the need for antibiotic prophylaxis in Major Outpatient Surgery
- Provide the tools to know how to manage the thromboembolic approach in Major Outpatient Surgery



Delve into this program in the debate generated around the use of thromboembolic prophylaxis and current clinical practice"





Module 1. Structure and Organization in Major Outpatient Surgery

- Differentiate the different Major Outpatient Surgery units according to their relationship with the hospital
- Delve into the basic infrastructure, as well as the different care circuits and equipment
- Delve into the basic organization of a Major Outpatient Surgery unit, as well as the relationship with other services and levels of care
- Emphasize the importance of research in surgery, as well as new developments in innovation in Major Outpatient Surgery

Module 2. Abdominal Wall Surgery

- Explore the abdominal wall anatomy
- Describe the most prevalent types of abdominal wall hernias
- Emphasize the importance of abdominal wall management in Major Outpatient Surgery
- Delve into the surgical treatment indicated for each type of wall hernia

Module 3. Digestive Surgery

- Delve into the most prevalent processes of General and Digestive System Surgery that can be managed in Major Outpatient Surgery
- Explore diseases of the gallbladder
- · Master the technique of cholecystectomy and its complications
- Delve into the surgical medical management of gastroesophageal reflux disease

Module 4. Breast and Endocrine Surgery

- Master the management of the thyroid nodule
- Delve into the surgical technique of thyroidectomy and its complications
- Recognize the semiology of the most prevalent breast pathology
- Differentiate those breast pathology processes subsidiary to Major Outpatient Surgery

Module 5. Otologic Surgery

- Delve into the anatomical and functional basis of the ear
- Identify the main pathologies with a surgical approach in Major Outpatient Surgery
- Delve into the basic surgical procedures in Major Outpatient Surgery
- Indicate the surgical complications of the main surgeries

Module 6. Nasal Surgery

- Identify the generalities of nasal anatomy and physiology
- Describe how nasal flow is measured
- Delve into the surgical techniques of Nasal Obstruction Syndrome
- Describe the fundamental steps of Septoplasty and Turbinoplasty
- Analyze basic endoscopic techniques
- Recognize the surgical complications of major surgeries

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Module 7. Pharyngeal and Laryngeal Surgery

- Describe the basic aspects of pharyngeal anatomy and physiology
- Delve into the basics of laryngeal anatomy and physiology
- Detail the key steps of the most common pediatric surgeries: Tonsillectomy and Adenoidectomy
- Delve into the surgical treatment of laryngeal nodules and polyps
- Recognize the surgical complications of major surgeries

Module 8. Proctology

- Emphasize the importance of proctology in Major Outpatient Surgery
- · Recognize the main symptoms, as well as their management
- Know the most commonly used surgical techniques in Major Outpatient Surgery
- Find out the possible complications

Module 9. Other Procedures in Major Outpatient Surgery

- Reflect on the importance of antibiotic prophylaxis in Major Outpatient Surgery
- Rationalize the need for thromboembolic prophylaxis in Major Outpatient Surgery
- Delve into the main ophthalmology surgeries in Major Outpatient Surgery
- Delve into the main urological surgeries in Major Outpatient Surgery
- Describe the main surgeries in traumatology in Major Outpatient Surgery
- Outline the main maxillofacial surgery surgeries in Major Outpatient Surgery
- Explore the main plastic surgeries in Major Outpatient Surgery





Module 10. Transversal Subjects to Major Outpatient Surgery

- Delve into the current criteria used in the selection of patients for Major Outpatient Surgery
- Identify the aspects related to the indications of real and perceived quality of care by the patient
- Indicate the mechanisms of postoperative pain, as well as how to evaluate it and the most appropriate strategies for its control
- Describe the role of nursing during the whole process of a major ambulatory surgery
- Delve into the aspects related to the pre-anesthetic study
- Assess patient satisfaction with a major ambulatory surgery procedure
- Delve into the specific preparation required for the performance of a Major Outpatient Surgery
- Indicate the criteria for a safe and effective discharge from the hospital
- Describe the structure and material resources available in Major Outpatient Surgery units
- Know the general aspects of the cures in Major Outpatient Surgery





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General Skills

- Coordinate a Major Outpatient Surgery unit
- Manage the material and human resources of a Major Ambulatory Surgery unit
- Update technical skills in the approach of the main pathologies intervened in a Major Outpatient Surgery unit
- Perform the most innovative surgical techniques in Abdominal Wall Surgery
- Carry out an adequate choice of the patient to be operated in a Major Outpatient Surgery unit
- Approach the different hernias using the precise prevention techniques



Explore with this program the technical options of laparotomic closures used in lumbar hernias"







Specific Skills

- Improve the clinical and care quality in a Major Outpatient Surgery unit
- Manage the preoperative process of Inguinal Hernia Surgery
- Master the digestive procedures performed in a Major Outpatient Surgery unit
- Deal with the most frequent complications in Thyroid Surgery and Nasal Surgery
- Perform an adequate follow-up of the patient after surgery
- Analyze the most appropriate adenoidectomy methodologies to intervene in a child patient
- Detect the first symptoms of laryngeal carcinomas
- Approach successfully Reinke's nodules, polyps and edema
- Identify and act in a precise way in surgical infections
- Promote interdisciplinary and collaborative work with other specialties





Management



Dr. Palacios Sanabria, Jesús Enrique

- Specialist of General Surgery at the Basic General Hospital of Baza-Granada
- General Surgeon in the Bariatric and Metabolic Surgery team at the Canabal Clinic
- General Surgeon at the IDB Clinic in Barquisimeto
- Professor in the Minor Surgery Course at the Andalusian Health Service
- Medical Surgeon by the 'Lisandro Alvarado' Central Western University
- Specialist in General Surgery at the 'Lisandro Alvarado' Central Western University
- Master's Degree in General Surgery and Digestive System Updating

Professors

Dr. Pérez Morales, Adolycar

- Dentist in the Smile Dental Clinic in Madrid
- Dentist at the Dental Prevent Clinic
- Dentistry Assistant at Dentalcorisa Clinic
- Dentist and manager of the Dental Clinic Nanetti Colmenares
- Dentist at the Center for Rehabilitation and Oral Aesthetics Odontomark
- Degree in Dentistry from the José Antonio Páez University
- Postgraduate Certificate in Oral Surgery and Teeth Whitening

Dr. Colombo Pérez, Ángel Daniel

- General Surgery Specialist at Dr. Antonio María Pineda Hospital
- Head of the Central Operating Room of the Antonio María Pineda University Hospital
- Head of the Department of Surgery at Dr. Daniel Camejo Acosta Hospital
- Associate Professor of Medicine at UCLA in Surgical Clinic I and II
- Professor of General Surgery Postgraduate Course at UCLA
- Medical Surgeon by the Lisandro Alvarado Midwestern University
- Medical Specialist in General Surgery at the Dr. Antonio María Pineda Central University Hospital
- Master's Degree in Higher University Teaching from UCLA

Dr. Pérez Colmenares, Ámbar Milagros

- Anesthesiology Specialist at the Hospital Básico de Baza in Granada
- Attending Physician of the Anesthesiology Service at the Dr. Antonio María Pineda Central University Hospital
- Head of Anesthesiology at the Decentralized Service of the Dr. Daniel Camejo Acosta Medical and Hospital West Care Center
- Head of Postgraduate Residents of Anesthesiology at the Dr. Antonio María Pineda Central University Hospital
- Professor of the Postgraduate Course of Anesthesiology at UCLA, teaching subjects such as Anesthesia I, Anesthesia II, Anesthesia III and Biophysics applied to Anesthesia
- Degree in Medicine and Surgery, Medical Surgeon, Cum Laude, from Lisandro Alvarado Centralwestern University
- Diploma in Occupational Safety and Health at the Lisandro Alvarado Centralwestern University
- Resident of the Department of Pediatric Surgery at the "Dr. Jesús María Casal Ramos" Hospital
- Resident of Intensive Care Unit at Los Leones Surgical Unit
- Postgraduate Residency in Anesthesiology at the Dr. Antonio María Pineda University Central Hospital

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Ms. Sanabria Chópite, María Elena

- Specialist in Applied Biology and Botany
- Professor at Lisandro Alvarado Centralwestern University
- Research Coordinator at Lisandro Alvarado Centralwestern University
- Degree in Biology from the Eastern University School of Sciences
- Magister Scientiarum in Applied Biology from the Eastern University -School of Sciences
- Award "Woman in Science 2018" by the Academy of Natural Sciences of Venezuela
- Author and co-author of several scientific and/or research articles, books, chapters and proceedings for scientific events

Ms. Canales González, María Isabel

- Nurse in different services and public hospitals in Andalusia
- Nurse in the Operating Room of the Basic General Hospital of Baza
- Degree in Nursing from the University of Cadiz
- Master's Degree in Nursing Care, Procedures and Techniques from the Catholic University of San Antonio
- Postgraduate Diploma in Nursing in Emergency and Urgent Care, Antonio de Nebrija University
- Nursing Expert in Pregnancy, Childbirth and Puerperium by the Antonio de Nebrija University
- Course in Minor and Ambulatory Surgery by the College of Nursing of Granada





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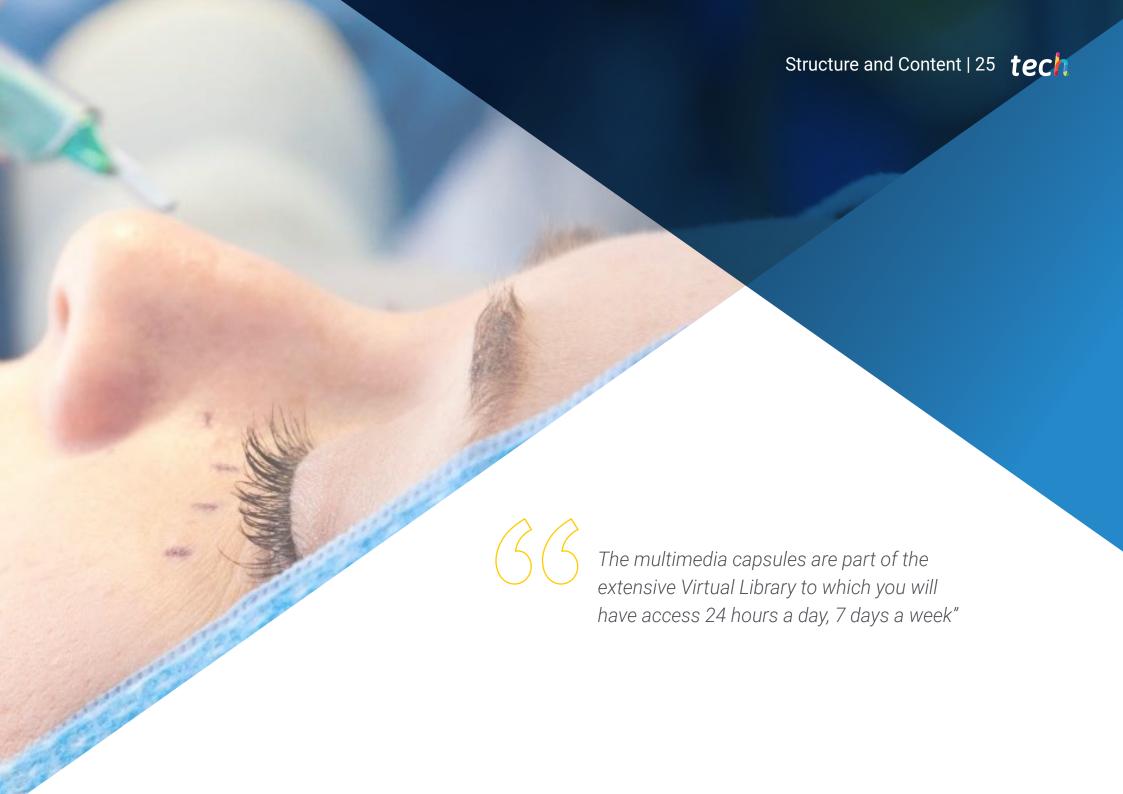
Dr. Morales Barrese, Maite Fabiola

- Family Physician in the Andalusian Health System
- Medical specialist in the General and Intra and Extrahospital Emergency Department
- Specialist in Advanced Aesthetics
- Family Physician specializing in Pediatrics
- Master's Degree in Aesthetic Facial and Body Medicine of the Institute of Aesthetics and Skin



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





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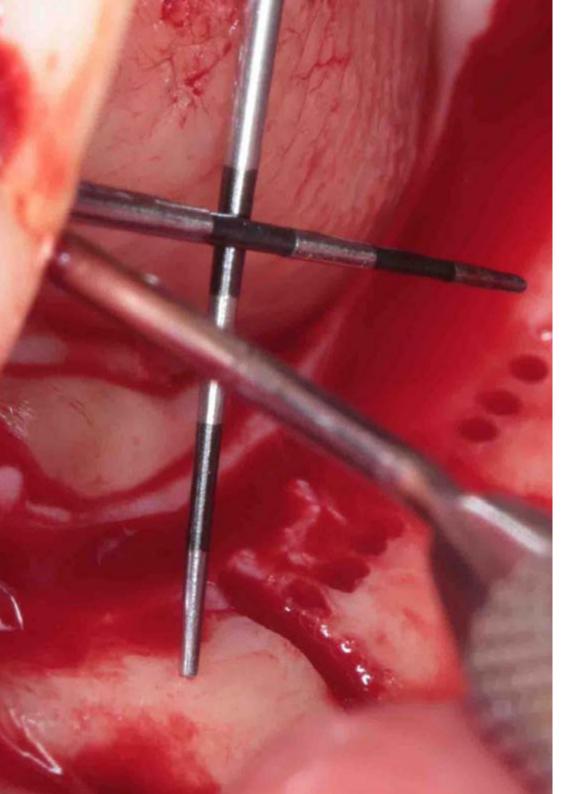
Module 1. Structure and Organization in Major Outpatient Surgery

- 1.1. Definition of the Major Outpatient Surgery Model
 - 1.1.1. Concepts
 - 1.1.2. Integrated Unit
 - 1.1.3. Autonomous Unit
 - 1.1.4. Independent Unit
- 1.2. Major Outpatient Surgery Infrastructure and Organization
 - 1.2.1. Basic Structure of Major Outpatient Surgery Units
 - 1.2.2. Assistance Circuits
 - 1.2.3. Equipment
 - 1.2.4. Organization. Management Structure
- 1.3. Information and Informed Consent in Major Outpatient Surgery
 - 1.3.1. Information of Major Outpatient Surgery Users
 - 1.3.2. Information on General Characteristics
 - 1.3.3. Informed Consent
 - 1.3.4 Instructions and Recommendations
- 1.4. Management of the Major Outpatient Surgery Unit
 - 1.4.1. Results Management
 - 1.4.2. Indicators Management
 - 1.4.3. Portfolio of services
 - 1.4.4. Major Outpatient Surgery Indicators
- 1.5. Research in Surgery
 - 1.5.1. Importance of Research in Surgery
 - 1.5.2. Evidence-Based Medicine
 - 1.5.3. How to Prepare a Scientific Communication at a Congress
 - 1.5.4. The Research Project
- 1.6. Innovations in Major Outpatient Surgery
 - 1.6.1. Technical Innovations
 - 1.6.2. Innovations in Practical Organizations
 - 1.6.3. Innovative Instruments and Devices
 - 1.6.4. Conclusions

- 1.7. Innovation in Minimally Invasive Surgery
 - 1.7.1. Introduction
 - 1.7.2. Innovation versus Minimization
 - 1.7.3. Stages of Innovation and Decadence of the Surgeon
 - 1.7.4. Conclusions
- 1.8. Integrated Operating Room
 - 1.8.1. Definition of Integrated Operating Room
 - 1.8.2. Elements of an Integrated Operating Room
 - 1.8.3. Advantages and Benefits of the Conventional Operating Room
 - 1.8.4. Conclusions
- 1.9. Other Sources of Innovation in Surgery
 - 1.9.1. Big Data
 - 1.9.2. Artificial Intelligence
 - 1.9.3. Machine Learning
 - 1.9.4. Impact of Social Media in Surgery
- 1.10. Oral Surgery
 - 1.10.1. Introduction
 - 1.10.2. Elements of Oral Surgery
 - 1.10.3. Oral Surgery Preparation
 - 1.10.4. Conclusions

Module 2. Abdominal Wall Surgery

- 2.1. Surgical Anatomy of the Abdominal Wall
 - 2.1.1. Introduction
 - 2.1.2. Layers of the Abdomen
 - 2.1.3. Nerves of the Abdominal Wall
 - 2.1.4. Functional Anatomy of the Abdominal Wall
- 2.2. Closure of the Mid Laparotomy
 - 2.2.1. Anatomical Aspects
 - 2.2.2. Risk Factors of the Surgical Technique
 - 2.2.3. Closure Techniques of Mid Laparotomy
 - 2.2.4. Suture Material



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2.3.	Prosthetic		

- 2.3.1. Classification of Prosthetic Materials
- 2.3.2. Biological Meshes
- 2.3.3. Use of Abdominal Wall Adhesives
- 2.3.4. Types of Mechanical Fixation Systems

2.4. Primary Midline Hernias

- 2.4.1. Umbilical Hernia
- 2.4.2. Epigastric Hernia
- 2.4.3. Diastasis of the Rectus
- 2.4.4. Classification of Surgical Techniques for the Treatment of Ventral Hernias

2.5. Lumbar Hernias

- 2.5.1. Lumbar Hernias
- 2.5.2. Spiegel Hernia
- 2.5.3. Obturator Hernia
- 2.5.4. Special Laparotomic Closures

2.6. Parastomal Hernias

- 2.6.1. Classification
- 2.6.2. Management of Parastomal Hernia
- 2.6.3. Surgical Treatment of Parastomal Hernia Prevention

2.7. Hernias in Laparoscopic Trocar Orifices

- 2.7.1. Introduction
- 2.7.2. Classification
- 2.7.3. Etiopathogenesis
- 2.7.4. Prevention

2.8. Inguinal and Crural Hernias

- 2.8.1. Classification of Inguinal Hernias
- 2.8.2. Diagnosis
- 2.8.3. Differential Diagnosis of Chronic Inguinal Pain
- 2.8.4. Local Anesthesia in Inguinal Hernias in Major Outpatient Surgery

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3.4.3. Morbidity

Interventional Radiology

Abscesses and Liver Cysts

3.4.2. Simple Liver Cysts3.4.3. Acquired Liver Cysts3.4.4. Liver Abscesses

3.4.1. Introduction

Cholecystostomy

3.3.4. Percutaneous Biliary Drainage

3.3.2. Percutaneous Transhepatic Cholangiography

3.3.1. Introduction

3.3.3.

- Criteria for Selection of Inguinocrural Hernias in Major Outpatient Surgery 2.9.1. Introduction 2.9.2. Criteria for Patient Selection 2 9 3 Criteria for Patient Exclusion 2.9.4. Pre-operative Management of Inguinal Hernia Surgery in Major Outpatient Surgery 2.10. Surgical Treatment of Inguinal Hernia 2.10.1. Non-prosthetic Techniques 2.10.2. Anterior Prosthetic Techniques 2.10.3. Management of Crural Hernias 2.10.4. Laparoscopic Hernioplasty Module 3. Digestive Surgery 3.1. Biliary Tract Surgery 3.1.1. Anatomy 3.1.2. Physiology 3.1.3. Cholelithiasis and its Complications 3.1.4. Coledocolitiasis latrogenic Lesions of the Biliary Tract 3.2.1. Risk Factors 3.2.2. Classification Treatment 3.3.3.
- Gastroesophageal Reflux 3.5.1. Pathogenesis 3.5.2. Complications 3.5.3. Conservative Treatment 3.5.4. Surgical Management Failures of Anti-reflux Surgery 3.6.1. Relapse 3.6.2. Stenosis 3.6.3. Gastric Migration to the Thorax Redo Surgery 3.6.4. Motor Disorders of the Esophagus 3.7.1. General Classification Oropharyngeal Dysphagia Primary Esophageal Disorders 3.7.3. 3.7.4. Secondary Esophageal Disorders Esophageal Diverticula 3.8.1. Introduction 3.8.2. Zencker's Diverticula Thoracic Diverticula 3.8.3. Epiphrenic Diverticula Complementary Tests in Esophageal Pathology 3.9.1. Radiological Studies 3.9.2. Endoscopy 3.9.3. Manometry 3.9.4. Isotopic Studies 3.10. Digestive Surgery in the Elderly 3.10.1. Introduction 3.10.2. Preoperative Assessment of the Elderly Patient

3.10.3. Specific Complications

3.10.4. Conclusions

Module 4. Breast and Endocrine Surgery

- 4.1. Diagnostic Management of Thyroid Nodule
 - 4.1.1. Initial Assessment
 - 4.1.2. Thyroid Ultrasound
 - 4.1.3. Cytological Assessment
 - 4.1.4. Therapeutic Decision
- 4.2. Multinodular Goiter
 - 4.2.1. Definition of Multinodular Goiter
 - 4.2.2. Epidemiology
 - 4.2.3. Pathogenesis
 - 4.2.4. Diagnosis
 - 4.2.5. Indications for Surgery
- 4.3. Surgical Technique of Thyroidectomy
 - 4.3.1. Anatomy of the Thyroid Gland
 - 4.3.2. Common Gestures
 - 4.3.3. Post-Operative
 - 4.3.4. Thyroid Procedures
- 4.4. Post-surgery Complications
 - 4.4.1. Hypoparathyroidism
 - 4.4.2. Injury of the Superior Laryngeal Nerve
 - 4.4.3. Recurrent Paralysis
 - 4.4.4. Asphyxial Hematoma
- 4.5. Hyperparathyroidism
 - 4.5.1. Primary Hyperparathyroidism
 - 4.5.2. Secondary Hyperparathyroidism
 - 4.5.3. Tertiary Hyperparathyroidism
 - 4.5.4. MEN Syndrome
- 4.6. Thyroid and Parathyroid Outpatient Surgery
 - 4.6.1. Criteria for Patient Selection in Major Outpatient Surgery
 - 4.6.2. Anesthetic and Surgical Technique
 - 4.6.3. Postoperative Period and its Complications
 - 4.6.4. Criteria for Discharge

- I.7. Palpable Breast Nodule
 - 4.7.1. Anatomy of the Breast
 - 4.7.2. Physiology
 - 4.7.3. Medical History
 - 4.7.4. Management of the Patient with Palpable Nodule
- 4.8. Non-palpable Breast Lesions
 - 4.8.1. Definition
 - 4.8.2. Classification
 - 4.8.3. Attitude to Follow
 - 4.8.4. Prognosis
- 4.9. Nipple Secretion
 - 4.9.1. Types of Secretion
 - 4.9.2. Frequency (F)
 - 4.9.3. Diagnosis
 - 4.9.4. Treatment
- 4.10. Breast Pathology in Major Outpatient Surgery
 - 4.10.1. Surgeon Training in Breast Pathology
 - 4.10.2. Criteria of Patients Exclusion
 - 4.10.3. Selection of Procedures in Breast Pathology
 - 4.10.4. Complications of Breast Surgery

Module 5. Otologic Surgery

- 5.1. Anatomy of the Ear
 - 5.1.1. Descriptive Anatomy of the Ear
 - 5.1.2. Bony Labyrinth
 - 5.1.3. Membranous Labyrinth
 - 5.1.4. Innervation
 - 5.1.5 Vascularization
- 5.2. Hearing Physiology
 - 5.2.1. Physiology of the Middle Ear
 - 5.2.2. The Organ of Corti
 - 5.2.3. The Hair Cells
 - 5.2.4. Cochlear Tonotopy
 - 5.2.5. Cochlear Micromechanics

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- 5.3. Pathological Anatomy in Otologic Surgery
 - 5.3.1. Benign Lesions in External Ear
 - 5.3.2. Malignant Lesions in External Ear
 - 5.3.3. Benign Lesions in Middle and Inner Ear
 - 5.3.4. Malignant Lesions in Middle and Inner Ear
- 5.4. Myringoplasty
 - 5.4.1. Objectives of the Surgery
 - 5.4.2. Types
 - 5.4.3. Technique Description
 - 5.4.4. Patient Follow-up
- 5.5. Otosclerosis
 - 5.5.1. Objectives of the Surgery
 - 5.5.2. Types
 - 5.5.3. Technique Description
 - 5.5.4. Patient Follow-up
- 5.6. Cholesteatoma
 - 5.6.1. Objectives of the Surgery
 - 5.6.2. Types
 - 5.6.3. Technique Description
 - 5.6.4. Patient Follow-up
- 5.7. Transtympanic Drainages
 - 5.7.1. Objectives of the Surgery
 - 5.7.2. Types
 - 5.7.3. Technique Description
 - 5.7.4. Patient Follow-up
- 5.8. Complications in Otologic Surgery
 - 5.8.1. Complications in Myringoplasty
 - 5.8.2. Complications in Stapedectomy
 - 5.8.3. Complications in Tympanoplasty
 - 5.8.4. Complications of Transtympanic Drainages

- 5.9. Wound Healing in Otologic Surgery
 - 5.9.1. Types of Wounds
 - 5.9.2. Types of Bandage
 - 5.9.3. Patient Follow-up
 - 5.9.4. Wound Infections
- 5.10. Radiological Study in Otologic Surgery
 - 5.10.1. Radiological Anatomy of the Middle Ear
 - 5.10.2. Role of Imaging Tests in Myringoplasty
 - 5.10.3. Role of Imaging Tests in Otosclerosis
 - 5.10.4. Role of Imaging Tests in Cholesteatoma

Module 6. Nasal Surgery

- 6.1. Surgical Anatomy of the Nasal Cavity
 - 6.1.1. Roof of the Nasal Cavity
 - 6.1.2. Floor of the Nasal Cavity
 - 6.1.3. Entrance Orifice of the Nasal Cavity
 - 6.1.4. Outlet Orifice of the Nasal Cavity
 - 6.1.5. Lateral and Medial Wall of the Nasal Cavity
 - 6.1.6. Vascularization and Innervation of the Nasal Cavity
- 6.2. Physiology of the Nasal Cavity
 - 6.2.1. Respiratory Function
 - 6.2.2. Conditioning and Defensive Function
 - 6.2.3. Olfactory Function
 - 6.2.4. Phonatory Function
- 6.3. Histology of the Nasal Cavity
 - 6.3.1. Histological Basis: the Epithelium
 - 6.3.2. Histological Basis: Turbinates
 - 6.3.3. Benign lesions in the Nasal Cavity
 - 6.3.4. Malignant Lesions in the Nasal Cavity
- 6.4. Nasal Airflow Measurement
 - 6.4.1. Concept of Nasal Airflow
 - 6.4.2. Subjective Methods
 - 6.4.3. Objective Methods
 - 6.4.4. Peak Inspiratory Nasal Flow Meter

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	5.5.	Turbinate	Surgery
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- 6.5.1. Concept of Turbinate Hypertrophy
- 6.5.2. Causes of Turbinate Hypertrophy
- 6.5.3. Diagnosis and Treatment of Turbinate Hypertrophy
- 6.5.4. Types of Turbinate Surgery

6.6. Septoplasty

- 6.6.1. Nasal Obstruction Syndrome
- 6.6.2. Types of Septal Deflection
- 6.6.3. Concept and Types of Septoplasty
- 6.6.4. Surgery of the Alar Cartilages

6.7. Endoscopic Nasosinusal Surgery

- 6.7.1. Basic Concepts of Endoscopic Surgery
- 6.7.2. Approach to the Maxillary Sinus
- 6.7.3. Approach to the Ethmoidal Sinus
- 6.7.4. Sphenoid Sinus Approach

6.8. Complications of Nasal Surgery

- 6.8.1. Complications of Turbinoplasty
- 6.8.2. Complications of Septoplasty
- 6.8.3. Complications of Endoscopic Surgery
- 6.8.4. Complications of Alar Surgery

6.9. Cures and Care of Nasal Surgery

- 6.9.1. Cures and Care of Turbinoplasty
- 6.9.2. Cures and Care of Septoplasty
- 6.9.3. Cures and Care of Alar Surgery
- 6.9.4. Cures and Care of Endoscopic Surgery

6.10. Radiological Study in Nasal Surgery

- 6.10.1. Basic Anatomy in CT of the Sinus
- 6.10.2. The Role of Simple Radiography in Nasal Surgery
- 6.10.3. The Role of CT in Nasal Surgery
- 6.10.4. The Role of MRI in Nasal Surgery

Module 7. Pharyngeal and Laryngeal Surgery

- 7.1. Anatomy and Exploration of the Pharynx
 - 7.1.1. Anatomical Basis
 - 7.1.2. Innervation
 - 7.1.3. Irrigation
 - 7.1.4. Exploration
- 7.2. Anatomy and Exploration of the Larynx
 - 7.2.1. Anatomical Basis of the Pharynx
 - 7.2.2. Innervation
 - 7.2.3. Irrigation
 - 7.2.4. Exploration
- 7.3. Physiology of Pharynx and Larynx
 - 7.3.1. Swallowing
 - 7.3.2. Phonation
 - 7.3.3. Breathing
 - 7.3.4 Vocal Acoustics
- 7.4. Pathological Anatomy of Pharyngeal Surgery
 - 7.4.1. Walldeyer's Ring
 - 7.4.2. Pathologic Anatomy of the Palatine Tonsils
 - 7.4.3. Pathologic Anatomy of the Pharyngeal Tonsils
 - 7.4.4. Benign Lesions in Pharynx
- 7.5. Pathologic Anatomy of Laryngeal Surgery
 - 7.5.1. Histological Structure of the Vocal Cord
 - 7.5.2. Basal Membrane
 - 7.5.3. Lamina Propria
 - 7.5.4. Vocal Cord in Children and the Elderly
- 7.6. Tonsillectomy
 - 7.6.1. Definition
 - 7.6.2. Chronic Tonsillitis
 - 7.6.3. Indications
 - 7.6.4. Types

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- 7.7. Adenoidectomy
 - 7.7.1. Definition
 - 7.7.2. Adenoiditis
 - 7.7.3. Indications
 - 7.7.4. Types
- 7.8. EndoLaryngeal Microsurgery
 - 7.8.1. Definition
 - 7.8.2. Chronic laryngitis
 - 7.8.3. Indications
 - 7.8.4. Types
- 7.9. Complications and Care of Pharyngeal Surgery
 - 7.9.1. Tonsillectomy Complications
 - 7.9.2. Complications of Adenoidectomy
 - 7.9.3. Tonsillectomy Care
 - 7.9.4. Adenoidectomy Care
- 7.10. Complications and Care of Laryngeal Surgery
 - 7.10.1. Complications of endoLaryngeal Microsurgery
 - 7.10.2. Care of endoLaryngeal Microsurgery
 - 7.10.3. Tracheostomy
 - 7.10.4. Risk Factors for Chronic Laryngitis

Module 8. Proctology

- 8.1. Hemorrhoids
 - 8.1.1. Etiology
 - 8.1.3. Classification
 - 8.1.3. Treatment
 - 8.1.4. Postoperative Care
- 8.2. Anal Fissure
 - 8.2.1. Etiology
 - 8.2.2. Diagnosis
 - 8.2.3. Medical Treatment
 - 8.2.4. Surgical Management



Structure and Content | 33 tech

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- 8.3.1. Concept
- 8.3.2. Etiology
- 8.3.3. Classification
- 8.3.4. Treatment

8.4. Perianal Abscesses

- 8.4.1. Concept
- 8.4.2. Classification
- 8.4.3. Etiology
- 8.4.4. Treatment

8.5. Pilonidal Sinus

- 8.5.1. Concept
- 8.5.2. Etiology
- 8.5.3. Differential Diagnosis
- 8.5.4. Treatment

8.6. Intestinal Stomas

- 8.6.1. Introduction
- 8.6.2. Choice of Stoma Site
- 8.6.3. Prophylaxis of Complications
- 8.6.4. Complications

8.7. Hidradenitis Suppurativa

- 8.7.1. Epidemiology
- 8.7.2. Clinical Symptoms
- 8.7.3. Staging
- 8.7.4. Treatment

8.8. Pruritis Ani

- 8.8.1. Concept
- 8.8.2. Pathophysiology
- 8.8.3. Diagnosis
- 8.8.4. Treatment

3.9. Anal Region Dermatology

- 8.9.1. Infections
- 8.9.2. Tumours
- 8.9.3. Inflammatory Diseases
- 8.9.4. Treatment

8.10. Anal Incontinence

- 8.10.1. Concept
- 8.10.2. Epidemiology
- 8.10.3. Treatment
- 8.10.4. Prevention

Module 9. Other Procedures in Major Outpatient Surgery

- 9.1. Orthopedic Surgery and Traumatology in Major Outpatient Surgery
 - 9.1.1. Basic Concepts of Anatomy
 - 9.1.2. Bone Histology
 - 9.1.3. Main Trauma Surgeries in Major Outpatient Surgery
 - 9.1.4. Surgical complications
- 9.2. Superficial Venous Vascular Surgery in Major Outpatient Surgery
 - 9.2.1. Superficial Venous Vascular System
 - 9.2.2. Physiology of the Vascular System
 - 9.2.3. Main Surgeries of Vascular Surgery in Major Outpatient Surgery
 - 9.2.4. Surgical complications
- 9.3. Urology in Major Outpatient Surgery
 - 9.3.1. Anatomy of the Urinary Tract
 - 9.3.2. Physiology of the Urinary Tract
 - 9.3.3. Main Urological Surgeries in Major Outpatient Surgery
 - 9.3.4. Surgical complications
- 9.4. Maxillofacial Surgery in Major Outpatient Surgery
 - 9.4.1. Anatomy of the Oral Cavity
 - 9.4.2. Physiology of the Oral Cavity
 - 9.4.3. Main Maxillofacial Surgeries in Major Outpatient Surgery
 - 9.4.4. Surgical Complications

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9.5.	Plastic	Surgery Procedures: Otoplasty			
J.0.	9.5.1.	. ,			
	9.5.2.				
	9.5.3.				
	9.5.4.	Surgical complications			
9.6.		Surgery Procedures: Rhinoseptoplasty			
J.O.	9.6.1.	Anatomy of the Nasal Pyramid			
	9.6.2.	Concept of Rhinoseptoplasty			
	9.6.3.	Types of Rhinoseptoplasty			
	9.6.4.	Surgical Complications			
9.7.	Dermat	ology in Major Outpatient Surgery			
	9.7.1.				
	9.7.2.	Skin Appendages			
	9.7.3.	Main Surgeries in Dermatology in Major Outpatient Surgery			
	9.7.4.	Surgery Complications			
9.8.	Ophthalmology in Major Outpatient Surgery				
	9.8.1.	Structure of the Eyeball			
	9.8.2.	Concepts of Ocular Physiology			
	9.8.3.	Cataract Surgery			
	9.8.4.	Surgical complications			
9.9.	Antibio	tic Prophylaxis in Major Outpatient Surgery			
	9.9.1.	Concept of Antibiotic Prophylaxis			
	9.9.2.	Types of Surgery and Risk of Contamination			
	9.9.3.	Superficial and Deep Surgical Wound Infection			
	9.9.4.	Antibiotic Prophylaxis in the Procedures of Major Outpatient Surgery			
9.10.	Thromboembolic Prophylaxis in Major Outpatient Surgery				
	9.10.1.	Concept of Thromboembolic Prophylaxis			
	9.10.2.	Types of Prophylaxis			
	9.10.3.	Degrees of Recommendation			
	9.10.4.	Thromboembolic Prophylaxis in Major Outpatient Surgery Procedure			

Module 10. Transversal Subjects to Major Outpatient Surgery

10.1. Patient selection

- 10.1.1. Selection of Patients Based on Social Factors
- 10.1.2. Selection of Patients Based on the Surgical Procedure
- 10.1.3. Selection of Patients Based on Pathologies and/or Co-morbidities
- 10.1.4. Selection of Patients Based on their Recovery and Discharge Capacity
- 10.1.5. Selection of Patients Based on Available Health Centers

10.2. Quality Indicators

- 10.2.1. Patient Security
- 10.2.2. Quality Criteria
- 10.2.3. Quality Indicators
- 10.2.4. Complications that Interfere with the Quality of the Major Outpatient Surgery Process

10.3. Pain Control

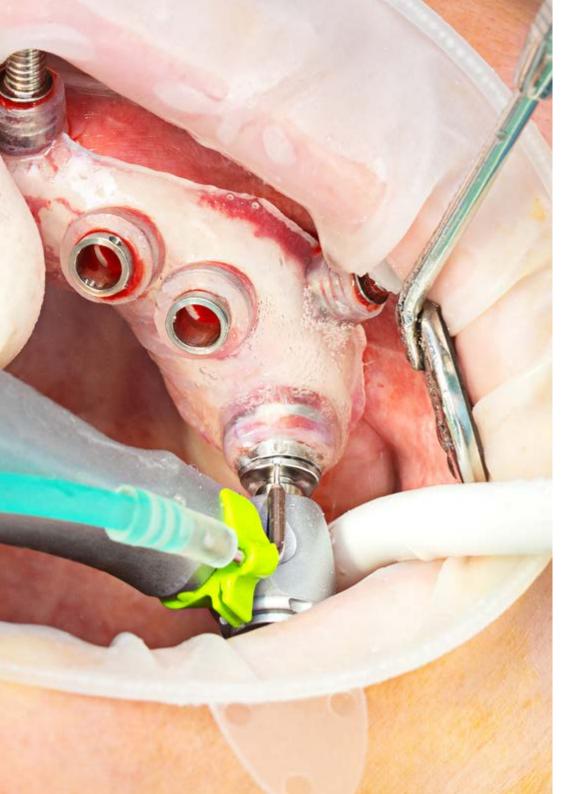
- 10.3.1. Physiological Response to Acute Post-operative Pain
- 10.3.2. Assessment and Evaluation of Post-operative Pain
- 10.3.3. Strategies for Post-operative Pain Control
- 10.3.4. Analgesia
- 10.4. The Role of Nursing
 - 10.4.1. Evolution of Nursing Care in the Major Outpatient Surgery
 - 10.4.2. Pre-operative Nursing Care
 - 10.4.3. Intraoperative Nursing Care
 - 10.4.4. Post-operative Nursing Care

10.5. Pre-anesthetic Study

- 10.5.1. Functions and Applications of the Pre-anesthetic Study
- 10.5.2. Medical History
- 10.5.3. Physical Examination
- 10.5.4. Complementary Tests
- 10.5.5. Anesthetic Techniques in Major Outpatient Surgery

10.6. Patient Satisfaction

- 10.6.1. Satisfaction Assessment
- 10.6.2. What do Patients who have Undergone Major Outpatient Surgery Value the Most?
- 10.6.3. Satisfaction with the Perioperative Process
- 10.6.4. Satisfaction with Pain Management



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- 10.7. Preparation of the Patient for Major Outpatient Surgery
 - 10.7.1. Pre-Operative Study
 - 10.7.2. Pre-operative Notice at Home
 - 10.7.3. Pre-operative Activities in the Health Center
 - 10.7.4. Scales and Questionnaires
- 10.8. Surgical Discharge Criteria
 - 10.8.1. Post-operative Phases of Patient Recovery
 - 10.8.2. Criteria for Discharge from PACU
 - 10.8.3. Discharge criteria from Environmental Adaptation Room
 - 10.8.4. Criteria Required for Discharge to a Safe Domicile
- 10.9. Structure and Material Resources
 - 10.9.1. Functional Program
 - 10.9.2. Structural Aspects of the Major Outpatient Surgery Unit
 - 10.9.3. Sterilization. Sanitary Equipment
 - 10.9.4. Cleaning and Sanitary Waste Management Protocols
- 10.10. General Aspects of the Treatment in Major Outpatient Surgery
 - 10.10.1. The Physiological and Pathophysiological Process of Wound Healing
 - 10.10.2. Wound Cleaning and Debridement
 - 10.10.3. Bacterial Load Management
 - 10.10.4. Wound Bed Materials and Products
 - 10.10.5. Materials and Products for Wound Covering
 - 10.10.6. Healing using the Mölndal Technique



A program designed to provide you with the latest advances in outpatie with the latest advances in outpatient thyroid surgery"





tech 38 | 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.



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.
- 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.





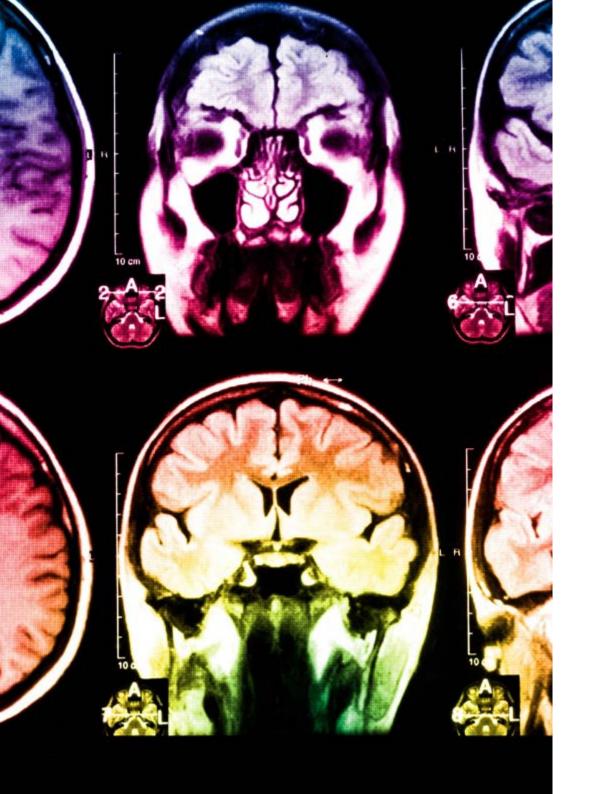
Relearning Methodology

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.

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 | 41 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 42 | 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.

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.

Effective learning ought to the expert will guide stude and

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 on the usefulness of learning by observing experts.

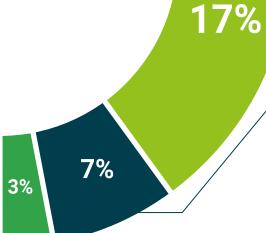
The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



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.









tech 46 | Certificate

This program will allow you to obtain your **Master's Degree diploma in Major Outpatient Surgery** 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.

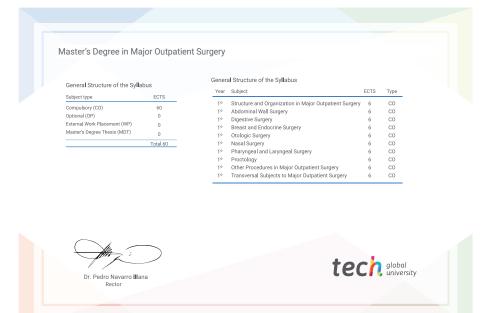
Title: Master's Degree in Major Outpatient Surgery

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.

health confidence people
leducation information tutors
guarantee accreditation teaching
institutions technology learning
community commitment



Master's Degree Major Outpatient Surgery

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

