



Postgraduate Diploma

Predominant Respiratory Pathology in Pulmonology

» Modality: online

» Duration: 6 months

» Certificate: TECH Technological University

» Dedication: 16h/week

» Schedule: at your own pace

» Exams: online

Website: www.techtitute.com/us/medicine/postgraduate-diploma/postgraduate-diploma-predominant-respiratory-pathology-pulmonology

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tech 06 | Introduction

Physicians specialized in pulmonological diseases must have exhaustive knowledge of the most common pathologies in order to provide the most updated treatments that favor patient recovery. Among these pathologies is Chronic Obstructive Pulmonary Disease (COPD), which is characterized by a chronic persistent airflow limitation caused by the inhalation of harmful particles, mainly tobacco smoke, and which is accompanied by respiratory symptoms and systemic manifestations. The social impact of the disease is notorious, since it is one of the three leading causes of death worldwide and, despite its high prevalence, there are significant failures due to under-diagnosis.

Asthma is a very prevalent disease, as well, more so in first world countries. In Spain, it is estimated that 5% of adults and 10% of children suffer from this pathology. In the last 15-20 years, there has been a significant decrease in mortality and hospitalization rates, thanks to the availability of drugs and better patient care in both primary and specialized units. Despite these advances, only one third of patients are able to keep it under control.

For its part, the study of sleep-disordered breathing has experienced enormous interest in recent years, too. Among them, the most important in terms of morbidity and mortality is Obstructive Sleep Apnea (OSA), which is considered a major public health problem. In recent years, these disorders have generated an increase in consultations, to such an extent that in some services they already constitute more than 40% of the demand.

Taking all this into account, TECH Technological University has designed a Postgraduate Diploma that focuses precisely on these diseases. Through a complete online syllabus, students will have the opportunity to update their knowledge and put into practice diagnostic techniques and therapies that are currently obtaining the best results.

The Postgraduate Diploma in Predominant Respiratory Pathology in Pulmonology contains the most complete and up-to-date academic program on the market. Its most notable features are:

- Practical cases presented by experts in Pulmonology
- The graphic, schematic, and eminently practical contents with which they are created, provide scientific and practical information on the disciplines that are essential for professional practice
- Practical exercises where self-assessment can be used to improve learning
- Special emphasis is placed on innovative methodologies in the approach to pulmonological affections
- Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- Content that is accessible from any fixed or portable device with an Internet connection



You will undertake a complete review of the most updated guidelines and scientific articles on the most prevalent respiratory pathology. A unique opportunity to access the latest resources"



Update your knowledge on the most prevalent respiratory pathologies with an innovative program that adapts to your needs and requirements"

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

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

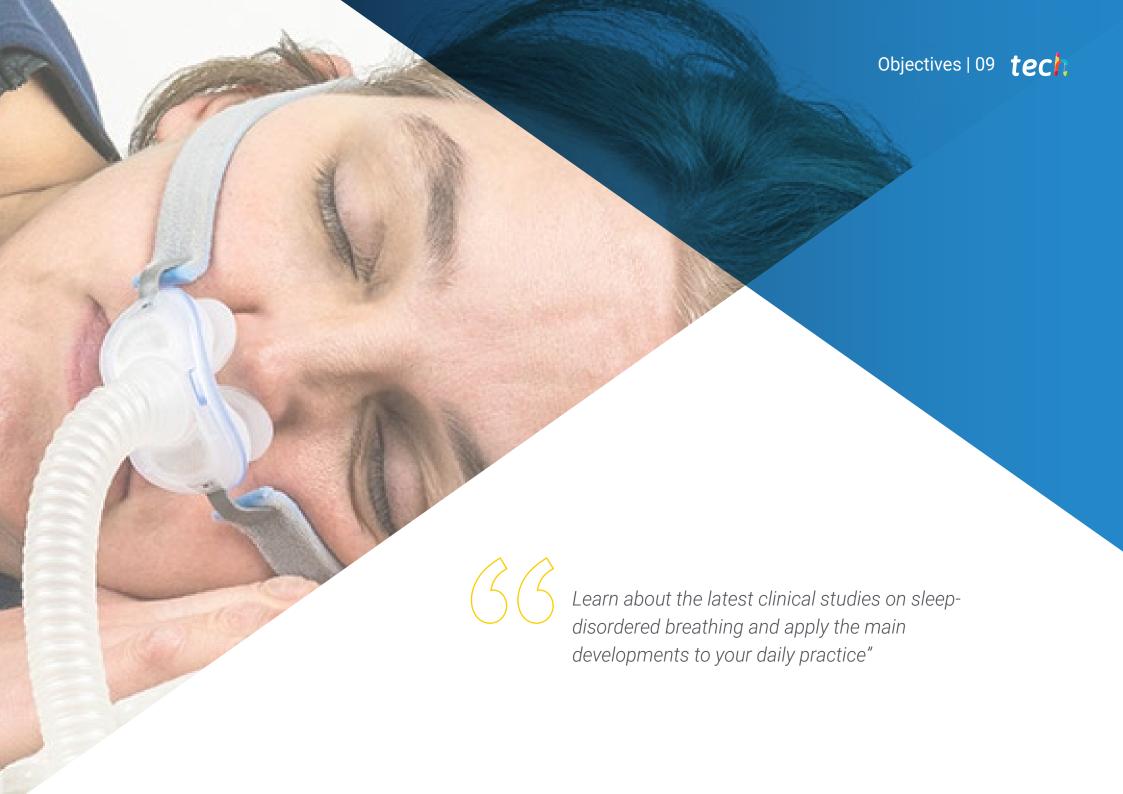
The design of this program focuses on Problem-Based Learning, which means the student must try to solve the different real-life situations of that arise throughout the academic program. For this purpose, the student will be assisted by an innovative interactive video system created by renowned and experienced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

Learn the most innovative methodologies to find the most appropriate approach to Respiratory Pathologies in each patient.

TECH provides you with a multitude of theoretical and practical resources that will be essential for your best performance in this medical area.







tech 10 | Objectives



General Objectives

- Provide an update on the latest scientific evidence available in published guidelines, scientific articles and systematic reviews
- * Address the fundamental aspects in treating pulmonary pathologies
- Update knowledge of the most frequent pathologies in Pulmonology





Specific Objectives

Module 1. Chronic Obstructive Pulmonary Disease

- Develop professional competencies aimed at optimizing comprehensive patientcentered care based on the latest available evidence
- Interpret the most commonly used complementary tests in the diagnosis and monitoring of COPD patients
- Know how to manage the main comorbidities associated with COPD
- Update the maintenance treatment of COPD

Module 2. Asthma

- Improve asthma control and patient quality of life through knowledge based on the latest scientific evidence available
- Interpret the most commonly used complementary tests in the diagnosis and monitoring of asthma patients
- Identify and manage the main comorbidities associated with asthma
- Update the maintenance treatment for asthma
- Learn to identify the subgroup of patients with severe uncontrolled asthma
- * Know the different phenotypes and specific asthma treatment recommendations
- Learn how to manage occupational asthma, pulmonary eosinophilia, and special circumstances such as asthma-pregnancy, exertion-induced asthma, aspirinexacerbated respiratory disease, etc.

Module 3. Sleep-Related Breathing Disorders

- Update knowledge on sleep-related breathing disorders
- Provide guidelines to make the best decisions in patient care based on a clinical summary of the most up-to-date literature
- Contribute to the specific knowledge of the scientific and technical aspects related to sleep disorders



Offer comprehensive care to COPD patients and achieve better outcomes with their treatments"





International Guest Director

Dr. Franck Rahaghi is one of the most prolific international figures in the field of Pneumology. Noted for his leadership in quality and medical care, as well as his commitment to clinical research, he has held several important positions at Cleveland Clinic, Florida. Among them, his roles as Chairman of Quality, Medical Director of the Respiratory Care Department and Director of the Pulmonary Hypertension Clinic are noteworthy.

Thanks to his studies and continuous preparation in this discipline, he has made several contributions in the rehabilitation of patients with various respiratory pathologies. These contributions and permanent academic improvement have allowed him to assume other responsibilities such as the position of Head of the Department of Pulmonary Education and Rehabilitation. In addition, he is a member of the Internal Review Committee, responsible for supervising the correct execution of research and clinical trials (Activated Protein C and IFN gamma-1b) inside and outside the aforementioned health institution.

In his solid preparation, he has established care links with centers of excellence such as the Rockefeller University Hospital in New York, as well as the Internal Medicine programs at the University of Illinois at Chicago and the University of Minnesota. He also studied at the Department of Interventional Pulmonary Pulmonology and Pulmonary Hypertension at the University of California-San Diego. He has also participated in important academic projects as an instructor in Genetic Medicine.

Dr. Rahaghi has authored and co-authored numerous articles published in renowned scientific journals in the medical field. Among the most recent and significant studies he has unveiled are his researches on the impact of COVID-19 on the respiratory health of patients, specifically on its effects in controlling Pulmonary Hypertension.

His other fields of interest include Scleroderma, Sarcoidosis AATD and ILD/IPF. He is also a consulting member of MedEdCenter Incorporated, a non-profit corporation dedicated to providing educational materials focused on pulmonary pathologies. An initiative from where he is committed to promote the education of patients and physicians through new technologies.



Dr. Rahaghi, Franck

- Medical Director, Department of Respiratory Care, Cleveland Clinic Hospital, Florida, USA
- · Director of the Pulmonary Hypertension Clinic attached to the
- · Cleveland Clinic Hospital, Florida, USA
- · Doctor of Medicine, University of San Francisco, San Francisco, USA
- · Master's Degree in Health Sciences/Administration at UC Berkeley



Make the most of this opportunity to surround yourself with expert professionals and learn from their work methodology"

tech 16 | Course Management

Management



Dr. Jara Chinarro, Beatriz

- · Acting Chief of the Pneumology Department, Puerta de Hierro University Hospital, Majadahonda
- Degree in Medicine and Surgery, Complutense University Madrid
- MIR Pulmonary Specialist
- Specialist in sleep disorders, CEAMS



Dr. Ussetti Gil, Piedad

- Emeritus Advisor in the Pulmonology Department, Puerta de Hierro University Hospital, Majadahonda
- Degree in Medicine and Surgery, Central University of Barcelona
- Specialist in Pulmonology
- Executive Master's Degree in Healthcare Leadership ESADE
- Honorary Professor in the Medicine Department, Autonomous University of Madric

Professors

Dr. Erro Iribarren, Marta

- * Specialist Physician in Pulmonology, Puerta De Hierro University Hospital
- Degree in Medicine and Surgery from the University of Navarra
- Specialist in Pulmonology
- Postgraduate Diploma in Non-invasive Mechanical Ventilation Methodology
- Postgraduate Course in Control and Treatment of Smoking, San Antonio Catholic University of Murcia

Dr. Malo de Molina, Rosa

- * Specialist Physician in Pulmonology, Puerta De Hierro University Hospital
- Degree in Medicine, University of Córdoba
- PhD courses and certificate of advanced studies, UAM
- Professor on the Master's Degree in Airway, Catholic University of Murcia; teaching collaborator at the Faculty of Medicine, Autonomous University of Madrid

Dr. Trisán Alonso, Andrea

- Specialist Physician in the Pulmonology Service, Puerta De Hierro University Hospital, Majadahonda
- * Specialist Physician in Pulmonology, Puerta De Hierro University Hospital, Majadahonda
- Degree in Medicine, University of Oviedo
- Master's Degree in Advances in Diagnosis and Treatment of Airway Diseases, San Antonio Catholic University of Murcia
- Postgraduate Diploma in Severe Asthma

Dr. Herrero Huertas, Julia

- * Attending Physician, Sleep and VMNI Service, Jiménez Díaz Foundation Hospital
- Specialist in Pulmonology
- Degree in Medicine from the Complutense University of Madrid.

Dra. Alcorta Mesas, África

- * Specialist in Pulmonology, Infanta Leonor Hospital in Madrid
- Active member of the COPD, Tobacco and Sleep/Ventilation working groups of the Sociedad Madrileña de Neumología Neumomadrid
- Degree in Medicine from the Complutense University of Madrid
- * Specialist in Pulmonology, Gregorio Marañón General University Hospital
- Master's Degree in Clinical Management Units, Catholic University San Antonio
- Master's Degree in Smoking Control and Treatment, San Antonio Catholic University
- Master's Degree in Diagnosis and Treatment of Airway Diseases, San Antonioy Catholic University

Dra. Gómez Punter, Rosa Mar

- Specialist in Pulmonology, La Princesa University Hospital, Valencia
- Degree in Medicine and Surgery, Faculty of Medicine and Surgery, Valencia
- Master's Degree in Advances in Diagnosis and Treatment of Airway Diseases, San Antonio Catholic University
- * Master's Degree in Smoking, San Antonio Catholic University

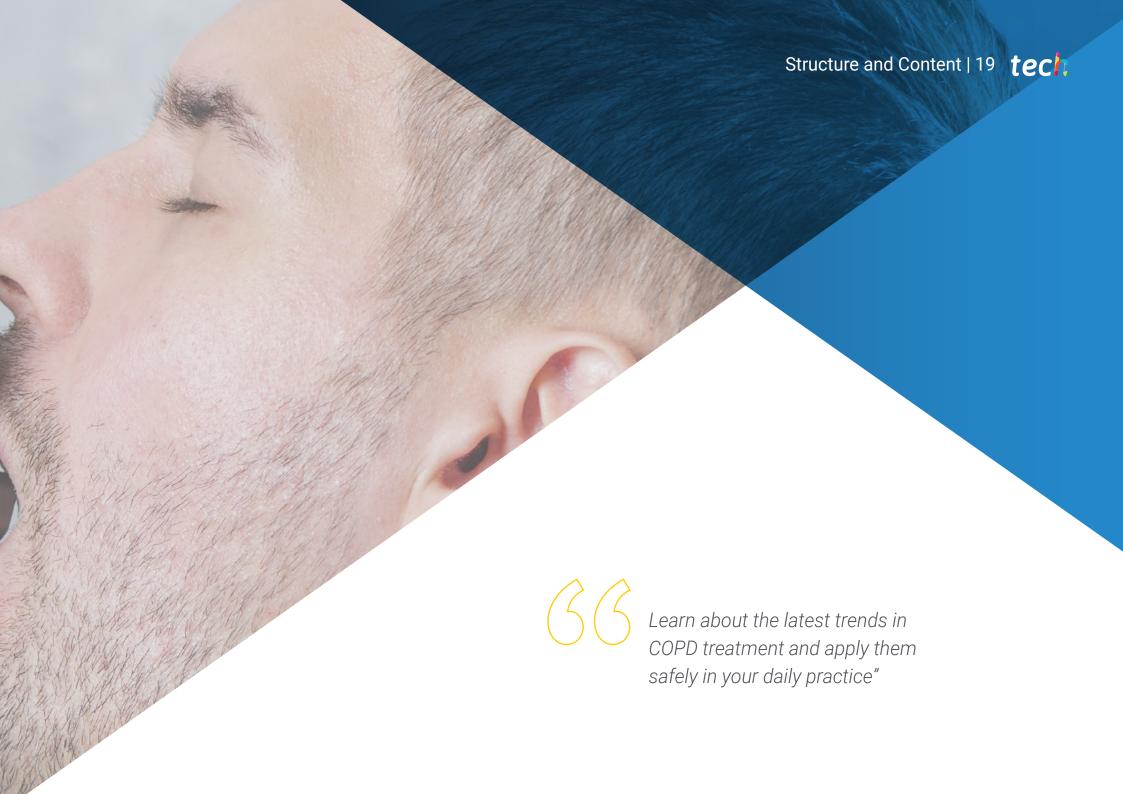
Dr. Salgado Aranda, Sergio

- Specialist in Pulmonology, Tajo University Hospital
- Degree in Medicine, Complutense University of Madrid
- Master's Degree in Advances in Diagnosis and Treatment of Airway Diseases, San Antonio Catholic University
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 Postgraduate Diploma in Bronchieciasis Alcalá University
- Postgraduate Diploma in Condiplomai/postgraduatediplomases, University San Pablo

 Predominant-respiratory-
- pathology-pulmonology
 Professor on the Master's Degree in Thoracic Oncology, CEU University





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Module 1. Chronic Obstructive Pulmonary Disease

- 1.1. Aetiopathogenesis
 - 1.1.1. Epidemiology
 - 1.1.2. Risk Factors
 - 1.1.3. Pathogenesis
- 1.2. EPOC Pathophysiology and Clinical Presentation
 - 1.2.1. Pathophysiology
 - 1.2.2. Clinical Manifestations
- 1.3. Diagnosis and Characterization
 - 1.3.1. Diagnosis: Anamnesis, Physical Examination, Imaging Tests, Clinical Analyses and Respiratory Functional Examination
 - 1.3.2. Characterization
 - 1.3.2.1. Degree of Pulmonary Obstruction
 - 1.3.2.2. Clinical Types: Emphysema and Chronic Bronchitis
 - 1.3.2.3. Risk of Exacerbation
 - 1.3.2.4. Symptoms
- 1.4. COPD Classification according to COPD Guidelines: GesEPOC (The Spanish COPD Guidelines) and GOLD (Global Initiative for Chronic Obstructive Lung Disease)
 - 1.4.1. GesEPOC
 - 1.4.2.1. Low Risk COPD
 - 1.4.2.2. High Risk COPD
 - 1.4.2.3 Classification by Clinical Impact and Stability
 - 1.4.2. GOLD
 - 1.4.2.1. GOLD A
 - 1.4.2.2. GOLD B
 - 1.4.2.3. GOLD C
 - 1.4.2.4. GOLD D
 - 1.4.2.5. Monitoring
- 1.5. Maintenance Pharmacological Treatment
 - 1.5.1. Treatment Objectives
 - 1.5.2. Drugs:
 - 1.5.2.1. Inhaled Treatment
 - 1.5.2.1.1. Bronchodilators
 - 15212 Inhaled Corticosteroids

- 1.5.2.2. Oral Treatment
 - 1.5.2.2.1. Theophylline
 - 1.5.2.2.2. Roflumilast
 - 1.5.2.2.3 Azithromycin
- 1.6. Approach to Smoking in COPD
 - 1.6.1. Epidemiology
 - 1.6.2. The Diagnosis of Tobacco Use in COPD
 - 1.6.3. Non-Pharmaceutical Therapeutic Interventions
 - 1.6.4. Pharmacological Therapeutic Interventions
- 1.7. Non-Pharmacological Treatment
 - 1.7.1. Oxygen Therapy and NIMV
 - 1.7.2. Vaccines
 - 1.7.3. Nutrition
 - 1.7.4. Palliative Treatment of Dyspnea
 - 1.7.5. Lung Volume Reduction by Bronchoscopy
 - 1.7.6. Surgery: Volume Reduction and Lung Transplantation
- 1.8. COPD Exacerbation
 - 1.8.1. Etiology and Pathogenesis
 - 1.8.2. Severity Classification
 - 1.8.3. Treatment
- 19 Comorbidities
 - 1.9.1. Prevalence
 - 1.9.2. Impact on Mortality
 - 1.9.3. Screening and Management
- 1.10. Rehabilitation and Physical Exercise in COPD
 - 1.10.1. Rehabilitation in COPD
 - 1.10.1.1. Benefits
 - 1.10.1.2. Indications
 - 1.10.1.3. Rehabilitation Program Structure
 - 1 10 1 4 Rehabilitation after COPD Exacerbation
 - 1.10.1.5. Special Situations
 - 1.10.2. Physical Activity
 - 1.10.2.1. Measurement
 - 1.10.2.2. Interventions

Module 2. Asthma

- 2.1. Etiopathogenesis
 - 2.1.1. Epidemiology
 - 2.1.2. Risk factors
 - 2.1.3. Pathogenesis
- 2.2. Diagnosis
 - 2.2.1. Clinical Symptoms
 - 2.2.2. Spirometry and Bronchodilator Test
 - 2.2.3. Bronchial Provocation Tests
 - 2.2.4. Fractional Exhaled Nitric Oxide (FeNO) Determination
 - 2.2.5. Induced Sputum
 - 2.2.6. Electronic Nose
 - 2.2.7. Volatile Organic Compounds in Exhaled Air
 - 2.2.8. Diagnostic Algorithm
- 2.3. Control and Severity Classification
 - 2.3.1. Control
 - 2.3.2. Severity
- 2.4. Maintenance Treatment
 - 2.4.1. Treatment Objectives
 - 2.4.2. Drugs
 - 2.4.3. Step Treatment
 - 2.4.4. Avoiding Allergens and Environment
 - 2.4.5. Education and Written Action Plans
- 2.5. Asthma Exacerbation Treatment
 - 2.5.1. Risk factors
 - 2.5.2. Severity Assessment
 - 2.5.3. Treatment according to Severity
 - 2.5.4. Emergency Discharge Criteria
 - 2.5.5. Hospitalization Criteria
 - 2.5.6. Hospital Discharge Criteria
 - 2.5.7. Outpatient Monitoring after Exacerbation

- 2.6. Severe Uncontrolled Asthma
 - 2.6.1. Epidemiology
 - 2.6.2. Diagnostic Procedure
 - 2.6.3. Severe Asthma Phenotypes
 - 2.6.4. Treatment Algorithm
- 2.7. Occupational Asthma
 - 2.7.1. Causative Agents
 - 2.7.2. Classification
 - 2.7.3. Diagnosis
 - 2.7.4. Treatment
 - 2.7.5. Asthma Aggravated by Work
- 2.8. Nasal Pathology Associated with Asthma
 - 2.8.1. Rhinitis
 - 2.8.1.1. Diagnosis
 - 2.8.1.2. Classification
 - 2.8.1.3. Treatment
 - 2.8.2. Rhinosinusitis and Nasal Polyposis
 - 2.8.2.1. Diagnosis
 - 2.8.2.2. Treatment
- 2.9. Pulmonary Eosinophilia Associated with Asthma
 - 2.9.1. Chronic Eosinophilic Pneumonia
 - 2.9.2. Allergic Bronchopulmonary Aspergillosis
 - 2.9.3. Eosinophilic Granulomatosis with Polyangiitis
- 2.10. Special Situations
 - 2.10.1. Asthma and COPD Overlap (ACO)
 - 2.10.2. Respiratory Disease Exacerbated by Acetylsalicylic Acid
 - 2.10.3. Asthma and Pregnancy
 - 2.10.4. Exercise-Induced Asthma
 - 2.10.5. Pseudoasthmas

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Module 3. Sleep-Related Breathing Disorders

- 3.1. Physiology and Epidemiology
 - 3.1.1. Sleep Disorders Classification
 - 3.1.2. Obstructive Sleep Apnea (OSA)
 - 3.1.3. Pathophysiology
 - 3.1.4. Epidemiology
 - 3.1.5. OSA as a Public Health Problem
- 3.2. OSA Risk Factors
 - 3.2.1. Age and Sex
 - 3.2.2. Obesity
 - 3.2.3. Menopause
 - 3.2.4. Craniofacial Anatomy and Heredity
 - 3.2.5. Tobacco, Alcohol and Drugs
 - 3.2.6. Supine Position
- 3.3. OSA and Comorbidities
 - 3.3.1. OSA and Respiratory Diseases
 - 3.3.2. AHT and cardiovascular risk
 - 3.3.3. Endocrine Alterations
 - 3.3.4. Neurological Alterations
 - 3.3.5. Cancer
- 3.4. OSA Clinical Manifestations
 - 3.4.1. Symptoms and Signs
 - 3.4.2. Physical Exploration
 - 3.4.3. Complementary Evaluations
 - 3.4.4. Referral Criteria to the Sleep Unit
- 3.5. Diagnosis
 - 3.5.1. Medical History
 - 3.5.2. Polysomnography
 - 3.5.3. Respiratory Polygraphy
 - 3.5.4. Simplified Methods
 - 3.5.5. Other Complementary Tests





Structure and Content | 23 tech

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- 3.6.1. General Measures
- 3.6.2. Continuous Positive Airway Pressure (CPAP) Treatment
- 3.6.3. Other Positive Pressure Modalities: BiPAP and Servoventilator
- 3.6.4. Different Options to Positive Pressure
- 3.7. OSA in Special Population Groups
 - 3.7.1. Children and Adolescents
 - 3.7.2. The Elderly
 - 3.7.3. Women
 - 3.7.4. OSA and Pregnancy
- 3.8. Central Apnea Syndrome
 - 3.8.1. Clinical Manifestations
 - 3.8.2. Diagnosis
 - 3.8.3. Treatment
- 3.9. Hypoventilation Syndromes
 - 3.9.1. Alveolar Hypoventilation Syndromes Classification
 - 3.9.2. Hypoventilation Obesity Syndrome
 - 3.9.3. Idiopathic Central Alveolar Hypoventilation
 - 3.9.4. Congenital Central Alveolar Hypoventilation Syndrome
 - 3.9.5. Drug or Substance Induced Hypoventilation during Sleep
 - 3.9.6. Medical Disorder Induced Hypoventilation during Sleep
- 3.10. Other Sleep Disorders
 - 3.10.1. Hypersomnias
 - 3.10.2. Parasomnias and Restless Legs Syndrome
 - 3.10.3. Insomnia and Somnolence





tech 26 | 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.



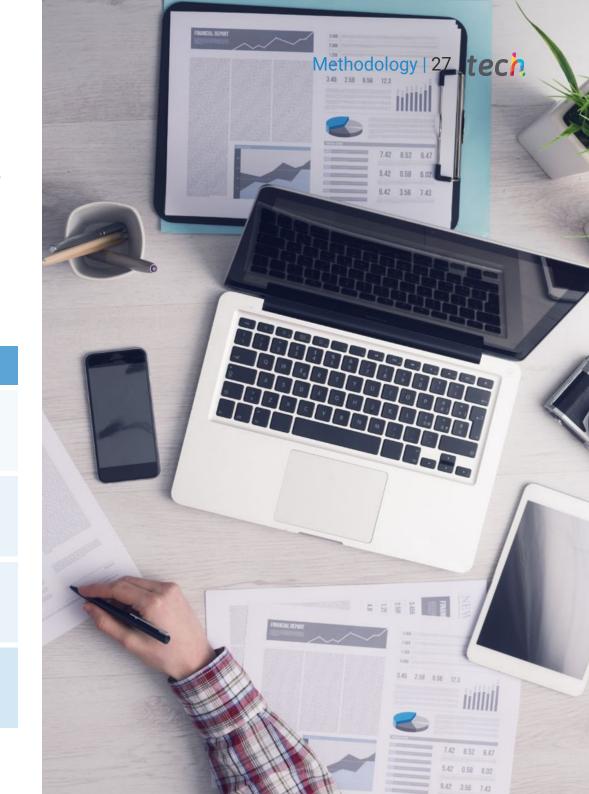
According to Dr. Gérvas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that 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:

- 1. 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 | 29 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.

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

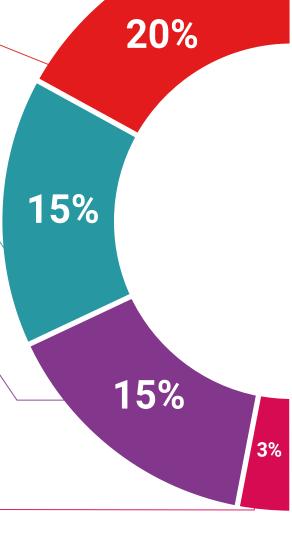
TECH introduces students to the latest techniques, the latest educational advances and to the forefront of current medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many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



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.

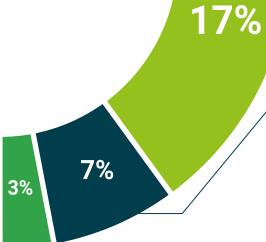
The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



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.









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The **Postgraduate Diploma in Predominant Respiratory Pathology in Pulmonology** contains the most complete and up-to-date program on the market.

After the student has passed the assessments, they will receive their corresponding **Postgraduate Diploma** issued by **TECH Technological University** via tracked delivery*.

The diploma issued by **TECH Technological University** will reflect the qualification obtained in the Postgraduate Diploma, and meets the requirements commonly demanded by labor exchanges, competitive examinations, and professional from career evaluation committees.

Title: Postgraduate Diploma in Predominant Respiratory Pathology in Pulmonology Official N° of hours: **450 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.



Postgraduate Diploma

Predominant Respiratory Pathology in Pulmonology

- » Modality: online
- » Duration: 6 months
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online

