



Tear Ducts

and Anophthalmic Cavity Management

» 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-tear-ducts-anophthalmic-cavity-management

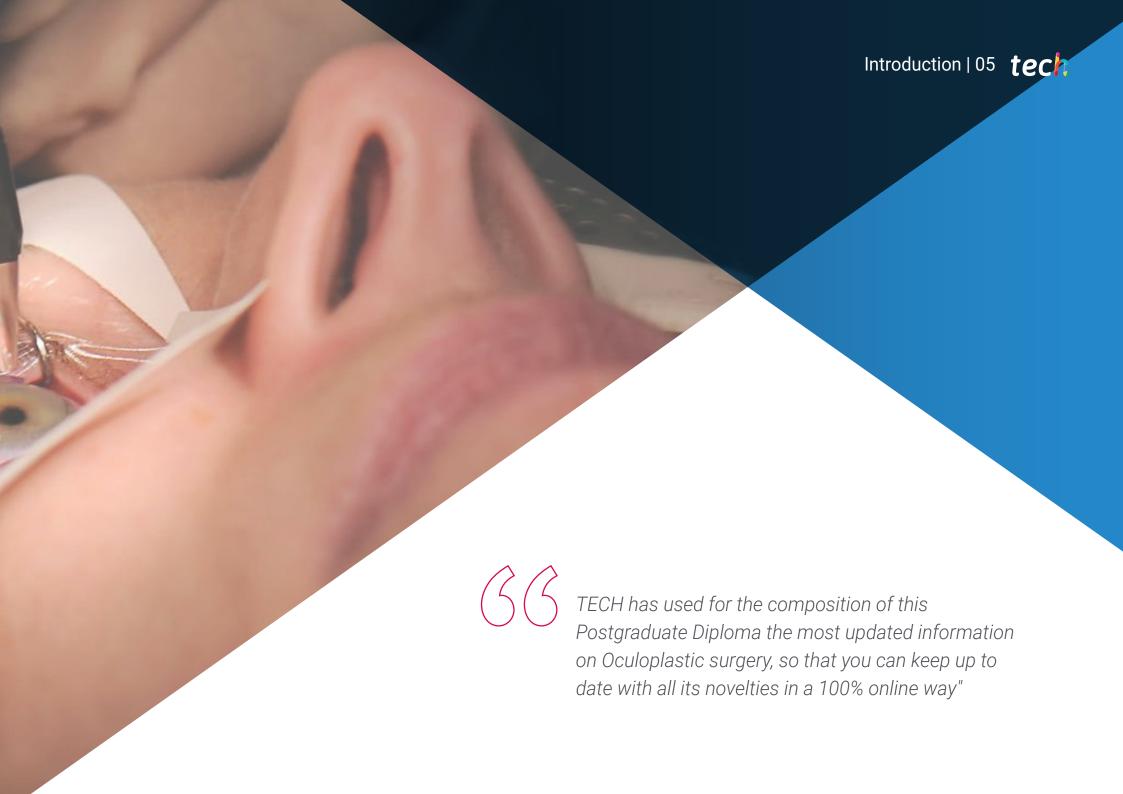
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tech 06 | Introduction

Whether at a medical or surgical level, Oculoplasty has become one of the most demanded interventions within Ophthalmology. The possibilities that arise in this branch and in terms of the management of patients with conditions in the periocular facial structures, as well as the highly promising results that have been obtained over the years, make it one of the most important subspecialties in the medical sector. It includes a wide variety of methods, from the treatment of ocular tumors or entropion and extropion disorders, to aesthetic intervention with the correction of bags or eyelid drooping.

The catalog of medical and surgical procedures that it handles, added to the great advances that have been made in recent decades, is what has led TECH to develop this Postgraduate Diploma in Tear Ducts and Anophthalmic Cavity Management. This is a program designed by experts in Ophthalmology with which the specialist will be able to get up to date, in a 100% online way, on all the news related to the anatomy and physiology of this part of the human body, as well as the latest medical advances that have been made in terms of improving the diagnosis and treatment of possible conditions that may affect the periocular region.

For this purpose, it will have 450 hours of theoretical, practical and additional material presented in different formats, so that the updating can be done in a dynamic way and with a personalized deepening. In addition, all the content will be available from the beginning of the academic course, so that the graduate can organize himself without any problem, and can be downloaded to any device with internet connection (either PC, tablet or mobile) for offline consultation whenever needed, even after completing the Postgraduate Diploma.

This **Postgraduate Diploma in Tear Ducts and Anophthalmic Cavity Management** contains the most complete and up-to-date scientific program on the market. The most important features include:

- The development of case studies presented by Ophthalmology experts
- 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



A degree that delves into the latest developments related to the innervation and irrigation of the periocular area through a dynamic and comprehensive syllabus"



You will have hundreds of hours of the best material, so that you can get the most out of this academic experience, with a personalized schedule and without face-to-face classes"

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.

In less than 450 hours you will have gained detailed knowledge of the latest developments related to the lacrimal pathways and the management of the anophthalmic cavity.

It is a degree designed by experts in Ophthalmology who know in detail the needs of professionals in this field.







tech 10 | Objectives

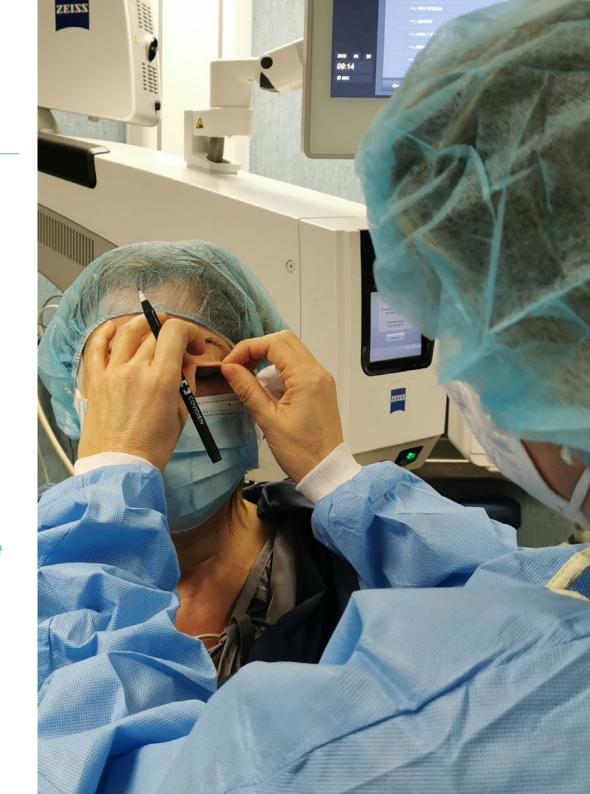


General Objectives

- Know in depth the periocular and orbital anatomy, the lacrimal duct, nasal cavity and paranasal sinuses, as well as facial anatomy
- Learn how to explore the lacrimal ducts by permeability tests in the office and/or by complementary imaging tests
- Know the different types of synthetic orbital implants available



If you are looking for a program that allows you to combine your practice, your personal life and your updating, TECH is the best option and this Postgraduate Diploma is the opportunity you need to achieve it"





Specific Objectives

Module 1. Aspects in Oculoplastic Surgery

- * Know how to identify the innervation and irrigation of the periocular area
- Learn how to mark the skin to improve the scars generated by incisions
- Know the main drugs used in anesthetic infiltration
- Learn the wide range of surgical material available in our surgical practice
- Acquire a broad knowledge of the preoperative management of the anticoagulated/anti-aggregation patient

Module 2. Tear Ducts

- Know in depth the anatomy and physiology of the lacrimal duct
- Know the diagnosis and treatment of lacrimal punctal obstruction. Technique of punctaplasty
- Learn how to diagnose and treat lower lacrimal duct obstruction. Endonasal RCD and external RCD
- Know the diagnosis and treatment of canalicular obstruction. CDCR.
 Tubes. Complications
- Know how to detect infectious and inflammatory pathology of the lacrimal duct: canaliculitis, acute dacryocystitis, inflammatory disease of the lacrimal punctum
- Identify lacrimal sac tumors for a correct treatment and better prognosis
- Learn the main congenital malformations of the lacrimal duct and their association with systemic diseases and syndromes

Module 3. Anophthalmic Cavity

- Assess the monophthalmic patient
- Have a deep knowledge of the orbital anatomy in order to perform surgical techniques such as evisceration, enucleation or exenteration
- Learn how to use autologous material/dermal fat grafting
- Understand the diagnosis and treatment of anophthalmic syndrome: enophthalmos and sinking of the upper eyelid
- Learn how to assess and surgically treat the retracted anophthalmic orbit
- Learn how to evaluate the anophthalmic cavity in the pediatric age





Management



Dr. Ibáñez Flores, Nuria

- Head of the Oculoplastics Department at the ICR of Barcelona (Institut Català de Retina)
- Adjunct professor of the medical degree at the UIC (International University of Catalonia)
- Director and coordinator of the surgical master's degree of the UIC (International University of Catalonia) in Oculoplastics,
 Orbit and Lacrimal Ducts
- Reviewer of the Archives of the Spanish Society of Ophthalmology
- Member of the Spanish Society of Ocular and Orbital Plastic Surgery (SECPOO)
- Responsible and coordinator of the interhospital sessions of Oculoplastics taught at ICF
- Doctor in Medicine and Surgery from the Autonomous University of Barcelona
- Degree in Medicine and Surgery from the University of Barcelona, Bellvitge Teaching Unit



Dr. Pascual González, Macarena

- Medical Specialist in Ophthalmology at General University Hospital Gregorio Marañón. Section of Oculoplasty, Tear Ducts and Orbit
- Collaborating lecturer in the subject of Ophthalmology at the Complutense University of Madrid
- Member of the Spanish Society of Ocular and Orbital Plastic Surgery (SECPOO)
- Fellow of European Board of Ophthalmology (FEBO)
- Degree in Medicine from the University of Malaga
- Specialist in Ophthalmology at the General University Hospital Gregorio MarañónMaster in Aesthetic, Regenerative and Anti-Aging Medicine at the Complutense University of Madrid



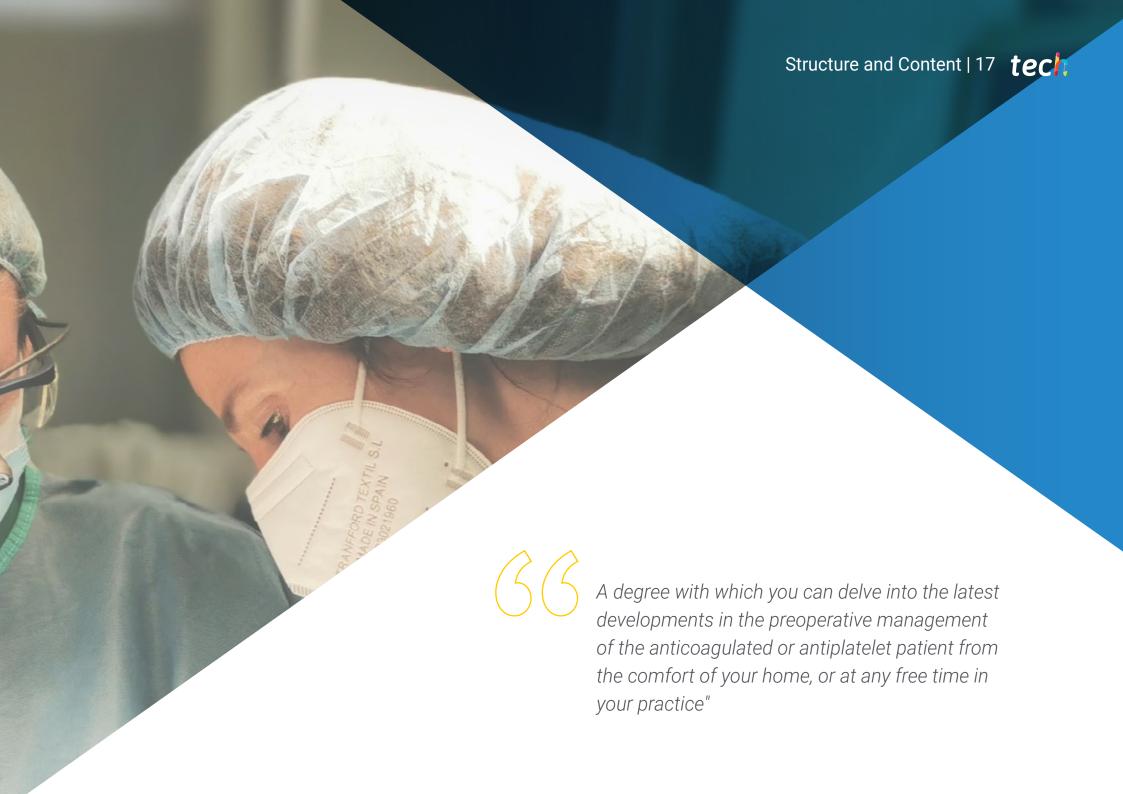
Course Management | 15 tech

Professors

Dr. Laiseca, Andrea

- * Associate Ophthalmologist of Clínica Drs. Laiseca. Ocular prosthesis
- FEA of the Ophthalmology Service of the University Hospital of Getafe, section of Oculoplasty, lacrimal ducts and orbit.
- Fellow European Board of Ophthalmology (FEBO). 2018
- Collaborating Professor Cardenal Herrera University: "Master of Ophthalmology. Oculoplastic and tear ducts update."
- Member of the Spanish Society of Ocular and Orbital Plastic Surgery (SECPOO).
- Degree in Medicine and Surgery from the University of Zaragoza. 2013
- * Specialist in Ophthalmology by the Barraquer Ophthalmology Center. 2018





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Module 1. Aspects in Oculoplastic Surgery

- 1.1. Periocular and Orbital Anatomy
 - 1.1.1. Eyebrows
 - 1.1.2. Eyelids
 - 1.1.3. Orbital Bones
 - 1.1.4. Muscle
 - 1.1.5. Canthal Tendons
 - 1.1.6. Septum and Preaponeurotic Fat
 - 1.1.7. Conjunctiva
- 1.2. Anatomy of the Lacrimal Duct, Nasal Cavity and Paranasal Sinuses
 - 1.2.1. Lacrimal System
 - 1.2.2. Nasal Anatomy
 - 1.2.3. Paranasal Sinuses
- 1.3. Facial Anatomy
 - 1.3.1. Skin and Tissue Subcutaneous
 - 1.3.2. Musculature of Facial Expression
 - 1.3.3. Superficial Musculoaponeurotic System (SMAS) and Associated Fat Packages
 - 1.3.4. Galea
 - 1.3.5. Temporoparietal Fascia
 - 1.3.6. Suspensory Ligaments
- 1.4. Innervation of the Periocular Area
 - 1.4.1. Sensory Innervation
 - 1.4.1.1. Ophthalmic Branch of the Trigeminal Nerve (V1)
 - 1.4.1.2. Maxillary Branch of the Trigeminal Nerve (V2)
 - 1.4.2. Innervation of the Facial Musculature
 - 1.4.2.1 Facial Nerve
 - 1.4.3. Innervation of the Extraocular Muscles
 - 1.4.3.1. Innervation of the Extraocular Muscles
 - 1.4.3.2. Fourth Cranial Nerve (IV)
 - 1.4.3.2. Sixth Cranial Nerve (VI)
 - 1.4.4. Autonomous Innervation
 - 1.4.4.1. Sympathetic
 - 1.4.4.2. Parasympathetic

- 1.5. Irrigation of the Periocular Area
 - 1.5.1. Arterial Irrigation
 - 1.5.1.1. External Carotid Artery
 - 1.5.1.1.1. Facial Artery
 - 1.5.1.1.2. Internal Maxillary Artery
 - 1.5.1.1.3. Superficial Temporal Artery
 - 1.5.1.2. Internal Carotid Artery
 - 1.5.1.3. Anastomosis Between the Internal and External Carotid Arteries
 - 1.5.2. Venous Drainage
 - 1.5.3. Lymphatic Drainage
- 1.6. Surgical instruments
 - 1.6.1. Scalpel Blades and other Cutting Instruments
 - 1.6.2. Scissors
 - 1.6.3. Tweezers
 - 1.6.4. Separators/Retractors
 - 1.6.5. Needle Holders
 - 1.6.6. Sutures
- 1.7. Skin Marking and Local Anesthesia
 - 1.7.1. Markers
 - 1.7.2. Incisions in Natural Grooves
 - 1.7.3. Incisions Adjacent to Anatomical Structures
 - 1.7.4. Main Drugs Used in Local Infiltration
 - 1.7.4.1. Lidocaine
 - 1.7.4.2. Bupivacaine
 - 1.7.4.3. Sodium Bicarbonate
 - 1.7.5. Infiltration/Blocking Techniques
- 1.8. Preoperative Management of the Anticoagulated/Antiaggregate Patient

Structure and Content | 19 tech

1	9	Hemostasis a	and Achiration

1.9.1. Hemostasis

1.9.1.1. Tamponade

1.9.1.2. Cauterization

1.9.1.3. Bone Waxing

1.9.1.4. Drainages

1.9.1.5. Aspiration

1.10. Imaging Tests

Module 2. Tear Ducts

2.1. Lacrimal Pathways

2.1.1. Lacrimal Duct

2.1.1.1. Tear Drainage System

2.1.1.2. Lacrimal Points

2.1.1.3. Canalicul

2.1.1.4. Common Canaliculus

2.1.1.5. Lacrimal Sac

2.1.1.6. Nasolacrimal Duct

2.1.2. Physiology of the Lacrimal Duct

2.1.2.1. Tear Drainage System

2.1.2.2. Lacrimal Points

2.1.2.3. Canalicul

2.1.2.4. Common Canaliculus

2.1.2.5 Lacrimal Sac

2.2. Exploration of the Lacrimal Ducts

2.2.1. Exploration in Consultation: Tear Duct Patency Tests

2.2.1.1. Irrigation or Syringing of the Lacrimal Duct

2.2.1.2. Flourescein Disappearance Test

2.2.1.3. Jones Staining Test

2.2.1.4. Primary

2.2.1.5. Secondary

2.2.2. Complementary Tests

2.2.2.1. Dacryocystography

2.2.2.2. Dacryotac

2.2.2.3. Dacryogammagraphy

2.2.2.4. Endoscopic Nasal Diagnosis

2.3. Diagnosis and Treatment of Lacrimal Punctal Obstruction

2.3.1. Clinical Manifestations

2.3.2. Causes

2.3.3. Diagnosis of Lacrimal Punctal Obstruction

2.3.4. Differential Diagnosis

2.3.5. Techniques of Punctaplasty

2.3.6. Postoperative Period and Complications of Dotoplasty

2.4. Diagnosis and Treatment of Lower Lacrimal Duct Obstruction

2.4.1. Clinical Manifestations

2.4.2. Causes

2.4.3. Diagnosis of Lower Lacrimal Duct Obstruction

2.4.4. Treatment of Lower Lacrimal Duct Obstruction

2.4.4.1. Dacryocystorhinostomy (DCR)

2.4.4.1.1. Endomonasal Dacryocystorhinostomy

2.4.4.1.1.1. History and Evolution of the Endonasal DCR

2.4.4.1.1.2. Techniques of Endonasal Dacryocystorhinostomy

2.4.4.1.1.3. Selective Endonasal RCD

2.4.4.1.1.4. Endonasal Laser RCD

2.4.4.1.1.5. Postoperative Period for Endonasal RCD

2.4.4.1.1.6. Complications of Endonasal RCD

2.4.4.2 External Dacryocystorhinostomy

2.4.4.2.1. History and Evolution of External DCR

2.4.4.2.2. External Dacryocystorhinostomy Techniques

2.4.4.2.3. Postoperative Period of External DCR

2.4.4.2.4. Complications of External DCR

2.4.4.3 Dacryocystectomy

2.4.4.3.1. Indications

2.4.4.3.2. Surgical Technique

2.4.4.3.3. Post-Operative

2.4.4.3.4. Complications

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2.5.	Diagnosis and Treatment of Canalicular Obstruction			2.8.5.	Treatment
	2.5.1.	Clinical Manifestations		2.8.6.	Prognosis
	2.5.2.	2.5.2. Causes 2.		Functional Epiphora	
	2.5.3. Exploration and Diagnosis of Canalicular Obstruction			2.9.1.	Functional Epiphora
	2.5.4.	Indications for Conjunctivodacryocryocys Torhinostomy		2.9.2.	Epiphora Causes
	2.5.5.	Techniques of conjunctivodacryocryocys Torhinostomy		2.9.3.	Functional Epiphora Diagnosis
	2.5.6.	Pyrex Tubes		2.9.4.	Anamnesis and Exploration
	2.5.7.	Metereaux Tubes		2.9.5.	Diagnostic Tests
	2.5.8.	Complications of Conjunctivodacryocryocys Torhinostomy			2.9.5.1. Lacrimal Duct Irrigation
2.6.	Controversy Between Endonasal DCR and External DCR				2.9.5.1.1. Dacryocystography (DCG)
	2.6.1. Medicine Based on Scientific Evidence				2.9.5.1.2. Dacryotac (DCT)
	2.6.2. Advantages and Disadvantages of Endonasal RCD				2.9.5.1.3. Dacryocystogammagraphy (DSG)
	2.6.3.	Advantages and Disadvantages of External RCD		2.9.6.	Functional Epiphora Treatment
	2.6.4.	Comparison of Endonasal RCD vs. External RCD			2.9.6.1. Lower Eyelid Shortening Surgeries
	2.6.5. Conclusions				2.9.6.2. Intubation
2.7.	Infectious and Inflammatory Pathology of the Lacrimal Duct				2.9.6.3. Dacryocystorhinostomy
	2.7.1.	Canaliculitis		2.9.7.	Therapeutic Protocol
		2.7.1.1. Clinical Manifestations 2.10.		Lacrima	al Duct Congenital Pathology Lacrimal Duct
		2.7.1.2. Causes		2.10.1.	Lacrimal Duct Congenital Malformations
		2.7.1.3. Diagnosis of Canaliculitis			2.10.1.1. Embryology
		2.7.1.4. Treatment of Canaliculitis			2.10.1.2. Lacrimal Point and Canaliculi
	2.7.2.	Acute Dacryocystitis (ACD)			2.10.1.3. Dacryocystocele
		2.7.2.1. Clinical Manifestations of ACD			2.10.1.4. Lacrimal Fistula
		2.7.2.2. ACD Causes		2.10.2.	Associations of Systemic Diseases and Syndromes
		2.7.2.3. ACD Diagnosis		2.10.3.	Congenital Obstruction of the Lacrimonasal Duct
		2.7.2.4. DCA Treatment			2.10.3.1. Clinical Manifestations
	2.7.3.	Lacrimal Punctal Inflammatory Disease (LIPD)		2.10.4.	Diagnostic
		2.7.3.1. EIPL Diagnosis		2.10.5.	Treatment
		2.7.3.2. EIPL Treatment			2.10.5.1. Conservative Medical Treatment
2.8.	Lacrimal Sac Tumors				2.10.5.2. Probing
	2.8.1. Clinical Manifestations				2.10.5.3. Intubation
	2.8.2.	Diagnostic			2.10.5.4. Catheter-Balloon Dilatation
	2.8.3.	2.8.3. Histological Variants			2.10.5.5. Dacryocystorhinostomy
	2.8.4. Differential Diagnosis				2.10.5.6. Treatment Protocol

Module 3. Anophthalmic Cavity

- 3.1. Monophthalmic Patient
 - 3.1.1. Causes of Loss of the Eyeball. Painful Blind Eye. Ptisis
 - 3.1.2. Visual Phenomenons Secondary to the Loss of the Eyeball
 - 3.1.2.1. Monocular and Binocular Vision
 - 3.1.2.2. Loss of VC and Stereopsis. The Phantom Eve
 - 3.1.3. Quality of Life, Psychological and Psychopathological Aspects in the Monophthalmic Patient
- 3.2. Evisceration of the Eyeball
 - 3.2.1. Indications
 - 3.2.2. Surgical Technique and Postoperative Management
 - 3.2.3. Complications
- 3.3. Enucleation of the Eyeball
 - 3.3.1. Indications
 - 3.3.2. Surgical Technique and Postoperative Management
 - 3.3.3. Complications
- 3.4. Orbital Exenteration
 - 3.4.1. Indications
 - 3.4.2. Surgical Technique and Postoperative Management
 - 3.4.3. Complications
- 3.5. Synthetic Orbital Implants
 - 3.5.1. Ideal Implant
 - 3.5.2. Types of Material
 - 3.5.3. Implant Size
 - 3.5.4. Exposure and Extrusion
 - 3.5.4.1. Introduction
 - 3.5.4.2. Causes
 - 3.5.4.3. Clinical and Management
- 3.6. Use of Autologous Material: Dermal Fat Graft
 - 3.6.1. Indications
 - 3.6.2. Surgical Technique and Postoperative Management
 - 3.6.3. Complications
 - 3.6.4. WHO vs. Synthetic Orbital Implant

- 3.7. Anophthalmic Syndrome
 - 3.7.1. Treatment of Enophthalmos and Sinking of the PPS
 - 3.7.1.1. Combined Technique
 - 3.7.1.2. Lipostructure
 - 3.7.1.3. Others: Rib Cartilage Grafting
 - 3.7.2. Management of Ptosis in Ocular Prosthesis Carriers
- 3.8. Reconstruction of the Retracted Anophthalmic Orbit
 - 3.8.1. Assessment
 - 3.8.2. Surgical Treatment of the Retraction
- 3.9. Ocular prosthesis
 - 3.9.1. Ocular Surface
 - 3.9.2. Fitting and Fabrication
 - 3.9.3. Removal and Fitting Maneuvers
 - 3.9.4. Assessment of the Prosthesis and Inspection of the Cavity Medical Pathology and Treatment
 - 3.9.5. Indications to the Patient
 - 3.9.6. Research and Future
- 3.10. Anophthalmic Cavity in Pediatric Age



Look no further. With this Program you will get up to date, in less than 6 months, on everything you need to consider yourself a Postgraduate Diploma in Tear Ducts, their physiology and the diagnosis and treatment of their conditions"





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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 | 27 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.

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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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This **Postgraduate Diploma in Tear Ducts and Anophthalmic Cavity Management** contains the most complete and updated scientific 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 career evaluation committees.

Title: Postgraduate Diploma in Tear Ducts and Anophthalmic Cavity Management 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.

health

guarantee

technological
university

Postgraduate Diploma

Tear Ducts and Anophthalmic Cavity Management

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

