

Professional Master's Degree

Head and Neck Surgery





Professional Master's Degree Head and Neck Surgery

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online

Website: www.techtitute.com/us/medicine/professional-master-degree/master-head-neck-surgery

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01

Introduction

This university program delves into the latest scientific-technological findings that have revolutionized Head and Neck Surgery. In only 1,500 hours of intensive study, the Maxillofacial Surgeon will be able to deepen in areas such as the surgical approach to mucoepidermoid carcinoma or in the types of local flaps and their vascularization. All of this, without neglecting the new techniques for bone and soft tissue surgical management and microsurgical aesthetic rehabilitation using 3D printing techniques. An innovative program, 100% online and full of the best pedagogical resources: videos of cases, interactive summaries and action guides among other tools that focus on practice to facilitate the application of what has been learned from the very first moment.





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A novel academic proposal, specifically dedicated to maxillofacial surgeons, which delves into the latest scientific and technological findings in this medical specialty”

This Professional Master's Degree from TECH brings together in a complete and efficient way the latest scientific and technical findings in the area of Maxillofacial Surgery, delving into new technologies that provide not only a better diagnostic procedure, but also a more specific treatment tailored to the needs of each patient. It is a comprehensive program, devised by the best Maxillofacial Surgeons and designed using the latest educational technology.

Designed specifically for Maxillofacial Surgeons, and during 1,500 hours of intensive study, the program will delve into the development of new technologies such as the latest generation of scanners that have facilitated the incorporation of diagnostic and follow-up methods based on the use of 3D technology in microsurgery.

He will also delve into the latest developments in the treatment of benign and premalignant pathology of the head and neck, as well as salivary glands, dento-skeletal malocclusion and Obstructive Sleep Apnea Syndrome. In the same way, the latest scientific evidence for the approach to the pathology of the temporomandibular joint, facial traumatology and aesthetic and functional rhinoplasty will be discussed. Lastly, special emphasis will be placed on malignant head and neck tumors, as well as their reconstruction and the specifics of facial paralysis.

Everything in a convenient 100% online format that facilitates the acquisition of knowledge from wherever and whenever you want. In this way, the Maxillofacial Surgeon will be able to organize an academic experience adapted to his or her needs, without having to give up his or her professional and/or personal activities. Moreover, in the Virtual Classroom you will find hundreds of hours of additional material in different formats with which you will be able to contextualize the syllabus and inquire those aspects that you consider most important for your professional development.

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

- ♦ The development of practical cases presented by experts in Head and Neck 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 self-assessment can be used 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



With this program you will be able to delve into the latest developments in the treatment of benign and premalignant pathology of the head and neck, as well as the salivary glands”

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Delve into the latest advances in Head and Neck Surgery thanks to this program, which is developed through a learning system that will be completely adapted to your personal and professional circumstances”

Through this 100% online program, you will learn in depth the most advanced techniques for the approach to facial traumatology and aesthetic and functional rhinoplasty.

Employing the best teaching methodology in the academic world, you will learn the most up-to-date techniques in cranial vault reconstruction. in cranial vault reconstruction.

The program's teaching staff includes professionals from sector who contribute their work experience to this educational 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 education programmed to learn in real situations.

This program is designed around Problem-Based Learning, whereby the professional must try to solve the different professional practice situations that arise during the academic year For this purpose, students will be assisted by an innovative, interactive video system created by renowned and experienced experts.



02 Objectives

The main objective of this Professional Master's Degree is to provide the Head and Neck surgeon with a complete, effective and adapted update. In order to do so, it offers the most advanced didactic resources: in-focus videos, interactive summaries, case studies and many other materials that put the focus on practice so that the specialists can apply what they have learned to their clinical work from the very first moment. In this way, this program is presented as an unprecedented opportunity to get up to date in a comfortable and dynamic way, deepening in the most advanced surgical techniques to address all types of conditions and pathologies of the head and neck.





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The main objective of this program is to provide you with a complete training in Head and Neck Surgery. Enroll and learn more about the latest clinical advances in this area”

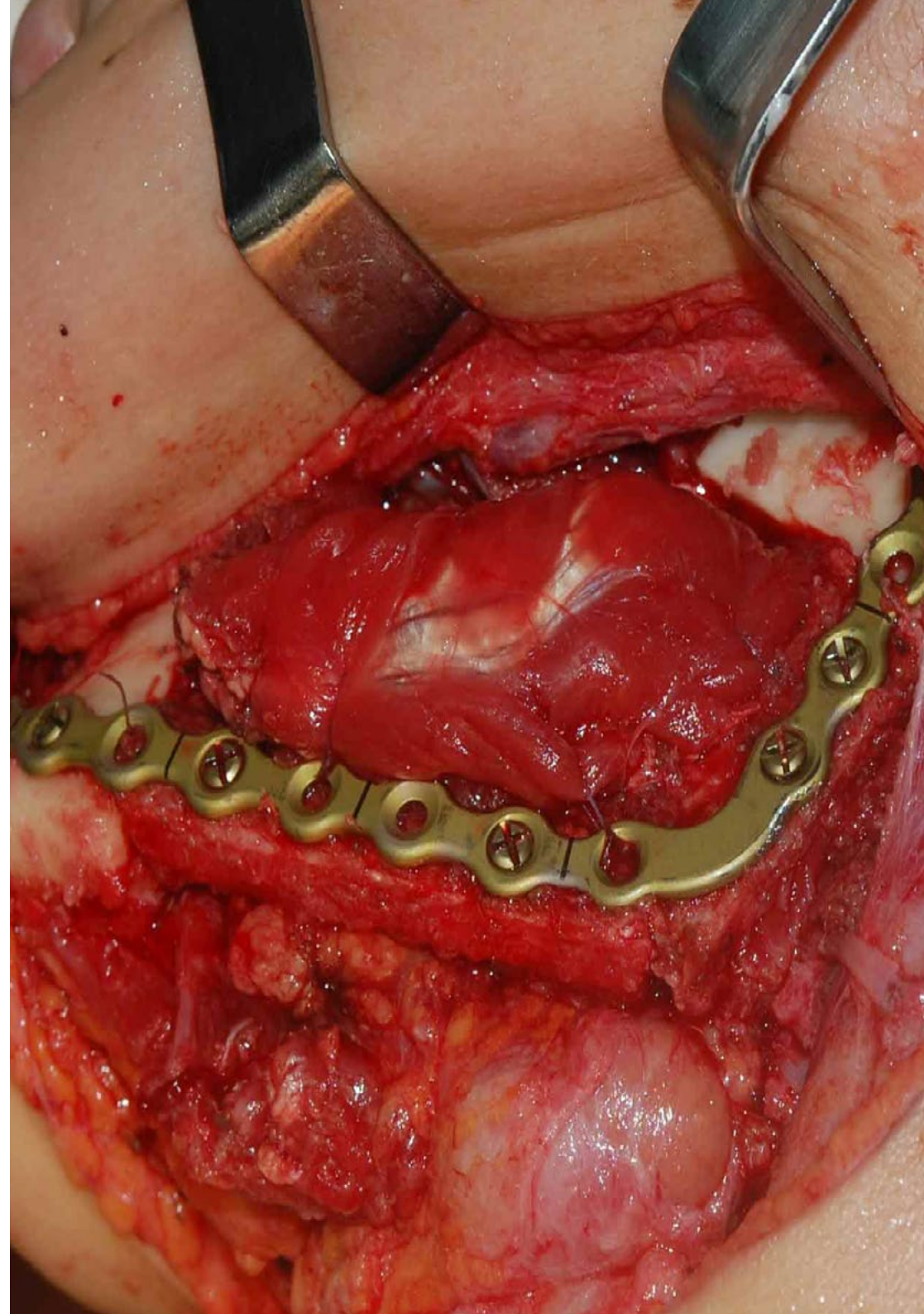


General Objectives

- Review the cerviofacial anatomy, a basic starting point for the entire Professional Master's Degree program
- Learn the anatomy and physiology of the relevant glands
- Build a knowledge base on a highly prevalent disorder such as sleep apneas, in which maxillofacial surgeons are among the specialists who can offer therapeutic options
- Update knowledge on facial traumatology, including its main causes and diagnostic techniques
- Know about malignant pathologies divided by anatomical regions that can affect the head and neck
- Know the different reconstructive techniques



A rigorous academic program with which you can delve into the latest procedures for the differentiation of flaps, grafts and their surgical technique"





Specific Objectives

Module 1. Benign and Premalignant Head - Neck Pathology

- ♦ To provide and expand knowledge on benign pathologies that present in the anatomical region of the head and neck or, most frequently, in the maxillofacial area
- ♦ Learn to apply this knowledge in clinical practice for a clinical suspicion before a first consultation and the appropriate action protocol according to each pathology
- ♦ Know about the diagnosis and management of cervicofacial infectious pathologies and fundamentally odontogenic etiology is key not only for head and neck specialists, but for any specialism involved in emergency care and of course for primary care due to the high incidence of these cases
- ♦ Learn to differentiate between benign, premalignant and malignant pathologies in order to prioritize daily clinical care

Module 2. Salivary Gland Pathologies

- ♦ Learn to correctly diagnose the pathology that affects the patient
- ♦ Review the diagnostic tests and techniques
- ♦ To learn about the pathologies affecting the different salivary glands, starting with congenital pathology, continuing with inflammatory and infectious pathology and ending with tumor pathology
- ♦ Address different glandular surgery techniques of , as well as minimally invasive techniques that allow us to preserve the glands, thus avoiding the risks of removing them while preserving their functionality

Module 3. Dento-Skeletal Malocclusion

- ♦ Perfect the diagnosis of the different types of malocclusions
- ♦ Provide examples, exploring preoperative planning to patient discharge
- ♦ Introduce orthodontic concepts in the treatment of this pathology
- ♦ Learn about topical issues, including the latest planning techniques
- ♦ Provide the student with the tools to know how to oversee cases and the best surgical techniques for each patient
- ♦ Learn about the latest advances in orthognathic surgery
- ♦ Know the different support techniques to improve facial profilometry

Module 4. Obstructive Sleep Apnea Syndrome

- ♦ Know how to interpret a polysomnography, polygraphy or videosomnography report, in order to diagnose and offer individualized therapeutic options for patients
- ♦ Be aware of other non-surgical treatments for sleep apneas, in order to be able to offer them to patients, as appropriate: mandibular advancement devices, positional therapy, positional therapy
- ♦ Know the different surgical techniques available. Pharyngoplasty Avance Gene XII Pair Stimulator Maxillomandibular Advancement
- ♦ Understand the systems and protocols for a multidisciplinary approach to these patients

Module 5. Temporomandibular Joint Pathology

- ♦ To know the different exploration and diagnostic techniques, as well as indications for treatment
- ♦ Focus on pathologies affecting the temporomandibular joint, joint alterations due to problems in condylar development and growth
- ♦ Learn about the articular alterations related to the different dentofacial deformities
- ♦ Focus on the management of this disease and the different treatments currently available, their indications, contraindications, techniques and complications
- ♦ Explore pathologies unrelated to disc displacement (dislocations, tumors, rheumatologic diseases...) which are requisite knowledge for any specialist who is going to work with the temporomandibular joint

Module 6. Facial Traumatology

- ♦ Classify and order the different types of fractures
- ♦ Be aware of the different therapeutic options depending on the type of fracture
- ♦ Know the main complications associated with facial trauma and their management
- ♦ Gain expertise on the treatment of possible sequelae associated with facial trauma
- ♦ Update your knowledge on the latest techniques in facial trauma treatment, including 3D planning

Module 7. Aesthetic and Functional Rhinoplasty

- ♦ Gain sufficient knowledge of the function of the different components of the nose for proper surgical management
- ♦ Be familiar with the different types of grafts and their application according to the functional pathology of the patient and according to the aesthetic objective to be achieved
- ♦ Establish a surgical plan and treatment objectives prior to surgery to achieve the best aesthetic and functional result and to convey realistic expectations of the outcome to the patient
- ♦ Know the various techniques of aesthetic rhinoplasty, as well as the treatment of functional rhinoplasty
- ♦ Know how to identify complications arising from rhinoplasty and septoplasty and how to manage them

Module 8. Head and Neck Tumors

- ♦ Learn about head and neck cancer etiology in order to provide valuable information for the practice of preventive medicine, a key factor in this pathology with risk factors deriving from the patient's lifestyle
- ♦ Clinically differentiate non-melanoma skin tumors from melanomas and know the different protocols for action and treatment
- ♦ Clinically differentiate non-melanoma skin tumors from melanomas and to know the different protocols for action and treatment
- ♦ Learn about the treatments for each pathology, not only surgical, but also medical including chemotherapy or radiotherapy
- ♦ Achieve a diagnosis of cervicofacial malignant pathology in order to provide a detailed knowledge of the different therapeutic options



Module 9. Head and Neck Reconstruction

- ◆ Distinguish between types of grafts and flaps and the surgical technique relating to them
- ◆ Be aware of the most commonly used surgical treatment alternatives for each anatomical region based on the complexity of the defect
- ◆ Know the potential complications after reconstructive surgery and available alternatives
- ◆ Keep abreast of advances in neuronavigation applied to microsurgical reconstruction and tissue engineering
- ◆ Understand complex reconstructions including facial transplantation

Module 10. Facial Paralysis Smile Recovery

- ◆ Correctly diagnose the type of paralysis in order to establish the appropriate treatment plan
- ◆ Be familiar with the different static treatment options in facial paralysis
- ◆ Be aware of the different options for dynamic treatment in facial paralysis based on evolutionary stage and comorbidities of the patient
- ◆ Know the components necessary to organize a facial paralysis unit
- ◆ Know the imaging techniques and functional tests necessary for the diagnosis, staging and prognosis of facial paralysis

03 Skills

This Professional Master's Degree is an unprecedented option that will allow the specialist in Head and Neck Surgery to update his knowledge and apply in his clinical and surgical practice the latest technical and scientific advances of his profession. By means of these simulations, real case studies and interactive videos, the specialist will learn about the latest evidence for the clinical approach to head and neck pathologies. Furthermore, all this with the support and experience of a first-class faculty.





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In just 1,500 hours of intensive study you will achieve up-to-date competencies in the management of complex clinical cases related to facial trauma and malignant tumors of the head and neck”



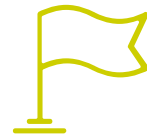
General Skills

- ♦ Gain adequate knowledge of the latest scientific findings related to nasal anatomy
- ♦ Build detailed knowledge of the most important advances in the acute treatment of patients, given their age and physical condition
- ♦ Gain broad and up-to-date knowledge allowing the specialist to review the general features of the temporomandibular joint, including an understanding of its anatomy and physiology
- ♦ Manage the basic concepts associated with orthognathic surgery

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TECH provides you with the most advanced and rigorous multimedia resources: case studies, in-focus videos of surgical procedures or interactive summaries, among others”





Specific Skills

- ◆ Possess the skills to differentiate infectious pathology from tumor pathology, both at the level of oral mucosal lesions and odontogenic or osseous pathology lesions
- ◆ Gain detailed knowledge on the different medical and surgical treatments for the management of these pathologies
- ◆ Develop skills as far as necessary to adequately manage potential complications of Oral Surgery
- ◆ Fully understand how positive pressure machine therapy works: CPAP
- ◆ Build detailed knowledge of the articular alterations related to the different dentolabial deformities
- ◆ Gain the up-to-date knowledge needed to Classify and order different types of fractures

04

Course Management

For the composition of the faculty of this Master's Degree TECH has relied on a group of active specialists and academics who have a long and extensive experience in the field of Maxillofacial Surgery. The faculty is highly qualified, specialized and committed to the professional growth of the student, who will put their decades of experience in this medical specialty and their successful approach to clinical practice at the service of the graduate.





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The faculty is highly qualified, specialized and committed to the professional growth of the student, who will put their decades of experience in this medical specialty and their successful approach to clinical practice at the service of the graduate”

Management



Dr. Pingarrón Martín , Lorena

- ♦ Head of the Maxillofacial Surgery Service at Rey Juan Carlos University Hospital, General de Villalba Hospital and Infanta Elena Hospital
- ♦ Maxillofacial Surgeon in Private Practice at the Fundación Jiménez Díaz
- ♦ Fellow of the European Board of Oral-Maxillofacial-Surgery, 2014
- ♦ Responsible for the design and management of animal experimentation procedures: Category B+C+D
- ♦ Specialist in Oral and Maxillofacial Surgery at the Autonomous University of Madrid. La Paz University Hospital
- ♦ PhD in Medicine and Surgery, Autonomous University of Madrid, 2013 Outstanding Cum Laude
- ♦ Degree in Medicine in the University of Miguel Hernández de Elche and Complutense University of Madrid
- ♦ Member International Society for Oral and Maxillofacial Surgery
- ♦ Member of the Spanish Society of Oral and Maxillofacial Surgery
- ♦ Chairman of the HURJC Investigation Committee
- ♦ Member of the IIS-FJD Research Institute, Universidad Autónoma Madrid
- ♦ Member of the from Teaching Commission HURJC
- ♦ Member of the Oncology Institute FJD, Head and Neck Unit
- ♦ Member of the HURJC Multidisciplinary Sleep Unit
- ♦ Member of the HURJC Head and Neck Tumors Committee
- ♦ Reviewer Journal "Laryngoscope". ISI IndexedJournal; Impact Factor 1.617
- ♦ Revista "AfricanJournal of Biotechnology".ISI IndexedJournal; Factor Impacto 0.565

Professors

Dr. Barba Recreo, Paula

- ♦ Doctor Specialist in Oral and Maxillofacial Surgery
- ♦ Head Association the Maxillofacial Surgery Department at the Hospital Universitario Rey Juan Carlos
- ♦ Head Association the Maxillofacial Surgery Service, Villalba General: Hospital
- ♦ PhD from the Autonomous University of Madrid
- ♦ Bachelor in Medicine and Surgery from the University of Zaragoza

Dr. Merino Domingo, Francisco Javier

- ♦ FEA of the Oral and Maxillofacial Surgery Unit of the HU Nuestra Señora del Rosario
- ♦ Associate Professor of the Maxillofacial Surgery Medicine at Alfonso X El Sabio University
- ♦ Researcher at the I+12 Research Institute
- ♦ Doctorate in Medical-Surgical Research Sciences from the Complutense University of Madrid
- ♦ Specialist in Oral and Maxillofacial Surgery via MIR at the 12th October University Hospital in Madrid
- ♦ Member of the Spanish Society of Ocular and Maxillofacial Plastic Surgery
- ♦ Member of the Spanish Society of Head and Neck
- ♦ Member of the European Association for Cranio-Maxillo-Facial Surgery

Dr. Moliner Sánchez, Carmen

- ♦ Physician specializing in Oral and Maxillofacial Surgery at Quirón Salud
- ♦ Oral and Maxillofacial Surgeon in HM Hospitals
- ♦ Oral and Maxillofacial Surgeon in Sanitas
- ♦ Oral and Maxillofacial Surgeon at the Ramón y Cajal Hospital
- ♦ External rotation at the GEA Gonzalez Hospital in the plastic surgery service of Dr. Fernando Molina
- ♦ Residency at 12th October Hospital in the Children's Oral and Maxillofacial Surgery Department
- ♦ Residency at Hospital Clínico San Carlos in the Oral and Maxillofacial Surgery Department
- ♦ Full Professor of Clinical from Teaching, Department of Dentistry, San Pablo-CEU University

Dr. Page Herraiz, Inés

- ♦ FEA Oral and Maxillofacial Surgery at Rey Juan Carlos Hospital, General Hospital of Villaba and Infanta Elena Hospital
- ♦ Degree in Medicine from the University of Alcalá, Spain
- ♦ Specialist in Oral and Maxillofacial Surgery Ramón y Cajal University Hospital
- ♦ Postgraduate Diploma in Orthognathic Surgery. University of Alcalá
- ♦ University Master's Degree in Aesthetic and Anti-Aging Medicine Complutense University of Madrid
- ♦ Communications and posters for National and European Congresses of Oral and Maxillofacial Surgery

Dr. Ruiz Martín, Irene

- FEA Maxillofacial Surgery Service at Rey Juan Carlos University Hospital
- Specialist in Oral and Maxillofacial Surgery at Quirónsalud Hospital Group
- Specialist in Oral and Maxillofacial Surgery in Clínica Castelo
- Oral and Maxillofacial Surgery Specialist at Musk Clinic
- Specialist in Oral and Maxillofacial Surgery at Yummy Mummy
- Researcher of the Foundation for Biomedical Research of the 12 Octubre University Hospital
- D. candidate in Medical and Surgical Sciences at the Complutense University of Madrid
- Graduate in Medicine and Surgery from Universidad de Navarra
- Professional Master's Degree in Esthetic and Anti-Aging Medicine at the Complutense University of Madrid
- Member of: EACMFS, IAOMS, SECPF, SEORL-CCC, SECOM CyC, SMmax





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

05

Structure and Content

The main objective of this program is to offer a complete, effective and efficient update to Maxillofacial Surgeons. In order to achieve this, it presents the theoretical and practical concepts through the innovative Relearning methodology, through which the most important concepts are reiterated throughout the syllabus to facilitate a natural, progressive and simple acquisition of knowledge. At the same time, the 100% online platform where the pedagogical resources are housed will provide the specialist with additional educational materials in different formats such as video in detail, ideal for contextualizing the information and expanding on those aspects that warrant it.





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You will have access to real clinical cases that will approach the treatment of paranasal sinus pathologies or orbital tumors, delving into each of them in a practical and didactic way”

Module 1. Benign and Premalignant Head - Neck Pathology

- 1.1. Cerviofacial Anatomy
 - 1.1.1. Embryological Development of the Head and Neck
 - 1.1.2. Specific Anatomy
 - 1.1.3. Arterial and Venous Vascularization
 - 1.1.4. Innervation
- 1.2. Head and Neck Infections
 - 1.2.1. Odontogenic Infections
 - 1.2.2. Non Odontogenic Infections
 - 1.2.2.1. Bacterial
 - 1.2.2.2. Chronic Granulomatous Pathology
 - 1.2.2.3. Invasive Fungal Infections
 - 1.2.2.4. Viral:
- 1.3. Maxillary Cysts
 - 1.3.1. Development, Clinic and Exploration
 - 1.3.2. Classification
 - 1.3.3. Mesenchymal Odontogenic Tumors
 - 1.3.4. Mixed Odontogenic Tumors
- 1.4. Odontogenic Tumours
 - 1.4.1. Classification
 - 1.4.2. Odontogenic Development Cysts
 - 1.4.3. Non-Odontogenic Development Cysts
 - 1.4.4. Odontogenic Inflammatory Cysts
 - 1.4.5. Pseudocysts
- 1.5. Osteopathies Bone Tumors
 - 1.5.1. Osteogenic Lesions
 - 1.5.2. Endocrinometabolic Alterations
 - 1.5.3. Hyperostosis
 - 1.5.4. Osteogenic Lesions
- 1.6. Benign Oral Pathology
 - 1.6.1. Traumatic or Iatrogenic Injuries
 - 1.6.2. Lingual Pathology
 - 1.6.3. Recurrent Aphthous Stomatitis, Blistering Diseases and Conectivopathies with Oral Involvement

- 1.7. Benign Salivary Gland Pathology
 - 1.7.1. Salivary Gland Anatomy
 - 1.7.2. Obstructive Disorders
 - 1.7.3. Sialadenitis
 - 1.7.4. Benign Tumors
- 1.8. Benign Cervical Pathology
 - 1.8.1. Congenital Cysts and Fistulas
 - 1.8.2. Primitive Cervical Tumors
 - 1.8.3. Lymphoepithelial Cysts
- 1.9. Benign Oral Tumors
 - 1.9.1. Benign tumors and Pseudotumors of the Floor of the Mouth
 - 1.9.2. Benign Tumors of the Palate, Gingiva and Jugal Mucosa
- 1.10. Premalignant Oral Lesions
 - 1.10.1. Precancerous lesion
 - 1.10.2. Classification
 - 1.10.3. Clinic, Etiopathogenesis, Histology, Diagnosis and Treatment of Each of Them

Module 2. Salivary Gland Pathologies

- 2.1. Embryology, Anatomy and Physiology of the Salivary Glands
 - 2.1.1. Embryology and Histology of the Salivary Glands
 - 2.1.2. Salivary Gland Anatomy
 - 2.1.3. Salivary Gland Physiology
- 2.2. Diagnosis
 - 2.2.1. Medical History
 - 2.2.2. Physical Examination
 - 2.2.3. Diagnostic Imaging
 - 2.2.4. Pathologic Anatomy
- 2.3. Congenital Anomalies and Functional Alterations
 - 2.3.1. Congenital
 - 2.3.2. Functionals
 - 2.3.2.1. Sialorrhoea
 - 2.3.2.2. Xerostomia

- 2.4. Sialoadenosis and Inflammatory Disorders
 - 2.4.1. Acute Sialoadenitis
 - 2.4.2. Chronic Sialoadenitis
 - 2.4.3. Sialoadenitis due to Radiation
 - 2.4.4. Sialoadenosis
- 2.5. Obstructive and Traumatic Disorders
 - 2.5.1. Sialolithiasis
 - 2.5.2. Mucocele
 - 2.5.3. Cannula
 - 2.5.4. Retention Cysts
 - 2.5.5. Salivary Gland Trauma
- 2.6. Salivary Gland Involvement in Systemic Diseases
 - 2.6.1. Autoimmune
 - 2.6.2. Infectious
- 2.7. Benign Salivary Gland Tumors
 - 2.7.1. Pleomorphic Adenoma
 - 2.7.2. Whartin Tumor
 - 2.7.3. Monomorphous Adenoma
 - 2.7.4. Basal Cell Adenoma
 - 2.7.5. Oncocytomas
 - 2.7.6. Other Tumors of Different Cell Lineage
- 2.8. Malignant Salivary Gland Tumors
 - 2.8.1. Mucoepidermoid Carcinoma
 - 2.8.2. Acinar Cell Carcinoma
 - 2.8.3. Adenoid Cystic Carcinoma
 - 2.8.4. Adenocarcinoma
 - 2.8.5. Pleomorphous Exadenoma Carcinoma
 - 2.8.6. Squamous Cell Carcinoma
 - 2.8.7. Undifferentiated Carcinoma
 - 2.8.8. Other tumours
- 2.9. Treatment by Open Surgery
 - 2.9.1. Parotidectomy
 - 2.9.2. Submaxillectomy
 - 2.9.3. Sublingual Gland and Minor Salivary Gland Surgery

- 2.10. Sialoendoscopy and Other Treatments
 - 2.10.1. Sialoendoscopy
 - 2.10.2. Radiotherapy
 - 2.10.3. Systemic Treatment

Module 3. Dento-Skeletal Malocclusion

- 3.1. Dental Malocclusion:
 - 3.1.1. Diagnosis
 - 3.1.2. Cephalometrics Record Keeping
 - 3.1.3. 3D Photos
- 3.2. Pre-Surgical Orthodontics
- 3.3. Preoperative Planning
 - 3.3.1. Surgery Modeling vs. Digital Planning
 - 3.3.2. Jaw First vs. Maxillary First
 - 3.3.3. Preoperative preparation
 - 3.3.4. Operating Room Equipment
 - 3.3.5. Post-Operative
- 3.4. Surgical Technique:
 - 3.4.1. Maxilla: Le fort I, Le fort segmented
 - 3.4.2. Jaw BSSO and Hinds
 - 3.4.3. Chin
- 3.5. Other techniques:
 - 3.5.1. SARPE vs. MARPE
 - 3.5.2. Surgery first
 - 3.5.3. Surgery only
 - 3.5.4. Preformed Plates and Cutting Guides
- 3.6. Complications
 - 3.6.1. Intra-Operative
 - 3.6.2. Post-Operatives
 - 3.6.3. Secuelas
- 3.7. Distraction:
 - 3.7.1. Mandibular
 - 3.7.2. Lift
- 3.8. Fractured OTG

- 3.9. Aesthetic Refinement
 - 3.9.1. Chin Wing
 - 3.9.2. Malar Osteotomy
 - 3.9.3. Chin, Straps
 - 3.9.4. v-y (Soft Tissue Techniques)
 - 3.9.5. Bichat Balls
- 3.10. Invisaling, O-ARM, Neuronavigator

Module 4. Obstructive Sleep Apnea Syndrome

- 4.1. Snoring, Apneas, Hypoapneas
 - 4.1.1. Epidemiology
- 4.2. Diagnosis Sleep Disorders
 - 4.2.1. Polysomnography
 - 4.2.2. Polygraph
- 4.3. Sleep Medicine
- 4.4. Treatment with Positive Pressure Machines
- 4.5. Videosomnoscropy
- 4.6. Surgical Treatments
 - 4.6.1. Intraoral Devices
 - 4.6.2. Positional Therapy
 - 4.6.3. Myofunctional Therapy
- 4.7. Soft Tissue Surgical Techniques
 - 4.7.1. Pharyngoplasty
 - 4.7.2. Base of the Tongue
 - 4.7.3. Other Surgical Techniques
- 4.8. Surgical Techniques on Hard Parts
 - 4.8.1. Apophysis Geni Advancement
 - 4.8.2. Other Surgical Techniques
- 4.9. Maxillary-Mandibular Advancement
- 4.10. Multidisciplinary Approach
 - 4.10.1. Sleep Apneas Syndrome Patient
 - 4.10.2. Other Sleep Disorders

Module 5. Temporomandibular Joint Pathology

- 5.1. Embryology, Anatomy and Physiology of the Temporomandibular Joint
 - 5.1.1. Temporomandibular Joint Embryology
 - 5.1.2. Temporomandibular Joint Anatomy
 - 5.1.3. Temporomandibular Joint Physiology
- 5.2. Diagnosis of Pathologies of the Temporomandibular Joint
 - 5.2.1. Medical History
 - 5.2.2. Physical Examination
 - 5.2.3. Diagnostic Imaging
- 5.3. Temporomandibular Disorders
 - 5.3.1. Temporomandibular Joint Dysfunction Syndrome
 - 5.3.2. Myofascial Pain Syndrome
- 5.4. Dentofacial and Temporomandibular Joint Deformity
 - 5.4.1. TMJ and Class II
 - 5.4.2. TMJ and Class III
 - 5.4.3. TMJ and Open Anterior Bite Treatment
- 5.5. Condylar Growth Disorders
 - 5.5.1. Mandibular Condyle Hyperplasia
 - 5.5.2. Condylar Hypoplasia
 - 5.5.3. Mandibular Condyle Agenesis
- 5.6. Temporomandibular Joint Treatment
 - 5.6.1. Conservative Treatment
 - 5.6.2. Treatment Indications
 - 5.6.3. Therapeutic Success Criteria
 - 5.6.4. Therapeutic Failure
- 5.7. Minimally Invasive Temporomandibular Joint Surgery
 - 5.7.1. Arthrocentesis
 - 5.7.1.1. Indications and Contraindications
 - 5.7.1.2. Surgical Technique
 - 5.7.2. Arthroscopy
 - 5.7.2.1. Indications and Contraindications
 - 5.7.2.2. Surgical Technique
 - 5.7.3. Complications from Minimally Invasive Surgery



- 5.8. Open Surgery of the Patellofemoral Joint
 - 5.8.1. Indications
 - 5.8.2. Contraindications
 - 5.8.3. Approaches
 - 5.8.4. Techniques
 - 5.8.5. Post-Surgery Physiotherapy
 - 5.8.6. Complications
- 5.9. Mandibular Dislocation
 - 5.9.1. Acute Dislocation
 - 5.9.2. Recurrent Dislocation
 - 5.9.2.1. Conservative Treatment
 - 5.9.2.2. Surgical Management
- 5.10. Other TMJ Pathologies
 - 5.10.1. TMJ Avascular Necrosis
 - 5.10.2. TMJ Synovial Chondromatosis
 - 5.10.3. TMJ Rheumatological Diseases
 - 5.10.4. TMJ Osteoarthritis
 - 5.10.5. TMJ Ankylosis
 - 5.10.6. TMJ Tumours

Module 6. Facial Traumatology

- 6.1. Facial Trauma
 - 6.1.1. Etiology and Epidemiology
 - 6.1.2. Bone Repair
 - 6.1.3. Biomechanics
 - 6.1.4. Osteosynthesis
- 6.2. Diagnosis
 - 6.2.1. Clinical diagnosis
 - 6.2.2. Radiological Diagnosis
- 6.3. Polytraumatized Assistance, Including Treatment of Head and Neck Injuries
- 6.4. Middle Third Fractures
 - 6.4.1. Nasal Bone Fractures
 - 6.4.2. Middle Third Fractures
 - 6.4.3. NOE Fractures

- 6.5. Orbitomalar Fractures
 - 6.5.1. Orbitomalar Fractures
 - 6.5.2. Orbit Fractures
 - 6.5.3. Intraoperative Navigation, Interoperative CT
- 6.6. Mandibular Fractures
 - 6.6.1. Mandibular Symphysis Fractures
 - 6.6.2. Jaw Body Fractures
 - 6.6.3. Jaw Angle Fractures
 - 6.6.4. Subcondylar Fractures
 - 6.6.5. Jaw Condyle Fractures
 - 6.6.6. Edentulous and Comminuted Fractures
 - 6.6.7. Endoscopic treatment
 - 6.6.8. Complications
- 6.7. Dentoalveolar Trauma
 - 6.7.1. Epidemiology and Etiology
 - 6.7.2. Dental Fractures
 - 6.7.3. Dentoalveolar Fractures
- 6.8. Upper Third Fractures
 - 6.8.1. Skull Base Fractures
 - 6.8.2. Frontal Sinus Fractures
 - 6.8.3. Complications: Mucopiocele, CSF Fistula
- 6.9. Panfacial Fractures
 - 6.9.1. Concept
 - 6.9.2. Etiology
 - 6.9.3. Sequences
- 6.10. Secuelas
 - 6.10.1. Front Contour Defect
 - 6.10.2. Telecanthus
 - 6.10.3. Malar Malposition
 - 6.10.4. Pseudarthrosis
 - 6.10.5. Orbital sequelae, Enophthalmos, Hypophthalmos

Module 7. Aesthetic and Functional Rhinoplasty

- 7.1. Anatomy
 - 7.1.1. Components
 - 7.1.2. Anatomical Units
- 7.2. Physiology
 - 7.2.1. Nose Functioning
 - 7.2.2. Operating Age
- 7.3. Patient Selection and Physical Examination
- 7.4. Treatment Management
 - 7.4.1. Factors which Affect Therapeutic Decisions
 - 7.4.2. Indications for Treatment
 - 7.4.3. Therapeutic Objectives
 - 7.4.4. Therapeutic Possibilities
- 7.5. Indications for Rhinoplasty
- 7.6. Surgery
 - 7.6.1. Incisions
 - 7.6.2. Osteotomies
 - 7.6.3. Basic Closed Rhinoplasty
 - 7.6.4. Basic Open Rhinoplasty
 - 7.6.5. Nasal Splinting
 - 7.6.6. Postoperative Care
 - 7.6.7. Complications
- 7.7. Rhinoplasty Grafts
- 7.8. Special Problems
 - 7.8.1. Nasal Tip
 - 7.8.2. The Back
 - 7.8.3. The Wing Base
 - 7.8.4. The Columella
- 7.9. Nasal Obstruction
 - 7.9.1. Septal Surgery
 - 7.9.2. Valvular Pathology Surgery
 - 7.9.3. Turbinate Surgery
- 7.10. Rhinoplasty in a Patient with Cleft Lip and Palate

Module 8. Head and Neck Tumors

- 8.1. Oral Cavity Cancer
 - 8.1.1. Epidemiology
 - 8.1.2. Etiology
 - 8.1.3. Prognostic Factors and Survival
 - 8.1.4. Monitoring
 - 8.1.5. Quality of Life
- 8.2. Lip Pathology
 - 8.2.1. Incidence and Epidemiology
 - 8.2.2. Etiology
 - 8.2.3. Clinical Symptoms
 - 8.2.4. Diagnosis
 - 8.2.5. TNM Classification and Treatment by Stage
- 8.3. Tongue Pathology
 - 8.3.1. Incidence and Epidemiology
 - 8.3.2. Etiology
 - 8.3.3. Clinical Symptoms
 - 8.3.4. Diagnosis
 - 8.3.5. TNM Classification and Treatment by Stage
- 8.4. Floor of Mouth Pathology
 - 8.4.1. Incidence and Epidemiology
 - 8.4.2. Etiology
 - 8.4.3. Clinical Symptoms
 - 8.4.4. Diagnosis
 - 8.4.5. TNM Classification and Treatment by Stage
- 8.5. Palate, Jugal Mucosa, Gingiva and Retromolar Trigone Pathology
 - 8.5.1. Incidence and Epidemiology
 - 8.5.2. Etiology
 - 8.5.3. Clinical Symptoms
 - 8.5.4. Diagnosis
 - 8.5.5. TNM Classification and Treatment by Stage

- 8.6. Cervical Pathology
 - 8.6.1. Cervical Anatomy and Classification by Levels
 - 8.6.2. Lymphomas
 - 8.6.3. Cervical Staging
 - 8.6.4. Sentinel lymph node
 - 8.6.5. Cervical Evacuation: Types and Surgical Technique
- 8.7. Cervicofacial Skin Pathology
 - 8.7.1. Non-Melanoma Tumors
 - 8.7.2. Melanoma
 - 8.7.3. Glandular Tumors
- 8.8. Salivary Gland Pathologies
 - 8.8.1. Classification
 - 8.8.2. Clinic, Diagnosis and Treatment
- 8.9. Pathology of the Paranasal Sinuses and Skull Base
 - 8.9.1. Surgical Anatomy of the Paranasal Sinuses and Skull Base
 - 8.9.2. Surgical Approaches to the Paranasal Sinuses and Skull Base
 - 8.9.3. Most Common Malignant Tumors of the Paranasal Sinuses and Skull Base
 - 8.9.4. Reconstructive Techniques
- 8.10. Orbital tumors
 - 8.10.1. Orbit Surgical Anatomy
 - 8.10.2. Surgical Approaches to the Orbit
 - 8.10.3. Most Frequent Malignant Tumors of the Orbit
 - 8.10.4. Reconstructive Techniques

Module 9. Head and Neck Reconstruction

- 9.1. Free Grafts
 - 9.1.1. Types of Free Grafts Indications and Techniques
 - 9.1.1.1. Skin Graft
 - 9.1.1.2. Mucosal Graft
 - 9.1.1.3. Fascial Graft
 - 9.1.1.4. Dermal Fat Grafting and Free Fat Grafting
 - 9.1.1.5. Vascular Graft
 - 9.1.1.6. Nerve Graft
 - 9.1.1.7. Cartilaginous Graft
 - 9.1.1.8. Bone Graft

- 9.2. Local Flaps
 - 9.2.1. General Considerations
 - 9.2.1.1. Advantages and Disadvantages of Local Flaps
 - 9.2.1.2. Types of Local Flaps according to their Vascularization
 - 9.2.1.3. Local Flap Classification by Technique and by Specific Type
 - 9.2.1.4. Advancement, Rotation, Transposition, Island
 - 9.2.1.5. Rhomboid or Limberg flap, Double Rhomboid Flap, Triple Rhomboid Flap, Dufourmentel, Bilobed, Semilunar
 - 9.2.1.6. Local Flap Complications
 - 9.2.2. Reconstruction of Specific Regions with Local Flaps
 - 9.2.2.1. Forehead Reconstruction
 - 9.2.2.2. Nasal reconstruction
 - 9.2.2.3. Cheek Reconstruction
 - 9.2.2.4. Ear Reconstruction
 - 9.2.2.5. Eyelid and Canthal Region Reconstruction
 - 9.2.2.6. Lip Reconstruction
- 9.3. Regional Flaps
 - 9.3.1. Muscular, mucocutaneous and Osteomyocutaneous Pedicles
 - 9.3.1.1. Masseter Muscle Flap
 - 9.3.1.2. Platysma Muscle Flap
 - 9.3.1.3. Temporal Muscle Flap
 - 9.3.1.4. Infrahyoid Muscle Flap
 - 9.3.1.5. Sternocleidomastoid Osteomyocutaneous Flap
 - 9.3.1.6. Serratus Anterior Muscle Flap
 - 9.3.1.7. Latissimus Dorsi Flap
 - 9.3.1.8. Pectoralis Major Muscle Flap
 - 9.3.1.9. Trapezius Muscle Flap
 - 9.3.2. Facial
 - 9.3.2.1. Temporoparietal Fascia Flap
 - 9.3.3. Mucous
 - 9.3.3.1. Palate
 - 9.3.3.2. Buccinator Muscle
 - 9.3.4. Adipose
 - 9.3.4.1. Bichat Ball Flap
- 9.4. Microsurgical Flaps I
 - 9.4.1. Classification and Selection of Flaps
 - 9.4.1.1. Classification
 - 9.4.1.2. Fascial-Fasciocutaneous Flaps
 - 9.4.1.3. Radially
 - 9.4.1.4. Cubital
 - 9.4.1.5. Lateral Arm
 - 9.4.1.6. DIEAP Medial Sural
 - 9.4.1.7. Lateral Thigh
 - 9.4.1.8. Anterolateral Thigh ALT
 - 9.4.1.9. Dorsum of the Foot
 - 9.4.1.10. Muscular-Musculocutaneous flaps
 - 9.4.1.11. Rectus Abdominis
 - 9.4.1.12. Gracilis
 - 9.4.1.13. Broad Back
 - 9.4.1.14. Visceral Flaps
 - 9.4.1.15. Gastro Omental
 - 9.4.1.16. Osteomyocutaneous Flaps (Composite)
 - 9.4.1.17. Iliac Crest
 - 9.4.1.18. Fibula
 - 9.4.1.19. Scapula
 - 9.4.1.20. First Metatarsal
 - 9.4.2. Choice
 - 9.4.2.1. Donating Area
 - 9.4.2.2. Receiving Area
- 9.5. Microsurgical Flaps II
 - 9.5.1. Primary vs. Reconstruction Secondary
 - 9.5.1.1. Advantages of Primary or Immediate Reconstruction
 - 9.5.1.2. Inconveniences of Primary or Immediate Reconstruction
 - 9.5.1.3. Advantages of Deferred or Secondary Reconstruction
 - 9.5.1.4. Inconveniences of Deferred or Secondary Reconstruction
 - 9.5.2. Microsurgical Techniques
 - 9.5.2.1. General Patient Situation
 - 9.5.2.2. Technical Aspects of Microsurgery

- 9.5.3. Vascular Anastomoses
 - 9.5.3.1. Receiving Arteries
 - 9.5.3.2. Receiving Veins
 - 9.5.3.3. Anastomosis Technique
- 9.5.4. Anastomosis Nervios
 - 9.5.4.1. Histology and Pathophysiology
 - 9.5.4.2. Surgical Technique
- 9.5.5. Complications
 - 9.5.5.1. Thrombotic Complications
 - 9.5.5.2. Medical Complications
 - 9.5.5.3. Donor Site Complications
- 9.6. Postoperative Patient Management
 - 9.6.1. Microsurgical Patient Medication
- 9.7. 3D Planning for Microsurgical Reconstructions
 - 9.7.1. 3D Printing and Virtual Surgery in Maxillofacial Reconstruction after Oncological Surgery
 - 9.7.2. Complex Craniofacial Reconstructions I
 - 9.7.3. Objectives of Complex Maxillofacial Reconstructions
 - 9.7.4. Determinants of Complex Reconstructions
 - 9.7.4.1. General Factors
 - 9.7.4.2. Vascular Factors
 - 9.7.4.3. Receiving Bed Factors
 - 9.7.5. Special considerations
 - 9.7.5.1. Cranial Vault Reconstruction
 - 9.7.5.2. Skull Base
 - 9.7.5.3. Scalp
 - 9.7.5.4. Orbit
 - 9.7.5.5. Malar and Maxillary
 - 9.7.5.6. Nose
 - 9.7.5.7. Intraoral Soft Tissue and Lips
 - 9.7.5.8. Jaw
 - 9.7.5.9. Eyelids
 - 9.7.5.10. Cranial Calotte Reconstruction

- 9.8. Complex Craniofacial Reconstructions II
 - 9.8.1. Combined, Prefabricated, Prelaminated Flaps
 - 9.8.1.1. Classification
 - 9.8.1.2. Combined Flaps
 - 9.8.1.3. Prefabricated Flaps
 - 9.8.1.4. Prelaminated Flaps
- 9.9. Tissue Engineering
 - 9.9.1. Mandibular Reconstruction
 - 9.9.1.1. Prior Studies
 - 9.9.1.2. First Intervention
 - 9.9.1.3. Latency Period
 - 9.9.1.4. Second Intervention
 - 9.9.1.5. Postoperative Controls
 - 9.9.2. Upper Jaw Reconstruction
- 9.10. Facial Transplant
 - 9.10.1. Immunophysiological Factors
 - 9.10.2. Candidate Selection

Module 10. Facial Paralysis Smile Recovery

- 10.1. Anatomical and Functional Bases
 - 10.1.1. Facial Nerve Origin
 - 10.1.2. Facial Nerve
 - 10.1.2.1. Intrapetrous Portion
 - 10.1.2.2. Extrapetrous Portion
 - 10.1.3. Facial Nerve Branches
 - 10.1.3.1. Facial Nerve Branches
 - 10.1.3.2. Extrapetrous Branches

- 10.2. Etiology
 - 10.2.1. Idiopathic Peripheral Facial Palsy or Bell's Palsy
 - 10.2.2. Peripheral Facial Paralysis Infectious
 - 10.2.2.1. Herpes Zoster Oticus
 - 10.2.2.2. Lyme Disease
 - 10.2.3. Traumatic and/or Iatrogenic Peripheral Facial Paralysis
 - 10.2.4. Tumoral Peripheral Facial Paralysis
 - 10.2.5. Other Etiologies
- 10.3. Differential Diagnosis
- 10.4. Peripheral Facial Paralysis Clinic
 - 10.4.1. Clinical Presentation
 - 10.4.2. Examination and Complementary Tests
- 10.5. Medical Treatment
 - 10.5.1. Medical treatment
 - 10.5.2. Pediatric Medical Treatment
 - 10.5.3. Medical Treatment of Pregnant Patients
 - 10.5.4. Rehabilitative Medical Treatment
 - 10.5.5. Initial Ophthalmological Treatment
- 10.6. Algorithm for the Management of Facial Paralysis in the Emergency Room
- 10.7. Surgical treatment in Facial Paralysis of Less Than 24 Months of Evolution
 - 10.7.1. Post-Traumatic Peripheral Facial Paralysis
 - 10.7.2. Reinnervation Techniques
- 10.8. Facial Paralysis of More Than 24 Months of Evolution
- 10.9. Importance of a Facial Paralysis Unit
- 10.10. Complications and Key Points





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Enroll in this program and gain access to the most complete and updated knowledge in the field of Head and Neck Surgery. Only with TECH”

06

Methodology

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

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



“

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

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. Gervas, 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.



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.




07

Certificate

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



A photograph of several black graduation caps (mortarboards) against a bright blue sky with light, wispy clouds. The caps are positioned at various angles, some in the foreground and some in the background, creating a sense of depth. The image is partially overlaid by a white diagonal shape that contains text.

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

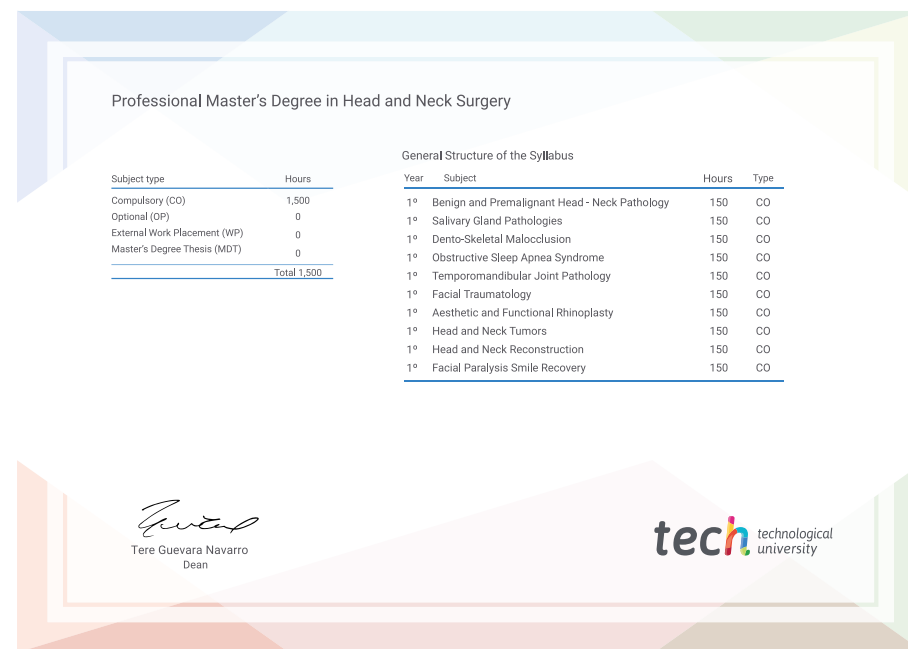
This **Professional Master's Degree in Head and Neck Surgery** contains the most complete and up-to-date scientific program on the market.

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

The diploma issued by **TECH Technological University** will reflect the qualification obtained in the Professional Master's Degree, and meets the requirements commonly demanded by labor exchanges, competitive examinations, and professional career evaluation committees

Title: **Professional Master's Degree in Head and Neck Surgery**

Official N° of Hours: **1,500 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.



Professional Master's Degree

Head and Neck Surgery

- › Modality: online
- › Duration: 12 months
- › Certificate: TECH Technological University
- › Dedication: 16h/week
- › Schedule: at your own pace
- › Exams: online

Professional Master's Degree

Head and Neck Surgery

