



## Professional Master's Degree

## Psycho-Oncology

» Modality: online

» Duration: 12 months

» Certificate: TECH Technological University

» Dedication: 16h/week

» Schedule: at your own pace

» Exams: online

We bsite: www.techtitute.com/us/medicine/professional-master-degree/master-psycho-oncology

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## tech 06 | Introduction

Currently, multiple lines of research and increasingly advanced therapies have been developed, focusing on the management and symptomatic control of cancer. This implies that patients experience short-, medium- and long-term effects of the disease. For this reason, a sub-specialty called "Psycho-Oncology" is beginning to emerge, which advocates for the psychosocial well-being of the oncology patient, the effects it has on their life and the impact on their family environment.

With the Professional Master's Degree in this area, physicians will be able to expertly specialize in the comprehensive care of their oncology patients in all phases of the disease, i.e., from diagnosis to cases requiring special care to ensure comfort in the last moments. This also includes the mental health of the patient's family members and caregivers during the progression of the disease.

In this degree program, special emphasis will be placed on the need to improve students' communication skills and abilities, which will ensure that they are able to manage their emotions in any stressful or conflictive situation. This will be essential for the patient to adequately understand the process they are about to face. Likewise, special attention will be paid to the students' need to effectively manage *Burnout* symptoms, encouraging personal self-care.

In this way, the student will learn about the advances and contributions of psychology to oncology, which will help them to determine, with the patient and their family, realistic therapeutic objectives. Likewise, they will learn the intervention techniques designed to emotionally accompany the patient, identifying the symptoms and psychological alterations that represent a threat to the effectiveness of the treatment.

For all these reasons, doctors who take this Professional Master's Degree will be able to become complete professionals. Therefore, they will be able to approach the disease from a novel approach that takes into account the emotional and social reality of the patient. Therefore, they can work in any hospital, nationally and internationally, under very stressful situations and a high emotional load.

This **Professional Master's Degree in Psycho-Oncology** contains the most complete and up-to-date educational program on the market. The most important features are:

- Practical cases presented by experts in Psycho-Oncology and medicine
- 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 the self-assessment process can be carried out to improve
- learning
- Special emphasis is placed on innovative methodologies in Applied Psycho-Oncology in medicine
- 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



Help your patients understand and accept the unfavorable prognosis using techniques designed by psycho-oncologists"



As a physician, you must take care of yourself to avoid job stress when working in the oncology department of a hospital"

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.

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, the student will be assisted by an innovative interactive video system created by renowned and experienced experts.

It reduces the concern of an oncology patient by understanding their family and social situation.

Improve your skills to communicate with patients in an assertive and reassuring manner.





The Professional Master's Degree in Psycho-Oncology designed for physicians will foster the communication and empathy skills that health professionals need to work in an oncology team. Consequently, knowledge in this program will be indispensable when establishing a relationship with the patient, respecting their beliefs and decisions. At the same time, the needs of the family members, who will accompany the patient throughout the process, will be taken into account.



## tech 10 | Objectives



### **General Objectives**

- Gain in-depth knowledge of the area of study and development of the profession
- Know the application of psychology in the nursing care for cancer
- Define the functions of a psycho-oncology unit and the role of the psycho-oncologist in the health care setting
- Gain in-depth knowledge of the different therapeutic options in the psychological treatment of cancer
- Contribute to the control of anemic disorders by means of appropriate psychological strategies
- Know how to assess and intervene in adaptive and maladaptive emotions and behaviors
- Understand the influence of the psychological aspects of each type of tumor and to contribute to their control by means of psychological strategies
- Know how to assess and intervene in adaptive and maladaptive emotions and behaviors of the different oncologic processes
- Know how to differentiate between adaptive and maladaptive emotions and behaviors at the end of life
- Explore and apply strategies for emotional self-regulation
- Know, evaluate, diagnose and intervene in the most prevalent psychological problems in palliative care
- Explore personal, social and cultural beliefs and values of the family in relation to illness and death
- Prepare for the loss
- Detect psychological reactions in the different phases of grief
- Provide appropriate individual and family bereavement support

- Prevention and early identification of pathological grief
- Gain in-depth knowledge of the basics and acquire basic communication skills
- Understand in depth the theoretical bases of the professional-patient relationship
- Be able to deliver bad news and answer difficult guestions
- Elaborate an initial assessment (detailed clinical history) and analysis of the social and spiritual emotional impact on the patient and their family
- Know how to apply the instruments for the assessment of the patient and the family, useful and appropriate for each symptom and stage of the disease
- Know in depth the conceptual bases, the methodology, the systematics and the procedures related to research in psycho-oncology
- Search and select information: electronic databases, websites, libraries, magazines, texts, etc
- Apply bioethical principles to daily clinical practice with special emphasis on the most complex and specific situations
- Deepen understanding in the conceptual and practical bases of ethics applied to the oncological process
- Analyze in a scientific, rigorous and systematic way, ethical problems from an interdisciplinary perspective
- Deepen understanding of the methodology of bioethics, rational and interdisciplinary, and know how to apply it to concrete or general situations





### **Specific Objectives**

### Module 1. Characterization and Fields of Application of Psycho-Oncology

- Provide the necessary clinical knowledge of oncological disorders, epidemiology, etiology, risk factors, processes and diagnostic tests
- Train in the design and implementation of health promotion and cancer prevention and early detection programs
- Be able to argue about the area of study and the profession
- Identify the social needs of people with cancer and their families
- Analyze the influence of the perceived social support in cancer

### Module 2. Psychological Treatments in Cancer and Third Generation Therapies

- Determine realistic treatment objectives together with the patient and/or their family
- Undergo training in the methods of intervention with cancer patients, especially empirically supported treatment techniques
- Identify those somatic symptoms and/or psychological alterations that are perceived by the patient as a threat
- Detect and enhance, as far as possible, the patient's own resources

## Module 3. Most Relevant Psychological Aspects According to Different Tumor Locations

- Identify those somatic symptoms and/or psychological alterations that are perceived by the patient as a threat
- Compensate for, eliminate or attenuate such symptoms, symptom control
- Detect and enhance, as far as possible, the patient's own resources
- Facilitating adaptation to the disease during the biomedical treatment process (affecting anxiety, anguish, side effects of chemotherapy, phobias of radiotherapy devices, sexual dysfunctions and also hospital admissions)
- Encourage active coping styles
- Facilitate therapeutic adherence to medical treatment

## tech 12 | Objectives

### Module 4. Protocols for Emotional Intervention at the End of Life

- Perform preventive care actions for the family according to the stages of the disease
- Address conflicts that may arise as a result of different socio-cultural beliefs and values between the team and the patient-family binomial
- Recognize and respond to spiritual distress and know how to refer the patient to the appropriate professional
- Develop appropriate assessments of the overall importance of the patient's spiritual beliefs and religious practices
- Manage the attitudes and responses of patients, caregivers and professionals derived from the professional-patient relationship
- Know how to intervene in particularly complex family situations
- Be able to work in cooperative groups and multi-professional teams

#### Module 5. Evaluation and Measurement Instruments

- Evaluate the complex psychological problems
- Apply assessment procedures and instruments for specific symptoms
- Acquire the training and practice to conduct quality of life assessment; plan the assessment and use specific instruments, conduct functional analysis, case formulation and reporting
- Assess family threats, needs and resources, and know how to apply family assessment tools
- Manage comprehensive assessment tools in palliative and end-of-life care

### Module 6. Communication with the Oncologic Patient

- Work with a Patient-Centered Psychology
- Appropriately handle difficult situations and dealing with bad news
- Prevent and detect communication problems (e.g., pact of silence) and enhance family members' resources and strategies
- Manage the most complex communication difficulties
- Reflect critically on one's own attitudes and communication skills, identifying elements for continuous improvement during the care process

### Module 7. Grief Management

- Prevent as much as possible the onset of complicated grief prior to death
- Continue to prevent through emotional support, after the death, the onset of complicated grief, providing the tools that help the person to say goodbye to their loved one
- Provide guidance in carrying out bereavement tasks
- Develop the capacity for empathy, listening and compassion that allows us to be in tune with the patient's pain, without over-involvement and, at the same time, create a sufficiently strong therapeutic bond in the face of difficulties that may arise in the process

## Module 8. Other Psychological Interventions in Specific Cancer-Related Areas

- Perform in-depth management of the combined protocol for the smoking withdrawal process and relapse prevention
- Perfect the skills and competencies necessary for the selection, training and supervision of volunteers
- Detect the psychological factors associated with participation in cancer *screening* and genetic counseling programs, as well as to encourage participation in them by increasing the perception of control
- Analyze the use and some of the advantages of group therapy compared to individual treatment
- Gain in-depth knowledge of psychological preparation programs for the different medical oncological treatments and their side effects
- Be able to identify and mitigate the sequelae that remain in cancer survivors

#### Module 9. Research in Cancer

- Design, develop and implement a research project
- Formulate scientific research hypotheses
- Analyze results and draw conclusions
- Train in scientific communication of research results
- Establish the ethical limitations of a research project
- Have the ability to apply empirical evidence in patient care
- Gain knowledge of good clinical practice guidelines and ethics committee standards

## Module 10. Ethical Aspects in Psycho-Oncology and Psychology of Palliative Care

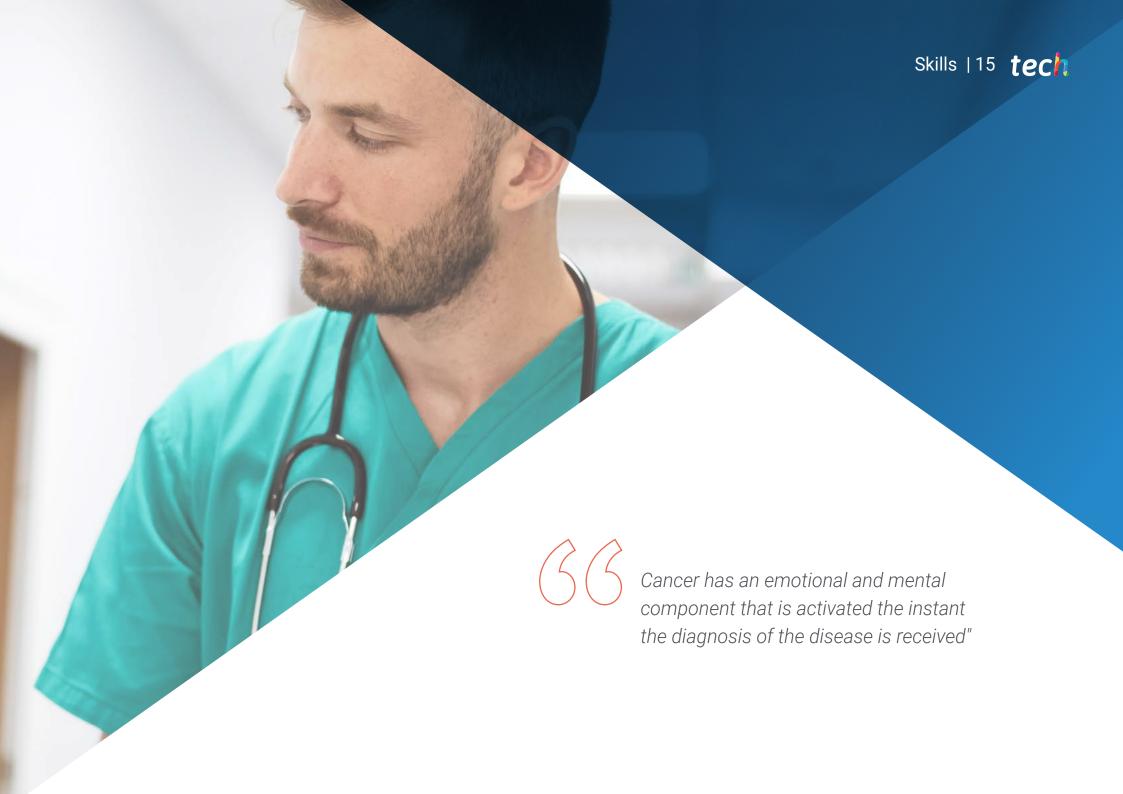
- Analyze ethical dilemmas in depth and from an interdisciplinary perspective
- Identify bioethical problems in the conduct of professionals, in health care activities or in biomedical research
- Argue decisions in the biomedical field with well-founded ethical value judgments
- Develop expressive and communicative skills on bioethical issues in order to be able to interact in an ethics committee environment



Fulfill your patients' wishes in their last moments, respecting and understanding their religious beliefs"

# 03 **Skills**





## tech 16 | Skills

### After completing this training, the professional will be able to:

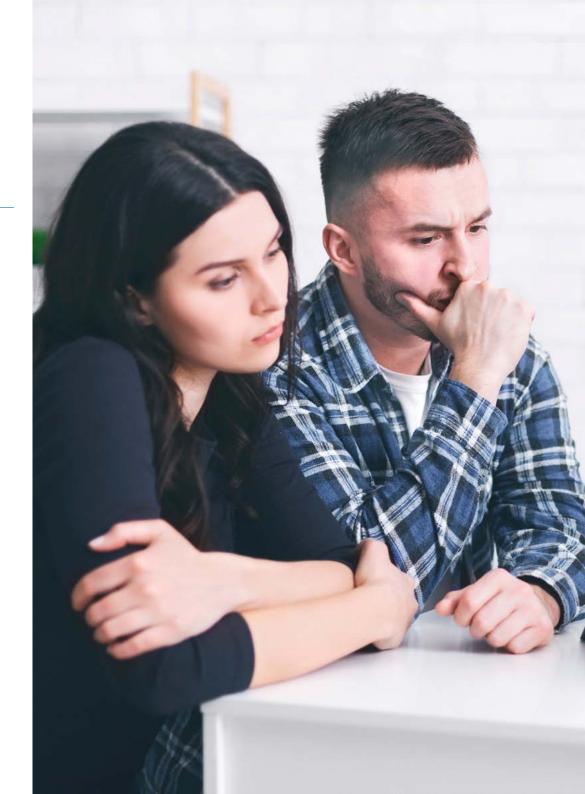


### **General Skills**

- Perform assessment and diagnosis to start treatment in cancer patients
- Know the area of study and the profession for a better understanding of the disease
- Use information and communication technologies to keep abreast of new developments in the disease
- Improve skills in searching, processing and analyzing information from various sources
- Make decisions under stress



Facilitate psychological support of the highest quality and reduce of the highest quality and reduce the negative emotions of the disease"







## **Specific Skills**

- Develop students' empathic skills in dealing with terminally ill patients
- Identify the patient's strengths to motivate them to continue treatment
- Help facilitate the patient's adaptation to their new reality, before, during and after treatment
- Develop plans to help families and patients cope with grief
- Know how to identify between maladaptive emotions and behaviors to prevent patients from self-injury
- Work on self-care to avoid job stress
- Develop coping plans when faced with the news of a terminal illness
- Improve communication skills to have assertive discussions with the patient's family members
- Help the different professionals involved in the patient's treatment to communicate with the family





## tech 20 | Course Management

### Management



### Mr. Garrido Jiménez, Sergio

- Provincial Coordinator of the Section of Psycho-Oncology and Palliative Care of (Ilustre Colegio Oficial de Psicólogos de Andalucía Oriental COPAO) in Jaén
- General Health Psychologist for the Junta de Andalucía. NICA Business School 43384
- Expert Psychologist in Psycho-oncology and Psychology in Palliative Care (General Council of Psychology of Spain CGCOP).
- Member of the Management Headquarters of the Association of Psychological Health Centers (ACESAP) of the UJA.
- Member of the Ethics Committee for Research with Medicines of the Province of Jaén (CEIM) and of the Research Ethics Committee of Jaén (CEI).
- Member of the Spanish Society of Psycho-Oncology (SEPO)
- Degree in Psychology. University of Jaen (UJA)
- Master's Degree in Psycho-Oncology Complutense University of Madrid (UCM)

### **Professors**

### Dr. Montes Berges, Beatriz

- Psychologist and Criminologist
- PhD in Psychology
- Professor of Social Psychology
- Gestalt Therapist
- Member of the Section of Psycho-Oncology and Palliative Care of the Western Andalusia Official College of Psychology
- Professor of Psychology in the Nursing Degree

### Dr. Ortega Armenteros, María Carmen

- Physician of the Palliative Care Support Team, Jaén Hospital Complex.
- Physician in the Mixed Palliative Care Support Team at the San Juan de la Cruz Hospital in Úbeda
- Physician of the Home Care Unit for palliative oncology patients that the Spanish Association Against Cancer had in collaboration with the SAS in the City of Jaén Hospital Complex.
- Degree in Medicine and Surgery from the University of Granada
- Doctor of Medicine
- Specialist in Medical Oncology with training carried out in the San Cecilio University Hospital of Granada
- Master's Degree in Palliative Care from the University of Valladolid
- Postgraduate Diploma in Palliative Care from the University of Granada

### Ms. Pino Estrada, Marta

- Psycho-Oncologist at Spanish Association Against Cancer Madrid
- Clinical Psychologist of Integral Rehabilitation at Bartolomé Puerta
- Degree in Psychology from the University of Jaen
- Master's Degree in Psycho-Oncology from the Complutense University of Madrid
- Specialist in Childhood Psychology and Neuropsychology at Euroinnova Business School

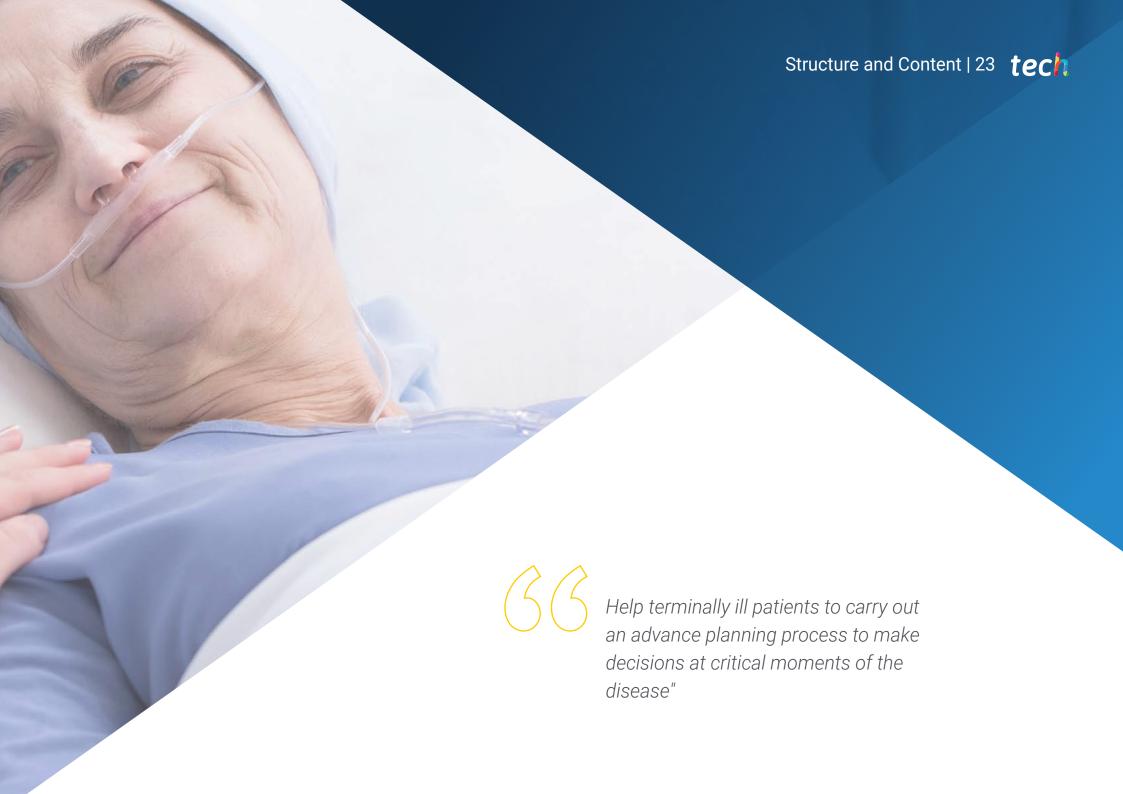
### Dr. Cárdenas Quesada, Nuria

- Assistant Physician of the Medical Oncology Department, Jaen University Hospital.
- Teaching coordinator of multiple ACSA-accredited clinical sessions
- Medical Oncology Resident Tutor at the Jaén Hospital
- Degree in Medicine and Surgery from the University of Granada
- Full Doctorate Program and Research Sufficiency in "Advances in Radiology (Diagnostic and Therapeutic), Physical Medicine and Medical Physics" from the University of Granada.

### Dr. Aranda López, María

- Assistant PhD Professor in the area of Social Psychology at the University of Jaén.
- Member of the Psychology Cabinet of the University of Jaen.
- Member of the group PAIDI "HUM651: Psychosocial Analysis of Behavior in the Face of a New Reality" and "HUM836: Psychological Assessment and Intervention"
- PhD in Psychology
- Expert psychologist in Emergencies and Disasters
- Collaborator in various volunteer programs, health programs, programs for people at risk of social exclusion or vulnerable and employment orientation programs





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### Module 1. Characterization and Fields of Application of Psycho-Oncology

- 1.1. Cancer and Its Impact on Current Society
  - 1.1.1. Cultural Variability
  - 1.1.2. Incidence, Prevalence and Mortality
- 1.2. Myths, Beliefs and Pseudotherapies Related to Cancer
- 1.3. Medical Care for Cancer Patients
  - 1.3.1. Early Detection of Cancer
  - 1.3.2. Surgery and Treatment
- 1.4. Risk Factors and Cancer
  - 1.4.1. Psychoneuroimmunology
  - 1.4.2. Stress, Coping Styles and Personality Variables
- 1.5. Cancer Prevention
  - 1.5.1. Primary and Secondary Prevention
  - 1.5.2. Health Education and Healthy Lifestyle Habits
- 1.6. Functions of the Psycho-Oncologist: Their Role Within the Hospital Environment
- 1.7. Teaching, Training, Specialization and Accreditation in Psycho-Oncology
- 1.8. Objectives and Areas of Psychological Intervention for Cancer Patients and their Families
- 1.9. Other Disciplines Related to Psycho-Oncology
  - 1.9.1. Psychology as an Intersection Between Oncology and Health Psychology
- 1.10. Approach to the Social Needs of the Cancer Patient
  - 1.10.1. Economic and Occupational Impact. Job Reintegration
  - 1.10.2. Social Support and Cancer

## **Module 2.** Psychological Treatments in Cancer and Third Generation Therapies

- 2.1. Effective Psychological Treatments in Psycho-Oncology
- 2.2. Cognitive-Behavioral Therapy in Cancer Treatment
  - 2.2.1. Identification of Automatic Thoughts and Modification of Cognitions
  - 2.2.2. Activation Control Techniques
    - 2.2.2.1. Diaphragmatic Breathing Training
    - 2.2.2.2. Progressive Muscular Relaxation
  - 2.2.3. Behavioral Activation
  - 2.2.4. Exposition Techniques and Guided Imagination

- 2.3. Cognitive Training Program
- 2.4. Rehabilitation Program Based on Physical Exercise
- 2.5. Mindfulness
  - 2.5.1. Mindfulness Training Program
  - 2.5.2. Compassion and Self-Compassion Practice
- 2.6. Acceptance and Commitment Therapy (ACT)
  - 2.6.1. Components of ACT and Clinical Methods
- 2.7. Therapy Focused on the Search for Meaning
  - 2.7.1. Cancer and Feeling. Exploration of the Sources of Meaning
- 2.8. Dignity Therapy
  - 2.8.1. The Concept of Dignity in Cancer Patients
  - 2.8.2. Models of Dignity. Chochinov
- 2.9. Systemic Family Therapy
  - 2.9.1. Family and Cancer. Most Common Family Dynamics
- 2.10. Pseudotherapies and Pseudosciences Against Cancer
  - 2.10.1. Positions of Government Agencies
  - 2.10.2. Pseudotherapies and Pseudosciences With and Without Scientific Evidence

## **Module 3.** Most Relevant Psychological Aspects According to Different Tumor Locations

- 3.1. Leukemias, Lymphomas and Myelomas
  - 3.1.1. Bone Marrow Transplantation and Isolation Situations
- 3.2. Breast Cancer and Gynecology
  - 3.2.1. Body Image
  - 3.2.2. Sexuality
  - 3.2.3. Self-esteem
  - 3.2.4. Chemobrain Effect
- 3.3. Prostate Cancer
  - 3.3.1. Incontinence and Sexual Impotence
- 3.4. Colon Cancer and the Digestive System
  - 3.4.1. Living with a Colostomy
- 3.5. Intervention in Laryngectomized Patients

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- 3.5.1. Speech Therapy Intervention
- 3.5.2. Alteration in Social and Work Life
- 3.6. Head and Neck Tumors
- 3.7. Thyroid Cancer
- 3.8. Tumors of the Central Nervous System
  - 3.8.1. Cognitive Deficits and Mobility Limitations
- 3.9. Lung Cancer
- 3.10. Child Cancer
  - 3.10.1. Emotional Development and Child Intellect
  - 3.10.2. Social Impact on the Child
  - 3.10.3. Impact on the Family

### Module 4. Protocols for Emotional Intervention at the End of Life

- 4.1. Palliative Care Objectives
- 4.2. Evaluation of Suffering
- 4.3. Process of Psychosocial Adaptation at the End of Life
  - 4.3.1. Adaptive vs. Maladaptive Reactions
- 4.4. Triadic Interaction Model for Patients, Family and Healthcare Professionals
- 4.5. Specific Interventions Centered on the Patient
  - 4.5.1. Anxiety
  - 4.5.2. Sadness
  - 4.5.3. Hostility
  - 4.5.4. Fear
  - 4.5.5. Blame
  - 4.5.6. Denial
  - 4.5.7. Withdrawal
- 4.6. Specific Needs of the Family. Assessment of the Patient-Family Unit
  - 4.6.1. Conspiracy of Silence
  - 4.6.2. Family Claudication
- 4.7. Interventions Oriented Towards Health Professionals
  - 4.7.1. Working in Multicultural Teams
  - 4.7.2. Prevention of Burnout Syndrome
- 4.8. Attention to the Spiritual Needs of the Patient

- 4.8.1. Spiritual Care Model of SECPAL (Spanish Society of Palliative Care).
- 4.8.2. Existential Angst and Religious Experience
- 4.9. Psychological Intervention in Pediatric Palliative Care
- 4.10. Advance Decision Making Process and Planning (ADP)
  - 4.10.1. Declaration and Registry of Advance Vital Wills

### **Module 5.** Evaluation and Measurement Instruments

- 5.1. The Psycho-Oncology Clinical Interview
- 5.2. Evaluation of the Needs of the Cancer Patient
  - 5.2.1. Needs Evaluation Questionnaire, (NEQ)
  - 5.2.2. Patient Needs Assessment Tool, (PNAT)
  - 5.2.3. The Short-Form Cancer Needs Questionnaire, (CNQ)
- 5.3. Evaluation of the Quality of Life of the Cancer Patient
  - 5.3.1. EORTC Questionnaire (European Organization for Research and Therapy of Cancer)
  - 5.3.2. FACT Questionnaire (Functional Assessment of Cancer Therapy)
  - 5.3.3. SF 36 Health Ouestionnaire
- 5.4. Main Evaluation Questions for Physical Symptoms of Cancer
  - 5.4.1. Edmonton Symptom Assessment Sytem (ESAS)
  - 5.4.2. Questions for Pain Assessment
  - 5.4.3. Questions for Fatigue and Quality of Sleep Evaluation
  - 5.4.4. Cognitive Screening and Functiona State Questionnaires
  - 5.4.5. Questionnaires for the Evaluation of Sexuality
- 5.5. Detection of Distress and Assessment of Suffering
  - 5.5.1. Emotional Distress Screening Questionnaire
  - 5.5.2. Emotional Distress Thermometer
  - 5.5.3. Hospital Anxiety and Depression Scale (HAD)
  - 5.5.4. Subjective Perception of the Passing of Time 5.5.4.1. Waiting Times in Oncology
- 5.6. Socio-Familial Assessment and Valuation
  - 5.6.1. Perceptoin of the Family Function. APGAR Family Questionnaire
  - 5.6.2. Family Relationship Index (FRI)

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- 5.6.3. Self Report Family Inventory (SFI)
- 5.7. Coping Assessment Questionnaires for Cancer Patients
  - 5.7.1. Mental Adjustment to Cancer (MAC)
  - 5.7.2. Questionnaire to Measure Coping Styles. Miller Behavioral Style Scale (MBSS)
  - 5.7.3. COPE Questionnaire
- 5.8. Assessment Tools for Spiritual Needs
  - 5.8.1. Spiritual Needs and Well-Being Assessment Scale from GES (Spiritual Group). Part of SEPCAL (Spanish Society for Palliative Care)
  - 5.8.2. Functional Assessment of Chronic Illness Therapy Spiritual Well Being
  - 5.8.3. The Patient Dignity Inventory
- 5.9. Self-Report and Observation
  - 5.9.1. Clinical Case Formulation
- 5.10. Psychological Assessment of Children in Palliative Care

### Module 6. Communication with the Oncologic Patient

- 6.1. Illness, Communication and the Helping Relationship
  - 6.1.1. Doctor-Patient Communication as a Possible Factor of Improvement and latrogenesis. Pain and Suffering Prevention
  - 6.1.2. Communication Barriers
- 6.2. How to Give Bad News About Cancer.
  - 6.2.1. Answers to Difficult Questions
  - 6.2.2. Communication in Complicated Situations
- 6.3. Counselling Techniques in Clinical Practice
  - 6.3.1. Counselling Attitudes
  - 6.3.2. Assertive Communication
  - 6.3.3. Emotional Control
  - 6.3.4. Problem-Solving and Responsible Decision-Making
- 6.4. Relationship Models and Therapeutic Influence
  - 6.4.1. Paternal Model
  - 6.4.2. Informative Model
  - 6.4.3. Interpretive Model





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- 6.4.4. Deliberative Model
- 6.5. Tools for Emotional Support in Cancer
  - 6.5.1. How to Speak With a Cancer Patient. Guide for Friends and Family
  - 6.5.2. Levels of Emotional Interaction
- 6.6. Non-Verbal Communication in the Support Relationship
- 6.7. Communication in Palliative and End-of-Life Care
  - 6.7.1. Learning to Talk About Death
- 6.8. Talking About Cancer With Children
- 6.9. Communication in People With Communication Deficits
- 6.10. Treatment of Cancer in the Media
  - 6.10.1. Cancer on Social Networks

### Module 7. Grief Management

- 7.1. Death, Culture and Society
  - 7.1.1. Health Professionals in the Face of Death
- 7.2. Psychological Evaluation of Grief
  - 7.2.1. Interview and Specific Instruments for Assessment
- 7.3. Common Reactions to Grief
  - 7.3.1. Normal Grief and Complicated Grief
  - 7.3.2. Vulnerability Factors
  - 7.3.3. Differential Diagnosis Between Grief and Depression
- 7.4. Main Theoretical Models About Grief
  - 7.4.1. Bowlby's Attachment Theory
  - 7.4.2. Nuclear Beliefs and Meaning Reconstruction
  - 7.4.3. Conceptual Models About the Trauma
- 7.5. Objectives of Intervention in Grief and Recommended Interventions
  - 7.5.1. Facilitating the Normal Process of Grief. Prevention of Complicated Grief
  - 7.5.2. Suggestions for Intervention Before and After the Death
  - 7.5.3. Bereavement Psychotherapy from an Integrative Relational Model

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- 7.6. Group Intervention in Attention to Grief
  - 7.6.1. Psychological Intervention Grief Due to the Loss of a Child
- 7.7. Stages of Grief
  - 7.7.1. Bereavement Tasks
- 7.8. Grief in Children
- 7.9. Suicide and Cancer
- 7.10. Psychopharmacology in Attention to Grief

## **Module 8.** Other Psychological Interventions in Specific Cancer-Related Areas

- 8.1. Psychological Treatment to Give Up Smoking
  - 8.1.1. Myths About Tobacco
  - 8.1.2. Analysis of Smoking Behavior. Physical and Psychological Dependence
  - 8.1.3. Program Structure. Sessions and Methodology
  - 8.1.4. Abstinence and Prevention of Relapse
- 8.2. Early Detection of Cancer
  - 8.2.1. Screening Tests (Mammography, FOBT, Cytology, etc.)
  - 8.2.2. Anticipatory Anxiety and Difficulties in Participation
  - 8.2.3. Oncologic Genetic Counseling
- 8.3. Mutual of Self-Help Groups
- 8.4. Psycho-Educational Groups for Family Members and Patients
  - 8.4.1. Topics to Approach and Work Methodology
  - 8.4.2. Inclusion and Exclusion Criteria
- 8.5. Psychological Intervention in Cancer Survivors. The Return to "Normality"
- 8.6. Control of Secondary Effects in Cancer Patients
  - 8.6.1. Pain Control
  - 8.6.2. Against Fatigue and Sleep
  - 8.6.3. Sexuality Control
  - 8.6.4. Cognitive Alterations. Chemobrain Effect
- 8.7. Preparation and Intervention for Hospitalization and Surgery
- 8.8. Psychological Preparation for Other Medical Treatment (Chemotherapy, Radiotherapy, etc.)
- 8.9. Psychological Intervention in Bone Marrow Transplants (BMT)

- 8.10. Strategies for Training Volunteers in Cancer Patient Care
  - 8.10.1. The Volunteer Interview. Assignment and Matching of the Volunteer to Each Profile
  - 8.10.2. Specific Training of the Volunteer. Tutoring and Monitoring

### Module 9. Research in Cancer

- 9.1. World Declaration for Cancer Research
- 9.2. Methodology of Cancer Research
  - 9.2.1. Cancer Prevention Area
  - 9.2.2. Cancer Treatment Area
- 9.3. Common Errors in Psych-Oncology Research
- 9.4. Steps to Follow to Carry Out Psycho-Oncology Research
- 9.5. Epidemiological Research Into Cancer
- 9.6. Biomedical Research
  - 9.6.1. Participation in Clinical Trials in Cancer
  - 9.6.2. Doubts, Risks and Benefits
  - 9.6.3. Distribution of Clinical Trials Per Type of Cancer
- 9.7. Main Advances in Research
  - 9.7.1. Priority Areas of Research in Psycho-Oncology
  - 9.7.2. Priority Areas of Research in Palliative Care
  - 9.7.3. New Lines of Research
- 9.8. Impact of the COVID-19 Pandemic in People Affected by Cancer
- 9.9. Lines of Research from Social Work
- $9.10. \ \ {\it Publications} \ on \ {\it Psycho-Oncology} \ and \ {\it Palliative} \ {\it Care} \ in \ {\it Scientific Journals}$ 
  - 9.10.1. Writing of Scientific Articles

## **Module 10.** Ethical Aspects in Psycho-Oncology and Psychology of Palliative Care

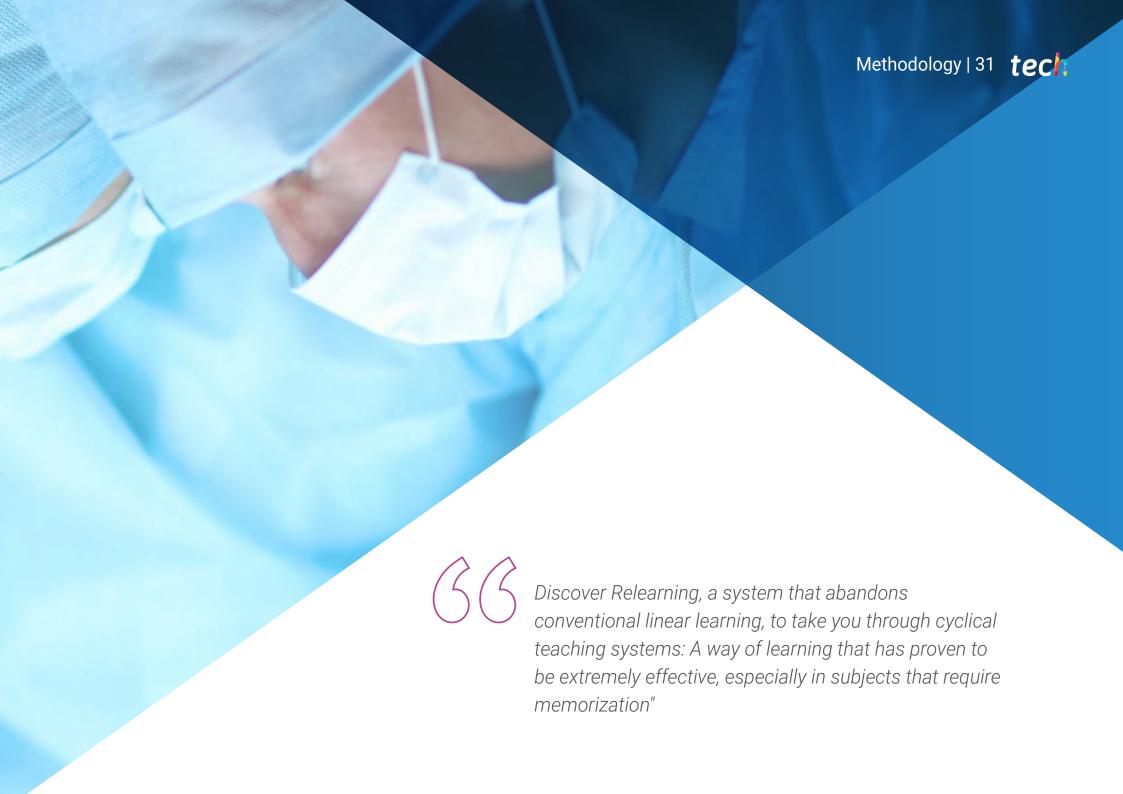
- 10.1. Telling the Patient the Truth or Not. Managing the Bearable Truth
- 10.2. Cancer and Ethics: A Complex Interaction
  - 10.2.1. Principled Bioethics
  - 10.2.2. Personalistic Bioethics
  - 10.2.3. Double Effect Principle

- 10.3. Anthropological Basis
  - 10.3.1. The Experience of Fragility
  - 10.3.2. The Experience of Suffering
  - 10.3.3. The Person as Wounded Healer
- 10.4. Rights of the Cancer Patient
  - 10.4.1. Patient Autonomy Law
  - 10.4.2. Informed consent
  - 10.4.3. GDPR and Confidentiality of Medical History
- 10.5. Ethical Duties of Health Care Workers Caring for Cancer Patients
- 10.6. Death with Dignity
  - 10.6.1. Assisted Suicide and Euthanasia
  - 10.6.2. Adequacy or Limitation of Treatment, Refusal of Treatment, Sedation, Therapeutic Obstinacy
- 10.7. Participation of the Patient in Their Process of Illness, Treatment and Decision Making
  - 10.7.1. Moral Dialogue
- 10.8. Humanization in the Care of Cancer Patients
  - 10.8.1. Quality and Warmth
- 10.9. Ethical Care Committees and Clinical Research
- 10.10. Inequalities and Cancer Equity
  - 10.10.1. Psychological Care in Cancer in the National Health System in Spain
  - 10.10.2. Current Situation in Palliative Care



Each oncologic patient is different and needs medical and emotional support adapted to their needs"





## tech 32 | 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.



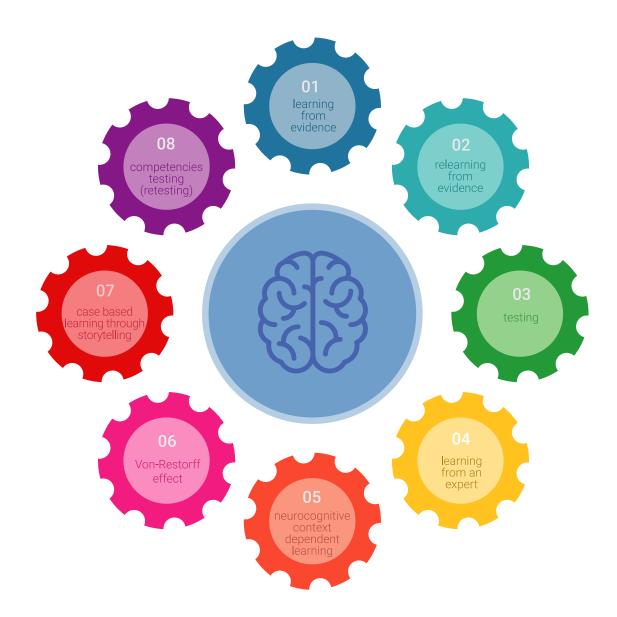


### Relearning Methodology

TECH effectively combines the Case Study methodology with a 100% online learning system based on repetition, which combines 8 different teaching elements in each lesson.

We enhance the Case Study with the best 100% online teaching method: Relearning.

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



### Methodology | 35 tech

At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

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

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

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

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

## tech 36 | Methodology

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



### **Study Material**

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

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



### **Surgical Techniques and Procedures on Video**

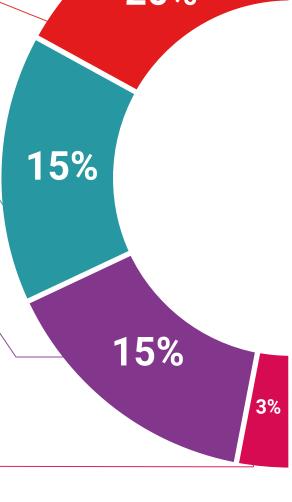
TECH introduces students to the latest techniques, the latest educational advances and to the forefront of current medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many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



#### **Interactive Summaries**

The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".





### **Additional Reading**

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.

### **Expert-Led Case Studies and Case Analysis**

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



### **Testing & Retesting**

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



### Classes

There is scientific evidence on the usefulness of learning by observing experts.

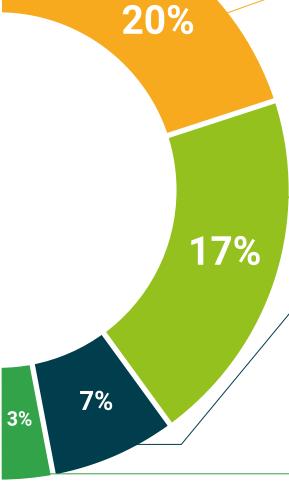
The system, known as Learning from an Expert, strengthens knowledge and memory, and generates confidence in future difficult decisions.



### **Quick Action Guides**

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









### tech 40 | Certificate

This Professional Master's Degree in Aquaculture contains the most complete and upto-date scientific program on the market.

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

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

Title: Professional Master's Degree in Psycho-Oncology

Official No of Hours: 1,500 h.





<sup>\*</sup>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 confidence people information tuters guarantee accreditation teaching institutions technology learning community commitment.



# Professional Master's Degree Psycho-Oncology

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

