



Master's Degree

Skin Cancer

» 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/master-degree/master-skin-cancer

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In recent years, skin cancer has experienced a worrying increase in its incidence. This is due to prolonged exposure to ultraviolet radiation from the sun, environmental and genetic factors. In this aspect, the early detection of skin cancer is crucial for a successful treatment and to improve the survival rates of patients. For this reason, it is essential that the specialist is constantly informed about this disease, in order to introduce the most wellknown advances in its therapeutics and under the maximum scientific rigor.

For this reason, TECH has created this degree that will provide a high-level education to the health professional in the latest diagnostic advances and treatment techniques used in Skin Cancer. During a period of 12 months of study, the graduate will deepen in the different types of surgery used to address this disease, such as curettage and electrocoagulation.

Students will also learn about the various techniques for the evaluation and detection of cancer, such as sentinel lymph node biopsy and photodynamic therapy. In addition, thanks to the quality multimedia content, students will delve into the topical treatments used for cutaneous cancer such as 5-fluorouracil and imiquimod.

Consequently, this Master's Degree gives professionals the opportunity to access a quality, flexible program that allows them to combine it with their daily activities by not having to attend classroom classes, nor to have classes with restricted schedules. In addition, this modality, combined with the Relearningmethod, will allow the specialist to review the most important concepts in a more efficient way and without requiring extensive hours of study.

This **Master's Degree in Skin Cancer** 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 experts in Dermatology, Oncology and Plastic and Reconstructive 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



You will delve into the molecular basis of melanoma, covering the genetic modifications and signaling pathways involved in its progression"



You will incorporate in your medical practice the most recent surgical techniques and photodynamic therapies for the approach of Basal Cell Carcinoma"

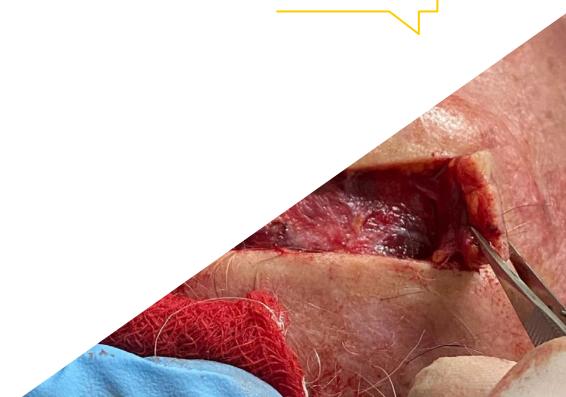
The program's teaching staff includes professionals from sector who contribute their work experience to this educational program, as well as renowned specialists from leading societies and prestigious universities.

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 immersion education programmed to learn in real situations.

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

You will gain additional skills in the evaluation of Merkel cell carcinoma lesions based on the latest scientific evidence.

With this degree you will delve into the mechanisms of squamous cell carcinoma and emerging therapeutic techniques.







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General Objectives

- Identify and classify the different types of skin cancer, including melanoma, basal cell carcinoma, squamous cell carcinoma and other less common subtypes
- Understand the risk factors associated with the development of skin cancer and its importance in prevention and early detection
- Perform a thorough clinical evaluation of patients with cutaneous cancer, including history, physical examination and interpretation of complementary tests
- Apply appropriate diagnostic techniques to confirm or rule out the presence of skin cancer, such as dermoscopy, biopsy and cytology
- Develop skills in the therapeutic management of different types of Skin Cancer, including surgery, radiotherapy, photodynamic therapy and the use of systemic therapies
- Evaluate and manage the complications and side effects associated with Skin Cancer treatments, such as infections, scarring and pigme ntation disorders
- Provide genetic counseling to patients and their families in cases of hereditary cutaneous cancer or predisposing genodermatoses
- Promote the prevention of skin cancer through education and awareness of sun protection methods and early detection of suspicious lesions
- Participate in multidisciplinary oncology care teams, collaborating with oncologists, dermatologists, surgeons and other healthcare professionals in the integral management of patients
- Constantly keep up to date with the latest advances and research in the field of skin cancer in order to provide evidence-based care







Specific Objectives

Module 1. Skin Cancer

- Identify and describe the different types of skin cancer, including melanoma, basal cell carcinoma, squamous cell carcinoma and other less common subtypes
- Deepen the risk factors associated with the development of Skin Cancer and its relationship with sun exposure, family history and genetic conditions
- Be updated on the clinical and dermatoscopic features of skin lesions suspicious for cancer and to differentiate them from benign lesions
- Be up to date on the clinical and dermatoscopic features of skin lesions suspicious for cancer and differentiate them from benign lesions

Module 2. Melanoma

- Identify risk factors associated with the development of melanoma, such as intense sun exposure, family history and presence of atypical nevi
- Review the different histologic subtypes of melanoma and understand their importance in prognosis and therapeutic management
- Keep up to date with the classification and staging criteria for Melanoma, using systems such as the TNM system and the Breslow Index
- Investigate the latest developments concerning the role of excisional biopsy and sentinel lymph node biopsy in the diagnosis and staging of Melanoma

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Module 3. Basal Cell Carcinoma

- Identify the clinical and dermoscopic features of basal cell carcinoma and differentiate it from other benign skin lesions based on the latest scientific evidence
- Be up to date on risk factors associated with the development of basal cell carcinoma, such as chronic sun exposure, family history and genetic conditions
- Implement into clinical practice the latest developments concerning the different histological subtypes of basal cell carcinoma and their relevance in prognosis and therapeutic handling
- Be up to date on the available treatment options for Basal Cell Carcinoma, including surgery, photodynamic therapy, radiotherapy and hedgehog pathway inhibitors, and understand their indications and contraindications

Module 4. Merkel Cells Carcinoma

- Be up to date on the clinical features of Merkel's carcinoma and distinguish it from other skin lesions
- Provide an overview of the risk factors associated with the development of Merkel's carcinoma, such as advanced age, immunosuppression and exposure to radiation
- Investigate the latest histopathological findings and immunohistochemistry used in the diagnosis of Merkel carcinoma
- Refine the treatment options available for Merkel carcinoma, including surgery, radiotherapy, immunotherapy and chemotherapy, and understand their indications and contraindications

Module 5. Squamous cell carcinoma

- Identify the clinical and dermoscopic features of squamous cell carcinoma and differentiate it from other skin lesions
- Understand the risk factors associated with the development of squamous cell carcinoma, such as chronic sun exposure, smoking and human papillomavirus (HPV) infection
- Be updated with the latest histopathological findings of squamous cell carcinoma and their relationship with prognosis and therapeutic behavior
- Improve diagnostic and staging techniques for squamous cell carcinoma, such as biopsy, immunohistochemistry and the use of classification systems such as the TNM system

Module 6. Other Skin Neoplasms

- Be up to date on the clinical and dermoscopic features of premalignant or malignant cutaneous sarcomas and other cutaneous neoplasms to differentiate them from other benign skin lesions
- Be up to date on the risk factors associated with the development of cutaneous sarcomas, such as previous radiation, chemical exposure and certain genetic predispositions
- Delve into new developments in the different types of penile and anal cancer, including their clinical features, risk factors and treatment options
- Review the identification and clinical evaluation of oral leukoplakia lesions and understand their relationship to the development of oral cancer

Module 7. Skin Cancer Treatments

- Delve into new developments related to surgical treatment options for skin cancer, including wide local excision, Mohs surgery and skin reconstruction
- Review the principles of radiation therapy in the treatment of skin cancer, including the techniques of external beam radiation therapy and brachytherapy
- Learn the use of topical and photodynamic therapies in the management of precancerous skin lesions and carcinoma in situ
- Delve into the systemic therapies used in the treatment of advanced melanoma and other subtypes of metastatic skin cancer

Module 8. Cutaneous Lymphomas

- Distinguish the different subtypes of cutaneous lymphomas, such as T-cell lymphoma and B-cell lymphoma, by evaluating the clinical, histopathological and molecular features
- Be up to date in the pathogenic mechanisms involved in the development of cutaneous lymphomas, including infiltration of malignant lymphoid cells into the skin and systemic dissemination
- Be up to date with diagnostic techniques for cutaneous lymphomas, such as skin biopsy, immunohistochemistry, flow cytometry analysis and molecular biology
- Implement into your practice new developments related to the treatment options available for cutaneous lymphomas, including topical therapy, radiotherapy, chemotherapy and targeted therapy, and understand their indications and limitations

Module 9. Genodermatoses Predisposing to Skin Cancer

- Deepen in the new developments of the genodermatoses that present a greater predisposition to the development of skin cancer, such as xeroderma pigmentosum syndrome, Li-Fraumeni syndrome and dysplastic nevus syndrome
- Understand the genetic mechanisms underlying Genodermatosis predisposing to skin cancer, including mutations in key genes related to DNA repair and tumor suppression
- Be up to date with the characteristic clinical manifestations of skin cancer predisposing genodermatoses, such as the presence of multiple skin lesions, increased sensitivity to solar radiation and increased risk of developing different types of tumors
- Be up to date with strategies for prevention and early detection of skin cancer in patients with genodermatosis, including the use of sunscreens, regular dermatological surveillance, and the performance of genetic and molecular studies

Module 10. Dermatologic Pathology in the Oncology Patient

- Identify new developments regarding the most common dermatological manifestations in oncology patients, such as chemotherapy-induced dermatitis, skin lesions associated with radiotherapy and adverse reactions to targeted therapies
- Evaluate and properly diagnose dermatologic complications in oncology patients, such as secondary skin infections, skin reactions to medications and pressure ulcers
- Understand the pathophysiologic mechanisms underlying dermatologic manifestations in oncologic patients, including immune system dysfunction, toxicity of treatments, and side effects of the disease itself
- Develop skills in the management and treatment of dermatologic conditions in oncologic patients, including the use of topical medications, application of local cures, infection prevention and control of skin pain





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General Skills

- Thorough knowledge of the physiology, etiology and epidemiology of skin cancer
- Ability to diagnose and evaluate cases of skin cancer
- Perform a complete differential diagnosis of the pathology
- Know how to interpret the different diagnostic tests
- Develop a correct strategy in the differential diagnosis of pathologies
- Learn how to differentiate a lesion with aggressive clinical characteristics from a non-aggressive one
- Understanding of the different techniques and treatment options for skin cancer
- Knowledge of the latest research and advances in the field of skin cancer
- Understanding the psychological and social implications of Skin Cancer for patients
- Ability to work as a team player with other health care professionals







Specific Skills

- Develop effective communication skills with patients and their families, providing clear information and emotional support throughout the treatment process
- Promote the quality of life of patients with skin cancer through adequate pain management, palliative care and comprehensive care
- Participate in education and outreach programs aimed at the community, with the goal of increasing awareness of Skin Cancer and fostering healthy practices
- Apply ethical and legal principles in the clinical practice related to Skin Cancer, while respecting the confidentiality and informed consent of patients
- Use technological tools and computer resources for the registration and management of clinical information of patients with Skin Cancer
- Participate in clinical and epidemiological research projects related to Skin Cancer, contributing to the advancement of knowledge in this field
- Recognize the importance of mental health in Skin Cancer patients and develop psychological and emotional support skills
- Evaluate and implement secondary prevention strategies for skin cancer in patients with precancerous lesions, such as actinic keratosis and nevocellular dysplasias
- Raise awareness of the socioeconomic and cultural aspects that may influence access to care and adherence to treatment in patients with skin cancer
- Promote research and development of new therapies and preventive strategies in the field of Skin Cancer, contributing to the advancement of medicine and improvement of the health of the population





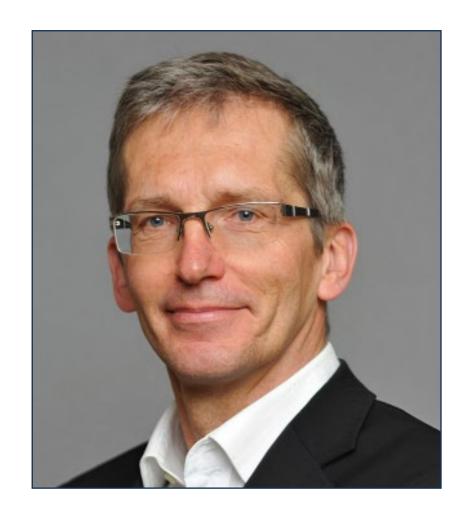
International Guest Director

Reinhard Dummer is Deputy Clinical Director of the Department of Dermatology at the University Hospital of Zurich, Switzerland. Recognized as a world leader in Cutaneous Oncology, he heads the Skin Cancer Unit and the Clinical Trials Unit in his department. With initial training in Hematology, he completed his residency in Dermatology in Würzburg, Germany, and in Switzerland. He is also board certified in Allergology, Clinical Immunology, Dermatology and Dermatopathology.

Throughout his career, Dr. Dummer has specialized in the Molecular Biology and Immunotherapy of skin tumors, including Lymphomas and Melanomas. He has published more than a thousand scientific articles, accumulating a very high impact factor in his research publications. Also, as a pioneer in Translational Medicine, he has participated in key studies on inhibitors such as Ipilimumab, and others selective of the BRAF oncogene, such as Vemurafenib. Thanks to these innovations, he and his team have achieved significant advances in the approach to skin metastasis.

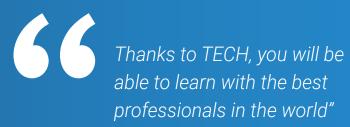
In addition, this expert has received awards such as the first Translation Prize of the German Cancer Society. The award is a recognition of Dr. Dummer's ability to rapidly apply the results of preclinical research, obtained by other specialists, in his regular clinical practice. In turn, as an advocate of Personalized Medicine, one of his working premises has been to investigate the analysis of individual genetic material to optimize therapeutic benefits and minimize side effects in patients.

On the other hand, the scientist has been president of the Melanoma Project Group of the Swiss Institute for Applied Cancer Research. He is also a member of the German National Academy of Sciences and has been a member of the Board of Directors of the International Society for Melanoma Research and President of the International Cutaneous Lymphoma Society.



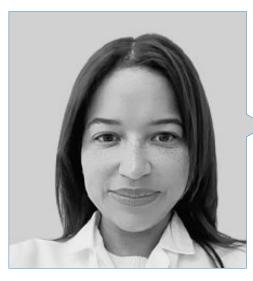
Dr. Dummer, Reinhard

- Deputy Clinical Director, Department of Dermatology, University Hospital Zurich, Switzerland
- Head of the Cutaneous Tumor Center of the University Hospital Zurich
- Professor of Dermatology, Faculty of Medicine, University of Zurich, Switzerland
- Attending Physician in Oncology at the University Hospital of the Ruprecht-Karls University Heidelberg
- Doctorate at the Medical Faculty of the Julius-Maximilians-University Würzburg, Germany
- President of the International Society for Cutaneous Lymphoma (ISCL)
- Co-founder of the Board of Directors of the European Association of Dermato-Oncology
- Member of: European Academy of Sciences, European Society for Medical Oncology
- , Steering Committee of the Society for Melanoma Research, Austrian Society of, Dermatology and Venereology, German National Academy of Sciencesm, German Cancer Society



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Management



Dr. Payano Hernández, Stephanyie

- Radiation Oncology at the Rey Juan Carlos University Hospital
- Radiation Oncology, Madrid Sanchinarro University Hospita
- Area Specialist in the Radiation Oncology Service at Genesis Care
- Faculty Physician in the Treatment Oncology Service at the Rey Juan Carlos Móstoles University Hospital
- Professor and honorary tutor of the Department of Medicine, Oncology Area at the Rey Juan Carlos University
- Professor of the Master's Degree in Arteriovenous Malformation at TECH Technological University
- Degree in Medicine from the Ibero University
- Member of SEOR, ESTRO, ILROG, ICAPEM



Dr. Samper, Pilar

- Head of the Radiation Oncology Service at the Rey Juan Carlos University Hospital
- Physician in the Radiation Oncology Fields at the 12 de Octubre University Hospita
- Area Specialist at the Gómez Ulla Central Defense Hospita
- Professor of the University Foundation San Pablo CEU del Ciclo: Senior Technician in Radiotherapy
- Associate Professor in Health Sciences. Department of Medical Specialties. Fields: Radiology and Physical Medicine at the University of Alcalá de Henares
- Professor and honorary tutor of the Department of Medicine, Oncology Area of the Rey Juan Carlos University
- Professor at the Spanish School of Radiation Oncology
- Doctorate in Medicine from the University of Alicante
- Degree in Medicine and Surgery from the University of Alicante
- Member of SEOR, GOECP, URONCOR, GEBT, GICOR, ESTRO

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Professors

Dr. Amaya Escobar, Enrique

- Physician in the Radiation Oncology Department of the Rey Juan Carlos University Hospital
- Radiation Oncologist at the Puerta de Hierro University Hospital
- Faculty Physician in the Treatment Oncology Service at the Madrid Norte Sanchinarro University Hospital
- Area Specialist at the Radiation Oncology Department Jove Hospital Foundation
- Area Specialist in the Radiation Oncology Department at the Rey Juan Carlos University Hospital
- Honorary Collaborator as a professor of Medicine at the Rey Juan Carlos University
- TER Professor Subject: Brachytherapy at the ITEP Training Center
- Coordinator Internships in Clinical Centers at ITEP Training Center
- Online Master in Thoracic Oncology at the CEU University
- Master's Degree in Clinical Management, Medical and Health Care Management at the Technological University TECH
- Degree in Medicine from the Complutense University of Madrid
- Member of: SEOR, SEOC, ESTRO, GICOR, GETTCC, URONCOR, SYROG, IRSA



Dr. Salvatierra Calderón, María Gabriela

- Head of Hematology and Hemotherapy Service at the Rey Juan Carlos University Hospital
- Assistant Physician of Hematology and Hemotherapy at the University Hospital of Getafe
- Specialist Physician of the Radiation Oncology Service of the Rey Juan Carlos University Hospital
- · Hematology and Hemotherapy Physician at La Paz University Hospital
- Visiting Physician at Seattle Cancer Care Alliance
- Specialist in Hematology and Hemotherapy, La Paz University Hospital
- Degree in Medicine and Surgery from the University of San Carlos de Guatemala

Mr. Silva Ruiz, Jorge

- Head of the Radiation Oncology Service at the Rey Juan Carlos University Hospital
- Doctor at the Jiménez Díaz Foundation
- Specialist in Oncology at the Alcorcón Hospital Foundation
- Area Specialist Physician at the University Hospital of Fuenlabrada
- Post-MIR Research Assistant at the National Cancer Research Center
- Degree in Medicine and Surgery from the Complutense University of Madrid

Dr. Payano de Morillo, Gloria Damaris

- Emergency physician at Vistahermosa Clinic, HLA group
- Physician in charge of area at Socio-sanitary Ilunion
- Physician in charge of area at the Peñas Albas Elderly Residence
- Auditor of medical accounts and concurrences in the National Health Assurance
- Expert in Vital Emergency Pathology at the Francisco de Victoria University
- Expert course in The Professional and Social Skills by the Technical Training Center S.L
- Diploma in Health Care Quality Auditing by the National Health Assurance





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Module 1. Skin Cancer

- 1.1. Advanced skin biology
 - 1.1.1. Skin Anatomy
 - 1.1.2. Functions of the Skin
 - 1.1.3. Structural characteristics of the skin
 - 1.1.4. Epidermis, Dermis, Hypodermis, Skin appendages
- 1.2. Genetics of skin cancer
 - 1.2.1. Analysis of the genetics of skin cancer
 - 1.2.2. Heredity and risk
 - 1.2.3. Genes associated with skin cancer
 - 1.2.4. Syndromes associated with Skin Cancer
 - 1.2.5. Other genes with possible susceptibility in Melanoma
- 1.3. Risk Factors
 - 1.3.1. Description of risk factors
 - 1.3.2. Skin phototypes
 - 1.3.3. Radiation exposure
 - 1.3.4. Exposure to certain chemicals
- 1.4. Prevention of skin cancer
 - 1.4.1. Evaluation of skin cancer prevention
 - 1.4.2. Photo protection
 - 143 Sunscreens
 - 1.4.4. Other Measures
- 1.5 Classification
 - 1.5.1. Non-Melanoma Skin Cancer
 - 1.5.2. Basal Cell Carcinoma
 - 1.5.3. Squamous cell carcinoma of the skin
 - 1.5.4. Melanoma
- 1.6. Clinical signs and symptoms
 - 1.6.1. Signs and symptoms of basal cell carcinoma
 - 1.6.2. Signs and symptoms of squamous cell carcinoma
 - 1.6.3. Signs and symptoms of Melanoma
 - 1.6.4. Signs and symptoms of less common types of skin cancer

- 1.7. Diagnostic tests in skin cancer
 - 1.7.1. Analysis of diagnostic tests in Skin Cancer
 - 1.7.2. Confocal reflectance microscopy
 - 1.7.3. Biopsies
 - 174 Skin ultrasound
- 1.8. Dermatoscopy
 - 1.8.1. Analysis of dermoscopy of hyperpigmented lesions
 - 1.8.2. Description of the dermoscopic parameters used in the 3-point rule and the BLINCK algorithm
 - 1.8.3. Dermatoscopic diagnostic procedure
 - 1.8.4. Three-point rule
- 1.9. Margin study method
 - 1.9.1. Lateral and deep resection margins considerations in skin tumor excision specimens
 - 1.9.2. Evaluation of the surgical margins of basal cell carcinoma
 - 1.9.3. Evaluation of Melanoma margins
- 1.10. Molecular Biology Techniques
 - 1.10.1. Evaluation of molecular biology techniques
 - 1.10.2. Molecular biology in dermatological diagnostics
 - 1.10.3. Obtaining DNA/RNA
 - 1.10.4. Nucleic acid hybridization techniques

Module 2. Melanoma

- 2.1. Molecular Targets in Melanoma
 - 2.1.1. Description of Molecular Targets in Melanoma
 - 2.1.2. Molecular targets that drive the mechanisms of invasion and metastasis: anti adhesion molecule therapy
 - 2.1.3. Therapeutic targets localized in the tumor cells themselves
 - 2.1.4. Therapeutic targets localized in structures outside the neoplastic cells
- 2.2. Biologic prognostic markers in melanoma
 - 2.2.1. Hsp90
 - 2.2.2. RGS1
 - 2.2.3. Osteopontin
 - 2.2.4. HER3

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2.3.	Classification	of Melanoma	٩
Z.J.	Glassilleation		

- 2.3.1. Melanoma of superficial extension
- 2.3.2. Nodular melanoma
- 2.3.3. Acral lentiginous melanoma
- 2.3.4. Mucosal melanoma

2.4. Molecular classification of melanoma

- 2.4.1. Molecular Analysis of melanoma
- 2.4.2. Melanomas on sun-damaged skin
- 2.4.3. Melanomas on skin without sun damage

2.5. The ABCDE of Melanoma

- 2.5.1. Asymmetries
- 2.5.2. Border
- 2.5.3. Color
- 2.5.4 Diameter
- 2.5.5. Evolution

2.6. Clinical Stages of Melanoma

- 2.6.1. Melanoma staging system
- 2.6.2. Stage 0 Melanoma (Melanoma in situ)
- 2.6.3. Clinical Stage I and II
- 2.6.4. Clinical Stage III Clinical Stage IV

2.7. Sentinel lymph node in Melanoma

- 2.7.1. Sentinel lymph node assessment in Melanoma
- 2.7.2. Lymphatic mapping
- 2.7.3. Biopsy of Sentinel Lymph Node

2.8. Surgical Treatment of Melanoma

- 2.8.1. Extensive local excision
- 2.8.2. Mohs Surgery
- 2.8.3. Lymphadenectomy

2.9. Melanoma Reconstruction

- 2.9.1. Skin graft
- 2.9.2. Local flap
- 2.9.3. Free flap

2.10. Adjuvant Treatment of Melanoma

- 2.10.1. Chemotherapy
- 2.10.2. Radiotherapy
- 2.10.3. Immunotherapy
- 2.10.4. Targeted therapy

Module 3. Basal Cell Carcinoma

3.1. Basal Cell Carcinoma Analysis

- 3.1.1. Basal Cell Carcinoma Assessments
- 3.1.2. Basal Cell Carcinoma Epidemiology
- 3.1.3. Risk factors in Basal Cell Carcinoma
- 3.1.4. Basal Cell Carcinoma Pathogenesis

3.2. Clinical variants

- 3.2.1. Nodular
- 3.2.2. Morpheiform
- 3.2.3. Superficial
- 3.2.4. Fibroepithelioma

3.3. Diagnosis

- 3.3.1. Clinical Symptoms
- 3.3.2. Dermatoscopy
- 3.3.3. Optical Coherence Tomography
- 3.3.4. Confocal reflectance microscopy

3.4. Clinical stages

- 3.4.1. Staging systemClinical Status
- 3.4.2. Stage 0
- 3.4.3. Clinical Stage I and II
- 3.4.4. Clinical Stage III Clinical Stage IV

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- 3.5. Sentinel lymph node
 - 3.5.1. Sentinel node analysis
 - 3.5.2. Lymphatic mapping
 - 3.5.3. Biopsy of Sentinel Lymph Node
- 3.6. Surgical Management
 - 3.6.1. Extensive local excision
 - 3.6.2. Mohs Surgery
 - 3.6.3. Lymphadenectomy
- 3.7. Reconstruction
 - 3.7.1. Skin graft
 - 3.7.2. Local flap
 - 3.7.3. Free flap
- 3.8. Adjuvant Treatment
 - 3.8.1. Chemotherapy
 - 3.8.2. Radiotherapy
 - 3.8.3. Photodynamic therapy (PDT)
 - 3.8.4. Hedgehog pathway inhibitors
- 3.9. Prognosis
 - 3.9.1. Stage 0
 - 3.9.2. Clinical Stage I and II
 - 3.9.3. Clinical Stage III
 - 3.9.4. Clinical Stage IV
- 3.10. Follow-up and recommendations
 - 3.10.1. Initial stage: First year
 - 3.10.2. Follow up: Second year
 - 3.10.3. Long term
 - 3.10.4. Recommendations

Module 4. Merkel Cells Carcinoma

- 4.1. Analysis of Merkel cell carcinoma
 - 4.1.1. Evaluation of Merkel cell carcinoma
 - 4.1.2. Evolution of Merkel Cell Carcinoma
 - 4.1.3. Epidemiology of Merkel cell carcinoma
 - 4.1.4. Etiopathogenesis and population at risk for Merkel cell carcinoma
- 4.2. Diagnosis
 - 4.2.1. Clinical Symptoms
 - 4.2.2. Evolution
 - 4.2.3. Immunohistochemistry
 - 4.2.4. Cytogenetic and molecular study
- 4.3. CT and Biopsy
 - 4.3.1. CAT
 - 4.3.2. PET-CAT
 - 4.3.3. Large needle biopsy
 - 4.3.4. Fine needle aspiration biopsy
- 4.4. Staging
 - 4.4.1. Stage IA
 - 4.4.2. Stage IB
 - 4.4.3. Stage II
 - 4.4.4. Stage III
- 4.5. Sentinel lymph node
 - 4.5.1. Sentinel node analysis
 - 4.5.2. Lymphatic mapping
 - 4.5.3. Biopsy of Sentinel Lymph Node
- 4.6. Surgical Management
 - 4.6.1. Extensive local excision
 - 4.6.2. Mohs Surgery
 - 4.6.3. Lymphadenectomy

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- 4.7. Reconstruction
 - 4.7.1. Skin graft
 - 4.7.2. Local flap
 - 4.7.3. Free flap
- 4.8. Adjuvant Treatment
 - 4.8.1. Chemotherapy
 - 4.8.2. Radiotherapy
 - 4.8.3. Immunotherapy
 - 4.8.4. Targeted therapy
- 4.9. Follow-up and recommendations
 - 4.9.1. Initial stage: First year
 - 4.9.2. Follow up: Second year
 - 4.9.3. Long term
 - 4.9.4. Recommendations
- 4.10. AEDV Clinical Practice Guideline on Merkel Cell Carcinoma
 - 4.10.1. Analysis of the guideline
 - 4.10.2. Evaluation of the guideline
 - 4.10.3. Use of the guide
 - 4.10.4. Method used to prepare the document

Module 5. Squamous cell carcinoma

- 5.1. Analysis of squamous cell carcinoma
 - 5.1.1. Evaluation of Epidermoid Carcinoma
 - 5.1.2. Epidemiology of carcinoma epidermoidis
 - 5.1.3. Risk factors for squamous cell carcinoma
 - 5.1.4. Pathogenesis of Squamous Cell Carcinoma
- 5.2. Clinical variants
 - 5.2.1. Acantholytic Squamous Carcinoma
 - 5.2.2. Spindle cell squamous carcinomas
 - 5.2.3. Verrucous squamous carcinoma
 - 5.2.4. Squamous clear cell carcinoma

- 5.3. Diagnosis
 - 5.3.1. Clinical Symptoms
 - 5.3.2. Dermatoscopy
 - 5.3.3. Optical Coherence Tomography
 - 5.3.4. Confocal reflectance microscopy
- 5.4. Prognostic factors in high-risk cutaneous squamous cell carcinoma
 - 5.4.1. Size
 - 5.4.2. Depth
 - 5.4.3. Perineural invasion
 - 5.4.4. Lymphovascular invasion
- 5.5. Other prognostic factors
 - 5.5.1. Histological type
 - 5.5.2. Immunosuppression
 - 5.5.3. VPH Infection
 - 5.5.4. High risk areas and drainage areas
- 5.6. Clinical stages
 - 5.6.1. Staging system Clinical Status
 - 5.6.2. Stage 0
 - 5.6.3. Clinical Stage I and II
 - 5.6.4. Clinical Stage III Clinical Stage IV
- 5.7. Sentinel lymph node
 - 5.7.1. Sentinel node analysis
 - 5.7.2. Lymphatic mapping
 - 5.7.3. Biopsy of Sentinel Lymph Node
- 5.8. Surgical Management
 - 5.8.1. Extensive local excision
 - 5.8.2. Mohs Surgery
 - 5.8.3. Lymphadenectomy

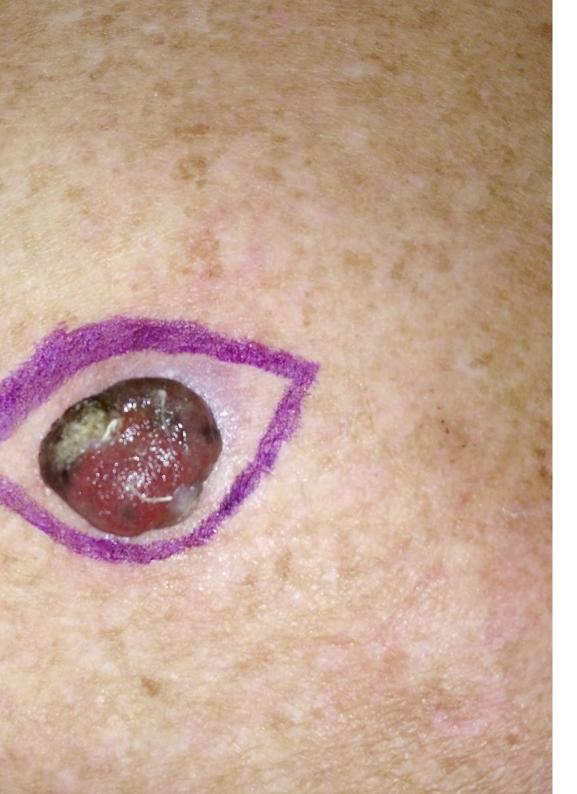
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- 5.9. Adjuvant Treatment
 - 5.9.1. Chemotherapy
 - 5.9.2. Radiotherapy
 - 5.9.3. Photodynamic therapy (PDT)
- 5.10. Follow-up and recommendations
 - 5.10.1. Initial stage: First year
 - 5.10.2. Follow up: Second year
 - 5.10.3. Long term
 - 5.10.4. Recommendations

Module 6. Other Skin Neoplasms

- 6.1. Evaluation of other Skin Neoplasms
 - 6.1.1. Classification of other Skin Neoplasms
 - 6.1.2. Staging of other Skin Neoplasms
 - 6.1.3. Diagnosis of other Skin Neoplasms
- 6.2. Oral cavity squamous cell carcinoma
 - 6.2.1. Analysis of squamous cell carcinoma of the oral cavity
 - 6.2.2. Histopathology of oral cavity squamous cell carcinoma
 - 6.2.3. Diagnosis of oral cavity squamous cell carcinoma
 - 6.2.4. Treatment of squamous cell carcinoma of the oral cavity
- 6.3. Penile squamous cell carcinoma
 - 6.3.1. Evaluation of penile squamous cell carcinoma
 - 5.3.2. Histopathology of penile squamous cell carcinoma
 - 6.3.3. Diagnosis of penile squamous cell carcinoma
 - 6.3.4. Treatment of penile squamous cell carcinoma
- 6.4. Anal squamous carcinoma
 - 6.4.1. Analysis of anal squamous cell carcinoma
 - 6.4.2. Histopathology of anal squamous cell carcinoma
 - 6.4.3. Diagnosis of anal squamous cell carcinoma
 - 6.4.4. Treatment of anal squamous cell carcinoma





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	6.5.	Kapo	si's	Sarcor	na
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- 6.5.1. Evaluation of Kaposi's sarcoma
- 6.5.2. Histopathology of Kaposi's Sarcoma
- 6.5.3. Diagnosis of Kaposi's sarcoma
- 6.5.4. Treatment of Kaposi's sarcoma
- 6.6. Leukoplakia
 - 6.6.1. Analysis of Leukoplakia
 - 6.6.2. Histopathology of Leukoplakia
 - 6.6.3. Diagnosis of Leukoplakia
 - 6.6.4. Treatment of leukoplakia
- 6.7. Keratoacanthomas
 - 6.7.1. Evaluation of Keratoacanthomas

Histopathology of keratoacanthomas

- 6.7.3. Diagnosis of Keratoacanthomas
- 6.7.4. Treatment of keratoacanthomas
- 6.8. Invasive Paget's Disease
 - 6.8.1. Analysis of extramammary Paget's disease
 - 6.8.2. Histopathology of extramammary Paget's disease
 - 6.8.3. Diagnosis of extramammary Paget disease
 - 6.8.4. Treatment of extramammary Paget disease
- 6.9. Malignant subcutaneous or soft-tissue tumors (sarcomas)
 - 6.9.1. Dermatofibrosarcoma
 - 6.9.2. Leiomyosarcomas
 - 6.9.3. Rhabdomyosarcoma
 - 6.9.4. Liposarcomas
- 6.10. Epidermal lesions
 - 6.10.1. Actinic Keratosis
 - 6.10.2. Bowen's Disease
 - 6.10.3. Spitzoid lesions

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Module 7. Skin Cancer Treatments

- 7.1. Curettage and electrodesiccation
 - 7.1.1. Analysis of curettage and electrodesiccation
 - 7.1.2. Types of cancer using curettage and electrodesic cation
 - 7.1.3. Uses of curettage and electrodesiccation to treat cancer
 - 7.1.4. Benefits of curettage and electrodesiccation
- 7.2. Curettage and electrocoagulation
 - 7.2.1. Analysis of curettage and electrocoagulation
 - 7.2.2. Types of cancer where curettage and electrocoagulation are used
 - 7.2.3. Uses of curettage and electrocoagulation to treat cancer
 - 7.2.4. Benefits of curettage and electrocoagulation
- 7.3. Cryotherapy Skin cancer
 - 7.3.1. Analysis of cryotherapy
 - 7.3.2. Types of cancer where cryotherapy is used
 - 7.3.3. Use of cryotherapy to treat cancer
 - 7.3.4. Benefits of cryotherapy
- 7.4. Wide excision
 - 7.4.1. Analysis of wide excision
 - 7.4.2. Types of Cancer where wide excision is used
 - 7.4.3. Use of wide excision to treat Cancer
 - 7.4.4. Benefits of wide excision
- 7.5. Mohs micrographic surgery
 - 7.5.1. Evaluation of Mohs micrographic surgery
 - 7.5.2. Indications for Mohs surgery
 - 7.5.3. Variants of the technique
 - 7.5.4. Mohs fixed in kerosene: «slow-Mohs»

- 7.6. Biopsy of Sentinel Lymph Node
 - 7.6.1. Sentinel lymph node biopsy analysis
 - 7.6.2. Mechanism of lymphatic metastasis
 - 7.6.3. Sentinel lymph node technique
 - 7.6.4. Detection
- 7.7. Reconstructive Surgery
 - 7.7.1. Evaluation of reconstructive surgery
 - 7.7.2. Mechanism of reconstructive surgery
 - 7.7.3. Reconstructive surgery technique
 - 7.7.4. Benefits of reconstructive surgery
- 7.8. Photodynamic Therapy
 - 7.8.1. Evaluation of photodynamic therapy
 - 7.8.2. Types of cancer where photodynamic therapy is used
 - 7.8.3. How Photodynamic Therapy is used to treat Cancer
 - 7.8.4. Benefits of Photodynamic Therapy
- 7.9. Topical treatments in cancer
 - 7.9.1. 5-Fluorouracil (5-FU)
 - 7.9.2. Diclofenac (Solaraze)
 - 7.9.3. Ingenol mebutate (Picato)
 - 7.9.4. Imiquimod (Zyclara)
- 7.10. Lymphadenectomy
 - 7.10.1. What is Lymphadenectomy
 - 7.10.2. Indications
 - 7.10.3. Benefits of Lymphadenectomy
 - 7.10.4. Disadvantages of Lymphadenectomy

Module 8. Cutaneous Lymphomas

- 8.1. Skin Lymphoma Analysis
 - 8.1.1. Skin Lymphoma Evaluation
 - 8.1.2. Classification of skin lymphomas
 - 8.1.3. Diagnosis of skin lymphomas
 - 8.1.4. Treatment of skin lymphomas
- 8.2. Lymphomatoid Papulosis
 - 8.2.1. Clinic in lymphomatoid papulosis
 - 8.2.2. Histopathology in lymphomatoid papulosis
 - 8.2.3. Staging in lymphomatoid papulosis
 - 8.2.4. Treatment in Lymphomatoid Papulosis
- 8.3. Mycosis Fungoides
 - 8.3.1. Clinic in mycosis fungoides
 - 8.3.2. Histopathology in mycosis fungoides
 - 8.3.3. Staging in mycosis fungoides
 - 8.3.4. Treatment in mycosis fungoides
- 8.4. Sezary syndrome
 - 8.4.1. Clinic in Sezary Syndrome
 - 8.4.2. Histopathology in Sezary Syndrome
 - 8.4.3. Staging in Sezary Syndrome
 - 8.4.4. Treatment in Sezary Syndrome
- 8.5. Adult T leukemia
 - 8.5.1 Clinical features in adult T leukemia
 - 8.5.2. Histopathology in Adult T Leukemia
 - 8.5.3. Staging in Adult T Leukemia
 - 8.5.4. Treatment in Adult T Leukemia
- 8.6. Adult T-cell lymphoma
 - 8.6.1. Clinical features of adult T-cell lymphoma
 - 8.6.2. Histopathology in Adult T-cell lymphoma
 - 8.6.3. Staging in Adult T-cell lymphoma
 - 8.6.4. Treatment features of adult T-cell lymphoma

- 8.7. Anaplastic cutaneous large cell anaplastic lymphoma cd30+
 - 8.7.1. Clinical features in anaplastic cutaneous large cell lymphoma cd30+
 - 8.7.2. Histopathology in Anaplastic cutaneous large cell anaplastic lymphoma cd30+
 - 8.7.3. Staging in Anaplastic cutaneous large cell anaplastic lymphoma cd30+
 - 8.7.4. Treatment features in anaplastic cutaneous large cell lymphoma cd30+
- 8.8. Cutaneous primitive B lymphomas
 - 8.8.1. Clinical features of cutaneous primitive B lymphomas
 - 8.8.2. Histopathology in cutaneous primitive B-lymphomas
 - 8.8.3. Staging in Cutaneous primitive B lymphomas
 - 8.8.4. Treatment features of cutaneous primitive B lymphomas
- 8.9. Primary cutaneous lymphomas in childhood
 - 8.9.1. Clinical features of primary cutaneous lymphomas in childhood
 - 8.9.2. Histopathology in primary cutaneous lymphomas in infancy
 - 8.9.3. Staging in primary cutaneous lymphomas in childhood
 - 8.9.4. Treatment in primary cutaneous lymphomas in childhood
- 8.10. Follow-up and recommendations
 - 8.10.1. Initial stage: First year
 - 8.10.2. Follow up: Second year
 - 8.10.3. In the Long Term
 - 8.10.4. Recommendations

Module 9. Genodermatoses Predisposing to Skin Cancer

- 9.1. Neurofibromatosis
 - 9.1.1. Analysis of Neurofibromatosis
 - 9.1.2. Clinical features of neurofibromatosis
 - 9.1.3. Histopathology features of neurofibromatosis
 - 9.1.4. Treatment in neurofibromatosis
- 9.2. Tuberous Sclerosis
 - 9.2.1. Tuberous Sclerosis Evaluation
 - 9.2.2. Clinical manifestations of Tuberous Sclerosis
 - 9.2.3. Histopathology manifestations of Tuberous Sclerosis
 - 9.2.4. Treatment in tuberous sclerosis

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9.8.4. Treatment in Gardner syndrome

9.3.	Elastic	Pseudoxanthoma			
	9.3.1.	Analysis of the elastic pseudoxanthoma			
	9.3.2.	Clinical features in elastic Pseudoxanthoma			
	9.3.3.	Histopathology features in elastic Pseudoxanthoma			
	9.3.4.	Treatment in elastic pseudoxanthoma			
9.4.	Ehlers-Danlos Syndrome				
	9.4.1.	Evaluation of Ehlers-Danols syndrome			
	9.4.2.	Clinical features of Ehlers-Danols syndrome			
	9.4.3.	Histopathology in Ehlers-Danols syndrome			
	9.4.4.	Treatment in Ehlers-Danols syndrome			
9.5.	Muir-To	Muir-Torre syndrome			
	9.5.1.	Analysis of the Muir-Torre Syndrome			
	9.5.2.	Muir-Torre Syndrome Clinic			
	9.5.3.	Histopathology in Muir-Torre Syndrome			
	9.5.4.	Treatment in Muir-Torre Syndrome			
9.6.	Gorlin	or nevoid basal cell carcinoma syndrome			
	9.6.1.	Evaluation of Gorlin's syndrome or nevoid basal cell carcinoma			
	9.6.2.	Clinical features of Gorlin's syndrome or nevoid basal cell carcinoma			
	9.6.3.	Histopathology features of Gorlin's syndrome or nevoid basal cell carcinoma			
	9.6.4.	Treatment in Gorlin's Syndrome or nevoid basal cell carcinoma			
9.7.	Cowden's syndrome (multiple hamartomas)				
	9.7.1.	Analysis of Cowden syndrome (multiple Hamartomas)			
	9.7.2.	Clinic in Cowden syndrome (multiple Hamartomas)			
	9.7.3.	Histopathology in Cowden's syndrome (multiple Hamartomas)			
	9.7.4.	Treatment in Cowden's syndrome (multiple Hamartomas)			
9.8.	Gardner syndrome				
	9.8.1.	Evaluation of Gardner's Syndrome			
	9.8.2.	Clinical features of Gardner's syndrome			
	983	Histonathology in Gardner's Syndrome			

- 9.9. Pigmentovascular phakomatosis associated with hypochromic nevus
 - 9.9.1. Evaluation of pigmentovascular phakomatosis associated with hypochromic nevus
 - 9.9.2. Clinical features of Pigmentovascular phakomatosis associated with hypochromic nevus
 - 9.9.3. Histopathology features of Pigmentovascular phakomatosis associated with hypochromic nevus
 - 9.9.4. Treatment features of Pigmentovascular phakomatosis associated with hypochromic nevus
- 9.10. Congenital pachyonychia in multiple family members
 - 9.10.1. Analysis of Pachyonychia congenita
 - 9.10.2. Clinical features of pachyonychia congenita
 - 9.10.3. Histopathology in Pachyonychia congenita
 - 9.10.4. Treatment in Pachyonychia congenita

Module 10. Dermatologic Pathology in the Oncology Patient

- 10.1. Evaluation of dermatologic pathology in the oncology patient
 - 10.1.1. Pathology analysis
 - 10.1.2. Evolution of the pathology
 - 10.1.3. Epidemiology of the pathology
 - 10.1.4. Etiopathogenesis of the pathology
- 10.2. Diagnosis
 - 10.2.1. Clinical Symptoms
 - 10.2.2. Histology
 - 10.2.3. Immunohistochemistry
 - 10.2.4. Diagnosis
- 10.3. Skin lesions induced by conventional antineoplastic QT
 - 10.3.1. Erythema toxicum of QT
 - 10.3.2. Localized Epidermal Necrolysis
 - 10.3.3. Epidermal cytotoxicity syndrome Acral erythema/ Foot-hand syndrome
 - 10.3.4. Reactivation ("recall") reactions

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- 10.4. Paraneoplastic dermatomyositis
 - 10.4.1. Paraneoplastic dermatomyositis analysis
 - 10.4.2. Paraneoplastic dermatomyositis Clinical Symptoms
 - 10.4.3. Paraneoplastic dermatomyositis Histopathology
 - 10.4.4. Paraneoplastic dermatomyositis Treatment
- 10.5. Paraneoplastic neutrophilic dermatoses
 - 10.5.1. Evaluation of paraneoplastic neutrophilic dermatoses
 - 10.5.2. Clinical signs of paraneoplastic neutrophilic dermatosis
 - 10.5.3. Histopathology of paraneoplastic neutrophilic dermatoses
 - 10.5.4. Treatment of paraneoplastic neutrophilic dermatoses
- 10.6. Graft-versus-host disease
 - 10.6.1. Analysis of graft-versus-host disease
 - 10.6.2. Clinical Symptoms of Graft-Versus-Host Disease (GVHD)
 - 10.6.3. Histopathology of Graft-Versus-Host Disease (GVHD)
 - 10.6.4. Treatment of graft-versus-host disease
- 10.7. Paraneoplastic pemphigus
 - 10.7.1. Evaluation of paraneoplastic pemphigus
 - 10.7.2. Clinical manifestations of paraneoplastic pemphigus
 - 10.7.3. Histopathology of paraneoplastic pemphigus
 - 10.7.4. Treatment of paraneoplastic pemphigus
- 10.8. Skin infections of dermatological interest in oncology patients
 - 10.8.1. Analysis of skin infections
 - 10.8.2. Clinic of skin infections
 - 10.8.3. Histopathology of skin infections
 - 10.8.4. Treatment of skin infections

- 10.9. Cutaneous metastases of systemic neoplasms
 - 10.9.1. Analysis of metastasis of systemic neoplasms
 - 10.9.2. Clinical Symptoms of metastasis of systemic neoplasms
 - 10.9.3. Histopathology of metastasis of systemic neoplasms
 - 10.9.4. Treatment of metastasis of systemic neoplasms
- 10.10. Cutaneous Manifestations of Malignant Neoplasms
 - 10.10.1. Evolution of Cutaneous Manifestations of Malignant Neoplasms
 - 10.10.2. Clinical Manifestations of Cutaneous Manifestations of Malignant Neoplasms
 - 10.10.3. Histopathology of Cutaneous Manifestations of Malignant Neoplasms
 - 10.10.4. Treatment of Cutaneous Manifestations of Malignant Neoplasms



You will have at your disposal videos of real case studies and multiple multimedia resources with which you will be able to develop strategies for the differential diagnosis of various pathologies"



tech 40 | Methodology

At TECH we use the Case Method

What should a professional do in a given situation? Throughout the program, students will face multiple simulated clinical cases, based on real patients, in which they will have to do research, establish hypotheses, and ultimately resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

With TECH you will experience a way of learning that is shaking the foundations of traditional universities around the world.



According to Dr. Gérvas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, trying to recreate the real conditions in the physician's professional practice.



Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method"

The effectiveness of the method is justified by four fundamental achievements:

- Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that evaluate real situations and the application of knowledge.
- 2. Learning is solidly translated into practical skills that allow the student to better integrate into the real world.
- 3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
- 4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.





Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

This university is the first in the world to combine the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, a real revolution with respect to the mere study and analysis of cases.

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



Methodology | 43 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 44 | 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

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.

and direct way to achieve the highest degree of understanding.

Classes



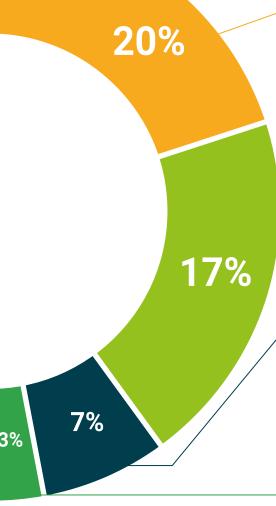
There is scientific evidence on the usefulness of learning by observing experts.

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 48 | Certificate

This private qualification will allow you to obtain a **Master's Degree in Skin Cancer** endorsed by **TECH Global University**, the world's largest online university.

TECH Global University is an official European University publicly recognized by the Government of Andorra (*official bulletin*). Andorra is part of the European Higher Education Area (EHEA) since 2003. The EHEA is an initiative promoted by the European Union that aims to organize the international training framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of collaborative tools and strengthening its quality assurance mechanisms to enhance collaboration and mobility among students, researchers and academics.

This **TECH Global University** private qualification is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: Master's Degree in Skin Cancer

Modality: online

Duration: 12 months

Accreditation: 60 ECTS





^{*}Apostille Convention. In the event that the student wishes to have their paper diploma issued with an apostille, TECH Global University will make the necessary arrangements to obtain it, at an additional cost.

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



Master's Degree

Skin Cancer

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

