Master's Degree
Puerperium for Midwives

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Master's Degree
Puerperium for Midwives

- Modality: **online**
- Duration: **12 months**
- Certificate: **TECH Global University**
- Credits: **60 ECTS**
- Schedule: **at your own pace**
- Exams: **online**

Website: **www.techtitute.com/us/nursing/master-degree/master-puerperium-midwives**

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01

Introduction

The puerperium is a complex time in a woman's life and the midwife is the right professional to deal with it. This Master's Degree in Puerperium for Midwives aims to train the professional through a complete, global and practical learning in reference to one of the stages of sexual and reproductive life of women.

The care of the woman after childbirth must be carried out with extreme care, due to the pathologies that can arise in the Puerperium for Midwives"

After childbirth, women need a period of time to recover their usual conditions, both hormonal and of the female reproductive system. During this period of puerperium, complications may arise in women's health, so it is important that professionals working in the field of gynecology specialize in this area.

The up to date contents of this Master's Degree and its integrative approach will give rise to a complete vision of all aspects related to the Puerperium. The contents will provide a journey through the various needs of the woman and the newborn during the Puerperium, both in physiological situations and in those that deviate from normality.

Both the design of the program and the didactic material used will facilitate the understanding of concepts, and the realization of practical cases will help to adapt what has been learned to clinical practice. In this way, the Master's Degree will provide immersive learning in order to train professionals in real situations of their daily professional practice.

This **Master's Degree in Puerperium for Nursing** contains the most complete and up to date scientific program on the market. The most important features of the program include:

- The development of case studies presented by Puerperium experts
- 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
- News about the puerperium period
- Practical exercises where the self assessment process can be carried out to improve learning
- Special emphasis on innovative methodologies in the Puerperium
- 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

Don't miss this opportunity to study in the largest private online university"

This Master's Degree is the best investment you can make in the selection of a refresher program for two reasons: in addition to updating your knowledge in Childbirth for Midwives, you will obtain a degree from TECH Global University"

This training comes with the best didactic material, providing you with a contextual approach that will facilitate your learning.

This 100% online master's degree will allow you to combine your studies with your professional work while increasing your knowledge in this field.

It includes in its teaching staff professionals belonging to the field of Puerperium for Midwives, who pour into this training the experience of their work, in addition to recognized specialists from reference 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 specialist must try to solve the different professional practice situations that arise during the Master's Degree. For this, the professional will have the help of an innovative system of interactive videos made by recognized experts, with great experience in Puerperium for Midwives.

02

Objectives

The Master's Degree in Puerperium for Midwives is oriented to train midwives in their daily work during the care of women in the puerperium period.

This is the best option to learn about the latest advances in Puerperium for Midwives"

General Objectives

- Update and expand the midwife's knowledge in the field of postpartum care in the hospital, in the health center and at home
- Obtain an integrated vision of the care required by women and their children during the Puerperium
- Understand the puerperium phase from a global and biopsychosocial point of view
- Facilitate the performance of the midwife dedicated to the care of the woman and the newborn in the postpartum phase
- Help provide quality postpartum care based on scientific evidence
- Contribute to the midwife's decision making in situations that deviate from normality
- Have the tools to achieve a multidisciplinary management in the puerperium
- Acquire the professional competencies necessary to offer a quality and updated healthcare practice
- Apply the knowledge obtained to solve problems that may arise in health care practice

Specific Objectives

Module 1. Physiological Puerperium

- Broaden the knowledge about the changes of the puerperium in its different stages in the context of physiology
- Recognize deviations from normality in the development of the puerperium in order to be able to identify pathological situations
- Improve capacity in the application of midwifery care to women and newborns in the immediate Puerperium in the delivery room
- Improve capacity in the application of midwifery care to women and newborns in the puerperium hospitalization ward
- Improve capacity in the application of midwifery care to women and newborns in the midwifery practice in primary care
- Comprehensive knowledge of newborn screening procedures
- Train midwives in the care of women and newborns during the home Puerperium

Module 2. Risk Situations in the Puerperium

- Increase knowledge about the complications that may arise during the different stages of the puerperium
- Specific management of women's pathology in the Puerperium
- Improve the midwife's ability to act in the early management of the main complications that may appear during the puerperium
- Improve the midwife's ability to apply care in each of the pathologies in the puerperium from the hospital care setting and in the primary care office
- Know and manage perineal trauma caused by vaginal delivery
- Demonstrate competency in the application of midwifery care in perineal trauma

Module 3. Pelvic Floor

- Know in depth the different structures that form the pelvic floor
- Identify perineal trauma as a result of childbirth
- Update on the care required for perineal injuries
- Recognize and initiate early management of pathologies
- Identify situations that require referral to other professionals
- Update knowledge regarding short- and long-term complications of perineal trauma
- Know the current context in Spain in reference to female genital mutilation
- Know the types of female genital mutilation
- Identify those women who have been victims of genital mutilation
- Improve the midwife's response to a situation of female genital mutilation in the hospital or in the doctor's office

Module 4. Breastfeeding

- Identify the importance of breastfeeding
- Expand knowledge of breast anatomy, breast milk formation and its properties
- Identify those situations in which breastfeeding is contraindicated in order to avoid risk situations for the neonate
- Assess the normality patterns of a correct intake
- Enable midwives to provide simple, effective and evidence-based health education to mothers who wish to breastfeed
- Understand the relationship between bonding and the establishment of breastfeeding
- Update knowledge of the different techniques for expressing breast milk and the proper guidelines for safe storage of expressed milk
- Have a broad understanding of the objectives and strategies of the IHAN within the National Health System

Module 5. Newborn

- Improve knowledge related to the different classifications of the neonate based on the different established parameters
- Deepen the knowledge about the adaptation of the different devices and systems of the newborn in its extrauterine life
- Improve management related to the general examination criteria of the healthy newborn and identify abnormal situations
- Know and manage the care required by the newborn in different areas
- Designing sessions for parents on how to care for their newborns
- Improve the management of the main reasons for parental consultation in the midwife's office on newborn problems
- Update the aspects related to the prevention of sudden infant death of sudden infant death

Module 6. Special Situations

- Know in depth the characteristics and care needed by premature babies
- Know in depth the characteristics and care require by premature babies
- Improve knowledge about the characteristics and care required by infants born with low birth weight or RIC
- Identify potential short- and long-term complications of premature, postmature, low birth weight and RIC infants
- Improve the management of the care needs of neonates with hypoxic-ischemic encephalopathy
- Identify situations at risk for EHI in order to prevent it and provide early and effective care at birth
- Know the care required by infants with perinatal infection
- Know the specific needs in the care of newborns of mothers who have used drugs during pregnancy and or childbirth
- Learn techniques to provide the right breastfeeding support for premature infants to premature infants
- Identify and know the most frequent problems that appear in the breastfeeding program
- Update the treatment of breastfeeding related problems
- Know the evidence based protocols recommended for breastfeeding problems

Module 7. Psychological and Emotional Aspects in the Puerperium

- Know the neurobiological processes of the puérpera
- Understand the relationship between the hormonal system of the pregnant woman and the establishment of the bond
- Know the psychic changes of the puerperium
- Identify risk factors for bond disruption
- Know the recommendations of good practices in a situation of perinatal loss
- Identify the phases of grief and its correct management
- Identify the different types of perinatal loss
- Identify the differences between depression and perinatal bereavement
- Learn how to handle the different scales for the assessment of perinatal bereavement

Module 8. Sexuality and Contraception in the Puerperium

- Increase knowledge of the physiology of the female reproductive system
- Increase knowledge about the female genital cycle and the hormonal influence on it
- Know in depth the sexual response cycle and its different stages
- Recognize the physical, physiological and psychological changes of the pregnant woman that may influence her sexual health

- Learn how to use tools to promote sexual health in the Puerperium
- Recognize and identify the most frequent sexual problems during the puerperium
- Increase knowledge regarding sexual dysfunctions of female desire, arousal and orgasm
- Know and identify anorgasmia, its causes and treatment
- Identify and differentiate vaginismus and dyspareunia
- Improve the management and treatment of vaginismus and dyspareunia from the midwife's office
- Improve knowledge of the different types of contraception that can be used in the Puerperium

Module 9. Parentality

- Know the concept of "Positive Parenting" and its legal and institutional framework
- Know the necessary criteria essential for positive parenting
- Identify the different types of family
- Learn how to use the tools for identifying family needs
- Identify the different parental educational styles
- Understand the strategies necessary for coeducation
- Delve into the design of workshops to promote coeducation
- Improve knowledge of the tools necessary for the correct resolution of intra-family conflicts
- Identify and promote the elements necessary for the correct establishment of attachment
- Identify the types of attachment
- Expand knowledge of assessment and diagnostic tools for bonding disorders
- Deepen in the different types of psychological mistreatment and its risk factors

Module 10. Management and Legislation

- Increase knowledge about the rights and duties of the newborn and the newborn in the area of health
- Broaden knowledge of the ethical principles that should govern the midwife's healthcare practice
- Deepen the patient's right to autonomy
- Improve knowledge of the professional's responsibility in the context of health care
- Identify methods for evaluating the quality of care in healthcare practice
- Improve knowledge of the concept of health programs and their objectives when applying them in healthcare practice
- Optimize resources when planning the activities that will be part of the health program
- Learn to distinguish Clinical Practice Guidelines, care maps and clinical pathways
- Delve into in the concept and stages of health planning
- Deepen the knowledge on the organization of obstetric care in the Puerperium from the different levels of care

03

Skills

After passing the evaluations of the Master's Degree in Puerperium for Midwives, the professional will have acquired the necessary professional skills for a quality and up to date practice based on the most innovative didactic methodology.

This program will help you acquire the skills you need to excel in providing quality patient care"

General Skills

- Perform the care required by women and their children during the Puerperium
- Offer quality postpartum care based on scientific evidence
- Make decisions in situations that deviate from normality in this area
- Offer a quality and updated healthcare practice
- Solve problems that may arise in the care practice

Specific Skills

- Act at the different levels of postpartum care
- Know the criteria to be met for early discharge, as well as to manage the evolution of the process in the mother's home
- Assess the woman upon discharge from the hospital
- Early detection of puerperal complications, both physical and mental
- Recognizing the anatomy of the female perineum
- Management of perineal trauma in the pregnant woman
- Know the anatomy and physiology of the breast, the formation of breast milk and its composition
- Recognize all the characteristics of the healthy newborn, as well as all the physiological changes and adaptations that occur in the first hours and days after birth
- Provide adequate health education to women, families and the community, identifying learning needs in relation to maternal and child health
- Recognize the pathology of the neonate
- Resolving women's doubts and advice on parenting
- Understanding brain changes during pregnancy and postpartum to provide a complete and comprehensive approach to the patient
- Analyze perinatal loss and grief from a bonding perspective
- Working with couples in a mindful, effective, caring and evidence based manner
- Conduct an active search in the consultation addressing sexual health and sexuality during pregnancy and postpartum to provide women with comprehensive and quality care
- Evaluate from the prenatal period the resources and adaptation to new family roles, as well as the effectiveness of their conflict resolution strategies
- Recognize the legal issues that we face daily in the practice of health care
- Know the rights and duties of patients, as well as to be informed of aspects related to the user's health rights, in order to be prudent and respectful in practice

04

Course Management

The program includes in its teaching staff reference experts in Puerperium, who bring to this training the experience of their work. Additionally, other recognized specialists participate in its design and preparation which means that the program is developed in an interdisciplinary manner.

We have an excellent team of professionals who have come together to teach you the latest advances in Puerperium for Midwives"

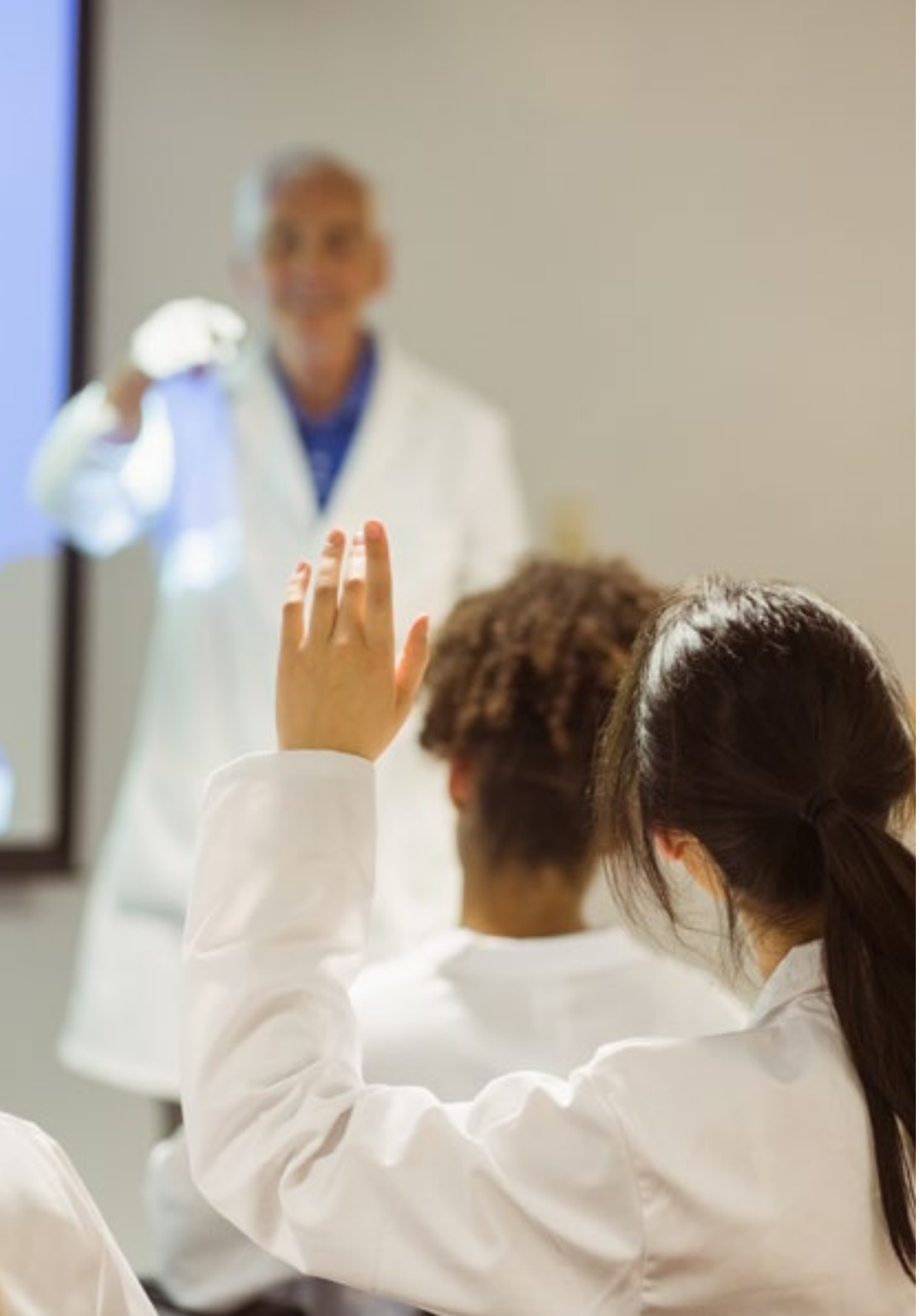
Management

Ms. Grolimund Sánchez, Verónica

- Midwife at HGU Doctor Gregorio Marañón, Madrid Specialized in high-risk pregnancy and childbirth
- Diploma in Nursing from the Autonomous University of Madrid Red Cross School of Nursing
- Nurse Specialist in Obstetrics and Gynecology
- Professor in the Obstetrics and Gynecology Nursing Teaching Unit at HGU Gregorio Marañón since 2013
- Teaching collaborator at HGU Gregorio Marañón, tutoring and supervising EIR rotations in Family and Community Care
- Lecturer in the Practical Course on Obstetric Emergencies Obstetric Hemorrhage
- Nurse in special services such as emergency, URPA, ICU and neonatal ICU

Ms. Pallarés Jiménez, Noelia

- Midwife Gregorio Marañón University Hospital
- University Diploma in Nursing from the University of Zaragoza.
- Specialty in Obstetric-Gynecological Nursing (Midwife) at the Midwifery Teaching Unit of Catalonia, University of Barcelona
- Postgraduate in Sexual Health Educational and Community Intervention University of Lérida Foundation
- Collaborating professor at the Midwifery Resident Teaching Unit of the General University Hospital Gregorio Marañón as an expert in the area of maternal and newborn nursing
- Primary Care Midwife In Barcelona, Catalan Institute of Health
- Midwife at the University Hospital Clinic of Barcelona
- Obstetric-Gynecological Specialty at the Germans Trias i Pujol Hospital in Badalona as resident midwife
- Nurse in the puerperium ward at the Miguel Servet University Hospital in Zaragoza



Professors

Mr. Burgueño Antón, Adrián
- Specialist in Gynecology and Obstetrics. Supervisor in Maternal and Child Surgical Block at Hospital Universitario La Paz

Ms. García Rodríguez, Laura
- Matron Goya Health Center

Ms. Gutiérrez Munuera, Marta
- Midwife Infanta Leonor Hospital

Ms. Hernando Orejudo, Isabel
- Matron University Hospital Clínico San Carlos in Obstetric Emergency Units, Delivery Room, High Obstetric Risk, Fetal Physiopathology and Breastfeeding

Ms. López Collado, Irene
- Obstetric Gynecological Nurse

Ms. Matesanz Jete, Consuelo
- Midwife General Hospital of Segovia
- Nurse specialized in Obstetrics and Gynecology

Ms. Martín Jiménez, Beatriz
- Midwife in the delivery room and obstetric emergency services Getafe University Hospital

Ms. Ramírez Sánchez-Carnerero, Rosa María
- Matron Virgen de Altagracia de Manzanares Hospital

Ms. Sánchez Boza, Pilar
- Nurse specialized in Obstetrics and Gynecology

Ms. Triviño de la Cal, Cristina
- Specialist in Gynecology and Obstetrics. Yébenes Health Center, Madrid

05

Structure and Content

The structure of the contents has been designed by the best professionals in the sector in Puerperium for Midwives, with extensive experience and recognized prestige in the profession, backed by the volume of cases reviewed, studied and diagnosed, and with extensive mastery of new technologies applied to health.

This Master's Degree in Puerperium for Midwives contains the most complete and updated scientific program on the market"

Module 1. Physiological Puerperium

1.1. Concept and Stages of Puerperium
1.2. Objectives of the Midwife in the Puerperium
1.3. Physical and Psychosocial Modifications
1.4. Care of Women and Newborns in the Immediate Puerperium
  1.4.1. General Examination
  1.4.2. Physical Assessment
  1.4.3. Identification and Problem Prevention
1.5. Attention and Care of Women and Newborns in the Early Puerperium
  1.5.1. Midwifery in the Early Puerperium
  1.5.2. Health Education and Self Care Tips
  1.5.3. Newborn Screening and Newborn Hearing Impairment Screening
1.6. Control and Follow-up of the Late Post-partum Period
1.7. Hospital Discharge Midwife's Report at Discharge Early Discharge
1.8. Criteria for Good Care at the Primary Care Center
  1.8.1. Criteria for Good Care in Primary Care Centers (Community of Madrid and Other Autonomous Communities)
  1.8.2. Recommendations of the Clinical Practice Guide of the Ministry of Health (CPG)
1.9. Health Education in the Puerperium
  1.9.1. Concept and Introduction Types of Intervention
  1.9.2. Objectives of Health Education in the Puerperium
  1.9.3. Midwife as a Health Agent in the Puerperium
  1.9.4. Methodology. Main Techniques in Health Education: Expository Techniques, Classroom Research Techniques
1.10. Postpartum Workgroups: Postpartum Group and Breastfeeding Group
  1.10.1. Postpartum Session: Objectives and Contents
  1.10.2. Breastfeeding Session: Objectives and Contents
  1.10.3. Newborn Care Session: Objectives and Contents

Module 2. Risk Situations in the Puerperium

2.1. Postpartum Hemorrhage
  2.1.1. Concept, Classification, and Risk Factors
  2.1.2. Etiology
    2.1.2.1. Uterine Tone Disturbances
    2.1.2.2. Tissue Retention
    2.1.2.3. Trauma to the Birth Canal
    2.1.2.4. Coagulation Alterations
  2.1.3. Clinic and Management of Puerperal Hemorrhage
    2.1.3.1. Assessment and Quantification of Hemorrhage
    2.1.3.2. Medical and Surgical Treatment
    2.1.3.3. Midwifery Care
2.2. Infections in the Puerperium
  2.2.1. Puerperal Endometritis
  2.2.2. Perineal Infection
  2.2.3. Abdominal Wall Infection
  2.2.4. Mastitis
  2.2.5. Sepsis. Lethal Septic Shock Syndrome Staphylococcal or Streptococcal Toxic Shock
2.3. Thromboembolic Disease, Heart Disease and Severe Anemia in the Puerperium
  2.3.1. Thromboembolic Disease in the Puerperium
    2.3.1.1. Venous Thrombosis: Superficial, Deep and Pelvic
    2.3.1.2. Pulmonary Embolism
  2.3.2. Heart Disease in the Puerperium
  2.3.3. Severe Anemia in the Puerperium
2.4. Arterial Hypertension, Preeclampsia and HELLP in the Puerperium
  2.4.1. Management of the Woman with Arterial Hypertension in the Puerperium
  2.4.2. Management of Women in the Puerperium after Preeclampsia
  2.4.3. Management of Women in the Puerperium after HELLP
2.5. Endocrine Pathology in the Puerperium
  2.5.1. Management of the Woman with Gestational Diabetes in the Puerperium
  2.5.2. Thyroid Pathology in the Puerperium
  2.5.3. Sheehan Syndrome

2.6. Digestive and Urinary Pathology
- 2.6.1. Main Digestive Pathology Conditions in the Puerperium
  - 2.6.1.1. Crohn's Disease and Ulcerative Colitis
  - 2.6.1.2. Fatty Liver
  - 2.6.1.3. Cholestasis
- 2.6.2. Urinary Pathology in the Puerperium
  - 2.6.2.1. Urinary Infections
  - 2.6.2.2. Postpartum Urinary Retention
  - 2.6.2.3. Urinary Incontinence

2.7. Autoimmune, Neurological and Neuromuscular Diseases in the Postpartum Period
- 2.7.1. Autoimmune Diseases in the Puerperium: Lupus
- 2.7.2. Neurological and Neuromuscular Pathology in the Puerperium
  - 2.7.2.1. Post puncture Headache
  - 2.7.2.2. Epilepsy
  - 2.7.2.3. Cerebrovascular Diseases (Subarachnoid Hemorrhage, Aneurysms, Cerebral Neoplasms)
  - 2.7.2.4. Amyotrophic Lateral Sclerosis
  - 2.7.2.5. Myasthenia Gravis

2.8. Infectious Diseases in the Puerperium
- 2.8.1. Hepatitis B Virus Infection
  - 2.8.1.1. Management of the Postpartum Woman with Hepatitis B Virus Infection
  - 2.8.1.2. Care and Monitoring of the Newborn of a Mother with Hepatitis B Virus Infection
- 2.8.2. Hepatitis C Virus Infection
  - 2.8.2.1. Management of the Postpartum Woman with Hepatitis C Virus Infection
  - 2.8.2.2. Care and Monitoring of the Newborn of a Mother with Hepatitis C Virus Infection
- 2.8.3. Human Immunodeficiency Virus Infection
  - 2.8.3.1. Management of the Postpartum Woman with HIV Infection
  - 2.8.3.2. Care and Monitoring of Newborns Born to HIV-Positive Mothers

2.9. Perineal Trauma and Abdominal Scar Dehiscence after Caesarean Section
- 2.9.1. Perineal Tears: Degrees of Tearing and Care
- 2.9.2. Episiotomy: Types and Midwifery Care
- 2.9.3. Abdominal Scar Dehiscence after Caesarean Section: Midwifery Care
- 2.9.4. Perineal Hematomas

2.10. Psychiatric Illness
- 2.10.1. Postpartum Depression (PPD)
  - 2.10.1.1. Definition, Etiology, Detection of PPD
  - 2.10.1.2. Medical Treatment and Midwifery Care
- 2.10.2. Puerperal Psychosis
  - 2.10.2.1. Definition, Etiology, Detection of Puerperal Psychosis
  - 2.10.2.2. Medical Treatment and Midwifery Care

Module 3. Pelvic Floor

3.1. Anatomy of the Female Perineum Types of Perineal Trauma

3.2. Episiotomy
- 3.2.1. Definition
- 3.2.2. Types of Episiotomy
- 3.2.3. Indications for Performing Episiotomy
- 3.2.4. WHO, SEGO and CPG Recommendations

3.3. Perineal Tears:
- 3.3.1. Definition and Types
- 3.3.2. Risk Factors
- 3.3.3. Prevention of Perineal Tears

3.4. Hematomas Midwifery Care after Perineal Repair
- 3.4.1. Slight Tears (Types I and II)
- 3.4.2. Severe Tears (Types III and IV)
- 3.4.3. Episiotomy.

3.5. Complications of Short Term Trauma to the Perineum
- 3.5.1. Hemorrhages
- 3.5.2. Infections
- 3.5.3. Pain and Dyspareunia

3.6. Complications of Long-Term Trauma to the Perineum: Incontinence
- 3.6.1. Urinary Incontinence.
- 3.6.2. Fecal Incontinence
- 3.6.3. Gas Incontinence

3.7. Complications of Long-Term Trauma to the Perineum: Prolapse
- 3.7.1. Definition and Classification of Genital Prolapse
- 3.7.2. Risk Factors
- 3.7.3. Medical and Surgical Treatment of Prolapses Pelvic Floor Rehabilitation

3.8. Conservative Treatment of Pelvic Floor Dysfunctions
- 3.8.1. Manual Techniques
- 3.8.2. Instrumental Techniques: Biofeedback and Electrostimulation and Other Instrumental Techniques
- 3.8.3. Postural Reeducation and Abdomino-Pelvic Training

3.9. Surgical Treatment of Pelvic Floor Dysfunctions
- 3.9.1. Slings and Netting
- 3.9.2. Colposuspensions
- 3.9.3. Colporrhaphy and Perineorrhaphy

3.10. Female Genital Mutilation (FGM)
- 3.10.1. Introduction and Social and Demographic Context of FGM Epidemiology
- 3.10.2. Current Practice of FGM
- 3.10.3. Types of MGF
- 3.10.4. Consequences of the Practice of FGM on Women's Health
- 3.10.5. FGM: Strategies for Prevention, Detection and Intervention by Midwives
- 3.10.6. Legal Framework Regarding FGM

Module 4. Breastfeeding

4.1. Anatomy
- 4.1.1. Embryonic Development
- 4.1.2. Mature Mammary Gland
- 4.1.3. Mammary Gland in Pregnancy
- 4.1.4. Mammary Gland in Lactation

4.2. Physiology of Milk Secretion
- 4.2.1. Mammogenesis
- 4.2.2. Lactogenesis I and II
- 4.2.3. Lactogenesis III/ Lactopoiesis
- 4.2.4. Endocrine Control of Lactate Secretion

4.3. Composition of Breast Milk
- 4.3.1. Types of Milk and Their Composition
- 4.3.2. Comparison between Colostrum-Ripened Milk and Mother's Milk-Cow's Milk

4.4. Effective Breastfeeding
- 4.4.1. Signs of a Good Latch
- 4.4.2. Newborn Normality Patterns: Urination, Stool and Weight Gain

4.5. Valuation of Intake
- 4.5.1. Latch Scale
- 4.5.2. Observation Table of the European Union Intake
- 4.5.3. Breastfeeding Postures

4.6. Nutrition and Supplements
- 4.6.1. Maternal Nutrition and Supplementation
- 4.6.2. Supplementation in a Newborn Recommendations of Clinical Practice Guidelines 2017

4.7. Contraindications of Breastfeeding
- 4.7.1. Maternal Contraindications
- 4.7.2. Contraindications in Newborns
- 4.7.3. Pharmacological Suppression

4.8. Breastfeeding and Bonding
- 4.8.1. Skin with Skin The Importance of the First Hours after Birth
- 4.8.2. Co-sleeping
  - 4.8.2.1. Benefits
  - 4.8.2.2. Guidelines for Safe Co-sleeping
- 4.8.3. Tandem Breastfeeding

4.9. Milk Extraction and Preservation

4.10. Weaning Initiative for the Humanization of Birth and Lactation Assistance (IHAN)

Module 5. The Newborn

5.1. Introduction to Neonatology Concept and Classification
- 5.1.1. Periods in Neonatology
- 5.1.2. Newborn Classification: by Birth Weight, by Gestational Age, by Duration of Gestation
- 5.1.3. Classification of the at-Risk Newborn
- 5.1.4. Determination of Gestational Age Farr-Dubowitz Method Capurro y Método de Ballard Method

5.2. Adaptation to Extrauterine Life by Systems
- 5.2.1. Breathing First Breath
- 5.2.2. Cardiovascular: Circulation, Hemoglobin and Coagulation Closure of Ducts and Foramen Ovale
- 5.2.3. Thermoregulation in a Newborn
- 5.2.4. Gastrointestinal
- 5.2.5. Renal
- 5.2.6. Hormonal and Immunological
- 5.2.7. Hepatic and Glucose Metabolism

5.3. Immediate Care of the Newborn Midwifery Care in the Immediate Puerperium
- 5.3.1. Assessment of the Newborn Apgar´s Test
- 5.3.2. Prophylaxis
- 5.3.3. Phases of Behavior (Periods of Alertness, Adaptation and Rest, Searching and Established Lactation)
- 5.3.4. Skin with Skin
- 5.3.5. Midwifery Care in the Immediate Puerperium

5.4. Physical Examination of Newborns
- 5.4.1. Bone System
- 5.4.2. Skin and Subcutaneous Tissue
- 5.4.3. Cardiorespiratory
- 5.4.4. Abdomen
- 5.4.5. Chest
- 5.4.6. Genitourinary
- 5.4.7. Upper and Lower Extremities
- 5.4.8. Neurological

5.5. Care in Newborns
- 5.5.1. Hygiene and Bathing
- 5.5.2. Umbilical Cord
- 5.5.3. Urination and Meconium
- 5.5.4. Dressing
- 5.5.5. Pacifier
- 5.5.6. Hospital Visits
- 5.5.7. Nutrition

5.6. Thermal Regulation in the Neonate and Physical Environment
- 5.6.1. Temperature Regulation in a Newborn
- 5.6.2. Heat Production in a Newborn
- 5.6.3. Heat Loss in a Newborn
- 5.6.4. Methods to Reduce Heat Loss
- 5.6.5. Consequences of Thermal Disturbance in the Newborn RN
- 5.6.6. Importance of the Physical Environment: Exposure to Light, Nighttime Diurnal Rhythm, Noise and Tactile Stimuli

5.7. Frequent Reasons for Consultation
- 5.7.1. Crying
- 5.7.2. Milk Allergy
- 5.7.3. Gastroesophageal Reflux
- 5.7.4. Late Vomiting
- 5.7.5. Inguinal Hernia
- 5.7.6. Haemangiomas
- 5.7.7. Lacrimal Stenosis and Lacrimal Occlusion
- 5.7.8. Sleep

5.8. Screening and Parameters of Newborn Growth and Development
- 5.8.1. Metabolic, Auditory and Visual Screening
- 5.8.2. Growth Parameters (Weight, Lengths and Perimeters)
- 5.8.3. Development Parameters

5.9. Common Problems
- 5.9.1. Metabolic Dysfunctions: Hypoglycemia and Hypocalcemia

5.9.2. Respiratory Problems: Hyaline Membrane Disease, Apnea, Transient Tachypnea, Meconium Aspiration Syndrome
5.9.3. Hyperbilirubinemia: Physiological, Pathological and Kernicterus
5.9.4. Gastroesophageal Reflux. Infantile Colic
5.9.5. Febrile Seizures
5.10. Accident Prevention in Newborns Prevention of Sudden Death

Module 6. Special Situations

6.1 Premature Newborn
6.1.1. Definition. Etiology
6.1.2. Characteristics of Prematurity and Morphology (Dubowitz Test, Ballard Test)
6.1.3. Early and Late Complications of Prematurity
6.1.4. Care of Parents of Premature Newborns Impact of Prematurity on Parents
6.1.5. Early and Late Complications
6.2. Postmature Newborn
6.2.1. Definition. Etiology
6.2.2. Hypnosis
6.2.3. Main Complications
6.2.4. General Care
6.3. Low Birth Weight Newborn and RIC
6.3.1. Definition. Etiology
6.3.2. Hypnosis
6.3.3. Main Complications
6.3.4. General Care
6.4. Hypoxic–Ischemic Encephalopathy
6.4.1. Essential and Specific Criteria for the Diagnosis of Hypoxic-ischemic Encephalopathy
6.4.2. Hypoxic-Ischemic Encephalopathy Management
6.5. Perinatal Infection Sepsis
6.5.1. Early or Vertical Infection
6.5.2. Late or Nosocomial Infection
6.5.3. Neonatal Sepsis
6.5.4. Special Considerations for Major Infections: Listeria, Cytomegalovirus, Toxoplasma, Rubella, Varicella, and Syphilis
6.6. Midwifery Care of Newborns Born to Mothers Who Use Drugs
6.6.1. Classification of Drugs According to WHO (Opium and Derivatives, Barbiturates and Alcohol, Cocaine, Amphetamines, LSD and Cannabis) and According to Pharmacology (CNS Stimulants, CNS Depressants and Psychedelics)
6.6.2. Effects of Drug Use in Pregnancy on Pregnant Women and Children Neonates
6.6.3. Neonatal Care and Surveillance
6.6.4. Fetal Alcohol Syndrome
6.7. Particularities of Breastfeeding in Premature Newborns
6.7.1. Sucking Reflex and Prematurity
6.7.2. Breast Milk, Donated Milk and Formula Milk
6.7.3. Techniques and Special Positions
6.7.4. Use of the Relactator
6.8. Breastfeeding Problem in Special Situations
6.8.1. Sleepy Newborn
6.8.2. Breastfeeding Strike
6.8.3. Ankyloglossia
6.8.4. Fetal Pathology: Down Syndrome, Pierre-Robin Syndrome and Cleft Lip
6.9. Mother-Related Breastfeeding Problems I
6.9.1. Flat, Inverted and Pseudoinverted Nipple
6.9.2. Poor Latching
6.9.3. Nipple Cracks and Infections
6.9.4. Delayed Lactogenesis II
6.10. Mother-Related Breastfeeding Problems II
6.10.1. Mastitis: Culture Removal
6.10.2. Abscess
6.10.3. Hypogalactia
6.10.4. Ingurgitation

Module 7. Psychological and Emotional Aspects in the Puerperium

7.1. Definition of Bond Theoretical Framework
7.2. Neurobiological Bond
  7.2.1. Maternal Hormonal System
  7.2.2. Newborn Hormonal System
7.3. Psychic Changes in the Postpartum Period
  7.3.1. Psychic Transparency
  7.3.2. Psychosocial Adaptation: Reva Rubin and Mercer
7.4. Risk Factors in the Alteration of the Bonding Process
7.5. Perinatal Loss
  7.5.1. Definitions
  7.5.2. Current Situation of Perinatal Loss in Spain
  7.5.3. Risk Factors and Causes
7.6. Types of Perinatal Loss
  7.6.1. Spontaneous Abortion, Voluntary Interruption of Pregnancy (VTP)
  7.6.2. IVF Due to Fetal Malformation or Maternal Risk
  7.6.3. Selective Reduction in Multiple Gestation
  7.6.4. In Utero or Intrapartum Stillbirth Loss
7.7. Perinatal Bereavement
  7.7.1. Concept and Modalities
  7.7.2. Stages of Grief
  7.7.3. Differences between Perinatal Bereavement and Depression
7.8. Conceptualization of Perinatal Bereavement
  7.8.1. Specific Manifestations
  7.8.2. Factors that Influence Grief
  7.8.3. Perinatal Bereavement Rating Scales
7.9. Experiences after a Loss
  7.9.1. Pregnancy after Loss
  7.9.2. Breastfeeding in Bereavement
  7.9.3. Others Affected in the Loss
7.10. The Role of the Midwife in Perinatal Bereavement

Module 8. Sexuality and Contraception in the Postpartum Period

8.1. Anatomical Recollection of the Female Genital Tract
  8.1.1. External Genitalia
  8.1.2. Internal Genitals
  8.1.3. Pelvis Bone
  8.1.4. Soft Pelvis
  8.1.5. Mammary Gland
8.2. Recall of the Physiology of the Female Reproductive System
  8.2.1. Introduction
  8.2.2. Female Hormones
  8.2.3. Female Genital Cycle: Ovarian, Endometrial, Myometrial, Tubal, Cervical, Vaginal and Mammary
8.3. Female Sexual Response Cycle
  8.3.1. Introduction: Jonhson Masters Sexual Response Cycle
  8.3.2. Desire
  8.3.3. Excitement
  8.3.4. Plateau
  8.3.5. Orgasm
8.4. Sexuality in the Puerperium
  8.4.1. Introduction
  8.4.2. Anatomical, Physiological and Psychological Changes in the Postpartum Period
  8.4.3. Sexuality in the Puerperium
  8.4.4. Sexual Problems during the Puerperium
  8.4.5. Promotion of Sexual Health in the Puberperium
8.5. Dysfunctions of Desire
  8.5.1. Introduction
  8.5.2. Biological Bases of Sexual Desire
  8.5.3. Considerations on Sexual Desire
  8.5.4. Definitions of Sexual Desire
  8.5.5. Desire Phase Dysfunctions
  8.5.6. Etiology of Desire Dysfunctions

8.5.7. Treatment Proposals
8.6. Excitation Dysfunctions
8.6.1. Definitions of the Concept of Excitation
8.6.2. Definition of Arousal Dysfunctions
8.6.3. Classification of the Dysfunctions in the Excitation Phase
8.6.4. Etiology of Dysfunctions in the Excitation Phase
8.7. Orgasm Dysfunctions
8.7.1. What Is the Orgasm and How Is it Produced?
8.7.2. Physiological Reactions of the Sexual Response in Women
8.7.3. The G Point
8.7.4. The Love Muscle (Pubococcygeus Muscle)
8.7.5. Necessary Conditions for the Achievement of Orgasm
8.7.6. Classification of Female Orgasmic Dysfunctions
8.7.7. Etiology of Anorgasmia
8.7.8. Treatment
8.8. Vaginismus and Dyspareunia
8.8.1. Definitions
8.8.2. Classification
8.8.3. Etiology
8.8.4. Treatment
8.9. Couple Therapy
8.9.1. Introduction
8.9.2. General Aspects of Couples Therapy
8.9.3. Dynamics of Sexual Enrichment and Couple Communication
8.10. Contraception in the Puerperium
8.10.1. Concepts
8.10.2. Types of Contraception
8.10.3. Natural Methods
8.10.3.1. Natural Methods with Breastfeeding
8.10.3.2. Natural Methods without Breastfeeding
8.10.4. IUD
8.10.5. Hormonal Methods
8.10.5.1. Hormonal Methods with Breastfeeding
8.10.5.2. Hormonal Methods without Breastfeeding
8.10.6. Voluntary Sterilization
8.10.7. Emergency Contraception

Module 9. Parenting

9.1. Childhood and Positive Parenting in the European Framework
9.1.1. The Council of Europe and the Rights of the Child
9.1.2. Positive Parenting: Definition and Basic Principles
9.1.3. Public Policies to Support Positive Parenting
9.2. The Family as a Agent of Health
9.2.1. Family Definition
9.2.2. The Family as an Agent of Health
9.2.3. Protective Factors and Stressors
9.2.4. Development of Parental Competencies and Responsibility
9.3. Family: Structure and Vital Cycle
9.3.1. Family Models
9.3.1.1. Inclusion
9.3.1.2. Fusion
9.3.1.3. Interdependence
9.3.2. Types of Family
9.3.2.1. Stable
9.3.2.2. Unstable
9.3.2.3. Single Parent
9.3.2.4. Reconstituted
9.3.3. Single-Parent Families
9.3.4. Assessment of the Family's Needs
9.3.4.1. Family Evolutionary Cycle

9.3.4.2. Family Apgar Test
9.3.4.3. Mos Questionnaire

9.4. Parental Educational Styles
9.4.1. Essential Concepts
9.4.2. Classification of Styles
9.4.2.1. Authoritarian Parents
9.4.2.2. Permissive (Indulgent and Neglectful) Parents
9.4.2.3. Democratic Parents
9.4.3. Family Styles
9.4.3.1. Contractualist
9.4.3.2. Statutory
9.4.3.3. Maternalist
9.4.3.4. Overprotective

9.5. Coeducation
9.5.1. Introduction and Principles
9.5.2. Coeducation Strategies
9.5.3. Workshops to Work on Coeducation in Families (Sessions)

9.6. Positive Conflict Resolution Intrafamily Communication
9.6.1. Introduction
9.6.2. Intelligent Traffic Light Technology
9.6.3. Effective Communication, Active Listening and Assertiveness
9.6.4. Self-esteem and Self-knowledge Self-esteem in Different Stages of Childhood
9.6.5. Promoting Autonomy
9.6.6. Self Control and Frustration Tolerance

9.7. Attachment
9.7.1. Introduction Function. Window of Opportunity
9.7.2. Attachment Development by Age
9.7.3. Attachment Types: Secure, Anxious and Ambivalent, Avoidant, Disorganized, Disorganized
9.7.4. Paternal Bond

9.8. Midwifery Care Oriented to Establishing and Fostering Attachment
9.8.1. Kangaroo Method
9.8.2. Promotion of Breastfeeding
9.8.3. Porting
9.8.4. Infant Massage
9.8.5. Model Sessions for Attachment Enhancement

9.9. Alteration of the Maternal-Infant Bond
9.9.1. Introduction
9.9.2. Diagnostic Criteria
9.9.3. Psychomedical Questionnaires
9.9.4. Other Valuation Scales
9.9.5. Semi-structured Interview

9.10. Emotional or Psychological Abuse
9.10.1. Introduction to Child Abuse
9.10.2. Definition of Psychological Abuse
9.10.3. Classification: Passive and Active
9.10.4. Risk Factors
9.10.5. Symptoms and Disorders
9.10.6. Forms that Psychological Abuse Takes on

Module 10. Legislation and Management in Midwifery Care in the Puerperium

10.1. The Postpartum Woman and the Newborn as Users of the National Health System Ethical Principles in Professional Practice

10.2. Right to Health Information and the Right to Privacy in the Midwife's Practice of Care
10.2.1. Right to Health Care Information
10.2.2. Holder of the Right to Welfare Information
10.2.3. Right to Epidemiological Information
10.2.4. The Right to Privacy Professional Secrecy
10.2.5. Right to Patient Autonomy

10.2.6. Informed Consent
10.2.7. Limits of Informed Consent and Informed Consent by Proxy
10.2.8. Conditions of Information and Written Informed Consent
10.2.9. Information in the National Health System
10.3. Professional Secrecy
10.4. Medical History. Discharge Report and Other Clinical Documentation Data Protection
10.5. Professional Responsibility in Midwifery Care Work
10.6. Civil Register Family Book Current Maternity and Paternity Leave Permits in Special Situations
10.7. Quality of Midwifery Care in the Puerperium
10.7.1. Concept of Quality and Conceptual Framework Total Quality
10.7.1. Evaluation of Structure, Process and Results
10.7.2. Evaluation Methods: External Evaluation, Internal Evaluation and Monitoring
10.7.3. Quality Dimensions
10.8. Health Programs and Their Evaluation
10.8.1. Concept of the Health Program
10.8.2. Objectives and Activity Planning
10.8.3. Clinical Practice Guidelines
10.8.4. Care Maps and Clinical Pathways
10.8.5. Assessment
10.9. Health Planning
10.9.1. Introduction and Definition of Health Planning

10.9.2. Stages in Planning
10.9.3. Identifying Problems Types of Needs
10.9.4. Indicators
10.9.5. Conditioning Factors of Health Problems
10.9.6. Prioritization of Problems
10.10. Organization of Obstetric Care in the Puerperium from the Different Levels of Care
10.10.1. Organization of Midwifery Care in Primary Care and Specialized Care Facilities
10.10.2. The Postpartum Consultation of the Midwife
10.10.3. Coordination of Midwifery Care between Both Levels of Care Continuity of Care

This training will allow you to advance in your career comfortably"

06

Methodology

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

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

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

At TECH Nursing School we use the Case Method

In a given situation, what should a professional do? 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. Nurses learn better, faster, and more sustainably over time.

With TECH, nurses can experience a learning methodology 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, in an attempt to recreate the real conditions in professional nursing 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:

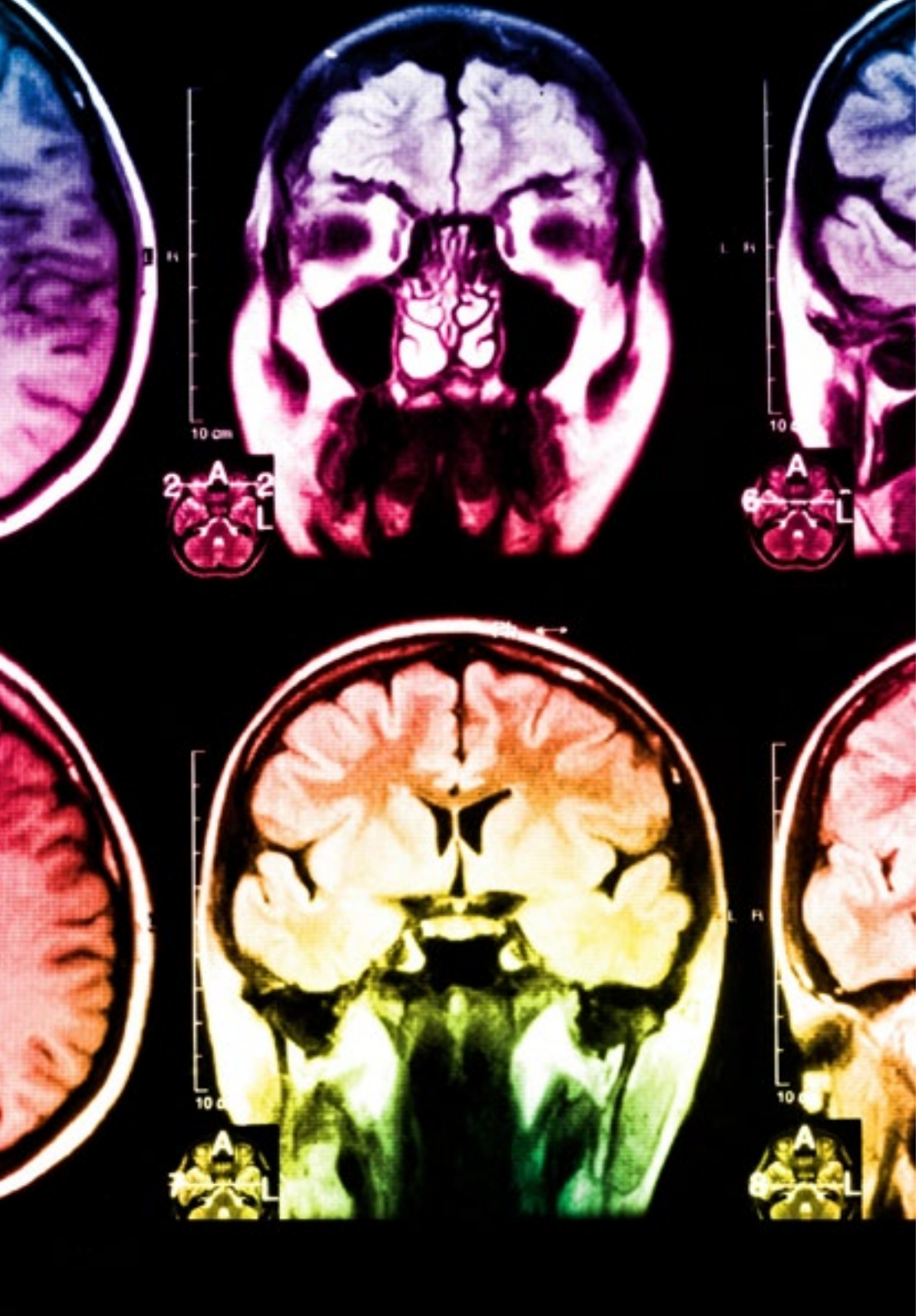
1. Nurses who follow this method not only grasp concepts, but also develop their mental capacity, by evaluating real situations and applying their knowledge.
2. The learning process has a clear focus on practical skills that allow the nursing professional to better integrate knowledge acquisition into the hospital setting or primary care.
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 case studies with a 100% online learning system based on repetition combining a minimum of 8 different elements in each lesson, which is a real revolution compared to the simple study and analysis of cases.

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



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

With this methodology we have trained more than 175,000 nurses with unprecedented success in all specialities regardless of practical workload. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

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

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

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

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

Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is really 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.

Nursing Techniques and Procedures on Video

We introduce you to the latest techniques, to the latest educational advances, 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 them as many times as you want.

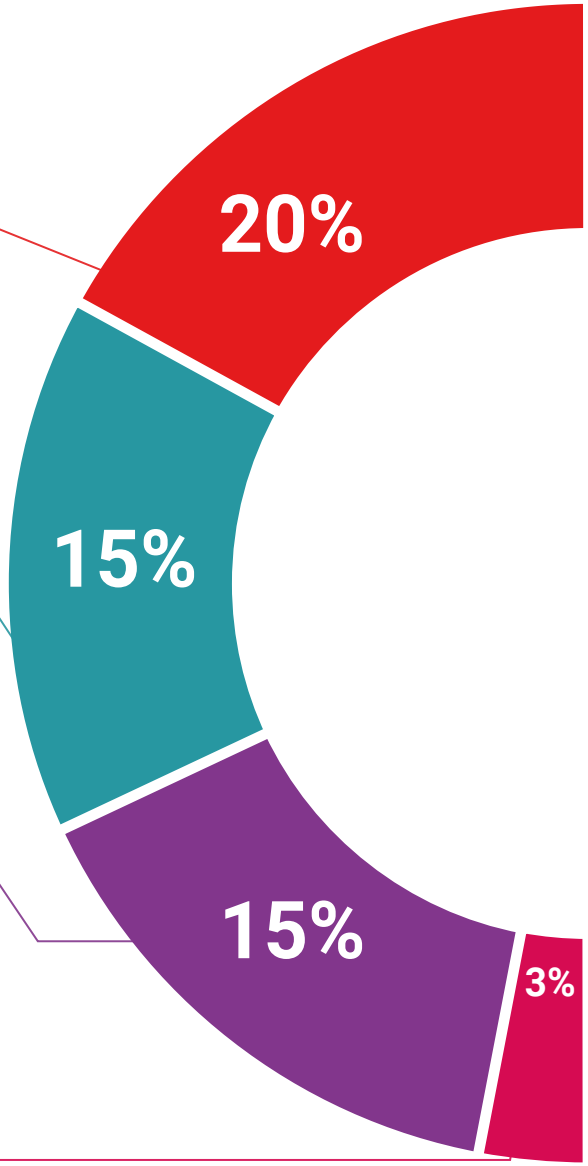
Interactive Summaries

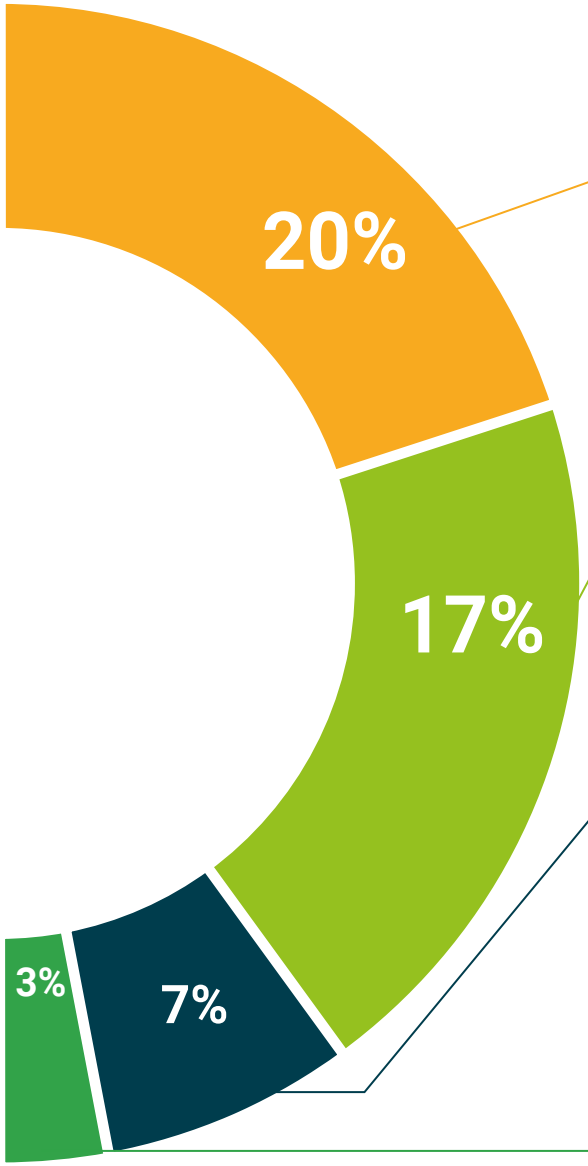
The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

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 suggesting that observing third-party experts can be useful.

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

Quick Action Guides

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

07

Certificate

The Master's Degree in Puerperium for Midwives guarantees, in addition to the most rigorous and up to date training, access to a Master's Degree issued by TECH Global University.

Successfully complete this training and receive your diploma without travel or laborious paperwork"

This program will allow you to obtain your **Master's Degree diploma in Puerperium for Midwives** 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** title 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 Puerperium for Midwives**

Modality: **online**

Duration: **12 months**

Accreditation: **60 ECTS**

tech global university

Mr./Ms. _____, with identification document _____
has successfully passed and obtained the title of:

Master's Degree in Puerperium for Midwives

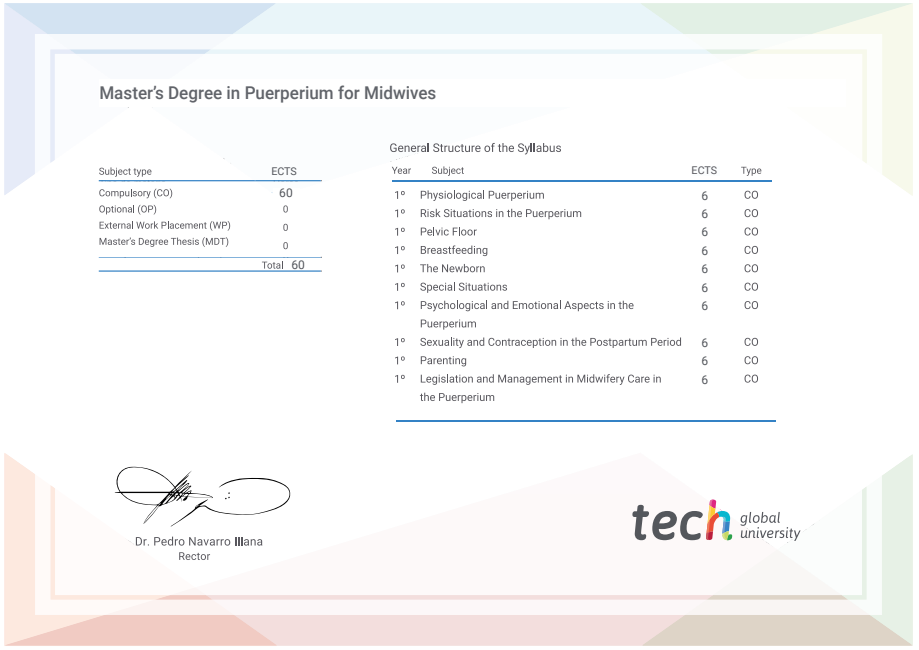
This is a program of 1,500 hours of duration equivalent to 60 ECTS, with a start date of dd/mm/yyyy and an end date of dd/mm/yyyy.

TECH Global University is a university officially recognized by the Government of Andorra on the 31st of January of 2024, which belongs to the European Higher Education Area (EHEA).

In Andorra la Vella, on the 28th of February of 2024

Dr. Pedro Navarro Illana
Chancellor

This qualification must always be accompanied by the university degree issued by the competent authority to practice professionally in each country. Unique TECH Code: AFWORD23S techtitute.com/certificates



Master's Degree in Puerperium for Midwives

Subject type	ECTS
Compulsory (CO)	60
Optional (OP)	0
External Work Placement (WP)	0
Master's Degree Thesis (MDT)	0
Total	60

General Structure of the Syllabus

Year	Subject	ECTS	Type
1º	Physiological Puerperium	6	CO
1º	Risk Situations in the Puerperium	6	CO
1º	Pelvic Floor	6	CO
1º	Breastfeeding	6	CO
1º	The Newborn	6	CO
1º	Special Situations	6	CO
1º	Psychological and Emotional Aspects in the Puerperium	6	CO
1º	Sexuality and Contraception in the Postpartum Period	6	CO
1º	Parenting	6	CO
1º	Legislation and Management in Midwifery Care in the Puerperium	6	CO

Dr. Pedro Navarro Illana
Rector

tech global university

*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.

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Master's Degree

Puerperium for Midwives

- Modality: **online**
- Duration: **12 months**
- Certificate: **TECH Global University**
- Credits: **60 ECTS**
- Schedule: **at your own pace**
- Exams: **online**

Master's Degree

Puerperium for Midwives

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