Postgraduate Diploma Advanced Neuropharmacology



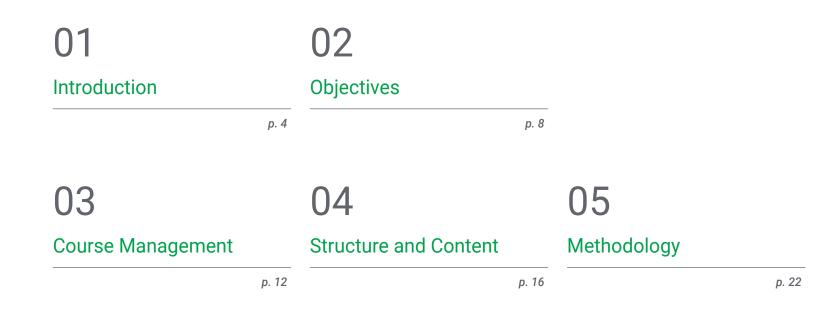


Postgraduate Diploma Advanced Neuropharmacology

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

Website: www.techtitute.com/in/engineering/postgraduate-diploma/postgraduate-diploma-advanced-neuropharmacology

Index



06 Certificate

01 Introduction

The constant development of pharmacology oriented to the care of neurological patients has led to the emergence of new biological therapies for autoimmune diseases, drugs to treat migraine and epilepsy. In this sense, the professionals pharmacist in hospital centers must be aware of the progress in this field, the diagnosis of pathologies, their incidence in adult or pediatric patients and the most current treatments. Thus, this TECH program was born, which will provide the graduates with a complete update in 450 teaching hours. All this, in a 100% online teaching format and with the best teaching material of the academic panorama, available 24 hours a day, from any electronic device with Internet connection.

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TECH offers you a unique academic experience that will allow you to be up to date in Advanced Neuropharmacology, without neglecting your personal responsibilities"

tech 06 | Introduction

Patients suffering from pathologies with a high incidence such as Epilepsy, frequent Migraine or the autoimmune disease Myasthenia Gravis have found in pharmacological advances important advances in their treatments and diagnoses. In this sense, studies on neurological diseases have made it possible to improve the quality of life of the people who suffer from them and to incorporate the most relevant advances into clinical practice.

In this context, pharmacists, especially those in hospital environments, must be aware of the most notorious progress, the techniques used for patient management and the pharmacology used. Thus, this 6-month Postgraduate Diploma in Advanced Neuropharmacology was born.

It is an intensive program that provides students with advanced information on the pathophysiology and drugs used for the main diseases affecting the Central Nervous System, as well as those used for seizures and headaches. Likewise, special emphasis will be placed on treatments for surgical and polytraumatized patients.

To achieve this update, the graduates have at their disposal video summaries of each topic, in in focus videos, case studies and specialized readings to further extend the information provided in this syllabus.

Undoubtedly, a unique opportunity to get a quality update through a convenient and flexible academic proposal. The pharmacist only needs a mobile device, tablet or computer with Internet connection to view the content hosted on the virtual platform at any time of the day. An ideal option for those seeking to reconcile their daily activities with a cutting-edge program.

This **Postgraduate Diploma in Advanced Neuropharmacology** contains the most complete and up-to-date scientific program on the market. The most important features include:

- The development of practical cases presented by experts in Pharmacy, Hospital Management, among others
- 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



Thanks to the Relearning method you will be able to reduce the long hours of study and consolidate the concepts addressed in less time"

Introduction | 07 tech

This academic proposal will keep you up to date with the latest scientific evidence on pharmacology in patients with cerebral edema"

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 professionals with situated and contextual learning, i.e., a simulated environment that will provide an immersive education programmed to learn in real situations.

The design of this program focuses on Problem-Based Learning, by means of which the professionals must try to solve the different professional practice situations that are presented throughout the academic course. For this purpose, the students will be assisted by an innovative interactive video system created by renowned experts. TECH adapts to you and for this reason has created an online program without classes with restricted schedules. Get updated at your own pace.

> With this university qualification you will be up to date with emerging therapies for Migraine.

02 **Objectives**

This Postgraduate Diploma focuses on providing students with a complete update on Advanced Neuropharmacology. In order to achieve this goal successfully, the graduates will be provided with numerous pedagogical tools that will allow them to be aware of the advances in specialized and safe pharmaceutical care in the treatment of patients with Epilepsy, Migraine, Myasthenia Gravis, surgical and polytraumatized patients. In addition, given the proximity of the faculty will be able to resolve any questions you may have about the content of this program.

Learn from your computer with Internet connection about the initial management of the polytraumatized and surgical patient in the context of trauma"

tech 10 | Objectives



General Objectives

- Identify management of a wide variety of clinical situations, using available patient-specific information (e.g., age-related, risk factors, relevant acuity indices, prehospital providers)
- Develop therapeutic and monitoring plans based on medication-related problems, patient- and disease-specific information, and laboratory data
- Summarize strategies for the procurement, preparation, and administration of time-sensitive therapies
- Evaluate the applicability and limitations of published data and reports to patient care
- Modify the treatment plan based on monitoring the patient's response to initial therapy



Numerous case studies are available to facilitate this update from a practical and close-up view of Advanced Neuropharmacology"



Objectives | 11 tech

Specific Objectives

Module 1. Pharmacology of Epilepsy, Migraine and Myasthenia Gravis

- Delve into seizures in the adult patient: definitions, clinical presentation, antiepileptic drugs
- Deepen in seizures in the pediatric patient: definition, diagnosis, pharmacological management
- Update knowledge about Status Epilepticus (SE) in the adult patient
- Define SE in the pediatric patient, causes, diagnosis and treatment
- Management of myasthenia gravis (MG): definition, initial management, indications for intubation, drugs to avoid
- Inquire into Headache and Migraine in the adult patient, as well as incidence, types of Headache, diagnosis, first and second line treatments, pharmacological alternatives
- Be aware of the pharmacology in pediatric patients with Headache and Migraine
- Delve into the definition and diagnosis, initial management, patient education around hypertensive emergency

Module 2. Pharmacology of the Central Nervous System

- Explore the initial evaluation, imaging tests, multidisciplinary team, time-dependent pharmacology, endovascular therapy, antithrombotic treatment of ischemic stroke
- Delve into the management of hypertension in acute ischemic stroke: treatment selection, goals, objectives
- Describe the incidence, clinical presentation, mechanism and risk factors, management of oropharyngeal angioedema due to Alteplase
- Delve into the incidence, definition and clinical presentation, risk factors, initial management of hemorrhagic stroke intracerebral hemorrhage (ICH)

- Be updated on diagnosis, initial emergency management, pharmacological and non-pharmacological measures in cerebral edema
- Delving into opioid overdose
- Be up to date on the management of the agitated patient (clinical presentation, initial management, first and second line therapies)
- Update knowledge on acute pain management in the substance abuse patient: general principles, multimodal analgesia
- Deepen in alcohol withdrawal syndrome: incidence, pathophysiology, signs and symptoms, severity of withdrawal, pharmacology and supportive therapies

Module 3. Pharmacology of the surgical and polytraumatized patient

- Master the pharmacological and general management of traumatic brain injury, triage procedures, scales and severity classification
- Delve into the reversal of antithrombotic drugs: coagulopathy, severity of bleeding, resuscitation, monitoring of coagulopathy, reversal agents, antifibrinolytics
- Delineate the pharmacological options for the management of Acute Pain, Spinal Shock, Neurogenic Shock and Hypovolemic Shock
- Assess the different sedative agents that promote moderate sedation, their levels and recommendations

03 Course Management

TECH has carried out an exquisite selection process of the management and teaching team that makes up this high-level university program. Their deep knowledge of Pharmacology and their experience in the hospital environment is evident throughout this academic program. Thus, the graduates who takes this academic proposal will have the security of having access to the most recent information and under the highest scientific rigor.

You will be updated by expert pharmacists with extensive experience in hospital centers"

tech 14 | Course Management

Management



Mr. Ramos Rodríguez, Javier

- Pharmacist at Hospital Corporación Sanitaria Parc Taulí, Sabadell, Spain
- Coordinating member of the working group of pharmacists specializing in the Emergency Department (RedFaster)
- Pharmacist specializing in Hospital Pharmacy at Hospital Mútua de Terrassa
- Pharmacist specializing in Hospital Pharmacy at Consorci Sanitari Integral
- * Resident Pharmacist at Servicio Canario de la Salud (Canary Health Service)
- Assistant Pharmacist in Pharmacy María Concepción Gutiérrez
- Assistant Pharmacist in Pharmacy Marina López González
- Master in Pharmacotherapeutic Follow-up of HIV/AIDS patients by the University of Granada

Professors

D. Amor García, Miguel Ángel

- Hospital pharmacist at Infanta Cristina University Hospital
- Coordinator of the FarMIC Group of the Spanish Society of Hospital Pharmacy
- Member of the National Commission of Hospital Pharmacy, Ministry of Health of Spain
- Resident pharmacist at Gregorio Marañón University Hospital
- Hospital pharmacist at Salamanca Clinical Hospital
- Master's Degree in Medical Science Liaison at CESIF
- Degree in Pharmacy from the University of Salamanca



04 Structure and Content

The effectiveness of the Relearning Method, has led TECH to use it in all its qualifications. With this system, the pharmacists will achieve a complete update, without the need to invest long hours of study and memorization. In this way, the reiteration of the key concepts will lead you to increase your knowledge of Advanced Neuropharmacology throughout the 3 modules that make up this Postgraduate Diploma.

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Structure and Content | 17 tech

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This academic course will allow you to be updated on the pathophysiological mechanisms of stroke patients, as well as the pharmacology related to its management"

tech 18 | Structure and Content

Module 1. Pharmacology of Epilepsy, Migraine and Myasthenia Gravis

- 1.1. Adult Patient Seizures
 - 1.1.1. Classification of Seizures
 - 1.1.2. Differential diagnosis and clinical evaluation
 - 1.1.3. Neuroimaging Studies in Diagnosis
 - 1.1.4. Pharmacological treatment of seizures in the adult patient
- 1.2. Seizures in the pediatric patient
 - 1.2.1. Classification of seizures in the pediatric patient
 - 1.2.2. Differential diagnosis and clinical evaluation of seizures in the pediatric patient
 - 1.2.3. Neuroimaging studies in the diagnosis of seizures in the pediatric patient
 - 1.2.4. Febrile seizures in childhood
- 1.3. Status Epilepticus (SE) in the adult patient
 - 1.3.1. Diagnosis and clinical evaluation of Status Epilepticus
 - 1.3.2. Neurophysiological evaluation and neuroimaging in Status Epilepticus
 - 1.3.3. Causes and triggers of Status Epilepticus in adults
 - 1.3.4. Emergency management and treatment of Status Epilepticus in the adult patient
- 1.4. SE in the pediatric patient
 - 1.4.1. Diagnosis and clinical evaluation of Status Epilepticus in the pediatric patient
 - 1.4.2. Neurophysiological assessment and neuroimaging in pediatric Status Epilepticus
 - 1.4.3. Causes and triggers of Status Epilepticus in children
 - 1.4.4. Emergency management and treatment of Status Epilepticus in the pediatric patient
- 1.5. Management of Myasthenia Gravis (MG)
 - 1.5.1. Classification of Myasthenia Gravis
 - 1.5.2. Pharmacological Treatment of Myasthenia Gravis
 - 1.5.3. Management of myasthenic crisis and acute exacerbations of myasthenia gravis
 - 1.5.4. Immunomodulatory and biological therapies in myasthenia gravis
- 1.6. Headache and Migraine in the adult patient
 - 1.6.1. Classification of primary and secondary headaches
 - 1.6.2. Clinical evaluation and differential diagnosis of headache and Migraine in the adult patient
 - 1.6.3. Initial therapeutic approach and management of episodic migraine
 - 1.6.4. Migraine prophylaxis and prevention of chronic migraine headaches

- 1.7. Headache and Migraine in the pediatric patient
 - 1.7.1. Classification of primary and secondary headaches in children
 - 1.7.2. Clinical evaluation and differential diagnosis of headache and Migraine in the pediatric patient
 - 1.7.3. Differences in the presentation and manifestation of Migraine in children and adults
 - 1.7.4. Acute pharmacological treatment of migraine attacks in children
- 1.8. Hypertensive Emergencies
 - 1.8.1. Classification and categories of hypertensive emergency
 - 1.8.2. Clinical Evaluation and Diagnosis of Hypertensive Emergencies
 - 1.8.3. Complementary tests and laboratory studies for the evaluation of hypertensive emergency
 - 1.8.4. Differentiation between hypertensive emergency and hypertensive urgency
- 1.9. Principles of pharmacokinetics and pharmacodynamics applied to Epilepsy drugs
 - 1.9.1. Pharmacokinetics of antiepileptic drugs
 - 1.9.2. Pharmacological interactions of antiepileptic drugs
 - 1.9.3. Combination treatment strategies
 - 1.9.4. Use of antiepileptic drugs in special populations
- 1.10. Emerging and developing therapies for Migraine treatment
 - 1.10.1. Therapies specifically targeting the pathophysiology of Migraine
 - 1.10.2. Monoclonal therapies directed against calcitonin gene-related peptide (CGRP) in Migraine
 - 1.10.3. PDE4 inhibitors as an emerging treatment for Migraine
 - 1.10.4. Use of monoclonal antibodies in the prophylactic treatment of Migraine

Module 2. Pharmacology of the Central Nervous System

- 2.1. Ischemic Strokes
 - 2.1.1. Advances in the early diagnosis of ischemic stroke
 - 2.1.2. Evaluation and classification of the risk of ischemic stroke in asymptomatic patients
 - 2.1.3. Thrombolytic treatment strategies in the acute phase of ischemic stroke
 - 2.1.4. Biomarkers in Ischemic Stroke

Structure and Content | 19 tech

- 2.2. Management of hypertension in acute ischemic stroke
 - 2.2.1. Current guidelines and protocols for the management of hypertension in acute ischemic stroke
 - 2.2.2. Pharmacologic treatment of hypertension in the acute phase of ischemic stroke
 - 2.2.3. Blood pressure control strategies in ischemic stroke with thrombolytic therapy
 - 2.2.4. Endovascular therapy and blood pressure control in acute ischemic stroke
- 2.3. Oropharyngeal angioedema due to Alteplase
 - 2.3.1. Risk factors for the development of oropharyngeal angioedema after Alteplase administration
 - 2.3.2. Clinical and differential diagnosis of oropharyngeal angioedema in patients treated with Aateplase
 - 2.3.3. Management and treatment of acute oropharyngeal angioedema by Alteplase
 - 2.3.4. Evaluation and follow-up of patients with a history of oropharyngeal angioedema prior to administration of Alteplase
- 2.4. Hemorrhagic stroke: intracerebral hemorrhage (ICH)
 - 2.4.1. Diagnosis and classification of intracerebral hemorrhage in hemorrhagic stroke
 - 2.4.2. Medical and pharmacological treatment of acute intracerebral hemorrhage
 - 2.4.3. Neurosurgical and endovascular management of intracerebral hemorrhage
 - 2.4.4. Multidisciplinary approach in the care of the patient with intracerebral hemorrhage
- 2.5. Cerebral edema
 - 2.5.1. Cytotoxic versus vasogenic cerebral edema
 - 2.5.2. Clinical evaluation and imaging of cerebral edema
 - 2.5.3. Pharmacological strategies for the reduction of cerebral edema in specific pathologies
 - 2.5.4. Effect of cerebral edema
- 2.6. Opioid overdose
 - 2.6.1. Pharmacokinetics and pharmacodynamics of opioids involved in overdose
 - 2.6.2. Role of the hospital pharmacist in opioid overdose prevention and education
 - 2.6.3. Management of opioid withdrawal in the hospital setting
 - 2.6.4. Naloxone and its use as an antidote in opioid overdose reversal

- 2.7. Opioid Withdrawal Syndrome
 - 2.7.1. Epidemiology and risk factors for the development of Opioid Withdrawal Syndrome
 - 2.7.2. Clinical evaluation and diagnosis of Opioid Withdrawal Syndrome in hospitalized patients
 - 2.7.3. Pharmacological management of Opioid Withdrawal Syndrome in the hospital setting
 - 2.7.4. Use of opioid agonist and antagonist drugs in the treatment of withdrawal syndrome
- 2.8. Agitated Patient Management
 - 2.8.1. Epidemiology and risk factors associated with agitation in hospitalized patients
 - 2.8.2. Pharmacotherapy for the management of acute agitation in inpatients
 - 2.8.3. Use of antipsychotics and benzodiazepines in the treatment of agitation
 - 2.8.4. Safety and prevention of complications in the management of the agitated patient
- 2.9. Acute pain management in the patient with substance abuse
 - 2.9.1. Pharmacological interactions between analgesics and substances of abuse
 - 2.9.2. Pharmacological strategies for acute pain management in patients with opioid abuse
 - 2.9.3. Acute pain Treatment in patient with Alcohol abuse
 - 2.9.4. Assessment and management of addiction risk in patients with substance abuse requiring analgesia
- 2.10. Alcohol Withdrawal Syndrome
 - 2.10.1. Clinical evaluation and diagnosis of Alcohol Withdrawal Syndrome in hospitalized patients
 - 2.10.2. Pharmacotherapy for the management of Alcohol Withdrawal Syndrome in the hospital setting
 - 2.10.3. Use of benzodiazepines and other drugs in the treatment of Alcohol Withdrawal Syndrome
 - 2.10.4. Role of the hospital pharmacist in the management of Alcohol Withdrawal Syndrome

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Module 3. Pharmacology of the surgical and polytraumatized patient

- 3.1. Triage
 - 3.1.1. Triage in emergency and disaster situations:
 - 3.1.2. Triage systems used in the hospital setting and their characteristics
 - 3.1.3. Role of the pharmacist in the triage process and emergency care
 - 3.1.4. Pharmaceutical triage protocols in different clinical scenarios
- 3.2. Resuscitation in the polytraumatized patient (PPT)
 - 3.2.1. Hospital pharmacy in the PPT resuscitation team
 - 3.2.2. Pharmacology of resuscitation: drugs and therapies used in PPT
 - 3.2.3. Fluid therapy in the polytraumatized patient: types of solutions and considerations
 - 3.2.4. Analgesia and sedation in the polytraumatized patient
- 3.3. Cranioencephalic Trauma (CET)
 - 3.3.1. Classification and Severity of CET
 - 3.3.2. Pain management and sedation in patients with CET
 - 3.3.3. Treatment of Intracranial Hypertension
 - 3.3.4. Use of neuroprotective agents in CET
- 3.4. Reversal of anticoagulants
 - 3.4.1. Importance of anticoagulant reversal in specific clinical situations
 - 3.4.2. Risk-benefit assessment in anticoagulant reversal
 - 3.4.3. Reversal of unfractionated heparin (UFH) and low-molecular-weight heparin (LMWH)
 - 3.4.4. Antidotes and reversal agents for direct oral anticoagulants (OACDs)
- 3.5. Acute Pain Management
 - 3.5.1. Classification and scales for the evaluation of acute pain
 - 3.5.2. Principles and guidelines of pharmacological management of acute pain
 - 3.5.3. Multimodal Analgesia
 - 3.5.4. Intravenous, oral and transdermal analgesia
- 3.6. Spinal shock
 - 3.6.1. Evaluation and classification of spinal shock
 - 3.6.2. Medications to stabilize blood pressure in spinal cord shock
 - 3.6.3. Pain Management in Patients with Spinal shock
 - 3.6.4. Neuroprotective agents in spinal shock





Structure and Content | 21 tech

- 3.7. Hypovolemic Shock
 - 3.7.1. Evaluation and classification of Hypovolemic Shock shock
 - 3.7.2. Fluid therapy and volume replacement in hypovolemic shock
 - 3.7.3. Types of solutions and electrolytes used in volume replacement
 - 3.7.4. Use of vasoactive agents in the management of hypovolemic shock
- 3.8. Penetrating Trauma
 - 3.8.1. Evaluation and classification of patients with penetrating trauma
 - 3.8.2. Initial management and pharmacological stabilization of the trauma patient
 - 3.8.3. Use of hemostatic agents and pharmacologic hemostasis
 - 3.8.4. Antibiotherapy in penetrating trauma patients
- 3.9. Open Fractures
 - 3.9.1. Initial evaluation and emergency management of patients with open fractures
 - 3.9.2. Use of analgesia and sedation in patients with open fractures
 - 3.9.3. Adjuvant therapies in the acceleration of bone healing
 - 3.9.4. Use of analgesics and anti-inflammatory drugs in the management of pain in open fractures
- 3.10. Moderate sedation
 - 3.10.1. Indications and contraindications of moderate sedation
 - 3.10.2. Evaluation and selection of the appropriate level of sedation for each patient
 - 3.10.3. Management of anxiety and pain in procedures with moderate sedation
 - 3.10.4. Monitoring and patient safety during moderate sedation

Get an effective update on pain management and sedation in CTE patients with the highest quality multimedia content"

05 **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.

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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"

tech 24 | Methodology

At TECH we use the Case Method

What should a professional do in a given situation? Throughout the program, students will be confronted with multiple simulated clinical cases based on real patients, in which they will have to investigate, establish hypotheses and ultimately, resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Pharmacists learn better, more quickly 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.

 Patient
 Optimal decision

 Patient
 Clinical

 Data
 Data

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, attempting to recreate the actual conditions in a pharmacist's professional practice.

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

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

- 1. Pharmacists who follow this method not only grasp concepts, but also develop their mental capacity, by evaluating real situations and applying their 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.
- 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.



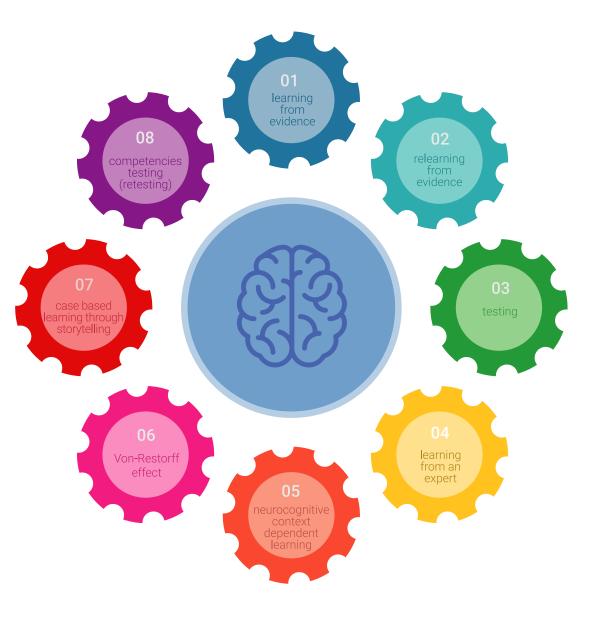
tech 26 | Methodology

Relearning Methodology

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

Our 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, which represent a real revolution with respect to simply studying and analyzing cases.

Pharmacists 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.



Methodology | 27 tech

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

With this methodology, more than 115,000 pharmacists have been trained with unprecedented success in all clinical specialties, regardless of the surgical load. This pedagogical methodology is developed in a highly demanding environment, with a university student body with a high socioeconomic profile and an average age of 43.5 years.

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 28 | Methodology

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



Study Material

All teaching material is created specifically for the course by specialist pharmacists who will be teaching the course, so that the didactic development is highly specific and accurate.

20%

15%

3%

15%

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.



Video Techniques and Procedures

TECH introduces students to the latest techniques, to the latest educational advances, to the forefront of current pharmaceutical care procedures. All of this, first hand, and explained and detailed with precision to contribute to assimilation and a better 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 unique multimedia content presentation training system 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, we will present you with real case developments in which the expert will guide you through focusing on and solving the different situations: a clear and direct way to achieve the highest degree of understanding.

20%

7%

3%

17%



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.



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.

06 **Certificate**

The Postgraduate Diploma in Advanced Neuropharmacology guarantees students, in addition to the most rigorous and up-to-date education, access to a Postgraduate Diploma issued by TECH Technological University.



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

tech 32 | Certificate

This **Postgraduate Diploma in Advanced Neuropharmacology** contains the most complete and up-to-date scientific program on the market.

After the student has passed the assessments, they will receive their corresponding **Postgraduate Diploma** issued by **TECH Technological University** via tracked delivery*.

The certificate issued by **TECH Technological University** will reflect the qualification obtained in the Postgraduate Diploma, and meets the requirements commonly demanded by labor exchanges, competitive examinations, and professional career evaluation committees.

Title: Postgraduate Diploma in Advanced Neuropharmacology Official N° of Hours: **450 h.**



technological university Postgraduate Diploma Advanced Neuropharmacology » Modality: online » Duration: 6 months » Certificate: TECH Technological University » Dedication: 16h/week » Schedule: at your own pace » Exams: online

Postgraduate Diploma Advanced Neuropharmacology



Prescription Medication

03.08.10

DR MARK JONES

EXD. 04.25.11

WORECTED BY A Dr