



Advanced Master's Degree Anesthesia and Surgery in Small Animals

» Modality: online

» Duration: 2 years

» Certificate: TECH Technological University

» Dedication: 16h/week

» Schedule: at your own pace

» Exams: online

Website: www.techtitute.com/in/veterinary-medicine/advanced-master-degree/advanced-master-degree-anesthesia-surgery-small-animals

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The goal of this complete Advanced Master's Degree is to know all the aspects of Anesthesia and Surgery in Small Animals, which we now present to you. With a wide methodological development, throughout this specialization, you will be able to learn each and every one of the fundamental points in this area of work.

In this sense, the Advanced Master's Degree will prepare you in everything concerning the phases prior to the application of anesthesia on the patient: knowledge of the equipment, previous management of the patient, drugs and study of drug interactions.

The study of the physiology most closely related to anesthesia, focusing on the involvement of the cardiocirculatory, respiratory, nervous system and endocrine systems, is essential to understand the functioning and consequences on the patient of the application of anesthesia.

However, the success of an anesthetic procedure goes far beyond the administration of the appropriate drugs. It is imperative to master the pre-anesthetic assessment, induction, maintenance and education of the process in order to achieve its success and a return to normality without after-effects. Fluid therapy, and even transfusion, must also be taken into account and, therefore, become the subject of study in our comprehensive Advanced Master's Degree in Anesthesia and Surgery in Small Animals.

The anesthesiologist must also take care of pain management. A basic vital sign that, if not adequately controlled, can be one of the main causes of delayed discharge and perioperative complications. Acquiring competence in this part of care is another of our major objectives.

Monitoring, anesthetic complications, management of anesthesia under special conditions and the application of balanced anesthesia and multimodal anesthesia protocols will complete the more extensive review. But the purpose of an anesthetic is usually to allow surgical intervention. For this reason, this Advanced Master's Degree also deals comprehensively with the techniques and new developments in this area.

We will review the new surgical materials available and the advances in infection treatment. In addition, we will learn everything we need to know about wound healing. In this unit, the ways of performing the cures and their progress will be part of the agenda.

This Advanced Master's Degree in Anesthesia and Surgery in Small Animals, contains the most comprehensive and up-to-date academic course on the university scene. The most important features include:

- Latest technology in online teaching software
- A highly visual teaching system, supported by graphic and schematic contents that are easy to assimilate and understand
- Practical cases presented by practising experts
- State-of-the-art interactive video systems.
- Teaching supported by practising remotely
- Continuous updating and recycling systems
- * Autonomous learning: full compatibility with other occupations
- Practical exercises for self-evaluation and learning verification
- Support groups and educational synergies: questions to the expert, debate and knowledge forums.
- Communication with the teacher and individual reflection work
- Content that is accessible from any, fixed or portable device, with an Internet connection
- Supplementary documentation databases are permanently available, even after the program



A complete refresher in Anesthesia and Surgery in Small Animals with this highly effective educational Advanced Master's Degree, which opens new paths to your professional advancement"



This exceptional specialization is the answer to the veterinary professionals' need for updating and specialization. A process that you will finish with the solvency of a high-level professional"

Our teaching staff is made up of professionals from different fields related to this specialty. In this way we make sure to offer you the objective of educational updating from all related sectors, with the direct and experienced vision of experts. A multidisciplinary team of doctors with training and experience in different environments, who will develop the theoretical knowledge in an efficient way, but above all, they will bring their practical knowledge from their own experience to the course: one of the differential qualities of this specialization.

This mastery of the subject is complemented by the effectiveness of the methodological design of this Advanced Master's Degree in Anesthesia and Surgery in Small Animals Developed by a multidisciplinary team of *e-learning* experts, it integrates the latest advances in educational technology. This way, you will be able to study with a range of easy-to-use and versatile multimedia tools that, will give you the necessary skills you need for your specialization. A new way of learning that transcends physical and temporal barriers, opening the doors to the highest qualification, regardless of place or time.

With a methodological design based on proven teaching techniques, this Advanced Master's Degree will take you through different teaching approaches to allow you to learn in a dynamic and effective way.

Our innovative remote practise concept will give you the opportunity to learn through an immersive experience, which will provide you with a faster integration and a much more realistic view of the contents: "Learning from an expert"







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General Objectives

Anesthesiology Area

- Know and understand the main mechanical parts of the anesthesia machine and the importance of the previous management of the patient, in terms of drugs and feeding.
- Know the most important physiological characteristics of the different organ systems and their relationship and modifications that occur during anesthesia.
- Know the general characteristics of pharmacology and the specific characteristics of the main anesthetic drugs used.
- Use of tables for the preparation of anesthetic or anesthesia-related drug combinations
- Know the characteristics of each anesthetic time and the control points to take into account in order to increase patient safety
- Know the specific needs in terms of fluid therapy and transfusion medicine related to the perioperative period.
- Understanding and knowledge of nociceptive and pain physiology, both acute and chronic
- Acquire a logical understanding of the physiological implications of untreated pain
- In-depth knowledge of the different analgesics and their indications
- Know how to assess both acute and chronic pain
- Understand the basics of locoregional anesthesia and analgesia
- Understand the main differences and indications of different drugs
- Understand the different blockages t be performed and the areas affected by them
- Understand the monitoring of the anesthetized patient, from the most basic to the most complicated such as nociception and hypnosis monitoring
- Understand the limitations and the most appropriate monitoring in each patient and in each specific case
- Detect, prevent and treat the main complications during the perioperative period

- Anesthetic management of the patient under specific pathological situations or with specific physiological alterations that will mark a different anesthetic management
- Establish and understand the differences in management of specific anesthetic situations and determine mechanisms to anticipate potential problems that may arise during patient management
- Implement all the topics learned in the management of concrete situations, understanding the protocol used, monitoring, detection of complications and their solution

Surgery Area

- Establish a basis for aseptic compression sterility maintenance
- Highlight the importance of the perioperative care given to the surgical patient
- Define the basic surgical principles to take into account before we perform surgery
- Propose alternatives to deal with surgical complications that appear in daily clinical practice
- Develop knowledge of the techniques used to deal with wounds, establishing guidelines according to clinical characteristics.
- Offer a clear and global vision of the healing process, the factors that promote it and those that hinder it
- Analyze how a decision is made to close a wound in one way or another, establish what complications there may be and how to prevent or solve them
- Compile a list of the available flap techniques
- Implement the most advanced general surgical knowledge to minimise postoperative complications
- Integrate the student's knowledge which will allow them to gain confidence and a sense of security in the interventions developed in this module



- Evaluate the most frequent complications and ensure the student acquires the knowledge to be able to confidently and successfully resolve them
- Present the pathophysiology and treatment of urinary obstruction and trauma
- Make a detailed report of the problems commonly caused by surgical treatment which can affect the genitourinary system
- Present the most advanced and innovative techniques for dealing with patients with genitourinary disease
- Provide the student with theoretical resources and graphic material to help them develop the necessary skills to successfully treat these cases
- Establish the basic principles of oncology surgery to ensure the correct care is given to the patient
- Define each surgical treatment according to the type of tumor we are faced with
- Identify each skin tumor to know its behavior in the tissue and the area in which it is located
- Propose the optimal surgical margins that are appropriate for each type of tumor
- Examine the main surgically treatable diseases affecting the liver and spleen
- Establish the main endocrine principles that affect small animals
- Identify the main key points in the diagnosis and treatment of different illnesses
- Provide the student with the necessary knowledge to implement different surgical techniques and minimize surgical and postoperative complications
- Implement knowledge to be able to decide which is the best treatment in each case
- Present the main surgically treatable diseases which affect the head and neck as well as diseases of the oral and nasal cavity, the ears, the salivary glands, the larynx and trachea

- Integrate the student's knowledge which will allow them to gain confidence and a sense of security in the interventions
- Evaluate the most frequent complications and ensure the student acquires the knowledge to be able to confidently and successfully resolve them
- Examine the main minimally invasive techniques such as laparoscopy and thoracoscopy.
- Define the advantages and disadvantages of minimally invasive techniques
- Analyze interventional radiology, as well as the main techniques that are being performed with this type of approach
- Define the main equipment and instruments necessary to perform laparoscopies and thoracoscopy

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Specific Objectives

Anesthesiology Area

- Know the origins of the specialty in human medicine and its incorporation into the veterinary field
- Know the guidelines and importance of perioperative management of feeding of the surgical patient and fasting of solids and liquids
- Know and understand the operation of anesthetic machines and mechanical ventilators
- Know and understand the ventilatory, cardiovascular, digestive, renal, endocrine, nervous (both central and peripheral) physiology and their age-related modifications
- Know and understand the general pharmacological processes and those directly related to each of the pharmacological families related to anesthesia (sedatives, analgesics, inducers, neuromuscular relaxants)
- Practical knowledge of the different phases of anesthesia, from the preoperative assessment to the awakening of the patient, and the main postoperative care
- Know the characteristics of premedication, induction, maintenance and education, in order to minimize anesthetic risks as much as possible
- Understand in a practical way the differences during the maintenance phase in the case of inhalation and intravenous anesthesia
- Know the characteristics and indications of perioperative fluid therapy and the administration of blood products
- Understand the different nociceptive pathways and the phenomena of central and peripheral sensitization
- Understand the action of each family of analgesics and their use in both acute and chronic pain
- Know the importance and the different methods of acute and chronic pain assessment

- Understand the basics of locoregional anesthesia and analgesia with the different technical methods used
- Know the main complications associated with locoregional techniques and their treatment.
- Understand basic pharmacology of local anesthetics and their adjuvants
- Understand the different Blockages to be performed on the head, trunk and limbs
- Inclusion of locoregional techniques explained in specific clinical cases, within multimodal analgesia protocols
- Understand in detail how to make the most of basic patient monitoring based on examination, observation and palpation
- Understand the most important parameters to monitor from a cardiovascular, ventilatory and neurological point of view
- Understand and assess the different methods of monitoring the patient's blood volume
- Assist in the detection, prevention and treatment of complications related to perioperative management (regurgitation, hypothermia)
- Assist in the detection, prevention and treatment of cardiovascular, neurological and ventilatory complications associated with anesthesia
- Assist in the detection and treatment of cardiorespiratory arrest and patient management after resuscitation
- Establish and understand the differences in management of specific anesthetic situations, and determine mechanisms to anticipate potential problems that may arise during patient management





- Establish and understand the differences in the management of specific anesthetic situations and determine the mechanisms to anticipate possible problems that may arise during the management of patients with respiratory or ophthalmologic pathologies, for minimally invasive procedures, with alterations in body condition, extreme body size, brachiocephalic, with thoracic pathology, oncologic or pregnant patients
- See in a practical way the use of different protocols, anesthetic and monitoring techniques applied to specific situations
- Assess the most appropriate protocol for each patient and understand the absence of predetermined protocols, as individualization is necessary for each procedure and each case

Surgery Area

- Refine the rules of conduct for a surgeon
- Explain the correct use of tissue synthesis materials
- Develop knowledge of the surgical equipment available and promote its correct use
- Refine the surgical technique to minimize tissue damage
- Propose new hemostasis techniques
- Identify and successfully treat surgical site infections
- Understand the types of wounds there are, not only from an etiopathogenesis point of view, but also from a microbiological point of view
- Develop an understanding of the criteria involved in making decisions about the medical and surgical treatment of wounds
- · Specify the local and systemic factors affecting healing
- Understand what laser therapy consists of, which parameters are important, their indications and their contraindications

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- Gain an in-depth understanding of how to manage of the subdermal plexus with the use of local options they provide.
- Propose techniques specially adapted to each different zone on the body, from the head to interdigital areas.
- Specify how axial plexus flaps are designed and implemented in each area
- Explain grafting and the importance of correct patient selection and postoperative management
- Examine the anatomy of the affected area and provide the student with the specialized knowledge to safely and appropriately perform the surgical procedures on the gastrointestinal tract.
- Compile all the latest material and develop it in a clear way so that the student can get the most out of it
- Develop understanding of the most common surgical techniques in the gastrointestinal tract
- Propose diagnostic and therapeutic plans for the different diseases that affect the gastrointestinal tract
- Examine the unique tools used for the diagnosis of gastrointestinal tract diseases
- Explain in detail the different diseases that can occur in each zone and how to treat them
- Develop specialized knowledge so that the student can perfect their clinical practice in the diagnosis and management of gastrointestinal tract diseases
- Examine the most important anatomical considerations in the surgical treatment of genitourinary disease
- Consolidate knowledge of how certain surgical principles are applied in the treatment of urinary tracts



- Develop knowledge of the problems that occur when urine cannot be excreted from the patient's body.
- Establish clear recommendations for the imaging techniques to choose to diagnose each disease
- Develop a detailed understanding of relevant surgical techniques
- Identify the most common complications in each surgical technique and how to prevent or solve them
- Propose protocols for making decisions in breast oncology
- Demonstrate the importance of peri-operative care of the patients with breast tumors.
- Define the differences between curative, cytoreductive or palliative interventions
- Analyze each patient to understand the optimal treatment for them
- Develop an action protocol for cutaneous tumors, including correct prior diagnosis and staging
- Establish correct surgical management techniques and margins to deal with soft tissue sarcomas
- Establish correct surgical management techniques and margins to deal with mastocytomas
- Establish correct surgical management techniques and margins to deal with cutaneous and subcutaneous tumors relevant to pet animal medicine
- Analyze the liver anatomy and the principal surgical techniques and complications in the most common liver diseases affecting small animals
- Analyze the spleen anatomy, main surgical techniques and complications in the main splenic diseases affecting small animals. Specifically, an action protocol for dealing with a splenic mass will be developed.

- Establish diagnostic and therapeutic plans for the different diseases that affect the liver and the spleen, based on evidence and with the aim of tailoring it to each individual patient and their owner
- Develop the most appropriate techniques and therapeutic plans to treat the most common diseases which affect the thyroid glands, such as thyroid tumors and hyperthyroidism in cats
- Develop the most appropriate techniques and therapeutic plans to treat the most common diseases which affect the adrenal gland, such as adrenal tumors.
- Develop the most appropriate techniques and therapeutic plans to treat the most common diseases which affect the endocrine pancreas, such as pancreatic tumors.
- Establish diagnostic and therapeutic plans for the different endocrine diseases, based on evidence and with the aim of tailoring it to each individual patient and their owner
- Revise the anatomy of the oral cavity, nasal cavity, ear, trachea and larynx, so that the student has the knowledge to adequately and safely perform surgical procedures.
- Develop understanding of the main conditions of the oral cavity such as oral and labial tumors in the context of diagnosis, therapeutic approach, surgical techniques, complications and prognosis
- Develop understanding of the main ear problems such as otohematomas, tumors of the external auditory pavilion and external auditory canal, chronic recurrent otitis and nasopharyngeal polyps. This will be in the context of diagnosis, the therapeutic approach, surgical techniques, complications and prognosis
- Develop understanding of the main conditions of the pharynx such as laryngeal paralysis in the context of diagnosis, therapeutic approach, surgical techniques, complications and prognosis
- Develop understanding of the main conditions of the salivary glands such as sialoceles in the context of diagnosis, therapeutic approach, surgical techniques, complications and prognosis

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- Compile all the scientific literature on the subject to create a diagnostic and therapeutic protocol, with the most innovative techniques for the treatment of tracheal collapse
- Compile all the scientific literature on the subject to create a diagnostic and therapeutic protocol, with the most innovative techniques for the treatment of brachycephalic syndrome.
- Define other less frequent diseases which affect the head and neck of small animals, such as nasopharyngeal stenosis, tracheal and laryngeal tumors and cricopharyngeal achalasia.
- Establish different diagnostic and therapeutic techniques for the different head and neck diseases
- Generate up-to-date material, based on evidence from different surgical techniques of the oral cavity, nasal cavity, ears, trachea and larynx
- Provide knowledge of the anatomy to establish the basis for an appropriate surgical technique for procedures in the thoracic cavity
- Present the specific material needed to perform surgical interventions in this area
- Develop knowledge of the most advanced techniques, least common in daily practice due to their complexity, to make them easier to understand and more practical for the student
- Compile up-to-date information on the best surgical techniques for treating thoracic structures.
- Propose diagnostic and therapeutic plans for the different diseases that affect the thoracic cavity
- Examine the unique tools used for the diagnosis of thoracic cavity diseases

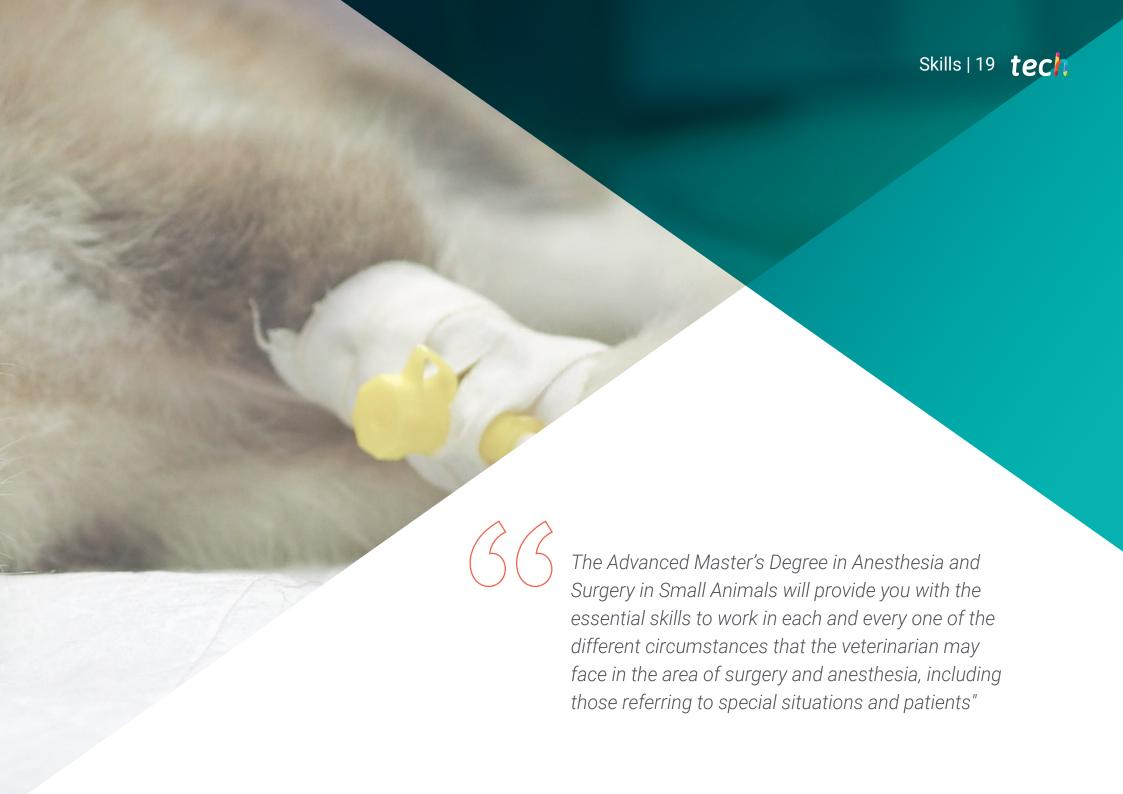
- Teach the student how to identify and resolve the most common complications that could occur during thoracic cavity surgery
- Present the most common indications for the amputation of the pelvic limb, thoracic, caudectomy and phalanges
- Compile the different surgical techniques for performing amputations in small animals as a resolution technique for tumors of the pelvic region, including hemipelvectomy
- Revise the preoperative indications, patient selection, post-operative care and complications that could arise when performing amputations in small animals
- Present the most appropriate techniques and therapeutic plans for resolving the different umbilical, inguinal, scrotal and traumatic hernias
- Revise the different techniques for the resolution of a perineal hernia as well as
 establishing an appropriate therapeutic protocol for treating this condition
- Develop knowledge of a diaphragmatic hernia in the context of the indication for surgery, diagnosis and most effective techniques for its resolution
- Develop knowledge of a peritoneopericardial diaphragmatic hernia in the context of the indication for surgery, diagnosis and most effective techniques for its resolution
- Identify the main equipment and instruments necessary to perform laparoscopies and thoracoscopies.
- Develop knowledge of the main techniques used in a laparoscopy of small animals such as ovarioectomy, cryptorchidism, preventive gastropexy and liver biopsy
- Define other, less-common techniques of laparoscopic approach such as assisted La cystoscopy, digestive examination, cholecystectomy and biopsy of different organs of the abdominal cavity



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- Develop knowledge of the main techniques used in thoracoscopic surgery in small animals such as pericardiectomy and establish the most appropriate protocol to follow in each case
- Identify other, less common techniques of the thoracoscopic approach in small animals such as pulmonary biopsies, pulmonary lobectomy, chylothorax resolution technique and vascular rings
- Identify the main equipment and instruments needed to perform interventional radiology
- Define the main techniques with which interventional radiology is performed





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General Skills

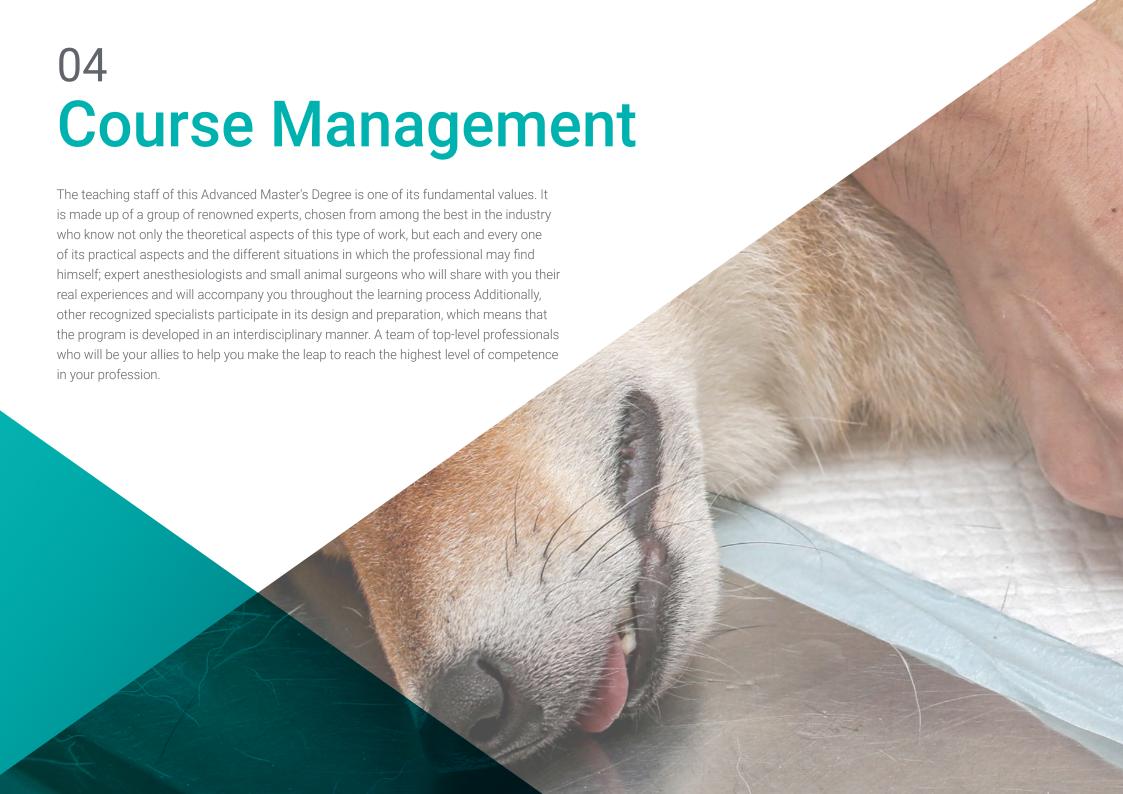
- Acquire the necessary knowledge to be able to carry out a previous anesthetic approach
- Elaborate a specific anesthesia plan for each case
- Know and know how to use the necessary tools effectively
- Know and know how to implement existing protocols
- Know and know how to develop preoperative
- Know and know how to develop operative and postoperative management.
- Know and know how to develop postoperative management
- Master all aspects of anesthetic care for each patient individually
- Be able to create concrete plans in different specific situations: diseases, intolerances, critical states, etc
- Correctly perform surgical procedures
- Deal with surgical and postoperative complications
- Perform appropriate diagnoses according to the type of disease that the animal has
- Use the correct specific surgical material in each case
- Treat the various wounds they could find when examining an animal
- Use the most appropriate instruments for each intervention

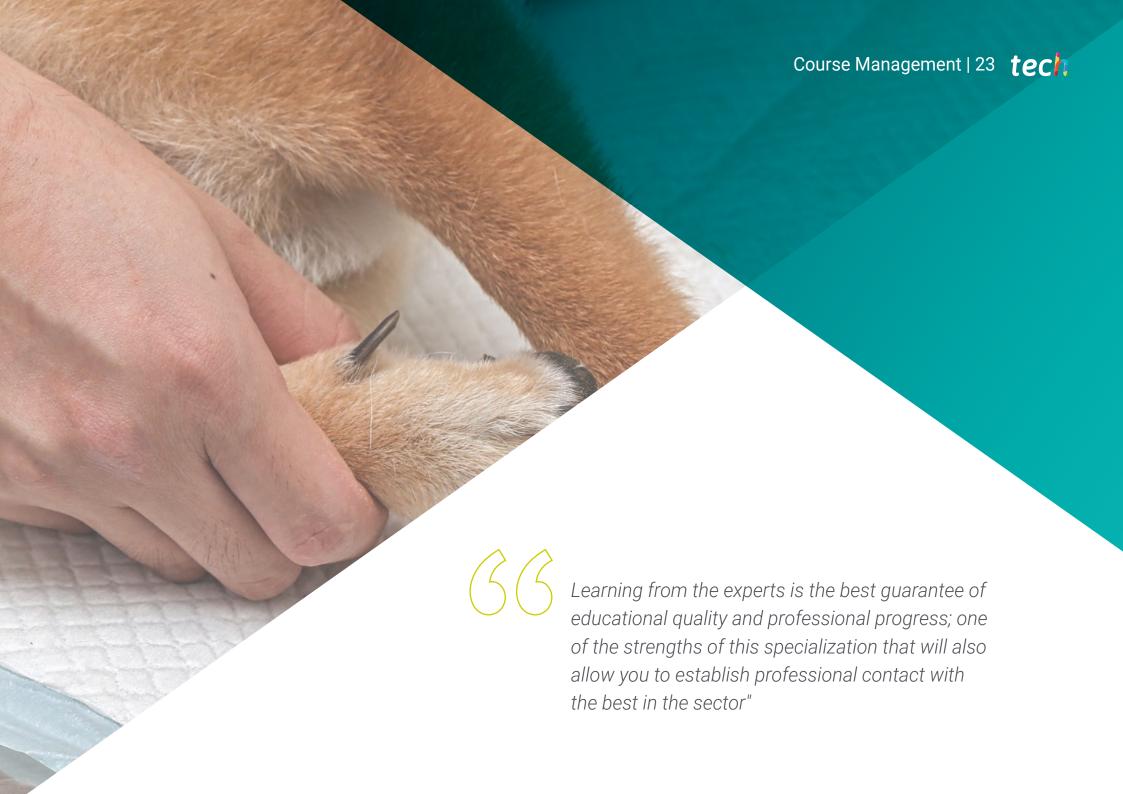




- Use of new anesthetic equipment available on the market
- Include new drugs in anesthesia
- Know what the advances in anesthetic pharmacology are
- Master all physiological aspects in different patients to determine the appropriate anesthetic technique
- Perform a safe and adequate anesthetic assessment
- Recognize the possible and pertinent anesthetic times in each case
- Working with pain from the knowledge of pain physiology
- Use analgesia efficiently
- Recognize cases of locoregional anesthesia application
- Apply the latest locoregional anesthesia techniques successfully, reducing side effects
- Use the most effective monitoring technique
- Correctly interpret the parameters of the monitoring elements
- Use anesthetic techniques knowing the complications of each one of them
- Minimize the risk of these complications and manage them in a therapeutic manner
- Use specific anesthetic techniques and drugs for different types of patients by age, race, size, etc
- Recognize the most appropriate anesthetics for each pathology
- Apply anesthesia to patients with specific pathologies
- Safe anesthesia for different types of interventions
- Understand the most appropriate surgical material for tissue damage and perform this type of surgery
- Treat surgical infections

- Understand the healing process of wounds and the best way to proceed with the treatment
- Perform laser therapy
- Perform skin graft procedures.
- Correctly resolve surgical pathologies that affect the gastrointestinal tract
- Solve a multitude of cases of the gastrointestinal system in a comprehensive manner
- Deal with genitourinary pathologies
- Perform surgical processes that affect the urinary tract
- Solve complications in this area
- Diagnose and treat skin tumors
- Surgical manage soft tissue sarcomas, mastocytomas or cutaneous and subcutaneous tumors, among others
- Diagnose diseases which affect the liver, spleen, thyroid glands, adrenal gland, pancreas or endocrine system
- Choose the most appropriate treatments in each case
- Recognise the main diseases which affect the head and neck
- Diagnose and treat said diseases
- Use the most appropriate material in each of the interventions
- Use the most advanced techniques in interventions related to the thoracic cavity
- Solve the most common complications that occur in thoracic cavity surgery
- Use the most appropriate techniques and therapeutic plans for resolving the different umbilical, inguinal, scrotal and traumatic hernias
- Use the most appropriate laparoscopic techniques for small animals
- Understand interventional radiology, its main uses and how to apply it in practice





International Guest Director

Dr. Wendy Baltzer is a leading figure in the international veterinary community. Her passion and extensive experience in Veterinary Medicine have led her to become involved in the field of research in Small Animal Veterinary Surgery. In this way, she has multiple publications in academic and scientific media, most of them very well positioned, reflecting an index H 20 in Google Scholar.

Likewise, in her studies reflected in publications she defends the use of ultrasound and radiographs to predict the time of delivery in small animals, thereby reducing the likelihood of neonatal morbidity and mortality. In addition, she associates a decrease in pup vitality with the use of thiobarbiturates, ketamine and inhalation anesthetics.

Similarly, her work also focuses on the effects of oxidative stress on agility exercise in dogs, ligament and tendon injuries, improved impulse fracture repair, as well as injuries in working, sport, police and military dogs. She has also devoted much of her studies to **osteoarthritis**, low back pain, taping techniques and omentum grafting for bone healing.

She has taught at major academic institutions such as the School of Veterinary Science at Massey University, as well as Oregon State University. In the latter, she held a position of high responsibility, occupying the position of director of its Rehabilitation Center. Likewise, her work at Sydeny University focuses on teaching the clinical practice of Small Animal Surgery, while continuing to develop her research in the fields of Surgery, Sports Medicine and Rehabilitation.



Dr. Baltzer, Wendy

- Head of Veterinary Surgery at the University of Sydney
- Director of the Rehabilitation Center at the University of Oregon
- Associate Professor in the School of Veterinary Science at the University of Sydney
- Ph.D. in Veterinary Physiology, Texas A&M University
- Specialist in Small Animal Surgery at Texas A&M University



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Management



Dr. Jiménez Cidre, Miguel Ángel

- Degree in veterinary medicine from the Complutense University of Madrid Two-year internship at the Anesthesia Service of the Hospital Clínico Veterinario de la UCM
- Accredited by AVEPA in the Specialty of Anesthesia and Analgesia
- Head of the Anesthesia-Reanimation Service and Pain Unit at Hospital Veterinario Puchol
- Founding member of the Spanish Society of Veterinary Anesthesia and Analgesia (SEAAV) Member of the European Association of Veterinary Anesthesia (AVA), International Association for the Study of Pain (IASP) and the International Veterinary Academy of Pain Management (IVAPM)
- · Speaker in several Anesthesia and Analgesia courses and national and international congresses
- Author of the books "Practical Pain Management in Small Animals" and "Role of NSAIDs in Chronic Pain"
- Co-author of the "Clinical Manual of Pharmacology and "Complications in Small Animal Anesthesia"; as well as author of specific chapters in other books



Dr. Soto Martín, María

- Degree in veterinary medicine from the Complutense University of Madrid in 2009, with preferential dedication to anesthesia since 2010 and sole dedication since 2012
- Member of the Spanish Society of Veterinary Anesthesia and Analgesia, with frequent participation in its annual congresses, one of which earned her the award for best oral communication
- Member of the Anesthesia group of AVEPA, having also participated on several occasions with scientific content in its annual congress
- She provided specific small animal anesthesia training throughout his career in the form of lectures, webinars, hands-on workshops and clinic-based training
- She also collaborated in books and scientific articles, published nationally and internationally

Co-Direction



Dr. Ortiz Díez, Gustavo

- PhD and Undergraduate Degree in Veterinary Medicine from the UCM
- Master's Degree in Research Methodology in Health Sciences from the UAB
- Specialist in Traumatology and Orthopedic Surgery in Companion Animals by the UCM Degree in Cardiology of Small Animals by the UCM
- Member of the scientific committee and current president of GECIRA (AVEPA's Soft Tissue Surgery Specialty Group)
- Associate Professor, Department of Animal Medicine and Surgery, Faculty of Veterinary Medicine, Complutense University of Madrid.
- Head of Small Animal Unit at Complutense Clinical Veterinary Hospital.

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Professors

Dr. García Fernández, Paloma

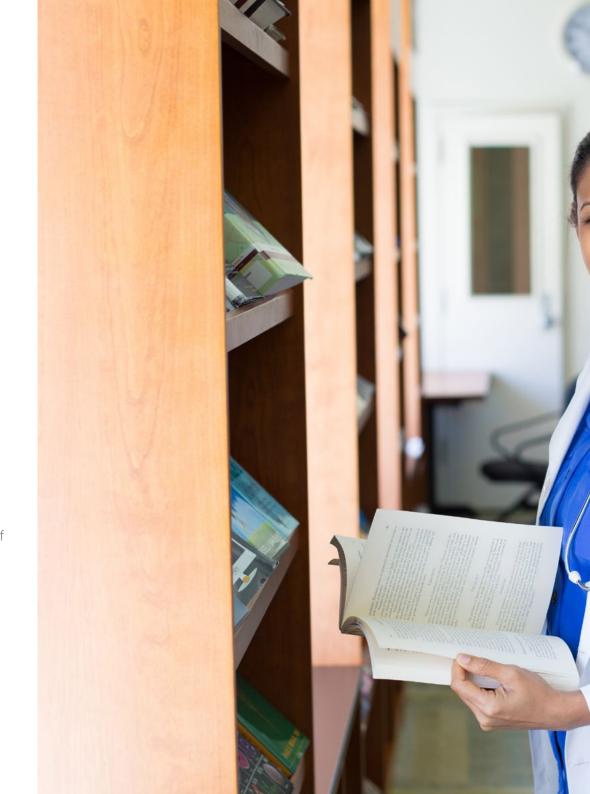
- PhD in Veterinary Medicine from the UCM
- Degree in Veterinary Medicine from Madrid's Veterinary University
- Professor of Surgery and Anesthesia, Dept. of Animal Medicine and Surgery, Veterinary Faculty HCVC-UCM
- Head of Small Animal Unit at Complutense Clinical Veterinary Hospital

Dr. Suárez Redondo, María

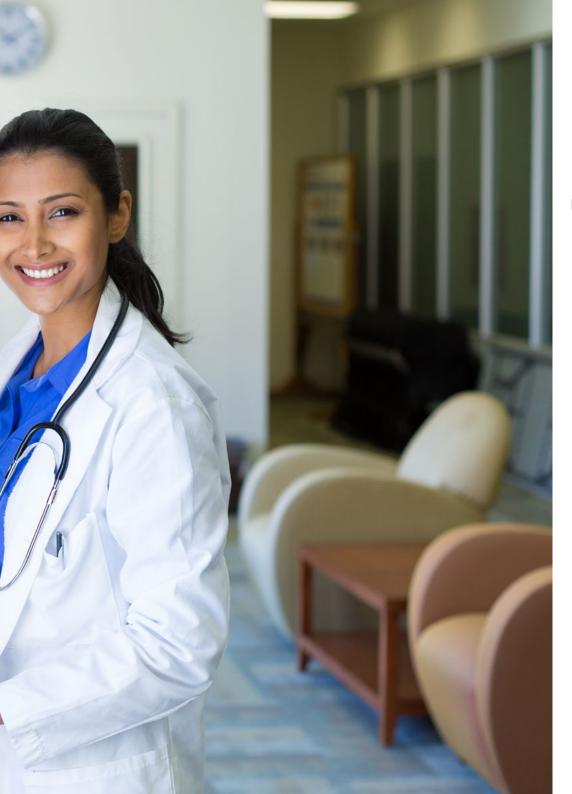
- PhD from the Complutense University of Madrid (UCM) in 2008
- Degree in Veterinary Medicine from the University of León 2003
- Master's Degree in Traumatology and Orthopedic Surgery of the UCM
- Small Animal Surgeon at the Veterinary Clinic Hospital at UCM

Dr. Carrillo Sánchez, Juana Dolores

- PhD from the University of Murcia (2015)
- Degree in Veterinary Medicine from the University of Murcia (2002)
- Specialist in Endoscopy and Minimally Invasive Small Animal Surgery at the University of Extremadura(2019)
- Head of Surgery and Traumatology Service at the Clinical Veterinary Hospital of the University of Murcia (Since 2014)







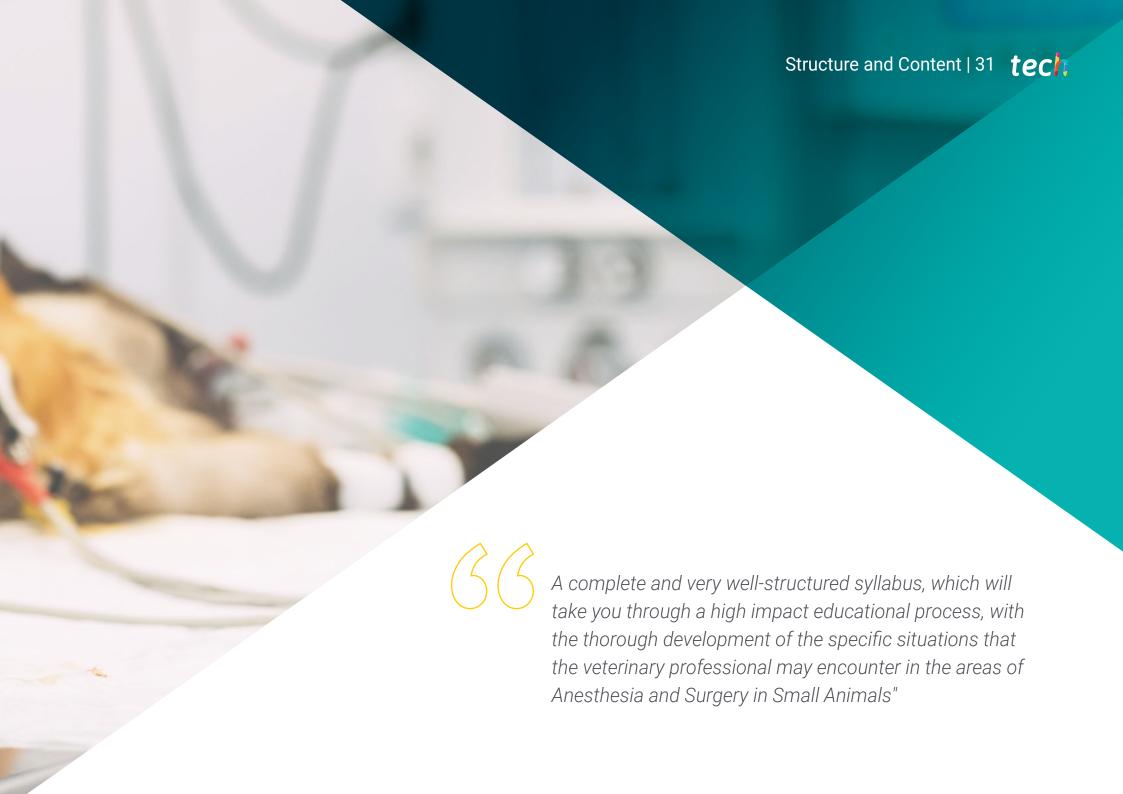
Dr. López Gallifa, Raúl

- PhD from University of Alfonso X el Sabio in 2017
- Degree in Veterinary Medicine from the University of Alfonso X el Sabio 2012
- Internship Master's Degree (2012-2013)
- Master in Soft Tissue Surgery and Traumatology at the Hospital Clínico Veterinario UAX (2013-2016)
- Attending the AVEPA accreditation course in soft tissue surgery since 2017
- Outpatient surgeon and surgical consultant in various clinics in the Community of Madrid



The objectives of this broad specialization will become stepping stones that will take your professional skills to the highest levels of competence. An unparalleled journey in today's online teaching market"





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Anesthesiology Area

Module 1. Introduction. Anaesthetic Equipment

- 1.1. Brief History of Anesthesia
 - 1.1.1 Important Facts About Human Anesthesiology
 - 1.1.2 Relevant Historic Facts in Veterinary Anesthesiology
- 1.2. Optimization of the Surgical Patient. Pre-operative Fasting
 - 1.2.1 Importance of Liquid Fasting
 - 1.2.2 Solid Fasting, Why and How Much?
- 1.3. Peri-operative Drugs
 - 1.3.1 Precautions in the Polymedicated Patient. General Aspects
 - 1.3.2 Medication Guidelines for Patients with Cardiac Medication
 - 1.3.3 Medication Guidelines in Diabetic Patients
 - 1.3.4 Medication Guidelines for Patient with Epilepsy
 - 1.3.5 Other Chronic Medications
- 1.4. Anesthetic Machines and Systems
 - 1.4.1 General Aspects
 - 1.4.2 Technical Description and Equipment Care
 - 1.4.3 Anaesthetic Circuits
 - 1.4.3.1. No Reinhalation
 - 1.4.3.2. With Reinhalation
- 1.5. Mechanical Ventilators
 - 1.5.1 Introduction
 - 1.5.2. Types of Ventilators
- 1.6. Systems of Administrating Drugs
 - 1.6.1 Systems of Administrating Inhalants
 - 1.6.2 Basic Systems
 - 1.6.3 Volumetric Infusion Pumps
 - 1.6.4 Perfusers
- 1.7. Patient Classification Systems
 - 1.7.1 Introduction
 - 1.7.2. Conduction Heating Systems
 - 1.7.3 Heating Systems with Hot Air

- 1.8. Miscellaneous (Endotracheal Tubes and Other Intubation Systems, Laryngoscope)
 - 1.8.1 Endotracheal Tubes
 - 1.8.2 Supraglottic Devices
 - 1.8.3 Laryngoscopy
- 1.9. Clinical Safety
- 1.10. Contributions of Current Anesthesiology to Veterinary Medicine and Client Expectations

Module 2. Physiology and Pharmacology Related to Anesthesia

- 2.1. Ventilatory Physiology
 - 2.1.1 Introduction
 - 2.1.2. Ventilation of the Awake Patient
 - 2.1.3 Ventilation in Anesthesia
- 2.2. Cardiovascular Physiology
 - 2.2.1 Introduction
 - 2.2.2. Anesthesia-related Characteristics of the Cardiovascular System
- 2.3. Neurological Physiology. Central and Autonomic Nervous System
 - 2.3.1 Introduction
 - 2.3.2. Anesthesia-related Characteristics of the SNA
- 2.4. Renal Physiology Acid/ Base Balance
 - 2.4.1 Introduction
 - 2.4.2. Anesthesia-related Characteristics of the Renal System
 - 2.4.3 Mechanism of Regulating the Acid/ Base Balance
- 2.5. Gastrointestinal and Endocrine Physiology
 - 2.5.1 Introduction
 - 2.5.2. Characteristics of the Digestive System in Anesthesia
 - 2.5.3 Characteristics of the Endocrine System in Anesthesia
- 2.6. Age Related Physiological Changes
 - 2.6.1 Ventilatory Changes
 - 2.6.2 Cardiovascular Changes
 - 2.6.3 Nervous System Changes
 - 2.6.4 Endocrine Changes
 - 2.6.5 Other Changes Related to Anestesia



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- 2.7. Pharmacology and Anesthesia I. Basic Principles
 - 2.7.1 Pharmacokinetics Applied to Anesthesia
 - 2.7.2 Pharmacodynamics Applied to Anesthesia
- 2.8. Pharmacology and Anesthesia II. Inhalation Drugs
 - 2.8.1 Main Halogenated Agents
 - 2.8.2 Pharmacology of the Main Agents
- 2.9. Pharmacology and Anesthesia III. Non-inhaled Drugs
 - 2.9.1 Pharmacology of Inducers
 - 2.9.2 Pharmacology of Sedatives
 - 2.9.3 Pharmacology of Opiodes
 - 2.9.4 Pharmacology of Non-steroid Anti-inflammatory Drugs
 - 2.9.5 Pharmacology of Neuromuscular Blockers
- 2.10. Physiological Constants Charts, Medication Charts, Dosage Calculation (etc.)
 - 2.10.1 Physiological Constants Charts
 - 2.10.2 Continuous Medical Infusion Charts
 - 2.10.3 Dose Calculation Sheets

Module 3. Anesthetic Timing

- 3.1. Pre-anesthetic/anesthetic Risk Assessment
 - 3.1.1 Anesthetic Risk Vs Procedure Risk
 - 3.1.2 ASA Classification
- 3.2. Pre-medication Premedication Drugs
 - 3.2.1 Sedatives
 - 3.2.2 Opioids
 - 3.2.3 Alpha-2 Agonists
 - 3.2.4 Benzodiazepines
 - 3.2.5 NSAIDS
 - 3.2.6 Others.

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3.3. Induction Intubation

	3.3.1	Induction Drugs		
		3.3.1.1. Propofol		
		3.3.1.2. Alfaxalone		
		3.3.1.3. Thiopental		
		3.3.1.4. Etomidate		
		3.3.1.5. Adjuvants		
	3.3.2	Intubation Maneuver		
		3.3.2.1. Sellick Maneuver		
3.4.	Maintenance. Inhalation Anesthesia			
	3.4.1	Characteristics of Inhalation Maintenance		
	3.4.2	Main Anesthetic Agents (Halothane, Isoflurane, Sevoflurane, Desflurane)		
3.5.	Maintenance. Total Intravenous Anesthesia (TIVA)			
	3.5.1	Maintenance Characteristics in Total Intravenous Anesthesia		
	3.5.2	Drugs Used in TIVA (Propofol, Alfaxalone)		
	3.5.3	Partial Intravenous Anesthesia (PIVA)		
		3.5.3.1. Characteristics		
		3.5.3.2. Drugs:		
3.6.	Mechanical Ventilation			
	3.6.1.	Principles of Mechanical Ventilation		
	3.6.2	Controlled Ventilatory Modes		
		3.6.1.1. Volume Mode		
		3.6.1.2. Pressure Mode		
	3.6.3	Assisted Ventilatory Modes		
		3.6.3.1. Pressure Support		
		3.6.3.2. Intermittent Synchronized Ventilation		
	3.6.4	End-expiratory Pressure (PEEP)		
	3.6.5	Alveolar Recruitment Maneuvers		
3.7.	Eduction. Immediate Postoperative			
	3.7.1	•		
	3.7.2	Precautions In the Immediate Postoperative Period		



- 3.8. Intraoperative Fluid Therapy
 - 3.8.1 Principles of Fluid Therapy
 - 3.8.2 Types of Fluid
 - 3.8.3 Fluid Choice and Infusion Rate
- 3.9. Coagulation During the Perioperative Period
 - 3.9.1 Coagulation Physiology
 - 3.9.2 Basic Alterations in Perioperative Coagulation
 - 3.9.3 Disseminated Intravascular Coagulation
- 3.10. Perioperative Transfusion
 - 3.10.1 Indications
 - 3.10.2. Transfusion Techniques

Module 4. Analgesia

- 4.1. Pain Physiology
 - 4.1.1 Nociceptive Pathways
 - 4.1.2 Peripheric Sensitization
 - 4.1.3 Central Sensitization
- 4.2. Chronic Pain I. Osteoarthrosis
 - 4.2.1 Peculiarities of OA Pain
 - 4.2.2 Basic Lines of Pain Treatment Due to OA.
- 4.3. Chronic Pain II. Oncological Pain, Neuropathic Pain
 - 4.3.1 Peculiarities of Oncological Pain
 - 4.3.2 Peculiarities of Neuropathic Pain
 - 4.3.3 Basic Lines of Treatment
- 4.4. Opioid Analgesics
 - 4.4.1 General Characteristics of Opioids
 - 4.4.2 Opioid Peculiarities in Felines
- 4.5. Nonsteroidal Anti-Inflammatory Drugs
 - 4.5.1 General Characteristics of NSAIDS
 - 4.5.2 NSAIDS Peculiarities in Felines
- 4.6. Other Analgesics I: Ketamine, Lidocaine
 - 4.6.1 Ketamine General Characteristics
 - 4.6.2 Lidocaine General Characteristics
 - 4.6.2.1. Precautions with Felines

- 4.7. Other Analgesics II
 - 4.7.1 Paracetamol
 - 4.7.2 Dipyrone
 - 4.7.3 Gabapentinoids (Gabapentin and Pregabalin)
 - 4.7.4 Amantadine
 - 4.7.5 Grapiprant
- 4.8. Assessment of Post-Surgical Pain
 - 4.8.1 Implications of Post-Surgical Pain
 - 4.8.2 Perioperative Pain Assessment Scales
 - 4.8.2.1. Canines
 - 4.8.2.2. Felines
- 4.9. Assessment of Chronic Pain
 - 4.9.1 Implications of Chronic Pain
 - 4.9.2 Chronic Pain Assessment Scales
 - 4.9.2.1. Canines
 - 4.9.2.2. Felines
- 4.10. Analgesia in the Emergency Department and in the Hospitalized Patient
 - 4.10.1 Peculiarities in Emergency and Hospitalized Patients
 - 4.10.2 Analgesic Protocols for Hospitalized Patients

Module 5. Locoregional Anesthesia/Analgesia

- 5.1. Pharmacology of Local Anesthetics
 - 5.1.1 General Aspects of Local Aaesthetics
 - 5.1.2 Adjuvants in Locoregional Anesthesia
- 5.2. Basics of Locoregional Anesthesia: Anatomical Localization, Neurolocalizer, Ultrasound
 - 5.2.1 Basic Aspects of Locoregional Anesthesia
 - 5.2.2 Basic Locoregional Anesthesia: Anatomical Localization
 - 5.2.3 Locoregional Anesthesia With Neurolocalizer
 - 5.2.4 Ultrasound-guided Locoregional Anesthesia
- 5.3. Complications Associated with Locoregional Anesthesia
 - 5.3.1 Toxicity of Local Anaesthetics
 - 5.3.2 Puncture Injury

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5.4.	Head Blockages I			
	5.4.1	Anatomic Introduction		
	5.4.2	Jaw Nerve Blockade		
	5.4.3	Mandibular Nerve Block		
5.5.	Head Blockages II			
	5.5.1	Ophthalmic Blockages		
	5.5.2	Blockages Related to the Pinna		
5.6.	Forelimb Blockages			
	5.6.1	Anatomic Introduction		
	5.6.2	Paravertebral Brachial Plexus Blockade		
	5.6.3	Subscapularis Brachial Plexus Blockade		
	5.6.4	Axillary Brachial Plexus Blockade		
	5.6.5	RUMM Blocking		
5.7.	Trunk Blockages I			
	5.7.1	Intercostal Blockages		
	5.7.2	Serratus Blockage		
	5.7.3	Pleural Instillation		
5.8.	Trunk Blockages II			
	5.8.1	Lumbar Square Blockage		
	5.8.2	Transverse Abdominal Blockage		
	5.8.3	Peritoneal Instillation		
5.9.	Rear Limb Blockages			
	5.9.1	Anatomic Introduction		
	5.9.2	Sciatic Nerve Block		
	5.9.3	Femoral Nerve Block		
5.10.	Epidural			
	5.10.1	Anatomic Introduction		
	5.10.2	Location of the Epidural Space		
	5.10.3	Epidural Drug Administration		
	5.10.4	Epidural Vs Raquidea		
	5.10.5	Contraindications and Complications		

Module 6. Monitoring

- 6.1. Basic Monitoring
 - 6.1.1 Palpitation
 - 6.1.2 Observation
 - 6.1.3 Auscultation
 - 6.1.4 Temperature Monitoring
- 6.2. Electrocardiography
 - 6.2.1 Introduction to Electrocardiography
 - 6.2.2 ECG Interpretation in Anesthesia
- 6.3. Arterial Pressure
 - 6.3.1 Introduction to Arterial Pressure Physiology
 - 6.3.2 Medication Methods of Arterial Pressure
 - 6.3.3 Non-invasive Arterial Pressure
 - 6.3.4 Invasive Arterial Pressure
- 6.4. Cardiac Output Monitoring
 - 6.4.1 Introduction to Cardiac Output Physiology
 - 6.4.2 Different Methods of Monitoring Cardiac Output
- 6.5. Ventilatory Monitoring I. Pulse Oximetry
 - 6.5.1 Physiological Introduction
 - 6.5.2 Plethysmogram Interpretation
- 6.6. Ventilatory Monitoring II Capnography
 - 6.6.1 Physiological Introduction
 - 6.6.2 Capnogram Interpretation
- 6.7. Ventilatory Monitoring III
 - 6.7.1 Spirometry
 - 6.7.2 Anesthetic Gases
 - 6.7.3 Arterial Blood Gases
- 6.8. Hypnosis Monitoring
 - 6.8.1 Introduction to Hypnosis During Anesthesia
 - 6.8.2 Subjective Monitoring of the Hypnosis Plane
 - 6.8.3 BIS Monitoring



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- 6.9. Nociception Monitoring
 - 6.9.1 Physiology Introduction of Intraoperative Nociception
 - 6.9.2 Monitoring of Nociception by ANI
 - 6.9.3 Other Methods of Intraoperative Nociception Monitoring
- 6.10. Volemia Monitoring Acid/ Base Balance
 - 6.10.1 Introduction to the Physiology of Volemia During Anesthesia
 - 6.10.2 Monitoring Methods

Module 7. Anesthetic Complications

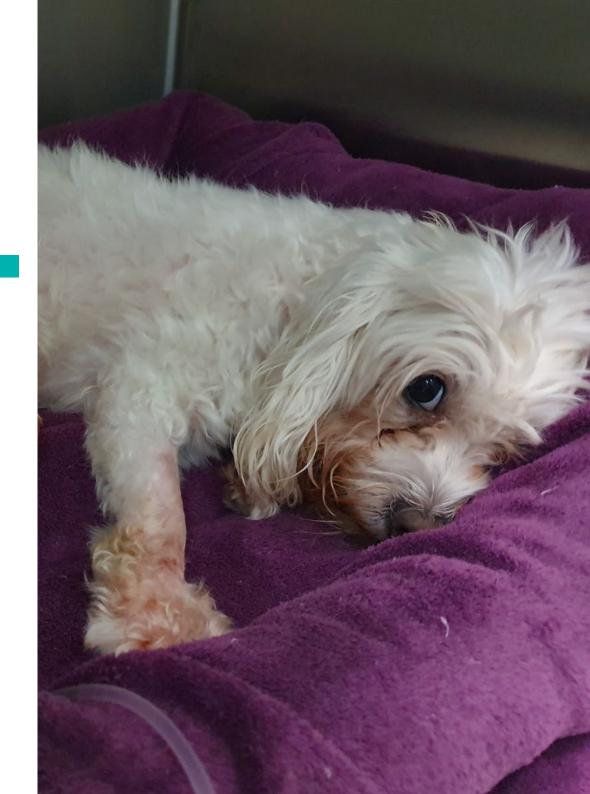
- 7.1. Regurgitation/ Aspiration
 - 7.1.1 Definition
 - 7.1.2. Management
- 7.2. Hypotension/ Hypertension
 - 7.2.1 Definition
 - 7.2.2. Management
- 7.3. Hypocapnia/ Hypercapnia
 - 7.3.1 Definition
 - 7.3.2. Management
- 7.4. Bradycardia/ Tachycardia
 - 7.4.1 Definition
 - 7.4.2. Management
- 7.5. Other Alterations in an Electrodiagram
 - 7.5.1 Definition
 - 7.5.2. Management
- 7.6. Hypothermia/ Hyperthermia
 - 7.6.1 Definition
 - 7.6.2. Management
- 7.7. Nociception/Intraoperative Awakening
 - 7.7.1 Definition
 - 7.7.2. Management
- 7.8. Airway Complications/Hypoxia
 - 7.8.1 Definition
 - 7.8.2. Management

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- 7.9. Cardiorespiratory Arrest
 - 7.9.1 Definition
 - 7.9.2. Management
- 7.10. Various Complications
 - 7.10.1 Post-anesthetic Blindness
 - 7.10.2 Postanesthetic Tracheitis
 - 7.10.3 Post-anesthesia Cognitive Dysfunction

Module 8. Anesthetic Management in Specific Situations I

- 8.1. Anesthesia in Elderly Patients
 - 8.1.1 Characteristics to Take into Account
 - 8.1.2 Post-Operative Management
 - 8.1.3 Anesthetic Management
 - 8.1.4 Postoperative Management
- 8.2. Anesthesia in Pediatric Patients
 - 8.2.1 Characteristics to Take into Account
 - 8.2.2 Postoperative Management
 - 8.2.3 Anesthetic Management
 - 8.2.4 Postoperative Management
- 8.3. Anesthesia in Patients with Cardiac Pathology I (Congenital Heart Disease)
 - 8.3.1 Characteristics to Take into Account
 - 8.3.2 Postoperative Management
 - 8.3.3 Anesthetic Management
 - 8.3.4 Postoperative Management
- 8.4. Anesthesia in Patients with Cardiac Pathology II (Acquired Heart Disease)
 - 3.4.1 Characteristics to Take into Account
 - 8.4.2 Postoperative Management
 - 8.4.3 Anesthetic Management
 - 8.4.4 Postoperative Management



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	8.5.1	Hypothyroid Patient
		8.5.1.1. Characteristics to Take into Account
		8.5.1.2. Postoperative Management
		8.5.1.3. Anesthetic Management
		8.5.1.4. Postoperative Management
	8.5.2	Hypothyroid Patient
		8.5.2.1. Characteristics to Take into Account
		8.5.2.2. Postoperative Management
		8.5.2.3. Anesthetic Management
		8.5.2.4. Postoperative Management
8.6.	Anesth	nesia for Patients With Adrenal Pathologies
	8.6.1	Patient with Hypoadrenocorticism
		8.6.1.1. Characteristics to Take into Account
		8.6.1.2. Postoperative Management
		8.6.1.3. Anesthetic Management
		8.6.1.4. Postoperative Management
	8.6.2	Patient with Hyperadrenocorticism
		8.6.2.1. Characteristics to Take into Account
		8.6.2.2. Postoperative Management
		8.6.2.3. Anesthetic Management
		8.6.2.4. Postoperative Management
8.7.	Anesth	nesia in Diabetic Patients
	8.7.1	Characteristics to Take into Account
	8.7.2	Postoperative Management
	8.7.3	Anesthetic Management
	8.7.4	Postoperative Management
8.8.	Anesth	nesia for Patients With Digestive Pathologies I
	8.8.1	Characteristics to Take into Account
	8.8.2	Postoperative Management
	8.8.3	Anesthetic Management
	8.8.4	Postoperative Management

Anesthesia for Patients With Thyroid Pathologies

- 8.9. Anesthesia in Patients with Digestive Pathology II (HepatobiliarySystem)
 - 8.9.1 Characteristics to Take into Account
 - 8.9.2 Postoperative Management
 - 8.9.3 Anesthetic Management
 - 8.9.4 Postoperative Management
- 8.10. Anesthesia for Patients With Neurological Pathologies
 - 8.10.1 Characteristics to Take into Account
 - 8.10.2 Postoperative Management
 - 8.10.3 Anesthetic Management
 - 8.10.4 Postoperative Management

Module 9. Anesthetic Management in Specific Situations II

- 9.1. Anesthesia for Patients With Respiratory Pathologies
 - 9.1.1 Characteristics to Take into Account
 - 9.1.2 Postoperative Management
 - 9.1.3 Anesthetic Management
 - 9.1.4 Postoperative Management
- 9.2. Anesthesia for Ophthalmologic Procedures
 - 9.2.1 Characteristics to Take into Account
 - 9.2.2 Postoperative Management
 - 9.2.3 Anesthetic Management
 - 9.2.4 Postoperative Management
- 9.3. Anesthesia for Endoscopic and Laparoscopic Procedures
 - 9.3.1 Characteristics to Take into Account
 - 9.3.2 Postoperative Management
 - 9.3.3 Anesthetic Management
 - 9.3.4 Postoperative Management

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9.4.	Anesth	nesia in Patients with Altered Body conditions (Obesity, Cachexia).	9.9.	Anesth	esia in
	9.4.1	Obese Patient		9.9.1	Char
		9.4.1.1. Characteristics to Take into Account		9.9.2	Posto
		9.4.1.2. Postoperative Management		9.9.3	Anes
		9.4.1.3. Anesthetic Management		9.9.4	Posto
		9.4.1.4. Postoperative Management	9.10.	Anesth	esia in
	9.4.2	Cachectic Patient		9.10.1	Char
		9.4.2.1. Characteristics to Take into Account		9.10.2	Posto
		9.4.2.2. Postoperative Management		9.10.3	Anes
		9.4.2.3. Anesthetic Management		9.10.4	Posto
		9.4.2.4. Postoperative Management	Mad	ula 10	A 12 0 0
9.5.	Anesth	nesia in Brachiocephalic Patients	IVIOU	ule 10.	Anes
	9.5.1	Characteristics to Take into Account	10.1.	Hemoa	abdome
	9.5.2	Postoperative Management		10.1.1	Char
	9.5.3	Anesthetic Management		10.1.2	Post
	9.5.4	Postoperative Management		10.1.3	Anes
9.6.	Anesth	nesia in Patients with Extreme Sizes (Miniature vs. Giant patient)		10.1.4	Post
	9.6.1	Characteristics to Take into Account	10.2.	Ovarioh	nystere
	9.6.2	Postoperative Management		10.2.1	Char
	9.6.3	Anesthetic Management		10.2.2	Post
	9.6.4	Postoperative Management		10.2.3	Anes
9.7.	Anesth	nesia for Patients With Genitourinary Pathologies. Pyometra, Urinary Obstruction		10.2.4	
	9.7.1	Characteristics to Take into Account	10.3.	Sedatio	on Proc
	9.7.2	Postoperative Management		10.3.1	Char
	9.7.3	Anesthetic Management		10.3.2	Posto
	9.7.4	Postoperative Management		10.3.3	Anes
9.8.	Anesth	nesia in Pregnant Patients and for Cesarean Section		10.3.4	Posto
	9.8.1	Characteristics to Take into Account	10.4.	Pulmor	nary Lo
	9.8.2	Postoperative Management		10.4.1	Char
	9.8.3	Anesthetic Management		10.4.2	Post
	9.8.4	Postoperative Management		10.4.3	Anes
				10.4.4	Posto

Oncology Patients (OFA) acteristics to Take into Account operative Management sthetic Management operative Management Thoracic Surgery acteristics to Take into Account operative Management sthetic Management operative Management

thetic Management in Specific Situations III

- acteristics to Take into Account operative Management sthetic Management operative Management
- ectomy and Orchiectomy in Healthy Patients
 - acteristics to Take into Account
 - operative Management
 - sthetic Management
 - operative Management
- cedures in the Hospitalized Patient
 - acteristics to Take into Account
 - operative Management
 - sthetic Management
 - operative Management
- bectomy
 - acteristics to Take into Account
 - operative Management
 - sthetic Management
 - operative Management



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10.5. Allestifette Mariagerriett With Fellie	10.5.	Anesthetic	Management	With	Feline
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- 10.5.1 Characteristics to Take into Account
- 10.5.2 Postoperative Management
- 10.5.3 Anesthetic Management
- 10.5.4 Postoperative Management
- 10.6. Anesthesia for Imaging Procedures
 - 10.6.1 Characteristics to Take into Account
 - 10.6.2 Postoperative Management
 - 10.6.3 Anesthetic Management
 - 10.6.4 Postoperative Management
- 10.7. Enterotomy and Enterectomy
 - 10.7.1 Characteristics to Take into Account
 - 10.7.2 Postoperative Management
 - 10.7.3 Anesthetic Management
 - 10.7.4 Postoperative Management
- 10.8. Perineal Hernia.
 - 10.8.1 Characteristics to Take into Account
 - 10.8.2 Postoperative Management
 - 10.8.3 Anesthetic Management
 - 10.8.4 Postoperative Management
- 10.9. Cutaneous Tumor Excision and Dermatological Surgery (Mastocytoma, for Example).
 - 10.9.1 Characteristics to Take into Account
 - 10.9.2 Postoperative Management
 - 10.9.3 Anesthetic Management
 - 10.9.4 Postoperative Management
- 10.10. Anesthesia for Dentistry and Maxillofacial Surgery
 - 10.10.1 Characteristics to Take into Account
 - 10.10.2 Postoperative Management
 - 10.10.3 Anesthetic Management
 - 10.10.4 Postoperative Management

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Surgery Area

Module 11. Basic Principles of Soft Tissue Surgery. Medical-surgical Techniques. Exploratory Laparotomy

- 11.1. Principles of Asepsis and Sterilization
 - 11.1.1 Definition of the Concepts of Asepsis, Antisepsis and Sterilization
 - 11.1.2 Main Methods for Disinfection
 - 11.1.3 Main Methods for Sterilization
- 11.2. The Operating Room
 - 11.2.1 Preparation of Surgical Personnel
 - 11.2.2 Hand Washing
 - 11.2.3 Clothing
 - 11.2.4 Preparation of the Operating Environment
 - 11.2.5 Sterilization Maintenance
- 11.3. Instruments
 - 11.3.1 General Materials
 - 11.3.2 Specific Materials
- 11.4. Hemostasis Sutures Alternative Hemostasis Methods
 - 11.4.1 Hemostasis Physiopathology
 - 11.4.2 Suture Features
 - 11.4.3 Suture Materials
 - 11.4.4 Suture Patterns
 - 11.4.5 Alternative Techniques of Hemostatis
- 11.5. Surgical Site Infection (SSI)
 - 11.5.1 Nosocomial Infections
 - 11.5.2 Definition of SSI Types of ISQ
 - 11.5.3. Types of Surgery
 - 11.5.4 Risk Factors
 - 11.5.6. Treatment of SSI
 - 11.5.7 Use of Antimicrobials
 - 11.5.8 Precautions to Avoid SSI



- 11.6. Surgical Defects. Bandages and Drainage
 - 11.6.1 Use of Cutting Instruments
 - 11.6.2 Use of Gripping Instruments
 - 11.6.3 Use of Retractors
 - 11.6.4 Aspiration
 - 11.6.5 Bandages
 - 11.6.6 Drainages
- 11.7. Electrosurgery and Lasers.
 - 11.7.1 Physical Fundamentals
 - 11.7.2 Monopolar
 - 11.7.3 Bipolar
 - 11.7.4 Sealants
 - 11.7.5 Basic Rules of Use
 - 11.7.6 Main Techniques
 - 11.7.7 Laser
 - 11771 CO2 Laser
 - 11.7.7.2. Diode Laser
- 11.8. Postsurgical Monitoring and Care
 - 11.8.1 Nutrition
 - 11.8.2 Pain Management
 - 11.8.3 Decubitus Patients
 - 11.8.4 Renal Monitoring
 - 11.8.5 Hemostasis
 - 11.8.6 Hyperthermia and Hypothermia
 - 11.8.7 Anorexia
- 11.9. Medical-surgical Procedures
 - 11.9.1 Feeding Tubes
 - 11.9.2 Nasoesophageal
 - 11.9.3 Esophagostomy
 - 11.9.4 Gastronomy
 - 11.9.5 Thoracostomy Tubes
 - 11.9.6 Temporary Tracheostomy
 - 11.9.7 Other Procedures
 - 11.9.8 Abdominocentesis
 - 11.9.9 Jejunostomy Tubes

- 11.10. Exploratory Laparotomy. Abdominal Cavity Closure.
 - 11.10.1 Abdominal Opening and Closure
 - 11.10.2 Topographic Anatomy

Module 12. Skin. Treatment of Wounds and Reconstructive Surgery

- 12.1. Skin: Anatomy, Vascularization and Tension
 - 12.1.1 Skin Anatomy
 - 12.1.2 Vascular Contribution
 - 12.1.3 Correct Treatment of the Skin
 - 12.1.4 Tension Lines
 - 12.1.5 Ways to Manage Tension
 - 12.1.6 Sutures
 - 12.1.7 Local Techniques
 - 12.1.8 Flap Types
- 12.2. Pathophysiology of Healing
 - 12.2.1 Inflammatory Phase
 - 12.2.2 Types of Debridement
 - 12.2.3 Proliferative Phase
 - 12.2.4 Maturation Phase
 - 12.2.5 Local Factors Which Affect Healing
 - 12.2.6 Systemic Factors Which Affect Healing
- 12.3. Wounds: Types and How to Treat Them
 - 12.3.1 Types of Wounds (Etiology)
 - 12.3.2 Wound Assessment
 - 12.3.3 Wound Infection
 - 12.3.4 Surgical Site Infection (SSI)
 - 12.3.5 Wound Management
 - 12.3.6 Preparation and Cleaning
 - 12.3.7 Dressings
 - 12.3.8 Bandages
 - 12.3.9 Antibiotics: Yes or No
 - 12.3.10. Other Medication

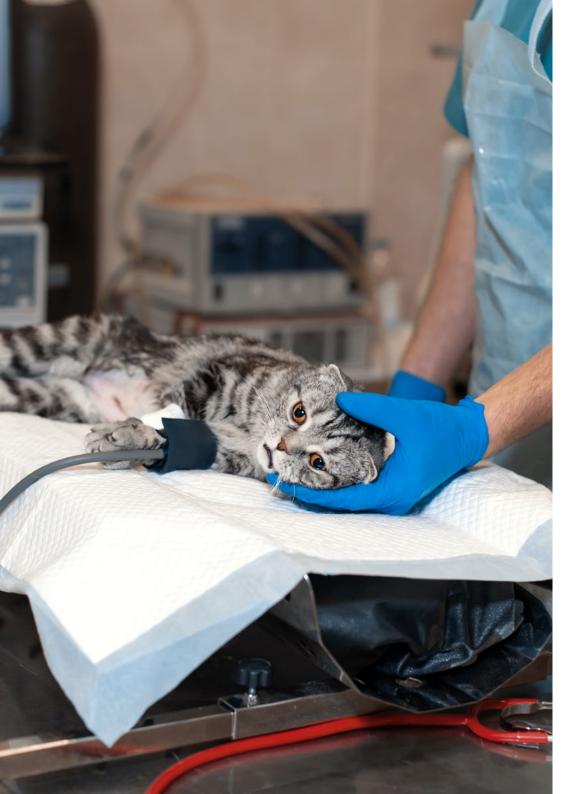
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12.4.	New Te	chniques to Aid Healing
	12.4.1	Laser Therapy
	12.4.2	Vacuum Systems
	12.4.3	Others
12.5.	Plasties	and Subdermal Plexus Flaps
	12.5.1	Z-plasty, V-Y Plasty
	12.5.2	Bow-tie Technique
	12.5.3	Advance Flaps
	12.5.4	U
	12.5.5	Н
	12.5.6	Rotation Flaps
	12.5.7	Transposition Flaps
	12.5.8	Interpolation Flaps
12.6.	Other F	laps. Grafts
	12.6.1	Pedicle Flaps
	12.6.2	What They Are and Why Do They Work?
	12.6.3	Most Common Pedicle Flaps
	12.6.4	Muscle and Myocutaneous Flaps
	12.6.5	Grafts
	12.6.6	Indications
	12.6.7.	Types
	12.6.8.	Bedding Requirements
	12.6.9	Collection and Preparation Technique
	12.6.10	. Postoperative Care
12.7.	Commo	on Head Injuries
	12.7.1	Eyelids
	12.7.2	,
	12.7.3	Advance Flaps
	12.7.4	Rotation
	12.7.5	
	12.7.6	·
	12.7.7	Nose

	12.7.8	Rotation Flaps
	12.7.9	Lip to Nose Plasty
	12.7.10.	Lips
	12.7.11.	Direct Closure
	12.7.12.	Advance Flaps
	12.7.13.	Rotation Flaps. Lip to Eye
	12.7.14.	Ears
12.8.	Neck an	d Torso Techniques
	12.8.1	Advance Flaps
	12.8.2	Myocutaneous Flap of the Latissimus Dorsi
	12.8.3	Axillary Crease and Inguinal Crease
	12.8.4	Cranial Epigastric Axial Flap
	12.8.5	Episioplasty
12.9.	Techniq	ues for Wounds and Defects in the Extremities (I)
	12.9.1	Problems Related to Compression and Tension
	12.9.2	Alternative Closure Methods
	12.9.3	Thoracodorsal Axial Flap
	12.9.4	Lateral Thoracic Axial Flap
	12.9.5	Superficial Brachial Axial Flap
	12.9.6	Caudal Epigastric Axial Flap
12.10.	Techniq	ues for Wounds and Defects in the Extremities (II)
	12.10.1	Problems Related to Compression and Tension
	12.10.2	Axial Flap of the Deep Iliac Circumflex (Dorsal and Ventral Branches)
	12.10.3	Genicular Axial Flap
	12.10.4	Reverse Saphenous Flap
	12.10.5	Pads and Interdigital Pads
Mod	ule 13.	Gastrointestinal Surgery

13.1. Anatomy of the Gastrointestinal Tract

13.1.1 Stomach13.1.2 Small Intestine13.1.3 Large Intestine



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- 13.2.1 Sutures and Materials
- 13.2.2 Laboratory and Imaging Tests

13.3. Stomach

- 13.3.1 Surgical Principles
- 13.3.2 Clinical Stomach Pathologies
- 13.3.3 Foreign Bodies
- 13.3.4 Gastric Dilatation-Volvulus Syndrome
- 13.3.5 Gastropexy
- 13.3.6 Gastric Retention and Obstruction
- 13.3.7 Gastroesophageal Intussusception
- 13.3.8 Hiatal Hernia
- 13.3.9 Neoplasty

13.4. Surgical Techniques

- 13.4.1 Biopsy Sampling
- 13.4.2 Gastronomy
- 13.4.3 Gastrectomy
 - 13.4.3.1. Simple Gastrectomy
 - 13.4.3.2. Billroth I
 - 13.4.3.3. Billroth II

13.5. Small Intestine

- 13.5.1 Surgical Principles
- 13.5.2 Clinical Pathologies of the Small Intestine
 - 13.5.2.1. Foreign Bodies
 - 13.5.2.1. Non-linear
 - 13.5.2.2. Linear
 - 13.5.2.3. Duplication of the Intestinal Wall
 - 13.5.2.4. Intestinal Perforation
 - 13.5.2.5. Intestinal Incarceration
 - 13.5.2.6. Intestinal Intussusception
 - 13.5.2.7. Mesenteric Volvulus
 - 13.5.2.8. Neoplasty

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13.6.	Surgical	Techniques
	13.6.1	Biopsy Sampling
	13.6.2	Enterotomy
	13.6.3	Enterectomy
	13.6.4	Enteroplication
13.7.	Large In	testine
	13.7.1	Surgical Principles
	13.7.2	Clinical Pathologies
		13.7.2.1. Ileocolic Intussusception or Cecal Inversion
		13.7.2.2. Megacolon
		13.7.2.3. Transmural Migration
		13.7.2.4. Neoplasty.
13.8.	Surgical	Techniques
	13.8.1	Biopsy Sampling
	13.8.2	Typhlectomy
	13.8.3	Colopexy
	13.8.4	Colotomy
	13.8.5	Colectomy
13.9.	Rectum	
	13.9.1	Surgical Principles
	13.9.2	Clinical Pathologies and Rectum Surgical Techniques
		13.9.2.1. Rectal Prolapse
		13.9.2.3. Anal Atresia
		13.9.2.4. Neoplasty
13.10.	Perianal	Zone and Anal Sacs
	13.10.1	Pathology and Perianal Area Surgical Technique
		13.10.1.1. Perianal Fistulas
		13.10.1.2. Neoplasms
	13.10.2	Pathologies and Anal Sacs Surgical Techniques

Module 14. Genitourinary Surgery. Mammary Surgery

viou	uic i 	ochitodrinary odrycry. Marrimary odrycry
14.1.	Introduc	ction to Urogenital Surgical Pathology
	14.1.1	Surgical Principles Applied in Urogenital Surgery
	14.1.2	Surgical Material Used
	14.1.3	Suture Materials
	14.1.4	Pathophysiology of Urinary Surgical Problems: Introduction
	14.1.5	Urinary Obstruction
	14.1.6.	Urinary Trauma
14.2.	Kidney	
	14.2.1	Anatomy Recap
	14.2.2	Techniques (I)
		14.2.2.1. Renal Biopsy
		14.2.2.2. Nephrotomy. Pyelolithotomy
	14.2.3	Techniques (II)
		14.2.3.1. Nephrectomy
		14.2.3.2. Nephropexy
		14.2.3.3. Nephrostomy
	14.2.4	Congenital Diseases
	14.2.5	Renal Trauma
	14.2.6	Infection. Abscesses
14.3.	Urether	
	14.3.1	Anatomy Recap
	14.3.2	Techniques (I)
		14.3.2.1. Ureterotomy
		14.3.2.2. Anastomosis.
	14.3.3	Techniques (II)
		14.3.3.1. Ureteroneocystostomy
		14.3.3.2. Neoureterostomy.
	14.3.4	Congenital Diseases
	14.3.5	Urethral Trauma

14.3.6 Ureteral Obstruction

14.3.6.1. New Techniques

14.4.	Bladder			
	14.4.1	Anatomy Recap		
		Techniques (I)		
		14.4.2.1. Cystostomy.		
		14.4.2.2. Cystectomy.		
	14.4.3	Techniques (II)		
		14.4.3.1. Cystopexy Serosal Patch.		
		14.4.3.2. Cystostomy		
		14.4.3.3. Boari Flap		
	14.4.4	Congenital Diseases		
	14.4.5	Bladder Trauma		
	14.4.6	Bladder Lithiasis		
	14.4.7	Bladder Torsion		
	14.4.8	Neoplasms		
14.5.	Urethra			
	14.5.1	Anatomy Recap		
	14.5.2	Techniques (I)		
		14.5.2.1. Urethrotomy		
		14.5.2.2. Anastomosis		
	14.5.3	Techniques (II): Urethrostomy		
		14.5.3.1. Introduction		
		14.5.3.2. Feline Perineal Urethrostomy		
		14.5.3.3. Canine Pre-scrotal Urethrostomy		
		14.5.3.4. Other Urethrostomies		
	14.5.4 Congenital Diseases			
	14.5.5 L	Jrethral Trauma		
	14.5.6 L	Jrethral Obstruction		
	14.5.7 L	Jrethral Prolapse		
		Sphincter Incompetence		
14.6.		, Uterus, Vagina		
		Anatomy Recap		
	14.6.2	Techniques (I)		
		14.6.2.1. Ovariectomy		
		14.6.2.2. Ovariohysterectomy		

	14.6.3	Techniques (II)
		14.6.3.1. Cesarean Section
		14.6.3.2. Episiotomy
	14.6.4	Congenital Diseases
		14.6.4.1. Ovaries and Uterus
		14.6.4.2. Vagina and Vestibule
	14.6.5	Ovarian Remnant Syndrome
		14.6.5.1. Effects of Gonadectomy
	14.6.6	Pyometra
		14.6.6.1. Stump Pyometra
	14.6.7	Uterine Prolapse and Vaginal Prolapse
	14.6.8	Neoplasms
14.7.	Penis,	Testicles and Scrotum
	14.7.1	Anatomy Recap
	14.7.2	Techniques (I)
		14.7.2.1. Pre-scrotal Orchiectomy
		14.7.2.2. Feline Scrotal Orchiectomy
		14.7.2.3. Abdominal Orchiectomy
	14.7.3	Techniques (II)
		14.7.3.1. Scrotum Ablation
		14.7.3.2. Penis Amputation
	14.7.4	Techniques (III)
		14.7.4.1. Preputial Plasties
		14.7.4.2. Phallopexy
	14.7.5	Congenital Alterations of the Penis and Foreskin
		14.7.5.1. Hypospadias
		14.7.5.2. Phimosis vs Paraphimosis
	14.7.6	Congenital Alterations to the Testicles
		14.7.6.1. Anorchia/Monorchidism
		14.7.6.2. Cryptorchidism
	14.7.7	Neoplasms in the Penis
	14.7.8	Testicular Neoplasms

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14.8.	Prostate	e Ancillary Techniques in Urogenital Surgery
	14.8.1	Anatomy Recap
	14.8.2	Techniques
		14.8.2.1. Omentalization
		14.8.2.2. Marsupialization
	14.8.3	Prostatic Hyperplasia
	14.8.4	Prostatic Cysts
	14.8.5	Prostatitis and Prostatic Abscesses
	14.8.6	Neoplasms
	14.8.7	Auxiliary Techniques Catheterization and Cystopuncture
	14.8.8	Abdomen Drainage
14.9.	Comple	ementary Tests in Urogenital Surgical Pathology
	14.9.1	Diagnostic Imaging Techniques(I)
		14.9.1.1. Simple Radiography
		14.9.1.2. Contrast Radiography
	14.9.2	Diagnostic Imaging Techniques (II)
		14.9.2.1. Ultrasound
	14.9.3.	Diagnostic Imaging Techniques (III)
	14.9.4	Importance of Laboratory Diagnosis
14.10.	Breast	
	14.10.1	Anatomy Recap
	14.10.2	Techniques (I)
		14.10.2.1. Nodulectomy
		14.10.2.2. Lymphadenectomy
	14.10.3.	Techniques (II)
		14.10.3.1. Simple Mastectomy
		14.10.3.2. Regional Mastectomy
		14.10.3.3. Radical Mastectomy
	14.10.4	Postoperative Care
		14.10.4.1. Analgesic Catheters
	14.10.5	Hyperplasia and Pseudo-gestation
	14.10.6	Canine Mammary Tumors
	14.10.7	Feline Mammary Tumors

- Module 15. Surgical Oncology. Basic Principles. Cutaneous and Subcutaneous Tumors 15.1. Principles of Surgical Oncology (I) 15.1.1 Pre-operative Considerations 15.1.2 Surgical Approach 15.1.3 Biopsies and Sample Collecting 15.2. Principles of Surgical Oncology (II) 15.2.1 Surgical Considerations 15.2.2 Definition of Surgical Margins 15.2.3 Cytoreductive and Palliative Surgeries
- 15.3. Principles of Surgical Oncology (III)
 - 15.3.1 Post-operative Considerations
 - 15.3.2 Adjuvant Therapy
 - 15.3.3 Multimodal Therapy
- 15.4. Cutaneous and Subcutaneous Tumors Soft Tissue Sarcomas (I)
 - 15.4.1 Clinical presentation
 - 15.4.2. Diagnosis
 - 15.4.3. Staging.
 - 15.4.4. Surgical Aspects
- 15.5. Cutaneous and Subcutaneous Tumors Soft Tissue Sarcomas (II)
 - 15.5.1 Reconstructive Surgery
 - 15.5.2 Adjuvant Therapies
 - 15.5.3 Paliative Procedures
 - 15.5.4 Prognosis
- 15.6. Cutaneous and Subcutaneous Tumors Mastocytoma (I)
 - 15.6.1 Clinical presentation
 - 15.6.2. Diagnosis
 - 15.6.3. Staging.
 - 15.6.4. Surgery (I)
- 15.7. Cutaneous and Subcutaneous Tumors Mastocytoma (II)
 - 15.7.1 Surgery (II)
 - 15.7.2 Post-operative Recommendations
 - 15.7.3 Prognosis

- 15.8. Cutaneous and Subcutaneous Tumors Other Cutaneous and Subcutaneous Tumors (I)
 - 15.8.1 Melanoma
 - 15.8.2 Epitheliotropic Lymphoma
 - 15.8.3 Hemangiosarcoma
- 15.9. Cutaneous and Subcutaneous Tumors Other Cutaneous and Subcutaneous Tumors (II)
 - 15.9.1 Cutaneous and Subcutaneous Benign Tumors
 - 15.9.2 Feline Injection Site Sarcoma
- 15.10. Interventional Oncology
 - 15.10.1 Material
 - 15.10.2 Vascular Interventions
 - 15.10.3 Non-Vascular Interventions

Module 16. Liver and Biliary System Surgery Spleen Surgery Endocrine System Surgery

- 16.1. Liver Surgery Basic Principles
 - 16.1.1 Liver Anatomy
 - 16.1.2 Liver Pathophysiology
 - 16.1.3 General Principles of Liver Surgery
 - 16.1.4 Hemostasis Techniques
- 16.2. Liver Surgery (II). Techniques
 - 16.2.1 Hepatic Biopsy
 - 16.2.2 Partial Hepatectomy
 - 16.2.3 Hepatic Lobectomy
- 16.3. Hepatic Surgery (III) Liver Cysts and Abscesses
 - 16.3.1 Liver Tumors
 - 16.3.2 Hepatic Abscesses
- 16.4. Liver Surgery (IV)
 - 16.4.1 Portosystemic Shunt
- 16.5. Extrahepatic Biliary Tree Surgery
 - 16.5.1 Anatomy
 - 16.5.2 Techniques Cholecystectomy
 - 16.5.3 Cholecystitis (Biliary Mucocele)
 - 16.5.4 Bladder Stones

- 16.6. Spleen Surgery (I)
 - 16.6.1 Spleen Anatomy
 - 16.6.2 Techniques
 - 16.6.3 Splenorrhaphy
 - 16.6.4 Partial Splenectomy
 - 16.6.5 Complete Splenectomy
 - 16.6.6 Three Clamp Technique Approach
- 16.7. Spleen Surgery (II)
 - 16.7.1 Splenic Mass Approach
 - 16.7.2 Hemoabdomen
- 16.8. Thyroid Gland Surgery
 - 16.8.1 Anatomy Recap
 - 16.8.2 Surgical Techniques
 - 16.8.3 Thyroidectomy
 - 16.8.4 Parathyroidectomy
 - 16.8.5 Diseases
 - 16.8.6 Thyroid Tumors in Dogs
 - 16.8.7 Hyperthyroidism in Cats
 - 16.8.8 Hyperparathyroidism
- 16.9. Adrenal Gland Surgery
 - 16.9.1 Anatomy Recap
 - 16.9.2 Surgical Technique
 - 16.9.3 Adrenalectomy
 - 16.9.4. Hypophysectomy
 - 16.9.5 Diseases
 - 16.9.6 Adrenal Adenomas/Adenocarcinomas
 - 16.9.7 Pheochromocytomas
- 16.10. Endocrine Pancreatic Surgery
 - 16.10.1 Anatomy Recap
 - 16.10.2 Surgical Technique
 - 16.10.3 Pancreatic Biopsy
 - 16.10.4 Pancreatectomy
 - 16.10.5 Diseases
 - 16.10.6 Insulinoma.

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Module 17. Head and Neck Surgery

- 17.1. Salivary Glands
 - 17.1.1 Anatomy
 - 17.1.2 Surgical Technique
 - 17.1.3 Sialocele
- 17.2. Laryngeal Paralysis
 - 17.2.1 Anatomy
 - 17.2.2 Diagnosis
 - 17.2.3. Pre-operative Considerations
 - 17.2.4 Surgical Techniques
 - 17.2.5 Post-operative Considerations
- 17.3. Brachycephalic Syndrome (I)
 - 17.3.1 Description
 - 17.3.2 Syndrome Components
 - 17.3.3 Anatomy and Physiopathology
 - 17.3.4 Diagnosis
- 17.4. Brachycephalic Syndrome (II)
 - 17.4.1 Pre-operative Considerations
 - 17.4.2 Surgical Techniques
 - 17.4.3 Post-operative Considerations
- 17.5. Tracheal Collapse
 - 17.5.1 Anatomy
 - 17.5.2 Diagnosis
 - 17.5.3. Medical Management
 - 17.5.4 Surgical Management
- 17.6. Ears (I)
 - 17.6.1 Anatomy
 - 17.6.2 Techniques
 - 17.6.3 Technique for Treating Otohematoma
 - 17.6.4 Aurectomy
 - 17.6.5 External Auditory Canal Ablation with Trephination of the Bulla
 - 17.6.6 Ventral Osteotomy of the Tympanic Bulla

- 17.7. Ears (II)
 - 17.7.1 Diseases
 - 17.7.2 Otohematomas
 - 17.7.3 External Auricular Pavilion Tumors
 - 17.7.4 Chronic Otitis
 - 17.7.5 Nasopharyngeal Polyps
- 17.8. Oral and Nasal Cavity (I)
 - 17.8.1 Anatomy
 - 17.8.2 Techniques
 - 17.8.3 Maxillectomy
 - 17.8.4 Mandibulectomy
 - 17.8.5 Techniques for Oral Cavity Reconstruction
 - 17.8.6 Rhinotomy
- 17.9. Oral and Nasal Cavity (II)
 - 17.9.1 Diseases
 - 17.9.2 Oral and Lip Tumors
 - 17.9.3 Nasal Cavity Tumors
 - 17.9.4 Aspergillosis
 - 17.9.5. Cleft Palate
 - 17.9.6 Oronasal Fistulas
- 17.10. Other Head and Neck Diseases
 - 17.10.1 Nasopharyngeal Stenosis
 - 17.10.2 Laryngeal Tumors
 - 17.10.3 Tracheal Tumors
 - 17.10.4 Cricopharyngeal Achalasia

Module 18. Thoracic Cavity Surgery

- 18.1. Pleural Cavity Surgery (I)
 - 18.1.1 Basic Principles and Anatomy
 - 18.1.2 Pleural Effusions
 - 18.1.2.1. Pleural Drainage Techniques
- 18.2. Pleural Cavity Surgery (II)
 - 18.2.1 Clinical Pathologies
 - 18.2.1.1. Trauma
 - 18.2.1.2. Pneumothorax
 - 18.2.1.3. Chylothorax
 - 18.2.1.3.1. Thoracic Duct Ligation
 - 18.2.1.3.2. Cisterna Chyli Ablation
 - 18.2.1.4. Pyothorax
 - 18.2.1.5. Hemothorax
 - 18.2.1.6. Malignant Pleural Effusion
 - 18.2.1.7. Benign Cysts
 - 18.2.1.8. Neoplasty
- 18.3. Rib Wall Surgery
 - 18.3.1 Basic Principles and Anatomy
 - 18.3.2 Clinical Pathologies
 - 18.3.2.1. Floating Thorax
 - 18.3.2.2. Pectus Excavatum
 - 18.3.2.3. Neoplasty
- 18.4. Diagnostic Methods
 - 18.4.1 Laboratory Tests
 - 18.4.2 Imaging Tests
- 18.5. Thorax Surgery Approaches
 - 18.5.1 Instruments and Material
 - 18.5.2 Types of Thorax Approach
 - 18.5.2.1. Intercostal Thoracotomy
 - 18.5.2.2. Thoracotomy for Costal Resection
 - 18.5.2.3. Median Sternotomy

- 18.5.2.4. Transsternal Thoracotomy
- 18.5.2.5. Transdiaphragmatic Thoracotomy
- 18.5.3 Restoration of Negative Pressure
- 18.6. Lung Surgery
 - 18.6.1 Basic Principles and Anatomy
 - 18.6.2 Surgical Techniques
 - 18.6.2.1. Partial Lobectomy
 - 18.6.2.2. Total Lobectomy
 - 18.6.2.3. Pneumonectomy
 - 18.6.3 Clinical Pathologies
 - 18.6.3.1. Trauma
 - 18.6.3.2. Pulmonary Abscess
 - 18.6.3.3. Pulmonary Torsion
 - 18.6.3.4. Neoplasty
- 18.7. Heart Surgery (I)
 - 18.7.1 Basic Principles and Anatomy
 - 18.7.2 Surgical Techniques
 - 18.7.2.1. Pericardiocentesis
 - 18.7.2.2. Partial Pericardiectomy
 - 18.7.2.3. Partial Auriculectomy
 - 18.7.2.4. Pacemaker Insertion
- 18.8. Heart Surgery (II)
 - 18.8.1 Clinical Pathologies
 - 18.8.1.1. Septal Defects
 - 18.8.1.2. Pulmonary Stenosis
 - 18.8.1.3. Subaortic Stenosis
 - 18.8.1.4. Tetralogy of Fallot
 - 18.8.1.5. Pericardial Effusion
 - 18.8.1.6. Neoplasty

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18.9. Vascular Anomalies and Vascular Rings		19.2.	Pelvic Limb Amputation	
18.9.1	Basic Principles and Anatomy		19.2.1	Indications
18.9.2	Clinical Pathologies		19.2.2.	Patient Selection Aesthetic Considerations
	18.9.2.1. Persistent Ductus Arteriosus		19.2.3	Pre-operative Considerations
	18.9.2.2. Persistent Right Aortic Arch		19.2.4	Surgical Techniques
18.10. Thoracic Esophageal Surgery			19.2.5	Coxofemoral Disarticulation
18.10.1 Basic Principles and Anatomy			19.2.6	Femoral and Tibial Osteotomy
18.10.2 Surgical Techniques			19.2.7	Hemipelvectomy
	18.10.2.1. Esophagotomy		19.2.8	Post-operative Considerations
	18.10.2.2. Esophagectomy		19.2.9	Complications
18.10.3 Clinical Pathologies		19.3.	Diseases	
	18.10.3.1. Foreign Bodies		19.3.1	Osteosarcoma
	18.10.3.2. Idiopathic Megaesophagus		19.3.2	Other Bone Tumors
	18.10.3.3. Neoplasty		19.3.4	Trauma, Old Articular Fractures, Osteomyelitis
Madula 10 Amputations: Thorasia Limb Polyia Limb Caudastamy		19.4. Other Amputations		
Module 19 Amputations: Thoracic Limb, Pelvic Limb, Caudectomy,			19.4.1	Phalange Amputation
Phalanges. Umbilical, Inguinal, Scrotal, Traumatic, Perineal, Diagrammatic			19.4.2	Caudectomy
and Peritoneopericardial Diaphragmatic Hernias			19.4.3	Tumors that Affect the Phalanges
19.1. Thoracic Limb Amputation		19.5.	Umbilical, Inguinal, Scrotal and Traumatic Hernias	
101			OTTIDITIO	al, Iliguillal, Sciolal allu Traufflatic Herrias
19.1.	Indications			Umbilical Hernia
	Pre-operative Considerations Patient Selection and Owner Aesthetic			
	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations		19.5.1	Umbilical Hernia
	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations Surgical Techniques		19.5.1 19.5.2 19.5.3	Umbilical Hernia Inguinal Hernia
19.1.2 19.1.3 19.1.4	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations Surgical Techniques With Scapulectomy	19.6.	19.5.1 19.5.2 19.5.3 19.5.4	Umbilical Hernia Inguinal Hernia Scrotal Hernia
19.1.3 19.1.3 19.1.4 19.1.5	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations Surgical Techniques With Scapulectomy Humeral Osteotomy	19.6.	19.5.1 19.5.2 19.5.3 19.5.4	Umbilical Hernia Inguinal Hernia Scrotal Hernia Traumatic Hernias
19.1.3 19.1.3 19.1.4 19.1.5	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations Surgical Techniques With Scapulectomy Humeral Osteotomy Post-operative Considerations	19.6.	19.5.1 19.5.2 19.5.3 19.5.4 Trauma	Umbilical Hernia Inguinal Hernia Scrotal Hernia Traumatic Hernias tic Hernias
19.1.3 19.1.3 19.1.4 19.1.5	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations Surgical Techniques With Scapulectomy Humeral Osteotomy Post-operative Considerations	19.6.	19.5.1 19.5.2 19.5.3 19.5.4 Trauma 19.6.1	Umbilical Hernia Inguinal Hernia Scrotal Hernia Traumatic Hernias tic Hernias Polytraumatized Patient Care
19.1.3 19.1.3 19.1.4 19.1.5	Pre-operative Considerations Patient Selection and Owner Aesthetic Considerations Surgical Techniques With Scapulectomy Humeral Osteotomy Post-operative Considerations	19.6.	19.5.1 19.5.2 19.5.3 19.5.4 Trauma 19.6.1 19.6.2 19.6.3	Umbilical Hernia Inguinal Hernia Scrotal Hernia Traumatic Hernias tic Hernias Polytraumatized Patient Care Pre-operative Considerations

19.7.1 Anatomy19.7.2 Pathophysiology

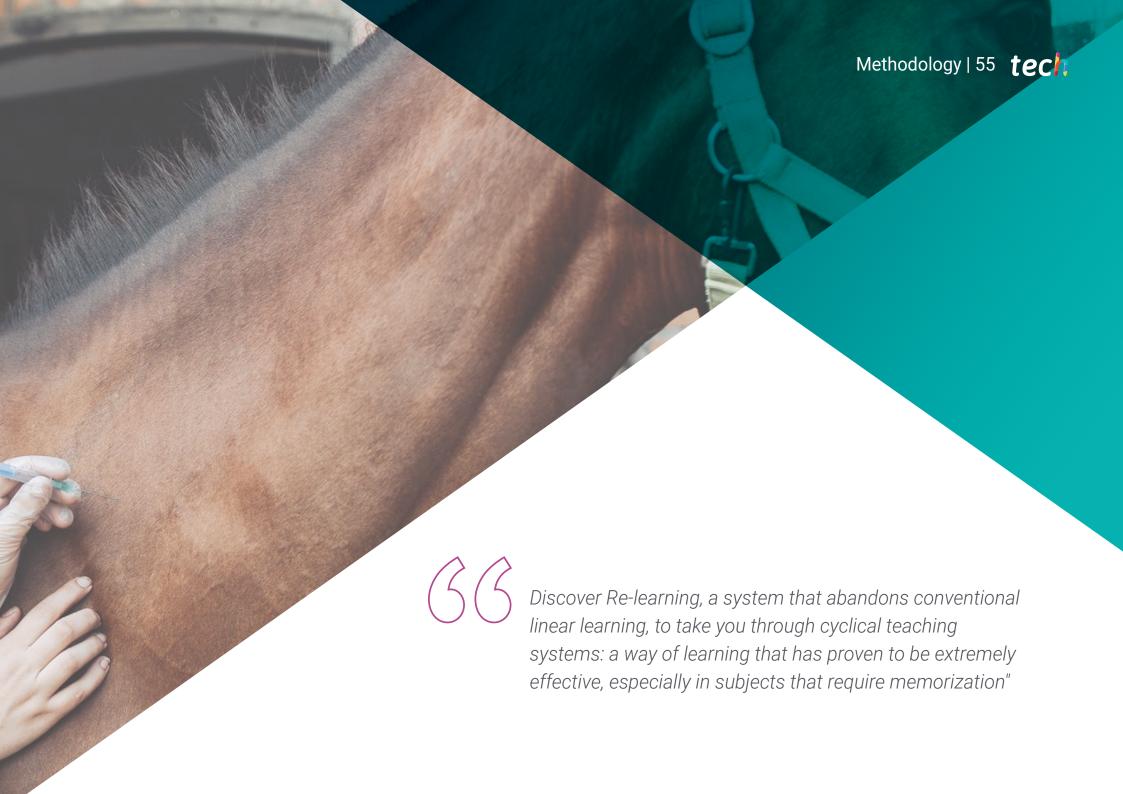
19.7.4 Diagnosis

19.7.3 Types of Perineal Hernias

19.8.	19.8. Perineal Hernia (II)				
	19.8.1	Preoperative Considerations			
	19.8.2	Surgical Techniques			
	19.8.3	Postoperative Considerations			
	19.8.4	Complications			
19.9.	Diaphra	gmatic Hernia			
	19.9.1	Diaphragmatic Hernia			
	19.9.2	Anatomy			
	19.9.3	Diagnosis			
	19.9.4.	Preoperative Considerations			
	19.9.5	Surgical Techniques.			
	19.9.6	Postoperative Considerations			
19.10	. Peritone	eopericardial Diaphragmatic Hernia			
	19.10.1	Anatomy			
	19.10.2	Diagnosis			
	19.10.3	Preoperative Considerations			
	19.10.4	Surgical Techniques.			
	19.10.5	Postoperative Considerations			
Mod	ule 20.	Minimally Invasive Surgery Laparoscopy Thoracoscop			
		al Radiology			
20.1.	History	and Advantages/ Disadvantages of Minimally Invasive Surgery			
20.1.	-	History of Laparoscopy and Thoracoscopy			
		Advantages and Disadvantages			
		New Perspectives			
20.2.		ent and Instruments			
		Equipment			
		Instruments			
20.3.		scopy Techniques Training Program			
		Laparoscopy Sutures			
		Conventional Sutures			
	20.3.3	Mechanical Sutures			
	20.3.3	Mechanical Sutures Laparoscopy Training Program			

20.4.	Laparoscopy (I) Approaches						
	20.4.1	Techniques for Performing Pneumoperitoneum Surgery					
	20.4.2	Port Placement					
	20.4.3	Ergonomics					
20.5.	Laparoscopy (II) Most Common Techniques						
	20.5.1	Ovariectomy					
	20.5.2	Abdominal Cryptorchidism					
	20.5.3	Preventive Gastropexy					
	20.5.4	Hepatic Biopsy					
20.6.	Laparoscopy (III) Less Common Techniques						
	20.6.1	Cholecystectomy					
	20.6.2	Assisted Cystoscopy					
	20.6.3	Digestive Examination					
	20.6.4	Splenectomy					
	20.6.5	Biopsy					
	20.6.6	Renal					
	20.6.7	Pancreatic					
	20.6.8	Lymph Nodes					
20.7.	Thoraco	Thoracoscopy (I) Approaches. Specific Materials					
	20.7.1	Specific Materials					
	20.7.2	Most Common Approaches Port Placement					
20.8.	Thoracoscopy (II) Most Common Techniques Pericardiectomy						
	20.8.1	Indications and Techniques for Pericardiectomy					
	20.8.2	Pericardial Examination Subtotal Pericardiectomy Versus Pericardial Window					
20.9.	Thoracoscopy (II) Less Common Techniques						
	20.9.1	Pulmonary Biopsy					
	20.9.2	Pulmonary Lobectomy					
	20.9.3	Chylothorax					
	20.9.4	Vascular Rings					
20.10.	Interver	ntional Radiology					
	20.10.1 Equipment						
	20.10.2 More Common Techniques						



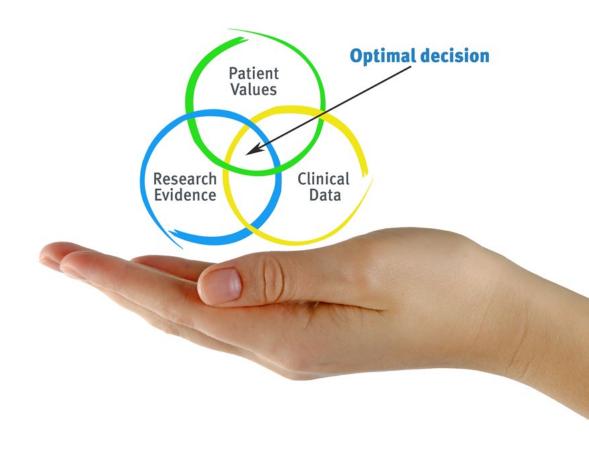


tech 56 | Methodology

At TECH we use the Case Method

In a given situation, what should a professional do? Throughout the program you will be presented with multiple simulated clinical cases based on real patients, where you will have to investigate, establish hypotheses and, finally, resolve the situation. There is abundant scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

With TECH you can 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 psychologist'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:

- Veterinarians who follow this method not only achieve the assimilation of concepts, but also develop their mental capacity, through exercises involving the evaluation of real situations and the application of knowledge.
- 2. The learning process has a clear focus on 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. The feeling of efficiency of the effort invested becomes a very important stimulus for the veterinarian, which translates into a greater interest in learning and an increase in the time spent working on the course.



Re-learning Methodology

At TECH we enhance the Harvard case method with the best 100% online teaching methodology available: Re-learning.

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



Methodology | 59 tech

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

With this methodology we have prepared more than 65,000 Veterinary with unprecedented success in all clinical specialties regardless of the surgical load. All this a highly demanding environment, where the students have a strong socio-economic profile and an average age of 43.5 years.

Re-learning will allow you to learn with less effort and better performance, involving you more in your training, 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 our learning system is 8.01, according to the highest international standards.

tech 60 | 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 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.



Latest Techniques and Procedures on Video

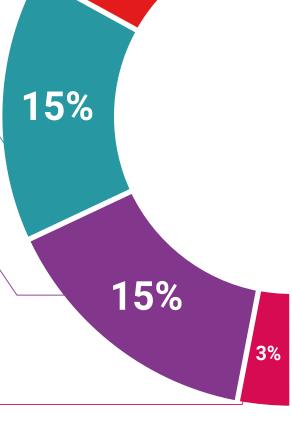
We introduce you to the latest techniques, to the latest educational advances, to the forefront of current medical techniques. All this, in first person, with the maximum rigour, explained and detailed for your assimilation and Studies understanding. And best of all, you can watch them as many times 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 multimedia content presentation training Exclusive 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.



Testing & Re-Testing

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 your goals.



Classes

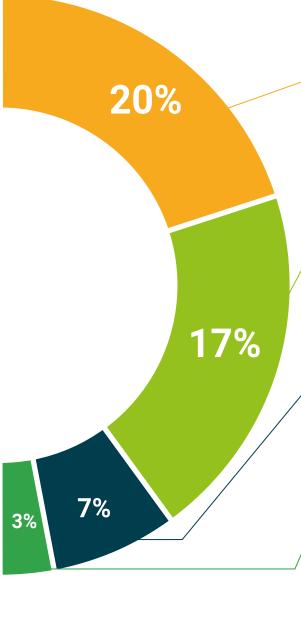
There is scientific evidence suggesting that observing third-party experts can be useful.

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.







tech 64 | Certificate

Advanced Master's Degree in Anesthesia and Small Animals Surgery contains the most complete and up-to-date scientific program on the market.

After passing all the assessments in this course, the student will receive their corresponding **Advanced Master's Degree** from **TECH Technological University**.

This degree contributes to the academic development of the professional and adds a high university level value to their training, and is 100% valid in all competitive examinations, labor exchanges and professional career evaluation committees.

Certificate: Advanced Master's Degree in Anesthesia and Surgery in Small Animals ECTS: 120

Official No of Hours: 3,000 hours.





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

future
health confidence people
education information tutors
guarantee accreditation teaching
institutions technology learning



Advanced Master's Degree Anesthesia and Surgery in Small Animals

- » Modality: online
- » Duration: 2 years
- » Certificate: TECH Technological University
- » Dedication: 16h/week
- » Schedule: at your own pace
- » Exams: online

