Internal Medicine Curriculum
Dermatology Rotation

Contact Person: Dr. C. Rodney Susong

Educational Purpose
Skin disorders represent common reasons for patients to visit their physician. Skin disorders may be self-limited but can also represent life-threatening primary disorders or indicate serious internal disorders. Because of their frequency and potential importance, internists should be able to recognize and initiate management of many common dermatologic disorders. Dermatologic disorders often provide clues to environmental and occupational hazards for the individual patient as well as larger population groups. The dermatology rotation is a one-month experience available to residents at the PGY2 and 3 levels. It is designed to introduce the resident to the principles of dermatologic diagnosis and treatment. During this rotation, residents will see common and sometimes uncommon skin disorders and have an opportunity to participate in learning skin biopsy techniques.

Teaching Methods
Residents participate in the daily office practice of a faculty dermatologist evaluating patients together. Daily didactic sessions provided by the faculty dermatologist include review of assigned teaching slides. Residents are expected to complete the required readings assigned in addition to the rotation reading list so that they can participate fully in these didactic sessions. Residents will apply knowledge of the etiology, pathogenesis, clinical presentation and natural history of dermatologic disorders and will receive instruction in the skills necessary for dermatologic diagnosis. At all times, the confidential nature of the medical practice is emphasized. Residents also participate in monthly dermatology clinic at the University Medical Associates site.

Disease Mix
The following diseases are particularly emphasized:
A. Diagnosis and management of malignant and premalignant skin lesions.
B. Management of acne.
C. Evaluation and management of rashes.
D. Allergic skin disorders.
E. Dermatologic manifestations of systemic illness.

Patient Characteristics
As is typical of outpatient dermatological practices, patients are generally healthy; however all different socioeconomic groups are represented. Between the attending dermatologist’s private office and the Erlanger Dermatology Clinic, a diversity of dermatologic problems in various stages will be seen. The resident can expect to encounter the adolescent with acne, the adult with dermatologic manifestations of systemic illness and the elderly with dermatologic malignancies.
Types of Clinical Encounters
The vast majority of resident clinical encounters are outpatient on this rotation. There are occasional inpatient dermatology consultations, which the resident and attending dermatologist will complete together. The residents are constantly supervised by an on-site faculty dermatologist. During this rotation, residents will observe how a physician’s assistant is utilized in a dermatologist’s practice.

Procedures and Services
Residents participate in decisions to perform and learn various techniques involved in skin biopsies.

Reading List
The following articles from UpToDate are required reading for the Dermatology rotation:
A. Approach to dermatologic diagnosis
B. Approach to the patient with macular skin lesions
C. Approach to the patient with pustular skin lesions
D. Atopic dermatitis
E. Drug eruptions
F. General principles of dermatologic therapy and topical corticosteroid use
G. Keloids
H. Overview of psoriasis
I. Pityriasis rosea
J. Erythema nodosum
K. Metabolic and inherited diseases affecting the skin
L. Tinea versicolor
M. Early syphilis
N. Impetigo; folliculitis; furunculosis; and carbuncles
O. Overview of boils
P. Overview of melanoma
Q. Overview of nonmelanoma skin cancers
R. Primary prevention of melanoma
S. Prognostic factors in melanoma
T. Risk factors for the development of melanoma
U. Screening and early detection of melanoma
V. Treatment of basal cell carcinoma
W. Treatment of cutaneous squamous cell carcinoma
X. Actinic keratosis
Y. Staging work-up for melanoma and follow-up guidelines
Z. USPSTF Guidelines: Screening for skin cancer: Recommendations and rationale.

The following are suggested readings:
A. MKSAP 14 Dermatology
B. Current literature as recommended by supervising attending.
Pathological Material
Results of skin biopsies and excision of lesions are reviewed with the attending dermatologist. In addition, the dermatologic teaching file received by the resident includes review of the histologic appearance of many pathological conditions.

Method of Evaluation
A. Attending evaluation at month’s end.
B. Review of assigned topics and required readings with the attending dermatologist.
C. Attend all scheduled outpatient sessions.

Resident requirements for completion of the dermatology rotation are as follows:
A. Completion of assigned and required readings with attending review.
B. Attend all scheduled outpatient sessions (not including scheduled absences for vacation, continuity clinic, CME, etc.).
C. Understand the essentials of performing biopsies.
D. Be able to recognize common malignant and pre-malignant skin conditions.
E. Understand the clinical use of topical steroids as well as complications.
F. Understand the principles of management of acne as well as the indications for different treatments.
G. Prepare case reports for poster presentation, if assigned.

Accreditation Council on Graduate Medical Education
“Every competency can be taught with every patient.” B. Joyce, 2006
http://www.acgme.org/Outcome

PATIENT CARE
Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:
- communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families
- gather essential and accurate information about their patients
- make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
- develop and carry out patient management plans
- counsel and educate patients and their families
- use information technology to support patient care decisions and patient education
- perform competently all medical and invasive procedures considered essential for the area of practice
- provide health care services aimed at preventing health problems or maintaining health
- work with health care professionals, including those from other disciplines, to provide patient-focused care

**MEDICAL KNOWLEDGE**
Residents must demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care. Residents are expected to:
- demonstrate an investigatory and analytic thinking approach to clinical situations
- know and apply the basic and clinically supportive sciences which are appropriate to their discipline

**PRACTICE-BASED LEARNING AND IMPROVEMENT**
Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Residents are expected to:
- analyze practice experience and perform practice-based improvement activities using a systematic methodology
- locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems
- obtain and use information about their own population of patients and the larger population from which their patients are drawn
- apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
- use information technology to manage information, access on-line medical information; and support their own education
- facilitate the learning of students and other health care professionals

**INTERPERSONAL AND COMMUNICATION SKILLS**
Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients' families, and professional associates. Residents are expected to:
- create and sustain a therapeutic and ethically sound relationship with patients
- use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills
- work effectively with others as a member or leader of a health care team or other professional group

**PROFESSIONALISM**
Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Residents are expected to:
- demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supercedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development
- demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- demonstrate sensitivity and responsiveness to patients’ culture, age, gender, and disabilities

**SYSTEMS-BASED PRACTICE**
Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value. Residents are expected to:
- understand how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice
- know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance
Dermatology Rotation Checklist

Intern/Resident _______________________________ PGY (circle one)  1, 2  or  3

Supervising Faculty ___________________________ Month ________________

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<tr>
<th>Rotation Check List</th>
<th>Yes</th>
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<th>Comments</th>
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<tr>
<td>Reviewed the goals and objectives at the beginning of the rotation</td>
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<td>Evaluation and feedback mid month</td>
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<td>Evaluation and feedback at the end of rotation</td>
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<td>Attended all scheduled clinical sessions</td>
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<td>Completed assigned readings.</td>
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<td>Completed required case reports/abstracts/posters</td>
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<td>Performed at or above the expected PGY level. Please check one.</td>
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<td><strong>PGY 1 Residents are responsible</strong></td>
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<td>- for gathering relevant patient data</td>
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<td>- performing and interpreting physical examination findings</td>
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<td>- perform basic procedures and interpret data</td>
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<td>- interpret laboratory tests</td>
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<td>- interpret basic radiographic studies</td>
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<td><strong>PGY-2 will have improved competence and demonstrate</strong></td>
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<td>- improved data gathering and physical examination skills</td>
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<td>- improved knowledge</td>
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<td>- improved decision making</td>
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<td>- enhanced ability to counseling</td>
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<td><strong>PGY-3 will approach mastery and demonstrate the ability to function as consultant</strong></td>
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<td>Reviewed and met the core competencies as outlined. Please give at least one additional example. <strong>Patient Care</strong></td>
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<td>• Residents will obtain and document appropriate history taking, physical exam and laboratory interpretation skills for patients presenting with dermatologic disorders</td>
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<td>• Residents will develop appropriate treatment plans for patients with skin problems</td>
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<td>• Understand the essentials of performing biopsies</td>
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<td><strong>B. Medical Knowledge</strong></td>
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<td>• Residents will be able to define and describe various problems related to acne, rashes, allergic skin disorders, malignant and premalignant skin conditions and dermatologic manifestations of systemic illness</td>
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### C. Practice Based Learning
- Residents will develop and implement treatment plans by utilizing appropriate information systems and resources to help manage dermatologic diseases

### D. Interpersonal and Communication Skills
- Residents will communicate diagnosis, treatment plan and follow up care to patients and their families.
- Residents will demonstrate ability to relate to physicians extenders

### E. Professionalism
- Residents will recognize the importance of patient preferences when selecting diagnostic and therapeutic options.
- Demonstrate ongoing commitment to self directed learning.

### F. Systems-Based Practice
- Residents will be able to develop, implement and evaluate treatment plans for patients that include determining when to obtain consultations for Dermatologic conditions
- Residents will be able to develop, implement and evaluate treatment plans that are cost effective
- Residents will be able to recognize clues to environmental and occupational hazards for larger groups of patients

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All items must be completed for rotation credit and checklist returned to the Department of Medicine.