

Dermatology Curriculum

The Educational Purpose

“Dermatology is the management of disorders of the skin, mucous membranes, and adnexal structures, including inflammatory, infectious, neoplastic, metabolic, congenital, and structural disorders. A basic understanding of medical and surgical interventions and dermatopathology are important facets. By the completion of the UH internal medicine residency, the resident should have a general knowledge of the major diseases and tumors of the skin. He or she should be proficient at examining the skin; describing findings; and recognizing skin signs of systemic diseases, normal findings (including benign growths of the skin), and common skin malignancies. The resident should be able to diagnose and manage a variety of common skin conditions and make referrals where appropriate.”

Patient Care

Goal #1: 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.

Objective #1: Residents must be able to gather essential and accurate patient information to assess patient concerns, with special attention to the following presentations:

Place a check mark indicating your achievement of the learning objective.

PGY-1	<input type="checkbox"/>	Leg Ulcers	<input type="checkbox"/>	Verrucous Lesions
	<input type="checkbox"/>	Intertrigo	<input type="checkbox"/>	Papule or Nodule
	<input type="checkbox"/>	Pruritus	<input type="checkbox"/>	Hair Loss
PGY-2	<input type="checkbox"/>	Abnormal Pigmentation	<input type="checkbox"/>	Eruptions (eczematous, follicular, papulosquamous, vascular, vesicur, resicalobullous)
	<input type="checkbox"/>	Hirsutism	<input type="checkbox"/>	Purpura
	<input type="checkbox"/>	Pigmented Lesions	<input type="checkbox"/>	

Objective #2: Residents will be able to develop and carry out patient management plans by making informed decisions on diagnostic and therapeutic interventions, counseling and educating patients and their families, and preventing health problems or maintaining health based on patient information and preferences, up-to-date scientific evidence, and clinical judgment with special attention to the following illnesses or conditions:

Place a check mark indicating your achievement of the learning objective.

PGY-1		Abscess		Stasis Dermatitis
		Cellulitis		Dyshidrotic Eczema
		Condyloma		Nummular Eczema
		Atopic Dermatis		Acne
		Seborrheic Dermatitis		Folliculitis
		Fungal, Yeast Infections		Urticaria
		Infestations with Scabies and Lice		Drug rashes
		Molluscum Contagiosum		
PGY-2		Rosacea		Actinic Keratosis
		Syphilis		Squamous Cell Carcinoma
		Psoriasis		Basal Cell Carcinoma
		Erythema Nodosum		Pityriasis Rosea
		Skin Ulcers		Erythema Multiforme
		Vasculitis		Herpes Simplex Infection
		Viral Exanthems		Herpes Zoster Infection
PGY-3		Melanoma		Toxic Epidermal Necrolysis
		Skin Manifestations of Systemic Disease (SMSD): Kaposi Sarcoma, Dermatomyositis, SLE, Inflammatory Bowel Disease, Scleroderma, Diabetes Mellitus, Sepsis, Thyroid Disease, Gastrointestinal Polyposis, and Internal Malignancy		
		SMSDL Liver Disease		Screening for Skin Cancer

Objective #3: Residents must competently perform and interpret the results of all diagnostic and therapeutic medical and invasive procedures considered essential after obtaining informed consent, with confidence and minimal discomfort to patients:

Place a check mark indicating your achievement of the learning objective.

PGY-1		Skin Scraping for KOH Prep		Incision and Drainage for Dx or Rx
PGY-2		Application of Chemical Destructive Agents for Skin Lesions		Skin Biopsy: punch and shave biopsies

Objective #5: Residents must work effectively with other health care professionals including those from other disciplines, to provide patient-focused care.

Place a check mark indicating your achievement of the learning objective.

PGY-2		Residents should know general indications for appropriate specialty referrals, and be able to accurately describe skin lesions and clinical presentation to those specialists.		
-------	--	--	--	--

Medical Knowledge

Goal #2: 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.

Objective #2: Residents must know and apply the basic and clinical supportive sciences applicable to Dermatology with special attention to:

Place a check mark indicating your achievement of the learning objectives below.

PGY-1		The Histology of Skin, including basic dermatopathology		The Classification of Skin Lesions
		Diagnostic methods		Basic therapeutic principles

Practice-Based Learning and Improvement

Goal #3: Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning.

Objective #4: Residents must be able to analyze practice experience and perform practice-based improvement activities using a systematic methodology.

Place a check mark indicating your achievement of the learning objectives below in the area of Dermatology.

PGY-1		Patient education on proper skin care for sensitive skin, infections, and chronic pruritic skin disorders.
-------	--	--

The Teaching Methods

Supervised patient care

Dermatology clinic at Queen Emma Clinics (Wednesdays)

Dermatology clinic at the VA

Clinical dermatology rotation (Elective)

Clinical Dermatology Core-Curriculum CD-ROM (required)

Program Conferences

Dermatology Grand Rounds at Queens Medical Center (HI dermatology society: 2nd Wednesday of every month from 7-10am, QEC board room)

Derm-pathology conferences (2nd and 4th Thursday of every month from 1-2pm, QMC , QET 4th floor)

Dermatology Journal Club (HI dermatology society: 2nd Wednesday of every month from 10-11am, QEC Board Room)

Dermatology Reading List

Miller AJ, Mihm MC Jr. Melanoma. N Engl J Med. 2006 Jul 6;355(1):51-65.

Rubin AI, Chen EH, Ratner D. Basal-cell carcinoma. N Engl J Med. 2005 Nov 24;353(21):2262-9.

Williams HC. Clinical practice. Atopic dermatitis. N Engl J Med. 2005 Jun 2;352(22):2314-24.

Schon MP, Boehncke WH. Psoriasis. N Engl J Med. 2005 May 5;352(18):1899-912.

James WD. Clinical practice. Acne. N Engl J Med. 2005 Apr 7;352(14):1463-72.

Powell FC. Clinical practice. Rosacea. N Engl J Med. 2005 Feb 24;352(8):793-803.

Morison WL. Clinical practice. Photosensitivity. N Engl J Med. 2004 Mar 11;350(11):1111-7

Recommended Reference Textbooks:

James, William D, et.al. Andrew's Diseases of the Skin: Clinical Dermatology

Fitzpatrick, Thomas B. Color Atlas and Synopsis of Clinical Dermatology: Common and Serious Disease

Callen, Jeffrey P, et. al. Dermatological Signs of Internal Disease

Revised by Cecily Ling, MD, Allan Izumi, MD 2007

Reviewed and Approved by Curriculum Task Force February 6, 2007

Approved by Curriculum Committee April 2, 2007