



**Dermatology Curriculum** 

NGMC- Family Medicine Residency Program Gainesville. Ga

PGY-3

# **Description of Rotation:**

This is a two-week block Dermatology experience with direct and indirect supervision by dermatologists and family medicine physicians. Supplemental longitudinal learning in the FMP supervised by family physician faculty is also expected. Residents will spend 4 half days in an outpatient dermatology office and supplement with online learning.

### **Overall Goals of Dermatology Rotation:**

The overall educational goal for the dermatology component in the Family Medicine Residency will be that the residents gain competence in managing a variety of dermatology situations and that they gain competence in utilizing the consultant process in skin disorders. The specialty of Family Practice is interested in dermatologic care with emphasis on comprehensive and continuing care. Each family physician should be aware of the impact of skin problems upon a patient and the family and be willing and capable of performing a preventive and therapeutic role in these cases. Significant in the preventive role are the environment and occupational effects which may disturb the skin. Interaction with the family of any patient who has skin problems should be stressed in education of the family physician. In addition, family physicians must be taught to be sensitive to the damage that can be done to the skin by in appropriate care. It is expected that the family physician will become proficient in diagnosis and treatment of patients with many kinds of skin diseases. The family physician may find it appropriate to seek consultation from a dermatologist, and actively engage in the co-management of the patient. In some cases, referral to a dermatologist for management is indicated. Educational objectives for this experience will include educational experiences in dermatology including conferences and didactic programs during the 3 year program.

During this rotation residents will become familiar with the following:

- Obtaining adequate information through history and physical examination with assistance as needed from attending physicians.
- Evaluation of patients with skin disorders for appropriate workup.
- Quality care markers and published guidelines for specific disease states such as eczema, acne, psoriasis and skin neoplasms.
- Discussing overall situation, plan of care and prognosis of patients who are being evaluated for skin disorders and lesions
- Handling minor dermatologic procedures.
- Counseling or referring on major dermatologic procedures.
- Discerning the psychological aspects of disease of the skin and appropriately managing these problems.

#### **Patient Care Objectives and Competencies**

- PC-1: Cares for Acutely ill or injured patients in urgent and emergent situations in all settings.
- PC-2: Cares for patients with chronic conditions.
- PC-3: Partners with the patient, family, and community to improve health through disease prevention and health promotion.
- PC-4: Partners with the patient to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment, in a patient-centered, cost-effective manner.

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## **Objectives:**

- Perform an adequate history and physical examination of the adult and pediatric patient with a skin disorder (PC-1)
- Develop a rational plan of care for these patients including diagnostic testing, initiation and alteration of medications, and specialty consultation
- Maintain adequate, compassionate communication between the patient and medical staff
- Establish a reasonable and safe cadence of outpatient follow-up of patients (PC-4)
- Develop skills that allow for up to date, compassionate care of the adult and pediatric patient with a skin disorder while integrating evidence-based medicine, local standards of care, nationally defined quality care markers and specialty recommendations upon consultation.
- Develop skills in the following procedures commonly performed by Family Medicine Physicians
  - Skin Punch Biopsy
  - Excisional Biopsy
  - Cryotherapy
  - Foreign Body Removal
  - Laceration Repair
  - I&D Abscess
  - o Regional Anesthesia
  - Wound Debridement

## **Medical Knowledge Objectives and Competencies**

#### **Objectives:**

- Evaluate, diagnose, and manage patients with the following dermatologic conditions including but not limited to: (MK-1, MK-2)
  - Major and Minor Burns
  - Lacerations
  - Papulosquamous skin disorders such as psoriasis, pityriasis, miliaria, superficial fungal infection and granuloma annular
  - o Vesicobullous skin disorders such as impetigo, herpes simplex, herpes zoster and varicella

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- Eczema and atopic dermatitis
- Macular eruptions
- Urticarial eruptions
- Bites and stings
- Pyodermas
- Acne vulgaris





- Rosacea
- o Pigmented Lesions such as tinea versicolor and vitiligo
- Benign neoplasms such as verruca, molluscum, milia, skin tags(acrochordons), corns and calluses and seborrheic keratosis
- o Premalignant lesions such as actinic keratosis, keratoacanthoma, melanoma in-situ
- o Malignant lesions such as basal cell, squamous cell, malignant melanoma
- Cutaneous manifestations of systemic disease
- o Hair problems such as alopecia, telogen effluvium pseudo folliculitis and trichotillomania
- o Nail problems such as onychomycosis, ingrown toenails and paronychia
- Demonstrate an in-depth knowledge of the normal anatomy and physiology of the skin. (MK-1, MK-2)

## Topics to cover in rotation:

MK Topic	On-Line Resource
AAFP Skin Condition	https://www.aafp.org/afp/topicModules/viewTopicModule.htm?topicModuleId=21
Module	
Common Hair Loss	https://www.aafp.org/afp/2003/0701/p93.pdf
Disorders	
Treating Hair Loss	https://www.aafp.org/afp/2009/0815/p356.pdf
Acne	https://www.aafp.org/afp/2017/0601/p740.html
Removal of Unwanted	https://www.aafp.org/afp/2002/1115/p1907.pdf
Hair	
Shave and Punch Biopsy	https://www.aafp.org/afp/2011/1101/p995.html
Intertrigo and Secondary	https://www.aafp.org/afp/2005/0901/p833.pdf
Skin Infections	
Common Bacterial Skin	https://www.aafp.org/afp/2002/0701/p119.pdf
Infections	
Contact Dermatitis	https://www.aafp.org/afp/2010/0801/p249.pdf
Lichen Planus	https://www.aafp.org/afp/2011/0701/p53.pdf
Pigmentation Disorders	https://www.aafp.org/afp/2017/1215/p797.pdf
Erythema Multiforme	https://www.aafp.org/afp/2006/1201/p1883.pdf
Cutaneous Malignant	https://www.aafp.org/afp/2012/0115/p161.html
Melanoma	
Basal/Squamous Cell	https://www.aafp.org/afp/2012/0715/p161.pdf
Carcinomas	
Mohs Surgery	https://www.aafp.org/afp/2005/0901/p845.pdf
Sunscreen	https://www.aafp.org/afp/2010/1015/p989.pdf
Hyperhidrosis	https://www.aafp.org/afp/2018/0601/p729.pdf
Lyme Disease	https://www.aafp.org/afp/2012/0601/p1086.html
Non-genital HSV	https://www.aafp.org/afp/2010/1101/p1075.html
Herpes Zoster	https://www.aafp.org/afp/2017/1115/p656.html
Pediculosis and Scabies	https://www.aafp.org/afp/2012/0915/p535.html
Cutaneous Cryosurgery	https://www.aafp.org/afp/2012/1215/p1118.html
Molluscum/Warts	https://www.aafp.org/afp/2003/0315/p1233.pdf
Nongenital Warts	https://www.aafp.org/afp/2003/0315/p1233.pdf
	https://www.aafp.org/afp/2011/1201/p1290.pdf
Generalized Rash	https://www.aafp.org/afp/2010/0315/p726.pdf
	https://www.aafp.org/afp/2010/0315/p735.pdf

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Atopic Dermatitis	https://www.aafp.org/afp/2012/0701/p35.pdf
Seborrheic Dermatitis	https://www.aafp.org/afp/2015/0201/p185.pdf
Psoriasis	https://www.aafp.org/afp/2013/0501/p626.pdf
Benign Skin Tumors	https://www.aafp.org/afp/2015/1001/p601.html
Dermatophyte Infection	https://www.aafp.org/afp/2003/0101/p101.html

### **Interpersonal and Communication Skills Objectives and Competencies**

### **Objectives:**

- Communicate effectively with patients and their families while in the presence of their daily preceptor. (C-1, C-2, C-3)
- Convey information in a clear and concise manner to patients, families, and other health professionals (i.e., use appropriate vocabulary choice, realistic outcomes, and working with difficult patients and family) (C-1)

#### **Practice Based Learning and Improvement Objectives and Competencies:**

#### **Objectives:**

- Develop education tools to help meet the needs of patients (PBLI-2)
- Incorporate evidence-based medicine and resources into the care of dermatologic patients. (PBLI-1)
- Review current literature relevant to the care of individual patients and the community. (PBLI-1)

## **Professionalism Objectives and Competencies:**

- PROF-1: Completes a process of professionalization
- PROF-2: Demonstrates professional conduct and accountability
- PROF-3: Improves systems in which the physician provides care

#### **Objectives:**

- Provide compassionate, high quality care to all patients regardless of gender, age, culture, race, religion, disabilities, sexual orientation or socioeconomic class (PROF-1)
- Gave confidence with appropriate referral verses watchful waiting through developing relationships with dermatologists or other health care providers. (PROF-3)

#### **Systems Based Practice Objectives and Competencies**

- SBP-1: Provides cost-conscious medical care
- SBP-2: Emphasizes patient safety
- SBP-3: Advocates for individual and community health
- SBP-4: Coordinates team-based care

#### **Objectives:**

- Identify when an individual patient needs more specialized resources to meet their needs; demonstrate knowledge if these resources are available and where to find them; and utilize information technology to help find additional resources for patients. (SBP-4)
- Demonstrate understanding of the cost-conscious care as it pertains to dermatology care of patients (SBP-1)

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