

**University of Washington Dermatology Residency Program  
Rotation Site Objectives by Competency & Year of Training  
Harborview Medical Center**

May 2008

Roy Colven, MD, Program Director

**Overall Site Goal:** To provide excellent dermatological care in a rich learning environment to the mission populations at Harborview Medical Center.

**HMC Dermatology Team Structure:**

Attending Physicians: Roy Colven, Philip Kirby, Marshall Welch

Dermatology Resident on rotation

Dermatology P.A.: Heather Pullen (Present in clinics Monday & Wednesday)

UW 4<sup>th</sup> year medical Student

Heidi Sitton, RN, Medical Specialties

Sheri Ewers, MA, Medical Specialties, including Wound Care

Carrie Barbee, Patient Care Coordinator, Medical Specialties

**Contact for ORCA training at HMC:**

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HMC - Patient Care Information System, Educator/Application Support

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**Principle Teaching Methods and Descriptions:**

1. Ambulatory dermatology patient care  
Most of the clinical education on this rotation occurs in the outpatient clinic. Here the trainee has the opportunity to manage first hand common and uncommon skin diseases under the supervision of the attending dermatologist. Areas emphasized include: differential diagnosis, laboratory evaluation, therapeutics and monitoring. All minor procedures, including skin biopsy, cryotherapy, debridement and lesion injection can be carried out by the trainee once proficiency is demonstrated.
2. Inpatient dermatology consultations  
Consultations requested by other hospital services are primarily managed by the dermatology resident, under the supervision of the attending dermatologist. The resident is responsible for initially seeing the patient for whom a consultation is requested, appraising the supervising attending that a consultation has been requested, and to arrange a mutually agreed time for examining the patient as a team.
3. Dermatopathology review  
All biopsies and excisions submitted by the Dermatology Service are reviewed at a weekly dermatopathology review conference (held on Friday afternoons), held in conjunction with the Pathology department. Specimens and their clinical images are viewed together to enhance clinicopathologic correlation.
4. Medicine/Dermatology rounds  
This is a weekly bedside teaching activity held in conjunction with the Department of Medicine's 3<sup>rd</sup> year medical student program. Our section is responsible for providing patients with demonstrable skin findings pertinent to medical dermatology.

5. Case image review

Clinical images from the attending physicians' collections are shown to broaden understanding of conditions not necessarily seen in patient care.

6. Evaluation and feedback

Informal and formal feedback is given to trainees to allow for adjustments in practice. Formal feedback occurs by way of direct verbal response after observation by the attending dermatologists, in the case of dermatology residents, and dermatology residents, in the case of medical students. A Clinical Exam (CEX) consisting of observation of the resident carrying out a complete history and physical of a new patient, along with feedback, will occur at least once during each rotation.

7. Didactic conferences

The Department of Medicine noon conference is available for attendance by dermatology trainees. This occurs on Mondays. Chief of Medicine Conference is a Case-based conference that not infrequently involved discussion of patients seen by our service in the inpatient setting.

**Educational Content:**

Harborview serves patient populations that allow for a unique clinical experience on this rotation. In general, HMC provides the majority of indigent care for King County and adjacent areas. This population is quite diverse and includes homeless individuals, and emigrants and refugees from other countries. As access to medical care can be impaired in these groups, many of the skin conditions seen at Harborview can be quite advanced, and in some cases exotic. HMC also provides comprehensive care for HIV-infected patients, including dermatological care. The HMC Dermatology Section offers a referral Contact Dermatology clinic (run by Dr. Welch) and a Hansen's Disease (leprosy) clinic (run jointly by Drs. Kirby and Harnisch).

The other mission populations of HMC are incarcerated individuals and other institutionalized patients.

Because of the diversity of these groups, the mix of skin diseases seen at HMC is likewise diverse. Trainees will see common conditions, such as inflammatory dermatoses, common infections, and skin cancer.

**Rotation Specific Schedule**

**Monday**

8:30-12:00	Continuity Clinics
1:00-5:00	Madison HIV Clinic; inpatient consultations

**Tuesday**

9:00-12:30	Inpatient consultations; administrative time
1:00-5:00	Contact Dermatology Clinic

**Wednesday**

7:00 – 11:00	Didactics at UWMC-Roosevelt
1:00-5:00	General Dermatology Clinic

### Thursday

6:30-10:00	Conferences at UWMC
11:00-5:00	Inpatient consultations; Contact Dermatitis Clinic; administrative time

### Friday

8:30-12:30	General Dermatology Clinic
1:00-5:00	1:00 pm Dermatopathology review; 2:00 pm Medicine/Dermatology Rounds; Inpatient consultations

### Call and Weekend Responsibilities

Per the UW Dermatology Residency Program Call schedule.

### Principle Educational Materials Used

**Recommended Readings:** Andrews' Textbook of Dermatology, Bologna's Dermatology, Lever, Weedon, or McKee's textbook of Dermatopathology; Wolverton's Comprehensive Dermatology Therapy; Fischer's Contact Dermatitis.

### Methods Used in Evaluating Resident and Program Performance

1. Informal discussion of practice behavior observed in clinical settings
2. Observed clinical exam.
3. Residents' evaluation of rotation.
4. Attending evaluation of resident performance at rotation's end.

### Explicit Lines of Responsibility for Care of Patients on this Service

#### Attending:

Must see every patient with the trainee, providing guidance, feedback and supervision. Be present for key elements of procedures and available for entire procedure. Provide reinforcing and corrective feedback based from observed behavior of the resident.

Demonstrate procedures in dermatology and supervise subsequent performance of these procedures.

#### Resident:

Be principally responsible for seeing and documenting visits with outpatients, fielding and initiating inpatient consultations, and sharing in the supervision of the dermatology medical student rotating at HMC. Also, phone follow-up with dermatology patients (lab/biopsy results, telephone prescriptions when appropriate) is the primary responsibility of the dermatology resident.

## First Year - Resident Goals & Competency-based Learning Objectives

Goal: Provide competent and sensitive dermatological care to the diverse population served by Harborview Medical Center.

### Learning Objectives by Competency:

#### A. Patient Care

1. Gather a complete medical history.
2. Perform and document a complete exam of the skin and other organ systems relevant to the patient's general and cutaneous health.
3. Learn and use appropriately, consistently and accurately the language of dermatology.
4. Become facile with synthesizing and interpreting data in the care of progressively more complex cutaneous disease.
5. Generate a basic differential diagnosis based on lesion morphology.
6. Select clinically appropriate ancillary studies in the management of patients.
7. Demonstrate skill in preparing clinic/office-based diagnostic tests, including KOH prep, scabies prep, Gram's stain, Wood's lamp exam, and begin to independently interpret them.
8. Articulate and understand the need for skin biopsy in a given patient, site selection, and the relative advantage of the technique used.
9. Formulate a plan of care in concert with the attending dermatologist and support staff.
10. Assume an active role in the medical management of patients, including
  - a. Therapy selection
  - b. Side effects and monitoring
  - c. Observing the counseling of patients on risks, benefits and alternatives to selected therapy or procedure.
  - d. Help to educate the patient and provide rationale for treatment options.
  - e. Building awareness of pertinent drug-drug **interactions**.
11. Demonstrate competence in cryotherapy, including:
  - a. Selection of appropriate conditions.
  - b. Counseling patients on risks, benefits and alternatives to cryotherapy.
  - c. Careful application of liquid nitrogen after observing competent performance by a supervisor.
  - d. Understand the management of complications of cryotherapy.
12. Perform an appropriate pre-operative assessment and of candidates for skin surgery.
13. Independently obtain informed consent for any cutaneous procedures performed.
14. Demonstrate competence in electrosurgery, including:
  - a. Selection of appropriate uses for electrosurgery.
  - b. Counseling patients on risks, benefits and alternatives to electrosurgery.
  - c. Understands and distinguish the different modes of electrosurgery (electrodessication, electrofulguration, and electrocautery).
  - d. Understands risks to operator of electrosurgery unit.
  - e. Understand the management of complications of electrosurgery.
15. Begin to demonstrate competence in excisional skin surgery with simple closure, including
  - a. Selection of appropriate lesions and closure technique.
  - b. Understand the appropriate surgical anatomy issues for the above procedure on most body sites.

- c. Counseling patients on risks, benefits and alternatives to surgery.
  - d. Skilled performance of the above procedure under present and qualified supervisory observation.
  - e. Understand risks to operator and assistant during surgery.
  - f. Understand the management of complications of the above procedure.
16. Begin to demonstrate competence in excisional skin surgery with layered closure.
- a. Selection of appropriate lesions and closure technique.
  - b. Understands the appropriate surgical anatomy issues for the above procedure on most body sites.
  - c. Counseling patients on risks, benefits and alternatives to surgery.
  - d. Skilled performance of the above procedure under present and qualified supervisory observation.
  - e. Understand risks to operator and assistant during surgery.
  - f. Understand the management of complications of the above procedure.
17. Understand the indications for excisional skin surgery with closures involving flaps and/or grafts, including:
- a. Selection of appropriate lesions and closure technique.
  - b. Understand the appropriate surgical anatomy issues and vector forces relevant to restoration of function and aesthetics for the above procedure on most body site.
  - c. Counseling patients on risks, benefits and alternatives to surgery.
  - d. Observation of and assistance with the above procedure.
  - e. Understands risks to operator and assistant during surgery.
  - f. Management of complications of the above procedure.
18. Understand the principles of and appropriate selection of cutaneous diseases and patients for ultraviolet light therapy.
19. Understand the principles of contact patch testing and competently read a standard patch testing panel.
20. Understand the principles of moist wound healing and has demonstrated appropriate selection of wound dressings.
21. Gain a longitudinal perspective on the delivery of health care through individualized continuity dermatology clinic patient panels.

## B. Medical Knowledge

1. Demonstrate an emerging knowledge base in the basic sciences relevant to dermatology.
  - a. Begin to apply the principles of microbiology, cutaneous oncology, immunology and genomics, including molecular diagnostic techniques, to the counseling and management of patients with dermatologic disorders.
2. Demonstrates an emerging knowledge base in clinical dermatology.
  - a. Begin to apply the principles of general clinical medicine, epidemiology, infection control, and the social sciences to the counseling and management of patients with dermatologic disorders.
3. Demonstrates an emerging knowledge base in medical therapeutics used in dermatology, including:
  - a. Topical therapies
  - b. Systemic therapies
  - c. Side effect of therapies
  - d. Interactions between therapeutic agents

- e. Monitoring tests for side effects and frequency of monitoring.
- 4. Demonstrates an emerging knowledge base in surgical diagnostics and therapeutics used in dermatology, including
  - a. Equipment and materials used in skin surgery
  - b. Critical surgical anatomy
  - c. Principles and techniques of effective hemostasis
  - d. Appropriate tissue margins for cutaneous neoplasms
  - e. Appropriate biopsy technique
  - f. Appropriate referral to a Mohs and/or plastic surgeon
  - g. Appropriate tissue handling, including orientation, requesting special stains, and use of immunofluorescence for optimal dermatopathologic interpretation.
- 5. Retains core knowledge over time.
- 6. Competently teaches others in the above core knowledge areas.
- 7. Thoroughly and critically reads up-to-date textbooks of dermatology to enhance a comprehensive understanding of the specialty.

#### C. Practice-based learning and improvement

- 1. Actively participate in and comes prepared for didactic and patient-centered conferences conducted at the rotation site.
- 2. Demonstrate active, self-directed learning.
- 3. Access best-evidence for clinical decision making.
- 4. Demonstrate emerging metacognition of errors in patient care, gaps in core knowledge and suboptimal interpersonal communication and takes steps to correct them.
- 5. Gain insight for improvement in clinical efficiency.
- 6. Apply newly acquired medical knowledge to patient care.
- 7. Understand the principles of precision, accuracy, sensitivity and specificity as applied to diagnostic tests.
- 8. Demonstrate an emerging facility and diligence in accessing information assessing the safety, efficacy, adverse event profile, and cost of therapy or prevention.
- 9. Demonstrate an emerging facility and diligence in accessing information assessing outcomes of disease and interventions.
- 10. Maintain appropriate records documenting practice activities (such as patient and surgical logs).
- 11. Learn to write effective test questions for peer and self-study.
- 12. Begin a lifelong habit of critical reading of the medical literature to remain current in dermatology and related fields.
- 13. Understand the process of peer review of journal submissions.
- 14. Synthesize information from a variety of sources, including print and electronic.

#### D. Interpersonal communication

- 1. Empathically listen.
- 2. Consistently use a compassionate, courteous and respectful demeanor in the work setting.
- 3. Effectively communicate with other physicians and staff in a manner that respects patient privacy.
- 4. Develop and maintain positive interactions with support staff that promotes team spirit.

5. Effectively counsel and educate patients, their families and caregivers in a timely fashion.
6. Present gathered patient information completely and lucidly.
7. Function effectively as an integral part of a dermatology team.
8. Offer sensitive and constructive feedback.
9. Respond positively to appropriately delivered feedback.
10. Communicate clearly with referring physicians in written language.
11. Document in the medical record all interactions with patients in a timely thorough and lucid manner.
12. Learn and apply the language of dermatologic description.
13. Effectively summarize and publicly present a critical analysis of a patient case.
14. Effectively present to a group for understanding the methods, results and conclusions of investigative medical papers.

#### E. Professionalism

1. Consistently demonstrates ethical conduct.
2. Creates and maintains healthy and positive relationships with other residents, faculty and students.
3. Consistently displays emotional maturity.
4. Consistently demonstrates dependable behavior in patient care, follow-up and administrative tasks.
5. Consistently dresses in a neat and professional manner.
6. Consistently is punctual for clinical work and didactics.
7. Consistently demonstrates respectful behavior toward faculty, staff, co-residents, students, and patients.
8. Demonstrates sensitivity to issues of culture, age, gender, and disability.
9. Demonstrates initiative in patient care.
10. Demonstrates initiative in resolving conflicts.
11. Considers and grapples with ethical issues including research fraud, informed consent, cost of medical care, billing and compensation issues, withholding of care, appropriateness of treatment, conflict of interest with pharmaceutical companies, and use of human subjects in research.

#### F. Systems-based practice

1. Demonstrate an emerging knowledge of cost-effective care.
2. Begin to understand how different practice systems function to deliver care.
3. Begin to learn how to utilize non-dermatologist staff effectively as part of the health care team, including:
  - a. Ancillary medical staff
  - b. Clinic administrative staff
  - c. Social workers
  - d. Medical interpreters
4. Demonstrate when and who to call for appropriate consultation.
5. Begin to provide effective specialty consultation.
6. Positively interact with non-department healthcare providers.
7. Attend relevant non-department learning opportunities.
8. Begins to gain a global perspective on dermatology through the reading of the dermatological literature originating from other countries.
9. Begin to learn the rules of documentation and coding of a given level of patient care.
10. Begin to appreciate health care financing and different payment schemes.

## **Second Year - Resident Goals & Competency-based Learning Objectives**

**Goal:** Provide competent and sensitive dermatological care to the diverse population served by Harborview Medical Center that adheres to the principles of service excellence.

### Learning Objectives:

#### A. Patient Care

1. Consistently gather a complete medical history with attention to the nuances and pitfalls of speaking to the patient through a language interpreter.
2. Efficiently perform and document a complete exam of the skin and other organ systems relevant to the patient's general and cutaneous health.
3. Consistently and accurately use the language of dermatology, incorporating supervisor feedback, and providing feedback to new learners of the language.
4. Become more efficient in the care of ambulatory patients with cutaneous health problems.
5. Develop effective time management skills to accommodate increasing patient volumes.
6. Become facile with synthesizing and interpreting data in the care of progressively more complex patients with cutaneous disease.
7. Generate a more astute differential diagnosis, incorporating supervisor feedback.
8. Select appropriate and cost-efficient ancillary studies in the management of patients.
9. Demonstrate skill in clinic/office-based diagnostic tests, including KOH prep, scabies prep, Gram's stain, Wood's lamp exam, and incorporating fine points of interpretation from a supervisor.
10. Formulate and justify a plan of care prior to presenting to attending dermatologist.
11. Assume an active role in the medical management of patients, including
  - a. Therapy selection
  - b. Side effects and monitoring
  - c. Counseling of patients on risks, benefits and alternatives to selected therapy or procedure.
  - d. Educating the patient and provide rationale for treatment options.
  - e. Demonstrate knowledge and use of appropriate resources regarding pertinent drug-drug interactions.
12. Select appropriate biopsy lesion, body site and technique.
13. Consistently demonstrate competence in cryotherapy, including:
  - a. Selection of appropriate conditions.
  - b. Counseling patients on risks, benefits and alternatives to cryotherapy.
  - c. Careful application of liquid nitrogen.
  - d. Management of complications of cryotherapy.
14. Consistently perform an appropriate pre-operative assessment of candidates for skin surgery.
15. Consistently demonstrate competence in electrosurgery, including:
  - a. Selection of appropriate uses for electrosurgery.
  - b. Counseling patients on risks, benefits and alternatives to electrosurgery.
  - c. Skilled use of electrosurgery unit.
  - d. Understands and can articulate risks to operator of electrosurgery unit.
  - e. Management of complications of electrosurgery.

16. Consistently demonstrate competence in excisional skin surgery with simple closure, including
  - a. Selection of appropriate lesions and closure technique.
  - b. Understands the appropriate surgical anatomy issues for the above procedure on any body site.
  - c. Counsel patients on risks, benefits and alternatives to surgery.
  - d. Skilled performance of the above procedure under present or immediately available qualified supervisory observation.
  - e. Understands risks to operator and assistant during surgery and begins to educate learners regarding these risks.
  - f. Management of complications of the above procedure.
17. Consistently demonstrate competence in excisional skin surgery with layered closure.
  - a. Selection of appropriate lesions and closure technique.
  - b. Understand the appropriate surgical anatomy issues for the above procedure on any body site.
  - c. Counsel patients on risks, benefits and alternatives to surgery.
  - d. Skilled performance of the above procedure under present or immediately available qualified supervisory observation.
  - e. Understands risks to operator and assistant during surgery.
  - f. Management of complications of the above procedure.
18. Perform, with supervisory assistance, excisional skin surgery with closures involving flaps and/or grafts, including:
  - a. Selection of appropriate lesions and closure technique.
  - b. Understand the appropriate surgical anatomy issues and vector forces relevant to restoration of function and aesthetics for the above procedure on most body site.
  - c. Counseling patients on risks, benefits and alternatives to surgery.
  - d. Skilled performance of the above procedure under present and qualified supervisory observation.
  - e. Understands risks to operator and assistant during surgery.
  - f. Management of complications of the above procedure.
19. Understand the appropriate surgical anatomy and anesthesia pertinent to perform nail surgery and has at least assisted in nail surgery with a qualified surgeon.
20. Demonstrate appropriate selection of cutaneous diseases and patients for ultraviolet light therapy and understand pre-therapy laboratory evaluation.
21. Understand and apply the principles and indications of contact patch testing, competently read a standard patch testing panel, and educate new learners in the pathomechanisms of contact dermatitis.
22. Understand and apply the principles of moist wound healing.
23. Gain a longitudinal perspective on the delivery of health care through individualized continuity dermatology clinic patient panels and see the outcomes of one's own therapy plans.

## B. Medical Knowledge

1. Demonstrate an expanding knowledge base in the basic sciences relevant to dermatology.
  - a. Consistently apply the principles of microbiology, cutaneous oncology, immunology and genomics, including molecular diagnostic techniques, to the counseling and management of patients with dermatologic disorders.

2. Demonstrate an expanding knowledge base in clinical dermatology.
  - b. Consistently apply the principles of general clinical medicine, epidemiology, infection control, and the social sciences to the counseling and management of patients with dermatologic disorders.
3. Demonstrate an expanding knowledge base in medical therapeutics used in dermatology, including:
  - a. Topical therapies
  - b. Systemic therapies
  - c. Side effect of therapies
  - d. Interactions between therapeutic agents
  - e. Monitoring tests for side effects and frequency of monitoring.
4. Demonstrate an expanding knowledge base in surgical diagnostics and therapeutics used in dermatology, including
  - a. Equipment and materials used in skin surgery
  - b. Critical surgical anatomy
  - c. Principles and techniques of effective hemostasis
  - d. Appropriate tissue margins for cutaneous neoplasms
  - e. Appropriate biopsy technique
  - f. Appropriate referral to a Mohs and/or plastic surgeon
  - g. Appropriate tissue handling, including orientation, requesting special stains, and use of immunofluorescence for optimal dermatopathologic interpretation.
5. Retain core knowledge over time, and begin to educate more junior learners.
6. Thoroughly and critically read up-to-date textbooks of dermatology to enhance a comprehensive understanding of the specialty.
7. Begin to read the medical literature on patient-centered topics.

### C. Practice-based learning and improvement

1. Actively participate in, comes prepared for, and begin to assume a leadership role in didactic and patient-centered conferences conducted at the rotation site.
2. Demonstrate active, self-directed learning, and share relevant medical knowledge with the dermatology team.
3. Efficiently access best-evidence for clinical decision making.
4. Demonstrate metacognition of errors in patient care, gaps in core knowledge and suboptimal interpersonal communication and take steps to correct them.
5. Gain insight for improvement in clinical efficiency and apply this insight to day-to-day practice.
6. Apply newly acquired medical knowledge to patient care, and begin to place this knowledge within the framework of individual experience.
7. Demonstrate progressive consideration of precision, accuracy, expense, and safety when selecting and interpreting diagnostic tests.
8. Demonstrate an expanding facility and diligence in accessing information assessing the safety, efficacy, adverse event profile, and cost of therapy or prevention.
9. Demonstrate an expanding facility and diligence in accessing information assessing outcomes of disease and interventions.
10. Maintain appropriate records documenting practice activities (such as patient and surgical logs), and begin to use these for filling in gaps in training.
11. Write effective test questions for peer and self-study.

12. Continue critical reading of the medical literature to remain current in dermatology and related fields, and share relevant articles with dermatology team members.
13. Attempt to reconcile sometimes conflicting information from different published sources.

#### D. Interpersonal communication

1. Empathically listen, with attention to cross culture issues.
2. Consistently use a compassionate, courteous and respectful demeanor in the work setting.
3. Effectively communicate with other physicians and staff in a manner that respects patient privacy.
4. Develop and maintain positive interactions with support staff that promotes team spirit.
5. Effectively counsel and educate patients, their families and caregivers in a timely fashion.
6. Present gathered patient information concisely, completely, logically and lucidly.
7. Direct and coordinate the dermatology team.
8. Offer sensitive and constructive feedback.
9. Respond positively to appropriately delivered feedback.
10. Actively solicit feedback on one's performance.
11. Communicate effectively with referring physicians in written language.
12. Document in the medical record all interactions with patients in a timely, concise, thorough and lucid manner.
13. Instruct others in the language of dermatologic description.
14. Effectively summarize, research in the medical literature and lucidly present an instructive patient case.
15. Effectively present to a group for understanding the different research methodologies encountered in investigative medical papers.

#### E. Professionalism

1. Consistently demonstrates ethical conduct.
2. Creates and maintains healthy and positive relationships with other residents, faculty and students.
3. Consistently displays emotional maturity.
4. Consistently demonstrates dependable behavior in patient care, follow-up and administrative tasks.
5. Consistently dresses in a neat and professional manner.
6. Consistently is punctual for clinical work and didactics.
7. Consistently demonstrates respectful behavior toward faculty, staff, co-residents, students, and patients.
8. Demonstrates sensitivity to issues of culture, age, gender, and disability.
9. Demonstrates initiative in patient care.
10. Demonstrates initiative in resolving conflicts.
11. Considers and grapples with ethical issues including research fraud, informed consent, cost of medical care, billing and compensation issues, withholding of care, appropriateness of treatment, conflict of interest with pharmaceutical companies, and use of human subjects in research.

#### F. Systems-based practice

1. Demonstrate an expanding knowledge of cost-effective care.
2. Understand how different practice systems function to deliver care.
3. Continue to learn how to utilize non-dermatologist staff effectively as part of the health care team, including:
  - a. Ancillary medical staff
  - b. Clinic administrative staff
  - c. Social workers
  - d. Medical interpreters
4. Demonstrate when and who to call for appropriate consultation.
5. Provide effective specialty consultation under appropriate supervision.
6. Positively interact with non-department healthcare providers.
7. Attend and actively participate in relevant non-department learning opportunities.
8. Continue to gain a global perspective on dermatology through the reading of the dermatological literature pertaining to other cultures and applying this knowledge to a diverse cross-cultural patient population.
9. Further learn the rules of documentation and coding for a given level of patient care and for procedures.
10. Begin to apply the knowledge of health care financing and different payment schemes to manage financial issues involved in patient care.

### **Third Year - Resident Goals & Competency-based Learning Objectives**

**Goal:** Provide competent and sensitive dermatological care to the diverse population served by Harborview Medical Center that adheres to the principles of service excellence reaching complete clinical independence by year's end.

Objectives:

#### **A. Patient Care**

1. Consistently gather a complete medical history with attention to the nuances and pitfalls of speaking to the patient through a language interpreter, also understanding cross-cultural differences and their related medical access barriers.
2. Efficiently perform and document a complete exam of the skin and other organ systems relevant to the patient's general and cutaneous health and educate new learners in this.
3. Consistently and accurately use the language of dermatology, incorporating supervisor feedback, and teaching the language to new learners.
4. Become more efficient in the care of ambulatory and hospitalized patients with cutaneous health problems.
5. Develop effective time management skills to accommodate increasing patient volumes, and educate others in effective time management techniques.
6. Become facile with synthesizing and interpreting data in the care of the most complex patients with cutaneous disease.
7. Generate a clinically relevant, astute, and complete differential diagnosis, and begin to critique junior learners in this.
8. Consistently select appropriate and most cost-efficient ancillary studies in the management of patients.
9. Demonstrate mastery in clinic/office-based diagnostic tests, including KOH prep, scabies prep, Gram's stain, Wood's lamp exam, and teach junior learners in these tests.
10. Formulate an increasingly independent plan of care in concert with the attending dermatologist and support staff.
11. Assume a leadership role in the medical management of patients, including
  - a. Therapy selection, with attention to the recent medical literature.
  - b. In-depth understanding of medications, including mechanism of action, and adverse effects.
  - c. Counseling of patients on risks, benefits and alternatives to selected therapy or procedure.
  - d. Educate patients and families utilizing a variety of techniques: handouts/teach from posters/web-based instruction.
  - e. Demonstrate knowledge and use of appropriate resources regarding pertinent drug-drug interactions.
12. Select appropriate biopsy lesion, body site and technique, and supervise more junior learners in this procedure.
13. Consistently demonstrate mastery in cryotherapy,
14. Consistently perform an appropriate pre-operative assessment of candidates for skin surgery and educate more junior learners in this.
15. Consistently demonstrate competence in electrosurgery, and teach more junior learners the differences in electrosurgery modes.
16. Consistently demonstrate competence in excisional skin surgery with simple closure and begin to supervise more junior learners in this procedure.

17. Consistently demonstrate competence in excisional skin surgery with layered closure and begin to supervise more junior learners in this procedure.
18. Perform, with supervisory assistance, excisional skin surgery with closures involving flaps and/or grafts, including:
  - a. Selection of appropriate lesions and closure technique.
  - b. Understand and educate more junior learners in the appropriate surgical anatomy issues and vector forces relevant to restoration of function and aesthetics for the above procedure on most body site.
  - c. Counseling patients on risks, benefits and alternatives to surgery.
  - d. Skilled performance of the above procedure under present or immediately available qualified supervisory observation.
  - e. Understands risk to operator and assistant during surgery.
  - f. Management of complications of the above procedure.
19. Understand the appropriate surgical anatomy and anesthesia pertinent to perform nail surgery and perform, with qualified supervision.
20. Demonstrate appropriate selection of cutaneous diseases and patients for ultraviolet light therapy and articulate appropriate dosing orders.
21. Understand and apply the principles of moist wound healing, and begin to educate junior learners in this.
22. Gain a longitudinal perspective on the delivery of health care through individualized continuity dermatology clinic patient panels and see the outcomes and incorporate therapy changes based on these outcomes.
23. Develop best practices for teaching house staff and medical students and co-residents.

#### B. Medical Knowledge

1. Demonstrate a comprehensive knowledge base in the basic sciences relevant to dermatology.
  - a. Consistently apply the principles of microbiology, cutaneous oncology, immunology and genomics, including molecular diagnostic techniques, to the counseling and management of patients with dermatologic disorders.
2. Demonstrate a comprehensive knowledge base in clinical dermatology.
  - a. Consistently apply the principles of general clinical medicine, epidemiology, infection control, and the social sciences to the counseling and management of patients with dermatologic disorders.
3. Demonstrate a comprehensive knowledge base in medical therapeutics used in dermatology, including:
  - b. Topical therapies
  - c. Systemic therapies
  - d. Side effect of therapies
  - e. Interactions between therapeutic agents
  - f. Monitoring tests for side effects and frequency of monitoring.
4. Demonstrate a comprehensive knowledge base in surgical diagnostics and therapeutics used in dermatology, including
  - g. Equipment and materials used in skin surgery
  - h. Critical surgical anatomy
  - i. Principles and techniques of effective hemostasis
  - j. Appropriate tissue margins for cutaneous neoplasms
  - k. Appropriate biopsy technique
  - l. Appropriate referral to a Mohs and/or plastic surgeon

- m. Appropriate tissue handling, including orientation, requesting special stains, and use of immunofluorescence for optimal dermatopathologic interpretation.
- 5. Retain comprehensive knowledge over time, understand its clinical applications and continue to educate learners including peers and supervisors.
- 6. Thoroughly and critically read up-to-date textbooks of dermatology to enhance a comprehensive understanding of the specialty.
- 7. Continue to read the medical literature on patient-centered topics, using this as a principal source of continuing education.

#### C. Practice-based learning and improvement

1. Actively participate in, comes prepared for, and begin to assume a leadership role in didactic and patient-centered conferences conducted at the rotation site.
2. Demonstrate active, self-directed learning, and share relevant medical knowledge with the dermatology team.
3. Efficiently access best-evidence for clinical decision making.
4. Articulate self-reflection and metacognition of errors in patient care, gaps in core knowledge and suboptimal interpersonal communication and take steps to correct them.
5. Actively seek methods of improvement in clinical efficiency and apply these to day-to-day practice.
6. Apply newly acquired medical knowledge to patient care, and continue to place this knowledge within the framework of individual experience.
7. Demonstrate advanced consideration of precision, accuracy, expense, and safety when selecting and interpreting diagnostic tests.
8. Demonstrate facility and diligence in accessing information assessing the safety, efficacy, adverse event profile, and cost of therapy or prevention.
9. Demonstrate facility and diligence in accessing information assessing outcomes of disease and interventions.
10. Maintain appropriate records documenting practice activities (such as patient and surgical logs), and begin to use these for filling in gaps in training as well as organizing for board certification and future clinical privileges.
11. Write effective test questions for peer and self-study.
12. Continue critical reading of the medical literature to remain current in dermatology and related fields and share relevant articles with dermatology team members.
13. Understand and educate more junior learners' principles of evidence-based medicine.
14. Attempt to reconcile sometimes conflicting information from different published sources, and place within the framework of one's own experience.

#### D. Interpersonal communication

1. Empathically listen, with attention to cross culture issues, and accommodating a variety of patients with widely varying psychosocial circumstances.
2. Consistently use a compassionate, courteous and respectful demeanor in the work setting.
3. Effectively communicate with other physicians and staff in a manner that respects patient privacy.
4. Develop and maintain positive interactions with support staff that promotes team spirit.

5. Effectively counsel and educate patients, their families and caregivers in a timely fashion.
6. Presents gathered patient information concisely, completely, logically and lucidly.
7. Lead a dermatology team.
8. Offer sensitive and constructive feedback.
9. Respond positively to appropriately delivered feedback.
10. Actively solicit feedback on one's own performance.
11. Communicate clearly with referring physicians in written language.
12. Document in the medical record all interactions with patients in a timely, thorough and lucid manner.
13. Instruct others in the language of dermatologic description.
14. Effectively summarize and publicly present a critical analysis of a patient case.
15. Effectively present to a group for understanding the implications of well-designed research papers.

#### E. Professionalism

1. Consistently demonstrates ethical conduct.
2. Creates and maintains healthy and positive relationships with other residents, faculty and students.
3. Consistently displays emotional maturity.
4. Consistently demonstrates dependable behavior in patient care, follow-up and administrative tasks.
5. Consistently dresses in a neat and professional manner.
6. Consistently is punctual for clinical work and didactics.
7. Consistently demonstrates respectful behavior toward faculty, staff, co-residents, students, and patients.
8. Demonstrates sensitivity to issues of culture, age, gender, and disability.
9. Demonstrates initiative in patient care.
10. Demonstrates initiative in resolving conflicts.
11. Considers and grapples with ethical issues including research fraud, informed consent, cost of medical care, billing and compensation issues, withholding of care, appropriateness of treatment, conflict of interest with pharmaceutical companies, and use of human subjects in research.

#### F. Systems-based practice

11. Demonstrate a comprehensive knowledge of cost-effective care.
12. Understand how different practice systems function to deliver care.
13. Effectively utilize non-dermatologist staff effectively as part of the health care team, including:
  - a. Ancillary medical staff
  - b. Clinic administrative staff
  - c. Social workers
  - d. Medical interpreters
14. Demonstrate when and who to call for appropriate consultation.
15. Provide excellent specialty consultation under appropriate supervision.
16. Positively interact with non-department healthcare providers.
17. Attend and contribute to relevant non-department learning opportunities.
18. Continue to gain a global perspective on dermatology through the reading of the dermatological literature pertaining to other cultures and applying this knowledge to a diverse cross-cultural patient population.

19. Continue to learn, and begin to instruct junior learners in, the rules of documentation and coding for a given level of patient care and for procedures.
20. Apply the knowledge of health care financing and different payment schemes to manage financial issues involved in patient care.