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## **Dermatology Rotation Curriculum**

### **I. Overview**

The Dermatology rotation consist of direct consultative patient care and bedside teaching provided mainly in the outpatient setting

### **II. Goal**

The Dermatology Rotation will provide residents the opportunity to acquire the skills and knowledge necessary to diagnose and manage common primary dermatologic diseases as well as dermatologic manifestations of a variety of conditions pertaining to Internal Medicine

### **III. Objectives**

Residents will be able to demonstrate the ability to:

- Conduct a pertinent History and Physical and establish a differential diagnosis for common benign and malignant dermatological conditions
- Diagnose and manage common benign and malignant dermatologic conditions.
- Diagnose and manage dermatologic manifestations of common diseases

### **IV. Structure**

The Dermatology rotation takes place at the dermatology clinic located at 16105 South La Grange road, Orland Park, IL under the supervision of:

- Dr. Michael J. Welsch
- Dr. John T. Keane
- Dr. Kenneth B. Bielinski

**V. Expectations:**

- Start time is variable and will be provided to you at the beginning of the rotation. Residents are expected to be promptly present at the assigned times. Any absence from the rotation needs to be communicated to the IM Chief Residents as well as to Paula Neal at (708)-590-7131
- Evaluate, present and discuss patients with the faculty preceptors in a timely manner
- Complete documentation of procedures in New Innovation in a timely manner
- Residents will be excused from dermatology on their continuity clinic day at Christ.
- Residents will be excused for all lectures during the rotation
- Adhere to all rules of professionalism as set forth by the residency program and the clinic. Specifically, for the rotation:
  - Stethoscopes are not needed and should be not be brought to clinic
  - The dress code is business casual: Men must wear necktie a lab coat is to be worn while in the clinic area. Open toe shoes are not permitted.
  - No food or drinks are allowed in the clinic area.
  - Cell phone use is allowed in the back office area and not in the clinic.
  - Pagers must be silenced and checked outside of exam rooms.

**VI. Educational Strategies:**

Residents will be exposed to a variety of methods to enhance their educational experience. These include:

- Bedside teaching provided by the supervising faculty.
- Independent reading on relevant topics as per Appendix 1.



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## VII. Evaluation and Feedback

Residents will be provided feedback throughout the entire rotation. Formative feedback will occur in the form of direct observations during patient care. Summative feedback will be provided by supervising faculty face to face as well as in writing at the end of the rotation

The specific Milestones residents will be evaluated on are:

PC1: Gathers and synthesizes essential and accurate information to define each patient's clinical problem(s)

PC5: Requests and provides consultative care

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## **Appendix 1:** Suggested Readings

Modules in the American Academy of Dermatology website for a 2-week or 4-week rotation (<https://www.aad.org/education/basic-derm-curriculum/suggested-order-of-modules>) in addition to material in MKSAP and UptoDate relevant to the ABIM Blueprint, including but not limited to the following:

### **Dermatitis (Eczemas)**

- Atopic dermatitis
- Contact dermatitis
- Photodermatitis
- Stasis dermatitis
- Hand dermatitis
- Drug eruptions
- Nummular dermatitis
- Exfoliative dermatitis
- Seborrheic dermatitis

### **Dermatologic immunology**

- Urticaria and angioedema
- Leukocytoclastic vasculitis
- Other dermatologic immunology

### **Vascular dermatoses**

- Erythema multiforme
- Erythema nodosum
- Telangiectases
- Leg ulcers
- Other vascular dermatoses

### **Acne/Rosacea**

- Acne vulgaris
- Rosacea

### **Papulosquamous dermatoses**

- Psoriasis
- Pityriasis rosea
- Lichen planus

**Skin and soft tissue infections**

Dermatophytes  
Herpes zoster/Varicella  
Viral exanthems (except varicella)  
Cellulitis  
Necrotizing soft-tissue infections and gas gangrene  
Lymphadenitis and lymphangitis  
Ectoparasites (lice, scabies, etc.)

**Vesiculobullous dermatoses**

Pemphigus vulgaris  
Dermatitis herpetiformis  
Other vesiculobullous dermatoses

**Pigment disorders**

Vitiligo  
Chloasma/Melasma  
Acanthosis nigricans

**Photosensitivity dermatoses**

Porphyria cutanea tarda  
Photodermatitis

**Nodules and tumors of the skin**

Seborrheic keratosis  
Actinic keratosis  
Warts, corns, skin tags  
Squamous cell carcinoma of the skin  
Basal cell carcinoma of the skin  
Melanoma and nevi  
Mycosis fungoides

**Nutritional disorders, cutaneous manifestations**

Vitamin C deficiency and scurvy  
Disorders of the nails