<table>
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<tr>
<th>Rotation:</th>
<th>Pediatric Dermatology (ELECTIVE)</th>
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<tr>
<td>Institution:</td>
<td>University of Michigan Health System</td>
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<tr>
<td>Duration:</td>
<td>Two (2) to Four (4) Weeks</td>
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<tr>
<td>Fellow Training Year:</td>
<td>EM and PD trained fellows (Year 2 or 3)</td>
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<td>Supervising Faculty:</td>
<td>Charles Ellis, MD</td>
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**EDUCATIONAL GOALS:**
1. Fellows will be familiar with the approach and management of common and uncommon pediatric dermatoses, those that present primarily, secondary to systemic disease and those requiring emergent identification/management. *Competencies: MK, PC*
2. Fellows will learn to develop a management plan for children/families with dermatoses requiring outpatient follow up and/or referral from the pediatric ED. *Competencies: MK, PC, IC, SBP*
3. Fellows will learn to identify those dermatoses requiring routine, urgent and emergent referral resources to pediatric dermatologists. *Competencies: PC, IC, P, SBP*

**EDUCATIONAL OBJECTIVES:**
1. Be able to recognize the common skin diseases of infancy and childhood atopic eczema, tinea capitis, psoriasis, acne and warts. *Competencies: MK, PC*
2. Be able to effectively perform a KOH presence for the detection of fungi from lesions of tinea corporis and tinea capitis. *Competencies: MK, PC*
3. Recognize four distinct ways of treating warts. *Competencies: MK, PC*
4. Be able to discuss the different potencies of topical steroids, their side effects and steroid responsive diseases. *Competencies: MK, PC*
5. Recognize different forms of topical and systemic therapy for acne and understand when to use each/both. *Competencies: MK, PC*
6. Be able to discuss several different types of lubricants, moisturizer and keratolytics. *Competencies: MK, PC*
7. Be able to describe a basic regimen for the treatment of atopic dermatitis including lubricants, topical corticosteroids, anti-infectives and antihistamines. *Competencies: MK, PC*
8. Recognize the different classes of medications that are effective in the treatment of psoriasis including topical steroids, coal tar, vitamin D3, anthralin and ultraviolet light. *Competencies: MK, PC, PBLI*
9. Be able to distinguish the features that help segregate benign from malignant appearing nevi and the appropriate treatment of each. *Competencies: MK, PC*
10. Demonstrate understanding of dermatology referral indications. *Competencies: PC, IC, P, SBP*

**DESCRIPTION OF CLINICAL EXPERIENCE:**
Fellows will see patients in dermatology clinic and staff patients with attending physicians. The written curriculum is based upon APA guidelines and is in a case study format. Cases are presented with questions for discussion. Supporting journal articles are supplied for resident review. Topics for case study include:
- Atopic dermatitis
- Psoriasis Acne.
- Fellows will also have access to Dermatology Library resources

Fellows are supervised in compliance with UMHS/GME/Fellowship Program Supervision policies while
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on this rotation. Fellows are required to be in compliance with UMHS/GME/Fellowship Program Duty Hour Reporting policies while on this rotation.

DESCRIPTION OF DIDACTIC EXPERIENCE:
Dermatology Conference Schedule
- Weekly Diagnostic Conference
- Weekly Book Club
- Bi-weekly Dermatology Department conferences
- Monthly Clinical Journal Club
- Monthly Basic Science Journal Club

EVALUATION PROCESS:
Fellows are evaluated using tools based on the six core competencies completed in writing by pediatric dermatology faculty after this rotation via the UMHS MedHub online evaluation system. Fellows likewise evaluate their experiences after each rotation as well. Evaluations are forwarded to the Program Director and made available in aggregate to individual fellows via the MedHub system at all times. Formal review of fellow evaluations occurs at quarterly PD/Fellow meetings.

FEEDBACK MECHANISMS:
Specific problems or notations of excellence identified through verbal or written communication regarding the fellow are immediately brought to the attention of the involved fellow. Fellows receiving an overall poor performance grade (less than satisfactory evaluation for rotation) are notified immediately and meet with the PD. Fellows who receive notation for improvement in some areas (but pass the overall rotation) are given a work plan for educational intervention with specific timeline for completion and reevaluation. Monthly evaluations are placed in the fellow’s file, are available in MedHub and are available for review at any time by the fellow. These are also reviewed during quarterly meetings with the PD. Fellows are encouraged to review their files regularly and at least monthly.

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<td>Revised</td>
<td>06/2005</td>
<td>11/2008</td>
<td>07/05/2011</td>
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<td>Initial(s)</td>
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Accreditation Council for Graduate Medical Education (ACGME) Core Competency Key:
P = Professionalism; SBP = Systems-Based Practice