



Osteopathic Dermatology Residency Training Through Nova Southeastern University College of Osteopathic Medicine at Largo Medical Center

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I am a doctor of osteopathy (DO) and a resident in dermatology. In my experience, there are general misunderstandings about DOs: what we do, what our training entails, and how our training compares to allopathic dermatology residencies. I chose to attend osteopathic medical school because of the patient-centered philosophy as well as the emphasis on preventative medicine. I hope to clear up some misconceptions and give some insight on osteopathic dermatology training.

Osteopathic physicians are fully licensed and can prescribe medicine as well as perform surgery. In many ways, our training is similar to allopathic training. Osteopathic medical students complete 4 years of training in basic medical sciences, similar to allopathic medical students. We take licensing examinations, and many students take both the osteopathic and allopathic board examinations so they can apply for the same residency positions. After medical school, osteopathic residents enter into formal residency training in either primary or specialty care.

A key difference in our education pertains to the focus on primary care and preventative medicine. Unique to osteopathic training is our philosophy and approach to treating patients as well as our special training in osteopathic manipulative medicine.¹ Osteopathic manipulative medicine is an essential part of our medical education and entails in-depth knowledge of the musculoskeletal system and how

injury and illness in one organ system can affect other parts. As osteopathic physicians, we become adept at incorporating structural examination and palpation of tissue into our diagnostic tools. Campbell et al² wrote an insightful article contending that the specialty of dermatology exemplifies the ideals expressed by osteopathic medicine; the authors also explained how the principles of osteopathic medicine can be applied to dermatologic disease and patient care.

The American Osteopathic College of Dermatology (AOCD) was founded in 1957. Currently there are 315 board-certified osteopathic dermatologists, 119 residents in training, and 27 dermatology residency programs.³ Similar to allopathic dermatology, osteopathic dermatology training can vary greatly from program to program. The program at Largo Medical Center is a 3-year dermatology residency accredited through the American Osteopathic Association via the College of Osteopathic Medicine at Nova Southeastern University. We have a large program with 3 residents in each year's class. The majority of our clinical training is conducted at 7 Bay Dermatology and Cosmetic Surgery offices. The location of Largo Medical Center affords its dermatology residents abundant training in cutaneous oncology and surgical management. Due to climate and patient demographics, our surgical skills are quite advanced, and we are extremely confident at diagnosing and treating both melanoma and nonmelanoma skin cancers by our third year of residency. We provide consultations at 2 area hospitals and rotate at the Bay Pines VA Healthcare System in Saint Petersburg, Florida, under the supervision of Daniel Hogan, MD. There are 10 full-time

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attending physicians and several volunteer attending physicians on our rotation. Matthew Mahoney, MD, is a pediatric dermatologist in Saint Petersburg and we rotate with him for a minimum of 2 months during our training. We have the opportunity to see a wide variety of pediatric dermatology cases from those with common atopic dermatitis to rare genodermatoses.

Largo Medical Center also has its own resident clinic that offers care to underserved patients 1 half day per week, with an attending physician present for every clinic. While serving as clinic preceptors, attending physicians also contribute to our didactics via their own areas of interest or expertise, which can vary from clinical or surgical pearls to Kodachrome review. We are fortunate to have an in-house dermatopathologist, Kaisa M. Van Der Kooi, MD, who conducts bimonthly reviews of glass slides using our amazing 10-headed teaching microscope. Miraca Life Sciences, Inc, supplements our dermatopathology teaching bimonthly by providing lively slide review sessions with experts in the field.

Didactics is a valuable part of our learning experience. In addition to our busy clinic schedule, dermatology residents at Largo Medical Center have protected didactics on Thursday mornings and all day on Fridays. Thursday mornings are dedicated to book review, journal club, and Kodachrome review, or we may spend much of the morning at the microscope with our dedicated teaching staff. On Fridays we review pertinent dermatology textbooks. Weekly Kodachrome review is sprinkled into our training and we pride ourselves on our strong didactic curriculum. Journal club is held monthly and we review a wide range of articles from 3 to 4 dermatology journals. We take our mock board examinations very seriously and strive to achieve the top scores in the nation each year. We attend major dermatologic conferences, including the annual meetings of the American Academy of Dermatology and the AOCD. We are encouraged to participate in poster presentations at both national and local conferences as well as community Grand Rounds. There is enough autonomy throughout our program to allow residents to actively pursue individual areas of interest, including research and cutaneous oncology. Our program director, Richard Miller, DO, frequently reviews residents' schedules and always encourages ways to further our education. We also have the opportunity to learn about lasers and cosmetic dermatology at many of the Bay Dermatology and Cosmetic Surgery offices.

Keeping with the commitment of osteopathy to preventative medicine, the osteopathic dermatology residency at Largo Medical Center encourages community service and is actively involved with multiple skin cancer screenings throughout the year. Bay

Dermatology sponsors a 5K run each spring to raise money for the Melanoma Research Foundation and it is fully organized by residents. This past year, community dermatologists, notably James M. Spencer, MD, MS, and Joanne Montgomery, MD, volunteered their time conducting skin cancer screenings at the 5K run. They also serve as elective preceptors to our training program.

As with any residency program, the Largo Medical Center osteopathic dermatology program has great strengths as well as room for improvement. I admit that we lack the strong clinical research that traditional university settings typically afford; however, preceptorship offers opportunities for practice management and patient care in a busy clinical practice.

Final Thoughts

I hope I have elucidated some of the ambiguity about osteopathic medicine and dermatology residency training. For more information, refer to the American Osteopathic Association Web site (<http://www.osteopathic.org>) or the AOCD Web site (<http://www.aocd.org>). Previously there had been much discussion among the Accreditation Council for Graduate Medical Education and the American Osteopathic Association about combining allopathic and osteopathic training⁴; however, it seems these negotiations are on hold, as agreements could not be made. Now more than ever it is important for physicians and specialists to support each other. It is imperative for us to understand each other to better offer mutual support, especially in this new environment of diminishing repayments and government cutbacks. We will be much stronger as a unified front than a divided group of societies and dermatologists.

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