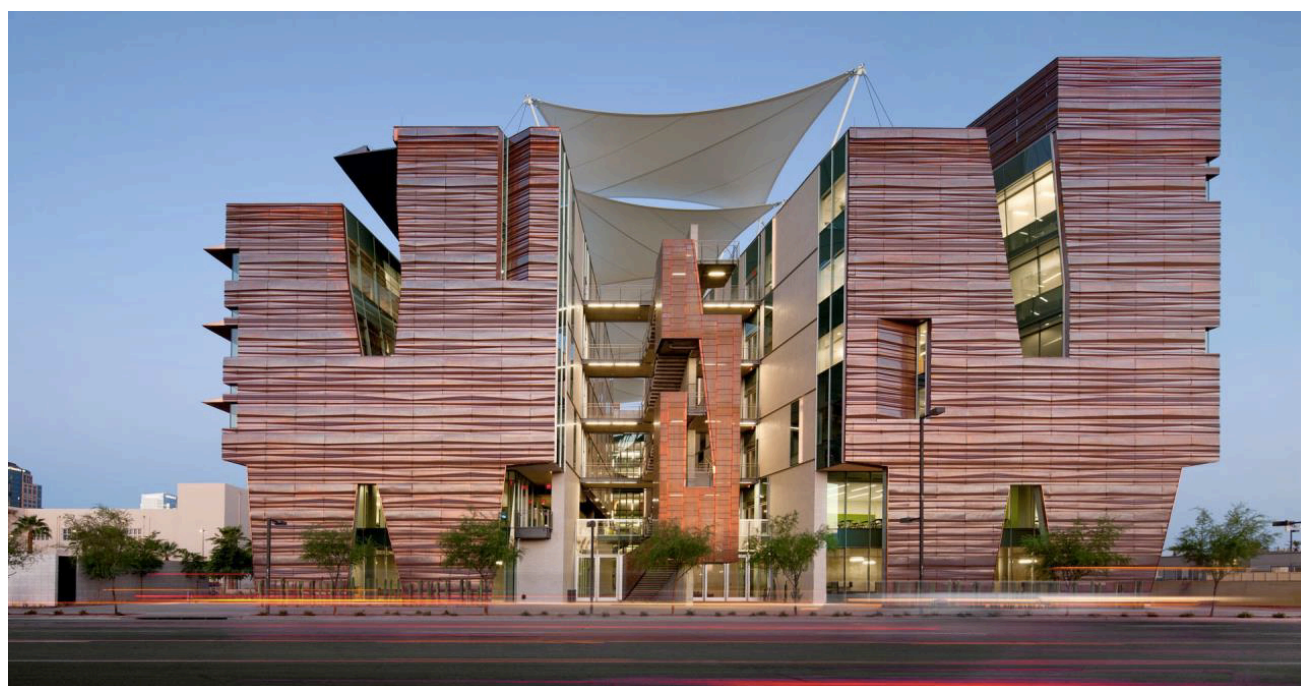




SPECIALTY REPORT

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David Swanson, MD

Program Director Mayo Clinic Arizona



Dr. David Swanson is a Professor of Dermatology and the Resident Program Director at Mayo Clinic Arizona. He received his medical degree from the University of Minnesota. He is Board Certified in Dermatology and Internal Medicine. He is a member of the Executive Board of the International Dermoscopy Society. For two decades, he has been the editor of Practical Reviews in Dermatology. He has over 50 publications and lectures internationally on dermoscopy.

What was your path to your current career in dermatology?

I was a medical student and I got involved with a mentor who told me, “Well, you’ve got to go into dermatology.” He said all the residents were having fun and encouraged me to go, and I decided to. Around that time, I was interested in this disease called Pemphigus, where the body’s immune system attacks the “glue” that holds cells together – desmoglein. It’s a disease that has reasonable treatment options now and most people get better, but back then not so much.

On choosing dermatology after being double boarded in Internal Medicine and Dermatology: A couple of years passed, and I actually did an Internal Medicine residency [as well]. I went into IM, which I practiced for 15 years. I mostly worked in critical care and the ICU. During that time, I had a lot of really sick dermatology patients sent to me. They knew I had been boarded in Dermatology, and so I wasn’t afraid to take those patients on. I knew eventually I had to make a choice, so I chose to back off on my Internal Medicine practice and go full time into Dermatology. I was in a private practice for about 15 years before I was eventually recruited to the Mayo Clinic, where I’ve been in the department of Dermatology for about 18 years.

What attracted you to the field of dermatology?

For me, dermatology was always interesting, especially because of the intersection with immunology. Many of the diseases you see in dermatology are

immune-based, except for the neoplasms and genetics. Things have really gotten interesting in the last 10-15 years, as our understanding of innate immunity, genetics, and signaling pathways has become more refined. This has led to an explosion of therapeutics in all branches of medicine, but dermatology is one that really benefitted.

Was your draw to research what eventually led you to the Mayo Clinic?

Well actually I was doing quite a bit of volunteer teaching on the side, over at the University of Minnesota. My mentor came here to Mayo, where I now am, and he called me up one day to say that a job had opened up. I thought, why not? After about a month or so, I decided I wasn’t going back.

Thinking about what first drew you to the field of dermatology, has your interest in the field changed over time?

I think dermatology is much more interesting now than when I first started. There’s a technology that was developed, that I actually teach, called dermoscopy. It’s a simple instrument, but like a lot of advancements in medicine, it was a breakthrough in technology that led to a huge increase in accuracy when diagnosing skin cancer and other skin diseases. The ability to do that has taken a lot of the guesswork out of the field.

What challenges have you faced in the field of dermatology?

The challenge, and this applies to all fields of medicine again, is to be able to spend enough time with

the patient to make a proper diagnosis and treatment plan. The nature of the practice of medicine right now is such that time is a commodity, and sometimes you can't delve deep into the issues your patient faces. How is their disease actually affecting their life? Otherwise, the practice is fine: you see mundane things, and you see things that are extremely rare or challenging. At least for me, every couple of weeks I see something for the first time, at least outside textbooks, which I will probably never see again. We're at a tertiary referral center, and so on the rare instance someone comes in with something simple, like a wart, I think "Oh thank god, I can catch my breath, it's just a wart!"

What advice would you give to a student thinking about a career in dermatology?

Dermatology is definitely harder to get into right now – you need good grades, good board scores, and good letters of recommendations. A lot of people are doing research now to give them an edge. I would say to get to know the people in your medical school's dermatology program and see if you can get involved in their projects. That also helps you solidify your impression that it's what you want to go into. I would also do that just to take advantage of what medical school has to offer; you only have the opportunity once in a lifetime to work in areas like this, and it's really important to do everything you can because there are a lot of cross-applications between specialties. Everything from orthopedics to psychiatry can be of use in the field of dermatology. You can take the opportunity to do an away rotation, and some people take a year off to do research, which wasn't available back when I was in school. Here's something most people don't even think of: if your medical schools has "Honors," the clerkships you want to get honors in are surgery, medicine, family medicine, OB, pediatrics – the primary care specialties. Frankly, I don't even look at how applicants do in the specialty rotations. I'm more interested in how they do in general rotations because that tells me what kind of doctor they're going to be.

Do you think it is necessary for students who want to pursue dermatology to do research?

Most applicants have done research, so it is probably important for the more competitive programs. For the less competitive, I don't know. These days, the pool of applicants is excellent.

What are some important factors about dermatology residency programs students in their 4th year should take into account when on interviews?

Program size. At Mayo Clinic, we have 2 residents that we take every year, and that's it. We may be increasing to 3 in a couple of years. The competition for those two spots is huge. I don't want to discourage anyone; we would love to have your application. That said, if you look at the numbers, the odds are just tough. Compare that to Mayo Rochester, which is a larger program where a student may have better chances. Of course, there are advantages for small programs so I wouldn't discourage applicants entirely, because if you get in, it's like winning the lottery. I would definitely recommend applying to a mix.

Any other advice, as a program director, for students interested in specializing in dermatology?

It's definitely important to find a mentor, and that is true in general. Otherwise, I don't put a lot of stake into students saying that they want to go into academics, because people often change their minds. However, the pattern I see in people who do go into academics and into more competitive specialties is that they had great mentors. The only other piece of advice is to find reasons why you don't want to go into dermatology. There are two good reasons for this: that you've thought of other fields and if they could be as or more interesting, and also if it suits your talents. There are people who have applied more than once, and in that case it is really important for them to do something different to distinguish themselves, such as working for someone who gives them a great letter of recommendation or a research publication.

- Naria Quazi, MS1



David DiCaudo, MD

Former Program Director Mayo Clinic Arizona



Dr. David DiCaudo is a dermatologist and dermatopathologist at Mayo Clinic in Scottsdale, Arizona. He completed consecutive residencies in Preliminary Internal Medicine, Anatomic Pathology, and Dermatology, all at Mayo Clinic in Rochester, Minnesota. He is board-certified in Anatomic Pathology, Dermatology, and Dermatopathology. He was the Dermatology residency Program Director at Mayo Clinic Arizona from 2011 to 2021 and is currently Professor of Dermatology and Pathology at Mayo Clinic.

Tell me a little bit about your background and your path into dermatopathology.

My path into the field of dermatopathology was an unconventional one. First, I completed a preliminary year in Internal Medicine and then completed consecutive residencies in Anatomic Pathology and in Dermatology, all at Mayo Clinic in Rochester, Minnesota. This change in course was a great fit for my career goals because I wanted both to make diagnoses at the microscope and to see patients.

What do you like about dermatopathology? What are the challenges?

What I like best about dermatopathology is the close correlation of seeing the patient (or pictures of the patient) and seeing the microscopic findings in the skin. This combination of clinical and microscopic features is nearly unique to this field, and it is one that I greatly enjoy.

Some of the challenges of dermatopathology are the difficulties that may be encountered in making a crucial diagnosis, such as melanoma or lymphoma. Those cases can be very challenging but very rewarding at the same time, as the dermatopathologist works to provide the most accurate diagnosis for the patient. Even with the most advanced technology, there are always unanswered questions and new discoveries that continue to make the field a challenging one.

Is research experience important when applying to a dermatology residency?

Research experience can be an important factor in pursuing training in dermatology. Most applicants will have some research experience, which may vary widely from case reports to larger-scale research projects. Because dermatology is a competitive field, it is helpful to have some type of research experience. On the other hand, it's only one part of the picture for a well-rounded applicant.

On the dermatology side of things, with the research being one part of the picture, how important are some of the other extracurriculars students may be involved in when applying to a dermatology residency?

Extracurricular activities may be important in helping to paint a more complete picture of the applicant's interests and talents. When an application is being reviewed holistically, the extracurricular activities and volunteer activities can help to add a

more personal quality, in addition to the more quantitative factors, such as grades and board scores.

In thinking of other dermatopathologists/dermatologists that you have worked with that work at institutions of various prestige, do you see the prestige reflected in their work, or does it matter more on the individual?

“The residents are a great resource for information about the program’s strengths and potential weaknesses in preparing trainees for their future careers.”



I believe that the accomplishments of the individual are more important than the prestige of the individual's institution. In dermatopathology and dermatology, individuals from a wide variety of backgrounds and from different types of institutions can contribute significantly to advancing the field.

What are some important residency program factors that medical students should take note of when on interviews?

I would recommend that medical students especially take note of the opinions of the program's residents at the time of the interview. The residents are a great resource for information about the program's strengths and potential weaknesses in preparing trainees for their future careers. Also, if the applicant already has a specific interest in a subspecialty, such as pediatric dermatology, procedural dermatology, or dermatopathology, it would be important to ask the residents about the program's strengths in the applicant's area of special interest.

During your time as the Program Director, how many students did a research year or some other additional experiences after medical school before applying to residency?

Several of my colleagues recently published a survey-based study of applicants to our residency program. About 30 percent of applicants to our program had a gap year, which most commonly consisted of a research fellowship. The results of the study suggested that the overall match rate did not significantly differ between applicants who had a gap year and those who did not. However, a greater percentage of applicants with a gap year matched at programs that were considered top residency programs. For those applicants who are strongly interested in research, I believe that a research year may be helpful in offering an opportunity to explore the field in greater depth. However, I would not want anyone to assume that a research year is necessary to match in dermatology. There are many different paths and backgrounds that can prepare a student very well for a dermatology residency.

- Jacob Shaner, MS1

The Basics: Applying to Dermatology Residency

Dermatology residency is considered an advanced position, meaning it begins in the second year of residency (PGY-2). Hence, students are usually required to secure a PGY-1 position for their preliminary/internship year in addition to the PGY-2 position. Students will have two separate personal statements and possibly different letters of recommendation for the dermatology programs and for the preliminary year programs. There may be some programs that will ensure the PGY-1 position if matched into their dermatology residency PGY-2 position.

Fun Fact: Other specialties that are considered advanced positions include anesthesiology, ophthalmology, and diagnostic radiology.

Mitchell Manway, DO

Associate Program Director HonorHealth

Dr. Manway received his undergraduate degree in Biology from Penn State University and his Doctorate of Osteopathic Medicine from the Lake Erie College of Osteopathic Medicine in Erie, Pennsylvania. Following his medical school graduation, he completed a traditional internship at Manatee Memorial Hospital in Bradenton, Florida and then accomplished a total of two years of dermatology research fellowship between the Center for Clinical and Cosmetic Research in Aventura, Florida and Affiliated Dermatology in Scottsdale, Arizona. He began his formal residency training in July 2017 at HonorHealth.



Tell me a little bit about your background and your path into dermatology.

I completed my medical school training at the Lake Erie College of Osteopathic Medicine in 2014, but it was around my third year when I started to seriously consider a career in dermatology. I completed many elective rotations and visited as many programs as I could, but I was unfortunately not able to match successfully into a program on the first or even the second attempt! From the feedback I received, it was clear that my application did not possess enough research experience, so in the following two years I accepted and completed two dermatology research fellowships. Through the connections and benefits I gained during my second fellowship, I was able to match and gain entry into my training program.

What do you like about working in dermatology? What are the challenges?

I love that the field combines working with your mind and with your hands. It takes detective work and a good history and physical exam to figure out any mystery rash, but dermatology is considered a surgical subspecialty, and as such, there is ample opportunity to perform simple and complex procedures without the hindrances of a formal operating room. With that said, the amount of knowledge and fine

detail that residents are required to learn on rare skin pathology can be overwhelming and intimidating.

Is there anything specific that students need to do to make themselves competitive for dermatology? Are there any particular talents or skills that make someone well-suited to the field?

Competitive board scores have historically been required to gain consideration for a dermatology residency, but networking and communication skills are incredibly important because there are plenty of competing candidates with similar adequate test scores. It is unclear how test scores will factor into

future applications, as the certifying boards are currently moving away from these benchmarks. Fine attention to detail, an eye for aesthetics, and decent hand dexterity would benefit any dermatologist.

Is research experience important when applying to dermatology?

I would say a substantial amount of research experience is mandatory for any applicant. Throughout their training, residents would be expected to publish numerous case reports and occasional long-form research endeavors. Experience with clinical trial

“If someone is truly dedicated and committed to gaining entrance into a Dermatology program, they should know not to give up.”

protocols and write-ups would be extremely beneficial to help delineate candidates.

If you could give one piece of advice to a student entering this field, what would it be and why?

If someone is truly dedicated and committed to gaining entrance into a dermatology program, they should know not to give up. It is easy to become discouraged after a failed match attempt, but many of my colleagues and I took less than traditional paths to end up successfully where we are today.

What are some important residency program factors that medical students should take note of when interviewing for dermatology programs?

I would say the most common aspects of a program that candidates inquire about would include whether or not they provide adequate access to and education regarding dermatopathology and pediatric dermatology throughout their training. Also, students should keep in mind that surgical exposure and experience can vary significantly from program to program.

- Salman Azfar, MS1

Summary Statistics on U.S. MD Seniors Dermatology - 2020

	Matched (n=361)	Unmatched (n=64)
Mean number of contiguous ranks	9.9	4.5
Mean number of distinct specialties ranked	2.2	2.4
Mean USMLE Step 1 score	248	239
Mean USMLE Step 2 score	256	248
Mean number of research experiences	5.8	4.9
Mean number of abstracts, presentations, and publications	19.0	10.8
Mean number of work experiences	3.7	3.4
Mean number of volunteer experiences	9.4	8.8
Percentage who are AOA members	47.4	28.1
Percentage who graduated from one of the 40 U.S. medical schools with the highest NIH funding	41.3	34.4
Percentage who have a Ph.D. degree	10.2	8.5
Percentage who have another graduate degree	19.7	24.6

Source: National Resident Matching Program, Charting Outcomes in the Match: Senior Students of U.S. Medical Schools, 2020. National Resident Matching Program, Washington, DC 2020.

Karen Hastings, MD, PhD

Associate Professor

The University of Arizona College of Medicine – Phoenix



Dr. Hastings is an Associate Professor of Basic Medical Sciences at the University of Arizona College of Medicine - Phoenix. She obtained her MD and PhD at Harvard Medical School. She then went on to complete her internal medicine internship, dermatology residency, and immunology postdoctoral training at Yale School of Medicine. She joined the University of Arizona College of Medicine-Phoenix in 2006.

Share an overview of your work and career as a dermatologist.

For me, my career as a dermatologist is that of a physician and scientist. I see dermatology patients at the Phoenix VA hospital a half day every other week, and the remainder of my time is spent doing research on the immune response to skin cancer and teaching medical students, primarily in the pre-clinical medical school curriculum, about skin and immunology related material.

When and how did you know you were interested in this field?

When I started medical school, I knew that I wanted to be a physician-scientist. During my PhD training, I gained exposure to a variety of medical specialties and their involvement in research. At the time, my PhD was focused on T cell adhesion to epithelial cells. When I attended conferences to present that research, I met other dermatologists who were doing similar research and realized that dermatology would be a good fit for my research interests. Then, I had the opportunity to explore that interest when I went back to do the last two years of medical school and did my dermatology rotation. During my rotation, I realized that there was a whole class of skin diseases that either have a genetic mutation in, or auto-antibodies to, adhesion molecules which was the area that I was doing my PhD in. I found it really fascinating that in dermatology, the

molecular mechanism of these diseases was known. Along with that, I realized that I really like the clinical practice of dermatology. You get to interact with patients and follow them long term, which I find very rewarding. Lastly, being able to combine clinical care in dermatology with doing research was another factor that appealed to me.

Considering your credentials are MD/PhD, how does your dual degree influence your work as a dermatologist?

As I mentioned earlier, I was looking for a specialty where my research interests overlapped with the clinical work. Dermatology has a very large component in immunology and research. As an MD/PhD, I believe my approach to treating patients is unique in that I use more of a scientific approach to the diagnosis and treatment for each case.

In cases where the treatment is not working, I think about what other treatments might be possible based on what I know of the disease mechanism and treatment mechanism. Most of my patients at the VA have skin cancer or an autoimmune disease, such as psoriasis or atopic dermatitis. I really enjoy being able to use newer immunotherapies for biological response modifiers to treat patients.

“The nice thing about a career in academic medicine is that you have a lot of varying responsibilities including seeing patients, teaching medical students, and conducting research.”

Can you share your most favorite part of being a dermatologist or about your career in general?



My most favorite part of my career is scientific discovery. I love being able to come up with new research questions, design the method to answer those questions, and then carry that out.

How do you balance your professional and personal life?

The nice thing about a career in academic medicine is that you have a lot of varying responsibilities including seeing patients, teaching medical students, and conducting research. One of the things that prevents burnout for me is that I have all of these different interests that I am simultaneously pursuing. Of course, there's a lot of work due to these different responsibilities, but they each provide different rewards. To balance the professional obligations and my personal life, it's helpful for me to share the personal responsibilities with my spouse. During my time off, I enjoy doing things with my family such as hiking, biking, and swimming. Along with that, in research I have the flexibility of creating my own schedule, while meeting all of the deadlines. In summary, it's hard to perfectly balance everything, but I do as much as I can and incorporate additional activities when time allows.

Did you have a mentor as a medical student and/or resident?

Yes, as an MD/PhD student I built a long standing relationship with my PhD mentor, who is a rheumatologist. Certainly, he not only guided my research, but I was able to discuss my career choices with him

as well. In residency, I had clinical mentors who I regularly went to for opinions on patient care. At the same time, I had my postdoctoral mentor and dermatology faculty, who mentored me in research and career development.

What advice would you give students considering this field?

My advice for medical students considering this field is to think about the interests they have in dermatology to determine if it's a good fit for them. My major motivation for going into this field was my research interest in immunology and the clinical practice of dermatology. One of the things that sets dermatology apart is the variety in clinical practice. You can see both children and adult patients, make diagnoses based on physical exam, and perform procedures, such as skin biopsies and evaluation of skin scrapings for fungal or parasitic infection. In addition, all dermatologists are trained in surgical excision, so it's very common to perform skin cancer excisions during practice. Every dermatologist is also trained in dermatopathology. Along with that, there are different fellowship options such as pediatric dermatology, Mohs micrographic dermatologic surgery, and dermatopathology. Dermatologists tend to have the same patients over time, so there is continuity of care which is very personally rewarding to develop a relationship with a patient, provide medical care for them, and help them improve over time.

- Ghena Krdi, MS1

Positions Offered in Dermatology, 2017 – 2021

2021		2020		2019		2018		2017	
No.	%	No.	%	No.	%	No.	%	No.	%
477	17.7	478	17.4	447	16.2	426	15.9	423	15.8

Source: National Resident Matching Program, Results and Data: 2021 Main Residency Match®. National Resident Matching Program, Washington, DC 2021.

Dathan Hamann, MD, FAAD

Medical Director Contact Dermatitis Institute



Dathan Hamann, MD, FAAD is a board-certified dermatologist in Phoenix, Arizona who specializes in complex medical dermatology and inflammatory skin disease. He completed his undergraduate training in Chinese Studies at Calvin College in Michigan, obtained his medical doctorate at University of Arizona - Phoenix, completed a preliminary year at the Department of Internal Medicine at The Ohio State University Wexner Medical Center (OSU) in Columbus, Ohio, and completed his training in Dermatology in the Division of Dermatology at OSU. He was appointed the Chief Resident of Research for the Division of Dermatology at OSU from 2017-2018. He is the co-author of 2 textbook chapters on rubber and metal allergy and he has authored over 50 publications. Dr. Hamann currently serves as the medical director for the patch test clinic Contact Dermatitis Institute in Phoenix and sees patients at his private practice, Saguaro Dermatology.

When and how did you first become interested in dermatology?

I was interested in this field as a premed but kept an open mind about different specialties throughout medical school. I really liked internal medicine and psychiatry along with a lot of other specialties, but I was drawn to dermatology because you get to do procedures and long-term chronic care in a wide variety of patients. There are some personal reasons too. I struggled with some skin diseases myself and melanoma runs on both sides of my family. I had some really great mentors in dermatology as well so it's kind of a mix of things. Ultimately, I liked the variety of procedures, complex inflammatory dermatoses, and it fit well with my background.

At what point would you say you finalized your decision to apply to dermatology?

I think I really decided after completing most of my rotations that it was a good fit for me. At the very end it came down to mentors and the culture of the specialty. You find people that draw you to it. Specialties can have different cultures that can be a better fit for some applicants versus others, and in my

case, I found that with dermatology. If there is a chance you might be interested in competitive specialties, you need to be more proactive early in medical school. It's important to keep an open mind as well. If you're not open-minded, you can miss out on something that would have been a really great fit. Doors can close as time goes by if you just let things happen to you and don't make plans. This is especially true for those who are interested in research-oriented specialties.

“When I think of a great dermatologist, like my mentors, I think of someone who is compassionate, observant, curious, and sees skin as an opportunity to take care of the whole person.”

What would you say is the stereotypical archetype of a dermatologist and the culture of dermatology?

I remember a Grey's Anatomy episode where one of the characters says dermatologists “apply lotion for a living” and are “completely empty inside.” When I think

of a great dermatologist, like my mentors, I think of someone who is compassionate, observant, curious, and sees skin as an opportunity to take care of the whole person. In recent decades, dermatology has also been filled with amazing test takers and I feel like our vast knowledge is something dermatologists

take a lot of pride in. However, the best physicians not only have textbook knowledge but also have amazing judgment. That's something you cannot just learn out of a textbook. I'm a physician before I'm a dermatologist. You have to care about your patients, hold yourself to a high standard, and take care of sick people. That's what makes a great dermatologist.

Once you had finally decided on dermatology, what did you do to prepare yourself for the residency application process?

When I applied, step scores were a really important part of the application process. I really enjoyed the research and I had mentors that made that process maybe a little easier for me than average. On the other hand, you don't get a lot of exposure to dermatology, so what I would say is to really focus on away rotations and making relationships with places that have a program.

What advice would you give to students considering dermatology?

The best advice is early exposure because you don't tend to get a lot during early years of medical school. So, try to see dermatology in different environments. Go to Mayo, see some pediatric dermatology at Phoenix Children's, and you can shadow me in private practice. Getting to see inpatient dermatology is awesome. Try to get your feet wet as early as you can.

Additionally, I think a lot of people imagine dermatology to be a cushy cosmetic type of field, and certainly there are practices that are that way, but the heritage of dermatology is treating a lot of important diseases: inflammatory dermatoses, infections, scleroderma, hidradentitis, side effects from chemotherapies, skin cancers, etc. These are the diseases that I

take pride in treating and that's something I would want young medical students to realize. We take care of a lot of really sick patients. Patients are amazed when you correctly guess if they had childhood seizures based on their skin exam. The skin is a window to systemic health: it's fun to bring out your stethoscope a few times a year for patients that you suspect could have a heart murmur based on your skin exam!

Now that you are a few years out of residency, how has the transition to becoming an attending been for you?

I work in a private practice with my brother and another colleague who does our Mohs surgical cases and it has been great. I really love what I do and I love the ability to take care of sick people in this community. At the same time, it has been tough owning and running a business during COVID. Our first day was in November of 2019 so it's been challenging, but I am very happy with where I'm at. It's the best job I've ever had. I enjoy teaching so I am exploring opportunities to be more involved with medical students and residents.

What are some exciting things you see in the future for dermatology?

The last 10 years have especially been amazing for inflammatory skin disease. There's been lots of new developments regarding therapeutic targets and drugs. It's a really exciting time. This past decade has mostly been medicines for psoriasis, and now it's sort of the time for atopic dermatitis and melanoma with new and amazing targeted therapies coming out.

- Joshua Willis, MS1

Match Summary for MD Seniors Applying to Dermatology— 2021

		No. of Applicants			No. of Matches		% Filled		Ranked Positions	
No. of Programs	Positions Offered	Unfilled Programs	MD Seniors	Total	MD Seniors	Total	MD Seniors	Total	MD Seniors	Total
138	477	5	517	734	382	471	80.1	98.7	4,290	5,188

Source: National Resident Matching Program, Results and Data: 2021 Main Residency Match®. National Resident Matching Program, Washington, DC 2021.



Daniel Butler, MD

Assistant Professor University of California, San Francisco



Dr. Daniel Butler is a dermatologist who cares for patients with a range of skin conditions, including cancer, infections and inflammatory diseases. In his research, Dr. Butler studies specific conditions, such as atopic dermatitis (eczema). He also pursues research focused on improving the understanding of skin disease in aging individuals. After earning his medical degree at the University of Arizona College of Medicine – Tucson, Dr. Butler completed a residency in dermatology at Harvard Medical School. In addition to serving on the faculty at the University of California, San Francisco, Dr. Butler teaches at the San Francisco Veterans Affairs Medical Center.

When and how did you know you were interested in this field?

I found dermatology a little bit later, so I didn't even think about dermatology until the middle of my third year. I thought I wanted to be a surgeon. But I was in the OR and I didn't love that experience, just cause it didn't fit me; nothing against the OR. I sort of went back to the drawing board at the beginning of my third year, and I found myself interested in a lot of different fields. I wasn't immediately drawn to one specific field. I was thinking about a field where you can really diversify yourself and your skill sets and get a lot of variation. Specifically, I wanted to make sure that I had an ability to see older adults. The specific experience that drew me to dermatology was on my internal medicine rotation on an outpatient block, and all these older adults would come in with comorbidities involving what we consider really serious organ systems. Their quality of life complaints were about their skin. They were often itchy, or they had something growing, or they had questions about this spot, or that spot, and that started me on a little bit of a journey to figure out who's looking at that. After talking to people who are focusing on skin and how quality of life impacts the skin, I started to get interested in dermatology. Lo and behold, it really fit a lot of the other diverse practice patterns that I wanted. I found that derma-

tologists get to see kids, adults, and older adults; they see a variety of pathology. We get to see infections, autoimmunity, cancer, and we get a lot of diversity in our skill sets. We do a lot of medical management, like immunosuppressant medications or chemotherapies. We also get to do small surgeries or bedside diagnostics. I just love that about the job; that diversity and variation in skill and practice is what drew me to it, so I was sold around late in my third year.

“My first piece of advice to anyone getting into this field is getting to know all the different facets of dermatology that you can possibly find.”

What do you wish you would've done differently in the first 3 years of medical school to prepare you for now?

It's really hard to be patient as a medical student, and it's always frustrating to have someone tell you to be patient, but I wish I was more patient with the decision making. We're all planners, particularly people who get into medical school, who are thinking about all the steps that we need to get to our next goal. I think choosing a speciality is one of the first times, maybe not the first, but a time where there's not a direct answer about how to achieve a goal. It's such an important virtue in that process because it's such a critical decision, and being patient with it allows you to truly have an open mind and gain self awareness to make the right decision. One of the most important things that I was told when I was a medical student, and that I tell all the students that I mentor, is that the

hardest thing about medical school isn't getting residency, or getting this score or that score; it's actually finding what you really like to do and then pursuing that. That's really hard because you're studying and learning all these things during your first and second year, and when you finally get into the hospital, you're going at a million miles a second. But then you're actually asked at that point to choose what you're gonna do for the rest of your life, and you really have to be critical about what it is that you like. You really can't anchor too early onto something that you think you might like or you heard a rumor about, so you have to stay patient and keep an open mind. Remind yourself that there is no single perfect field and that it's really about finding what you like and then knowing yourself. Prioritize those two things and then find the little niche within one speciality that can feed you and the things that you love.

What advice would you give students considering this field and any general pieces of advice?

My first piece of advice to anyone getting into this field is getting to know all the different facets of dermatology that you can possibly find. Often, people's first exposure to dermatology is through their own personal experiences, like going to a dermatologist for a skin disease when they were younger, or having a family member go through it. I usually recommend doing this: talk to a dermatologist and getting to understand what their residency experience was like, what their practice is like, and what different types of practices are like, because I think there's a misunderstanding of what dermatology is. It's not wrong, but there's just a lot of different paths that dermatologists can have with their careers. I think the first thing students should do is start to understand those paths and then they'll get a better breadth of what a career could potentially be in dermatology. Step number two is to find a mentor, somebody who can help them evaluate their interest and evaluate their steps to get into the field. It's a competitive field, so you really do need a supportive ecosystem around you to help you get in. Establishing that is critical. Those would be the two first steps

because I think sometimes the mistake is that people go into dermatology with limited exposure and then they're a little bit shocked at what the field actually is. Sometimes it's really hardcore medicine, or hardcore surgery, or hardcore pathology and those are not necessarily concepts that people initially think of when they think of dermatology. And there's just a ton of wonderful mentors in the Valley and I think those would be great people to help navigate the application process and hopefully the rest of their career as a buddy or a partner or a mentor.

By pathways in dermatology, are you hinting at pathways such as pediatric dermatology, dermatopathology and dermatology-oncology?

Exactly. There are multiple specialties within dermatology that are really cool because they are not the only thing that your practice has to be, there can be other skill sets. So there's 3 main fellowships that you can do after dermatology - pediatric dermatology, dermatopathology, and surgical dermatology. Again, it's not necessarily that all you're gonna do is one of those specific fields, you still can just add that into your skill set. If you do a pediatric dermatology fellowship you can still see adult patients too. It's just an additive, you'll just be an expert in that, same thing in surgery or dermatopathology. And then there are really disease specific models that are not necessarily ACGME fellowship-accredited but there's a lot of interest in these areas, like dermatology-oncology, medical dermatology, or rheumatologic dermatology. Like geriatric dermatology, ours is really small and doesn't really compare to those but there are all these little subsets where you can find niche homes and research or clinical or educational areas to diversify what your day and your expertise looks like.

Were there any resources on campus or mentors you found most helpful to solidify your decision to go into this field?

As someone who wasn't part of the University of Arizona College of Medicine - Phoenix family, I think there are wonderful national resources in addition to your more local resources. One would be the Dermatology Interest Group Association. They have a web-



site with mentors, mentoring material, entry level material, for those interested and dermatology curious. There are also national organizations, such as the American Academy of Dermatology, that has an entire dermatology curriculum for medical students. Then there are smaller organizations, like the Women's Dermatologic Society or the Medical Dermatology Society, which have an entry level sort of "I'm interested in dermatology" fellowships and networking experiences. That is really helpful for people who have not necessarily committed to the field, but are thinking "Hey I might like dermatology! What would that look like? How do I find mentorship and connectivity outside of my local environment?"

How did you prepare for your residency applications? Was there anything you would've done differently?

So the most important thing about your residency application is being genuine and focused on what your next steps are. I'm trying not to be vague, but the reason for that is that some people believe that in competitive fields, they have to be an expert in something before they start to apply. So I think the most important thing is to be genuine in your interests because it comes across when someone doesn't really have an interest in what they're doing. So find an interest- it can be small, it can be broad, but make sure to find it and then pursue it. That doesn't always mean research or presentations; sometimes that can be involvement in a clinic, in the community. But having a genuine interest is so important and being able to express that through the application process is critical. That's what I wish I had been able to harp more on. I had a diversity of experiences, but I think that really being able to show a genuine interest in a topic not just through research is such an important piece of that whole pie. Make sure that your interest is well developed, not necessarily that you have to have a perfect answer as to what you're gonna do for the rest of your life as a dermatologist, or whatever field you go into.

Do you have any hobbies or things you do outside of work? How is the general work-life balance in your field?

I do! I have many hobbies. They are very important. I tell all students that I work with to remember in your entire medical career that you are primarily yourself, and who you are to your family and your friends, before you are a doctor. Some people would or may disagree with me, but it's always so important to know that those things are what recharge you and allow you to be a good doctor. I think there's sometimes a misalignment with our doctoring self, if we're good enough at that, or if we love our job enough, it'll fulfill us and sort of feed our home life. I think we need to flip that script, and I think being a dermatologist has been really helpful for me in being able to stay grounded in my home life and with the things that I love to do. Over the last 2 years, I've fallen in love with my dog. His name is Sunny, he's wonderful. I also have a lovely wife, her name is Julia. And she's my best friend. So that's great. I also love basketball. I'm a huge basketball fan.

The nice thing about dermatology is that it's a very stable schedule, so it's typically work hours 9-5. There is weekend call, there is night call, but it's not as rigorous. In residency, it's a little bit more rigorous because typically you're in a hospital setting, and you're usually gonna be taking a little bit more call. But for the most part, it's a pretty stable schedule, and you definitely work hard when you're there. It's a volume speciality, so you know it's not relaxed when you're on the job, but you can kinda count on that you're gonna have your nights and evenings free and certainly your mornings too. It allows you the ability to plan and work in those things that really recharge you. And I've found that that's so important because when I'm run down, and I don't get to do those things - I don't get to play basketball or hang out with my dog or my wife - then I'm not as good as a doctor. I think that's a really important thing that we need to stress to medical students these days. Really taking care of yourself and the people who make you you should be priority number one because that'll make you a wonderful, wonderful doctor and allow you to bring in that empathy and caring nature that you really need to be able to help people through their struggles.

- Tara Ghalambor, MS1

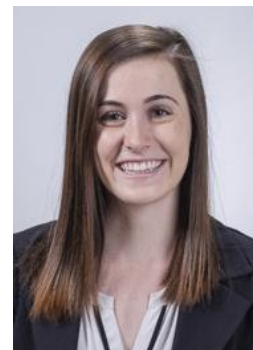


Jenna Koblinski, MD

PGY-1, Alumna

The University of Arizona College of Medicine – Phoenix

Dr. Jenna Koblinski is a preliminary medicine intern at the University of Arizona College of Medicine - Phoenix and a future dermatology resident at Emory University. She has been a long-term Wildcat as she attended the University of Arizona in Tucson for her undergraduate degree and then graduated from the UArizona College of Medicine - Phoenix with the class of 2021.



When and how did you know you were interested in dermatology?

I actually found dermatology relatively late in my medical school career. It was not something that was on my radar or that I had exposure to early on. It wasn't until the internal medicine rotation during my third year that I gained insight into the field. During this rotation, I went to see a patient with congestive heart failure (CHF) in the emergency department. This patient was having difficulty breathing due to fluid buildup in his lungs, and he had poor oxygen saturation. However, as I was asking him about his CHF symptoms, he ignored those questions and instead kept saying, "No my skin! My skin!" When I asked him what his concerns were, he told me about his hidradenitis suppurativa (HS). He explained what it meant to live with HS and how much pain he was currently in because of a flare.

He was not concerned about his breathing at all, but rather by this dermatologic process. As someone who is really in tune with how others are feeling and strives every day to help patients, this was striking to me. I had never realized how impactful these illnesses could be, and as a result, I spent the winter break of my third year shadowing dermatologists. That was when I realized this field was for me. For dermatologic illnesses, you have to wear your illness on your sleeve, so to speak, and helping others literally feel comfortable in their own skin is very rewarding to me. Furthermore, I find the pathologies fascinating,

"I think the best advice I was given is to make sure you like the 'bread and butter' of whatever field you choose."

enjoy the clinical and procedural aspects, and love the continuity of care.

How did your medical school experience impact your decision? Were there any resources on campus or mentors you found most helpful to solidify your decision to go into this field?

I really did stumble across dermatology, so I think the experiences that impacted my decision largely came from being open on every rotation and trying

to learn and see as much as possible. If I hadn't volunteered to see the patient I previously talked about, I don't know if I would have found the field which I really feel I belong to. However, once I decided on dermatology, there were many amazing people who supported me and truly helped make this possible. I could list about twenty names of people

(dermatologists and non-dermatologists) who spent their invaluable time helping me with this process. For the sake of brevity, I will try to group them together. The UArizona College of Medicine - Phoenix faculty and staff, UArizona College of Medicine - Phoenix and UArizona College of Medicine - Tucson alumni, Medical Dermatology Specialists, Phoenix's Children's Hospital Department of Dermatology, Mayo Clinic Arizona Department of Dermatology, and the Association of Professors of Dermatology. I know this is a robust list, but each person I interacted with on my pursuit of dermatology had a strong impact on me. I would not be where I am today without all of their support.



After deciding on dermatology, what did you do to prepare for your residency application process? Was there anything you would have done differently?

Once I decided on dermatology, I tried to get involved in dermatology-specific research and reached out to as many people as I could for their advice (hence the above list). I have a passion for research and had previously completed research in colorectal cancer and hepatology, so I was able to take those research skills and translate them to dermatology. I was also planning to do rotations out of state, but was unable to do so due to COVID. Instead, I focused my time on trying to find formal dermatology experiences in Phoenix, and as a result, I found some incredible rotations I wouldn't have exchanged for anything. I think I would have been less stressed or had a more dermatology-oriented application if I had found dermatology earlier, but at this point, I don't know if I would have wanted to do anything differently in that regard. I truly believe everything worked out as it should have. I enjoyed being open to all of my rotations as a third year, and I don't know if I would have jumped into all of them feet first if I had already had my mind set on another specialty. What I do wish I would have done differently is tell myself that it was going to be okay and that I would find my fit. It is stressful not knowing what to pursue, and as a Type A personality, I thought I had to know at all times what I wanted to be. I had other people tell me, "It will happen when it happens", but I think it would have alleviated the stress had I actually been able to take that to heart. Medical school is stressful all around, and it's easier to say "be less stressed" than done!

What has your experience been like thus far as an internal medicine prelim?

I have greatly enjoyed being an internal medicine prelim. I have built strong connections with my faculty and co-residents, as well as with my patients. I already have many patient stories, both good and bad, that I will carry with me forever. I was also in the ICU during the COVID peak of this past summer, which was not something I was prepared for. I have

so much respect for all of the people I have worked with who risk their own lives (and sanity) to care for our community. I am learning so much, and it truly is a privilege to care for patients. I actually just received my first thank you letter in the mail from a patient's family. It was so meaningful and impactful to me, and it reminded me why I am doing what I am doing. Intern year is hard, and it is easy to focus on the tough cases, so you just have to not lose sight of the bigger picture.

Do you have any hobbies or things you do outside of work?

Wards and ICU are pretty busy, but on electives, there is definitely time to enjoy life outside of medicine. I really love to travel whenever it is possible (and safe), but even if I have just one day off, I like to read or write. I also have recently started running - something I never thought I would say - and just trying to stay active, as so many of my ward days are spent in front of a screen. Last but certainly not least, spending quality time with family and friends (preferably with carbs and a happy hour) is also important to me.

What advice do you have for medical students when it comes to choosing a field?

First, it really is okay if you don't know what you are going to be! As I said before, I know it's stressful, but things have a way of working themselves out. I had classmates who knew what they were going to be on day one and went into that field, classmates like me who had no idea and then decided last minute, and classmates who thought they were going to be X, then did a 180 and fell in love with the opposite field. I think the best advice I was given is to make sure you like the "bread and butter" of whatever field you choose. The "zebras" of any field will be exciting and fascinating, but most days you will be treating the horses. For example, for pediatric dermatology, you should enjoy and find meaning in treating acne and eczema because you will not be caring for patients with epidermolysis bullosa every day. We have long careers ahead of us, and finding our passion is important! - **Lauren Dimalanta, MS1**



Dermatology Interest Group at UArizona College of Medicine – Phoenix

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