Mentorships: A meaningful path to success

Perhaps one of the most rewarding experiences in your residency will come through gaining new insights through the mentoring process. Directions in Residency spoke with leaders in dermatology and asked them to articulate why this process is both vital and enduring.

Mentoring is omnipresent
Isaac Neuhaus, M.D., assistant professor of clinical dermatology at University of California, San Francisco, is one of many dermatologists who believes mentoring can come from many different sources. “I have been fortunate to have many mentors,” said Dr. Neuhaus. “Some have been more formal (i.e., assigned during my residency), while others have happened spontaneously. Both have been very rewarding, and I have learned a tremendous amount from them.”

Dr. Neuhaus said some of his best mentorship experiences have been with individuals outside of his area of concentration. “These

The Old Ball Game
By Kim B. Yancey, M.D.

Early in my career, I was lucky to be part of a great team. Our group was comprised of enthusiastic, curious, and thoughtful people from a wide range of backgrounds and geographies. Our leaders served as wonderful role models who taught us how to share our successes and disappointments, enjoy each other’s accomplishments, and keep our feet pointed forward to new challenges and opportunities. This team taught me how to think. It also broadened my perspective about what signifies matters of substance and priority. This experience and subsequent ones like it, represent professional life experiences that I truly value and cherish.

The individuals shown in the photo (right) have subsequently developed high quality private practices, served the U.S. government, led departments of dermatology in the U.S., Europe, and Japan, served as the dean of a major U.S. school of medicine, directed an institute at the National Institutes of Health, and co-invented the human papilloma virus vaccine.

I hope that everyone can find a team that fosters their development and sustains them in similar ways. There is no doubt that “my team” made me a far better physician and investigator than I otherwise deserved to be. For me, it has been “team relationships” and “moments of the game” that have proved to matter much more than the score in the old ball game.

Dr. Yancey (second row, far right) with members of his “team” (circa 1984-1985).
PharmaDerm proudly supports the American Academy of Dermatology and the Directions in Residency newsletter
New fellowship resources available for residents

A wide variety of fellowships are available for dermatology residents such as Mohs, dermatopathology, and cosmetic surgery. Many positions may only be available by word of mouth or contacts within the field, so talk with your program staff about potential openings.

Dermatopathology

“Dermpath” is wide open for the dermatologist. Just one or two decades ago, most of the fellows in dermatopathology programs were dermatologist-trained. Now, out of 50 applicants, one or two might be a dermatologist. Like other fellowship programs, informal recruiting and word of mouth is important.

Mohs surgery

There are more than 60 fellowship training programs in the world but only about 30 to 35 programs offer a position in any given year. Many programs have a person chosen internally, therefore these programs would not go through the matching process. Applicants may want to get inside information regarding each program and have a contact person talk with the prospective program director about an application. For more information, check out these Web sites: www.mohscollege.org or www.sfmatch.org.

Cosmetic surgery

There are both formal and non-formal cosmetic surgery programs. Formal programs can be found by contacting the American Society of Cosmetic Surgery at www.cosmeticsurgery.org. Non-formal programs are often discovered by networking, and are essentially apprenticeships.

Early offer

If you sell yourself aggressively to a program, be prepared to accept an early offer. There are windows of opportunities when it comes to fellowships and new candidates are constantly interviewing for these positions. If you don’t accept an offer when extended, those connected with the program may lose interest, and another prospective fellow may be offered the job. If you know what you want in a program and the program fills the requirement, it could be in your best interest to take the early offer.

Other fellowships

Besides the common fellowships most residents are aware of there are other special areas of dermatology that have fellowship opportunities (including pediatric fellowships). Check out the new online AAD Fellowship Directory at www.aad.org/fellowshipdirectory, and select “Fellowship Seekers.” The new directory allows you to search by category or location. Most listings include the name of the program director, a contact name, and an e-mail address.

New online Fellowship Directory is now available at: www.aad.org/fellowshipdirectory/

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relationships have the benefit of being removed from the day-to-day issues and politics that can occur with someone in your same field of focus,” he said.

“I think valuable relationships can form spontaneously or by design,” said Tina S. Alster, M.D., director of the Washington Institute of Dermatologic Laser Surgery, and who will be receiving the 2009 Women’s Dermatologic Society Mentorship Award in March 2009.

“Certainly, having formal mentorship programs provide those who may not otherwise have the opportunity, the chance, to train with an expert in a certain field. However, as a long-standing student of our discipline, I must say that some of my most important educational ‘moments’ have occurred spontaneously.

A Women’s Dermatologic Society mentorship award in her residency allowed Elizabeth Martin, M.D., current chair of the Young Physicians Committee, to spend a month with Dr. Alster. At that time, Dr. Martin’s residency program did not offer much laser training, and the opportunity to study with Dr. Alster was, Dr. Martin said, “absolutely career-changing,” giving her the opportunity to learn procedures and techniques that she still uses in her practice today. Evan R. Farmer, M.D., said it doesn’t really make any difference whether the mentoring is formal or informal but rather that it is relevant to your situation and is timely. “Most of my mentors have been informal, but at times they happened to be my department chair or dean. I have also learned a great deal from my colleagues and staff,” Dr. Farmer said.

Guiding forces can change your life

Dr. Martin said informal mentors can also serve as ongoing, guiding forces. “Sometimes our informal mentors may not even know they are mentoring when they do it, she said. During my residency, Patricia Mercado, M.D., showed me how to successfully balance a successful career with a successful home life. Former Academy President Diane Baker, M.D., and Academy Board of Directors member Maggie Parsons, M.D., continue to teach me how to artfully balance a private practice career, extensive Academy involvement, and family life, not so much through their words, but through their actions. So, in my opinion, informal mentoring can be just as powerful as formalized relationships.”

Andrew Lazar, M.D., professor of clinical dermatology at the Feinberg School of Medicine at Northwestern University, recalled a less formal, but highly enlightening and instructive experience with his “mentors,” including dermatologists June Robinson, M.D., who was a Mohs surgeon at Northwestern, and Stephen Webster, M.D. “These people gave advice, guidance and suggestions and to this day I can still call these people for advice and input and still get good recommendations.”

“I’m always amazed and delighted by how very willing and interested our more senior dermatologists

See MENTORSHIPS on p. 7
# Medically Important Spiders

*By Natalie M. Curcio, M.D., M.P.H., Division of Dermatology, Vanderbilt University Medical Center, Nashville, Tenn.*

<table>
<thead>
<tr>
<th>COMMON NAME</th>
<th>GENUS</th>
<th>SPECIES</th>
<th>VENOM CONTENTS</th>
<th>LOCAL SIGNS/SYMPTOMS</th>
<th>SYSTEMIC SIGNS/SYMPTOMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black Widow</td>
<td><em>Lactroductus</em></td>
<td>mactans</td>
<td>Alpha-lactrotoxin (neurotoxin)</td>
<td>Pain, erythema, local sweating, piloerection, lymphangitis</td>
<td><em>Lactroductus</em>: Regional pain, severe abdominal pain, diaphoresis, headache, muscle spasms, nausea, vomiting, fever, chills, hypertension, weakness, tachycardia</td>
</tr>
<tr>
<td>Brown Recluse</td>
<td><em>Loxosceles</em></td>
<td>reclusa</td>
<td>Sphingomylinase D [SMD]</td>
<td><em>Cutaneous Loxoscelism</em>: pain, erythema, edema, pruritus, vesicles, “red, white, and blue sign,” eschar</td>
<td><em>Viscerocutaneous Loxoscelism</em>: fever, chills, nausea, vomiting, skin eruption, abdominal pain, joint pain, malaise, hemolysis, anemia, hematuria, low platelets, DIC</td>
</tr>
<tr>
<td>Hobo Spider</td>
<td><em>Tegenaria</em></td>
<td>agrestis</td>
<td>Unknown</td>
<td>Very painful, induration, erythema, vesicles, eschar</td>
<td>Severe headache, nausea, weakness, fatigue, temporary memory loss, vision impairment</td>
</tr>
<tr>
<td>Wolf Spider</td>
<td><em>Lycosa</em></td>
<td>Antelucana</td>
<td>Histamine</td>
<td>Very painful, erythema, edema, pruritus</td>
<td>Rare: nausea, headache, malaise</td>
</tr>
<tr>
<td>Sac Spider</td>
<td><em>Cheiracanthium</em></td>
<td>inclusum</td>
<td>Lipase</td>
<td>Sharp pain, edema, erythema, pruritus, wheal</td>
<td>Rare: nausea, vomiting, headache, lymphadenitis</td>
</tr>
<tr>
<td>Jumping Spider</td>
<td><em>Phidippus</em></td>
<td>audax</td>
<td>Hyaluronidase</td>
<td>ASx to slightly painful, erythema, edema, wheal, pruritus</td>
<td>None</td>
</tr>
<tr>
<td>Green Lynx Spider</td>
<td><em>Peucetia</em></td>
<td>viridians</td>
<td>“Proteases” (not identified)</td>
<td>Pain, pruritus, edema, burning, shallow ulceration</td>
<td>None</td>
</tr>
<tr>
<td>Fishing Spider</td>
<td><em>Dolomedes</em></td>
<td>scriptus</td>
<td>Neurotoxin (Ca2+ channel blocker)</td>
<td>Pain, erythema</td>
<td>None</td>
</tr>
<tr>
<td>Funnel Spider</td>
<td><em>Atrax Hadronyche</em></td>
<td>40 species [Australia]</td>
<td>δ–Atracotoxin (neurotoxin)</td>
<td>Severe pain, local piloerection, muscle fasciulation</td>
<td>Nausea, vomiting, perioral tingling, facial muscle and tongue fasciulation</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Cholinergic: dyspnea, diarrhea, salivation, lacrimation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Adrenergic: diaphoresis, hypertension, tachyarrhythmias, pulmonary edema</td>
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</tbody>
</table>
Basic Self-Assessment of Dermatopathology will be offered twice on Friday, March 6, during the Academy’s 67th Annual Meeting in San Francisco. An additional session was added to the 2009 Annual meeting, following a request by the Residents and Fellows Committee. Attendees will view 60 slides from skin biopsy specimens in a format that will allow self-assessment. Cases will span the full spectrum of dermatopathology. Each specimen will be discussed by a faculty member with emphasis placed on establishing the correct diagnosis and consideration of the differential diagnosis.

Seeking authors for self-assessment exams

The American Academy of Dermatology’s Self-Assessment Task Force is currently soliciting submissions from faculty and residents interested in developing self-assessment examinations. A copy of the “Guide to Preparing Self-Assessment Questions” has been posted to the Academy’s Web site, www.aad.org, under the enduring materials section. This is a wonderful opportunity for growth and recognition in your residency, as the published work will appear in the JAAD and cited in Medline.

All inquiries should be directed to Michelle Adams, Content Development Manager, for the Academy’s Department of Education at (847) 240-1693 or via e-mail at madams@aad.org.

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March 6, 2009
5:00pm – 7:00pm

For more information please contact the Member Resource Center at (866) 503-SKIN (7546).
Residents — Prepare for San Francisco!

Add these to your meeting agenda!

The American Academy of Dermatology is holding its 67th Annual Meeting March 6-10, 2009 in San Francisco. For more information about sessions and events at the meeting, visit www.aad.org/meetings/annual/index.html.

Get ready for Resident Jeopardy!

Join your colleagues for self-assessment through a familiar engaging game show format. Register for Resident Jeopardy, being offered Friday, March 6. Queries and image-based inquiries encompassing the breadth of dermatology are posed in a friendly competition arrangement in which audience members are invited to participate. Following this forum, you will be able to self-assess core competencies across a number of domains in dermatology, and interact and network with colleagues at similar career levels from various institutions across the country and internationally.

Contestants will be selected from the list of registrants and notified prior to the meeting session. Buzzers will be provided!

Make a smooth Transition

After spending years training to be a dermatologist, residents may see the light at the end of the tunnel, yet still face some major hurdles before becoming successful dermatologists, including taking the Board examination and deciding on a career path. “Resident Transitions,” being offered Sunday, March 8, will provide information on the structure, format, and process for the American Board of Dermatology examination from the perspective of ABD administrators and dermatologists who recently took the examination. In addition, successful dermatologists will share some of the challenges they faced and how they addressed them when launching a career in academic, solo, or group practice. Jennifer Lucas M.D., chair of the Residents and Fellows Committee, is the director of the symposium.

Discover latest research advances at Resident and Fellows Symposium

The Resident and Fellows Symposium — which presents the latest laboratory-based and clinical-based research findings — will be held Sunday, March 8, led by Dennis H. Oh M.D., Ph.D. The symposium has recently been updated and expanded. At the conclusion of the session on Sunday, a team of faculty judges will select three winners from each category (clinical-based research and laboratory-based research) — based upon their abstract — and the top two will be presented on site with the Everett C. Fox Award. The three winners from each category will be selected on site. The winners will be featured in the spring 2009 issue of Directions in Residency.

Don’t miss the Residents’ Reception!

The Residents’ Reception is scheduled for Friday, March 6, in the San Francisco Marriott, Yerba Buena Salon 10/11/12. Save the date in your 2009 Annual Meeting schedule!
More than just a role model, a mentor can help you actively achieve your goals.

Susan Taylor, M.D. (mentor)

I view mentoring as a personal obligation to help the next generation of dermatology students, residents, young attendings, educators, and researchers. It is a wonderful way to ensure that the specialty and the young person will grow, evolve and achieve goals that may not have been imaginable. There is no greater reward than to see a mentee, such as Raechele, do her job more effectively and to progress in her career as an academic dermatologist.

I think that the best relationships are derived from a combination of spontaneity and a formal framework of interaction, layered with mutual respect. Through the eyes of my mentee, I have had the wonderful experience of being able to renew my excitement and enthusiasm for all aspects of dermatology. Perhaps the most powerful experience is observing one’s mentee doing that which you have not done and that which you (as the mentor) never dreamed of.

Raechele Cochran Gathers, M.D. (mentee)

The mentorship relationship is a vitally important one, and can be invaluable in setting the course for a nascent career. The mentorship relationship can both support and encourage the achievement of goals, and can also foster in the mentee the desire to eventually pass on all that has been gleaned from the mentorship relationship. A good mentor is one who not only has considerable expertise and affiliations within the area where the mentee desires development, but also one who has the ability to encourage, excite, and effectively communicate knowledge. The mentor-mentee relationship can be as formal or as casual as both parties are comfortable with, but care must be taken to ensure that the mentee remains challenged, and accountable to goals. As Dr. Taylor’s mentee, I have benefited enormously. She has provided me advice, counsel, opportunity and motivation. Moreover, she has helped me to very clearly develop my career goals, and has helped me to elaborate a step-by-step mechanism for accomplishing them.

Are to be mentors,” Dr. Martin added. “Without exception, I’ve found them to be approachable, interested, and helpful. Both in formal Academy meetings and in casual conversations, they are willing to provide wisdom and advice.

Focus and strategies

“When I first entered academic medicine, my former and current department chairs emphasized the word ‘focus’ in developing a career,” Dr. Farmer said. “They both believed to succeed, one must truly become an expert in a particular field within dermatology. I clearly remember both of them emphasizing focus.”

Dr. Farmer said he also learned many strategies in leadership and management from his former chairs and deans. “For example, I was advised never to bring an issue to vote unless there was more than a simple majority to prevail,” Dr. Farmer said. “In an organization, a majority of one — particularly in a significantly contested issue — while it prevails, is not the best way to move the organization forward. If the issue is that close, it needs more discussion and thoughtful deliberation and perhaps new information.”

Dr. Lazar suggested anyone who was seeking to have a full time academic practice also have a full-time formal mentor to help them get through their academic career and advise them on how to get tenured, published, and the like. “Or if one’s interested in getting involved in a council, committee, task force, or even wants to know what these entities are and what they do, mentors can help with navigating through the Academy structure,” he said.

Spread the word: tanning is out

To educate young women about the dangers of indoor tanning, the Residents and Fellows Committee and the Young Physicians Committee are promoting the American Academy of Dermatology’s new “Indoor Tanning is Out™” Online Public Education Tool Kit (http://www.aad.org/members/leadership/programs/toolkit.html). The kit provides Academy members with resources to reach college women, including a sample invitation letter to sororities and a presentation. Academy members are encouraged to use these resources to raise awareness on their nearest college campus.
Hello fellow residents, and greetings from Cleveland. I hope the educational year continues to be a good one for you. As always the AAD has been busy positioning our field as the experts in skin, hair, and nails, and assuring that we have the resources and opportunities that are important to all of us. At the recent Board of Directors meeting in Indianapolis the impact of today’s economy was discussed. In addition, a Vitamin D position statement was finalized, and procedures regarding perceived commercial bias in meeting presentations was addressed.

The emphasis of this issue of Directions in Residency is to promote the importance of mentorship. Establishing a mentoring relationship can be an invaluable opportunity to learn from someone who has excelled in your field; learning from their mistakes and successes. I am sure that we can all name invaluable mentors from our past and have likely served in this capacity at some point as well. The Academy is rich with eager and qualified mentors. If you have not done so already, take an active role and engage someone about the possibility of serving as your mentor. This may be a staff member from your home program, someone in the community or in a position of leadership. I have seen firsthand how valuable a mentor can be in helping you to achieve your dreams.

The Residents/Fellows Committee would like to hear from you about your mentoring experiences, the good and the bad. If you have suggestions on how to start a mentor program, pearls for best practices, or even the “don’ts,” please send us an email at residents@aad.org.

Finally, I would again like to encourage you to attend this year’s Resident Transitions Symposium on Sunday, March 8th from 2 to 5 p.m. It’s an excellent opportunity to learn tips for your first year in practice and information on the upcoming board exam from the American Board of Dermatology and dermatologists who have recently taken the exam. Have a great winter and I look forward to seeing everyone at the Annual Meeting in San Francisco!