To the Medical Dermatology Society:

I would like to thank you for the wonderful opportunity that I had to work with Dr. Lindy Fox at the University of California San Francisco, Department of Dermatology. The opportunity you have given me has enabled me to better plan for my future career.

Dr. Fox specializes in inpatient dermatology and has been revolutionary in the development of the role of a “dermatology hospitalist”. She was an excellent role model and has further inspired me to pursue a career specializing in inpatient dermatology. Given my interest in becoming a dermatology hospitalist as well, Dr. Fox tailored my entire experience towards this goal. When I first arrived for my rotation, she met with me to outline my career goals. She also spent time discussing how she managed to be successful with dividing her academic/outpatient time with her inpatient dermatology hospitalist time. She discussed hurdles that I may encounter when I start a new position in a department as a dermatology hospitalist, and ways to overcome these hurdles. We met on a weekly basis with a detailed discussion, ensuring that my rotation was helping to solidify my goals. Dr. Fox also explained the UCSF Department of Dermatology dermatology hospitalist role and schedule. Given my particular career plans, she helped me plan future possible ways in which I can manage my career as a dermatology hospitalist.

I rounded daily in the hospital with both Dr. Fox and the inpatient resident, learning extensively about complex dermatologic patients. Stimulating patient cases included a SAPHO-like syndrome, a midline extranodal NK/T cell lymphoma, and a severe bullous toxic erythema of chemotherapy. During rounds, Dr. Fox spent a tremendous amount of time talking to the patients in their rooms, discussing teaching points on each patient, bringing up questions for discussion, and identifying a pertinent literature search for each patient. The residents, including myself, would then research particular elements of each patient’s case that evening and arrive the next day with journal articles pertinent to that patient. During rounds, I also observed Dr. Fox’s interactions with the primary care teams leading to expedited patient care. In addition, I was fortunate to witness her attendance at multidisciplinary meetings amongst various consultants to better coordinate patient care.

I attended all of the daily lectures given by the UCSF Department of Dermatology faculty, as well as Grand Rounds and specialty clinics. Interesting grand rounds cases included Papuloerythroderma of Ofuji, lupus panniculitis, and Brooke-Spiegler syndrome. I was able to spend time in the complex medical dermatology clinics with Dr. Berger, where I observed the management of complex cases including recalcitrant pemphigus vulgaris, peristomal pyoderma gangrenosum, nodular amyloidosis of the face, and mucosal Sweet’s syndrome. In addition, I was able to attend an HIV dermatology clinic where I observed a case of Kaposi’s sarcoma and was educated by the attending about management of eosinophilic folliculitis and genital warts in HIV patients.

After this rotation, I feel that I have had adequate guidance to pursue a career as a dermatology hospitalist. I have observed a highly functional dermatology hospitalist model at the UCSF Department of Dermatology and hope to integrate this model when I begin my career. Dr. Fox
has graciously offered to continue an ongoing mentorship with me, which would not have been possible without the Medical Dermatology Society’s support. Again, thank you to both the Medical Dermatology Society and Dr. Lindy Fox for this incredible opportunity.

Sincerely,

Erika Summers MD
Dermatology Resident, University of Utah