Applying for Residency: Dermatology

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Part I: Overview of Dermatology

Description of Specialty, Common conditions, types of patients:
Dermatology is a wonderful field full of variety. It is a specialty that allows you to “own” an organ system; we manage skin disease from beginning to end, including diagnosing, reading dermatopathology, and treating with medications and/or procedures. General dermatologists see high volumes of patients in our clinics for many different issues including skin cancer, pigmentation disorders, complex medical dermatology, skin toxicities of chemotherapy, autoimmune diseases of the skin, infectious skin conditions, and many more. We care for both children and adults. We do procedures from biopsies and surgical excisions to injections and laser treatments. We utilize medications from topical agents to cutting edge immunomodulatory therapies. Dermatologists also serve as consultants in the hospital, helping to diagnose acute rashes and skin lesions as well as manage life threatening skin conditions such as Stevens-Johnson Syndrome. There are also many opportunities to advance the field through research, political advocacy, global health, and industry. Dermatologists consistently rank among the highest in physician surveys of job satisfaction and work-life balance.

Career trajectories: academics, clinical, research, teaching, etc.:
Multiple career trajectories are available to dermatologists. Some remain within academics and develop expertise in specific areas of the field, including inpatient consults. Among academic dermatologists, many conduct diverse types of research in addition to training residents and medical students. Others go into private practice and provide general dermatology and cosmetic dermatology care. A small percentage go into industry to contribute to product, technology, and drug development. Dermatologists also serve in administrative roles throughout the hospital, in provider and research roles in global health, and in leadership roles in clinical trials.
Practice Models
Practice models for general dermatology include academic medicine, traditional private practice, group practice, employment through a Health Maintenance Organization (HMOs, for example, Kaiser Permanente), hospital or medical center employment, Indian Health service or the military. One unique aspect of a career in dermatology is the ease in which one can switch or combine models.

Residency: Length, typical curriculum
Residency in dermatology includes 1 year of internship and 3 years of dermatology residency. For the internship year, applicants can complete a preliminary medicine year, preliminary surgery year, or transitional year. These experiences build a foundation of general medical knowledge and skills necessary to care for patients. Over the following three years, dermatology residents rotate through continuity clinics, general dermatology clinics, pediatric dermatology clinics, surgical excision and Mohs surgery clinics, and inpatient consult blocks. Most residency programs will also offer rotations in more specialized clinics such as connective tissue disease, complex medical dermatology, cutaneous oncology, teledermatology, and more. Our specialty is somewhat unique in that we also learn dermatopathology, which allows us to communicate and collaborate more effectively with the pathologists who read our biopsy and excision specimens. Programs will differ on research requirements, elective rotations, and call schedules.

There is also the opportunity to complete a medical-dermatology (med-derm) residency, which includes 1 year of preliminary medicine internship and 4 years divided between dermatology and internal medicine training. The dermatology portion of med-derm residency is as described above. The medicine portion includes rotations on general medicine wards, intensive care units, and primary care clinics among others. “2+2” research tracks also are possible- you should check programs’ websites for details on specific programs.

Fellowships offered after residency
There are three official and accredited fellowships in dermatology: Pediatric Dermatology, Dermatopathology, and Micrographic Surgery & Dermatologic Oncology (more commonly known as “Mohs,” which is a specialized type of surgery to remove specific types of skin cancer). These programs are 1-2 years long, depending on the institution. There are also a number of non-traditional fellowships to build expertise in specific areas of dermatology including Dermatology/Rheumatology, Complex Medical Dermatology, Cosmetic Dermatology Surgery, Cutaneous Oncology, Contact Dermatitis and Patch Testing, Clinician Educator and more. Most of these are 1-2 year programs.
Part II: Life as a Dermatologist

Demographics
Women make up 51% of applicants in dermatology (2018), and almost half of practicing dermatologists are women. Women are expected to continue to increase as a percentage of the dermatology workforce. Approximately 3% of dermatologists in the United States are African-American and 4.2% are Hispanic. In 2014, dermatology residents in the United States were 68.8% white, 3.9% black, 6.7% Hispanic, 20.3% Asian, 0.2% Native American/Alaskan Native, and 0.2% Native Hawaiian/Pacific Islander. The American Academy of Dermatology has recognized the lack of diversity in the dermatology workforce as a key problem and has established a variety of new programs and initiatives to help promote diversity.

Earnings Potential
In recent years, the median compensation for dermatology has been reported as $450,000. Incomes vary based on practice setting and geography.

Lifestyle
Many dermatologists report great work-life balance given the majority of care is largely outpatient based, with limited call and a flexible work schedule. Dermatologists report working an average 45.4 hours per week. Thirty-five percent of dermatologists work in solo practice. Thirty-four percent work in more than 1 office and 66% work out of only 1 office. Subspecialists may have very different lifestyles. Mohs surgeons may take call for their own patients throughout the week. Dermatopathologists – who specialize in the diagnosis of skin disease using histology and laboratory techniques – may both see patients in clinic and interpret pathology slides in a hybrid practice. Medical dermatologists may see patients both in clinic and on inpatient services.

Academic Medicine
Academic dermatology departments generally have faculty from all dermatology subspecialty areas. In academics, faculty may participate in research, teach medical students and residents, and provide clinical care to patients. Dermatologists participating in global health programs are often affiliated with an academic medical center or medical school.

Part III: Applying in Dermatology

How Competitive is Dermatology?
Dermatology is among the more competitive specialties. In 2017, there were 423 offered dermatology residency positions. A total of 651 people applied for those positions, including 479 U.S seniors and 172 additional applicants (including U.S. medical graduates applying after their senior year of medical school, foreign medical graduates, and osteopathic medical school graduates). Of the 479 U.S. senior applicants, 346 matched. A total of 415 applicants matched in the main Match. There were 4 unfilled positions offered through the Supplemental Offer and Acceptance Program (SOAP), and all 4 were filled.
In the 2017-2018 application cycle, the mean USMLE step I score was 247 with standard deviation of 13.3 and the mean USMLE step II score was 255 with standard deviation of 13.0. Importantly, these scores represent only one component of your application. Many other components are considered when evaluating your candidacy. Additional details are provided below. In addition to this document, another great resource for learning about the dermatology application process is a podcast called Topical. This is hosted by two dermatology attendings at Brigham and Women’s Hospital, and they discuss many of the topics below in more detail.

Although it is a competitive specialty, HMS students tend to do very well in the dermatology match and, if genuinely interested in dermatology, should not be easily dissuaded from applying just because of one or two perceived weaknesses. A recent HMS graduate stated “despite the difficulty of the process, it is very doable, and most students (especially at HMS) end up doing very well!”

Planning the post-clerkship and senior years
After you decide to apply in dermatology, we recommend you email one or more members of the HMS Dermatology Core Advisory Committee to arrange a meeting. This committee is made up of the site directors of the HMS Dermatology Clerkship rotations at MGH, BWH, BIDMC, and Boston Children’s Hospital. The current committee members can be found in the medical student section of the Harvard Combined Dermatology Residency Program website (https://www.hms.harvard.edu/dermatology/training/medicalstudents/medicalstudents.html).

These Core Advisory Committee members are happy to meet with you at any point during your medical education. They can provide information on the range of career opportunities in dermatology and the nuts and bolts of applying for dermatology residency. They can also help you identify additional mentors in the department as well as plan your post-PCE clinical experiences and research/extracurricular activities.

The summer before you apply, you should make an appointment to meet with the program director of the Harvard Combined Dermatology Residency Program to introduce yourself. Be prepared to discuss your interest in dermatology and any questions you may have about the program. This is not an evaluative meeting, but rather a meeting to provide you information about the selection process and our program. Even if you are not planning to stay in Boston for training, meeting a program director and discussing your candidacy will help prepare you for residency interviews.

Clinical Rotations and Sub-Internships
You must complete a medicine or advanced pediatrics sub-internship in addition to at least one (ideally two) dermatology sub-internship elective(s). There are dermatology electives in General Dermatology, Complex Medical Dermatology, Dermatology/Rheumatology, and Oncodermatology available at the Harvard hospitals (consult the HMS course catalogue for up-to-date elective offerings). Away electives are also an option as discussed below.
If possible, try to complete your medicine/pediatric sub-internship and dermatology electives by July of your senior year. This will give the department committee enough time to complete course grades and summative comments for your Departmental Summary Assessment (DSA).

Away electives
Away electives are not required in dermatology, and it is best to discuss this decision with a faculty advisor. In general, most advisors will recommend doing an away elective if there is a city/region you would like to be in for a specific reason (your partner lives in that city, your family lives in that city, etc.). Many away electives require an application well in advance, so it is important to plan ahead if considering this option. Check the website for the specific application process for electives at institutions outside of HMS.

You should know an away elective is an “audition.” You will interact with many faculty members and residents who will be evaluating you as a potential future resident. Unless you make a strongly positive impression on each person you work with, there is a risk your away elective will harm your candidacy, particularly since there are so many highly qualified applicants. Given this, most HMS students who do not need to be in a specific place for personal or other reasons opt to take advantage of the multiple dermatology electives available at our hospitals.

Other Recommended Electives
Electives are your opportunities to learn. Take electives that interest you and that will help you become the physician you want to be. We strongly advise you to take electives outside of dermatology and to learn as much as you can about other fields in a formal setting. Dermatology overlaps with most fields of medicine, but we co-manage many patients with oncologists, rheumatologists, immunologists, and infectious disease doctors.

Research
Research is a very important component of a dermatology residency application and is necessary to be considered a competitive applicant in the field. Ideally, some of your research should be conducted within the field of dermatology. This is a great way to learn about an aspect of dermatology and the scientific inquiry process. It is also an opportunity to get to know a faculty member who can potentially write a letter of recommendation for you.

Research can be in any area about which you are passionate, including but not limited to clinical, basic science, quality improvement, medical education, public health, and global health. Many if not most dermatology applicants will have published and/or presented their research during medical school.

Given the importance of research in the application process, some students will take a 5th year for research. This is not required, and many students have applied successfully without taking a year off. Consider discussing this option with your advisors. If you are looking for research projects in dermatology, plan to meet with an HMS Dermatology Core Advisory member as discussed above. They can help direct you to potential mentors and projects. Research opportunities are also often
communicated through the HMS Dermatology Interest Group (DIG) listserv. We encourage you to join this student group if you are considering dermatology as a career.

**National Meetings**

Attending national meetings is a great opportunity to learn about the latest updates in dermatology, to meet program directors and other faculty involved in residency selection committees, and to present your own research. Two of the main dermatology meetings are the American Academy of Dermatology (AAD) annual meeting in March and the Society for Investigative Dermatology (SID) meeting in April. You can submit your research for oral and poster presentations at these meetings. Check the respective websites well in advance because the submission deadlines often precede the meetings by several months. The AAD meeting also has a session called Gross and Microscopic, which is an opportunity to give a five-minute presentation on an interesting dermatology patient case you might have seen during PCE or on your dermatology electives.

The New England Dermatological Society (NEDS) also hosts fantastic regional meetings occurring four times per year. Harvard hosts one of these meetings each year, and there are always opportunities for medical students to help write up an interesting patient case. This is a publication you can include on your CV. This and many other opportunities are communicated through the HMS Dermatology Interest Group (DIG) listserv.

**Other degrees**

Pursuing another degree is a personal decision, and everyone will have their own reasons for doing so. In your application and during your interviews, be prepared to discuss why you chose to pursue an additional degree and how you plan to use it to further the field of dermatology.

**Part IV: Assessing your Competitiveness**

**What Criteria do Programs Consider?**

Assessing your competitiveness will help determine how many and what types of programs you should apply to. Your application portfolio has many facets, several of which are immutable by the time you reach your senior year. You should realistically assess your competitiveness with your faculty advisor.

1. **Grades and your DSA**

   HMS is now using the Department Summary Assessment for 2019 and beyond (a small set of seniors will still be in the New Pathways and will not have a DSA in 2019-2021). The DSA is intended to capture a student’s professional growth over time and includes all clinical coursework in the specialty through July of the application year. It is anticipated most, but not all, students applying in dermatology will have an Honors with Distinction DSA. If your grades or USMLE scores are not as competitive, students are encouraged to develop other aspects of their application and to cultivate relationships with faculty.
2. USMLE Step Scores
Many dermatology residency programs use Step scores, especially Step 1, as a screening tool. In general, standardized tests are viewed as an objective measure of academic achievement and potential. Programs want to ensure trainees have the academic strength to finish training and successfully pass future board exams. For candidates who do not have a strong Step 1 score (>240), consider taking the Step 2 exam early enough to submit your score with your ERAS application. Earning a high score on Step 2 may boost your chances for an interview. Some programs will not rank an applicant for the Match without a passing Step 2 score.

3. Research Experience
As mentioned above, it is highly recommended for dermatology applicants to pursue research experiences related to the specialty. Most applicants pursue research projects with more than one faculty mentor. Of note, the quality of research a student has participated in is more important than the number of papers published.

4. Publications
Most dermatology applicants have 5 or more publications submitted or accepted by the time they submit their application. Most dermatology programs prioritize original research publications over case reports or review articles. First or second author publications are prioritized over middle author publications. In addition to publications, poster and oral presentations are recognized as a sign of research productivity, especially if presented at national or international meetings.

5. Extracurricular Activities
Most dermatology applicants have some volunteer experience in medical school. Volunteer experiences are viewed most favorably when the student gains leadership experience. Examples include serving as an officer in an organization or student government or developing/innovating a program.

Getting an Interview: Attributes Residency PD’s Consider in Granting Interviews
The first step in a successful match is getting interviews at your preferred programs. Letters of recommendation are a commonly cited major factor in choosing candidates for interviews. Other important attributes include clinical grades, research and volunteer activities, USMLE Step scores, the MSPE/Dean’s Letter, honors and awards, and the personal statement. Dermatology applicants should have multiple trusted advisors and peers review their personal statement, to ensure it is well written and reflects a sincere expression of their interest in dermatology.

Attributes Residency PD’s Consider in Ranking Candidates
The second step in a successful match is being ranked highly (“ranked to match”) by the programs at which you wish to match. At this step, as programs are ranking applicants for the Match, the attributes most valued are interpersonal interactions and skills- for the most part, determined from your interview day. These include interactions with faculty, staff and residents during the interview process. All components of the application remain important in the final decision-making process.
Letters of recommendation
You will need at least 3 letters of recommendation (LoR). Most HMS students will have 2-3 letters of recommendation from dermatology faculty and one letter from their medicine clerkship or sub-internship. MD/PhD students will also have a letter of recommendation from their PI. You want to choose faculty who will be strong advocates for you as an individual and who know your personal and your clinical strengths. A professor with whom you have done research, particularly if a paper has resulted, is also a good choice, since he/she can comment on your work ethic and research experience.

When choosing your writers, consider choosing:
● Faculty members who know you well
● Research mentors
● Faculty with a national reputation - this may be in research, clinical medicine, or education. It is not recommended to choose a well-known faculty member if you have not worked closely with him/her. Advocacy is more important than reputation in this setting.

If you choose a writer from outside dermatology, the writer should know you very well, be able to comment on your abilities to perform as a resident, and ideally be someone well-known to the academic dermatology community. A letter from a dermatology junior faculty member with whom you worked extensively on an advanced dermatology rotation may be a better choice than an attending from your medicine rotation with whom you worked briefly, even if the medicine attending is well-known in his/her field.

As soon as you identify the attendings you’d like to write letters for you, you should ask if they are willing to write a strong letter to support your candidacy. This may occur months before the submission deadline. Once faculty members agree, provide them with a copy of your CV and personal statement as soon as you complete them. Plan to meet with each writer in the summer to review your portfolio. Remember to give them enough time (ideally at least 1 month in advance of the deadline) to write your letter. You should send a reminder to the writers in mid-August. Remember summer vacations and other commitments may come up, and you want to be respectful of your writers’ time. You should consider writing a thank you note once the letter is on file with ERAS.

ERAS provides a letter request form you should give to your LoR authors. This form includes instructions on how to access and use the ERAS Letter of Recommendation Portal. ERAS gives you the option to waive your right to review the LoR. There is no benefit to reviewing your letters, and program directors may be concerned if an applicant does not waive this. It is strongly recommended you waive the review.

How many programs should you apply to?
The number of programs you should apply to depends on your competitiveness as a candidate, your geographic restrictions (if any), whether you are couples-matching, and other factors. Per AAMC data, ~90% of US medical graduates apply to 50 programs or more. There is some data to suggest above a certain point (as illustrated below), applying to more programs does not necessarily increase your probability of matching.
Regardless of how many programs you apply to, you want to interview at as many programs as you are able. In recent years, HMS students applying in dermatology matched into their top 5 ranked programs, with many students matching at their top programs. Remember, by ranking a program, you are agreeing to employment at that program. **Do not rank a program you do not wish to attend.** Rank the programs in your preferred order, and (this is the hardest part!) trust the NRMP will give you your best match.

**Common questions you may be asked – specialty specific**

Be prepared to discuss everything listed in your ERAS portfolio, especially anything you discuss in your personal statement. Since this is the area of your application where you have the most “voice”, it is natural for interviewers to use that as a launching pad for getting to know you. Be prepared to talk about your accomplishments and any current projects or activities outside of medicine. During an individual interview, expect you will be speaking 80% of the time.

**Interview questions fall into several categories:**

- **Career plans:**
  - Where do you see yourself in 5, 10, 15 years?
  - Do you plan to sub-specialize? If so, why and in what? If not, why not?
- **Motivation for applying to this program, and what you will add:**
  - What makes you stand out among your peers?
  - Why do you want to come to our program?
- **Unique characteristics:**
  - What are you most proud of (academic or in general)?
  - What do I need to know about you that isn’t in your application?
  - Tell me about X research project that you conducted.

- **Behavioral:**
These questions usually involve the interviewer describing a scenario and asking how you would respond in a situation. Another common format is, “Tell me about a time when you [were in a specific type of situation].”

These questions use a business interview format called STAR (Situation, Task, Action, Result). The interviewer will want to know about the situation or task in some detail, what the desired outcome of the situation or task was, what action you took or did not take, and what the results were. This type of question is intended to discern a candidate’s compatibility/personality.

To prepare for interviews, consider writing down your answers to common interview questions and practicing the answers out loud. Remember during your interviews, there is a fine line between sounding prepared and sounding too rehearsed.

Common interview errors include:

- Poor preparation, not being familiar with the program
- Inconsistent or inappropriate answers to questions
- Abrasive, condescending, evasive behavior
- Disinterest or flat affect
- Inappropriate humor
- Negative comments regarding other programs, other applicants, or the program itself

Communication with Programs: NRMP Code of Conduct for Applicants and Programs

Both candidates and programs are governed in their behavior and communication by the NRMP Code of Conduct. This is a contract you agree to by your participation in the Match. The intent of this Code is to protect applicants’ privacy and confidentiality, to prevent programs from asking illegal or coercive questions, and prevent onerous displays of intent (second interviews or visits, rotations at the program institution, demanding to know how the candidate will rank a program).

If you have one clear first choice program, talk with your specialty advisor about whether you should communicate that to the program director. While some programs want to know this information, others may not use that information in their rankings. **Do not** tell a program you are ranking them first if in fact you are not planning to do so. Program directors do talk to one another and to clerkship directors to gather information about candidates, and you do not want a reputation for dishonesty.

Advocating for Interviews

If you do not get an interview offer with a desired program, but you are placed on a waiting list, you have several options. These include waiting to hear from the program, advocating for yourself, or asking your clerkship director or specialty advisor to advocate on your behalf. We recommend having a frank discussion with your specialty advisor regarding your reasons for wanting a particular interview and your competitiveness at that program. If after discussion you want to approach the program, you may communicate with the residency program director yourself or ask your advisor to contact the program director. It is unusual to get an interview if you are not on the program’s waiting list.