Message from the President

Happy New Year! January 1, 2017 ushered in new opportunities and challenges. Last year is but a vapor. With the new year comes a change in leadership in the White House. We witnessed an election season like no other in history. As with any change in leadership, we and our practices will all experience some form of change and growth as a result of that election. Let us remain true to our practice of medicine, regardless of political view.

As President of the AOCD, I welcome you to the spring edition of DermLine. It seems but yesterday we gathered in Santa Monica for our Fall meeting. In March, we will gather in Atlanta to learn, develop fellowship and share new knowledge and ideas. I encourage all of our membership to make a special effort to join us in Atlanta. The cast of presenters is both broad and deep in knowledge and experience.

You have all honored me with your support throughout this year, and Dr. Lin, our Immediate Past President, continues to guide me through some uncharted waters as we move into the future. Please continue your invaluable support of all our AOCD leadership.

During this holiday season, I pondered my own professional and personal accomplishments and goals. I realized I had not updated my plan over the last several years, mostly because it remains grounded in my core values. Although a few of the desired outcomes of those values have changed, I determined I must become more proactive in shaping those outcomes.

I decided I will be a verb in 2017!

As humans, we declare resolutions with conviction. We begin with such steadfastness, but soon, our persistence wanes, with the ever-present pressures of life. I believe that is why so many New Year’s resolutions come and go before the end of winter (or even before January 31!). Our goals are descriptive of what we want, and perhaps not what we need to accomplish what we want. Our goals are but nouns and adjectives to describe success, health, happiness or anything else upon which we set our sights.

Conversely, “being” requires conscious choice. Being a verb communicates a commitment to action. Assuming the role of a verb means honoring whom we want to be. Try “being a verb” in this wonderful new year!

Let’s keep the AOCD strong as a provider of service and support to dermatologists who chose the path of osteopathy. As you read this edition of DermLine, think about how we can keep the vision and legacy of DO dermatology alive and well. Keep the main thing the main thing. Let me know the verb you choose.

See you in Atlanta!

Alpesh Desai, DO
President, American Osteopathic College of Dermatology
Hello Everyone,

Here’s to a Happy and Healthy 2017!

The new year will hopefully open up new opportunities for our members to obtain CME. We applied to receive Category 1B CME for reading the JAOCD. A decision from the AOA arrived in February, and the AOCD was approved to offer this credit. Quizzes that can be taken for CME credit are now offered on our website www.aocd.org. We also plan to begin offering online category 1A CME.

The AOCD staff has been working to obtain ACCME accreditation in order to provide AMA credit for our CME meetings. The application has been submitted and we learned recently that we are scheduled for our initial interview in March of 2017. By August 1, 2017 we will have an official determination from the ACCME on whether the AOCD qualifies to provide AMA credit. Wish us luck!!!

We hope you will make plans to attend our Spring 2017 meeting in Atlanta, GA March 29 – April 1, 2017. The meeting will take place at the Ritz Carlton in Atlanta on Peachtree St. More information on the meeting can be found on our web site and in our weekly Thursday Bulletin email blasts.

The AOCD was recently notified that six of our residency programs have achieved Initial Accreditation with ACGME. They include:

1. Botsford Hospital Program, Annette LaCasse, D.O., Program Director
2. Alta Dermatology, Stephen Kessler, D.O., Program Director
3. Largo Medical Center, Richard Miller, D.O., Program Director
4. Lehigh Valley Health Network, Stephen Purcell, D.O., Program Director
5. Oakwood Southshore Hospital, Steven Grekin, D.O., Program Director

The application process for ACGME is intense and we congratulate these six programs for their hard work in obtaining Initial Accreditation.

In January, the AOA held their annual Advocacy for Healthy Partnerships meeting. This session is attended by executives from the state associations and AOA specialty colleges. Guest speakers included Lt. General Russel L. Honoré, USA (Ret.), whose topic was “Resilient Leadership: Prepare Today to Prevail Tomorrow”. LTG Honoré served as commander of Joint Task Force Katrina, and is best known for his slogan “You’re Stuck on STUPID”.

Captain Mark Kelly an American astronaut, U.S. Navy Captain and an experienced naval aviator who flew combat missions during the Gulf War also spoke to the attendees. His topic was “Endeavor to Succeed” and as Vice President of the Society of Osteopathic Specialty Executives, I had the honor of introducing Captain Kelly to the group. He spoke of his life’s experiences and moving out of one’s comfort zone when it comes to dealing with some of these experiences. Captain Kelly is married to Gabrielle Giffords, the former US Representative from Arizona who survived an attempt on her life in 2011. Captain Kelly has also authored several children’s books and did not mind having his picture taken with a couple of Flat Stanleys (and me). 😊
The AOA also held an Executive Director workshop. During this workshop, the executives discussed and provided ideas and comments regarding the Affiliation Re-Alignment that the AOA is working towards now. The focus was on five key areas of Education, the Future of the Profession, Membership, Communications, and Affiliate Relations. Five flipcharts were filled with ideas, concerns, and comments by the attendees. The items were then compiled into a document and is being shared with AOA leadership. A task force will be appointed by the AOA and affiliate relationships and re-alignment will continue to be a focus for the AOA in the coming months. I look forward to sharing this information with our membership as it becomes available.

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Save The Dates!!
The 2017 Fall Meeting will take place from October 24-28, 2017 at the Intercontinental, New Orleans, 444 St. Charles Ave., New Orleans, LA 70130

The 2018 Spring Meeting will take place from March 19-25, 2018 at the Hilton West Palm Beach, 600 Okeechobee Blvd., West Palm Beach, FL 33401

The 2018 Fall Meeting will take place from October 9-13, 2018 at the Westin San Diego, Gaslamp Quarter, 400 West Broadway, San Diego, CA 92101

The Foundation for Osteopathic Dermatology is accepting applications for research grants. For more information visit the Foundation page at https://aocd.site-ym.com/?page=Foundation

Please call or email the AOCD office at dermatology@aocd.org if you need assistance.

Should you have questions pertaining to Board Certification, recertification, or Osteopathic Continuous Certification (OCC), please refer to www.aobd.org. You may also contact Libby Strong with the AOA/AOBD at 312-202-8112.
Corporate Sponsors Support 2017 AOCD Spring Meeting in Atlanta, GA

Corporate Sponsors:
- Galderma, Pfizer, Valeant Pharmaceuticals (Diamond Level)
- Lilly USA, LLC (Platinum Level)
- AbbVie (Gold Level)
- Allergan, DLCS (Bronze Level)
- Aclaris Therapeutics, DermPath Diagnostics (Pearl Level)

• Saturday, April 1, 2017 from 7am – 8am, sponsored by Valeant. *Contemporary Insights into the Treatment of Female Acne* will be presented by Dr. James Del Rosso.
• Saturday, April 1, 2017 from 1230pm – 130pm, sponsored by Pfizer. *Introducing a New Nonsteroidal Topical Prescription Treatment Option for Mild-to-Moderate Atopic Dermatitis* will be presented by Dr. G. Scott Drew. *(Lunch will be served)*

Please attend these product theaters to gather more knowledge about new therapies in dermatology. More information will be coming closer to meeting time.

Exhibitors for the 2017 Spring Meeting were as follows: 3Gen, Inc., Aclaris Therapeutics, Advanced Dermatology, Anne Arundel Dermatology, Aurora Diagnostics, Bayer, Celgene, DermPath Diagnostics, DermPath Lab Central States, D-Path Dermatopathology, DermTech, Encore Dermatology, Galderma, Heartland Payment Systems, Hill Dermaceuticals, Inc., Leo Pharma, Medimetriks Pharmaceuticals, Inc., Pfizer, ProPath, Sagis, Strata Skin Sciences, Valeant Pharmaceuticals. There are still exhibitor forms coming in. We are hoping for 30 exhibitors.

We hope that many of you have an opportunity to express your appreciation to our sponsors and exhibitors at the Atlanta Meeting. The fact that they continue to support the College, many of them doing so for several years, speaks volumes about the value of their commitment to our organization.

For the past several years, Dermatopathology Labs of Central States (DLCS) sponsored our meeting t-shirts and bags. We appreciate the continued support from Christine Anthony and DLCS.

Sagis sponsored our meeting lanyards. Sagis is a new exhibitor for the Atlanta Meeting. Sagis is also sponsoring a DermPath bowl for the residents. We look forward to working with Sagis in the future.

The AOCD has several product theaters scheduled for this meeting.
- Thursday, March 30th from 6:30am – 7:30am, sponsored by Lilly USA, LLC. *Clinical Insights on Talatz* will be presented by Dr. Eugene Conte. *(Breakfast will be served)*
- Friday, March 31, 2017 from 11:30am – 12:30pm, sponsored by AbbVie. This product theater will be given by Dr. Alpesh Desai on Hibradenitis Suppurativa. *(Lunch will be served)*

**Conversations of a Dermatology Resident**

By Laura Jordan, DO

Now we are getting into the groove! Concepts are gelling more and more. Not to say that we all don’t have those, “I can’t believe I still don’t know this” moments, but perhaps they are occurring at less frequent intervals? Yet just as we begin to grow more comfortable in our new roles as dermatology residents, residency throws another hurdle at us…the ITE!

Yes, of course, we knew this day would come and were in fact warned by co-residents early on. However, who knew that 7 short months would fly by, and the test would be just around the corner? Time to solidify what knowledge we’ve acquired at this point without losing new knowledge (or our sanity) in the process. The good news is…we will have our shot at the ITE each year before we graduate—our scores can only improve (hopefully 😊).

On the brighter side, one HUGE stressor has been alleviated for us this year…we don’t have to worry about the match! I will allow a brief moment of silence for this grand event.

Remember counting down the days, repeatedly checking your email (refresh, refresh, refresh)? Fortunately, this year on February 6 we may find ourselves in a variety of places: perhaps rotating in our derm clinic, on an elective rotation in derm surg, or taking a PTO day and vacationing in Hawaii…one place you won’t find us is staring with wide bloodshot eyes at our computer screens clicking refresh as if our lives depended on it (which they did) and our queasy nerves quaking throughout our bodies.

Another moment of silence or happy dance if you prefer.

Oddly, we are now finding ourselves as the resident mentors we once sought out who somehow calmly advised us to relax and not to worry about the match (as if!). But it’s true. At this point last year our lives had led up to matching. We worked hard to be where we are today and continue to do so as residents. Though it still feels a tad surreal that we are in derm residency, a new crop of dermies are arriving this summer, and we need to be strong and confident for them 😊.
JUBLIA® (efinaconazole) Topical Solution 10%

SMASH ONYCHOMYCOSIS*
AT THE SITE OF INFECTION

*For the treatment of onychomycosis of the toenail(s) due to Trichophyton rubrum and Trichophyton mentagrophytes.

JUBLIA allows some patients to have clearer toenails grow back. Individual results may vary.

INDICATION
JUBLIA (efinaconazole) topical solution, 10% is indicated for the topical treatment of onychomycosis (tinea unguium) of the toenail(s) due to Trichophyton rubrum and Trichophyton mentagrophytes.

IMPORTANT SAFETY INFORMATION
- JUBLIA is for topical use only and is not for oral, ophthalmic, or intravaginal use.
- Patients should be instructed to contact their health care professional if a reaction suggesting sensitivity or severe irritation occurs.
- The most common adverse reactions (incidence >1%) were (vs vehicle): ingrown toenail (2.3% vs 0.7%), application-site dermatitis (2.2% vs 0.2%), application-site vesicles (1.6% vs 0%), and application-site pain (1.1% vs 0.2%).
- JUBLIA should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus, and should be used with caution in nursing women. The safety and effectiveness in pediatric patients have not been established.

Please see Brief Summary of full Prescribing Information on the adjacent page.
Reference: 1. JUBLIA (prescribing information). Bridgewater, N.J: Valeant Pharmaceuticals North America LLC.

Jublia is a trademark of Valeant Pharmaceuticals International, Inc. or its affiliates.
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BRIEF SUMMARY OF PRESCRIBING INFORMATION
This Brief Summary does not include all the information needed to use JUBLIA safely and effectively. See full prescribing information for JUBLIA.

JUBLIA® (efinaconazole) topical solution, 10%
For topical use
Initial U.S. Approval: 2014

INDICATIONS AND USAGE
JUBLIA (efinaconazole) topical solution, 10% is an azole antifungal indicated for the topical treatment of onychomycosis of the toenail(s) due to Trichophyton rubrum and Trichophyton mentagrophytes.

DOSEAGE AND ADMINISTRATION
Apply JUBLIA to affected toenails once daily for 48 weeks, using the integrated flow-through brush applicator. When applying JUBLIA, ensure the toenail, the toenail folds, toenail bed, hyponychium, and the undersurface of the toenail plate, are completely covered.
JUBLIA is for topical use only and not for oral, ophthalmic, or intravaginal use.

CONTRAINDICATIONS
None.

ADVERSE REACTIONS
Clinical Trials Experience
Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in practice.
In two clinical trials, 1227 subjects were treated with JUBLIA, 1161 for at least 24 weeks and 760 for 48 weeks. Adverse reactions reported within 48 weeks of treatment and in at least 1% of subjects treated with JUBLIA and those reported in subjects treated with vehicle in the presented study are presented in Table 1.

Table 1: Adverse Reactions Reported by at Least 1% of Subjects Treated for up to 48 Weeks

<table>
<thead>
<tr>
<th>Adverse Event, n (%)</th>
<th>JUBLIA N = 1227</th>
<th>Vehicle N = 413</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ingrown toenail</td>
<td>28 (2.3%)</td>
<td>3 (0.7%)</td>
</tr>
<tr>
<td>Application site dermatitis</td>
<td>27 (2.2%)</td>
<td>1 (0.2%)</td>
</tr>
<tr>
<td>Application site vesicles</td>
<td>20 (1.6%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Application site pain</td>
<td>13 (1.1%)</td>
<td>1 (0.2%)</td>
</tr>
</tbody>
</table>

DRUG INTERACTIONS
In vitro studies have shown that JUBLIA, at therapeutic concentrations, neither inhibits nor induces cytochrome P450 (CYP450) enzymes.

USE IN SPECIFIC POPULATIONS
Pregnancy
Pregnancy Category C
There are no adequate and well-controlled studies with JUBLIA in pregnant women. JUBLIA should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.
Systemic embryofetal development studies were conducted in rats and rabbits. Subcutaneous doses of 2, 10 and 50 mg/kg/day efinaconazole were administered during the period of organogenesis (gestational days 6-16) to pregnant female rats. In the presence of maternal toxicity, embryofetal toxicity (increased embryofetal deaths, decreased number of live fetuses, and placental effects) was noted at 50 mg/kg/day [559 times the Maximum Recommended Human Dose (MRHD) based on Area Under the Curve (AUC) comparisons]. No embryofetal toxicity was noted at 10 mg/kg/day (112 times the MRHD based on AUC comparisons). No malformations were observed at 50 mg/kg/day (559 times the MRHD based on AUC comparisons).

Subcutaneous doses of 1, 5, and 10 mg/kg/day efinaconazole were administered during the period of organogenesis (gestational days 6-19) to pregnant female rabbits. In the presence of maternal toxicity, there was no embryofetal toxicity or malformations at 10 mg/kg/day (154 times the MRHD based on AUC comparisons).
In a pre- and postnatal development study in rats, subcutaneous doses of 1, 2, and 25 mg/kg/day efinaconazole were administered from the beginning of organogenesis (gestational day 6) through the end of lactation (lactation day 26). In the presence of maternal toxicity, embryofetal toxicity (increased postnatal pup mortality, reduced live litter sizes and increased postnatal pup mortality) was noted at 25 mg/kg/day. No embryofetal toxicity was noted at 5 mg/kg/day (17 times the MRHD based on AUC comparisons). No effects on postnatal development were noted at 25 mg/kg/day (89 times the MRHD based on AUC comparisons).

Nursing Mothers
It is not known whether efinaconazole is excreted in human milk. After repeated subcutaneous administration, efinaconazole was detected in milk of nursing rats. Because many drugs are excreted in human milk, caution should be exercised when JUBLIA is administered to nursing women.

Pediatric Use
Safety and effectiveness of JUBLIA in pediatric subjects have not been established.

Geriatric Use
Of the total number of subjects in clinical trials of JUBLIA, 11.3% were 65 and over, while none were 75 and over. No overall differences in safety and effectiveness were observed between these subjects and younger subjects, and other reported clinical experience has not identified differences in responses between the elderly and the younger subjects, but greater sensitivity of some older individuals cannot be ruled out.

NONCLINICAL TOXICOLOGY
Carcinogenesis, Mutagenesis, Impairment of Fertility
A 2-year dermal carcinogenicity study in mice was conducted with daily topical administration of 3%, 10% and 30% efinaconazole solution. Severe irritation was noted at the treatment site in all dose groups, which was attributed to the vehicle and confounded the interpretation of skin effects by efinaconazole. The high dose group was terminated at week 34 due to severe skin reactions. No drug-related neoplasms were noted at doses up to 10% efinaconazole solution (248 times the MRHD based on AUC comparisons).
Efinaconazole revealed no evidence of mutagenic or clastogenic potential based on the results of two in vitro genotoxicity tests (Ames assay and Chinese hamster lung cell chromosome aberration assay) and one in vivo genotoxicity test (mouse peripheral reticulocyte micronucleus assay).
No effects on fertility were observed in male and female rats that were administered subcutaneous doses up to 25 mg/kg/day efinaconazole (279 times the MRHD based on AUC comparisons) prior to and during early pregnancy. Efinaconazole delayed the estrous cycle in females at 25 mg/kg/day but not at 5 mg/kg/day (56 times the MRHD based on AUC comparisons).

PATIENT COUNSELING INFORMATION
See FDA-Approved Patient Labeling (Patient Information).

Valeant Pharmaceuticals North America LLC
Manufactured for: Valeant Pharmaceuticals North America LLC, Bridgewater, NJ 08807 USA
Manufactured by: Valeant Pharmaceuticals International, Inc., Laval, Quebec H7L 4A8, Canada

JUBLIA is a trademark of Valeant Pharmaceuticals International, Inc. or its affiliates.
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U.S. Patents 8,039,494; 7,214,506
Based on 9462903 JUBLIA.0130.USA.16 Issued: 09/2016
Dear Colleagues,

Happy New Year! Time to be out with the old and in with the new! This will be my last column as your resident liaison. Stay tuned for the announcement of your new AOCD resident liaison coming to your email soon. I have said it before and I’ll say it again, residency is such a special time of our lives. Please remember to live in the moment and make it great!

2017 AOCD Spring Meeting, held at the Ritz-Carlton in Atlanta, GA 3/29/2017 to 4/1/2017

Ritz Carlton Downtown
181 Peachtree Street NE
Atlanta, Georgia 30303

- Residency Program 15 minute Presentations will take place March 29-31, 2017 in the Plaza Ballroom.

• These lectures should be designed to review board relevant material and the newest literature on your topic.
• Please refer to your email from John Grogan regarding your presentation date, time, and topic.
• The meeting lecture schedules can be found on the AOCD.org website

The Match
• Thank you to all the programs who sent me your chief resident’s name and program interview dates.
• We all look forward to meeting our next generation of young osteopathic dermatologists in training!

ACGME Accreditation
• One way we can all preserve our osteopathic distinction is by applying for Osteopathic Focus. It is important to remember this as we all move towards ACGME accreditation. I strongly encourage all to do this. For those of us currently working on our application, our ACGME ADS support contact is Kevin Bannon. webads@acgme.org. 312-755-7111.

JAOCDFull Call For Papers

We are now accepting manuscripts for publication in the upcoming issue of the JAOC. ‘Information for Authors’ is available on our website at www.aocd.org/jaocd. Any questions may be addressed to the editor at journalaocd@gmail.com. Member and resident member contributions are welcome. Keep in mind, the key to having a successful journal to represent our College is in the hands of each and every member and resident member of our College. Let’s make it great!

- Karthik Krishnamurthy, D.O., FAOCD, Editor
Now Approved!

Learn more at our booth

Visit www.EucrisaHCP.com for more information
Hello everyone, I hope 2017 has been off to a great start for each of you. It’s hard to believe it is already March and the 2017 AOCD Spring Meeting is just around the corner.

2017 Resident Membership Renewal
With the 2017 membership year well underway, please take a moment to renew your annual dues, if you haven’t already. Please note that maintaining a membership in good standing with the AOCD throughout your residency training is a requirement. Your dues can be paid online through your member account at www.aocd.org. You can quickly and conveniently renew your membership online using these five easy steps:

1. To get started, click sign in at the top of the homepage.
2. Enter your username and password, and click sign in. [Note: If this is your first time signing in, you will be taken to a screen prompting you to verify your member profile options. Make any desired changes, click the Save Settings button, and proceed to Step 3.]
3. Click the yellow *** Renew Your Membership Now *** banner.
4. You will be prompted to update your contact information. If you have any changes, enter updated information in the appropriate field. When finished, click the Save Changes button.
5. Enter your billing and payment information, and click the Submit Securely button. If you have any problems logging in, please contact us and we will help you.

2017 AOCD Spring Meeting
As I’m sure you’re already aware from previous communications from the AOCD, we are introducing a new conference format this year with multiple pathways. A resident pathway has been added to the conference, with resident lectures and other programming geared to residents. Residents are required to attend all didactics scheduled for the resident pathway, including residency program presentations and a special dermatopathology lecture with Dr. David Barron. If no lectures are scheduled at a given time in the resident pathway, residents are expected to attend lectures scheduled in the primary pathway. Please visit the 2017 AOCD Spring Meeting page of our website to view the schedule. All resident pathway activities will be held in the Plaza Ballroom on the second floor of the Ritz-Carlton Atlanta, and all primary pathway lectures will be held in Salon I/II on the lower level of the hotel.

James Bernard Leadership Award
With a July 1 deadline, it’s a great time to begin thinking about nominations for the James Bernard, D.O., FAOCD, AOCD Residency Leadership Award.

The award offers third-year residents a future position on an AOCD committee. Among those committees with availability are the following: Ethics, Awards, In-Training Examination, Journal, CME, and Editorial/Public Relations.

Third-year residents must be nominated by their program directors, and the nomination criteria are as follows:

• Integrity—Maintains the highest personal standards of honesty, fairness, consistency, and trust
• Respect—Displays a professional persona and is open-minded and courteous to others
• Empowerment—Provides knowledge, skills, authority, and encouragement to fellow physicians and staff
• Initiative—Takes prompt action to avoid or resolve problems and conflicts
• Be a member in good standing of both the AOCD and AOA.

Applications will be reviewed by the Awards Committee, which will forward its recommendations to the national office. Winners will be notified by mail. All correspondence concerning the program and/or awarded grants should be directed to the Awards Committee. Winners of the award will be recognized at the 2018 Spring Meeting.

AOCD Resident Research Paper Competition
I also want to remind everyone that the entry deadline for AOCD Resident Research Paper Competition will be June 30. Annual awards are presented to recognize the osteopathic dermatology residents’ papers which are judged as the best in this competition. All papers submitted will be reviewed by the AOCD Resident Research Paper Competition Committee. Papers will be judged for originality, degree of scientific contribution and thoughtfulness of presentation.

Requirements for competition:

• The resident must be in an approved AOA/AOCD dermatology training program.
• Complete the linked cover sheet.
• Submit six (6) copies of the paper to be judged.
• Only one paper per year may be submitted.
• The paper must be written and submitted while the resident is in training.
• The paper must be typed and suitable for publication.
• Authors’ names are not to be included on the paper itself; only include the title on the paper. Names of the authors are to be placed on the cover sheet only.
• Papers submitted for the competition do not automatically become part of your annual training reports. If it is to be used as your annual paper, it must also be submitted to the AOCD National Office with your annual reports.
• Do not ship or mail the papers in a manner that requires a signature for delivery.
• Failure to follow the competition requirements will result in disqualification.

Submissions should be addressed as follows:

Dr. Gene Conte
271 Thoroughbred Drive
Prescott, AZ 86301
For eczema-prone skin

TWO ADVANCED TECHNOLOGIES.

HYDRATE

ONE REPLENISHING REGIMEN.

Cetaphil® RestoraDerm® products are the first and only regimen with advanced ceramide and Filaggrin technology™

To help restore the skin barrier in dry, eczema-prone skin, recommend the Cetaphil® RestoraDerm® regimen.¹
Once again, the deadline for submission is June 30. Winners will be announced at the 2018 AOCD Spring Meeting.

Incoming Residents for 2017-2018
I would like to introduce the new residents joining our programs for the 2017-2018 year. The AOCD will welcome new 49 residents on July 1. The incoming residents (listed with their programs) are as follows:

CORE/O’Bleness Memorial Hospital
- Katie Wang, DO
- Jamie Nuckolls, DO

KCU-GMEC/Dermatology Residency of Orlando
- Nathan Bibliowicz, DO
- Asmi Sanghvi, DO
- Jennifer Seyffert, DO

LECOMT/Larkin Community Hospital
- Raymond Kleinfelder, DO
- Danielle Lazzara, DO
- May Sheikh, DO

LECOMT/St. John’s Episcopal Hospital
- Theresa Durocher, DO
- Camille Howard-Verovic, DO
- Sergey Petrov, DO

LECOMT/University Hospitals Regional Hospital
- Alexa Leone, DO
- Emily Boes, DO

MWU/OPTI/Advanced Desert Dermatology
- Matthew Crosby, DO

MWU/OPTI/Affiliated Dermatology
- Andrew Newman, DO
- Mitchell Manway, DO
- Brad Hammon, DO

NSUCOM/Broward Health Medical Center
- Roxanna Arakozie, DO
- Brandon Basehore, DO
- Brooke Wehausen, DO

NSUCOM/Largo Medical Center
- Katherine Braunlich, DO
- Erin Lowe, DO
- John Moesch, DO

NSUCOM/Larkin Community Hospital
- Lauren Dozier, DO
- Jacqueline Habashy, DO
- Sarah Hocker, DO
- Blake Sanders, DO

NYCOMEC/Palisades Medical Center
- John Hassani, DO
- Nicole Ruth, DO

NYCOMEC/St. Barnabas Hospital
- Moijgan Hosseinpour, DO

OMNEE/LewisGale Hospital – Montgomery
- Jordan Cook, DO
- Craig Garofola, DO

OMNEE/Park Avenue Dermatology
- Courtney Bernt, DO
- Logan Kolb, DO
- Shawn Schmieder, DO

OMNEE/Sampson Regional Medical Center
- Falon Brown, DO
- Dahia Saleh, DO

OPTI-West/Chino Valley Medical Center
- Shah Shareef, DO

OPTI-West/Silver Falls Dermatology
- Allison Melkonian, DO
- Kevin Myers, DO

PCOM/Lehigh Valley Health Network
- Naela Gupta, DO
- Megan Jones, DO

PCOM/North Fulton Hospital Medical Campus
- Victoria Comeau, DO

SCS/MSUCOM/Botsford Hospital
- Lauren Law, DO

SCS/MSUCOM/Oakwood Healthcare System
- Gary Treyger, DO
- Austin Longberg, DO

SCS/MSUCOM/St. Joseph Mercy Health System
- Molly Buckland, DO
- Ashley Jaglowicz, DO
- Stacy Reichel, DO
- Nina Sabzevari, DO

Still OPTI/Northeast Regional Medical Center
- Morgan Arnold, DO

Texas OPTI/Bay Area Corpus Christi Medical Center
- Soham Chaudhari, DO
- Adeline Kikam, DO

Documentation Needed for New Residents
New residents beginning training in July 2017 should submit all of their application materials to the national office. Dues should be paid at this time, if payment has not been made this year. Those who have already paid student dues for the current year will owe a balance of $25 when they begin training in their residency program. If you are uncertain if you have paid this year, please feel free to contact me.

All residents are asked to provide the following documents:
- A copy of your medical school diploma (and exact date of graduation)
- A copy of your internship diploma (exact dates of attendance and name and address of hospital or institution)
- A copy of your state license
- 2 passport size photos
- A current CV

I look forward to seeing each of you in Atlanta at the 2017 Spring Meeting!

HELP WANTED
An exceptional Dermatology opportunity in the east valley of Phoenix awaits. This position is minutes away from Phoenix-Mesa Gateway and close to Sky Harbor International airports. Many outdoor activities including golf, camping, hiking, biking, are near. World class shopping, dining, and both college and professional sports teams are available. Outstanding educational opportunities are in the area with both public and private schools. Sunshine is year round!

THE PRACTICE:
- New Dermatology practice with amazing growth potential
- Medical, surgical, and cosmetic dermatology available
- Mohs surgery in house
- Hassle free EMR with MAs trained as scribes
- 1-year base salary plus bonus and incentives
- Sign-on bonus/moving expenses available

For more details send contact information to: hwdermatology@gmail.com
HERE IS WHAT YOUR COLLEAGUES ARE SAYING ABOUT HEARTLAND PAYMENT SYSTEMS...

“The American Osteopathic College of Dermatology has been using Heartland Payment Systems for credit card processing since October 2014. The switch to Heartland was seamless, and the system is very user friendly, secure, and loaded with features our old system did not offer. Tony Silber, the National Relationship Manager for the AOCD has been available 24/7 to answer our questions. The AOCD is extremely happy with the service provided by Tony Silber and Heartland Payment Systems.”

Marsha Wise, Executive Director, AOCD

“We have had the pleasure of working with Tony Silber since October 2014. In that time, Tony has been immediately responsive and proactive. Heartland has proven to be a good choice for credit card processing. We have saved significant money by using Heartland and their system has functioned smoothly and as advertised.”

Dr. Reagan Anderson, Owner
Jeff Anderson, Practice Administrator
Colorado Dermatology Inst – Colorado Springs, CO

“Heartland has been transparent in all processes and has saved us more money than we thought. I appreciate Tony for his responsiveness to any questions or concerns. Our business has benefited greatly from the transition to Heartland and I wish I had done it sooner!”

Dr. Brian Matthyss, Owner
Sunflower Dermatology – Riverside, MO

“Switching to Heartland was very easy. Tony handled everything for us and helped make the transition seamless. Our fees have been reduced substantially and now we can process all credit cards, including American Express. We will save close to $6,000 this year in credit card fees thanks to Tony and Heartland. ”

Lisa Zabel, Practice Administrator
Center for Dermatology – Lakeville, MN

“Every week or two a patient or family member calls our office with the promise of saving us thousands of dollars on credit card processing. Over the years I have switched but never have I seen any reduction in my total processing costs or any savings whatsoever! After my last unexpected increase, I noticed the AOCD recommendation and I called Tony. After 6 months with Heartland I have documented significantly lower rates, the absence of several fees I had been paying for years and friendly customer service. Tony was available throughout the transition and he checks in on us often. I am grateful to the AOCD for providing this lead. I wish I had met Tony many years ago.”

Kevin Adelstein, Practice Administrator
Advanced Dermatology – Twinsburg, OH

Tony Silber, National AOCD Relationship Manager
Phone: 248.396.3347 • Fax: 248.562.7293
Email: Tony.silber@e-hps.com
Join Us For Upcoming AOCD Events

**2017 Fall Meeting**
Intercontinental | New Orleans | October 25-28

**2018 Spring Meeting**
Hilton | West Palm Beach | March 21-24

**2018 Fall Meeting**
Westin | San Diego | October 9-13