Residents Receive Research Award
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Midyear Meeting
March 28-31, 2007
see pages 4 & 5
Midyear Meeting 2007
Santa Fe, NM
March 28-31
check www.AOCD.org for the latest updates

Regional Representation: Is it Time?

Regional representation is an option that has been considered from time to time. The following opinions represent the pros and cons of instituting regional repre-
se n t a t i o n for the AOCD.

As President of the AOCD, I would like to speak in favor of having the AOCD Executive Committee create four regions to equally represent all of the AOCD Fellows.

In the past, we have elected whomever we wanted to run for a Trustee position. That individual could have been from anywhere in the U.S. Sometimes elections seemed swayed by the location of the annual meeting and who attended. However with time, political alliances formed whether we wanted them or not.

What I am suggesting is that the AOCD be divided into four regions, with each region electing a Trustee to represen t the members of that region. The DO Fellows of each region could discuss who they would like to have represent them as a Trustee from that area. Thus areas, which in the past may have been underrepresented, would be assured of representation.

I realize that we hope each person who has been, and will be, elected as a Trustee will always represent all D.O. dermatologists equally. But regional representation would ensure more equal representation for all members. It is time we consider a more democratic regional representa tion for the AOCD, just as the AOA has done. I propose that the AOCD establish equality for all members by regional representation and election of Trustees, our future leaders.

First, let me say that I have the utmost respect for Dr. Way and his opinion regarding all AOCD matters. While I fully understand the concept of having representation from all regions of the country on the AOCD Executive Committee, it would be a mistake to make this a mandatory requirement for the following reasons.

Making regional representation a requirement regarding who will be allowed to serve on our Executive Committee would create unnecessary limitations and pressures on the committee. It is daunting enough to find qualified Executive Committee members who have the best interest of the AOCD membership in mind without adding an additional regional barrier.

Forcing geographic representation would be making an issue of a non-issue. Having a disproportionate number of Executive Committee members from a particular geographic region has never been, nor will ever be, a disservice to prac tic ing AOCD members in another region. My suggestion is that we keep our requirements as broad as possible and allow our leaders and membership to choose the best possible candidates for any AOCD position, regardless of age, sex, sexual orientation, race, color, religion, or GPS coordinates.

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Jay Gottlieb, D.O., FAOCD, AOCD President Elect

Where do you stand when it comes to regional representation? Email your opinion to Ruth Carol, editor, at RuthCarol1@aol.com or fax them to 847-673-3156 and we’ll print it in the next issue of the AOCD Newsletter.
Midyear Meeting Features First Live Patient Workshop

Plus humorist keynote speaker, 20-plus resident speakers, more than a dozen guest speakers

This year’s Midyear Meeting, which will be held March 28-31 in Santa Fe, will feature the first ever live patient workshop for Botox® and fillers. Michael Contreras, M.D., from the University of New Mexico Health Sciences Center in Albuquerque will moderate the workshop. Physicians and their spouses will serve as volunteer patients.

The workshop is scheduled to be held Friday afternoon.

KEYNOTE SPEAKER

Psychologist and humorist Bruce Christopher will be the keynote speaker at the welcome reception on Wednesday evening. He will address “Why are Women So Strange and Men So Weird?” On Thursday morning he will discuss “Bambi vs. Godzilla: Dealing with Difficult People.”

Known for his outrageously funny and dynamic delivery of today’s hot topics, Christopher has spoken to standing room only crowds at national conventions, corporate conferences, and sales meetings including the Million Dollar Round Table Conference, the Royal College of Surgeons in London, and the Mayo Clinic. This clinical psychologist who holds degrees in both Professional Psychology and Interpersonal Communication has been called “America’s foremost enter—trainer today” by the American Heart Association.

RESIDENT SPEAKERS

Resident speakers are slated to speak on Wednesday (between 1 and 5 p.m.). The speakers, including their program and year, and their topics are as follows:

- Will Kirby, D.O.
  COMP/Pomona, 3rd Year
  Inflammatory Lupus Erythematosus Epidermal Nevus
  ILVEN: A Case Report and Review of the Literature

- Tejas Desai, D.O.
  COMP/Pomona, 3rd Year
  Derm Surgical Emergencies

- James Briley, D.O.
  St. John’s Episcopal, 2nd Year
  Waardenburg Syndrome: A Case Presentation

- Nanda Channiah, D.O.
  NSUCOM/Sun Coast, 3rd Year
  Disease Manifestations in Pigmented Skin

- Dwayne Monte, D.O.
  Columbia Hospital, 3rd Year
  Pemphigus Vulgaris

- Ben Adams, D.O.
  ATSU/Kirksville, 3rd Year
  TBA

- Andrea Costanza, D.O.
  NSUCOM/Sun Coast, 3rd Year
  Botanicals & Allergic Contact Dermatitis

- Anita Osmundson, D.O.
  Frankford Hospital, 2nd Year
  Cutaneous B Cell Lymphoma Presenting as Pseudocysts of the Auricle

- Derrick Elias, D.O.
  NSUCOM/N Broward Hospital, 3rd Year
  Dyskeratosis Congenita

- Basu Iffie, D.O.
  ATSU/Texas, 1st Year
  Follicular Degeneration Syndrome

- Lela Lankerani, D.O.
  Frankford Hospital, 1st Year
  Atypical Mycobacteria after Full Thickness Skin Graft

- Elaine Miller, D.O.
  ATSU/Texas, 1st Year
  Grenz Ray Therapy for Dermatologic Diseases

- Angela Lee, D.O.
  Frankford Hospital, 1st Year
  Nail Dystrophy Secondary to Docetaxel

- Andrew Racette, D.O.
  COMP/Phoenix Area, 2nd Year
  Coccidioidomycosis Infections and TNF-Alpha Inhibitors

- Andrea Passalaqua, D.O.
  COMP/Pomona, 2nd Year
  Cutaneous Sarcoidosis

- Michael Holsinger, D.O.
  O’Bleness Memorial, 3rd Year
  Waardenburg Syndrome: A Case Presentation

- Tracy Favreau, D.O.
  NSUCOM/N Broward Hospital, 3rd Year
  Paraphysa Cutanea Tarda

- Alice Do, D.O.
  Genesys Regional Medical Center, 1st Year
  Biologics for Psoriasis

- Kevin Belasco, D.O.
  NSUCOM/Sun Coast, 2nd Year
  Incontinentia Pigmenti: A Case Report and Review

- John Minni, D.O.
  Columbia Hospital, 2nd Year
  Cutaneous Metaplastic Synovial Cyst

- Terry Barrett, M.D.
  Dysplastic Nevus or Not?

- Christopher Sartori, M.D.
  Herpes Update 2007

EVENING EVENTS

Among the events planned is a reception to be held at the Georgia O’Keeffe Museum on Thursday evening. The museum, which displays drawings, paintings, pastels, sculptures, and watercolors that O’Keeffe produced between 1916 and 1980, will also serve as the backdrop for the President’s Reception and Dinner on Friday night.

Dear Fellows, Residents and Sponsors of the AOCD,

Your College and I have strived to make this Midyear Scientific Meeting in beautiful Santa Fe, New Mexico, an outstanding educational, personal, and social event. We hope you will join all the members of your Executive Committee from March 28-31st to experience it first-hand. Please peruse the program for the great lectures in store for us. There are also several firsts for this Midyear meeting. We have a tremendous keynote speaker, Bruce Christopher, who is a world renown psychologist. His two entertaining and informative lectures will change the way we look at ourselves and others. We also have a live patient cosmetic workshop on Botox® and fillers to enhance the way we treat our cosmetic patients.

This year we also have a sell out number of technical exhibitors for us to visit with and find out what’s new.

Finally, we have scheduled social events for us to enjoy including a welcome reception with our keynote speaker, a cocktail reception at the Georgia O’Keeffe Museum (with docents to enhance our appreciation of the artwork) and the President’s Reception and Dinner.

I look forward to seeing you at the meeting.

Sincerely yours,

Marc I. Epstein D.O., Your 2nd Vice-President
Executive Director’s Report
by Becky Mansfield, Executive Director

As we begin a new year I want to say “thank you” to the Executive Committee and our membership for the support you have given our family during the past year as we struggled with our oldest daughter’s battle with cancer. Patricia was diagnosed in April, 2006 and died January 5, 2007. She is survived by her husband, Larry, and sons, Andrew (8) and Aaron (5), who live in Dayton, Ohio. Your expressions of sympathy have been overwhelming and very comforting. A special thank you goes to Marshia Wise for taking on additional responsibilities in the office while we were gone.

A report of activities in the national office since the fall newsletter is summarized below.

Midyear Meeting
Dr. Marc Epstein has developed an outstanding lecture program including psychologist and humorist Bruce Christopher whose topics are “Why are Women so Strange and Men so Weird?” and “Bambi vs. Godzilla: Dealing with Difficult People.” A live patient workshop on Botox® and fillers will be held on Friday afternoon. In addition to our Welcome Reception on Wednesday, we will have a reception at the Georgia O’Keeffe Museum near the hotel on Thursday evening. Housing arrangements at the El Dorado Hotel may be made by calling 505-988-4455. Please be sure to identify yourself as part of the AOCOD room block.

I encourage the membership to call, email, or write the national office with any questions, concerns, or suggestions for the future of the AOCOD.

Last Call for 2007 A.P. Ulbrich Research Award
The deadline for applications for the A.P. Ulbrich Research Award in Dermatology is fast approaching. Applications must be received by March 30 to be eligible for consideration of the award during the following academic year (July 1, 2007 - June 30, 2008).

Recipients can use the grant to conduct a basic science or clinical research project that will make a significant contribution to osteopathic medicine and dermatology. Offered to encourage osteopathic resident physicians to engage in dermatologic research, the award is an educational grant sponsored by the AOCOD and underwritten through the College’s Educational Research Fund.

Applications will be entertained from osteopathic physicians in postdoctoral training programs and research fellows in dermatology. Each grant supports one individual. Not more than one consecutive or non-consecutive grant can be awarded to the same person.

Because the grant is not exclusive, the investigator may seek additional funding from other sources such as the AOA Bureau of Research, governmental agencies, other outside agencies, a college or hospital, etc.

The types of research eligible for consideration can vary. For example, a resident may contribute to or take responsibility for a portion of an ongoing research project; seek support for conducting novel research after developing a feasible research project; or seek support to develop a research idea. In the last case, the resident should first conduct a complete literature search to determine the feasibility and need for the project. A research proposal must be developed by the end of the grant timeline.

All resident research must be conducted under the guidance of a research advisor (i.e. sponsor). Once received, applications will be reviewed by the Research Committee, which will forward its recommendations to the Society. Applicants are notified of the Committee’s action by certified letter.

For more information about the A.P. Ulbrich Research Award in Dermatology, go to: http://www.aocod.org/qualify.

Wanted: Fellows of Distinction

The deadline for applications for consideration as a Fellow of Distinction is July 1. By submitting the Fellow of Distinction application at this time, the Fellow Committee will be able to thoroughly review the applicant’s qualifications and contributions in time for his or her induction at the 2007 Annual AOCOD Convention, notes Stanley Skopit, D.O., FAOCD, Chair of the Fellowship Committee.

“Granting of the prestigious honor of Fellow of Distinction is a culmination of dedication, devotion, and leadership to the AOCOD by the candidate for a prescribed period of time, leading to recognition of this achievement by his or her peers,” he says.

The honorary title of Fellow of Distinction of the AOCD may be conferred on members who have made outstanding contributions through teaching, authorship, research, or professional leadership to the College.

Dr. Doctoroff Serves State Dermatology Society, Writes Book Chapter
In 2006, Alex Doctoroff, D.O., was named president of the North-Central chapter of the New Jersey Dermatological Society. In addition, he will serve a two-year term as vice president for the state dermatology society, after which he is expected to serve as president.

The primary issue he plans to address as vice president are negotiations with insurance carriers to resolve various disputes and the elimination of the cosmetic tax enacted by the New Jersey legislature. Dr. Doctoroff also would like to improve the quality of the Society’s academic programs.

Dr. Doctoroff recently contributed a chapter on calpheyloiaxosis to a book entitled ‘Treatment of Skin Disease’ edited by Dr. Mark Lebowith, et al. Asked to write the chapter by Dr. Warren Heymann, one of the editors, due to his previous research on calpheyloiaxosis, Dr. Doctoroff found contributing to the book to be very gratifying. “The reason is that the book is probably the best structured source of information for dermatologists worldwide,” he says. The book is not only clear and concise, it lists key points for dermatologic diseases, as well as first, second, and third lines of therapy. It also identifies what level of evidence exists to support each treatment, he adds.

Dr. Doctoroff has been in private practice for four and one-half years in Clark, New Jersey. He also teaches dermatology residents at the Veterans Administration Medical Center in East Orange, New Jersey, where he serves as Assistant Chief of Dermatology.

Seeking In-Training Exam Committee Chair

The AOCOD Executive Committee is seeking a fellow member of the College to serve as chair of the In-Training Exam Committee. This individual will be responsible for creating and administering the annual residents’ examination. Additional committee members will be appointed to write questions for all sections of the exam, and assist in compilation of the exam sections.

All interested members should contact AOCOD President Bill Way or Executive Director Becky Mansfield no later than June 1.

Committee Reports

The following are committee updates reported by their respective chairs:

The Bylaws Committee is working on several bylaws changes. To that end, the committee has submitted suggested wording to the AOCOD President and Convention Chair.

The Convention Committee is looking into the feasibility of using a professional planning company for future College meetings. Currently, committee members are in discussion with three such companies. The committee is also looking into the possibility of making the Midyear Meeting the annual meeting, which is currently planned for fall. While corporate sponsors are unanimously in favor of this idea, opinions from the membership are split 50-50.

The Journal Committee is working diligently to increase the number of manuscript submissions.
Sun Coast Residents Present Posters at AAD Meeting

The NSUCOM/Sun Coast Hospital residents presented posters at the 65th annual meeting of the American Academy of Dermatology in Washington D.C. held this past February.

The presenters and posters are as follows:

**Poster Title:** Lipedematous Alopecia: A Case Report and Review  
**Presenter:** Andrea Costanza, D.O. (3rd year)

**Poster Title:** Acquired Perforating Dermatosis: A Case Report  
**Presenter:** Kevin DeHart, D.O. (2nd year)

**Poster Title:** Idiopathic Thrombocytopenic Purpura: A Case Presentation and Discussion  
**Presenter:** Aaron Bruce, D.O., and Roger Sica, D.O. (1st year)

Resident Welcomes Baby Boy

Congratulations to Elliot Love, D.O., 1st year Resident at UHHS Case Western University, Richmond Heights Hospital in Ohio, and his wife, Kassie, who welcomed Landon Joseph Love. Landon was born at 10:17 a.m. on January 15th—two weeks early. He was 8 pounds, 12 ounces. Dr. Love is under the directorship of Joan Tamburro, D.O., FAOCD.

Resident Receives Cosmetic Dermatology Award

Jon Keeling, D.O., at Wellington Regional Medical Center in West Palm Beach, Florida, was recently awarded the Alan Scott M.D. Residency Award by the American Society of Cosmetic Dermatology and Aesthetic Surgery (ASCDAS).

Dr. Keeling’s paper received first place among the research papers submitted by MD and DO dermatology residents. The title of the winning paper is “The Use of Topical Therapies in Combination with Procedures for Treatment of Hyperpigmentation Disorders.” It will be published in an upcoming issue of the Journal of Cosmetic Dermatology.

Dr. Keeling presented the paper at the ASCDAS’s annual meeting held in Las Vegas in December, 2006, when he was given the award.

“I felt very honored as an osteopathic dermatology resident to win the award, and to have the opportunity to be a presenter at a very large and mostly allopathic conference,” says Dr. Keeling, who is expected to complete his residency training under Program Director Bradley Glick, D.O., in 2008. The award is named for Alan Scott, M.D., the first physician credited with using botulinum toxin for cosmetic purposes.

Dermatology Compensation on the Rise

The median compensation for dermatologists grew in 2005, according to the Medical Group Management Association’s (MGMA) 2006 Physician Compensation and Production Survey.

In 2005, the median compensation for dermatologists was $334,277, up from $308,855 in 2004, representing an 8.2% increase. In comparison, overall specialists saw a 20.3% increase during those four years.

Responses from 343 dermatologists were compiled for the 2005 MGMA data. While more than 300 respondents worked at multispecialty practices, approximately 30 worked in single-specialty practices. Those employed at multispecialty practices reported a higher median salary than their counterparts working in single-specialty practices. The latter group, however, reported receiving a higher percentage of their collections.

Residents Update

By Marsha Wise, Resident Coordinator

Hi Everyone,

Time seems to be flying by with all of the activities going on. We have been finishing up the plans for the Midyear Meeting in Santa Fe, processing membership renewals, and updating member information in our database.

I also have prepared and sent out first-year packets to our 2007-2010 residents. So far, we have 27 new residents. If you are one of these new residents and have NOT received your packet, please contact me at 1-800-449-2623.

We have dates for the 2007 Scripps Course and the 2007 Chicago Dermatology Review Course, but do not yet have all of the registration information.

We will send an email to those who are eligible to attend these seminars when we have more information. The date for the Scripps Course is July 9-14, 2007. The Chicago Dermatology Review course will be held July 8-12, 2007.

Be sure to let me know of any special events you have participated in or awards you have received in regard to your residency and I will incorporate this information in your records.

Residents who celebrated January birthdays are Drs. Kristen Aloupis, Celeste Angel, Nanda Channaiah, John Cappolla, Heather Higgins, Mallie Jan, Will Kirby, Todd Kreitzer, Elliott Love, Joe Machuzak, Julie Malichodi, Elaine Miller, Allison Schwedelson, and Alison Tam.

Those who celebrated February birthdays are Drs. Sami Abbasi, David Bonney, Jennifer Bucci, Valerie Nozad, John Perroto, Stephen Verral, and Michael Whitworth.

Residents celebrating March birthdays are Drs. Helen Barash, Daniel Bonney, Jennifer Bucci, Valerie Nozad, John Perroto, Stephen Verral, and Michael Whitworth.

Residents who are eligible to attend these seminars will be notified when they have more information. Those who are eligible to attend these seminars will be notified when they have more information.

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Two Residents Receive First Intendis Mentoring Grant

Recipients for the first Intendis Mentoring Grant were recently named. They are Asfa Akhtar, D.O., 3rd year Resident at NSUCOM/N Broward General Medical Center in Fort Lauderdale and Neil Koves, D.O., 3rd year Resident at Medical University of South Carolina in Charleston. They were chosen to receive the Intendis Grant by the AOCD Committee of Competing Awards.

Dr. Akhtar plans to work with Francisco Kerdel, M.D., FAAD, this spring. Dr. Kerdel is Chief of Dermatology at Cedars Medical Center in Miami and Director of Inpatient Services. He also is a Voluntary Professor of Dermatology at the University of Miami, Miller School of Medicine, Department of Dermatology. Dr. Akhtar chose Dr. Kerdel as her mentor because he believes it is important to have a mentor in the dermatology field. Dr. Kerdel is regarded as an authority in challenging cases in medical dermatology by seeing unique to the elderly, or require special evaluation techniques and treatments. Therefore, it is incumbent upon dermatologists to address the unique dermatologic needs of our elders."

Upon hearing that he was a recipient of the mentoring grant, Dr. Austin notes, "I felt very appreciative and honored to be selected, especially since the award committee consisted of distinguished Fellows of the AOCD."

Mentoring Award

Bath Drs. Akhtar and Austin will be required to complete a paper suitable for publication about their mentoring experience and respective topic. Bath recipients are grateful for this opportunity to Intendis Pharmaceuticals and the AOCD, as well as Drs. Skopit, Richard Miller, D.O., FAOCD, and David Harowitz, D.O., FAOCD, the latter of whom were involved in developing the mentoring research program format and reviewing allgrant applications. Additionally, Shirley Gottleib, Corporate Development Consultant, helped develop the funding with Intendis, and project assistance was provided by Becky Mansfield, AOCD Executive Director, and Marsha Wise, Resident Coordinator.

The AOCD, in conjunction with Intendis Pharmaceuticals, announced the creation of this mentoring program in 2006.

Residents in the NSUCOM program who competed are: Drs. Roger Sica (1st year), Kevin DeHart (2nd year), Nanda Chan-naiah (3rd year), Andrea Costanza (3rd year), Kevin Belasco (2nd year), and Aaron Bruce (1st year). To see additional Dermpath Bowl I pictures visit the Dermpath Diagnostics’ Web site at www.dermpathdiagnostics.com.

Sun Coast Residents Excel in Dermpath Bowl I

The NSUCOM/Sun Coast Hospital residents made it to the semi-finals in the inaugural Dermpath Bowl played at the 65th annual meeting of the American Academy of Dermatology in Washington D.C. this February. In the spirit of the Super Bowl, Dermpath Diagnostics organized 16 teams of DO and MD residents from universities across the country for the two-day competition held February 3rd and 4th. Equipped with three microscopes, each team was required to read five dermatopathology slides and answer questions from select dermatopathologists from Dermpath Diagnostics. The slides became more difficult each round, and the amount of time given decreased from six minutes (1st round) to five minutes (2nd round) to four minutes (3rd round). Although NSUCOM was hopeful when the semi-finals went into a sudden death, they eventually lost to Wake Forest University whose team ultimately won the championship. All 3rd year members of the teams that made it to the semi-finals received a complimentary registration to the 20th Annual Barron Board Review, a pre-board dermatopathology course, scheduled for June 2-3 in Cincinnati. The review hosted by David R. Barron, M.D., is offered to all 3rd year residents and attending physicians who have not yet taken the dermatology board examination. Approximately 250 residents from across the country attended the review in 2006. Drs. Channaiah and Costanza will attend this June.

Intendis Mentoring Grant Applications Being Accepted Now

Applications for the second annual Intendis Mentoring Grant are now being accepted through June 30, 2007. This award creates, finances, and provides residents with an opportunity to study with leading experts who have a specific expertise. The grant will be used to cover the recipient’s cost of travel, housing, and subsistence for the week of special rotation up to a given amount. The recipient is required to submit a paper suitable for publication concerning the experience. This paper must be turned in within 60 days after the rotation is complete. Submission of expenses is also required.

Open to 2nd and 3rd year residents in good standing with the AOCD, the grant has two positions available per year. Residents who would like to receive the award should complete an application, which consists of the following:

• one-page essay describing why the applicant wishes to receive this grant, and
• one copy of the applicant’s current curriculum vitae.

Application for this grant may be submitted even if a comparable application to other organizations has been made. If the recipient accepts a similar scholarship from another agency or organization, this grant application will be withdrawn. It is the responsibility of the recipient to notify the Intendis Grant Committee of competing awards.

The recipient may select the expert physician with whom he/she plans to rotate. The mentor cannot be a relative and must be practicing in the continental United States. Final approval will be given by the Intendis Grant Committee.

This grant must be used in the year for which it is designated and cannot be postponed.
Two Residents Receive Research Award from Caribbean Dermatology Society

Two DO residents were recently awarded the Ferndale Laboratories’ Caribbean Dermatology Resident Research Award from the Caribbean Dermatology Society. They are:

• Jon Keeling, D.O., 2nd year Resident at O’Bleness Memorial Hospital in Athens, Ohio, under Bradley Glick, D.O., Program Director
• Ty Hanson, D.O., 3rd year Resident at O’Bleness Memorial Hospital in Athens, Ohio, under John Hibler, D.O., Program Director

The award was given in recognition of research papers submitted by each resident, both of whom presented their papers at the Caribbean Dermatology Symposium held on Grand Cayman Island in January. Dr. Keeling’s paper is entitled “Mequinol 2%/Tretinoin 0.05% Solution for the Treatment of Melasma in Male Patients.” Based on results from this small study conducted under the supervision of Marta Rendon, M.D., an Aberdeen dermatologist, Dr. Keeling suggests that larger studies are needed to research therapies tailored to men. This article will also be featured in an upcoming article of Skin and Allergy News.

“It was a great experience to attend the Caribbean Dermatology Symposium and to present my research to many of the top dermatologists nationally,” says Dr. Keeling. Dr. Hanson’s paper entitled “Mystery of 21 Emergency Department Visits: Presenting as Facial and Eyelid Dermatitis” was a mystery that hit very close to home. In it, he reviewed the case of 21 individuals from his home town of Grotan, South Dakota, who presented to the emergency department for intense facial and eye symptoms after attending a district wrestling tournament one afternoon last February. The individuals were quarantined, had to shower in cold water, and dressed in paper gowns. The Mayo Clinic and several poison control centers were contacted in an effort to determine the cause of the unusual symptoms. “It was thought to be some sort of prank or home-grown terrorism,” he says. Eventually Warren Redmond, M.D., an Aberdeen dermatologist was called. Dr. Redman, whose practice Dr. Hanson will be joining after he completes his residency this June, determined that the outbreak could be due to a mercury vapor bulb in the gym that had lost its outer glass filter. The individuals sitting under the faulty light bulb above the home team’s bleachers were the most affected. The last time this type of case was reported was in the early 1980s. Dr. Hanson agreed to write up the case and then submitted the information for consideration for the 2007 Ferndale Residency Recognition Award.

“The only thing missing was pictures,” he says. “I called my dad who went to church that Sunday and made an announcement that I needed pictures, which I received,” he says. Additionally, Dr. Hanson will be presenting the information for publication to the Journal of the American Academy of Dermatology. An article on the case is also expected to appear in Skin and Allergy News. “This was definitely a different experience from any previous papers that I have written,” he adds.

The two DO dermatology residents were chosen along with six MD dermatology residents from across the country as award winners.

Residents Who Shine

Two DO residents were recently awarded the Ferndale Laboratories’ Two Residents Receive Research Award from Caribbean Dermatology Society. They are:

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• Ty Hanson, D.O., 3rd year Resident at O’Bleness Memorial Hospital in Athens, Ohio, under John Hibler, D.O., Program Director

The award was given in recognition of research papers submitted by each resident, both of whom presented their papers at the Caribbean Dermatology Symposium held on Grand Cayman Island in January. Dr. Keeling’s paper is entitled “Mequinol 2%/Tretinoin 0.05% Solution for the Treatment of Melasma in Male Patients.” Based on results from this small study conducted under the supervision of Marta Rendon, M.D., an Aberdeen dermatologist, Dr. Keeling suggests that larger studies are needed to research therapies tailored to men. This article will also be featured in an upcoming article of Skin and Allergy News.

“It was a great experience to attend the Caribbean Dermatology Symposium and to present my research to many of the top dermatologists nationally,” says Dr. Keeling. Dr. Hanson’s paper entitled “Mystery of 21 Emergency Department Visits: Presenting as Facial and Eyelid Dermatitis” was a mystery that hit very close to home. In it, he reviewed the case of 21 individuals from his home town of Grotan, South Dakota, who presented to the emergency department for intense facial and eye symptoms after attending a district wrestling tournament one afternoon last February. The individuals were quarantined, had to shower in cold water, and dressed in paper gowns. The Mayo Clinic and several poison control centers were contacted in an effort to determine the cause of the unusual symptoms. “It was thought to be some sort of prank or home-grown terrorism,” he says. Eventually Warren Redmond, M.D., an Aberdeen dermatologist was called. Dr. Redman, whose practice Dr. Hanson will be joining after he completes his residency this June, determined that the outbreak could be due to a mercury vapor bulb in the gym that had lost its outer glass filter. The individuals sitting under the faulty light bulb above the home team’s bleachers were the most affected. The last time this type of case was reported was in the early 1980s. Dr. Hanson agreed to write up the case and then submitted the information for consideration for the 2007 Ferndale Residency Recognition Award.

“The only thing missing was pictures,” he says. “I called my dad who went to church that Sunday and made an announcement that I needed pictures, which I received,” he says. Additionally, Dr. Hanson will be presenting the information for publication to the Journal of the American Academy of Dermatology. An article on the case is also expected to appear in Skin and Allergy News. “This was definitely a different experience from any previous papers that I have written,” he adds.

The two DO dermatology residents were chosen along with six MD dermatology residents from across the country as award winners.

Residents Who Shine

The only osteopathic dermatology residency in California, Western University/Pacific Hospital in Los Angeles boasts some very eclectic and innovative residents.

When the residency program began in 1991, it was approved for six residents and has four, two of which are slated for graduation this year. Program Director David Horowitz, D.O., FAOCD, prefers keeping a staff of four residents to ensure that they receive personalized training and individualized attention.

Hands on Approach

The program has a “very academic, very hands-on approach because residents learn by doing—not watching!” he says. “When residents graduate from this program not only have they received excellent clinical, cosmetic, and surgical training, they also are well versed in office management and business operations.”

The program prides itself on progressive improvement and recently added a cosmetic surgeon who works with the residents almost daily. “We bring on a full-time cosmetic surgeon to expose the residents to advanced cosmetic procedures,” says Mark Horowitz, D.O., the residency Co-Director.

Busy Schedule

The residents, who are encouraged to think freely and granted a tremendous amount of autonomy in order to build confidence, must use those skills to juggle a busy schedule, says Dr. Mark Horowitz. Histopathology, Pacific Hospital’s dermatology clinic, Mohs surgery clinic, and cosmetic clinic are just some of the training requirements. Once a month, the residents attend grand rounds at Harvard/UCLA Medical Center and hold a journal club meeting. They conduct in-house consultations at Pacific Hospital as needed.

As if their schedules aren’t busy enough, doctors in the residency and program director are going on a medical mission to Ecuador this April. They are joining DOCare Interna-
Resident Receives ASDS Scholarship

Tejas Desai, D.O., 3rd year Resident at Western University/Pacific Hospital in Long Beach, California, is the only DO resident to receive the American Society of Dermatologic Surgery (ASDS) 2006 Resident Scholarship.

Dr. Desai received the scholarship in August 2006 along with 34 MD dermatology residents. To win the ASDS Resident Scholarship Award, Dr. Desai wrote an essay elaborating on why he should receive it. The award was also based on his research and presentations, many of which focus on dermatologic surgery. This is the second award that Dr. Desai received from the ASDS in 2006. In May, he received the ASDS Preceptorship Award. As part of that, Dr. Desai performed a one-month preceptorship with ASDS Fellow Gary Lask, M.D., at the UCLA Medical Center in Los Angeles in August.

“I am very appreciative of my dermatologic opportunities,” he says. “I respect the ideals and values of my trainers and hope to contribute just as they have.”

Dermatologist Drives Home Sun Safety on Golf Team

When tee time rolls around, Daniel S. Hurd, D.O., FAOCD, has his driver in hand, his cap on tight, and his sunscreen applied. And if this Associate Clinical Professor at Virginia College of Osteopathic Medicine has his way, young golfers across the country will be doing the same.

“As a golfer, I know the amount of sun exposure that one can receive during a single round,” he says, noting that many of his patients with significant sun damage are also golfers. “It is definitely a high-risk recreation with regard to skin cancer formation.”

Dr. Hurd is out to change that by serving as the team dermatologist for the Hokies, the division one golf team at Virginia Tech in Blacksburg, Virginia, the same town in which he has been practicing since 1999.

Shortly after Joe Hardwick, the Virginia Tech golf coach, became his patient in 2005, the dermatologist discovered a malignant melanoma on the coach’s face. “Thankfully, the invasion of this tumor was early and it was treated in total with surgical excision,” Dr. Hurd recalls. It was then that the two decided the earlier they could educate golf professionals about the danger of chronic, unprotected sun exposure, the better.

That spring, Dr. Hurd conducted his first annual skin cancer screening for the 10-member team. As part of the screening, he discusses sun protection such as the importance of wearing caps and appropriate clothing, as well as the proper use of sunscreens with sun protection factor (SPF). “We talk about the strength of SPF; duration of its effect, and when to re-apply it,” he says. The dermatologist also makes himself available to team members and coaches to answer questions about sun protection and injury, as well as any necessary treatment follow-up.

Although the golf coaches at Virginia Tech did their best to educate team members about sun safety in the past, having a team dermatologist takes their awareness to the next level.

“Although the golf coaches at Virginia Tech did their best to educate team members about sun safety in the past, having a team dermatologist takes their awareness to the next level.”

Covered tee area. Out on the green, they are advised to seek shade under a tree as opposed to standing in the hot, beating sun. They also are evaluating options for sun protective clothing, which have become available in recent years. “I’m not just talking about wearing long sleeves, but wearing shirts made with fabric treated to refract ultraviolet light,” Dr. Hurd explains.

Team members have been very receptive to the sun protection advice that he is passing along. “They all attend the cancer screening and the coaches ensure daily compliance with the sun protection program we’ve outlined,” says Dr. Hurd.

Adds Coach Hardwick, “It’s something that a lot of kids just don’t think about at that young age, but as coaches and administrators, we need to take the lead. We’re very fortunate to have such a qualified individual willing to give his time and volunteer his services for such a great cause,” he says of Dr. Hurd.

By starting an annual skin cancer screening, the Hokies hope to lead the National College Athletic Association, which includes more than 300 division one golf programs, by example. “Golf will be the future for most of the young team members,” concludes Dr. Hurd. “As such, it is vital for them to protect themselves as early and as completely as possible.”

What’s On Your Mind?

What’s On Your Mind is a new feature in the AOCD Newsletter. Think of it as an editorial related to issues that affect the AOCD membership. Is something on your mind about the field, profession, training, or business of osteopathic dermatology that you would like to share with other members? E-mail your thoughts to Ruth Carol, editor, at RuthCarol@aol.com or fax them to 847-673-3156.

Health Care System Needs Improvement: It Begins with Us

In the “real world of medicine” greed and opportunity contribute to making compassion, accountability, and willingness to care for the poor, archaic concepts. Health care providers, insurers, governments, hospitals, long-term care facilities, pharmaceutical corporations, medical supply distributors, and technology companies have proved incapable of working together to offer health care for many of the United States’ 50 million residents. Countless young children are uninsured and underinsured. As a nation, we are mired down in a quagmire of frustration over the health care “issue.”

Oneonders “Who is at fault?” Seemingly everyone. We all have failed to be accountable and to distribute quality care to those who need it the most. Certainly amongst us are those who “blame the victim,” saying “those folks made poor lifestyle choices. Certainly they lack diligence, the will to survive, or [you fill in the blank].” And, in fact, many uninsured people are completely lacking in perception with regard to the cost of health care, leaving health care providers (i.e., me) or the government to “foot the bill.” Furthermore, we all seek to keep the costs down (apparently another failure). Ironically, pharmaceutica and technological developments tout medical miracles and earth shattering results with regard to rhytids, tummy tucks, mash pads, breast augmentation, and on and on.

We have more and more exotic cosmetic resolutions while standard care has been stranded!

I believe in my heart that if the system is to improve, fundamental change is required on an individual basis with each of us making a sacrifice. Perceptions, like opinions, are self-induced and often wrong. WE desperately need changes that will save us and the people around us. The first step is to avoid looking the other way from a faulty health care system. While I can offer no perfect or vast solutions, I do believe that you will never get in trouble being a servant.

Sincerely Yours,
Ronald C. Miller, D.O., FAOCD

In Memorium

Patricia (Mansfield) Varner, age 38, passed away on January 5.

She succeeded in death by both sets of grandparents, Harry and Dorothy Mansfield, and Sam and Sue Harris. Patricia is survived by her husband of fourteen years, Larry Varner, Jr., children, Andrew and Aaron, parents, Rick and Becky Mansfield, and sister, Christi (Steve) Nielsen.

Funeral services were held January 6 in Centerville, Ohio, and January 9 in Missouri where her parents reside and Patricia grew up. Cards may be sent to Becky and Rick Mansfield at PO Box 493, Kirkville, MO 63510. Donations may be made to the Andrew T. and Patricia T. Varner Scholarship Fund in care of Christi Nielsen at any National City Bank.

Former AOCD President Israel Feldman, D.O., FAOCD, passed away in May 2006. He was 105.

Dr. Feldman joined the College in 1958 and served as president in 1966. He was honored by the AOCD for his contributions to the College during his long and distinguished career a few years ago when the title of Fellow of Distinction was re-introduced.

Dr. Feldman was a clinical professor of dermatology at Southeastern College of Osteopathic Medicine and he served on the Board of Trustees of the American Physicians Fellowship for Israel Medicine. Dr. Feldman retired from practice in North Miami Beach in 1990 at the age of 85.
AOA Launches New Logo, Tagline

The AOA recently unveiled its new brand including a new logo and tagline. As part of the AOA’s branding initiative, both the logo and tagline focus on “family.”

In the new logo, the letters “K” support the “O” analogous to how the AOA provides support to the DOs’ professional family. The addition of the staff of Aesclepius conveys the fact that the AOA is a medical organization. A greater emphasis also

has been placed on the word “Osteopathic” by bolding it in type. The newly created tagline reads “Treating Our Family and Yours.”

The purpose of developing a tagline was to create one that had meaning for the osteopathic medical profession, as well as a consumer audience. “Treating Our Family…” refers to how the AOA cares for all DOs and osteopathic medical professionals, providing support for them in every aspect of their professional lives. The latter part of the tagline—“and Yours”—explains how the AOA’s DO members care for patients as if they are part of their own family.

The new brand was unveiled at the AOA Unified Convention held in October 2006 in Orlando.

Financial Tidbits
by Robert Schwarz, D.O., FAOCD

Nostromus purported to predict the future. A year ago, however, I realized forecasting wasn’t my forte. Unexpected outcomes and fatalities occur, and there is no better time than the new year to reassess one’s insurance portfolio to determine whether current policies are either inadequate or provide overprotection. You can find comprehensive coverage information through your financial advisor or various insurance companies. The AOA and the AAD offer this type of information on their respective Web sites: www.aoa.org and www.aad.org.

The following are some general guidelines for insurance coverage.

Life insurance. The lay definition is the ability to meet one’s financial responsibilities no matter what happens. Several experts believe protecting nine to 12 times your annual income, depending on your family’s size, amount of debt, practice solvency/ownership, spousal income, and standard of living. If you are beginning a practice and money is tight, consider term insurance, which is relatively inexpensive. As always, read the policy!

Disability insurance. This insurance is self-explanatory. Not only are people living longer, but modern medicine is keeping people alive with handicaps that previously were impossible to sustain. Current statistics state that three out of every 10 workers, ages 25 to 65, are unable to work for 90 days or more due to a disability. The AOA and the AAD offer this type of information on their respective Web sites: www.aoa.org and www.aad.org.

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Car insurance. Get your state’s maximum portability. If you have an old car and don’t care, consider dropping coverage for collision, theft, and towing.

Business insurance. Owning a business is a risk in many venues. Of course, it makes sense to have coverage for major theft and/or damage. But what about business interruption insurance to replace the temporary cessation of revenue due to a fire or hurricane? You might consider business interruption insurance on your disability policy to cover rent, etc.

Long-term care insurance. This would help pay for your nursing home care, thereby protecting your family’s inheritance. This type of insurance is often purchased in one’s 50s. But be sure to read the policy!

Like regular dermatology checkups, having appropriate insurance coverage is sound risk management.

Do You Have Your NPI?

The deadline for having a national provider identifier (NPI) is fast approaching.

The Centers for Medicare and Medicaid Services (CMS) require that every health care provider who bills Medicare for services must have an NPI in place by May 23, 2007. A provider who does not bill Medicare, but bills for services, also needs one. Even a provider who is working in a solo practice and is not conducting electronic transactions, and is therefore not a covered provider, may be required by health plans or employers to obtain an NPI.

Implementation and testing of the NPI can take as long as four months as it is a complex process that impacts all business functions of the practice, office, or institution including billing, revenue and expense. Because the NPI affects internal and external business and systems operations, it can affect the appropriate payment of claims in a timely manner. Therefore, having the NPI in place before the compliance deadline will help providers avoid disruption in cash flow. As a result, the AOA has placed on the word “Osteopathic” by bolding it in type. The newly created tagline reads “Treating Our Family and Yours.”

The purpose of developing a tagline was to create one that had meaning for the osteopathic medical profession, as well as a consumer audience. “Treating Our Family…” refers to how the AOA cares for all DOs and osteopathic medical professionals, providing support for them in every aspect of their professional lives. The latter part of the tagline—“and Yours”—explains how the AOA’s DO members care for patients as if they are part of their own family.

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Physician Education as Seen Through Corporate Eyes - Part 1

We asked three corporate executives two questions regarding physician education. The following is their responses to the first question. Answers to the second question will be revealed in the next issue of the AOCD Newsletter.

“What do you consider the three most important elements in an effective dermatologist education program?”

Elliott Milstein, Business Unit Director, Biopelle

The number one element for any education program must be its dedicated faculty. The physician who chooses to teach must do so not just as a service to his specialty, but also from a desire to communicate knowledge, skills, experience, and enthusiasm to the next generation. The most effective education program is the one with the greatest number of doctors like that on its faculty.

It should afford students broad exposure to all aspects of dermatology, which is an incredibly diverse specialty. It should include disease state, diagnosis, treatment, surgery, pathology, skin wellness programs, and cosmetic treatments and procedures, not to mention research in each of those fields.

Finally, students must be exposed to the full diversity of patient skin types, including ethnic skin types. The dermatologist who goes out into the world without having done extensive work with African-American, Hispanic, and Asian skin, as well as intolerant, sensitive, and aging skin is simply not prepared for clinical practice.

David Rustum, Senior Marketing Manager, CallaGenex Pharmaceuticals

An effective educational program should
1. provide a balanced content and impartial presentation of the topic based upon objective review of the medical evidence;
2. align continuing medical education delivery with physician preferences, targeting delivery (of content and format) to individuals rather than groups; and
3. provide a structured and accountable framework for educational dialogue among professionals, focusing on outcomes not just facts.

Stephen W. Clark, President, Coria Laboratories

The three most important elements in an effective dermatologist education program are as follows:

• The education must be broad. The program needs a broad group of patients to gain exposure to various diseases. This is critical for the individual being trained in order to gain the ability to diagnose.

• Individuals being trained must be provided the ability to learn new treatments and evaluate studies and reports.

• A strong ethical basis to ensure that treatments are in the patient’s best interest and well being.

Congress Halts Medicare Physician Payment Cuts

Congress passed legislation to prevent a scheduled five percent cut in 2007 Medicare physician payments. Instead, there will be a payment rate freeze for one year.

By deferring the cut, Congress will keep payment rates at the 2006 level of $37.8975.1

This bill reduces the overall negative impact for dermatology to -3% from the scheduled -8%. The -3% impact is the result of changes in the relative work values (RVUs) for dermatology codes that the Centers for Medicare and Medicaid Services (CMS) have incorporated due to the following:

• A +3% practice expense (PE)/RVU increase in 2007. This is based on updated indirect practice expense values for dermatology codes. When fully implemented in 2010, dermatologists will realize a +13% increase in PE/RVUs for dermatology and a +7% impact over total RVU values.

• A -6% physician work (PW)/RVU decrease, which is based on the Relative Update Committee (RUC) Five Year Review (SYR) changes to key dermatology codes.

Medicare Fee Schedule: Top Dermatology Code Values with Congressional Fix

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• A -6% physician work (PW)/RVU decrease, which is based on the Relative Update Committee (RUC) Five Year Review (SYR) changes to key dermatology codes.

Position available in Denver, CO.

Group of 12 dermatologists in medical, surgical, and cosmetic practice seeks F/T or P/T dermatologist. Offers 4 weeks vacation; malpractice; society dues; CME stipend; medical, dental, and vision; four weeks vacation; malpractice; society dues; CME stipend; medical, dental, and vision.

Position available in Northern VA.

A family-oriented dermatology practice in a suburb of Washington DC is seeking a physician to join a staff of 2 physicians. The practice involves general and cosmetic dermatology including lasers. The position is part-time initially with potential for full-time. E-mail inquiries/resume to info@exceldermatology.com or fax to 703-827-7011.

Dermatology opportunity in Chicago, IL.

Excellent, full-time or part-time opportunity to join a busy, well established, four-dermatologist practice in the northwest suburbs of Chicago. Medical, surgical, and cosmetic dermatology (lasers, nUBV and PUVA) with opportunity for Moh's. For more information, contact katana@pol.net.

Dermatology opportunity in Florida. Dermatology opportunity for a board eligible/board certified dermatologist in the Tampa/St. Petersburg area. Top salary and bonus package with attractive benefits offered. Immediate partnership available. To apply, please contact Dr. Virginia Schekorra at 727-710-3376 (cell), 727-393-3041 (home), or 727-548-9196 ext. 4 (office), or e-mail her at vschekorra@thehdermcenter.net.

If you would like an ad to appear in the next issue of the AOCD Newsletter, please e-mail it to the editor at RuthCarol1@aol.com or fax it to 847-673-3156.

Notes:
AOCD Membership Offers Big Benefits

If you know of someone interested in becoming a member of the College, direct them to the AOCD Web site at www.aocd.org where they can download a membership application.

Membership provides the following benefits:

- Organized promotion of the specialty
- Approximately 50 hours of annual approved CME
- Timely information through the AOCD Newsletter and the Annual Membership Directory
- Practice management information
- Input through the annual business meeting

Moreover, membership is required to hold office in both the College and on the AOBD. It is also necessary for professorship at AOA teaching institutions and to serve as chair of the Department of Dermatology in AOA-approved hospitals.

Membership in the AOCD consists of the following classifications: Fellow, Associate, Resident, Affiliate, Student, Fellow of Distinction, Honorary, Life, and Corporate. A full explanation of each category is on the Web site.

If you are already a member, you can renew your membership via mail, fax, or online using a credit card.

**Update Contact Information**

Is your contact information current? If not, you may be missing need-to-know news from the AOCD.

To ensure that your contact information is up-to-date, check your AOCD profile online at www.aocd.org/members. Click on the red box on the right side of the screen to update the information right then and there. Should you have trouble accessing your profile, you can fax the new information to the AOCD at 660-627-2623. Send the fax to the attention of Marsha Wise, Resident Coordinator.

So remember, if you have changed your email address, moved, or changed your telephone number, let the AOCD know so that you remain in the dermatology DO loop!