As a medical student, do you ever wonder what it’s like to specialize in dermatology? Meet AMA member Klint Peebles, MD, a dermatologist and a featured physician in the AMA’s “Shadow Me” Specialty Series, which offers advice directly from physicians about life in their specialties. Check out his insights to help determine whether a career in dermatology might be a good fit for you.

The AMA’s Specialty Guide simplifies medical students’ specialty selection process, highlights major specialties, details training information, and provides access to related association information. It is produced by FREIDA™, the AMA Residency & Fellowship Database®.

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“I was interested in dermatology because it’s one of the few specialties that is very hands-on. You get to deal with acute and chronic conditions, so you get to see your patients improving,” Peebles said. “It definitely is a hands-on specialty. You really get to see your patients change.”

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“Shadowing” Dr. Peebles (@DrKlintPeebles)
**Specialty:** Dermatology.

**Practice setting:** Group.

**Employment type:** Employed by group.

**Years in practice:** Two.

**A typical day and week in my practice:** A day in the life of dermatology is incredibly fast-paced and busy, but also truly exciting. The diversity of the patient population and conditions is perhaps what makes the specialty most rewarding. In the course of just a few hours, I will treat a host of conditions across the lifespan ranging from blistering diseases, drug eruptions, psoriasis, and sarcoidosis to scarring hair loss, cystic acne, cutaneous lupus, melanoma, and morphea.

Dermatology requires patience and innovation along with a thirst for lifelong learning and exploration. There are a staggering number of possible diagnoses in the field of dermatology, and a large proportion of these are rare or otherwise lacking in substantial data to help guide a rigorous, evidence-based therapeutic approach. As such, dermatologists must be truly comfortable with the “art of medicine” and with tailoring treatment plans to the unique patient in front of them. Dermatology is also an exciting specialty for those who enjoy a mix of procedures.

A typical day often consists of numerous biopsies, skin cancer excisions, intralesional injections, cryosurgery, and—depending on the type of practice—there are opportunities for lasers, neurotoxin injections, and soft tissue augmentation, among others. Every day is different—you never know what exciting, challenging cases and incredible human beings are waiting on the other side of the door.

A dermatologist’s week can be highly variable, depending on the type of practice and clinical focus, and no day or week is exactly the same as another. I have worked in both academics as well as a multispecialty group practice. In academics, I saw patients 3.5 days per week with the rest of the time dedicated to research, teaching and various administrative duties.

Additionally, I was part of a dedicated dermatology hospital consult service, during which time I would spend my afternoons in the hospital rounding on patients with complex skin disease in the inpatient setting. In group practice, I see roughly 25–35 patients per day, four to five days per week, depending on the week. Weekend clinics are rare depending on the practice, although opportunities for volunteer clinics abound! Many dermatologists will take call, the nature of which varies widely.

**The most challenging aspects of dermatology:** The most significant challenge in dermatology is formulating treatment plans for relatively rare conditions in absence of substantial evidence to serve
as a guidepost.

While there are comprehensive algorithmic approaches for more common conditions—such as acne, psoriasis and atopic dermatitis—therapeutic ladders for “orphan diseases” and other conditions such as pityriasis lichenoides, erythema dyschromicum perstans, lichen planus, cutaneous lupus, dermatomyositis, hidradenitis suppurativa, and Sweet’s syndrome (many of which you may not have heard of!), among others, are less rigorously outlined. As such, we tend to rely heavily on the available literature, consensus recommendations, and the wisdom of our colleagues to help inform next steps and how we can best help our patients to be more comfortable and confident in their own skin.

The most rewarding aspects of dermatology: The skin is the body’s most visible (not to mention largest!) organ, and, as such, the skin, hair and nails provide a window into the rest of the body. Skin findings can serve as the first sign of underlying cancers, autoimmune diseases, infections, and a host of other conditions. With an intricate knowledge of the skin, dermatologists can make consequential diagnoses well before they might be detected otherwise, which may be an opportunity to start treatment earlier and more successfully.

Also challenging, yet deeply rewarding, is learning how to examine and formulate differential diagnoses across skin types. Erythema, for example, can often appear quite differently on lighter skin as compared to darker skin. Common conditions such as psoriasis and even the ubiquitous eruption of tinea versicolor can look vastly different depending on the background skin color. These distinctions are critically important and highlight the integral role of cultural humility as dermatologists draw upon their expertise to serve all patients.

Three adjectives to describe the typical dermatologist: Motivated. Adaptable. Resourceful.

How my lifestyle matches, or differs from, what I had envisioned: Dermatology is unique among many of the specialties in the sense that you are able to design your practice such that it accommodates your needs. Number of days per week, hours per day, start or stop times—all of these tend to be flexible and negotiable depending on the practice setting. As with all other specialties, there are academic options, private practice, hybrids and others.

Additionally, there are opportunities to exclusively practice medical dermatology, procedural and surgical dermatology, dermatopathology, cosmetics or even inpatient/hospital dermatology in some cases—and a combination of all of the above!

Residency training in dermatology encompasses all disciplines within the field—medical dermatology, procedural and surgical dermatology, dermatopathology, pediatric dermatology and cosmetics—which means that all dermatologists have advanced knowledge of each, but additional fellowship training is also possible. Dermatology is ripe for research, and whether your interests are

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with basic science, quality improvement, population health, clinical trials, or health disparities, there are innumerable opportunities and certainly a great need for scholastic pursuits in the field.

**Skills every physician in training should have for dermatology but won’t be tested for on the board exam:** Dermatologists, like most other physicians, must be comfortable with not necessarily knowing the answer or best treatment every time—and that’s OK! The practice of medicine is about lifelong learning, and dermatology is no exception.

Dermatology is also highly collegial—sharing information with colleagues and collaborating with other providers is not only extremely helpful but often essential for patient care. It is also important to effectively communicate with patients and to alleviate anxiety. As the burden of skin disease continues to rise in our country, significant stress can result and adversely impact patients’ ability to go about their day and interface with their communities.

For many rashes and conditions, the outwardly visible nature can be unjustly stigmatizing. It is incumbent upon dermatologists to address these important issues in a sensitive, respectful manner and to provide all available treatment options.

**Questions physicians in training should ask themselves before pursuing dermatology:** Are you excited about a very busy, fast-paced, and often unpredictable workday? Do you enjoy a mix of procedures? Are you comfortable with developing treatment plans quickly and sometimes with limited evidence particularly for rare conditions?

**Quick insights I would give students who are considering dermatology:** Dermatology is variably integrated into medical school curricula, and some programs emphasize it more than others. Where dedicated instruction in dermatology exists, it tends to be relatively limited. One of the best opportunities to experience dermatology firsthand is to seek out rotations. If rotations are difficult to find within the formal curriculum, most dermatologists would be delighted to have students in their clinics during an elective time or simply whenever they have a chance.

My first formal exposure to clinical dermatology while in medical school was during a pediatric dermatology elective at the end of my pediatrics clerkship. At that point, I had considered a variety of different specialties and career paths, and it wasn’t until this elective rotation that I realized dermatology was exactly what I was looking for. Try to talk to as many dermatologists in as many practice settings as you can. Finding a way to immerse yourself in the field, even if only for a short period of time, can be one of the best ways to determine if the field is right for you.

Remember that dermatology is an exciting field that allows for an array of career trajectories, and it is truly one that you can “make your own.” There are opportunities to develop a specific niche within dermatology, cultivate research interests, and participate in advocacy and organized medicine. For instance, in my own practice my clinical focuses are on anogenital dermatology, skin concerns in

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those living with HIV infection, and gender and sexual minority health and dermatology. These interests intersect quite well with a variety of advocacy and research interests, allowing for a well-balanced and rewarding career.