What it’s like to specialize in dermatology: Shadowing Dr. Kamath

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Staff News Writer

As a medical student, do you ever wonder what it’s like to specialize in dermatology? Meet Preetha Kamath, 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 her 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®.

Learn more with the AMA about the medical specialty of dermatology.

Preetha Kamath, MD
“Shadowing” Dr. Kamath (@PreethaKamathMD)

**Specialty:** Dermatology.

**Practice setting:** Academic and private.
**Employment type:** Hospital and private practice.

**Years in practice:** Going into my last year of dermatology residency in July.

**A typical day and week in my practice:** One thing I love about dermatology is that you are guaranteed to see something different every day. We manage so many medical conditions with skin findings ranging from acne to lupus to bullous disease. We catch skin cancers, diagnose a variety of rashes, perform surgical procedures including excisions and Mohs surgery, do cosmetics such as Botox, filler, and lasers, and in some cases read our own pathology.

Given the diversity of dermatology, my schedule is a little different each day and changes each month depending on which location I am at. For the most part, our specialty is outpatient-based, but we also take inpatient consults. Our clinics typically start between 7:30–8:30 a.m. and end between 5–6 p.m. Being in dermatology is all about being flexible and prepared to tackle anything that comes through the door.

When on the consult service, I report to the hospital and my day varies depending on the number of consults that are placed. Typically, I go and see consults in the morning. For each case, I gather a detailed history from the patient, examine them from head to toe, go through everything in the chart, do a thorough medication review, create a differential, come up with a plan, and have everything prepared to staff with my attending by lunchtime. All biopsies, cultures, lab orders and prescriptions are performed by the resident.

During a typical week, in the evening I spend time on my research projects as this is a strong interest of mine, and occasionally have meetings for dermatologic societies that I am actively involved in. I spend at least a couple of hours per day reading dermatology textbooks and journals. One thing that most people are unaware of is the large volume of reading in dermatology. There are thousands of dermatologic entities and an ever-increasing number of medications, especially targeted therapies that are becoming available to patients.

To keep up with all of this information, treat patients of all ages, and have such a diverse practice, we have to learn everything about general and complex medical dermatology, pediatric dermatology, procedural dermatology, and dermatopathology. We have hundreds of pages of assigned reading per week and cover multiple textbooks in each of these core areas during our residency. We truly are lifelong learners.

**The most challenging and rewarding aspects of dermatology:** Being able to see entire families and build a relationship with my patients over a long period of time. I also love doing dermatologic surgery in the clinic. Our patients are awake during Mohs surgery and excisions so we can develop rapport and really get to know them well. What I find extremely rewarding is being able to have such a huge impact on my patients’ lives.
Skin conditions and cancers have a significant physical and psychological impact on quality of life, so it’s great to be able to diagnose diseases that have often been missed by others, offer cutting-edge therapies, rebuild confidence, provide hope and have meaningful discussions about how to manage these skin diseases or potentially prevent them in the future.

**How life in dermatology has been affected by the global pandemic:** Many dermatology residents and dermatologists at academic centers were called to serve on the front lines and cover ICUs or inpatient floors at the height of the pandemic which was incredibly difficult for everyone.

Telemedicine visits have allowed triaging of care and have helped relieve some of the backlog of patients who need dermatologic care. However, adequate reimbursements for telehealth remains an ongoing issue. Many dermatologists in both private and academic settings continue to deal with staff shortages and the challenges of providing safe care with each new wave or variant.

**The long-term impact the pandemic will have on dermatology:** As we continue to move forward, the use of telehealth to improve access to care is going to be important as are maintaining incentives so that everyone—including patients, employers, insurers and physicians—can benefit from the ease of virtual visits.

**Adjectives to describe the typical dermatologist:** Astute, insightful, meticulous, genuine and compassionate.

**How my lifestyle matches, or differs from, what I had envisioned:** As a physician, there will always be more to do so it is up to you to find a balance and prioritize what is important to you. At the end of dermatology residency, you will have acquired such a unique skill set that includes being able to provide complex medical dermatology care to all age groups, surgical and cosmetic procedures. Whether you join academics, private practice, or choose to do some combination of the two, there is something for everyone.

**Skills every physician in training should have for dermatology but won’t be tested for on the board exam:** In dermatology, we are only afforded a short amount of time for patient visits and see unique presentation of dermatologic disease in different skin tones, so it is important to be able to break complex information down for patients in an easy way, be culturally competent, and have strong communication skills so that you can build strong relationships with patients and staff.

**One question physicians in training should ask themselves before pursuing dermatology:** Do you enjoy fast-paced clinics with a broad variety of complex medical cases, surgical and cosmetic procedures? All of these will be encountered on a day-to-day basis.

**Books every medical student interested in dermatology should be reading:** Reading textbooks and medical journals is extremely important. Outside of that, I recommend:
● The House of God, by Samuel Shem, MD.

The online resource students interested in dermatology should follow: For medical students, the American Academy of Dermatology (AAD) has a basic dermatology curriculum available online which is a good place to start. The AAD also has Instagram pages that are filled with valuable information.

One application available on the phone that I find useful is VisualDx. It includes information and photographs of a variety of dermatologic diagnoses. It’s a great quick resource when you are on the go and don’t have time to flip through a textbook or journal.

Quick insights I would give students who are considering dermatology: There are now more resources available to students interested in dermatology than ever before. Spending time with those in the field and observing the different practice options is always helpful. Conferences also remain a great way to learn more about the specialty and network.

There are also many interest groups and dermatologists with blogs or social media pages that are filled with valuable information. There are also lots of newly available scholarship opportunities to observe a dermatologist or work on a research project.

Songs to describe life in dermatology: “Don’t Stop Believin’,” by Journey for those in the process of becoming a dermatologist. “Good Life,” by OneRepublic for those who’ve made it!