



# Making Infectious Disease Fellowship More Rational: A Needs Assessment of Program Directors



Danica Rockney, MD<sup>1</sup>, Sean Tackett, MD, MPH<sup>2</sup>, Michael T. Melia, MD<sup>1</sup>  
Johns Hopkins University School of Medicine; Baltimore, MD<sup>1</sup> and Johns Hopkins Bayview Medical Center; Baltimore, MD<sup>2</sup>

## Introduction

- Many infectious diseases present with rashes.
- Many medical providers do not receive dedicated training in dermatology in medical school<sup>1</sup> or in residency.<sup>2</sup>
- Limited data have been published regarding dermatology training in infectious disease (ID) fellowships.

**We aimed to understand the perceived importance, current effectiveness, and existence of dermatology curricula for ID fellows in the United States.**

## Methods



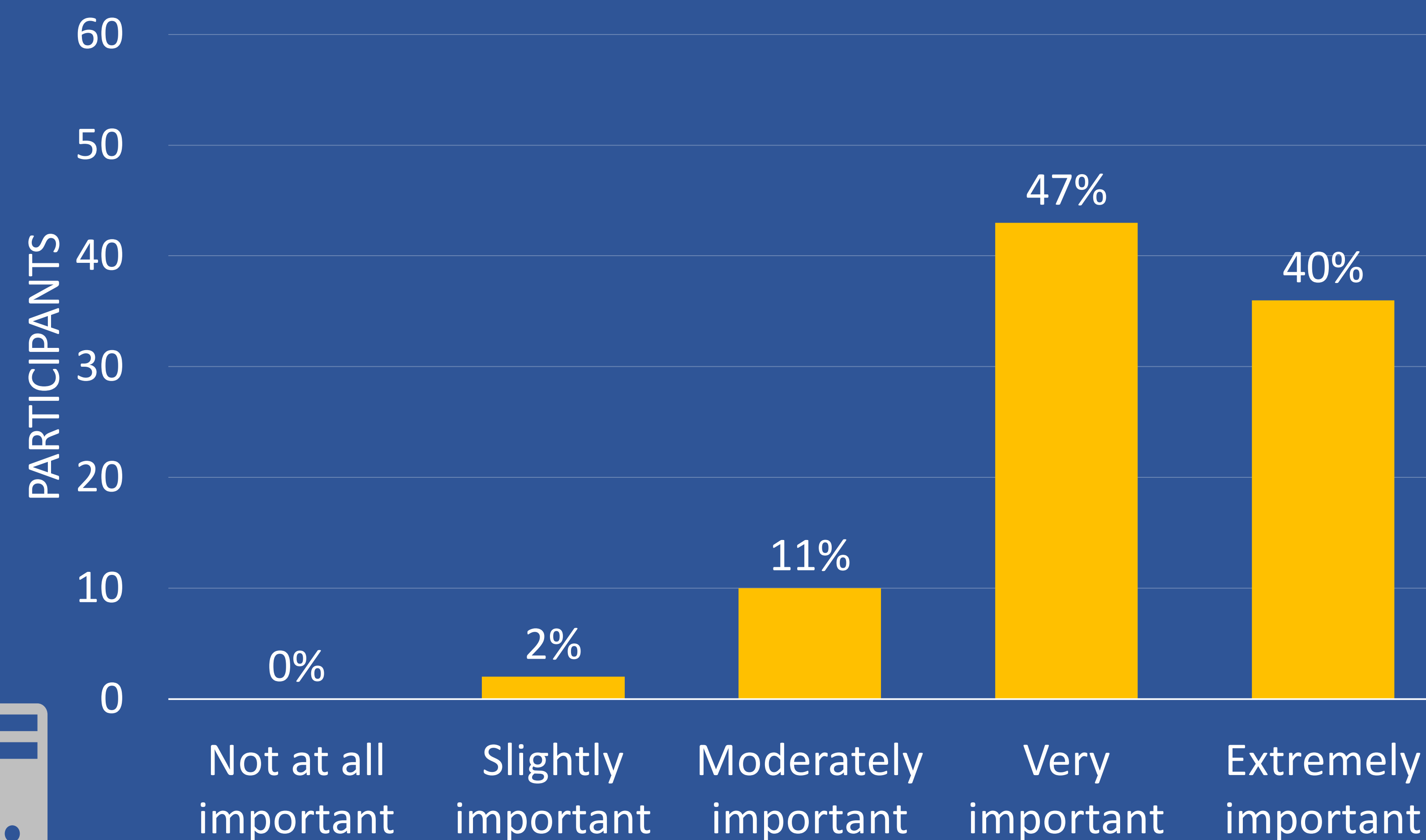
151 US ID Fellowship PDs  
147 PD e-mails sent  
91 PDs responded (62% response rate)

- During March-April 2022, we surveyed US ID fellowship program directors (PDs).
- Using Qualtrics, we created a survey assessing existence of derm curricula and use of external resources. This was piloted by Johns Hopkins fellows and faculty prior to distribution.
- An email was sent with up to two additional reminder emails.
- Descriptive data analysis was performed.
- Study was found to be IRB exempt by the Johns Hopkins Medicine IRB.

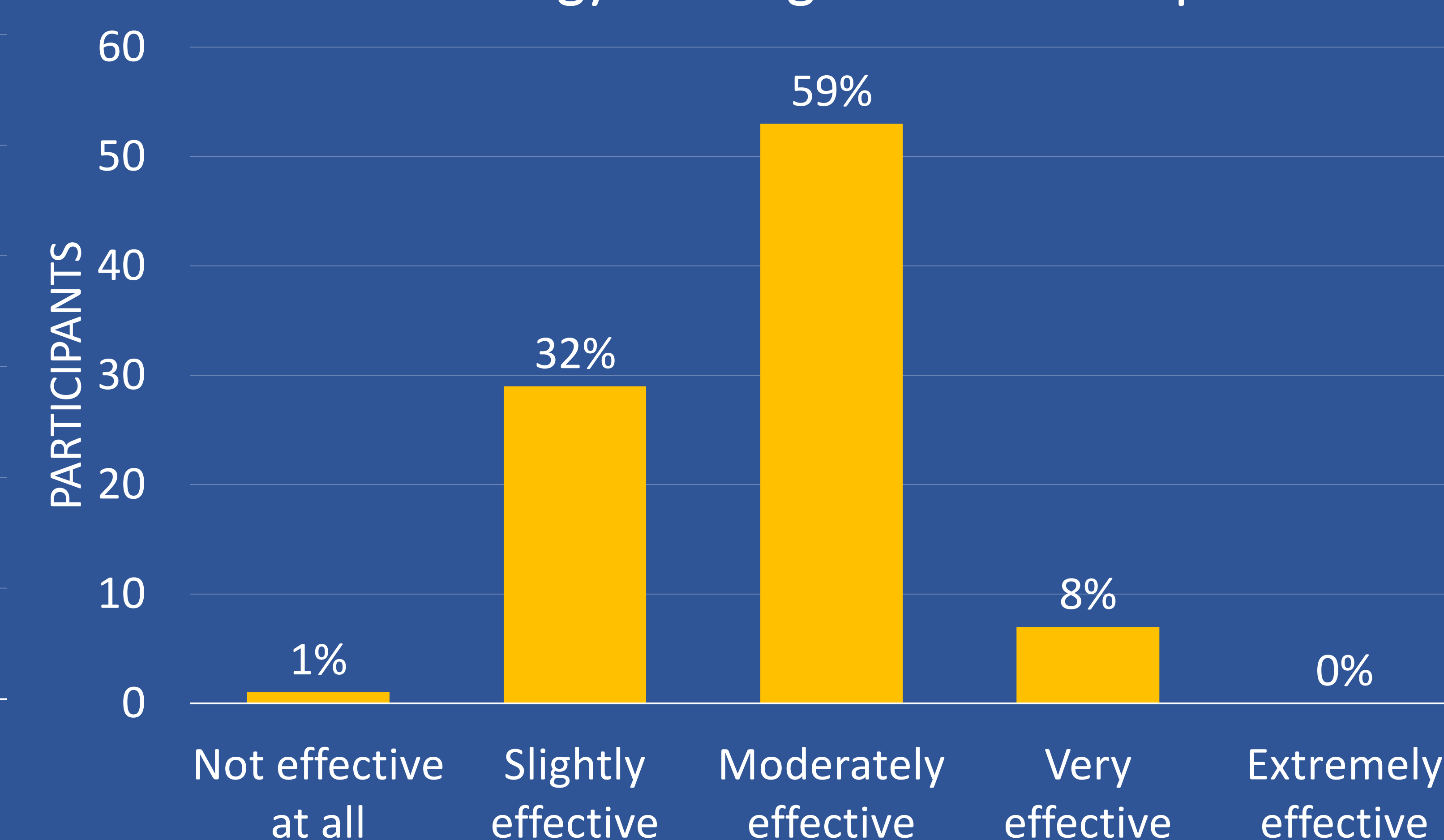
## Results

**Of those who responded, 61% (55/90) of ID fellowship programs do NOT have a formal dermatology curriculum.**

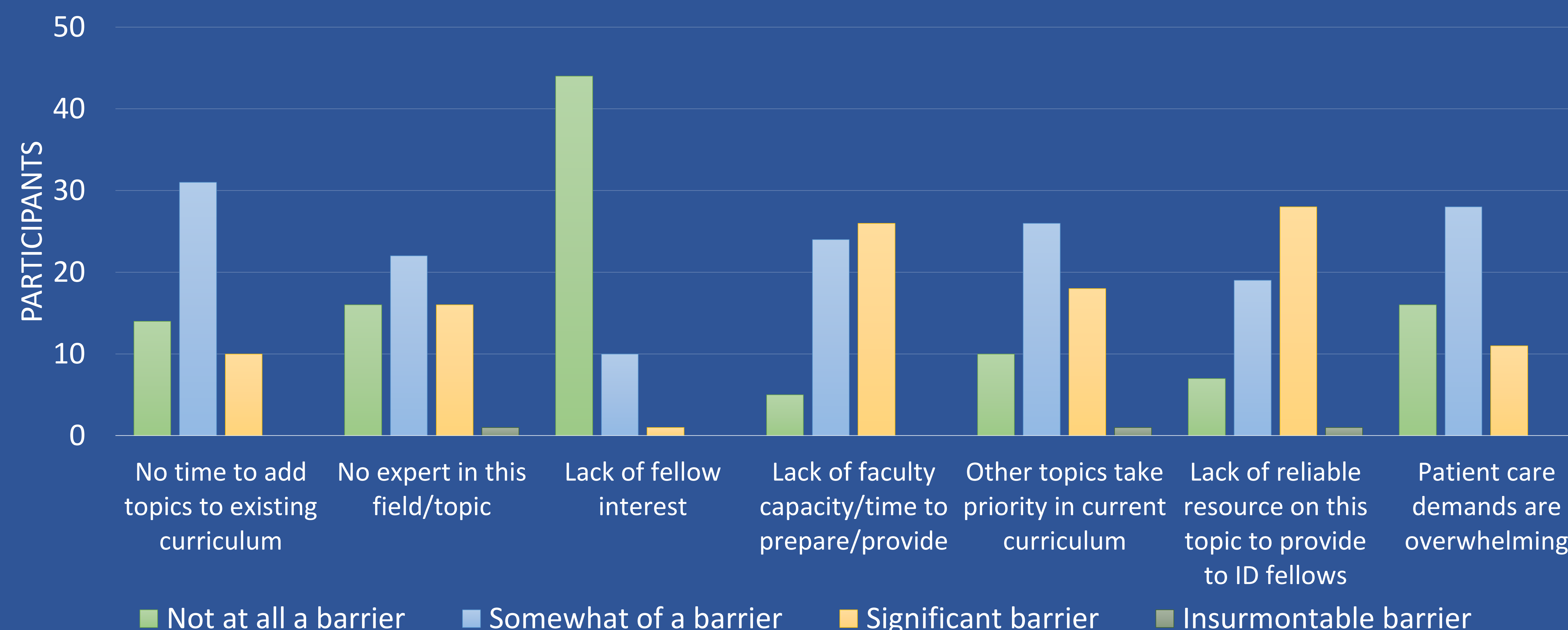
### Program Directors' Thoughts on the Importance of Dermatology Knowledge for ID Fellows



### Program Directors' Thoughts on Effectiveness of Dermatology Training in ID Fellowship



### Obstacles to Implementing a "Dermatology for ID Fellows" Curriculum



### Programs WITHOUT a dermatology curriculum (61%):

- 76% (41/54) would be interested in incorporating an externally produced derm/ID curriculum.
- PDs noted they would prefer a curriculum that contains:
  - Synchronous lectures (81%)
  - Asynchronous content (78%)
  - Flipped classroom guides (72%)
  - Small group discussions (69%)
  - Planned bedside teaching guides (54%)

### Programs WITH a dermatology curriculum (39%):

- 67% (22/33) of PDs felt their fellows found their current dermatology curriculum very-to-extremely valuable.
- Current curricula were largely taught by an ID provider (80%) and/or a dermatologist (57%) with synchronous lecture (94%) being the most used educational technique.
- 73% (24/33) of the dermatology curricula were taught only once or twice a year.

### Externally produced curriculum usage:

- 47/87 (54%) of programs do not currently use any externally produced curricula.
- Among others, IDSA Antimicrobial Stewardship curriculum, UW National HIV curriculum, and board review courses were examples of external curriculum used.
- The most-commonly selected barriers to incorporating external curricula were lack of awareness of available resources, cost, or lack of resource on topics of interest.

## Conclusion

- Dermatologic manifestations of infections is an educational gap in ID fellowship training.
- Based upon these data, we plan to create a "Dermatology for the ID Fellow" curriculum.

**Current ID fellowship education often does not include effective dermatology-ID training despite the perceived importance of this topic and few "insurmountable" barriers.**



## References

1. Cahn BA, Harper HE, Halverstam CP, Lipoff JB. Current Status of Dermatologic Education in US Medical Schools. JAMA Dermatol. 2020;156(4):468-470. doi:10.1001/jamadermatol.2020.0006.
2. McCarthy GM, Lamb GC, Russell TJ, Young MJ. Primary care-based dermatology practice: internists need more training. J Gen Intern Med. 1991 Jan-Feb;6(1):52-6. doi: 10.1007/BF02599393. PMID: 1999747.