I. Course Description:
This is a 2-weeks full time rotation in Dermatology. During this course medical students are introduced to general Dermatology with emphasis on performing dermatological history and examination using dermatological descriptive terms. In addition students are exposed to various clinical cases during clinics at King Abdullah University Hospital and dermatology clinics at Royal Medical Services and Ministry of Health. Common topics are also emphasized on by seminar discussions done on daily basis during the 2 weeks in dermatology.

II. General Objectives:
1. Students should know the basic Anatomy, physiology and function of various skin structures, layers and as an Immune organ (skin immune system).
2. Students should become able to do History and dermatological examination using dermatological descriptive terms (primary and secondary lesions).
3. Students should become familiar with Bed-side diagnostic tools used in dermatology that can help in narrowing or reaching definitive diagnosis for various Dermatoses.
4. Students are expected to know clinical presentations, complications, diagnostic workup for common Dermatoses. (see outline and seminar list).
5. Students are expected to know basic principles about managing common dermatological disorders. (see outline and seminar list)

III. Teaching Methods:
1. Clinical sessions:
Students are rotated during their 2 weeks in Dermatology to various clinics at King Abdullah University Hospital and 2 other community hospitals. Dermatology clinics tend to be very busy and during these sessions students are exposed to many patients with various dermatological problems. During clinics emphasis is directed at teaching students how to obtain History and do proper dermatological examination for patients with various Dermatoses. Also students get to see various Bed-side diagnostic tools (Wood's Light, Diascopy, KOH…) being used and they should become familiar with using these diagnostic aids themselves and know how to interpret them and use that towards reaching final
diagnosis. Discussion towards differential diagnosis, diagnostic workup and then principles of management is also done bed-side for especially the common Dermatoses.

2. **Seminars:**

   Focused on common skin diseases as shown in seminar topics. The students will be responsible for most of the discussion and presentation of previously selected clinical cases that represent the most important parts of each seminar topic. The clinical cases are selected in way that reflects the common presentations for common dermatological disorders and students are expected to learn clinical picture, diagnostic tests and principles of managing these cases. A facilitator (consultant or resident) is only coordinating the discussions and making sure that the students are adherent to the relevant seminar topic areas. The topics covered are pre-decided on by course teachers and cover the main areas students are expected to know during the course. General aspects of management appropriate to student's level is also discussed.

3. **Home works:**

   Each student will be required to do a case study on one clinical case each week. This will include complete history, proper dermatological examination, diagnostic workup done and treatment. The student should give some discussion of the relevant diagnosis and its management and complications of that condition and also complications of treatments used for that condition.

IV. **Detailed Course Description and Specific Objectives for each Topic:**

   Topics that will be covered include:

   1. **Structure, function, history, dermatological examination and approach to dermatological patients:**
      
      a. Students are expected to know basic skin structure including various skin layers and additional structures present within skin.
      
      b. Functions of various structures should also be known.
      
      c. The students are introduced to dermatological history and examination using the proper dermatological descriptive terms and how to produce a differential diagnosis in accordance with history and examination findings.
      
      d. Also the use of various bed-side diagnostic aids is also introduced and students should become familiar with these tests during the clinical sessions especially using Wood's light, KOH test, Diascopy, Patch Test, Tzanck smear.

   2. **Approach to patients with Red Non–scaly rash.**
      
      a. Students are introduced to the common conditions that present with redness without scales including: reactive erythemas (Erythema multiforme, Erythema Nodosum and Urticaria), vasculitis, drugs and common infections associated with a rash.
      
      b. Common clinical presentations and complications related to these conditions should be also understood by students.
      
      c. Diagnostic workup and management for various conditions in this group.

   3. **Approach to patients with Red Scaly Rashes (Papulosquamous conditions):**
      
      Students should know:
      
      a. What is a scale and the importance of finding scales on a rash.
      
      
      c. Main clinical presentations for various scaly Dermatoses.
      
      d. Diagnostic workup for scaly Dermatoses
      
      e. Main complications
      
      f. Principles of management.
4. Infections:
   a. Normal flora and related clinical problems to skin flora.
   b. Staphylococcal infections: Impetigo, Ecthyma, folliculitis, boils and recurrent staphylococcal infections.
   c. Streptococcal infections: cellulitis/erysipelas.
   d. Viral infections: Human papilloma virus (warts) and Herpes virus (1, 2, and 3).

5. Approach to patients with Generalised Pruritus/Itch:
   a. Common dermatological caused: Scabies and Lice. Other dermatological conditions associated with rash (e.g.: Eczema, Psoriasis, Urticaria…) or dermatological causes not associated with rash (neurodermatitis, senile, dry skin..)
   b. Non-Dermatological conditions: especially underlying medical conditions known to be associated with pruritus e.g: chronic liver disease, Renal failure, Lymphomas, Leukemias, anemia, Thyroid dysfunction.

6. Approach to patients with Pigmentary change: Hyper and Hypopigmentation: students should know the following:
   a. Differential diagnoses for diseases causing pigmentary changes.
   b. Clinical presentation for common causes of pigmentary change including hyper and hypopigmentation.
   c. Complications related to such conditions and treatments used in their management.
   d. Principles of therapy

7. Bullous Disorders:
   b. Pathogenesis
   c. Clinical picture
   d. Complications
   e. Principles of therapy

8. Approach to patients with hair, nail diseases:
   a. Patients with diffuse hair loss: causes, diagnosis, principles of management.
   c. Patients with nail problems: emphasis on common disorders including: Psoriasis, Lichen planus, Onychomycosis.

9. Acne and Rosacea:
   a. Pathogenesis
   b. Clinical picture
   c. Complications
   d. Principles of therapy

V. Weekly Teaching Program:
   A typical weekly program will be as follows:

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<tr>
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<th>Dermatology clinic</th>
<th>Seminar</th>
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VI. Evaluation:
- **In-course evaluation** considering: attendance, attitude, clinical sessions, group discussions (20%)
- **End course clinical examination.** (40%)  
- **Final written exam.** (40%)

VII. Recommended References:
- Clinical Dermatology, 4th edition by HUNTER, SAVIN and DAHL.
- Web sites:
  - [www.bad.org.uk](http://www.bad.org.uk)
  - [www.aad.org](http://www.aad.org)
  - [www.dermnetz.org](http://www.dermnetz.org)
  - [http://tray.dermatology.uiowa.edu](http://tray.dermatology.uiowa.edu)
  - [http://dermatlas.med.jhmi.edu](http://dermatlas.med.jhmi.edu)

### Dermatology Seminars

1. **Introduction to clinical Dermatology: Basic skin structure, Dermatology History and Examination:**
   a. Students should become familiar with skin structure and function of each skin component
   b. Student should learn how to obtain proper dermatology history
   c. Students should know how to perform dermatological examination and become able to describe various types of lesions and rashes using dermatologic terms

2. **Approach to patients with Red non-scaly rashes:**
   a. students should become familiar with various disorders that present with common red non-scaly rashes including: Urticaria, erythema multiforme, erythema nodosum and vasculitis
   b. to know the important diagnostic investigations required for patients with above dermatoses
   c. To know basic therapeutic options for treatment of patients with erythemas

3. **Approach to patients with Red scaly rashes:**
   a. To know common dermatoses that are scaly including: Psoriasis, Eczema, Fungal infections, Lichen planus and pityriasis Rosea and how to arrange differential diagnosis for such patients based on history and examination
   b. Students know clinical presentation for patients with scaly rashes and what investigations required to reach definitive diagnosis
   c. Students should become aware of basic management principles for patients with scaly rashes and what common complications they might develop

4. **Approach to patients with skin infections:**
   a. Students should know clinical presentation, complications and treatments used for patients with common bacterial infections especially Staphylococcus aerues and Streptococci (Erysipelas)
   b. Students should know clinical presentation, complications and treatment options for patients with common viral infections of skin especially: viral warts, Herpes virus
   c. Students should know clinical presentation, complications and treatments used for patients with fungal infections including Tinea: capitis, corporis, cruris, pedis and onychomycosis.
5. **Approach to patients with color change (Hyper and Hypopigmentation):**
   a. To know various causes of pigmentary change and the clinical presentation
   b. To be able to perform diagnostic workup for patients with pigmentary change to reach likely diagnosis
   c. To know principles of therapy for patients with pigmentary change

6. **acne and Rosacea:**
   a. To know the clinical presentation of both acne and rosacea and to identify clinically the severity grading
   b. To know the important complications related to both acne and rosacea including scarring and ocular complications
   c. Students should know the basic treatment principles for these conditions and the important complications related to these treatments.

7. **Approach to patients with Bullae:**
   a. Students should know common diseases that present with bullae and their clinical presentations
   b. To be able to perform needed investigations to reach diagnosis
   c. What complications related to these disorders and their treatments

8. **Approach to patients with hair loss:**
   a. To become able to identify various causes for hair loss
   b. To be able to recognize various types of hair loss including generalized, localized, scarring and non-scarring hair loss
   c. To know how to investigate patients with hair loss and to know principles of treatment for various causes

9. **Approach to patients with Generalized pruritus:**
   a. Students should understand various causes for generalized pruritus including dermatological and underlying medical causes. Emphasis given to common dermatoses causing pruritus especially scabies and lice
   b. To understand the management plan for patients with pruritus with emphasis on scabies and lice