

Santa Barbara Dermatology Meeting 2018 4/20-22/2018

This activity was created to address the professional practice gaps listed below:

- Utilizing the new treatments and approaches to common dermatologic diseases.
- Applying new evidence for emerging theories on the pathophysiologies of various types of psoriasis.
- Identifying and prescribing newer biologics for complex dermatologic disorders.
- Recognizing the benefits of emerging treatments such as retinoids, antibiotic/immunomodulatory agents, combination agents, and laser/light techniques for acne and rosacea.
- Recognizing and treating melanoma and other skin cancers early enough.
- Identifying the benefits and limitations of surgical and nonsurgical techniques as well as topical treatment options for aesthetic dermatology.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree		Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [38-3.92]	(0)	(0)	(3) 7.89%	(35) 92.11%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [38-3.87]	(0)	(0)	(5) 13.16%	(33) 86.84%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [38-3.89]	(0)	(1) 2.63%	(2) 5.26%	(35) 92.11%

2. Please elaborate on your previous answers. (25)

Aware of new treatment monoclonal antibodies against PD1

This education allowed for new perspectives based on real trial and error thru the speakers, so I found this information to be very valuable.

brought me up to date regarding available options for treatment and diagnosis.

great tips on systemic treatments for psoriasis and also common problems explained

great speakers I have learned large amount of information in the area of dermatology

n/a

speakers emphasized new and practical information

improved diagnostic techniques for cancer

There were diagnostic and therapeutic tools that I learned about which will change the way I practice.

NO additional comments

DERMPATH AND FILLER SKILLS

mostly validating performance

Excellent Scientific Program

I will be changing many of my treatment regimens including scabies and itchy skin in the elderly

I will be able to better select appropriate therapies for my patient's.

Especially in the aesthetic arena, my injection technique will identify high risk areas prior to injection.

already implementing the practice gaps addressed- good reminders of best practices.

Learned something useful in each talk

Excellence in all

New treatments for rosacea. Botox for post herpetic neuralgia

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Michael Heffernan, MD [37-3.92]	(0)	(0)	(3) 8.11%	(34) 91.89%
Roberta Sengelmann, MD [38-3.89]	(0)	(0)	(4) 10.53%	(34) 89.47%
Kurt Lundquist, MD [37-3.86]	(0)	(0)	(5) 13.51%	(32) 86.49%
Mark Jackson, MD [38-3.84]	(0)	(0)	(6) 15.79%	(32) 84.21%
Bruce Ragsdale, MD [31-3.84]	(0)	(0)	(5) 16.13%	(26) 83.87%
Lynn Cornelius, MD [38-3.79]	(0)	(0)	(8) 21.05%	(30) 78.95%
Mark Rubin, MD [33-3.79]	(0)	(0)	(7) 21.21%	(26) 78.79%
Suzanne Kilmer, MD [36-3.86]	(0)	(0)	(5) 13.89%	(31) 86.11%
Ron Moy, MD [32-3.78]	(0)	(0)	(7) 21.88%	(25) 78.13%
Richard Bennett, MD [37-3.76]	(0)	(1) 2.70%	(7) 18.92%	(29) 78.38%
Tim Berger, MD [37-3.81]	(0)	(0)	(7) 18.92%	(30) 81.08%
Neal Bhatia, MD [37-3.70]	(0)	(1) 2.70%	(9) 24.32%	(27) 72.97%
Jeff Herten, MD [38-3.76]	(0)	(0)	(9) 23.68%	(29) 76.32%
Christine Kilcline, MD [37-3.73]	(0)	(1) 2.70%	(8) 21.62%	(28) 75.68%
Paul Rehder, MD [38-3.79]	(0)	(0)	(8) 21.05%	(30) 78.95%

Mark Burnette, MD [37-3.86]	(0)	(0)	(5) 13.51%	(32) 86.49%
Andrew Kaufman, MD [37-3.78]	(0)	(1) 2.70%	(6) 16.22%	(30) 81.08%
Joe Diehl, MD [36-3.72]	(1) 2.78%	(0)	(7) 19.44%	(28) 77.78%

4. Please elaborate on your previous answers. (28)

All well informed

All of the speakers brought something special.

The group of speakers were excellent, a diverse group of physicians speakers were knowledgeable and engaging.

i had trouble understanding neal and Joe

all excellent, greatconference

great speakers

n/a

they were all prepared

Great Conference

All very clear, concise and not rushed--enough time allotted for subject coverage and Q and A

There were a few excellent talks - the ones labeled as good either weren't as organized (but still great speakers) or they weren't as applicable to my practice.

No additional comments

OVERALL EXCELLENT

top notch

All delivered well without bias

The lectures were very practical. Excellent

I thought every speaker was wonderful and had a lot to offer.

All were great at delivering new an concise information.

good presentations by competent physicians.

I found Dr. Berger's topics very helpful. I did not think that I got a great sense of how to perform the flaps discussed by Dr. Bennett. Please bring Dr. Burnette back next year, his was the very best talk of the group.

Some had difficulty understanding

Excellence in all

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (31)

New protocols for melanoma

no ice before botox

Will need to review notes again before answering this question.

Will review syllabus and determine.

I will treat rosacea differently, and I have gained a better understanding of which biologics may be better and/or appropriate based on individual patient histories in the treatment of psoriasis. Also, I am now very interested in taking a dermatoscope class and possibly incorporating this tool into my practice.

more knowledge on prescriptions we already prescribed, bringing this back to my practice increased awareness. retired so no direct implementation

treating red scrotum as rosacea

learn dermatoscopy and implement into practice

Diluting HA fillers prior to injecting

approach to psoriasis treatment

new protocols for skin cancer screening improved reconstruction options

Will change my diagnostic algorithm for a few symptoms/signs; will implement different treatments for specific diagnoses discussed.

Use Dupilumab in the treatment of atopic dermatitis.

MORE BOTOX AND FILLERS

P.N., senile pruritus, pruritus ani

Novel uses of botulinum toxin

I will use both ivermectin and permethrin in each scabies patient. I will use Dupilumab For eczema

If better insurance, I will treat rosacea patients differently. I would also like to take a dermatoscope class, which may allow me to have one to use for my practice.

Adding Mohs as treatment options for MM.

P.N., senile pruritus, pruritus ani

reinforced existing protocols as effective.

I finally feel comfortable with an algorithm for many of the difficult presentations discussed by Dr. Berger.

Better understanding of disease dx and rx.

Understanding more about biologics

I will follow new algorithms for evaluation of pruritus ani and prurigo nodularis

new protocols

6. How certain are you that you will implement this change?

(30)

Very Certain ⁽¹⁸⁻
60.00%)

Certain ⁽⁹⁻
30.00%)

N/A ⁽²⁻
6.67%)

Maybe ⁽¹⁻
3.33%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (31)

Dermatopathology

Superficial radiation therapy

Dermoscopy cases were good, I would like to see more cases. Esp NMMM, dysplastic nevi. There were some presented and well done. Maybe a self quiz of 100 of them. Would take more time, but useful.

dermoscopy; case studies.

Because I am a NP, some of the presented information is not directly applicable to my daily practice, however, I feel that it is better to have some type of understanding of what goes on beyond a patient's interaction with me. I would love to briefly hear more about the identification and diagnosis of autoimmune diseases.

more interesting cases and therapeutic approaches

loved the new approaches to common conditions

dermatology certifications off label use of neurotoxins

Practice management

alopecia, hives, lupus,

psoriasis and pediatric derm

practice management and managed care: how to prepare for changes in physician reimbursement models

Medical derm

New biologicals for psoriasis

INFESTATIONS/STDS/TROPICAL DISEASES

end of life treatment of skin cancer

Similar distribution of topics within dermatology including practice management, burnout, and other issues affecting the specialty.

More derm skin diagnoses.

Pediatric and Women's derm.

billing. closures and complications

no advice on additional topics.

More on the use of biologics in terms of how to start each one, rather than a cursory general overview of all.

Less about psoriasis

The aspect of physician healing vs the physician scientist. What role does creativity play in being a physician.

Melanoma, new cosmetic devices

hair and nail conditions

8. Were the patient recommendations based on acceptable practices in medicine?

(34)

Yes ⁽³⁴⁻
100.00%)

9. If you answered No on the question above, please explain which recommendation(s) were not based on acceptable practices in medicine? (2)

N/A

NA

10. Do you think the presentation was without commercial bias?

(34)

Yes (32-
94.12%)

No (2-
5.88%)

11. If you answered No on the above question, please list the topics that were biased? (2)

N/A

NA

12. Please provide any additional comments you may have about this educational activity. (14)

I find presentation of difficult cases important (diagnoses, treatment, outcome). I like that the speaker asks a poll of what others in the audience have seen and treated similar cases. I am so thankful that almost everything was on a hardcopy paper booklet. Thank you for that. It makes it easier for me to refer to later. (although some of them are with very small writing and I will probably need to use my readers and a second magnifier). I am glad the power point presentations were very complete so I did not have to add much to them. Thank you for that as well.

Great course content. Would definitely recommend. Love the printed syllabus. Power points were very complete, glad to not to have to add too many notes.

information packed event

great first conference, will be coming again

great educational experience

Excellent meeting

It was an excellent setting for learning in a relaxed atmosphere

Truly outstanding mix of topics and speakers. Every subject useful

I hope that there are pediatric studies ongoing regarding the use of Dupixumab and that they will be presented at future conferences.

I SHALL ATTEND THIS MEETING AGAIN

Great Derm Convention!

slow the pace down

good presentations and felt the educational activity was worth the time invested.

Well presented and great information.

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

This evaluation is confidential and no individual will be identified by this office (Continuing Medical Education and Professional Development). It will only be used for quality improvement.

We look forward to seeing you at future University of Louisville events. Thank you very much.
