



Outcomes Survey

Winter Skin Seminar 2016 Outcomes Survey

1. Please rate the following aspects of this activity.

(1=Strongly Disagree, 2=Disagree, 3=Undecided, 4=Agree, 5-Strongly Agree, 6=N/A)

	Strongly Disagree					N/A
Attending this activity improved my competence. [47-4.21]	(5) 10.64%	(1) 2.13%	(2) 4.26%	(10) 21.28%	(29) 61.70%	(0)
Attending this activity improved my performance. [47-4.06]	(5) 10.64%	(2) 4.26%	(3) 6.38%	(12) 25.53%	(25) 53.19%	(0)
What I learned from this activity has helped me improve my patient outcomes. [47-4.23]	(4) 8.51%	(1) 2.13%	(5) 10.64%	(8) 17.02%	(28) 59.57%	(1) 2.13%

2. If this activity improved your competence, please tell us how. (29)

change how I use imiquimod for lentigo maligna

The speaker variety was incredible, and the clinical pearls were invaluable.

Better care for patient's with a variety of different dermatological conditions. IE most up-to-date way to treat derm conditions.

I will be changing the way that I treat Melanoma in situ.

I feel better about prescribing certain treatments after hearing thought leaders recommending similar treatments.

Greater detail on medical and surgical management

Better use of lab monitoring

na

improved ability to diagnose and treat conditions in pediatric patients improved ability to diagnose and treat vascular conditions

More knowledgeable about HIV dermatology, hyperhidrosis, oral aphthi, new psoriasis meds, gluten and the skin

Learned new information about cidofovir for warts.

Made me think about some new issues.

My treatment regime for hyperhidrosis has vastly expanded, as well as my screening for celiac disease and DH.

Improved knowledge

Better recognition and treatment of atopic dermatitis. Better biopsy technique for

pigmented lesions.

Side effects of new drugs.

Better at diagnosing oral pathology

The activity updated my knowledge about the treatment of pediatric eczema and biologics for psoriasis, and my comfort level and knowledge with dapsone. All things applicable for my practice.

Provided up to date patient care/management

Helped me to identify some "blind spots" in my performing biopsies

Better recognition of eczema

Many good clinical topics with relevant information

Learned about nicotinamide supplementation for skin disease.

better insight

I was particularly interested in lab monitoring for isotretinoin and it's good to know the data and how other providers are following that.

Yes

understanding dx, tx, and response and testing for celiac disease

Updated knowledge

less lab tests needed with some systemic drugs. new ways of treating hyperhidrosis. natural methods for photoprotection.pitfalls to avoid when diagnosing lentigo maligna

3. If this activity improved your performance, please tell us how. (24)

decrease the laboratory monitoring for accutane

I will definitely use some of the tips from the speakers in my daily practice.

Changed the way I treat AKS.

I will now be checking weekly CBC's on my patients on Cellcept in the first month

Broadened differential diagnosis and management decisions

na

improved advice for skin cancer prevention. improved ability to distinguish vasculitis from vasculopathy

More cost-effective ordering of lab tests

Attention o details of lab tests that I may not have thought about.

I've changed my biopsy tendencies for both vasculitis and DH, picking better lesions to sample.

Learned about new techniques which can be used in clinical practice

Better recognition and treatment of atopic dermatitis. Better biopsy technique for pigmented lesions.

Evaluation and treatment of patients with sarcoid

Doing biopsy correctly for Vasculitis

The activity updated my knowledge about the treatment of pediatric eczema and biologics for psoriasis, and my comfort level and knowledge with dapsone. All things applicable for my practice.

Made me more aware of newer treatment options

Better biopsy sampling in cases of suspected vasculitis

I will make changes to some of my treatments based on the conference information.

Am using the product above.

accurate dx.

I learned info on biologics and newer meds that will enable me to use them more safely and effectively

Yes

managing / dx DH

see answers to #2

4. Discuss how your Patient Outcomes (omit patient names) have improved as a result of attending this activity. (25)

use of injected cidovir to decrease verruca in immunocompromised pt

I have just implemented new ways to treat AKs and have not seen patients back for follow up, but I anticipate good results!

I have a patient on chronic dapsone therapy. He did not have to get bloodwork on his last visit

Just learning a few pearls like less lab necessary with Accutane and spironolactone.

More aggressively manage severe atopic dermatitis in peds

na

better treatment of actinic keratosis

Patient safety issues related to hygiene. Less frequent monitoring blood tests.

Have identified patients that will benefit from cidofovir intralesional.

Too early to tell

I was able to have a vasculitis patient diagnosed and treated in a timely fashion.

Changed my management plan for a patient with an oral cavity lesion based on lecture attended on pigmented lesions of the oral cavity

See 2 & 3. Also, decreased lab monitoring for pts on isotretinoin leads to less false positive lab results and potentially less follow up testing and possible morbidity

Using Dexamethasone elixir for oral aphthae

I think this is too early to assess. I am not sure if my patient outcomes have changed yet.

Broadened my differential diagnosis

Improved treatment of hyperhidrosis

More accurate biopsy sampling

Change monitoring of labs during isotretinoin treatment. New option for hyperhidrosis treatment in children.

Will take some months to assess the results.

keen dx.

I don't think there has been time to address this

Yes

stopping antibiotics on acne patients - further encouraging - decrease resistance issues and health of microbiome

have used vismodegib in a patient with Gorlins syndrome to reduce the size of a large Bcc on his left cheek to prevent large scar when excised.

5. Identify practice changes you have made as a result of attending this activity. (28)

changed frequency of Accutane monitoring

Having my nurses call patients more frequently to check in to increase patient satisfaction and communication.

Fewer labs on patients on dapsone and isotretinoin

ditto

Have begun monitoring the number of wound infections in the entire clinic and have institute a hand sanitizer use program.

I order anti TTG3 and not the other serologies for celiac now

Lentigo Maligna surgical protocol. In discussion with our Mohs surgeon to use the protocol discussed at the WSS

See above

Fewer lab studies for patients on Spironolactone and isotretinoin

na

better adapted to treat pediatric patients

Less frequent ordering of labs for isotretinoin patients

Treatment of hyperhidrosis

Treatment protocol for Atopic dermatitis has changed, encompassing a broader arsenal of medications and emollients. I've also started a few pts on Stelara and Cosentyx for their psoriasis.

Decreased lab monitoring in isotretinoin pts.

Ordering lab tests

More specific lab testing and not over testing/ordering

Now limit lab testing in patients on isotretinoin

More accurate biopsy sampling,

Better understanding of compliance as a problem with therapy. More questions directed to this topic

Obtained gloves and eye protection for office staff when they are handling liquid nitrogen.

Am now using nicotinamide supplementation in my patients with numerous actinic keratoses and SCC's.

I am using ditropan instead of glycopyrrolate as first line for hyperhidrosis

Not much

discontinuing oral antibiotics, referral for Miradry more, more likely to check DIF for DH

More attention to detail.

ordering fewer blood tests now. educating patients on natural methods of

photoprotection

6. What topics do you want to hear more about, and what issue(s) in your practice will this help address? (25)

medical management of complex dermatologic conditions

bullous disease, lupus, contact dermatitis

treatment of warts and viral diseases

More practical general information. It seems like Biologics and lasers have been the heavy hitters in many recent programs and this is less than 1% of my practice.

rapamycin and port wine stains; amino acids and dermatitis herpetiformis

cancer stem cells

psoriasis, viral infections

Updates in pediatric dermatology are always good.

Current selection process is fine.

Surgery for the general dermatologist

Lupus, MF, Dermatographism

Pigmented lesions (always); effective acne treatments beyond antibiotics; great teaching cases.

More medical dermatology

Have an Allergist or Rheumatologist guest lecture since they have more interface with Dermatology The

Psoriasis and the newer biological meds

Tropical disease and their derm manifestations

Continue excellent selection of a variety of topics.

Would like to hear on all general dermatology topics that with the latest journal data that will likely improve patient outcomes.

I like the basic topics that were covered this year.

General derm, cosmetics, surgical, billing

hidradenitis suppurativa

Love hearing about new treatments

skin lymphomas. drug eruptions and how to approach patient on 10-15 meds.

more surgical dermatology

new melanoma treatments and their side effects

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.