Competencies Required for all Rotations

Patient Care

- Assess and manage the patient’s general medical status.
- Prevent, diagnose, and manage diseases, disorders, and injuries of the pediatric and adult lower extremity.
- Demonstrate ability to formulate a methodical and comprehensive treatment plan with appreciation of healthcare costs.
- Practice and abide by the principles of informed consent.

Interpersonal and Communication Skills

- Communicate effectively in a multi-disciplinary setting.
- Demonstrate accurate charting, dictation and record keeping.

Medical Knowledge

- Demonstrate continued self-study & regular literature review.
- Demonstrate knowledge of anatomy, physiology, pathology in each core curricular area.
- Demonstrate an understanding of the psychosocial and healthcare needs for patients in all life stages: pediatric through geriatric.

Professionalism

- Practice with professionalism, compassion, and concern in a legal, ethical, and moral fashion.
- Abide by state and federal laws, including the Health Insurance Portability and Accountability Act (HIPAA),
- Governing the practice of podiatric medicine and surgery.
- Demonstrate sensitivity and responsiveness to cultural values, behaviors, and preferences of one’s patients when providing care to persons whose race, ethnicity, nation of origin, religion, gender and/or sexual orientation is/are different from one’s own.
- Accept criticism constructively.
- Demonstrate professional humanistic qualities.
- Demonstrate professional appearance.
- Demonstrate pattern of punctuality and reliability in performance of his/her duties.
Practice Based Learning

- Be professionally inquisitive, life-long learners and teachers utilizing research, scholarly activity, and information technologies to enhance professional knowledge and clinical practice.
- Demonstrate familiarity with utilization management and quality improvement
- Demonstrate an understanding of public health concepts, health promotion, and disease prevention

Systems Based Practice

- Manage individuals and populations in a variety of socioeconomic and healthcare settings.
- Understand podiatric practice management in a multitude of healthcare delivery settings.

Specific Rotation Competencies

Rotation: Foot and Ankle

Competencies Specific for Rotation:

Patient Care

- Perform and interpret the findings of a thorough problem-focused history and physical exam on podiatric patients, including problem focused history, and where appropriate vascular, dermatologic, neurologic and musculoskeletal examination.
- Evaluates a patient as to the appropriateness of a surgical procedure, including the problem-focused history and physical, along with review of laboratory and radiologic studies, and performs a biomechanical examination where indicated.
- Assessment of appropriateness of a surgical procedure, including assessment of efficacy and potential complications relating to procedure.
- Demonstrates progressive competency in preoperative, intraoperative, and postoperative assessment and management of podiatric surgical cases.
- Demonstrates progressive development of knowledge, attitude and skills in performance of podiatric procedures by performing as per CPME 320 requirements an appropriate volume and diversity of cases and procedures in the categories of digital surgery, first ray surgery, other soft tissue foot surgery, other osseous foot surgery, and reconstructive rearfoot/ ankle surgery.
Medical Knowledge

- Comprehensive knowledge in the basic principles of podiatric surgery, including suturing techniques, sterile techniques, fixation techniques, instrumentation, proper tissue handling, hemostasis, and operating room protocol.

Practice Based Learning/Systems Based Practice

- Understands and utilizes appropriate hospital protocol including appropriate admission and discharge procedures, maintenance of medical records, and adherence to hospital safety measures.

A. By end of first year the resident is expected to demonstrate basic proficiency in the performance of forefoot surgery and minor procedures of the rearfoot, i.e.:

  a. Soft tissue and nail procedures
  b. Toe surgery
  c. First Ray procedures
  d. Metatarsal procedures
  e. Basic non-reconstructive midfoot-rearfoot procedures
  f. A.O. fixation of the forefoot
  g. Laser surgery
  h. Debridement – wounds & soft-tissue

B. By the end of the second year, the resident is expected to demonstrate increased proficiency in the first year procedures and demonstrate basic proficiency in the performance of more advanced procedures of the rearfoot and ankle including but limited to:

  a. Arthrodesis
  b. Nerve decompressions
  c. Tendon transfer and repair procedures
  d. Osteotomies
  e. Debridement – bone & soft-tissue
  f. Flat foot surgery
  g. Pes cavus surgery
  h. Fracture repair - forefoot
  i. A-0 fixation - rearfoot
C. By the end of the third year, the resident is expected to demonstrate increased proficiency in the performance of first and second year procedures and demonstrate proficiency in the performance of more advanced procedures of the rearfoot and ankle including but not limited to:

a. Arthrodesis – ankle
b. Midfoot and rearfoot fracture repair
c. Ankle fracture repair
d. Ankle arthroscopy
e. Diabetic foot reconstruction
f. Flat foot and cavus foot reconstruction
g. External fixation

**Rotation: Podiatry Office**

Competencies Specific for Rotation:

**Patient Care**

- Perform and interpret the findings of a thorough problem-focused history and physical exam on podiatric patients, including problem focused history, and where appropriate vascular, dermatologic, neurologic and musculoskeletal examination.
- Order and interpret appropriate laboratory studies, including but not limited to: ie hematology, blood chemistries, drug screens, bacteriologic and fungal cultures, urinalysis, serology/immunology, toxicology, coagulation studies, blood gases, synovial fluid analysis.
- Utilize information obtained from the history and physical examination and ancillary studies, after appropriate investigation, observation, and judgment, to arrive at an appropriate differential diagnosis and treatment plan utilizing appropriate consultations and/or referral; and assess treatment plan and revise as necessary.
- Pharmacological management utilizing medications commonly prescribed in podiatric medicine, including proper ordering of, being fully cognitive of indications, dosages, interactions, side effects and anticipated results. (These medications include NSAIDS, antibiotics, antifungals, narcotic analgesics, muscle relaxants, medications for neuropathy, sedative/hypnotics, peripheral vascular agents, anticoagulants, antihyperuricemic, uricosuric agents, tetanus toxoid/immune globulin, laxatives/cathartics, fluid and electrolyte management, corticosteroids, and anti-rheumatic agents).
- Recognize the need for, and the appropriate ordering and interpretation of additional diagnostic studies, including, but not limited to, electrodiagnostic studies, noninvasive vascular studies, bone densitometry studies, compartment pressure studies.
- Provide appropriate lower extremity health promotion and education
- Perform manipulation/mobilization of the foot/ankle joint to increase/reduce associated pain and/or deformity.
• Perform biomechanical evaluations and managing patients with lower extremity disorders utilizing appropriate prosthetics, orthotic devises and footwear
• Fabricate appropriate casts for these devises, or write appropriate referrals to the prosthetist/orthotist.
• Provide appropriate podiatric surgical management when indicated
• Recognize and manage post-operative complications i.e. infections, DVT’s, hematomas, cellulitis, etc.
• Demonstrate appropriate use of local anesthetic agents.
• Perform, where indicated, palliation of keratotic lesions and toenails.
• Manage closed fractures and dislocations including pedal fractures/dislocations, and ankle fracture/dislocation including the use of cast management and tape immobilization as indicated.
• Perform appropriate injections and or aspirations, with knowledge of pharmacology, indications, dosages, potential interactions, & side effects.
• Demonstrate appropriate referral for physical therapy for patients, and ability to monitor and modify the treatment plan as needed.
• Perform biomechanical evaluations and manage patients with lower extremity disorders utilizing appropriate prosthetics, orthotic devices and footwear.

Medical Knowledge

• Knowledge of the indications and contraindications of the use of orthotic devices, bracing, prosthetics, and custom shoe management; (See appendix in CPME 320 for list of procedures).
• Demonstrate knowledge of pharmacology, indications, dosages, potential interactions, & side effects of anesthetics, oral and injectable medications.
• Demonstrate capacity to interpret relevant imaging studies including plain radiography, radiographic contrast studies, stress radiography, fluoroscopy, nuclear medicine imaging, MRI, CT, diagnostic ultrasound, and vascular imaging.

Practice Based Learning and Systems Based Practice

• Demonstrate understanding of healthcare reimbursement.
• Demonstrate understanding of common business practices.
• Understand insurance issues including professional and general liability, disability, workers’ compensation, and the medical-legal considerations involving healthcare delivery.
Rotation: Medicine

Competencies Specific for Rotation:

Patient Care

- Perform and interpret the findings of a comprehensive medical history and physical examination, including:
  - Comprehensive medical history, including chief complaint, history of present illness, social and family history, review of systems.
  - Comprehensive physical examination, including vital signs HEENT, neck, chest/breast, heart, lungs, abdomen, genitourinary, rectal, extremities, neurologic examination.
- Order and interpret appropriate laboratory tests as appropriate, based on presenting medical history and clinical findings.
- Pharmacologic management of patients including the proper ordering of medications, being fully cognitive of indications, dosages, interactions, side effects and anticipated results.
- Recognize the need for, and the appropriate ordering and interpretation of additional diagnostic studies, including EKGs, medical imaging, vascular studies and laboratory studies.
- Interpret and evaluate EKGs.
- Utilize information obtained from the history and physical examination and ancillary studies, after appropriate investigation, observation, and judgment, to arrive at an appropriate differential diagnosis and treatment plan

Medical Knowledge

- Demonstrate knowledge of the pathophysiology and clinical epidemiology of common medical conditions that impact the care of the podiatric patient such as vascular disorders (peripheral, cardiac and cerebrovascular atherosclerotic vessel disease), diabetes mellitus, heart failure, respiratory disorders, gastrointestinal disorders, neurologic disorders.

Interpersonal and Communication Skills

- Demonstrate the capacity to efficiently communicate key medical information to colleagues.

Practice Based Learning and Systems Based Practice

- Demonstrate an understanding of the collaborative role of the podiatrist and other consultants with the inpatient medical team
**Rotation: Rheumatology**

Competencies Specific for Rotation:

- Perform and interpret the findings of a comprehensive medical history and physical examination in the patient with joint complaints.
- Demonstrate the ability to differentiate inflammatory from non-inflammatory articular complaints.
- Order and interpret appropriate laboratory tests for the patient with rheumatologic complaints.
- Demonstrate capacity to differentiate characteristic rheumatologic findings on Xray.
- Utilize information obtained from the history and physical examination and ancillary studies, after appropriate investigation, observation, and judgment, to arrive at an appropriate differential diagnosis and treatment plan.
- Demonstrate appropriate pharmacologic management of patients with rheumatic problems including the proper ordering of medications, being fully cognizant of indications, dosages, interactions, side effects and anticipated results.

**Medical Knowledge**

- Demonstrate knowledge of the pathophysiology and clinical epidemiology of common rheumatic conditions that impact the care of the podiatric patient including osteoarthritis, rheumatoid arthritis, systemic lupus erythematosus, scleroderma, Rayaud’s disease, spondylarthropathies, crystal disease and vasculopathies.

**Interpersonal and Communication Skills**

- Demonstrate the capacity to efficiently communicate key medical information to colleagues.

**Practice Based Learning and Systems Based Practice**

- Demonstrate an understanding of the collaborative role of the podiatrist and rheumatologist.
**Rotation: Infectious Disease**

Competencies Specific for Rotation:

**Patient Care**

- Perform and interpret the findings of a thorough problem-focused history and physical exam on a patient being evaluated for infectious disease, including problem focused history, and where appropriate vascular, neurologic, musculoskeletal and dermatologic examination.
- Order and interpret appropriate laboratory studies, ie. hematology, blood chemistries, cultures, urinalysis, serology/immunology.
- Order and interpret appropriate diagnostic modalities, ie. nuclear medicine imaging, MRT, CT, vascular imaging.

**Medical Knowledge**

- Demonstrate interpret culture and sensitivity results, as well as properly collecting culture specimens.
- Demonstrate knowledge of the performance of bacteriologic testing procedures (i.e. gram stains, cultures), in the bacteriology laboratory.
- Demonstrates knowledge of appropriate choice of antibiotic therapy, both oral and parental, in both the normal and compromised patient, including drug pharmacology, potential interactions with other medications, side effects, and cost factors.

**Practice Based Learning and Systems Based Practice**

- Demonstrates understanding of the collaborative role of the podiatrist along with the infectious disease specialist and other care providers in the optimal management of diabetic and ischemic foot ulcers.
**Rotation: Pathology**

The pathology experience will consist of spending 2 weeks in the Department of Pathology. It will involve observation and/or participation in the activities of the department including but not limited to the performance of microscopic analysis of pathological specimens, bacteriological studies and clinical laboratory studies.

Competencies Specific for Rotation:

**Medical Knowledge**

- Understand the principles & procedures involved in obtaining (i.e. intra-op frozen sections) and preparing specimens for interpretation.
- Obtain knowledge and appreciation of the interpretation of anatomic pathology, with emphasis on the lower extremity.
- Obtain knowledge and appreciation of the interpretation of cellular pathology, with emphasis on the lower extremity.

**Rotation: Radiology**

Provide podiatry residents with a basic level of competence in the identification of key radiographic findings, in areas relevant to their roles within the residency and for their future careers. Residents will also develop an appreciation of the place for more advanced modalities in patient care. Residents should demonstrate an organized, evidence based approach to the choice of radiographic techniques and approach to interpreting radiographs.

Competencies Specific for Rotation:

**Patient Care**

- Understand the utilization of appropriate radiologic tests based on indications, contraindications, cost effectiveness and risk vs. benefit, with particular emphasis on lower extremity pathology.
- Establish a standard pattern and interpretation of radiographs, with particular emphasis on the lower extremity.

**Medical Knowledge**

- Learn the properties of imaging modalities and diagnosis and intervention.
- Understand the side effects and complications of contrast media.

**Practice Based Learning and Systems Based Care**

- Gain appreciation for the cost/benefit of various radiographic procedures utilized in the assessment of lower extremity disorders.
Rotation: Anesthesiology

Competencies Specific for Rotation:

Patient Care

- Demonstrate competence in pre-operative medical risk assessment.
- Demonstrate understanding of the components of peri-operative management.
- Demonstrate, via hands-on direct participation, knowledge of intubation techniques and maintenance of airway.
- Demonstrate knowledge, via hands-on direct participation, of the techniques and appropriate management of general, spinal, epidural, regional and conscious sedation anesthesia.
- Demonstrate proficiency in the performance of local anesthetic blocks of the lower extremity.

Medical Knowledge

- Demonstrate knowledge of the pharmacology of common anesthetic agents, both regional & local, including indications, dosages, potential interactions, and side effects.
- Demonstrate knowledge of the current protocol for pain management, including where indicated use of blocks and therapeutic medication(s).

Rotation: Behavioral Medicine

Competencies specific for rotation:

Patient Care

- Understand the impact of mood and personality disorders on the pain experience and functional capacity. --Demonstrate understanding of the various modalities (pharmacologic and non-pharmacologic) to address such disorders.

Medical Knowledge

- Demonstrate knowledge of the pharmacology of common psychotropic medications, including indications, dosages, potential interactions and side effects

Practice Based Learning and Systems Based Practice

- Demonstrate appreciation of the value of a team approach in the care of patients with pain disorders
Rotation: General Surgery

Competencies Specific for Rotation:

Patient Care

- Perform and interpret the findings of a comprehensive pre-operative medical history and physical examination, including where appropriate:
  - Comprehensive medical history. Including chief complaint, review of systems history of present illness, social and family history.
  - Comprehensive physical examination, including vital signs and physical examination including: HEENT, neck, chest/breast, heart, lungs, abdomen, genitourinary, rectal, extremities, and neurologic examination.
- Perform and interpret the findings of a thorough problem-focused history and physical exam on general surgical patients including problem focused history.
- Recognize the need for, and the appropriate ordering and interpretation of additional diagnostic studies, including EKGS, medical imaging, and laboratory studies.
- Demonstrate appropriate pharmacologic management of surgical patients including the proper ordering of medications, being fully cognitive of indications, dosages, interactions, side effects and anticipated results.
- Demonstrate proficiency in principles of surgery, including suturing techniques, traumatic tissue handling, and instrumentation, especially as it pertains to general surgery.
- Demonstrate understanding of perioperative management including fluid and electrolyte balance, pain management and blood and/or component therapy.

Medical Knowledge

- Demonstrate knowledge of the indications and contraindications for common general surgical procedure.
- Demonstrate knowledge of the pathophysiology and clinical epidemiology of common medical conditions that impact the care of the surgical patient such as vascular disorders (peripheral, cardiac and cerebrovascular atherosclerotic vessel disease), diabetes mellitus, heart failure, respiratory disorders, gastrointestinal disorders, neurologic disorders.

Interpersonal and Communication Skills

- Demonstrate the capacity to efficiently communicate key medical information to colleagues.

Practice Based Learning and Systems Based Practice

- Demonstrate an understanding of the collaborative role of the health care team in the perioperative care, including nurse, social worker, case manager, etc.
- Demonstrate understanding of the role of protocols and care maps in the efficient care of the surgical patient.
**Rotation: Emergency Medicine**

Competencies Specific for Rotation:

**Patient Care**

- Recognize and be able to assist in the care of acute systemic emergencies (ie cardiac arrest, diabetic coma, insulin reactions, etc.).
- Demonstrate capacity to perform and interpret the findings of a comprehensive medical history and physical examination of the emergency room patient, including:
  - Comprehensive medical history. Including chief complaint, review of systems history of present illness, social and family history.
  - Comprehensive physical examination, including vital signs and physical examination including: HEENT, neck, chest/breast, heart, lungs, abdomen, genitourinary, rectal, extremities, neurologic examination.
- Demonstrate capacity to evaluate common emergencies with emphasis on the lower extremity, (ie ankle sprains, dirty and infected wounds, burns, lacerations, fractures, etc.).
- Demonstrate capacity to evaluate orthopedic emergencies with emphasis on the lower extremity.

**Medical Knowledge**

- Demonstrates knowledge of the pathophysiology and clinical epidemiology of disorders commonly presenting to the emergency care unit.

**Practice Based Learning and Systems Based Practice**

- Understands and appreciates the principles of general emergency medicine and emergency care unit protocols.

**Rotation: Vascular Surgery**

Competencies Specific for Rotation:

**Patient Care**

- Perform and interpret the findings of a comprehensive pre-operative medical history and physical examination, including where appropriate:
  - Comprehensive medical history. Including chief complaint, review of systems history of present illness, social and family history.
  - Comprehensive physical examination, including vital signs and physical examination including: HEENT, neck, chest/breast, heart, lungs, abdomen, genitourinary, rectal, extremities, and neurologic examination.
- Perform and interpret the findings of a thorough problem-focused history and physical exam on vascular surgical patients including problem focused history, and where appropriate vascular, neurologic and musculoskeletal examination.
• Recognize the need for, and the appropriate ordering and interpretation of additional diagnostic studies, including EKGs, medical imaging, and laboratory studies.
• Demonstrate appropriate pharmacologic management of surgical patients including the proper ordering of medications, being fully cognitive of indications, dosages, interactions, side effects and anticipated results.
• Demonstrate proficiency in principles of surgery, including suturing techniques, traumatic tissue handling, and instrumentation, especially as it pertains to general surgery and vascular surgery.
• Demonstrate capacity to evaluate noninvasive and invasive vascular studies, with emphasis on the lower extremities.

Medical Knowledge

• Demonstrate knowledge of the indications and contraindications for various approaches to the ischemic limb.
• Demonstrate knowledge of the pathophysiology and clinical epidemiology of common medical conditions that impact the care of the surgical patient such as vascular disorders (peripheral, cardiac and cerebrovascular atherosclerotic vessel disease), diabetes mellitus, heart failure, respiratory disorders, gastrointestinal disorders, neurologic disorders.

Interpersonal and Communication Skills

• Demonstrate the capacity to efficiently communicate key medical information to colleagues.

Practice Based Learning and Systems Based Practice

• Demonstrate an understanding of the collaborative role of the health care team in the perioperative care, including nurse, social worker, case manager, etc.
• Demonstrate understanding of the role of protocols and care maps in the efficient care of the vascular surgical patient.

Rotation: Wound Care

Competencies Specific for Rotation:

Patient Care

• Perform a formal wound care assessment including focused history and physical examination.
Medical Knowledge

- Understand the principles of wound healing and management of wounds including diabetic wound and post-traumatic wound.
- Understand the role of non-invasive testing in the cost-efficient assessment of the patient with lower extremity wound.
- Understand the role of hyperbaric oxygen in wound healing.
- Understand the indications and pharmacology of various wound care products.

Practice Based Learning and Systems Based Care

Appreciate the collaborative role of the podiatrist and wound care specialist in the patient with refractory lower extremity ulcerations.

Rotation: Plastic Surgery

Competencies Specific for Rotation:

Patient Care

- Perform and interpret the findings of a comprehensive pre-operative medical history and physical examination, including where appropriate:
  - Comprehensive medical history. Including chief complaint, review of systems history of present illness, social and family history.
  - Comprehensive physical examination, including vital signs and physical examination including: HEENT, neck, chest/breast, heart, lungs, abdomen, genitourinary, rectal, extremities, and neurologic examination.
- Perform and interpret the findings of a thorough problem-focused history and physical exam on plastic surgical patients including problem focused history, and where appropriate vascular, neurologic musculoskeletal and dermatologic examination.
- Recognize the need for, and the appropriate ordering and interpretation of additional diagnostic studies, including EKGs, medical imaging, and laboratory studies.
- Demonstrate appropriate pharmacologic management of plastic surgery patients including the proper ordering of medications, being fully cognitive of indications, dosages, interactions, side effects and anticipated results.
- Demonstrate proficiency in principles of surgery, including suturing techniques, a traumatic tissue handling, and instrumentation, especially as it pertains to plastic surgery.
- Develop and learn proper techniques in handling skin in retraction and closure.
Medical Knowledge

- Demonstrate a knowledge of rotation and advancement flaps.
- Demonstrate a knowledge full and split thickness skin grafts.
- Demonstrate a knowledge of tissue expanders.
- Recognize and appreciate the principles of wound healing.
- Demonstrate knowledge of the pathophysiology and clinical epidemiology of common medical conditions that impact the care of the surgical patient such as vascular disorders (peripheral, cardiac and cerebrovascular atherosclerotic vessel disease), diabetes mellitus, heart failure, respiratory disorders, gastrointestinal disorders, neurologic disorders.

Interpersonal and Communication Skills

- Demonstrate the capacity to efficiently communicate key medical information to colleagues.

Practice Based Learning and Systems Based Practice

- Demonstrate an understanding of the collaborative role of the health care team in the perioperative care, including nurse, social worker, case manager, etc.
- Demonstrate understanding of the role of protocols in the efficient care of the plastic surgery patient.

Rotation: Trauma

Competencies Specific for Rotation:

Patient Care

- Perform and interpret the findings of a comprehensive pre-operative medical history and physical examination in the trauma patient, including where appropriate:
  - Comprehensive medical history. Including chief complaint, review of systems history of present illness, social and family history.
  - Comprehensive physical examination, including vital signs and physical examination including: HEENT, neck, chest/breast, heart, lungs, abdomen, genitourinary, rectal, extremities, and neurologic examination.
- Perform and interpret the findings of a thorough problem-focused history and physical exam on the trauma patient including problem focused history, and where appropriate vascular, neurologic and musculoskeletal examination.
- Recognize the need for, and the appropriate ordering and interpretation of additional diagnostic studies, including EKGs, medical imaging, and laboratory studies in the setting of acute trauma.
- Demonstrate appropriate pharmacologic management of surgical patients including the proper ordering of medications, being fully cognitive of indications, dosages, interactions, side effects and anticipated results.
- Demonstrate proficiency in principles of surgery, including suturing techniques, traumatic tissue handling, and instrumentation, especially as it pertains to the trauma patient.
- Demonstrate capacity to evaluate noninvasive and invasive vascular studies, with emphasis on the lower extremities.

Medical Knowledge

- Demonstrate knowledge of the indications and contraindications for various approaches to the surgical care of the lower extremity in the setting of trauma.
- Demonstrate knowledge of the pathophysiology and clinical epidemiology of common medical conditions that impact the care of the surgical patient such as vascular disorders (peripheral, cardiac and cerebrovascular atherosclerotic vessel disease), diabetes mellitus, heart failure, respiratory disorders, gastrointestinal disorders, neurologic disorders.

Interpersonal and Communication Skills

- Demonstrate the capacity to efficiently communicate key medical information to colleagues.
- Develop appreciation of the role of consistent, empathetic communication to the family of trauma patients.

Practice Based Learning and Systems Based Practice

- Demonstrate an understanding of the collaborative role of the health care team in the perioperative care of the trauma patient, including nurse, social worker, case manager, etc.
- Demonstrate understanding of the role of protocols in the efficient care of the trauma patient.

Rotation: Research

Competencies Specific for Rotation

Resident will develop an independent research project. In the context of this project the resident will develop the following skills listed below:
Medical Knowledge

- Demonstrate ability to:
  a. Select an appropriate topic for study.
  b. Review pertinent literature.
  c. Develop appropriate research questions.
  d. Generate an appropriate hypothesis.
  e. Select an appropriate research methodology.
  f. Develop appropriate proposal for data analysis.
  g. Conduct the research project.
  h. Successfully complete the project.
  i. Prepare a quality paper for potential publication in a peer-reviewed journal.

Electives

**Rotation: Dermatology**

Competencies Specific for Rotation

Patient Care

- Recognize common primary and secondary skin disorders that involved the lower extremity.

Medical Knowledge

- Understand basic pathophysiology and clinical epidemiology of common lower extremity skin disorders.
- Understand the pharmacology, indications, contraindications for various topical agents used to treat common skin disorders of the lower extremities.