O2 Dermatological presentations

Assessment of these competencies is via Mini-CEX, CbD (formative or summative) or ACAT-EM and a reflective log.

Potential presentations in which these competencies could be assessed include the following:

- Child/ Adult with pruritic rash
- Life threatening rashes e.g. meningococcal septicaemia
- Leg ulcer +/- infection or thrombophlebitis
- Skin rash soon after starting new drug treatment- allergic reactions
- Red, hot skin lesion, tracking e.g. cellulitis
- Abscess
- Bites and infestations
- Surgical wound infection

Trainees are expected to achieve EPA level 2 (Direct active – full supervision by senior clinician, with prompting/ verbal and actual guidance and help throughout) in these competencies.

Knowledge/ Skill/ Behaviour	Detail of competency
Knowledge	Can outline the structure and function of skin, hair and nails
	Recalls the characteristic lesions found in the acute presentation of
	common skin diseases e.g. cellulitis, erysipelas, impetigo, cutaneous
	drug reactions, purpuric rashes, skin malignancies
	Is able to identify the life-threatening dermatological emergencies,
	know their causes and emergency management including but not
	limited to: toxic epidermal necrolysis, Stevens-Johnson syndrome,
	erythroderma, necrotizing fasciitis
	Can outline the common causes of skin and mucosal ulceration and
	outline the classification of skin ulcers by cause
	Understands the aetiology by age and pathophysiology of bites and
	infestations
	Can outline possible complications that may present with a surgical
	wound and the type of infections that may occur
Skills- History	Is able to take a detailed history including systemic disease, drug
	and allergen history and development of skin lesion
	Is able to take detailed history of timeline and evolution of skin signs
	and symptoms
Skills -	Conducts a detailed examination, including the nails, scalp and
Examination	mucosae to arrive at appropriate differential diagnoses
	Accurately describes skin lesions following assessment, including any
	signs of secondary infection

Knowledge/ Skill/ Behaviour	Detail of competency
	Is able to identify potential systemic disease with skin presentations
	Documents any early signs of pressure ulcers and identify those patients at risk of skin breakdown
Skills- investigation	Orders, interprets and acts on initial investigations appropriately to establish aetiology
and treatment	Can prescribe appropriate topical and oral treatments for common skin presentations
Skills- Clinical	Identifies those patients who are systemically unwell and require
decision	admission
making and	Recognises life threatening skin rashes and commences treatment
judgement	and escalates care accordingly
(in addition to	Ensures those patients who are at high risk for pressure ulcers are
CC1)	identified
Behaviour-	Engages the patient in the management of their condition
communication	particularly with regard to topical treatments
&	Recognises the importance of prevention of pressure ulcers and
professionalism	diabetic ulcers
(In addition to	Demonstrates sympathy and understanding of patients 'concerns
CC7 & CC8)	due to the cosmetic impact of skin disease
Paediatric	Understands the common dermatological presentations in children
	and is able to differentiate the life-threatening presentations

Additional optional competencies- EPA 1

Knowledge/ Skill/ Behaviour	Detail of competency
Skills	Carries out a punch or other skin biopsy
	Debridement of wound
Behaviour	Is able to provide advice on managing open wounds, including
	dressings.