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## Job Searching



Check out the Academy's Career Compass for help with job searching: [www.healthcareers.org/aad](http://www.healthcareers.org/aad).

## Career Case Study

Career Case Study is a quarterly feature to help residents with choosing a subspecialty.

**Next issue:  
Hospital  
Dermatology**

## Career case study

# Pursuing a career path in surgery

David Carr, MD, interviewed by *DW Directions*

### Why did you pursue a specialty in surgery?

One of the best aspects of dermatology is the breadth of options available within the field. I gravitated to dermatologic surgery because the surgeries were extremely interesting, it has a very favorable patient-contact-to-administrative-burden ratio, and I am very interested in cutaneous oncology.

### What personality traits are most desirable and helpful in this type of work? (Is it more social or solitary; do you need good "people" skills?)

Dermatologic surgeons are often working on very sensitive areas; therefore, having good social skills and being able to gain patients' confidence quickly is key.

### Describe a typical day. What are the various tasks? How much time are you spending with patients, office work, other?

On a typical day, we start around 7 a.m. The morning is comprised of approximately eight Mohs surgeries of varying complexity. The morning is a busy time composed of meeting patients, taking layers, reading under the microscope, and performing repairs. As I am in an academic setting, I nearly always have a fellow with me, and residents are intermittently in clinics as well. The teaching happens on the fly, discussing cases at the microscope and repair options while viewing the defect photos. Generally, most Mohs cases are finished by the afternoon unless we have a particularly complex case. In the afternoon, we see wound checks and perform several simple dermatologic procedures (for example, cyst removal). The great majority of the day is direct patient care, which is one of the highlights of the job. I do approximately 90 minutes of charting a day.

### What areas of your residency training and education are being put to use the most?

The knowledge base with regard to clinical diagnosis, surgical skills, and management are put to use every day. More importantly though, the ability to be flexible with my thought process, how to deal with difficult patients, and

being a lifelong learner are skills I was introduced to in my training that have been the most impactful.

### How does a career path in surgery differ from other subspecialties?

By definition, it is a very procedural career. Most dermatologic surgeons will be performing surgery on a daily basis.

### In terms of need, workforce, and opportunities, how does it compare? (Is it more difficult to land a surgical derm position than another subspecialty?)

As in many areas of dermatology, there are always positions for dermatologic surgeons available. However, if an individual has a specific geographic location in mind, finding a position may be more difficult. Also, many dermatologic surgeons will initially find positions that are a combination of dermatologic surgery and general dermatology.

### If residents are considering a surgical subspecialty, what else should they be considering? Any special training or ways to increase their proficiency beyond their residency?

If a resident is considering a micrographic surgery and dermatologic oncology fellowship, they should consider spending an increased amount of time with the dermatologic surgeons at their institution. This will allow the resident to discover the facets of the job and help with the decision of whether this is their preferred career path. Becoming involved in the ACMS and helping with surgery-specific projects are other ways to explore the field and improve their applications for fellowship.

### Is there something specific to dermatologic surgery that is personally rewarding to you?

When patients hear the word cancer, many become extremely concerned. As ACMS fellowship-trained surgeons, we have invested the time to train in cutaneous oncology and the Mohs technique that will best take care of many of these cancers. In many cases, I am able to effectively treat patient's tumors within one visit. Being able to offer such a great technique has been personally very rewarding. **DR**

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