Pursuing a career path in dermatopathology
Tammie C. Ferringer, MD, interviewed by DW Directions

Why did you pursue a specialty in dermatopathology?
I was surprised to find that in medical school I enjoyed studying pathology above all subjects. Pathology provided the final diagnosis; the final answer to the patient’s mystery. Thus, it made sense to further investigate pathology for my first clinical elective. Seeing the biopsies microscopically left me wanting to explore the clinical presentation and the patient behind the biopsy. The resulting clinical dermatology exposure provided the perfect opportunity to interact with patients and provide a “final diagnosis” that I could help resolve or manage.

Describe a typical day. What are the various tasks? How much time are you spending with patients, office work, other?
Every day can be different. When I started in practice, I either arrived at 8 a.m. to start seeing patients or would come at 7:30 a.m. to quiz the residents on their assigned reading, and then would start seeing patients at 9 a.m. After a quick lunch, I moved from clinic to the lab where either the dermatopathology fellow or I would collect and organize the recuts and special stains from the prior day’s cases. Depending on the number of cases for review that day, the day ended around 5 p.m. with a quick review of patient lab results and messages. Recently, I transitioned to full-time dermatopathology, which provides ultimate flexibility. Some days start with an 8 a.m. resident/fellow conference or lab management meeting but most days start at a time of my choosing, often 9 or 9:30 a.m. Much of the morning consists of administrative tasks related to directing the dermatopathology fellowship and the dermatopathology laboratory, with time for other scholarly activities such as research studies, writing or reviewing manuscripts, and completing tasks related to national society committee work. The afternoon remains the same, occasionally interrupted by educational or management meetings and ends no later than 6:30 p.m.

Does the work vary at different times of the year?
The caseload tends to decrease the day after grand rounds or during a day of severe weather when less patients are seen. Clinicians also block their schedules for vacation time during the summer resulting in less specimens. Absence of a dermatopathologist in the group can result in an increased caseload for the remaining dermatopathologists.

What part of dermatopathology is personally rewarding to you?
Most of the dermatopathologists I know truly love what they do. The visual pattern recognition of dermatopathology appeals to those who already pursued the visual-rich field of dermatology. We enjoy collegial relationships with other dermatopathologists who can easily provide second opinions and revel in the ability to provide team-based care with clinicians. There is always something new or interesting to learn.

How does a career path in dermatopathology differ from other subspecialties?
A fellowship and subspecialty examination is required for board certification. Compensation tends to be comparable to Mohs surgeons and the upper end of the clinical dermatology spectrum.

In terms of need, workforce, and opportunities, how does it compare? (Is it more difficult to land a dermpath position than another subspecialty?)
As with any area of medicine, the job market waxes and wanes with time. I strongly encourage residents to pursue the area that they find most stimulating. The ultimate success in life is finding the career that you love so much it doesn’t feel like work. Dermatopathology-trained dermatopathologists interested in pursuing a career that combines clinical and laboratory responsibilities tend to find success.

Are there any concerns for the future of the specialty?
Similar to clinical dermatology, advancing technologies, including artificial intelligence, could potentially alter the necessary workforce, but if we embrace and incorporate the technology early, it will more likely enhance our practice.

If residents are considering a dermpath subspecialty, what else should they be considering? Any special training or ways to increase their proficiency beyond their residency?
Dermatopathology fellowships tend to select candidates as early as a year-and-a-half in advance. Those who want to pursue a fellowship immediately after residency should start applying early in their second year of dermatology residency. The early-career decision can be a deterrent for some residents; however, I strongly encourage those who identify an interest later in residency to pursue a year of clinical practice before fellowship. I found this to be enormously valuable in building my clinical confidence and complementing my subsequent fellowship.

What areas of your residency training and education are being put to use the most?
Obviously, the dermatopathology training involved in residency is beneficial but the best dermatopathologists rely heavily on their clinical diagnostic skills to provide the ultimate clinicopathologic correlation. An understanding of disease management, including surgical procedures, helps the dermatopathologist provide the most useful and essential information to clinicians making these recommendations.