The management of Dermatopathology
Developed by the Guideline Subcommittee of the European Dermatology Forum

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Expiry date: 9/2012
Special qualification (expertise) in dermatopathology

Special qualification in dermatopathology, which is necessary to improve the quality of this important field, can only be achieved by years of practice and experience.

Regulations and requirements for accreditation of speciality training programmes in dermatopathology

Identification of accredited training programmes and eligibility assessment for the examination will be accomplished by an International Review Subcommittee for Dermatopathology, which includes equal members from both Pathology and Dermatology UEMS-Sections. This subcommittee cannot function in a licensing role (as this is governmental task), however, it would be responsible for reviewing the performance (structure, programme design) of the teaching institution. Accreditation of a Training Center in Dermatopathology requires filling out the application forms, which can be requested at http://www.icdermpath.org. Programmes wishing to be accredited may have on-site inspection that will include evaluation of the facility, interview with the director of dermatopathology and teaching staff and the trainees.

Training for special qualifications in dermatopathology can also be completed by European physicians in the USA when accepted by Dermatopathology Centers with ACGME (= Accreditation Council for General Medical Education)-approved training programmes.

The following guidelines are used:

- Training must be directed and closely supervised by a pathologist / dermatologist with documented qualifications in dermatopathology (International Committee for Dermatopathology / UEMS-Sections of Dermato-Venereology and Pathology; Royal College of Pathologists; American Board of Dermatopathology). The trainee must be given the opportunity to “sign out” under supervision.
- Training in dermatopathology must be linked with a university clinic, hospital or a comprehensive dermatopathology center.
- The programme must provide organized training in the following areas concerning dermatopathology: routine histology, special stains, immunofluorescence and immunoperoxidase techniques, molecular techniques (PCR)¹, (electron microscopy, optional), laboratory management, quality assurance.
- A sufficient number and variety of dermatopathology specimens – at least 3000 new accessions per annum – must be available for the trainees to gain experience in diagnostic dermatopathology. In addition study sets and other educational materials should be provided.
- Candidates for speciality training in dermatopathology must have successfully completed their residency training in dermatology, as required by the various national licensing bodies. They should also confirm continuous and authentic exposure to dermatopathology during their residency time.
- Discussions, tutorial rounds, lectures, and conferences must be regularly scheduled and held. Especially clinico-pathological conferences, scheduled on a regular base within qualified dermatological clinics, are important in this respect.

Recommendations for length of speciality training

- Satisfactory completion of one year of speciality training in dermatopathology in a programme accredited for such training.
- Dermatologists have to spend in addition a minimum period of 6 months in a Pathology Department studying anatomic and surgical pathology, and laboratory techniques.

The one year speciality training in dermatopathology can only be completed after the residency training in dermatology, whereas the 6 months training in anatomic/surgical pathology can be accomplished before, during or after the residency time.

¹ Procedures should be at least available in an affiliated institution.
Organisation of a dermatopathology laboratory and requirements

The institution must provide for the practical service and training in dermatopathology the following facilities:

Laboratories
Laboratories (within the training institution) with adequate space and technical equipment for routine histology, special stains, immunofluorescence and immunoperoxidase techniques, molecular techniques (DNA-PCR), (electron microscopy, optional), laboratory management, quality assurance.

Personnel
A programme director, who is responsible for the direction and general administration of the laboratory, must be available. He must show documented qualifications in dermatopathology (experience training; Diploma in Dermatopathology, see also experience training – grandfather clause) and is especially responsible for the training programme. There must be a sufficient number of qualified physicians (pathologists, dermatologists) with documented experience and qualifications in dermatopathology. (A ratio of one full-time faculty member to 3 trainees is recommended.) Other staff: There must be a sufficient number of qualified technicians and clerical staff to support practical laboratory work and to meet the service responsibilities.

Dermatopathology specimens
The number of routine dermatopathology specimens from within the institution and from outside (including referrals) must be at least 3000 per annum. This material must be available for examination to residents and to trainees seeking special qualification in dermatopathology. In addition slide sets should be provided.
**Microscopes including a multi-headed microscope**

Projection microscopes linked to a television video monitor. *In difficult lesions and in unclear features of a disease it should be standard of care to submit skin biopsies together with clinical photographs.*

**Office facilities**

Computers, computer medical databases and a multi-user network system for input of data and generation of dermatopathology reports, conference room to support teaching and educational responsibilities, research space for scientific projects in dermatopathology, library with journals, textbooks and other teaching aids related to dermatopathology and pathology.

**Examination – Diploma in Dermatopathology**

After having completed the full requirements in an institutional *training programme*, *which has been accredited*, physicians would be qualified to appear before the International Committee for Dermatopathology / UEMS-Sections of Dermato-Venereology and Pathology to take the examination for special qualification in dermatopathology ([see http://www.icdermpath.org](http://www.icdermpath.org)).

Certification will be based on the examination, which consists of a written and oral test and a practical part comprising histopathologic sections.

Candidates who have been successful in the examination will be awarded the International Board Certification in Dermatopathology – Diploma in Dermatopathology.
Definitions

Special qualification in Dermatopathology
All pathologists and dermatologists have training in dermatopathology during their residency. To achieve, however, *special qualification in dermatopathology* we must accept the fact that dermatopathology cannot be practised as an avocation and therefore additional extensive training leading to a Diploma in Dermatopathology must be obtained.

*A pathologist or a dermatologist with special qualification in dermatopathology* ("practising" dermatopathologist) is a pathologist or dermatologist with special training and/or certification in dermatopathology, who devotes a substantial portion of his professional effort to the reading of cutaneous pathology. Candidates must fulfil specific minimum requirements of training in an accredited center and must have taken the examination for the Diploma in Dermatopathology (exception: grandfather clause) held under the auspices of the International Committee for Dermatopathology.

While there is no legal reason why a pathologist would need this special qualification for the ability to read dermatological sections, some might welcome the opportunity to be officially certified as dermatopathologists. For a dermatologist, passing the examination would represent recognition of competency in dermatopathology.

Experience training (grandfather clause)
This particular component is the most difficult to define. It has been suggested that an initial period of 4 years will be allowed for approval of training based on prior experience. The specific details for the accreditation or approval of experience training will be the role of the Review Subcommittee (Board) for accreditation of dermatopathology training. Experience training should basically cover past experience with all of the various disciplines listed under requirements for speciality training in dermatopathology.
It is also important to recognise the distinction between several terms commonly used regarding speciality status. *Accreditation* has to do with approval of training programmes. *Examination* is a process whereby competence is ascertained. *Certification* is attested by a certificate issued by an official body. Certification may be regarding expertise, training, or competence. *Licensure* is a function of states, nations, and/or governing bodies regulating practice in geographic areas.

At present there is a need for the definition of accreditation of training programmes, of certification based on the examination, and of maintaining the competence in dermatopathology (continuing medical education and continuing professional development) in most countries of Europe and many other states in the world outside of the USA. Currently is dermatopathology in Europe regarded as accepted subspeciality only in Germany, Switzerland, and Austria.
### SOP for creation of European Dermatology Guidelines

<table>
<thead>
<tr>
<th>Step</th>
<th>Responsible</th>
<th>Task</th>
<th>Months duration</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>EDF Guidelines Committee (EDF-GC) *</td>
<td>Decision of topic of specific guideline</td>
<td>0</td>
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<tr>
<td>2</td>
<td>EDF Board</td>
<td>Confirmation of the choice and level of guideline (S1, S2 or S3) plus suggestion to the Guideline Committee of potential chairmen and subcommittee members.</td>
<td>0.5</td>
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<tr>
<td>3</td>
<td>EDF-GC</td>
<td>Foundation of subcommittee for specific guidelines. Nomination of EDF members (50 %) as well as identification of possible EADV members (25 % of members for the subcommittee) who could work within the subcommittee. Chairman of EDF guideline committee asks EADV president for approval. Finally nomination of a chairperson of the subcommittee by the group.</td>
<td>at EDF Meeting</td>
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<tr>
<td>4</td>
<td>EDF Guidelines Subcommittee (EDF-GSubC)</td>
<td>Development of a business plan (see attachment)</td>
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<td>5</td>
<td>EDF Board</td>
<td>Confirmation of business plan and signature of the contract for financial support of guideline</td>
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<td>6</td>
<td>EDF-GSubC</td>
<td>Identify all existing guidelines for the specific guideline (active process: literature survey plus contact to Dermatological Societies)</td>
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<td>7</td>
<td>EDF-GSubC</td>
<td>Select the guidelines with highest quality. Criteria for selection: 1. Availability of strength of evidence 2. Availability of strength of recommendation 3. Evidence of mechanics of literature review (adhere to the recommendations of the Cochrane collaboration. These standards should assure high quality for the systematic literature search as well as for the critical appraisal of the papers. For further information see <a href="http://www.cochrane.org/crgprocedures/chapter4/1.htm">http://www.cochrane.org/crgprocedures/chapter4/1.htm</a> and documents available at EDF Guidelines Secretariat (Mrs. Janine Schweiger, <a href="mailto:janine.schweiger@charite.de">janine.schweiger@charite.de</a>)</td>
<td>1</td>
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<tr>
<td>8</td>
<td>EDF-GSubC</td>
<td>Identification/nomination of additional 50 % EDF members for the EDF-GSubC from amongst the authors of the best guidelines</td>
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<td>9</td>
<td>Chairperson of EDF-GSubC</td>
<td>Consider involvement of other disciplines and patients’ organisations</td>
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<td>10</td>
<td>EDF-GSubC</td>
<td>Meet 1. to decide the author of the first draft (normally the chairperson of the subcommittee) and to discuss the present guidelines, their strengths and weaknesses 2. 6 months later to discuss the draft (consensus conference)</td>
<td>6</td>
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<tr>
<td>11</td>
<td>Chairperson of EDF-GSubC</td>
<td>Circulate the guideline draft to national dermatological societies for comments (actual list of societies and their presidents at EDF guidelines secretariat)</td>
<td>2</td>
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<tr>
<td>12</td>
<td>EDF-GSubC</td>
<td>Circulate final version for approval among members of the guideline subcommittee</td>
<td>1</td>
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<td>13</td>
<td>EDF-GSubC</td>
<td>Deliver final version to EDF guideline committee chairperson, who forwards it to the EDF-GC</td>
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<td>14</td>
<td>EDF-GC</td>
<td>Review and comment guideline</td>
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<tr>
<td>15</td>
<td>Chairperson of EDF-GSubC</td>
<td>Send final version to EADV Board and to UEMS for approval</td>
<td>2</td>
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<tr>
<td>16</td>
<td>Chairperson of EDF-GSubC</td>
<td>Send guideline for official approval to UEMS (formal approval)</td>
<td>1</td>
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<td>17</td>
<td>EDF secretary</td>
<td>Distribute guideline for in advance information to EDF members and National Dermatological Societies</td>
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<td>18</td>
<td>EDF</td>
<td>Publication 1. on EDF homepage (by Prof. Lajos Kemeny, responsible for the website) 2. in European dermatological journals (normally in EJD, if already published in another journal, a written permission must be obtained to publish in EJD) 3. If publication in other national and international journals is requested by the respective society, this will be encouraged by the EDF</td>
<td>6</td>
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The normal expiry date of a guideline is 3 years after finishing point 17. In well defined exceptions the expiry date may be prolonged up to 5 years.

* The Guideline Committee consists of the founding members of the EDF guideline work as well as of chairpersons of guidelines subcommittees.