

National Board of Examinations

New Delhi

Dated: 13-02-2019

NOTICE

Introduction of FNB DERMATOPATHOLOGY Programme

Attention: All Hospitals/Institutes/Medical Colleges desirous of seeking accreditation with NBE

NBE grants accreditation to institutions/hospitals in public and private sector all over the country for the purpose of training of candidates in various specialties and disciplines of modern medicine.

2. Considering the emerging need to increase the pool of competent and skilled specialists and sub specialists so as to cater to the healthcare needs of the society and community at large, National Board of Examinations administers Post-Doctoral Fellowship programme in 22 disciplines.
3. NBE invites *online* applications from eligible departments / institutions for a *1-year Post-Doctoral FNB Programme* in **Dermatopathology**. Interested institutions/hospitals/medical colleges which fulfill the criteria as laid down for this programme by NBE can apply for fresh accreditation.
4. Details of the minimum accreditation criteria are available on NBE website www.natboard.edu.in under quick link "**Accreditation Online**".
5. Indicative Outline and requirements specific to aforesaid programme are as under:

**Aim &
Objectives of
the
Programme**

AIM:

To provide comprehensive high-quality standard training and expertise to dermatologists in Dermatopathology

OBJECTIVES:

At the end of this course the fellow should be able to:

1) Knowledge

- Acquire comprehensive knowledge of basic science and principles of diagnosis in dermatopathology including normal structure of skin and other organs
- Acquire comprehensive knowledge of identification of histopathological reaction patterns- both related to skin and other organs and their differential diagnoses.
- Acquire knowledge about grossing of specimens, histopathology stains, immunohistochemistry, immunofluorescence
- Acquire comprehensive knowledge of specimen fixation - skin, nail and scalp biopsy; specimen for immunofluorescence, immune-mapping including orientation of specimen during its embedding, taking right section for processing, blister specimen orientation and sectioning.
- Acquire technical knowledge on basics of histopathology and microscopy techniques including-microscope types and their usage; scalp biopsy: vertical and horizontal sections, nail biopsy: processing, embedding, and sectioning

2) Skills

- To acquire competence in performing all technical and invasive procedures essential for the practice of dermatopathology
- To acquire skill to develop appropriate diagnoses or differential diagnoses
- To develop skills to evaluate and improve laboratory and medical practice and medical knowledge on an ongoing basis; developing familiarity with management, administration in the Dermatopathology laboratory
- To develop skills to participate in quality assurance and quality improvement procedures and exhibit understanding of audit in Dermatopathology
- To develop skills to appraise and assimilate evidence from scientific studies; apply knowledge of study design and statistical methods to appraisal of clinical and pathologic studies; use of information technology to manage information and to support continuing education activities; facilitate learning of students and other health care professionals.
- To develop skills to participate actively in research or other scholarly activity
- To demonstrate effective communication skills and be able to build rapport with patients, parents, families and colleagues.
- To demonstrate effective teaching skills to students and resident doctors.
- To be able to exhibit ethical integrity and show respect and dignity when dealing with students, colleagues, patients or families.

3) Statement of expected competencies

	<ul style="list-style-type: none"> • Must demonstrate proficiency in reviewing and diagnosing dermatopathological specimens including grossing of specimens, fixation and processing techniques, and slide preparation and staining. • Must demonstrate proficiency in ordering and interpreting appropriate special procedures: special and immunoperoxidase stains, immunofluorescent procedures, • Must have some basic concepts of laboratory management • Acquire proficiency in picking up mismatch between clinical impression and histological findings • Exhibit effective communication skills and ethical integrity while dealing with patients, parents, families, students and colleagues. 	
Nature of the Programme	Post-Doctoral Fellowship programme (FNB)	
Nomenclature of the Programme	FNB in Dermatopathology	
Programme duration	1 year	
Minimum Accreditation Criteria	The applicant hospital	<p>The extant NBE norms shall be applicable for total beds in the applicant hospital. All categories of hospitals as per extant norms shall be eligible to seek accreditation with NBE provided that there is a <i>dedicated department of dermatology with running in-house department of Pathology in the applicant hospital</i> with access to fully equipped Pathology laboratory with facilities for specimen processing, staining and immunostaining and cytology.</p>
	The applicant department	<p>The running department of Dermatology with access to good pathology back up with facilities for specimen processing including staining and immunostaining and cytology.</p> <p>The deferment should preferably be running Clinical-pathologic/ Dermatology Grand Rounds where patients with unusual skin diseases are presented in a conference setting along with the skin biopsy and the clinical findings are correlated with the biopsy findings.</p> <p>It should have a teaching slide bank of at least 300-400 slides. It should have procedure room where skin biopsies / cytology is carried out</p>

	<p>Equipment in the department</p>	<p><i>Minimum Equipment required in the department:</i></p> <ul style="list-style-type: none"> • Teaching Microscope • Immunofluorescence microscope • Equipment for sectioning • Hematoxylin and Eosin and other Special Stains • Immunoperoxidase staining is preferable
	<p>Faculty</p>	<p>The applicant department should have at least 02 full time consultants. One of them should be a <i>Senior Consultant</i> whereas the other consultant may be a <i>Junior Consultant</i> as defined below.</p> <ul style="list-style-type: none"> • Senior Consultant: Qualification & Experience Should have 8 years of post PG experience of which at least 5 years of exclusive experience should be in Dermatopathology after qualifying DNB/MD or equivalent recognized qualification in Dermatology Exclusive experience in the area of Dermatopathology should be supported with work experience certificates. • Junior Consultant: Qualification & Experience Should have 5 years of post PG experience of which at least 2 years of exclusive experience should be in Dermatopathology after qualifying DNB/MD or equivalent recognized qualification in Dermatology Exclusive experience in the area of Dermatopathology should be supported with work experience certificates. • Senior Residents 02 Senior Residents are <i>desirable</i> in the department. They must possess recognized Degree/Diploma qualification in the specialty of Dermatology. The degree/diploma should not have been awarded more than 60 months earlier from the date of filing the application. Sr. Residents with diploma qualification must possess minimum of 2 years of Post diploma experience in the specialty concerned. Sr. Residents pursuing any academic programme in the department (DNB MD/Fellowship/any other) after qualifying PG Degree qualification shall be considered as Academic Sr. Resident. Those who are not pursuing any such academic programme shall be considered as Non-Academic Senior Residents. • Adjunct Pathologist as teaching faculty. • Experienced technical staff for biopsy / staining/ immunostaining

		<p>The department faculty should have minimum 5 research activities to their credit as per applicable NBE norms for other programme.</p>																
	<p>Patient Load</p>	<p>The minimum required patient load for the programme as under:</p> <p>a. OPD The Annual Dermatology attendance should be at least 20,000. Direct patient examination and performing biopsies should be permitted</p> <p>b. Minimum required Spectrum of Diagnosis</p> <table border="1" data-bbox="719 801 1453 1984"> <tr> <td data-bbox="719 801 1453 976">Spectrum of Diagnosis</td> </tr> <tr> <td data-bbox="719 976 1453 1037">Lichenoid reaction pattern ('interface dermatitis')</td> </tr> <tr> <td data-bbox="719 1037 1453 1097">Psoriasiform reaction pattern</td> </tr> <tr> <td data-bbox="719 1097 1453 1158">Spongiotic reaction pattern</td> </tr> <tr> <td data-bbox="719 1158 1453 1218">Vesiculobullous reaction pattern</td> </tr> <tr> <td data-bbox="719 1218 1453 1279">Granulomatous reaction pattern</td> </tr> <tr> <td data-bbox="719 1279 1453 1339">Vasculopathic reaction pattern</td> </tr> <tr> <td data-bbox="719 1339 1453 1400">disorders of keratinization</td> </tr> <tr> <td data-bbox="719 1400 1453 1460">Pigmentary dermatoses</td> </tr> <tr> <td data-bbox="719 1460 1453 1520">Disorders of collagen and elastic tissue</td> </tr> <tr> <td data-bbox="719 1520 1453 1659">Cutaneous infections and infestations – histological patterns: viral, bacterial, spirochaetal, mycobacterial, fungal, parasitic, rickettsial</td> </tr> <tr> <td data-bbox="719 1659 1453 1756">Cutaneous deposits including metabolic and storage diseases</td> </tr> <tr> <td data-bbox="719 1756 1453 1816">Diseases of cutaneous appendages</td> </tr> <tr> <td data-bbox="719 1816 1453 1877">Panniculitis</td> </tr> <tr> <td data-bbox="719 1877 1453 1937">Cutaneous adverse drug reactions</td> </tr> <tr> <td data-bbox="719 1937 1453 1984">Benign vs malignant- Diagnosis of neoplasm</td> </tr> </table>	Spectrum of Diagnosis	Lichenoid reaction pattern ('interface dermatitis')	Psoriasiform reaction pattern	Spongiotic reaction pattern	Vesiculobullous reaction pattern	Granulomatous reaction pattern	Vasculopathic reaction pattern	disorders of keratinization	Pigmentary dermatoses	Disorders of collagen and elastic tissue	Cutaneous infections and infestations – histological patterns: viral, bacterial, spirochaetal, mycobacterial, fungal, parasitic, rickettsial	Cutaneous deposits including metabolic and storage diseases	Diseases of cutaneous appendages	Panniculitis	Cutaneous adverse drug reactions	Benign vs malignant- Diagnosis of neoplasm
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		<p>-- Importance of silhouette</p> <p>-- Biologic behavior</p> <hr/> <p>Skin tumors- epidermal, cutaneous appendages, fibrocystic and fibrohistiocytic, vascular, Neural and neuroendocrine, fat, muscle, cartilage, and bone</p> <hr/> <p>Cysts, hamartomas and hyperplasias</p> <hr/> <p>Melanocytic lesions- Lentigines, nevi, and melanomas</p> <hr/> <p>Cutaneous metastasis</p> <hr/> <p>Lymphomas and leukemias</p> <hr/> <p>Combination patterns</p> <hr/> <p>Immunoperoxidase staining</p> <p>- Pitfalls</p> <hr/> <p>. Immunofluorescence</p> <p>-- Direct immunofluorescence</p> <p>-- Indirect immunofluorescence</p> <hr/> <p>Other microscopic techniques in dermatology</p> <p>Polarizing microscopy</p> <p>Dark ground illumination</p>
	<p>Rotational Posting of trainees during the course of training</p>	<ul style="list-style-type: none"> • For specialized training, an externship of 4 weeks at another recognized center is permissible, provided a formal MOU including the planned training and evaluation module, is signed between both centers
	<p>Recommended Readings</p>	<p>The institutional library to have at least 10 Dermatopathology reference books (latest editions) and 3 Dermatopathology journal subscriptions.</p> <p>Recommended books for library (latest editions) -</p> <ul style="list-style-type: none"> • <i>Weedon's Skin Pathology</i>: by James W Patterson • <i>McKee's Pathology of the Skin</i>: by Eduardo Calonje • <i>Lever's Histopathology Of The Skin</i>: by David E. Elder • <i>WHO Classification of Tumors: Pathology & Genetics (Skin Tumors)</i>

		<ul style="list-style-type: none"> • <i>Skin Lymphoma: by Lorenzo Cerroni</i> • <i>IADVL Atlas of Dermatopathology</i> <p>Recommended journals:</p> <ul style="list-style-type: none"> • <i>American Journal of Dermatopathology</i> • <i>Journal of Cutaneous Pathology</i> • <i>Indian Journal of Dermatopathology and Diagnostic Dermatology</i> • <i>Indian Journal of Dermatology Venereology Leprology</i>
Entry and Exit Criteria for Candidates	Candidates in possession of recognized MD/DNB Dermatology qualification shall be eligible for this fellowship course. Entrance and Exit examination shall be as per applicable NBE norms for NBE Fellowship (FNB) courses.	
<ul style="list-style-type: none"> • Stipend Stipend to FNB trainees shall be paid as per NBE norms. • Research Work/Thesis Preferably should be carrying out research activities/ projects in specialty. Fellows to perform at least one audit and preferably have one presentation at a conference or least one research article sent for publication during the tenure. • Training record The record of training shall be required to be maintained as a Log book prescribed by NBE. 		

6. For details of minimum accreditation criteria, application process and cut-off date to submit applications for year 2019, please refer to the 2019 Information Bulletin for seeking accreditation with NBE available on NBE website under quick link: https://accr.natboard.edu.in/online_user/frontpage.php

7. For Any further clarification/assistance, please write to NBE at e-mail ID accr@natboard.edu.in

NBE.