

## Entrustable Professional Activities (EPAs)

### List of EPAs for Dermatology

EPA Title	EPA Entrustment Level to be Attained by Exit
<a href="#">EPA 1: Evaluating and Managing Common Skin Diseases and Concerns</a>	Level 4
<a href="#">EPA 2: Evaluating and Managing Dermatological Emergencies</a>	Level 4
<a href="#">EPA 3: Evaluating and Managing Common Chronic Skin Diseases</a>	Level 4
<a href="#">EPA 4: Evaluating and Managing Complex Skin Disorders</a>	Level 4
<a href="#">EPA 5: Evaluating and Managing Common Paediatric Skin Disorders</a>	Level 4
<a href="#">EPA 6: Evaluating And Managing Patients with Contact Dermatitis and Occupational Dermatoses</a>	Level 4
<a href="#">EPA 7: Evaluating And Managing Common Skin Cancers</a>	Level 4
<a href="#">EPA 8: Evaluating And Managing Patients with Photodermatoses</a>	Level 4
<a href="#">EPA 9: Performing Common Dermatological (Including Aesthetic) Procedures</a>	Level 4
<a href="#">EPA 10: Evaluating And Managing Dermatological Patients in an Inpatient Setting</a>	Level 4
<a href="#">EPA 11: Evaluating and Managing Patients with or who are at Risk of Acquiring Sexually Transmitted Infections (STIs)</a>	Level 4
<a href="#">EPA 12: Ordering and Performing a Skin Biopsy</a>	Level 4

### Entrustment Scale

Entrustment Level	Description
Level 1	Be present and observe, but no permission to enact EPA
Level 2	Practise EPA with direct (pro-active) supervision
Level 3	Practise EPA with indirect (re-active) supervision
Level 4	Unsupervised practise allowed (distant oversight)
Level 5	May provide supervision to junior learners

## Dermatology EPA 1

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Title	<b>Evaluating and Managing Common Skin Diseases and Concerns</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"><li>1. History taking</li><li>2. Performing physical examination as relevant</li><li>3. Making the diagnosis and formulating a list of appropriate differential diagnoses</li><li>4. Ordering relevant investigations and interpreting the test results</li><li>5. Prescribing appropriate medications and treatments</li><li>6. Addressing aesthetic concerns of patients</li><li>7. Communicating with patient the diagnosis, management plan and prognosis</li></ol> <p><b>Limitations:</b> A summative entrustment decision for this EPA is only applicable to adult patients. This EPA does not cover patients in the paediatric age group below 16 years of age which is covered in EPA 5.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

**Dermatology EPA 2**  
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Title	<b>Evaluating and Managing Dermatological Emergencies</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. Recognising the presentation of dermatological emergencies</li> <li>2. Taking history and performing physical examination as relevant</li> <li>3. Making the diagnosis and formulating a list of appropriate differential diagnoses</li> <li>4. Assessing severity of skin disease and potential systemic complications</li> <li>5. Ordering relevant diagnostic tests and/or interpreting diagnostic tests</li> <li>6. Prioritising and ordering appropriate specific and supportive treatment</li> <li>7. Coordinating care with other members of the care team and relevant healthcare partners</li> <li>8. Communicating with patient and family members the diagnosis, management plan and prognosis</li> </ol> <p><b>Limitations:</b>  A summative entrustment decision for this EPA is only applicable to the management of patients (adult and paediatric population) with dermatological emergencies with risk of significant morbidity / mortality and include but not limited to severe cutaneous adverse drug eruptions, methotrexate toxicity, pustular psoriasis, severe autoimmune blistering disorders and severe cutaneous infections. This EPA does not cover inpatients with non-critical albeit severe dermatoses for which EPA 10 applies.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

### **Dermatology EPA 3**

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Title	<b>Evaluating and Managing Common Chronic Skin Diseases</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"><li>1. Assessing severity, progress and complications of chronic skin diseases, their associated comorbidities and their impact on patient's quality of life.</li><li>2. Ordering relevant investigations and interpreting the test results</li><li>3. Prescribing appropriate medication and treatment based on disease severity, complications and associated comorbidities</li><li>4. Assessing suitability for phototherapy and ordering treatment</li><li>5. Monitoring and adjusting treatment, drug / dose titration and use of combination therapy</li><li>6. Coordinating care with relevant healthcare professionals and partners</li><li>7. Right siting stable patients back to the community</li><li>8. Facilitating awareness and support among family members</li><li>9. Directing patient to relevant psychosocial support groups</li></ol> <p><b>Limitations:</b> A summative entrustment decision for this EPA is only applicable to adult patients with chronic skin diseases. This EPA does not cover patients in the paediatric age group below 12 years of age and patients with acute self-limiting skin conditions.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

## Dermatology EPA 4

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Title	<b>Evaluating and Managing Complex Skin Disorders</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. Identifying complex skin disorders</li> <li>2. Making the diagnosis and formulating a list of appropriate differential diagnoses</li> <li>3. Assessing severity, progress and complications of complex skin disorders and their associated comorbidities</li> <li>4. Ordering relevant investigations and interpreting the test results</li> <li>5. Ordering appropriate treatment based on disease severity, complications and associated co-morbidities</li> <li>6. Monitoring and adjusting treatment, drug / dose titration and use of combination therapy</li> <li>7. Understanding the implications of polypharmacy and drugs interactions</li> <li>8. Coordinating care with relevant healthcare professionals and partners</li> <li>9. Communicating with patient and family members the diagnosis, management plan and prognosis</li> </ol> <p><b>Limitations:</b> A summative entrustment decision for this EPA is only applicable to outpatient adult population with complex skin disorders and includes but not limited to patients with immune-mediated skin disorders and patients with significant co-morbidities. This EPA does not cover inpatients and dermatological emergencies for which separate EPAs (EPA 2,10) apply.</p>
EPA Entrustment Level to be Attained by Exit	Level 4 (unsupervised practice) at the completion of Immunodermatology training module and sign-off by HOD, PD/APD. Final endorsement by CCC.

**Dermatology EPA 5**  
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Title	<b>Evaluating and Managing Common Paediatric Skin Disorders</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. History taking</li> <li>2. Performing physical examination as relevant</li> <li>3. Making the diagnosis and formulating a list of appropriate differential diagnoses</li> <li>4. Ordering relevant investigations and interpreting the test results</li> <li>5. Assessing impact on growth, social development and quality of life</li> <li>6. Prescribing age-appropriate medication and treatment</li> <li>7. Communicating with patient and parents the diagnosis, management plan and prognosis</li> </ol> <p><b>Limitations:</b>  A summative entrustment decision for this EPA is only applicable on paediatric patients above the age of 1 month and below the age of 16, with common skin diseases. Skin diseases in the neonatal age group and complex or rare skin disorders require the expertise of a paediatric dermatologist or more senior members of the clinical care team.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

**Dermatology EPA 6**  
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Title	<b>Evaluating and Managing Patients with Contact Dermatitis and Occupational Dermatoses</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. History taking</li> <li>2. Performing physical examination as relevant</li> <li>3. Ordering relevant patch test series and interpreting the patch test results</li> <li>4. Knowing the indications of prick test and whom to refer for testing if needed</li> <li>5. Advising appropriate preventive measures</li> <li>6. Communicating with patient, employer and relevant agencies</li> </ol> <p><b>Limitations:</b>  A summative entrustment decision for this EPA is only applicable to patients presenting with contact dermatitis to common contact allergens found in the standard series. This EPA does not cover complex cases and performing prick test for contact urticaria</p>
EPA Entrustment Level to be Attained by Exit	Level 4

**Dermatology EPA 7**  
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Title	<b>Evaluating and Managing Common Skin Cancers</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. History taking</li> <li>2. Performing physical / dermoscopic examination as relevant</li> <li>3. Ordering diagnostic tests if needed and/or interpreting diagnostic test results</li> <li>4. Staging the disease</li> <li>5. Communicating diagnosis and prognosis</li> <li>6. Charting and ordering management plan</li> <li>7. Facilitating referral to relevant professional partners across institution if required</li> </ol> <p><b>Limitations:</b>  A summative entrustment decision for this EPA is only applicable to patients with common skin cancers (non-melanoma skin cancers, early-stage melanoma) and common skin lymphomas. Protocol exists for uncommon and complex skin cancers requiring the expertise of more senior members of the Skin Cancer and/or Cutaneous Lymphoma team.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

**Dermatology EPA 8**  
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Title	<b>Evaluating and Managing Patients with Photodermatoses</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. Identifying a patient with suspected photodermatosis</li> <li>2. Evaluating a patient with suspected photodermatosis diagnostically</li> <li>3. Ordering relevant investigations, photo-diagnostic tests and interpreting the test results</li> <li>4. Making the diagnosis and formulating a list of appropriate differential diagnoses</li> <li>5. Prescribing appropriate medication and treatment</li> <li>6. Advising sun protection and sunscreen use</li> </ol> <p><b>Limitations:</b>  A summative entrustment decision for this EPA is only applicable to patients who have suspected photosensitivity and/or who have chronic dermatoses that are photo-aggravated. This EPA does not cover patients with acute sunburns and who have confirmed connective tissue diseases with associated photosensitivity. Protocols exists for the evaluation and management of patients with suspected connective tissue diseases with associated photosensitivity.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

## Dermatology EPA 9

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Title	<b>Performing Common Dermatological (including aesthetic) Procedures</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"><li>1. Evaluating the indicated skin condition</li><li>2. Selecting the appropriate procedure for the indicated condition</li><li>3. Performing the procedure and adapting treatment if needed</li><li>4. Documenting the relevant elements of the consultation and procedure</li><li>5. Ordering and documenting the relevant post-operative care</li></ol> <p><b>Limitations:</b> A summative entrustment decision for this EPA is only applicable to common dermatologic procedures and aesthetic procedures which include cryotherapy, electrocautery, skin biopsy, minimal excision surgery, excisional surgery, skin resurfacing and rejuvenation procedures, cosmetic lasers and other energy-based devices, botulinum toxin and filler injections. The complete suite of activities involved in performing a skin biopsy (including preparation and follow-up) are covered in EPA12. This EPA does not cover more advanced dermatologic procedures including flaps and skin grafting which requires the expertise of trained dermatologic surgeons and plastic surgeons.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

## Dermatology EPA 10

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Title	<b>Evaluating and Managing Dermatological Patients in an Inpatient Setting</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. Recognising the spectrum of common skin diseases in hospitalized patients</li> <li>2. History taking and performing physical examination as relevant</li> <li>3. Assessing severity of skin disease and potential systemic associations and complications</li> <li>4. Ordering relevant diagnostic tests and/or interpreting diagnostic tests</li> <li>5. Making the diagnosis and formulating a list of appropriate differential diagnoses</li> <li>6. Ordering appropriate treatment</li> <li>7. Coordinating care with other members of the care team and relevant healthcare partners</li> <li>8. Communicating with patient and family members the diagnosis, management plan and prognosis</li> <li>9. Formulating discharge and follow-up plans</li> </ol> <p><b>Limitations:</b> A summative entrustment decision for this EPA is only applicable to the management of inpatients with non-critical albeit severe skin conditions and includes patients admitted to the dermatology ward, hospitalized patients co-managed with other subspecialties and inpatient consultation for blue letter referrals. This EPA does not cover dermatological emergencies including severe cutaneous adverse drug eruptions for which EPA2 applies. This EPA also does not cover inpatient paediatric patients, who are under the care of paediatric dermatologists.</p>
EPA Entrustment Level to be Attained by Exit	Level 4

## Dermatology EPA 11

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Title	<b>Evaluating and Managing Patients with or who are at Risk of Acquiring Sexually Transmitted Infections (STIs)</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. Taking a focused sexual history</li> <li>2. Performing physical examination as relevant</li> <li>3. Ordering relevant STI-directed investigations and interpreting the test results</li> <li>4. Making the diagnosis and formulating a list of appropriate differential diagnoses</li> <li>5. Communicating diagnosis, management and follow-up plans</li> <li>6. Prescribing appropriate medication and treatment</li> <li>7. Advocating safer sex practices</li> <li>8. Activating contact tracing</li> </ol> <p><b>Limitations:</b> A summative entrustment decision for this EPA is only applicable with adult patients with non-HIV sexually transmitted infections. Protocols exist for the management of HIV infection by CDC, TTSH</p>
EPA Entrustment Level to be Attained by Exit	Level 4

**Dermatology EPA 12**  
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Title	<b>Ordering and Performing a Skin Biopsy</b>
Specifications and limitations	<p>The practice of the EPA should align with Appropriate and Value-based Care (AVBC) principles where relevant – (i) Care is evidence-based, (ii) Care is patient-centred, (iii) Care is right-sited, (iv) Care is integrated and coordinated, and (iv) Care is cost-effective and sustainable.</p> <p>This activity contains the following elements:</p> <ol style="list-style-type: none"> <li>1. Recognising the indications of skin biopsy and diagnose the different types of skin biopsies (shave, punch, incisional, excisional)</li> <li>2. Performing skin biopsy appropriate to indication, type of lesion, site of lesion</li> <li>3. Identifying histological patterns of common skin diseases</li> <li>4. Interpreting the histology report with clinicopathological correlation and generating a list of relevant differential diagnoses</li> <li>5. Following up on skin biopsy performed to ensure subsequent care management</li> <li>6. Knowing when to biopsy multiple sites or to perform serial biopsies in complicated cases</li> </ol> <p><b>Limitations:</b> N/A</p>
EPA Entrustment Level to be Attained by Exit	Level 4