**CODE**

**Community Outreach & Dermatology Education**

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	+ Oregon Dermatology Society (ODS)
	+ Oregon Health and Sciences University (OHSU)
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**Abstract**

Purpose

* To create a case-based teleconferencing system connecting dermatologists in the Pacific Northwest.

Scope

* 132 dermatology practitioners (MD, PA, NP) were registered to use the CODE platform. 50 conferences were orchestrated through CODE thus far, resulting in the presentation of almost 200 patient cases. 50 CME didactic presentations were created, presented, and archived for participant access. On average, each case saved 45 miles of patient travel. Without CODE, the presenters estimated that 20% of cases would have needed an additional specialist consultation or referral. 13% of cases presented were pediatric patients. 57% of cases were female patients. 75% of cases presented had a skin biopsy that was reviewed with a dermatopathologist as part of the case presentation.

Methods

* An online platform was designed and developed to organize conference activities and regulate access to the conference materials. The platform collects case data and weekly CME, and stores them securely for conference use.

Results

* Since going live in 2017, the CODE teleconferencing platform has streamlined regional access to OHSU dermatology grand rounds conference. Centralized web-based access to scheduling, case documents, and materials for moderator preparation has led to increased remote participation in the conference. In addition to traditional live (in-person) participation, we now have 2-10 dermatologists contributing to the conference from the comfort of their office or home each week. This has allowed increased participation from dermatology providers in rural areas (coastal/Eastern/central Oregon), satisfying one of the main aims of the grant. Access to these conferences has improved patient care by allowing remote co-management of difficult dermatology cases between local dermatologists and academic sub-specialists without the need for patient travel and avoiding scheduling delays. Participating dermatologists have reported increased satisfaction with the conference with CODE management, and the weekly CME talks have been repeatedly referenced by participants. The CME talks have fulfilled the project aim of promoting evidence-based standards.

Key Words

* Telemedicine, teledermatology, CME, ECHO, evidence-based medicine, rural

**Purpose**

* + The goal of this proposal was to create a teleconferencing system by which dermatologists in Oregon could connect, share challenging cases, and access expert opinion. The CODE project delivers a weekly case-based live video conference connecting dermatologists across the Pacific Northwest region with dermatology sub-specialists at OHSU. In addition, a weekly didactic session provided in depth reviews of disease states seen in previous cases and highlighted best practice protocols. This project supports rural dermatologists by connecting them to a knowledge sharing network, providing an accessible platform for consultations, providing a relevant CME experience, and increases professional satisfaction by connecting peers and fostering community relationships.

**Scope**

* + The CODE conference is held weekly at OHSU’s Center for Health and Healing and delivers a live video conference to dermatology professionals throughout Oregon and Washington, providing an opportunity for dermatologists to connect, collaborate, share challenging cases, review relevant medical literature, share expert opinion, and access CME opportunities. The primary goals of the CODE conference are to provide opportunities for dermatologists to upscale their knowledge through review of challenging cases and to increase professional satisfaction by connecting with peers and fostering community relationships. Selected cases include rare or uncommon dermatological conditions; common diseases with unusual presentations; and known diagnoses with unusual treatment courses. At each conference, a series of clinically interesting and/or difficult cases are presented by dermatologists, physician assistants, nurse practitioners, clinical university faculties, and other specialties for assistance in diagnosis, treatment options, or for educational value.
	+ Patients participate either “live” by being present in-person for patient viewing or “virtually” through review of photographs and other relevant information. For live cases, each CODE conference begins in a clinic setting - 30 minutes are provided for conference participants to interview patients and examine relevant skin findings. After viewing is complete and the patient contact has conlcuded, attendees move to a conference room and begin the live video conference.
	+ The conference is led by clinical faculty and begins with a 5 minute topic-focused CME review presentation before transitioning to a discussion of up to 5 clinical cases. An expert moderator is responsible for guiding the discussion and managing the case schedule. The details of each clinical case is provided by the submitting dermatologist and the conference includes a discussion of: 1) morphologic description; 2) differential diagnosis; and 3) review of dermatopathology with a digitalized clinical/pathological correlation. Each case is closed with a consensus diagnosis and treatment options.
* **Methods**
	+ The CODE survey study established a tracking mechanism by surveying attendees and patients after each conference. These surveys were used to create a data repository for future study. The study was limited to those participants who chose to partake in the survey questionnaire.
* **Results**
	+ Since going live in 2017, the newly created CODE teleconferencing platform has streamlined regional access to OHSU dermatology grand rounds conference. Centralized web-based access to scheduling, case documents, and materials for moderator preparation has led to increased remote participation in the conference. In addition to traditional live (in-person) participation, we now have 2-10 dermatologists contributing to the conference from the comfort of their office or home each week. This has allowed increased participation from dermatology providers in rural areas (coastal/Eastern/central Oregon), satisfying one of the main aims of the grant. Access to these conferences has improved patient care by allowing remote co-management of difficult dermatology cases between local dermatologists and academic sub-specialists without the need for patient travel and avoiding scheduling delays. Participating dermatologists have reported increased satisfaction with the conference with CODE management, and the weekly CME talks have been repeatedly referenced by participants. The CME talks have fulfilled the project aim of promoting evidence-based standards.
	+ 132 dermatology practitioners (MD, PA, NP) were registered to use the CODE platform. 50 conferences were orchestrated through CODE thus far, resulting in the presentation of almost 200 patient cases. 50 CME didactic presentations were created, presented, and archived for participant access. On average, each case saved 110 miles of patient travel. Without CODE, the presenters estimated that 20% of cases would have needed an additional specialist consultation or referral. 13% of cases presented were pediatric patients. 57% of cases were female patients. 75% of cases presented had a skin biopsy that was reviewed with a dermatopathologist as part of the case presentation.
* **List of Publications and Products**
	+ Web platform can be found at: <https://codederm.ohsu.edu/>

