

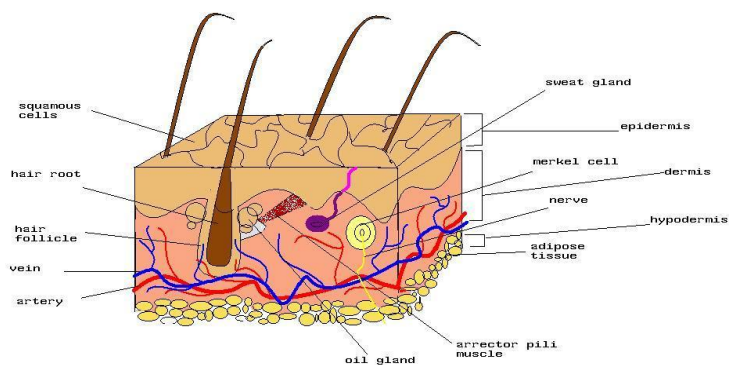
# Welcome to Dermatology at Chesterfield

## Student Information Pack

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**Welcome to Dermatology!!**

We have put together this information pack to help give you some useful information about the Dermatology Department. We hope it is useful but it is by no means exhaustive and questions are always welcomed.

The dermatology out-patient service is a busy clinic providing specialist services to patients across Derbyshire. Patients are referred to us from primary care with a wide range of skin conditions.

About half of referrals are changing lesions/ skin cancer and half inflammatory conditions.

The most common inflammatory conditions are Eczema, Psoriasis and Acne.

Some clinics are specialised for people with changing lesions or inflammatory conditions or Acne and others are generalised clinics for all and any skin conditions!

Some clinics are consultant/ Dr led and some are nurse led.

The dermatology department provides specialised treatments in dedicated sessions including:

Skin camouflage

Patch testing

Phototherapy

Skin Surgery

Dressing's clinic

Photo Dynamic Therapy (PDT)

You will be allocated a mentor to help support you during your placement.

### **Consultant Dermatologists**

Graham Colver (Department lead), Stam Oikonomou (locum), Boris Dimitrov (Locum)

**Associate Specialists** - Lathika Wickramasinghe, Karolina Nemeth-Rospopa

### **Nursing Staff**

Karen Greenfield (Matron, Nurse Practitioner Inflammatory Skin Disease)

Nicola Cooke (Skin Cancer Clinical Nurse specialist)

Emma Eden (Trainee Skin Cancer Nurse/Staff Nurse)

Judith Whelan (Department Sister)

Senior Staff Nurses: Jane Butt, Pam Grasby

Staff Nurses: Melisa Bulloch, Louise Mahoney, Laura Wilmot

Department Practitioners: Amanda Gascoigne, Toni Randell.

Healthcare Assistants: Pat Moslin, Karen Beasley, Tina Lloyd, Claire Whitbread, Jules Taylor, Sam Adkin

### **Admin Staff**

Department Secretary: Terresa Goodwin

Typist: Tina Smith

Admin Assistant: Jade Evans

### **Department Phone Numbers**

Secretaries office: 01246 513106. Fax 01246 512696

Staff Room: 01246 516582

Karen and Judith's Office:01246 516133

Phototherapy: 01246 513435

For Operator dial 0

To bleep dial 85, (there is then a pre-recorded message) then enter 3 digit bleep number followed by extension number you are dialling from, replace handset.

Security 7777

Cardiac arrest/ Medical Emergency 2222

## **Phototherapy (CEDLT)**

A range of dermatological conditions can be treated with phototherapy, the most common being eczema and psoriasis. Patients have treatment either twice or three times a week and a course of treatment lasts normally between 8 and 12 weeks. As many conditions treated with phototherapy are chronic repeat courses may be required.

The Phototherapy department is open the same hours as the clinic (9.00 – 5.00, Mon – Thursday; 9.00 – 1.00 Friday)

It is staffed on a rotational basis by a member of the Nursing Staff. We have one TL01 narrow band UVB machine; one UVA machine for oral PUVA; and a hand and foot UVA machine for topical PUVA.

Patients are referred for phototherapy by Drs/ specialist nurses in clinic. They will complete a yellow referral form with the patient (see appendix) and the patient will then be added to a waiting list. They will be contacted when a place becomes available to start treatment. Urgent cases should be discussed the one of the nurses. There are information leaflets available for patients about phototherapy treatments.

During Treatment if the Phototherapy nurse feels the patient needs reviewing they will speak to the referring Doctor directly.

On completion of treatment the patient's medical notes will be returned to the referring doctor and a follow –up appointment arranged. Phototherapy documentation is filled in the medical notes.

## **Patch Testing (CEDPT)**

Patch testing is utilised to investigate if a patient has a skin allergy (contact dermatitis) to particular products. The clinician will decide following history taking and consultation which series or products the patient needs patch testing to.

### **Series Available**

BCDS (British Contact Dermatology Series)

Preservatives

Plastics and Glues

Cosmetics

Peri-anal and Vulvul

Shoe series  
Dental and metals  
Hairdressing  
Clothing and dye  
Plants  
Rubber

Details of the products in each series can be found on laminated forms kept on the corridor bookshelf.

Patch testing is to identify delayed sensitivity therefore the procedure takes place over 5 days and the final reading is done on the Friday after the patches are applied on the Monday.

The patch tests are applied by a nurse on Monday, reviewed by the nurse on Wednesday ; and the results are read and discussed on Friday by a Dr and any positive reactions or sensitivities will be discussed with the patient and supporting information leaflets given.

A follow – up appointment will then be made with the referring doctor.

**Patch testing should be postponed /avoided if the patient is taking oral steroids, anti-histamines or immune suppressive treatments to avoid false negative results.**

## **Surgery**

**(Various clinic codes – NCMO, KGMO, LWMO, JS3MO, LCMMO)**

There are two operating theatres in the dermatology department that are well utilised! Either minor ops and/ or day cases are performed on a daily basis.

We remove many lesions in dermatology including lots of skin cancers (of which there are different types). We also remove some benign lesions if they are troublesome/ problematic.

In addition we perform diagnostic biopsies as some conditions require histological information/ conformation to aid in treatment.

There are different methods of removing lesions/ taking biopsies and you will become familiarised with these.

Minor ops are smaller, straight forward procedures like diagnostic biopsies and simple excisions. Some minor op lists are done by nurses.

Day case procedures are more complex, larger procedures that are only performed by doctors, with the assistance of a scrub nurse.

All procedures are performed under local anaesthetic.

We have a recovery room next to the operating theatres where patients can spend a short time after their procedure until they feel well enough to go home. This time is also utilised to explain post op care to patients/ relatives.

The department has specific Dermatology consent forms and orange histology forms which the clinician performing the procedure will complete.

A surgical checklist is used for all procedures as well as a histology record for all samples taken for analysis and a theatre register.

We have 3 different types of surgical instrument packs

Minor op set – 4 instruments

Excision set – 9 instruments

Cutaneous set – 13 instruments (generally required for day cases)

The sets after use are returned to CSSD for sterilising.

**If the patient takes Warfarin we like them to have their INR checked 24 hours prior to their operation/ procedure. The clinician referring the patient for the surgical procedure should explain to the patient how to arrange this.**

**Patient Information leaflets** are available in the clinic rooms about out-patient skin surgery and different types of skin cancers.

## **Dressings Clinic (CEDDR)**

The dressing's clinic runs every day and is staffed by either one or two nurses.

Patients can be booked into the dressing's clinic for leg dressings/ bandages/ compression; post op wound review/ removal of sutures, wet/ dry wrap dressings.

The nurses in the dressing's clinic manage the diary for these appointments.

Some patients have pre booked appointments in the dressing's clinic but also some patients may come through to the dressings room from the clinic if they require dressings/ topical treatment application on the day.

We refer patients to the District/ community Nursing Service when required. The nurses in the dressing's clinic will correspond/ liaise/ communicate with the community nursing service as necessary.

Patients with leg ulcerations that aren't improving in the community are sometimes referred to dermatology for a specialist opinion. The Dr will review these patients and advise treatment accordingly. This will then be applied in the dressing's clinic. These patients often continue to come to the dressing's clinic for regular review until their condition improves and they can be discharged back to community care.

We have a dressings proforma letter for corresponding with the district/ practice nursing team to keep them informed of patients progress and there treatment. (see appendix)

## **Nurse- Led Clinics**

Nicola Cooke sees both new and follow-up patients with changing lesions/ skin cancer. She is able to see, treat and discharge patients. Nicola is the key-worker for patients with confirmed / suspected skin cancer and is contactable if patients have questions/ concerns that need addressing in-between appointments. Nicola attends the Skin Cancer MDT which is held fortnightly at 12.30 on a Wednesday. Nicola is instrumental in organising multi-disciplinary care, appointments/ referrals/ scans etc. and keeping patients informed about their treatment and care pathway. The nurse skin cancer clinic code is CEDSC.

Karen Greenfield is the department Matron and as Inflammatory Skin Disease Nurse Practitioner sees follow-up patients with inflammatory skin conditions. Karen reviews and orders blood tests for patients on systemic treatment, reviews/ optimises topical therapies, devises individualised treatment plans is able to make adjustments to treatments and is an independent nurse prescriber. Karen teaches patients self-administration of subcutaneous Methotrexate and arranges the necessary home-delivery service/ shared care.

Karen organises biologic treatments (specialise parental treatments for patients with severe psoriasis) and reviews their progress. She also acts as key worker for patients with inflammatory skin disease and is contactable in-between appointments if patients have any queries/ concerns. Karen's clinic code is CED1D (Monday and Friday)

Judith Whelan oversees the day-to-day running of the Department and has a nurse led Isotretinoin/ pregnancy prevention clinic for female Patients taking Isotretinoin for Acne. (this drug is teratogenic)

Judith's clinic code is CED2B (Tuesdays)

A once fortnightly cosmetic camouflage clinic (code CEDCF) is run by Amanda Gascoigne and Karen Beasley on a Thursday afternoon. They can provide camouflage for tattoos, scars, altered pigmentation, some rashes and birth marks.

PDT (photo dynamic therapy) is a specialised light treatment used to treat some skin cancers, pre-cancerous lesions and sun damaged skin. The treatment takes place in the theatres on a Thursday and is administered by Nicola.

## **Patient Information Leaflets**

We have a wide range of pre-printed patient information leaflets for dermatological conditions and treatment. They are kept in folders in alphabetical order on the bookshelf on the clinic corridor. Feel free to browse when you can.

If we don't have the relevant pre-printed leaflet then the following web-sites have helpful and relevant information leaflets along with patient information leaflets that can be printed.

[www.dermnetnz.org](http://www.dermnetnz.org)

[www.bad.co.uk](http://www.bad.co.uk)

## **And finally...**

We have lots of books and information in the department so please help yourself to anything you would like to look through.

There is a lot to learn in dermatology and it will be very different to anywhere you have experienced before.

Everyone in the department is here to help you learn, so always ask about anything you are unsure about.



