

Residency Personal Statement

I never expected the volunteer role that I took on as a graduate student to be a such a transformative experience. As an unpaid intern for a nonprofit organization called PathPoint, I created a health advocacy program for developmentally-disabled adults. I was interested in helping an underserved group improve their health and wellness. I came up with and led a practical healthy living regimen customized for each participant. I visited their homes, reviewed the contents of their kitchen pantries, and modified their diets with food replacement plans. I also led group exercises, cooking events, and educational sessions. Seeing the change in participants as they embraced healthy habits taught me two significant lessons: the importance of creating opportunities to help people improve their lives, and that I had the ability to help.

It was especially rewarding to be able to influence the health and well-being of others when, as a child, I felt helpless to do so for my father during his lengthy struggle with two dermatological diseases. After surviving a grim diagnosis of an invasive melanoma, he then battled pityriasis rubra pilaris for two years. His skin turned red, his hair fell out, and I saw how much he suffered from the pain of feeling as if his skin was on fire. Shortly after, I faced my own struggle. I battled a severe case of acne that required multiple rounds of Accutane and cortisone and significantly impacted my confidence and self-esteem, making me reluctant to go to school and be seen by friends and classmates.

The impact that these diseases had on my family made me appreciate the degree to which skin pathology can affect both a person's physical and psychological well-being. I was fascinated by the connection between the mind, body, and skin and filled with a desire to take action, provide support and improve the lives of people suffering from medical and dermatological issues. I never again wanted to feel helpless like I did as a child, so throughout my education and training I sought out opportunities like PathPoint that allowed me to influence the health and well-being of those who would otherwise not receive quality care. In medical school I revived the dormant Dermatology Interest Group to provide opportunities for fellow students to use their skills to benefit the community. As president, in addition to developing a lecture series, journal clubs and rotations, I led our interest group in providing skin cancer screenings at a clinic in [REDACTED] for people who didn't have the resources or finances for a regular dermatology screening visit. I also served alongside the Internal Medicine Association on my campus to teach students at three local elementary schools how to adopt healthier diets, exercise regimens, and prevent obesity and diabetes. These experiences helped to further develop my expertise and interest in creating opportunities for people to improve their lives.

I was able to apply this philosophy in a one-on-one experience I had with a patient during my internship in [REDACTED]. I was assigned to an underserved, low-income male patient who presented with a mysterious vesicular and erythematous rash distributed throughout his torso and extremities. For years, the patient had avoided going out in public because the rash was constantly leaking fluid and soaking his clothes, forcing him to change his shirt every 20 minutes and sleep on multiple towels at night. After carefully noting some subtle abnormalities in his labs and thoroughly interviewing him, I learned that he had used intravenous drugs just once, nearly 15 years ago. This prompted me to order a hepatitis panel and find that he was positive for hepatitis C. His rash had been a cutaneous manifestation of an internal issue as his body was

redistributing fluid to his skin due to a cirrhotic liver. This case was an opportunity for me to think like a dermatologist in order to diagnose and provide the proper solution for a patient who otherwise would not have received it.

Today, I continue to create opportunities for patients looking for solutions to their skin and cosmetic conditions through my current role as an assisting physician and sub-investigator. I run clinical trials to test the efficacy and safety of new therapies, often for people who can't afford standard treatments or who have tried conventional therapies and failed. The clinical trials offer an opportunity for these patients to better or even resolve their skin issues and improve their quality of life. Many patients I see have cosmetically disfiguring lesions, such as keloids and extensive scarring from multiple skin cancer surgeries, with significant psychosocial consequences. Studies I have designed and administered include using a non-invasive injectable RNA inhibitor to treat squamous cell lesions, a microneedle sticker array to treat basal cell cancer, and topical creams and placental exosome injections to treat keloids. If approved for market use, these therapies may improve patients' quality of life by replacing traditional excisional treatments that cause extensive scarring and keloid recurrences.

These many personal and professional experiences have taught me the importance of taking initiative to find solutions to the health and well-being of those in need. The advanced training provided in your residency program would expose me to new ideas and perspectives from well-trained and experienced practitioners, enabling me to further my diagnostic skills in order to treat patients with dermatological conditions that span both the physical and psychosocial level. I want to continue to be a problem solver and create opportunities to improve the lives of others through dermatology.