

Brahmbhatt Meera (Orcid ID: 0000-0003-0065-8948)
Amin Bijal (Orcid ID: 0000-0002-7214-8042)
Fullen Douglas (Orcid ID: 0000-0002-2524-4509)
Seykora John (Orcid ID: 0000-0003-0383-031X)

“Ethical and Professionalism Issues in Dermatopathology: A Cross-Sectional Survey of American Society of Dermatopathology Members”

Meera Brahmbhatt, MD, MS¹, Howa Yeung, MD, MS¹, Gerard Vong, PhD², Jill Allbritton, MD⁴, Bijal Amin, MD⁵, Eugene D. Dulaney, MD⁶, Douglas R. Fullen, MD⁷, Robert E. LeBlanc, MD⁸, Beth S. Ruben, MD⁹, John T. Seykora MD, PhD¹⁰, Nikki S. Vyas, MD¹¹, Benjamin K. Stoff, MD, MA^{1,2,3}

Author Affiliations:

1. Emory University School of Medicine, Department of Dermatology, Atlanta, GA
2. Emory University, The Emory Center for Ethics, Atlanta, GA
3. Emory University School of Medicine, Department of Pathology and Laboratory Medicine, Atlanta, GA
4. University of Maryland School of Medicine, Division of Dermatology, Baltimore MD and Joint Pathology Center, Division of Dermatopathology, Silver Spring MD
5. Albert Einstein College of Medicine, Montefiore Medical Department of Pathology and Internal Medicine, Division of Dermatology, Bronx, NY
6. University of Minnesota Medical School, Department of Pathology and Laboratory Medicine, Minneapolis, MN and Aurora Diagnostics Twin Cities Dermatopathology, Plymouth, MN
7. University of Michigan School of Medicine, Department of Pathology, Dermatopathology section, Ann Arbor, MI
8. Dartmouth-Hitchcock Medical Center, Department of Pathology and Laboratory Medicine, Lebanon, NH
9. University of California, San Francisco School of Medicine, Departments of Dermatology/Dermatopathology, San Francisco, CA and Palo Alto Medical Foundation Medical Group, Palo Alto, CA
10. Perelman School of Medicine at the University of Pennsylvania, Departments of Dermatology and Pathology, Philadelphia, PA
11. Icahn School of Medicine at Mount Sinai Hospital, Department of Pathology, Division of Dermatopathology, New York, NY

Key words (5): ethics, dermatopathology, survey, professionalism, resource utilization

Corresponding Author:
Benjamin K. Stoff, MD, MA
Department of Dermatology
Emory School of Medicine
1525 Clifton Rd NE

This is the author manuscript accepted for publication and has undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record. Please cite this article as doi: [10.1111/cup.13946](https://doi.org/10.1111/cup.13946)

Atlanta, GA 30312
bstoff@emory.edu
Acknowledgements

The authors acknowledge Leah Smith for her assistance in survey distribution.

Abstract

Background: Data regarding ethical/professional issues affecting dermatopathologists are lacking despite their importance in establishing policy priorities and educational content for dermatopathology.

Methods: A 14-item cross-sectional survey about ethical/professional issues in dermatopathology was distributed over e-mail to members of the American Society of Dermatopathology (ASDP) from June to September 2019.

Results: Two hundred sixteen surveys were completed, with a response rate of 15.3%. Respondents ranked appropriate and fair utilization of healthcare resources (n=83 or 38.6%) as the most often encountered ethical/professional issue. Conflict of interest was ranked as the most urgent or important ethical/professional issue (n=83 or 39.3%). One hundred thirty-three (61.6%) respondents felt “somewhat” or “not at all” well equipped to handle ethical dilemmas in practice and 47 (22.8%) respondents identified a major or extreme burden (e.g. have considered resigning/retiring) due to ethical challenges.

Conclusions: Areas of priority in ethics and professionalism issues can guide future policy and educational content in dermatopathology.

Key words (5): ethics, dermatopathology, survey, professionalism, resource utilization

Introduction

Recent publications highlight ethical/professional issues in a variety of medical specialties⁽¹⁻³⁾. However, there are few reports in the medical literature regarding ethical/professional issues specific to pathology, and even fewer to dermatopathology⁽⁴⁻⁸⁾. With trends in the field like corporatization (i.e. consolidation of laboratories, investment by private equity firms and other for-profit companies), development of dermatopathology laboratories within dermatology practices, and unique billing arrangements, ethical/professional issues in dermatopathology are more prevalent and important than ever. Published literature on the topic is composed of anecdotal reports⁽⁶⁻⁸⁾. Survey data regarding ethical/professional issues faced by dermatopathologists and dermatopathologists in training are lacking. These data can establish policy priorities and guide education in dermatopathology. We assessed ethical and professionalism issues encountered by American Society of Dermatopathology (ASDP) members using an anonymous cross-sectional survey.

Materials and Methods

This study was approved by the institutional review board. Members of ASDP, the largest organization of dermatopathologists in the United States, were surveyed from June to September 2019. The ASDP maintains a confidential e-mail listserv of all members, to which only ASDP administrators have access. All members of the ASDP with valid e-mail addresses were eligible for this study. The ASDP membership includes attending dermatopathologists, fellowship trainees, and residents in dermatology and pathology.

A 14-item survey was created and approved by members of the ASDP Ethics Committee and approved by the ASDP Executive Committee. It was reviewed and revised by a bioethicist. It contained 13 multiple choice items and 1 free-text item (Appendix Figure 1). Participants ranked the three issues of ethics and professionalism most often encountered in their practice of and/or experience with dermatopathology. They separately ranked the three issues that they believed were most urgent or important. Eight major ethical and professional issues that could be encountered in practice were specified (Table 1). These issues were derived from review of a textbook on ethical/professional issues in dermatology, core competency domains from the American Society of Bioethics and Humanities, content of an ethics short course at ASDP Annual Meeting from 2017, and previously reported surveys and cases^(4,5, 8-10). Participant characteristics such as years in practice, gender, dermatopathology practice setting, US region, nature of employment, specialty in residency, and proportion of professional time practicing dermatopathology were collected. Respondents were asked how often they encountered ethical and/or professional challenges, how well equipped they were to manage these challenges, and what effect these challenges have on their practice. Respondents were also asked their view on the optimal venue for educational content about ethics and professionalism. Respondents were then asked to briefly describe a de-identified recent case or scenario they experienced that was ethically challenging in their dermatopathology practice.

The survey was conducted using Survey Monkey® and distributed via an emailed link to the ASDP listserv by ASDP staff using a modified Total Design Method by D.A. Dillman⁽¹¹⁾. This method utilizes repeated and personal contact aimed to increase survey response rate⁽¹²⁾. The initial email on 6/17/2019 was succeeded by follow-up emails after 1 week, 3 weeks, and 10 weeks.

Response rate was calculated from the number of completed surveys divided by the average number of surveys delivered each week to the ASDP listserv. An average was calculated due to variability in email listserv distribution. Results of the surveyed questions are summarized as percentages; missing data were excluded from analysis.

We also explored whether respondent characteristics were associated with greater likelihood of ranking of each ethical/professional issue as one of the most commonly encountered issues or one of the most urgent or important issues, using chi-square or Fisher's exact test as appropriate. To account for multiple post-hoc comparisons, $P < 0.01$ was considered statistically significant in 2-sided tests.

Results

Among an average of 1,413 surveys emailed to the ASDP listserv across the study period, 216 surveys were completed, resulting in an overall response rate of 15.3%. Initial survey distribution led to 86 completed surveys. Distributions at 1 week, 3 weeks, and 10 weeks thereafter resulted in 55, 44, and 31 additional completed surveys, respectively.

Table 2 summarizes respondent demographics. Eleven (5.1%) respondents were in training, while 127 (58.8%) have been practicing for more than 10 years. 94 (43.5%) of those surveyed practice in an academic setting, which includes both dermatopathology-only or multispecialty practice. Among those in private practices, 43 (19.9%) respondents practice in a dermatopathology-only laboratory, while 39 (18.1%) practice in a multispecialty group. A majority of survey participants were employees ($n=135$ or 62.5%), while 65 (30.1%) were a group partner or in a partnership track. 155 (71.8%) spent >50% of time practicing dermatopathology.

When asked to rank the top three issues most often encountered, respondents ranked appropriate and fair utilization of healthcare resources ($n=83$ or 38.6%), conflict of interest ($n=72$ or 33.5%), and the pathologist-patient/pathologist-client relationship ($n=18$ or 8.3%) (Figure 1a). The former two issues were also considered to be most urgent or important ($n=63$ or 29.9% and $n=83$ or 39.3%, respectively). Instead of the pathologist-patient/pathologist-client relationship, 18 (8.5%) respondents identified competency as another top ethical/professional issue they believed to be most urgent or important (Figure 1b).

Ethical and/or professionalism challenges were frequently encountered, with 69 (31.9%) respondents encountering these issues once per week or almost daily (Figure 2a). Only 33 respondents (15.3%) felt they were very well equipped or at an expert level to manage these challenges, while 133 (61.6%) answered "somewhat" or "not at all" well equipped (Figure 2b).

Two hundred and two (94%) respondents identify ethical/professional challenges as a burden, with 47 (22.8%) identifying them as a major or extreme burden (e.g. have considered resigning or retiring as a result) (Figure 2c), indicating that such challenges may contribute to burnout.

The three ethical/professional issues encountered most often or considered most urgent/important did not vary significantly based on the respondents' demographics of gender, residency training specialty, practice setting, practice nature, or proportion of time spent practicing dermatopathology. For the most often encountered ethical/professional issues, pathologist-patient relationship was highly ranked by respondents with fewer years of practice (in training, 54.5%; <5 years, 56.0%, 5-10 years, 28.3%; 11-20 years, 33.3%, >20 years, 20.9%, $P = 0.01$) (Table 3a). The ranking for appropriate use of healthcare resources as one of the most commonly encountered ethical/professional issues differed significantly by practice region (Midwest, 74.6%; Northeast, 97.6%; South, 86.9%; West, 76.6%; $P = 0.005$) (Table 3b). Ranking of interprofessional relationships as most urgent or important ethical/professional issues differed by respondents according to number of years in practice (in training, 27.3%; <5 years, 40.0%, 5-10 years, 35.9%; 11-20 years, 21.7%, >20 years, 10.5%, $P = 0.004$) (Table 3c).

An annual meeting short course was chosen by 79 respondents (36.6%) as the optimal venue for educational content about ethics and professionalism through ASDP. Others felt that an online CME module through the ASDP website ($n=49$ or 22.7%) and the Journal of Cutaneous Pathology ($n=48$ or 22.2%) were optimal.

The last question of the survey asked respondents to use free-text to describe a recent, ethically challenging scenario in their practice of dermatopathology. Preliminary analyses using qualitative software MAXQDA revealed the most commonly cited theme among responses as financial interests with $n=144$ out of 172 total responses. Overutilization of IHC was the most frequently mentioned subtheme ($n=45$). A formal, more extensive qualitative analysis of these data is forthcoming.

Discussion

Our study is the first to report representative survey data on ethical/professionalism issues encountered by U.S.-based dermatopathologists. Although published data are scarce, responses to our survey suggest that dermatopathologists encounter ethical/professional issues frequently, with 31.9% of our respondents reporting these issues encountered weekly to daily. As mentioned, 61.6% of those surveyed felt "somewhat" or "not at all" equipped to handle these scenarios, and 94% of respondents identified these as a burden. These results highlight a need for training in the approach to ethical issues during residency, fellowship, and beyond. A survey of pathology department chairs by Domen et. al. found that 84% of responders believed ethical/professional issues in pathology are underrecognized, and 38% thought that their current ethics training was inadequate⁽⁵⁾.

Appropriate and fair utilization of healthcare resources and conflicts of interest were the two ethical/professional issues ranked by respondents as most often encountered and most urgent/important, respectively. The patient/pathologist relationship was the third ethical/professional issue most often encountered; however, respondents felt that competency

was an issue that was more urgent/important. Ethical concerns about competency are also reported anecdotally in the dermatopathology literature⁽⁶⁾. Appropriate utilization of IHC was also most often mentioned in the free-text item.

IHC tests are an example of assurance behaviors, and one study found 95.2% of pathologists reported practicing assurance behaviors to alleviate malpractice concerns⁽¹³⁾. From an ethical perspective, assurance behaviors may be supported by arguments that they lead to the most accurate diagnosis (an example of patient beneficence). However, taken into an extreme, these practices result in an increased expense to patients and the system as a whole (a counter argument using the principle of justice).

While conflict of interest was also a top concern among pathologists in Domen's study, utilization of healthcare resources was not mentioned. Respondents in Domen's study were pathology department chairs, perhaps reflecting different experiences than ASDP members. Domen's survey was conducted 17 years prior to our study. Therefore, appropriate utilization of resources may represent a bigger problem currently than it did in the early 2000s. Now, in the era of COVID-19, with the healthcare system strained and the proportion of uninsured patients increasing, appropriate utilization of resources is more urgent than before.

Ethical problems in the pathologist-patient/pathologist-client relationship were reported more frequently by respondents that have been practicing for fewer years than those with more time in practice. With the rise of corporatization in pathology and ever-increasing lab sizes, newer pathologists may be more removed from patients and clients than before. Newer dermatopathologists may also be increasingly concerned about the legal liability associated with dermatopathology and/or feel it is unclear if pathologists should have direct interaction with patients⁽¹⁴⁾.

Interprofessional relationships (harassment or discrimination in the workplace; unjust power dynamics; disrespect in collaboration) were more likely to be reported as an urgent/important ethical/professional issue by dermatopathologists practicing for <10 years than those practicing >20 years. In our sample, 27.3% of employees that worked in a corporate lab had been practicing <10 years. Larger corporatized labs may place strain on interprofessional relationships due to increased competition and diminished autonomy among pathologists. Less tolerance for unprofessional behavior in the workplace and greater societal recognition of this trend in recent times could also be contributing.

Finally, concerns about appropriate use of healthcare resources were more encountered in practice in the Northeast and Southern regions of the U.S. than in the West and Midwest. The Southern U.S was the region where 28.2% of respondents practice. These findings are similar to a 2011 survey of the ASDP workforce, which found that 31.6% practiced in the South⁽¹⁵⁾. Additionally, in areas where there are more tertiary care centers and second opinion consults, dermatopathologists may be more likely to order IHC to substantiate diagnoses⁽¹⁶⁾.

Limitations of the study include a low response rate leading to small sample size, cross-sectional design, potential response bias from the self-report survey, and limited validation of the survey instrument. Since respondents were from the ASDP member listserv, data may not be representative of nonmember dermatopathologists. For example, 43.5% of respondents practice

in academics, which likely does not reflect the full population of practicing dermatopathologists. There is also content overlap between categories of ethical/professional issues, such as appropriate utilization of healthcare resources and conflict of interest, and there may have been some differences in how respondents interpreted the definitions of these categories. Moreover, surveys distributed were before the COVID-19 pandemic, and therefore may not represent current pressing ethical dilemmas in dermatopathology.

Future studies will include qualitative data analysis from the survey's free text item. These data can help guide future educational content and policy in dermatopathology. For example, these data suggest that ethics education about resource utilization should be considered as part of the annual ASDP meeting in the form of a short course or other sessions. The ASDP ethics committee may consider publishing position statements on appropriate utilization of ancillary testing.

References

1. MacKenzie C, Meltzer M, Kitsis E, Mancuso C. Ethical challenges in rheumatology a survey of the American College of Rheumatology Membership. *Arthritis & Rheumatism*. 2013;65(10):2524-32. doi:10.1002/art.38077
2. Klausner A, King A, Velasquez M et al. A survey of ethically challenging issues in urological practice. *Journal of Urology*. 2011;185(4):1407-1411. doi:10.1016/j.juro.2010.12.007
3. Nwomeh B, Caniano D. Emerging ethical issues in pediatric surgery. *Pediatr Surg Int*. 2011;27(6):555-562. doi:10.1007/s00383-011-2907-3
4. Conran R, Powell S, Domen R et al. Development of professionalism in graduate medical education. *Acad Pathol*. 2018;5:1-12. doi:10.1177/2374289518773493
5. Domen R. Ethical and professional issues in pathology: A survey of current issues and educational efforts. *Hum Pathol*. 2002;33(8):779-782. doi:10.1053/hupa.2002.127446
6. Wiland H, Grant-Kels J. Ethical issues in dermatopathology. *Clin Dermatol*. 2012;30(5):476-481. doi:10.1016/j.clindermatol.2011.06.015
7. Perkins I. The importance of ethics in dermatopathology: A fellow's perspective. *J Cutan Pathol*. 2018;46(2):162-163. doi:10.1111/cup.13374
8. Grant-Kels J. Dermatologists' blind side. *J Am Acad Dermatol*. 2013;69(6):1046-1048. doi:10.1016/j.jaad.2013.09.008
9. *Code of Ethics and Professional Responsibilities for Healthcare Ethics Consultants*. 2nd ed. Glenview, IL; 2011. https://asbh.org/uploads/ASBH_Code_of_Ethics.pdf. Accessed May 7, 2019.
10. Wiland H, Kels B, Grant-Kels J. Ethical adventures in dermatopathology. In: Bercovitch L, Perlis C, ed. *Dermatoethics: Contemporary Ethics and Professionalism In Dermatology*. London: Springer; 2012:169-176.

11. Osmond M, Dillman D. Mail and telephone surveys: The total design method. *Social Forces*. 1979;57(3):1030. doi:10.2307/2577403
12. Hoddinott SN, Bass MJ. The Dillman total design survey method. *Can Fam Physician*. 1986;32:2366-8.
13. Titus L, Reisch L, Tosteson A et al. Malpractice concerns, defensive medicine, and the histopathology diagnosis of melanocytic skin lesions. *Am J Clin Pathol*. 2018;150(4):338-345. doi:10.1093/ajcp/aqy057
14. Maley A, Swerlick R, Parker D, Stoff B. Should dermatopathologists participate in diagnostic error disclosure to patients? An ethical analysis. *J Am Acad Dermatol*. 2015;72(5):901-904. doi:10.1016/j.jaad.2015.01.020
15. Suwattee P, Cham P, Abdollahi M, Warshaw E. Dermatopathology workforce in the United States: A survey. *J Am Acad Dermatol*. 2011;65(6):1180-1185. doi:10.1016/j.jaad.2010.09.733
16. Vyas N, Charifa A, Desman G et al. Observational study examining the diagnostic practice of Ki67 staining for melanocytic lesions. *Am J Dermatopathol*. 2019;41(7):488-491. doi:10.1097/dad.0000000000001379

Table 1. Categories of Ethical Issues in Dermatopathology

Category	Example
Conflict of interest	Personal financial gain from a biotechnology company or ownership in practice interfering with duty to patients; client billing arrangements; representing for-profit companies during CME activities
Appropriate and fair utilization of healthcare resources	Judicious use of IHC and other ancillary testing; limited use of "rush" or "urgent" designation for specimens based on medical need
Honesty and transparency	Diagnostic error reporting; appropriate advertising to clinicians and consumers
Informed consent	To perform molecular/genetic testing or to use tissue for research purposes; tissue ownership
Privacy and confidentiality	Sharing cases over social media and other electronic communication
Competency	Maintenance of certification; experiencing diagnostic error, burnout, impairment
The pathologist-patient/pathologist-client relationship	Making treatment recommendations in reports; conflicting reports from multiple pathology consultants; communicating directly with patients
Interprofessional relationships	Harassment or discrimination in the workplace; unjust power dynamics; other disrespect in collaboration

Table 2. Respondent Demographics

Variable		Number	%
Respondents (Total)		216	100
Gender	Female	90	41.67
	Male	122	56.48
	Prefer not to say	4	1.85
Years in Practice	In training	11	5.09
	<5 years	25	11.57
	5-10 years	53	24.54
	11-20 years	60	27.78
	>20 years	67	31.02
Practice Setting	Academic Practice (dermatopathology only or multispecialty practice)	94	43.52
	Dermatopathology only independent private laboratory	43	19.91
	Multispecialty independent private laboratory	39	18.06
	Consolidated corporate laboratory	11	5.09
	Private dermatopathology laboratory associated with a dermatology practice or group of practices	29	13.43
Employment Status	Employee	135	62.5
	Partner/partnership track	65	30.09
	Other	16	7.41
Region	Northeast	42	19.44
	South	61	28.24
	Midwest	55	25.46
	West	47	21.76
	Other	11	5.09
Training	Anatomic Pathology	36	16.67
	Anatomic Pathology and Clinical Pathology	88	40.74
	Dermatology	86	39.81
	Other	6	2.78
Practice Proportion of Dermatopathology	<25%	23	10.65
	25-50%	38	17.59
	>50%	155	71.76

Table 3. Select Demographic Comparative Analyses

(a). Pathologist-Patient Relationship Ranked as Most Often Encountered Ethical/Professional Issue (p = 0.01)

Years of Practice	Ranking as a Most Often Encountered Ethical/Professional Issue (%)
In Training	54.5
< 5 years	56
5-10 years	28.3
11-20 years	33.3
>20 years	20.9

(b). Appropriate use of Healthcare Resources Ranked as Most Often Encountered Ethical/Professional Issue (p = 0.005)

Practice Region	Ranking as a Most Often Encountered Ethical/Professional Issue (%)
Midwest	74.6
Northeast	97.6
South	86.9
West	76.6

(c). Interprofessional Relationships Ranked as Most Urgent or Important Ethical/Professional Issue (p = 0.004)

Years of Practice	Ranking as a Most Urgent or Important Ethical/Professional Issue
In Training	27.3
< 5 years	40
5-10 years	35.9
11-20 years	21.7
>20 years	10.5

Appendix

Figure 1. Survey to ASDP Members

1. Please rank the TOP 3 issues of ethics and professionalism listed below that you encounter *most often* in your practice of dermatopathology:
 - A. **Conflict of interest** (e.g. personal financial gain from a biotechnology company or ownership in practice interfering with duty to patients; client billing arrangements; representing for-profit companies during CME activities)
 - B. **Appropriate and fair utilization of healthcare resources** (e.g. judicious use of IHC and other ancillary testing; limited use of "rush" or "urgent" designation for specimens based on medical need)
 - C. **Honesty and transparency** (e.g. diagnostic error reporting; appropriate advertising to clinicians and consumers)
 - D. **Informed consent** (e.g. to perform molecular/genetic testing or to use tissue for research purposes; tissue ownership)
 - E. **Privacy and confidentiality** (e.g. sharing cases over social media and other electronic communication)
 - F. **Competency** (e.g. maintenance of certification; experiencing diagnostic error, burnout, impairment)
 - G. **The pathologist-patient/pathologist-client relationship** (e.g. making treatment recommendations in reports; conflicting reports from multiple pathology consultants; communicating directly with patients)
 - H. **Interprofessional relationships** (e.g. harassment or discrimination in the workplace; unjust power dynamics; other disrespect in collaboration)

2. Please rank the TOP 3 issues of ethics and professionalism listed below that you believe are *most urgent or important* in your practice of dermatopathology:
 - A. **Conflict of interest** (e.g. personal financial gain from a biotechnology company or ownership in practice interfering with duty to patients; client billing arrangements; representing for-profit companies during CME activities)
 - B. **Appropriate and fair utilization of healthcare resources** (e.g. judicious use of IHC and other ancillary testing; limited use of "rush" or "urgent" designation for specimens based on medical need)
 - C. **Honesty and transparency** (e.g. diagnostic error reporting; appropriate advertising to clinicians and consumers)
 - D. **Informed consent** (e.g. to perform molecular/genetic testing or to use tissue for research purposes; tissue ownership)
 - E. **Privacy and confidentiality** (e.g. sharing cases over social media and other electronic communication)
 - F. **Competency** (e.g. maintenance of certification; experiencing diagnostic error, burnout, impairment)
 - G. **The pathologist-patient/pathologist-client relationship** (e.g. making treatment recommendations in reports; conflicting reports from multiple pathology consultants; communicating directly with patients)
 - H. **Interprofessional relationships** (e.g. harassment or discrimination in the workplace; unjust power dynamics; other disrespect in collaboration)

3. How long have you been in practice?
 - A. In training
 - B. <5 years
 - C. 5-10 years
 - D. 11-20 years
 - E. >20 years

4. What is your gender?
 - A. Female
 - B. Male

- Author Manuscript
- C. Neither/Prefer not to say
5. What is your predominant dermatopathology practice setting?
 - A. Academic practice (dermatopathology only or multispecialty practice)
 - B. Dermatopathology only independent private laboratory
 - C. Multispecialty independent private laboratory
 - D. Consolidated corporate laboratory
 - E. Private dermatopathology laboratory associated with a dermatology practice or group of practices
 6. What is the nature of your employment as a dermatopathologist?
 - A. Employee
 - B. Partner/partnership track
 - C. Other
 7. In what US region do you practice predominantly?
 - A. Northeast
 - B. South
 - C. Midwest
 - D. West
 - E. Other (e.g. I do not practice in the US)
 8. In what specialty was your residency?
 - A. Anatomic Pathology
 - B. Anatomic Pathology and Clinical Pathology
 - C. Dermatology
 - D. Other
 9. What proportion of your professional time is spent practicing dermatopathology?
 - A. <25%
 - B. 25-50%
 - C. >50%
 10. How often do you encounter ethical and/or professionalism challenges in your practice of dermatopathology?
 - A. Never
 - B. Rarely (a few times per year)
 - C. Sometimes (approximately once per month)
 - D. Often (approximately once per week)
 - E. Very often (almost daily)
 11. How well equipped do you feel to manage these challenges?
 - A. Not at all
 - B. Somewhat well-equipped
 - C. Well-equipped
 - D. Very well-equipped
 - E. Expert
 12. What effect do ethical and/or professionalism challenges have on your practice?
 - A. None at all
 - B. Minor burden
 - C. Major burden
 - D. Extreme burden (e.g. I have considered resigning or retiring as a result)
 13. Which of the following is the optimal venue for educational content about ethics and professionalism through ASDP?
 - A. Journal of Cutaneous Pathology

- B. Annual meeting short course
- C. On-line CME module through ASDP website
- D. Emailed content from ASDP
- E. Other: please specify

14. In the space below, briefly describe (in one paragraph) a recent case or scenario you've experienced that was ethically challenging in your practice of dermatopathology. (Please exclude ALL identifiers).

Definition of an ethical conflict: *Choice between what seems to be equally desirable or undesirable alternatives, each of which may be justified by an ethical principle.*

“Ethical and Professionalism Issues in Dermatopathology: A Cross-Sectional Survey of American Society of Dermatopathology Members”

Meera Brahmabhatt, MD, MS¹, Howa Yeung, MD, MS¹, Gerard Vong, PhD², Jill Allbritton, MD⁴, Bijal Amin, MD⁵, Eugene D. Dulaney, MD⁶, Douglas R. Fullen, MD⁷, Robert E. LeBlanc, MD⁸, Beth S. Ruben, MD⁹, John T. Seykora MD, PhD¹⁰, Nikki S. Vyas, MD¹¹, Benjamin K. Stoff, MD, MA^{1,2,3}

Author Affiliations:

1. Emory University School of Medicine, Department of Dermatology, Atlanta, GA
2. Emory University, The Emory Center for Ethics, Atlanta, GA
3. Emory University School of Medicine, Department of Pathology and Laboratory Medicine, Atlanta, GA
4. University of Maryland School of Medicine, Division of Dermatology, Baltimore MD and Joint Pathology Center, Division of Dermatopathology, Silver Spring MD
5. Albert Einstein College of Medicine, Montefiore Medical Department of Pathology and Internal Medicine, Division of Dermatology, Bronx, NY
6. University of Minnesota Medical School, Department of Pathology and Laboratory Medicine, Minneapolis, MN and Aurora Diagnostics Twin Cities Dermatopathology, Plymouth, MN
7. University of Michigan School of Medicine, Department of Pathology, Dermatopathology section, Ann Arbor, MI
8. Dartmouth-Hitchcock Medical Center, Department of Pathology and Laboratory Medicine, Lebanon, NH
9. University of California, San Francisco School of Medicine, Departments of Dermatology/Dermatopathology, San Francisco, CA and Palo Alto Medical Foundation Medical Group, Palo Alto, CA
10. Perelman School of Medicine at the University of Pennsylvania, Departments of Dermatology and Pathology, Philadelphia, PA
11. Icahn School of Medicine at Mount Sinai Hospital, Department of Pathology, Division of Dermatopathology, New York, NY

Key words (5): ethics, dermatopathology, survey, professionalism, resource utilization

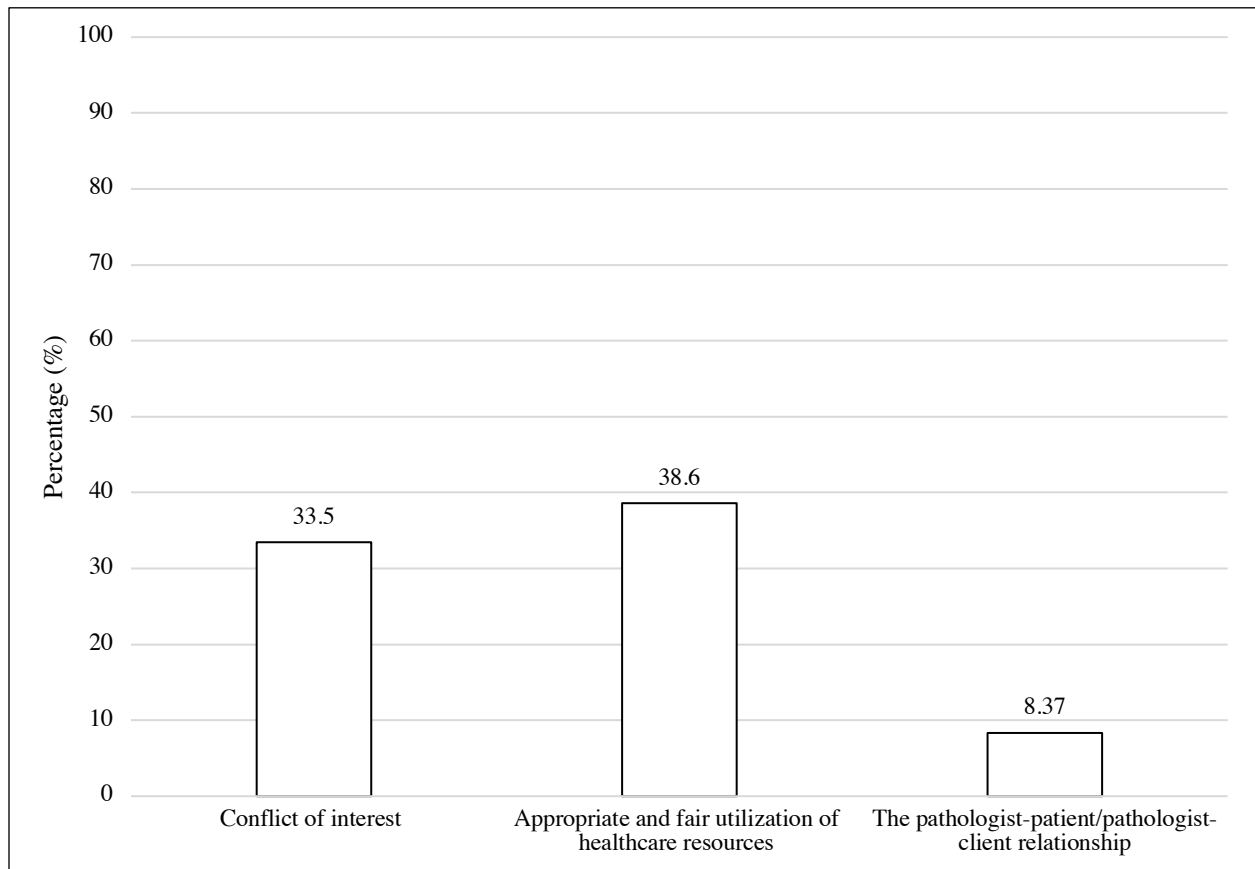
Corresponding Author:
Benjamin K. Stoff, MD, MA
Department of Dermatology
Emory School of Medicine
1525 Clifton Rd NE
Atlanta, GA 30312
bstoff@emory.edu

Acknowledgements

The authors acknowledge Leah Smith for her assistance in survey distribution.

Figure 1. Ranking of Ethical Issues

(a) Top 3 Ethical Issues Encountered Most Often



(b) Top 3 Ethical Issues Deemed Most Urgent/Important

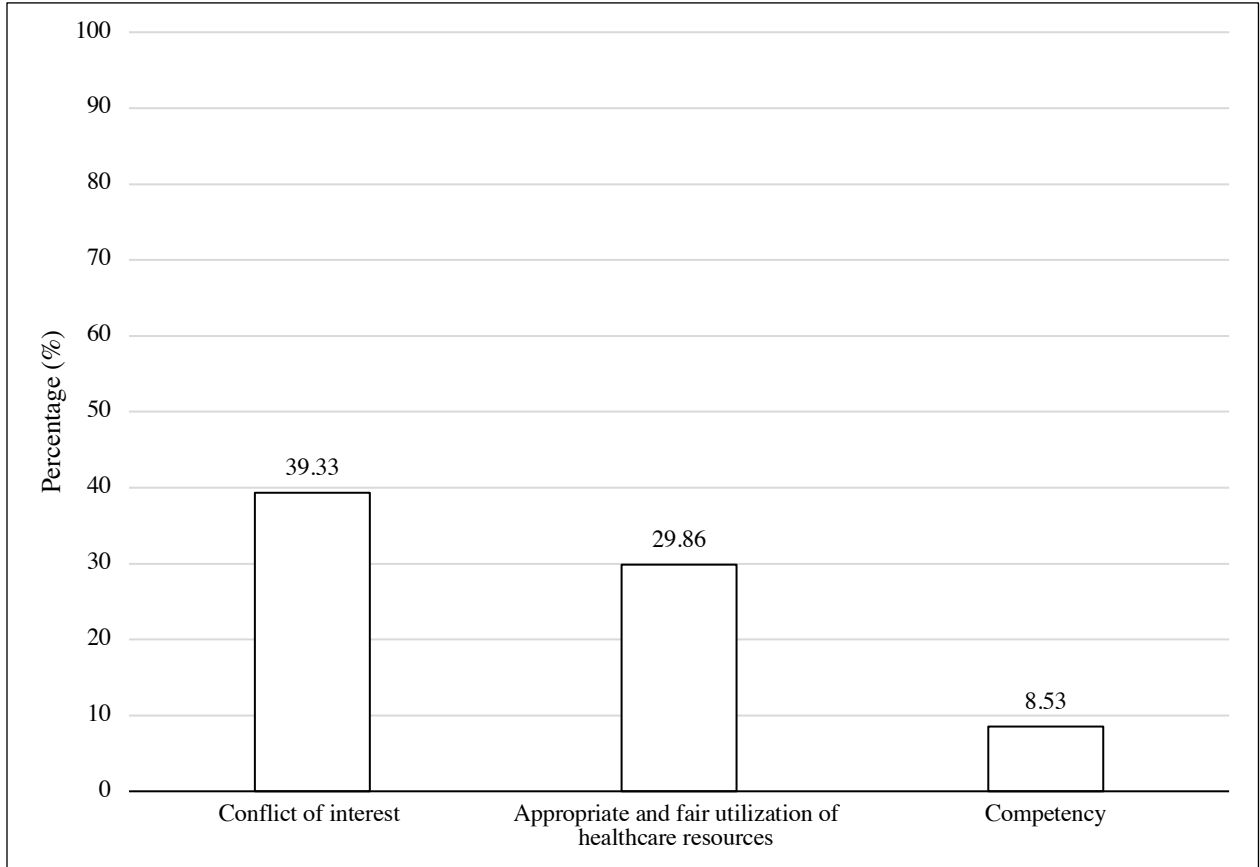
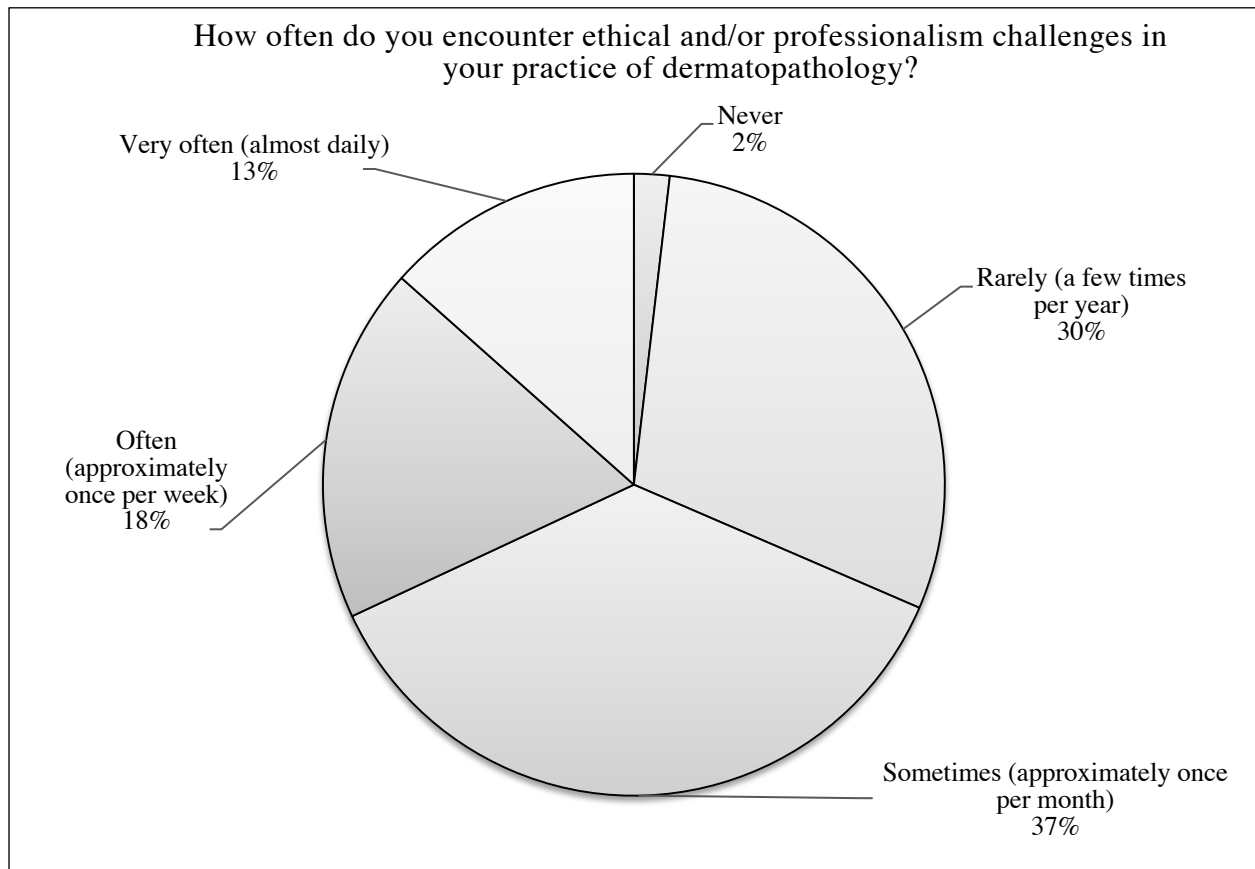
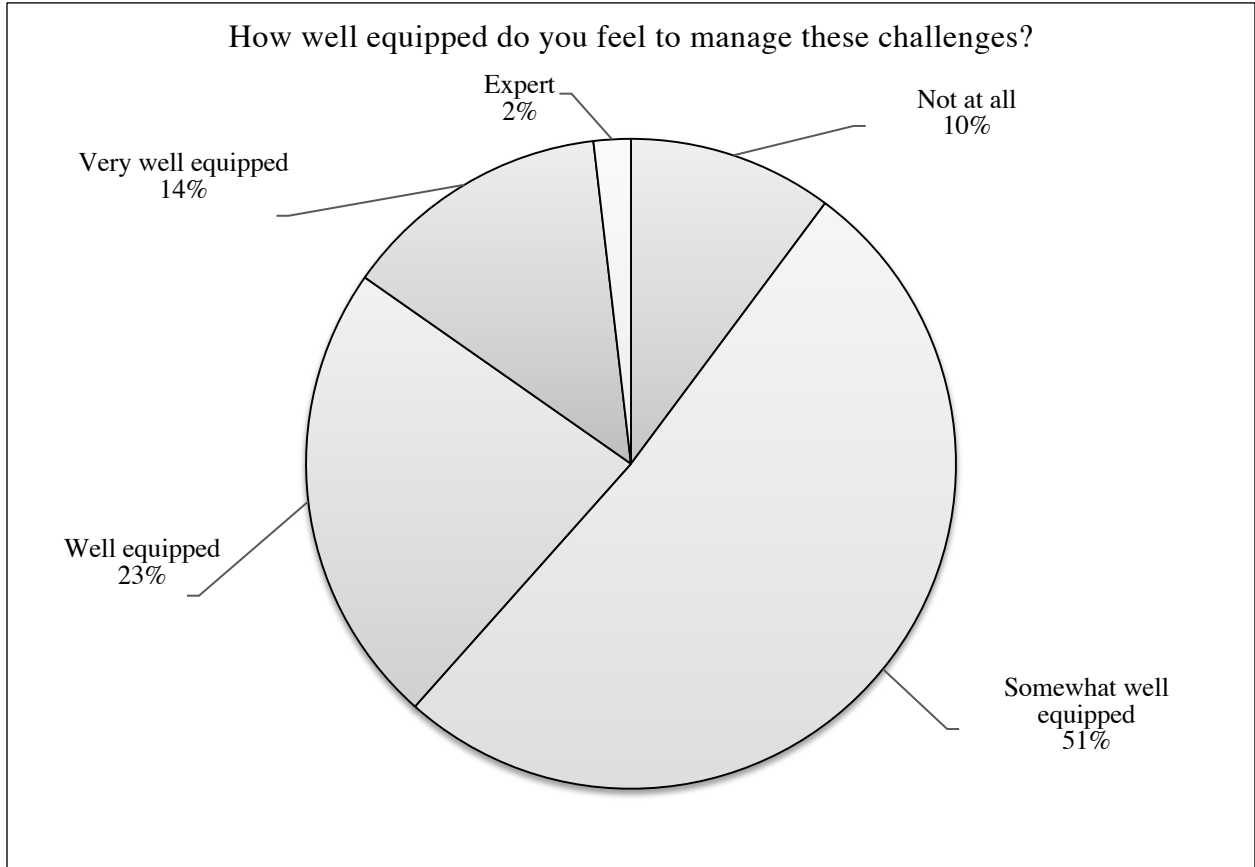


Figure 2.

(a)



(b)



(c)

