



Introduction

In the recent past, dermatology was jokingly referred to as that field of medicine in which “if it is wet, dry it and if it is dry, wet it.” The dermatology of today is radically different. The last 2 decades have led to revolutionary changes in our field. From the advent of dermasurgery to the evolution of medical biologic agents, today’s dermatology bears almost no connection to the dermatology of 50 years ago. Not only has the scope of practice so greatly changed but so too have the various components involved in the “business of dermatology.” Credentialing, certification, and coding remain everyday concerns for all of us. Some of us are asked to serve as expert witnesses; others of us have solely cosmetic practices. Dermatologists often are either employees of other physicians or have business relationships with a variety of entities. Regulations have become an important part of our daily lives. The legal and ethical implications of these seemingly unrelated aspects of dermatology are real.

Health care law, much like dermatology, has greatly changed during the last 2 decades. The medical-legal “fear” among all physicians has traditionally been that of malpractice. Although this concern has not changed, the topics of negligence and medical malpractice have been extensively reviewed in a variety of texts and at many meetings. This issue of *Seminars in Cutaneous Medicine and Surgery* will, instead, focus on the many other aspects of the legal field that interact with our everyday practice of dermatology.

This issue starts with a section on the dermatologist expert witness. What is the role and how does one serve as an expert in the correct manner? This issue is one that is being grappled by many specialty societies, including the American Academy of Dermatology. Subsequent articles deal with regulations and the issues of coding, credentialing, certification, and antitrust law. With the increasing number of federal and state regulations, these topics are timely in their nature.

The “business of dermatology” also has increasingly involved either us, or our physician extenders, as employees. Liability for the actions of the dermatologist now clearly extends to multiple persons working in the office. Both physicians and physician extenders, as employees, are discussed. Finally, the thorny issues of treating (or not treating) all actinic keratoses as squamous cell carcinoma, as well as the entire field of cosmetic dermatology, raise very practical ethical concerns. Both topics are discussed in the final 2 segments of this issue.

It has been an honor to be the guest editor of this issue of *Seminars in Cutaneous Medicine and Surgery*. However, the greatest honor has been to work with some of most talented physicians, physician-attorneys, and health law attorneys who have shared with us their vast expertise in the medical-legal issues of today’s dermatology.

David J. Goldberg, MD, JD
Guest Editor