Dermoscopy is a valuable tool in improving the accuracy of diagnosing skin lesions. Slowly it has started to gain popularity among primary care physicians as a helpful tool in their practice; however, their ability to integrate dermoscopy is dependent on being suitably trained on how to use it [1]. Primary care providers are often the first to examine new skin lesions on their patients, and having them skilled in dermoscopy would be advantageous in screening for potential skin cancers.

The article “Standard Dermoscopy and Videodermoscopy as Tools for Medical Student Dermatologic Education” provides an innovative direction to make learning about skin pathology important in medical student education and more interactive for students [1]. Having students use dermoscopy on live patients makes teaching the material more concrete and clear, compared to simply learning it from a textbook. It demonstrates in real time the impact dermoscopy can have on clinical assessments of skin lesions.

When trying to bring a new technology to the general practitioner, it is best to start integrating the technology at the earliest level of training. If the idea of using dermoscopy is taught during the early years of medical school, then students will continue to build on their skills gradually over several years, similarly to how many schools teach the basic skills of otoscopy and fundoscopy.

Many medical schools are currently undergoing curriculum reform [2]. Medical schools are looking for innovative ways to make their curriculum more interactive and engaging. This is a perfect time to integrate a technology like this into a medical school education. Bringing in real-life examples will get students interested in learning about dermoscopy, and they will be able to see the direct impact it can have on their diagnostic skills. Creating programs for teaching dermoscopy can help a medical school stand out on the forefront of education and attract students who are interested in incorporating this type of technology into their future practices.

**References**