

Center for Dermatology NPPA

Prepare for the **CAQ-DERM**

Dermatology Essentials for NPs and PAs

March 12-14, 2026

Irving, TX

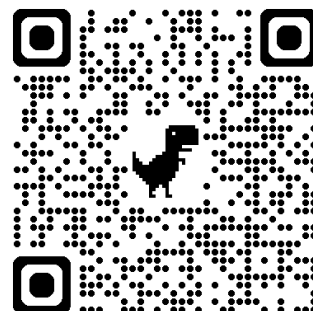
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CAQ-DERM

Earn a Certificate of Added Qualifications (CAQ) in Dermatology from the National Commission on Certification of Physician Assistants. CAQ recipients seeking the following benefits have reaped rewards for their achievement:

- Over 75% found or anticipate finding a new job.
- Over 40% successfully sought a promotion.
- 60% achieved or expect to increase their job responsibilities.
- Over 50% received or anticipate receiving a pay increase, and 33% received a cash bonus.
- Over 75% found the CAQ useful in documenting qualifications required for external accreditation.
- Over 33% achieved or anticipate a broadening of their eligibility for reimbursement.
- Almost 75% have received greater recognition or regard from physicians or other healthcare professionals.
- 66% reported greater respect or acceptance from patients.



Earning a CAQ shows your employers that you are *committed to your specialty*. It demonstrates your *dedication and passion for health care* and the *well-being of your patients*.

Dermatology Essentials for NPs & PAs - March 12-14, 2026

Partnering with Dermatology NPs and PAs to:

- Deliver high-quality clinical care as a dermatology *specialist*.
- Prepare for the DCNP certification exam.
- Maintain updates on the latest evidence-based guidelines for practice.
- Focus on elevating knowledge and confidence in prescribing the newest drug therapies.

Who Should Attend

NPs and PAs who are:

- seeking advanced pharmacology education to increase their competency and confidence in prescribing dermatologic drugs.
- pursuing dermatology continuing education, including pharmacology hours, for recertification or licensure.
- not formally trained in dermatology but seeking a comprehensive curriculum to guide their clinical on-the-job training.
- currently in a **master's program with plans to specialize in dermatology**.
- preparing for Dermatology NP and PA certification (DCNP or CAQ-Derm).
- developing a professional statement for prospective employers that answers the question: What do you know and how did you learn it?

Disease State Topics

- Eczematous and Contact Dermatitis
- Skin Infections - Bacterial and Fungal
- Papulosquamous Diseases
- Connective Tissue Diseases
- Pediatric Dermatology
- Acneiform and Adnexal Conditions
- Malignant Melanoma & Pigmented Lesions
- Bites, Stings, and Infestations
- Pigmentary Disorders
- Precancerous Lesions and Non-Melanoma Skin Cancers
- Systemic Diseases and Genodermatoses
- Skin Infections- Viruses and STDs
- Hair, Nails, and Mucous Membranes
- Biologic & Non-Biologic Therapies for Psoriatic Disease
- Urticarias, Photosensitivities, and Vasculitis
- Vesiculobullous Disorders

Advanced Pharmacology and Dermatopathology

- Small Molecule Drug Therapies for Dermatologic Conditions - Integration into Clinical Practice
- Biologic Therapies for Dermatologic Conditions - Integration into Clinical Practice
- Case Studies - Immunomodulator Therapies
- Essential Dermatopathology Workshop

The Dermatology CAQ content blueprint provides information on how exam questions are allocated to the different task categories and medical content categories that have been deemed important for PAs working within the specialty area.

The examples provided for each task and medical content category are indicative of the types of information that will be included on the examination. It is not possible to include all topics on a single examination, and it may be possible that some questions on a single examination cover content that is not listed in the examples.

Task Categories

1. History and Physical	25%
2. Laboratory Studies	12%
3. Diagnosis	15%
4. Health Maintenance	5%
5. Surgical Interventions	8%
6. Nonsurgical Interventions	15%
7. Pharmacology	15%
8. Scientific Concepts	5%

Medical Content Categories

Inflammatory Dermatoses	11%
Psoriasis and Other Papulosquamous Diseases	10%
Precancerous Lesions and Nonmelanoma Skin Cancer	9%
Acne, Rosacea, and Related Disorders	8%
Nevi and Melanoma	8%
Infectious Dermatoses	6%
Hypersensitivity Reactions	5%
Benign Tumors and Vascular Lesions	5%
Blistering Dermatoses	5%
Skin Manifestations of Systemic Disease and Nutritional Deficiency	5%
Connective Tissue Disease	5%
Hair and Nail Disorders	5%
Urticaria	4%
Severe and Life-Threatening Eruptions	3%
Pigment Disorders	3%
Infestations and Bites	2%
Mucocutaneous Disorder	2%
Psychiatric Dermatoses	2%
Lymphoproliferative Disorders	2%

Task Categories for Item Writing

1. History and Physical

- A. Understand the significance of primary and secondary clinical morphology, including distribution and dermoscopic findings
- B. Take an effective history including genetic, social, family, and medical risk factors
- C. Understand the progression of current symptoms and history of dermatologic conditions
- D. Construct a realistic differential diagnosis based on history and physical examination findings

2. Laboratory Studies

- A. Select appropriate laboratory studies, point-of-care tests, and/or procedures
- B. Select appropriate biopsy techniques and locations
- C. Order laboratory monitoring for chronic dermatologic conditions
- D. Interpret point-of-care test results and pathology reports
- E. Interpret results of laboratory studies

3. Diagnosis

- A. Use findings from laboratory tests, history, physical examination, and/or dermoscopy to make a diagnosis

4. Health Maintenance

- A. Instruct patients who are at increased risk for poor wound healing about risk minimization
- B. Understand skin cancer prevention
- C. Educate patients on dermatologic conditions
- D. Educate patients on complications of homeopathic and natural remedies

5. Surgical Interventions

- A. Understand preoperative considerations for excisional surgery (eg, suture technique and selection)
- B. Understand the risks and benefits associated with surgical interventions
- C. Understand the basics of Mohs micrographic surgery
- D. Understand the management of special situations (eg, anticoagulant therapy, stated allergies to anesthetics, and pregnancy)
- E. Recognize the clinical settings in which perioperative antibiotics are indicated

6. Nonsurgical Interventions

- A. Construct initial management and maintenance plan for dermatologic conditions including referral
- B. Modify management plan, depending on response to therapy
- C. Understand the risks and benefits associated with nonsurgical interventions
- D. Understand the management of special situations including anticoagulant therapy, stated allergies to anesthetics, and pregnancy
- E. Recognize and manage the risks and complications of cosmetic procedures

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7. Pharmacology

- A. Understand the fundamentals of pharmacology relevant to dermatology
- B. Understand the proper use of topical and systemic therapies
- C. Understand the indications and contraindications of topical and systemic therapies
- D. Understand the adverse effects and monitoring of topical and systemic therapies
- E. Understand the management of special situations including anticoagulant therapy, stated allergies to anesthetics, and pregnancy
- F. Understand the mechanisms and complications of cosmetic medications that also have medical applications

8. Scientific Concepts

- A. Understand the fundamental pathophysiology, exacerbating factors, and associations of common skin conditions
- B. Understand the fundamentals of carcinogenesis relevant to dermatology
- C. Understand the fundamentals of embryology relevant to dermatology
- D. Understand the fundamentals of epidemiology and public health relevant to dermatology
- E. Understand the fundamentals of genetics relevant to dermatology
- F. Understand the fundamentals of immunology, inflammation, and wound healing relevant to dermatology
- G. Understand the fundamentals of photobiology relevant to dermatology
- H. Understand the fundamentals of the structure and function of the skin
- I. Understand the essential elements of oncology related to surgical dermatology

Medical Content Categories

Inflammatory Dermatoses (11%)

- CARP
- Chilblains (pernio)
- Chondrodermatitis nodularis helices
- Contact dermatitis
- Diaper rash
- Dyshidrotic eczema
- Erythema multiforme
- Erythema nodosum
- Granuloma annulare
- Ichthyosis vulgaris
- Lichen planus
- Morbilliform drug eruption
- Pigmented purpura
- Prurigo nodularis
- Pyoderma gangrenosum
- Small vessel vasculitis
- Sweet syndrome/neutrophilic dermatosis
- Vitiligo

Psoriasis and Other Papulosquamous Diseases (10%)

- Atopic dermatitis
- Grover disease
- Keratosis pilaris
- Lichen nitidus
- Lichen striatus
- Nummular dermatitis
- Parapsoriasis (small plaque and large plaque)
- Pityriasis lichenoides chronica
- Pityriasis rosea
- Pityriasis rubra pilaris
- Psoriasis
- Seborrheic dermatitis

Precancerous Lesions and Nonmelanoma Skin Cancer (9%)

- Actinic keratosis
- Basal cell carcinoma

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- Merkel cell
- Squamous cell carcinoma, including KA and in-situ

Acne, Rosacea, and Related Disorders (8%)

- Acne vulgaris
- Dissecting cellulitis
- Folliculitis
- Hidradenitis suppurativa
- Hyperhidrosis
- Neonatal cephalic pustulosis
- Perioral dermatitis
- Rosacea

Nevi and Melanoma (8%)

- Becker nevus
- Blue nevus
- Melanoma
- Nevocellular nevus and atypical nevus
- Nevus sebaceus
- Nevus spilus

Infectious Dermatoses (6%)

- Candidiasis
- Cellulitis
- Diaper rash
- Eczema herpeticum
- Erythrasma
- Hand-foot-mouth disease
- Herpes simplex
- Herpes zoster
- Impetigo
- Molluscum contagiosum
- Onychomycosis
- Pitted keratolysis
- Sporotrichosis
- Syphilis
- Tinea versicolor
- Tinea (capitis, corporis, cruris, faciei, manuum, pedis)
- Varicella
- Wart

Hypersensitivity Reactions (5%)

- Acute generalized exanthematous pustulosis
- Contact dermatitis
- Fixed drug eruption

- Lichenoid drug eruption
- Phototoxic/photoallergic eruption
- Polymorphous light eruption

Benign Tumors and Vascular Lesions (5%)

- Angiofibroma
- Angiokeratoma
- Dermatofibroma
- Hemangioma
- Keloid
- Lentigo simplex
- Livedo reticularis
- Mastocytoma
- Porokeratosis
- Pyogenic granuloma
- Sebaceous gland hyperplasia
- Seborrheic keratosis
- Small vessel vasculitis
- Syringoma

Blistering Dermatoses (5%)

- Bullous pemphigoid
- Dermatitis herpetiformis
- Pemphigus foliaceus, vegetans, vulgaris

Skin Manifestations of Systemic Disease and Nutritional Deficiency (5%)

- Acanthosis nigricans
- Calciphylaxis
- Lipodermatosclerosis
- Neurofibromatosis
- Parapsoriasis: small plaque and large plaque
- Pityriasis rubra pilaris
- Porphyria cutanea tarda
- Pyoderma gangrenosum
- Sarcoidosis
- Specific dermatoses of pregnancy
- Stasis dermatitis

Connective Tissue Disease (5%)

- Dermatomyositis
- Lichen sclerosis
- Lipodermatosclerosis
- Lupus erythematosus
- Morphea/localized scleroderma
- Necrobiosis lipoidica
- Systemic sclerosis/scleroderma/CREST

Hair and Nail Disorders (5%)

- Acne keloidalis
- Alopecia areata
- Androgenetic hair loss
- Beau lines
- Dissecting cellulitis
- Folliculitis decalvans
- Frontal fibrosing alopecia
- Lichen planus
- Paronychia
- Scarring and non-scarring alopecias and CCCA
- Telogen effluvium

Urticaria (4%)

- Arthropod bites
- Mastocytosis
- Urticaria

Severe and Life-Threatening Eruptions (3%)

- DRESS Syndrome
- Staphylococcal scalded skin syndrome
- Stevens-Johnson syndrome
- Toxic epidermal necrolysis

Pigment Disorders (3%)

- Melasma
- Pityriasis alba
- Poikiloderma of Civatte
- Vitiligo

Infestations and Bites (2%)

- Arthropod bites
- Cutaneous larva migrans
- Scabies and lice

Mucocutaneous Disorder (2%)

- Lichen planus

Psychiatric Dermatoses (2%)

- Factitial dermatitis
- Lichen simplex chronicus
- Prurigo nodularis

Lymphoproliferative Disorders (2%)

- Cutaneous T-cell lymphoma
- Parapsoriasis (small plaque and large plaque)
- Pityriasis lichenoides chronica