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Dermatology is special. Although it is a specialty, it encompasses an impressive variety. My first day following a Dermatologist, I was in awe how my experience evolved from room to room. My day was filled with skin checks, oncologic diseases, dermatopathology, surgery, pediatrics, autoimmune diseases, and cosmetics. This diversity quickly caught my attention. As my experience with dermatology progresses, what excites and motivates me most about dermatology deals with the patients and the effects that skin pathology can have on an individual. Skin is a part of our human identity, one of the first things people see when meeting an individual. The distress that skin diseases cause individuals should never be simplified or belittled. Far too often I hear patients refer to their skin derogatively with adjectives like “ugly” or “disgusting.” Some of my favorite days in the dermatology clinic are when I see a new patient who has been struggling with a dermatologic condition for years, and I know that there are treatment options that can be offered that will significantly improve the patient’s quality of life. I want to help patients gain confidence and feel better in their own skin (literally and figuratively), whether that patient has a life-threatening cutaneous disease or is struggling with acne.

When I began to seriously pursue dermatology as a specialty for me, I struggled finding a mentor. However, a dermatologist in a city an hour drive away was willing and excited to take me as a student. This turned out to be an invaluable opportunity for me, and my dedication and commitment to dermatology grew stronger. I traveled almost weekly to learn from her and I had the opportunity to learn more about another side of dermatology. Dermatologists have a unique opportunity of examining often subtle cutaneous processes that have the potential to be an indicator of a systemic disease. One patient in particular has left an impact on me. This patient presented with the chief concern of irritated seborrheic keratoses. During a detailed skin examination by the dermatologist, periorbital purpura was detected. On review of symptoms, a constellation of findings was revealed that led the dermatologist to the diagnosis of systemic amyloidosis. Within 6 months the patient underwent a bone marrow transplant. The ability to make a life-altering diagnosis based entirely on a detailed skin examination is extremely powerful and fuels my passion for dermatology further than before.

As I said, Dermatology is special. It challenges me in its complexities and intricacies – detecting subtle patterns, colors, and shapes and synthesizing the information into a diagnosis. Most importantly, I am committed to offering compassionate care to my patients. I am determined to make my patients feel understood and valued when seeking care for their dermatologic questions and conditions. In addition, I plan to be a part of dermatology education and research in my future career. In medical school, I have enjoyed furthering the education of underclassmen as a Supplemental Instructor and forming a Dermatology Student Interest Group. Through my medical school experiences, I have further developed my ability to become an effective and compassionate leader, qualities that I believe will serve me well in residency. I am anxiously awaiting the next step in my career, and I am prepared to dedicate myself to a residency in dermatology. I am an excited, driven, and extremely hard-working student. I value interpersonal skills and work effectively with others, and I believe that I can be a meaningful and substantial addition to a residency team.