JAAD CME Article Proposal
From Professional Practice Gaps to Outcome Measurement

Instructions and notes:

- Complete and submit this proposal form along with a proposed outline of the manuscript to JAAD@aad.org
- A proposal form and outline must be submitted for **each** manuscript.
- **If approved,** the author will be required to include the approved proposal with the manuscript submission
- Approval of a JAAD CME Article Proposal **does not** guarantee that the manuscript will be accepted for publication
- If you have questions about this process, please contact the *JAAD* Managing Editor (JAAD@aad.org)

Article Title	Lichen planus and lichenoid dermatoses Part I. Clinical overview and molecular basis
Primary Author(s) and Affiliations	
Describe your expertise in this topic area (maximum of 100 words)	
List recent articles the author(s) have published on this topic area, if any (maximum of 5)	*E.g., Author A, Author B. Article Title. Journal Year;Volume(Issue):Pages.* 1. Dousset L, Seneschal J, et al. A Th2 cytokine interleukin-31 signature in a case of sporadic lichen amyloidosis. Acta Derm Venereol 2015 Feb;95(2):223-224 2. Almaani N, Liu L, et al. Epidermolysis bullosa pruriginosa in association with lichen planopilaris. Clin Exp Dermatol 2009 Dec;34 (8):e825-8 3. Kowalewski C, Kozlowska A, et al. Three-dimensional imaging reveals major changes in skin microvasculature in lipoid proteinosis and lichen sclerosus. J Dermatol Sci 2005 Jun;38(3):215-224 4. Oyama N, Chan I, et al. Development of antigen-specific ELISA for circulating autoantibodies to extracellular matrix protein 1 in lichen sclerosus. J Clin Invest 2004 Jun;113(11):1550-1559 5. Oyama N, Chan I, et al. Autoantibodies to extracellular matrix protein 1 in lichen sclerosus. Lancet 2003 Jul 12;362 (9378):118-123

Learning objectives (maximum of 75 words) Use measurable verbs (ACCME C3)	*E.g., Identify oncogenes that can put women at risk for the development of melanoma.* Recognize clinical features characterizing lichen planus and other lichenoid disorders in patients. Classify lichenoid conditions into their respective categories and subtypes. Distinguish between the various lichenoid dermatoses despite the significant overlap in clinical presentation. Describe understood underlying molecular mechanisms for lichenoid skin

Examples of measurable learning objective verbiage:

- Define
- List
- Recall
- Name
- Recognize
- Discuss
- Describe
- Explain
- Identify
- Distinguish
- Compare
- Contrast
- Categorize
- Classify
- Choose

The following are NOT measurable:

- Know
- Learn
- Understand
- Appreciate

Describe the practice gap (maximum of 150 words) A practice gap is something that professionals may not know, may not have skills to do, or may not do. **For JAAD/AAD Use:** Type of gap(s): ☐ Knowledge ☐ Competence ☐ Performance (ACCME C2)	*E.g., Women are rarely considered as a subpopulation with regards to risk factors for the development of melanoma.* In current clinical practice, lichen planus and related lichenoid disorders are a vastly heterogeneous, poorly researched and sub-optimally treated group of skin disorders. There is a scarcity of concise reviews and succinct overviews of molecular and therapeutic advances on this topic. Additionally, epidemiological studies lack definitive diagnostic criteria and standardized methodology. This reflects on a gap in clinical practice, where pattern recognition, accurate diagnosis and effective therapeutics remain a challenge. The present CME article series aims to fill this gap by attempting to bridge clinical manifestations with molecular basis and treatment trends in an era of emerging highly-specific immunotherapies.
Explain why the practice gap exists (maximum of 150 words) **For JAAD/AAD Use** Type of need(s): ☐ Knowledge ☐ Competence ☐ Performance (ACCME C2)	*E.g., New research has shown that BRCA2 mutations have been linked to melanoma. Because BRCA2 is more commonly associated with breast and ovarian cancer, dermatologists may not be aware of this important finding.* This practice gap exists partially because the literature remains patchy in terms of capturing and correctly addressing professional learning needs. The rare prevalence of the individual lichenoid entities means that research efforts are restricted in terms of the scale of resources, whether patient cohort-, manpower- or funding-related, and thus published research in lichenoid disease lags behind in comparison with commoner skin disorders. The fundamental reason for the gap per se remains the currently insufficient understanding of the underlying pathophysiology of lichenoid disorders.

Key references that support the proposed outline (maximum of 5)	*E.g., Author A, Author B. Article Title. Journal Year;Volume(Issue):Pages.* 1. Atzmony L, Reiter O, Hodak E, Gdalevich M, Mimouni D. Treatments for Cutaneous Lichen Planus: A Systematic Review and Meta-Analysis. Am J Clin Dermatol 2015 Oct 27. 2. Gorouhi F, Davari P, Fazel N. Cutaneous and mucosal lichen planus: a comprehensive review of clinical subtypes, risk factors, diagnosis, and prognosis. Scientific World Journal 2014 Jan. 3. Le Cleach L, Chosidow O. Clinical practice. Lichen planus. N Engl J Med 2012 Feb 23;366(8):723-732. 4. Lehman JS, Tollefson MM, Gibson LE. Lichen planus. Int J Dermatol 2009 Jul;48(7):682-694. 5. Wagner G, Rose C, Sachse MM. Clinical variants of lichen planus. J Dtsch Dermatol Ges 2013 Apr;11(4):309-319.

For JAAD/AAD Use Only	
Target Audience	Dermatologists and others involved in the delivery of dermatologic care.
Educational Format (ACCME C5)	Journal-based CME, as appropriate to the learning objectives and desired outcomes.
Outcome Measurement(s) (ACCME C11)	Post-activity clinical vignettes with quiz questions.
Desired Outcomes (ACCME C3)	
ABMS Competencies (ACCME C6)	☐ Patient Care ☐ Medical Knowledge ☐ Systems-Based Practice ☐ Professionalism ☐ Interpersonal Skills and Communication ☐ Systems-Based Practice (includes patient safety)
Date Approved by AAD Education Department for CME credit (include initials)	
Date Approved by Editors/Planners	
Date to be published in *JAAD*	
Comments	