A key date in the trainee and surgical calendar is always the excellent BSDS annual trainee meeting. 2021 marked the 17th incarnation and for the first time the annual meeting went ahead as a hybrid event, improving accessibility whilst retaining the benefits of attending in person too. There were a balanced 15 attendees both attending in-person and virtually respectively. The well put-together event was organised and chaired by the BSDS trainee rep Dr Brogan Salence, who should be commended on the slickness of the day and line up of speakers. Particularly, since the event ran pretty smoothly for both in-person and virtual delegates for the presentations, Q&A sessions, and workshops – which is no mean feat!

After a welcome and introduction by Brogan, Dr Lisa Naysmith set the precedent for the rest of the meeting, with a high calibre talk and quiz on head and neck surgical anatomy and danger zones for trainees to get to grips with. This high yield talk was full of anatomical & clinical pearls - such as nerve blocks – in addition to aide-mémoires for budding derm surgeons.

This was followed by Dr Andrew Birnie's excellent talk on fundamental surgical principles and suturing. This including pragmatic informative points on good anaesthesia, excision orientation, and an in-depth review of sutures and suturing. Really useful tips in order to maximise wound eversion. Additionally, now we know why we label suture sizes with 0 at the end!

Next nail conditions and nail surgery were given a very good overview by Dr Dhruvkumar Laheru who presented some very useful cases. Fantastic to have a speaker with so much knowledge on this area and some great tips provided.

Dr William Perkins was fourth speaker of the day with a talk on difficult locations. In particular, regarding surgical sites located at free margins and/or sites without obvious local tissue recruitment available. Several challenging cases were interactively talked through with a range of ultimate repairs varying from secondary intention to sophisticated reconstructions. Drawing from his extensive experience, some really useful tips were imparted which I am sure will make all attendees far more aware of factors to consider when repairing surgical defects.

Dr Emma Craythorne gave an entertaining and candid presentation, talking through her route to becoming a Mohs surgeon. She reviewed the BSDS Mohs surgery fellowships available in the UK and the new Mohs fellowship curriculum requirements which have been developed with multiple stakeholders. These certainly sound a good approach; formalising the process to become a Mohs surgeon and ensuring consistency. Some great career advice was given and the Q&A session from 3 consultant Mohs surgeons was very helpful for trainees to gain a rounded perspective.

A range of workshops were provided by the faculty after the lunch break led by Drs Birnie, Leeman, Jerrom, and Salence in-person and Drs Naysmith and Anand virtually with a range of sessions geared to delegates with a range of ability and experience. I attended the virtual workshop with Dr Naysmith looking at more advanced repairs. This was a fantastic learning event being able to talk through reconstruction options for surgical defects from clinical images; Dr Naysmith provided some great frameworks to utilise, enabling more comprehensive evaluation of would repair options. The workshops were well received and whilst enabling a relaxed learning environment to upskill also provided a useful informal forum with dermatological surgeons - who were more than happy to answer any questions and to give advice.

Overall, the day was a great success and is testimony to Brogan's and Blake's hard work and organisation, not to mention the excellent dermatological surgeons giving up their time to speak and tutor at the event. The hybrid event went very well and was well thought out – enabling the benefits of both modalities. Thanks again to all, but in particular Brogan and Blake!

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