



## The koalascope

So, sometimes we have these really smart kids in our clinic, who can add a whole new dimension to your world views. One of these characters who recently happened to visit my clinic, was an 8-year-old, bespectacled, pony-tailed girl, with pretty bad eczema. After the consultation, the young lady asked me point blank: “Are you a real doctor?”

For a moment I was taken aback, but regaining my composure pretty quickly, and with a masked smile I replied: “Yes. Why? Don’t I look like one?”

She eyed me suspiciously: “You don’t have that thing that doctors put around their neck.”

Oh, that. The stethoscope is kind of like an integral part of the image of the doctor and not having one/not having the need to use one, is a bit of a sticky point for us dermatologists (we dermatologists using the stethoscope is a bit like some surgeons trying to read an ECG). Also, the ophthalmologist has the ophthalmoscope, the ENT guys have their otoscope. We poor dermatologists had no scope....till we did get our good ol’ dermoscope.

“I don’t need that neck thing,” I said, “I have this.” I proudly exhibited my dermoscope.

“A torch?”

“It’s not just a torch...there is a lens and the light is special ... it’s called polarized light ... it.....”

The young lady cut me off: “Looks like a torch”, look of amused disgust on her face “and you can’t put it around your neck”, short pause “and you can’t put a little koala bear over it!”

Well, OK...neck thing, point taken. I mean you could hang a dermoscopy around the neck theoretically, but would be pretty inconvenient....but koala, huh? Anyway, I was not given a chance for a rebuttal and even if I was, I doubt it would have convinced milady.

The koala thing got me thinking though. The koala on the stethoscope fad began around the time I was doing my internship. Cute, and useful, when examining kids. That evening I did some single-minded brainstorming, and the result was a koala (stolen from my daughter’s stash) snugly clipped onto the side of the dermoscope [Figure 1].

The next day I triumphantly tried out the contraption with my first paediatric patient - a 4-year-old boy crying at full volume. The patient calmed down dramatically on seeing the koala-dermoscope combo. However, after some quizzical expressions and cute cooing sounds the lil fellow effortlessly scooped out the koala from its anchoring dermoscopy and then simply kept it to himself. That was the last I saw of that particular koala.

As usual, my bitter half who was privy to all these path-breaking, recent advances in paediatric dermatology, was ever ready to rub hard rock salt into my festering wounds.



**Figure 1:** The ‘koalascope’

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“So how did the koala thing go?” Snickering.

“It went... gone with the kid”, me avoiding eye contact but trying to be funny at the same time.

“Oh! Did it go to koala la la land?” Snickering snowballing into a full “Mogambo khush hua” type laugh: “You and your dermoscope, sometime you should just realise that some things simply have no scope”, wife returning the ‘punny’ act.

It was time for me to give a rousing concluding speech: “You know when you think of it the dermoscope is just like the stethoscope.....like in the stethoscope the part between the ear pieces are the most important, in the dermoscope it’s the eye and the part behind the eyepiece of the dermoscope....the instrument and all frills are all secondary.”

I walked away in slow motion a la Rajnikanth after giving a punch dialogue. Except that, unlike triumphant background

music in the Rajni movie, here I could hear only continuous guffawing.

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