

# TM-SCARLET FEVER (100240)

Category: Infectious Diseases

Scheduled appt type: \_\_\_\_\_

CC \_\_\_\_\_

HPI \_\_\_\_\_

freeform ROS \_\_\_\_\_

## Structured ROS

Pert: fever/chills	_____
Pert: body aches	_____
Pert: headache	_____
Denies: red eyes or eye drainage	_____
Pert: sore throat	_____
Denies: mouth ulcers	_____
Pert: difficulty swallowing	_____
Denies: postnasal drip	_____
Pert: runny nose and/or nasal congestion	_____
Denies: ear pain	_____
Denies: daytime cough	_____
Denies: nighttime cough disturbing sleep	_____
Pert: nausea	_____
Pert: vomiting	_____
Denies: diarrhea	_____
Pert: decreased appetite	_____
Pert: rashes or dry skin	_____

## Structured exam

NL: general appearance: alert, pleasant, not ill appearing, no distress	_____
NL: conjunctivae & lids: pink & moist	_____

NL: nares (nasal mucosa, septum and turbinates): clear	_____
ABNL: oropharynx: moist mucous membranes, without pharyngeal erythema or intraoral lesions	, through video connection limited oropharynx inspection completed and demonstrated moist mucous membranes, with erythematous 3+ tonsils, exudate and palatal petechiae
NL: without meningeal signs	patient/parent asked to flex and extend neck without any difficulty on visualization or compensatory elevation of shoulders
NL: respiratory effort: no retractions, no tachypnea	, and no audible grunting
NL: extremities: no edema, brisk capillary refill	, with cooperation of patient/parent through video visualization of good perfusion with brisk capillary refill confirmed (asking patient/parent to demonstrate)
ABNL: inspection (includes subcutaneous tissue): no rash	+ scarlatiniform rash visible increased in groin/axilla

Remaining template documentation elements

Counseling:	_____
Coordination of Care:	_____
Diagnosis:	Scarlet fever, uncomplicated(A38.9)
Assessment:	_____
Plan:	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Unable to conduct strep test via virtual encounter Based on exam and history feel that scarlet fever is most likely diagnosis Discussed pathophysiology of scarlet fever Treat symptoms of pain and/or fever with acetaminophen or ibuprofen as needed Discussed itching rash, treat as needed with oral antihistamines, Discussed likely peeling Via shared decision making with family elected to either obtain rapid strep testing via in person testing, home testing or treat empirically Elected to: Antibiotics as prescribed: Call

	if no better 3 days Discussed under what circumstances a face-to-face office visit would be appropriate recheck prn
<b>Patient Instructions:</b>	

**Remaining workflow elements**

**Procedures**

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**Orders**

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