

# TM-CANDIDAL DIAPER RASH (100225)

Category: Skin

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

CC \_\_\_\_\_

HPI \_\_\_\_\_

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

## Structured ROS

Denies: fever/chills	_____
Denies: red eyes or eye drainage	_____
Denies: mouth ulcers	_____
Denies: runny nose and/or nasal congestion	_____
Denies: Oral thrush	_____
Pert: dysuria	_____
Denies: history of recurrent infections	_____
Pert: History of recent antibiotic use	_____

## Structured exam

NL: general appearance: alert, pleasant, not ill appearing, no distress	_____
NL: conjunctivae & lids: pink & moist	_____
NL: oropharynx: moist mucous membranes, without pharyngeal erythema or intraoral lesions	, through video connection limited oropharynx inspection completed and normal including moist mucous membranes and absence of thrush
ABNL: inspection (includes subcutaneous tissue): no rash	+ erythematous papular rash with satellite lesions in diaper area, no other rash

## Remaining template documentation elements

Counseling:	_____
Coordination of Care:	_____

Diagnosis:	Candidal diaper rash(B37.2)
Assessment:	
Plan:	History reviewed and exam considered with limitations acknowledged due to nature of virtual visit through a synchronous telecommunications system Signs and symptoms most consistent with candidal diaper rash Discussed pathophysiology of candidal diaper rash Open to air as much as possible Symptomatic therapy Antifungal topic therapy: consider use of probiotics Call if no better 4-5 days, sooner prn change/concerns Discussed under what circumstances a face-to-face office visit would be appropriate recheck prn
Patient Instructions:	

Remaining workflow elements

Procedures

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Orders

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