

Children’s Wisconsin

Co-Management Guidelines

To support collaborative care, we have developed guidelines for our community providers to utilize when referring to, and managing patients with, the pediatric specialists at Children’s Wisconsin. These guidelines provide protocols for jointly managing patient cases between community providers and our pediatric specialists.

<h2 style="text-align: center;">MOLLUSCUM TREATMENT GUIDELINES</h2> <p style="text-align: center;">The purpose of this guideline is to determine initial treatment of molluscum and when the patient should be referred to dermatology</p>				
Diagnosis/symptom Molluscum Contagiosum	Referring provider’s initial evaluation and management: Number, location and distribution of lesions. Determine motivation to treat and patient ability to cooperate.	When to initiate referral/ consider refer to Dermatology Clinic.	What can referring provider send to Dermatology Clinic?	Specialist’s workup will likely include:
<p>Signs and symptoms Pearly, dome-shaped, umbilicated, skin-colored or pink papules. These are often distributed on the torso and flexures but can involve any skin surface although palms and soles are spared. Lesions typically develop 2-8 weeks after exposure.</p> <p>Molluscum contagiosum is a self-limited condition for patients who are immunocompetent. Clearance can take months to sometimes years.</p> <p>Caused by the Molluscum contagiosum virus (poxvirus family). Transmission is generally skin to skin</p>	<p>Diagnosis and Treatment Diagnosis is made by physical exam. Evaluate type, number and location of molluscum. Determine patient/family desire for treatment and patient cooperation. Benign neglect is always an option, especially since response to treatment is variable</p> <p>Patients with dry skin or atopic dermatitis should be treated to improve impaired skin barrier.</p> <p><u>Tretinoin</u></p> <ul style="list-style-type: none"> Tretinoin 0.025 or 0.5% cream. Can start 3 times a week and 	<p>Patients and families should be motivated to pursue treatments that can be painful and generally require repeated visits. Reasons to consider referral:</p> <ul style="list-style-type: none"> Diagnosis is in question. No response to treatment after 3 months. No spontaneous response after 2 years. Lesions cover a large body surface area. Very itchy or painful lesions. Inadequately controlled dermatitis. Cosmetically sensitive areas or presence of scarring. 	<p>1. Internal providers place order for eConsult Dermatology (preferred)</p> <p>Place ambulatory referral to Dermatology</p> <p>2. External provider using Epic</p> <ul style="list-style-type: none"> Please complete the external referral order <p>In order to help triage our patients and maximize the visit, the following information would be helpful include with your referral order:</p> <ul style="list-style-type: none"> Urgency of the referral What is the key question you would like answered? <p>Note: Our office will call to schedule the appointment with the patient.</p> <p>3. Not using Epic external referral order:</p>	<ul style="list-style-type: none"> History and physical exam After referral to dermatology clinic, multiple follow up appointments may be needed. Families may want to determine their deductible status and whether Children’s Wisconsin is in network or out of network.



<p>contact, but it can also be transmitted through fomites. Patients with atopic dermatitis are more likely to have severe disease. The condition also spreads through autoinoculation.</p>	<p>increase to nightly after 2 weeks if tolerated.</p> <ul style="list-style-type: none"> Slight erythema is desirable. If irritation is severe, stop for a few days, allow the skin to heal, and then re-start at a decreased frequency. <p><u>Imiquimod</u></p> <ul style="list-style-type: none"> Imiquimod 5% cream. Can start 3 times a week and increase to nightly after 2 weeks if tolerated. Slight erythema is desirable. If irritation is severe, stop for a few days, allow the skin to heal, and then re-start at a decreased frequency. Side effects can include robust inflammatory response, psoriasiform rash, or oral ulcers (if used on the face). Do not use on the face. <p><u>Liquid Nitrogen</u></p> <ul style="list-style-type: none"> Use liquid nitrogen in a cup with cotton tipped applicators. Apply for two 5-10 second freeze thaw cycles 	<ul style="list-style-type: none"> Rapidly progressing lesions. Immunocompromised patient. 	<ul style="list-style-type: none"> In order to help triage our patients maximize the visit time, please fax the above information to (414-607-5288) It would also be helpful to include: <ul style="list-style-type: none"> Chief complaint, onset, frequency Recent progress notes Other Diagnoses Office notes with tried/failed treatments in the past and any lab work that may have been obtained regarding this patient's problems. 	
---	---	--	--	--



<p>Molluscum surrounded by an itchy, eczematous rash.</p>	<p>Molluscum infection can induce dermatitis which should be treated to prevent pruritis and further spreading.</p> <p>Prescribe a low potency topical corticosteroid such as hydrocortisone 2.5% ointment BID or triamcinolone 0.025% ointment BID. The ointment can be used to treat the eczematous reaction but will not alter the course of the molluscum.</p>	<p>No response to the low potency topical steroid.</p>	<ol style="list-style-type: none"> Internal providers place order for eConsult Dermatology (<i>preferred</i>) Place ambulatory referral to Dermatology External providers using Epic <ul style="list-style-type: none"> Please complete the external referral order In order to help triage our patients and maximize the visit, the following information would be helpful include with your referral order: <ul style="list-style-type: none"> Urgency of the referral What is the key question you would like answered? <p>Note: Our office will call to schedule the appointment with the patient.</p> Not using Epic external referral order: <ul style="list-style-type: none"> In order to help triage our patients maximize the visit time, please fax the above information to (414-607-5288) It would also be helpful to include: <ul style="list-style-type: none"> Chief complaint, onset, frequency Recent progress notes Other Diagnoses Office notes with tried/failed treatments in the past and any lab work that may have been obtained regarding this patient's problems. 	<ul style="list-style-type: none"> History and physical exam After referral to dermatology clinic, multiple follow up appointments may be needed. <p>Families may want to determine their deductible status and whether Children's Wisconsin is in network or out of network.</p>
<p>Boil-like lesions in a patient with molluscum.</p>	<ul style="list-style-type: none"> Inflamed lesions can signify immune response to the molluscum and are very rarely a secondary bacterial infection. Warm compresses TID should be used to help hasten resolution. 	<p>Large and inflamed lesions are occurring repeatedly.</p>	<ol style="list-style-type: none"> Internal providers place order for eConsult Dermatology (<i>preferred</i>) Place ambulatory referral to Dermatology Using Epic <ul style="list-style-type: none"> Please complete the external referral order 	<ul style="list-style-type: none"> History and physical exam After referral to dermatology clinic, multiple follow up appointments may be needed. <p>Families may want to determine their deductible status and</p>

	<ul style="list-style-type: none"> If concerned about infection, obtain a bacterial culture (nick with a surgical blade and swab the pus) and only initiate oral or topical antibiotics if Staphylococcus aureus or Streptococcus pyogenes are identified. 		<p>In order to help triage our patients and maximize the visit, the following information would be helpful include with your referral order:</p> <ul style="list-style-type: none"> Urgency of the referral What is the key question you would like answered? <p>Note: Our office will call to schedule the appointment with the patient.</p> <p>3. Not using Epic external referral order:</p> <ul style="list-style-type: none"> In order to help triage our patients maximize the visit time, please fax the above information to (414-607-5288) It would also be helpful to include: <ul style="list-style-type: none"> Chief complaint, onset, frequency Recent progress notes Other Diagnoses Office notes with tried/failed treatments in the past and any lab work that may have been obtained regarding this patient's problems. 	<p>whether Children's Wisconsin is in network or out of network.</p>
--	---	--	--	--

Medical Disclaimer

Medicine is a dynamic science; as research and clinical experience enhance and inform the practice of medicine, changes in treatment protocols and drug therapies are required. The authors have checked with sources believed to be reliable in their effort to provide information that is complete and generally in accord with standards accepted at the time of publication. However, because of the possibility of human error and changes in medical science, neither the authors nor Children's Hospital and Health System, Inc. nor any other party involved in the preparation of this work warrant that the information contained in this work is in every respect accurate or complete, and they are not responsible for any errors in, omissions from, or results obtained from the use of this information. Readers are encouraged to confirm the information contained in this work with other sources.

