

Rash Calls



Keep in Mind:

- > Do not try to diagnose the rash or go by the parent's diagnosis.
- > The caller often focuses on the cause of the rash; this is not your job to determine. You must determine if the rash is dangerous and requires medical treatment.
- > Emergent rashes are purple or blood covered.
- > Looks like mosquito bites- hives; check for current or recent Amoxicillin/ Amoxicillin rash

Save time by giving the caller descriptive terminology:

- > Is the rash raised or flat?
- > Are the bumps mini m&m sized or larger?
- > Is it red like sunburn, or just pink like cotton candy? (this depends on the age of the patient)
- > Does it itch?



If disposition is home care, reassure the caller:

> Examples of reassurance:

“Mom, I have ruled out that this rash is harmful for your child.”

“Sometimes, we don’t know what caused the rash. However, we do know that it is not harmful.”

“We cannot receive pictures of rashes. I know you are worried. If you see these s/sx....
please call back.”

Documentation:

> Be descriptive

> Make a habit of documenting, “denies rash is purple or blood covered at this time.”