DERMATITIS, CONTACT (ACUTE)

Level I
(If subjective data is sufficient, no exam is necessary.)

<table>
<thead>
<tr>
<th>Skill Level:</th>
<th>RN, LPN</th>
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<tbody>
<tr>
<td>Definition:</td>
<td>Contact dermatitis involves irritation and/or skin rash following direct contact with a substance. It can be an irritant dermatitis, which can develop immediately after contact or it can be a delayed allergic skin reaction after skin contact with an allergen (e.g. metals, wool and poison oak). For allergic dermatitis, it takes 1-7 days to fully develop the rash, and it generally takes 7-14 days to resolve from a single exposure.</td>
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### Subjective:
- Clear exposure history.
  - Signs and symptoms within 7 days of exposure.
  - Suspected or actual exposure to a common allergen (e.g.: poison oak) or individual allergen (e.g.: soap, metal, lotion).
- No breathing difficulties.
- No prior history of serious reaction to the same allergen.
- Itchy rash, often with redness.
- Area involved (Document).
- "I am allergic to (wool, poison oak, etc.)"

### Assessment:
- Altered skin integrity: Dermatitis, Contact
- Potential for skin infection.

### Objective:
- Distribution of rash consistent with exposure to suspected allergen.
- Edematous or vesicular tissue on a red base frequently found in a line or patches on body part exposed to allergen.
- Vesicles may be full of clear fluid.
- No pustules or other sign of infection.
- Area of rash should be non-tender.
- No wheezing.
- Vital signs normal for patient.
- No extensive skin involvement (<25% of body surface area.) See chart.

### Plan:
- Self care canteen product:
  - Hydrocortisone cream applied directly to affected area BID x 1 wk for itch.
  - At nursing discretion may use any of the below:
    - Check for allergies to medications.
    - Remove irritant or allergen, (may need to launder bedding and clothing).
    - Apply cold compress, or
    - If wool allergy is suspected and not documented in the health care record, schedule wool patch test (or may apply wool patch test at the time of this visit).
    - Consider Triamcinolone ointment if the cause of the rash is clear and it seems to be spreading rapidly. Go to Level 2 protocol. (Do not apply to the face).
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Nursing Education:

1. Herpes skin infections, Herpes Simplex or Zoster, are caused by a herpes virus. This condition can present as vesicles filled with clear fluid but there is usually tenderness or a burning pain associated with these conditions.

2. While Poison Oak is not contagious, the resin can be on clothing and bedding, so these should be laundered after known exposure.

3. If poison oak is clearly the causative agent, early use of topical and/or oral steroids is indicated.

Patient Education:

1. Contact Dermatitis is non-contagious.

2. Advise patient of the signs and symptoms of second bacterial infection.

3. Advise patient that it may take up to two weeks for condition to resolve. If no improvement within one week, patient should notify Health Services.

APPROVED:

Medical Services Manager

Date

Chief Medical Officer

Date

Medical Director

2/24/2015

Effective Date: 3/2015
Revised: February 2015
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Use the following diagram to estimate the percentage of surface area involved in the dermatitis that is under evaluation:

![Rule of Nines Diagram]