

Paediatric Dermatology Specialist Clinics at Western Health:

Western Health provides the following Specialist Clinics for patients up to 17 years of age who require assessment and management of Dermatology conditions. Patients will be triaged on a monthly basis by a Consultant Dermatologist into management pathways according to specific clinical requirements:

These referral guidelines are for Paediatric Specialist Clinics provided at Joan Kirner Women's and Children's at Sunshine Hospital only, and are based on the statewide referral criteria which can be found here: [Dermatology - children | health.vic.gov.au](http://dermatology-children.health.vic.gov.au).

Referrals may be triaged to alternative Paediatric Specialist Clinics at Western Health.

Conditions not seen by Paediatric Dermatology Specialists at Western Health:

- Children requiring **urgent** review for dermatological conditions.
- Neonatal or infantile haemangiomas.
- Conditions requiring laser surgery.
- Cosmetic dermatology.
- Photo surveillance services for moles, etc.
- Surgical dermatological procedures.

Paediatric Dermatology Alarm Symptoms:

Acute conditions requiring immediate assessment – please refer the patient to the Sunshine Hospital Emergency Department.

- Anaphylaxis.
- Extensive blistering including Steven Johnson Syndrome.
- Purpuric (bruise-like) rashes.
- Widespread and symptomatic drug eruptions.
- Eczema Herpeticum.
- Severely infected eczema, and severely inflamed eczema.
- Any rash causing widespread erythema of the skin with signs of systemic illness.
- Critical lower limb ischaemia with necrosis, pain, or ulceration.
- Rapidly deteriorating ulceration or necrosis.
- Sepsis or acutely unwell due to infection.
- Suspected acute limb ischaemia.
- Erythrodermic children and any skin condition that is significantly painful or tender.

Western Health Specialist Clinics Access & Referral Guidelines

Please refer the below acute conditions to The Royal Children's Hospital (RCH) Emergency Department for urgent assessment and referral to the RCH Dermatology clinic.

- Birthmarks that:
 - are congenital melanocytic naevus with new firm lump, red papule, or ulcer.
 - are ulcerated and painful causing infant distress not responding to paracetamol or significant bleeding.
 - involve and impinge on the airway or eye.
- High fever, lymphadenopathy, eosinophilia, and systemic illness that may indicate a drug hypersensitivity syndrome.
- Mucosal erosions, skin pain, blisters, pustules and/or fever that may indicate the development of toxic epidermal necrolysis.

Access & Referral Priority Paediatric Dermatology:

The clinical information provided in your referral will determine the triage category. The triage category will affect the timeframe in which the patient is offered an appointment.

<h3>URGENT</h3> <p>Appointment timeframe 30 days.</p>	<h3>ROUTINE</h3> <p>Appointment timeframe greater than 30 days, depending on clinical need.</p>
<p>Neonates</p> <p>For all neonates that require urgent review for any dermatological conditions, contact the Royal Children’s Hospital Dermatology Registrar via switchboard.</p> <p>Ph. 9345 5522 to arrange follow up at RCH.</p> <p>Note: This includes evolving haemangiomas.</p> <p>Urgent Alarm Symptoms:</p> <ul style="list-style-type: none"> • Patients requiring urgent review are not able to be seen as it is only a monthly service. • Any skin condition requiring urgent review should be referred to the RCH. • For severe dermatological conditions refer the patient to the Sunshine Hospital Emergency Department or the RCH Emergency Department. 	<p>Eczema</p> <ul style="list-style-type: none"> • Widespread, chronic dermatitis that has not responded to medical management as outlined in Health Pathways and statewide referral criteria (Eczema in Children - Community HealthPathways Melbourne and Assessment of dermatitis (eczema) management in children) with functional or psychological impact on quality of life or activities of daily life. • Dermatitis exacerbated by secondary infection. • Allergic contact dermatitis that has not responded to medical management. <p>Acne</p> <ul style="list-style-type: none"> • Severe acne (that is nodulocystic, widespread or with scarring) unresponsive to previous treatments as outlined in Health Pathways and statewide referral criteria (Acne - Community HealthPathways Melbourne and Assessment of acne management in children) that requires further advice on, or review of, the current management plan. • Advice on the management of acne when planning or commencing gender-affirming masculinising hormonal therapy. <p>Hidradenitis suppurativa</p> <ul style="list-style-type: none"> • Hidradenitis suppurativa that has not responded to medical management (at least 3 to 6 months of continuous oral antibiotics) with functional impact on quality of life or activities of daily life. <p>Rashes for Clarification</p> <ul style="list-style-type: none"> • Blistering or erosive skin eruptions. • Rapidly evolving severe or widespread skin eruption with uncertain diagnosis or possibly linked to an adverse drug reaction. • Persistent rash of unknown cause that has not responded to medical management. <p>Psoriasis</p> <ul style="list-style-type: none"> • Widespread, psoriasis that has not responded to medical management as outlined in Health Pathways and statewide referral criteria (Psoriasis - Community HealthPathways Melbourne and Assessment of psoriasis management in

[children](#)) with functional or psychological impact on quality of life or activities or daily life that requires further advice on, or review of, the current management plan.

Alopecia

- Alopecia areata with extensive (more than 4 bald areas) or rapid hair loss.
- Alopecia areata that has not responded to medical management (i.e. moderate or potent topical corticosteroid for at least 4 months).
- Scarring alopecia.

Skin Checks

Vitiligo

- Vitiligo that has not responded to medical management (i.e. prescribed topical corticosteroid (with or without calcineurin inhibitors)) impacting on quality of life or activities of daily living.

Chronic Skin Ulcers

- Non-healing skin ulcers that are not related to venous or arterial disease, present for longer than 1 month with no reduction in size despite medical management.
- Excessively painful skin ulcers.

Skin infections and infestations:

- Skin infections and infestations unresponsive to maximum medical management as outlined in Health Pathways and statewide referral criteria ([Dermatology - Community HealthPathways Melbourne](#) and [Warts and Verrucas - Community HealthPathways Melbourne](#) and [Skin and nail infections and infestations in children](#)) and is unable to be managed and treated in primary care (e.g. patient is immunocompromised).
 - bacterial folliculitis.
 - molluscum contagiosum.
 - pityriasis versicolor.
 - scabies.
 - tinea.
 - warts.

Nail issues

- Nail infections and infestations unresponsive to maximum medical management (e.g. antifungal treatment for at least 3 months for fungal nail diseases) and unable to be managed and treated in primary care (e.g. patient is immunocompromised)
 - nail dystrophy.

Condition Specific Referral Guidelines:

Key information enables Western Health to triage patients to the correct category and provide treatment with fewer visits to specialist clinics, creating more capacity for care. If key information is missing, you may be asked to return the referral with the required information.

Condition:	Key Information Points:	Clinical Investigations
All Dermatology Referrals	Essential <ul style="list-style-type: none"> • Summary of presenting issue and details of any intercurrent illness, infections and travel. • Reason for urgency. • Age of onset. • Timeframe of presentation (e.g. four-week history). • Details of past management and response. • Current treatment and dosing information. • Past medical history including medications. • Allergy history. • Family history. 	<ul style="list-style-type: none"> • Include results of any investigations that have been completed, such as: <ul style="list-style-type: none"> ○ Skin scrapings. ○ Swabs for Micro, Culture and Sensitivity. ○ Biopsies. ○ Imaging including ultrasound.