# Quick Clinical Notes: Dermatologic & Special Populations

**Name**: Enter Your Name

**Complete** each category below selecting the 1st, 2nd & 3rd line agents for the following conditions. Sometimes there are more than 1 class of medications used to treat a condition, please include various classes for that condition as well. Write down any considerations that would be important for you to choose your 1st line vs 2nd or 3rd. Use this as part of your clinical notebook that you will use in your clinical practice. Think of what information would be helpful in treating patients you will encounter in your future practice.

No need to use complete sentences or APA. **DO NOT CUT AND PASTE** in this template.Feel free to add additional lines if needed to make this a complete reference for clinic. If a drug is used for a different condition, you may cut/paste what YOU have written prior then adapt as needed for the new condition, or else just say “See above” & then update that line in regards to specifics for the condition.

**Corticosteroids**

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| **Topical & Oral Corticosteroids : Choose 1 from each potency level** |
| **Potency/Form** | **Drug name(s):**brand&generic | **MOA** | **2 major contraindications &** **2 common adverse effects****Longterm Use** | **Hepatic / Renal Adjustment?** Y/N |
| Low potency |  |  |  |  |
| Intermed |  |  |  |  |
| High |  |  |  |  |
| Super High |  |  |  |  |
| Oral Corticosteroids |  |  |  |  |

* **Post a picture of skin absorption rates here:**
* **Also Skin surface area measurement**

**Drugs by Disorder**

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| **Dermatitis: Eczema** |
| **Drug name(s):**brand&generic |  **When is this indicated?** **1st, 2nd line, 3rd?**  | **MOA** | **2 major contraindications &** **2 common adverse effects** | **Hepatic / Renal Adjustment?** Y/N |
| Topical Corticosteroid |  |  | (See above) |  |  |
| Oral Corticosteroid |  | See Above |  |  |
| Immunomodulators |  |  |  |  |
| Antipruritics |  |  |  |  |
| Emmolients |  |  |  |  |
| Antibiotics |  |  |  |  |
| Nonpharmacological |  |  |  |  |
| **Dermatitis: Contact Dermatitis** |
| Topical Steroid |  |  |  |  |
| Oral Steroid |  |  |  |  |
| Antihistamines |  |  |  |  |
| NonPharm | Wet dressing/bath |  |  |  |
| **Dermatitis: Diaper Dermatitis** |
| Barier Meds |  |  |  |  |
| Corticosteroid |  |  |  |  |
| Antifungal |  |  |  |  |
| NonPharm | Wet soaks/Sitz |  |  |  |
| **Dermatitis: Seborrheic Dermatitis** |
| Antiseborrheic Shampoos |  |  |  |  |
| Topical Corticosteroids |  |  |  |  |
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| **Psoriasis**  |
| **Drug name(s):**brand&generic | **When is this indicated?** **Is it a 1st, 2nd line, 3rd?** | **MOA** | **2 major contraindications &** **2 common adverse effects** | **Hepatic / Renal Adjustment?** Y/N |
| Topical Steroid |  |  |  |  |
| Coal Tar |  |  |  |  |
| Anthralin |  |  |  |  |
| Vit D Derivatives |  |  |  |  |
| Phototherapy | Rx by Dermatology |  |  |  |
| Systemic  | Rx by Derm |  |  |  |

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| **Acne & Rosacea**  |
| **Drug name(s):**brand&generic | **When is this indicated?** **Is it a 1st, 2nd line, 3rd?** | **MOA** | **2 major contraindications &** **2 common adverse effects** | **Hepatic / Renal Adjustment?** Y/N |
| Topical Retinoids |  |  |  |  |
| Topical Antibiotics |  |  |  |  |
| Oral Antibiotics |  |  |  |  |
| Hormonal Agents |  |  |  |  |
| Isotretinoin |  |  |  |  |
| Nonpharm |  |  |  |  |

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| **Skin Infections**  |
| **Drug name(s):**brand&generic | **When is this indicated?** **Is it a 1st, 2nd line, 3rd?** | **MOA** | **2 major contraindications &** **2 common adverse effects** | **Hepatic / Renal Adjustment?** Y/N |
| Bacterial: Impetigo |  |  |  |  |
| Bacterial: Furuncle |  |  |  |  |
| Bacterial: Cellulitis |  |  |  |  |
| Viral: HSVTopical  |  |  |  |  |
| Viral: HSVOral |  |  |  |  |
| Fungal: Oral Candidiasis |  |  |  |  |
| Fungal: Tinea Capitis/barbae |  |  |  |  |
| Tinea Corporis & Cruris |  |  |  |  |
| Tinea Pedis |  |  |  |  |
| Tinea Versicolor |  |  |  |  |
| Onychomycosis |  |  |  |  |

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| **Skin Infestations : Head Lice** |
| **Drug name(s):**brand&generic | **When is this indicated?** **Is it a 1st, 2nd line, 3rd?** | **MOA** | **2 major contraindications &** **2 common adverse effects** | **Hepatic / Renal Adjustment?** Y/N |
| Pyrethins |  |  |  |  |
| Permethrin |  |  |  |  |
| Lindane |  |  |  |  |
| Malathione |  |  |  |  |
| Benzyl Alcohol |  |  |  |  |
| Ivermectin |  |  |  |  |
| Spinosad |  |  |  |  |
| Crotamiton |  |  |  |  |
| NonPharm |  |  |  |  |
| **Skin Infestations : Body Lice** |
|  Lindane |  | (see above) |  |  |
|  Permethrin |  |  |  |  |
| Nonpharm |  |  |  |  |
| **Skin Infestations : Pubic Lice** |
| Lindane |  | (see above) |  |  |
|  Pyrethrins |  |  |  |  |
| Nonpharm |  |  |  |  |
|  |  |  |  |  |
| **Skin Infestations : Scabies** |
| Lindane |  | (see above) |  |  |
| Permethrin |  |  |  |  |
| Crotomaton |  |  |  |  |
| Nonpharm |  |  |  |  |
| Topical Corticosteroid |  |  |  |  |

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| **Alopecia Androgenetica**  |
| **Drug name(s):**brand&generic | **First-Line Indications** | **MOA** | **2 major contraindications &** **2 common adverse effects** | **Hepatic / Renal Adjustment?** Y/N |
| Minoxidil |  |  |  |  |
| Finasteride |  |  |  |  |

Answer the following questions on special populations

1. List 8 different individual drugs or 8 different classes of drugs that are indicated on the Beers List as “potentially inappropriate for use in older adult patients:

Available at: <https://www.guidelinecentral.com/summaries/american-geriatrics-society-2015-updated-beers-criteria-for-potentially-inappropriate-medication-use-in-older-adults/#section-society>

1. List 4 different physiological characteristics in neonates that influence drug absorption, distribution, and excretion.

Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4268272/>

1. Describe how the FDA replaced the former pregnancy risk letter categories on prescriptions and biological drug labeling.

Available at: <https://www.drugs.com/pregnancy-categories.html>