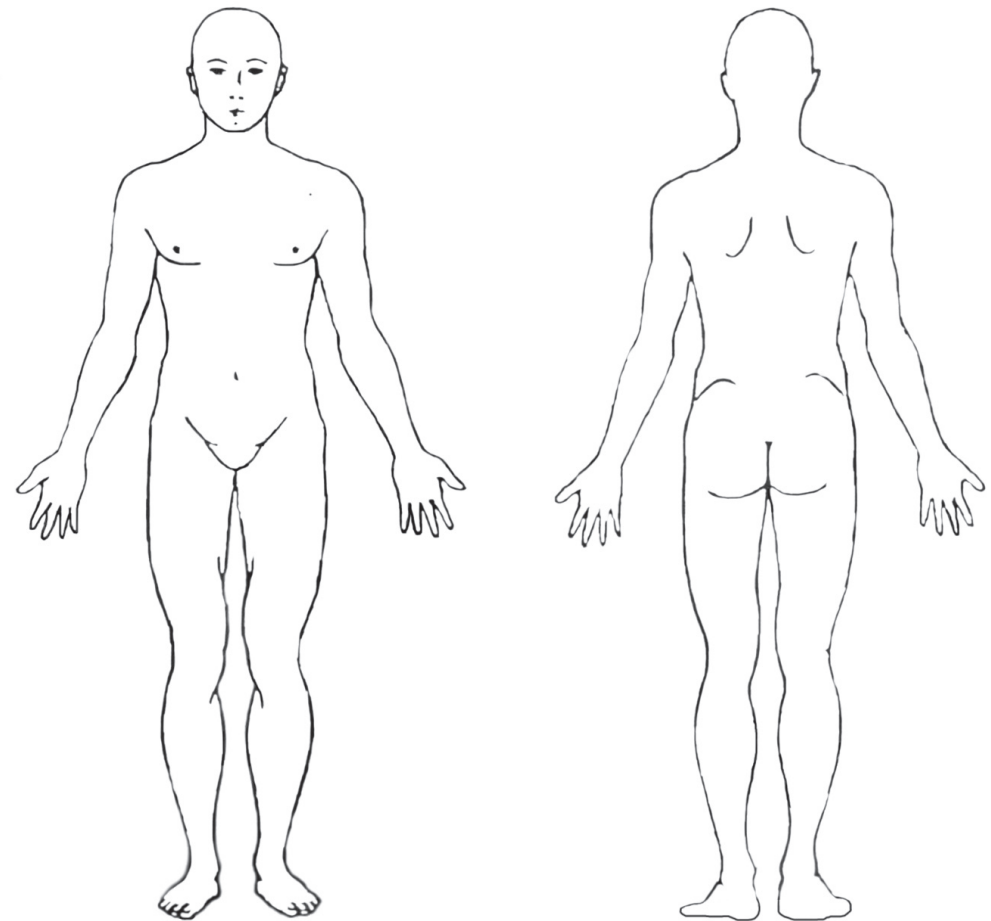


Blister Chart

Dermatological Blistering Conditions

Blister Size	Number
A less than 5 mm	_____
B 5–10mm	_____
C greater than 10mm	_____

Name:
Date of Birth: DD /MM /YYYY
MRN Number:
NHS Number:
(or affix hospital label here)



Date:

Signature:

Mon

Tue

Wed

Thu

Fri

Sat

Sun

Blister Algorithm

Generalised

Tense- Large

PEMPHIGOID

Clues:

Elderly patients
Urticarial lesions
Blood in blisters
Oral lesions
unusual

Tense-Small

Flaccid

PEMPHIGUS

Clues:

Often crusted lesions
mucosal involvement in 70%

With Purpura

DRUG REACTIONS -

VASCULITIS

Clues:

purple lesions often on the legs
blisters within the purple areas

Exclude systemic involvement

Refer Dermatology if diagnosis unsure

Investigations: FBC, Viscosity, ASOT
LFT, U&E, ANF, ANCA
+ urine MCs

No topical treatment helpful

Chickenpox-symptomatic RX

Dermatitis Herpetiformis (rare)

Clues:

itchy lesions on elbows
& knees+ buttocks

Refer Dermatology as outpatient

Tissue Transglutaminase can be done

Refer Dermatology

Initiate Dermovate Cream Topically

Localised

DERMATOMAL

HERPES ZOSTER

Oral Acyclovir/Famcyclovir
Dermol 500 lotion +soak
crusts off in daily baths

stop drugs and

Refer Dermatology

if extensive or
causing skin
stripping

NON-DERMATOMAL

HERPES SIMPLEX –
symptomatic RX
BULLOUS IMPETIGO

Clues:

pus filled blisters
red & crusted discrete lesions
fever
mainly seen in children

Treatment: Oral Flucloxacillin

Topical Fucidin/Bactroban

Soak crusts off in the bath

CELLULITIS OF LEG AND FACE

MAY BLISTER