

REGIONAL WRITE-UP—SKIN, HAIR, AND NAILS

Date _____

Examiner _____

Patient _____ Age _____ Gender _____

Reason for visit _____

I. Health History

	No	Yes, explain
1. Any past skin disease ?		
2. Any change in skin color or pigmentation ?		
3. Any changes in a mole ?		
4. Excessive dryness or moisture ?		
5. Any skin itching ?		
6. Any excess bruising ?		
7. Any skin rash or lesions ?		
8. Taking any medications ?		
9. Any recent hair loss?		
10. Any change in nails?		
11. Any environmental hazards for skin?		
12. How do you take care of skin? Sunscreen?		

II. Physical Examination**A. Inspect and palpate skin**

Color _____

Pigmentation _____

Temperature _____

Moisture _____

Texture _____

Thickness _____

Any edema _____

Mobility and turgor _____

Vascularity and bruising _____

Any lesions (describe) _____

B. Inspect and palpate hair

Color _____

Texture _____

Distribution _____

Any lesions (describe) _____

C. Inspect and palpate nails

Shape and contour _____

Consistency _____

Distribution _____

Color _____

Capillary refill _____

D. Teach skin self-examination

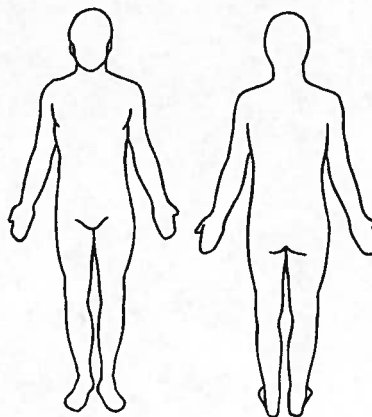
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Summarize your findings using the SOAP format.

Subjective (Reason for seeking care, health history)

Objective (Physical examination findings)

Record distribution of any rash or lesions below



Assessment (Assessment of problem, diagnosis)

Plan (Diagnostic evaluation, follow-up care, teaching)