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| Tinea Corporis (Ring Worm)      | ![Picture](image1.png) | Circular or ring shaped, scaly, raised plaque with irregular erythematous borders often with central clearing | **Topical Antifungals:**  
• Clotrimazol 1% 2-3x daily  
• Ketoconazole 2% 2-3x daily  
• Terbinafin 1% 2-3x daily  
*Continue for 1 wk after resolution* | • Oral or topical antifungal >72 hrs.  
• Lesions must be covered with an occlusive dressing |
| Tinea capitis                   | ![Picture](image2.png) | Patchy scale with varying degrees of hair loss                              | **Oral Antifungals:**  
• Griseofulvin 6-12 wks  
• Itraconazole 2-4 wks  
• Fluconazole 3-6 wks | Oral antifungal for >14 days |
| Herpes Gladiatorum (HSV-1)      | ![Picture](image3.png) | Cluster of vesicles with erythematous borders. It is most likely to occur in the head and face followed by the extremities and the trunk. | **1° Infection: 14 days of tx**  
• Acyclovir 400mg 5x daily  
• Famiclovir 500mg 3x daily  
• Valacyclovir 1000mg 2-3x daily  
**2° Infection: 5 days of tx**  
• Acyclovir 400mg 3x daily  
• Famiclovir 125mg 2x daily  
• Valacyclovir 1000mg 2x daily  
**Suppression**  
• Acyclovir 400mg 2x daily  
• Famiclovir 250 mg 2x daily  
• Valacyclovir 500mg-1g daily | **1° Infection**  
• Oral antiviral >10-14 days  
• No new lesions while on antiviral therapy x 48h  
• All lesions scabbed  
**2° Infection**  
• Oral antiviral >120h  
• No new lesions while on antiviral therapy x 48h  
• All lesions scabbed |
| Herpes Zoster (Shingles)        | ![Picture](image4.png) | Cluster of vesicles with erythematous borders typically in following a dermal tone pattern. |                                                                                                  |                                                                                  |
| Abscess                         | ![Picture](image5.png) | Erythematous, fluctuant, circumscribed soft tissue nodules or mass that may or may not be actively draining | **Treat as if MRSA infection**  
Oral Antibiotics  
• Bactrim  
• Clindamycin  
*I&D if indicated* | • No new lesions >48h  
• Oral antibiotics >72h  
• No draining or oozing lesions  
• All lesions must be scabbed |
| Impetigo                        | ![Picture](image6.png) | Superficial skin infection that often is oozing and has honey crusted lesions | I&D if indicated |                                                                                          |