

ESSCA history – suspected contact allergy

Family name: First name: Date of Birth: (Maiden name): Street: ZIP-code/city: Telephone (work) (home)	Sex: female <input type="checkbox"/> Male <input type="checkbox"/> Date of Examination: / / Hospital-ID Ward
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Atopy

Atopic eczema	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> unclear
Allergic rhinoconjunctivitis	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> unclear
Allergic asthma	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> unclear

Occupation

Current occupation	.....	.... years, months
Previous occupation	.....	.... years, months
(Current occupation II)	.....	.... years, months
(Previous occupation II)	.....	.... years, months
Comments:		

Duration of current symptoms	..... months
Clinical Pattern	<input type="checkbox"/> Photosensitive <input type="checkbox"/> exposed sites <input type="checkbox"/> airborne pattern <input type="checkbox"/> palms/soles
Primary (initial) site (to Diag. 1)	[.....](For list p.t.o.)
Secondary spread	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> unclear

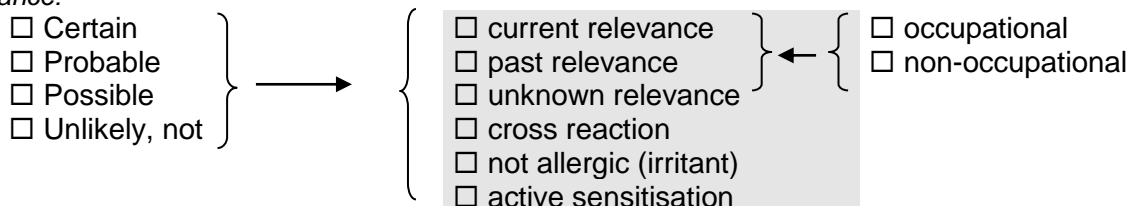
Diagnosis

Final Diagnosis 1 (For list p.t.o.)	[.....]	Site(s) for Diagnosis 1	[.....]
			[.....]
			[.....]
Final Diagnosis 2 (For list p.t.o.)	[.....]	Site(s) for Diagnosis 2	[.....]
			[.....]
			[.....]
Other diagnosis:	.....	
Occupational factor(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partly	<input type="checkbox"/> Unknown	
Endogenous factor(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partly	<input type="checkbox"/> Unknown	
Other exogenous factor(s)	<input type="checkbox"/> Yes, n. s. <input type="checkbox"/> Yes, leisure activity	<input type="checkbox"/> Yes, environmental	
	<input type="checkbox"/> No <input type="checkbox"/> Unknown		
Leisure activities	For list p.t.o. [.....]	[.....]	[.....]
Contact categories	For list p.t.o. [.....]	[.....]	[.....]

Relevance of positive test reactions

After the final reading of the patch test each allergen causing a potentially allergic reaction has to be evaluated in terms of clinical relevance. A respective list is compiled by the computer. It is suggested to comment on relevance at the margin or bottom of the draft sheet with test readings, considering the following aspects for each of these allergens; at least the grey shaded essential one.

Relevance:



Additional comments on the contact category of an allergen containing product, and some information in free text form can, but need not be, entered.

Physician in charge:

List of Diagnoses:

1	Allergic contact dermatitis, not elsewhere classified	L23.9
2	Irritant contact dermatitis, not elsewhere classified	L24.9
3	Atopic eczema / dermatitis syndrome	L20.9
4	Seborrheic dermatitis	L21.9
5	Nummular dermatitis	L30.0
6	Stasis dermatitis	I83.1
7	Photoallergic Dermatitis	L56.8
8	Phototoxic Dermatitis	L56.8
9	Burn, thermal or chemical	T20-T32
10	Psoriasis	L40.0
11	Mycosis	B35-B49
12	Parasitosis	B85-B89
13	Contact urticaria, not elsewhere classified	L50.6
14	Urticaria	L50.9
15	Airborne dermatitis, not elsewhere classified	L23.8
16	Atopic (palmo)(plantar) eczema	L20.8
17	Dyshidrotic eczema, pompholyx	L30.1
18	Stomatitis, contact allergic	K12.1
19	Stomatitis, irritant/toxic	K12.1
20	Cheilitis, contact allergic	K13.0
21	Cheilitis, irritant	K13.0
22	Cheilitis, not further specified	K13.0
23	Protein contact dermatitis	L23.8
24	Xerotic eczema (exsiccation)	L30.8
25	Exanthem (non urticarial)	R21
26	Amalgam allergy, to be excluded	Z01.5

27	Denture allergy, to be excluded	Z01.5
28	Eczema / Dermatitis, not further specified	L30.9
29	Drug intolerance	L27.0
30	Contact allergy, to be excluded	Z01.5
31	Glossodynia	K14.6
32	Hyperkeratotic (tylotic) eczema	L24.9
33	Lichen ruber	L43
34	Perioral dermatitis	L71.0
35	Prurigo	L28.2
36	Pruritus sine materia	L29.9
37	Contact allergy, no clinical correlate	T78.4
99	"other" diagnosis, not elsewhere classified	
1001	Allergic contact dermatitis - exclusively	
1002	Allergic contact dermatitis - predominantly	
1003	Allergic contact dermatitis - contributing	
2001	Irritant contact dermatitis - exclusively	
2002	Irritant contact dermatitis - predominantly	
2003	Irritant contact dermatitis - contributing	
13001	Contact urticaria, immunological	
13002	Contact urticaria, non-immunological	
15001	Airborne dermatitis, contact allergic	
15002	Airborne dermatitis, irritant	
9901	other diagnosis - exclusively	
9902	other diagnosis - predominantly	
9903	other diagnosis - contributing	

List of Sites:

101	Hand, not specified
102	Hand, entire hand
103	Hand, back of hand
104	Hand, palm- not specified
105	Hand, palm- centralized
106	Hand, palm- peripheral
107	Hand, finger- not specified
108	Hand, finger- palmar
109	Hand, finger- side
110	Hand, finger- interdigitally
111	Hand, finger- dorsally
112	Hand, finger- fingertip
201	Head, not specified
202	Head, face
203	Head, periorbital
204	Head, mouth- lip
205	Head, oral mucosa
206	Head, periorbital lid
207	Head, scalp- not specified
208	Head, scalp- margin

209	Head, scalp- centre	504	Arm, lower arm
210	Head, ear- not specified	505	Arm, elbow flexure
211	Head, ear- ear canal	506	Arm, wrist- entire
212	Head, ear- earlobe	507	Arm, wrist- extensor
213	Head, mouth- perioral	508	Arm, wrist- flexor
301	Neck, not specified	601	Leg, not specified
302	Neck, front	602	Leg, upper leg
303	Neck, back	603	Leg, popliteal fold
304	Neck, side	604	Leg, knee
401	Trunk, not specified	605	Leg, lower leg
402	Trunk, back	701	Foot, not specified
403	Trunk, front	702	Foot, toe
404	Trunk, groin	703	Foot, dorsum
405	Trunk, axilla	704	Foot, sole
406	Trunk, ano-genital	801	Flexures, not specified
407	Trunk, ano-genital perianal	802	Flexures, elbow flexure
408	Trunk, ano-genital genital	803	Flexures, popliteal fold
501	Arm, not specified	900	Generalized
502	Arm, upper arm		
503	Arm, elbow		

List of leisure activities (preliminary):

1	Do-it-yourself
2	Pottery
3	Gardening
4	Animals

List of contact categories:

1	clothing, textiles
2	house dusts
3	shoes, boots
4	cosmetics, creams(leave on products)
5	soap, shampoo (rinse off products)
6	hair cosmetics
7	nail cosmetics, artificial nails
8	perfume, deodorant
9	food (additives), skin contact!
10	drugs, external
11	drugs, internal
12	medical mat. (sutures, gel, ..)
13	desinfectants

14	metal (worked with)
15	metal jewellery
16	metal implants
17	metal (other, like coins)
18	tools (metal, wood, plastic)
19	dental filling (e.g. amalgam)
20	dental protheses
21	cutting fluids (water based)
22	neat oils, greases
23	solvents
24	"other" chemicals
25	cleaning agents (detergents)
26	building material

27	woods
28	plants (not food)
29	pesticides, herbicides, ...
30	paints, laquers
31	glues
32	gloves (various materials)
33	leather (other)
34	rubber (other)
35	plastics
36	office material
37	"not classified"