

Children's Mercy Kansas City

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Care Process Models

Quality Improvement and Clinical Safety

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3-2020

### Aphthous Ulcers

Children's Mercy Kansas City

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These guidelines do not establish a standard of care to be followed in every case. It is recognized that each case is different and those individuals involved in providing health care are expected to use their judgment in determining what is in the best interests of the patient based on the circumstances existing at the time. It is impossible to anticipate all possible situations that may exist and to prepare guidelines for each. Accordingly, these guidelines should guide care with the understanding that departures from them may be required at times.

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Algorithm finalized: 03.2020

Female patient presents with genital pain and history of/concern for genital sores or lesion

- Differential:
- Vulvar abscess/cellulitis
  - HPV lesions
  - HSV lesions
  - Mycoplasma ulcers
  - Inflicted genital trauma

Is the exam consistent with inflicted genital trauma? Yes → Off guideline, provide appropriate care

Is the exam consistent with vulvar apthous? No → Off guideline, provide appropriate care

Consult with GYN

Is this a first time or recurrent ulcer? Recurrent → Further discussion with GYN if any additional testing or oral steroids needed

First → Test for CMV and EBV +/- HSV and/or Mycoplasma

Does patient meet admission criteria?

- Patient unable to void or
- Pain not controlled with oral medication

Yes → Inpatient Supportive Care

Can pt. void and is pain controlled? No → Inpatient Supportive Care

Yes → Outpatient Care Instructions: consider Ibuprofen +/- oral narcotics

- Outpatient Care:
- Sitz baths (swirling of low level of water in bath tub) approximately two times a day
  - Pretreat with 2% Lidocaine jelly/ ointment prior to voids
  - Rinse with water, via a pericare bottle, during voids and stooling
  - Wear loose non-restrictive clothing until area is healed
  - If unable to urinate, attempt urination in bathtub or shower
  - Please call Gynecology Clinic (816.234.3199) to schedule follow up appointment in 1 to 2 weeks

- Inpatient Supportive Care:
- When possible, admit to 4 West
  - Consult physical therapy for whirlpool therapy (3-5 sitz baths/whirlpool daily)
  - Pretreat with 2% Lidocaine jelly/ ointment prior to voids
  - Emollient (such as Aquaphor, Vaseline) to lesions as needed
  - Isolation not needed
  - Rinse with water, via a pericare bottle, during voids and stooling
  - Consider stool softner
  - If no foley present and unable to void, place foley
  - Administer pain medication, with goal to transition to Ibuprofen or Tylenol. May consider Tramadol prn for supplemental pain control.
  - Consult the WOC (Wound Ostomy Care) Team for wound management and education