

Accepted Manuscript

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PII: S0738-081X(17)30132-3
DOI: doi: [10.1016/j.clindermatol.2017.08.011](https://doi.org/10.1016/j.clindermatol.2017.08.011)
Reference: CID 7176

To appear in: *Clinics in Dermatology*



Please cite this article as: Makkar Hanspaul S., Grant-Kels Jane M., Rothe Marti Jill, , *Clinics in Dermatology* (2017), doi: [10.1016/j.clindermatol.2017.08.011](https://doi.org/10.1016/j.clindermatol.2017.08.011)

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Commentary

Part II of “Kids Are Not Just Little People” builds on the concept of pediatric vs adult dermatology put forth in part I¹ and part II² how age affects the presentation and management of skin disease—with 11 additional contributions co-authored by pediatric and adult dermatologists and

The First Contributions

LaRosa, Makkar, and Grant-Kels author the first contribution which focuses on the role of total body skin exams in the evaluation of patients of all ages.³ For most adults, the total body skin exam is performed as a skin cancer screen; for most children, the total body skin exam is performed as an assessment of both the extent of the patient’s dermatosis and the likelihood of associated systemic features. Helpful recommendations are provided which may assist in placing adult and pediatric patients at ease during the exam.

Cutaneous injuries are a frequent manifestation of physical abuse. Jinna, Livingston, and Moles describe the morphology of injuries inflicted by abuse in children and adults.⁴ The authors delineate the broad differential diagnosis which the dermatologist should consider, when evaluating a patient who presents with features suggestive of abuse. For example, in an adult patient, the differential diagnosis of burns includes decubitus ulcers, herpes zoster, and bullous pemphigoid; in a child, the differential includes epidermolysis bullosa, sucking blisters, varicella, and pityriasis lichenoides. The authors also discuss the process of evaluating suspected abuse including documentation and mandated reporting laws.

Yates, Whalen, and Makkar discuss anesthesia and postoperative pain control for dermatologic surgical procedures in both the pediatric and adult populations.⁵ As well, the authors highlight nonpharmacologic and pharmacologic interventions to allay preoperative anxiety for patients and family members. General anesthesia has a valuable role in dermatologic surgery for infants and younger children, but elective procedures are typically deferred until local anesthesia can be utilized. The combination of acetaminophen and nonsteroidal anti-inflammatory agents (NSAIDs) can

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