

Pathway for Management of Patients Presenting to SHD with Genital Dermatoses

Sexual Health Services

Patients can self-refer to Sexual Health Dorset (SHD) and may present with symptoms which subsequently prove to be due to genital dermatoses. SHD clinicians will diagnose, initiate treatment and offer short-term follow-up for these conditions but will then refer back to Primary Care for ongoing management, or may refer on to Community Dermatology if initial treatment is unsuccessful (see pathway below).

GPs, Community Dermatologists and other clinicians may refer patients with genital symptoms into SHD

Referrals into SHD can be made via email to:

dhc.sexualhealth.admineast@nhs.net for referrals into the Bournemouth hub

dhc.sexualhealth.adminwest@nhs.net for referrals into the Weymouth hub

Community Dermatology Service

Referrals to the Dorset Healthcare Community Dermatology Service can be made via email to:

dhc.dermatology.admin@nhs.net

The referral letter should include a header that clearly indicates that it comes from Sexual Health Dorset and should contain information about the condition being treated and what has been tried. The letter will be reviewed by a clinician who will accept or possibly forward on to secondary care if thought more appropriate.

Clinics are held in Bridport, Boscombe, Dorchester, Kinson, Sherborne, Wareham and Wimborne.

Referral criteria for Community Dermatology include:

- Rashes of diagnostic uncertainty (malignancy not expected)
- Inflammatory disorders not responding to GP treatment e.g., lichen planus
- Moderate psoriasis for treatment principally with topical therapies
- Moderate eczema for treatment with topical therapies and supervision by nurses/health visitors
- Other moderate inflammatory dermatoses that are poorly controlled despite treatment from GP
- Benign Naevi (for diagnosis as removal non commissioned for cosmetic purposes)
- Bowens Disease (for diagnostic purposes as should be managed by GP)
- Benign lesions

Secondary Care Services

If a malignant or premalignant condition is suspected, urgent referral should be made to the relevant secondary care specialty.

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