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Diagnosis/symptom

Dermoid cysts

Note: suspected dermoids in the midline of face are referred to Children's Craniofacial Clinic.

Referring provider's initial evaluation and management can include:

- Physical exam

When to initiate referral:

- For diagnosis, surgical treatment

What can referring provider send?

- CT scan films (not report) if done. If not already done, defer until after appointment.

Children's workup will likely include:

- Evaluation for excision
- CT scan prior to surgery (may or may not be needed, based on clinical exam)



Diagnosis/symptom

Ear anomalies

Congenital or acquired anomalies of the ear such as accessory tragus, malformed or prominent ears

Note: microtia should be referred to the Craniofacial Clinic.

Referring provider's initial evaluation and management can include:

- Physical exam

When to initiate referral:

- Family requesting consultation for surgical treatment
- Refer patients with prominent ears before age 6 months or after age 6 years.

What can referring provider send?

- No records or films required

Children's workup will likely include:

- Discussion of surgical options for correction of ear anomalies
- Evaluation for ear molding for patients less than 6 months of age



Diagnosis/symptom Facial fractures: mandible orbital zygoma/cheekbone	Referring provider's initial evaluation and management can include: • Physical exam • Radiographic studies	When to initiate referral: • See urgent phone consultation, below.	What can referring provider send? • Radiographic films	Children's workup will likely include: • Evaluation for surgical management
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Clinic phone: 206-987-2759. To request a consult or referral, please call the Clinical Intake Nurses at 206-987-2080 or toll free at 866-987-2080. You may fax a New Appointment Request Form to 206-985-3121 or toll free at 866-985-3121. To speak with a Seattle Children's physician for an urgent phone consultation, call the Physician Operator at 206-987-7777 or toll free at 877-985-4637.



Diagnosis/symptom	Referring provider's initial evaluation and management can include:	When to initiate referral:	What can referring provider send?	Children's workup will likely include:
Lacerations	<ul style="list-style-type: none">• Referral to Emergency Department for complex lacerations	<ul style="list-style-type: none">• Unhealthy, poorly healing, open wounds are present. Patient can be seen on an urgent basis. See urgent phone consultation, below.	<ul style="list-style-type: none">• Records of prior treatment	<ul style="list-style-type: none">• Wound management

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Diagnosis/symptom

Lesions

Congenital or atypical nevus, Spitz nevus, sebaceous nevus or cyst, skin tag, skin or soft tissue tumor, pyogenic granuloma, suspected malignant lesion

Note: lesions on hands are referred to hand surgeon through Children's Orthopedics clinic.

Referring provider's initial evaluation and management can include:

- Physical exam
- Biopsy

When to initiate referral:

- Family requesting consultation for surgical treatment
- Refer immediately on diagnosis/suspicion of malignant lesion. See urgent phone consultation below.

What can referring provider send?

- Any previous workup, biopsy results if done

Children's workup will likely include:

- Evaluation for lesion excision



<p>Diagnosis/symptom Scars</p>	<p>Referring provider's initial evaluation and management can include:</p> <ul style="list-style-type: none"> • Avoidance of sun exposure for at least one year, using hats, sunscreen, etc. • Scar massage after one month of healing • Silicone gel sheeting therapy 	<p>When to initiate referral:</p> <ul style="list-style-type: none"> • Scars less than 12 months since injury are not healing normally or family has concerns • Scars more than 12 months since injury for discussion of scar revision • Keloid scars • Burn scars new or old should be referred to Harborview Burn Center at 206-744-5735. 	<p>What can referring provider send?</p> <ul style="list-style-type: none"> • No records or films required 	<p>Children's workup will likely include:</p> <ul style="list-style-type: none"> • Scar evaluation and advice • Discussion of scar revision to improve appearance and/or function of at least one year after injury or surgery • Possible intralesional steroid injection and/or surgery for keloid scars
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<p>Diagnosis/symptom</p> <p>Vascular malformations</p> <p>Hemangioma, venous/arterial malformation, lymphangioma</p>	<p>Referring provider's initial evaluation and management can include:</p> <ul style="list-style-type: none"> • Physical exam 	<p>When to initiate referral:</p> <ul style="list-style-type: none"> • Requesting consult for surgical treatment 	<p>What can referring provider send?</p> <ul style="list-style-type: none"> • Films from any prior imaging • Records of previous treatment 	<p>Children's workup will likely include:</p> <ul style="list-style-type: none"> • Discussion of surgical options
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> Tips for an effective Seattle Children's appointment:

- Talk with your patient and family about the reason for the referral and the questions to be answered.
- Our providers appreciate having the information ahead of time; alternatively, it can be hand carried by the family.
- Provide relevant clinical notes.

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