Common Skin Problems & Infections — EMT Cheat Sheet

2025–2026 current guidance · vocabulary · transmission · precautions · the exam answer · emttutor.com

THE ONE BEDSIDE TEST: press the skin. **Blanching** = blood inside vessels (usually benign). **NON-blanching** = blood outside the vessel — petechiae or purpura — **an emergency until proven otherwise**.

VOCABULARY — the first questions on any derm exam

Term	Means	Seen in
Macule	Flat, colored, not raised	Freckle, flat petechia
Papule	Small raised solid	Bug bite, wart
Vesicle / Bulla	Blister <1 cm / >1 cm	Varicella, burns, bullous impetigo
Pustule	Pus-filled	Folliculitis, abscess
Wheal	Raised, itchy, transient, blanching	Urticaria / anaphylaxis
Crust	Dried exudate — honey-colored	Impetigo
Petechiae / Purpura	Pinpoint / larger NON-blanching	Meningococcemia, RMSF, DIC

FUNGAL & INFESTATIONS

Problem	Look · spread · care
Ringworm (tinea)	Fungal, **not a worm**. Ring plaque, red border, clear center. Skin contact + shared towels/mats/animals. Topical antifungal; scalp & nails need oral. **No steroid cream** — it spreads (tinea incognito). Not reportable.
Scabies	Mite burrows; itch **worse at night**; webs, wrists, waistline. Needs prolonged skin contact. Permethrin 5% or ivermectin; treat **all contacts same day**; hot-wash. **Crusted/Norwegian** = thousands of mites, casual contact transmits — gown + tell receiving facility.
Lice	Head: head-to-head, shared hats. **Body lice** live in seams and transmit **typhus, trench fever, relapsing fever**. Permethrin shampoo, comb nits, treat contacts.

BACTERIAL SKIN INFECTION

Problem	Look · care
Cellulitis	Deep dermal spread: warmth, redness, swelling, tenderness, **poorly defined border**, fever, ± lymphangitis. **Mark the border + time.** Not contagious — the pus is.
Erysipelas	Superficial strep: bright red, raised, **sharply demarcated**, abrupt high fever.
Abscess / MRSA	Fluctuant, warm, central pustule. Drainage is the treatment — **by a provider, never in the field**. Contact spread of pus.
Impetigo	Honey-colored crusts, nose/mouth, children. Contagious; excluded 24–48 h after treatment starts.
Necrotizing fasciitis	**Pain out of proportion**, rapid spread, bullae, dusky skin, anesthesia, crepitus, fever + hypotension. **Surgery, not antibiotics. Transport now** — don't delay for an IV.

VIRAL RASHES

Disease	Key · precautions
Measles (rubeola)	3 C's — cough, coryza, conjunctivitis; **Koplik spots**; rash hairline → down, ~4 days. **AIRBORNE — N95** + eye protection. Reportable. Worst <5, >20, pregnancy.
Rubella (German measles)	Mild, fine pink rash face → down ~3 days, **tender nodes behind ears + neck**, Forschheimer spots. Threat is **the fetus** — congenital rubella syndrome (deafness, cataracts, heart defects). Droplet. Non-immune pregnant responder stays out. Reportable.
Varicella	Crops in **stages at once** (macule+vesicle+crust), trunk first. **Airborne + contact**. Contagious 2 days before rash until all crusted. Shingles = reactivation, cover lesions. No aspirin in kids (Reye).
Fifth disease	Slapped cheeks, lacy trunk rash. **Contagious before the rash** — exclusion pointless. Aplastic crisis in sickle cell; fetal hydrops.
Roseola	<2 yrs. High fever 3–5 days, **rash appears as the fever breaks**. Febrile seizures.
Hand-foot-mouth	Mouth ulcers + vesicles on palms and soles. Coxsackie, day care. Watch hydration.
Mumps	Parotid swelling pushing earlobe **up and out**, fever. **Orchitis** in post-pubertal males, meningitis, deafness, pancreatitis. **Droplet**. Reportable.

EMERGENCIES HIDING IN A RASH

Non-blanching petechiae + fever → meningococcemia until proven otherwise (also RMSF, DIC, TTP).
Hives + airway swelling / wheeze / hypotension → anaphylaxis: **epinephrine**, supine and flat.
Painful peeling + mucous membrane sores → SJS/TEN, usually drug-related.
Pain out of proportion + fast spread → necrotizing fasciitis.

PRECAUTIONS IN ONE LINE: standard + hand hygiene for everything; **contact** for scabies, lice, MRSA, impetigo, shingles lesions; **droplet** for mumps and rubella; **airborne + N95** for measles and varicella. Reportable: measles, mumps, rubella, varicella, meningococcal. Not reportable: ringworm, scabies.