

Eczema (Atopic Dermatitis) Action Plan for Schools & Early Learning Centres



Eczema Support
AUSTRALIA
- Your Hands to Hold -

Patient: _____ Date of Birth: _____

Plan prepared by Medical Specialist/GP/Nurse Practitioner: _____

Signed: _____ Date: _____

To maintain & protect skin



Apply Emollient/Moisturiser : _____

Frequency : _____

Use only non-soap cleansers : _____

To treat inflamed skin

Use prescribed medicated creams or ointments as directed



• Face and other sensitive areas:
(medication name and dose plus times/day)

• Hands & Feet:
(medication name and dose plus times/day)

• Body:
(medication name and dose plus times/day)

Other treatments



Avoid triggers/allergens/irritants:



Review Date



Reviewed by the
Australasian College of Dermatologists