

***DR S M KHORSHID, MD, MSc, FRCP, DIPRCPATH***

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**Patient Registration and Melanoma Risk Estimation Questionnaire**

<b>Patient Details</b>	<b>General Practitioner</b>
Title:	Doctors Name:
Last Name:	Practice Name:
First Name:	Address:
D.O.B	Tel. No:
Address:	
Post Code:	
Home Tel. No:	
Work Tel No:	
Mobile:	
E-mail:	

**Information and Consent**

I confirm that to my knowledge, the information I have provided is correct. I consent to any information and medical photographs taken to be stored digitally and that my report is communicated with my general practitioner. I consent to receiving future reminders for mole mapping and screening is deemed necessary. I undertake to settle my account promptly and understand that 24 hours' notice is required for cancellation of appointments, otherwise a charge will be issued.

Signed..... Date:.....

The results and recommendations are based on the examination and the images taken on the day of screening. Skin lesions can change at any time and new lesions may develop. You are advised to contact us or your GP should there be any concerns. By signing this consent form you confirm that you are aware that there is currently a small risk of COVID19 infection which is not quantifiable we do everything in our power to protect you and our staff.

**Risk Factors**

**Table 1, individual assessment**

				<b>RR</b>
1.	Personal history of malignant melanoma	Yes	No	10
2.	Family history of malignant melanoma	Yes	No	2.5
3.	Single blistering sunburn episode	Yes	No	2.5
4.	Repeated episodes of sunburn in childhood	Yes	No	2.5
5.	Regular sunbed use	Yes	No	2.5
6.	Extensive freckling	Yes	No	2.5
7.	Red hair	Yes	No	2.5

**Table 2**

**Nurse Assessment**

1.	More than 100 naevi	Yes	No	10
2.	More than 3 atypical naevi	Yes	No	10
3.	Skin type I or II	I	II	2.5
4.	Extensive freckling	Yes	No	2.5
5.	NMSC (non-melanoma skin cancer)	None BCC/SCC/AK/BOWENS		3
6.	Two or more 1 <sup>st</sup> degree relatives with melanoma	Yes	No	10
7.	Immuno-suppressive therapy	Yes	No	1.5
8.	Giant congenital melanocytic naevus	Yes	No	100

## The Report

### Visual Examination

Dermoscopic findings and recommendations  
(please see attached photographs)

	No abnormality detected	Urgent referral to Specialist	Routine referral to Specialist	Follow up
Lesion 1				
Lesion 2				
Lesion 3				
Lesion 4				
Lesion 5				

### Melanoma Risk Estimation

Low – Average – Above average – High

Risk factors for malignant melanoma are not cumulative. They provide an indication of risk compared to UK average life time risk of melanoma which is 1 in 77 in women and 1 in 91 in men.

- Make sure you are familiar with the normal appearance of your skin and any moles you have.
- Not all melanomas develop from a pre-existing mole. In fact according to various studies, only 15-50% of histopathological sample of malignant melanoma show evidence of a pre-existing mole. The majority of melanomata therefore develop as a melanoma. Multiple mole removal as a preventative measure therefore is not recommended and by the same token UV protection is important for the entire exposed skin and not just for the mole.

Some sun smart advice from Cancer Research UK:

- Spend time in the shade between 11am and 3pm
- Wear a t-shirt, hat and sunglasses
- Use sun screen with at least sun protective factor (SPF) of 30. Of course the higher the SPF the better with good UVA protection ie. total block. The SPF number gives you the amount of protection for UVB. For UVA protection we have a star rating of up to 5 on UK sunscreens. The minimum recommended is 4 stars. Symbol of a circle with letters UVA inside is a European mark indicating good UVA protection.

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