# **Supplemental Online Content**

Fried LJ, Tan A, Berry EG, et al. Dermoscopy proficiency expectations for US dermatology resident physicians: results of a modified Delphi survey of pigmented lesion experts. *JAMA Dermatol*. Published online January 6, 2021. doi:10.1001/jamadermatol.2020.5213

**eTable.** Respondent demographics (n=26) **eMethods.** Survey data

This supplemental material has been provided by the authors to give readers additional information about their work.

# eTable. Respondent demographics (N=26)

Years of Experien	nce after Dermat	ology Residency	(N=26)					
Years	<1 year	1-5 years	6-10 years	11-15 years	>15 years			
# (%) of	1 (4%)	6 (23%)	5 (19%)	4 (15%)	10 (39%)			
panelists								
Specialization in 1	Specialization in Pigmented Lesions, Dermoscopy, or Melanoma (N=26)							
Responded "No"			2 (8% of panelist	rs)				
Responded "Yes"			24 (92% of panel	lists)				
Number o	Number of years specializing in pigmented lesions and melanoma as an attending							
dermatolo	ogist (N=24)							
Years	<1 year	1-5 years	6-10 years	11-15 years	>15 years			
# (%) of	1 (4%)	8 (33%)	5 (21%)	4 (17%)	6/(25%)			
panelists								
Number of Years	using Dermosco	py (N=26)						
Years	<1 year	1-5 years	6-10 years	11-15 years	>15 years			
# (%) of	0 (0%)	0 (0%)	10 (38%)	10 (38%)	6 (23%)			
panelists								
Dermoscopy Teaching to Residents by Panelists (N=26)								
Dermoscop	Dermoscopy Education in Clinic			24 (92% of panelists)				
Dermoscop	y Education in Le	cture Format	24 (92% of panelists)					

## eMethods. Survery data

## **DERMATOLOGIC DIAGNOSES: ROUND 1**

## **Nonmelanocytic Lesions**

We would like to identify the diagnoses that should be included in the dermoscopy core competency for dermatology residents. Please rate how strongly you would agree or disagree.

competency for ac	Strongly	Disagree	Neutral	Agree Agree	Strongly Agree
Basal cell	Disagree				
carcinoma					
Actinic keratosis					
Pigmented					
actinic keratosis					
Bowen's disease					
(squamous cell					
carcinoma in					
situ)					
Keratoacanthoma					
Squamous cell					
carcinoma					
Solar lentigo					
Simple lentigo					
(lentigo simplex)					
Seborrheic					
keratosis					
Hemangioma /					
angioma					
Lichen planus-					
like keratosis					
Angiokeratoma					
Dermatofibroma					
Clear cell					
acanthoma					
Sebaceous					
hyperplasia					

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## **Benign Melanocytic Lesions**

We would like to identify the diagnoses that should be included in the dermoscopy core competency for dermatology residents. Please rate how strongly you would agree or disagree.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Overview of benign nevi patterns (i.e. globular, network)					
Congenital melanocytic nevi					
Intradermal					

· · ·									
nevi									
Blue nevi									
Spitz nevi									
Recurrent									
(persistent)									
nevi									
·	Please include any additional comments here								
Melanoma									
	dentify the diagn	oses that should	he included in th	e dermoscopy c	ore competency for				
dermatology resid					ore competency for				
dermatology resid	Strongly	Disagree Disagree	Neutral	Agree	Strongly Agree				
	Disagree	Disagree	Neutrai	Agree	Strongly Agree				
Overview of	Disagree								
melanoma									
characteristics									
(i.e. blue-white									
veil, regression									
structures)									
Acral									
lentiginous									
melanoma									
Lentigo									
maligna									
melanoma									
(melanoma on									
chronically									
sun-damaged									
skin of the									
head/neck)									
Please include a	nv additional co	mments here	•						
	,	_			_				
Special Sites									
	dentify the diagn	oses that should	he included in th	e dermoscopy c	ore competency for				
dermatology resid					2. C COp C.Cc, 10.				
	Strongly	Disagree	Neutral	Agree	Strongly Agree				
	Disagree	Dioag. cc	, road a	7.19.00					
Dermoscopic	2.003.00								
features of the									
face									
(pseudonetwork)	<b>\</b>								
Dermoscopic	)								
features of acral									
	lesions Please include any additional comments here								
riease include ai	ny additional co	mments nere _			<del></del>				
If there are any	other diagnoses	s or special sites	you feel shoul	d be added, pl	ease include them				
here									

#### **DERMATOLOGIC DIAGNOSES: ROUND 2**

#### **Nonmelanocytic Lesions**

We would like to identify additional diagnoses (based on comments submitted by panelists in the "Diagnoses - Round 1" survey) that should be included in the dermoscopy core competency for dermatology residents. Please rate how strongly you would agree or disagree.

	5,	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Por	oma					

#### **Benign Melanocytic Lesions**

We would like to identify additional diagnoses (based on comments submitted by panelists in the "Diagnoses - Round 1" survey) that should be included in the dermoscopy core competency for dermatology residents. Please rate how strongly you would agree or disagree.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Halo nevus					

#### Melanoma

We would like to identify additional diagnoses (based on comments submitted by panelists in the "Diagnoses - Round 1" survey) that should be included in the dermoscopy core competency for dermatology residents. Please rate how strongly you would agree or disagree.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Amelanotic melanoma					
Nevoid melanoma					
Desmoplastic melanoma					
Melanoma arising withing a nevus					

#### **Special Sites**

We would like to identify additional special sites (based on comments submitted by panelists in the "Diagnoses - Round 1" survey) that should be included in the dermoscopy core competency for dermatology residents. Please rate how strongly you would agree or disagree.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Trichoscopy (dermoscopy of the hair and scalp)					
Dermoscopy of the nails					
Dermoscopy of mucosal surfaces					

## Trichoscopy (dermoscopy of the hair and scalp)

If this category is included as a special site, please rate how strongly you agree or disagree that the following common diagnoses of the hair and scalp should be included in the dermoscopy core competency for dermatology residents.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Androgenetic alopecia					
Alopecia areata					
Discoid lupus erythematosus					
Lichen planopilaris					

## **Dermoscopy of nails**

If this category is included as a special site, please rate how strongly you agree or disagree that the following common diagnoses of the nails should be included in the dermoscopy core competency for dermatology residents.

,	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Lentigo of the nail					-
Nevus of the nail					
Melanoma of the nail					
Subungual hemorrhage					
Onychomatricoma					
Onychopapilloma					

### **Dermoscopy of mucosal surfaces**

If this category is included as a special site, please rate how strongly you agree or disagree that the following common diagnoses of mucosal surfaces should be included in the dermoscopy core competency for dermatology residents.

, , , , , , , , , , , , , , , , , , ,	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Labial melanotic macule / labial lentigo					
Melanoma of a mucosal surface					

#### **Other**

Suggestions from panelist comments in the "Diagnoses - Round 1" survey for additional diagnoses to be included in the dermoscopy curriculum for dermatology residents which did not fall within our previously designated categories are presented here. Please rate how strongly you would agree or disagree.

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	Strongly	Disagree	Neutral	Agree	Strongly Agree	
	Disagree					

Psoriasis			
Lichen planus			
Vasculitis			
Scabies			
Merkel cell			
carcinoma			

Please include any additional comments here

#### **DERMOSCOPIC FEATURES: ROUND 1**

We would like to identify structures that should be included in the dermoscopy core competency for dermatology residents for each of the following diagnoses. Please rate how strongly you would agree or disagree.

#### **NONMELANOCYTIC LESIONS**

## Basal cell carcinoma

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Leaf-like					
structures					
Blue-gray					
ovoid nests					
Multiple blue-					
gray dots and					
globules					
(buckshot					
scatter)					
Spoke wheel-					
like structures					
/ concentric					
structures					
Ulceration /					
erosion					
White shiny					
blotches and					
strands					
Arborizing					
blood vessels					
Rosette sign					

If you have any suggestions for additional structures that you feel should be included, please note here.

#### **Actinic Keratosis**

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Strawberry pattern (pink- red pseudonetwork + fine, wavy vessels (straight or	Disagree				

			found the definition	on
he above features	to be the most p	revalent		
suggestions for	additional struct	tures that you fe	el should be incl	uded, please
33		,		, ,
nic keratosis				
	Disagree	Neutral	Agree	Strongly Agree
	- 100 9. 00		1.5.00	
g				
cugaestions for	additional struct	turos that you fo	ol chould be incl	ludod ploaco
suggestions for	additional Struct	tures triat you re	el siloulu de lilo	luueu, piease
<del></del>				
		-!\		
			A	Character A annua
Disagree	Disagree	Neutrai	Agree	Strongly Agree
	suggestions for  nic keratosis Strongly Disagree  suggestions for  suggestions for  suggestions for  strongly	suggestions for additional struct  nic keratosis  Strongly Disagree  suggestions for additional struct  suggestions for additional struct  suggestions for additional struct  se (squamous cell carcinoma in struct)  Strongly Disagree	suggestions for additional structures that you fee  nic keratosis  Strongly Disagree  Neutral  suggestions for additional structures that you fee  strongly Disagree  Neutral	suggestions for additional structures that you feel should be incleased by the structures and the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel should be incleased by the suggestions for additional structures that you feel

(coiled) blood					
vessels		<u> </u>			
-			uctures that you	u feel should be	e included, please
note here					
Vtopeonthor					
Keratoacanthor	<b>na</b> Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	Disagree	Neutrai	Agree	Strongly Agree
Central keratin	2.009.00				
mass					
Hairpin		T			
(looped) or					
serpentine					
(linear- irregular)					
blood vessels					
with white-					
yellow halo					
If you have any	suggestions fo	r additional stru	uctures that you	u feel should be	included, please
note here		_			
Squamous cell		T 5:			Ctt A mus s
	Strongly	Disagree	Neutral	Agree	Strongly Agree
Yellow keratin	Disagree				
mass / scale-					
crust					
Ulceration /					
blood spots /					
hemorrhage			_		
White circles					
("keratin pearls")					
Rosette sign		+			
Glomerular					
(coiled) blood					
vessels					
Hairpin					
vessels,					
usually with whitish halo					
	suggestions fo	<u> </u>		l u faal should he	e included, please
note here.	suggestions to	I duuliionai siri	actures triat you	u leei siloulu be	; included, please
note nere:					
Solar lentigo					
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Moth-eaten					
(sharply					
demarcated)					
borders					

light brown					
pigmentation					
Network-like					
structures					
Fingerprint-like					
structures					
T.C	ı. c	1 1222		6 1 1 111	· I I I I
-			ictures that you	i feel should be	e included, please
note here					
Simple lentigo		plex)			
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Symmetric					
with uniform					
pigment					
network					
If you have any	suggestions for	r additional stru	ctures that you	ı feel should be	included, please
note here.			•		
Seborrheic ke	ratosis				
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	Disagree	Neada	rigice	Strongly Agree
Milia-like cysts	Disagree				
Comedo-like					
openings					
Moth-eaten					
(sharply					
demarcated)					
borders					
Network-like					
structures					
"Fissures and					
ridges" / hyri					
and sulci /					
cerebriform					
pattern					
Fat fingers					
Fingerprint-like					
structures					
Hairpin					
(looped)					
vessels,					
usually with					
whitish halo					
	suggestions for	r additional stru	ictures that you	ı feel should be	included, please
note here.	suggestions to	i additional stru	ictures that you	i reer should be	, included, piedse
110te 11cle					
1	:	- / Dani 11-1		-!-	
Lichen planus					Ch. I A
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	1			

Coarse gray

granularity					
Peppering					
(evenly spaced					
gray dots)					
If you have any	suggestions for	additional struc	tures that you fe	el should be inc	luded, please
note here.			,		, ,
Hemangioma	/ angioma				
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	Diody. CC	Troda a	7.9.00	ourongly rigide
Red, blue-red,	Diody: CC				
or maroon					
lacunae /					
lagoons with					
white septae					
Blue-black					
coloring (when					
thrombosed)					
	suggestions for	additional struc	tures that you fe	el should be incl	uded, please
note here.					audu, pidudo
note nerer					
Angiokeratom	a				
/ Inglokeracom	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	Disagree	readiai	/ Igi CC	Scrongly Agree
Red / purple /	Disagree				
black ("dark")					
lacunae					
Hemorrhagic					
crust					
Whitish veil					
	suggestions for	· additional struc	tures that you fe	el should be inc	luded nlease
note here.	suggestions for	additional Struc	tures triat you re	cei silloulu de lille	idded, piedse
note nere					
Dermatofibro	ma				
Delillatolibio		Disagree	Neutral	Agroo	Strongly Agree
	Strongly Disagree	Disagree	Neutrai	Agree	Strongly Agree
Central scar-	Disagree				
like white					
patch with					
delicate					
surrounding					
network-like					
structures					
Ring-like					
globules					
Central shiny					
white lines					
(crystalline					
structures)					
	suggestions for	· additional struc	tures that you fe	el should be incl	luded nlesce
note here.		additional Struc	cuites triat you le	ei siloulu de IIIC	iuucu, picase
ווטנב וובוב					

Clear	· cell	l acanthoma

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
String of pearls (serpiginous) blood vessel pattern					

If you have any suggestions for additional structures that you feel should be included, please note here. \_\_\_\_\_

Sebaceous hyperplasia

Sepaceous my	Sebaceous Hyperpiasia						
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree		
Pale yellow lobules around a central follicular opening							
Crown vessels							

If you have any suggestions for additional structures that you feel should be included, please note here.

## **MELANOCYTIC LESIONS**

Overview of benign nevi patterns

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Diffuse reticular network					
Patchy reticular network					
Peripheral reticular network with central hypopigmentation					
Peripheral reticular network with central hyperpigmentation					
Peripheral reticular network with central globules					
Homogenous (tan, brown, blue, or pink)					
Central network with evenly distributed					

peripheral									
globules									
Globular pattern									
Two-component									
pattern									
Symmetric multi	-								
component									
pattern							<u> </u>		L
If you have any	suggestio	ns for	addition	ial struct	ures t	hat you fe	el sho	ould be incl	uded, please
note here									
Congenital me	lanocytic	<u>c nevi</u>							
		Strong	•	Disagree	9	Neutral		Agree	Strongly
		Disagr	ee						Agree
Cobblestone pat	tern /								
globular pattern									
Reticular networ	k								
Diffuse backgrou	ınd								
pigmentation									
Hypertrichosis									
Target network /									
like structures (g	lobules								
or vessels within	holes of								
network)									
Perifollicular									
hyper/hypopigm	nentation								
If you have any	suggestio	ns for	addition	al struct	ures t	hat you fe	el sho	ould be incl	uded, please
note here.						•			
Intradermal n	evi								
	Strongly		Disagre	e	Neutr	al	Agre	e	Strongly Agree
	Disagree		3 3				3		3, 3
Comma-									
shaped									
(curved) blood									
vessels									
If you have any	suaaestio	ns for	addition	al struct	ures t	hat vou fe	el sho	ould be incl	uded, please
note here.	55					,			, р
Blue nevi									
Dide nevi	Strongly		Disagre	Δ.	Neutr	al	Agre	۵	Strongly Agree
	Disagree		Disagre		Neuu	ai	Agre		Strongly Agree
Homogenous	Disagree								
blue									
pigmentation									
If you have any	cuagostio	nc for	addition	al ctruct	uroc t	hat you fo	ol cho	yuld bo incl	udod ploaco
		101 211	auuiliOf	iai Struct	ures t	nat you re	CI SIIC	oulu De IIICI	uueu, piease
note here									
C!.									
Spitz nevi	T 61 ·		T 5:					1	6
	Strongly		Disagr	ee	Neut	ral	Agre	ee	Strongly Agree
	Disagree	9							

Vascular pattern					
(pink					
homogenous					
pattern with					
dotted vessels)					
Globular pattern					
Starburst					
pattern (with					
tiered globules /					
streaks) (radial					
streaming)					
Reticular					
pattern					
Atypical pattern					
Homogenous					
(pigmented					
pattern)					
Negative					
network					
(reticular					
depigmentation)					
White shiny					
lines (crystalline					
structures)					
If you have any	suggestions for	r additional str	uctures that you	ı feel should be	included, please
note here					
Recurrent (pe	rsistent) nevi				
Recurrent (pe	rsistent) nevi	Disagree	Neutral	Agree	Strongly Agree
Recurrent (pe			Neutral	Agree	Strongly Agree
Recurrent (pe	Strongly		Neutral	Agree	Strongly Agree
	Strongly		Neutral	Agree	Strongly Agree
Pigment within	Strongly		Neutral	Agree	Strongly Agree
Pigment within the scar, not	Strongly		Neutral	Agree	Strongly Agree
Pigment within the scar, not extending beyond	Strongly Disagree	Disagree			
Pigment within the scar, not extending beyond If you have any	Strongly Disagree	Disagree			Strongly Agree
Pigment within the scar, not extending beyond	Strongly Disagree	Disagree			
Pigment within the scar, not extending beyond If you have any note here.	Strongly Disagree	Disagree			
Pigment within the scar, not extending beyond If you have any	Strongly Disagree	Disagree			
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA	Strongly Disagree suggestions for	Disagree r additional str			
Pigment within the scar, not extending beyond If you have any note here.	Strongly Disagree suggestions for	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov	Strongly Disagree suggestions for	Disagree r additional str			
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network Blue structures	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network Blue structures	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond  If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network Blue structures (blue-white	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network Blue structures (blue-white veil, blue-gray	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please
Pigment within the scar, not extending beyond If you have any note here.  MELANOMA  Melanoma (ov  Atypical pigment network Blue structures (blue-white veil, blue-gray structures)	Strongly Disagree  suggestions for  erview of fea  Strongly	Disagree r additional str	uctures that you	ı feel should be	included, please

(crystalline					
structures)					
Negative					
network					
Irregular dots					
/ globules					
Irregular					
streaks (radial					
streaming,					
pseudopods) Regression					
structures					
(white scar- like area with					
peppering)					
Peripheral					
brown					
structureless					
area					
Angulated					
lines					
(extrafacial)					
Atypical vascular					
pattern,					
polymorphous					
vessels (2+					
types of blood					
vessels)					
Atypical blotch			 	ا ما مامینامالممنامما	ludad mlaasa
If you have any	suggestions for	additional Struct	tures that you re	ei snould be inc	luded, please
note here		-			
	-				
Acral lentigino		T = -	T	Γ.	T
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Parallel ridge					
pattern					
Irregular					
diffuse					
pigmentation					
Multicomponent					
Pattern					
Atypical fibrillar					
pattern					
If you have any	suggestions for	additional struct	tures that you fe	el should be incl	luded, please
note here					
Lentigo maligna		elanoma on chr			
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Annular-					

granular					
pattern (gray					
dots around					
follicular					
openings)					
Asymmetric					
pigmentation					
around					
follicular					
openings					
Rhomboidal					
structures					
Target pattern					
(circle within a					
circle) (isobar)					
Dark blotches					
with or without					
obliterated hair					
follicles					
If you have any	suggestions for	additional struct	tures that you fe	el should be incl	uded, please
note here					
Amelanotic mel	anoma				
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Scar-like					
depigmentation					
Milky red areas					
White shiny					
lines					
(crystalline					
structures)					
Atypical					
vascular					
pattern,					
polymorphous					
vessels (2+					
types of blood					
vessels)					
	suggestions for	additional struct	ures that you fe	el should be incl	uded, please
note here.					auca, prodec
note here:					
Melanoma arisi	ng within a nev	us			
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	2.00.9.00		7 .g. 00	Cu. c g. , 7 . g. CC
Structures as	J				
listed in					
"overview of					
benign nevi					
patterns"					
Structures as					
listed in					
	I .		<u>I</u>	<u>I</u>	ı

				1	
"melanoma (overview of					
features)"					
Negative network					
If you have any	suggestions for	additional struc	tures that you fe	el should be inc	luded, please
note here.	33		,		, ,
	vide a brief desc	ription of why vo	ou believe that th	nis structure sho	uld be
•		• • • •	ompetency in cha		
			d in clinical pract		tilis diagriosis
(i.e. riigiliy spec	inc, very commi	offiny efficuation effect	in chinear pract	ice, etc.)	
SPECIAL SITES	/ OTHER				
SPECIAL STILS	/ OTTIEK				
Dermoscopic fe	atures of the fa	nce			
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	J.509. 66	- reduction	7.9.00	ou.origi, / igi cc
Pseudonetwork	2.00.9.00				
pattern					
	suggestions for	additional struc	tures that you fe	el should he inc	luded nlease
•	suggestions for	additional struc	tures that you re	ci siloulu be ille	luucu, picasc
note here					
A I	D!				
Acrai dermosco		terns of acral ne			
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Parallel furrow					
pattern					
Lattice-like					
pattern					
Fibrillar					
pattern (soles					
only)					
Homogenous					
pattern					
Peas in a pod					
pattern					
(parallel					
furrow +					
globules on					
ridges)					
(congenital					
nevi)					
If you have any	suggestions for	additional struc	tures that you fe	el should be inc	luded, please
note here.					
<b>DERMOSCOPY</b>	OF NAILS				
Nevus of the na	nil				
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	= .55.g. 55		5	_ s. cg., , .g. cc
Homogenous	g. 32				
brown					
	1	1	1	1	

background coloration					
Uniform band					
thickness,					
color, and					
spacing with					
parallel band					
configuration					
	auggestions for	additional atmos	lurga that way fa	ol should be incl	ludad planca
If you have any	suggestions for	additional Struc	tures triat you re	ei siloula de ilici	iuueu, piease
note here					
Lentigo of the n	nail (melanotic r	macule of the na	ail)		
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				3, 3
Multiple thin					
homogenous					
gray lines +/-					
gray					
background					
If you have any	suggestions for	additional struc	tures that you fe	el should be inc	luded nlease
note here.			tures triat you re	ci siloulu be ille	idaca, picasc
note nere					
Melanoma of th	e nail				
-inclainonna or tri	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree	Disagree	Nederal	Agree	Strongly Agree
Triangular	Disagree				
shape of					
pigment band					
(band					
diameter wider					
at proximal					
end)					
Pigmentation					
of periungual					
skin (micro-					
Hutchinson's					
sign)					
Brown to black					
dots/globules					
associated					
with					
-					
longitudinal					
lines					
Longitudinal					
brown/black					
lines with					
irregular					
spacing, width,					
coloration, or					
parallelism	<u> </u>	1 100		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
If you have any	suggestions for	additional struc	tures that you fe	ei should be inc	luded, please

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note here.

Subungual Hem	orrhage				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Well					
circumscribed					
red-black dots					
or blotches					
Distal streaks of					
red-brown					
coloration					
("filamentous"					
distal end)					
Homogenous					
red/purple/black					
coloration					
without melanin					
granules					
	suggestions for	additional struct	tures that you fo	al chauld be inc	ludod ploaco
If you have any		auditional Struct	lures triat you re	ei siloulu be ilici	luueu, piease
note here					
OTHER Scabies					
Scapies	Ctrongly	Disagras	Neutral	Agroo	Ctrongly Agroo
	Strongly Disagree	Disagree	Neutrai	Agree	Strongly Agree
Delta-wing jet					
with contrail					
sign (small					
dark brown					
triangular					
structure					
located at the					
end of whitish					
structureless					
curved/wavy					
lines					
If you have any	suggestions for	additional struct	ures that you fe	el should be incl	uded, please
note here.					aucu, proucc
note here:					
ADDITIONAL DI	IAGNOSES				
We also present h		additional diagno	sis hased on a nai	nelist suggestion i	n the Diagnoses
round 2 survey. Pl					
diagnosis as a cor		origiy you would	agree or alsagree	on the inclusion c	n the following
diagnosis as a cor	Strongly	Disagree	Neutral	Agroo	Strongly Agree
	Disagree	Disagree	Neutrai	Agree	Strongly Agree
Angiocarcoma	Disagree				
Angiosarcoma					<u>l</u>
If the diagnosis would agree or					
Trouis agree or	Strongly	Disagree	Neutral	Agree Agree	Strongly Agree
	Disagree				<u> </u>

Homogenous					
pattern with					
combinations					
of patterns					
(i.e., whitish,					
pinkish,					
reddish,					
bluish, or					
violaceous)					
Central whitish					
veil areas /					
skin-colored					
areas					
Absence of					
well-defined					
vascular					
structures (i.e.					
lacunes,					
vessels)					
If you have any	suggestions for	additional struct	tures that you fe	el should be incl	uded, please
note here					
If you have any additional comments about the survey overall, please note here:					
. ,			, , , , ,		
		_			

### **DERMOSCOPIC FEATURES: ROUND 2**

#### **NONMELANOCYTIC LESIONS**

To ensure agreement on included structures, we have provided the percentage of panelists who voted "agree" or "strongly agree" in the 'Structures - Round 1' survey. Structures are listed in order of percent preliminary consensus.

Structures with < 70% positive votes did not reach consensus in round 1.

Please confirm your vote to finalize the decision on inclusion / exclusion of each structure.

### **Basal cell carcinoma**

	No, do NOT include this structure	YES, include this structure
Leaf-like structures (96%)		
Blue-gray ovoid nests (100%)		
Multiple blue- gray dots and globules (buckshot scatter) (88%)		
Spoke wheel- like structures		

/ concentric structures (92%)	
Ulceration / erosion (88%)	
White shiny blotches and strands (85%)	
Arborizing blood vessels (100%)	
Rosette sign (42%)	

## **Basal cell carcinoma: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are

presented here. Please rate how strongly you would agree / disagree with their inclusion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Short fine telangiectasias (superficial BCC)					
Shiny white to red structureless and milky pink areas (glass-like translucency)					

## **Actinic Keratosis**

	No, do NOT include this structure	YES, include this structure
Strawberry pattern (pink- red pseudonetwork + fine, wavy vessels (straight or coiled) surrounding hair follicles + white circles with central yellow clod (targetoid hair follicles)) (85%) (targetoid hair		

follicles)	
Rosette sign (77%)	
Surface scale (73%)	

#### **Actinic Keratosis: Alternate naming**

For the structure "Strawberry pattern" (85% positive votes), some panelists suggested alternate naming. Please select which naming you would prefer.

- 1: ORIGINAL: Strawberry pattern (pink-red pseudonetwork + fine, wavy vessels (straight or coiled) surrounding hair follicles + white circles with central yellow clod (targetoid hair follicles))
- 2: ALTERNATE: Strawberry pattern (pink-red pseudonetwork +/- fine, wavy vessels (straight or coiled) surrounding hair follicles +/- white circles with central yellow clod (targetoid hair follicles))

**Pigmented actinic keratosis** 

Pigmenteu actii	IIC KEI ALUSIS	
	No, do NOT	YES, include
	include this	this structure
	structure	
Rosette sign		
(85%)		
Gray dots		
(81%)		
Annular-		
granular		
pattern (gray		
dots around		
follicular		
openings)		
(71%)		
White circles		
with a central		
yellow clod		
(targetoid hair		
follicles) (69%)		
Rhomboidal		
structures		
(62%		
Gray-brown		
pseudonetwork		
(58%)		

#### **Pigmented Actinic Keratosis: Alternate naming**

The term "white circles with a central yellow clod (targetoid hair follicles)" closely did not reach consensus in round 1 (69.2% positive votes). However, multiple panelists wrote in comments suggesting a potentially overlapping structure: "patent follicles".

We would like to determine if panelists would prefer to combine both terms into a single structure, or if they consider the structures to be separate entities. Please choose which option you would prefer.

- 1: Keep "White circles with central yellow clod (targetoid hair follicles)" and "Patent follicles" as SEPARATE structures
- 2: COMBINE THE STRUCTURES INTO: "White circles with central yellow clod (targetoid hair follicles) (patent follicles)"

## **Pigmented Actinic Keratosis: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are

presented here. Please rate how strongly you would agree / disagree with their inclusion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Surface scale					
Moth-eaten					
border					
Patent follicles					

**Bowen's disease (squamous cell carcinoma in situ)** 

	No, do NOT	YES, include	Neutral	Agree	Strongly Agree
	include this	this structure			
	structure				
Glomerular					
(coiled) blood					
vessels (96%)					
Surface scale					
(81%)					
Peripheral					
brown/gray					
dots arranged					
linearly					
(pigmented					
SCCIS) (77%)					
Brown circles					
(pigmented					
SCCIS) (54%)					

## **Bowen's disease: Alternate naming**

For the structure "Glomerular (coiled) blood vessels" (96% positive votes), some panelists suggested alternate naming. Please select which option you would prefer.

1: ORIGINAL: Glomerular (coiled) blood vessels

2: ALTERNATE: Glomerular (coiled) / dotted blood vessels

#### Keratoacanthoma

	No, do NOT include this	YES, include this structure
	structure	
Hairpin		
(looped) or		
serpentine		
(linear-		
irregular)		
blood vessels		
with white-		
yellow halo		
(96%)		
Central keratin		
mass (92%)		

### **Keratoacanthoma: Alternate naming**

For the structure "Hairpin (looped) or serpentine (linear-irregular) blood vessels with white-yellow halo" (96% positive votes), some panelists suggested alternate naming. Please select which option you would prefer.

- 1, ORIGINAL: Hairpin (looped) or serpentine (linear-irregular) blood vessels with white-yellow halo
- 2, ALTERNATE: Hairpin (looped) or serpentine (linear-irregular) blood vessels, usually at the periphery, with white-yellow halo

Squamous cell carcinoma

Squamous cell of	carcinoma	
	No, do NOT	YES, include
	include this	this structure
	structure	
Hairpin		
vessels,		
usually with		
whitish halo		
(92%)		
Glomerular		
(coiled) blood		
vessels (88%)		
Yellow keratin		
mass/scale-		
crust (85%)		
White circles		
("keratin		
pearls") (85%)		
Rosette sign		
(81%)		
Ulceration /		
blood spots /		
hemorrhage		
(77%)		

### Squamous cell carcinoma: Alternate naming

For the structure "Ulceration / blood spots / hemorrhage" (77% positive votes), multiple panelists commented that blood spots / hemorrhage should be separate from ulceration. Please select which option you would prefer.

- 1, KEEP ORIGINAL: "Ulceration / blood spots / hemorrhage"
- 2, Both "Blood spots / hemorrhage" AND "Ulceration" should be included as SEPARATE structures
- 3, " Blood spots / hemorrhage" ONLY should be included a separate structure
- 4, "Ulceration" ONLY should be included as a separate structure
- 5, I do NOT think ANY of these should in included as structures

#### **Squamous cell carcinoma: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

Strongly	Disagree	Neutral	Agree	Strongly Agree
Disagree				

Polymorphic blood vessel morphology			
Linear irregular			
(serpentine)			
blood vessels			

Solar lentigo

	No, do NOT include this structure	YES, include this structure	Neutral	Agree	Strongly Agree
Moth-eaten (sharply demarcated) borders (100%)					
Homogenous light brown pigmentation (92%)					
Network-like structures (77%)					
Fingerprint-like structures (96%)					

## **Solar lentigo: Alternate naming**

For the structure "Fingerprint-like structures" (96% positive votes), some panelists suggested alternate naming. Please select which option you would prefer.

1, ORIGINAL: Fingerprint-like structures

2, ALTERNATE: Fingerprint-like structures (parallel lines)

Simple lentigo (lentigo simplex)

	No, do NOT include this structure	YES, include this structure
Symmetric with uniform pigment network (88%)		

## **Seborrheic keratosis**

	No, do NOT include this structure	YES, include this structure
Milia-like cysts (100%)		
Comedo-like openings (100%)		

Hairpin (looped) vessels, usually with whitish halo (96%)	
"Fissures and ridges" / gyri and sulci / cerebriform pattern (96%)	
Moth-eaten (sharply demarcated) borders (85%)	
Fat-fingers (92%)	
Fingerprint-like structures (85%)	
Network-like structures (62%)	

Lichen planus-like keratosis / Benign lichenoid keratosis

	No, do NOT include this structure	YES, include this structure
Coarse gray granularity (92%)		
Peppering (evenly spaced gray dots) (92%)	d	

## Lichen planus-like keratosis / benign lichenoid keratosis: Additional Structures

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

с р. ссссс.	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Sharp, cut off borders (scalloped / moth-eaten)					
Pinpoint / dotted blood vessels					
Pigment network remnant					

Hemangioma / angioma

	No, do NOT include this structure	YES, include this structure
Red, blue-red, or maroon lacunae / lagoons with white septae (100%)		
Blue-black coloring (when thrombosed) (100%)		

**Angiokeratoma** 

	No, do NOT include this structure	YES, include this structure
Red / purple / black ("dark") lacunae (100%)		
Hemorrhagic crust (88%)		
Whitish veil (62%)		

## **Dermatofibroma**

	No, do NOT include this structure	YES, include this structure
Central scar- like white patch with delicate surrounding network-like structures (100%)		
Ring-like globules (81%)		
Central shiny white lines (crystalline structures) (96%)		

## **Dermatofibroma: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

a. c p. coccca	c. ccase .ace		aca.a ag. cc /	a.oag. cc	
	Strongly	Disagree	Neutral	Agree	Strongly Agree

	Disagree		
Vascular structures (vascular blush) within scar-like white patch			

## Clear cell acanthoma

	No, do NOT include this structure	YES, include this structure
String of pearls (serpiginous) blood vessel pattern (100%)		

**Sebaceous hyperplasia** 

Schuceous my	pei piasia	
	No, do NOT	YES, include
	include this	this structure
	structure	
Pale yellow		
lobules around		
a central		
follicular		
opening		
(100%)		
Crown vessels		
(100%)		

### **MELANOCYTIC LESIONS**

Overview of benign nevi patterns

	No, do NOT include this structure	YES, include this structure
Diffuse reticular network (100%)		
Patchy reticular network (100%)		
Peripheral reticular network with central hypopigmentation (100%)		
Peripheral reticular network with central hyperpigmentation		

(100%)	
Peripheral	
reticular network	
with central	
globules (100%)	
Homogenous (tan,	
brown, blue, or	
pink) (96%)	
Central network	
with evenly	
distributed	
peripheral	
globules (100%)	
Globular pattern	
(100%)	
Two-component	
pattern (92%)	
Symmetric multi-	
component	
pattern (85%)	

Congenital melanocytic nevi

	No, do NOT include this structure	YES, include this structure
Cobblestone pattern / globular pattern (100%)	Structure	
Reticular network (100%)		
Diffuse background pigmentation (92%)		
Hypertrichosis (81%)		
Target network / target- like structures (globules or vessels within holes of network) (65%)		
Perifollicular hyper/hypopigmentation (88%)		

## **Congenital melanocytic nevi: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Pigment dropout					
Keratin retention					

## **Intradermal nevi**

	No, do NOT include this structure	YES, include this structure
Comma- shaped (curved) blood vessels (100%)		

## **Intradermal Nevi: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

***************************************		11011 011 011 91 70	<u> </u>		
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Homogenous (structureless) brown/tan pigmentation					

## Blue nevi

	No, do NOT include this structure	YES, include this structure
Homogenous blue pigmentation (100%)		

Spitz nevi

Spitz lievi		
	No, do NOT include this structure	YES, include this structure
Vascular pattern (pink homogenous pattern with dotted vessels) (96%)		
Globular pattern (77%)		
Starburst pattern (with tiered globules / streaks) (radial streaming) (100%)		
Reticular pattern (58%)		
Atypical pattern (58%)		
Homogenous (pigmented		

pattern) (46%)	
Negative	
network	
(reticular	
depigmentation)	
(88%)	
White shiny	
lines (crystalline	
structures)	
(81%)	

Recurrent (persistent) nevi

	No, do NOT include this structure	YES, include this structure
Pigment within the scar, not extending beyond (92%)		

## **Recurrent (Persistent) Nevi: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Uniformity of pigment network	j				

### **MELANOMA**

Melanoma (overview of features)

	No, do NOT include this structure	YES, include this structure
Atypical pigment network (100%)		
Blue structures (blue-white veil, blue-gray structures) (96%)		
White shiny lines (crystalline structures) (100%)		
Negative network (100%)		

T	
Irregular dots	
/ globules	
(100%)	
Irregular	
streaks (radial	
streaming,	
pseudopods)	
(100%)	
Regression	
structures	
(white scar-	
like area with	
peppering)	
(96%)	
Peripheral	
brown	
structureless	
area (88%)	
Angulated	
lines	
(extrafacial)	
(85%)	
Atypical	
vascular	
pattern,	
polymorphous	
vessels (2+	
types of blood	
vessels)	
,	
(100%)	
Atypical blotch	
(96%)	

#### **Melanoma: Alternate naming**

For the structure "Blue structures (blue-white veil, blue-gray structures)" (96% positive votes), some panelists commented that the term used was unclear. Our goal was to be inclusive of a wider range of structures by using a broad term. Please select which option you would prefer.

- 1, ORIGINAL: Blue structures (blue-white veil, blue-gray structures)
- 2, Make "Blue-gray structures" and "Blue-white veil" SEPARATE structures and include both
- 3, Change structure to "Blue-white veil" ONLY

### **Melanoma: Alternate naming**

For the structure "Regression structures (white scar-like area with peppering)" (96% positive votes), some panelists suggested alternate naming. Please select which option you would prefer.

- 1, ORIGINAL: Regression structures (white scar-like area with peppering)
- 2, ALTERNATE: Regression structures (white scar-like area and/or peppering)

## **Melanoma: Alternate naming**

For the structure "Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels)" (100% positive votes), some panelists suggested alternate naming. Please select which naming

option you would prefer.

- 1, ORIGINAL: Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels)
- 2, Atypical vascular pattern, polymorphous vessels (e.g. linear irregular and dotted vessels)
- 3, Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels, e.g. linear irregular and dotted vessels)

#### **Melanoma: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

are presented ne	ici i icase race i	low scioligly you	a Would agree /	albagice With th	cii iiiciasioiii
	Strongly	Disagree	Neutral	Agree	Strongly Agree
	Disagree				
Multiple					
hyperpigmented					
areas					
Asymmetry of					
border					
abruptness					

Acral lentiginous melanoma

	No, do NOT include this structure	YES, include this structure
Parallel ridge pattern (100%)		
Irregular diffuse pigmentation (96%)		
Multicomponent Pattern (88%)		
Atypical fibrillar pattern (88%)		

### **Acral lentiginous melanoma: Alternate naming**

For the structures "Irregular diffuse pigmentation" (96% positive votes) and "Multicomponent pattern" (88% positive votes), some panelists suggested combining the two terms (Note: both individually reached consensus.) Please select which naming option you would prefer.

1, ORIGINAL: keep "Irregular diffuse pigmentation" and "Multicomponent pattern" as separate structures 2, ALTERNATE: combine as "Chaotic / asymmetric pattern (i.e irregular diffuse pigmentation, multicomponent pattern)"

Lentigo maligna melanoma (melanoma on chronically sun-damaged skin of the head / neck)

	No, do NOT include this structure	YES, include this structure
Annular- granular pattern (gray dots around follicular openings)		

Asymmetric pigmentation around follicular openings (100%)	
Rhomboidal structures (96%)	
Target pattern (circle within a circle) (isobar) (85%)	
Dark blotches with or without obliterated hair follicles (100%)	

## Lentigo maligna melanoma: Alternate naming

For the structure "Rhomboidal structures" (96% positive votes), some panelists suggested alternate naming. Please select which option you would prefer.

1, ORIGINAL: Rhomboidal structures

2, ALTERNATE: Rhomboidal structures (angulated lines)

### Amelanotic melanoma

	No, do NOT include this structure	YES, include this structure
Scar-like depigmentation (73%)		
Milky red areas (100%)		
White shiny lines (crystalline structures) (100%)		
Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels) (100%)		

## **Amelanotic melanoma: Alternate naming**

For the structure "Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels)" (100% positive votes), some panelists suggested alternate naming. Please select which naming option you would prefer.

- 1, ORIGINAL: Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels)
- 2, Atypical vascular pattern, polymorphous vessels (e.g. linear irregular and dotted vessels)
- 3, Atypical vascular pattern, polymorphous vessels (2+ types of blood vessels, e.g. linear irregular and dotted vessels)

## Melanoma Arising in a Nevus: Re-Evaluation of DIAGNOSIS

This diagnosis was initially proposed via a write-in comment and reached consensus in Diagnoses: Round 2. However, during the structures surveys many panelists commented that they no longer believe this diagnosis should be included. As a result of this feedback, we would like to re-survey if you believe this DIAGNOSIS should be included as a core competency. Please indicate if you agree or disagree. Original percentage of panelists voting "agree" or "strongly agree" in the DIAGNOSES Round 2 survey is shown.

- 1, No, I do NOT agree with the inclusion of this diagnosis
- 2, Yes, I agree with the inclusion of this diagnosis

Melanoma arising within a nevus (IF DIAGNOSIS IS KEPT)

ricianonia arisi	ing within a new	us (II DIAGNOC
	No, do NOT include this structure	YES, include this structure
Structures as listed in "overview of benign nevi patterns" (77%)		
Structures as listed in "melanoma (overview of features)" (77%)		
Negative network (77%)		

#### **SPECIAL SITES / OTHER**

Dermoscopic features of the face

Dermoscopic reacures or the race		
	No, do NOT include this structure	YES, include this structure
Pseudonetwork pattern (92%)		

Acral dermoscopy: Benign patterns of acral nevi

	No, do NOT	YES, include
	include this	this structure
	structure	
Parallel furrow		
pattern		
(100%)		
Lattice-like		
pattern		
(100%)		
Fibrillar		

pattern (soles only) (100%)	
Homogenous pattern (88%)	
Peas in a pod pattern (parallel furrow + globules on ridges) (congenital nevi) (96%)	

## Benign patterns of acral nevi: Alternate naming

For the structure "Parallel furrow pattern" (100% positive votes), some panelists suggested alternate naming. Please select which naming your would prefer.

- 1, ORIGINAL: Parallel furrow pattern
- 2, ALTERNATE: Parallel furrow pattern (with pattern variations including single line, double line, single dotted line, double dotted line)

#### **DERMOSCOPY OF NAILS**

#### **Nevus of the nail**

	No, do NOT include this structure	YES, include this structure
Homogenous brown background coloration (92%)		
Uniform band thickness, color, and spacing with parallel band configuration (96%)		

Lentigo of the nail (melanotic macule of the nail)

	No, do NOT	YES, include
	include this	this structure
	structure	
Multiple thin		
homogenous		
gray lines +/-		
gray		
background		
(88%)		

## Lentigo of the nail: Alternate naming

For the structure "Multiple thin homogenous gray lines +/- gray background" (88% positive

votes), some panelists suggested alternate naming. Please select which naming you would prefer.

- 1, ORIGINAL: Multiple thin homogenous gray lines +/- gray background
- 2, ALTERNATE: Multiple thin homogenous gray lines (or single gray band) +/- gray background

#### Melanoma of the nail

Meianonia oi tii		1
	No, do NOT	YES, include
	include this	this structure
	structure	
Triangular		
shape of		
pigment band		
(band		
diameter wider		
at proximal		
end) (96%)		
Pigmentation		
of periungual skin (micro-		
Hutchinson's		
sign) (100%)		
Brown to black		
dots/globules		
associated		
with		
longitudinal		
lines (92%)		
Longitudinal		
brown/black		
lines with		
irregular		
spacing, width,		
coloration, or		
parallelism		
(100%)		

#### **Melanoma of the nail: Additional Structures**

Panelist suggestions for additional structures not provided in the 'Structures - Round 1' survey are presented here. Please rate how strongly you would agree / disagree with their inclusion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Blurring of band borders	_				
Band width >3mm or > 2/3 of nail plate width					

**Subungual Hemorrhage** 

Sabangaai ricinorriage			
	No, do NOT	YES, include	
	include this	this structure	

	structure	
Well circumscribed red-black dots or blotches (100%)		
Distal streaks of red-brown coloration ("filamentous" distal end) (96%)		
Homogenous red/purple/black coloration without melanin granules (88%)		

## **OTHER**

## **Scabies**

	No, do NOT include this structure	YES, include this structure
Delta-wing jet		
with contrail		
sign (small		
dark brown		
triangular		
structure		
located at the		
end of whitish		
structureless		
curved/wavy		
lines (100%)		

# **SPECIAL SITES / OTHER: FINALIZING VOTES**

The following special sites (trichoscopy, dermoscopy of mucosal surfaces) and diagnosis (lichen planus) narrowly did not reach consensus in the diagnoses surveys (65-69.9% agreement). Please confirm whether you believe these special sites / diagnoses should be included as core competencies for resident education in dermoscopy.

	No, do NOT include this diagnosis / special site	YES, include this diagnosis / special site
Trichoscopy (dermoscopy of the hair and scalp) (65% agreement)		
Dermoscopy of		

mucosal surfaces (65% agreement)	
Lichen planus	
(65% agreement)	

If you have any additional comments about the survey overall, please note here:

#### **DERMOSCOPIC FEATURES – ROUND 3**

This **brief survey** is intended as a follow-up to 'Structures Round 2' and will finalize all decisions for group consensus on dermoscopic structures

We will ask panelists to re-evaluate a small number structures based on group opinion (only those structures that were newly proposed for the first time in 'Structures - Round 2') in order to finalize their vote on inclusion of each.

Panelists will also be asked to vote on **alternative language** for two structures that was proposed via write-in comments.

#### **NONMELANOCYTIC LESIONS**

To ensure agreement on included structures, we have provided the percentage of panelists who voted "agree" or "strongly agree" on structures that were newly proposed in the 'Structures - Round 2' survey. Structures with < 70% positive votes did not reach preliminary consensus. Please confirm your vote to finalize the decision on inclusion / exclusion of each structure.

#### **Basal cell carcinoma**

	No, do NOT include this structure	YES, include this structure
Short fine telangiectasias (superficial BCC) (62%)		
Shiny white to red structureless and milky pink areas (glass-like translucency) (27%)		

Pigmented actinic keratosis

No, do NOT	YES, include
NO, GO NOT	TES, Include

	include this structure	this structure
Surface scale (89%)		
Patent follicles (38%)		
Moth-eaten border (31%)		

Squamous cell carcinoma

	No, do NOT include this structure	YES, include this structure
Polymorphic blood vessel morphology (42%)		
Linear irregular (serpentine) blood vessels (42%)		

# **Squamous cell carcinoma: Alternate naming**

For the structure "Ulceration / blood spots / hemorrhage", we would like to confirm votes for naming. Please select which you would prefer.

- 1, ORIGINAL: Ulceration / blood spots / hemorrhage
- 2, ALTERNATE: Split into two separate structures: "Ulceration" and "Blood spots / hemorrhage"

Lichen planus-like keratosis / Benign lichenoid keratosis

	No, do NOT	YES, include
	include this	this structure
	structure	
Sharp, cut off		
borders		
(scalloped /		
moth-eaten)		
(73%)		
Pigment		
network		
remnant (46%)		
Pinpoint /		
dotted blood		
vessels (31%)		

#### Dermatofibroma

	No, do NOT include this structure	YES, include this structure
Vascular structures		
(vascular blush)		

within scar-like	
white patch	
(50%)	

#### **MELANOCYTIC LESIONS**

Congenital melanocytic nevi

	No, do NOT include this structure	YES, include this structure
Pigment dropout (31%)		
Keratin retention (27%)		

Intradermal nevi

	=	
	No, do NOT include this structure	YES, include this structure
Homogenous (structureless) brown/tan pigmentation (85%)		

## **Intradermal nevi: Alternative naming**

For the structure "Homogenous (structureless) brown/tan pigmentation" (85% positive votes), some panelists suggested alternate naming. Please select which naming you would prefer.

- 1, ORIGINAL: Homogenous (structureless) brown/tan pigmentation
- 2, ALTERNATE: Small foci of homogenous (structureless) brown/tan pigmentation

Recurrent (persistent) nevi

-100m: 0110 (p 0101		
	No, do NOT include this	YES, include this structure
	structure	
Uniformity of		
pigment		
network (38%)		

## **MELANOMA**

**Overview of melanoma characteristics** 

OVCIVICA OI IIICI	anoma characte	11136163
	No, do NOT	YES, include
	include this	this structure
	structure	
Asymmetry of		
border		
abruptness		
(35%)		
Multiple		
hyperpigmented		
areas (31%)		

## Lentigo maligna melanoma: Alternate naming

For the structure "Target pattern (circle within a circle) (isobar)" (100% positive votes), some panelists suggested that "target pattern" should not be part of this structure name. Please select which option you would prefer.

- 1, ORIGINAL: Target pattern (circle within a circle) (isobar)
- 2, ALTERNATE: Circle within a circle (isobar)

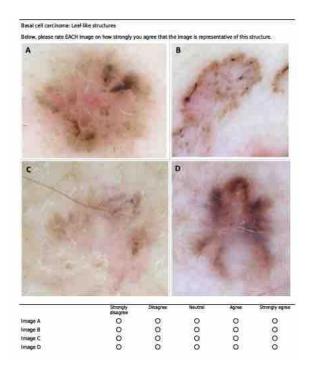
#### Melanoma of the nail

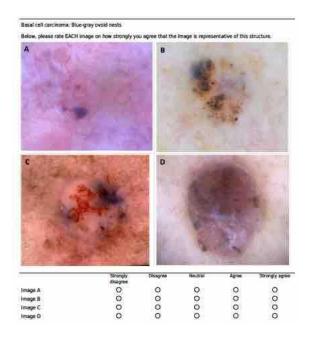
	No, do NOT include this structure	YES, include this structure
Band width >3mm or > 2/3 of nail plate width (69%)		
Blurring of band borders (50%)		

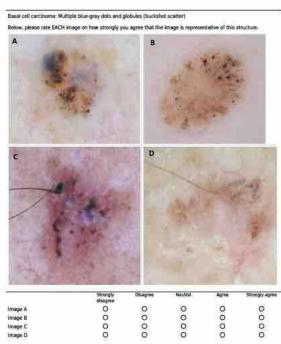
If you have any additional comments about the survey overall, please note here

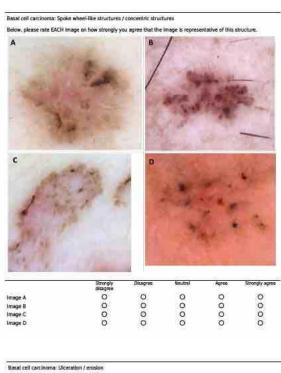
#### **DERMOSCOPIC IMAGES - ROUND 1**

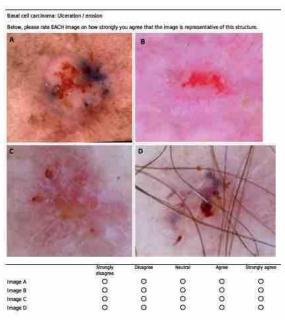
For each diagnosis, we would like to determine if the following images should be included as classic teaching images in the dermoscopy core competencies, and if they demonstrate good examples of associated dermoscopic structures. We will provide examples of images for each structure. Please rate how well you believe EACH image is representative of the indicated structure.

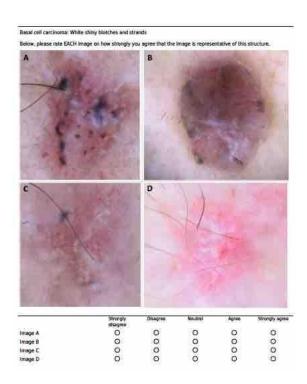


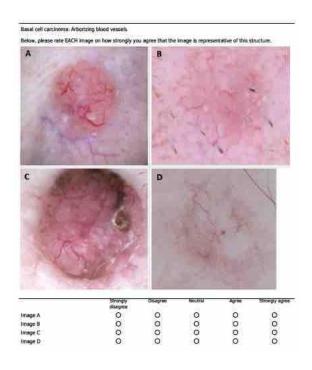


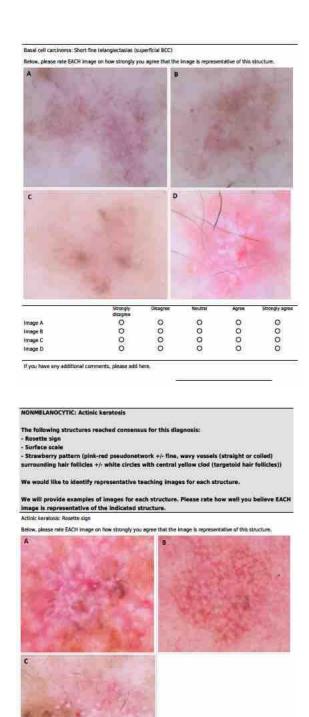


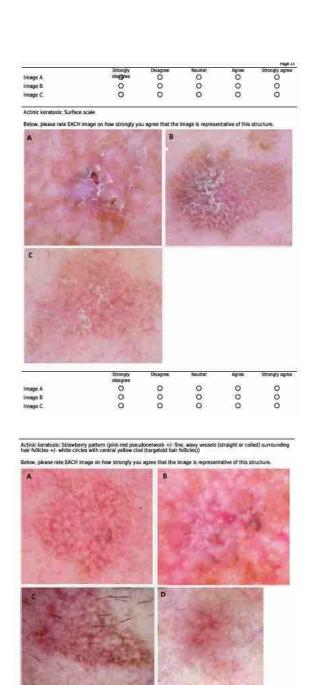


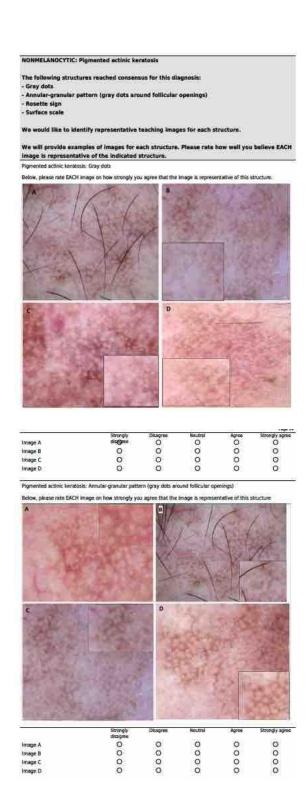




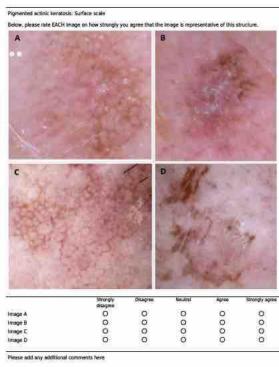


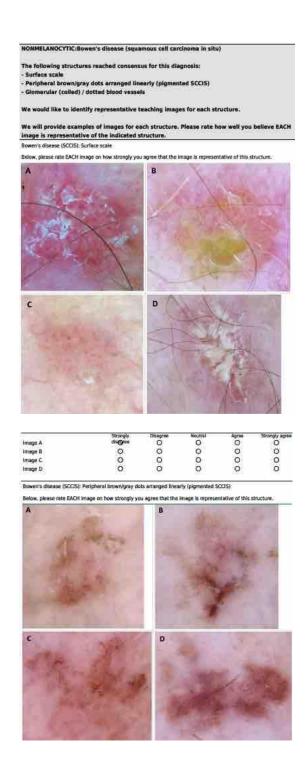






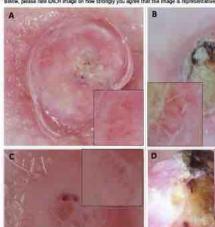




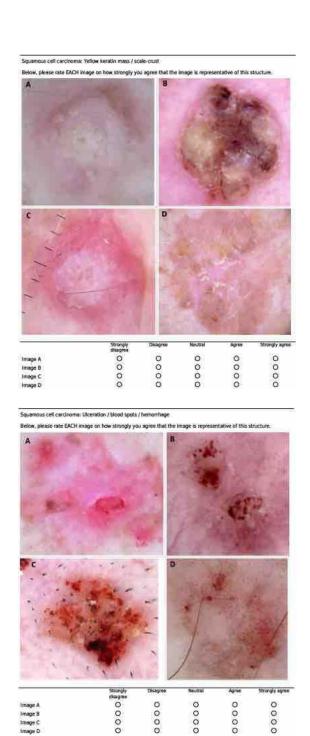


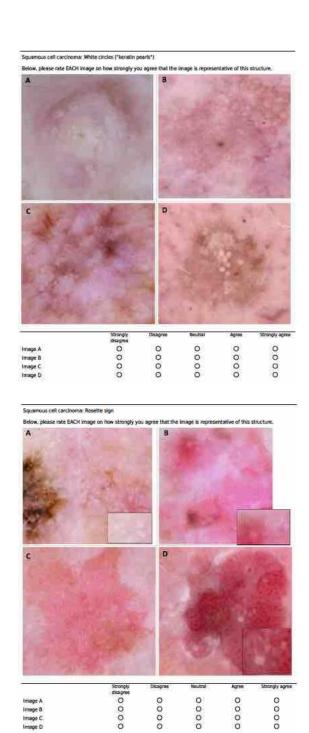
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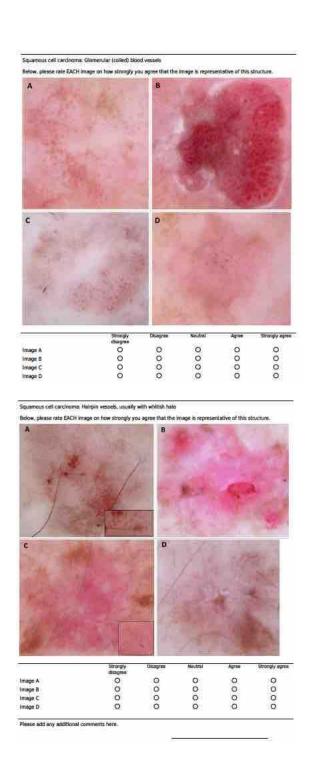
	Strongly	Disagree	Neutral	Agree	Strongly agree
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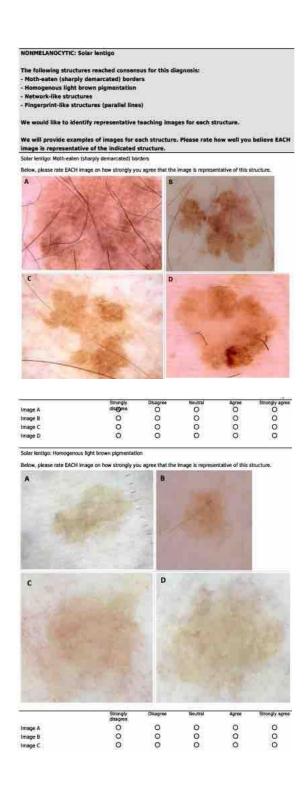


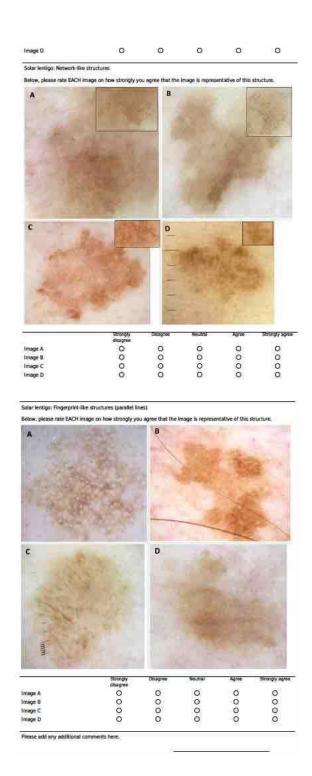
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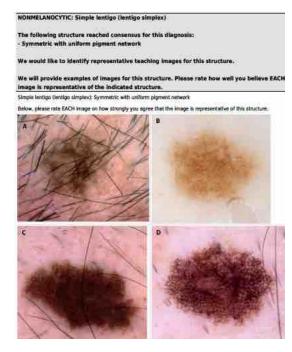




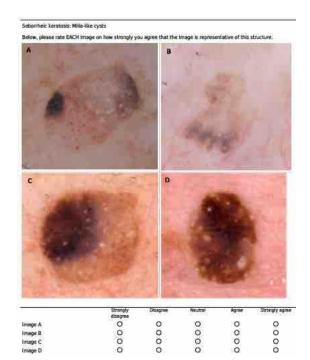


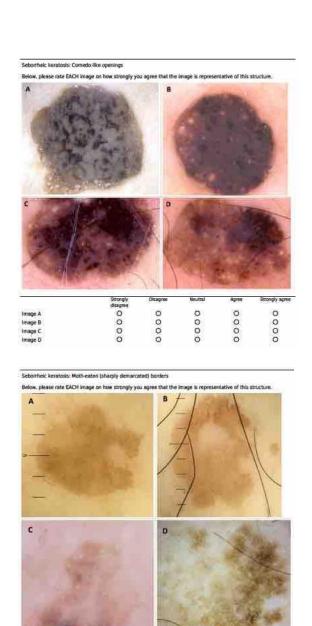


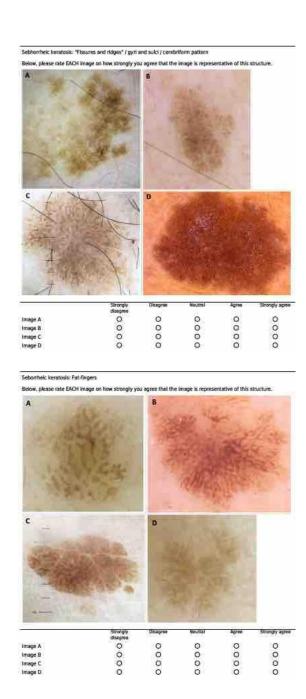


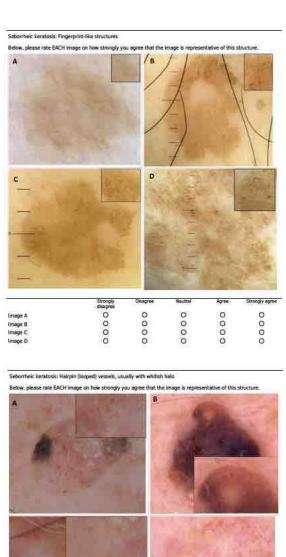


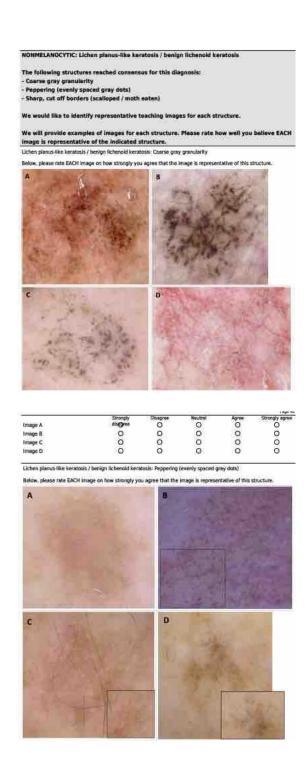
# NONMELANOCYTIC: Sebarrheic kerstesis The following structures reached consensus for this diagnosis: - Mille-like cysts - Comedo Sike apenings - Moth-eaten (sharply demarcated) borders - Priscures and ridges? / gyrl and suici / cerebrifocm pattern - Fat-fingen - Fingerprint-like structures - Hairpin (looped) vessels, usually with whitish halo We would like to identify representative teaching images for each structure. We will provide examples of images for each structure. Please rate how well you believe EACH image is representative of the indicated structure.









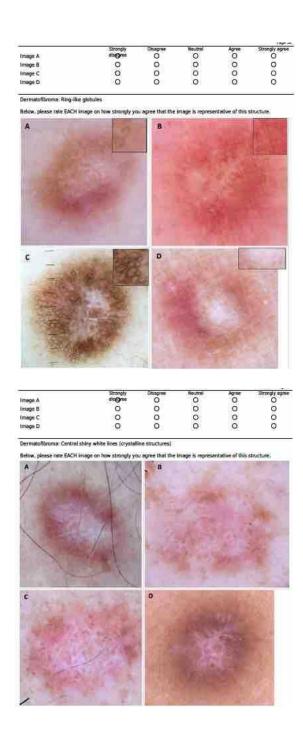


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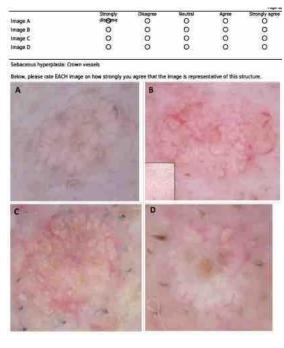
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- Red / purple / blac - Hemorrhagic crust We would like to id- we will provide exa image is represents Angioleratome Red / po	tures reached consens ix ("derk") lecunae t entify representative t imples of images for ea ative of the indicated s urple / black ("dark") lecuna	eaching Imag ach structure, tructure, e	es for each str Please rate h	ow well you be	

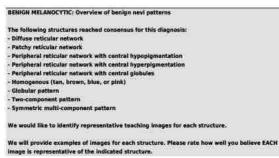
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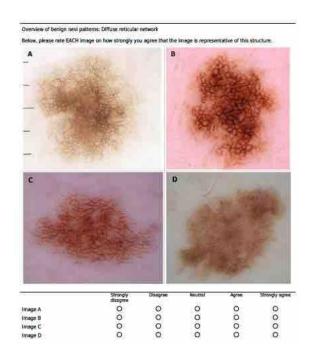


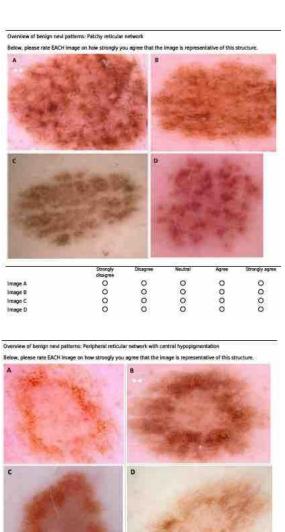




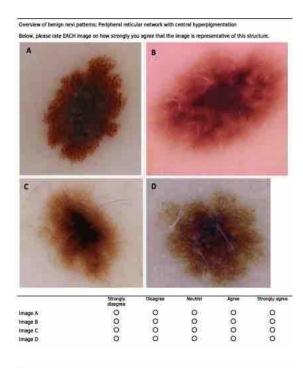


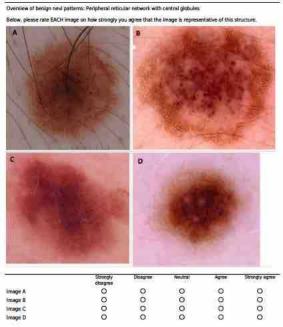


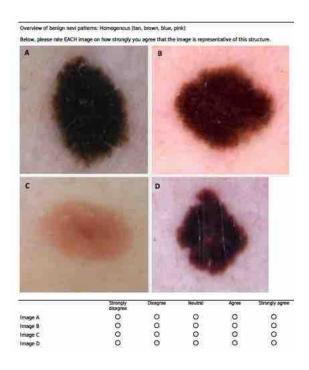


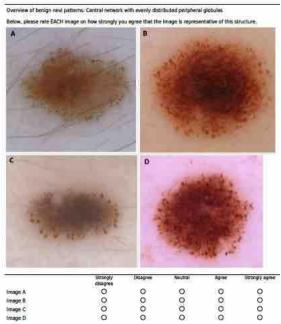


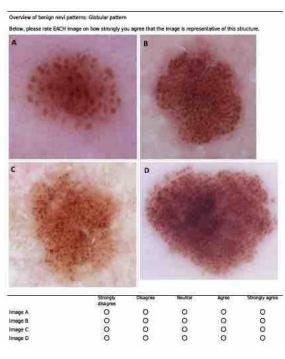
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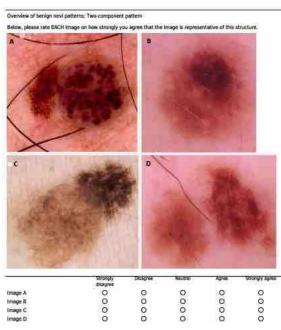


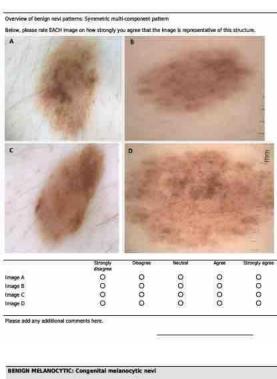


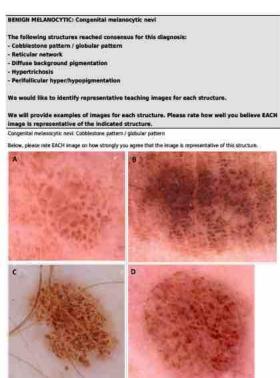


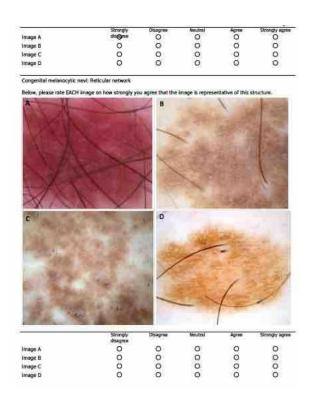


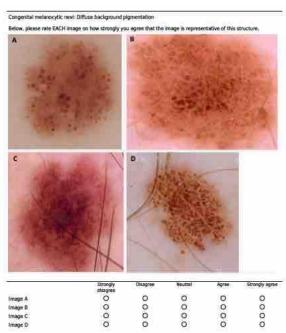


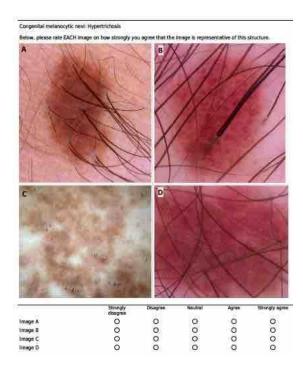


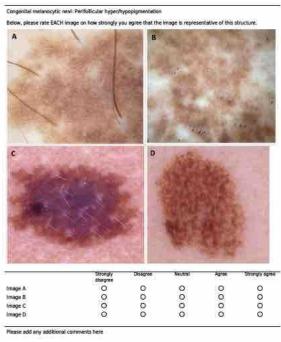


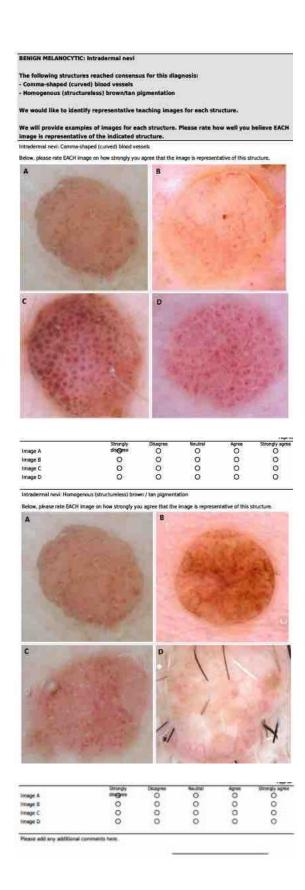


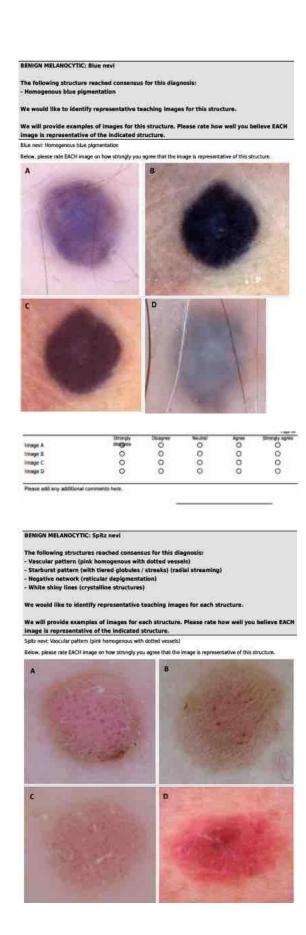


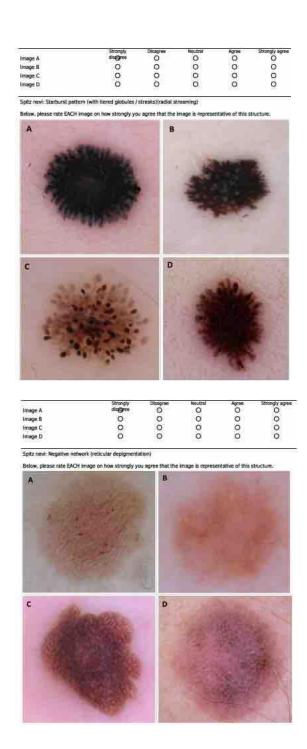


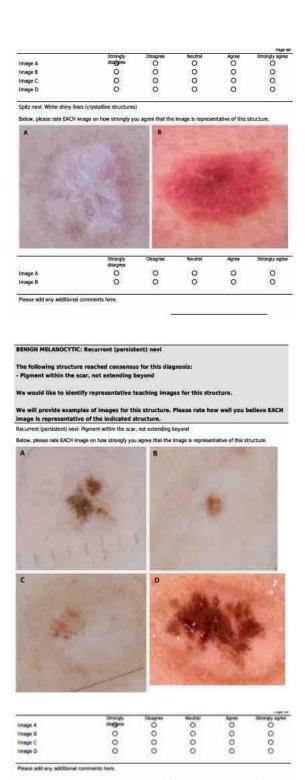


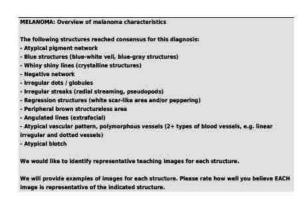


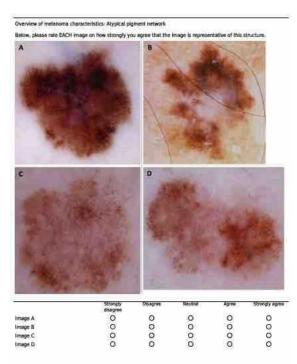


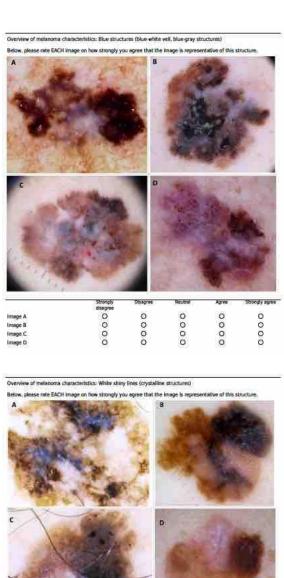


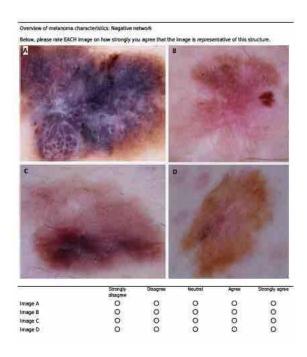


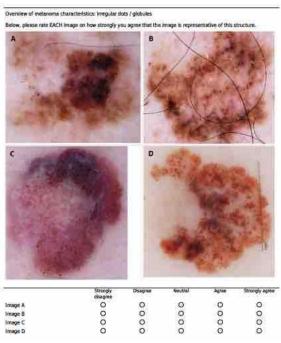


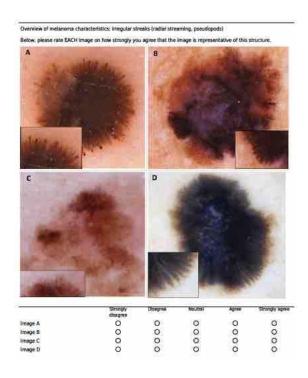


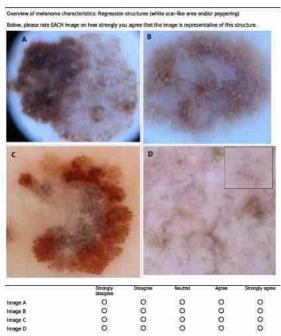


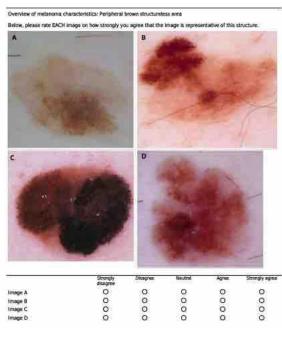


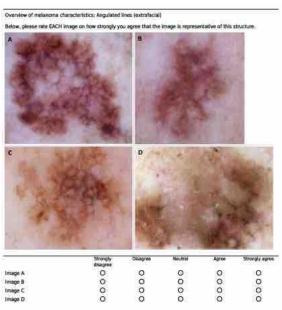


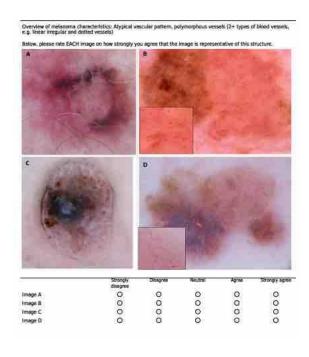


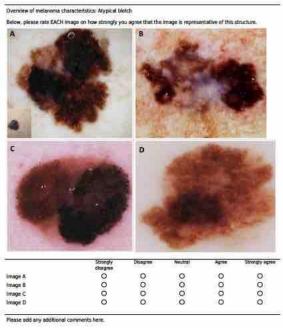


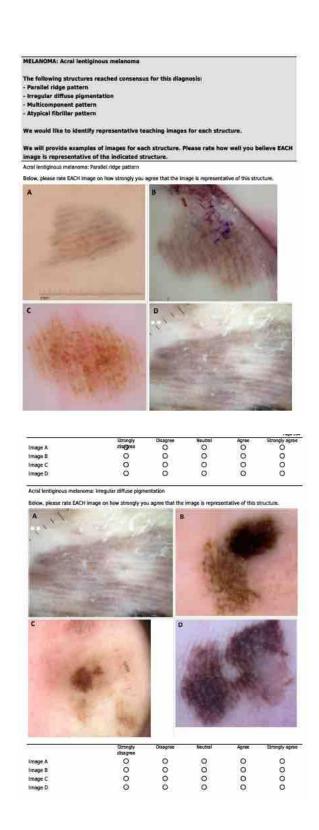


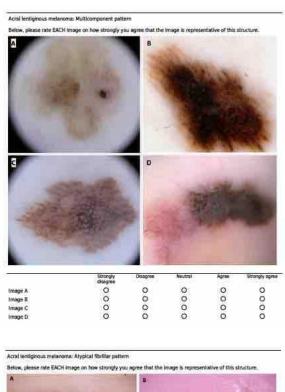


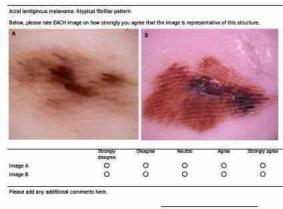


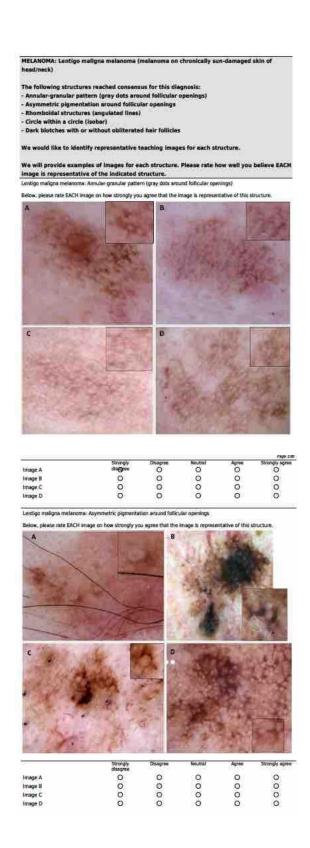


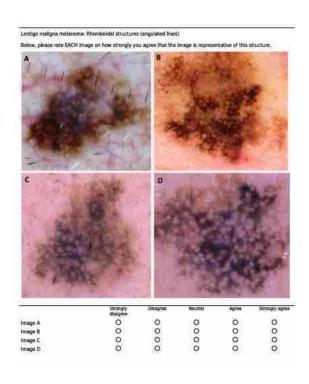


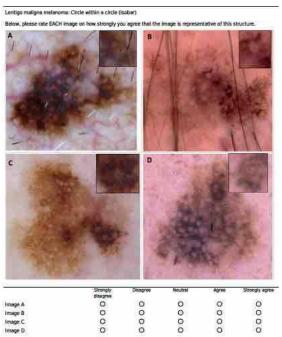


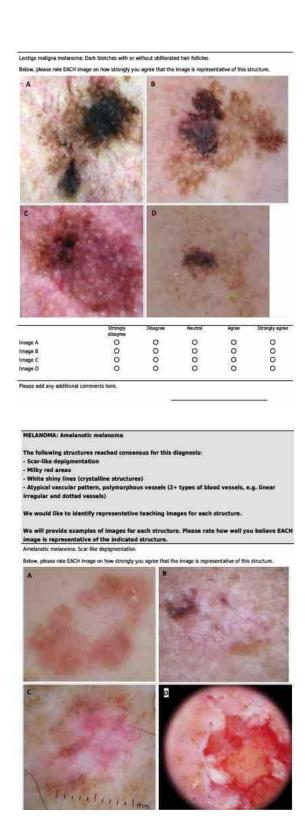




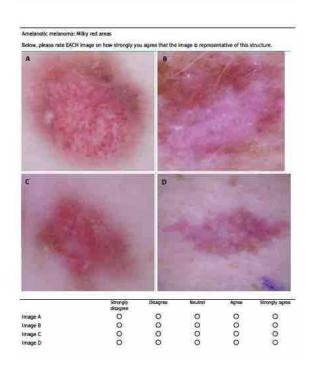


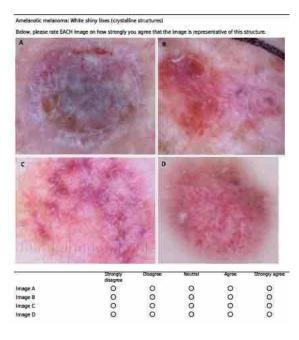


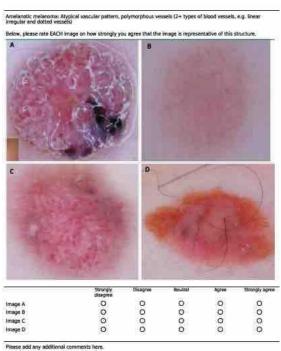


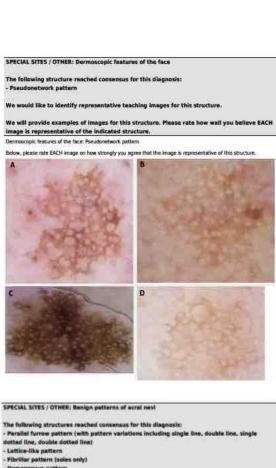


	Strongly	Disagree	Neutral	Agree	Strongly agree
Image A	dis <b>@</b> ree	O	0	0	0
Image B	0	0	0	0	0
Image C	0	0	0	0	0
Image D	0	0	0	0	0
Amelanotic melanoma: S	car-like depigmentation (	additional image)	i		
Below, please rate EACH	image on how strongly yo	ou agree that the	image is represe	ntative of this	structure.
	100				
	Strongly	Disagree	Neutral	Agree	Strongly agre
	disagree	Diam'r.			mangry agree
Additional Image	O	0	0	0	0







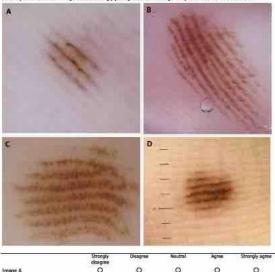


- Homogenous pattern Peas in a pod pattern (parallel furrow + globules on ridges) (conganital nevi)

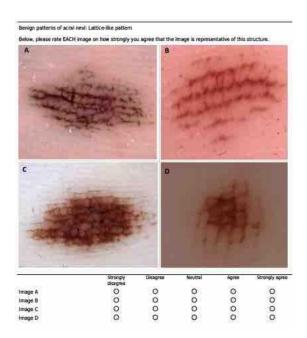
We will provide examples of images for each structure. Please rate how well you believe EACH image is representative of the indicated structure.

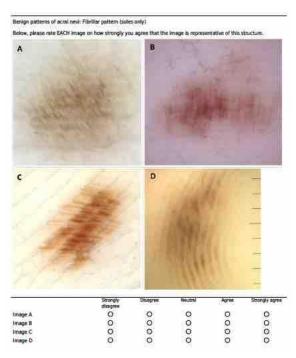
Berign patterns of acrel nevi: Parallel furrow pattern (with pattern variations including single line, double line, single dotted line, double dotted line)

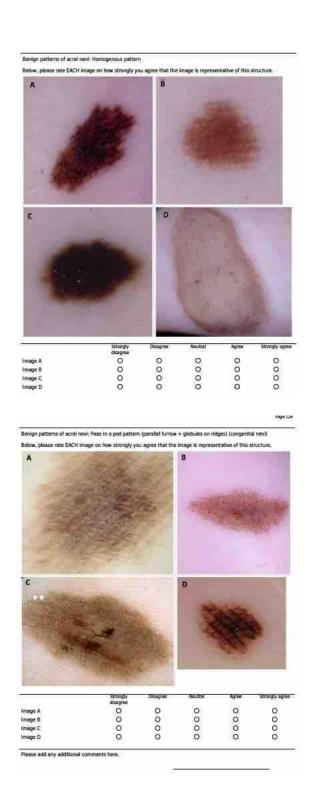
Below, please rate EACH image on how strongly you agree that the image is representative of this structure.



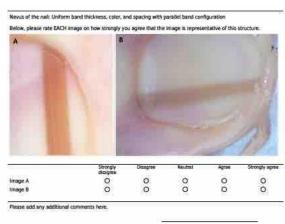
	disagree	Usagree	westrai	Agree	strongly agree
Image A	0	0	0	0	0
Irrage E	0	0	0	0	0
Image C	0	0	0	0	0
Image D	0	0	0	0	0

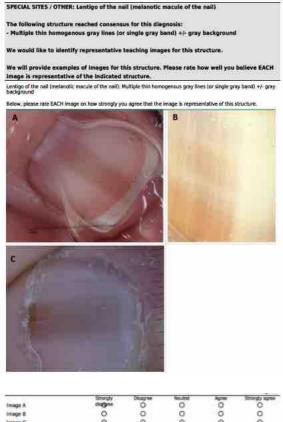










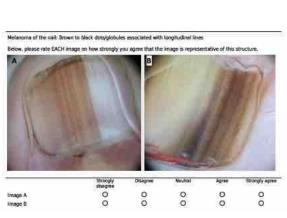


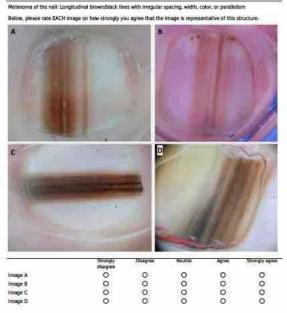
Emage A	Strongly	Disagram O	O	Agree	Strongly agree
Image 8	0	0	0	0	0
Image C	0	0	0	0	0

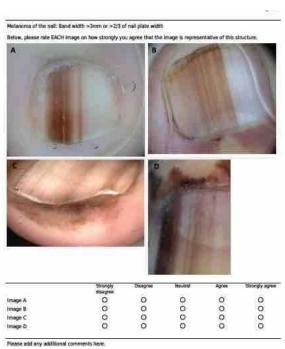
Please add any additional comments here.

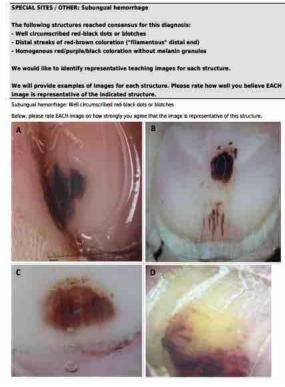


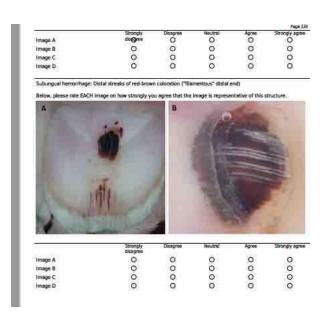


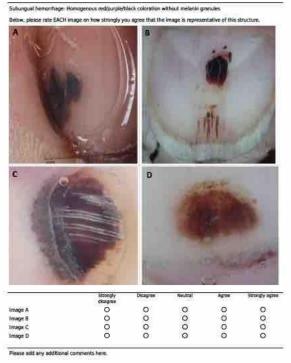














## **DERMOSCOPIC IMAGES: ROUND 2**

For each dermatologic diagnosis, we would like to determine if the following dermoscopic images can be considered classic teaching images, and if they demonstrate good examples of associated demoscopic structures.

To ensure agreement on representative teaching images for each structure, we have provided the percentage of parieties who voted "agree" or "strongly agree" for each. Images with < 70% positive votes did not reach preliminary contentual and are indicated with red text.

Please confirm your vote to finalize the decision on inclusion / exclusion of images as representative of each structure.

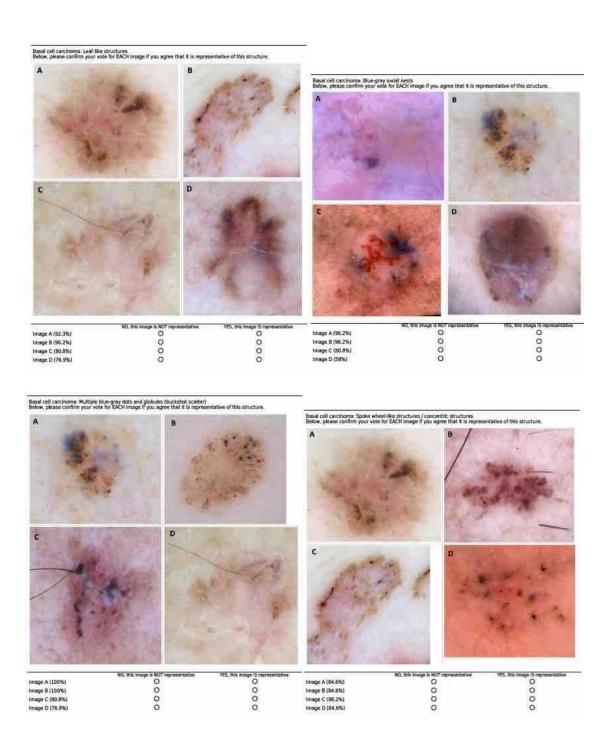
## NONMELANOCYTIC: Basal cell carcinoma

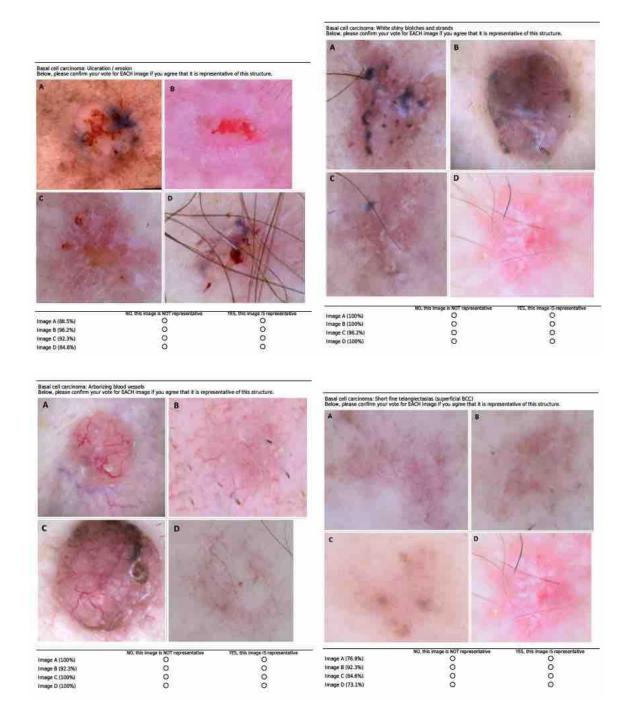
The following structures reached consensus for this diagnosis: Leaf-like structures, Blue-gray ovoid nests, Multiple blue-gray dots and globules (buckshot scatter), Spoks wheel-like structures / concentric structures, Ulceration / erosion, White shiny blotches and strands, Arborizing blood vessels, Short fine telangiectasias (superficial BCC)

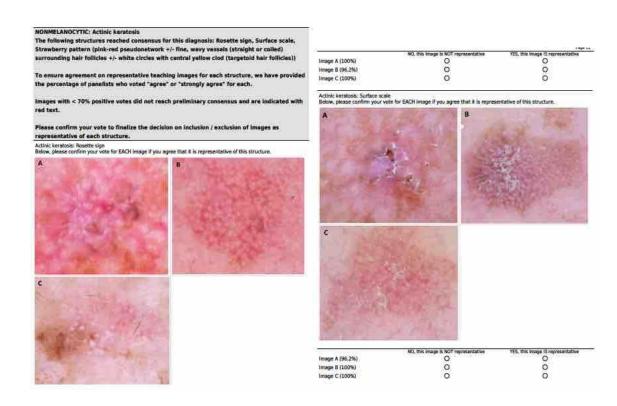
To ensure agreement on representative teaching images for each structure, we have provided the percentage of panelists who voted "agree" or "strongly agree" for each.

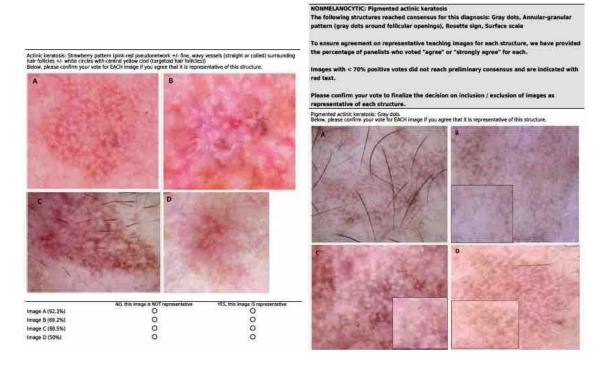
Images with < 70% positive votes did not reach preliminary consensus and are indicated with red text.

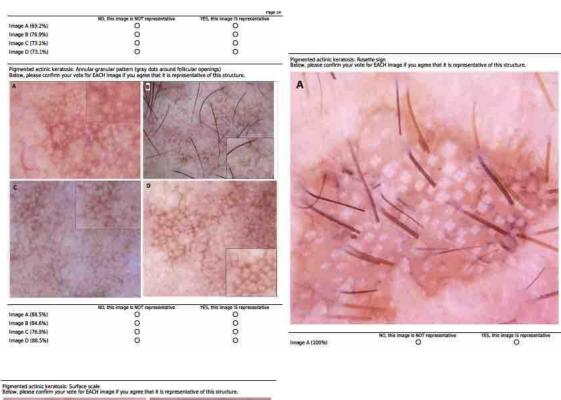
Please confirm your vote to finalize the decision on inclusion / exclusion of images as representative of each structure.

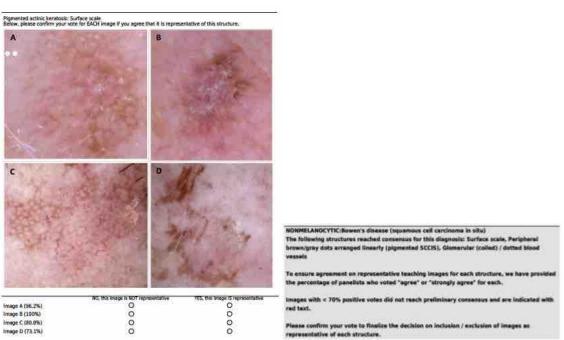


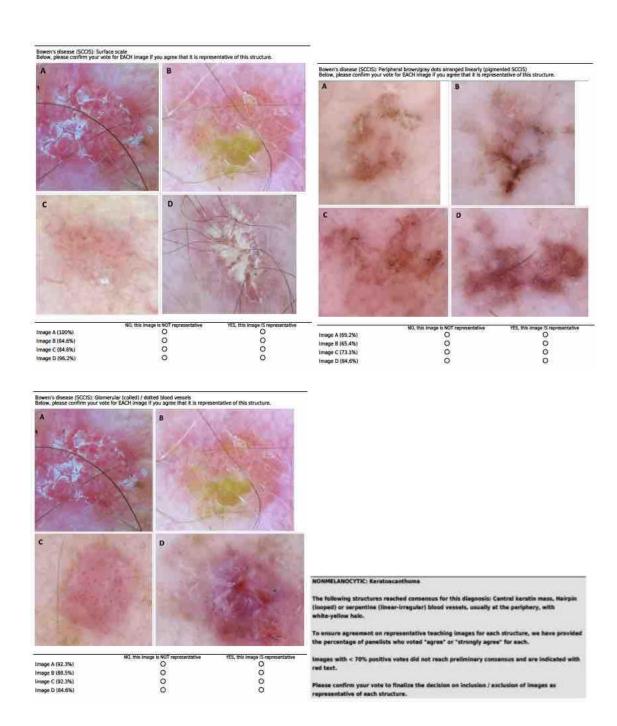


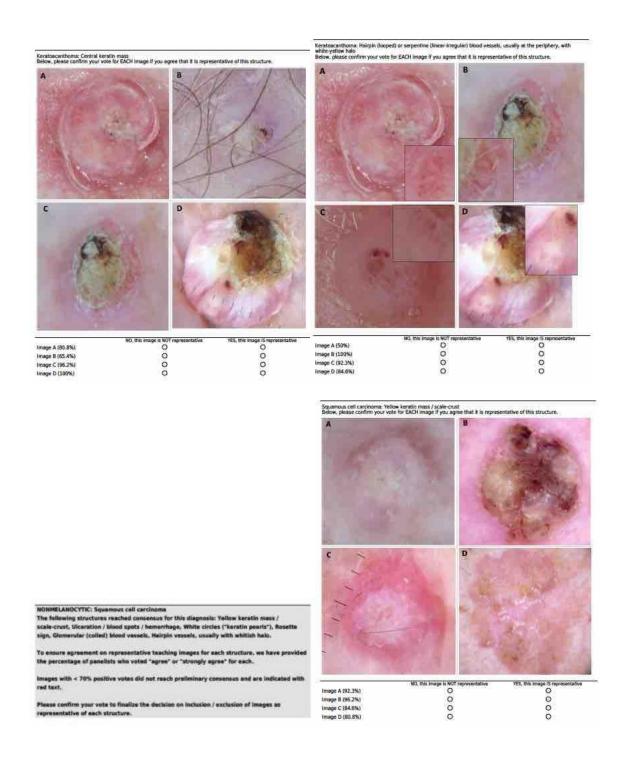


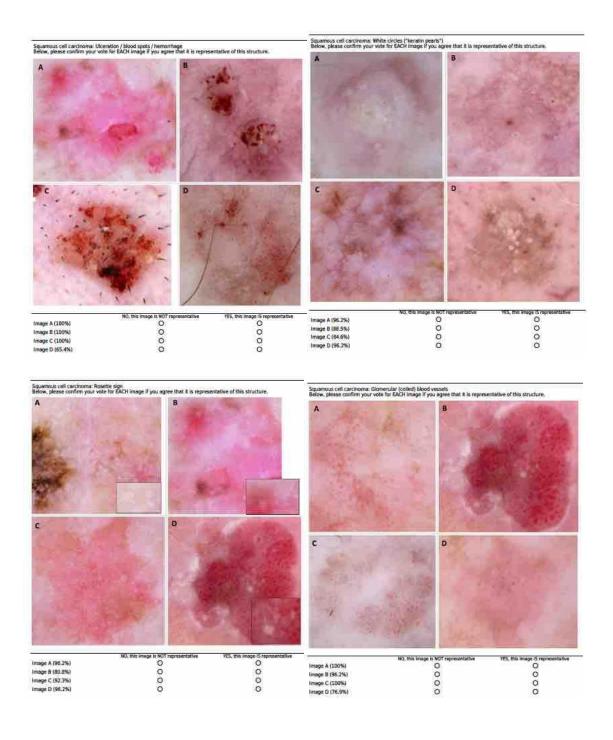


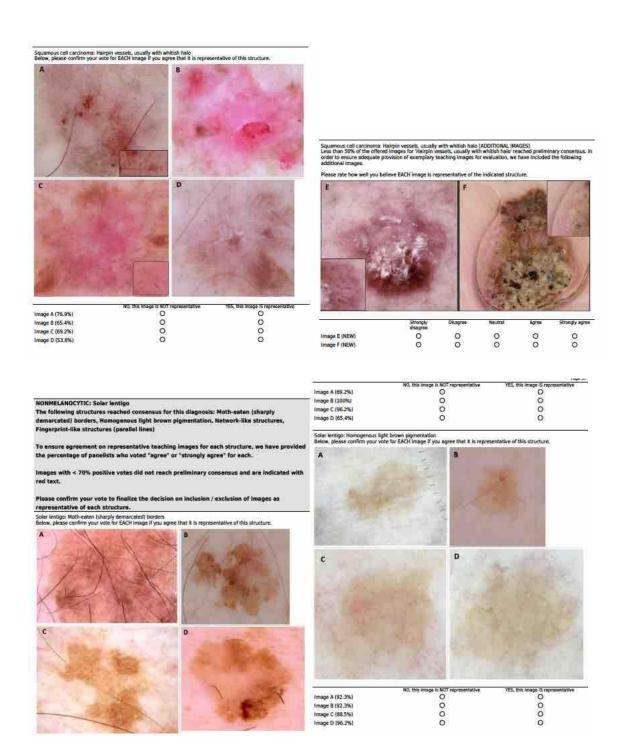


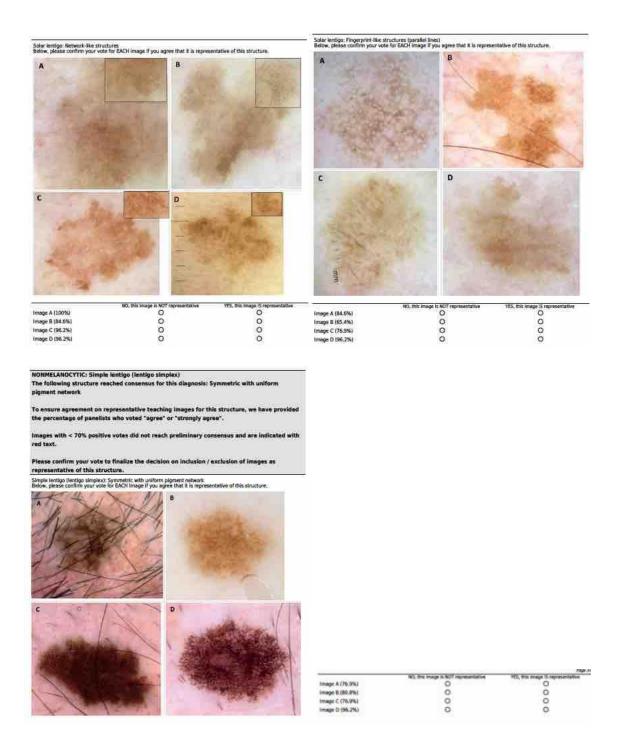


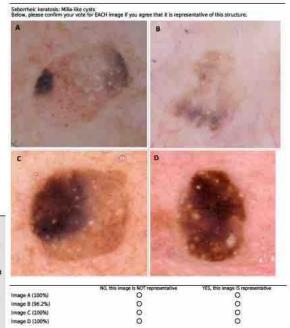


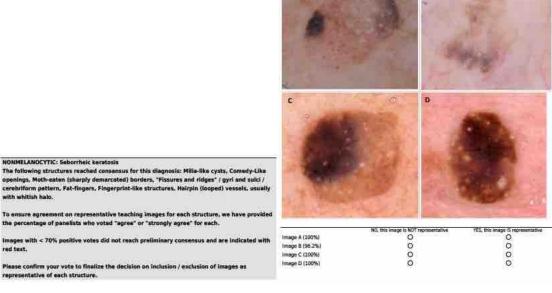


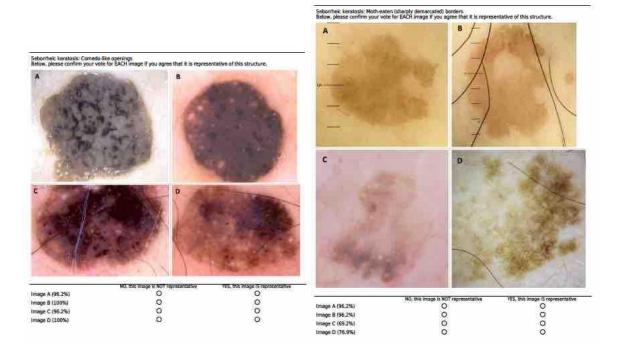


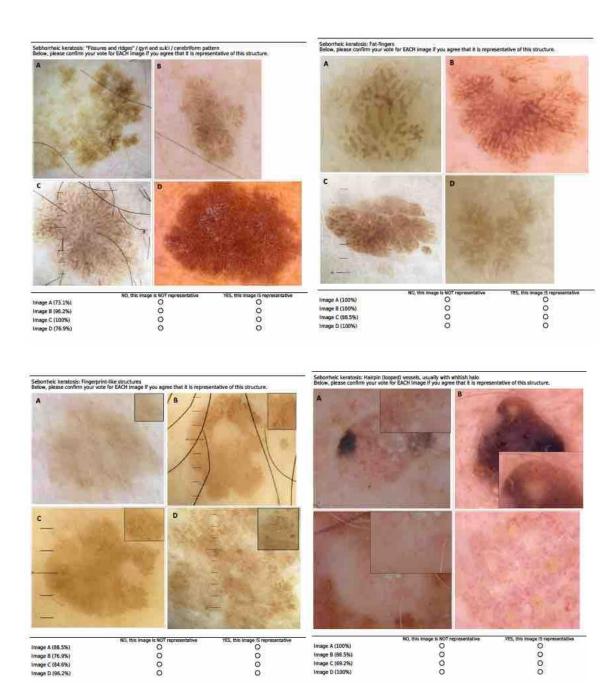


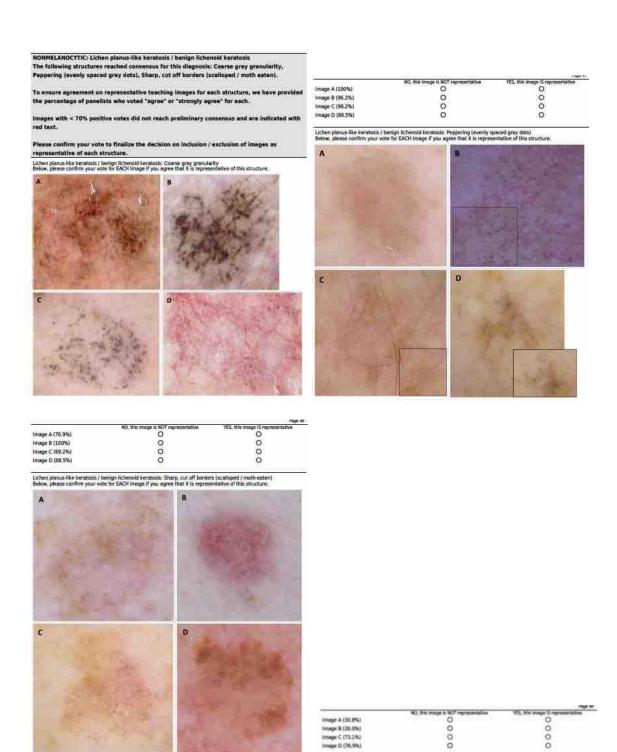


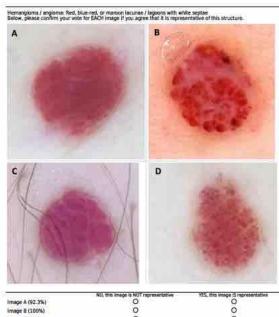




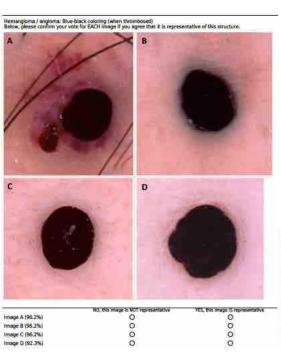


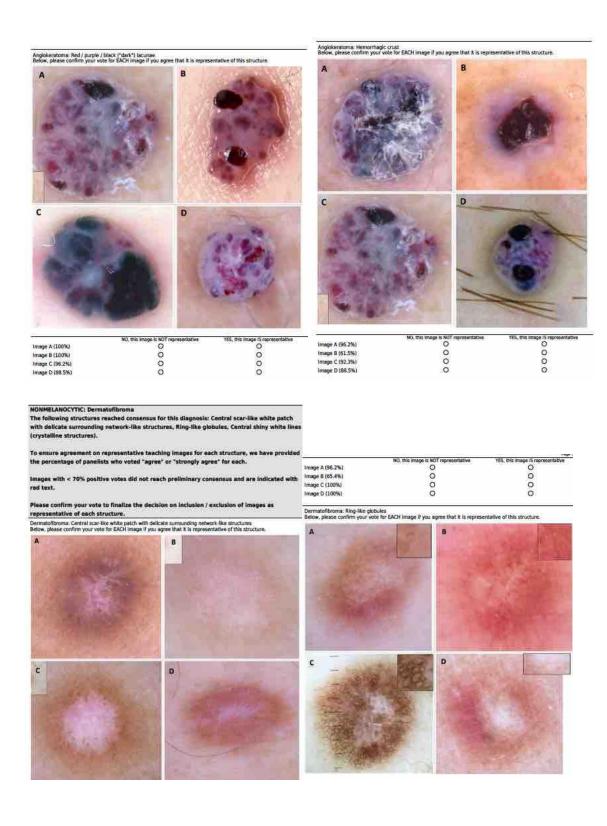


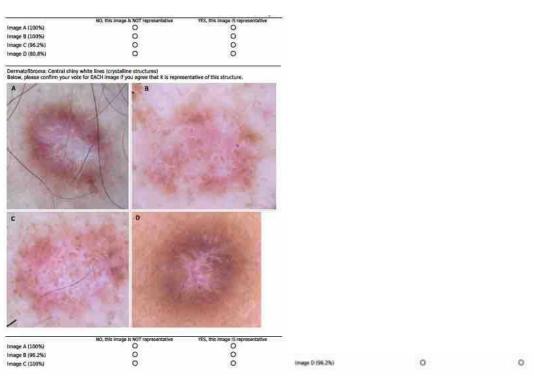




0000 Image A (92.3%) Image B (100%) Image C (100%) Image D (96.2%) 00000









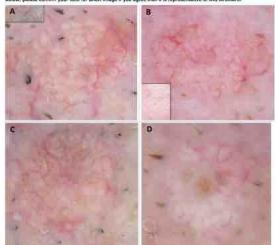
	50 0.00 0.00 11 0.00 0.00 0.00 0.00 0.00		
205/2015/2015		YES, this image IS representative	
liniage A (100%)	0	0	
(mage 8.05.9%):	0	0	
Image C (96.2%)	0	0	
Image D (300%)	0	0	

NONMELANOCYTIC: Sebaceous hyperplasia
The following structures reached consensus for this diagnosis: Pale yellow lobules are central follicular opening, Crown vessels.

To ensure agreement on representative teaching images for each structure, we have provided the percentage of panelists who voted "agree" or "strongly agree" for each.

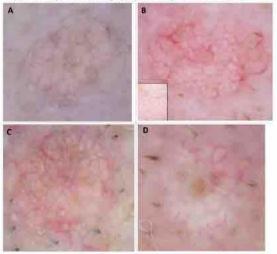
Please confirm your vote to finalize the decision on inclusion / exclusion of images as representative of each structure.

Sebaceous hyperplasia: Pale yellow lobules around a central follicular opening Below, please confirm your vote for EACH image if you agree that it is representative of this structure.



	NO, this image is NOT representative	YES, this image is representative
(mage A (92.3%)	0	0
tmage B (100%)	0	0
Image C (88.5%)	O	0
Image D (96.2%)	0	0

Sebaceous hyperplasia: Crown vessels Below, please confirm your vote for EACH image if you agree that  $\ell$  is representative of this structure.



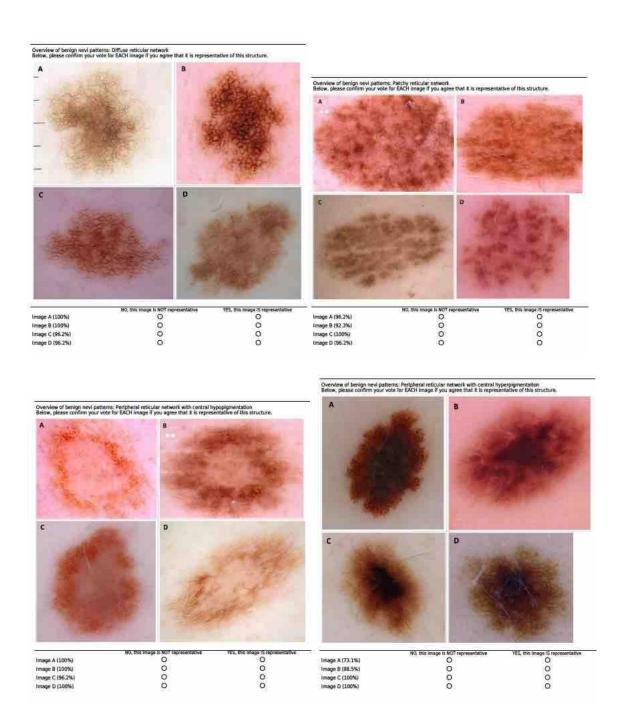
BENIGN MELANOCYTIC: Overview of benign nevi patterns
The following structures reached consensus for this diagnosis: Diffuse reticular network,
Patchy reticular network, Peripheral reticular network with central hypopigmentation,
Peripheral reticular network with central hyperpigmentation, Peripheral reticular network w
central globulas, Homogenous (tan, brown, blue, or pink), Globular pattern, Two-component
pattern, Symmetric multi-component pattern.

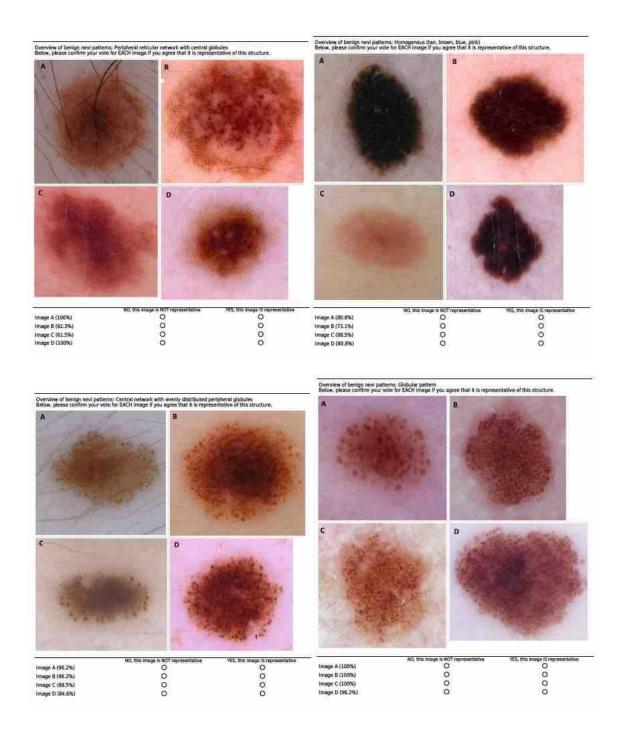
To ensure agreement on representative teaching images for each structure, we have provide the percentage of panelists who voted "agree" or "strongly agree" for each.

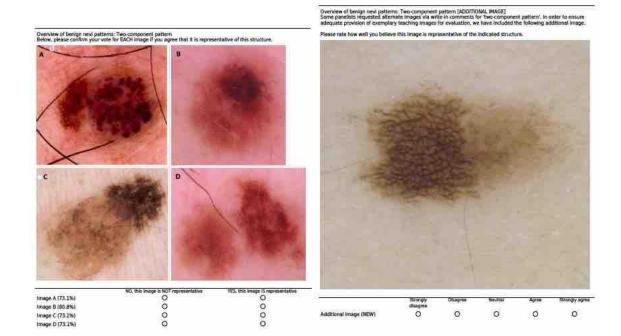
Images with < 70% positive votes did not reach preliminary consensus and are indicated with red text.

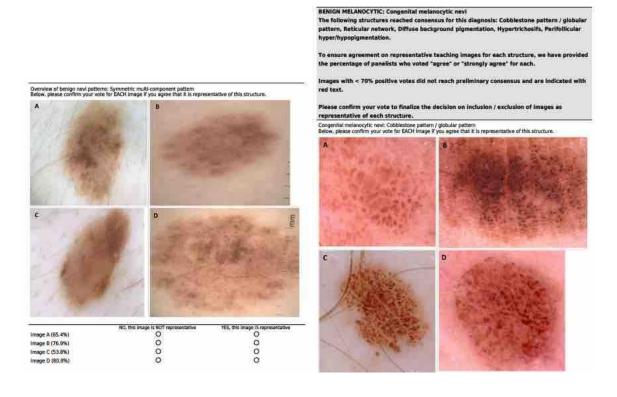
Please confirm your vote to finalize the decision on inclusion / exclusion of images as representative of each structure.

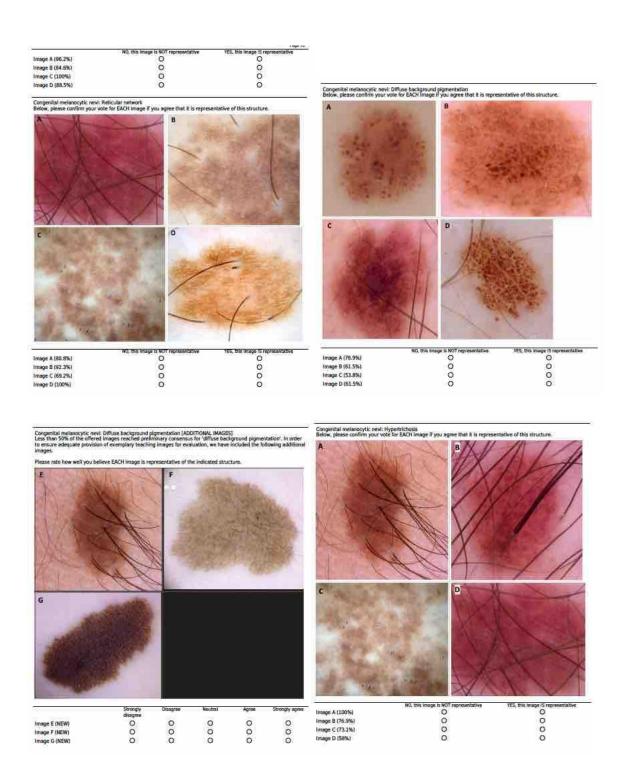
Construction .	NO, this image is NOT representative	155, this image is representative.
Intege A (58%)	0	0
trage 8 (92.3%)	0	0
Image C (88.5%)	0	0
Image D (96.2%)	0	0

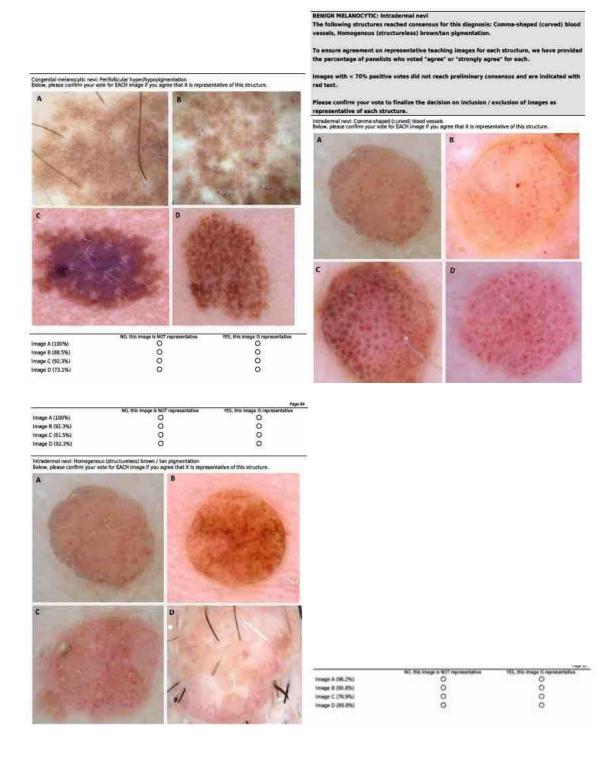


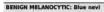












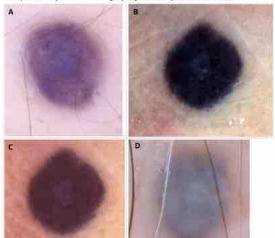
The following structure reached consensus for this diagnosis: Homogenous blue pigmentation

To ensure agreement on representative teaching images for this structure, we have provided the percentage of panelists who voted "agree" or "strongly agree".

Images with < 70% positive votes did not reach preliminary consensus and are indicated with red text.

Please confirm your vote to finalize the decision on inclusion / exclusion of images as representative of this structure.

Blue nevi: Homogenous blue pigmentation Below, please confirm your vote for EACH image if you agree that it is representative of this structure.



		rage (
15-0-02190700104	NO, this image is NOT representative	YES, this image is representative
(mage A (92.3%)	0	0
(mage 8 (84.6%)	0	0
Image C (86.5%)	0	0
Image D (96.2%)	0	0

Spitz nevi: Vescular pattern (pink homogenous with dotted vessels). Below, please confirm your vote for EACH image if you agree that it is representative of this structure.

d with Image A (92.3%) Image B (36.3%) Image C (100%)

Image D (58%)

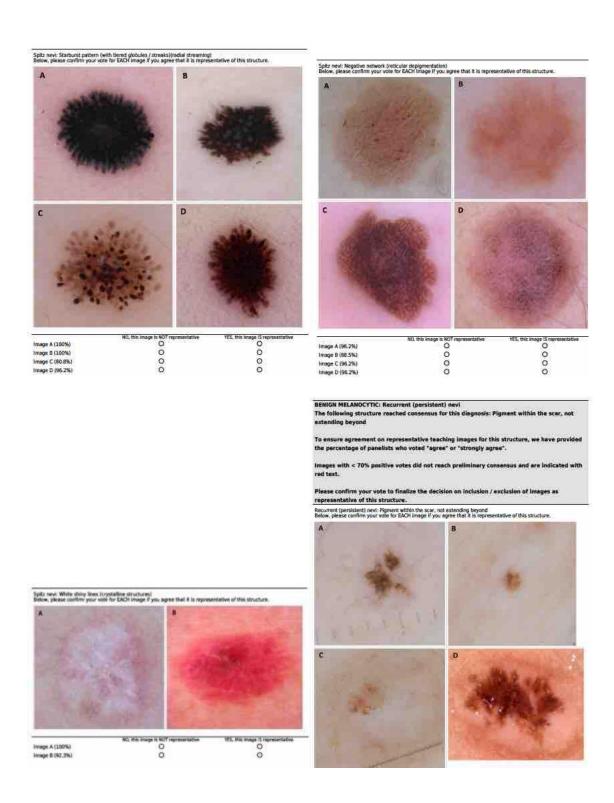
## BENIGN MELANOCYTIC: Spitz nevi

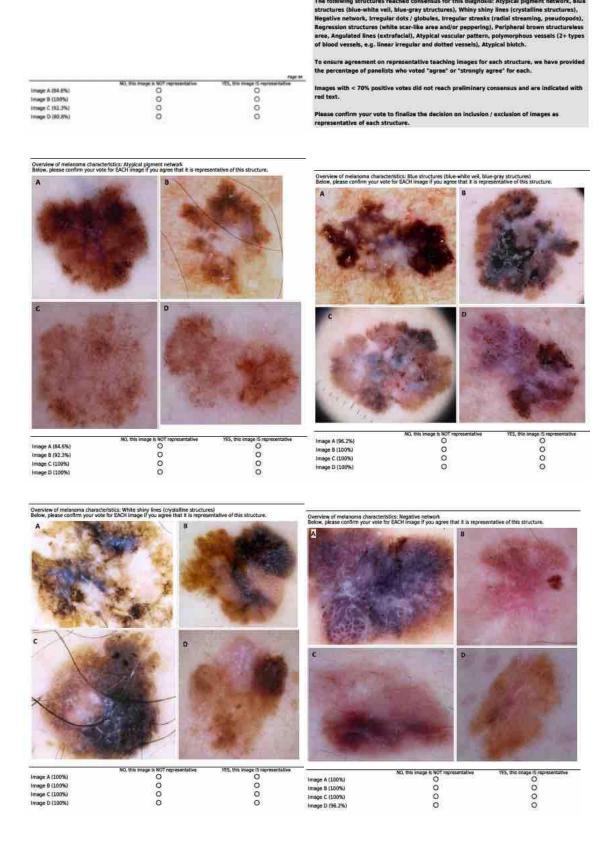
The following structures reached consensus for this diagnosis: Vascular pattern (pink homogenous with dotted vessels), Starburst pattern (with tiered globules / streaks) (radial streaming), Negative network (reticular depigmentation), White shiny lines (crystalline

To ensure agreement on representative teaching images for each structure, we have provided the percentage of panelists who voted "agree" or "strongly agree" for each.

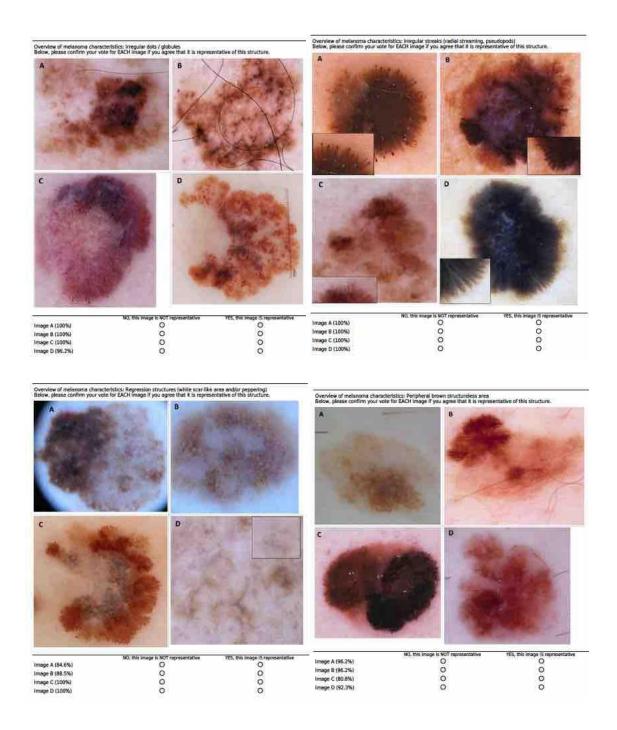
Images with < 70% positive votes did not reach preliminary consensus and are indicated with red text.

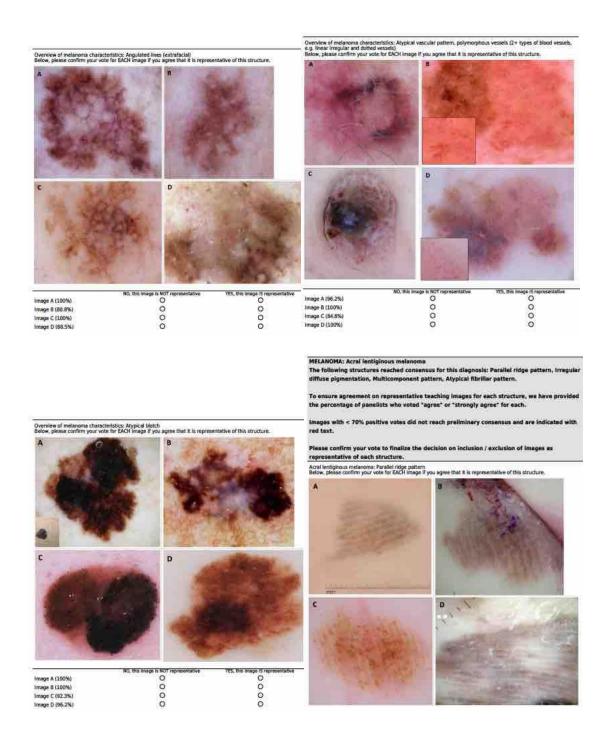
Please confirm your vote to finalize the decision on inclusion / exclusion of images as representative of each structure.

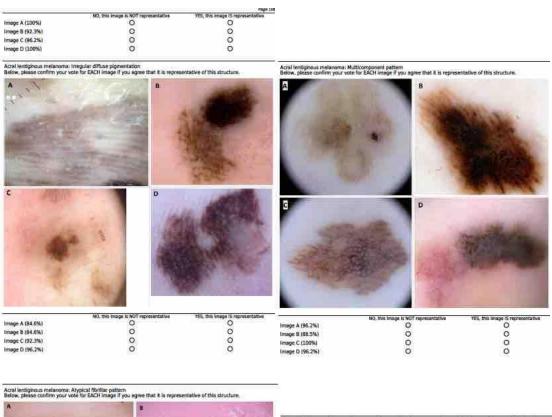


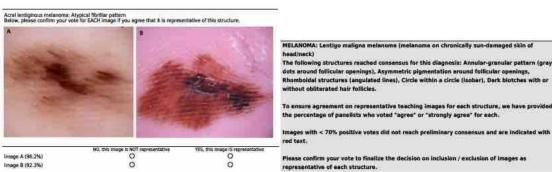


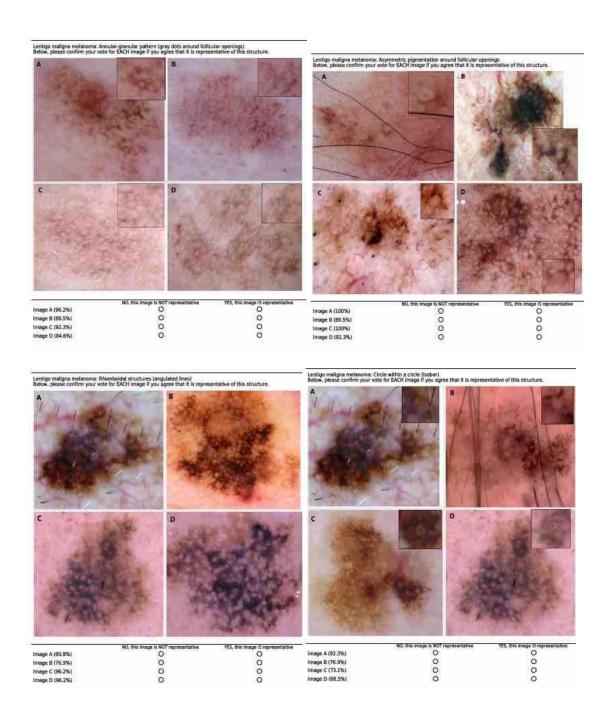
MELANOMA: Overview of melanoma characteristics
The following structures reached consensus for this diagr

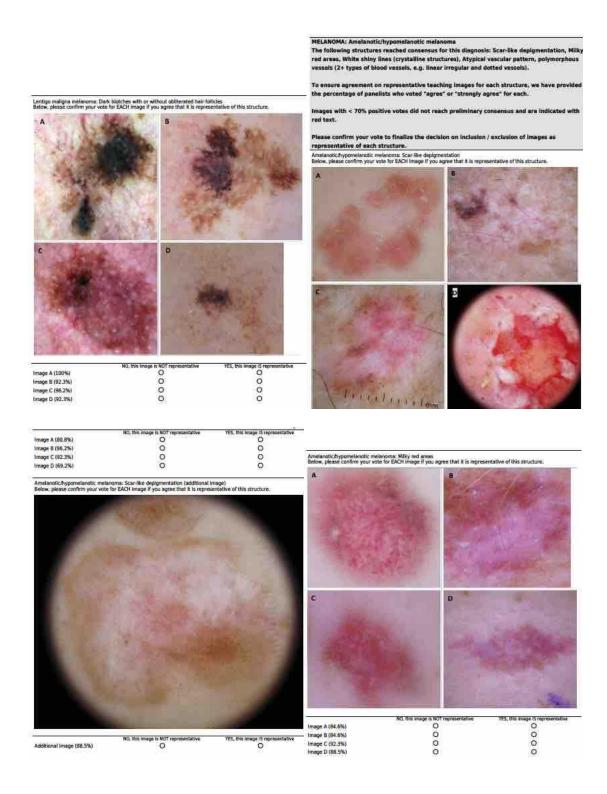


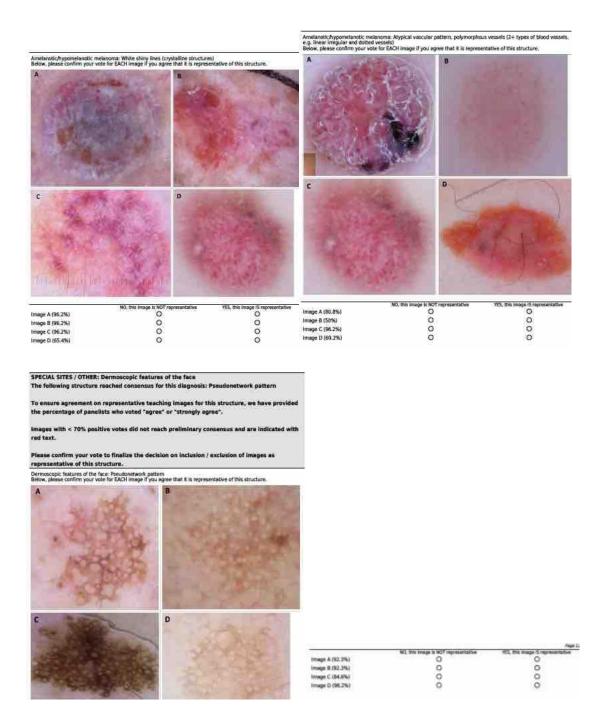


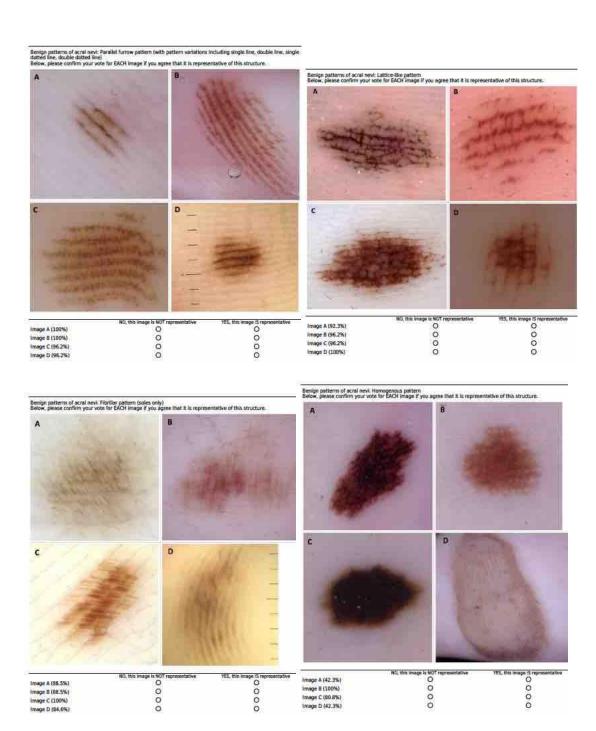


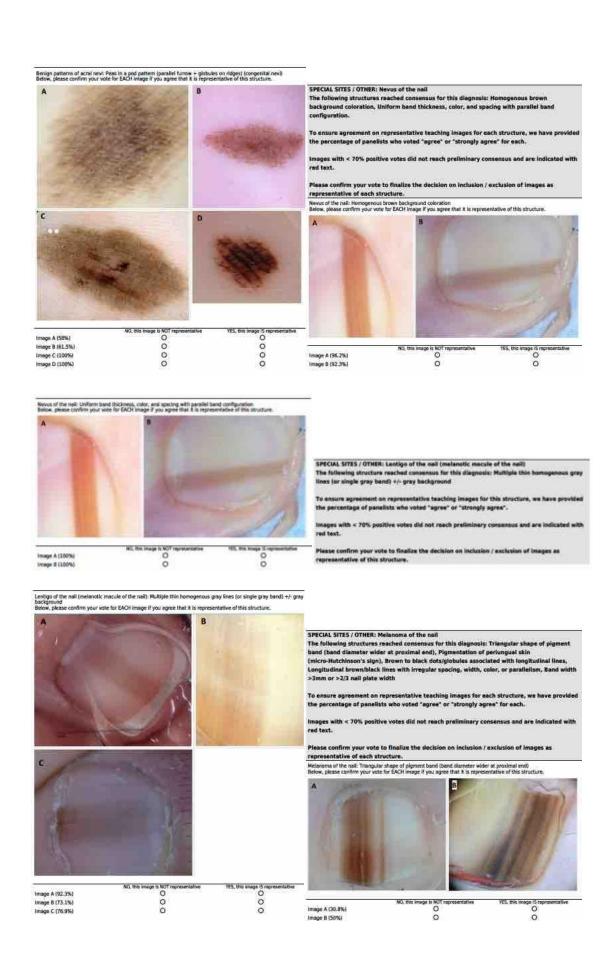


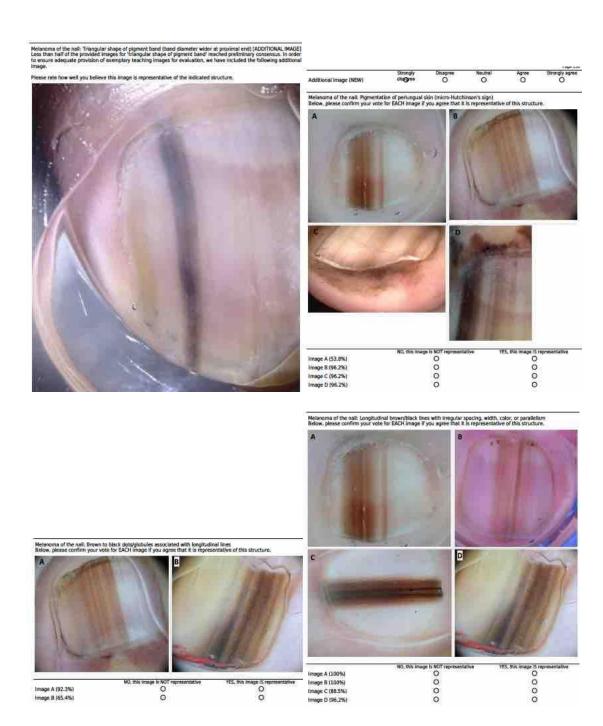












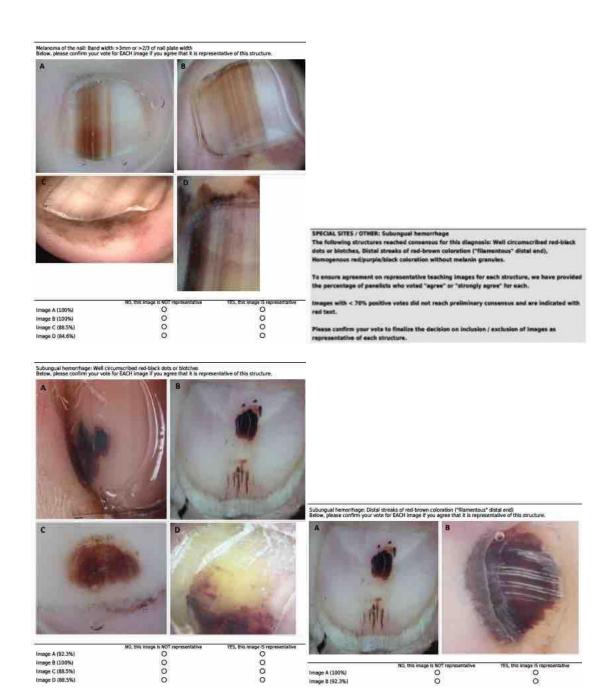
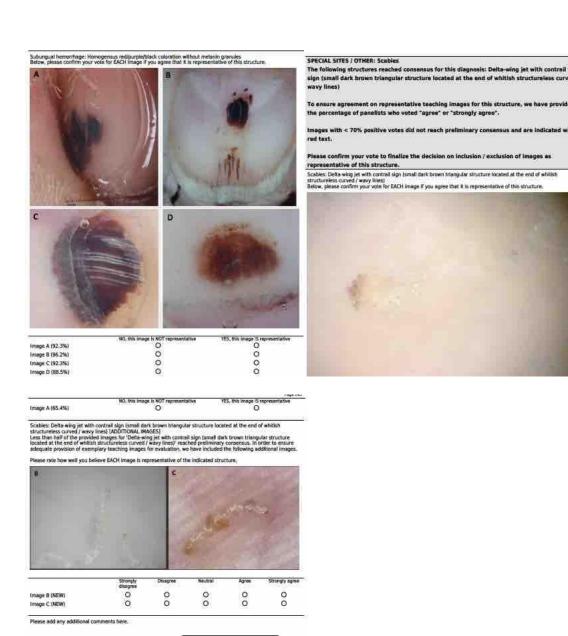


Image A (100%) Image B (92.3%)



## **DERMOSCOPIC IMAGES – ROUND 3**

