Supplementary material to article by “Teledermoscopy in High-risk Melanoma Patients: A Comparative Study of Face-to-face and Teledermatology Visits”

Fig. S1. CONSORT statement.

Face-to-Face Assessment

Face-to-Face examination of high risk melanoma patients at the Pigmented Skin Lesion Clinic, Medical University of Graz, Graz, Austria. Clinical outcome categories: recommendation for self-examination, short-term follow-up, or excision. Performed by an expert in dermoscopy.

Enrollment

The study participants were required to meet at least one of the inclusion criteria: (1) Personal and familial (first degree relative) history of cutaneous melanoma, (2) history of dysplastic nevi confirmed histologically, (3) presence of at least 5 atypical nevi, (4) >100 benign melanocytic nevi, and/or (5) a suspicious lesion for melanoma at the time of the examination.

Consenting process completed (n=70)

Image Acquisition

Total body photography as well as close up and dermoscopic images of suspicious skin lesions were obtained according to protocol. Performed by a melanographer (Nurse and resident in dermatology)

Transfer of data to four teledermatologists (TDs), experts in dermoscopy.

Teledermoscopy

Image-Analysis: All body sector images and corresponding macroscopic and dermoscopy images were analysed by four TDs. Followed by clinical recommendation of skin self-examination, short-term follow-up or excision.

Four-year Follow-up

Four-year clinical follow-up (4 years post study enrollment initiated)