

# Advanced Certificate of Dermoscopy



### 1. INTRODUCING HEALTHCERT

HealthCert is a global company dedicated to saving lives and improving patient outcomes through accredited primary care education.

In collaboration with leading subject specialists, we offer medical courses at professional certificate, advanced certificate and professional diploma levels for General Practitioners, Medical Health Professionals, Nurses and International Medical Graduates. All HealthCert courses are professionally accredited and provide access into multiple Master degree pathways and clinical attachment programs. Thousands of medical professionals across 34 countries have participated in our programs, known for their comprehensive nature and the ability to enable doctors to make a real difference to their patients and their practice.

### 2. PROFESSIONAL EDUCATION

HealthCert is a Professional Education Provider. We provide CPD-accredited **professional development** training for medical professionals. HealthCert professional qualifications are named *Professional Certificate*, *Advanced Certificate* and *Professional Diploma* to clearly indicate the professional nature of the qualifications. We proudly go beyond compliance with the professional standards for education providers set by professional bodies, and we also self-impose reviews by university academics.

#### 3. HEALTHCERT GRADUATE ATTRIBUTES

All HealthCert graduates demonstrate the following:

### GA1. Factual knowledge in a special interest field

HealthCert graduates demonstrate factual knowledge in a special interest field of professional studies at the appropriate level for the course they have undertaken.

#### GA2. Procedural knowledge in a special interest field

HealthCert graduates demonstrate knowledge of specific procedures in a special interest field at the appropriate level for the course they have undertaken.

#### GA3. Safe and careful attitudes

HealthCert graduates demonstrate a safe and careful attitude within a special interest field of professional studies.

### 4. PROGRAM OUTCOMES FOR THE ADVANCED CERTIFICATE LEVEL

Within a specific field of interest, graduates will be able to demonstrate all of the following at an advanced level:

- ✓ Broad factual knowledge (A1)
- ✓ Broad procedural knowledge (A2)
- ✓ Some theoretical knowledge (A1)
- ✓ Broad cognitive skills to gain information and apply known methods (A2)
- ✓ Broad judgement skills based on evidence (A1)
- ✓ Problem solving skills for expected, and sometimes unexpected, problems (A2)
- ✓ Identification of limitations and referral to others (A2)



# Advanced Certificate of Dermoscopy



### 5. COURSE OVERVIEW

This course is designed for medical practitioners who wish to build on the knowledge gained from the Professional Certificate of Dermoscopy. There will be a greater focus on more advanced cases in Dermoscopy. This qualification is stage two of the Professional Diploma of Dermoscopy. The pathway is (1) Professional Certificate of Dermoscopy, (2) Advanced Certificate of Dermoscopy, (3) Professional Diploma of Dermoscopy.

### 6. DELIVERY METHOD

The Advanced Certificate of Dermoscopy is a fully online course. There are eight units in a HealthCert Advanced Certificate program. The course is delivered in one trimester (15 weeks) with 12 weeks of online teaching (video lectures, case discussion boards, webinars) and three weeks of revision and examination.

## 7. ENTRY REQUIREMENTS AND COURSE REQUISITES

This course is for general practitioners, degree-qualified nurses and dermal therapists, and other degree-qualified health professionals with an interest in skin. The prerequisite for this Advanced Certificate course is the successful completion of the HealthCert Professional Certificate of Dermoscopy (or a qualification deemed equivalent). HealthCert also highly recommends the successful completion of at least 25 cases of dermoscopy prior to enrolment.

### 8. INCOMING COURSE PATHWAYS

Professionally accredited qualifications and prior studies may be recognised for entry into this course if the learning outcomes match exactly. Please ask a HealthCert Education Advisor for an individual assessment of your prior qualifications and experience to see if they match the learning outcomes of HealthCert courses. If there is not an exact match, HealthCert assessment tasks may need to be completed prior to enrolment.

### 9. COURSE LEARNING OUTCOMES

At the end of this course, participants will be able to:

- 1. Analyse nail lesions including the dermoscopic clues to safely diagnose melanonychia striata and determine the need for biopsy.
- 2. Distinguish per-operative features of nail unit lentigo, naevi and melanoma.
- 3. Evaluate the dermoscopic patterns of mucosal lesions.
- 4. Distinguish between benign and malignant mucosal lesions using a dermoscope.
- 5. Classify difficult benign lesions including morphologic variability of naevi with special features.
- 6. Apply diagnostic clues to safely distinguish naevi from malignancy.
- 7. Categorise and evaluate the dermoscopic clues to safely diagnose difficult melanomas.
- 8. Design methods for dealing safely with difficult melanomas.
- 9. Evaluate pink lesions including melanocytic and non-melanocytic skin tumours based on the recognition of specific vascular structures, their arrangement and specific clues.
- 10. Apply management rules of pink lesions to avoid missing amelanotic melanoma.
- 11. Distinguish dermoscopy features of pigmented and non-pigmented variants of uncommon skin tumours.
- 12. Evaluate dermatoscopic clues for rare, complex-syndrome skin cancers.
- 13. Outline the broad spectrum of BCC and keratinocyte skin cancer.



# Advanced Certificate of Dermoscopy



- 14. Categorise dermatoscopic clues and variants of epithelial skin cancer including pigmented and non-pigmented variants.
- 15. Assess dermoscopic patterns of inflammatory and infectious skin diseases in general dermatology.
- 16. Evaluate dermoscopy use in differentiating inflammatory and infectious skin diseases in general dermatology.
- 17. Make professional judgements that demonstrate dermoscopic knowledge.
- 18. Make professional judgements demonstrating the application of dermoscopic knowledge to case scenarios.

Note: For nurses and dermal therapists, dermoscopy must be carried out under the supervision of a GP.

#### 10. SAMPLE COURSE TRAINING PLAN

### Module 1: Identify pink tumours and their significance

Learn how to assess pink lesions including melanocytic and non-melanocytic skin tumours based on the recognition of specific vascular structures, their arrangement and specific clues. In addition, established management rules will be discussed that aid to avoid missing amelanotic melanoma.

### Module 2: Recognise mucosal lesions

Learn the dermoscopic patterns of the most frequent lesions of the mucosa. Practical tips will be presented for using the dermoscope at the mucosal area and how to differentiate between benign and malignant lesions.

### Module 3: Classify difficult benign lesions including nevi with special features

Learn the morphologic variability of naevi with special features and the diagnostic clues that distinguish them from malignancy.

#### Module 4: Identify nail lesions

Learn the clinical and dermoscopic clues to help diagnose melanonychia striata and to better select patients to be submitted to biopsy. You will also learn the per-operative dermoscopic features of nail unit lentigo, naevi and melanoma. Clinical and dermoscopical features of nail unit unpigmented tumours will also be reviewed.

### Module 5: Describe rare skin tumours

Learn dermoscopy features of pigmented and non-pigmented variants of uncommon skin tumours. Learn to identify dermatoscopic clues helpful to diagnose rare skin cancer, with special emphasis on those tumours that are associated with complex syndromes.

#### Module 6: Explain the broad spectrum of BCC and Keratinocyte skin cancer

Learn to characterise patterns of pigmented and non-pigmented variants of epithelial skin cancer and identify common and uncommon dermatoscopic clues to diagnose variants of epithelial skin cancer with confidence.

### Module 7: Describe methods for dealing with difficult melanomas

Learn the dermoscopic clues to diagnose clinically challenging melanomas. Dermoscopy improved recognition of nodular melanoma, desmoplastic melanoma, amelanotic melanoma, epidermotropic metastatic melanomas, melanoma on sun damaged skin, nevoid melanoma, verrucous melanoma, among others. The dermoscopic features to help in the recognition of the aforementioned melanomas will be expanded upon in this module.

### Module 8: Recognise the use of dermoscopy in general dermatology

Learn the dermoscopic patterns of the most frequent inflammatory and infectious skin diseases and receive practical tips on how dermoscopy can help differentiating among them.



# Advanced Certificate of Dermoscopy



### 11. COURSE ACTIVITIES

Course participants will:

- Utilise the *Interactive Atlas* international dermoscopy program.
- Utilise the YouDermoscopy application (app).
- Participate in webinars with experts and professional colleagues.
- Observe professional clinic/patient interactions via video.
- Evaluate dermoscopy cases in an online discussion board.

### 12. COURSE PRESENTERS

HealthCert has a high-quality team of exceptional specialists and industry professionals to deliver this course. On rare occasions, presenters may change due to unforeseen circumstances affecting availability.

- Prof Harald Kittler, MD, Professor of Dermatology at Medical University of Vienna, Austria
- **Prof Luc Thomas**, MD PhD, Professor and Chairman, Department of Dermatology, Lyons Cancer Research Center (Pr Puisieux), France
- A/Prof Andreas Blum, MD PhD MSc (DermPrevOncol), Public, Private and Teaching Practice, Konstanz, Germany Associate Professor at the University of Tuebingen, Germany
- A/Prof Ashfaq A. Marghoob, MD, Attending Physician, Dermatology Service, Memorial Sloan Kettering Skin Cancer Center, New York, USA
- A/Prof Caterina Longo, MD PhD, Scientific Coordinator, Skin Cancer Unit, ASMN-IRCCS, Reggio Emilia, Italy
- A/Prof Iris Zalaudek, MD PhD, Research Director of the Non-Melanoma Skin Cancer Unit, Division of Dermatology and Venerology, Medical University of Graz, Austria
- **Dr Aimilios Lallas**, MD PhD MSc, Dermatologist-Venereologist, First Department of Dermatology, Aristotle University, Thessaloniki, Greece
- Dr Elvira Moscarella, MD, Dermatologist, Arcispedale S.Maria Nuova, IRCCS, Reggio Emilia, Italy

### 13. ASSESSMENT REQUIREMENTS: ONLINE EXAMINATIONS

There are two online examinations for assessment:

- 1. 104 knowledge questions based on a scenario of a medical practitioner undertaking special interest training.
  - i. 13 per module

Example: The medical practitioner believes that 10% of the population ... Is he correct? Yes/No

- 2. 104 authentic questions based on patient case scenarios at a clinic.
  - i. 13 per module

Example: A patient arrives at your clinic with this problem ... What should you do? Multiple choice images based on patient cases.

The knowledge-based examination is worth 50 per cent and the application-based examination is worth 50 per cent. The overall pass mark is 80 per cent. It is therefore not possible to pass this course on knowledge alone. Knowledge must be successfully applied to patient cases in order to pass the course.







### 14. ASSESSMENT MAPPING OF COURSE LEARNING OUTCOMES FOR EXAMINATIONS

1.	Analyse nail lesions including the dermoscopic clues to safely diagnose melanonychia striata and determine the need for biopsy.	GA1/2/3, A1/2
2.	Distinguish per-operative features of nail unit lentigo, naevi and melanoma.	GA1/2, A1/2
3.	Evaluate the dermoscopic patterns of mucosal lesions.	GA1, A1
4.	Distinguish between benign and malignant mucosal lesions using a dermoscope.	GA1/2, A1/2
5.	Classify difficult benign lesions including morphologic variability of naevi with special	GA1,A1
	features.	
6.	Apply diagnostic clues to safely distinguish naevi from malignancy.	GA1/2/3, A1/2
7.	Categorise and evaluate dermoscopic clues to safely diagnose difficult melanomas.	GA1/2, A1/2
8.	Design methods for dealing safely with difficult melanomas.	GA2, A2
9.	Evaluate pink lesions including melanocytic and non-melanocytic tumours based on	GA1/2, A1/2
	the recognition of specific vascular structures, their arrangement and specific clues.	
10.	Apply management rules of pink lesions to avoid missing amelanotic melanoma.	GA1/2, A1/2
11.	Distinguish dermoscopy features of pigmented and non-pigmented variants of	GA1, A1
	uncommon skin tumours.	
12.	Evaluate dermatoscopic clues for rare, complex-syndrome skin cancers.	GA1, A1
13.	Outline the broad spectrum of BCC and keratinocyte skin cancer.	GA1/2, A1/2
14.	Categorise dermatoscopic clues and variants of epithelial skin cancer including	GA1,A2
	pigmented and non-pigmented variants.	
15.	Assess dermoscopic patterns of inflammatory and infectious skin diseases in general	GA1/2, A1/2
	dermatology.	
16.	Evaluate the use of dermoscopy in differentiating inflammatory and infectious skin	GA1/2, A1/2
	diseases in general dermatology.	
17.	Make professional judgements that demonstrate dermoscopic knowledge.	GA1/2/3, A1
18.	Make professional judgements that demonstrate the application of dermoscopic	GA1/2/3, A2
	knowledge to patient case scenarios.	

GA= Graduate Attributes, A = Assessment Test Number

## 15. PROFESSIONAL PLANNING REQUIREMENT

There are mandatory professional requirements for this course.

- Provide an explanation of how you intend to use the learning from this course in your professional work. This
  should include the identification of professional associations in dermoscopy and a description of how they can
  assist you in consolidating and extending your knowledge of dermoscopy. Please also describe your other
  professional networking and how this applies to your dermoscopy work.
- List a range of resource materials that you have collected to advance your knowledge and application of dermoscopy. These may include links to video clips viewed, links to conference proceedings you have read or attended, books you have purchased or loaned, information on suppliers you have compiled, and any other resource materials you have obtained in order to advance your professional development in the field of dermoscopy.



# Advanced Certificate of Dermoscopy



### 16. HEALTHCERT PROFESSIONAL QUALIFICATION

### **Advanced Certificate of Dermoscopy**

From HealthCert – An Accredited CPD Provider with university connections.

### 17. ONGOING WEB-BASED SUPPORT

After the course trimester, there will be a minimum of 12 months ongoing web-based support to assist you with implementation of learning. This includes reminders of key learning points, webinars, video clips, updated information and ongoing case discussions with own case submission opportunities. The entire Professional Diploma program can therefore be studied over three trimesters (fastest) or three years (slowest).

### 18. CPD POINTS AND RECOMMENDED STUDY HOURS

Recommended study hours: 120 hours, including all readings and assessment.

Support: 12 months web-based

**Australian CPD points** 

RACGP: 40 Category 1 QI&CPD points

**ACRRM:** 30 PRPD points Active Learning Module

This is a self-submitted activity in various other countries as outlined below; please seek advice from the relevant professional body for more information.

### 19. PROFESSIONAL RECOGNITION AND ACADEMIC REVIEW

#### This course:

- Provides CPD points from the Royal Australian College of General Practitioners (RACGP).
- Provides PRPD Points from the Australian Council of Rural and Remote Medicine (ACRRM).
- Meets World Federation of Medical Education standards.
- Is recognised by the Royal New Zealand College of General Practitioners (RNZCGP). The RNZCGP recognises all courses endorsed by the RACGP. Peer review and audit are compulsory.
- Is recognised by the Hong Kong College of Family Physicians (HKCFP). The HKCFP recognises all courses endorsed by the RACGP. Points are calculated differently.
- Is a self-submitted activity in Dubai. The number of CPD points must be stated on the certificate. Please contact PLD@dhcr.gov.ae for more information.
- Is a self-submitted activity in the UK. CPD events overseas, applicable to a doctor's scope of practice, may be submitted for revalidation. Please confirm with your Responsible Officer.
- Is a self-submitted activity in Canada through the College of Family Physicians of Canada. Category 1 points are reported as certified and Category 2 points are reported as non-certified. Please contact mainprocredits@cfpc.ca for more information.
- Is accredited by the Skin Cancer Institute and may be used as part of an application for Membership or Fellowship at <a href="https://www.skincancerinstitute.com">www.skincancerinstitute.com</a>.



# Advanced Certificate of Dermoscopy



- Has been collaboratively designed with, and reviewed by, Associate Professor Giuseppe Argenziano, Head of the Dermatology Unit, Second University of Naples, Italy, and a prolific author of scientific articles.
- Is recognised by the International Dermoscopy Society worldwide membership. More: <u>dermoscopy-ids.org.</u>
- Is recognised by The University of Queensland as part two of the HealthCert Professional Diploma of Dermoscopy.
- Is recognised by the Medical University of Graz as part two of the Professional Diploma of Dermoscopy that has an RPL pathway towards the MSc in Dermoscopy and Preventative Dermato-Oncology.

### 20. OUTGOING COURSE PATHWAYS

### **Professional Diploma pathway**

This course is the part two of the Professional Diploma of Dermoscopy pathway. The full pathway is (1) Professional Certificate, (2) Advanced Certificate, (3) Professional Diploma of Dermoscopy.

### Australian postgraduate pathway

This course is part two of the HealthCert Professional Diploma of Dermoscopy pathway. The Professional Diploma of Dermoscopy is guaranteed for RPL for the unit IMED7003, part of the **Graduate Certificate of Medicine (Skin Cancer)** which is the first step of the **Master of Medicine (Skin Cancer)** at The University of Queensland. There are no further requirements for this RPL. It is automatic and guaranteed, and provides a saving on fees. More information at <a href="https://www.uq.edu.au/study/program.html?acad">www.uq.edu.au/study/program.html?acad</a> prog=5398.

### International postgraduate pathway

There is an international postgraduate pathway from the Professional Diploma of Dermoscopy. A postgraduate RPL pathway exists with the Medical University of Graz towards the **MSc in Dermoscopy and Preventative Dermato-Oncology.** This pathway provides credit of over 50 per cent of a Master degree (ie 10 units out of 19). For more information, contact Associate Professor Iris Zalaudek at <a href="iris.zalaudek@medunigraz.at">iris.zalaudek@medunigraz.at</a>.

The Master program at the Medical University of Graz is a distance learning program delivered predominantly online. The program guides participants through three different education levels and consists of 19 teaching modules. The modules can be completed in six semesters but graduates have the possibility to take an early exit and receive an International Dermoscopy Diploma after three semesters or become certified as an Academic Expert in Dermoscopy and Preventive Dermato-Oncology after four semesters. HealthCert graduates will receive RPL for modules 4 to 13. The three units required to obtain the International Dermoscopy Diploma from the University of Graz (Modules 1-3) can be obtained fully online.

### **Education level 1: International Dermoscopy Diploma**

Module 1: Epidemiology of melanoma and non-

melanoma skin cancer

Module 2: Primary skin cancer prevention

Module 3: Secondary skin cancer prevention

Module 4: Introduction to dermoscopy

Module 5: Dermoscopic criteria (overview) +

histopathologic correlation

Module 6: Diagnostic relevance of patterns

Module 7: Diagnostic algorithms

Module 8: Dermoscopy in the daily routine

Module 9: Special issues Module 10: Future aspects

Module 11: Dermoscopic-pathologic correlation

Module 12: Dermoscopy Atlas

Module 13: Consultation on the job



# Advanced Certificate of Dermoscopy



Education level 2: Academic Expert in Dermoscopy and Preventive Dermato-Oncology\*

Module 14: Advanced dermoscopy
Module 15: Update on recent research

Module 16: Rare skin tumours

#### Education level 3: Masters of Science in Dermoscopy and Preventive Dermato-Oncology

Thesis Topic-Pool

\*Requirements: 1) One week on-campus at the University of Graz, Austria. Completing the "International Short Course on Dermoscopy". 2) Two weeks attendance at a Centre of Excellence which are located all over the world, including Australia.

**Fees:** HealthCert graduates will pay €1500 for modules 1-3. Modules 4 to 13 will be **free of payment**. For the Academic expert level and the Master level payment of €5000 each is necessary.

#### Participation in research

HealthCert alumni have opportunities to participate in research projects conducted by leading experts in the field who teach at HealthCert. Past research projects include a study by Monika Janda on the use of teledermoscopy by GPs, the DermaChallenge project by Professor Harald Kittler and his team, and a research study by The University of Sydney exploring the management of patients with melanoma in primary care in Australia. Research projects and surveys are shared via the HealthCert blog which is available to HealthCert alumni.

### 21. CONTINUOUS IMPROVEMENT THROUGH FEEDBACK

Participant feedback in the form of course evaluations and focus groups enable us to continuously improve. Thank you for contributing to this process. We keep detailed records of course feedback and use it to improve the course for the next time it is delivered.

### 22. HEALTHCERT ADVANCED CERTIFICATE COURSE FEES

Please ask a HealthCert Education Advisor for full details of course fees, payment plans, discounts and scholarships or go to <a href="https://www.healthcert.com">www.healthcert.com</a>.

### 23. COURSE MANAGER CONTACT DETAILS

If you have questions related to this course, contact a HealthCert Education Advisor at <a href="mailto:courses@healthcert.com">courses@healthcert.com</a>.



# Advanced Certificate of Dermoscopy



### 24. BIBLIOGRAPHY: DERMOSCOPY

Supplementary readings include:

Blum, A. (2011). Dermoscopy of Pigmented Lesions of the Mucosa and the Mucocutaneous Junction. *Archives of Dermatology*, 147(10), 1181. doi:10.1001/archdermatol.2011.155

Blum, A. (2012). Who examines the oral mucosa during the total body skin examination? *Hautarzt*, 63(11), 899-902. doi: 10.1007/s00105-012-2468-y

Blum, A. (2014). Pigmented lesion at base of tongue: mucosal melanoma or amalgam tattoo? *Hautarzt*, 65(4), 349-50. doi: 10.1007/s00105-013-2742-7

Blum, A., Kittler, H., Zalaudek, I., Simionescu, O., Marghoob, A.A., Hofmann-Wellenhof, R., Argenziano, & G., Soyer, H.P.. (2013). Unclear clinical change on the glans penis leads to different dermoscopic diagnoses. *Hautarzt*, 4(10) 768-9. doi: 10.1007/s00105-013-2664-4.

Borsari, S., Longo, C., Ferrari, C., Benati, E., Bassoli, S., Schianchi, S., Giusti, F., Cesinaro, A.M., Pellacani, G., & Seidenari, S. (2010). Dermoscopic island: a new descriptor for thin melanoma. *Arch Dermatol*, 146(11), 1257-62

Braun, R. P., Baran, R., Le Gal, F. A., Dalle, S., Ronger, S., Pandolfi, R., Gaide O, French, L.E., Laugier, P., Saurat, J.H., Marghoob, A.A., & Thomas, L. (2007). Diagnosis and management of nail pigmentations. *Journal of the American Academy of Dermatology*, *56*(5), 835-847. doi:10.1016/j.jaad.2006.12.021

Dermoscopy of mucosal lesions. (n.d.). Retrieved from http://www.uptodate.com/contents/dermoscopy-of-mucosal-lesions?source=search result&search=mucosa+dermoscopy&selectedTitle=2~150

Ferrari, A., Agozzino, M., Ardigò, M., Covello, R., Silipo, V., Moscarella, E., De Simone, P., & Catricalà, C. (2014). Dermoscopic and confocal microscopy patterns of vulvar mucosal melanotic macules. *Journal of the American Academy of Dermatology*, 70(4), e81-e82. doi:10.1016/j.jaad.2013.10.038

Ferrari, A., Buccini, P., Covello, R., De Simone, P., Silipo, V., Mariani, G., Eibenschutz, L., Mariani, L., & Catricalà, C. (2008). The Ringlike Pattern in Vulvar Melanosis. *Arch Dermatol*, 144(8). doi:10.1001/archderm.144.8.1030

Hirata, S. H., Yamada, S., Almeida, F. A., Tomomori-Yamashita, J., Enokihara, M. Y., Paschoal, F. M., Enokihara M.M., Outi C.M., & Michalany, N. S. (2005). Dermoscopy of the nail bed and matrix to assess melanonychia striata. *Journal of the American Academy of Dermatology*, *53*(5), 884-886. doi:10.1016/j.jaad.2005.07.032

Inskip, M., Longo, C., & Haddad, A. (2016). Two adjacent individual fibroepithelioma of Pinkus of the umbilicus—one pink, one pigmented—a case report and review of the literature. *Dermatol Pract Concept*, *6*(2). doi:10.5826/dpc.0602a04

Jaimes, N., Braun, R. P., Stolz, W., Busam, K. J., & Marghoob, A. A. (2011). White globules correlate with balloon cell nevi nests. *Journal of the American Academy of Dermatology*, *65*(4), e119-e120. doi:10.1016/j.jaad.2011.03.018



# Advanced Certificate of Dermoscopy



Koga, H., Saida, T., & Uhara, H. (2010). Key point in dermoscopic differentiation between early nail apparatus melanoma and benign longitudinal melanonychia. *The Journal of Dermatology*, *38*(1), 45-52. doi:10.1111/j.1346-8138.2010.01175.x

Lallas, A., Apalla, Z., Argenziano, G., Longo, C., Moscarella, E., Specchio, F., Raucci, M., & Zalaudek, I. (2014). The dermatoscopic universe of basal cell carcinoma. *Dermatol Pract Concept*, 4(3). doi:10.5826/dpc.0403a02

Lallas, A., Giacomel, J., Argenziano, G., García-García, B., González-Fernández, D., Zalaudek, I., & Vázquez-López, F. (2014). Dermoscopy in general dermatology: practical tips for the clinician. *Br J Dermatol*, 170(3), 514-526. doi:10.1111/bjd.12685

Lallas, A., Kyrgidis, A., Tzellos, T., Apalla, Z., Karakyriou, E., Karatolias, A., Lefaki I, Sotiriou, E., Ioannides, D., Argenziano, G., Zalaudek, I. (2012). Accuracy of dermoscopic criteria for the diagnosis of psoriasis, dermatitis, lichen planus and pityriasis rosea. *British Journal of Dermatology*, *166*(6), 1198-1205. doi:10.1111/j.1365-2133.2012.10868.x

Lallas, A., Moscarella, E., Longo, C., Kyrgidis, A., de Mestier, Y., Vale, G., Guida, S., Pellacani, G., Argenziano, G. (2015). Likelihood of finding melanoma when removing a Spitzoid-looking lesion in patients aged 12 years or older. *Journal of the European Academy of Dermatology*, 72(1), 47-53

Larre Borges, A., Zalaudek, I., Longo, C., Dufrechou, L., Argenziano, G., Lallas, A., Piana, S., & Moscarella, E. (2014). Melanocytic nevi with special features: clinical-dermoscopic and reflectance confocal microscopic-findings. *Journal of the European Academy of Dermatology and Venereology*, 28(7), 833-845. doi:10.1111/jdv.12291

Lesort C, Debarbieux S, Duru G, Dalle S, Poulhalon N, Thomas L. (2015). Dermoscopic Features of Onychomatricoma: A Study of 34 Cases. *Dermatology*, 231(2), 177-83.

Lesort, C., Debarbieux, S., Duru, G., Dalle, S., Poulhalon, N., & Thomas, L. (2015). Dermoscopic Features of Onychomatricoma: A Study of 34 Cases. *Dermatology*, 231(2), 177-183. doi:10.1159/000431315

Lin, J., Koga, H., Takata, M., & Saida, T. (2009). Dermoscopy of pigmented lesions on mucocutaneous junction and mucous membrane. *British Journal of Dermatology*, *161*(6), 1255-1261. doi:10.1111/j.1365-2133.2009.09251.x

Lin, M., Pan, Y., Jalilian, C., & Kelly, J. (2014). Dermoscopic characteristics of nodular squamous cell carcinoma and keratoacanthoma. *Dermatol Pract Concept*. doi:10.5826/dpc.0402a02

Mannone, F., De Giorgi, V., Cattaneo, A., Massi, D., De Magnis, A., & Carli, P. (2004). Dermoscopic Features of Mucosal Melanosis. *Dermatologic Surgery*, *30*(8), 1118-1123. doi:10.1111/j.1524-4725.2004.30337.x

Matthew J. Lin, Yan Pan, Chris Jalilian, John W. Kelly. (2014). Dermoscopic characteristics of nodular squamous cell carcinoma and keratoacanthoma. *Dermatol Pract Concept*, 4(2), 9–15. doi: 10.5826/dpc.0402a02

Phan, A., Dalle, S., Touzet, S., Ronger-Savlé, S., Balme, B., & Thomas, L. (2009). Dermoscopic features of acral lentiginous melanoma in a large series of 110 cases in a white population. *British Journal of Dermatology*, 162(4), 765-771. doi:10.1111/j.1365-2133.2009.09594.x







Ronger-Savle, S., Julien, V., Duru, G., Raudrant, D., Dalle, S., & Thomas, L. (2010). Features of pigmented vulval lesions on dermoscopy. *British Journal of Dermatology*, *164*(1), 54-61. doi:10.1111/j.1365-2133.2010.10043.x

Ronger, S., Touzet, S., Ligeron, C., Balme, B., Viallard, A. M., Barrut, D., Colin, C., & Thomas, L. (2002). Dermoscopic Examination of Nail Pigmentation. *Arch Dermatol*, *138*(10), 1327-1333. doi:10.1001/archderm.138.10.1327

Rosendahl, C., Cameron, A., Tschandl, P., Bulinska, A., Zalaudek, I., & Kittler, H. (2014). Prediction without Pigment: a decision algorithm for non-pigmented skin malignancy. *Dermatol Pract Concept*. doi:10.5826/dpc.0401a09

Squillace, L., Cappello, M., Longo, C., Moscarella, E., Alfano, R., & Argenziano, G. (2016). Unusual Dermoscopic Patterns of Seborrheic Keratosis. *Dermatology*, 232(2), 198-202. doi: 10.1159/000442439

Tosti, A., Schneider, S. L., Ramirez-Quizon, M. N., Zaiac, M., & Miteva, M. (2016). Clinical, dermoscopic, and pathologic features of onychopapilloma: A review of 47 cases. *Journal of the American Academy of Dermatology*, 74(3), 521-526. doi:10.1016/j.jaad.2015.08.053

Zalaudek, I., Kreusch, J., Giacomel, J., Ferrara, G., Catricalà, C., & Argenziano, G. (2010). How to diagnose nonpigmented skin tumours: a review of vascular structures seen with dermoscopy: part II. Nonmelanocytic skin tumours. *Journal of the American Academy of Dermatology*, 63(3), 377-86; quiz 387-8. doi: 10.1016/j.jaad.2009.11.697

Zalaudek, I., Kreusch, J., Giacomel, J., Ferrara, G., Catricalà, C., & Argenziano, G. (2010). How to diagnose nonpigmented skin tumours: a review of vascular structures seen with dermoscopy: part I. Melanocytic skin tumours. *Journal of the American Academy of Dermatology*, 63(3), 361-74; quiz 375-6. doi: 10.1016/j.jaad.2009.11.698

Zalaudek, I., Lallas, A., Moscarella, E., Longo, C., Soyer, H. P., & Argenziano, G. (2013). The dermatologist's stethoscope—traditional and new applications of dermoscopy. *Dermatology Practical & Conceptual*, *3*(2), 67-71. doi:10.5826/dpc.0302a11

Version number	Version date	Authorised officer	Amendment details
1	9/11/2017	C Guyler	Added this table to track amendments.

All changes must be approved by the Head of Course Development/Curriculum.