

What is mole mapping?

Mole mapping is a screening service that may be offered to patients at risk of, or concerned about skin cancer. People at increased risk of skin cancer include those with;

- A history of considerable exposure to Ultraviolet (UV) rays (as a result of living abroad, working outdoors or indoor tanning)
- A large number of moles (>50) or irregular or large moles (atypical moles)
- Fair skin or light/red hair
- A family history or personal history of skin cancer
- A history of immunosuppression or particular genetic conditions.

Mole mapping aims to identify new moles as well as changes in existing moles over time. It is especially useful for surveillance of large numbers of moles.

Mole mapping is used as a digital aid to clinical examination by your Consultant Dermatologist and does not provide a diagnosis in itself.

How does mole mapping work?

You will first attend a consultation with a Consultant Dermatologist. Risk factors for skin cancer will be identified and a full skin check will be carried out to identify any suspicious lesions.

If any lesions need to be urgently removed, we will discuss this with you and arrange the procedure. If mole mapping would be beneficial, we can book this for you; this will require you to sign a photographic consent form.

A series of standardised photos (mapping images) and digital dermoscopy images (close up images of suspicious moles or ones highlighted for monitoring by your dermatologist) will be taken to generate a total body mole map of your skin.

The mole mapping scans are completed in approximately 15 minutes. The entire process will take up to 30 minutes to allow time for more detailed images of specific moles as required.

We will offer repeat screening at intervals usually of 6 to 12 months. At follow-up screenings your previously securely stored photographs are used as a baseline to detect any new or changing moles. For follow-up visits you will have your mole mapping first and then see the Consultant Dermatologist afterwards.

How should I prepare for mole mapping?

If there are any moles your Consultant is concerned about they will have marked these and photographed them in your consultation. Please bring this photograph with you to the screening to ensure that the identified moles can be analysed using the photo-dermatoscope.

You will need to undress to your underwear. Women may choose to wear a bra depending on whether they want to have the upper torso fully monitored by digital mole mapping. A chaperone will be available if you wish.

Please take note of the following in preparation for mole mapping;

- Please wear similar underwear for subsequent mole mapping sessions as areas covered by underwear will not be monitored by digital mole mapping
- Please shave if you have moles in hairy areas as the hair will prevent us from obtaining accurate photos of your moles
- Make-up and nail polish should be removed prior to mole mapping; you may bring make-up with you should you wish to reapply it after the procedure
- All jewellery will need to be removed before the mole mapping session
- Long hair will need to be tied up during the screening so please bring a hair band or hair clip

- Mole mapping cannot be carried out when you have a rash, prominent tan lines or have applied fake tan as these may make the images more difficult to interpret
- Please let us know if you have new tattoos.

What happens next?

The images generated from the mole mapping will be interpreted by your Consultant and we will give you a detailed report including a copy of the images. Please continue to monitor any changes to your moles between appointments. If you have any concerns between appointments please contact your Clinical Nurse Specialist or Consultant who can provide you with advice.

Contact details

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Tel: 020 7808 2850

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Monday to Friday: 9am – 1pm and 2pm – 5pm

Sutton: Medical Photography, Ground Floor, West Wing

Tel: 020 8642 6100 ext 1296

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Skin and Melanoma Clinical Nurse Specialists

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References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre

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No conflicts of interest were declared in the production of this booklet.

Should you require information in an alternative format, please contact The Royal Marsden Help Centre.

