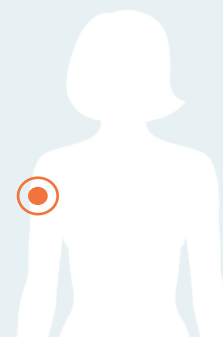


> Stage 1A (T1a) melanoma: Thin tumor-low risk?

CASE CONTRIBUTED BY: MEDICAL ONCOLOGIST | KS

PATIENT FINDINGS

- 34-year-old female
- Invasive malignant melanoma on the arm
- 0.6 mm Breslow depth
- No ulceration
- No evidence of mitoses
- No TILs present
- No satellitosis
- Clark Level III



PRE DECISIONDX-MELANOMA MANAGEMENT PLAN

Based on AJCC staging and NCCN guidelines, this patient would have been considered low risk and would not have been eligible for a SLNB. The recommended treatment plan would have been H&P every 6-12 months for 5 years, then annually.

RATIONALE FOR ORDERING DECISIONDX-MELANOMA

Due to the patient's age and Breslow depth being on the thicker side for a thin melanoma, the Moh's surgeon wanted additional guidance on the management plan for this patient.



GEP RESULT / CHANGE IN MANAGEMENT

Class 2B | Highest biological risk

At the time of this patient's case the i31-ROR and i31-SLNB scores were unavailable

The patient was referred to the medical oncologist for high-intensity surveillance (CT scans every six months).

Clinical impact and outcome

- During the patient's six-month scan, a metastasis to the lung was identified. The biopsy showed it was a proven oligomet that was BRAF negative.
- The patient was treated with radiotherapy to the lung and started on combination therapy.
- The patient is doing well with clear scans at more than six years.