

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Guideline scope

Skin tumours including melanoma (update)

This guideline will update and combine the NICE guideline on melanoma: assessment and management (NG14) and the 2 NICE cancer service guidelines – improving outcomes for people with skin tumours including melanoma (update): the management of low-risk basal cell carcinomas in the community (2010), and improving outcomes for people with skin tumours including melanoma: the manual (2006) (CSG8).

The guideline will be developed using the methods and processes outlined in [developing NICE guidelines: the manual](#).

This guideline will also be used to update the [NICE quality standard for skin cancer](#).

1 Why the update is needed

New evidence that could affect recommendations was identified through the surveillance process. Topic experts, including those who helped to develop the existing guidelines, advised NICE on whether areas should be updated or new areas added. Full details are set out in the [surveillance review decision](#).

As part of the scoping process, NICE has identified additional areas not included in the surveillance report, for which the evidence needs to be reviewed:

- Sentinel lymph node biopsy for people with stage III melanoma.
- Body imaging for the follow-up of people with stage III melanoma.
- Follow-up of people with stage IV melanoma.

1 ***Why the guideline is needed***

2 **Key facts and figures**

3 The 3 most common types of skin cancer are basal cell carcinoma, squamous
4 cell carcinoma and melanoma.

5 Non-melanoma skin cancers (squamous cell carcinoma and basal cell
6 carcinoma) are the most common types of skin cancer: around 147,000 cases
7 are diagnosed in the UK each year. The UK incidence of non-melanoma skin
8 cancer has increased by around two-thirds (65%) over the last decade. It is
9 usually less complex to treat than melanoma, with most people being
10 completely cured. About 75% of all non-melanoma skin cancers in the UK are
11 basal cell carcinoma, which, although rarely fatal, should be diagnosed and
12 treated early to ensure that important anatomical structures (such as the nose,
13 eye, ear and lip) are not damaged. About 23% of all non-melanoma skin
14 cancers in the UK are squamous cell carcinoma, which can be both disfiguring
15 and fatal if it spreads.

16 Melanoma is the third most common skin cancer in the UK. It accounts for
17 more cancer deaths than all other skin cancers combined. In 2016, there were
18 16,374 new cases of melanoma and 2,209 deaths from melanoma. The UK
19 incidence of melanoma skin cancer has increased by almost half (45%) over
20 the last decade.

21 **Current practice**

22 For non-melanoma skin cancer, surgical excision of the cancer along with
23 surrounding healthy tissue is the current main treatment. Non-surgical
24 treatments include cryotherapy, anti-cancer creams, photodynamic
25 therapy, radiotherapy and electrochemotherapy.

26 The treatment for melanoma depends on the stage of the cancer, which is
27 determined following assessment and staging investigations including sentinel
28 lymph node biopsy and imaging. Treatments include surgical excision,
29 imiquimod cream, completion lymphadenectomy, lymph node dissection,
30 targeted treatments, immunotherapy, chemotherapy and radiotherapy.

1 Regular follow-ups after treatment check for local recurrence, spread to other
2 parts of the body and new primary melanomas.

3 Since the publication of the existing NICE guideline on melanoma:
4 assessment and management (NG14), the 8th edition of the [American Joint](#)
5 [Committee on Cancer \(AJCC\)](#) staging system for melanoma has been
6 published.

7 **Policy, legislation, regulation and commissioning**

8 The [NHS long term plan for cancer](#) is committed to improving cancer
9 outcomes and services in England over the next 10 years. Its key ambitions
10 include increasing the proportion of cancers diagnosed at stages 1 and 2, and
11 for more people each year to survive their cancer for at least 5 years after
12 diagnosis. The NHS also sets out the ambition for all people with suspected
13 cancer to have a diagnosis within 28 days of first seeing a doctor with
14 symptoms.

15 **2 Who the guideline is for**

16 This guideline is for:

- 17 • healthcare professionals in primary, secondary and tertiary care
- 18 • commissioners and providers of NHS-funded healthcare services
- 19 • people with skin cancer and their families and carers.

20 It may also be relevant to:

- 21 • providers of private healthcare services.

22 NICE guidelines cover health and care in England. Decisions on how they
23 apply in other UK countries are made by ministers in the [Welsh Government](#),
24 [Scottish Government](#) and [Northern Ireland Executive](#).

25 ***Equality considerations***

26 NICE has carried out [an equality impact assessment](#) during scoping. The
27 assessment:

- 1 • lists equality issues identified, and how they have been addressed
- 2 • explains why any groups are excluded from the scope.

3 **3 What the updated guideline will cover**

4 **3.1 Who is the focus?**

5 **Groups that will be covered**

- 6 • People with skin cancer (melanoma, cutaneous squamous cell carcinoma
- 7 and basal cell carcinoma).
- 8 • People with diagnosed cutaneous melanoma. (Note that although for most
- 9 melanoma cases it will be clear whether they arose from mucosal or
- 10 cutaneous sites, for some it may be unclear.)

11 Specific consideration will be given to:

- 12 • Pregnant women.
- 13 • People with a compromised immune system.

14 **Groups that will not be covered**

- 15 • People with primary ocular melanoma.
- 16 • People with melanoma or squamous cell carcinoma arising from mucosal
- 17 sites.
- 18 • People with skin cancer other than melanoma, cutaneous squamous cell
- 19 carcinoma or basal cell carcinoma.

20 **3.2 Settings**

21 **Settings that will be covered**

22 All settings where NHS-funded care is provided.

1 **3.3 Activities, services or aspects of care**

2 **Key areas that will be covered in this update**

3 We will look at evidence in the areas below when developing this update. We
4 will consider making new recommendations or updating existing
5 recommendations in these areas only.

6 ***Improving outcomes for people with skin tumours including melanoma***

7 We will retain or remove current recommendations.

8 ***Melanoma***

9 1 Assessing melanoma

- 10 – Genetic testing in early-stage melanoma

11 2 Staging investigations

- 12 – Sentinel lymph node biopsy
- 13 – Imaging

14 3 Managing stage III melanoma

- 15 – Completion lymphadenectomy
- 16 – Lymph node dissection
- 17 – Sentinel lymph node biopsy
- 18 – Adjunctive systemic therapy (cross reference to NICE Pathway)

19 4 Managing stage IV (and unresectable stage III) melanoma

- 20 – Systemic anticancer treatment
- 21 – Neoadjuvantive treatment

22 5 Follow-up after treatment for melanoma

- 23 – Follow-up for all people who have had melanoma
- 24 – Follow-up after stage IIC melanoma with no sentinel lymph node
25 biopsy or stage III melanoma
- 26 – Follow-up of stage IV melanoma

27

28 Note that guideline recommendations for medicines will normally fall within
29 licensed indications; exceptionally, and only if clearly supported by evidence,
30 use outside a licensed indication may be recommended. The guideline will

- 1 assume that prescribers will use a medicine's summary of product
 2 characteristics to inform decisions made with individual patients.

3 **Proposed outline for the guideline**

- 4 The table below outlines all the areas that will be included in the guideline. It
 5 sets out what NICE plans to do for each area in this update.

Area of care	What NICE plans to do
Improving outcomes for people with skin tumours including melanoma: the manual (NICE cancer service guideline CSG8, published February 2006)	
Patient-centred care	
Putting patient and carer needs at the centre of service design	No evidence review: retain or remove recommendations from existing guideline
Communication, information provision and support	No evidence review: retain or remove recommendations from existing guideline
Support for patients needing extensive treatment	No evidence review: retain or remove recommendations from existing guideline
Research	No evidence review: retain or remove recommendations from existing guideline
Quality assurance	No evidence review: retain or remove recommendations from existing guideline
Organisation of skin cancer services	
Cancer networks	No evidence review: retain or remove recommendations from existing guideline
Arrangements for skin cancer teams	No evidence review: retain or remove recommendations from existing guideline
Coordination across teams	No evidence review: retain or remove recommendations from existing guideline
Patient information	No evidence review: retain or remove recommendations from existing guideline
The local hospital skin cancer multidisciplinary team (LSMDT)	No evidence review: retain or remove recommendations from existing guideline
The role of the LSMDT	No evidence review: retain or remove recommendations from existing guideline

The specialist skin cancer multidisciplinary team (SSMDT)	No evidence review: retain or remove recommendations from existing guideline
The role of the SSMDT	No evidence review: retain or remove recommendations from existing guideline
Organisation of LSMDT and SSMDT meetings	No evidence review: retain or remove recommendations from existing guideline
Clinicians working in the community	No evidence review: retain or remove recommendations from existing guideline
Initial investigation, diagnosis, staging and management	
Investigation and diagnosis	No evidence review: retain or remove recommendations from existing guideline
Management of precancerous lesions	No evidence review: retain or remove recommendations from existing guideline
Management of skin cancers	No evidence review: retain or remove recommendations from existing guideline
Follow-up	
Basal cell carcinoma and squamous cell carcinoma	No evidence review: retain or remove recommendations from existing guideline
Melanoma	Recommendations to be replaced by update of melanoma (NICE guideline NG14)
Management of special groups	
Generic recommendations for patients with uncommon risk factors or rare cancers	No evidence review: retain or remove recommendations from existing guideline
Genetic predisposition	No evidence review: retain or remove recommendations from existing guideline
Transplant patients	No evidence review: retain or remove recommendations from existing guideline
Cutaneous lymphoma	No evidence review: retain or remove recommendations from existing guideline
Skin sarcomas	No evidence review: retain or remove recommendations from existing guideline
Improving outcomes for people with skin tumours including melanoma (update): the management of low-risk basal cell carcinomas in the community (NICE cancer service guideline CSG8, updated May 2010)	
Training, education and accreditation	

Training, education and accreditation	No evidence review: retain or remove recommendations from existing guideline
Commissioning	
Commissioning	No evidence review: retain or remove recommendations from existing guideline
Superficial basal cell carcinomas	
Superficial basal cell carcinomas	No evidence review: retain or remove recommendations from existing guideline
Models of care	
Models of care	No evidence review: retain or remove recommendations from existing guideline
Low-risk basal cell carcinomas for Directed Enhanced Services (DES) framework or Local Enhanced Services (LES)	No evidence review: retain or remove recommendations from existing guideline
Model 1 practitioners	No evidence review: retain or remove recommendations from existing guideline

Model 2 practitioners	No evidence review: retain or remove recommendations from existing guideline
Overlap between model 1 ('group 3 GPwSI [GP with a specialist interest] in dermatology and skin surgery') and model 2 practitioners	No evidence review: retain or remove recommendations from existing guideline
Hospital specialists working in the community	No evidence review: retain or remove recommendations from existing guideline
Quality assurance	
Histopathology	No evidence review: retain or remove recommendations from existing guideline
Data collection and audit	No evidence review: retain or remove recommendations from existing guideline
Clinical governance	
Clinical governance	No evidence review: retain or remove recommendations from existing guideline
Communication	
Communication	No evidence review: retain or remove recommendations from existing guideline
Melanoma (NICE guideline NG14, published July 2015)	
1.1 Communication and support	
Communication and support	No evidence review: retain recommendations from existing guideline
1.2 Assessing melanoma	
Dermoscopy and other visualisation techniques	No evidence review: retain recommendations from existing guideline
Photography	No evidence review: retain recommendations from existing guideline
Assessing and managing atypical spitzoid lesions	No evidence review: retain recommendations from existing guideline
Taking tumour samples for genetic testing	No evidence review: retain recommendations from existing guideline
Genetic testing in early-stage melanoma	Review evidence: update existing recommendations 1.2.9 and 1.2.10 as needed
1.3 Managing suboptimal vitamin D levels	

Managing suboptimal vitamin D levels	No evidence review: retain recommendations from existing guideline
1.4 Managing concurrent drug treatment	
Managing concurrent drug treatment	No evidence review: retain recommendations from existing guideline
1.5 Staging investigations	
Sentinel lymph node biopsy	Review evidence: update existing recommendations 1.5.1 and 1.5.2 as needed
Imaging	Review evidence: update existing recommendations 1.5.3 - 1.5.5 as needed
1.6 Managing stages 0 to II melanoma	
Excision	No evidence review: retain recommendations from existing guideline
Imiquimod for stage 0 melanoma	No evidence review: retain recommendations from existing guideline
1.7 Managing stage III melanoma	
Completion lymphadenectomy	Review evidence: update existing recommendation 1.7.1 as needed
Lymph node dissection	Review evidence: update existing recommendation 1.7.2 as needed
Sentinel lymph node biopsy	Review evidence: new area in the guideline
Adjuvant radiotherapy	No evidence review: retain recommendations from existing guideline
Adjunctive systemic therapy	No evidence review: a link to the NICE Pathway where technology appraisals appear will be added
Palliative treatment for in-transit metastases	No evidence review: retain recommendations from existing guideline
Palliative treatment for superficial skin metastases	No evidence review: retain recommendations from existing guideline
1.8 Managing stage IV melanoma	
Management of oligometastatic stage IV melanoma	No evidence review: retain recommendations from existing guideline
Brain metastases	No evidence review: retain recommendations from existing guideline

Systemic anticancer treatment – targeted treatments	<p>Review evidence: update existing recommendations 1.8.5 and 1.8.6 as needed</p> <p>For the update of section 1.8 of Melanoma (NICE guideline NG14, published July 2015), current NICE technology appraisal recommendations will be sequenced within the clinical context</p> <p>A link to the NICE Pathway where technology appraisals appear will be added where relevant</p>
Systemic anticancer treatment – immunotherapy	<p>Review evidence: update existing recommendation 1.8.7 as needed</p> <p>For the update of section 1.8 of Melanoma (NICE guideline NG14, published July 2015), current NICE technology appraisal recommendations will be sequenced within the clinical context</p> <p>A link to the NICE Pathway where technology appraisals appear will be added where relevant</p>
Systemic anticancer treatment – cytotoxic chemotherapy	<p>Review evidence: update existing recommendations 1.8.8 and 1.8.9 as needed</p> <p>A link to the NICE Pathway where technology appraisals appear will be added</p>
Neoadjuvantive treatment	<p>Review evidence: new area in the guideline</p> <p>For the update of section 1.8 of Melanoma (NICE guideline NG14, published July 2015), current NICE technology appraisal recommendations will be sequenced within the clinical context</p>
1.9 Follow-up after treatment for melanoma	
Follow-up for all people who have had melanoma	<p>Review evidence: update existing recommendations 1.9.1 to 1.9.9 as needed</p> <p>Refer to the NICE guideline on brain tumours (primary) and brain metastases in adults (NG99)</p>
Follow-up after stage 0 melanoma	No evidence review: retain recommendations from existing guideline
Follow-up after stage 1A melanoma	No evidence review: retain recommendations from existing guideline

Follow-up after stages IB to IIB melanoma or stage IIC melanoma (fully staged using sentinel lymph node biopsy)	No evidence review: retain recommendations from existing guideline
Follow-up after stage IIC melanoma with no sentinel lymph node biopsy or stage III melanoma	Review evidence for body imaging: update existing recommendation 1.9.16 as needed No evidence review: retain recommendation 1.9.15 from existing guideline
Follow-up after stage IV melanoma	Review evidence: update existing recommendation 1.9.17 as needed

1

2 Recommendations in areas that are being retained from the existing
3 guidelines may be edited to ensure that they meet current editorial standards,
4 and reflect the current policy and practice context.

5 **Areas that will not be covered by the guideline**

- 6 1 Referral from primary care for people with suspected skin cancer. This is
7 covered by the [NICE guideline on suspected cancer: recognition and](#)
8 [referral](#) (NG12).
- 9 2 Awareness and prevention of melanoma, squamous cell carcinoma and
10 basal cell carcinoma. This is covered by the [NICE guidelines on skin](#)
11 [cancer prevention](#) (PH32) and [sunlight exposure: risk and benefits](#)
12 (NG34).
- 13 3 End of life care. This is covered by the [NICE guideline on care of dying](#)
14 [adults in the last days of life](#) (NG31).
- 15 4 Complementary therapies for the treatment of melanoma.
- 16 5 Management of squamous cell carcinoma and basal cell carcinoma. This
17 is covered by NICE-accredited guidelines from the British Association of
18 Dermatologists on squamous cell carcinoma and basal cell carcinoma.
- 19 6 Assessment and management of skin tumours and cancers other than
20 cutaneous melanoma.

1 **Related NICE guidance**

2 ***Published***

- 3 • [Surgical site infections: prevention and treatment](#) (2019) NICE guideline
4 NG125
- 5 • [Cemiplimab for treating metastatic or locally advanced cutaneous](#)
6 [squamous cell carcinoma](#) (2019) NICE technology appraisal guidance 592
- 7 • [Brentuximab vedotin for treating CD30-positive cutaneous T-cell lymphoma](#)
8 (2019) NICE technology appraisal guidance 577
- 9 • [Encorafenib with binimetinib for unresectable or metastatic BRAF V600](#)
10 [mutation-positive melanoma](#) (2019) NICE technology appraisal guidance
11 562
- 12 • [Nivolumab for adjuvant treatment of completely resected melanoma with](#)
13 [lymph node involvement or metastatic disease](#) (2019) NICE technology
14 appraisal guidance 558
- 15 • [Brain tumours \(primary\) and brain metastases in adults](#) (2018) NICE
16 guideline NG99
- 17 • [Pembrolizumab for adjuvant treatment of resected melanoma with high risk](#)
18 [of recurrence](#) (2018) NICE technology appraisal guidance 553
- 19 • [Dabrafenib with trametinib for adjuvant treatment of resected BRAF V600](#)
20 [mutation-positive malignant melanoma](#) (2018) NICE technology appraisal
21 guidance 544
- 22 • [Avelumab for treating metastatic Merkel cell carcinoma](#) (2018) NICE
23 technology appraisal guidance 517
- 24 • [Nivolumab for treating squamous cell carcinoma of the head and neck after](#)
25 [platinum-based chemotherapy](#) (2017) NICE technology appraisal guidance
26 490
- 27 • [Vismodegib for treating basal cell carcinoma](#) (2017) NICE technology
28 appraisal guidance 489
- 29 • [Cetuximab for treating recurrent or metastatic squamous cell cancer of the](#)
30 [head and neck](#) (2017) NICE technology appraisal guidance 473
- 31 • [Routine perioperative tests for elective surgery](#) (2016) NICE guideline
32 NG45

- 1 • [Sunlight exposure: risks and benefits](#) (2016) NICE guideline NG34
- 2 • [Cobimetinib in combination with vemurafenib for treating unresectable or](#)
- 3 [metastatic BRAF V600 mutation-positive melanoma](#) (2016) NICE
- 4 technology appraisal guidance 414
- 5 • [Talimogene laherparepvec for treating unresectable metastatic melanoma](#)
- 6 (2016) NICE technology appraisal guidance 410
- 7 • [Nivolumab in combination with ipilimumab for treating advanced melanoma](#)
- 8 (2016) NICE technology appraisal guidance 400
- 9 • [Trametinib in combination with dabrafenib for treating unresectable or](#)
- 10 [metastatic melanoma](#) (2016) NICE technology appraisal guidance 396
- 11 • [Nivolumab for treating advanced \(unresectable or metastatic\) melanoma](#)
- 12 (2016) NICE technology appraisal guidance 384
- 13 • [Suspected cancer: recognition and referral](#) (2015) NICE guideline NG12
- 14 • [Pembrolizumab for advanced melanoma not previously treated with](#)
- 15 [ipilimumab](#) (2015) NICE technology appraisal guidance 366
- 16 • [Pembrolizumab for treating advanced melanoma after disease progression](#)
- 17 [with ipilimumab](#) (2015) NICE technology appraisal guidance 357
- 18 • [VivaScope 1500 and 3000 imaging systems for detecting skin cancer](#)
- 19 [lesions](#) (2015) NICE diagnostics guidance 19
- 20 • [Vitamin D: supplement use in specific population groups](#) (2014) NICE
- 21 guideline PH56
- 22 • [Electrochemotherapy for primary basal cell carcinoma and primary](#)
- 23 [squamous cell carcinoma](#) (2014) NICE interventional procedures guidance
- 24 478
- 25 • [Dabrafenib for treating unresectable or metastatic BRAF V600](#)
- 26 [mutation-positive melanoma](#) (2014) NICE technology appraisal guidance
- 27 321
- 28 • [Ipilimumab for previously untreated advanced \(unresectable or metastatic\)](#)
- 29 [melanoma](#) (2014) NICE technology appraisal guidance 319
- 30 • [Electrochemotherapy for metastases in the skin from tumours of non-skin](#)
- 31 [origin and melanoma](#) (2013) NICE interventional procedures guidance 446
- 32 • [Psoriasis: assessment and management](#) (2012) NICE guideline CG153

- 1 • [Neutropenic sepsis: prevention and management in people with cancer](#)
2 (2012) NICE guideline CG151
- 3 • [Palliative care for adults: strong opioids for pain relief](#) (2012) NICE
4 guideline CG140
- 5 • [Vemurafenib for treating locally advanced or metastatic BRAF V600](#)
6 [mutation-positive malignant melanoma](#) (2012) NICE technology appraisal
7 guidance 269
- 8 • [Ipilimumab for previously treated advanced \(unresectable or metastatic\)](#)
9 [melanoma](#) (2012) NICE technology appraisal guidance 268
- 10 • [Skin cancer prevention](#) (2011) NICE guideline PH32
- 11 • [Endoscopic radical inguinal lymphadenectomy](#) (2011) NICE interventional
12 procedures guidance 398
- 13 • [Metastatic malignant disease of unknown primary origin in adults: diagnosis](#)
14 [and management](#) (2010) NICE guideline CG104
- 15 • [Photodynamic therapy for non-melanoma skin tumours \(including](#)
16 [pre-malignant and primary non-metastatic skin lesions\)](#) (2006) NICE
17 interventional procedures guidance 155
- 18 • [Improving outcomes in children and young people with cancer](#) (2005) NICE
19 guideline CSG7
- 20 • [Improving supportive and palliative care for adults with cancer](#) (2004) NICE
21 guideline CSG4

22 ***In development***

- 23 • [Shared decision making](#). NICE guideline. Publication expected April 2021.
- 24 • [Babies, children and young people's experience of healthcare](#). NICE
25 guideline. Publication expected April 2021.
- 26 • [Carotuximab with pazopanib for treating advanced angiosarcoma](#). NICE
27 technology appraisal guidance. Publication date to be confirmed.
- 28 • [Relatlimab with nivolumab for treating advanced malignant melanoma after](#)
29 [immunotherapy in people over 12](#). NICE technology appraisal guidance.
30 Publication date to be confirmed.

- 1 • [Nivolumab with ipilimumab for adjuvant treatment of completely resected](#)
2 [stage III or IV melanoma](#). NICE technology appraisal guidance. Publication
3 date to be confirmed.
- 4 • [Atezolizumab with cobimetinib and vemurafenib for treating unresectable or](#)
5 [metastatic BRAF V600 mutation-positive melanoma](#). NICE technology
6 appraisal guidance. Publication date to be confirmed.

7 ***NICE guidance that will be updated by this guideline***

- 8 • [Melanoma: assessment and management](#) (2015) NICE guideline NG14
- 9 • [Improving outcomes for people with skin tumours including melanoma](#)
10 [\(update\): the management of low-risk basal cell carcinomas in the](#)
11 [community](#) (2010) NICE guideline CSG8
- 12 • [Improving outcomes for people with skin tumours including melanoma: the](#)
13 [manual](#) (2006) NICE guideline CSG8

14 **NICE guidance about the experience of people using NHS services**

15 NICE has produced the following guidance on the experience of people using
16 the NHS. This guideline will not include additional recommendations on these
17 topics unless there are specific issues related to skin cancer including
18 melanoma:

- 19 • [Medicines optimisation](#) (2015) NICE guideline NG5
- 20 • [Patient experience in adult NHS services](#) (2012) NICE guideline CG138
- 21 • [Medicines adherence](#) (2009) NICE guideline CG76

22 **3.4 Economic aspects**

23 We will take economic aspects into account when making recommendations.
24 We will develop an economic plan that states for each review question (or key
25 area in the scope) whether economic considerations are relevant, and if so
26 whether this is an area that should be prioritised for economic modelling and
27 analysis. We will review the economic evidence and carry out economic
28 analyses, using an NHS, public sector and other perspectives, as appropriate.

1 **3.5 Key issues and draft questions**

2 While writing the scope for this updated guideline, we have identified the
3 following key issues and draft questions related to them:

4 **Melanoma**

5 1 Assessing melanoma

6 1.1 What is the role and optimal timing of genetic testing of the tumour
7 after diagnosis for a person with stage IIC to III melanoma?

8 2 Staging investigations

9 2.1 What is the most accurate method of staging melanoma in people
10 preliminarily assigned:

11 (a) clinicopathological stage IA melanoma?

12 (b) clinicopathological stage IB to IIC melanoma (including, but not
13 limited to, sentinel lymph node biopsy)?

14 (c) clinicopathological stage III melanoma?

15 (d) clinicopathological stage IV melanoma?

16 3 Managing stage III melanoma

17 3.1 What is the most effective surgical treatment for stage III melanoma?

18 3.2 What is the utility of sentinel lymph node biopsy for people with
19 stage III melanoma and micro-satellite lesions?

20 4 Managing stage IV (and unresectable stage III) melanoma

21 4.1 What is the most effective systemic and localised anticancer
22 treatment for people with stage IV (and unresectable stage III)
23 melanoma? [Current NICE technology appraisal recommendations will
24 be sequenced within the clinical context]

25 4.2 What is the most effective neoadjuvant treatment before definitive
26 treatment for people with stage IV (and unresectable stage III)
27 melanoma?

28 5 Follow-up after treatment for melanoma

29 5.1 After treatment with curative intent for melanoma, what is the optimal
30 method, frequency, setting and duration of follow-up?

31 5.2 What is the effectiveness of body imaging for the follow-up of people
32 with stage IIC (with no sentinel lymph node biopsy) and stage III
33 melanoma, including the optimal frequency and duration?

1 5.3 Should brain imaging be included for people with melanoma who are
2 undergoing body imaging as part of follow-up, and who have no
3 neurological signs or symptoms?

4 5.5 What is the effectiveness of body imaging for the follow-up of people
5 with stage IV (and unresectable stage III) melanoma after concluding
6 treatment, including the optimal frequency and duration?

7
8 The key issues and draft questions will be used to develop more detailed
9 review questions, which guide the systematic review of the literature.

10 **3.6 Main outcomes**

11 The main outcomes that may be considered when searching for and
12 assessing the evidence are:

- 13 • survival and mortality
- 14 • health-related quality of life
- 15 • recurrence and time to recurrence
- 16 • skin cancer-related morbidity
- 17 • adverse events
- 18 • number and length of admissions to hospital after diagnosis.

19 **4 NICE quality standards and NICE Pathways**

20 **4.1 NICE quality standards**

21 **NICE quality standards that may need to be revised or updated when**
22 **this guideline is published**

- 23 • [Skin cancer](#) (2016) NICE quality standard 130.

24 **4.2 NICE Pathways**

25 When this guideline is published, we will update the existing [NICE Pathways](#)
26 [on skin cancer](#) and [melanoma](#). NICE Pathways bring together everything
27 NICE has said on a topic in an interactive flowchart.

1 **5 Further information**

This is the draft scope for consultation with registered stakeholders. The consultation dates are 14 January to 11 February 2020.

The guideline is expected to be published in March 2022.

You can follow progress of the [guideline](#).

Our website has information about how [NICE guidelines](#) are developed.

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