

## **Getting started with using a Dermatoscope TOP TIPS**

### **1. Which dermatoscope to use?**

There are 3 types of dermatoscope. Deciding which instrument to use is personal preference, and it may be helpful to try out different devices. All devices contain **rechargeable** batteries.

#### **i. Contact non-polarised light (classic dermoscopy)**

- Pros
  - Long established devices
  - Good image quality
  - Stable device for camera attachment
- Cons
  - Requires use of contact fluid on the skin which can be time consuming and messy
  - Risk of cross infection

#### **ii. Non-contact polarised light**

- Pros
  - Smaller pocket size
  - Can be used quickly to examine multiple lesions on the skin
  - No contact fluid needed on the skin
  - Low risk of cross infection
- Cons
  - Inferior image quality

#### **iii. Hybrid (has both contact and non-contact ability, and non-polarised and polarised light options)**

- Pros
  - Combines ability to screen multiple lesions quickly using polarised mode and better image quality of contact devices.
  - Very practical device in primary care setting
- Cons
  - Although it can be used in non-contact mode without a contact fluid, image clarity is superior with direct contact and contact fluid.

There are many different devices available and further information can be found at:

- [Primary Care Dermatology Society \(PCDS\)](#)
- [Dermnet NZ](#)
- [Dermoscopy.co.uk](#)

Primary Healthcare professionals considering purchasing a Dermatoscope may wish to approach their Clinical Commissioning Group (CCG), who may be able to advise and support.

#### **iv. Gloucestershire Clinical Commissioning Group**

- [Gloucestershire Clinical Commissioning Group](#) have produced a helpful video on ['What is a Dermatoscope and how to use it'](#).

Primary Healthcare professionals considering purchasing a Dermatoscope may wish to approach their Clinical Commissioning Group (CCG), who may be able to advise and support.

## 2. **Other Equipment**

### i. **Contact fluid**

- Alcohol Hand Gel or sterets recommended except around eyes and nails (reduces risk of cross infection, and can be used to clean device between patients)
- KY Jelly (viscous gel) for examining lesions on nail folds

### ii. **Disposable endplates** are the gold standard when examining **bleeding lesions**. An alternative option to consider if your device doesn't have this option is **Clingfilm** which is applied over the endplate.

### iii. **Camera and Camera attachments (to enable photography of lesions examined)**

- Either Digital camera with adaptor kit to attach to dermatoscope or
- Smartphone adaptor kit to attach dermatoscope directly to a smartphone/mobile device\*.

### iv. **Software**

Any photos taken will need to be attached to the patient record in the clinical system. Software can be used to resize files of images taken with digital cameras so that they can readily be uploaded/viewed within the electronic medical record. File sizes of images taken on mobile devices can be resized during the process of secure image transfer using an NHS.net account\*.

\*Refer to **Top Tips: Using personal mobile devices to take photos** for guidance on using personal mobile devices in Dermatology.