

Arizona Telemedicine Program

Dermatology Camera Lab Notes
May 10- 11, 2000

Still photography of skin lesions:

Below are some guidelines for taking static images using the digital camera.

- Use a solid, neutral color as a background (medium tone gray or blue).
- Avoid shots that are "back lit" (e.g., patient in front of bright window or against bright background). Backlighting tends to produce underexposure of the intended subject. The goal is to avoid extremes of dark and light in a frame to maintain the correct exposure.
- Avoid "cluttered" backgrounds that tend to be distracting.
- Optimally, dermatological shots should be taken in good, bright, indirect ambient light. If the flash option is set on automatic, the camera will determine whether or not the existing light is adequate. If it is not, the flash will compensate. (An exception to this is when taking scalp shots of patients with dark brown or black hair. A flash should NOT be used in this instance due to problems with reflection).
- Start with images from further away to assist in orientation and then take shots closer to the actual lesions (e.g., full face - cheek; anterior trunk - abdomen; total length of arm - antecubital fossa). If lesions are present in different locations, include shots of each area.
- **The closest distance for taking any photograph is 6 inches.**
- If the lesion is fairly large and raised, include views from the side to demonstrate depth/dimension .
- Include lesions in various stages of "evolution" if they are present.
- Images that are blurry, over- or underexposed, or that do not include the subject in the frame are unsuitable for evaluation.
- If you cannot see a lesion on physical exam we will probably not be able to see it in a photograph.
- Label the location of close-up images in your case to assist the teleconsultant in orientation.

The goal is obtain a series of high quality images that when combined with written information provides an accurate and complete depiction of the complaint or problem with which the patient is presenting. Try to imagine what the teleconsulting physician would need to see or know in order to render his or her diagnosis.

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Teledermatology cases: Entering written information on a Patient History Form:

The shorter Patient History Form for Non-Internal Medicine Cases is normally used for teledermatology cases. Although *in general* an extensive and detailed history is not necessary, the following information is extremely useful and should be included in the case notes.

- Length of time of condition; whether symptoms are continual or intermittent
- Location(s) on the body that the condition affects (distribution of lesions)
- Physical features such as texture or palpability. If lesions change over time since their first appearance, describe stages.
- Associated localized and/or systemic symptoms

Write your information clearly and large enough to read comfortably, using at least a medium-point BLACK pen or marker. Text written in a finer point, pencil, or blue ink does not transmit or fax legibly. Typed information is welcome, though we know this is not always feasible!