

WHAT'S YOUR DIAGNOSIS?

PEER REVIEWED

An Erythematous Plaque in an 84-Year-Old Woman

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An 84-year-old Filipina with no personal or known family history of skin cancer presented to the dermatology clinic with a lesion on her lower back that had been present for the past 5 years. She reported insidious growth and mild pruritus associated with the lesion over the past few months. Physical examination demonstrated a 7.5 × 4.5-cm sharply defined erythematous plaque with scattered scale and interspersed nodular areas on the woman's medial lower back (**Figures**).





Figures. 7.5 × 4.5-cm sharply defined erythematous plaque with scattered scale and interspersed nodular areas on the medial lower back.

What's your diagnosis?

- A. Psoriasis
- B. Basal cell carcinoma
- C. Tinea corporis
- D. Lepromatous leprosy
- E. Cutaneous T-cell lymphoma

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Answer: Basal Cell Carcinoma

The diagnosis of basal cell carcinoma was determined via biopsy.

The patient was referred for Mohs surgery because she met the published appropriate use criteria for having a nodular basal cell larger than 2 cm.¹ The criteria take into account multiple factors to determine whether Mohs micrographic surgery is indicated in the treatment of cutaneous neoplasms. These factors include area of body, patient characteristics, tumor characteristics, and size.

Reference:

1. AAD/ACMS/ASDSA/ASMS 2012 appropriate use criteria for Mohs micrographic surgery: a report of the American Academy of Dermatology, American College of Mohs Surgery, American Society for Dermatologic Surgery Association, and the American Society for Mohs Surgery. *Dermatol Surg.* 2012;38(10):1582-1603.