### Primary Cutaneous Melanoma Histopathology Request Information

#### Identification
- **Family name**
- **Given name(s)**
- **Date of birth**
- **Date of request**
- **Sex**
  - [ ] Male
  - [ ] Female
  - [ ] Intersex/indeterminate
- **Ethnicity**
  - [ ] Unknown
  - [ ] Aboriginal/Torres Strait Islander
  - [ ] Other ethnicity: ___
- **Patient identifiers**
  - e.g. MRN, IHI or NHI (please indicate which)
- **Sex**
- **Ethnicity**
  - [ ] Male
  - [ ] Female
  - [ ] Intersex/indeterminate
- **Patient identifiers**
  - e.g. MRN, IHI or NHI (please indicate which)
- **Date of request**
- **Patient identifiers**
  - e.g. MRN, IHI or NHI (please indicate which)
- **Sex**
- **Ethnicity**
  - [ ] Male
  - [ ] Female
  - [ ] Intersex/indeterminate
- **Patient identifiers**
  - e.g. MRN, IHI or NHI (please indicate which)
- **Date of request**
- **Sex**
- **Ethnicity**
  - [ ] Male
  - [ ] Female
  - [ ] Intersex/indeterminate
- **Patient identifiers**
  - e.g. MRN, IHI or NHI (please indicate which)
- **Date of request**

#### Tumour site
- **Not provided**
- **Specify**

#### Specimen laterality
- [ ] Left
- [ ] Right
- [ ] Midline

#### Clinical or differential diagnosis

#### Specimen type
- **Excision**
- **Punch**
- **Incision**
- **Curette**
- **Shave**
- **Re-excision**
- **Other**

If re-excision:
- **Previous laboratory**
- **Previous lab accession number**
- **Findings in previous biopsy**

#### History & timing of lesional trauma, biopsy, irritation or treatment with topical agent

#### Past history of melanoma?
- [ ] No
- [x] Yes
  - Details eg site, thickness, timing, treatment

#### Evidence of metastatic disease?
- [ ] No
- [x] Yes
  - Describe:

#### Serum lactate dehydrogenase

I.U.
Other relevant history

Specimen orientation

Any clinically or dermatoscopically identified suspicious areas?
- No
- Yes Describe:

Clinical or other relevant diagnostic imaging results

New primary melanoma or recurrence
- New primary
- Recurrence – local
- Recurrence – intransit metastasis (between primary site and regional node field)
- Recurrence – regional
- Recurrence – distant

Principal clinician caring for the patient

Other clinical information