

American Board of Ophthalmology Office Record Review Module

Diagnosis/Case: Choroidal Melanoma

Module Definition: A patient with a history of suspected intraocular nevus or melanoma, seen by you at least once in the past 24 months.

History (Positive or Negative Findings)			
Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Reason for visit/chief complaint
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Ocular history/ symptoms
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Systemic disorders
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Current ocular medications
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Systemic medications
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6. Drug reactions/ allergies

Examination and Diagnostic Procedures			
Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Visual acuity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Pupillary exam
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Intraocular pressures (IOP)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. External examination
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Slit-lamp examination
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6. Gonioscopy for anterior choroidal tumors
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	7. Sentinel vessels
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8. Large retinal drawing/fundus photography
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	9. Associated subretinal fluid
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10. Orange pigmentation
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11. Tumor size
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12. Ultrasound performed for elevated lesions
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	13. Dilated posterior segment examination
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	14. Transillumination
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	15. Laboratory studies - liver function tests
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	16. Chest x-ray
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	17. If CXR, LFTs suggest evidence of metastatic melanoma, CT scan or MRI (of chest/abdomen/pelvis)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	18. Discussion of available management options and treatment complications with patient

Assessment and Management

Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Current diagnosis
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Current management plan (observation, enucleation, brachytherapy, proton beam)

Management Techniques

Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Observation
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Enucleation
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Brachytherapy
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Proton beam irradiation
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Orbital exenteration
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6. Other therapies

Follow-Up

Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Follow-up examination scheduled
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2. Referral to ocular oncologist, retina specialist with an interest in ocular oncology or an internist
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3. Review of pathology report if fine needle aspiration biopsy or enucleation performed
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4. Following brachytherapy
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5. Following enucleation

Safety and Environment

Recorded	Not Recorded	Not Applicable	Item
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1. Conjunctiva shielded from external ocular radiation