

Policy for the Removal of Benign Skin Lesions

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Purpose	This document is part of a suite of policies that the Integrated Care Board (ICB) uses to drive its commissioning of healthcare. Each policy in that suite is a separate public document in its own right but will be applied with reference to other policies in that suite
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Document control:		
Date:	Version Number:	Section and Description of Change
September 2019	V1.0	Policy ratified by Healthier Lancashire and South Cumbria's Joint Committee of Clinical Commissioning Groups (JCCCGs)
July 2022	V1.1	Policy adopted by Lancashire and South Cumbria ICB – references to CCG replaced by ICB where relevant
July 2026	V2	Policy reformatted to improve clarity and usability. Eligibility criteria were refined with input from local dermatology specialists and remain aligned with neighbouring ICB policies and national guidance.

1. Policy

- 1.1 Removal of benign skin lesions for cosmetic purposes is not routinely commissioned.
- 1.2 Referral for assessment of troublesome benign skin lesions is routinely commissioned if any of the following criteria are satisfied:-
 - 1.2.1 There are signs of regular bleeding or oozing caused by trauma which is impacting on normal daily activities
 - 1.2.2 There are repeated infections requiring oral antibiotics which are impacting on normal daily activities
 - 1.2.3 Persistently painful
 - 1.2.4 The lesion significantly impacts on function e.g. restricts joint movement (for example a large lipoma) or a significant facial disfigurement
 - 1.2.5 Any lesion where the diagnosis is uncertain and there is a reasonable suspicion of malignancy
- 1.3 The majority of pre-cancerous lesions for actinic keratosis should be managed in primary care and their removal is not routinely commissioned in secondary care unless there is concern about the diagnosis.
- 1.4 Similarly, Bowen's disease (in situ squamous cell carcinoma) can be managed by primary care clinicians (with the appropriate training and expertise). Otherwise, these cases should be referred to secondary care because of the higher risk of malignancy.
- 1.5 Patients should be warned that referral doesn't guarantee treatment as the decision on whether the lesion is to be removed will depend on the diagnosis as confirmed by the specialist
- 1.6 **Exclusions**
Lesions suspicious for squamous cell carcinoma or melanoma, or high risk site basal cell carcinoma (T-Zone/ears) are excluded from this policy and should be referred on a 2 week rule.
- 1.7 **Lancashire & South Cumbria (LSC) Community Dermatology Service**
Patients who fulfil the above criteria should be referred to the community dermatology service in the first instance. Following assessment, patients may then receive treatment or are referred on to a different Trust pathway as appropriate.

2. Scope and definitions

- 2.1 This policy is based on the ICB's Statement of Principles for Commissioning of Healthcare (version in force on the date on which this policy is adopted).
- 2.2 The removal of benign skin lesions encompasses a number of minor surgery procedures used to treat skin lesions, such as skin tags, that are not suspected to be cancerous.
- 2.3 The scope of this policy includes requests for the removal of benign skin lesions (irrespective of gender or age) which may include (but not limited to):-

- benign moles (excluding large congenital naevi)
- solar comedones
- corn/callous
- dermatofibroma
- lipomas
- milia
- molluscum contagiosum (non-genital)
- epidermoid & pilar cysts (sometimes incorrectly called sebaceous cysts)
- seborrhoeic keratoses (basal cell papillomata)
- skin tags (fibroepithelial polyps) including anal tags
- spider naevi (telangiectasia)
- non-genital viral warts in immunocompetent patients
- xanthelasmata
- neurofibromata

2.4 The scope of this policy does not include:

- The treatment of malignant lesions or those suspected of malignancy.

2.5 The ICB recognises that a patient may have certain features, such as

- having a benign skin lesion,
- wishing to have a service provided for their benign skin lesion,
- being advised that they are clinically suitable for benign skin lesion removal, and
- be distressed by their benign skin lesion, and by the fact that they may not meet the criteria specified in this commissioning policy.

Such features place the patient within the group to whom this policy applies and do not make them exceptions to it.

2.6 For the purpose of this policy the ICB defines benign skin lesions as non-cancerous skin growths.

3. Appropriate Healthcare

3.1 The purpose of the removal of benign skin lesions is normally to either improve the patient's cosmetic appearance or to resolve symptoms, such as pain or recurrent infections, associated with the presence of the skin lesion.

3.2 This policy relies on the Principle of Appropriateness as the ICB recognises that in many cases benign skin lesions cause no functional problems.

The ICB considers that in circumstances where skin lesions are asymptomatic or minimally symptomatic the removal of benign skin lesions does not accord with the criteria of appropriateness in the Statement of Principles, as other services competing for the same ICB resource more clearly have a purpose of preserving life or of preventing grave health consequences.

4. Effective Healthcare

- 4.1 The removal of benign skin lesions carries risks including bleeding, pain, infection and scarring.

This policy therefore relies on the Principles of Effectiveness as the ICB considers that, in the absence of the symptoms outlined in section 1.1 of the policy, the potential risks associated with benign skin lesion removal outweighs the potential benefits.

5. Cost Effectiveness

- 5.1 The ICB does not call into question the cost-effectiveness of benign skin lesion removal and therefore this policy does not rely on the Principle of Cost-Effectiveness. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the ICB may consider whether the treatment is likely to be Cost Effective in this patient when considering an application to provide funding.

6. Ethics

- 6.1 The ICB does not call into question the ethics of benign skin lesion removal and therefore this policy does not rely on the Principle of Ethics. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the ICB may consider whether the treatment is likely to raise ethical concerns in this patient when considering an application to provide funding.

7. Affordability

- 7.1 The policy criteria at section 1.1 of the policy rely on the Principle of Affordability. The ICB has a limited budget and must make difficult choices regarding the prioritisation of the resources available to ensure their best use. As a result of the need to manage the healthcare of its population within the budget available, access to cosmetic procedures, such as the removal of benign skin lesions, is restricted.

8. Exceptions

- 8.1 The ICB will consider exceptions to this policy in accordance with the Policy for Considering Applications for Exceptionality to Commissioning Policies.
- 8.2 In the event of inconsistency, this policy will take precedence over any non-mandatory NICE guidance in driving decisions of this ICB. A circumstance in which a patient satisfies NICE guidance but does not satisfy the criteria in this policy does not amount to exceptionality.

9. Force

- 9.1 This policy remains in force until it is superseded by a revised policy or by mandatory NICE guidance relating to this intervention, or to alternative treatments for the same condition.

- 9.2 In the event of NICE guidance referenced in this policy being superseded by new NICE guidance, then:
- If the new NICE guidance has mandatory status, then that NICE guidance will supersede this policy with effect from the date on which it becomes mandatory.
 - If the new NICE guidance does not have mandatory status, then the ICB will aspire to review and update this policy accordingly. However, until the ICB adopts a revised policy, this policy will remain in force and any references in it to NICE guidance will remain valid as far as the decisions of this ICB are concerned.

10. References

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11. OPCS and ICD Codes

OPCS codes
S063 - Shave excision of lesion of skin of head or neck
S064 - Shave excision of lesion of skin NEC
S065 - Excision of lesion of skin of head or neck NEC
S066 - Re-excision of skin margins of head or neck
S067 - Re-excision of skin margins NEC
S068 - Other specified other excision of lesion of skin
S069 - Unspecified other excision of lesion of skin
S072 - Photodynamic laser therapy to lesion of skin
S078 - Other specified photodynamic therapy of skin
S079 - Unspecified photodynamic therapy of skin
S081 - Curettage and cauterisation of lesion of skin of head or neck
S082 - Curettage and cauterisation of lesion of skin NEC
S083 - Curettage of lesion of skin of head or neck NEC
S088 - Other specified curettage of lesion of skin
S089 - Unspecified curettage of lesion of skin
S091 - Laser destruction of lesion of skin of head or neck
S092 - Laser destruction of lesion of skin NEC
S093 - Photodestruction of lesion of skin of head or neck NEC
S094 - Infrared photocoagulation of lesion of skin of head or neck
S095 - Infrared photocoagulation of lesion of skin NEC
S098 - Other specified photodestruction of lesion of skin
S099 - Unspecified photodestruction of lesion of skin
S101 - Cauterisation of lesion of skin of head or neck NEC
S102 - Cryotherapy to lesion of skin of head or neck
S111 - Cauterisation of lesion of skin NEC
S112 - Cryotherapy to lesion of skin NEC
B353 - Extirpation of lesion of nipple
C101 - Excision of lesion of eyebrow
C108 - Other specified operations on eyebrow
C109 - Unspecified operations on eyebrow
C111 - Excision of lesion of canthus
C112 - Destruction of lesion of canthus
C118 - Other specified operations on canthus
C119 - Unspecified operations on canthus
C121 - Excision of lesion of eyelid NEC
C122 - Cauterisation of lesion of eyelid
C123 - Cryotherapy to lesion of eyelid

C124 - Curettage of lesion of eyelid
 C125 - Destruction of lesion of eyelid NEC
 C126 - Wedge excision of lesion of eyelid
 C128 - Other specified extirpation of lesion of eyelid
 C129 - Unspecified extirpation of lesion of eyelid
 D021 - Excision of lesion of external ear
 D022 - Destruction of lesion of external ear
 D028 - Other specified extirpation of lesion of external ear
 D029 - Unspecified extirpation of lesion of external ear
 E091 - Excision of lesion of external nose
 E092 - Destruction of lesion of external nose NEC
 E096 - Laser destruction of lesion of external nose
 E098 - Other specified operations on external nose
 E099 - Unspecified operations on external nose
 F011 - Excision of vermilion border of lip and advancement of mucosa of lip
 F018 - Other specified partial excision of lip
 F019 - Unspecified partial excision of lip
 F021 - Excision of lesion of lip
 F022 - Destruction of lesion of lip
 F028 - Other specified extirpation of lesion of lip
 F029 - Unspecified extirpation of lesion of lip
 N012 - Excision of lesion of scrotum
 N013 - Destruction of lesion of scrotum
 N018 - Other specified extirpation of scrotum
 N019 - Unspecified extirpation of scrotum
 N242 - Operations on skin of male perineum NEC
 N271 - Excision of lesion of penis
 N272 - Cauterisation of lesion of penis
 N273 - Destruction of lesion of penis NEC
 N278 - Other specified extirpation of lesion of penis
 N279 - Unspecified extirpation of lesion of penis
 P054 - Excision of lesion of vulva NEC
 P058 - Other specified excision of vulva
 P059 - Unspecified excision of vulva
 P061 - Laser destruction of lesion of vulva
 P062 - Cryosurgery to lesion of vulva
 P063 - Cauterisation of lesion of vulva
 P065 - Excision of lesion of labia
 P068 - Other specified extirpation of lesion of vulva
 P069 - Unspecified extirpation of lesion of vulva
 P111 - Excision of lesion of female perineum
 P112 - Laser destruction of lesion of female perineum
 P113 - Cauterisation of lesion of female perineum
 P114 - Destruction of lesion of female perineum NEC
 P118 - Other specified extirpation of lesion of female perineum
 P119 - Unspecified extirpation of lesion of female perineum
 T291 - Excision of umbilicus
 T292 - Excision of urachus
 T293 - Extirpation of lesion of umbilicus
 T298 - Other specified operations on umbilicus
 T299 - Unspecified operations on umbilicus

ICD-10 codes
D030 - Melanoma in situ of lip
D031 - Melanoma in situ of eyelid, including canthus
D032 - Melanoma in situ of ear and external auricular canal
D033 - Melanoma in situ of other and unspecified parts of face
D034 - Melanoma in situ of scalp and neck
D035 - Melanoma in situ of trunk
D036 - Melanoma in situ of upper limb, including shoulder
D037 - Melanoma in situ of lower limb, including hip
D038 - Melanoma in situ of other sites
D039 - Melanoma in situ, unspecified
D040 - Carcinoma in situ of skin of lip
D041 - Carcinoma in situ of skin of eyelid, including canthus
D042 - Carcinoma in situ of skin of ear and external auricular canal
D043 - Carcinoma in situ of skin of other and unspecified parts of face
D044 - Carcinoma in situ of skin of scalp and neck
D045 - Carcinoma in situ of skin of trunk
D046 - Carcinoma in situ of skin of upper limb, including shoulder
D047 - Carcinoma in situ of skin of lower limb, including hip
D048 - Carcinoma in situ of skin of other sites
D049 - Carcinoma in situ of skin, unspecified
L570 - Actinic keratosis
L84X - Corn
D220 -Melanocytic naevi of lip
D221 - Melanocytic naevi of eyelid, including canthus
D222 - Melanocytic naevi of ear and external auricular canal
D223 - Melanocytic naevi of other and unspecified parts of face
D224 - Melanocytic naevi of scalp and neck
D225 - Melanocytic naevi of trunk
D226 - Melanocytic naevi of upper limb, including shoulder
D227 - Melanocytic naevi of lower limb, including hip
D229 - Melanocytic naevi, unspecified
D230 - Benign neoplasm: Skin of lip
D231 - Benign neoplasm: Skin of eyelid, including canthus
D232 - Benign neoplasm: Skin of ear and external auricular canal
D233 - Benign neoplasm: Skin of other and unspecified parts of face
D234 - Benign neoplasm: Skin of scalp and neck
D235 - Benign neoplasm: Skin of trunk
D236 - Benign neoplasm: Skin of upper limb, including shoulder
D237 - Benign neoplasm: Skin of lower limb, including hip
D239 - Benign neoplasm: Skin, unspecified
L720 - Epidermal cyst
L721 - Trichilemmal cyst
D170 - Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
D171 - Benign lipomatous neoplasm of skin and subcutaneous tissue of trunk
D172 - Benign lipomatous neoplasm of skin and subcutaneous tissue of limbs
D173 - Benign lipomatous neoplasm of skin and subcutaneous tissue of other and unspecified sites
B081 - Molluscum contagiosum
D361 - Peripheral nerves and autonomic nervous system

B07X - Viral warts L82X - Seborrheic keratosis L918 - Other hypertrophic disorders of skin L700 - Acne vulgaris I781 - Naevus, non-neoplastic H026 - Xanthelasma of eyelid
ICD-10 (Exceptions) codes
C430 - Malignant melanoma of lip C431 - Malignant melanoma of eyelid, including canthus C432 - Malignant melanoma of eyelid, including canthus C433 - Malignant melanoma of other and unspecified parts of face C434 - Malignant melanoma of scalp and neck C435 - Malignant melanoma of trunk C436 - Malignant melanoma of upper limb, including shoulder C437 - Malignant melanoma of lower limb, including hip C438 - Overlapping malignant melanoma of skin C439 - Malignant melanoma of skin, unspecified C440 - Other malignant neoplasms of skin of lip C441 - Other malignant neoplasms of skin of eyelid, including canthus C442 - Other malignant neoplasms of skin of ear and external auricular canal C443 - Other malignant neoplasms of skin of other and unspecified parts of face C444 - Other malignant neoplasms of skin of scalp and neck C445 - Other malignant neoplasms of skin of trunk C446 - Other malignant neoplasms of skin of upper limb, including shoulder C447 - Other malignant neoplasms of skin of lower limb, including hip C448 - Other malignant neoplasms of skin - Overlapping lesion of skin C449 - Other malignant neoplasms of skin, unspecified