



RECOMMENDATION FOLLOW-UP cSCC

Based on European consensus-based interdisciplinary guideline for cSCC (2023, EADO, EDF, ESTRO, UEMS, EADV, EORTC) (PMID: 37708630)

Year of follow-up	Clinical/physical examination				Ultrasound of lymph nodes or parotid gland				CT, MRI, PET/CT			
	1	2	3-5	6+	1	2	3-5	6+	1	2	3	4+
Low risk cSCC*	12 m	12 m	-	-	-	-	-	-	-	-	-	-
High risk** cSCC	3-6 m	3-6 m	12 m	12 m	3-6 m	3-6 m	-	-	-	-	-	-
locally advanced*** cSCC or metastatic cSCC	3 m	3 m	3 m	6-12 m	3-6 m	3-6 m	3-6 m	6-12 m	3-6 m	3-6 m	3-6 m	Based on the response
Immuno-suppressed****	Every 3-6 m lifelong + according to the characteristics of cSCC				According to the characteristics of individual cSCC				According to the characteristics of individual cSCC			

*cSCC

**high-risk cSCC

cutaneous SCC

at least one of the following criteria:

localization on temple, ear, lip
 diameter > 20mm
 depth > 6mm or invasion beyond subcutaneous fat
 poor differentiation
 desmoplasia
 perineural invasion (microscopic, symptomatic, imaging)
 positive surgical margins
 bone erosion
 immunosuppression

*** locally advanced cSCC

non-metastatic cSCC, not amenable to either surgery or radiotherapy with reasonable hope for cure or unacceptable toxicity

****immunosuppressed setting

organ transplant, HIV, hematological disorder e.g. chronic lymphatic leukemia