

Alopecia Scalp Biopsy - Summary Clinical Guideline

Reference No:CG-DERM/2023/004

Definitions, Keywords

Scarring alopecia (cicatricial alopecia), non-scarring alopecia

Alopecia scalp biopsy protocol

- All punch biopsies for alopecia cases must be booked on a DOCTORS
 LIST ONLY with a 30 minute slot.
- All punch biopsies must be 5 mm in size and should be orientated in the direction of hair growth to minimize oblique transection of follicles. The biopsy should extend into the subcutaneous fat.
- All samples to be sent for histological assessment with specialist alopecia scalp biopsy histology form. The histology form should include relevant clinical details to facilitate histological interpretation and clinico-pathological correlation.
- All samples for histological assessment should be sent to the pathology lab in a formalin pot
- All IMF samples should be sent to the pathology lab in Michel's medium.
- Clinicians should follow the flow chart below to determine the most appropriate biopsy method.
- If a clinician cannot differentiate clinically if a patient has scarring or nonscarring alopecia then please use the non-scarring alopecia protocol. If IMF is required then bisect the punch biopsy intended for vertical sectioning and send half to histology for vertical sectioning and half for IMF.
- For more information please refer to the 'Full Alopecia Scalp Biopsy Protocol'



