BMJ Publishing Group Limited (BMJ) disclaims all liability and responsibility arising from any reliance placed on this supplemental material which has been supplied by the author(s)

Eyelid Lesion Proforma

Please describe the eyelid lesion history (free text)

Laterality of eyelid lesion

☐ Right ☐ Left

Location of eyelid lesion

☐ Upper lid ☐ Lower lid ☐ Medial canthus ☐ Lateral canthus ☐ Other

Duration of eyelid lesion

☐ < 2 weeks ☐ 2 weeks-3 months ☐ 3-6 months ☐ 6-12 months ☐ More than 1 year

Has the lesion

Caused visual disturbance? ☐ Yes | ☐ No

Bled? ☐ Yes | ☐ No

Caused recurrent infection? ☐ Yes | ☐ No

Caused pain or discomfort? ☐ Yes | ☐ No

Changed colour (pigmentation)? ☐ Yes | ☐ No

Grown significantly? ☐ Yes | ☐ No

- If yes, please specify: …….. weeks / months / years

For chalazia

- Performed hot compresses twice a day for at least 6 months ☐ Yes | ☐ No
- Used topical or oral antibiotics ☐ Yes | ☐ No

Previous history of skin lesion +/- biopsy

Location of skin lesion (please state if this lesion is a recurrence):

Treatment received ☐ Surgical excision ☐ Cryotherapy ☐ Topical treatment

Biopsy taken? ☐ Yes | ☐ No

- If Yes: Diagnosis?

Is the patient on any anticoagulant or antiplatelet agent ☐ Yes | ☐ No

Does the patient want surgery? ☐ Yes | ☐ No

Presenting Complaints (free text)

Past ophthalmic history (free text)

Past medical history (free text)

Drug history (free text)

Allergies (free text)

Family history (free text)