



Provincial Health Services Authority

Implementing HPV-Based Cervical Cancer Screening in BC:

Early Outcomes and Answering Your FAQs

June 5, 2024




We acknowledge with gratitude, that we are gathered on the traditional, ancestral and unceded territories of the x^wməθk^wəyəm (Musqueam), Sk̓wxwú7mesh Úxwumixw (Squamish), and səłílwətaʔ (Tsleil-Waututh) First Nations who have nurtured and cared for the lands and waters around us for all time. I give thanks for the opportunity to live, work and support care here.



Provincial Health
Services Authority

Format

- 90-minute webinar
- Speaker and slides visible on the screen
- Questions submitted at [slido.com](https://www.slido.com) #cervixscreening or click the link in your email (upvote your favourite questions )
- Questions will be answered after the presentation
- Complete attendance and evaluation forms at the end of the session to earn study credits

Learning Objectives

- State the eligibility and potential pathways for patients to access cervix screening
- Describe the follow-up algorithm and care pathways
- Explain the role of the provider or clinic in supporting patients with cervix screening

Speakers



Laura Gentile

Operations Director, Cervix
Screening and Colon
Screening, BC Cancer



Dr. Gina Ogilvie

Tier 1 Canada Research Chair,
Global Control of HPV Related
Diseases and Cancer

Professor, School of Population
and Public Health, UBC

Associate Director, Women's
Health Research Institute

Senior Public Health Scientist,
BC Centre for Disease Control



Dr. Lily Proctor

Gynecologic Oncologist,
BC Cancer and
Vancouver General
Hospital

Medical Director, Cervix
Screening, BC Cancer

Disclosures

The speakers have nothing to disclose.

New Policy Launch: Transition to HPV Primary Screening January 2024



Provider-Collected Cervix Screening

Available to anyone ages 25-69 due for screening

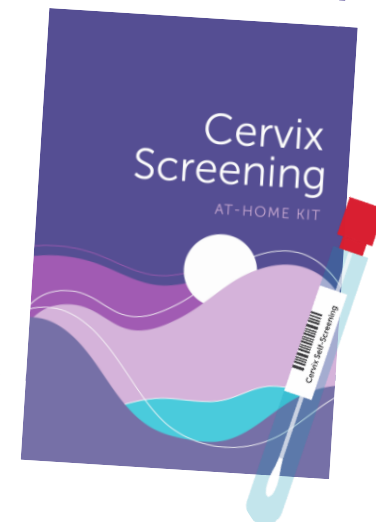
- Samples would be triaged at the lab to either undergo HPV testing **or** cytology based on patient age initially
 - Age 55 or older = HPV Testing
 - By year 4: **All** screening eligible ages receive primary HPV testing
 - *Why?* Allows for a stepped down volume of cytology screening to smooth yearly screening volumes due to the interval change from three years with cytology to five years with HPV

+

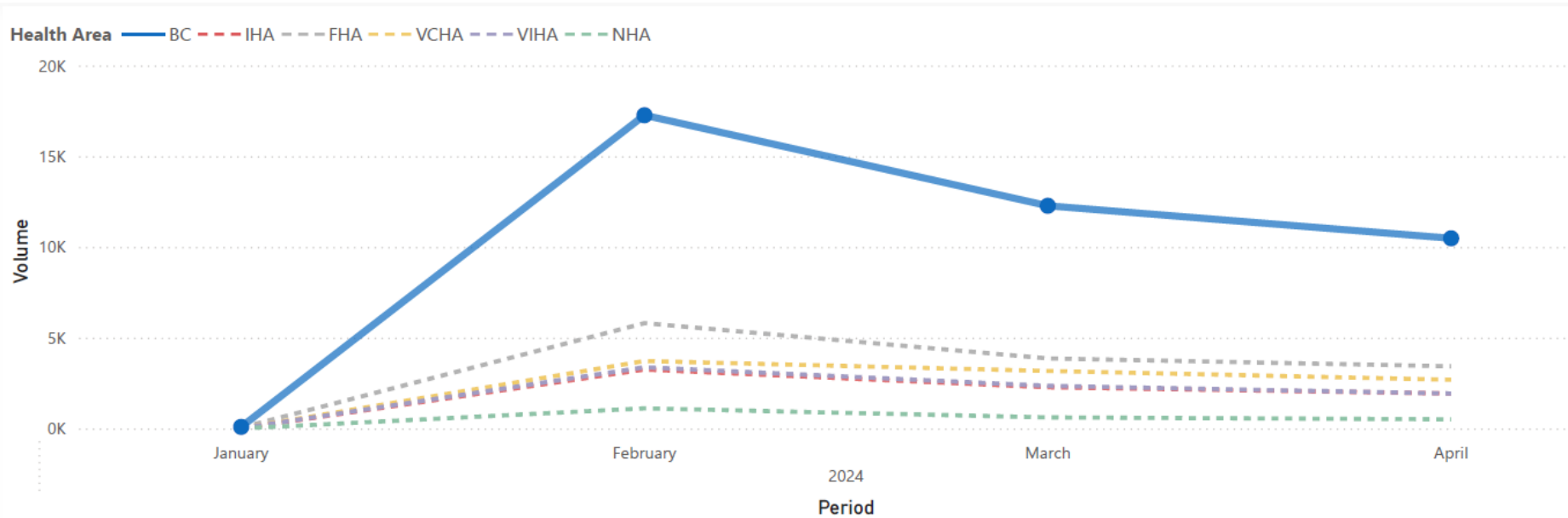


Cervix Self-Screening

Available to anyone ages 25-69 due for screening



Volume of Kits Mailed from Cervix Screening Program



Year	2024					Total
Health Area	January	February	March	April	Total	
IHA	5	3,251	2,273	1,927	7,456	7,456
FHA	51	5,805	3,862	3,429	13,147	13,147
VCHA	17	3,718	3,171	2,689	9,595	9,595
VIHA	14	3,376	2,353	1,928	7,671	7,671
NHA	2	1,111	613	507	2,233	2,233
UNK		43	31	33	107	107
Total	89	17,304	12,303	10,513	40,209	40,209

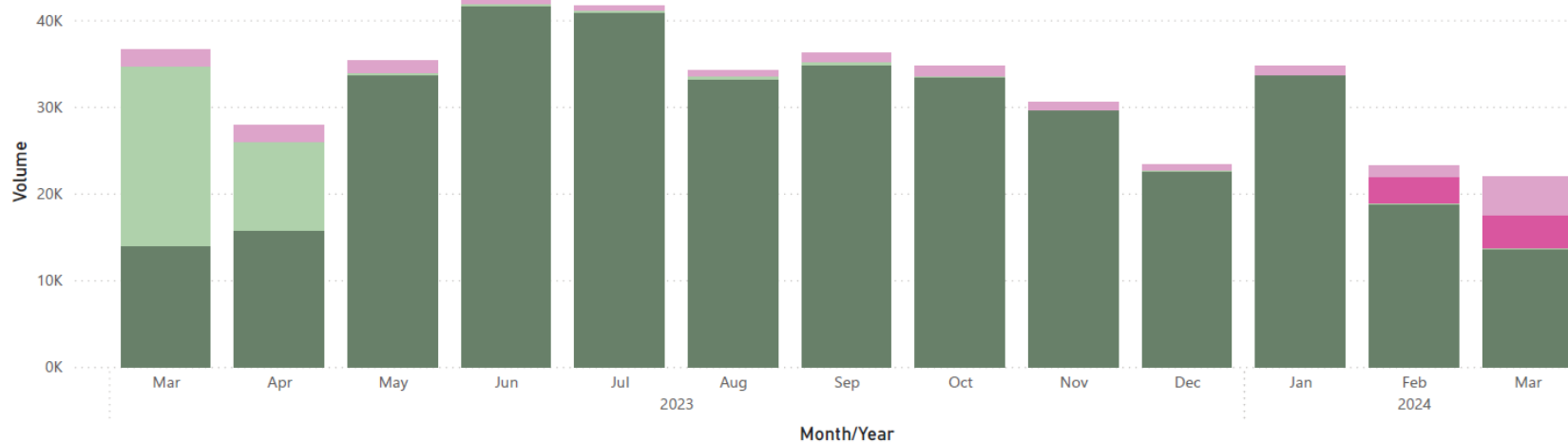
May 31, 2024

Screening Transition Volumes

Cervix Screening | Screen Volume by Month & Test Type



Test Type ● Cytology - LBC ● Cytology - Other Tests ● HPV - LBC Based ● HPV - Self-screening



Year Subtype	2023											2024			Total	
	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Jan	Feb	Mar		Total
☐ Cytology - LBC	13,962	15,777	33,639	41,704	40,929	33,227	34,810	33,374	29,582	22,619	299,623	33,701	18,826	13,638	66,165	365,788
☐ Cytology - Other Tests	20,786	10,193	335	233	195	312	418	132	51	19	32,674	43	45	52	140	32,814
☐ HPV - LBC Based												1	3,032	3,788	6,821	6,821
☐ HPV - Self-screening	1,826	1,856	1,386	887	518	710	991	1,159	886	726	10,945	922	1,332	4,505	6,759	17,704
Total	36,574	27,826	35,360	42,824	41,642	34,249	36,219	34,665	30,519	23,364	343,242	34,667	23,235	21,983	79,885	423,127

May 31, 2024

Note: Volume data is by 'Reported on' date

Common Questions Post-Transition Start

- Self-screening for patients who are pregnant
- Cotesting – are both LBC collection and vaginal swab collection required?
- Preventing and limiting invalid test results
 - Turn swab in vagina for 20 seconds
 - Return swabs to lab same day or next day after collection
- Patients with a history of ASCUS or LSIL

Available Resources

Resources: Health Professionals Webpage

www.bccancer.bc.ca/screening/health-professionals/cervix

The screenshot shows a web browser window displaying the BC Cancer Screening website. The browser's address bar shows the URL www.bccancer.bc.ca/screening/health-professionals/cervix. The page header includes the BC Cancer logo, a search bar, and social media icons for Facebook and YouTube. A navigation menu contains links for Breast, Cervix, Colon, Lung, Health Professionals, and Contact. The main content area features the title "Cervix Screening for Health Professionals" and a photograph of a healthcare professional in a purple shirt holding a cervical brush. On the right side, there is a "In this section" sidebar with a table listing resources.

In this section	
Health Professionals	
Breast Screening for Health Professionals	+
Cervix Screening for Health Professionals	-
Resources	

www.bccancer.bc.ca/screening/health-professionals/cervix/resources

Order free promotional materials

Promotions order form +

HPV transition updates

Bulletin +

Webinars +

Videos -

- [Cervix Screening in BC: Transitioning from Cytology \(Pap Test\) to HPV Primary Screening](#) (video)
- [Cervix Screening Results and Follow-Up for Average Risk Patients](#) (video)
- [Cervix Self-Screening: Frequently Asked Questions](#) (video)
- [HPV Positive Results: Frequently Asked Questions](#) (video)
- [Cervix Self-Screening: A Nurse Practitioner's Experience](#) (video)

Patient education resources

Brochures and instructions +

Promotional materials +

Videos +

Program information

Standards and guidelines +

Ordering supplies +

Colposcopy Clinic Locations

Colon Screening +

Lung Screening +

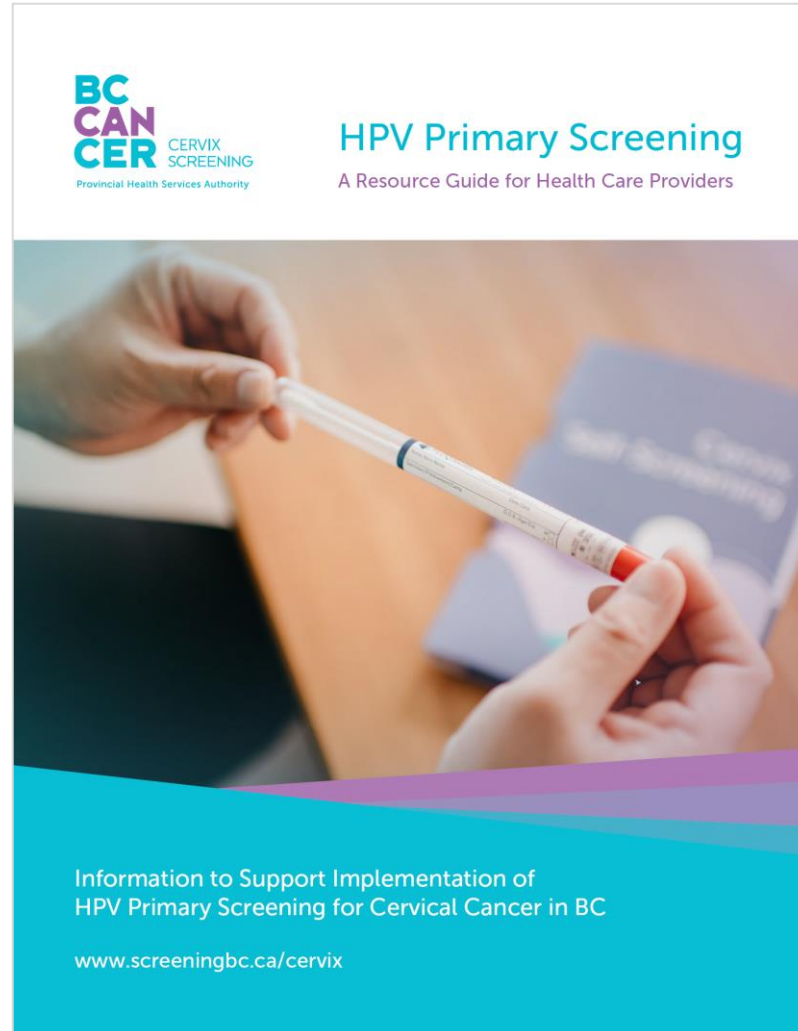
Does your clinic offer Pap tests on a drop-in basis?
Get added to our [Clinic Locator](#).

Add Your Clinic >

Contact us

Have questions about any of our Screening Programs? Use our [Contact page](#) to get in touch.

Resources: Resource Guide for Providers



Resources: Recommendations Overview Table

Cervix Screening Program: Program Overview 23 January 2024

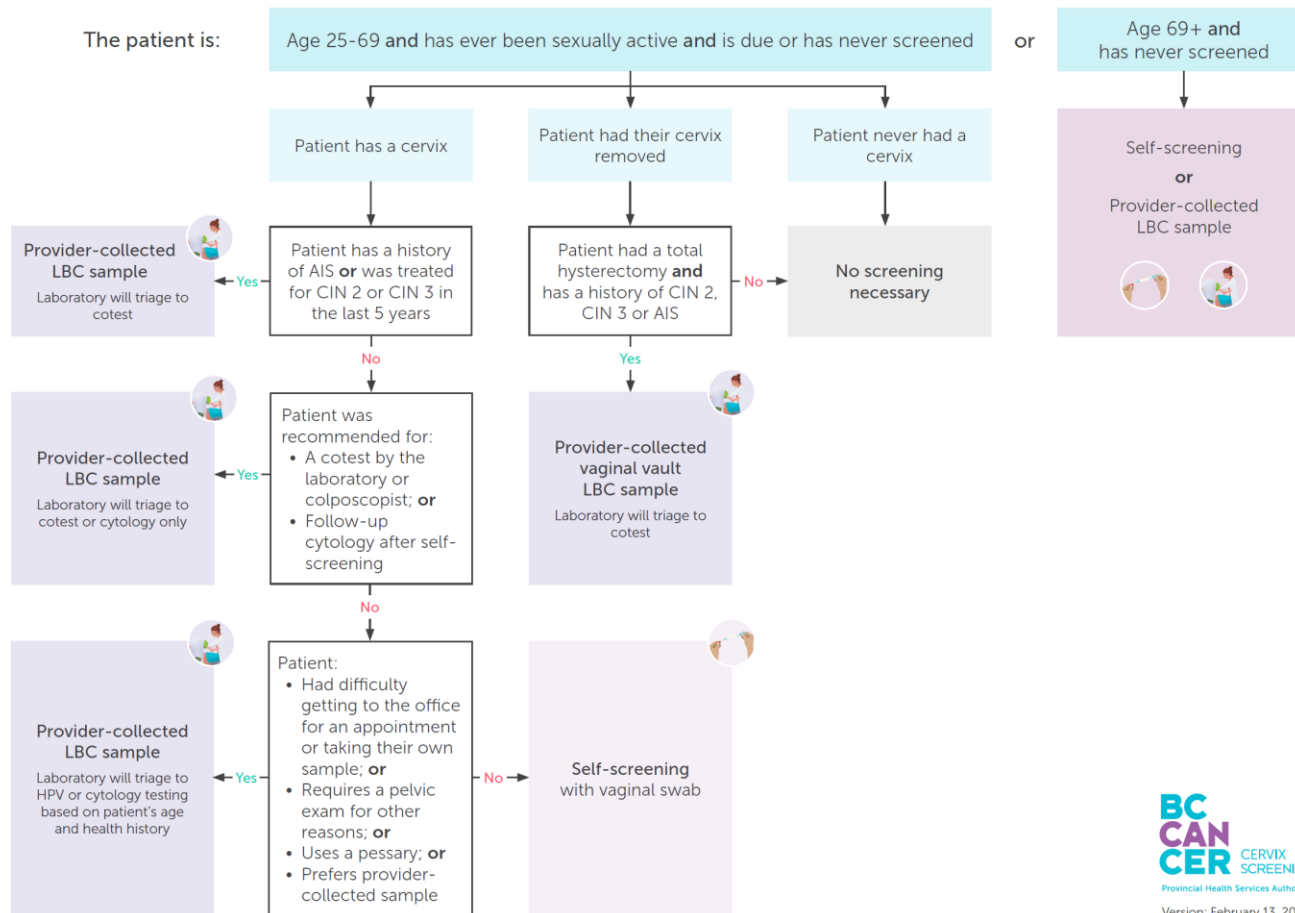
Overview Table: Cervix Screening Recommendations and Results

For the complete Program Overview, go to www.bccancer.bc.ca/screening/Documents/Cervix-Program-Overview.pdf

Summary Screening Recommendations	
Age to Start Screening	<ul style="list-style-type: none">Initiate screening at age 25. Cervical screening is not recommended for those over age 25 who have never been sexually active.
Cessation of Cervical Screening	<ul style="list-style-type: none">Average Risk: Stop screening at age 69, provided that there has been a negative HPV screening test between the ages of 65 and 69 and under no active surveillance of pre-cursor abnormalities.Immunocompromised: Stop screening at age 74 provided there has been a negative HPV screening test between the ages of 65 and 69 and under no active surveillance of pre-cursor abnormalities.Those who have been discharged from colposcopy, but have not yet completed the post discharge 12 month cotest (HPV and cytology testing) before age 69 (average risk) or 74 (immunocompromised), should continue with screening until they have had a negative cotest. After this, screening can be discontinued.
Management of Those over age 69 with HPV Positive Results	<ul style="list-style-type: none">Refer to colposcopy directly.If colposcopic evaluation is negative, discharge to primary care for a repeat HPV test in 12 months. If patients continue to be HPV positive, refer back to and follow in colposcopy until HPV negative or aged 79.At age 79 and the colposcopic examination is negative, HPV positive patients can be discharged with no further need for screening.

Resources: Self-Screening vs. Provider Collected LBC

Should my patient self-screen or get a provider-collected liquid-based cytology (LBC) sample?



Contact Us!

screening@bccancer.bc.ca

Inez

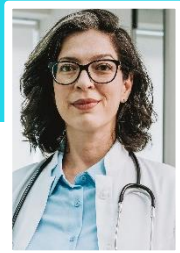
Meet Inez



- 38 years old
- Lives in Squamish
- 6 months pregnant
- Had a Pap test 3.5 years ago
- Previous result: NILM

Inez is at her prenatal appointment. She asks her health care provider whether she needs to complete cervix screening as part of her prenatal care and since she is due...

Inez Will Wait to Get Screened Postpartum



Inez's health care provider informs Inez that **cervix screening is not required as part of prenatal care.**

Inez's health care provider acknowledges Inez for her diligence and informs her she **can wait until postpartum to screen**, either by returning to the clinic or requesting a kit directly from the Cervix Screening Program.

Fiona

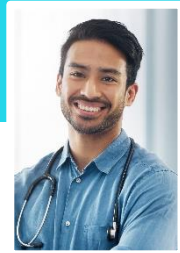
Meet Fiona



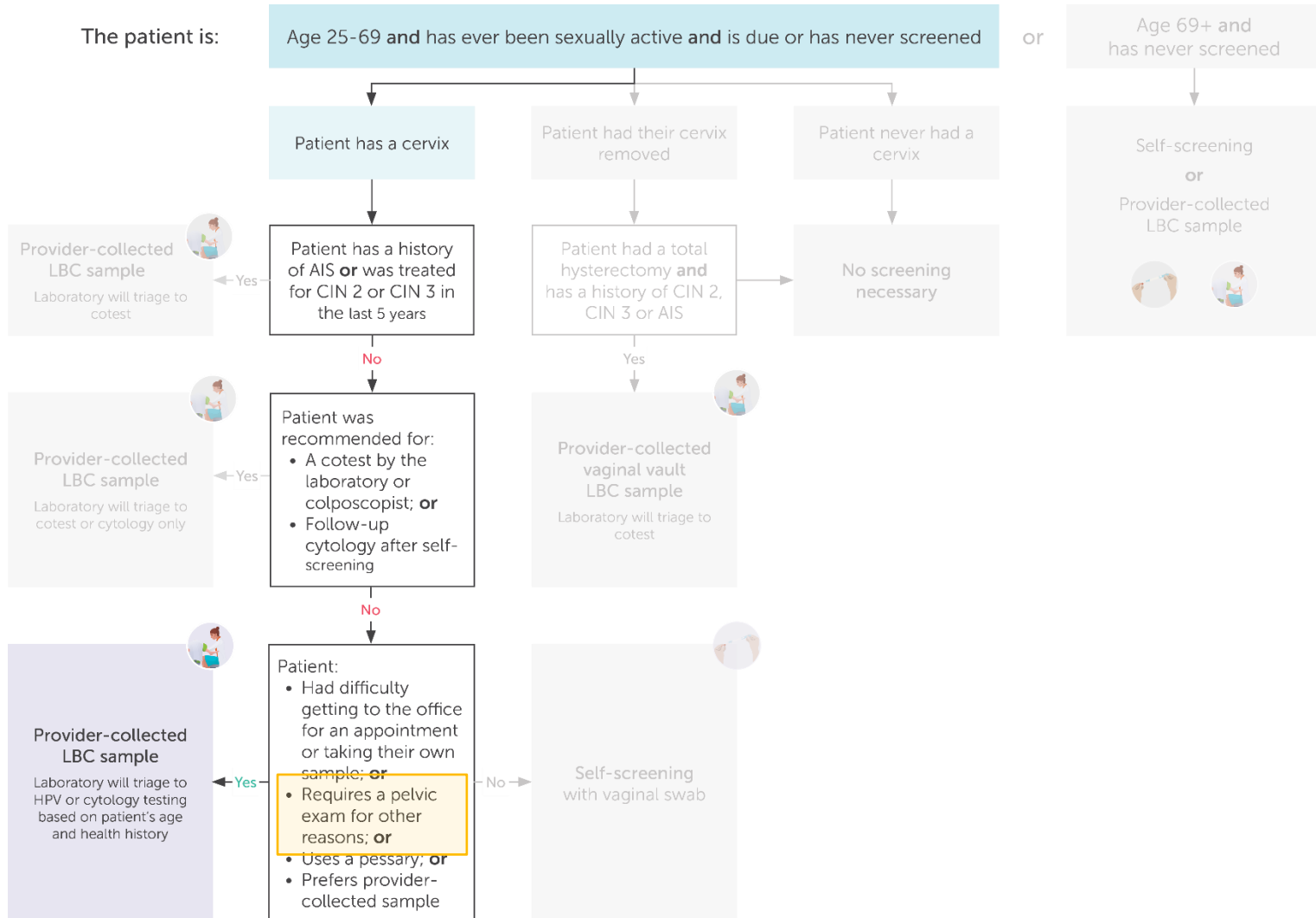
- 32 years old
- Lives in Victoria
- 5 months pregnant
- Never been screened

Fiona has an appointment with a health care provider for the first time in 12 years. During her intake, Fiona mentions she has never had a Pap test. The health care provider talks to Fiona about cervix screening...

Fiona Meets with the Health Care Provider



Should Fiona **self-screen** or get a **provider-collected LBC sample**?



Fiona Gets a Provider-Collected LBC Sample



Because Fiona has never been screened and self-screening is not recommended for pregnant people, the health care provider recommends that Fiona get a provider-collected liquid-based cytology (LBC) sample.

Fiona confirms she is also comfortable with getting a pelvic exam at the same time.



BC
CAN

Fiona's Health Care Provider Completes the Requisition



Cervical Cancer Screening Lab HPV + Pap (Cytology) Laboratory Requisition



Note: Samples must be properly labeled with the patient's surname and date of birth or sample will be rejected.
Yellow highlighted fields must be completed. Only 1 vial (or 1 swab) is required except for patients with a double cervix.

Patient PHN 9123456789	Patient DOB (dd/mmm/yyyy) 1-Mar-1992	Follow-up Practitioner/Clinic (MSP#, Name, Address) 68543 Graham Field 1107 Pandora Avenue, Victoria, BC V8V 3P8	
Patient Last Name Hale	Patient First Name & Initials Fiona		
Gender (for administrative purposes) <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> U (Unknown) <input type="checkbox"/> X (Non-binary)		Sample Provider (MSP# & Name) 68543, Graham Field	<input type="checkbox"/> locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mmm/yyyy) 22-May-2024	LMP Date (dd/mmm/yyyy)	Copy to MSP# & Name	Copy to MSP# & Name

COLLECTION METHOD / SAMPLE SITE:

<input checked="" type="checkbox"/> LBC vial: Cervix/Endocervix	<input type="checkbox"/> Vaginal swab: self-collect
<input type="checkbox"/> LBC vial: Vaginal Vault/Wall <i>(collected with spatula/brush)</i>	<input type="checkbox"/> Vaginal swab: provider-collect

REASON FOR TEST:

<input checked="" type="checkbox"/> Primary/Asymptomatic screening
<input type="checkbox"/> Follow-up after self-collect HPV Other High Risk Positive (cytology)
<input type="checkbox"/> Follow-up at 12-months after HPV Other High Risk Positive (HPV)
<input type="checkbox"/> Follow-up after colposcopy discharge (Co-Test)
<input type="checkbox"/> Clinical abnormality - Abnormal bleeding (unexplained)*
<input type="checkbox"/> Clinical abnormality - Suspicious lesion*

**A screening test is not appropriate for individuals with signs/symptoms suggestive of cervical cancer. Further investigation is required. A Co-Test (HPV and cytology) will be performed but test results are not required for referral.*

CLINICAL INFORMATION:

<input type="checkbox"/> IUD	
<input type="checkbox"/> DES exposure in utero	**Please refer to the BC Cancer Cervix Screening Program Overview document
<input type="checkbox"/> Pelvic radiation	http://www.bccancer.bc.ca/screening/health-professionals/cervix/resources
<input type="checkbox"/> Immunocompromised**	

CLINICAL COMMENTS:

REASON FOR TEST - COLPOSCOPY USE ONLY

HPV	<input type="checkbox"/> Follow-up of HPV Other High Risk Positive
	<input type="checkbox"/> Follow-up of HPV 16/18 Positive
	<input type="checkbox"/> Other (please specify): _____
Co-Test	<input type="checkbox"/> Follow-up of CIN2+ or AIS
	<input type="checkbox"/> DES exposure in utero
	<input type="checkbox"/> Investigation of clinical abnormality (please specify): _____
Cytology only	<input type="checkbox"/> Follow-up of self-collect HPV Other High Risk Positive
	<input type="checkbox"/> Other (please specify): _____

OUT OF PROVINCE cervical abnormality (histologically proven)

Date: _____ Location: _____

<input type="checkbox"/> CIN2, CIN3	<input type="checkbox"/> AIS (Adenocarcinoma in situ)
<input type="checkbox"/> Invasive cervical carcinoma	

Total Hysterectomy (cervix removed)

Date: _____ Pathology number: _____

<input type="checkbox"/> Unknown reason	<input type="checkbox"/> Invasive cervical carcinoma
<input type="checkbox"/> No cervical abnormality	<input type="checkbox"/> Endometrial carcinoma
<input type="checkbox"/> CIN2, CIN3	<input type="checkbox"/> Malignant, other: Please specify: _____
<input type="checkbox"/> AIS (Adenocarcinoma in situ)	

DELIVER SAMPLES TO: CONTACT: LAB USE ONLY:

Cervical Cancer Screening Laboratory 655 West 12 th Avenue Vancouver, BC	(T): 1-877-747-2522 (1-877-PHSA-LAB) (F): 604-707-2809	
---	---	--



LBC Sample is Returned to the Cervical Cancer Screening Laboratory



At the laboratory, Fiona's sample is triaged to **cytology** due to her age.

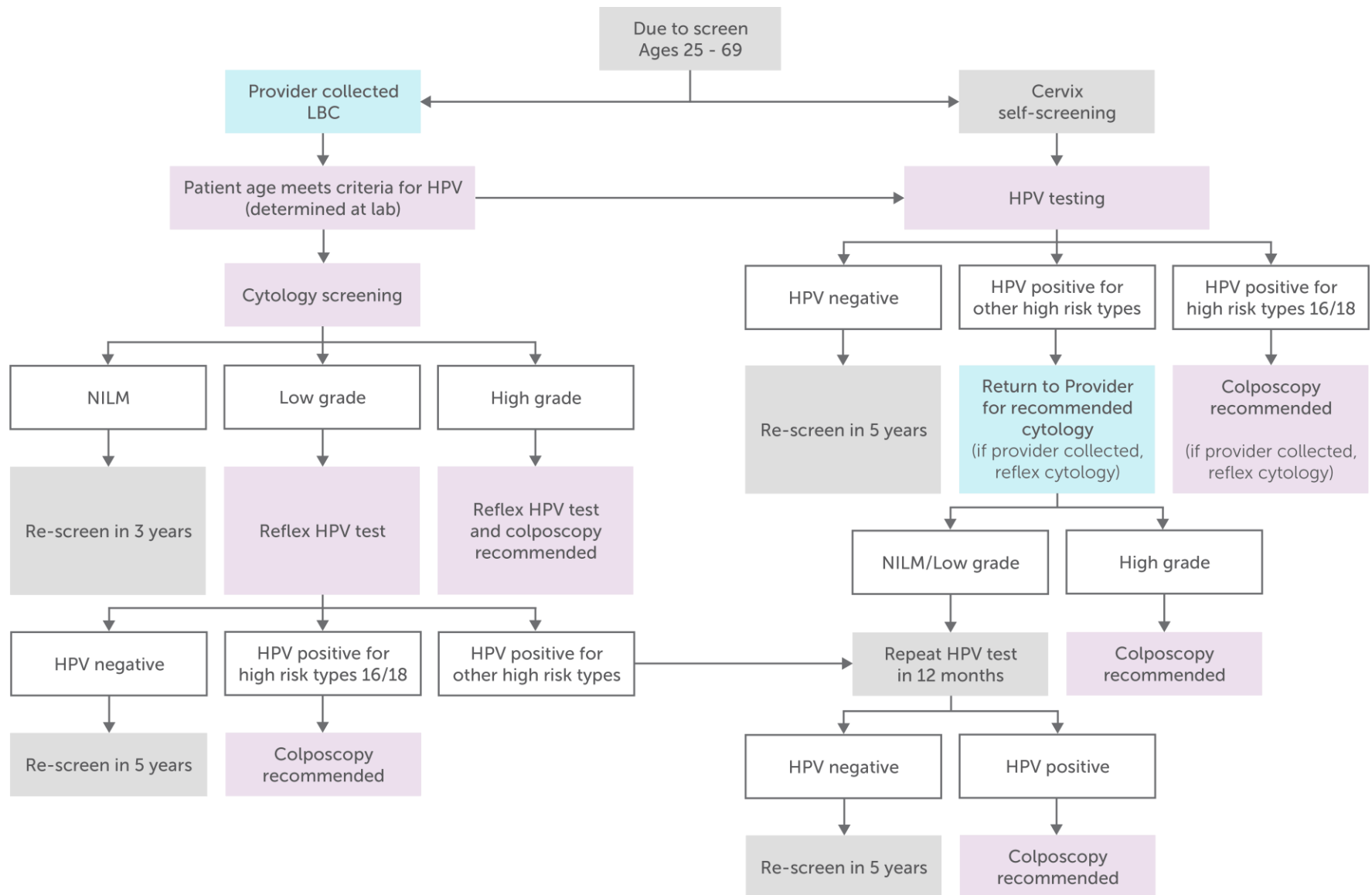
Her sample is NILM.



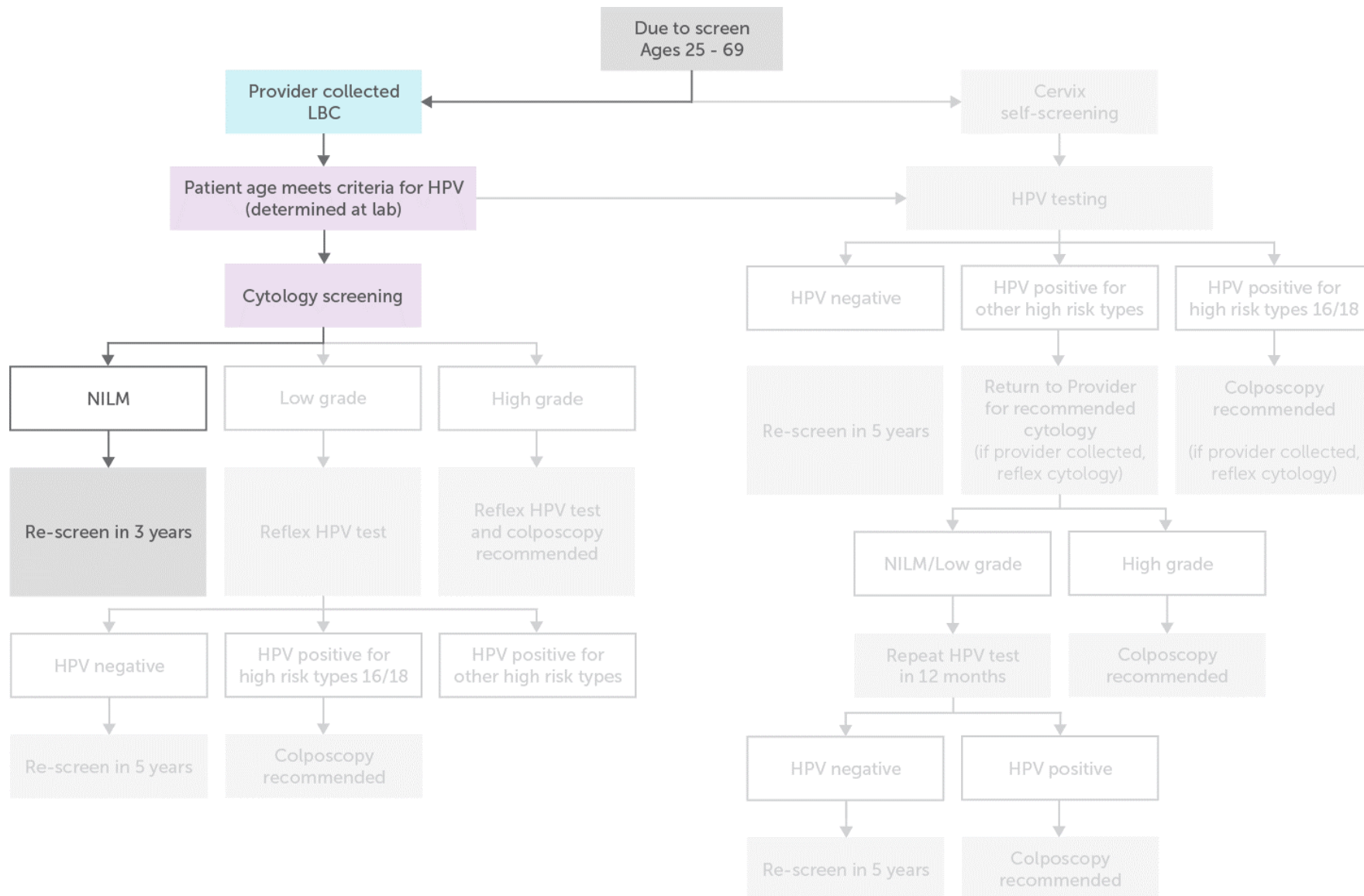
Result:
Cytology NILM

Next Steps:
Screen in 3 years

Screening Algorithm



Screening Algorithm



Cervical Cancer Screening Laboratory Report Sent to Fiona's Health Care Provider



The laboratory report with the cytology result is sent to Fiona's health care provider.

The laboratory report recommends re-screening in 3 years.

Result Sent to Fiona



Fiona receives her result on [HealthGateway](#) and through a letter in the mail:



Screening Test Result

June 24, 2024
Test Result Date: May 22, 2024

Fiona Hale
1 Centennial Square
Victoria, BC V8W 1P6

Results Notification – Normal Result

You are receiving this letter because you were recently screened for cervical cancer (i.e. Pap test).

Your result was normal.

NEXT STEPS: No further action is required at this time.

You are recommended to have cervix screening in 3 years, unless otherwise recommended by your primary care provider. If you are registered with a BC address a reminder will be mailed to you when it is time to screen again.

In addition to regular screenings, you should look out for any unusual changes to your body. If you have bleeding after sex, between periods or after menopause; increased vaginal discharge; pelvic pain or pain during sex, talk to a health care provider. It is important to look into these symptoms to protect your cervix health – even if your screening results are normal.

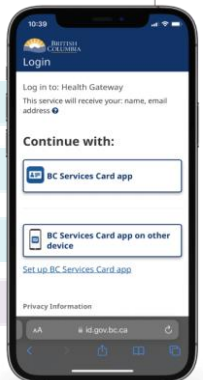
If you have changed your address, please visit <https://www.addresschange.gov.bc.ca/> to update your address with ICBC and Health Insurance BC online at the same time.

For more information about the Cervix Screening program, please visit our website at www.screeningbc.ca/cervix.

“Your result was normal. No further action needed at this time.”

“You are recommended to have cervix screening in 3 years...”

“If you have vaginal bleeding after sex, between periods or after menopause; abnormal or increased vaginal discharge; unexplained pelvic pain or pain during sex, talk to a health care provider.”



Erin

Meet Erin



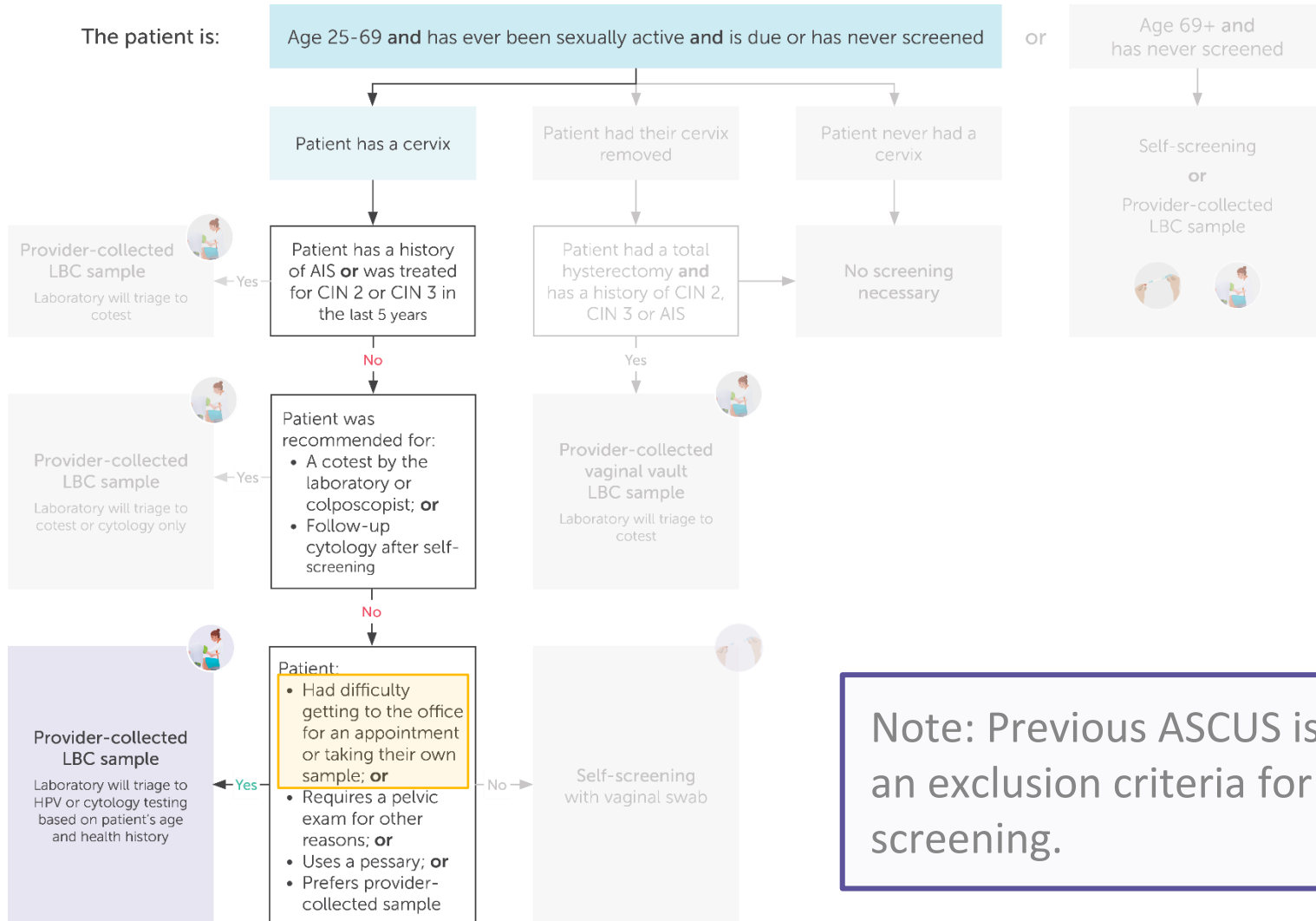
- 38 years old
- Lives in Port Renfrew
- Had a Pap test 6 months ago
- Previous result: ASCUS
- Drives over an hour to see her health care provider in Sooke

Erin books an appointment with her health care provider for her 6-month follow-up cervix screen...

Erin Meets with Her Health Care Provider



Should Erin **self-screen** or **get a provider-collected LBC sample**?



Erin Gets a Provider-Collected LBC Sample

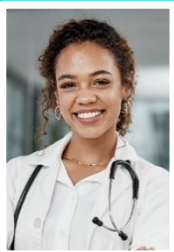


Erin's health care provider suggests she get a provider-collected LBC sample, so she won't need to travel back again if her result requires cytology follow-up.



BC
CAN

Erin's Health Care Provider Completes the Requisition



Cervical Cancer Screening Lab HPV + Pap (Cytology) Laboratory Requisition



Note: Samples must be properly labeled with the patient's surname and date of birth or sample will be rejected.
Yellow highlighted fields must be completed. Only 1 vial (or 1 swab) is required except for patients with a double cervix.

Patient PHN 9126785434	Patient DOB (dd/mmm/yyyy) 6-Oct-1985	Follow-up Practitioner/Clinic (MSP#, Name, Address) 62599, Julia Smith	
Patient Last Name Fisher	Patient First Name & Initials Erin		
Gender (for administrative purposes) <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> U (Unknown) <input type="checkbox"/> X (Non-binary)		Sample Provider (MSP# & Name) 62599, Julia Smith	<input type="checkbox"/> locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mmm/yyyy) 30-Jan-2024	LMP Date (dd/mmm/yyyy)	Copy to MSP# & Name	Copy to MSP# & Name

COLLECTION METHOD / SAMPLE SITE:

LBC vial: Cervix/Endocervix Vaginal swab: self-collect
 LBC vial: Vaginal Vault/Wall (collected with spatula/brush) Vaginal swab: provider-collect

REASON FOR TEST:

Primary/Asymptomatic screening
 Follow-up after self-collect HPV Other High Risk Positive (cytology)
 Follow-up at 12-months after HPV Other High Risk Positive (HPV)
 Follow-up after colposcopy discharge (Co-Test)
 Clinical abnormality - Abnormal bleeding (unexplained)*
 Clinical abnormality - Suspicious lesion*

*A screening test is not appropriate for individuals with signs/symptoms suggestive of cervical cancer. Further investigation is required. A Co-Test (HPV and cytology) will be performed but test results are not required for referral.

REASON FOR TEST - COLPOSCOPY USE ONLY

HPV Follow-up of HPV Other High Risk Positive
 Follow-up of HPV 16/18 Positive
 Other (please specify): _____

Co-Test Follow-up of CIN2+ or AIS
 DES exposure in utero
 Investigation of clinical abnormality (please specify): _____

Cytology only Follow-up of self-collect HPV Other High Risk Positive
 Other (please specify): _____

CLINICAL INFORMATION:

IUD
 DES exposure in utero ****Please refer to the BC Cancer Cervix Screening Program Overview document <http://www.bccancer.bc.ca/screening/health-professionals/cervix/resources>**
 Pelvic radiation
 Immunocompromised**

OUT OF PROVINCE cervical abnormality (histologically proven)

Date: _____ Location: _____

CIN2, CIN3 AIS (Adenocarcinoma in situ)
 Invasive cervical carcinoma

CLINICAL COMMENTS:

Previous ASCUS

Total Hysterectomy (cervix removed)

Date: _____ Pathology number: _____

Unknown reason Invasive cervical carcinoma
 No cervical abnormality Endometrial carcinoma
 CIN2, CIN3 Malignant, other: _____
 AIS (Adenocarcinoma in situ) Please specify: _____

DELIVER SAMPLES TO: Cervical Cancer Screening Laboratory 655 West 12 th Avenue Vancouver, BC	CONTACT: (T): 1-877-747-2522 (1-877-PHSA-LAB) (F): 604-707-2809	LAB USE ONLY:
---	--	----------------------



LBC Sample is Returned to the Cervical Cancer Screening Laboratory



At the laboratory, Erin's LBC sample is flagged by the laboratory for **HPV screening** due to her history of ASCUS.

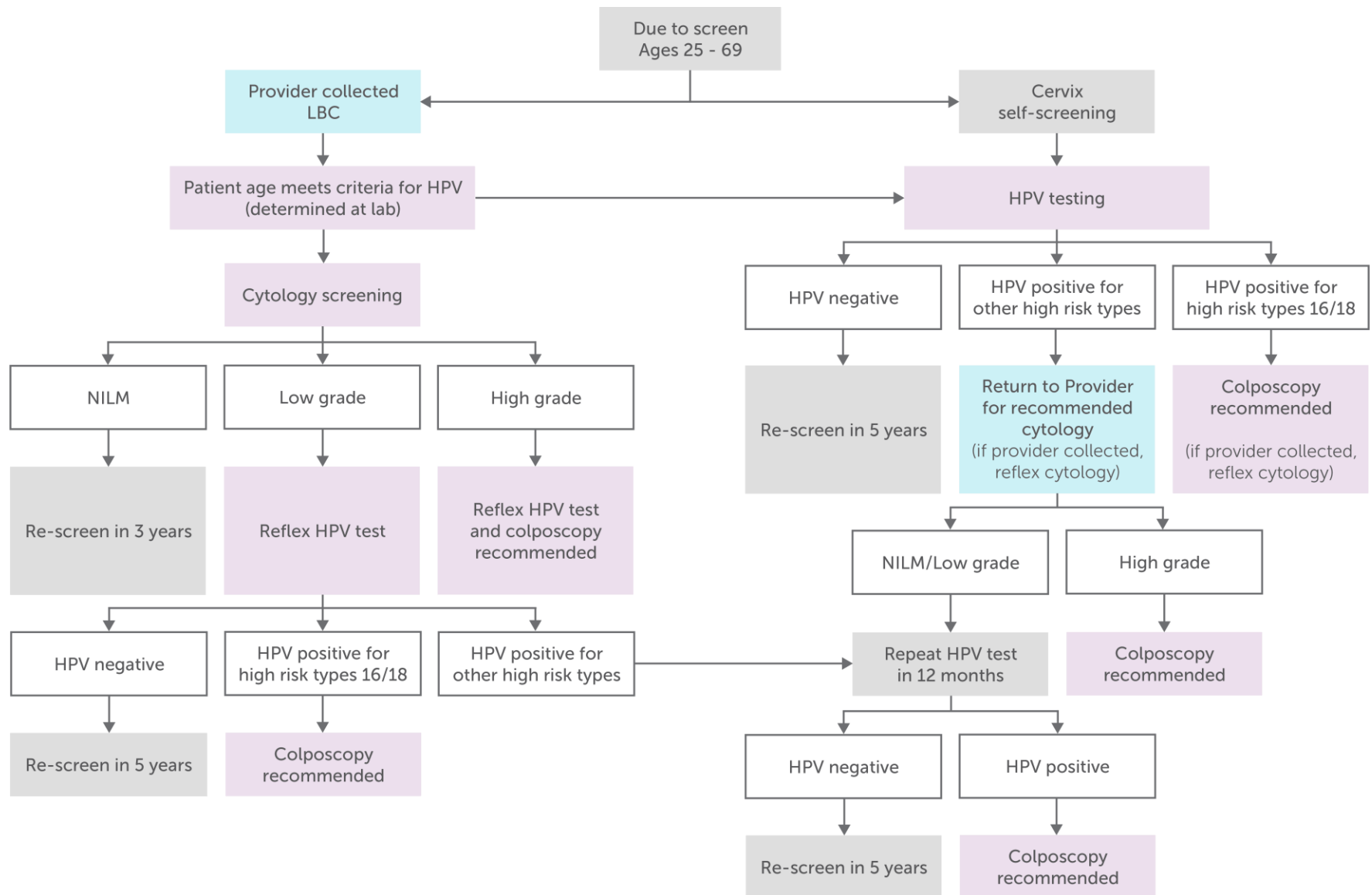
Her sample is negative for HPV.



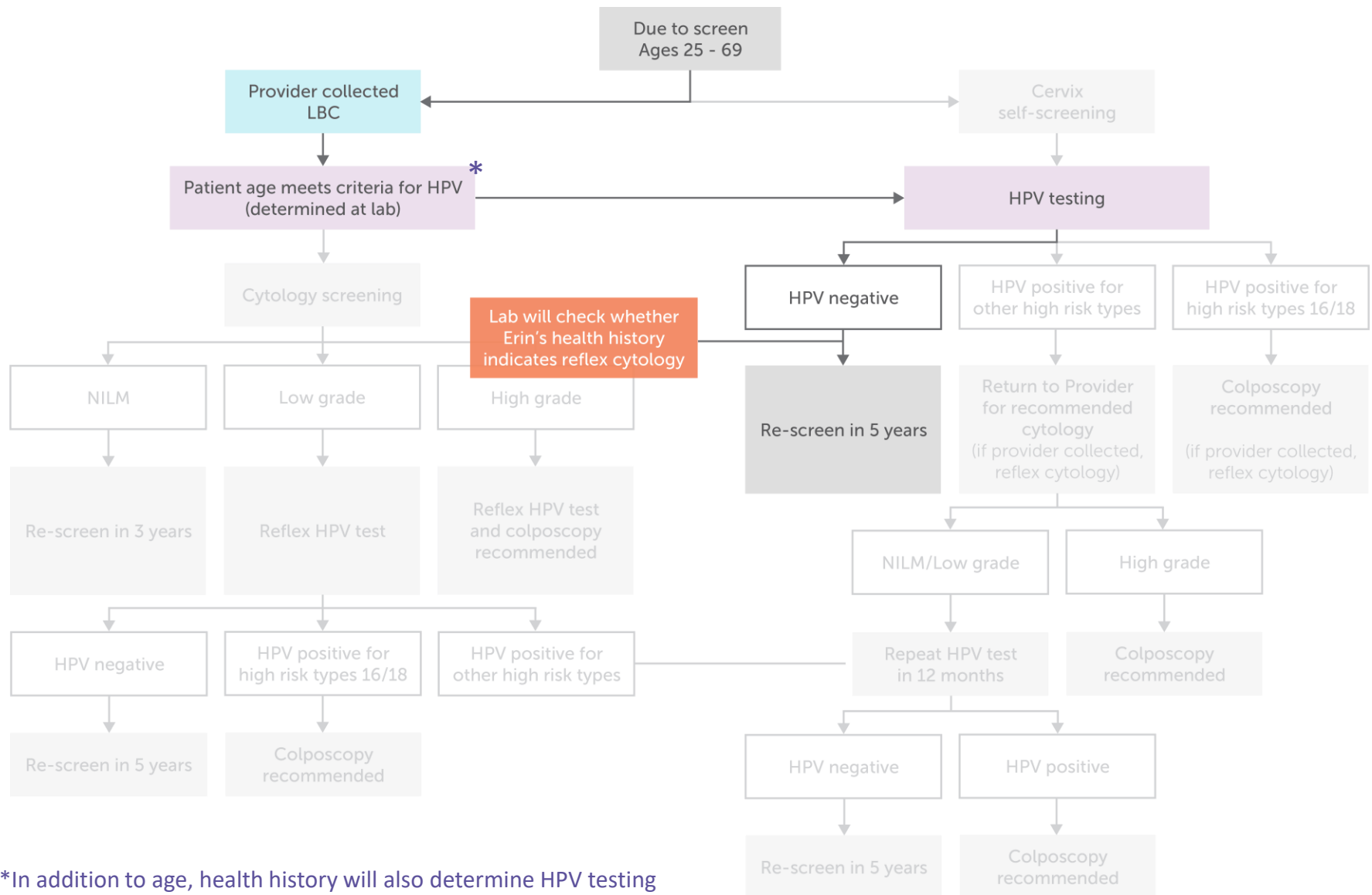
Result:
HPV Negative

Next Steps:
Screen in 5 years

Screening Algorithm

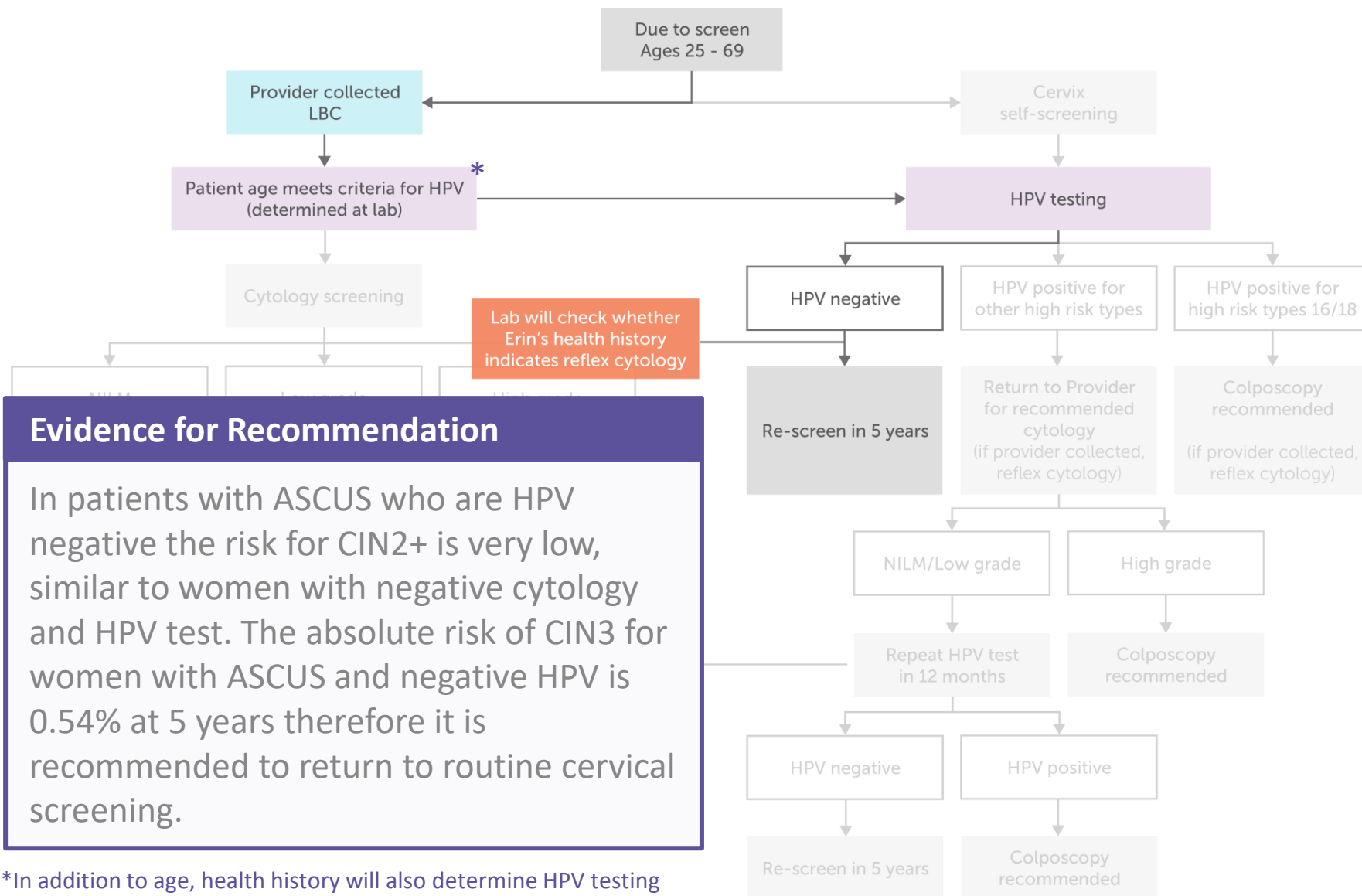


Screening Algorithm

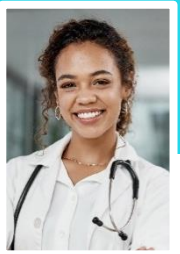


*In addition to age, health history will also determine HPV testing

Screening Algorithm



Cervical Cancer Screening Laboratory Report Sent to Erin's Health Care Provider



The laboratory report with both the HPV and cytology test results are sent to Erin's health care provider.

The laboratory report recommends re-screening in 5 years.

Result Sent to Erin



Erin receives her result on [HealthGateway](#) and through a letter in the mail:



Cervix Screening Result

May 12, 2025
Test Result Date: April 7, 2025

Erin Fisher
6596 Baird Rd
Port Renfrew, BC V0S 1K0

Results Notification – No Follow-Up Needed, Re-Screen in 5 Years

You are receiving this letter because you recently completed cervix screening.

Your result shows that no HPV (human papillomavirus) was found in your sample.

NEXT STEPS: No further action is required at this time.

You are recommended to repeat cervix screening in 5 years, unless otherwise recommended by a health care provider. If you are between the ages of 25 and 69 and are registered with a BC address, a reminder will be mailed to you when it is time to screen again.

Please note: HPV testing is highly effective at finding patients at risk of cervical cancer. When HPV isn't found, the chance of having abnormal cell changes on your cervix is very low for many years. This means you can safely wait for 5 years to screen again.

In addition to regular screenings, you should look out for any unusual changes to your body. If you have bleeding after sex, between periods or after menopause; increased vaginal discharge; pelvic pain or pain during sex, talk to a health care provider. It is important to look into these symptoms to protect your cervix health – even if your screening results are normal.

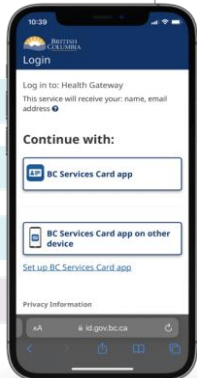
If you have changed your address, please visit <https://www.addresschange.gov.bc.ca/> to update your address with ICBC and Health Insurance BC at the same time.

For more information about the Cervix Screening Program, please visit our website at www.screeningbc.ca/cervix.

“No HPV was found. No further action needed at this time.”

“HPV testing is highly effective at finding people at risk of cervical cancer. This means you can safely wait for 5 years before you screen again.”

“If you have vaginal bleeding after sex, between periods or after menopause; abnormal or increased vaginal discharge; unexplained pelvic pain or pain during sex, talk to a health care provider.”



Linda

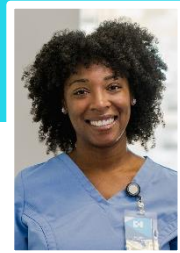
Meet Linda



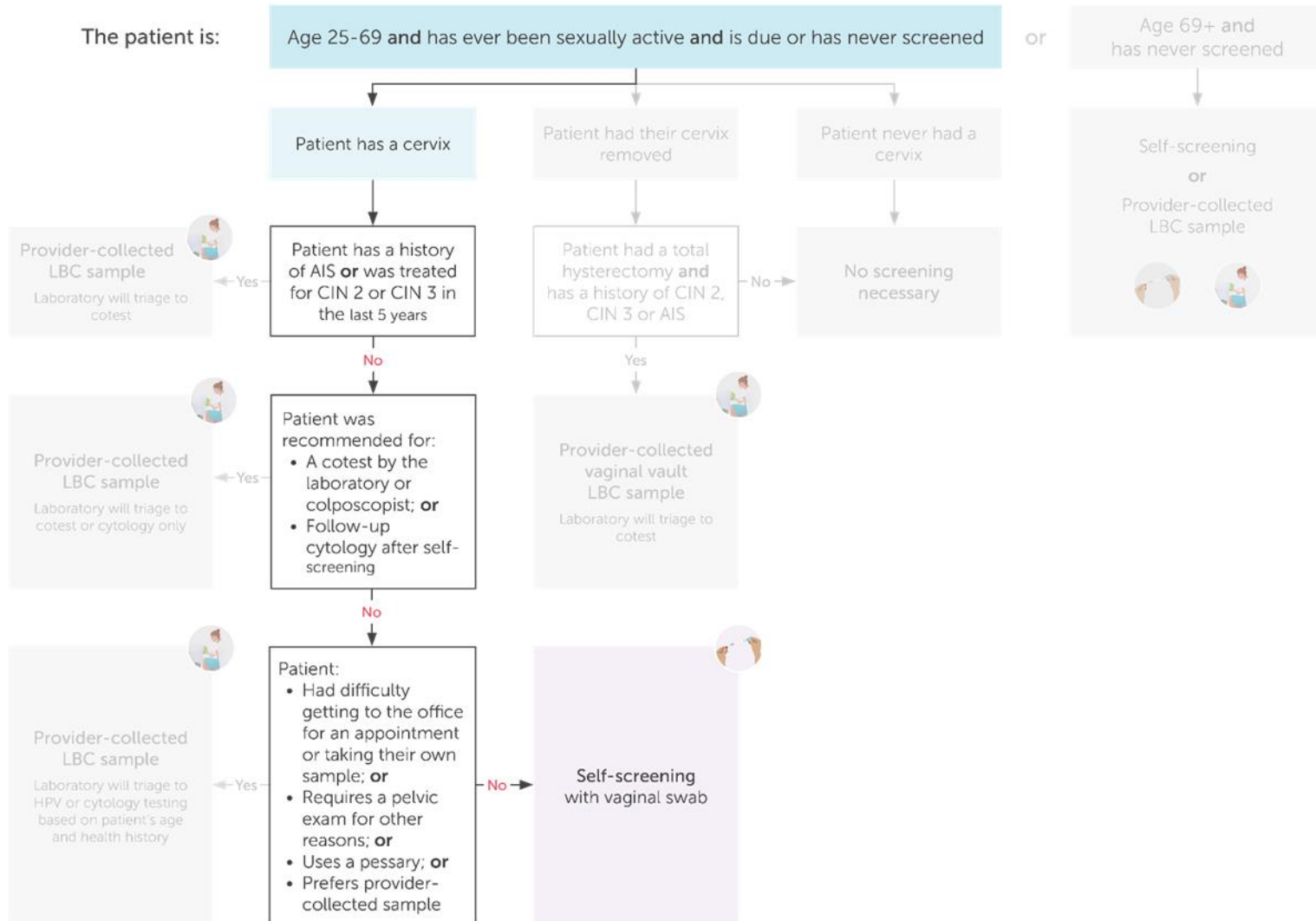
- 45 years old
- Lives in Kamloops
- Recently diagnosed with HIV – on antiretrovirals; undetectable viral load; CD4 count normal

Linda books an in-person appointment with their health care provider to get a medication refill and for a general check-up. Their health care provider also discusses cervix screening...

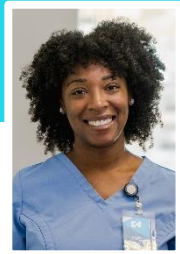
Linda Meets with Their Health Care Provider



Should Linda **self-screen** or get a **provider-collected LBC sample**?



Linda Gets a Vaginal Swab



After a discussion with their health care provider, Linda decides that they would like to complete self-screening at the clinic.

1. The health care provider explains to Linda how to collect their own sample using the vaginal swab.
2. Linda repeats back that they will slowly count to 20 as they rotate the swab in their vagina, confirming their understanding.
3. Linda collects their own sample in the clinic's washroom.
4. Linda returns the swab to the provider. The clinic will send the swab to the Cervical Cancer Screening Lab in the same package as their LBC samples.

INSTRUCTIONS

BEFORE USING THIS KIT:

- ✓ Read through these instructions or watch the step-by-step video: screeningbc.ca/cervix

DO NOT USE THIS KIT:

- ✗ When you are on your period. Wait until your period is over.
- ✗ If you are pregnant or use a pessary. Talk to a health care provider about your screening options.
- ✗ If you've had your cervix removed (e.g., total hysterectomy). Talk to a health care provider to see if cervix screening is still required.


- 1** Wash your hands. Get undressed from the waist down.
- 2** Prepare the swab: Hold the red cap to remove the swab from the tube. Put the tube on a clean surface. Do not touch the soft end of the swab.
- 3** Hold the swab at the red line.
- 4** Collect your sample: Stand (A) or sit (B) with your legs apart. Using your other hand, hold back the folds of skin.
- 5** Gently insert the swab into your vagina until your fingers touch your external genitals (vulva). Rotate the swab as you **slowly count to 20**, then remove the swab.
- 6** Slide the swab into the plastic tube and close firmly.

IF COMPLETING KIT AT THE CLINIC:

- 7** Double check the health care provider has labelled the collection date on your tube. Place the tube into the plastic bag. Seal the bag.
- 8** Return the sealed bag containing your collection device to the health care provider.
- 9** The health care provider will complete your lab requisition and submit your sample to the lab for you.

IF COMPLETING KIT AT HOME:

- 7** CLEARLY write your collection date on the tube label. AND the lab requisition. Place the tube into the plastic bag. Seal the bag.
- 8** Put the sealed bag and your lab requisition into the prepaid return envelope.
- 9** Drop off the envelope today at a Canada Post office or post box.



Linda's Health Care Provider Completes Requisition



Cervical Cancer Screening Lab HPV + Pap (Cytology) Laboratory Requisition



Note: Samples must be properly labeled with the patient's surname and date of birth or sample will be rejected.
Yellow highlighted fields must be completed. Only 1 vial (or 1 swab) is required except for patients with a double cervix.

Patient PHN 9865749178	Patient DOB (dd/mmm/yyyy) 26-Oct-1978	Follow-up Practitioner/Clinic (MSP#, Name, Address) 67899 Jacqueline Phillips 450 Lansdowne St. #36 Kamloops, BC V2C 1Y3	
Patient Last Name Thompson	Patient First Name & Initials Linda		
Gender (for administrative purposes) <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> U (Unknown) <input checked="" type="checkbox"/> X (Non-binary)		Sample Provider (MSP# & Name) 67899 Jacqueline Phillips	<input type="checkbox"/> Iocum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mmm/yyyy) 27-May-2024	LMP Date (dd/mmm/yyyy)	Copy to MSP# & Name	Copy to MSP# & Name

COLLECTION METHOD / SAMPLE SITE:

LBC vial: Cervix/Endocervix Vaginal swab: self-collect
 LBC vial: Vaginal Vault/Wall (collected with spatula/brush) Vaginal swab: provider-collect

REASON FOR TEST:

Primary/Asymptomatic screening
 Follow-up after self-collect HPV Other High Risk Positive (cytology)
 Follow-up at 12-months after HPV Other High Risk Positive (HPV)
 Follow-up after colposcopy discharge (Co-Test)
 Clinical abnormality - Abnormal bleeding (unexplained)*
 Clinical abnormality - Suspicious lesion*

*A screening test is not appropriate for individuals with signs/symptoms suggestive of cervical cancer. Further investigation is required. A Co-Test (HPV and cytology) will be performed but test results are not required for referral.

REASON FOR TEST - COLPOSCOPY USE ONLY

HPV

Follow-up of HPV Other High Risk Positive
 Follow-up of HPV 16/18 Positive
 Other (please specify): _____

Co-Test

Follow-up of CIN2+ or AIS
 DES exposure in utero
 Investigation of clinical abnormality (please specify): _____

Cytology only

Follow-up of self-collect HPV Other High Risk Positive
 Other (please specify): _____

CLINICAL INFORMATION:

IUD
 DES exposure in utero ****Please refer to the BC Cancer Cervix Screening Program Overview document <http://www.bccancer.bc.ca/screening/health-professionals/cervix/resources>**
 Pelvic radiation
 Immunocompromised**

OUT OF PROVINCE cervical abnormality (histologically proven)

Date: _____ Location: _____

CIN2, CIN3 AIS (Adenocarcinoma in situ)
 Invasive cervical carcinoma

CLINICAL COMMENTS:

Total Hysterectomy (cervix removed)

Date: _____ Pathology number: _____

Unknown reason Invasive cervical carcinoma
 No cervical abnormality Endometrial carcinoma
 CIN2, CIN3 Malignant, other: _____
 AIS (Adenocarcinoma in situ) Please specify: _____

DELIVER SAMPLES TO: Cervical Cancer Screening Laboratory 655 West 12 th Avenue Vancouver, BC	CONTACT: (T): 1-877-747-2522 (1-877-PHSA-LAB) (F): 604-707-2809	LAB USE ONLY:
---	--	----------------------

Linda's Health Care Provider Checks the Swab's Label



Linda's health care provider makes sure Linda's vaginal swab is properly labelled with the following identifiers:



Patient's last name

Patient's date of birth or PHN

Collection Date

Vaginal Swab is Returned to the Cervical Cancer Screening Laboratory



At the laboratory, Linda's sample is tested for **HPV**.

Linda's sample is Invalid. The Cervix Screening Program mails a self-screening kit to Linda to repeat screening.



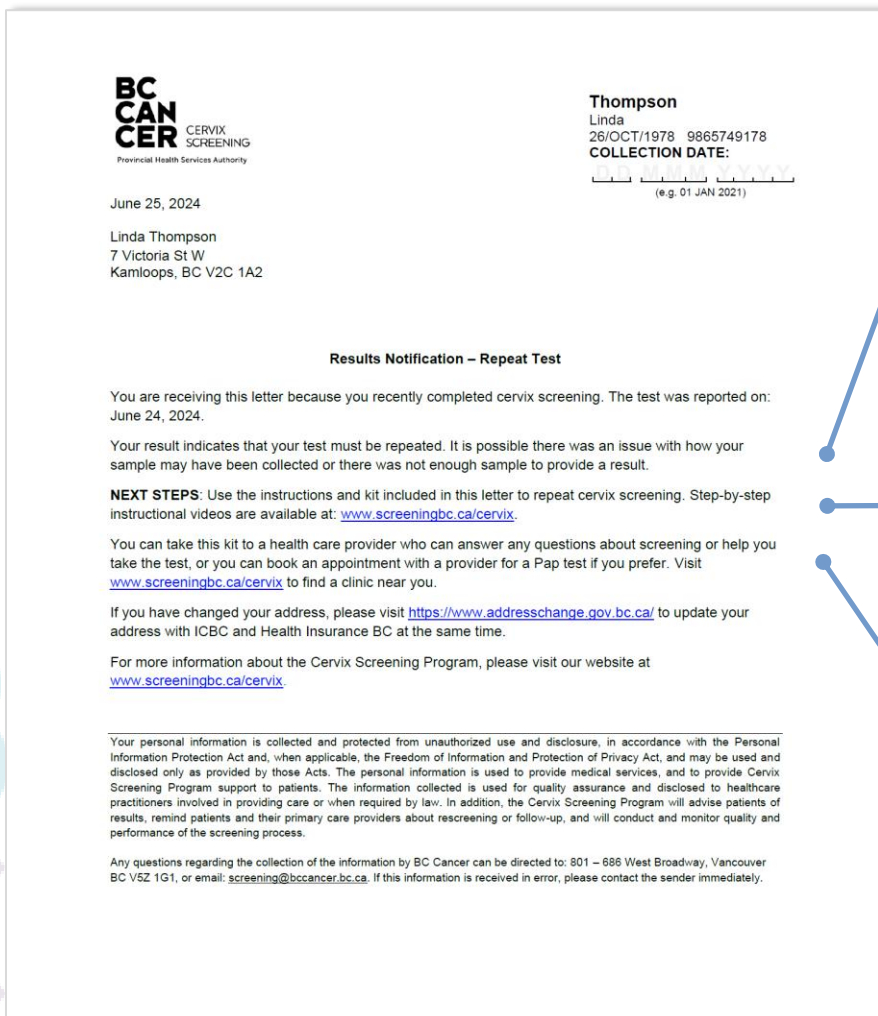
Result:
HPV Invalid

Next Steps:
Repeat HPV Testing

Result Sent to Linda



Linda receives a letter in the mail informing them that their HPV test needs to be repeated:



“Your result indicates that your test must be repeated. It is possible there was an issue with how your sample may have been collected or there was not enough sample to provide a result.”

“Use the instructions and kit included in this letter to repeat cervix screening.”

“You can take this kit to a health care provider who can answer any questions about screening or help you take the test...”

Linda Repeats Self-Screening Using their Mailed Kit



BC
CAN

Result:

Positive for HPV Other High-Risk Types

Next Steps:

Colposcopy Recommended

Facilitated Referral to Specialist Clinic

Cervical Cancer Screening Laboratory Report Sent to Linda's Health Care Provider



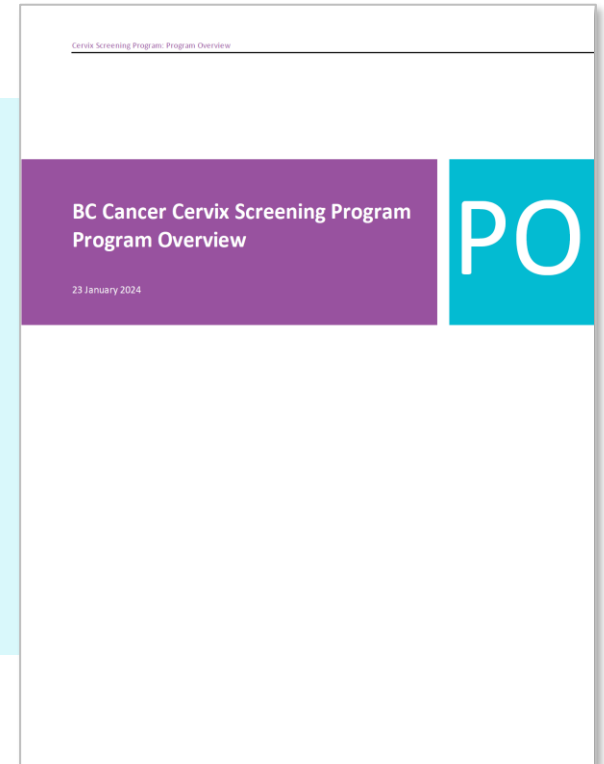
The laboratory report with Linda's HPV test result is sent to their health care provider.

The laboratory report indicates that colposcopy is recommended.

Why did Linda get referred for colposcopy when their result is positive for HPV Other High-Risk Type?

Those who are immunocompromised with a HPV Other High-Risk Positive result and No Cytology Result are referred to colposcopy directly.


For the criteria for immunocompromised patients, refer to the ***Cervix Screening Program Overview***.



Result Sent to Linda



Linda receives their result from their health care provider and through a letter in the mail:



**BC
CANCER** CERVIX SCREENING
Provincial Health Services Authority

Colposcopy

Answering your questions about HPV results and Colposcopy



Screening Test Result

July 3, 2024
Test Result Date: July 31, 2024

Linda Thompson
7 Victoria St W
Kamloops, BC V2C 1A2

Results Notification – Follow-Up Needed

You are receiving this letter because you recently completed cervix screening.

Your result shows that further follow-up is needed because a high-risk HPV type was found in your sample. You are recommended to have a colposcopy, a procedure used to look at the cervix more closely.

HPV (human papillomavirus) is common, usually harmless and often goes away on its own. When HPV is found, it does not mean you have or will develop cancer but it is important that you go to all follow-up appointments. For more information, please review the brochure included in this letter.

NEXT STEPS: The colposcopy clinic in your area will contact you directly to schedule follow-up. If you do not hear from the clinic within 6 weeks of receiving this letter, please contact Royal Inland Hospital at (250) 314-2100 ext. 3174.

If you have questions regarding next steps or your result, please speak with a health care provider.

This is the phone number(s) that was provided to the Colposcopy Clinic for them to reach you:
H: (604) 765-4321 M: (604) 369-8524. If this information is incorrect, please call the clinic at (250) 314-2100 ext. 3174 to give them your current phone number.

If you have changed your health care provider since your last cervix screening, please contact the program at 1-877-702-6566 so we can update your information. If you have changed your address, please visit <https://www.addresschange.gov.bc.ca> to update your address with ICBC and Health Insurance BC online at the same time.

For more information about the Cervix Screening Program, please visit our website at www.screeningbc.ca/cervix

“Your result shows that further follow-up is needed as a high-risk HPV type was found in your sample. You are recommended to have a colposcopy.”

“The colposcopy clinic in your area will contact you directly to schedule follow-up ... Royal Inland Hospital at (250) 314-2100 ext. 3174.”

Facilitated Referral to Colposcopy Clinic



The Screening Program facilitates a referral to the Colposcopy Clinic for Linda, on behalf of their health care provider:

**BC
CAN
CER** CERVIX SCREENING
Provincial Health Services Authority

COLPOSCOPY REFERRAL

Referral Date: July 31, 2024
Clinic: Royal Inland Hospital
Address: 311 Columbia Street Kamloops, BC, V2C 2T1

CLIENT INFORMATION

PHN: 9865749178
Name: Linda Thompson Sex: X
DOB: 1978-10-26 Age: 45
Address: 7 Victoria St W Kamloops, BC V2C 1A2
Home Phone: (604) 765-4321 Cell Phone: (604) 369-8524
Preferred Method of Contact: Phone Preferred Language: English
Alt Contact Name: N/A Relationship: N/A
Alt Contact Home: N/A Alt Contact Cell: N/A

HEALTH CARE PROVIDER CONTACT INFORMATION

Nurse/Doctor: Jacqueline Phillips MSC# 67899
Address: 450 Lansdowne St. #36 Kamloops, BC V2C 1Y3
Phone#: (250) 851-7954 Fax#: (604) 459-7158

REASON FOR REFERRAL

[Reason for Referral]

Reported on Date: [Reported on Date]
Collected on Date: [Collected On Date]
Sample Provider: [Sample Provider]
Interpretation: [Interpretation]
Recommendation: [Recommendation]
Wait Time Target*: [Wait Time Target]
Secondary Interpretation: [Secondary Interpretation]
Diagnosis Comment: [Diagnosis Comment]

*Wait time for screening referral indications are calculated using screening test reported on date to procedure date

Royal Inland Hospital is provided with Linda's contact information

Royal Inland Hospital is provided with Linda's health care provider's information

Odette

Meet Odette



- 63 years old
- Lives in Terrace
- Had a Pap test 2 years ago: **CIN 2**
– Underwent a LEEP in colposcopy; Had LBC collection in colposcopy 6 months after LEEP
- **Negative cotest in colposcopy** – Discharged from colposcopy; Recommended to have a cotest in 12 months through primary care

Odette receives a reminder letter in the mail to see a health care provider for a Pap test...

Odette Gets a Provider-Collected LBC Sample



Based on Odette's health history, Odette's health care provider collects a single liquid-based cytology (LBC) sample for cotesting (both HPV and cytology testing).



Note: Only a single LBC sample is needed. Do **not** also complete a vaginal collection.

Odette's Health Care Provider Completes the Requisition



Cervical Cancer Screening Lab HPV + Pap (Cytology) Laboratory Requisition



Note: Samples must be properly labeled with the patient's surname and date of birth or sample will be rejected.
Yellow highlighted fields must be completed. Only 1 vial (or 1 swab) is required except for patients with a double cervix.

Patient PHN 9852741639	Patient DOB (dd/mmm/yyyy) 22-Aug-1960	Follow-up Practitioner/Clinic (MSP#, Name, Address) 54723 Amisha Budi 4625 Park Ave Terrace, BC V8G 5L2	
Patient Last Name Makwa	Patient First Name & Initials Odette		
Gender (for administrative purposes) <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> U (Unknown) <input type="checkbox"/> X (Non-binary)		Sample Provider (MSP# & Name) 54723 Amisha Budi	<input type="checkbox"/> locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mmm/yyyy) 1-May-2024	LMP Date (dd/mmm/yyyy)	Copy to MSP# & Name	Copy to MSP# & Name

COLLECTION METHOD / SAMPLE SITE:

- LBC vial: Cervix/Endocervix Vaginal swab: self-collect
 LBC vial: Vaginal Vault/Wall Vaginal swab: provider-collect
(collected with spatula/brush)

REASON FOR TEST:

- Primary/Asymptomatic screening
 Follow-up after self-collect HPV Other High Risk Positive (cytology)
 Follow-up at 12-months after HPV Other High Risk Positive (HPV)
 Follow-up after colposcopy discharge (Co-Test)
 Clinical abnormality - Abnormal bleeding (unexplained)*
 Clinical abnormality - Suspicious lesion*

**A screening test is not appropriate for individuals with signs/symptoms suggestive of cervical cancer. Further investigation is required. A Co-Test (HPV and cytology) will be performed but test results are not required for referral.*

CLINICAL INFORMATION:

- IUD
 DES exposure in utero ****Please refer to the BC Cancer Cervix Screening Program Overview document**
 Pelvic radiation **<http://www.bccancer.bc.ca/screening/health-professionals/cervix/resources>**
 Immunocompromised**

CLINICAL COMMENTS:

--

REASON FOR TEST - COLPOSCOPY USE ONLY

- HPV** Follow-up of HPV Other High Risk Positive
 Follow-up of HPV 16/18 Positive
 Other (please specify): _____
- Co-Test** Follow-up of CIN2+ or AIS
 DES exposure in utero
 Investigation of clinical abnormality
(please specify): _____
- Cytology only** Follow-up of self-collect HPV Other High Risk Positive
 Other (please specify): _____

OUT OF PROVINCE cervical abnormality (histologically proven)

- Date: _____ Location: _____
 CIN2, CIN3 AIS (Adenocarcinoma in situ)
 Invasive cervical carcinoma

Total Hysterectomy (cervix removed)

- Date: _____ Pathology number: _____
 Unknown reason Invasive cervical carcinoma
 No cervical abnormality Endometrial carcinoma
 CIN2, CIN3 Malignant, other:
 AIS (Adenocarcinoma in situ) *Please specify:* _____

DELIVER SAMPLES TO:

Cervical Cancer Screening Laboratory
655 West 12th Avenue
Vancouver, BC

CONTACT:

(T): 1-877-747-2522 (1-877-PHSA-LAB)
(F): 604-707-2809

LAB USE ONLY:

--



LBC Sample is Returned to the Cervical Cancer Screening Laboratory



At the laboratory, Odette's LBC sample is tested for **both HPV and cytology (cotest)**.

Her sample is negative for HPV and cytology NILM.



Result:
HPV Negative, Cytology NILM

Next Steps:
Screen in 3 years

Cervical Cancer Screening Laboratory Report Sent to Odette's Health Care Provider



The laboratory report with both the HPV and cytology test results are sent to Odette's health care provider.

The laboratory report recommends re-screening in 3 years.

Why did Odette receive a recommendation to re-screen in 3 years?

After previous history of CIN, patients are no longer eligible for average risk screening and need to have HPV testing at 3-year intervals.

For the criteria for screening after excisional treatment for high grade CIN, refer to the ***Cervix Screening Program Overview***.

Screening after hysterectomy	<p>and with no past or present high-grade cervical abnormality (i.e. CIN 2, CIN 3, AIS or cervical carcinoma) can discontinue screening.</p> <ul style="list-style-type: none">• People who had a subtotal hysterectomy with conservation of the cervix and with no past or present high-grade cervical abnormality (i.e. CIN 2, CIN 3, AIS or cervical carcinoma) should continue to follow average risk guidelines.• People who have had a total hysterectomy with current or past high-grade cervical abnormality (i.e. CIN 2, CIN 3 or AIS) should have a cotest (HPV and cytology testing) on a sample from the vaginal vault at 12 months post hysterectomy. Any positive HPV test or if cytology shows ASC-H, HSIL or AGC, refer to colposcopy. If HPV is negative and cytology is NILM, ASCUS or LSIL, screening can be discontinued.
Screening after Excisional Treatment for High Grade Cervical Intraepithelial Neoplasia (CIN)	<ul style="list-style-type: none">• After discharge from colposcopy, cotest (HPV and cytology testing) at 12 months through their primary care provider.• If HPV is negative and cytology is NILM, ASCUS or LSIL they can transition back to routine HPV-based screening at 3 year intervals (average risk) or 1 year interval (immunocompromised).• If at the 12 months cotest (HPV and cytology testing), high risk HPV is positive or if cytology shows ASC-H, HSIL or AGC, re-refer to colposcopy.• Screening can be discontinued at age 69 (average risk) or 74 (immunocompromised) provided the patient has had a negative cotest (HPV and cytology testing) and they are under no active surveillance of pre-cursor abnormalities.

Result Sent to Odette



Odette receives her result on [HealthGateway](#) and through a letter in the mail:



Screening Test Result

May 27, 2024
Test Result Date: May 1, 2024

Odette Makwa
3215 Eby St
Terrace, BC V8G 2X8

Results Notification – Normal Result

You are receiving this letter because you were recently screened for cervical cancer (i.e. Pap test).

Your result was normal.

NEXT STEPS: No further action is required at this time.

You are recommended to have cervix screening in 3 years, unless otherwise recommended by your primary care provider. If you are registered with a BC address a reminder will be mailed to you when it is time to screen again.

In addition to regular screenings, you should look out for any unusual changes to your body. If you have bleeding after sex, between periods or after menopause; increased vaginal discharge; pelvic pain or pain during sex, talk to a health care provider. It is important to look into these symptoms to protect your cervix health – even if your screening results are normal.

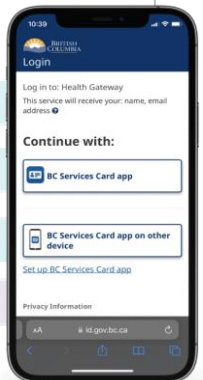
If you have changed your address, please visit <https://www.addresschange.gov.bc.ca/> to update your address with ICBC and Health Insurance BC online at the same time.

For more information about the Cervix Screening program, please visit our website at www.screeningbc.ca/cervix.

“Your result was normal. No further action needed at this time.”

“You are recommended to have cervix screening in 3 years...”

“If you have vaginal bleeding after sex, between periods or after menopause; abnormal or increased vaginal discharge; unexplained pelvic pain or pain during sex, talk to a health care provider.”



Nancy

Meet Nancy



- 74 years old
- Lives in Abbotsford
- Never had a Pap test

Nancy has an appointment with her health care provider for a refill of her blood pressure medication...

Nancy Gets a Vaginal Swab



After a discussion with her health care provider about cervix screening, Nancy decides that she would like to complete self-screening at the clinic.

1. The health care provider explains to Nancy how to collect her own sample using the vaginal swab.
2. Nancy repeats back that she will slowly count to 20 as she rotates the swab in her vagina, confirming her understanding.
3. Nancy collects her own sample in the clinic room.
4. Nancy returns the swab to the provider. The clinic will send the swab to the Cervical Cancer Screening Lab in the same package as their LBC samples.

INSTRUCTIONS

BEFORE USING THIS KIT:

- ✓ Read through these instructions or watch the step-by-step video: screeningbc.ca/cervix

DO NOT USE THIS KIT:

- ✗ When you are on your period. Wait until your period is over.
- ✗ If you are pregnant or use a pessary. Talk to a health care provider about your screening options.
- ✗ If you've had your cervix removed (e.g., total hysterectomy). Talk to a health care provider to see if cervix screening is still required.


- 1** Wash your hands. Get undressed from the waist down.
- 2** Prepare the swab: Hold the red cap to remove the swab from the tube. Put the tube on a clean surface. Do not touch the soft end of the swab.
- 3** Hold the swab at the red line.
- 4** Collect your sample: Stand (A) or sit (B) with your legs apart. Using your other hand, hold back the folds of skin.
- 5** Gently insert the swab into your vagina until your fingers touch your external genitals (vulva). Rotate the swab as you **slowly count to 20**, then remove the swab.
- 6** Slide the swab into the plastic tube and close firmly.

IF COMPLETING KIT AT THE CLINIC:

- 7** Double check the health care provider has labelled the collection date on your tube. Place the tube into the plastic bag. Seal the bag.
- 8** Return the sealed bag containing your collection device to the health care provider.
- 9** The health care provider will complete your lab requisition and submit your sample to the lab for you.

IF COMPLETING KIT AT HOME:

- 7** **CLEARLY** write your collection date on the tube label. **AND** the lab requisition. Place the tube into the plastic bag. Seal the bag.
- 8** Put the sealed bag and your lab requisition into the prepaid return envelope.
- 9** Drop off the envelope today at a Canada Post office or post box.



The image shows the COPAN FLOQSwabs kit, which includes a plastic tube with a red cap and a swab. The tube has a label with 'COPAN FLOQSwabs' and 'CE 0173 MID'. The swab has a red cap and a white handle. The kit is shown next to the instructions.

Nancy's Health Care Provider Completes Requisition



Cervical Cancer Screening Lab HPV + Pap (Cytology) Laboratory Requisition



Note: Samples must be properly labeled with the patient's surname and date of birth or sample will be rejected.
Yellow highlighted fields must be completed. Only 1 vial (or 1 swab) is required except for patients with a double cervix.

Patient PHN 9123456789	Patient DOB (dd/mmm/yyyy) 23-Sep-1950	Follow-up Practitioner/Clinic (MSP#, Name, Address) 85961 Rita Hansen 2051 McCallum Rd #101 Abbotsford, BC V2S 3N5	
Patient Last Name Bell	Patient First Name & Initials Nancy		
Gender (for administrative purposes) <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> U (Unknown) <input type="checkbox"/> X (Non-binary)		Sample Provider (MSP# & Name) 85961 Rita Hansen	<input type="checkbox"/> locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mmm/yyyy) 4-Mar-2024	LMP Date (dd/mmm/yyyy)	Copy to MSP# & Name	Copy to MSP# & Name

COLLECTION METHOD / SAMPLE SITE:

LBC vial: Cervix/Endocervix Vaginal swab: self-collect
 LBC vial: Vaginal Vault/Wall Vaginal swab: provider-collect
(collected with spatula/brush)

REASON FOR TEST:

Primary/Asymptomatic screening
 Follow-up after self-collect HPV Other High Risk Positive (cytology)
 Follow-up at 12-months after HPV Other High Risk Positive (HPV)
 Follow-up after colposcopy discharge (Co-Test)
 Clinical abnormality - Abnormal bleeding (unexplained)*
 Clinical abnormality - Suspicious lesion*

*A screening test is not appropriate for individuals with signs/symptoms suggestive of cervical cancer. Further investigation is required. A Co-Test (HPV and cytology) will be performed but test results are not required for referral.

REASON FOR TEST - COLPOSCOPY USE ONLY

HPV Follow-up of HPV Other High Risk Positive
 Follow-up of HPV 16/18 Positive
 Other (please specify): _____

Co-Test Follow-up of CIN2+ or AIS
 DES exposure in utero
 Investigation of clinical abnormality
 (please specify): _____

Cytology only Follow-up of self-collect HPV Other High Risk Positive
 Other (please specify): _____

CLINICAL INFORMATION:

IUD
 DES exposure in utero ****Please refer to the BC Cancer Cervix Screening Program Overview document**
 Pelvic radiation **<http://www.bccancer.bc.ca/screening/health-professionals/cervix/resources>**
 Immunocompromised**

OUT OF PROVINCE cervical abnormality (histologically proven)

Date: _____ Location: _____

CIN2, CIN3 AIS (Adenocarcinoma in situ)
 Invasive cervical carcinoma

CLINICAL COMMENTS:

Total Hysterectomy (cervix removed)

Date: _____ Pathology number: _____

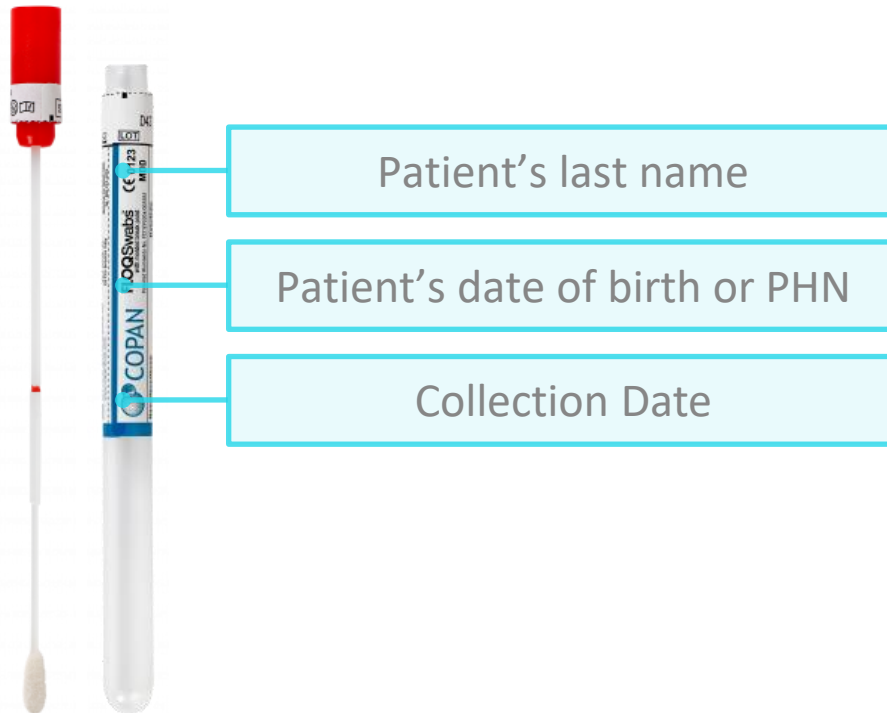
Unknown reason Invasive cervical carcinoma
 No cervical abnormality Endometrial carcinoma
 CIN2, CIN3 Malignant, other:
 AIS (Adenocarcinoma in situ) *Please specify: _____*

DELIVER SAMPLES TO: Cervical Cancer Screening Laboratory 655 West 12 th Avenue Vancouver, BC	CONTACT: (T): 1-877-747-2522 (1-877-PHSA-LAB) (F): 604-707-2809	LAB USE ONLY:
---	--	----------------------

Nancy's Health Care Provider Checks the Swab's Label



Nancy's health care provider makes sure Nancy's vaginal swab is properly labelled with the following identifiers:



Vaginal Swab is Returned to the Cervical Cancer Screening Laboratory



At the laboratory, Nancy's sample is tested for **HPV**.

Her sample is positive for HPV Other High-Risk Types.



BO
CAN

Result:
HPV Other High-Risk Types

Next Steps:
Colposcopy Recommended
Facilitated Referral to Specialist Clinic

Cervical Cancer Screening Laboratory Report Sent to Nancy's Health Care Provider



The laboratory report with Nancy's HPV test result is sent to Nancy's health care provider.

The laboratory report indicates that colposcopy is recommended.

Why did Nancy get referred for colposcopy when her result is positive for HPV Other High-Risk Type?

Those with a positive HPV result after the age of 69, regardless of HPV genotype or cytology result, are referred to colposcopy directly.

Result Letter Sent to Nancy



Nancy receives her result from her health care provider and through a letter in the mail:



Colposcopy
Answering your questions
about HPV results and Colposcopy



Screening Test Result

March 4, 2024
Test Result Date: February 5, 2024

Nancy Bell
32315 South Fraser Way
Abbotsford, BC V2T 1W7

Results Notification – Follow-Up Needed

You are receiving this letter because you recently completed cervix screening.

Your result shows that further follow-up is needed because a high-risk HPV type was found in your sample. You are recommended to have a colposcopy, a procedure used to look at the cervix more closely.

HPV (human papillomavirus) is common, usually harmless and often goes away on its own. When HPV is found, it does not mean you have or will develop cancer but it is important that you go to all follow-up appointments. For more information, please review the brochure included in this letter.

NEXT STEPS: The colposcopy clinic in your area will contact you directly to schedule follow-up. If you do not hear from the clinic within 6 weeks of receiving this letter, please contact Abbotsford Regional Hospital at (604) 851-4700 ext. 646788.

If you have questions regarding next steps or your result, please speak with a health care provider.

This is the phone number(s) that was provided to the Colposcopy Clinic for them to reach you:
H: (604) 123-4567 M: (604) 987-6543. If this information is incorrect, please call the clinic at (604) 851-4700 ext. 646788 to give them your current phone number.

If you have changed your health care provider since your last cervix screening, please contact the program at 1-877-702-6566 so we can update your information. If you have changed your address, please visit <https://www.addresschange.gov.bc.ca> to update your address with ICBC and Health Insurance BC online at the same time.

For more information about the Cervix Screening Program, please visit our website at www.screeningbc.ca/cervix.

“Your result shows that further follow-up is needed as a high-risk HPV type was found in your sample. You are recommended to have a colposcopy.”

“The colposcopy clinic in your area will contact you directly to schedule follow-up ... Contact Abbotsford Regional Hospital at (604) 851-4700 ext. 646788.”

Facilitated Referral to Colposcopy Clinic



The Screening Program facilitates a referral to the Colposcopy Clinic for Nancy, on behalf of her health care provider:



COLPOSCOPY REFERRAL

Referral Date: March 4, 2024
Clinic: Abbotsford Regional Hospital
Address: 32900 Marshall Road Abbotsford, BC, V2S 0C2

CLIENT INFORMATION

PHN: 9123456789
Name: Nancy Bell Sex: F
DOB: 1950-09-23 Age: 74
Address: 32315 South Fraser Way Abbotsford, BC V2T 1W7
Home Phone: (604) 123-4567 Cell Phone: (604) 987-6543
Preferred Method of Contact: Phone Preferred Language: English
Alt Contact Name: N/A Relationship: N/A
Alt Contact Home: N/A Alt Contact Cell: N/A

HEALTH CARE PROVIDER CONTACT INFORMATION

Nurse/Doctor: Rita Hansen MSC# 85961
Address: 2051 McCallum Rd #101 Abbotsford, BC V2S 3N5
Phone#: (604) 744-5133 Fax#: (778) 360-2233

REASON FOR REFERRAL

[Reason for Referral]

Reported on Date: [Reported on Date]
Collected on Date: [Collected On Date]
Sample Provider: [Sample Provider]
Interpretation: [Interpretation]
Recommendation: [Recommendation]
Wait Time Target*: [Wait Time Target]
Secondary Interpretation: [Secondary Interpretation]
Diagnosis Comment: [Diagnosis Comment]

*Wait time for screening referral indications are calculated using screening test reported on date to procedure date

Abbotsford Regional Hospital is provided with Nancy's contact information.

Abbotsford Regional Hospital is provided with Nancy's family doctor information.

Nancy's Colposcopy Results



- Cytology: **ASCUS**
- Biopsy and ECC: **No evidence of dysplasia**

BC
CAN

Recommendation for Nancy: Discharged from Colposcopy, HPV Test in 12 Months



Site Examined <input checked="" type="checkbox"/> Cervix <input type="checkbox"/> Vagina Adequacy (Cervix) <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> Inadequate Transformation Zone <input checked="" type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3	<input checked="" type="checkbox"/> Done <input type="checkbox"/> Not Done ECC <input checked="" type="checkbox"/> Done <input type="checkbox"/> Not Done Other Procedure <input type="checkbox"/> Endometrial Biopsy <input checked="" type="checkbox"/> Pap Test <input type="checkbox"/> Vaginal Biopsy <input type="checkbox"/> HPV Test	<input type="checkbox"/> DES Exposure Clinical Abnormality: _____ Repeat Colposcopy for: _____ Treatment Follow Up Year of Treatment: _____ Visit #: _____ <input type="checkbox"/> CIN 2/3 <input type="checkbox"/> AIS <input type="checkbox"/> Cancer <input type="checkbox"/> VAIN <input type="checkbox"/> HPV Negative <input type="checkbox"/> HPV Positive Type: _____ <input type="checkbox"/> Other: _____
4. IMPRESSION <input type="checkbox"/> Negative for Dysplasia <input type="checkbox"/> HPV/Condyloma <input type="checkbox"/> Benign Atypia <input checked="" type="checkbox"/> CIN1 <input type="checkbox"/> CIN2 <input type="checkbox"/> CIN3 <input type="checkbox"/> AIS <input type="checkbox"/> Microinvasive SCC <input type="checkbox"/> Malignant SCC <input type="checkbox"/> Adenocarcinoma <input type="checkbox"/> VAIN 1 <input type="checkbox"/> VAIN 2/3		
Diagram for lesion BIOPSY SITE		Comments
5. RESULTS <input checked="" type="checkbox"/> Negative for Dysplasia <input type="checkbox"/> Insufficient Samples <input type="checkbox"/> HPV/Condyloma <input type="checkbox"/> Benign Atypia <input type="checkbox"/> CIN 1 <input type="checkbox"/> CIN 2 <input type="checkbox"/> CIN 3 <input type="checkbox"/> HSIL NOS <input type="checkbox"/> AIS <input type="checkbox"/> Microinvasive SCC <input type="checkbox"/> Malignant SCC <input type="checkbox"/> Adenocarcinoma <input type="checkbox"/> VAIN 1 <input type="checkbox"/> VAIN 2/3 <input type="checkbox"/> Other: _____ HPV: <input type="checkbox"/> Negative <input type="checkbox"/> Positive Type _____ <input type="checkbox"/> Cytology/Pathology Review Completed		
7. RECOMMENDATIONS (Complete only 7a, 7b, or 7c) Date (YYYYMMDD) _____		
7a. Return to Colposcopy Clinic Colposcopy in: Booked: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 6 Months <input type="checkbox"/> 12 Months <input type="checkbox"/> ____ Months Treatment within: Booked: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 2 Months <input type="checkbox"/> ____ Months Site: <input type="checkbox"/> Cervix <input type="checkbox"/> Vagina Type: <input type="checkbox"/> LEEP <input type="checkbox"/> Laser <input type="checkbox"/> Other: _____		
7b. Return to Primary Care HPV Test in: <input checked="" type="checkbox"/> 12 Months <input type="checkbox"/> ____ Months Co-Test (Cytology & HPV Test) in: <input type="checkbox"/> 12 Months <input type="checkbox"/> ____ Months <input type="checkbox"/> Gynecology Referral (Primary Provider to Arrange) re: _____		
7c. Other Recommendation <input type="checkbox"/> Patient Referred to BC Cancer <input type="checkbox"/> Gynecological Consult (Colposcopist to Arrange) <input type="checkbox"/> No Further Screening or Colposcopy Required <input type="checkbox"/> Hysterectomy Discussion re: _____ <input type="checkbox"/> Other: _____		
HPV Vaccine <input type="checkbox"/> HPV Vaccine Recommended <input type="checkbox"/> HPV Vaccine Rx Provided		Attention Provider <input type="checkbox"/> Inform Patient of Result <input checked="" type="checkbox"/> Patient Aware of Result _____ Colposcopist Signature
6. FINAL EVALUATION <input checked="" type="checkbox"/> Negative for Dysplasia <input type="checkbox"/> HPV/Condyloma <input type="checkbox"/> Benign Atypia <input type="checkbox"/> CIN 1 <input type="checkbox"/> CIN 2 <input type="checkbox"/> CIN 3 <input type="checkbox"/> AIS <input type="checkbox"/> Microinvasive SCC <input type="checkbox"/> Malignant SCC <input type="checkbox"/> Adenocarcinoma <input type="checkbox"/> VAIN 1 <input type="checkbox"/> VAIN 2/3 <input type="checkbox"/> Other: _____		

INFORMATION ON THIS FORM IS CONFIDENTIAL
 IF YOU RECEIVE THIS IN ERROR PLEASE FAX TO
 QUALITY DEPT: 1 (604)708-2114

40140



12 Months Later: A Kit is Sent to Nancy



Result:
HPV Negative

Next Steps:
No Follow-up Needed
Discharged from Screening Program

Result Letter is Sent to Nancy



Nancy receives her result from her doctor and through a letter in the mail:

**BC
CANCER** CERVIX SCREENING
Provincial Health Services Authority

Cervix Screening Result

May 12, 2025
Test Result Date: April 7, 2025

Nancy Bell
32315 South Fraser Way
Abbotsford, BC V2T 1W7

Results Notification – No Follow-Up Needed, Re-Screen in 5 Years

You are receiving this letter because you recently completed cervix screening.

Your result shows that no HPV (human papillomavirus) was found in your sample.

NEXT STEPS: No further action is required at this time.

You are recommended to repeat cervix screening in 5 years, unless otherwise recommended by a health care provider. If you are between the ages of 25 and 69 and are registered with a BC address, a reminder will be mailed to you when it is time to screen again.

Please note: HPV testing is highly effective at finding patients at risk of cervical cancer. When HPV isn't found, the chance of having abnormal cell changes on your cervix is very low for many years. This means you can safely wait for 5 years to screen again.

In addition to regular screenings, you should look out for any unusual changes to your body. If you have bleeding after sex, between periods or after menopause; increased vaginal discharge; pelvic pain or pain during sex, talk to a health care provider. It is important to look into these symptoms to protect your cervix health – even if your screening results are normal.

If you have changed your address, please visit <https://www.addresschange.gov.bc.ca/> to update your address with ICBC and Health Insurance BC at the same time.

For more information about the Cervix Screening Program, please visit our website at www.screeningbc.ca/cervix.

“You are recommended to repeat cervix screening in 5 years, unless otherwise recommended by a health care provider...”

“If you have vaginal bleeding after sex, between periods or after menopause; abnormal or increased vaginal discharge; unexplained pelvic pain or pain during sex, talk to your health care provider.”

Thank you!