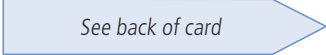


Cervical Cancer Screening

Reference
Link

SCREENING

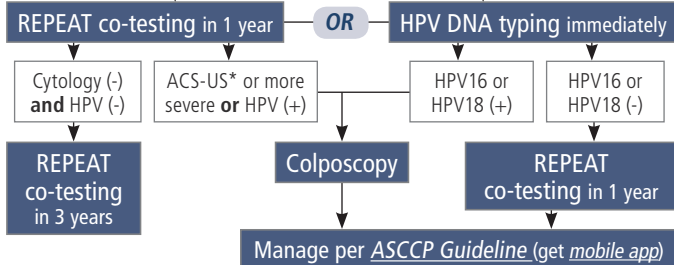
SCREEN women based on age		
Patient age	Test	Frequency
<21 (regardless of sexual history)	Do not screen	
21 to 29	Cytology (Pap smear) <i>Request reflexive HPV testing on all ASC-US results</i>	Every 3 years
30 to 65	Co-testing: Cytology and HPV testing (<i>preferred</i>)	Every 5 years
	OR Cytology	Every 3 years
Patient identifiers	Screening notes	
>65 who have had adequate prior screening and are not high risk*	Do not screen <i>*High risk: Women with a history of CIN2/3 or a more severe diagnosis</i>	
After hysterectomy with removal of cervix and with no history of high-grade pre-cancer or cervical cancer	Do not screen	
HPV vaccinated	Screen following guidelines above	
Immunosuppressed or HIV (+)	Per provider discretion (<i>usually yearly</i>)	
Any age with (+) cytology or HPV	 See back of card	
Note: These recommendations do not signal an end of the annual visit for women. Other important components of female healthcare screening and evaluation may need to be addressed at least annually.		

Cervical Cancer Screening

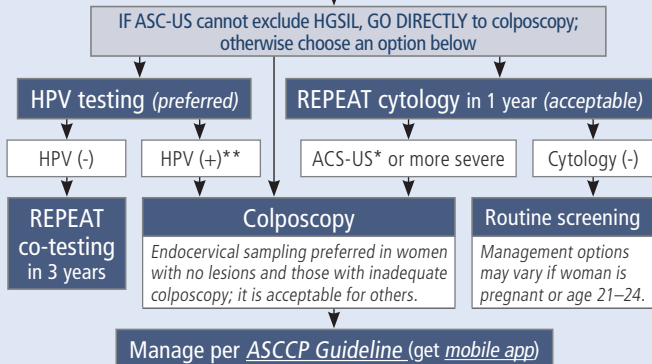
Reference Link

MANAGEMENT

Age ≥ 30 with (-) Cytology and (+) HPV



ASC-US* on cytology



* ASC-US: atypical squamous cells of undetermined significance

** Managed the same as women with low-grade squamous intraepithelial lesion (LSIL)