

National Cervical Screening Program

Cervical screening: The next round

December 2022 marked five years since the rollout of HPV testing as the primary screening test for the National Cervical Screening Program. In 2023, many patients will become eligible for screening in the next 5-year cycle. It is important to speak with your patients about testing to prevent cervical cancer.

Key points

- Medicare-funded routine cervical screening tests (CST) are available to patients aged **24 years and 9 months to 74 years (once in a 57-month period)**.
- Clinician-collected samples must be collected into ThinPrep® vials. To avoid re-collection, please check the expiry date.
- Request forms must specify the requested test, plus the reason for testing, plus supporting clinical notes.
- Self-collection is available to all patients due for their 5-yearly CST.

A risk-based approach

The CST uses an HPV DNA test to detect the presence of oncogenic HPV types known to be associated with a higher risk of developing significant cervical abnormalities. The HPV test is more sensitive than cytology, so it can be performed less frequently.

- **Asymptomatic patients who test negative** for oncogenic HPV are at low risk of developing cervical cancer and only need to be screened every 5 years.
- **Asymptomatic patients who test positive** for oncogenic HPV will have a liquid-based cytology (LBC) test performed on the same sample (reflex LBC) and will be assessed as either intermediate risk and advised to return for further testing in 12 months, or higher risk and referred for colposcopy.

- **Symptomatic patients and those with a history of high-grade cervical pathology** will have both an HPV and LBC test (co-test) performed, regardless of their HPV result.
- Patients with special circumstances identified by the program may be offered more frequent screening or a single screening test prior to age 25.

Sample collection

Clinician-collected samples

The HPV collection procedure is similar to taking a Pap test, but all material must be collected into a ThinPrep® vial.

Self-collected HPV test

Patients due for their 5-yearly CST are eligible for self-collection, as the previous restrictions for this option no longer apply.

Self-collected samples cannot be used for Test of Cure follow-up or symptomatic patients; these patients need a co-test, HPV and cytology, performed simultaneously.

Patient instructions* and red-topped FLOQ swabs are available to order via our Stores Department.

*Order code D01072 for a pad of 25 sheets



Ordering a CST

Patients are eligible to return for routine screening at 4 years and 9 months following their previous CST. In order for a Medicare rebate to apply, it is important to indicate:

- The specific test required. Most samples will be clinician-collected cervical samples, however, for vaginal and self-collected (vaginal) samples, please indicate the site in the test name as shown below.
- Clinical notes supporting the reason for testing must be included on your pathology request so that the appropriate test can be performed.
- Any other relevant clinical information, particularly details of any abnormal vaginal bleeding (for example, post-coital bleeding single episode or recurrent, post-menopausal bleeding, pain during intercourse) and any other relevant screening or gynaecological history.

The most common ordering scenarios are described in the tables below.

| CERVICAL TESTS | Reason for test | Medicare restrictions |
|--------------------------|--|--|
| CST routine (HPV) | <ul style="list-style-type: none"> ▪ Asymptomatic screening | Aged 24 years and 9 months–74 years (1 test in a 57-month period) |
| Co-test (HPV+LBC) | <ul style="list-style-type: none"> ▪ Symptomatic (provide details of symptoms) ▪ DES exposed ▪ Test of Cure, previous HSIL ▪ Follow-up, previous AIS | Any age, no time restriction |
| HPV test | <ul style="list-style-type: none"> ▪ Follow-up 12-month repeat test ▪ Immune-deficient ▪ Early sexual debut (<14 years) prior to vaccination ▪ Previous unsatisfactory HPV test | Aged 20–24 years (1 test only) Must have previous cervical MBS screening item |
| LBC test | <ul style="list-style-type: none"> ▪ Following HPV (not 16/18) detection in a self-collected sample ▪ Previous unsatisfactory LBC test | Must have previous cervical MBS screening item |

| VAGINAL TESTS | Reason for test | Medicare restrictions |
|----------------------------------|---|---|
| Vaginal co-test (HPV+LBC) | <ul style="list-style-type: none"> ▪ Hysterectomy and previous HSIL | Test of Cure not complete prior to hysterectomy |
| Vaginal HPV test | <ul style="list-style-type: none"> ▪ Previous hysterectomy without evidence of cervical pathology ▪ Previous hysterectomy screening history unknown ▪ Previous unsatisfactory vaginal HPV test | Must have previous vaginal MBS screening item |
| Vaginal LBC test | <ul style="list-style-type: none"> ▪ Previous unsatisfactory vaginal LBC test | Must have previous vaginal MBS screening item |

| SELF-COLLECTED HPV TEST | Reason for test | Medicare restrictions |
|--|---|---|
| Self-collected HPV test (vaginal) | <ul style="list-style-type: none"> ▪ Asymptomatic screening ▪ Refused speculum examination ▪ Follow-up at 12 months following positive HPV (not 16/18) and negative cytology | Aged 24 years and 9 months–74 years (1 test in a 57-month period) |

For further information or assistance, please contact a member of the GynaePath team on (02) 9855 6200.