



Provincial Health Services Authority

From Pilot to Provincial Practice: **Implementing HPV-Based Cervical Cancer Screening in BC**

BC Cancer

February 13, 2024



We acknowledge with gratitude, that we are gathered on the traditional, ancestral and unceded territories of the x^wməθk^wəyəm (Musqueam), Skwxwú7mesh Úxwumixw (Squamish), and səlílwata? (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

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



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



Laurie Smith

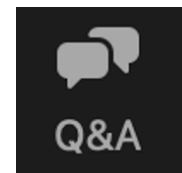
Research Program
Manager, Global Control
HPV Related Diseases/HPV
FOCAL

Disclosures

The speakers have nothing to disclose.

Format

- 90-minute webinar
 - 60-minute case presentations, with case specific Q&A
 - 30-minute Q&A
- Speaker and slides visible on the screen
- Submit questions through the Q&A function on Zoom
 - Case-specific questions will be answered during breaks between cases
 - More time for general questions after the presentation
- Email Cheryl.Hankey@bccancer.bc.ca for tech support



New Policy Launch: Transition to HPV Primary Screening

January 2024



Provider-Collected Cervix Screening

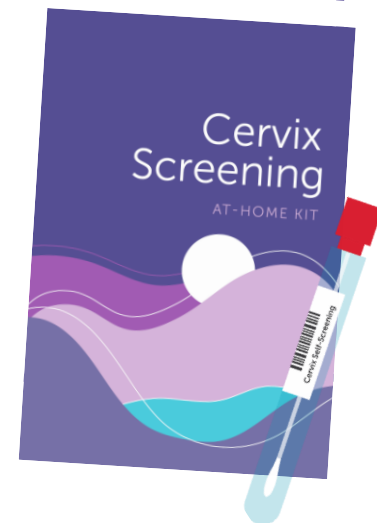
Available to anyone ages 25-69 due for screening

- 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



Resources: Health Professionals Webpage

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

Provincial Health Services Authority

[Return to the BC Cancer site](#)


BC Cancer Screening

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Breast	Cervix	Colon	Lung	Health Professionals	Contact
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Menu [Health Professionals / Cervix Screening for Health Professionals](#) [SHARE](#) [A](#) [A](#)

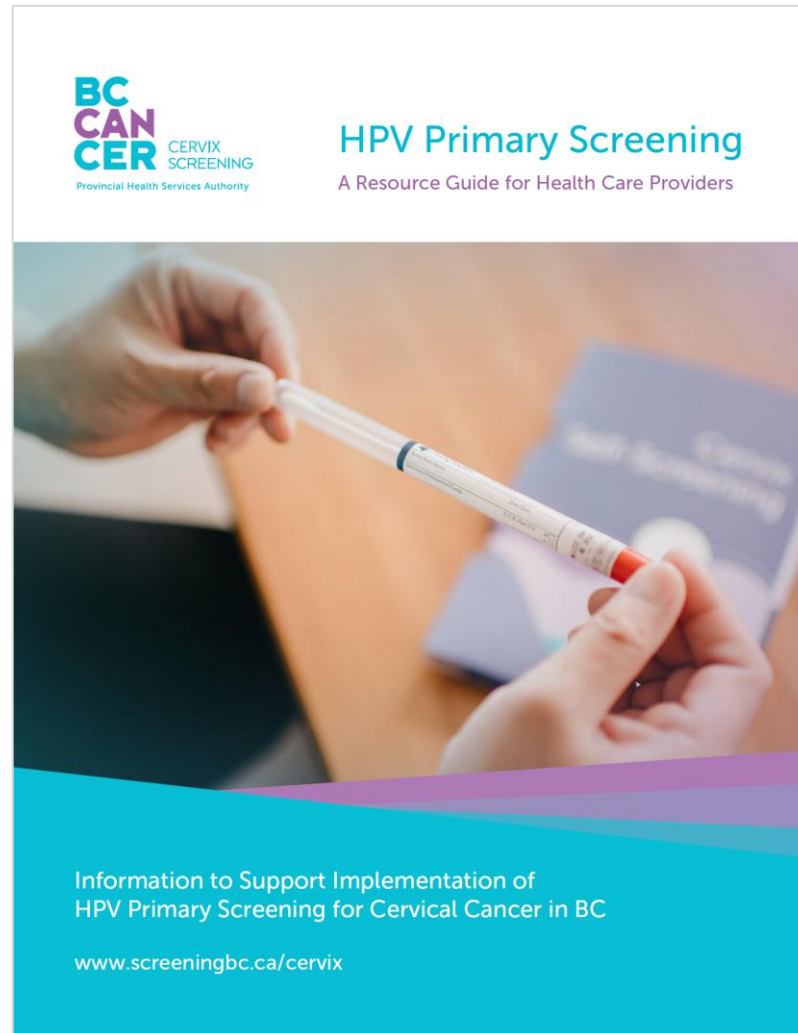
Cervix Screening for Health Professionals



In this section

Health Professionals	
Breast Screening for Health Professionals	+
Cervix Screening for Health Professionals	—
Resources	

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?

The transition to HPV screening in BC allows more choice for patients and providers regarding how samples for cervix screening can be collected.

Self-screening involves using a swab to collect a sample from the vaginal secretions. Swabs collected through self-screening can only be used for HPV testing. A sample of cells from the cervix is not required for self-screening swabs. If a self-screening test is positive for HPV, cytology may be recommended, and the patient will need to see a provider for a liquid-based cytology (LBC) sample. LBC collection can only be performed by a provider because the sample needs to be collected from the cervix, and so the patient needs to undergo a pelvic examination. It involves collection of a cervical sample and can be used for cytology and/or HPV testing.



There are **several factors that can influence whether a patient can or should self-screen or have a provider-collected LBC sample**. Some factors that may come into consideration as you and your patient decide on the collection method for screening include:

- **Clinical history:** Some patients require both cytology and HPV testing (cotest) for their screening and this is most efficiently accomplished with a single LBC collection. Or, patients using a pessary should have a provider-collected LBC sample, in case HPV-infected secretions do not sufficiently present in the vagina.
- **Speculum exam:** For a variety of reasons, some patients find speculum exams difficult to undergo, and this may have historically prevented them from keeping up to date with screening or cause stress and anxiety. These patients can be recommended for self-screening.
- **Time for appointments:** For some patients, attending an in-person appointment can be difficult due to reasons such as having to take time off work, travel distance, arranging childcare, etc. Self-screening is an option that enables patients to screen without an in-person clinic appointment. However, when a patient is *already* in the clinic, an LBC collection may be preferred by the patient, as they will not have to return a second time if their self-screening result recommends cytology collection.
- **Physical aspects** such as a disability, limited motility or body habitus may also direct whether a vaginal swab or cervical sample may be best for the patient.

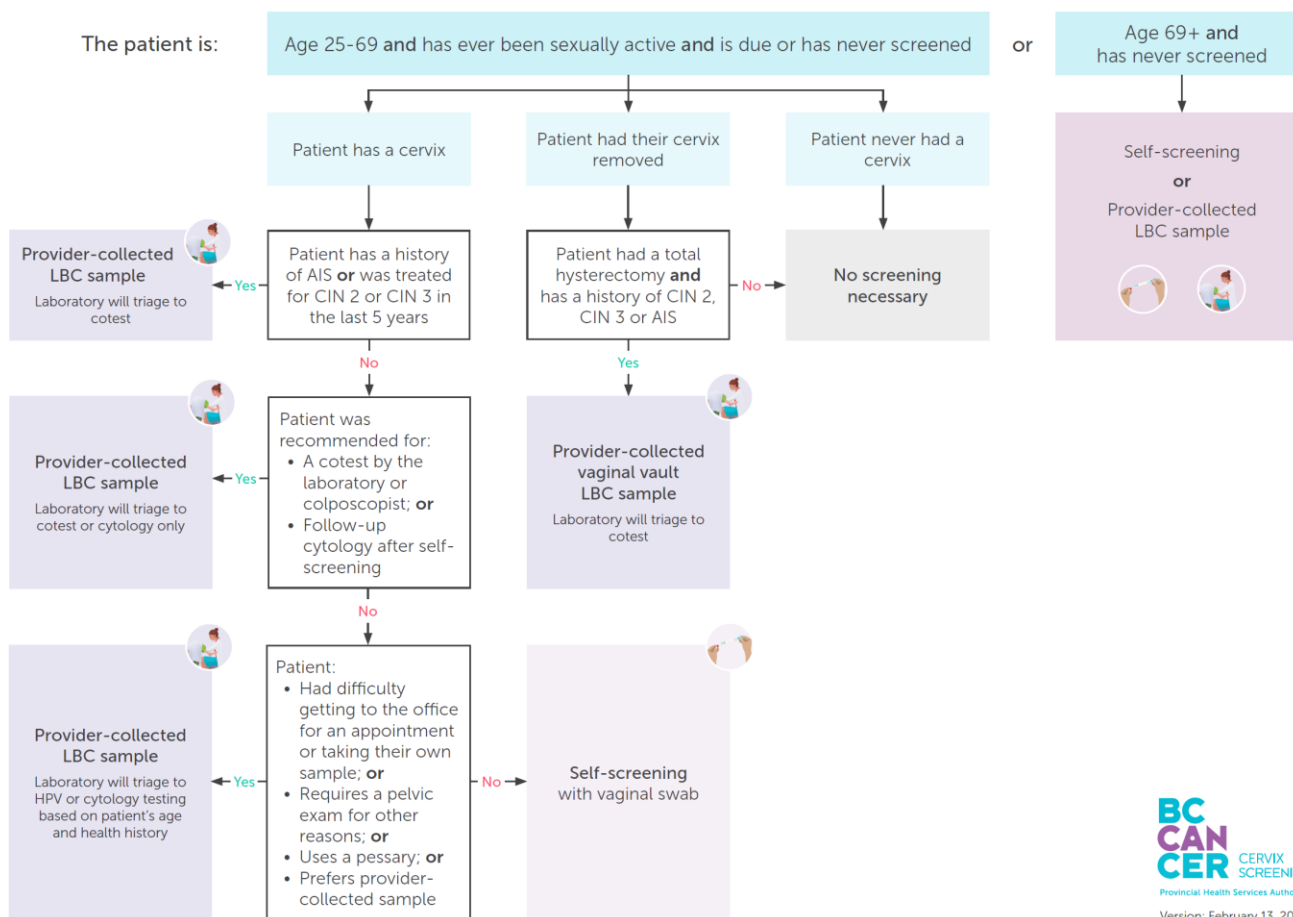
Patients will have varying and different values for these considerations, which will contribute to their collection preference. In addition, clinicians will review patient history and circumstances, to use their clinical judgment to ensure the most appropriate sample collection choice for the patient. There may be circumstances where the provider may feel self-screening is the most appropriate choice for their patient, and the clinician should use clinical judgment to determine the best screening method for the patient.

Patients who call BC Cancer to request a self-screening kit will be sent a kit if they are due to. BC Cancer Client Service Centre Screening staff are not able to assess clinical eligibility for self-screening. The laboratory has established processes to identify patients with relevant clinical histories to have provider-collected samples triaged to primary HPV screening (e.g. previous ASCUS or LSIL result) or for cotesting (e.g., previous AIS diagnosis). Patients who complete self-screening and who should have cotesting based on their clinical history, will receive a recommendation for cytology follow-up and will be directed to see a provider for a Pap test.

Refer to the flow diagram on the next page to help decide on the most appropriate sample collection method.

Resources: Self-Screening vs. Provider Collected LBC

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



Aisha

Meet Aisha



- 32 years old
- Had her last Pap test 3 years ago

After getting her recall letter in the mail, she calls her health care provider's office to ask about the new self-screening option or whether she should continue to get a Pap test. Her health care provider books her an appointment to discuss options.

Recall Letter to Aisha



Aisha receives her notice in the mail:



January 29, 2024

Aisha Kaur
7400 Prospect Street
Pemberton, BC V0N 2L1

Dear Aisha Kaur,

It's time for your cervix screening. Take action now to prevent cervical cancer. Your last cervix screening was: January 29, 2021. Please ignore this notice if you've had cervix screening (i.e. Pap test or self-screening) in the last 3 months.

BC Cancer is now offering you a choice in how you receive cervix screening. You have the option to participate in cervix self-screening, which you can complete yourself. **We invite you to request a self-screening kit that lets you to take your own vaginal sample to screen for cervical cancer.** You can do it wherever you feel safe and comfortable - such as in your home or at a health care provider's office. It's highly effective and a reliable test that looks for the human papillomavirus (HPV), the virus that causes cervical cancer.

Why should I consider self-screening?

- ✓ It tests for HPV, the virus that causes the changes to the cells of the cervix that lead to cervical cancer.
- ✓ You don't need to see a health care provider or have a speculum (pelvic) exam.
- ✓ You can self-screen, wherever you feel safe and comfortable.
- ✓ It's easy and painless. You use the small, Q-tip like swab to collect a sample from your vagina.
- ✓ It's free of charge.
- ✓ HPV testing is very accurate. Because it's so accurate, if your test shows you don't have HPV, you can wait 5 years for your next screen.

How can I self-screen for cervical cancer?

1. Request a screening kit. It will arrive in the mail in plain, unmarked packaging in about 2 weeks.
2. Closely follow the instructions inside your kit to collect a sample.
3. Use the prepaid return envelope included in your kit to return your sample to the lab for testing.
4. A results letter will be mailed to you and a provider 4 to 6 weeks after mailing in your kit. You can also see your results online: www.healthgateway.gov.bc.ca.

HOW TO REQUEST A SCREENING KIT

Call BC Cancer Cervix Screening at **1-877-702-6566**
(Monday to Friday 8:00am to 5:30pm and
Saturday 8:30am - 4:30pm) to request a kit.

OR



Scan the QR code to go online
to request a kit.
screeningbc.ca/cervix

Please note: If you have any symptoms (e.g., bleeding between periods); are currently pregnant; use a pessary; or have had your cervix removed, talk to a health care provider - self-screening may not be the right test for you.

If you do not want to complete cervix self-screening, please schedule a Pap test with a health care provider. Visit www.screeningbc.ca/cervix to find a clinic near you.

The power to screen for cervical cancer is in your hands. Take a positive step for your health today.

Regards,
Dr. Lily Proctor, MD, MPH, FRCSC
Medical Director, Cervix Screening Program

"It's time for your cervix screening... you can now complete self-screening instead of going to a health care provider for a Pap."

"How to Request a Kit"

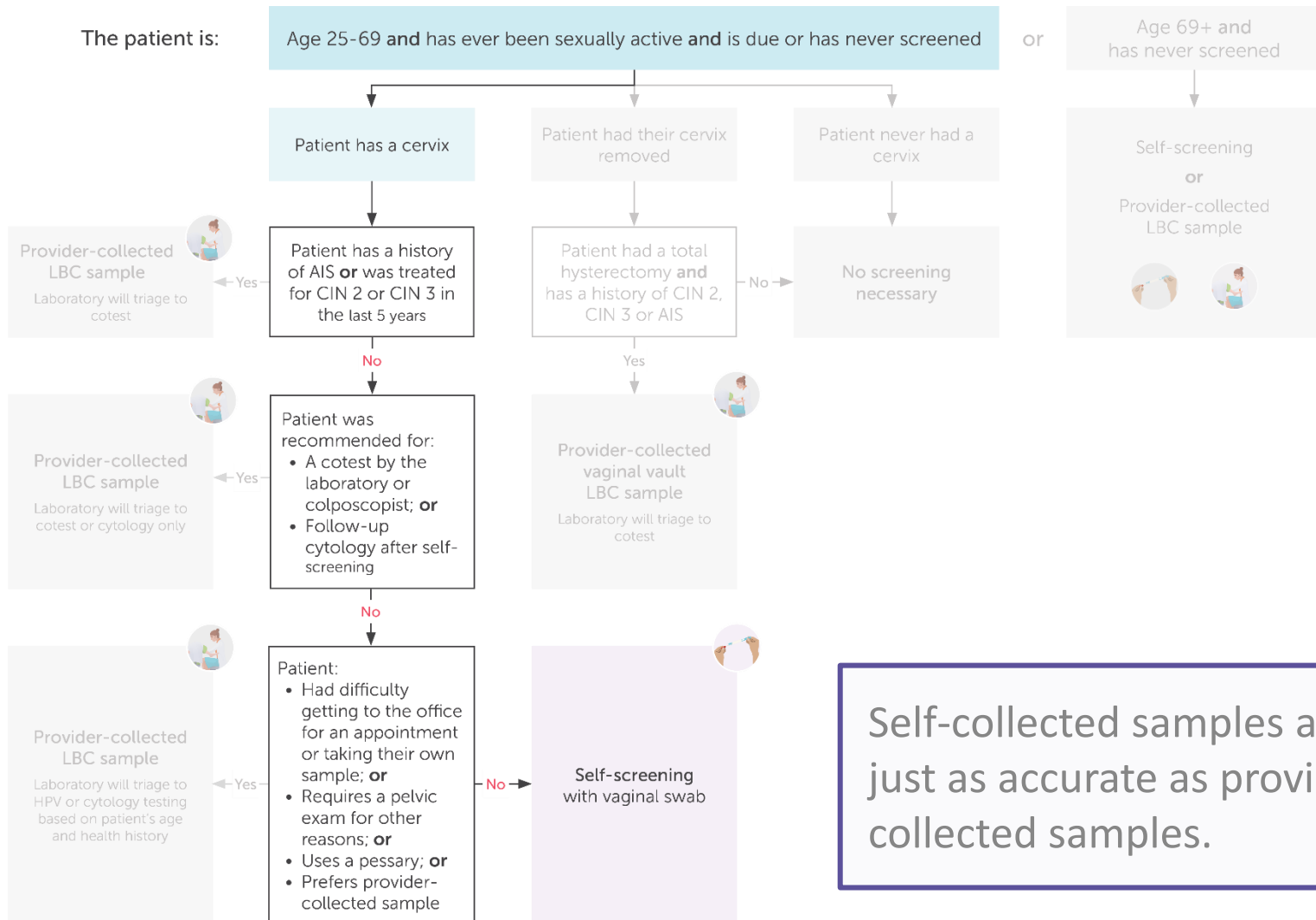
"If you have vaginal bleeding after sex, between periods or after menopause; ..., talk to a health care provider."

"If you do not want to complete self-screening... Visit screeningbc.ca to find a clinic near you."

Aisha Meets with her Health Care Provider



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



Aisha Gets an HPV Self-Screening Swab



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

1. The health care provider explains to Aisha how to collect her own sample using the HPV vaginal self-screening swab.
2. Aisha collects her own sample in the clinic's washroom and places in clear bag provided with requisition.
3. Aisha returns swab to the provider for the clinic to send 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 gonitals (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.

OR

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.



Aisha'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 9342678901	Patient DOB (dd/mmm/yyyy) 15-Jan-1992	Follow-up Practitioner/Clinic (MSP#, Name, Address) 12345, Sonia Singh 7390 Cottonwood St, Pemberton, BC V0N 2L0	
Patient Last Name Kaur	Patient First Name & Initials Aisha		
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) 12345, Sonia Singh	<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.

CLINICAL INFORMATION:

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

CLINICAL COMMENTS:

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:
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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: _____

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



Aisha's health care provider makes sure Aisha's self-screening swab is properly labelled with the following identifiers:



Patient's last name

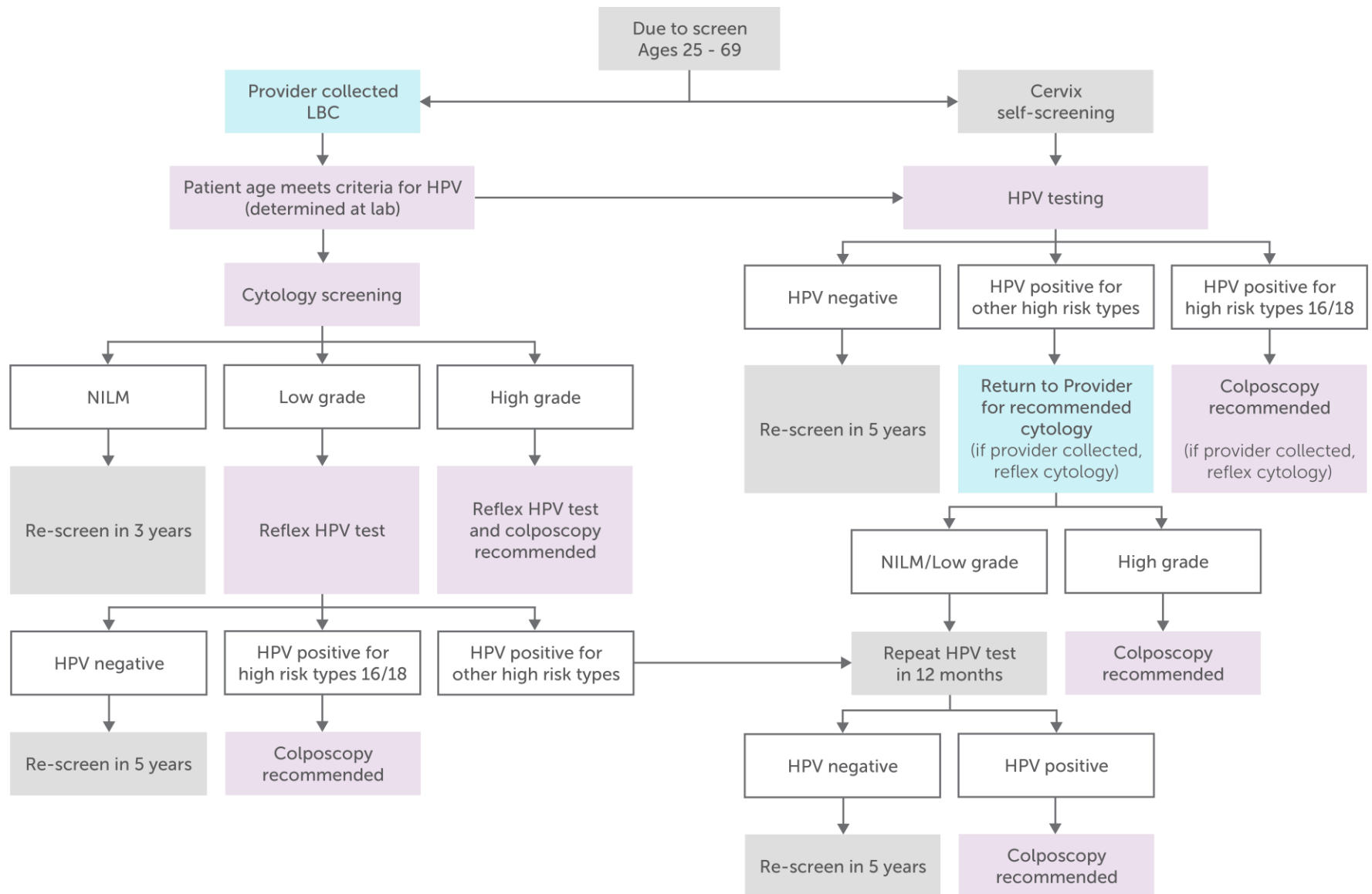
Patient's date of birth or PHN

Collection Date

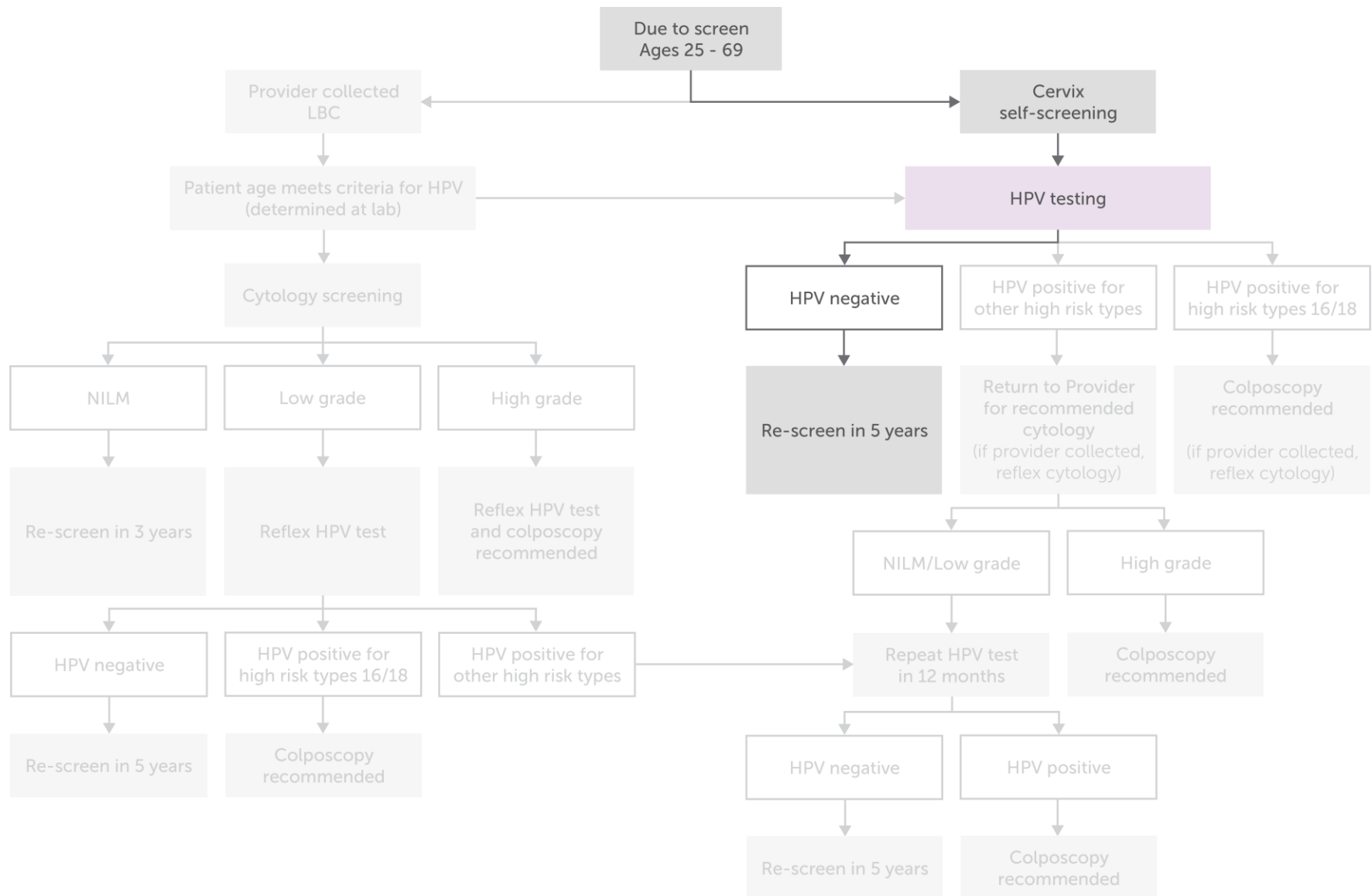
Result:
HPV Negative

Next Steps:
No Follow-up Needed
Re-Screen in 5 Years

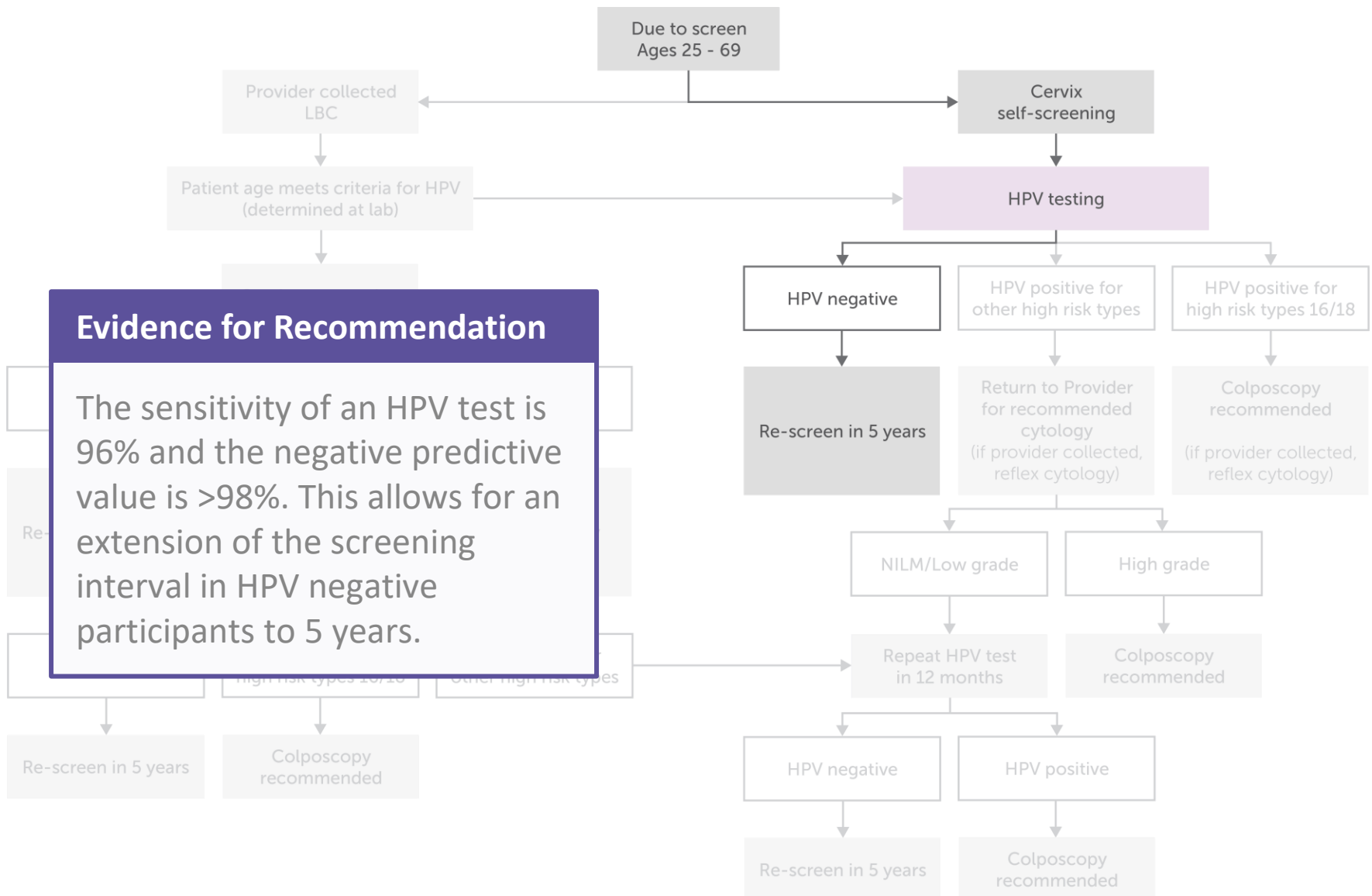
Screening Algorithm



Screening Algorithm



Screening Algorithm



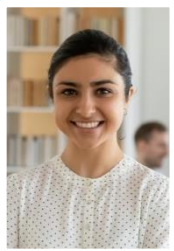
Cervical Cancer Screening Laboratory Result Sent to Aisha's Health Care Provider



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

The laboratory report indicates re-screening in 5 years.

Result Sent to Aisha



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



Cervix Screening Result

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

Aisha Kaur
7400 Prospect Street
Pemberton, BC V0N 2L1

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.

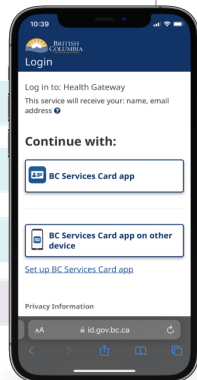
If you have changed your address, please visit <https://www.addresschange.gov.bc.ca/> to update your address with ICBC and Health Insurance BC at the same time.

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.”



Mika

Meet Mika



- 30 years old
- Had their last Pap test 2 years ago
- Very excited about HPV testing because of their family history with cervical cancer

Mika books an appointment with their health care provider to inquire about whether they can get a self-screening swab...

Screening is Not Recommended for Mika



Mika's health care provider informs them that they are **not due to screen until next year**. When Mika asks why they need to wait, their health care provider explains the risks of screening too soon.

Mika's health care provider acknowledges Mika for their enthusiasm to screen and **encourages them to return for screening next year**, either by returning to the clinic or requesting a kit directly from the Cervix Screening Program.

Mika's health care provider briefly reviews the natural history of HPV and cervical cancer (that for infection to lead to cervical cancer or precancer takes many years) and that **waiting one additional year for their next screen does not increase their risk**.

Their health care provider also reminds them to book an appointment if they **notice any symptoms**, including post-coital bleeding, abnormal persistent bleeding or abnormal vaginal discharge.

Case Specific Questions

Grace

Meet Grace



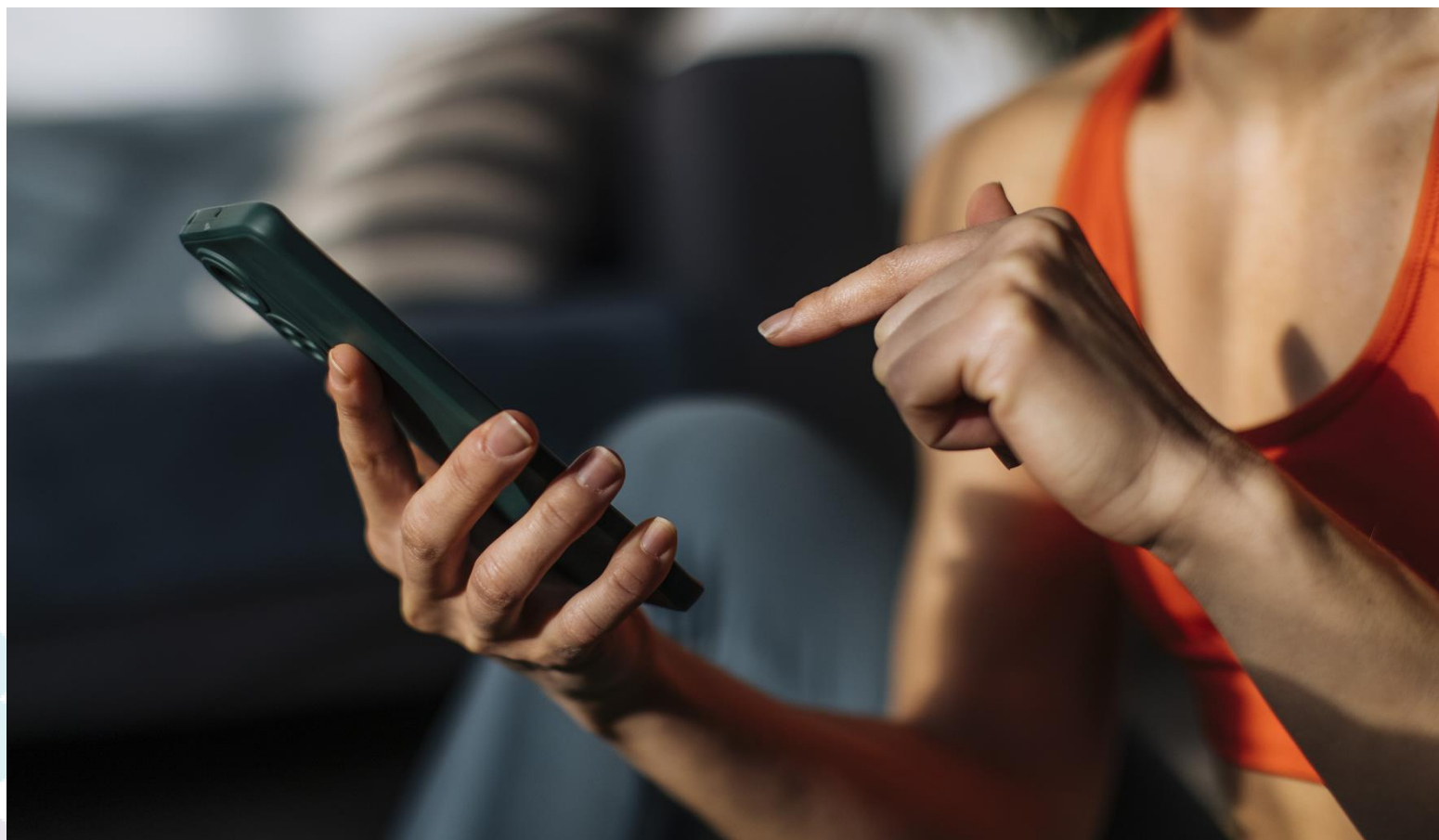
- 53 years old
- Moved from Calgary to Coquitlam last year
- Had her last Pap test 5 years ago
- Still in the process of finding a health care provider

After seeing a bus shelter ad for cervix self-screening, she phoned the 1-800 number to request a kit and then sent in her sample...

Grace Calls to Request a Kit



Grace calls **1-877-702-6566** to request a kit



Grace Receives Her Kit in the Mail



What's in the Kit?

1. Instructions

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.



3

Hold the swab at the red line.



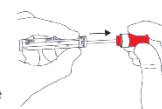
5

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.



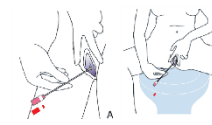
2

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.**



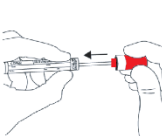
4

Collect your sample: Stand (A) or sit (B) with your legs apart. Using your other hand, hold back the folds of skin.



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.



OR

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.

What's in the Kit?

1. Instructions
2. Collection device (COPAN FLOQSwab®)





What's in the Kit?

1. Instructions
2. Collection device (COPAN FLOQSwab®)
3. Plastic bag
4. Pre-paid return envelope



What's in the Kit?

1. Instructions
2. Collection device (COPAN FLOQSwab®)
3. Plastic bag
4. Pre-paid return envelope
5. Lab requisition

		Cervical Cancer Screening Laboratory CERVIX SELF-SCREENING LABORATORY REQUISITION	
Patient Personal Health No.	Patient DOB (DD/MM/YYYY)		Health Care Provider (ie. Family Doctor, Clinic Name)
Patient Last Name	Patient First Name		
Sex <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> OTHER			
Sample Type: VAGINAL SWAB	Test Type: Self-Collect Primary Screening HPV		Kit Request Date:

PLEASE COMPLETE THE FOLLOWING BEFORE MAILING IN YOUR SAMPLE:

1. Provide the date you collected the sample in the box below

COLLECTION DATE (write clearly):
_ _ _ _ _
(e.g. 01 JAN 2021)

2. If the above **Health Care Provider** is incorrect, please provide the updated provider name and address here. If you do not have a health care provider, write No Provider.

If you don't have a provider and your screening test needs follow-up, you will be linked to a clinic in your community to support your follow-up.

3. If the gender you identify with is not the same as the **Sex** above, state your gender here:

Important information, please translate.

重要信息，请翻译。

ਮਹੱਤਵਪੂਰਨ ਜਾਣਕਾਰੀ, ਕਿਰਪਾ ਕਰਕੇ ਅਨੁਵਾਦ ਕਰੋ।

Mahalagang impormasyon, mangyaring isalin sa wikang tagalog.

Información importante, por favor, traduzcala.

معلومات مهمة، لطفاً ترجمه کنید.

Information importante, veuillez traduire.

重要信息，请翻译。

Wichtige Informationen, bitte übersetzen.

중요한 정보를 번역하십시오.

Tin tức quan trọng, xin phiên dịch.

معلومات مهمة، يرجى الترجمة.

Laboratory use only:

BC Cancer Cervix Screening Program

screening@bccancer.bc.ca

Information on program notifications is available at www.screeningbc.ca/notifications.

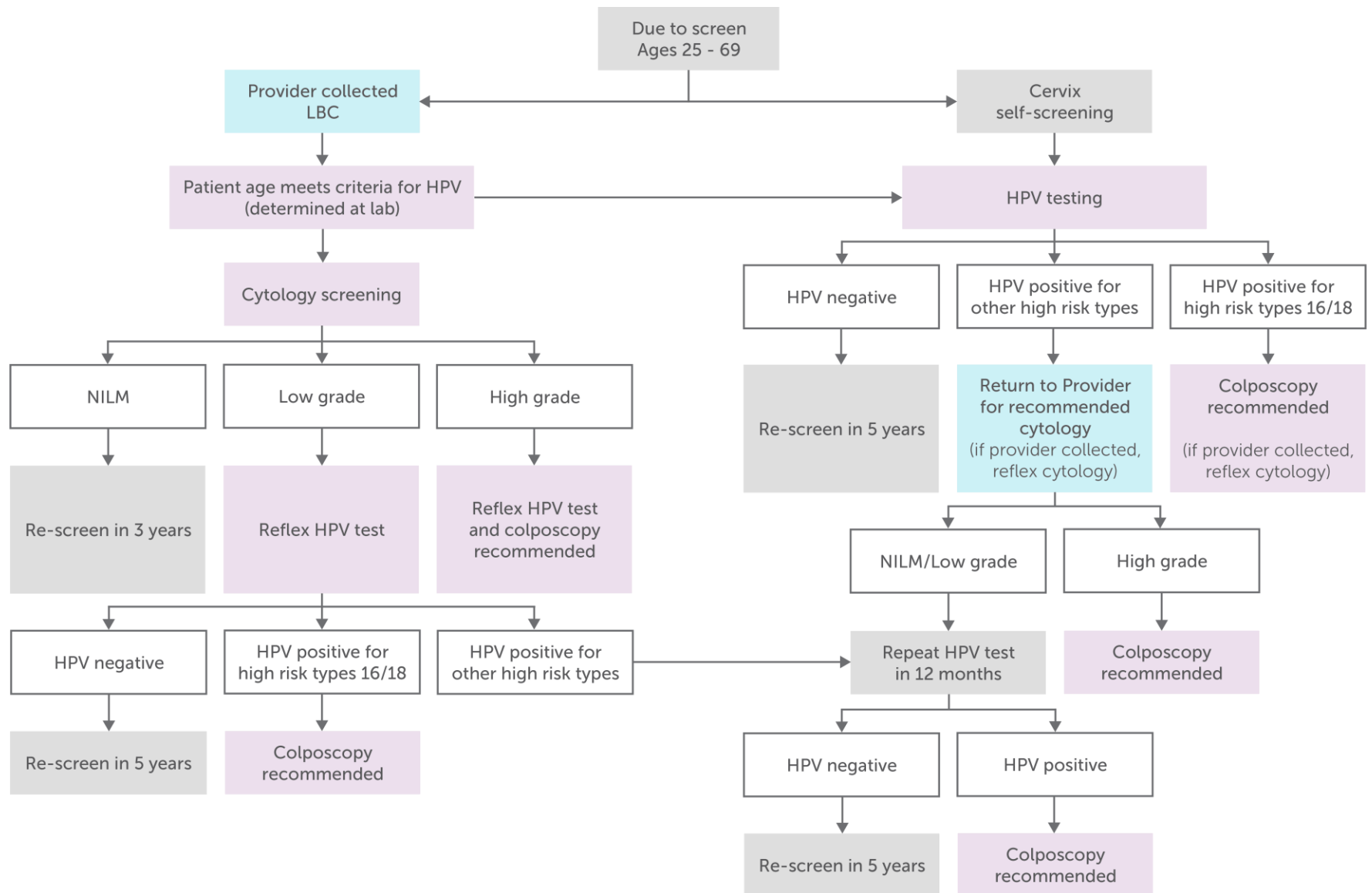
Result:

Positive for HPV Other High-Risk Types

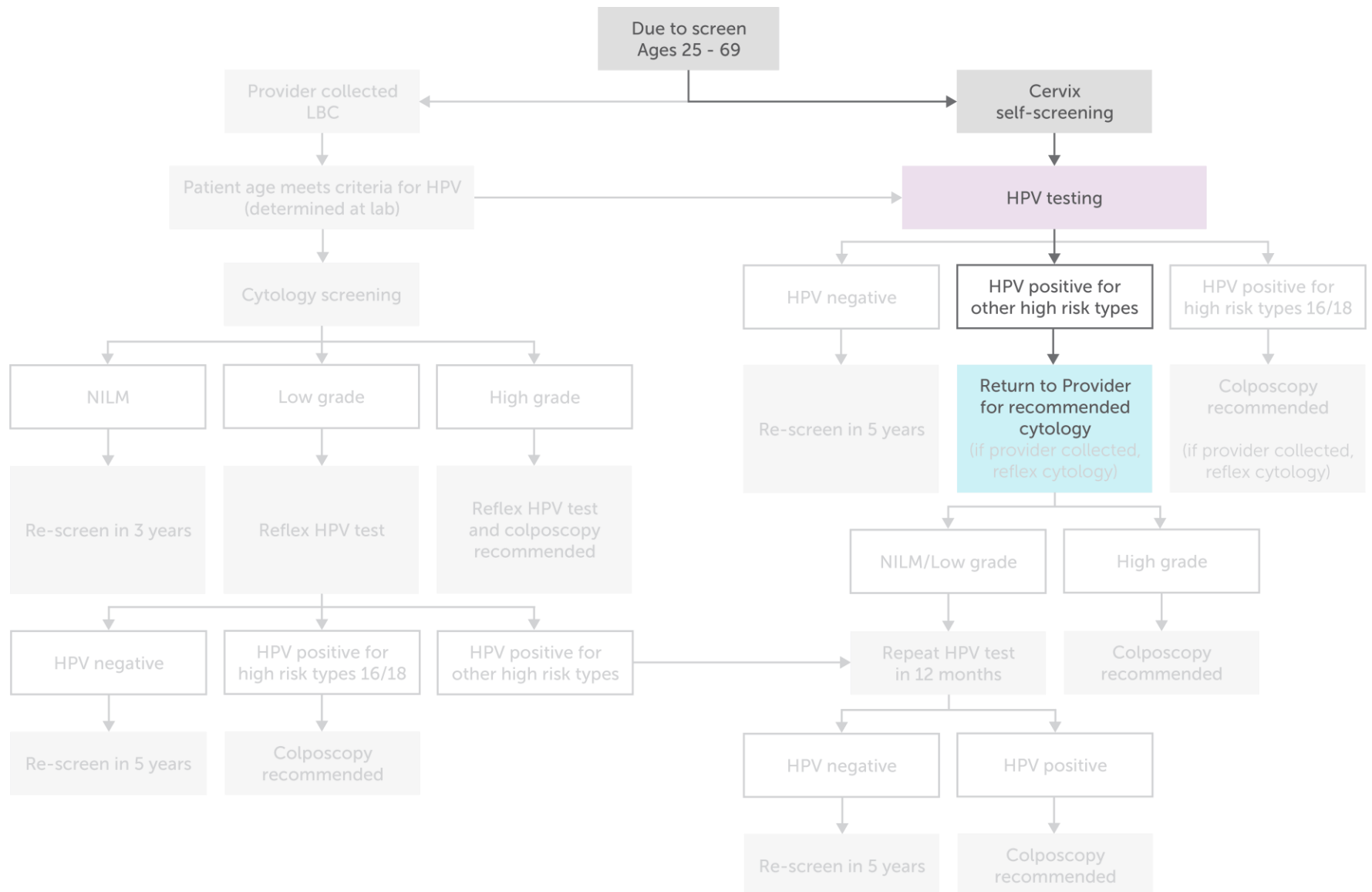
Next Steps:

Cytology (Pap) Follow-up Recommended

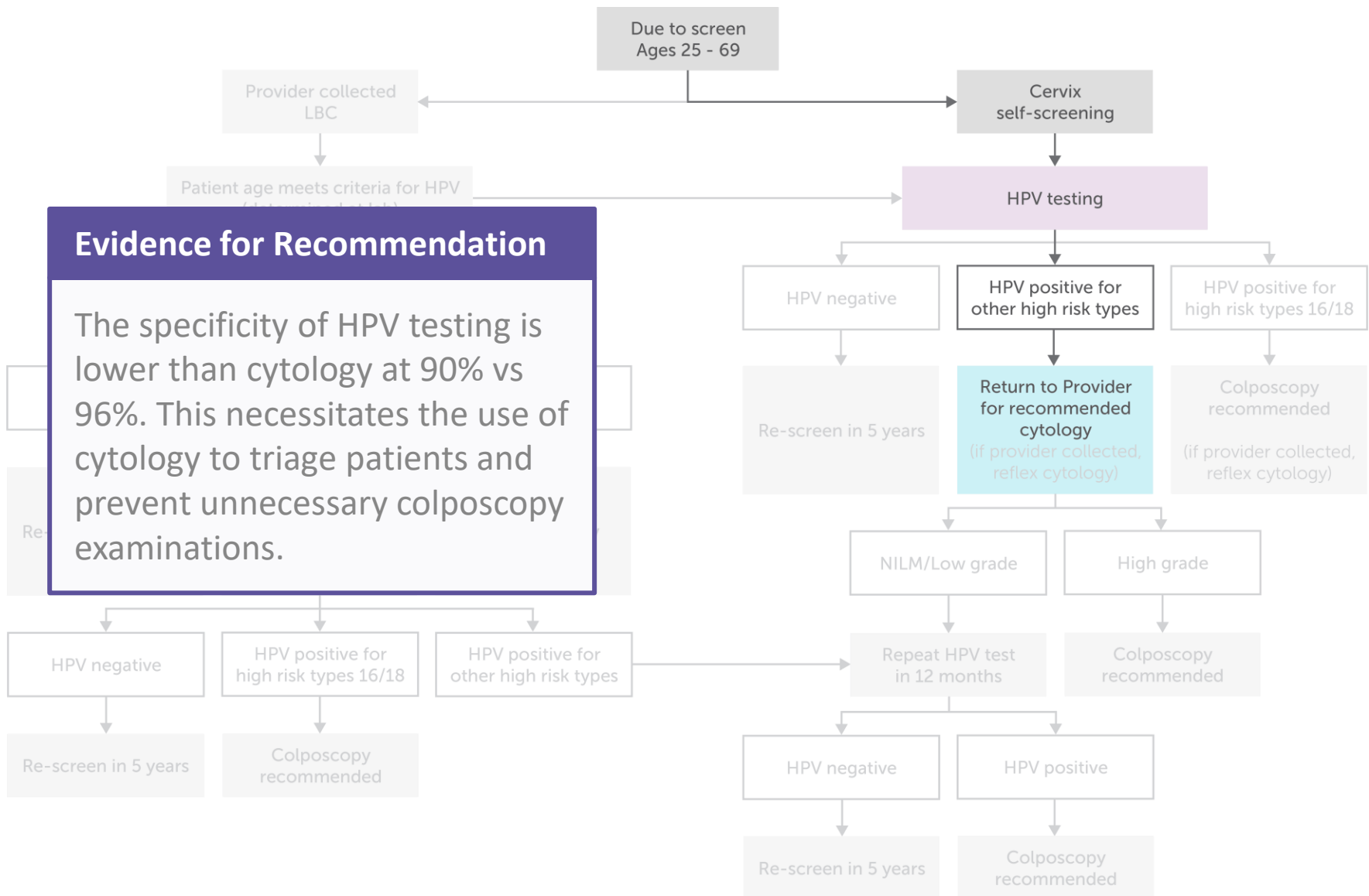
Screening Algorithm



Screening Algorithm



Screening Algorithm



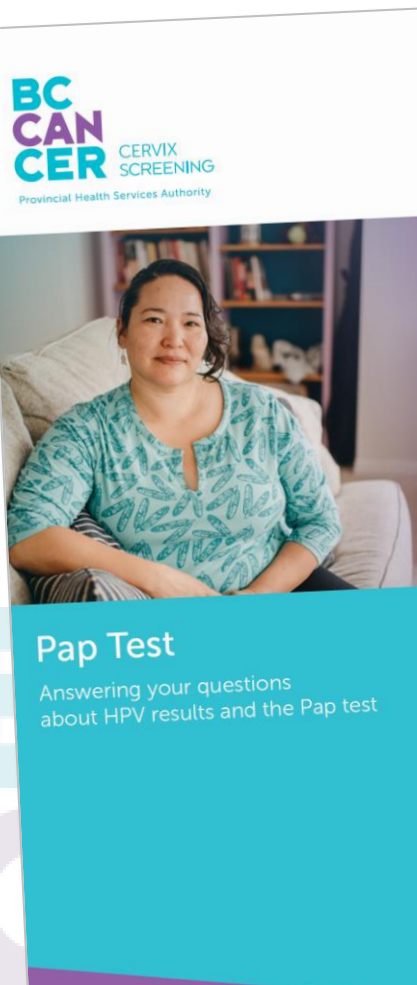
Based on Grace's Postal Code, the System Links Her to WELL Health – Able Care Medical Clinic

Community Health Service Area (by patient postal code)	Cervix Self-Screening Pilot Linked Community Clinic
Central Island Division of Family Practice	
4251 – Parksville	Flowerstone Health Clinic (C12945)
4252 – Qualicum Beach	Flowerstone Health Clinic (C12945)
4253 – Oceanside Rural	Flowerstone Health Clinic (C12945)
4261 – Port Alberni	Port Alberni Nurse Practitioner Clinic (C13230)
4262 – Alberni Valley/Bamfield	Port Alberni Nurse Practitioner Clinic (C13230)
Sunshine Coast Division of Family Practice	
3331 – Gibsons	Gibson's Community Health Unit (C13249)
3332 – Sechelt	Gibson's Community Health Unit (C13249)
3333 – Sunshine Coast Rural	Gibson's Community Health Unit (C13249)
Fraser North West Division of Family Practice	
2210 – New Westminster	New Westminster Family Practice
2241 – North Coquitlam	Wilson Family Practice
2242 – Southwest Coquitlam	WELL Health – Able Care Medical Clinic
2243 – Southeast Coquitlam	WELL Health – Able Care Medical Clinic
2244 – Port Coquitlam	Wilson Family Practice
2245 – Port Moody/Anmore/Belcarra	Port Moody Urgent Primary Care Clinic
Pemberton Division of Family Practice	
3353 – Howe Sound Rural	Pemberton Medical Clinic (C00610)

Result Sent to Grace – Populated with Linked Clinic Contact Information



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



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

Screening Test Result

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

Grace Lee
3000 Guildford Way
Coquitlam, BC V3B 7N2

Results Notification – Follow-Up Needed

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

Your result shows that follow-up is needed because a high-risk HPV type was found in your sample. You are recommended to have a Pap test.

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: Schedule an appointment with a health care provider for a Pap test.

A health care provider can also answer questions about your results.

We do not have a health care provider on file for you. We have linked you with WELL Health – Able Care Medical Clinic who are able to provide you with a Pap and answer questions you may have about your screening result. If you do not have a health care provider and would like to be seen at this clinic, please call (604) 945-7819 for an appointment.

You can also visit BC Cancer Cervix Screening's clinic locator (www.screeningbc.ca/cervix) for a list of clinics accepting patients for Pap tests in your community (includes information on whether a female practitioner is available and languages spoken in the clinic). Take this letter with you to your appointment.

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 follow-up is needed as a high-risk HPV type was found in your sample. You are recommended to have a Pap test.”

“We do not have a health care provider on file for you. We have linked you with *Well Health* who are able to see you to provide you with a Pap and answer questions you may have. If you would like to be seen at this clinic, please call 604-945-7819...”

Notification for Follow-Up Sent to WELL Health – Able Care Medical Clinic



The Screening Program notifies the clinic associated with Grace's postal code of Grace's result and the recommendation for a follow-up Pap test:



March 4, 2024

WELL Health – Able Care Medical Clinic
2991 Lougheed Hwy. #56
Coquitlam, BC V3B 6J6

RE: Grace Lee, 1970-03-06, 123456789

ACTION REQUIRED – Provider-Collected (LBC) Sample Recommended: Unattached Patient Linked to Your Clinic. Please Contact Patient.

This patient completed cervix self-screening on February 5, 2024.

- Test result: **HPV Other**

The follow-up recommendation is cervical cytology (Pap test) for a positive self-screen HPV result. Thank you for arranging to provide a follow-up cervical cytology procedure for this unattached patient in your office.

The patient's contact information is below.

Address: 3000 Guildford Way, Coquitlam, BC V3B 7N2

Home Phone: (604) 123-4567

Cell Phone: (604) 987-6543

If this patient will not be having a follow up Pap test, please select one of the reasons below and fax your response to 1-604-297-9327:

- ☐ Patient had a total hysterectomy. Date (YYYY/MM/DD): _____
- ☐ Patient has moved, or is moving out of province.
- ☐ Patient declined further follow up.
- ☐ Patient was not able to be contacted for an appointment.
- ☐ Patient is medically unfit for follow-up.
- ☐ Patient is deceased.
- ☐ Patient has arranged for a Pap test with another provider, provider (if known) _____
- ☐ Other: _____

No further recall will occur if any of the above choices are selected and returned to the Cervix Screening Program.

“Provider-Collected (LBC) Sample Recommended: Unattached Patient Linked to Your Clinic. Please Contact Patient.”

“The follow-up recommendation is cervical cytology (Pap test) for a positive self-screen HPV result. Thank you for arranging to provide a follow-up cervical cytology procedure for this unattached patient in your office.”

6 Months Later: Reminder Notice to WELL Health – Able Care Medical Clinic



It's been 6 months since Grace was recommended for a follow-up Pap test, and the Screening Program has not received a Pap test result.

The Screening Program sends a reminder notice to the Linked Clinic:



September 4, 2024

WELL Health – Able Care Medical Clinic
2991 Lougheed Hwy. #56
Coquitlam, BC V3B 6J6

RE: Grace Lee, 1970-03-06, 9123456789

ACTION REQUIRED – HPV Screening Follow-Up Pap Test Reminder, Unattached Patient Linked to Your Clinic.

Our records indicate that the above patient was recommended for a follow-up provider-collected (LBC method) Pap test on March 4, 2024.

The Cervix Screening Program does not have a record of the Pap test for this patient. If the Pap test has been recently completed or if the patient has an upcoming appointment for a Pap test, no action is required.

Please note: The Cervical Cancer Screening Laboratory shares cervix screening results with the BC Cancer Cervix Screening Program after the report is issued. The program would not be aware of a Pap test submitted to the laboratory but not yet reported.

If the patient is not proceeding with a follow up Pap test, please select one of the reasons below and fax your response to 604-297-9327.

- ☐ No longer my patient, new provider (if known): _____
- ☐ Patient had a total hysterectomy. Date (YYYY/MM/DD): _____
- ☐ Patient has moved, or is moving out of province.
- ☐ Patient declined further follow up.
- ☐ Patient was not able to be contacted for an appointment.
- ☐ Patient is medically unfit for follow-up.
- ☐ Patient is deceased.

Jessica

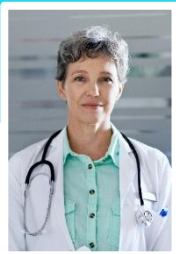
Meet Jessica



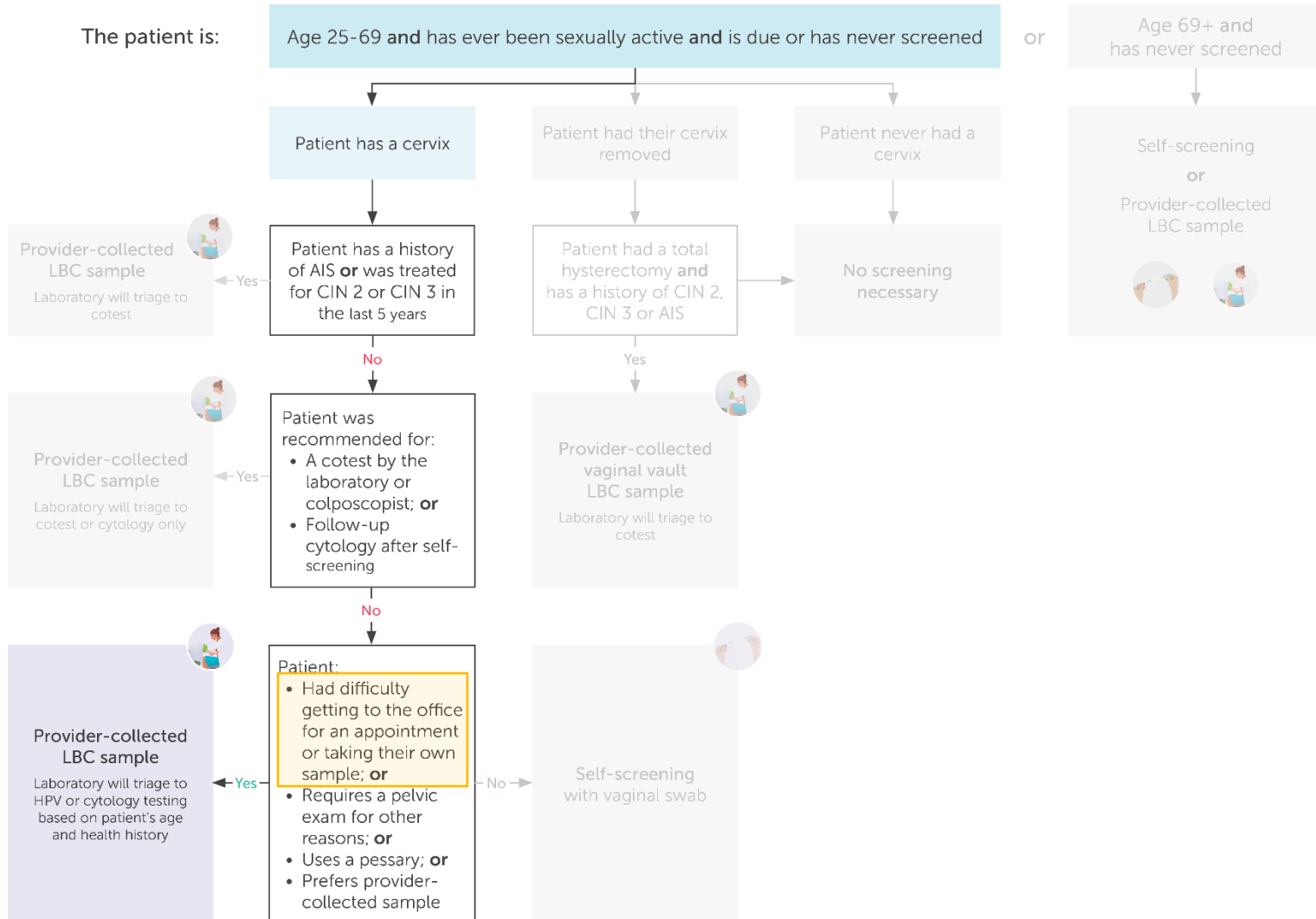
- 28 years old
- Lives in Courtenay
- Had her last Pap test 3 years ago

After receiving her recall letter in the mail, Jessica books a Pap test appointment with her health care provider...

Jessica Meets with her Health Care Provider



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



Jessica Gets a Provider-Collected LBC Sample



At Jessica's appointment, she sees a poster in the exam room about cervix self-screening and is curious about the process.

After her health care provider explains how self-screening works, Jessica decides that self-screening may be too difficult because of her limited hand function and chooses to get a provider-collected LBC sample.

Also, getting the office requires planning. Together Jessica and her health care provider decide it would be better to take a provider-collected sample that can be used for primary cytology and HPV testing triage (if needed) rather than Jessica having to potentially return for a second appointment if she completes self-screening and were to have a positive HPV test result.



Jessica'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 9342678901	Patient DOB (dd/mm/yyyy) 28-Sep-1995	Follow-up Practitioner/Clinic (MSP#, Name, Address) 78945, June MacDonald 489 Old Island Hwy, Courtenay, BC V9N 3P5	
Patient Last Name Wilson	Patient First Name & Initials Jessica		
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) 78945, June MacDonald	<input type="checkbox"/> Locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mm/yyyy) 30-Jan-2024	LMP Date (dd/mm/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 (collected with spatula/brush)	<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*	
<small>*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 <u>not required for referral</u>.</small>	

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



At the laboratory, Jessica's sample is **triaged to cytology** due to her age. Jessica's sample shows low-grade squamous intraepithelial lesions (LSIL).

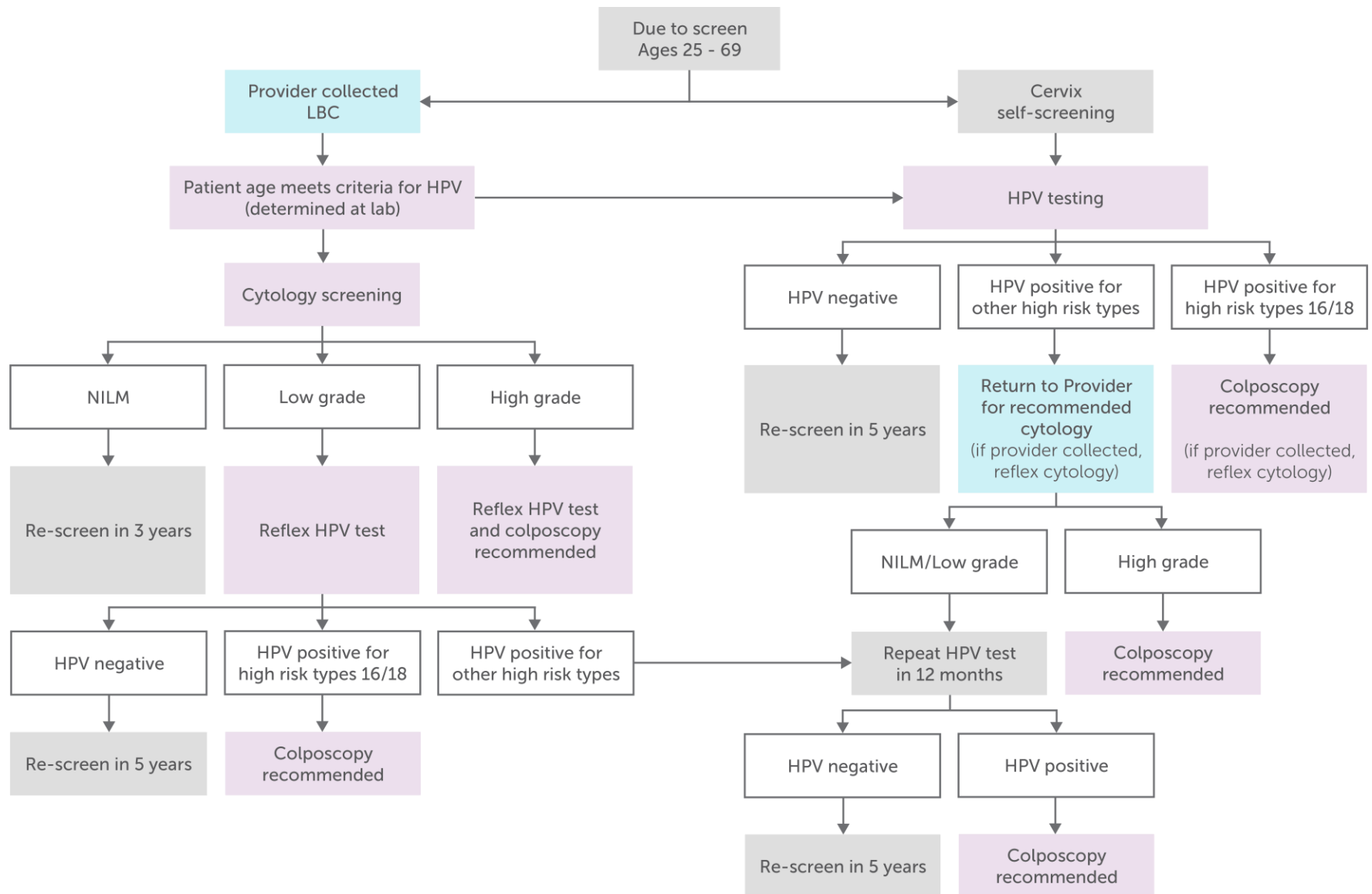
Her sample is reflexed to HPV testing by the laboratory. Her sample is positive for HPV Other High-Risk Types.



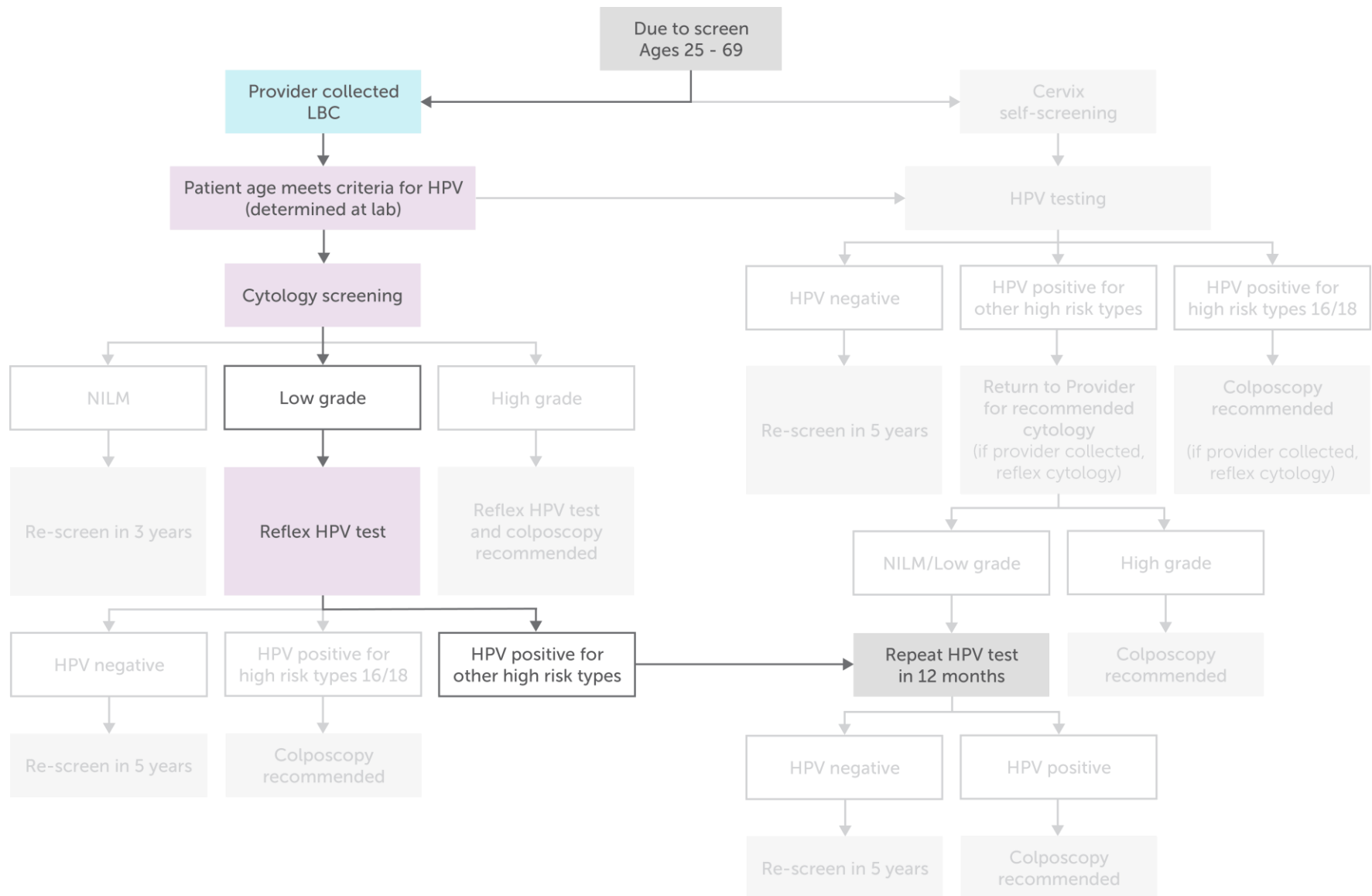
Result:
Cytology LSIL,
Positive for HPV Other High-Risk Types

Next Steps:
Repeat HPV Test in 12 Months

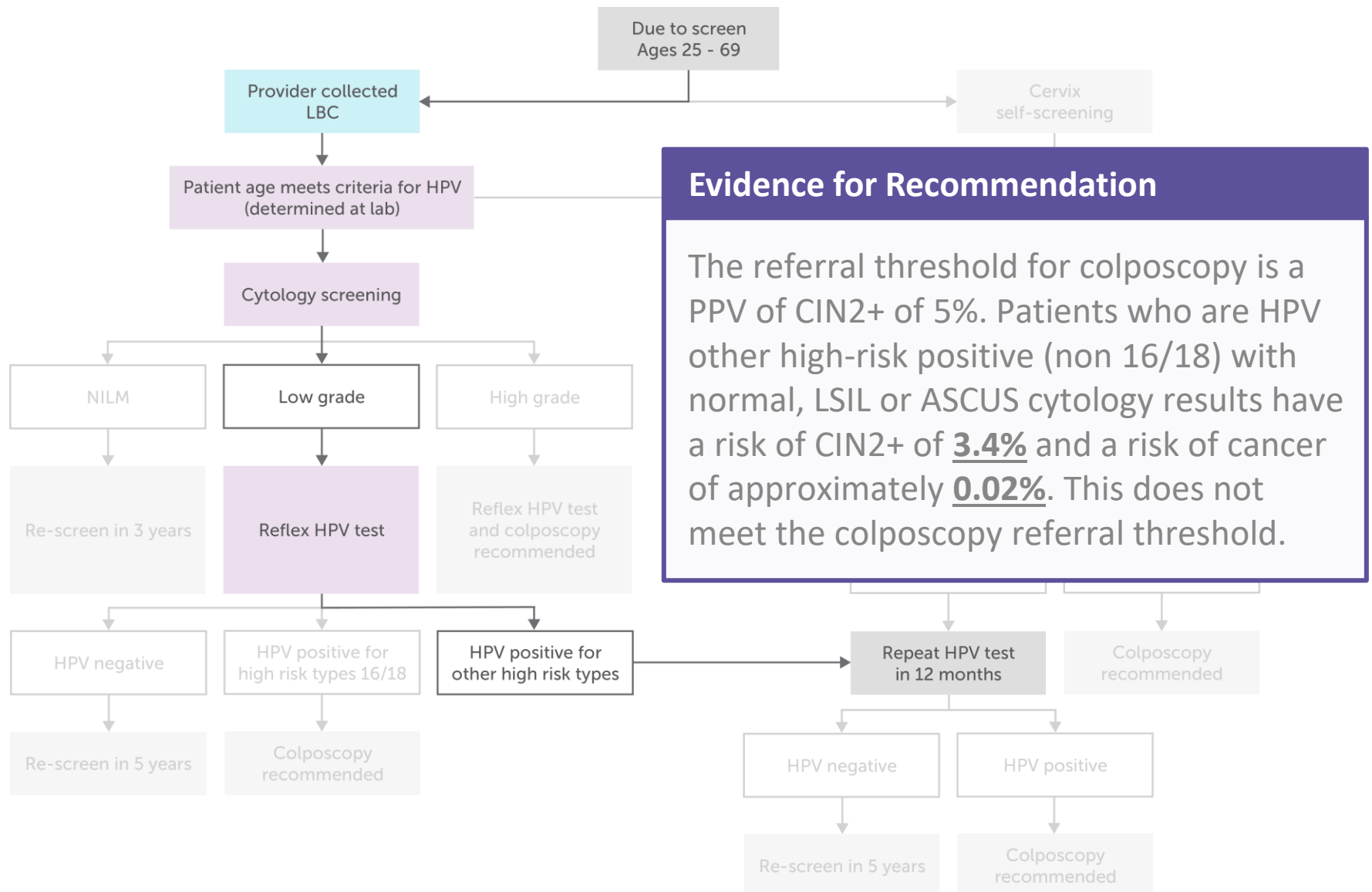
Screening Algorithm



Screening Algorithm



Screening Algorithm



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



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

The laboratory report indicates to repeat HPV testing in 12 months.

Result Sent to Jessica



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



Screening Test Result

March 30, 2024
Test Result Date: March 10, 2024

Jessica Wilson
830 Cliffe Ave
Courtenay, BC V9N 2J7

Results Notification – Repeat Cervix Screening in 12 Months

You are receiving this letter because you were recently screened for cervical cancer.

You are recommended to repeat cervix screening in 12 months because a high-risk HPV type was found with this screening result or a previous self-screening result. A repeat test will check if your body has cleared the HPV infection. It's important to wait 12 months before checking again so that your body has time to try to clear the infection on its own.

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.

NEXT STEPS: A self-screening kit will be mailed to you in 12 months.

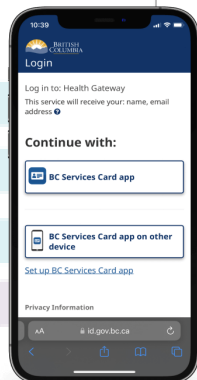
If you are registered with a BC address, in 12 months, we will automatically mail you a cervix self-screening kit, which you can complete instead of going to a health provider for a Pap test.

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.

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 you are not due to screen.

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

“A self-screening kit will be mailed to you in 12 months”

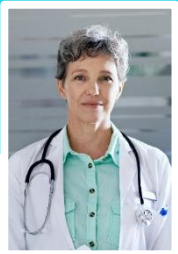


12 Months Later: Jessica Receives a Kit to Repeat HPV Test



Jessica Books Another Appointment with Her Family Doctor

Jessica brings her kit to her health care provider and requests her health care provider to take the vaginal swab for her.



Jessica'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 9342678901	Patient DOB (dd/mm/yyyy) 28-Sep-1995	Follow-up Practitioner/Clinic (MSP#, Name, Address) 78945, June MacDonald 489 Old Island Hwy, Courtenay, BC V9N 3P5	
Patient Last Name Wilson	Patient First Name & Initials Jessica		
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) 78945, June MacDonald	<input type="checkbox"/> Locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mm/yyyy) 30-Jan-2024	LMP Date (dd/mm/yyyy)	Copy to MSP# & Name	Copy to MSP# & Name

COLLECTION METHOD / SAMPLE SITE:	
<input type="checkbox"/> LBC vial: Cervix/Endocervix	<input type="checkbox"/> Vaginal swab: self-collect
<input type="checkbox"/> LBC vial: Vaginal Vault/Wall (collected with spatula/brush)	<input checked="" type="checkbox"/> Vaginal swab: provider-collect
REASON FOR TEST:	
<input type="checkbox"/> Primary/Asymptomatic screening	
<input type="checkbox"/> Follow-up after self-collect HPV Other High Risk Positive (cytology)	
<input checked="" 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*	
<small>*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 <u>not required for referral</u>.</small>	

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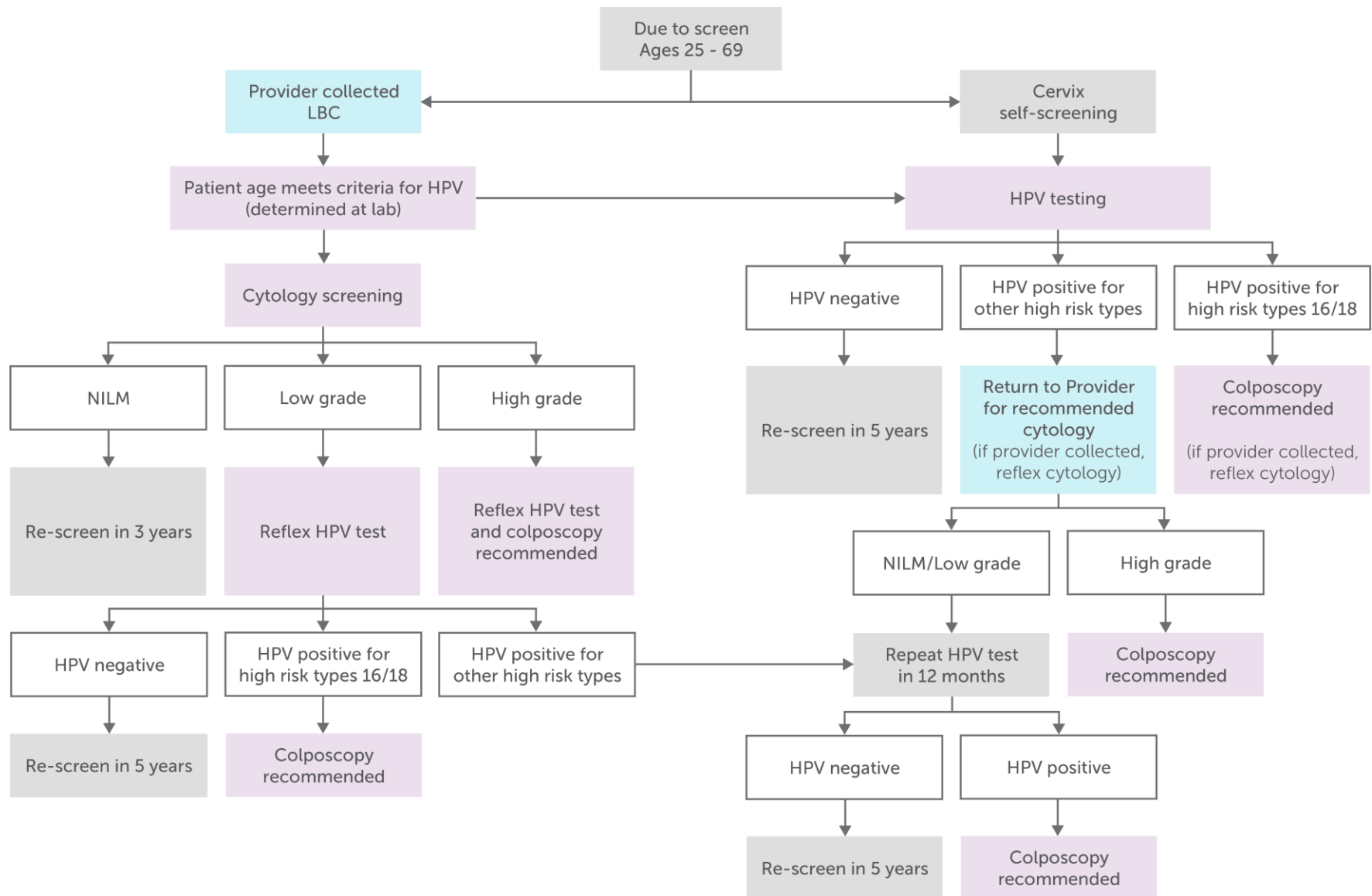
Result:

Positive for HPV Other High-Risk Types

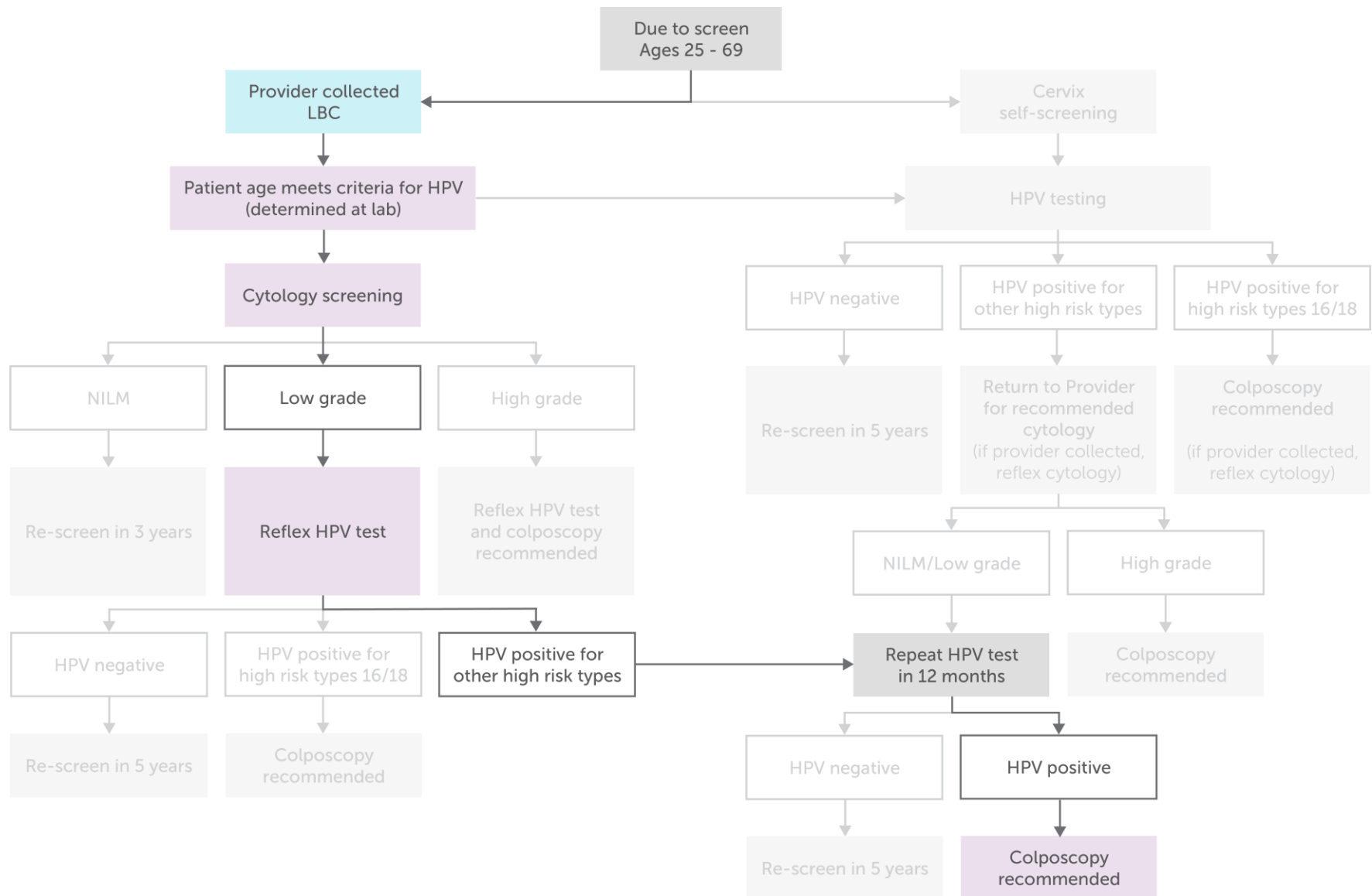
Next Steps:

Colposcopy Recommended

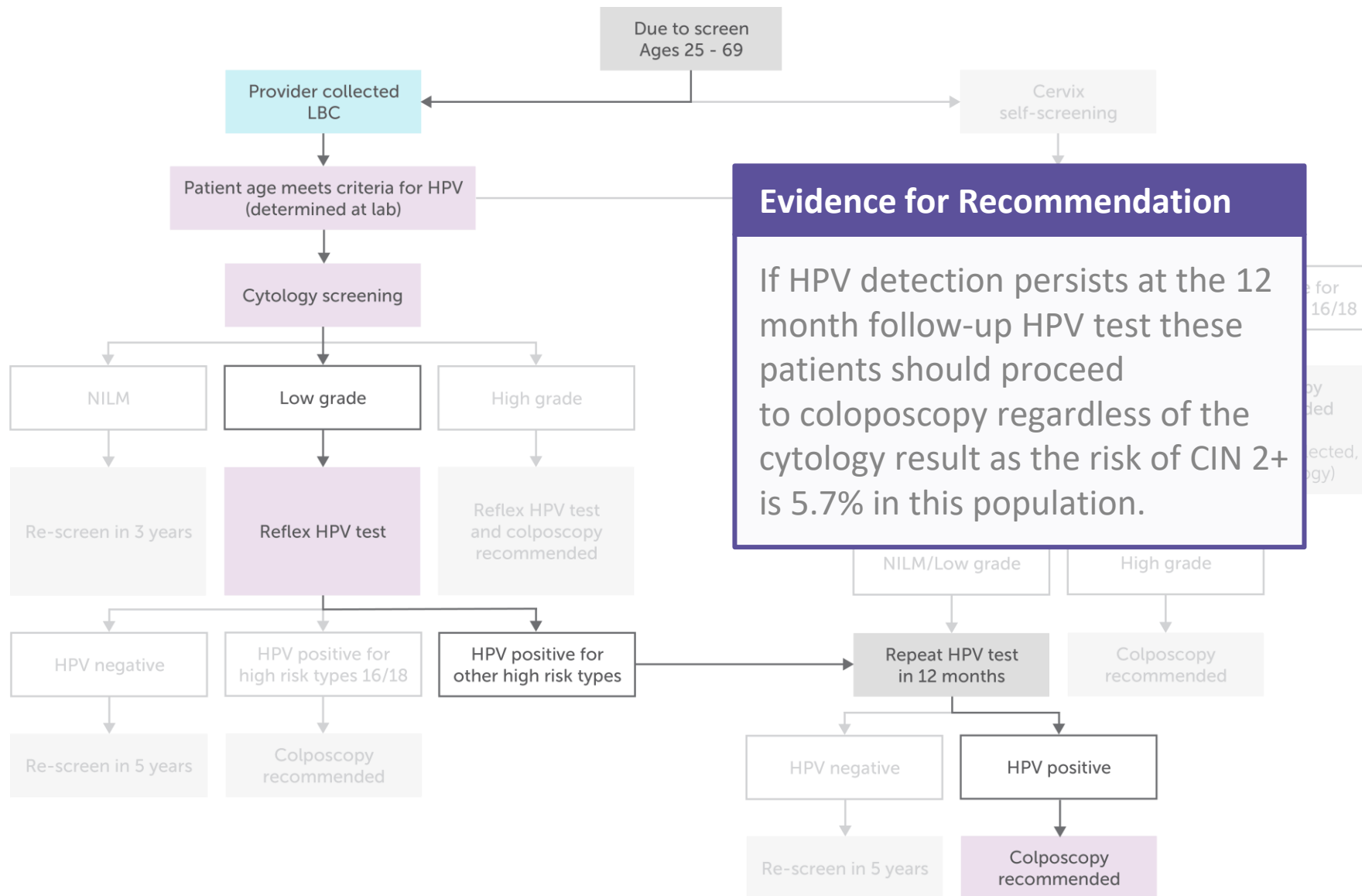
Screening Algorithm



Screening Algorithm



Screening Algorithm



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



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

The laboratory report indicates that colposcopy is recommended.

Result Sent to Jessica



Jessica receives her result on [HealthGateway](#) 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

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

Jessica Wilson
830 Cliffe Ave
Courtenay, BC V9N 2J7

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 North Island Hospital Comox Valley at (250) 331-5900 ext. 65371.

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 (250) 331-5900 ext. 65371 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 North Island Hospital Comox Valley at (250) 331-5900 ext. 65371.”

Referral Sent to Colposcopy Clinic



The Screening Program facilitates a referral to the Colposcopy Clinic for Jessica, on behalf of her family doctor:



COLPOSCOPY REFERRAL

Referral Date: May 12, 2025
Clinic: North Island Hospital Comox Valley
Address: 101 Lerwick Rd, Courtenay, BC V9N 0B9

CLIENT INFORMATION

PHN: 9123456789
Name: Jessica Wilson Sex: F
DOB: 1995-08-28 Age: 29
Address: 830 Cliffe Ave Courtenay, BC V9N 2J7
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: June MacDonald MSC#
Address: 489 Old Island Hwy, Courtenay, BC V9N 3P5
Phone#: (604) 147-8523 Fax#: (604) 369-8521

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

North Island Hospital Comox Valley
is provided with Jessica's contact
information

North Island Hospital Comox Valley
is provided with Jessica's family
doctor information.

Notice of Referral Sent to Health Care Provider



The Screening Program notifies Jessica's health care provider that a referral for colposcopy has been sent on behalf of Jessica's health care provider to the North Island Hospital Comox Valley

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

May 12, 2025

Dr. June MacDonald
489 Old Island Hwy
Courtenay, BC V9N 3P5

RE: Jessica Wilson, 1995-09-28, 9342678901

Notification - Referral for Further Follow-Up has been Sent.

This patient was referred to North Island Hospital Comox Valley on May 12, 2025 Re: Cervix Self-screening test report date: April 7, 2025.

The patient contact information provided to the Colposcopy Clinic is: H: (604) 123-4567 M: (604) 987-6543. If this information is incorrect, please call the clinic at (250) 331-5900 ext. 65371 to update the patient's information.

If this patient is proceeding for follow-up, you will receive a copy of the procedure report after the procedure is complete. If this patient is not going to proceed, the Colposcopy Clinic will advise you.

If any of the following pertains to this patient, complete the following information and fax to: North Island Hospital Comox Valley at (250) 331-5977.

☐ This patient is pregnant, due date (YYYY/MM/DD): _____

☐ An interpreter is needed. Language: _____

☐ This patient has special needs (e.g. mobility issues): _____

☐ Self-pay patient

Patient prefers contact by:

☐ Phone: _____ ☐ Text: _____ ☐ Email: _____

If your patient does not require this referral, please let the Cervix Screening Program know by faxing the following information to 1-604-297-9327:

Patient will not be proceeding to North Island Hospital Comox Valley Colposcopy Clinic due to:

☐ I have referred the patient to the following colposcopy clinic: _____

☐ Patient had a total hysterectomy. No further recall will occur.

☐ Patient has moved, or is moving out of province. No further recall will occur.

☐ Patient has declined follow-up. No further recall will occur.

☐ Patient is medically unfit for follow-up. No further recall will occur.

☐ Patient is deceased.

☐ Patient will be due for Pap test on Date (YYYY/MM/DD): _____
(Cervix Screening Program to send reminder notification when due)

☐ Patient requires a Colposcopy Referral on Date (YYYY/MM/DD): _____

"This patient was referred to *North Island Hospital Comox Valley...*"

"If this patient is proceeding for follow-up, you will be sent a copy of the procedure report after the procedure is complete. If this patient is not going to proceed, you will be advised by the colposcopy clinic."

Case Specific Questions

Diana

Meet Diana



- 56 years old
- Lives in Vancouver
- Due for cervix screening

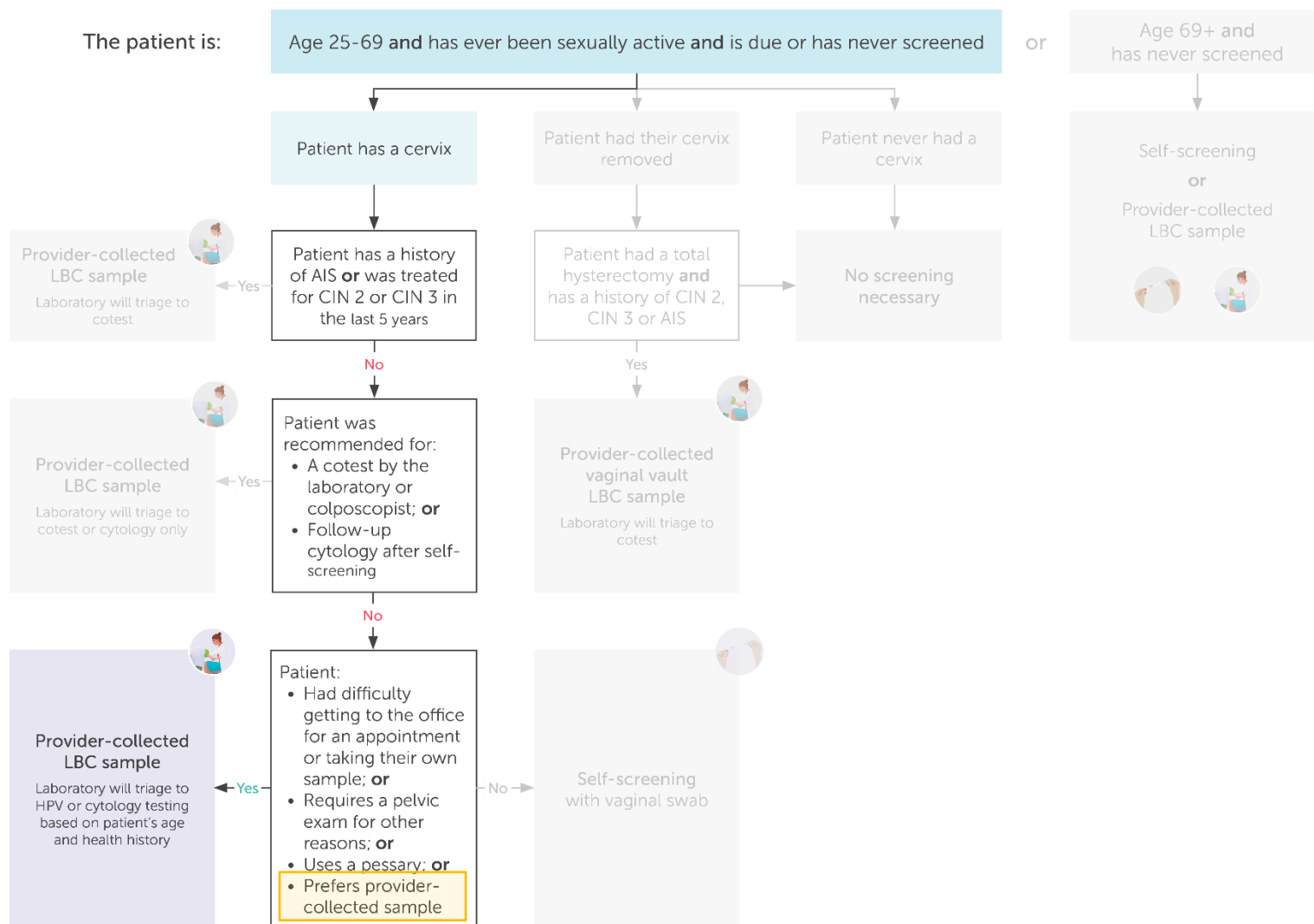
Her health care provider's office programmed screening reminders in their EMR and receives an alert that Diana is due for screening.

The MOA calls Diana to ask her to come in for an appointment.

Diana Meets with her Health Care Provider



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



Diana Gets a Provider-Collected LBC Sample



After discussing options for provider-collected LBC sample or self-screening, Diana and her health care provider decided to complete a provider-collected (LBC) sample.



BC
CAN

LBC Sample is Returned to the Cervical Cancer Screening Laboratory



At the laboratory, Diana's sample is **triaged to HPV testing** due to her age.

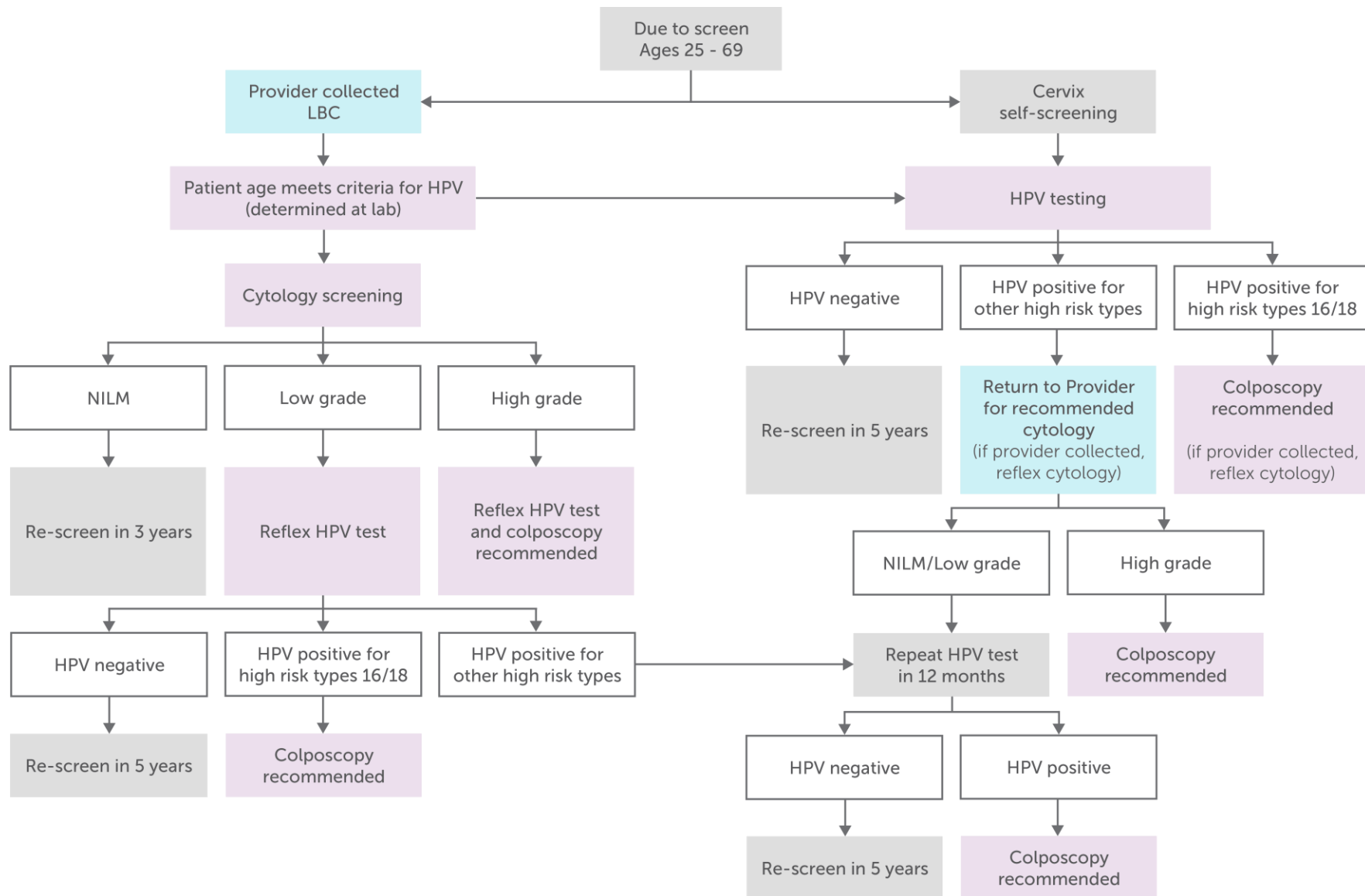
Diana's sample tests positive for HPV. Her sample is reflexed to cytology by the laboratory.



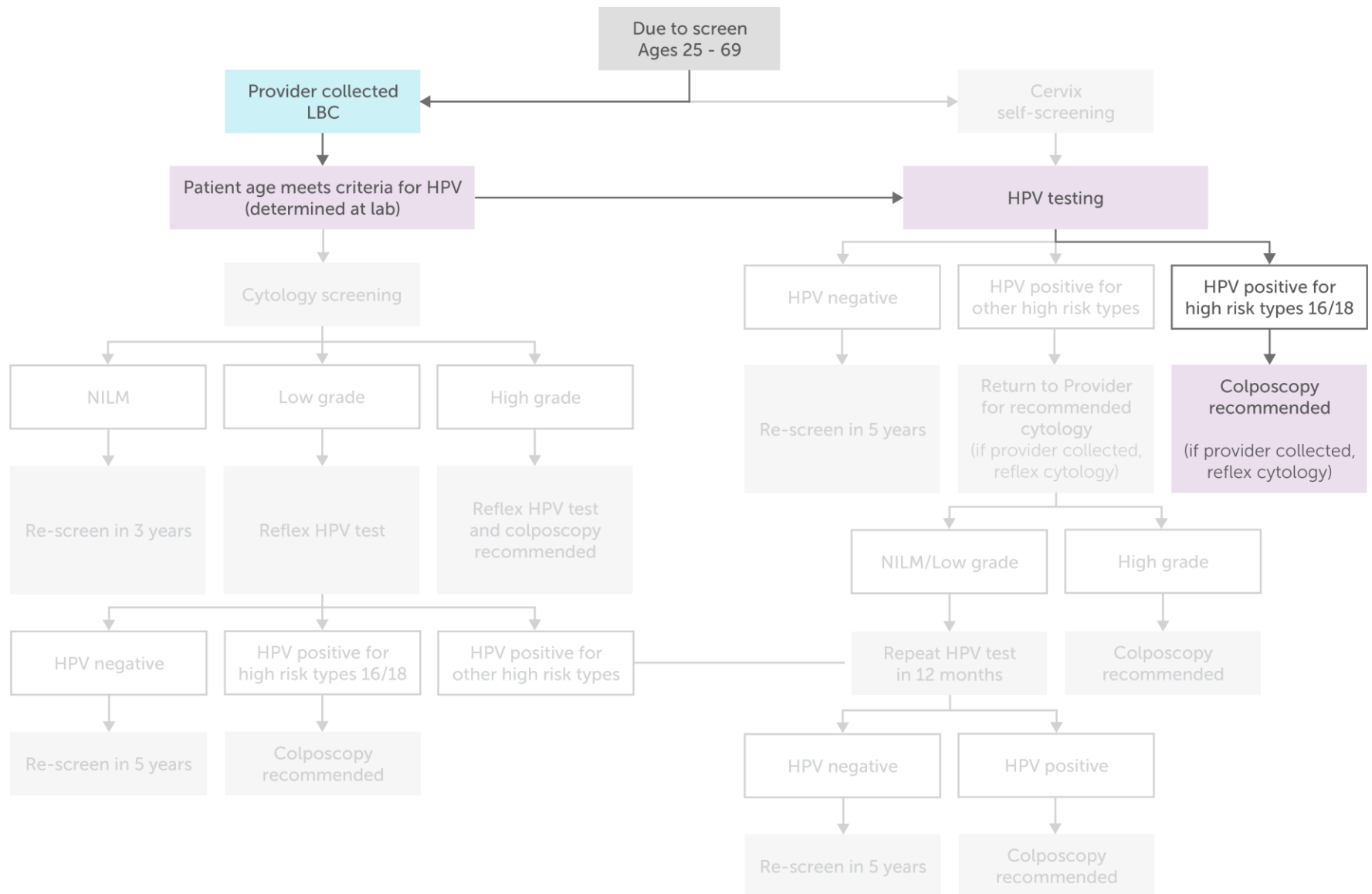
Result:
**Positive for HPV 16/18,
Cytology HSIL Moderate**

Next Steps:
Colposcopy Recommended

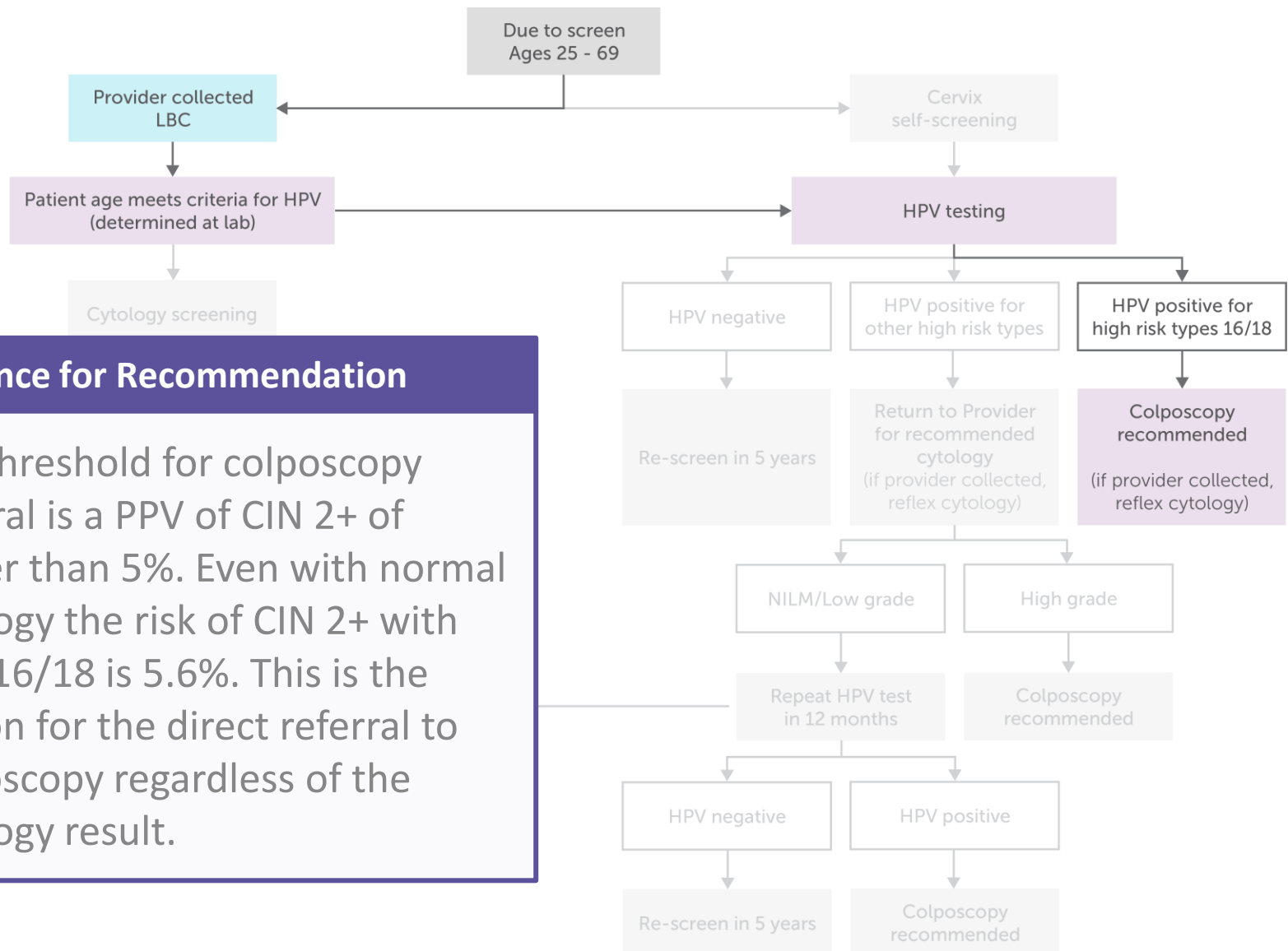
Screening Algorithm



Screening Algorithm



Screening Algorithm



Evidence for Recommendation

The threshold for colposcopy referral is a PPV of CIN 2+ of higher than 5%. Even with normal cytology the risk of CIN 2+ with HPV 16/18 is 5.6%. This is the reason for the direct referral to colposcopy regardless of the cytology result.

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



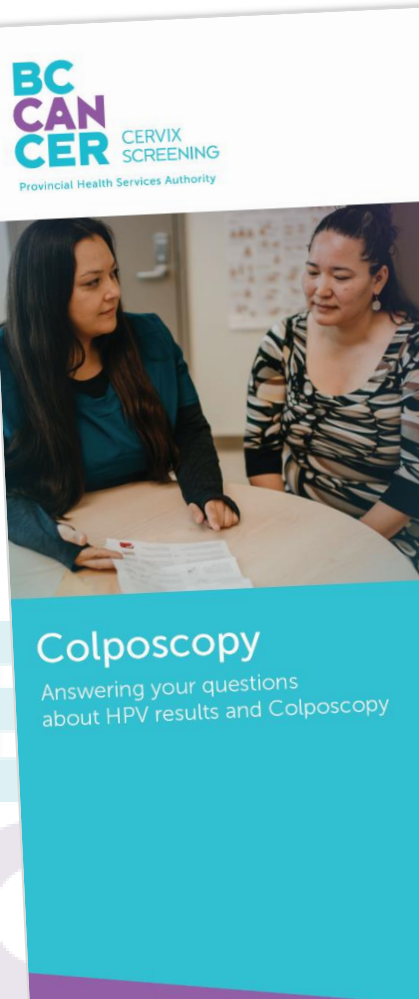
The laboratory report with both the HPV and cytology test results are sent to Diana's health care provider.

The laboratory report indicates that colposcopy is recommended.

Result Sent to Diana



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



Screening Test Result

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

Diana Murray
453 W 12th Ave
Vancouver, BC V5Y 1V4

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 Vancouver General Hospital – Women's Clinic at (604) 875-4268.

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) 875-4268 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 Vancouver General Hospital at (604) 875-4268.”

Referral Sent to Colposcopy Clinic



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



COLPOSCOPY REFERRAL

Referral Date: March 4, 2024
Clinic: Vancouver General Hospital – Women's Clinic
Address: 2775 Laurel Street Vancouver, BC V5Z 1M9

CLIENT INFORMATION

PHN: 9123456789
Name: Diana Murray Sex: F
DOB: 1967-05-12 Age: 56
Address: 453 W 12th Ave Vancouver, BC V5Y 1V4
Home Phone: (604) 123-4567 Cell Phone: (604) 987-6543
Preferred Method of Contact: Phone Preferred Language: English
Alt Contact Name: Nil Relationship: Nil
Alt Contact Home: Nil Alt Contact Cell: Nil

HEALTH CARE PROVIDER CONTACT INFORMATION

Nurse/Doctor: Danica Horvat MSC#
Address: 686 West Broadway Vancouver, BC V5Z 1G1
Phone#: (604) 147-8523 Fax#: (604) 369-8521

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

Vancouver General Hospital
Colposcopy Clinic is provided with
Diana's contact information

Vancouver General Hospital
Colposcopy Clinic is provided with
Diana's family doctor information.

Notice of Referral Sent to Health Care Provider



The Screening Program notifies Diana's health care provider that a referral for colposcopy has been sent on behalf of Diana's health care provider to Vancouver General Colposcopy Clinic:

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

March 4, 2024

Dr. Danica Horvat
686 West Broadway
Vancouver, BC V5G 1Z1

RE: Diana Murray, 1967-05-12, 9123456789

Notification - Referral for Further Follow-Up has been Sent.

This patient was referred to Vancouver General Hospital – Women's Clinic Colposcopy Clinic on March 4, 2024 Re: Cervix Self-screening test report date: February 5, 2024.

The patient contact information provided to the Colposcopy Clinic is: H: (604) 123-4567 M: (604) 987-6543. If this information is incorrect, please call the clinic at (604) 875-4268 to update the patient's information.

If this patient is proceeding for follow-up, you will receive a copy of the procedure report after the procedure is complete. If this patient is not going to proceed, the Colposcopy Clinic will advise you.

If any of the following pertains to this patient, complete the following information and fax to: Vancouver General Hospital – Women's Clinic Colposcopy Clinic at (604) 875-5807.

☐ This patient is pregnant, due date (YYYY/MM/DD): _____

☐ An interpreter is needed. Language: _____

☐ This patient has special needs (e.g. mobility issues): _____

☐ Self-pay patient

Patient prefers contact by:

☐ Phone: _____ ☐ Text: _____ ☐ Email: _____

If your patient does not require this referral, please let the Cervix Screening Program know by faxing the following information to 1-604-297-9327:

Patient will not be proceeding to Vancouver General Hospital – Women's Clinic Colposcopy Clinic due to:

☐ I have referred the patient to the following colposcopy clinic: _____

☐ Patient had a total hysterectomy. No further recall will occur.

☐ Patient has moved, or is moving out of province. No further recall will occur.

☐ Patient has declined follow-up. No further recall will occur.

☐ Patient is medically unfit for follow-up. No further recall will occur.

☐ Patient is deceased.

☐ Patient will be due for Pap test on Date (YYYY/MM/DD): _____
(Cervix Screening Program to send reminder notification when due)

☐ Patient requires a Colposcopy Referral on Date (YYYY/MM/DD): _____

“This patient was referred to
Vancouver General...”

“If this patient is proceeding for
follow-up, you will be sent a copy of
the procedure report after the
procedure is complete. If this patient
is not going to proceed, you will be
advised by the colposcopy clinic.”

4 Months Later: Reminder Notice Sent to Vancouver General Colposcopy Clinic



It's been 4 months since Diana was referred for colposcopy and the Screening Program has not received Diana's colposcopy results.

The Screening Program sends a reminder notice to Vancouver General Hospital Colposcopy Clinic:



July 4, 2024

Vancouver General Hospital – Women's Clinic
2775 Laurel Street
Vancouver, BC V5Z 1M9

RE: Diana Murray, 1967-05-12, 9123456789

ACTION REQUIRED – Provide follow-up information

Our records indicate that the above patient was recommended for further follow-up on March 4, 2024.

The Cervix Screening Program does not have a record of the follow-up for this patient. If follow-up has been completed, please forward a copy of the colposcopy or treatment form. If the patient has an upcoming appointment please send us the documentation when the procedure is complete.

If this patient is not proceeding with further follow-up at your clinic, please select one of the reasons below and fax your response to 604-297-9327.

- ☐ Patient did not attend for a booked appointment and is not expected to complete follow-up.
- ☐ Patient had a total hysterectomy. Date (YYYY/MM/DD): _____
- ☐ Patient has moved, or is moving out of province.
- ☐ Patient declined further follow up.
- ☐ Patient was not able to be contacted for an appointment.
- ☐ Patient is medically unfit for follow-up.
- ☐ Patient is deceased.
- ☐ Patient will be due for Pap test on Date: _____
Cervix Screening Program to send reminder notification when due (YYYY/MM/DD)
- ☐ Patient requires a Colposcopy Referral on Date: _____
Cervix Screening program to refer patient when due (YYYY/MM/DD)
- ☐ Other: _____

If any of the above options are selected or if a colposcopy or treatment form is not received, no further recall will be sent to the patient or the provider.
Please ensure the patient's primary care provider has been notified if the patient is not going to have follow-up.

6 Months Later: Reminder Notice Sent to Diana's Health Care Provider



It's been 6 months since the reminder notice was sent to the Vancouver General Hospital Colposcopy Clinic, but the Screening Program has not received Diana's colposcopy results.

The Screening Program sends a reminder notice to Diana's health care provider:



January 4, 2025

Dr. Danica Horvat
686 West Broadway
Vancouver, BC V5G 1Z1

RE: Diana Murray, 1967-05-12, 9123456789

ACTION REQUIRED – Provide Follow-Up Colposcopy Information

Our records indicate that the above patient was recommended for further follow-up on March 4, 2024.

The Cervix Screening Program does not have a record of the follow-up for this patient. Please select one of the reasons below and fax your response and any accompanying reports to 1-604-297-9327.

1. Follow-up has been completed. Please fax Colposcopy or Treatment Form to the Cervix Screening Program:

- ☐ Colposcopy Form
☐ Treatment Form

2. I have no record that the patient had colposcopy and colposcopy is still required.

- ☐ Cervix screening program to send referral for colposcopy.

3. Patient has been referred to _____ colposcopy clinic and is waiting for the procedure.

4. Patient is not proceeding with further follow-up due to:

- ☐ Patient had a total hysterectomy.
☐ Patient has moved, or is moving out of province.
☐ Patient declined further follow-up.
☐ Patient was not able to be contacted for an appointment.
☐ Patient is medically unfit for follow-up.
☐ Patient is deceased.
☐ Patient will be due for Pap test on Date (YYYY/MM/DD): _____
(Cervix Screening Program to send reminder notification when due)
☐ Patient requires a Colposcopy Referral on Date (YYYY/MM/DD): _____
(Cervix Screening program to refer patient when due)
☐ Other: _____

If a Colposcopy or Treatment Form with Recommendations or a future screening or colposcopy date is not received, no further recalls or reminders will be sent for this patient until the Cervix Screening Program receives new result information.

Camilla

Meet Camilla



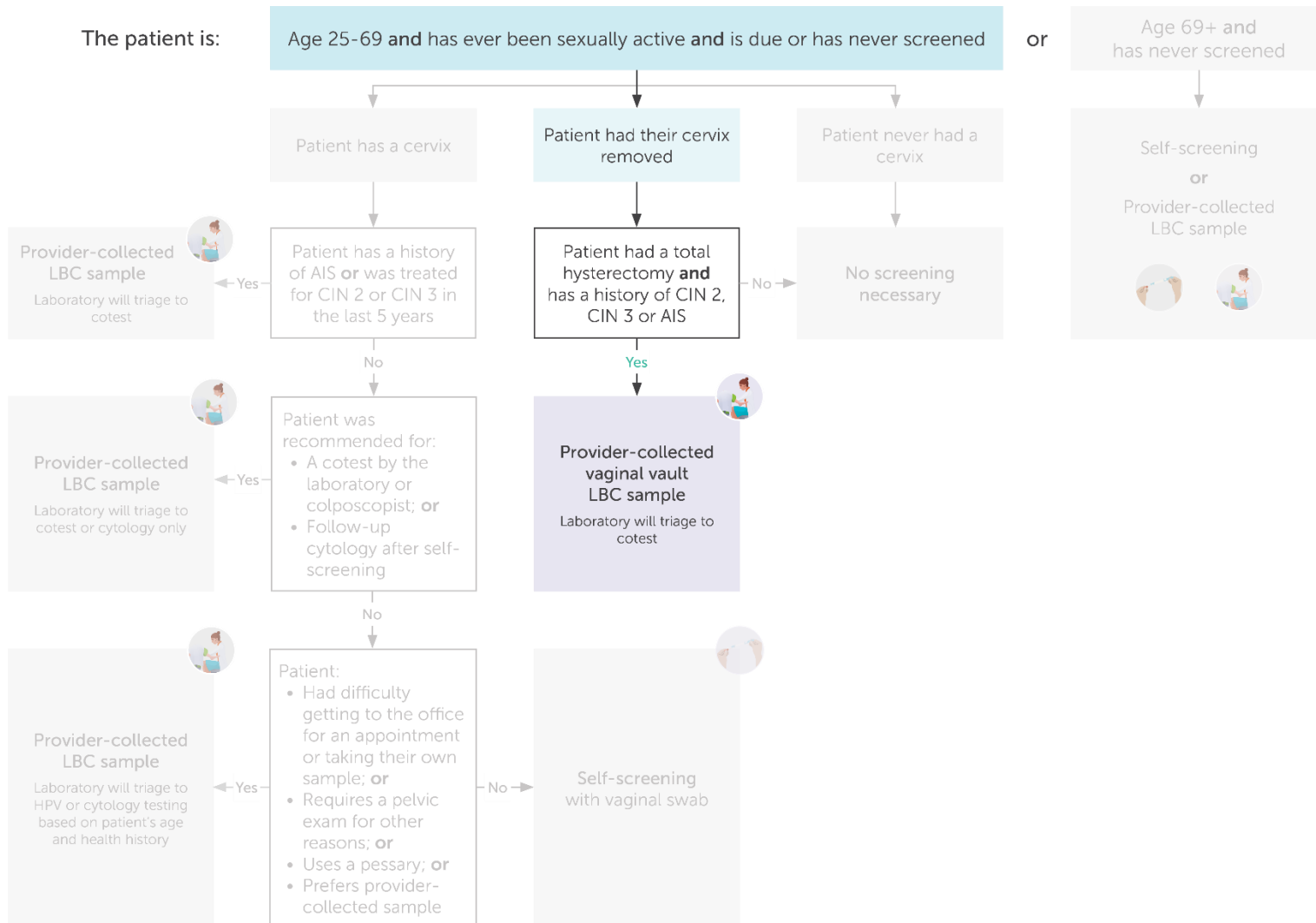
- 46 years old
- Had a total hysterectomy 3 years ago
- Prior to hysterectomy, had CIN 3 and LEEP x 2

After hearing about cervix self-screening on social media, she books an appointment with her health care provider to ask about her screening options...

Camilla Meets with her Health Care Provider



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



Camilla Gets a Cotest



Camilla's health care provider informs her that the guidelines recommend that she receive a provider-collected LBC sample so that the sample can be tested for both HPV and cytology (cotest).



BC
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Camilla'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 9342678901	Patient DOB (dd/mm/yyyy) 5-Aug-1977	Follow-up Practitioner/Clinic (MSP#, Name, Address) 54321, Bonnie Russell 6000 Oliver Rd, Nanaimo, BC V9T 6T6	
Patient Last Name Rodrigues	Patient First Name & Initials Camilla		
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) 54321, Bonnie Russell	<input type="checkbox"/> locum <input type="checkbox"/> RN <input type="checkbox"/> ND
Sample Date (dd/mm/yyyy) 30-Jan-2024	LMP Date (dd/mm/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.

CLINICAL INFORMATION:

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

CLINICAL COMMENTS:

Patient had a previous history of CIN 3

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: 20-Jan-2021 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:

Result:
Cytology NILM, HPV Negative

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

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



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

The laboratory report indicates that no further screening is required.

Evidence for Recommendation

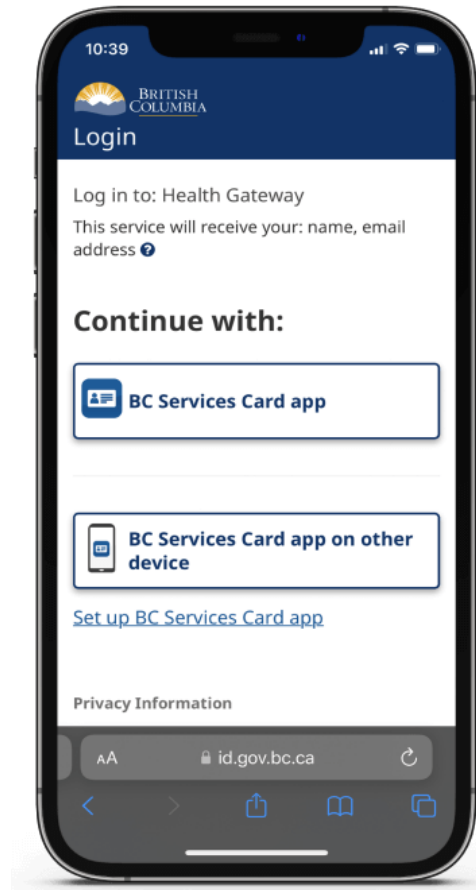
CIN2+ prior to or at the time of hysterectomy is a risk factor for VAIN or Vaginal cancer. Similar to the development of CIN/cervical cancer, vaginal SCC is related to HPV persistence.

- After a positive HPV test, the risk of VAIN is elevated to up to 35% in those with abnormal reflex cytology.
- After a negative cotest (negative HPV and negative cytology), the incidence of VAIN is 0.1% highlighting the sensitivity of HPV testing in this scenario.

Result Sent to Camilla



Camilla receives her laboratory result on [HealthGateway](#).



Erin

Meet Erin



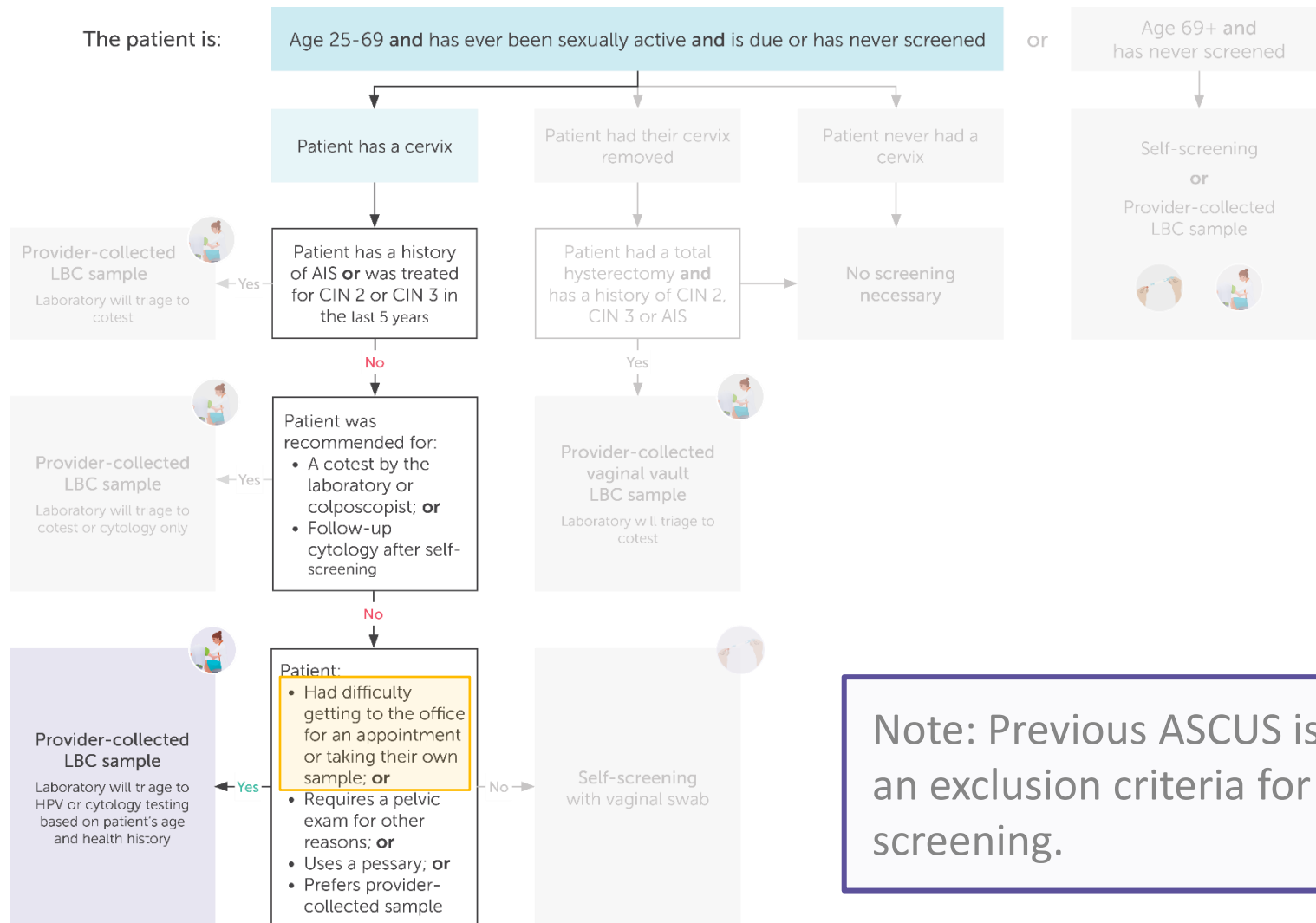
- 38 years old
- Had her last Pap test 6 months
- Previous result: ASCUS
- Drives over an hour from Port Renfrew to see her family doctor in Sooke

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

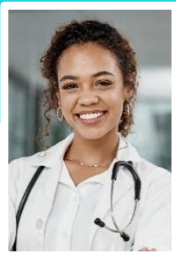
Erin Gets a Provider-Collected LBC Sample



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/mm/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/mm/yyyy) 30-Jan-2024	LMP Date (dd/mm/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.

CLINICAL INFORMATION:

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

CLINICAL COMMENTS:

Previous ASCUS

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

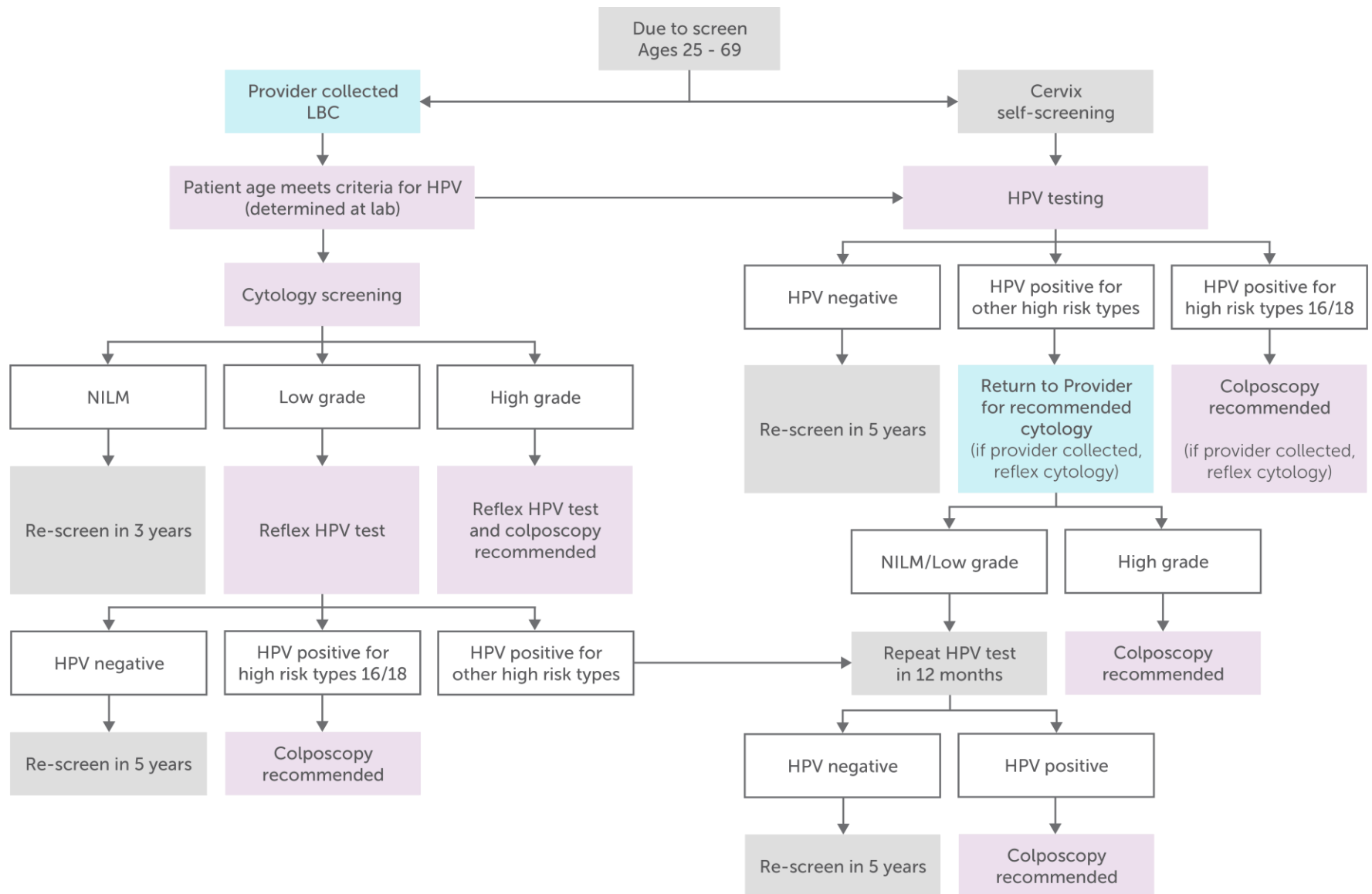
Her sample is negative for HPV.



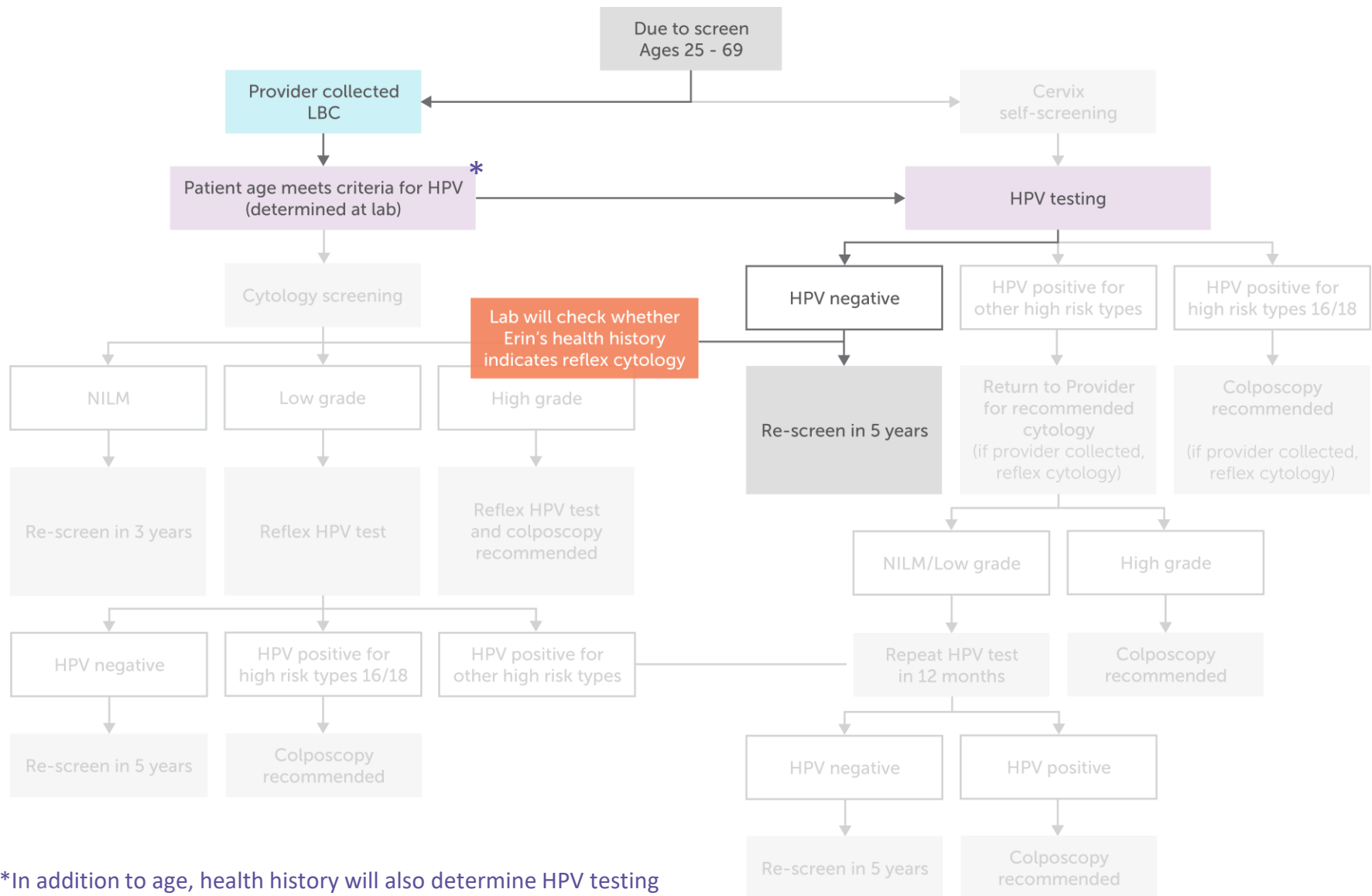
Result:
HPV Negative

Next Steps:
Screen in 5 years

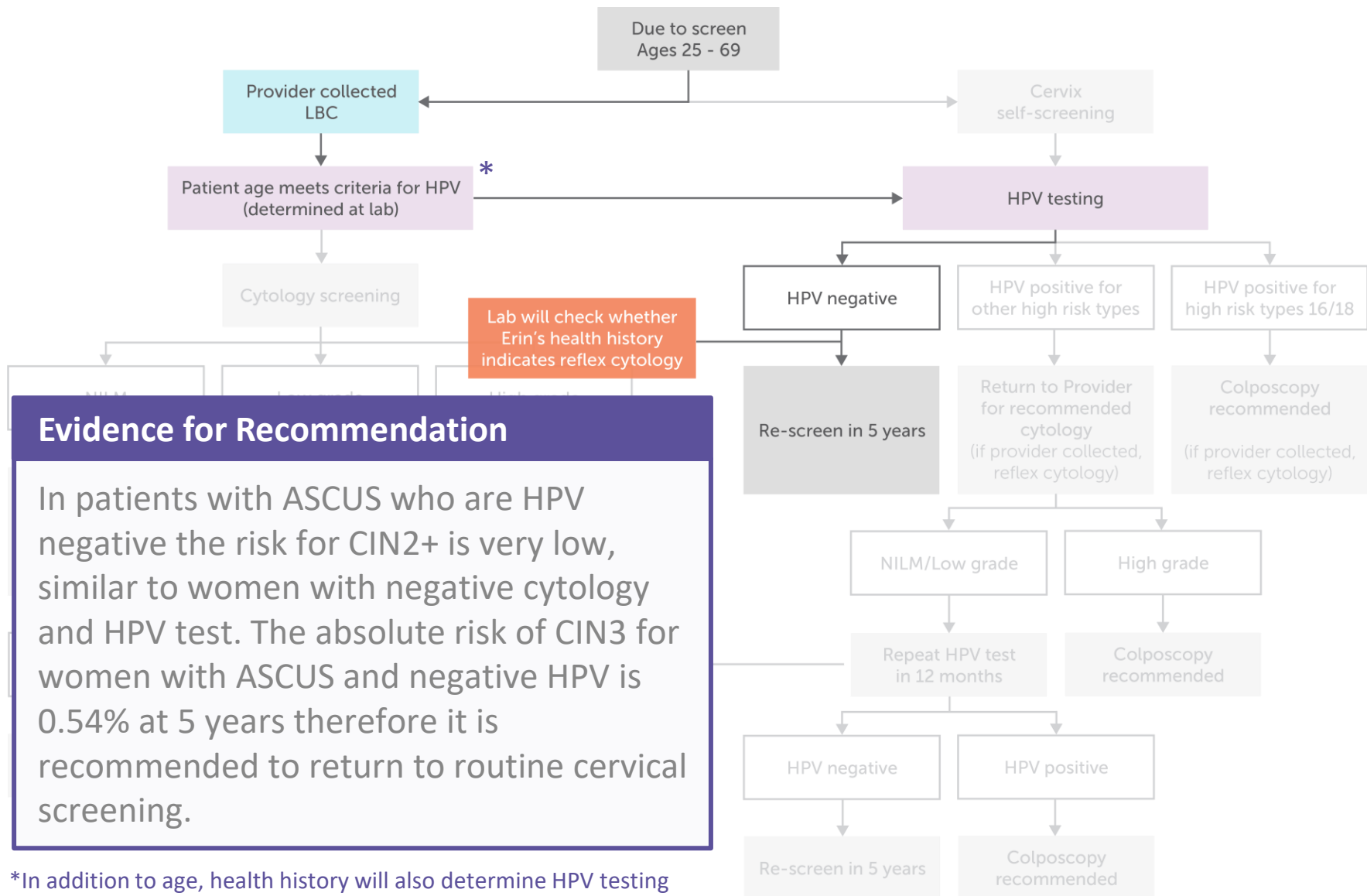
Screening Algorithm



Screening Algorithm



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 five 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.

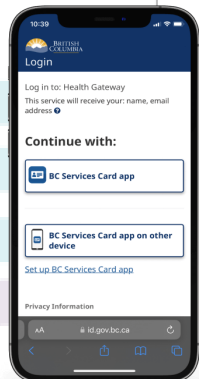
If you have changed your address, please visit <https://www.addresschange.gov.bc.ca/> to update your address with ICBC and Health Insurance BC at the same time.

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.”



Questions?

Submit your questions
using the Q&A function in Zoom.