



Pap Smear

Pre-Referral Considerations:

1. 21-29 years old, cytology every 3 years
2. High risk human papilloma virus (HR HPV) testing only for Atypical
3. Squamous Cells of Undetermined Significance (ASCUS)
 - A. 30-64 years old, screen with cytology and HR HPV testing with 16 and 18 testing every 5 years or cytology every 3 years

Red Flags:

The Following Results Require Colposcopy/Endometrial Biopsy

1. Age 21-24 only High Grade Squamous Intraepithelial lesions (HSIL)
2. Ages 25-64
3. ASCUS + HR HPV
4. ASCUS cannot r/o High grade squamous intraepithelial lesions (HSIL)
5. Low grade squamous intraepithelial lesions (LSIL)
6. HGSIL
7. Atypical or Malignant Glandular cells (AGS) requires colposcopy and endometrial biopsy

Lab Studies:

1. Pap smear
2. HR HPV

Imaging Studies:

None

What to Avoid Ordering:

1. PAP before age 21
2. PAP after age 65 in normal risk patients (no Cervical intraepithelial neoplasia 2 or greater last 20 years and last 2 screens negative for HPV and cytology)

Comments:

1. Pathway for normal risk population
 - a. ASCUS with negative HPV → repeat pap smear in 1 year
 - b. If ASCUS second year → colposcopy
 - c. LSIL negative HR HPV age 30 or more repeat one year, then repeat 3 years then normal screening if follow up smears normal
2. Colposcopy Results:
 - a. Refer to algorithms by the ASCCP at this website: asccp.org