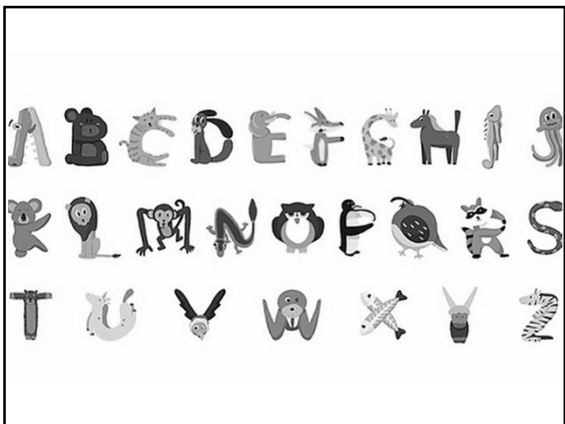


Pap Follow-Up A-Z

**Krysta Hood, DNP, RN, CRNP
Nurse Practitioner Senior
Alabama Department of Public Health**

- ## Objectives
- Review of follow-up steps including **ASCCP 2019 Guidelines for Cervical Screening and Management through Case Study Application and Protocol**
 - **A step-by-step guide for follow-up on abnormal pap smears.**



Case Study

**32 yo G2P2 no prior colpo history,
smoker, no HPV vaccine series**

Pap History:
2021 NIL -HPV
2020 NIL +HPV
2019 NIL +HPV

- ## Standing Order
- **Consult on-call MD**
 - **Any clinical situation without next steps**
 - **Recommendation to Use Clinical Judgement**
 - **Uncertain Management**

B. ASCCP Guidelines: Follow ASCCP Guidelines with application of the Web Application and/or phone app. Web address: <https://app.asccp.org>. Must use Google Chrome for this web application. The app and the web applications have management, Publications, and definitions sections that do not include references. ADPH has adopted these evidence-based references as above attached web address.

NOTE: Although the guidelines are based on evidence whenever possible, for certain clinical situations limited high-quality evidence exists. In these situations, the guidelines are based on consensus expert opinion. Guidelines should never be a substitute for clinical judgment. Clinical judgment should always be used when applying a guideline to an individual patient since guidelines may not apply to all patient-related situations. Consults to Dr. Thomas from the NP's who manage abnormal paps as indicated.

CPM-Family Planning 11 Revised January 2021

Standing Order: UPDATE

- **ASCCP App/Website and ADPH Protocol have the same recommendation for f/u**
- **Refer for colposcopy without a consult**
- **Consult if indicated**

Standing Order: UPDATE

- **Refer to UAB or outside clinic for colposcopy as indicated by ASCCP guidelines**

MEMORANDUM

TO: ADPH County Health Departments

FROM: Grace Thomas, M.D., F.A.C.O.G.
Medical Officer
Bureau of Family Health Services

DATE: February 9, 2021

SUBJECT: Standing Order for Provision of Abnormal Pap Management Specific to UAB Clinic Referral Guidelines

For immediate use, please discontinue the use of UAB colposcopy clinic referral guidelines in the ADPH follow-up section of the PPI protocol as they are outdated. These guidelines are to be replaced with the Consensus Management Guidelines that are currently accessed using the ASCCP app or ASCCP website. This is an evidence-based ADPH process. Nurse Practitioners are to continue to consult Dr. Thomas or the MD on call for any clinical situation that does not give real time recommendations (i.e., "see clinical judgment," and/or any clinical situation for which management is uncertain).

Do not refer to UAB Colposcopy clinic or another outside clinic unless indicated by physician consult. Continue to use the UAB Colposcopy Clinic Referral Guidelines as general guidance for scheduling a patient appointment. UAB contacts remain as listed in this section. Continue to use the UAB Referral Form that must include the ASCCP app or outside clinical situation recommendation. This must be clearly written on the referral form and scanned into the document manager of the patient's record.

Alternatively, UAB has approved copying of the clinical situation with the patient's risk percentage noted and attaching this print-out to the referral. ADPH will utilize these changes in the next 2021 ADPH scheduled protocol revision update.

Grace Thomas MD 2-9-21
Grace Thomas, M.D., F.A.C.O.G. Date
Medical Officer for Family Health Services

Consults

- **Age and pertinent history**
- **Clinical situation utilized**
- **Previous testing**
- **Indication for colposcopy if performed**

Consults

- **Colpo Histology**
- **Treatment Histology**
- **Include pertinent information regarding SCJ visualization, pathology report, and plan of care.**
- **Recommendation including Immediate and 5-year Risk Assessment with plan of care.**

Consult Example
Append Note

32 yo G2P2 ASCCP 2019 Guidelines
Return visit during pre-colpo
surveillance- Use Clinical Judgement

Pap History:
2021 NIL -HPV
2020 NIL +HPV
2019 NIL +HPV

Consult

- **Make clear your initial plan of care.**
- **Don't just ask for recommendations or omit your plan of care.**
- **Refer for colposcopy or cotest in 1 year?**

Consult

- **Assign note**
- **EHR message**
- **Add to District or County List for ADPH Colpo Clinic**

ASCCP Interim Guidance for Timing and Treatment Procedures for Patients with Abnormal Cervical Screening Tests

May 26, 2020 - In light of the current unprecedented COVID-19 pandemic, and in settings where all non-essential medical office visits and elective procedures have been suspended, ASCCP recommends the following.

1. Individuals with low-grade cervical cancer screening tests may have postponement of diagnostic evaluations up to 6-12 months.
2. Individuals with high-grade cervical cancer screening tests should have documented attempts to contact and diagnostic evaluation scheduled within 3 months.
3. Individuals with high-grade cervical disease without suspected invasive disease should have documented attempts to contact and procedures scheduled within 3 months.
4. Individuals with suspected invasive disease should have contact attempted within 2 weeks and evaluation within 2 of that contact (4 weeks from the initial report or referral).

Colpo List
Triage

- **High Risk**
- **Post-Colpo or LEEP Follow-up**
- **Abnormal within past 12 months**
- **Abnormal within past 6 months**
- **Lost to F/U**

Colpo List Totals

- **District High Risk**
- **Post Colpo/LEEP**
- **12 month**
- **9 month**
- **6 month**
- **Total**

Colpo List

By County

- 25 yo s/p LEEP UAB 7/20 Colpo/ECC due 2/2021, LEEP with CIN 2 + margins, + staining. Colpo 10/2019 Bibb.

Colposcopy Work-ups

- 25 yo G2P1 LMP 3/23/2021 FPA 12/2020, current on Depo, STI cultures nonreactive.
- Pap History:**
- s/p LEEP UAB 7/20 Colpo/ECC due 2/2021, LEEP with CIN 2 + margins, + staining.
 - Colpo 10/2019 Bibb CIN 2

Pap History Documentation Reverse-Chronological Order- Most Recent First

Diseases Procedure / Test Hospitalization

Pap history
07/09/2020 NIL pos
04/2019 UAB colpo ECC cannot exclude LSIL
10/2018 LEEP CIN 3 pos margins
03/2018 ASCUS pos

Characters left: 1872

Pap History Documentation Avoid Chronological Order

Hospitalization: 2007 LEEP
2010 NIL
2012 NIL
11/3/14 LGSIL and +HPV
2/13/15 LGSIL on Colpo
2/18/16 ASCUS with +HPV on Pap
5/13/16 LGSIL (CIN 1) colpo
5/25/17 Neg with +HPV on Pap
7/28/17 LGSIL (CIN 1) on Colpo
7/26/2018 NIL HPV POS
11/29/2018 LSIL CIN 1 colpo
12/23/2019 NIL HPV POS
02/20/2020 Colpo/ ECC -Benign .

Pap History Documentation Avoid Chronological Order

Unremarkable Date: 06/08/2020

Diseases Procedure / Test Hospitalization

2/13/15 LGSIL on Colpo
2/18/16 ASCUS with +HPV on Pap
5/13/16 LGSIL (CIN 1) colpo
5/25/17 Neg with +HPV on Pap
7/28/17 LGSIL (CIN 1) on Colpo
7/26/2018 NIL HPV POS
11/29/2018 LSIL CIN 1 colpo
12/23/2019 NIL HPV POS
02/20/2020 Colpo/ ECC -Benign
02/12/2021 NIL HPV Negative

Characters left: 1660

Pap History Documentation

Unremarkable Date: 05/06/2020

Diseases Procedure / Test Hospitalization

All Diseases Search Disease

High Cholesterol	HPV	Diabetes
Headaches	Migraine Headaches	High Blood Pressure
Diabetes mellitus type 2	Hypertension	Anemia
Chronic Disease	Endometriosis	Depression
Asthma	Oral Disease	Anxiety

Destiny All

Abnormal Pap

Description

Status: -Select- From: -Select- To: -Select- Characters left: 2000

Onset: -Select- Duration: -Select- Pattern: -Select-

Severity: -Select- Radiation: -Select-

Aggravated by: -Select- Relieved by: -Select- Course: -Select-

Location

Associated Features

Comments

Characters left: 2000

Pap History Documentation Avoid Use Procedure/Test

Pap History Documentation Avoid Use Procedure/Test

Medical History
 Anxiety
 seasonal allergies
 Headaches
 Degenerative Disc Disease
Procedure / Test/Date/Result
 PAP Smear 09/27/2013 Abnormal
 ASCH with +HPV
 Colposcopy 10/25/2013 Abnormal
 LGSIL
 PAP Smear
 PAP Smear 04/13/2015 Abnormal
 ASCUS
 PAP Smear 08/27/2019 Abnormal
 NIL HPV Positive
 PAP Smear 10/19/2019 Abnormal
 LSI, HPV positive
 Colonscopy Abnormal
 2020 polyps - had removed
 Hospitalization: 11/22/2019 COLPO at UAB CIN 1.

Colposcopy Note

... is a 34 year old who presents for colposcopy due to a his negative/positive colost. The SCA is fully visualized. Dense AVE is noted at 9 to 10 o'clock. No mucosal or polypoid lesions. ECC and multiple biopsies taken. Hemostasis attained with Monsel's solution. Instructions given re: pelvic rest for 2 weeks and follow up in 7 to 10 days for results. Colposcopic findings as noted in EVA system and uploaded to this EHR.

Electronically signed by Dr. Thomas, Grace on Thursday, March 18, 2021 at 12:16 PM

Noted, thanks.

Appended By: Dr. Thomas, Grace on 03/18/2021 at 03:31 PM

Colposcopy findings reviewed & plan of care discussed with Dr. Thomas by Kyrista Hood, CRNP on 3/25/21. Colposcopy findings were relayed to patient, patient's questions answered, and plan of care option discussed. Patient's plan of care is repeat contact in one year, due March 2022. See external section of EHR for details.

Appended By: Wilkinson, Lindsay RN on 03/26/2021 at 11:21 AM

Results & plan of care noted. Attempted to contact patient via phone to notify her of results and plan of care. No answer, message left with patient. Awaiting return call at this time.

Appended By: Wilkinson, Lindsay RN on 03/26/2021 at 10:45 AM

45 yo fhp colposcopy on 03/15/2021 at the Bibb County Health Department due to NIL +HPV 32009 and 32019
 Pathology: ECC benign, Cervical biopsy CIN 1, LSI.
 Results uploaded into EHR.
 Colposcopy findings reviewed and plan of care discussed with Dr. Thomas on 3/26/2021.
 Plan of care: Patient to have a colost in 1 year.
 Results and recommendations to be relayed to the patient by Lindsay Wilkinson, RN, and Shauna Moffat, CRNP, How County Health Department. Please assign the note to Dr. Thomas when results have been relayed to the patient.

Appended By: Hood, Kyrista CRNP on 03/26/2021 at 12:33 PM

Colposcopy Note

... is a 46 year old G1P1 who presents for colpo due to a his negative/positive colost in 1/2021 and LSI/L on 2/2021. SCA is fully visualized with faint AVE noted at 12 to 1 o'clock. No mucosal or polypoid lesions noted. ECC and multiple biopsies done. v Hemostasis attained with Monsel's solution. Instructions given re: pelvic rest for 2 weeks and follow up in 7 to 10 days for results. Colposcopic findings as noted in EVA system and uploaded to this EHR.

Electronically signed by Dr. Thomas, Grace on Thursday, March 18, 2021 at 11:01 AM

Noted, thanks.

Appended By: Dr. Thomas, Grace on 03/20/2021 at 03:01 PM

Colposcopy findings reviewed and plan of care was discussed with Dr. Thomas by Kyrista Hood, CRNP on 3/26/21. Colposcopy findings were relayed to patient, patient's questions were answered, and plan of care options discussed. Patient's plan of care is to repeat colost in one year, which will be due March 2022. See external section of EHR for details.

Appended By: Wilkinson, Lindsay RN on 03/30/2021 at 11:05 AM

46 yo fhp colposcopy on 03/18/2021 at the Bibb County Health Department due to LSI, +HPV 20201 and NIL +HPV 10200
 Pathology: ECC benign, Cervical biopsy CIN 1, LSI.
 Results uploaded into EHR.
 Colposcopy findings reviewed and plan of care was discussed with Dr. Thomas on 3/26/2021.
 Plan of care: Patient to have a colost in 1 year.
 Results and recommendations to be relayed to the patient by Lindsay Wilkinson, RN, and Shauna Moffat, CRNP, Perry County Health Department. Please assign the note to Dr. Thomas when results have been relayed to the patient.

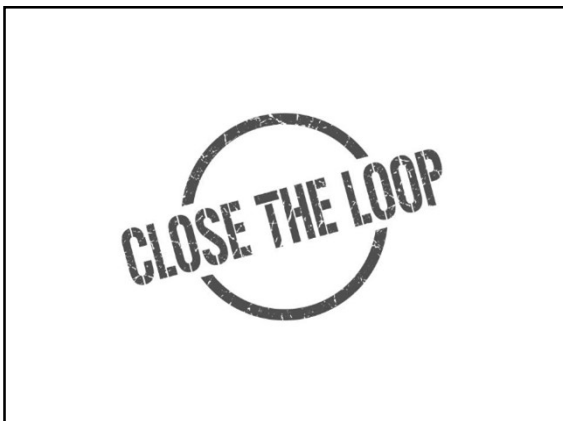
Appended By: Hood, Kyrista CRNP on 03/26/2021 at 12:28 PM

Colposcopy Note

• EVA Note

Colposcopy Note

• EVA Note



Post-Colpo or LEEP F/U

Noted, thanks.

Approved By: Dr Thomas, Grace on 03/16/2021 at 10:21 AM

One year post colpo F/U due, phone call attempted to patient on 02/09/2021, recording status cannot be completed as dated. 1st class letter mailed on 02/09/2021, no response from patient, verified letter mailed on 02/09/2021, signed receipt and returned on 03/09/2021. No response from patient as expected by patient. Follow up moved to inactive status and chart is flagged for follow up ahead patient BTC for services.

Approved By: Phillips, Stephanie CRNP on 03/15/2021 at 09:19 AM

Noted, thanks.

Approved By: Dr Thomas, Grace on 01/16/2020 at 04:25 PM

Colposcopy findings were relayed to patient, patient's questions were answered, and treatment/management options discussed. Patient will be called in one year.

Approved By: Nantz, Melissa RN on 01/15/2020 at 03:21 PM

Consent for 11 same. Results and recommendations to be relayed to the patient by Melissa Nantz, RN, Adair County Health Department. Please assign the note to Dr Thomas when results have been relayed to the patient.

Approved By: McClure, Stephanie CRNP on 01/15/2020 at 05:17 AM

31 yo SP colposcopy at the Montgomery County Health Department on 01/08/2020 due to consecutive NIL-HPV positive rates in 10/2018 and 12/2019.

Pathology: ECC - No dysplasia identified; biopsy endocervical glands, Cervical EA - Benign T-curve, no dysplasia identified.

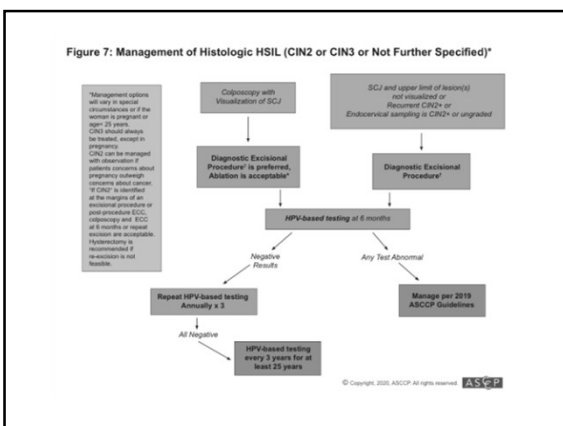
Results uploaded to ICR.

Colposcopy findings reviewed and plan of care was discussed with Dr. Thomas on 01/15/2020.

Plan of Care: Colposc in 1 year.

Results and recommendations to be relayed to the patient by Erika Glenn, RN, Montgomery County Health Department. Please assign the note to Dr. Thomas when results have been relayed to the patient.

Approved By: McClure, Stephanie CRNP on 01/15/2020 at 04:32 PM



References

Egemen D, Cheung LC, Chen X, et al. Risk estimates supporting the 2019 ASCCP Risk-Based Management Consensus Guidelines. J Low Genit Tract Dis 2020;24:132–43.

Perkins RB, Guido RS, Castle PE, et al. 2019 ASCCP risk-based management consensus guidelines for abnormal cervical cancer screening tests and cancer precursors. J Low Genit Tract Dis 2020;24:102–31.