DECLINED REFERRAL FORM

Notice: Colposcopy Not Required

| Patient information: |
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Colposcopist’s name:

Contact information:

Date:

Based on this patient’s referral cervical screening test result(s), this patient is not at an elevated risk of having/developing cervical pre-cancer (histology results: HSIL or AIS) or cancer. This patient’s referral cytology does not meet the referral threshold to colposcopy, so they **do not require a colposcopic assessment.**

The Ontario Cervical Screening Program recommends that people with the following cervical screening results are referred to colposcopy:

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| **Cervical screening test results to refer to colposcopy** |
| **Screening with cytology:**   * A high-grade cytology result (ASC-H, HSIL, AGC, or AIS) * A low-grade cytology result (ASCUS or LSIL) followed by another low-grade cytology result (ASCUS or LSIL) at the 12 month repeat cytology test * A low-grade cytology result (ASCUS or LSIL) followed by a normal cytology result (NILM) at the 12 month repeat cytology test, and then followed by a low-grade cytology result (ASCUS or LSIL) at the second 12 month repeat cytology test |
| **Screening with HPV testing[[1]](#footnote-1), if available:**   * A low-grade cytology result (ASCUS or LSIL) and HPV-positive (type 16/18)[[2]](#footnote-2) * A low-grade cytology result (ASCUS or LSIL) at repeat cytology test and HPV-positive (regardless of subtype) |

AGC: atypical glandular cells; AIS: adenocarcinoma in-situ; ASC-H: atypical squamous cells, cannot exclude high-grade; ASCUS: abnormal atypical squamous cells of undetermined significance; HPV: human papillomavirus; HSIL: high-grade squamous intraepithelial lesion; LSIL: low-grade squamous intraepithelial lesion

If there is additional information about this patient that was not in the original referral, please advise immediately (e.g., information about visible cervical abnormalities, abnormal symptoms or additional test results that were not included in the referral). If additional information is provided, the need for a colposcopic assessment will be re-evaluated.

For further information on the Ontario Cervical Screening Program’s screening and colposcopy recommendations see: <https://cancercare.on.ca/pcs/screening/cervscreening/hcpresources>.

[Physician Name], MD, Colposcopist

1. HPV testing is not currently funded by the Ministry of Health. Cytology remains the current recommended cervical screening test in Ontario. [↑](#footnote-ref-1)
2. People who are HPV-positive (other) should repeat their cytology in 12 months; people who are HPV-negative should return to routine screening with cytology in 3 years. [↑](#footnote-ref-2)