FINAL DISCHARGE RECOMMENDATIONS

COLPOSCOPY SERVICES

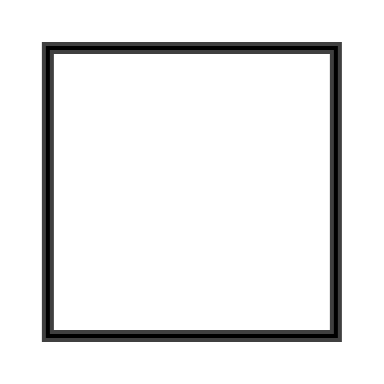
| Patient information: |
| --- |

Colposcopist’s name:

Contact information:

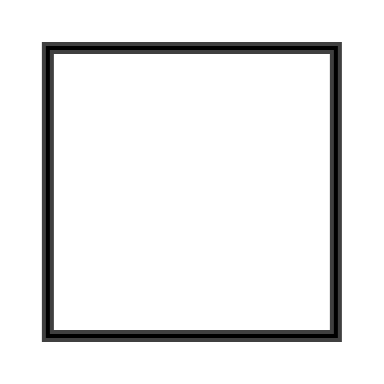
Date:

Your patient has been discharged from colposcopy[[1]](#footnote-1) and can resume cervical screening in primary care; see below for guidance on next steps:



Your patient is at **average risk** of developing cervical pre-cancer[[2]](#footnote-2) or cancer, so they should resume **routine cervical screening** in **3 years** based on the following results from colposcopy:

* HPV testing was not conducted[[3]](#footnote-3): Normal (NILM) cytology results at 3 consecutive visits, *or*
* HPV testing was conducted3: HPV-negative AND normal (NILM) or low-grade cytology (ASCUS or LSIL) results at last visit



Your patient is at **slightly elevated risk** of developing cervical pre-cancer2 or cancer, so they should resume **annual screening** based on the following results from colposcopy[[4]](#footnote-4):

* HPV testing was not conducted3: A combination of normal (NILM) or low-grade cytology (ASCUS or LSIL) results at 3 consecutive visits, *or*
* HPV testing was conducted3: HPV-positive (regardless of subtype) AND normal (NILM) or ASCUS cytology results at last visit

AIS: adenocarcinoma in situ; ASCUS: atypical squamous cells of undetermined significance; HPV: human papillomavirus; HSIL: high-grade squamous intraepithelial lesion; LSIL: low-grade squamous intraepithelial lesion; NILM: negative for intraepithelial lesion or malignancy

For further information on the Ontario Cervical Screening Program’s screening and colposcopy recommendations see [https://cancercare.on.ca/pcs/screening/cervscreening/hcpresources.](https://cancercare.on.ca/pcs/screening/cervscreening/hcpresources.%20%20)

[Physician Name], MD, Colposcopist

1. All patients being discharged have had negative colposcopy(s) (i.e., LSIL histology or no biopsy taken). [↑](#footnote-ref-1)
2. Cervical pre-cancer is defined as HSIL or AIS histology. [↑](#footnote-ref-2)
3. HPV testing is not currently funded by the Ministry of Health. Cytology remains the current recommended cervical screening test in Ontario. [↑](#footnote-ref-3)
4. Patients who are immunocompromised may be at elevated risk of developing cervical pre-cancer or cancer and should receive annual screening. [↑](#footnote-ref-4)