

Improving Cervical Cancer Screening and Colposcopy

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INTRODUCTION

- Approximately 14 million people are infected with human papillomavirus (HPV) yearly, with high-risk HPV 16 and 18, as a well-known precursor of many cervical cancers.
- Women above the age of 21 are recommended to receive cytology screening every 3 years and those who are 30 to 65 have three options for testing:
 - Co-testing (Pap and HPV test) every 5 years.
 - Cytology alone every 3 years
 - HPV testing alone every 5 years
- Per American Society for Colposcopy and Cervical Pathology (ASCCP) app Cervical cancer can be prevented when precancerous lesions are detected through colposcopy and removed via excisional procedures.
- Our goal is to improve and increase cervical cancer screening in our patient population through various team-based efforts, such as, training on appropriate utilization of ASCCP app and guidelines to effectively risk stratify abnormal Pap smear results and determine the necessity of colposcopy as the subsequent step.

METHODS

- To improve cervical cancer screening and correctly manage abnormal results, we implemented multiple team-based efforts.
- Registry Reports** – “Relevant” generated a report for providers of patients due for cervical cancer screening, which allowed medical assistants (MA) to arrange appointments.
 - Once scheduled, MA completed **robust confirmation calls**.
 - Appointments can be confirmed and if patients need to rescheduled, it can be done at this time.
 - Pre-visit planning** allows providers to review charts and verify if patients are due for cervical cancer screening.
 - Lastly, a **drop-down menu** was created to allow for standardization of abnormal results.
 - Previously providers labeled results ‘normal’ vs ‘abnormal’; now we can see results that lead to colposcopy vs. repeat pap smear.

RESULTS

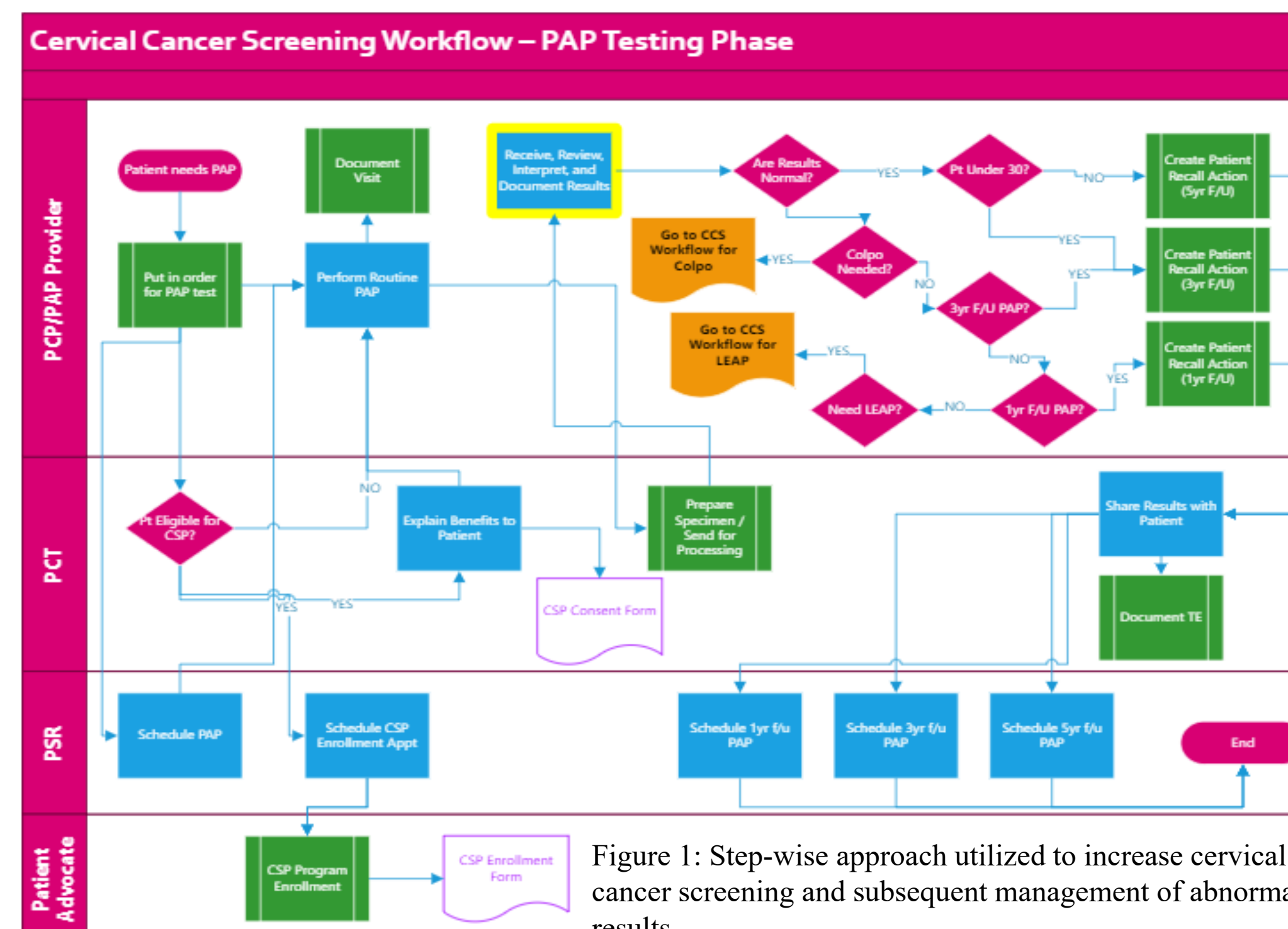


Figure 1: Step-wise approach utilized to increase cervical cancer screening and subsequent management of abnormal results.

The screenshot shows a lab result for '-Pap, ThinPrep, with Reflex HPV TIS'. A drop-down menu is open, listing standardized management options for ASCUS results:

- ASC-H needs colpo
- ASCUS w/pos HPV needs repeat pap in 1 yr
- ASCUS with Neg HPV
- ASCUS with pos HPV needs colpo
- HGSIL needs colpo
- LSIL needs colpo
- LSIL repeat pap in 1 year
- NILM w/pos HPV, needs F/U in 1 year
- NILM with pos HPV needs colpo
- Unsatisfactory with pos HPV needs colpo

Figure 2: Sample of drop-down menu as seen in a pap smear lab result with standardized options on the right to select.

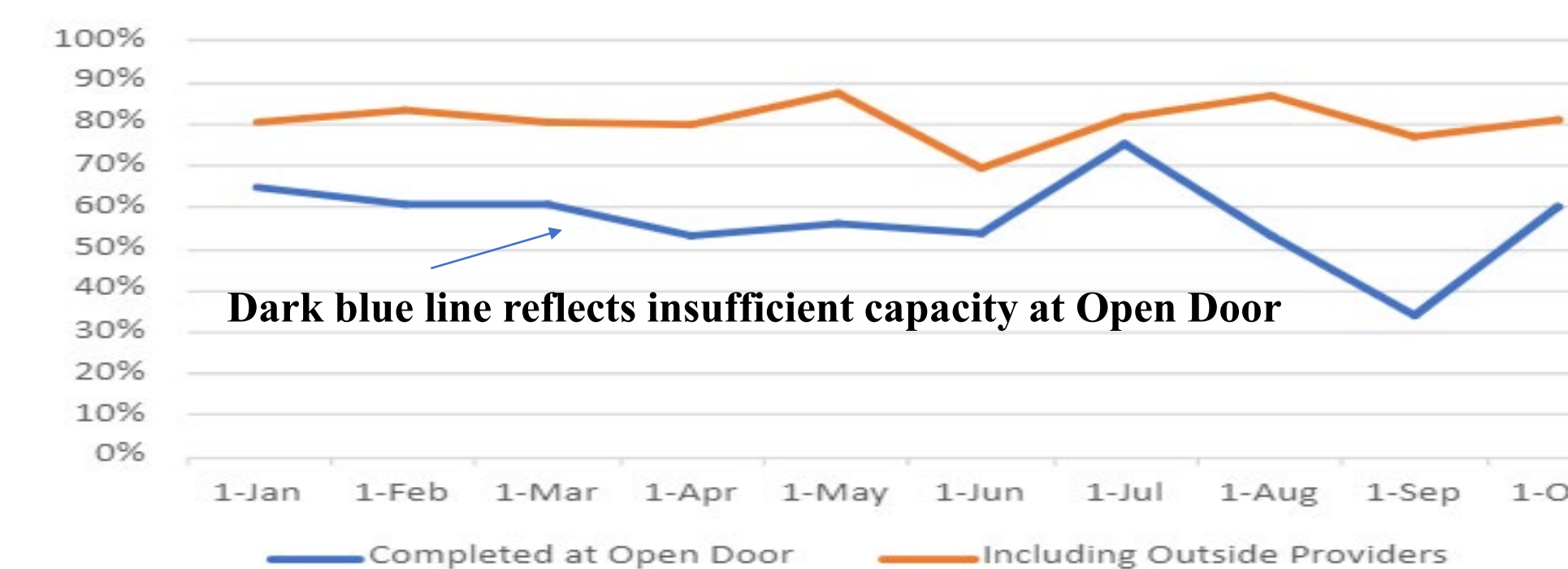
	22-Dec	23-Jan	23-Feb	23-Mar	23-Apr	23-May	23-Jun	23-Jul	23-Aug	23-Sep	23-Oct	23-Nov	23-Dec
Number of Paps	482	462	404	497	403	401	451	406	454	340	351	320	259
Abnormal Paps	69	79	83	102	59	64	65	75	74	62	57	56	56
Abnormal Paps (RN reviewed)		82	83	112	40	65	64	75	75	62	59	58	
Resulted Correctly	67	48	83	88	58	61	65	73	74	54	57	54	52
Resulted Correctly		61%	100%	86%	98%	95%	100%	97%	100%	87%	100%	96%	93%

Figure 3: Assessment of pap smears completed, reviewed by care team for appropriate management (colpo vs. repeat pap smear).

CONCLUSIONS

- By standardizing pap smear results through a **drop-down menu**, we were able to create a more streamlined process of how to manage and follow up with patients as needed.
- By doing so, patients were placed into a **colposcopy group** or a **repeat cytology and/or repeat contesting in 1 year** per ASCCP guidelines.
- This allowed us to increase colposcopy capacity for those who meet biopsy criteria to reach out organization’s goal of completing biopsies within 60 days of review of abnormal results.
- After almost a full year of this intervention, we noted that:
 - Pre-visit planning** allowed providers to review previous results and correctly interpret in conjunction with use of ASCCP app to assess those due for cervical cancer screening.
 - Incorporation of team** allowed for checks-and-balance and allowed decrease in patients lost to follow up

Colposcopies Completed Within 60 Days



- Limitations:
 - Loss of multiple colposcopy trained providers in all 5 sites
 - User error with ASCCP app

REFERENCES

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