

[Home](#) / ... / [Clinical Guidelines](#) / [Cervical cancer clinical practice guidelines](#) / [National cervical screening program](#) / [3. Terminology](#)
 / Supplement: Sample reports

SUPPLEMENT: SAMPLE REPORTS

Supplement: Sample reports



GUIDELINE UPDATES - This guideline was last updated 01/07/2022

Sample cervical screening reports

CERVICAL SCREENING	LOW RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	PCR for Oncogenic HPV and genotype: HPV 16 – Not detected HPV 18 – Not detected HPV (not 16/18) – Not detected
RECOMMENDATION	Rescreen in five years.

CERVICAL SCREENING	UNSATISFACTORY
SPECIMEN	Cervical – SurePath
TEST RESULTS	PCR for Oncogenic HPV and genotype: Unsatisfactory

RECOMMENDATION	Retest within six weeks.
-----------------------	---------------------------------

CERVICAL SCREENING	UNSATISFACTORY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Image assisted: Unsatisfactory</p>
RECOMMENDATION	Repeat screening test in six weeks.

CERVICAL SCREENING	INTERMEDIATE RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Manually Read: There is no evidence of a squamous intraepithelial lesion or malignancy</p> <p>Endocervical component: Present</p>
RECOMMENDATION	Repeat test in 12 months.

CERVICAL SCREENING	INTERMEDIATE RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
---------------------------	---

SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Image Assisted: Low grade intra-epithelial lesion (LSIL) Endocervical component: Present</p>
RECOMMENDATION	Repeat test in 12 months.

CERVICAL SCREENING	HIGHER RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Detected</p> <p>HPV (not 16/18) – Not detected</p> <p>Liquid Based Cytology (LBC), Manually Read: High grade squamous intra-epithelial lesion (HSIL) Endocervical component: Present</p>
RECOMMENDATION	Referral for Colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Detected</p> <p>HPV 18 – Not detected</p>

	<p>HPV (not 16/18) – Not detected</p> <p>Liquid Based Cytology (LBC), Manually Read: Unsatisfactory</p>
RECOMMENDATION	Referral for Colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Image Assisted: Possible high grade squamous intra-epithelial lesion (pHSIL) Endocervical component: Not identified</p>
RECOMMENDATION	Referral for Colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK FOR SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Manually Read: High grade squamous intra-epithelial lesion (HSIL) Endocervical component: Not identified</p>
RECOMMENDATION	Referral for Colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Not detected</p> <p>Liquid Based Cytology (LBC), Image Assisted: There is no evidence of a squamous intraepithelial lesion or malignancy Endocervical component: Present</p>
RECOMMENDATION	Referral for Colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Manually Read: There is no evidence of a squamous intraepithelial lesion or malignancy Endocervical component: Present</p>
RECOMMENDATION	In view of the previously reported abnormality referral for colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Image Assisted: Low grade squamous intra-epithelial lesion (LSIL) Endocervical component: Present</p>
RECOMMENDATION	In view of the previously reported abnormality referral for colposcopic assessment.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Detected</p> <p>Liquid Based Cytology (LBC), Manually Read: Atypical endocervical cells of undetermined significance There is no evidence of a squamous intraepithelial lesion or malignancy</p>
RECOMMENDATION	Referral for colposcopic assessment by a gynaecologist with expertise in the evaluation of suspected malignancies or by a gynaecological oncologist.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Detected</p> <p>HPV (not 16/18) – Not detected</p> <p>Liquid Based Cytology (LBC), Image Assisted: Possible high grade glandular lesion The findings suggest possible adenocarcinoma-in-situ</p>
RECOMMENDATION	Referral for colposcopic assessment by a gynaecologist with expertise in the evaluation of suspected malignancies or by a gynaecological oncologist.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – ThinPrep
TEST RESULTS	<p>PCR for High Risk HPV and genotype:</p> <p>HPV 16 – Detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Not detected</p> <p>Liquid Based Cytology (LBC) Image Assisted: Squamous cell carcinoma There are abnormal cells that indicate origin from an invasive squamous cell carcinoma Endocervical component: Present</p>
RECOMMENDATION	Colposcopy is recommended. Patient should be referred to a gynaecological oncologist or a gynaecological cancer centre for assessment.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>PCR for High Risk HPV and genotype:</p> <p>HPV 16 – Not detected</p> <p>HPV 18 – Detected</p> <p>HPV (not 16/18) – Not detected</p> <p>Liquid Based Cytology (LBC), Manually Read: Endocervical adenocarcinoma</p>
RECOMMENDATION	Colposcopy is recommended. Patient should be referred to a gynaecological oncologist or a gynaecological cancer centre for assessment.

Sample stand alone LBC reports

SPECIMEN	Cervical – SurePath
TEST RESULTS	<p>Liquid Based Cytology (LBC) Manually Read:</p> <p>Low grade squamous intra-epithelial lesion (LSIL)</p> <p>Endocervical component: Present</p>
RECOMMENDATION	This woman is under specialist management, therefore no management recommendation is made.

SPECIMEN	Cervical – ThinPrep
-----------------	---------------------

TEST RESULTS	Liquid Based Cytology (LBC) Image assisted: High grade squamous intra-epithelial lesion (HSIL) Endocervical component: Present
RECOMMENDATION	This woman is under specialist management, therefore no management recommendation is made.

Reports for self-collected samples

CERVICAL SCREENING	LOW RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Lower vaginal sample – Self collected
TEST RESULTS	PCR for Oncogenic HPV and genotype: HPV 16 – Not detected HPV 18 – Not detected HPV (not 16/18) – Not detected
RECOMMENDATION	Rescreen in five years.

CERVICAL SCREENING	
SPECIMEN	Lower vaginal sample – Self collected
TEST RESULTS	PCR for Oncogenic HPV and genotype: HPV 16 – Not detected HPV 18 – Not detected HPV (not 16/18) – Detected
RECOMMENDATION	Collect a cervical sample for LBC within six weeks.

CERVICAL SCREENING	HIGHER RISK OF SIGNIFICANT CERVICAL ABNORMALITY
SPECIMEN	Lower vaginal sample – Self collected
TEST RESULTS	<p>PCR for Oncogenic HPV and genotype:</p> <p>HPV 16 – Detected</p> <p>HPV 18 – Not detected</p> <p>HPV (not 16/18) – Not detected</p>
RECOMMENDATION	Refer for colposcopic assessment. Cervical sample for LBC can be obtained at time of that assessment.

CERVICAL SCREENING	UNSATISFACTORY
SPECIMEN	Lower vaginal sample – Self collected
TEST RESULTS	PCR for Oncogenic HPV and genotype: Unsatisfactory
RECOMMENDATION	Retest within six weeks.

CLINICAL GUIDELINES SITEMAP



ABOUT GUIDELINES

ARCHIVED GUIDELINES

DISCLOSURE OF INTERESTS

NATIONAL CANCER PREVENTION POLICY

PRIVACY POLICY

ACCESSIBILITY

DISCLAIMER

SITEMAP

