Test Definition: CPAPD

Conventional Smear-Diagnostic, Varies

Overview

Useful For

Screening for cervical carcinoma and a number of infections of the female genital tract including human papillomavirus, herpes, *Candida*, and *Trichomonas*

Reflex Tests

Test Id	Reporting Name	Available Separately	Always Performed
CVSPC	Physician Interp Conventional	No	No

Special Instructions

- Gyn-Cytology Patient Information

Method Name

Light Microscopy

NY State Available

Yes

Specimen

Specimen Type

Varies

Ordering Guidance

Laboratory approval prior to ordering cytology testing is required

Specimen submitted as endocervical curettage or endocervical brushing must be ordered as CYTNG/ Cytology Non-Gynecologic.

Necessary Information

1. An acceptable cytology request form must accompany specimen containers and include the following: Patient's name, medical record number, date of birth, sex, source (exact location and procedure used), date specimen was taken, name of ordering physician and pager number.

2. Submit any pertinent clinical information, including date of last menstrual period.

Specimen Required

Patient Preparation: For optimal interpretation, Papanicolaou smears should be collected near the middle of the menstrual cycle. No douching, lubricant use, or sexual intercourse for 24 hours prior to specimen collection.

Container/Tube: Slide
Specimen Volume: Circular scrape of cervical os
Collection Instructions:
1. Specimen containers must be labeled with a minimum of 2 unique identifiers (patient's name, and medical record number or date of birth). Containers should also be labeled with specimen source, and date collected.
2. Glass slides may be labeled with a single unique identifier, but 2 identifiers are preferred. If multiple slides are submitted, each slide must have proper identification. Glass slides should be identified with the patient's name and a second patient identifier that is also on the accompanying paperwork (ie, medical record number or date of birth)
3. Fix slides immediately in 95% alcohol or treat with commercially available spray fixative.

Forms

Gyn-Cytology Patient Information (T601)

Reject Due To

SurePath vial	Reject

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Ambient (preferred)		SLIDE
	Refrigerated		SLIDE

Clinical & Interpretive

Clinical Information

Squamous cell carcinoma of the cervix is believed to develop in progressive stages from normal through precancerous (dysplastic) stages, to carcinoma in situ, and eventually invasive carcinoma. This sequence is felt to develop over a matter of years in most patients.

The etiology of cervical carcinoma is unknown, but the disease is believed to be related to sexual activity and possibly sexually transmitted viral infections such as human papillomavirus (HPV).

Most cervical carcinomas and precancerous conditions occur in the transformation zone (squamo-columnar junction), therefore, this area needs to be sampled if optimum results are to be obtained.

Reference Values

Satisfactory for evaluation. Negative for intraepithelial lesion or malignancy.
Note: Abnormal results will be reviewed by a physician at an additional charge.

Interpretation

Standard reporting, as defined by the Bethesda System (TBS) is utilized.

Cautions

If endocervical cells have not been obtained (less than optimal smears) the results may be unreliable.

There is a false-negative rate of 10% to 20% in the presence of cervical intraepithelial neoplasia or invasive squamous cell carcinoma.

The Papanicolaou test is unreliable for endometrial carcinoma (at least 50% false-negative rate).

Clinical Reference

1. Wright TC Jr, Cox JT, Massad LS, et al: ASCCP-Sponsored Consensus Conference. 2001 Consensus Guidelines for the management of women with cervical cytological abnormalities. JAMA. 2002 April;287(16):2120-2129
2. Solomon D, Davey D, Kurman R, et al: The 2001 Bethesda System: terminology for reporting results of cervical cytology-Consensus Statement JAMA. 2002 April;287(16):2114-2119

Performance

Method Description

Papanicolaou-stained slides are microscopically examined by a cytotechnologist. Abnormal findings are reviewed and reported by a pathologist (charged separately).(Unpublished Mayo method)

PDF Report

No

Day(s) Performed

Monday through Friday

Report Available

2 to 5 days

Specimen Retention Time

5 years

Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Main Campus

Fees & Codes

Fees

- Authorized users can sign in to Test Prices for detailed fee information.
- Clients without access to Test Prices can contact Customer Service 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact Customer Service.

Test Classification

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per

manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

P3000
88164
88141-CVSPC (if appropriate)

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
CPAPD	Conventional Smear-Diagnostic	47528-5

Result ID	Test Result Name	Result LOINC® Value
71306	Interpretation	59465-5
71307	Participated in the Interpretation	No LOINC Needed
71308	Report electronically signed by	19139-5
71309	Addendum	35265-8
71310	Gross Description	22634-0
CY037	Pap Test Source	19763-2
CY038	Clinical History	22636-5
CY039	Menstrual Status (LMP, PM, Pregnant)	8678-5
CY040	Hormone Therapy/Contraceptives	8659-5
71573	Disclaimer	62364-5
71819	Case Number	80398-1