

# Waterloo Wellington Regional Cancer Program

Ontario Health (Cancer Care Ontario)

## Final Discharge Recommendations

### Colposcopy services

Colposcopist's name:

Contact information:

Patient information:

Date:

This patient is discharged from colposcopy and should resume cervical screening in primary care. See below for information on their colposcopy results and next screening interval in primary care:

### Results:

- Patient was **not treated** (HSIL or AIS histology not detected) and had the following results:
- Entered colposcopy with normal (NILM) or low-grade (ASCUS, LSIL) cytology and no HPV test at discharge (not required)
  - Entered colposcopy with high-grade cytology (ASC-H, LSIL-H, AGC, HSIL, AEC)\* and HPV-negative at discharge
  - Entered colposcopy with high-grade cytology (ASC-H, LSIL-H, AGC, HSIL, AEC)\* and HPV-positive at discharge
- Patient was treated for **HSIL histology** and had the following results:
- HPV-negative at first post-treatment visit and at discharge
  - HPV-positive at first post-treatment visit and HPV-negative at discharge
  - HPV-negative at first post-treatment visit and HPV-positive at discharge
  - HPV-positive at first post-treatment visit and at discharge
- Patient was treated for **AIS histology** and HPV-negative at discharge

### Your next steps:

- Screen patient in **5 years** (average risk screening) and manage results according to routine cervical screening recommendations
- Screen patient in **3 years** (immunocompromised screening) and manage results according to routine cervical screening recommendations
- Screen patient in **2 years** (moderate risk screening)\*\*
  - If result is HPV-positive (regardless of HPV type), refer back to colposcopy

Version 1.0

January 2025

For more information, please scan QR code or go to: <https://www.grhosp.on.ca/cancerwaterloowellington/colposcopists>



- If result is HPV-negative:
  - Return to average risk screening in 5 years or immunocompromised screening in 3 years
  - Re-screen in **2 years** and if result is:
    - HPV-positive (regardless of HPV type), refer back to colposcopy
    - HPV-negative, return to average risk screening in 5 years or immunocompromised screening in 3 years
  - Re-screen in **2 years** and if result is:
    - HPV-positive (regardless of HPV type), refer back to colposcopy
    - HPV-negative, re-screen in **2 years** and if result is:
      - HPV-positive (regardless of HPV type), refer back to colposcopy
      - HPV-negative, return to average risk screening in 5 years or immunocompromised screening in 3 years

For more information on the Ontario Cervical Screening Program's post-discharge screening recommendations, visit [ontariohealth.ca/OCSP-recommendations](https://ontariohealth.ca/OCSP-recommendations).

[Physician Name], MD, Colposcopist

Additional notes:

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\* Patients referred to colposcopy with SCC, ACC, ACC-E or PDC cytology results might be referred to a gynecology oncology centre or another provider. Any further follow-up in primary care will be based on that provider's recommendations.

\*\* Patients ages 65 to 69 who are discharged from colposcopy should continue to screen until age 74.

ACC = adenocarcinoma; ACC-E = endocervical adenocarcinoma; AEC = atypical endocervical cells; AGC = atypical glandular cells; AIS = adenocarcinoma in situ; ASC-H = atypical squamous cells, cannot exclude high-grade squamous intraepithelial lesion; ASCUS = abnormal atypical squamous cells of undetermined significance; HPV = human papillomavirus; HSIL = high-grade squamous intraepithelial lesion; LSIL = low-grade squamous intraepithelial lesion; LSIL-H = low-grade squamous intraepithelial lesion, cannot exclude HSIL; NILM = negative for intraepithelial lesion; PDC = poorly differentiated carcinoma; SCC = squamous cell carcinoma

Available online: [ontariohealth.ca/OCSP-colposcopy](https://ontariohealth.ca/OCSP-colposcopy)

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