

***RCHT CERVICAL CYTOLOGY USER GUIDE***  
(Cervical Screening sample information for Plymouth GPs)

**V 4**

***2<sup>nd</sup> February 2018***

## Cervical Screening Samples

### Royal Cornwall Hospital

Since April 2013 all cervical Liquid Based Cytology (LBC) samples from the Plymouth catchment area have been processed at the Royal Cornwall Hospital (RCH)

**Hours of opening at RCH:** Monday to Friday 0830 – 1700hrs

**Contacts at RCH:**

Dr Juliane Stolte - Lead Consultant Cytopathology

Mr Peter Helliwell – Lead BioMedical Scientist (Diagnostic & Molecular Pathology)

Mrs Cathy Winn – Lead BioMedical Scientist (Cytology)

[cathy.winn@nhs.net](mailto:cathy.winn@nhs.net)

**Cytopathology Department**

**Second Floor Tower Block**

**Royal Cornwall Hospital**

**Truro**

**Cornwall**

**TR1 3LJ**

**Telephone 01872 254610**

### Cervical Liquid Based Cytology (LBC) screening

The Call-Recall for Devon and Cornwall is run by Primary Care Services England (PCSE) and their offices are based in Leeds. Web: [pcse.england.nhs.uk/](http://pcse.england.nhs.uk/)  
Phone: 0333 014 2884, Generic email: [PCSE.screening-leeds@nhs.net](mailto:PCSE.screening-leeds@nhs.net).  
PO Box: PCSE PO Box 350, Darlington, DL1 9QN

The Cervical Screening Programme throughout the SW Peninsula uses Hologic ThinPrep™ LBC technology.

All LBC sample takers must be trained in ThinPrep LBC sampling. A register of trained nurse sample takers is held within PHE by the Area Team. Once trained a sample taker code is issued. Updates attended are then added to the register.

Every slide is primary screened by NHSCSP certified and state registered Biomedical Scientists or NHSCSP certified Cytoscreeners. Samples displaying abnormalities are subject to further checking by Senior Biomedical Scientists. Abnormal samples are referred and reported by Consultant Cytopathologists or Consultant Biomedical Scientist.

The NHS Cervical Screening Programme in England is facing many challenges with the move to roll-out HPV primary screening by the end of 2019 and this has created an accelerated loss of staff from the service nationally and difficulties in recruiting qualified replacement staff. Consequently, we have staffing shortages in the Cytology Department in Truro, so with approval from Public Health Commissioning NHS England South and the Screening Quality Assurance Service; we are outsourcing some of our primary screening to other Cytology Departments in the Southwest: Royal Devon and Exeter NHS Foundation Trust, North Bristol NHS Trust Southmead Hospital and Southwest Pathology Services in Taunton.

Reports issued from Cytology will indicate where the primary screen was performed. Please continue to contact the Cytology Department at Truro with any enquiries.

Samples requiring Human Papilloma Virus (HPV) testing are analysed at RCH and the HPV result is combined with the cytology result in one report which also includes suggested patient management. The report is sent to the sender and (if the sender is not the GP) a copy is sent to the GP.

The laboratory operates a Direct Referral system to Colposcopy clinics at Plymouth Hospitals Trust (PHNT) Derriford, North Devon District Hospital (NDDH) Barnstaple and RCH depending on the GP location.

## Obtaining LBC taker kits and request forms

Materials required for taking LBC samples in Primary Care are ordered from The Cytology department at Royal Cornwall Hospital.

Most surgeries are signed up for predictive kit supply. The supply is based on your surgery's location code e.g. L83000. From the number of samples the surgery sends to the lab, the lab can predict when your supplies will need replacing and kits will automatically be sent to your surgery via the usual NHS couriers. An email notification to a pre-arranged address will be sent when kits are being issued.

If your surgery orders manually or if you have any queries -  
E-mail cytology enquiries at RCH: [rch-tr.cytologyenq@nhs.net](mailto:rch-tr.cytologyenq@nhs.net)  
and type 'ORDER' in the subject line

Materials provided include:

- A Vial containing PreservCyt™
- Cervex™ broom sampler (green handle)
- Specimen Bags
- Blue transport bags

**Please note: Vials and brushes come as a pack.**

**Therefore brushes and vials must be ordered together in the same quantities.**

- For each Cervex sampler and Vial that Hologic provide there is also a filter and slide at the laboratory. These are ordered from hologic as a 'kit'. Please do not misuse the clinic materials as this will also waste materials at the laboratory.

HMR request forms, pre-printed with patient ID, GP details and screening history are available from the Open Exeter System.

- For access to Open Exeter contact [PCSE.openexeter@nhs.net](mailto:PCSE.openexeter@nhs.net) (type 'OPEN EXETER' in the subject line)
- Please use HMR101 form 2009 - A5 (2009) format, as shown. (The 'editable' version does not give full cytology history.)

- Remember to add your 'Sample Taker Code' to the request form. This is a mandatory requirement since 1<sup>st</sup> Sept 2017 (This is different from your Open-Exeter username).

Sample Taker Codes are issued and the register is held by :-

Screening & Immunisation Team (SCRIMMS)

NHS England, South Region – South West

(Bristol, North Somerset, Somerset & South Gloucestershire & Devon, Cornwall & Isles of Scilly)

South West SCRIMMS have now contacted all smear takers in their database to advise them of their new code starting "C0". If your smear taker code does not start with "C0" please complete the form on their website, available here <http://extra.scwcsu.nhs.uk/ScreeningImmunisation/Cervical/main2.htm> and ensure your new code is included on all samples.

### Requesting Cervical Cytology Plymouth GPs - Cornwall ICE

- Select the correct patient  
Please ensure that the patients' demographics are up to date i.e. current address and married / maiden name. The address provided in ICE will be used as the address for patient correspondence regarding their results and colposcopy appointments where required.
- Open ICE requesting and navigate to Cellular Pathology
- Click on the link to Open Exeter and generate a paper request form for the patient (This form contains the patients screening history which is important for the lab)
- Select the relevant sample type.

Patient Name: <b>MS Zztest Zztester</b>		Hospital Number: <b>F446045</b>		Sex: <b>Female</b>	
Date of Birth: <b>08 November 1955</b>		NHS Number: <b>321 654 9879</b>			
Address: <b>Plymouth Hospitals N H S Trust: Cen, 4 Bush Park, Plymouth, PL6 7...</b>				Telephone No: <b>01752 437112</b>	

Routine Tests	GUM	Combined Lab	Microbiology	Cellular Pathology	Blood Bank	Radiology	2WW Referral	QOF Order Sets	Misc Order Sets	Gold Top	Lavender Top	Grey Top	Blu To
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**Please Print Pre Populated Open Exeter Form for Each Request - Use Hyperlink Provided**

Cell Path		
Information		
Histology	<b>Histology</b>	<b>Gynae Cytology</b>
Gynae Cytology	<input type="checkbox"/> <b>Histology request</b>	<input type="checkbox"/> <b>LBC Cervical Sample</b> → ↕
Non Gynae Cyto		<input type="checkbox"/> <b>LBC Vault Sample</b> → ↕

**Cervical Cytology samples:** Complete all the fields below:

**Nurses in training - please put "NIT" in the sample taker code box**

Rules -- Webpage Dialog

Trel\_LBC

**TREL\_Advisory**  
 Samples will be rejected for patients that:  
 Have not been invited for screening.  
 Are under 24.5yrs.  
 Samples taken more than 6 mths before invite.  
 Over 65yrs and ceased from recall (Patients not screened since 50 patients will be accepted)

**TREL\_ClinDetails**  
 Please provide clinical details:

**LMP Known**  
 Please Enter the Date of the LMP (1st day)

**Trel\_FirstCerv**  
 Is this the patient's first cervical test  
 Yes  No

**Condition of Patient**  
 Please Enter the Condition of the Patient

**Sample Taker**

OK

**Vault Cytology samples:** Please complete all the fields below:

Rules -- Webpage Dialog

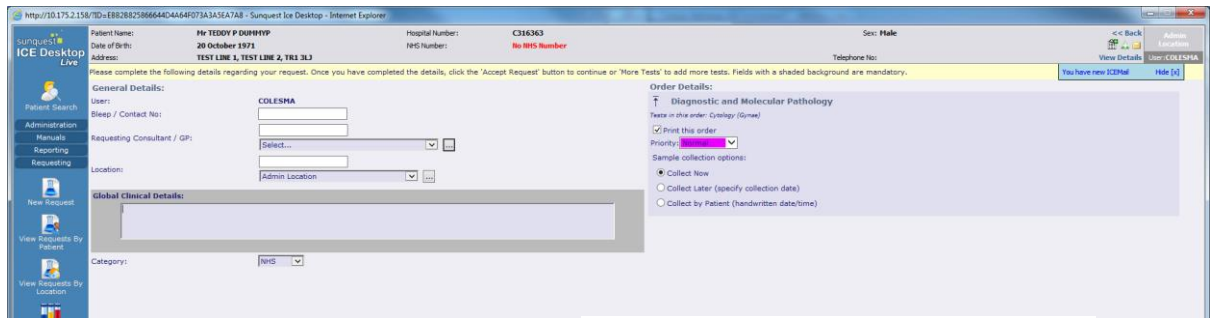
Trel\_Vault

**TREL\_Advisory**  
 Samples will be rejected for patients that:  
 Have not been invited for screening.  
 Are under 24.5yrs.  
 Samples taken more than 6 mths before invite.  
 Over 65yrs and ceased from recall (Patients not screened since 50 patients will be accepted)

**TREL\_ClinDetails**  
 Please provide clinical details:

**Sample Taker**  
 Enter the Sample Takers ID Code or Full Name

- Once the relevant section (Cervical Cytology / Vault cytology) is complete, please complete the following fields:
  - The requesting consultant / GP with the **clinician that the patient is registered with**
  - Please add relevant clinical details - No more than 60 characters (Do not write the clinical details on the OE form)



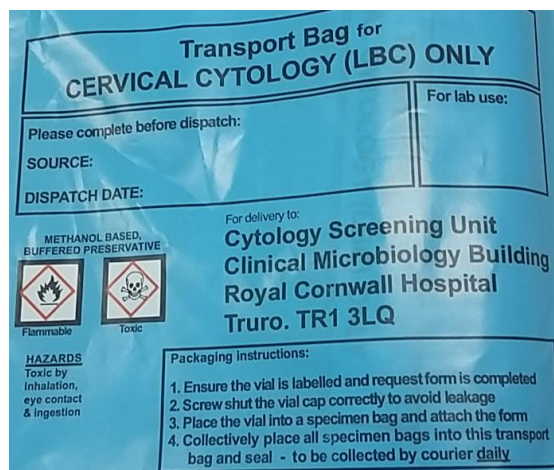
- Sample labelling:** Place the barcode vertically along the sample vial, without obscuring the window gap between the edges of the vial label. Make sure that the label doesn't fold under the base of the vial



Please do not block window with barcode label

- Place the sample and request form into a specimen bag (pre-labelled RCHT cervical cytology ICE)

## RCHT CERVICAL CYTOLOGY ICE



GPs and clinics in Devon or any using Plymouth community couriers will require blue transport bags.

Up to 6 LBC samples, each within its own sample bag and request form, may be packaged in a blue bag – but do NOT batch samples. Send samples with the next courier collection.

Hospital users may obtain materials from the Cytology Department at RCH

## Prior to sampling

- Is the test scheduled? Has the woman received an invitation from PCSE? Check the patient's age and screening history to ascertain whether a test is due. Only scheduled tests will be accepted.

\*\*\*Patients with suspicious symptoms or cervical appearance should be referred for Colposcopy. A screening test is not appropriate.\*\*\*

- Screening should not start until a woman is 24.5 years of age (age of first invitation). Screening under the age of 24.5 years may do more harm than good.
  - From 25 to 49 years of age routine screening should be 3 yearly.
  - From 50 to 64 years of age routine screening should be 5 yearly.
  - From 65 onwards, only those who have not been screened since age 50 or those who have had recent abnormal tests should be screened.
  - Following an Inadequate test, the cervix should be left for 3 months before re-testing.
  - Women on immunosuppressants should have a complete screening history, so they should engage with cervical screening when invited but there is no need to invite more frequently.
  - Some conditions indicate more frequent cervical screening e.g. HIV positive women, Their screening must not start until after 24.5 years of age, but should be annual. The information will not be available to Open Exeter therefore they may require an invitation to be screened from the GP. If taken, please mark the request form 'Enhanced surveillance'.
- Open Exeter can be used to check the woman's history and print out a request form. If the woman has been discharged from colposcopy, the next date scheduled by colposcopy for follow-up LBC may be seen on the woman's 'Cytology Reports' page.
  - If a woman due for a LBC test, but hasn't received invitation letter, she will not have received the NHSCSP information leaflet. Receipt of this is important for informed consent. It may be useful to keep a supply at the Surgery. (available from [www.gov.uk](http://www.gov.uk) – Cervical screening: information leaflets, leaflet for women considering screening)
  - Check the patient's address on the request form is current. This address will be used for her result letter and colposcopy appointment if referred.
  - Please note that Vials have an expiry date (YY-MM-DD). Do not use expired vials as these requests will be rejected.

- Label the vial whilst the patient is present and remove the Vial lid before taking the sample
- Labels with patient details may be used but keep the unlabeled portion of the Vial free of label so that the contents may be seen. If bar-coded labels are used these must be applied horizontally.

## Taking the sample

- DO NOT use lubricant when inserting the speculum. Lubricant will block the filter during processing, resulting in the sample being inadequate for analysis.
- The cervix must be visualized. If you do not visualised the cervix fully then record this on the form. It is the responsibility of the smear taker to confirm they have sampled the correct area.
- Remove the mucous plug if present using a sterile swab
- The Cervex sampler is rotated 5 times clockwise. The direction is important as the bristles of the sampler are bevelled.
- Vigorously rinse the Cervex sampler into the PreservCyt fluid in the Vial by pushing it into the bottom of the Vial 10 times, forcing the bristles apart
- As a final step, swirl the Cervex vigorously to further release material. Inspect the bristles to ensure no material remains attached.
- Discard the Cervex sampler. DO NOT leave the head of the sampler in the vial.
- Evidence of Transformation Zone sampling is necessary for the follow-up of cervical glandular abnormalities. If endocervical cells are not seen the sample will be reported as inadequate.
- Sampling of the Transformation Zone may be difficult in women following treatment. In this circumstance it may be necessary to use an endocervical brush in addition to the Cervex broom provided. Both samples are transferred to the one Vial. i.e one cervix = one vial  
Or if an appropriate sample cannot be obtained the woman may be referred for colposcopic assessment.  
(Please note – Endocervical brushes are not supplied by the Cytopathology department)
- **Patient with two cervixes:** These require a vial for each cervix (x2 vials). Label 1 and 2 or left and right. One request form.
- Tighten the cap so the black torque line on the cap meets the black torque line on the Vial.



- All details requested on the HMR request form must be completed. The two identifiers on the Vial (e.g. Full name and DoB or NHS number) must match details on the request form
- Also ensure that the specimen transport bag is securely sealed before sending to the laboratory. Place within blue transport bag for collection by the next courier visit.

## Rejected Samples


If a request is rejected, for example because it is unscheduled or there is insufficient patient ID or vial and form do not match, the laboratory will issue a letter to the surgery giving the reason for the rejection.

Example of the rejection letter format.

Rejection letters are included in the envelope with the cytology reports.

**\*\*\* Action Required\*\*\***

This information is not transferred to Open Exeter and the woman will not be automatically informed that her smear request has been rejected

One + all   we care		Royal Cornwall Hospitals  NHS Trust	
Department of Diagnostic and Molecular Pathology Floor 2 Tower Block Royal Cornwall Hospital Truro TR1 3LJ Tel: 01872 252550 (Direct line)			
		<b>** Action Required **</b>	
<b>Request Location</b>			
<b>Event Date</b>			
<b>Cervical Cytology Rejection</b>			
Dear Doctor / Nurse			
Unfortunately we cannot accept the enclosed cervical screening test request as it failed to meet the requirements stated by the NHS Cervical Screening Programme for the reasons indicated below. As the sample has not been processed there will be no result letter issued. It is the sample taker's responsibility to inform the woman of this situation and, if required, to arrange a repeat test in NOT LESS than 12 weeks after the last sample was taken. Please do not repeat immediately as the cervical epithelium needs time to regenerate and the test result may be unreliable.			
<b>Please note - If this sample rejection letter contains details of two different patients - do not upload letter into patient records unless appropriately anonymised, ensuring information governance guidance is adhered to.</b>			
<b>Reason for rejecting sample:</b>			
<b>Patient Details</b>			
Patient Name			
NHS Number			
<b>Patient Details</b>			
Patient Name			
NHS Number			
Yours Sincerely Cathy Winn - Cytology Laboratory Manager			
If there are any queries please contact : Cytopathology laboratory on 01872 252574			
For Laboratory Use Only			
Sample Taker Code			

Please note if you receive a reject letter which contains the details of two different patients – do not upload the letter into patient records unless appropriately anonymised to ensure information governance guidance is adhered to.

Reasons for rejections and consequences for requestors are shown in the table below

Acceptance criteria failure	Consequence for requestors
Unscheduled sample (including under 24.5 years)	Reject letter issued. Patient can decide on private testing within 21 days
Expired vial	Reject letter issued. Test to be repeated after 3 months
Sample received in wrong container (e.g. Formalin pot)	Reject letter issued. Test to be repeated after 3 months
Insufficient data on <b>Vial</b> Non ICE sample must have full name (forename and surname) and at least one of the following: NHS number DOB Hospital number (except anonymous patients from GUM these should have GU number and DOB) <b>Identifiers should match the request form</b>	Reject letter issued.  Test to be repeated after 3 months
Insufficient patient ID data on the <b>request form</b> . <b>Form must have:</b> Full name DOB NHS number Current address incl. Post Code Registered GP and Practice address Sender details if not from GP (except anonymous patients from GUM these should have GU number and DOB)	None if missing information can be provided  If information not provided a reject letter issued.  Test to be repeated after 3 months
Major labelling discrepancy Name, DOB or NHS number mismatch	None surname if confirmed eg changed due to marriage  For DOB or NHS number mismatches a reject letter issued.  Test to be repeated after 3 months
Vial received without request form	To provide HMR101 form for the request
Minor labelling discrepancy Minor misspellings, abbreviations and transpositions of single digits in DOB or NHS number constitute a minor labelling discrepancy. Multiple minor discrepancies treat as major discrepancy	If multiple minor labelling discrepancies a reject letter issued.  Test to be repeated after 3 months
Smear Taker Code absent or invalid	Reported as inadequate if code cannot be sourced  Test to be repeated after 3 months
Sample received with brush head in the Vial	Action as advised on cytology report

Samples that have been rejected because the test was unscheduled will be retained by the laboratory for 21 days from receipt to allow the sender to make other arrangements if required (Private testing is available on request to the laboratory)

## Receiving the Result

The laboratory will send a paper report (yellow A4) to the requestor and / or GP surgery. The woman will receive a National result letter issued by PCSE. If the test was taken at Colposcopy, Colposcopy will inform the woman of the result.

The report and the PCSE letter will indicate the Cytology result, whether a HPV test was carried out and its result and the advised management.

If the report indicates 'Direct Referral has been arranged', the patient will receive an appointment letter from colposcopy.

If you think there has been an error in advised patient management or for details of reporting protocols please contact the RCH laboratory.

Surgeries and clinics should have systems to check that they have received a result for all tests taken.

### **Urgent cytology results '2 WEEK WAITS'**

Rarely cytology may indicate invasion or glandular neoplasia. If this happens, the woman will be referred by Direct Referral to Colposcopy under a '2 week wait' i.e. she should be seen within 2 weeks. The result letter from PCSE will state "You may wish to discuss your results with your GP". If results are not sent electronically to your surgery the laboratory will contact the GP as soon as such a report is authorised, to ensure the information is at the surgery.

### **Further information**

Further information may be obtained from the NHS England Regional SW Cervical Screening Policy, the Cervical Training Policy and the Learning Disabilities pack found in :-

<http://devoncornwallpn.co.uk/cervical-cytology/> (Cervical Cytology Resource Page)