

Special Instructions

Gynecologic (PAP) Smears (Conventional)

Specimen collections kits are commercially available and will be supplied by NorDx. Please call NorDx Client Support at 885-7830 for more information

To insure an adequate sample of the transformation zone of the cervix is obtained to provide an accurate screening test for the detection of cervical cancer, its precursors and other abnormalities of the female reproductive tract, the following collection procedure should be followed:

1. SPECIMEN COLLECTION

POSITION OF THE PATIENT:

- Place the patient in the dorsolithotomy position.

PREPARATION OF THE CERVIX:

- A sterile or single use disposable bivalve speculum of appropriate size should be gently inserted into the vagina (avoiding direct pressure on the anterior structures i.e. urethra). Warm sterile water or saline may be utilized to lubricate the speculum. Never use lubricant jellies which may obscure cellular material. Position the speculum so the entire face of the cervix is visible.
- Excessive blood, mucous, or inflammatory exudate may be removed with ring forceps utilizing a folded gauze pad to absorb the excess material. Never wipe the cervix.

SAMPLE COLLECTION:

- A collection kit containing a slide, wooden (plastic) spatula, endocervical brush, and a commercial fixative are available for use in specimen collection. Individual components of these kits are available from NorDx upon request.
- Before collecting the specimen, label the frosted end of the slide with the patient's name. Unlabeled specimens will not be accepted for processing.
- Visualization of the cervix for abnormalities and identification of the transformation zone, if visible, is important in obtaining an adequate specimen.
- - If an elevated, ulcerated, or exudate covered lesion is observed, a biopsy should be considered after cytologic sampling is accomplished.
- Insert the longer end of the contoured spatula into the cervical OS. Rotate the spatula 360 degrees while maintaining firm contact with the epithelial surface. NOTE: Clockwise rotation from 9 o'clock to 9 o'clock, or counter-clockwise rotation from 3 o'clock to 3 o'clock, will position the spatula so collected material is retained on the upper surface as the spatula is removed.
- Hand the spatula to an assistant or rest the spatula on the glass slide assuring the specimen is face-up, while collecting the endocervical brush sample.
- Gently insert the brush into the cervical OS ensuring some bristles remain visible. Rotate the brush clockwise 90 degrees (one quarter turn).
- Upon removing the brush, immediately roll the brush across the slide. Quickly take the spatula sample and evenly spread it on top of the brush sample while avoiding excess manipulation of the sample and large clumps of material.
- Immediately fix the specimen by either immersing in 95% ethanol, evenly dripping alcohol from a preparation available in the kit, or if using a commercially available spray fixative, hold

container 8-10 inches from the slide while evenly fixing the specimen. Allow the slide to dry before packaging for transport.

2. PREPARATION OF THE REQUISITION

REQUIRED INFORMATION:

- Complete patient name (Do not use nicknames), date of birth and/or age.
- Date of collection, source of material, and the number of slides submitted.
- Submitting physician's name and phone number.
- ICD-9 code.

3. CLINICAL INFORMATION

- Last menstrual period (LMP) or menstrual status, and hormonal status and/or exogenous hormone therapy.
- History to include dates of previous abnormal gynecological findings, and dates of gynecologic surgical procedures.
- Any current abnormal physical findings or patient complaints.
- High risk factors for cervical cancer.
- History of therapeutic procedures such as systemic chemotherapy, pelvic radiation therapy, etc.
- Routine vs. diagnostic Pap test.

4. SPECIMEN SUBMISSION FOR DIAGNOSIS

- Submit properly labeled and packaged slide and completed requisition to NorDx for processing.