SELF-COLLECT
HPV Specimen Collection
FOR THE CERVICAL SCREENING PROGRAM

PLEASE NOTE:
• The self-testing option is only available to women who have never been screened or are significantly under-screened (>30 years old and >2 years since last smear). It is not to be used in addition to the normal cervical screening process.
• Self-collects tend to only be about 70% as effective as sample taken by a doctor.
• The laboratories cannot do any reflex liquid-based cytology (LBC) on the sample if it is required.
• If the HPV test is positive for HPV 16/18 the patient will be referred to a specialist.
• If the HPV test is positive for other high risk HPV, the patient will need to return to her GP to have a Pap smear for LBC.
• Self-collects are only to be taken “under general practitioner or nurse practitioner supervision” in a health care facility, NOT AT HOME.
• Self-collection is contra-indicated in pregnancy.

MATERIALS REQUIRED
For self-collect the following materials are required:
1. Dorevitch Pathology request form
2. Dry flocked swab
3. These instructions below

SELF COLLECTION
1. Use a dry flocked swab - do not use any lubricant.
2. Insert the dry flocked swab deep into vagina, not just the entrance.
3. Move around in a circular motion for about 10 rotations and then move around other areas deep in the vagina.
4. Immediately place the dry flocked swab back into the container and secure the cap.

THE DOCTOR MUST THEN
5. Record the patient’s full name and date of birth on the swab.
6. Complete the patient’s details on the request form providing as much information as possible.
Pertinent clinical details are essential for reliable cervical screening.
Please clearly indicate SELF-COLLECTION, HPV TEST and PRIMARY CERVICAL SCREENING on the request form.
Other important information should be noted on the request form under clinical notes.
Doctor please consider:
• Patients who are symptomatic (e.g. history of abnormal vaginal bleeding) require both an HPV and a concurrent liquidbased cytology (LBC). A self-collect sample is therefore not recommended in these circumstances.
• Patients who have previously been diagnosed with endocervical adenocarcinoma in-situ (AIS), also require a concurrent LBC annually.
• Patients who are immune deficient are advised to repeat testing in 3 years not 5 years.
7. Package the sample and request form for transportation
Place both the swab and request form into a specimen bag for transportation to the laboratory in the usual manner.

Further information:
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MEDICARE REBATE
Cervical screening requests that follow the national prescribed laboratory process will be bulk billed subject to Medicare guidelines and criteria.
For self-collection Medicare will only bulk bill for 1 test in a 7 year period for self testing. If more than 1 test is conducted an out-of-pocket fee will apply. The patient should be informed of this.
If Medicare guidelines and criteria are not met, an out-of-pocket fee may apply. If the patient wants additional cervical cytology smears that do not fit the MBS criteria, these tests will not be rebated by Medicare.