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| PAP & HPV Test Clinic Triage and Ordering Procedure | **Attachments**  Yes  No | |
| **Key words**  Pap smear, Surepath, HPV | **Number**  GHI-PC-CLINIC LAB-Procedures-  Pap test v. 02-2016 | |
| **Category** Provision of Care | **Effective Date**  **February 2016** | |
| **Manual** Clinic Laboratory Procedure Manual | **Last Review Date**  **February 2016** | |
| **Issued By** Regions Cytopathology Laboratory | **Next Review Date**  **January 2017** | |
| **Applicable** Clinic Laboratory Staff | **Origination Date**  **February 2016** | |
|  | **Retired Date** | |
| **Level of Complexity**  Waived | **Contact** Regions Cytopathology | |
| **Review Responsibility** Laboratory Technical Consultants | **Approved Date**  **January 2007** | |
| **APPROVAL(S)** Laboratory Medical Director | | |  |

**Pap Test Collection**

Clinic Workflow (Page 2)

Clinic Lab Procedure (Page 1-4)

[PAP & HPV Specimen Receiving Tip Sheet](https://secure5.compliance360.com/DMZ/ExternaLink/Go.aspx?PD=O8WBP3JVW9ZsJXkIeMih7GKaVIi1wMCYZoxx9GoDwt%2b1q9EYDt8gQjqUZEx4wD0hAhcjbSqPi%2bGiQvzhPeqO5bj6xSxXb%2fpKgr4mBRl1zq5nwNAgEea%2bsA%3d%3d) (attachment)

**I. Purpose/PRINCIPLE**

This procedure provides direction for the clinic triage, collection, and ordering on PAP & HPV tests for cytological specimens.

Cytological examination of cervical smears is performed to detect the presence of pre-malignant or malignant cells. HPV testing is performed to detect the presence or absence of high risk viral types.

**II. POLICY**

Laboratory Staff will follow the approved techniques outlined in this procedure.



**Reagents/Materials/Storage:**

Surepath Pap Vials and Brooms

Endocervical Brushes

Regions Hospital Pap Test Requisition form

Biohazard Transport Bag

**Specimen:**

Cervical, vaginal or anal cytology sample collected in a SurePath collection vial

**Note:** HPV Testing cannot be performed on Anal Cytology samples. **HPV testing cannot be performed on samples that are over 14 days old from the date of collection to the date of testing.** Please contact Regions Hospital

Cytology Department (652-254-9572).

1. **PROCEDURES**

1. **Care Team (RN or Rooming staff) Workflow:**
2. Rooming staff or provider will place an order in Epic for any of the following:

PAP TEST, ROUTINE (Epic 3682)

PAP TEST, DIAGNOSTIC (Epic 3683)

PAP TEST, ANAL (Epic 3619)

HPV, HIGH RISK (Epic 4233)

1. The provider will sign the order.
2. Rooming staff will place the specimen into a bag and send to lab.
3. **Clinic Lab staff Workflow:**
4. When the PAP and/or HPV order is signed, it will route to the Lab Orders Inbasket.
5. Sort the inbasket by patient name
6. “Done” the PAP and/or HPV order from the Inbasket - Sunquest labels will print
7. Inspect the specimen vials(s) for proper labeling and collection,.
   1. Verify the patient first name, last name and date of birth(DOB)/medical record number(MRN) match the order in the inbasket
   2. Verify correct date of collection (DOC)
   3. Verify there is a collection device in the vial
8. Resolve any collection and/or labeling issues prior to receiving in Sunquest – see guidelines below
9. Receive the tests in Sunquest using “ORM”

PAP TEST, ROUTINE (Epic 3682) 🡪 Misys test code: **PARL**

PAP TEST, DIAGNOSTIC (Epic 3683) 🡪 Misys test code: **PADL**

PAP TEST, ANAL (Epic 3619) 🡪 Misys test code: **PAPAN**

HPV, HIGH RISK (Epic 4233) 🡪 Misys test code: **HPVH**

1. Place the Sunquest CID and MRN foot labels on the Pap vial directly under the Epic label so that you can visually see the patient identifiers on all labels for verification of patient identification
2. Discard any remaining labels in shred bin
3. Track and bag all Pap specimens together on their own batch list to Regions.
4. Send the specimens to Regions via Reroute.
5. **Resolving collection and labeling issues:**

a. Unlabeled pap container: If there is no Epic label on the vial, the vial must be discarded. Regions Hospital Cytology will not accept an unlabeled sample and they cannot be reconciled using a Good Catch form. Review the inbasket at the end of the shift for an order that did not have a labeled specimen delivered to the lab. Cancel the order using cancel code TCAN-UNLAB-RECOL (Test Cancelled-Specimen Received Unlabeled-Please Recollect) and discard specimen. Create and send a telephone encounter to the provider’s care team using the dotphrase LABNOLABEL (This lab test has been cancelled due to the specimen being received unlabeled. If this test is still needed, please reorder and notify the patient to return for a new collection.

b. Correct patient first name, DOB and/or MRN;different last name: refer to care unit to resolve name discrepancy/change, re-label with the correct patient label and complete a Good Catch form. After the correction has been made and the specimen re-labeled, prepare for send out per protocol.

c. Incorrect DOC; refer to care team to resolve discrepancy, re-label with the correct patient label and complete a good catch form. After the correction has been made and the specimen re-labeled, prepare for send out per protocol.

d. If there is no order placed in Epic: create and send a telephone encounter message to the provider’s care team pool and request orders using the dot phrase LOVNO. Prepare for send out, per protocol, after order has been placed.

e. If there is no collection device in the vial: create and send a telephone encounter message to the provider’s care team pool requesting confirmation that a pap was collected. If collection is confirmed, prepare for send out per protocol. If no specimen collected, cancel and credit the order using cancel code NRS (no specimen received).

1. **Additional Notes:**
2. In the event of an Epic downtime, the care unit will send the specimen to the lab with a manual requisition form to be sent to Regions.
3. If you see a lot of PAP or HPV orders in your Epic Lab Orders In-basket, help collect these specimens from the care units. The RN’s and CDS’s are stressing the delivery of these specimens to the lab in a more timely fashion.
4. HPV Testing cannot be performed on Anal Cytology samples. Please direct these test inquires to the Regions Hospital Cytology Department (652-254-9572).
5. If an add on HPV test is requested, please follow Add-On Tests Between GHP (Central Lab) and Regions Hospital Procedure.

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**AUTHOR(s)/Reviewer(s)**

AKHoward

ANicholas

SSemerad

JAGayken

LCSavaloja

HADavis

MLLaFromboise

**ReferenceS**

Regions Cytology Department

**RELATED DOCUMENTS**

**APPENDIXES**

**IV.** **Definitions**

HPV; Human papilloma virus

**V. Compliance**

# Failure to comply with this policy or the procedures may result in disciplinary action, up to and including termination.

**VI. Attachments**

[PAP & HPV Specimen Receiving Tip Sheet](https://secure5.compliance360.com/DMZ/ExternaLink/Go.aspx?PD=O8WBP3JVW9ZsJXkIeMih7GKaVIi1wMCYZoxx9GoDwt%2b1q9EYDt8gQjqUZEx4wD0hAhcjbSqPi%2bGiQvzhPeqO5bj6xSxXb%2fpKgr4mBRl1zq5nwNAgEea%2bsA%3d%3d)

**VII. Other Resources**

1. **ENDORSEMENT**

Laboratory Administration