# **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:

* Screen patient in **5 years** (average risk screening) or
* Screen patient in **3 years** (immunocompromised screening)

|  |  |  |  |
| --- | --- | --- | --- |
| Cytology at referral | Treatment status | HPV result at first post-treatment visit and HPV result at discharge | How to manage screening results |
|
| * Normal (NILM) or low-grade (ASCUS, LSIL)
* High-grade (ASC-H, LSIL-H, AGC, HSIL, AEC)[[1]](#endnote-2)\*
 | * No treatment needed
 | * N/A and HPV-negative
 | Manage results according to routine cervical screening recommendations |
| * Treated for HSIL histology
 | * HPV-negative and HPV-negative
 |

* Screen patient in **2 years** (moderate risk screening)

|  |  |  |  |
| --- | --- | --- | --- |
| Cytology at referral | Treatment status | HPV result at first post-treatment visit and HPV result at discharge | How to manage screening results[[2]](#endnote-3)\*\* |
|
| * Normal (NILM) or low-grade (ASCUS, LSIL)
* High-grade (ASC-H, LSIL-H, AGC, HSIL, AEC)\*
 | * No treatment needed
 | * N/A and no HPV test (not needed)
* N/A and HPV-positive
 | * If result is HPV-positive (regardless of HPV type), refer back to colposcopy
* If result is HPV-negative, return to average risk screening in 5 years or immunocompromised screening in 3 years
 |
| * Treated for HSIL histology
 | * HPV-positive and HPV-negative
 | * If result is HPV-positive (regardless of HPV type), refer back to colposcopy
* If result is HPV-negative, return to average risk screening in 5 years or immunocompromised screening in 3 years
 |
| * HPV-negative and HPV-positive
* HPV-positive and HPV-positive
 | * If result is HPV-positive (regardless of HPV type), refer back to colposcopy
* If result is 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
 |
| * Treated for AIS histology
 | * HPV-negative and HPV-negative
* HPV-positive and HPV-negative
 | * If result is HPV-positive (regardless of HPV type), refer back to colposcopy
* If result is HPV-negative, 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:

1. \* 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. [↑](#endnote-ref-2)
2. \*\* Patients ages 65 to 69 who are discharged from colposcopy should continue to screen until age 74. [↑](#endnote-ref-3)