



**Friday, 1 December 2017 marked the commencement of the renewed National Cervical Screening Program (NCSP) supported by the National Cancer Screening Register (NCSR).**

**IMPORTANT INFORMATION - Screening women under 25 years of age**

Routine cervical screening is not recommended in the renewed program for women under 25 years. Some women under 25 will present with an expectation for routine screening, having had previous Pap tests. It is important that these women are aware that Medicare does not fund routine HPV cervical screening tests in women under 25.

Pathology laboratories are reporting that a significant number of samples are being submitted from women under 25 years of age. Given Medicare does not fund routine HPV cervical screening tests in women under 25 where these tests are sent to pathology laboratories these will either need to be privately funded by the patient or, with the consent of the referring practitioner, not be processed by the laboratory.

Commencing screening at age 25 will reduce the investigation and treatment of common cervical abnormalities that would usually resolve by themselves. The time from HPV infection to cervical cancer is usually 10 to 15 years.

Women under 25 years who are currently under clinical management for a cervical abnormality, should be managed according to the recommendations on transitioning women in the [2016 Guidelines](#).

To further assist healthcare providers, NPS MedicineWise through its RADAR [publication](#), has posted a comprehensive article outlining what providers need to be aware of when requesting the new Cervical Screening Test.

**Symptomatic women at any age**

Women at any age who have signs or symptoms suggestive of cervical cancer (such as abnormal vaginal bleeding) should have a HPV and Liquid Based Cytology co-test and be referred for the appropriate investigation to exclude genital tract malignancy. More information on the management of abnormal vaginal bleeding is available in the [2016 Guidelines](#).

**Routine cervical screening is not recommended in women under the age of 25**

For women who experienced early sexual activity at a young age (under 14 years) and who had not received the HPV vaccine before sexual debut, a single HPV test between 20 and 24 years of age could be considered on an individual basis. More information is available in Chapter 15 of the [2016 Guidelines](#).

### **Reminder regarding self-collection**

Self-collection of vaginal samples for human papillomavirus (HPV) is available under the renewed National Cervical Screening Program. The Australian Government Department of Health is aware that only one pathology laboratory is accredited for self-collection. Prior to offering self-collection as an option to their patients, healthcare providers are encouraged to check with their pathology laboratory on availability.

### **Contacting the Register**

The NCSR is live and supports the renewed National Cervical Screening Program. The register functions are currently being performed jointly between the National Cancer Screening Register (NCSR) and the state and territory registers. The state and territory cervical screening registers will transition to the NCSR in the first half of 2018. Following the transition, the NCSR will have a complete, national record for each person in Australia participating in cervical screening.

The state and territory registers continue to provide pre December 2017 screening histories and will do so until they transition to the NCSR, and complete all other follow up that is required for Pap-test results received by the state and territory registers prior to 30 November 2017. For screening histories prior to 1 December please continue to contact your relevant state or territory register. Contact numbers are available on the [Transition Quick Start Guide for Healthcare Providers](#). The NCSR can be contacted on 1800 627 701 for post 1 December 2017 screening results. Once transition is complete, the NCSR can be contacted for all screening histories.

### **Resources for healthcare providers and participants**

Healthcare providers can order and/or download [publications and resources](#) free of charge from the NCSR website.

[Consumer resources](#) are available and have been translated into 24 languages including Mandarin, Vietnamese, Cantonese, Arabic, Korean, Greek, Thai, Khmer, Italian, Spanish, Turkish, Persian, Macedonian, Dari, Japanese, Serbian, Assyrian, Nepali, Croatian, Samoan, Gujarati, Sinhalese, Urdu and Bengali.

Resources have also been developed specifically for Aboriginal and Torres Strait Islander people in English and translated into [six indigenous languages](#): Alyawarra, Arrernte, Luritja, Pitjantjatjara, Torres Strait Creole and Warlpiri.

### **Information for pathology providers**

The reporting portal is available for pathology laboratories to access results post 1 December 2017. Since Pap tests are no longer eligible for a Medicare rebate, pathology providers should note that the new Cervical Screening Test must be claimed using [new pathology MBS items](#).

### **Colposcopy Forms**

The colposcopy reporting form has been distributed as a pad of 50 forms through RANZCOG and ASCCP to their members who perform colposcopies. Additional forms can be ordered [online](#).

### **Where do I go for more information?**

Further information on the NCSP [changes](#) and accredited online [training](#) modules are also available online. For further information on the [NCSR](#) contact 1800 627 701.