TEST UPDATE
Primary HPV with Pap if Indicated
UVMMC

Effective 4/28/25, the UVMMC laboratory will introduce a new cervical cancer screening test; Primary HPV with Pap if Indicated. Screening for cervical cancer has evolved over the years from cytology to cytology/HPV co-testing. Primary HPV testing has shown to be more sensitive than cytology alone but comparable to cytology/HPV co-testing. The American Cancer Society, the American College of Obstetricians/Gynecologist (ACOG) and the American Society of Colposcopy and Cervical Pathology (ASCCP) all recommend primary HPV testing as the initial screen for cervical cancer for average risk people with cervixes age 25 to 65 and cytology/HPV co-testing if primary HPV testing is not available.

Positive results for high-risk genotypes 16/18 will require colposcopy. Positive results for other high-risk genotypes will reflex to cytology. Cervical samples are the only acceptable collection type; self-collection specimens with a vaginal specimen type are not yet validated and therefore are not appropriate for collection at this time. Re-screening in 5 years is recommended for patients with negative primary HPV testing results.

NOTE: Health Insurance Coverage - Medicare benefits for cervical cancer screening must include cytology, therefore Co-testing, with Pap reflexing to HPV is recommended for those patients. Additionally, some insurance carriers may not cover more frequent testing (within 5 years) without additional diagnosis codes.

Please see below for the testing algorithm.

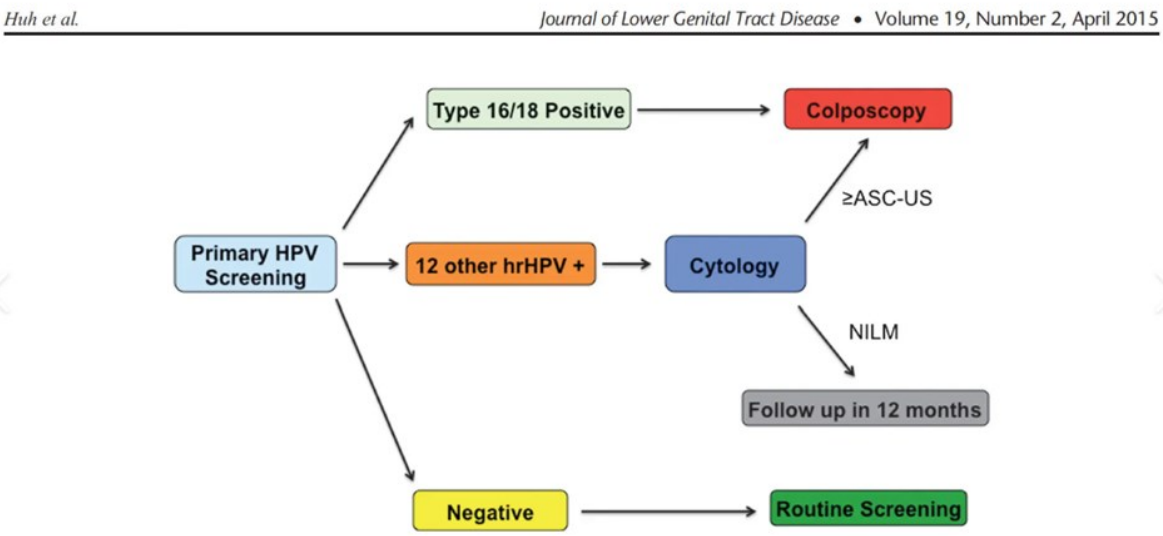

FIGURE 1. Recommended primary HPV screening algorithm. HPV, human papillomavirus; hrHPV, high-risk human papillomavirus; ASC-US, atypical squamous cells of undetermined significance; NILM, negative for intraepithelial lesion or malignancy.

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Test Build Information:

New Orderable	Epic Code	Atlas Code	Mayo Test ID	Order LOINC	CPT Code(s)
Primary HPV with Pap if Indicated	LAB17721	LAB17721	FAH6207	6510-2	87626
Result Component(s)	**Epic Code**	**Atlas Code**	**Mayo Test ID**	**Result LOINC**	**Notes**
Clinical History, Signs, Symptoms, Chief Complaint, Pertaining to this Order:	3040010000	307	FAH6215	N/A	AOE*
Last Menstrual Period:	3040010123	59	FAH6216	N/A	AOE*
Pregnant?	3040010128	65	FAH6217	N/A	AOE**
Post-Partum?	3040010133	64	FAH6218	N/A	AOE**
Hormone/Contraceptive Use?	3040010138	58	FAH6219	N/A	AOE**
Prior Gynecologic Pathology?	3040010143	66	FAH6220	N/A	AOE**
Gyn Treatment History?	3040010148	57	FAH6221	N/A	AOE**
Other Clinical History:	3040010153	61	FAH6222	N/A	AOE*
Report	N/A	CPRPT	FAH010	N/A	
Specimen Requirements:					
Container	**Specimen**	**Temperature**	**Collect/Submit Vol**	**Min Vol**	**Stability**
ThinPrep Vial	Cervical	Ambient	4 mL	1 mL	30 days
Collection Instructions:					
Collect specimen in a ThinPrep PreservCyt (Pap) vial with broom-type or cyto brush/spatula collection devices according to the manufacturer's instructions.					

*Response type is Free Text.

**Response type is Yes/No.

If you have any questions concerning this update, please contact Dr. Hanna Loving (hanna.loving@uvmhealth.org).

References

Screening Guidelines - ASCCP

Updated Cervical Cancer Screening Guidelines | ACOG

Cervical cancer screening for individuals at average risk: 2020 guideline update from the American Cancer Society - Fontham - 2020 - CA: A Cancer Journal for Clinicians - Wiley Online Library