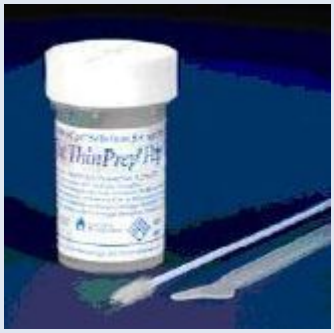
PAP Collection

SUPPLIES:

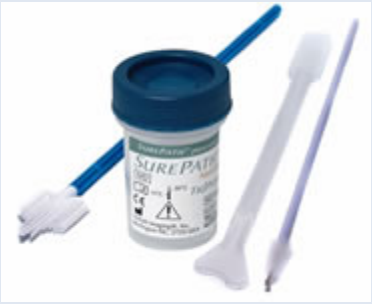
Specimen collection supplies, including requisitions and specimen transport bags, can be ordered through from Intermountain Client Services.

For convenience, supplies are pictured below, as well as a list of supplies needed for each of the four collection techniques.

ThinPrep® Pap Test PreservCyt® Solution vial with Broom-like collection device



ThinPrep® Pap Test PreservCyt® Solution vial with Cytobrush and Spatula collection devices



SurePath® Pap Test preservative fluid vial with Brush-like device (left) and brush and spatula (right) collection devices

Technique 1, ThinPrep® Pap Test using broom-like device

- One vial of PreservCyt®
- One Papette™ (a broom-like device)
- One cytopathology requisition
- One small specimen transport bag with outer document pocket

Technique 2, ThinPrep® Pap Test using spatula and endocervical brush

- One vial of PreservCyt®
- One plastic spatula (do not use wooden spatula)
- One Cytobrush® (an endocervical brush)
- One cytopathology requisition
- One small specimen transport bag with outer document pocket

Technique 3, BD SurePath™ Pap Test using spatula and endocervical brush

- One vial of BD SurePath® Preservative Fluid
- One plastic spatula (with detachable head, do not use wooden spatula)
- One endocervical brush (with detachable head)
- One cytopathology requisition
- One small specimen transport bag with outer document pocket

Technique 4, BD SurePath™ Pap Test using broom-like device

- One vial of BD SurePath® Preservative Fluid
- One broom-like device (with detachable head)
- One cytopathology requisition
- One small specimen transport bag with outer document pocket

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PATIENT PREPARATION:

It is recommended that patients not use vaginal lubricants, vaginal medications, vaginal contraceptives, or douches within 48 hours before specimen collection. The patient should not engage in sexual activity within 24 hours before specimen collection. In menstruating women the optimal time for cell collection is at ovulation. Patients should not be scheduled during their menstrual cycle. Bleeding or a heavy exudate may make a specimen unsatisfactory for evaluation of epithelial cell abnormality.

COLLECTION PROCEDURE:

Technique 1, ThinPrep® Pap Test using broom-like device

1. Obtain specimen prior to bimanual examination using an un-lubricated speculum (saline or water may be used on the speculum).

   NOTE: Use of lubricant jellies can interfere with collection of a representative cervical specimen as well as processing and evaluating the specimen, and may lead to an unsatisfactory result. This is especially true of lubricants containing carbomers. If necessary a small amount of carbomer-free lubricant may be used on the speculum, but avoid getting lubricant on the tips of the speculum.
2. Gently remove excess mucus or other discharge from surface of cervix using a folded gauze pad held by ring forceps. Do not use a swab as fibers can obscure cells during microscopic examination.
3. Remove inflammatory exudate from the cervical canal before taking the specimen. Remove by placing a dry 2x2 inch piece of gauze over the cervix and peeling it away after it absorbs the exudates or by using a dry proctoswab or scopette.

   NOTE: The excess cervical mucus and inflammatory exudate are essentially devoid of meaningful cellular material and when present in the specimen vial may yield a slide with little or no diagnostic material present.
4. The cervix should not be cleaned by washing with saline; doing this may result in a relatively acellular specimen.
5. The specimen should be obtained before the application of acetic acid.
6. Obtain an adequate sampling from the cervix using the broom-like device. Insert the central bristles of the broom into the endocervical canal deep enough to allow the shorter bristles to fully contact the ectocervix. Push gently and rotate the broom in a **clockwise** direction five times.

   NOTE: The broom is designed to capture cells when rotated clockwise. Rotating the broom counter-clockwise will cause cells to slough off, but does not trap the cells in the broom.
7. Immediately rinse the broom in the PreservCyt® Solution vial by pushing the broom into the bottom of the vial 10 times, forcing the bristles apart. As a final step, swirl the broom vigorously to further release material. Tap the broom on the inside wall of the vial. Discard the broom. **Do not leave the broom head inside the vial.**
8. Tighten the cap so that the torque line on the cap passes the torque line on the vial.
9. Record the patient's name and date of birth on the vial.
10. Record the patient information and pertinent medical history on the cytopathology requisition.
11. Indicate the tests to be performed and the risk assessment level on the requisition.
12. Package the specimen and requisition for transport to the laboratory by placing the requisition in the document pocket on the outside of the specimen bag and the vial into the sealed pouch, making sure the seal is closed tightly.

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Technique 2, ThinPrep® Pap Test using spatula and endocervical brush

1. Obtain specimen prior to bimanual examination using an un-lubricated speculum (saline or water may be used on the speculum).

NOTE: Use of lubricant jellies can interfere with collection of a representative cervical specimen as well as processing and evaluating the specimen, and may lead to an unsatisfactory result. This is especially true of lubricants containing carbomers. If necessary a small amount of carbomer-free lubricant may be used on the speculum, but avoid getting lubricant on the tips of the speculum.

2. Gently remove excess mucus or other discharge from surface of cervix using a folded gauze pad held by ring forceps. Do not use a swab as fibers can obscure cells during microscopic examination.
3. Remove inflammatory exudate from the cervical canal before taking the specimen. Remove by placing a dry 2x2 inch piece of gauze over the cervix and peeling it away after it absorbs the exudates or by using a dry proctoswab or scopette.

   NOTE: The excess cervical mucus and inflammatory exudate are essentially devoid of meaningful cellular material and when present in the specimen vial may yield a slide with little or no diagnostic material present.
4. The cervix should not be cleaned by washing with saline; doing this may result in a relatively acellular specimen.
5. The specimen should be obtained before the application of acetic acid.
6. Obtain an adequate sampling from the ectocervix using a plastic spatula by placing the rounded tip of the spatula into the cervix until the curved edge of the spatula rests against the ectocervix. Rotate the spatula 360 degrees.
7. Immediately rinse the spatula in the PreservCyt® Solution vial by swirling the spatula vigorously in the vial 10 times. Discard the spatula. **Do not leave the spatula in the vial.**
8. Obtain an adequate sampling from the endocervix using an endocervical brush device. Insert the brush into the cervix until only the bottom-most fibers are exposed. Slowly rotate ¼ or ½ turn in one direction. DO NOT OVER-ROTATE.
9. Immediately rinse the brush in the PreservCyt® Solution vial by rotating the device in the solution 10 times while pushing against the PreservCyt® vial wall. Swirl the brush vigorously to further release material. Tap the brush on the inside wall of the vial. Discard the brush. **Do not leave the brush in the vial.**
10. Tighten the cap so that the torque line on the cap passes the torque line on the vial.
11. Record the patient's name and date of birth or other unique identifier on the vial. (The date of birth is the preferred second identifier.)
12. Record the patient information and pertinent medical history on the cytopathology requisition.
13. Indicate the test(s) to be performed and the risk assessment level on the requisition.
14. Package the specimen and requisition for transport to the laboratory by placing the requisition in the document pocket on the outside of the specimen bag and the vial into the sealed pouch, making sure the seal is closed tightly.

Technique 3, BD SurePath™ Pap Test specimen collection using spatula and endocervical brush

1. Obtain specimen prior to bimanual examination using an un-lubricated speculum (saline or water may be used on the speculum).

   NOTE: Use of lubricant jellies can interfere with collection of a representative cervical specimen as well as processing and evaluating the specimen and may lead to an unsatisfactory result. This is especially true of lubricants containing carbomers. If necessary a small amount of carbomer-free lubricant may be used on the speculum, but avoid getting lubricant on the tips of the speculum.

2. Gently remove excess mucus or other discharge from surface of cervix using a folded gauze pad held by ring forceps. Do not use a swab as fibers can obscure cells during microscopic examination.
3. Remove inflammatory exudate from the cervical canal before taking the specimen. Remove by placing a dry 2x2 inch piece of gauze over the cervix and peeling it away after it absorbs the exudates or by using a dry proctoswab or scopette.

   NOTE: The excess cervical mucus and inflammatory exudate are essentially devoid of meaningful cellular material and when present in the specimen vial may yield a slide with little or no diagnostic material present.
4. The cervix should not be cleaned by washing with saline; doing this may result in a relatively acellular specimen.
5. The specimen should be obtained before the application of acetic acid.
6. Obtain an adequate sampling from the ectocervix using a plastic spatula by placing the rounded tip of the spatula into the cervix until the curved edge of the spatula rests against the ectocervix. Rotate the spatula 360 degrees.
7. Immediately snap the device handle at the red scoring line and drop the device into the BD SurePath™ vial.

   NOTE: Do not touch the head of the device while detaching it.
8. Obtain an adequate sampling from the endocervix using an endocervical brush device. Insert the brush into the cervix until only the bottom-most fibers are exposed. Slowly rotate ¼ or ½ turn in one direction. DO NOT OVER-ROTATE.
9. Immediately snap the device handle at the red scoring line and drop the device into the BD SurePath™ vial.

   NOTE: Do not touch the head of the device while detaching it.
10. Place the cap on the vial and tighten it. **Submit the vial with collection device(s) to the lab.**
11. Record the patient's name and date of birth or other unique identifier on the vial. (The date of birth is the preferred second identifier.)
12. Record the patient information and pertinent medical history on the cytopathology requisition.
13. Indicate the test(s) to be performed and the risk assessment level on the requisition.
14. Package the specimen and requisition for transport to the laboratory by placing the requisition in the document pocket on the outside of the specimen bag and the vial into the sealed pouch, making sure the seal is closed tightly.

Technique 4, BD SurePath™ Pap Test specimen collection using broom-like device

1. Obtain specimen prior to bimanual examination using an un-lubricated speculum (saline or water may be used on the speculum).

   NOTE: Use of lubricant jellies can interfere with collection of a representative cervical specimen as well as processing and evaluating the specimen, and may lead to an unsatisfactory result. This is especially true of lubricants containing carbomers. If necessary a small amount of carbomer-free lubricant may be used on the speculum, but avoid getting lubricant on the tips of the speculum.
2. Gently remove excess mucus or other discharge from surface of cervix using a folded gauze pad held by ring forceps. Do not use a swab as fibers can obscure cells during microscopic examination.

3. Remove inflammatory exudate from the cervical canal before taking the specimen. Remove by placing a dry 2x2 inch piece of gauze over the cervix and peeling it away after it absorbs the exudates or by using a dry proctoswab or scopette.

   NOTE: The excess cervical mucus and inflammatory exudate are essentially devoid of meaningful cellular material and when present in the specimen vial may yield a slide with little or no diagnostic material present.
4. The cervix should not be cleaned by washing with saline; doing this may result in a relatively acellular specimen.
5. The specimen should be obtained before the application of acetic acid.
6. Obtain an adequate sampling from the cervix using the broom-like device. Insert the central bristles of the broom into the endocervical canal deep enough to allow the shorter bristles to fully contact the ectocervix. Push gently and rotate the broom in a **clockwise** direction five times.

   NOTE: The broom is designed to capture cells when rotated clockwise. Rotating the broom counter-clockwise will cause cells to slough off but does not trap the cells in the broom.
7. Immediately drop the detachable head of the device into the BD SurePath™ vial.

   NOTE: Do not touch the head of the device while detaching it.
8. Place the cap on the vial and tighten it.
9. Record the patient's name and date of birth or other unique identifier on the vial. (The date of birth is the preferred second identifier.)
10. Record the patient information and pertinent medical history on the cytopathology requisition.
11. Indicate the tests to be performed and the risk assessment level on the requisition.
12. Package the specimen and requisition for transport to the laboratory by placing the requisition in the document pocket on the outside of the specimen bag and the vial into the sealed pouch, making sure the seal is closed tightly.

SPECIMEN TRANSPORT:

Specimens collected in ThinPrep® PreservCyt® Solution should be processed within four weeks of collection. Ancillary tests on specimens collected in SurePath Preservative Fluid must be performed within 14 days of collection. Specimens should be transported to the laboratory in a timely manner in order to meet these time limits. These specimens should be stored and transported at ambient temperatures. To find out if courier service is available in your area, contact your providing laboratory.

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