The American College of
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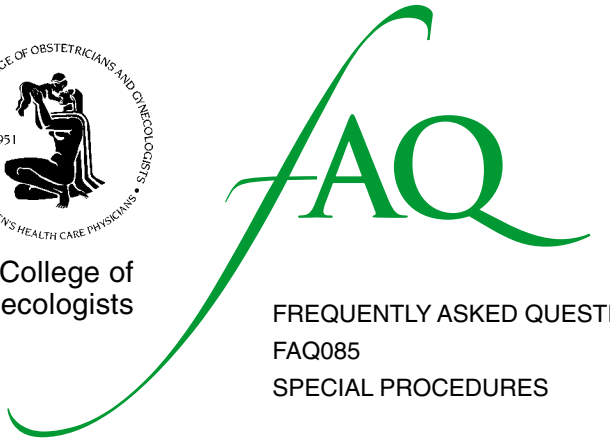

FREQUENTLY ASKED QUESTIONS
FAQ085
SPECIAL PROCEDURES

Cervical Cancer Screening

- What is cervical cancer screening?
- How is cervical cancer screening done?
- Who should have cervical cancer screening and how often?
- When can I stop having cervical cancer screening?
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What is cervical cancer screening?

Cervical cancer screening is used to find changes in the cells of the cervix that could lead to cancer (see FAQ163 "Cervical Cancer"). Screening includes the ***Pap test*** and, for some women, testing for ***human papillomavirus (HPV)*** (see FAQ191 "Human Papillomavirus [HPV] Vaccination").

How is cervical cancer screening done?

Cervical cancer screening is simple and fast. It takes less than a minute to do. With the woman lying on an exam table, a ***speculum*** is used to open the vagina. This device gives a clear view of the cervix and upper vagina.

For a Pap test, a small number of cells are removed from the cervix with a brush or other tool. The cells are put into a liquid and sent to a lab testing. For an HPV test, sometimes the same sample taken for the Pap test can be used. Sometimes, two cell samples are taken.

Who should have cervical cancer screening and how often?

You should start having cervical cancer screening at age 21 years. How often you should have cervical cancer screening depends on your age and health history:

- Women aged 21–29 years should have a Pap test every 3 years.
- Women aged 30–65 years should have a Pap test and HPV test (co-testing) every 5 years (preferred). It is acceptable to have a Pap test alone every 3 years.

When can I stop having cervical cancer screening?

You can stop having cervical cancer screening after age 65 if you do not have a history of moderate or severe cervical ***dysplasia*** or cervical cancer and if you have had either three negative Pap test results in a row or two negative co-test results in a row within the past 10 years, with the most recent test performed within the last 5 years.

What happens if I have an abnormal screening test result?

You most likely will have additional testing after an abnormal test result. This testing can be simply a repeat Pap test, An HPV test, or a more detailed examination called a ***colposcopy*** (with or without a ***biopsy***). If results of follow-up tests indicate precancerous changes, you may need treatment to remove the abnormal cells.

Are cervical cancer screening results always accurate?

As with any lab test, cervical cancer screening test results are not always accurate. Sometimes, the results show abnormal cells when the cells are normal. This is called a "false-positive" result. The tests also may not detect abnormal cells when they are present. This is called a "false-negative" result. Many factors can cause false results:

- The sample may contain too few cells.
- There may not be enough abnormal cells to study.
- An infection or blood may hide abnormal cells.
- Douching or vaginal medications may wash away or dilute abnormal cells.

To help prevent false-negative or false-positive results, you should avoid douching, sexual intercourse, and using vaginal medications or hygiene products for 2 days before your test. You also should not have cervical cancer screening if you have your menstrual period.

Glossary

Biopsy: A minor surgical procedure to remove a small piece of tissue that is then examined under a microscope in a laboratory.

Colposcopy: Viewing of the cervix, vulva, or vagina under magnification with an instrument called a colposcope.

Dysplasia: A noncancerous condition that occurs when normal cells are replaced by a layer of abnormal cells. Dysplasia can be mild, moderate, or severe.

Human Papillomavirus (HPV): The name for a group of related viruses, some of which cause genital warts and are linked to cervical changes and cervical cancer.

Pap Test: A test in which cells are taken from the cervix and vagina and examined under a microscope.

Speculum: An instrument used to hold open the walls of the vagina.

If you have further questions, contact your obstetrician–gynecologist.

FAQ085: Designed as an aid to patients, this document sets forth current information and opinions related to women's health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to institution or type of practice, may be appropriate.

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