



## NEWS RELEASE

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### Top Five Tests and Procedures to Question in Ob-Gyn

**Washington, DC** -- The American College of Obstetricians and Gynecologists (The College) today released its list of “Five Things Physicians and Patients Should Question” in obstetrics-gynecology as part of the [Choosing Wisely](#)<sup>®</sup> campaign, led by the American Board of Internal Medicine (ABIM) Foundation. The College’s list includes five evidence-based recommendations that can support ob-gyns and their patients in making wise choices about their care.

“The College is pleased to join the [Choosing Wisely](#)<sup>®</sup> campaign, particularly because it complements our own focus on promoting quality, safety, and efficiency in the delivery of women’s health care services,” said The College’s Executive Vice President, [Hal C. Lawrence III, MD](#). “We carefully selected the five procedures and tests in ob-gyn based on their potential to improve quality health care and avoid potential harm. As ob-gyns, our goal is to provide women the very best evidence-based medical care.”

Here is the list of five tests or procedures The College released today:

1

**Don’t schedule elective, non-medically indicated inductions of labor or cesarean deliveries before 39 weeks 0 days gestational age.**

Delivery prior to [39 weeks](#) 0 days has been shown to be associated with an increased risk of learning disabilities and a potential increase in morbidity and mortality. There are clear medical indications for delivery prior to 39 weeks 0 days based on maternal and/or fetal conditions. A mature fetal lung test, in the absence of appropriate clinical criteria, is not an indication for delivery.

2

**Don’t schedule elective, non-medically indicated inductions of labor between 39 weeks 0 days and 41 weeks 0 days unless the cervix is deemed favorable.**

Ideally, labor should start on its own initiative whenever possible. Higher cesarean delivery rates result from inductions of labor when the cervix is unfavorable. Health care practitioners should discuss the risks and benefits with their patients before considering inductions of labor without medical indications.

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3

**Don't perform routine annual cervical cytology screening (Pap tests) in women 30–65 years of age.**

In average-risk women, annual [cervical cytology screening](#) has been shown to offer no advantage over screening performed at 3-year intervals. However, a well-woman visit should occur annually for patients with their health care practitioner to discuss concerns and problems, and have appropriate screening with consideration of a pelvic examination.

4

**Don't treat patients who have mild dysplasia of less than two years in duration.**

Mild dysplasia (Cervical Intraepithelial Neoplasia [CIN 1]) is associated with the presence of the [human papillomavirus](#) (HPV), which does not require treatment in average-risk women. Most women with CIN 1 on biopsy have a transient HPV infection that will usually clear in less than 12 months and, therefore, does not require treatment.

5

**Don't screen for ovarian cancer in asymptomatic women at average risk.**

In population studies, there is only fair evidence that screening of asymptomatic women with serum CA-125 level and/or transvaginal ultrasound can detect [ovarian cancer](#) at an earlier stage than can be detected in the absence of screening. Because of the low prevalence of ovarian cancer and the invasive nature of the interventions required after a positive screening test, the potential harms of screening outweigh the potential benefits.

To date, 25 medical specialty societies have released individual lists representing more than 130 tests and procedures to question. *Choosing Wisely*<sup>®</sup> has reached millions of consumers nationwide through a group of 14 consumer partners being led by Consumer Reports, the world's largest independent product-testing organization, and including AARP, Alliance Health Networks, The Leapfrog Group, and the National Partnership for Women & Families.

For more information on The College's "Five Things Physicians and Patients Should Question" and the *Choosing Wisely*<sup>®</sup> campaign, go to [www.choosingwisely.org](http://www.choosingwisely.org).

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*The American College of Obstetricians and Gynecologists (The College), a 501(c)(3) organization, is the nation's leading group of physicians providing health care for women. As a private, voluntary, nonprofit membership organization of approximately 56,000 members, The College strongly advocates for quality health care for women, maintains the highest standards of clinical practice and continuing education of its members, promotes patient education, and increases awareness among its members and the public of the changing issues facing women's health care. The American Congress of Obstetricians and Gynecologists (ACOG), a 501(c)(6) organization, is its companion organization. [www.acog.org](http://www.acog.org)*

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