1 July 2022

National Cervical Screening Program
Launch of self-collection eligibility expansion

From today, 1 July 2022, anyone eligible for a Cervical Screening Test under the NCSP (i.e. women and people with a cervix aged 25-74 years who have ever had any sexual contact) will have the choice to screen either through self-collection of a vaginal sample using a simple swab (unless a co-test is indicated)[1], or clinician-collection of a sample from the cervix using a speculum.

Where can you get more information?

National resources available to support the self-collection changes can be accessed through the Program Resources sections at www.health.gov.au/ncsp

- There is a range of resources available, for consumers and for healthcare providers. There are information sheets, videos, visual guides, quick reference guides, etc. There is also a range of easy-read resources for Aboriginal and Torres Strait Islander peoples and culturally and linguistically diverse people.
- Information specific to self-collection is also available at our self-collection page

In addition, take a look at the:

- new National Cervical Screening Program National Cervical Screening Policy, which has been updated to cover both screening options (i.e. self-collection and clinician-collection).
- video and FAQs on the changes to the NCSP Clinical Guidelines to support the self-collection expansion.

What you can do

- Familiarise yourself with the available resources (outlined below) to support you in offering self-collection to patients as a choice for cervical screening.
- Read through the key messages below that provide more details around the changes and how you can support your patients in offering self-collection as a choice for cervical screening.
- Engage early with your local pathology laboratory to confirm they support processing of self-collected vaginal samples and to order the required swabs and other consumables.
- Look out for further messages from the Program on the availability of further resources and education materials to help equip you in offering self-collection as an option for cervical screening to your patients.

Key messages for healthcare providers and laboratories

Availability and processing of self-collected vaginal samples

- There is a range of collection devices and methods available for use under the NCSP for self-collected vaginal samples.
- Self-collection devices and methods will vary by pathology laboratory and laboratories may have varying collection and handling instructions and requirements.

Healthcare providers are encouraged to talk to their usual pathology provider in the first instance to:

- confirm that they can process self-collected vaginal samples, or
- that they are able to send on self-collected vaginal samples to a laboratory that can process self-collected vaginal samples, and
- order the correct collection device and other consumables for offering self-collection, and

[1] Self-collection is not appropriate for people who require a co-test, for example because they are symptomatic or undergoing Test of Cure surveillance.

- confirm any collection, handling and transport requirements.

Self-collection devices currently available include:

- **Copan 552C dry flocked swab, red topped** – for processing by accredited laboratories only. These swabs are delivered dry to the laboratory for processing.

  If your local pathology provider is unable to process these types of self-collected samples or is unable to refer samples to an accredited laboratory for processing, healthcare providers can contact an accredited laboratory directly to arrange for processing of the sample. Australian pathology laboratories accredited to process these types of self-collected vaginal samples are:

  - VCS Pathology (VIC) – contact David Hawkes at dhawkes@vcs.org.au or 0400 722 202
  - Douglass Hanly Moir Pathology (NSW) – contact Shirley George at sgeorge@dhm.com.au or (02) 9855 6203
  - Sullivan Nicolaides Pathology (QLD) – contact Doctors Services at doctors_services@snp.com.au or 1300 SNPATH (1300 767 284)
- **Copan 552C.80 dry flocked swab, red-topped** (Roche validated) – these must be re-suspended into a collection vial (e.g. ThinPrep) at time of collection. The collection vial is delivered to the laboratory for processing. Note this collection type is only available for self-collection in a clinic setting. Talk to your local laboratory about collection and handling requirements for processing these types of self-collected vaginal samples.
- **Copan 5E089C dry flocked swab, white topped** (Becton Dickinson (BD) validated). These swabs are delivered dry to the laboratory for processing. Talk to your local laboratory about collection and handling requirements for processing these types of self-collected vaginal samples.

Important considerations

- Clinical information on pathology request forms helps pathology laboratories in performing the right tests, matching the right clinical recommendations and selecting the right Medical Benefits Schedule item/s.
- To ensure the accurate and timely processing of self-collected samples, healthcare providers must:
  - follow any self-collection handling and processing requirements and instructions provided by their laboratory
  - clearly indicate that the sample has been self-collected on the pathology request form, and on the sample if appropriate
  - ask the patient if they identify as Aboriginal and/or Torres Strait Islander and record the patient's identification status on the pathology request form
  - also seek to determine the patient's CALD status, by recording their country of birth and language spoken at home, where possible.

Broad awareness of pathway changes

- Cervical Screening Tests, either through self-collection or clinician-collection must be accessed through a healthcare provider.
- Self-collection is an option any time a human papillomavirus (HPV) test is needed, including for follow-up HPV testing after an intermediate risk result[2].
- Self-collection must be ordered and overseen by a healthcare provider who can also ensure timely clinician-collection of a cervical sample for liquid-based cytology (LBC) if required as part of a follow-up assessment.
- If HPV is detected on a self-collected vaginal sample, depending on the type of HPV detected, a clinician-collected cervical sample for LBC or referral to a specialist will be required.
- A healthcare provider is not required to observe the sample collection unless that is the person's preference.
- People who may have difficulty (or are not confident) collecting a vaginal sample themselves, may be assisted to do so by the healthcare provider, or the healthcare provider may collect the sample on their behalf using a self-collection swab without using a speculum.

[2] Amendments to relevant Medicare Benefits Schedule items to support testing on a self-collected sample at the follow-up test for people whose initial screening test was done on a clinician-collected sample will be effective from 1 November 2022.

- Self-collection should be offered in a clinic setting wherever possible. However self-collection can occur in other settings at the discretion of the supervising healthcare provider, with the aim of maximising participation in cervical screening.
- Healthcare providers must clearly identify samples as self-collected on pathology request forms.
- It is the responsibility of the supervising healthcare provider to facilitate patient access to, and return of, self-collection swabs, request tests from laboratories, and communicate results and any follow-up requirements to patients.
- Self-collection is not appropriate for participants who require a co-test, for example because they:
    - are symptomatic (e.g. experiencing unusual vaginal bleeding, pain or discharge),
    - are undergoing Test of Cure surveillance,
    - have had a total hysterectomy with a history of high-grade squamous intraepithelial lesions, and
    - have been exposed to Diethylstilbesterol (DES) in utero.
- The National Cervical Screening Program: Guidelines for the management of screen-detected abnormalities, screening in specific populations and investigation of abnormal vaginal bleeding (NCSP Clinical Guidelines) have been updated to support the expansion of self-collection and will come into effect on 1 July 2022.
    - The updated NCSP Clinical Guidelines bring together the best available evidence to prevent, diagnose and manage cervical cancer.
    - A video and FAQs for healthcare providers have been developed to support the changes to the NCSP Clinical Guidelines to support the self-collection expansion.

Want to know more or have any questions?

Contact us at NCSPcommittees@health.gov.au with any questions, feedback or concerns.