

Self-collect guide for HPV testing

Self-collect testing is only available for women who have never been screened or are under-screened, are greater than 30 years old, and it is more than 2 years since the last smear. Self-collect testing tends to only be about 70% as effective as samples taken by a doctor.

Reflex liquid based cytology (LBC) cannot be performed on the sample. A LBC specimen is required. If the HPV test is positive for HPV 16/18, the patient will be referred to a specialist. If the HPV test is positive for other high risk HPV, the patient will need to return to her GP to have a sample taken for LBC.

Self-collects are only to be taken under general practitioner or nurse practitioner supervision, where guidance and counselling of results can be given. Self-collection is contra-indicated in pregnancy.

Materials required

- Request form
- Dry Flocked swab

Medicare rebate

For self-collection Medicare will only bulk bill for 1 test in a 7 year period for self-testing. If more than 1 test is conducted, an out-of-pocket fee will apply. The patient should be informed of this.

If the patient wants additional cervical cytology testing that does not fit the MBS criteria, the test will not be rebated by Medicare.

Self-collect instructions

1. Use a dry flocked swab – do not use any lubricant.
2. Insert the dry swab deep into the vagina, not just the entrance.
3. Move the swab around in a circular motion for about 10 rotations and then move around other areas deep in the vagina.
4. Immediately place the dry swab back into the container and secure the cap.
5. The Doctor must Record the patients full name and DOB on the swab.
6. Complete the patient's details on the request form.
7. Provide as many clinical details as possible. This is essential for reliable cervical screening.
8. Clearly indicate SELF – COLLECT HPV TEST for PRIMARY SCREENING on the request form.

Place both the swab and request form into a specimen bag for transporting to the Laboratory.

Additional information

Patients who are symptomatic (history of abnormal bleeding) require both an HPV and concurrent liquid-based cytology (LBC). Self-collect samples are not recommended in these circumstances.

Patients who have previously been diagnosed with endocervical adenocarcinoma (AIS), require a concurrent LBC annually. Self-collection is not appropriate for these patients.

Patients who are immune deficient are advised to repeat testing in 3 years, not 5 years.

