INSTRUCTIONS FOR LOCAL HEALTH DEPARTMENT STAFF ONLY

Use the approved language in this standing order to create a customized standing order exclusively for your agency.

Print the customized standing order on agency letterhead. Review standing order at least annually and obtain Medical Director’s signature.

Standing order must include the effective start date and the expiration date.

**Assessment**

Subjective Findings

* Age 21 or over and never had Pap test
* Age 21 or over and unsure of date for last Pap test

Objective Findings

* Last Pap test is longer than recommended by Breast and Cervical Cancer Control Program and

Women’s and Children’s Health Section guidelines [see LHD standing orders for Pap Collection]

* History of abnormal Pap and non-compliant for follow-up
* Client is pregnant or suspected to be pregnant, defer Pap test and refer client to prenatal provider for possible Pap

**Plan of Care**

Implementation

A STD ERRN employed or contracted by the local health department may collect and order a Pap test by standing order, if any one of the subjective or objective finding above are present. An RN may order a Pap test collected by an STD ERRN or other medical provider.

Nursing Actions

STD ERRNs only collect Pap smears on non-pregnant clients.

Pap Smear Collection:

1. Follow the current Breast and Cervical Cancer Control Program and Women’s and Children’s Health Section for Pap Screening guidelines.
2. The cervix should be cleaned prior to sample collection, only if there is excess mucus. It is most important that an adequate sample be taken from the squamocolumnar junction, also called the transformation zone. The location of the squamocolumnar junction can be identified by a change in color and texture between the squamous and columnar epithelia. The squamous epithelium appears as pale pink, shiny and smooth. The columnar epithelium appears reddish with a granular surface.
3. Collect samples for the ThinPrep Pap test from both ectocervix and endocervix.
   1. collect cells from the ectocervix first
   2. using the contoured (or rounded) end of the plastic spatula, rotate 360º around entire ectocervix while maintaining tight contact with ectocervical surface
   3. remove spatula, immediately rinse contoured end of plastic spatula in vial of PreservCyt (ThinPrep) Solution by swirling vigorously ten times
   4. leave the spatula in the vial, while collecting endocervical sample
   5. insert the cytobrush device into the endocervix, until only the bottom most bristles are exposed
   6. slowly rotate one-half to one full turn in one direction, do not over-rotate

**additional rotation may cause bleeding and contaminate specimen**

* 1. remove brush, rinse the cytobrush in the PreservCyte (ThinPrep) solution ten times while pushing it against the wall of the vial
  2. swirl the brush vigorously to further release material and use the spatula to push material off the brush
  3. discard brush and spatula
  4. tighten the cap on the PreservCyt vial until the torque line on the cap passes the torque line on the vial
  5. for the client with no cervix, use the regular tip of the plastic spatula to scrape the vaginal cuff area

1. Collect samples for the conventional Pap test from both ectocervix and endocervix.
   1. make a single composite Pap smear by using one half of the slide for ectocervical smear and the other half for the endocervical smear
   2. collect a specimen for the conventional Pap test from the ectocervix first
   3. using the contoured (or rounded) end of the spatula, rotate 360º around entire ectocervix while maintaining tight contact with ectocervical surface
   4. remove spatula, leave material on spatula while collecting endocervical sample
   5. collect a specimen for the conventional Pap test from the endocervix
   6. insert the cytobrush device into the endocervix until only the bottom most bristles are exposed
   7. slowly rotate one-half to one full turn in one direction, do not over-rotate

**additional rotation may cause bleeding and contaminate specimen**.

* 1. remove brush
  2. prepare a Single Composite Slide
  3. transfer the cellular material from the spatula down one linear half of the slide, turn the spatula over to superimpose any material on the side of the spatula in the same manner; avoid zigzagging motions
  4. transfer the cellular material from the endocervical brush below the spatula sample on the slide by rolling the endocervical brush down the other half of the slide; avoid zigzagging motions
  5. spray slide with fixative immediately
  6. hold spray container at least 10 inches away to ensure coating and prevent dispersal and destruction of the cells by the propellant
  7. no more than five seconds should elapse between the beginning of smearing the sample and spraying of the slide
  8. if fixative leaks off the slide while lying flat, too much fixative may have been used
  9. protect the frosted end of the slide with your thumb or paper while spraying; the laboratory number washes off during processing, if fixative is applied to the frosted end of the slide
  10. proper fixing is vital, since air dried smears cannot be interpreted; slide should lie flat while the fixative dries, then package slide and form for shipping to the laboratory
  11. after specimens are collected, remove the speculum by unlocking and slowly moving away from cervix, close blades and maintaining downward pressure, inspect vaginal walls as blades exit the vagina

Laboratory Testing

1. Thin-Prep or conventional Pap (Local medical director should choose which Pap test method the LHD will use)
2. Interpretation of Lab Findings

Refer to Breast and Cervical Cancer Control Program and Women’s and Children’s Health Section guidelines for Pap test interpretation and follow-up.

**Criteria for Notifying the Medical Provider**

1. Contact the medical director or medical provider, if there is any question about whether to carry out any provision of the standing order.
2. Consult the medical director or medical provider, if there is any of the following:

* sustained cervical bleeding with introduction of the endocervical brush into cervix
* growth on cervix or in vagina
* ulcerative lesion on cervix or in vagina
* color change from normal squamous epithelium cells which usually appear as pale pink, shiny and smooth.
* color change from normal columnar epithelium cells which usually appear reddish with a granular surface
* harden fibrous area on cervix

**Follow Up**

1. Per LHD’s Breast and Cervical Cancer Control Program and

Women’s and Children’s Health Section guidelines regarding abnormal Pap results.

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date approved: \_\_\_\_\_\_\_\_\_\_\_\_

Local Health Department Medical Director

Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date reviewed:\_\_\_\_\_\_\_\_\_\_\_\_

Director of Nursing/Nursing Supervisor

Effective Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Legal Authority:** Nurse Practice Act, N.C. General Statutes 90-171.20(7)(a)(e)(f)&(8)(c)