

BCCCP TIMELINESS and ADEQUACY OF FOLLOW-UP ALGORITHM

For Breast Cancer Screening

Principles:

- A diagnostic work-up must be planned whenever there is an abnormal CBE, and/or when the screening mammography result is Suspicious Abnormality, Highly Suggestive of Malignancy, or Assessment Incomplete.
- Whenever a diagnostic work-up is planned, a final diagnosis must be recorded for follow-up to be considered adequate.
- Whenever diagnostic work-up is planned, the work-up needed to obtain a final diagnosis must occur within 60 days of the initial screening test.

N o.	CBE	Mammogram*	Diagnostic Procedures
1	Normal	<ul style="list-style-type: none"> • Negative • Benign • Probably Benign 	No work-up need be planned – Therefore adequacy need not be assessed. If work-up is planned, at least one diagnostic procedure must be done and a final diagnosis recorded.
2	Abnormal	<ul style="list-style-type: none"> • Negative • Benign • Probably Benign • Assessment Incomplete 	At least one of the following: <ul style="list-style-type: none"> • Repeat Breast Exam • Ultrasound • Biopsy/Lumpectomy • Fine Needle/Cyst Aspiration Additional Mam views or Film Comparison as only procedure is not adequate.
3	Abnormal	<ul style="list-style-type: none"> • Suspicious Abnormality • Highly Suggestive of Malignancy 	At least one of the following: <ul style="list-style-type: none"> • Biopsy/Lumpectomy • Fine Needle/Cyst Aspiration
4	Normal	Suspicious Abnormality	At least one of the following: <ul style="list-style-type: none"> • Repeat Breast Exam • Ultrasound • Biopsy/Lumpectomy • Fine Needle/Cyst Aspiration
5	Normal	Highly Suggestive of Malignancy	At least one of the following: <ul style="list-style-type: none"> • Biopsy/Lumpectomy • Fine Needle/Cyst Aspiration
6	Normal	Assessment Incomplete	At least one of the following: <ul style="list-style-type: none"> • Additional Mam views • Ultrasound • Film Comparison If Final Imaging Outcome is Suspicious Abnormality, Highly Suggestive of Malignancy or Unsatisfactory then at least one of the following: <ul style="list-style-type: none"> • Biopsy/Lumpectomy • Fine Needle/Cyst Aspiration

*Screening mammogram if not preceded by suspicious symptoms or abnormal CBE; diagnostic mammogram if post abnormal CBE.

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For Cervical Cancer Screening using Bethesda 2001

Principles:

- A diagnostic work-up must be planned whenever there is a 2001 Bethesda Pap test that is ASC-H, HSIL, Squamous Cell Carcinoma or AGC.
- A diagnostic work-up should be planned **in most cases** when there is a 2001 Bethesda Pap test that is LSIL, with exceptions for special populations noted in the table below.
- Whenever a diagnostic work-up is planned, a final diagnosis must be recorded for follow-up to be considered adequate.
- Whenever a diagnostic work-up is planned, the work-up needed to obtain a final diagnosis must occur within 90 days of the Pap test.
- An HPV test should be reported in the All Patients Section of the MDE Record.
- Adequacy algorithms are intended for management of screening Pap tests vs a woman under surveillance of previous abnormal results
- Co-testing (HPV and cytology) is only recommended for women ages 30-65.

No.	Pap Result	Diagnostic Procedures Required For Adequate Follow-up	Comments
1	Negative	No work-up need be planned – Therefore adequacy need not be assessed. If work-up is planned for Negative results, then colposcopy must be done and a final diagnosis recorded. If an HPV co-test result is positive, follow the ASCCP <i>Consensus Guidelines for the Management of Women with Abnormal Cervical Cancer Screening Tests</i> .	
2	ASC-US	If HPV test is performed and is positive, at least one of the following: • Colposcopy • Colposcopy w/Bx/ECC If work-up is planned, at least one of the following: • Colposcopy • Colposcopy w/Bx/ECC	An HPV test should be performed in most cases. Clinical management options exist at initial ASC-US Pap result. <i>Management options may vary if the woman is pregnant or ages 21-24</i>
3	LSIL	If HPV test is performed and is positive, at least one of the following: • Colposcopy • Colposcopy w/Bx/ECC If work-up is planned, at least one of the following: • Colposcopy • Colposcopy w/Bx/ECC	Work-up should be planned in most cases. <i>Management options may vary if the woman is pregnant or ages 21-24.</i>
4	ASC-H	At least one of the following: • Colposcopy • Colposcopy w/Bx/ECC	Work-up must be planned. <i>Management options may vary if the woman is ages 21-24</i>
5	HSIL	At least one of the following: • Colposcopy • Colposcopy w/Bx/ECC • LEEP • Cold Knife Cone	Work-up must be planned. Immediate LEEP or Cold Knife Cone not recommended if adolescent or pregnant.

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6	Squamous Cell Carcinoma	At least one of the following: <ul style="list-style-type: none">• Colposcopy• Colposcopy w/Bx/ECC• LEEP• Cold Knife Cone• ECC if endometrial cells present	Work-up must be planned.
7	AGC	At least one of the following: <ul style="list-style-type: none">• HPV Test and Colpo• HPV Test and Colpo w/Bx/ECC• LEEP• Cold Knife Cone• Endometrial Sampling if indicated	Work-up must be planned. Endometrial sampling indicated for women >35 years old.
8	Other	Adequacy cannot be assessed.	