



## Indications for an HPV test

Until such time as HPV primary screening is implemented, HPV tests sent to the laboratory from primary care must meet the current Guidelines.

Type	Summary	Reason	Testing	Who orders the test?
HPV triage	People 30 years and older with ASC-US or low-grade changes who have not had an abnormality in the previous five years	To determine triage to colposcopy based on the risk of progression, or potential detection of an underlying high-grade lesion that requires treatment	HrHPV (reflex) test using the same LBC sample	The laboratory automatically adds on the hrHPV test
Test of cure	After treatment of a high-grade squamous lesion	To assess the safety of returning to 3-yearly screening	Two 'co-tests' a year apart Return to 3-yearly screening if all four tests are negative	The sample taker must order the hrHPV test (the laboratory cannot add it on)
	High-grade squamous lesion >3 years previously with subsequent normal annual screening		<u>Post-treatment</u> - Two 'co-tests' a year apart:	
	After a possible or definite high-grade squamous cytology result where no high-grade lesion has been found on investigation		<ul style="list-style-type: none"> <li>cytology + hrHPV test 6 months post-treatment</li> <li>repeat cytology + hrHPV test 1 year later (18 months post-treatment)</li> </ul>	
	After a total hysterectomy and previous HSIL (CIN 2 or CIN 3)		Return to 3-yearly screening if all four tests are negative	
People seen at colposcopy	To assist managing people with discordant results		One hrHPV test	The specialist orders the test. This role cannot currently be delegated to staff in general practice to order the hrHPV test on their behalf at a later date