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National Cervical Screening Program Self-collection key messages

We have seen a promising level of self-collection uptake amongst eligible patients since it was made available to all women and people with a cervix eligible for cervical screening. To help maintain the continued uptake, please see below some key messages to support you in offering self-collection, including through telehealth consultations.

Key messages

- Before ordering self-collection through a telehealth consultation, talk to your local pathology provider to confirm appropriate arrangements for patient access to, and return of, the appropriate self-collection swabs.
- Self-collection is not appropriate where a patient requires a co-test (e.g., for symptom investigation or as part of Test of Cure surveillance).
- Before offering self-collection, check your patient's screening history to confirm they are due for cervical screening.
 - Self-collection is **not** a 'new' test for cervical screening – it provides an additional choice for patients in how their Cervical Screening Test sample is collected. Patients must be due for cervical screening to receive a Medicare subsidised Cervical Screening Test, including through self-collection.
- Clearly label Cervical Screening Test samples as self-collected or clinician-collected to ensure the correct pathology test is undertaken, the correct MBS item is claimed, and appropriate patient management recommendations are made.
- When ordering a follow-up LBC test after an HPV (not 16/18) positive result on a self-collected sample, order '**LBC only**' on the pathology request form (i.e., do not order a co-test).

Self-collection through telehealth

- Self-collection should be offered in-clinic wherever possible, as sample collection is considered more likely in this context.
- However, with the aim to maximise participation in cervical screening, self-collection can occur in any setting that the healthcare provider ordering the test believes is appropriate, including through a telehealth consultation.
- Healthcare providers are responsible for giving clear information on the self-collection option and instructions on how to take the test.
- It is also your responsibility as the requesting healthcare provider, to arrange for patient access to, and return of, the appropriate self-collection swab, to order the appropriate test from the laboratory and to communicate results and any follow-up requirements to the patient.
- You/your clinic may consider specific arrangements for facilitating patient access to and return of self-collected swabs, that best meet the needs of your patients and your community.
 - This will likely mean requesting patient collection and return of self-collection swabs directly from the clinic.
 - **Do not** send patients directly to a pathology collection centre to pick up and return a self-collection swab unless that specific arrangement has been discussed and confirmed with your pathology provider.

- Talk to your local pathology provider in the first instance to confirm appropriate arrangements for patient access to and return of self-collection swabs.

Background

Anyone eligible for a Cervical Screening Test under the National Cervical Screening Program (i.e., women and people with a cervix aged 25-74 years who have ever had any sexual contact) can choose to screen either through self-collection of a vaginal sample using a simple swab (unless a co-test is indicated), or clinician-collection of a sample from the cervix using a speculum.

The [NCSP Clinical Guidelines](#) recommend that all women due for cervical screening in pregnancy may be offered the option to self-collect a vaginal sample for HPV testing. A Cervical Screening Test using a self-collected vaginal sample is as accurate as a clinician-collected sample taken from the cervix during a speculum examination.

Want to know more?

Find more information and resources about the National Cervical Screening Program and self-collection at health.gov.au/NCSP.