

## Conventional Pap Test Collection Using the Spatula and Endocervical Brush

### Quality Control

Immediate fixation of the cellular sample, within seconds of collection, is necessary to prevent air-drying. Air-drying obscures cellular detail and compromises specimen evaluation. Spraying immediately with fixative can prevent air-drying artifact.

### Supplies Needed

Gynecologic Cytology Requisition, *completed with required information*

Clean, frosted end slide(s) (Both one and two slides specimens are acceptable)

Graphite (lead) pencil

Cytology spray fixative

Contoured wooden or plastic spatula

Endocervical brush

Isotonic saline (optional; for atrophic mucosa)

Plastic slide container

### Procedure

1. Have all material ready for use. Speed in preparing and fixing the smear is critical. Air drying, which starts to occur within 5 seconds of spreading the smear may make the smear difficult or impossible to read.
2. Label the glass slides on the frosted end with the patient's name and one other identifier (DOB, SSN, MRN) before the smear is taken. Use a graphite pencil only; ink will dissolve during processing.
3. Complete the requisition with all required information. See requisition requirement section of this manual.
4. The vaginal fornix and ectocervix should be sampled before the endocervix/transformation zone. If the sampling order is reversed, bleeding secondary to abrasion from the brush may obscure the cellular material.
5. For atrophic mucosa a small amount of isotonic saline may be instilled into the vagina to act as a moistening agent for the cells prior to obtaining the cellular sample.
6. Remove excess mucus, discharge, or inflammatory exudates from the cervical canal before taking the sample. This should be gently removed with ring forceps holding a folded gauze pad. Place a dry 2 x 2 inch piece of gauze over the cervix and peel it away after it absorbs the exudates. Alternatively, a dry proctoswab or scopette may be used. The excess cervical mucus is essentially devoid of meaningful cellular material and when present on the slide may obscure cellular details. The cervix should not be cleaned by washing with saline or it may result in a relatively acellular specimen.

7. First, a sample of the ectocervix should be taken using a plastic or wooden spatula. After gently removing and discarding any excess mucus and exudates on the outer portion of the cervix, the notched end of the spatula that corresponds to the contour of the cervix should be rotated 360 degrees around the circumference of the cervical os, retaining the sample on the upper surface of the spatula.

A. Grossly visible lesions, including irregular, discolored, or friable areas should be directly sampled and can be placed on a separate slide, especially if the lesion is distant from other collection areas.

8. Spread this material evenly and thinly lengthwise down the labeled slide surface, using a single uniform motion.

9. **Fix immediately** with cytology spray fixative.

10. Discard the spatula.

11. Sample the endocervix by inserting the endocervical brush into the endocervical canal until only the bottommost fibers are exposed (only the bristles closest to the hand should be visible).

12. Slowly rotate the brush one-quarter to one-half turn in one direction and remove. **Do not over-rotate.**

13. The endocervical brush should then be rolled along the labeled slide surface by turning the brush handle and slightly bending the bristles with gentle pressure. The brush should NOT be smeared with force or in multiple directions.

14. **Fix immediately** with cytology spray fixative.

15. Discard the brush.

16. Place slides in plastic container, attach the completed requisition form to the container and send to laboratory. The specimen is stable indefinitely once spray fixed.