

General Instructions for Pap Test Collection

Patient Preparation

(To optimize collection conditions)

1. Ideally, the smear should be obtained at mid-cycle, because cell morphology is most easily interpreted at this time.
2. The smear should not be obtained during active menses, because the presence of blood may make the smear impossible to interpret.
3. Instruct patient to avoid douches 48-72 hours prior to sampling as it may cause difficulty in smear interpretation.
4. Instruct patient to not use tampons, birth control foams, jellies, or other vaginal creams or vaginal medications for 48 hours prior to the test.
5. Patient should refrain from intercourse 48 hours prior to the test.
6. Lubricant jelly should **NOT** be used on the vaginal speculum. A small amount of normal saline may be used instead, as it will not affect cellular detail.
7. If a large amount of mucus or purulent exudate is present on the surface of the cervix, it should be gently removed with a 2 x 2 inch piece of gauze, a dry proctoswab or scopette.
8. The use of a cotton-tipped swab for endocervical sampling is **NOT** recommended, even if the swab is moistened. Cells adhere to the cotton and do not transfer well to the glass slide, which results in an incomplete specimen.

Visualization of the Cervix for Collection of an Adequate Sample

Collection of a cervical cytology specimen is usually performed with the patient in the dorsolithotomy position. A sterile or single-use bivalve speculum of appropriate size is inserted into the vagina without lubrication. Warm water or normal saline may be used to facilitate insertion of the speculum. The position of the speculum should allow for complete visualization of the os and ectocervix.

The transformation zone is the site of origin for most cervical neoplasia and should be the focus of gynecologic cytology specimen collection. The transformation zone may be easily visualized or may be high in the endocervical canal. Location varies not only from patient to patient, but in an individual over time. Factors producing variation include changes in vaginal pH, hormonal changes, including pregnancy, childbirth, and menopausal status, and hormonal therapy. In postmenopausal patients or women who have received radiation therapy, cervical stenosis may prevent visualization of the transformation zone. It remains important to sample the endocervix in these patients. This may require more extensive clinical procedures. If a patient has had a hysterectomy, a vaginal sample is sufficient, with particular attention to sampling the vaginal cuff.