

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

### Quality Control

Over-rotation of the endocervical brush beyond one-half to one-quarter turn can lead to a hypercellular and/or unsatisfactory specimen.

### Supplies Needed

Gynecologic Cytology Requisition, *completed with required information*

Plastic spatula

Endocervical brush

ThinPrep Vial of PreservCyt<sup>®</sup> solution, *labeled with patient's name and one other identifier (date of birth, SSN, MRN, etc.)*

### Procedure

1. Complete the requisition with all required information. See requisition requirement section of this manual.
2. 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.
3. 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 in the sample vial may yield a slide with little or no diagnostic material. The cervix should not be cleaned by washing with saline or it may result in a relatively acellular specimen.
4. First, a sample of the ectocervix is taken using a plastic spatula. The ThinPrep manufacturer recommends using a plastic spatula instead of a wooden spatula because the cellular material tends to adhere to the wood.
5. 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.
  - A. Grossly visible lesions, including irregular, discolored, or friable areas should be directly sampled.
6. Rinse the spatula in the PreservCyt<sup>®</sup> solution vial by swirling the spatula vigorously in the vial 10 times.
7. Discard the spatula.

8. 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).
9. Slowly rotate the brush one-quarter to one-half turn in one direction and remove. Do not over-rotate.
10. Rinse the brush in the PreservCyt<sup>®</sup> solution by rotating the device in the solution 10 times while pushing against the PreservCyt<sup>®</sup> solution vial wall. Swirl the brush vigorously to further release material.
11. Discard the brush. Do **NOT** place the brush tip in vial.
12. Tighten the cap on the ThinPrep vial so that the torque line on the cap passes the torque line on the vial.
13. Record the patient name on the vial (not the lid) and include one other identifier (date of birth, SSN, MRN, etc.).
14. Place the vial in a biohazard bag, insert completed requisition into outside pouch and send to laboratory. The specimen is stable indefinitely in the fixative. The fixed specimen does not need to be refrigerated.
15. Additional testing may be ordered from the specimen vial. Please see requisition for choices.