

Healthcare Provider's Guide to Home Based HPV Self-Collection



VCS Pathology

This is a best practice guide for healthcare providers on supporting patients to take their own Human Papillomavirus (HPV) vaginal swab at home. The information in this guide is in accordance with the current (2022) National Cervical Screening Program (NCSP): National Cervical Screening Policy.

What is Home Based Self-Collection?

All screening participants in the NCSP have the choice to screen using a self-collected vaginal sample, or a clinician-collected cervical sample. Self-collection should be offered in a clinic setting wherever possible. However self-collection can occur in other settings at the discretion of the supervising healthcare provider, with the aim of maximising participation in cervical screening.

Home based self-collection is an alternative cervical screening method for patients who may be unable or unwilling to attend an in-person consultation. Healthcare providers can request home self-sampling kits to be mailed to eligible patients who are due or overdue for screening following a telehealth consultation. Home based self-collection allows patients to conveniently complete their HPV test in the privacy of their own home.

Home based self-collection may be an acceptable alternative for patients who are reluctant to have a clinician-collected cervical screening test, or who have difficulty attending a clinic due to remoteness or other health issues.

Key points about HPV self-collection

- Self-collection is a vaginal swab taken by a patient for HPV testing
- Self-collection can be performed in either a health care setting, or as a home based test
- Self-collected samples have been shown to detect HPV as reliably as clinician-collected samples
- Liquid Based Cytology (LBC) cannot be performed on the vaginal sample, so is not appropriate if a co-test is required.
- Patients should be advised of the small chance they will need to attend an in-person consultation for further investigation if HPV is detected in their sample
- The laboratory results will be sent to the requesting healthcare provider, not the patient
- Studies have shown that self-collection is highly acceptable in underscreened populations

VCS Pathology provides self-collection instruction cards for patients in 19 languages. Visit <https://www.vcs.org.au/pathology/for-practitioners/self-collection-resources/>



Self-collection is NOT appropriate in any circumstances requiring a co-test including:

- Patients with any signs or symptoms suggestive of cervical cancer (eg. experiencing unusual vaginal bleeding, pain or discharge)
- Patients in Test of Cure (TOC) surveillance after treatment of high grade squamous intraepithelial lesion (HSIL)
- Patients with a previous history of adenocarcinoma in situ (AIS)
- Patients exposed to diethylstilboestrol (DES) in utero

PROCESS FOR HOME BASED SELF-COLLECTION

The following steps explain how to offer Home Based Self-Collection during a telehealth consultation:

Telehealth consultation

- If your patient can't attend your practice for a cervical screening test, offer home based self-collection, if due or overdue for screening.
- Explain to your patient how to take their test. Inform them they can call you or the practice nurse if they need further support.
- Complete the pathology request form stating 'Home Based Self-Collection', and indicate the patient's preferred address
- Leave the request form for collection by our couriers or send by
 - Fax to (03) 9349 1977
 - Mail to PO Box 178 Carlton South, Victoria 3053



Pathology lab processing

- VCS will check the patient is due or overdue for cervical screening on the National Cancer Screening Register. You will be notified if your patient is not eligible for screening at this time.
- VCS will send a self-collection kit and instructions to your patient with a return Express Post envelope.
- Patient completes sample and writes the collection date on the sample tube and/or request form.
- The patient returns the sample to VCS Pathology. It must be received within 28 days of sample collection.



Results & follow up

- Patient results will be sent to your practice.
- If the patient has not returned their sample to VCS Pathology within one month, our team will call your practice so the patient can be followed up.
- Discuss results with your patient. It is important to provide appropriate follow up for patients in whom HPV is detected.

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IMPORTANT POINTS ABOUT HOME BASED SELF-COLLECTION

ELIGIBILITY

Patients can be offered home based self-collection if they are due or overdue for routine screening and do not require co-test for any reason. You can check their screening history on the National Cancer Screening Register (NCSR).



TIME LIMIT

The laboratory must receive the sample within 28 days from the date of collection.

It is important that the patient documents the date of collection.



REMINDERS

Follow up is important - patients may need extra support and encouragement to complete the test, particularly those who are under or never screened. Preliminary data shows ~50% of kits are returned to the lab within 30 days, so we suggest practice staff contact the patient 2 weeks after their telehealth consultation.



WHAT IS IN THE HOME TEST KIT?

The home test kit contains:

- ✓ Specimen biohazard bag
- ✓ Flocked swab 552C or 552.80C
- ✓ A copy of the pathology request form completed by the healthcare provider.

Note: a 'sign and date here' sticker will be attached to the Medicare section of the request form. This is where the patient signs and records the date of collection

- ✓ A prepaid Express Post envelope addressed to VCS Pathology
- ✓ Information pamphlet about the self-collected cervical screening test
- ✓ A double-sided instruction sheet covering the collection, packaging and postage to VCS Pathology

Contact VCS Pathology for a sample home test kit that you can show to your patients during a video consultation. Research shows that showing your patient how easy the kit is to use will lead to higher participation.

TIPS TO SUPPORT PATIENTS IN HOME BASED SELF-COLLECTION



During the telehealth consultation

- **Explain the self-collection kit.** Use familiar terms such as "like inserting a tampon". It may be useful to describe the soft tip. Instruct them to insert the swab up to and no further than the red mark. Tell patients that taking the sample should not hurt and to avoid collecting the sample during menstruation.
- **Explain HPV.** Explain that 80% of people get HPV at some time in their lives and most clear the infection within 12 months. Patients will also benefit by being reassured they are at low risk of cervical cancer if HPV is not detected.
- **Explain possible results and next steps;** it is particularly important for under-screened patients to understand the whole pathway. Advise the patient that if HPV is detected, they will need a speculum examination done by a healthcare provider. A helpful line is "We are not screening for cancer, but we are screening for a risk factor which is HPV, and you may need a speculum examination if HPV is found on your test".
- **Ask for the preferred mailing address.** Document the patient's preferred mailing address to receive the home test kit.
- **Ensure the patient understands** they must document the date of collection on the request and/or swab tube.

Check in with patient

- Two weeks after the consultation, have a staff member at your clinic make a follow up call to check in with the patient and encourage them to complete the sample if they haven't done so.
- If a patient expresses that they no longer wish to complete the sample at home, offer an appointment to discuss a self-collected HPV test at the practice, or a clinician-collected test.

Follow up of results

- NCSP Guidelines for the management of screen-detected abnormalities, screening in specific populations and investigation of abnormal vaginal bleeding are available at <https://www.cancer.org.au/clinical-guidelines/cervical-cancer-screening>
- If HPV is detected, discuss appropriate management pathways according to NCSP guidelines, including further investigations and referral to colposcopy (if required). Ensure the person understands and is an active participant in this process.
- Sensitively discuss any concerns the patient may have about attending for a speculum examination or a colposcopy.
- Offer ongoing support to patient and link with external support services for example, Cancer Council helpline 13 11 20.

CONTACT US:

Contact the VCS Pathology Liaison Physician Team for queries about cervical screening, including home based self-collection on (03) 9250 0309 or via email LiaisonTeam@acpcc.org.au