

Last Name	First	MI	DOB	Referring Clinic		
	e 🗖 Medicare/Medicaid 🔽	10ther	Date of Cervical Screening:			
Payee: NWWP Private Insurance Medicare/Medicaid Other Date of Cervical Screening: CERVICAL Diagnostic Procedures						
CERVICAL DIAGNOSTIC PLOCEDULES						
	Results:		Recommendations			
Date requested	□ Negative (WNL) □ Inflammation/Infe	ection/HPV	□ Follow routine scre □ Short term follow	eening		
Date performed	 Other abnormality Not satisfactory 		Colposcopy directe	•		
Location	□ Unknown □ Refused/Not com	nleted	Cold Knife Cone			
Results date		pieceu	 Other biopsy Gynecologic consu 			
Notified date			, <u>-</u>	lation		
Referred date						
Endocervical Curettage (ECC) (alone) Results: Recommendations:						
Date requested	Results: Negative (WNL)		□ Follow routine scre			
	HPV/Condylomata	a/Atvnia	□ Short term follow	-		
Location	\square CIN-1	a, ricypia	Colposcopy without			
	CIN-2		□ Colposcopy directe			
Date performed	□ CIN-3/CIS		Cold Knife Cone	. ,		
	Invasive cervical	carcinoma				
Results date	Low grade SIL		Other biopsy			
	High grade SIL		Gynecologic consu	Itation		
Notified date	Other					
	□ No tissue present					
	Refused/not done	5	Referred date			
Colposcopy – with 🗌 biop	Results:		Recommendations			
Date requested	□ Negative (WNL)		□ Follow routine scre			
	HPV/Condylomata	a/Atynia	□ Short term follow			
Location	\Box CIN-1	аласуріа	Colposcopy without			
	\square CIN-2					
Date performed	CIN-3/CIS		Cold Knife Cone			
	□ Invasive cervical	carcinoma				
Results date	Low grade SIL		Other biopsy			
	High grade SIL		Gynecologic consu	Itation		
Notified date	Other					
	□ No tissue present					
	Refused/not done	2	Referred date			
Cold Knife Cone (CKC) Results: Recommendations:						
Date requested	Negative (WNL)		Recommendations Follow routine screen			
	HPV/Condylomata	a/Atynia	□ Short term follow	•		
Location	\Box CIN-1		Colposcopy without	•		
	\square CIN-2		Colposcopy directe			
Date performed	CIN-3/CIS		\square ECC	. ,		
	Invasive cervical	carcinoma	LEEP			
Results date	Low grade SIL		Other biopsy			
	High grade SIL		Gynecologic consu	Itation		
Notified date						
	No tissue present Refused/not done		Referred date			

CERVICAL Diagnostic Procedures, Continued						
Date requested Location Date performed Results date Notified date	sults: Negative (WNL) HPV/Condylomat CIN-1 CIN-2 CIN-3/CIS Invasive cervical Low grade SIL High grade SIL Other No tissue presen Refused/not dom	a/Atypia carcinoma t	Recommendations: Follow routine screening Short term follow up months Colposcopy without biopsy Colposcopy directed biopsy ECC Cold Knife Cone Other biopsy Gynecologic consultation			
	sults:		Recommendations:			
Date requested	Negative (WNL) HPV/Condylomat CIN-1 CIN-2 CIN-3/CIS Invasive cervical Low grade SIL High grade SIL Other No tissue presen	a/Atypia carcinoma	 Follow routine screening Short term follow up months Colposcopy without biopsy Colposcopy directed biopsy ECC Cold Knife Cone LEEP Gynecologic consultation 			
	Refused/not don		Referred date			
		anagement				
	11 5		 Work-up refused Lost to follow-up YES cancer after diagnostic tests 			
Final Diagnosis: Staging: Normal/benign reaction/inflammation AJCC Stage IV HPV/condylomata/atypia Unstaged CIN-1/mild dysplasia (biopsy diagnosis) Unknown stage CIN-2/moderate dysplasia (biopsy diagnosis) Summary local CIN-3/severe dysplasia/CIS (stage 0) or Adenocarcinoma in Situ Summary regional (AIS) (biopsy diagnosis) Summary distant Invasive Cervical Carcinoma Summary distant Low grade SIL High grade SIL Other: Other:						
Treatment Status:						
□ Treatment started □ Treatment pending □ Treatment not needed			 Treatment refused Lost to follow-up 			
Provider Signature: Date:						
		Navigation				
Date of initial phone call Date of second phone call Date of initial letter	Initials: Initials: Initials:	Notes:				
Date of certified letter Date of home visit	Initials: Initials:	Signature:	Date:			
Patient lost to follow-up		Signature:	Dale:			