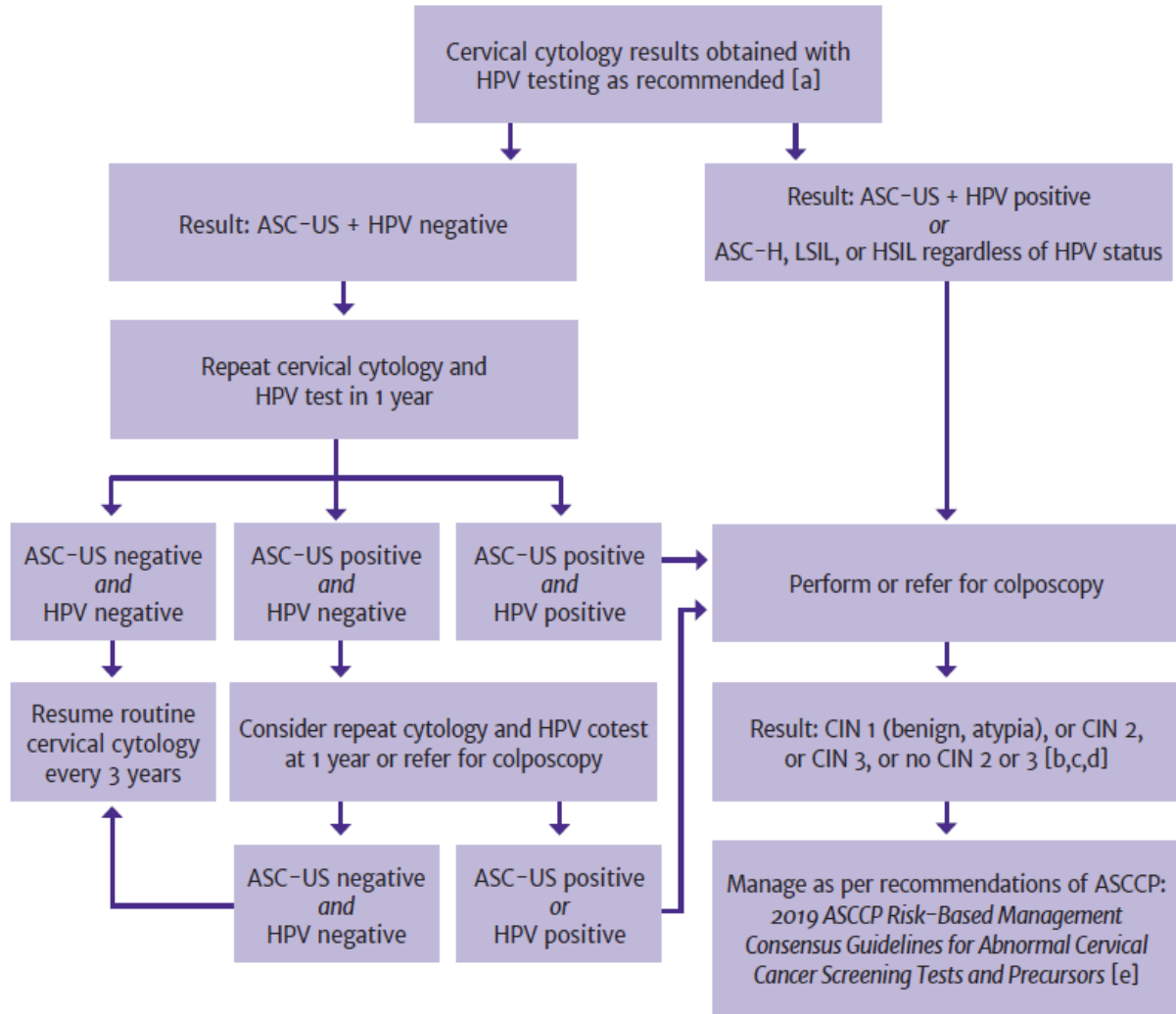




Screening for Cervical Dysplasia and Cancer in Adults With HIV

March 2022

Figure 1: Follow-Up for Abnormal Cervical Cytology Results in Patients With HIV



Abbreviations: ASC-H, atypical squamous cells, high-grade squamous intraepithelial lesion cannot be excluded; ASC-US, atypical squamous cells of undetermined significance; ASCCP, American Society for Colposcopy and Cervical Pathology; CIN, cervical intraepithelial neoplasia; HPV, human papillomavirus; HSIL, high-grade squamous intraepithelial lesion; LSIL, low-grade squamous intraepithelial lesion.

Notes:

- a. In patients <30 years old, HPV reflex testing should be performed in patients with a positive cervical cytology result; in patients ≥30 years old, HPV cotesting is recommended.
- b. If cotesting was not performed, then HPV reflex testing is indicated following an abnormal cytology result.
- c. For non-high-grade CIN, refer to ASCCP recommendations for management of LSIL (CIN 1) preceded by ASC-H or HSIL cytology.
- d. In patients <25 years old, immediate excision is not recommended; in nonpregnant patients ≥25 years old, the decision regarding expedited treatment versus colposcopy with biopsy should be based on shared decision-making between the patient and clinician.
- e. Perkins RB, Guido RS, Castle PE, et al. 2019 ASCCP risk-based management consensus guidelines for abnormal cervical cancer screening tests and cancer precursors. *J Low Genit Tract Dis* 2020;24(2):102-131. [PMID: 32243307]