

BACKGROUND

Longer colposcopy referral wait-times may cause anxiety and delayed diagnosis.

AIM

To assess referrals/attendances, targets/standards and a 'priority-triage' initiative at an Australian diagnostic colposcopy service for asymptomatic patients during the Covid-19 pandemic.

Targets (aligned with national guidelines):

- punch biopsy following HSIL cytology and transformation zone visualised ('biopsy-rate'-target >90%)
- colposcopies with biopsy suitable for histology (target >90%)
- referral to colposcopy wait-time <31 days (target >90%).

Priority-triage initiative:

(introduced 1-10-2020 amid the Covid-19 pandemic to ensure appointment access)

- twice-weekly triage of referrals
- continued within-the-month bookings for pHSIL/HSIL referral cytology
- updated referral resources
- staff education/in-service

METHOD

Retrospective audit of Family Planning NSW ('FPNSW') colposcopy attendances (1/2/2020-28/2/2022) following referral cytology with possible/confirmed High-Grade Squamous Intraepithelial Lesion (pHSIL/HSIL)/abnormal endocervical-glandular cells of uncertain-significance (AEGCUS).

RESULTS

ATTENDANCES;

71
MEDIAN AGE
33-YEARS (21-61YRS)

61%
BORN IN
AUSTRALIA

&73%
WITH A
MEDICARE
CARD

37%
INTERNALLY
REFERRED (CST AT FPNSW)

21%
SMOKERS

3%
IMMUNE
DEFICIENCY

0% PREGNANT

ATTENDANCES (TOTAL) FOLLOWING ANY CYTOLOGY:

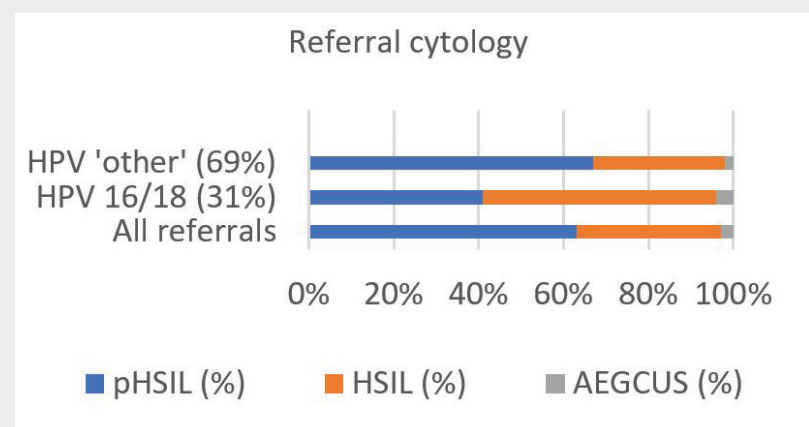
Before 'priority triage': 22.8/month

After 'priority triage': 16.8/month

ATTENDANCE FOLLOWING PHSIL/HSIL/AEGCUS CYTOLOGY:

Before 'priority triage': 2.3/month

After 'priority triage': 3.1/month

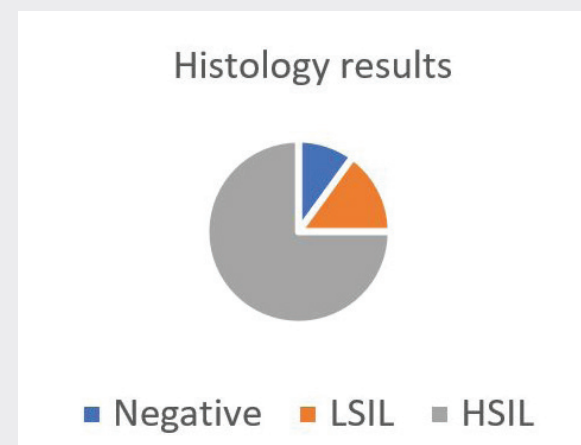


BIOPSY-RATES: 20/22 (91%)

HISTOLOGY-SUITABLE BIOPSIES: 53/55 (96%)

HISTOLOGY

10% Negative, 15% LSIL, 75% HSIL. 0% Cancer/Glandular abnormalities



WAIT TIME TARGET: MET IN 71%

Some rescheduled and attended after their initial booking date

MEDIAN WAIT TIMES:

Before 'priority triage': 25 days (IQR=16-36)

After 'priority triage': 21 days (IQR=15-35)

CONCLUSIONS:

Following 'priority-triage', wait-times did not increase for higher-risk referrals. Nationally recognised quality targets (biopsy number, histology-suitable biopsies) were achieved. This audit provides a template for colposcopy quality-assurance activities in Australian non-hospital settings.