

# DAHL-CHASE DIAGNOSTIC SERVICES

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## GYNECOLOGIC CYTOPATHOLOGY REPORT

Patient: **Test, Mrs. 10.0**  
Patient Address

Pathology Number: **G-15-23456**  
Date of Procedure: 08/03/2015  
Date of Accession: 08/03/2015 4:06:26 PM  
DOB: Sex: F

To: Provider Name  
Provider Address  
Provider Phone Number

Ordering clinician:  
Reports to:

SPECIMEN SOURCE: Vagina                      METHODOLOGY: SurePath Pap Test  
SPECIMEN DESCRIPTION: Vial with correct device(s)  
REASON FOR PAP AND/OR HPV TEST: Routine  
HISTORY AND THERAPY: Previous pap date: 07/31/14 (N); Adeno CA of cervix  
MENSTRUAL STATUS: Hysterectomy no cervix

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### SPECIMEN ADEQUACY:

Satisfactory for evaluation.

### GENERAL CATEGORIZATION:

Negative for Intraepithelial Lesion or Malignancy.

### INTERPRETATION:

Negative for intraepithelial lesion or malignancy.

Fungal organisms morphologically consistent with *Candida* sp.

### EDUCATIONAL NOTES AND SUGGESTIONS:

See <http://www.asccp.org/consensus.shtml> for consensus management guidelines.

Cytotechnologist Cytology Interpretation electronically signed 08/04/2015

Cervical cytology is a screening test primarily for squamous cancers and precursors, not adenocarcinoma or other malignancies, and has associated false-negative and false-positive results. It is not a diagnostic procedure and should not be used as the sole means of detecting cervical cancer. Positive results should be confirmed prior to definitive therapy. Technologies such as liquid-based preparations and HPV testing may decrease but will not eliminate all false-negative results. Regular sampling and follow-up of unexplained clinical signs and symptoms are recommended to minimize false negative results. The Pap test is neither sensitive nor specific for the screening of endometrial lesions and should not be used as a follow-up in patients with clinical suspicion of endometrial pathology.