A close up of a logo

Description automatically generated

Fill out and send to: info@ncspregister.health.nz

**Hysterectomy information required to update the NCSP Register**

Some people do not have hysterectomy status recorded on the National Cervical Screening Programme (NCSP) Register, particularly if the hysterectomy occurred historically long ago or overseas.

You can use this form to notify the NCSP register about a person’s hysterectomy status. This will create a record of the hysterectomy and adjust future screening recommendations.

The NCSP must confirm the following information before updating hysterectomy status to ensure that participants can safely stop screening.

* Confirmation that the cervix was completely excised
* Confirmation that cervical histology was normal

The information you provide will be used by the NCSP to assess whether a person's hysterectomy status can be updated.

The NCSP will contact you if the information you have provided is not complete or sufficient to update the hysterectomy status, or if the recommendation is that further testing is required.

**Required information:**

|  |  |
| --- | --- |
| **NHI** | *Click here to add text* |
| **Name** | *Click here to add text* |
| **Date of birth** | *Click here to add text* |

The following will be accepted by the NCSP Register as evidence of total hysterectomy, in order of preference:

**Pathology report of hysterectomy specimen** **attached**

*If not available:*

**Specialist letter attached** **confirming:**

1. the date of total hysterectomy
2. the histology of the cervix in the hysterectomy specimen

*If not available:*

If documentation is not available and the hysterectomy was performed in NZ

**Date of total hysterectomy**

Date: *Click here to add text*

**Hospital where total hysterectomy was performed**

Details: *Click here to add text*

*If no documentation is available, a clinical examination is recommended:*

**Confirmation of clinical examination**

I confirm I have examined the person above and no cervix is present.

Date of clinical examination: *Click here to add text*

Note: The Clinical Practice Guidelines recommend an HPV test if the screening history was unknown or if the person was unscreened prior to hysterectomy. If HPV is not detected the patient can cease screening. For other clinical scenarios please see Section 10 of the Clinical Practice Guidelines.

**Options**

*If no documentation is available and clinical examination is declined*

The participant has the option to continue or decline further screening. If they choose to decline further screening they will not receive further notifications from the NCSP-Register and will no longer be tracked by the NCSP-Register (i.e. they will not show up as being due for cervical screening).

Cervical screening should continue if the cervix was not completely excised e.g. sub-total hysterectomy.

Other follow up tests may be recommended if:

* their screening history was abnormal
* the histology of the cervix was abnormal

Please see Section 10 of the Clinical Practice Guidelines for further information.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** | *Click here to add text* | **Role Title:** | *Click here to add text* |
| **Signature:** | *Click here to add text* | **Date:** | *Click here to add text* |

**HPI-CPN number:** *click here to add text*

**Facility/Clinic name:** *click here to add text*

**Facility/Clinic email** *click here to add text*

**Facility/Clinic phone** *click here to add text*