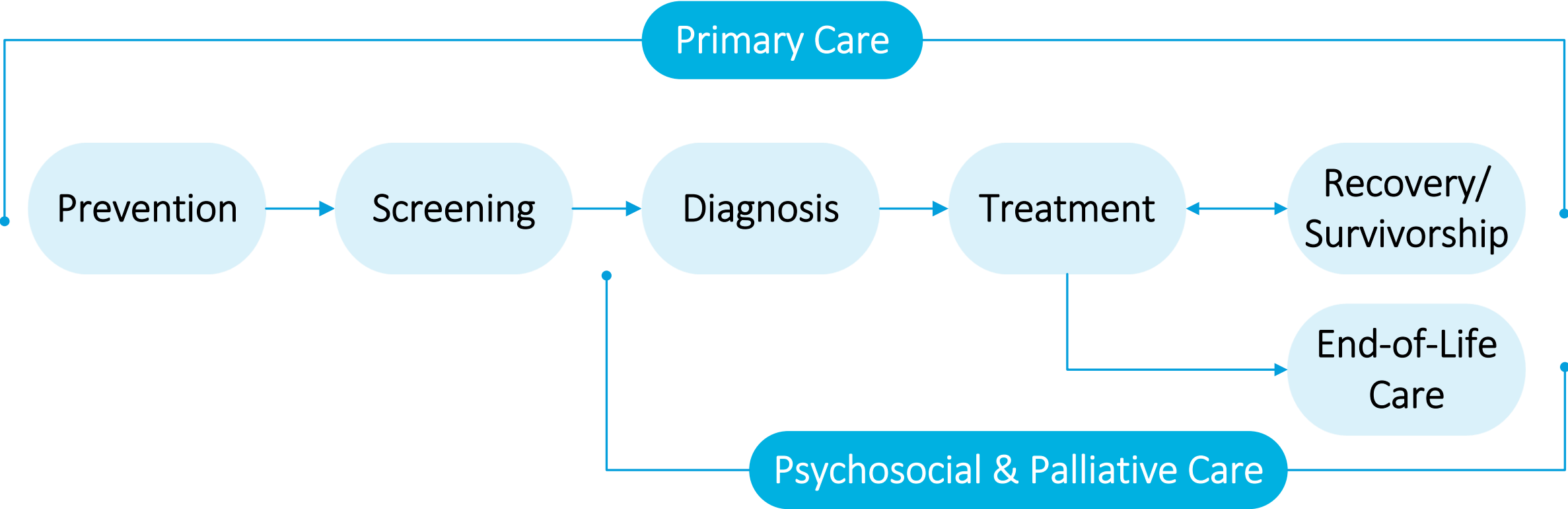


# Cervical Cancer Prevention and Screening Pathway Map

Version 2025.06



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**Ontario Health**  
Cancer Care Ontario

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## Target Population

The Ontario Cervical Screening Program (OCSF) screens people in Ontario who have a cervix, are ≥25 years of age, have ever been sexually active and are asymptomatic. This includes women, Two-Spirit people, transmasculine people, nonbinary people, pregnant people, postmenopausal people, people who have undergone a subtotal hysterectomy and retained their cervix and people who have had the HPV vaccine.

## Pathway Map Considerations

- Primary care providers play an important role in the cancer journey and should be informed of relevant tests and consultations. Ongoing care with a primary care provider is assumed to be part of the pathway map. Patients who do not have a primary care provider can use [Health811](#) any time to find a setting that performs cervical screening tests and can assist with follow-up.
- Throughout the pathway map, a shared decision-making model should be implemented to enable and encourage patients to play an active role in the management of their care. For more information see [Person-Centered Care Guideline](#) and [EBS #19-2 Provider-Patient Communication](#).\*
- Hyperlinks are used throughout the pathway map to provide information about relevant Ontario Health (Cancer Care Ontario) tools, resources and guidance documents.
- The term ‘health care provider’, used throughout the pathway map, includes primary care providers and specialists, e.g. family doctors, nurse practitioners, midwives and colposcopists.

## Pathway Map Legend

Colour Guide	Shape Guide	Line Guide
<div></div> Primary Care	<div></div> Intervention	<div></div> Required
<div></div> Palliative Care	<div></div> Decision or assessment point	<div></div> Possible
<div></div> Pathology	<div></div> Patient (disease) characteristics	
<div></div> Organized Diagnostic Assessment	<div></div> Consultation with specialist	
<div></div> Gynecologic Oncology	<div></div> Exit pathway	
<div></div> Radiation Oncology	<div></div> Off page reference	
<div></div> Medical Oncology	<div></div> Referral	
<div></div> Radiology		
<div></div> Gynecology		
<div></div> Multidisciplinary Cancer Conference (MCC)		
<div></div> Genetics		
<div></div> Psychosocial Oncology (PSO)		

## Pathway Map Disclaimer

This pathway map is a resource that provides an overview of the treatment that an individual in the Ontario cancer system may receive.

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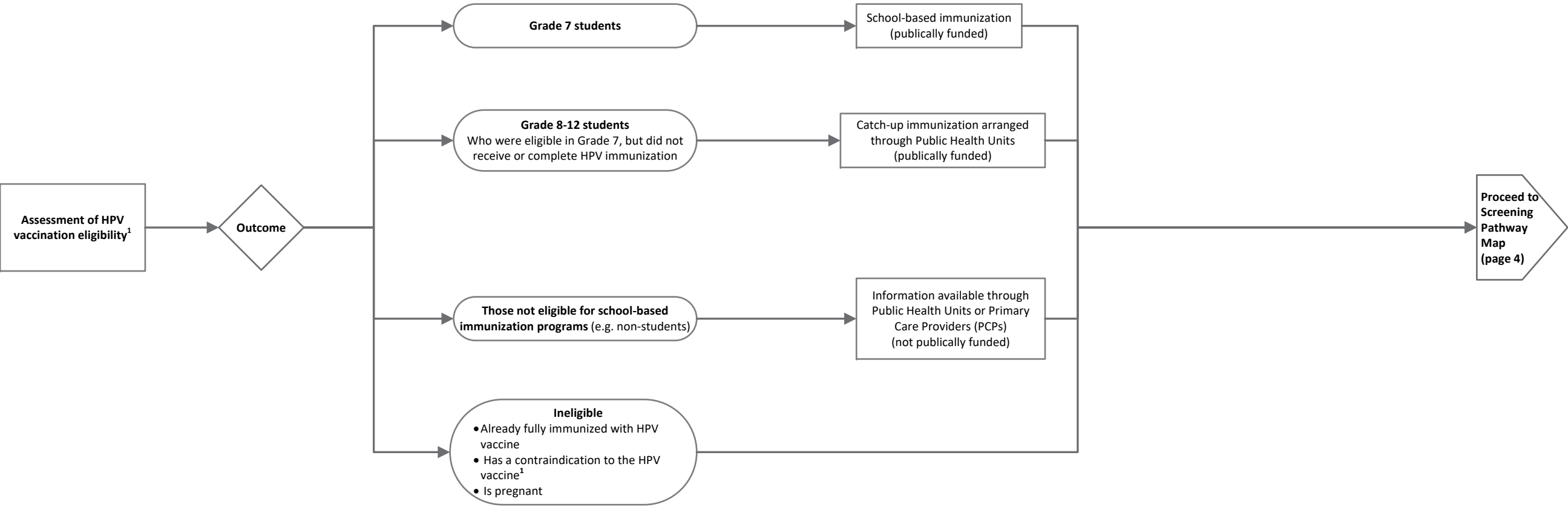
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This pathway map may not reflect all the available scientific research and is not intended as an exhaustive resource. Ontario Health (Cancer Care Ontario) and its content providers assume no responsibility for omissions or incomplete information in this pathway map. It is possible that other relevant scientific findings may have been reported since completion of this pathway map. This pathway map may be superseded by an updated pathway map on the same topic.

\* **Note.** [EBS #19-2](#) and [EBS #19-3](#) are older than 3 years and are currently listed as ‘For Education and Information Purposes’. This means that the recommendations will no longer be maintained but may still be useful for academic or other information purposes.

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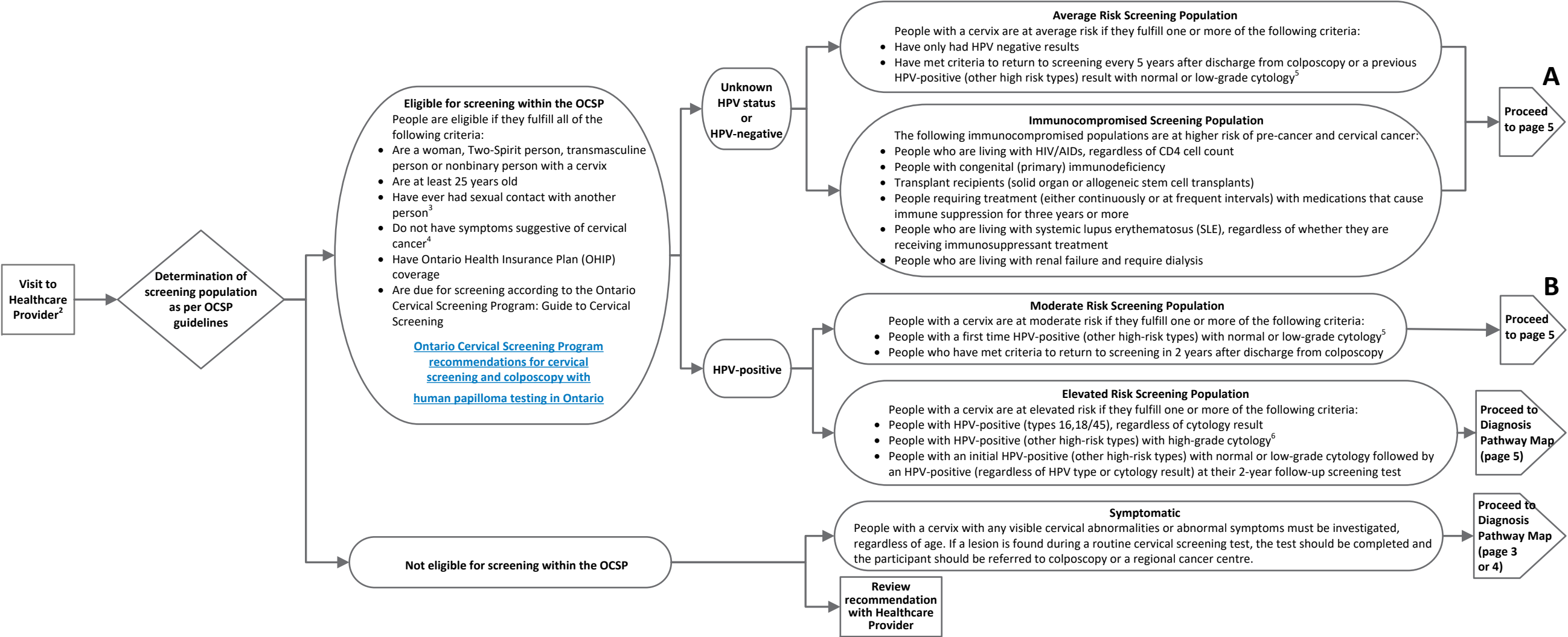


<sup>1</sup> For more information on Public Health Ontario’s vaccination recommendations, visit [Public Health Ontario Website](#) and the [Canadian Immunization Guide](#) for more details on contraindications and precautions.

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Ontario Cervical Screening Program (OCSF)

The Ontario Cervical Screening Program (OCSF) is a province-wide organized screening program run by Ontario Health (Cancer Care Ontario) that provides people with a cervix (including women and Two-Spirit, transmasculine and nonbinary people) with access to comprehensive, coordinated, high-quality cervical screening. **NOTE:** The OCSF applies to people in Ontario who have a cervix (including women, Two-Spirit people, transmasculine people and nonbinary people), are age ≥ 25, have ever been sexually active and are asymptomatic. Please note that these pathways do not apply to individuals resuming screening post-discharge from colposcopy. Please refer to [Cervical Screening](#) and [Ontario Cervical Screening Program recommendations for cervical screening and colposcopy with human papilloma testing in Ontario](#).



<sup>2</sup> Ontario Health (Cancer Care Ontario) sends eligible people for the Ontario Cervical Screening Program letters inviting them to get screened, informing them of their results, and reminding them when it is time to return for screening.

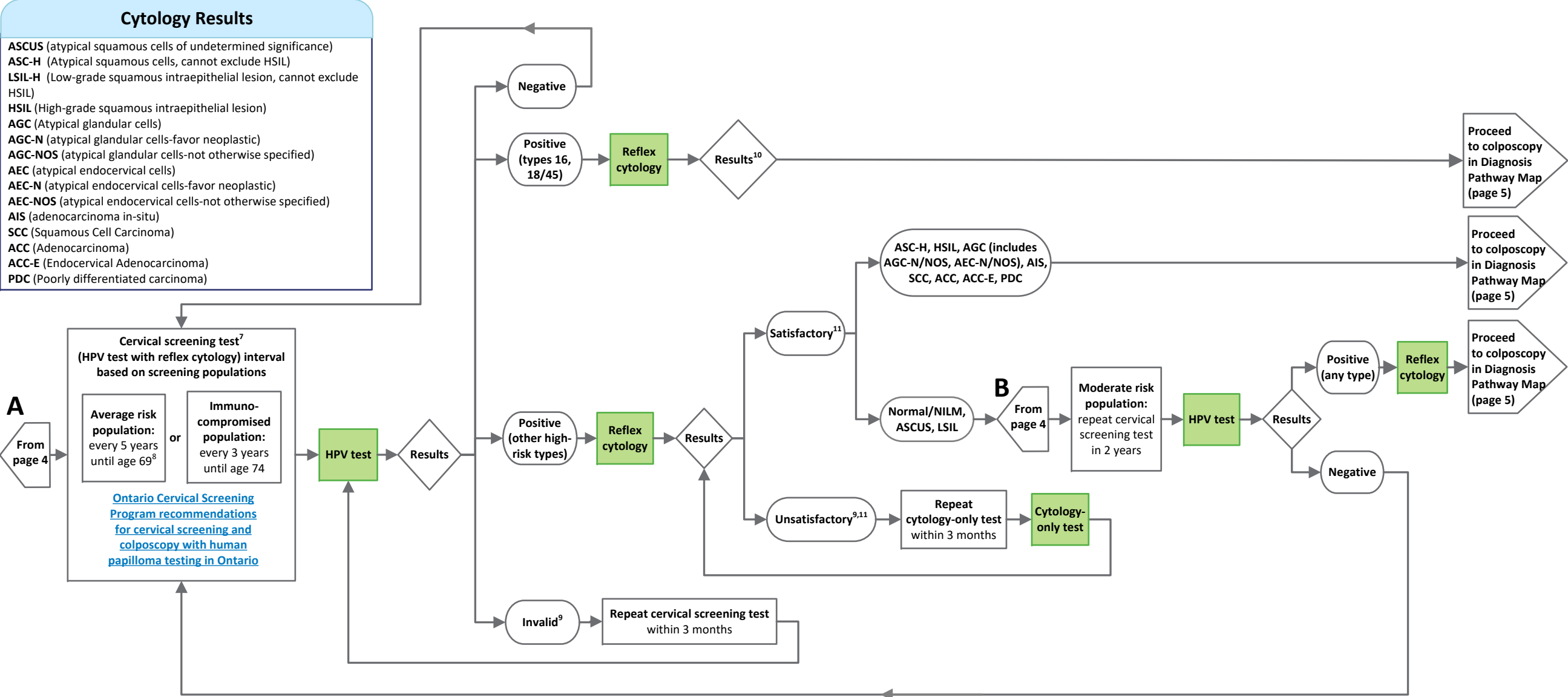
<sup>3</sup> Sexual activity is defined as any sexual contact with another person's genital (private parts). This contact can be with the hands, mouth or genitals.

<sup>4</sup> Symptoms suggestive of cervical cancer may include different bleeding or discharge (clear or yellow fluid) from the vagina (genital opening).

<sup>5</sup> Low-grade cytology includes the following result types: ASCUS = atypical squamous cells of undetermined significance; or LSIL = low-grade squamous intraepithelial lesion.

<sup>6</sup> High-grade cytology includes the following result types: HSIL = high-grade squamous intraepithelial lesion; ASC-H = atypical squamous cells, cannot exclude HSIL; LSIL-H = low-grade squamous intraepithelial lesion, cannot exclude HSIL; AGC = atypical glandular cells (includes AGC-N [favor neoplastic] and AGC-NOS [not otherwise specified]); AEC = atypical endocervical cells (includes AEC-N [favor neoplastic] and AEC-NOS [not otherwise specified]); AIS = adenocarcinoma in situ; ACC = adenocarcinoma; ACC-E = endocervical adenocarcinoma; PDC = poorly differentiated carcinoma; or SCC = squamous cell carcinoma.

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<sup>7</sup> If initial setting is inappropriate or the screening test is not available at initial visit, patient should be rebooked or redirected to undergo screening test.

<sup>8</sup> Most people can stop cervical screening if they have had 1 negative human papillomavirus (HPV) test result from age 65 to 69. In some circumstances people should continue to screen until age 74. Refer to: [Ontario Cervical Screening Program recommendations for cervical screening and colposcopy with human papilloma testing in Ontario](#).

<sup>9</sup> After two consecutive unsatisfactory cytology or invalid HPV results, refer to colposcopy.

<sup>10</sup> Regardless of result type, proceed to colposcopy in Diagnosis Pathway Map (page 4).

<sup>11</sup> Categorization of a cytology specimen as satisfactory versus unsatisfactory refers to the presence or absence of a sufficient number of squamous cells. It is not dependent on the presence or absence of transformation zone. Absence of transformation zone does not require repeat cytology.

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