

Most referrals for suspected cervical cancer adhere to the Scottish Referral Guidelines for Suspected Cancer, including the good practice point of undertaking a full pelvic examination, including speculum examination of the cervix.

The Scottish Referral Guidelines for Suspected Cancer provide clear guidance on symptoms and clinical features of possible Gynaecological cancers and urgency of referral:

Urgent Suspicion of Cancer Referral - Cervical cancer:

- Any woman with clinical features (vaginal discharge, postmenopausal, postcoital or persistent intermenstrual bleeding) and abnormality suggestive of cervical cancer on examination of the cervix

Good Practice Point:

A full pelvic examination, including speculum examination of the cervix, should be carried out in women presenting with:

- significant alterations in their menstrual cycle
- intermenstrual bleeding
- postcoital bleeding
- postmenopausal bleeding
- vaginal discharge, or
- pelvic pain

The patient journey could be improved if this clinical information is available to guide referral priorities, vetting and timely diagnosis.

Further information pertinent to referrals for possible cervical cancer includes previous screening history and smoking status. Local data shows the majority of cases of cervical cancer are found in women who have defaulted from cervical screening.