

Well Woman HealthCheck Program – Breast and Cervical Cancer Screening Form

Contractor/Location: _____ Provider: _____

Last Name: _____ First Name: _____ DOB: ____ / ____ / ____

BREAST SCREENING

CERVICAL SCREENING

Has the patient presented with breast symptoms?

- YES
- NO
- UNKNOWN

Clinical Breast Exam Date: ____ / ____ / ____

- 1 Normal exam
- 2 Benign finding
- 3 Bloody or serous nipple discharge*
- 4 Discrete palpable mass (suspicious for cancer)*
- 5 Discrete palpable mass (previously diagnosed as benign)
- 6 Nipple or areolar scaliness *
- 7 Not done – normal CBE in past 12 months
- 8 Not done – other or unknown reason
- 9 Refused
- 10 Skin dimpling or retraction *
- 11 Not done – normal CBE in last 12 months

Previous mammogram?

- YES Date: ____ / ____ / ____
- NO
- UNKNOWN

Mammography Date: ____ / ____ / ____

Indication for mammogram:

- 1 Routine screening mammogram
- 2 Cervical record only, breast services not done
- 3 DX referral
- 4 Mammogram not done, CBE only or proceeded directly to DX
- 5 Symptoms, abnormal CBE or previous abnormal mammogram

Mammography Type

- 77055 Diagnostic Mammogram Unilateral – Conventional
- 77056 Diagnostic Mammogram Bilateral – Conventional
- 77057 Screening Mammogram Bilateral – Conventional
- G0202 Screening Mammogram Bilateral – Digital
- G0204 Diagnostic Mammogram Bilateral – Digital
- G0206 Diagnostic Mammogram Unilateral – Digital

Mammography Results

- 1 Negative (BI-RADS 1)
- 2 Assessment is incomplete, need additional imaging (BI-RADS 0) *
- 3 Benign finding (BI-RADS 2)
- 4 Film comparison required (BI-RADS 0)
- 5 Highly suggestive of malignancy (BI-RADS 5) *
- 6 Result unknown, presumed abnormal, non-program funded
- 7 Probably benign (BI-RADS 3)
- 8 Result Pending
- 9 Suspicious abnormality – consider biopsy (BI-RADS 4) *
- 10 Unsatisfactory

*** Work-up**

- 1 Needed or planned
 - Additional mammographic views (diagnostic)
 - Surgical consult
 - Ultrasound
- 2 NOT needed/planned, follow/return to routine screening
 - Annual Short term Months _____
- 3 Not yet determined

Has the patient had a hysterectomy?

YES NO

If yes, is the cervix present?

YES NO

Was the hysterectomy performed due to CIN or invasive cervical cancer?

YES NO

Previous pap test?

- YES Date: ____ / ____ / ____
- NO
- UNKNOWN

Pelvic Exam

Date: ____ / ____ / ____

- 1 Normal
- 2 Abnormal – not suspicious for cancer
- 3 Abnormal – suspicious for cancer
- 4 Not done – normal pelvic exam in past 12 months
- 5 Not done – other or unknown reason
- 6 Not indicated or not needed
- 7 Refused

Pap Test

Date: ____ / ____ / ____

Indication for Pap Test:

- 1 Routine Pap test
- 2 Breast record only, cervical services not done
- 3 DX referral
- 4 Pap test not done, proceeded directly to diagnostic or HPV test
- 5 Patient under surveillance for a previous abnormal test
- 6 Unknown

Specimen Type

Pap Test Adequacy

- 88142 Liquid Satisfactory
- 88164 Conventional Unsatisfactory
- 88175 Liquid and manual rescreening

Pap Test Findings:

- 1 Negative for intraepithelial lesion or malignancy
- 2 Adenocarcinoma *
- 3 AGC (Atypical Glandular Cells) *
- 4 AIS (Adenocarcinoma in situ) *
- 5 ASC-H (Atypical squamous cells cannot exclude HSIL) *
- 6 ASC-US (Atypical squamous cells of undetermined significance)
- 7 High grade SIL *
- 8 Low grade SIL / HPV *
- 9 Result unknown, presumed abnormal, non-program funded
- 10 Result pending
- 11 Squamous cell carcinoma *

HPV Test

CPT Code - 87624

Date: ____ / ____ / ____

- Positive Negative Test not done

*** Diagnostic Work-up**

- 1 Planned
 - Colposcopy with biopsy and/or ECC
 - Gynecological consult
 - Diagnostic LEEP (needs prior authorization)
 - Endometrial biopsy
- 2 NOT planned
 - Pap 1 yr 2 yr 3 yr 5 yr Short term Months _____
- 3 Not yet determined

Clinician's Signature _____

Date _____

- OFFICE VISIT**
- 99201 – New Patient 10 min
 - 99202 – New Patient 20 min
 - 99203 – New Patient 30 min
 - 99211 – Established Patient 5 min
 - 99212 – Established Patient 10 min
 - 99213 – Established Patient 15 min
 - 99214 – Established Patient 25 min