



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

May 6, 1998

ADMINISTRATIVE ORDER

No. 19-A s. 1998

**SUBJECT: The National Policy on Cyto-screening in the Cervical Cancer Control Program, in particular, designation of Medical Technologists as cyto-screeners**

I. Rationale

In the Philippines, cancer of the cervix uteri, is the second most common cancer among women after breast cancer. If both sexes are considered it ranks as the fourth most common cancer. The average annual age—standardized rate was 22.5 per 100,000 (1983-1987) population-based Manila and Rizal Cancer Registry).

It has been demonstrated internationally that 90% of squamous cell carcinoma, which accounts for 80-85% of invasive cervical cancers, can be prevented through identification of pre-cancerous lesions by effective screening process and appropriate management of screen detected abnormalities. The Philippine Cervical Control Program utilizes Pap Smear as its screening method in detecting early malignant lesions of the cervix uteri. Cervical cancer prevention efforts, however have had limited success, due to the following reasons: limited screening services, inappropriate screening approach, inadequate health provider training, inadequate cytology services, inadequate supplies, inadequate follow-up diagnostic services, and cultural obstacle to providing services.

II. Objective

The objective of cytoscreening (Paps Smear) in the Cervical Cancer Control Program is to screen as many women at risk as possible for cervical cancer.

III. Strategies

The screening program, shall be implemented in primary and secondary health care facilities, and smear collection should not be limited only to physicians but should be undertaken by other health service providers who are trained on the procedure and on gender sensitivity.

The screening program shall be supported by referral laboratories which shall provide accurate

cytological interpretation of smears.

#### IV. Policy

The laboratories of the Department of Health Retained Hospitals, as well as, the Provincial Hospitals shall serve as the referral laboratories for the interpretation of Paps Smears. Recognising, however that these hospitals do not have enough Pathologists to undertake the task, Medical Technologists are hereby designated as cytoscreeners and are authorized to interpret obstetrics and gynecologic Paps Smears provided that:

a). They shall be under the supervision of an Anatomical Pathologist assigned in these hospitals.

b). They shall be trained on the following competencies:

1). Understanding and application of the principles of cytology of OB—GYN smears in a laboratory setting;

2). Preparation of technically acceptable stained smears obtained from the cervix and the vagina;

3). Recording, in a systematic manner, all smears referred to the section of cytology;

4). Understanding the principles of staining using the Papanicolaou—

5). Interpretation of these smears; recognizing and describing all normal and abnormal cells exfoliated from the female genital tract:

\* All abnormal cells that may exfoliate from the female genital tract;

\* All grades of abnormal cells from mild dysplasia (Cervical Intraepithelial Neoplasm Grade I) to the obvious malignant cells;

\* Organisms that may be infecting the genital tract and their accompanying inflammatory reactions.

6). Correlation of normal and abnormal smears with their histologic counterparts;

7). Correlation of normal smears with menstrual cycle or with exogenous hormone intake;

8). Referring abnormal smears to the attending Pathologist;

9). Preparation of a concise report, using acceptable standards of reporting.

#### V. Effectivity

This order shall take effect immediately.

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Secretary of Health