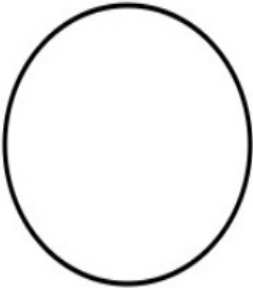


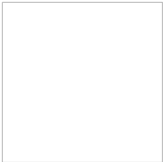


## Colposcopy Form

|              |   |             |               |   |                    |
|--------------|---|-------------|---------------|---|--------------------|
| Patient Name | : | Reshma Siya | Emirates ID   | : | 784-6478-3648736-8 |
| File No      | : | 4           | DOB           | : | 1995-05-21         |
| Gender       | : | Female      | Doctor's Name | : | Gyenec Test        |
|              | : |             | Date          | : | 2024-02-29         |

|  |   |   |    |  |                          |   |    |
|--|---|---|----|--|--------------------------|---|----|
| NURSE TRIAGE:  |   | H:                                      | W: | BP:                                      | T:                       | P:  | R: |
| Allergies:   |   |   |    |  |                          |   |    |
| Smoker?  |   | <input type="radio"/> Yes               |    |  | <input type="radio"/> No |   |    |
| HISTORY:   |   |   |    |  |                          |   |    |
| Patient Age :28  |   | Reason for Colposcopy                   |    |  |                          |   |    |
| Date and results of last Pap   |   | 29-February-2024                        |    |  |                          |   |    |
| Is Patient on: ASA?Coumadin?Other anticoagulant/antiplatelet med?    |   |   |    |  |                          |   |    |
| Allergic to:   |   | <input type="checkbox"/> Latex?         |    | <input type="checkbox"/> Iodine?         |                          | <input type="checkbox"/> Aspirin or NSAIDs? |    |
| Date of Last Normal Menses   |   | 29-February-2024                        |    | Method of contraception                  |                          |   |    |
| G  | P | Pregnant now?                           |    | <input type="radio"/> Yes                |                          | <input type="radio"/> No                    |    |
| History of previous colposcopy? Results?                             |   |   |    |  |                          |   |    |
| Previous cervical cryotherapy, cone biopsy or LEEP?                  |   |   |    |  |                          |   |    |
| History of (circle):   |   | <input type="checkbox"/> Genital warts? |    | <input type="checkbox"/> HIV?            |                          | <input type="checkbox"/> HPV?               |    |
| Premedication(circle):   |   | <input type="checkbox"/> None           |    | <input type="checkbox"/> ibuprofen 800mg |                          | <input type="checkbox"/> alprazolam 0.5mg   |    |
|  |   |   |    |  |                          | <input type="checkbox"/> Other              |    |
| PROCEDURE:   |   |   |    |  |                          |   |    |
| Vulvar/Vaginal findings  |   |   |    |  |                          |   |    |
| Satisfactory colposcopy?(entire TZ and extent of lesion visualized?) |   | <input type="radio"/> Yes               |    |  | <input type="radio"/> No |   |    |

|   |                                      |  |  |
|---|--------------------------------------|--|--|
|     |                                      | <p>Diagram Key:</p> <p>Original squamous epithelium = S</p> <p>Columnar epithelium = C</p> <p>Squamocolumnar junction = SCJ</p> <p>Nabothian cyst = N</p> <p>Gland opening = G</p> <p>Leukoplakia = L</p> <p>Acetowhite epithelium = AW</p> <p>Punctuation = P</p> <p>Mosaicism = M</p> <p>Atypical vessels = Av</p> |  |
| Cervical lesions/Biopsy sites :   |                                      |  |  |
| Location<br>(oâ€™clock)   |                                      | REID index<br>(see back of form)   |  |
| A:  |                                      |  |  |
| B:  |                                      |  |  |
| C:  |                                      |  |  |
| Endocervical sampling?  | <input type="checkbox"/> N/A         | <input type="checkbox"/> Cytobrush   | <input type="checkbox"/> Curettage   |
| COLPOSCOPIC IMPRESSION: (circle one - based on most severe lesion)                  | <input type="checkbox"/> Normal      | <input type="checkbox"/> Low Grade (CIN 1)   | <input type="checkbox"/> High Grade (CIN 2 or 3) <input type="checkbox"/> Cancer |
| PATHOLOGY REPORT (Histology): (circle most severe finding)                          | <input type="checkbox"/> Normal      | <input type="checkbox"/> Low Grade (CIN 1)   | <input type="checkbox"/> High Grade (CIN 2 or 3) <input type="checkbox"/> Cancer |
| Do Pap results, colpo impression and path results all correlate within 1 CIN grade? | <input checked="" type="radio"/> Yes |  | <input type="radio"/> No   |
| FOLLOW-UP PLAN:   |                                      |  |  |

|   |   |   |
|---|---|---|
| Sign here, only if all of your questions have been answered to your satisfaction    |   |   |
| PATIENT   | WITNESS   | DOCTOR  |
|  |  |  |
| Patient Name<br>Reshma Siya<br>Date<br>2024-02-29                                   | witness Name<br>hghgj<br>Date<br>2024-02-29   | Gynec Test - Gynaecology (S6)<br>Date<br>2024-02-29                                   |