



## Kentucky Women's Cancer Screening Program (KWCSPP)

Eligibility: women • 21 or older • no health insurance • household income at or below 250% of federal poverty level

# Patient Navigator Phone Guidance



November 2020



**Kentucky Public Health**  
Prevent. Promote. Protect.

**Our Mission:** To improve the health and safety of people in Kentucky through **Prevention, Promotion, and Protection**

**Our Vision:** Healthier People...Healthier Communities.

**Our REACH Values:** Responsiveness Equity Accountability Collaboration Honesty



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### Table of Content

Welcome: KWCSPP Overview and Program Eligibility	page 3
Introduction	page 4
Reminder Calls to the Regularly Screened	page 5
Reminder Calls to the Never/Rarely Screened	page 7
Additional Tips for Cancer Screening Reminder Calls	page 10

### Appendix

<b>A. Response to Excuses</b>	<b>page 11</b>
<b>B. Talking Points</b>	<b>page 13</b>
<b>C. Screening Guidelines</b>	<b>page 14</b>
<b>D. KWCSPP Contacts</b>	<b>page 16</b>



## Kentucky Women's Cancer Screening Program (KWCSPP)

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### Welcome

#### KWCSPP Overview

The Breast and Cervical Cancer Mortality Prevention Act of 1990 (Public Law 101-354) established the Centers for Disease Control and Prevention's (CDC's) National Breast and Cervical Cancer Early Detection Program (NBCCEDP). The program provides grant awards to states for breast and cervical cancer screening exams to underserved women, including those who have low incomes or are members of racial and ethnic minority groups. The program operates in all 50 states, the District of Columbia, 6 U.S. territories, and 13 tribes or tribal organizations. Additionally, in 1990, legislation (KRS 214.554) established the Kentucky Women's Cancer Screening Program (KWCSPP) in the Department for Public Health, in the Division of Women's Health.

#### Program Eligibility

The KWCSPP provides breast and cervical cancer screenings, diagnostic follow-up services and case management for women:

- 21 years of age or older
- Household income at or below 250% of the federal poverty level
- Uninsured (no Medicare, no Medicaid and no private health insurance)

The Kentucky Department for Public Health's KWCSPP is the state branch of the NBCCEDP and is 100% funded by the CDC. The KWCSPP allocates awarded federal funds to local health departments who commit to provide KWCSPP services; to federally qualified health centers (FQHCs), FQHC Look-a-Like, Rural Health Clinics, and university based primary care clinics. KWCSPP allocations are determined annually based on a formula which includes the availability of funds, and the number of unduplicated KWCSPP clients seen in the previous calendar year. Reimbursements to health systems occur through contractual agreements approved by the Cabinet for Health and Family Services.





## Kentucky Women's Cancer Screening Program (KWCS)

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### Introduction

This guide was created to assist you, the patient navigator, in making cancer screening reminder calls for the Kentucky Women's Cancer Screening Program. Please remember this is ONLY a guide and the scripts are provided ONLY as examples. Take it and *make it your own*.

Screening reminder calls are usually one of **two types**:

- I. Reminder calls to the regularly screened - those who have been consistent with their care
- II. Reminder calls to the never/rarely screened – providing information and education on screenings

Within this guide you will find guidance and an example for making each type of call. You will be directed to other resources in this folder. The other resources are color-coded for your convenience.

### Sources

- <https://www.cdc.gov/cancer/nbcedp/pdf/prumannual.pdf>
- <https://gis.cdc.gov/Cancer/USCS/DataViz.html>
- [https://www.cdc.gov/cancer/breast/basic\\_info/mammograms.htm](https://www.cdc.gov/cancer/breast/basic_info/mammograms.htm)
- [https://www.cdc.gov/cancer/cervical/basic\\_info/screening.htm](https://www.cdc.gov/cancer/cervical/basic_info/screening.htm)
- <https://ncrt.org/resource/2019messagingguidebook/>



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## Kentucky Women's Cancer Screening Program (KWCSPP)

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### Patient Navigator Phone Guidance: Calls to the Regularly Screened

#### Reminder calls to the Regularly Screened

- Introduce yourself as the Patient Navigator with name of clinic.
- Share the **free** services you provide as a patient navigator, and how you hope to make the process of navigating the healthcare system simpler/less stressful for women. Patient Navigators can:
  - set up appointments
  - send reminders of appointments
  - provide information
  - assist with overcoming barriers (anything that stands in the way of a woman completing the cancer screening process), such as transportation difficulties or language barriers
- Let the woman know that she is due for a breast/cervical cancer screening.
  - Ask if she has any questions about the process/procedure
  - Share the added safety precautions being taken due to Covid-19
  - Offer to set up the appointment
  - Respond to excuses for *not* making a screening appointment  
(See: **A. Response to Excuses**)
  - Remind her to call you for assistance if she's unable to keep the appointment  
*\*The appointment might simply need to be rescheduled, but realize she might need assistance overcoming barriers*
- Make sure all client information is current, including mailing address. Verify this information with each contact.
- Make sure she also knows how to reach you.

#### Example: Reminder calls to the Regularly Screened

**PN:** Hello, woman's name. My name is \_\_\_\_\_, and I'm the patient navigator with name of clinic. How are you today?

**Woman:** (Allow woman time to respond)

**PN:** I will try not to take up much of your time, but your doctor/the clinic wanted me to get in touch with you. My job is to help you stay up-to-date on your breast/cervical cancer screenings. I will help guide you through the process, sort of like a partner to walk through it with you so you don't have any trouble getting the care you need. I can even help with scheduling your appointments. You don't pay for my services; patient navigation is provided as a *free* service.

Now for the reason I'm calling you: Our records show that your last mammogram, Pap/HPV was on date, so you are due to have another one. I want to give you a pat on the back for taking good care





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of yourself. I hope you will continue the wise decision to keep up with your cancer screenings, even though the country is still dealing with Covid-19. If you have concerns about making a screening visit during the Covid-19 pandemic, please know that extra precautions are being taken to keep you safe, such as [Name the things your clinic or contracted imaging service provider are doing for added safety](#).

I can go ahead and get you an appointment scheduled, if you would like.

**Woman:** *The woman may reply in one of these ways:*

- |  |
|--|
| 1. Allow you to make her appointment   |
| 2. Choose to make her own appointment  |
| 3. Say she doesn't want to be screened |

**PN:**

- |   |  |
|---|--|
| 1. Sure, I'll be glad to do that! What is your preferred location? <i>(You may need to let her know her choices.)</i> What are the best days/times for you?   |  |
| 2. Okay, but be sure to give me a call back to let me know when/where you have scheduled so I can assure your doctor you are getting it done. If you have any trouble, either making or keeping an appointment, let me know that too, and I'll be happy to help. As a patient navigator, I also help women who have difficulties getting to appointments; we can work together to find solutions. |  |
| 3. Do you mind sharing why you don't want to be screened? <i>*Depending on the woman's answer, you will need to find the appropriate response.</i><br>(See: <b>A. Response to Excuses</b> )   | <i>*If she indicates that she doesn't want to talk anymore:</i> <ul style="list-style-type: none"> <li>• Be respectful of her wishes.</li> <li>• Thank her for her time.</li> <li>• Remind her that you welcome a conversation if she changes her mind.</li> <li>• Make sure you leave your phone number.</li> <li>• Send her some information in the mail and your business card.</li> <li>• If she is agreeable, plan to call her back in a few months.</li> </ul> |

**PN (continues):** Do you have any questions?

Before I hang up, I would like to make sure I have the correct contact information for you. Is there a second phone number you would like to provide? Do you prefer calls or texts? What is your current mailing address?

I want to make sure you have my name and phone number too. Please call me if you have a question about breast/cervical cancer or the screening process, or if you need to cancel or re-schedule an appointment. Again, my name is \_\_\_\_\_. Here is my phone #: \_\_\_\_\_; the hours you can reach me are \_\_\_\_\_. I want to assure you that my PN services will not cost you anything, so please don't hesitate to call me. It has been nice talking with you, [woman's name](#); have a great day!





## Kentucky Women's Cancer Screening Program (KWCSPP)

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### Patient Navigator Phone Guidance: Calls to the Never/Rarely Screened

#### Reminder Calls to the Never/Rarely Screened

- Introduce yourself as the Patient Navigator with [name of clinic](#).
- Share the **free** services you provide as a patient navigator, and how you hope to make the process of navigating the healthcare system simpler/less stressful for women. Patient Navigators can:
  - set up appointments
  - send reminders of appointments
  - provide information
  - assist with overcoming barriers (anything that stands in the way of a woman completing the cancer screening process), such as transportation difficulties or language barriers
- **\*Share educational talking points about breast/cervical cancer screening**  
(See: **B. Talking Points**)
  - Let the woman know that she is due for a [breast/cervical](#) cancer screening.
  - **\*Give a simple description of the process for a [breast/cervical](#) cancer screening**
  - Ask if she has any questions about the process/procedure
  - Share the added safety precautions being taken due to Covid-19
  - Offer to set up the appointment
  - Respond to excuses for *not* making a screening appointment.  
(See: **A. Response to Excuses**)
  - Remind her to call you for assistance if she's unable to keep the appointment.  
*\*The appointment might simply need to be rescheduled, but realize she might need assistance overcoming barriers*
- Make sure all client information is current, including mailing address. Verify this information with each contact.
- Make sure she also knows how to reach you.

#### Example: Reminder Calls to the Never/Rarely Screened

**PN:** Hello, [woman's name](#). My name is \_\_\_\_\_, and I'm the patient navigator with [name of clinic](#). How are you today?

**Woman:** (Allow time for her to respond)

**PN:** I will try not to take up much of your time, but [your doctor/the clinic](#) wanted me to get in touch with you. My job is to help you stay up-to-date on your breast and cervical cancer screenings. I will help guide you through the process, sort of like a partner to walk through it with you, so you don't have any trouble getting the care you need. I can even help with scheduling your appointments. You don't pay for my services; patient navigation is provided as a *free* service.







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According to [breast/cervical](#) cancer screening guidelines, [breast/cervical](#) cancer screening should begin at age \_\_\_\_ ([Give the appropriate age for initiating screening, depending on whether you are talking about breast or cervical cancer screening](#)). (See: **C. Screening Guidelines**)

Screening is important because: [Educate the woman on breast/cervical cancer with a few chosen talking points](#) (See: **B. Talking Points**)

Now for the reason I'm calling you: Our records show that you are in the age group for which [breast/cervical](#) cancer screening is recommended, but you [haven't started screening yet/ you haven't had a screening for some time](#).

May I share little bit about what to expect from a [breast/cervical](#) cancer screening?

**Woman:** (*Allow time for an answer and respond appropriately. If she is already familiar with screenings, skip to the part that addresses a visit during the Covid-19 pandemic*)

**PN:** (*If indicated*) share information about the screening process:

**FOR A MAMMOGRAM:** You will be asked to undress from the waist up, so it is best to wear pants or a skirt rather than a dress to your appointment. The technologist will give you a gown to cover your upper body, and will only uncover one breast at a time as mammogram images, or x-rays, are taken of each breast. The breast will be gently squeezed between two plates of the mammogram machine for a few seconds at a time while x-rays are taken. For screening, usually two images are taken of each breast. When all images have been taken you will be able to get dressed and leave. Later, a radiologist (a doctor who specializes in reading x-rays) will look at your x-rays and write up a report, which your [doctor/nurse practitioner/physician's assistant](#) at this clinic will receive. Then someone here will contact you about your results.

**FOR A CERVICAL CANCER SCREENING:** You will be asked to undress from the waist down, but will be given a cover-up sheet.

Two screening tests can help prevent cervical cancer or find it early.

1. The Pap test (or Pap smear) looks for *precancers*, cell changes on the cervix that might become cervical cancer if they are not treated appropriately.
2. The HPV test looks for the virus ([human papillomavirus](#)) that can cause these cell changes

Both tests can be done at once in a doctor's office or clinic. During the test, the doctor will use a plastic or metal instrument, called a *speculum*, to widen your vagina. This helps the doctor examine the vagina and the cervix, and collect a few cells and mucus from the cervix and the area around it.

The cells are sent to a laboratory.

- If you are getting a Pap test, the cells will be checked to see if they look normal.
- If you are getting an HPV test, the cells will be tested for HPV. You will not get the results of your test that day. The lab will send your test results to your [doctor/nurse practitioner/physician's assistant](#) at this clinic and someone will contact you.

**PN (Continues):** Do you have any questions about the screening?







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**Woman:** (Allow time to respond)

**PN:** If you have concerns about making a screening visit during the Covid-19 pandemic, please know that extra precautions are being taken to keep you safe, such as [Name the things your clinic or contracted imaging service provider are doing for added safety](#).

I can go ahead and get you an appointment scheduled, if you would like.

**WOMAN:** The woman may reply in one of these ways:

- |  |
|--|
| 1. Allow you to make her appointment   |
| 2. Choose to make her own appointment  |
| 3. Say she doesn't want to be screened |

**PN:**

- |   |  |
|---|--|
| 1. Sure, I'll be glad to do that! What is your preferred location? (You may need to let her know her choices.) What are the best days/times for you?  |  |
| 2. Okay, but be sure to give me a call back to let me know when/where you have scheduled so I can assure your doctor you are getting it done. If you have any trouble, either making or keeping an appointment, let me know that too, and I'll be happy to help. As a patient navigator, I also help women who have difficulties getting to appointments; we can work together to find solutions. |  |
| 3. Do you mind sharing why you don't want to be screened? <i>*Depending on the woman's answer, you will need to find the appropriate response.</i><br>(See: <b>A. Response to Excuses</b> )   | <i>*If she indicates that she doesn't want to talk anymore:</i> <ul style="list-style-type: none"> <li>• Be respectful of her wishes.</li> <li>• Thank her for her time.</li> <li>• Remind her that you welcome a conversation if she changes her mind.</li> <li>• Make sure you leave your phone number.</li> <li>• Send her some information in the mail and your business card.</li> <li>• If she is agreeable, plan to call her back in a few months.</li> </ul> |

**PN (continues):** Do you have any questions?

Before I hang up, I would like to make sure I have the correct contact information for you. Is there a second phone number you would like to provide? Do you prefer calls or texts? What is your current mailing address?

I want to make sure you have my name and phone number too. Please call me if you have a question about breast or cervical cancer or the screening process, or if you need to cancel or re-schedule an appointment. Here is my phone #: \_\_\_\_\_; the hours you can reach me are \_\_\_\_\_. I want to assure you that my PN services will not cost you anything, so please don't hesitate to use them. It has been nice talking with you, [woman's name](#); have a great day!





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### Additional Tips for Screening Reminder Calls

- Greet the woman by name; call her by name again at the end of the call.
- Use a friendly voice, in a natural tone (not as if you are reading a script).
- Patients are more likely to agree to a screening if it is explained to them *why* cancer screening is important, instead of just being told, "You're due for a screening". (E.g. Cancer is a real risk, yet regular screening means earlier detection and a better chance for a cure; in the case of cervical and colorectal cancer screening, the screening can even *prevent* cancer!)
- Painting the picture of relief that comes with a normal screening, is an effective way to address the patient fear factor.
- Be prepared to respond to breast/cervical cancer screening related questions. If you do not know an answer to a question, let the caller know you will get back to her and refer the question to your supervisor.

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#### *Other resources:*

*American Cancer Society's 24/7 National Center Information Line: 1-800-227-2345*

*Kentucky Women's Cancer Screening Program (KWCSPP): 1-844-249-0708*

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- Note the woman's appointment date/time. Call her a day or two in advance to remind her. Inquire to see if she foresees any difficulty in keeping the appointment. (If she does, will she need help overcoming barriers, or does she simply just need to reschedule?)
- When an appointment is NOT made, mail educational materials and your business card --- within 5-7 days. (Studies have shown that waiting longer on a follow-up is not as effective.) Make a note for a callback in 2-3 months.



### Appendix

#### A. RESPONSE TO CANCER SCREENING EXCUSES

##### 1. My doctor didn't recommend it

Actually, because our clinic physicians and nurse practitioners agree that breast and cervical cancer screening is very important, I was hired just to help more women complete regular screening through this clinic. Your doctor (*or PA or APRN*) is aware that I am making these calls and he or she will get the results of your screening test(s).

##### 2. I don't need it

###### a. I don't have symptoms

Often there are no symptoms until the cancer has spread. The purpose of screening is to catch a cancer in its early stages, before you would otherwise know it is there, and when both the treatment options and the chance of a cure are much better.

*Did you know . . . Regular cervical cancer screening can prevent cancer. Abnormal/pre-cancerous cervical cells can be found and removed before cancer develops.*

###### b. I don't have a family history

While having a family history increases the risk of some types of cancer, like breast cancer, most of those diagnosed with it don't have a family history of the disease.

###### c. I won't get cancer

Even though we can sometimes tell which populations are more at risk, there is no way to know for sure which individuals will get cancer. Sometimes people who appear to be at low risk still develop cancer. The truth is, just being a woman puts you at risk for both breast and cervical cancer.

*Did you know . . . 1 in 8 women will receive a breast cancer diagnosis in her lifetime. Risk increases with age; most often breast cancer develops after age 50.*

###### d. I check my own breasts/ my doctor performs a breast exam on me

Being familiar with your own breasts is very important. That may help you discover an abnormality that shows up between screenings. However, mammograms can detect cancers that are still too small to feel. Early diagnosis improves the likelihood of a cure.

###### e. My screening has always been normal

I hope that your screenings will continue to be normal. However, screening guidelines apply to your age group, and new cancers can still develop. In case a cancer *has* developed, screening is a way to catch it early, before it spreads and becomes more difficult to treat.

*Did you know . . . In the case of cervical cancer screening, a cancer diagnosis might be prevented altogether. If pre-cancerous cells are found during a screening, they can be removed before cancer develops*

##### 3. I don't have time

I'm sure you are very busy, and medical appointments do take a little of your time, but taking the time for these very important cancer screenings might end up saving you time later ---- time you might otherwise have to spend on *more* medical appointments or longer hospitalizations and recovery from cancer found at a more advanced stage. You never know, taking the time to schedule a cancer screening might just *add* time to your *lifetime!*

### 4. I'm afraid

#### a. I might find out I have cancer

No one wants to find out they have cancer. However, if you do have cancer, learning about it early means that treatment can be started early, when both the treatment options and the chance of a cure are better. Moreover, know that we would walk each step with you, all the way to your first treatment appointment.

On the other hand, you may be relieved to learn that your cancer screening was normal. Getting regular cancer screenings can help calm your fears and make you feel more in control of your health.

#### b. I'm afraid it will hurt

Some women experience a little discomfort, but [mammograms/Pap or HPV tests](#) are not usually painful.

*Did you know . . . The mammogram is performed by pressing a breast between two plastic plates; it may cause a squeezing discomfort. Scheduling the mammogram when the breasts are less tender, such as right after a period, may help with the discomfort.*

*Did you know . . . It only takes a few minutes to collect the sample of cells from the cervix for the cervical cancer screening test(s). If a woman has any gynecological conditions (such as a vaginal dryness) that she worries might cause discomfort she should share her concerns with the healthcare professional, who can suggest ways to decrease the discomfort.*

#### c. I'm afraid of embarrassment

Embarrassment is a common feeling but healthcare professionals are sensitive to that and will only expose the parts of your body necessary for performing the test(s). You will be given a gown or sheet to wear in place of the clothes you remove

*Did you know . . . For a mammogram you only have to undress from the waist up so it's best to wear pants or a skirt, rather than a dress, to your appointment. Only the breast being x-rayed will be exposed. (Usually the technician is a woman but you can ask to make sure.)*

*Did you know . . . For a cervical cancer screening you will be asked to undress from the waist down, and will be given a sheet for covering up. The actual cervical screening takes only a few minute. If you prefer, ask that a woman perform your test. Cervical cancer screening tests are often able to prevent cancer!*

### 5. I can't make an appointment because . . . Any number of barriers might be presented here (e.g. no car, no insurance, no gas money, no childcare).

The PN will need to refer to his or her list of local resources for helping women overcome specific barriers.

**\*NOTE:** You may want to make additions to your list of excuses as you encounter more that are not listed here.

\*Adapted, in part, from <https://www.cdc.gov/cancer/nbccedp/pdf/prumannual.pdf>

### B. TALKING POINTS

#### BREAST CANCER:

- In both Kentucky and the United States, 1 in 8 women will receive a breast cancer diagnosis in her lifetime.
- Cancer is a real risk, yet regular screening means earlier detection and a better chance for a cure.
- A mammogram is the best way to find breast cancer early, when there are more treatment options and a better chance for a cure.
- **\*(For women age 50 and older)** Just being a woman is a risk factor, but risk increases with age. Most cases of breast cancer occur in women over the age of **50**.
- In women, breast cancer is the most frequently diagnosed cancer, after skin cancer, and the second leading cause of cancer deaths.
- Most cases of breast cancer occur among women with no family history of the disease.

#### CERVICAL CANCER:

- Kentucky has the highest incidence (new cases) of cervical cancer in the nation, and ranks 10<sup>th</sup> in cervical cancer mortality (death) rate.
- Nearly all cervical cancers are caused by human papillomavirus, or HPV, a common sexually transmitted infection that usually causes no symptoms.
  - HPV is so common that 80% of people have an HPV infection at some time in their life.
  - About 1 of 4 people in the U.S. are currently infected -- and they may not even know it.
  - An infected person can unknowingly infect others.
  - There is no cure for the human papillomavirus. However, a healthy immune system will usually clear the body of the HPV infection before it causes harm.
  - If HPV is not cleared from the body but lingers, it can cause cervical changes that if left untreated could become a cervical cancer.
- During a cervical cancer screening, HPV infection can be detected (with the HPV test), and/or abnormal or precancerous cervical cells can be found (with the Pap test) and removed before cancer develops. Therefore, the screening can actually *prevent* cancer!

### C. SCREENING GUIDELINES

#### I. Breast Cancer Screening Guidelines for Average Risk Women

##### GENERAL

There is slight variation in breast cancer screening guidelines among professional organizations. However, they can be summarized as follows:

- Mammography is the best way to screen for breast cancer.
- When to begin screening mammography varies with different guidelines, but all give an age within the 40-50 year-old age range.
- If you are over the age of 50, schedule a mammogram today!
- Repeat your screening mammogram every 1 or 2 years.
- Women at high risk for developing breast cancer may need to begin screening before age 40.
- Talk to your healthcare provider about when and how often to be screened.

##### UNITED STATES PREVENTIVE SERVICES TASK FORCE (USPSTF)

**Ages 40-49:** The decision to start screening mammography in women prior to age 50 should be an individual one. Women who place a higher value on the potential benefit than the potential harm may choose to begin biennial screening mammography between the ages of 40-49.

**Ages 50-74:** Women age 50-74 years of age should have biennial screening mammography.

**\*Clinical Breast Exam (CBE):** There is insufficient evidence to recommend for or against CBE.

##### AMERICAN CANCER SOCIETY (ACS)

**Ages 40-44:** Women between the ages of 40 and 44 years of age have the option to start screening with a mammogram every year.

**Ages 45-54:** Women 45 to 54 years of age should get mammograms every year.

**Ages 55 and older:** Women 55 years and older can switch to a mammogram every other year, or they can choose to continue yearly mammograms. Screening should continue as long as a woman is in good health and is expected to live at least 10 more years.

**\*Clinical Breast Exam (CBE):** CBE is not recommended for average-risk women at any age.

##### AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS (ACOG)

**Ages 25+:** Clinical Breast Exam (CBE)

- For women aged 25-39 years, CBE may be *offered* every 1-3 years
- For women aged 40 years and older, CBE may be *offered* annually

**Ages 40-74:** Mammography every 1-2 years:

- Should be *offered* beginning at age 40 yrs.
- Should be started no later than age 50 yrs.
- Should continue through age 74 yrs.

**Ages 75+:** Beyond age 75 years the decision to discontinue screening should be based on a shared decision-making process, between patient and provider, that includes a discussion of the woman's health status and longevity.



### C. SCREENING GUIDELINES

#### II. Cervical Cancer Screening Guidelines for Average Risk Women

##### GENERAL

Before the American Cancer Society released their 2020 cervical cancer screening guidelines, different professional organizations shared *consensus* guidelines. Now, however, cervical cancer screening guidelines, like breast cancer screening guidelines differ slightly among professional organizations. They can be summarized as follows:

- No one under the age of 21 years needs to be screened for cervical cancer.
- Cervical cancer screening can end after age 65 years *if* a series of prior tests were normal.
- Depending on the screening test used, if results are normal screening should be repeated every 3-5 years.
- Two different tests may be used for cervical cancer screening; one type of test may be used alone or both types of tests may be done together (Co-test):
  - Pap Test
  - HPV Test (Primary hrHPV)

##### UNITED STATES PREVENTIVE SERVICES TASK FORCE (USPSTF) & AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS (ACOG)

**Women ages 21-29 years:** Pap test (cytology) every 3 years

**Women ages 30 65 years:** Women in this age group have 3 screening options:

- Pap test (cytology) every 3 years
- Co-test (both Pap and HPV tests) every 5 years
- Primary hrHPV (high-risk type HPV test) every 5 years

**Women age 65 + years:** Women ages 65 years and older do not need screening if a series of prior tests were normal.

##### AMERICAN CANCER SOCIETY (ACS)

**Women Ages 25-65 years:** Women in this age group have 3 screening choices:

- HPV test every 5 years (preferred)
- Co-test (Pap and HPV) every 5 years
  
- Pap test every 3 years

**Women ages 65+ years:** Women in this age group do not need screening if a series of prior tests were normal.





## Kentucky Women’s Cancer Screening Program (KWCSPP)

Eligibility: women • 21 or older • no health insurance • household income at or below 250% of federal poverty level

### Division Contacts

Division of Women’s Health, Director  
Assistant Director

Jan Chamness  
Cindy Arflack

[jan.chamness@ky.gov](mailto:jan.chamness@ky.gov)  
[cindy.arflack@ky.gov](mailto:cindy.arflack@ky.gov)

### KWCSPP Contacts

Program Director  
Data Manager  
Clinical Coordinator  
Outreach Coordinator  
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**Thank you for being a part of the KWCSPP family!**



**Our Mission:** To improve the health and safety of people in Kentucky through **Prevention, Promotion, and Protection**

**Our Vision:** Healthier People...Healthier Communities.

**Our REACH Values:** Responsiveness Equity Accountability Collaboration Honesty