

5 INSTRUCTIONS FOR COMPLETION OF THE REQUEST FORM

The national HPV primary screening implementation guide recommends the universal implementation of GP electronic test requesting as an opportunity to improve the transportation of samples and improve the tracking of samples between the primary care collection points and the centralised laboratory.

5.1 Electronic requesting

All samples should be requested via the Gateshead Screening Service ICE system where possible. Please contact the Laboratory IT support team to set up electronic requesting in your practice/clinic.

Telephone 0191 445 6504

Email ghnt.pathsupport@nhs.net

5.1.1 To order an Primary HPV Test

To order a Primary HPV test from the Gateshead Screening Services ICE system you can either:

- access directly by logging on using Internet Explorer or
- launched from the GP system (EMIS or SystemOne) using the InterOp.

With the current version of ICE it is necessary to use either Internet Explorer or Microsoft Edge in IE compatibility mode.

The method used will depend upon the location type that the sample taker is working at. Sample Takers working in a GP Practice will routinely select the patient within the local GP System and launch ICE in order to request the investigation. This will pass the patient details to ICE which will register the patient in ICE or update their existing registration and it will be possible to generate the request even if the patient had not previously existed in the ICE system.

Sample Takers working in Community Clinics, CASH / GUM Units or Hospital based locations will routinely access the system directly. It will then be necessary to select the patient from the patients already available in the ICE system. If the patient is not already registered in the ICE system it will NOT be possible to generate the request using ICE and the request should be generated either using CSMS (HMR101) or using a manual request form.

The link to access the system directly is:

<https://gatesheadscreeningservices.ghnt.nhs.uk/icedesktop>

Once the patient has been selected the Request pane should be displayed.

QEH Screening

HPV Screening

Search

Set as Default Panel

Gateshead screening Services

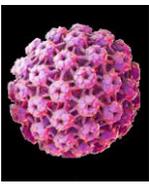
Primary HPV

Cervical Screening Contact Details

email: ghntnecervicalscreeningcentre@nhs.net

Telephone: 0191 445 6504

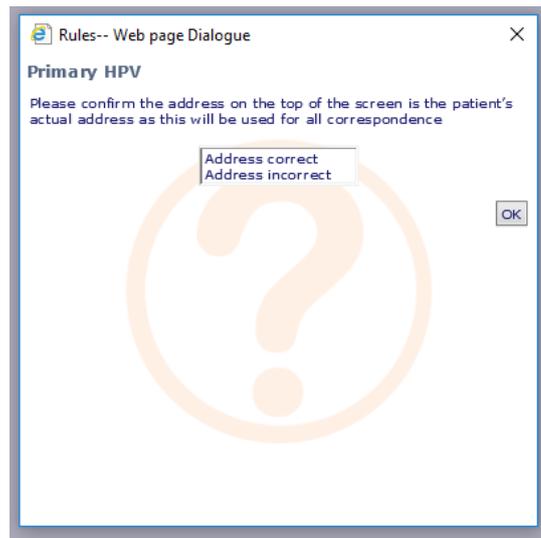
CSTD: http://www.cstd.nyhqarc.nhs.uk



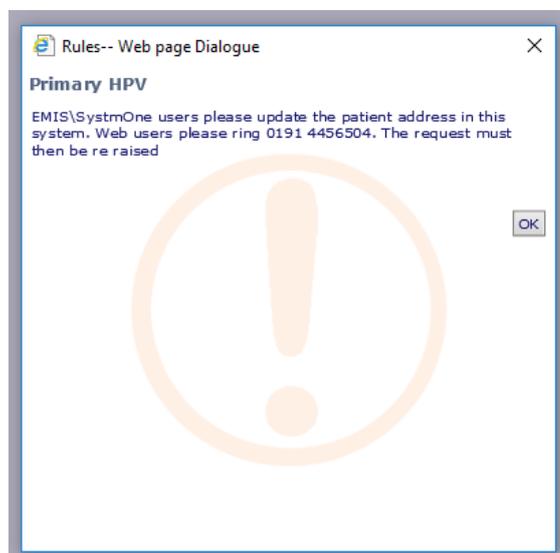
The details for the patient that has been selected should be displayed.

Patient Name:	THERESA TESTPATIENT	Hospital Number:	4140681098	Sex:	Female
Date of Birth:	01 January 1989	NHS Number:	414 068 1098		
Address:	15 BARMSTON CLOSE, COLUMBIA, WASHINGTON, TYNE AND WEAR, NE38 8NA			Telephone No:	

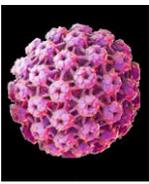
The first question that will be asked is whether the address details are correct. It is important that the address details are checked because if the patient would prefer correspondence to be sent to their home address this will be the address that the result letter is sent to.



If the address recorded is incorrect the following message will be displayed. Sample takers working in a GP setting will be able to update the patient details in their local GP system and then re-launch the ICE session. This should result in the updated address details being passed to ICE. Sample takers working in other settings are unable to edit the patient details in ICE, but if necessary they should contact Pathology Support using the number quoted and we will be able to update the patient details for you.



If the details are correct the request will proceed to the questions screens. Please complete all questions accurately.



5.1.2 Sample location

When requesting the Cervical Screening / Primary HPV investigation it is essential that the requesting location (selected upon completion of the request) is correct and accurately reflects the type of patient being seen.

It is also essential that this corresponds with the requesting location type selected from question shown below.

Failure to provide accurate information may result in the wrong management being given and could also result in the result being rejected by the Cervical Screening Administration Service (CSAS). When requesting from within a hospital location that is not Colposcopy i.e. OPD, Theatre etc please select **NHS Hospital Location (exc Colp)** to ensure the patient is directly referred to Colposcopy if required.

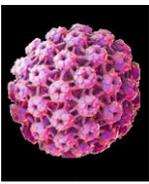
If it is not possible to select the appropriate location whilst generating a request please contact the Pathology IT Support team on the numbers above for assistance as possible as your ICE user account may need to be amended.

5.1.3 Patient History

It is the sample takers responsibility to give accurate patient screening and treatment history.

Please give all relevant clinical details (e.g. HIV status, DES exposure, compromised immunity) on the ICE form when requesting the test. The term RVI (Retro Viral Infection) should be used to indicate HIV+ve status.

The ICE request will ask whether the patient has had treatment for a cervical abnormality. If 'Yes' the following questions will be triggered to gather the appropriate information.



GYN Cervical Treatment

Please enter date of the latest Cervical abnormality treatment as accurately as possible

What type of treatment for cervical abnormality has been performed ?

(Please Select) ▾

What were the Histology findings ?

(Please Select) ▾

Were the Margins Involved ?

(Please Select) ▾

See below for the selection options:

What type of treatment for cervical abnormality has been performed ?

(Please Select)

- Cervical Biopsy
- LLETZ
- Hysterectomy
- Ablation treatment

Were the Margins Involved ?

(Please Select)

- Yes
- No
- Not Applicable

What were the Histology findings ?

(Please Select)

- Negative
- HPV changes only
- CIN 1
- CIN 2
- CIN 3
- Invasive Cancer
- CGIN
- SMILE
- Not Appropriate

Primary HPV

Please identify Margin involved

(Please Select)

- Ectocervical
- Endocervical
- Deep Lateral

OK

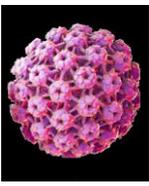
hold Ctrl and click to add/delete individual lines or Shift to select ranges.

There is still the opportunity to add additional clinical information at the end of the request if required, but obviously the space available is still limited.

To complete your request click **Accept Request** at bottom right hand side of screen.



If you have a Zebra ICE Label Printer already set up for ICE, this will continue to produce a label on the new ICE for this test. If using an A4 printer you must ensure that you select the correct printer and that the printer draw has ICE paper loaded. The Gateshead A4 ICE paper includes a sticker in the top left which must be removed and placed on the sample container. The barcode contains all the clinical details.



5.2 Cervical Screening Management System (CSMS) Electronic request form

Until you are set up for electronic ICE requesting, the CSMS HMR101 form can be completed electronically or hard copy downloaded from the system.

5.2.1 Accessing Cervical Screening Management System

If you require any support in accessing the CSMS this can be accessed via the website

<https://cervicalscreening.nhs.uk>

- ▶ [CSMS Maintenance Schedule](#)
- ▶ [I don't have an NHS smartcard](#)
- ▶ [I have an NHS smartcard but I have forgotten my 6 digit passcode](#)
- ▶ [I have a smartcard and PIN but can't access CSMS](#)

- To access the Cervical Screening Management System you must have a PC with a Smartcard reader. The web address is <https://cervicalscreening.nhs.uk>

NHS Cervical Screening Management System

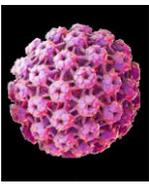
Cervical Screening Management System

To access the Cervical Screening Management System you will need an [NHS smartcard](#) and an associated role which is assigned by [Registration Authorities](#).

NHS Log in with my Care Identity

- ▶ [I don't have an NHS smartcard](#)
- ▶ [I have an NHS smartcard but I have forgotten my 6 digit passcode](#)
- ▶ [I have a smartcard and PIN but can't access CSMS](#)

- Select Log in with my Care Identity.



a) *To search for patient data*

Patient Search

You are searching a national database. Use NHS number to search where possible. If not available, use as much search criteria as you can and take care to select the correct individual.

NHS Number [Demographics](#)

NHS number
e.g. 123 456 7890

Find patient

- i. The preferred search method is the NHS number. Enter NHS number and select 'Find patient'.

Patient Search

You are searching a national database. Use NHS number to search where possible. If not available, use as much search criteria as you can and take care to select the correct individual.

[NHS Number](#) [Demographics](#)

First name

Last name

Date of birth
For example, 31 3 1980

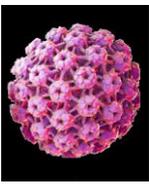
Day Month Year

Postcode

Search

- ii. If NHS number not available it is possible to search using the First name, Last name, Date of Birth and Postcode. This should cause a list of possible matches to be displayed.
- iii. If no matches are found a warning will be displayed.

Please ensure the demographic details match the patient you are searching as there have been some indexing issues and very occasionally the incorrect patient is found.



Search Results

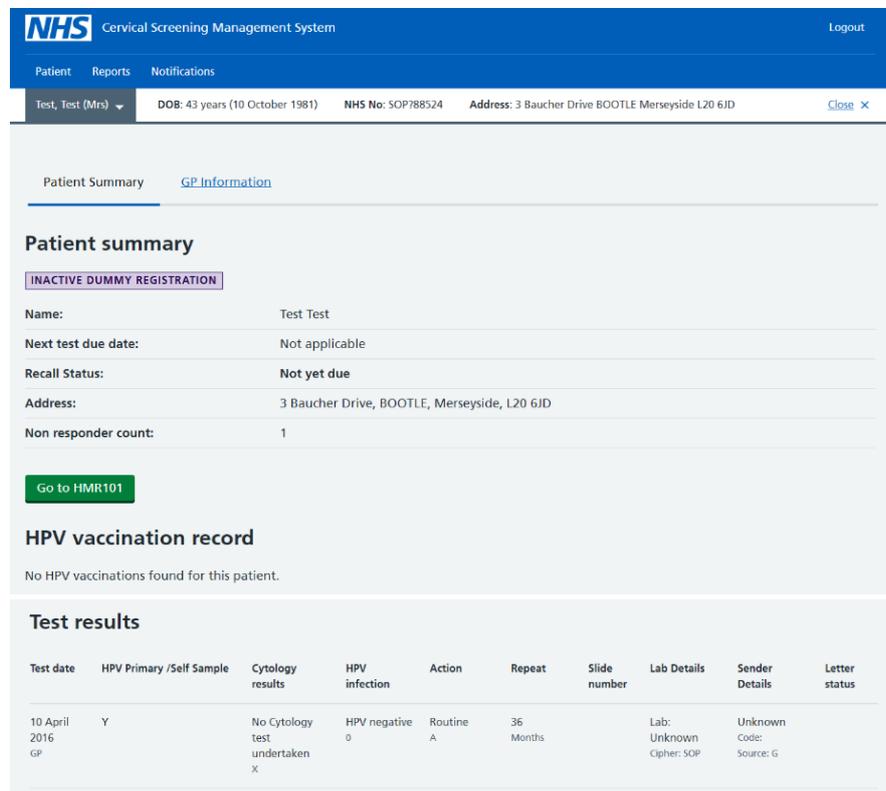
We found 8 results for patients with first name test, last name test

If these aren't the patients you're looking for you can [refine your search](#).

Participants

Name	Gender	Date of birth	Address	NHS Number	Action
Test Test	Female	1 January 1975	2 Railway Cottages Hillam Lane	YN?371242	View patient summary

- iv. Select the appropriate patient and click 'View patient summary'. This will cause a new window with the patient's full details to open. If there is only **one** possible match, the patient summary window will open automatically.
- v. If the patient's screening history needs to be checked scroll down to 'Test results' results of previous tests are displayed.

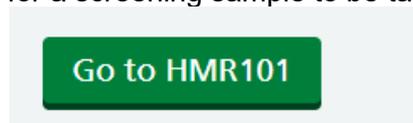


The screenshot shows the NHS Cervical Screening Management System interface. At the top, there's a blue header with the NHS logo and 'Cervical Screening Management System'. Below this is a navigation bar with 'Patient', 'Reports', and 'Notifications'. A dropdown menu is open for 'Test, Test (Mrs)', showing patient details: 'DOB: 43 years (10 October 1981)', 'NHS No: SOP788524', and 'Address: 3 Baucher Drive BOOTLE Merseyside L20 6JD'. The main content area has tabs for 'Patient Summary' (selected) and 'GP Information'. Under 'Patient Summary', there's a purple box labeled 'INACTIVE DUMMY REGISTRATION'. Below that, fields show: Name: Test Test; Next test due date: Not applicable; Recall Status: Not yet due; Address: 3 Baucher Drive, BOOTLE, Merseyside, L20 6JD; Non responder count: 1. A green button 'Go to HMR101' is visible. The 'HPV vaccination record' section shows 'No HPV vaccinations found for this patient.' The 'Test results' section contains a table with one entry:

Test date	HPV Primary /Self Sample	Cytology results	HPV infection	Action	Repeat	Slide number	Lab Details	Sender Details	Letter status
10 April 2016 GP	Y	No Cytology test undertaken X	HPV negative 0	Routine A	36 Months		Lab: Unknown Cipher: SOP	Unknown Code: Source: G	

b) Generating an Electronic HMR101 Request Form from CSMS

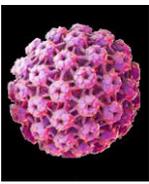
- i. If the patient is eligible for a screening sample to be taken select 'Go to HMR101'



- vi. Enter your sample taker code and select continue



The screenshot shows a form with two tabs: 'Patient Summary' (selected) and 'GP Information'. Below the tabs is a link '< Go back to patient summary'. The main heading is 'Enter your sample taker code'. There is a text input field for the code and a green 'Continue' button at the bottom.



- vii. To continue with an electronic HMR101 request, select “Create digital form” and press continue:

Choose how to create a new HMR101 form

Create digital form (recommended)

Preview and print paper form

Continue

- viii. Select address registered on CSMS “Send result letter to this address”(the laboratory does not have the ability to send to a different) press continue:

Choose which address to send the result letter to

CSAS
GELDERD ROAD
LEEDS
WEST YORKSHIRE
LS27 7JN

Send result letter to this address

Send result letter to a different address

Continue

- ix. Complete the LMS and additional information (**Please ensure if the patient is HIV positive that Retroviral Infection (RVI) is checked**) press continue:

Enter patient details

1st day of last menstrual period (LMP)

Day Month Year

Additional information

Select all options that apply to the patient.

Pregnancy

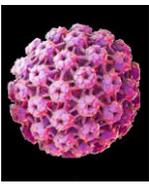
Postnatal (under 12 weeks)

I.U.C./I.U.S fitted

Taking hormones (add details later in clinical details section)

Retroviral Infection (RVI)

Continue



- x. The date will automatically be populated, select the source of the sample, reason for the sample and sample type and then press continue.

Enter sample details

Test date

Day Month Year

Source of the sample

GP Practice/Primary care NHS Colposcopy
 Community Clinic Defence Medical Services
 Sexual Health Services Other
 NHS Hospital

Reason for sample

Routine call Opportunistic
 Routine recall Follow up treatment
 Previous inadequate/HPV-U Other

Sample Type

Cervical sample
 Other

Add detail if 'Other'

- xi. Enter clinical details and press continue

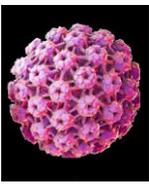
Enter clinical details

Add relevant clinical data, including:

- signs and symptoms
- history of cervical abnormalities and treatment

Enter clinical details

You have 500 characters remaining



- xii. This will then generate a preview of the HMR101 form, check the details are correct which will have a summary of the patient history and details entered electronically.

Print HMR101 Form

		01 Hospital registration number	02 Laboratory	11 Code number of laboratory	12 Slide serial number
WRITE CLEARLY WITH BALLPOINT PEN ENTER DETAILS IN BOXES OR RING APPROPRIATE NUMBERS		03 Patient name and address Surname Test Previous surname First names Test Full postal address Test Patient address, 123 Test street Test Town, Tyne and Wear Phone no. 04 Date of birth 01/01/1975		Clinical report 13 Test date 16 / 05 / 2025 14 LMP (1st day) 01 / 10 / 2024 15 Last test 16 If no previous test please put X <input type="checkbox"/>	
06 Name and address of sender if not GP If hospital state consultant, clinic or ward, and hospital _____ _____ _____ _____ Postcode _____ 07 Name and address of GP _____ _____ _____ _____ Postcode _____		08 Health Authority _____ Practice code _____ GP's local code _____ GP's national code _____ 09 Source of sample GP Practice/Primary Care <input type="checkbox"/> X 1 NHS Hospital _____ 4 Community Clinic _____ 2 NHS Colposcopy _____ 7 Sexual Health Services _____ 3 Defence Medical Services _____ 5 Other _____ 6		17 Reason for test routine call _____ X 1 routine recall _____ 2 previous inadequate test/HPV-U _____ 5 opportunistic _____ 6 follow up treatment _____ 7 other _____ 3 19 Condition (if applicable) pregnant _____ 1 taking hormones (specify in 20) _____ X 4 post-natal (under 12 weeks) _____ 2 retroviral infection (RVI) _____ X 5 I.U.C.D./I.U.S fitted _____ 3 20 Clinical data (including signs and symptoms, previous history of cervical abnormalities and treatment) Specimen type _____ Test date _____ Cytology and HPV result _____ Action _____ cervical sample _____ X 1 other (specify) _____ 2	
FORM HMR 101 (2022) Single copy		 YN?371242		Clinical details Test patient Sample taker signature _____ Date _____ Sample taker code <u>A1234</u> 21 Screening report Signature _____ date Printed on 16/05/2025	

- xiii. A blank page is always printed after HMR101 form, to stop this type 1 as below.

Pages

All

Odd pages only

Even pages only

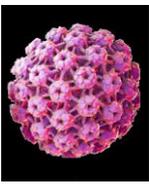
1

- xiv. This request form should then accompany the appropriately labelled specimen/s as per sections 9 ((Full name, Date of Birth, a fourth identifier (ideally the NHS number; the patient address is also acceptable).

c) Generating a Blank HMR101 Request Form from CSMS

- i. Log onto CSMS and access the patient record following 5.2.1 Accessing Cervical Screening Management System above.
- ii. If the patient is eligible for a screening sample to be taken select 'Go to HMR101'





iii. Enter your sample taker code and select continue

[Patient Summary](#) [GP Information](#)

[Go back to patient summary](#)

Enter your sample taker code

iv. To print a blank HMR101 form, select 'Preview and print paper form' and click 'continue'

Choose how to create a new HMR101 form

Create digital form (recommended)

Preview and print paper form

v. The print preview for the HMR101 form is displayed.

Print HMR101 Form

	01 Hospital registration number	02 Laboratory	11 Code number of laboratory	12 Slide serial number
03 Patient name and address Surname test First names Test Full postal address CSAS, GELDERO ROAD LEEDS, WEST YORKSHIRE Phone no. _____ 04 Date of birth 01/01/2002	Previous surname _____ Postcode LS27 7JN 05 NHS number ENG 000 3539	Clinical report 13 Test date _____ 14 LMP (1st day) _____ 15 Last test _____ 16 If no previous test please put X <input type="checkbox"/>	17 Reason for test routine call _____ 1 routine recall _____ 2 previous inadequate test/HPV-U _____ 5 opportunistic _____ 6 follow up treatment _____ 7 other _____ 3	
06 Name and address of sender if not GP _____ _____ Postcode _____	07 Name and address of GP _____ _____ Postcode _____	19 Condition (if applicable) pregnant _____ 1 post-natal (under 12 weeks) _____ 2 I.U.C./D.V.U.'s fitted _____ 3 taking hormones (specify in 20) _____ 4 retroviral infection (RVI) _____ 5	20 Clinical data (including signs and symptoms, previous history of cervical abnormalities and treatment) Specimen type _____ Test date _____ Cytology and HPV result _____ Action _____ cervical sample _____ 1 other (specify) _____ 2	
08 Health Authority _____ Practice code default _____ GP's local code _____ GP's national code _____	09 Source of sample GP Practice/Primary Care _____ 1 Community Clinic _____ 2 Sexual Health Services _____ 3 NHS Hospital _____ 4 NHS Colposcopy _____ 7 Defence Medical Services _____ 5 Other _____ 6	Clinical details Sample taker signature _____ Date _____ Sample taker code A1234	21 Screening report Signature _____ date _____ Printed on 16/05/2025	

FORM HMR 101 (2022) Single copy



ENG 000 3539

vi. Click 'Print HMR101 Form' The print screen is displayed.

vii. A blank page is always printed after HMR101 form, to stop this type 1 as below.

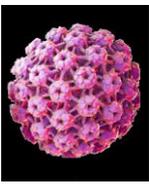
Pages

All

Odd pages only

Even pages only

1



- viii. Please complete the form, paying particular attention to the provision of relevant clinical history. **Also print your full name and your NMC, GMC or PA number.**
- ix. This paper request form should then be completed manually see below and accompany the appropriately labelled sample specimen/s as per sections 9 ((Full name, Date of Birth, a fourth identifier (ideally the NHS number; the patient address is also acceptable)).

5.3 Paper request forms:

These are being actively phased out by the laboratory and should only be used when electronic requesting is not available due to an IT issue. In this case a hard paper copy of the CSMS request form should be completed as above in full with all information PRINTED legibly or a printed label containing patient demographics can be used.

Whichever request form is used, the provision of information relating to previous biopsies (punch, LLETZ/loop, cone etc) with histology grade and date of biopsy, as well as details of any treatment are ESSENTIAL to ensure correct patient management is given.

NHS number:

The NHS number **MUST** be used whenever it is available as this is the unique patient identifier. In addition, the full forename, surname and date of birth **MUST** be given.

PIN codes:

The GMC, NMC or Physician Associate (PA) number is the unique sample taker identifier, or PIN code. This information **MUST** be provided on all request forms. The sample taker name should also be printed clearly. If a PIN code is not given, is illegible or the sample taker is not registered on the CSTD, this is reportable to the Screening & Immunisation Team so that enquiries can be made to determine if the sample taker is validated to take cervical samples.

5.4 High Risk Specimens

Specimens which pose a risk of infection to members of staff eg HIV, Hepatitis B, TB etc

- It is the responsibility of the referring clinician to ensure that high-risk samples are clearly identified on both the sample container and request form to reduce the risk of infection to staff and others.