

[Home](#) > [Types of Cancer](#) > [Cervical Cancer](#) > Cervical Cancer - Diagnosis

PDF generated on July 26, 2016 from <http://www.cancer.net/cancer-types/cervical-cancer/diagnosis>

## **Cervical Cancer - Diagnosis [1]**

**This section has been reviewed and approved by the [Cancer.Net Editorial Board](#) [2], 04/2016**

**ON THIS PAGE:** You will find a list of common tests, procedures, and scans that doctors use to find cause of the medical problem. To see other pages, use the menu.

Doctors use many tests to find, or diagnose, cancer. They also do tests to learn if cancer has spread to another part of the body from where it started. If this happens, it is called metastasis. For example, imaging tests can show if the cancer has spread. Imaging tests show pictures of the inside of the body. Doctors may also do tests to learn which treatments could work best.

For most types of cancer, a biopsy is the only sure way for the doctor to know whether an area of the body has cancer. In a biopsy, the doctor takes a small sample of tissue for testing in a laboratory. If a biopsy is not possible, the doctor may suggest other tests that will help make a diagnosis.

This list describes options for diagnosing this type of cancer, and not all tests listed will be used for every person. Your doctor may consider these factors when choosing a diagnostic test:

- The type of cancer suspected
- Your signs and symptoms
- Your age and medical condition
- The results of earlier medical tests

In addition to a physical examination, the following tests may be used to diagnose cervical cancer:

- **Pap test.** A [Pap test](#) [3] is when the doctor gently scrapes the outside of the cervix and vagina taking samples of the cells for testing.

Improved Pap test methods have made it easier for doctors to find cancerous cells. Traditional Pap tests can be hard to read because cells can be dried out, covered with mucus or blood, or clump together on the slide.

- The liquid-based cytology test (often referred to as ThinPrep or SurePath) transfers a thin layer of cells onto a slide after removing blood or mucus from the sample. Because the sample is preserved, other tests (such as the HPV test mentioned in the [Prevention](#) [4] section) can be done at the same time.
  - Computer screening (often called AutoPap or Focal Point) uses a computer to scan the sample for abnormal cells.
- **Pelvic examination.** In this examination, the doctor feels a woman's uterus, vagina, ovaries, fallopian tubes, cervix, bladder, and rectum to check for any unusual changes. A Pap test is often done at the same time.
  - **HPV typing.** An HPV test is similar to a Pap test, where the test is done on a sample of cells from the patient's cervix. The doctor may test for HPV at the same time as a Pap test or after Pap test results show abnormal changes to the cervix. Certain strains of HPV, such as HPV-16 and HPV-18, are seen more often in women with cervical cancer and may help confirm a diagnosis. If the doctor says the HPV test is "positive," that means it found the presence of HPV. Many women have HPV but do not have cervical cancer, so HPV testing alone is not an accurate test for cervical cancer.

If the Pap test showed some abnormal cells, and the HPV test is also positive, the doctor may suggest 1 or more of the following diagnostic tests:

- **Colposcopy.** The doctor may do a colposcopy to check the cervix for abnormal areas. A special instrument called a colposcope (an instrument that magnifies the cells of the cervix and vagina, similar to a microscope) is used. The colposcope gives the doctor a lighted, magnified view of the tissues of the vagina and the cervix. The colposcope is not inserted into the woman's body and the examination is not painful, can be done in the doctor's office, and has no side effects. It can be done on pregnant women.

- **Biopsy.** A [biopsy](#) [5] is the removal of a small amount of tissue for examination under a microscope. Other tests can suggest that cancer is present, but only a biopsy can make a definite diagnosis. A pathologist then analyzes the sample(s). A pathologist is a doctor who specializes in interpreting laboratory tests and evaluating cells, tissues, and organs to diagnose disease. If the lesion is small, the doctor may remove all of it during the biopsy. There are several types of biopsies:

- One common method uses an instrument to pinch off small pieces of cervical tissue.
- Sometimes, the doctor wants to check an area inside the opening of the cervix that cannot be seen during a colposcopy. To do this, the doctor uses a procedure called endocervical curettage (ECC). Using a small, spoon-shaped instrument called a curette, the doctor scrapes a small amount of tissue from inside the cervical opening.
- A loop electrosurgical excision procedure (LEEP) uses an electrical current passed through a thin wire hook. The hook removes tissue for examination in the laboratory. A LEEP may also be used to remove a precancer or an early-stage cancer.
- Conization (a cone biopsy) removes a cone-shaped piece of tissue from the cervix. Conization may be done as treatment to remove a precancer or an early-stage cancer.

The first 3 procedures are usually done in the doctor's office using a local anesthetic to numb the area. There may be some bleeding and other discharge and, for some women, discomfort similar to menstrual cramps. Conization is done under a general or local anesthetic and may be done in the doctor's office or the hospital.

If the biopsy indicates that cervical cancer is present, the doctor will refer the woman to a gynecologic oncologist, who specializes in treating this type of cancer. The specialist may suggest additional tests to see if the cancer has spread beyond the cervix.

- **Pelvic examination.** The specialist may re-examine the pelvic area while the patient is under anesthetic to see if the cancer has spread to any organs near the cervix, including the uterus, vagina, bladder, or rectum.
- **X-ray.** An x-ray is a way to create a picture of the structures inside of the body using a small amount of radiation. An intravenous urography is a type of x-ray that is used to view the kidneys and bladder.

- **Computed tomography (CT or CAT) scan.** A [CT scan](#) [6] creates a 3-dimensional picture of the inside of the body using x-rays taken from different angles. A computer then combines these images into a detailed, cross-sectional view that shows any abnormalities or tumors. A CT scan can also be used to measure the tumor's size. Sometimes, a special dye called a contrast medium is given before the scan to provide better detail on the image. This dye can be injected into a patient's vein or given as a pill to swallow.
- **Magnetic resonance imaging (MRI).** An [MRI](#) [7] uses magnetic fields, not x-rays, to produce detailed images of the body. MRI can also be used to measure the tumor's size. A special dye called a contrast medium is given before the scan to create a clearer picture. This dye can be injected into a patient's vein or given as a pill to swallow.
- **Positron emission tomography (PET) or PET-CT scan.** A PET scan is usually combined with a CT scan (see above), called a [PET-CT scan](#) [8]. However, you may hear your doctor refer to this procedure just as a PET scan. A PET scan is a way to create pictures of organs and tissues inside the body. A small amount of a radioactive sugar substance is injected into the patient's body. This sugar substance is taken up by cells that use the most energy. Because cancer tends to use energy actively, it absorbs more of the radioactive substance. A scanner then detects this substance to produce images of the inside of the body.
- **Cystoscopy.** A [cystoscopy](#) [9] is a procedure that allows the doctor to view the inside of the bladder and urethra (canal that carries urine from the bladder) with a thin, lighted, flexible tube called a cystoscope. The person may be sedated as the tube is inserted in the urethra. A cystoscopy is used to determine whether cancer has spread to the bladder.
- **Proctoscopy (also called a sigmoidoscopy).** A [proctoscopy](#) [10] is a procedure that allows the doctor to see the colon and rectum with a thin, lighted, flexible tube called a sigmoidoscope. The person may be sedated as the tube is inserted in the rectum. A proctoscopy is used to see if the cancer has spread to the rectum.
- **Laparoscopy.** A [laparoscopy](#) [9] is a procedure that allows the doctor to see the abdominal area with a thin, lighted, flexible tube called a laparoscope. The person may be sedated as the tube is inserted through an incision in the body.

After diagnostic tests are done, your doctor will review all of the results with you. If the diagnosis is cancer, these results also help the doctor describe the cancer; this is called staging.

The [next section in this guide is Stages](#). [11] It explains the system doctors use to describe the extent of the disease. Or, use the menu to choose another section to continue reading this guide.

---

## Links

- [1] <http://www.cancer.net/cancer-types/cervical-cancer/diagnosis>
- [2] <http://www.cancer.net/about-us>
- [3] <http://www.cancer.net/node/24638>
- [4] <http://www.cancer.net/node/18678>
- [5] <http://www.cancer.net/node/24406>
- [6] <http://www.cancer.net/node/24486>
- [7] <http://www.cancer.net/node/24578>
- [8] <http://www.cancer.net/node/24565>
- [9] <http://www.cancer.net/node/24511>
- [10] <http://www.cancer.net/node/24678>
- [11] <http://www.cancer.net/node/18681>