

Cervical Cancer Screening

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Revision:

1.0 CPT PROCEDURE CODES

88141 - 88155, 88164 - 88167, 99201 - 99215 or 99301 - 99313

2.0 DESCRIPTION

Papanicolaou (PAP) test is an exfoliative cytological staining procedure for the detection and diagnosis of various conditions, particularly malignant and premalignant conditions of the female genital tract. PAP tests are performed as either a diagnostic or screening test. For TRICARE purposes diagnostic PAP tests are tests performed on symptomatic females presenting with signs or symptoms of malignant or premalignant disease or pregnancy; screening PAP tests are performed on asymptomatic females who do not present with signs or symptoms of cervical or medical disease.

3.0 POLICY

Cervical PAP tests are covered on either a diagnostic or screening basis. [For additional information on screening PAP tests, see Clinical Preventive Services - TRICARE Standard ([Section 2.1](#)) and Clinical Preventive Services - TRICARE Prime ([Section 2.2](#)).]

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