

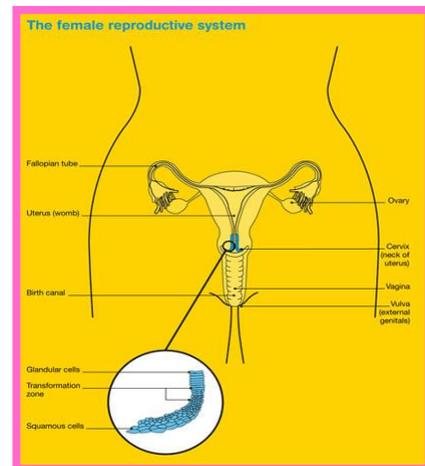
AGUS Pap Smear

Definition:

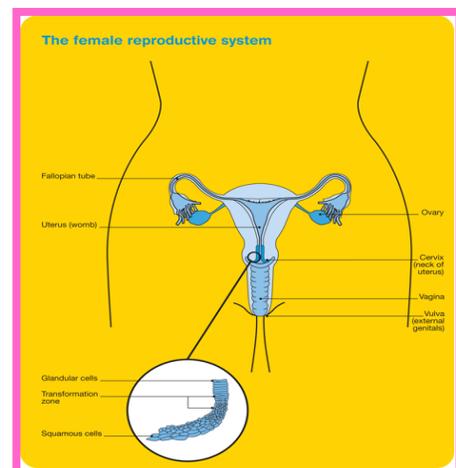
AGUS stands for atypical glandular cells of undetermined significance. Breaking it down, an AGUS pap smear tells us there is an abnormality (atypical) in the cells that make mucus (glandular cells) but we are not sure if it means anything (undetermined significance).

Types of Abnormal Pap Smears:

Most abnormal pap smears come from squamous cells or skin cells. These are found along the outside and inside of the cervix along with the vagina noted by the blue area below. This is relatively easy to evaluate with a procedure called colposcopy – a microscopic examination of the cervix.

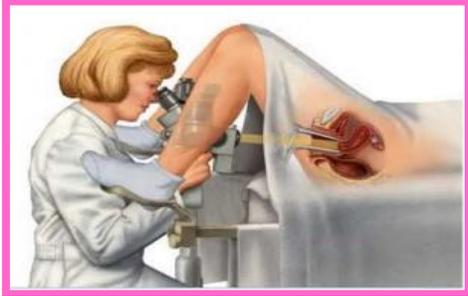


The AGUS type of abnormal pap smear comes from the glandular cells. These cells make the vaginal and cervical mucus and the lining of the uterus which builds each month and then sheds as the menstrual period. These cells are found throughout the entire female reproductive organs all the way from the cervix and up into the fallopian tubes and ovaries noted by the blue area below. This type of pap smear requires a more intense evaluation as we have to look at more places for the source of the problem.

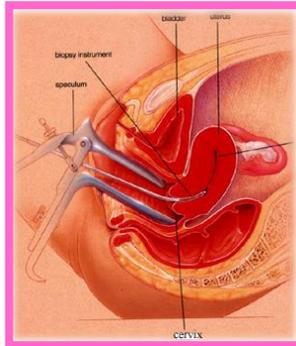


Tests That May Need To Be Done:

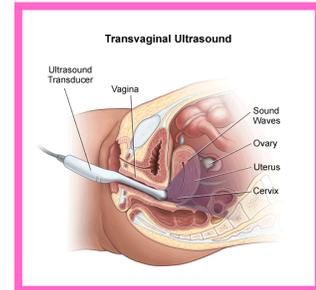
1. **Colposcopy.** During colposcopy, the doctor will look at your cervix with the help of a microscope. A dilute vinegar solution will be applied to the cervix to help the doctor see where the abnormal cells are. Small biopsies may need to be taken of the abnormal cells.
2. **Endocervical curettage.** This is a gentle scraping of cells from inside the cervix.
3. **Endometrial biopsy.** This is where a small flexible plastic catheter is inserted through the cervix into the lining of the uterus. This allows a small sample of the uterine lining to be removed and tested.
4. **Ultrasound.** An ultrasound is a way to take pictures of the inner organs. This is sometimes done to evaluate the uterus, fallopian tubes and ovaries.



Colposcopy



Endometrial Biopsy



Ultrasound

Chances of Finding a Problem:

8% of patients have: low-grade squamous intraepithelial lesions (LSIL). This has a very good chance of resolving without treatment.

11% of patients have: high-grade squamous intraepithelial lesions (HSIL). This is a precancerous spot that has a moderate to high chance of becoming cervical cancer.

3% of patients have: adenocarcinoma in situ. This is a precancerous spot that has a high chance of becoming cervical cancer.

1% of patients have endometrial hyperplasia. This is a precancerous spot that has a low to moderate chance of becoming uterine cancer.

5% of patients have cancer. Most of these are uterine cancers or cervical cancers.

72% of patients have no problem identified with our testing.