

WG2 Terminology for Intraepithelial Lesions, Integrating Morphology, Biology, and Clinical Management - Public Comments

January 23, 2012 – January 29, 2012

Practice Type		
Clinician	6	20%
Pathologist	22	73%
Other, please specify	2	7%

Years of Experience		
More than 20 years	14	47%
11-20 years	9	30%
10 years or less	6	20%
Currently a resident/student	1	3%

Practice Setting		
Academic	9	30%
Community/Private Practice	16	53%
Government	3	10%
Industry	0	0%
Insurance/Payers	0	0%
*Other, please specify	2	7%
*Retired; now consulting Student Health/Academic		

Clinician Public Comments

Question 1: Were any published articles omitted from consideration (please refer to Work Group scope/key questions and inclusion/exclusion criteria links above)? How would these articles impact the Work Group's conclusions?

No

Question 2: Do you think there are any significant misrepresentations or biases in the draft recommendations?

no

Question 3: Do you have any disagreements with the main conclusions and/or evaluations of the literature?

no

Question 4: What topics/gaps for future research/guidelines should be priorities?

cin 1 vs 2 vs3

Question 5: Which would be your preference on the following recommended terminologies (please select only one preferred terminology or free-text other suggestion)?

Low Grade HPV-Associated Squamous Intraepithelial Lesion (LHIL)High Grade HPV-Associated Squamous Intraepithelial Lesion (HHIL)	0	0%
Low Grade Squamous Intraepithelial Lesion (LSIL)High Grade Squamous Intraepithelial Lesion (HSIL)	2	100%
Squamous HPV Viral Cytopathic Lesion Squamous HPV Associated Dysplasia (SHAD)	0	0%
Condyloma Cervical/Vaginal/Vulvar/Anal/Penile Intraepithelial Lesion	0	0%
Low-grade Intraepithelial Abnormality (LGIA)High-Grade Intraepithelial Abnormality (HGIA)	0	0%
Other suggestion	0	0%

Question 6: Other comments (including, if applicable, support for the recommendations):

none

Pathologist Public Comments

Question 1: Were any published articles omitted from consideration (please refer to Work Group scope/key questions and inclusion/exclusion criteria links above)? How would these articles impact the Work Group's conclusions?

Probably not. I am not in a position to review the references in such detail.

Not to my knowledge

Na

none

Question 2: Do you think there are any significant misrepresentations or biases in the draft recommendations?

NO

Not to my knowledge

no

no

no

no

Question 3: Do you have any disagreements with the main conclusions and/or evaluations of the literature?

Disagreements, no; confusion and request for clarification, yes. See comments.

No

no

no

no

no

Question 4: What topics/gaps for future research/guidelines should be priorities?

Impact of the strength of p16 staining as a predictor of progression of (dysplastic) squamous lesions.

?

na

Question 5: Which would be your preference on the following recommended terminologies (please select only one preferred terminology or free-text other suggestion)?

Low Grade HPV-Associated Squamous Intraepithelial Lesion (LHIL)High Grade HPV-Associated Squamous Intraepithelial Lesion (HHIL)	3	33%
Low Grade Squamous Intraepithelial Lesion (LSIL)High Grade Squamous Intraepithelial Lesion (HSIL)	6	67%
Squamous HPV Viral Cytopathic Lesion Squamous HPV Associated Dysplasia (SHAD)	0	0%
Condyloma Cervical/Vaginal/Vulvar/Anal/Penile Intraepithelial Lesion	0	0%
Low-grade Intraepithelial Abnormality (LGIA)High-Grade Intraepithelial Abnormality (HGIA)	0	0%
Other suggestion	0	0%

Other

Practice Type
Cytotechnologist
Cytotechnologist

Question 1: Were any published articles omitted from consideration (please refer to Work Group scope/key questions and inclusion/exclusion criteria links above)? How would these articles impact the Work Group’s conclusions?

No responses received

Question 2: Do you think there are any significant misrepresentations or biases in the draft recommendations?

No responses received

Question 3: Do you have any disagreements with the main conclusions and/or evaluations of the literature?

No responses received

Question 4: What topics/gaps for future research/guidelines should be priorities?

No responses received

Question 5: Which would be your preference on the following recommended terminologies (please select only one preferred terminology or free-text other suggestion)?

Low Grade HPV-Associated Squamous Intraepithelial Lesion (LHIL)High Grade HPV-Associated Squamous Intraepithelial Lesion (HHIL)	0	0%
Low Grade Squamous Intraepithelial Lesion (LSIL)High Grade Squamous Intraepithelial Lesion (HSIL)	0	0%
Squamous HPV Viral Cytopathic Lesion Squamous HPV Associated Dysplasia (SHAD)	0	0%
Condyloma Cervical/Vaginal/Vulvar/Anal/Penile Intraepithelial Lesion	0	0%
Low-grade Intraepithelial Abnormality (LGIA)High-Grade Intraepithelial Abnormality (HGIA)	0	0%
Other suggestion	0	0%