BCCCP Codes for the Comment Field (Revised May 2017)

The following situations have useful codes that inform us beyond the fields in HIS as to important medical information and can sometimes "turn off" entries in your data report.

Situation	Code	Explanation
A client was diagnosed with invasive cancer. Prior to surgery, the surgeon ordered chemotherapy or neoadjuvant chemotherapy. This means that staging (cervical and breast cancer) and obtaining a tumor size (breast cancer) is all but impossible. So, you have entered a "5" unknown for stage and tumor size. You will always get a "Missing or unknown stage/size" on your data report.	**NC**	"**N**eoadjuvant **C**hemotherapy:" this will stop the "Missing or unknown stage/size" on your data report and let us know why the stage/size is missing or unknown when CDC asks us why, we can explain.
A client is scheduled by the clinician for an ultrasound for short term follow up after a screening mammogram indicated a need for one. You should enter a CBE with a result of "07" and a mammogram with a result of "08" for the date of the ultrasound and document the ultrasound as usual. This will result in a message in your data report of "diagnostic procedures done when screening not abnormal."	**CDUSTF**	"**C**linician **D**irected **U**ltrasound for **S**hort **T**erm **F**ollow up" lets us know why the ultrasound was done and will turn off data messages like "diagnostic procedures done when screening not abnormal."
A client is scheduled by the clinician for a colposcopy short term follow up after a Pap test, colposcopy or biopsy indicated a short term follow up. You should enter a Pap test with a result of "08" and document the colposcopy date and result as usual. This will result in a message in your data report of "diagnostic procedures done when screening not abnormal."	**CDCSTF**	"**C**linician **D**irected **C**olposcopy for **S**hort **T**erm **F**ollow up" lets us know why the colposcopy was done and will stop the "diagnostic procedures done when screening not abnormal" message on your data report.
A client had an abnormal result for a pelvic exam (coded as "2"). However, the abnormality was not cervical in nature. The message "Abnormal pelvic - DX work-up may be required" appears on your data issues report.	**NCAP**	"**N**on-**C**ervical **A**bnormal **P**elvic exam" lets us know that the abnormal pelvic exam requires follow up somewhere other than in BCCCP and stops the "Abnormal pelvic - DX work-up may be required" message.
A client has had repeated short term abnormal Pap tests and normal colposcopies. After another short term abnormal Pap test, the clinician decides not to do the colposcopy this time but wait for the results of another short-term Pap. This would result in a cycle with an abnormal Pap but closed out with no follow up and the resulting error message.	**CDC**	"**C**linician **D**elayed **C**olposcopy" lets us know why no follow up was done and will turn off the messages about no follow up being planned or done.
A client has a normal pelvic exam, a normal Pap test, but her HPV test is positive. The clinician decides to do a colposcopy and/or biopsy. The message "diagnostic procedures done while screening not abnormal" pops up on your report.	**HPV+**	This code indicates that the HPV test was positive hence the reason for the diagnostic procedures. This code will turn off the error message.