HPV found (not type 16 or 18): your follow-up tests

Your screening test found a type of HPV other than 16 or 18, and your cells were normal or showed only low-grade changes. Most of these infections clear on their own, so the next step is usually a repeat test in 12 months.

KEY POINTS

- This result is common, and it does not mean you have cancer.
- Your risk is intermediate. A repeat HPV test is due in 12 months.
- If HPV has cleared by then, you return to screening every 5 years.
- If HPV is still present, you may have another test at 24 months, or a colposcopy.
- You can usually collect your own sample for the repeat test.

What this result means

There are more than a dozen types of HPV that can cause cancer. The types other than 16 and 18 carry a lower risk, and the body clears most of them within one to two years. Waiting 12 months gives your immune system time to do this. Because your cells were normal or low-grade, it is safe to wait.

Your follow-up tests

NOW	12 MONTHS	24 MONTHS	AT ANY STAGE
HPV found (not 16/18)	**Repeat HPV test**	**Second repeat test**	**Colposcopy**
Cells normal or low-grade. Repeat HPV test in 12 months.	HPV not found: back to 5-yearly screening. Still present: usually a second repeat test at 24 months.	HPV not found: back to 5-yearly screening. Still present: colposcopy.	If HPV 16 or 18 is found, or the cells show high-grade or glandular changes.

Figure 1. The follow-up pathway for HPV (not 16/18) with normal or low-grade cells. Simplified from the National Cervical Screening Program guidelines.

If HPV is still present at 12 months

The laboratory checks your cells again. If they are normal or low-grade, you will usually have one more test 12 months later. A colposcopy is recommended at 12 months instead if any HPV is found and you:

- are aged 50 or over
- are Aboriginal and/or Torres Strait Islander, or
- were overdue for screening by two years or more when HPV was first found.

When the next step is different

High-grade or glandular cells	HPV (not 16/18) with possible or definite high-grade (pHSIL or HSIL) or glandular changes means referral for colposcopy, not a repeat test.
Weakened immune system	Any HPV found means referral for colposcopy straight away.

If you collected your own sample

A self-collected sample can be tested for HPV but not for cells. If HPV (not 16/18) is found, you will be asked to return so that a clinician can take a sample from your cervix for a cell test (LBC), ideally within about 6 weeks. If more than 9 months have passed before you can return, a repeat self-collected HPV test may be offered instead.

Common questions

Why not have a colposcopy now?
For this result, waiting 12 months is safe and gives HPV time to clear. Most people avoid an unnecessary procedure this way.

Will I get a reminder?
The National Cancer Screening Register usually sends a reminder. Please also note the date yourself, or ask your GP to recall you.

Can I keep having sex?
Yes. Condoms lower the chance of passing on HPV, but do not prevent it completely.

Can I do anything to help clear HPV?
There is no medicine for HPV. If you smoke, stopping helps your body clear it. Quitline: 13 78 48.

Does my partner need testing?
No. HPV is very common, and partners do not need testing or treatment.

I am pregnant. Does this change anything?
No. The same follow-up applies, and a repeat test can be done during pregnancy if it falls due.

Questions to ask your doctor

- Which type of HPV was found, and what did the cells show?
- When exactly is my repeat test due?
- Can I collect my own sample for the repeat test?
- Do any of the reasons for an earlier colposcopy apply to me?

When to seek help

Please do not wait for your repeat test if you have bleeding after sex, between periods or after menopause, or ongoing unusual discharge or pelvic pain. See your GP or contact the rooms.

Rooms	03 8400 6193 — appointments and non-urgent questions, business hours
Urgent, after hours	Dr James Aridas, 0459 706 061 — urgent gynaecology concerns, and pregnancy concerns before 20 weeks
From 20 weeks pregnant	The birth suite at your booked hospital: Epworth Freemasons 03 9483 3833 · Cabrini Malvern 03 9508 6000 · Jessie McPherson 03 9594 2776
Emergency	Call 000 or go to your nearest emergency department

SOURCES AND FURTHER READING

1. Cancer Council Australia. National Cervical Screening Program Guidelines, updated April 2025. cancer.org.au/health-professionals/clinical-practice-guidelines/cervical-cancer-screening
2. Department of Health, Disability and Ageing. National Cervical Screening Program: a summary guide for healthcare providers, February 2025. health.gov.au/ncsp
3. Department of Health, Disability and Ageing. Understanding the National Cervical Screening Program management pathway, 2025. health.gov.au/ncsp
4. Department of Health, Disability and Ageing. National Cervical Screening Program: 2025 updates to clinical guidelines (fact sheet). health.gov.au/ncsp
5. RANZCOG. Cervical screening in Australia (patient information pamphlet), version 3, 2025. ranzcog.edu.au
6. Jean Hailes for Women's Health. Cervical screening test. jeanhailes.org.au/cervical-screening-test
7. National Cancer Screening Register: 1800 627 701 · ncsr.gov.au

This information is general and does not replace individual medical advice. If your circumstances differ from what is described here, please discuss them with Dr Aridas.

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