

Attachment D: Image-Assisted Cytology Workload Assessment Survey - Cytotechnologist

Form Approved

OMB No. 0920-XXXX

Expiration Date (one year from date of approval)

Public reporting burden of this collection of information is estimated to average **30** minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXX).

Image-Assisted Cytology Workload Assessment Cytotechnologist Section

*This section should be completed separately by each cytotechnologist listed in Workload Practices Survey, question 18.
See the Glossary at the end of this questionnaire for abbreviations.*

Enter your cytotechnologist letter designation from Survey, question 18 _____

1. **What is your pay classification?**
 - Salary
 - Hourly

2. **On average, how many hours do you work in the laboratory per day?**
 - Less than 4
 - 4
 - 5
 - 6
 - 7
 - 8
 - 9
 - 10
 - More than 10

3. **According to your laboratory practice, which of the activities (where you are free from work related activities) are included in your paid hours?**
 - Breaks Number per day _____ Length of time _____
 - Lunch Length of time _____
 - Continuing education activities
 - Able to leave when maximum number of slides are screened (paid for a full day if less hours are worked)

4. **How do you record your daily workload? Workload recording may include any combination of the following: Check all that are recorded separately in your laboratory.**
 - Total of all slides screened (GYN + Non-GYN)
 - Gyn total slides only
 - Non-Gyn slides only
 - Total of slides screened by image assisted – FOV only
 - Total of slides screened by image assisted – FMR

5. **For the most recent month of complete data, provide an estimate of the average number of slides you screen per day.**

Slide type	Number of Slides
Total (GYN & non-GYN)	
GYN slides – Image-Assisted FOV	
GYN slides – FMR	
GYN slides – Standard Microscope	

Attachment D: Image-Assisted Cytology Workload Assessment Survey - Cytotechnologist

6. For workload recording, how does your laboratory count a GYN slide? Select all that apply.

- Each slide screened for FOV is counted as one half (0.5) slide
- Each slide (FOV or FMR) is counted as 1 slide
- Each slide that is screened for FOV and a FMR is performed, count as 1 slide
- Each slide that is screened for FOV and a FMR is performed, count as 1.5 slides

Other – Describe policy _____

7. For workload recording, how does your laboratory count a NON-GYN slide? Select all that apply.

- Each case counts as 1 slide
- Each slide counts as 1 slide
- Each slide prepared by Cytospin® counts as 1 slide
- Each slide prepared by Cytospin® counts as 0.5 slide
- Each slide prepared by automated methods (other than Cytospin®) counts as 1 slide
- Each slide prepared by automated methods (other than Cytospin®) counts as 0.5 slide
- Each cell block slide counts as 1 slide
- Each cell block slide counts as 0.5 slide
- Each smear counts as 1 slide
- Each smear counts as 0.5 slide

Other _____

8. What criteria are used for INCREASING a CT's workload maximum? Select all that apply.

- CT consistently screens their workload maximum in less than 8 hours
- CT states they are able or want to screen more than their maximum
- Technical Supervisor determines that the CT is qualified to screen more
 - Review of at least 10% rescreen
 - Comparison of CT interpretation with technical supervisor's confirmation

Other – Describe your criteria _____

9. What criteria are used for DECREASING a CT's workload maximum? Select all that apply.

- CT consistently is unable to screen their workload maximum
- CT states they are unable to screen at their maximum
- Technical Supervisor determines that the CT should screen less
 - Review of at least 10% rescreen
 - Comparison of CT interpretation with technical supervisor's confirmation

Other – Describe your criteria: _____

10. Which method best describes your workflow process for Field of View (FOV) screening and Full Manual Review (FMR)?

- I screen the FOVs on all of my slides using the semi-automated screening device. I flag cells where a FMR is indicated. A different CT performs the FMR.
 - I screen the FOVs on all of my slides using the semi-automated screening device. I flag cells where a FMR is indicated. A pathologist performs the FMR using a standard microscope.
 - I screen the FOVs and perform an immediate FMR when indicated. Both reviews are performed using the semi-automated screening device
 - I screen the FOVs on all of my slides using the semi-automated screening device. I flag cells where a FMR is indicated and I perform the FMR using a standard microscope.
 - I only perform the FMR on slides where a different CT has flagged cells indicating a FMR is required. I perform the FMR using the semi-automated screening device.
 - I only perform the FMR on slides where a different CT has flagged cells indicating a FMR is required. I perform the FMR using a standard microscope.
 - Other _____
-
-

11. Please use your personal workload recording data from the most recent month of complete data to provide an average number of HOURS spent on both screening and non-screening tasks

Note: For the purposes of this survey, **SCREENING** includes any or all of the following tasks:

- a. calibrating the microscope
- b. matching a slide with a requisition and/or barcode scan
- c. loading a slide onto a microscope stage and focusing
- d. review a patient history and noting specific instructions
- e. screening a slide
- f. reviewing FOVs
- g. performing FMR when required
- h. marking cells, or “dotting” a slide
- i. record results of the test

NON-SCREENING activities include everything else.

Slide Type	Average Number of SCREENING HOURS per day
Total GYN plus NON-GYN	
GYN slides – Image-Assisted FOV	
GYN slides –FMR	
GYN slides – Standard Microscope	

Attachment D: Image-Assisted Cytology Workload Assessment Survey - Cytotechnologist

Activities	Average number of NON-SCREENING HOURS per day
Non-Screening	

1. Does your laboratory have a written policy that defines when a FMR is required?

- No written policy
 - Yes, reasons listed in the policy include: (check all that apply)
 - Reactive cells seen in the FOVs
 - Abnormal cells seen in the FOVs
 - Patients with a history of being high risk
 - No endocervical component seen in the FOVs
 - Scant cellularity seen in the FOVs
 - Evidence of infection is seen in the FOVs
 - Discretion of CT, Explain _____
-
-

2. Are you comfortable with your current workload maximum? Which best describes how you feel about your workload maximum?

- Guideline
- Expected productivity target

Glossary

Abbreviation	Definition
ASC-H	Atypical squamous cells – cannot exclude HSIL
ASC-US	Atypical squamous cells – of undetermined significance
CIN2	Cervical intraepithelial neoplasia
CT	Cytotechnologist
Cytospin®	Thermo Scientific - Shandon Cytospin® non-gyn thin layer centrifuge
FMR	Full manual review
FN	False negative interpretation
FNA	Fine needle aspiration
FOV	Field-of-view
FP	False positive interpretation
GYN	Gynecological cytology
HPV	Human papilloma virus
HSIL	High-grade squamous intraepithelial lesion
LSIL	Low-grade squamous intraepithelial lesion
NILM	Negative for Intraepithelial Lesion or Malignancy
Non-GYN	Nongynecological cytology
TP	True positive interpretation