

Draft Table 1: 2026 IFCPC Colposcopy Terminology of the Cervix

Section	Pattern
General assessment	<ul style="list-style-type: none"> Adequate or inadequate for the reason (eg, cervix obscured by inflammation, bleeding, scar). Squamocolumnar junction visibility: completely visible, partially visible, not visible. Transformation zone types 1, 2, 3.
Normal colposcopic findings	<ul style="list-style-type: none"> Squamous epithelium: mature, atrophic. Columnar epithelium; ectopy/ectropion. Normal transformation zone; nabothian cysts; crypt (gland) openings. Deciduosis in pregnancy. Lugol's Iodine brown staining.
Abnormal colposcopic findings	<ul style="list-style-type: none"> General principles <ul style="list-style-type: none"> Location of the lesion: <ul style="list-style-type: none"> Inside or outside the transformation zone. Location of the lesion by clock position. Size of the lesion: <ul style="list-style-type: none"> Number of cervical quadrants the lesion covers. Size as percentage of cervix. Grade 1 (minor): <ul style="list-style-type: none"> Fine mosaic. Fine punctation. Thin acetowhite epithelium. Irregular, geographic border. Grade 2 (major): <ul style="list-style-type: none"> Sharp border. Inner border sign. Ridge sign. Dense acetowhite epithelium. Coarse mosaic. Coarse punctuation. Rapid appearance of acetowhitening. Cuffed crypt (gland) openings. A concurrence of a Lugol's iodine non-stained area with any other Grade 2 (Major) lesion.

	<ul style="list-style-type: none"> • Nonspecific: <ul style="list-style-type: none"> ○ Lugol's Iodine non-stained (inside transformation zone). ○ Leukoplakia (keratosis, hyperkeratosis). ○ Erosion.
Suspicious for invasion	<ul style="list-style-type: none"> • Atypical vessels. • Fragile vessels. • Irregular exophytic lesion. • Necrosis. • Ulceration (necrotic). • Tumor or gross neoplasm.
Miscellaneous findings	<ul style="list-style-type: none"> • Congenital transformation zone. • Condyloma acuminatum. • Polyp (ectocervical or endocervical). • Inflammation. • Stenosis. • Congenital anomaly. • Posttreatment consequence. • Endometriosis.
Glandular abnormalities	<ul style="list-style-type: none"> • Lesions within the columnar epithelium: <ul style="list-style-type: none"> ○ Irregular or whitened glandular villi. ○ Enlarged gland openings. ○ Coalescent acidophilic papillae ("waxy patch" appearance).

Draft Table 2:

2011 IFCPC Clinical and Colposcopy Terminology of the Vagina

Section	Pattern
General assessment	<ul style="list-style-type: none"> • Adequate or inadequate for the reason (e.g. inflammation, bleeding, scar). • Transformation zone.
Normal colposcopic findings	<ul style="list-style-type: none"> • Squamous epithelium: mature or atrophic. • Lugol's Iodine brown staining.
Abnormal findings	<ul style="list-style-type: none"> • General principles: <ul style="list-style-type: none"> ○ Location <ul style="list-style-type: none"> ▪ Upper third or lower two-thirds. ▪ Anterior, posterior, or lateral (right or left).
	<ul style="list-style-type: none"> • Grade 1 (minor): <ul style="list-style-type: none"> ○ Thin acetowhite epithelium. ○ Fine punctuation. ○ Fine mosaic. ○ Papillary pattern.
	<ul style="list-style-type: none"> • Grade 2 (major): <ul style="list-style-type: none"> ○ Dense acetowhite epithelium. ○ Coarse punctuation. ○ Coarse mosaic.
	<ul style="list-style-type: none"> • Nonspecific grade: <ul style="list-style-type: none"> ○ Columnar epithelium (adenosis). ○ Leukoplakia. ○ Lugol's Iodine non-stained.
Suspicious for invasion:	<ul style="list-style-type: none"> • Atypical vessels. • Fragile vessels. • Irregular surface.

	<ul style="list-style-type: none"> • Exophytic lesion. • Necrosis. • Ulceration (necrotic). • Tumor/neoplasm.
Miscellaneous	<ul style="list-style-type: none"> • Erosion (traumatic). • Condyloma acuminatum. • Polyp. • Cyst. • Endometriosis. • Inflammation. • Vaginal stenosis. • Congenital transformation zone.

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Draft Addendum Table 3:

Cervical Excision and Specimen Terminology

Section	Pattern
Excision treatment types	<ul style="list-style-type: none"> • Excision type 1. • Excision type 2. • Excision type 3. • Excision type 4.
Excision specimen dimensions	<p>Length – Distance between the ectocervical (external or distal) and endocervical (internal or proximal) margin of the cone.</p> <p>Anteroposterior dimension- Distance between the anterior and posterior margin of the cone.</p> <p>Transverse dimension- Distance between the left and right margin of the cone.</p> <p>Comment: If the cone is not oriented, the dimensions should be randomly selected.</p>

Draft Addendum table 4:

Minimal Colposcopy Examination Reporting Criteria

• Indication for colposcopy.
• visualization of squamocolumnar junction.
• Transformation zone (TZ) type (1, 2, or 3).
• Size of abnormal TZ: % or Quadrants.
• Colposcopic impression:
• Ectocervix: normal, Grade 1 (minor), Grade 2. (major) or suspicious of cancer.
• Glandular epithelium: Normal or abnormal.
• Vagina: Normal or abnormal.
• Biopsy:
• Cervical biopsy: Yes/no, Number, Site.
• Vaginal biopsy: Yes/no, Number, Site.