



You are the Key to HPV Cancer Prevention

Working Towards Improved HPV Vaccine Coverage

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Centers for Disease Control and Prevention

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Disclosures

- ➡ No financial conflicts of interest

Alaskan Vaccine Dog



Southeastern Vaccine Dog

Using data to create an evidence-based
communication campaign

CDC FORMATIVE RESEARCH

HPV Vaccine Communications During the Healthcare Encounter

- ➡ HPV vaccine is often presented as ‘optional’ whereas other adolescent vaccines are recommended
- ➡ Some expressed mixed or negative opinions about the ‘new vaccine’ and concerns over safety/efficacy
- ➡ When parents expressed reluctance, providers were hesitant to engage in discussion
- ➡ Some providers shared parents’ views that teen was not at risk for HPV and could delay vaccination until older

Recommendations for CDC Communications based on Research with Moms

- ➡ Focus communication messages for parents
 - ➡ *HPV Vaccine is Cancer Prevention*
 - ➡ Several cancers caused by HPV
 - ➡ HPV vaccination at 11 or 12
 - ➡ No serious safety concerns
 - ➡ Many credible organizations support HPV vaccine recommendation
- ➡ Use plain language and layer messages to allow parents to easily choose the level of detail they wish to pursue

Recommendations for CDC Communications based on Research with Physicians

- ➡ Materials for clinicians to give to parents and patients
- ➡ Help clinicians have conversations with patients and parents
- ➡ Physicians providing HPV vaccine, especially pediatricians, do not routinely see the results of not vaccinating and *therefore may benefit from peer-to-peer education from physicians who routinely treat HPV-related cancers*

Focus Groups with Moms: Recommendations for CDC Comms for HCP Audience Media

- ➡ Continue to encourage clinicians to give strong recommendations for the HPV vaccine
- ➡ Guidance for doctors to group vaccine recommendations and not separate HPV vaccine
- ➡ Develop a CME video for doctors about providing strong recommendations for the HPV vaccine

Focus Groups with Moms: Recommendations for CDC Comms for Parent Audience Media

- ➡ Identify audience on the material
- ➡ Do not make general statements, include more statistics
- ➡ Explain research involved in vaccine safety
- ➡ Emphasize message about vaccinating early
- ➡ Define sexual activity
- ➡ Address main questions from participants

Goals Based on Formative Research

WE WANT PARENTS TO:

- ➡ Realize **HPV vaccine is CANCER PREVENTION**
- ➡ Understand HPV vaccine is **best at 11 or 12 years old**
- ➡ Recognize importance of getting **all 3 shots**

Goals Based on Formative Research

WE WANT HEALTHCARE PROFESSIONALS TO:

- ➡ Be familiar with **all of the indications** for HPV vaccine
- ➡ Make **strong recommendations** for receiving vaccine at 11 or 12
- ➡ Be aware of, and interested in, **systems** that can improve practice vaccination rates

Tips and Time-savers for Talking with Parents about HPV Vaccine



Recommend the HPV vaccine series the same way you recommend the other adolescent vaccines. For example, you can say “Your child needs these shots today,” and name all of the vaccines recommended for the child’s age.

Parents may be interested in vaccinating, yet still have questions. Taking the time to listen to parents’ questions helps you save time and give an effective response. CDC research shows these straightforward messages work with parents when discussing HPV vaccine—and are easy for you or your staff to deliver.

- CDC RESEARCH SHOWS:** The “HPV vaccine is cancer prevention” message resonates strongly with parents. In addition, studies show that a strong recommendation from you is the single best predictor of vaccination.
- TRY SAYING:** HPV vaccine is very important because it prevents cancer. I want your child to be protected from cancer. That’s why I’m recommending that your daughter/son receive the first dose of HPV vaccine today.
- CDC RESEARCH SHOWS:** Disease prevalence is not understood, and parents are unclear about what the vaccine actually protects against.
- TRY SAYING:** HPV can cause cancers of the cervix, vagina, and vulva in women, cancer of the penis in men, and cancers of the anus and the mouth or throat in both women and men. There are about 26,000 of these cancers each year—and most could be prevented with HPV vaccine. There are also many more precancerous conditions requiring treatment that can have lasting effects.
- CDC RESEARCH SHOWS:** Parents want a concrete reason to understand the recommendation that 11–12 year olds receive HPV vaccine.
- TRY SAYING:** We’re vaccinating today so your child will have the best protection possible long before the start of any kind of sexual activity. We vaccinate people well before they are exposed to an infection, as is the case with measles and the other recommended childhood vaccines. Similarly, we want to vaccinate children well before they get exposed to HPV.
- CDC RESEARCH SHOWS:** Parents may be concerned that vaccinating may be perceived by the child as permission to have sex.
- TRY SAYING:** Research has shown that getting the HPV vaccine does not make kids more likely to be sexually active or start having sex at a younger age.
- CDC RESEARCH SHOWS:** Parents might believe their child won’t be exposed to HPV because they aren’t sexually active or may not be for a long time.
- TRY SAYING:** HPV is so common that almost everyone will be infected at some point. It is estimated that 79 million Americans are currently infected with 14 million new HPV infections each year. Most people infected will never know. So even if your son/daughter waits until marriage to have sex, or only has one partner in the future, he/she could still be exposed if their partner has been exposed.

**CDC RESEARCH
SHOWS:
TRY SAYING:**

Many parents do not know that the full vaccine series requires 3 shots. Your reminder will help them to complete the series.

I want to make sure that your son/daughter receives all 3 shots of HPV vaccine to give them the best possible protection from cancer caused by HPV. Please make sure to make appointments on the way out, and put those appointments on your calendar before you leave the office today!



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www.cdc.gov/vaccines/teens | PreteenVaccines@cdc.gov

CS14071A

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How Do We Improve HPV Vaccination Rates?

Some things we need to consider:

- ➡ Initiation vs. completion predictors differ
- ➡ Provider “hesitancy” (weak recommendations)
 - ➡ Potential factors: risk assessment, resistant to 11-12 yr rec, cost, competing priorities, communication skills
- ➡ Parental attitudes likely amenable to provider communication if clinicians are convinced & confident
- ➡ System interventions depend on clinician commitment
 - ➡ E.g., Missed opportunities, AFIX, HEDIS (positive feedback loops) require clinicians to buy-in to purpose & targets

What's in a recommendation?

- ▶ **Studies consistently show that a strong recommendation from you is the single best predictor of vaccination**
- ▶ In focus groups and surveys with moms, having a doctor recommend or not recommend the vaccine was an important factor in parents' decision to vaccinate their child with the HPV vaccine
- ▶ Not receiving a recommendation for HPV vaccine was listed a barrier by mothers

Just another adolescent vaccine

- ▶ **Successful recommendations group all of the adolescent vaccines**
 - ▶ Recommend the HPV vaccine series the same way you recommend the other adolescent vaccines
 - ▶ Moms in focus groups who had not received a doctor's recommendation stated that they questioned why they had not been told or *if the vaccine was truly necessary*
 - ▶ Many parents responded that they trusted their child's doctor and would get the vaccine for their child as long as they received a recommendation from the doctor

Try saying:

Your child needs three shots today: HPV vaccine, meningococcal vaccine and Tdap vaccine.

You child will get three shots today that will protect him/her from many cancers caused by HPV, as well as to prevent tetanus, diphtheria, pertussis and meningitis.

A case of vaccine hesitancy?

- ➡ **Parents may be interested in vaccinating, yet still have questions**
 - ➡ However, many parents didn't have questions or concerns about HPV vaccine
 - ➡ A question from a parents does not mean they are refusing or delaying
 - ➡ Taking the time to listen to parents' questions helps you save time and give an effective response
 - ➡ CDC research shows these straightforward messages work with parents when discussing HPV vaccine—and are easy for you or your staff to deliver

Why should I get this vaccine for my child?

- ▶ The “HPV vaccine is cancer prevention” message resonates strongly with parents
 - ▶ In focus groups and online panels, mothers wanted more information on the types of HPV cancers
 - ▶ In focus groups mothers stated they were influenced to vaccinate their child because HPV vaccine prevents cancer, they had a family history of cervical cancers, and/or because they had a personal experience with cervical cancer

Try saying:

HPV vaccine is very important because it prevents cancer.

I want your child to be protected from cancer.

That's why I'm recommending that your daughter/son receive the first dose of the HPV vaccine series today.

HPV Transmission

- ➡ Almost everyone will be infected but most people will never know
- ➡ Nearly 50% of high school students have already engaged in sexual (vaginal-penile) intercourse
 - ➡ 1/3 of 9th graders and 2/3 of 12th graders have engaged in sexual intercourse
 - ➡ 24% of high school seniors have had sexual intercourse with 4 or more partners

Try saying:

HPV is so common that almost everyone will be infected at some point. It is estimated that 79 million Americans are currently infected with 14 million new HPV infections each year.

Most people infected will never know. Even if your child waits until marriage to have sex, or only has one partner in the future, he/she could still be exposed, if their partner has already been exposed.

Resources for HPV vaccine communication campaigns

COMMUNICATION TOOLS

Vaccines for Preteens and Teens Website

CDC Home
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CDC 24/7: Saving Lives. Protecting People.™

Vaccines and Immunizations
All CDC Topics
Choose a topic above
SEARCH

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Preteen and Teen Vaccines

Vaccines Home > Specific Groups

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Preteens and Teens Still Need Vaccines

As kids get older, protection from some childhood vaccines begins to wear off. Plus, older kids can also develop risks for other diseases. Health check-ups and sports or camp physicals can be a good opportunity for your preteens and teens to get the recommended vaccines.

Get HPV Vaccine Facts
Everything you need to know about HPV vaccine GO»

Replay NIS-Teen Data
Tips 4 Clinicians
HPV Information »

HPV Vaccine Is Cancer Prevention

You can CLOSE the DOOR to cancer.

Facts about HPV Vaccine

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For Preteens and Teens
Vaccines for Preteens and Teens
For Health Care Professionals
For Public Health Professionals
Teen Vaccination Coverage
Multimedia Products
References and Publications

Related Links
Vaccine Information Statements
Basics and Common Questions
Why Immunize?
Vaccines: The Basics

Site Organized by Audience

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Preteen and Teen

Preteen and Teen Home

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- For Preteens and Teens
- Vaccines for Preteens and Teens
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- For Public Health Professionals
- Teen Vaccination Coverage
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- References and Publications

Related Links

- Vaccine Information Statements
- Basics and Common Questions
- Why Immunize?
- Vaccines: The Basics

Vaccines Home > Specific Groups > Preteen and Teen Home

For Parents

Why Vaccinate Now?

1. Vaccine protection from some childhood vaccines wears off, so your teen needs a booster shot.
2. As kids get older, they are more at risk for catching diseases, like meningococcal meningitis, so they need protection that vaccines provide.
3. The recommended immunization schedule is regularly updated to include new vaccines and reflect current research. So, it has probably changed since your child was first immunized.
4. Specific vaccines, like HPV, are recommended to be given during the preteen (11-12) years and teen (13-18) years.

Many children see their doctors or other health care professionals for physicals before participation in sports, camping events, travel, applying to college, and so on. All of these wellness check-ups provide a perfect opportunity to ask about vaccines for your preteen or teen.

Help protect your teen's health by getting them vaccinated according to the [recommended](#)



Vaccines can help your preteen and teenage children become healthy adults. Talk to your child's doctor or nurse about vaccines for teens during their next health care visit.

Vaccines Home > Specific Groups > Preteen and Teen Home

For Preteens and Teens

Learn more so that you can talk to your parents and your doctor about the vaccines you need and the diseases they prevent.

What Vaccines Might You Need

- **Preteen and teen vaccines**
4 shots (preventing 6 diseases) meningococcal, tetanus, diphtheria, pertussis, human papillomavirus, and influenza.
- **Catch-up vaccines** (those who were not immunized, or were not fully immunized before 2 years old)
3-4 shots (preventing 6 diseases) hep B, polio, measles, mumps, rubella, and varicella
- **Vaccines for those at high-risk** (international travel and many health conditions)
2 shots (2 diseases) hep A and pneumococcal

[Learn more about vaccine preventable diseases >>](#)



On this Page

- Before & After the Shot(s)
- What Vaccines Might You Need
- More About Vaccines & Diseases they Prevent
- Related Sites

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For Public Health Professionals

Adolescents (ages 10 to 19) and young adults (ages 20 to 24) make up 21 percent of the population of the United States.¹ The leading causes of illness and death among adolescents and young adults are largely preventable.²

We all know advocating for adolescent immunizations takes time. That's why this site was created—to provide resources and materials for your activities promoting adolescent vaccines.



Print and use these materials

Adolescent immunization campaign communication resources available at no cost:

- posters, fact sheets, and flyers
- matte releases/articles
- podcasts, videos, and PSAs

Find the answers to your questions

- **Vaccines for Children program**
Information segmented for states & territories, providers and parents
- **Vaccine Safety**
CDC's Immunization Safety Office identifies possible vaccine side effects and conducts studies to determine whether a health

Vaccines Home > Specific Groups > Preteen and Teen Home

For Health Care Professionals/Providers

The resources below can be used to assist doctors, nurses and other health professionals in speaking with patients and their parents about adolescent vaccines.

Provider Factsheet [color - 308 KB, 4 pages]
Factsheet about adolescent vaccines developed specifically for the doctors, nurses and other health care professionals. Also available in **black & white** [214 KB, 4 pages]

Health eCard

For Patient Reminder/Recall
Preteen and teen vaccines are on our radar. Are they on yours?
[more eCards >>](#)

Reminder Systems and Strategies for Increasing Vaccination Rates

Vaccine Recommendations & Administration

- Adolescent immunization schedule (7-18 years old)
- Screening Questionnaire Teen Immunization [108 KB, 2 pages] [DP](#)
Tool for determining which vaccines may be needed for your 9-18 year old patients

DO YOUR PART
for Vaccine Safety — Report to VAERS.
Vaccine Adverse Event



Site Topics

CDC Home
Centers for Disease Control and Prevention
CDC 24/7: Saving Lives

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Preteen and Teen

Preteen and Teen Home

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- For Preteens and Teens
- Vaccines for Preteens and Teens
- For Health Care Professionals
- For Public Health Professionals
- Teen Vaccination Coverage
- Multimedia Products
- References and Publications

Related Links

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Vaccines for Preteens and Teens



Tdap
Tdap vaccine is recommended for preteens at ages 11 or 12 years for protection against tetanus, diphtheria and pertussis...



HPV
HPV vaccines protect against HPV types that cause most cervical cancer...



Meningococcal (MCV4)
Protects against the bacteria that are one of the causes of meningitis. MCV4 is recommended for all preteens at age 11 or 12.



Flu
Everyone 6 months of age and older should get a flu vaccine every year...

Teen Vaccination Coverage

2012 National Immunization Survey (NIS) - Teen Summary of Main Points

The Advisory Committee on Immunization Practices (ACIP) recommends that preteens get Tdap, MCV4, and the first HPV vaccine dose during a single visit. However, the National Immunization Survey-Teen (NIS-Teen) vaccination coverage data collected in 2012 show that too many boys and girls are not being vaccinated with HPV and meningococcal vaccines when they receive Tdap vaccine. Without these life-saving vaccines, preteens and teens are at risk of infections with HPV and vaccine-preventable bacterial meningitis.

Since 2009, the yearly national vaccination coverage estimate among teens for one dose of meningococcal conjugate vaccine has been lower than the estimate for one dose of Tdap vaccine, and the difference in coverage between the two vaccines is widening. Among females, vaccination coverage estimates for HPV vaccination remained low and did not increase at all from 2011 to 2012.

From 2011 to 2012, vaccination coverage among U.S. adolescents between the ages of 13 and 17 years increased to about 85% for at least one dose of Tdap vaccine, 74% for at least one dose of MCV4 vaccine, and, among males, to about 21% for at least one dose of HPV vaccine. In 2012, vaccination coverage for at least one

2012 HPV Vaccination Coverage for Girls



Multimedia Products



Print Materials
Preteens and teens related fact sheets, flyers, and posters...



Web Tools
This page lists preteen and teen related web features, eCards, and web button...



Video and Audio Resources
This page lists preteen and teen related podcasts, PSAs, and videos...



Matte Articles
This page lists preteen and teen related matte articles...

References and Publications

Adolescents' Vaccine Preventable Diseases

General

- Gargano LM, et al. Multicomponent interventions to enhance influenza vaccine delivery to adolescents. *Pediatrics*. 2011 Nov;128(5):e1092-9.
- Stokley S, Cohn A, Dorell C, Hariri S, Yankey D, Messonnier N, Wortley PM. Adolescent Vaccination-Coverage Levels in the United States: 2006-2009. [11 pages]. *Pediatrics*. 2011 Nov 14. [Epub ahead of print]
- Lindley MC, Smith PJ, Rodewald LE. Vaccination Coverage Among U.S. Adolescents Aged 13-17 Years Eligible for the Vaccines for Children Program, 2009. *Public Health Rep*. 2011;126 Suppl 2:124-34.
- Stokley S, Vogt T, Shefer A. Increasing Adolescent Vaccination Coverage: The Challenges That Remain. *Arch Pediatr Adolesc Med*. 2011; 165(6): 568-70.
- For Everyone: Easy-to-read Schedules
- Epidemiology and Prevention of Vaccine-Preventable Diseases (Pink Book) 2011.

Adolescent Reminder/Recall Systems

- Clark SJ, Butchart A, Kennedy A, Dombkowski KJ. Parents' experiences with and preferences for immunization reminder/recall technologies. *Pediatrics*. 2011 Nov;128(5):e1100-5.
- Szilagyi PG, Humiston SG, Gallivan S, Albertin C, Sandler M, Blumkin A. Effectiveness of

On this Page

- General
- Reminder/Recall
- Tdap and Tetanus, Diphtheria, and Pertussis
- Meningitis and MCV4
- HPV Vaccine
- Flu Vaccine

Communication Products and Tools: Parent Audience

Multimedia Products



Print Materials

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Matte Articles

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You're
not
opening
the door
to sex.

● You're
closing
the
door to
cancer.

HPV vaccine is
cancer prevention.

Talk to your child's doctor about
vaccinating your 11-12 year old
against HPV.

www.cdc.gov/vaccines/teens



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If there were a
vaccine against
cancer, wouldn't
you get it for
your kids?

HPV vaccine is
cancer prevention.

Talk to the doctor
about vaccinating
your 11-12 year old
sons and daughters
against HPV.

www.cdc.gov/vaccines/teens



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YOU ARE THE KEY TO
CANCER PREVENTION

Communication Products and Tools: Clinician Audience

HPV Vaccine Resources for Healthcare Professionals



HPV Vaccine is Cancer Prevention

Overview Tools for Your Practice Handouts to Give to Patients & Parents

You Are the Key to HPV Cancer Prevention



Resource Spotlight



Understanding the Burden of HPV-Related Cancers [1.51MB]



Tips for Talking to Parents about HPV Vaccine [1 page]

Customize this slideset for presentations on HPV and HPV vaccination.

Tips for Talking to Parents about HPV Vaccine

Tips and Time-savers for Talking with Parents about HPV Vaccine

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HPV Fact Sheet for Clinicians

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CDC 24/7: Saving Lives. Protecting People.™

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Sexually Transmitted Diseases (STDs)

Sexually Transmitted Diseases

Diseases & Related Conditions

- Bacterial Vaginosis (BV)
- Chlamydia
- Gonorrhea
- Hepatitis
- Herpes
- HIV/AIDS & STDs
- Human Papillomavirus (HPV)

► **Vaccine Information for Clinicians**

- Pelvic Inflammatory Disease (PID)
- Syphilis
- Trichomoniasis
- Other STDs
- Life Stages and Populations
- Prevention
- Pregnancy & Infertility

[Sexually Transmitted Diseases](#) > [Diseases & Related Conditions](#) > [Human Papillomavirus \(HPV\)](#)

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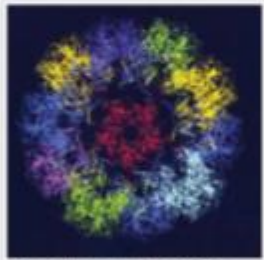
HPV Vaccine Information for Clinicians - Fact Sheet

CDC and partners, including the American Academy of Pediatrics, recommend HPV vaccination of both girls and boys at ages 11 or 12 years and suggest that clinicians strongly recommend HPV vaccination for preteens and teens who have not yet been fully vaccinated.

Background

Approximately 20 million people are currently infected with genital human papillomavirus (HPV) in the United States (U.S.). As many as half of these infections are among adolescents and young adults, ages 15 through 24 years of age. HPV is so common that most sexually active adults become infected at some point in their lives.

Of the more than 40 HPV types that infect human mucosal surfaces, most infections are asymptomatic and transient. However, certain oncogenic types that persist can cause cervical cancer and other, less common cancers, including cancers of the anus, penis, vulva, vagina, and oropharynx (back of throat including base of tongue and tonsils). Other, non-oncogenic HPV types can cause genital warts and, rarely, respiratory tract warts in children which is a condition called juvenile-onset recurrent respiratory papillomatosis (RRP).



Virus-like particles (VLPs) assembled from the L1 protein of human papillomavirus 16

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HPV Portal

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Human Papillomavirus (HPV)

Cervical Cancer Screening

The Pap test is recommended for women 21 to 65 years

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Human papillomavirus (pap-ah-LO-mah-VYE-rus) (HPV) is the most common sexually transmitted virus in the United States. Almost every sexually active person will acquire HPV at some point in their lives.

HPV Topics

What is HPV?

Learn about the health problems caused by HPV and how the infection is spread

Signs and Symptoms

Discover the signs and symptoms of HPV and related conditions

HPV Vaccines

Get information about the vaccines that can prevent HPV infection

HPV Vaccine Safety

Find answers to your vaccine safety questions

News & Information

- New study shows HPV vaccine helping lower HPV infection rates in teen girls
- HPV vaccine coverage in the U.S.

Professional Resources

Immunization Schedules, Recommendations, and more

Tools for your Practice

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Immunization Schedules

Schedules

- For Health Care Professionals
- For Everyone: Easy-to-read Schedules
- Display Schedules in Your Website
- Web Buttons
- Print Immunization Schedules

Related Links

- Vaccine Information Statements
- ACIP Vaccination Recommendations
- Why Immunize?
- Vaccines: The Basics

Schedules and Tools

Schedules to order or print to consult, and tools to:

- Birth-18 Years and Adult: Find printable version, regular paper, pocket laminated, load on vi the (optional) resource
- Adult Version: Find printable format, download the interact schedule in your site

Information for Health Care Professionals about Adolescent Vaccines

The Centers for Disease Control and Prevention (CDC) recommends four vaccines for adolescents to prevent:

- Tetanus, Diphtheria, Pertussis
- Meningococcal disease
- Human papillomavirus
- Influenza

What can YOU do to ensure your patients get fully vaccinated?

- Strongly recommend adolescent vaccines to parents of your 11 through 18 year old patients. Parents trust your opinion more than anyone else's when it comes to immunizations. Studies consistently show that provider recommendation is the strongest predictor of vaccination.
- Use every opportunity to vaccinate your adolescent patients. Ask about vaccination status when they come in for sick visits and sports physicals.
- Patient reminder and recall systems such as automated postcards, phone calls and text messages are effective tools for increasing office visits.

Tdap	HPV	MCV4	Flu
Tetanus & diphtheria toxoids & acellular pertussis vaccine (Tdap) Summary for ACIP Recs for Tdap: - Administer Tdap at age 11-12, as well as at age 13-16 if they have not yet received Tdap, followed by Td booster dose every 10 years. - Those 7-10 year not fully immunized, never vaccinated, or have unknown status against pertussis should receive single dose of Tdap. Refer to the catch-up schedule if additional doses of Td-containing vaccine are needed. - Tdap can be administered regardless of interval since the last Td-containing vaccine. - For pregnant teens not previously vaccinated with Tdap, administer one dose of Tdap during the third trimester or late second trimester.	Human papillomavirus vaccine (HPV) Summary for ACIP Recommendations for HPV: - HPV4 or HPV2 is recommended for the prevention of cervical precancers and cancers in females. - HPV4 is recommended for prevention of cervical and anal precancers, cancers, as well as genital warts in females. - HPV4 is recommended for prevention of anal precancers and cancers, as well as genital warts in males. - HPV vaccine is a 3-dose series. Administer the second dose 1 to 6 m after the first dose and the third dose 6 m after the first dose (at least 24 weeks after the first dose).	Meningococcal conjugate vaccine, quadrivalent (MCV4) Summary for ACIP Recommendations for MCV4: - Administer MCV4 at age 11-12 with a booster dose at age 16 years. - Administer 1 dose at age 13-16 if not previously vaccinated. - Persons who received their first dose at age 13-15 should receive a booster dose at age 16-18 years. - Administer 1 dose to previously unvaccinated college freshmen living in a dormitory or military recruits living in barracks. - Persons with HIV infection who are vaccinated with MCV4 should receive 2 doses at least 8 weeks apart.	Influenza vaccine (seasonal) Summary for ACIP Recommendations for Influenza: - Annual influenza vaccination is recommended for everyone 6 months of age and older. - For healthy nonpregnant persons age 7-18 (i.e., those who do not have underlying medical conditions that predispose them to influenza complications), either LAIV or TIV may be used.

Patient and Parent Handouts

HPV Vaccine for Preteens and Teens

Why does my child need HPV vaccine?

This vaccine is for protection from most of the cancers caused by human papillomavirus (HPV) infection. HPV is a very common virus that spreads between people when they have sexual contact with another person. About 14 million people, including teens, become infected with HPV each year. HPV infection can cause cervical cancer in women and penis cancer in men. HPV can also cause anal cancer, throat cancer and genital warts in both men and women.

When should my child be vaccinated?

The HPV vaccine is recommended for preteen boys and girls at age 11 or 12 so they are protected before ever being exposed to the virus. If your teen hasn't gotten the vaccine yet, talk to their doctor about getting it for them as soon as possible.

The HPV vaccine is given in 3 shots. The second shot is given 1 or 2 months after the first shot. Then a third shot is given 6 months after the first shot. Be sure that your child gets all 3 shots for full protection.

What else should I know about HPV vaccine?

There are two HPV vaccines. Girls and young women should get either HPV vaccine to prevent cervical cancer.

One of the HPV vaccines also protects against genital warts and anal cancer in both females and males. Boys should get this HPV vaccine to prevent anal cancer and genital warts. Girls can get this vaccine to prevent cervical cancer, anal cancer and genital warts.

Both HPV vaccines have been studied very carefully. These studies showed no serious safety concerns. Common, mild

adverse events reported during these in the arm where the shot was given, such as:

Some preteens and teens might faint before or after the shot. Preteens and teens should be watched for 15 minutes after the shot. This can help prevent any injury that could happen while they are waiting.

Serious side effects from the HPV vaccine are very rare. It is important to tell the doctor or nurse if your child has any allergies, including an allergy to gelatin. A vaccine is not recommended for anyone with a severe allergy to gelatin.

HPV vaccination is recommended by the American Academy of Pediatrics, the American Academy of Family Physicians, the American Society of Human Genetics, and the Society for Adolescent Medicine.

How can I get help paying for the vaccine?
The Vaccines for Children (VFC) program provides HPV vaccine for children ages 18 years and under who are not insured or under-insured. Medicaid or Alaska Native. You can find VFC program by going online to www.vfc.gov or by calling 1-800-368-5938.

Where can I learn more?

For more information about HPV vaccine for preteens and teens, talk to your doctor or nurse. More information is also available at www.cdc.gov/vaccines/teens.



Vaccines for Preteens and Teens: What Parents Should Know

Why does my child need vaccines now?

Vaccines aren't just for babies. Some of the vaccines that babies get can wear off as kids get older. And as kids grow up they may come in contact with different diseases than when they were babies. There are vaccines that can help protect your preteen or teen from these other illnesses.

What vaccines does my child need?

Tdap Vaccine

This vaccine protects against three serious diseases: tetanus, diphtheria, and pertussis (whooping cough). Preteens should get Tdap at age 11 or 12. If your teen didn't get a Tdap shot as a preteen, ask their doctor or nurse about getting the shot now.

MCV4 Vaccine

Meningococcal conjugate vaccine (MCV4) protects against some of the bacteria that can cause meningitis (swelling of the lining around the brain and spinal cord) and sepsis (an infection in the blood). Preteens need the MCV4 shot when they are 11 or 12 years old and then they need a booster shot at age 16. Teens who got the MCV4 shot when they were 13, 14 or 15 years old should still get a booster at 16 years. Older teens who haven't gotten any MCV4 shots should get it as soon as possible.

HPV Vaccine

Human papillomavirus (HPV) vaccine helps protect both girls and boys from HPV infection and cancer caused by HPV. Two HPV vaccines protect girls from the types of HPV that cause most cervical cancer. One HPV vaccine also helps protect both girls and boys from anal cancer and genital warts. HPV vaccines are given to preteens as 3 shots over 6 months when they are 11 or 12 years old. Preteens and teens need to get all 3 shots for full protection. Preteens and teens who haven't gotten all 3 HPV shots should ask the doctor or nurse about getting them now.

Flu Vaccine

This vaccine protects against influenza (flu) and the other health problems flu can cause, like dehydration (loss of body

fluid), worsening of conditions like asthma or diabetes, or pneumonia. Preteens and teens should get the flu vaccine every year as soon as it's available, usually in the fall. It is very important for preteens and teens who have chronic health conditions like asthma or diabetes to get the flu vaccine as soon as possible every year.

When should my child be vaccinated?

A good time to get these vaccines is during a yearly health checkup. Your preteen or teen can also get these vaccines at a physical exam required for sports, school, or camp. It's a good idea to ask the doctor or nurse every year if there are any vaccines that your child may need.

What else should I know about these vaccines?

These vaccines have all been studied very carefully and are safe and effective. They can cause mild side effects, like soreness or redness where the shot was given. Some preteens and teens might faint after getting a shot. Lying down when getting a shot and then for about 15 minutes after the shot, can help prevent fainting. Serious side effects are rare. It is very important to tell the doctor or nurse if your child has any serious allergies, including allergies to yeast, latex or chicken eggs, before they receive any shots.

How can I get help paying for these vaccines?

The Vaccines for Children (VFC) program provides vaccine for children ages 18 years and younger, who are not insured or under-insured, Medicaid-eligible, American Indian or Alaska Native. You can find out more about the VFC program by going online to www.vfc.gov and typing VFC in the search box.

Where can I learn more?

Talk to your child's doctor or nurse about what vaccines they may need. You can also find more information about the CDC's Vaccines for Preteens and Teens website at www.cdc.gov/vaccines/teens.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

...you do everything you can to protect your child's health for now and for the future. It's a strong weapon to prevent several ... in our kids: the HPV vaccine.

Cancer

For Human Papillomavirus, a common ... United States each year, there are ... women and 9,300 men affected by ... cancers. Many of these cancers could be ... with vaccination. In both women and ... cancer and cancer and mouth/throat ... cancer. It can also cause cancers of ... and vagina in women, and cancer of ...

... screening is available to detect most ... cancer with a Pap smear. Unfortunately, ... screening for other HPV-related ... or men, and these cancers can ... or even death. That is why a ... prevents most of these types of ...

But HPV

... passed from one person to another ... skin-to-skin contact, including vaginal ... sex. HPV is most common in people ... and early 20s. Almost all sexually ... will get HPV at some time in their lives, ... will never even know it.

... even, the body naturally fights off HPV, ... does any health problems. But in some ... does not fight off HPV, and HPV can ... children, like cancer and genital warts, ... are not a life-threatening disease, but ... emotional stress, and their treatment ... uncomfortable. About 1 in 100 sexually ... in the United States have genital warts at ...

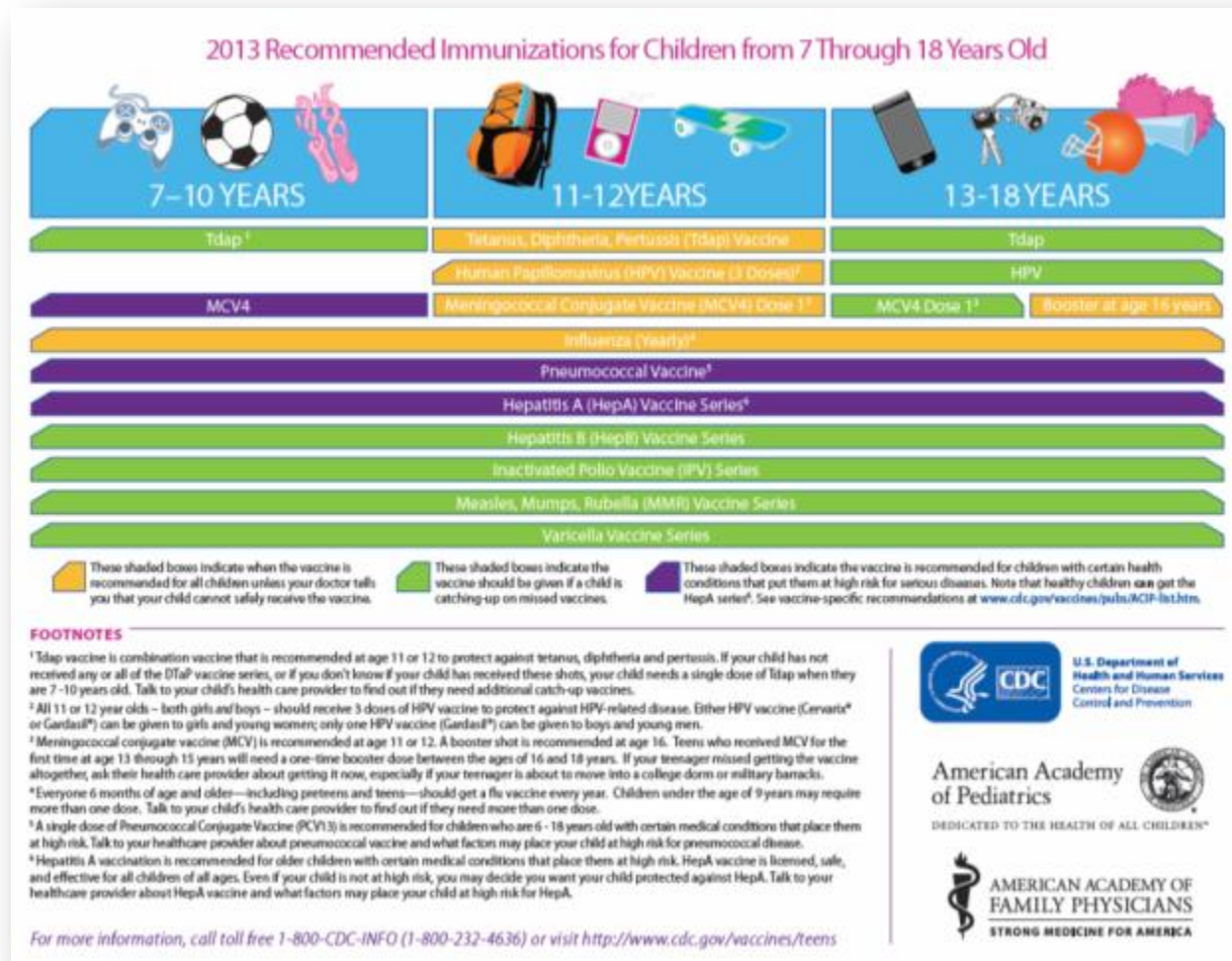
Does my child need this now?

... offers the best protection to girls and boys who receive all ... one disease and have time to develop an immune response before ... sexual activity with another person. This is not to say that your ... is ready to have sex. In fact, it's just the opposite—it's important ... a child protected before you or your child have to think about this ... immune response to this vaccine is better in preteens, and this ... an better protection for your child. >



YOU ARE THE KEY TO
CANCER PREVENTION

Adolescent Immunization Schedule



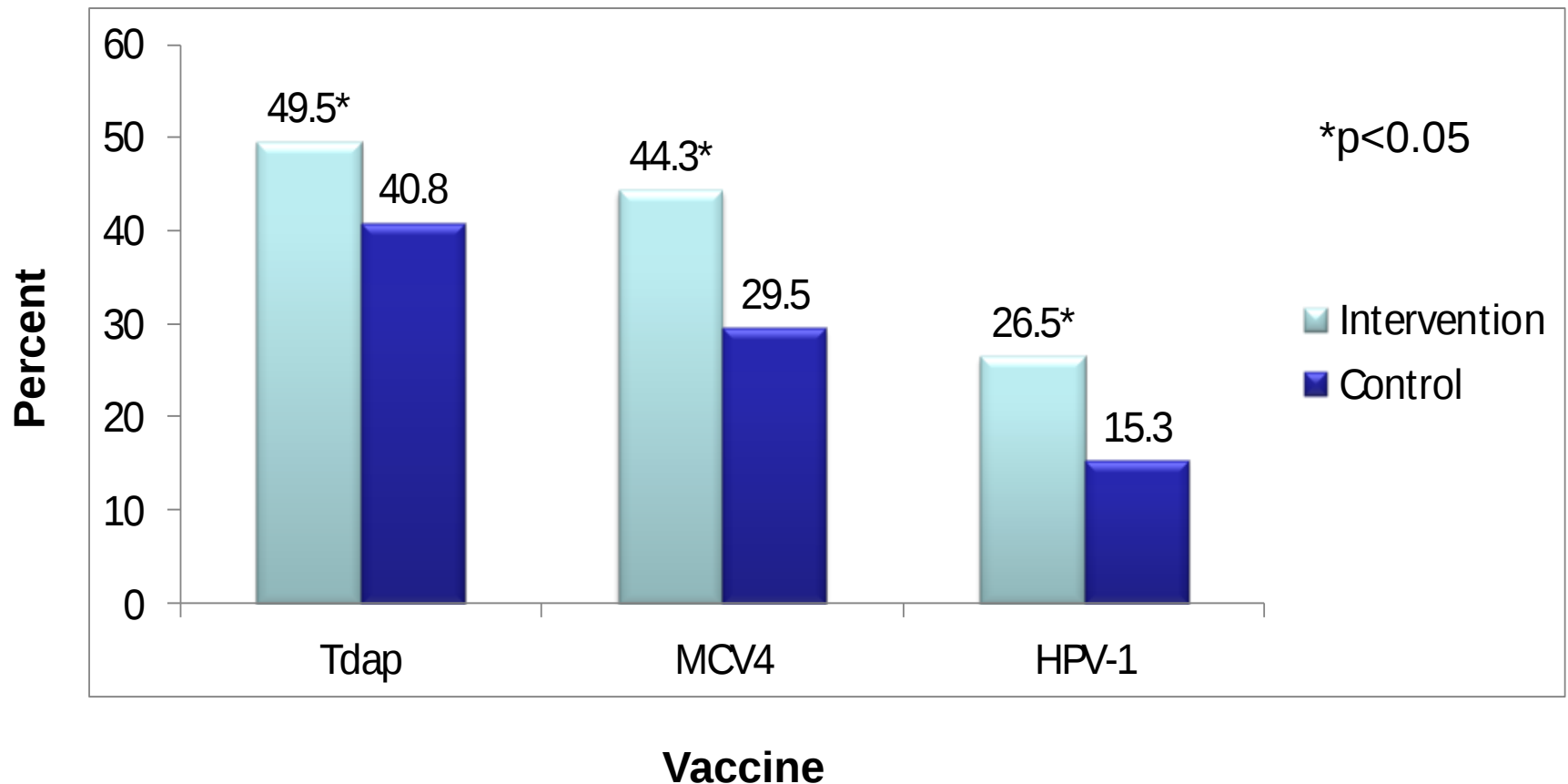
High-Impact Activities to Improve Coverage

STRATEGIES

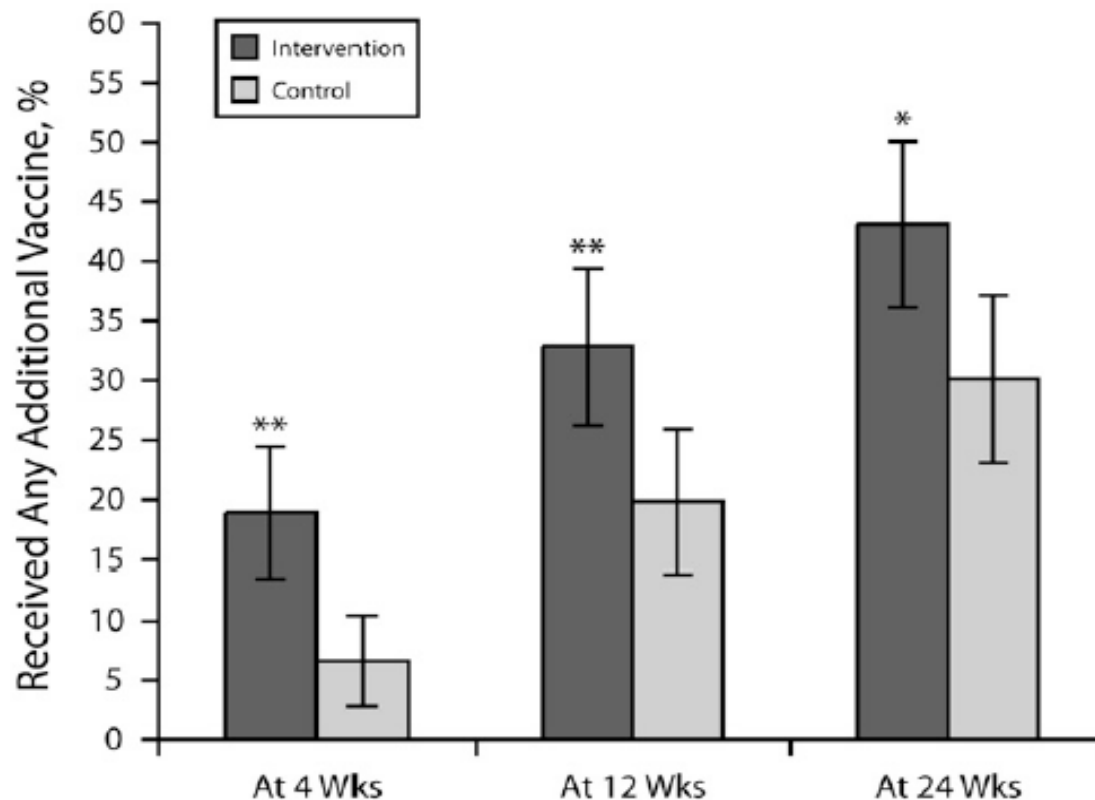
Evidence-based strategies to improve vaccination coverage in healthcare setting

- ➡ **Reminder/recall system**
- ➡ **Standing orders**
- ➡ **Provider assessment and feedback**
- ➡ **Utilizing immunization information systems**

Impact of Reminder/Recall on Vaccination Rates among Adolescents



Percentages of adolescents 11-18 years of age who received any vaccination at 4, 12, and 24 weeks: Text4Health-Adolescents, New York City, 2009



Suggestions to Improve Your Immunization Services



Following are several ideas that healthcare professionals and practices can use to improve their efficiency in administering vaccines and increase their immunization rates. Read each idea and check the response that applies to your work setting.

Yes = We already practice this.
 No = We don't like this idea, or it couldn't work in our practice setting.
 Partly = We do some of this (or do it sometimes); we will consider it.

- | | Yes | No | Partly |
|--|-----------------------|-----------------------|-----------------------|
| 1. In all exam rooms, we post the current, official U.S. immunization schedule for children and/or adults or variations thereof (for example, the official schedule of a medical society or of a state health department). | ☐ | ☐ | ☐ |
| 2. We use the official "catch-up" schedule for children for advice on how to bring children up to date on their vaccinations when they have fallen behind. | ☐ | ☐ | ☐ |
| 3. We are familiar with special vaccination recommendations for high-risk patients (e.g., special groups who need hepatitis A, hepatitis B, pneumococcal, influenza vaccines). | ☐ | ☐ | ☐ |
| 4. When scheduling appointments, we remind patients/parents to bring along their (or their | ☐ | ☐ | ☐ |

- | | Yes | No | Partly |
|--|-----------------------|-----------------------|-----------------------|
| 9. Prior to patient visits, we review the immunization record for each patient and flag charts of those who are due or overdue. | ☐ | ☐ | ☐ |
| 10. We provide vaccination services during some evening and/or weekend hours. | ☐ | ☐ | ☐ |
| 11. Patients can walk in during office hours for a "nurse only" visit and get vaccinated. | ☐ | ☐ | ☐ |
| 12. We use all patient encounters (including acute-care and follow-up visits) to assess and provide vaccinations. | ☐ | ☐ | ☐ |
| 13. Whenever a patient comes in, the staff routinely asks to see his/her immunization record to determine if the patient received vaccinations at another healthcare site. | ☐ | ☐ | ☐ |
| 14. If a patient tells us "I'm up to date with my | ☐ | ☐ | ☐ |



URGENT CALL TO PREVENT CANCER – TAKE THE HPV VACCINE CHALLENGE

YOUR HELP IS NEEDED TO INCREASE HPV VACCINATION RATES

Health care providers and public health professionals in Massachusetts and across the country have started a campaign to dramatically increase adolescent vaccination rates against HPV. For each year we stay at current vaccination rates, girls and boys will go on to acquire cervical, oral, anal and other HPV-related cancers.

THE PROBLEM

Our three-dose HPV vaccine coverage has stagnated at 33% nationally and missed opportunities for vaccination are high. The CDC, AAP and AAFP recommend that all 11-12 year-olds receive HPV, meningococcal, and Tdap vaccines together.

WHAT CAN PROVIDERS DO?

The most significant factor in parents' decision to vaccinate their children with HPV vaccine is a clear, brief, and strong recommendation from the child's healthcare provider. Research shows that simply changing the wording used to introduce the HPV vaccine makes a tremendous difference. Try changing your discussion for one week, and see how it improves your vaccine acceptance.

Providers:

TAKE THE HPV
VACCINE
CHALLENGE

Start your vaccine discussion with all 11 and 12 year-olds and their parents by saying: **"Your child needs 3 vaccines today – HPV, Tdap, and meningococcal."**

This simple change works because by putting HPV first, parents perceive that it's a normal, recommended vaccine, not a controversial or optional vaccine. CDC provides a "Tips and Time-savers for Talking with Parents about HPV Vaccine" resource that translates research into effective communication tools:
<http://www.cdc.gov/vaccines/who/teens/for-hcp-tipsheet-hpv.pdf>



**YOU ARE THE KEY TO
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How State and Local Immunization Programs Can Improve HPV Vaccination Rates

- Adolescent vaccination is a priority
- Having an adolescent coordinator helps
- Strong partnerships with provider community
 - Professional organizations
 - VFC providers
- Incorporate promotion of adolescent vaccination into existing activities
 - Conduct adolescent AFIX
 - Reminder/recall
 - Incorporate HPV vaccination into existing visits for school required vaccines
- Routinely evaluate data and use data for action

Minnesota Cancer Alliance and State Immunization Program Partnership

➤ Minnesota Cancer Alliance Strategy:

- HPV Vaccine added to Cancer Plan 2011-2016
- HPV Vaccine was added to the Policy Agenda (2011)
- HPV was identified as an MCA Steering Committee priority 2011/12

➤ Work plan aimed at changing the message around HPV

- Moving away from HPV as an STD and framing the conversation around HPV vaccine as cancer prevention

➤ Strategy includes recruiting physicians to:

- Write editorials in provider publications
- Host provider education webinars
- Conduct clinic visits



January 29, 2013

Dear Medical Director:

The Minnesota Cancer Alliance and the Minnesota Department of Health's Immunization Program have joined forces to promote human papillomavirus (HPV) vaccine, which is a safe and effective method of preventing cervical and other cancers. Vaccine ordering records from the Minnesota Vaccines for Children (MnVFC) program suggest that your clinic may be using HPV vaccine less frequently than other adolescent vaccines.

HPV vaccine provides a very high level of protection against virus strains 16 and 18, which are responsible for most of the cancer burden of HPV. Thus, HPV-related cancer is largely preventable, especially when the vaccine is given as recommended: to **both** girls and boys at 11 or 12 years of age, before they become sexually active. Yet, compared to other adolescent vaccines, uptake of HPV vaccine is low. Only about a third of adolescent girls in Minnesota have completed the recommended three-dose HPV vaccine series, and few boys have received all three doses.

Annual US Cancer Cases from HPV	Strains 16/18	Other
Females (cervix, vagina, vulva, anus, oropharynx)	14,720	2,890
Males (penis, anus, oropharynx)	7,080	1,000

The Alliance and the Immunization Program would like to ask that your clinic assess its policies and procedures related to HPV vaccination and consider some of those techniques for increasing HPV vaccine uptake:

- **Support and recommend HPV vaccine for your patients.** Provider recommendation is the strongest predictor of a patient's vaccination status. If you're concerned that HPV vaccination will be a sensitive subject, the best approach may be to emphasize that the vaccine works best at preventing cancer later in life if it is given at the recommended age. You could also stress that HPV is very common: at least half of adults will be infected with HPV at some point, and it is impossible to predict which infections will become cancerous. The enclosed patient education materials may be helpful.
- **Include HPV vaccine in your clinical routines,** such as by adding it to routine screening forms or placing an automatic reminder in your electronic health record (EHR) system.
- **Take advantage of every possible visit** to give HPV vaccine. Mild illness is not a contraindication.
- **Remind patients** when they are due for each dose of HPV vaccine. A listing of reminder programs is enclosed.
- **Track your rates.** Your EHR system may be able to calculate the proportion of adolescents in your practice who are up to date on HPV and other vaccines. Also, beginning in summer 2013, you will be able to run the new Minnesota Immunization Information Connection (MIIC) Adolescent Assessment Report to gauge these rates.

Your patients rely on your clinical judgment, just as we are relying on you to carry out this important cancer prevention measure. We thank you in advance for your efforts to prevent HPV-related cancers through vaccination.

Best regards,

Jennifer P. Lundblad, Ph.D., MBA
Steering Committee Chair
Minnesota Cancer Alliance

Kristen R. Ehresmann, RN, MPH
Director, Division of Infectious Disease Epidemiology,
Prevention, and Control
Minnesota Department of Health

Joint letter from Minnesota Cancer Alliance and Minnesota Department of Health

Sent to 253 clinics identified via VFC ordering records



Old Minnesota State High School League physical assessment form:

IMMUNIZATIONS [Consider Td or Tdap (age 12) : MMR (2 required); hep B (3 required); varicella (2 required or history of disease); poliomyelitis (IPV); influenza]

☐ Up-to-date (see attached school documentation) ☐ Not up-to-date / Specify _____

IMMUNIZATIONS GIVEN TODAY: _____

Assessment: ☐ Cleared for sports without restriction ☐ Restricted participation (see Clearance Form)

Plan: *Immunizations:* ☐ Up-to-Date ☐ Immunize if needed (Required by age 12: DTaP series plus Td with Pertusis (Tdap), 4 Hib, 2 MMR, 3 HBV, 4 IPV, 2 varicella)
☐ Consider Flu Shot (Asthma, winter athletes)

New language (adds MCV4 and HPV):

IMMUNIZATIONS [Consider Tdap; meningococcal (MCV4); HPV (3 doses); MMR (2 required); hep B (3 required); varicella (2 required or history of disease); poliomyelitis (IPV); influenza]

☐ Up-to-date (see attached school documentation) ☐ Not up-to-date / Specify _____

IMMUNIZATIONS GIVEN TODAY: _____

Newest language (no distinction between recommended and required):

IMMUNIZATIONS [Tdap; meningococcal (MCV4, 1-2 doses); HPV (3 doses); MMR (2 doses); hep B (3 doses); varicella (2 doses or history of disease); polio (3-4 doses); influenza (annual)]

☐ Up-to-date (see attached school documentation) ☐ Not up-to-date / Specify _____

IMMUNIZATIONS GIVEN TODAY: _____

Assessment: ☐ Cleared for sports without restriction ☐ Restricted participation (see Clearance Form)

Plan: *Immunizations:* ☐ Up-to-Date ☐ Immunize as needed (Tdap, meningococcal, HPV, MMR, hep B, varicella, polio, influenza)

Missing the party
because you're sick!



The BIG test!!



Lunch with
friends



Getting
vaccinated



DIFFICULT

EASY

DO SOMETHING EASY TODAY

➡ **Get vaccinated.** ⬅

Teens are at risk for diseases like meningitis, pertussis and HPV. If you're not up to date on vaccines, see your doctor. Free or low cost immunizations are available.

Getting over being sick is difficult for anyone. Getting vaccinated is easy.

For more information please visit www.health.state.mn.us/vax4teens

Adapted from the Colorado Department of Public Health and Environment

MDH
MINNESOTA DEPARTMENT OF HEALTH



**YOU ARE THE KEY TO
CANCER PREVENTION**

Three Recommended Activities

1. Support healthcare providers in recommending HPV vaccine for 11 and 12 year old girls and boys
2. Use data to drive immunization action plan decision-making
3. Work with cancer partners to advocate for HPV vaccination

What your partners can do:

1. **SYNDICATE** CDC content to their website

<http://tools.cdc.gov/syndication/>

<http://www.cdc.gov/vaccines/who/teens/products/web-button.html>

2. **DOWNLOAD** a matte article for publications

<http://www.cdc.gov/vaccines/who/teens/products/matte.html>

3. **SHARE** factsheets with parents & clinicians

<http://www.cdc.gov/vaccines/who/teens/products/print-materials.html>

<http://wwwn.cdc.gov/pubs/ncird.aspx>

4. **COLLABORATE** to increase the campaign reach

**For more information,
including free resources for yourself
and your patients/clients, visit:
cdc.gov/vaccines/YouAreTheKey**

**Email questions or comments to
CDC Vaccines for Preteens and Teens:
PreteenVaccines@cdc.gov**



HPV VACCINE IS CANCER PREVENTION

And YOU are the key!