



YOU ARE THE KEY TO AN HPV FREE NV

Provider Toolkit



SU SUEÑO ES SER MAESTRO CUANDO SEA GRANDE

NO N PACIENTE E CÁNCER.

La vacuna contra el VPH es prevención para el cáncer.

Consulte hoy mismo a su proveedor de atención médica sobre vacunar a sus hijos e hijas de 11 o 12 años de edad contra el Virus del Papiloma humano (VPH).



immunizenevada.org

the answer to **WHAT CAN WE DO?**

What specific partners can bring to the table

HEALTH DEPARTMENTS

1. Work with faith-based health initiatives to have HPV vax info included
2. Ask pharmacies to hang HPV vax posters next to other vax info
3. Offer in-service or feedback visit to every pediatric/FP practice in local area
4. State Medicaid office sends info to parents of 9-12 year olds
5. Ask largest employers in area to send HPV vaccine and cancer screening info to employees

CANCER CENTERS

1. Provide speakers for provider groups/grand rounds CME events on why HPV vaccination is an urgent priority
2. Sponsor a showing of "Someone You Love" for pediatricians and family physicians (offer CME credit)
3. Write a letter to all family physicians and pediatricians on the urgency of HPV vaccinations
4. Reach out to health system executives to encourage HPV vaccination initiatives

CANCER PROGRAMS

1. Include HPV vax as a priority & include in CCC State plan
2. Analyze and share local data on HPV-related cancers
3. Share survivor/caregiver stories
4. Work with partners to promote HPV vaccination at other cancer events
5. Ask local ACS chapter to co-sponsor events and/or co-brand materials/PSAs

COMMS/PR/MARKETING

1. Pitch local radio stations to run CDC Radio PSAs
 - Local TV stations to run CDC Video PSAs
 - Local movie theaters to run of CDC Video PSAs
 - Local airports to post PSA-style ads
2. Work with local university Greek system to take on HPV vaccination as their cause
3. Encourage local book clubs skip a book one month and watch *Someone You Love* instead

MEDICAL PRACTICES

1. Every clinician knows their individual HPV vaccination rates
2. Open scheduling up to 6 months in advance (like dentists do)
3. Print registry of all 13 year old patients who haven't initiated series and call/mail/text; repeat for series completion
4. Send adolescent vaccine info to parents of all 10 y.o. patients
5. Use CDC's hold message scripts
6. Use CDC content syndication
7. Utilize standing orders for nurses to administer HPV vaccine
8. Offer nurse-only appointments or "no wait" walk in hours for 2nd/3rd doses

OTHER PROVIDERS

1. Pediatric dentists send info to parents of 9-12 year old patients
2. Family dentists send info to all families about vaccination and oral cancer screening
3. Ob-Gyns send letters to all patients about HPV vaccination and cervical cancer screening recommendations
4. Ob-Gyns add HPV vaccine info to pap results

MEDICAL SOCIETIES

1. Include cancer specialists in conferences as speakers on why HPV vaccination is urgent
2. Distribute a letter from cancer center director about the urgency of HPV vaccination
3. Identify and showcase providers with high HPV vax coverage
4. Peer-to-peer sessions
5. Lunch and learn sessions
6. Distribute educational materials to offices

HEALTH SYSTEMS/PAYERS

1. For Cervical Cancer Awareness Month in January, send postcards to moms with reminders for cervical cancer screening for themselves and HPV vaccination for their kids
2. Send Tips & Timesavers and info on state/local rates to every pediatric/FP clinician in your plan

CBOs/NGOs


1. Planned Parenthood clinics send HPV vax info to all patients
2. Local Boys & Girls clubs, YMCA send info to all families on adolescent vax and cancer screening
3. Local public health educators (AHEC) offer classroom lectures to health classes on vax and VPDs

SCHOOLS/SCHOOL SYSTEMS

1. Have sports/camp physical forms changed to list all recommended vaccines
2. Adolescent vaccine promotion at high school sporting event venues
3. Send letters to parents of 11-12 y.o. students about recommended vaccinations
4. Invite speakers to health classes to talk about vaccines and VPDs

HPV VACCINE
IS CANCER PREVENTION

For more info visit: www.cdc.gov/HPV



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HPV FACT SHEET



HPV vaccination is routinely recommended for boys and girls at 11 or 12 years old. Catch-up vaccination is recommended for females up to age 26 and males up to age 21. Men who are gay, bisexual, or HIV-positive are eligible for vaccination through age 26. HPV vaccines protect against certain high-risk types of HPV that cause cancers such as cervical, oropharyngeal (mouth and throat), vulvar, vaginal, penile, and anal.



FACT

HPV and HPV-related diseases are common.

- The lifetime risk of acquiring an HPV infection is more than 80%.
- In the United States, each year an estimated 38,793 new cases of cancer occur in sites where HPV can be found.
 - About 23,000 occur among women and about 15,793 occur among men.
 - Approximately 30,700 are caused by HPV.
- The annual number of HPV-positive mouth and throat cancers is expected to surpass the annual number of cervical cancers by the year 2020.

FACT

The HPV vaccine is affordable.

- HPV vaccines are covered by insurance under the Affordable Care Act (ACA) and the Vaccines for Children (VFC) program, for those eligible.
- The VFC program pays for vaccines for children under 19 years old if they are Medicaid eligible, uninsured or underinsured, or American Indian or Alaskan Native. For more information on VFC Nevada please visit: vfcnevada.org
- For adults who are low-income and uninsured or underinsured, Merck provides financial assistance for Gardasil to men and women 19 and older. Please visit merckhelps.com or call 1-800-293-3881 for more information.

FACT

The HPV vaccine is safe and it works.

- Countries administering the HPV vaccine are already seeing a decrease in HPV infection.
- Like all vaccines, the HPV vaccine is most effective if it is given BEFORE a person is exposed to the disease.
- The Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA) continually monitor vaccine safety and show no safety concerns.
- As of March 2016, nearly 90 million doses of HPV vaccine were distributed in the U.S. and safety concerns have not been linked to HPV vaccination.
- The 9-valent HPV vaccine provides protection against nine subtypes that are responsible for over 90% of cancers caused by HPV.

FACT

The HPV vaccine is for males and females.

- HPV can infect both males and females. HPV can cause cancers of the anus, mouth, throat and penis in men.
- Mouth and throat cancers are four times more common among men than among women.
- The Advisory Committee on Immunization Practices (ACIP) recommends the HPV vaccine for female and male adolescents at 11-12 years old.

ImmunizeNevada.org/HPVfreeNV

FACT

The vaccine does not increase sexual activity.

- Studies have shown that in girls and women ages 11-24 years, those who received the HPV vaccine were not more likely to become sexually active than those who did not receive the vaccine.
- A recent study found that girls who received the HPV vaccine were less likely to engage in risky sexual behaviors than the girl who had not initiated the series.

HPV-Related Cancers: Numbers & Statistics

In general, HPV is thought to be responsible for more than 90% of anal and cervical cancers, about 70% of vaginal, vulva and oropharyngeal cancers, and more than 60% of penile cancers.

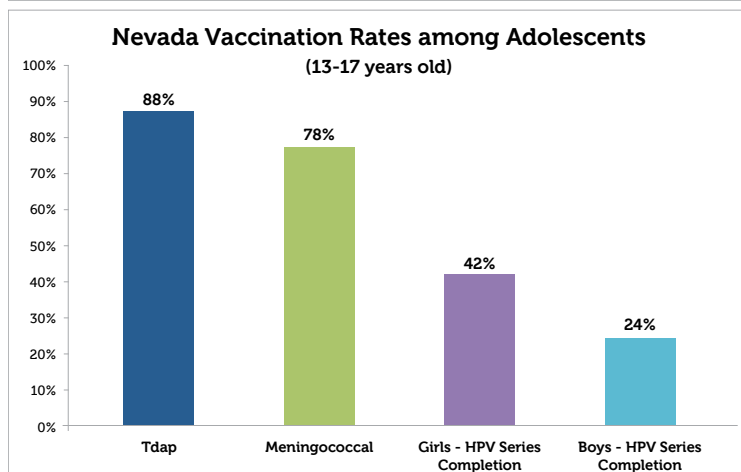
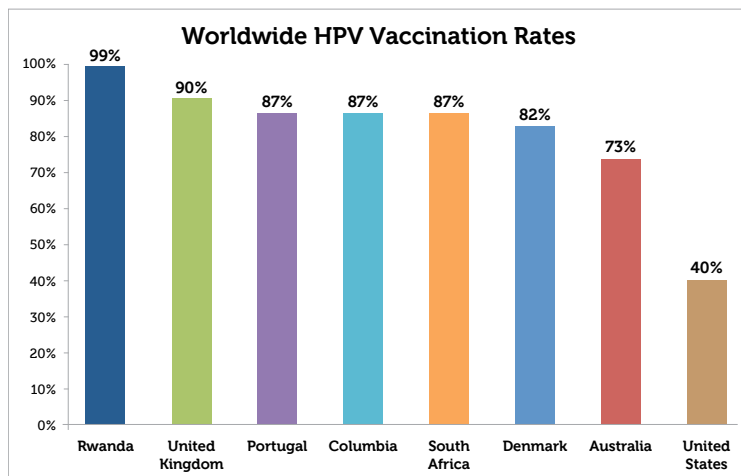
HPV-Attributed Cancer Estimates	Annual Cases in US:	
Cancer Type	New Cases	Cases caused by HPV subtypes in nine-valent vaccine
Oropharyngeal (Mouth/Throat)	11,000	10,400
Cervical (Cervix Uteri)	10,700	9,500
Vulvar (Vulva)	2,400	2,200
Vagina	600	500
Anus, Anal Canal and Anorectum	5,300	5,100
Penile	700	700
Number of annual cases that may be vaccine preventable:	28,400	

Data available from: cdc.gov/cancer/hpv/statistics

FACT

HPV can be transmitted through various forms of contact and intercourse is not required to contract the infection.

- HPV can be found on skin and mucosal surfaces throughout the body, such as the oropharynx.
- Condom usage can decrease HPV transmission rates, but may not offer full protection because HPV can infect areas of the skin that are not covered by a condom.



Data available from: hpvcentre.net/statistics/reports/XWX.pdf

What can be done?

- Social media can be a powerful tool. Speak up and be positive.
- Use this fact sheet to help you address common misconceptions in conversation and on social media.
- Always be an advocate for the HPV vaccine!
- Download the HPV Free NV Stakeholder Toolkit for more tips and tools to get involved at:
ImmunizeNevada.org/hpv-free-nv/stakeholders

Immunize Nevada
ImmunizeNevada.org/HPVfreeNV
 (775) 624-7117
info@immunizenevada.org



Talking to Parents about HPV Vaccine

Recommend HPV vaccination in the **same way** and on the **same day** as all adolescent vaccines. You can say, *“Now that your son is 11, he is due for vaccinations today to help protect him from meningitis, HPV cancers, and pertussis.”* Remind parents of the follow-up shots their child will need and ask them to make appointments before they leave.

Why does my child need HPV vaccine?

HPV vaccine is important because it prevents infections that can cause cancer. That's why we need to start the shot series today.

Is my child really at risk for HPV?

HPV is a very common infection in women and men that can cause cancer. Starting the vaccine series today will help protect your child from the cancers and diseases caused by HPV.

Why do they need HPV vaccine at such a young age?

Like all vaccines, we want to give HPV vaccine earlier rather than later. If you wait, your child may need three shots instead of two.

I'm worried about the safety of HPV vaccine. Do you think it's safe?

Yes, HPV vaccination is very safe. Like any medication, vaccines can cause side effects, including pain, swelling, or redness where the shot was given. That's normal for HPV vaccine too and should go away in a day or two.

Sometimes kids faint after they get shots and they could be injured if they fall from fainting. We'll protect your child by having them stay seated after the shot.

Would you get HPV vaccine for your kids?

Yes, I gave HPV vaccine to my child (or grandchild, etc.) when he was 11, because it's important for preventing cancer.

Why do boys need HPV vaccine?

HPV vaccination can help prevent future infection that can lead to cancers of the penis, anus, and back of the throat in men.

What diseases are caused by HPV?

Some HPV infections can cause cancer—like cancer of the cervix or in the back of the throat—but we can protect your child from these cancers in the future by getting the first HPV shot today.

How do you know the vaccine works?

Studies continue to prove HPV vaccination works extremely well, decreasing the number of infections and HPV precancers in young people since it has been available.

I'm worried my child will think that getting this vaccine makes it OK to have sex.

Studies tell us that getting HPV vaccine doesn't make kids more likely to start having sex. I recommend we give your child her first HPV shot today.

Can HPV vaccine cause infertility in my child?

There is no known link between HPV vaccination and the inability to have children in the future. However, women who develop an HPV precancer or cancer could require treatment that would limit their ability to have children.

What vaccines are actually required?

I strongly recommend each of these vaccines and so do experts at the CDC and major medical organizations. School entry requirements are developed for public health and safety, but don't always reflect the most current medical recommendations for your child's health.



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

HPV VACCINE
IS CANCER PREVENTION

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Human Papillomavirus

A Parent's Guide to Preteen and Teen HPV Vaccination



HPV

Why vaccinate against HPV at 11 or 12 years of age?

- ▶ The vaccine produces better immunity to fight infection when given at younger ages compared with older ages.
- ▶ Vaccination for HPV is much more effective at preventing disease and cancer if all doses in the series are administered before someone's first sexual contact.
- ▶ Most American men and women who become sexually active will contract at least one type of HPV virus in their lifetime. Vaccination can reduce their risk of HPV infection.
- ▶ Most people who become infected with HPV do not even know it.
- ▶ HPV is easily spread by skin-to-skin contact during sexual activity. Even if someone does not have sexual intercourse, they can still get HPV.
- ▶ People who choose to have only one lifetime sex partner can still get HPV if their partner has had previous partners who were infected.
- ▶ The vaccine has been tested in thousands of people around the world and has been proven to have no serious side effects.
- ▶ The vaccine is highly effective against HPV types that cause most cervical cancers and also protects against 90 percent of HPV-associated genital warts.

What is HPV?

Human papillomavirus (HPV) is a common family of viruses that causes infection of the skin or mucous membranes of various areas of the body. There are over 100 different types of HPV viruses. Different types of HPV infection affect different areas of the body. For instance, some types of HPV cause warts in the genital area and other types can lead to abnormal cells on the cervix, vulva, anus, penis, mouth, and throat, sometimes leading to cancer.

How common is HPV?

HPV is very common. According to the Centers for Disease Control and Prevention (CDC), most sexually active American men and women will contract at least one type of HPV virus during their lifetime. HPV is considered the most common sexually transmitted infection in the United States. It is the cause of almost all cervical cancers in women and has been linked to the rise of oral cancers in young people in the United States.

How serious is HPV?

HPV is extremely serious. Approximately 79 million Americans are currently infected with HPV, and about 14 million more become infected each year. In the United States, there are nearly 13,000 new cervical cancer cases diagnosed annually, and more than 4,000 women die from cervical cancer every year. Men are affected too. An estimated 11,500 HPV-associated cancer cases occur in American men each year.

How is HPV spread?

The most common ways to get an HPV infection is from vaginal or anal sex with an infected person; however, this is NOT the only way to get HPV. Infection can also be acquired from oral sex and any skin-to-skin contact with areas infected by HPV. It is possible to have HPV and not know it, so a person can unknowingly spread HPV to another person.

CONTINUED ON NEXT PAGE ►

Technical content reviewed by the Centers for Disease Control and Prevention

Resources for more information

- ▶ Your healthcare provider or local health department
- ▶ CDC's information on vaccines and immunization: www.cdc.gov/vaccines
- ▶ Immunization Action Coalition's vaccine information website: www.vaccineinformation.org
- ▶ Vaccine Education Center at the Children's Hospital of Philadelphia: www.chop.edu/vaccine
- ▶ CDC's Vaccines For Children (VFC) program: www.cdc.gov/vaccines/programs/vfc/index.html

SOURCES

American College of Obstetricians and Gynecologists (ACOG) Committee on Adolescent Health Care. Fact Sheet: Human Papillomavirus. ■ www.acog.org

Centers for Disease Control and Prevention (CDC). National Center for Chronic Disease Prevention and Health Promotion. HPV and Cancer. ■ www.cdc.gov/hpv/parents/cancer.html

CDC. National Center for Emerging and Zoonotic Infectious Diseases. Vaccine Safety: Human Papillomavirus Vaccine. ■ www.cdc.gov/vaccine/safety/Vaccines/HPV-vaccine.html

CDC. National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. Genital HPV Infection Fact Sheet. ■ www.cdc.gov/std/HPV/STDFact-HPV.htm

CDC. National Center for Immunization and Respiratory Diseases. HPV Vaccine-Questions and Answers. ■ www.cdc.gov/hpv/parents/questions-answers.html

CDC. National Center for Immunization and Respiratory Diseases. Preteens and Teens Need Vaccines Too! ■ www.cdc.gov/Features/Preteen/Vaccines/index.html

Reduction in human papillomavirus (HPV) prevalence among young women following HPV vaccine introduction in the United States, National Health and Nutrition Examination Surveys, 2003-2010. *J Infect Dis.* 2013 Aug 1; 208(3):385-93.

Talk to your health-care provider today about protecting your son or daughter from HPV infection!

Can HPV infection be treated?

There is no treatment for HPV infection; there are only treatments available for the health problems that HPV can cause, such as genital warts, cervical changes, and cancer. In some cases, the body fights off the virus naturally. In cases where the virus cannot be fought off naturally, the person is at risk for serious complications, including cancer.

What is HPV vaccine?

Gardasil 9 is the only HPV vaccine currently being distributed in the United States. Gardasil 9 protects against cervical cancers in women and also against genital warts and cancers of the anus, penis, vagina, vulva, mouth, and throat. For preteens, HPV vaccine is given in two shots, separated by 6 to 12 months. It is important to get all the recommended doses to get the best protection.

At what age should my son or daughter get HPV vaccine?

Routine vaccination with HPV vaccine is recommended for all 11- and 12-year-old boys and girls. The vaccine can be given as early as 9 years of age. If your son or daughter did not receive the two doses of vaccine at the recommended age, they should still start or complete their HPV vaccine series. Your son can be given the vaccine through the age of 21 (and also certain males through age 26 years), and your daughter can be given the vaccine through the age of 26. If the vaccine series is started at age 15 years or older or, if the person has problems with their immune system, three doses are necessary. Check with your healthcare provider to make sure your child is up to date with HPV vaccination.

For HPV vaccine to work best, it is very important for preteens to get all the recommended doses before any sexual activity begins. It is possible to get infected with HPV the very first time they have sexual contact with another person, even if they do not have intercourse. Also, the vaccine produces better immunity to fight infection when given at the younger ages compared to the older ages.

Are HPV vaccines safe?

HPV vaccine has been shown to be very safe. Every vaccine used in the United States is required to go through rigorous safety testing before licensure by the FDA. The HPV vaccine has been extensively tested in clinical trials with more than 28,000 male and female participants. Since the first HPV vaccine was licensed for use in 2006, more than 50 million doses of HPV vaccine have been distributed in the United States. Now in routine use, the vaccine is continually monitored for safety.

In the years of HPV vaccine safety monitoring, no serious safety concerns have been identified. Like other vaccinations, most side effects from HPV vaccination are mild, including fever, headache, and pain and redness in the arm where the shot was given.

Is HPV vaccine effective?

The vaccine has been shown to be highly effective in protecting against the HPV types targeted by the vaccine. A study looking at HPV infections in girls and women before and after the introduction of HPV vaccines shows a significant reduction in vaccine-type HPV in U.S. teens since the vaccine was introduced.

Adapted from a publication developed by the Michigan Department of Community Health, Division of Immunization

Virus del papiloma humano

Una guía para los padres sobre las vacunas contra el VPH para los preadolescentes y adolescentes



VPH

¿Por qué se debe vacunar contra el VPH a los 11 o 12 años de edad?

- ▶ La vacuna produce mejor inmunidad para luchar contra la infección cuando se da a las personas de menor edad, comparado con las personas más grandes.
- ▶ La vacuna contra el VPH es mucho más eficaz para prevenir las enfermedades y el cáncer si se dan todas las dosis en la serie antes del primer contacto sexual.
- ▶ La mayoría de los hombres y las mujeres estadounidenses contraerán por lo menos un tipo de virus del VPH en su vida. La vacunación puede reducir su riesgo de infectarse con el VPH.
- ▶ La mayoría de las personas que se infectan con VPH no sabe que está infectada.
- ▶ El VPH se transmite fácilmente por contacto de piel a piel durante la actividad sexual. Por más que alguien no tenga relaciones sexuales, igualmente pueden contraer el VPH.
- ▶ Las personas que eligen tener una sola pareja sexual en toda la vida igualmente pueden contraer el VPH si su pareja tuvo parejas sexuales anteriores que estaban infectadas.
- ▶ La vacuna ha sido probada en miles de personas en todo el mundo y se ha comprobado que no tiene efectos secundarios graves.
- ▶ La vacuna es muy eficaz para proteger contra los tipos de VPH que causan la mayoría de los cánceres del cuello uterino, y también protege contra el 90 por ciento de las verrugas genitales asociadas con el VPH.

¿Qué es el VPH?

El virus del papiloma humano (VPH) es una familia de virus comunes que causa infecciones de la piel o de las membranas mucosas en varias partes del cuerpo. Hay más de 100 diferentes tipos de virus del VPH. Los diferentes tipos de infecciones de VPH afectan diferentes partes del cuerpo. Por ejemplo, algunos tipos de VPH causan verrugas en la zona genital y otros tipos pueden causar células anormales en el cuello uterino, la vulva, el ano, el pene, la boca y la garganta, y esas células anormales a veces causan cáncer.

¿Qué tan común es el VPH?

El VPH es muy común. Según los Centros para el Control y la Prevención de Enfermedades (*Centers for Disease Control and Prevention*, o CDC), la mayoría de los hombres y las mujeres estadounidenses sexualmente activos contraerá por lo menos un tipo de virus del VPH en la vida. El VPH se considera la enfermedad de transmisión sexual más común en los Estados Unidos. Es la causa de casi todos los casos de cáncer del cuello uterino en las mujeres y está asociado con un aumento en la incidencia de cánceres orales en jóvenes en los Estados Unidos.

¿Qué tan grave es el VPH?

El VPH es extremadamente grave. Aproximadamente 79 millones de estadounidenses están infectados actualmente con VPH y alrededor de 14 millones más se infectan todos los años. En los Estados Unidos, todos los años se diagnostican casi 13,000 casos nuevos de cáncer de cuello uterino, y más de 4,000 mujeres mueren de cáncer del cuello uterino todos los años. Los hombres también se ven afectados. Se estima que hay 11,500 casos de cáncer asociado con el VPH en hombres estadounidenses todos los años.

¿Cómo se transmite el VPH?

La manera más común de contagiarse el VPH es tener sexo vaginal o anal con una persona infectada; sin embargo, esta NO es la única manera de contraer VPH. También se puede adquirir la infección del sexo oral y de cualquier contacto de piel con piel en áreas infectadas por el VPH. Es posible tener VPH y no saberlo, por lo que una persona puede transmitirle VPH a otra sin saberlo.

CONTINÚA EN LA PÁGINA SIGUIENTE ►

Recursos para obtener más información

- ▶ Su profesional de la salud o departamento de salud local
- ▶ Información sobre las vacunas e inmunizaciones de los CDC: www.cdc.gov/vaccines
- ▶ Sitio web de información sobre las vacunas de la Immunization Action Coalition: www.vaccineinformation.org
- ▶ Centro de Educación sobre las Vacunas del Hospital de Niños de Philadelphia: www.chop.edu/vaccine
- ▶ Programa Vacunas para los Niños (Vaccines for Children, o VFC) de los CDC: www.cdc.gov/vaccines/programs/vfc/index.html

FUENTES

Comité sobre la Atención de la Salud de Adolescentes del Colegio Americano de Obstetras y Ginecólogos (*American College of Obstetricians and Gynecologists*, o ACOG). Fact Sheet: Human Papillomavirus. ■ www.acog.org

Centros para el Control y la Prevención de Enfermedades (CDC). Centro Nacional para la Prevención de Enfermedades Crónicas y la Promoción de la Salud (National Center for Chronic Disease Prevention and Health Promotion). HPV and Cancer. ■ www.cdc.gov/hpv/parents/cancer.html

CDC. Centro Nacional para las Enfermedades Infecciosas Emergentes y Zoonóticas (National Center for Emerging and Zoonotic Infectious Diseases). Vaccine Safety: Human Papillomavirus Vaccine. ■ www.cdc.gov/vaccinesafety/Vaccines/HPV-vaccine.html

CDC. Centro Nacional para la prevención de VIH/ SIDA, hepatitis viral, ETS, y TB (National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention). Genital HPV Infection Fact Sheet. ■ www.cdc.gov/std/HPV/STDFact-HPV.htm

CDC. Centro Nacional de Inmunización y Enfermedades Respiratorias (National Center for Immunization and Respiratory Diseases). HPV Vaccine-Questions and Answers. ■ www.cdc.gov/hpv/parents/questions-answers.html

CDC. Centro Nacional de Inmunización y Enfermedades Respiratorias (National Center for Immunization and Respiratory Diseases). Preteens and Teens Need Vaccines Too! ■ www.cdc.gov/Features/PreteenVaccines/index.html

Reducción en la incidencia en el virus del papiloma humano (VPH) entre las mujeres jóvenes después de la introducción de la vacuna contra el VPH en los Estados Unidos, Encuestas nacionales para examinar la salud y la nutrición, 2003 a 2010. *J. Infect Dis.* 2013 Ago 1; 208(3):385-93.

¡Hable con su profesional de la salud hoy mismo sobre cómo proteger a su hijo o hija de la infección por el VPH!

¿Se puede tratar una infección por el VPH?

No hay tratamiento para la infección por el VPH; solo hay tratamientos disponibles para los problemas de salud que puede causar el VPH, como las verrugas genitales, cambios en el cuello uterino y el cáncer. En algunos casos, el cuerpo combate el virus naturalmente y lo elimina. En los casos que no se puede eliminar el virus naturalmente, la persona corre riesgo de sufrir complicaciones graves, incluyendo el cáncer.

¿Qué es la vacuna contra el VPH?

Gardasil 9 es la única vacuna contra el VPH que se distribuye actualmente en los Estados Unidos. Gardasil 9 protege contra los cánceres del cuello uterino en mujeres y también contra las verrugas genitales y cánceres del ano, pene, vagina, vulva, boca y garganta. Para los preadolescentes, la vacuna contra el VPH se da en dos inyecciones, separadas por 6 a 12 meses. Es importante recibir todas las dosis recomendadas para obtener la mejor protección.

¿A qué edad se debe vacunar mi hijo o hija contra el VPH?

Se recomienda de rutina que todos los varones y mujeres de 11 a 12 años de edad se vacunen contra el VPH. La vacuna se puede dar tan pronto como a los 9 años de edad. Si su hijo o hija no recibió las dos dosis de la vacuna en la edad recomendada, igualmente debería iniciar o completar la serie de vacunas contra el VPH. Su hijo puede recibir la vacuna hasta los 21 años de edad (y ciertos varones también la pueden recibir hasta los 26 años de edad), y su hija puede recibir la vacuna hasta los 26 años de edad. Si la serie de vacunas se empieza cuando tiene 15 años de edad o más, o si la persona tiene problemas con el sistema inmunitario, hace falta darle tres dosis. Consulte con su profesional de la salud para verificar que su hijo está al día con sus vacunas contra el VPH.

Para que la vacuna contra el VPH funcione mejor, es importante que los preadolescentes reciban todas las dosis recomendadas antes de empezar cualquier tipo de actividad sexual. Es posible infectarse por el VPH la primera vez que tienen contacto sexual con otra persona, aunque no tengan relaciones sexuales. Además, la vacuna produce mejor inmunidad para luchar contra la infección cuando se da a las personas de menor edad, comparado con las personas más grandes.

¿Las vacunas contra el VPH son seguras?

Se ha demostrado que la vacuna contra el VPH es muy segura. Todas las vacunas usadas en los Estados Unidos tienen que pasar por pruebas de seguridad rigurosas antes de ser autorizadas por la FDA. La vacuna contra el VPH ha pasado por pruebas extensas en ensayos clínicos con más de 28,000 participantes, tanto hombres como mujeres. Desde que se autorizó el uso de la primera vacuna contra el VPH en el año 2006, se han distribuido más de 50 millones de dosis de la vacuna en los Estados Unidos. Ahora que es de uso rutinario, la vacuna se monitorea continuamente para asegurar su seguridad.

En los años de monitoreo de seguridad de las vacunas contra el VPH, no se han identificado inquietudes graves de seguridad. Al igual que otras vacunas, la mayoría de los efectos secundarios de la vacuna contra el VPH son leves, incluyendo fiebre, dolor de cabeza, y dolor y enrojecimiento en el brazo donde se aplicó la inyección.

¿La vacuna contra el VPH es eficaz?

Se ha demostrado que la vacuna contra el VPH es altamente eficaz para proteger contra los tipos de VPH que buscan prevenir. Un estudio que analizaba las infecciones de VPH en niñas y mujeres antes y después de la introducción de las vacunas contra el VPH mostró que hubo una reducción significativa en los tipos de VPH contra los que protege la vacuna en adolescentes en los EE.UU. desde la introducción de las vacunas.

Adaptado de una publicación desarrollada por la División de Inmunización del Departamento de Salud Comunitaria de Michigan (Michigan Department of Community Health)

Top 10 List for HPV #VaxSuccess

Attain and Maintain High HPV Vaccination Rates

1. Appreciate the significance of the HPV vaccination recommendation.

- ✓ *By boosting HPV vaccination rates among your patients, you will be preventing cancer.*

2. Acknowledge the importance of your recommendation to parents to get their children vaccinated.

- ✓ *Clinician recommendation is the number one reason parents decide to vaccinate. This is especially important for HPV vaccination.*

3. Use the right approach by presenting immunizations the correct way, especially with the HPV vaccine.

- ✓ *Recommend the HPV vaccine the same day and the same way you recommend all other vaccines. For example, "Now that Danny is 11, he is due for vaccinations to help protect against meningitis, HPV cancers, pertussis, and flu. We'll give those shots during today's visit"*

4. Motivate your team and facilitate their immunization conversations with parents.

- ✓ *Starting with your front office, ensure each team member is aware of HPV's importance and is educated on proper vaccination practices and recommendations, ready to answer parents' questions, and/or regularly remind and recall parents. Be sure staff regularly check immunization records, place calls to remind families about getting vaccines, and report back to you.*

5. Create systematic pathways and procedures that help your team attain and maintain immunization rates.

- ✓ *Establish a policy to vaccinate at every visit. Create a system to check immunization status **ahead** of all sick and well visits. Before seeing the patient, staff should indicate if the patient is due for immunization, with special consideration to HPV vaccination. Use standing orders.*

6. Utilize your local health department's resources.

- ✓ *Utilize the resources of the local health department to achieve your goals of protecting your patients.*

7. Know your rates of vaccination and refusal.

- ✓ *Deputize your staff to assist you with knowing your actual vaccination rates and learning more about why some patients are behind on their vaccines. They can also help you facilitate solutions on how to bring these patients in and keep immunization rates up.*

8. Maintain strong doctor-patient relationships to help with challenging immunization conversations.

- ✓ *It is extremely gratifying when parents who initially questioned immunization agree to get their child vaccinated on time. It's always nice to hear: "Okay, that makes sense and I trust you!"*

9. Be familiar with vaccine skeptics and critics by learning more about their reasoning.

- ✓ *Be prepared with answers to succinctly, accurately, and compassionately inform parents with the most current medical facts. Skeptics often accept their provider's explanations if presented correctly.*

10. Use personal examples of how you choose to vaccinate children in your family.

- ✓ *Providing personal examples shows you believe in the importance of immunizations, especially HPV vaccine. These examples—combined with an effective recommendation—can help parents better understand the benefits of HPV vaccination for cancer prevention.*

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Adolescent Vaccines & HPV



Barriers to increasing adolescent and young adult (AYA) vaccination rates

It can be challenging to keep AYA patients up to date on vaccines. AYAs may not come in as regularly for well visits, parents and AYA may not understand the importance of vaccines now that the patient is older, and some vaccines (such as HPV and flu) still seems controversial to some individuals. Additionally, as with all aspects of AYA health care, there may be issues with access, as sometimes it can take months to get in for a well exam to update immunizations, which is frustrating for families.

Strategies to increase AYA vaccination rates

Vaccinate patients at every office visit.

- There's no need to wait for a well visit. Clinics can systematically pull an immunization record for every visit for the provider to review, whether it's a well or an acute visit.
 - Have your medical assistant or front desk staff pull immunization records for the next day or in the morning before clinic starts.
 - Have systems in place so they are pulled for any add-on patients, as well.

Have standing orders for immunizations.

- Having standing orders for immunizations allows the medical assistant or nurse to give immunizations before the provider has even entered the room.

Use your EHR as a tool to increase immunizations.

- Many electronic health records have built-in reminder systems for adolescent vaccines.
 - You want to use your EHR to its highest capabilities to help you remember when things need to be done.
 - For example, EPIC can give you best practice advisories (BPAs) for all vaccines, including HPV, and these can be cues to remind the provider to offer vaccines to patients, and to remind medical assistants to order and give vaccines if they have standing orders in place.
- Residency sites should consider adding a flag to the EHR to cue preceptors to ensure that residents addressed BPAs or quality care reminders. Such a prompt may read, "Were BPAs addressed during this encounter?"

Partner with school-based health centers (SBHCs).

- Communicate with patients who are due for immunizations about visiting their/ a SBHC, FQHC, or local health department for this service.
 - SBHCs are almost always staffed with a Nurse Practitioner who can provide immunizations. Find and connect with SBHCs in your area.
 - [Here](#) is a FQHC finder from HRSA. Maintain a list of local resources that you can give to adolescent patients.

- If you and the SBHC use a shared EHR, you can pull reports of patients who have been seen at both sites. Care coordinators can help patients coordinate care between PCPs and SBHCs and ensure that care is provided across the continuum.
- Encouraging patients to utilize SBHCs saves both them and their family a trip to the health center.
- This strategy has been shown to greatly improve patient compliance with receiving vaccines.
- PCP payment may hinge on meeting quality measures including immunization rates, and it doesn't matter where the patient gets the vaccines, so creative partnerships may improve your bottom line.
- Read the [AAP's Policy Statement](#) on SBHC/PCP collaboration.

Strategies to increase HPV vaccination rates

Ensure that providers are strongly recommending HPV vaccination.

- Studies have shown that providers may give HPV vaccination a lukewarm recommendation at best, so talk with your providers about who is recommending it and how. Do people have concerns about it? Why? Do they need additional information? See resources below under "Additional Recommendations" for strategies on getting both provider and parent/patient buy-in.
- At this point, the data is pretty clear that we should be giving the HPV vaccine to all young men and women – adolescents and young adults, both males and females consistently. Immunogenicity is highest at ages 11 and 12, so families should be encouraged to give the vaccine earlier rather than waiting until the later teen years.
- Use the [AAP's HPV Champion Toolkit](#) to promote HPV vaccination among your colleagues as well as parents of patients and to make changes in your practice to improve HPV vaccination.

HPV vaccination should be offered as routine.

- HPV vaccination should be offered as routine with all the other adolescent immunizations, not singled out as separate, different, or optional.
- Try using this sample pitch: "Now that your son is 11, he is due for some routine vaccines, including Tdap, meningitis, HPV vaccine, and the flu shot. I recommend getting all of these today. Are you OK with that?"

Order all three HPV vaccines at one time.

- Ordering both HPV vaccines at once can increase complete rate of the HPV series and is allowable by many EHRs.
- Providers can make a note to cue the schedulers to make the follow-up appointments for the vaccines.
- This strategy allows MAs or nurses to administer the remaining vaccines at follow up appointments, avoids working around providers' clinic schedules, and streamlines the process for both the patient and the clinic.

Have visual cues affirming that the HPV vaccine is important.

- Many clinics have posters about vaccines for young children, but often not for AYA or specifically about HPV.
- Posters, brochures, and other visual cues often spark conversation about vaccines between patients, families, and providers. Please see resources below for options.

Clinician FAQ: CDC Recommendations for HPV Vaccine 2-Dose Schedules

After the October 2016 ACIP meeting, CDC now recommends that 11 or 12 year olds receive 2 doses of HPV vaccine instead of 3. Parents may have questions about this change. This resource helps explain the reasons for changing the HPV vaccine recommendation, and provides tips for talking with the parents of your patients about the change.

What has changed in the new HPV vaccine recommendations?

In October 2016, CDC updated HPV vaccination recommendations regarding dosing schedules. CDC now recommends 2 doses of HPV vaccine for people starting the vaccination series before the 15th birthday. Three doses of HPV vaccine are recommended for people starting the vaccination series on or after the 15th birthday and for people with certain immunocompromising conditions.

CDC continues to recommend routine vaccination for girls and boys at age 11 or 12 years. The vaccination series can be started at age 9 years. CDC also recommends vaccination through age 26 years for females and through age 21 years for males. Males age 22–26 years may be vaccinated.

What is the recommended 2-dose HPV vaccination schedule?

For girls and boys starting the vaccination series before the 15th birthday, the recommended schedule is 2 doses of HPV vaccine. The second dose should be given 6–12 months after the first dose (0, 6–12 month schedule).

Answering parents' questions: *We now recommend 2 doses of HPV vaccine for your son or daughter, instead of 3, if your child starts the series before their 15th birthday. I still recommend your child start the vaccination series by age 11 or 12 years for best protection against HPV. He or she will need a second dose 6-12 months after the first dose.*

Who should still receive a 3-dose schedule?

CDC continues to recommend a 3-dose schedule for persons starting the HPV vaccination series on or after the 15th birthday, and for persons with certain immunocompromising conditions. The second dose should be given 1–2 months after the first dose, and the third dose should be given 6 months after the first dose (0, 1–2, 6 month schedule).

Answering parents' questions: *If your child starts the series after his or her 15th birthday or has certain health problems that weaken his or her immune system, he or she will still need the 3-dose series. We will give the second dose 1–2 months after the first, and the last dose 6 months after the first dose.*

Why did CDC make the recommendation change to a 2-dose schedule?

Over the past year, CDC and the Advisory Committee on Immunization Practices (ACIP) have been reviewing data on 2-dose schedules, including results from studies of HPV vaccines that compared the antibody responses after 2 doses and 3 doses. These studies showed that the antibody response after 2 doses given at least 6 months apart to 9–14 year-olds was as good or better than the antibody response after 3 doses given to older adolescents and young adults, the age group in which efficacy was demonstrated in clinical trials.

Answering parents' questions: *CDC and ACIP (a group of experts that make vaccine recommendations) have been reviewing data on 2-dose HPV vaccination schedules for several months. The evidence showed that 2 doses of HPV vaccine given at least 6 months apart in younger adolescents were as good or better than 3 doses. These updated recommendations are an example of using the latest available evidence to provide your child with the best possible protection against serious diseases.*

Answering parents' questions: *Since your child received his/her first dose of the HPV vaccine before he/she was 15 years old, we'll only need to give 1 more dose.*

Why is the 2-dose schedule change recommended only for girls and boys age 9–14 years?

ACIP makes recommendations based on the best available scientific evidence. Immunogenicity studies have shown that 2 doses of HPV vaccine given to 9–14 year-olds at least 6 months apart were as good, or better, than 3 doses given to older adolescents and young adults. Studies have not been done to show this in adolescents age 15 years or older.

Answering parents' questions: *The data we currently have from scientific studies (clinical trials) showed that 2 doses of HPV vaccine given at least 6 months apart were as good or better than 3 doses in children 9–14 years of age. Older adolescents haven't been studied in the same way, so we don't have information available for that age group. For that reason, the recommendation for number of doses has not been changed for older adolescents.*

What is the recommendation for persons with immunocompromising conditions?

CDC recommends 3 doses of HPV vaccine (0, 1–2, 6 months) for immunocompromised people age 9 through 26 years. People whose immune responses might be lower, for example due to HIV infection, cancer, autoimmune disease, or taking immunosuppressant medications, should receive 3 doses to make sure they get the most benefit. However, children with asthma, diabetes, and other conditions that would not suppress immune response to HPV vaccination can receive a 2-dose schedule.

Answering parents' questions: *Even though CDC has recommended just 2 doses of HPV for kids under 15 years, we'll need to give your child 3 doses because he/she has a health problem that weakens his or her immune system.*

If a HPV vaccine series was started with quadrivalent HPV vaccine or bivalent HPV vaccine and will be completed with 9-valent HPV vaccine, what are the intervals for the remaining doses in a 3-dose or 2-dose series?

If the first dose of any vaccine was given before the 15th birthday, vaccination should be completed according to a 2-dose schedule. In a 2-dose series, the second dose is recommended 6–12 months after the first dose (0, 6–12 month schedule).

If the first dose of any vaccine was given on or after the 15th birthday, vaccination should be completed according to a 3-dose schedule. In a 3-dose series, the second dose is recommended 1–2 months after the first dose, and the third dose is recommended 6 months after the first dose (0, 1–2, 6 month schedule).

If a vaccination schedule is interrupted, vaccine doses do not need to be repeated.

If a girl or boy received 2 doses of HPV vaccine less than 5 months apart, do they need a third HPV vaccine dose?

Yes. In a 2-dose schedule of HPV vaccine, the recommended interval is 6–12 months, and the minimum interval is 5 months between the first and second dose. If the second dose is given earlier than 5 months, a third dose should be administered.

Answering parents' questions: *The recommended schedule is 2 doses given 6 to 12 months apart. The minimum amount of time between those doses is 5 months. Because your child received 2 doses less than 5 months apart, we'll need to give your child a third dose.*

If someone is age 15 years or older and started the vaccination series at age 11 but only received 1 dose, how many more doses do they need?

This person needs 1 more dose to complete a 2-dose series, which is recommended because the vaccination was started before turning 15 years old. In a 2-dose series, the second dose is recommended 6–12 months after the first dose. In this case, the first dose was given several years ago, so the second dose can be given right away.

Is the 9-valent HPV vaccine approved by FDA for use as a 2-dose schedule?

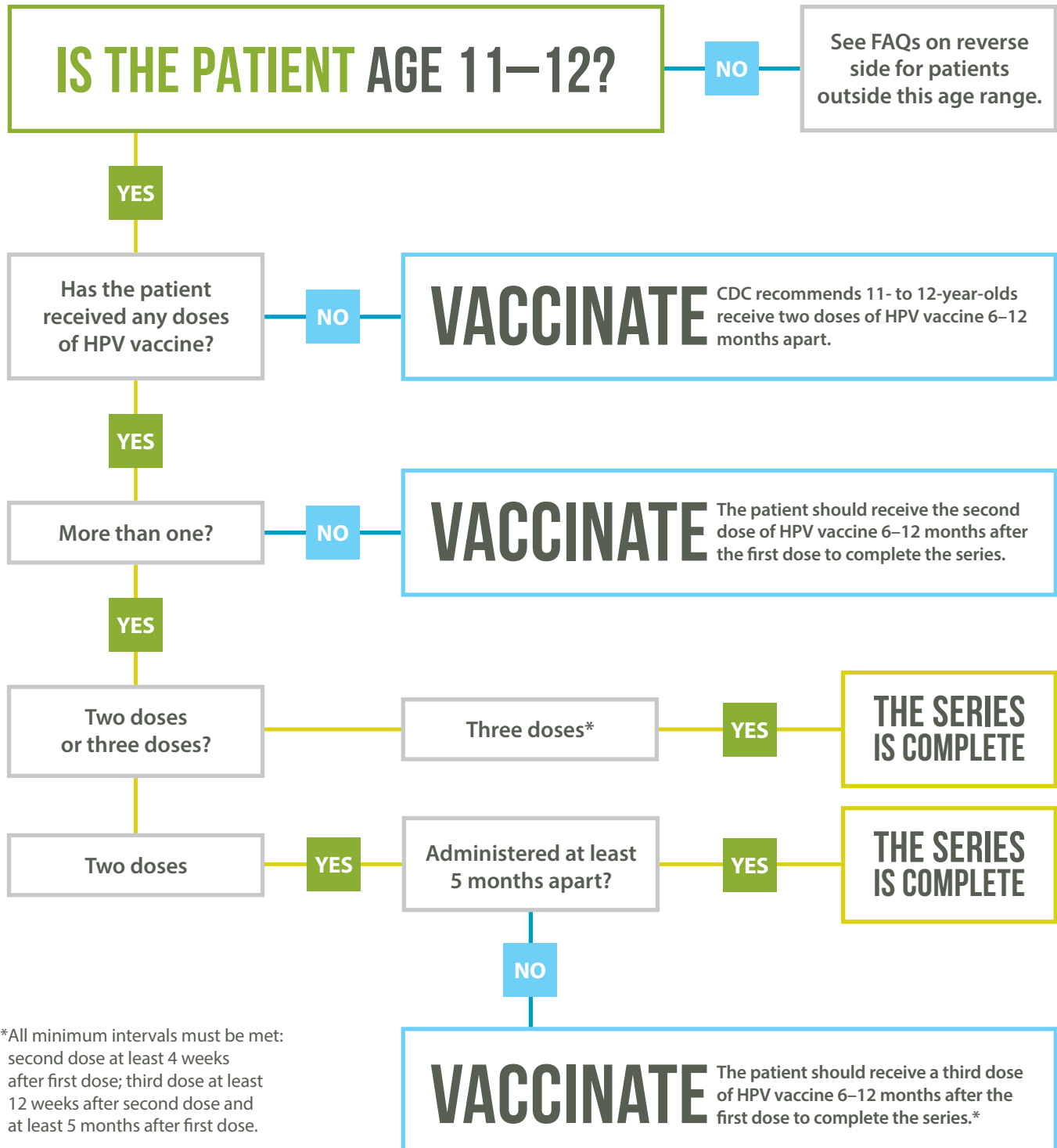
Yes, in October 2016, FDA approved a 2-dose schedule (0, 6–12 months) of 9-valent HPV vaccine for use in girls and boys age 9–14 years in the United States.

What HPV vaccines are currently available in the United States?

Three HPV vaccines are licensed for use in the United States: 9-valent HPV vaccine, quadrivalent HPV vaccine, and bivalent HPV vaccine. However, after the end of 2016, only 9-valent HPV vaccine will be sold in the United States.

PREVENTING CANCER JUST GOT EASIER

HPV vaccine protects against cancers and other diseases caused by human papillomavirus (HPV). Follow the chart below to determine whether your patient needs two or three doses of HPV vaccine.



CDC RECOMMENDS TWO HPV DOSES FOR YOUNGER ADOLESCENTS

The Centers for Disease Control and Prevention (CDC) now routinely recommends two doses of HPV vaccine for 11- or 12-year-olds to prevent HPV cancers. This recommendation makes it easier for parents to protect their children by reducing the number of doses and trips to the doctor. HPV vaccination is an important cancer prevention tool and two doses of HPV vaccine will provide safe, effective, and long-lasting protection. Some specifics of the recommendation include:

- A two-dose schedule is recommended for adolescents starting the schedule at ages 9 through 14 years. For this age group, follow the decision tree on the reverse side.
- Adolescents aged 9 through 14 years who have already received two doses of HPV vaccine less

than 5 months apart will require a third dose. The third dose should be given 6–12 months after the first dose to complete the series.

- A three-dose schedule is recommended for teens and young adults who start the series at ages 15 through 26 years. Under this schedule, the second dose of HPV vaccine should be given 1–2 months after the first dose, and the third dose should be given 6 months after the first dose.
- Three doses are recommended for people aged 9–26 years with certain immunocompromising conditions.

Read the full policy note:

www.cdc.gov/mmwr/volumes/65/wr/mm6549a5.htm

TALKING TO PATIENTS AND THEIR PARENTS ABOUT 2-DOSE SCHEDULES FOR HPV VACCINATION

With patients aged 11–12 years, start the vaccine discussion with their parents by making the following recommendation: ***"Now that your child is 11 (or 12) years old, they are due for three vaccines today to help protect them from the infections that cause meningitis, HPV cancers, and pertussis—or whooping cough."***

Many parents are accepting of this bundled recommendation because it demonstrates that HPV vaccination is a normal part of adolescent vaccination. Parents may be interested in vaccinating, yet still have questions. Some parents might just need additional information from you, the clinician they trust. Clarify the parent's question or what additional information they need.

For parents who have a question or need more information about "why now/why 11–12?"

"As with all vaccine-preventable diseases, we want to protect your child early. If we start now, it's one less thing for you to worry about. Also, your child will only need two doses of HPV vaccine at this age. If you wait, your child may need three doses in order to get complete protection. We'll give the first dose today and then you'll need to bring your child back in 6 to 12 months from now for the second dose."

If a parent asks, or needs more information about "How long can we wait and still give just two doses?"

"The two-dose schedule is recommended if the series is started before the 15th birthday. However, I don't recommend waiting to give this cancer-preventing vaccine. As children get older and have busier schedules, it becomes more difficult to get them back in. I'd feel best if we started the series today to get your child protected as soon as possible."

For patients aged 9–14 who have already had two doses given less than 5 months apart

"The recommended schedule is two doses given 6 to 12 months apart. The minimum amount of time between those doses is 5 months. Because your child received two doses less than 5 months apart, we'll need to give your child a third dose."

For parents asking about the duration of protection or how well the vaccine will work with just two doses

"Studies have shown that two doses of HPV vaccine work very well in younger adolescents and we expect the same long-lasting protection with two doses that we expect with three doses." You can also access guidance on answering parents' questions about HPV vaccine by using our tip sheet, *Talking to Parents about HPV Vaccine*, at www.cdc.gov/HPV.



HPV VACCINE
IS CANCER PREVENTION

It's Federal Law! You must give your patients current Vaccine Information Statements (VISs)

What are Vaccine Information Statements (VISs)?

Vaccine Information Statements (VISs) are documents produced by the Centers for Disease Control and Prevention (CDC), in consultation with panels of experts and parents, to properly inform vaccinees (or their parents/legal representatives) about the risks and benefits of each vaccine. VISs are not meant to replace interactions with health care providers, who should address any questions or concerns that the vaccinee (or parent/legal representative) may have.

Using VISs is legally required!

Federal law (under the National Childhood Vaccine Injury Act) requires a health care provider to give a copy of the current VIS to an adult patient or to a child's parent/legal representative before vaccinating an adult or child with a dose of the following vaccines: diphtheria, tetanus, pertussis, measles, mumps, rubella, polio, hepatitis A, hepatitis B, *Haemophilus influenzae* type b (Hib), influenza, pneumococcal conjugate, meningococcal, rotavirus, human papillomavirus (HPV), or varicella (chickenpox).

Where to get VISs

All available VISs can be downloaded from the websites of the Immunization Action Coalition at www.immunize.org/vis or CDC at www.cdc.gov/vaccines/hcp/vis/index.html. Ready-to-copy versions may also be available from your state or local health department.

Translations: You can find VISs in more than 30 languages on the Immunization Action Coalition website at www.immunize.org/vis.

To obtain translations of VIS in languages other than English, go to www.immunize.org/vis.

According to CDC, the appropriate VIS must be given:

- Prior to the vaccination (and prior to each dose of a multi-dose series);
- Regardless of the age of the vaccinee;
- Regardless of whether the vaccine is given in a public or private health care setting.

Top 10 Facts About VISs

FACT
1

It's federal law! You must give current* VISs to all your patients before vaccinating them.

Federal law requires that VISs must be used for patients of **ALL** ages when administering these vaccines:

- DTaP (includes DT)
- Td and Tdap
- Hib
- hepatitis A
- hepatitis B
- HPV
- influenza (inactivated and live, intranasal)
- MMR and MMRV
- meningococcal
- pneumococcal conjugate
- polio
- rotavirus
- varicella (chickenpox)

For the vaccines not covered under the National Childhood Vaccine Injury Act (i.e., adenovirus, anthrax, Japanese encephalitis, pneumococcal polysaccharide, rabies, shingles, typhoid, and yellow fever), providers are not required by federal law to use VISs unless they have been purchased under CDC contract. However, CDC recommends that VISs be used whenever these vaccines are given.

*Federal law allows up to 6 months for a new VIS to be used.

FACT
2

VISs can be given to patients in a variety of ways.

In most medical settings, VISs are provided to patients (or their parents/legal representatives) in paper form. However, VISs also may be provided using electronic media. Regardless of the format used, the goal is to provide a current VIS just prior to vaccination.

CONTINUED ON NEXT PAGE ►

Most current versions of VISs (table)

As of December 2, 2016, the most recent versions of the VISs are as follows:

Adenovirus	6/11/14	MMRV	5/21/10
Anthrax	3/10/10	Multi-vaccine	11/5/15
Chickenpox	3/13/08	PCV13	11/5/15
DTaP	5/17/07	PPSV	4/24/15
Hib	4/2/15	Polio	7/20/16
Hepatitis A	7/20/16	Rabies	10/6/09
Hepatitis B	7/20/16	Rotavirus	4/15/15
HPV	12/2/16	Shingles	10/6/09
Influenza	8/7/15	Td	2/24/15
Japanese enceph	1/24/14	Tdap	2/24/15
MCV4/MPSV4	3/31/16	Typhoid	5/29/12
MenB	8/9/16	Yellow fever	3/30/11
MMR	4/20/12		

A handy list of current VIS dates is also available at www.immunize.org/catg.d/p2029.pdf.

(For information on special circumstances involving vaccination of a child when a parent/legal representative is not available at the time of vaccination, see CDC's *Frequently Asked Questions* at www.cdc.gov/vaccines/hcp/vis/about/vis-faqs.html.)

Prior to vaccination, VIS may be:

- Provided as a paper copy
- Offered on a permanent, laminated office copy
- Downloaded by the vaccinee (parent/legal representative) to a smartphone or other electronic device (VISs have been specially formatted for this purpose)
- Made available to be read before the office visit, e.g., by giving the patient or parent a copy to take home during a prior visit, or telling them how to download or view a copy from the Internet. These patients must still be offered a copy in one of the formats described previously to read during the immunization visit, as a reminder.

Regardless of the way the patient is given the VIS to read, providers must still offer a copy (which can be an electronic copy) of each appropriate VIS to take home following the vaccination. However, the vaccinee may decline.

FACT 3 VISs are required in both public and private sector health care settings.

Federal law requires the use of VISs in both public and private sector settings, regardless of the source of payment for the vaccine.

FACT 4 You must provide a current VIS *before* a vaccine is administered to the patient.

A VIS provides information about the disease and the vaccine and must be given to the patient **before** a vaccine is administered. It is also acceptable to hand out the VIS well before administering vaccines (e.g., at a prenatal visit or at birth for vaccines an infant will receive during infancy), as long as you still provide a current VIS right before administering vaccines.

FACT 5 You must provide a current VIS for *each* dose of vaccine you administer.

The most current VIS must be provided before **each dose** of vaccine is given, including vaccines given as a series of doses. For example, if 5 doses of a single vaccine are required (e.g., DTaP), the patient (parent/legal representative) must have the opportunity to read the information on the VIS before each dose is given.

FACT 6 You must provide VISs whenever you administer combination vaccines.

If you administer a combination vaccine that does not have a stand-alone VIS (e.g., Kinrix, Quadracel, Pediarix, Pentacel, Twinrix) you should provide the patient with individual VISs for the component vaccines, or use the Multi-Vaccine VIS (see below).

The Multi-Vaccine VIS may be used in place of the individual VISs for DTaP, Hib, hepatitis B, polio, and pneumococcal when two or more of these vaccines are administered during the same visit. It may be used for infants as well as children through 6 years of age. The Multi-Vaccine VIS should not be used for adolescents or adults.

FACT 7 VISs should be given in a language / format that the recipient can understand, whenever possible.

For patients who don't read or speak English, the law requires that providers ensure all patients (parent/legal representatives) receive a VIS, regardless of their ability to read English. To obtain VISs in more than 30 languages, visit the Immunization Action Coalition website at www.immunize.org/vis. Providers can supplement VISs with visual presentations or oral explanations as needed.

FACT 8 Federal law does not require signed consent in order for a person to be vaccinated.

Signed consent is not required by federal law for vaccination (although some states may require it).

FACT 9 To verify that a VIS was given, providers must record in the patient's medical record (or permanent office log or file) the following information:

- The edition date of the VIS (found on the back at the right bottom corner)
- The date the VIS is provided (i.e., the date of the visit when the vaccine is administered)
- The office address and name and title of the person who administers the vaccine
- The date the vaccine is administered
- The vaccine manufacturer and lot number

In addition, providers must record:

FACT 10 VISs should not be altered before giving them to patients, but you can add some information.

Providers should not change a VIS or write their own VISs. However, it is permissible to add a practice's name, address, and contact information to an existing VIS.

Additional resources on VISs and their use are available from the following organizations:

Immunization Action Coalition

- VIS general information and translations in more than 30 languages: www.immunize.org/vis
- Current Dates of Vaccine Information Statements: www.immunize.org/catg.d/p2029.pdf

Centers for Disease Control and Prevention

- VIS website: www.cdc.gov/vaccines/hcp/vis
- VIS Facts: www.cdc.gov/vaccines/hcp/vis/about/facts-vis.html
- VIS FAQs: www.cdc.gov/vaccines/hcp/vis/about/vis-faqs.html

Facebook Posts for Parents and Caregivers

HPV Vaccine

Did you know HPV vaccine prevents cancer? Learn more about getting this life-saving vaccine for your child.

Cancer and other diseases caused by HPV (human papillomavirus) can be prevented with HPV vaccine. 27,000 men and women get HPV cancers every year in the U.S. Get your kids this life-saving vaccine when they are 11 or 12 years old to prevent cancer.

Do you have preteen or teen kids in your home? Are they up to date on their vaccinations? Preteens and teens need 4 vaccines to protect them from serious, and sometimes deadly, diseases. Any visit to the doctor—when they are sick, getting a physical for sports, camp or school—can be a good time for preteens and teens to get the recommended vaccines.

If you could protect your child from cancer, would you? HPV vaccine protects against cancers in boys and girls, and you can get the vaccine for your child during the same visit you get their tetanus and meningitis shots.

Don't miss an opportunity to protect your child from cancer. HPV vaccine is recommended for girls and boys at ages 11–12 to protect against cancers and other diseases caused by HPV.

Vaccine Safety

Approximately 79 million doses of HPV vaccine have been distributed since the vaccine was introduced, and no serious side effects have been linked to HPV vaccination. The most common side effects after HPV vaccine are mild and include pain in the arm where the shot was given, fever, dizziness, and nausea.

Paying for HPV Vaccine

Are you interested in getting HPV vaccine for your child but concerned about the cost? The Vaccines for Children (VFC) Program may be able to help. VFC provides vaccines for children ages 18 years and younger, who are uninsured, Medicaid-eligible, American Indian or Alaska Native. Learn more: <http://www.cdc.gov/vaccines/programs/vfc/parents/qa-detailed.html>

Seasonal & Health Observances

Cervical Cancer Awareness Month (January)

Cervical cancer used to be the most deadly cancer among women. Now, thanks to the HPV vaccine, it is the most preventable cancer among women. Protect your sons and daughters from cancers caused by HPV by getting the HPV vaccine for them before they turn 13. #CervicalCancer

Did you know that 4,000 women die of cervical cancer every year, even with screening and treatment? HPV vaccination at ages 11–12 could prevent most of these cancers from ever developing. #CervicalCancer

Cancer Prevention Month (February)

Are you still unsure why your son or daughter needs the HPV vaccine? Reason number one: #CancerPrevention. HPV vaccine protects against the cancers caused by HPV in boys and girls, so make sure to get this life-saving vaccine for your kids.

February is #CancerPrevention Month. You can protect your children from cancer this month by getting the HPV vaccine for them before they turn 13.

Facebook Posts for Parents and Caregivers *continued*

National Cancer Control Month (April)

April is #CancerControl month. Keep cancer in check this month by getting the HPV vaccine for your kids at ages 11–12.

National Women's Health Week (May 10–16)

Let's make women's health a priority this week. Cervical cancer kills over 4,000 women every year, but HPV vaccine can prevent the majority of those cancers from ever developing. Get the HPV shots for your daughter before she turns 13. #WomensHealthWeek

Cervical cancer used to be the deadliest cancer among women. Now, thanks to HPV vaccine, it is the most preventable cancer among women. Make women's health a priority this week and get HPV vaccine for your daughters. #WomensHealthWeek

Back to School (June–August)

School supplies, check. New clothes, check. Vaccines? Have you crossed vaccines off your kids' back-to-school checklist? All preteens need three shots before they go back-to-school to be protected from serious, sometimes deadly, diseases.

Beat the rush and make an appointment for your girls and boys to get HPV vaccine before they go back to school. HPV vaccine is cancer prevention.

Remember to put HPV vaccine on your back-to-school checklist. Preteens need Tdap, meningococcal, & HPV vaccines to get the best protection from serious, sometimes deadly, diseases.

It's back-to-school time again. Are your preteens protected from cancers caused by HPV?

National Men's Health Week (June 7–13)

This week is Men's Health Week. Let's protect the futures of our young men by making sure they are protected against the cancers caused by HPV. Boys should get HPV vaccine when they are 11 or 12 years old. Teen boys and young men through age 21 should also be vaccinated if they haven't started or finished the HPV vaccine series. Young men ages 22 through 26 can ask their doctor if HPV vaccine is right for them. #MensHealthWeek

Let's make men's health a priority this week. HPV causes cancers of the penis in men and cancers of the anus and oropharynx (back of the throat and tonsils) in men and women. HPV vaccination during the preteen years could prevent many of these cancers from ever developing. Make an appointment to vaccinate your preteen boys and girls this week. #MensHealthWeek

National Immunization Awareness Month (August)

It's National Immunization Awareness Month! Protect your girls and boys from meningitis, HPV cancers, and pertussis, or whooping cough by getting the vaccines recommended for them before they go back to school.

Don't miss out on the chance to protect your kids from cancer. HPV vaccine is recommended at ages 11–12 to protect against cancers and other diseases caused by HPV. Make an appointment for your preteen to get the vaccines recommended for them before they go back to school.

Are your preteens up-to-date on all their shots? All preteens need the Tdap, meningococcal conjugate, and HPV vaccines to be protected from serious, sometimes deadly, diseases.

Tweets for Parent and Caregiver Audience

HPV Vaccine

If you could protect your child from cancer, would you? Get #HPV vaccine for your child today.

Girls AND boys need 2 doses of #HPV vaccine at 11 or 12-years-old to protect them in the future.

#HPV vaccine is recommended for boys at age 11 or 12 to prevent anal cancer, penile cancer, and genital warts.

#HPV vaccine protects against the HPV types that cause **most** cervical cancers & precancers.

#HPV vaccine is most effective in the preteen years. Get your children vaccinated at age 11 or 12.

#HPV vaccination is recommended for preteen girls and boys at ages 11 or 12 to prevent HPV infection & cancer in the future.

Teens and young adults should get the #HPV vaccine if series not started or finished already.

Protect kids from HPV cancers by getting them #HPV vaccine when 11 or 12.

Girls AND boys need 2 doses of #HPV vaccine at 11 or 12 years old to protect them in the future.

All preteens need three vaccines to protect against serious diseases: #HPV vax, Tdap vax, and meningococcal conjugate vax.

Vaccine Safety

Approx 79M doses of #HPV vax have been distributed since vax introduced, and no serious safety concerns linked to HPV vaccination.

CDC & FDA have found #HPV vaccines are safe & effective. Get vaccinated. Protect against #HPV cancers including cervical cancer.

Paying for HPV Vaccine

Need help paying for #HPV vaccine? Girls and boys 9-18 w/o insurance coverage qualify for Vaccines for Children program.

Girls and boys 9-18 without insurance coverage for the #HPV vaccine may qualify for Vaccines for Children program.

Seasonal & Health Observances

Cervical Cancer Awareness Month (January)

Protect your daughters from #cervicalcancer this month, and get the #HPV vaccine for her.

#HPV vaccine protects against HPV cancers including #cervicalcancer. Make an appointment to get your girls and boys the HPV vaccine today.

#CervicalCancer kills 4,000 women every year—even with screening & treatment. #HPV vaccine could prevent most of those cancers.

#CervicalCancer used to be deadliest cancer among women. Bc of #HPV vax, now the most preventable cancer among women.



Tweets for Parent and Caregiver Audience *continued*

Cancer Prevention Month (February)

Wondering why your child needs #HPV vaccine? Reason 1: #CancerPrevention

#HPV vaccine is #CancerPrevention. Learn more about this life-saving vaccine

It's #CancerPreventionMonth. You can protect your children from cancer by getting the #HPV vaccine for them at ages 11–12.

National Cancer Control Month (April)

Keep cancer in check this month by getting the #HPV vaccine for your sons and daughters. #CancerControl

It's #CancerControl Month! You can keep cancer in check this month by getting #HPV vaccine for your kids at ages 11–12.

National Women's Health Week (May 10–16)

HPV vax can protect against cancers of the cervix, vagina, & vulva in women. Get #HPV shots for your girls at ages 11–12. #WomensHealthWeek

It's #WomensHealthWeek. You can protect the health of your daughters by ensuring they're protected from #HPVcancers. #HPVvaccine

Back to School (June–August)

Remember to put #HPVvaccine on your #BackToSchool checklist. Preteens need Tdap, meningococcal, & HPV vaccines.

It's #BackToSchool time again. Are your preteens protected from cancers caused by HPV? #HPVvaccine #ProtectYourPreteens

Remember to get #HPV vaccine for your boys and girls before they go #BackToSchool this fall.

National Men's Health Week (June 7–13)

It's #MensHealthWeek. #HPV vaccine is recommended for boys to protect against cancer later in life.

A moment in men's health: Every year, there are over 9,000 cancers caused by #HPV in men. Many could be prevented with HPV vaccine.

National Immunization Awareness Month (August)

Beat the rush and get #HPVvaccine for your preteen before they go #BackToSchool.

Are vaccines on your #BackToSchool checklist? Preteens need 3 shots to protect against serious diseases.

Gynecologic Cancer Awareness Month (September)

Are your daughters protected against #GynecologicCancer like #cervicalcancer. Get HPV vaccine for your preteen today.

Types of #GynecologicCancer like #CervicalCancer can be prevented by HPV vaccination at ages 11–12. Vax your preteens.



HPV FREE NV MESSAGING

- If there were a vaccine to prevent cancer, would you get it for your children? Of course you would.
- The HPV vaccine IS cancer prevention.
- The HPV vaccine is very important because it PREVENTS cancer.
- No child dreams of being a cancer patient. The HPV vaccine is cancer prevention.
- The best way to prevent HPV-associated cancers is to have your sons & daughters completely vaccinated against HPV.
- The HPV vaccine is best between 11-12 years of age when the body will produce the best immune response and develop protection before coming in contact with the virus.
- 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.
- We vaccinate so that children have the best protection possible long before they are exposed to an infection, as is the case with measles and the other recommended childhood vaccines.
- A missed opportunity is a healthcare encounter where a person does not receive a vaccination for which he or she is eligible.
- In 2013, 81% of Nevada girls who were unvaccinated against HPV had a missed opportunity for HPV vaccination. That same year 91% of Nevada girls could have started the HPV vaccine series if missed opportunities were eliminated.
- Currently 79 million Americans are infected with HPV, increasing at a rate of approximately 14 million new cases that develop each year in the U.S.
- In the U.S., 33,000 HPV-associated cancers are diagnosed year, about 20,600 among females and 12,600 among males.
- Cervical cancer is the most common HPV-associated cancer among females and oropharyngeal cancers are the most common among males.
- Of the 33,000 new HPV-associated cancers that occur each year, it is estimated that about 26,000 could be prevented through HPV vaccination.
- If the vaccine is not covered under insurance, a child may be covered through the Vaccines for Children (VFC) program.
- Unfortunately, there is no cure for HPV. It can only be prevented.

SOCIAL MEDIA TOOLS

Sample Tweets

- Let's make Nevada HPV Free. Learn how at www.immunizenevada.org/hpvfreeenv #HPVFreeNV
- Learn more about the HPV vaccine at www.immunizenevada.org/hpvfreeenv #HPVFreeNV
- We can be #HPVFreeNV! Learn how you can protect your children from certain cancers here: <http://bit.ly/1tY26Cy>
- Girls & boys should get the HPV vaccine at 11 or 12 years old to protect them from cancer in the future. <http://bit.ly/1tY26Cy> #HPVFreeNV
- Ask your provider about the HPV vaccine! Boys and girls both need the HPV vaccine at age 11 or 12. <http://bit.ly/1tY26Cy> #HPVFreeNV
- Did you know boys are at just as much risk for HPV related cancers as girls? Learn more a <http://bit.ly/1tY26Cy> #HPVFreeNV
- The HPV vaccine is recommended for boys & young men too. Protect your sons from cancer. <http://bit.ly/1tY26Cy> #HPVFreeNV
- Girls & boys should get the HPV vaccine at 11 or 12 years old to protect them from cancer in the future. <http://bit.ly/1tY26Cy> #HPVFreeNV
- The HPV vaccine is a powerful public health tool that can protect generations of women & men from cancer. <http://bit.ly/1tY26Cy> #HPVFreeNV
- Teens & young adults ages 13-26 should get the HPV vaccination if not vaccinated earlier <http://bit.ly/1tY26Cy> #HPVFreeNV
- Girls & boys 9-18 w/o insurance coverage for the HPV vaccine may qualify for the VFC program Visit www.vfcnevada.org #HPVFreeNV
- HPV is so common that nearly all sexually-active men & women will get at least one type of HPV <http://bit.ly/1tY26Cy> #HPVFreeNV
- Lower your risk of getting HPV & prevent cancer in your future. Find out how. <http://bit.ly/1tY26Cy> #HPVFreeNV
- The HPV vaccine is safe & effective in preventing cancers caused by HPV <http://bit.ly/1tY26Cy> #HPVFreeNV
- Why give the HPV vax at 11 or 12? Better uptake & to provide protection long before exposure <http://bit.ly/1tY26Cy> #HPVFreeNV

Sample Facebook Posts

- We can be #HPVFreeNV! Learn how you can protect your children from certain cancers here: <http://immunizenevada.org/hpvfreenv>
- What does your child dream of being when they grow up? A famous rock star? A teacher? Maybe an astronaut? They don't dream of being cancer patients. Get your sons & daughters the HPV vaccine to prevent certain cancers. Learn more at <http://immunizenevada.org/hpvfreenv> #HPVFreeNV
- The HPV vaccine is cancer prevention. Vaccinating your 11 or 12 year old sons and daughters against HPV now could be a lifesaver when they grow up. Let's be #HPVFreeNV. Learn more at <http://immunizenevada.org/hpvfreenv>
- Ask your child's doctor about the HPV vaccine! Boys and girls both need the HPV vaccine at age 11 or 12 years old because that's when immune response to the vaccine is best. Learn more at <http://immunizenevada.org/hpvfreenv> #HPVFreeNV
- Did you know boys are at just as much risk for HPV caused cancers as girls? Learn more how HPV affects men at <http://immunizenevada.org/hpvfreenv> #HPVFreeNV
- If there were a vaccine to prevent cancer, would you get it for your child? The HPV vaccine is cancer prevention, learn more at <http://immunizenevada.org/hpvfreenv> #HPVFreeNV
- The HPV vaccine is cancer prevention for both boys and girls. Learn more about getting your children vaccinated so they don't have to worry about cancer later. It could be a lifesaver. Learn more at <http://immunizenevada.org/hpvfreenv> #HPVFreeNV
- Do you have preteen or teen kids in your home? The HPV vaccine is recommended for preteens 11 or 12 years old. Teens and young adults 13-26 years old should get the HPV vaccine if they weren't previously vaccinated. The HPV vaccine is cancer prevention. Learn more at <http://immunizenevada.org/hpvfreenv> #HPVFreeNV

Social Media Opposition Responses

- Studies have proven that the HPV vaccine doesn't alter sexual behavior.
 - Pediatrics journal (2012):
<http://pediatrics.aappublications.org/contentearly/2012/10/10/peds.2012-1516.abstract>
 - Canadian Medical Association Journal (2014):
<http://www.cmaj.ca/content/early/2014/12/08/cmaj.140900>
- The side effects that Gardasil lists are generally not that different from what is seen in the safety reviews of other vaccines.
 - For example, fainting is common after any needle injection, especially in pre-teens and teens.

- On reported deaths, from CDC: “The 32 death reports were reviewed and there was no common pattern to the deaths that would suggest they were caused by the vaccine. In cases where there was an autopsy, death certificate, or medical records, the cause of death could be explained by factors other than the vaccine. Some causes of death determined to date include diabetes, viral illness, illicit drug use, and heart failure.”
- On safety of vaccine, from CDC “The findings were generally not that different from what is seen in the safety reviews of other vaccines recommended for a similar age group, 9 to 26 years old (meningitis and Tdap). Based on the review of available information by FDA and CDC, the HPV vaccine continues to be safe and effective, and its benefits continue to outweigh its risks.”

ADDITIONAL RESOURCES

General HPV

- Centers for Disease Control and Prevention – www.cdc.gov/hpv
- Immunization Action Coalition – www.immunize.org/hpv
- Vaccine Education Center – vec.chop.edu/service/vaccine-education-center/prevent-hpv/index.html

HPV Associated Cancers

- American Cancer Society – www.cancer.org/cancer/cancercauses/othercarcinogens/infectiousagents/hpv/index
- Cervical Cancer Free Coalition – www.cervicalcancerfreeamerica.org
- Kristen Forbes EVE Foundation – www.kristeneve.org
- National Cancer Institute – www.cancer.gov/cancertopics/factsheet/Risk/HPV

Provider & Clinic Resources

- Vaccine Information Statements in Multiple Languages (Immunization Action Coalition) – www.immunize.org/vis
- Vaccines for Children (VFC) Program – www.vfcnevada.org
- You’re The Key Toolkit – www.cdc.gov/vaccines/youarethekey
- Nevada WebIZ – webiz.nv.gov

Continuing Education

- Immunize Nevada Continuing Education – www.immunizenevada.org/healthcare-professionals/continuing-education-opportunities



HER DREAM IS TO BE A PILOT WHEN SHE GROWS UP

NOT A CANCER PATIENT.

The HPV vaccine is cancer prevention.

Ask your healthcare provider about getting
your 11 or 12 year old sons & daughters
vaccinated against HPV today.



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