

2019 Doctors of Nursing Practice National Conference

**2019 HUMAN  
PAPILLOMAVIRUS  
VACCINATION IN FAMILY  
PRACTICE:  
A Clinical Practice Guideline**

Jackie Gomez  
Jones, DNP, RN,  
OCN

Payton L.  
Ten Hagen, DNP,  
RN, FNP-C,  
BMTCN

# WHAT IS HPV?

**YOU WOULD DO ANYTHING TO PROTECT YOUR CHILD FROM CANCER. BUT HAVE YOU DONE EVERYTHING?**



HPV vaccine is cancer prevention for boys and girls. Just two shots at ages 11–12 provide safe and lasting protection against the infections that cause HPV cancer. Ask your child's doctor or nurse for HPV vaccine.

- HPV is a group of more than 150 related viruses.
- 14 million Americans are infected each year.
- 80 million Americans are currently infected with a strain of HPV.
- HPV is spread by intimate skin-to-skin contact.
- Most infections resolve without intervention.
- HPV infection can cause genital warts; oropharyngeal, cervical, penile, and anal cancers.
- Annually: 33,700 women and men are diagnosed with a cancer caused by HPV.
- HPV Vaccine can prevent 90% of these cancers (CDC, 2019).



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

**HPV VACCINE**  
IS CANCER PREVENTION

[www.cdc.gov/HPV](http://www.cdc.gov/HPV)

(CDC, 2016a)

JAN 2017

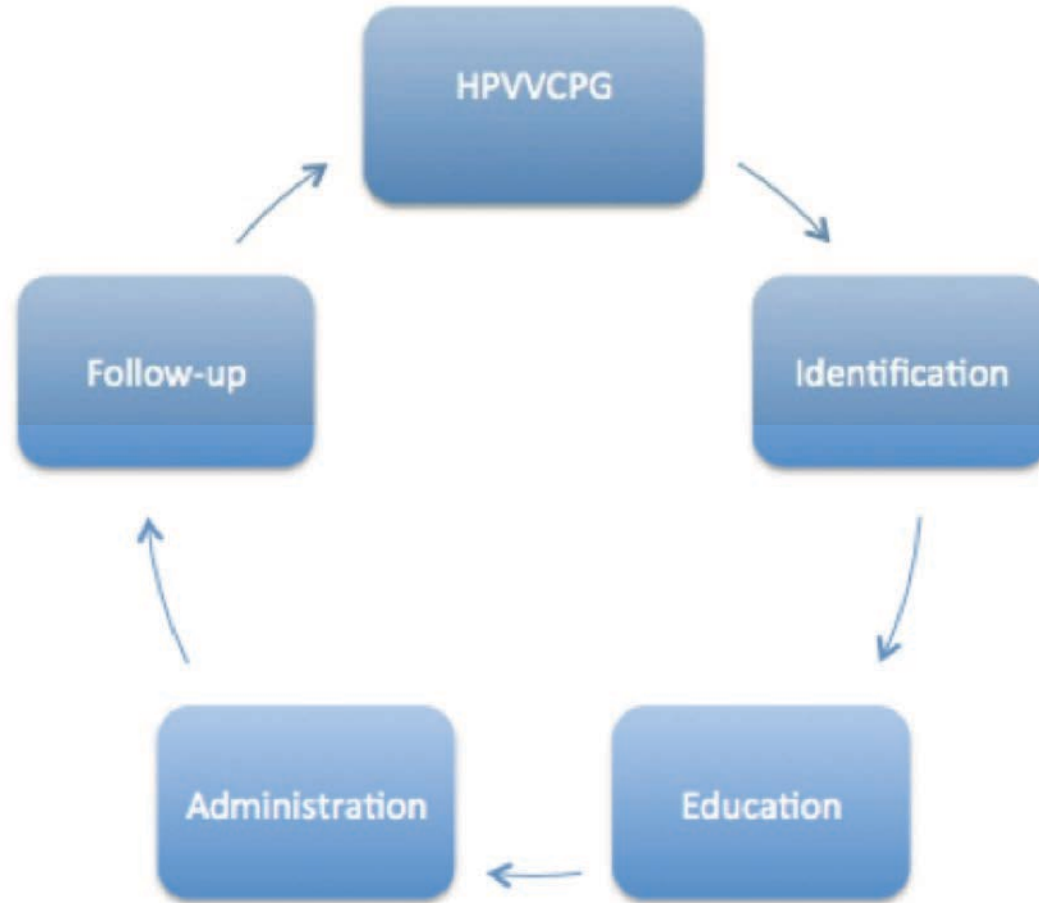
# HPV VACCINATION

- 2017 Up-to-Date Uptake:
  - US: **48.6%**
  - Texas: **39.7%**
  - (Texas Department of State Health Services, 2017)



- Australian National HPV Vaccination Program:
  - **77%** reduction in HPV types responsible for **75%** of cervical cancer
  - **50%** reduction in high-grade cervical abnormalities in girls under the age of 18
  - **90%** reduction in genital warts in heterosexual patients less than 21 years of age (Cancer Council Victoria, n.d.)

# HPV Vaccination Clinical Practice Guideline



## Identification

- Female or male
- Ages 9-45 years old
- Immunocompromised or sexually abused
- Transgender, gay, or bisexual

## Education

- Discuss the purpose and benefits
- Discuss risks
- Eliminate myths
- Provide Access to patient education

## Administration

- Assess for any vaccine contraindications
- Determine vaccine series and dosing schedule
- Administration by a healthcare professional
- Assess for adverse events

## Follow-up

- Provide patient with written schedule of next follow-up
- Send reminder via text, phone-call, or by mail 7 days prior to appointment

# IDENTIFICATION

- **11 and 12 years old**
- **Can be administered as early as 9 years old:**
  - Immunocompromised
  - Have been sexually abused (AAP, 2017)
- **Females: 9-years-old to 26-years-old**
- **Males: 9-years-old to 21-years-old**
- **Highly recommended for individuals:**
  - Transgender
  - Males: gay, bisexual, or have sexual intercourse with men (CDC, 2018)
- **October 2018**
  - FDA expanded approved use of the vaccine to age 45 in both genders (FDA, 2018)

# EDUCATION

- Parents less likely to refuse or delay vaccine:
  - If recommended and educated by their provider (Gilkey et al., 2016).
- Increase in vaccine compliance:
  - With provider initiated conversations about the HPV vaccine.
  - When strongly recommended by their providers.
  - Gave parents time to discuss the vaccine.
- Vaccine compliance and completion:
  - Eliminating missed opportunities.
  - Scheduling follow-up visits (Smith, Stokley, Bednarczyk, Orenstein, & Omer, 2016).
- Providers are encouraged to discuss the HPV vaccine:
  - Office visits
  - Clarify vaccine myths
  - Address any concerns or misconceptions (Southall, Casler, Alix, & Lacy, 2016)
- Frame the vaccination as a cancer preventing intervention.

# ADMINISTRATION

- Support of the two-dose vaccine schedule
- Administered by any qualified health care professional (physician, advanced practice provider, nurse, or pharmacist)
- Initiated at age 9 to 14
  - Two-dose series at month zero and month 6 to 12 (McNair & Fontenot, 2018)
  - Minimum interval of five months between the first and second dose is required.
- Ages 15 - 26 or immunocompromised
  - Three-dose series at month zero, month one to two, and month six is required (CDC, 2016c; Iversen et al., 2016)
- Side effects:
  - Injection site irritation
  - Syncope

# FOLLOW UP

- Education involves:
  - Follow-up doses
  - Scheduling appointment
- Success in text-messaging recall/reminder systems for HPV vaccination (McLean et al., 2017)
- Studies encourage:
  - Enrollment in text-message/phone reminder service for dose two and dose three of the vaccine series (Rand et al., 2017).
  - Educational texts regarding HPV and the HPV vaccine increases knowledge and awareness.



# THANK YOU!

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## ■ Contact:

- Copies of the Guideline
- Full reference page
- Questions
  - Jackie Gomez Jones
    - J.R.GOMEZ@tcu.edu
  - Payton L. Ten Hagen
    - p.l.tenhagen@tcu.edu