



SPRING EDUCATION MEETING HIGHLIGHTS

HPV Clinical Update, Hesitancy and “On the Horizon” for Immunizations

- There are about **31,400 cases of HPV-attributable cancers** each year in the US
- HPV-associated oropharyngeal cancer rates in males surpassed cervical cancer rates in females
- Vaccine hesitancy has been around since vaccines were invented
 - Anti-vaccine sentiment spans political parties
 - But, political views **DO NOT** influence how much **patients trust their primary health care provider**
- Build an **empathetic relationship** with your patients/parents – you are two people trying to figure out what is best for a child you both care about
- **Vaccines on the horizon**
 - Pneumococcal (PCV15 Vaxneuvance & PCV20 Prevnar 20)
 - Pentavalent Meningococcal vaccine (ACWY finally meets B)
 - RSV

HPV Best Practice Panel from the HPV QI Program

- Have a **pro-vaccine office culture!**
- From the front office staff, to nurses, physicians and even billing, create an office flow that prioritizes vaccines.
- **Techniques to increase HPV immunization rates:**
 - At least begin having HPV conversations starting at age 9
 - Make a **firm statement** of “You are due for the HPV vaccine”
 - Use **personal stories** like, “I can’t wait until my daughter is old enough to get the HPV vaccine”
 - If you have office staff who received the HPV vaccine they may share their own story
 - **Sandwich technique** (“Today, your child is due for Tdap, HPV and the meningitis vaccine”)
 - **Use cancer prevention language** (Call the HPV vaccine the “cancer prevention vaccine”)
 - Use educational rack cards vs. other education handouts

Learn more or **register** at:

<https://ohioaap.org/qi-programs-moc-iv/hpv-qi-project/>





Ohio Chapter

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School Health & Adolescent Vaccines

- Why are school-based clinics important?
 - Helps **overcome barriers** to accessing traditional medical care
 - Is a way to **connect kids and teens to a medical home**, especially ones who have no other options or are very sick
 - Home life is complicated for many, health care shouldn't be!
- Accessible in the community and a place kids already feel safe and comfortable
 - Many **school nurses are trusted adults** which can help kids buy into the importance of healthcare and disrupt generations of mistrust
- Some school-based health centers can also see young adults not enrolled in school
 - May see young adults up to 19 years through Medicaid; new moms have asked for their follow-up care at school-based clinics because of the relationships and trust built
- School-based clinics goals = **keeping kids healthy in schools**
- Do school clinics report back to the medical home once a child is seen?
 - School clinics can be a great partner with traditional medical homes, and efforts to communicate with PCP are made
 - Creating a **system of communication** is key - as a pediatrician, know some key contacts in your schools to help facilitate, such as school nurses or school psychologists
- **Get to know your local schools** - be a trusted medical partner
 - Partner with schools on vaccine education; utilize student advisory committees
 - Look for volunteer opportunities
 - Most importantly, build relationships!

Contact Lory Sheeran Winland at lwinland@ohioaap.org to request a **Maximizing Office Based Immunization (MOBI)** or **Teen Immunization Education Sessions (TIES)** training today!

