

An Instructional Tool on Human Papillomavirus for Health Care Providers

Instructing Adolescents & Young Adults Attending Title X Clinic

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EMR Template

Purpose

The purpose of this presentation is to demonstrate a Human Papillomavirus (HPV) instructional toolkit and EMR template for use by healthcare providers on instructing adolescents and young adults in Indiana Family Health Council (IFHC) Title X clinics to increase HPV knowledge and uptake of HPV vaccine.

Objectives

- The learner will be able to identify 3 barriers of HPV vaccination among adolescents and young adults.
- The learner will be able to identify 3 education interventions that will increase uptake of HPV vaccine among adolescents and young adults.

Background

HPV is the most common sexually transmitted infection in the U.S.

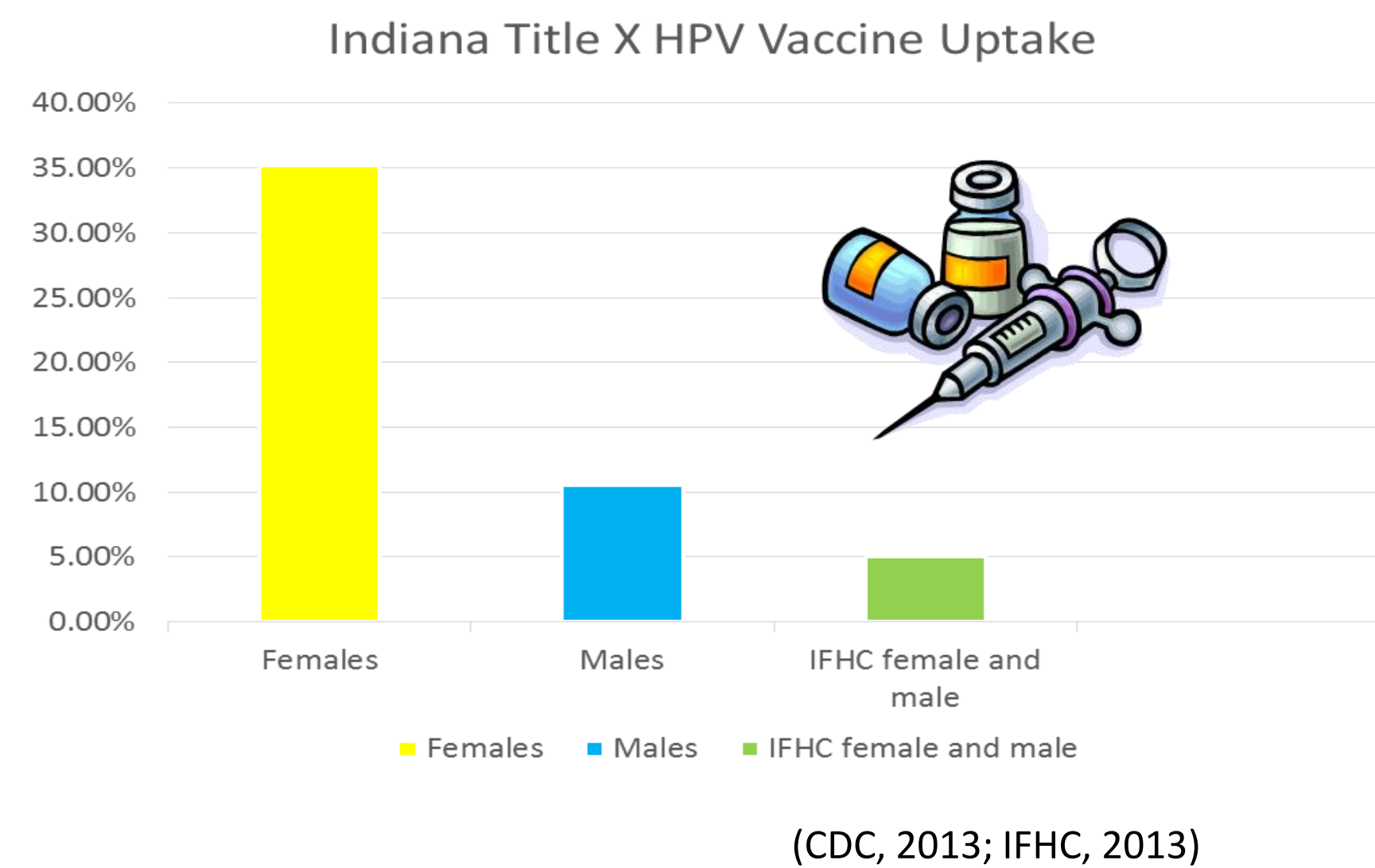
79 million Americans have HPV
14 million new cases of HPV every year

HPV is the primary cause of some cancers and genital warts
Cervical - Vulvar - Vaginal - Penile - Anal - Oropharyngeal

(CDC, 2013; Gardasil, 2011)

Despite offering Gardasil at 4 of 33 clinic sites, IFHC patients are not accepting it.

Needs Assessment



Barriers

- Lack of provider recommendation - #1
- Lack of knowledge - Patients, Parents & Providers
- Provider unease to discuss sex
- Cost
- Parent fear of early onset of sexual activity
- Fear of side effects
- Lack of follow-up reminders for injections

(Zimet et al., 2013; Bartlett & Peterson, 2011; Thomas, 2010; Wetzel, 2007)

Indiana Family Health Council

Human Papillomavirus (HPV)

Has patient had? No Yes Unsure

If yes, # of injections? One Two Series comp

Gardasil No Yes Unsure One Two Series comp

Cervarix No Yes Unsure One Two Series comp

Education provided:

In the U.S., about 80% of males & females will be infected with HPV in their lifetime.

HPV is a virus spread by skin-to-skin contact during vaginal, oral, & anal sex. Often, it can be suppressed by the immune system.

There are many types of HPV; Gardasil helps protect against 4 of the high-risk types that cause 70% of cervical & vaginal cancer and 50% of vulvar cancer in females & 90% of genital warts and anal cancer in males and females. Head & neck cancer caused by HPV is on the rise.

Gardasil is recommended for males and females from age 9-26.

Gardasil does not protect from any HPV type to which you have already been exposed

Requires 3 injections: one now, repeat in two months, then 6 months from first injection. All 3 are needed for best protection.

Safe & effective: Very safe and highly effective if given before onset of S.A., but you should continue getting Pap smears per current guidelines.

Side effects reviewed- most common are headache, pain, swelling, itching, bruising, and redness at the injection site. Rarely fever, nausea, dizziness, and vomiting occur.

WARNING: There is a risk for fainting, so you will be asked to stay in the clinic for 15 minutes after each injection.

Patient accepted Gardasil?

No Yes - 1st Gardasil 0.5 mL IM L R deltoid Next due: (calendar)

2nd Gardasil 0.5 mL IM L R deltoid Next due: (calendar)

3rd Gardasil 0.5 mL IM L R deltoid

Reminder:

Call Text Email Mail Gardasil.com None

Resources:

- [HPV Fact Sheet](#) [as hyperlink to print]
- [HPV Consent](#) [as hyperlink to print]
- [HPV Resource List](#) [as hyperlink to print]

Interventions

- Provider recommendation
- Gardasil available at no cost
- EMR template with provider prompts
- HPV basic knowledge: transmission, prevalence, risks of HPV related disease
- Gardasil information
- Reminder messages
- HPV/Gardasil fact sheet at low literacy level
- HPV resources

