

Access to HPV Vaccine in an Ob/Gyn Resident Clinic: A Quality Improvement Initiative

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Abstract

BACKGROUND: (HPV) is the most common STI in the world, known to cause genital warts and disease to the vulva, vagina, cervix, penis, anus, and oropharynx. Gardasil, a 9-valent HPV vaccine is >99% effective in preventing disease in patients without HPV exposure; the CDC and ACOG recommend administration to females and males, now FDA approved for 9-45 year old patients. Only 54% of women in the US are vaccinated. 4,000 women die of cervical cancer annually in the US. Studies support that physicians' recommendations for HPV vaccination have the strongest influence on vaccine acceptance by patients and their parents. HPV vaccination of young adult females is a cost-effective, safe strategy to both prevent and reduce HPV related cancers. Our clinic did not have Gardasil available in the office.

METHODS:

Part 1: Survey Evaluating patients' health literacy on HPV and the vaccine. English, Spanish, and Somali versions administered by medical assistants at rooming

Part 2: Vaccination procurement Discussions with administration and supervising physicians. Financial assessment, budget reallocation, and risk/benefit analysis. Vaccine storage logistics.

Part 3: Vaccine administration MAs and RNs administer vaccine. Vaccination log book created to log series.

Part 4: Vaccine promotion Vaccine information for patients in office and physical reminders on all computers for staff to offer and inquire about vaccine status

Part 5: Outreach MyChart messages and phone calls direct to patients who began series to schedule follow up

Part 6: Retrospective Chart Review

RESULTS:

- Demographics by survey language:

English 95.7%

Spanish: 3.2%

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- 33% knew what HPV caused clinically**- 8.5% of patients were HPV 16, 18, other HR Positive****- Mean age of vaccination: 27 yo****- 30 patients started Gardasil series****- 3 completed series****- Patient Survey Responses**

30% would receive vaccine if offered in office

- Documented HPV status vs. Patient reported 84.6% of patients believed to be vaccinated, but weren't!

75% of patients believed not to be vaccinated, but were!

- 31.9% of patients would receive the vaccine if it was in the clinic.**- 62.8% of patients were aware of HPV.**

DISCUSSION & CONCLUSION: If preventive HPV vaccine is available in office and promoted, a percentage of patients are willing to receive it at the time of presentation. Patients in this population had high discordance between documented vs. believed HPV vaccination status. Increasing vaccine rates could reduce the incidence of cancers in the future.