



Cancer Prevention Through HPV Vaccination:

An Action Guide for Oral Health Professionals



HPV Cancer Prevention Starts With You

Oral health professionals play a critical role in combatting growing rates of human papillomavirus (HPV)-positive oropharyngeal cancers. Oral health professionals should strongly and clearly recommend HPV vaccination to all patients 9-26 years of age.

HPV cancers remain a significant health issue.

Nearly everyone will become infected with HPV in their lifetime.

Although most HPV infections resolve without incident, HPV causes about <u>38,000 cases</u>¹ of cancer in men and women each year in the United States.



HPV infections were responsible for 1.2% of newly diagnosed cancer cases among men and 2.5% of cases diagnosed among women. Combined for men and women, HPV infections accounted for 1.8% of new cancer cases.²



Men bear the greatest burden of HPV-positive oropharyngeal cancers.

Certain types of HPV cause about 70% of oropharyngeal cancers in the US. Older men ages 51 to 60 have the largest prevalence of high-risk oral HPV infections, about 7%, compared to all other age groups (about 1-2%).³



Since 2014 HPV-associated oropharyngeal cancer sites have increased on average by 2% per year.⁴

Efforts to improve HPV vaccination are needed.

The HPV vaccine series is recommended to begin at age 9 years for all children. Still, HPV vaccination uptake lags behind other preteen vaccines.⁵



HPV vaccination can prevent about 90% of HPV cancers.

HPV vaccination works. A 69% reduction in cervical cancer cases was observed from 2013-2021 among women ages 20-24 years⁷, who were among the first cohort of preteens in the US to receive the HPV vaccine, likely in part due to herd immunity.⁸

Strong recommendations from oral health professionals are powerful motivators of HPV vaccine acceptance.

Do your part to combat the rising incidence of oropharyngeal cancers.

Recommendations from oral health professionals can provide opportunities for HPV vaccination. By educating yourself and your team on best practices for HPV vaccination recommendations, you are doing what's needed to combat the rising burden of oropharyngeal <u>cancers</u>⁹ and five other HPV cancers.

This guide features actionable steps you and your oral health facility can take to increase HPV vaccination among your patients and in your communities.

Actions at-a-Glance



Get educated about HPV and oropharyngeal cancer prevention.

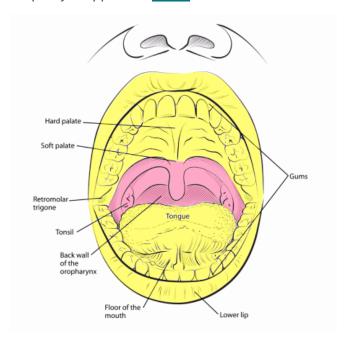
To practice cancer prevention, it's important that all team members, including dentists, hygienists, administrative staff, and executive leadership, know the latest information on what oropharyngeal cancers are, how to screen for them, and what professional organizations recommend regarding HPV vaccination.

Learn about HPV-positive oropharyngeal cancers.

Trends of oropharyngeal cancers:

- HPV-positive oropharyngeal cancers are seen more often in younger people with <u>no history</u> of tobacco or alcohol use.¹⁰
- The median age of diagnosis with an HPV-positive oropharyngeal cancer is about 58 years. About 10% of cases occur after age 70 years.
- Persistent high-risk HPV infection causes approximately 70% of <u>oropharyngeal cancers</u>,¹² the most common of which are <u>squamous cell</u> <u>carcinomas</u>.¹³ These cancers take years to develop.
- The average 5-year survival rate for all stages of oropharyngeal cancer is <u>about 57%</u>.
- These cancers are associated with a high financial burden and devastating psychological and functional impacts to patients both during treatment and <u>throughout survivorship</u>.

The oral cavity appears in **YELLOW** and the oropharynx appears in **PINK**.



Know the symptoms and risk factors for oral and oropharyngeal cancers.

Signs and symptoms of oral and oropharyngeal cancers may include:16

- A sore or pain or discomfort in the mouth, jaw, or throat that does not go away
- A lump or thickening in the lips, mouth, neck, or throat
- A white or red patch on the gums, tongue, tonsil, or lining of the mouth
- Trouble chewing, swallowing, or moving the jaw or tongue
- Sometimes, oral and oropharyngeal cancers present without any symptoms.

High-risk factors for oropharyngeal cancers:17

- Persistent infection with high-risk HPV type
- · Heavy tobacco use
- · Heavy alcohol use
- Betel quid chewing (areca nut [betel nut], spices, lime, and other ingredients)

- Numbness of the tongue, lip, or other area of the mouth
- Dentures that start to fit poorly or become uncomfortable
- Loosening of the teeth or pain around the teeth
- Voice changes
- · Pain in the ear
- · Unexplained weight loss

Tobacco and Alcohol: A Dangerous Duo

When people use tobacco alongside heavy alcohol use, their risk for head and neck cancers is about <u>5 to 14 times greater</u>¹⁸ than for those who don't use alcohol or tobacco.

Actions You Should Take

Talk with parents or guardians about HPV vaccination.

About 87% of children 2-17 years old saw their dentist in 2019. Children may see their dentist more often than they see their primary care provider. Not all primary care providers are aware that HPV vaccination can begin as early as age 9. You can help your patients advocate for themselves by encouraging them to get vaccinated at the first opportunity, which is age 9.

Give strong oral cancer prevention recommendations through HPV vaccination.

Train all team members to start cancer prevention discussions with parents or guardians, discuss HPV vaccination with conviction and compassion, and to answer all questions. These discussions could begin after identifying a patient's HPV vaccine status from their health history form, while giving anticipatory guidance, or during routine oral exams. See <u>create opportunities to enhance HPV vaccination counseling</u> on page 8 to help develop a plan for your team.

Emphasize that parents or guardians should start their child's HPV vaccination series at age 9 years. Repeat these discussions at each visit until the patient <u>completes their vaccination series</u>. The more these messages are repeated, the more likely parents or guardians will follow through. Say things such as:

"Is your child up to date on the HPV vaccine? It prevents 6 types of cancer, including certain head and neck cancers. It works best if it's given between the ages of 9 and 12." "At this age, parents play the most important role in helping us prevent certain cancers caused by HPV. Is your child vaccinated against HPV? It can provide life-long protection against 6 types of cancers."

Strong HPV vaccination recommendations matter.

In 2023, 61% of adolescents age 13 to 17 were up-to-date with their HPV vaccine (girls, 64% and boys, 59%). Health care professional recommendations are the most important determinant in promoting vaccination uptake. Research shows that parents are comfortable discussing HPV vaccination with oral health care professionals. 3



A strong HPV vaccination recommendation:24

- Highlights the importance of on-time vaccination for cancer prevention.
- Emphasizes the need to complete the vaccination series.
- Ends with vaccination referrals or administration of the vaccine on the same day the decision to vaccinate the child is made.

See the <u>Resource Center</u> for additional resources for talking to parents or guardians about HPV vaccination and for an evidence summary of why HPV vaccination should start at age 9 years.

Understand how to screen for oral and oropharyngeal cancers.

The American Academy of Pediatric Dentistry's <u>best</u> <u>practice clinical guidelines</u>²⁵ state that intraoral and extraoral exams should be part of periodic oral exams starting in infancy and carried out through adulthood.

Intraoral and extraoral exams are excellent opportunities to promote cancer prevention through vaccination. Even if patients aren't eligible for HPV vaccination, encourage them to spread the word to loved ones.

Learn the essentials of HPV vaccination.

- ✓ Learn about the importance of <u>HPV vaccination</u>³³ and educate your colleagues.
- ✓ Utilize the <u>Additional Resources</u> provided in the Resource Center to support educational efforts.
- Ensure staff are familiar with potentially relevant American Dental Association Codes on Dental Procedure and Nomenclature for cancer prevention practices.

Resources describing how and why to perform intraoral and extraoral exams.

- American Dental Association: Evidence-based Clinical Practice Guidelines for the Evaluation of Potentially
 <u>Malignant Disorders in the Oral Cavity</u>²⁶
- Academy of General Dentistry: How to Perform an Oral Cancer Screening²⁷
- American Academy of Otolaryngology: The Oral Cavity and Neck Exam video²⁸
- Dentalcare.com: The Intraoral and Extraoral Exam Continuing Education Course²⁹
- Mouth Cancer Foundation: A Simple Head and Neck Cancer Screening³⁰
- Pocket Dentistry: Comprehensive Head and Neck Exam³¹
- Six-step Screening: Intra/Extra Oral Exam Video³²

Read statements from oral health professional organizations on HPV vaccination.

Oral health professional organizations support HPV vaccination as a means of oropharyngeal cancer prevention. Review the resources below for the latest guidance and statements of support.

- American Dental Association: Support for the HPV vaccine³⁴ to protect against oropharyngeal cancers
- Academy of General Dentistry: <u>Dentistry's Role in</u> <u>HPV-related Cancers</u>³⁵ and <u>Oral Cancer Resources</u>³⁶
- American Academy of Pediatric Dentistry: <u>Policy</u> Statement³⁷ on HPV vaccination
- American Association of Orthodontists: <u>Statement from president</u>³⁸ in support of HPV vaccination
- Organized Dentistry Coalition: Support letter for <u>PREVENT HPV Cancers Act</u>³⁹, which was introduced in the US House of Representatives in 2023



Ensure patients get vaccinated.

Parents or guardians may be ready to get their child vaccinated after speaking with you about the HPV vaccination. Harness this opportunity by making referrals or administering the vaccine, if legal in your state.

Develop an HPV vaccination referral process.

- Partner with pediatricians, primary care providers, and pharmacies to ensure continuum of care.
 - Increased collaboration can benefit your practice if primary care providers refer to your oral health practice in turn.
- Allot administrative time for a staff member to develop and keep a list of primary care providers, <u>Federally Qualified Health Centers</u>⁴⁴ (FQHC) that participate in the federal <u>Vaccines for Children Program</u>⁴⁵ to provide free vaccinations to children who qualify (e.g., Medicaid-eligible, uninsured or underinsured, Alaska Native or American Indian).
- Ensure you have the phone numbers, websites, and contacts for each provider readily available to assist parents in scheduling HPV vaccination appointments.
- If your oral health practice is within an integrated clinic, such as an FQHC, develop a process for smooth, same-day vaccination.

Make HPV vaccine referrals or administer the vaccine.

- Refer patients to their primary care provider for their age 9 vaccinations. You can use the printed HPV vaccine "Rx pad" reminders made available by Team Maureen.
- If patients lack a primary care provider, share a list of local providers or encourage them to contact their local health department or FQHC.
- Consider implementing HPV vaccination in your practice. Check⁴⁷ if it is legal for oral health providers to administer the HPV vaccine in your state.



Follow the ACS National HPV Vaccination Roundtable





HPVRoundtable

Add cancer prevention through HPV vaccination counseling into routine oral health care practices and treatment planning.

Oral health professionals are already tasked with reinforcing cancer prevention through practices such as intraoral and extraoral exams and nutrition and tobacco counseling. HPV vaccine promotion is a natural extension of these practices. By encouraging HPV vaccination, you can decrease the burden of oropharyngeal cancers and five other cancers.

Create opportunities to enhance HPV vaccination counseling.

- Build on your existing cancer prevention practices by promoting age 9 HPV vaccination.
- Include HPV cancer prevention information in your office and on your website and social media pages. Reference the <u>Resource Center</u> for ready-made flyers, posters, and graphics.
- Include prompts for HPV vaccination discussion and referrals into electronic health record (EHR) systems.
- Utilize <u>American Dental Association Codes on Dental Procedure and Nomenclature</u> for enhanced data monitoring and quality improvement.
- Add questions related to vaccination history to both <u>adult</u>⁴⁰ and <u>pediatric</u>⁴¹ medical health history forms. For example:
 - Has your child been vaccinated against HPV?
 - Has your child completed the HPV vaccination series? If not, how many HPV vaccines have they had and when were they administered?

A clear plan sets your HPV vaccination efforts up for success. Consider these elements when determining your intervention plan:

Which interventions to use

- HPV vaccination discussions
- EHR prompts
- Vaccination history on medical health history forms
- ADA codes
- Promotion through posters, flyers, and graphics
- Same-day vaccination in integrated clinics

When to use interventions

- After check-in
- During health history reviews
- During intraoral and extraoral exams
- During anticipatory guidance discussions

Who will do what

- Administrative staff
- Assistants
- Hygienists
- Dentists
- Practice leaders

Highlight: Using EHR systems could improve HPV vaccine uptake.

HPV counseling should be done for all genders.

Research shows that implementing reminders into EHRs is strongly associated with increased <u>HPV</u> vaccination uptake⁴²—especially among adolescent males.

This is important given that oropharyngeal cancers are the most common <u>HPV-positive oropharyngeal cancer</u> among men.⁴³



Resource Center

Posters, Flyers, and Graphics to Create a Pro-vaccination Environment

- American Cancer Society: <u>Don't Wait to Vaccinate</u>48
- American Cancer Society: Prevention Matters! 49
- American Cancer Society: <u>Protecting Our Children</u> from HPV Cancers⁵⁰
- American Cancer Society National HPV Vaccination Roundtable: <u>Flyers and posters</u>⁵¹ and <u>Co-brandable</u> <u>"Start at Age 9" Social Media Graphics</u>⁵²
- California Department of Public Health: <u>Vaccines for</u> <u>Your Preteen</u>⁵³ flyers, graphics, and posters in multiple languages
- Team Maureen: <u>HPV Dental Toolkit</u>⁵⁴ poster, brochure, and vaccination reminder cards
- US Department of Health and Human Services: <u>HPV Vaccine Graphics</u>⁵⁵



Additional resources for talking to parents and guardians about HPV vaccination.

- American Academy of Pediatrics: FAQs About HPV56
- American Cancer Society: HPV Vaccines⁵⁷
- American Dental Association: Preventing HPV Cancers in Action—Continuing Education Courses⁵⁸
- CDC: Talking with Parents about HPV Vaccination⁵⁹
- Immunize.org: A Parent's Guide to Preteen and Teen HPV Vaccination 60
- Team Maureen: Dental Toolkit: Parent Talking Tips⁶¹

Additional Resources

- Start HPV Vaccination at Age 9⁶²
 - 2023 Human Vaccines & Immunotherapeutics Collection Toolkit⁶³
 - HPV Vaccination Starting at Age 9: An Evidence Summary⁶⁴
 - Start at Age 9 Print On-demand Toolkit⁶⁵
 - Why Age 9? Fact Sheet⁶⁶
- 2025 American Cancer Society National HPV Vaccination Roundtable Impact Report and Action Plan⁶⁷
- American Academy of Pediatrics: Adolescent Immunization Discussion Guides⁶⁸
- American Cancer Society HPV Information and Resources for Patients and Parents⁶⁹
- American Cancer Society HPV Vaccine Information for Health Care Professionals⁷⁰
- American Cancer Society National HPV Vaccination Roundtable Resource Center⁷¹
- American Cancer Society National HPV Vaccination Roundtable Video Collection⁷²
- American Cancer Society Cancer Prevention & Early Detection Facts & Figures 2025-2026⁷³
- American Cancer Society Recommendations for HPV Vaccine Use⁷⁴
- CDC: HPV Clinical Overview⁷⁵
- CDC: HPV Resources⁷⁶
- HPV Data Sources⁷⁷
- Immunize.org: Immunization Apps for Health Care Providers 78
- Journal of the ADA: Parent Perceptions of Dental Care Providers' Role in HPV Prevention and Vaccine Advocacy⁷⁹
- Research to Increase HPV Vaccine Uptake⁸⁰

Potentially Relevant ADA Codes on Dental Procedure and Nomenclature (the CDT code) from the CDT code⁸¹

D1301: Immunization Counseling

A review of a patient's vaccine and medical history, discussion of the vaccine benefits, risks, and consequences
of not obtaining the vaccine. Counseling also includes a discussion of questions and concerns the patient,
family, or caregiver may have and suggestions on where the patient can obtain the vaccine.

D1781: Vaccine Administration—Human Papillomavirus-Dose 1

• Gardasil 9 - 0.5ml intramuscular vaccine injection

D1782: Vaccine Administration—Human Papillomavirus-Dose 2

• Gardasil 9 - 0.5ml intramuscular vaccine injection

D1783: Vaccine Administration—Human Papillomavirus-Dose 3

• Gardasil 9 - 0.5ml intramuscular vaccine injection

D1320: Tobacco Counseling for the Control and Prevention of Oral Disease

• Tobacco prevention and cessation services reduce patient risks of developing tobacco-related oral diseases and conditions and improves prognosis for certain dental therapies.

D1321: Counseling for the Control of Adverse Oral, Behavioral, and Systemic Health Effects Associated With High-risk Substance Use

Counseling services may include patient education about adverse oral, behavioral, and systemic effects
associated with high-risk substance use and administration routes. This includes ingesting, injecting, inhaling,
and vaping. Substances used in a high-risk manner may include but are not limited to alcohol, opioids, nicotine,
cannabis, methamphetamine, and other pharmaceuticals or chemicals.

Note: Insurance likely does not provide coverage for these codes. D1301 became effective in 2024.

Appendix: Oral Health Professionals

- 38,000 cases: https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2025/2025-cancer-facts-and-figures-acs.pdf
- HPV infections: https://acsjournals.onlinelibrary.wiley.com/doi/full/10.3322/caac.21858
- 3. Oropharyngeal cancers: https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-prevention-and-early-detection-facts-and-figures/2025-cped-files/cped-cff-2025-2026.pdf
- 2% per year: https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2025/2025-cancer-facts-and-figures-acs.pdf
- 5. Lags behind other preteen vaccines: https://www.cdc.gov/mmwr/volumes/72/wr/mm7234a3.htm?s_cid=mm7234a3_w
- 6. 90% of HPV cancers: https://www.cdc.gov/hpv/about/cancers-caused-by-hpv.html
- 7. Ages 20-24 years: https://acsjournals.onlinelibrary.wiley.com/doi/10.3322/caac.21871
- 8. Herd immunity: https://www.acpjournals.org/doi/10.7326/M21-3798
- 9. Cancers: https://jada.ada.org/article/S0002-8177(22)00608-0/abstract?dgcid=PromoSpots_ADAorg_ADANews_JanuaryJADA
- 10. No history of tobacco or alcohol use: https://www.cancer.org/cancer/types/oral-cavity-and-oropharyngeal-cancer/about/what-is-oral-cavity-cancer.html
- 11. Age 70 years: https://pubmed.ncbi.nlm.nih.gov/35105976/
- Oropharyngeal cancers: https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-prevention-and-early-detection-facts-and-figures/2025-cped-files/cped-cff-2025-2026.pdf
- 13. Squamous cell carcinomas: https://www.cancer.org/cancer/types/oral-cavity-and-oropharyngeal-cancer/about/what-is-oral-cavity-cancer.html
- 14. About 57%: https://www.cancer.org/cancer/types/oral-cavity-and-oropharyngeal-cancer/detection-diagnosis-staging/survival-rates.html
- 15. Throughout survivorship: https://jamanetwork.com/journals/jamaotolaryngology/fullarticle/2797523
- 16. Cancers may include: https://www.cancer.org/cancer/types/oral-cavity-and-oropharyngeal-cancer/detection-diagnosis-staging/signs-symptoms.html
- 17. Cancers: https://www.cancer.gov/types/head-and-neck/hp/oral-prevention-pdq#_240_toc
- 18. 5 to 14 times greater: https://www.cancer.gov/types/head-and-neck/hp/oral-prevention-pdq#_240_toc
- 19. 87% of children 2-17 years old saw their dentist in 2019: https://www.cdc.gov/nchs/hus/topics/dental-visits.htm
- 20. Completes their vaccination series: https://www.cdc.gov/vaccines/vpd/hpv/hcp/recommendations.html#schedules
- 61% of adolescents: https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/cancer-prevention-and-early-detection-facts-and-figures/2025-cped-files/cped-cff-2025-2026.pdf
- 22. Vaccination uptake: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10282928
- 23. Oral health care professionals: https://pubmed.ncbi.nlm.nih.gov/36754721/
- 24. HPV recommendation: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10305488/
- 25. Best practice clinical guidelines: https://www.aapd.org/globalassets/media/policies_guidelines/bp_periodicity.pdf
- 26. Evidence-based Clinical Practice Guidelines for the Evaluation of Potentially Malignant Disorders of the Oral Cavity: https://jada.ada.org/article/S0002-8177(17)30701-8/fulltext
- 27. How to Perform an Oral Cancer Screening: https://www.youtube.com/watch?v=xsEuRqMkGhg
- 28. The Oral Cavity and Neck Exam Video: https://www.youtube.com/watch?v=2jVC8UYITMY
- 29. The Intraoral and Extraoral Exam Continuing Education Course: https://www.dentalcare.com/en-us/ce-courses/ce337/introduction-and-statistics
- 30. A Simple Head and Neck Exam: https://pocketdentistry.com/comprehensive-head-and-neck-exam/
- 31. Comprehensive Head and Neck Exam: https://pocketdentistry.com/comprehensive-head-and-neck-exam/
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- 33. HPV vaccination: https://www.cdc.gov/hpv/vaccines/index.html
- 34. Support for the HPV vaccine: https://adanews.ada.org/ada-news/2023/january/january-jada-examines-barriers-to-hpv-related-discussions-in-dental-settings
- 35. Dentistry's Role in HPV-related Cancers: https://www.youtube.com/watch?v=fQUd-ZsIrX4
- 36. Oral Cancer Resources: https://www.agd.org/about-agd/align-with-agd/agd-foundation/our-programs/oral-cancer-awareness
- 37. Policy Statement: https://www.aapd.org/research/oral-health-policies--recommendations/human-papilloma-virus-vaccinations/
- 38. Statement from president: https://www2.aaoinfo.org/president-elect-represents-aao-surgeon-generals-meeting-oral-health/
- 39. Support letter for PREVENT HPV Cancers Act: https://www.perio.org/wp-content/uploads/2022/02/ODC-PREVENT-HPV-Cancers-Letter-002.pdf
- 40. Adult: https://engage.ada.org/p/phys/ada-patient-health-history-form-720

- 41. Pediatric: https://engage.ada.org/p/phys/ada-childrens-health-history-form-722
- 42. HPV vaccination uptake: https://www.ajmc.com/view/electronic-reminders-role-in-promoting-human-papillomavirus-vaccine-use
- 43. Develop HPV-positive oropharyngeal cancer: https://www.cdc.gov/cancer/hpv/cases.html
- 44. Federally Qualified Health Centers: https://findahealthcenter.hrsa.gov
- 45. Vaccines for Children: https://www.cdc.gov/vaccines/programs/vfc/index.html
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- 47. Check: https://jada.ada.org/article/S0002-8177(23)00487-7/abstract
- 48. Don't Wait to Vaccinate: https://www.cancer.org/content/dam/cancer-org/online-documents/en/pdf/flyers/hpv-dont-wait-to-vaccinate.pdf
- 49. Prevention Matters!: https://www.cancer.org/content/dam/cancer-org/online-documents/en/pdf/flyers/hpv-prevention-matters.pdf
- 50. Protecting Our Children from HPV Cancers: https://www.cancer.org/content/dam/cancer-org/online-documents/en/pdf/flyers/protecting-our-children-from-hpv-cancers.pdf
- 51. Flyers and posters: https://hpvroundtable.org/resource-center/?type=14
- 52. Co-Brandable "Start at Age 9" Social Media Graphics: https://hpvroundtable.org/resource-center/?search=starting%20at%20age%209
- 53. Vaccines for Your Preteen: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/Campaigns.aspx
- 54. HPV Dental Toolkit: https://teammaureen.org/about/materials/
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- 81. The CDT code: https://www.ada.org/publications/cdt

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