



**NEW YORK CITY DEPARTMENT OF  
HEALTH AND MENTAL HYGIENE**  
Mary T. Bassett, MD, MPH  
*Commissioner*

August 27, 2014

**Jane R. Zucker, MD, MSc**  
**Assistant Commissioner**  
**Bureau of Immunization**

**42-09 28<sup>th</sup> Street, CN21**  
**Queens, NY 11101-4132**

Dear Colleague:

There has been a lot of media attention recently about human papillomavirus (HPV) infection and HPV vaccine. We would like to take this opportunity to share what the Health Department is doing and let you know about resources that may be helpful to you to promote vaccination. On Monday, August 11th, the Health Department issued a Press Release announcing the launch of a citywide HPV vaccination campaign. Despite the benefits of the HPV vaccine and its proven safety and effectiveness, HPV vaccine remains underutilized. Only 47% of boys and 64% of girls aged 13-17 in New York City have received at least one dose and just 22% of boys and 40% of girls aged 13-17 are fully vaccinated with three doses. Varying across neighborhoods, HPV vaccination coverage is lowest in Staten Island, Central/Southern Brooklyn, and Greenpoint/Williamsburg, according to a 2012 analysis of Citywide Immunization Registry data.

The HPV campaign targets parents of adolescents, encouraging them to vaccinate their children against HPV to reduce their risk of certain cancers down the road. The subway ads (running in subway cars for 8 weeks through October 5th) and the television ads (running on various local channels for 5 weeks through September 14th) appear in both English and Spanish. Parents may ask you about these ads, which encourage them to talk to their pre-teen's doctor about the HPV vaccine. Providers play a crucial role in improving HPV vaccination coverage rates, and data support the influential role strong provider recommendations for the HPV vaccine play in a parent's decision to vaccinate their child.

It is important to review patients' vaccination status at every healthcare encounter to avoid missed opportunities for vaccine co-administration. Visits scheduled during the back-to-school rush for physicals and vaccinations present ideal opportunities to vaccinate patients. In particular, the visit to receive the tetanus, diphtheria, and acellular pertussis (Tdap) vaccine required for school-entry should be utilized as an opportunity to administer all three routinely recommended adolescent vaccines: Tdap, meningococcal conjugate vaccine (MCV4), and HPV vaccine. Three-quarters of 11 year-olds receiving a Tdap are not getting HPV vaccine while one-third are not receiving MCV4 during the same office visit. You can make a difference and help increase New York City's adolescent vaccination rates by administering all recommended vaccines due at the time of the visit.

For some helpful tips on how to communicate the most effective HPV vaccine recommendations to parents and patients, please see the attached resources.

Sincerely,

A handwritten signature in black ink that reads 'Jane R. Zucker'.

Jane R. Zucker, MD, MSc