American College of Obstetricians and Gynecologists (ACOG)

- ACOG is a non-profit corporation 501C3, tax-exempt charitable, educational organization
- ACOG is a medical specialty society
- 95% of board-certified ob-gyns are members of ACOG (a total of 58,000 members)
- Ob-gyns are a major source of ambulatory care for women in the U.S.
- 85% of deliveries attended by ob-gyns
Background

• Current data demonstrate that a strong HCP vaccine recommendation is a major contributor to a successful adult vaccine program

• Numerous surveys indicate that ob-gyns depend on ACOG for practice guidance, education and resource support

• All ACOG patient resources are derived from ACOG’s clinical guidelines for ob-gyns

• Information to follow reviews ACOG patient education resources and initiatives

Ob-Gyns Refer to ACOG Guidelines as Primary Source

• ACOG survey found that 98% of ob-gyns were aware of ACOG guidelines and 96% had used those guidelines over previous 5 years*

• 61% said ACOG guideline changed their practice within last 2 years*

• Survey** found that to stay informed about advances in ob-gyn, ob-gyns refer to:
  --1st to ACOG Practice Bulletins
  --2nd to ACOG Committee Opinions
  --3rd to other sources


ACOG Patient Resources Development

- Based on ACOG’s clinical guidelines
- Developed by ACOG’s Committees on Gyn Practice, Ob Practice, Adolescent Health Care, Health Care for Underserved Women
- Reviewed by ACOG’s Immunization Expert Work Group
- Patient Education Editorial Board review
- Patient literacy medical writer review for print and on-line resources and immunization website

Immunization for Women Website

www.immunizationforwomen.org
Recent Google Analytics

- #1 on Google search since launch in 2011. April 2014 stats:

<table>
<thead>
<tr>
<th>Google Analytics</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Site Visitors</td>
<td>2,601</td>
</tr>
<tr>
<td>Mobile vs. Desktop Traffic</td>
<td>Desktop: 1,785&lt;br&gt;Mobile: 807&lt;br&gt;Tablet: 274</td>
</tr>
<tr>
<td>Popular Pages (in order of popularity)</td>
<td>Pertussis&lt;br&gt;Pregnant/Breastfeeding&lt;br&gt;FAQs – Tdap&lt;br&gt;Tetanus/Diphtheria&lt;br&gt;Affordable Care Act&lt;br&gt;Resources</td>
</tr>
<tr>
<td>Google Placement</td>
<td>When search terms “immunize women, immunization women, women and immunization” are used in Google, the Immunization for Women website is the first website result.</td>
</tr>
</tbody>
</table>

Dedicated ACOG immunization website for Ob-Gyns & Patients

www.immunizationforwomen.org
Patient Specific Vaccination Information

Vaccine Preventable Diseases including:
- Seasonal Influenza (Flu)
- Pertussis
- Human Papillomavirus (HPV)
- Pneumococcus
- Varicella
- Meningococcus
- Hepatitis A
- Hepatitis B
- Herpes Zoster
- Tetanus/Diphtheria
- Measles, Mumps, and Rubella
- Poliomyelitis (Polio)

Special Populations:
- Pregnant/Breastfeeding
- Adolescents
- Ethnic and Racial Groups
- Medical Conditions
- Seniors
- Travelers

Patient Friendly Website

- Patient tabs and Ob-Gyn tabs on every section and page
- Pregnant, nonpregnant, adolescents, ethnic groups, older
- Patient literacy medical writer reviews all content and rewrites to be user and reader friendly eg 6th-8th grade reading level
- Daily updates and monthly sweep of entire website for any clinical updates and revisions needed with guidelines
- Based on Google analytics 1/3 of searches are from mobile websites, ACOG is developing a mobile platform for its Immunization for Women website
Patient Specific Frequently Asked Question Section

Topics Include:
- Seasonal influenza
- Tdap
- HPV
- Measles, Mumps, and Rubella (MMR)
- Herpes Zoster (Shingles)
- Varicella
- Meningococcus
- Hepatitis A

ACOG’s Response to H1N1
- Pregnant women had 6 xs morbidity and mortality
- Increased hospitalizations
- ACOG mobilized rapid response and resources to ob-gyns, patients and public
- E-communication and web-based guidance
- Collaborated closely with CDC
H1N1 cont’d


- ACOG developed assessment and treatment algorithm to triage pregnant women with ILI symptoms

- H1N1 resources sent to all 35,000 ob-gyns in practice in U.S.

- Email blasts

- H1N1 webpage

- CDC and DHHS reported ob-gyns were most active HCP
H1N1 Patient FAQ Fact Sheet
Endorsed by AMA and Society for Maternal Fetal Medicine

Immunization Tool Kits
Influenza Immunization During Pregnancy
- August 2012
- Distributed to 35,000 active Fellows and Jr. Fellows in practice; residency directors

Immunization Resources for Obstetrician-Gynecologists
- May 2013
- Distributed to 35,000 active Fellows and Jr. Fellows in practice; residency directors

Tdap Immunization
- September 2013
- Distributed to 35,000 active Fellows and Jr. Fellows in practice; residency directors
Evidence-based Toolkit Mailings with Patient Materials

Seasonal Influenza (Flu) 2011-2012:
- Flu Vaccine FAQ tear pad for patients
- Physician script for introducing topic to patient
- Vaccine Information Statement
- ACOG clinical guidelines

Seasonal Influenza 2012-2013:
- Flu Vaccine FAQ tear pad for patients
- Vaccine Safety FAQ tear pad for patients
- Physician script for introducing topic to patient
- Vaccine Information Statement
- ACOG clinical guidelines
Evidence-based Toolkit Mailings with Patient Materials, cont.

Tdap May 2012:

- Tdap FAQ tear pad for patients
- Vaccine Safety FAQ tear pad for patients
- Physician script for introducing topics to patients
- Vaccine Information Statement
- ACOG clinical guidelines

Updated Tdap Tool Kit: September 2013

- Distributed to over 35,000 practicing ob-gyns in the US
- Joint letter from ACOG and Every Child By Two (ECBT)
- Frequently Asked Questions tear pad for patients
- Physician Script
- Laminated coding guide
- Updated ACOG Tdap Committee Opinion based on new ACIP recs
  - 1st to include patient scenarios
- ECBT Fact Sheet
- ECBT Poster

Tool kit is available electronically on the Immunization for Women website!
Evidence-based Toolkit Mailings with Patient Materials, cont.

Routine Practice Immunization Tool Kit Mailing, Summer 2013:

- Frequently Asked Questions for Patients Concerning Vaccine Safety
- Physician Scripts
- Adult Immunization Record
- Text4Baby Patient Material
- Spanish language Patient Frequently Asked Questions
- ACOG clinical guidelines

Adult & Pregnancy Immunization Record Card
Patients FAQ Tear Pads

Endorsed by AMA and Society for Maternal Fetal Medicine

Text4Baby Materials
Text4baby Ob-Gyn customized flyer

**Evidence-based**

- Individual patient immunization text messaging based on their response why they didn’t get immunized

- Highlights efficacy of Text4baby to increase immunization rates based on 2011-12 flu data

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HPV Vaccination Patient Resources

**Frequently Asked Questions for Patients Concerning HPV Vaccination**

*What is HPV?*

Human papillomavirus (HPV) is a group of over 100 different viruses. Some types of HPV are known to cause skin or genital warts or to cause other cancers. HPV is a sexually transmitted infection that can be spread through skin-to-skin contact during sexual activity.

*What does HPV vaccination prevent?*

HPV vaccination is the best way to prevent cervical cancer in women. It can also help prevent vaginal, vulvar, and penile cancer in men, and other HPV-related cancers. HPV vaccination is recommended for girls and boys aged 11 to 12 years. People who were not vaccinated as young adults can get vaccinated during their lifetimes.

*How is HPV vaccine administered?*

The HPV vaccine is given by injection into the upper arm. It is given over a 6-month period. The series consists of 3 doses:

1. Month 0: 1 dose
2. Month 2: 1 dose
3. Month 6: 1 dose

*How can people get more information?*


**Physician Script Concerning HPV Vaccination**

Human papillomavirus (HPV) is a virus that can cause warts and can also cause some types of cancer. There are over 100 types of HPV, and some types of HPV can cause cancer in the skin, cervix, vagina, vulva, and penis. The HPV vaccine is the best way to prevent HPV-related diseases, and it is recommended for people aged 11 to 26 years.

*What are the benefits of HPV vaccination?*

- Reduces the risk of developing HPV-related cancers
- Prevents genital warts
- Improves health and quality of life

*Who should get vaccinated?*

- All girls and young women aged 11 to 12 years
- All boys and young men aged 11 to 12 years
- Teen girls and young women aged 13 to 26 years
- Teen boys and young men aged 13 to 26 years

*Who should not get vaccinated?*

- People who are allergic to any of the ingredients in the vaccine
- People who are positive for HIV
- People who have had a severe allergic reaction to a previous dose of HPV vaccine

*How is the vaccine given?*

The HPV vaccine is given by injection into the upper arm. It is given over a 6-month period. The series consists of 3 doses:

1. Month 0: 1 dose
2. Month 2: 1 dose
3. Month 6: 1 dose

*Who can get vaccinated?*

People who are 11 to 26 years old can get vaccinated. People who are older than 26 years can get vaccinated if they are unvaccinated and have a sexually transmitted infection (STI). People who have had a sexual partner who has been diagnosed with HPV-related cancer can also get vaccinated.

*Frequently asked questions:*

Q: Is the vaccine safe?

A: Yes, the vaccine is safe and effective. The most common side effects are pain, swelling, redness, and tenderness at the injection site.

Q: How long does the vaccine last?

A: The vaccine is effective for at least 10 years. However, it is recommended that people get a booster dose at age 15 years.

Q: Can people still get HPV if they have had the vaccine?

A: Yes, people can still get HPV even if they have had the vaccine. The vaccine does not protect against all types of HPV.

**RESOURCES**

- The American College of Obstetricians and Gynecologists
- The American Society for Colposcopy and Cervical Pathology
- The Centers for Disease Control and Prevention
Ob-gyns’ Response to Tool-kits

- Numerous requests for FAQs for patients
- Depleted ACOG inventory
- Prompted ob-gyns to institute immunization practices
- For example, following Tdap toolkit, an ob-gyn practice requested 200 Tdap packets per month to begin Tdap vaccine program and put in “new ob patient pack” as part of routine practice for all new ob patients
- Resources/toolkits have greatest hits on Immunization for Women website after toolkit distribution and promotion
- High demand for Vaccine Safety FAQs and Influenza Vaccination FAQs

New On-line FAQs for Ob-Gyns

**Tdap and HPV**
- Tdap and HPV FAQs for ob-gyns on website
- Most common patient clinical cases and questions
- Based on new CDC and ACOG guidance to assist ob-gyns in implementing and interpreting new ACIP recs and increase vaccination rates
ACOG Immunization App

Smartphone App
- Apple and Android
- Launched 2013
- Free for public
- Interactive Applet in ACOG’s App
- Patient profile
- FAQs, resources, alerts
- 14,500 downloads as of March 2014

ACOG App & Immunization Applet

Social Media

- Webinars
  - Joint with ASTHO and AIM
  - SHD Linkages
  - Pregnancy and Flu
  - Adult Vaccines
- Twitter chats
  - HPV
  - Flu
  - Adult Vaccines Nov. 2012
    - 280,000 Followers
    - 548,000 Impressions
- Facebook
Program Evaluation

- PRAMS data in 29 states in 2009-10 found influenza/H1N1 immunization rates for pregnant women increased from 15% to 47%/40%.*
- 50% Rate maintained in 2010-11, 2011-12 flu seasons**†
- 63% of pregnant women received a provider recommendation for influenza vaccination in 2011-12 flu season‡
- 51% of pregnant women were immunized for influenza during the 2012-2013 flu season§

*CDC. Influenza Vaccination Coverage Among Pregnant Women—29 States and New York City, 2009-10 Season. MMWR 2012;61:113-118
**CDC. Influenza vaccine Coverage Among Pregnant Women—US—2010-2011 Influenza Season. MMWR 2011; 60: 1078-1082
†http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6138a2.htm
‡MMWR September 28, 2012;61(8):758-763
§http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6238a3.htm?s_cid=mm6238a3_e

Immunization Activity Evaluation

- Pre-Survey to Fellows
  - National randomized survey January 2013 to help determine:
    - If practices are receiving and reviewing ACOG immunization materials
    - How many practices offer flu/Tdap
    - Usefulness of ACOG materials
    - What are the barriers to immunization?

- Post-Survey to Fellows
  - After mailing
    - Did you receive the mailing?
    - Did it meet your expectations?
    - Did it provide useful materials to increase vaccination at your practice?
    - What can we do moving forward?
Focus Group: ACM May 2012

Received feedback on print mailings from focus group of ACOG members

- How many provide patient education around immunization? 100%
- How many provide printed material to your patients on immunization? 100%
- How many remember receiving either of the two immunization educational materials' mailings? 86%
- Would you use these materials in your practice? Yes 100%

Focus Groups ACM May 2013

Through these focus groups ACOG explored the type of materials members wanted and the usefulness of recent ACOG initiatives

**Immunizers**
- 25% of respondents want printed materials for themselves.
- 75% of respondents want printed materials for their patients.
- 75% of respondents are familiar with the ACOG's immunization toolkits.
- 50% of respondents have read the materials in the toolkits.
- General Consensus: printed materials are useful for patients but not for providers. Providers want access online and the option to print off-line if they want.

**Non-Immunizers**
- 100% of participants remember getting the immunization toolkits;
- 2/3 of participants read the toolkits
- Participants have found that the toolkits are simple to follow, and easy for their patient population to read.
- Participants do not like that they have to pay for additional materials (tear pads etc).
- 100% of respondents would like to have staff training around immunization, and have it tied into SCOPE certification. The suggestion was made that this training could be offered as a webinar.
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