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Abstract C133: Human papillomavirus vaccine recommendations for the medically underserved: A pilot study on provider communication in a safety net clinic

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Abstract

Introduction The human papillomavirus (HPV) vaccine is highly effective in the prevention of cervical, vulvar, and anal cancers in women. Federally Qualified Health Centers (FQHCs) are safety-net clinics that serve a population disproportionately burdened by a lack of preventative health care services that would benefit from additional measures such as the HPV vaccine. Documenting HPV vaccine recommendations and beliefs of primary care providers in FQHCs may help in promoting evidence-based practices for vulnerable populations. **Methods** The specific aims of this study include: 1) to assess a baseline rate of HPV vaccination and counseling among women attending an FQHC clinic, and 2) to identify FQHC clinic and practitioner barriers for effective HPV vaccine recommendations. We performed a retrospective chart review of 105 women who attended an OB/GYN clinic at an FQHC in Santa Ana, CA between 1/1/2019 and 3/30/2019. Data included patient demographics, insurance type, and documentation of HPV vaccine counseling or vaccine administration. Provider data, as detailed from completion of a nationally validated HPV vaccination survey from an estimated 50 providers will also be discussed. **Results** 78% of patients self-identified as Hispanic, 14% reported Spanish as their primary language, and 86% of patients were enrolled in Medi-Cal. 25% (n = 27) of patients reviewed had documented administration of the HPV vaccine in the FQHC medical chart. Of those that had documented vaccine administration, 52% (n = 13) completed 3 doses of the vaccination program. During the study period, 11% of patient visits had documented counseling regarding the HPV vaccine, 14% had documentation of counseling within the prior 12 months of the encounter. Patients who were primarily English speaking versus Spanish were more likely to have received the HPV vaccine (29.9% vs 5.6%, p = 0.0374). Patients enrolled in Medi-Cal were more likely to receive the vaccine compared to other insurance types, including uninsured (31.5% vs 12.5%, p = 0.522). Hispanic women were less likely to have documented counseling regarding the HPV vaccine compared to non-Hispanic women (18.4% vs 0% (p = 0.0198). **Conclusion** Overall, OB/GYN providers at an FQHC are not routinely recommending the HPV vaccine for their patients. Patients who are primarily Spanish speaking are less likely to have received counseling regarding the vaccine documented in their chart. In order to maximize the public health benefit of the HPV vaccine to prevent cervical cancer, adherence to guidelines is necessary, especially in settings that provide care to medically underserved women.