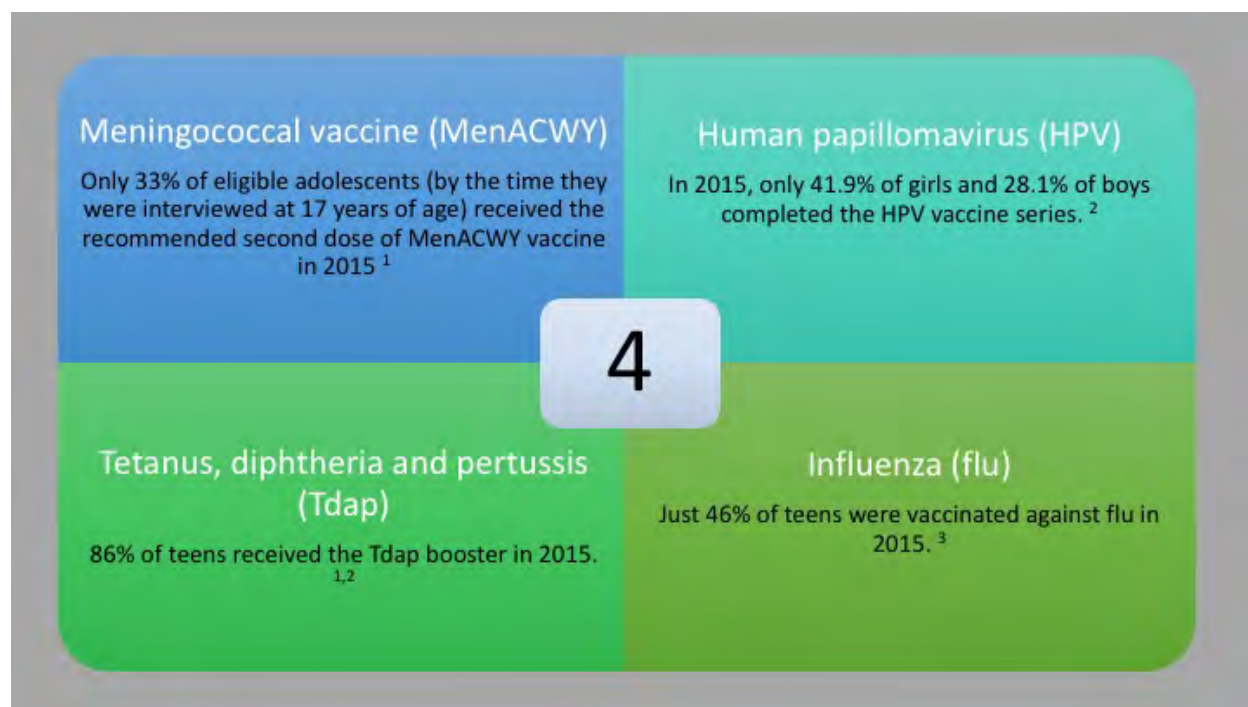


Despite CDC Recommendations, Millions of Teenagers Remain Under-Vaccinated

We know discussing teen vaccinations during appointments may present challenges and that teens, their parents and guardians may be focused on other issues when they come for their visits. However, vaccinations should be a part of these conversations. The goal is to help protect teens against serious infectious diseases by seeing that they are up-to-date on their vaccinations. In addition to the Friday Focus information presented this month, CAFP and AAFP have the tools to help improve vaccination coverage among teens.

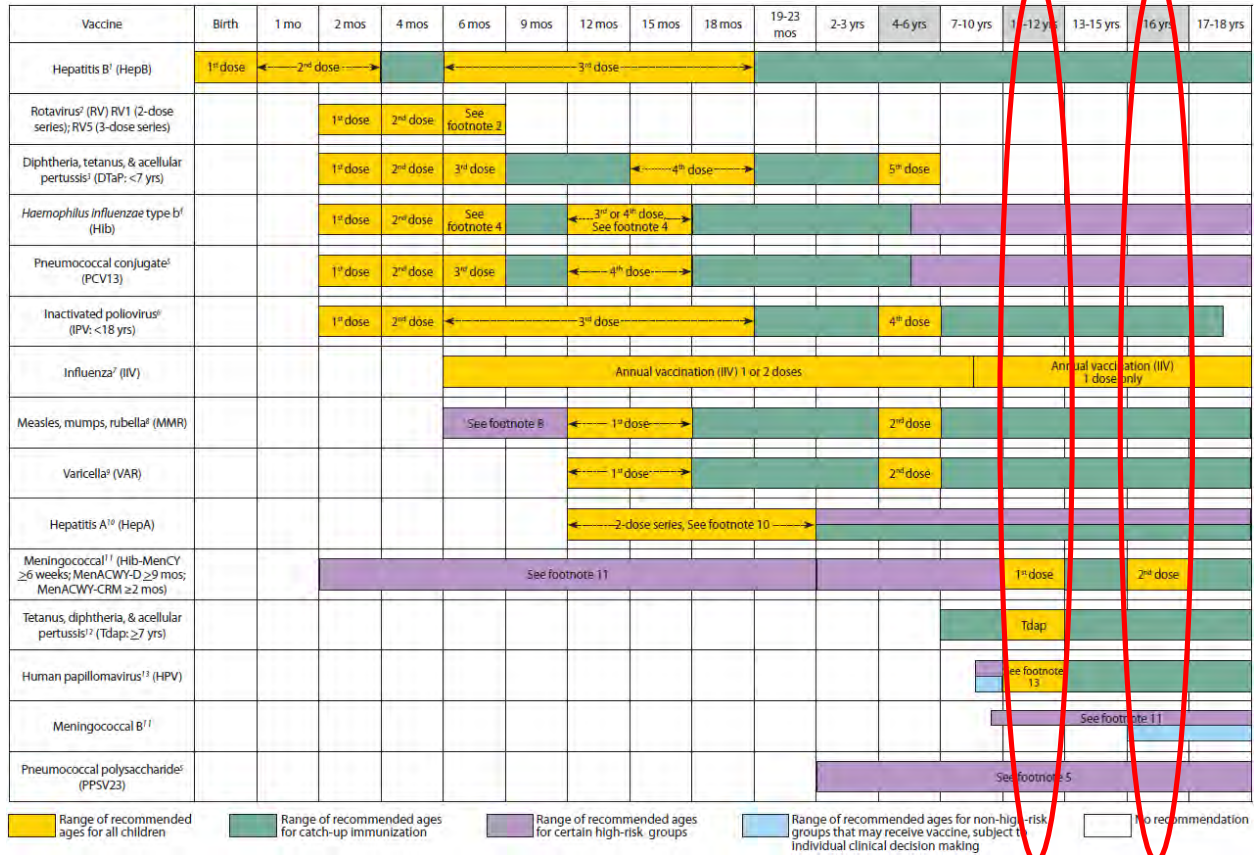
The Centers for Disease Control (CDC) recommends that teens receive four vaccinations, as a matter of routine, to help protect against serious infectious diseases:



It is also important to address the meningitis B vaccine. This vaccine is only recommended by the CDC for certain groups of people at increased risk for serogroup B meningococcal disease. For example, students on college campuses that have recently experienced outbreaks of serogroup B meningitis are recommended to receive the meningitis B vaccine.¹⁻²

The most critical time for teen vaccinations is the 11-12-year and 16-year visits. If a child misses or

delays the 11-12-year-old visit, the rest of the teenage platform will be off schedule. The 2017 schedule was published in February and the 16-year visit was delineated in its own column, highlighting the importance of scheduling 16-year-old adolescent patients for necessary vaccinations to help protect them against serious infectious diseases. This updated immunization schedule is a step in the right direction.



Addressing vaccine hesitancy:²

Part of the challenge family physicians face in ensuring their teenage patients receive these preventive vaccinations is vaccine hesitancy. Reality or perception? Or both? To address vaccine hesitancy, you and your team can:

1. Take your own pulse: Physicians often approach discussions about vaccines anticipating pushback or disagreements. However, most patients, even ones who ask questions about vaccine safety, are not truly resistant to immunization, and parents largely want clarification and reassurance. Discuss vaccine safety in a nonjudgmental way by expressing curiosity, seeking first to understand before pressing to be understood.
2. Take your patient’s pulse: Cultural pressure, misinformation and fear of harm are a few reasons why patients may hesitate to agree to vaccination. There are several published models on managing vaccine hesitancy. However, a recent Cochrane review of these face-to-face interventions found their effects to be overall of low quality and generally lacking in impact.

Because patients may be less likely to trust physicians who communicate poorly, honing your motivational interviewing skills and practicing active listening does not take away from your ability to talk to patients about vaccine-related decisions.

3. Give a strong recommendation: Data show that a physician's recommendation is the most important reason a patient accepts an immunization. Opening the immunization conversation with a presumptive approach rather than a participatory approach (e.g., saying “We have to do some shots,” rather than asking, “What do you want to do about shots?”) can dramatically decrease resistance to vaccine recommendations. Also, persistence matters. Nearly one-half of parents who initially resisted following immunization recommendations ultimately accepted them when physicians continued to pursue their recommendations.
4. Live to fight another day: Despite all your best efforts, a small percentage of patients will refuse one or more vaccines. We encourage preserving your relationship with the patient and tabling the conversation for another day. In the U.S., the parent/guardian or patient has the right to make medical decisions, and physicians should respect their decisions, even when they disagree.

Based on available national and state data, you and your practice team may benefit from additional educational materials about teen vaccination for teen patients, their parents and guardians. [Highlight on VACCINATIONS 4 TEENS](#) features a robust Resource Library of these types of materials for you and your care teams and office staff to use.

Visit www.aafpfoundation.org/vaccinations4teens for these valuable tools. If you have any questions, contact information is provided on the website.

Best Key Practices

Strongly recommend adolescent vaccines to patients ages 11 through 18 years and parents/guardians¹

Use every opportunity to vaccinate adolescent patients¹

Use patient reminder and recall systems such as automated postcards, phone calls and text messages¹

Educate parents/guardians about the diseases that can be prevented by adolescent vaccines¹

Implement standing orders policies so that patients can receive vaccines without a physician examination or individual physician order¹

Remember to work with staff to check patients' vaccination records and update the state immunization registry

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