The Morbidity and Mortality Weekly Report (MMWR)* recently released the 2015 National Immunization Survey-Teen (NIS-Teen) data, which provides national, state, regional, and selected local area estimates of vaccination coverage. As reported in the MMWR, “In 2015, coverage with each HPV vaccine dose increased among males, however, among females, ≥1 dose HPV vaccination coverage increased only modestly, and no change was observed in coverage with ≥2 and ≥3 HPV doses.” As in prior years, coverage with ≥1 HPV vaccine dose was lower than coverage estimates for two other vaccines routinely recommended at age 11–12 years, highlighting ongoing missed opportunities for HPV vaccination when other recommended vaccines are administered. Next year, a revised Healthcare Effectiveness Data and Information Set (HEDIS) measure will be implemented to evaluate receipt of the three recommended vaccines by age 13 years in females and males combined in one composite indicator,** facilitating health plans’ and providers’ assessment of their performances in administering these vaccines on time to adolescents. See page 2 of this report for 2015 NIS-Teen vaccination coverage, as well as a data summary for Georgia.

2016 HPV Vaccine Distribution Trends in Georgia

Below are available year-to-date totals of CDC and non-CDC distributed HPV vaccine doses of Gardasil and Gardasil 9 in your state or city. CDC recommends examining vaccine distribution data for trends to approximate recent HPV vaccine administration, as distribution data can inform action in real time to increase vaccination.

Year-to-date Total of Distributed† Gardasil and Gardasil 9 HPV Vaccine Doses in Georgia (2012-2016)

<table>
<thead>
<tr>
<th>Year</th>
<th>Doses Distributed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>0</td>
</tr>
<tr>
<td>2013</td>
<td>0</td>
</tr>
<tr>
<td>2014</td>
<td>0</td>
</tr>
<tr>
<td>2015</td>
<td>0</td>
</tr>
<tr>
<td>2016</td>
<td>0</td>
</tr>
</tbody>
</table>

Note: Cervarix doses, which represent less than 1% of the HPV vaccine doses distributed in the United States, are not included in this report.

2015 2016 % change
Jan 17,917 20,763 15.9%
Feb 32,844 40,216 22.4%
Mar 52,632 61,534 16.9%
Apr 72,452 81,244 12.1%
May 93,748 102,881 9.7%
Jun 124,993 131,512 5.2%
Jul 162,781                         
Aug 211,654                         
Sept 240,227                         
Oct 267,195                         
Nov 293,618                         
Dec 310,671                         

*These data represent an estimate of all Gardasil and Gardasil 9 HPV vaccine doses distributed in Georgia.

*To read the full MMWR about the 2015 NIS-Teen analysis, visit: [http://www.cdc.gov/mmwr/volumes/65/wr/mm6533a4.htm?s_cid=mm6533a4_e](http://www.cdc.gov/mmwr/volumes/65/wr/mm6533a4.htm?s_cid=mm6533a4_e).


To assess vaccination coverage among teens aged 13–17 years, CDC analyzed the 2015 NIS-Teen survey data collected through questionnaires completed by vaccination providers following consents by interviewed parents or guardians.

Estimated National and State/Local Vaccination Coverage, Teens Aged 13-17 Years, NIS-Teen 2014-2015

<table>
<thead>
<tr>
<th></th>
<th>≥1 Tdap</th>
<th>≥1 MenACWY</th>
<th>≥1 HPV (females)</th>
<th>≥1 HPV (males)</th>
<th>≥2 doses</th>
<th>≥3 doses</th>
<th>≥2 doses</th>
<th>≥3 doses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Females</td>
<td>Males</td>
<td>Females</td>
<td>Males</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>≥1 dose</td>
<td>≥2 doses</td>
<td>≥3 doses</td>
<td>≥1 dose</td>
<td>≥2 doses</td>
<td>≥3 doses</td>
<td>≥1 dose</td>
<td>≥2 doses</td>
</tr>
<tr>
<td>Georgia 2014</td>
<td>86.1(±4.8)</td>
<td>74.9(±6.1)</td>
<td>65.4(±9.1)</td>
<td>56.3(±9.5)</td>
<td>47.1(±9.7)</td>
<td>41.2(±9.0)</td>
<td>28.0(±7.8)</td>
<td>21.0(±7.2)</td>
</tr>
<tr>
<td>Georgia 2015</td>
<td>90.2(±4.0)</td>
<td>87.0(±4.6)*</td>
<td>54.4(±9.5)</td>
<td>38.7(±8.9)§</td>
<td>32.3(±8.4)§</td>
<td>51.0(±8.5)</td>
<td>42.5(±8.4)*</td>
<td>27.5(±7.6)</td>
</tr>
<tr>
<td>United States 2014</td>
<td>87.6(±0.9)</td>
<td>79.3(±1.1)</td>
<td>60.0(±1.9)</td>
<td>50.3(±1.9)</td>
<td>39.7(±1.9)</td>
<td>41.7(±1.8)</td>
<td>31.4(±1.7)</td>
<td>21.6(±1.6)</td>
</tr>
<tr>
<td>United States 2015</td>
<td>86.4(±1.0)</td>
<td>81.3(±1.0)*</td>
<td>62.8(±1.8)*</td>
<td>52.2(±1.8)</td>
<td>41.9(±1.8)</td>
<td>49.8(±1.8)*</td>
<td>39.0(±1.7)*</td>
<td>28.1(±1.6)*</td>
</tr>
</tbody>
</table>


Abbreviations: Tdap= tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine; MenACWY= quadrivalent meningococcal conjugate vaccine. Tdap, MenACWY, and HPV vaccines are recommended for adolescents aged 11–12 years.

*Statistically significant (p<0.05) increase from 2014 estimates.
§Statistically significant (p<0.05) decrease from 2014 estimates.

2015 NIS-Teen HPV Data Summary: Georgia

Compared to estimates from 2014, HPV vaccination coverage in Georgia:

- Significantly decreased from 2014 to 2015 in ≥2 and ≥3 dose coverage for females. There was a non-significant decrease in ≥1 dose coverage among females.
- Significantly increased from 2014 to 2015 in ≥2 dose coverage for males. There were non-significant increases in ≥1 and ≥3 dose coverage among males.

Consult this CDC-authored publication for information on interpreting survey findings:

Resources to Increase HPV Vaccination Coverage

- Get involved with partners, such as the American Cancer Society (ACS). Information on the National HPV Vaccination Roundtable can be found at:
  http://www.cancer.org/healthy/informationforhealthcareprofessionals/nationalhpvvaccinationroundtable/
- View the latest #PreteenVaxScene webinar, “Research Project Update: AFIX Program Strategies for Improving HPV Vaccination Rates in the Field”:
  https://www.youtube.com/watch?v=MAF3_Mt7zdQ
- Visit TeenVaxView for comprehensive interactive adolescent vaccination coverage data online at:
  https://www.cdc.gov/vaccines/imz-managers/coverage/teenvaxview/index.html

Have questions? Contact us at preteenvaccines@cdc.gov.