



SPECIAL EDITION SPECIAL EDITION SPECIAL EDITION SPECIAL EDITION SPECIAL EDITION SPECIAL EDITION

# HPV vaccine could prevent over 100,000 cancers

**Estimates suggest that the HPV vaccine programme will lead to the prevention of over 64,000 cervical cancers and nearly 50,000 non-cervical cancers by 2058.**

**From September this year**, boys in school year 8 will be offered the free Human Papilloma Virus (HPV) vaccine for the first time.



Worldwide, about 5% of all cancers are linked to the HPV virus. This includes cervical, penile, anal and genital cancers and some cancers of the head and neck – all of which the vaccine helps to protect against. Cervical cancer is currently the most common cancer in women under 35, killing around 850 women each year.

HPV is thought to be responsible for over 99% of cervical cancers, as well as 90% of anal, about 70% of vaginal and vulvar cancers and more than 60% of penile cancers.

Modelling produced by the University of Warwick estimates that by 2058 in the UK the HPV vaccine currently being used may have prevented up to 64,138 HPV-related cervical cancers and 49,649 other HPV-related cancers.

This would be 50 years after the introduction of the HPV vaccination programme, when people who were vaccinated as teenagers have reached the age groups that would typically be affected by HPV related cancers.



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## Head of Immunisation at PHE Dr Mary Ramsay said

"I encourage all parents of eligible boys and girls to make sure they take up the offer for this potentially life-saving vaccine.

It's important not to delay vaccination, as the vaccine may be less effective as adolescents get older."

"This universal programme offers us the opportunity to make HPV-related diseases a thing of the past and build on the success of the girls' programme.

Offering the vaccine to boys will not only protect them but will also prevent more cases of HPV related cancers in girls and reduce the overall burden of these cancers in both men and women in the future."

The vaccine will be offered to boys, in addition to girls, as part of the routine school aged schedule in England from 1 September 2019. This follows the government's announcement in July 2018 to include HPV vaccination of boys, which was based on the advice of the Joint Committee of Vaccination and Immunisation (JCVI).

**Every vaccination offered and received contributes to a powerful global public health movement – a movement that seeks to eradicate disease – every HPV vaccination given, contributes to a global cancer reduction, that's wonderful'** said Joanne Yarwood at the recent NIN2019 conference.

With the introduction of the universal HPV programme it's a good time to look back to 2008 and congratulate all those involved in the national programme on the tremendous success that we have achieved together. It has been a massive effort involving school vaccination teams, schools, teachers and last but certainly not least those girls and their parents who agreed to the important protection this vaccine has offered. It is a wonderful example of organisations and people working together from government to individuals in order to help protect against cancer.



**HPV**  
vaccination

arm  
against  
cancer

We should also remember that not only does vaccination protect the individual but those benefits spread to others through herd protection. Immunisation is part of a national and global programme that has successfully seen the reduction in infectious diseases and whose benefits cannot be underestimated. As we look forward to the start of the universal HPV programme in England it's worth once again remembering the value of vaccines in our efforts to improve the well being of our population.

## New vaccine coverage data collection tool

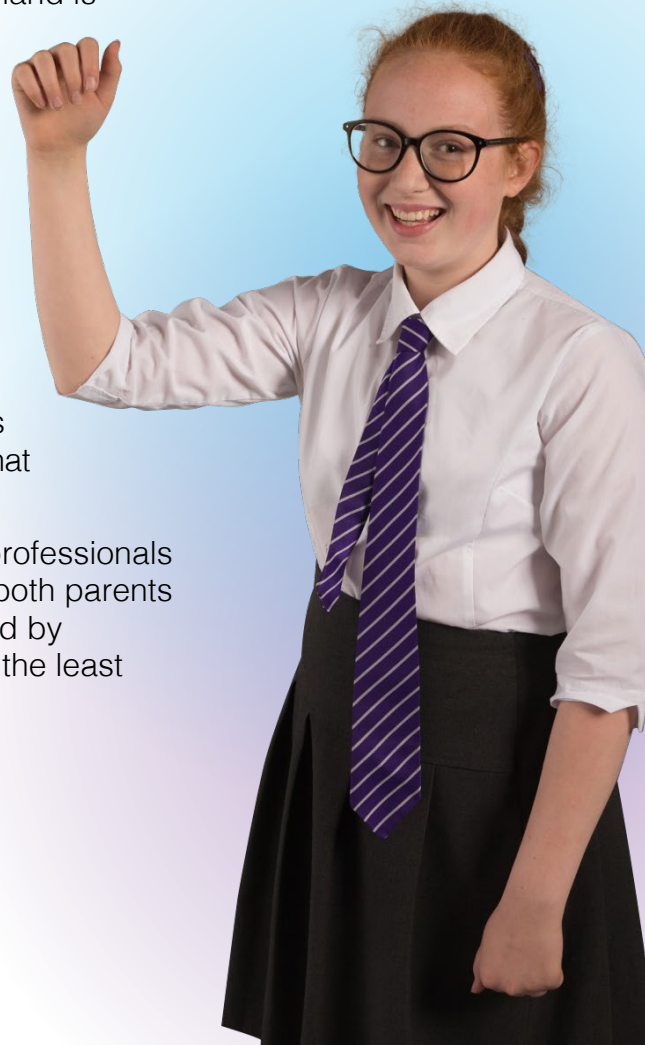
As the start of the universal HPV Vaccination Programme approaches, the Vaccine Coverage Team at Public Health England have created a new optional school-level vaccine coverage data collection tool to assist with local data collection. The 2019/20 school-based collection tool has been circulated to Local Screening and Immunisation Teams. The tool may be used to collect school-level data by gender and aggregates the data for national reporting to the Local Authority level. The aggregated data can be copied into the ImmForm annual survey. Local Areas that choose to use the tool can estimate real-time coverage throughout the academic year. For more information on the tool, please see the User Guide at [weblink 1](#), and Tutorial Videos with [weblink 2](#). To request a copy of the tool please contact [adolescent@phe.gov.uk](mailto:adolescent@phe.gov.uk).

## Attitudinal Surveys and leaflet testing

The young people's immunisation programme in England is supported by an annual cross-sectional interview survey exploring parent and teenager attitudes. The results of the surveys inform the development of the programme and provides valuable feedback on public-facing communications.

The 2018 survey showed that overwhelming majority of young people (95%) felt that it was important to get vaccinated. Those who had learnt about vaccinations at school were more likely to believe it was very important to get vaccinated compared to those who had not (77% cf. 58%). Only 9% of parents and 6% of young people had seen or heard anything that would make them concerned about having a vaccine.

The survey confirmed the important role that health professionals play in providing immunisation advice. Over 90% of both parents and young people trust immunisation advice provided by health professionals and the NHS. Social media was the least trusted source of immunisation information.





Specific questions about the extension of the HPV immunisation programme to include boys showed that genital cancers and cancers of the head and neck perceived as equally serious as cervical cancer and meningitis. Seventy percent of parents stated that they would take up the offer of the HPV vaccine for their sons, 14% would not take up the offer, and a further 16% were unsure. This was prior to the release of any detailed information about the programme so it is expected that the number of parents who are unsure will reduce.

A subgroup of parents and young people agreed to take part in more detailed interviews on the content, layout and logos of the new HPV leaflet. Two rounds of testing took place and the leaflets and other materials were revised based on the feedback received. Following the first round of testing, we carried out photoshoots in a couple of schools to get contemporary pictures of young people in the relevant age groups in a school environment. The feedback from the testing was generally very positive and it was felt that the leaflet, including links to more detailed information for those who wanted it, provided enough information to make a decision.



We would like to extend a very special thank-you to Julie Thornton, immunisation lead, Essex, Chase school and Thorpe hall schools, to the two school teams and head teachers who permitted us to undertake the photoshoots on their premises. The wonderful children who contributed to our new image stock library for the teenage and HPV programmes are the focus of our new campaign. These young people embraced the photographic brief and worked so well with our photographers and have made a very important contribution to this public health intervention. We are looking forward to showcasing the portfolio to the two schools at the start of the Autumn term.



# Resources

## New Arm against Cancer resources

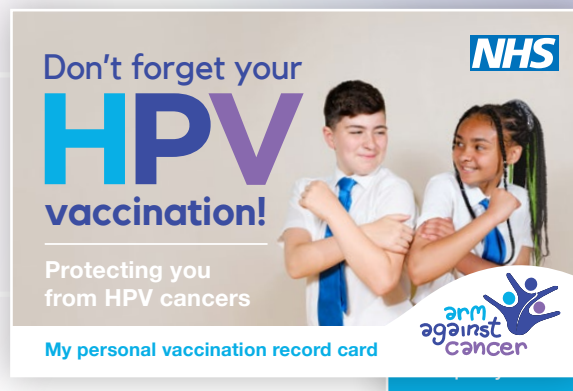
The new Arm against Cancer campaign materials for the HPV universal programme are ready and stocks are already being dispatched to teams, thank-you for ordering so promptly.

For anyone who has not yet ordered their stock please visit the DH health and social care order line and search for Arm against Cancer at [weblink 3](#).



Your guide to the HPV vaccination leaflet  
 Product code: **1012473A**  
[Weblink 4](#)

HPV universal programme record card  
 Product code: **3902657C**  
[Weblink 5](#)



**you from HPV cancers**

Name	
HPV given	Date second HPV vaccination given

After your second dose of HPV vaccine, speak to your school nurse or GP practice. If you were not at school, you can still have it on your birthday. Get protected.

[www.nhs.uk/hpv](http://www.nhs.uk/hpv)  
Crown copyright 2018 3902657C JUN 2019 (APS)



HPV vaccination factsheet for health professionals

Product code: **2016462B**

[Weblink 6](#)



## Human papillomavirus (HPV) vaccination

FACTSHEET FOR HEALTH PROFESSIONALS

### The HPV vaccine is not new

The HPV vaccine has been used in the UK since 2008 and more than 10 million doses have been given. More than 80 million people have been vaccinated worldwide.

### Most young people are being vaccinated

Nearly 90% of parents choose to accept the HPV vaccine for their child. Most women aged 15 to 24 years in England have now been given the vaccine and we anticipate that from 2019 most boys will be given the vaccine too.

### Girls and boys should have the vaccine at the recommended ages

Vaccination at a younger age is more effective at preventing HPV infection. So the best time to be vaccinated is between 12 and 14 years.

### Safe sex wont provide enough protection

HPV can spread by any sexual contact. Condoms do not completely prevent the risk of infection

### HPV vaccine works

In England, we have already seen a significant decrease in infections with the two main HPV types that can cause cancer (types 16 and 18).

Scottish researchers have also shown a decline – probably due to cross-protection – in three other HPV types linked to cancer (types 31, 33 and 45).

The number of precancerous lesions in the cervix has already fallen by over 50% since the programme began in Australia, Denmark and Scotland.

### Are people reporting more side effects than expected after HPV?

To date, the number of reports to the Medicines and Healthcare Products Regulatory Agency (MHRA) of suspected side effects for HPV vaccines is not unusual. The overwhelming majority relate to mild conditions commonly seen when you vaccinate teenagers (e.g. injection site reactions, rashes, mild allergic events, nausea, dizziness, fatigue, immediate faints due to needle phobia, etc.)

### The UK programme has already contributed to preventing future deaths from cancer. We expect it to eventually prevent hundreds of cancer deaths every year.



© Crown copyright 2019. 2016462B 1p 50K JUNE 2019

and Prevention in the USA, the World Health Organization, and the European Medicines Agency have looked carefully at the evidence and concluded that there is currently no credible evidence of a link between HPV vaccine and a range of chronic illnesses.

As with all vaccines, the safety of HPV vaccine will remain under close and continual review.

### The product insert mentions a number of serious and chronic conditions. Does that mean that the vaccine causes these conditions?

Although the US package insert lists a range of reported illnesses – these are included regardless of any established link with the vaccine. The EU product insert also mentions some conditions reported in temporal association with vaccination but for which a causal association has not been established.

An example is the inclusion of the nerve disorder Guillain Barre Syndrome, for which several epidemiological studies have found no evidence of a causal link to the vaccine.

### Extensive reviews of vaccine safety have concluded that evidence does not support a link between HPV vaccine and the development of a range of chronic illnesses.

#### References

1. Vichnin M et al. An Overview of Quadrivalent Human Papillomavirus Vaccine Safety, 2006 to 2015. *Pediatr Infect Dis J*. 2015 Sep;34(9):983-91.
2. Giraldo-Benoudia L et al. Autoimmune disorders and quadrivalent human papillomavirus vaccination of young female subjects. *J Intern Med*. 2014 Apr;275(4):398-408.
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5. Doregan K et al. Bivalent human papillomavirus vaccine and the risk of fatigue syndromes in girls in the UK. *Vaccine*. 2013 Oct 18;31(43):8691-7.
6. Gee J et al. Monitoring the safety of quadrivalent human papillomavirus vaccine: findings from the Vaccine Safety Datalink. *Vaccine*. 2011 Oct 26;29(46):8779-84.
7. Cameron RL et al. Adverse event monitoring of the human papillomavirus vaccines in Scotland. *Intern Med J*. 2016 Apr;46(4):452-7.
8. Arntsen-Dahlstrom L et al. Autoimmune, neurological, and venous thrombotic adverse events after immunisation of adolescent girls with quadrivalent human papillomavirus vaccine in Denmark and Sweden: cohort study. *BMJ*. 2013 Oct 9;347:f5006.



Don't forget to have your

**HPV**  
vaccination  
Protecting you from HPV cancers



Produced by Public Health England  
© Crown copyright 2019. 3902657B 1p 50K 2019 9493

Don't forget to have your HPV vaccination poster

Product code: **3902657B**

[Weblink 7](#)

Human papillomavirus (HPV)  
Vaccination consent form

The HPV vaccine that protects against several types of cancer is being offered to your child at school. To get the best protection, two doses are required. The second injection will be usually offered six to 12 months after the first. The school will let you know when the second dose will be given. This leaflet 'Your guide to the HPV vaccination' sent with this form includes more information about the vaccine. Please discuss this with your son or daughter, then complete this form and return it to the school before the vaccination is due. Information about the vaccination will be set on your child's health records. If you have any questions, please contact the school immunisation nurse.

Child's full name (first name and surname):	Date of birth:
Home address:	Daytime contact telephone number for parent/carer:
NHS number (if known):	Ethnicity:
School:	Year group/class:
GP name and address:	Gender (circle as appropriate): Male      Female

Your child will receive their first HPV vaccine in Year 9 term and the second HPV vaccine in Year 10 term.

**Consent for two HPV vaccinations:** (Please complete **one** box only)

<p><input type="checkbox"/> I want my child to receive the full course of two HPV vaccinations</p> <p>Name: _____</p> <p>Signature: _____ <small>Parent/Carer</small></p> <p>Date: _____</p>	<p><input type="checkbox"/> I do not want my child to have the HPV vaccine</p> <p>Name: _____</p> <p>Signature: _____ <small>Parent/Carer</small></p> <p>Date: _____</p>
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If, after discussion, you and your child decide that you do not want them to have the vaccine, it would be helpful if you would give the reasons for this on the back of this form (and return to the school).

Any side effects following the HPV vaccination should be reported to the school nurse or your GP.

Thank you for completing this form. Please return it to the school as soon as possible.

OFFICE USE ONLY					
Date of HPV vaccination	Site of injection (anatomical site)	Batch number/ expiry date	Immuniser (please print)	Where administered (school, college, GP etc)	
First	L arm	R arm			
Second	L arm	R arm			

HPV Consent form

[Weblink 8](#)






## Resources for social media

**The HPV vaccine**

Pre-cancerous cervical disease in women has reduced by up to **71%**

Cases of genital warts have declined by **90%** in girls and **70%** in boys


Offering the vaccine to boys will further reduce the overall burden of cancer and genital warts in both sexes.



**The HPV vaccine**

Worldwide, about **5%** of all cancers are linked to the HPV virus.

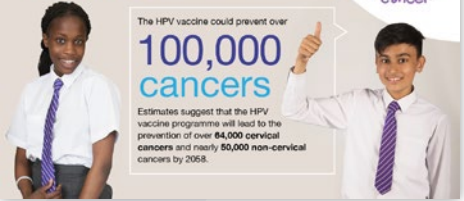
From September year 8 girls and boys will be offered the potentially life-saving HPV vaccine.



**The HPV vaccine**

The HPV vaccine could prevent over **100,000 cancers**

Estimates suggest that the HPV vaccine programme will lead to the prevention of over 64,000 cervical cancers and nearly 80,000 non-cervical cancers by 2068.



**The HPV vaccine**

From September year 8 girls and boys will be offered the free HPV vaccine.

Look out for information from your children's school about the vaccine and timings for the jab.




**The HPV vaccine**

**10,000,000** doses of HPV vaccine have been given to young women in this country.

From September year 8 boys will get the vaccine too.



**The HPV vaccine**

If your child has missed their HPV vaccine for any reason, talk to their school nurse/immunisation team about getting the vaccine at a later date.



**The HPV vaccine**

If you've missed your HPV vaccine for any reason, talk to your school nurse/immunisation team about getting the vaccine at a later date.



**The HPV vaccine**

From September year 8 girls and boys will be offered the free HPV vaccine.

Talk to your school nurse/immunisation team about getting the vaccine at a later date.



We have produced a toolkit of social media resources for you to use to promote the vaccination programmes in:

- below your signature for emails
- in your twitter account – banners

**Infographics to use in:**



Instagram



Facebook



Twitter



Websites



Whatsapp

**And also on:**



Please download them at [weblink 9](#)

Instructions for use:

- download them and save them to your drive.
- where applicable insert them in tweets, Whatsapp, [etc.](#)

# Immunisation schedules 2019

Routine childhood immunisations				Autumn 2019	
When	Diseases protected against	Vaccine given and trade name	Usual site		
Eight weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b (Hib) and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa	Thigh	
	Meningococcal group B (MenB)	MenB	Bexsero	Left thigh	
	Rotavirus gastroenteritis	Rotavirus	Rotarix	By mouth	
Twelve weeks old	Pneumococcal (13 serotypes)	PCV	Prevenar 13	Thigh	
	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa	Thigh	
	Rotavirus	Rotavirus	Rotarix	By mouth	
Sixteen weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa	Thigh	
	MenB	MenB	Bexsero	Left thigh	
	Pneumococcal (13 serotypes)	PCV	Prevenar 13	Thigh	
One year old (on or after the child's first birthday)	Hib and MenC	Hib/MenC	Menitorix	Upper arm/thigh	
	Pneumococcal	PCV booster	Prevenar 13	Upper arm/thigh	
	Measles, mumps and rubella (German measles)	MMR	MMR VaxPRO <sup>2</sup> or Priorix	Upper arm/thigh	
Eligible paediatric age group <sup>1</sup>	Measles, mumps and rubella	MMR booster	Bexsero	Left thigh	
	Influenza (each year from September)	Live attenuated influenza vaccine LAIV <sup>3</sup>	Fluenz Tetra <sup>3</sup>	Both nostrils	
	Diphtheria, tetanus, pertussis and polio	DTaP/IPV	Infanrix IPV or Repevax	Upper arm	
Three years four months old or soon after	Measles, mumps and rubella	MMR (check first dose given)	MMR VaxPRO <sup>2</sup> or Priorix	Upper arm	
	Cancers caused by human papillomavirus (HPV) types 16 and 18 (and genital warts caused by types 6 and 11)	HPV (two doses 6-24 months apart)	Gardasil	Upper arm	
	Tetanus, diphtheria and polio	Td/IPV (check MMR status)	Revasis	Upper arm	
Boys and girls aged twelve to thirteen years	Meningococcal groups A, C, W and Y disease	MenACWY	Nimenrix or Menvivo	Upper arm	

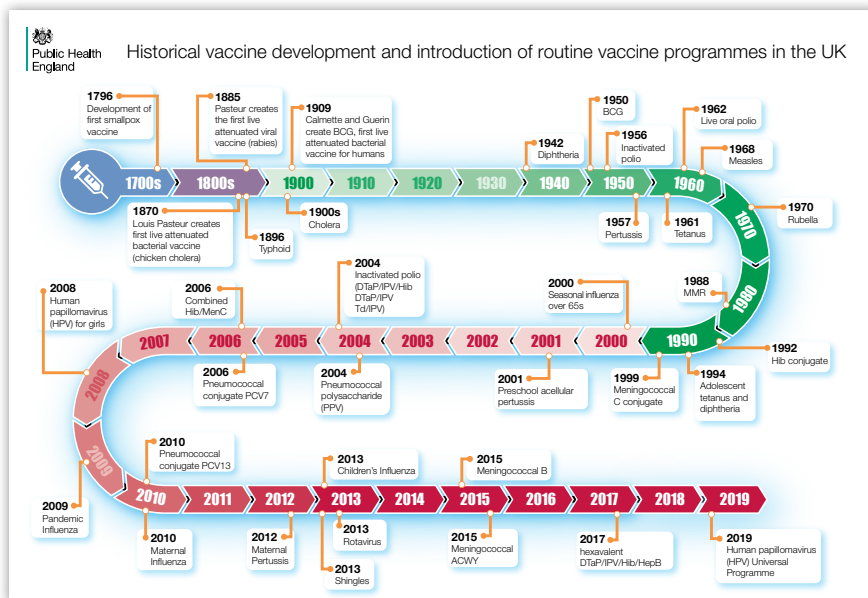
1. See Green book chapter 19 or visit [www.gov.uk/government/publications/influenza-the-green-book-chapter-19](http://www.gov.uk/government/publications/influenza-the-green-book-chapter-19) or visit [www.nhs.uk/conditions/vaccinations/hib-flu-vaccine/](http://www.nhs.uk/conditions/vaccinations/hib-flu-vaccine/)  
2. Contains porcine gelatine  
3. LAIV (live attenuated influenza vaccine) is contraindicated and the child is in a clinical risk group, use inactivated flu vaccine

The routine immunisation schedule				from Autumn 2019	
Age due	Diseases protected against	Vaccine given and trade name	Usual site		
Eight weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b (Hib) and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa	Thigh	
	Pneumococcal (13 serotypes)	Pneumococcal conjugate vaccine (PCV)	Prevenar 13	Thigh	
	Meningococcal group B (MenB)	MenB	Bexsero	Left thigh	
Twelve weeks old	Rotavirus gastroenteritis	Rotavirus	Rotarix	By mouth	
	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa	Thigh	
	Rotavirus	Rotavirus	Rotarix	By mouth	
Sixteen weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa	Thigh	
	Pneumococcal (13 serotypes)	PCV	Prevenar 13	Thigh	
	MenB	Bexsero	Bexsero	Left thigh	
One year old (on or after the child's first birthday)	Hib and MenC	Hib/MenC	Menitorix	Upper arm/thigh	
	Pneumococcal	PCV	Prevenar 13	Upper arm/thigh	
	Measles, mumps and rubella (German measles)	MMR	MMR VaxPRO <sup>2</sup> or Priorix	Upper arm/thigh	
Eligible paediatric age group <sup>1</sup>	Measles, mumps and rubella	MMR booster	Bexsero	Left thigh	
	Influenza (each year from September)	Live attenuated influenza vaccine LAIV <sup>3</sup>	Fluenz Tetra <sup>3</sup>	Both nostrils	
	Diphtheria, tetanus, pertussis and polio	DTaP/IPV	Infanrix IPV or Repevax	Upper arm	
Three years four months old or soon after	Measles, mumps and rubella	MMR (check first dose given)	MMR VaxPRO <sup>2</sup> or Priorix	Upper arm	
	Cancers caused by human papillomavirus (HPV) types 16 and 18 (and genital warts caused by types 6 and 11)	HPV (two doses 6-24 months apart)	Gardasil	Upper arm	
	Tetanus, diphtheria and polio	Td/IPV (check MMR status)	Revasis	Upper arm	
Boys and girls aged twelve to thirteen years	Meningococcal groups A, C, W and Y disease	MenACWY	Nimenrix or Menvivo	Upper arm	
	Pneumococcal (23 serotypes)	Pneumococcal Polysaccharide Vaccine (PPV)	Pneumococcal Polysaccharide Vaccine	Upper arm	
65 years of age and older	Influenza (each year from September)	Inactivated influenza vaccine	Multiple	Upper arm	
	Shingles	Shingles	Zostavax <sup>2</sup>	Upper arm	

1. See Green book chapter 19 or visit [www.gov.uk/government/publications/influenza-the-green-book-chapter-19](http://www.gov.uk/government/publications/influenza-the-green-book-chapter-19) or visit [www.nhs.uk/conditions/vaccinations/hib-flu-vaccine/](http://www.nhs.uk/conditions/vaccinations/hib-flu-vaccine/)  
2. Contains porcine gelatine  
3. LAIV (live attenuated influenza vaccine) is contraindicated and child is in a clinical risk group, use inactivated flu vaccine

The routine childhood immunisation schedule Autumn 2019 is available to download at [weblink 10](#)

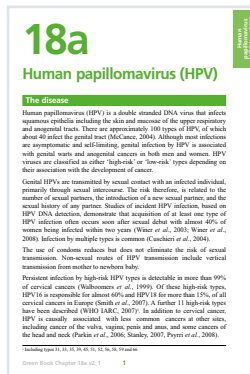
The complete immunisation schedule Autumn 2019 is available to download at [weblink 11](#)



The historical vaccination timeline has been updated to include the HPV universal programme and is available to download at [weblink 12](#)





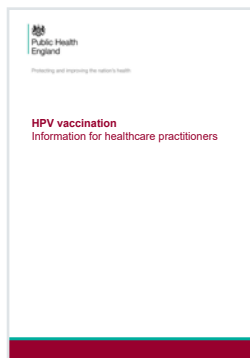


## The Green Book chapter on human papilloma virus (HPV) has been published!

The Green Book HPV chapter has been comprehensively updated in preparation for the introduction of the HPV universal programme. This will be introduced in the coming 2019/20 academic year which for the first time will include the vaccination of boys, in addition to girls, as part of routine adolescent HPV programme. The chapter has also been updated to include guidance on the HPV vaccination programme for men who have sex with men (MSM). Since the last update which was in June 2014, which

included the reduction of the three dose to two dose schedule, there has been a lot of scientific evidence published, especially on the impact of HPV vaccination. The sections on HPV disease, epidemiology and vaccination has been updated to reflect this. In addition, the chapter now includes reference to the 9 valent vaccine although this is not currently being used in the national programme. See [weblink 13](#).

The European Society of Gynecologic Oncology (ESGO) supports vaccination programs for children and young adolescents, with a catch-up program for young adults, if feasible, and also vaccination on an individual basis. 'Gender-neutral vaccination improves the protection of women and men, while it maximises benefits from vaccination at lower coverage. Individuals with a history of infection or previous treatment of HPV-related disease may also get a benefit from vaccination.'



## Training slide set and guidance

**This guidance provides information for healthcare practitioners about HPV universal programme eligibility, scheduling and vaccine administration for the adolescent programme.**

Please download at [weblink 14](#).

**There is a slide set to accompany the guidance.**

The purpose of this guidance is:

- to support healthcare professionals involved in advising on and delivering the HPV vaccination programme.
- to raise awareness of the current epidemiology of HPV
- to provide guidance on the vaccination programme extension to include boys.
- to describe the programme details including administration of the vaccine, eligibility, recommended dosage and schedule, contraindications, precautions and potential adverse reactions.
- to raise awareness of the impact of the HPV vaccination programme

Please download at [weblink 15](#).



### References

Human papillomavirus vaccination: The ESGO–EFC position paper of the European society of Gynaecologic Oncology and the European Federation for colposcopy – Joura, Elmar A. et al. *European Journal of Cancer*, Volume 116, 21 – 26

[www.ejccancer.com/article/S0959-8049\(19\)30288-6/fulltext](http://www.ejccancer.com/article/S0959-8049(19)30288-6/fulltext)

# Vaccine supply (centrally supplied)

## Human papillomavirus (HPV) vaccine Gardasil

Additional vaccine stock for the extension to boys will be available to order from August, in preparation for the September start.

## Human papillomavirus (HPV) vaccine: PGD template

Patient group direction (PGD) template to support the national human papillomavirus (HPV) vaccination programme has been published at [weblink 16](#).

This patient group direction (PGD) template supports the administration of HPV vaccine to individuals from 12 years of age or from school year 8 in accordance with the national immunisation programme.

HPV PGD V03.00 is valid from 1 May 2019 to 31 August 2021.

Practitioners must not use this PGD template until it has been authorised in Section 2. This is a legal requirement [see Human Medicines Regulations 2012](#). Practitioners should follow local policy/procedures to access authorised PGD documents.

This PGD template should be used with reference to current national guidance, the [Green Book](#), and [Summary of Product Characteristics](#).

Other documents relating to the universal human papilloma virus vaccination programme can be found on the Gov.UK website in the [HPV vaccination programme collection](#).



## Web links

- weblink 1 <https://www.gov.uk/government/publications/adolescent-vaccine-coverage-school-level-data-collection-tools>
- weblink 2 <https://publichealthengland-immunisati.app.box.com/s/n2oqm0fize4zpi9r10aoayes6dv6llzp>
- weblink 3 [https://www.orderline.dh.gov.uk/ecom\\_dh/public/saleproducts.jsf](https://www.orderline.dh.gov.uk/ecom_dh/public/saleproducts.jsf)
- weblink 4 <https://www.gov.uk/government/publications/hpv-vaccine-vaccination-guide-leaflet>
- weblink 5 <https://www.gov.uk/government/publications/human-papillomavirus-hpv-vaccination-record-card>
- weblink 6 <https://www.gov.uk/government/publications/hpv-vaccination-and-cervical-cancer-addressing-the-myths>
- weblink 7 <https://www.gov.uk/government/publications/hpv-vaccination-programme-from-september-2014-poster>
- weblink 8 <https://www.gov.uk/government/publications/human-papillomavirus-hpv-vaccination-consent-form>
- weblink 9 <https://publichealthengland-immunisati.app.box.com/s/mgxur9qup2kia0n6ginwo7m9nblaf28u>
- weblink 10 <https://www.gov.uk/government/publications/routine-childhood-immunisation-schedule>
- weblink 11 <https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule>
- weblink 12 <https://www.gov.uk/government/publications/vaccination-timeline>
- weblink 13 <https://www.gov.uk/government/publications/human-papillomavirus-hpv-the-green-book-chapter-18a>
- weblink 14 <https://www.gov.uk/government/publications/hpv-universal-vaccination-guidance-for-health-professionals>
- weblink 15 <https://publichealthengland-immunisati.app.box.com/s/mua76jmrtdbjw18r6asl352bfpoce4g35>
- weblink 16 <https://www.gov.uk/government/publications/human-papillomavirus-hpv-vaccine-pgd-template>