



# Joint Task Force National Capital Region Medical **DIRECTIVE**

**NUMBER 6205.05**

**MAR 29 2013**

---

---

J-3B

**SUBJECT:** Human Papillomavirus (HPV) Immunization

**References:** See Enclosure 1

1. PURPOSE. This Directive, based on the authority in References (a) through (d), implements the policy and recommendations in References (e) and (f) for the Joint Task Force National Capital Region Medical (JTF CapMed).

2. APPLICABILITY. This Directive applies to the JTF CapMed Headquarters (HQ), Walter Reed National Military Medical Center, Fort Belvoir Community Hospital, 779<sup>th</sup> Medical Wing and Joint Pathology Center.

3. POLICY. It is JTF CapMed policy to reduce morbidity and mortality from HPV by offering quadrivalent or bivalent HPV vaccine to all Active Duty members and other beneficiaries according to the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) (References (f), (g), (h), and (i)).

4. RESPONSIBILITIES. See Enclosure 2

5. RELEASABILITY. UNLIMITED. This Directive is approved for public release and is available on the JTF CapMed Website at [www.capmed.mil](http://www.capmed.mil).

MAR 29 2013

6. EFFECTIVE DATE. This Directive:

- a. Is effective upon publishing to the JTF CapMed Website; and
- b. Must be reissued, cancelled, or certified current within 5 years of its publication in accordance with JTF CapMed Instruction 5025.01 (Reference (j)). If not, it will expire effective 10 years from the publication date and be removed from the JTF CapMed Website.

  
STEPHEN L. JONES  
Major General, U.S. Army  
Acting Commander

Enclosures

1. References
2. Responsibilities

Glossary

MAR 29 2013

ENCLOSURE 1REFERENCES

- (a) Deputy Secretary of Defense Memorandum, “Authorities for Joint Task Force National Capital Region Medical (JTF CapMed),” February 7, 2012
- (b) Deputy Secretary of Defense Action Memorandum, “Civilian and Military Personnel Management Structures for the Joint Task Force National Capital Region Medical,” January 15, 2009
- (c) Comprehensive Master Plan for the National Capital Region Medical, April 23, 2010
- (d) Supplement to the Comprehensive Master Plan for the National Capital Region Medical, August 31, 2010
- (e) JTF CapMed Directive 5103.04, “Immunization Delivery Optimization Work Group Charter,” April 12, 2012
- (f) Centers for Disease Control and Prevention. Quadrivalent Human Papillomavirus Vaccine. Recommendations of the ACIP. MMWR 2007:56:RR-2
- (g) Centers for Disease Control and Prevention. FDA Licensure of Bivalent Human Papillomavirus Vaccine (HPV2, Cervarix) for Use in Females and Updated HPV Vaccination Recommendations from the ACIP, 2010. MMWR 2010: 59(20); 626-629
- (h) Centers for Disease Control and Prevention. Recommendations on the Use of Quadrivalent Human Papillomavirus Vaccine in Males – ACIP, 2011. MMWR 2011: 60(50); 1705-1708
- (i) Centers for Disease Control and Prevention. ACIP Recommended Immunization Schedules for Person Aged 0 Through 18 Years and Adults Aged 19 Years and Older – United States, 2013. MMWR 2013, January 28, 2013
- (j) JTF CapMed Instruction 5025.01, “Formats and Procedures for the Development and Publication of Issuances,” March 5, 2012

MAR 29 2013

ENCLOSURE 2RESPONSIBILITIES

1. GENERAL. Oversight and guidance for the Immunization and Chemoprophylaxis Program within the National Capital Region (NCR) is the responsibility of the Immunization Delivery Optimization (IDO) Work Group. The IDO Work Group is the JTF CapMed executive oversight committee and point of contact for all matters related to immunizations and chemoprophylaxis (Reference (e)).

2. JOINT MTF COMMANDERS. The Joint MTF Commanders will:

a. Identify all Active Duty members and other beneficiaries who are eligible for the quadrivalent or bivalent HPV per the ACIP guidelines in Reference (i).

b. Provide those patients eligible for immunization with the most current Vaccine Information Statement (VIS) regarding HPV vaccine. The VIS is available at <http://www.immunize.org/vis>.

c. Immunize those patients, both male and female, between the ages of 9 and 26 years as indicated per Reference (i), who are without contraindications, and who elect immunization.

d. HPV vaccines are not recommended for use in pregnant women. However, pregnancy testing is not needed before vaccination. If a woman is found to be pregnant after initiating the vaccination series, no intervention is needed; the remainder of the 3-dose series should be delayed until the completion of pregnancy.

e. Ensure patients needing evaluation for adverse events after immunization are promptly referred to appropriate medical providers.

f. Record the date the immunization is administered, the manufacturer and lot number of the vaccine, the vaccination site and route, and the name and title of the person administering the vaccine in the patient's health record. If the vaccine is not administered, record the reason(s) (c.g., medical contraindication, patient refusal) in the patient's health record.

g. Ensure emergency medical response is available, that personnel who administer immunizations are trained in basic cardiopulmonary resuscitation and the administration of epinephrine, and that health care providers are available to respond to adverse events resulting from immunization.

h. Report all adverse reactions to HPV vaccine using the Vaccine Adverse Event Reporting System at <http://www.vaers.hhs.gov> or by calling 1-800.882.7967.

GLOSSARYABBREVIATIONS AND ACRONYMS

ACIP	Advisory Committee on Immunization Practice
FBCH	Fort Belvoir Community Hospital
HPV	human papillomavirus
HQ	headquarters
IDO	Immunization Delivery Optimization
JTF CAPMED	Joint Task Force National Capital Region Medical
MTF(s)	Medical Treatment Facilities
NCR	National Capital Region
VIS	Vaccine Information Statement
WRNMMC	Walter Reed National Military Medical Center