


AAP-CA2 HPV QI Project


Monthly Data Collection (Required per participating provider)


(10 consecutive "HPV Vaccine *Naïve*" charts of 11 or 12 year-old patients).

Practice Name	
Practice Street Address	
Provider	
Email	
Phone	

	Patient Age		Males	Females	Was dose 1 of HPV vaccine administered?		Strong Provider Recommendation Given?		Reason for Vaccination Refusal (If applicable)
	11	12			Yes	No	Yes	No	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									


Total Charts
 (QIDA)


Total Yes
Question 1
 (QIDA)


Total Yes
Question 2
 (QIDA)

Mark with "X" in rows 1-10 above.
 Add and enter numeric value in Total Boxes to upload data into QIDA.
 Please return to us via email or Fax after uploading to QIDA.
Email: Chapter2@aap-ca.org **Fax:** (888) 838-1987

