



January 2023

Immunisation & Vaccination Service
Community Health & Wellbeing
Wayside House
Wilsons Lane
Coventry
CV6 6NY

Dear Parent / Guardian

## **ELECTRONIC CONSENT FOR HPV**



**************************************	School Name & URN: Cardinal Newman & URN: 147346  Date of vaccination: 15/02/2023 & 16/02/2023  Unique consent link: <a href="https://iv.covwarkpt.nhs.uk/form?identifier=2c17e008-7ec8-4d89-b155-86ce9a7a4936">https://iv.covwarkpt.nhs.uk/form?identifier=2c17e008-7ec8-4d89-b155-86ce9a7a4936</a>
CLOSE	The above consent link will close on <b>05/02/2023</b>
	You will receive a unique submission number to confirm your e- consent form has been received. Please make a note of this number before closing your internet browser in case you have a query.
	If you have more than 1 child at the school you will need to <a href="mailto:complete">complete</a> <a href="mailto:aseparate form">aseparate form</a> for each child by clicking on the link again. Please make sure it is your child's name and date of birth recorded on the form. Before submitting the form, please check details are correct

	This vaccine helps protect against cancers caused by HPV, including cervical cancer, some mouth and throat (head and neck) cancers and some cancers of the anal and genital areas. It also helps protect against genital warts. To get the best protection, your child will need two injections with the first being given in year 8 and the second in year 9
	Service Detail   Coventry and Warwickshire Partnership NHS Trust (covwarkpt.nhs.uk) The link above will give you access to:  • INFORMATION OF WHO CAN GIVE CONSENT  • ADVICE FOLLOWING VACCINATION  • DATA SHARING – Our responsibility  • HPV information leaflet
	Information about the HPV vaccine in other languages can be found here HPV universal vaccination: leaflet - GOV.UK (www.gov.uk)
	If you decide you <b>do not</b> want your child vaccinated against HPV, please indicate this on the consent form, giving the reason. This will help us plan for and improve the HPV vaccination programme. We will not vaccinate your child without valid consent in place
YES NO	If you change your mind change about consent after submitting a form, please DO NOT complete another form We ask that you instead email your childs immunisation team (email address below) with the following:  • Your child's full name / Your child's Date Of Birth / Your child's school.  • Consent decision/status that is already submitted and the reason for change
	Coventry schools: Tel: 024 76 961422 Email:  Bewise.Immunise@covwarkpt.nhs.uk  South Warwickshire schools: Tel: 01926 353899 Email:  SOUTHIMMS@covwarkpt.nhs.uk  North Warwickshire schools Tel: 02476 321550 Email:  NORTHIMMS@covwarkpt.nhs.uk