



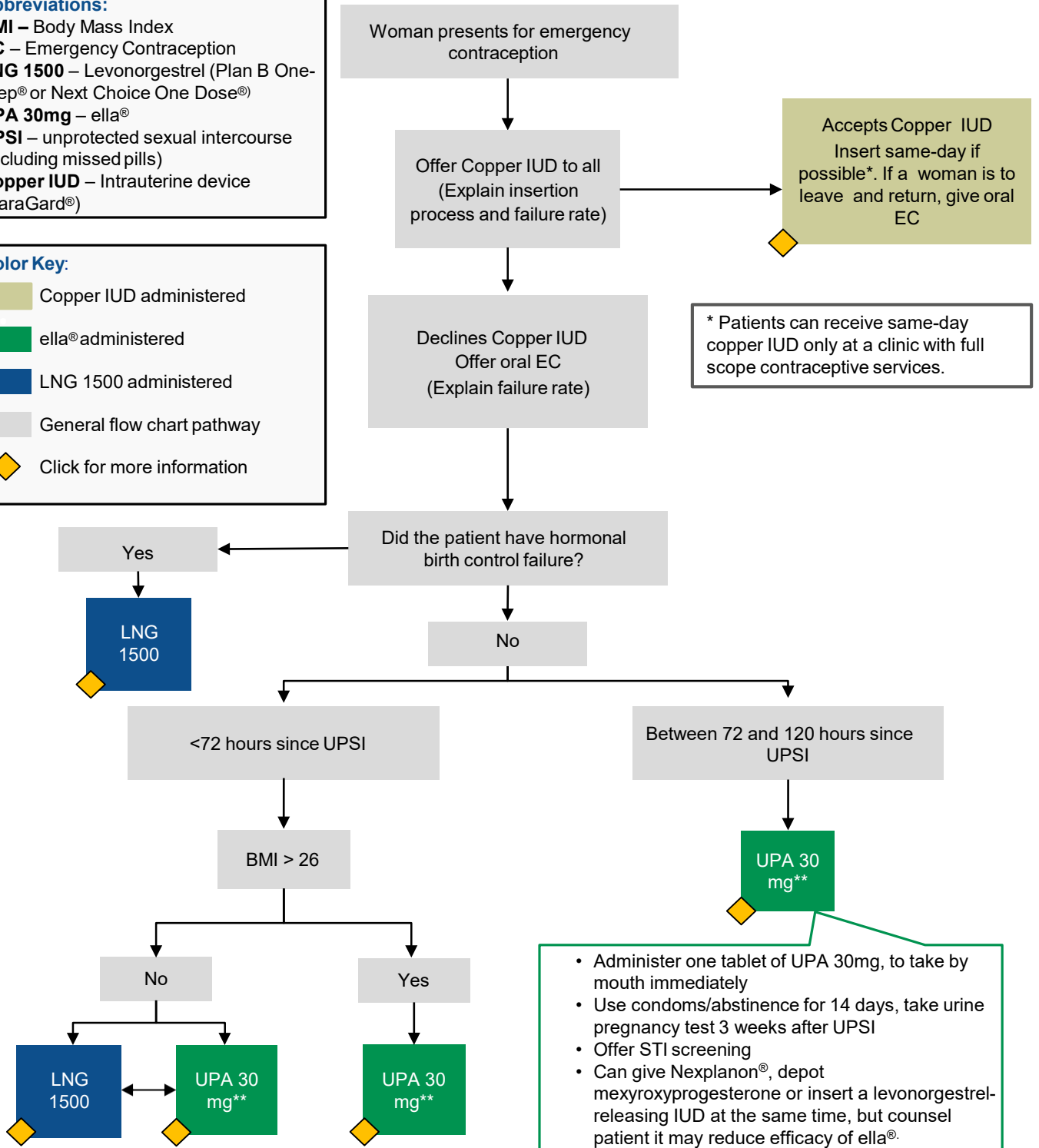
# Flow Chart to Aid Emergency Contraception (EC) Decision-Making Process

### Abbreviations:

**BMI** – Body Mass Index  
**EC** – Emergency Contraception  
**LNG 1500** – Levonorgestrel (Plan B One-Step® or Next Choice One Dose®)  
**UPA 30mg** – ella®  
**UPSI** – unprotected sexual intercourse (including missed pills)  
**Copper IUD** – Intrauterine device (ParaGard®)

### Color Key:

Copper IUD administered  
 ella® administered  
 LNG 1500 administered  
 General flow chart pathway  
◆ Click for more information



\* Patients can receive same-day copper IUD only at a clinic with full scope contraceptive services.

- Administer one tablet of UPA 30mg, to take by mouth immediately
- Use condoms/abstinence for 14 days, take urine pregnancy test 3 weeks after UPSI
- Offer STI screening
- Can give Nexplanon®, depot mexyroxprogesterone or insert a levonorgestrel-releasing IUD at the same time, but counsel patient it may reduce efficacy of ella®.

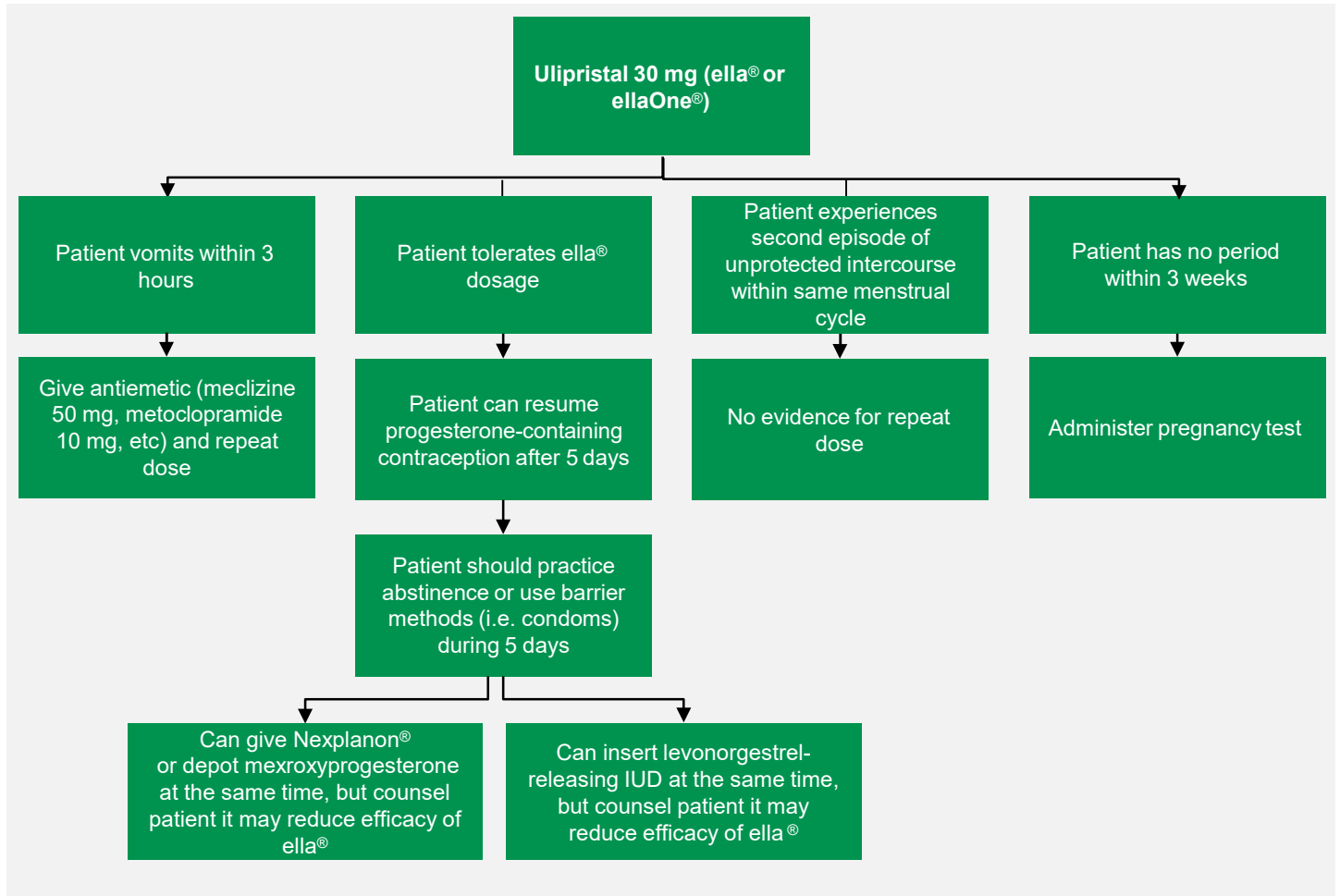
\*\*If ella® is unavailable, administer oral Levonorgestrel



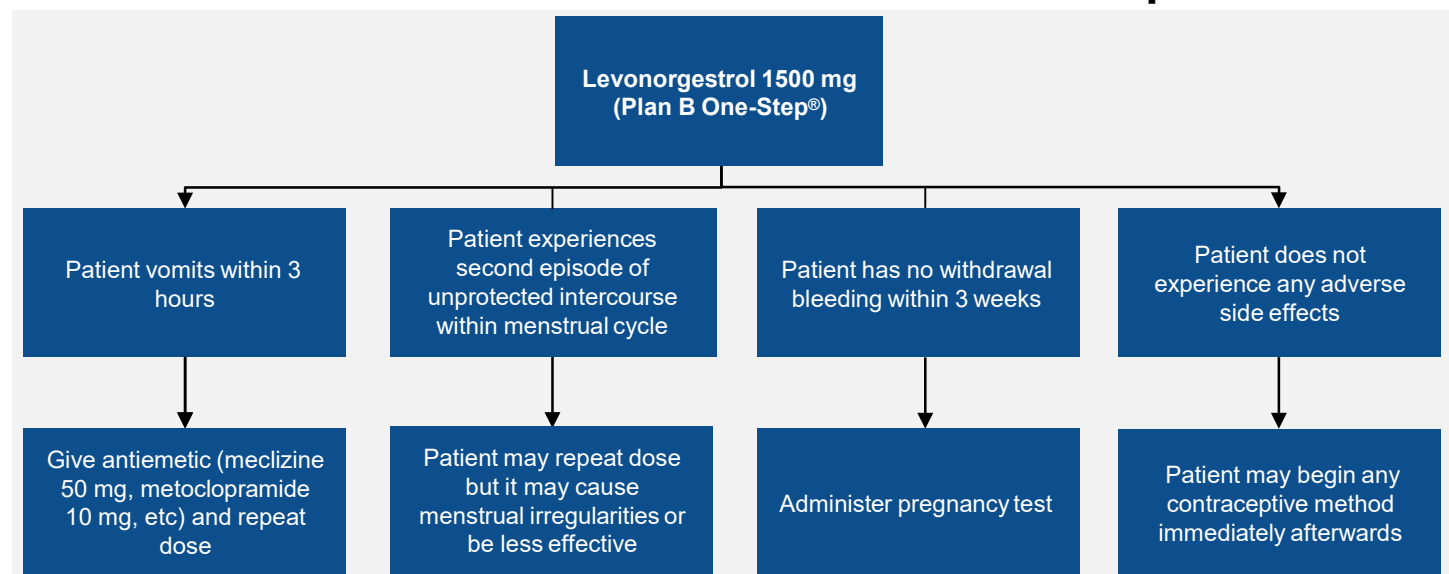
# Flow Chart to Aid Emergency Contraception (EC) Decision-Making Process Addendum



## Potential Outcomes for ella®



## Potential Outcomes for Plan B One-Step®

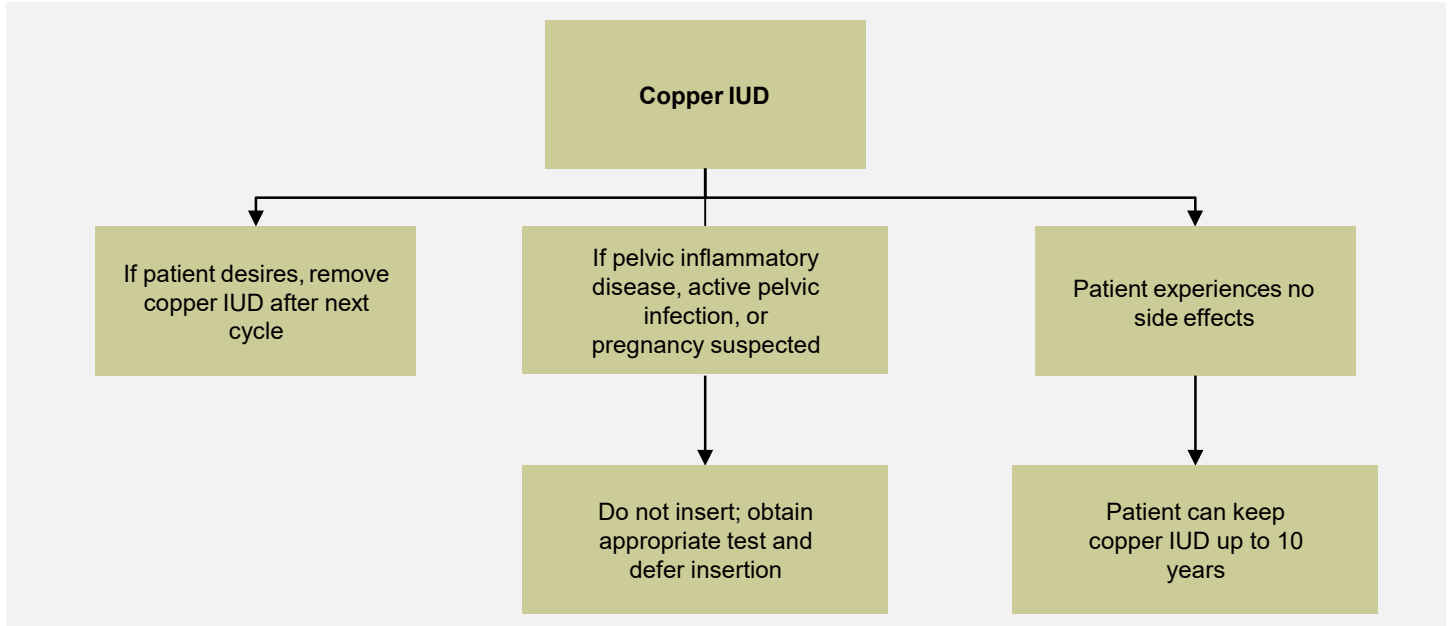




# Flow Chart to Aid Emergency Contraception (EC) Decision-Making Process Addendum



## Potential Outcomes for Copper Intrauterine Devices (IUDs)



**If the patient would prefer to take their Oral Contraceptive Pills (OCP) as EC, the following doses are recommended:**

Names of OCPs and Recommended Doses for EC Effect			
4 Pills for First and Second Dose <sup>1</sup>		5 Pills for First and Second Dose	6 Pills for First and Second Dose
Altavera	Levora	Afirmelle	Amethyst
Amethia	Low-Ogestrel	Amethia Lo	
Ayuna	Marlissa Myzilra	Aubra	
Camrese	Nordette Portia	Aviane	
Chateal	Quasense	CamreseLo	
Cryselle	Seasonale	Falmina	
Elinest	Seasonique	Lessina	
Enpresse	Setlakin Triphasil	LoSeasonique	
Introvale	Trivora	Lutera	
Jolessa		Orsythia	
Kurvelo		Sronyx	
Levonest		Vienna	

**Footnotes:**

1) Second dose of OCP should be taken 24 hours after the first dose



# Flow Chart to Aid Emergency Contraception (EC) Decision-Making Process

1	<b>When was your last known menstrual period? (Please do urine HCG if greater than one month ago)</b>		
	Answer:		
2	<b>When did you have unprotected intercourse?</b>		
	Answer:		
3	<b>Have you used emergency contraception prior to this request?</b>		
	No	Yes, Plan B® (insert date in comments)	Yes, ella® (specify in the comments)
4	<b>Would you like to be screened for sexually transmitted infections today?</b>		
	No	Yes	
5	<b>Are you currently using any form of contraception?</b>		
	No	Yes, oral contraception	Yes, condoms
6	<b>If you are on oral contraception pills, when did you take your last pill?</b>		
	Answer:		
7	If you are not on any form of contraception, would you like to schedule an appointment for contraception today, or attend the walk-in contraception clinic on Mondays from 1200-1530? (please specify in comments if appointment is booked.)		
	Yes	No	
8	<b>Do you have any allergies? (if yes, please specify in comments)</b>		
	Yes	No	
9	<b>Are you on any medications? (if yes, please specify in comments)</b>		
	Yes	No	
10	Treatment options: *Offer placement of copper IUD if provider and appointment available. *Please use ella® as first line oral contraception unless oral birth control failure is reason for emergency contraception. ella® can be taken up to 5 days after unprotected intercourse.		
	Copper IUD if provider and appointment available	ella® 30mg tablet	Plan B® (use if patient is on oral contraception and unprotected intercourse occurred less than 72 hours prior)
11	<b>Method specific education</b>		
	Copper IUD (ParaGard): Offers immediate contraceptive effect. Failure rate less than 1%. Offers continued birth control for up to 10 years. Your next period should be on time, if not, please take a pregnancy test. Screening for sexually transmitted infections available.	ella®: Can give Nexplanon®, depot mexyroxprogesterone or insert a levonorgestrel-releasing IUD at the same time, but counsel patient as it may reduce efficacy of ella®  Please use condoms or abstain from any intercourse for 14 days after starting a new birth control. You should take a pregnancy test 3 weeks from the incident of unprotected intercourse. Screening for sexually transmitted infections is available.	Levonorgestrel (Plan B One-Step®): You may start a new birth control immediately. Your next period should occur on time, if not, please take a pregnancy test. You may also take a pregnancy test 3 weeks after the incident of unprotected sex. Screening for sexually transmitted infections is available. Plan B® may be also purchased over the counter.
12	<b>Patient education:</b>		
	Take the pill as soon as you pick it up.	If you have unprotected sex again after you take the pill, you can still become pregnant. Use a condom or another type of birth control if you have sex again after you take the emergency contraception.	If you throw up less than 3 hours after you take the pill, you will need to take it again. Please contact the clinic, so that a nausea medication can be ordered for you.
	Emergency Contraception will not terminate an existing pregnancy, and it is still possible to become pregnant with emergency contraception. You should get your period within a week of when you expect it. If you do not get your period within 3-4 weeks of using emergency contraception, take a pregnancy test.	Contact the clinic if you have heavy bleeding or pain in your belly.	



# EC Methods Quick Reference Guide



## Copper IUD (ParaGard®)

- Offers an immediate contraceptive effect.
- Failure rate of approximately of 1 in 2000 or 0.0005%.
- The patient's next period should be on-time. If not, conduct a pregnancy test.
- Offer sexually transmitted infection screening if patient reports exposure or if active infection is suspected.

## Levonorgestrel (Plan B One-Step® or Next Choice®)

- Conducive to immediately starting another form of contraception.
- Failure rate for oral EC of 1 in 50 or 2%.
- Patients should take pregnancy test 3 weeks from incident of unprotected sex.
- The patient's next period should be on-time. if not, conduct a pregnancy test.
- Offer STI screening to all patients. Consider treatment with antibiotics if patient's STI status is unknown.
- Core formulary located at each MTF.

## ella®

- Patients can receive Nexplanon®, depot mexyroxyprogesterone or a levonorgestrel-releasing IUD at the same time, but counsel patient as it may reduce efficacy of ella®
- Patients must use condoms or abstain for 14 days while starting new contraception.
- Failure rate for oral EC of 1 in 50 or 2%.
- Patients should take pregnancy test 3 weeks from incident of unprotected sex.
- Offer STI screening to all patients. Consider treatment with antibiotics if patient's STI status is unknown.

## Additional Resources for Patients

For additional information on contraceptive options, visit:

[www.bedsider.org](http://www.bedsider.org)

## Additional Resources for Providers

[www.bedsider.org](http://www.bedsider.org) [www.reproductiveaccess.org](http://www.reproductiveaccess.org)

[www.cdc.gov](http://www.cdc.gov)

## MTF-Specific Resources

Full scope contraceptive services are available on a walk in basis in the Women's Health Clinic Mondays 1200-1530, or by appointment with PCM.

Live 1-on-1 Help Confidential Worldwide 24/7

DoD  
**Safe Helpline**  
Sexual Assault Support for the DoD Community

Help is just a *Click, Call or Text* away!

Click [www.SafeHelpline.org](http://www.SafeHelpline.org) Call 877-995-5247  
Text\* 55-247 (INSIDE THE U.S.) 202-470-5546 (OUTSIDE THE U.S.)  
\*Text your location for the nearest SARC

Click for more information