POLICY AND PROCEDURE

NUMBER:	REVIEWED AND REVISED:	EFFECTIVE DATE:	SUPERSEDES NO./DATE:
7231-027	11/29/2018	08/10/2015	08/10/2015
DISTRIBUTION: ER, Nursing Administration, Administration			
SUBJECT: **EMERGENCY CONTRACEPTION & PATIENT EDUCATION**	APPROVED BY: Vicki Pollmann RN/DNS DEPARTMENT DIRECTOR Rosalinda Kibby ADMINISTRATION		

POLICY:

The purpose of emergency contraception (Plan B) is to prevent pregnancy following a sexual assault. By Washington State Law, every hospital providing emergency care for sexual assault patients must:

1. Provide information about emergency contraception
2. Inform each patient of her option to be provided with this medication, and
3. If not medically contraindicated provide emergency contraception immediately
4. Standing order for plan B per ER Medical Director if ER Provider has reservations/personal conflict with prescribing Plan B to patients.

PROCEDURE:

1. Obtain a urine pregnancy test on all females 10 to 55 years of age, except if hysterectomy or tubal ligation. Proceed only if test is negative.

   Offer emergency contraception when:
   a. Assault occurred within 5 days prior to presentation, and
   b. Patient is at risk for pregnancy, and
   c. Patient is not using a highly reliable method of contraception
   d. Patient feels any pregnancy conceived in the last five days would be undesirable to continue, and
   e. Pregnancy test is negative

2. Provide both verbal and written education regarding Plan B to the patient. (see attachment)
3. Obtain informed consent. Have the patient or patient's legal guardian sign consent.
4. Inform the patient that her menstrual period should begin within the next 2-3 weeks. She should see her Primary Care Physician and/or Family Planning for a pregnancy test and exam, if no menstruation within 3 weeks after treatment.
5. Give both Plan B pills in the Emergency Department (ED). Mild nausea may occur, but is uncommon.

English

ECPs are for Emergency Use

For most women, ECPs are not the best choice for regular birth control. They are not as effective as almost all regular birth control methods and can be more costly.

If you are having sex, use a regular birth control method (the pill, condoms, the shot, etc.).

ECPs do not protect you from sexually transmitted infections and AIDS. Condoms are the most effective protection against sexually transmitted infections and AIDS.

Are They Safe?

The U.S. Food and Drug Administration has stated that ECPs are safe. They can greatly reduce the chance of pregnancy after unprotected sex.

Are There Side Effects?

ECPs make some women feel sick to their stomach or vomit. Some women may have sore breasts or headaches. These side effects last about one day. Progestin-only ECPs have few side effects. ECPs can also cause some women's periods to come a little early or late.

How Can I Get ECPs?

You can get an ECP prescription from your doctor or health clinic. In some places women can go directly to pharmacies for ECPs. Check this website for information about dedicated ECP products and regular birth control pills available in countries around the world that can be used for EC:

http://www.not-2-late.com

(English, Spanish, French, Arabic)

1-888-668-2528

(1-888-NOT-2-LATE)

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A catalyst for global health

PATH is an international, nonprofit organization that works to improve global health. Collaborating with private- and public-sector partners, PATH develops appropriate technologies and creates sustainable, culturally relevant solutions to public health problems. For more information, visit www.path.org.

Emergency Contraception

It's Not Too Late To Prevent Pregnancy

Scared You're Pregnant?

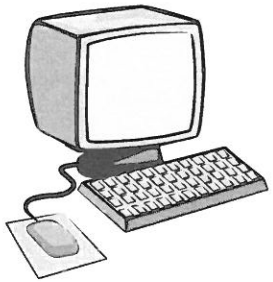
Consider using emergency contraception if you had sex in the last 5 days and:

- You didn't use birth control.
- The condom broke.
- You were late for your birth control shot.
- You missed two or more birth control pills in a row or started your pack late.
- You were forced to have sex.

Emergency contraception is a way to prevent pregnancy after sex. There are two main methods of emergency contraception:

1. Emergency contraceptive pills (also known as ECPs or morning after pills) used within 5 days after sex, or
2. IUD (intrauterine device) inserted within 7 days after sex.

Ask your medical provider for details.



http://www.not-2-late.com

(English, Spanish, French, Arabic)

What are Emergency Contraceptive Pills (ECPs)?

ECPs are birth control pills. They are taken in special doses within 5 days after sex to prevent pregnancy. There are two types of ECPs:

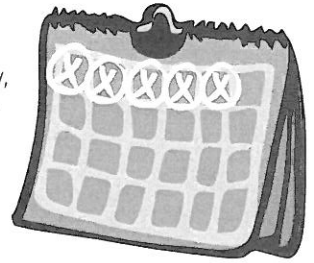
- Progestin-only pills reduce the chance of getting pregnant by 89 percent.
- Estrogen/progestin pills reduce the chance of getting pregnant by 75 percent.

Taken in special doses, some regular birth control pills can be used as EC. This website lists pill brands and dosages for each country: http://www.not-2-late.com

How do I take ECPs?

- You can take progestin-only pills either in a single dose or in two doses: the first dose within 120 hours of unprotected sex and the second dose 12 hours later.
- You must take estrogen/progestin pills in two doses: the first within 120 hours and the second 12 hours later.
- Take the dose that works best for you.

Don't Wait!



To help prevent pregnancy, you must take emergency contraceptive pills within 5 days (120 hours) after sex. ECPs are more effective the sooner after intercourse they are taken.

How Do ECPs Work?

Studies show that in most cases, ECPs help prevent pregnancy by temporarily stopping or delaying eggs from being released (ovulation), which prevents fertilization.

ECPs will not work if you are already pregnant. ECPs are not abortion pills.

For information in the United States, call the emergency contraception Hotline. Free, confidential, 24 hours a day.

1-888-668-2528

(1-888-NOT-2-LATE)

Las PAE son sólo para ser usadas en caso de emergencia

Para la mayoría de las mujeres, las PAE no son la mejor opción para planificar el embarazo. No son tan eficaces como la mayoría de los métodos anticonceptivos de uso regular y pueden ser incluso más costosas.

Si Ud. tiene relaciones sexuales, utilice un método anticonceptivo de uso regular (como la píldora, el condón, la inyección anticonceptiva, etc.)

Las PAE no protegen de las infecciones de transmisión sexual ni del SIDA. El condón constituye el método más eficaz para la prevención de las ITS y el SIDA.

¿Son seguras?

La Administración de Drogas y Alimentos de los EE.UU. ha declarado que las PAE son seguras. Son capaces de reducir considerablemente la probabilidad de quedar embarazada después de haber tenido relaciones sexuales sin protección.

¿Existen efectos secundarios?

En algunas mujeres las PAE pueden producir náuseas o vómitos. Algunas mujeres pueden experimentar sensibilidad en las mamas o dolor de cabeza. Estos efectos secundarios duran aproximadamente un día. Las PAE de solo progestina, tienen menos efectos secundarios que las PAE combinadas de estrógeno y progestina. Las PAE también pueden hacer que la menstruación se adelante o retrase un poco.

¿Cómo puedo conseguir PAE?

Ud. puede obtener de su médico o clínica una receta médica para la PAE. En algunos lugares las mujeres pueden ir directamente a la farmacia y comprar las PAE. En este sitio web encontrará información sobre los productos dedicados de PAE, y sobre las píldoras anticonceptivas de uso regular disponibles en los diferentes países y que pueden ser usadas como anticoncepción de emergencia.

http://www.not-2-late.com

(Inglés, español, francés, árabe)

1-888-668-2528

(1-888-NOT-2-LATE)

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PATH es una organización internacional sin fines de lucro que trabaja para mejorar la salud a nivel mundial. A través de la colaboración y alianzas con socios de los sectores privados y públicos, PATH desarrolla tecnologías apropiadas y crea soluciones sustentables y culturalmente adecuadas para los problemas de la salud pública. Si desea obtener más información, visite el sitio web www.path.org

Anticoncepción de Emergencia

No es demasiado tarde para prevenir un embarazo

¿Teme estar embarazada?

Considere usar anticoncepción de emergencia si Ud. ha tenido relaciones sexuales en los últimos 5 días y:

- No usó un método anticonceptivo.
- El condón se rompió.
- No se puso a tiempo la inyeción anticonceptiva.
- Olvidó tomar dos o más píldoras anticonceptivas seguidas, o comenzó a tomarlas tarde.
- Ud. fue forzada a tener relaciones sexuales.

La anticoncepción de emergencia es un método para prevenir el embarazo después de haber tenido relaciones sexuales.

Existen dos métodos de anticoncepción de emergencia:

1. Píldoras anticonceptivas de emergencia (conocidas también como PAE o píldora para la mañana siguiente que deben ser usadas dentro de los 5 días posteriores a la relación sexual, o
2. DIU (dispositivo intrauterino) que debe ser insertado dentro de los 7 días posteriores a la relación sexual.

Si desea más información, consulte a su proveedor de salud.

http://www.not-2-late.com

(Inglés, español, francés, árabe)

¿Qué son las Píldoras Anticonceptivas de Emergencia (PAE)?

Las PAE son píldoras para planificar el embarazo. Se toman en dosis especiales dentro de los 5 días posteriores a la relación sexual para prevenir el embarazo. Existen dos tipos de PAE:

- Las PAE de progestina sola reducen en un 89% la probabilidad de quedar embarazada.
- Las píldoras combinadas de estrógeno y progestina reducen en un 75% la probabilidad de quedar embarazada.

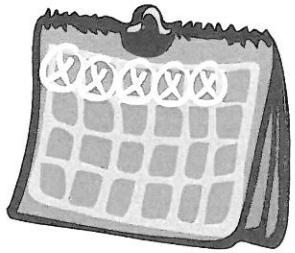
Algunas píldoras anticonceptivas regulares pueden ser usadas como anticoncepción de emergencia si son tomadas en dosis especiales.

En este sitio web Ud. encontrará una lista en que aparecen el nombre comercial de las píldoras y las dosis disponibles en los diferentes países: http://www.not-2-late.com

¿Cómo debo tomar las PAE?

- Las píldoras de progestina sola pueden tomarse ya sea en una dosis, o bien, en dos dosis. Si las toma en dos dosis, la primera dosis debe ser tomada dentro de las 120 horas (5 días) posteriores a una relación sexual sin protección y la segunda, 12 horas después de la primera dosis.
- Las píldoras de estrógeno y progestina deben tomarse en dos dosis. La primera dosis debe ser tomada dentro de las 120 horas (5 días) posteriores a la relación sexual, y la segunda, 12 horas después de la primera dosis.
- Considere la opción que su médico le recomiende o la que más le convenga.

¡No espere!



Para prevenir un embarazo, Ud. debe tomar las Píldoras Anticonceptivas de Emergencia dentro de los 5 días (120 horas) posteriores a la relación sexual sin protección. La eficacia de las PAE es mejor cuando mas pronto se las tome después de haber tenido la relación sexual sin protección.

¿Cómo funcionan las PAE?

Estudios indican que en la mayoría de los casos las PAE previenen el embarazo inhibiendo o retardando temporalmente la ovulación, lo que impide la fecundación.

Las PAE no funcionarán si Ud. está embarazada. Las PAE no son píldoras abortivas.

Para obtener información en los Estados Unidos, llame a la Línea de Información Telefónica sobre Anticoncepción de Emergencia. Es gratis, confidencial y atiende las 24 horas del día.

1-888-668-2528

(1-888-NOT-2-LATE)

Key facts about Emergency Contraception

Emergency contraception is a way to prevent pregnancy after sex.

Consider providing or prescribing emergency contraception if a woman:
- didn't use a contraceptive during sex, or
- thinks her contraceptive didn't work.

Two options: pills or IUD insertion.

Emergency contraceptive pills (ECPs)
- Levonorgestrel pills (1.5 mg dose; Plan B One-Step®, Next Choice®, Levonorgestrel tablets).
- Ulipristal acetate pills (30 mg dose; ella®).
- Combined estrogen/Levonorgestrel pills (doses and instructions listed at www.not-2-late.com).

IUD (intrauterine device)
- Copper IUD.
- Offers ongoing contraceptive protection for up to 10 years.

Use up to 5 days (120 hours) after unprotected sex.

- Insert IUDs within 5 days of unprotected intercourse or estimated ovulation, whichever is later.
- Levonorgestrel ECPs are more effective the sooner they are used after unprotected sex. Ulipristal acetate effectiveness does not decrease during the 5-day treatment window.
- Packaged ECPs come in a one-pill dose (ella®, Plan B One-Step®) and a two-pill dose (Next Choice®, Levonorgestrel tablets). Two-pill formats can be taken together as a single dose or as labeled (two doses: one pill followed by a second pill 12 hours later) with no impact on effectiveness.

Safe and effective.

- IUDs are the most effective form of EC: they reduce pregnancy risk by more than 99%.
- Ulipristal acetate is the most effective ECP available in the United States: among 100 women taking these pills, approximately 2 will become pregnant.*
- Levonorgestrel pills are less effective than ulipristal acetate in comparative trials and their effectiveness decreases over the 5-day treatment window.*
- Combined estrogen/Levonorgestrel pills are the least effective form of emergency contraception but should be considered when other options are not available.
- For regular, long-term use, most other contraceptive methods are more effective than ECPs.
- Side effects are generally mild.
- ECPs do not protect against sexually transmitted diseases, including HIV/AIDS.

* Pregnancy risk reduction based on one-time use. If ECPs were used as a regular method, effectiveness would be much lower.

Won't cause an abortion.

- ECPs are NOT the same as the abortion pill (mifepristone, Mifeprex®, RU-486).
- Evidence suggests ECPs work by interfering with the process of ovulation and/or inhibiting fertilization.
- There is no evidence that ECPs interfere with implantation of a fertilized egg. ECPs do not cause abortion.

Won't harm a developing fetus.

- ECPs do not appear to be harmful if inadvertently taken during pregnancy.
- Using ECPs will not affect a woman's ability to become pregnant in the future.

Easy access to emergency contraception is key to effective use.

- Levonorgestrel pills are available without a prescription to women and men 17 and older. Customers must know to ask for the pills at the pharmacy counter and should call ahead to ensure they are in stock.
- Ulipristal acetate requires a prescription. Giving an advance prescription can help speed access.
- Pharmacists in some states (www.not-2-late.com) can prescribe ECPs, including to adolescents.

May 2012

PATH

Key Facts About

EMERGENCY CONTRACEPTION

For Victims of Sexual Assault

Emergency Contraception can help prevent pregnancy after sexual assault.

- It is important to start Emergency Contraception promptly.

Some Emergency Contraception options include hormonal pills such as:

- Progestin-only pills (such as Plan B™)
- Estrogen/progestin pills (such as Preven™ or high doses of regular oral contraceptive pills)

**Other options may be available. Talk with your medical provider about the best choice for you.*

Safe and effective.

- Progestin-only pills reduce the risk of pregnancy by 89%.*
- Combined estrogen/progestin pills reduce the risk of pregnancy by 75%.*
- Emergency contraception is not meant to be used as a regular birth control method.

**Pregnancy risk reduction based on one-time use.*

Emergency Contraception Pills are NOT:

- Protection against sexually transmitted diseases, including HIV/AIDS.
- The same as RU-486 (the abortion pill).
- Capable of interrupting an established pregnancy.
- Capable of harming a developing fetus.
- Capable of affecting a woman's ability to become pregnant in the future.

In the case of sexual assault, where can I obtain Emergency Contraception Pills?

- Hospital emergency rooms in Washington State.
- Some pharmacies in Washington State.
- Healthcare providers and Clinics.

For more information, including participating pharmacies in your area,

call 1-888-NOT-2-LATE (1-888-668-2528)
or visit www.not-2-late.com.

Note: Some birth control information at 1-888-NOT-2-LATE and www.not-2-late.com may not be condoned by all individual beliefs.

This fact sheet was adapted courtesy of the Program for Appropriate Technology in Health (PATH) from its publication, "Key Facts About Emergency Contraception."

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