Emergency Contraceptive Protocol
Protocol applies to female patients (16 years of age and older).
This protocol will be electronic only. Documentation of this information will be collected using Shorthand in the Clinical Notes application or MICS LastWord. Viewing of this information will be using the Documents Browser application or MICS LastWord.

To document this protocol in MICS LastWord Flowsheets:
1. Ensure that Shorthand application has been launched.
3. Enter patient’s clinic number in the number field.
4. Enter the patient’s name.
5. Allergies reviewed and updated in MICS LastWord.
6. Open Obstetrical Visit Flowsheets.
7. Add column.
8. If contact is by phone, document “Phone Call” in Other OB row.
9. Enter expected due date.
10. Calculate gestational age.
11. Select gravida and para.
12. Open Summary Note field.

To document this protocol in Clinical Notes:
1. Access the Clinical Notes application.
2. Ensure that Shorthand application has been launched.
3. Enter the patient’s clinic number in the number field.
4. Verify the patient’s name.
5. Allergies reviewed and updated in MICS LastWord.

Phone Number: _______ ______________________
Healthcare provider: ____________________________________________________
Chief complaint:

☐ Patient calling about an episode of intercourse with contraceptive failure or unprotected intercourse:
   Enter date and time of episode.
   • Which of the following potential contraceptive failures apply to your situation?
     ☐ Sexual intercourse without any contraception.
     ☐ Condom failure (breaks or splits).
     ☐ Partial or complete removal of IUD.
     ☐ Missed or late oral contraceptive pill.
     ☐ Vomiting or severe diarrhea after taking contraceptive pill.
     ☐ Missed contraceptive injection (over 13 weeks since last injection).
     ☐ Diaphragm or cap failure (breaks or splits).
     ☐ Additional documentation:

   □ Occurrence of episode was greater than 5 days (120 hours) ago. (Proceed to Plan of Care 2)
   □ Occurrence of episode was less than 5 days (120 hours) ago. (Continue with protocol)

LMP: ___________________________
☐ Regular period, normal bleeding. (Choose Plan of Care 1)
☐ Irregular period, abnormal bleeding. (Complete BOTH below)
   • Order pregnancy test (chorionic gonadotropin for pregnancy/blood).
   • Instruct patient to call back in 4 hours after blood draw for pregnancy test results. (Proceed to Conclusion)

☐ Patient called previously about an episode of intercourse with contraceptive failure or unprotected intercourse.
   A pregnancy test was ordered and she is now calling for results. See previous notes for additional details.
   □ Pregnancy test is positive, patient instructed to call either the OB Appointment Desk at 284-5135 to schedule her first OB appointment or the GYN Appointment Desk at 266-8680 to schedule an appointment for contraceptive failure counseling. (Proceed to Conclusion)
   □ Pregnancy test is negative. (Proceed to Plan of Care 1)

☐ Patient calling as a result of sexual assault. (Choose BOTH below)
   ☐ Patient instructed to go to Saint Marys Emergency Department.
   ☐ Nurse notified Emergency Department Control Desk at 5-5591 (Proceed to Conclusion)
Plan of Care 1

Prescription given for Plan B 0.75 mg (2/PKT), oral 2 pills at same time within 120 hours after unprotected intercourse.

Prescription called/faxed to __________________________ pharmacy.

Patient education: (Select All That Apply)

- Call back if vomiting within 2 hours after taking the pills.
- Emergency contraception (Plan B) will not affect an existing pregnancy.
- Emergency contraception prevents the sperm from fertilizing an egg and keeps a fertilized egg from attaching to the wall of the uterus.
- Emergency contraception should be used as soon as possible after unprotected intercourse or failed contraception to maximize effectiveness.
- Patient instructed this medication is for emergency use only. This medication provides no protection against sexually transmitted diseases.
- Studies show that emergency contraception is the most effective if taken in the first 24 hours after sex, the proportion of pregnancies prevented is approximately 95%, however, is moderately effective up to 120 hours after sex.
- All women after taking emergency contraception should begin using barrier contraceptives to prevent pregnancy; e.g. condoms, diaphragms, spermicides until their next menstrual period. Because emergency contraception might delay ovulation, women who have taken emergency contraception are at risk for becoming pregnant later in their cycle.
- If your next period does not come when expected, it is important to do a home pregnancy test.
- Research has shown that after taking emergency contraceptive pills, most women start their next period within 3 days of their expected start date. However, a few women started earlier and a few were up to 7 days late.
- If your next period is exceptionally light or short or is more than 7 days late, you must contact your healthcare provider as this may indicate treatment failure.
- If bleeding is heavy or painful, you should contact your provider.

Plan of Care 2

Patient instruction: (Select All That Apply)

- Patient instructed to do a home pregnancy test if next menstrual cycle is more than 7 days late, exceptionally light or short.
- If home pregnancy test is positive, patient instructed to call either the OB Appointment Desk at 284-5135 to schedule her first OB appointment or the GYN Appointment Desk at 266-8680 to schedule an appointment for contraceptive failure counseling.
- If home pregnancy test is negative, patient offered an appointment for evaluation of irregular menses and/or contraceptive management; all the GYN Appointment Desk at 266-8680 to schedule.
- If home pregnancy test is negative, patient instructed to repeat a home pregnancy test in one week.
- Patient instructed not to have intercourse without condoms and spermicide until after OB/GYN appointment.

Conclusion: (Select All That Apply)

- Patient instructed to call back if there are further questions or concerns.
- Patient instructed that an appointment must be made with her healthcare provider to discuss contraceptive management if she has requested Plan B more than 3 times in a year.
- Patient verbalizes understanding of instructions and agrees with plan of care.
- Patient refuses recommendations: __________________________

Generate prescription in Orders97 (include name of medication, route, dosage and frequency).

Enter Name:
At the end of this protocol the user will be required to enter their name.
Entry of the user name at this point constitutes the creation of an electronic signature.

To view this information:
This information is viewable using Documents Browser application or MICS Lastword.

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