

Emergency Contraceptive Pill

NAME: SCRIPT NO.

ADDRESS:

WEIGHT: HEIGHT: BMI:

DISCLAIMER: This document should be used in conjunction with the Practice Guidelines for Pharmacist supply of the Emergency Contraceptive Pill (ECP).

| QUESTIONS | RESPONSE | COMMENTS |
|--|----------|----------|
| Is the ECP for your own use? If not, who is it for? | | |
| Have you had unprotected sex or possible contraceptive failure? | | |
| How long ago did this happen? | | |
| When did you have your last period? Was it lighter, shorter or different than usual? | | |
| Have you had unprotected sex at any other time since your last period? | | |
| Have you used the ECP already since your last period? | | |
| Are you taking any other medicines or herbal products - prescribed or that you have purchased? <i>Refer to Guidelines if patient is taking any of the below medicines.</i> Enzyme inducers - barbiturates, primidone, phenytoin, carbamazepine, topiramate, rifampicin, rifabutin, ritonavir, nevirapine, nelfinavir, tacrolimus, griseofulvin, St John's wort. Ciclosporin - toxicity increase | | |
| Do you have, or have you ever had, any medical conditions? e.g. Bowel disease, severe liver disease, high blood pressure, diabetes, heart disease/stroke, breast cancer | | |
| Have you ever had an allergic reaction to, or vomited after taking, the ECP? | | |
| Are you breastfeeding? | | |

PHARMACIST RECORD

- ECP supplied (1.5mg)
 ECP supplied (3mg)
 Patient referred to GP or FPC
 ECP not appropriate
 Informed consent given to supply ECP YES NO

Pharmacist Date



ADVICE CHECKLIST

THE ECP DOES NOT PREVENT PREGNANCY IN EVERY SITUATION

- It is 95% effective if used within 24 hours of unprotected sex.
 - It is 85% effective if used within 25 – 48 hours of unprotected sex.
 - It is 58% effective if used within 49 – 72 hours of unprotected sex.
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TIMING

- The ECP is most effective when it is taken as soon as possible and no later than 72 hours after unprotected sex.
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- The ECP is unlikely be effective in women who weigh more than 70kg or have a BMI greater than 26. If you weigh more than 70kg or have a BMI greater than 26 a copper IUD would provide more effective emergency contraception. Please see your doctor or family planning clinic.

POSSIBLE SIDE EFFECTS

- Nausea, tiredness, headache, dizziness, breast tenderness, vomiting. These should resolve within a few days.
 - If vomiting occurs within three hours of taking the ECP, another dose should be taken immediately. You will need to obtain another supply of the ECP.
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THE ECP IS FOR EMERGENCY USE ONLY

- It is not a substitute for regular contraception.
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USE OF CONTRACEPTION AFTER TAKING THE ECP

- Barrier method recommended until your next period starts and regular method of contraception begins.
 - If using the contraceptive pill, keep taking the hormonal pills as normal and use additional barrier protection for seven days.
 - If there are less than seven hormonal pills left in the packet, you should continue with the next pack omitting the seven day break or placebo (sugar) tablets.
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POSSIBLE CHANGE TO TIMING OF NEXT PERIOD

- It may be a few days earlier or later than usual.
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SEE YOUR DOCTOR OR FAMILY PLANNING CLINIC

- if your next period is unusually light or heavy, more than 5 days late or, for those taking oral contraceptives, there is no bleeding in the pill-free interval.
 - if you have any lower abdominal pain.
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THE ECP DOES NOT PROTECT AGAINST SEXUALLY TRANSMITTED INFECTIONS (STIs)

- If you have any concerns, see your doctor or Family Planning Clinic.
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RECOMMEND FOLLOW-UP APPOINTMENT WITH DOCTOR OR FAMILY PLANNING CLINIC

- about two to three weeks after taking the ECP to check that it has worked, to screen for STIs (if indicated) and to discuss regular methods of contraception.
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BREASTFEEDING

- While the ECP is not considered harmful, to reduce the amount the baby ingests, either express milk immediately before taking the ECP or take it immediately after feeding the baby.
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PATIENT INFORMATION LEAFLET PROVIDED