

MANAGEMENT OF FAILED CONTRACEPTION

If pregnancy is suspected in a client who has been using any contraceptive method, please first confirm this by a urinary pregnancy test at presentation. Perform the pregnancy test according to the manufacturer's instructions.

Please remember that this unplanned pregnancy may or may not be unwanted and the client's emotions may range from happy to deeply upset. It is important to discuss the implications of a positive result with the client and discuss all pregnancy options with her. The following support and follow-up should be instigated in all cases. Please offer to call a partner, relative or friend for the client if she wishes further support.

In cases where the pregnancy has occurred whilst the client continues to use a contraceptive method e.g. implant or intrauterine device, please see the appropriate protocol for further management advice:

Please arrange an urgent ultrasound to determine gestation if this cannot be determined clinically. If at all possible, this should be arranged for the same day as the result may affect the client's ongoing decisions. If it is apparent from the scan that the client has conceived after an implant has been inserted, please retain the implant if it is removed and contact the manufacturer for further advice. Complete a DATIX/incident reporting form.

If client decides to continue with the pregnancy:

Give literature and information on health in pregnancy. Discuss the effect of the contraception on the on-going pregnancy. Inadvertent exposure to hormonal contraception has not been shown to be associated with specific fetal abnormalities. Similarly pregnancies conceived with an intrauterine device in situ do not appear to be associated with congenital abnormalities but may be associated with an increased risk of miscarriage. Discuss and offer information on folic acid, vitamin D, smoking, alcohol consumption, drugs, toxoplasmosis, listeria and HIV. Provide written confirmation of the test for the client to take to her GP. If the pregnancy is over 12 week's gestation, please refer directly to the appropriate antenatal service/GP.

If client opts for termination of the pregnancy:

Give information on options. Give client leaflets on Termination of Pregnancy and refer onward if appropriate.

Some clients may wish to see their GP to discuss the options further.

For clients who are uncertain:

More extensive counselling and support can be offered at TOP services.

Further counselling and support is also available through the voluntary sector (ask a senior colleague).

In all cases where the client has given permission, please notify the GP of the consultation, either by telephone or urgent letter.

References:

With sincere thanks to the West of Scotland Sexual Health Managed Clinical Network for sharing their guidelines and protocols

<http://www.centalsexualhealth.org/west-of-scotland-managed-clinical-network>