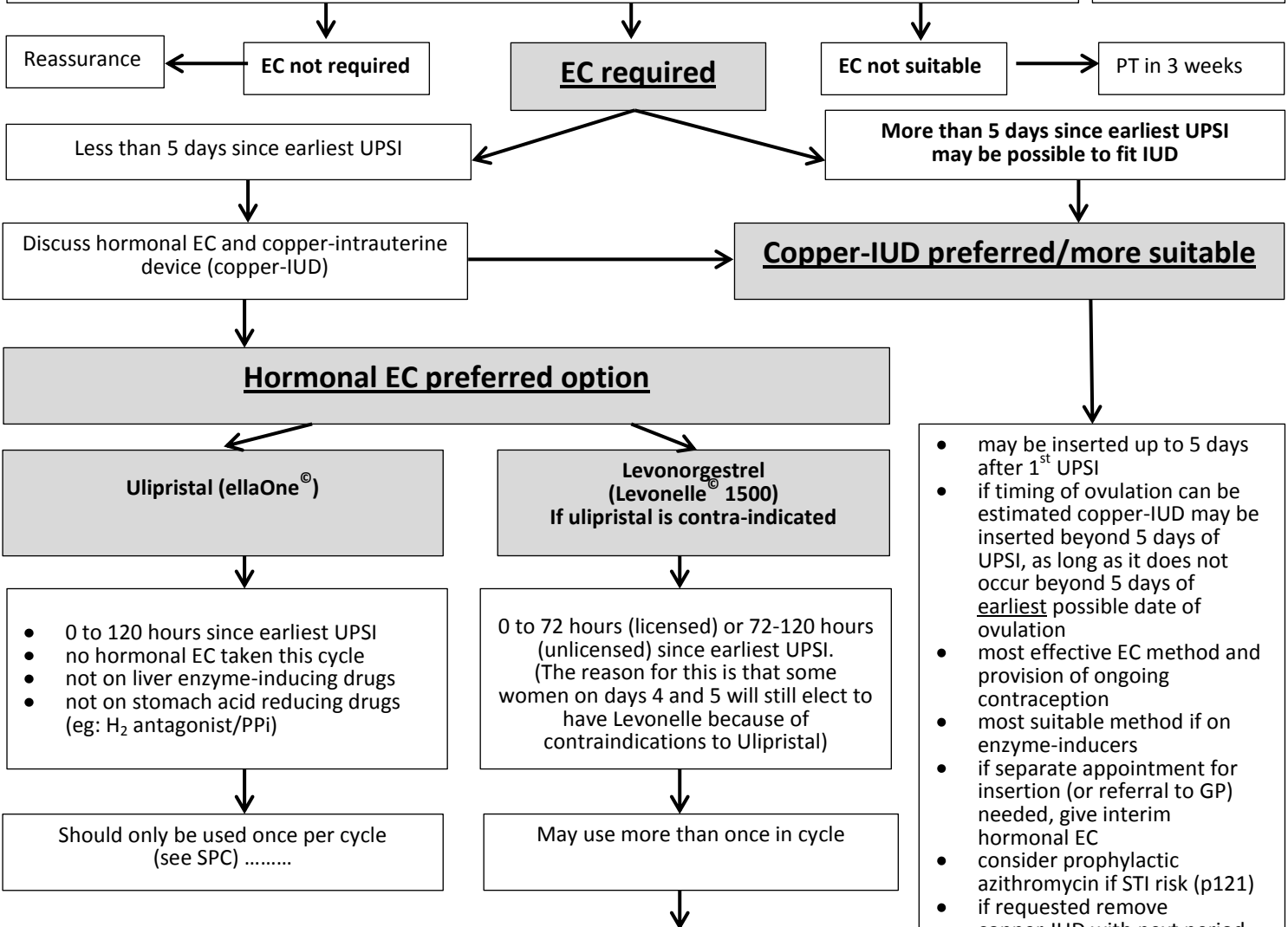


Client requesting emergency contraception (EC)

- take full contraceptive, sexual and menstrual history, including sexually transmitted infection (STI) risk assessment
- exclude existing pregnancy and medical contra-indications to various EC methods
- check current/recent use of enzyme-inducing drugs
- check whether client has used hormonal emergency contraception (HEC) in this cycle already
- establish:
  - number of episodes of unprotected sexual intercourse (UPSI) in this cycle
  - timing of earliest and most recent UPSI in relation to last menstrual period (LMP)
  - timing of intercourse in relation to incorrect contraception use, including in pill/patch/ring free week
  - earliest possible date of ovulation (=14 days before period, based on shortest possible cycle)
  - timing of earliest and most recent UPSI in relation to earliest possible date of ovulation

**PT = Pregnancy test**  
**SPC = Summary of Product Characteristics**  
**STI = sexually transmitted infection**  
**PPI = proton pump inhibitor**



- \* **If EC given because of UPSI:**
  - advise condom use for remainder of cycle
  - discuss ongoing contraception and provide method for future use
  - **after levonorgestrel use:** consider 'quick-starting'\* ongoing hormonal contraception (=starting method at time of giving levonorgestrel). PT in 3 weeks advisable
  - **after ulipristal use:** start ongoing hormonal contraception at next period
- \* **If EC given because hormonal contraception failure:**
  - continue with pill/patch/vaginal ring. Additional condom use for 1 week after levonorgestrel, or for 2 weeks after ulipristal. PT in 3 weeks advisable
- \* **If current enzyme inducing drug use:**
  - give double dose of levonorgestrel\*. Don't use ulipristal (SPC advice). Consider copper-IUD
- \* **If breast feeding:**
  - can use levonorgestrel. Avoid breastfeeding for 7 days after ulipristal use
- \* **Avoid concomitant use of levonorgestrel and ulipristal**

\* unlicensed dose

**All EC methods**

- full counselling, including side-effects, action to be taken if vomiting within 2 to 3 hours (hormonal EC only), etc.
- provide written information
- accurate documentation
- consider STI testing
- follow-up as appropriate