

Sample Screening Protocol for Emergency Contraception Pills

Patient Name: _____

Address: _____

Date of Birth: _____

Screening Questions

1. Have you had unprotected intercourse within the last 3 days (72 hours)? YES NO

 If yes, list date(s) and approximate time(s):

 date: _____ time: _____ a.m./p.m.

 date: _____ time: _____ a.m./p.m.

2. Was it consenting intercourse? YES NO

3. Are you over 18 years of age? YES NO

4. When was the first day of your last menstrual period?

 date: _____

 Is this less than 4 weeks ago? YES NO

5. Was your last period normal in length and timing? YES NO

6. Was the flow of your last period normal? YES NO

7. Will this be your first time using emergency contraception? YES NO

 If no, please give each date that you have used emergency contraception in the past 6 months.

 Date: _____

 Date: _____

 Date: _____

 Date: _____

If the response is YES to all the above questions, you may prescribe ECP.

If the response to ANY of the above questions is NO, or you suspect that the sexual history may be inaccurate, the patient may still be eligible for ECPs but will require a prescription from an authorized prescriber. (e.g. physician, Nurse Practitioner, etc.). Refer to appropriate practitioner.

Referral Questions

1. If you have had sex with a new partner in the past month or if your partner may have had sex with someone besides you in the past month or if your partner has a sexually transmitted disease you may be at risk for a sexually transmitted disease (STD). Would you like a referral for STD diagnosis and treatment?

 YES NO

2. Emergency contraception is not as effective as any other method of contraception for long-term use. Are you interested in learning about ongoing contraception?

 YES NO

If the response to either of these questions is YES, provide the patient with an appropriate referral for STD screening and/or ongoing contraception.

If your site does not refer to local providers of these services, or if the patient is not in your area, she can call the nearest Planned Parenthood.

If the response to either question is NO, the patient should be informed that she can call back for a referral if she changes her mind.