

Children's Mercy Kansas City

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Care Process Models

Quality Improvement and Clinical Safety

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9-2018

### Emergency Contraception Recommendations

Children's Mercy Kansas City

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These guidelines do not establish a standard of care to be followed in every case. It is recognized that each case is different and those individuals involved in providing health care are expected to use their judgment in determining what is in the best interests of the patient based on the circumstances existing at the time. It is impossible to anticipate all possible situations that may exist and to prepare guidelines for each. Accordingly, these guidelines should guide care with the understanding that departures from them may be required at times.

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Revised: 9/17/18

Emergency Contraception (EC)  
recommendations for ED patients

Has it been  
> 120 hours since  
last unprotected  
sex<sup>a</sup>, or sexual  
assault?

Yes

There is decreased efficacy of any emergency  
contraception method after the 120 hour treatment  
window has expired; therefore,  
no emergency contraception should be given

No

Is this  
patient using Depo<sup>b</sup> or  
LARC<sup>c</sup>?

Yes

No emergency  
contraception  
should be given

No

Is the patient  
using a hormonal  
contraceptive method  
(OCP or patch)?

Yes

Levonorgestrel<sup>e</sup> 1.5 mg PO x 1

No

Ulipristal 30 mg PO x1<sup>d</sup>

**Why Ulipristal versus Levonorgestrel for EC?**

Pregnancy risk with ulipristal is 42% lower than levonorgestrel at 72 hours, 65% lower in first 24 hours. Ulipristal is significantly more effective if BMI >25 or weight >75 kg. Additionally, the efficacy of Ulipristal does not decrease over the 120 hour EC treatment window.

Superscripts explained:

<sup>a</sup>Some examples of unprotected sex are: lack of any contraception (condom or hormonal method) or inconsistent/questionable use of hormonal method.

<sup>b</sup>If past due date for next Depo shot, answer is "No."

<sup>c</sup>LARC = long-acting reversible contraception (such as IUD, implant)

<sup>d</sup>Concomitant use of systemic glucocorticoids is not a contraindication for one-time dose of ulipristal, although caution may be taken.

<sup>e</sup>Some evidence to suggest that hormonal contraceptive (such as OCP, patch, ring) method may decrease effectiveness of ulipristal, thus the recommendation to administer Levonorgestrel.