### Hormonal Contraceptive Self-Screening Questionnaire (form updated April 2023)

Do you have health insurance? Yes / No

Name	Health Care Provider's Name	Date
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Date of Birth\_\_\_\_\_ Age\*\_\_\_\_ Weight\_\_\_\_\_

What was the date of your last women's health clinical visit?

Any Allergies to Medications? Yes / No If yes, list them here: \_\_\_\_\_\_

#### Do you have a preferred method of birth control that you would like to use?

## □ A pill you take each day □ A patch that you change weekly □ Other (ring, injectable, implant, or IUD) *Background Information:*

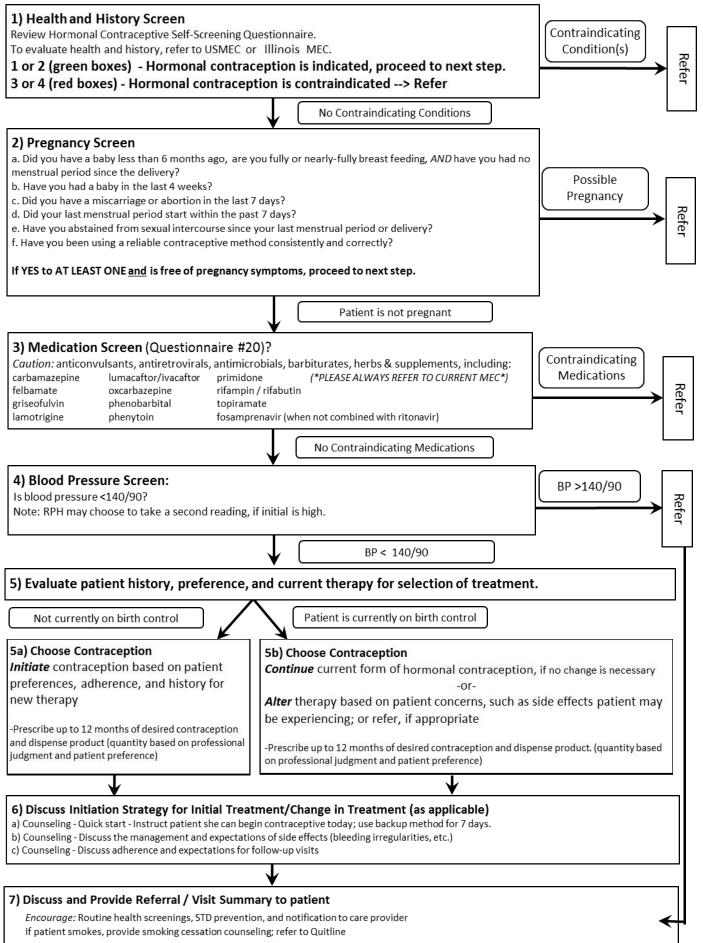
1	Do you think you might be pregnant now?	Yes 🗆	No□
2	What was the first day of your last menstrual period?	/_	_/
3	Have you ever taken birth control pills, or used a birth control patch, ring, or injection?	Yes 🗆	No 🗆
	Have you previously had contraceptives prescribed to you by a pharmacist?	Yes 🗆	No 🗆
	Did you ever experience a bad reaction to using hormonal birth control?	Yes 🗆	No 🗆
	- If yes, what kind of reaction occurred?		
	Are you currently using any method of birth control including pills, or a birth control patch, ring or shot/injection?	Yes 🗆	No 🗆
	- If yes, which one do you use?		
4	Have you ever been told by a medical professional not to take hormones?	Yes 🗆	No 🗆
5	Do you smoke cigarettes?	Yes 🗆	No 🗆

**Medical History:** 

	•		
6	Have you given birth within 21 days? If yes, how long ago?	Yes 🗆	No 🗆
7	Are you currently breastfeeding?	Yes 🗆	No 🗆
8	Do you have diabetes?	Yes 🗆	No 🗆
9	Do you get migraine headaches? If so, have you ever had the kind of headaches that start with warning signs or symptoms, such as flashes of light, blind spots, or tingling in your hand or face that comes and goes completely away before the headache starts?	Yes 🗆	No 🗆
10	Do you have high blood pressure, hypertension, or high cholesterol? (Please indicate yes, even if it is controlled by medication)	Yes 🗆	No 🗆
11	Have you ever had a heart attack or stroke, or been told you had any heart disease?	Yes 🗆	No 🗆
12	Have you ever had a blood clot?	Yes 🗆	No 🗆
13	Have you ever been told by a medical professional that you are at risk of developing a blood clot?	Yes 🗆	No 🗆
14	Have you had recent major surgery or are you planning to have surgery in the next 4 weeks?	Yes 🗆	No 🗆
15	Have you had bariatric surgery or stomach reduction surgery?	Yes 🗆	No 🗆
16	Do you have or have you ever had breast cancer?	Yes 🗆	No 🗆
17	Do you have or have you ever had hepatitis, liver disease, liver cancer, or gall bladder disease, or do you have jaundice (yellow skin or eyes)?	Yes 🗆	No 🗆
18	Do you have lupus, rheumatoid arthritis, or any blood disorders?	Yes 🗆	No 🗆
19	Do you take medication for seizures, tuberculosis (TB), fungal infections, or human immunodeficiency virus (HIV)?	Yes 🗆	No 🗆
	- If yes, list them here:		
20	Do you have any other medical problems or take any medications, including herbs or supplements?	Yes 🗆	No 🗆
	- If yes, list them here:		
21	Will you be immobile for a long period? (e.g. flying on a long airplane trip, etc.)		

Internal use only	verified DOB* with valid photo ID		BP Readi	ng/	·		
Pharmacist Name	Pharr	macist	Signatur	e			
Drug Prescribed	Rx#		_or-	Patient	Referred-circle	reason(s)	Sig:
	(Pharmacy Phone		Ado	dress		)	
Notes:							

#### STANDARD PROCEDURES ALGORITHM FOR ILLINOIS RPH DISPENSING OF CONTRACEPTIVES



# Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use (U.S. MEC)



Updated in 2024. This summary sheet only contains a subset of the recommendations from the U.S. MEC. For complete guidance, see: <a href="https://www.cdc.gov/contraceptivemethods">https://www.cdc.gov/contraceptivemethods</a> do not protect against STIs. Consistent and correct use of the external (male) latex condom reduces the risk of STIs and HIV. Please see NIH guidelines for up to date recommendations on hormonal contraception and ARVs: <a href="https://clinicalinfo.hiv.gov/en/guidelines/pierpregnancy-courseling-childbearing-age-overview?view=full#table-3">https://clinicalinfo.hiv.gov/en/guidelines/pierpregnancy-courseling-childbearing-age-overview?view=full#table-3</a> and <a href="https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-adult-and-adolescent-arv/drug-interactions-overview?view=full#table-3</a> and <a href="https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-adult-and-adolescent-arv/drug-interactions-overview?view=full#table-3</a> and <a href="https://clinicalinfo.hiv.gov/en/guidelines-hiv.gov/en

#### KEY: 1 = No restriction (method can be used) 2 = Advantages generally outweigh theoretical or proven risks 3 = Theoretical or proven risks usually outweigh the advantages 4 = Unacceptable head

4 = Unacceptable health risk (method not to be used)

Condition	Sub-Condition	Cu-IUD	LNG-IUD	Implant	DMPA	POP	СНС	Condition	Sub-Condition	Cu-IUD	LNG-IUD		DMPA	POP	СНС
		I C	I C	I C	I C	I C	I C			I C	I C	I C	I C	I C	I C
Age		Menarche to	Menarche to	Menarche to	Menarche to	Menarche to	Menarche to	Diabetes	a. History of gestational disease	1	1	1	1	1	1
		<20 yrs: <b>2</b>	<20 yrs: <b>2</b>	<18 yrs: <b>1</b>	<18 yrs: <b>2</b>	<18 yrs: <b>1</b>			b. Nonvascular disease			-	-	_	
		<20 yi3.2	<20 yi3.2	< 10 yrs.	< 10 yis.2	< 10 yis.	< to yis.		i. Non-insulin dependent	1	2	2	2	2	2
		≥20 yrs: <b>1</b>	≥20 yrs: <b>1</b>	18–45 yrs: <b>1</b>	18–45 yrs: <b>1</b>	18–45 yrs: <b>1</b>	≥40 yrs: <b>2</b>		ii. Insulin dependent <sup>‡</sup>	1	2	2	2	2	2
				>45 yrs: <b>1</b>	>45 yrs: <b>2</b>				c. Nephropathy, retinopathy, or neuropathy $^{\ddagger}$	1	2	2	3	2	3/4*
				>45 yis.∎	>45 yis.Z	>45 yrs: <b>1</b>			d. Other vascular disease or diabetes of	1	2	2	3	2	3/4*
Anatomical abnormalities	a. Distorted uterine cavity	4	4						>20 years' duration <sup>‡</sup>	-					
aphormancies	b. Other abnormalities	2	2					Dysmenorrhea	Severe	2	1	1	1	1	1
Anemia, iron-deficiency		2	1	1	1	1	1	Endometrial cancer <sup>‡</sup>		4 2	4 2	1	1	1	1
Benign ovarian tumors			-	-	-	-	-	Endometrial hyperplasia		1	1	1	1	1	1
<b>, , , , , , , , , ,</b>	(including cysts)	1	1	1	1	1	1	Endometriosis		2	1	1	1	1	1
Breast disease	a. Undiagnosed mass	1	2*	2*	2*	2*	2*	Epilepsy <sup>‡</sup>	(see also Drug Interactions)	1	1	1*	1*	1*	1*
	b. Benign breast disease	1	1	1	1	1	1	Gallbladder disease	a. Asymptomatic		2	2	2	2	2
	c. Family history of cancer	1	1	1	1	1	1		b. Symptomatic						
d. B           ii.           Breastfeeding           a. <	d. Breast cancer <sup>‡</sup>	_		_					i. Current	1	2	2	2	2	3
	i. Current	1	4	4	4	4	4		ii. Treated by cholecystectomy	1	2	2	2	2	2
	ii. Past and no evidence of current disease for 5 years	1	3	3	3	3	3		iii. Medically treated	1	2	2	2	2	3
Breastfeeding	a. <21 days postpartum			2*	2*	2*	4*	Gestational trophoblastic	a. Suspected GTD (immediate postevacuation)						
	b. 21 to <30 days postpartum			•*	•*	•*	•*	disease (GTD)‡	i. Uterine size first trimester	1*	1*	1*	1*	1*	1*
	i. With other risk factors for VTE			2*	2*	2*	3*		ii. Uterine size second trimester <b>2</b> *		2*	1*	1*	1*	1*
-	ii. Without other risk factors for VTE			2*	2*	2*	3*		b. Confirmed GTD						
	c. 30-42 days postpartum			<b>.</b>	•*		•*		i. Undectectable or non-pregnant β-hCG levels	1* 1*	1* 1		1*	1*	1*
	i. With other risk factors for VTE ii. Without other risk factors for VTE			1* 1*	2* 1*	1* 1*	3* 2*		ii. Decreasing ß-hCG levels	2* 1*	2* 1	* 1*	1*	1*	1*
				1*	1^ 1*	-			iii. Persistently elevated B-hCG levels						
Comital concer	d. >42 days postpartum			1*	1*	1* 1	2* 2		or malignant disease, with no evidence or suspicion	2* 1*	2* 1 <sup>+</sup>	* 1*	1*	1*	1*
	Awaiting treatment	4 2	4 2	2	2	1	2		of intrauterine disease						
		•	•	•	•	l l	•		<li>iv. Persistently elevated  ß-hCG levels or malignant disease, with evidence or suspicion</li>	4* 2*	4* 2	• 1*	1*	1*	1*
		1	2	2	2	1	2		of intrauterine disease	- 2	7 2	•	•	•	•
	a. Current nephrotic syndrome	1 1	2 2	2	3	2/4*	4	Headaches	a. Nonmigraine (mild or severe)	1	1	1	1	1	1*
b. c. r d. b. c. r d. i i i i c. r b. i i i i c. r i i d. Cervical cancer Aw Cervical cancer Aw Cervical ectropion Cervical intraepithelial neoplasia Chronic kidney disease <sup>†</sup> c. r d. C. r i i d. C. r i i i i i d. C. r i i i i i i i i i i i i i	b. Hemodialysis	1 1	2 2	2	3	2/4*	4	neuducites	b. Migraine						
	c. Peritoneal dialysis	2 1	2 2	2	3	2/4*	4		i. Without aura (includes menstrual migraine)	1	1	1	1	1	2*
Cirrhosis	a. Compensated (normal liver function)	1	1	1	1	1	1		ii. With aura	1	1	1	1	1	4*
Cirriosis	b. Decompensated <sup>‡</sup> ( <i>impaired liver function</i> )	1	2	2	3	2	4	History of bariatric surgery <sup>‡</sup>	a. Restrictive procedures	1	1	1	1	1	1
Custic fibrosis‡		- 1*	- 1*	1*	2*	- 1*	1*			_	_	_	_		COCs: 3
	a. Current or history of DVT/PVE, receiving		-						b. Malabsorptive procedures	1	1	1	1	3	P/R: 1
	anticoagulant therapy (therapeutic dose)	2*	2*	2*	2*	2*	3*	History of cholestasis	a. Pregnancy related	1	1	1	1	1	2
	b. History of DVT/PE, receiving anticoagulant therapy								b. Past COC related	1	2	2	2	2	3
·/	(prophylactic dose)							History of high blood pressure							
	i. Higher risk for recurrent DVT/PE	2*	2*	2*	3*	2*	4*	during pregnancy		1	1	1	1	1	2
	ii. Lower risk for recurrent DVT/PE	2*	2*	2*	2*	2*	3*	History of pelvic surgery	(see also Postpartum [including cesarean delivery])	1	1	1	1	1	1
	c. History of DVT/PE, not receiving anticoagulant therapy							HIV		1* 1*	1* 1*	1	1	1	1
	i. Higher risk for recurrent DVT/PE	1	2	2	3	2	4	niv	a. High risk for HIV	1* 1*	1* 1*				
	ii. Lower risk for recurrent DVT/PE	1	2	2	2	2	3		b. HIV infection			1*	1*	1*	1*
1	d. Family history (first-degree relatives)	1	1	1	1	1	2		i. Clinically well receiving ARV therapy	1 1	1 1	lf	on ARV, see also	Drug Interactions	
	······································	- 1*	1*	1*	- 1*	- 1*	1*		ii. Not clinically well or not receiving ARV therapy <sup>‡</sup>	2 1	2 1			Drug Interactions	

**Abbreviations:** ARV = antiretroviral; C = continuation of contraceptive method; LHC = combined hormonal contraceptive (pill, patch, and ring); COC = combined oral contraceptive; DMPA = depot medroxyprogesterone acetate; I = initiation of contraceptive method; LHC = levonorgestrel intrauterine device; NA = not applicable; POP = progestin-only pill; P/R = patch/ring; SSRI = selective serotonin reuptake inhibitor; STI = sexually transmitted infection; VTE = venous thromboembolism. \*Condition associated with increased risk as a result of pregnancy. \*Please see the complete guidance for a clarification to this classification: <u>https://www.cdc.gov/contraception/hcp/usmec/</u>.

## Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use (U.S. MEC)



Condition	Sub-Condition	Cu-IUD	LNG-IUD	Implant	DMPA	POP	CHC	Conditio
		I C	I C	I C	I C	I C	I C	
Hypertension	a. Adequately controlled hypertension	1*	1*	1*	2*	1*	3*	Rheumatoid
	b. Elevated blood pressure levels							arthritis
	(properly taken measurements)							Schistosomiasis
	i. Systolic 140-159 or diastolic 90-99	1*	1*	1*	2*	1*	3*	
	ii. Systolic $\geq 160$ or diastolic $\geq 100^{+1}$	. 1*	2*	2*	3*	2*	4*	Sexually transmitte
	c. Vascular disease	- 1*	- 2*	- 2*	3*	- 2*	4*	infections (STIs)
Inflammatory bowel disease	(ulcerative colitis or Crohn's disease)	1	1	1	2	2	2/3*	
Ischemic heart disease <sup>‡</sup>	Current and history of	1	2 3	2 3	3	2 3	4	
Liver tumors	a. Benign	•	2 3	2 3	3	2 3	-	Sickle cell disease <sup>‡</sup>
Liver tumors	i. Focal nodular hyperplasia	1	2	2	2	2	2	Smoking
	ii. Hepatocellular adenoma <sup>‡</sup>	1	2	2	3	2	4	
	b. Malignant <sup>†</sup> (hepatocellular carcinoma)	1	3	3	3	3	4	
Malaria		1	1	1	1	1	1	Solid organ
Multiple risk factors for	(e.g., older age, smoking, diabetes, hypertension, low	•	•	•	•	•	•	transplantation‡
atherosclerotic cardiovascular	HDL, high LDL, or high triglyceride levels)	1	2	2*	3*	2*	3/4*	Stroke <sup>‡</sup>
disease		•	-	-		-	5/4	Superficial venous of
Multiple sclerosis	a. Without prolonged immobility	1	1	1	2	1	1	•
•	b. With prolonged immobility	1	1	1	2	1	3	Surgery
Obesity	a. Body mass index (BMI) $\geq$ 30 kg/m <sup>2</sup>	1	1	1	1	1	2*	
	b. Menarche to <18 years and BMI $\geq$ 30 kg/m <sup>2</sup>	1	1	1	2	1	2*	
Ovarian cancer‡		1	1	1	1	1	1	
Parity	a. Nulliparous	2	2	1	1	1	1	Systemic lupus eryt
	b. Parous	1	1	1	1	1	1	
Past ectopic pregnancy		1	1	1	1	2	1	
Pelvic inflammatory	a. Current	4 2*	4 2*	1	1	1	1	
disease	b. Past							Thalassemia
	i. With subsequent pregnancy	1 1	1 1	1	1	1	1	Thrombophilia <sup>‡</sup>
	ii. Without subsequent pregnancy	22	22	1	1	1	1	Thyroid disorders
Peripartum cardiomyopathy <sup>‡</sup>	a. Normal or mildly impaired cardiac function		-		_			Tuberculosis <sup>‡</sup>
	i. <6 months	2	2	1	2	1	4	(see also Drug Interac
	ii. ≥6 months	2	2	1	2	1	3	Unexplained vagina
Dental anti-	b. Moderately or severely impaired cardiac function	2	2	2	3	2	4	Uterine fibroids
Postabortion	a. First trimester abortion	<b>a</b> ×	<b>a</b> ×	<b>4</b> ¥	<b>a x</b>	<b>a</b> ¥	<b>4</b> ¥	Valvular heart disea
(spontaneous or induced)	i. Procedural (surgical) ii. Medication	<u>1*</u> 1*	1* 1*	1* 1*	1* 1/2*	1* 1*	1* 1*	
	ii. Spontaneous abortion with no intervention	1*	1* 1*	1*	1/2"	1*	1*	Vaginal bleeding pa
	b. Second trimester abortion		•	•	•		•	
	i. Procedural (surgical)	2*	2*	1*	1*	1*	1*	Viral hepatitis
	ii. Medication	2*	2*	- 1*	1*	1*	1*	
	iii. Spontaneous abortion with no intervention	2*	2*	1*	1*	1*	1*	Drug Interactio
	c. Immediate postseptic abortion	4	4	1*	1*	1*	1*	Antiretrovirals (ARV
Postpartum	a. <21 days	-	-	1	2	1	4	used for prevention treatment of HIV <sup>‡</sup>
(nonbreastfeeding)	b. 21 days to 42 days							Anticonvulsant ther
, , , , , , , , , , , , , , , , , , ,	i. With other risk factors for VTE			1	2	1	3*	
	ii. Without other risk factors for VTE			1	1	1	2	
	c. >42 days			1	1	1	1	Antimicrobial thera
Postpartum	a. <10 minutes after delivery of the placenta	2*	2*					
(including cesarean	b. 10 minutes after delivery of the placenta to <4 weeks	2*	2*					
delivery, breastfeeding, or	c. ≥4 weeks	1*	1*					
nonbreastfeeding)	d. Postpartum sepsis	4	4					SSRIs
Pregnancy		4*	4*	NA*	NA*	NA*	NA*	St. John's wort

Condition	Sub-Condition	Cu-	IUD	LNG	-IUD	Implant	DMPA	POP	СНС
			C		C	I C	I C	I C	I C
Rheumatoid	a. Not on immunosuppressive therapy		1		1	1	2	1	2
arthritis	b. On immunosuppressive therapy	2	1	2	1	1	2/3*	1	2
Schistosomiasis	a. Uncomplicated		1		1	1	1	1	1
	b. Fibrosis of the liver <sup>‡</sup> (if severe, see also Cirrhosis)		1		1	1	1	1	1
Sexually transmitted	a. Current purulent cervicitis or chlamydial infection or								
infections (STIs)	gonococcal infection	4	2*	4	2*	1	1	1	1
	b. Vaginitis (including Trichomonas vaginalis and	-	-	_			-		
	bacterial vaginosis)	2	2	2	2	1	1	1	1
	c. Other factors related to STIs	2*	2	2*	2	1	1	1	1
Sickle cell disease <sup>‡</sup>			2		1	1	2/3*	1	4
Smoking	a. Age <35		1		1	1	1	1	2
,	b. Age $\geq$ 35, <15 cigarettes/day		1		1	1	1	1	3
	c. Age $\geq$ 35, $\geq$ 15 cigarettes/day		1		1	1	1	1	4
Solid organ	a. No graft failure	1	1	1	1	2	2/3*	2	2*
transplantation <sup>‡</sup>	b. Graft failure	2	1	2	1	2	2/3*	2	4
Stroke <sup>‡</sup>	History of cerebrovascular accident		1		2	2 3	3	2 3	4
Superficial venous disorders	a. Varicose veins		1		- 1	1	1	1	1
Saberneigi senons misoinels	b. Superficial venous thrombosis (acute or history)		1		<u>.</u>	1	2	1	3*
Surgery	a. Minor surgery without immobilization		<u>.</u> 1		<u>.</u>	1	1	1	1
Julyely	b. Major surgery								
	i. Without prolonged immobilization		1		1	1	1	1	2
	ii. With prolonged immobilization		1		<u>.</u>	1	2	1	4
<b>.</b>	a. Positive (or unknown) antiphospholipid antibodies	1*	1*		- 2*	2*	3* 3*	2*	
ystemic lupus erythematosus‡	b. Severe thrombocytopenia	3*	2*		2* 2*	2* 2*	3* 3* 3* 2*	2" 2*	4" 2*
	, ,	2*	2 1*		2* 2*	2*	2* 2*	2* 2*	2*
	c. Immunosuppressive therapy	2" 1*	1*				2* 2* 2* 2*		
	d. None of the above				2*	2*		2*	2*
Thalassemia			2		1	1	1	1	1
Thrombophilia <sup>‡</sup>			1*		2*	2*	3*	2*	4*
Thyroid disorders	Simple goiter, hyperthyroid, or hypothyroid		1		1	1	1	1	1
Tuberculosis <sup>‡</sup>	a. Nonpelvic	1	1	1	1	1*	1*	1*	1*
(see also Drug Interactions)	b. Pelvic	4	3	4	3	1*	1*	1*	1*
Unexplained vaginal bleeding	(suspicious for serious condition) before evaluation	4*	2*	4*	2*	3*	3*	2*	2*
Uterine fibroids			2		2	1	1	1	1
Valvular heart disease	a. Uncomplicated		1		1	1	1	1	2
	b. Complicated <sup>‡</sup>		1		1	1	2	1	4
Vaginal bleeding patterns	a. Irregular pattern without heavy bleeding		1	1	1	2	2	2	1
	b. Heavy or prolonged bleeding		2*	1*	2*	2*	2*	2*	1*
Viral hepatitis	a. Acute or flare		1		1	1	1	1	3/4* 2
•	b. Chronic		1		1	1	1	1	1 1
Drug Interactions			-						
Antiretrovirals (ARVs)	Fosamprenavir (FPV)								
used for prevention (PrEP) or		1/2*	1*	1/2*	1*	2*	2*	2*	3*
treatment of HIV <sup>‡</sup>	All other ARVs are 1 or 2 for all methods					-			
Anticonvulsant therapy	a. Certain anticonvulsants (phenytoin, carbamazepine,							- "	
<b>r</b> /	barbiturates, primidone, topiramate, oxcarbazepine)		1		1	2*	1*	3*	3*
	b. Lamotrigine		1		1	1	1	1	3*
Antimicrobial therapy	a. Broad-spectrum antibiotics		1		1	1	1	1	1
	b. Antifungals		1		1	1	1	1	1
	c. Antiparasitics		1		1	1	1	1	1
	d. Rifampin or rifabutin therapy		1		1	2*	1*	3*	3*
SSRIs	1 · · · · · · · · · · · · · · · · · · ·		1		1	1	1	1	1
			-		-				
St. John's wort									2