

PC² You Decide example: Pregnancy Prevention, Combined Hormonal Contraception (CHC), and Cardiovascular Risk



Making Informed
Health Choices About
Hormonal Contraception

Five-Step Approach to Interviewing and Patient Education		Guiding Discussion for Contraception	Cardiovascular Risk Assessment	Supporting Tools
Step 1 (subjective)				
Patient concerns Pregnancy Prevention	<ul style="list-style-type: none"> • What are your pregnancy plans for the next year? The next five years? • How would you feel if you were to get pregnant in the next 12 months? • How important is it for you to prevent a pregnancy, now? • What would you do if you got pregnant in the next 12 months? 			Patient History Form (Patient should complete before the patient/provider interview)
Step 2 (subjective)				
Choices Contraception Options	<ul style="list-style-type: none"> • Are you currently using a method/methods of contraception? • How satisfied/dissatisfied are you with this method? • Are you interested in a new/different method? • What are your needs for sexually transmitted infection (STI) protection? 			Contraceptive Efficacy Tools
Step 3 (subjective and some objective)				
Personal profile Factors that contribute to contraceptive choices and successful use (Provider reviews the completed Self-Administered Patient History Form as a guide for the discussion.)	<ul style="list-style-type: none"> • Ability to remember/keep track of schedules • Access to health care facility • Affordability • Age/cognitive abilities • Blood pressure • Comfort with one's body • Cultural/religious influences • Findings of physical examination (if done) • Habits – smoking, ETOH (alcohol), drugs • Influence of others — partner(s), parents, friends • Medical history • Menstrual profile • Surgical history • Sexual behaviors • Weight/BMI 	Warning Signs See below.		

Step 4 (assessment)			
Considerations Questions & Answers	<ul style="list-style-type: none"> • Contraindications • Benefits — including non-contraceptive benefits • Risks • Side effects — what is client willing to tolerate • Weight gain, irregular or no bleeding • Evidence-based scientific information 	CV Conditions Precluding Use of CHC <ul style="list-style-type: none"> • Thrombophlebitis or thromboembolic disorder • History of deep vein thrombosis or thromboembolic disorder • Cardiovascular or coronary artery disease • Valvular heart disease with thrombogenic complications • Uncontrolled hypertension • Diabetes with vascular involvement • Headache with focal aura • Major surgery with prolonged immobilization 	<ol style="list-style-type: none"> 1. Glossary of Risk Terms 2. Patient Risk Comparison Tools 3. Six-Step Plan: Responding to Announcements of Adverse Medical Events
Step 5 (plan)			
You Decide	<ul style="list-style-type: none"> • Contraceptive decisions • Instructions for contraceptive use • Red flags — contact your health care provider if you have CV signs/symptoms • Other health messages • Follow-up • Periodic reassessment 	Reinforce Warning signs: A—Abdominal Pain C—Chest Pain H—Headaches E—Eye Problems S—Severe Leg Pains	<ol style="list-style-type: none"> 1. Instructions for use 2. Warning signs 3. Other good health messages 4. Provider contact information 5. Follow-up appointment