Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use

Updated Nov 2019. This summary sheet only contains a subset of the recommendations from the USMEC. It is color coded in the left column to match the corresponding question of the WV Self-Screening Risk Assessment Questionnaire.

For complete guidance, see: http://www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm

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 health risk (method not to be used)

Note: Most contraceptive methods do not protect against sexually transmitted diseases (STDs). Consistent and correct use of the male latex condom reduces the risk of STDs and HIV.

Corresponding the West Virginia Self-Screening Risk Assessment Questionnaire:

Condition	Sub-condition	Combined pill, patch, ring (CHC)	Progestin-only Pill (POP)	Other Contraception Options Indicated for Patient	
		Initiating Continuing	Initiating Continuing		
a. Age		Menarche to <40=1	Menarche to <18=1	Yes	
		>40=2	18-45=1 >45=1	Yes Yes	
	a) Age < 35	2	1	Yes	
b. Smoking	b) Age > 35, < 15 cigarettes/day	3	1	Yes	
	c) Age > 35, >15 cigarettes/day	4	1	Yes	
c. Pregnancy	(Not Eligible for contraception)	NA*	NA*	NA*	
d. Vaginal Bleeding	Unexplained or worrisome vaginal bleeding	2	2	Yes	
e. Postpartum (see also Breastfeeding)	a) < 21 days	4	1	Yes	
	b) 21 days to 42 days:				
	(i) with other risk factors for VTE (ii) without other risk factors for VTE	3*	1	Yes	
	(ii) without other risk factors for VIE c) > 42 days	2	1	Yes Yes	
	, ,	1	1	Yes	
f. Breastfeeding (see also Postpartum)	a) < 1 month postpartum	3/4*	2*	165	
	b) 30 days to 42 days			Yes	
	(i) with other risk factors for VTE	3*	2*		
	(ii) without other risk factors for VTE	2*	1*	Yes	
	c)> 42 days postpartum	2*	1*	Yes	
	a) History of gestational DM only b) Non-vascular disease	1 1 Yes			
	(i) non-insulin dependent	2	2	Yes	
g. Diabetes mellitus	(ii) insulin dependent‡	2 2	2 2	Yes	
(DM)	c) Nephropathy/ retinopathy/ neuropathy‡	3/4*	2	Yes	
	d) Other vascular disease or diabetes of >20	,		Yes	
	vears' duration‡	3/4*	2		
	a) Non-migrainous	1*	1	Yes	
	b) Migraine:				
h. Headaches	i) without aura (includes menstrual	2*	1	Yes	
	migraines)	Σ*	1		
	iii) with aura	4*	1	Yes	
i. Inflammatory Bowel		2	2		
Disease	b) IBD with increased risk for VTE	3			
	a) Adequately controlled hypertension	3*	1*	Yes	
	b) Elevated blood pressure levels (properly taken measurements):				
j. Hypertension	(i) systolic 140-159 or diastolic 90-99	3*	1*	Yes	
	(ii) systolic ≥160 or diastolic ≥100‡	3 4*	2*	Yes	
	c) Vascular disease	4*	2*	Yes	
k. History of high				Yes	
blood pressure		2	1		
during pregnancy					
	a) Normal or mildly impaired cardiac				
	function:				
l. Peripartum	(i) < 6 months	4	1	Yes	
cardiomyopathy‡	(ii) > 6 months	3	1	Yes	
	b) Moderately or severely impaired cardiac	4	2	Yes	
m Multiple wiels	function (such as older age, smoking, diabetes,			Yes	
m. Multiple risk factors for arterial	hypertension, low HDL, high LDL, or high	2./4*	2*	165	
CVD	triglyceride levels)	3/4*	2*		
n. Ischemic heart	Current and history of			Yes	
disease‡	Carrent and mistory of	4	2 3		
o. Valvular heart	a) Uncomplicated	2	1	Yes	
disease	b) Complicated‡	4	1	Yes	
p. Stroke‡	History of cerebrovascular accident	4	2 3	Yes	
q. Known		*	3		
Thrombogenic mutations‡		4*	2*	Yes	

 $I = initiation \ of \ contraceptive \ method; \ C = continuation \ of \ contraceptive \ method; \ NA = Not \ applicable$

^{*} Please see the complete guidance for a clarification to this classification: www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm

 $[\]ddagger$ Condition that exposes a woman to increased risk as a result of unintended pregnancy.

Condition	Sub-condition	Combined pill, patch (CHC)	Progestin-only pill (POP)	Other Contraception Options Indicated for Patient
		Initiating Continu	ing Initiating Continuing	
	a) History of DVT/PE, not on anticoag therapy			V
r. Deep venous thrombosis (DVT) &	i) higher risk for recurrent DVT/PE ii) lower risk for recurrent DVT/PE	4	2	Yes Yes
	b) Acute DVT/PE	3	2 2	Yes
	c) DVT/PE and established on anticoagulant	+	L	100
	therapy for at least 3 months			
	i) higher risk for recurrent DVT/PE	4*	2	Yes
Pulmonary embolism	ii) lower risk for recurrent DVT/PE	3*	2	Yes
(PE)	d) Family history (first-degree relatives)	2	1	Yes
	e) Major surgery			
	(i) with prolonged immobilization	4	2	Yes
	(ii) without prolonged immobilization	2	1	Yes
	f) Minor surgery without immobilization	1	1	Yes
s. Superficial venous disorders	a) Varicose veins	1	1	
	b) Superficial venous thrombosis (acute or history)	3*	1	
	a) With prolonged immobility	2		Yes
	b)Without prolonged immobility	3	1 1	Yes
	a) Restrictive procedures	1	1	Yes
	b) Malabsorptive procedures	COCs: 3 P/R: 1		Yes
	a) Undiagnosed mass	2*	2*	Yes
v. Breast Disease & Breast Cancer	b) Benign breast disease	1	1	Yes
	c) Family history of cancer	1	1	Yes
	d) Breast cancer:‡	1	*	
	i) current	4	4	Yes
	ii) past/no evidence current disease x 5yr	3	3	Yes
C-1:1 O	a) Complicated – graft failure, rejection, etc.			Yes
	b) Uncomplicated b) Uncomplicated	4 2*	2	Yes
	a) Acute or flare		1	Yes
	b) Carrier/Chronic	, , , , , , , , , , , , , , , , , , ,	1	Yes
	a) Mild (compensated)	1 1	1	Yes
	b) Severe‡ (decompensated)	4	3	Yes
	a) Benign:			
	i) Focal nodular hyperplasia	2	2	Yes
z. Liver tumors	ii) Hepatocellular adenoma‡	4	3	Yes
	b) Malignant‡ (hepatoma)	4	3	Yes
	a) Symptomatic:			V
	(i) treated by cholecystectomy	2	2	Yes
aa. Gallbladder disease		3	2	Yes
	(iii) current	3	2	Yes
	b) Asymptomatic	2	2	Yes Yes
0.01.110101.	a) Pregnancy-related b) Past COC-related	2	2	Yes
Cholestasis	a) Positive (or unknown) antiphospholipid	3	2	Yes
	antibodies	4*	3*	163
cc. Systemic lupus erythematosus‡	b) Severe thrombocytopenia	2*	2*	Yes
	c) Immunosuppressive treatment	2*	2*	Yes
	d) None of the above	2*	2*	Yes
dd. Rheumatoid	a) On immunosuppressive therapy	2	1	Yes
dd. Rheumatoid arthritis	(i) Long-term corticosteroid therapy			Yes
	b) Not on immunosuppressive therapy	2	1	Yes
cc. Dioou containing	a) Thalassemia	1	1	Yes
	b) Sickle Cell Disease‡	2	1	Yes
			1	Yes
Anemias	c) Iron-deficiency anemia	1		
ff. Epilepsy‡	(see also Drug Interactions)	1*	1*	Yes
ff. Epilepsy‡ gg. Tuberculosis‡	(see also Drug Interactions) a) Non-pelvic	1* 1*	1* 1*	Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions)	(see also Drug Interactions) a) Non-pelvic b) Pelvic	1* 1* 1*	1* 1* 1*	Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions)	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV	1* 1* 1* 1* 1*	1* 1* 1* 1* 1* 1	Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions)	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection	1* 1* 1*	1* 1* 1*	Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV	1* 1* 1* 1* 1* 1 1	1* 1* 1* 1* 1* 1	Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV)	1* 1* 1* 1* 1 1* 1 1* Yes	1* 1* 1* 1* 1 1* 2	Yes Yes Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2)	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r)	1* 1 * 1 * 1 * 1 * 1 * 1 * 1 * Yes	1* 1* 1* 1* 1 1* 1 1*	Yes Yes Yes Yes Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2)	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin,	1* 1* 1* 1* 1 1* 1 1* Yes	1* 1* 1* 1* 1 1 2 2	Yes Yes Yes Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2) jj. Anticonvulsant	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone,	1* 1* 1* 1* 1 1* 1 1* Yes	1* 1* 1* 1* 1 1* 2	Yes Yes Yes Yes Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2) jj. Anticonvulsant	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine)	1* 1* 1* 1 1* 1 1* 1 1* Yes 3 2	1* 1* 1* 1 1* 1 1* 2 2 2 3*	Yes Yes Yes Yes Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2) jj. Anticonvulsant therapy	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine) b) Lamotrigine	1* 1* 1* 1 1* 1 1* Yes 3 2	1* 1* 1* 1 1* 1 1 1* 2 2 2 3*	Yes Yes Yes Yes Yes Yes Yes Yes Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2) jj. Anticonvulsant therapy	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine) b) Lamotrigine a) Broad spectrum antibiotics	1* 1* 1* 1 1* 1 1* 1 1* Yes 3 2 3* 1	1* 1* 1* 1 1* 1 1* 2 2 2 3* 1 1	Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2) jj. Anticonvulsant therapy kk. Antimicrobial	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine) b) Lamotrigine a) Broad spectrum antibiotics b) Antifungals	1* 1* 1* 1 1* 1 1* Yes 3 2 3* 1 1 1 1	1* 1* 1* 1 1* 1 1* 2 2 2 3* 1 1 1 1	Yes
ff. Epilepsy‡ gg. Tuberculosis‡ (see also Drug Interactions) hh. HIV ii. Antiretroviral therapy (All other ARVs are a 1 or 2) jj. Anticonvulsant therapy kk. Antimicrobial therapy	(see also Drug Interactions) a) Non-pelvic b) Pelvic a) High risk for HIV b) HIV infection (i) On ARV therapy a) Fosamprenavir (FPV) (i) Fosamprenavir + Ritonavir (FPV/r) a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine) b) Lamotrigine a) Broad spectrum antibiotics	1* 1* 1* 1 1* 1 1* 1 1* Yes 3 2 3* 1	1* 1* 1* 1 1* 1 1* 2 2 2 3* 1 1	Yes

 $^{{\}it Modified From\ Oregon\ BOP\ \ Draft\ for\ Internal\ Review\ 11/20/2019}$

I = initiation of contraceptive method; C = continuation of contraceptive method; NA = Not applicable
* Please see the complete guidance for a clarification to this classification: www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm
‡ Condition that exposes a woman to increased risk as a result of unintended pregnancy.