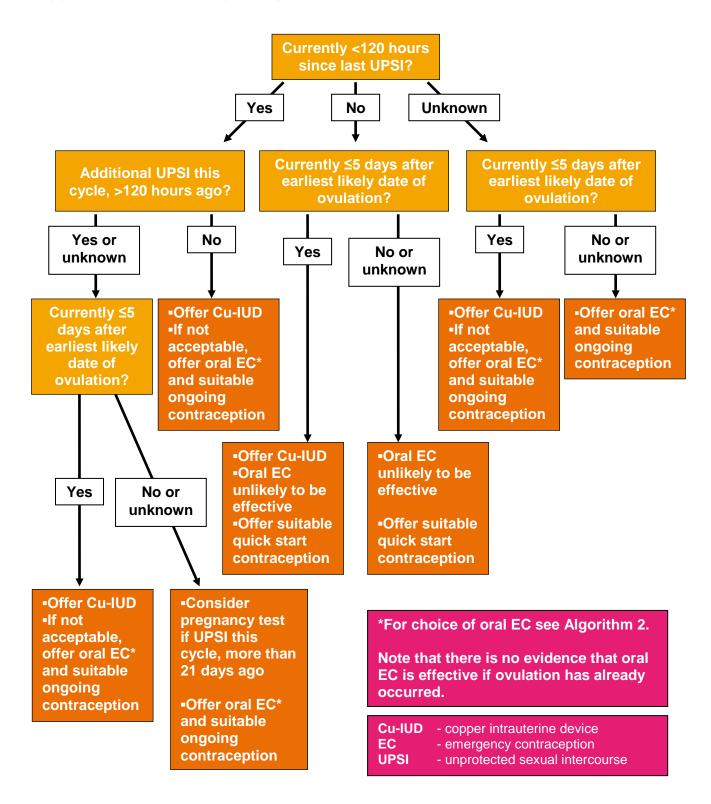


## **Decision-making Algorithms for Emergency Contraception**

Algorithm 1: Decision-making Algorithm for Emergency Contraception (EC): Copper Intrauterine Device (Cu-IUD) vs Oral EC





Algorithm 2: Decision-making Algorithm for Oral Emergency Contraception (EC): Levonorgestrel EC (LNG-EC) vs Ulipristal Acetate EC (UPA-EC)

The Cu-IUD is the most effective form of EC. If criteria for insertion of a Cu-IUD are not met or a Cu-IUD is not acceptable to a woman, consider oral EC. Last UPSI <96 hours ago? Yes No or unknown UPSI likely to have taken place ≤5 days Last UPSI <120 hours ago? prior to the estimated day of ovulation? No Yes or unknown Yes or unknown No Oral EC unlikely to be effective. BMI >26 kg/m<sup>2</sup> or weight >70 kg • Reconsider Cu-IUD if currently within 5 days after likely ovulation or No Yes Immediate QS only NOTE THAT ORAL EC IS UNLIKELY TO BE EFFECTIVE IF TAKEN AFTER OVULATION ■ LNG-EC\*\* UPA-EC\* UPA-EC\* UPA-EC\* + start contraception after + immediate QS + start + start contraception after 5 days contraception 5 days after 5 days or LNG-EC unlikely to be Reconsider Cu-IUD if all UPSI within 120 hours or if UPA-EC\* effective. or currently within 5 days + start after likely ovulation Double dose contraception Reconsider Cu-IUD if all (3 mg) LNG-EC after 5 days UPSI within 120 hours or if + immediate QS • If UPA not suitable: currently within 5 days after **LNG-EC\*\*** likely ovulation + immediate QS \*\*Consider double-dose (3 mg) LNG if BMI >26 kg/m<sup>2</sup> or weight >70 kg (Section 9.2) or if taking an enzyme inducer (Section 10.1) \*UPA could be less effective if: a woman is taking an enzyme inducer (see Section 10.1) **Cu-IUD** - copper intrauterine device a woman has recently taken a progestogen EC emergency contraception **LNG-EC** - levonorgestrel 1.5 mg (see Section 10.3) - quick start of suitable hormonal UPA is not recommended for a woman who contraception **UPA-EC** - ulipristal acetate 30 mg has severe asthma managed with oral **UPSI** - unprotected sexual intercourse glucocorticoids (Section 11.2)