

MEMORANDUM

DATE: May 17, 2006
TO: Title X Family Planning Contractor Sites
FROM: Wanicha Coggins MD, Title X Medical Director
Margie Montoya CNP, Nurse Consultant
RE: 2006 FP Protocol revisions

Here are the annual revisions to add to your neon green Family Planning Protocol notebook. Open each section and print a copy of any files dated for 2006 to add to your protocol binder (except Appendix K). As you do this, recycle any old pages that are replaced, so you end up with no duplicate page numbers. Please do this right away so your notebook remains current.

All holders of FP Protocol notebooks should also have a copy of the companion volume, Contraceptive Technology, 18th revised edition and A Pocket Guide to Managing Contraception (2005-2007). All clinicians (only) should have Dickey's handbook Managing Contraceptive Pill Patients, 11th edition.

The Acknowledgment and Receipt of New/Revised Protocol Form is included in the CD files. Please ensure that each clinician and nurse reviews the protocol revisions and signs this sheet. The Clinic Manager will retain signed copy(s) of this sheet at the clinic.

Highlights of changes include:

Section 1 General Protocols

1.1. I Medical Emergencies:

- Procedures for medical emergencies including vasovagal reaction, anaphylaxis, syncope, cardiac arrest, shock, hemorrhage, and respiratory difficulties have been added into Appendix A.
- Emergency equipment must be available and accessible to all staff at all times at each clinic site.
- Annual practice medical emergency drills must be documented & the documentation kept in the clinic.
- All patients should be given emergency instructions at the time of initiation of services.

1.6 Proof of income: Continue to ask client to bring a proof of income. However, proof of income is not required. If a client has no proof of income they may self-declare their income on the Income Affidavit. The office should accept the self-declaration and charge the client based upon what he or she has declared.

1.62 General Consent for Services: All Title X clients must provide and document their voluntary and informed consent prior to being interviewed or receiving any clinical services. All adolescents must be counseled and sign the "Parental/Family Involvement" form prior to being interviewed or receiving any clinical services.

1.62 B. Proof of Rubella immunization: If no proof of rubella immunity, recommend immunization with MMR.

1.62. D. Adult health screening: Adult health screening for men and women should stress the importance of blood pressure screening, glucose testing and colo-rectal cancer screening in men and women 50 and over.

1.62 D. Prescriptions for Title X clients: Prescriptions may be written for those methods, which are included in the Title X formulary supply only.

Section 2 Contraceptive Methods is new. This new section incorporates the old Sections 3 & 5 and Appendix N. This section now contains the methods education, consent forms and client handouts.

2.8 P. Management of Other IUDs: Follow manufacturer's recommendations for removal. For women who have had an IUD inserted in another country and don't know when it should be removed, apply the 5-year use timeframe for removal.

2.9 4. Natural Family Planning

- The Family Planning Program has adopted the Cycle Beads for natural family planning education based on the Standard Days Method (SDM). The SDM is most appropriate for women who usually have cycles between 26 and 32 days long. Complete instructions are found in Contraceptive Technology.
- Two-hour Cycle Beads training with free CEUs is available on line from Georgetown University Institute for Reproductive Health at <http://irh.org>

2.12 Quickstart forms: Have been reformatted and are now in SOAP layout, they can be filed chronologically in the medical record.

2.13 D. Sterilizations

- A family planning chart is made for both males and females and includes client health history, physical exam and documentation of non-coercive counseling.
- Partial pay clients should pay prior to surgery. However, if concern about money is their reason for not wanting to make an appointment for surgery or for keeping an appointment, please explain to the client that your office will work with them. We do not want to deny services to anyone.
- New consent forms available for order from the OPA site: <http://opa.osophs.dhhs.gov> Make sure your using the consent form with the 8/2006 expiration date.

Section 3 Formulary List for Family Planning - This used to be Section 8 and has been revised.

Section 4 Laboratory- mostly formatting changes.

Section 5 Family Planning Needs of Special Populations

5.3 Adolescents and Coercion – revised.

5.8 Infertility- Section 8.5 of the Title X Guidelines requires all programs to offer at least Level I infertility services. These services include an initial interview, education, physical examination, counseling, and referral for more extensive services. If indicated, provide instruction in fertility awareness.

5.94 Nutritional Needs of Women. - The United States Department of Agriculture (USDA) has revised the food pyramid. The new "My Pyramid" is an individualized food guidance system based on age, sex and daily level of physical activity. Additional information can be found at <http://www.mypyramid.gov/>

5.98 Weight Management – Background information and recommendations for health promotion have been revised.

APPENDICES

Appendix A: Recommendations for Medical Emergencies. New

Appendix B: Fee Collection Protocol. Revised

Appendix D: Educational resources. Revised

Appendix E: Staff Orientation Resource. New

Appendix G: Referral List. Revised

Appendix H: Provider Agreement Sites. Revised

Appendix I: Contractors List. Revised

Appendix K: Site Audit Tool. Last 2 pages only are new. They contain the 2005-2009 Local public health offices site visit schedule.

Appendix L: State office FP personnel. Revised

Appendix N: Birth Control Pills and Equivalents. New