

Checklist

Family planning and related preventive health services



for women

	Screening components	Family planning services (provide services in accordance with the appropriate clinical recommendation)					Related preventive health services
		Contraceptive services ¹	Pregnancy testing and counseling	Basic infertility services	Preconception health services	STD services ²	
History	Reproductive life plan	✓	✓	✓	✓	✓	
	Medical history	✓	✓	✓	✓	✓	✓
	Current pregnancy status	✓					
	Sexual health assessment	✓		✓	✓	✓	
	Intimate partner violence				✓		
	Alcohol & other drug use				✓		
	Tobacco use	✓ (combined hormonal methods for clients ≥35 years)			✓		
	Immunizations				✓	✓ ⁴ (HPV & HBV)	
	Depression				✓		
Folic acid				✓			
Physical examination	Height, weight & BMI	✓ (hormonal methods) ³		✓	✓		
	Blood pressure	✓ (combined hormonal methods)			✓ ⁴		
	Clinical breast exam			✓			✓ ⁴
	Pelvic exam	✓ (initiating diaphragm or IUD)	✓ (if clinically indicated)	✓			
	Signs of androgen excess			✓			
	Thyroid exam			✓			
Laboratory testing	Pregnancy test	✓ (if clinically indicated)	✓				
	Chlamydia	✓ ⁵				✓ ⁴	
	Gonorrhea	✓ ⁵				✓ ⁴	
	Syphilis					✓ ⁴	
	HIV/AIDS					✓ ⁴	
	Hepatitis C					✓ ⁴	
	Diabetes				✓ ⁴		
	Cervical cytology						✓ ⁴
Mammography						✓ ⁴	

Source: Centers for Disease Control and Prevention (CDC). (2014, April 25). Providing quality family planning services: Recommendations of CDC and the U.S. Office of Population Affairs. *MMWR. Morbidity and Mortality Weekly Reports*. Retrieved from <http://www.cdc.gov/mmwr/pdf/rr/rr6304.pdf>

Abbreviations: BMI = body mass index; HBV = hepatitis B virus; HIV/AIDS = human immunodeficiency virus/acquired immunodeficiency syndrome; HPV = human papillomavirus; IUD = intrauterine device; STD = sexually transmitted disease.

¹ This table presents highlights from CDC's recommendations on contraceptive use. However, providers should consult appropriate guidelines when treating individual patients to obtain more detailed information about specific medical conditions and characteristics (Source: CDC, U.S. medical eligibility criteria for contraceptive use 2010. MMWR 2010;59[No. RR-4]).

² STD services also promote preconception health but are listed separately here to highlight their importance in the context of all types of family planning visits. The services listed in this column are for women without symptoms suggestive of an STD.

³ Weight (BMI) measurement is not needed to determine medical eligibility for any methods of contraception because all methods can be used (US Medical Eligibility Criteria 1) or generally can be used (US Medical Eligibility Criteria 2) among obese women. (Source: CDC, U.S. medical eligibility criteria for contraceptive use 2010. MMWR 2010;59[No. RR-4]). However, measuring weight and calculating BMI at baseline might be helpful for monitoring any changes and counseling women who might be concerned about weight change perceived to be associated with their contraceptive method.

⁴ Indicates that screening is suggested only for those persons at highest risk or for a specific subpopulation with high prevalence of an infection or condition.

⁵ Most women do not require additional STD screening at the time of IUD insertion if they have already been screened according to CDC's STD Treatment Guidelines (Sources: CDC, STD treatment guidelines. Atlanta, GA: US Department of Health and Human Services, CDC; 2013. Available at <http://www.cdc.gov/std/treatment>. CDC. Sexually transmitted diseases treatment guidelines, 2010. MMWR 2010;59[No. RR-12]). If a woman has not been screened according to guidelines, screening can be performed at the time of IUD insertion and insertion should not be delayed. Women with purulent cervicitis or current chlamydial infection or gonorrhea should not undergo IUD insertion (U.S. Medical Eligibility Criteria 4). Women who have a very high individual likelihood of STD exposure (e.g., those with a currently infected partner) generally should not undergo IUD insertion (U.S. Medical Eligibility Criteria 3) (Source: CDC. US medical eligibility criteria for contraceptive use 2010. MMWR 2010;59[No. RR-4]). For these women, IUD insertion should be delayed until appropriate testing and treatment occurs.

Checklist

Family planning and related preventive health services

for men



		Family planning services (provide services in accordance with the appropriate clinical recommendation)				
Screening components		Contraceptive services ¹	Basic infertility services	Preconception health services ²	STD services ³	Related preventive health services
History	Reproductive life plan	✓	✓	✓	✓	
	Medical history	✓	✓	✓	✓	
	Sexual health assessment	✓	✓	✓	✓	
	Alcohol & other drug use			✓		
	Tobacco use			✓		
	Immunizations			✓	✓ (HPV & HBV) ⁴	
	Depression			✓		
Physical examination	Height, weight & BMI			✓		
	Blood pressure			✓ ⁴		
	Genital exam		✓ (if clinically indicated)		✓ (if clinically indicated)	✓ ⁴
Laboratory testing	Chlamydia				✓ ⁴	
	Gonorrhea				✓ ⁴	
	Syphilis				✓ ⁴	
	HIV/AIDS				✓ ⁴	
	Hepatitis C				✓ ⁴	
	Diabetes			✓ ⁴		

Source: Centers for Disease Control and Prevention (CDC). (2014, April 25). Providing quality family planning services: Recommendations of CDC and the U.S. Office of Population Affairs. *MMWR. Morbidity and Mortality Weekly Reports*. Retrieved from <http://www.cdc.gov/mmwr/pdf/rr/rr6304.pdf>

Abbreviations: BMI = body mass index; HBV = hepatitis B virus; HIV/AIDS = human immunodeficiency virus/acquired immunodeficiency syndrome; HPV = human papillomavirus; STD = sexually transmitted disease.

¹ No special evaluation needs to be done prior to making condoms available to males. However, when a male client requests advice on pregnancy prevention, he should be provided contraceptive services as described in the section "Provide Contraceptive Services."

² The services listed here represent a sub-set of recommended preconception health services for men that were recommended and for which there was a direct link to fertility or infant health outcomes (Source: Frey K, Navarro S, Kotelchuck M, Lu M. The clinical content of preconception care: preconception care for men. *Am J Obstet Gynecol* 2008;199 [6 Suppl 2]:S389-95).

³ STD services also promote preconception health, but are listed separately here to highlight their importance in the context of all types of family planning visit. The services listed in this column are for men without symptoms suggestive of an STD.

⁴ Indicates that screening is suggested only for individuals at highest risk or for a specific subpopulation with high prevalence of infection or other condition.