

Intrauterine Device (IUD)



The intrauterine device (IUD) is a small, T-shaped device that is inserted in the uterus to prevent pregnancy. IUDs are very effective and long-lasting forms of reversible birth control. They do NOT protect against sexually transmitted diseases (STDs).

How does it work?

The hormonal IUD releases a hormone (levonorgestrel) that causes thickening of the mucus in the cervix and thinning of the uterine lining. It can also prevent the release of an egg but not consistently. Together, these effects make it hard for sperm to get to an egg (if there is one) and for an egg to implant in the uterus.

How effective is it?

When regularly inspected (described below), all forms of IUD are at least 99% effective, making them one of the most reliable forms of birth control available today.

How do I use it?

IUD insertion requires a visit with a health care provider. The IUD is inserted inside your uterus. One of the benefits of the IUD is that once it's in place, there is little you need to do besides regular inspections. There is a short string attached to the IUD for removal purposes; make sure you can feel it with your fingers about once a month after periods. Also make sure you see your provider at least once a year to make sure that the IUD hasn't shifted.

What if I want to get pregnant soon?

The IUD does not permanently affect your chances of getting pregnant. If you are ready to become pregnant, see your provider to have the IUD removed. Do not attempt to remove it yourself. It is possible to get pregnant soon after the IUD is removed.

What are the available IUD options?

	Hormonal IUD	Non-Hormonal IUD
Active Ingredient	Progestin hormones	Copper
Brands	Mirena, Kyleena, Skyla, Liletta	Paragard, Miudella
Effective for*	3 - 8 years	3 - 10 years
How it works	Prevents egg release (ovulation) and makes it difficult for sperm to cross the cervix	Causes inflammation in the uterus and kills sperm
When it starts working	Varies**	Immediately
Other considerations	Can cause lighter, more regular periods that may go away after some time	Can be used as emergency contraception if inserted within 5 days of unprotected sex

*Depends on the specific product

**If the hormonal IUD is inserted within the first 5 days of your period, it starts to work right away. Otherwise you will need to use backup birth control, like a condom, for about a week.

Is it right for me?

Comfort with an invasive form of birth control is an important factor to keep in mind when it comes to the IUD. You may want to consider another form of birth control if you plan to become pregnant within the next 3-10 years since the IUD can last that long.

What are the side effects of IUDs?

Insertion, regular check-ups, and removal of the IUD can be painful experiences. A common side effect of the copper IUD is heavier and more painful periods, but the hormonal IUD can make them lighter and even go away after some time. In very rare cases, injury to the uterus can happen from either IUD.

When should I call my doctor?

Seek medical attention if you have heavy bleeding, cramping, pain, abnormal vaginal discharge, fever, or think you might be pregnant. Movement of the IUD is extremely rare. If it does happen, it is most likely to happen during the first few weeks of insertion. In very rare cases, the IUD may fall out of the uterus completely or partially. If you suspect one of these events, do not try to fix it on your own. See your provider immediately.

Where can I find a reproductive health clinic?

Family Planning Clinic Locator
www.reproductivehealthservices.gov
Planned Parenthood
www.plannedparenthood.org/health-center
CDC HIV/STD Testing Directory
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The Implant

The birth control implant, known by its brand name Nexplanon, is a small, rod-shaped device that releases hormone continuously into the body. It is a one-time implant in the arm that provides reliable contraception for 5 years. The implant does NOT protect against sexually transmitted diseases (STDs).

How does it work?

The implant releases the progestin hormone etonogestrel. This hormone prevents the release of an egg and makes it difficult for sperm to cross the cervix. Together, these effects make pregnancy unlikely.

How well does it work?

The implant is one of the most effective forms of contraception, with a success rate of over 99%.

When does it start working?

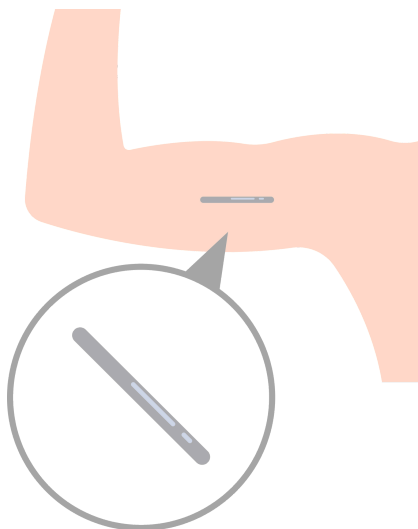
If you get the implant within the first 5 days of your period, it will start working right away. If you get it at any other time, make sure you use backup birth control, like condoms, for about a week.

How do I use it?

All you need to do is schedule an appointment with your health care provider to get the rod implanted in your arm.

Your provider will numb the area with local anesthetic and insert the thin plastic implant under the skin of your upper arm.

Return in 5 years or when you are ready to become pregnant, whichever comes first, to have it removed.



Is it right for me?

Comfort with an invasive form of birth control is an important factor to keep in mind when it comes to the implant. You may want to consider another form of birth control if you plan to become pregnant within the next 5 years, since the implant *can* work for that long.

What if I want to get pregnant soon?

The implant does not permanently affect your chances of getting pregnant. If you are ready to become pregnant, see your provider to have the implant removed. Do not attempt to take it out yourself. It is possible to get pregnant soon after the implant is removed.

What are the downsides of the implant?

The most common side effect of the implant is spotting within the first year. It can lighten periods over time and even make them go away, but in rare cases it may make them heavier. Discomfort in the arm at the implant site is also common but temporary.

When should I call my doctor?

Seek medical attention if you develop redness, drainage, or warmth from the insertion site, if you can't feel the implant, or if you think you may be pregnant.

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The birth control gel is one of the newest methods of non-hormonal contraception. It was approved under the brand name Phexx (formerly Phexxi). The gel does NOT protect against sexually transmitted diseases (STDs).

How does it work?

The gel consists of citric acid, lactic acid, and potassium bitartrate. Together, they work by maintaining a vaginal pH within the normal range of 3.5-4.5. This is too acidic for sperm, which are then unable to move and fertilize an egg.

How well does it work?

With ideal use, the gel is expected to be 93% effective, but with typical use, the effectiveness can drop down to 86.3%.

How do I use it?

The gel comes inside an applicator which dispenses it inside your vagina. Apply it within one hour **before** sex **every time**. Even if you did not have sex within an hour of applying the gel, you will still need to apply it again for sex after that hour. It can be used during your period and with other birth control methods, like condoms and the pill, but it cannot be used with the ring.

Isn't it basically a spermicide?

It is understandable to think of the gel as a new type of spermicide, but it actually works differently. The gel works by keeping the vagina acidic, while spermicides block the cervix and immobilize sperm in other ways. Most spermicides contain the chemical nonoxynol-9, which can be harmful to patients with a high risk of HIV infection or other STDs. The gel Phexx contains ingredients that are safe enough to use as food additives.

Is it right for me?

The gel is worth considering if your body is sensitive to hormonal contraceptives, but don't use it if you are allergic to any of its ingredients. Caution should be taken if you have a recent history of UTIs. Don't use the gel if you use the ring. You should also not use the gel if you or your partner have broken skin in the groin area as this could make local discomfort worse.

What are some side effects?

The most common complaint of the gel is local discomfort like burning and itching in both partners. Urinary tract infections (UTIs) and other infections may also happen.

When should I call my doctor?

Serious problems are rare. Seek medical attention if you develop prolonged vaginal itching, burning while peeing, or think you may be pregnant.

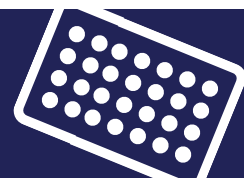
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Progestin-Only Pills: “The Minipill”



The "minipill," or progestin-only pill (POP), is a method of birth control that contains only one hormone, a progestin. There are 2 types of minipills: norethindrone (Micronor, Camila, Errin, etc.) and drospirenone (Slynd). The minipill is different from the combined oral contraceptive (COC or "the pill"), which contains progestin and estrogen hormones. The minipill does NOT protect against sexually transmitted diseases (STDs).

How does it work?

The hormone in the minipill acts like the body's natural hormone progesterone. It causes thickening of the mucus in the cervix and thinning of the uterine lining. It can also prevent the release of an egg but not consistently. Together, these effects make it hard for sperm to get to an egg (if there is one) and for an egg to implant in the uterus.

How well does it work?

When taken correctly, the minipill is more than 99% effective, but missing pills or taking them late is common, so the overall effectiveness drops to 91% with typical use. Overall, the minipill is slightly less effective at preventing pregnancy than COCs.

How do I take it?

Take the minipill by mouth on the first day of your period. If you are using the norethindrone minipill, you may take the first pill on any other day, but use backup birth control, like condoms, for 48 hours. Consistency is key with the minipill. Aim to take it at the same time every day. For the norethindrone minipill, all pills in the 28-day pack contain hormone. It must be taken every single day with no skipping. For the drospirenone minipill, 24 pills in the 28-day pack contain hormone, and the last 4 are placebo ("sugar pills"). You may get your period during these 4 days.

What if I forget to take it on time?

If you are more than 3 hours late for the norethindrone minipill or more than 24 hours late for the drospirenone minipill, you should take the late pill as soon as you remember and resume the regular schedule. You may need to use a backup birth control, like condoms, for the next 48 hours. If you are on the drospirenone minipill, it is okay to miss any of the 4 placebo pills; no further action is needed to prevent pregnancy, but it is good practice to take them as regularly as the hormone pills so that you can maintain the habit and routine.

Is it right for me?

The minipill is a safe option for most people, and it is especially appropriate for those who have recently given birth or are breastfeeding. The drospirenone minipill is a good option for those who are looking for birth control with fewer side effects of oily skin, weight gain, and hairiness. Some health conditions (history of blood clots, high blood pressure, migraine, smoking, and age over 35) make it unsafe to use other types of birth control pills, so the minipill can be used instead. Another consideration is the ability to remember to take the minipill every day at the same time. If you travel often and find it difficult to schedule your doses while keeping time zones in mind, the minipill may not be the best option for you.

What if I want to get pregnant soon?

The minipill is a good option if you are planning to get pregnant within the next year. It is possible to get pregnant right after stopping the minipill.

What are some side effects I might experience?

The most common side effect of the minipill is changes in bleeding patterns. These can include bleeding between periods or not having a period at all. The minipill may also cause changes in mood, skin (acne), or appetite. Side effects usually go away after 2 or 3 months.

When should I call my doctor?

Seek medical attention if you miss 2 periods in a row while on the drospirenone minipill, or if you experience heavy bleeding.

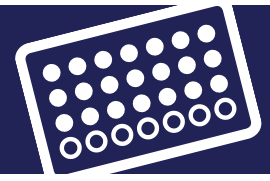
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Combined Oral Contraceptive: "The Pill"



The combined oral contraceptive (COC), or "the pill," is a method of hormonal birth control. The pill contains estrogen and progestin hormones. Brands include Loestrin, Ortho Tri-Cyclen, Yaz, and Yasmin. The pill has many benefits beyond birth control. Many people use it to help with acne, premenstrual syndrome (PMS), or their periods. The pill does NOT protect against sexually transmitted diseases (STDs).

How does it work?

The hormones in the pill prevent pregnancy in several ways. Estrogen prevents ovulation while progestin increases the thickness of cervical mucus and thins the uterine lining. These actions hinder sperm travel, egg release, and implantation in the uterus.

How well does it work?

When used correctly, the pill is over 99% effective in preventing pregnancy, but missing pills or taking them late is common, so the overall effectiveness drops to 91% with typical use.

How do I take it?

The pill is taken by mouth at the same time every day with or without food. Most combination pills come in packs of 28, where the last 4 or 7 days are placebos ("sugar pills") that do not contain any hormone. You should expect to get your period during the hormone-free days.

What if I forget to take it on time?

It's very important to take all the hormone pills on time.

- If you are late or miss one pill and remember before your next pill is due, take the late pill as soon as possible and resume your normal pill schedule. It is okay to take 2 pills in one day.
- If you miss 2 or more pills, take the most recent missed pill as soon as you remember and resume your normal pill schedule. Throw away any other pills that were missed. Use backup birth control, like condoms, for the next 7 days.
- If pills from the last week of hormones (days 15-21 for 28-day pill packs) were missed, skip the hormone-free period by finishing the hormone pills in the current pack and starting a new one the next day.

You may also consider using emergency contraception like Plan B One-Step (levonorgestrel), but not Ella (ulipristal acetate). Missing any or all of the placebo pills is okay; no further action is needed to prevent pregnancy, but it is good practice to take them as regularly as the hormone pills so that you can maintain the habit and routine.

Is it right for me?

The pill is safe for many people. Some health conditions (history of blood clots, high blood pressure, migraine, smoking, and age over 35) make it unsafe to use the pill, so the progestin-only "minipill" can be used instead. Another consideration is the ability to remember to take the pill on time all the time. If you travel often and find it difficult to schedule your doses while keeping time zones in mind, the pill may not be the best option for you.

What if I want to get pregnant soon?

The pill is a great option if you plan to become pregnant within the next year. It is possible to get pregnant as soon as you stop taking the pill.

What are some side effects I might experience?

Possible side effects are headaches, breast tenderness, changes in mood, sex drive, and bleeding patterns. These usually improve after a few months. On the bright side, the pill may help with acne and make periods lighter and more regular.

When should I call my doctor?

Though rare, there are serious side effects that can occur when using the pill. These include blood clots, heart attacks, and strokes. If you experience sudden and/or severe pain in your stomach, chest, head, or legs with or without dizziness, nausea, vomiting, difficulty breathing, or changes in vision or mental status, call your healthcare provider right away and/or get to an emergency room.

Where can I find a reproductive health clinic?

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The patch is a method of hormonal birth control in the form of a thin, adhesive patch that is attached to the skin every week for 3 weeks followed by a fourth week of no patch. There are 2 brands of patches: Xulane and Twirla. The patch does NOT protect against sexually transmitted diseases (STDs).

How does it work?

Hormones released from the patch are absorbed through the skin. Estrogen in the patch prevents egg release, or ovulation. Progestin thickens cervical mucus and thins the uterine lining. These actions make pregnancy very unlikely.

How well does it work?

The patch is 99% effective in preventing pregnancy with perfect use and 91% effective with typical use.

When does it start working?

If you apply the patch within the first 5 days of your period, it will get to work right away. Otherwise you will need to use backup birth control, like condoms, for at least 7 days.

What are the differences between Twirla and Xulane?

Twirla has less estrogen than Xulane, making it relatively safer to use in terms of blood clot risk; however, it is twice the size of the Xulane patch, and this can be a drawback for those who want a more hidden form of birth control.

How do I use it?

1. Apply a patch to the skin of the upper arm, stomach, buttock, or upper back where there is little to no hair. Avoid the breasts, genitals, and broken/irritated skin. Skin should be clean and dry, with no lotions or creams. Leave it on for one week.
2. After the one week passes, remove the patch. Fold it in half and throw it in the trash. Apply a new patch to a new location immediately.
3. Repeat this process until you have worn a new patch every week for 3 weeks. Remove the third patch and do not apply a new patch for the fourth week. You may get your period during this time. After the 7 patch-free days, begin the monthly cycle again by applying a new patch.

Can I leave the patch on while I shower?

Yes, you may leave the patch on while you shower, swim, or exercise. The adhesive is strong, but check regularly to make sure it isn't peeling or falling off.

What if the patch falls off?

Put the patch back on right away. If the patch will not stick or if the patch has been off for more than 24 hours, apply a new patch to a new site and use backup birth control, like condoms, for the next 7 days. The day that you placed the new patch is your new patch change day. If this happened during the third patch week, skip the patch-free week and apply a new patch on your patch change day.

What if I forget to change it on time?

Each patch delivers enough hormones to prevent pregnancy for up to 9 days. If you left it on for longer than that, remove it and apply a new patch to a new location right away. Use backup birth control for the next 7 days. Consider using emergency contraception, like Plan B One-Step, if you had sex while the patch was out of hormones.

Is it right for me?

The patch is an effective, convenient, pill-free option that is safe for many people. Some health conditions (history of blood clots, high blood pressure, strokes, heart attack, migraine, smoking, and age over 35) make it unsafe to use the patch, so other methods without estrogen can be used instead. The patch can lead to more hormone in the body than other forms of birth control; keep in mind for those who are sensitive to estrogen or at a high risk of blood clots. The patch may also not be the best option if you have a skin condition, like eczema, or if you are overweight.

What if I want to get pregnant soon?

You can get pregnant as soon as you stop using the patch.

What are some side effects might I experience?

You may experience nausea, headache, breast tenderness, or changes in bleeding patterns. These symptoms usually resolve within 3 months of patch use. Some people experience skin irritation.

When should I call my doctor?

Though rare, there are serious side effects that can occur when using the patch. These include blood clots and strokes. If you experience sudden or severe pain in your stomach, chest, head, or legs with or without dizziness, nausea, vomiting, difficulty breathing, or changes in vision or mental status, call your health care provider right away or get to an emergency room.

Where can I find a reproductive health clinic?

Family Planning Clinic Locator
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The ring is a method of hormonal birth control in the form of a flexible plastic ring that is inserted into the vagina, where it stays in for 3 weeks and out for one week. There are 2 birth control rings: NuvaRing and the new Annovera. The ring does NOT protect against sexually transmitted diseases (STDs).

How does it work?

Hormones are slowly released from the ring and absorbed into the body through the vaginal lining. Estrogen and progestin work together to prevent pregnancy by preventing the release of an egg.

How well does it work?

The ring is 99% effective in preventing pregnancy with perfect use and 91% effective with typical use.

When does it start working?

If you insert the ring within the first 5 days of your period, it will get to work right away. Otherwise you will need to use backup birth control, like condoms, for at least 7 days.

How are NuvaRing and Annovera different?

NuvaRing is thrown away after each use, while Annovera is reusable for an entire year (13 cycles). Because Annovera is reusable, it is important to keep it clean. Before and after each use, wash it with mild soap and water and pat it dry. During the ring-free days, keep it in its storage case away from extreme temperatures. For both rings, avoid using oil-based lubricants.

How do I use it?

1. Wash your hands. Pinch the sides of the ring and insert it into the vagina. (Applicators are available for easier insertion of NuvaRing.) The ring does not need to be in a specific position as long as you are comfortable and it doesn't feel like it will slip out. It is normal to not feel it once it's in place. Leave it in for 3 weeks.
2. After the 3 weeks, wash your hands and remove the ring. Hook a finger under the rim of the ring and pull it out. Place it into the resealable foil pouch that it came in and throw it away. Next, you will have 7 ring-free days. You can expect your period during this time.
3. After those 7 days, repeat the cycle with a new ring. It is okay to insert the new ring if you are still on your period. You can use tampons and have sex with the ring in.

What if I forget to change NuvaRing on time?

The NuvaRing has enough hormones to effectively prevent pregnancy for 4 weeks. If you have left it in for longer than 4 weeks, verify that you are not pregnant and insert a new ring, skipping the ring-free week. Use a backup method of birth control for the next 7 days.

What if I forget to change Annovera on time?

If Annovera is left in for more than 21 days, remove it for a total of 7 days and then reinsert it to get back on schedule for 21 days. Use a backup method of birth control for the next 7 days. Consider using emergency contraception if you had sex during the time the ring was out of hormones.

Is it right for me?

The ring is an effective, convenient, pill-free option that is safe for many people. Both rings are latex-free and safe for those with a latex allergy. Some health conditions (history of blood clots, high blood pressure, stroke, heart attack, migraine, smoking, and age over 35) make it unsafe to use the ring, so other methods (without estrogen) can be used instead. Another important factor is comfort with using a vaginal product.

What if I want to get pregnant soon?

You can get pregnant as soon as you stop using the ring.

What are some side effects I might experience?

When starting the ring, you may experience nausea, headache, breast tenderness, or changes in weight, mood, sex drive, or bleeding. Typically, these resolve within 3 months. You may notice more vaginal discharge, which is harmless. If you have vaginal irritation or discharge that is clumpy, smelly, and colored, see your doctor as these can be signs of an infection.

When should I call my doctor?

Rare but serious side effects can occur with the ring, such as blood clots and strokes. If you experience sudden and/or severe pain in your stomach, chest, head, or legs with or without dizziness, nausea, vomiting, difficulty breathing, or changes in vision or mental status, call your health care provider right away and/or get to an emergency room.

Where can I find a reproductive health clinic?

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The Shot



The shot is a method of hormonal birth control in the form of a shot given every 3 months. It contains only one hormone, a progestin. It is known by the brand name Depo-Provera (given as an injection into muscle) and Depo-SubQ Provera (given as an injection into fat). The shot does NOT protect against sexually transmitted diseases (STDs).

How does it work?

The progestin in the shot prevents pregnancy by preventing the release of an egg, thickening cervical mucus, and thinning the lining of the uterine wall. All these events make it difficult to get pregnant.

How well does it work?

When used correctly, the shot is more than 99% effective in preventing pregnancy, but getting it late every once in a while is common, so the shot is 94% effective with typical use.

How do I take it?

Depo-Provera is administered by a healthcare provider every 12 weeks. It is injected into the muscle of the upper arm or buttock. You can give yourself the Depo-SubQ Provera by injecting into the fat right under the skin of the abdomen or thigh. Use backup contraception, like condoms, for 7 days after the first injection to give the hormone time to start working.

Depo-SubQ Provera

1. Wash your hands and pick an area you'd like to inject (thigh or stomach). Clean it with an alcohol wipe and allow to dry.
2. Shake the medication in the syringe, and attach the needle.
3. Pinch the section of skin where you will inject.
4. Stick the needle in at an angle and inject slowly for 5-7 seconds until the plunger is fully depressed.
5. Pull the needle out and engage the safety shield until you hear a click.
6. Throw the needle and syringe away in a sharps container.
7. Apply pressure to the injection spot.

What if I forget to get it on time?

The shot is thought to be effective for up to 15 weeks. If it's been more than 15 weeks since your last shot, make sure you are not pregnant before getting your next one, and use backup birth control, like condoms, for 7 days and repeat a pregnancy test 2 weeks later. Consider using emergency contraception if you had unprotected sex more than 15 weeks after your last shot.

Is it right for me?

The shot is an effective, private, convenient, and pill-free method of birth control that is safe for most people. It is a safe option for those who cannot take birth control that contains estrogen, like the pill, patch, and ring. It is also one of the more effective birth control options if you are overweight. It is safe to use while breastfeeding. Other important factors to consider are personal comfort with receiving or giving injections (for Depo-SubQ Provera) as well as the ability to remember scheduling shots every 12 weeks.

What if I want to get pregnant soon?

The shot may not be the best option if you want to get pregnant in the next year. On average, it takes 10 months to become pregnant after the last shot.

What are some side effects I might experience?

The most common side effect is irregular bleeding such as spotting. This usually resolves after the first 6-12 months of use. Some users stop getting periods altogether after 2-3 shots. The shot can also cause weight gain and reversible bone weakness, as well as headaches, stomach pain, dizziness, and weakness. Rarely, users experience changes in mood, sex drive, appetite, hair, and skin.

When should I call my doctor?

Though rare, there are serious side effects that can occur when using the pill. These include blood clots, heart attacks, and strokes. If you experience sudden and/or severe pain in your stomach, chest, head, or legs with or without dizziness, nausea, vomiting, difficulty breathing, or changes in vision or mental status, call your healthcare provider right away and/or get to an emergency room.

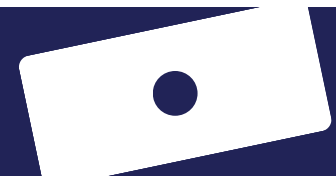
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Emergency Contraception Pill



Emergency contraception (EC) is a method of birth control that is used up to 5 (ideally 3) days after unprotected sex to prevent pregnancy. EC pills do NOT protect against sexually transmitted diseases (STDs).

There are 2 types of EC pills:

- Plan B One-Step (levonorgestrel) and its generics Next Choice, My Way, and Preventeza: progestin hormone; available over-the-counter or by prescription
- Ella (ulipristal acetate): hormone blocker; available by prescription only

How does it work?

EC pills prevent pregnancy by delaying ovulation, the release of an egg. Track your cycle with a calendar to determine if you have ovulated yet (if you are close to your next period); if you have, EC pills may not work.

How well does it work?

Using EC lowers your risk of pregnancy by 58-94%, depending on what type of EC you use, how quickly you take it, your weight, and where you are in your cycle.* It can be taken up to 5 days after unprotected sex, but it works better the sooner you take it. In general, EC pills are not as effective as regular forms of birth control like the pill, patch, ring, shot, or IUD.

How do I take it?

Take EC as soon as possible after having sex that was unprotected or if you suspect your birth control did not work (recently missed pills, broken condom, etc.). If you throw up within 2 hours of taking an EC pill, take another dose. Anti-nausea medicine can be taken an hour before to prevent this from happening.

*The copper IUD can be used as EC if inserted within 5 days of unprotected sex. It is more effective than the pill options, regardless of your weight.

What should I NOT do?

- Do not have unprotected sex after taking EC. You'll need another form of birth control for future sex.
- Do not take the 2 different types of EC together. They might cancel each other out.
- Do not use regular, hormonal birth control as emergency contraception.

What side effects might I experience?

Most people don't experience any side effects. Headache and nausea are possible. EC can also cause your period to come later than expected.

What if I want to get pregnant soon?

You can get pregnant right after taking an EC pill if you stop all other forms of birth control. If a pregnancy has already happened, EC pills will not harm the developing fetus or end the pregnancy.

When should I call my doctor?

Seek medical attention if you think you are pregnant after taking EC pills.

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How to Determine the Best EC Pill for You

	Plan B One-Step (levonorgestrel)	Ella (ulipristal acetate)
Overweight (BMI over 30 kg/m ²)		✓
Normally use hormonal birth control	✓	
Had unprotected sex more than 72 hours ago		✓
Breastfeeding	✓	