






# Contraception

Discussion about contraception is a common reason for encounter in general practice, but such consultations are often lengthy and complex. It is important that registrars feel comfortable discussing the breadth of contraceptive options with their patients and negotiating the best approach. Registrars will have different experiences of contraception experiences, both personal and professional, which is likely to influence their approach to prescribing.

<p><b>TEACHING AND LEARNING AREAS</b></p> 	<ul style="list-style-type: none"> <li>• Range of contraceptive options available</li> <li>• <a href="#">WHO Medical Eligibility Criteria for Contraceptive Use</a></li> <li>• Advantages, disadvantages, side effects, use, absolute and relative contraindications, risks and efficacy of common contraceptive methods</li> <li>• Managing common issues associated with OCPs and other contraceptives</li> <li>• Other elements of the contraception discussion – STI prevention and screening, cervical screening etc.</li> <li>• Use of emergency contraception</li> </ul>				
<p><b>PRE-SESSION ACTIVITIES</b></p> 	<ul style="list-style-type: none"> <li>• Read the AFP article <a href="#">Common Issues and Practical suggestions in Contraception</a></li> <li>• Read <a href="#">Comparison of Contraceptive Methods and efficacy</a></li> <li>• Registrar to review the files of a couple of recent encounters for contraception discussion</li> </ul>				
<p><b>TEACHING TIPS AND TRAPS</b></p> 	<ul style="list-style-type: none"> <li>• The contraception consultation provides an excellent opportunity to discuss other preventive health issues e.g. drugs and alcohol, screening, STI prevention</li> <li>• Confidentiality is a critical issue, especially for adolescents</li> <li>• Choose a few pills and become familiar with them</li> <li>• Check the blood pressure before starting the pill, and consider CV risk in older patients</li> <li>• Never assume that the previous prescriber has comprehensively discussed side effects, use, absolute and relative contraindications, risks etc.</li> </ul>				
<p><b>RESOURCES</b></p> 	<table border="1"> <tbody> <tr> <td data-bbox="325 1621 432 1865"><b>Read</b></td> <td data-bbox="432 1621 1495 1865"> <ul style="list-style-type: none"> <li>• <a href="#">Family Planning NSW Resources</a></li> <li>• <a href="#">RANZCOG Guidelines</a></li> <li>• Family Planning Handbook on Contraception</li> <li>• RANZCOG Overviews: <a href="#">LARCS</a> <a href="#">COC</a> <a href="#">Mirena</a></li> <li>• <a href="#">Emergency Contraception</a> - RANZCOG</li> <li>• <a href="#">Evidence on VTE in COC</a> - NPS MedicineWise</li> </ul> </td> </tr> <tr> <td data-bbox="325 1865 432 1926"><b>Listen</b></td> <td data-bbox="432 1865 1495 1926"><a href="#">Bits and Bumps on LARCS</a></td> </tr> </tbody> </table>	<b>Read</b>	<ul style="list-style-type: none"> <li>• <a href="#">Family Planning NSW Resources</a></li> <li>• <a href="#">RANZCOG Guidelines</a></li> <li>• Family Planning Handbook on Contraception</li> <li>• RANZCOG Overviews: <a href="#">LARCS</a> <a href="#">COC</a> <a href="#">Mirena</a></li> <li>• <a href="#">Emergency Contraception</a> - RANZCOG</li> <li>• <a href="#">Evidence on VTE in COC</a> - NPS MedicineWise</li> </ul>	<b>Listen</b>	<a href="#">Bits and Bumps on LARCS</a>
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<p><b>FOLLOW UP/ EXTENSION ACTIVITIES</b></p> 	<ul style="list-style-type: none"> <li>• Registrar to spend a session at the local Family Planning Clinic if available</li> <li>• Consider undertaking further training through Family Planning</li> <li>• OSCE case under exam conditions</li> <li>• Role play a patient with complex medical problems e.g. previous DVT, significant depression, presenting for contraceptive advice</li> </ul>				

# Contraception

## OSCE Case

### INSTRUCTIONS FOR SUPERVISOR

You are Katie, a 25 year old receptionist, who presents for a repeat OCP script. You have not been to the practice before.  
**Story**

- You are visiting the region from interstate and realise that you have nearly run out of your pill.
- You have been taking Levlen for about 5 years, with no problems
- Your periods are regular with no IMB/PCB
- You have a regular partner of 6 years and have no concerns about STIs
- You had a pap smear 7 months ago which was normal
- You have a history of infrequent migraine, but the last couple were associated with an aura and visual disturbance – **ONLY TO BE MENTIONED IF THE REGISTRAR ASKS SPECIFICALLY ABOUT MIGRAINE**
- You did not seek help for this at the time and have no idea that it is of concern in relation to the pill
- Otherwise you have no significant medical problems
- You don't smoke or drink alcohol
- You use no illicit drugs

#### Assess

- Communication skills – patient centredness, rapport

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- History taking – OCP side effects, use, contraindications, risks

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- Management – cease pill, alternative contraception

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- Follow-up and safety netting

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# Contraception

## OSCE Case

### INSTRUCTIONS TO CANDIDATE

Katie is a 25 year old woman who has never attended your practice. She has seen the practice nurse and some basic information has been collected.

**You have eight (8) minutes to:**

- take a focused history
- outline management plan.

**Physical examination is not required.**

**Background:**

- Receptionist
- Nil alcohol
- Non-smoker
- No allergies
- BP 121/69

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