



## REQUEST FOR A CONTRACEPTIVE SKIN PATCH (TRANSDERMAL CONTRACEPTIVE SYSTEM)

### What is the contraceptive skin patch?

The contraceptive skin patch, or patch, is a birth control method that a woman puts onto her skin once a week to prevent pregnancy. The patch is the size of a matchbook. It is thin, smooth, and beige.

### How does the patch work?

The patch works very much like birth control pills. It contains the same hormones (estrogen and progestin) found in birth control pills and releases these hormones into a woman's bloodstream at the same rate as the pill. The hormones work together to:

- stop the ovary from releasing an egg every month;
- make it harder for the sperm to enter the cervix;
- make it harder for the egg to implant in the uterus.

When the patch is used correctly, it works as well as birth control pills to prevent pregnancy. For every 1000 women using the patch, only about 4 or 5 women per year will get pregnant.

The patch may not work as well to prevent pregnancy if you are taking certain kinds of medications. Let your healthcare provider know about any medications you are taking. The patch may also not work as well to prevent pregnancy if you weigh more than 198 pounds.

### Who can use the patch?

Women of any reproductive age can use the patch, except women who:

- are pregnant or have had a baby in the last three weeks;
- are breastfeeding during the first six weeks after having a baby;
- have high blood pressure;
- have had breast cancer;
- have a history or family history of blood clots;
- are 35 years of age or older and smoke;
- have a history of heart disease or stroke;
- have a history of severe migraines;
- have complicated diabetes;
- have gall bladder disease; or
- have liver tumors, active hepatitis, jaundice, or severe cirrhosis.

If you are a teen and you decide to use the patch, we suggest that you talk to your family about it.

### How is the patch used?

The patch is used on a 28-day cycle, similar to birth control pills. A patch is worn for 7 days, then removed and replaced with a new patch. Every new patch should be applied on the same day of the week. After using three patches in a row (for three weeks) no patch is worn during

the fourth week. This "patch-free" week allows you to get your period. After the "patch-free" week, begin using a new box of patches. Continue this pattern.

### Where should I wear the patch?

You have four choices of where to put the patch:

- 1) your stomach;
- 2) your upper outer arm;
- 3) your upper shoulder or chest (but not on your breasts) and
- 4) your buttocks (rear end).

When replacing an old patch with a new one, you should not stick the new patch on the same place on the skin as the old one. This is to help prevent skin rash or irritation. The patch is designed to stay in place even when you exercise (including swimming), bathe, or sweat. However, do not put creams or oils (such as suntan lotion) under or near the patch, as this can make it more likely to fall off.

### What should I do if the patch becomes loose or falls off?

First, you should try to reattach it. If the patch is no longer sticky, you should put on a new patch. The new patch should be worn until the next "patch change day," and then replaced.

If the patch was off your skin for more than 24-hours, you should begin a new cycle of patches (three weeks of patches and then one "patch-free" week). You should use another form of birth control, such as condoms, with the patch for the first week of the new cycle.

### What are the side effects of the patch?

The side effects for the patch are similar to those for oral contraceptive pills. Side effects may be different for each woman. During the first month of use, about one in five women may experience spotting or breakthrough bleeding between periods. This is not harmful and usually goes away after the third month of use. Other side effects reported by women include headache, nausea, skin rash or irritation where the patch is placed, and breast discomfort.

### Does the contraceptive skin patch protect against STDs and AIDS?

The patch will not protect you against HIV, the virus that causes AIDS, or against sexually transmitted diseases (STDs). Women at risk of STDs or HIV/AIDS should use a female condom or male latex condom in addition to the patch to prevent disease. If you or your partner is allergic to latex, use polyurethane condoms. Your healthcare provider can help you decide if you are at risk of STDs or HIV/AIDS.

**If you have questions about side effects or how to use the patch, don't stop using it. Call your healthcare provider right away.**

*(continued)*

Call your healthcare provider if you have any of the following ACHES:

- A - Abdominal pain (severe), yellow skin or eyes
- C - Chest pain (severe cough, shortness of breath, or pain when breathing in)
- H - Headache, dizziness, weakness, or numbness, especially if on only one side of the head
- E - Eye problems (blurred vision or loss of vision), speech problems
- S - Severe leg pain or swelling

**I have read and understand the information above.**

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**The client has been counseled, provided with the appropriate informational material, and understands the content of both.**

Counselor/Provider signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print counselor/provider name: \_\_\_\_\_

Name of patient: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Chart #: \_\_\_\_\_

Interpreter: \_\_\_\_\_