3.1A U.S. MEDICAL ELIGIBILITY CHART – ENGLISH

SUMMARY CHART OF U.S. MEDICAL ELIGIBILITY CRITERIA FOR CONTRACEPTIVE USE

Condition	Sub-Condition	Cu-IUD		LNG-IUD		Implant	DMPA	POP CHC	CHC
		I	C	I	C	I C	I C	I C	I C
Age		Menarche to <20 yrs:**2**		Menarche to <20 yrs:**2**		Menarche to <18 yrs:**1**	Menarche to <18 yrs:**2**	Menarche to <18 yrs:**1**	Menarche to <40 yrs:**1**
		≥20 yrs:**1**		≥20 yrs:**1**		18-45yrs:**1**	18-45yrs:**1**	18-45yrs:**1**	≥40 yrs:**1**
						>45 yrs:**1**	>45 yrs:**2**	>45 yrs:**1**	
Anatomical abnormalities	a) Distorted uterine cavity	4		4					
	b) Other abnormalities	2		2					
Anemias	a) Thalassemia	2		1		1	1	1	1
	b) Sickle cell disease‡	2		1		1	1	1	2
	c) Iron-deficiency anemia	2		1		1	1	1	1
Benign ovarian tumors	*(including cysts)*	1		1		1	1	1	1
Breast disease	a) Undiagnosed mass	1		2		2*	2*	2*	2*
	b) Benign breast disease	1		1		1	1	1	1
	c) Family history of cancer	1		1		1	1	1	1
	d) Breast cancer‡								
	i) Current	1		4		4	4	4	4
	ii) Past and no evidence of current disease for 5 years	1		3		3	3	3	3
Breastfeeding	a) <21 days postpartum					2*	2*	2*	4*
	b) 21 to <30 days postpartum								
	i) With other risk factors for VTE					2*	2*	2*	3*
	ii) Without other risk factors for VTE					2*	2*	2*	3*
	c) 30-42 days postpartum								
	i) With other risk factors for VTE					1*	1*	1*	3*
	ii) Without other risk factors for VTE					1*	1*	1*	2*
	d) >42 days postpartum					1*	1*	1*	2*
Cervical cancer	*Awaiting treatment*	4	2	4	2	2	2	1	2
Cervical ectropion		1		1		1	1	1	2
Cervical intraepithelial neoplasia		1		2		2	2	1	2
Cirrhosis	a) Mild *(compensated)*	1		1		1	1	1	1
	b) Severe‡ *(decompensated)*	1		3		3	3	3	4
CirCystic fibrosis‡		1*		1*		1*	2*	1*	1*
Deep venous thrombosis (DVT)/Pulmonary embolism (PE)	a) History of DVT/PE, not receiving anticoagulant therapy								
	i) Higher risk for recurrent DVT/PE	1		2		2	2	2	4
	ii) Lower risk for recurrent DVT/PE	1		2		2	2	2	3
	b) Acute DVT/PE	2		2		2	2	2	4
	c) DVT/PE and established anticoagulant therapy for at least 3 months								
	i) Higher risk for recurrent DVT/PE	1		2		2	2	2	4
	ii) Lower risk for recurrent DVT/PE	1		2		2	2	2	3
	d) Family history *(first-degree relatives)*	1		1		1	1	1	2
	e) Major surgery								
	i) With prolonged immobilization	1		2		2	2	2	4
	ii) Lower risk for recurrent DVT/PE	1		1		1	1	1	2
	f) Minor surgery without immobilization	1		1		1	1	1	1
Depressive disorders		1*		1*		1*	1*	1*	1*

Key

1 No restriction (method can be used)

2 Advantages generally outweigh theoretical or proven risks

3 Theoretical or proven risks usually outweigh the advantages

4 Unacceptable health risk (method not to be used)

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		I	C	I	C	I	C	I	C	I	C	I	C
Diabetes	a) History of gestational disease	1		1		1		1		1		1	
	b) Nonvascular disease												
	i) Non-insulin dependent	1		2		2		2		2		2	
	ii) Insulin dependent	1		2		2		2		2		2	
	c) Nephropathy/retinopathy/neuropathy‡	1		2		2		3		2		3/4*	
	d) Other vascular disease or diabetes of >20 years' duration‡	1		2		2		3		2		3/4*	
Dysmenorrhea	Severe	2		1		1		1		1		1	
Endometrial cancer‡		4	2	4	2	1		1		1		1	
Endometrial hyperplasia		1		1		1		1		1		1	
Endometriosis		2		1		1		1		1		1	
Epilepsy‡	*(see also Drug Interactions)*	1		1		1*		1*		1*		1*	
Gallbladder disease	a) Symptomatic												
	i) Treated by cholecystectomy	1		2		2		2		2		2	
	ii) Medically treated	1		2		2		2		2		3	
	iii) Current	1		2		2		2		2		3	
	b) Asymptomatic	1		2		2		2		2		2	
Gestational trophoblastic disease‡	a) Suspected GTD (immediate postevacuation)												
	i) Uterine size first trimester	1*		1*		1*		1*		1*		1*	
	ii) Uterine size second trimester	2*		2*		1*		1*		1*		1*	
	b) Confirmed GTD												
	i) Undetectable/non-pregnant ß-hCG levels	1*	1*	1*	1*	1*		1*		1*		1*	
	ii) Decreasing ß-hCG levels	2*	1*	2*	1*	1*		1*		1*		1*	
	iii) Persistently elevated ß-hCG levels or malignant disease, with no evidence or suspicion of intrauterine disease	2*	1*	2*	1*	1*		1*		1*		1*	
	iv) Persistently elevated ß-hCG levels or malignant disease, with evidence or suspicion of intrauterine disease	4*	2*	4*	2*	1*		1*		1*		1*	
Headaches	a) Nonmigraine (mild or severe)	1		1		1		1		1		1*	
	b) Migraine												
	i) Without aura (includes menstrual migraine)	1		1		1		1		1		2*	
	ii) With aura	1		1		1		1		1		4*	
History of bariatric surgery‡	a) Restrictive procedures	1		1		1		1		1		1	
	b) Malabsorptive procedures	1		1		1		1		3		COCs: 3 P/R: 1	
History of cholestasis	a) Pregnancy related	1		1		1		1		1		2	
	b) Past COC related	1		2		2		2		2		3	
History of high blood pressure during pregnancy		1		1		1		1		1		2	
History of Pelvic surgery		1		1		1		1		1		1	
HIV	a) High risk for HIV	2	2	2	2	1		2*		1		1	
	b) HIV infection					1*		1*		1*		1*	
	i) Clinically well receiving ARV therapy	1	1	1	1	If on treatment, see Drug Interactions							
	ii) Not clinically well or not receiving ARV	2	1	2	1	If on treatment, see Drug Interactions							

Abbreviations: C = continuation of contraceptive method; CHC = combined hormonal contraception (pill, patch, and ring); COC = combined oral contraceptive; Cu-IUD = copper-containing intrauterine device; DMPA = depot medroxyprogesterone acetate; I = initiation of contraceptive method; LNG-IUD = levonorgestrel-releasing intrauterine device; NA = not applicable; POP = progestin-only pill; P/R = patch/ring; ‡ Condition that exposes a woman to increased risk as a result of pregnancy. *Please see the complete guidance for a clarification to this classification: www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm.

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		I	C	I	C	I	C	I	C	I	C	I	C
Hypertension	a) Adequately controlled hypertension	1*		1*		1*		2*		1*		3*	
	b) Elevated blood pressure levels *(properly taken measurements)*												
	i) Systolic 140-159 or diastolic 90-99	1*		1*		1*		2*		1*		3*	
	ii) Systolic ≥160 or diastolic ≥100‡	1*		2*		2*		3*		2*		4*	
	c) Vascular disease	1*		2*		2*		3*		2*		4*	
Inflammatory bowel disease	*(Ulcerative colitis, Crohn's disease)*	1		1		1		2		2		2/3	
Ischemic heart disease‡	Current and history of	1		2	3	2	3	3		2	3	4	
Known thrombogenic mutations‡		1*		2*		2*		3*		2*		4*	
Liver tumors	a) Benign												
	i) Focal nodular hyperplasia	1		2		2		2		2		2	
	ii) Hepatocellular adenoma‡	1		3		3		3		3		4	
	b) Malignant‡ (hepatoma)	1		3		3		3		3		4	
Malaria		1		1		1		1		1		1	
Multiple risk factors for atherosclerotic cardiovascular disease	(e.g., older age, smoking, diabetes, hypertension, low HDL, high LDL, or high triglyceride levels)	1		2		2*		3*		2*		2/3	
Multiple sclerosis	a) With prolonged immobility	1		1		1		2		1		3	
	b) Without prolonged immobility	1		1		1		2		1		1	
Obesity	a) Body mass index (BMI) ≥30 kg/m2	1		1		1		1		1		2	
	b) Menarche to <18 years and BMI ≥ 30 kg/m^2	1		1		1		2		1		2	
Ovarian cancer‡		1		1		1		1		1		1	
Parity	a) Nulliparous	2		2		1		1		1		1	
	b) Parous	1		1		1		1		1		1	
Past ectopic pregnancy		1		1		1		1		2		1	
Pelvic inflammatory disease	a) Past												
	i) With subsequent pregnancy	1	1	1	1	1		1		1		1	
	ii) Without subsequent pregnancy	2	2	2	2	1		1		1		1	
	b) Current	4	2*	4	2*	1		1		1		1	
Peripartum cardiomyopathy‡	a) Normal or mildly impaired cardiac function)												
	i) <6 months	2		2		1		1		1		4	
	ii) ≥6 months	2		2		1		1		1		3	
	b) Moderately or severely impaired cardiac function	2		2		2		2		2		4*	
Postabortion	a) First trimester	1*		1*		1*		1*		1*		1*	
	b) Second trimester	2*		2*		1*		1*		1*		1*	
	c) Immediate postseptic abortion	4		4		1*		1*		1*		1*	
Postpartum *(nonbreastfeeding women)*	a) <21 days					1		1		1		4	
	b) 21 days to 42 days												
	i) With other risk factors for VTE					1		1		1		3*	
	ii) Without other risk factors for VTE					1		1		1		2	
	c) >42 days					1		1		1		1	
Postpartum (in breastfeeding or nonbreastfeeding women, including cesarean delivery)‡	a) <10 minutes after delivery of the placenta												
	i) Breastfeeding	1*		2*									
	ii) Nonbreastfeeding	1*		1*									
	b) 10 minutes after delivery of the placenta to <4 weeks	2*		2*									
	c) >42 days	1*		1*									
	d) Postpartum sepsis	4		4									

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		I	C	I	C	I	C	I	C	I	C	I	C
Pregnancy		4*		4*		NA*		NA*		NA*		NA*	
Rheumatoid arthritis	a) On immunosuppressive therapy	2	1	2	1	1		2/3*		1		1	
	b) Not on immunosuppressive therapy	1		1		1		2		1		2	
Schistosomiasis	a) Uncomplicated	1		1		1		1		1		1	
	b) Fibrosis of the liver‡	1		1		1		1		1		1	
Sexually transmitted diseases (STDs)	a) Current purulent cervicitis or chlamydial infection or gonococcal infection	4	2*	4	2*	1		1		1		1	
	b) Vaginitis *(including trichomonas vaginalis and bacterial vaginosis)*	2	2	2	2	1		1		1		1	
	c) Other factors relating to STDs	2*	2	2*	2	1		1		1		1	
Smoking	a) Age <35	1		1		1		1		1		2	
	b) Age ≥35, <15 cigarettes/day	1		1		1		1		1		3	
	c) Age ≥35, ≥15 cigarettes/day	1		1		1		1		1		4	
Solid organ transplantation‡	a) Uncomplicated	3	2	3	2	1		1		1		4	
	b) Fibrosis of the liver‡	2		2		2		2		2		2*	
Stroke‡	History of cerebrovascular accident	1		2		2	3	3		2	3	4	
Superficial venous disorders	a) Varicose veins	1		1		1		1		1		1	
	b) Superficial venous thrombosis (acute or history)	1		1		1		1		1		3*	
Systemic lupus erythematosus‡	a) Positive (or unknown) antiphospholipid antibodies	1*	1*	3*		3*		3*	3*	3*		4*	
	b) Severe thrombocytopenia	3*	2*	2*		2*		3*	2*	2*		2*	
	c) Immunosuppressive therapy	2*	1*	2*		2*		2*	2*	2*		2*	
	d) None of the above	1*	1*	2*		2*		2*	2*	2*		2*	
Thyroid disorders	Simple goiter/ hyperthyroid/hypothyroid	1		1		1		1		2		1	
Tuberculosis‡ *(see also Drug Interactions)*	a) Nonpelvic	1	1	1	1	1*		1*		1*		1*	
	b) Pelvic	4	3	4	3	1*		1*		1*		1*	
Unexplained vaginal bleeding	(suspicious for serious condition) before evaluation	4*	2*	4*	2*	3*		3*		2*		2*	
Uterine fibroids		2		2		1		1		2		1	
Valvular heart disease	a) Nonpelvic	1		1		1		1		1		2	
	b) Pelvic	1		1		1		1		1		4	
Vaginal bleeding patterns	a) Irregular pattern without heavy bleeding	1		1	1	2		2		2		1	
	b) Heavy or prolonged bleeding	2*		1*	2*	2*		2*		2*		1*	
Viral hepatitis disease	a) Acute or flare	1		1		1		1		1		3/4	2
	b) Carrier/Chronic	1		1		1		1		1		1	1
Drug Interactions													
Antiretroviral therapy All other ARV's are 1 or 2 for all methods.	Fosamprenavir (FPV)	1/2*	1	1/2*	1	2*		2*		2*		3*	
Anticonvulsant therapy	a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine)	1		1		2*		1*		3*		3*	
	b) Lamotrigine	1		1		1		1		1		3*	
Antimicrobial therapy	a) Broad spectrum antibiotics	1		1		1		1		1		1	
	b) Antifungals	1		1		1		1		1		1	
	c) Antiparasitics	1		1		1		1		1		1	
	d) Rifampin or rifabutin therapy	1		1		2*		1*		3*		3*	
SSRIs		1		1		1		1		1		1	
St. John's wort		1		1		2		1		2		2	

Updated in 2017. This summary sheet only contains a subset of the recommendations from the U.S. MEC. For complete guidance, see: http://www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm. Most contraceptive methods do not protect against sexually transmitted diseases (STDs). Consistent and correct use of the male latex condom reduces the risk of STDs and HIV.