Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use



Condition	Sub-Condition	Cu-IUD	LNG-IUD	Implant	DMPA	POP	CHC	
		I C	I C	I C	I C	I C	I C	
Age		Menarche	Menarche	Menarche	Menarche	Menarche	Menarche	
		to	to	to	to	to	to	
		<20 yrs: 2	<20 yrs: 2	<18 yrs: 1	<18 yrs: 2	<18 yrs: 1	<40 yrs: 1	
		≥20 yrs: 1	≥20 yrs: 1	18-45 yrs: 1	18-45 yrs: 1	18-45 yrs: 1	≥40 yrs: 2	
				>45 yrs: 1	>45 yrs: 2	>45 yrs: 1		
Anatomical	a) Distorted uterine cavity	4	4					
abnormalities	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	1	
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	
Cystic fibrosis [‡]		1*	1*	1*	2*	1*	1*	
Deep venous thrombosis (DVT)/Pulmonary	a) History of DVT/PE, not receiving anticoagulant therapy							
embolism (PE)	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	2	2	2	2	2	4*	
	ii) Lower risk for recurrent DVT/PE	2	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) Without prolonged immobilization	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*	

Condition	Sub-Condition	Cu-	UD	LNG	-IUD	Implant	DMPA	POP	СНС		
		1	С		С	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	2		
	ii) Insulin dependent	1		2	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	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				-	-	-	-	-		
canonadae: disease	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	3		
	b) Asymptomatic	1		2		2	2	2	2		
Gestational trophoblastic	a) Suspected GTD (immediate										
disease [‡]	postevacuation)										
aisease	i) Uterine size first trimester	1	*	1*		1*	1*	1*	1*		
	ii) Uterine size second trimester)*	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	a) Restrictive procedures	1		1		1	1	1	1		
surgery [‡]	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	1*	1	1		
	b) HIV infection	_	_		_	1*	1*	1*	1*		
	i) Clinically well receiving ARV therapy	1	1	1 1		_	eatment, see Drug Interactions				
	ii) Not clinically well or not receiving ARV	_					, ,				
	therapy [‡]	2	1	2 1		If on tr	eatment, se	e Drug Inter	actions		

Key:	
1 No restriction (method can be used)	3 Theoretical or proven risks usually outweigh the advantages
2 Advantages generally outweigh theoretical or proven risks	4 Unacceptable health risk (method not to be used)

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; l=initiation of contraceptive method; LMG-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.

Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use



Condition	Sub-Condition	C	шь	LNG-IUD		lmulant	DMDA	DAR	СНС
Condition			IUD			Implant	DMPA	POP	
		ı	С	ı	С				I C
Hypertension	a) Adequately controlled hypertension		*		1*	1*	2*	1*	3*
	b) Elevated blood pressure levels (properly taken measurements)								
	i) Systolic 140-159 or diastolic 90-99		 *	1*		1*	2*	1*	3*
	ii) Systolic ≥160 or diastolic ≥100 [‡]		*		<u>'</u> 2*				
	c) Vascular disease		*		<u>-</u> 2*			2*	4*
Inflammatory bowel disease	(Ulcerative colitis, Crohn's disease)	1		1				2	2/3*
Ischemic heart disease‡	Current and history of	1		2 3		2 3	3	2 3	4
Known thrombogenic			*		2*		_		
mutations [‡]			1*		2 *	2*	2*	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	ı	2		2*	3*	2*	3/4*
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	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	a) Past								
disease	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 C I C I 1* 2* 1* 2* 3* 2* 2* 3* 2 2 2 3 2* 2* 2* 2 2 2 3 3 3 3 3 3 1 1 1 1 2 1 1 1 1 1	1	3
	b) Moderately or severely impaired cardiac function	2		2					4
Postabortion	a) First trimester		*		1*				1*
	b) Second trimester	2	2*		2*		_	1*	1*
	c) Immediate postseptic abortion	4	1		4	1*	1*	1*	1*
Postpartum	a) <21 days					1	1	1	4
(nonbreastfeeding women)	b) 21 days to 42 days								
women)	i) With other risk factors for VTE					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 non- breastfeeding women, including cesarean	a) <10 minutes after delivery of the placenta								
	i) Breastfeeding	1*		2*					
	ii) Nonbreastfeeding	1*		1*					
delivery)	b) 10 minutes after delivery of the placenta to <4 weeks		2*	2*					
	c) ≥4 weeks	1	 *		1*				
	d) Postpartum sepsis	4	1		4				

Condition	Sub-Condition	Cu-	IUD	LNG-IUD		Implant	DMPA		POP	CHC	
			С	ı	С	I C	П	С	I C	I C	
Pregnancy		4	*	4	*	NA*	N	A*	NA*	NA*	
Rheumatoid	a) On immunosuppressive therapy	2			1	2/3*		1	2		
arthritis	b) Not on immunosuppressive therapy			1		1	2		1	2	
Schistosomiasis	a) Uncomplicated			1		1	1		1	1	
Scriistosorriiasis	b) Fibrosis of the liver [‡]				<u>.</u> 1	1	1		1	1	
Sexually transmitted diseases (STDs)	a) Current purulent cervicitis or chlamydial				i	-		-	-	-	
	infection or gonococcal infection b) Vaginitis (including trichomonas vaginalis	4	2*	4	2*	1	•		1	1	
	and bacterial vaginosis)		2	2	2	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	1	2	
	b) Age ≥35, <15 cigarettes/day	1	1		1	1	•	1	1	3	
	c) Age ≥35, ≥15 cigarettes/day	1	1		1	1	•	1	1	4	
Solid organ	a) Complicated	3	2	3	2	2	2	2	2	4	
transplantation [‡]	b) Uncomplicated	2	2		2	2	2	2	2	2*	
Stroke [‡]	History of cerebrovascular accident	•	1		2	2 3	3	3	2 3	4	
Superficial venous	a) Varicose veins	1	1		1	1	•	1	1	1	
disorders	b) Superficial venous thrombosis (acute or history)	1	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		1	1	1	
Tuberculosis [‡]	a) Nonpelvic	1	1	1	1	1*		1*	1*	1*	
(see also Drug Interactions)	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	2		1	1		1	1	
Valvular heart	a) Uncomplicated	1	1	1		1	1		1	2	
disease	b) Complicated [‡]	1	1		1	1	•	1	1	4	
Vaginal bleeding patterns	a) Irregular pattern without heavy bleeding	1	1	1	1	2	2	2	2	1	
	b) Heavy or prolonged bleeding	2	2*	1*	2*	2*	2	2*	2*	1*	
Viral hepatitis	a) Acute or flare	1	1		1	1	•	1	1	3/4* 2	
	b) Carrier/Chronic	1	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*	2*	3*	
Anticonvulsant therapy	a) Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine)	1	1	,	1	2*		1*	3*	3*	
	b) Lamotrigine	1	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	•			<u>. </u>	2*		- 1*	3*	3*	
SSRIs	, , , , , , , , , , , , , , , , , , ,				<u>.</u> 1	1		I	1	1	
St. John's wort		1		1		2	_	<u>. </u>	2	2	

Updated July 2016. 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.