

How to Be Reasonably Sure a Client is Not Pregnant

The *Checklist on How to Be Reasonably Sure a Client is Not Pregnant* is a simple tool for use by health care providers to determine with reasonable certainty that a woman is NOT pregnant. The checklist is designed for use by both clinical (medical doctors, nurses/midwives, and clinical officers) and non-clinical health care providers (trained community health workers, pharmacists/pharmaceutical technologists, public health officers and public health technicians) in Kenya. Furthermore, the checklist can be used by other health care providers, such as pharmacists, when prescribing certain medications that should be avoided during pregnancy (e.g., certain antibiotics or certain drugs that prevent seizures).

The Ministry of Health, Division of Reproductive Health (DRH), in collaboration with Family Health International (FHI), developed this checklist for use during the client assessment process conducted before provision of family planning services as described in the recently updated *Kenya Family Planning Guidelines for Service Providers* (revised March 2005). According to the guidelines, family planning providers must always determine whether a woman seeking contraceptive services might already be pregnant because women who are currently pregnant do not require contraception. In addition, methods such as IUCDs should never be provided to pregnant women because doing so might lead to septic miscarriage, which is a serious complication. When pregnancy tests are either unavailable or unaffordable, women are often required to wait for their menses to return before they can initiate a contraceptive because providers have to rely on the presence of menses as an indicator that a woman is not pregnant. This checklist addresses the lack of pregnancy tests to rule out pregnancy. It consists of six questions endorsed by the World Health Organization (WHO), each describing a condition that effectively prevents a woman from getting pregnant. Evaluation of the checklist in family planning clinics in Kenya has demonstrated that the tool is very effective in correctly identifying women who are not pregnant. Furthermore, recent studies in Guatemala, Mali, and Senegal have shown that use of these checklists by family planning providers significantly reduced the proportion of clients being turned away due to menstrual status and improved women's access to contraceptive services.

This checklist is part of a series of provider checklists developed for family planning providers in Kenya. The other checklists include the *Checklist for Screening Clients Who Want to Initiate Combined Oral Contraceptives*, the *Checklist for Screening Clients Who Want to Initiate DMPA (or NET-EN)*, and the *Checklist for Screening Clients Who Want to Initiate Use of the Copper IUCD*. For more information about the provider checklists, please visit the Kenya Ministry of Health DRH Web site at www.drh.go.ke.

Explanation of the Questions

The checklist consists of six questions that providers ask clients while taking their medical history. If the client answers "yes" to any of these questions, and there are no signs or symptoms of pregnancy, then a provider can be reasonably sure that the woman is not pregnant.

Women who are in the first seven days of their menstrual cycle, who have had a miscarriage/abortion in the past seven days, or who are in their first four weeks postpartum are protected from unplanned pregnancy because the possibility of ovulation in each of these situations is extremely low. With the IUD, the possibility of pregnancy is very low before day 12 of the menstrual cycle because of the additional contraceptive effectiveness of the copper IUD. Women who satisfy the lactational amenorrhea method criteria (women who are in their first six months postpartum, are fully or nearly-fully breastfeeding, and are amenorrheic) are protected from unplanned pregnancy because of the effects of lactational amenorrhea on the reproductive cycle.

Likewise, women who consistently and correctly use a reliable contraceptive method are effectively protected from pregnancy, as are those who have abstained from sexual intercourse since their last menstrual period.

Sources:

- 1 Technical Guidance/Competence Working Group *Recommendations for Updating Selected Practices in Contraceptive Use: Volume II*. Washington: U.S. Agency for International Development, 1997.
- 2 Stanback J, Qureshi Z, Nutley T, Sekadde-Kigonda C. Checklist for ruling out pregnancy among family-planning clients in primary care. *Lancet* 1999;354(August 14):566.
- 3 Stanback, John, Diabate Fatimata, Dieng Thierno, Duarter de Morales, Cummings Stirling, and Traore Mahamadou. Ruling Out Pregnancy Among Family Planning Clients: The Impact of a Checklist in Three Countries. *Studies in Family Planning* 2005;36[4]:311-315.



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Ask the client questions 1–6. As soon as the client answers **YES** to *any question*, stop, and follow the instructions.

NO	1. Did you have a baby less than 6 months ago, are you fully or nearly-fully breastfeeding, and have you had no menstrual period since then?	YES	
NO	2. Have you abstained from sexual intercourse since your last menstrual period or delivery?	YES	➔
NO	3. Have you had a baby in the last 4 weeks?	YES	➔
NO	4. Did your last menstrual period start within the past 7 days (or within the past 12 days if you are planning to use an IUD)?	YES	➔
NO	5. Have you had a miscarriage or abortion in the past 7 days? (or within the past 12 days if you are planning to use an IUD)?	YES	➔
NO	6. Have you been using a reliable contraceptive method consistently and correctly?	YES	➔

If the client answered **NO** to *all of the questions*, pregnancy cannot be ruled out. Client should await menses or use a pregnancy test.

If the client answered **YES** to *at least one of the questions* and she is free of signs or symptoms of pregnancy, provide client with desired method.



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