Encounter level data is required for <u>every</u> family planning patient and physician and nurse visit (including, pregnancy test, emergency contraception, supply visit, method problem, etc.) either face-to-face in a Title X service site or virtual using telehealth technology.

This document provides an overview of clinical questions needed for FPAR 2.0 reporting. Every question is not required for each encounter but will be expected when clinically indicated.

**Discuss contraception or pregnancy prevention during your visit**: This question relies on patients own identification of their contraceptive need. This question aids in creating and strengthening patient-centered contraceptive care pathways and identifying gaps in quality, with a focus on centering patients' needs and preferences in contraceptive provision and counseling.

"Do you want to talk about contraception or pregnancy prevention during your visit today"

- o Yes
- No I do not want to talk about contraception today because
- I am here for something else
- No This question does not apply to me/I prefer not to answer
- No I am already using contraception
- O No I am unsure or don't want to use contraception
- O No I am hoping to become pregnant in the near future

**Pregnancy Intention:** A patient's intention or desire in the next year to either become pregnant or prevent a future pregnancy. This includes male patients seeking pregnancy with a female partner. Pregnancy intention may be used to help improve preconception health screenings and decisions, such as determining an appropriate contraceptive method, taking folic acid, or avoiding toxic exposures such as alcohol, tobacco, and certain medications.

"Do you want to become pregnant (in the next 12 months)?"

- Yes, I want to become pregnant
- I'm OK either way
- No, I don't want to become pregnant
- Unsure

**Contraceptive method at intake reported at intake:**— At intake of patient encounter, their reported contraceptive method(s) used in the last sexual encounter. If the patient reports that they are using more than one contraceptive method, report the most effective one as the primary method. See complete contraceptive list on last page.

**Reason for no contraceptive method reported at intake:** The reason patient reported no contraceptive method used in last sexual encounter.

- Abstinence
- Same sex partner
- o Other
- o Sterile for non-contraceptive reasons
- Seeking pregnancy

| Contrace | otive | counseling | was | provided |
|----------|-------|------------|-----|----------|
|          |       |            |     |          |

- o Yes
- o No

#### Counseling to achieve pregnancy was provided:

- Yes
- o No

Tests performed (Pap, HPV, Chlamydia, Gonorrhea, HIV, and Syphilis)

- Yes
- o No

**Contraceptive method reported at exit**: The contraceptive method adopted or continued use by the patient at the end of their visit after counseling and assessment by provider. If the patient reports that they plan to use more than one contraceptive method, report the most effective one as the primary method.

**Reason for no contraceptive method reported at exit**: The reported reason at the end of the patient's visit for not using a contraceptive method.

- Abstinence
- Same sex partner
- o Other
- Sterile for non-contraceptive reasons
- Seeking pregnancy

**How contraceptive method was provided:** The method for how the birth control was provided to the patient at end of an encounter.

- o Provided on site
- o Referral
- o Prescription

**Systolic blood pressure** 

**Diastolic blood pressure** 

**Body Height** 

**Body Weight** 

<sup>\*</sup>If your agency regularly orders a reflex-based pap tests (where an HPV test is done when indicated), choose "yes" for both Pap and HPV.

<sup>\*</sup>This question can be left blank if patient did not change or start a method.

**Tobacco Smoking Status:** Tobacco smoking status represents a person's smoking behavior. These statuses represent CDC's preferred (sometimes required) responses for recording smoking status.

- o Current every day smoker
- o Current some day smoker
- o Former smoker
- Never smoker
- o Smoker, current status unknown
- Unknown if ever smoked
- o Heavy tobacco smoker
- o Light tobacco smoker

#### **Accepted Contraceptive Methods**

| Implantable rod (Nexplanon)                          |
|--|
| IUD with Progestin (Mirena, Skyla, LILETTA, Kyleena) |
| IUD copper (Paragard)                                |
| IUD unspecified                                      |
| Female sterilization                                 |
| Vasectomy  |
| Injectables (Depo-Provera)                           |
| Combined oral contraceptive pills                    |
| Progestin only contraceptive pills                   |
| Contraceptive patch                                  |
| Vaginal ring   |
| Male condom  |
| Diaphragm or cervical cap                            |
| Female condom  |
| Withdrawal   |
| Spermicide   |
| Contraceptive Gel                                    |
| Sponge   |
| Fertility awareness-based methods                    |
| Lactational amenorrhea method                        |
| Male relying on female method                        |
| Emergency contraception                              |
| Decline to answer                                    |
| None   |
|  |