

## 2.1 CERVICAL CAP

TITLE	DESCRIPTION
DEFINITION:	The cervical cap is a non-latex device, made of durable silicon rubber that fits over the cervix. The cervical cap acts as a mechanical barrier to sperm and is used in conjunction with a spermicide. The cervical cap is distributed exclusively in the United States as FemCap. Availability may vary. It is by Rx only.
SUBJECTIVE:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. LMP.</li> <li>2. Medical, sexual and contraceptive use update, as appropriate.</li> </ol> <p><b>Must Exclude:</b></p> <ol style="list-style-type: none"> <li>1. History of toxic shock syndrome.</li> <li>2. Allergies to the device or spermicide.</li> <li>3. Unresolved abnormal pap smear, or cervical cancer.</li> <li>4. Postpartum less than 6 weeks. Uterus must be completely involuted.</li> <li>5. Less than 6 weeks post second trimester abortion.</li> <li>6. High risk for HIV. Repeated and high dose use of spermicide and increase risk of genital lesions and thus increase risk for HIV infection.</li> <li>7. Antiretroviral therapy.</li> <li>8. HIV or AIDS infection.</li> </ol>
OBJECTIVE:	<p><b>Must Include:</b></p> <ol style="list-style-type: none"> <li>1. Speculum exam to judge size and contour of the cervix, and to evaluate for vaginal or cervical abnormalities.</li> </ol> <p><b>Must Exclude:</b></p> <ol style="list-style-type: none"> <li>1. Vaginal abnormalities which would interfere with proper placement or retention of the cervical cap.</li> <li>2. Cervical surface anomalies which would inhibit cap fit.</li> <li>3. Vaginal or cervical infection, which could complicate cap use.</li> </ol>
LABORATORY:	<p><b>Must Include:</b></p> <ol style="list-style-type: none"> <li>1. Pap smear in accordance with current frequency recommendations. The cap should not be used if client has untreated cervical intraepithelial neoplasia or is awaiting cervical cancer treatment.</li> </ol> <p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Vaginal/cervical infection testing, as indicated.</li> <li>2. HIV testing, as indicated.</li> </ol>
ASSESSMENT:	Candidate for cervical cap.
PLAN:	<ol style="list-style-type: none"> <li>1. Fit appropriate sized cap, assessing coverage of cervix, and inability to dislodge. The FemCap is held in place by the muscular walls of the vagina and does not have to be snug around the cervix or hinge behind the pubic bone. Three sizes are available with internal diameter of 22mm, intended for women who have NEVER been pregnant; 26mm, intended for women who have been pregnant (even for 2 weeks) and did not have a vaginal delivery; and 30mm, intended for</li> </ol>

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	<p>women who have had a vaginal delivery of a full term baby.</p> <ol style="list-style-type: none"> <li>2. Review client education form.</li> <li>3. Offer advance prescription emergency contraceptive pills.</li> <li>4. Listing of pharmacies that carry <a href="http://www.FemCap.com">FemCap</a> (www.FemCap.com).</li> </ol>
EDUCATION:	<ol style="list-style-type: none"> <li>1. Provide client education handout(s). Review manufacturer's inserts. Review symptoms, complications, and danger signs.</li> <li>2. Review safer sex education, as appropriate.</li> <li>3. Epithelial disruption can be associated with spermicide dose, delivery system or frequency of use. Caution clients who use spermicide routinely as this increases the risk for HIV infection and increases the risk of HIV transmission to unaffected partner(s) if she is HIV positive.</li> <li>4. Inform client that use of the cervical cap is contraindicated during menses.</li> <li>5. Can be inserted up to 6 hours prior to sexual activity. Must be left in place for at least 6 hours after intercourse and no longer than 48 hours.</li> <li>6. RTC annually (refrain from use 2-3 days prior to pap smear), after each pregnancy, after treatment for cervical dysplasia, and PRN for problems. The cap is reusable for one year.</li> <li>7. There may be an increase in bacterial vaginosis and candida with cap use.</li> <li>8. Advise to seek immediate medical care if unable to remove cap.</li> <li>9. Advise to seek immediate medical attention if signs of a cervical infection, vaginal infection, or symptoms of toxic shock.</li> <li>10. If cap dislodges before it should be removed, immediately apply spermicide and consider ECP.</li> <li>11. It does not provide STI protection.</li> </ol>
REFERRAL TO MEDICAL PROVIDER:	Client with symptoms of toxic shock syndrome ( <b>see Preventive Health Services for Women: Toxic Shock Risks</b> ).
REFERENCES:	<ol style="list-style-type: none"> <li>1. <i>Hatcher RA, Trussell J, Nelson A, Cates W, Kowal D, Policar M. Contraceptive Technology. 20 edition. Atlanta GA: Ardent Media, Inc., 2015.</i></li> <li>2. <i>Centers for Disease Control and Prevention. <a href="#">US Medical Eligibility Criteria for Contraceptive Use</a>. MMWR 2016;65(3):1-104. (www.cdc.gov/reproductivehealth/unintendedpregnancy/USMEC.htm) (Retrieved 1/30/2017).</i></li> <li>3. <i><a href="http://femcap.com/clinician-information/">FemCap, Inc.</a> (http://femcap.com/clinician-information/) (Retrieved 2/2017).</i></li> <li>4. <i><a href="http://www.hhs.gov/opa/reproductive-health/contraception/cervical-cap">Cervical Cap</a> (www.hhs.gov/opa/reproductive-health/contraception/cervical-cap) (Retrieved 2/2017).</i></li> <li>5. <i><a href="http://womenshealthcareclinic.com/medical-protocol.html">WHCC Outreach &amp; Education Program: Medical Protocol</a>. (http://womenshealthcareclinic.com/medical-protocol.html) Section 2: Barrier Methods 2.2.3 FemCap Cervical Cap (valid until 11/2018).</i></li> </ol>