

## 6.2 FERTILITY AWARENESS-BASED METHODS (FABM), NATURAL FAMILY PLANNING (NFP) AND FERTILITY AWARENESS COMBINED METHODS (FACM)

TITLE	DESCRIPTION
DEFINITION:	<p>Uses physical signs, symptoms and cycle data to identify the “fertile window” or the days in each menstrual cycle when intercourse is most likely to result in pregnancy. When couples use NFP, they abstain from intercourse during the at-risk fertile days. With FACM, couples use another method such as barriers or withdrawal during those days. Fertility awareness can also help a client achieve pregnancy, when desired. Successful use of FABMs for avoiding pregnancy depends on (1) the accuracy of the method in identifying the actual fertile window, (2) the ability of the person using the method to correctly interpret the information to identify the fertile window, and (3) the ability of the couple to follow the instructions of the method – that is, to use a barrier method or to avoid vaginal intercourse on the days the method identifies as fertile. Motivation of both members of the couple to avoid pregnancy also is a factor in successful use. About 2 to 23, out of 100 women, may become pregnant while using fertility awareness based methods.</p>
SUBJECTIVE:	<p><b>Must Include:</b></p> <ol style="list-style-type: none"> <li>1. LMP.</li> <li>2. Medical, sexual, and contraceptive history update, as appropriate.</li> </ol> <p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Desire to use natural methods.</li> <li>2. Contraindications to hormonal or mechanical methods of birth control.</li> <li>3. Highly motivated couples willing to commit to abstinence or to use barrier method during fertile periods.</li> <li>4. Certain conditions may make FABM more difficult to use and require more extensive counseling and follow-up (recent childbirth, current breastfeeding, recent menarche, and recent discontinuation of hormonal contraceptive methods, approaching menopause, and anovulatory cycling).</li> <li>5. FABM are not recommended for women with: inability to abstain or use other methods during the fertile days; irregular cycles; an inability to interpret their fertility signs correctly; persistent reproductive tract infections; intermenstrual bleeding not distinguishable from menstruation or that impedes noticing secretions.</li> </ol>
OBJECTIVE:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Age appropriate physical exam within the past 12 months.</li> <li>2. BMI and blood pressure.</li> </ol>
LABORATORY:	<p><b>May Include:</b></p> <ol style="list-style-type: none"> <li>1. Age appropriate Pap smear screening.</li> <li>2. Negative urine pregnancy test.</li> <li>3. Vaginitis/cervicitis screening, as indicated (STD’s, PID, or vaginal infection may affect fertility signs).</li> </ol>
ASSESSMENT:	<p>Client is a candidate for natural family planning and/or fertility awareness-combined method.</p>

TITLE	DESCRIPTION
PLAN:	<ol style="list-style-type: none"> <li>1. Provide education and information on the availability of emergency contraception when initiating method.</li> <li>2. Provide information on fertility awareness method(s). These methods include methods based on tracking of days of the menstrual cycle (e.g., the Standard Days Method, the Calendar Rhythm Method), methods based on observation of cervical secretions (e.g., the TwoDay Method, the Billings Ovulation Method, the Creighton Model), methods based on tracking multiply indicators of fertility (e.g., symptothermal methods) and sympto-hormonal methods (e.g., the Marquette Model).</li> <li>3. Referrals, as indicated to local resources for education and training</li> </ol>
EDUCATION:	<ol style="list-style-type: none"> <li>1. Provide clients with recommendations on resources for fertility awareness (see reference below). Provide information on apps available for FABM use.</li> <li>2. Review safer sex education and inform that NFP and FACM do not protect against STD's/HIV.</li> <li>3. Recommend that client return to clinic annually and PRN for problems.</li> </ol>
REFERRAL TO MEDICAL PROVIDER:	Infertility concerns.
REFERENCES:	<ol style="list-style-type: none"> <li>1. <i>Hatcher RA, et al (2018). Contraceptive Technology, 21st Ed. New York, NY: Ayer Company Publishers, Inc. pp 395-413.</i></li> <li>2. <a href="https://www.hhs.gov/opa/sites/default/files/natural-family-planning-fact-sheet.pdf">Fertility Awareness (Natural Family Planning): The Facts.</a> (Retrieved 2/9/2017)</li> </ol>