|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Timing of Injection** | **Has UP SI occurred?** | **Is there a risk of pregnancy** | **Can EC be offered?** | **Can the injection be given?** | **Is additional contraception required?** | **Is a pregnancy test required?** |
| Up to 14 weeks since last DMPA injection | **Yes** | **No** | **N/A** | **Yes** | **No** | **No** |
| 14 weeks +  1 day or more since last IM or SC DMPA injection | **No** (no sex or used barrier method)  **Yes,** but only in the last 5 days (sex that occurs up to week 14 is protected) | **No**  **Yes** | **N/A**  **Yes**. Consider Cu- IUD or LNG EC. The effectiveness of UPA EC could theoretically be reduced by residual circulating progestogen. | **Yes**  **Yes** (If bridging method not acceptable)  After LNG EC injection can be given immediately. After UPA EC, delay injection for 5 days. | **Yes** (7 days after injection)  **Yes** (until 7 days after injection) | **No**  **Yes** >3 weeks since last episode of UPSI |
|  | **Yes**- multiple episodes < 5 days ago and > 5 days ago | **Yes** | **Yes** . The effectiveness of UPA EC could theoretically be reduced by residual circulating progestogen. | **Yes** (if bridging method not acceptable).  After LNG EC injection can be given immediately. After UPA EC, delay injection for 5 days | **Yes** (until 7 days after injection) | **Yes**, prior to administering the injection and > 3 weeks since last episode of UPSI |
|  | **Yes**- multiple episodes >5 days ago and <3 weeks ago. | **Yes** | **No** | **Yes** (if bridging method not acceptable). | **Yes** (until 7 days after injection) | **Yes**, prior to administering the injection and > 3 weeks since last episode of UPSI |
|  | **Yes** – multiple episodes >3 weeks ago | **Yes** | **No** | Perform a pregnancy test and if negative administer injectable | **Yes** (until 7 days after injection) | **Yes**, prior to administering the injection |