

<p>Emergency contraception works in one of three ways: by suppressing or delaying ovulation, by preventing the meeting of sperm and egg, or by preventing implantation</p> <p>Progestin-only pill given within 72 hours of intercourse</p> <p><i>or</i></p> <p>Insertion of a copper-releasing intrauterine device up to 7 days after unprotected intercourse</p>	<p>Useful in unplanned sexual intercourse or contraceptive failure</p> <p>May be given in advance for emergency use</p> <p>Available without prescription for adults</p>	<p>No STI protection</p> <p>May cause nausea if combination method used</p> <p>May change timing of next menstrual cycle</p>
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HDL, High-density lipoprotein; *HIV*, human immunodeficiency virus; *OCP*, oral contraceptive pill; *STI*, sexually transmitted infection.

Confidentiality is a critical issue when discussing contraception with adolescents. Privacy is important to adolescents as they struggle to forge a personal identity and establish social relationships. Adolescents are particularly concerned about the judgments of others. The predominant belief among many health professionals is that parental notification is important but that the “parents’ rights” view is not necessarily sensitive to the health needs and basic rights of youth. No evidence substantiates the belief that providing contraceptive guidance contributes to sexual irresponsibility and promiscuity.

Nursing Care Management

Nurses are often involved in providing education about contraception. Such education is ideally combined with ongoing sex education. Although sexual abstinence is a highly desirable form of contraception for teenagers, nurses working with adolescents must recognize that teens feel multiple pressures to engage in sexual intercourse. Postponing sexual involvement requires effective communication and decision-making skills. Adolescents benefit from role-playing refusal skills and opportunities to practice making decisions in a safe environment. Information about safe sex must be provided, and role-playing how to discuss condom use with a partner is helpful to teenagers.

Education concerning contraception should be provided in both oral and written form. All available methods, including their benefits, disadvantages, and side effects, should be discussed. Concrete, concise language must be used, demonstrations of how to use the contraceptive should be provided, and adolescents should