Consent form for Depo-Provera?

Depo-Provera? is a hormonal substance that prevents ovulation from occurring. Injected intramuscularly every 3 months into the muscle of the upper arm or buttocks.

How it works:

The hormones in the injection suppress ovulation (egg production) for 3 months.

How Effective Is It?

Failure rate is less than one pregnancy per 100 women per year when women return for injections every 3 months and when injection is done in the first 3 days of menses (bleeding)

Why Choose This Method?

- ∠ Desire for reversible method—reversible by stopping injections
- EDesire for method disconnected from intercourse—nothing to take or put in

Why You Might Not Be a Candidate

- ?? Known or suspected pregnancy
- ?? Undiagnosed vaginal bleeding
- ?? Known or suspected breast cancer
- ?? Active thrombophlebitis (blood clots) or current or past history of clot disorders in legs, lungs, or eyes; or a stroke
- ?? Liver dysfunction or disease (hepatitis B)
- ?? Known sensitivity to Depo-Provera? or any of its ingredients (have you every had an allergic reaction to local anesthetic at the dentist?)

Relative Contraindications: Have You Any of the Following?

Breast Cancer Asthma
Abnormal mammogram Epilepsy or seizures; are you taking seizure

Fibrocystic breast disease medication?

Breast nodules or lumps Diabetes or family history of diabetes
Bleeding from nipples Depression requiring hospitalization and/or

Kidney disease medication

High blood pressure, heart disease or stroke Osteoporosis (brittle bones)

Recent history of liver disease such as hepatitis A, mono Do you regularly use any prescription drugs—we need to check possible interactions with Depo-

Migraine headaches Provera?

Side Effects You Might Experience

Weight gain—average is 5 pounds; change in appetite	Dizziness
Menstrual irregularity—possibly no periods by	Depression, nervousness
second or third shot	Nausea
Headaches	No hair growth or loss or thinning of hair
Abdominal bloating	Skin rash or increased acne
Breast tenderness	Increased or decreased sex drive
Tiredness, weakness	

Explanation of Methods and Assessment

Depo-Provera? is injected intramuscularly in one 150-milligram dose every 3 months (12 weeks) for as long as contraceptive effect is desired. It is given in the **first three days** of the menstrual cycle (after onset of menses), within 5 days postpartum, or if breast feeding, at 6 weeks postpartum.

If time between injections is greater than 14 weeks, we would do pregnancy test before giving you the injection; we may also do a pregnancy test at 12 weeks if you have no bleeding (period).

Use of This Methods and Warning Signs

Drug interactions are possible when using Depo-Provera? with other prescription drugs.

Always check with your physician or nurse practitioner and pharmacist for such possible interactions before taking any other prescription drug; Depo-Provera is a medication and you need to list it in your health history.

Warning signs to report to your health care provider (physician or nurse practitioner);

- ?? Sharp chest pain, coughing of blood, sudden shortness of breath
- ?? Sudden severe headache, vomiting, dizziness, or fainting
- ?? Visual disturbance (double vision, blurred vision, spots before your eyes or speech disturbance (slurred, unable to speak)
- ?? Weakness or numbness in arm or leg
- ?? Severe pain or swelling in calf or leg
- ?? Unusually heavy vaginal bleeding (unlike usual periods)
- ?? Severe pain or tenderness in lower abdomen, pelvis
- ?? Persistent pain, pus, or bleeding at injection site

Follow-up care of Yourself

- ?? Visit you health care provider every 3 months (12 weeks) for injection
- ?? The visit should take place during first 3 days of menstrual cycle (or at 12 weeks from last shot if no period [menses])
- ?? Review any side effects, danger signs with health care provider
- ?? Review your menstrual cycles with health care provider
- ?? Have a Pap smear every year along with a complete physical examination including pelvic and breast examinations
- ?? Depo-Provera? provides no protection against sexually transmitted diseases (including AIDS) or vaginal infections, so consider using condoms if you are concerned about protecting yourself.

I have read the above and have been given a copy of this consent form and the manufacturer's information and agree to have Depo-Provera? . I agree to pay prior to the injection. If it is over 91 days since my last injection, I agree to take 2 pregnancy tests 1 week apart. I agree that I am responsible for the additional cost.

Signed	Date
Witness	Date