

**STANDARD NURSE PROTOCOL FOR  
ORTHO EVRA™ TRANSDERMAL SYSTEM  
(CONTRACEPTIVE PATCH)**

<b>DEFINITION</b>	ORTHO EVRA™ is a transdermal patch applied to the skin that releases synthetic estrogen and progestin hormones to prevent pregnancy. ORTHO EVRA™ acts by suppressing gonadotropins, similar to combination oral contraceptives. Although the primary mechanism of this action is inhibition of ovulation, other alterations include changes in the cervical mucus which increase the difficulty of sperm entry into the uterus, and changes in the endometrium which reduce the likelihood of implantation.
<b>SUBJECTIVE</b>	<ol style="list-style-type: none"><li>1. Patient desires to use contraceptive patches.</li><li>2. Has detailed health history (includes menstrual, sexual, contraception, personal health and family history) that does not reveal a condition representing an unacceptable health risk according to the product prescribing information and the World Health Organization (WHO) Medical Eligibility Criteria for Contraceptive Use.</li><li>3. <b>If breastfeeding, has been breastfeeding at least 6 months after childbirth, to ensure that breastfeeding has been well established.</b></li><li>4. If age 35 or older, and does not smoke.</li></ol>
<b>OBJECTIVE</b>	<ol style="list-style-type: none"><li>1. Physical exam and laboratory tests according to programmatic Guidelines.</li></ol> <p style="text-align: center;"><b>OR</b></p> <ol style="list-style-type: none"><li>2. Physical exam deferred up to 3 months. Document reason for deferral on chart. Document on Request for and Consent to Family Planning Services (form 3700) that client agreed to have physical exam delayed.</li></ol>
<b>ASSESSMENT</b>	Patient has no condition representing an unacceptable risk if using the patch.
<b>PLAN</b>	<b>DIAGNOSTIC STUDIES</b> <ol style="list-style-type: none"><li>1. Lipid profile beginning by age 45. Consider screening women age 20-44 in the presence of high-risk factors for CVD. Rescreen every 5 years or more often depending on test results and high-risk factors. For Recommended Tests and Immunizations for Women with High-Risk Factors refer to <a href="http://www.womenshealth.gov">www.womenshealth.gov</a>.</li></ol>

2. Blood glucose beginning by age 45. Consider screening women at an earlier age in the presence of high-risk factors for diabetes. Rescreen every 3 years or more often depending on test results and high risk factors. For Recommended Tests and Immunizations for Women with High-Risk Factors refer to [www.womenshealth.gov](http://www.womenshealth.gov).
3. Screen women for colorectal cancer according to district policy/procedure for colorectal cancer screening.

## THERAPEUTIC

### PHARMACOLOGIC

1. ORTHO EVRA™ Patch, box of three patches.
  - a. Apply the first patch on the first day of menses, on the Sunday following menses or same day as clinic visit (quick start). The first day is designated as "Patch Change Day." **Same day as visit needs an additional 7 days of contraception.**
  - b. Remove liner and apply the sticky surface of the patch on clean, dry skin of the lower abdomen, buttocks, upper outer arm, or upper torso (not on the breasts).
  - c. Press down firmly on the patch with the palm of the hand for 10 seconds. Make sure that the edges stick well.
  - d. Remove the patch and apply a new patch on "patch change day" on weeks 2 and 3. Apply the new patch to a different area of skin to reduce skin irritation.
  - e. No patch is applied on week 4.
2. For patients not receiving physical exam prior to first 3 months supply, a physical exam must be performed to dispense additional patches.

### PATIENT EDUCATION/COUNSELING

1. Counsel patient according to the seven basic elements of informed consent (BRAIDED – Benefits Risks Alternatives Inquiries Decision Explanation Documentation).
2. The absorption of medication is identical when applied on any of the four suggested areas of the body.
3. Women who use Ortho Evra are exposed to about 60% more estrogen than if they were taking a typical birth control pill

containing 35 micrograms of estrogen. In general, increased estrogen exposure may increase the risk of developing serious blood clots (for instance, in the legs or lungs) that can block blood vessels and cause death or serious disability. However, it is not known whether women using Ortho Evra are at a greater risk of having these serious problems. One study found a doubling of this risk and another study found no increased risks. The manufacturer of Ortho Evra is doing studies on this.

4. The transdermal contraceptive patch may be less effective in women with body weight of 198 lbs. or higher. May consider back up method such as condoms if weight is 198 lbs. or higher.
5. Check the patch every day to make sure it is sticking. Avoid touching the sticky surface.
6. Do not apply creams, oils, or cosmetics near the patch site.
7. If the patch becomes loose and is still sticky, try to reattach it. If it is not sticky, replace it with a new patch, and then change the new patch on the usual change day.
8. If the patch was off for more than 24 hours, immediately begin a new cycle of patches and use a back-up method of birth control during the first week. May want emergency contraception.
9. If forget to change a patch, change it as soon as it is remembered. Use a back-up method of birth control for one week. May want emergency contraception.
10. Counsel on the use of condoms to reduce the risk of STDs/HIV.
11. The primary side effects of the patch are headache, nausea, application site reactions, and breast discomfort. Women using the patch are more likely to experience breakthrough bleeding and/or spotting during the first 2 months compared with users of a triphasic levonorgestrel-containing OC. Discuss danger signs (ACHES).
12. Do not attempt to tape down a patch that has become loosened.
13. If smoker or tobacco user, refer to local cessation program and/or Georgia Tobacco Quit Line, 1-877-270-STOP (7867).
14. Emphasize importance of keeping immunizations current; assess client's immunization status and administer vaccines indicated according to the current Advisory Committee on Immunization

Practices (ACIP) childhood or adult immunization schedule. If client declines vaccination, document refusal. See the Georgia Immunization Program Manual, Recommended Schedule and Guidelines, for current ACIP schedules and administration guidelines for each vaccine. The Georgia Immunization Manual may be accessed online at <http://www.health.state.ga.us/programs/immunization/publications.asp>.

### **FOLLOW-UP**

1. Return as scheduled for evaluation or contact clinic if side effects or danger signs develop.
2. If patient did not receive a physical exam, have her return within 3 months for an exam and reassessment.
3. Established patients should return for evaluation at the end of the current supply of patches, or sooner if side effects or danger signs develop. Outside of clinic hours, seek physician or emergency care if danger signs develop.

### **CONSULTATION/REFERRAL**

1. Development of any danger signs.
2. Any other serious health concerns expressed by the patient.
3. If patient is under the supervision of private doctor(s) for health problem (e.g. hypertension).
4. Abnormal initial laboratory values or development of abnormal values or physical findings that indicate patch should not be continued.
5. To nutritionist as indicated.

## REFERENCES

1. American Society of Health-Systems Pharmacists, *American Hospital Formulary Service*, Bethesda, MD, 2009, pp. **3141-3155**.
2. *Ortho Evra Transdermal System Physician Prescribing Information*, Ortho-McNeil Pharmaceutical, Inc., **2008**.
3. Robert Hatcher, et al., *Contraceptive Technology*, **19th ed.**, Ardent Media, Inc., New York, 2007.
4. WHO, Medical Eligibility Criteria for Contraceptive Use, 3<sup>rd</sup> ed., **2008**.
5. "Facts and Comparisons," *Facts and Comparisons 4.0 Online*, Wolters Kluwer Health, Inc., 2009, <<http://online.factsandcomparisons.com>>.
6. "Preventive Screenings and Immunizations," HHS, Office of Women's Health, <<http://www.womenshealth.gov/screeningcharts/highrisk/>>.