

## Information For Contraceptive Transdermal Patch

**Cigarette smoking increases the risk of serious cardiovascular side effects from combination oral contraceptive use. This risk increases with age and with heavy smoking (15 or more cigarettes per day) and is quite marked in women over 35 years of age. Women who use combination hormonal contraceptives, including NuvaRing, should be strongly advised not to smoke.**

The contraceptive patch is a thin, flexible square of film that contains both estrogen and progestin. The contraceptive patch is 93 percent to 99 percent effective when used correctly. There are currently three types of transdermal patches approved for contraception.

### BENEFITS

- ❖ Fewer menstrual cramps and bleeding
- ❖ Improvement in acne
- ❖ Regular periods
- ❖ Less pain at ovulation
- ❖ Reduced PMS symptoms

### Decreased Risk Of:

- ❖ Benign breast tumors or ovarian cysts
- ❖ Ectopic pregnancy
- ❖ Ovarian or Endometrial cancer
- ❖ Anemia

### RISKS/SIDE EFFECTS

❖ Spotting between periods	❖ Nausea	❖ Change in libido
❖ Weight changes (uncommon)	❖ Breast tenderness	❖ Mood changes/depression
❖ Decreased milk supply (breastfeeding)	❖ Headaches	❖ Worse acne
❖ Cardiovascular complications (including elevated blood pressure)	❖ Skin irritation	❖ Does not protect against STIs

The patch may be less effective for women weighing 198 pounds or more, these women should consider using a back-up or another method.

To decrease your chances of serious problems, you need to go to an emergency room, doctor, or clinic if you have any of the following symptoms:

### **EARLY PILL DANGER SIGNS**

- A** Abdominal pain (severe)
- C** Chest pain or shortness of breath
- H** Headaches (severe)
- E** Eye problems -- blurred vision, flashing lights, or blindness
- S** Severe leg pain (calf or thigh)

### ALTERNATIVES

You have received verbal information about the other methods of birth control available. For situations of suspected contraception failure, emergency contraception is available and offers a second chance to reduce the risk of unintended pregnancy.

## INSTRUCTIONS

You have received information about the contraceptive patch and how to use it. The contraceptive patch does not protect against STIs (sexually transmitted infections) or HIV.

## DECISION TO STOP

You may stop using the contraceptive patch at any time. A woman is most likely to become pregnant if she or her partner does not use a method of birth control.

## QUESTIONS

You may ask questions about birth control anytime and contact the clinic with further questions.

## INSTRUCTIONS FOR USING THE CONTRACEPTIVE PATCH

The patch contains two types of hormones. Once you apply the patch to your body, these hormones are transferred continuously through your skin and into your bloodstream, where they prevent pregnancy. The contraceptive patch should not be used to manipulate menses (continuous use).

### Where to apply and how:

1. You can wear the patch on your buttock, abdomen, upper torso (excluding the breast) or the outside of your upper arm.
2. You can select a different site each week. The patch must remain in place for seven days.
3. You can wear the patch in the same location each week; however, try to avoid placing in the same exact spot.
4. Do not apply the patch to skin that is red, irritated or cut.
5. Only one patch should be worn at a time. Check the patch every day to make sure it is sticking properly.
6. Always apply the patch to clean, dry skin. Avoid putting creams, lotions, oils, powder or make-up on or near the patch.
7. Open the foil pouch by tearing it along the top edge and one side edge.
8. The patch is covered by a layer of clear plastic.
9. Peel away half of the clear plastic. Avoid touching the sticky surface with your fingers.
10. Apply the sticky side of the patch on the skin you have cleaned and dried. Then remove the other half of the clear plastic.
11. Press firmly on the patch with the palm of your hand for 10 seconds, ensuring the edges stick well. Run your finger around the edge of the patch to make sure it is sticking properly.

### When to start:

There are three ways to start your contraceptive patch. You should use the approach your healthcare provider suggests.

1. Start on the first day of menstrual bleeding. No backup contraceptive method is needed.
2. Start on the first Sunday after your period begins. Use a backup method for seven days.
3. Start today if you are certain that you are not pregnant. Use a backup method for seven days.

### When to change the patch:

1. Wear the patch for seven days (one week); on the eighth day, remove the used patch.

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2. Apply a new patch on day eight (week two) and again on day 15 (week three). On day 22 (the first day of week four), do not wear a patch. Your period should start during this week. You should never have the patch off for more than seven days.
3. Be sure to apply the first patch at the beginning of your next four-week cycle.

**How to remove:**

1. Simply lift one corner and quickly peel it back. Fold the used patch in half so it sticks to itself before throwing it away.
2. If a small ring of adhesive is left on your skin, remove it by rubbing a small amount of baby oil on the area.

**If you forget to change the patch:**

1. If you are more than one day late in putting on your first patch, you must use a backup method for one week to avoid becoming pregnant.
2. Apply the first patch of your new cycle as soon as you remember.

**If you forget to change your patch during week two or three:**

1. If you are only one or two days late, remove and apply a new patch immediately.
2. The next patch should be applied on your normal patch change day.
3. No backup method is needed.
4. If it has been more than two days past your patch change date, to avoid becoming pregnant, you must use the backup method for one week.
5. Remove the used patch and apply a new patch as soon as you remember.

**If you forget to take your patch off during week four:**

1. Take off the patch as soon as you remember.
2. Start your next cycle on your normal patch change day.
3. No backup method is needed.

**If your patch falls off:**

1. If less than 24 hours, try to reapply or apply a new patch immediately. No backup method is needed.
2. If more than 24 hours or you are unsure how long it has been off or loose, apply new patch immediately. Start a new four-week cycle. Use backup method for the first week.

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**References:**

1. Cason, P., Hatcher, R. A., Cwaik, C., Edelman, A., Kowal, D., Marrazzo, J. M., Nelson, A. L., & Policar, M. S. (2025). Reproductive Tract Infections (22<sup>nd</sup> ed.), *Contraceptive Technology* (pp. 364-374, 393-395). Jones & Bartlett Learning.
2. How to Be Reasonably Certain That a Woman is Not Pregnant; When to Start Using Specific Contraceptive Methods; and Routine Follow-Up After Contraceptive Initiation.
3. Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use (U.S. MEC)
4. U.S. Medical Eligibility Criteria for Contraceptive Use, 2024