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For accessible version, please see the summary of classifications at https://www.cdc.gov/contraception/hcp/usmeci

## Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use (U.S. MEC)



n 2024. This summary sheet only contains a subset of the recommendations from the U.S. MET. For complete guidance, see: https://www.ord.gov/contracequition/hg/pulsmane/. Most contracequitive methods do not protect against \$This. Consistent and corner use of the external [mink] laistent of a contracequitive methods of not protect against \$This. Consistent and corner use of the external [mink] laistent of many and a contracequitive methods for not protect against \$This. Consistent and corner use of the external [mink] laistent and many and protect against \$This. Consistent and corner use of the external [mink] laistent and many and protect against \$This. Consistent and corner use of the external [mink] laistent and many and protect against \$This. Consistent and corner use of the external [mink] laistent and many and protect against \$This. Consistent and corner use of the external [mink] laistent and many and protect against \$This. Consistent and corner use of the external [mink] laistent and many and protect against \$This. Consistent and corner use of the external [mink] laistent and many and ma

Condition	Sub-Condition	Cu-IUD	LNG-IUD	Implant	DMPA	POP	CHC	Condition	Sub-Condition	Cu-IU		LNG-I		DMPA	POP	CHC
		I C	I C	I C	1 6	I C	I C				c		CIC	I C	I C	
ge		Menarche to	Menarche to	Menarche to	Menarche to	Menarche to	Menarche to	Diabetes	a. History of gestational disease	- 1		- 1	- 1	1	1	-
		<20 yrs:2	<20 yrs:2	<18 yrs: 1	<18 yrs:2	<18 yrs:1	<40 yrs:1		b. Nonvascular disease	- 1		_			_	
		~20 yii	~20 yis.	~10 Ji.z. 1	<10 yis.2	~10 Ji.	~10 jis. s		i. Non-insulin dependent ii. Insulin dependent <sup>‡</sup>			2	2	2		2
		≥20 vrs:1	≥20 vrs:1	18-45 vrs:1	18-45 vrs:1	18-45 vrs:1	≥40 vrs:2					2	2	2		2
				>45 yrs:1	>45 yrs: <b>2</b>	>45 yrs:1			c. Nephropathy, retinopathy, or neuropathy <sup>‡</sup>	1		2	2	3	2	3/4
natomical	a. Distorted uterine cavity	4	4	>43 yis. 1	>43 yis.2	243 yıs. I			<ul> <li>d. Other vascular disease or diabetes of &gt;20 years' duration<sup>‡</sup></li> </ul>			2	2	3	2	3/4
bnormalities	b. Other abnormalities	2	2					Dysmenorrhea	Severe	2		1	1	1	1	1
la carda dana dadi dana	b. other autorinances			_	_	_	-	Endometrial cancer		4	2	4	2 1	1	1	1
Anemia, iron-deficiency		2	1	1	1	1	1	Endometrial hyperplasia		1		1	1	1	1	1
Benign ovarian tumors	(including cysts)	1	1	1	1	1	1	Endometriosis		2		1	1	1	1	1
reast disease	a. Undiagnosed mass	1	2*	2*	2*	2*	2*	Epilepsy <sup>‡</sup>	(see also Drug Interactions)	1		1	1*	1*	1*	11
	b. Benign breast disease	1	1	1	1	1	1	Gallbladder disease	a. Asymptomatic	1		2	2	2	2	2
	c. Family history of cancer	1	1	1	1	1	1	Gambiadaci discuse	b. Symptomatic						_	_
	d. Breast cancer <sup>‡</sup>								i, Current	- 1		2	2	2	2	3
	i. Current	1	4	4	4	4	4		ii. Treated by cholecystectomy			2	2	2		
	ii. Past and no evidence of current disease for 5 years	1	3	3	3	3	3		iii. Medically treated	1		2	2	2		
Breastfeeding	a, <21 days postpartum			2*	2*	2*	4*	Gestational trophoblastic	a. Suspected GTD (immediate postevacuation)	_		-		-	_	-
reastreeding	b. 21 to <30 days postpartum						_	disease (GTD)‡	i. Uterine size first trimester			1,	1*	1*	1*	17
	i. With other risk factors for VTE			2*	2*	2*	3*	disease (dTD)	ii. Uterine size iiist unitester			21		1*		
	ii. Without other risk factors for VTE			2*	2*	2*	3*		b. Confirmed GTD	2*		- 2		- 17		
	c. 30-42 days postpartum								i. Undectectable or non-pregnant β-hCG levels	1*	1*	1*	1* 1*	1*	14	- 1
	i. With other risk factors for VTE			1*	2*	1*	3*		ii. Decreasing B-hCG levels iii. Persistently elevated B-hCG levels		1*	2*	1* 1*	1*		
	ii. Without other risk factors for VTE			1*	1*	1*	2*				1"	2^	1" 1"	1"	1"	- 1
	d. >42 days postpartum			1*	1*	1*	2*					2*	1* 1*	1*		
ervical cancer	Awaiting treatment	4 2	4 2	2	2	1	2		or malignant disease, with no evidence or suspicion of intrauterine disease	2*	1*	2*	1" 1"	1*	1*	T
Cervical ectropion	Awarding deadlient	1	-	1	1	1	1		iv. Persistently elevated B-hCG levels							+
Cervical ectropion						•	•		or malignant disease, with evidence or suspicion	4*	2*	4*	2* 1*	1*	10	
.ervicai intraepitnellai neoplasia		1	2	2	2	1	2		of intrauterine disease				4"			
Thronic kidney disease <sup>‡</sup>	a. Current nephrotic syndrome	1 1	2 2	2	3	2/4*	4	Headaches	a. Nonmigraine (mild or severe)	1		- 1	1	1	1	11
infonic kiuney uisease	b. Hemodialysis	1 1	2 2	2	3	2/4*	4	neudacites	b. Migraine							_
	c. Peritoneal dialysis	2 1	2 2	2	3	2/4*	4		i. Without aura (includes menstrugl migraine)	- 1		- 1	1	1	1 1 1 1 1 1 1* 2 2 2 2 2 2 1* 1* 1*	21
irrhosis	a. Compensated (normal liver function)	-	2 2	1	1	1	1		ii. With aura	1		<u> </u>	1	1	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
JITTHOSIS	b. Decompensated (impaired liver function)	- 1	2	2	3	2	_	History of bariatric surgery	a. Restrictive procedures	1		1	1	1	1	1
	b. Decompensated (impaired liver function)						4	history or barractic surgery	a. Historia processes					-		
Lystic fibrosis <sup>‡</sup>		1*	1*	1*	2*	1*	1*		b. Malabsorptive procedures	1		1	1	1	3	
Deep venous thrombosis	a. Current or history of DVT/PVE, receiving	2*	2*	2*	2*	2*	3*	History of cholestasis	a. Pregnancy related	- 1		- 1	-	1	-	
DVT)/Pulmonary embolism	anticoagulant therapy (therapeutic dose)			_	_		_	History of cholestasis	b. Past COC related	i		2	2	2	-	
PE)*	b. History of DVT/PE, receiving anticoagulant therapy (prophylactic dose)									-				-		3
							4*	History of high blood pressure				- 1	1	1	1	2
	i. Higher risk for recurrent DVT/PE ii. Lower risk for recurrent DVT/PE	2* 2*	2*	2*	3*	2* 2*		during pregnancy						-		
		2*	2*	2*	2*	2*	3*	History of pelvic surgery	(see also Postpartum [including cesarean delivery])	1		1	1	1	1	1
	c. History of DVT/PE, not receiving anticoagulant therapy							HIV	a. High risk for HIV	1*	1*	1*	1* 1	1	1	1
	i. Higher risk for recurrent DVT/PE	1	2	2	3	2	4		b. HIV infection				1*	1*	1*	
	ii. Lower risk for recurrent DVT/PE	1	2	2	2	2	3		i. Clinically well receiving ARV therapy	1	1	1		-		-
	d. Family history (first-degree relatives)	1	1	1	1	1	2									

Abbreviations: ARV = antiretroviral; C = continuation of contraceptive method; CMC = combined hormonal contraceptive (pill, patch, and ring); OCC = combined oral contraceptive; Cu-IUD = copper intrauterine device; DMPA = depot medroorgopregesterone acetale; i = initiation of contraceptive method; LNG-IUD = levonorgesteri intrauterine device; NA = not applicable; POP = progestin-only pill; P/R = patch/ring; SSRI = selective serotonin reuptake inhibitor; STI = sexually transmitted infection; VTE = venous thromboembolism. "Condition associated with increased risk as a result of pregnancy." Please see the complete guidance for a diarification to this classification: https://www.cdc.gov/contraception/ing/usmec/.

## **Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use (U.S. MEC)**



Condition	Sub-Condition	Cu-		LNG		Implant	DMPA	POP	CHC	
			C		c	I C	I C	I C	I C	
Hypertension	a. Adequately controlled hypertension		1*		1*	1*	2*	1*	3*	
	b. Elevated blood pressure levels (properly taken measurements)									
	i. Systolic 140-159 or diastolic 90-99		1*		1*	1*	2*	1*	3*	
	ii. Systolic ≥160 or diastolic ≥100°		1*		2*	2*	3*	2*	4*	
	c. Vascular disease		1*		2*	2*	3*	2*	4*	
Inflammatory bowel disease	(ulcerative colitis or Crohn's disease)			1		1	2	2	2/3*	
Ischemic heart disease‡	Current and history of			2	3	2 3	3	2 3	4	
	a. Benign			_			_			
Liver tullions	i. Focal nodular hyperplasia		1		2	2	2	2	2	
	ii. Hepatocellular adenoma <sup>‡</sup>		- i		-	2	3	2	4	
	b. Malignanti (hepatocellular carcinoma)			3		3	3	3	4	
Malaria	b. manghanic (included cardinatio)	- 1		1		1	1	1	1	
Multiple risk factors for atherosclerotic cardiovascular disease	(e.g., older age, smoking, diabetes, hypertension, low HDL, high LDL, or high triglyceride levels)	1		2		2*	3*	2*	3/4*	
Multiple sclerosis	a. Without prolonged immobility		1	1	1	1	2	1	1	
•	b. With prolonged immobility		1			1	2	1	3	
Obesity	a. Body mass index (BMI) ≥30 kg/m <sup>2</sup>		1		1	1	1	1	2*	
,	<li>b. Menarche to &lt;18 years and BMI ≥30 kg/m²</li>	1		1		1	2	1	2*	
Ovarian cancer‡				1		1	1	1	1	
Parity	a. Nulliparous		2	- 2	2	1	1	1	1	
•	b. Parous	1		1		1	1	1	1	
Past ectopic pregnancy						1	1	2	1	
Pelvicinflammatory	a. Current	4	2*	4	2*	1	1	1	1	
disease	b. Past									
	i. With subsequent pregnancy	1	1	1	1	1	1	1	1	
	ii. Without subsequent pregnancy	2	2	2	2	1	1	1	1	
Peripartum cardiomyopathy <sup>‡</sup>	a. Normal or mildly impaired cardiac function									
	i. <6 months		2		2	1	2	1	4	
inflammatory bowel disease schemic heart disease liver tumors  Malaria Multiple risk factors for therescheroit cardiovascular disease  Desity  Dvarian cancer  Parity  Past ectopic pregnancy  Peripartum cardiomyopathy  Peripartum cardiomyopathy  Peripartum cardiomyopathy  Postpartumeous or induced	ii. ≥6 months		2	1	2	1	2	1	3	
	b. Moderately or severely impaired cardiac function	2		- 2	2	2	3	2	4	
Postabortion	a. First trimester abortion									
(spontaneous or induced)	i. Procedural (surgical)		*		*	1*	1*	1*	1*	
inflammatory bowel disease chemic heart disease <sup>2</sup> ver tumors  alaria  alaria  ultiple risk factors for therosclerotic cardiovascular sease  ultiple selections  besity  varian cancer <sup>2</sup> arity  ast ectopic pregnancy  evic inflammatory  sease  eripartum cardiomyopathy <sup>2</sup> oostabortion  pontaneous or induced)	ii. Medication	1	*	1	*	1*	1/2*	1*	1*	
	iii. Spontaneous abortion with no intervention	1*		1*		1*	1*	1*	1*	
	b. Second trimester abortion									
	i. Procedural (surgical)		2*		2*	1*	1*	1*	1*	
	ii. Medication		2*		2*	1*	1*	1*	1*	
	iii. Spontaneous abortion with no intervention	2*		2	2*	1*	1*	1*	1*	
	c. Immediate postseptic abortion				1	1*	1*	1*	1*	
Postpartum	a. <21 days					1	2	1	4	
(nonbreastfeeding)	b. 21 days to 42 days									
	i. With other risk factors for VTE					1	2	1	3*	
	ii. Without other risk factors for VTE					1	1	1	2	
	c. >42 dws					1	1	1	1	

Condition	Sub-Condition	Cu-	IUD	LNG	-IUD	Implant	DMPA	POP	CHC
			C		C	I C	I C	I C	I C
Rheumatoid	a. Not on immunosuppressive therapy		1		1	1	2	1	2
arthritis	b. On immunosuppressive therapy	2	1	2	1	1	2/3*	1	2
Schistosomiasis	a. Uncomplicated		1		1	1	1	1	1
	b. Fibrosis of the liver <sup>‡</sup> (if severe, see also Cirrhosis)		1		1	1	1	1	1
Sexually transmitted infections (STIs)	<ul> <li>a. Current purulent cervicitis or chlamydial infection or gonococcal infection</li> </ul>	4	2*	4	2*	1	1	1	1
	Vaginitis (including Trichomonas vaginalis and bacterial vaginosis)	2	2	2	2	1	1	1	1
	c. Other factors related to STIs	2*	2	2*	2	1	1	1	1
Sickle cell disease <sup>‡</sup>			2		1	1	2/3*	1	4
Smoking	a. Age <35		1		1	1	1	1	2
	b. Age ≥35, <15 cigarettes/day		1		1	1	1	1	3
	c. Age ≥35, ≥15 cigarettes/day		1		1	1	1	1	4
Solid organ	a. No graft failure	1	1	1	1	2	2/3*	2	2*
transplantation <sup>‡</sup>	b. Graft failure	2	1	2	1	2	2/3*	2	4
Stroke <sup>‡</sup>	History of cerebrovascular accident		1		2	2 3	3	2 3	4
Superficial venous disorders	a. Varicose weins		1		1	1	1	1	1
Superiidai Vellous disordeis	b. Superficial venous thrombosis (acute or history)		i		<u>.</u>	i	2	i	3*
Surgery	a. Minor surgery without immobilization		i		1	i	1	i	1
Surgery	b. Major surgery		•				-	•	
	i. Without prolonged immobilization		1		1	1	1	1	2
	ii. With prolonged immobilization	-			i	i	2	-i	4
Systemic lupus erythematosus‡	a. Positive (or unknown) antiphospholipid antibodies	1*	1*		2*	2*	3* 3*	2*	4*
systemic iupus erytnematosus	b. Severe thrombocytopenia	3*	2*		2*	2*	3* 2*	2*	2*
	c. Immunosuppressive therapy	2*	1*		2*	2*	2* 2*	2*	2*
	d. None of the above		1*		2*	2*	2* 2*	2*	2*
Thalassemia	a. Holic of the troops		2	_	1	1	1	1	1
Thrombophilia <sup>1</sup>			1*		2*	2*	3*	2*	4*
Thyroid disorders	Simple goiter, hyperthyroid, or hypothyroid		i		1	i	1	i	1
Tuherculosis†	a. Nonpelvic	1	1	1	1	1*	1*	1*	1*
(see also Drug Interactions)	b. Pelvic	4	3	4	3	1*	1*	1*	1*
Unexplained vaginal bleeding	(suspicious for serious condition) before evaluation	4*	2*	4*	2*	3*	3*	2*	2*
Uterine fibroids	(suspicious for serious condition) before evaluation		2		2	1	1	1	1
Valvular heart disease	a. Uncomplicated		1		1	i	i	i	2
vaivuiar neart disease	b. Complicated <sup>‡</sup>		÷		<u>.</u>	i	2	÷	4
W - 1 - 111 - P	a. Irregular pattern without heavy bleeding		i	1	1	2	2	2	1
Vaginal bleeding patterns	b. Heavy or prolonged bleeding		! 2*	1*	2*	2*	2*	2*	1*
Viral hepatitis	a. Acute or flare		2- 1	_	1	1	1	1	3/4* 2
virai nepautis	b. Chronic		1		1	1	1	1	1 1
D	D. Chronic				1			1	
Drug Interactions									
Antiretrovirals (ARVs) used for prevention (PrEP) or	Fosamprenavir (FPV)	1/2*	1*	1/2*	1*	2*	2*	2*	3*
treatment of HIV	All other ARVs are 1 or 2 for all methods								
Anticonvulsant therapy	<ul> <li>a. Certain anticonvulsants (phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine)</li> </ul>		1		1	2*	1*	3*	3*
	b. Lamotrigine		1		1	1	1	1	3*