

**CERVICAL CAP**

DEFINITION	The cervical cap is a thimble-shaped non-latex rubber device that fits over the cervix. Three sizes are available with internal diameter of 22mm, intended for women who have NEVER been pregnant; 26mm, intended for women who have been pregnant (even for 2 weeks) and did not have a vaginal delivery; and 30mm, intended for women who have had a vaginal delivery of a full term baby. The cervical cap acts as a mechanical barrier to sperm and is used in conjunction with a spermicide. The cervical cap is distributed exclusively in the United States as FemCap. (www.FemCap.com). Availability may vary.
SUBJECTIVE	May include: <ol style="list-style-type: none">1. LMP.2. Medical, sexual, and contraceptive use update, as appropriate. Must exclude: <ol style="list-style-type: none">1. History of toxic shock syndrome.2. Allergies to the device or spermicide.3. Unresolved abnormal pap smear.4. Postpartum less than 6 weeks. Uterus must be completely involuted.5. Less than 6 weeks post second trimester abortion.6. High risk for HIV. Repeated and high dose use of spermicide and increase risk of genital lesions and thus increase risk for HIV infection.
OBJECTIVE	Must include: <ol style="list-style-type: none">1. Speculum exam to judge size and contour of the cervix, and to evaluate for vaginal or cervical abnormalities. Must exclude: <ol style="list-style-type: none">1. Vaginal abnormalities which would interfere with proper placement or retention of the cervical cap.2. Cervical surface anomalies which would inhibit cap fit.3. Vaginal or cervical infection, which could complicate cap use.
LABORATORY	Must include: <ol style="list-style-type: none">1. Pap smear in accordance with current frequency recommendations. The cap should not be used if client has untreated cervical intraepithelial neoplasia or is awaiting cervical cancer treatment. May include: <ol style="list-style-type: none">1. Vaginal/cervical infection testing, as indicated. HIV testing as indicated.
ASSESSMENT	Candidate for cervical cap.
PLAN	<ol style="list-style-type: none">1. Fit appropriate sized cap, assessing coverage of cervix, and inability to dislodge.2. Have client demonstrate ability to correctly insert and remove cervical cap.3. Review and sign consent/client education form.

	4. Offer advance prescription of emergency contraceptive pills
CLIENT EDUCATION	<ol style="list-style-type: none"> 1. Provide client education handout(s). Review manufacturer's inserts. Review symptoms, complications, and danger signs. 2. Review safer sex education, as appropriate. 3. Epithelial disruption can be associated with spermicide dose, delivery system or frequency of use. Caution clients who use spermicide routinely as this increases the risk for HIV infection and increases the risk of HIV transmission to unaffected partner if she is positive. 4. Inform client that use of the cervical cap is contraindicated during menses. 5. Can be inserted up to 40 hrs prior to sexual activity. Must be left in place for at least 6 hours after intercourse and no longer than 8 hours. 6. RTC annually (refrain from use 2-3 days prior to pap smear) and PRN for problems. The cap is reusable for one year.
CONSULT / REFER TO PHYSICIAN	<ol style="list-style-type: none"> 1. Client with symptoms of toxic shock syndrome.

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References:

1. Hatcher, R. A., Trussell, J. Nelson, A., et al (Editors)(2011). Contraceptive Technology. (20th revised ed.). p. 395, New York: Ardent Media.
2. MMWR Morbidity and Mortality Weekly Report, June 18, 2010. U.S. Medical Eligibility Criteria for Contraceptive Use, 2010. Pp 65-69.
3. FemCap, Inc. www.FemCap.com