

Family Planning Annual Report (FPAR 2.0)

Clinical Question Guide

Encounter level data is required for every family planning patient and physician and nurse visit (including, pregnancy test, emergency contraception, supply visit, method problem, etc.) either face-to-face in a Title X service site or virtual using telehealth technology.

This document provides an overview of clinical questions needed for FPAR 2.0 reporting. Every question is not required for each encounter but will be expected when clinically indicated.

Discuss contraception or pregnancy prevention during your visit: This question relies on patients own identification of their contraceptive need. This question aids in creating and strengthening patient-centered contraceptive care pathways and identifying gaps in quality, with a focus on centering patients' needs and preferences in contraceptive provision and counseling.

“Do you want to talk about contraception or pregnancy prevention during your visit today”

- Yes
- No - I do not want to talk about contraception today because
- I am here for something else
- No - This question does not apply to me/I prefer not to answer
- No - I am already using contraception
- No - I am unsure or don't want to use contraception
- No - I am hoping to become pregnant in the near future

Pregnancy Intention: A patient's intention or desire in the next year to either become pregnant or prevent a future pregnancy. This includes male patients seeking pregnancy with a female partner. Pregnancy intention may be used to help improve preconception health screenings and decisions, such as determining an appropriate contraceptive method, taking folic acid, or avoiding toxic exposures such as alcohol, tobacco, and certain medications.

“Do you want to become pregnant (in the next 12 months)?”

- Yes, I want to become pregnant
- I'm OK either way
- No, I don't want to become pregnant
- Unsure

Contraceptive method at intake reported at intake: The patient's reported contraceptive method used in the last sexual encounter. This is different than their historical contraceptive methods. Only one method should be reported. If multiple methods were used, report the most effective method. *See complete contraceptive list on last page.*

Reason for no contraceptive method reported at intake: The reason patient reported no contraceptive method used in last sexual encounter.

- Abstinence
- Same sex partner
- Other
- Sterile for non-contraceptive reasons

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- Seeking pregnancy

Sexual Orientation: An individual's physical and/or emotional attraction to another individual of the same gender, opposite gender, or both genders. Sexual orientation is independent of gender identity and biological sex.

- Bisexual
- Lesbian, gay, or homosexual
- Straight or heterosexual
- Other, Something else
- Unknown
- Asked, but unknown

Contraceptive counseling was provided:

- Yes
- No

Counseling to achieve pregnancy was provided:

- Yes
- No

Tests performed (Pap, HPV, Chlamydia, Gonorrhea, HIV, and Syphilis)

- Yes
- No

*If your agency regularly orders a reflex-based pap tests (where an HPV test is done when indicated), choose “yes” for both Pap and HPV.

Contraceptive method reported at exit: The contraceptive method provided to or in use by the patient at the end of their visit after counseling and assessment by provider. Only one method should be reported. If multiple methods chosen, report the most effective method.

Reason for no contraceptive method reported at exit: The reported reason at the end of the patient's visit for not using a contraceptive method.

- Abstinence
- Same sex partner
- Other
- Sterile for non-contraceptive reasons
- Seeking pregnancy

How contraceptive method was provided: The method for how the birth control was provided to the patient at end of an encounter.

- Provided on site
- Referral
- Prescription

*This question can be left blank if patient did not change or start a method.

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Systolic blood pressure

Diastolic blood pressure

Body Height

Body Weight

Tobacco Smoking Status: Tobacco smoking status represents a person's smoking behavior. These statuses represent CDC's preferred (sometimes required) responses for recording smoking status.

- Current every day smoker
- Current some day smoker
- Former smoker
- Never smoker
- Smoker, current status unknown
- Unknown if ever smoked
- Heavy tobacco smoker
- Light tobacco smoker

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Accepted Contraceptive Methods

Implantable rod (Nexplanon)

IUD with Progestin (Mirena, Skyla, LILETTA, Kyleena)

IUD copper (Paragard)

IUD unspecified

Female sterilization

Vasectomy

Injectables (Depo-Provera)

Combined oral contraceptive pills

Progestin only contraceptive pills

Contraceptive patch

Vaginal ring

Male condom

Diaphragm or cervical cap

Female condom

Withdrawal

Spermicide

Contraceptive Gel

Sponge

Fertility awareness-based methods

Lactational amenorrhea method

Male relying on female method

Emergency contraception

Decline to answer

None