



NOVEMBER 19, 2024

U.S. SPR Conclusion

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AT A GLANCE

This page is the conclusion for the *2024 U.S. Selected Practice Recommendations for Contraceptive Use* (U.S. SPR). The U.S. SPR provides recommendations for health care providers that address a selected group of common, yet sometimes complex, issues regarding initiation and use of specific contraceptive methods.

Conclusion

[U.S. SPR](#) can support health care providers in removing unnecessary medical barriers, expanding equitable access to the full range of contraceptive methods, and providing person-centered counseling and contraceptive services in a noncoercive manner that supports a person's values, goals, and reproductive autonomy. Most patients may start most contraceptive methods at any time, and few examinations or tests, if any, are needed before starting a contraceptive method. Routine follow-up for most patients includes assessment of their satisfaction with the contraceptive method, concerns about method use, and changes in health status or medications that could affect medical eligibility for continued use of the method. Because changes in bleeding patterns are one of the major reasons for discontinuation of contraception, recommendations are provided for the management of bleeding irregularities with various contraceptive methods. Emergency contraceptive pills (ECPs) and emergency use of the copper intrauterine device (Cu-IUD) are important options, and recommendations for using these methods, as well as starting regular contraception after use of emergency contraception, are provided. Permanent contraception is highly effective for persons who have completed childbearing or do not wish to have children; for persons undergoing vasectomy, additional contraceptive protection is needed until the success of the procedure can be confirmed.

CDC is committed to working with partners at the Federal, national, and local levels to disseminate, implement, and evaluate U.S. SPR recommendations so that the information reaches health care providers. Strategies for dissemination and implementation include collaborating with other Federal agencies and professional and service organizations to widely distribute the recommendations through presentations, electronic distribution, newsletters, and other publications; development of provider tools and job aids to assist providers in implementing the new recommendations; and training activities for students, as well as for continuing education. Finally, CDC will continually monitor new scientific evidence and update these recommendations as warranted by new evidence. Updates to the recommendations, as well as provider tools and other resources, are available on the [CDC website](#).

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National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP); Division of Reproductive Health