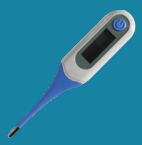
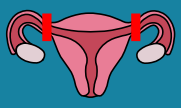
Your Birth Control Choices

Symbol Key: No Prescription Needed | Protects from HIV/STIs | Has Hormones | No Hormones

Method	How to Use	Does it Change Bleeding?	Things to Know	How Well Does it Work?
External Condom 	Put on a new condom when the penis is erect. Use a new condom each time you have sex. Use a non-latex condom if allergic to latex.	No	• Can buy at many stores or get for free from a health center or clinic. • Can put on as part of sex play/foreplay. • Can help sex last longer. • Can be used for oral, vaginal, and anal sex. • May decrease the sensitivity of the penis during sex. • May break or slip off.	13 in 100 people get pregnant.
Internal Condom FC2® 	Pinch the inner ring and push it into the vagina. Keep the outer ring outside of the vagina and hold it in place when the penis enters. Put a new condom in each time you have sex. Use lubrication as needed.	No	• Can get online with a prescription. • May be able to get without a prescription from a health center or clinic. • Can put in as part of sex play/foreplay. • Can be used for anal and vaginal sex. • May increase vaginal/anal pleasure and decrease sensitivity of the penis during sex. • Latex-free. • You and your partner may feel it during sex. • May be hard to insert. • May slip out of place during sex. • Do not use with external condom.	21 in 100 people get pregnant.
Diaphragm Caya®, Milex® 	Put silicone cup in the vagina each time you have sex. Leave it in for 6 hours after sex. It holds spermicide near the cervix and blocks sperm from reaching the egg. Always use with spermicide.	No	• Lasts up to 2 years. • You can get it with a prescription. • The Caya® diaphragm comes in one size. A clinician will fit you for a Milex® diaphragm. • Do not use if you have a vaginal infection. • Some people get irritation in the vagina or urinary tract, or bladder infections after using. • Using spermicide may raise the risk of getting HIV.	17 in 100 people get pregnant.
Emergency Contraception (EC) Pills Progestin EC (Plan B® One-Step and others) and ulipristal acetate (ella®) 	Take EC pills as soon as you can after unprotected sex. Works best the sooner you take it. Pills can work up to 5 days after unprotected sex. If the pack has 2 pills, take both together.	Your next monthly bleeding may come early or late. May cause spotting.	• There are two kinds of EC pills. One has the hormone progestin and one has ulipristal acetate (UPA). • You can get progestin EC without a prescription. You can get UPA with a prescription. • Progestin EC is sold at pharmacies, convenience stores, and online. Some college campuses and health departments have vending machines that sell it. • May cause nausea, headaches, dizziness, belly pain, or breast/chest pain for 1-2 days after. • Progestin EC pills do not work as well if your body mass index (BMI) is over 25. UPA EC does not work as well if your BMI is over 30. • Can take a pregnancy test 2-3 weeks after to make sure it worked.	The sooner you take EC pills, the better they work.

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Fertility Awareness Natural Family Planning  Rx NO Hormones	Predict fertile days (days you are most likely to get pregnant) by: taking temperature daily, checking vaginal mucus for changes, tracking your monthly bleeding, or doing at-home urine hormone tests. Avoid penis-in-vagina sex on fertile days or use a condom.	No	• Can help with avoiding or trying to get pregnant. • Works best if your cycles are regular. • There are many apps that can help you use these methods. • Works best if you use more than one of these methods: o **Temperature method:** Use a special thermometer (called a basal body temperature thermometer) and take it first thing in the morning. Can buy this thermometer at many stores or online. o **Urine hormone tests:** Test first thing in the morning. Can buy test strips at many stores or online. o **Vaginal mucus:** Need to see and feel the mucus each day.	Some of these methods work better than others. 2-34 in 100 people get pregnant.
The Implant Nexplanon®  Hormones	A clinician places this thin plastic rod under the skin of the upper arm. Once you have it, you do not have to do anything for it to work. It must be removed by a clinician.	May cause frequent spotting that is hard to predict. Monthly bleeding may be longer, shorter, or stop. Cramps may improve.	• Works for 5 years. • You can ask your clinician to remove it at any time. • Most implants cannot be seen, but you can feel it if you touch the skin over it. • May cause mood changes, weight gain, headache, acne, and/or skin changes in the upper arm. • After it is removed, you can get pregnant right away. • Contains a progestin hormone.	Fewer than 1 in 100 people get pregnant.
IUD: Copper Miudella,® ParaGard®  NO Hormones	This small T-shaped device is placed in the uterus by a clinician. Once you have it, you do not have to do anything for it to work. Usually removed by a clinician.	May cause stronger cramps and heavier, longer monthly bleeding.	• Miudella works for 3 years or more. Paragard works for 12 years or more. • You can ask your clinician to remove it at any time. Some people prefer to remove it themselves. • You will not feel the IUD in you. • Paragard can be used as emergency contraception. • Insertion can be painful. Ask your clinician about ways to make it more comfortable. • After it is removed, you can get pregnant right away.	Fewer than 1 in 100 people get pregnant.
IUD: Hormonal Liletta®, Mirena®, Skyla®, and others  Hormones	This small T-shaped device is placed in the uterus by a clinician. Once you have it, you do not have to do anything for it to work. Usually removed by a clinician.	May cause lighter monthly bleeding, spotting, or no monthly bleeding. Cramps may improve.	• Works for 3 to 8 years, depending on the IUD you get. • You can ask your clinician to remove it at any time. Some people prefer to remove it themselves. • You will not feel the IUD in you. • Some can be used as emergency contraception. • May cause bloating, nausea, headaches, or breast/chest soreness. • Insertion can be painful. Ask your clinician about ways to make it more comfortable. • After it is removed, you can get pregnant right away. • Contains a progestin hormone.	Fewer than 1 in 100 people get pregnant.

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The Patch Xulane® (Zafemy), Twirla  Hormones	Put on a new patch once a week for three weeks. No patch in week 4. Put the patch anywhere on your upper outer arm, belly, buttock, or back.	Can make monthly bleeding more regular, lighter, and shorter. May cause spotting. Cramps may improve.	• You can get it with a prescription. • May help with acne. • Can irritate the skin under the patch. • May cause nausea and/or breast/chest soreness. • Do not use during the first 3-6 weeks after childbirth. • You can get pregnant right after stopping the patch. • Contains estrogen and progestin hormones.	7 in 100 people get pregnant.
Phexxi  NO Hormones	Insert gel using the applicator deep into the vagina, like a tampon, each time you have sex.	No	• Works right away and lasts up to 1 hour. • You can get it with a prescription. • Can be put in as part of sex play/foreplay. • May irritate the vagina or penis. • Do not use if you have had a lot of vaginal infections, urinary tract infections, or other urinary problems.	14 in 100 people get pregnant.
The Pill Sprintec, Ortho-Cyclen, Junel FE, Apri  Hormones	Take the pill daily. After you finish a pack of pills, start a new pack the next day.	Can make monthly bleeding more regular, lighter, and shorter. May cause spotting. Cramps may improve.	• You can get it with a prescription. • May help with acne. • You can get pregnant right after stopping the pills. • May cause nausea and/or breast/chest soreness. • Some side effects can get better by changing brands. • Contains estrogen and progestin hormones.	7 in 100 people get pregnant.
Progestin-Only Pills Slynd, Camila, NorQD, Opill®  Hormones	Take one pill at the same time each day. After you finish a pack of pills, start a new pack the next day.	Can make monthly bleeding lighter and shorter. May cause spotting. Cramps may improve.	• Opill and a generic called norgestrel are the only options available without a prescription. You can get it at pharmacies, convenience stores, and online. • You can get other brands with a prescription. • May cause nausea, and/or breast/chest soreness. • You can get pregnant right after stopping the pills. • Contains a progestin hormone.	7 in 100 people get pregnant.
The Ring ANNOVERA® NuvaRing®  Hormones	Put the ring in the vagina. **Monthly ring (NuvaRing):** Change each month. Leave the ring in the vagina for 3 weeks (21 days). Then take it out for 1 week (7 days). **Yearly ring (ANNOVERA):** Change each year.	Can make monthly bleeding more regular, lighter, and shorter. May cause spotting. Cramps may improve.	• There are 2 types: a monthly ring and a yearly ring. • You can get it with a prescription. • One size fits all. • May help with acne. • May cause nausea and/or breast/chest soreness. • May slip out during sex or when you use the bathroom. • NuvaRing must be kept in the refrigerator. • You can get pregnant right after stopping the ring. • Contains estrogen and progestin hormones.	7 in 100 people get pregnant.

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The Shot Depo-Provera®  Hormones	Get a shot every 3 months (13 weeks). Give yourself the shot or get it in a health center or clinic.	May cause spotting, no bleeding at all, or longer bleeding. May take up to a year and a half for your period to return to normal after stopping the shots. Cramps may improve.	• Each shot works for up to 15 weeks. • Can improve PMS symptoms. • May cause weight gain, bloating, headaches, and/or mood changes. • Bones may become slightly thinner while taking the shot. This goes back to normal once you stop the shots. • May take months to get pregnant after you stop the shots. • Contains a progestin hormone.	4 in 100 people get pregnant.
Spermicide Cream, gel, sponge, foam, inserts, film  Rx NO Hormones	Insert spermicide deep into the vagina each time you have sex.	No	• Lasts up to 30 minutes. • Some types work right away, others start working after 10 minutes. • Can buy at many stores. • Can insert as part of sex play/foreplay • Comes in many forms: cream, gel, sponge, foam, inserts, film. • May irritate the vagina or penis. Changing brands may help. • Can be messy. • May raise the risk of getting HIV if used often.	28 in 100 people get pregnant.
Sterilization: Tubal Methods  NO Hormones	These methods involve a procedure to block or cut the Fallopian tubes so eggs cannot meet the sperm. During the procedure, a clinician reaches the tubes through your belly.	No	• Permanent • Must be done in an operating room. • Works right away. • During the procedure, the clinician may: put bands or clips on the tubes, use heat to seal the ends of the tubes, remove a piece of each tube, or remove the tubes completely. • Reversal is very difficult. Some procedures cannot be reversed. • May cause post-procedure pain and need some time to recover. • Rare complications include infection, bleeding, pain, and reactions to anesthesia.	Fewer than 1 in 100 people get pregnant.
Sterilization: Vasectomy  NO Hormones	This method involves a procedure where a clinician cuts the tubes in the scrotum that sperm move through. This stops the sperm from leaving the testes.	No	• Permanent • Can be done in the clinician's office. • Takes up to 3 months to work. • More effective, safer, and cheaper than tubal methods. • No general anesthesia needed. • Reversal is difficult and does not always work. • May cause post-procedure pain and bruising and need a day or two to recover. • Rare complications include infection, pain that does not get better, and bleeding. • Must go to a trained clinician for a vasectomy.	Fewer than 1 in 100 people get their partner pregnant.
Withdrawal Pull-out Rx NO Hormones	Pull penis out of the vagina before ejaculation (that is, before coming).	No	• Costs nothing. • Less pleasure for some. • Does not work if the penis is not pulled out in time. • Must interrupt sex.	20 in 100 people get pregnant.