g out pregnancy among family-planning clients in primary care.

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Abstract:

Where pregnancy tests are unavailable, health providers, fearing possible harm to fetuses, often deny contraception to nonmenstruating clients. In Kenya, a trial of a simple checklist to exclude pregnancy showed a good negative predictive value, which could improve access to service and reduce unwanted pregnancies and their sequelae. PIP: This report presents Kenya's checklist (consisting of six simple questions) for ruling out pregnancy among family planning clients; the questions are intended to improve access to service and reduce unwanted pregnancies and their sequelae. The checklist includes questions on most recent birth, duration and frequency of breast-feeding, duration since last menstrual period, duration since last abortion or miscarriage, abstinence from sexual relations, and current contraceptive practices. The checklist was administered and followed by dipstick pregnancy tests at seven family planning clinics in order to test its validity. The checklist ruled out pregnancy for 88% of women. The checklist¿s high negative predictive value (99%) should be regarded as the relevant statistic. Widespread use of this checklist could lessen restriction to contraceptives in many countries.