

## C6.2 – EMERGENCIES (MEDICAL AND NON-MEDICAL) & CONTRACEPTIVE ACCESS

### Purpose

The purpose of this policy is to ensure that all SRs have written plans for management of on-site medical and non-medical emergencies. Written plans should comply with all applicable local, state, and federal law.

### Policy

All Title X SR staff must be familiar with plans specific to medical and non-medical emergencies. Emergency guidelines are developed with input from Clinical Service Providers and should reflect local resources.

### Procedure

Natural and manmade disasters may occur that result in displacement of persons and loss of access to contraceptive methods. SRs will develop an emergency plan to assure the availability of prescription and nonprescription contraceptive methods for their clients in the event of a natural disaster (tornado, flooding, earthquake, ice storms, for example) or manmade disaster (hazardous waste spills and terrorism, for example). SRs must replace, per the client's last refill history, supplies equivalent to the number that the client had on hand when the disaster occurred. If the client has FPP, Medicaid or another third-party payer, the agency must provide supplies equivalent to the number needed until the agency is able to bill for another refill of contraceptives.

SR staff must develop plans specific to medical and non-medical emergencies:

#### *Medical Emergencies*

- Vaso-vagal reactions.
- Anaphylaxis.
- Syncope.
- Cardiac arrest.
- Shock.
- Hemorrhage.
- Respiratory difficulties.

#### *Non-Medical Emergencies*

- At a minimum, written protocols must address:
- Severe weather (tornado, flood).
- Fire.
- Intruder in the building.
- Intoxicated patient or client.
- Lost or abducted child.
- Bomb threat guidance.
- Chemical spill.
- Power failure.

Protocols must also be in place for emergencies requiring:

- Transport.
- After-hours management of contraceptive emergencies.
- Clinic emergencies

Date Revised	September 2023
References	Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs (QFP) [2014] <a href="https://www.hhs.gov/opa/guidelines/clinical-guidelines/quality-family-planning/index.html">             (https://www.hhs.gov/opa/guidelines/clinical-guidelines/quality-family-planning/index.html)           </a>
Additional Resources	