

# LAC+USC MEDICAL CENTER

## ATTENDING STAFF MANUAL

Subject: <b>USE OF TERATOGENIC AGENTS OR RADIATION THERAPY IN PATIENTS WHO ARE PREGNANT OR AT RISK FOR PREGNANCY</b>		Original Issue Date: 3/22/99	Policy # <b>ASA 100</b>
		Supersedes: 4/11/17	Effective Date: 5/4/2022
Departments Consulted: Medical Oncology Obstetrics and Gynecology Radiation Oncology Nursing Medical Administration Risk Management	Reviewed & Approved by: Pharmacy & Therapeutics Committee Cancer Committee Attending Staff Association Executive Committee Medical Center Administration	Approved by:  (signature on file) Attending Staff Association President	

### PURPOSE

To delineate guidelines to ensure safe and effective care for patients who are pregnant or at risk for pregnancy undergoing diagnostic studies, testing or treatment with teratogenic agents or radiation therapy.

### GUIDING PRINCIPLE

All patients at risk for pregnancy who are undergoing diagnostic studies, testing or treatment with teratogenic agents or radiation therapy shall have a pregnancy test according to these established guidelines.

If a patient is pregnant at the time of use of a teratogenic agent, treatment will be determined on an individual basis.

### DEFINITIONS

**Patients at risk for pregnancy:** All female patients between age 12 or onset of menses and age 55 unless one or more of the following are applicable:

- Last menstrual period greater than 1 year ago and FSH in menopausal range
- History of surgical sterilization or whole pelvis radiation therapy
- Intrauterine or implantable contraceptive placed greater than 30 days ago
- Continuous gonadotropin-releasing hormone (GnRH) agonist or antagonist therapy initiated greater than 30 days ago

**Teratogenic agents:** Radiation therapy, cytotoxic chemotherapy, and other medications with known or suspected teratogenic effects.

**Pregnancy test guidelines:** Serum or urine tests that have a sensitivity of < 25 milli-international units/mL. Given the higher sensitivity of serum human chorionic gonadotropin (hCG) detection of 15 milli-

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	ASA President's Initials:  On file	

international units/mL compared with a urine sensitivity of 20 milli-international units, recommendations for the use of either test should be based on a pretest probability of pregnancy.

**GUIDELINES**

The care of all patients at risk for pregnancy undergoing diagnostic studies, testing or treatment with teratogenic agents or radiation therapy must comply with the following guidelines:

- For radiation therapy - the results of a pregnancy test, obtained within 72 hours or less prior to the initiation of radiation therapy, must be discussed with the patient
- For diagnostic testing or treatment with teratogenic agents - the results of a pregnancy test, obtained within 72 hours or less prior to the administration of teratogenic agents, must be discussed with the patient. For sustained treatment, a pregnancy test must be repeated at least every 31 days or as clinically indicated

Patients of childbearing potential who are undergoing sustained treatments will be encouraged to use an effective and safe form of contraception

**RESPONSIBILITY**

Attending Staff  
House staff  
Nursing Staff  
Mid-Level Providers  
Medical Center Employees

**PROCEDURE DOCUMENTATION**

LAC+USC Medical Center Attending Staff Policy and Procedure Manual

**REVISIONS**

March 22, 1999; May 5, 2005; May 5, 2010; April 04, 2012; April 11, 2017; May 4, 2022