## **IUD Insertion Note**

I have identified this patient to be **(PATIENT NAME)**. I have updated their Obstetrical and Gynecological history in **(EHR)**.

(PATIENT NAME) is a (GxPx) presenting for an (Paragard/Mirena/Skyla/Liletta/Kyleena) IUD insertion. There (IS/IS NOT) a history of a prior cesarean section. They (HAVE/HAVE NOT) had unprotected sex since their last menstrual period.

I (DID/DID NOT) evaluate their contraindications to IUD placement: There is no current pregnancy, they are not postpartum within 6 weeks, there is no copper allergy for Paragard users, no progestin allergy for Mirena, Skyla, Kyleena and Liletta users, and no mucopurulent cervicitis.

We discussed the risks, benefits and alternatives to the IUD. I have answered all their questions about possible infection, complications and fertility after and during use. The risks we discussed included: bleeding and infection post procedure, risk for expulsion and the very small risk of pregnancy while using the IUD. **(PATIENT NAME)** has signed a consent and it is to be scanned into the record.

## Procedure Note for (IUD TYPES) IUD INSERTION:

Time out taken: **(TIME)**Team: **(NAME[s])** 

Following information identified:

(PATIENT NAME) (DATE OF BIRTH) confirmed (YES/NO)

Procedure: IUD placement (YES/NO)

Site (location and laterality) Intrauterine via cervix (YES/NO)

A no touch technique was used throughout the procedure. A speculum was placed into vagina and cervix was swabbed with betadine. Approximately (NUMBER) cc of 1% lidocaine were injected into the 12 o'clock position of the cervix (YES/NO:63). A tenaculum was placed. A plastic sound was advanced through the external and internal os until it reached the fundus of the uterus, the depth was (number) cm. The use of os finders or dilators (WAS/WAS NOT) needed. The sound was then withdrawn. The IUD was loaded in a sterile manner and advanced into position. The string was visualized and cut to (NUMBER) cm. Patient (DID/DID NOT) tolerated the procedure well. (NO) complications were noted.

The patient verbalized understanding that the IUD does not protect against STI's. The patient should use condoms for STI protection. Patient was instructed to return as needed for follow up care. I advised them to return sooner if any fever, pelvic pain or abnormal discharge developed. They clearly verbalized understanding of these instructions. I instructed them to take pain medication as needed and that their first few menstrual cycles may be heavier than usual. They were given a detailed instruction sheet about their IUD.

Skyla and Kyleena users are counseled to use condoms for the first 7 days post insertion. Paragard, Mirena, and Liletta users are counseled that they are protected from pregnancy immediately.

(PROVIDER NAME AND TITLE)

