**IUD Insertion Note**

I have identified this patient to be **(PATIENT NAME)**. Their gynecological history is {COMPLICATED:9078/uncomplicated}.

**(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/IS NO**) no current pregnancy, pelvic inflammatory disease, mucopurulent cervicitis, cervical cancer, endometrial cancer, or undiagnosed abnormal genital bleeding. There (**IS/IS NO**) copper allergy for Paragard users, and no progestin allergy for Mirena, Skyla, Kyleena, or Liletta users.

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 The sound was then withdrawn.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.

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)**