



# IUD and Implant Tips

Family Planning New Zealand

Christine Roke

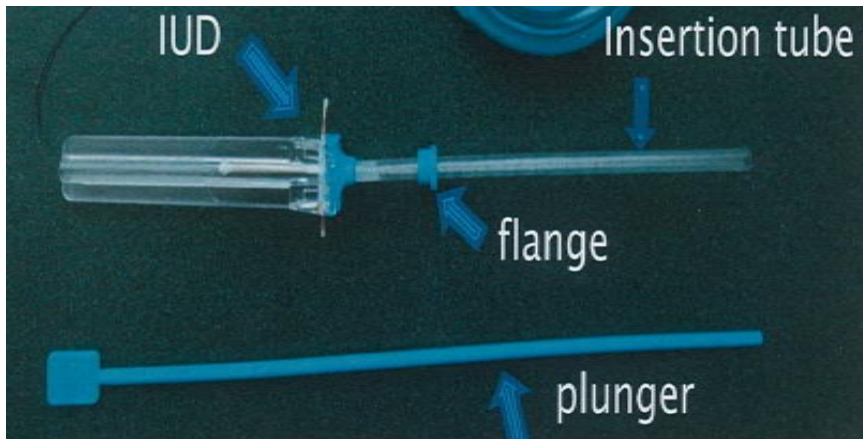
Beth Messenger



## IUD/IUS insertion

- After bimanual, sound uterus
- If too snug, use larger sound or 4mm dilator
- Read insertion instructions carefully

## CHOICE TT380



## Choice TT380

- To prevent IUD slipping back into inserting tube during insertion:
- Press inserter tip so oval rather than round
- Hold plunger against inserting tube

## Strings not visible

- Explore cervical canal with sinus forceps or use thread retriever
- Explore uterus with long handled crocodile forceps
- USS may be necessary – request add-on abdominal Xray if IUD/IUS not found in uterus to determine perforation vs expulsion

## Implant insertion

- Identify insertion site
- Consider skin conditions, tattoos, superficial veins
- “Tent” skin, don’t “inject”
- Adequate anaesthesia
- 2 rod implant v 1 rod implant.

## Implant removals

- Placement of incision
  - 2 rods v 1 rod
- Smaller volume of lidocaine, adrenaline helps
- Ensure rod/s complete after removal
- “stiffer” implant easier
- Patient anxiety after difficult insertion

## Difficult removals

- Change in weight during implant use
- Deep or very superficial insertion
- Curled or overlapped rods
- “Lost” rods – USS guided removal – limited options if still “lost”
- Broken rods