

# IUD Insertion Protocol

## Staffing/Clinic Coverage

A *medical provider* must be signed off to perform IUD insertions prior to initiating the IUD service at their site. The IUD observation evaluation form may be used for this purpose.

A *medical support person* (LPN, PCT, MA etc) must be available in the room during the procedure

Support person role:

- Witness the consent form
- Aid the medical provider with the handling of instruments
- Support the patient

Learners: Provider must ask patient if it is ok to have a learner in the room

- Medical students/NP students – observation only
- Medical residents – observation and hands-on training
- If a learner is present, additional LPN/PCT support person may not be needed

## Storage Space

A *LARC Instrument Cart* can serve for storage of both instruments and devices. The cart can also serve as a surface for instruments during the procedure. The cart must remain locked when not in use.

Sterilized instruments can be pre-packed and kept in the *LARC Instrument Cart* along with devices and other necessary supplies.

## Useful Documents

- Institutional consent form
- [IUD post-insertion instruction sheet](#)
- ["Which IUD is right for me?" handout](#)
- [Medical Eligibility Criteria](#)

## Supplies needed for IUD Insertion

IUD device	Speculum
Betadine or Chlorhexadine	Tenaculum
Chux for patient table	Ring forceps
Sterile drape for tray	Disposable uterine sound
Gel	Scissors
Sterile 4x4 gauze	13/15 Pratt dilator (optional)
Gloves	Sterile gloves (optional)
Adequate light source	Hot pack
Sanitary pad	

## Supplies needed for IUD Removal

Speculum  
Sponge forceps  
Gloves

## Preparation

To be done prior to insertion

- Urine pregnancy test
- Collect urine for GC/CT screen
- Administer Ibuprofen 400mg 2 tabs

## Consent form documentation for IUD

1. Patient must be able to provide consent
2. Indicate IUD insertion and specify WHICH TYPE of device
3. Risks: Pain, bleeding, infection, expulsion, perforation, failure
4. Have the witness sign the consent form

## “Time Out” Protocol

Consult with your institution to determine whether it is required to follow Joint Commission regulations regarding “Time Out” prior to a LARC insertion. Obtaining the consent in the presence of the involved staff may serve as an appropriate substitute. Otherwise, “time out” may include verifying the patient’s name and DOB prior to the procedure.

### **Patient visit and documentation**

- Review of IUD information, side effects, may review handout
- Documentation in the chart should include:
  - Negative pregnancy test
  - Lot/Expiration Date for Ibuprofen
  - Lot/Expiration Date for IUD device
- GC/CT screening at time of IUD insertion for all patients
- Fill out IUD card and give to patient
- Review of post-IUD instruction sheet for patient
- Schedule f/u appointment in 6 weeks for string check

### **Management of IUD Instruments**

LPN/PCT will soak dirty instruments in enzymatic cleaner, scrub any visually bloody areas, and then rinse the instruments, and let them air-dry. All used, dirty medical instruments must be kept in a “dirty” area of a room. Once dry the instruments are then packaged into bags to be autoclaved

Autoclaving on-site:

- Document training and certification in sterilization/infection control procedures.
- Maintenance of a log for machine runs, cleaning schedule, test results

Sterile instruments will then be kept in the LARC Instrument Cart.