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IUD CONSENT FORM

I have discussed the benefits, risks and side effects of using an intrauterine device (IUD) with my chosen GP. The nature of the insertion procedure has been fully explained to me and I have read the fact sheet on this method of contraception.
I understand that the use of an IUD carries risks. These include:-
 The doctor being unable to insert the IUD on the day Fainting after or during the procedure (this may require prolonged observation or an injection) ≤ 1% failure of the IUD to prevent pregnancy A high risk of miscarriage or premature delivery if pregnancy occurs and the IUD cannot be removed An increased chance of any pregnancy occurring being ectopic (in the tubes)* Changes to bleeding Infection* Perforation (going through the wall) of the uterus (womb)*. This may involve surgery to have the IUD removed The IUD partially or completely falling out
 Abdominal pain and irregular bleeding in the initial weeks after insertion An increase in vaginal discharge *These may effect fertility
I understand that the IUD must be removed within years, as it may not remain effective if left in place for longer. I am aware that it is my responsibility to arrange removal/replacement.
I understand the importance of excluding the possibility that I am already pregnant when the IUD is inserted. I have accurately reported to the doctor that the first day of my most recent normal period is/ (please complete) and/or given the doctor accurate information about recent sexual

	activity to ensure appropriate timing of insertion.					
	I understand that if I am having an IUD replacement, I should not have had unprotected sex for seven days prior to insertion (doctor to cross out if not applicable).					
	I understand that if I am having Mirena IUD insertion, it may take seven days to work in preventing pregnancy. I should not have unprotected sex for seven days after insertion.					
	I have been advised that I am unable to insert tampons, swim, take a bath or have vaginal sex for three days after insertion and to check for IUD strings after each period.					
	I have been advised to be reviewed by a doctor in six weeks after the IUD insertion or earlier if there are any concerns (as listed on the post-IUD information sheet).					
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l,	consent to the insertion of a IUD.					
I have initiate by me.	aled all of the above and acknowledge that this information has been understood					
Client's sig	nature					
15/09/2023	3					
Doctor's sig	gnature					
Dr						
15/09/2023	3					

IUD POST INSERTION INFORMATION

- 1. You may experience some cramping, pain and bleeding for the next 48 hours. You can continue to use Naproxen or Ibuprofen as directed.
- 2. To reduce the chance of infection, over the next three days:-
 - Avoid sex
 - Do not use tampons (pads are okay if you have bleeding)
 - Avoid baths, swimming and spas (showers are okay)
- 3. If you have had a Mirena® IUD inserted, it may not begin to work until seven days. Do **NOT** have at unprotected sex until then.
- 4. You will need to make an appointment in six weeks for a check up.
- 5. Please ring us if you experience any of the following:-
 - Cramping pain that is not relieved with Naproxen or Ibuprofen and is getting worse
 - Vaginal discharge with a smell
 - Heavy bleeding
 - Pain during sex
 - Fever
 - Sensation of the IUD in the vagina
- 6. You need to check for the IUD string after every period or once a month if you have no periods. If you cannot feel the string or feel the stem of IUD, do not have any further unprotected sex and ring the surgery as soon as possible. You may require emergency contraception (morning after pill).
- 7. If you think you may be pregnant, seek medical attention as soon as possible.
- 8. It is normal to have irregular bleeding and spotting in the first six months with a Mirena® IUD.
- 9. It is normal to have spotting between periods for two to three months with a copper IUD. You may also experience painful and heavier periods.