

Consent Form: Intra Uterine Contraception Device



I request an insertion of an Intra Uterine Contraception Device (IUCD) for:

- ☐ Contraception (Choice TT380 Copper /Mirena IUS)
- ☐ Treatment of Heavy Menstrual Bleeding (Mirena IUS)

Advantages of an IUD

1. Fit and forget - long acting reversible contraception
2. Very effective contraception (more than (99%)
3. Effective treatment for heavy menstrual bleeding (Mirena)
4. Mirena licensed for 5 years / Copper IUCD licensed for 10 years

Potential Insertion problems

1. Can be uncomfortable
2. If difficult to insert, may require a second appointment for insertion under anesthesia.

Potential side effects

1. Bleeding pattern likely to change
 - Copper IUCD - likely to make periods slightly longer, heavier and slightly more painful
 - settles within a few periods
 - Mirena - may cause irregular spotting / light bleeding which settles in a few months, or no periods
2. Small risk of infection when first inserted (approx. 1%)
3. Small risk of injury to the womb/uterus (perforation) (1:1000 higher when breastfeeding)
4. Small risk of expulsion/coming out by itself (5%)

Disadvantages

1. 1% failure rate
2. Pregnancy may be outside the womb/uterus (ectopic pregnancy)
3. Strings disappear - may be difficult to remove

The Advantages and disadvantages have been discussed with me (Patient)

I have had an opportunity to ask questions - ☐ Yes

Patients Name: _____

Signature: _____ **Date:** _____

Clinicians Name: _____

Signature: _____ **Date:** _____