

CONSENT FOR LEVONORGESTREL IUD INSERTION

I am requesting the insertion of a levonorgestrel intrauterine system to stop me becoming pregnant.

I have been given the opportunity to ask questions.

I understand that I should not have this device inserted if I have a pelvic infection or undiagnosed bleeding

I have been informed of and understand the advantages:

- It has a failure rate of 1%
- It can last 5 years (Mirena) or 3 years (Jaydess) and can be removed earlier should I wish

I have been informed of and I understand the possible risks:

- There is a small risk of perforation of the uterus at the time of insertion
- There is a small risk of expulsion of the device
- There is an increased risk of an ectopic pregnancy if I become pregnant while I have this device
- There is a small risk of infection
- The bleeding with my periods may change – I may have light or irregular bleeding, or after a time, no bleeding at all.
- I understand I must tell my doctor/nurse if I become pregnant while I have this device

Signature:

Date:

I have talked about the advantages and disadvantages of an intrauterine device and given the woman the opportunity to ask questions.

Name:

(Doctor/Nurse)

Signature:

Date