

# Contraceptive Implant (Jadelle) Insertion Checklist

For full information and pathways, see the [Contraceptive Implant](#) and [Contraceptive Implant Insertion](#) pathways.

## Pre-procedure

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|---|---|--------------------------|
| 1 | Discuss the benefits, side-effects, risks, suitability, and contraceptive efficacy. Provide <a href="#">patient information on long-acting contraceptive choices</a> . Offer all options. | <input type="checkbox"/> |
| 2 | Discuss cost and funding options.   | <input type="checkbox"/> |
| 3 | Check contraindications and cautions for implant insertion.<br>See the New Zealand Formulary (NZF) for full information - <a href="#">Levonorgestrel (Implant)</a> .                      | <input type="checkbox"/> |
| 4 | Offer a sexually transmitted infection (STI) check to all patients.<br>If the patient is at risk of pelvic inflammatory disease (PID), arrange an STI check.                              | <input type="checkbox"/> |
| 5 | Check the timing of the insertion. Give advice about the need for extra contraceptive precautions and/or a pregnancy test after insertion when appropriate.                               | <input type="checkbox"/> |
| 6 | Discuss how to avoid being at risk of pregnancy when the patient attends their implant insertion appointment. Give <a href="#">patient information</a> .                                  | <input type="checkbox"/> |
| 7 | Provide patient information on <a href="#">inserting a contraceptive implant</a> .  | <input type="checkbox"/> |

## Procedure appointment

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|----|--|--------------------------|
| 8  | Discuss again any issues that the patient would like to re-visit or clarify. Give the patient the opportunity to ask questions.  | <input type="checkbox"/> |
| 9  | Manage STI test results appropriately.   | <input type="checkbox"/> |
| 10 | Exclude current pregnancy.   | <input type="checkbox"/> |
| 11 | Obtain informed consent.   | <input type="checkbox"/> |
| 12 | Advise the patient to: <ul style="list-style-type: none"> <li>be aware of 5-year lifespan of the implant.</li> <li>use additional contraception for the next 7 days, if required.</li> <li>return for a pregnancy test in 4 weeks, if required.</li> </ul> | <input type="checkbox"/> |

## Post-procedure

- |    |   |                          |
|----|---|--------------------------|
| 13 | Complete documentation notifying that the insertion has been done.  | <input type="checkbox"/> |
| 14 | Give <a href="#">Post-implant Insertion Information</a> .   | <input type="checkbox"/> |
| 15 | Set appropriate recall dates in the patient management system (PMS) for: <ul style="list-style-type: none"> <li>pregnancy test, if required.</li> <li>implant removal.</li> </ul> | <input type="checkbox"/> |