

IUD Competency Checklist

Clinician: _____ Evaluator: _____ Date: _____

Circle IUD Type: copper (ParaGard), levonorgestrel (Mirena) (Skyla) (Liletta)

Prior to each type of proctored IUD placement, clinician demonstrates technique with a practice unit on a hand held model.

.DC = Developing Competence

- *Requires some verbal prompts, detailed instruction or hands-on help.*

C = Competent

- *Applies all counseling, placement, and removal skills without detailed verbal or hands-on help.*
- *Verbalizes management options for complex cases.*
- *Depending on individual procedural experience, skill acquisition, and confidence, competency is generally is attained after **3-10 proctored IUD placements**, with more as needed.*

Counseling/Patient Communication: Can verbalize, apply principles and skills in

Uses shared decision making to select method & type of IUD	DC	C
Reviews benefits, bleeding pattern, side effects of chosen IUD	DC	C
Obtains / confirms informed consent	DC	C
Explains risks: perforation, expulsion, infection & method failure	DC	C

History Taking

Excludes pregnancy	DC	C
Assesses indication for EC	DC	C
Assesses need for screening/testing: HCG, STI, Hgb	DC	C
Assesses need for back-up method if appropriate	DC	C

Placement and Removal Technique: Verbalized and demonstrated correctly

Assesses IUD tray setup	DC	C
Performs adequate bimanual exam	DC	C
Uses tenaculum traction during sounding & IUD placement	DC	C
Uses appropriate sound technique	DC	C
Loads device with sterile technique (no-touch or sterile gloves)	DC	C
Deploys device at uterine fundus and safely removes inserter	DC	C
Cuts string at appropriate length (3-4 cm)	DC	C

Placement and Removal Technique, continued:

Removes when strings present (model)	DC	C
Removal of instruments & sharps	DC	C
Provides effective anticipatory guidance during placement	DC	C
Communicates appropriately with proctor and patient during procedure	DC	C
Assesses and helps manage pain (during and post placement)	DC	C

Placement challenges: Verbalizes appropriate...

Adjustment of tenaculum or sound prn	DC	C
Use of os finder, or dilator to allow passage through internal os	DC	C

Patient challenges: Can verbalize appropriate management for...

Bleeding irregularities	DC	C
Missing strings	DC	C
PID with IUD in place	DC	C

Note: see IUD Protocol for reference

Formative Comments:

Evaluator Signature: _____ **Date:** _____



University of California
San Francisco

IUD Competency Checklist

New Device Only

Clinician: _____ Evaluator: _____ Date: _____

Circle IUD Type: copper (ParaGard), levonorgestrel (Mirena) (Skyla) (Liletta)

DC = Developing Competence

- Requires some verbal prompts, detailed instruction or hands-on help.

C = Competent

- Comfortable with basic counseling, placement, and removal skills, as well as management options for complex.
- Competence on skills outlined below for new device.

Counseling/Patient Communication: Can verbalize, apply principles and skills in

Reviews benefits, risks, bleeding pattern, side effects of chosen IUD	DC	C
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Placement and Removal Technique: Verbalized and demonstrated correctly on hand-held model

Loads device with sterile technique (no-touch or sterile gloves)	DC	C
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Deploys device at fundus and safely removes inserter	DC	C
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Formative Comments:

Evaluator Signature: _____ Date: _____

Secondary IUD Competency Checklist

Previously Trained Refresher Credentialing

Clinician: _____ Evaluator: _____ Date: _____

Circle IUD Type: copper (ParaGard), levonorgestrel (Mirena) (Skyla) (Liletta)

Estimate of prior skills and experience

IUD placements / years: _____

Advanced skills: Para-cervical block, dilation, US localization, instrumented removals...

Prior to each type of IUD placement, clinician reviews protocol, verbalizes understanding, demonstrates technique on hand held model, and completes proctored placements.

DC = Developing Competence

- Requires some verbal prompts, detailed instruction or hands-on help.

C = Competent

- Applies all counseling, placement, and removal skills without detailed verbal or hands-on help.
- Verbalizes management options for complex cases.
- Depending on individual procedural experience, hiatus in skills, and confidence, **refresher** competency is generally is attained after **1-5 proctored IUD placements**, with more as needed.

Counseling/Patient Communication: Can verbalize, apply principles and skills in

Uses shared decision making to select method & type of IUD	DC	C
Reviews benefits, bleeding pattern, side effects of chosen IUD	DC	C
Explains risks: perforation, expulsion, infection & method failure	DC	C
Obtains / confirms informed consent	DC	C

History Taking

Excludes pregnancy	DC	C
Assesses indication for EC	DC	C
Assesses need for screening/testing: HCG, STI, Hgb	DC	C
Assesses need for back-up method if appropriate	DC	C

Placement and Removal Technique: Verbalized and demonstrated correctly

Assesses IUD tray setup	DC	C
Performs adequate bimanual exam	DC	C
Uses tenaculum traction during sounding & IUD placement	DC	C
Uses appropriate sound technique	DC	C
Loads device with sterile technique (no-touch or sterile gloves)	DC	C
Deploys device at uterine fundus and safely removes inserter	DC	C
Cuts string at appropriate length (3-4 cm)	DC	C
Removes when strings present (model)	DC	C
Removal of instruments & sharps	DC	C
Provides effective anticipatory guidance during placement	DC	C
Communicates appropriately with proctor and patient during procedure	DC	C
Assesses and helps manage pain (during and after procedure)	DC	C

Placement challenges: Verbalizes appropriate...

Adjustment of tenaculum or sound prn	DC	C
Use of os finder, or dilator to allow passage through internal os	DC	C

Patient challenges: Can verbalize appropriate management for...

Bleeding irregularities	DC	C
Missing strings	DC	C
PID with IUD in place		

Note: see IUD Protocol for reference

Formative Comments:

Evaluator Signature: _____ **Date:** _____

Secondary IUD Competency Checklist

Experienced Provider in New Setting

Clinician: _____ Evaluator: _____ Date: _____

Circle IUD Type: copper (ParaGard), levonorgestrel (Mirena) (Skyla) (Liletta)

Estimate of prior skills and experience

IUD placements / years: _____

Advanced skills: Para-cervical block, dilation, US localization, instrumented removals...

DC = Developing Competence

- Requires some verbal prompts, detailed instruction or hands-on help.

C = Competent

- Applies all counseling, placement, and removal skills without detailed verbal or hands-on help.
- Verbalizes management options for complex cases.
- Depending on individual procedural experience, skill acquisition, hiatus, and confidence, competency is generally is demonstrated in **1-2 proctored IUD placements**, with more as needed.

Counseling/Patient Communication: Can verbalize, apply principles and skills in

Uses shared decision making to select method & type of IUD	DC	C
Reviews benefits, bleeding pattern, side effects of chosen IUD	DC	C
Obtains / confirms informed consent	DC	C
Explains risks: perforation, expulsion, infection & method failure	DC	C

History Taking

Excludes pregnancy	DC	C
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Assesses need for screening/testing: HCG, STI, Hgb	DC	C
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Placement and Removal Technique: Verbalized and demonstrated correctly

Assesses IUD tray setup	DC	C
Performs adequate bimanual exam	DC	C

Placement and Removal Technique, continued

Uses tenaculum traction during sounding & IUD placement	DC	C
Uses appropriate sound technique	DC	C
Loads device with sterile technique (no-touch or sterile gloves)	DC	C
Deploys device at uterine fundus and safely removes inserter	DC	C
Cuts string at appropriate length (3-4 cm)	DC	C
Removes when strings present (model)	DC	C
Removal of instruments & sharps	DC	C
Provides effective anticipatory guidance during placement	DC	C
Communicates appropriately with proctor and patient during procedure	DC	C
Assesses and helps manage pain, during and after procedure	DC	C

Placement Challenges: Verbalizes appropriate...

Adjustment of tenaculum or sound prn	DC	C
Use of os finder, or dilator to allow passage through internal os	DC	C

Patient Challenges: Protocol review & verbalize management

Bleeding irregularities	DC	C
Missing strings	DC	C
PID with IUD in place	DC	C

Note: see IUD Protocol for reference

Formative Comments:

Evaluator Signature: _____ **Date:** _____