**LARC Knowledge for Trainees**

|  |  |  |  |
| --- | --- | --- | --- |
| **In contraceptive counseling, for the following patient characteristics (assume no other contraindications), which of the following best describes best practices regarding IUDs?** | | | |
|  | **Include as an option routinely** | **Include as an option only if other options are unacceptable** | **Never include as an option** |
| A patient with a history of ectopic pregnancy | ☐ | ☐ | ☐ |
| A patient under the age of 19 | ☐ | ☐ | ☐ |
| A patient with a history of an STI in the last 2 years | ☐ | ☐ | ☐ |
| A nulliparous patient | ☐ | ☐ | ☐ |
| A patient who is single | ☐ | ☐ | ☐ |
| A patient with a history of PID in the past 5 years | ☐ | ☐ | ☐ |
| A patient with a diagnosis of endometrial cancer | ☐ | ☐ | ☐ |
| A patient who has sex for money | ☐ | ☐ | ☐ |
| A patient awaiting treatment for cervical cancer | ☐ | ☐ | ☐ |
| A patient age 20 or older who currently has more than one sexual partner | ☐ | ☐ | ☐ |
| A patient who is HIV positive but clinically well | ☐ | ☐ | ☐ |
| A patient under the age of 19 who currently has more than one sexual partner | ☐ | ☐ | ☐ |
| A patient with diabetes | ☐ | ☐ | ☐ |
| A patient who smokes one pack per day | ☐ | ☐ | ☐ |
| A patient with a seizure disorder on Lamictal | ☐ | ☐ | ☐ |
| A patient who has migraines with aura | ☐ | ☐ | ☐ |
| A patient who has heavy menses from fibroids | ☐ | ☐ | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **For each of the following statements, please indicate whether it is true or false.** | | | |
|  | **True** | **False** | **Unsure** |
| Currently available IUDs are safe | ☐ | ☐ | ☐ |
| It is necessary to have results from a recent GC/Chlamydia test before inserting an IUD | ☐ | ☐ | ☐ |
| IUDs can be inserted at any point during the menstrual cycle | ☐ | ☐ | ☐ |
| IUDs cannot be inserted immediately post-partum | ☐ | ☐ | ☐ |
| IUDs can be inserted immediately after an early aspiration abortion (during the same procedure) | ☐ | ☐ | ☐ |
| The risk of becoming pregnant with an ectopic pregnancy in an IUD user is higher than that in someone not using a contraceptive method | ☐ | ☐ | ☐ |
| The copper IUD is an effective form of post-coital (“emergency”) contraception | ☐ | ☐ | ☐ |
| Studies show the Copper IUD is effective for 12 years and the LNG IUD 52 mg (Mirena) is effective for 7 years | ☐ | ☐ | ☐ |
| The contraceptive implant (Nexplanon) can be used in women who smoke, have diabetes, or high blood pressure | ☐ | ☐ | ☐ |
| The best way to switch from pills to a hormonal IUD is to insert the IUD while the patient is still taking the pill and have her continue it for one week after the IUD insertion | ☐ | ☐ | ☐ |
| When switching from a nexplanon to a copper IUD, even if the switch is made on the same day, there is no need for a back up method for a week | ☐ | ☐ | ☐ |
| When switching from an IUD to pills, it is best to take the pills for a week and then remove the IUD, if the patient doesn’t mind the wait | ☐ | ☐ | ☐ |