



PROCEDURE FOR DELAYED POSTPARTUM INSERTION OF THE IUD FOLLOWING VAGINAL OR CESAREAN DELIVERY

1. Follow the Non-OR Universal Protocol for IUD placements.
2. **Offer a dose of postpartum pain medication** one hour before the time of insertion.
3. **Have the patient void prior to the procedure.**
4. **Digitally confirm that the cervix is sufficiently dilated** for postpartum insertion.
5. **Place a bivalve speculum** into the patient's vagina to expose the cervix.
6. **Insert the IUD under ultrasound guidance** following the guidelines for the specific IUD type. Hormonal IUDs can be inserted using their inserter or with ovum forceps. Copper IUDs can be inserted using ovum forceps. Manual insertion is not possible postpartum.

INSERTER (HORMONAL IUD ONLY)

Slide back the flange (ring) all the way to the handle.

Bend the inserter at the base of the sheath just above the handle to facilitate insertion.

Pass the inserter into the lower uterine segment under ultrasound guidance, and pull back the slider until the top of the slider reaches the mark (raised horizontal line on the handle).

Wait 10 seconds, then advance the inserter to the uterine fundus.

Pull the slider all the way back, releasing the IUD at the fundus, then carefully remove the inserter from the uterus.

If the inserter is defective, or is too short (as may be the case with obese patients), the IUD may also be inserted ovum forceps, as outlined to the right.

Trim the strings of the IUD at the level of the cervix.



OVUM FORCEPS

Remove the IUD from the inserter.

Using an ovum/placenta forceps, grasp both the stem and the arm of the IUD. *Do not use a ring forceps*, it will not be long enough to reach the fundus.

Place the IUD at the fundus under ultrasound guidance.

Open the forceps, allowing the IUD to remain at the fundus.

Remove the forceps carefully, by gliding the forceps against the uterine side wall, keeping them open so as to not inadvertently grasp the strings or the IUD.

8. **Do not inadvertently remove the IUD** when removing instruments from the vagina.
9. **Use ring forceps as a tenaculum** on the cervical anterior lip, if assistance is needed in passing the inserter or forceps through the lower uterine segment.
10. **Uterine (abdominal) massage** is permitted—*do NOT manually express the uterus* of clots after the IUD is placed. Uterotonics may be given as medically indicated.