

# Consent for Coil Removal

## Making my choice

I would like to have my coil removed today. The reason for this is (please tick relevant box):

<input type="checkbox"/>	I would like to use a different contraceptive or take a break
<input type="checkbox"/>	I no longer require contraception as I'm not sexually active with a fertile male
<input type="checkbox"/>	I no longer require contraception or period control as I have reached the menopause
<input type="checkbox"/>	I would like to try for a pregnancy

## Return of fertility

I understand that when the coil is removed my background level of fertility will immediately return. I potentially could fall pregnant straight away if I am of a childbearing age. If I am of childbearing age, to avoid a pregnancy I am aware that I should avoid any unprotected sex in the seven days prior to coil removal.

## Procedure risks

I am aware that if my coil threads are 'missing' then the doctor will attempt to find them using a thread retriever. This is usually successful but if the threads remain hidden I'll be referred for an ultrasound scan to confirm the coil position, and removal will need to occur under ultrasound guidance. While awaiting a scan I should assume that the coil is missing and use another form of contraception if I wish to avoid pregnancy.

## Aftercare

I can resume sex and normal daily activities as usual as soon as I am ready following my coil removal.

**Print Name**

**Signature**

**Date**