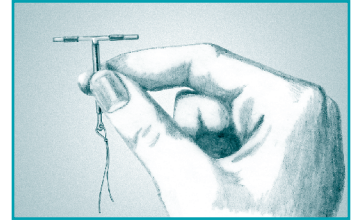


Consent for Using IUC (Intrauterine Contraception)

When you sign this consent form, it means that:

- ◆ Your Family PACT provider has told you about all the birth control methods.
- ◆ You have decided which birth control method is right for you.



Directions: Read each statement carefully. If you agree with the statements, sign your name on the line below.

- ◆ I understand that there are many birth control methods I could choose from. These include:
 - ❖ Pill
 - ❖ Patch
 - ❖ Ring
 - ❖ Shot
 - ❖ Implant
 - ❖ Diaphragm
 - ❖ Spermicides
 - ❖ Sponge
 - ❖ Cervical Cap
 - ❖ Condoms for Men
 - ❖ Condoms for Women
 - ❖ Intrauterine Contraception (IUC)
 - ❖ Natural Family Planning
 - ❖ Lactation Amenorrhea Method
 - ❖ Fertility Awareness Method
 - ❖ Sterilization for Men
 - ❖ Sterilization for Women
- ◆ My Family PACT provider has explained how the IUC will be placed inside my uterus.
- ◆ I have been told that there are two types of IUCs – ParaGard and Mirena. I have been told how each IUC works to prevent pregnancy.
- ◆ I have been told that if 100 women use IUC for a year, at most only 1 woman will get pregnant.
- ◆ I understand that I can use either IUC and that:
 - ❖ ParaGard has copper in it and works for up to 10 years
 - ❖ Mirena has a hormone in it and works for up to 5 years.
- ◆ I have been told about the benefits and risks of using either IUC. We have discussed any health problems I may have.
- ◆ I have been told that the possible side effects include cramping when either IUC is put in and spotting right after it is put in. I have also been told that:
 - ❖ With ParaGard, I may have heavier or longer periods.
 - ❖ With Mirena, I could have very light periods, no periods or spotting between period, headaches, dizziness, nausea, sore breasts or acne. For most women, these get better after 3 to 6 months.
- ◆ I have been told that complications include:
 - ❖ Infection or Pelvic Inflammatory Disease (PID)
 - ❖ A tear or hole in the uterus
 - ❖ The IUC coming out part way or all the way
 - ❖ Pregnancy outside the uterus

- ◆ I have been told that the warning signs of complications include:
 - ❖ Late periods
 - ❖ Abnormal spotting or bleeding
 - ❖ Abnormal discharge
 - ❖ Pain in the abdomen
 - ❖ Pelvic pain
 - ❖ Fever or chills
 - ❖ Painful sex
 - ❖ Can't feel the string
- ◆ My Family PACT provider has talked to me about whether the IUC would be right for me, especially if any of the following is true:
 - ❖ Have had an infection of the uterus or tubes in the past year
 - ❖ Have had vaginal bleeding for no known reason
 - ❖ Have had a pregnancy in my tubes
 - ❖ Have ever had breast cancer (Mirena only)
- ◆ I have been told that using an IUC does not protect me from HIV or other infections that people get from having sex. Using condoms can help protect against such infections.
- ◆ I have been told what to do if I want to stop using the IUC:
 - ❖ I must come back to a health care provider to have it taken out.
 - ❖ I must not take it out myself.
- ◆ I have been given written information about the IUC that I have chosen in a language I understand.
- ◆ My Family PACT provider has answered all my questions.

Based on this information, I have freely chosen to use _____
 as my method of birth control. (name of IUC)

Signature: _____

Date: _____