

2.5 IUC Complications: Uterine Perforation

DEFINITION:	Acute uterine perforation during insertion, either by the uterine sound or the IUC. This may result in a medical emergency.
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SUBJECTIVE:	<u>May include</u> complaints of: <ol style="list-style-type: none">1. Sudden onset of intense pelvic pain.2. Cramping.3. Dizziness.
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OBJECTIVE:	<u>May include:</u> <ol style="list-style-type: none">1. Excessive uterine depth (greater than expected from bimanual exam) on sounding or with introduction of IUC.2. Abrupt loss of uterine resistance during sounding or during IUC placement.3. Patient tachycardia, diaphoresis, hypotension, bleeding or syncope.
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ASSESSMENT:	Possible uterine perforation.
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PLAN:	<ol style="list-style-type: none">1. Attempt to gently retract and remove IUC<ol style="list-style-type: none">a. If excessive resistance is encountered when removing sound or IUC STOP.b. Provide supportive care prn (e.g. ambu bag, O₂).c. Consult physician and/or refer to ER immediately.d. Arrange transportation appropriate to patient's condition.2. If removal successful provide supportive care, observe closely and call physician.<ol style="list-style-type: none">a. If physician advises further evaluation, arrange transportation appropriate to patient's condition.b. If physician advises that patient may go home after serial measurements of vital signs:<ol style="list-style-type: none">1) Provide alternative method of birth control.2) Advise strict pelvic rest for 48 hours.3) Have patient RTC in 1-2 weeks. May consider another IUC insertion attempt at that time.3. If uterine perforation occurs or is suspected <u>do not</u> place IUC.
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CLIENT EDUCATION:	Reinforce importance of ER referral and/or follow-up care.
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REFER/CONSULT TO PHYSICIAN:	See plan.
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