

1. Last Name	First Name	MI
2. Patient Number		
3. Date of Birth (MM/DD/YYYY)		
	Month	Day
		Year
4. Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Unknown <input type="checkbox"/> White		
5. Ethnic Origin <input type="checkbox"/> Hispanic Cuban <input type="checkbox"/> Hispanic Mexican American <input type="checkbox"/> Hispanic Other <input type="checkbox"/> Hispanic Puerto Rican <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unreported		
6. Gender <input type="checkbox"/> Female <input type="checkbox"/> Male		
7. County of Residence		

Request and Consent for Mirena® Levonorgestrel Releasing Intrauterine System

Voluntary Participation and Confidentiality Statement: Title X services are provided solely on a voluntary basis. Individuals must not be subjected to coercion to receive services or to use or not to use any particular method of family planning. Acceptance of family planning services must not be a prerequisite to eligibility for, or receipt of, any other service or assistance from or participation in any other programs of the applicant. This information is confidential and will be treated as such.

Birth control methods may have good or bad side effects or complications, which may be harmful to me. I have been told that the most frequent benefits, risks and side effects are those listed below. Others not listed may occur.

Mirena® (Levonorgestrel IUD) Use Effectiveness: 99.8 Percent

Benefits	Possible Risks/Disadvantages	Possible Side Effects
1. Highly effective contraception lasts five years	1. Infections occur within the first few days after Insertion (rarely)	1. Altered menstrual period first few months after insertion
2. Gives freedom for greater sexual spontaneity	2. IUD may go through the uterus. This is called perforation.	
3. Cost effective	3. The IUD may come out by itself (expulsion). Use of a backup birth control method would be required for expulsion.	
4. Decreased risk of ectopic pregnancy	4. No protection from sexually transmitted diseases including HIV	
5. Less blood loss during periods		
6. Convenient		

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- I do not wish to become pregnant now. One benefit of choosing a method of birth control is that I will be better able to delay a pregnancy until it is desired.
- All contraceptives offered by this clinic have been explained to me. I may change to another method if medically recommended. Also, I may stop using a birth control method if I wish to become pregnant. Instructions for the use of my chosen method have been given to me.
- I understand that to continue the use of the Mirena® IUD, I must come to the clinic for a check up after insertion (1–3 months as determined by the healthcare provider) and my yearly check up thereafter. It is my responsibility to schedule my follow up appointment at the time determined at the visit and for my yearly health check. I also understand it is my responsibility to check for IUD strings monthly and call my healthcare provider if I am unable to locate the strings.
- I understand if any of the following danger signs occur severe abdominal pain, unexplained fever or fever after insertion, pelvic pain or pain during sex, unusual vaginal discharge, genital sores, cannot feel the IUD strings, have severe or prolonged vaginal bleeding, or if partner has sexually transmitted disease, I know to seek medical attention immediately.

