

Contraception Implant Insertion and Removal: About this Procedure

What is a contraceptive implant?

A **contraceptive implant** is used to prevent pregnancy. It's a thin rod about the size of a matchstick that is inserted under the skin (subdermal) on the inside of your arm. Your doctor numbs the area and "injects" the implant under your skin. No cuts are made in your skin. To remove the implant, your doctor numbs the area, makes a small cut in the skin, and pulls the implant out.

The implant can only be inserted by your doctor or another trained health professional. It only takes a few minutes and it can be done right after you give birth. Your doctor will remove the implant when it needs to be taken out.

How does the implant work?

The implant releases the hormone progestin to prevent pregnancy.

Progestin prevents pregnancy in these ways:

- It thickens the mucus in the cervix. This makes it hard for sperm to travel into the uterus.
- It also thins the lining of the uterus, which makes it harder for a fertilized egg to attach to the uterus.
- It can sometimes stop the ovaries from releasing an egg each month (ovulation).

The implant prevents pregnancy for 3 years. But your doctor may talk to you about leaving it in for longer. Once it is put in, you don't have to do anything else to prevent pregnancy.

How well does it work?

The implant works very well. Fewer than 1 out of 100 women have an unplanned pregnancy.

Be sure to tell your doctor about any health problems you have or medicines you take. They can help you choose the birth control method that is right for you.

What are the advantages of the implant?

The implant:

- Is one of the most effective methods of birth control.
- Prevents pregnancy for up to 3 years. You don't have to worry about birth control for this time.
- Is safe to use while breastfeeding.
- Doesn't contain estrogen. You can use it if you don't want to take estrogen or can't take estrogen due to your certain health condition.
- May reduce heavy bleeding and cramping.
- Is convenient. It is always providing birth control and cannot be seen. You don't need to remember to take a pill or get a shot. You don't have to interrupt sex to protect against pregnancy.

What are the disadvantages of the implant?

The implant:

- Doesn't protect against sexually transmitted infections (STIs), such as herpes or HIV/AIDS. If you aren't sure if your sex partner might have an STI, use a condom to protect against infection.
- May cause irregular periods, or you may have spotting between periods. You may also stop getting a period. Some women see having no period as an advantage.
- May cause mood changes, less interest in sex, or weight gain.

- You must see a doctor to have an implant inserted and removed.

How do I prepare for my implant insertion?

Your provider will make every attempt to complete this procedure during the scheduled time, however, sometimes a second visit may be needed depending on your circumstances. On the day of the endometrial biopsy, you will have a pregnancy test. Your provider may recommend against having a procedure if there is any chance that you could be pregnant at the time of your visit. If it is possible you may become pregnant before the procedure you should:

- Abstain from intercourse 2 weeks before your appointment
or
- Use a method of birth control regularly for 2 weeks before your appointment
or
- You may schedule your appointment within the 7 days before the start of your period.

Some, but not all, insurance companies cover the cost of the device and the procedure. Please take the time to determine how you will handle the cost or payment.

- You **must** call your insurance company using the number on the back of your card to confirm whether they will pay for the IUD service, insertion and clinic visit. Also, ask what costs you will be responsible for. We can never guarantee insurance coverage.
- The codes you will need to give your insurance company to check coverage are:
 - **Nexplanon: J7307**
 - **Insertion code 11981**
- You will be asked to sign a waiver stating that you understand you may be asked to pay any charges not covered by your insurance. If you cannot or

will not sign that waiver, you cannot have an implant inserted and will need to consider other contraceptive options.

What can I expect after insertion?

The implant starts working in 7 days to prevent pregnancy. You may need a back-up method for the first 7 days after implant placement to prevent pregnancy.

How can I care for myself at home?

After the numbness in your arm wears off, you may have some soreness for 1-2 days where the implant was inserted. You may have some swelling, bruising, or discoloration for up to 2 weeks.

- Take an over-the-counter pain medicine, such as acetaminophen (Tylenol), ibuprofen (Advil, Motrin), and naproxen (Aleve) if needed. Read and follow all instructions on the label.
 - Do not take 2 or more pain medicines at the same time unless your doctor told you to. Many pain medicines have acetaminophen (Tylenol). Too much acetaminophen can be harmful.
- You can also use cold packs to reduce pain and swelling.
- Keep the pressure dressing (elastic bandage) on for 24 hours and keep it dry. After 24 hours, you can remove the dressing.
- Keep the bandage strip on your skin for 3-5 days.
- Try not to bump the place where the Nexplanon was put in for a few days.
- You may return to school or work after your visit.
- You can go back to normal daily activities immediately after the implant has been put in.

After the incision has healed, you don't have to worry about bumping it or putting pressure on it. You can hold your child, carry books, do housework, or do whatever you usually do.

When should I call for help?

Call your health care provider if you have any of the following symptoms:

- Redness, warmth, drainage, or persistent pain from insertion site.
- Fever over 101 degrees Fahrenheit

Where can I learn more?

To learn more about contraceptive implants follow these instructions:

1. Log into your patient portal at <http://www.MyUofMHealth.org>
2. Open the menu
3. Click "Search Healthwise Health Library"
4. Enter F276 in the search box and click the "Birth control" link.

Disclaimer: This document contains information and/or instructional materials developed by University of Michigan Health for the typical patient with your condition. It may include links to online content that was not created by U-M Health and for which U-M Health does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan

Author: Charisse Loder, MD

Reviewers: Rosalyn Maben-Feaster, MD

Edited by: Karelyn Munro BA

Patient Education by [University of Michigan Health](#) is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International Public License](#). Last Revised 01/2022