

Instruments and Supplies for Insertion and Removal of Hormonal Implants

Stockouts of contraceptive commodities and other needed equipment, instruments, and supplies for family planning provision are commonly reported in service programs. Unavailability of either the method itself or of other needed instruments and supplies means that implants services are also unavailable. Thus, attention to logistics is critical, and must include instruments expendable medical supplies as well as the contraceptive implant itself. The table below indicates which instruments and supplies are needed for both insertion and removal of the hormonal implants currently available: Implanon, Jadelle, and Sino-implant (II).

Instruments and Supplies	Insertion	Removal
Instruments (reusable)		
Light source (if no natural light at service site)	X	X
Clean tray	X	X
Cup, bowl, or gallipot	X	X
Holding forceps (5.5" or 14 cm)	X	X
Mosquito forceps (5" or 12.5 cm, curved, delicate)		X
Scalpel handle with blade*		X
Supplies (expendable)		
Implants	X	
Antiseptic soap and water	X	X
Sterile surgical drapes	X	X
One pair of sterile gloves**	X	X
Antiseptic solution, such as iodine	X	X
Local anesthetic	X	X
5 ml syringe with needle	X	X
Trocar #10***	X	
Sterile gauze****	X	X
Skin bandage or band-aid	X	X

* Scalpel may or may not need disposable blades; if needed, they should be ordered on a regular basis.

** Gloves need to be talc-free. They can be ordered talc-free (preferable), or else the talc should be removed prior to the procedure.

*** A trocar is not needed for insertion of Implanon, which comes in a sterile

insertion applicator. Jadelle and Sino-implant (II) may or may not come packaged with a disposable trocar.

**** To be used during insertion and at the end of procedure for pressure dressing (but does not need to be sterile if placed on top of skin bandage or band-aid).

Table developed through consensus by Cagatay L, Cordero C, and Jacobstein R (EngenderHealth); Yacobson I (Family Health International); and Quinn H (Marie Stopes International); and formulated by Salem R (Johns Hopkins' Center for Communication Programs). April 2010.