LONG-ACTING REVERSIBLE CONTRACEPTIVES IN CRISIS SETTINGS

PRE-POST ONE-ROD (NEXPLANON) IMPLANT INSERTION AND REMOVAL SKILL CHECKLIST

Name of Participant:	Place of Posting:	
Name of Assessor:	Date of Assessment: Pre:	Post:

Instructions for the assessor:

- Set up the station for one-rod (Nexplanon) implant insertion and removal.
- Invite one participant at a time.
- Read the scenario given below.
- Tell the participant to demonstrate the insertion and removal steps.
- Enter scores in the checklist while observing the steps.
- Do not prompt or interfere while the participant performs.

Scenario

The woman has chosen to use the Nexplanon. Her eligibility has been assessed and confirmed. You have counseled her on what you will be doing and if she has any question. You have ensured all equipment, supplies, and light source are available, and that privacy is maintained. The woman has washed her arm with soap and water. You have positioned her arm with the elbow fixed and her hand behind her head. Now proceed with the steps of insertion and removal of Nexplanon.

Assessment Score: Write "Yes" if the step or task is performed satisfactorily; write "No" if the step or task is not performed satisfactorily, or "N/O" if not observed.

- SATISFACTORY: Performs the step or task according to the standard procedure or guidelines.
- UNSATISFACTORY: Unable to perform the step or task according to the standard procedure or guidelines.
- NOT OBSERVED: Step or task or skill not performed by learner during evaluation by clinical trainer.

		Assessment Score						
Step No.	Tasks	Pre-test	Post-Test	Comments				
Getting Ready								
1	Ensures that the required sterile or high- level disinfected instruments are present							
2	Removes the sterile Implanon NXT applicator with the preloaded implant from the package by allowing it to fall on the sterile tray without touching it							
3	Marks the position on the arm model for insertion of rod 8-10 cm proximal to the medial epicondyle and 3-5 cm posterior to the arm sulcus, above the triceps							
4	Washes hands thoroughly with soap and water and air dries them							
5	Puts on sterile gloves on both hands							
Inserts Implant								
6	Cleans insertion site with antiseptic, using a tissue forceps to hold a cotton or gauze swab soaked with antiseptic							

Injects 1-2 mL of 1% lidocaine just under the skin using a sterile syringe and needle, raising a wheal at the insertion point and advancing up to 5 cm along the insertion track						
Stretches the skin around the insertion site with thumb and index finger. Using the needle, punctures the skin at a 30° angle and inserts only up to the bevel of the needle						
While visualizing the needle, lowers the applicator to the horizontal position so that it is parallel to the surface of the skin while continuing to tent or lift the skin with the needle tip to ensure superficial placement						
While lifting the skin with the tip of the needle, slides the needle to its full length toward the guide mark, continuing to tent the skin as the trocar is advanced. Makes sure that the entire length of the needle is inserted under the skin						
While keeping the applicator in the same position and the needle inserted to its full length with one hand, unlocks the purple slider by pushing it slightly down						
Moves the slider fully back until it stops, leaving the rod now in its final subdermal position and locking the needle inside the body of the applicator						
Removes the applicator						
Removes Implant						
Palpates the rod to determine the point for removal and marks with a waterproof marker, where the tip of the rod is palpated						
Injects local anesthesia and makes a small (2 mm) incision below the end of the rod						
Gently pushes the end of the rod toward the incision with fingertip until the tip of the implant is visible						
Grasps the end of the rod with curved mosquito or Crile forceps						
Uses sterile gauze (or blunt side of scalpel) to clean off the fibrous tissue sheath that covers the tip of the rod						
Grasps the exposed end of the rod with second forceps and gently removes the rod						
	under the skin using a sterile syringe and needle, raising a wheal at the insertion point and advancing up to 5 cm along the insertion track Stretches the skin around the insertion site with thumb and index finger. Using the needle, punctures the skin at a 30° angle and inserts only up to the bevel of the needle While visualizing the needle, lowers the applicator to the horizontal position so that it is parallel to the surface of the skin while continuing to tent or lift the skin with the needle tip to ensure superficial placement While lifting the skin with the tip of the needle, slides the needle to its full length toward the guide mark, continuing to tent the skin as the trocar is advanced. Makes sure that the entire length of the needle is inserted under the skin While keeping the applicator in the same position and the needle inserted to its full length with one hand, unlocks the purple slider by pushing it slightly down Moves the slider fully back until it stops, leaving the rod now in its final subdermal position and locking the needle inside the body of the applicator Removes the applicator Implant Palpates the rod to determine the point for removal and marks with a waterproof marker, where the tip of the rod is palpated Injects local anesthesia and makes a small (2 mm) incision below the end of the rod Gently pushes the end of the rod toward the incision with fingertip until the tip of the implant is visible Grasps the end of the rod with curved mosquito or Crile forceps Uses sterile gauze (or blunt side of scalpel) to clean off the fibrous tissue sheath that covers the tip of the rod with second forceps and gently	under the skin using a sterile syringe and needle, raising a wheal at the insertion point and advancing up to 5 cm along the insertion track Stretches the skin around the insertion site with thumb and index finger. Using the needle, punctures the skin at a 30° angle and inserts only up to the bevel of the needle While visualizing the needle, lowers the applicator to the horizontal position so that it is parallel to the surface of the skin while continuing to tent or lift the skin with the needle tip to ensure superficial placement While lifting the skin with the tip of the needle, slides the needle to its full length toward the guide mark, continuing to tent the skin as the trocar is advanced. Makes sure that the entire length of the needle is inserted under the skin While keeping the applicator in the same position and the needle inserted to its full length with one hand, unlocks the purple slider by pushing it slightly down Moves the slider fully back until it stops, leaving the rod now in its final subdermal position and locking the needle inside the body of the applicator Removes the applicator Implant Palpates the rod to determine the point for removal and marks with a waterproof marker, where the tip of the rod is palpated Injects local anesthesia and makes a small (2 mm) incision below the end of the rod Gently pushes the end of the rod toward the incision with fingertip until the tip of the implant is visible Grasps the end of the rod with curved mosquito or Crile forceps Uses sterile gauze (or blunt side of scalpel) to clean off the fibrous tissue sheath that covers the tip of the rod Grasps the exposed end of the rod with second forceps and gently	under the skin using a sterile syringe and needle, raising a wheal at the insertion point and advancing up to 5 cm along the insertion track Stretches the skin around the insertion site with thumb and index finger. Using the needle, punctures the skin at a 30° angle and inserts only up to the bevel of the needle While visualizing the needle, lowers the applicator to the horizontal position so that it is parallel to the surface of the skin with the needle tip to ensure superficial placement While lifting the skin with the tip of the needle, slides the needle to its full length toward the guide mark, continuing to tent the skin as the trocar is advanced. Makes sure that the entire length of the needle is inserted under the skin While keeping the applicator in the same position and the needle inserted to its full length with one hand, unlocks the purple slider by pushing it slightly down Moves the slider fully back until it stops, leaving the rod now in its final subdermal position and locking the needle inside the body of the applicator Removes the applicator Implant Palpates the rod to determine the point for removal and marks with a waterproof marker, where the tip of the rod is palpated Injects local anesthesia and makes a small (2 mm) incision below the end of the rod Gently pushes the end of the rod toward the incision with fingertip until the tip of the implant is visible Grasps the end of the rod with curved mosquito or Crile forceps Uses sterile gauze (or blunt side of scalpel) to clean off the fibrous tissue sheath that covers the tip of the rod with second forceps and gently			

Total Score: 19	Pre-Test Score:	/19	Post-Practice Score:	/19