



Name:

FSRH  
10-18 Union Street  
London, SE1 1SZ  
www.fsrh.org  
Support@fsrh.org  
+44 (0)20 7724 5647

# Logbook for the Letter of Competence in Intrauterine Techniques (LoC IUT)

Training requirements are set out in the '[Syllabus for Letter of Competence in Intrauterine Techniques](#)'

**DO NOT SUBMIT TO FSRH.**

The logbook will be completed during training but does not need to be sent to the FSRH. It should be retained until the LoC IUT has been awarded by the FSRH. There is a separate [application form](#) which is available on the website.

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Further copies of the assessments within the logbook can be printed as necessary.

## 1. List of all trainers with signatures and registration numbers

Name (BLOCK CAPITALS)	Signature	Faculty qualification numbers	
		LoC IUT	FRT (if applicable)
Primary:			
Secondary:			
Secondary:			

Name of applicant:
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## 2. Confirmation of Entry Requirements

Relevant certificates must be shown to the primary trainer at commencement of clinical training.

Registration number of FSRH approved regulatory body e.g. GMC, NMC, IMC, NMBI	
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	Date awarded:
FSRH Diploma / Member / Fellow or OTA/eKA pass	

	Signature to self-certify competence:
Competent in speculum examination	
Competent in consultation skills	
Competent to give an intramuscular injection	
Familiar with current <a href="#">FSRH Clinical Guideline: Intrauterine Contraception</a>	

	Date completed:
e-SRH Module 15 (within three months of starting clinical assessments)	

	Date completed:
Anaphylaxis Training	
Basic Life Support	
Level 3 Safeguarding Children and Young People	
Level 2 Safeguarding Adults	

Name of applicant:

### 3. Model Uterus Training

Model uterus training (for standard and experienced route) must include different insertion techniques including those required for a banded T Cu-IUD and an LNG-IUD.

Date	Brand name of IUC	Trainer signature

Name of applicant:

## 4. Route of qualification

Please tick which route is applicable for this applicant:

- Standard Pathway:** a minimum of 7 competent insertions are required.
- Experienced Pathway:** a minimum of 2 competent insertions are required.

### A. Standard route

Practical Training Demonstration of an insertion by a trainer in a conscious patient	
Trainer signature	Date

### B. Experienced Practitioner Route

Completion of training under the 'experienced practitioner' pathway, as detailed below, is at the discretion of the Primary Trainer.

Please provide details and dates of previous relevant training or experience

### Log of previous IUC insertions in conscious women

This log must show twelve IUC insertions undertaken during the twelve months prior to the observed competent insertions.

Date of insertion	Brand name of IUC inserted

Name of applicant:

## 5. Assessments required

Qualification via either route requires one of each of Assessments A, B, D and E that is competent in all areas.

Assessment C should be completed for each observed insertion. You may prefer to use the summary tables on page 10.

Assessment A	Contraceptive choices consultation
Assessment B	Pre-insertion consultation
Assessment C	IUC fitting competency checklist (Standard Pathway: minimum 7 competent insertions; Experienced Pathway: minimum 2 competent insertions)
Assessment D	Managing immediate complications
Assessment E	Managing delayed complications

**Working towards competence:** Unable to perform steps independently or according to standard procedure OR trainee required prompting to progress through steps in correct sequence

**Competent:** Step or task performed independently and precisely in the correct sequence and according to standard procedure.

For both routes, the primary trainer must observe at least two insertions performed competently (this will usually include one of the final insertions) but any remaining insertions can be observed by other clinicians who hold the LoC IUT but are not required to be a FSRH Registered Trainer.

The insertions should include at least one Cu-IUD, one LNG-IUD and to include at least two different insertion mechanisms.

The FSRH Contraceptive Counselling Course is required to be completed before the LoC can be granted.

	<b>Date:</b>
<b>FSRH Contraceptive Counselling Course (<i>for those that do not hold the DFSRH</i>)</b>	

## 6. Assessment forms

(See following pages)

Name of applicant:

## Assessment A - Contraceptive choices consultation

<b>Date of assessment</b>			
<b>Brief Description of scenario</b>			
<b>Areas to consider</b>		<b>Working towards competence</b>	<b>Competent</b>
<b>History taking and physical examination</b> (including use of UK MEC, pregnancy and STI risk)			
<b>Clinical Judgement</b> (application of knowledge about suitable contraceptive methods)			
<b>Communication skills</b> (use of appropriate terminology/models/leaflets/clear instructions)			
<b>Planning ahead</b> (bridging contraception, starting regimes and practical considerations)			
<b>Professionalism</b> (non-judgemental, respectful and courteous)			
<b>Areas performed well</b>			
<b>Areas requiring development</b>			
<b>Learning plan</b>			
<b>Competent in all areas (please circle)</b>	<b>Yes / No</b>	<b>Trainer signature</b>	<b>Date</b>

Name of applicant:

## Assessment B - Pre-insertion consultation (IUC)

<b>Date of assessment</b>			
<b>Brief Description of scenario</b>			
<b>Areas to consider</b>		<b>Working towards competence</b>	<b>Competent</b>
<b>History taking and physical examination</b> (including use of UK MEC, pregnancy and STI risk)			
<b>Clinical Judgement</b> (use of knowledge about suitable types of IUCs, when fitting can be performed safely including in the emergency fitting of a Cu-IUD and consideration of STI screening)			
<b>Planning for fit</b> (contraception prior to fit e.g. bridging contraception and what to expect at fit, including options for evidence-based pain relief and control of anxiety during fitting)			
<b>Communication skills</b> (use of appropriate terminology/models/written information)			
<b>Professionalism</b> (non-judgmental, respectful and courteous)			
<b>Areas performed well</b>			
<b>Areas requiring development</b>			
<b>Learning plan</b>			
<b>Competent in all areas (please circle)</b>	<b>Yes / No</b>	<b>Trainer signature</b>	<b>Date</b>

Name of applicant:

## Assessment C - IUC fitting competency checklist

**Instructions for trainers:** Please assess each insertion, either by completing the form below for each IUC insertion procedure you observe, or by using the summary table on page 9 to record all insertions in the same place.

<b>Date of assessment:</b>		
<b>Procedure number:</b>		
<b>Device used:</b>	<b>Working towards competency</b>	<b>Competent</b>
<b>Obtains valid consent</b> Ensures no contraindication to method, no pregnancy risk and checks for allergies. Gives appropriate advice on insertion procedure. Counsels on adverse events. Confirms which device is to be fitted.		
<b>Pain management</b> Discusses current evidence-based strategies and interventions for reducing pain and anxiety associated with IUC insertion. Offer analgesia options and refer if their preferred method of analgesia is not available.		
<b>Equipment</b> Aware of the equipment required for the procedure.		
<b>Bimanual examination</b> Observes GMC/NMC guidelines on intimate examinations. Accurately assesses uterus and adnexae including tenderness, size, flexion and version.		
<b>Sounding the uterus</b> Accurately assesses uterine cavity length and position of uterus.		
<b>Device insertion</b> Demonstrates familiarity with introducing mechanism: demonstrates use of stabilising forceps, correct insertion technique and deployment of device at fundus.		
<b>Infection control</b> Demonstrates correct handwashing procedure. Uses aseptic 'no touch' technique.		
<b>Post-insertion</b> Ensures patient's recovery. Manages complications appropriately as they arise. Ensures fitting procedure is accurately documented.		
<b>Final discussion</b> Provides appropriate advice to patient about timing of effectiveness of device, possible complications and side effects, how to check device threads and when to return to clinic with problems.		



Name of applicant:

**Overall assessment of insertion procedure (please tick)**

**Competent**

IUC insertion performed satisfactorily in correct sequence and each step performed according to the standard procedure or guidelines – no prompting required (each of the steps listed above must be deemed satisfactory)

**Working towards competency**

One or more steps not performed correctly according to standard OR was omitted OR required prompting

Comments on procedure and suggestions to achieve competency:

Signed: \_\_\_\_\_ Date of assessment: \_\_\_\_\_

Name of assessor (BLOCK CAPITALS): \_\_\_\_\_

Name of applicant:

### Assessment C - Summary of insertions

Date									
Device type									
Obtains valid consent									
Pain management									
Equipment									
Bimanual examination									
Sounding the uterus									
Device insertion									
Infection control									
Post-insertion									
Final discussion									
Competent / Working towards competency									
Observed by									
Primary or secondary trainer									

## Assessment D - Managing immediate complications of IUC insertion

Date of assessment		
	Working towards competence	Competent
Describes when cervical dilatation is required and is aware of the local referral pathway for complex IUC fits.		
Describes what equipment is required for management of emergencies associated with IUC fitting.		
Describes rates of perforation, risk factors making perforation more likely and strategies to avoid perforation.		
Describes how to recognise and manage suspected uterine perforation at time of fitting IUC.		
Describes how to recognise the clinical features of vasovagal syncope/bradycardia associated with IUC fitting.		
Describes non-pharmacological management of vasovagal syncope/ bradycardia associated with IUC fitting.		
Describes current pharmacological management of vasovagal syncope/bradycardia.		

<b>Areas performed well</b>			
<b>Areas requiring development</b>			
<b>Learning plan</b>			
<b>Competent in all areas (please circle)</b>	<b>Yes / No</b>	<b>Trainer signature</b>	<b>Date</b>

Name of applicant:

## Assessment E - Managing delayed complications associated with IUC insertion

Date of assessment			
	Working towards competence	Competent	
Describes strategies to avoid pelvic infection associated with IUC fitting.			
Describes how to manage IUC related pelvic pain including investigation and onward referral as appropriate.			
Describes how to identify and manage pelvic infection including investigation and onward referral if appropriate.			
Describes how to identify and manage abnormal vaginal bleeding including investigation and onward referral if appropriate.			
Describes how to manage non-visible IUC threads and is aware of the referral pathway for appropriate investigation.			
Describes how to manage a positive pregnancy test in a woman using an IUC for contraception and is aware of the referral pathway for appropriate investigation.			
<b>Areas performed well</b>			
<b>Areas requiring development</b>			
<b>Learning plan</b>			
<b>Competent in all areas (please circle)</b>	<b>Yes / No</b>	<b>Trainer signature</b>	<b>Date</b>

Name of applicant:

## **7. Intellectual Property Rights**

All intellectual property rights for any FSRH qualification including documents, materials and content belonging to and produced by the FSRH should not be used for purposes other than FSRH training. Should you wish to use any of the IPR for purposes other than FSRH training you must seek the FSRH's approval in writing with your request via our [Copyright Request Form](#). We aim to respond to submissions of this nature within one working week.

## **8. FSRH Privacy Policy**

The FSRH is committed to protecting your privacy. Our [Privacy Policy](#) sets out how we collect, use, store and protect any information that you give us, in compliance with the requirements of the Data Protection Laws which are the EU General Data Protection Regulation (GDPR) (EU) 2016/679 and the UK Data Protection Act 2018.