



Association of Reproductive
Health Professionals

Comparative Contraception: Permanent and Reversible Options

Q&A with Anne A. Moore, DNP, APN-BC, FAANP

The following questions were submitted during Comparative Contraception: Permanent and Reversible Options webinar presented by Anne A. Moore on July 29, 2015. Questions have been edited for clarity and responses provided by Anne Moore.



Anne Moore is the women's health clinical trainer for the Division of Family Health and Wellness at the Tennessee Department of Health. Dr. Moore received her undergraduate and master's degrees from Vanderbilt University and her doctorate from the University of Missouri at Kansas City. She holds dual certification in women's and adult health and has maintained an active practice in Nashville for more than 25 years.

Questions & Answers

If a fifteen year old with an IUD has complications, can the clinician be in trouble with family members for not getting consent before insertion?

No, the patient is entitled to that choice. Because the patient signed the consent form, she is entitled to that method.

Can a teenager who is an athlete have the implant in her upper arm? Will implant interfere with these activities?

No, the implant should not impact sport activities.

Is iron deficiency due to irregular bleeding with implants or intrauterine contraception common? If so, what kind of care is suggested?

It is not common. Doing a CBC and finding out if there are co-factors involved is important—has the patient had a history prior to using a long-acting method; does the patient have a history of heavy menstrual flow? If the patient does, you might want to get a CBC or a hemoglobin hematocrit prior to putting the device on board and have her on multivitamins ahead of time. The devices themselves, with the exception of copper, will actually help because their flow will be decreased.

How soon after a depo injection can an implant be inserted?

Anytime.

Is it okay for a patient to donate plasma when she has an implant in her arm?

When the implant came out there was a concern about irregular bleeding, and association with the concern that there is more bleeding volume, but there is not. At the very worst, the bleeding stays the same in volume, but spreads out over different time frames. Over time, it appears the volume itself decreases. In any case, I would go to the other arm.