 **Jadelle Standing Order**

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| Issue date: |  | Review date: |  |

This standing order is not valid after the review date. The review date is one year after the date the order was signed by the issuer.

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| **Standing Order Name** | Long-acting reversible contraception |
| **Rationale** | To safely and appropriately supply long-acting reversible contraception to women. |
| **Scope (condition and patient group)** | Women who have no contraindications. Levonorgestrel is a progesterone only contraceptive, and prevents pregnancy by inhibiting ovulation, as well as preventing sperm penetration by altering cervical mucus.  |
| **Assessment** | 1. Check height, weight, BMI and smoking status2. Check BP3. Exclude pregnancy4. Check for contraindications and precautions5. Complete WellSouth portal protocol |
| **Indication** | **Long-acting reversible contraception** |
| **Medicine** | Levonorgestrel 2 x 75mg rods (**Jadelle**)  |
| **Dosage instructions** | Insert 2 levonorgestrel 75mg rods into the inner upper non-dominant arm under local anaesthetic (**lignocaine 1%**)  |
| **Route of administration** | Subdermal implant |
| **Quantity to be given** | 2 x rods to be inserted at the same time.  |
| **Contraindications** | * Pregnancy
* Current breast cancer - Past history of breast cancer is UK MEC 3, and it is recommended that the patient  be discussed with a specialist
* Unexplained vaginal bleeding
* Sensitivity to levonorgestrel or other component of Jadelle®
* Current or past liver tumour (benign or malignant) or severe liver disease
* Active venous thromboembolic disorder
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| **Precautions** | If the woman is on enzyme inducing drugs, you will need to contact a Medical or Nurse Practitioner for advice. |
| **Additional information** | Advise that Jadelle has high rates of effectiveness compared with other contraceptive options. The annual pregnancy rate per 100 users are

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|  | <60kg | >60kg |
| Year 1 | 0.1 | 0.2 |
| Year 2 | 0.1 | 0.2 |
| Year 3 | 0.1 | 0.3 |
| Year 4 | 0.0 | 0.0 |
| Year 5 | 0.8 | 1.1 |

Advise the women that other methods of contraception need to be used for 7 days if inserted after day 5 of menstrual cycle (and they have been using reliable contraception prior to insertion)Advise regarding side effects:* + - * Pain, tingling, bruising, scarring and/or infection at insertion site
			* Difficulty removing rods, with requirement for referral for removal
			* Frequent irregular bleeding – 14% removed
				+ 1 in 10 frequent bleeding
				+ 2 in 10 prolonged bleeding
				+ 2 in 10 no periods
				+ 3 in 10 infrequent spotting

Offer condoms |
| **Follow-up** | Jadelle provides protection for a period of up to five years. However, patients weighing over 60 kg may be offered to have the rods replaced after four years due to the possibility of reduced efficacy after this time (see annual pregnancy rates above).Ensure a recall is in place on computer for removal of the 2 x Jadelle rods at the appropriate time frame. Ensure the women knows that the Jadelle rods can be removed at any time.  |
| **Countersigning and auditing** | Countersigning is not required. Audited monthly.**OR** Countersigning is required within ***XX*** days |
| **Competency/training requirements** | All nurses working under this standing order must be signed off as competent to do so by the issuer and have had specific training provided by WellSouth in the insertion of Jadelle’s.  |
| **Supporting documentation** | Family Planning at [www.familyplanning.org.nz](http://www.familyplanning.org.nz) Healthpathways at [www.healthpathways.org.nz](http://www.healthpathways.org.nz) Best Practice Journal at [www.bpac.org.nz](http://www.bpac.org.nz) New Zealand Formulary at [www.nzf.org.nz](http://www.nzf.org.nz) Individual medicine data sheets at [www.medsafe.govt.nz](http://www.medsafe.govt.nz) Standing Order Guidelines, Ministry of Health, 2012Medicines (Standing Order) Regulations 2012 (Standing Order Regulations) |
| **Definition of terms used in standing order** | None |

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| **Medical Centre or Clinic:** |  |

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| **Signed by issuers** |

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Nurses operating under this standing order** |

Only Registered nurses working within the above medical centre or clinic are authorised to administer medication under this standing order.

We the undersigned agree that we have read, understood and will comply with this standing order and all associated documents.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_