# Implanon NXT Insertion competency - Clinical assessment tool

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HE#:

## Outcome

Demonstrates the required understanding and clinical skills required for Implanon NXT insertion.

## Preparation

* Supervisor must be a clinician currently competent in Implanon NXT insertion
* It is recommended that the initial Implanon NXT competency is completed within a 6 month period
* Documents for ongoing recording of Implanon NXT insertion are provided and may be utilised for reflective practice and performance review.

### Theory -

Group 1 (Initial competency)

* Read “Contraception” clinical practice guideline (WNHS 2024)
* Completion of Implanon NXT eLearning package and achievement of minimum 80% pass grade in final quiz
* Attendance at Implanon NXT insertion workshop

Group 2 (Previous experience)

* Completion of eLearning package and achievement of minimum 80% pass grade in final quiz
* Read “Contraception” clinical practice guideline (WNHS 2024)
* Workshop attendance not required

## Supervised practice

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| **Requirement Group 1 -Initial competency** | **Date** | **Supervisor Initial** |
| Completion of eLearning and attended workshop |  |  |
| Completion of a MINIMUM of 3 supervised Implanon NXT insertions  *At completion of the 3rd Implanon NXT insertion the supervisor will be required to recommend whether the clinician has met the standards for Implanon NXT insertion competency* |  |  |
| **Requirement Group 2 -previous Implanon NXT insertion training and/or competency in external HSP** | **Date** | **Supervisor Initial** |
| Required to complete a MINIMUM of 1 supervised Implanon NXT insertion documented on supervised practice record  *At completion of the Implanon NXT insertion the supervisor will be required to recommend whether the clinician has met the standards for Implanon NXT insertion competency* *and sign this form if applicable.* | | |
| * Examination 1 |  |  |
| **Ongoing Competency** | | |
| Confirmation on annual PDR document | | |

## Performance criteria

###### This checklist is for the staff member wanting to obtain competency and their supervisor to identify criteria required to safely perform the procedure. (A=achieved, NA= not achieved)

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| --- | --- |
| **Performance Criteria** | **A/NA** |
| **Preparation** | |
| Assess an individual’s suitability for Implanon NXT including:   * Determining any contraindication to Implanon NXT * Determine any contraindications to the use of antiseptic solution and use of local anaesthetic * Review the patient’s concurrent medicines and any potential interactions with etonogestrel * Determining the appropriate timing of Implanon NXT initiation, including exclusion of pregnancy prior to insertion and switching from another contraceptive method * Obtain informed consent for the procedure and document this in patient records. Upload signed consent to DMR. * Obtain/write a valid prescription for Implanon NXT and appropriate local anaesthetic |  |
| Provide advice about possible side effects and management options including:   * Bleeding patterns and other side effects of Implanon NXT * Follow up and management of adverse bleeding patterns and side effects |  |
| **Initial Assessment** |  |
| Set up the environment for the insertion using appropriate aseptic technique  Ensure there is adequate time, a good light source and complete set of equipment. |  |
| Prepare for insertion including:   * Position the woman lying on a bed, with her arm flexed and externally rotated, and her hand next to her head * Positioning themselves in relation to the woman allowing visualisation of the needle during insertion * Identify and mark the correct insertion site by palpating 3-5cm posterior to the sulcus between the biceps and triceps muscle, 8-10cm proximal to the medial epicondyle, in the non dominant arm * Clean the site with appropriate skin preparation (such as chlorhexidine) * Identify and administer appropriate local anaesthetic along a 4cm length (lignocaine hydrochloride 1% recommended) * Check the Implanon NXT applicator to ensure a white tip of the insert can be visualised |  |
| Insert the implant   * Pierce the skin at an angle of <30\* and then re-angle to a horizontal position to insert the implant superficially in the sub dermis * Tent the skin slightly as progressing the needle to ensure superficial insertion * Once the needle has been inserted the full length, depress the purple slider to retract the needle |  |
| Palpate both ends of the implant to confirm location |  |
| **Procedure** |  |
| Apply waterproof dressing then ask the woman to palpate the implant |  |
| Apply pressure dressing |  |
| Provide advice to the woman on self care relating to insertion including:   * Instructions on self palpation * Ongoing care required for dressing and pressure bandage * Documentation detailing insertion site, insertion date and date for removal |  |

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| --- | --- |
| **Recommendation** (to be completed by Supervisor)  ⃝ Competency achieved ⃝ Competency NOT achieved | |
| If the clinician has not met the standard for Implanon NXT competence please indicate what further evidence is required:  ⃝ Completion of pre-reading/e-learning package  ⃝ Completion of Implanon NXT workshop  ⃝ Additional supervised insertions, recommended number required \_\_\_\_\_\_\_  ⃝ Other (please specify) | |
| **Supervisor name:** | Designation: |
| **Signature:** | Date: |

This Implanon NXT insertion course has been designed to provide clinicians with the necessary knowledge and practical skills to be assessed as competent in Implanon NXT insertion. The program includes theoretical instruction and supervised practice to ensure participants are able to safely and effectively perform insertions in line with manufacturer guidelines and health service standards.

Participants will also be provided with knowledge regarding Implanon NXT removal; however, this course does not include clinical skills training or assessment in Implanon NXT removal. Completion of this course does not confer competence in Implanon NXT removal, nor will a certificate of competence for removal be issued. Clinicians seeking competence in Implanon NXT removal must undertake additional approved training and assessment.

This document can be made available in alternative formats on request.

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