PATIENT GUIDE

# What to Expect After Your IUD Removal

IUD removal is a quick, routine procedure, and most people feel completely normal within a day or two. Here's what's typical afterward, when to reach out to us, and what your options are if you're not ready to be without birth control — or if you're hoping to conceive.

## Prior to Your Appointment

- Take an over-the-counter pain reliever such as ibuprofen or acetaminophen (Tylenol) about 30 minutes before your appointment.
- Let us know if you've had a difficult removal before, if your strings weren't visible at your last check, or if you'd like to discuss extra pain management options such as Penthrox (the “green whistle”) inhaled gas.

## In the First 24–48 Hours

- Mild cramping, similar to period cramps, is common and usually settles within a day.
- Light spotting or brown discharge for a few days is normal.
- A heating pad and over-the-counter pain relief (e.g., ibuprofen) can help with cramping.
- You can return to normal activity, including exercise, right away if you feel up to it.

## In the Days and Weeks After

- Your natural cycle will return as the hormone from your hormonal IUD (e.g., Mirena, Kyleena) clears your system — this can take anywhere from a few days to a couple of months. Some people notice a return of PMS symptoms, acne, or mood changes they hadn't had while on the IUD — this is your natural hormone pattern returning, not a problem.
- Fertility returns almost immediately after your IUD is removed — you can conceive as early as your very next cycle. If you are not trying to become pregnant, have a backup method ready before your appointment.

### Call Us If You Notice:

- Bleeding that soaks through a pad or tampon every hour for 2+ hours
- Fever, chills, or foul-smelling discharge
- Severe or worsening pelvic pain (beyond typical period-like cramping)
- Signs you may be pregnant unexpectedly (missed period, pregnancy symptoms)

### Not Ready to Be Off Birth Control?

You don't have to leave your appointment without a plan. In many cases, we can insert a new IUD, Nexplanon implant, or discuss another method during the same visit as your removal — no need to book a separate appointment or go without coverage in between.

See the full list of options on the next page, or ask your provider what's the best fit for you.

PATIENT GUIDE

# Your Birth Control Options

There are several effective ways to prevent pregnancy. The table below gives a quick overview — methods marked with a checkmark are ones we can start or manage right here at Mint, often the same day.

| Method | How it works | How long it lasts | Effective Rate | At Mint |
|---|---|---|---|---|
| **Hormonal IUD** | T-shaped device in the uterus; releases hormone locally | 5–8 years | >99% | ✓ |
| **Copper IUD** | T-shaped device wrapped in copper wire; hormone-free | Up to 10 years | >99% | ✓ |
| **Implant (Nexplanon)** | Small rod under the skin of the upper arm; releases hormone | Up to 3 years | >99% | ✓ |
| **Birth control pill** | Daily oral hormone tablet | Taken daily | ~91% | ✓ |
| **Patch** | Adhesive patch changed weekly | Changed weekly | ~91% | ✓ |
| **Vaginal ring** | Flexible ring changed monthly | Changed monthly | ~91% | ✓ |
| **Injection (Depo-Provera)** | Hormone injection every 3 months | Every 3 months | ~94% | – |
| **Fertility awareness / cycle tracking** | Tracks ovulation signs to identify fertile days | Ongoing | 76–98% | ✓ |

✓ = performed at Mint  – = available by referral. Effectiveness reflects typical use.

• Switching is easy. If you'd like to try a different method than the one you just had removed, ask your provider — many switches can happen at the same visit.

## Thinking About Getting Pregnant?

If you're removing your IUD because you're ready to start or grow your family, here's how to set yourself up well:

- Start a prenatal vitamin with folic acid now — ideally at least 1 month before you start trying.
- Track your cycle so you know your fertile window; ovulation predictor kits or basal body temperature tracking can help pinpoint timing.
- Support your overall health — sleep, nutrition, stress management, and reducing alcohol/smoking all support fertility for both partners. Certain supplements and herbs (e.g., CoQ10, vitamin D, myo-inositol, or vitex/chasteberry) may also help — ask us which ones are right for you.
- Most people conceive within the first year of trying (about 85–90% under age 35). It's normal for it to take a few cycles.
- When to check in with us: reach out any time you'd like to discuss optimizing your fertility, if you haven't conceived after 6 months of trying, or if you have any concerns about your fertility.

### Mint's Fertility Assessment Program

We offer in-house fertility assessments — including ultrasound and bloodwork — to check ovarian reserve, cycle health, and uterine anatomy. It's a great next step whether you're just starting to try or want a head start on understanding your fertility. Ask us to book one anytime.

**Questions? We're here to help.**

Book online at mintreproductivehealth.com, or call our front desk to schedule your next visit.