



**PRACTICAL
LOG BOOK
FOR CHEW**

NURHI 2
NIGERIAN URBAN REPRODUCTIVE
HEALTH INITIATIVE

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
COUNSELING				
<ul style="list-style-type: none"> • Rule out pregnancy (Menstruation, abortion, miscarriage detail, if breast feeding, abstinence) 				
<ul style="list-style-type: none"> • Contraceptive use in the past, history of side effect 				
<ul style="list-style-type: none"> • Display of counseling cards 				
<ul style="list-style-type: none"> • Provision of FP information & display of FP method (samples) 				
<ul style="list-style-type: none"> • Explore the client's preferred FP options? 				
<ul style="list-style-type: none"> • Uses the medical eligibility criteria wheel or wall chart to screen client 				
<ul style="list-style-type: none"> • Determines the client's comprehension on the chosen method and reinforce key information, ask for clarification and ask client to return anytime (if need be) 				

PHYSICAL EXAMINATION	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Performs breast examination 				
<ul style="list-style-type: none"> Takes & document vitals 				
<ul style="list-style-type: none"> Other examinations (as applicable) 				
STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
COC				
<ul style="list-style-type: none"> Determines that the woman's contraceptive choice is the COC. 				
<ul style="list-style-type: none"> Reviews Client Screening Checklist to determine if the COC is an appropriate choice for the client. 				
<ul style="list-style-type: none"> Assesses woman's knowledge about the COC's major side effects. 				
<ul style="list-style-type: none"> Responsive to client's needs and concerns about the COC. 				
<ul style="list-style-type: none"> Describes how to use COCs and what to expect. 				
<ul style="list-style-type: none"> Instructs client on what to do in case of forgotten pills including taking additional pills and using back-up method for 7 days if more than one pill is forgotten. 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Counsels client to consider another method if forgetting pills becomes recurrent. 				
<ul style="list-style-type: none"> Tells client to take another pill if vomiting or diarrhea occurs within one hour of taking pills. 				
<ul style="list-style-type: none"> For severe vomiting or diarrhea, counsels client to continue taking pills and use back-up method for 7 days in a row after vomiting or diarrhea has stopped. 				
<ul style="list-style-type: none"> Counsels client that COCs do not protect against STI and encourages use of condoms while taking COCs if she might be at risk of STIs. 				
<ul style="list-style-type: none"> Counsels client to always inform other health care providers that she is taking COCs to avoid possible drug interaction with prescribed medication. 				
<ul style="list-style-type: none"> Gives client adequate supply of COCs. 				
<ul style="list-style-type: none"> Tells client to return if any these arise. 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Asks client to repeat instructions and seek clarifications 				
<ul style="list-style-type: none"> Gives client appropriate follow-up visit appointment. 				
<ul style="list-style-type: none"> Records all information in client record and clinic register. 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<p>Progestin Injectables</p> <ul style="list-style-type: none"> Determines that the woman's contraceptive choice is the PIC. 				
<ul style="list-style-type: none"> Reviews Client Screening Checklist to determine if the PIC is an appropriate choice for the client. 				
<ul style="list-style-type: none"> Assesses woman's knowledge about the PIC's major side effects. 				
<ul style="list-style-type: none"> Is responsive to client's needs and concerns about the PIC. 				
<ul style="list-style-type: none"> Describes how PICs work, how they are used and what to expect. 				
<ul style="list-style-type: none"> Explores how irregular or increased bleeding or absence of menses will affect client's daily life 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Tells client she will need to return to the clinic every 2 or 3 months (depending on which PIC) for reinjection and that she will need a back-up method if she is more than 2 weeks late for reinjection. 				
<ul style="list-style-type: none"> Gives client the injection into the deltoid or gluteus maximus muscle using aseptic technique and not massage the injection site. 				
<ul style="list-style-type: none"> Counsels client that PICs do not protect against STI and encourages use of condoms while taking PICs if she might be at risk of STIs. 				
<ul style="list-style-type: none"> Tells client to return to the clinic if she has heavy vaginal bleeding, severe headache with blurred vision, or severe abdominal pain. 				
<ul style="list-style-type: none"> Asks client to repeat instructions and encourages client's questions. 				
<ul style="list-style-type: none"> Gives client appropriate follow-up visit appointment. 				
<ul style="list-style-type: none"> Records all information in client record and clinic register. 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
INTRA FACILITY REFERRAL				
<ul style="list-style-type: none"> • Counsels client on ALL methods 				
<ul style="list-style-type: none"> • Provision of FP information & display of FP method (samples) 				
<ul style="list-style-type: none"> • Explore the client's preferred FP options 				
<ul style="list-style-type: none"> • Refers clients (as appropriate) 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
IMPLANT				
PRE INSERTION STEPS/TASKS JADELLE				
<ul style="list-style-type: none"> • Welcome client into the insertion room with respect 				
<ul style="list-style-type: none"> • Ask woman about her reproductive goals and need for protection against STIs 				
<ul style="list-style-type: none"> • If implant counseling was not done, arranges for counseling prior to performing procedure 				
<ul style="list-style-type: none"> • Determines that the woman's contraceptive choice is the implants 				
<ul style="list-style-type: none"> • Reviews Client Screening Checklist to determine if the implant is an appropriate choice for the client 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Assesses woman's knowledge about the implant's major side effects. 				
<ul style="list-style-type: none"> Is responsive to client's needs and concerns about the implants 				
<ul style="list-style-type: none"> Assures client that the implants can be removed whenever she wants 				
<ul style="list-style-type: none"> Obtains or reviews brief reproductive health history 				
<ul style="list-style-type: none"> Describes insertion procedure and what to expect and encourages her to ask questions 				
<ul style="list-style-type: none"> Checks to be sure that client has thoroughly washed her entire arm (optional) 				
<p>INSERTION TASK-JADELLE</p> <ul style="list-style-type: none"> Ask client to lie on her back on the couch so that arm (non dominant) in which implants will be placed is turned outwards, bent at elbow and is well supported 				
<ul style="list-style-type: none"> Open the sterile instrument pack without touching the instruments or other items 				
<ul style="list-style-type: none"> For Jadelle, Carefully Opens sterile pouch containing implants by pulling apart sheets of pouch and without touching the rods, allowing them to fall into sterile cup or bowl 				
<ul style="list-style-type: none"> Washes hands thoroughly and dries them on a clean towel or air dry 				
<ul style="list-style-type: none"> Put sterile surgical gloves on both hands 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Cleans insertion site with cotton or guage swab soaked in antiseptic solution (povidone iodine or savlon with spirit) and held in sterile or HLD forceps 				
<ul style="list-style-type: none"> Places sterile drape with hole in it to cover arm. The hole should be large enough to cover the whole area where the implants will lie 				
<ul style="list-style-type: none"> Infiltrates the area sub dermally in a V-shape, using 1-2 mls of 2% xylocaine dilluted with equal volume of sterile water 				
<ul style="list-style-type: none"> Checks for anaesthetic effect before applying the troacher 				
<ul style="list-style-type: none"> While tenting the skin to maintain traction, gently advances trochar and plunger sub dermally to mark (1) nearest hub of troachar. (This mark indicates how far trochar should be introduced under skin to place implant 				
<ul style="list-style-type: none"> Remove obstructor (plunger) and loads 1st implants into trochar using gloved thumb and forefinger 				
<ul style="list-style-type: none"> Reinsert obturator and advances it until resistance is felt. Does not force obturator 				
<ul style="list-style-type: none"> Holds obturator stationary and withdraws the trochar to the mark closest to the tip. the implants should be released under the skin at this point. keeps Obturator stationary and avoids pushing implant into tissue. Do not remove trochar 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Loads the second capsule and uses the same procedure to place sub dermally 				
<ul style="list-style-type: none"> Removes trochar from the only after insertion of last capsule 				
<ul style="list-style-type: none"> Palpates capsules to check that capsules are properly inserted 				
<ul style="list-style-type: none"> Remove drape and wipes clients skin with povidone iodine or savlon with spirit 				
<ul style="list-style-type: none"> Presses down on incision with gauze for a minutes or so to stop bleeding, then cleans area round insertion site with antiseptic solution on a swab 				
<ul style="list-style-type: none"> Brings edge of incision together and closes with Elastoplast or apply adhesive plaster to protect the insertion site 				
<ul style="list-style-type: none"> Before removing gloves carefully by turning inside, places all instrument in 0.5% chlorine solution for 10 minutes for decontamination 				
<ul style="list-style-type: none"> Disposes of waste materials by placing in leak proof container or plastic bag. 				
<ul style="list-style-type: none"> Dips gloved hands in 0.5% chlorine solution. Remove gloves carefully by turning inside out. Washes hands thoroughly and dries them on clean towel 				
<ul style="list-style-type: none"> Completes Clients record, including drawing position of capsule 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
PRE INSERTION TASK-IMPLANON NXT				
<ul style="list-style-type: none"> Welcome client into the insertion room with respect 				
<ul style="list-style-type: none"> Ask woman about her reproductive goals and need for protection against STIs 				
<ul style="list-style-type: none"> If implant counseling was not done, arranges for counseling prior to performing procedure 				
<ul style="list-style-type: none"> Determines that the woman's contraceptive choice is the implants 				
<ul style="list-style-type: none"> Reviews Client Screening Checklist to determine if the implant is an appropriate choice for the client 				
<ul style="list-style-type: none"> Assesses woman's knowledge about the implant's major side effects. 				
<ul style="list-style-type: none"> Is responsive to client's needs and concerns about the implants 				
<ul style="list-style-type: none"> Assures client that the implants can be removed whenever she wants 				
<ul style="list-style-type: none"> Obtains or reviews brief reproductive health history 				
<ul style="list-style-type: none"> Describes insertion procedure and what to expect and encourages her to ask questions 				
<ul style="list-style-type: none"> Checks to be sure that client has thoroughly washed her entire arm (optional) 				
<ul style="list-style-type: none"> Select and position woman's arm correctly 				
<ul style="list-style-type: none"> Mark correct area on arm for insertion 				
<ul style="list-style-type: none"> Determine that required sterile or high level disinfected (HLD) instruments and Implanon NXT applicator 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
INSERTION TASK FOR IMPLANON NXT				
<ul style="list-style-type: none"> Wash hand with soap and water 				
<ul style="list-style-type: none"> Put on sterile gloves 				
<ul style="list-style-type: none"> Clean insertion site with cotton or gauze swab soaked in antiseptic solution (povidone iodine or savlon with spirit) and held in sterile or HLD forceps 				
<ul style="list-style-type: none"> Place sterile drape with hole on it to cover arm. The hole should be large enough to cover the whole area where the implant NXT will lie 				
<ul style="list-style-type: none"> Infiltrate the area sub dermally using 1-2mls of 2% xylocaine diluted with equal volume of sterile water 				
<ul style="list-style-type: none"> Hold the applicator just above the needle at the textured surface area and remove the transparent protection cap from the needle which contains the implant 				
<ul style="list-style-type: none"> If the cap does not come off easily, the applicator should not be used. You may see the white-coloured implant by looking into the tip of the needle 				
<ul style="list-style-type: none"> With your free hand, stretch the skin around the insertion site with thumb and index finger. Puncture the skin with the tip of the needle angled about 30° 				
<ul style="list-style-type: none"> Lower the applicator to a horizontal position. While lifting the skin with the tip of the needle, slide the needle to its full length. You may feel slight resistance but do not exert excessive force 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> While keeping applicator in the same position and the needle inserted to its full length, unlock the purple slider by pushing it slightly down. Move the slider fully back until it stops, leaving the implant in its final subdermal position and locking the needle inside the body of the applicator 				
<ul style="list-style-type: none"> Verify the presence of the implant in the woman's arm immediately after insertion by palpation. By palpating both ends of the implant, you should be able to confirm the presence of the 4cm rod 				
<ul style="list-style-type: none"> Apply a small adhesive bandage over the insertion site 				
<ul style="list-style-type: none"> Request that the woman palpate the implant 				
<ul style="list-style-type: none"> Remove drape and wipes clients skin with povidone iodine or savlon with spirit 				
<ul style="list-style-type: none"> Presses down on incision with gauze for a minutes or so to stop bleeding, then cleans area round insertion site with antiseptic solution on a swab 				
<ul style="list-style-type: none"> Brings edge of incision together and closes with Elastoplast or apply adhesive plaster to protect the insertion site 				
<ul style="list-style-type: none"> Before removing gloves carefully by turning inside, places all instrument in 0.5% chlorine solution for 10 minutes for decontamination 				
<ul style="list-style-type: none"> Disposes of waste materials by placing in leak proof container or plastic bag. 				
<ul style="list-style-type: none"> Dips gloved hands in 0.5% chlorine solution. Remove gloves carefully by turning inside out. Washes hands thoroughly and dries them on clean towel 				
<ul style="list-style-type: none"> Completes Clients record, including drawing position of capsule 				

POST INSERTION CARE				
<ul style="list-style-type: none"> Explains wound care 				
<ul style="list-style-type: none"> Counsels on side effects 				
<ul style="list-style-type: none"> Discusses action in case of post insertion problems or complications 				
<ul style="list-style-type: none"> Assures client she can have implants remove at any time 				
<ul style="list-style-type: none"> Ask client to repeat instructions and answers any questions 				
<ul style="list-style-type: none"> Observes client for 10-15 minutes before she leaves clinic 				
STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
IMPLANT REMOVAL				
<ul style="list-style-type: none"> Welcome client into the insertion room with respect 				
<ul style="list-style-type: none"> Ask clients about her reason for removal and answers any questions 				
<ul style="list-style-type: none"> Reviews client's reproductive goals and need for protection against STDs 				
<ul style="list-style-type: none"> Describes the removal procedure and what to expect and encourages her to ask questions 				
<ul style="list-style-type: none"> Determines that the required sterile or high-level disinfected instruments are ready 				
<ul style="list-style-type: none"> Checks precise location of jadelle on client's User card 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Ask client to lie on her back on the table so that arm in which the implants was inserted is turned outwards, bent at elbow and is well supported 				
<ul style="list-style-type: none"> Locate Jadelle by palpating and mark distal end 				
<ul style="list-style-type: none"> Open the sterile instrument pack without touching the instruments or other items 				
<ul style="list-style-type: none"> Carefully open scapel blade size 11 by tearing apart sheets of pouch and without touching the blade, allowing it to fall into sterile cup or bowl 				
<ul style="list-style-type: none"> Washes hands thoroughly and dries them on a clean towel or air dries 				
<ul style="list-style-type: none"> Puts sterile gloves on both hands 				
<ul style="list-style-type: none"> Cleans site with cotton or gauge swab soaked in antiseptic solution (Povidone iodine or savlon with spirit) and held in sterile or HLD forceps 				
<ul style="list-style-type: none"> Places sterile drapes with hole in it to cover arm. The hole should be large enough to expose the whole areas where the implants lies 				
<ul style="list-style-type: none"> Anesthetises arm with 1-2mls of 2% xylocaine dilluted with equal volume of sterile water at site of incision, which is just below the distal end of implant 				
<ul style="list-style-type: none"> Applies anesthetics under the implant to avoid swelling which can occur if injected over implant makes it more difficult locating 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Makes an incision 2mm long in transverse direction of arm at the distal end of implant 				
<ul style="list-style-type: none"> Gently pushes implants towards incision until tip is visible 				
<ul style="list-style-type: none"> Grasps implant with mosquito artery forceps and removes 				
<ul style="list-style-type: none"> If implant has fibroitic tissue, makes incision into tissue sheath and removes implant with forceps 				
<ul style="list-style-type: none"> If tips of implant not visible, gently inserts forceps into incision and grasps implant 				
<ul style="list-style-type: none"> Dissects tissue around implant with second forceps and gently removes implants 				
<ul style="list-style-type: none"> Show the implant to the client before discarding 				
<ul style="list-style-type: none"> Applies sterile gauze with pressure bandage to prevent bleeding 				
<ul style="list-style-type: none"> Observe client before leaving the couch for up to 2-5 minutes in case of bleeding or fainting 				
<p>POST REMOVAL TASKS</p>				
<ul style="list-style-type: none"> Removes drape and wipes client's skin with alcohol 				
<ul style="list-style-type: none"> Before removing gloves, places all instruments in 0.5% chlorine solution for 10 minutes 				
<ul style="list-style-type: none"> Disposes of waste materials by placing in leak proof plastic bag 				

STEP/TASK	OBSERVED GAP AND SUPPORT PROVIDED	SUPERVISOR'S REMARKS	SUPERVISOR'S NAME, SIGNATURE	DATE
<ul style="list-style-type: none"> Dips gloves in 0.5% chlorine solution. Removes gloves by turning inside out. Places gloves in leak proof container 				
<ul style="list-style-type: none"> Washes hand thoroughly and dries them on clean towel 				
<ul style="list-style-type: none"> Completes client Record 				
<ul style="list-style-type: none"> Discusses what to do if clients experiences any problems and answers any questions 				
<ul style="list-style-type: none"> Counsels client regarding new contraceptive method, if desire 				
<ul style="list-style-type: none"> Help client obtain new contraceptive method or provides temporary (barrier) method until method of choice can be started if in need of contraception 				

Supervisor's general remarks _____

Supervisee's Signature & Date _____



Get it together
KNOW. TALK. GO.

NURHI 2
NIGERIAN URBAN REPRODUCTIVE
HEALTH INITIATIVE