

ASCENSION ST VINCENTS

NEXPLANON IMPLANT REMOVAL PATIENT HANDOUT

Radiologist who performed your procedure:

Procedure Description:

- Image-guided Nexplanon implant removal is performed to safely remove a contraceptive implant from the arm when it is no longer needed, has expired, is causing side effects, or cannot be easily felt on exam.
- During the procedure, a radiologist uses X-ray or ultrasound to identify the exact position of the implant. The skin is cleaned with antiseptic, and local anesthetic is used to numb the area. A small incision is made in the skin, and special instruments are used to gently remove the implant. Imaging guidance helps ensure complete removal while minimizing injury to nearby structures. After the implant is removed, pressure is applied to reduce bleeding, and a small bandage is placed over the site. Stitches may or may not be required.
- The procedure usually takes 15–30 minutes.
- Fertility may return quickly after implant removal. If pregnancy is not desired, discuss alternative birth control options with your provider.

Benefits:

- Imaging allows the radiologist to precisely locate the implant, even when it is deep or difficult to feel.
- Provides a minimally invasive way to remove the implant using a small skin incision.
- Helps reduce the risk of injury to nearby nerves or blood vessels.
- Allows removal when standard office techniques are unsuccessful.
- Usually completed quickly, with most patients going home shortly afterward.
- Resolves side effects related to the implant when present.
- Allows transition to alternative contraception or planning for pregnancy.

Risks & Potential Complications:

- The following list includes some, but not all, possible complications.
- Pain is common but usually mild, typically resolves within a few days, and can be managed with over-the-counter pain medication. Severe pain can occur but is uncommon.
- Minor bleeding is common and usually does not require medical treatment. Any resulting bruising typically resolves on its own over several days. Serious bleeding that requires medical treatment can occur but is uncommon.
- Infection can occur but is uncommon. Most infections are mild and can be treated with antibiotics.
- Injury to nearby blood vessels or nerves can occur but is uncommon.
- Scarring at the removal site can occur.
- Difficulty removing the implant can occur, particularly if it is deeply embedded or surrounded by scar tissue, and may require additional procedures.
- Incomplete removal of the implant can occur and may require repeat removal.

- Feeling faint or lightheaded (a vasovagal reaction) can occur during or after the procedure. This is usually mild and resolves quickly.
- Allergic reactions to the local anesthetic, topical antiseptic or other medications are uncommon.

Alternatives:

- Standard office-based removal without imaging guidance in patients whose implant can be easily felt.
- Surgical removal by a specialist in select cases when minimally invasive removal is not successful.
- Continued use of the implant until expiration if no complications or side effects are present.
- Some patients choose no removal; however, this may allow side effects to persist or the implant to remain past its recommended duration and is generally not recommended.

Aftercare:

- A bandage will be applied over the procedure site. You may remove the bandaging after 24 hours. Skin glue may also be applied. Do not pick off the glue—allow it to flake off on its own over several days.
- You may shower and allow water to flow over the site 24 hours after your procedure, however, do not submerge the site in water (bath, pool, hot tub or ocean) until the site has healed.
- If you were provided with an ice pack, apply it to the site periodically for 15–30 minutes after your procedure.
- Do not apply lotion or ointment to the site until it has healed unless instructed to do so.
- Avoid strenuous physical activity for at least 24 hours after your procedure. Then gradually increase your activity level as tolerated.
- It is normal to experience mild pain and bruising after your procedure. You may take acetaminophen (Tylenol), aspirin, ibuprofen (Motrin), or naproxen (Aleve) for relief. It is safe to take aspirin, ibuprofen, or naproxen soon after your procedure; however, you may experience increased bruising if you do so.
- Contact Radiology or your ordering provider if you have any concerns or experience any of the following: persistent or significant bleeding; significant swelling; significant pain not responding to over-the-counter medications; signs of possible infection (significant redness or purulent drainage at the site, significant pain, fever, or chills). Call 911 in the event of an emergency.
- Weekdays 8 am to 5 pm call 308-8401 (Riverside), 296-3886 (Southside), 602-1360 (Clay) or 691-1297 (St Johns). Weekdays 5 pm to 10 pm or weekends 6 am to 10 pm call 308-8401. If outside of these hours, call the hospital operator at 308-7300 and ask to speak to the Interventional Radiologist on call.