

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Clinic/Hospital Name]
[Clinic/Hospital Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Explanation of IUD Removal Procedure

I hope this letter finds you well. I am writing to provide you with an explanation regarding the removal of my intrauterine device (IUD), which is scheduled for [Date of Procedure].

The IUD removal procedure is relatively straightforward and is typically performed in a healthcare setting. Here are the key points regarding the procedure:

1. ****Preparation****: On the day of the appointment, I will arrive at the clinic and complete any necessary paperwork. It may be recommended to take a pain reliever prior to the appointment to help minimize discomfort.
2. ****Procedure****: During the removal, the healthcare provider will gently grasp the strings of the IUD using a specialized instrument and slowly pull it out. The procedure usually takes only a few minutes.
3. ****Post-Procedure Care****: After the removal, I may experience light cramping or spotting for a short time. I will be advised on any symptoms to monitor and will follow up if necessary.
4. ****Discussion of Alternatives****: Following the removal, I may discuss alternative contraceptive options with the provider, tailored to my needs.

I appreciate your attention to this matter and am looking forward to a smooth removal process. Please feel free to reach out if you have any questions or need further information.

Thank you for your assistance.

Sincerely,

[Your Name]