BSGE Surgical Findings

1. Operative data

a) Date of operation: ……

b) Named BSGE Endometriosis Centre Surgeon: ……

c) Was this a training case?

- □ Yes
- □ No

d) If yes, please specify the surgeon's grade?

- □ Consultant
- □ Staff grade
- □ SpR
- □ Training fellow
- □ Other (Please specify:
  ……)

e) Joint case with Urologist?

- □ Yes
- □ No

f) Joint case with upper GI consultant?

- □ Yes
- □ No

g) Thoracic surgeon?

- □ Yes
- □ No

i) If yes, name of Thoracic surgeon:
……

h) Type of surgery?

- □ Laparoscopy
- □ Laparotomy
- □ Laparoscopy converted to Laparotomy
- □ Robotic

i) Pre-operative findings?

□ Previous hysterectomy

j) Previous removal of ovaries?

□ Left

□ Right

□ Both

□ No

2. Specialist imaging findings

a) Was specialist imaging completed?

□ Yes

□ No

i) If yes, MRI or USS?

□ MRI

□ USS

ii) If yes, Deep disease?

□ Yes

□ No

iii) Deep endometriosis involving bowel (e.g. rectum, rectosigmoid)?

□ Yes

□ No

iv) Adenomyosis?

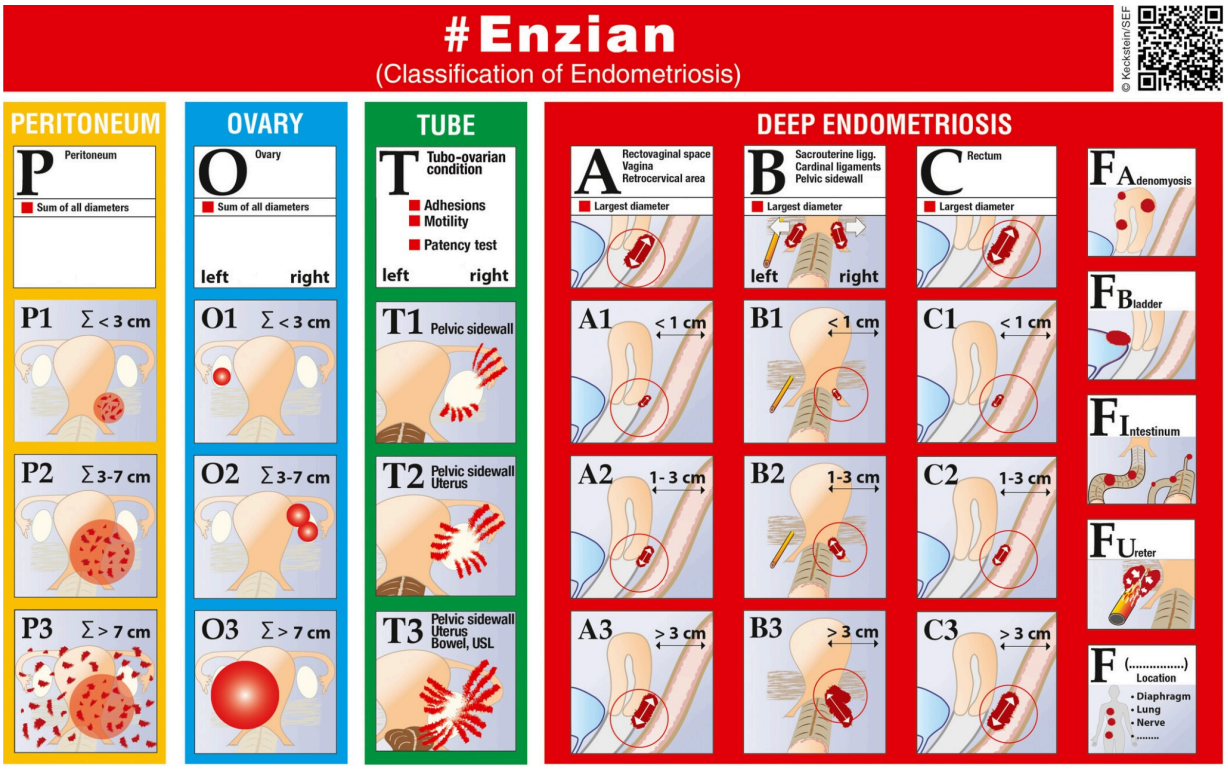
□ Yes

□ No

v) Any other findings?

3. Distribution of endometriosis

Please find here a link to the #Enzian classification paper:
https://obgyn.onlinelibrary.wiley.com/doi/epdf/10.1111/aogs.14099



Note: Deep disease >= 5mm

a) P: **0** □ **1** □ **2** □ **3** □

i) Select option:

- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated

b) O (left): **0** □ **1** □ **2** □ **3** □

i) Select option:

- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated
- □ Drainage only
- □ Oophorectomy

c) O (right): **0** □ **1** □ **2** □ **3** □

i) Select option:

- □ Ablated
- □ Excised
- □ Ablated and excised

- □ Not treated
- □ Drainage only
- □ Oophorectomy

d) T (left): **0** □ **1** □ **2** □ **3** □

i) Patent
- □ Yes
- □ No
- □ Not tested

ii) Select option:
- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated

e) T (right): **0** □ **1** □ **2** □ **3** □

i) Patent
- □ Yes
- □ No
- □ Not tested

ii) Select option:
- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated

f) A: **0** □ **1** □ **2** □ **3** □

i) Select option:
- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated

g) B (left): **0** □ **1** □ **2** □ **3** □

i) Select option:
- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated

h) B (right): **0** □ **1** □ **2** □ **3** □

i) Select option:

- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated

i) C: **0** □ **1** □ **2** □ **3** □

i) Select option:

- □ Ablated
- □ Excised
- □ Ablated and excised
- □ Not treated
- □ Shave
- □ Disc resection
- □ Segmental resection

ii) Stoma:

- □ Yes
- □ No

j) F: **FA** □ **FB** □ **FU (left)** □ **FU (right)** □ **FI** □ **F()** □

i) If F() is selected, please specify location:

- □ Diaphragm
- □ Lung
- □ Nerve
- □ Scar
- □ Specify location

F() location specified

4. Operative management

a) Complete removal of all disease (including endometrioma)?

- □ Yes
- □ No

b) If FB selected in section 3, bladder nodule?

- □ Ablated
- □ Excised without bladder opening

- □ Excised with bladder opening
- □ Not treated
- □ Not present

c) If FU (left) or FU (right) selected in section 3, ureteric nodule excised?
- □ Yes
- □ No
- □ Not present

d) JJ Stent?
- □ Left
- □ Right
- □ Both
- □ No

e) Ureterolysis (left)?
- □ Yes
- □ No

f) Ureterolysis (right)?
- □ Yes
- □ No

g) Ureteric reanastomosis/reimplantation?
- □ Yes
- □ No

h) Hysterectomy?
- □ Yes
- □ No

i) If yes, what type was performed?
- □ Total
- □ Subtotal

5. Other operative information

a) Surgery notes:

6. Perioperative complications (complications during primary admission for surgery)

a) Any perioperative complications?

- □ Yes
- □ No

i) If yes, please tick all that apply:

- □ Haemorrhage > 1 litre
- □ Ureteric injury
- □ Unexpected bowel injury
- □ Unexpected bladder injury
- □ Unexpected vascular injury
- □ Epigastric artery injury
- □ Conversion to laparotomy
- □ Colostomy
- □ Ileostomy
- □ Removal of any other organ or complication
- □ Venous thrombo-embolism
- □ Pelvic Abscess
- □ Pelvic haematoma
- □ Urinary tract leak
- □ Bowel leak
- □ Severe sepsis

ii) Comments:
