



AGL 2022

51st GLOBAL CONGRESS ON MIGS

December 1-4, 2022 | Gaylord Rockies Resort and Convention Center | Aurora, Colorado

FINAL PROGRAM

DISSEMINATION OF MIGS CARE: IMPROVING ACCESS FOR ALL

SCIENTIFIC PROGRAM CHAIR
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XVII AAGL INTERNATIONAL MEETING



**European
Society for
Gynaecological
Endoscopy**

GYNITALY

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Co-Chair Mauricio S. Abrão (Brazil)

May 7-10, 2023

Auditorium della Tecnica
Convention Center

Rome - Italy

- **Endometriosis**
- **Oncology**

- **Hysteroscopy**
- **Live surgery marathon**

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Welcome!

FROM THE SCIENTIFIC PROGRAM CHAIR

Dear Friends and Colleagues,

As Chair of the 2022 Scientific Program Committee (SPC), it is my great honor to welcome each of you to the beautiful Rocky Mountains of Colorado and the AAGL 51st Global Congress! The SPC and AAGL staff have worked tirelessly to develop a program that represents voices from all over the world and is packed with innovative, evidence-based content.

It is my hope that the theme for this year's Congress "Dissemination of MIGS Care: Improving Access for All" will inspire each of you to reflect on how your expertise can be used to reach populations in need of MIGS care. With our combined insight and experience, we are best positioned to identify ways to improve access to quality care for all women.

Our Final Program will be taught by a global representation of expert surgeons and presented through 22 State-of-the-Art Postgraduate Courses, 5 AAGL MED Talks, 6 Live and Pre-recorded Surgeries, 6 Surgical Tutorials, 8 Panels, and 5 General Sessions. In addition, you can look forward to riveting Luncheon Round Table discussions and informative Industry Symposia and Product Theaters. You will want to check out the Koh World Suturing Championship, Suturing Café, and State-of-the-Art New Technologies represented in this year's Exhibit Hall.

Our program has been thoughtfully designed to include education on all modalities of MIGS access, including low-cost Vaginal Surgery, vNOTES, Hysteroscopy, Laparoscopy, and Robotics. This year we asked you to submit your ideas and we received a wealth of valuable suggestions for course topics and discussions, many of which we have included in the Final Program. In each topic, we seek to explore inequalities in access to care and stimulate brainstorming of solutions.

I encourage you to take advantage of the many social networking opportunities provided throughout this event, where you can continue conversations with your colleagues and identify ways that we can individually, and as an Association, address disparities in care. As ideas come to you, please jot them down and plan to share them with us in our Post-Congress Survey.

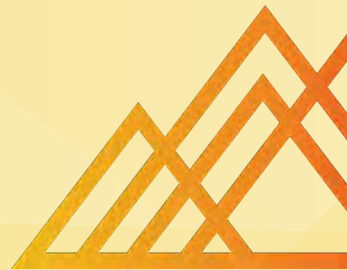
I look forward to introducing you to our Jordan M. Phillips Keynote Address speaker, the inspiring and world-renowned Dr. Rajiv J. Shah. Dr. Shah is the President of the Rockefeller Foundation, a global institution with a mission to promote the well-being of humanity around the world. Dr. Shah's many accomplishments have positively impacted healthcare globally and will inspire us to examine our own contributions toward increasing equity in healthcare.

I warmly welcome each one of you, here in Colorado and those joining us virtually, to the 2022 Global Congress. It is my hope that this meeting will inspire you, expand your skillsets and knowledge, and encourage you in your practice!

Sincerely,

Andrew I. Sokol, MD

2022 Scientific Program Chair and AAGL Incoming President



Thanks!

TO THE AAGL22 INDUSTRY SPONSORS

For 51 years, AAGL's commitment to education has been paramount to our mission of serving women by advancing the safest and most effective treatments for gynecologic conditions. We gratefully acknowledge the generous support from the following corporations who partner with us in achieving this mission.

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1972 †Hans Frangenheim Las Vegas, Nevada	1983 Edward E. Wallach Washington, D.C.	1994 Glenn M. Preminger & Richard M. Satava New York, New York	2004 †Jay M. Cooper San Francisco, California	2015 John F. Steege Las Vegas, Nevada
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1979 †Raoul Palmer New Orleans, Louisiana	1990 Michael S. Baggish Orlando, Florida	2001 †Jordan M. Phillips San Francisco, California	2011 Barbara S. Levy Hollywood, Florida	2022 Charles E. Miller Aurora, Colorado
1980 Lars Westrom Las Vegas, Nevada	1991 20 th Anniversary Las Vegas, Nevada	2002 †Robert B. Hunt Miami, Florida	2012 William H. Parker Las Vegas, Nevada	
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PROGRAM SCHEDULE

WEDNESDAY, NOVEMBER 30, 2022

AAGL FMIGS Fellows Bootcamp • 7:30 am – 4:30 pm • Colorado B, C, D
AAGL FMIGS Graduation/Reception • 6:00 pm – 8:00 pm • Juniper Ballroom, Level 1

THURSDAY, DECEMBER 1, 2022

Postgraduate Courses • 7:00am – 5:00pm
Registration • 6:00 am – 5:30 pm • Valley 2/3

Course	Morning Didactic Courses 7:00 am – 9:30 am	Room
OBS-601	 DIDACTIC: Complex Obstetric Surgery for the MIGS Surgeon	Red Rock 2/3
HSC-602	 DIDACTIC: Hysteroscopy - Taking Your First Steps in Intrauterine Surgery	Red Rock 4/5
NERV-603	 DIDACTIC: Nerve Sparing - Part I	Red Rock 6/7
ENDO-604	 DIDACTIC: Building Excellence in Patient Centered Endometriosis Management	Red Rock 8/9
PELV-605	 DIDACTIC: Understanding Chronic Overlapping Pain Conditions	Willow Lake 3/4
ONC-606	 DIDACTIC: Oncology Controversies for the Practicing Gynecologist	Willow Lake 5
9:00 am - 4:00 pm		
SURG-621	 DIDACTIC: Surgical Coaching (In person only)	Willow Lake 1/2
9:45 am - 12:15 pm		
ROBO-607	 DIDACTIC: Advanced Robotics Course for Laparoscopic Surgeons	Red Rock 2/3
GEN-608	 DIDACTIC: Gender Affirmation Surgery	Red Rock 4/5
FIBR-609	 DIDACTIC: Evolving Technologies and Their Role in Patient Care	Red Rock 6/7
ENDO-610	 DIDACTIC: Diagnosing and Evaluating the Extent of Endometriosis with Imaging	Red Rock 8/9
INNO-611	DIDACTIC: Innovations Course	Willow Lake 3/4
URO-612	 DIDACTIC: Urogyn for the MIGS Surgeon: Apical Support	Willow Lake 5
Luncheon Roundtables • 12:30 pm – 1:30 pm • Colorado Foyer		
Afternoon Lab Courses • 1:30 pm – 5:30 pm		
NERV-619	 CADAVERIC LAB: Nerve Sparing - Part II - In person only	Colorado D
HSC-620	 DIDACTIC/SIMULATION LAB: Advanced Hysteroscopy - Update Your Uterine Repair Skills - In person only	Colorado C
ROBO-622	DIDACTIC/SIMULATION LAB: Robotics - In person only	Colorado B
Afternoon Didactic Courses • 2:30 pm – 5:00 pm		
REPRO-613	 DIDACTIC: How to Think Like a Reproductive Surgeon: Preservation, Restoration, and Reconstruction	Red Rock 2/3
VAG-614	 DIDACTIC: Vaginal Access Surgery Including vNOTES TVH	Red Rock 4/5
MAST-615	 DIDACTIC: Master's Course in Exposure Retraction and Deep Dissection	Red Rock 6/7
COMP-616	 DIDACTIC: To Do or Not to Do...Making Safe Decisions in the Operating Room - Preventing, Avoiding and Managing Complications in MIGS	Red Rock 8/9
ANAT-617	 DIDACTIC: Advanced Anatomy - Accessing the Pelvic Sidewall	Willow Lake 3/4
PAGS-618	 DIDACTIC: Optimizing Surgical Management in Today's Pediatric Environment	Willow Lake 5

General Session I: Opening Ceremony • 5:15 pm – 6:15 pm • Colorado A, Level 3
Honorary Chair Address - Charles E. Miller
Presidential Address - Mauricio S. Abrao

Opening Reception • 6:30 pm – 8:30 pm • Aurora Exhibit Hall
Charles H. Koh Suturing Competition • 6:45 pm – 8:15 pm • Aurora Exhibit Hall

CONGRESS • FRIDAY, DECEMBER 2, 2022

Registration • 6:00 am – 5:30 pm • Valley 2/3

Aurora Exhibit Hall

Breakfast • 7:45 am

Breakfast Product Theaters • Hologic, Myovant • 8:00 am – 8:45 am

Suturing Café • 8:00 am – 9:30 am

Virtual Posters • 8:00 am – 2:30 pm

CME General Session II: AAGL MED Talk / FAAGL Awards • 9:45 am – 11:15 am • Colorado A

	Red Rock 2/3	Red Rock 4/5	Red Rock 6/7	Red Rock 8/9	Willow Lake 3/4	Willow Lake 5	Homestead 3/4	Colorado A
11:30am – 12:35pm	Video Session 1 Robotics	CME Panel 1 Surgical Educator	Oral Session 1 Fibroids	Video Session 2 Hysteroscopy	Oral Session 2 Endometriosis	Video Session 3 Adenomyosis	Video Session 4 Laparoscopy	CME Surgical Tutorial 1 Asherman's Syndrome

Aurora Exhibit Hall

Box Luncheon & Virtual Posters • 12:30 pm – 2:30 pm

Product Theaters • Gynesonics, Theator • 1:00 pm – 1:45 pm

Suturing Café • 1:00 pm – 2:30 pm

2:00 pm – 3:05 pm	Video Session 5 Pelvic Pain	CME Panel 2 Vaginal Laser	Oral Session 3 Laparoscopy	Oral Session 4 Research	Video Session 6 Fibroids	Video Session 7 Laparoscopy	Video Session 8 Endometriosis	CME Surgical Tutorial 2 Tubal Disease
3:15 pm – 4:20 pm	Video Session 9 Laparoscopy	CME Panel 3 QI/Patient Safety	Panel 4 Education	Oral Session 5 New Instrumentation	Oral Session 6 Reproductive	Video Session 10 Laparoscopy		CME Surgical Tutorial 3 Endometriosis

CME General Session III: AAGL MED Talk / Special Lecture / Pre-Recorded Surgery • 4:30 pm – 6:15 pm • Colorado A, Level 3

Industry Sponsored Symposia • Applied Medical, Gynesonics, Intuitive • 6:15 pm – 7:45 pm

2ND Annual FAAGL Karaoke Party "Music is Medicine" • 8:30 pm – 12:00 am • Juniper Ballroom, Level 1

CONGRESS • SATURDAY, DECEMBER 3, 2022

Registration • 6:00 am – 5:30 pm • Valley 2/3

Aurora Exhibit Hall

Breakfast • 7:45 am – 9:30 am

Product Theaters • Cooper Surgical, Pacira Biosciences, Inc. • 8:00 am – 8:45 am

Suturing Café • 8:00 am – 9:30 am

Virtual Posters • 8:00 am – 2:30 pm

CME General Session IV: AAGL MED Talk / Pre-Recorded Surgery / Keynote Address • 9:45 am – 11:15 am • Colorado A

	Red Rock 2/3	Red Rock 4/5	Red Rock 6/7	Red Rock 8/9	Willow Lake 3/4	Willow Lake 5	Homestead 3/4	Colorado A
11:00am – 12:30 pm	Video Session 11 Endometriosis	CME Panel 5 Fibroids	Oral Session 7 Oncology	Oral Session 8 Research	Video Session 12 Laparoscopy	Video Session 13 Natural Orifice	Video Session 14 Urogynecology	CME Surgical Tutorial 4 Hysterectomy

Aurora Exhibit Hall

Box Luncheon & Virtual Posters • 12:30 pm – 2:30 pm

Product Theaters • Intuitive • 1:00 pm – 1:45 pm

Suturing Café • 1:00 pm – 2:30 pm

2:00 pm – 3:00 pm	Video Session 15 Robotics	CME Panel 6 MIS-Hazard	Oral Session 9 Basic Science	Video Session 16 Laparoscopy	Video Session 17 New Instrumentation	Oral Session 10 Adenomyosis-Pelvic Pain	Video Session 18 Endometriosis	CME Surgical Tutorial 5 Outcomes
3:15 pm – 4:15 pm	Video Session 19 Fibroids	CME Panel 7 Social Media	Panel 8 Telementoring/AI	Oral Session 11 Laparoscopy	Oral Session 12 Endometriosis	Video Session 20 Basic Science-Robotics		CME Surgical Tutorial 6 Lap. Hysterectomy

CME General Session V: Business Meeting / AAGL Med Talk / Pre-Recorded Surgery • 4:30 pm – 6:00 pm • Colorado A, Level 3

Presidential Gala • 8:00 pm – 12:00 am • Juniper Ballroom, Level 1

CONGRESS • SUNDAY, DECEMBER 4, 2022

Registration • 8:00 am • Valley 2/3

CME General Session VI: AAGL MED Talk / Live Surgery / Pre-Recorded Surgery • 9:00 am – 11:00 am • Colorado A, Level 3



Target Audience

The AAGL is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The AAGL designates this live activity for a maximum of 22.50 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ABOG MOC Credits: Diplomates who successfully complete this approved CME activity will receive 22.5 Part IV Practice Improvement credits for the American Board of Obstetrics and Gynecology (ABOG) Maintenance of Certification (MOC) program.

ADA Statement: In accordance with the Americans with Disabilities Act (ADA), please contact CMESupport@aagl.org should you require any special assistance

The American College of Obstetricians and Gynecologists will recognize this educational activity. In order to apply for cognates, please fax a copy of your certificate to ACOG at (202) 484-1586.

The American Nurses Credentialing Center (ANCC) accepts AMA PRA Category 1 Credits™ toward recertification requirements.

The American Academy of Physician Assistants (AAPA) accepts AMA PRA Category 1 Credits™ from organizations accredited by the ACCME.

Continuing Medical Education

This symbol  indicates a postgraduate course or session that qualifies for CME credit.

By developing educational courses in minimally invasive gynecology (MIG) we hope to increase the use of MIG and reduce morbidity and complication rates associated with these procedures.

Practice Gap: At present in the United States, about 15 to 20% of the 600,000 hysterectomies are performed by laparoscopy and robotics, respectively. This is due to lack of training during their formal education and the multiple difficulties to acquire formal training once in medical practice.

Gap Analysis: MIG procedures are aimed at preserving the highest possible quality of life for women by using smaller and fewer incisions, reducing pain and trauma to the body, and enabling quicker recovery. Yet, the ability to perform these more patient-friendly procedures requires most gynecologists to commit to post-residency training since they are not routinely taught during formal training. This requires a commitment to lifelong learning because of the development of new technologies and instrumentation.

Planning the Intervention:

Summary: The goal of our intervention is that through continuing medical education (CME) gynecologists will attend activities organized into didactic and hands-on sessions to acquire and/or advance their skills in MIG. An open forum will follow with discussion designed to stimulate faculty and participants in interaction.

Proposed Method:

- I. Create awareness of the role MIG plays.
- II. Hands-on laboratory that will allow each participant to practice MIG techniques on cadavers.
- III. Transfer skill to course participants through didactic lectures, video presentations and demonstration and supervised wet lab surgery.
- IV. Expectations are that future courses can be organized to spread awareness and transfer skills in MIG to other gynecologists, who are willing to commit to this lifelong process.
- V. To maximize the return of this year's Congress, upon completion participants will be requested to explain how their newly acquired knowledge and skills will impact their practice.

Objectives:

At the conclusion of the course, the participant should be able to:

- I. Apply the latest developments in minimally invasive healthcare for women.
- II. Demonstrate the skills needed for proficiency.
- III. Employ minimally invasive surgical techniques such as laparoscopic hysterectomy, myomectomy, pelvic floor repair, treatment of endometriosis and advanced hysteroscopic techniques.
- IV. Acquire hands-on experience in the anatomy laboratory as well as laboratories focused on laparoscopic suturing, hysteroscopy, robotic surgery, and single-port surgery.
- V. Apply the latest advances in research and techniques in the field of minimally invasive gynecologic surgery.
- VI. Evaluate data presented to determine the best methods for practice of gynecologic medicine.
- VII. Demonstrate and enhance their presentation and publication skills with a hands-on workshop.
- VIII. Interpret and evaluate basic science techniques such as stem cell biology, cellular systems biology and pre-surgical planning.



Additional Barriers and Possible Solutions:

Additional Barriers: MIG is relatively difficult to learn and all procedures require accurate surgical skills and experience to perform. Therefore, the course participants may not be able to utilize the techniques immediately upon completion of this course.

Possible Solutions: Continue to provide physicians with additional education and resources they need to elevate their practice in gynecology while increasing their skills in minimally invasive gynecology.

Code of Conduct

AAGL is committed to providing a friendly, safe, supportive, and harassment-free environment during the Congress. AAGL expects Congress participants to respect the rights of others and communicate professionally and constructively, whether in person or virtually, handling disagreement with courtesy, dignity, and an open mind. All participants are expected to observe these rules of conduct in all Congress venues. Organizers will actively enforce this code throughout this event. Violations are taken seriously. If an attendee or participant engages in inappropriate, harassing, abusive or disruptive behavior or language, the AAGL has the right to carry out any action it deems appropriate.

What to Do

If you have any concerns about an individual's conduct, please go to the AAGL Registration

Counter for the procedure to follow to report the incident.

Age Restriction

Children under 16 years of age are not permitted in sessions and workshops but may be allowed into the exhibit hall if accompanied by an adult.

Audio-Visual Recording

Video- and audio-recording of sessions by congress attendees is strictly prohibited. Registration, attendance, or participation in AAGL meetings, Congress, and other activities constitutes an agreement that allows AAGL to use and distribute your image or voice in all media. If you have questions about this policy, please visit the AAGL Registration Counter.

Anti-Harassment Statement

AAGL encourages its members to interact with each other for the purposes of professional development and scholarly interchange so that all members may learn, network, and enjoy the company of colleagues in a professional atmosphere. Consequently, it is the policy of the AAGL to provide an environment free from all forms of discrimination, harassment, and retaliation to its members and guests at all regional educational meetings or courses, the annual global congress (i.e., annual meeting), and AAGL-hosted social events (AAGL sponsored activities). Every individual associated with the AAGL has a duty to maintain this environment free of harassment and intimidation.

Reporting an Incident

AAGL encourages reporting all perceived incidents of harassment, discrimination, or retaliation. Any individual covered by this policy who believes that he or she has been subjected to such an inappropriate incident has two (2) options for reporting:

1. By toll free phone to AAGL's confidential 3rd party hotline: (833) 995-AAGL (2245) during the AAGL Annual or Regional Meetings.
2. By email or phone to: The Executive Director, Linda Michels, at lmichels@aagl.org or (714) 503-6200.

All persons who witness potential harassment, discrimination, or other harmful behavior during AAGL sponsored activities are expected to report the incident and be proactive in helping to mitigate or avoid that harm and to alert appropriate authorities if someone is in imminent physical danger.

For more information or to view the policy please visit <https://www.aagl.org/wp-content/uploads/2018/02/AAGL-Anti-Harassment-Policy.pdf>

INTUITIVE

Progress takes practice

10 million cases is a good start

Learn how Intuitive operates
at the point of possibility™



BOARD/COMMITTEE MEETINGS & SPEAKER READY ROOM

BOARD/COMMITTEE MEETINGS

Tuesday, November 29

1:00 pm	FMIGS Bootcamp (invitation only)
7:00 pm – 10:00 pm	AAGL Board of Director's Dinner

Wednesday, November 30

8:00 am – 4:00 pm	AAGL Board of Director's Meeting	Summit 3
7:30 am – 4:30 pm	FMIGS Bootcamp	Colorado C&D
12:00 pm – 1:00 pm	FMIGS Luncheon	Colorado B
6:00 pm – 7:00 pm	FMIGS/Graduation	Juniper
7:00 pm – 8:00 pm	FMIGS Reception	Juniper

Thursday, December 1 - POSTGRADUATE COURSES

8:00 am – 11:00 am	Practice Committee	Charlton
8:00 am – 12:00 pm	Foundation Board Meeting	Summit 3
12:30 pm – 1:30 pm	2023 SPC	Charlton
1:30 pm – 2:30 pm	EMIG Steering Committee	Charlton
8:30 pm – 10:00 pm	Leadership Reception (invitation only)	Juniper
10:00 pm – 12:00 am	After Hours Lounge	Juniper

Friday, December 2 - CONGRESS

8:30 am – 12:30 pm	JMIG Editorial Board Meeting	Charlton
11:30 am – 1:30 pm	FMIGS Board Meeting	Summit 3
11:30 am – 12:30 pm	Special Interest Groups	
	Robotics	Summit 6
	Hysteroscopy	Summit 7
	Oncology	Summit 4–5
	Special Program	
	AAGL/ASRM Podcast	Homestead 1
	Managing Complications of Abortion	Willow Lake 1-2

12:45 pm – 1:45 pm	JMIG Editor's Awards Luncheon (invitation only)	Juniper
11:30 am – 4:30 pm	Social Event: Craft Beer Tour	
2:15 pm – 3:15 pm	FMIGS Townhall - Fellows	Summit 4-5
3:15 pm – 4:15 pm	FMIGS Townhall - Fellows / Residents (Coffee)	Summit 8
3:15 pm – 4:15 pm	Special Interest Groups	
	Pelvic Pain	Summit 6
	Fibroids	Summit 7
	Special Programs	
	Affiliated Society President's	Summit 3
6:00 pm – 8:00 pm	COGA (9 am – 11 am Beijing)	Willow Lake 1-2
8:00 pm – midnight	2nd Annual FAAGL Karaoke Party "Music is Medicine"	Juniper
10:00 pm – 12:00 am	After Hours Lounge	Juniper

Saturday, December 3 - CONGRESS

11:30 am – 12:30 pm	Special Interest Groups	
	Endometriosis	Summit 6
	Pediatric-Adolescent Gyn Surg	Summit 7
	Urogyn/Vaginal Surgery	Summit 8
	Special Program	
	Patient Advocacy - Fibroids	Willow Lake 1-2
	FMIGS/FPRN	Summit 4–5
11:30 am – 4:30 pm	Social Event: Stanley Marketplace Tour	
12:30 pm – 1:30 pm	SurgeryU Editorial Board Meeting	Summit 3
1:00 pm – 3:00 pm	FMIGS PD & ADP's Town Hall	Summit 4–5
1:30 pm – 2:30 pm	Endometriosis Centers of Excellence Taskforce	Charlton
2:00 pm – 4:15 pm	FMIGS YAN Town Hall	Summit 7
8:00 pm – 12:00 am	Presidential Gala	Juniper



SPEAKER READY ROOM - RED ROCK 10&11

Computers are available to review and upload your presentations or make minor changes during operating hours. Changes to educational content are not allowed.

Upon arrival, presenters will be required to complete a presenter form. Electronic storage devices will be scanned for viruses prior to computer usage. If viruses are found, the device will need to be cleaned before it can be used in the Speaker Ready Room.

Thursday, December 1 • 7:00 am – 6:00 pm

Friday, December 2 – Saturday, December 3 • 8:00 am – 5:00 pm

PRESS ROOM - CREST 1

Press is welcome to setup interviews or utilize this room as a resource.

Friday, December 2 – Saturday, December 3 • 9:00 am – 5:00 pm

REGISTRATION FEES AND PRICING

YOUR GLOBAL CONGRESS EXPERIENCE INCLUDES

- Over 22.5 CME Credits.
- Access to 22 Postgraduate Lab and Didactic Courses.
- Congress General Sessions, Plenary Sessions, "Ted" Style AAGL Talks, Panels, Surgical Tutorials, Live Surgeries, Oral Sessions and Poster Presentations.
- Exhibit Hall and Opening Reception showcasing the most innovative companies and products in MIGS.
- Food and Beverage Events including: Exhibit Hall Box Lunch, Light Breakfast Each Day, and Morning and Afternoon Beverage Breaks.
- Networking and Industry Hosted Product Theaters and Evening Symposia and other AAGL Sanctioned Events.
- Access to the online Scientific Program and Abstract Supplement book.
- Access to AAGL's Virtual Venue, Mobile App, Scheduling Tool, and Networking Platform.
- Access to all On Demand Content (Available until January 31, 2023).
- Access to the FAAGL Karaoke Party (Free)

IN-PERSON FEES

Category	AAGL Member	Non Member*
Practicing Physician Developed Country	\$995	\$1,345
Practicing Physician Emerging Market	\$695	\$845
Resident/Fellow, Allied Health, Retired **	\$695	\$845
Medical Student ***	\$250	\$250

*Non Member rate includes one year membership in AAGL.

**Proof of Residency or Fellowship is required.

***Student validation required

POSTGRADUATE COURSE AND OPTIONAL TICKET PRICING

Add-On Courses and Tickets (In Person Only)	Price Per Ticket/Person	Attendance Limited (First come first served basis)
PG Hysteroscopy Simulation Lab	\$325	60
PG Robotic Simulation Lab	Included	30
PG Anatomy Cadaveric Lab	\$1,900	30
PG Surgical Coaching Course	\$1,000	30
Postgraduate Luncheon Roundtable*	\$75	300
Foundation Karaoke Party (December 2)	Included	500
Box Lunch ticket (December 2-3)	\$75	No Limit
51 ST Presidents Gala individual ticket (December 3)	\$195 advance/\$245 onsite	500
Craft Beer Tour (December 2)	\$85	30
Stanley Marketplace Tour (December 3)	\$50	30
Guest Fee	\$95	No Limit

GUEST POLICY

A name badge is required for guests attending the AAGL Global Congress. A \$95 fee applies and includes entry to:

- Congress Opening General Session and Casual Reception – December 1.
- The Welcome Reception in the Exhibit Hall – December 1.
- Entrance to the exhibit hall December 1-3.

Separate ticket fees apply for the Foundation Karaoke Party, exhibit hall box lunches, Presidents Gala, and special tours. Please include your guest's name during the registration process. Additional tickets may be purchased at the onsite registration desk.

CANCELLATION POLICY

In-Person Registration Cancellation: Any in-person registrant that is unable to travel to the meeting b/c of government or company travel mandates, will be converted to a virtual registration and any in-person special event tickets purchased in advance (PG Labs, Gala, Postgraduate Luncheon) will be 100% refunded. Please submit your cancellation in writing to registration@aagl.org. Virtual Registration Cancellation: Virtual registration cancellation must be received in writing to registration@aagl.org. You will receive a full refund if received before November 15th, after this date, refunds are no longer available. Unfortunately, refunds cannot be granted for no-shows, however, you will have access to all the on-demand content until January 31, 2023.

REGISTRATION DESK & APP



ON-SITE REGISTRATION DESK

The on-site registration desk will be located on the first floor, Valley 4 and 5.

Registration Desk Hours:

Thursday, December 1 – 6:00 am – 5:30 pm
Friday, December 2 – 6:00 am – 5:30 pm
Saturday, December 3 – 6:00 am – 5:30 pm
Sunday, December 4 – 8:00 am

MOBILE APP

Check out AAGL's Global Congress Meeting App, now available for free on iOS and Android devices. Use the app to access our program schedule, explore the exhibits, and access venue maps.

The App will also include "Meeting Tracks" to help you plan your sessions, such as following an endometriosis path, a vaginal surgery path, a hysteroscopy path, and more!

You can also use the App to connect with delegates, share photos and comments on the meeting, and upload content on social networks.



CONGRESS APP

Download and Log in to AAGL



HOTEL INFORMATION

AAGL appreciates your support by booking your rooms at the official Congress hotels.



Atwell Suites
18350 East 65th Ave
Denver, CO 80249
303-306-8249



Element Denver International Airport
6672 Tower Road
Denver, CO 80249
303-307-8350

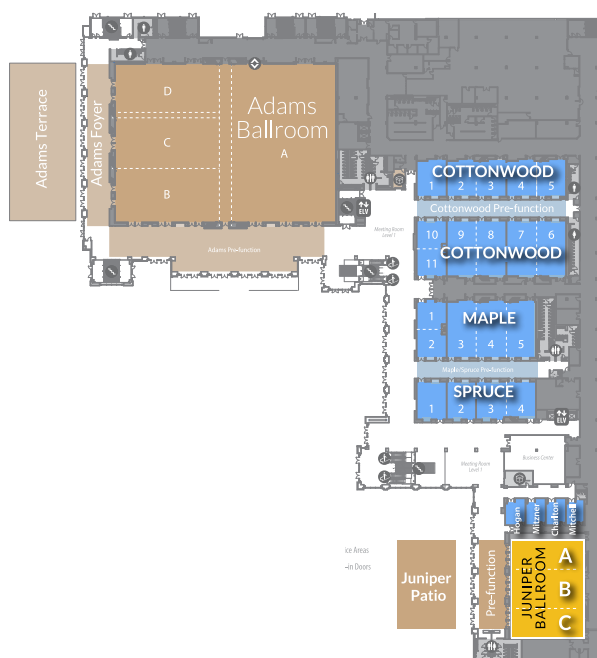


Hyatt Place Peña Station
6110 North Panasonic Way
Denver, CO 80249
720-405-4321



Residence Inn Denver Airport / Convention Center
6762 Tower Road
Denver, CO 80249
303-307-9100

GAYLORD ROCKIES RESORT AND CONVENTION CENTER FLOOR PLANS

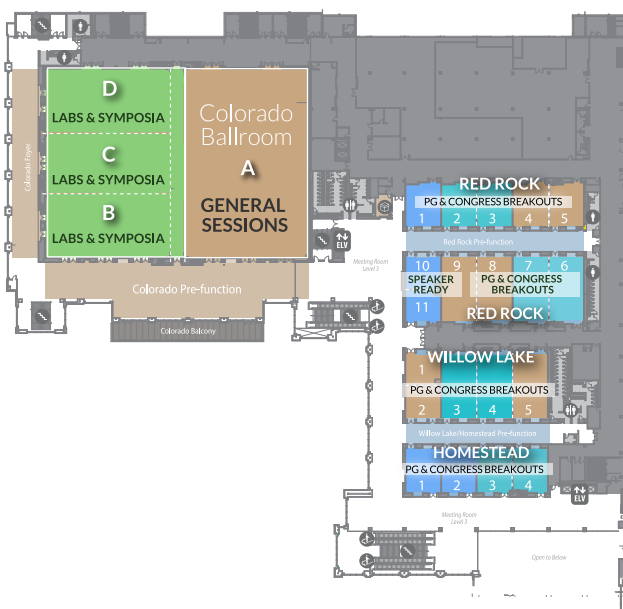
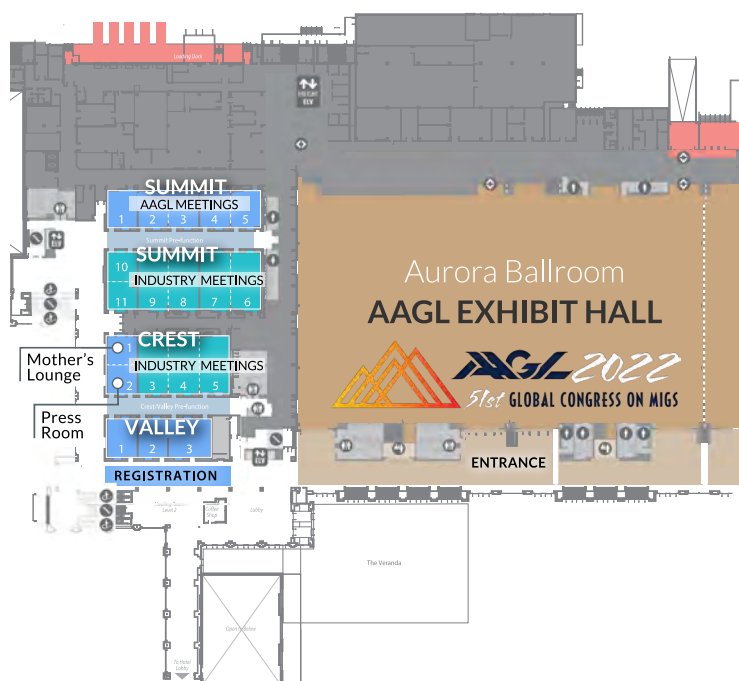


CONVENTION CENTER | LEVEL 1

FMIGS Graduation
Foundation Karaoke
After Hours Lounge
Presidential Gala

CONVENTION CENTER | LEVEL 2

Registration
Exhibit Hall
AAGL Meetings (MATM)
Industry Meetings



CONVENTION CENTER | LEVEL 3

Speaker Ready Room
FMIGS Bootcamp
PG Courses & PG Labs
General Sessions
Evening Symposia





Onsite Education

Medical Expert Training on the PneumoLiner™ Containment Device

As Mandated by the FDA Prior to Physician Use



Date & Time

December 1-3, 2022

Time Required: Approximately
45 mins to an hour

7:45 am – 2:30 pm MST

Walk-Ins are welcomed!

****Pre-registration is highly
recommended**



Training Venue

**AAGL 51st Global Congress
Gaylord Rockies Resort and
Convention Center**

Booth #918

6700 N. Gaylord Rockies Blvd.
Aurora, CO 80019



Application Instructions

- For optimum results, please use Google Chrome as your browser when accessing the portal.
- Each applicant must create an individual profile on our Education Portal before applying for the course.
- After the profile has been authenticated, you can apply for the course by navigating to the program application.

PneumoLiner™ Containment Device Certification Training Program Description

The Olympus Contained Tissue Extraction System combines the PneumoLiner™ a first-of-its-kind containment device to provide certain patients a laparoscopic surgery option to avoid open hysterectomy and myomectomy for uterine fibroid removal.

Prerequisites

- Successful completion of FDA-required training is mandatory prior to usage of the PneumoLiner. Training takes approximately 45 mins to an hour and will be available to qualified attendees.
- Pre-Requisite: You must be a GYN Laparoscopist who has performed at least 12 laparoscopic cases in the last six (6) months.

Learning Objectives

- Participants will learn the safe and effective use of the Containment Tissue Extraction System (CTE) which is comprised of the PneumoLiner containment device.
- Participants will better understand the indications, contraindications, and warnings associated with the use of these devices and be able to properly identify appropriate patients for use with these devices.
- Identify and properly name the components of the Contained Tissue Extraction System.
- Articulate the 7 potential risk areas in using the PneumoLiner containment device.

Olympus Products Featured

PneumoLiner™ Containment Device

Visit us at Booth #523

Registration Link: medical.olympusamerica.com/customer-resources/learning-opportunities

Learn more about Olympus Continuum at: olympuscontinuum.com

The physician presenter(s) are paid consultants of the Olympus Corporation, its subsidiaries and/or its affiliates. | Olympus and Olympus Continuum are registered trademarks of Olympus Corporation, Olympus America Inc., and/or their affiliates. | Medical devices listed may not be available for sale in all countries.

COMMUNITY SPACES / NETWORKING

VISIT THE AAGL BOOTH #1023

Aurora Exhibit Hall, Level Two

Come to the AAGL Booth to learn about the many programs and services available with your membership! Stop by for a meet and greet with our general session speakers, take a professional headshot and network in our lounge area.

Exhibit Hall Hours

Thursday, December 1
6:30 pm – 8:30 pm

Friday, December 2

Saturday, December 3
8:00 am – 2:30 pm

- EMIGS Experience
- Photo Booth
- Foundation Store
- Meet & Greet with International Faculty



MOTHER'S LOUNGE - CREST 2

Mother's Lounge Hours

Thursday, December 1 – Saturday, December 3
8:00 am – 5:00 pm

Extended Hours for Welcome Reception (12/1) until 8:00 pm

The AAGL will provide a private and secure Mother's Lounge with comfortable furnishings, charging station and a refrigerator.

AAGL is not responsible for items left in the room.



EVENING EVENTS

2ND Annual "Music is Medicine" Karaoke Party & Fundraiser

Friday, December 2
8:30 pm – 12:00 am
Location: Juniper Ballroom
Admission: Free

51ST Presidential Gala: An Evening of Elegance

Saturday, December 3
8:00 pm – 12:00 am
Location: Juniper Ballroom
Tickets: \$245

GUEST SOCIAL EVENTS AND TOURS



Craft Beer Tour

Friday, December 2
1:30 pm – 5:30 pm
Tickets: \$85



After Hours Lounge

Thursday, December 1, Friday, December 2
10:00 pm – 12:00 am
Juniper Ballroom
Admission: Free



Stanley Marketplace Tour

Saturday, December 3
11:30 am – 4:30 pm
Tickets: \$50

Apply for the 2024–2026 AAGL FELLOWSHIP PROGRAM



The Fellowship in Minimally Invasive Gynecologic (FMIGS) sponsors a two- and three-year comprehensive training program in advanced gynecologic endoscopy.

- Offered through more than 50 hospital sites.
- Educational objectives focus on evidence-based medicine, anatomical principles, instrumentation, operative laparoscopy, operative hysteroscopy, and robotics.
- In-depth experience using state-of-the-art techniques.
- 500+ AAGL Fellows graduated.

Deadline to apply for the 2024-2026 FMIGS Program is MAY 1, 2023.

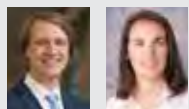


AAGL FELLOWS BOOTCAMP • WEDNESDAY, NOV 30, 2022

7:30 am - 4:30 pm

Room: Colorado B, C, D

By Invitation for FMIGS Fellows only.



Co-Chairs: Mark Dassel, Nicole M. Donnellan

This full day program is designed to enhance FMIGS trainees' surgical techniques through low and high-fidelity simulation models. Small group, hands-on sessions will permit fellows to explore various technologies in VNOTES, expand skills in laparoscopic suturing and knot tying and develop further comfort with chronic pelvic pain and advanced laparoscopy, including surgical decision making. The training divides 1st and 2nd year fellows into separate learning modules, more advanced for the second-year fellows. This will build into a 2-year FMIGS bootcamp curriculum that aims at teaching basic skills to first year fellows and advanced decision making to second year fellows.

Learning Objectives: At the conclusion of this course, the participant will be able to:

1) Properly utilize VNOTES instrumentation; 2) identify combined vaginal and laparoscopic surgical techniques to complete VNOTES surgery; 3) counsel patients regarding the risks and benefits of VNOTES treatment options; 4) develop skills in treating chronic pelvic pain; 5) practice tips and techniques for efficient laparoscopic suturing and intracorporeal knot tying; 6) acquire skills for optimizing surgical teaching; and 9) understand better how to maximize fellowship experiences to prepare for the transition to independent practice.

COURSE MODULE DESCRIPTIONS

ROBOTICS BUFFET

Faculty: Nita A. Desai, Jamal Mourad, Erica L. Stockwell

This session will involve the presentation of multiple robotics platforms and provide an opportunity for fellows to gain experience on these platforms. Over the course of 45 minutes, 12 fellows will be involved in immersive robotics training, 15 minutes per console. The remainder of the 12 individuals will participate in team building activities designed to enhance surgical team collaboration and communication.

CHRONIC PELVIC PAIN (CPP)

Faculty: Erin T. Carey, Jorge F. Carillo, Georgine Lamvu, Janelle K. Moulder, Megan S. Orland, Frank F. Tu, M. Jean Uy-Kroh, Gabrielle T. Whitmore

Short didactic on practical pelvic pain techniques and 3 stations: (1) abdominal TPI, (2) vaginal TPI and botox, (3) Cases of CPP. This course will concentrate on some of the musculoskeletal procedural components in the treatment of chronic pelvic pain as well as providing a broad overview to the general treatment of the complex pelvic pain patient. This course will focus on adjunctive therapies beyond surgical intervention that can significantly improve the care of the chronic pelvic pain patient.

VNOTES

Faculty: Sonnie Kim-Ashchi, Jan Baekelandt, Asha Bhalwal, Brandi Hardin, Veronica Lerner, Jay Matkins, Grover May, Alvaro Montealegre, Nathan Parthasarathy, Howard Salvay, Lamarr Tyler, Marc Vennart, Dani Zoorob

This course unifies the skills necessary for vaginal and laparoscopic technique, simultaneously introducing a technique that is gaining momentum in the minimally invasive gyn surgical space. We will use unique and detailed models provided by Applied Medical for the learning of this technique.

SUTURING

Faculty: Joseph L. Hudgens, Sadikah Behbehani, Christine E. Foley, Janis L. Green, Lara Harvey, Laura N. Homewood, Traci Ito, Ambareen Jan, Megan I. Loring, Nichole Mahnert, Magdy P. Milad, J. Biba Jijjar, Adeoti E. Oshinowo, Steve Radtke, Jessica K. Shields, Michael K. Shu, Jovana Tavcar, Karen C. Wang, Johnny Yi

This course introduces fellows to the fundamentals of laparoscopic suturing through a series of video didactic and one-on-one coaching. This unique course has had excellent feedback in the past and is a mainstay in fellows' education, translatable to both the traditional laparoscopic and robotic platforms.

ADVANCED SUTURING

Expanding to advanced suturing techniques: ipsilateral vs contralateral vs suprapubic suturing practice, advanced knot, sewing on a simulated "bowel" or bladder. This course seeks to build upon the basics suturing course taught to the first years by introducing clinical decision making, more advanced skills, and complex clinical scenarios into a suturing course.

FMIGS BOOTCAMP 2022: GENERAL SCHEDULE

	1A	1B	2A	2B
Session 1	ROBOTICS	vNOTES	CPP	ADV SUTURING
Session 2	SUTURING	ROBOTICS	vNOTES	CPP
Session 3	CPP	SUTURING	ROBOTICS	vNOTES
Session 4	vNOTES	CPP	ADV SUTURING	ROBOTICS

COURSE OUTLINE

7:30 am	Registration (Breakfast at hotel served at 6:30 am)			
7:40 am – 7:55 am (15 min)	Introductions and Course Overview			M.W. Dassel N.M. Donnellan
	1st Year Fellows 1A & 1B (46 total, two groups of 23) 2nd Year Fellows 2A & 2B (44 total, two groups of 22)			
7:55 am – 8:00 am (5 minutes)	TRANSITION TO NEW STATION			
8:00 am – 9:30 am (90 minutes)	SESSION #1			
	Robotics	1A	J. Mourad	
	Laparoscopic Suturing	2B	J. Hudgens	
	CPP	2A	M. Dassel	
	vNOTES	1B	vNOTES Faculty	
9:30 am – 9:40 am (10 minutes)	TRANSITION TO NEW STATION			
9:40 am – 11:10 am (90 minutes)	SESSION #2			
	Robotics	1B		
	Laparoscopic Suturing	1A		
	CPP	2B		
	vNOTES	2A		
11:10 am – 11:20 am (10 minutes)	TRANSITION TO NEW STATION			
11:20 am – 11:50 am (30 minutes)	AAGL/FMIGS Resources	1A, 1B	M. Louie M. Stuparich	
11:20 am – 11:50 am (30 minutes)	MIGS Billing Tricks and Tips	2A, 2B	J. Lauer M. Hoffman	
11:50 am – 12:50 pm (60 minutes)	LUNCH + ROUND TABLE DISCUSSIONS	1A, 1B, 2A, 2B		
12:50 pm – 1:00 pm (10 minutes)	TRANSITION TO NEW STATION			
1:00 pm – 2:30 pm (90 minutes)	SESSION #3			
	CPP	1A		
	vNOTES	2B		
	Robotics	2A		
	Advanced Laparoscopic Suturing	1B		
2:30 pm – 2:40 pm	TRANSITON TO NEW STATION			
2:40 pm – 4:10 pm	SESSION #4			
	CPP	1B		
	vNOTES	1A		
	Robotics	2B		
	Advanced Laparoscopic Suturing	2A		
4:10 pm – 4:30 pm	Closing Remarks and Survery Feedback. Make next year better! Please complete the Bootcamp Evaluation Survey!			
4:30 pm	Adjourn			All Faculty

At the conclusion of the Boot Camp, please join us in celebrating the
2022 FMIGS Graduation Class from 6:00 pm – 7:00 pm and a
Cocktail Reception following from 7:00 pm – 8:00 pm in the Juniper Ballroom.



Congratulations!
FMIGS
Class of 2022

GRADUATION CEREMONY

WEDNESDAY, NOVEMBER 30, 2022

6:00 PM - 8:00 PM

**GAYLORD ROCKIES RESORT & CONVENTION CENTER
JUNIPER BALLROOM**

- | | |
|---------|---|
| 6:00 pm | Welcome and Introduction:
<i>Maurício S. Abrão, MD, PhD, AAGL President</i> |
| 6:35 pm | Foundation of the AAGL Awards:
<i>John A. Sunycz, MD, FAAGL President</i> |
| 6:40 pm | Presentation of Certificates to Class of 2022
<i>Nita A. Desai, MD, MBA, FMIGS President</i> |
| 7:00 pm | Cocktail Reception |

Thank You!

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Thank you, Suketu, for your years of leadership and service to SurgeryU!

Join us as we honor Dr. Mansuria during the Opening Ceremony on Thursday, December 1st, from 5:15 pm – 6:15 pm in Colorado A, Level 3.

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LUNCHEON ROUNDTABLES

12:30 pm – 1:30 pm

Room: Colorado Foyer

Tickets: \$75



THURSDAY

SPEAKER		TOPIC
1	Pere Barri	Colposacropexy as Learning Model for Deep Endometriosis Surgery
2	Edward Betcher	Minimally Invasive Tools for the Treatment of Fibroids...What's the Latest Options to Customize Management
3	Jubilee Brown	No Contracts Required: Running an Out of Network Surgical Practice
4	Nicholas Fogelson	Running out of Network Surgical Practice
5	Mark Hoffman	Integrating MIGS into an Academic Ob/Gyn Department
6	Nutan Jain	Posterior Approach: Uterine Artery First, Before the Bladder Dissection in TLH
7	Kimberly Kho	One Size Does Not Fit All: Alternatives to Hysterectomy & Uterine Preserving Options for Fibroids
8	S. Krishnakumar	Challenges in Hysteroscopy in the Postmenopausal and Elderly Women
9	Armando Menocal	Minimally Invasive Surgery in Latinoamerica
10	Liselotte Mettler	How do Laparoscopy and Hysteroscopy Complement Each Other?
11	Shanti Mohling	Learning to Feel Comfortable with Diaphragmatic Endometriosis: Tips and Tricks
12	Mac Munro	Adenomyosis: How to Find It; When to Treat It
13	Iris Orbuch	Thriving in Private Practice
14	Bhaskar Pal	Laparoscopic Myomectomy Step by Step
15	Marie Paraiso	Routes and Tools for Pelvic Reconstructive Surgery: Lessons Learned during 25 Years of Clinical Practice, Educating Trainees, and Researching to Improve Care
16	Paulo Ayroza Ribeiro	Tips and Tricks to Reduce Bladder and Rectal Functional Morbidity in Deep Endometriosis Surgery
17	Mireille Truong	Social Media: Is it Worth My Time? Pros & Cons & How to Avoid Digital Media Burnout
18	Jeffrey Woo	Just Do It! Tips to Utilize Surgical Videography to Build Your Career, In and Out of the OR
19	Johnny Yi	Adopting Single Port Robotics for Sacrocolpopexy and GYN Surgery
20	Ami Shah	Disease Base Model for the Treatment of Uterine Fibroids
21	Gary N. Frishman	Evidence-Based Hysteroscopy for Your Office
22	Andrew I. Brill	Endoscopic Myomectomy: Pearls and Pitfalls
23	Assia A. Stepanian	MRKH: Achieving Success in Neovagina Creation

OBS-601

Complex Obstetric Surgery for the MIG Surgeon

7:00 am – 9:30 am

Room: Red Rock 2/3

Didactic | Fee: Included in Registration



Co-Chairs: Ally Murji, Caitlin A. Jago

Faculty: Sukhbir Sony Singh, Saketh Guntupalli

Member Submitted

As MIG surgeons, we are advanced pelvic surgeons and are often called upon by our obstetrician colleagues to deal with challenging pregnancy-related pathology. This course highlights the practice that exists between the intersection of obstetrics and surgical gynecology. The program will focus on the surgical approaches to Placenta Accreta Spectrum Disorder (PASD), cesarean scar pregnancy, management of complex retained products of conception, and complex cesarean deliveries (fibroids, endometriosis and more). The course will focus on surgical nuances and techniques and will also afford an opportunity for Q&A with the experts.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Utilize surgical techniques to approach PASD and manage blood loss for this condition; 2) Identify the challenges in diagnosis of cesarean scar pregnancy and provide algorithm for management; 3) Compare techniques to evaluate and hysteroscopically manage retained products of conception; and 4) Consider different approaches to challenging cesarean sections in the context of fibroids, endometriosis, and more.

COURSE OUTLINE

7:00 am	Welcome, Introduction, and Course Objectives	A. Murji/ C.A. Jago
7:05 am	Approach to Placenta Accreta Surgery	S. Guntupalli
7:40 am	Cesarean Scar Pregnancy	A. Murji
8:10 am	Retained Products of Conception - Beyond D&C	C.A. Jago
8:40 am	The Difficult Cesarean (Fibroids, Endometriosis & More)	S.S. Singh
9:10 am	Questions and Answers	All Faculty
9:30 am	Adjourn	

HSC-602

Hysteroscopy – Taking Your First Steps in Intrauterine Surgery

7:00 am – 9:30 am

Room: Red Rock 4/5

Didactic | Fee: Included in Registration



Co-Chairs: Christina A. Salazar, Jude E. Okohue

Faculty: Alka Kumar, Bolarinde Ola, Erica F. Robinson

Submitted by the Hysteroscopy SIG

This course provides a comprehensive beginner's tutorial on the basics of intrauterine surgery. You will learn how to identify the optimal candidates as well as how to preoperatively plan for success. We will review the principles for performing intrauterine surgery using vaginoscopy and use videos to demonstrate techniques for tips and tricks to overcome commonly encountered challenges, as well as review both normal and abnormal findings in the uterus. Through hands-on simulation, we will demonstrate the way to safely explore the intrauterine cavity to identify abnormalities and treat pathology using the basic hysteroscopic tools.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Demonstrate an understanding of the indications for intrauterine surgery and how to plan for success; 2) Become comfortable performing vaginoscopy and exploring the uterine cavity; and 3) Acquire basic skills with hysteroscopic scissors and graspers.

COURSE OUTLINE

7:00 am	Welcome, Introductions, and Course Overview	C.A. Salazar/ J.E. Okohue
7:05 am	When & Why: Preoperative Screening and Planning	C.A. Salazar
7:30 am	Ergonomics and Vaginoscopy, How to Overcome the Cervix	B. Ola
7:55 am	Staying Safe: Exploring the Uterine Cavity	J.E. Okohue
8:20 am	Using Your Tools	E.F. Robinson
8:45 am	Seeing the Endometrium: Normal & Abnormal	A. Kumar
9:10 am	Questions and Answers	All Faculty
9:30 am	Adjourn	

NERV-603

Nerve Sparing - Part I

7:00 am – 9:30 am

Room: Red Rock 6/7

Didactic | Fee: Included in Registration



Co-Chairs: Nucleio Lemos, Adrian C. Balica

Faculty: Marcello Ceccaroni, Gustavo L. Fernandes, Resad P. Pasic, Benoit Rabischong

This didactic and cadaveric workshop is designed to help the advanced pelvic surgeon to implement nerve-sparing techniques in their day-to-day procedures. This course will focus on the nerves that are commonly injured while performing radical pelvic surgery and female pelvic reconstructive procedures, their anatomy, and strategies to avoid injury.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Review the anatomy of the nerve bundles crossing the pelvis; 2) Recognize the main steps where nerve damage can occur during pelvic surgery; and 3) Implement standardized steps for nerve-sparing laparoscopic reconstructive surgery and endometriosis.

COURSE OUTLINE

7:00 am	Welcome, Introduction and Course Overview	N. Lemos/ A.C. Balica
7:05 am	Nerve-Sparing Begins with Proper Port Placement: Anatomy of Iliioinguinal, Iliohypogastric, Genitofemoral and Lateral Femoral Cutaneous Nerves and How to Avoid Them	R.P. Pasic
7:25 am	What Happens if You Mess with the Wrong Guys: Functional Pelvic Anatomy and Neurophysiology	N. Lemos
7:45 am	Parametrial Anatomy and Neuroanatomy	B. Rabischong
8:05 am	Pelvic Fasciae and Avascular Spaces: Nerve-Sparing with a "Non-Touch" Techniques	G.L. Fernandes
8:25 am	Incorporating Nerve Sparing Procedures in My Daily Practice. How I Did it and What Happened	A.C. Balica
8:45 am	Keeping an Eye on Nerve-Sparing by Direct Visualization of Nerve Bundles	M. Ceccaroni
9:05 am	Questions and Answers - Faculty Discussion	
9:30 am	Adjourn	

ENDO-604

Building Excellence in Patient Centered Endometriosis Management

7:00 am – 9:30 am

Room: Red Rock 8/9

Didactic | Fee: Included in Registration



Co-Chairs: Cindy M. Mosbrucker, Jeff T. Arrington

Faculty: Maria Victoria Vargas, Andrea Vidali

Submitted by the Endometriosis SIG

This session will present a structured approach to the diagnosis and surgical treatment for stage III-IV and deeply infiltrative endometriosis. The course will be led by experienced endometriosis surgeons who will present pearls and techniques that can be used by surgeons of all levels. The course will take a holistic approach, presenting discussions and videos when appropriate on preoperative patient evaluation, counseling, surgical technique, post-operative management, multidisciplinary teams, and the approach to pain that is refractory to surgery.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Implement preoperative diagnostic strategies for advanced and deeply infiltrative endometriosis; 2) Integrate strategies for patient centered counseling and appropriate case selection; and 3) Employ the components necessary to build a holistic multidisciplinary team.

COURSE OUTLINE

7:00 am	Welcome Introduction and Course Overview	C.M. Mosbrucker/ J.T. Arrington
7:05 am	A Standardized Approach to the Office Evaluation of the Endometriosis/Pelvic Pain Patient, Focusing on Clues in the History, Exam, Office, Ultrasound and Patient Centered Counseling	J.T. Arrington
7:30 am	Endometriosis Related Infertility and the Surgical Approach to Endometriomas	A. Vidali
7:55 am	A Standardized Approach to the Pelvic Sidewall and Rectovaginal Septum	C.M. Mosbrucker
8:20 am	The Systematic Survey of the Abdomen and Pelvis, Correlating Disease Appearance with Pathology and, Recording Your Findings with the AAGL Staging App	M.V. Vargas
8:45 am	Case Presentation and Panel Discussion on Recurrent Pelvic Pain after Excision	All Faculty
9:10 am	Questions & Answers	
9:30 am	Adjourn	

PELV-605

Understanding Chronic Overlapping Pain Conditions

7:00 am – 9:30 am

Room: Willow Lake 3/4

Didactic | Fee: Included in Registration



Co-Chairs: M. Jean Uy-Kroh, Ashley Gubbels

Faculty: Tim A. Deimling, Anna E. Reinert, Sara R. Till

Submitted by the Pelvic Pain SIG

Pelvic pain is an enigma for many. When it isn't endometriosis, what do you do next? This course is designed for clinicians looking to understand more about chronic pelvic pain conditions, focusing on evaluation, diagnosis, and initial management along with expert pearls for those already managing these complex syndromes. Beginning with an overview of the biopsychosocial pathophysiology underlying chronic pelvic pain, the panel will lead participants through common syndromes focusing on diagnosis, initial management, and when to refer to a specialist. Evidence-based management will be discussed allowing attendees to feel confident in their management yet also providing guidance should pain persist.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Evaluate and diagnose common chronic overlapping pelvic pain conditions; 2) Employ initial management of these conditions, both in isolation and conjunction with one another; and 3) Determine when referral to a sub-specialist is indicated for persistent pain.

COURSE OUTLINE

7:00 am	Welcome, Introduction and Course Overview	M.J. Uy-Kroh/ A. Gubbels
7:05 am	Understanding the Biopsychosocial Nature of Chronic Pelvic Pain	A. Gubbels
7:30 am	Myofascial Pain	S.R. Till
7:55 am	Interstitial Cystitis and IBS	A.E. Reinert
8:20 am	Vulvodynia	M.J. Uy-Kroh
8:45 am	The Role of Central Sensitization in Persistent Pain	T.A. Deimling
9:10 am	Questions & Answers	All Faculty
9:30 am	Adjourn	

ONC-606

Oncology Controversies for the Practicing Gynecologist

7:00 am – 9:30 am

Room: Willow Lake 5

Didactic | Fee: Included in Registration



Co-Chairs: Dario R. Roque, Fernando Heredia

Faculty: Emma L. Barber, Gulden Menderes, Edward J. Tanner

Submitted by the Oncology SIG

This course will provide an overview of three oncology related topics that would be of interest to any practicing gynecologic surgeon. First, we will present evidence-based guidelines for the work-up and management of the pelvic mass. This will include a review of imaging modalities and features that could help differentiate benign vs. malignant lesions, as well as a discussion of surgical approach (i.e., MIS vs laparotomy) and extent of surgery in special cases (i.e., cystectomy vs. oophorectomy in borderline tumors). The second topic will focus on the impact of uterine manipulators on oncological outcomes in endometrial cancer surgery. This topic will be presented in a debate format. The debaters will review the current literature and make an argument for and against the use of uterine manipulators in patients undergoing MIS for endometrial cancer. The last topic will also be presented in a debate format and will address the role of MIS in interval debulking surgery for ovarian cancer. The presenters will review the current literature, provide videos demonstrating the feasibility of the minimally invasive technique and make an argument for and against this surgical approach in the management of patients with ovarian cancer.

Learning Objectives: *At the conclusion of this course, the participant will be able to:*

- 1) Choose the appropriate workup and surgical approach for patients with a pelvic mass;
- 2) Describe the benefits and potential risks of uterine manipulator use in patients undergoing MIS for endometrial cancer; and
- 3) State the significance and limitations of MIS in the management of ovarian cancer.

COURSE OUTLINE

7:00 am	Welcome, Introduction and Course Overview	<i>D.R. Roque/ F. Heredia</i>
7:10 am	Management of the Pelvic Mass: Who is it Safe for Me to Operate on and Who Should I Refer?	<i>D.R. Roque</i>
DEBATE #1: Uterine Manipulator Use in Endometrial Cancer Surgery		
7:50 am	Pro	<i>E.L. Barber</i>
8:05 am	Con	<i>F. Heredia</i>
8:20 am	Questions and Answers - Discussion	
DEBATE #2: Minimally Invasive Surgery for Ovarian Cancer Interval Debulking		
8:30 am	Pro	<i>G. Menderes</i>
8:45 am	Con	<i>E.J. Tanner</i>
9:00 am	Questions and Answers - Discussion	
9:30 am	Adjourn	

ROBO-607

Advanced Robotics Course for Laparoscopic Surgeons

9:45 am – 12:15 pm

Room: Red Rock 2/3

Didactic | Fee: Included in Registration



Co-Chairs: Jenna Z. Marcus, Jin Hee Kim

Faculty: Noah A. Goldman, Eirwen M. Miller, Khara Simpson

Member Submitted

This course will offer surgeons with minimally invasive experience the opportunity to refine their skills and technique in both robotic assisted and traditional laparoscopic surgery. The course will be designed to help surgeons facilitate a plan for difficult cases with respect to patient anatomy, obesity, techniques for abdominal entry and specimen extraction. Faculty will address dissection in the retroperitoneum, opening and identifying spaces, vital structures and landmarks. Faculty will also explore dissection to identify and trace the ureter and techniques to identify it in patients who are morbidly obese or have complex pathology utilizing new techniques such as injection of indocyanine green. This course applies to the global AAGL audience and offers techniques aimed to promote safe and successful minimally invasive surgery.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Apply a systematic approach to complex pelvic surgical cases; 2) Develop a strategy to tackle difficult cases with respect to patient anatomy, obesity, techniques for abdominal entry and specimen extraction; and 3) Apply techniques to mitigate challenging clinical situations while maintaining a minimally invasive approach.

COURSE OUTLINE

9:45 am	Welcome, Introduction and Course Overview	J. Kim/ J.Z. Marcus
9:50 am	Planning the Procedure Start to Finish; Entry and Extraction, Obesity	J.Z. Marcus
10:15 am	Approaching the Obliterated Anterior Cul De Sac & The Large Uteri	J.H. Kim
10:40 am	Robot-assisted Laparoscopic Myomectomy: Pushing the Envelope	K. Simpson
11:05 am	Approaching the Obliterated Posterior Cul De Sac: Reviewing the Retroperitoneum & Ureteral Identification Strategies and Keeping Them Safe	E.M. Miller
11:30 am	Complications	N.A. Goldman
11:55 am	Questions and Answers	All faculty
12:15 pm	Adjourn	

GEN-608

Gender Affirmation Surgery

9:45 am – 12:15 pm

Room: Red Rock 4/5

Didactic | Fee: Included in Registration



Chair: Cecile A. Ferrando

Faculty: Veronica Lerner, Michelle Y. Morrill, Rob R. Pollard, Bobbie J. Rimel

This course is meant for attendees interested in learning about perioperative considerations and management of the transmasculine patient seeking hysterectomy for gender affirmation. Attendees will learn about the assessment of patients, preoperative counseling, considerations about concurrent oophorectomy, vaginectomy and pre-surgical fertility options, as well as the role of vNOTES in performing these procedures. This course is meant for providers already performing gender affirmation surgery as well as those who are interested in learning more about this patient population and their surgical needs.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Perform perioperative management of patients seeking hysterectomy for gender affirmation; 2) Recognize that the vNOTES approach to minimally invasive hysterectomy is an option for providers performing hysterectomy for transgender patients; and 3) Identify the role of concurrent vaginectomy at the time of gender affirming hysterectomy.

COURSE OUTLINE

9:45 am	Welcome, Introduction and Course Overview	C.A. Ferrando
9:50 am	Overview of Gender Affirming Care	B.J. Rimel
10:15 am	Considerations for the Transgender Patient Seeking Hysterectomy	C.A. Ferrando
10:40 am	Transmasculine Hysterectomy: Surgical Technique, Complications and Outcomes	R.R. Pollard
11:05 am	Role of vNOTES for Gender Affirming Hysterectomy	V. Lerner
11:30 am	Vaginectomy at The Time of Gender Affirming Hysterectomy	M.Y. Morrill
11:55 am	Questions & Answers	All Faculty
12:15 pm	Adjourn	

FIBR-609

Evolving Technologies and Their Role in Patient Care

9:45 am – 12:15 pm

Room: Red Rock 6/7

Didactic | Fee: Included in Registration



Co-Chairs: Michael L. Moore, Kristen J. Pepin

Faculty: Daniel S. Dias, James A. Greenberg, David J. Levine, Rooma Sinha

Submitted by the Fibroid Special Interest Group

This course will review care options for women with fibroids. The course will compare more established forms of fibroid care to newer FDA approved technologies. The course is a combination of didactic and visual learning modes. A panel of faculty will discuss multiple case scenarios and what procedures might apply along with anticipated outcomes..

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Cite the histopathology, incidence, natural course and ideal treatment of leiomyosarcoma; 2) Follow the current standard of care for pre-operatively diagnosing leiomyosarcoma and recognize potential future directions for improved detection; 3) Identify the incidence of leiomyosarcoma at the time of surgery for presumed benign leiomyoma (fibroids); 4) Utilize currently available techniques and technologies to minimize the risks of incidentally encountered leiomyosarcoma during surgery for benign leiomyomas; and 5) Explore the potential future technologies to improve care with this clinical challenge.

COURSE OUTLINE

9:45 am	Welcome, Introduction and Course Overview	
9:50 am	The FDA has Approved New Medications: What Do They Do? What is the Data on Already Available Options?	M.L. Moore/ K.J. Pepin
10:15 am	Myomectomy: Choosing Route of Myomectomy	R. Sinha
10:40 am	Morcellation Techniques: Scalpel, Bag, No Bag?	D.S. Dias
11:05 am	How Does Leiomyosarcoma Fit into the Management of Fibroids?	J.A. Greenberg
11:30 am	RFA for the Treatment of Fibroids	D.J. Levine
11:55 am	Questions & Answers	All Faculty
12:15 pm	Adjourn	

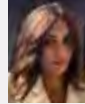
ENDO-610

New Insights in the Management of Deep Endometriosis

9:45 am – 12:15 pm

Room: Red Rock 8/9

Didactic | Fee: Included in Registration



Co-Chairs: Alessandra DiGiovanni, Andrea Vidali

Faculty: Helizabeth Salomao Ayroza-Ribeiro, Juan Gilabert Estelles, Priyanka Jha

Member Submitted

This course provides evidence-based techniques for evaluating adenomyosis and endometriosis with pelvic sonography and MRI, emphasizing the crucial role of strict cooperation between imaging operators and surgeons.

Leading experts from around the world will share their strategies for recognizing and confidently diagnosing these conditions.

Pictures and video both from ultrasound/MRI and surgical procedures will guide participants through technical and practical aspects, emphasizing that findings and features important for guiding preoperative planning and counseling of patients affected by the disease.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Improve diagnostic confidence evaluating for endometriosis on abdomino/pelvic sonography and MRI; 2) Discuss the utility of pelvic sonography for the diagnosis of deep endometriosis with emphasis on the most common locations, and when and why ask for MRI where needed; and Discuss which information from US/MRI imaging are relevant to set proper surgical strategy.

COURSE OUTLINE

9:45 am	Overview and Welcome	A. DiGiovanni/ A. Vidali
9:50 am	Anterior and Posterior Compartment: US Evaluation	A. DiGiovanni
10:15 am	Role of MRI in Deep Endometriosis: Advantages Over Expert Performed Ultrasound	P. Jha
10:40 am	Towards a Common Language: Latest Proposals for Classification and Staging	H.S. Ayroza-Ribeiro
11:05 am	How Imaging can Affect Surgical Strategy: Pelvic Dye Treatment	J. Gilabert Estelles
11:30 am	How Imaging can Affect Surgical Strategy: Extra Pelvic Dye Treatment	A. Vidali
11:55 am	Questions & Answers	All Faculty
12:15 pm	Adjourn	

INNO-611

Innovations Course

9:45 am – 12:15 pm

Room: Homestead 3/4

Didactic | Fee: Included in Registration



Co-Chairs: Peter L. Rosenblatt, Timothy B. McKinney

Faculty: Patrick J. Culligan, Pedro F. Escobar Rodriguez

The last several decades have seen an explosion of new technologies in the field of gynecology and gynecologic surgery. Though some innovations have been transformative, such as advanced operative laparoscopy and robotic surgery, others have not been as successful, including transvaginal mesh for prolapse and tubal implants for female sterilization. Innovative ideas often come from physicians who experience challenges and frustrations in their work, though most do not know what to do with their ideas, whether the ideas are actual devices or novel techniques. In this course, we will discuss how physicians should document and protect their ideas, and ways to move their ideas forward. We will also discuss trends for future innovation in gynecology, including novel robotic platforms, virtual and augmented reality, 3D printing applications, and smartphone applications.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Evaluate the merits and potential drawbacks of novel devices and procedures in gynecologic surgery; 2) Predict how emerging technologies will influence future innovations in the field of gynecology and pelvic surgery; and 3) Explain the process of filing for provisional and non-provisional patents to protect one's intellectual property.

COURSE OUTLINE

9:45 am	Welcome, Introduction and Course Overview	
9:50 am	What should I do with my ideas?	P.L. Rosenblatt
10:15 am	The Journey from Surgeon to Entrepreneur	T.B. McKinney
10:40 am	How Minimally-invasive Can MIS Get? The Case for Single-port Surgery	P.F. Escobar Rodriguez
11:05 am	Will We All Be Robotic Surgeons in the Future?	P.J. Culligan
11:30 am	Future trends in Gynecologic Innovation	P.L. Rosenblatt
11:55 am	Questions & Answers	All Faculty
12:15 pm	Adjourn	

URO-612

Urogyn for the MIGS Surgeon: Apical Support

9:45 am – 12:15 pm

Room: Willow Lake 5

Didactic | Fee: Included in Registration



Co-Chairs: Tanaz Ferzandi, Luis Gustavo Oliveira Brito

Faculty: Soorena Fatehchehr, Jamal Mourad, Amy Park, Lauren Siff

Member Submitted

This course is designed for the MIGS surgeon to address the vaginal apex, the cornerstone of vaginal support. It is important to understand the functionality of correcting the apex as this correlates with other defects, such as the anterior compartment. We will provide data regarding the best approach for surgical restoration of the anatomy in a long-term fashion, and the recent growing of uterine preservation.

Learning Objectives: *At the conclusion of this course, the participants will be able to:*

1) Diagnose POP (Baden Walker vs. POPQ) and consider different possible surgical approaches; 2) Describe different approaches for sacrocolpopexy, uterosacral ligament suspension and 3) Follow the indications for hysteropexy and the recent data comparing with standard, vaginal hysterectomy for apical prolapse.

COURSE OUTLINE

9:45 am	Welcome, Introduction and Course Overview	T. Ferzandi/ L.G. Oliveira Brito
9:50 am	Laparoscopically Tackling the Apex: Native Tissue Approach: Uterosacral Colpopexy, Richardson Stitch	T. Ferzandi
10:10 am	Laparoscopically Tackling the Apex: Mesh Augmented: Sacral Colpopexy	J. Mourad
10:30 am	The OG Method: Vaginal Surgery: Uterosacral and Sacrospinous Ligament Fixation	L.G. Oliveira Brito
10:50 am	Hysteropexy: Vaginal Uterine Conservation Technique	L. Siff
11:10 am	Laparoscopic Uterine Conservation	S. Fatehchehr
11:30 am	vNOTES: Combining the Best of MIS	A. Park
11:50 am	Questions and Answers	All Faculty
12:15 pm	Adjourn	

REPRO-613

How to Think Like a Reproductive Surgeon: Preservation, Restoration, and Reconstruction

2:30 pm – 5:00 pm

Room: Red Rock 2/3

Didactic | Fee: Included in Registration



Co-Chairs: Charles E. Miller, Rebecca L. Flyckt

Faculty: Francisco Carmona, Antonio R. Gargiulo, Keith B. Isaacson

Member Submitted

As minimally invasive gynecologic surgeons, we pride ourselves on our ability to fully excise disease and, for the most part, we take a radical approach to pelvic pathology. Unfortunately, this bold approach may at times have a negative effect on current or future ability to attain pregnancy; for example, increased risk of adhesion formation or decreased ovarian function. In no patient is this more impactful than the patient interested in fertility preservation or fertility enhancing surgery. Although many of the core surgical procedures and pathologies are similar across disciplines, this course is intended to illustrate what makes a reproductive procedure distinct. Speakers will convey surgical pearls as well as outline current trends in performing high-level, complex reproductive procedures on patients who hold current or future fertility as a priority.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Apply techniques for uterine conservation and enhancement when treating common uterine pathology such as fibroids, isthmocele, and adenomyosis; 2) Recognize how and when best to manage endometriosis and ovarian pathology while reducing the impact on ovarian reserve and optimizing reproductive success; and 3) Explore what's new in treating early pregnancy failures hysteroscopically and performing abdominal cerclage.

COURSE OUTLINE

2:30 pm	Welcome, Introduction and Course Overview	R.L. Flyckt / C.E. Miller
2:35 pm	How to Make a House a Home: Minimally Invasive Management Of Fibroids and Adenomyosis in The Fertility Patient	A.R. Gargiulo
2:55 pm	Hysteroscopic Management of Fibroids and Adenomyosis While Taking Care of The Endometrium	K.B. Isaacson
3:15 pm	When, How, and Why Removal of DIE Helps Achieve Pregnancy	F. Carmona
3:35 pm	Handle Me with Care: How Best to Preserve Ovarian Function During Reproductive Surgeries	R.L. Flyckt
3:55 pm	Become an Expert in Robotic and Hysteroscopic Isthmocele Repair	C.E. Miller
4:15 pm	Reproductive Surgery on the Cutting Edge: Hysteroscopic Treatment of Early Pregnancy Failure	R.L. Flyckt
4:25 pm	Reproductive Surgery on the Cutting Edge: Cerclage Techniques	C.E. Miller
4:35 pm	Tips, Tricks and Pearls – Faculty Discussion	All Faculty
4:45 pm	Questions and Answers	All Faculty
5:00 pm	Adjourn	

VAG-614

Vaginal Access Surgery Including vNOTES TVH

2:30 pm – 5:00 pm

Room: Willow Lake 3/4

Didactic | Fee: Included in Registration



Co-Chairs: Rosanne M. Kho, Jan F. Baekelandt

Faculty: Veronica Lerner, Kevin J.E. Stepp, Johnny Yi

Expand your MIS skillset with vaginal access! Learn from a dynamic faculty of experts in vaginal, single-incision laparoscopy and vNOTES routes. This practical and video-based course will highlight anatomy to avoid complications. Basic and advanced principles learned from single-incision laparoscopy and techniques to optimize success in vNOTES will be emphasized. With mastery of vNOTES techniques, discover the many applications of vNOTES beyond hysterectomy!

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Demonstrate techniques to enter the anterior and posterior cul de sacs during vaginal surgery; 2) Apply principles and techniques to optimize efficiency and safety in single-port laparoscopy and vNOTES; 3) Recognize anatomic landmarks and employ techniques to avoid complications during vaginal surgery, and 4) Articulate various gynecologic indications for vNOTES.

COURSE OUTLINE

2:30 pm	Welcome, Introduction and Course Overview	R.M. Kho
2:35 pm	Simplifying Vaginal Access to the Anterior and Posterior Cul de Sacs	R.M. Kho
2:50 pm	Principles and Lessons Learned from Single-Incision Laparoscopy: How Far Can We Go with Just One Port?	K.J.E. Stepp
3:25 pm	Getting Started: Tips and Tricks for Your First 10 vNOTES Cases	V. Lerner
3:50 pm	Avoid Complications with Anatomy, Anatomy, Anatomy in Vaginal Surgery	J. Yi
4:15 pm	vNOTES Applications Beyond Hysterectomy	J.F. Baekelandt
4:40 pm	Questions and Answers	All Faculty
5:00 pm	Adjourn	

MAST-615

Master's Course in Exposure Retraction and Deep Dissection

2:30 pm – 5:00 pm

Room: Red Rock 6/7

Didactic | Fee: Included in Registration



Co-Chairs: Xiaoming Guan, Kristin E. Patzkowsky

Faculty: John B. Gebhart, Ted T.M. Lee, Shailesh P. Puntambekar

Pursuing the perfect surgical skills with optimum surgical routes and platforms for handling challenging surgeries is a fantasy of MIGS surgeons. As we all have known, no see (exposure) with no cut and sailing in uncharted waters (anatomy) with no jumps (deep dissection) are common difficulties faced by surgeons. Exposure retraction and deep dissection are the cornerstone of tackling the situations for the surgeons in the OR, nonetheless with preparation even the worst scenarios ahead can be conquered easing the surgeons' stress.

Expert physicians will provide an in-depth discussion on exposure retraction and deep dissection techniques through multitudes of numerous complex cases, including laparoscopic and robotic platform, as well as multiple, single site and transvaginal routes. The course will also cover novel transvaginal NOTES surgeries for complex cases such as deep infiltrated endometriosis and sacrocolpopexy as alternative route for most minimally invasive route. This course will illustrate the anatomical dissection of uterine transplant, which will bring you multiple views of surgical concepts of exposure and deep dissection through one of most complex surgical types. This course will have a practical focus on teaching tips and tricks for you to apply to your operating room and incorporate them into your pre-operative assessment to ensure your success in handling even the most complex cases.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Demonstrate techniques to enter the anterior and posterior cul de sacs during vaginal surgery; 2) Apply principles and techniques to optimize efficiency and safety in single-port laparoscopy and vNOTES; 3) Recognize anatomic landmarks and employ techniques to avoid complications during vaginal surgery, and 4) Articulate various gynecologic indications for vNOTES.

COURSE OUTLINE

2:30 pm	Welcome, Introduction and Course Overview	X. Guan/ K.E. Patzkowsky
2:35 pm	Laparoscopic Management of Ovarian Remnant	T.T.M. Lee
3:00 pm	Tackling Oncological and Other Complex Cancer Surgeries	S.P. Puntambekar
3:25 pm	Challenging Robotic Surgeries	K.E. Patzkowsky
3:50 pm	Transvaginal Complex Gynecologic Surgery	J.B. Gebhart
4:15 pm	Single-site and vNOTES routes for Challenging Surgeries	X. Guan
4:40 pm	Questions and Answers	All Faculty
5:00 pm	Adjourn	

COMP-616

To Do or Not to Do...Making Safe Decisions in the Operating Room - Preventing, Avoiding and Managing Complications in MIGS

2:30 pm – 5:00 pm

Room: Red Rock 8/9

Didactic | Fee: Included in Registration



Co-Chairs: Giovanni Roviglione, Linda C. Yang

Faculty: Samar Nahas, Audrey T. Tsunoda, Megan N. Wasson

This course embraces all possible complications that may occur during minimally invasive surgery performed for easy or complex benign conditions such as deeply infiltrating endometriosis or oncological diseases. The different topics will begin with fundamental anatomical concepts and proceed to standard techniques and tips and tricks to perform a safe and successful surgery in easy or difficult cases. Moreover, surgical videos will be highlighted in each presentation to demonstrate complications and troubleshooting to help the learner better understand how to prevent and manage them independently or as part of a multidisciplinary team. Every presentation will end with a strategic algorithm which the learner will be able to easily recall and apply to future scenarios when faced with different types of complications.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Implement a stepwise algorithm to promptly recognize and address surgical complications; 2) Select the proper surgical procedures to manage vascular, bowel or genitourinary tract injuries; and 3) Apply surgical tips and tricks to reduce complications during difficult minimally invasive gynecologic surgeries.

COURSE OUTLINE

2:30 pm	Welcome, Introductions and Course Overview	G. Roviglione/ L.C. Yang
2:35 pm	Knowing Your Enemy: Surgical Strategies to Minimize and Treat Complications in Laparoscopic Entry in Simple and Complex Cases	L.C. Yang
3:00 pm	To Resect or Not to Resect? How to Safely Manage Bowel Adhesions and Build Confidence When Tackling Deeply Infiltrating Endometriosis of the Bowel	M.N. Wasson
3:25 pm	The Water Under the Bridge Falls Safely into the Lake*: How to Prevent and Manage Ureteral or Bladder Lesions in MIS	G. Roviglione
3:50 pm	Are You Really Ready? All You Need to Know to Rapidly Manage Vascular Complications in MIS: The Final Algorithm	S. Nahas
4:15 pm	How to Prevent Visceral, Vascular or Neural Complications In MIS: A Roadmap	A.T. Tsunoda
4:40 pm	Questions & Answers	All Faculty
5:00 pm	Adjourn	

ANAT-617

Advanced Anatomy – Accessing the Pelvic Sidewall

2:30 pm – 5:00 pm

Room: Willow Lake 3/4

Didactic | Fee: Included in Registration



Co-Chairs: Sven Becker, Giovanni Scambia

Faculty: Jon I. Einarsson, Jessica Opoku-Anane

Member Submitted

Outside of an oncological oriented training course, the systematic access to the pelvic sidewall is rarely taught, even though it is often needed. This course will present basic tips and tricks related to everyday surgical challenges and will also touch on possible complications. Addressing a non-oncologic audience, different aspects of dissecting and visualizing the different anatomical structures, spaces, and compartments of the pelvic sidewall will be discussed. While the session is lecture based, the objective is to have the audience involved in a highly interactive format allowing for the exchange of relevant information for the practicing physician.

Learning Objectives: At the conclusion of this course, the participant will be able to: 1) Utilize key steps in how to open the pelvic sidewall; 2) Employ the essential tricks on how to find the ureter; 3) Locate the origin of the uterine artery; 4) Navigate the pelvic sidewall appropriately; and 5) Avoid pelvic sidewall complications.

COURSE OUTLINE

2:30 pm	Welcome, Introductions, and Course Overview	G. Scambia/ S. Becker
2:35 pm	When Do You Need the Ability to Access the Pelvic Sidewall? Critical Situation in Benign Gynecologic Surgery	J. Opoku-Anane
3:00 pm	The Pelvic Sidewall and the Endometriosis-Surgeon	J.I. Einarsson
3:25 pm	The Pelvic Sidewall the Oncologic Surgeon	G. Scambia
3:50 pm	Things NEVER to Do, Things ALWAYS to Do in the Pelvic Sidewall	S. Becker
4:15 pm	Into Remote Corners and Extreme Situations	Panel Discussion
4:40 pm	Questions and Answers	All Faculty
5:00 pm	Adjourn	

PAGS-618

Optimizing Surgical Management in Today's Pediatric Environment

2:30 pm – 5:00 pm

Room: Willow Lake 5

Didactic | Fee: Included in Registration



Co-Chairs: Nichole A. Tyson, Krista Childress

Faculty: Kate McCracken, Lissa Yu

Submitted by the Pediatric/Adolescent Gynecologic SIG

This course provides a comprehensive review on surgical management of common diagnoses that present in the pediatric and adolescent gynecology patient population. The course will address: The diagnosis and management of endometriosis in the adolescent and young adult; The medical and surgical management in the patient who presents with obstructive Mullerian and vaginal anomalies; Optimizing the evaluation and surgical management of young patients with adnexal masses; and An overview on the up-to-date gynecologic care for adolescents and adults with history of complex anorectal and urogenital surgeries.

Learning Objectives: At the conclusion of this course, the participant will be able to: 1) Complete an appropriate surgical evaluation and management for adolescent patients with endometriosis; 2) Employ medical and surgical approaches in the care of the patient with an obstructive Mullerian/Vaginal anomaly; 3) Apply surgical strategies to address the large adnexal mass with a focus on ovarian sparing minimally invasive surgery; and 4) Provide up to date gynecologic care for adolescents and adults with history of complex anorectal and urogenital surgeries.

COURSE OUTLINE

2:30 pm	Welcome, Introductions, and Course Overview	N.A. Tyson/ K. Childress
2:35 pm	Endometriosis in Teen and Young Adult	L. Yu
3:05 pm	Management of Adnexal Masses in the Adolescent and Young Adult	N.A. Tyson
3:35 pm	Managing the Patient with Obstructive Mullerian Anomalies	K. Childress
4:05 pm	An Overview of Gynecologic Care for Adolescents and Young Adults with Anorectal Malformations	K. McCracken
4:35 pm	Questions and Answers	All Faculty
5:00 pm	Adjourn	

NERV-619

Nerve Sparing Part II

1:30 pm – 5:00 pm

Room: Colorado D

Cadaveric Lab | Fee: Included in Registration



Co-Chairs: Nucleio Lemos, Christian Campian

Faculty: Paulo Ayroza-Ribeiro, Adrian C. Balica, Marcello Ceccaroni, Jose D. Eugenio-Colon, Gustavo L. Fernandes, William Kondo, Vadim V. Morozov, Resad P. Pasic, Benoit Rabishong, Mariana C. Rossetti, Thiers Raymundo Soares, Augusta Morgado Ribeiro, Jonathon M. Solnik

This hands-on lab will be limited to 2 participants per cadaver and will also include one experienced faculty per station to guide you through the dissections listed below. Each participant will have the opportunity to operate, assist, and observe in a rotational format to optimize their learning and suturing techniques.

Learning Objectives: *At the conclusion of this course, the participant will be able to:* 1) Describe the anatomy of the intrapelvic nerve bundles; 2) Utilize the process necessary to develop the retro-rectal space; 3) Describe and identify the bladder nerves, ureter and uterine vessels; and 4) Recognize complications and how to avoid them.

Dissection Steps:

- Develop the Retro-rectal Space
- Identify the Presacral Fascia and the Right Hypogastric Nerve
- Identify the Left Hypogastric Nerve
- Develop the Presacral Space
- Dissect the Inferior Hypogastric Plexus
- Dissect the Ureter
- Develop the 4th Space of Yabuki
- Dissect the Vesical Branch of the Inferior Hypogastric Plexus
- Study the Correlation Between the Bladder Nerves, the Ureter and the Uterine Vessels
- Adjourn

HSC-620

Advanced Hysteroscopy – Update Your Uterine Repair Skills

1:30 pm – 5:00 pm

Room: Colorado C

Didactic/Simulation Lab | Fee: \$375



Co-Chairs: Miriam M.F. Hanstede, Sergio Haimovich

Faculty: Ted L. Anderson, Linda D. Bradley, Amy L. Garcia, Alka Kumar, Nash S. Moawad, Stephanie N. Morris, Christina A. Salazar

Update your uterine repair skills - Hysteroscopic resection, hysteroscopic septum resection, Hysteroscopic adhesiolysis for intrauterine adhesions, hysteroscopic timing and removal of RPOC and Hysteroscopic T shaped uterus - what to do and what not to do.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Evaluate the merits and potential drawbacks of novel devices and procedures in gynecologic surgery; 2) Predict how emerging technologies will influence future innovations in the field of gynecology and pelvic surgery; and 3) Explain the process of filing for provisional and non-provisional patents to protect one's intellectual property.

Practice Gap: Hysteroscopic reproductive surgery is a very important part of MIGS and should not be the "little brother of laparoscopy." It is a very life changing field of surgery in which we have too few experts. To perform these hysteroscopic procedures good surgical training is mandatory.

COURSE OUTLINE

1:30 pm Welcome, Introduction and Course Overview

1:50 pm **Hysteroscopy Ergonomics**

- Perform diagnostic hysteroscopy with reusable and disposable systems.
- Perform operative hysteroscopy with reusable and disposable systems using operative instruments for directed biopsy, polypectomy and septum transection.

Hysteroscopic Tissue Removal Systems (HTR)

- Perform operative hysteroscopy for polyps, fibroids, retained products of conception, and visual D&C using HTR systems.

Resectoscopy

- Utilize principles of electrosurgery and perform myoma resection, polypectomy or endometrial ablation/ resection using resectoscopes and various electrodes.

Endometrial Ablation

- Perform simulated endometrial ablation with proper use of endometrial ablation devices.

Fluid Management

- Incorporate appropriate fluid management systems into operative hysteroscopy using different hysteroscopic devices.

Virtual Reality Simulation

- Explore virtual reality surgical skills development by performing tissue removal, resectoscopy and diagnostic hysteroscopy in a simulated computer environment.

5:00 pm Adjourn

SURG-621 Surgical Coaching

9:00 am – 4:00 pm
Room: Willow Lake 1/2
Didactic | Fee: \$1,000



Co-Chairs: Caprice Greenberg

Faculty: Janet Dombrowski, Cara Robinson King

Join the Academy for Surgical Coaching for a Surgical Coach Training Session. You will learn the mindset and skillset necessary to be a great surgical coach. Hands-on practice and interactive conversation guide the training. The Surgical Coach Training Course consists of a 6-hour, full-group session that involves a didactic component, interactive reflection, and small group breakouts to apply coaching skills.

All participants will become certified coaches through the Academy for Surgical Coaching and will be eligible for future coach-coachee pairing if interested.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Describe the current performance gap that can be met by Surgical Coaching; 2) Identify core principles of the coaching mindset; 3) Identify the key skills of surgical coaching; 4) List three aspects that are critical for adult experiential learning and 5) Apply skills of Surgical Coaching within practice coaching sessions.

COURSE OUTLINE

9:00 am	Fundamentals of Surgical Coaching
10:30 am	Break
10:45 am	Operationalizing Surgical Coaching
12:30 pm	Lunch
1:45 pm	Practice Coaching Sessions
2:45 pm	Lunch
3:00 pm	Effective Coaching and Wrap up
4:00 pm	Adjourn

ROBO-622 Robotics

1:30 pm – 5:00 pm

Room: Colorado B

Didactic/Simulation Lab | Fee: Included in Registration



Co-Chairs: Arleen Song, Peter Lim

Faculty: Arnie Advincula, Jose "Tony" Carugno, Daniel Gomez, Steven McCarus, Erinn Myers, Carlos Sandoval-Herrera, Erica Stockwell

Description: This course will provide a comprehensive overview of robotic surgical platforms both established and emerging and their role in minimally invasive gynecologic surgery. Participants will also have an opportunity for a hands-on experience with each robotic platform all will perform prepared exercises.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Describe the different robotic surgical platforms currently available in gynecologic surgery; and 2) Identify unique advantages and challenges of each robotic platform.

COURSE OUTLINE

1:30 pm	Introduction	Arleen Song, Peter Lim
1:35 pm	Intuitive Surgical	Arnie Advincula, Erinn Meyers
1:45 pm	Momentis Surgical	Tony Carugno, Daniel Gomez, Erica Stockwell
1:55 pm	Asensus Surgical	Steven McCarus, Carlos Sandoval-Herrera
2:05 pm	Hands-on demonstrations with all robotic platforms.	
5:00 pm	Adjourn	



AGES/AAGL AFFILIATED SOCIETY
FOCUS MEETING 2023

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GENERAL SESSION I

Thursday, December 1, 2022

5:15 pm – 6:15 pm • Colorado A

OPENING CEREMONY

Welcome 5:15 pm - 5:20 pm

Mauricio S. Abrão, MD, PhD, President

Introduction of Scientific Program Committee 5:20 pm - 5:25 pm

Andrew Sokol, Scientific Program Chair

Introduction of Dignitaries 5:25 pm - 5:30 pm

Linda D. Bradley, Medical Director

Recognition of Outgoing Editors-in-Chief 5:30 pm - 5:35 pm

Mauricio S. Abrão, MD, PhD

Honorary Chair Address 5:35 pm - 5:45 pm

Charles E. Miller, Honorary Chair

Presidential Address 5:45 pm - 6:05 pm

Mauricio S. Abrão, MD, PhD

Welcome Reception in the Aurora Exhibit 6:30 pm - 8:30 pm



FRANKLIN D. LOFFER PRESIDENTIAL ADDRESS

Planting Seeds to Grow Globally

Mauricio S. Abrão, MD, PhD

Mauricio S. Abrão, MD, PhD the first non-North American President ever elected to the AAGL, has provided a critical global perspective of the mission of the AAGL, elevating all voices in our membership, during his time in office. He also led the development of an application that classifies endometriosis stages advancing the surgical management of endometriosis causing a profound impact on the management of endometriosis.

Dr. Abrão has dedicated his life's work to developing studies and treatment options for endometriosis related pelvic pain and infertility through a multidisciplinary approach. He is a pioneer in the techniques that have become the global standard for women's health, such as eliminating invasive diagnosis by creating markers to identify endometriosis; improving diagnosis accuracy by designing new methods for mapping endometriosis and adenomyosis through imaging; successfully treating cases through continuous advances in minimally invasive surgery; enhancing treatment precision based on a perspective that includes therapeutic algorithms; and creating an application that classifies endometriosis stages.

In 1989, Dr. Abrão earned his degree in gynecology and obstetrics at the University of São Paulo, Brazil. There he defended in 1996 his PhD thesis on the evaluation of CA-125 II, C-reactive proteins, serum amyloid A, and anticardiolipin antibodies in the diagnosis of pelvic endometriosis.

He founded and is the Head of the Endometriosis Division since 1991 and since 2009, Dr. Abrão served as Associate Professor at the Department of Ob/Gyn of Sao Paulo University.

Three decades ago, Dr. Abrão founded the Clínica da Medicina da Mulher (CMM) working with a multidisciplinary staff renowned both in Brazil and internationally for their groundbreaking treatment dedicated to a global view of women's health. When CMM merged with Hospital Beneficência Portuguesa de São Paulo in 2017, Dr. Abrão became the Division Head of Gynecology and the Program Director of the AAGL FMIGS 3-year International Fellowship Program.

He is the founder, and former President (2008-2013) of the Brazilian Society of Endometriosis and Minimally Invasive Gynaecology and in 2014, he served as the President of the 12th World Congress on Endometriosis.

Between 2016 and 2021, Dr. Abrão has served as the Editor-in-Chief of the Journal of Endometriosis and Pelvic Pain Disorders (JEPPD). During his career, he has published over 180 scientific papers and 7 medical books on gynecologic and endometriosis cases. One of these papers, *Endometriosis Lesions that Compromise the Rectum Deeper than the Inner Muscularis Layer have more than 40% of the Circumference of the Rectum Affected by the Disease*, was presented at the AAGL meeting in Washington, DC, in November 2007. This paper earned Dr. Abrão the AAGL's Carlo Romani Award for the Best Paper on Endometriosis and has since been cited in numerous publications.

In 2012, Dr. Abrão idealized and was the coordinator of the Surgical Expedition from the Medical Students of São Paulo University, an annual activity that brings to remote sites of Brazil Minimally Invasive Surgery treatment pushing these remote sites of Brazil to become a Hub of Minimally Invasive surgery.

Dr. Abrão's passion and dedication to promoting innovation in gynecology and endometriosis education and research is an inspiration for us all.



HONORARY ADDRESS

A Perfect Recipe for Success - Surgery, Music, Lifelong Learning & The AAGL

Charles E. Miller, MD

Dr. Charles E. Miller has received the esteemed distinction of 2022 Honorary Chair for his exemplary service to the AAGL and outstanding contributions to Minimally Invasive Gynecologic Surgery (MIGS) and Reproductive Medicine.

Since 1995, Dr. Miller has continuously served the AAGL in numerous roles including AAGL President (2007-2008), FMIGS Board of Directors (2013), JMIG Editorial Board (2012-present), and twice Chair of the AAGL Reproductive Surgery/Endometriosis Special Interest Group, the last time being in 2020, along with serving on a myriad of committees. Dr. Miller is currently Program Director of the FMIGS Program at Advocate Lutheran General Hospital (since 2010), and Vice-President/President-elect of the Foundation of the AAGL. In addition, Dr. Miller's ongoing dedication to developing young MIG surgeons earned him the AAGL's honorable John F. Steege Mentorship Award in 2018.

Dr. Miller graduated from the six-year Honor's Program in Medical Education at Northwestern

University. He then completed his residency in Obstetrics and Gynecology at the University of Texas Southwestern Medical School, Parkland Memorial Hospital.

His passion for research, MIGS and reproductive health is evident in his many publications, presentations, and representation in the field of gynecologic surgery. He is currently Professor of Obstetrics and Gynecology at the Department of Clinical Sciences at Rosalind Franklin University of Medicine and Science in North Chicago, Illinois, Director of MIGS at Advocate Lutheran General Hospital in Park Ridge, IL, Consulting Reproductive Endocrinologist for Advocate Lutheran General Hospital's Hematopoietic Progenitor Cell Transplantation (HPCT) Program, faculty of the Reproductive Medicine and Immunology Fellowship program at Rosalind Franklin University of Medicine and Science and performs multiple laparoscopic, robotic-assisted and hysteroscopic surgical procedures, as well as IVF, in his private practice in metropolitan Chicago. He loves to

teach, mentor, perform clinical research, and spend time in the operating room. He feels great joy when a patient's pregnancy test is positive, whether it be post-surgery or through IVF.

For most of his career, Dr. Miller has been an innovator, whether it be techniques in laparoscopic myomectomy, isthmocele repair, publishing a recommendation regarding the treatment of the ovarian endometrioma for patients interested in future fertility, or most recently, performing hysteroscopic evacuation of first trimester miscarriage. He is also a lifelong learner interested in new procedures/techniques and instrumentation that can positively impact patients. He believes that his drive to push the envelope would not have been possible without the education he has obtained through the AAGL.

Dr. Miller has a wonderful wife, Laura, three children, Ben, Abbye and Alec, a son-in-law, Andrew, daughter-in-law, Lisa, and six grandchildren. He enjoys playing the drums and loves music, especially rock and roll and jazz.

AURORA EXHIBIT HALL EVENTS

INDUSTRY SPONSORED PRODUCT THEATERS

8:00 am – 8:45 am

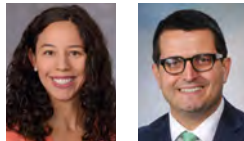
Product Theater I • Hologic Inc.
Product Theater II • Myovant Sciences Inc./Pfizer, Inc.

1:00 pm – 1:45 pm

Product Theater I • Theotor
Product Theater II • Gynesonics, Inc.

SUTURING CAFÉ

Preregistration Required: *Sessions are Full*



Co-Chairs: Nichole Mahnert, Chris DeStephano

8:00 am – 9:30 am

Lead: Karen Wang

Faculty: Andrea G. Aguirre, Whitney Ross, Matthew Siedhoff, Mallory A. Stuparich

1:00 pm – 2:30 pm

Lead: Sangeeta Senapati

Faculty: Jay Hyun Kim, Janelle K. Moulder, Jovana Tavcar, Jessica Traylor

This course provides a comprehensive review of the fundamentals of laparoscopic suturing, from basic to advanced, in a dry lab setting. Didactics contain a variety of surgical videos highlighting practical tips and tricks for needle introduction and setting, tissue re-approximation and suture management, intra-corporeal and extra-corporeal knot tying techniques. The goal is to allow ample time for hands-on practice under direct supervision of the faculty who are not only expert MIG Surgeons, but more importantly, experienced instructors with ability to guide learners in a dry lab setting. The faculty will provide immediate feedback and one-on-one instructions based on your individual needs. More advanced techniques such as a baseball stitch, sliding knot and cinch knot will be demonstrated and practiced during the hands-on session for the more advanced learners. Regardless of your skill level, this course will improve your confidence and competence in your next OR.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Detail different options for needle introduction, setting and removal; 2) Demonstrate efficient techniques for tissue re-approximation and suture management; and 3) Perform intra-corporeal and extra-corporeal knot in an efficient and reproducible manner.

- Welcome, Introduction and Course Overview
- Introduction and Removal of Needle Setting, Needle Tissue re-approximation Techniques
- Intra-Corporeal Knot – Common Mistakes, Extra-Corporeal Knot Tips and Tricks, Running Suture
- Questions & Answers
- Dry Lab Hands-on
- Wrap-up
- Questions and Answers
- Adjourn

CME GENERAL SESSION II

Friday, December 2, 2022

9:45 am – 11:15 am • Colorado A



Shattering the Glass Ceiling for Surgeons

9:45 am – 10:00 am



Fariba Mohtashami, MD

Dr. Fariba Mohtashami is a Clinical Associate Professor, Head, Division of General Obstetrics & Gynecology at the University of British Columbia, Vancouver, Canada. She is the Residency Program Site Director at St. Paul's Hospital, where she takes the lead in elevating GYN surgery through education and leadership. She advocates for closing the gap between GYN and other surgeons in the way they are trained, treated and remunerated. In this context, she has served as a member of the AAGL Diversity and Inclusion Committee. Dr. Fariba Mohtashami is passionate about surgical education with an emphasis on the fundamentals of surgery such as anatomy, dissection, electrosurgery and suturing. She believes surgery is an art and, therefore, individual. Like artists need tools, surgeons need strong foundations to tailor procedures. She is a regular Chair and Faculty in Canadian and international surgical workshops and has received several teaching awards recognizing her mentorship skills.

Dr. Fariba Mohtashami is an International Medical Graduate and has completed two ObGyn residencies, separated by 5 years of practice as a consultant, followed by a fellowship in MIGS.

In this talk, she uses some of her personal experiences to reflect on the way we train GYN surgeons and its consequences on our profession. By sharing her story, Dr. Mohtashami focuses on the societal stereotypes, the gender pay gap, and the status-levelling burden in the male-dominated world of surgery. She then talks about ideas to elevate the status of Gynecology among other surgical specialties.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Recognize the similar patterns of unconscious biases against female surgeons; 2) Develop skills to tackle the status-levelling burden in the OR; and 3) Create strategies to shape ideas into actions and close the existing gap.



Foundation

Signature Awards

The Foundation of the AAGL takes great pride in presenting Signature Awards to the "best of the best" selected by our independent abstract and award committees. Award winners were chosen for scoring the highest in a competition or for submitting the highest scoring abstract or video. Award Winners will present their top scoring abstract or video following the Awards Ceremony in General Session II and throughout the Global Congress.

Jay M. Cooper Award

Best Paper on MIGS by a Fellow

Supported by the Jay M. Cooper Endowment

Presented in: Oral Session 9, Basic Science and Laparoscopy, December 3, 2:00 PM, Room: Red Rock 6/7

Surgical Skills Curriculum Satisfaction Among Current Obstetrics and Gynecology Residents

Jessica G. Putman, MD

Angela J. Hollis, MD, Todd P. Boren, MD, Arthur Michael Dizon, MD, MSCR
University of Tennessee College of Medicine
Chattanooga, Chattanooga, Tennessee

Abstract Grading Committee*

Jerome J. Hoffman Award

Best Paper Submitted by a Resident or Fellow

Supported by the Jerome J. Hoffman Endowment

Presented in: Video Session 7, Laparoscopy and Reproductive Surgery, December 2, 2:00 PM, Room: Willow Lake 5

Multidisciplinary Approach to the Surgical Management of Interstitial Ectopic Pregnancy

Megan Orlando, MD

Stacey Ehrenberg, MD, Katherine Singh, MD
Rosanne M. Kho, MD
Cleveland Clinic, Cleveland, Ohio

Abstract Grading Committee*

Daniel F. Kott Award

Best Paper on New Instrumentation or Technology on MIGS

Supported by the Daniel F. Kott Fund

Presented in: Oral Session 5, New Instrumentation, December 2, 3:15 PM, Red Rock 8/9

Artificial Intelligence Vision Based Analysis and Key Steps Identification Feasibility Study in Laparoscopic Hysterectomies

Isha Levin, MD, MBA

Tamir Wolf, MD, PhD, Dotan Asselmann, Omri Bar, Danielle Ben Ayoun, MD, Alenka Antolin, MD, Avi Cohen, MD
Lis Maternity Hospital, Tel Aviv Sourasky Medical Center, Tel Aviv, Israel

Abstract Grading Committee*

Jordan M. Phillips Award

Best Research Paper on MIGS

Supported by the Jordan M. Phillips Endowment

Presented in: Oral Session 3, Laparoscopy Research, December 2, 2:00 PM, Room: Red Rock 6/7

Vaginal Cuff Dehiscence Rates by Mode of Hysterectomy: An Update

Melanie Polin, MD

Ryan M. Boone, MD, Francesca Lim, MS
Chin Hur, MD, MPH, Arnold P. Advincula, MD
Benjamin L. May, MS, Hye-Chun Hur, MD, MPH
Columbia University Irving Medical Center, New York Presbyterian Hospital, New York, New York

Abstract Grading Committee*

Robotic Assisted Surgery Award

Best Robotic Surgery Abstract or Video on MIGS

Presented in: Video Session 1, Robotics, December 2, 11:30 AM, Room: Red Rock 2/3

Robotic-Assisted Resection of Pelvic Arteriovenous Malformation Utilising Intraoperative Video Angiography with Indocyanine Green

Cherynne Johansson, MD, FRACGP, FRANZCOG

Felix Chan, MD, MRCOG, FRANZCOG, CGO
Liverpool Hospital, Liverpool New South Wales, Australia

Abstract Grading Committee*

Golden Hysteroscope Award

Best Paper on Hysteroscopy

Supported by an Educational Grant from Olympus America, Inc.

Presented in: Oral Session 11, Laparoscopy and Hysteroscopy, December 3, 3:15 PM, Room: Red Rock 8/9

Intrauterine Anesthesia in See and Treat Hysteroscopy – a Double Blind, Placebo Controlled Randomized Trial

Oshri Barel, MD, MHA, FRANZCOG

Maria Maslenko, MD, Merav Sharvit, MD, Natan Stolovitch, MD, Shiri Weinberg, MD, Moty Pansky, Prof. MD
Assuta Ashdod University Hospital, Ashdod, Israel

Abstract & Award Grading Committees*

Golden Laparoscope Award

Best Surgical Video on MIGS

Supported by an Educational Grant from Olympus America, Inc.

Presented in: Video Session 1, Robotics, December 2, 11:30 AM, Room: Red Rock 2/3

Repair of Isthmocele Following Embolization of Uterine Arteriovenous Malformation

Alisha Othieno, MD

David Huang, MD, Evan Lehrman, MD
Traci E. Ito, MD
UC San Francisco, San Francisco, CA

Abstract & Award Grading Committees*

IRCAD Award

Excellence in Education

Supported by an Educational Grant from Karl Storz Endoscopy America

Presented in: Video Session 5, Pelvic Pain, December 2, 2:00 PM, Room: Red Rock 2/3

Chronic Pelvic Pain: A Guide to Perform a Focused Physical Exam

Christana Ajewole, MD

Dorothy Bestoyang, DO, Chensi Ouyang, MD
Jessica Brooke Feranec, MD, Georgine Lamvu, MD, MPH, Jorge F. Carrillo, MD
Orlando VA Healthcare System, Orlando, Florida

Abstract Grading Committee*

Robert B. Hunt Award for Best Paper

Best Paper Published in JMIG (September 2021-August 2022)

Supported by the Robert B. Hunt Endowment

A Double-blinded, Randomized, Placebo-controlled Trial of Antibiotic Prophylaxis in Elective Non-hysterectomy Laparoscopic Surgery for Benign Gynecologic Conditions: A Pilot Study

Claire Yinn Lim, MD

Anais Alonso, MD, Yi Ying Koh, Stephanie Roydhouse, MD, Lalla McCormack, MBChB, Rebecca Deans, PhD, Erin Nesbitt-Hawes, PhD
Archana Rao, MD, Louise Causer, PhD, Jason A. Abbott, B Med (Hons), FRANZCOG, FRCOG, PhD
University of New South Wales, Sydney, New South Wales, Australia
Royal Brisbane and Women's Hospital, Brisbane, Queensland, Australia
Kirby Institute, Sydney, New South Wales, Australia

Robert B. Hunt Award for Best Video

Best Video Published in JMIG (September 2021-August 2022)

Robotic Management of Diaphragmatic Endometriosis in 10 Steps

Horace Roman, MD, PhD

Thomas Dennis, MD, Georgios Grigoriadis, MD, Benjamin Merlot, MD
Franco-European Multidisciplinary Endometriosis Institute, Clinique Tivoli-Ducos, Bordeaux, France

Award Committee*

Robert B. Hunt Awards Presented at:

JMIG Editors Awards Luncheon, Friday, December 2, 2022, 12:45 PM in the Juniper Room (by invitation only)

Charles H. Koh World Suturing Championship

Qualified applicants will complete a variety of challenging suturing skills in a competition to determine excellence and innovation in laparoscopic suturing and to claim the title of 2022 World Suturing Champion.

Presented as a live competition, December 1, 6:45 PM - 8:30 PM in the Exhibit Hall

Winner: To be Determined!

Award Panel of Judges:

Grace Liu, MD, Jeannie Kim, MD, Nash Moawad, MD, Mireille Truong, MD, Charles Koh, MD

SurgeryU Academy Award for Best Picture

Award given for best novel, MIGS educational video presented by a trainee.

Winner: To Be Announced

Award Panel of Judges:

Suketu Mansuria, MD, Isabel C. Green, MD, Joseph L. Hudgens, MD, Kenneth H. Kim, MD, FACS, Nash S. Moawad, MD, MS, Matthew T. Siedhoff, MD, Megan Wasson, DO

* The Abstract Grading Committee is listed at the front of the program.

Awards

10:00 am – 11:15 am

Noteworthy Awards

The Foundation of the AAGL Noteworthy Awards recognize individuals who have made significant contributions to empowering progress in minimally invasive gynecologic surgery through their innovation, leadership, and mentorship.

The winners of these prestigious awards were chosen by nomination and voted on by an independent award committee.

Harrith M. Hasson, MD **Physician from an Emerging Country Award**

The Harrith M. Hasson, MD, Emerging Countries Scholarship Award recognizes a deserving physician from a developing economy who is empowering progress in minimally invasive gynecology within their community.

Maria Alejandra Brito Pérez, MD
Hospital Universitario de Caracas in Caracas, Venezuela

Award Committee:
Chair: Shannon Cohn, JD
Co-Chair: Brian M. Cohen, MB ChB, MD
Diana Atashroo, MD, Andrew I. Brill, MD, Megan Cesta, MD

Barbara S. Levy, MD, FACOG, FACS **AchieveHER Award**

The Barbara S. Levy MD, FACOG, FACS AchieveHER Award recognizes women leaders in minimally invasive gynecologic surgery who have paved the way for female MIGS surgeons; served in leadership roles; and have been an influential mentor for five or more years.

Jin Hee “Jeannie” Kim, MD
Columbia University Irving Medical Center, New York, New York

Award Committee:
Chair: John Sunycz, MD
Co-Chair: Barbara S. Levy, MD
Bimal M. John, MD, Shanti Mohling, MD, Wendy Winer, RN

Franklin D. Loffer, MD, FACOG **Exceptional Resident Award**

The Franklin D. Loffer, MD, FACOG, Exceptional Resident Award recognizes a resident who demonstrates leadership qualities and an exceptional commitment to empowering progress in minimally invasive gynecologic surgery.

Emily A. Sendukas, MD
University of Texas Southwestern Medical Center, Dallas, Texas

Award Committee:
Chair: Charles Miller, MD
Co-Chair: Lori Warren, MD
John L. Marlow, MD, Nisse V. Clark, MD, Richard Farnum, MD, Iwona M. Gabriel, MD, PhD

Javier Magrina, MD **Excellence in Robotics Award NEW**

The Javier Magrina Excellence in Robotics Award was established in honor of Dr. Javier Magrina, a pioneer of robotic surgical techniques for benign and oncological diseases, and in recognition of his extensive robotic publications, videos, postgraduate courses, observership programs, and live surgeries performed worldwide.

Javier Magrina, MD
Mayo Clinic, Phoenix, Arizona

Award Committee:
Chair: Thomas L. Lyons, MD, MS
John A. Sunycz, MD, Charles E. Miller, MD, Vadim V. Morozov, MD, Shanti I. Mohling, MD, Shannon Cohn, JD, Gaby Moawad, MD, Iris Kerin Orbuch, MD, Lori L. Warren, MD, Wendy K. Winer, RN

Medstar NCAPS **Excellence in Diversity and Inclusion in MIGS Award NEW**

The MedStar NCAPS Excellence in Diversity and Inclusion in MIGS Award recognizes a top scoring manuscript presenting research on diversity and inclusion.

Rebecca J. Schneyer, MD
Cedars Sinai Hospital, Los Angeles, California

Award Committee:
Chair: Vadim Morozov, MD
Co-Chair: Gaby Moawad, MD
Shanti Mohling, MD

John F. Steege, MD **Mentorship Award**

The John F. Steege, MD Mentorship Award recognizes outstanding AAGL members who have provided at least ten years of support and mentorship to future generations of minimally invasive gynecologic surgeons.

Resad Paya Pasic, MD, PhD
University of Louisville, Louisville, Kentucky

Award Committee:
Chair: Javier Magrina, MD
Michael Hibner, MD, Jamal Mourad, MD, Iris Kerin Orbuch, MD

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The Foundation of the AAGL empowers progress in minimally invasive gynecologic surgery by providing opportunities for education, mentorship, global outreach, and advocacy, with the ultimate goal of improving women's health worldwide.

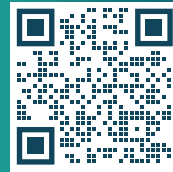
The Mission & Vision of the Foundation of the AAGL (FAAGL)

The Foundation of the AAGL provides opportunities through its Four core Pillars to pave the way and support generations of surgeons in the field of MIGS.

“ These Four Pillars are essential for the success of our specialty in MIGS. ”

— Vadim Morozov, MD
2022 FAAGL Secretary-Treasurer

Support the Foundation through a general contribution or select exactly where in the Four Pillars you would like your gift to go.



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Surgical Tutorial 1 Asherman's Syndrome

11:30 am – 12:35 pm
Room: COLORADO A



Chair: Jude Ehiabhi Okohue
Faculty: Miriam M.F. Hanstede,
James K. Robinsn, III
Member Submitted

Asherman's syndrome is a rare condition in resource-rich countries. Unfortunately, it is common in developing countries, especially those with restrictive abortion laws. This makes hysteroscopic adhesiolysis a common procedure in such environments. For this reason, practitioners have, over time, developed tricks and tips for performing Asherman's syndrome surgery in an outpatient clinic setting. While showcasing numerous videos of some of the most challenging cases, the various tips and tricks for ensuring a successful outcome will be shown and discussed. The course will commence with didactic lectures on Asherman's Syndrome delivered by renowned experts. This will be followed by videos explaining the basics of hysteroscopic adhesiolysis for beginners and the advanced hysteroscopist. Finally, a step-by-step approach to entry into the difficult uterine cavity, real cases where complications occurred, and tips on how to prevent such complications will be presented.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Cite the etiopathogenesis of, and diagnose, Asherman's syndrome; 2) Utilize tricks learned on how to navigate a difficult cavity in cases of severe Asherman's syndrome; and 3) Recognize the incidence of uterine perforation and employ steps in preventing a perforation.

COURSE OUTLINE

- 11:30 am Welcome, Introductions and Course Overview
J.E. Okohue
- 11:35 am Etiopathogenesis of Asherman's Syndrome
J.K. Robinson
- 11:45 am Asherman's Syndrome: Current Perspectives on Diagnosis
M.M.F. Hanstede
- 12:00 pm Navigating a Difficult Cavity: Video Demonstrations on Tricks and Tips, Including Complications
J.E. Okohue
- 12:20 pm Questions & Answers
- 12:30 pm Adjourn

Panel 1 Maximizing Surgical Coaching

11:30am – 12:35pm
Room: Red Rock 4/5



Chair: Cara King
Faculty: Angela Chaudhari,
Chris DeStephano, Veronica Lerner
SPC Assigned

Dedicated and deliberate surgical education is critical for propagating our field and training the next generation of surgeons. A unique set of skills and knowledge are needed to take surgical education initiatives to the next level for our medical students, residents, and fellows. Critical aspects of surgical education include how to give and receive feedback, competency assessment, understanding learning styles, and integration of simulation. Surgical coaching also presents an actionable approach to enhance surgical education and promote continuous professional development throughout one's career. This panel will provide insight on the philosophy of surgical coaching and how to provide high impact feedback. It will provide evidence for components of internal motivation through application of a growth mindset and discuss available resources for simulation as a teaching method through assessment and technology integration.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Illustrate techniques to provide high impact feedback and competency assessment 2) Recognize the impact of surgical coaching in continuous professional development and trainee education to elevate technical and non-technical skills 3) Discover resources to enhance surgical simulation and deliberate practice through integration of technology.

This panel will include minimal formal presentations or PowerPoint slides to enhance a robust discussion amongst the panelists and audience surrounding feedback, competency assessment, surgical coaching, learning styles, and surgical simulation.

Oral Session 1 Fibroids

11:30 am – 12:35 pm
Room: Red Rock 6/7

Moderators: Jose Garza Leal and Elizabeth Stewart

COURSE OUTLINE

- 11:30 am Welcome, Introduction and Course Overview
- 11:33 am Relugolix Combination Therapy Improves Uterine Fibroid Symptoms Independent of Fibroid Location over 24 Weeks
E.A. Stewart, A. Al-Hendy, R. Venturella, A.S. Lukes, S. Proehl, X. Zhao
- 11:40 am Racial Disparities in Abdominal and Laparoscopic Myomectomies: A NSQIP Study
C. Moore, J. Kazma, D.A. Acosta Diaz, C.Z. Wu, C.Q. Marfori, S. Wang
- 11:47 am Healthcare Cost and Utilization of Uterus-Sparing Interventions in Women with Uterine Fibroids: A Retrospective Claims Analysis
S.L. Lim, C.J. Sobolewski, S. Pohlman, A. Rane, S. Currian
- 11:54 am Association between Surgical Fibroid Removal and Blood Pressure: A Retrospective Case-Control and Prospective Cohort Study
G.W. Kischen, L. Yanek, M.A. Borahay
- 12:01pm Perioperative Venous Thromboembolism in Patients Undergoing Hysterectomy for Fibroids: A Nationwide Sample
M.S. Orlando, A. Sinha, M. Yao, E. Shippey, R.M.M. Kho
- 12:08 pm Attitudes and Beliefs about Hysterectomy in Patients with Uterine Fibroids
S. Duyar, S.C. Tsai, M.P. Milad, A. Chaudhari
- 12:15 pm Pre-Surgical Transcervical Tru Cut Biopsy of Myometrial Lesions with Abnormal Ultrasonographic Appearance
A. Richtarova, M. Mara, K. Hlinecka, Z. Lisa, B. Boudova
- 12:22 pm Questions & Answers
All Faculty
- 12:30 pm Adjourn

Oral Session 2 Endometriosis

11:30 am – 12:35 pm
Room: Willow Lake 3/4

Moderators: Ceana H. Nezhat and Mariana da Cunha Vieira

COURSE OUTLINE

- | | |
|----------|---|
| 11:30 am | Welcome, Introduction and Course Overview |
| 11:33 am | Diagnosis of Endometriosis: The Surgeon's Eye Compared to Histopathology
<i>D.C. McKee, M.N. Wasson</i> |
| 11:40 am | Issa Score: An Innovative Tool for Predicting Lateral Parametrial Involvement at Preoperative Ultrasound in Deep Endometriosis
<i>F. Barra, C. Zorzi, M. Albanese, X. Deromemaj, A.K. Stepniewska, P. De Mitri, G. Roviglione, R. Clarizia, M. Ceccaroni</i> |
| 11:47 am | Ai-Derived Threshold Score of Intraabdominal Myoelectrical Activity Predicts Presence and Stage of Endometriosis with 100% Accuracy
<i>M. Noar</i> |
| 11:54 am | Can AAGL 2021 Endometriosis Classification be Adopted at Preoperative Ultrasound for Reliably Predicting Surgical Complexity?
<i>C. Zorzi, F. Barra, M. Albanese, M. Tosi, C. Dal Pozzolo, A.K. Stepniewska, P. De Mitri, G. Roviglione, R. Clarizia, M. Ceccaroni</i> |
| 12:01 pm | Comparison of the Recently Published "AAGL Endometriosis Classification" with Other Staging Systems to Predict Surgical Complexity
<i>J.N. Mak, J.V.C. Zanardi, C. Uzuner, M. Espada, M. Leonardi, S. Reid, A. Eathorne, R.M. Rocha, G. Condous</i> |
| 12:08 pm | Minimizing Repeat Surgeries for Endometrioma: Impact of Surgical Intervention by Minimally Invasive Gynecologic Surgeons
<i>S.E. Allen, S. Su, I. Wegner, T.T.M. Lee, T. Kenkre, N.M. Donnellan</i> |
| 12:15 pm | Location Matters: Likelihood of Superficial Endometriosis by Anatomic Site
<i>D.C. McKee, M.N. Wasson</i> |
| 12:22 pm | The Role of Endometriosis-Specific MRI Protocol in the Diagnosis and Management of Patients with Endometriosis-Related Pain
<i>M.A. Luna-Russo, M. Markwei, C. Fan, M. Yao, R.M. Kho</i> |
| 12:29 pm | Questions & Answers |
| 12:30 pm | Adjourn |

Video Session 1 Robotics

11:30am – 12:35pm
Room: Red Rock 2/3

Moderators: Errin Myers and Fatih Sendag

COURSE OUTLINE

- | | |
|----------|--|
| 11:30 am | Welcome, Introduction and Course Overview |
| 11:33 am | Repair of Isthmocele Following Embolization of Uterine Arteriovenous Malformation
<i>A.A. Othieno, D. Huang, E. Lehrman, T.E. Ito</i> |
| 11:39 am | Robotic-Assisted Resection of Pelvic Arteriovenous Malformation Utilising Intraoperative Video Angiography with Indocyanine Green
<i>C. Johansson, F. Chan</i> |
| 11:45 am | Robotic Fallopian Tubo-Uterine Implantation
<i>C.R. Fox, V. Galaviz, P.L. Sticco, K.T. Downing</i> |
| 11:51 am | Robotic Management of Large and Ruptured Interstitial Ectopic Pregnancy
<i>H. Hanna, A.E. Connor, A. Hanna, S.M. Biscette</i> |
| 11:57 am | Robotic-Assisted Laparoscopic Excision of Deep Infiltrating Endometriosis with Concomitant Left Ureteroneocystostomy
<i>G.K. Lewis, B. Baird, R. Pak, C.C. DeStephano</i> |
| 12:03 pm | Tips and Tricks for Nerve-Sparing Modified Radical Hysterectomy for Deep Endometriosis with Firefly Technology
<i>K. Kanno, S. Yanai, M. Sawada, S. Sakate, M. Andou</i> |
| 12:09 pm | Robotic-Assisted Laparoscopic Hysterectomy for Management of Cesarean Scar Ectopic Concerning for a Molar Pregnancy
<i>A. Cain, M.T. Breen, M. Holtz, M.Y. Williams-Brown</i> |
| 12:15 pm | Dissection Techniques for Dense Adhesions between Uterus, Bladder, and Anterior Abdominal Wall
<i>S. Jiggetts, N. Dad, A. Schulman, D.M. Herzog</i> |
| 12:21 pm | Questions & Answers
<i>All Faculty</i> |
| 12:30 pm | Adjourn |

Video Session 2 Hysteroscopy

11:30am – 12:35pm
Room: Red Rock 8/9

Moderators: Jorge Dotto and Kelly Roy

COURSE OUTLINE

- | | |
|----------|--|
| 11:30 am | Welcome, Introduction and Course Overview |
| 11:33 am | Two Methods for Adenomyotic Cyst Excision
<i>A.C. Fitzgerald, H.M. French, K.B. Isaacson</i> |
| 11:39 am | Hysteroscopic Resection of Retained Placenta Accreta
<i>E.G. Cnihfield, A. Patel</i> |
| 11:45 am | Hysteroscopic Myomectomy - The Struggle Is Real and How to Overcome It
<i>J. Tavcar, T. Gallant</i> |
| 11:51 am | Tips and Tricks for the Difficult Hysteroscopy
<i>O. Fajardo, K.F. Chaves, T.L. Anderson, L. Harvey</i> |
| 11:57 am | Hysteroscopic Resection of Early Pregnancy Loss
<i>S. Young</i> |
| 12:03 pm | Hysteroscopic Removal of Residual Cesarean Scar Pregnancy
<i>N. Smorgick</i> |
| 12:09 pm | Technical Challenges in Hysteroscopic Myomectomy with Prolapsing Cervical Fibroid
<i>M. Clark, B. Thigpen, S. Sunkara, T. Koythong, J. Nassif</i> |
| 12:15 pm | Ultrasound Guided Hysteroscopy in the Complex Uterine Isthmus
<i>A. Dave</i> |
| 12:21 pm | Questions & Answers
<i>All Faculty</i> |
| 12:30 pm | Adjourn |

Video Session 3

Adenomyosis & Reproductive Surgery

11:30 am – 12:35 pm

Room: Willow Lake 5

Moderator: Krisztina I. Bajzak and Roy Mashlach

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Transcervical Ultrasound-Guided Targeted Radiofrequency Ablation of Localized Adenomyosis <i>K.E. Goldrath, R. Parvataneni, M.G. Munro, S.K. Mehta</i>
11:39 am	Fertility Sparing Surgical Management of Adenomyosis <i>A. Quevedo, R.P. Pasic, M.A. Cesta</i>
11:45 am	"H-Incision" Technique for Robotic-Assisted Laparoscopic Adenomyosis Resection <i>C. Lowe, C.A. Swain, J.E. Ocampo</i>
11:51 am	Laparoscopic Management of a Juvenile Cystic Adenomyoma <i>C.M. Gnade, C.M. Pickett, A.E. Oshinowo</i>
11:57 am	Utilizing Firefly Technology for Uterine Isthmocele Recognition and Excision: An Approach to Robotic Assisted Cesarean Scar Defect Repair <i>M. Evans, P.M. Weix, C. Herrin, O. Bukulmez</i>
12:03 pm	Robotic Assisted Tubal Reanastomosis <i>E.L. Stockwell</i>
12:09 pm	Blue to Pink in 10 Minutes: Fallopian tube and Paratubal Cyst Torsion. Case Presentation and Demonstration of Dissection Principles <i>H. Fornalik, N. Fornalik</i>
12:15 pm	Bridging the Gap: Robotic Approach to Isthmocele Dehiscence <i>D.A. Aase, L. Kendall Rauchfuss, C.L. Langstraat, C. Rose, Z. Khan</i>
12:21 pm	Questions & Answers <i>All Faculty</i>
12:30 pm	Adjourn

Video Session 4

Laparoscopy / Tissue Containment / Vaginal Surgery

11:30 am – 12:35 pm

Room: Homestead 3/4

Moderator: Nicholas Hazen and Deirdre Lum

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Total Laparoscopic Cervical Enclage in 16 Weeks Pregnant Uterine Didelphis Uterus <i>H. Pandit, A. Ansari</i>
11:39 am	Transvaginal Specimen Extraction: Novel Techniques and Strategies for Success <i>R.J. Schneyer, M.D. Truong, K.N. Wright, M.T. Siedhoff</i>
11:45 am	Minimizing Risks of Spillage during Laparoscopic Cystectomy <i>E. Trieu, A. Zelivianskaia, J.K. Robinson III</i>
11:51 am	Novel Cystocele Repair at the Time of Laparoscopic Colpopexy <i>C. Jayne</i>
11:57 am	Robotic Assisted Laparoscopic Excision of a Placenta Percreta <i>S.J. Seaman, N.S. Parra, A.P. Advincula</i>
12:03 pm	Minimally Invasive Surgical Approach to Tubo-Ovarian Abscess in Obstructed Hemivagina and Ipsilateral Renal Anomaly (OHVIRA) Syndrome <i>S. Vo, C. Johansson</i>
12:09 pm	Laparoscopic Vaginoplasty by Peritoneal Pull through Technique <i>S.S. Dayama, D.D.C. Shirsath</i>
12:15 pm	Laparoscopic Redo Vaginoplasty with Uterine Buds: A Case Report <i>H. Pandit, R. Nandhini</i>
12:21 pm	Questions & Answers <i>All Faculty</i>
12:30 pm	Adjourn
12:30-2:30 pm	Lunch in the Exhibit Hall 1:00 pm – 1:45 Product Theatre (2)

Current Session

Managing Complications from Abortion

11:30 am – 12:35 pm

Room: Willow Lake 1 & 2

Chair: Rebecca Cohen

SESSION OUTLINE

This session will focus on consequences of abortion bans, and managing complications of abortions from a minimally invasive gynecological surgeon standpoint. We will discuss abortions occurring within the standard medical system and those occurring without.

We will also allow for questions at the end of the session and welcome you to join us.

JMIG

The Journal of Minimally Invasive Gynecology

*Thank you
Dr. Tommaso Falcone!*



For the last 10 years as the JMIG Editor-in-Chief, you have carried the tremendous responsibility of overseeing the editorial direction and quality of JMIG.

Under your care, the JMIG Impact factor increased from 1.5 to 4.3, attesting to the high quality of work published by our Journal and your leadership.

Thank you for your service, Tommaso, we are all grateful to you.

Join us as we honor Dr. Falcone during the Opening Ceremony on Thursday, December 1st, from 5:15 pm – 6:15 pm in Colorado A, Level 3.

JMIG EDITOR'S AWARDS LUNCHEON

by invitation

12:45 pm – 1:45 pm

Co-Chairs: Jason A. Abbott and Gary N. Frishman



The Journal of Minimally Invasive Gynecology hosts this luncheon to recognize the contributions of our outstanding editors, ad hoc reviewers, and social media scholars.

We celebrate and give thanks to the dedicated experts, without whom continued success would be impossible.

1:00 pm Editor's Report – Jason A. Abbott and Gary N. Frishman

1:10 pm Robert B. Hunt Award for the Best Paper Published in JMIG

Dr. Hunt was one of the preeminent leaders of the AAGL: President of the AAGL 1991 – 1992 and founding Editor-in-Chief of The Journal of the AAGL—now The Journal of Minimally Invasive Gynecology—from its inception in 1993 until he retired in 2002. He was instrumental in establishing this well-respected journal which informs and educates physicians all over the world.

**Robert B. Hunt Award
Best Paper Published in JMIG
(September 2021-August 2022)**
*Supported by the Robert B. Hunt
Endowment*

A Double-blinded, Randomized, Placebo-controlled Trial of Antibiotic Prophylaxis in Elective Non-hysterectomy Laparoscopic Surgery for Benign Gynecologic Conditions: A Pilot Study

Claire Yinn Lim, MD
Anaïs Alonso
Yi Ying Koh
Stephanie Roydhouse, MD
Lalla McCormack, MBChB
Rebecca Deans, PhD
Erin Nesbitt-Hawes, PhD
Archana Rao, MD
Louise Causer, PhD
Jason A. Abbott, PhD

1:15 pm Robert B. Hunt Award
Best Video Published in JMIG
(September 2021-August 2022)
"Robotic Management of Diaphragmatic Endometriosis in 10 Steps"
Horace Roman, MD, PhD
Thomas Dennis, MD
Georgios Grigoriadis, MD
Benjamin Merlot, MD
Corresponding Author: Horace Roman, MD, PhD

1:20 pm Top Editorial Board Members
Michael L. Sprague, MD
Lindsay Clark Donat, MD
Eugene Skalny, MD
Jay M Berman, MD
Peter L. Rosenblatt, MD
Eugenio Solima, MD

1:25 pm Top Ad Hoc Reviewers
Steven Radtke, MD
Martin Healey, MD, MBBS
Elliot Greenberg, MD
Ogechukwu Uwanaka, MD
Adrian Balica, MD
Simone Garzon, MD
Joseph Chen, MD
Olivia H. Chang, MD, MPH
Nicole Michelle Donnellan, MD
Megan Orlando, MD
Nichole Tyson, MD
Alexis Gadson, MD
Julian A Gingold, MD, PhD
Ricardo dos Reis, PhD
Cynthia Arvizo, MD
Siddhi Mathur, MSc, MD
Christine Foley, MD
Victoria Snegovskikh, MD

1:35 pm Top Social Media Scholars
Peter Movilla, MD
Jacob K. Lauer, MD
Sadikah Behbehani, MD
Cristóbal Rodríguez Valero, MD

1:45 pm Adjourn

Surgical Tutorial 2 Tubal Disease

2:00 pm – 3:05 pm
Room: Colorado A



Co-Chairs: Magdy P. Milad
Faculty: Bala Bhagavath, Conor Harrity
Member Submitted

Globally, tubal disease remains one of the most common causes of infertility. While assisted reproductive technologies are becoming more widely available, in many parts of the world, due to resources or financial constraints, patients may only have access to surgical interventions. Unfortunately, the majority of recently trained subspecialists have little exposure to tubal assessment and the tenets of tubal surgery. This course will review the assessment of tubal anatomy, patency and internal architecture, and explore the surgical approaches to tubal factor infertility from salpingectomy to tubal anastomosis. Additionally, we will review fallopscopy as an emerging method of evaluating the luminal milieu.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Interpret sono and radiologic HSG images of tubal occlusion; 2) Discuss many of the important tenets of tubal surgery; and 3) Hypothesize the role of fallopscopy in assessing for disease.

COURSE OUTLINE

2:00 pm	Welcome, Introductions and Course Overview <i>M.P. Milad</i>
2:05 pm	The Assessment of Tubal Patency and Health, Fallopscopy <i>C. Harrity</i>
2:20 pm	Surgical Interventions Including Salpingectomy (before IVF), Tubal Cannulation, Distal Tuboplasty <i>B. Bhagavath</i>
2:35 pm	Tubal Anastomosis <i>M.P. Milad</i>
2:50 pm	Questions & Answers <i>All Faculty</i>
4:15 pm	Adjourn

Oral Session 3 Laparoscopy

2:00 pm – 3:05 pm
Room: Red Rock 6/7

Moderator: Thomas Lang and Jessica Shields

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	The Effect of Patient Positioning on Ureteral Efflux during Intraoperative Cystoscopy: A Randomized Controlled Trial <i>S. Galhotra, C. Hu, K.W. Zeng, T. Norton, N.D. Mahnert, R.B. Smith, J. Mourad</i>
2:10 pm	Transition to Universal Same Day Discharge (SDD) in Times of Corona Virus Disease-19 (COVID): A Success Story <i>T. Cameo, J. Jenkins, C. Okuagu, R. Huang, S.W. Biest, W.T. Ross, E. Bardawil</i>
2:17 pm	Increase in Complications Following Vaginal Hysterectomy Compared to Laparoscopic Hysterectomy Using the ACS-NSQIP 2016 – 2019 Database <i>A. Cain, M. Alvarez, C.A. Salazar</i>
2:24 pm	Institutional Trends in Hysterectomy Volume and Route of Surgery <i>R.M. Boone, M. Polin, F. Lim, C. Hur, B.L. May, C. Arora, J.H. Kim, H.C. Hur</i>
2:31 pm	Vaginal Cuff Dehiscence Rates by Mode of Hysterectomy: An Update <i>M. Polin, R.M. Boone, F. Lim, C. Hur, A.P. Advincula, B.L. May, H.C. Hur</i>
2:38 pm	Vasopressin Injection Purse-String Ectopic Resection (VIPER) Technique for Laparoscopic Management of Cornual Ectopic <i>C.J. Min, E. Bardawil, W.T. Ross, S.W. Biest, K. de Souza</i>
2:45 pm	Surgical Outcomes for Laparoscopic Hysterectomy Based on Surgeon Gender <i>C. Indart, S. Galhotra, C. Hu, K.W. Zeng, G.L. Smith, N.D. Mahnert, R.B. Smith</i>
2:52 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Oral Session 4 Research

2:00 pm – 3:05 pm
Room: Red Rock 8/9

Moderator: Roberto Clarizia and Amanda Yunker

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	The Role of Resilience Among Women with Chronic Pelvic Pain <i>A.M. Foss, S.R. Till, S. As-Sanie</i>
2:10 pm	The Impact of Surgeon Volume on Hysterectomy Risk: A Concentration Curve Analysis <i>A. Bootes, D.D. Namaky, C.C. Crisp</i>
2:17 pm	Incidence and Risk Factors for 30 Day Reoperation in Benign Hysterectomy <i>N. Cohen, Y. Sifri, G. Stoffels, A. Romanova, C.J. Ascher-Walsh</i>
2:24 pm	Venous Thromboembolism after Abdominal and Minimally Invasive Large Specimen Hysterectomy <i>M.G. Leon, N.K. Pham, R.J. Jalloul</i>
2:31 pm	Trends in the Gender of First and Senior Authors of Original Research Publications in the Journal of Minimally Invasive Gynecology <i>K.F. Chaves, V. Fox, O. Fajardo, L. Harvey</i>
2:38 pm	Racial and Ethnic Disparities in Utilization of Minimally-Invasive Hysterectomy <i>C.T. Manning, A. Gompers, M.R. Hacker, E.M. Jorgensen</i>
2:45 pm	A Comparison Study Quantifying Environmental Impact of All Surgical Modalities of Hysterectomies <i>S. Ramani</i>
2:52 pm	Differences in Route of Benign Hysterectomy in Black Patients for Abnormal Uterine Bleeding with Exclusion of Fibroid Diagnosis <i>C.H. Gould, L. Palacios-Helgeson, B. Osmundsen</i>
2:59 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Panel 2

Vaginal Laser / Photobiomodulation Therapy: Examining the Evidence and Controversy

2:00 pm – 3:05 pm
Room: Red Rock 4/5



Chair: Georgine Lamvu

Faculty: Charles W. Butrick, Eric R. Sokol

This learning activity will review the evidence and controversy surrounding the use of vaginal lasers / photobiomodulation for vaginal atrophy, pain, incontinence, and prolapse. It will provide an overview of how lasers work, as well as indications and contraindications for use. The lecture will focus on evidence-based recommendations and factors that clinicians need to consider before integrating laser technology into their clinical practice.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Describe the biomechanics and biological effects of laser therapy; 2) Recognize the gynecologic conditions that may benefit from vaginal laser therapy; and 3) List the main benefits and risks of vaginal laser therapy.

COURSE OUTLINE

2:00 pm	Welcome, Introductions and Course Overview G. Lamvu
2:05 pm	What is a Laser and What are the Biological Effects of Laser Therapy? G. Lamvu
2:20 pm	Non-Ablative Laser Therapy for Pelvic Pain C.W. Butrick
2:35 pm	Should Vaginal Lasers be Used for Genitourinary Symptoms of Menopause? E.R. Sokol
2:50 pm	Questions & Answers Chair and Faculty
3:05 pm	Adjourn

Video Session 5 Pelvic Pain

2:00 pm – 3:05 pm
Room: Willow Lake 2/3

Moderator: Andrew I. Brill and Subramanian Krishnakumar

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Laparoscopic Excision of Retroperitoneal Adnexal Cyst T. Muir, L. Chao
2:09 pm	Chronic Pelvic Pain: A Guide to Perform a Focused Physical Exam C.O. Ajewole, D. Bestoyong, C. Ouyang, J.B. Feranec, G. Lamvu, J.F. Carrillo
2:15 pm	The Bare Bones of Endometrial Osseous Metaplasia J. Tigdi, H.N. Alsalem, G.M. Zeni, M. Leonardi
2:21 pm	Hysteroscopic Botox: A Novel Pelvic Pain Treatment E.C. Trautner, M.E. Shockley, E.B. Chahine, M.P. Lachiewicz
2:27 pm	Pelvic Nerve Blocks J. Gao, M.P. Lachiewicz
2:33 pm	Minimally Invasive Surgical Management of Tubo-Ovarian Abscess M. O'Leary, E.H. Russell, L.M. Belland
2:39 pm	Laparoscopic Resection of Rudimentary Horn for Treatment of Pelvic Pain C. Sham, N. Cohen, J. Huntly, K. Zakashansky
2:45 pm	Don't Forget to Look Up: Operating in the Upper Abdomen J. Cruz, M.A. Stuparich, S. Behbehani, S. Nahas
2:51 pm	Questions & Answers All Faculty
3:05 pm	Adjourn

Video Session 6 Fibroids

2:00 pm – 3:05 pm
Room: Willow Lake 3/4

Moderator: Leila V. Adamyan and Victor Gornel

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Low-Cost High-Fidelity Minimally Invasive Myomectomy Model for Laparoscopic and Robotic-Assisted Simulation J.S. Kim, A. Jan, V. Wright
2:09 pm	Posterior Colpotomy: A Less Invasive Option for Tissue Extraction A.C. Carstens Yalom, T. Baker, A. Nimz, C.I. Ramirez
2:15 pm	Laparoscopic Management of an Atypical Presentation of a Large Degenerated Fibroid during Pregnancy H.N. Alsalem, J. Tigdi, G.M. Zeni, M. Leonardi, N.A. Leyland
2:21 pm	Approach to Total Laparoscopic Hysterectomy Involving Large Cervical Myomas E.G. Cihfield, E. Demirel, A.M. Grant, J.A. Sternchos
2:27 pm	Retropubic Leiomyoma Causing Urinary Retention: A Case Report P. Bellelis, G. Guglielmetti, V.S. Bruscatin, Sr., F.V. Nastri, C. Fernandes, M. Corinti Son
2:33 pm	Navigating Cervical Fibroids during Laparoscopic Hysterectomy: Essential Tips and Tricks E. Lin, L. Chao
2:39 pm	Laparoscopic Single Site Techniques in Management of Fibroid Pain during Pregnancy D. Zi, Z. Guan, Y. Ding, Y. Hanlin, B. Thigpen, X. Guan
2:45 pm	Round Ligament Injection with Vasopressin during Myomectomy O. Casas Diaz, E. Trieu, R. Thompson, V.V. Morozov
2:51 pm	Questions & Answers All Faculty
3:05 pm	Adjourn

Video Session 7 Laparoscopy / Tissue Containment / Vaginal Surgery

2:00 pm – 3:05 pm
Room: Willow Lake 5

Moderator: Maria A. Habana and Abdala Karamé

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Multidisciplinary Approach to the Surgical Management of Interstitial Ectopic Pregnancy  <i>M.S. Orlando, S. Ehrenberg, K. Singh, R.M. Kho</i>
2:09 pm	Laparoscopic Resection of Cesarean Scar Pregnancy at 11 Weeks Gestational Age <i>B.M. Lamparello, J. Wilson-Leedy, A.M. Schachter, A. Disilvestro, E.M. Marici</i>
2:15 pm	Interstitial Pregnancy: Surgical Management by Laparoscopic Cornuostomy <i>T.L. Onyewuenyi, R. Falik</i>
2:21 pm	Laparoscopic Salpingostomy for Tubal Ectopic Pregnancy <i>A.M. Schachter, J. Wilson-Leedy</i>
2:27 pm	Surgical Management of Second Trimester Cesarean Scar Ectopic Pregnancy with Laparoscopic Wedge Resection <i>L.R. Chatroux, J. Singer, K. Hansen, J. Wong, A.M. Ecker</i>
2:33 pm	Laparoscopic Wedge Resection of a Cesarean Scar Ectopic Pregnancy at Nine Weeks Gestation <i>M. Workman, S.N. Smith, D.D. Rattray</i>
2:39 pm	Laparoscopic Abdominal Cerclage after Prior Radical Trachelectomy <i>R.K. Shibata, C.H. Waters, M.L. Nimaroff</i>
2:45 pm	Tips and Tricks for Laparoscopic Cesarean Scar Ectopic Twin Pregnancy Excision with Hemostatic Clips and Vascular Clamps <i>M. Hui, A.I. Montealegre</i>
2:51 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Video Session 8 Endometriosis / Basic Science / Pelvic Pain

2:00 pm – 3:05 pm
Room: Homestead 3/4

Moderator: Juan Salgado and Assia A. Stepanian

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Systematic Approach to Using Magnetic Resonance Imaging for the Patient with Deep Infiltrating Endometriosis <i>C.S. Kwon, K. Olinger, A.B. McClurg, N. Abu-Alnadi</i>
2:09 pm	Rectosigmoidectomy with Complete Neurovascular Preservation for Deep Endometriosis <i>C.A. Souza, R.M. Almeida, E. Camargos, C.M. Joaquim, P.A. Trauczynski, J.E. Menegatti, G. Buchen, R.T. Pazzello</i>
2:15 pm	Surgical Management of Endometriosis of the Bladder and Ureter <i>Y. Youssef, M. Neblett, K.T. Anderson, Z. Khan</i>
2:21 pm	Intraoperative Ultrasound Elastography Guided Rectal Shaving for Endometriosis <i>S. Yanai, M. Andou, K. Kanno, S. Sakate, M. Sawada, Y. Ochi, S. Semba</i>
2:27 pm	Laparoscopic-Assisted Transanal Total Mesorectal Excision for a Patient with Bowel Endometriosis <i>X. Yi, Y. Chen, K. Chang, Y. Zheng, X. Li</i>
2:33 pm	Cancer Arising from Endometriosis <i>C.H. Nezhat, M. Hincapie, K. Hauser, F.R. Nezhat</i>
2:39 pm	Application of AAGL Endometriosis Classification - An Innovative Tool with Additional Contributions <i>R. Hsu, K.R. Banning, C. Thill, C.J. Kliethermes</i>
2:45 pm	Superficial Endometriosis: The Ultrasound Diagnosis <i>G.M. Zeni, J. Tigdi, H.N. Alsalem, M. Leonardi</i>
2:51 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Surgical Tutorial 3 Bowel Endometriosis: State-of-the-Art of Surgical Treatment

3:15 pm – 4:20 pm
Room: Colorado A



Co-Chairs: Helder Ferreira

Faculty: Mario Malzoni, Arnaud Wattiez

Member Submitted

The surgical management of bowel endometriosis is a point of clinical controversy. When choosing a surgical approach, issues to consider include efficacy of pain relief, risk of repeat surgery, and risk of complication.

This high-profile session will use a case study to illustrate many facets of care when managing patients with bowel endometriosis. Each expert will share their knowledge and remarkable experience in the advanced surgical approach to such a challenging disease whose treatment becomes even more defiant when it invades the bowel. The bowel shaving, discoid, and segmental resections will be explained step-by-step with relevant "tips and tricks." The intra- and postoperative complications related to bowel endometriosis surgery may be very aggressive and associated with high morbidity or even mortality. This surgical tutorial will present several techniques to prevent complications (denervation, fistula, leakage, and bowel dysfunction) and risk factors in a didactic and interactive way.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Identify the indications for shaving, discoid or segmental resections; 2) Articulate in a step-by-step way the different surgical treatments for bowel endometriosis; and 3) Recognize possible risk factors and preventive measures to prevent complications.

COURSE OUTLINE

3:15 pm	Welcome, Introductions and Course Overview <i>H. Ferreira</i>
3:20 pm	Bowel Endometriosis Treatment: State-of-the-Art <i>A. Wattiez</i>
3:35 pm	Discoid Resection and Totally Laparoscopic Resection with Transanal Natural Orifice Specimen Extraction for Deep Endometriosis Infiltrating the Rectum <i>M. Malzoni</i>
3:50 pm	Bowel Anastomosis Leakage: Risk Factors and Prevention Techniques <i>H. Ferreira</i>
4:05 pm	Questions & Answers <i>All Faculty</i>
4:15 pm	Adjourn

Oral Session 5 New Instrumentation

3:15 pm – 4:20 pm
Room: Red Rock 8/9

Moderator: Fernanda Okita and Robert K. Zurawin

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Artificial Intelligence Vision Based Analysis and Key Steps Identification Feasibility Study in Laparoscopic Hysterectomies <i>I. Levin, T. Wolf, D. Asselmann, O. Bar, D. Ben Ayoun, A. Antolin, A. Cohen</i>
3:25 pm	Preoperative Modeling of the Rectovesicle Space and Pelvis in the Surgical Treatment of Patients with Uterine and Vaginal Aplasia <i>L.V. Adamyan, A.Y. Popryadukhin, V.G. Bychenko, A.S. Arakelyan, A.A. Stepanian</i>
3:32 pm	The Minitouch Office Endometrial Ablation Procedure: Results from a Prospective, Multicenter, Pivotal Clinical Trial <i>S.G. Chudnoff, C.M. Basinski, A.G. Brenner, M. Akin, S. Reich, C. Sebestyen</i>
3:39 pm	Effect of Fractional CO2 Laser vs Sham Treatment on Symptom Severity of Postmenopausal Vaginal Symptoms: A Randomized Clinical Trial <i>F.G. Li</i>
3:46 pm	Individualized Medicine Using 3D Printing Technology in Gynecology: A Scoping Review <i>C.M. Cooke, T. Flaxman, L. Sikora, O. Miguel, S.S. Singh</i>
3:53 pm	Investigation of 3D Smart MRI in Surgical Efficiency and Planning <i>T.B. Fenster, E. Cantillo, B. Mosadegh, Y. Havryliuk, J.H. Shin, K. Musselman, M. Schiffman, C. Nchako, A. Caprio</i>
4:00 pm	Self Cleaning Trocars/Laparoscopic Port Add-on for Surgical Camera Lens <i>T. Tran, T.G. Kim, K. Fuegner, P. Aritharan, M. Dovgan</i>
4:07 pm	Laparoscopic Modified McCall Culdoplasty <i>A.M. Foxx, G.T. Whitmore, S.R. Till</i>
4:14 pm	Questions & Answers <i>All Faculty</i>
4:20 pm	Adjourn

Oral Session 6 Reproductive Surgery

3:15 pm – 4:20 pm
Room: Red Rock 3/4

Moderator: Grace M. Janik and Mark W. Surrey

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Pregnancy Outcomes Following Medical Versus Surgical Treatment of Ectopic Pregnancy in Ontario <i>A. Rosen, L. Palma, M. Ordon, N. Melamed, R. Sasaki, A. Page, J. Kroft</i>
3:25 pm	The Role of Minimally Invasive Intrauterine Surgery in Improving the Results of IVF Programs <i>I.F. Kozachenko, V.Y. Smolnikova, L.V. Adamyan, A.A. Stepanian</i>
3:32 pm	Effects of Fibrin Sealant Compared with Suturing or No Hemostatic Intervention on Ovarian Reserve in Patient Undergoing Ovarian Cystectomy <i>M.M. McKenna, P. Gueorguieva, M. Singh, K.J. Sasaki, C.E. Miller</i>
3:39 pm	Assessing the Effect of the COVID-19 Pandemic on the Rate and Management of Ectopic Pregnancy <i>S. Micolucci, T.C. Deighan, J. Van Deman, E.F. Robinson</i>
3:46 pm	Effect of BMI on Outcomes after Surgery for Apical Pelvic Organ Prolapse <i>D. Exume, A.R. Kunselman, C. Stetter, S.S. Boyd</i>
3:53 pm	Preoperative Tamsulosin to Prevent Postoperative Urinary Retention after Pelvic Floor Repair Surgery <i>N.S. Garcia-Ruiz, M. Malekzadeh, E. Hurtado</i>
4:00 pm	Use of Novel Configuration with Suture Kit Device for Robotic-assisted Minimally Invasive Sacrocolpopexy <i>D. Das, N. Squires, M. Mueller, S. Collins, C. Lewicky-Gaupp, C.E. Bretschneider, J. Geynsman-Tan, K. Kenton</i>
4:07 pm	Laparoscopic Pectopexy: A Safe and Effective New Approach for Repair of Pelvic Organ Prolapse <i>S. Saini</i>
4:14 pm	Questions & Answers <i>All Faculty</i>
4:20 pm	Adjourn

Panel 3 Quality Improvement and Patient Safety in Minimally Invasive and Complex Gynecologic Surgery Panel: Advancing Patient Safety Science Through Structural Processes

3:15 pm – 4:20 pm
Room: Red Rock 4/5



Chair: Susan S. Khalil

Faculty: Kirsten J. Sasaki,
Richard B. Rosenfield

Member Submitted

This course will help you understand national drivers in gynecologic surgery through structural factors that shape gynecologic surgical training, value-based indicators in MIGS and complex gynecologic surgery, as well as health equity in MIGS and complex gynecologic surgery. There will also be a discussion the role of quality improvement initiatives and disparities in MIGS. The target audience for this program includes residents, fellows, faculty and program directors in minimally invasive gynecologic surgery and women's health.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Identify drivers of structural measures in minimally invasive gynecologic and complex gynecologic surgery training; 2) Recognize national drivers for quality programs and value-based medicine; and 3) Summarize the role of health equity and QI within creation of disparities in MIGS or complex gynecologic surgery.

COURSE OUTLINE

3:15 pm	Welcome, Introductions and Course Overview <i>S.S. Khalil</i>
3:20 pm	Structural Drivers of Quality in Gynecologic Surgical Training <i>S.S. Khalil</i>
3:35 pm	Health Equity in Minimally Invasive Gynecologic Surgery <i>K.J. Sasaki</i>
3:50 pm	Value Based Medicine in Minimally Invasive Gynecologic Surgery <i>R.B. Rosenfield</i>
3:05 pm	Questions & Answers <i>All Faculty</i>
3:15 pm	Adjourn

Panel 4

Recognizing and Addressing Racial, Ethnic and Socioeconomic Disparities in Gynecologic Care

3:15 pm – 4:20 pm
Room: Red Rock 6/7



Chair: Anna L. Beavis

Faculty: M. Victoria Vargas,
Abdulrahman Sinno

Racial, ethnic, and socioeconomic disparities continue to plague gynecologic patient outcomes. This session will not just describe disparities but will propose proactive strategies to address them at the provider, institution, community, and policy level. We will review the origin of racial and ethnic disparities in gynecologic care, and explore how individualized, internalized, and institutional racism continues to affect access to care and outcomes. We will discuss how we, as providers and community members, can begin to address racial and ethnic disparities in benign and malignant gynecologic outcomes. Lastly, we will highlight the impact of the social determinants of health and provide a practical example of how to integrate screening for social needs into routine outpatient care to help address these drivers of disparities.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Identify the impact that individual, internalized, and systemic racism have on racial and ethnic disparities in gynecologic care, 2) Develop tools to address the drivers of inequity in their own gynecologic practice, 3) Differentiate between social needs and social determinants of health, and prepare to implement social needs screening to their own practice.

COURSE OUTLINE

3:15 pm	Welcome, Introductions and Course Overview A. L. Beavis
3:20 pm	Racial and ethnic disparities in minimally invasive gynecologic surgery: origins and proposed solutions M. V. Vargas
3:35 pm	Racial and ethnic disparities in gynecologic cancers: current trends and next steps A. L. Beavis
3:50 pm	Integrating social needs assessments into the gynecology visit: a powerful tool to address inequities driven by the social determinants of health A. Sinno
4:05 pm	Questions & Answers Chair and Faculty
4:20 pm	Adjourn

Video Session 9

Laparoscopy / Basic Science / Endometriosis

3:15 pm – 4:20 pm
Room: Red Rock 2/3

Moderator: Henrique M. Abrao and Kirstin A. Riley

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Ureterolysis in Pelvic Peritonectomy T.G. Kim, C.T. Manning, E. Gagliardi, E.M. Jorgensen
3:24 pm	How to Remove Endometriosis? Removing All Peritoneum from the Pelvic Compartment: En Bloc Peritonectomy, a Demonstration of the Technique I. Chiminacio, C. Obrzut
3:30 pm	Laparoscopic Suturing of the Vaginal Cuff: A Surgical Education Module for Obstetrics and Gynecology Residents A. Carey-Love, M.S. Orlando, C.R. King
3:36 pm	Laparoscopic Nerve-Sparing Radical Parametrectomy for Deep Lateral Parametrial Endometriosis K. Kanno, S. Yanai, M. Andou
3:42 pm	Laser Assisted Appendectomy A. Shishkina, E. Miazga, S. Benlolo, M. Louridas, C. McCaffrey
3:48 pm	Left in the Dark: Laparoscopic Cuff Closure for Left-Handed Learners E.J. Chang-Patel, A.M. Ecker, C.H. Gould
3:54 pm	Laparoscopic Inguinal Gonadectomy in a Case of Partial Androgen Insensitivity Syndrome and Bilateral Gonads in Inguinal Canal R. Raj, R. Mahey, N. Bhatla, S. Manchanda, A. Kumari
4:00 pm	Posterior Compartment Peritonectomy: Technique Demonstration I. Chiminacio, C. Obrzut, H. Sabadin
4:06 pm	Questions & Answers All Faculty
4:20 pm	Adjourn

Video Session 10

Laparoscopy / Oncology

3:15 pm – 4:20 pm
Room: Willow Lake 5

Moderator: David Boruta and Joy Brotherton

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	TRANS-Peritoneal PARA-Aortic Node Dissection Two Different Techniques S.P. Puntambekar, M. Patil, S. Bharambe, S. Puntambekar and A. Puntambekar
3:24 pm	Nerve-Sparing Laparoscopic Segmental Bowel Resection for Deep Endometriosis: The Negar Method D. Mautone, R. Clarizia, G. Roviglione, F. Bruni, M. Ceccarello, G. Ruffo, and M. Ceccaroni
3:30 pm	Urine Double Trouble: A Case of Voiding Dysfunction Following Gynecologic Surgery M. Payne, B. Corran, and S.S. Singh
3:36 pm	Management of Vaginal Vault Dehiscence after Laparoscopic Hysterectomy S. Benoit Dube, D. Nguyen, A. Zakhair, F.W. Mansour, J.B. Papillon Smith, and S. Krishnamurthy
3:42 pm	Robotic-Assisted vs Conventional Laparoscopic Transabdominal Cerclage Placement K.W. Zeng, G.L. Smith, S. Galhotra, T. Norton, D. Mahner, and J. Mourad
3:48 pm	Fertility-Sparing Cornual Wedge Resection for Management of GTN R.S. Perry, D.A. Iglesias, J.N. Sosa-Stanley, and J.N. Casey
3:54 pm	Surgical Anatomy of Nerve as Seen in Nerve Sparing Radical Hysterectomy for Endometrial CA (>50% INVASION) S. P. Puntambekar, M. Patil, S. Puntambekar, and A. Puntambekar
4:00 pm	Second Look Laparoscopy Surgery Boon for Fully Treated Patients of CA Ovary but Raising CA 125 Levels and Localised Tumors S.P. Puntambekar, S. Puntambekar, and A. Puntambekar
4:06 pm	Questions & Answers All Faculty
4:20 pm	Adjourn



MIGS2023

SEPTEMBER 21-23 | 2023 - SÃO PAULO - BRAZIL

NEWS PERSPECTIVES IN GYNECOLOGIC ENDOSCOPY



Chair:
 **Mauricio S. Abrão**

Co-Chair
 **Mário Malzoni**

Co-Chair
 **Agnaldo Lopes**

Scientific Committee:
Marco Antonio Bassi
Luiz Gustavo Oliveira Brito
Nicolau D'Amico
Luiz Flavio Cordeiro Fernandes
João Siufi

Achievement:



CME GENERAL SESSION III

Friday, December 2, 2022

4:30 pm – 6:15 pm • Colorado A

MED TALKS



Historical Perspective on the Evolution of Laparoscopy and Surgical Mentorship

4:30 pm – 4:45 pm

Resad Paya Pasic, MD, PhD

In AAGL MED Talk 2, Dr. Resad Paya Pasic will provide us with an engaging Historical Perspective on the Evolution of Laparoscopy and Surgical Mentorship. Dr. Pasic is a Professor of Obstetrics and Gynecology and Director of the FMIGS program at the University of Louisville. He is also Coordinator of the Annual Workshop on MIGS and Laparoscopic Hysterectomy which has been responsible for training over

1000 physicians, from 42 countries, over the last 23 years. In addition, he is the recipient of the Foundation of the AAGL's prestigious 2022 John F. Steege Mentorship Award and has been selected for the Best Doctors in America Award and the Best Surgeons in Louisville Award for multiple years. In 2009, he served as the AAGL President, and he is currently serving as President of the International Society

of Gynecologic Laparoscopists (ISGE). Dr Pasic has published 55 peer review articles and 5 textbooks. He is a captivating presenter who is sure to hold your attention. In this AAGL MED Talk you will learn about the innovative pioneers and historical development of laparoscopy along with gaining an understanding of the barriers that present in the development of surgical mentorship.



FEATURED PRESENTATION

Fistulas - Can We Really Eradicate Them by 2030?

4:45 pm – 5:30 pm

Ajay Rane, MMBBS, MSC, MD, FRCOG, FRCS, FRANZCOG, CU, FICOG (HON), PhD, FRCPI (HON) GAICD

Dr. Rane is a Professor and Head of Faculty in Obstetrics and Gynaecology at James Cook University in Australia and Director of Urogynecology at the Female Pelvic Health Center in Townsville, Australia. His unit is actively conducting research in physiology, neurophysiology, vaginal reconstructive surgery, the use of mesh in vaginal repairs and more. His philanthropic work includes setting up a fistula hospital in Chennai, the Paula Rane Fistula Ward, named by the Tamil Nadu Government after Dr. Rane's wife. He has now launched similar models of care in Nepal, Papua New Guinea, and Fiji. In addition to the fistula hospitals, he and his wife support an orphanage in Chennai providing an auto rickshaw, computers, books, uniforms, and dental kits for these children on a regular basis. As Chairman of the FIGO Fistula and Genital Trauma Committee, Dr. Rane has a global task to eradicate obstetric fistulas and genital mutilation. He will be presenting at this Global Congress on

Fistulas - Can We Really Eradicate Them by 2030? on Friday in General Session III. Dr. Rane was born in England and after finishing his early schooling, he moved to rural India where he completed his training in Obstetrics and Gynaecology earning him a medical degree in Obstetrics, and Gynaecology from the University of Poona. He then moved to England and completed his Master's degree in Urogynecology at Liverpool University. After spending some time practicing urology and general surgery to improve his surgical skills, he obtained his MRCOG from the Royal College of Obstetrics and Gynaecology in London and passed the FRCS Urology Exam. He then moved to Australia as a Consultant Obstetrician and Gynaecologist and was awarded the FRANZCOG by the Royal College in Australia. He also completed subspecialty training in Urogynecology for which he was awarded the CU in the year 2000. He then completed his PhD

at James Cook University where he researched various postures on the toilet and its effect on micturition. In January 2010, he was awarded the FICOG (Hon) by the Indian College of Obstetrics and Gynaecology for his work in Chennai and the FRCPI (Hon) in 2013 for his work on female genital mutilation and female infanticide and feticide. Dr. Rane has written more than 100 peer reviewed papers and 160 non-peer reviewed papers, along with 2 books and numerous chapters in his career to date. He is a Reviewer for the International Urogynecology Journal, the Australian and New Zealand Journal of Obstetrics and Gynaecology (ANZJOG), the Journal of Obstetrics and Gynaecology and the European Journal of Obstetrics and Gynaecology. He has been MRANZCOG examiner, Treasurer for RANZCOG, Chairman of the Basic Surgical Skills Committee and a member of the Provincial Fellows Committee and Research Committee of the College.

Dr. Rane has received many awards including the prestigious Paul Harris Fellowship by Rotary International in 2011, the Order of Australia Medal for his work in Urogynecology in 2013, the Mahatma Gandhi Pravasi Award at the House of Lords for his philanthropic work in women's health in 2016, the Pride of Australia medal in 2019, and most recently, he was awarded a Queensland Great Award in 2021. His extracurricular activities involve mountain climbing, golf and playing the saxophone. He and his very supportive wife, Paula, have two children.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Recognize the global scale of the issues of fistula; 2) Recognize the complexity of fistulas and the principles of management of fistulas; and 3) Navigate the challenges in running a fistula program.



Mario Malzoni, MD

Dr. Malzoni is a world-renowned endometriosis specialist and is recognized for his extraordinary skill at advanced pelvic surgery in Deep Endometriosis and Oncology.

His training included an appointment to the Department of Laparoscopic Surgery at Columbia University, where he worked to master the newest (at that time), surgical techniques under the guidance of the founder of laparoscopic hysterectomy; Dr. Harry Reich.

Dr. Malzoni serves as Chair of "Endoscopica Malzoni" Center for Advanced Pelvic Surgery and Chief of the MACC (Malzoni Cancer Center) and is a member of the AAGL Board of Directors. He is also Honorary-Professor Emeritus at the University and Research Centre in Moscow, Russia, Scientific Director of the Malzoni Group, and past President of the Italian Society of Gynecological Endoscopy (SEGi).



Alessandra Di Giovanni, MD

In addition to management of the medical institutions, on average Dr. Malzoni performs about 1,500 Minimally Invasive Surgical Procedures annually.

Dr. Alessandra Di Giovanni is a gynecologist with subspecialty in pelvic ultrasonography for gynecological benign and malignant diseases (more than 10.000 procedures). Dr. Di Giovanni has been a Consultant for Endoscopica Malzoni- Center for Advanced Pelvic Surgery, Avellino, Italy since 2012. She has also been a lead and co-author of several peer-reviewed scientific publications and has served as Chair and speaker at several international conferences and scientific events.

During their presentation "Deep Infiltrating Endometriosis with Radical Hysterectomy and (N.O.S.E.) Bowel Resection" Drs. Malzoni and Di Giovanni will discuss total

Deep Infiltrating Endometriosis with Radical Hysterectomy and (N.O.S.E.) Bowel Resection

5:30 pm – 6:15 pm • *Pre-Recorded Surgery*

laparoscopic asymmetric radical hysterectomy with parametrectomy and segmental bowel resection using natural orifice specimen extraction (N.O.S.E) technique for adenomyosis and deep endometriosis.

This interactive surgical demonstration will feature the complex approach in a setting of deep endometriosis with adenomyosis in association with deep endometriosis (DIE) infiltrating retrocervical area, parametria and bowel wall.

The importance of a correct preoperative evaluation with detailed sonography in order to set proper surgical strategy, will be demonstrated in this video, along with the proper surgical steps needed to eradicate the disease completely, in a safe and effective manner.

Learning objectives: *At the conclusion of this video session, participants will be able to:* 1) Improve their knowledge about proper preoperative work-up in DIE; 2) Increase their competence on surgical anatomy in the retroperitoneal area and 3) Better understand the modulation of radicality in parametrial endometriosis with nerve-sparing preparation and the use of N.O.S.E. technique for bowel resection.

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AAGL 2022 COGA SCIENTIFIC SESSION

6:00 pm – 8:00 pm • Willow Lake 1 & 2 (Virtual Only)

Saturday, December 03, 2022, 09:00-11:00, Beijing Time



Chairs: Jinghe Lang, Ted T.M. Lee

Co-Chair: Lan Zhu, Xiaoming Guan

Faculty: Xishan Wang, Enlan Xia, Wen Di, Lan Zhu, Yang Xiang, Peter Lim, Jinhua Leng, Zehua Wang, Juan Liu, Chongdong Liu

COURSE OUTLINE		SPEAKER
9:00 am – 9:03 am	Welcome, introduction and Course Overview	J.Lang, Wen Di
9:03 am – 9:06 am	Welcome speech	Ted Lee
9:06 am – 9:18 am	Vagina, a gateway leading a new era of gastrointestinal NOSES	Xishan Wang, Xiaoming Guan
9:18 am – 9:30 am	30 years of hysteroscopy development in China	Enlan Xia
9:30 am – 9:42 am	Management of vascular injury in laparoscopy	Wen Di
9:42 am – 9:54 am	Clinical outcome of ultralight synthetic mesh implantation in the treatment of severe posterior vaginal prolapse	Lan Zhu
9:54 am – 10:06 am	Laparoscopic modified radical trachelectomy for early-stage cervical cancer	Yang Xiang
10:06 am – 10:09 am	Discussion	
10:09 am – 10:21 am	Rupture of ovarian endometrioma—an underestimated complication	Jinhua Leng, Peter Lim
10:21 am – 10:33 am	Strategies for minimizing risk of urinary tract fistulas after laparoscopic radical surgery for cervical cancer	Zehua Wang
10:33 am – 10:45 am	Techniques of Transvaginal Natural Orifice Transluminal Endoscopic Surgery (vNOTES) hysterectomy	Juan Liu
10:45 am – 10:53 am	The value of laparoscopy in the diagnosis and treatment of extra-pelvic ectopic pregnancy	Chongdong Liu
10:53 am – 10:56 am	Discussion	
10:56 am – 11:00 am	Summary	Xiaoming Guan

INDUSTRY SPONSORED SYMPOSIA

6:15 pm – 7:45 pm



Empowering the Patient Community: Managing Life with Fibroids via Transcervical Fibroid Ablation (TFA)

Colorado Ballroom B

This evening symposium will present transcervical fibroid ablation (TFA) with the Sonata® System and explore its potential use in your fibroid treatment armamentarium. A uterine fibroid patient and leader in global uterine fibroid advocacy will facilitate a discussion between a distinguished panel of expert gynecologists who manage fibroids reviewing unmet needs, latest clinical data, and ideal patient profiles for Sonata treatment.

Speakers:

Leslie Hansen-Lindner, MD
Atrium Health, Charlotte, NC

Kelly Roy, MD
Arizona Gynecology Consultants, Phoenix, AZ

Charles Ascher-Walsh, MD
Mt. Sinai, New York, NY

vNOTEs Cases You Want to See: An Audience-Led Video Symposium

Colorado Ballroom C

Learn about the versatility of vNOTEs from a panel of expert surgeons who have performed more than 5,000 cases. Cast your vote at the Applied Medical booth (#701) to decide what they will discuss at this symposium.

Speakers:

Jan F. Baekelandt, MD, PhD
Gynecological Oncology and Endoscopy, Imelda Hospital, Boortmeerbeek, Belgium

Alexander F. Burnett, MD
OB/Gyn, University of Arkansas for Medical Sciences, Conway, AR

Brandi D. Hardin, MD
OB/GYN, Summerville Medical Center, Summerville, SC

Veronica Lerner, MD
OBGYN, Northwell Health, New York, NY

Grover May, MD, FACOG
State of Franklin OB/GYN Specialists, Johnson City, TN

Lamarr B. Tyler, DO
OB/GYN, Intermountain Healthcare, Las Vegas, NV

A Team Approach to GYN Robotic: Assisted Surgery at Banner Health

Colorado Ballroom D

Dr. Jamal Mourad, Interim Chair and Center Director of the Minimally Invasive Gynecologic Surgery program at Banner Health in Phoenix, AZ, will headline a panel discussion featuring Dr. Rachel Smith (Fellowship Program Director, Banner Health), Dr. Taylor Norton (MIGS Fellow, Banner Health), and Surgery Coordinator Adriana Barboza (Banner Health). The panel will share their team driven approach to GYN robotic surgery at Banner, strategies for building an efficient robotic practice at your own institution, and perspectives on how their robotic program has also served venue for training the next generation of MIGS surgeon.

Speakers:

Jamal Mourad, DO
Minimally Invasive Gynecologic Surgery, Banner University Medical Center - Phoenix, Phoenix, AZ

Rachael B Smith, DO
Minimally Invasive Gynecologic Surgery, Banner University Medical Center Phoenix, Phoenix, AZ

Taylor Norton, MD
Ob/Gyn, Banner University Medical Center Phoenix, Phoenix, AZ

JOIN US FOR A BREAKFAST SYMPOSIUM AT AAGL 2022

OPIOID REDUCTION STRATEGIES FOR MINIMALLY INVASIVE GYN PROCEDURES

FEATURING:

Steven D. McCarcus, MD, FACOG

Chief, Division of Gynecologic Surgery

AdventHealth Winter Park

Assistant Professor of Obstetrics and
Gynecology Department of Medical Education

Orlando, FL



Jeff Gonzales, MD

Anesthesiologist

Parker Adventist Hospital

Enhanced Recovery Anesthetic Consultants, LLC

Parker, CO



The speakers have consulting relationships with Pacira BioSciences, Inc.
Dr Gonzales is an employee of Pacira BioSciences, Inc.

Saturday, December 3, 8:00-8:45 AM MT

Product Theater 2, Gaylord Rockies Resort & Convention Center

PROGRAM OBJECTIVES:

- Learn multimodal approaches to pain management in gynecologic procedures
- View the relevant neuroanatomy using 3D cadaver technology for field blocks and surgical site infiltration

AAGL=American Association of Gynecologic Laparoscopists.

Please see Important Safety Information on reverse side and refer to accompanying full Prescribing Information, which is also available at www.EXPAREL.com.

EXPERIENCE MATTERS

10+ MILLION PATIENTS HAVE RECEIVED EXPAREL

Indication

EXPAREL is indicated for single-dose infiltration in patients aged 6 years and older to produce postsurgical local analgesia and in adults as an interscalene brachial plexus nerve block to produce postsurgical regional analgesia. Safety and efficacy have not been established in other nerve blocks.

Important Safety Information

EXPAREL is contraindicated in obstetrical paracervical block anesthesia.

Adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via infiltration were nausea, constipation, and vomiting; adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via interscalene brachial plexus nerve block were nausea, pyrexia, and constipation.

Adverse reactions with an incidence greater than or equal to 10% following EXPAREL administration via infiltration in pediatric patients six to less than 17 years of age were nausea, vomiting, constipation, hypotension, anemia, muscle twitching, vision blurred, pruritus, and tachycardia.

If EXPAREL and other non-bupivacaine local anesthetics, including lidocaine, are administered at the same site, there may be an immediate release of bupivacaine from EXPAREL. Therefore, EXPAREL may be administered to the same site 20 minutes after injecting lidocaine.

EXPAREL is not recommended to be used in the following patient populations: patients <6 years old for infiltration, patients younger than 18 years old for interscalene brachial plexus nerve block, and/or pregnant patients.

Because amide-type local anesthetics, such as bupivacaine, are metabolized by the liver, EXPAREL should be used cautiously in patients with hepatic disease.

Warnings and Precautions Specific to EXPAREL

Avoid additional use of local anesthetics within 96 hours following administration of EXPAREL.

EXPAREL is not recommended for the following types or routes of administration: epidural, intrathecal, regional nerve blocks **other than interscalene brachial plexus nerve block**, or intravascular or intra-articular use.

The potential sensory and/or motor loss with EXPAREL is temporary and varies in degree and duration depending on the site of injection and dosage administered and may last for up to 5 days, as seen in clinical trials.

Warnings and Precautions for Bupivacaine-Containing Products

Central Nervous System (CNS) Reactions: There have been reports of adverse neurologic reactions with the use of local anesthetics. These include persistent anesthesia and paresthesia. CNS reactions are characterized by excitation and/or depression.

Cardiovascular System Reactions: Toxic blood concentrations depress cardiac conductivity and excitability, which may lead to dysrhythmias, sometimes leading to death.

Allergic Reactions: Allergic-type reactions (eg, anaphylaxis and angioedema) are rare and may occur as a result of hypersensitivity to the local anesthetic or to other formulation ingredients.

Chondrolysis: There have been reports of chondrolysis (mostly in the shoulder joint) following intra-articular infusion of local anesthetics, which is an unapproved use.

Methemoglobinemia: Cases of methemoglobinemia have been reported with local anesthetic use.

Full Prescribing Information is available at www.EXPAREL.com.

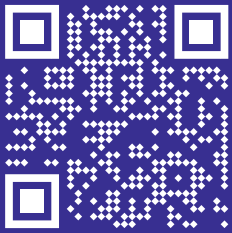
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FRIDAY, DECEMBER 2ND, 2022

8:30 PM - 12 MIDNIGHT

JUNIPER BALLROOM - LEVEL 1

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AURORA EXHIBIT HALL EVENTS

INDUSTRY SPONSORED PRODUCT THEATERS

8:00 am – 8:45 am

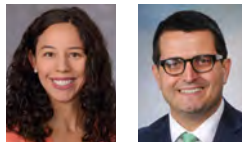
Product Theater I • CooperSurgical
Product Theater II • Pacira Biosciences, Inc.

1:00 pm – 1:45 pm

Product Theater I • Intuitive Surgical, Inc.
Product Theater II • Legally Mine

SUTURING CAFÉ

Preregistration Required: *Sessions are Full*



Co-Chairs: Nichole Mahnert, Chris DeStephano

8:00 am – 9:30 am

Lead: Mobolaji Ajao

Faculty: J. Biba Nijjar, Miguel A. Luna-Russo, Michelle Louie, Marie Erin Shockley

1:00 pm – 2:30 pm

Lead: Jay Hudgens

Faculty: J. Benjamin D. Beran, James N. Casey, Christina Johnson, Kimberly Kho

This course provides a comprehensive review of the fundamentals of laparoscopic suturing, from basic to advanced, in a dry lab setting. Didactics contain a variety of surgical videos highlighting practical tips and tricks for needle introduction and setting, tissue re-approximation and suture management, intra-corporeal and extra-corporeal knot tying techniques. The goal is to allow ample time for hands-on practice under direct supervision of the faculty who are not only expert MIG Surgeons, but more importantly, experienced instructors with ability to guide learners in a dry lab setting. The faculty will provide immediate feedback and one-on-one instructions based on your individual needs. More advanced techniques such as a baseball stitch, sliding knot and cinch knot will be demonstrated and practiced during the hands-on session for the more advanced learners. Regardless of your skill level, this course will improve your confidence and competence in your next OR.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Detail different options for needle introduction, setting and removal; 2) Demonstrate efficient techniques for tissue re-approximation and suture management; and 3) Perform intra-corporeal and extra-corporeal knot in an efficient and reproducible manner.

- Welcome, Introduction and Course Overview
- Introduction and Removal of Needle Setting, Needle Tissue re-approximation Techniques
- Intra-Corporeal Knot – Common Mistakes, Extra-Corporeal Knot Tips and Tricks, Running Suture
- Questions & Answers
- Dry Lab Hands-on
- Wrap-up
- Questions and Answers
- Adjourn

CME GENERAL SESSION IV

Saturday, December 3, 2022

9:45 am – 11:15 am • Colorado A

MED TALKS



Cheryl B. Iglesia, MD

Safely Introducing New Technologies in Gynecologic Surgery

9:45 am – 10:00 am

Dr. Cheryl Iglesia is the Director of the Section of Female Pelvic Medicine and Reconstructive Surgery at MedStar Health and a Professor in the Departments of Ob/Gyn and Urology at Georgetown University School of Medicine in Washington, DC. She is the founder of the accredited FPMRS Fellowship Program and serves as the Director of the National Center for Advanced Pelvic Surgery (NCAPS) for MedStar Health. Among her many roles, Dr. Iglesia is the current chair of the Advisory Board for the Pelvic Floor Disorders Network at the Eunice Kennedy Shriver National Institute for Child Health and Human Development (NICHD) and serves on the Executive Board as Secretary-Treasurer for the Society of Gynecologic Surgeons (SGS).

Over the past 15 years, several devices designed to improve the treatment of common gynecologic issues such as pelvic organ prolapse, heavy menstrual bleeding and permanent contraception

have been the subject of national panel hearings and litigation. What are some common themes and lessons learned? How can medical device innovation in the US be maximized while minimizing risks to patients?

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Summarize several recent US FDA hearings related to gynecologic surgery devices; 2) Recommend best practices for respectful and responsive industry – provider communication related to device outcomes and adverse events; and 3) Include the patient voice through PROs (patient reported outcomes) that matter most when evaluating new devices.



Fernando Heredia, MD

Sentinel Node Mapping for Endometrial Cancer (ICG)

10:00 am – 10:40 am • Pre-recorded Surgery

Dr. Fernando Heredia is an Associate Professor at the Universidad de Concepción and Chief Staff of MIGS and robotic surgery at Clínica Andes Salud in Concepción, Chile. He also serves as Director of the Sociedad Chilena de Ginecología Oncológica (SCHIGO), is founder and director of the Sociedad de Endoscopia Ginecológica Chilena (SEGICH), and is Vice Chair of the AAGL Oncology SIG. Dr. Heredia attended medical school at Universidad de Concepción and Gynecologic Oncology Fellowship at Instituto Clínico Oncológico de la Fundación Arturo López Pérez in Santiago, Chile. He has written 38 publications primarily on fertility preservation in cervical cancer, VNOTES surgery, and benign MIS. He is passionate about innovation including introducing new technologies, designing surgical procedures tailored by preoperative imaging, and translating cutting edge surgical technology into an accessible reality for low and middle-income countries so that they can offer the best possible surgical care. He believes strongly in teaching and sharing skills and knowledge to elevate each other's skillsets. He has a contagious passion and enthusiasm for MIGS that we can all appreciate.

The case presented is a 53-year-old patient (BMI 41.6) with an apparent Stage I G1 endometrial endometrioid carcinoma. Cervical injection of ICG in a standardized fashion will be shown and simultaneously the lymphatic drainage will be depicted. Dissection of one of the sides will be thoroughly shown before starting a challenging TLH due to C-section scarring. At the close of this session, participants will be able to understand the lymphatic drainage of the uterus; be familiar with ICG characteristics, and identify the proper technique, and some tips, for identifying and dissecting the Sentinel Lymph node.

Learning objectives: *At the conclusion of this video, the participants will be able to:* 1) Understand the lymphatic drainage of the uterus; 2) Be familiar with ICG characteristics and; 3) Identify the proper technique and some tips for identifying and dissecting the Sentinel Lymph node.



Rajiv J. Shah, MD

JORDAN M. PHILLIPS KEYNOTE ADDRESS A Fireside Chat with

Rajiv J. Shah, MD President Rockefeller Foundation

10:40 am – 11:10 am

Please join Dr. Andrew Sokol as he engages Dr. Rajiv J. Shah in a thought-provoking conversation.

The Jordan M. Phillips Keynote Address is provided this year through a fireside chat with the inspiring and world-renowned, Dr. Rajiv J. Shah. Dr. Shah is the President of the Rockefeller Foundation, a global institution with a mission to promote the well-being of humanity around the world. Prior to his work at the Rockefeller Foundation, Dr. Shah created the International Financing Facility for Immunization at the Bill & Melinda Gates Foundation which helped reshape the global vaccine industry and saved millions of lives. He was also appointed as USAID Administrator under President Obama, shaping the agency's operations in more than 70 countries, leading the U.S. response to the Haiti earthquake and the Ebola pandemic, and elevating the role of development as part of our nation's foreign policy.

Dr. Shah is a graduate of the University of Michigan, the University of Pennsylvania School of Medicine, and the Wharton School of Business. He has received several honorary degrees and awards including the Secretary of State's Distinguished Service Award, the U.S. Global Leadership Award, and this year, was inducted into the prestigious American Academy of Arts and Sciences for his dedication to public policy and public affairs.

Dr. Shah's passion for patient care in underserved communities and commitment to public service matches that of AAGL. Though on a public policy level, Dr. Shah carries the same great burden of responsibility that we do to meet the needs of our patients and advance progress in medicine so that we may provide the best practices of healthcare for all women, in all parts of the world.

Surgical Tutorial 4 Alternatives to Hysterectomy in the Treatment of Fibroids

11:30 am – 12:35pm

Room: Colorado A



Chair: Sarah L. Rassier Cohen

Faculty: Minda A. Green, Bruce B. Lee

This surgical tutorial includes dynamic speakers and procedural videos detailing less invasive options for individualized treatment of uterine fibroids. The bulk of this talk will focus on laparoscopic and transcervical radiofrequency ablation procedures for fibroids, including tips for patient selection, patient counseling and efficient operative techniques. We will also discuss rationale for avoiding hysterectomy in various patient scenarios and will review medication and radiologic options for treatment of fibroids. This course will conclude with a slideshow of complex cases inviting audience feedback on the optimal treatment option.

Learning Objectives: At the conclusion of this activity, the participant will be able to: 1) Effectively counsel patients on individualized treatment planning for fibroids; 2) Confidently perform radiofrequency ablation procedures in appropriate patients; and 3) Collaborate with colleagues in diagnostic and interventional radiology for care of fibroid patients.

COURSE OUTLINE

11:30 am	Welcome, Introductions and Course Overview <i>S.L. Rassier Cohen</i>
11:35 am	Radiofrequency Ablation of Fibroids <i>M.A. Green</i>
11:50 am	Laparoscopic Radiofrequency Ablation of Fibroids <i>B.B. Lee</i>
12:05 pm	Why Don't We Just Do a Hysterectomy? <i>S.L. Rassier Cohen</i>
12:20 pm	Questions & Answers <i>All Faculty</i>
12:30 pm	Adjourn

Oral Session 7 Oncology

11:30 am – 12:35 pm

Room: Red Rock 6/7

Moderator: Mahmut Bilal Sert and Enrico Vizza

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Three Lymphadenectomy Strategies in Endometrial Carcinoma: Analysis of Long-Term Outcomes <i>G. Bogani, V. di Donato, J. Casarin, F. Plotti, A. Papadia, A. Buda, F. Multinu, A.M. Perrone, P. De Iaco, M.L. Gasparri, F. Ghezzi, S. Ferrero, F. Sorbi, R. Angioli, F. Landoni, M.D. Mueller, L. Muzii, P. Benedetti Panici, F. Raspagliesi</i>
11:40 am	Benign Ovarian Cystectomies in Children and Adolescents: A Comparison of Transumbilical Single-Port and Multi-Port Laparoscopic Surgery <i>Y. Tong</i>
11:47 am	Oncological Outcomes of Obese Patients in Treatment of Endometrial Cancer. Comparative Analysis of Robotic Versus Laparoscopic Surgery <i>K. McMurray, L.L. Kennedy, F. Siddiqui, E.Y. Kang, P.C. Lim</i>
11:54 am	Meta-Analysis of Laparoscopic Radical Hysterectomy vs. Robotic Assisted Radical Hysterectomy for Early Stage Cervical Cancer <i>L. Govindan, G.J. Marchand, A. King, G. Brazil, H. Ulibarri, J. Parise, A. Arroyo, C. Coriell, S. Goetz, C. Moir, K.M. Sainz</i>
12:01 pm	Comparative Effectiveness of Minimally Invasive Hysterectomy Type in the Treatment of Endometrial Cancer <i>R.M. Polan, A. Pyrzak, E. Rossi, E.L. Barber</i>
12:08 pm	Minimally Invasive Technique Not Associated with Worse Prognosis in Patients with Stage I Uterine Papillary Serous Carcinoma (UPSC) <i>J. Chen, J. Brown, E. Crane, B. Lees, A. Puechl, R.W. Naumann</i>
12:15 pm	Hysterectomy Alone vs. Hysterectomy Plus Sentinel Node Mapping in Endometrial Cancer: Long-Term Results from a Multi-Institutional Study <i>G. Bogani, A. Papadia, J. Casarin, A. Buda, F. Multinu, F. Plotti, A.M. Perrone, P. De Iaco, F. Ghezzi, S. Ferrero, R. Angioli, L. Muzii, F. Landoni, M.D. Mueller, P. Benedetti Panici, F. Raspagliesi, V. di Donato</i>
12:22 pm	Questions & Answers <i>All Faculty</i>
12:35 pm	Adjourn

Oral Session 8 Research / Natural Orifice

11:30 am – 12:35 pm

Room: Red Rock 8/9

Moderator: Olga Muldoon and Malcolm G. Munro

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Enhanced Recovery after Surgery (ERAS) Practices in Minimally Invasive Gynecologic Surgery: A National Survey <i>A. Shivji, E. Miazga, C. McCaffrey, S. Kives, A. Nensi</i>
11:40 am	Reducing Surgical Site Infection and Sepsis after Hysterectomy: Cefazolin Compared with Cefazolin Plus Metronidazole <i>F. Shalabi, M. Swain, MD, J. Arun, E. Todter</i>
11:47 am	Applications of Ultrasound Elastography in Benign Gynecology: A Scoping Review <i>G.C. Horwood, L. McLean, T. Flaxman, M. McInnes, S.S. Singh</i>
11:54 am	Post-Operative Voiding Function after Total Laparoscopic Hysterectomy with Transvaginal Versus Transabdominal Morcellation <i>M. Marguerie</i>
12:01 pm	Surgical Practice Patterns in the Management of Ovarian Torsion <i>T.K. Brah, M. Le Neveu, M. Snow, M. Krishnamoorthi, H.Y. Wu, K. Simpson, K.E. Patzkowsky, A.S. Frost, K.C. Wang</i>
12:08 pm	Ice-Pop: Ice Packs for Post-Operative Pain, a Randomized Controlled Trial <i>L.E. Kenyon, J. Shields, A.E. Porter, J.S.C. Chen, L. Chao, S. Chang, K.A. Kho</i>
12:15 pm	Moving the Needle on Vaginal Hysterectomy: Implementing vNOTES at a Large Academic Medical Center <i>K. Fu, E.B. Wang, P.M. Weix</i>
12:22 pm	Questions & Answers <i>All Faculty</i>
12:35 pm	Adjourn

Panel 5

Fibroids and Adenomyosis - Surgical Management

11:30 am – 12:35pm

Room: Red Rock 4/5



Chair: Ja Hyun Shin

Faculty: Prakash H. Trivedi, Antonio R. Gargiulo

Participation in this course will provide gynecologic surgeons with an enhanced knowledge of how to tackle complex fibroid and adenomyosis conditions. This course will provide expert recommendations on surgical approaches for the most effective and safe outcomes from start to finish. Through case reviews and surgical videos, the faculty will discuss important considerations for a comprehensive evaluation, preoperative planning and intraoperative preparations, identifying when and what surgery is indicated, and technical pearls for challenging cases. We will also discuss fertility considerations and innovative approaches to treatment including multidisciplinary efforts.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Integrate advanced techniques into their surgical management of patients with complex fibroid and adenomyosis conditions; 2) Evaluate the different modes of minimally invasive surgical approaches for successful outcomes; and 3) Recognize the benefits of a multidisciplinary approach to care with interventional radiologists and fertility specialists.

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview <i>J.H. Shin</i>
11:35 am	Multidisciplinary Approach to Fibroids and Adenomyosis <i>J.H. Shin</i>
11:50 am	Surgical Management of Fibroids and Adenomyosis: Fertility Considerations and Implications of Treatment <i>A.R. Gargiulo</i>
12:05 pm	Complex Fibroid and Adenomyosis Management: Challenges and Novel Approaches <i>P.H. Trivedi</i>
12:20 pm	Questions and Answers <i>All Faculty</i>
12:35 pm	Adjourn

Video Session 11

Endometriosis / Laparoscopy

11:30 am – 12:35 pm

Room: Red Rock 2/3

Moderator: Cihat Unlu and Eve Zaritsky

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Anatomical and Surgical Considerations for Ileocolic Endometriosis <i>A. Carey-Love, M.W. Dassel, H. Kessler, M.A. Luna-Russo</i>
11:39 am	ICG Enema to Make Rectal Shaving Easier and Safer <i>C.H. Sun</i>
11:45 am	Identification of Ureters with ICG Dye in Endometriosis and Benign Gynaecology <i>T. Rao, T.T. Chang</i>
11:51 am	Laparoscopic Endometrioma Excision Using Hydrodissection with Dilute Vasopressin <i>S. Kodama, R. Thompson, J.K. Robinson, III</i>
11:57 am	A Whole New "Endo-World" for a FMIGS: How to Start? <i>K.H. Mori, P. Ayroza Ribeiro, F. Ohara, F.O. Reis, L.C. Favaro, H. Ribeiro</i>
12:03 pm	Laparoscopic Resection of Large Abdominal Wall Endometriosis <i>A.M. Zeccola, N.R. King, T.T.M. Lee</i>
12:09 pm	Laparoscopic Shaving of Rectosigmoid Deep Infiltrating Endometriosis Under Laparoscopic Ultrasound Guidance <i>D. Hardman, R.D. Bennett, E. Mikhail</i>
12:15 pm	Ureterolysis for Deep Infiltrating Endometriosis Using Indocyanine Green on the Robotic Platform <i>B. Thigpen, T. Koythong, X. Guan</i>
12:21 pm	Questions & Answers <i>All Faculty</i>
12:35 pm	Adjourn

Video Session 12

Laparoscopy / Fibroids

11:30 am – 12:35 pm

Room: Willow Lake 3/4

Moderator: Nathaniel Klein and Bhaskar Patel

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Laparoscopic Myomectomy in the Retzius Space <i>V. Rojas-Luengas, F. Mohtashami</i>
11:39 am	Laparoscopic Myomectomy of Large Broad Ligament Fibroid <i>N.R. King, T.T.M. Lee</i>
11:45 am	Minimally Invasive Surgery for Persistent Uterine Incarceration in a Patient with a History of Prior Colectomy <i>T. Norton, K. Fuller, J. Mourad</i>
11:51 am	Temporary Occlusion of the Uterine Artery at the Origin Using Titanium Clips for Laparoscopic Myomectomy <i>K.H. Lou, K.A. Riley</i>
11:57 am	Laparoscopic Myomectomy for a Large Incarcerated Posterior Myoma <i>E.M. Jaworski, E.M. Marici, J. Wilson-Leedy</i>
12:03 pm	Laparoscopic Hysterectomy Following Robotic Radical Trachelectomy <i>K. Patel, B. Thigpen, L. Chohan, J.B. Nijjar</i>
12:09 pm	Laparoscopic Repair of a Deep Cesarean Scar Defect Guided by Hysteroscopy: Surgical Technique <i>A.S. Naessens Aspiazu, G.O. Vietri, Sr., L. Ribero, J.M. Saadi</i>
12:15 pm	Hysteroscopy Assisted Wedge Resection of an Interstitial Ectopic Pregnancy <i>E.L. Miller, L.A. Haworth, M.R. Bennett, A. Moore</i>
12:21 pm	Questions & Answers <i>All Faculty</i>
12:35 pm	Adjourn

Video Session 13

Natural Orifice / Hysteroscopy

11:30 am – 12:35 pm

Room: Willow Lake 5

Moderator: Martin Farrugia and Milind Telang

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:33 am	Novel Techniques for Deeply Infiltrated Endometriosis in the Rectum and Parametrium Via Robotic Notes <i>X. Guan, Z. Guan, J.R. Welch, G. Wu</i>
11:39 am	vNOTES Hysterectomy, Adnexectomy and Uterosacral Ligament Suspension: A Walk-through Guide <i>A. Zakhari, D. Nguyen, F.W. Mansour, J. Papillon-Smith, S. Krishnamurthy</i>
11:45 am	Novel Technique for Performing a Minimally Invasive Myomectomy: Robotic vNOTES Myomectomy <i>S. Sunkara, B. Thigpen, T. Koythong, X. Guan</i>
11:51 am	Management of Pelvic Organ Prolapse with or without Hysterectomy Via Transvaginal Robotic Notes High Uterosacral Ligament <i>J. Liu, Z. Guan, L. Tang, X. Guan</i>
11:57 am	vNOTES Under the Hood Technique of Hysterectomy in Obese Patient <i>S. Naval, R. Naval</i>
12:03 pm	Hysteroscopic Removal of Deeply Embedded IUD <i>P.C. Voigt, K. McEntee, E.M. Wagner</i>
12:09 pm	Intramymetrial Pregnancy <i>S.A. Munshi</i>
12:15 pm	Questions & Answers <i>All Faculty</i>
12:35 pm	Adjourn

New For Patients

Everything You Want to Know About the “F” Word: Fibroids, Facts, Fiction, and Fallacies.

11:30 am – 12:30 pm

Room: Willow Lake 1-2

Moderator: Linda Bradley, Jessica Opoku-Anane, Cara King, and Sukhbir Sony Singh

COURSE OUTLINE

The AAGL is committed to educating and empowering patients about their treatment options. For the first time in AAGLs history, on December 3, 2022, 11:30 am-12:30pm (MT), at this Global Congress, we will feature a free, one-hour, live Zoom workshop for patients titled: “Everything You Want to know about the “F” Word: Fibroids, Facts, Fiction, and Fallacies.”

Video Session 14

Urogynecology / Pelvic Floor Disorder

11:30 am – 12:35 pm

Room: Homestead 3/4

Moderator: Rachel Green and Bruce Kahn

COURSE OUTLINE

11:30 am	Welcome, Introduction and Course Overview
11:36 am	Robotic-Assisted Laparoscopic Repair of Iatrogenic Vesico-Vaginal Fistula <i>G. Duarte Ayala, G.K. Lewis, T.A. Dinh, A.H. Chen, S. EL Nashar</i>
11:42 am	Laparoscopic Nerve-Sparing Sacropexy: Tips and Tricks for a Safe and Anatomical Surgical Procedure <i>D. Mautone, G. Roviglione, R. Clarizia, C. Tricolore, M. Ceccarello, S. Baggio, M. Ceccaroni</i>
11:48 am	Revival of a Surgical Technique: Marsupialization of Female Urethral Diverticula <i>H. Winn, A. Merriman, G. Taylor</i>
11:54 am	Vaginal and Laparoscopic Repair of Vesico-Vaginal Fistulae: A Comparison of Techniques <i>J. Heusinkveld, O.O. Cardenas-Trowers</i>
12:00 pm	Congenital Dysplastic Kidney with Ectopic Ureter to the Uterine Cervix <i>R.M. Darvish, H. Winn, A.L. Merriman, B. Taylor</i>
12:06 pm	Robotic Nerve Sparing Uterosacral Ligament Suspension <i>M. Bagaria, J. Yi</i>
12:12 pm	Laparoscopic Left Ureteric Reimplantation for Post Caesarean Section Ureterovaginal Fistula <i>P.A. Palaskar, R.P. Palaskar, A.R. Gadkari, S.A. Korpenwar</i>
12:18 pm	Laparoscopic Uterovaginal Anastomosis for Cervical Agenesis and Upper Vagina. <i>O. De La O</i>
12:24 pm	Questions & Answers <i>All Faculty</i>
12:35 pm	Adjourn

Hosted by Drs. Linda Bradley, Jessica Opoku-Anane, Cara King, and Sukhbir Sony Singh, this workshop seeks to educate patients on state-of-the-art therapeutics and minimally invasive surgical options for myomectomy, hysterectomy, and hysterectomy, in addition to non-surgical options for fibroids. Presenters will share recent medical and surgical updates, help patients identify questions to ask their provider, and encourage strategies for self-care and self-advocacy throughout their fibroid journey. In addition to our panelists, two patient advocacy group founders, Sateria Venable, founder and CEO of the Fibroid Foundation, and Tanika Grey Valbrun, journalist and founder of the White Dress Project, will also

Surgical Tutorial 5

How to Provide Optimal Sexually Outcome for Your MIGS Patients, Starting Even Before Surgery

2:00 pm – 3:05 pm

Room: Colorado A



Chair: Jamal Mourad

Faculty: Shaïda Molly and Debra Wickman

Quality-of-life metrics have become increasingly important, as women are becoming more knowledgeable and even more empowered to expect improvement in aspects of their quality-of-life after surgery. This expectation goes beyond the goal of functional improvement, or physiologic symptom relief likely to be achieved by a surgical procedure. Conversely, patients certainly do not want to face a postoperative decline. Sexual satisfaction is integral to quality-of-life and there are core principles and steps to take to protect and optimize this precious commodity all along the way. A well-rounded surgeon not only attains excellence in operative skills, but also masters the integrative nature of patient care weaving that knowledge into pre- and post-surgical patient care. This course will impart practical knowledge around these crucial principles.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Describe the four-pronged approach to vaginal health: structural, hormones, blood flow/brain-mind, how each of these elements can be supported and, if ignored, how they can derail a good surgical plan; as well as the importance of vaginal integrity, how it can be impaired and why this matters for planning surgery (meds, toxins, endocrine disruptors, bad lubes, allergens, etc.); 2) Integrate strategies for how to nourish the vaginal epithelium and make it a healthier substrate to operate on; how to reduce dyspareunia using procedures/products/concepts; how to optimize blood flow for genital tissues (nitric oxide, red LED light); anatomic considerations for the female prostate and related surgery; and addressing sexual implications for nerve networks at the cervix/vaginal cuff; and 3) Discuss sexuality expectations with patients preoperatively to guide post-operative results; and encourage mind-body connection with the vagina to promote healing, reduce all manner of trauma, and empower your patients to be consistent with their self-care.

participate to explain the importance of advocacy and to promote the session to their constituents.

Through patient education, clear communication, answering questions, and showing videos of surgical procedures, patients will learn about their options, gain confidence in minimally invasive treatments, and come to understand the concept of fibroid pathophysiology. By demonstrating evidence-based options, this workshop will educate patients on fibroids, improve trust, and reduce fears. This webinar will be recorded and available on the patient focused page on AAGL.org beginning December 15, 2022.

Oral Session 9 Basic Science / Laparoscopy

2:00 pm – 3:05 pm
Room: Red Rock 6/7

Moderator: Julian Gingold and Randa Jalloul

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Surgical Skills Curriculum Satisfaction Among Current Obstetrics and Gynecology Residents <i>J.G. Putman, A.J. Hollis, T.P. Boren, A.M. Dizon</i>
2:10 pm	Impact of Trainee Involvement on Surgical Outcomes of Abdominal and Laparoscopic Myomectomy <i>O. Fajardo, E. Grebenyuk, K.F. Chaves, T. Ding, Z. Zhao, H.L. Curlin, L. Harvey</i>
2:17 pm	Time for an Education Revamp? A Cross-Sectional Multi-Institute Survey of FMIGS Program Directors and Fellows' Didactics Experiences <i>M. Ruhotina, C. Murphy, A. Wilcox, S.M. Kashani</i>
2:24 pm	Evidence-Based Recommendations for Referral and Consultation to a Minimally Invasive Gynecologic Surgeon: A Systematic Review <i>M.K.M. Shu, J. Sosa, H.D. Reyes, A. Eddib, A. Eswar</i>
2:31 pm	The Impact of Homemade Laparoscopic Box Trainers on Medical Student Surgical Skills: A Randomized Control Pilot Study <i>A. Tsuei, S. Linares</i>
2:38 pm	Meta-Analysis of Veress Needle Entry Versus Direct Trocar Entry in Gynecologic Surgery <i>G.J. Marchand, A. King, G. Brazil, H. Ulibarri, J. Parise, C. Coriell, A. Arroyo, S. Goetz, L. Govindan, C. Moir, K.M. Sainz</i>
2:45 pm	Not All Operative Time Is Created Equal: Operative Time in Relation to 30-Day Complications in Benign Laparoscopic Hysterectomies <i>D.M. Ikoma, M.M. Ikoma, M.L. Haugsdal</i>
2:52 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Oral Session 10 Adenomyosis / Pelvic Pain

2:00 pm – 3:05 pm
Room: Willow Lake 5

Moderator: Jason A. Abbott and Richard Cockrum

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Predicting Adenomyosis Diagnosis Based on MRI <i>C.O. Rees, M. van der Wiel, J. Nederend, A. Huppelschoten, M. Mischi, H.A.A.M. van Vliet, B.C. Schoot</i>
2:10 pm	Uterine Surgery and Risk of Adenomyosis: A Retrospective Study <i>E.A. Sendukas, R.L. Allen, L. Ford, A. Wilson, H. Xiao, L. Chao</i>
2:17 pm	Does Leuprolide Acetate Predict Successful Pain Relief after Hysterectomy and BSO in Endometriosis Patients? <i>J. Arruda, J. Sheeder, E. Dolph</i>
2:24 pm	Maintenance Dienogest Therapy Following Adjuvant GnRH Agonist Treatment after Uterus-Sparing Surgery in Adenomyosis <i>I.S. Chan, Y.J. Chen</i>
2:31 pm	Radiofrequency Ablation for Treatment of Adenomyosis: A Systematic Review <i>E. Lin, E.B. Wang, G.P. Adam, A.E. Porter, K.A. Kho</i>
2:38 pm	Reduction in Dysmenorrhea after the Minitouch Office Endometrial Ablation Procedure <i>S.G. Chudnoff, C.M. Basinski, A.G. Brenner, M. Akin, S. Reich, C. Sebestyen</i>
2:45 pm	Quantitative Ultrasound Measurement of Endometrial Waves in Adenomyosis Versus Women with Normal Uteri - the Waves Study <i>C.O. Rees, Y. Huang, A. De Boer, B. Wessels, D.A. Huppelschoten, B. Zizolfi, A. di Spiezo Sardo, N. Christoforidis, H.A.A.M. van Vliet, M. Mischi, B.C. Schoot</i>
2:52 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Panel 6 Minimally Invasive Surgery (MIS): An Occupational Hazard?

2:00 pm – 3:05 pm
Room: Red Rock 4/5



Chair: Jacqueline Wong
Faculty: Noor Dasouki Abu-Alnadi,
Paola A. Gehrig
Member Submitted

This session aims to delineate the ergonomic risks that surgeons face in the performance of MIS approaches and will present a discussion of the various instruments and devices that may impart an elevated ergonomic risk. We aim to empower MIG surgeons to adopt the surgical techniques that impart the least ergonomic risk to them in their surgical practices, thereby reducing their risk of occupational injury and prolonging their surgical longevity. A demonstration of operating room setup and a review of intraoperative ergonomic interventions will provide a practical and reproducible guide for surgeons to directly implement in their own surgical practices. We will provide a framework for surgeons to further teach their own trainees how to employ ergonomic techniques. Given that ergonomic risk particularly affects surgeons of a young age and female sex, this intervention also offers a way to help reduce this disparity encountered within our surgeon population.

Learning Objectives: At the conclusion of this activity, the participant will be able to: 1) Determine how ergonomic measures decrease work-related injury through the review of supporting scientific evidence; 2) Apply optimal laparoscopic and robotic surgical ergonomic principles that reduce surgeon risk; and 3) Integrate intraoperative modifications and instrument selections that optimize surgeon efficacy, efficiency, and safety.

COURSE OUTLINE

2:00 pm	Welcome and Introductions
2:05 pm	Robotic Ergonomics <i>P.A. Gehrig</i>
2:20 pm	Surgical Ergonomics: Laparoscopy <i>N.D. Abu-Alnadi</i>
2:35 pm	Laparoscopic Instrument Ergonomics <i>J. Wong</i>
2:50 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Video Session 15 Robotics

2:00 pm – 3:05 pm
Room: Red Rock 2/3

Moderator: Khashayar Shakiba and Ido Sirota

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Robotic Multidisciplinary Management of Extensive Deep Endometriosis <i>M. Andou, S. Yanai, T. Hada, K. Kanno, S. Sakate, M. Sawada, K. Kato, K. Shimada, Y. Yoshino</i>
2:09 pm	Robotic Tubal Reanastomosis Following Bilateral Partial Salpingectomy of Tubal Infundibula <i>A. Hillebrand, N. Dad, S. Jiggetts, P. Bral</i>
2:15 pm	Navigating the Obliterated Anterior Cul-De-Sac with a Novel Zavanelli of the Cervix <i>J. Jones, J.L. Hudgens, J.J. Woo</i>
2:21 pm	Da Vinci Xi Port Set-up and Docking Made Easy: 6 Steps to Success <i>R. Patel, S. Behbehani</i>
2:27 pm	Optimizing Surgeon Longevity: Ergonomics in Robotic Surgery <i>A. Kouri, C. Lipscombe, J. Wong, N. Abu-Alnadi</i>
2:33 pm	Single Port Robotic Hysterectomy after the Previous Robotic Radical Trachelectomy <i>B. Choi, K.H. Lee, G. Jung</i>
2:39 pm	Management of Gestational Choriocarcinoma with Combined Robotic Surgery and Suction D&C to Minimize Blood Loss <i>J.S. Saldivar</i>
2:45 pm	Management for Ureteral Injury during Laparoscopic or Robotic Hysterectomy: Minimally Invasive Strategies <i>M. Andou, S. Yanai, T. Hada, K. Kanno, S. Sakate, M. Sawada, K. Kato, K. Shimada, Y. Yoshino</i>
2:51 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Video Session 16 Laparoscopy / Pelvic Pain

2:00 pm – 3:05 pm
Room: Red Rock 8/9

Moderator: Cheryl B. Iglesia and JD Villegas-Echeverri

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Double Trouble: Tips for Colpotomy and Vaginal Cuff Closure with Uterine Bicollis and Longitudinal Vaginal Septum <i>S.E. Allen, S.M. Mansuria</i>
2:09 pm	Management of Hemorrhage during Dilatation and Evacuation by Mid-Procedure Laparoscopic Uterine Artery Ligation <i>R. Silverstein, A.B. McClurg, E.T. Carey</i>
2:15 pm	Laparoscopic Repair of Post-Coital Vaginal Perforation Communicating with the Abdominal Cavity <i>J.S. Kim, M.J. Wang, V. Wright</i>
2:21 pm	Laparoscopic Cerclage during Pregnancy <i>M.T. Siedhoff, K.N. Wright, A.L. Molina, R.J. Schneyer, M.D. Truong</i>
2:27 pm	Surgical Management of Ovarian Remnant Syndrome <i>E. Lee</i>
2:33 pm	Ovarian Remnant Syndrome Versus Retroperitonealized Ovary: Preoperative Evaluation and Surgical Management <i>A.K. Pitre, E. Mikhail</i>
2:39 pm	Laparoscopic Hemi-Hysterectomy for Excision of a Functional Rudimentary Uterine Horn Keys to Success <i>D. Encalada Soto, Z. Khan</i>
2:45 pm	The Pelvic Pain Exam for the ObGyn <i>A.M. Fox, G.T. Whitmore, S.R. Till</i>
2:51 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Video Session 17 New Instrumentation / Laparoscopy

2:00 pm – 3:05 pm
Room: Willow Lake 3/4

Moderator: Sami Gokhan Kilic and Barbara S. Levy

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Minimally Invasive ICG Sentinel Lymphonodectomy in Vulvar Cancer in 10 Steps <i>S. Mohr, S. Imboden, F. Siegenthaler, M.D. Mueller</i>
2:09 pm	Hysteroscopic Resection of Uterine Septum: An Updated Approach <i>C.S. Edmunds, E.F. Robinson, J.K. Moulder</i>
2:15 pm	Pure vNOTES Contained Power Morcellation: First Report <i>S. Naval</i>
2:21 pm	Easy Steps for Excision of a Deep Infiltrative Endometrial Bladder Nodule <i>J. Cruz, N. Albasha, M.A. Stuparich, S. Nahas, S. Behbehani</i>
2:27 pm	Minimally Invasive Management of a Second Trimester Miscarriage in a Patient with a Non-Communicating Uterine Horn <i>M.F. Sumida, S. Mokkarala, E. Nachman, D.M. Echevarria, C.L. Templeman, E.A. Lorange</i>
2:33 pm	Management of Cesarean Scar Pregnancy Via Laparoscopic and Transcervical Approaches <i>A.L. Melendez, A.K. Gonzalez, N. Salamat-Saber, R. Sauer, N. Chuba</i>
2:39 pm	Strategies to Minimize Blood Loss during Laparoscopic Hysterectomy for Management of Cesarean Scar Ectopic Pregnancy <i>B. Thigpen, A. Ajarapu, S. Sunkara, J. Kalsi, J.B. Nijjar, L. Chohan</i>
2:45 pm	Treatment of an Inguinal Lymphatic Fistula with Indocyanine Green <i>G. Zennaro, C. Vaineau, S. Mohr, S. Lanz, S. Imboden, M.D. Mueller</i>
2:51 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Video Session 18 Endometriosis / Robotics

2:00 pm – 3:05 pm
Room: Homestead 3/4

Moderator: John P. Lenihan and Martin Martino

COURSE OUTLINE

2:00 pm	Welcome, Introduction and Course Overview
2:03 pm	Diagnosis and Treatment of Vesico-Peritoneal Fistula after Robotic Surgical Treatment of Deep Endometriosis <i>M. Zlotnik, M. Corinti Son, G.G.F. Ramos, F.B. Beraldo, J.P. Manzano, G.A. Barison</i>
2:09 pm	Robotic Assisted - Laparoscopic Excision of Abdominal Wall Endometriosis <i>S. Endicott, K. Hunkler</i>
2:15 pm	Upper Vaginectomy for Rectovaginal Endometriosis: Manual Guidance for Deep Rectovaginal Dissection <i>H. Palin, G.K. Lewis, A.R. Carrubba</i>
2:21 pm	Fertility Preserving Robotic Surgery for Infiltrating Bladder Endometriosis <i>A. Bahadur</i>
2:27 pm	Robot-Assisted Excision of Abdominal Wall Endometrioma Utilizing Intra-Operative Ultrasound and Transabdominal Needle Placement <i>T. Mansour, S.W. Young, M.N. Wasson</i>
2:33 pm	Robotic Disc Excision with Sutured Repair for Full Thickness Deep Infiltrating Endometriosis of the Sigmoid Colon <i>N.S. Fogelson</i>
2:39 pm	Deep Infiltrating Endometriosis Affecting Ileocolic Anastomosis (J-Pouch): Surgical Approach <i>K.A. Stewart, D. Encalada, Z. Khan, T. Burnett, S. Kelley, A.G. Cope</i>
2:45 pm	Robotic-Assisted Laparoscopic Treatment of Diaphragmatic Endometriosis <i>V.A. Alvarenga Bezerra, M. Zlotnik, M. Corinti Son, L.M. Martins, G.G.F. Ramos, R.M. Marques</i>
2:51 pm	Laparoscopic Excision of Parametrium Endometriosis <i>P. Bellelis, M.D.C. Vieira, D.B. Caraca, M. Corinti Son</i>
2:57 pm	Questions & Answers <i>All Faculty</i>
3:05 pm	Adjourn

Panel 7 Social Media in Mainstream Medicine

3:15 pm – 4:20 pm
Room: Red Rock 4/5



Chair: Jessica A. Shepherd
Faculty: Shieva Ghofrany, Karen Y.S. Tang

In this provocative course, we will share insight into the way we communicate in the 21st century with the advent of social media. Social media use is pervasive and can be difficult and tricky to navigate. Throughout this course we will have live demos on social media integrations with multiple platforms and to discuss how to be engaging and safe, while allowing patients to seek medical knowledge and health-related content through these platforms.

With thought leaders in this industry, this course will show how social media and healthcare can be a powerful combination. We will look at the many benefits of using social media in healthcare. We also provide some tips on how to keep your social channels engaging, compliant, collaborative and how to diversify your portfolios in social media.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Recognize how social media and healthcare can be a powerful combination; 2) Cite the many benefits of using social media in healthcare; and 3) Integrate information learned on how to keep social channels engaging, compliant, and collaborative, and how to diversify your portfolios in social media.

Panel 8 Tele mentoring & Artificial Intelligence

3:15 pm – 4:20 pm
Room: Red Rock 6/7



Co-Chairs:
Gaby N. Moawad,
Michel Canis,
Nicolas Bourdel

Technology has been integrated into every facet of human life, and whether it is completely advantageous remains unknown, but one thing is for sure; we are dependent on technology. Medical advances from the integration of artificial intelligence, machine learning, and augmented realities are widespread and have helped countless patients. The purpose of this talk is to highlight the different technologies currently being utilized in a variety of surgical specialties.

Learning Objectives: *At the conclusion of this activity, the participant will be able to:* 1) Recognize about the evolution of technology and surgery; 2) Cite the different technologies applied in surgery; and 3) Utilize a sneak-peak into the future of automated surgery.

COURSE OUTLINE

3:15 pm	Welcome, Introductions and Course Overview <i>G.N. Moawad</i>
3:20 pm	Innovation and Fake News <i>Michel Canis</i>
3:35 pm	From Virtual to Augmented Reality and AI: Basic concepts <i>G.N. Moawad</i>
3:50 pm	Pave the Way for Autonomous Surgery <i>N. Bourdel</i>
4:05 pm	Questions & Answers <i>All Faculty</i>
4:15 pm	Adjourn

Surgical Tutorial 6 Laparoscopic Hysterectomy

3:15 pm – 4:20 pm
Room: Colorado A



Chair: Hye-Chen Hur
Faculty: Sangeeta Senapati, Kelly N. Wright
Member Submitted

Learning Objectives: At the conclusion of this activity, the participant will be able to: 1) Identify complex cases to allow for appropriate preoperative counseling and surgical planning; 2) Employ intraoperative strategies to minimize blood loss during complex laparoscopic hysterectomies for large mass size or anatomically challenging fibroids; and 3) Integrate tips and tricks to minimize complications like visceral organ injury or cuff dehiscence during complex laparoscopic hysterectomies presenting with extensive adhesions or advanced endometriosis

COURSE OUTLINE

3:15 pm	Welcome, Introductions and Course Overview <i>H.C. Hur</i>
3:20 pm	Tackling the Complex Laparoscopic Hysterectomy (Adhesions, Endometriosis): Breaking it Down to 'Doable' Steps <i>K.N. Wright</i>
3:35 pm	Tackling the Complex Laparoscopic Hysterectomy (Large mass size, Challenging Fibroids, and Hypervascular Uterus): Optimizing Success and Avoiding Common Pitfalls <i>S. Senapati</i>
3:55 pm	Specimen extraction, Cuff closure, and Management of Cuff Complications <i>H.C. Hur</i>
4:05 pm	Questions & Answers <i>All Faculty</i>
4:15 pm	Adjourn

Oral Session 11 Laparoscopy / Hysteroscopy

3:15 pm – 4:20 pm
Room: Red Rock 8/9

Moderator: Franklin D. Loffer and Anne Porter

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Retrograde Bladder Filling after Outpatient Gynecologic Surgery: A Systematic Review and Meta-Analysis <i>P.S. Thiel, S. Mathur, A. Zakhari, J. Matelski, C. Walsh, A. Murji</i>
3:25 pm	Predictive Model for Complications in Minimally Invasive Hysterectomy: A Retrospective Single Cohort Analysis <i>M. Bruno, F. Legge, A. Serva, F. Di Leo, M. Guido</i>
3:32 pm	Laparoscopic Management of Abnormally Invasive Retained Products of Conception <i>M. Mara, A. Richtarova, Z. Lisa, K. Hlinecka, B. Boudova</i>
3:39 pm	What Do Women Want? Hysterectomy <i>L. Bar-El, S.A. Shobeiri</i>
3:46 pm	Laparoscopic Uterosacral Bupivacaine Injection during Minimally-Invasive Hysterectomy: A Single-Blinded Randomized Controlled Trial <i>A.S. Frost, J.R. Kohn, M. Le Neveu, T.K. Brah, O. Okonkwa, K. Simpson, H.Y. Wu, K.E. Patzkowsky, K.C. Wang</i>
3:53 pm	Risk Factors Associated with Blood Transfusion in Laparoscopic Hysterectomy <i>H.R. Haber, A. Pelletier, S.O.A. Leung, C. Feltmate</i>
4:00 pm	Intrauterine Anesthesia in See and Treat Hysteroscopy – A Double Blind, Placebo Controlled Randomized Trial <i>O. Barel, M. Maslenko, M. Sharvit, N. Stolovitch, S. Weinberg, M. Pansky</i>
4:07 pm	Surgical and Reproductive Outcomes in Patients with Complete Septate Uterus and Cervical Anomalies after Metroplasty <i>B. Zizolfi, A. Di Spiezio Sardo, A. Virgilio, M. Fabbri, A. Manzi, P. Casadio</i>
4:14 pm	Questions & Answers <i>All Faculty</i>
4:20 pm	Adjourn



Oral Session 12 Endometriosis

3:15 pm – 4:20 pm
Room: Willow Lake 3/4

Moderator: Daniele Mautone and Mariona Rius

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Laparoscopic Nerve Detrapment and Neurolysis of Somatic Pelvic Nerves in Deep Endometriosis: Prospective Study of 433 Patients <i>R. Clarizia, M. Manzone, G. Roviglione, F. Bruni, M. Ceccarello, D. Mautone, G. Staffa, C. Zorzi, M. Ceccaroni</i>
3:25 pm	Determinants of Perioperative Complications in Day-Surgery for Endometriosis: A Retrospective Cohort <i>F. Bahrami, S. Maheux-Lacroix, O. Bougie, A. Boutin</i>
3:32 pm	The Use of Indocyanine Green (ICG) in the Detection of Endometriosis-Related Fibrosis and Inflammatory Changes <i>C.Z. Mabini, M.T. Tam</i>
3:39 pm	Clinical Outcomes Following Hysterectomy with vs. without Ovarian Preservation for Endometriosis <i>K.H. Lou, M. Fiorillo, D. Exume, N. Razavi, C. Stetter, A.R. Kunselman, K.A. Riley</i>
3:46 pm	Virtual Mindfulness Therapy for the Management of Endometriosis Chronic Pelvic Pain: A Novel Delivery Platform to Increase Access to Care <i>E. Miazga, H. Starkman, E. Skolnik, N. Schroeder, B. Yarranton, A. Nensi, C. McCaffrey</i>
3:53 pm	#Endometriosis Influencers on Instagram: Who Are They and What Are They Posting? <i>S.N. Shiplo, M. Gholiof, N. Sarin, M. Leonardi</i>
4:00 pm	MRI Visualization of Bowel Endometriosis: A Pilot Study <i>Y. Zheng, J. Ruan, S. Gu, X. Yi, C. Xu</i>
4:07 pm	Risk of Repeat Laparoscopy Following Surgical Diagnosis of Endometriosis: Effects of Hysterectomy, Oophorectomy, & Psychiatric Disease <i>N. Pondugula, S. Sayeed, G. de Queiroz Campos, H.J. Li, H.S. Taylor, Y. Cho</i>
4:14 pm	Questions & Answers <i>All Faculty</i>
4:20 pm	Adjourn

Video Session 19 Fibroids

3:15 pm – 4:20 pm
Room: Red Rock 2/3

Moderator: Joseph Chen and Suketu M. Mansuria

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Making Use of the Tools in the Toolkit: Combined Transcervical Radiofrequency Ablation and Hysteroscopic Myomectomy <i>G.K. Lewis, H. Palin, G. Duarte Ayala, A.R. Carrubba</i>
3:24 pm	tagged Colpotomy for the Management of the Large Myomatous Uterus <i>B.L. Baxter, N.S. Parra, A.P. Advincula, C. Arora</i>
3:30 pm	Laparoscopic Myomectomy of Vaginal Leiomyoma: A Video Case Report <i>I.N. Furuie, P. Delgadillo, D. Ramos, O. Luengo, M.T. Zomer, W. Kondo</i>
3:36 pm	Laparoscopic-Assisted Myomectomy during the Second Trimester of Pregnancy <i>M. O'Leary, M.B. Sexter, A.P. Sanders</i>
3:42 pm	The Roeder Knot: An Innovative Tool for Laparoscopic Myomectomy <i>Z.A. Kopelman, T. Baker, C.I. Ramirez</i>
3:48 pm	Cervical Fibroids - Key Surgical Steps <i>F. Mak, A. Candelaria, T. Baker, C.I. Ramirez</i>
3:54 pm	Enhancing Myomectomies with 3D Uterine Modeling <i>E.L. Stockwell</i>
4:00 pm	Laparoscopic Myomectomy Simulation Model for Post-Graduate Learners: Mastering Enucleation <i>E. Reina, R.H. Cockrum, F.F. Tu, S. Senapati</i>
4:06 pm	Questions & Answers <i>All Faculty</i>
4:20 pm	Adjourn

Video Session 20 Basic Science & Robotics

3:15 pm – 4:20 pm
Room: Willow Lake 5

Moderator: Marisa Dahlman and Liselotte Mettler

COURSE OUTLINE

3:15 pm	Welcome, Introduction and Course Overview
3:18 pm	Uterine Artery Occlusion Techniques: Tips and Tricks... and Some Pitfalls <i>E. Miller, L.A. Haworth, J. Jones, J.J. Woo</i>
3:24 pm	From the Pelvis to the Sciatic Nerve: Anatomy of the Pelvic Sidewall <i>A. Qurashi, M.A. Stuparich, S. Nahas, S. Behbehani</i>
3:30 pm	Building a Hysteroscopic Simulation Model <i>M.T. Tam</i>
3:36 pm	Laparoscopic Suturing from Any Port Configuration: Techniques for Both the Right- and Left-Handed Surgeon <i>A.B. McClurg, Y. Qu, M. Louie</i>
3:42 pm	Robotic Trachelectomy: Surgical Techniques and Principles <i>M. Bagaria, P.M. Magtibay, J. Yi</i>
3:48 pm	Ureteral Tract Injuries: Management and Post- Operative Considerations <i>T. Mansour, Y.S.S. Lee, P.M. Magtibay, M. Louie</i>
3:54 pm	Surgical Tips for Robotic Transabdominal Cerclage Placement <i>B. Roberts, V. De Assis, E. Mikhail</i>
4:00 pm	Use of Vascular Clips to Ligate Uterine Arteries for Dissection of Anterior Lower Uterine Wall Outpouching from Bladder <i>A. Dosaj, J. Vu</i>
4:06 pm	The Fine Balance between Radical and Functionally Conservative Excision of Endometriosis <i>P. Sarkar, E. Mikhail</i>
4:12 pm	Questions & Answers <i>All Faculty</i>
4:20 pm	Adjourn

CME GENERAL SESSION V

Saturday, December 3, 2022

4:30 pm – 6:00 pm • Colorado A

AAGL Business Meeting

4:30 - 5:00 pm

A Year in Review

Mauricio S. Abrão, President

2023 Election Results

Ted T.M. Lee, Nominating Chair

Thank You to Outgoing Board

Mauricio S. Abrão, President

Induction of Andrew I. Sokol, 2023 AAGL President

MED TALKS

Surgical Catastrophe. “Chicken Soup” for the Second Victim

5:00 pm – 5:15 pm



Jose “Tony” Carugno, MD

Dr. Jose “Tony” Carugno is Board Certified in Ob/Gyn with fellowship training in Advanced Minimally Invasive Gynecologic Surgery. He completed his Medical School at the Universidad de Carabobo, Valencia, Venezuela and his Ob/Gyn residency at the Maternidad Concepcion Palacios. Dr. Carugno also completed an Ob/Gyn residency at Staten Island University Hospital and completed Fellowship training in Advanced Gynecologic Surgery and Robotics at Florida Hospital Orlando (AAGL Fellowship). Dr. Carugno currently functions as Director of the Minimally Invasive/Robotic Gynecologic Surgery Division at the University of Miami in Miami, FL. He is the USA Board Editor/Founder of the Hysteroscopy Newsletter of the Global Community of Hysteroscopy and on the Editorial Board for the Journal of Minimally Invasive Gynecology (JMIG) and the Journal of the Society of Laparoscopic and Robotic Surgeons (JSLS).

Surgical complications resulting in suboptimal surgical outcomes are unavoidable. The psychological impact of being involved in a case with adverse surgical outcome could be devastating for the members of the health care

team directly involved in the patient’s care. Intraoperative complications are occasionally directly attributable to surgeon’s technical errors or suboptimal intraoperative judgment. To prevent the potential devastating psychological consequences that cases with adverse outcome pose on the surgeons involved, it is essential to provide adequate support to the individuals involved in the care of patients resulting in suboptimal surgical outcomes. The goal of this MED Talk is to create awareness of the mental health impact, and to describe actions to help physicians involved in the care of patients resulting in intraoperative adverse events to recover from their traumatic experience.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) Identify the psychological impact of adverse events on health care providers; 2) Recognize signs and symptoms of second victims’ individuals; 3) Implement a strategy to minimize the psychological impact of adverse events on health care providers; and 4) Elaborate a plan to assist physicians involved in cases resulting in adverse surgical outcomes.



Xiaoming Guan, MD

Transvaginal NOTES with Endometriosis Resection

5:15 pm – 6:00 pm • *Pre-recorded Surgery*

Xiaoming Guan MD, PhD, graduated from AAGL MIGS fellowship in 2011. Dr. Guan is dedicated to advancing minimally invasive surgery (MIGS) through creating and teaching innovative surgeries. In the process, he has received numerous awards, including the ACOG CREOG National Faculty Award, Master Gynecologic Surgeon, and the AAGL Golden Hysteroscopic award. As a meeting Chair, he has successfully held three international Nature Orifice Transluminal Endoscopy Surgery (NOTES) conferences in China, which promote the development of single-incision gynecology and NOTES surgeries. Additionally, he has trained over 600 MIGS surgeons in single-site and NOTES techniques. Finally, his team developed a novel technique for NOTES sacrocolpopexy;

while simultaneously specializing in the MIGS treatment of endometriosis, uterine fibroids, etc. He is currently serving as Professor, Division Chief, and Fellowship Director of Minimally Invasive Gynecologic Surgery in the Department of Obstetrics and Gynecology at Baylor College of Medicine in Texas.

This case will demonstrate transvaginal NOTES resection of deeply infiltrated endometriosis. A combination of TVH and vNOTES hysterectomy was initially followed by vNOTES resection of pelvic side wall endometriosis with ureterolysis and bowel endometriosis. Participants will learn tips and tricks to place a port, position a patient, and dock a robot. The surgeon will also highlight the principles of ergonomics in vNOTES surgery.

AGL 2022

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AN EVENING



OF ELEGANCE

WHITE - TIE AFFAIR

SATURDAY, DECEMBER 3, 2022

8:00 PM - 12 MIDNIGHT

JUNIPER BALLROOM, LEVEL 1

TICKETS: \$245

ATTIRE: WHITE-TIE/BLACK-TIE (OPTIONAL)



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- Energy Sources
- Operating Room Set up and Patient Positioning
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- Laparoscopic Procedures and Hysteroscopic Procedures
- Laparoscopic Complications, Hysteroscopy Complications, and Special Considerations

Detailed program information, including module highlights and faculty: <https://www.aagl.org/emigs/>

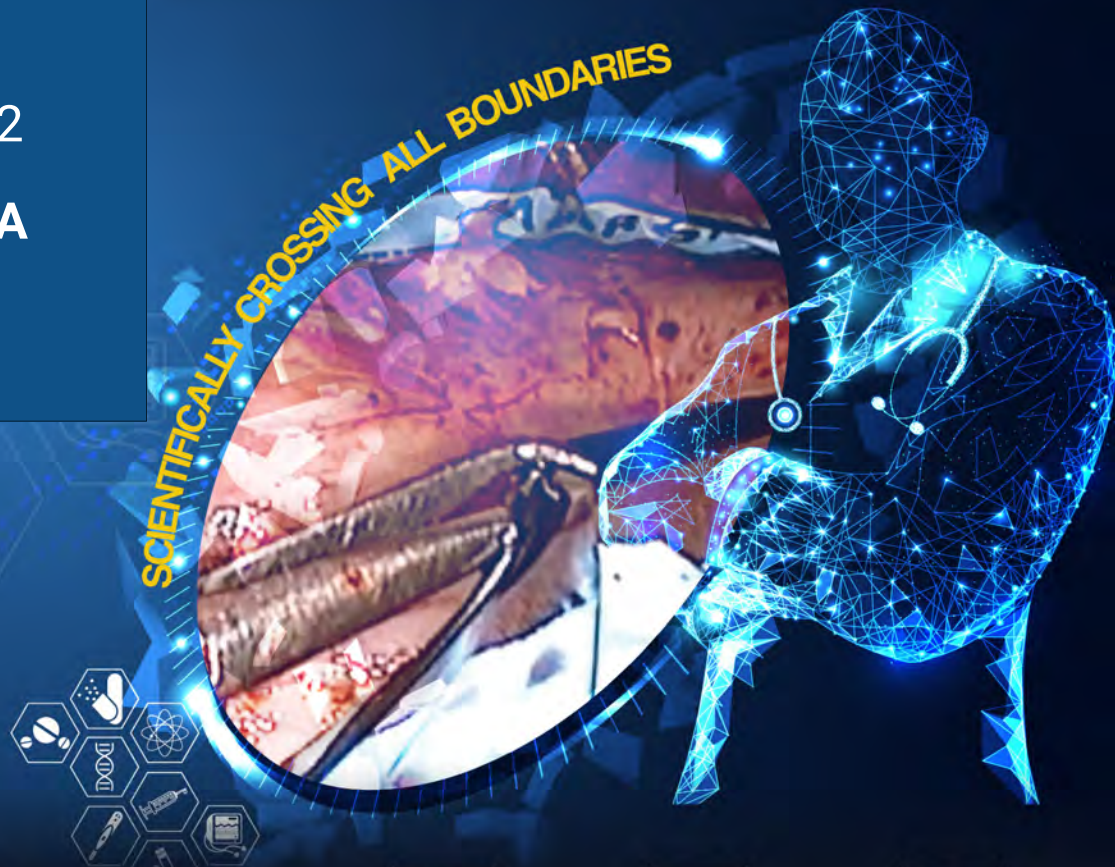




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CME GENERAL SESSION VI

Sunday, December 4, 2022

9:00 am – 11:00 am • Colorado A

MED TALKS



Angela Chaudhari, MD

Hopes, Dreams & Surgery... Discovering Your Best Self

9:00 am – 9:15 am

Angela Chaudhari, MD is an Associate Professor and Vice Chair of Faculty Development in the Department of Ob/Gyn at Northwestern University's Feinberg School of Medicine in Chicago. She serves as the Chief of Gynecology and Gynecologic Surgery at Northwestern Medicine overseeing quality and clinical operations for the gynecology service line. Dr. Chaudhari is the founder and director of Northwestern Medicine's P2P Network, a peer support program designed to support healthcare providers through stressful patient encounters, litigation and adverse events. She is also a well-respected surgical educator and surgical coach and serves as the Associate Director of the Fellowship in MIGS. She is a co-founder and executive member of the Gender Pathways program at NM, providing gender affirming surgical transition. She is a certified organizational change and leadership coach for physicians and healthcare executives interested in professional optimization in the following arenas: career advancement and transition, team building, and operational leadership.

Work stress impacts physicians at all levels: students, trainees, junior and senior physicians, with more than 53% of Ob/Gyns reporting physician burnout on a recent survey. Burnout is caused by a series of organizational determinants that often feel out of your control. But, by identifying your stressors and triggers for burnout, you can begin to take back that control and create a sense of personal meaning in the workplace. By reflecting on your frustrations and prioritizing your own hopes, dreams and values, you can begin to shape your professional life to mirror your personal needs.

Join us for a reflective morning discussion on life-long learning, growth mindset and goal setting to give you the tools to begin to shape your own professional trajectory.

Learning Objectives: *At the conclusion of this course, the participants will be able to:* 1) To identify the common signs of burnout in themselves and their colleagues at different points in their careers; 2) To articulate their own career aspirations to better reflect on what is required for growth and change; and 3) To prioritize their career goals to match their personal and professional values.



**Neeta Warty, MD,
DGO, FRCOG**

Total Laparoscopic Hysterectomy with Bilateral Salpingectomy

9:15 am – 10:00 am • *Live Surgery*

Dr. Neeta Warty is a top specialist in Obstetrics and Gynaecology in Mumbai with over 41 years of experience. She earned her medical degree at the University of Mumbai, in 1985 and then her Diploma in Gynecology and Obstetrics (DGO) from the College of Physicians and Surgeons. She is currently working in PD Hinduja National Hospital and Medical Research Centre and as a leading robotic surgeon in Mumbai, she specializes in advanced laparoscopic surgeries like Laparoscopic Pelvic Floor Repair, Laparoscopic Hysterectomies for gynecological malignancies and corrective surgeries for uterine malformations. She has performed more than 10,500 endoscopic surgeries and is credited with removing the heaviest fibroid in the world, weighing 3.4 kilograms, which was acknowledged in the Guinness and Limca Books of World Records. She performs entire uterine cancer operations by means of keyhole surgery and has trained more than 800 national and international surgeons in the last twelve years. She is also actively involved in original research on the detection of Endometriosis in association with the National Institute for Research in Reproductive health (NIRRH). Dr. Warty has handled

numerous complex medical cases and is known for attention to detail, accurate diagnosis, and treating patients with empathy.

Dr. Warty will present a case of Total Laparoscopic Hysterectomy for a 50-year-old with menorrhagia, dysmenorrhoea, and pressure symptoms secondary to large uterine fibroids. The patient has an enlarged uterus corresponding to 32 weeks and has undergone one caesarean section in the past.

Through this presentation, participants will familiarise themselves with the anatomical structures at the lateral pelvic wall when normal anatomy is distorted by an enlarged uterus, be able to outline the path of the ureters and consequently minimise ureteric injuries in pelvic surgeries, identify and ligate the uterine artery at various sites along its course to effectively minimise bleeding during surgery and reduce absolute blood loss by promoting drainage of blood accumulated in the uterus using a combination of suspended uterine blood supply and patent venous channels.



Marcelo Vieira, MD

Laparoscopic Paraaortic Dissection in Oncology

10:00 am – 10:45 am • *Pre-recorded Surgery*

Dr. Marcelo Vieira, is a Surgical Oncologist and Coordinator of the Department of Gynecologic Oncology at Beneficência Portuguesa de São Paulo in Brazil where he founded a Methodology of Surgery Course and a Cadaveric Dissection Course. Dr. Vieira completed his PhD in Oncology Health and a residency in Surgical Oncology at the Barretos Cancer Hospital in Brazil along with a residency in General Surgery in Taubaté, São Paulo. He has authored more than 40 peer-reviewed articles and 5 book chapters, along with providing numerous presentations at national meetings. His areas of interest include minimally invasive surgery, fertility preservation in women with gynecologic malignancies, and novel approaches to the surgical staging of patients with gynecologic cancers. Dr. Marcelo Vieira serves as a mentor and host to numerable international surgeons who seek to expand their expertise and skills in minimally invasive surgery. He is a gifted proctor of robotic surgery and has participated in the certification process of 15 colleagues.

In this pre-recorded surgery, Dr. Vieira will demonstrate a laparoscopic paraaortic dissection in

oncology for a 69-year-old patient with endometrial cancer after TLH and adjuvant radiotherapy. The patient was a Jehovah's Witness and did not accept to receive blood transfusions during this surgery. She has several large lymph nodes in the para-aortic and pelvic regions after 18 months of non-cancer surgical treatment.

Learning objectives: *At the conclusion of this course, the participants will be able to:* 1) Recognize the step-by-step surgical systematization of para-aortic lymphadenectomy; 2) Identify the fundamental anatomical limits to perform this surgery in a systematic way; 3) Acquire tips and tricks to avoid serious injuries during this surgical procedure; 4) Realize the reproducibility of the technique if you do this procedure in a standardized way; and 5) Decrease the time to perform this surgery, even in cases with a large volume of disease

Closing Ceremony

10:45 am – 11:00 am • Andrew I. Sokol, MD

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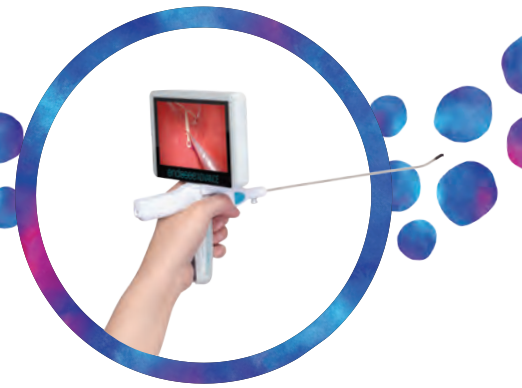
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Scientific Virtual Posters will be available for viewing from 8:00 am - 2:30 pm in Aurora Exhibit Hall and anytime online at Congress.AAGL.org during the Global Congress from Thursday, December 1st through Saturday, December 4th.

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Thursday, December 1, 2022

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Friday, December 2

7:45 am – 2:30 pm	Exhibit Hall Opens
7:45 am	Breakfast
8:00 am – 9:30 am	Suturing Cafe
12:30 pm – 1:30 pm	Boxed Luncheon
1:00 pm – 1:45 pm	Product Theaters
1:00 pm – 2:30 pm	Suturing Cafe
2:30 pm	Exhibit Hall Closes

Saturday, December 3

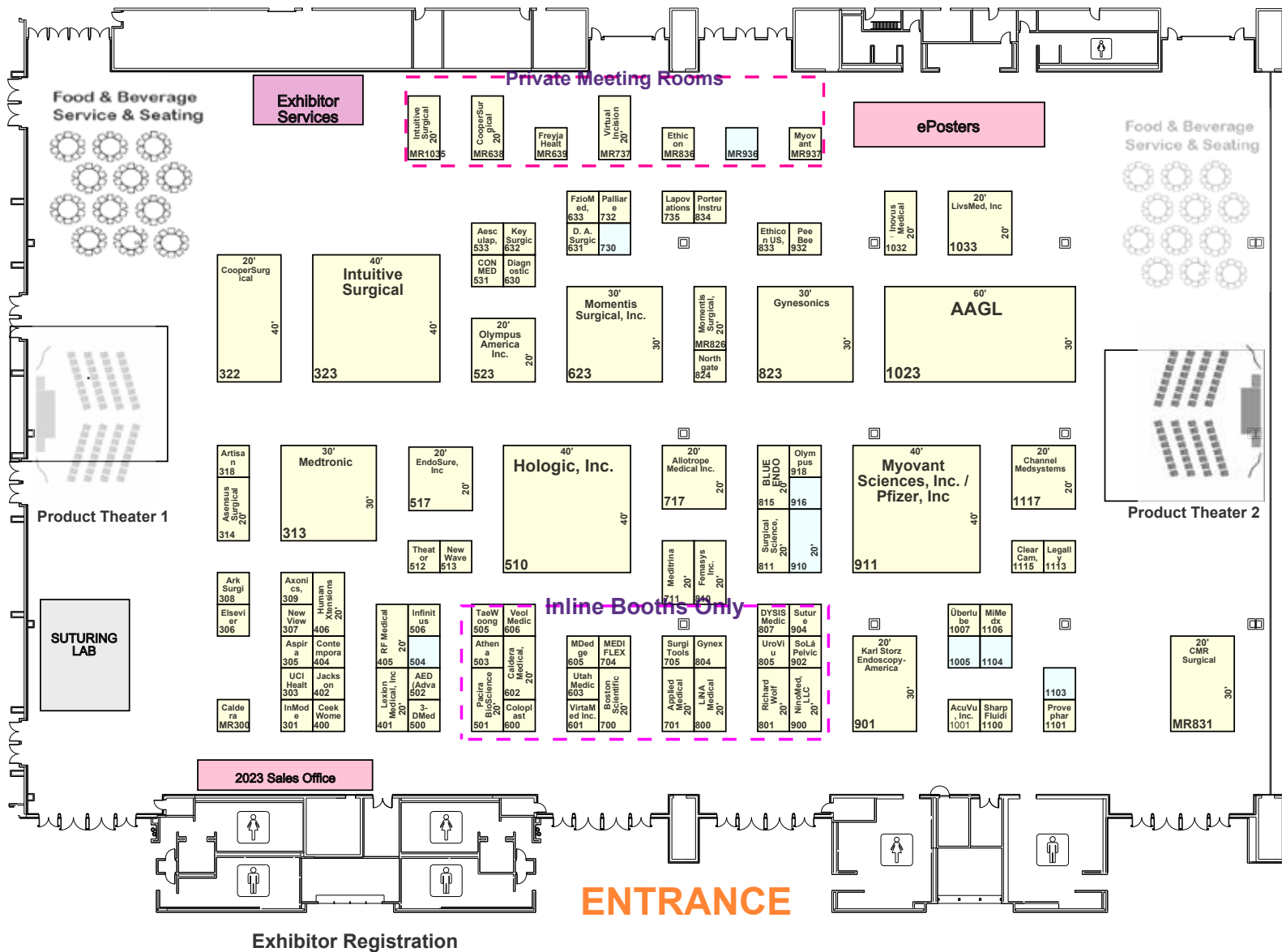
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Asensus Surgical is evolving traditional laparoscopy and robotic surgery by pioneering the use of augmented intelligence to advance real-time decision making and enhance surgery in ways that matter. The Senhance® Surgical System, powered by the Intelligent Surgical Unit™ (ISU™), incorporates the power of digital tools to provide real-time clinical intelligence and assistive guidance to shape a new era of surgery – Performance-Guided Surgery™.

Aspira Women's Health

305

12117 Bee Caves Road, Building III, Suite 100
Austin, TX 78738
508.341.9331
www.aspirawh.com

EXHIBITOR DESCRIPTIONS

Athena Surgical 503	Caldera Medical, Inc. 602 & MR300	ClearCam, Inc. 1115
<p>6110 Blue Circle Drive, Suite 280 C/O MN Recruiters Minnetonka, MN 55343 952.258.3282 www.athenasurgical.com</p> <p>Athena Surgical's goal is to bring innovation to midurethral slings that have been the standard of care for over 20 years. We worked alongside leading stress urinary incontinence surgeons to reengineer a new RMUS System to meet the lifestyle needs of patients, the clinical and safety requirements of physicians and the economic realities of today's healthcare environment.</p>	<p>4360 Park Terrace Drive Westlake Village, CA 91361 818.879.6555 www.calderamedical.com</p> <p>Caldera Medical is a medical device company solely focused on women's health with a commitment to "Improving the Quality of Life for Women!" We develop, build and market best in class surgical products for the treatment of Stress Urinary Incontinence, Pelvic Organ Prolapse, Polyps and Fibroids. We work closely with surgeons to help those here at home, as well as women around the world, through our humanitarian programs to give them the access to the education and treatment they deserve.</p>	<p>2101 E. St. Elmo Road, Building 1, Suite 100 Austin, TX 78744 888.863.8128 www.clearcam-med.com</p> <p>The Kelling™ Device provides continuous vision and clarity throughout laparoscopic procedures without removing the scope from the body cavity. The swift tip cleans the distal lens of fog, debris, cautery, and fluid with a simple twist.</p>
Axonics, Inc. 309	Ceek Women's Health 400	CMR Surgical MR831
<p>26 Technology Drive Irvine, CA 92618 866.722.5344 www.axonics.com</p> <p>Axonics® is dedicated to improving the quality of life of people suffering from bladder and bowel dysfunction, conditions that impact the lives of tens of millions of adults globally. The Company's products include the Axonics Sacral Neuromodulation System designed to treat overactive bladder and fecal incontinence and the Bulkamid® hydrogel designed to treat women with stress urinary incontinence. For more information, visit www.axonics.com and www.bulkamid.com.</p>	<p>2175 NW Raleigh Street, Suite 110 Portland, OR 97210 971.232.5029 www.ceekwomenshealth.com</p> <p>Advances in women's healthcare continue to lag far behind those seen in other healthcare fields. We know the experience can be better for both patients and providers. Our goal is to address these unmet needs and develop products that transform every patient's experience in the exam room. At Ceek Women's Health, we believe a human-centered design approach leads to products that improve gynecological care for all.</p>	<p>1 Evolution Business Park Milton Road Cambridge CB24 9NG United Kingdom 44.012.237.5530.0 www.cmrsurgical.com</p> <p>CMR Surgical is the UK's leading surgical robotics company. Our ambition is to extend the benefits of minimal access surgery to millions more people every year. Our next -generation robotic system, Versius, has been designed to significantly increase the volume and range of supported procedures, making the benefits of robotic minimal access surgery universally accessible and affordable. Versius is not cleared by the FDA and is not commercially available for sale in the USA.</p>
BLUE ENDO 815	Channel Medsystems 1117	Coloplast Corp. 600
<p>8097 Flint Street Lenexa, KS 66214 800.233.8448 www.blueendo.com</p>	<p>2919 7th Street Berkley, CA 94710 510.338.9301 www.cerene.com</p>	<p>1601 W River Road Minneapolis, MN 55411-3431 800.258.3476 www.us.coloplast.com</p> <p>Making life easier for people with intimate healthcare needs, Coloplast is a leading global manufacturer and marketer of innovative medical devices for the management and treatment of urological conditions to include stress urinary incontinence, pelvic organ prolapse, kidney stones and ED. Products include the new Titan® Touch, Restorelle®, Altis®, and ReTrace®.</p>
Boston Scientific 700	Bronze Corporate Sponsor Channel Medsystems	CONMED Corporation 531
<p>100 Boston Scientific Way Marlborough, MA 01752 508.683.4227 www.bostonscientific.com/en-US/medical-specialties/female-pelvic-medicine.html</p> <p>Boston Scientific has been committed to helping you treat pelvic floor disorders since 1995. We continue to invest in delivering the most comprehensive clinical research and most-studied portfolio of pelvic floor products in the industry, so you can feel confident you're providing your patients with the best therapy options.</p>	<p>Bronze Corporate Sponsor Channel Medsystems' mission is to empower every woman to take control of her health journey and live her best life. Channel develops easy-to-use, safe, and cost-effective medical devices, resulting in exceptional outcomes and superior patient comfort that are accessible to all women. It's technology, Cerene® Cryotherapy, is a well-tolerated in-office endometrial ablation that significantly reduces heavy menstrual bleeding, while preserving uterine cavity access for future diagnostic evaluations.</p>	<p>6455 S Yosemite Street, Suite 800 Greenwood Village, CA 80111 239.207.0300 www.conmed.com</p> <p>Making life easier for people with intimate healthcare needs, Coloplast is a leading global manufacturer and marketer of innovative medical devices for the management and treatment of urological conditions to include stress urinary incontinence, pelvic organ prolapse, kidney stones and ED. Products include the new Titan® Touch, Restorelle®, Altis®, and ReTrace®.</p>

EXHIBITOR DESCRIPTIONS

Contemporary OB/Gyn 404	DYSIS Medical Inc. 307	Femasys, Inc. 810
<p>2 Clarke Drive, Suite 100 Cranbury, NJ 08512 609.716.7777 www.contemporaryobgyn.net</p> <p>For nearly 50 years, busy practitioners have trusted Contemporary OB/GYN to translate the latest research into outstanding patient care. With critical thinking from top academic physicians, we are dedicated to providing readers with evidence-based information on scientific advances in a clinically useful, compellingly illustrated format. Learn more at ContemporaryOBGYN.net</p>	<p>24 Superior Drive, Suite 400 Natick, MA 01760 844.397.4763 www.dysismedical.com</p> <p>DYSIS® is computer-aided colposcopy with innovative cervical mapping that quantifies acetowhitening and creates the color-coded DYSISmap™ to help healthcare professionals detect cervical lesions. The IMPROVE-COLPO study demonstrated an increased detection of patients with CIN2+ by 44% when the DYSISmap was used for biopsy selection after a thorough visual colposcopic assessment. High-resolution images and video (including exam playback) help improve documentation and patient communication.</p>	<p>3950 Johns Creek Court, Suite 100 Suwanee, GA 30024 770.500.3910 www.femasys.com</p> <p>Femasys is a biomedical company aiming to meet women's needs worldwide by developing a suite of product candidates that include minimally invasive, in-office technologies for reproductive health.</p>
CooperSurgical 322 & MR638	Elsevier, Inc. 306	FzioMed, Inc. 633
<p>75 Corporate Drive Trumbull, CT 06611-1350 203.601.5200 www.coopersurgical.com</p> <p>Silver Corporate Sponsor For more than 25 years, CooperSurgical has been a leader in manufacturing, marketing a wide range of trusted and innovative brands that have assisted clinicians in advancing the standard of health care for women and families worldwide. CooperSurgical is at the forefront of delivering innovative assisted reproductive technology and genomic solutions that enhance the work of ART professionals to the benefit of families.</p>	<p>1600 JFK Boulevard, Suite 600 Philadelphia, PA 19103 817.734.4998 www.us.elsevierhealth.com</p> <p>Elsevier is a world-leading provider of information solutions that enhance the performance of science, health, and technology professionals, empowering them to make better decisions, and deliver better care.</p>	<p>231 Bonetti Drive San Luis Obispo CA, 93401-7376 805.546.0610 www.fziomed.com</p> <p>FzioMed develops and commercializes absorbable surgical biomaterials based on its patented polymer science, for use in applications including spine, orthopedics, tendon, peripheral nerve, gynecology and general surgery. Oxiplex/IU® Adhesion Barrier Gel for Intrauterine Surgery serves to separate surgically traumatized opposing tissue surfaces in the uterine cavity. Other FzioMed adhesion barriers include Oxiplex® spine gel, Oxiplex/AP® and Dynavisc.</p>
D. A. Surgical 631	EndoSure, Inc 517	Gynesonics, Inc. 823
<p>11110 Kinsman Road, Suite 50 Newbury, OH 44065 800.261.9953 www.da-surgical.com</p> <p>We exist to eliminate operating room acquired patient positioning injuries. Ask how you can improve safety, increase efficiencies, & avoid positioning-related injuries with innovative patient positioning devices for MIS and robotic surgery: TrenGuard Trendelenburg Patient Restraint - Stop patient sliding. ArmGuard Patient Arm Protector - Standardized & controlled arm compression. FaceGuard Patient Head Shield and Instrument Tray-Protect patient with airway access.</p>	<p>53 Loveton Circle, Suite 203 Sparks Glencoe, MD 21152 443.906.3276 www.endosure.com</p> <p>ENDOSURE, INC. offers the only noninvasive, highly accurate, objective, 30-minute diagnostic test providing instant diagnosis for all stages of ENDOMETRIOSIS in a cost-effective manner. ENDOMETRIOSIS is responsible for a high percentage of INFERTILITY and PELVIC PAIN. Now, you have a powerful tool to screen for and diagnose EDM in all pre and post treatment options. Visit booth 517 to learn how this compelling technology can help you manage this debilitating disease even in its earliest stage.</p>	<p>600 Chesapeake Drive Redwood City, CA 94063 650.216.3860 www.sonatatreatment.com/for-healthcare-professionals</p> <p>Gold Corporate Sponsor Gynesonics is committed to providing women with a safe and effective, incisionless alternative to hysterectomy or myomectomy for the treatment of symptomatic uterine fibroids. The Sonata® Transcervical Fibroid Ablation System is designed to treat a wide range of fibroid types in one procedure.</p>
Diagnostic Green LLC 630	Ethicon US, LLC 833 & MR836	GYNEX Corporation 804
<p>38955 Hills Tech Drive Farmington Hills, MI 48331 www.diagnosticgreen.com</p> <p>Diagnostic Green supplies its customers with the leading ICG agent. Indocyanine Green, USP is used by physicians to visualize fluorescence and guide their procedures. Diagnostic Green focuses on consistently supplying superior quality products to our customers.</p>	<p>4545 Creek Road Cincinnati, OH 45242 513.337.7000 www.ethicon.com</p> <p>A global med tech leader delivering life-changing innovations.</p>	<p>6631 Browning Drive North Richland Hills, TX 76180 425.882.1179 www.gynexcorporation.com</p> <p>Gynex is a provider of quality OBGYN instruments with transparent pricing.</p>

EXHIBITOR DESCRIPTIONS

Hologic, Inc. 510	InMode 301	Jackson Medical 402
<p>250 Campus Drive Marlborough, MA 01752 508.282.7571 www.hologic.com</p> <p>Gold Corporate Sponsor At Hologic, we pride ourselves in being an innovative medical technology company focused on improving women's health and well-being. Our GYN Surgical Solutions Division achieves this through differentiated, evidence-based solutions for minimally invasive gynecologic procedures. We continue to foster innovation and pioneer solutions designed to improve physician experience and patient outcomes for hysteroscopic and laparoscopic procedures.</p>	<p>17 Hughes Irvine, CA 92662 714.600.4484 www.inmodemd.com</p> <p>InMode Ltd. is a leading global provider of innovative and award-winning medical technologies that focuses on well-being and life-changing results. InMode develops, manufactures, and markets platforms that harness novel radio-frequency (RF) based technology that strives to enable new emerging minimally-invasive procedures and improve existing surgical procedures.</p>	<p>575 14th Street NW, Suite 100 Atlanta, GA 30318 713.459.9021 www.jackson-medical.com</p> <p>Jackson Medical (Atlanta, GA) is committed to establishing a safer standard of care in surgery with US-made products like GloShield, an intuitive safety shield that prevents OR fires and patient burns associated with existing surgical fiber-optic light cables in laparoscopy and hysteroscopy. Visit us to mitigate risk quickly in a cost-effective manner without impacting surgical workflow or surgical techniques. sales@jackson-medical.com.</p>
Human Xtensions 406	Inovus Medical 1032	KARL STORZ Endoscopy-America, Inc. 901
<p>4 Meir Ariel Street, Grand Net Building, 2nd Floor, PO Box 81 Netanya 4250574 Israel 97.277.363.0300 www.human-x.com</p> <p>Driving the next major shift in surgery, Human Xtensions is introducing Artefficient Surgery with our innovative modular handtops. Digital, simplified, and affordable, we combine the capacity of robotics with the benefits of handheld innovation. Our solutions act as a human extension inside the anatomy and restore ease and comfort of use by enabling surgeons to proper ergonomic positioning near the patient. We are giving every surgeon the upper hand to redefine the next standard of care.</p>	<p>Unit 14, Wharton Street Sherdley Road Industrial Estate St. Helens WA9 5AA United Kingdom +44.(0)1744752952 www.inovus.org</p> <p>Inovus Medical is a multi-award winning designer and manufacturer of surgical training technologies based in St Helens, UK. The company was founded in 2012 with a clear purpose, to improve surgical care through connected training. At the heart of everything Inovus does are its core values of affordable, accessible, and functional technologies.</p>	<p>2151 E. Grand Avenue El Segundo, CA 90245 800.421.0837 www.karlstorznetwork1.com/gynecology</p> <p>Silver Corporate Sponsor KARL STORZ is a global provider of MIS products. Our Rubina 4K IMAGE 1S system to operate in both white light and NIR/ICG provide precise visualization of lymph nodes and vessels when performing SLN mapping and/or lymphadenectomy. Our product portfolio also encompasses flexible and rigid hysteroscopes, true bipolar resection, specialized hand instruments. With products for use in virtually every healthcare setting, KARL STORZ is committed to enabling anywhere care.</p>
Infinitus Medical Technologies 330	Intuitive Surgical, Inc. 323 & MR1035	Lapovations LLC 735
<p>7304 VanClaybon Road Apex, NC 27523 919.285.1178 www.infinitusmedical.co</p> <p>Infinitus Medical Technologies is a Veteran owned surgical positioning and infrastructure company dedicated to evolving safety for both patients and surgical providers. We offer the only patented combined patient handling and Trendelenburg positioning systems in the industry. Our Genesis Bi-Wing facilitates safer ergonomic processes and reduces variance of positioning care. Staff can lift & slide both patient & pad to lithotomy, while standardizing arm adduction across a wide adult BMI spectrum.</p>	<p>1020 Kifer Road Sunnyvale, CA 94086-5304 408.523.2100 www.intuitive.com</p> <p>Platinum Corporate Sponsor At Intuitive®, innovating for minimally invasive care is the passion that drives us. Our robotic-assisted da Vinci® Surgical System helps empower doctors and hospitals to make surgery less invasive than an open approach. Working with doctors and hospitals, we're continuing to develop new, minimally invasive surgical platforms and future diagnostic tools to help solve complex healthcare challenges around the world.</p>	<p>700 W. Research Center Boulevard, Suite 1437 Fayetteville, AR 72701 636.300.7227 www.lapovations.com</p> <p>Lapovations is creating a platform of innovative products that improve laparoscopy. Our flagship product AbGrab® is a single-use device that uses suction to lift the abdominal wall prior to closed insertion entry. Manually lifting can be difficult and unreliable, especially with obese patients or for clinicians with small hands. Towel clips create puncture wounds that can cause needless bruising and post-op pain. AbGrab® provides a reliable and non-invasive solution for abdominal wall elevation.</p>
		Legally Mine 1113
		<p>PO Box 1629 Orem, UT 55103 800.375.2483 www.legallymineusa.com</p> <p>A client-first approach to wealth management.</p>

EXHIBITOR DESCRIPTIONS

Lexion Medical, Inc.

401

545 Atwater Circle
St Paul, MN 55103
651.635.0000
www.lexionmedical.com

LEXION is a comprehensive pneumo-management, smoke evacuation, and CO2 conditioning system for laparoscopic and robotic procedures. Our system provides enhanced visibility, stable pneumo, improved safety, clinical benefits, and cost savings. The LEXION system comprises of one-way, real-time intelligent insufflator, the AP 50/30, CO2 conditioning trocar, the InsuflowPort®, and closed-loop, active smoke eliminator, the PneuView® XE, to create the optimal surgical insufflation environment.

LiNA Medical

800

1856 Corporate Drive, Suite 135
Norcross, GA 30093
855.546.2633
www.linamed.com

LiNA Medical develops and distributes innovative, simple to use devices for minimally invasive gynecology and urogynecology. LiNA Medical manufactures the LiNA OperâScope™ single-use operative hysteroscopy system, LiNA Xcise™ cordless laparoscopic morcellator, LiNA SeaStar™ retractor system, and the LiNA Bipolar Loop™ & LiNA Gold Loop™. LiNA Medical USA also distributes the UroCure sling systems portfolio including three offerings, and the FEMSelect EnPlace™ pelvic floor ligament fixation system

LivsMed, Inc

1033

2305 Historic Decatur Road, Suite 100
San Diego, CA 92106
619.870.4258
www.livsmed.com

LivsMed brings groundbreaking technology to minimally invasive surgery. We envision a new paradigm of laparoscopic surgery where articulating technology is available to every surgeon. The ArtiSential® has been met with excitement from surgeons worldwide since 2011, receiving the Red Dot Design Award and recognition from SAGES. LivsMed focuses on revolutionizing the capabilities of minimally invasive surgery and advancing patient outcomes around the world.

MDedge ObGyn

605

7 Century Drive
Parsippany, NJ 07043
917.880.9545
www.oncologypractice.com

MDedge ObGyn combines latest news and conference coverage from Ob.Gyn. News with practical clinical reviews, relevant and timely expert commentary, and surgical technique articles and videos from OBG Management, providing users with a one-stop information destination. All content is streamlined for ease of use, categorized by specialty and condition/disease state.

Mediflex Surgical Products

704

250 Gibbs Road
Islandia, NY 11749
631.582.8440
www.mediflex.com

Mediflex® offers the widest range of Holding Arms & Retractors for open, laparoscopic, and robotic surgery. Our signature reposable DynaTrac™ system helps reduce procedural costs & eliminates waste associated with disposable retractor frames. Create working space in the lower pelvis without an additional port using Port Free Retractors by Mediflex. Since 1975, Mediflex is proud to be the original manufacturer of the world famous Bookwalter® systems. Visit our booth to learn more.

Meditrina

711

1190 Saratoga Avenue, #180
San Jose, CA 95129
408.471.4877
www.avetasystem.com

The Aveta System is an all-in-one tissue removal solution for intrauterine pathology. Featuring wide-angle HD hysteroscopy with head-up display and electronic upright image-lock, advanced fluid management with improved pressure and fluid deficit control, full physician control on the scope handle, and the smallest insertion diameter with the largest working channel allows optimized tissue resection.

Medtronic

313

710 Medtronic Parkway
Minneapolis, MN 55432
203.500.6203
www.medtronic.com

Platinum Corporate Sponsor We lead global healthcare technology, boldly attacking the most challenging problems. Our Mission – to alleviate pain, restore health, and extend life – unites a global team of 90,000+ people, and our technologies transform the lives of two people every second, every hour, every day. Expect more from us. Medtronic. Engineering the extraordinary.

MiMedx

1106

1775 W. Oak Commons Court
Marietta, GA 30062
678.361.1690
www.mimedx.com

MIMEDX is a transformational placental biologics company, developing and distributing placental tissue allografts with patent-protected, proprietary processes for multiple sectors of healthcare. MIMEDX has supplied over two million allografts, through both direct and consignment shipments. For additional information, please visit www.mimedx.com.

Momentis Surgical, Inc.

623

5300 NW 33rd Avenue
Fort Lauderdale, FL 33309
877.636.4287
www.momentissurgical.com

Gold Corporate Sponsor Momentis Surgical is transforming robotic surgery with its Hominis® Surgical System, the only robotic system that enables a transvaginal approach to gynecologic surgery. Hominis features miniature humanoid-shaped robotic arms that replicate the motions of a surgeon's arms, providing human level dexterity, multi-planar flexibility and 360 degrees of articulation. For more information, including our indications for use, visit us at www.momentissurgical.com.

EXHIBITOR DESCRIPTIONS

Myovant Sciences, Inc. / Pfizer, Inc. 911 & MR937

2000 Sierra Point Parkway, 9th Floor
Brisbane, CA 94005
833.696.8268
www.myovant.com

Gold Corporate Sponsor Myovant Sciences and Pfizer aspire to redefine care for women by developing empowering medicines that can change treatment paradigms for various conditions that impact women's health. By combining Myovant's commitment to purpose-driven science with Pfizer's deep heritage and leadership in women's health, we are uniquely positioned to provide innovative treatments that fulfill significant unmet needs and make a meaningful difference in women's lives.

New View Surgical 307

555 Massachusetts Avenue, Suite 5
Boston, MA 02118
www.newviewsurg.com

New View Surgical has embarked on a mission to improve minimally invasive surgery by creating value for all stakeholders. The VisionPort system is an innovative platform that provides the surgeon with the ability to control their view, improves patient outcomes with a less invasive option by reducing surgical sites required, improves efficiency for the OR staff and offers significant cost savings for the facilities.

New Wave Endo 513

6601 Lyons Road, Suite D-8
Coconut Creek, FL 33073
888.700.8890
www.NewWaveEndo.com

We present here a novel laparoscopic system called the M-Close Kit that delivers anesthesia into the pre-peritoneal nerve plane surrounding the port site and at the same time facilitates a gold-standard, safe(no exposed needles) and accurate (1cm from each side of the defect) port closure.

NinoMed, LLC 900

241 Parker Road
Chapel Hill, NC 27517
919.818.3711
www.ninomed.com

NinoMed is a rapidly growing Medical Device and Business Analytics company. Our products provide value by improving patient care, safety, and efficiency. Our products include: Safe-T-Secure®, the original, All-In-One Trendelenburg patient positioning solution for robotic & laparoscopic surgery. Pluma-Soft®, a pressure redistribution system designed to prevent pressure ulcer formation during surgery.

Northgate Technologies, Inc 824

1591 Scottsdale Court
Elgin, IL 60123
224.325.2214
www.ntisurgical.com

Pioneers in minimally invasive surgical technology, NTL has been manufacturing, designing, and innovating since 1984. We are committed to providing optimal value throughout the entire healthcare experience by collaborating with customers and clinicians to understand needs and develop innovative solutions to concerns. The NEBULAE® Smoke Removal System is the only closed-loop laparoscopic device that can maintain pressure while removing surgical smoke and contaminants from the patient.

Olympus America Inc. 523 & MR936

800 West Park Drive
Westborough, MA 01581
800.401.1086
www.medical.olympusamerica.com

Bronze Corporate Sponsor Olympus is passionate about creating customer-driven solutions for the medical, life sciences, and industrial equipment industries. As a leading medical technology company, our Medical business uses innovative capabilities in medical technology, therapeutic intervention, and precision manufacturing to help healthcare professionals deliver diagnostic, therapeutic, and minimally invasive procedures to improve clinical outcomes, reduce overall costs, and enhance the quality of life for patients.

Olympus Corporation of the Americas 918

3500 Corporate Parkway
Center Valley, PA 18034
United State
800.401.1086
www.learn-us.olympusamerica.com

Olympus is passionate about creating customer-driven solutions for the medical, life sciences, and industrial equipment industries. As a leading medical technology company, our Medical business uses innovative capabilities in medical technology, therapeutic intervention, and precision manufacturing to help healthcare professionals deliver diagnostic, therapeutic, and minimally invasive procedures to improve clinical outcomes, reduce overall costs, and enhance the quality of life for patients.

Pacira BioSciences, Inc. 501

5 Sylvan Way
Parsippany, NJ 07054
908.295.6137
www.pacira.com

Pacira BioSciences, Inc. is the industry leader in its commitment to non-opioid pain management and regenerative health solutions to improve patients' journeys along the neural pain pathway. To learn more about Pacira, including the corporate mission to reduce overreliance on opioids, visit www.pacira.com.

Palliare 732

301 Mission Avenue, #211
Oceanside, CA 92054
760.696.3727
www.palliare.com

The EVA15 Insufflation and Smoke Evacuation System is designed to create a safer operating room environment and deliver best-in-class insufflation and smoke evacuation performance to meet the particular demands of laparoscopic, endoluminal, endoscopic, and robotic surgical procedures. The EVA15 Insufflator maintains continuous 7-15mmHg pressure, automatically compensates for leaks and suctioning, is designed for easy integration into any OR setting, and works with standard laparoscopic trocars.

Pee Bee India Endoscopy 932

Zest Business Centre M.G Road
Mumbai 400077 India
91.9820065293
www.peebieindia.com

Established is 1999 PEE BEE INDIA ENDOSCOPY grew in just a few years with innovative ideas and professional products to become a dependable partner in the Indian medical instruments market. The best materials and most modern techniques has made PEE BEE INDIA ENDOSCOPY well-known name among the surgeons and specialists.

Porter Instrument 834

245 Township Line Road
Hatfield, PA 19440
267.436.2537
www.porterinstrument.com/medical

Porter Instrument has been manufacturing nitrous oxide and oxygen systems for over 50 years. Nitronox Plus® is the only demand flow system that offers patient self-administered 0-70% adjustable nitrous oxide to help manage patient's pain and anxiety during minimally invasive in-office procedures including hysteroscopy, medical aesthetics, and IUD insertion. Other features include a key lock system for safety and security and a low gas pressure alarm that alerts you when the gas is running low.

EXHIBITOR DESCRIPTIONS

Provepharm, Inc.

1101

100 Springhouse Drive
Collegeville, PA 19426
713.823.6454
www.provepharmusa.com

With an impressive legacy of healthcare innovations and solutions spanning more than 20 years, Provepharm is at the forefront of developing innovative drugs from well-known molecules that advance therapeutic progress for the benefit of patients.

RF Medical

405

#408, 254 Beotkkot-ro, Geumcheon-gu
Seoul, Seoul-t'ukpyolsi 08511
Korea (South)
82.221.084.200
www.rfa.co.kr

RF Medical is dedicated to popularizing radiofrequency ablation treatments since 2003. Our extensive product range spans from tumor ablation such as thyroid nodules to even varicose vein treatments. With advanced technology and proven quality, we developed the world's first RF Myolysis System. We have supplied our products to hospitals and OBGYN clinics that offer solutions for treatments of uterine myomas while preserving the uterus.

Richard Wolf Medical Instruments

801

353 Corporate Woods Pkwy
Vernon Hills, IL 60061
847.913.1113.253
www.richard-wolf.com

Bronze Corporate Sponsor Richard Wolf Medical Instruments is dedicated to improving patient outcomes through innovation in endoscopy. For over 100 years, Richard Wolf has pursued endoscopic solutions focused on improving surgical results while reducing patients' trauma. In the pursuit of the spirit of excellence, Richard Wolf prides itself on quality and innovation.

Sharp Fluidics

1100

3496 Breakwater Court
Hayward, CA 94545
615.477.9883
www.sharpfluidics.com

Faster and safer minimally invasive fascia closure that produces less port site pain for your patients. NeoClose closes the fascia for minimally invasive port sites utilizing PLGA anchors to approximate the fascia providing a closure that is six times stronger than traditional closed loop suture closure.

SoLá Pelvic Therapy

902

200 S. Harbor City Boulevard
Melbourne, FL 32901
321.288.0273
www.solapelvictherapy.com

SoLá Pelvic Therapy is a photobiomodulation system for treating the common denominator in women with chronic pelvic pain. SoLá Therapy began commercial use in the summer of 2019. Over 6,000 procedures have been performed. 80% of treated women have achieved rapid pain reduction. Mean time to maximum pain reduction is 2 weeks. The SoLá Pelvic Therapy laser records patient-reported outcomes from every treatment on every patient. Our safety and effectiveness data is robust and generalizable.

Surgical Science, Symbionix Simulators

811

23500 Mercantile, Suite F
Beachwood, OH 44122
800.918.1670
www.surgicalscience.com

Surgical Science is a leading supplier of innovative, evidence-based virtual reality simulators for medical professionals. Our products help advance clinical performance by providing safe skills and equipment training before entering operating theaters and procedure rooms, and can be found in simulation centers, hospitals, universities, and medical device industry partners in over 60 countries.

SurgiTools

705

231 Timberlane Drive
Woodvale- Western Australia
6026 Australia
505.620.2917
www.SurgiTools.com

Visit SurgiTools to see the world's first colpotomizer with a 20mm oncology margin. ColpoWave features 2 raised rotating edges. The first lifts the tissue at the vaginal fornices for benign hysterectomy. The second lifts tissue at 20mm for radical hysterectomy. This double-ended colpotomizer includes two sizes in one instrument. SurgiTools also offers the Uterine Positioner, a non-power assistant to hold your uterine manipulator in place. This positioner does not require disposables.

Suture Ease, Inc.

730

1735 N 1st St Ste 290
San Jose, CA 95112-4511
408.459.7595
www.sutureease.com

Suture Ease develops and markets novel technologies that combine efficacy and ease of use for laparoscopic procedures. The CrossBow Fascial Closure System, a Medical Design Excellence Award GOLD winner, utilizes an innovative "snare guide" mechanism to enable simple and reliable port site wound closure. Our latest technology is the EzStitch Port Site Closure System. The device employs exceptional safety combined with an elegant and robust design, enabling surgeons to close with confidence.

TaeWoong Medical USA

505

4801 Wilshire Boulevard, Suite 280
Los Angeles, CA 90010
323.692.0028
www.taewoongusa.com

As a leading medical device company, TaeWoong researches, designs and manufactures a full portfolio of ablation products, including thyroid, biliary, pancreatic, uterine fibroid, breast, liver, bone and renal. A secondary division is a worldwide leader in non-vascular stents including esophageal, biliary, and numerous other GI and urological indications. We will always continue to deliver our values and invest our passion and energy for the greater benefit of all patients.

Theator

512

400 Waverley Street
Palo Alto, CA 94301
415.405.5312
www.theator.io

Theator is pioneering the Surgical Intelligence revolution, harnessing advanced AI and computer vision technology to generate actionable insights which improve the quality of surgical care. By making routine video capture and analysis the standard of care in surgery, Surgical Intelligence derives never-before-seen-insights to help surgeons and hospital systems understand the causes of variability in patient outcomes and reduce it in the future, lowering costs and streamlining procedures in the OR.

EXHIBITOR DESCRIPTIONS

Überlube

1007

7316 N. Ridgeway
Skokie, IL 60076
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AAGL/FMIGS Fellows Boot Camp – November 30, 2022 (non-CME)

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AAGL 51st Global Congress – December 1, 2022

NERV-619

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In conjunction with Endometriosis 2023

Mario Malzoni, MD, Scientific Program Chair

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18th AAGL International Congress on MIGS

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Nashville Convention Center

Michel Canis, MD, Scientific Program Chair

November 5-9, 2023

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With special thanks to the AAGL Team for their dedicated efforts and diligent work on this congress.

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*We would also like to recognize Baron Miller of Buzzbox Media
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Non-Opioid EXPAREL Provides Long-Lasting
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OB/GYN data

Patients who received multimodal pain management with an EXPAREL TAP block following C-section or hysterectomy had better outcomes compared with those who did not.^{1,2}

46% LOWER

mean AUC of NRS pain
scores up to 3 days¹

(132.8 vs 246.3; $P < 0.001$)

50% DECREASE

in total opioid use up to
3 days after surgery^{2*}

(24.9 vs 51.7 [MED] mg; $P = 0.002$)

39% SHORTER

time to ambulation¹

(18.7 vs 30.7 hours; $P < 0.001$)

1 DAY SHORTER

hospital LOS¹

(2.9 vs 3.9 days; $P < 0.001$)

AUC=area under the curve; LOS=length of stay; MED=morphine equivalent dose; NRS=numeric rating scale; OB/GYN=obstetrics and gynecology; TAP=transversus abdominis plane.

*The clinical benefit of the decrease in opioid consumption was not demonstrated in the pivotal trials.

Results from a retrospective chart review in patients who underwent C-section (N=201) with an EXPAREL TAP block (n=101) compared with those who did not receive an EXPAREL TAP block (n=100).¹

Results from a randomized control trial in patients undergoing a robotic hysterectomy (N=60) who received an EXPAREL TAP block (n=30) compared with patients who received a bupivacaine HCl TAP block (n=30).²

Indication

EXPAREL® (bupivacaine liposome injectable suspension) is indicated for single-dose infiltration in patients aged 6 years and older to produce postsurgical local analgesia and in adults as an interscalene brachial plexus nerve block to produce postsurgical regional analgesia. Safety and efficacy have not been established in other nerve blocks.

Important Safety Information

EXPAREL is contraindicated in obstetrical paracervical block anesthesia. Adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via infiltration were nausea, constipation, and vomiting; adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via interscalene brachial plexus nerve block were nausea, pyrexia, and constipation. Adverse reactions with an incidence greater than or equal to 10% following EXPAREL administration via infiltration in pediatric patients six to less than 17 years of age were nausea, vomiting, constipation, hypotension, anemia, muscle twitching, vision blurred, pruritus, and tachycardia. If EXPAREL and other non-bupivacaine local anesthetics, including lidocaine, are administered at the same site, there may be an immediate release of bupivacaine from EXPAREL. Therefore, EXPAREL may be administered to the same site 20 minutes after injecting lidocaine. EXPAREL is not recommended to be used in the following patient populations: patients <6 years old for infiltration, patients younger than 18 years old for interscalene brachial plexus nerve block, and/or pregnant patients. Because amide-type local anesthetics, such as bupivacaine, are metabolized by the liver, EXPAREL should be used cautiously in patients with hepatic disease.

Warnings and Precautions Specific to EXPAREL

Avoid additional use of local anesthetics within 96 hours following administration of EXPAREL. EXPAREL is not recommended for the following types or routes of administration: epidural, intrathecal, regional nerve blocks **other than interscalene brachial plexus nerve block**, or intravascular or intra-articular use. The potential sensory and/or motor loss with EXPAREL is temporary and varies in degree and duration depending on the site of injection and dosage administered and may last for up to 5 days, as seen in clinical trials.

Warnings and Precautions for Bupivacaine-Containing Products

Central Nervous System (CNS) Reactions: There have been reports of adverse neurologic reactions with the use of local anesthetics. These include persistent anesthesia and paresthesia. CNS reactions are characterized by excitation and/or depression.

Cardiovascular System Reactions: Toxic blood concentrations depress cardiac conductivity and excitability, which may lead to dysrhythmias, sometimes leading to death. **Allergic Reactions:** Allergic-type reactions (eg, anaphylaxis and angioedema) are rare and may occur as a result of hypersensitivity to the local anesthetic or to other formulation ingredients. **Chondrolysis:** There have been reports of chondrolysis (mostly in the shoulder joint) following intra-articular infusion of local anesthetics, which is an unapproved use. **Methemoglobinemia:** Cases of methemoglobinemia have been reported with local anesthetic use.

Full Prescribing Information is available at www.EXPAREL.com.

For more information, please visit www.EXPAREL.com or call 1-855-793-9727.

References: 1. Baker BW, Villadiego LG, Lake YN, et al. Transversus abdominis plane block with liposomal bupivacaine for pain control after cesarean delivery: a retrospective chart review. *J Pain Res*. 2018;11:3109-3116. 2. Hutchins J, Delaney D, Vogel RI, et al. Ultrasound guided subcostal transversus abdominis plane (TAP) infiltration with liposomal bupivacaine for patients undergoing robotic assisted hysterectomy: a prospective randomized controlled study. *Gynecol Oncol*. 2015;138(3):609-613.

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