

# Guidelines for performing gynaecological endoscopic procedures

This statement has been developed by the Women's Health Committee. It has been reviewed by the Endoscopic Surgery Advisory Committee (RANZCOG/AGES) and Women's Health Committee and approved by the RANZCOG Board and Council.

A list of Women's Health Committee and Endoscopic Surgery Advisory Committee (RANZCOG/AGES) Members can be found in [Appendix A](#).

Disclosure statements have been received from all members of this committee.

**Disclaimer** This information is intended to provide general advice to practitioners. This information should not be relied on as a substitute for proper assessment with respect to the particular eg

**Consensus statement of the Royal Australian and New Zealand College of Obstetricians & Gynaecologists (RANZCOG) and the Australasian Gynaecological Endoscopy & Surgery Society (AGES).**

**Objectives:**

To describe the guidelines for performing gynaecological endoscopic procedures.

**Target audience:** All Australasian registered health practitioners who perform gynaecological endoscopic procedures.

**Values:** The evidence was reviewed by the Endoscopic Surgery Advisory Committee (RANZCOG/AGES) and Women's Health Committee, and applied to local factors relating to Australia and New Zealand.

**Background:** This statement was first developed by the RANZCOG Women's Health Committee in July 1993. It was recently updated by the Endoscopic Surgery Advisory Committee (RANZCOG/AGES) and Women's Health Committee in April 2019.

**Funding:** The development and review of this statement was funded by RANZCOG.



## **1. Introduction**

Endoscopic surgery, encompassing laparoscopic, robot-assisted laparoscopic (see Robotic statement) and hysteroscopic approaches, is an appropriate diagnostic and therapeutic intervention for a range of gynaecological conditions.



**RANZCOG Training Pathway**

Level 6 competency may be achieved by the completion of the RANZCOG Subspecialist Training Program or another accredited advanced training program, such as the AGES Fellowship Accredited Training Program.

**Inclusions**

Level 6-B (benign gynaecological surgery): Procedures at this level include laparoscopic excisional surgery for ASRM stage 4 endometriosis necessitating bowel or urological resection, ureterolysis, removal of residual cervix, removal of residual ovaries with significant distortion of the anatomy and



*ii. Declaration of interest process and management*

Declaring interests is essential in order to prevent any potential conflict between the private interests of members, and their duties as part of the Endoscopic Surgery Advisory Committee (RANZCOG/AGES).

A declaration of interest form specific to guidelines and statements was developed by RANZCOG and approved by the RANZCOG Board in September 2012. The Endoscopic Surgery Advisory Committee (RANZCOG/AGES) members were required to declare their relevant interests in writing on this form

