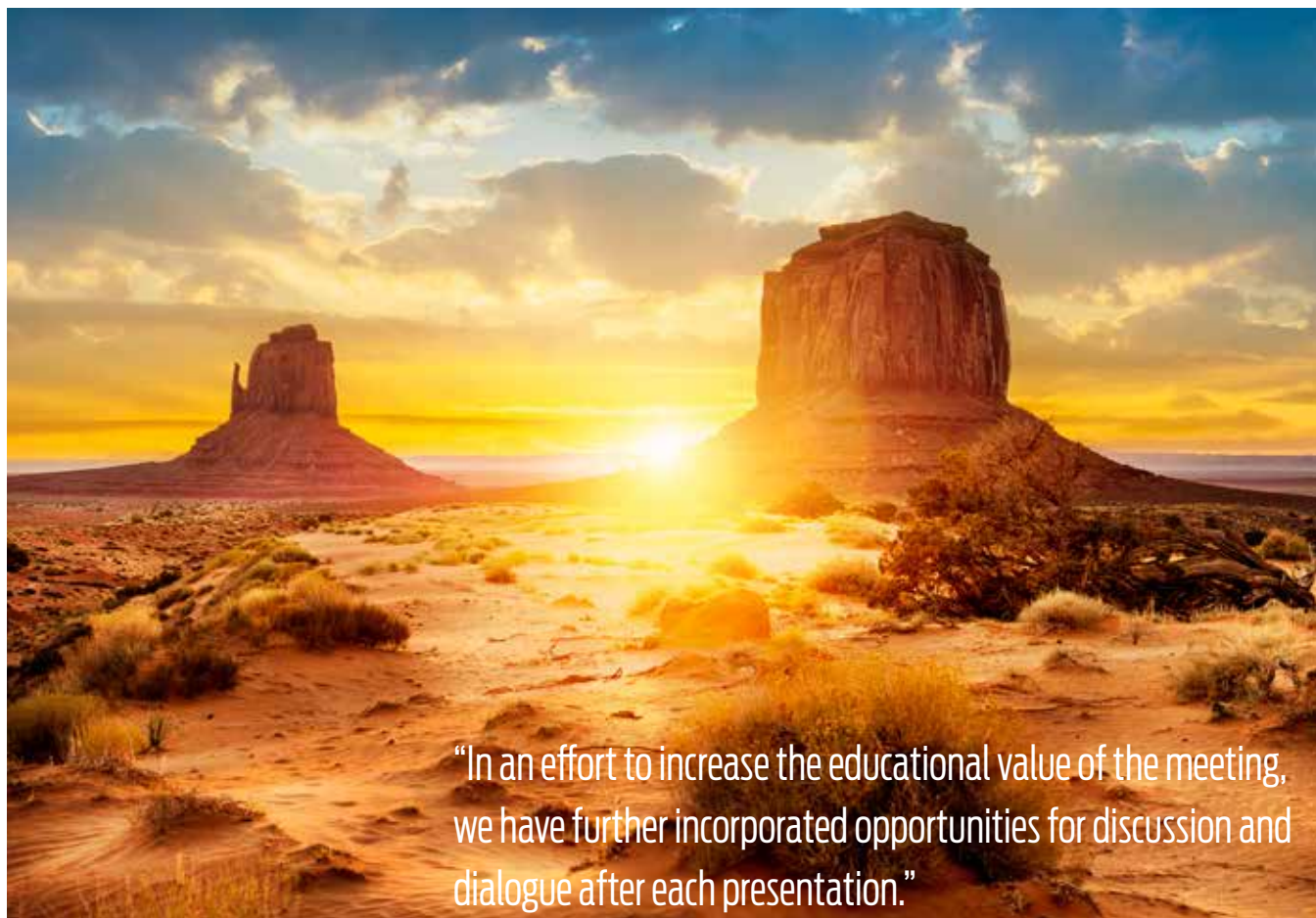




“In an effort to increase the educational value of the meeting, we have further incorporated opportunities for discussion and dialogue after each presentation.”



Dear friends and colleagues,

This year's annual Global Congress is shaping up to be an outstanding event. We had a record-breaking number of abstracts submitted and expect to have over 2000 gynecologic surgeons from all over the world attend

this most important educational event of the year. The congress will build on the success and rave reviews of the Vancouver meeting with several new innovative and exciting events planned. The venue is the majestic MGM Grand, located at the heart of the Vegas strip with a myriad of world-class entertainment options at your fingertips.

The theme for this year's meeting is “Advancing Gynecologic Surgery through Education, Innovation and Objective Evaluation of Surgical Skills”. As with every year, the educational value of the meeting is of utmost importance therefore, we have incorporated opportunities for discussion and dialogue after each presentation. The postgraduate courses have been carefully reinvigorated to offer practical take-home pearls with an emphasis on hands-on experience with inanimate trainers and cadaver models.

The general sessions will spotlight the most clinically

relevant topics for MIG surgeons. For example, the first session will highlight a live cadaver dissection by expert surgeons, focusing on deep retroperitoneal structures. Another session will demonstrate unedited 20-minute hysterectomies performed laparoscopically, robotically, and vaginally by expert surgeons who will moderate their preferred technique.

As reflected in this year's meeting theme, the objective evaluation of surgical skills is a pressing need in our specialty. By identifying acceptable MIGS standards, we can gauge a surgeon's skill level in order to take steps to ensure our members are providing patients with the highest quality care. Several promising measures have been developed to accomplish this. We will have a panel discussion regarding various methods to evaluate surgical skills and subsequently form a working group to recommend the implementation of national standards of surgical skill evaluation.

The meeting will also feature very interesting panel discussions which include the always-popular Stump the Professors, a timely panel discussion on the value-based delivery of health care and a “Teach the Teachers” course for fellowship preceptors.

I have only mentioned a portion of the exciting educational opportunities that are being offered at this year's meeting. I have clearly observed how the AAGL Global Congress has matured and increased in quality every year and I am sure that 2015 will be another year that raises the bar!

This is a dynamic time in our specialty with lots of innovation and rapid changes in our practice environment. Therefore, please make sure not to miss this year's meeting in Vegas so you can stay on top of the most current topics in the field. You should also allot time to experience some of the vast entertainment opportunities and dining options that you will find only in Las Vegas. To make planning your daily activities easier, the AAGL will provide a practical app for smart phones included in your registration. Some of my personal favorite sightseeing options are to be found off the strip, so consider checking out the Grand Canyon, Red Rock Canyon National Conservation Area and the Hoover Dam, all of which are within a quick drive from Las Vegas.

So please join me and the rest of the outstanding faculty and staff at this year's AAGL Global Congress at the MGM Grand in Las Vegas Nevada on November 15-19.

Jon I. Einarsson, M.D., Ph.D., MPH
Scientific Program Chair

BLOCK PROGRAM

POSTGRADUATE DAY 1 – SUNDAY, NOVEMBER 15

Registration — 6:00am – 7:00pm

FMIGS Graduation Ceremony and Reception — 5:00pm

CME State-of-the-Art Postgraduate Courses — 7:00am – 4:30pm

Luncheon – Discussion with the Experts — 11:15am – 12:15pm

POSTGRADUATE DAY 2 – MONDAY, NOVEMBER 16

Registration — 6:00am – 5:30pm

CME State-of-the-Art Postgraduate Courses — 7:00am – 4:30pm

Luncheon – Discussion with the Experts — 11:15am – 12:15pm

CME Live Interactive Cadaveric Demonstration: Anatomy — 4:45pm – 6:00pm

Opening Ceremony — Presidential Address — 6:00pm – 6:45pm

Welcome Reception in Exhibit Hall — 6:45pm – 8:00pm

CONGRESS – TUESDAY, NOVEMBER 17

Industry Sponsored Breakfasts

6:00am – 7:45am

Registration

6:30am – 5:30pm

CME Laboratorio de Simulación en ESPAÑOL: Sutura Laparoscópica — 7:00am – 11:00am

CME General Session 1 — 7:30am – 9:30am

Refreshment Break — Visit Exhibits — 9:30am – 11:00am

Room 116	Room 119	Room 124	Room 122	Room 120	Room 121	Room 118	
CME Plenary 1 Laparoscopy 11:00am-12:00pm	CME Surgical Tutorial 1 Tissue Extraction 11:00am-12:00pm	Open Comm. 1 Robotics 11:00am-12:00pm	Open Comm. 2 Endometriosis 11:00am-12:00pm	Video Session 1 Oncology 11:00am-12:00pm	Video Session 2 Urogynecology 11:00am-12:00pm	IBERO Symposium 11:00am-12:00pm	Virtual Posters 11:00am to 1:05pm
CME Plenary 2 Oncology 12:05pm-1:05pm	CME Surgical Tutorial 2 Endometriosis 12:05pm-1:05pm	CME Panel 1 Value-Based Healthcare 12:05pm-1:05pm	Open Comm. 3 Laparoscopy 12:05pm-1:05pm	Video Session 3 Robotics 12:05pm-1:05pm	Video Session 4 Education 12:05pm-1:05pm	APAGE Symposium 12:05pm-1:05pm	

Exhibits Open / Box Luncheon — 1:05pm – 3:30pm

CME Plenary 3 Hysteroscopy 2:15pm-3:15pm	CME Surgical Tutorial 3 Anatomy 2:15pm-3:15pm	CME Panel 2 What You Should Be Doing 2:15pm-3:15pm	Open Comm. 4 Research 2:15pm-3:15pm	Open Comm. 5 Education 2:15pm-3:15pm	Video Session 5 Laparoscopy 2:15pm-3:15pm	ESGE Symposium 2:15pm-3:15pm	Virtual Posters 2:15pm to 5:00pm
CME Plenary 4 Robotics 3:20pm-5:00pm	Surgical Tutorial 4 The Great Debate 3:20pm-5:00pm	Open Comm. 6 Endometriosis 3:20pm-5:00pm	Open Comm. 7 Laparoscopy 3:20pm-5:00pm	Open Comm. 8 Urogynecology 3:20pm-5:00pm	Video Session 6 Hysteroscopy 3:20pm-5:00pm	MESGE Symposium 3:20pm-5:00pm	

Industry Sponsored Symposium

5:05pm – 7:05pm

Industry Sponsored Symposium

5:05pm – 7:05pm

Industry Sponsored Symposium

5:05pm – 7:05pm

CONGRESS – WEDNESDAY, NOVEMBER 18

Industry Sponsored Breakfasts

6:00am – 7:45am

Breakfast

6:30am – 7:45am

Registration

6:30am – 5:30pm

CME General Session 2 — 7:50am – 9:30am

Refreshment Break — Visit Exhibits — 9:30am – 11:00am

Room 116	Room 119	Room 124	Room 122	Room 120	Room 121	Room 118	
CME Plenary 5 Urogynecology 11:00am-12:00pm	CME Surgical Tutorial 5 Robotics 11:00am-12:00pm	CME Panel 3 Sterilization Techniques 11:00am-12:00pm	Open Comm. 9 New Instruments 11:00am-12:00pm	Open Comm. 10 Hysteroscopy 11:00am-12:00pm	Video Session 7 Laparoscopy 11:00am-12:00pm	COGA Symposium 11:00am to 3:00pm	Virtual Posters 11:00am to 1:05pm
CME Plenary 6 Reproductive 12:05pm-1:05pm	CME Surgical Tutorial 6 Vaginal Cuff Closure 12:05pm-1:05pm	CME Panel 4 Stump the Professors 12:05pm-1:05pm	Open Comm. 11 Oncology 12:05pm-1:05pm	Open Comm. 12 Robotics 12:05pm-1:05pm	Video Session 8 Laparoscopy 12:05pm-1:05pm		

Exhibits Open / Box Luncheon 1:05pm – 3:00pm

CME Plenary 7 Pain Issues 2:15pm-3:15pm	CME Surgical Tutorial 7 Fibroids 2:15pm-3:15pm	Open Comm. 13 Reproductive Issues 2:15pm-3:15pm	Open Comm. 14 Laparoscopy 2:15pm-3:15pm	Video Session 9 Endometriosis 2:15pm-3:15pm	Video Session 10 Minimally Invasive Care 2:15pm-3:15pm	Panel 5 Objective Measurements 3:20pm-5:00pm	Virtual Posters 2:15pm to 4:00pm
CME Plenary 8 Research & Science 3:20pm-5:00pm	Open Comm. 15 Minimally Invasive Care 3:20pm-5:00pm	Open Comm. 16 Minimally Invasive Care 3:20pm-5:00pm	Open Comm. 17 Minimally Invasive Care 3:20pm-5:00pm	Video Session 11 Minimally Invasive Care 3:20pm-5:00pm	Video Session 12 Minimally Invasive Care 3:20pm-5:00pm		

Industry Sponsored Symposium

5:05pm – 7:05pm

Industry Sponsored Symposium

5:05pm – 7:05pm

Industry Sponsored Symposium

5:05pm – 7:05pm

Presidential Gala — 7:15 pm

CONGRESS – THURSDAY, NOVEMBER 19

CME Telesurgery Session — 8:00am – 1:30pm

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FULL DAY

FELO-600

CME

DIDACTIC | FEE: \$50.00 | 7:00AM - 4:30PM

POST-FELLOWSHIP SURVIVAL SKILLS

Professional Development for Your Career in Minimally Invasive Gynecologic Surgery



Erin T. Carey, Sarah L. Cohen, Jessica A. Shepherd, Chairs,
Mark R. Hoffman, Former FMIGS Board Member (Fellow Representative)

FACULTY: Ted L. Anderson, Janet Bickel, Linda D. Bradley, Louise P. King, Suketu Mansuria, Charles E. Miller, TBD, Matthew T. Siedhoff, Kirk A. Shibley, Warren Volker, Karen C. Wang

This full-day course will provide a comprehensive overview of key topics in personal and career development for the gynecologic surgeon, both with regard to academic or community-based practice. The target audience for this course is current AAGL fellows or recent graduates; however international physicians or junior faculty will also benefit from participation. The topics covered will include: navigating the job market, negotiating contracts, practice set-up and administration, managing conflict or discrimination in the workplace, transitioning from learner to teacher, setting up a successful research program, mastering presentation skills and collaborating with industry on technologic innovation. There will be several panel discussions and interactive sessions built into this course in order to maximize individual interaction and encourage networking with leaders in our field.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Outline an individualized career path in either an academic or community-based practice; 2) formulate strategies to address clinical questions by incorporating research and innovation into practice; and 3) describe how to maximize and navigate interactions with others, including potential employers, colleagues, co-workers and patients.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	<i>E.T. Carey, S.L. Cohen, J.A. Shepherd</i>
7:05	How to Secure Your Dream Job by Mastering the Basics Discovering Job Opportunities, Marketing Yourself, CV Development and Cover Letter, Interview Pearls	<i>S. Mansuria</i>
7:30	Contract Negotiation: Technicalities and Legalities of Successful Contract Preparation Do You Need a Lawyer?, What to Ask for – Typical Salary for FMIGS Graduates, Vacation, Coverage Responsibilities, Pitfalls to Avoid	<i>L.P. King</i>
7:55	Setting Up Your First Practice: Do's and Dont's Setting Yourself Up for Success, Administration, Medical Assistance, Templates/Schedule Design, Securing OR Time	<i>K.C. Wang</i>
8:20	Creating a Marketing Action Plan for Practice Success – MBA Not Required Website Design/Increasing Visibility with Search Engines, Promoting Yourself – Presentations, Increasing Visibility in the Community/Online, Patient Education Materials, Networking/Referrals, Niche Services – Office Based Procedures	<i>C.E. Miller</i>

8:45	Making a Splash in Social Media! Becoming an Innovative Power for the Future Social Media: Do's and Don'ts, Using Twitter, Health Grades to Your Advantage	<i>J.A. Shepherd</i>
9:05	Break	
9:20	Complication Management Outside the Operating Theatre: Limitations of Informed Consent, Patient-Family Communication and Documentation How to Consent and How to Document, Disclosure of a Complication to a Patient, Personal Stress Related to Complications, Medico-Legal Aspects – Managing a Malpractice Claim	<i>T.L. Anderson</i>
9:50	Managing Conflicts in the Workplace Identifying Your Default Conflict Management Preferences and Becoming More Versatile, Handling Sensitive Conversations with Co-Workers and Personnel, Diffusing Angry Patients, How to Give and Receive Negative Feedback	<i>J. Bickel</i>
10:20	Gender-Related Issues in Medical Training What Are We Learning about the Gender Issues That Remain?, Assessing and Avoiding Situations and Behaviors That Put You at Risk, Discussing the "Undiscussable"	<i>J. Bickel</i>
10:50	Difficult Issues in the Workplace – Open Discussion Ask the Experts about Conflict Issues	<i>L.D. Bradley, M.R. Hoffman, TBD</i>
11:15	Adjourn for lunch	
AFTERNOON SESSION		
12:30	Welcome, Introductions and Course Overview	<i>E.T. Carey, S.L. Cohen, J.A. Shepherd</i>
12:35	Maximizing Your Financial Return Coding and Billing Pearls: Need to Know for ICD-10 and the "Obama-Care" Age, RVU versus Other Reimbursement Schemes, Office Management and OR Cost Containment	<i>W. Volker</i>
1:00	Innovation and Intellectual Property: Protecting Your Idea from Conception to Product Release Maximizing Interaction with Industry, Generating Ideas, Taking Them to the Next Level, Principles of Patents, Prototype Design, Funding Start-Ups	<i>K.A. Shibley</i>
1:25	Surgical Video Tutorial: Tools to Create a High-Impact Video Presentation Practical Tutorial on Editing Software, Example of Live Video Editing, How to Design a High-Impact Video Presentation	<i>M.T. Siedhoff</i>
2:15	Questions & Answers	<i>All Faculty</i>
2:25	Break	
2:40	Award-Winning Paper Presentations IRCAD, Jay M. Cooper and Jerome J. Hoffman	
3:05	Data Collection in 2015: Creating a Database for Quality Improvement and Research Designing an Outcomes Database That Meets Your Needs, COEMIG, Redcap Review, Variable Inclusion/Exclusion (How Big to Build the Database), The Burden of Data Entry – Estimate the Support You Need for Consistent Data Entry	<i>S.L. Cohen</i>
3:35	"TED Talk" Revolution: Lessons Learned from the Greatest (and Shortest) Presentations Ever Given	<i>E.T. Carey</i>
4:00	Panel: Questions & Answers	<i>All Faculty</i>
4:30	Adjourn	

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SUTR-601

CME

LAPAROSCOPIC SUTURING

Practical Applications for Tissue Re-approximation, Intra-corporeal and Extracorporeal Knot Tying, Barbed Suture, and Suturing Technologies

SIMULATION LAB | FEE: \$375.00 | 7:00AM - 11:00AM



Joseph (Jay) L. Hudgens, Chair

FACULTY: Adrian Balica, E. Cristian Campian, Howard H. Jones, Thomas G. Lang, Fariba Mohtashami, Janelle Moulder Brown, Ally Murji, Biba Nijjar, Lisa M. Roberts, Henk W.R. Schreuder, S. Sony Singh, Arlene H. Song, Herbert M. Wong

This course provides an introduction to basic and advanced laparoscopic suturing techniques in a dry lab setting and is designed for participants wanting to expand their laparoscopic suturing skills. This course will present a variety of techniques for needle loading and tissue re-approximation from different port configurations in laparoscopic box trainers. Techniques and clinical applications for extra-corporeal, intra-corporeal knot tying, and running suturing techniques relevant to vaginal cuff closure, myomectomy, vaginal vault suspension, and cystotomy repair will be presented. In addition, applications of different suture materials including barbed suture will be reviewed. The participant will also have the opportunity to work with suturing devices utilized in gynecologic laparoscopy. The aim of this course is to present the material in a simple, systematic, and reproducible fashion. Faculty will provide an interactive environment to meet the needs of the individual, critical to effective learning.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Reproduce efficient techniques for laparoscopic tissue re-approximation, suture management, and running closures; 2) perform efficient intra-corporeal and extra-corporeal knot tying, identify the common mistakes that are encountered, and how to correct them; and 3) compare and distinguish potential benefits of barbed suturing technologies and devices used in laparoscopy and review the clinical applications for vaginal cuff closure, myomectomy, vaginal vault suspension, and cystotomy repair.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	J.L. Hudgens
7:05	Fundamentals of Needle Loading, Tissue Re-approximation, and Suture Management	J.L. Hudgens
7:25	LAB I: Tissue Re-approximation, Suture Management, and Simulated Running Cuff Closure	
8:15	Techniques for Intra-Corporeal Knot Tying: Clinical Applications, Common Mistakes, and How to Correct Them	F. Mohtashami
8:40	LAB II: Intra-Corporeal Knot Tying	
9:30	Extra-Corporeal Knot Tying, Suture Selection, Barbed Suture, Suturing Technologies and Clinical Applications	S.S. Singh
9:50	LAB III: Extra-Corporeal Knot Tying, Suturing Devices and Technologies	
10:45	Clinical Applications: Questions, Answers, and Course Evaluations	All Faculty
11:00	Adjourn	

SUTR-602

CME

LAPAROSCOPIC SUTURING

Practical Applications for Tissue Re-approximation, Intra-corporeal and Extracorporeal Knot Tying, Barbed Suture, and Suturing Technologies

SIMULATION LAB | FEE: \$375.00 | 12:30PM - 4:30PM



Fariba Mohtashami, Chair

FACULTY: Adrian Balica, E. Cristian Campian, Joseph (Jay) L. Hudgens, Howard H. Jones, Thomas G. Lang, Janelle Moulder Brown, Ally Murji, Biba Nijjar, Lisa M. Roberts, Henk W.R. Schreuder, S. Sony Singh, Arlene H. Song, Herbert M. Wong

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COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	F. Mohtashami
12:35	Fundamentals of Needle Loading, Tissue Re-approximation, and Suture Management	J.L. Hudgens
12:55	LAB I: Tissue Re-approximation, Suture Management, and Simulated Running Cuff Closure	
1:45	Techniques for Intra-Corporeal Knot Tying: Clinical Applications, Common Mistakes, and How to Correct Them	F. Mohtashami
2:10	LAB II: Intra-Corporeal Knot Tying	
3:00	Extra-Corporeal Knot Tying, Suture Selection, Barbed Suture, Suturing Technologies and Clinical Applications	S.S. Singh
3:20	LAB III: Extra-Corporeal Knot Tying, Suturing Devices and Technologies	
4:15	Clinical Applications: Questions, Answers, and Course Evaluations	All Faculty
4:30	Adjourn	

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ROBO-603

CME

ROBOTICS 2015

Surgical Solutions,
Innovations and Cost

DIDACTIC | FEE: \$175.00 | 7:00AM - 11:00AM



Thomas N. Payne, Chair

FACULTY: Richard W. Farnam, Devin M. Garza, Kathy Huang, Rosanne M. Kho, John P. Lenihan, Catherine A. Matthews, Michael C. Pitter

*Presented in cooperation with the AAGL
Special Interest Group on Robotics*

This course provides a balanced toolkit that can be used to address the common hurdles, innovative techniques and controversies we all seek to master in robotic assisted surgery. It is designed to advance the skill set of both the novice and experienced robotic surgeon. Current strategies and tips for surgical success in performing the most common robotic procedures will be reviewed in detail. Exciting innovations in ureteral identification, single site technique and tissue extraction will be taught, followed by timely discussions on the topics of simulation, credentialing and cost containment. Upon completion of each lecture, the speaker will give at least 3 pragmatic tips that the surgeon can take home and implement into clinical practice. The didactic course is designed to complement the cadaveric/simulation lab on anatomy and tissue extraction. Distinguished faculty includes nationally/internationally recognized experts who are passionate about sharing their knowledge and experience with the participants.

In order to support AAGL's tissue extraction statement, this course will provide the following tissue extraction methods: EXCITE technique with and without bag enclosure of specimen.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Recognize, troubleshoot and solve common problems related to robotic assisted hysterectomy, myomectomy, endometriosis and sacrocolpopexy procedures; 2) describe techniques for single site hysterectomy and manual tissue extraction that can be incorporated into clinical practice; and 3) discuss ways to implement the roles of cost containment and simulation into your practice.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	T.N. Payne
7:05	The Large Uterus: Broken Down Step by Step	K. Huang
7:30	Myomectomy: Surgical Management and Fertility Considerations	M.C. Pitter
7:55	Endometriosis on the Robot: A Roadmap Utilizing ICG-9 for Ureteral Identification	R.W. Farnam
8:20	Sacrocolpopexy: Appropriate Technique and / Common Complications	C.A. Matthews
8:45	Questions & Answers	All Faculty
8:55	Break	
9:10	Less Is More: The Evolution of Robotic Single Site Hysterectomy	D.M. Garza
9:35	Tissue Extraction: Alternative Techniques to Power Morcellation	R.M. Kho
10:00	See One, Do One and Teach One – No More! Robotic Simulation 2015	J.P. Lenihan
10:25	Green Is the New Black: Surgeons, Instrumentation and Cost Containment	T.N. Payne
10:50	Questions & Answers	All Faculty
11:00	Adjourn	

ROBO-604

CME

ROBOTIC ROUND-ROBIN

Pelvic Anatomy,
Tissue Extraction

CADAVERIC/SIMULATION LAB | FEE: \$875.00 | 12:30PM - 4:30PM



Devin M. Garza, Chair

FACULTY: Richard W. Farnam, Kathy Huang, Rosanne M. Kho, John P. Lenihan, Catherine A. Matthews, Thomas N. Payne, Michael C. Pitter

*Presented in cooperation with the AAGL
Special Interest Group on Robotics*

This hands-on course is designed to stand alone or complement the didactic robotic course. It will give each participant an opportunity to review important anatomical landmarks and their relationships utilizing cadaveric tissue, including optimal robotic dissection techniques. Common complications and their appropriate repairs will be emphasized and practiced. Manual tissue extraction will be presented with a "hands on" approach using various alternative techniques to power morcellation. In addition, the most current simulation exercises will be taught with emphasis on their increasing role in national credentialing. Distinguished faculty includes nationally/internationally recognized experts who are passionate about sharing their knowledge with the participants.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Identify anatomical landmarks and relationships useful in pelvic surgery; 2) evaluate the role of simulation for training new surgeons and maintaining the skill sets of experienced surgeons during periods of inactivity; and 3) formulate a plan for safe tissue extraction utilizing manual morcellation techniques.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	D.M. Garza
12:35	LAB I: Cadaveric Pelvic Dissection (4 Stations, Group A/Group B rotate) • Predissection Orientation: Anatomy Lecture/Video Tutorial • Identify and Dissect the Following: » Perform Successful Technique for Entering the Retroperitoneal Space » Identify the Ureter at the Bifurcation of the Common Iliac Artery » Identify the Internal Iliac Artery and Two of Its Branches: The Superior Vesicle Artery and Uterine Artery » Identify the Relationship of the Superior Vesicle and Obliterated Umbilical Artery » Identify the Ureter and Its Relationship to the Uterine Artery » Dissect the Ureter along Its Course from the Bifurcation of the Common Iliac Artery to the Bladder • Practice Suturing and Dissection Techniques • Perform Bladder and Bowel Injury: Demonstrate Appropriate Repair of Each	
2:30	LAB II: Tissue Extraction and Simulation (8 Stations: 4 Simulators, 4 Dry Boxes) • Orientation: Tissue Extraction and Simulation Lecture • Perform Simulation to Proficiency x 8 Separate Exercises • Simulation Olympics • Perform Wedging, Coring, and Bi-Valving Techniques on Tissue • Perform Excite Tissue Removal Technique Utilizing Appropriate Tissue Bags and Soft Retractors	
4:25	Questions & Answers	All Faculty
4:30	Adjourn	

URO-605

CME

CLINICAL & SURGICAL PEARLS

Treating Complicated Urinary Incontinence & POP

DIDACTIC | FEE: \$175.00 | 7:00AM - 11:00AM



Jim W. Ross, Chair

FACULTY: Patrick J. Culligan, Neeraj Kohli, Vincent R. Lucente, John R. Miklos, Peter L. Rosenblatt

Presented in affiliation with the American Urogynecologic Society (AUGS) and in cooperation with the AAGL Special Interest Group on Urogynecology

This course deals with the evaluation and treatment of urinary incontinence and complex pelvic organ prolapse. We will discuss tips and tricks for treating urinary stress incontinence; along with the role of urodynamic studies, cystoscopy, and the use of 4D ultrasound. A complete update on vaginal slings with their specific use and treatment of complication will be covered. A discussion on the availability of new technology for refractory urge incontinence, which employs third generation anticholinergics, Botox, urgent PC, and Interstim, will be compared. Improved surgical techniques for vaginal POP with the use of biologics and transvaginal mesh will be discussed. The use of laparoscopic and robotic sacrocolpopexy will be contrasted and clinical and surgical pearls will be covered. The integration and role of 4D ultrasound in replacing MRI in urogynecology will be demonstrated. In addition, the evaluation with current and new treatments for fecal incontinence will be covered.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Explain how to diagnose different types of urinary incontinence; 2) evaluate and treat urinary incontinence and POP; 3) discuss treatment options for refractory urge incontinence; 4) determine surgical options for vaginal prolapse repairs, including the use of biological implants; 5) recommend treatment options for sacrocolpopexy; 6) integrate 4D ultrasound for a more thorough evaluation of pelvic floor disease; 7) explain when and how to use transvaginal mesh; and 8) discuss the current understanding of fecal incontinence and current and future treatments available.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	J.W. Ross
7:05	Laparoscopic Sacrocolpopexy and Fistula Repairs	J.R. Miklos
7:30	New Treatment for Refractory Urge Incontinence	N. Kohli
7:55	Evaluation of Complicated Stress Incontinence and Pelvic Prolapse	V.R. Lucente
8:20	New Surgical Techniques and Use of Biologics for Vaginal Prolapse	P.L. Rosenblatt
8:45	Questions & Answers	
8:55	Break	
9:10	Laparoscopic and Robotics Sacrocolpopexy, the Ins and Outs	P. Culligan
9:35	Importance and Integration of 4D Ultrasound in Urogynecology	J.W. Ross
10:00	Native Tissue Repair or Transvaginal Mesh, Where Do We Stand?	V.R. Lucente
10:25	Current and Future Management of Fecal Incontinence	P.L. Rosenblatt
10:50	Questions & Answers	
11:00	Adjourn	

URO-606

CME

LAPAROSCOPIC SACROCOLPOPEXY AND BEYOND...

Cadaveric Training in Urogynecology

CADAVERIC LAB | FEE: \$875.00 | 12:30PM - 4:30PM



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FACULTY: Patrick J. Culligan, Stuart R. Hart, Neeraj Kohli, Vincent R. Lucente, John R. Miklos, Stephanie N. Morris, Charles R. Rardin, Jim W. Ross

Presented in affiliation with the American Urogynecologic Society (AUGS) and in cooperation with the AAGL Special Interest Group on Urogynecology

This hands-on course will provide each participant the opportunity to perform all aspects of several key laparoscopic and vaginal procedures in the field of reconstructive pelvic surgery. We will concentrate on laparoscopic sacrocolpopexy with synthetic mesh, paravaginal repair and uterosacral ligament suspension. The lab will emphasize identification of anatomic landmarks and safe dissection in the presacral, vesicovaginal, rectovaginal and retropubic spaces. Each participant will be able to practice laparoscopic suturing and knot tying, as well as the use of barbed suture and automatic suturing devices. There will be a limit of 3 participants per cadaver to maximize the laparoscopic experience. In addition to laparoscopic procedures, participants will be able to place retropubic, transobturator, and single-incision slings on the cadavers, as well as perform diagnostic cystoscopy. Participants will also get hands-on experience with transperineal, endovaginal, and endoanal ultrasound on the cadaver specimens.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Perform all steps of laparoscopic sacrocolpopexy and other reconstructive pelvic surgical procedures, including paravaginal repair and uterosacral ligament suspension; 2) perform the various steps involved with a variety of mid-urethral sling procedures, including retropubic, transobturator, and single-incision slings; and 3) describe how to perform various techniques of ultrasound in the field of urogynecology, including transperineal, endovaginal and endoanal approaches.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	P.L. Rosenblatt
12:35	LAB I: • Laparoscopic Dissection (Retropubic, Vesicovaginal, Rectovaginal, Presacral) • Laparoscopic Sacrocolpopexy • Laparoscopic Paravaginal Repair • Laparoscopic Uterosacral Ligament Suspension	
2:35	Break	
2:50	LAB II: • Sling Procedures (Retropubic, Transobturator, Single-Incision) • Cystoscopy • Ultrasound (Transperineal, Endovaginal, Endoanal)	
4:15	Questions & Answers	All Faculty
4:30	Adjourn	

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ANAT-607

CME

PELVIC ANATOMY ROADMAP

Surgical Navigation &
Repair of Complications

DIDACTIC | FEE: \$175.00 | 7:00AM - 11:00AM



Javier F. Magrina, Chair

FACULTY: Kristina A. Butler, Mario M. Leitao,
Paul M. Magtibay

This course provides a review of the intraperitoneal and retroperitoneal pelvic anatomy applied to MIS gynecologic surgery. Retroperitoneal anatomy as it applies to prevention of ureteral dissection, management of pelvic bleeding including presacral bleeding, prevention of nerve injuries, and dissection of lateral pelvic spaces are some of the anatomical details to be presented. In addition, management of urologic and bowel injuries with anatomical description will be presented.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Identify the retroperitoneal anatomy for the dissection of lateral pelvic spaces; 2) describe a plan and techniques for the control of pelvic and presacral bleeding; and 3) identify and discuss the principles of prevention and management of urologic and intestinal injuries.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	J.F. Magrina
7:05	Lateral Pelvic Wall: How to Navigate through the Lateral Spaces to Safely Identify Important Vessels and Nerves. Bleeding Control: Uterine and Hypogastric Artery Ligation	J.F. Magrina
7:30	Colorectal Anatomy, Role of Bowel Preparation and Management of Colorectal Injury	M.M. Leitao
7:55	Presacral Space: Anatomy, Dissection, Management of Presacral Bleeding, from Mild to Severe	K.A. Butler
8:20	Prevention and Repair of Urologic Injuries: A Must for All Gynecologists; Use of Cystoscopy	P.M. Magtibay
8:45	Questions & Answers	All Faculty
8:55	Break	
9:10	Parametrial Ureter: Anatomy: Ureteral Dissection, from Easy to Difficult	J.F. Magrina
9:35	Anatomy of Large Pelvic Vessels and Handling Major Vascular Injuries	M.M. Leitao
10:00	Retroperitoneal Nerves: Dissection, Identification, Sacral Nerve Roots, Prevention and Management of Nerve Injury	K.A. Butler
10:25	Aortic and Para-Aortic Anatomy in Gynecology: Dissection, Exposure, Vascular Anomalies	P.M. Magtibay
10:50	Questions & Answers	All Faculty
11:00	Adjourn	

ANAT-608

CME

HANDS-ON DISSECTION OF THE PELVIS AND RETROPERITONEAL ANATOMY:

A Prerequisite for Safe and
Efficient Surgery

CADAVERIC LAB | FEE: \$875.00 | 12:30PM - 4:30PM



Mario M. Leitao, Chair

FACULTY: Kristina A. Butler, John P. Diaz, Warner Huh,
Javier F. Magrina, Paul M. Magtibay, Rene Pareja,
Yukio Sonoda, Dinh Tri

This hands-on cadaveric lab is designed for both beginning and advanced minimally invasive gynecologic surgeons. Familiarity with pelvic and retroperitoneal anatomy is essential to optimizing safe and efficient gynecologic surgery. The lab will commence with dissection of the pelvic sidewall, identifying the pararectal and paravesical spaces to the levator spaces, followed by dissection of the ureter from the pelvic brim to the trigone, dissection of the pelvic vasculature, identifying the common iliac artery and vein, internal and external iliac artery and vein, deep circumflex vessels, deep inferior epigastric vessels, uterine vessel, obliterated umbilical artery, obturator vessels, branches of the posterior division of the internal iliac artery. Demonstration will include dissection of the pelvic nerves, identifying the obturator, genitofemoral, and ilioinguinal nerves along their entire course in the pelvis.

After the break, the lab will continue with dissection of the presacral space with identification of the bifurcation of the aorta and the location of the left common iliac vein; dissection of the pararectal space medial to the ureter with identification of Waldeyers fascia and the retrorectal space; dissection of the rectovaginal and vesicovaginal spaces; dissection of the Space of Retzius; completion of hysterectomy with vaginal cuff closure; cystotomy with repair. Participants will be able to complete hysterectomy and practice suturing. Throughout the course expert faculty will present tips and tricks for avoiding injury.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Dissect the avascular spaces of the pelvis to the levator muscles; 2) identify and trace the course of the ureter to avoid injury; and 3) identify the important vascular and neural anatomic structures of the pelvis and retroperitoneum.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	M.M. Leitao
12:35	LAB I: Pelvic Sidewall Dissection • Identify Pararectal and Paravesical Spaces to the Levator Spaces • Dissection of the Ureter • Dissection of Pelvic Vasculature, Identifying Key Arteries and Vessels • Dissection of Pelvic Nerves	
1:45	Questions & Answers	All Faculty
1:55	Break	
2:10	LAB II: Presacral Space Dissection • Dissection of Presacral Space, Identifying Neural Anatomic Structures • Dissection of Pararectal Space Medial to the Ureter • Dissection of Rectovaginal and Vesicovaginal Spaces • Dissection of Space of Retzius • Completion of Hysterectomy with Vaginal Cuff Closure • Cystotomy with Repair	
4:20	Questions & Answers	All Faculty
4:30	Adjourn	

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ENDO-609

CME

ENDOMETRIOSIS

Pathophysiology, Diagnosis,
Management and Prevention

DIDACTIC | FEE: \$175.00 | 12:30PM - 4:30PM



Anthony A. Luciano, Chair

FACULTY: Mauricio S. Abrao, Caterina Exacoustos, Charles H. Koh, Michael L. Sprague

Presented in affiliation with the American Society for Reproductive Medicine (ASRM) and the Society of Reproductive Surgeons (SRS) and in cooperation with the AAGL Special Interest Group on Reproductive Surgery/Endometriosis

This course will provide current information about the pathophysiology, diagnosis, management and prevention of endometriosis. Based on the clinical presentation of endometriosis, the physician will be able to determine the likelihood, location and extent of disease. In-depth presentations on pelvic ultrasound will include "tips and tricks" for identifying adenomyosis, deep infiltrative endometriosis, and ways to differentiate endometriomas from other pathologic ovarian cysts. The presentation on non-surgical management of endometriosis will review the role of traditional and experimental medications, including SERMs, SPRMs and alternative therapies in the short- and long-term management of disease. Surgical tutorials and videos will be included to demonstrate basic and advanced laparoscopic techniques in the resection and ablation of peritoneal implants, deep infiltrative endometriosis, ovarian endometriomas, and disease involving gastrointestinal, urinary and extra-abdominal organs. Panel discussions will identify best medical and surgical therapies, the role of complimentary therapies and how to reduce recurrences of disease to avoid repeated surgeries. Participants and faculty will be asked to present interesting cases for review.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Explain why endometriosis develops in some women and not others, and the genetic, hormonal and environmental factors that predispose to the development and recurrence of endometriosis; 2) describe the symptoms and findings that suggest the diagnosis, the location and extent of endometriosis by appropriate utilization of medical history, pelvic examination and vaginal probe ultrasound; and 3) describe the most effective surgical and non-surgical therapies, including complimentary therapies in the management of endometriosis to improve fertility, reduce pain and minimize recurrence of disease.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	A.A. Luciano
12:35	Pre-Course Test (10 Questions)	
12:45	Pathogenesis: Genetics, Immunology, Organic, Hormonal	A.A. Luciano
1:10	Clinical Presentation: Symptoms, Physical Findings	M.L. Sprague
1:35	Imaging for Adenomyosis, Ovarian and Deep Infiltrative Endometriosis	C. Exacoustos
2:00	Questions & Answers/Case Presentations Clinical or Pathologic Diagnosis Can We Treat without a Pathologic Diagnosis?	All Faculty
2:15	Break	
2:30	Endometriosis and Infertility – New Challenges	M.S. Abrao
2:55	Non-Surgical Management: Traditional and Emerging Medical Therapies	A.A. Luciano
3:20	Surgical Management – Basic and Advanced Techniques: Peritoneal, Ovarian, GI, GU	C.H. Koh
3:45	Questions & Answers/Interesting Case Presentations	All Faculty
4:20	Post-Course Test (10 Questions)	
4:30	Adjourn	

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PELV-610

CME

DECODING PELVIC PAIN

A Practical Approach to
Everyday Practice

DIDACTIC | FEE: \$175.00 | 12:30PM - 4:30PM



Mario Castellanos, Chair

FACULTY: Sawsan As-Sanie, Diana T. Atashroo,
Loretta Robertson

Presented in affiliation with the International Pelvic Pain Society (IPPS) and in cooperation with the AAGL Special Interest Group on Pelvic Pain

Chronic pelvic pain is a highly prevalent but challenging diagnosis responsible for ten percent of all referrals to gynecologists. This course provides a practical approach to patients with chronic pelvic pain that can be incorporated into every day practice. It is designed to help participants decipher seemingly vague symptoms and recognize subtleties to formulate a differential diagnosis and develop an appropriate treatment plan. In addition, the faculty will review the evidence behind treatment options and provide a guide to procedures for treating certain pain conditions. The presentations will explain key concepts using clinical scenarios that may be commonly encountered in a gynecology practice. The program will include videos to augment the lectures and will conclude with a live demonstration of a musculoskeletal examination of the pelvic floor using an interactive simulator.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Formulate a pertinent and comprehensive differential diagnosis for chronic pelvic pain based on presentation and physical examination findings; 2) describe appropriate treatment options and the evidence behind surgical management of certain pelvic pain conditions; and 3) integrate a pelvic muscular examination into the evaluation of chronic pelvic pain patients and develop a foundation to identify musculoskeletal components of pain.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	M. Castellanos
12:35	A Practical Approach to Understanding and Evaluating the Chronic Pelvic Pain Patient	D.T. Atashroo
1:00	The Evil Quadruplets: It's Not Just Endometriosis	S. As-Sanie
1:25	Spasms of the Pelvic Floor: An Overlooked Source of Pelvic Pain	L. Robertson
1:50	When Vaginal Mesh Causes Pain: How to Treat and When to Remove	M. Castellanos
2:15	Questions & Answers	All Faculty
2:25	Break	
2:40	Effective Surgical Treatments for Chronic Pelvic Pain: What Is the Evidence?	D.T. Atashroo
3:05	Painful Scars and Pelvic Neuropathies: A Guide to Nerve Blocks and Trigger Point Injections	M. Castellanos
3:30	When All Else Fails	S. As-Sanie
3:55	Where Is the Pain? Teaching the Musculoskeletal Pelvic Exam Using an Interactive Simulator	L. Robertson
4:20	Questions & Answers	All Faculty
4:30	Adjourn	

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PRCP-611

CME

MASTERING MENTORSHIP!

Become a More Effective Fellowship Preceptor

DIDACTIC | FEE: \$175.00 | 12:30PM - 4:30PM



**Danielle E. Luciano,
Magdy P. Milad, Chairs**

FACULTY: Joanna Cain,
Gary N. Frishman, Nancy Gaba

This course will provide a scaffold to operationalize an effective fellowship in minimally invasive gynecology. It is designed for surgeons interested in starting a fellowship or current preceptors interested in enriching their fellowship. Topics will include the following: developing a curriculum and recruiting faculty, participating in the application/match process, funding a fellowship, promoting research, and fostering a successful learning environment for your fellow. Tips on how to be an effective surgical mentor and how to provide feedback and debrief will be shared as well. These topics were chosen based on a survey of current fellows and preceptors, to determine which will be the most valuable to our audience. The didactic lectures and group discussions are both designed to be informative and interactive.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Design a curriculum for a Fellowship in Minimally Invasive Gynecology; 2) Explain how to recruit and promote excellent faculty and fellows; and 3) Discuss and review the characteristics of an effective mentor, including: providing feedback, fostering learning, and assisting with career development.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	D.E. Luciano, M.P. Milad
12:35	Development of Curriculum and Educational Objectives	G.N. Frishman
1:00	Fellowship Funding and Program Budgets	N. Gaba
1:25	Fellow Recruitment, Selection, NRMP (Match)	M.P. Milad
1:50	Creating Research Opportunities	D.E. Luciano
2:15	Questions & Answers	
2:25	Break	
2:40	Mentorship, Faculty and Fellows	J. Cain
3:05	Fellow Evaluation and Teaching Techniques, Giving Feedback, Debriefing	N. Gaba
3:30	Academic and Technical Remediation for Fellows in Trouble	G.N. Frishman
3:55	Recruiting Faculty and Motivating Them to Teach	J. Cain
4:20	Questions & Answers	
4:30	Adjourn	

FULL DAY

SKIL-700

CME

HOW DO YOU
MEASURE UP?

ASSESS Your Skills

DIDACTIC/SIMULATION LAB | FEE: \$650.00 | 7:00AM - 4:30PM



Ernest G. Lockrow, Chair

FACULTY: Grace Chen, Susan G. Dunlow, Douglas Miyazaki, Brent E. Seibel, Sangeeta Senapati, M. Jonathon Solnik

Presented in affiliation with the American College of Obstetricians and Gynecologists (ACOG)

This course was developed in collaboration with the ACOG Simulations Consortium and is specifically designed to assess gynecologic surgeons in all levels of training on various gynecologic surgeries. The modules used from the Advanced Surgical Simulation and Endoscopic Surgical Simulation (ASSESS) Course include: Vaginal Hysterectomy, Laparoscopic Hysterectomy and Retropubic Slings. Whether you are a current expert in the field of gynecologic surgery or have not been able to perform minimally invasive surgical procedures such as vaginal hysterectomy, laparoscopic surgery or retropubic slings, this course will afford you the opportunity to assess your current level of expertise in gynecologic surgery. This is a hands-on course utilizing moderate fidelity simulation models from industry that you will be able to perform an actual vaginal hysterectomy, laparoscopic hysterectomy and retropubic sling. The course is an ABOG Maintenance of Certification (MOC) approved simulation course that will afford the participants credit during their MOC cycle.

LEARNING OBJECTIVES: At the conclusion of this course, the clinicians will be able to: 1) Assess their skills in performing laparoscopic hysterectomy; 2) assess their skills in performing vaginal hysterectomy; and 3) assess their skills in performing retropubic slings.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	E.G. Lockrow
7:15	Laparoscopic Hysterectomy	S. Senapati
7:45	Complications of Laparoscopy	E.G. Lockrow
8:30	Questions & Answers	All Faculty
8:45	Break	
9:00	LAB I: Using the Limbs and Things Model: Group A Performs Laparoscopic Hysterectomy, Group B Performs Laparoscopic Suturing Skills	
10:50	Questions & Answers	
11:00	Adjourn/Lunch	
AFTERNOON SESSIONS		
12:30	Vaginal Hysterectomy	M.J. Solnik
1:15	Retropubic Slings	D. Miyazaki
2:00	Questions & Answers	All Faculty
2:15	Break	
2:30	LAB II: Using the MIYA Model: Group A Performs Vaginal Hysterectomy, Group B Performs Retropubic Slings	
4:15	Wrap-Up	
4:30	Adjourn	

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HSC-701

CME

INTEGRATING HYSTEROSCOPY INTO YOUR PRACTICE

A Practical Approach

DIDACTIC/SIMULATION LAB | FEE: \$500.00 | 7:00AM - 2:30PM



FACULTY: Aarathi Cholkeri-Singh, T. Justin Clark, Martin Farrugia, Matthew R. Hopkins, Maria Teresa Tam

This course provides a combination of information and practical exercises which will help participants to integrate diagnostic and therapeutic hysteroscopy in your daily practice, both in the office and in the OR environment. The expert faculty will guide participants through pathology-based procedures and introduce the latest technical information on new treatments, which they can practice during the lab workshops of the course. Furthermore, an up-to-date overview of what has been proven will be presented.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Identify and select patients best suited for office- and OR-based hysteroscopic procedures; 2) assess pathology-based specific treatment chances and problems; and 3) integrate new technologies in their daily practice.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	M.H. Emanuel
7:05	Conventional Techniques and Tissue Removal Systems	A. Cholkeri-Singh
7:30	LAB I: Forceps and Scissors	
8:20	High Frequency Electrosurgery and Global Ablation	M. Farrugia
8:40	LAB II: High Frequency Electrodes and Global Ablation 1	
9:40	Polypectomy	T.J. Clark
10:00	LAB III: Tissue Removal Systems	
10:50	Questions & Answers	All Faculty
11:00	Adjourn/Lunch	
12:30	Myomectomy	M.H. Emanuel
12:55	LAB IV: Resectoscopy and Global Ablation 2	
2:10	Questions & Answers	All Faculty
2:30	Adjourn	

SUTR-702

CME

LAPAROSCOPIC SUTURING

Practical Applications for Tissue Re-approximation, Knot Tying and Suturing Technologies

SIMULATION LAB | FEE: \$375.00 | 7:00AM - 11:00AM



Jin Hee (Jeannie) Kim, Chair

FACULTY: Uchenna C. Acholonu, Krisztina I. Bajzak, Dina J. Chamsy, Erica Dun, Lydia E. Garcia, Jamie Kroft, Grace Y. Liu, Emad M. Mikhail, Nash S. Moawad, Jessica M.B. Ritch, Khara Simpson, Kimberly A. Swan, Mireille Truong, Johnny Yi

This course will provide an introduction to basic and advanced laparoscopic suturing techniques in a dry lab setting and is designed for participants wanting to expand their laparoscopic suturing skills. This course will present a variety of techniques for needle loading and tissue re-approximation from different port configurations in laparoscopic box trainers. Techniques and clinical applications for extra-corporeal, intra-corporeal knot tying, and running suturing techniques relevant to vaginal cuff closure, myomectomy, and cystotomy repair will be presented. In addition, various applications of different suture materials and alternative suturing devices and technologies utilized in gynecologic laparoscopy will be reviewed. This course will aim to present the material in a systematic fashion with concrete and focused objectives throughout the session. Faculty will provide an interactive environment to meet the needs of the individual, critical to effective learning. This course is designed for the practical gynecologist to help determine which suturing techniques will work best in his or her surgical practice.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Explain how to overcome the obstacles to laparoscopic suturing and knot tying in relation to depth perception and port placement; 2) reproduce efficient techniques for laparoscopic tissue re-approximation, suture management, and running closures; 3) recognize and perform efficient intra-corporeal and extra-corporeal knot tying, the common mistakes encountered, and how to correct them; and 4) compare and distinguish potential benefits of suturing technologies and devices used in laparoscopy.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	J.H. Kim
7:05	Pre-Test (3 minutes)	All Faculty
7:20	Handling Suture and Needle, Intra-Corporeal Knot Tying	N.S. Moawad
7:35	LAB I: Drills, Needle Loading, Intra-Corporeal Knot Tying	All Faculty
8:05	Improve Efficiency and Avoid Errors	N.S. Moawad
8:20	LAB II: Continuous Suturing, Advanced Skills	All Faculty
8:50	Questions & Answers	All Faculty
9:00	Break	
9:15	Extra-Corporeal Knot Tying	J.H. Kim
9:25	LAB III: Extra-Corporeal Knot Tying	All Faculty
9:50	Suture Types and Characteristics; Suturing Devices	J.H. Kim
10:05	Post-Test	All Faculty
10:20	LAB IV: Troubleshooting, Supra-Pubic Approach, Barbed Suture and Suturing Devices	All Faculty
10:50	Questions & Answers	
11:00	Adjourn	

SUTR-703

CME

LAPAROSCOPIC SUTURING

Practical Applications for Tissue Re-approximation, Knot Tying and Suturing Technologies

SIMULATION LAB | FEE: \$375.00 | 12:30PM - 4:30PM



Nash S. Moawad, Chair

FACULTY: Uchenna C. Acholonu, Krisztina I. Bajzak, Dina J. Chamsy, Erica Dun, Lydia E. Garcia, Jin Hee (Jeannie) Kim, Jamie Kroft, Grace Y. Liu, Emad M. Mikhail, Jessica M.B. Ritch, Khara Simpson, Kimberly A. Swan, Mireille Truong, Johnny Yi

This course will provide an introduction to basic and advanced laparoscopic suturing techniques in a dry lab setting and is designed for participants wanting to expand their laparoscopic suturing skills. This course will present a variety of techniques for needle loading and tissue re-approximation from different port configurations in laparoscopic box trainers. Techniques and clinical applications for extra-corporeal, intra-corporeal knot tying, and running suturing techniques relevant to vaginal cuff closure, myomectomy, and cystotomy repair will be presented. In addition, various applications of different suture materials and alternative suturing devices and technologies utilized in gynecologic laparoscopy will be reviewed. This course will aim to present the material in a systematic fashion with concrete and focused objectives throughout the session. Faculty will provide an interactive environment to meet the needs of the individual, critical to effective learning. This course is designed for the practical gynecologist to help determine which suturing techniques will work best in his or her surgical practice.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Explain how to overcome the obstacles to laparoscopic suturing and knot tying in relation to depth perception and port placement; 2) reproduce efficient techniques for laparoscopic tissue re-approximation, suture management, and running closures; 3) recognize and perform efficient intra-corporeal and extra-corporeal knot tying, the common mistakes encountered, and how to correct them; and 4) compare and distinguish potential benefits of suturing technologies and devices used in laparoscopy.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	N.S. Moawad
12:35	Pre-Test (3 minutes)	All Faculty
12:50	Handling Suture and Needle, Intra-Corporeal Knot Tying	N.S. Moawad
1:05	LAB I: Drills, Needle Loading, Intra-Corporeal Knot Tying	All Faculty
1:25	Improve Efficiency and Avoid Errors	N.S. Moawad
1:50	LAB II: Continuous Suturing, Advanced Skills	All Faculty
2:20	Questions & Answers	All Faculty
2:30	Break	
2:45	Extra-Corporeal Knot Tying	J.H. Kim
2:55	LAB III: Extra-Corporeal Knot Tying	All Faculty
3:20	Suture Types and Characteristics; Suturing Devices	J.H. Kim
3:35	Post-Test	All Faculty
3:50	LAB IV: Troubleshooting, Supra-Pubic Approach, Barbed Suture and Suturing Devices	All Faculty
4:20	Questions & Answers	
4:30	Adjourn	

HYST-704

CME

LAPAROSCOPIC HYSTERECTOMY

Tips and Tricks from the Masters

DIDACTIC | FEE: \$175.00 | 7:00AM - 11:00AM



Frank W. Jansen, Chair

FACULTY: Amy N. Broach, Sarah L. Cohen, Kimberly A. Kho, Cara R. King, Suketu Mansuria, Lukas van den Haak

This course is designed to provide participants with a systematic and comprehensive overview of laparoscopic hysterectomy from leading experts in the field. The course will focus on practical skills that will help surgeons become more efficient and safe, as well as advanced surgical strategies to tackle more difficult cases (i.e., large fibroid uteri, adhesions, etc.) without conversion. The course will emphasize education using surgical videos to enhance the applicability of the techniques taught and demonstrate practical utilization of these methods. Participants will bridge the gap that separates novice from expert surgeons through a thoughtful overview of proper surgical technique, retroperitoneal anatomy, complication avoidance and management, laparoscopic suturing, and laparoscopic instrumentation. The afternoon cadaveric lab will include the opportunity to immediately apply skills presented in the didactic course to the "real world."

In order to support AAGL's tissue extraction statement, this course will discuss the following tissue extraction methods: Contained vaginal morcellation, contained minilaparotomy morcellation and contained power morcellation.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Describe and perform fundamental laparoscopic skills, including but not limited to, identification and dissection of the retroperitoneal space, laparoscopic ureterolysis, laparoscopic suturing, and refining surgical strategies for success when faced with intra-operative challenges; 2) demonstrate the proficiency to identify retroperitoneal anatomy, especially the uterine artery from its origin, in order to complete difficult cases and minimize conversion to laparotomy; and 3) employ time-tested tips and tricks to improve surgical efficiency and patient outcomes.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	F.W. Jansen
7:05	How Do I Know That I'm Performing my Laparoscopic Hysterectomy Optimally?	F.W. Jansen
7:30	Tips & Tricks to Make You a Laparoscopic Superstar!	A.N. Broach
7:55	Practical Review of Retroperitoneal Anatomy	S. Mansuria
8:20	Laparoscopic Instrumentation: The Pros and Cons of Different Energy Devices	K.A. Kho
8:45	Questions & Answers	All Faculty
8:55	Break	
9:10	Advanced Techniques for Tackling the Large Uterus or Complex Pelvis	S. Mansuria
9:35	Laparoscopic Suturing and Cuff Closure: Make It Simple	C.R. King
10:00	How to Prevent and Identify Ureteral Complications	L. van den Haak
10:25	Alternatives to Laparoscopic Power Morcellation	S.L. Cohen
10:50	Questions & Answers	
11:00	Adjourn	

HYST-705

CME

LAPAROSCOPIC HYSTERECTOMY

Tips and Tricks from the Masters

CADAVERIC LAB | FEE: \$875.00 | 12:30PM - 4:30PM



Suketu Mansuria, Chair

FACULTY: Amy N. Broach, Sarah L. Cohen, Amanda M. Ecker, Christopher Eswar, Frank W. Jansen, Kimberly A. Kho, Cara R. King, Lukas van den Haak

This intensive cadaveric lab will provide extensive hands-on proctoring by experienced laparoscopic surgeons, allowing participants the opportunity to enhance and acquire skills, which will be used in real time on a cadaver. Participation will be limited to three attendees per cadaver, maximizing educational opportunity. With emphasis on proper surgical technique, retroperitoneal dissection (ie. ureterolysis and development of the avascular spaces of the retroperitoneum for ligation of the uterine artery at its origin), and complication recognition/management, a systematic approach to laparoscopic hysterectomy will be introduced. Additionally, focused instruction on laparoscopic suturing techniques and recognition of key anatomical landmarks will be encouraged to refine the participant's skill set. The cadaveric dissections and focus of this course will be straight stick laparoscopy, though the skill sets and surgical principles taught can be applied to other surgical modalities (i.e. robotics and single port). A robot will be available for independent dry-lab activities.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Apply proper surgical techniques to reduce complications during laparoscopic hysterectomy, as well as decrease conversions to laparotomy; 2) use knowledge of retroperitoneal anatomy to facilitate completion of difficult hysterectomies; and 3) demonstrate proficiency in laparoscopic suturing.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	S. Mansuria
12:35	LAB I: Retroperitoneal Dissection, Development of Avascular Spaces of Pelvic Sidewall, Identification of the Uterine Artery from Its Origin, Ureterolysis	
1:45	Questions & Answers	All Faculty
1:55	Break	
2:10	LAB II: Hysterectomy, Colpotomy, and Cuff Closure	
4:20	Questions & Answers	All Faculty
4:30	Adjourn	

VHYS-706

CME

VAGINAL HYSTERECTOMY

The Technique That Touches All Bases: Safe, Efficient, and Frugal, with Superior Cosmesis

DIDACTIC | FEE: \$175.00 | 7:00AM - 11:00AM



Johan van der Wat, Chair

FACULTY: Michael D. Moen, Marco A. Pelosi, II, Raymond J. Reilly

Presented in affiliation with the Society of Gynecologic Surgeons (SGS) and in cooperation with the AAGL Special Interest Group on Vaginal Surgery

Vaginal hysterectomy is the procedure for the connoisseur, as it touches all bases. It is safe, efficient and frugal with superior cosmesis, and has proven to be one of the best ways to extirpate the uterus. With the current controversy raging around uterine morcellation, the vaginal approach should be strongly considered as it avoids hazardous intra-abdominal morcellation. Mastering the vaginal hysterectomy technique will empower the surgeon to address both the issue of morcellation and cost containment. Experienced experts will teach advanced surgical techniques including safe morcellation, and demonstrate innovative technology to simplify the procedure. Concomitant adnexal and prolapse surgery will be addressed and the participant will be made fully aware of how to manage potential complications.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Describe the advantages of vaginal hysterectomy compared to other procedures, especially in the current environment which encourages frugality and vaginal morcellation; 2) describe the required steps to complete a successful vaginal procedure, including adnexectomy, oophorectomy, and uterine morcellation for the enlarged uterus; 3) manage concomitant procedures like genital prolapse correction and vaginal apex support; and 4) demonstrate techniques to prevent, recognize, and manage complications associated with vaginal hysterectomy.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	J. van der Wat
7:05	Vaginal Hysterectomy – Safe, Efficient and Frugal: The Evidence and Current Status	J. van der Wat
7:30	Step-by-Step Simplified Technique for Vaginal Hysterectomy	M.A. Pelosi
7:55	Vaginal Adnexectomy and Management of Concomitant Pelvic Disease: When Will a Laparoscopy Be Needed?	R.J. Reilly
8:20	Essential Pelvic Anatomy – Prolapse Correction and Apical Support during Vaginal Hysterectomy	M.D. Moen
8:45	Questions & Answers	
8:55	Break	
9:10	Recognition and Management of Complications and Rescue Technique for the Failed Vaginal Hysterectomy	M.A. Pelosi
9:35	Current Surgical Technology and Innovations to Overcome Challenges in Difficult Cases	R.J. Reilly
10:00	Same-Day Discharge: Essential Protocols and Management	M.D. Moen
10:25	Dealing with a Large Uterus: Vaginal Morcellation and Debulking	M.A. Pelosi
10:50	Questions & Answers	
11:00	Adjourn	

VHYS-707

CME

VAGINAL HYSTERECTOMY

Mastering the Original Minimally Invasive Approach to Hysterectomy

CADAVERIC LAB | FEE: \$875.00 | 12:30PM - 4:30PM



Michael D. Moen, Chair

FACULTY: Veronica Lerner, Marco A. Pelosi, II, Raymond J. Reilly, Johan van der Wat

Presented in affiliation with the Society of Gynecologic Surgeons (SGS) and in cooperation with the AAGL Special Interest Group on Vaginal Surgery

This hands-on lab utilizing cadavers and simulation models will provide participants with the opportunity to perform the essential steps required for successful completion of vaginal hysterectomy and adnexectomy for the non-prolapsed uterus, from start to finish with an expert vaginal surgeon. Participants will become familiar with the latest available surgical techniques, devices and instrumentation to facilitate safety and efficiency with the difficult vaginal hysterectomy.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Demonstrate how to maximize exposure and visualization with available devices and tools; 2) recognize correct tissue planes for entry into the anterior and posterior cul-de-sacs; and 3) perform techniques to facilitate vaginal adnexectomy.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	M.D. Moen
12:35	LAB I: Cadaveric • Patient Positioning in Vaginal Surgery • Maximizing Exposure (Traditional and Magrina-Bookwalter Vaginal Retractors) • Entry into Cul-de-Sac • Control of Vascular Pedicles • Morcellation of the Large Uterus • Removal of the Adnexae • Support of the Vaginal Cuff • Cystotomy Repair	
1:45	Questions & Answers	All Faculty
1:55	Break	
2:10	LAB II: Simulation Models • Patient Positioning in Vaginal Surgery • Maximizing Exposure (Traditional and Magrina-Bookwalter Vaginal Retractors) • Entry into Cul-de-Sac • Control of Vascular Pedicles • Morcellation of the Large Uterus • Removal of the Adnexae • Support of the Vaginal Cuff • Cystotomy Repair	
4:20	Questions & Answers	All Faculty
4:30	Adjourn	

ONC-708

CME

REDUCING ERRORS AND OPTIMIZING SURGICAL QUALITY

Oncology Pearls for the Gynecologist

DIDACTIC | FEE: \$175.00 | 7:00AM - 11:00AM



Amanda Nickles Fader, Chair

FACULTY: David M. Boruta, William M. Burke, Noah A. Goldman, Edward J. Tanner

Presented in cooperation with the AAGL Special Interest Group on Oncology

Morbidity and mortality in patients undergoing surgical procedures may, in most cases, be preventable. These “preventable” issues range from individual errors in surgical technique and perioperative decision making to system errors in the operating room or hospital. As gynecologic surgical patients become more complex and the current health care climate mandates that medical errors are kept to a minimum, it will become increasingly important for the minimally invasive gynecologic surgeon to understand these issues and to adopt best practices and advanced techniques to optimize quality and safety. Principles for avoiding preventable harm and optimizing patient safety and quality in minimally invasive gynecology surgery are the focus of the course. Pelvic anatomy, advanced surgical technique, management of complex surgical patients and avoidance of complications will be emphasized. Participants will be taught best practices in patient safety and quality in minimally invasive gynecology surgery so they may decide what strategies they may wish to incorporate into their practices.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Formulate an evidence-based critical appraisal of laparoscopic abdominal access techniques; 2) discuss abdominal techniques in special populations: the obese, pregnant or surgically complex patient; 3) identify and restore pelvic anatomy reliably in challenging situations; 4) review tips and tricks to avoid laparoscopic complications and review their management; and 5) discuss principles in surgical quality, surgical site infection and patient safety as they apply to the MIS gynecologic patient.

COURSE OUTLINE

7:00	Welcome, Introductions and Course Overview	A. Fader
7:05	Value-Based Care in Gynecologic Surgery: Why Minimally Invasive Surgery Matters	A. Fader
7:30	Optimal Positioning and Laparoscopic Access in the Morbidly Obese, Pregnant or Surgically Complex Patients: Cases and Discussion	E.J. Tanner
7:55	Advanced Pelvic Anatomy: The Retroperitoneum, Ureters and Challenging Bladder	W.M. Burke
8:20	Step-by-Step TLH: Avoiding the Pitfalls	D.M. Boruta
8:45	Questions & Answers	All Faculty
8:55	Break	
9:10	Avoiding Bladder and Ureteral Injuries...and How to Manage Injuries Should They Occur	N. A. Goldman
9:35	Small Bowel and Rectal Injuries: Avoidance and Surgical Pearls for Intestinal Repair	D.M. Boruta
10:00	Minimizing Trocar and Vascular Injuries	W.M. Burke
10:25	Principles in Preventable Harm and Patient Safety: Reducing Surgical Site Infection, DVT and Readmissions	A. Fader
10:50	Questions & Answers	All Faculty
11:00	Adjourn	

ONC-709

CME

ADVANCED PELVIC ANATOMY AND HYSTERECTOMY

Reducing Errors and Optimizing Surgical Quality

CADAVERIC LAB | FEE: \$875.00 | 12:30PM - 4:30PM



David M. Boruta, Chair

FACULTY: William M. Burke, Nicole C. Fleming, Noah A. Goldman, Amanda Nickles Fader, Stephanie Ricci, Abdulrahman Sinno, Rebecca Stone, Edward J. Tanner

Presented in cooperation with the AAGL Special Interest Group on Oncology

This hands-on course will provide each participant the opportunity to develop skills and proficiency with a variety of laparoscopic and robotic pelvic surgery procedures. An emphasis on optimizing patient safety through utilization of meticulous surgical techniques and avoidance of visceral organ injury will be taught. Specifically, techniques in alternative abdominal access will be reviewed, including Hasson, left upper quadrant, and other approaches. Advanced techniques in retroperitoneal dissection, ureterolysis, laparoscopic and robotic hysterectomy and suturing will be emphasized. Additionally, tips and tricks for bowel and bladder repair will be highlighted. At the end of the course, the participant will be able to demonstrate best practices and surgical principles for optimizing patient safety and outcome during laparoscopic and robotic gynecologic surgery.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Safely perform a variety of laparoscopic abdominal access techniques; 2) recognize the step-by-step approach to performing laparoscopic and robotic hysterectomy; 3) perform a comprehensive retroperitoneal and ureteral dissection; and 4) review surgical principles to avoid visceral injury and practice bladder and bowel repair techniques.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	D.M. Boruta
12:35	LAB I: Alternative Access Techniques • Hasson Entry, Optical Access, Left Upper Quadrant Techniques • Advanced Pelvic Anatomy Instruction • Retroperitoneal Dissection and Ureteral Dissection • Advanced Laparoscopic Hysterectomy • Suturing Techniques	
1:45	Questions & Answers	All Faculty
1:55	Break	
2:10	LAB II: Techniques to Avoid or Repair Injury • Avoiding Injury to Bladder, Bowel, Ureter and Blood Vessels • How to Repair These Structures Should an Injury Occur • Extensive Review of Techniques in: Cystoscopy, Ureteral Stent Placement, Cystotomy Repair, Repair of Small Bowel and Colon Injuries, and Handling of Vascular Injuries	
4:20	Questions & Answers	All Faculty
4:30	Adjourn	

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ADV-710

CME

PUSHING THE SURGICAL ENVELOPE

The Methods to Our Madness

DIDACTIC | FEE: \$175.00 | 12:30PM - 4:30PM



Ted T.M. Lee, Chair

FACULTY: Hye-Chun Hur, Alan M. Lam, Audrey T. Tsunoda

As gynecologic surgeons mature in experience and skill, few will leave their comfort zone and push the surgical envelope to take on challenges. Those who push the surgical envelope with sheer bravado alone risk failure and infamy. Surgeons who do succeed are those who adopt a methodical and systematic approach. Anatomy and exposure are frequently cited as the foundations of pelvic surgery. True mastery occurs in those who develop the ability to quickly formulate various strategic plans when confronted with anticipated as well as unexpected surgical difficulties.

There is certainly no shortage of challenging pathologies to push the surgical envelope in laparoscopic surgery. The obliterated anterior cul-de-sac from previous cesarean deliveries, or a frozen pelvis as a result of advanced endometriosis can both present very perplexing clinical quandaries. Likewise, broad ligament or cervical fibroids and ovarian remnants can present different types of challenges. Refining the skills to repair visceral injuries and control hemorrhage laparoscopically will help surgeons to minimize morbidities and decrease conversions to laparotomy.

This course will present these techniques through the use of surgical video which will illustrate strategies to overcome the difficulties associated with various anatomy distorting pathologies. Participants will develop a greater understanding of safe and effective approaches to the challenging surgical scenarios through lectures that are both evidence and experience based.

LEARNING OBJECTIVES: At the conclusion of this course, the clinician will be able to: 1) Articulate techniques to achieve peritoneal access in patients with extensive anterior abdominal wall adhesions as well as techniques necessary to overcome difficulties associated with laparoscopy in obese patients; 2) formulate anatomy-based strategies when confronting various challenging surgical scenarios such as frozen pelvis, cervical fibroid and dense uterine adhesions; 3) apply the principle behind the techniques in the identification, dissection of ureter and difficult ureterolysis; 4) integrate various techniques to optimize exposure during complex pelvic surgeries, and 5) discuss how to incorporate the techniques of detection and repair of visceral injuries in laparoscopy.

COURSE OUTLINE

12:30	Welcome, Introductions and Course Overview	T.T.M. Lee
12:35	Troubleshooting Approaches for Challenging, Peritoneal Access: Obesity and Abdominal Wall Adhesions, Mesh, etc.	H-C Hur
12:55	Optimizing Exposure in Challenging Surgical Scenarios in Gynecologic Laparoscopy	H-C Hur
1:15	Ureter Techniques in Identification, Dissection and Uretolysis	A.M. Lam
1:35	Prevention and Management of Surgical Bleeding in Gynecology	A.T. Tsunoda
1:55	Break	
2:15	Interactive Case Video Presentation 1 <i>Moderated by A.T. Tsunoda, T.T.M. Lee</i>	A.M. Lam, H-C Hur
2:35	Methodical Approach to the Obliterated Cul-de-Sac Aftermath or Prior Cesarean Section	T.T.M. Lee
2:55	Location Is Everything – The Challenges of Broad Ligament and Cervical Fibroid	A.T. Tsunoda
3:15	Laparoscopic Detection and Repair of GI and GU Injuries – A Game Changer	A.M. Lam
3:35	Unfreeze the Frozen Pelvis - Hysterectomy for Severe Endometriosis with Obliteration of Cul-de-Sac	T.T.M. Lee
3:55	Interactive Case Presentation 2 <i>Moderated by A.M. Lam, H-C Hur</i>	T.T.M. Lee, A.T. Tsunoda
4:15	Questions & Answers	All Faculty
4:30	Adjourn	

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SUTR-800

CME

SUTURA LAPAROSCÓPICA

Aplicación práctica para Re-aproximación de tejidos, Nudo Intra-corpóreo y Extra-corpóreo, Sutura Barbada y Tecnologías de Sutura

LABORATORIO DE SIMULACIÓN EN ESPAÑOL
FEE: \$375.00 | 7:00AM - 11:00AM



Jaime A. Albornoz, Chair

LAB PROCTORS: Francisco F. Carmona, Pedro F. Escobar, Carlos Fernandez-Ossadey, Emilio Fernandez-Ossadey, Helder C. Ferreira, William Kondo, Demetrio Larrain, Lionel Leroy, Miguel Luna Russo, Fernando Malavasi, Carlos Milan, Jose M. Mojarra-Estrada, Jaime Ocampo, Marco Pinho de Oliveira, Juan D. Villegas-Echeverri

Este curso de 4-horas será presentado en Español y entregará una introducción a las técnicas de sutura básica y avanzada, en un laboratorio de simulación utilizando pelvitainer, y esta diseñado para participantes que deseen expandir sus habilidades en sutura laparoscópica. Este curso presentará una serie de técnicas para aprender a tomar y manipular la aguja y re-aproximar tejidos desde trocates ubicados en distintas posiciones en los pelvitainers laparoscópicos. Se presentarán técnicas de nudo extra-corpóreo e intra-corpóreo y técnica de sutura continua, y sus aplicaciones clínicas en el cierre de la cúpula vaginal, suspensión de la cúpula vaginal, miomectomía y reparación de cistostomía. Además, se revisará la aplicación de diferentes materiales de sutura, incluyendo la sutura barbada. El participante también tendrá la oportunidad de trabajar con dispositivos de sutura utilizados en laparoscopia ginecológica. El objetivo de este curso es presentar la técnica en una forma simple, sistemática y reproducible. Los expertos proporcionarán un ambiente interactivo para resolver las necesidades de cada individuo, muy importantes para un adecuado aprendizaje. Este curso esta diseñado para la aplicación inmediata en la práctica profesional, de las técnicas de sutura y destrezas aprendidas.

OBJETIVOS DE APRENDIZAJE: Al finalizar este curso, el alumno será capaz de: 1) Reproducir en forma eficiente las técnicas para re-aproximación de tejidos por vía laparoscópica, manipulación de la aguja y suturas continuas; 2) realizar nudos intra-corpóreos y extra-corpóreos en forma eficiente, identificar los errores comunes que se presentan, y cómo corregirlos; 3) comparar y distinguir los beneficios potenciales de las tecnologías de sutura barbada y los dispositivos de sutura utilizados en laparoscopia y revisar las aplicaciones clínicas para el cierre de la cúpula vaginal, suspensión de la cúpula vaginal, miomectomía y reparación de cistostomía.

COURSE OUTLINE

7:00	Bienvenida, Introducción y descripción del Curso	J.A. Albornoz
7:05	Fundamentos para tomar la Aguja, Manipulación de la Sutura y Re-aproximación de Tejidos	J.A. Albornoz
7:25	LAB I: Re-aproximación de Tejidos, Manipulación de la Sutura, y Simulación de sutura continua para cierre de cúpula vaginal Objetivos: Demostrar eficiencia para tomar la aguja, re-aproximación de tejidos y manipulación de la sutura durante una sutura continua para cierre de cúpula vaginal.	
8:20	Técnicas de nudo Intra-corpóreo: Aplicaciones Clínicas, Errores comunes y cómo corregirlos	W. Kondo
8:40	LAB II: Nudo Intra-corpóreo Objetivos: Aprender y practicar habilidades simples y reproducibles para nudo intra-corpóreo, evitar los errores comunes y aprender a corregirlos, en caso que se presenten.	
9:40	Nudo Extra-Corpóreo, Selección de la sutura, Sutura Barbada, Tecnologías de sutura y sus aplicaciones clínicas	D. Larrain
10:00	LAB III: Nudo Extra-Corpóreo, Dispositivos y Tecnologías de Sutura Objetivos: Identificar los elementos críticos para realizar un nudo extra-corpóreo, errores comúnmente cometidos y cómo corregirlos; comparar y distinguir los beneficios potenciales de tecnologías y dispositivos de sutura utilizados en laparoscopia.	
10:50	Aplicaciones Clínicas: Preguntas, Respuestas y Evaluación del Curso	Todos los Expertos
11:00	Cierre del curso	