



Questions to Ask a Potential Endometriosis Excision Surgeon

Training & Experience

- How many endometriosis excision surgeries do you perform per month? Per year?
- Is excision surgery your primary focus, or do you also practice obstetrics, gynecologic oncology, infertility treatments, or other specialties?
- How long have you been specializing in endometriosis excision?
- Did you complete specialized training or a fellowship focused on advanced endometriosis surgery? Who did you train under?
- Do you regularly participate in ongoing education or surgical workshops on endometriosis excision?
- Do you work with a multidisciplinary surgical team (e.g. bowel surgeon, urologist, thoracic surgeon) for complex cases?
- What is your conversion rate to laparotomy (open surgery), and under what circumstances would you need to do this?
- Do you allow trainees, residents, or fellows to participate in surgery, and if so, to what extent?

Surgery Details & Logistics

- How long is your typical wait time for new patients and for scheduling surgery?
- Do you have a waitlist or cancellation list if surgery dates open up sooner?
- What types of imaging or pre-op workup do you require?
- Do you provide a detailed operative report and photos afterwards?
- What is your policy if my insurance doesn't cover excision surgery as in-network? Do you offer help with coding, appeals, or financing options?
- Where will the surgery take place? Do you operate at a hospital with experience in complex endometriosis surgery?

Surgery Approach & Philosophy

- Do you perform true excision (cutting lesions at the root) rather than ablation or cauterization?
- How do you identify and remove deep infiltrating endometriosis? Do you check all areas of the pelvis and abdomen?
- Do you inspect the diaphragm and chest cavity routinely?
- What is your complication rate, and what kinds of complications do you most commonly see?
- Do you believe in leaving ovaries or the uterus in place if they appear healthy?

Post-Op Care & Hormonal Management

- Do you typically recommend hormonal suppression after surgery? Why or why not?
- What types of post-op hormonal therapy do you prescribe if recommended (e.g. continuous birth control, GnRH agonists, progestins)?
- Would you support a hormone-free recovery period after surgery?
- What follow-up visits do you include post-op, and how will my progress be tracked?
- Do you work with pelvic floor physical therapists, pain management specialists, or nutritionists for a holistic, multidisciplinary post-op plan?

Research & Advocacy

- Do you contribute to any endometriosis research, guidelines, or surgical registries?
- Have you published or presented your surgical outcomes or techniques?
- Do you support patient education and advocacy — for example, do you encourage second opinions and informed decision-making?

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