DIAGNOSTIC ALGORITHM FOR ENDOMETRIOSIS

ASSESS PRESENCE OF SYMPTOMS AND PATIENT HISTORY

SYMPTOMS/INDICATORS CONSISTENT WITH ENDOMETRIOSIS:

- Chronic abdominal/pelvic pain or pressure
- Cyclic dyschezia and/or dysuria
- Dysmenorrhea

- Dyspareunia
- · Heavy menstrual bleeding
- Infertility
- · Positive family history

PERFORM PHYSICAL EXAMINATION

PHYSICAL INDICATORS THAT MAY BE PRESENT:

- Focal tenderness on vaginal examination
- Nodules in posterior fornix
- Adnexal masses
- Immobility or lateral placement of cervix or uterus

Physical examination may be normal; this should not rule out endometriosis if other suggestive signs or symptoms are present

PERFORM/ORDER IMAGING

TRANSVAGINAL ULTRASOUND FINDINGS CONSISTENT WITH ENDOMETRIOSIS INCLUDE:

- Nodules or masses
- Endometrioma(s)
- · Loss of normal sliding sign

Other imaging modalities that may be uselful include:

- · Transperineal ultrasound
- Transabdominal particularly for detection of intestinal endometriosis
- MRI higher specificity for diagnosis

DIAGNOSIS

PRESUMPTIVE

- Based on patient history, physical examination, and imaging results
- Preferred method of diagnosis whenever possible

SURGICAL (LAPAROSCOPY)

- · Previous gold standard
- No longer considered necessary for most patients

REFERENCES:

Ballard KD, et al. *BJOG*. 2008;115(11):1382-1391. Chapron C, et al. *Nat Rev Endocrinol*. 2019;15(11):666-682. Hickey M, et al.. Endometriosis. *BMJ*. 2014;348:g1752. Pereira AMG, et al. *J Obstet Gynaecol Can*. 2020;42(4):488-499.e4. Sinaii N, et al. *Fertil Steril*. 2008;89(3):538-545.

ABBREVIATION:

MRI: magnetic resonance imaging