



Surgeon Vetting Worksheet:

This worksheet is provided as an informational framework to help facilitate your surgeon selection - it is not comprehensive, but illustrates one framework.

Surgeon Name: _____

Are they qualified?

Where did they go to medical school? _____

Where did they do their residency? _____

Most importantly, how did they learn to do endometriosis surgery?*

*Who was their mentor in training them? (Write down the name. If not apparent, ask in person) Can you establish that they learned from someone who knows what they are doing? (ie, would you have surgery where they did their fellowship? Would you let their mentor do your surgery? If not, what qualifies them?)

Are they trustworthy?

Who are all the people in their practice? Who might operate on you?

Look up where everyone in the practice is licensed - if they hold a multi-state licensure, what states have they done a lot of surgery in? _____

Google their name and [state] medical board: _____

Google their name and "malpractice": _____

Google their name and "lawsuit" : _____

If it matters to you, establish their financial motives

Do they work for a hospital? Is it a for profit or not-for-profit hospital? Does their hospital have a track record of sending unexpected bills and putting people in collections? How do you feel about for-profit hospitals being involved in your care? _____

Do they work for a company? Is that company funded by private equity? (Google the name of the company (if it's something like "special women's health, google that, if it's something like "name name name at made up word" the Google their "made up word", plus "pitchbook" - this will tell you if they are owned or funded by private equity). Do they

have a history of unexpected bills or putting people in collections? How do you feel about private equity’s involvement in your care? _____

What’s their track record like?

Do other surgeons endorse them and refer to them? Do other surgeons work with them? Most importantly, do other endometriosis surgeons across the country have a relationship with them or endorse them? _____

What do their reviews say?

Keep in mind: A bad review that focuses on practice policies of somewhere they no longer work, complaints about the hospital, or frustrations with factors outside of the surgeon’s control are not necessarily bad, and should be taken with a grain of salt. (if they currently work there, that’s a different story...)

Conversely, a glowing review that states “it was so much worse than he/she expected and I needed a surprise bowel resection” or god forbid “it was worse than he/she expected and I need to come back for another surgery because the surgeon wasn’t prepared for that” is NOT a great review!! Surprises can happen but you should be prepared for them, and taking someone back because the surgeon wasn’t prepared or other staff was needed should be rare, and you should ask a surgeon about the risk of this if it is in their review history!

Be sure to consult multiple sources for your reviews. Someone may be a darling on Facebook and a pariah on Reddit or google, or visa versa. Get multiple opinions.

Review Summary:

Look for content by this person - instagram, YouTube, interviews, etc. Do they make you comfortable? Do you think you could trust them with the most intimate elements of your life?

If they pass the above, meet with them. If they don't pass the above, don't meet with them! The most common bad surgeries I've seen, the patient KNOWS the surgeon isn't qualified but they have surgery anyway because the doctor seemed trustworthy in person. Don't fall for this trap!

Vet them in person:

There are lots of lists of questions to ask - but the truth is, if you're using this sheet, you're probably only talking to surgeons who know that the answer you want to hear is "I only perform excision" even if it's not true of them. Doctors who think it's ok to perform incomplete or substandard surgery on you will also feel that it's ok to mislead you. So I recommend that you think about the questions that are most important to you about your care, and that you focus on watching HOW they answer your questions, WHAT they do in their evaluation, and how much attention they are paying to your case specifically. Here's an example.

What are the chances I will need a colostomy?

Option 1: you don't need a colostomy.

Option 2: the only cases where I perform a colostomy are in two categories: 1) when there is invasive rectal disease within five centimeters of the anal verge, in which case a protective temporary (8-12 week ostomy) is required. I feel very comfortable based on your imaging and/or symptoms that you don't have invasive disease in that part of your rectum. 2) if there is a bowel injury or anastomotic leak that is delayed and the subsequent management requires a temporary ostomy. I think that a bowel resection in your case is/isnt likely, and in my cases with bowel resections this has happened to me x times.

Option 2 is the right answer. It takes your concern seriously and answers honestly without dismissing you or rushing.

Do they answer your questions in an informative, open, and personalized manner demonstrating expertise, attention, and compassion? Write down examples:

Your surgeon should prepare. Watch them. Did they listen to your symptoms thoroughly enough that you feel like they actually know what's going on in your body and are prepared for the challenges they might face?

They MUST do imaging and they MUST review the images themselves. The only acceptable answers are ultrasound performed by the surgeon in office (if they are qualified) or MRI with the images reviewed by your surgeon. Did they do imaging and did they explain to you what they saw and what the implications were?

Ask who they would involve for different elements of your care. If you ask who they work with for a bowel resection, do they give a specific name? Do they have a track record of combined cases? Or will they call whoever is on call for general surgery or urology or whatever service? (established relationships and vetted colleagues are preferable).

What is the follow up plan? Do they have other providers they work with who will continue to help with management of pain after surgery? Will you still have a way to reach them if issues arise, even if you travelled for care?

Lastly, think about how you feel after the appointment. Do you feel like you're on a team with them? _____
