

46th AAGL Global Congress on MIGS

November 12-16, 2017

Gaylord National Resort and Convention Center National Harbor, Maryland (Washington, DC)



CALL FOR

ABSIRACIS

Scientific Program Chair: Sawsan As-Sanie, MD, MPH

President: Jon I. Einarsson, MD, PhD, MPH

IMPORTANT DATES

MARCH 1:

Call for Abstracts Opens

APRIL 15:

Last day to submit abstracts without charge

APRIL 16-MAY 1:

Abstracts are charged \$50 for submission

AUGUST 1:

Notification of assignment sent

www.aagl.org





The AAGL Scientific Program Committee invites you to submit an abstract or video for presentation at the 46th AAGL Global Congress of Minimally Invasive Gynecology. This year, the meeting will be held on **November 12-16**, **2017** at the Gaylord National Resort and Convention Center in National Harbor, Maryland (Washington, DC). The AAGL anticipates a large attendance at this meeting.

The Committee invites physicians, engineers, scientists, and operating room personnel, concerned with increasing the efficiency and effectiveness of medical care and research through development and utilization of gynecologic endoscopic instruments, devices, and systems, to submit oral or video abstracts.

Sharing research in minimally invasive gynecologic techniques and improving medical care are primary objectives of the Global Congress. This is accomplished through your abstract or video submission and sharing your experiences and outcomes with the AAGL. Last year we received a near record-breaking number of abstracts, including 875 submissions from authors around the world. The AAGL invited 300+ authors to be faculty for the 45th Global Congress. This contributed to an excellent scientific program with sessions that were often overflowing with attendees. Plan now to be on the faculty of this year's premier educational meeting.

The Call for Abstracts includes written (oral) and video abstracts, as well as scientific posters. You can submit each abstract type online.

The online abstract submission process the AAGL uses allows you to start your abstract, save it, complete it (at a later date, if necessary), and then submit it. Don't wait until the last moment and risk missing the deadline. We encourage you to begin your abstract now by entering the front-end information, disclosures, and a draft of the body. You can save it and come back later to revise and finish it for submission.

After the Call for Abstracts closes, the abstracts and videos are reviewed by members of the AAGL who have volunteered to review the submissions and grade them, using a standard grading scheme developed by the grading committee. Acceptance and assignment to a day and time on the scientific program will be announced on or before **August 1, 2017**. Registration for attending the 46th Global Congress must be completed by **September 1, 2017** if your abstract is accepted for presentation.

To accommodate the large number of abstracts that are submitted, and to fairly consider all abstracts while maintaining the standard of excellence that the AAGL is known for, following are the rules of the Call for Abstract program:

- Authors need not be members of the AAGL to submit or present abstracts or videos.
- We will only consider those abstracts and videos submitted online through our website at www.aagl.org.
- All submissions must be submitted in English. All text should use proper upper and lower case letters.
- Each author should have participated sufficiently in the work to take public responsibility for the content. The first author is the person who has contributed the most to the work, with other authors listed in descending order, according to their level of contribution. Disagreements about order need to be resolved by the authors, not the AAGL. The first author is presumed to be the presenting author. If he or she cannot attend the congress, please notify the AAGL as to which author will present the abstract. All authors must agree to the change in presenters, and any change in authors, or revisions to the abstract after the initial submission, must be approved by all authors.
- All communication about the abstract will be sent to the person named as Correspondence Contact who agrees to forward all communication received about the abstract to all authors.
- Authors and co-authors must disclose financial interest or affiliation with corporations. Having an interest in or affiliation with a corporate organization does not prevent you from submitting the abstract, but the relationship must be made known.
- Authors must disclose if their abstract or video contains "off label" use of medications or devices. The intent of this policy is to alert those hearing or viewing the study that the use is not recommended by the manufacturer.
- Work that has been published or presented elsewhere, including The Journal of Minimally Invasive Gynecology (JMIG), may be submitted, but information must be provided about where the work was presented or published. Work that has been published or presented elsewhere, including JMIG, will not be eligible for any awards.
- To encourage broad participation and diverse research, the Scientific Program Committee limits authors to no more than a total of 4 oral, video, or poster abstract submissions. You may be a co-author on other papers but you may not present those papers.
- Decisions by the Scientific Program Committee for abstract acceptance in the program are final.

Important Dates

The AAGL Call for Abstracts has been very successful over the last several years with an impressive number of abstracts submitted each year. To coordinate the grading of this many abstracts, we ask you to submit your abstract as early as possible. Abstracts may be submitted without charge from March 1 to April 15, 2017.

IMPORTANT DATES

Important Dates	Description	Notes
March 1 - April 15, 2017	Abstract Submissions	No charge to submit
April 15 - May 1, 2017	Late Submissions	\$50 Fee applied to each abstract
May 1, 2017	Final Day to Submit Abstracts	Abstract submission closes at 11:59 pm PDT

April 16 - May 1, 2017. To encourage authors to submit abstracts by April 15, a non-refundable processing fee of \$50 will be charged for all abstracts submitted between the dates of April 16 -May 1, 2017, regardless of when the abstract was started.

Monday, May 1, 2017 at 11:59 pm Pacific Daylight Time is the last day to submit an abstract. The program closes and will no longer be available for abstract submission.

We will adhere strictly to this deadline out of respect to the time graders have reserved to review abstracts and the time the Scientific Program Committee has to assign quality abstracts to the scientific program.

Instructions For Written Abstracts

Abstracts are the backbone of the scientific program. Through these submissions, new ideas are shared, discussed and improved. To access the online program to submit your abstract, you will need to use one of the following browsers:

- Microsoft Internet Explorer/Edge:
 Version 7, 8, 9 or 10 (Compatibility mode only)
- Safari: Version 6.0 or higher
- Mozilla Firefox: Version 4.0 or higher (free download at mozilla.org)
- Google Chrome: All versions

To handle all of these abstracts and to be sure we assign them to graders well-versed in your subject, we ask you to categorize your abstract as follows:

- Identify the type of abstract you are submitting. This will determine
 the grading criteria used to evaluate your abstract: Basic Science/
 Research/Education, Clinical Study or Instrumentation.
- 2. Assign your abstract to both a primary and secondary category listed below. This determines where the abstract will be assigned in the program, if accepted. You must select two categories for each abstract.

- · Basic Science/Research
- Endometriosis
- · Hysteroscopy, Endometrial Ablation and Sterilization
- · Laparoscopy Conventional
- Laparoscopy Obese Patients
- Laparoscopy Single-Port
- Laparoscopy Tissue Containment Technologies
- · New Instrumentation or Technology
- Oncology
- · Pelvic Pain
- Reproductive Medicine
- Robotics
- · Surgical Education
- Urogyn/Pelvic Floor Disorders
- · Vaginal Natural Orifice Surgery

Abstract Format

All written abstracts will be blinded during the grading process. The names of authors, hospital affiliations and locations will not be disclosed until after grading is completed, so do not reference them in the body of your abstract. Abstracts should be submitted in the following structured format:

- Study Objective: Begin with a clear, concise statement of the precise objective or question put forth in the study.
- $\boldsymbol{Design:}$ Describe the basic study design, and duration of any follow-up.
- Setting: Describe the study location and level of clinical care.
- Patients or Participants: State the manner of selection and numbers of patients who were enrolled in a completed study.
- Interventions: Describe the exact treatment or intervention.
- Measurements and Main Results: Describe the methods of assessing patients, and state the key results. This section must include data, even if preliminary.
- Conclusion: State clearly the conclusions and clinical applications that are supported by the data. Advise if additional study is required before this information should be used in clinical settings.

300 Word Maximum: The overall limit for all segments is 300 words. Each segment must be completed before the abstract can be successfully submitted. If any segment does not apply to your abstract, please enter N/A in the field.

Abbreviations used in abstracts must be defined. Abbreviations are permitted in titles if they immediately follow the term being abbreviated and are enclosed in parentheses. If used in the text, they should be defined at first mention if not already defined in the title.

ACCME guidelines require generic names be used for pharmaceuticals, biologics, and medical devices. The trade name of the particular product used in a study may be included in parentheses the first time the product is referenced. The trade name may be used if the product is the only one of its general type and use of the generic name would encumber the reader.

Review a printed copy of your abstract and make final revisions before you submit it. No changes can be made to the title, authors or body of the abstract after it has been submitted.

Sample Abstract

Each written abstract is assigned to multiple graders who are asked to read and grade the abstract using a system that assesses and awards points for:

- Scientific methodology
- · Weight of conclusions
- Degree of originality
- Pertinence to scientific program

When you have completed the abstract submission process, print a copy of your abstract and keep it for future reference.

A Novel Surgical Proctoring Model for Minimally Invasive Gynecology: Effect on Rate of Abdominal Hysterectomy and Outcomes at a Community Hospital

Brooke Winner, MD¹, Jonathan Dukes, PhD, MPH¹ and Scott Biest, MD¹. ¹Obstetrics and Gynecology, Washington University in St. Louis, St. Louis, Missouri.

Study Objective: To determine if a novel surgical proctoring model for minimally invasive gynecology affected rate of benign abdominal hysterectomy and outcomes of laparoscopic hysterectomy at a community hospital. Design: Retrospective cohort study. Setting: Academic affiliated community hospital. Patients: Patients undergoing hysterectomies performed for benign disease by general obstetrician gynecologists between 2010 and 2013. **Intervention:** A novel surgical proctoring model for minimally invasive gynecology started in 2011. In this model, a community hospital employed a minimally invasive specialist to assist general obstetrician-gynecologists in laparoscopic hysterectomies. Measurements and Main Results: A total of 1,611 hysterectomies were identified. Relative risk of abdominal hysterectomy in 2013 versus 2010 was 0.51 (CI 0.40-0.68). A total of 391 laparoscopic hysterectomies were analyzed for outcomes (proctored=212, non-proctored=179). Adjusted operative time for proctored cases was 42 min faster than non-proctored cases (CI -52 to -33). Rate of intraoperative organ injury was 1% versus 6% (p<0.01), ureteral injury 0% versus 3% (p=0.02), conversion to open 0% versus 5% (p<0.01), intraoperative consult 0.05% versus 7% (p<0.01), and length of stay 1.01 days versus 1.16 days (p<0.01) for proctored versus non-proctored cases, respectively. Relative risk of organ injury in the non-proctored group versus the proctored group was 6.5 (Cl 1.46-29). **Conclusion:** A novel surgical proctoring model for minimally invasive gynecology decreased rates of benign abdominal hysterectomy over three years at a community hospital. Proctored laparoscopic hysterectomies had shorter operative times, fewer intraoperative organ injuries, fewer ureteral injuries, fewer conversions to open, fewer intraoperative consults and shorter length of stay as compared to non-proctored cases.

Award Competitions for Written Abstracts

The AAGL supports a robust program of awards to acknowledge excellent research in advancing minimally invasive gynecology.

AWARDS - WRITTEN ABSTRACTS

Competition/ Award	Description	Submission Requirement	Eligibility
Golden Hysteroscope	Best Paper on Hysteroscopy	Abstract & Full Paper due Aug. 25	ALL
Jerome J. Hoffman	Best Paper on MIG by Resident/Fellow	Abstract & Full Paper due Aug. 25	Residents & Fellows
Jay M. Cooper	Best Paper on MIG	Abstract & Full Paper due Aug. 25	AAGL FMIGS Fellows Only (2012-2017)
IRCAD	Best Paper - Excellence in Education	Abstract & Full Paper due Aug. 25	AAGL FMIGS Fellows Only (2012-2017)

Selected Competitions require a written paper, due on August 25, 2017.

OPEN TO ALL

Golden Hysteroscope Award for the Best Hysteroscopy Paper – An engraved plaque. Supported by Olympus America Inc.

If you wish to enter the Golden Hysteroscope Award competition, please select the "Golden Hysteroscope" option. You will be required to submit a full manuscript on a hysteroscopic topic by August 25, 2017 to be considered. You may not submit more than one paper to this competition. (See page 7 for Golden Laparoscope Award.)

COMPETITION FOR RESIDENTS AND FELLOWS ONLY

Jerome J. Hoffman Award for the Best Paper on Minimally Invasive Gynecology – This competition is limited to physicians in training, i.e. residents and fellows. Supported by the Hoffman Endowment through the Foundation of the AAGL.

Only residents and fellows may enter this competition. If you want to have your paper considered for the Jerome J. Hoffman award, please select the "Jerome Hoffman" option.

You will be required to submit a full manuscript by August 25, 2017 and provide proof of residency or fellowship. You may not submit more than one paper to this competition. Award – A plaque, plus free registration for the $46^{\rm th}$ AAGL Global Congress in National Harbor.

COMPETITIONS FOR AAGL FMIGS FELLOWS ONLY

The AAGL also provides the following two competitions for Fellows who have participated in the Fellowship in Minimally Invasive Gynecologic Surgery (FMIGS) in acknowledgement of their achievements in leading the next generation of gynecologists. These competitions are open to current FMIGS



Presentation of the 2016 Golden Hysteroscope Award for Best Paper on Hysteroscopy at the $45^{\rm th}$ AAGL Global Congress.

fellows and those who completed the FMIGS program between 2012 and 2017. Previous winners of the Jay M. Cooper and IRCAD awards are not eligible to participate.

Please select the competition you want an abstract to be entered into in the online Call for Abstracts submission program. Each competition below requires a full paper to be submitted by August 25, 2017. You are eligible to enter your paper into only one competition, and may not submit more than one paper to any competition.

- Jay M. Cooper Endowed Award for the Best Paper on Minimally
 Invasive Gynecology A plaque, plus free registration and 2 nights
 accommodations at the AAGL 46th Global Congress in National Harbor.
 Supported by an educational grant from the Jay M. Cooper Endowment
 through the Foundation of the AAGL.
- IRCAD Award for Excellence in Education (Best Paper or Video) –
 The IRCAD award is presented to recognize the Best Research in Education acknowledging innovative ideas in teaching.
 Award winner receives one week of training fully paid at the IRCAD Institute in Strasbourg, France. Supported by an educational grant from KARL STORZ Endoscopy-America, Inc.

CATEGORY AWARDS

The competition for best abstract in each category is open to everyone. All abstracts are automatically entered, according to the category you select. Awards are given based on grading.

Instructions For Video Abstracts

Over 140 videos were selected for presentation at last year's Global Congress. This dynamic abstract format is used to show techniques that are often too time-consuming to explain. This section, divided into two subsections (Video Content and Video Submission), will explain the requirements and provide recommendations for submitting a quality video for consideration and inclusion into the scientific program.

VIDEO CONTENT

Video Length – Videos must be no longer than 6 minutes in length. This includes titles, video clips and your spoken narrative.

Slides - All video presentations must contain the following slides:

- Introduction Slide Title, Author(s) and Institution (Must appear in the first 5-10 seconds of the video)
- Patient Information Slide Detailing the intended purpose of the video. (This slide follows the Introduction Slide.)
- 3. Summary Slide (Acknowledgements) Appears at the end of the video.

 ${f Narration}$ – All video presentations must be edited and narrated and narration must be in English.

Music – Music is not permitted. Video abstracts submitted for the Global Congress are also automatically considered for inclusion in JMIG, which, for copyright reasons, may not accept music.

Non-Surgical Videos – Be sure all graphs, charts and statistics are clearly readable and verbally described.

The author(s) should assess the purpose of making the video and commit to presenting a clear and concise topic focused on one key element, rather than trying to cover too many elements. Below is some information to assist in making a high quality educational video.

Bonus Points (Highly Recommended) – Although the following elements are not required for video submission, videos which include as many of them that are applicable will also be eligible for bonus points during the grading process, thus raising their score and increasing the opportunity of being considered for the best video award. The AAGL highly recommends that the author use both visual and verbal means to educate the viewer and should make every effort to include the following:

- The use of visual labels and/or surgical illustrations.
- Inclusion of narration or visual aids to show the structural anatomy or landmarks contained within or bordering anatomic regions/spaces.
- Inclusion of narration or visual aids to show surgical dissections from beginning to end of a particular area or space and narration to describe the techniques being used (grasping and tenting, 'mm' incision, 'pushspread,' 'traction-countertraction,' gentle wiping, hydro-dissection, etc.)
- Narration describing concerns about the safety of the structural anatomy in the region of dissection.
- · Describe and show the importance of hemostasis in safe dissection in

- order to keep the surgical field clean and clear.
- Describe anatomic and surgical dissection concerns with tissue excisions.
- · Describe suturing techniques.
- Keep your editing concise as to take the viewer through a series of steps or chapters in your thought process.

Remember, the goal is to assist the viewer both visually and verbally in understanding your thought process. The only assumption you should make about the viewer is that he or she is trying to gain a working knowledge and understanding through your video.

TECHNICAL REQUIREMENTS

- Quality Videos must be of good visual quality. Keep in mind that videos are projected on large screens (often 14x20 foot screens). Be sure that you start with and maintain as high a resolution video as possible. Videos should not be lower than 1280x720 resolution and should be submitted in 16:9 video format.
- · Video Size Video file size cannot exceed 1GB.
- MPEG4 Format The preferred format is MPEG4 such as MP4. Although the following formats are very good and acceptable: .avi, .mov, .mpg, we recommend you consider converting the video format into the preferred MP4 format. Doing so will decrease the time to upload your video during the submission process without degrading the quality of the video. There are many options when it comes to programs for converting videos; one such conversion program we highly recommend for converting videos is called Handbrake. The best thing is it is FREE and is compatible with PC, Mac and Linux platforms. Best of all, Handbrake uses the very newest in technology to convert videos to the MP4 format while maintaining a very high image quality. Handbrake can be found here http://handbrake.fr
- Compatibility Videos MUST play in one of the following video
 players: Windows Media Player® or QuickTime Player®. If you do not
 have any of these players, you can download them from the Internet.
 If your video does not play in one of these players, it cannot be judged
 and will be disqualified.
- Commercial Footage Any footage published by anyone other than the author(s) or obtained from a manufacturer must be verbally acknowledged in the video and in the written summary. If more than 25% of the video is comprised of commercial video, there will be deductions taken from the scoring. If more than 50% of the video is comprised of commercial video, the video will be disqualified from competitions.

SUBMISSION PROCESS

Browser Support – To access the online program and submit your video abstract, you will need to use one of the following browsers:

- Microsoft Internet Explorer/Edge Version 7, 8, and 9 and 10 in Compatibility mode only
- · Safari Version 6.0 or higher
- Mozilla Firefox Version 4.0 or higher (download the newest version at www.mozilla.org)
- · Google Chrome All versions

Only videos uploaded to the online abstract submission program will be considered for judging, acceptance and presentation.

Unstructured Abstract (150 Words) – During the submission process you will be required to write a summary of your video. The summary should be no more than 150 words and, while it is unstructured, should include a detailed description of the intended purpose or objective of your video presentation. Include information such as pertinent scientific and clinical information, interventions, and results.

SUBMISSION CATEGORIES

Assign your abstract to both a primary and secondary category listed below. This determines where the abstract will be assigned in the program, if accepted. You must select two categories.

- · Basic Science/Research
- · Endometriosis
- · Hysteroscopy, Endometrial Ablation and Sterilization
- Laparoscopy Conventional
- Laparoscopy Obese Patients
- · Laparoscopy Single-Port
- Laparoscopy Tissue Containment Technologies
- · New Instrumentation or Technology
- · Oncology
- · Pelvic Pain
- · Reproductive Medicine
- Robotics
- · Surgical Education
- · Urogyn/Pelvic Floor Disorders
- · Vaginal Natural Orifice Surgery

UPLOADING YOUR VIDEO

After completing your video abstract, you will need to upload your video. Uploading content, such as a video, is slower than downloading media or software, with which you may be familiar. Depending on the length of your video and upload speed of your Internet connection, you may experience 30 to 60 minutes of upload time to submit your video. Please be patient and plan accordingly. Your video is successfully uploaded when the status bar is complete. Note: Uploads performed during the last few days before the deadline may experience delays.

AWARDS - VIDEO ABSTRACTS

Competition/ Award	Description	Submission Requirement	Eligibility
Golden Laparoscope	Best Video in MIGS	Video Abstract	ALL
IRCAD	Best Video - Excellence in Education	Video Abstract	AAGL FMIGS Fellows Only (2012-2017)

OPEN TO ALL

Golden Laparoscope Award

All original videos submitted are automatically considered for the Golden Laparoscope Award. This award is given to the best video in MIGS and the author receives an engraved plaque. Supported by Olympus America Inc.

COMPETITION FOR FMIGS FELLOWS ONLY

IRCAD Award for Excellence in Education (Best Paper or Video)

(FMIGS FELLOWS ONLY from 2012-2017). The IRCAD award is presented to a FMIGS Fellow to recognize the Best Research in Education, acknowledging innovative ideas in teaching. Award winner receives one week of training fully paid at the IRCAD Institute in Strasbourg, France. Supported by an educational grant from KARL STORZ Endoscopy-America, Inc.

CATEGORY AWARDS

The competition for best video in each category is open to everyone. All videos are automatically entered, according to the category you select. Awards are given based on grading.

Video Grading

Each video abstract is assigned to multiple graders, who are asked to view the video and grade the video using a system that assesses and awards or subtracts points for:

- · Educational value
- · Scientific merit
- Creative/Production quality
- Excessive use of commercial footage

Permitted Use:

AAGL reserves the right to use submitted video materials for educational purposes. Unless we have written notification otherwise, the AAGL has the right to use your video at AAGL educational meetings, including Internet and other media for educational purposes, and may be added to the AAGL Video Library.

ADDITIONAL CONSIDERATION FOR VIDEOS

Review by <i>JMIG</i> Editorial Board	Description	Submission Requirement	Eligibility
JMIG Video Article	Video	Structured Abstract & Video (separate submission on <i>JMIG</i> website)	ALL

Additional Considerations for Videos

<code>JMIG</code> – Aside from the AAGL Global Congress, video abstract submissions with the highest grading will also be submitted to <code>JMIG</code> for publication consideration in a future issue of the <code>JMIG</code>. If chosen, the <code>JMIG</code> Editorial Board will contact you, at which time you must be able to provide a structured abstract supporting the findings, statements or demonstrations presented in your video.

INSTRUCTIONS FOR SCIENTIFIC INFORMATION & SUPPORT POSTER ABSTRACTS

The AAGL has always supported a rigorous scientific poster exhibit at the Global Congress. Scientific posters facilitate dynamic discussion and exposure of new ideas from all healthcare providers and industry. Many new ideas have been born while attendees view and discuss the merits of the material in the posters.

When you submit your Poster Abstract, you will be asked the same series of questions as above for a written abstract.

Each scientific poster is reviewed by multiple graders using a grading system that assesses and awards points for:

- · Scientific design
- · Clinical innovation
- · Presentation

IMPORTANT DATES

The AAGL Call for Abstracts has been very successful over the last several years with an impressive number of abstracts submitted each year. To coordinate the grading of this many abstracts, we ask you to submit abstracts as early as possible. Abstracts may be submitted without charge from March 1 to April 15, 2017.

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We will adhere strictly to this deadline out of respect to the time graders have reserved to review abstracts and the time the Scientific Program Committee has to assign quality abstracts to the scientific program.

If you have questions about abstract guidelines, competitions or if you're having technical difficulty during the abstract submission process, please email abstracts@aagl.org. Include your question or detailed description of the problem you have encountered, as well as a phone number and time zone you are located in so we can contact you.

For further information, please contact the AAGL:

6757 Katella Ave, Cypress, CA 90630 USA Phone: 800-554-2245 or 714-503-6200 Fax: 714-503-6201 or 714-503-6202 8:00 am - 4:00 pm Pacific (Mon-Thu)

8:00 am - 3:00 pm Pacific (Fri)

Website: www.aagl.org