

## ESGE – GESEA Level 3 – Gynaecologic Oncology

### SENTINEL LYMPH-NODE MAPPING TECHNIQUE

#### STEPS

	<b>TASKS</b>
1	<p>Dye injection</p> <p><b>SUB-TASKS</b></p> <p><b>1.1 Timing (close to opening or direct vision)</b></p> <p><b>1.2 Use of ICG as main tracer</b></p> <p><b>1.3 Cervical injection at least 2 points</b></p>
2	<p>Inspection of abdominal cavity</p> <p><b>SUB-TASKS</b></p> <p><b>2.1 Check extrapelvic disease</b></p> <p><b>2.2 Check pelvic area</b></p> <p><b>2.3 Check bilateral lymphatic drainage up to both pelvic walls</b></p>
3	<p>Dissection and exposure of retroperitoneum</p> <p><b>SUB-TASKS</b></p> <p><b>3.1 Opening and identification of umbilical artery, iliac vessels and ureter</b></p> <p><b>3.2 Crossing of channels over umbilical artery</b></p> <p><b>3.3 Check secondary pathways</b> (0=not done; 1=unilateral; 2=bilateral)</p>
4	<p>SLN identification</p> <p><b>SUB-TASKS</b></p> <p><b>4.1 Channel following up to first node</b></p> <p><b>4.2 Selection of first SN</b> (0=not done; 1=unilateral; 2=bilateral)</p>
5	<p>Lymph node extraction</p> <p><b>SUB-TASKS</b></p> <p><b>5.1 Proper handling of SN with no rupturing</b></p> <p><b>5.2 Protected extraction</b></p>