



Talking with Your Gynecologic Oncologist, OB/GYN or General Surgeon

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KNOW BEFORE YOU GO

What's the difference between an OB/GYN and a Gynecologic Oncologist? Gynecologic Oncologists are specially trained to deal with gynecological cancers, such as ovarian cancer. Your OB/GYN may perform ovarian surveillance in her office and then refer you to a Gynecologic Oncologist or General Surgeon when you are considering an oophorectomy. Other women at high risk may see a Gynecologic Oncologist for surveillance. As always, the most important thing is finding a doctor or team of doctors who are a good fit for you and have experience with high-risk young women.

ARE WE A GOOD FIT?

- Have you ever treated patients who are at high risk for developing breast and ovarian cancer?
- How many high-risk patients do you have? What were their ages when you began treatment? Were their surgeries before or after a cancer diagnosis?
- Have any of your patients tested positive for either the BRCA1 or BRCA2 mutation? How familiar are you with these and the other genetic mutations that could increase my risk for developing breast and ovarian cancer?
- What sort of preventative treatment do you recommend for people with a high-risk genetic mutation or a strong family history of breast and ovarian cancer?

WHAT IS YOUR EXPERIENCE WITH PATIENTS LIKE ME?

- How many prophylactic oophorectomies have you performed? How many each month? Each year?
- Do you keep surveys about your patients' satisfaction rate?
- At what age do you recommend carriers of BRCA or other high-risk genetic mutations have this surgery? Why?
- Can I speak with any previous patients who've had the same surgery I'm having?

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TELL ME ABOUT PROPHYLACTIC OOPHERECTOMY

- When do you recommend an oophorectomy rather than screening options, (pelvic exam, transvaginal ultrasound and a CA-125 blood test) or taking oral contraceptives to lower ovarian cancer risk? Why?
- What sort of medical and lifestyle factors should I consider when I weigh one option versus the others?
- What are my surgical options for the prophylactic oophorectomy? What are the pros and cons of each?
- Will you remove my fallopian tubes along with my ovaries? What about my uterus? My cervix?
- Will you perform all of the surgery, or do you allow medical students to step in?
- How will I feel afterward? Emotionally? Physically? How much discomfort or pain do women typically experience?
- How do you manage surgical menopause? Will I gain weight and have hot flashes?
- How long will my hospital stay and recovery time be? When can I return to my normal activities? Driving? Work? Lifting weights? Running? Sex?
- Are there any possible complications I should know about? Risks?
- Will I still need to have preventative screening afterward, such as CA-125 blood tests or transvaginal ultrasounds?

WHAT DO I NEED TO KNOW ABOUT INSURANCE & SCHEDULING?

- How much will this procedure cost me? Can you break down the costs (i.e. doctor, anesthesia and hospital)? Will my insurance cover it, and will you help me file a claim?
- If my provider denies coverage, would you be willing to help me appeal the decision?
- How far out do you schedule surgeries? What sort of preparation will I need to do?
- Where will the procedure be done? How long will I be in the hospital?
- Will I have any follow-up appointments with you after the surgery? How often? For how long? What can I expect during those appointments?

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This guide was authored in collaboration with Dina Roth Port, author of the book *Previvors: Facing the Breast Cancer Gene and Making Life-Changing Decisions*.

BRIGHT PINK is a national non-profit on a mission to save women's lives from breast and ovarian cancer by empowering them to live proactively at a young age. For more information or to get involved, visit BrightPink.org.

