

# Surgical technique for sentinel lymph node sampling in endometrial cancer using the articulated HOOK monopolar instrument

Emad Matanes <sup>1,2</sup>, Tal Cantor,<sup>1</sup> Eman AIShehri,<sup>1</sup> Shannon Salvador,<sup>1,2</sup> Susie Lau,<sup>1,2</sup> Walter Gotlieb<sup>1,2</sup>

<sup>1</sup>Division of Gynecologic Oncology, Jewish General Hospital, McGill University, Montreal, QC, Canada  
<sup>2</sup>Segal Cancer Center, Lady Davis Institute of Medical Research, McGill University, Montreal, QC, Canada

## Correspondence to

Dr Emad Matanes, Jewish General Hospital, Montreal, QC H3T 1E2, Canada; emad.matanes@gmail.com

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## SUMMARY

Lymph node status represents an important prognostic factor in endometrial cancer (EC) that can help guide post-operative adjuvant treatment.<sup>1</sup> The benefits of sentinel lymph node (SLN) sampling over lymphadenectomy in EC are well established.<sup>2–4</sup> The use of the HOOK monopolar instrument to facilitate this dissection is not documented. The objective of this video is to stepwise demonstrate the feasibility and advantages of using the HOOK to perform SLN sampling in EC. This video report is part of an institutional, investigational board-approved study. The surgery was performed in a 77-year-old woman who presented to our center with a grade 1 endometrioid EC on endometrial biopsy. At the onset of surgery, a frozen aliquot of 0.4 mL indocyanine green reconstituted with 3.6 mL of saline solution was used to infiltrate the cervix at the 3 and 9 o'clock positions. The SLN was identified using the fluorescence-guided camera of the Xi DaVinci robotic system (Sunnyvale, California, USA). Several minutes after the injection the SLN

was identified and a dissection was performed using the HOOK monopolar instrument. After dissection, the SLN was extracted and sent to pathology for evaluation by ultra-staging. The final pathology revealed a stage II grade 2 tumor, and the patient underwent external beam pelvic radiotherapy and vaginal brachytherapy. We conclude that the use of the articulated HOOK monopolar instrument appears feasible and advantageous for SLN sampling in EC.

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**Data availability statement** Data are available upon request.

## ORCID iD

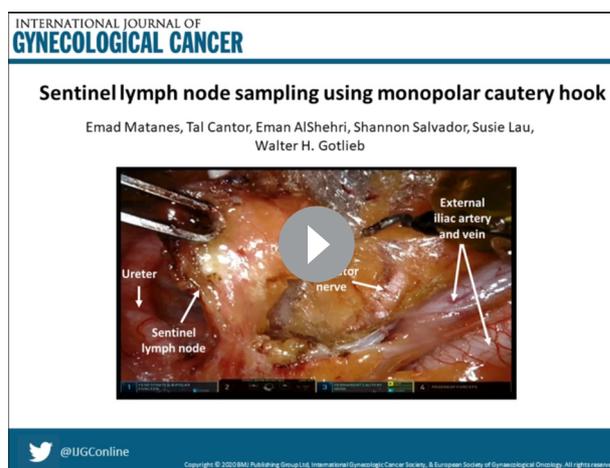
Emad Matanes <http://orcid.org/0000-0002-6990-9592>



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## Video 1



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