History
Physical examination
Consider radiologic imaging
Pain diary

Cyclic CHT and NSAIDs

If Persistent pain ➔ Empiric GnRH agonist
(if older than 18 years)
If improved – diagnosis is endometriosis

Laparoscopy
Diagnosis of endometriosis by visualization or biopsy
Surgical treatment (ablation/resection/laser) of endometriosis

Endometriosis identified visually
Or by pathology

<16
Continuous CHT
Symptoms persist ➔ GnRH agonist
(± add-back)*
OR
Continuous CHT

>16
Continuous CHT

No endometriosis – visually and histologically negative
Gastrointestinal or urologic evaluation
Pain management service

<16
Continuous CHT
Symptoms persist ➔ GnRH agonist
(± add-back)*
OR
Continuous CHT

>16
Continuous CHT

No pain
Continue CHT

Continued pain
Laparoscopy with resection of endometriosis
And/or
Long-term GnRH agonist with add-back
And
Pain management service
Complementary or alternative therapies

*Add-back indicates use of estrogen and progestin or norethindrone acetate alone.