1. Discuss how you would manage a recognized bowel injury at the time of laparoscopic surgery and whether or not your approach would vary when the injury occurs secondary to thermal injury, puncture, laceration, or serosal abrasion.

2. When would you expect an unrecognized bowel injury to present postoperatively? How would this vary based on the type of injury?

3. In your practice, which bowel injuries do you repair? Which bowel injuries would you seek consultation for? Discuss which bowel injuries might require bowel diversion with a colostomy or ileostomy.

4. The authors did not discuss whether or not women in the study had undergone bowel preparation prior to their surgeries. At your institution, do you routinely advise bowel preparation for women undergoing laparoscopic surgery? What are the risks and benefits of bowel preparation?

5. Describe how you counsel women regarding the risk of bowel injury at the time of laparoscopy. How will the findings from this study influence your counseling?

6. The authors reported that there was a significant difference in the reporting of bowel injuries. Studies that distinguished serosal injuries from enterotomies had higher rates of injury than those that did not distinguish between serosal injuries and enterotomies. Describe the differences between a serosal injury and an enterotomy. What are the risks associated with serosal injury versus enterotomy?

7. The authors describe how they identified the relevant literature for inclusion into this study. Discuss the strengths and weaknesses of their search and selection criteria.

8. This review focuses on a relatively rare outcome. Discuss the difficulties in studying relatively rare events. What other study designs may have been used to investigate risk factors for bowel injury?

9. The primary outcome measure included both serosa injuries and enterotomies, as many studies did not distinguish between the two. What is the effect of combining these two types of injuries on the incidence of bowel injury?

10. Reporting of outcomes varied greatly between studies. Review the CROWN (Core Outcomes in Women’s health) initiative to standardize reporting of outcomes (see http://www.bjog.org/view/0/crown-initiative.html). What are the strengths and weaknesses of the CROWN initiative?