

[Back to guidelines homepage](#)

Ovarian Masses in Premenopausal Women, Management of Suspected (Green-top Guideline No. 62)

Published: 02/12/2011

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This guideline aims to assist clinicians with the initial assessment and appropriate management of suspected ovarian masses in premenopausal women.



This is the first edition of this guideline. It is a joint RCOG/British Society of Gynaecological Endoscopy (BSGE) guideline.

The second edition of this guideline is currently in development.

Update December 2014: New evidence and guidance in this field were reviewed in 2014 and it was decided that revision of this guideline would be deferred to a later date. The version available on the website and app will remain valid until replaced.

This guideline has been produced to provide information, based on clinical evidence, to assist clinicians with the initial assessment and appropriate management of suspected ovarian masses in the premenopausal woman. It aims to clarify when ovarian masses can be managed within a 'benign' gynaecological service and when referral into a gynaecological oncology service should occur.

The ongoing management of borderline ovarian tumours is outside the remit of this guideline. The laparoscopic management of highly suspicious or known ovarian malignancies is also outside the scope of this guideline. In addition, the guideline does not specifically address the acute presentation of ovarian cysts or the management of ovarian cysts in pregnant women.

This guideline should be read in conjunction with [Green-top Guideline No. 24, The Investigation and Management of Endometriosis](#). The diagnosis of ovarian cysts has been addressed in the National Institute for Health and Care Excellence (NICE) [clinical guidelines on the recognition and initial management of ovarian cancer](#). The American College of Obstetricians and Gynecologists and the Society of Obstetricians and Gynecologists of Canada have also produced guidelines for the management of women with an ovarian mass (see section 5.3 of the RCOG guideline).

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