**OBJECTIVES**

To know the impact of the introduction of IOTA ADNEX in the management of a gynaecology operating room, discriminating preoperatively between ovarian tumours of high or low risk. The hypothesis is that by filtering adnexal tumours with surgical indication, the false negative rates decrease optimally.

**RESULTS**

274 WOMEN

- **166 (60%) LOW RISK**
  - Tumours of low risk are scheduled in general gynaecology theater with deferred pathological study
  - If any anomalous data is associated, an intraoperative study is requested and the possibility of a reference oncologist surgeon is foreseen

- **108 (40%) HIGH RISK**
  - Schedule them preferred route in an operating room from Oncological Gynaecology, reserving a patient conditional to surgery in the event that the pathological study was benign
  - In 3% (3) intraoperative study was requested (high Doppler score), resulting malignant

**METHODS**

Retrospective study from March 2017-March 2019, in a gynaecological ultrasound unit specific reference centre in oncological gynaecology. All patients referred for adnexal tumour were analysed: suspicious of malignancy or benign (with indication of surgery). The examinations were carried out by an IOTA certified sonographer. The tumours were classified as low or high risk of malignancy by the IOTA ADNEX from a result higher than 20%.

**CONCLUSIONS**

IOTA ADNEX in our service has meant a revolution in surgical organisation; it ensures the presence of gynaecological oncologists where malignancy is suspected, availability in those that request intraoperative study and it decreases false positives and negatives to acceptable limits.