

**ASH External Guidelines Request Form**

Thank you for submitting your clinical practice guidelines for review by the American Society of Hematology (ASH). As of December 1, 2021, ASH no longer offers endorsement of guidelines developed by other organizations. In lieu of endorsement, ASH will review your guidelines and make a decision to disseminate and/or support the implementation of the guidelines for ASH members based on ASH’s External Guidelines DI Policy.

Questions in this form were derived from the [Institute of Medicine’s *Clinical Practice Guidelines We Can Trust*](https://www.ncbi.nlm.nih.gov/books/NBK209539/) standards. ASH is reviewing your guidelines against these standards to judge whether your guidelines meet our threshold for dissemination/implementation. By completing the top portion of this form (Part 1.), you are attesting that the guidelines you are submitting adhere to IOM standards.

Please be advised that ASH is unable to review guidelines developed or funded by industry.

If you would like to proceed, please complete this form and submit it with a final copy of the guideline manuscript or the published guidelines to quality@hematology.org.

PART 1. To be completed by submitting organization.

Organization (Name and Website):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact of Person(s) Submitting (Name, Title, Email):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of the Guidelines:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Link to Publication (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Date of Publication:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was an ASH Member(s) appointed to this panel? If yes, name and date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will the guidelines be submitted to the Guidelines International Network (GIN), ECRI Institute, or any other guideline repository (Y/N)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, date of submission or estimated date of submission?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was this guideline directly funded or developed by industry? (Y/N)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relevancy to Hematology

Please briefly describe how your guidelines are relevant to hematologists.

Standards and Description

Please include the page number in the guidelines where we can find additional information to support your responses to each of the questions below.

**Categories from IOM**

Have you met each of these [IOM](https://www.ncbi.nlm.nih.gov/books/NBK209539/) standards?

1. Establishing Transparency
*The process by which a CPH is developed and funded should be detailed explicitly and publicly accessible.*

[ ]  Yes

[ ]  No

1. Management of Conflict of Interest (COI)
*Prior to the selection of the guideline development group, individuals being considered for membership should declare all interests and activities potentially resulting in COI with development group activity, by written disclosure to those convening the guideline development group. Disclosures should reflect all current and planned commercial, non-commercial, intellectual, institutional, and patient-public activities pertinent to the potential scope of the CPH.*

[ ]  Yes

[ ]  No

1. Disclosure of COIs within Guideline Development Group
*All COI of each member should be reported and discussed by the prospective development group prior to the onset of work. Each member should explain how the COI could influence the CPG development process or specific recommendation.*

[ ]  Yes

[ ]  No

1. Divestment
*Members should divest themselves of financial investments they or their family members have in, and not participate in marketing activities or advisory boards of, entities whose interests could be affected by CPG recommendations.*

[ ]  Yes

[ ]  No

☐ N/A, COI policy excludes conflicts

1. Exclusions
*Whenever possible, members should not have COI. In some instances, a guideline development group may not be able to perform its work without members who have COIs, such as relevant clinical specialists who receive a substantial portion of their income from services pertinent to the CPG. Members with COIs should represent not more than a minority of the guideline development group. The chair or co-chairs should not be person(s) with COI. Funders who have no role in CPG development.*

[ ]  Yes

[ ]  No

1. Guideline Development Group Composition
*The guideline development group should be multidisciplinary and balanced, comprising a variety of methodological experts and clinicians, and populations expected to be affected by the CPH. Patient and public involvement should be facilitated by including (at least at the time of clinical question formulation and draft CPH review) a current or former patient, and a patient advocate or patient/consumer organization representative in the guideline development group. Strategies to increase effective participation of patient and consumer representatives, including training in appraisal of evidence should be adopted by guideline development groups.*

[ ]  Yes
[ ]  No
2. Clinical Practice Guideline–Systematic Review Intersection
*CPG developers should use systematic reviews that meet standards set by the IOM’s Committee on Standards for Systematic Reviews of Comparative Effectiveness Research. When systematic reviews are conducted specifically to inform particular guidelines, the guideline development group and systematic review team should interact regarding the scope, approach, and output of both processes.*

[ ]  Yes

[ ]  No

1. Establishing Evidence Foundations for and Rating Strength of Recommendations
*For each recommendation, the following should be provided; an explanation of the reasoning underlying the recommendation including a) a clear description of potential benefits and harms, b) a summary of relevant available evidence and evidentiary gaps, description of the quality including applicability, quantity including completeness, and consistency of the aggregate available evidence, d) an explanation of the part played by values, opinion, theory, and clinical experience in deriving the recommendation; a rating of the level of confidence in (certainty regarding) the evidence underpinning the recommendation; a rating of the strength of the recommendation in light of the preceding information; and a description and explanation of any differences of opinion regarding the recommendation.*

[ ]  Yes

[ ]  No

1. Articulation of Recommendations
*Recommendations should be articulated in a standardized form detailing precisely what the recommended action is, and under what circumstances it should be performed. Strong recommendations should be worded so that compliance with the recommendation(s) can be evaluated.*

[ ]  Yes

[ ]  No

1. External Review
*External reviewers should comprise a full spectrum of relevant stakeholders, including scientific and clinical experts, organizations, agencies, patients, and representatives of the public. The authorship of external reviews submitted by individuals and/or organizations should be kept confidential unless that protection has been waived by the reviewer(s). The guideline development group should consider all external reviewer comments and keep a written record of the rationale for modifying or not modifying a CPH in response to reviewers’ comments. A draft of the CPH at the external review stage or immediately following it should be made available to the general public for comment. Reasonable notice of impending publication should be provided to interested public stakeholders.*

[ ]  Yes

[ ]  No

PART 2. To be completed by an ASH COQ member.

 Name of Reviewer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact of Information (Institution, Email):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How relevant is this topic to hematology?
2. Would guidelines present the opportunity to synergize with other strategic initiatives within the society?
3. Would guidelines address uncertainty regarding optimal practice or unexplained variation in clinical practice?
4. Would guidelines address an underserved population or under-recognized health problem, i.e., potentially change clinical practice in ways that would improve health equity?
5. What impact do you think these guidelines will have on the field of hematology?

☐ High

☐ Medium

☐ Low

Please explain.