

American Academy of Pediatrics Guideline Endorsement Policy

To ensure the rigor and value of clinical practice guidelines, while also allowing a mechanism for endorsement of other documents, SCOQIM has drafted the following policy regarding endorsement of clinical practice guidelines.

Many organizations produce clinical practice guidelines that are relevant to pediatric care, and many of these organizations actively seek endorsement of these guidelines by the AAP. The AAP is committed to systematically evaluating these documents and disseminating appropriate documents to its membership. The two primary criteria the AAP uses to assess guidelines submitted for endorsement are the quality of the process used to develop the document and the value of the information to AAP membership. This statement outlines the process of guideline review and provides a tiered format for endorsement of these products.

Documents that fulfill the criteria listed below are eligible for AAP endorsement. Documents that do not fulfill all of the criteria may be eligible for the second tier of endorsement—Affirmation of Value to Pediatricians. Eligibility for endorsement does not guarantee endorsement, and endorsement does not guarantee publication in *Pediatrics*.

The methodologic attributes that are required for endorsement of a document as a Clinical Practice Guideline include:

- Comprehensive, systematic, and explicit review of the relevant literature
- Classification of evidence based on critical assessment of internal and external validity
- Recommendations linked directly to the evidence
- Recommendations classified based on the quality of supporting evidence and magnitude of benefit or harm

Many practice guidelines use a combination of peer reviewed evidence and expert consensus to make practice recommendations. The AAP requires that the evidence used to develop guidelines be identified, appraised, and summarized in a transparent and rigorous manner, and that the linkages between recommendations and their supporting evidence be explicit. The procedure for classifying recommendations in Clinical Practice Guidelines are described in a published AAP policy statement (*Pediatrics* 2004;114(3):88-91). Documents that lack a clear description of the process for identifying, assessing, and incorporating research evidence are not eligible for AAP endorsement as practice guidelines. However, such documents may be of educational value to members of the AAP, and are eligible for the second tier of AAP endorsement—Affirmation of Value.

The AAP encourages other organizations to inform the AAP of their intent to request endorsement as early in the process of developing the guideline as possible. Although AAP endorsement does not require AAP input into the guideline, the likelihood of endorsement is greatly increased by the AAP's involvement in, and knowledge of, the development of the guideline.

Organizations requesting endorsement of a practice guideline will be asked to complete a checklist describing their guideline development process (based on that created by the Conference on Guideline Standardization (COGS), an accepted standard in guideline development for board policy (Ann Intern Med. 2003;139:493-498-see attached)). This is expected to largely consist of cutting and pasting the relevant parts of the guideline document into the AAP's electronic format. Some items on the checklist may not be relevant for some guidelines. AAP will then undertake a two-stage process of evaluation. Using the submitted documentation (the checklist and the proposed guideline), SCOQIM will determine whether the document is eligible to be considered for full endorsement as a guideline.ⁱ

The document will then be forwarded to the relevant AAP Section(s) and/or Committee(s) for review of content.ⁱⁱ If the document is eligible for consideration as a guideline and all recommendations are approved by the content reviewers, the document will be forwarded to a Board Reviewer and/or the Executive Committee with a recommendation that it be endorsed as official AAP policy. A designation of Affirmation of Value may be assigned to documents that do not meet the guideline development process requirements but are felt to be of significant educational value. This two-stage process of evaluation is expected to take three to six months. Documents submitted for AAP endorsement should be sent to Caryn Davidson, Sr. Health Policy Analyst for Guideline Development.

The attached matrix outlines actions that the AAP may take to endorse and disseminate guidelines.

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Acceptability	Level of Endorsement	Situation	Presentation/Dissemination
Fully meets AAP process standards AND AAP finds content relevant and can endorse all of the recommendations.	Official AAP endorsement.	AAP full partner in development of the document	May state “officially endorsed by the AAP”; may be published in <i>Pediatrics</i> as official AAP policy. If article is published in <i>Pediatrics</i> and in journals of collaborating organizations, publication should occur simultaneously.
		AAP provided an official representative to the development of the document	May state “officially endorsed by the AAP”; AAP may disseminate the document to its members with the permission of the primary organization. AAP may request permission to publish all, a portion of, or a summary of the document on after publication of the article by the primary organization.
		AAP not officially involved in the development of the document	May state “officially endorsed by the AAP”; AAP may disseminate the document with the permission of the primary organization. AAP may request permission to publish all, a portion of, or a summary of the document on the AAP website after publication of the article by the primary organization.
Does not fully meet AAP standards, but AAP leadership feels it is of benefit to the membership.	Affirmation of Value to Pediatrics	AAP full partner in development of the document	AAP may distribute the document to its membership via the AAP website as an informational piece, but not as AAP policy. The document may list the AAP as an official contributor but not state that the AAP endorses the document.
		AAP provided an official representative to the development of the document	AAP may distribute the document to its membership via the AAP website as an informational piece, but not as AAP policy. The document may state that the AAP provided a representative to the development of the guideline, but may not state that the AAP endorses the document.
		AAP not officially involved in the development of the document	AAP may distribute the document to its membership via the AAP website as an informational piece, but not as AAP policy. The document may not state that AAP endorses the document.
Does not meet AAP standards; not felt to be of benefit to the membership of the AAP.	No endorsement	AAP full partner in development of the document; AAP provided an official representative to the development of the document; or AAP not officially involved in the development of the document	AAP will not disseminate the document to its membership. The document may not state that the AAP endorses the document.

Summary of process:

1. Outside organization requests AAP Endorsement of a guideline.
2. AAP sends COGS checklist to organization.
3. Reviewers from SCOQIM and Section on Epidemiology review for methodologic issues and determine if guideline is eligible for full endorsement.
4. Guideline is sent to relevant Committees and Sections for content review.
5. All comments and recommendations for or against endorsement are sent to the Executive Committee via the DOPR staff.
6. Executive Committee makes final determination, utilizing the chart below.
7. Letter is sent to requesting organization communicating the AAP's decision.

Interest, Relevance to FAAPs, agreement with recommendations		Meets AAP Guideline Development Standards	
		Yes	No
	Yes	AAP Endorsed Guideline	Affirmation of Value
No	No Endorsement	No Endorsement	No Endorsement

ⁱ One member of SCOQIM and one methodologist (from the SoEP) will review each submission. Disagreements will be adjudicated by the SCOQIM evidence subcommittee.

ⁱⁱ SCOQIM staff will distribute and collate these responses, and the package will be forwarded to the Executive Committee for final approval.