



Clinical Practice Guideline Topic Proposal Intent Form

The mission of the American Academy of Pediatrics (AAP) is to attain optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults. To support this mission, the AAP Board Policy Committee and The Council on Quality Improvement and Patient Safety (COQIPS) is committed to ensuring a rigorous, unbiased guideline development process and towards creating tools for pediatricians at the point-of-care to implement guideline recommendations. Clinical Practice Guidelines (CPGs) are rigorously developed through a systematic review of the evidence, and clinical recommendations are systematically made to reduce bias by considering that evidence, patient preferences, costs, benefits and harms.

This form collects information to understand, provide feedback, and prioritize requests for new CPGs.

CRITERIA FOR ASSESSING GUIDELINE TOPIC PROPOSALS

Complete this guideline topic proposal intent form to recommend the development of a new / or revision of a current or outdated AAP CPG. **This topic proposal intent form must be completed in its entirety and must meet all the following criteria used to assess guideline topics prior to consideration:**

- An established body of published evidence exists on which to base the guideline, or the need to create a structure from which to study a topic
- Wide variability exists within practice or new evidence supports a significant change to current practice
- Substantial anticipated impact of clinical recommendations
 - Number of children or family members impacted by the clinical guidance
 - Number of medical professionals/societies likely to use the clinical recommendations (e.g. Emergency physicians, dentists, oral surgeons, etc).
 - Affects the practice and science of pediatric medicine
 - Addresses public health concern or crisis
 - Addresses major gaps or important quality, safety, and/or cost outcomes in pediatric care
- Improves ability of pediatric providers to practice medicine

Submit the completed form to kokechukwu@aap.org and allow up to 12 weeks for review.

Submission Date:	
Submitter of the Topic Proposal:	
Name of AAP Section(s)/Council(s)/Committee(s):	
Name of AAP Staff Liaison to Submitter (If applicable):	
Clinical Practice Guideline Tentative Title:	

REVIEW OF CURRENT DOCUMENTS (AAP or EXTERNAL)

1. In the space below, list current AAP guidelines, policies, technical reports, clinical reports, or consensus statements relating to the proposed topic by viewing AAP policies on Gateway at: <http://pediatrics.aapublications.org/collection>. If not applicable, mark N/A.

2. In the space below, if there are existing AAP statements related to this topic, please provide a summary and list of references of any new relevant literature/evidence. Please explain what would be gained by creating a CPG, and how it would improve the other statements. If not applicable, mark N/A.

3. In the space below, list statements or publications from organizations aligned closely with the AAP that address the topic being proposed. Include references. If such publications exist, explain how the proposed CPG is different, and why it is necessary for the AAP to create its own CPG instead of endorsing the other statement(s). If not applicable, mark N/A.

PICOT QUESTIONS AND SYSTEMATIC REVIEW

4. **Potential Key Clinical Questions:** *Provide a list of all the key clinical questions you would like to address within the guideline or consensus statement. If possible provide these questions in PICO format. Use this [link](#) for information on developing your PICO(T) questions.*
(P: Patient/population – How would you describe the patient or population; I: Intervention – What intervention(s) or treatment modality would be considered within the guideline; C: Comparator – What is the main alternative to compare to the intervention; O: What are the important outcomes of interest; T: Time – What is the timeframe to achieve the outcome)

5. Has a systematic review covering all relevant clinical questions been conducted? Yes No
If yes, please explain. If not, explain if you have received or plan to request external funding to conduct a systematic review. Note: If external funding is not anticipated and the topic is approved, the topic will be submitted by AAP staff to the AHRQ for consideration of topic prioritization and funding.

6. **Relevant Literature:** Provide a preliminary bibliography of relevant literature/evidence that will support the scope of this guideline. (*Maximum of 10 references.*)

CLINICAL PRACTICE GUIDELINE OVERVIEW

7. Who do you foresee benefitting from or using the proposed Clinical Practice Guideline.	
8. Explain the challenges, opportunity, and impact of the guideline.	

Please submit the completed form to kokechukwu@aap.org as of 5.31.2018

9. Provide the names of AAP Section, Council or Committees who should be represented on the CPG subcommittee. Have you contacted them regarding this intent?	
10. Provide the names of any potentially relevant <i>external organizational</i> partners/stakeholders.	
11. Is there funding to support representatives from the above listed external stakeholders? <i>If, so please detail the approximate funding available for lodging, travel, and airfare.</i>	
12. How might these guidelines be implemented at the point of care to track impact on changes in practice?	
13. What controversies do you feel may arise from publishing this guideline (eg. Disagreement about recommendations between specialties).	

PROPOSED PANEL SUBCOMMITTEE MEMBERS

The ideal size of a CPG subcommittee is 10-14 members, not including staff. The final size may be influenced by balancing the need for appropriate team dynamics with funding availability. At a minimum, the team includes a chair, a vice chair, a methodologist/epidemiologist, a Partnership for Policy Implementation (PPI) Representative, an implementation scientist, content experts, general pediatricians, stakeholders from relevant disciplines, a Family representative, and AAP staff. The prioritization group will consider suggestions for the chair and for subcommittee members that will help to create the guideline. As much as possible, the subcommittee should strive for diversity in membership.

Chair Qualifications

- **The chair should be an FAAP and represent the primary audience to whom the guideline’s recommendations are directed.** In most situations, this means that the chair should be a practicing general pediatrician. However, if the guideline primarily targets another discipline (e.g., pediatric emergency medicine, neonatology, etc.), the chair should come from that discipline. Subspecialist chairs may be considered if their subspecialty is expected to be targeted by the recommendations. Any issues with CPG chair selection will be resolved by the COQIPS chair.
- Should have been in active practice in her/his primary specialty within the past 5 years
- Should have prior experience with evidence-based CPG development (including membership on a previous AAP CPG subcommittee, or equivalent experience)
- Must have demonstrated leadership ability
- Must be efficient and motivated
- Must have demonstrated skills in scientific writing
- Must be familiar with current versions of this document and *Toward Transparent Clinical Policies*⁵
- Must adhere to the AAP Policy *Conflict of Interest and Relationships with Industry and Other Organizations*.

Vice-chair Qualifications

Please submit the completed form to kokechukwu@aap.org as of 5.31.2018

The vice chair of the CPG subcommittee is selected by the chair with input from AAP staff. Qualifications of the vice chair include:

- Must be a FAAP and practicing within the past 5 years
- The vice chair should have experience with meeting facilitation
- The vice chair should have some interest in becoming a future CPG subcommittee Chair
- Must have demonstrated leadership ability
- Must have demonstrated skills in scientific writing
- Must be familiar with current versions of the document titled, *Toward Transparent Clinical Policies*
- Must adhere to the AAP Policy *Conflict of Interest and Relationships with Industry and Other Organizations*

14. Provide the names of the proposed panel chair and vice-chair. <i>Proposal of panel members does not guarantee their participation. All subcommittee members are confirmed at the discretion of the AAP Executive Committee.</i>	
15. Provide the names of additional proposed panel members and the council, section, or committee he/she represents. <i>Proposal of panel members does not guarantee their participation. All subcommittee members are confirmed at the discretion of the AAP Executive Committee.</i>	

AUTHORSHIP CONSIDERATIONS

16. In the space below, provide a high-level overview of how the lead author(s) were selected and what key attributes will contribute to the success of this document. Highlight any plans to involve an early career physician(s). Please submit a CV (4 pages or less) for each lead author.

COLLABORATING GROUPS DURING INTENT DEVELOPMENT

Internal Groups

17. Identify the internal AAP groups (listed in question 18), who participated in drafting this intent.

SUGGESTED PANEL MEMBER REPRESENTATIVE GROUPS

Internal Groups

18. Check internal AAP groups, listed below, who should participate on the guideline subcommittee panel as a member representative of the below listed group(s).

Committees

- Adolescence (COA)
- Bioethics (COB)
- Child Health Financing (COCHF)
- Coding and Nomenclature (COCN)
- Continuing Medical Education (COCME)
- Development (CODE)

Councils

- Child Abuse and Neglect (COCAN)
- Children With Disabilities (COCWD)
- Clinical Information Technology (COCIT)
- Communications and Media (COCM)

Please submit the completed form to kokechukwu@aap.org as of 5.31.2018

- Drugs (COD)
- Federal Government Affairs (COFGA)*
- Fetus and Newborn (COFN)
- Hospital Care (COHC)
- Infectious Diseases (COID)
- Medical Liability and Risk Management (COMLRM)
- Membership (COM)
- Native American Child Health (CONACH)
- Nutrition (CON)
- Pediatric AIDS (COPA)
- Pediatric Education (COPE)
- Pediatric Emergency Medicine (COPEM)
- Pediatric Research (COPR)
- Pediatric Workforce (COPW)
- Practice and Ambulatory Medicine (COPAM)
- Psychosocial Aspects of Child and Family Health (COPACFH)
- State Government Affairs (COSGA)*
- Substance Use and Prevention (COSUP)

- Community Pediatrics (COCP)
- Early Childhood (COEC)
- Environmental Health (COEH)
- Foster Care, Adoption and Kinship Care (COFCAKC)
- Genetics (COG)
- Injury, Violence, and Poison Prevention (COIVPP)
- Quality Improvement and Patient Safety (COQIPS)
- School Health (COSH)
- Sports Medicine and Fitness (COSMF)

Other Committees/Groups

- Disaster Preparedness Advisory Council (DPAC)
- Global Immunization PAC (GI PAC)
- Medical Home Implementation Project Advisory Committee
- Private Payer Advocacy Advisory Committee (PPAAC)
- Family Partnerships Network

Task Forces

- Circumcision
- Diversity and Inclusion
- Pediatric Practice Change
- Sudden Infant Death Syndrome

Sections

- Administration and Practice Management (SOAPM)
- Adolescent Health (SOAH)
- Advances in Therapeutics & Technology (SOATT)
- Allergy and Immunology (SOAI)
- Anesthesiology & Pain Medicine (SOA)
- Bioethics (SOB)
- Breastfeeding (SOBr)
- Cardiology and Cardiac Surgery (SOCCS)
- Child Death Review & Prevention (PSOCDRP)
- Clinical Pharmacology & Therapeutics (SOCPT)
- Critical Care (SOCC)
- Dermatology (SOD)
- Developmental and Behavioral Pediatrics (SODBP)
- Early Career Physicians (SOECP)
- Emergency Medicine (SOEM)
- Endocrinology (SOEn)
- Epidemiology, Public Health & Evidence (SOEPHE)
- Gastroenterology, Hepatology & Nutrition (SOGHN)
- Hematology/Oncology (SOHO)
- Home Care (SOHCa)
- Hospice and Palliative Medicine (SOHPM)
- Hospital Medicine (SOHM)
- Infectious Diseases (SOID)
- Integrative Medicine (SOIM)
- Internal Medicine/Pediatrics (SOMP)
- International Child Health (SOICH)

Sections (cont'd)

- International Medical Graduates (PSOIMG)
- Lesbian, Gay, Bisexual & Transgender Health & Wellness (SOLGBTHW)
- Medicine/Pediatrics (SOMP)
- Minority Health, Equity, and Inclusion (PSOMHEI)
- Neonatal-Perinatal Medicine (SONPM)
- Nephrology (SONp)
- Neurological Surgery (SONs)
- Neurology (SONu)
- Obesity (SOOb)
- Ophthalmology (SOOp)
- Oral Health (SOOH)
- Orthopaedics (SOOr)
- Osteopathic Pediatricians (SOOPe)
- Otolaryngology—Head and Neck Surgery (SOOHNS)
- Pediatric Pulmonology and Sleep Medicine (SOPPSM)
- Plastic Surgery (SOPS)
- Pediatric Trainees (SOPT)
- Radiology (SORa)
- Rheumatology (SORh)
- Senior Members (SOSM)
- Simulation and Innovative Learning Methods (PSOSILM)
- Surgery (SOSu)
- Telehealth Care (SOTC)
- Tobacco Control (SOTCo)
- Transport Medicine (SOTM)
- Uniformed Services (SOUS)
- Urology (SOU)

Please submit the completed form to kokechukwu@aap.org as of 5.31.2018

Other

Please Specify:

SUGGESTED REVIEWING GROUPS

Internal Groups

19. Check internal AAP groups, listed below, who should review the final document during peer review.

Committees

- Adolescence (COA)
- Bioethics (COB)
- Child Health Financing (COCHF)
- Coding and Nomenclature (COCN)
- Continuing Medical Education (COCME)
- Development (CODE)
- Drugs (COD)
- Federal Government Affairs (COFGA)*
- Fetus and Newborn (COFN)
- Hospital Care (COHC)
- Infectious Diseases (COID)
- Medical Liability and Risk Management (COMLRM)
- Membership (COM)
- Native American Child Health (CONACH)
- Nutrition (CON)
- Pediatric AIDS (COPA)
- Pediatric Education (COPE)
- Pediatric Emergency Medicine (COPEM)
- Pediatric Research (COPR)
- Pediatric Workforce (COPW)
- Practice and Ambulatory Medicine (COPAM)
- Psychosocial Aspects of Child and Family Health (COPACFH)
- State Government Affairs (COSGA)*
- Substance Use and Prevention (COSUP)

Sections

- Administration and Practice Management (SOAPM)
- Adolescent Health (SOAH)
- Advances in Therapeutics & Technology (SOATT)
- Allergy and Immunology (SOAI)
- Anesthesiology & Pain Medicine (SOA)
- Bioethics (SOB)
- Breastfeeding (SOBr)
- Cardiology and Cardiac Surgery (SOCCS)
- Child Death Review & Prevention (PSOCDRP)
- Clinical Pharmacology & Therapeutics (SOCPT)
- Critical Care (SOCC)
- Dermatology (SOD)

Councils

- Child Abuse and Neglect (COCAN)
- Children With Disabilities (COCWD)
- Clinical Information Technology (COCIT)
- Communications and Media (COCM)
- Community Pediatrics (COCP)
- Early Childhood (COEC)
- Environmental Health (COEH)
- Foster Care, Adoption and Kinship Care (COFCAKC)
- Genetics (COG)
- Injury, Violence, and Poison Prevention (COIVPP)
- Quality Improvement and Patient Safety (COQIPS)
- School Health (COSH)
- Sports Medicine and Fitness (COSMF)

Other Committees/Groups

- Disaster Preparedness Advisory Council (DPAC)
- Global Immunization PAC (GI PAC)
- Medical Home Implementation Project Advisory Committee
- Private Payer Advocacy Advisory Committee (PPAAC)
- Family Partnerships Network

Task Forces

- Circumcision
- Diversity and Inclusion
- Pediatric Practice Change
- Sudden Infant Death Syndrome

Sections (cont'd)

- International Medical Graduates (PSOIMG)
- Lesbian, Gay, Bisexual & Transgender Health & Wellness (SOLGBTHW)
- Medicine/Pediatrics (SOMP)
- Minority Health, Equity, and Inclusion (PSOMHEI)
- Neonatal-Perinatal Medicine (SONPM)
- Nephrology (SONp)
- Neurological Surgery (SONs)
- Neurology (SONu)
- Obesity (SOOb)
- Ophthalmology (SOOp)
- Oral Health (SOOH)
- Orthopaedics (SOOr)

Please submit the completed form to kokechukwu@aap.org as of 5.31.2018

- Developmental and Behavioral Pediatrics (SODBP)
- Early Career Physicians (SOECP)
- Emergency Medicine (SOEM)
- Endocrinology (SOEn)
- Epidemiology, Public Health & Evidence (SOEPHE)
- Gastroenterology, Hepatology & Nutrition (SOGHN)
- Hematology/Oncology (SOHO)
- Home Care (SOHCa)
- Hospice and Palliative Medicine (SOHPM)
- Hospital Medicine (SOHM)
- Infectious Diseases (SOID)
- Integrative Medicine (SOIM)
- Internal Medicine/Pediatrics (SOMP)
- International Child Health (SOICH)

- Osteopathic Pediatricians (SOOPe)
- Otolaryngology—Head and Neck Surgery (SOOHNS)
- Pediatric Pulmonology and Sleep Medicine (SOPPSM)
- Plastic Surgery (SOPS)
- Pediatric Trainees (SOPT)
- Radiology (SORa)
- Rheumatology (SORh)
- Senior Members (SOSM)
- Simulation and Innovative Learning Methods (PSOSILM)
- Surgery (SOSu)
- Telehealth Care (SOTC)
- Tobacco Control (SOTCo)
- Transport Medicine (SOTM)
- Uniformed Services (SOUS)
- Urology (SOU)

Other

Please Specify:

External Groups

20. In the space below, provide a list of external groups who should review the final document for endorsement. If none, enter N/A.

FINAL CHECKLIST

- All 20 sections of the intent have been completed.
- Author/s have reviewed the AAP Clinical Practice Guideline Manual
- Author/s have reviewed the AAP policy statement, [“Toward Transparent Clinical Policies”](#)

Please submit the completed form to kokechukwu@aap.org as of 5.31.2018