REVIEW OF CLINICAL PRACTICE GUIDELINES

PURPOSE
This document describes potential review processes for AAOS’ clinical practice guidelines. This review has two purposes. First, it will enhance the quality of our guidelines. Guidelines are commonly peer reviewed, and whether such review is conducted is commonly used as a measure of a guideline’s quality (cf. the AGREE instrument at http://www.agreecollaboration.org/instrument/). The second purpose of review is to afford interested parties who are not directly involved in the development of our guidelines the opportunity to comment on them before they are released.

This document also describes processes for guidelines approval.

TYPES OF REVIEW
As implied in the preceding section, there will be two types of review, peer review, and commentary.

PEER REVIEW
Peer Review will begin when the Chair of a guideline Work Group indicates that the draft guideline is complete and ready for review. Peer reviewers will be comprised of:

1. The Evidence-Based Practice Committee (EBPC)
2. The Guidelines Oversight Committee (GOC)
3. Members of an Advisory Panel

Advisory Panels be convened for each guideline and will consist of experts in that guideline’s topic area. These experts will be chosen to represent professional societies other than AAOS. Preferably, Advisory Panel members will have training and/or experience in evidence-based medicine. There will be 10-20 members on each Advisory Panel.

Advisory Panel members will be nominated by the guideline Work Group and approved by the GOC.

Peer Reviewers will receive the entire guideline and all of its supporting documentation, including the evidence report. However, these reviewers will be allowed the option to reviewing only that portion of a guideline in which they are expert. Because Peer Reviewers will receive several hundred pages of material to review, they will be given two months to review the document. Reviews must be written. Verbal reviews will not be accepted.

The Guidelines Unit in the Department of Research and Scientific Affairs at AAOS will document the disposition of all non-editorial comments from each reviewer, obtain the Work Group Chair’s approval for these comments, and will send each reviewer the approved documentation for his/her comments.
Peer review may result in modification of a guideline. However, there is no obligation to change a guideline in response to all reviewers’ comments. For example, comments that are not backed by evidence (e.g., “In my experience…….) will not result in modification of a guideline.

There will be up to 47 peer reviewers for each guideline (12 EBPC members, 15 GOC members, and 15 Advisory Panel members). Documenting the disposition of their comments and gaining the Work Group Chair’s approval of this documentation will require approximately two months.

PUBLIC COMMENTARY
Public Commentary will begin when documentation about the disposition of reviewer comments has been sent to peer reviewers. Thirty days will be allowed for public commentary. Commentators will consist of:

1. Members of the AAOS Board of Directors (BOD)
2. Members of the Council on Research, Quality Assessment, and Technology (CORAQT)
3. Members of the Board of Councilors (BOC)
4. Members of the Board of Specialty Societies (BOS)

Commentators will receive the guideline, but will only receive the evidence report if they request it.

There will be up to 185 commentators (16 BOD members, 21 CORQAT members, 100 BOC Members, and 48 BOC members and officers) for each guideline. Each commentator who returns a review within 30 days will receive a “thank you” letter and, if their review engendered a change in the guideline, documentation of that change. The Work Group Chair will approve any letters documenting a change. Preparing the appropriate documentation will require approximately two months.