AAOS Endorsement
Procedures for Appropriate Use Criteria Developed by External Organizations

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Introduction

- The American Academy of Orthopaedic Surgeons (AAOS) has been developing appropriate use criteria (AUCs) to help reduce inappropriate care and increase appropriate care within orthopaedic-related areas of healthcare.
- The Academy has received recognition for these efforts, and consequently has received requests by other medical specialty societies to review and possibly endorse their appropriate use criteria.
- This procedure document was constructed to provide a standardized protocol for AAOS endorsement of AUCs produced by external organizations.
Foundation of Endorsement Criteria

The criteria referenced in the Endorsement Protocol are heavily based on the AUC processes developed by the Rand Corporation and UCLA and documented within the Rand/UCLA Appropriateness Method User’s Manual¹ (RAM).

A digital version of the RAND/UCLA Appropriateness Method User’s Manual can be viewed by clicking the box below:

Click here to view the RAND/UCLA Appropriateness Method User’s Manual
Endorsement Protocol: Step 1
How to Submit a Request for Endorsement

- **An external organization seeking AAOS endorsement** for its AUC must first submit its request using the following form:

  ![Click here to Submit an AAOS AUC Endorsement Request](image)

- **Requests can also be submitted** by one of the following: A member of the AAOS Board of Directors, the Chair of the AAOS Council on Advocacy, the Chair of the AAOS Council on Research and Quality, the Chair of the AAOS Council on Education, or the Chair of the AAOS Communications Cabinet.

- **After submission** the AAOS Evidence Based Medicine Coordinator ([ebm@aaos.org](mailto:ebm@aaos.org)) will begin the review process for external AUC endorsement by notifying the Chair of the Committee on Evidence-Based Quality and Value (EBQV) that a request for endorsement has been submitted.
The Chair of the Committee on EBQV and the AUC Section Leader will be responsible for determining which external AUCs will be reviewed based on:

1) The relevance of this topic to orthopaedics and to the needs of our members.
2) Whether the AUC topic addresses one or more of the following:
   - Procedures that are used frequently
   - Procedures that are associated with a substantial amount of morbidity and/or mortality
   - Procedures that consume significant resources
   - Procedures with wide variation among geographic regions in rates of use
   - Procedures whose use is controversial
Endorsement Protocol: Step 2
Evaluation of AUC Methodology by AAOS Staff

- If the external AUC is deemed appropriate for evaluation by the Chair of the Committee on EBQV and the AUC Section Leader, two members of AAOS staff, working blinded from each other, will independently rate the AUCs methodology based on predetermined criteria (listed on the following page).
Endorsement Protocol: Step 2 Criteria for Evaluating AUC Methodology

- Was a literature review conducted for this AUC, complete with quality appraisal of the articles?
- Did a writing panel consisting of specialists in the topic of interest produce the relevant materials for the AUC (e.g. assumptions, patient indications/scenarios, and treatments)?
- Did a multidisciplinary panel* rate the appropriateness of treatment for the patient scenarios via more than one round of voting (i.e. using the Delphi method)?
- Are the methods used to create the AUC reported?
- Is this AUC less than five years old?
- Is there a statement of conflict of interest?
- Has the external organization submitted a complete copy of the AUC, including any supporting materials?
- Was there a non-voting methodologist assisting the panels during the development of the AUC?

*Note that the writing panel and voting panel do not necessarily have to be a separate group of clinicians
Endorsement Protocol: Step 3
Endorsement Recommendation by Chair of the Committee on EBQV and the AUC Section

- If all of the endorsement criteria are met, the Chair of the Committee on EBQV and the AUC Section members (including the AUC Section Leader) will decide to endorse, or not endorse, the external AUC by individually submitting an electronic endorsement form. The results of this form will be reported in aggregate to ensure that individual ratings are anonymous. The aggregated results will be assessed using the Nominal Group Technique (NGT).

- Briefly, each member of the team ranks his or her agreement with the external AUC on a Likert scale ranging from 1 to 5 (where 1 is “Strongly Disagree” and 5 is “Strongly Agree”).

- Consensus is obtained if the number of individuals who do not rate a measure as 4 or 5 is statistically non-significant (as determined using the binomial distribution).

- Because the number of team members who are allowed to dissent depends on statistical significance, the number of permissible dissenters varies with the size of the team. The number of permissible dissenters for 4-5 members is 0, whereas the number for 6-8 members is 1.
Endorsement Protocol: Step 3 Protocol for AUCs that Do Not Meet the Endorsement Criteria

- The NGT is conducted by first having members vote on a given external AUC without discussion using the AUC Endorsement Recommendation Form. If the number of dissenters is “permissible”, the external AUC is adopted without further discussion. If the number of dissenters is not permissible, there is further discussion to see whether the disagreement(s) can be resolved. Three rounds of electronic voting are held to attempt to resolve disagreements. If disagreements are not resolved after three voting rounds, the external CPG is not adopted.

- In the event that the external AUC does not meet the endorsement criteria, the AUC Section Leader will notify the external organization’s point of contact or the requestor that the external AUC will not be endorsed by the AAOS and the external AUC, along with all accompanying endorsement documents, will be kept on file at AAOS headquarters.
Endorsement Protocol: Step 3
AUC Endorsement Recommendation Form Questions

The statements listed below are measured using a 1-5 Likert scale, where 1 equals “Strongly Disagree” and 5 equals “Strongly Agree”

1. The appropriateness ratings, treatments, and patient scenarios reported in this AUC are clear and interpretable.
2. I agree with the appropriateness ratings reported in this document.
3. The appropriateness ratings are applicable to a sufficient patient population.
4. When applied, the appropriateness ratings reported in this document will produce more benefits than harm for patients across and within regions in the U.S.
5. The external AUC should be endorsed by the AAOS
Endorsement Protocol: Step 4 Approval

Subsequent to a recommendation to endorse an external AUC by the members listed in Step 3, the external AUC will be subject to processes similar to those used to approve an AAOS AUC. As such, three AAOS bodies will be involved in the approval process. The external AUC is not endorsable if one AAOS body does not approve. The external AUC will undergo approval by the following bodies in the order listed below:

1. The AUC Section
2. The Council on Research and Quality
3. The Board of Directors
References