

Children's Oncology Group Supportive Care Guidelines Committee Endorsement Policy

The Children's Oncology Group (COG) Supportive Care Guidelines Committee will consider guidelines for COG endorsement that address topics that are relevant to the mission of the COG.

The Committee will systematically search for guidelines relevant to supportive care. Guidelines may also be forwarded to the COG Supportive Care Guidelines Committee for consideration for COG endorsement by any interested party.

Members of the COG Supportive Care Guidelines Committee will complete conflict of interest statements with respect to each guideline undergoing the endorsement evaluation process. Members with a conflict will not be involved in the endorsement evaluation and decision.

CRITERIA FOR COG ENDORSEMENT

1. Guidelines considered for endorsement must address topics that are consistent with the mandate of the COG and be based on a systematic review of the literature as defined by the National Guideline Clearinghouse (see: <http://www.guideline.gov/about/inclusion-criteria.aspx>).
2. Guidelines which include both children and adults in their scope will be considered for evaluation if the pediatric recommendations meet the criteria of the National Guideline Clearinghouse.
3. Each guideline under consideration for COG endorsement will:
 - a. undergo assessment by all COG Supportive Care Guidelines Committee members with at least four members using the AGREE-II tool
 - b. proceed to external review after unanimous agreement of the COG Supportive Care Guidelines Committee voting members
 - c. undergo external review by 5 to 8 COG members external to the committee who have relevant expertise and who, where pertinent to the guideline topic, represent the geographical breadth of the COG membership. Reviewers will be selected at the discretion of the COG Supportive Care Guidelines Committee. All reviewers will complete a conflict of interest statement.
 - d. be reviewed by the COG Supportive Care Guidelines Committee in light of the external reviewers' comments. A response to each comment received will be formulated. Major concerns regarding the integrity of the guideline content or major barriers in uptake/implementation by the COG membership voiced by the external reviewers may preclude COG endorsement.

DOCUMENTATION AND COMMUNICATION OF COG ENDORSED GUIDELINES

Documents used in the endorsement process, including but not limited to AGREE-II scores and stakeholder survey responses, will not be shared outside of the committee membership.

Guidelines that meet the criteria for COG endorsement will be modified to include terminology relevant to the COG membership with permission of the source guideline authors (if relevant) and be summarized in a brief document using COG-specific terminology. A link to the source guideline, whenever feasible, will be included. The COG-specific guideline summary will be created by a COG Supportive Care Guideline Committee member and cross-checked against the source guideline by a second Committee member. This document will be posted on the COG Supportive Care Guideline web page that is accessible to COG members and non-members alike.

All COG Committee chairs, lead CRAs, site PI's and protocol coordinators will be informed of the availability of the endorsed guideline in the weekly e-mail from the SDO. A notice of the guideline endorsement will also be sent to members of the Cancer Control Committee listserv and site Cancer Control Responsible Individuals.

IMPLEMENTATION OF COG ENDORSED GUIDELINES

Although not directly within the Committee's mandate, the Committee welcomes the development of tools by the COG community to facilitate implementation of COG endorsed guidelines and will consider posting such tools on the COG supportive care guideline web page.

ARCHIVING COG ENDORSED GUIDELINES

Five years after publication, all endorsed guidelines will be archived. See: Archiving COG-Endorsed Clinical Practice Guidelines

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