National Guideline Clearinghouse™ (NGC) Template and Definitions

Complete Summary

The National Guideline Clearinghouse[™] (NGC), sponsored by the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services, includes the following attributes in the Complete Summary. The table below provides descriptions of each guideline attribute and also represents NGC's Template of Guideline Attributes.

Guideline Title	Identifies the complete title of the guideline.
Bibliographic Source(s)	Identifies the complete bibliographic source(s) for the published guideline as disseminated by the guideline developer(s). The number of references cited is included for each source. Links are provided to PubMed where applicable.
Guideline Status	Identifies whether the guideline is a revised or updated version of a previously issued document as well as whether an update is currently in progress.

REGULATORY ALERT

FDA	
Warning/Regulatory	
Alert	

Identifies important warnings and/or revised regulatory information released by the U.S. Food and Drug Administration (FDA) or other official regulatory body for a drug and/or device for which recommendations are provided in the original guideline document.

COMPLETE SUMMARY CONTENT

REGULATORY ALERT

SCOPE

METHODOLOGY - including Rating Scheme and Cost Analysis

RECOMMENDATIONS

EVIDENCE SUPPORTING THE RECOMMENDATIONS

BENEFITS/HARMS OF IMPLEMENTING THE RECOMMENDATIONS

CONTRAINDICATIONS

QUALIFYING STATEMENTS

IMPLEMENTATION OF THE GUIDELINE

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT

CATEGORIES

IDENTIFYING INFORMATION AND AVAILABILITY

DISCLAIMER

SCOPE

Disease/Condition(s)	Identifies the major areas of clinical medicine or health care addressed in the guideline. Values are expressed using the natural language expressions found in the text of the guideline.

Guideline Category	Classifies the major focus of the guideline. Values are selected from a controlled list:
	Assessment of Therapeutic Effectiveness, Counseling, Diagnosis, Evaluation, Management, Prevention, Rehabilitation, Risk Assessment/Prognosis, Screening, Technology Assessment, Treatment
Clinical Specialty	Classifies the clinical specialties that might use the guideline professionally. Values are selected from a controlled list:
	Allergy and Immunology, Anesthesiology, Cardiology, Chiropractic, Colon and Rectal Surgery, Critical Care, Dentistry, Dermatology, Emergency Medicine, Endocrinology, Family Practice, Gastroenterology, Geriatrics, Hematology, Infectious Diseases, Internal Medicine, Medical Genetics, Nephrology, Neurological Surgery, Neurology, Nuclear Medicine, Nursing, Nutrition, Obstetrics and Gynecology, Oncology, Ophthalmology, Optometry, Orthopedic Surgery, Otolaryngology, Pathology, Pediatrics, Pharmacology, Physical Medicine and Rehabilitation, Plastic Surgery, Podiatry, Preventive Medicine, Psychiatry, Psychology, Pulmonary Medicine, Radiation Oncology, Radiology, Rheumatology, Sleep Medicine, Speech-Language Pathology, Sports Medicine, Surgery, Thoracic Surgery, Urology
Intended Users	Classifies the groups intended to use the guideline. Values are selected from a controlled list:
	Allied Health Personnel; Chiropractors; Clinical Laboratory Personnel; Dentists; Dietitians; Emergency Medical Technicians/Paramedics; Health Care Providers; Health Plans; Hospitals; Managed Care Organizations; Nurses; Occupational Therapists; Patients; Pharmacists; Physical Therapists; Physician Assistants; Physicians; Podiatrists; Psychologists/Non-physician Behavioral Health Clinicians; Public Health Departments; Respiratory Care Practitioners; Social Workers; Speech-Language Pathologists; Students; Substance Use Disorders Treatment Providers; Utilization Management
Guideline Objective(s)	Describes the objectives of the guideline, as specified in the guideline text by the developers.
Target Population	Describes the target population(s) addressed in the guideline.
	Identifies restrictions on guideline use such as within a managed care plan or geographic region.
Interventions and Practices Considered	Identifies the specific clinical interventions and practices considered in the guideline. Values are expressed using natural language expressions found in the text of the guideline.

Major Outcomes Considered	Describes the most important specific outcomes or performance measures considered in the guideline. Includes patient outcomes described in treatment guidelines and diagnostic test performance characteristics described in diagnosis or screening guidelines.
METHODOLOGY	
Methods Used to Collect/Select the Evidence	Classifies the methods used to collect and select the evidence that was evaluated. Values are selected from a controlled list:
	Hand-searches of Published Literature (Primary Sources), Hand- searches of Published Literature (Secondary Sources), Searches of Electronic Databases, Searches of Patient Registry Data, Searches of Unpublished Data
Description of Methods Used to Collect/Select the Evidence	Describes/summarizes the specific methods used to collect and select the evidence, as identified in the text of the guideline or by the guideline developer. Can include detailed search strategies, lists of journals scanned, keywords, database sources, inclusion and exclusion criteria, etc.
Number of Source Documents	Identifies the number of source documents that were identified by the methods described above under "Description of Methods used to Collect/Select the Evidence."
	The number of source documents is NOT the number of references.
Methods Used to Assess the Quality and Strength of the Evidence	Classifies the methods used by the guideline developer to determine what relative importance to give the evidence they obtained. Values are selected from a controlled list:
	Expert Consensus, Expert Consensus (Committee), Expert Consensus (Delphi method), Subjective Review, Weighting According to a Rating Scheme (Scheme Given), Weighting According to a Rating Scheme (Scheme Not Given), Not stated
Rating Scheme for the Strength of the Evidence	Presents rating scheme for strength of evidence, when given.
Methods Used to Analyze the Evidence	Classifies the methods used by the guideline developer to evaluate the data in the evidence they obtained. Values are selected from a controlled list:
	Decision Analysis, Meta-Analysis, Meta-Analysis of Individual Patient Data, Meta-Analysis of Observational Trials, Meta-Analysis of Randomized Controlled Trials, Meta-Analysis of Summarized Patient Data, Review, Review of Published Meta-Analyses, Systematic Review, Systematic Review with Evidence Tables, Other

Description of Methods Used to Analyze the Evidence	Describes the methods used to analyze the evidence. Presents additional definition for the values presented under "Methods to Analyze the Evidence" (for example, defines "systematic" or summarizes the details of the meta-analyses).
Methods Used to Formulate the Recommendations	Identifies the methods used to translate evidence into statements that will assist practitioners and patients make decisions about appropriate health care for specific clinical circumstances. Values are chosen from a controlled vocabulary.
	Informal Consensus; Expert Consensus; Expert Consensus (Delphi), Expert Consensus (Nominal Group Technique), Expert Consensus (Consensus Development Conference), Balance Sheets, Other, Not Stated
Description of the Methods used to Formulate the Recommendations	Captures the details of the methods used to translate evidence into recommendation statements, if so provided in the guideline documents. Issues, such as cost, patient preference, and values, considered by the guideline developers during recommendation formulation are also captured.
Rating Scheme for the Strength of the Recommendations	Captures the weighted scheme used by the guideline developer to determine what relative strength or importance to give to the recommendations being made. The relative strength or importance may be derived from the quality and strength of the evidence upon which recommendations are based, from a strictly clinical perspective, or both.
Cost Analysis	Identifies if a cost analysis was performed or if published cost analysis studies were reviewed, to enable the user to search for guidelines with such analyses.
Method of Guideline Validation	Describes any formal cost analysis performed and any published cost analyses reviewed.
Description of Method of Guideline Validation	Summarizes the methods used to validate the recommendations of the guideline. Validation is defined as "the results of any external review, comparison with guidelines from other groups or clinical testing of guideline use" (Hayward RSA, et al. More informative abstracts of articles describing clinical practice guidelines, Ann Intern Med 1993 May 1[9];118:731-7). Values are selected from a controlled list:
	Clinical Validation-Pilot Testing, Clinical Validation-Trial Implementation Period, Comparison with Guidelines from Other Groups, External Peer Review, Internal Peer Review, Peer Review, Not stated
RECOMMENDATIONS	
Major	Identifies the major recommendations, copied verbatim from the

Recommendations	guideline, or supplied separately by the guideline developer.
Clinical Algorithm(s)	Identifies which of the recommendations are expressed in the form of clinical algorithm(s) and where the algorithm(s) are provided.
EVIDENCE SUPPORTII	NG THE RECOMMENDATIONS
References Supporting the Major Recommendations	Lists the references of evidence supporting the recommendations when explicit recommendations are offered and when the references are supplied with those explicit recommendations. This field opens in a new window. Links are provided to PubMed where applicable.
Type of Evidence supporting the Recommendations	Describes the type of evidence supporting the recommendations.
BENEFITS/HARMS OF	IMPLEMENTING THE RECOMMENDATIONS
Potential Benefits	Describes the anticipated benefits associated with implementing the guideline's recommendations, as stated in the guideline text, to target populations or intended users. Where applicable, the field also includes information on the major subgroup(s) of patients within the target population most likely to benefit from the guideline recommendations, as identified by the guideline developer.
Potential Harms	Description of the anticipated harms, potential risks or adverse consequences associated with the guideline's recommendations, as stated in the guideline text, to target populations or intended users. Where identified by the original guideline document, the major subgroup(s) of patients within the target population most likely to suffer harm/adverse consequences associated with the guideline recommendations will also be described.
CONTRAINDICATIONS	
Contraindications	Identifies the instances (e.g., co-morbidities), as provided by the guideline developers, which might render the use of medications or procedures improper, undesirable, or inadvisable.
QUALIFYING STATEM	ENTS
Qualifying Statements	Presents qualifying statements or important caveats pertaining to the <i>major</i> recommendations of the guideline emphasized by the guideline developer. Identifies the area of uncertainty and presents a brief description of how the guideline developer addressed this uncertainty in developing the major recommendations of the guideline.
	Only caveats pertaining to the major recommendations are included. This attribute may also present information regarding uncertainty or controversies in the field identified by the guideline developer that

	prevents formulation of specific recommendations regarding important aspects within the guideline.
	Disclaimer-type statements are also captured in this field.
IMPLEMENTATION OF	THE GUIDELINE
Description of the Implementation Strategy	Describes specific strategies, aims, performance measures, or plans for implementing the guideline recommendations, if presented in the guideline or supplied by the guideline developer.
Implementation Tools	Classifies the types of implementation tools provided by the guideline developer to facilitate the implementation of their guideline. Values are chosen from a controlled vocabulary. Audit Criteria/Indicators; Chart Documentation/Checklists/Forms; Clinical Algorithm; Foreign Language Translations; Patient Resources; Personal Digital Assistant (PDA) Downloads; Pocket Guide/Reference Cards; Quality Measures; Quick Reference Guides/Physician Guides; Resources; Slide Presentation; Staff Training/Competency Material; Tool Kits; Wall Poster
Related Measures in the National Quality Measures Clearinghouse™	Identifies link(s) to related quality measures or measure sets in the National Quality Measures Clearinghouse™ (NQMC).
Related Tools in the QualityTools™ Clearinghouse	Identifies link(s) to related quality tools on the QualityTools™ Web site.
INSTITUTE OF MEDICI	NE (IOM) NATIONAL HEALTHCARE QUALITY REPORT
IOM Care Need	Classifies the guideline into one of four Institute of Medicine (IOM) care need classifications: End of life care; Getting better; Living with illness; Staying healthy.
IOM Domain	Classifies the guideline into one or more of the four Institute of Medicine (IOM) care domains: Effectiveness; Patient centeredness; Safety; Timeliness.
IDENTIFYING INFORM	ATION AND AVAILABILITY
Bibliographic Source(s)	Identifies the complete bibliographic source(s) for the published guideline as disseminated by the guideline developer(s). The number of references cited is included for each source. Links are provided to PubMed where applicable.
Adaptation	Identifies that the guideline has been adapted <i>from</i> another guideline and identifies the source document.
Date Released	Identifies the date the guideline was released to the public.

Guideline Developer(s)	Identifies the organization(s) responsible for the development of the guideline. Each organization is classified by the major designation or function (derived from the Organization Type attribute), such as "Medical Specialty Society" or "Professional Association".
Guideline Developer Comment	If the guideline developer is a consortium or represents a group of organizations, this attribute identifies the individual organizations by name.
Source(s) of Funding	Identifies source(s) of financial support for guideline development, as identified in the guideline text or by the guideline developer. Lists any grant numbers associated with funding, as identified in the guideline text or by the guideline developer.
Guideline Committee	Identifies formal name, if any, of committee/subcommittee within the guideline developer organization(s) responsible for developing the guideline.
Composition of Group that Authored the Guideline	Describes the composition of the group/committee that authored the guideline, including professional degrees and affiliations, and lists the names of individual committee members, where given.
Financial Disclosures/Conflicts of Interest	Captures relationships between individuals of the guideline development committee/group and for-profit and not-for-profit companies or organizations that could potentially influence that individual's contribution to the guideline's development.
Endorser(s)	Identifies organization(s) that have endorsed the guideline, as identified in the text of the guideline document or explicitly by the guideline developer. Each organization is classified by the major designation or function (derived from the Organization Type attribute), such as "Medical Specialty Society" or "Professional Association".
Guideline Status	Identifies whether the guideline is a revised or updated version of a previously issued document as well as whether an update is currently in progress.
Guideline Availability	Identifies information about the availability of the guideline. Provides, where possible, information regarding electronic (including hypertext links to the full-text) copies and ordering information for print copies.
Availability of Companion Documents	Identifies the companion documents produced by the guideline developer that are considered relevant to the guideline. These companion documents are not necessarily available within NGC.
	For example, Quick Reference Guides and Technical Reports, all of which would be listed here, accompany guidelines produced by the Agency for Healthcare Research and Quality (AHRQ) (formerly the Agency for Health Care Policy and Research [AHCPR]).
Patient Resources	Identifies patient resources that are directly related (i.e., derived and/or prepared from the guideline by the guideline developer) to the guideline included in NGC. The patient information is not reviewed by NGC to establish whether or not it accurately reflects the original guideline's content.

NGC Status	Identifies when the guideline was completed or revised by ECRI, and verified by the submitting organization(s).
Copyright Statement	Provides the copyright statement of the organization that submitted the guideline.
DISCLAIMER	

Indexing Attributes Guideline Summaries are also indexed for the following attributes to support Detailed Searches, and Disease/Condition and Treatment/Intervention Browsing of the database. Age of the Target Describes the age group(s) represented by the target population, Population enabling users to restrict their searches to a particular age group(s). Sex of the Target Classifies the sex(es) represented by the target population, **Population** enabling users to restrict their searches to a particular gender. Disease/Condition(s) NGC uses Medical Subject Headings (MeSH) produced by the U.S. National Library of Medicine (NLM), along with other controlled vocabularies, such as the International Classification of Diseases (ICD), incorporated into NLM's Unified Medical Language System (UMLS) to classify disease concepts related to NGC guidelines. Treatment/Intervention NGC uses Medical Subject Headings (MeSH) produced by the U.S. National Library of Medicine (NLM), along with other controlled vocabularies, such as the U.S. Health Care Financing Administration (HCFA) Common Procedure Coding System and ECRI's Universal Medical Device Nomenclature System (UMDNS), incorporated into NLM's Unified Medical Language System (UMLS) to classify treatment/intervention concepts related to NGC guidelines.