

Pediatric Guidelines – Author's Instructions

PURPOSE OF GUIDELINES

The guidelines aim to:

- Aid health care providers in making decisions about best practices and appropriate patient care
- Improve outcomes
- Improve health care access throughout the state of Arkansas
- Focus on essential clinical information that is organized in a systematic, logical order—as if the author were working up a patient and following through the various stages of management
- Serve as a quick reference for practicing physicians, including when and how to refer for specialty care

The guidelines *are not* protocols and *are not* intended to dictate an exclusive course of treatment.

INTENDED GUIDELINE AUDIENCE

Physicians and other health care professionals providing bedside care

Format

- Limit guideline to 1700 words
- Tables and bulleted points are encouraged.

GUIDELINE DEVELOPMENT

- Utilize existing national practice guidelines and performance metrics as resources.
- Use current evidence-based references from respected, nationally or internationally known medical sources.
- Adapt these recommendations to serve Arkansas needs.
- Consider the guideline to be an outline of care delivery.
- Base guideline preparation on improving outcomes, decreasing costs, and adding to the reader's understanding of how to improve quality of care in the clinical setting.

GUIDELINE FORMAT

References and Copyrights

- Authors are responsible for the accuracy of references.
- Seek out and use the most current and up-to-date references.
- Include seminal studies as appropriate.
- Include references to nationally accepted practice guidelines in the reference list.
- Acknowledge sources used in the guideline, including paraphrasing and summarizing, with a "References" page at the end.
- In-text references are not needed.

See "Literature Searches," below for additional help with research. For references style and formatting assistance, contact the guideline manager.

Copyright laws must be respected:

- *Permission must be granted from the owner of the copyright before the material is used in a guideline.* Journals usually maintain the copyright of an author's

submission; therefore, do not assume that you can grant copyright permission because you are the author of a previously published work.

- There is a common misconception that information or images found on the Internet are considered to be in the public domain. Most often this is not the case, although there are exceptions. Good sources can often be found in the public domain, particularly federal government websites.
- If a copyright holder charges a fee to grant permission, the author must provide supporting documentation and lack of alternatives to justify the cost. All requests will be reviewed by a committee to consider approving the request. This can be very costly, sometimes over \$1,000 to be paid *annually* for the use of a table!

Acronyms & Brand Names

All *acronyms* in the text should be expanded at first mention, followed by the abbreviation in parentheses. Thereafter, the acronym may appear in the text. Avoid *brand names*. Authors should use nonproprietary names of drugs or devices unless mention of the manufacturer is pertinent.

Figures

Figures include algorithms, graphs, charts, and tables.

- Authors should number figures in the order in which they appear in the text.
- Algorithms or flow diagrams are encouraged and can serve as a helpful, additional tool.

If a figure is reproduced from another source, authors are required to obtain permission from the copyright holder, and proof of permission must be sent to the guideline manager at the time the guideline review is submitted.

GUIDELINE AUTHOR /REVIEWER CONFLICT OF INTEREST

In order to ensure balance, independence, objectivity, and scientific rigor in guideline development, authors must make full disclosure indicating whether they and/or a spouse or domestic partner have had any relevant financial relationships with commercial interests within the last 12 months. Submit the UAMS College of Medicine, Office of Continuing Medical Education Disclosure of Relevant Financial Relationships Form (see attachment) to the guideline director prior to reviewing the guideline.

GUIDELINE VALIDATION

The recommendations issued in the Guidelines present suggested advice melding evidence-based literature review and physician peer review with consensus. Through interactive video teleconferences, discussions occur for recommendations from rural and urban providers to define researched best practices. Participating providers are also encouraged to submit comments via the website, electronic mail, or telephone.

LITERATURE SEARCHES

Many authors and reviewers prefer to perform their own literature searches by utilizing nationally known sources. ***Guideline recommendations should support the standards put forth by our national leading organizations in the field and then adapt those recommendations for providers in Arkansas.***

Suggested sources include:

- Agency [for Healthcare Research](#) and Quality (AHRQ), [National Guideline Clearinghouse](#)
- AHRQ [guideline resources](#) and complementary web sites
 - [AHRQ, National Quality Measures Clearinghouse](#)
 - [AHRQ Quality Indicators](#)
 - [Arkansas Department of Health](#)
 - [Arkansas Foundation for Medical Care](#)
 - [American Academy of Pediatrics](#)
 - [The Centers for Disease Control and Prevention](#)
 - [Health Resources and Services Administration](#)
 - [National Institutes of Health, U.S. National Library of Medicine](#)
 - [Quality and Safety in Women's Health Care](#)
 - [RedBook \(Developed by the American Academy of Pediatrics Committee on Infectious Diseases\)](#)

The UAMS research librarian can provide a literature search using all evidence-based medicine databases. If you choose to utilize this service and would like to discuss any requests regarding your literature search,

REVIEWS

To ensure the most current information is available within the guidelines, guideline reviews are conducted every 3 years, or more often if needed.

- Any updates to the guideline are noted at both a teleconference and online.
- Authors review guidelines for updates and possible revisions.
- Authors may access specialty societies, national databases, FDA alerts, major announcements or publications, new drug releases, etc. to update the guideline *and references* accordingly.
- If changes or updates to guidelines are needed prior to the annual review date, please contact the guideline manager so the update process is expedited.
- Reminder notices will be sent to the reviewer along with more specific instructions as it draws nearer to the review due date.

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