Article Information: DOI, to be added by journal’s editor.

| **Section/Topic** | **No** | **Item** | **Reported on**  Page/Section/Paragraph(s) |
| --- | --- | --- | --- |
| **Basic information** | | | |
| Title/subtitle | 1a | Identify the report as a guideline, that is, with “guideline(s)” or “recommendation(s)” in the title. | Click or tap here to enter text. |
| 1b | Describe the year of publication of the guideline. | Click or tap here to enter text. |
| 1c | Describe the focus of the guideline, such as screening, diagnosis, treatment, management, prevention, or others. | Click or tap here to enter text. |
| Executive summary | 2 | Provide a summary of the recommendations contained in the guideline. | Click or tap here to enter text. |
| Abbreviations and acronyms | 3 | Define new or key terms, and provide a list of abbreviations and acronyms if applicable. | Click or tap here to enter text. |
| Corresponding developer | 4 | Identify at least 1 corresponding developer or author who can be contacted about the guideline. | Click or tap here to enter text. |
| **Background** | | | |
| Brief description of the health problem(s) | 5 | Describe the basic epidemiology of the problem, such as the prevalence/incidence, morbidity, mortality, and burden (including financial) resulting from the problem. | Click or tap here to enter text. |
| Aim(s) of the guideline and specific objectives | 6 | Describe the aim(s) of the guideline and specific objectives, such as improvements in health indicators (e.g., mortality and disease prevalence), quality of life, or cost savings. | Click or tap here to enter text. |
| Target populations | 7a | Describe the primary population(s) that is affected by the recommendation(s) in the guideline. | Click or tap here to enter text. |
| 7b | Describe any subgroups that are given special consideration in the guideline. | Click or tap here to enter text. |
| End users and settings | 8a | Describe the intended primary users of the guideline (such as primary care providers, clinical specialists, public health practitioners, program managers, and policymakers) and other potential users of the guideline. | Click or tap here to enter text. |
| 8b | Describe the setting(s) for which the guideline is intended, such as primary care, low- and middle-income countries, or inpatient facilities. | Click or tap here to enter text. |
| Guideline development groups | 9a | Describe how all contributors to the guideline development were selected and their roles and responsibilities (e.g., steering group, guideline panel, external reviewer, systematic review team, and methodologists). | Click or tap here to enter text. |
| 9b | List all individuals involved in developing the guideline, including their title, role(s) and institutional affiliation(s). | Click or tap here to enter text. |
| **Evidence** | | | |
| Health care questions | 10a | State the key questions that were the basis for the recommendations in PICO (population, intervention, comparator, and outcome) or other format as appropriate. | Click or tap here to enter text. |
| 10b | Indicate how the outcomes were selected and sorted. | Click or tap here to enter text. |
| Systematic reviews | 11a | Indicate whether the guideline is based on new systematic reviews done specifically for this guideline or whether existing systematic reviews were used. | Click or tap here to enter text. |
| 11b | If the guideline developers used existing systematic reviews, reference these and describe how those reviews were identified and assessed (provide the search strategies and the selection criteria, and describe how the risk of bias was evaluated) and whether they were updated. | Click or tap here to enter text. |
| Assessment of the certainty of the body of evidence | 12 | Describe the approach used to assess the certainty of the body of evidence. | Click or tap here to enter text. |
| **Recommendations** | | | |
| Recommendations | 13a | Provide clear, precise, and actionable recommendations. | Click or tap here to enter text. |
| 13b | Present separate recommendations for important subgroups if the evidence suggests that there are important differences in factors influencing recommendations, particularly the balance of benefits and harms across subgroups. | Click or tap here to enter text. |
| 13c | Indicate the strength of recommendations and the certainty of the supporting evidence. | Click or tap here to enter text. |
| Rationale/explanation for recommendations | 14a | Describe whether values and preferences of the target population(s) were considered in the formulation of each recommendation. If yes, describe the approaches and methods used to elicit or identify these values and preferences. If values and preferences were not considered, provide an explanation. | Click or tap here to enter text. |
| 14b | Describe whether cost and resource implications were considered in the formulation of recommendations. If yes, describe the specific approaches and methods used (such as cost-effectiveness analysis) and summarize the results. If resource issues were not considered, provide an explanation. | Click or tap here to enter text. |
| 14c | Describe other factors taken into consideration when formulating the recommendations, such as equity, feasibility and acceptability. | Click or tap here to enter text. |
| Evidence to decision processes | 15 | Describe the processes and approaches used by the guideline development group to make decisions, particularly the formulation of recommendations (such as how consensus was defined and achieved and whether voting was used). | Click or tap here to enter text. |
| **Review and quality assurance** | | | |
| External review | 16 | Indicate whether the draft guideline underwent independent review and, if so, how this was executed and the comments considered and addressed. | Click or tap here to enter text. |
| Quality assurance | 17 | Indicate whether the guideline was subjected to a quality assurance process. If yes, describe the process. | Click or tap here to enter text. |
| **Funding, declaration and management of interests** | | | |
| Funding source(s) and role(s) of the funder | 18a | Describe the specific sources of funding for all stages of guideline development. | Click or tap here to enter text. |
| 18b | Describe the role of funder(s) in the different stages of guideline development and in the dissemination and implementation of the recommendations. | Click or tap here to enter text. |
| Declaration and management of interest | 19a | Describe what types of conflicts (financial and nonfinancial) were relevant to guideline development. | Click or tap here to enter text. |
| 19b | Describe how conflicts of interest were evaluated and managed and how users of the guideline can access the declarations. | Click or tap here to enter text. |
| **Other information** | | | |
| Access | 20 | Describe where the guideline, its appendices, and other related documents can be accessed. | Click or tap here to enter text. |
| Suggestions for further research | 21 | Describe the gaps in the evidence and/or provide suggestions for future research. | Click or tap here to enter text. |
| Limitations of the guideline | 22 | Describe any limitations in the guideline development process (such as the development groups were not multidisciplinary or patients’ values and preferences were not sought), and indicate how these limitations might have affected the validity of the recommendations. | Click or tap here to enter text. |

The Reporting Items for practice Guidelines in HealThcare (RIGHT), see <http://www.right-statement.org/>

[From: Chen Y, Yang K, Marušić A, et al. A Reporting Tool for Practice Guidelines in Health Care: The RIGHT Statement[J]. Annals of Internal Medicine, 2017, 166(2):128-132.](https://www.acpjournals.org/doi/10.7326/M16-1565)