

GUIDELINES

Joint Guidelines Committee. At its October 2006 meeting, the JGC established a framework for reviewing guidelines. Since that meeting, the JGC has tried to link neurosurgery section efforts to professional consultation firms (e.g., AHA, NASS, AHRQ, funded EPCs, private consulting firms, and academic departments). The JGC is working on creating a page on the Washington Committee's webpage that will include information about the committee's mission, its guideline review framework, and its process for selecting and reviewing guidelines.

Current projects either under way or under consideration include:

- **Brain Trauma Foundation's Third Edition of the *Guidelines for the Management of Severe Traumatic Brain Injury*:** Following an interactive conference call, the JGC submitted comments on the Brain Trauma Foundation's Third Edition of the *Guidelines for the Management of Severe Traumatic Brain Injury*. The authors responded promptly by making revisions based on the JGC's concerns. After considering the authors' responses, the AANS and CNS decided to endorse the guidelines. In the letter, we listed ongoing concerns. Although the authors were not required to address these additional concerns, they made the suggested changes. The authors also expressed their sincere appreciation for our diligent work in reviewing the guidelines. In the end, this activity was a great example of the JGC's ability to collaborate with external groups to evaluate guidelines in a timely manner. When these guidelines are published, the JGC will post an abstract of the final guidelines and a summary of the guideline review process, including our original comments, on the JGC webpage.
- **Metastatic Brain Tumor Multidisciplinary Evidence-Based Clinical Practice Parameter Guideline Initiative:** In October 2006, the JGC sent out a request for proposal (RFP) regarding the development of multidisciplinary evidence based clinical practice parameter guidelines on metastatic brain tumors. After the JGC and AANS and CNS leadership reviewed the responses, it realized it may have conceived of too large a project to sustain financially on an ongoing outsourcing basis. After collecting feedback from multiple sources, it decided not to fund the original RFP. Instead, the JGC redesigned and re-issued a new RFP for a scaled-down version of the metastatic brain tumor initiative. The revised RFP was sent to Tufts EPC, Duke EPC, McMasters EPC, Chalmers Research Group/Ottawa EPC, DMICE- Oregon Health Sciences EPC, and University of Washington. Interested parties have until April 1, 2007 to respond to the RFP. As of March, the JGC heard back from two of the groups. The Tufts EPC is very interested in submitting a proposal and the Oregon Health Sciences EPC has also expressed interest.
- **Newly-Diagnosed GBM Initiative:** This initiative was started in 2002. The guidelines currently consist of five chapters, three of which were already reviewed by Beverly Walters. The JGC chairs will contact Dr. Walters to determine how the committee can assist her in the completion of this review.
- **Spine Clinical Guideline Collaborative Project: Diagnosis and Management of Lumbar Radiculopathy:** At its December 2006 meeting, the Washington Committee voted in favor of the AANS and CNS participating in the first NASS-sponsored collaborative spine clinical guidelines project, which will focus on Diagnosis and Management of Lumbar Radiculopathy. The estimated direct cost per society is \$3,150.00, plus travel and staff time. Other groups that may participate include: NASS, AAOS, American Society of Spine Radiology, American Academy of Pain Medicine, American College of Rheumatology, American Academy of Physical Medicine & Rehabilitation, and the American Pain Society. AANS and CNS have requested that NASS modify the Terms and Agreement in a way that limits our financial obligation. NASS is currently working to resolve this and other requests for changes to the agreement. The following individuals have

agreed to represent neurosurgery on this project: Paul Matz, Tim Ryken, Dan Resnick, Michael Kaiser, and Robert Heary. Each has been asked to complete the NASS Evidence-Based Medicine (EBM) Training Module prior to the start of the project. The group will soon meet to identify clinical questions and discuss work group formations. The group hopes to present the final guidelines to the AMA Physician Consortium for Performance Improvement by December 2007.

- **Degenerative Lumbar Spine:** No action to date, although a project is presently funded and in the process of production. The JGC will need to review this project for endorsement.
- **Thoraco-Lumbar Fracture:** No action to date. The JGC co-chairs will approach the Spine and Trauma Sections to co-sponsor guideline development on the Management of Thoracolumbar fractures.
- **Back Pain** (with ACP-APS): Spine Section providing comments and input.
- **Vertebroplasty Position Statement** (with SIR): SIR adopted our suggested revisions and AANS/CNS endorsed the position paper.
- **Hydrocephalus:** Potentially recommend as a joint project of the Pediatric and Stereotactic/Functional Sections, although no action has been taken to date.
- **Subarachnoid hemorrhage** (with AHA): This project is funded by the American Heart Association and is ongoing. The JGC and sections have taken no action to date.
- **Carotid stent registry** (with ACCF): In February 2007, AANS and CNS officially partnered with the American College of Cardiology Foundation to operate the new carotid stent and carotid endarterectomy data registry. Neurosurgery has appointed the following members to each committee: Nick Hopkins (Steering Committee); Elad Levy (Research and Publications Committee); and Peter Rassmussen (Registry and Clinical Oversight Committee). In March, the group participated in a stakeholder's meeting with the FDA.
- **Society of Interventional Radiology reports: "Reporting Terminology for Angioplasty and Stent- Assisted Angioplasty for Intracranial Cerebral Atherosclerosis, Radiographic Features for Use in Clinical Reporting" and "Reporting Standards for Endovascular Repair of Saccular Intracranial Cerebral Aneurysms:"** AANS and CNS agreed to review these two SIR documents. The project is now moving forward and Drs. Bederson, Lavine, and Rassmussen were selected to participate in the Review Committee on behalf of neurosurgery.
- **Extracranial Carotid and Vertebral Artery Disease Guidelines** (with ACC): ACC held the first meeting of this group in New Orleans in conjunction with the ACC annual meeting March. Robert Rosenwasser is representing the AANS and CNS and is impressed with the effort, thus far.
- **Clinical Data Standards for Peripheral Arterial Disease** (with ACC): ACC held the first meeting of this group in New Orleans in conjunction with the ACC annual meeting March. Robert Rosenwasser is representing the AANS and CNS and is impressed with the effort, thus far.

Guidelines Committee Budget. To date, the JGC has been funded in part by the CNS and in part by the Washington Committee. Beginning in FY08, the JGC will be given (subject to the approval of the AANS Board and CNS Executive Committee) its own accounting code and will develop its own operating budget, which will include basic operating expenses for JGC meetings and any current projects. AANS/CNS sponsored guidelines (e.g., metastatic brain tumor) projects will require separate budgets as each project is finalized.