



AGREE Reporting Checklist

2016

AGREE
REPORTING CHECKLIST

This checklist is intended to guide the reporting of clinical practice guidelines.

CHECKLIST ITEM AND DESCRIPTION	REPORTING CRITERIA	Page #
DOMAIN 1: SCOPE AND PURPOSE		
1. OBJECTIVES <i>Report the overall objective(s) of the guideline. The expected health benefits from the guideline are to be specific to the clinical problem or health topic.</i>	<input checked="" type="checkbox"/> Health intent(s) (i.e., prevention, screening, diagnosis, treatment, etc.) <input checked="" type="checkbox"/> Expected benefit(s) or outcome(s) <input checked="" type="checkbox"/> Target(s) (e.g., patient population, society)	6
2. QUESTIONS <i>Report the health question(s) covered by the guideline, particularly for the key recommendations.</i>	<input checked="" type="checkbox"/> Target population <input checked="" type="checkbox"/> Intervention(s) or exposure(s) <input checked="" type="checkbox"/> Comparisons (if appropriate) <input checked="" type="checkbox"/> Outcome(s) <input type="checkbox"/> Health care setting or context	6-8 16-18 suppl ement ary1
3. POPULATION <i>Describe the population (i.e., patients, public, etc.) to whom the guideline is meant to apply.</i>	<input checked="" type="checkbox"/> Target population, sex and age <input type="checkbox"/> Clinical condition (if relevant) <input type="checkbox"/> Severity/stage of disease (if relevant) <input type="checkbox"/> Comorbidities (if relevant) <input type="checkbox"/> Excluded populations (if relevant)	suppl ement ary1
DOMAIN 2: STAKEHOLDER INVOLVEMENT		
4. GROUP MEMBERSHIP <i>Report all individuals who were involved in the development process. This may include members of the steering group, the research team involved in selecting and reviewing/rating the evidence and individuals involved in formulating the final recommendations.</i>	<input type="checkbox"/> Name of participant <input checked="" type="checkbox"/> Discipline/content expertise (e.g., neurosurgeon, methodologist) <input type="checkbox"/> Institution (e.g., St. Peter's hospital) <input type="checkbox"/> Geographical location (e.g., Seattle, WA) <input type="checkbox"/> A description of the member's role in the guideline development group	6-7
5. TARGET POPULATION PREFERENCES AND VIEWS <i>Report how the views and preferences of the target population were sought/considered and what the resulting outcomes were.</i>	<input checked="" type="checkbox"/> Statement of type of strategy used to capture patients'/publics' views and preferences (e.g., participation in the guideline development group, literature review of values and preferences) <input checked="" type="checkbox"/> Methods by which preferences and views were sought (e.g., evidence from literature, surveys, focus groups) <input checked="" type="checkbox"/> Outcomes/information gathered on patient/public information <input type="checkbox"/> How the information gathered was used to inform the guideline development process and/or formation of the recommendations	5
6. TARGET USERS <i>Report the target (or intended) users of the guideline.</i>	<input checked="" type="checkbox"/> The intended guideline audience (e.g. specialists, family physicians, patients, clinical or institutional leaders/administrators)	5

	<input checked="" type="checkbox"/> How the guideline may be used by its target audience (e.g., to inform clinical decisions, to inform policy, to inform standards of care)	
DOMAIN 3: RIGOUR OF DEVELOPMENT		
7. SEARCH METHODS <i>Report details of the strategy used to search for evidence.</i>	<input checked="" type="checkbox"/> Named electronic database(s) or evidence source(s) where the search was performed (e.g., MEDLINE, EMBASE, PsychINFO, CINAHL) <input checked="" type="checkbox"/> Time periods searched (e.g., January 1, 2004 to March 31, 2008) <input checked="" type="checkbox"/> Search terms used (e.g., text words, indexing terms, subheadings) <input checked="" type="checkbox"/> Full search strategy included (e.g., possibly located in appendix)	7-8 Supplementary1
8. EVIDENCE SELECTION CRITERIA <i>Report the criteria used to select (i.e., include and exclude) the evidence. Provide rationale, where appropriate.</i>	<input checked="" type="checkbox"/> Target population (patient, public, etc.) characteristics <input checked="" type="checkbox"/> Study design <input checked="" type="checkbox"/> Comparisons (if relevant) <input checked="" type="checkbox"/> Outcomes <input checked="" type="checkbox"/> Language (if relevant) <input checked="" type="checkbox"/> Context (if relevant)	8-9 Supplementary1
9. STRENGTHS & LIMITATIONS OF THE EVIDENCE <i>Describe the strengths and limitations of the evidence. Consider from the perspective of the individual studies and the body of evidence aggregated across all the studies. Tools exist that can facilitate the reporting of this concept.</i>	<input checked="" type="checkbox"/> Study design(s) included in body of evidence <input checked="" type="checkbox"/> Study methodology limitations (sampling, blinding, allocation concealment, analytical methods) <input checked="" type="checkbox"/> Appropriateness/relevance of primary and secondary outcomes considered <input checked="" type="checkbox"/> Consistency of results across studies <input checked="" type="checkbox"/> Direction of results across studies <input checked="" type="checkbox"/> Magnitude of benefit versus magnitude of harm <input checked="" type="checkbox"/> Applicability to practice context	10 20 29-31 Supplementary1
10. FORMULATION OF RECOMMENDATIONS <i>Describe the methods used to formulate the recommendations and how final decisions were reached. Specify any areas of disagreement and the methods used to resolve them.</i>	<input checked="" type="checkbox"/> Recommendation development process (e.g., steps used in modified Delphi technique, voting procedures that were considered) <input checked="" type="checkbox"/> Outcomes of the recommendation development process (e.g., extent to which consensus was reached using modified Delphi technique, outcome of voting procedures) <input checked="" type="checkbox"/> How the process influenced the recommendations (e.g., results of Delphi technique influence final recommendation, alignment with recommendations and the final vote)	6 14
11. CONSIDERATION OF BENEFITS AND HARMS <i>Report the health benefits, side effects, and risks that were considered when formulating the recommendations.</i>	<input checked="" type="checkbox"/> Supporting data and report of benefits <input checked="" type="checkbox"/> Supporting data and report of harms/side effects/risks <input checked="" type="checkbox"/> Reporting of the balance/trade-off between benefits and harms/side effects/risks <input checked="" type="checkbox"/> Recommendations reflect considerations of both benefits and harms/side effects/risks	12
12. LINK BETWEEN RECOMMENDATIONS AND EVIDENCE	<input checked="" type="checkbox"/> How the guideline development group linked and used the evidence to inform recommendations	16-18 Supplementary2

<i>Describe the explicit link between the recommendations and the evidence on which they are based.</i>	<input checked="" type="checkbox"/> Link between each recommendation and key evidence (text description and/or reference list) <input checked="" type="checkbox"/> Link between recommendations and evidence summaries and/or evidence tables in the results section of the guideline	Supplementary3
13. EXTERNAL REVIEW <i>Report the methodology used to conduct the external review.</i>	<input checked="" type="checkbox"/> Purpose and intent of the external review (e.g., to improve quality, gather feedback on draft recommendations, assess applicability and feasibility, disseminate evidence) <input checked="" type="checkbox"/> Methods taken to undertake the external review (e.g., rating scale, open-ended questions) <input checked="" type="checkbox"/> Description of the external reviewers (e.g., number, type of reviewers, affiliations) <input type="checkbox"/> Outcomes/information gathered from the external review (e.g., summary of key findings) <input checked="" type="checkbox"/> How the information gathered was used to inform the guideline development process and/or formation of the recommendations (e.g., guideline panel considered results of review in forming final recommendations)	6-14
14. UPDATING PROCEDURE <i>Describe the procedure for updating the guideline.</i>	<input checked="" type="checkbox"/> A statement that the guideline will be updated <input checked="" type="checkbox"/> Explicit time interval or explicit criteria to guide decisions about when an update will occur <input checked="" type="checkbox"/> Methodology for the updating procedure	15-16
DOMAIN 4: CLARITY OF PRESENTATION		
15. SPECIFIC AND UNAMBIGUOUS RECOMMENDATIONS <i>Describe which options are appropriate in which situations and in which population groups, as informed by the body of evidence.</i>	<input checked="" type="checkbox"/> A statement of the recommended action <input checked="" type="checkbox"/> Intent or purpose of the recommended action (e.g., to improve quality of life, to decrease side effects) <input checked="" type="checkbox"/> Relevant population (e.g., patients, public) <input type="checkbox"/> Caveats or qualifying statements, if relevant (e.g., patients or conditions for whom the recommendations would not apply) <input type="checkbox"/> If there is uncertainty about the best care option(s), the uncertainty should be stated in the guideline	19-29
16. MANAGEMENT OPTIONS <i>Describe the different options for managing the condition or health issue.</i>	<input checked="" type="checkbox"/> Description of management options <input checked="" type="checkbox"/> Population or clinical situation most appropriate to each option	Supplementary3
17. IDENTIFIABLE KEY RECOMMENDATIONS <i>Present the key recommendations so that they are easy to identify.</i>	<input checked="" type="checkbox"/> Recommendations in a summarized box, typed in bold, underlined, or presented as flow charts or algorithms <input checked="" type="checkbox"/> Specific recommendations grouped together in one section	Supplementary3
DOMAIN 5: APPLICABILITY		
18. FACILITATORS AND BARRIERS TO APPLICATION <i>Describe the facilitators and barriers to the guideline's application.</i>	<input checked="" type="checkbox"/> Types of facilitators and barriers that were considered <input checked="" type="checkbox"/> Methods by which information regarding the facilitators and barriers to implementing recommendations were sought (e.g., feedback from key stakeholders, pilot testing of guidelines before widespread implementation)	6-14-15 31-32

	<input checked="" type="checkbox"/> Information/description of the types of facilitators and barriers that emerged from the inquiry (e.g., practitioners have the skills to deliver the recommended care, sufficient equipment is not available to ensure all eligible members of the population receive mammography) <input checked="" type="checkbox"/> How the information influenced the guideline development process and/or formation of the recommendations	
19. IMPLEMENTATION ADVICE/TOOLS <i>Provide advice and/or tools on how the recommendations can be applied in practice.</i>	<input checked="" type="checkbox"/> Additional materials to support the implementation of the guideline in practice. For example: <ul style="list-style-type: none"> ○ Guideline summary documents ○ Links to check lists, algorithms ○ Links to how-to manuals ○ Solutions linked to barrier analysis (see Item 18) ○ Tools to capitalize on guideline facilitators (see Item 18) ○ Outcome of pilot test and lessons learned 	Supplementary3
20. RESOURCE IMPLICATIONS <i>Describe any potential resource implications of applying the recommendations.</i>	<input checked="" type="checkbox"/> Types of cost information that were considered (e.g., economic evaluations, drug acquisition costs) <input checked="" type="checkbox"/> Methods by which the cost information was sought (e.g., a health economist was part of the guideline development panel, use of health technology assessments for specific drugs, etc.) <input type="checkbox"/> Information/description of the cost information that emerged from the inquiry (e.g., specific drug acquisition costs per treatment course) <input checked="" type="checkbox"/> How the information gathered was used to inform the guideline development process and/or formation of the recommendations	6-7
21. MONITORING/ AUDITING CRITERIA <i>Provide monitoring and/or auditing criteria to measure the application of guideline recommendations.</i>	<input checked="" type="checkbox"/> Criteria to assess guideline implementation or adherence to recommendations <input checked="" type="checkbox"/> Criteria for assessing impact of implementing the recommendations <input checked="" type="checkbox"/> Advice on the frequency and interval of measurement <input type="checkbox"/> Operational definitions of how the criteria should be measured	6-7 14-15
DOMAIN 6: EDITORIAL INDEPENDENCE		
22. FUNDING BODY <i>Report the funding body's influence on the content of the guideline.</i>	<input checked="" type="checkbox"/> The name of the funding body or source of funding (or explicit statement of no funding) <input checked="" type="checkbox"/> A statement that the funding body did not influence the content of the guideline	33
23. COMPETING INTERESTS <i>Provide an explicit statement that all group members have declared whether they have any competing interests.</i>	<input checked="" type="checkbox"/> Types of competing interests considered <input type="checkbox"/> Methods by which potential competing interests were sought <input type="checkbox"/> A description of the competing interests <input checked="" type="checkbox"/> How the competing interests influenced the	33

	guideline process and development of recommendations	
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From:

Brouwers MC, Kerkvliet K, Spithoff K, on behalf of the AGREE Next Steps Consortium. The AGREE Reporting Checklist: a tool to improve reporting of clinical practice guidelines. *BMJ* 2016;352:i1152. doi: 10.1136/bmj.i1152.

For more information about the AGREE Reporting Checklist, please visit the AGREE Enterprise website at <http://www.agreetrust.org>.