



# ANNUAL REPORT

**September 2007 – September 2008**

## **Guidelines International Network**

is a Scottish Guarantee Company, established under Company Number SC243691  
and is also a Scottish Charity, recognised under Scottish Charity Number SC034047.

Registered Office: J. & H. Mitchell W.S., 51 Atholl Road, Pitlochry, Perthshire PH16 5BU, Scotland

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## G-I-N Members and Partners

September 2008

84 organisations  
representing 37 countries

### AFRICA

Sudan Evidence-based Association (SEA), SD

### AMERICA

Brazilian Medical Association (AMB), BR

Guidelines Advisory Committee (GAC), CA

Québec Government Agency responsible for Health Services and Technology Assessment (AETMIS), CA

National Center for Health Technology Excellence (CENETEC), MX

Agency for Healthcare Research and Quality (AHRQ), US

American College of Chest Physicians (CHEST), US

American College of Physicians (ACP), US

American Society of Clinical Oncology (ASCO), US

American Urological Association (AUA), US

Center for International Rehabilitation (CIR), US

Infectious Diseases Society of America (IDSA), US

National Kidney Foundation (NKF), US

### ASIA

Professional Development and Quality Assurance, Department of Health (PDQA-DoH) HK

Medical Information Network Distribution Service Center, Japan

Council for Quality Healthcare (Minds Center), JP

Central Asian Network of EbM Centers (CAREBMC Network), KZ

Korean Academy of Medical Sciences (KAMS), KR

HTA Unit, Ministry of Health, Malaysia (HTA-DoH), MY

Center for Health Policy Research and Development, National Health Research Institutes (NHRI), TW

### EUROPE

Health Austria, Federal Institute for Quality in Health Care (GOEG)

Vienna Medical Chamber (AEKW), AT

Belgian Centre for Evidence-Based Medicine (CEBAM), BE

Domus Medica; Flemish College of General Practitioners (DM), BE

Danish National Board of Health (SST), DK

Estonian Health Insurance Fund (EHIF), EE

Centre for Pharmacotherapy Development (ROHTO), FI

Current Care; Finnish Medical Society DUODECIM, FI

Duodecim Medical Publications (DUODECIM), FI

Finnish Office for HTA (FinOHTA), FI

French National Health Authority (HAS), FR

Agency for Quality in Dentistry (ZZQ), DE

Agency for Quality in Medicine (AEZQ/AQuMed), DE

Association of Scientific Medical Societies (AWMF), DE

Berlin Chamber of Physicians (AEKB), DE

German Cancer Society (DKG), DE

German National Institute for Quality Measurement in Health Care (BQS), DE

German Society of Thoracic and Cardiovascular Surgery (DGTHG), DE

Federal Joint Committee (GBA), DE

Institute for Quality and Efficiency in Healthcare (IQWiG), DE

The Mental Health Commission (MHC), IE

Italian Evidence-Based Medicine Group (GIMBE), IT



AGREE



Italian National Institute of Health (ISS), IT  
Regional Agency for Health in Tuscany, Quality Unit (ASR), IT  
Regional Health Agency Emilia Romagna (ASR), IT  
Department of Quality Management and Standards of Treatment, Ministry of Health (MS), MD

Dutch Association of Comprehensive Cancer Centres (ACCC), NL

Dutch College of General Practitioners (NHG), NL

Dutch Institute for Healthcare Improvement (CBO), NL

Royal Dutch Society for Physical Therapy (KNGF), NL

Trimbos-Inst. - NL Institute of Mental Health & Addiction, NL

Directorate for Health and Social Affairs (SHdir), NO

Norwegian Electronic Health Library (NEHL), NO

Agency of Health Technology Assessment in Poland (AHTaPol), PL

Center for EBM, Univ. of Lisbon School of Medicine (CEMBE), PT

Center for Health Policies and Services (CPSS), RO

National Center for Studies in Family Medicine (CNSMF), RO

National School of Public Health and Health Services Management (INCDS), RO

Romanian-Swiss Centre for Health Sector Development (CRED), RO

Slovene Guidelines Group (SSG), SI

Basque Office for HTA (OSTEBA), ES

Catalan Agency for Health Technology Assessment and Research (AATRM), ES

GuíaSalud-Health Sciences Institute of Aragón (IACS), ES

Spanish Network for Research on Guidelines (REDEGUIAS), ES

National Board of Health and Welfare, Socialstyrelsen (SOS), SE

Clinical Epidemiology Centre (CePIC), Univ. Hospital Lausanne, CH

Swiss Federal Office of Public Health (BAG), CH

Swiss Medical Association (FMH), CH

National Institute for Health and Clinical Excellence (NICE), UK

Royal College of Nursing (RCN), UK

Scottish Intercollegiate Guidelines Network (SIGN), UK

Sowerby Centre for Health Informatics at Newcastle (SCHIN), UK

### OCEANIA

Cari Guidelines (CARI), AU

Joanna Briggs Institute (JBI), AU

National Health & Medical Research Council (NHMRC), AU

National Heart Foundation of Australia (NHFA), AU

Therapeutic Guidelines Ltd, (TGL) AU

New Zealand Accident Compensation Corporation (ACC), NZ

New Zealand Guidelines Group (NZGG), NZ

### INTERNATIONAL

European Region of the World Confederation of Physical Therapy (WCPT)

European Union of Medical Specialists (UEMS)

World Health Organisation (WHO)

### G-I-N Partner

The ADAPTE Collaboration (ADAPTE)

AGREE Research Trust (ART)

World Medical Association (WMA)





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## Chairs' Foreword

Dear G-I-N members

We are proud to present the fifth annual report of the Guidelines International Network to the G-I-N Membership. This report provides the evidence for a stable and continuously growing organisation, due to an increasing number of members, products and initiatives.



After the successful annual conference in Toronto in August 2007, an increasing number of guideline organisations became convinced of the need to be part of an international network to share methodologies, exchange knowledge and experience, and to get inspired, aiming for the best quality.

We have introduced a lower organisational fee for smaller organisations and lowered the fee for individual members. Now, in September 2008, we have 81 organisational members from 37 countries from Africa, America, Asia, Europe and Oceania. The number of individual members more than doubled last year from 19 to 45. The increase of membership has resulted in higher than anticipated income and G-I-N is now in a more positive financial position. We now will be able to reinvest more money to further realize the mission and goals of G-I-N. High priority will be given to rebuilding our website and improving the access and search facilities.

Our international guideline library has also grown and now contains more than 5,000 documents from 20 language groups, being the world's largest web-based guideline database. We would like to thank the members, who are responsible for uploading of documents.

As part of our mission and strategy we created links with other international organisations, such as the Cochrane Collaboration, the GRADE working group and CoCanCPG (Coordination of Cancer Clinical Practice Guidelines in Europe). Moreover, we strengthened our relationship with the Ibero-American network on clinical practice guidelines, and will have a shared annual conference in Lisbon in 2009.

G-I-N encourages and facilitates international collaboration on guidelines, resulting in new Working Groups on Literature Searching (SEARCH), Patient and Public Involvement, and Disease Management, and a Community of Practice on Emergency Care. We also consolidated the Evidence Tables Working Group, Website Content Group and Nordic Language Group.

To communicate our products and achievement, we have released four issues of our colourful newsletter ENGINE, which is the proof of an active and inspiring network. Thanks to all of you that contributed to the newsletter.

The next international annual conference will be in Helsinki from 1-3 October, 2008. It will be a great opportunity, again, to meet colleagues, and to make friends. You are well represented, as we will expect more than 300 participants.

Thank you for making G-I-N a living network this year. We will continue in serving our members next year.



**Jako Burgers**  
**Chair**  
**On behalf of the Executive Committee**

## G-I-N Objectives and Aims

The Guidelines International Network is an international not-for-profit association of organisations and individuals involved in clinical practice guidelines. G-I-N seeks to improve the quality of health care by promoting systematic development of clinical practice guidelines and their application into practice, through supporting international collaboration.

The Network aims at:

- promoting the systematic development, dissemination, implementation and evaluation of clinical practice guidelines
- improving and harmonising guideline methodologies
- developing and maintaining an international Guideline Library, enabling the systematic search, comparison and dissemination of clinical practice guidelines from all G-I-N members
- promoting international collaboration in guideline activities and improving coordination with other health care quality initiatives
- support research relating to clinical practice guidelines and to facilitate the implementation of research findings into practice
- organise and promote trans-national project groups, training courses, events and conferences
- preparing and publishing articles on guidelines.

## Membership

### Organisational Members

As at September 2008 the Guidelines International Network had 81 **Organisational Members**:

- Till September 2008, 16 further organisations joined the Network (cf Table 1).
- 2 members left the organisation (Hospital Authority, Hong Kong and National Federation of Cancer Centres, France).

**Table 1: Organisations which joined G-I-N in 2008**

<b>Australia</b>	• CARI Guidelines (CARI)
<b>Austria</b>	• Health Austria / Federal Institute for Quality in Health Care (GOEG)
<b>Finland</b>	• Duodecim Medical Publications Ltd (DUODECIM)
<b>Germany</b>	• German Cancer Society e.V. (DKG)
	• German Society of Thoracic and Cardio-Vascular Surgery (DGTHG)
<b>Italy</b>	• Italian National Institute of Health (ISS)
	• Regional Agency for Health in Tuscany, Quality Unit (ARS)
<b>Kazakhstan</b>	• Central Asian Network of EbM Centers (CAREBMC Network)
<b>Korea</b>	• Korean Academy of Medical Science (KAMS)
<b>Moldova</b>	• Department of Quality Management and Standards of Treatment, Ministry of Health (MS)
<b>Norway</b>	• Norwegian Electronic Health Library (NEHL)
	• American College of Chest Physicians (CHEST)
	• American College of Physicians (ACP)
<b>United States</b>	• American Society of Clinical Oncology (ASCO)
	• American Urological Association (AUA)
	• Infectious Diseases Society of America (IDSA)

**Chart 1: Organisational Members**

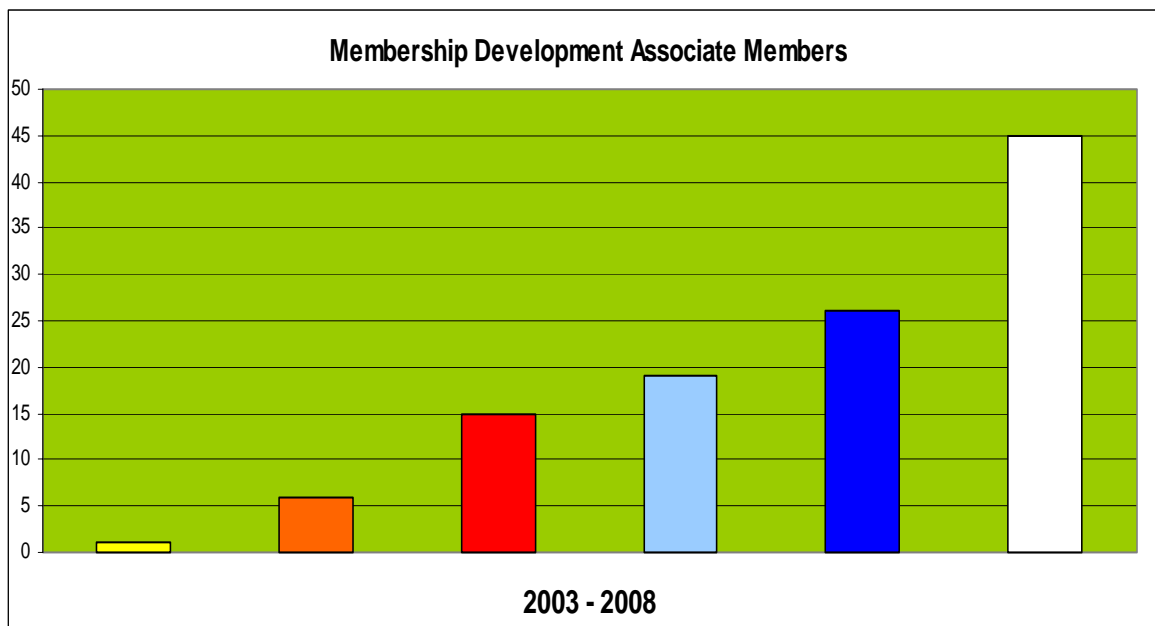
## Associate Members

As at September 2008 G-I-N had 46 associate members from 22 countries, 28 individuals joined the Network (cf Table 2).

**Table 2: Individuals who joined G-I-N in 2008**

- |                            |                                  |
|----------------------------|----------------------------------|
| • Samar Aboulsoud, QA      | • Panduleni Itula, UK            |
| • Sheila Agyeman, US       | • Mascha Kamphuis, NL            |
| • Lubna Al-Ansary, SA      | • Monika Klinkhammer-Schalke, DE |
| • Fawzi A. Amin, BH        | • Monika Legemann, DE            |
| • Pamela Angle, CA         | • Radim Liczenik, CZ             |
| • Antoine Boivin, CA       | • Patrice Lindsay, CA            |
| • Reinhard Bornemann, DE   | • Jude Nwokike, US               |
| • Vivian Coates, US        | • Martin Reed, CA                |
| • Robert Cook, UK          | • Kamil Saytkulov, RU            |
| • Dave Davis, US           | • Ann Scott, CA                  |
| • Caryn M. Davidson, US    | • Tran Thi My Hanh, VN           |
| • Anja-Alexandra Dünne, DE | • Adam Tucker, AU                |
| • Bart Ferket, NL          | • Trudy van der Weijden, NL      |
| • Margot Fleuren, NL       | • Jimmy Volmink, SA              |

Chart 2: Associate Members



## G-I-N Partners

In 2005, the Board decided to create a new membership category "G-I-N Partner" which is awarded to organisations with a special interest in G-I-N. G-I-N Partners are not members according to the Articles of Association. This partnership aims at a "win-win" situation for both partners, to promote G-I-N among members of the partner organisation and on the other hand this organisation can take profit of the G-I-N expertise.

As at September 2008, G-I-N had established an official partnership with three organisations:

- **The ADAPTE Collaboration (ADAPTE)**
- **AGREE Research Trust (ART)**
- **World Medical Association (WMA)**

## Organisation and Management

### Board of Trustees, Executive Committee

The affairs of G-I-N are directed and managed by a Board of Trustees comprising

- up to 12 individual persons elected by the Organisational Members; and
- up to 3 individual persons co-opted by the Board; and
- the Treasurer appointed by the Board; and
- the immediate past Chairman for one year after retiral.

The Executive Committee manages and implements the Board's strategies comprising the Chairperson, Vice-Chairperson, Treasurer, the Principal Officer of the Network and up to 3 Trustees appointed by the Board.

**Table 3: G-I-N Board of Trustees 2007-2008**

Heather Buchan National Institute of Clinical Studies/ National Health and Medical Research Council, AU	Vice-Chair, Member of the Executive Committee
Jako Burgers Dutch Institute for Healthcare Improvement, NL	Chair, Member of the Executive Committee
Dave Davis Association of American Medical Colleges, US	
Béatrice Fervers National Federation of Cancer Centres, FR	
Regina Kunz Basel Institute for Clinical Epidemiology, CH	
Catherine Marshall, NZ Independent Guideline Advisor	G-I-N Honorary Patron
Najoua Mlika-Cabanne French National Health Authority, FR	
Günter Ollenschläger Agency for Quality in Medicine, DE	G-I-N Honorary Patron
Jean Slutsky Agency for Healthcare Research and Quality, US	Vice-Chair, Member of the Executive Committee
Airton Stein Grupo Hospitalar Conceição , BR	
Sara Twaddle Scottish Intercollegiate Guidelines Network, UK	Treasurer, Member of the Executive Committee
Antonio Vaz Carneiro Center for EBM, University of Lisbon School of Medicine, PT	

The full Board had monthly teleconferences and two reunions in Toronto (CDN) during the 4<sup>th</sup> International G-I-N conference.

## Advisory Committee

In 2004 the Board established an Advisory Committee. In 2008 members of the Advisory Committee assisted the Board in arrangements for the G-I-N conference and gave advice on strategic matters.

**Table 4: G-I-N Advisory Committee**

<b>Lorne Becker, MD</b>	Co-Chair, Cochrane Collaboration Steering Group Emeritus Professor Department of Family and Community Medicine SUNY Upstate Medical University, Syracuse NY, USA
<b>Minna Kaila, MD, PhD, Pediatric Allergist</b>	Senior Medical Officer, FinOHTA / STAKES Adjunct Professor, University of Tampere, Finland
<b>Niek S. Klazinga, Prof, Dr</b>	Professor of Social Medicine, AMC – UvA, Dept. of Sociale Medicine Amsterdam , The Netherlands
<b>Richard Shiffman, MD, MICS</b>	Associate Director, Yale Center for Medical Informatics, USA
<b>David P. Stevens, MD</b>	Editor, Quality and Safety in Health Care Adjunct Professor and Director, Quality Literature Program, Dartmouth Institute for Health Policy and Clinical Practice

## Principal Officer

The Network's projects and administration have been co-ordinated by the G-I-N Principal Officer, Dr. Angela Maienborn since 2004. Main duties and responsibilities include overseeing the management of the network, preparing and managing financial issues supported by the Treasurer, preparing and operating Board meetings / teleconferences, operating elections, Annual General Meetings and the creation of the Annual Report.

Her work also includes supporting the enhancement of the website (guideline library) together with the Webmaster and the Website Content Group. She officially represents G-I-N at international meetings and negotiations.

## G-I-N Office

G-I-N has its office at the German Agency for Quality in Medicine, Berlin with the Administrative Secretary, Martina Westermann.

## Company Secretary, Financial Examiner

The Network has a Company Secretary in Scotland: Colin Liddell, J. & H. Mitchell W.S., 51 Atholl Road, Pitlochry, Perthshire, PH16 5BU, UK.

WALTON KILGOUR, Chartered Accountants, 13 Marshall Place, Perth PH2 8AH, UK have been working as G-I-N's Financial Examiner since 2004.

## Activities 2007 - 2008

Between September 2007 and August 2008, the G-I-N Board of Trustees worked on prioritising the Network's issues and projects according to the demands of its membership. In order to clarify the members' requirements, a membership survey was carried out.

**Table 5: Priority Issues and Projects for G-I-N 2008**

Issues	Projects
Sharing interests, exchange knowledge and experiences	<ul style="list-style-type: none"> <li>Maintenance and enhancement of the International Guideline Library (<a href="http://www.g-i-n.net">www.g-i-n.net</a>)</li> </ul>
Connecting people and increasing dialogue	<ul style="list-style-type: none"> <li>Establish communities of interest</li> <li>G-I-N conferences</li> </ul>
Supporting international collaboration	<ul style="list-style-type: none"> <li>Promotion of international networking between organisations, research institutions, clearing houses and other agencies producing and using evidence-based medical information (e.g. Cochrane Collaboration, CoCanCPG (Coordination of Cancer Clinical Practice Guidelines in Europe), Ibero-American network on clinical practice guidelines).</li> </ul>
Promoting and strengthening the Network	<ul style="list-style-type: none"> <li>Outreach to new or prospective members</li> <li>Outreach visits to G-I-N members</li> </ul>
Collaboration between members	<ul style="list-style-type: none"> <li>Sharing evidence review work</li> <li>Sharing implementation and audit tools</li> </ul>
Education on guideline methodology and use	<ul style="list-style-type: none"> <li>Promoting development and use of evidence based guidelines</li> <li>Advising on adaptation of existing guidelines</li> </ul>

## G-I-N Website

The G-I-N website [www.g-i-n.net](http://www.g-i-n.net) (cf. Table 6) continues to be the key tool supporting most of the Network's activities and communication.

In 2008, the Guidelines International Network [www.g-i-n.net](http://www.g-i-n.net) was audited again by the Health on the Net Foundation and it was reconfirmed that the G-I-N website proved to meet several criteria and agreed to follow the principles of HON. The HON code of conduct was developed by the Health on the Net Foundation, a leading organisation promoting and guiding the ethical deployment of useful and reliable online medical and health information, and its appropriate and efficient use.

The search function in general has been improved by adding new functionalities like the Boolean search function and the possibility to add the title in English for all guidelines.

To abate incertitude among users about topicality of the G-I-N database an extra project was performed to improve the mesh indexing and updating the guideline library. Work focussed on revision of all records regarding publication date, status (planned, under review, published, etc), revision of newly published

guidelines of selected member organisations and addition where applicable and continuous work on checking records concerning mesh indexing

Our plans to realise language mirrors started with a demo version in Spanish. Other languages (e.g. German) will follow.

**Table 6: Contents of [www.g-i-n.net](http://www.g-i-n.net) (for members only parts are *italicized*)**

<b>HOMPAGE</b>	
<b>YOUR PROFILE</b>	<i>Organisation Short Profile</i> <i>Organisation Full Profile</i> <i>Organisation Contacts</i> <i>Organisation Programmes</i>
<b>WELCOME – BIENVENIDO</b>	Bienvenido al G-I-N y a nuestra página web
<b>ABOUT G-I-N</b>	Elections to the Board of Trustees Working Groups Activities 2008 Organisation & Management Board of Trustees Advisory Committee Memorandum & Articles G-I-N History Link to our Website!
<b>MEMBERSHIP</b>	Become a G-I-N Member! List all Members Search for Member Organisations by Location and Activity G-I-N Partners
<b>INT. GUIDELINE LIBRARY</b>	<i>International Guideline Database</i> Guidelines In 2008 <i>Guideline Tools Inventory (parts available to non-members)</i> Development & Training Resources Health Topics Collection Patient & Consumer Resources <i>AGREE Instrument</i> <i>Library Updates (last 30 days)</i>
<b>NEWS &amp; EVENTS</b>	<i>Elections to the G-I-N Board of Trustees 2008/2009</i> G-I-N Annual General Meeting 2008 5th International G-I-N Conference 2008 Helsinki, Finland Next International G-I-N Conference 2009, Lisbon, Portugal More Meetings Conference Archive News from Members
<b>NEWSLETTER</b>	
<b>RELATED LINKS</b>	
<b>FAQS</b>	
<b>CONTACT US</b>	Contact Form Technical Contact Form Website Feedback Form
<b>DISCLAIMER</b>	
<b>PRIVACY POLICY</b>	

The cornerstone of the website is the G-I-N International Guideline Library - a searchable database which provides G-I-N Members with the ability to search and review the programmes for published and planned guidelines, systematic reviews, evidence reports, guideline clearing reports of all member organisations, as well as related documents (e.g., evidence tables, search strategies, patient information) – (cf. Table 7).

**Table 7: Categories for Information on Guidelines from G-I-N Members**

<ul style="list-style-type: none"> <li>• <b>Publication Title</b></li> <li>• <b>English Translation</b></li> <li>• <b>Countries applied to</b></li> <li>• <b>Website URL</b></li> <li>• <b>Type of Publication</b></li> <li>• <b>Disease / Condition addressed</b> (based on the National Library of Medicine's (NLM) Medical Subject Headings (Mesh) classification.)</li> <li>• <b>Publication Scope</b> (Screening, Prevention, Assessment / Diagnosis, Management, Rehabilitation)</li> <li>• <b>Publication Status</b> (published, in development, planned, under review)</li> <li>• <b>Publication Type</b> (Guideline, Systematic Review, Evidence Report, Guideline Clearing Report, Guideline Methodology, Implementation Tool)</li> <li>• <b>Publication Status Details</b></li> <li>• <b>Printed Version of Publication</b></li> <li>• <b>Languages published in</b></li> <li>• <b>Due for Review</b></li> <li>• <b>Primary Contact</b></li> <li>• <b>Associated Documents</b></li> <li>• <b>Associated Documents</b> (Terms of reference, Key questions, Group membership, Search strategy, Critical appraisal documents, Evidence tables, Algorithms, Consultative drafts, Consumer resources, Considered judgement forms, Implementation tools and/or strategies, Economic analysis, Methodology description, including selection criteria, Video clips, Power Point presentations, Electronic tools / quizzes, Summary Document(s), Other, e.g. indicators, remit, press releases)</li> </ul>
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Between September 2007 and August 2008 the **G-I-N International Guideline Library** has been continued to expand to the largest web-based guideline database worldwide - with a total of about 5,400 items of information (September 2008) from 20 language groups (cf. Table 8).

To show non-G-I-N members the potential of the guideline database the Health Topic Collection (HTC) provides an overview for selected topics where people can find guidelines and other publications from the Guideline Library (by September 2008):

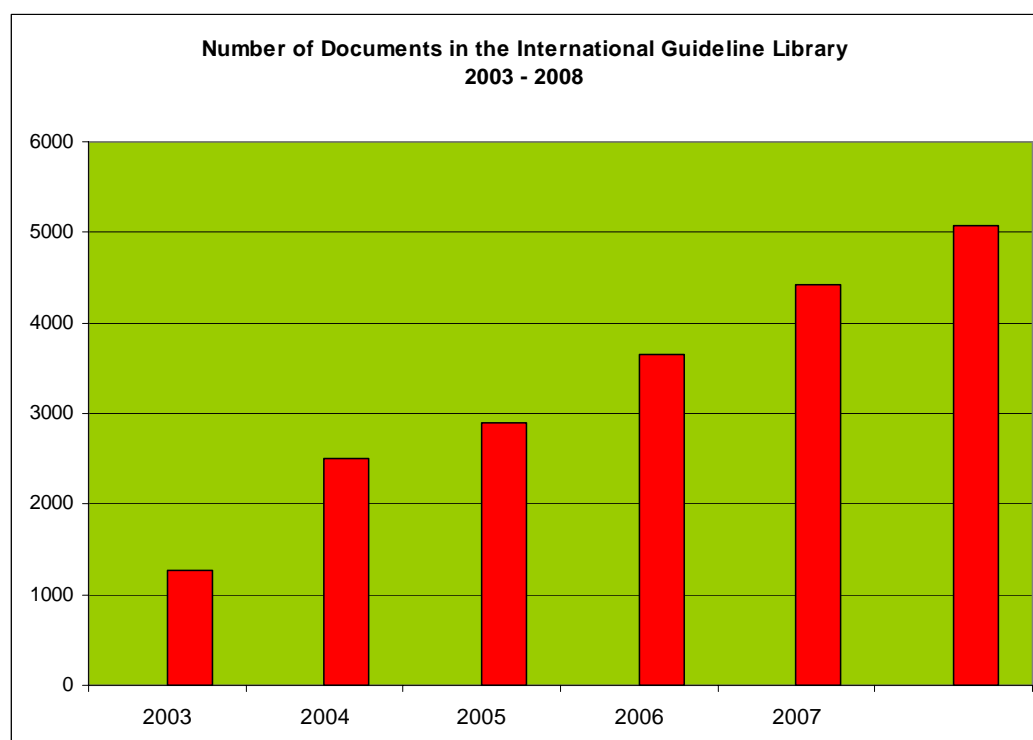
- Neurological Disorders / Nervous System Diseases (MeSH C10)
- Delirium, Dementia, Amnesic, Cognitive Disorders (MeSH F03.087)
- Psychotherapy (MeSH F04.754)
- Mental Health Services (MeSH F04.408)
- Pancreatic Neoplasms (MeSH C04.588.322.421)

Topics will be changed every 2-3 months. HTC shows all documents from the G-I-N International Guideline Library under the mentioned MESH terms.

**Table 8: Number of items of information in the G-I-N International Guideline Library (by September 2008)**

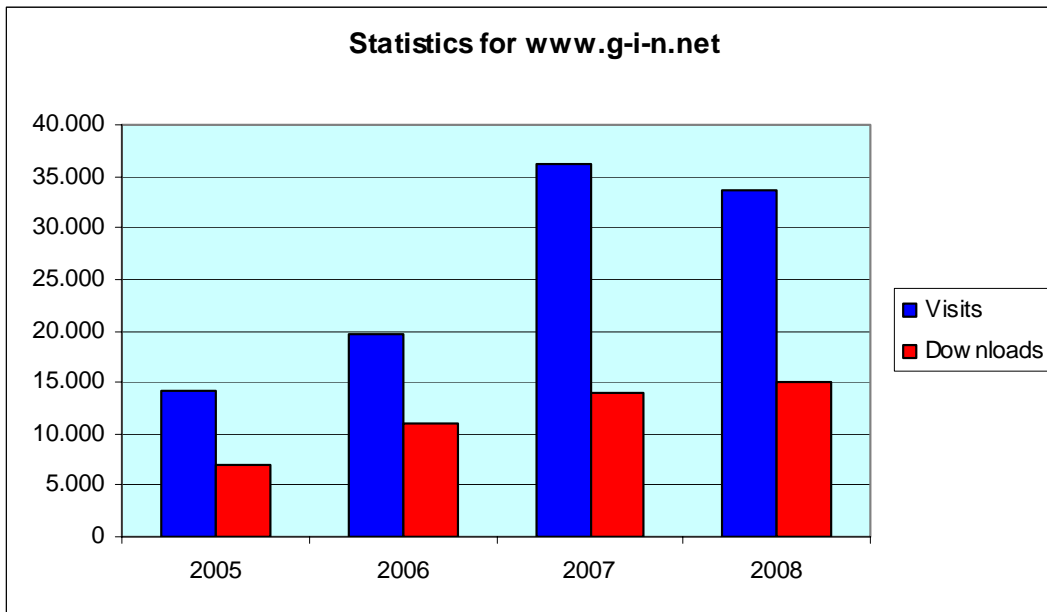
Language	Documents (n)	Language	Documents (n)
Danish	10	Dutch	387
English	3859	Estonian	7
Finnish	134	Flemish	41
French	336	German	379
Italian	21	Japanese	7
Korean	1	Moldavian	2
Norwegian	9	Polish	6
Portuguese	236	Romanian	8
Russian	14	Spanish	113
Swedish	16	Turkish	11

**Chart 3: Number of documents in the G-I-N International Guideline Library (by September 2008)**



From the start of the G-I-N Website in 2003 the number of visits and downloads continued to increase and remained stable on a high level in 2008.

**Chart 4: G-I-N Website Statistics: Visits and downloads 2005 - 2008**



Decisions on content and format are prepared by the Network's Website Content / Editorial Steering Group and are approved by the Board of Trustees. Since November 2006 Inga Koenig from the AQUmed is the responsible Webmaster for G-I-N.

ENIGMA Publishing Ltd, Auckland, New Zealand is the technical provider of the G-I-N database.

## G-I-N Working Groups

In 2008, the Network continued to support working groups to take forward different aspects of G-I-N's work. Information is also available on the G-I-N website.

### Disease Management

Aim of the Working Group "Guidelines and Disease Management" is to examine various aspects of the connections between guidelines and disease management.

Chronic diseases, such as diabetes, congestive heart failure, chronic obstructive pulmonary disease, depression and others, constitute a major burden for communities worldwide. Chronic Disease Prevention and Management is progressively making its place as a way to improving quality of care and reducing the existing care gap between collective knowledge and actual individual care. Modern disease management programmes relate heavily on coordinated health care interventions and communications among health care professionals and with individuals and populations with chronic conditions. Patient centeredness and self-care efforts are a significant component as well.

According to published statements that have been adopted by several disease management R&D groups: "Scientifically derived, peer-reviewed guidelines should be the basis of all disease management programs. These guidelines should be evidence based and consensus driven." Thus, clinical guidelines are considered a key component of disease management programmes. They form the support for scientifically sound, evidence-based, interventions. They constitute the basis upon which the healthcare professionals involved in a disease management programme will agree on their respective roles and frame the inter-professional related training. In addition, they allow deriving the outcomes and process measures to be recorded and fed back to intervention recipients. High quality evidence-based guidelines can constitute an important vector of stable synthesized knowledge transfer into practice and they will be used to achieve they purposes, corresponding to a tailored implementation. Such achievement of guidelines implementation will necessitate their appropriate adaptation to the context of care, for instance translated into clinical pathways. Such adaptation could be done at various levels (national, regional, local), but, eventually, guidelines could only be successfully implemented if they are adapted to the local context of care and accepted by the disease management team members.

Members of the Disease Management Group are:

- Bernard Burnand, CepiC (CH) Joint Speaker
- Günter Ollenschläger, AEZQ (DE) Joint Speaker
- Heather Buchan, NICS/NHMRC (AU)
- Jako Burgers, CBO (NL)
- Nikita de Vernejoul, HAS (FR)
- Fadila Farsi, FNCLCC (FR)
- João Guerra, University of Lisboa (PT)
- André Morin, HAS (FR)
- Paul Wallace, Kaiser Permanente (US)

## Evidence Tables Working Group

The aim of the Evidence Tables Working Group (ETWG) is to define a minimum data set that should be included in all evidence tables. This could allow the creation of a database of evaluated studies with data in a consistent format that G-I-N members could use to populate their own evidence tables.

Progress of the Evidence Tables Working Group in 2007/2008:

The group finalised the protocol of the evaluation study of the template for summarising studies addressing diagnostic questions. A subgroup to oversee the study was appointed. The evaluation study commenced in May 2008. Materials were sent to all the ETWG members and others who expressed their interest. The subgroup study met in late June to finalise the strategy for analysis. Analysis of the data was performed in August and the final results have been circulated to the subgroup.

The results of the study will be presented during a workshop at the Helsinki Conference in October 2008.

Members of the ETWG are:

- Sara Twaddle, SIGN (UK) Joint Speaker
- Najoua Mlika-Cabanne, HAS (FR) Joint Speaker
- Hans de Beer, CBO (NL)
- Bernard Burnand, CepiC (CH)
- Rob Cook, Bazian (UK)
- Robin Harbour, SIGN (UK)
- Thomas Kaiser, IQWiG (DE)
- Eeva Ketola, CC (FI)
- Jorma Komulainen, CC (FI)
- Regina Kunz, Basel Institute for Clinical Epidemiology (CH)
- Stefan Lange IQWiG (DE)
- Michel Laurence, HAS (FR)
- Inger Natvig Norderhaug, INAHTA
- Alric Ruether, IQWiG (DE)
- Rick Shiffman, Yale Center for Medical Informatics (US)
- Craig Whittington, National Collaborating Centre for Mental Health (UK)

## Nordic Language Group

Aim of this Working Group is to know each other and to exchange ideas and information. A meeting took place last October in Helsinki with about 50 participants, organised by Current Care.

In October 2008 an unofficial satellite meeting just before the G-I-N meeting in Helsinki is planned. Topics for the discussions will deal with EBM-education and how to approach cost-benefit –analysis in guidelines. New participants are very welcome.

Members of the Nordic Language group are:

- Marjukka Mäkelä, FinOTHA (FI) Speaker
- Frode Forland, Hdir (NO)
- Høeg-Jensen, Lisbeth, SST (DK)
- Eeva Ketola, CC (FI)
- Jorma Komulainen, CC (FI)

## Patient and Public Involvement

### Aims and objectives

The main objective of the G-I-N Working Group Patient and Public Involvement (GINPPI) is to support effective patient and public involvement in the development and implementation of clinical practice guidelines. GINPPI offers a forum for exchange between patient and public organisations, CPG developers, and researchers.

Specific aims are to:

1. Synthesize the evidence that supports the design of effective patient and public involvement programs;
2. Develop standards on methods of involving patients and the public in specific contexts of CPG development and implementation;
3. Elaborate a common research agenda at the international level, including the development of standard measures of evaluation.

### Organisation and membership

The creation of GINPPI was recommended by the Guideline International Network Board of Trustees at the 4th G-I-N conference in Toronto in August 2007. Researchers and representatives of G-I-N member organisations with expertise in patient and public involvement programs were contacted and held preliminary teleconferences in the following months. Four patient and public representatives have been approached recently to join GINPPI steering committee and were identified based on geographical representation, personal experience in guideline development, and links with a number of consumer organisations in different disease areas.

Three levels of participation in GINPPI activities are possible:

1. Mailing list and open activities: Anybody interested in the activities of GINPPI can register to its mailing list and participate in open workshop and activities held at the G-I-N conference and other venues.
2. GINPPI members: Members can access GINPPI online web forum, contribute to publications and activities of the working group, and participate in the annual face-to-face meeting of the working group held at the annual G-I-N conference. Any G-I-N member can join GINPPI. Patient and public representatives, researchers, or CPG developers who are not G-I-N members may join the working group upon recommendation of GINPPI steering committee.
3. Steering committee: Is responsible for all strategic decisions of the working group, including approval of recommendations and publications written on behalf of GINPPI. The steering committee will include a maximum of 12 members, including at least four patient and/or public representatives, and one representative of G-I-N board of trustees. Steering committee members, as well as a GINPPI chair and vice-chair, will be nominated on a yearly basis at the G-I-N conference, and will have to be approved by G-I-N Board of Trustees.

### Potential products/deliverables

- Knowledge synthesis and bibliographic database of documents describing and evaluating patient and public involvement programs in CPG;
- Toolkit and best practice points written for CPG developers, patient/public organisations, and researchers on the design and evaluation of effective patient and public involvement programs in CPG;
- Online web forum for discussion and exchange on key issues in patient and public involvement in CPG (ex. evaluation, recruitment, training, support).
- Workshops and presentations on experiences and models of patient and public involvement;
- Publications in peer-review and professional journals

The Steering committee had 6 teleconferences since the kick off meeting in Utrecht, Netherlands, in October 2007, and will present two workshops on experiences and models of patient and public involvement at the Helsinki conference. In May 2008, some members of the steering committee also submitted a grant application to the Canadian Institutes of Health Research for a literature review on patient and public involvement in guidelines.

#### Steering committee members

- Antoine Boivin, Scientific Institute for Quality of Healthcare (CA)
- Jako Burgers, CBO (NL)
- Kay Currie, NICS / NHMRC (AU)
- Béatrice Fervers ; FNCLCC (FR)
- Javier Gracia, Unidad de Evaluación de Tecnologías Sanitarias (ES)
- Marian James, AHRQ (US)
- Albert Jovell, European Patient Forum (ES)
- Catherine Marshall, Independent Guideline Advisor (NZ)
- Carol Sakala, ChildbirthConnection (US)
- Sylvia Säger, AEZQ (DE)
- Judy Strid, Stronger Consumer Voices Group (NZ)
- Victoria Thomas, NICE (UK)
- Trudy van der Weijden, Centre for Quality of Care Research, Dept General practice, Maastricht Univ.(NL)

#### SEARCH Group

The aim of the SEARCH group is to assess the methods used for the selection of evidence for guideline development by evidence-based guideline development organisations. To this end, the group developed a semistructured questionnaire assessing the databases, search filters and evaluation methods used for literature retrieval which was distributed to eight major organisations involved in evidence-based guideline development.

The results of the survey were published in Health Info Libr J 2008; 25: 23-30 (Standardization of search methods for guideline development: an international survey of evidence-based guideline development groups).

The results obtained showed that all of the organisations used search filters as part of guideline development. All organisations indicated a strong interest in identifying, improving and standardizing search filters to improve guideline development. Future work will include further research into the specification and use of search filters, improvements in literature searching outcomes and greater collaboration among guideline development organisations.

The group has agreed definitions and controlled terms to be used to classify references for our central project, a database to be used for testing the sensitivity of search filters used in guideline development. Testing will begin in June 2008 and continue over several months.

The group held teleconferences in November 2007, April, July and September 2008 to move forward the work on the search filter testing. The group's first newsletter was circulated in September 2008. The group will present their work as a poster at the G-I-N conference in October in Helsinki.

Members of the SEARCH working group (participating organisations):

- Michele Hilton Boon, SIGN (UK) Speaker
- Lina Bakhshi, RCP (UK)
- Nathalie Billard, INC (FR)
- Janette Boynton, NICE (UK)
- Dominique Broclain, La Revue Prescrire (FR)
- Bernard Burnand, IUMSP (CH)
- Mireille Cecchin, HAS (FR)
- Elise Collins, NCCC (UK)
- Béatrice Fervers, FNCLCC (FR)
- Jacob Franek, McMaster University (CA)
- Su Golder, University of York (UK)
- Malene Jensen, SST, National Board of Health (DK)
- Debbie Pledge, National Collaborating Centre for Women's and Children's Health (UK)
- Alison Richards, National Collaborating Centre for Chronic Conditions (UK)
- Gill Ritchie, RCGP (UK)
- Kitty Rosenbrand, CBO (NL)
- Joan Vlayen, University of Leuven and Bruxelles (BE)
- Susanne Weinbrenner, AQuMed /AEZQ (DE)

The complete members list can be found on the G-I-n website under working groups.

### Website Content / Editorial Steering Group

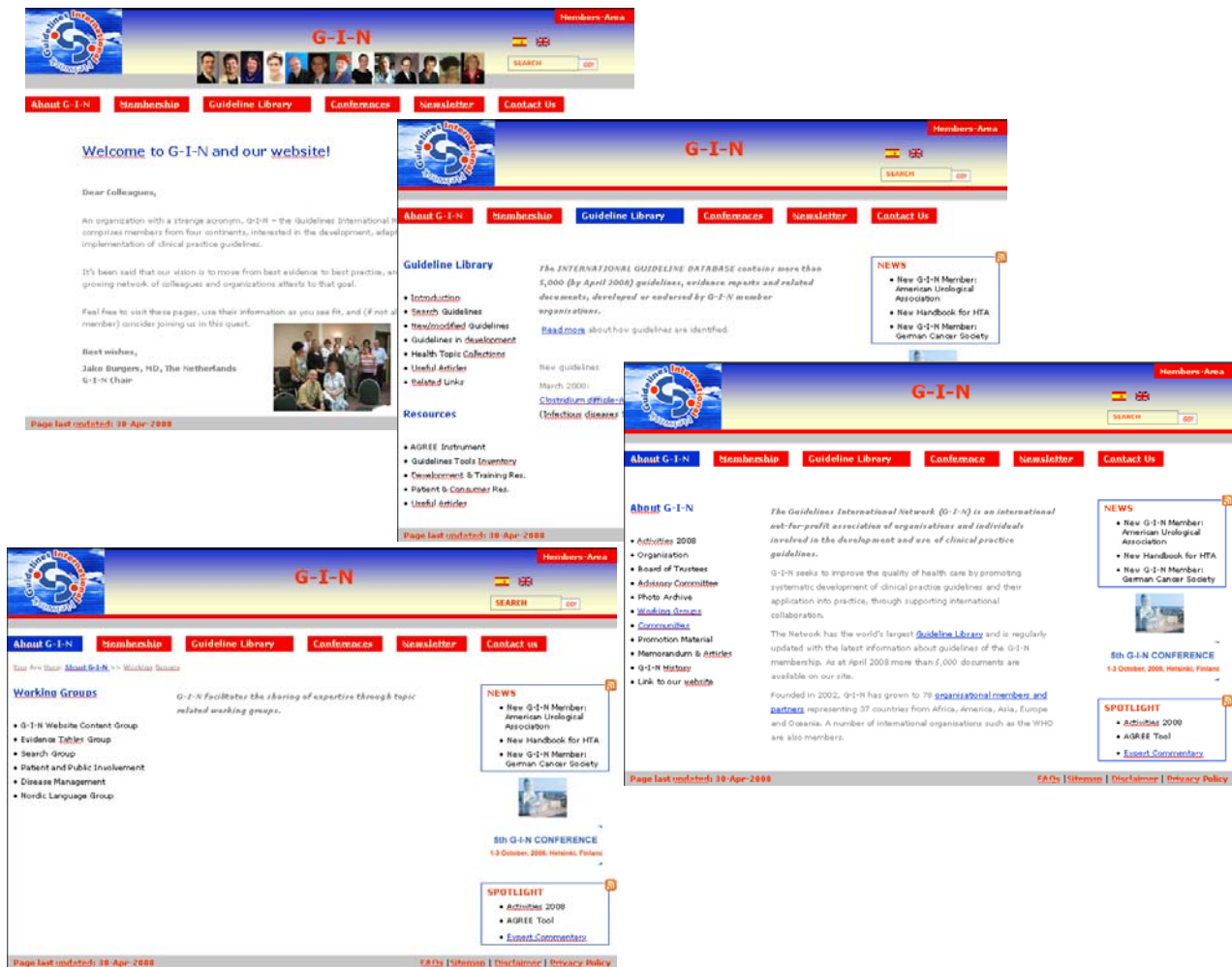
The Website Content Group is responsible for the regular review of the website design and maintenance.

The group had two meetings by teleconference in 2008. Major issue was how to implement ideas and enhancements raised by members in the survey and suggestions from an independent review. Work was focussed on reviewing the website concerning its technical functionalities, searching abilities and user friendliness.

Based on the discussion and main points raised in the member survey a design for a new G-I-N website was developed focussing on:

- Improve search categories and functionality
- Create more flexibility for the structure
- More dynamic front page, topics easy to be identified
- Mirror site in other languages
- Possibility to integrate blogs and discussion forums in the future

The group is now preparing the call for tender for performing the planned changes.

Chart 5: Proposed new design for [www.g-i-n.net](http://www.g-i-n.net)

Many ideas from members and plans of the group for improving the search function in general could be realised in the last year (see chapter G-I-N website)

Members of the Website Content / Editorial Steering Group are:

- Kitty Rosenbrand, CBO (NL) - Speaker
- Leonie Brunt, NZGG (NZ)
- Minna Kaila, FinOHTA (FI)
- Runar Eggen, (NO)
- Håkon Lund, SHdir (NO)
- Marjukka Mäkelä, FinOHTA (FI)
- Angela Maienborn, G-I-N Principal Officer
- Ignacio Marin, REDEGUIAS (ES)
- Catherine Marshall, NZGG (NZ)
- Günter Ollenschläger, AEZQ (DE)
- Airton Stein, Grupo Hospitalar Conceição (BR)
- Inga König, AQuMed / AEZQ (DE) Webmaster

## **G-I-N Communities of Interest**

### **Background**

In 2007 Guidelines International Network (G-I-N) in conjunction with the National Health and Medical Research Council (NHMRC) of Australia established a virtual community to support the collaboration of practitioners internationally to share their expertise and work together on aspects of evidence based guidelines from guideline development to implementation. The principles of this initiative are based on a Community of Practice (CoP) approach which has also been adopted by many organisations including the WHO to support knowledge translation and to close 'the knowing doing gap'.

'Communities of practice' is an approach that supports groups of individuals people who are passionate about a common subject and who may bring expertise and experience from a range of disciplines knowledge sharing becomes seamless across the group.

The core objectives of the G-I-N Emergency Care Community include:

- Providing a 'space' to share knowledge and expertise related to selected aspects of guidelines to improve the quality of emergency care
- Identifying common issues related to evidence based guidelines that would enhance their application to emergency care practice internationally
- Undertaking small time limited activities that could inform developers on the practical aspects of guidelines in terms of usability or to pilot test strategies to implement guideline recommendations

### **Future plans**

Establishment of collaborative partnerships with the International Federation of Emergency Medicine (IFEM) and World Health Organisation (WHO) with a goal to improve the impact of evidence based guidelines to improve care across the emergency care sector in both developed and developing nations.

### **Participants of the G-I-N Emergency Care Community**

- Membership of 30 people from Canada, Australia, New Zealand, Singapore, UK, US, Brazil, Germany and Qatar (Arabic Emirates States). The membership is diverse including emergency clinicians both medical and nursing, emergency care researchers and policy makers.
- An established web based portal using a wiki site as the central repository to support sharing of tools and resources - <https://emergencycare.wikispaces.com/>
- Current activities currently in progress include:
  - Review of guidelines recommendations for the management of Community Acquired Pneumonia
  - Collaboration and sharing of expertise to support the implementation for the use of CT scanning in cases of minor head injury
  - Review of formats of guidelines to support the implementability in emergency care sector

## Emergency Care Wiki site

Password protect site established to support the G-I-N Emergency Care Community



The Diabetes Community of Practice had an initial small response but unfortunately this interest could not be maintained. This was partly due to a lack of staff resources and maybe lack of central driving focus. There needs to be a clear rationale for a community of practice with champions committed to achieving the desired outcomes.

The Board would like to express its deep gratitude to all those who have contributed with their ideas and input to a successful work especially the Speakers of the Working Groups and the Coordinators of the Communities of Practice for their dedication and valuable support.

## Congresses, Workshops, Meetings

Conferences and workshops are the most important points of contact for members and opportunities to promote the Network. The first three annual congresses (Edinburgh 2003, Wellington 2004, and Lyon 2005) have been well attended.

- **4<sup>th</sup> G-I-N Conference Toronto (CA), 22<sup>nd</sup> – 25<sup>th</sup> August 2007**

The 4th Guidelines International Conference has been organised in an excellent way by the University of Toronto and the Guidelines Advisory Committee, Ontario. The theme was: "Collaboration in Clinical Practice Guidelines" - local, national and international cooperation in synthesizing and applying best evidence. In a changing society with increasing demands for transparency and efficiency, collaboration between relevant stakeholders and organisations is necessary for avoiding duplication of efforts and successful implementation.

The conference was attended by more than 400 registrants from more than 30 countries and continued in the successful line of previous conferences in Edinburgh (2003), Wellington (2004) and Lyon (2005). With many thanks to the University of Toronto and the Guidelines Advisory Committee for hosting the conference, the Office of Continuing Education & Professional Development for pulling together the program and the exciting social events, and the generous support from our sponsoring Canadian and US agencies.

The conference included five plenary sessions with chairs and keynote speakers from different continents, presenting recent experiences and examples with guideline development and implementation in the broader context of the healthcare system in their country.

For the parallel sessions 251 abstracts were accepted in the format of brief presentations (114), lectures (15), workshops (18), thematic discussion sessions (8), networking sessions (5) and posters (90). The brief presentations and lectures were grouped into 26 themes, covering guideline methodology, implementation, evaluation, adaptation, updating, patient involvement, and case studies. In total, 57 different sessions were scheduled.

The success of the conference apart from very positive feedback of the participants was reflected in an increase of membership directly connected with the first G-I-N event in North America.

During the reporting period, the Network was represented at several events (cf. Table 9).

**Table 9: G-I-N Activities 2007/2008 (G-I-N Congresses, presentations on behalf of the Network at national / international conferences/workshops/meetings)**

	Country	Activity
Oct. 2007	Colombia	Presentation at the Conference of the Ibero-American Network meeting Future perspectives in guidelines Airtion Stein
Nov. 2007	Taiwan	Presentation at the Asian Pacific EBM Network Conference From Evidence-based Guidelines to Quality Improvement Jako Burgers
Dec 2007	Spain	Presentation at the Jornadas scientificas (National programm quality improvement) National Guidelines programmes Angela Maienborn
Dec 2007	Netherlands	CoCanCPG meeting in Leyden. Representing G-I-N as member of the CoCanCPG Advisory Board Jako Burgers
Feb 2008	Australia, New Zealand	Presentation at national NICS/NHMRC Staff Meeting Research and Innovation in Guidelines Jako Burgers, Heather Buchan, Catherine Marshall
May 2008	Italy	Annual meeting of the OEIC (Organisation of European Cancer Institutes) Guideline working group: Presentation of G-I-N Béatrice Fervers
June 2008	Spain	CocanCPG meeting in Seville. Representing G-I-N as member of the Advisory board Angela Maienborn
June 2008	Costa Rica	Presentation at the Annual meeting of the Ibero-American Cochrane Network / Annual meeting of the Ibero-American Clinical Guidelines Network Collaboration in guidelines / Angela Maienborn How to develop guidelines / Airtion Tetelbom Stein
June 2008	Germany	AQuMed and SIGN arranged a one day guideline seminar Berlin Günter Ollenschläger, Sara Twaddle
Sep. 2008	Brazil	XVIII International Epidemiology Association - World Congress of Epidemiology Collaboration in guidelines Airtion Tetelbom Stein
Sep. 2008	United States	Presentation at Evidence Based Guidelines Conference: From Evidence to EMS (Emergency Medical System) Practice in Washington DC The G-I-N Perspective Jako Burgers
Sep. 2008	Germany	AQuMed and NHMRC arranged a one day guideline seminar Berlin Heather Buchan, Catherine Marshall, Günter Ollenschläger,

## Strategic Direction

### From Development to Implementation – What an International Community Can Do

Six years since its founding in 2002, G-I-N has brought together guideline developers and implementers in a collaborative and enriching environment. G-I-N now has 81 members from 37 countries. The fourth annual G-I-N Conference “Collaboration in Clinical Practice Guidelines” held in Toronto had 58 parallel sessions, provided knowledge transfer, training possibilities and intensive exchange of experience for the over 415 delegates from 32 countries who attended the conference. The remarkable enthusiasm and excitement in Toronto about best practices in guideline development and innovation in implementing guidelines into practice has continued to fuel G-I-N's activities over the past year.

It has become increasingly clear that guidelines can be potent tools for driving improvements in patient health outcomes – if they are used. There is new interest in recognizing that guidelines need to take into consideration the “whole” patient to make care decisions more relevant to patients who generally have more than one co-existing chronic condition. Understanding how to develop guidelines that address these issues will help drive more robust quality measures and easier implementation. We've also come to recognize that implementation of guidelines into health care systems and work flow is dependent on the clarity of the guideline recommendations and the trustworthiness of the development process.

These important issues are universal and, therefore, highly appropriate for G-I-N to provide leadership and collaboration among its international members on ways to address these topics. Over the next year, G-I-N will continue its work and collaboration on managing conflicts of interest, new methodological approaches, addressing co-morbid and complex patients and harmonization where it makes sense. G-I-N will remain in close relationships with other international organisations as they undertake work in these areas. Our international community is large but the collective work and collaboration will be very rewarding.

In order to facilitate true collaboration, G-I-N will continue to enhance its Web Site to make it not only a rich source of information but a place for convening and participation. G-I-N has and will continue to host Communities of Learning on important development and implementation issues, including the inclusion of patient and consumer perspectives, emergency care, evidence table harmonization, and managing conflict of interest. New learning networks are almost certain to be part of the next year and beyond. Your interests and needs will fuel these efforts. Our Web Site and Newsletter *EnGINE* will continue to be the translation arm of the activities of G-I-N and its members.

As we experience yet another highly successful fifth G-I-N Annual Meeting in Helsinki in 2008, we can look forward to the sixth G-I-N Annual Meeting in Lisbon in 2009. The 2009 G-I-N Annual Meeting will herald a new level of international collaboration for G-I-N because it will be held in conjunction with the Spanish-Iberian Guidelines Network.

Finally, G-I-N is and always will be about helping its members create the best opportunities for improved patient outcomes. We remain open for any suggestions from our members on how G-I-N can best realize its mission, i.e. improving the quality of health care by clinical practice guidelines and their application into practice. G-I-N greatly appreciates your support and involvement and looks forward to many years of continued collaboration.

Heather Buchan & Jean Slutsky, Vice-Chairs of G-I-N

## Finances

### 1. Financial Report 2007

(The following is an extract of the Financial Statements by the independent financial examiner Walton Kilgour, the complete report is available on the G-I-N website).

The charity has no recognised gains or losses other than the results for the year as set out above. All of the activities of the charity are classed as continuing.

#### Statement of Financial Activities - Period from 1 April 2007 to 31 March 2008

<b>INCOMING RESOURCES</b>		<b>Euro</b>
Incoming Resources from generating funds:		
Voluntary Income		177,020
Investment Income		1,098
Incoming resources from charitable activities		18,565
<b>TOTAL INCOMING RESOURCES</b>		<b>196,683</b>
<b>RESOURCES EXPENDED</b>		
Costs of generating funds:		
Costs of generating voluntary income		(15,350)
Charitable activities		(105,578)
Governance costs		(34,472)
<b>TOTAL RESOURCES EXPENDED</b>		<b>155,400</b>
<b>NET OUTGOING RESOURCES FOR THE YEAR</b>		<b>(41,283)</b>
Total funds brought forward		2,040
<b>Total funds carried forward</b>		<b>43,323</b>

## 2. Budget Financial Year 2007

version number:07.2



updated:30.01.2007  
 prepared by:PAO, Treasurer  
 date of approval:12 March 2007  
 approved by:Board

Budget 1.04.2007 till 31.03.2008 (financial year 2007)		
		EUR
<b>I. costs</b>		
1. Fees		
1a) Principal Administration Officer		59.000
1b) Admin. Secretariat		30.000
1c) Webmaster		13.500
1d) Office Secret. Scotl. / Fin. Controlling		5.500
2. Website develop., maintenance		14.000
3. G-I-N Annual Congress		0
4. G-I-N Working groups		1.000
5. Administration		4.500
6. Annual report		2.000
7. Travel expenses		17.000
8. Promotion/Representation		2.000
9. Conferences		2.500
10. Provision for investments 2008		8.000
11. Bank Costs		500
12. Other Costs		150
<b>total costs</b>		<b>159.650</b>
<b>II. income</b>		
1. Organisational Member Fee		145.000
2. Associate Member Fee		3.500
3. Interest		150
4. Opening balance (from 2006)		6.000
5. Sponsorship		0
6. G-I-N Annual Congress		5.000
7. Other income		0
<b>total income</b>		<b>159.650</b>
<b>balance income/costs</b>		<b>0</b>

The Board are grateful to Iain Grimmond for advice on financial issues relating to Scottish charities.

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## Board of Trustees 2007-2008

Jako Burgers (NL)	Dutch Institute for Healthcare Improvement <u>Chair, Member of the Executive Committee</u>
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Antonio Vaz Carneiro (PT)	Center for EBM, University of Lisbon School of Medicine, PT

All members of the Board of Trustees signed a declaration of interest.

## Abbreviations

AATRM	Catalan Agency for Health Technology Assessment and Research, ES
ACC	New Zealand Accident Compensation Corporation, NZ
ACCC	Dutch Association of Comprehensive Cancer Centres, NL
ACP	American College of Physicians, US
ADAPTE	The ADAPTE Collaboration
AEKB	Berlin Chamber of Physicians, DE
AEKW	Vienna Medical Chamber, AT
AETMIS	Québec Government Agency responsible for Health Services and Technology Assessment
AHRQ	Agency for Healthcare Research and Quality, US
AHTAPol	Agency of Health Technology Assessment in Poland
AMB	Brazilian Medical Association, BR
ARS	Regional Agency for Health in Tuscany, Quality Unit, Italy
ART	AGREE Research Trust
AQuMed / AEZQ	Agency for Quality in Medicine, DE
ASCO	American Society of Clinical Oncology, US
ASR	Regional Health Agency Emilia Romagna, IT
AUA	American Urological Association, US
AWMF	Association of Scientific Medical Societies, DE
BAG	Swiss Federal Office of Public Health, CH
BQS	German National Institute for Quality Measurement in Healthcare, DE
CAREMBC	Central Asian Network of EbM Centers, KG, KZ, TJ, TM, UZ,
CARI	Cari Guidelines, Australia
CBO	Dutch Institute for Healthcare Improvement, NL
CEBAM	Belgian Centre for Evidence-Based Medicine, BE
CEMBE	Center for EbM, Univ. of Lisbon School of Medicine, PT
CENETEC	National Center for Health Technology Excellence
CePIC	Clinical Epidemiology Centre, University of Lausanne, CH
CHEST	American College of Chest Physicians, US
CIR	Center for International Rehabilitation, US
CNSMF	National Center for Studies in Family Medicine, RO
CPSS	Center for Health Policies and Services, RO
CRED	CRED Foundation - Romanian-Swiss Centre for Health Sector Development
DGTHG	German Society of Thoracic and Cardio-Vascular Surgery, DE
DKG	German Cancer Society, DE
DM	Domus Medica vzw; Flemish College of General Practitioners (formerly WVVH), BE
DUODECIM	Duodecim Medical Publications Ltd, FI
DUODECIM	Finnish Medical Society, FI
EHIF	Estonian Health Insurance Fund, EE
FINOHTA	Finnish Office for Health Care Technology Assessment, FI
FMH	Swiss Medical Association
GAC	Guidelines Advisory Committee, CA
GBA	Federal Joint Committee, DE

GIMBE	Italian Evidence-Based Medicine Group, IT
HAS	French National Health Authority (formerly ANAES), FR
HTA-DoH	HTA Unit, Ministry of Health Malaysia, MY
IACS	GuíaSalud-Health Sciences Institute of Aragón
IDSA	Infectious Diseases Society of America, US
INCDS	National School of Public Health and Health Services Management, RO
IQWiG	Institute for Quality and Efficiency in Healthcare, DE
ISS	Italian National Institute of Health, IT
JBH	Joanna Briggs Institute, AU
KAMS	Korean Academy of Medical Sciences, KR
KNGF	Royal Dutch Society for Physical Therapy, NL
MHC	The Mental Health Commission, IE
Minds Center	Medical Information Network Distribution Service Center, Japan Council for Quality Health Care, JP
MS	Department of Quality Management and Standards of Treatment, Ministry of Health, MD
NEHL	Norwegian Electronic Health Library, NO
NHFA	National Heart Foundation of Australia, AU
NHG	Dutch College of General Practitioners, NL
NHMRC	National Health and Medical Research Council, AU
NHRI	Center for Health Policy Research and Development, National Health Research Institutes
NICE	National Institute for Health and Clinical Excellence, UK
NKF	National Kidney Foundation, US
NZGG	New Zealand Guidelines Group, NZ
OSTEBA	Basque Office for Health Technology Assessment, ES
PDQA-DoH	Professional Development and Quality Assurance, Department of Health, HK
RCN	Royal College of Nursing, UK
REDEGUIAS	Spanish Network for Research on Guidelines, ES
ROHTO	Centre for Pharmacotherapy Development, FI
SCHIN	Sowerby Centre for Health Informatics at Newcastle, UK
SEA	Sudan Evidence-Based Association, SD
SGG	Slovene Guidelines Group, SI
SHDIR	Directorate for Health and Social Affairs, NO
SIGN	Scottish Intercollegiate Guidelines Network, UK
SOS	National Board of Health and Welfare Socialstyrelsen, SE
SST	National Board of Health, DK
TGL	Therapeutic Guidelines Ltd., AU
TRIMBOS	Trimbos-Institute - Netherlands Institute of Mental Health & Addiction, NL
UEMS	European Union of Medical Specialists
WCPT	European Region of the World Confederation of Physical Therapy
WHO	World Health Organisation
WMA	World Medical Association
ZZQ	Agency for Quality in Dentistry, DE