**New RCOG Guidance Proposal**

Please submit the completed proposal form to Clinical Effectiveness (clinicaleffectiveness@rcog.org.uk) for consideration. Please provide a comprehensive overview to assist the relevant committee in making a decision.

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| 1. Proposed title of guidance |
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| 2. Proposer’s contact details |
| Name: |  |
| Address: |  |
| Email: |  |
| Mobile Telephone: |  |
| 3. Type of guidance *(please tick the appropriate box)*See [RCOG website](https://www.rcog.org.uk/guidance/browse-all-guidance/) for full descriptions of the types of guidance |
| [ ]  **GREEN-TOP GUIDELINE** [ ]  **SCIENTIFIC IMPACT PAPER** [ ]  **GOOD PRACTICE PAPER**[ ]  **CONSENT ADVICE** [ ]  **PATIENT INFORMATION*****Please provide a brief summary to help describe why this type of guidance is the best fit for this topic:*****FOR PROPOSED GREEN-TOP GUIDELINES ONLY:** Would this guidance benefit from having an accompanying Consent Advice document? [ ]  Yes [ ]  No |
| 4. Background |
| Please provide a brief background to the clinical topic, including:1. **(Clinical) Need for the guidance**
2. **Population/groups that will be covered**
3. **Population/groups that will not be covered**
4. **Target readership**
5. **(Clinical) Issues that will be covered (e.g. investigation, referral, management).**
6. **(Clinical) Issues that will not be covered (e.g. investigation, referral, management)**
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| Are there high rates of mortality, or morbidity, or disability associated with this condition? | [ ]  Yes [ ]  No | Detail: |
| Is it a frequent cause of litigation? | [ ]  Yes [ ]  No | Detail:  |
| Are there any ethical considerations relating to this guidance? | [ ]  Yes [ ]  No | Detail:  |
| Is there evidence of wide variation in clinical practice? | [ ]  Yes [ ]  No | Detail:  |
| Is there evidence of wide variation in service delivery and/or staff/resource implications? | [ ]  Yes [ ]  No | Detail: |
|  | If yes, would this guidance benefit from having an accompanying **RCOG Good Practice Paper**? ☐ Yes ☐ No |
| Is there recent evidence that supports changing practice? | [ ]  Yes [ ]  No | Detail:  |
| Are there implications at the primary care/secondary care/specialist and/or tertiary care interface? | [ ]  Yes [ ]  No | Detail: |
| Detail any aspects that are areas of concern for women and people, family members, carers, and/or the organisations that represent them. |  |
|  | If yes, would this guidance benefit from having accompanying **RCOG Patient Information**? ☐ Yes ☐ No |
| 5. Existing evidence and guidance |
| Indication of the size and strength of the evidence base that is available to support recommendations on effective practice *(including existing systematic reviews in this area).* |  |
| Are there any existing guidelines relevant to this condition? (Give source and date of publication). Please comment on their quality and whether they are still valid. |  |
| If there are other existing guidelines, how will this guidance differ? |  |
| 6. Submitted research/articles |
| Please indicate if you have similar articles already submitted to other publications, e.g. *TOG*, *BJOG*. Please state title and journal.  |  |
| 7. Developers Please indicate the healthcare professionals and patient groups potentially involved in developing the guidance. Please state their specialist area (e.g. Pharmacist, Sonographer, etc.), and provide their names and contact details (if possible). |
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| 7a. Have you approached an organisationto jointly develop this guidance? If so, Please name the organisation/s and indicate if named individuals have already been approached. Please provide details. |
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| 8. Endorsed guidance Do you consider that this guidance would benefit from endorsement/support by another organisation/s? Please name the organisation/s and indicate if named individuals have already been approached. Please provide details. |
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| 9. Patient organisations, charities and support groupsAre there organisations that provide relevant advice and support to staff, service users, women and people, partners, families and carers in response to this guidance. |
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| 10. Declarations of interest |
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| 11. Any other information |
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