

ICSI has long had a policy of transparency in declaring potential conflicting and competing interests of all individuals who participate in the development, revision and approval of ICSI guidelines and protocols.

In 2010, the ICSI Conflict of Interest Review Committee was established by the Board of Directors to review all disclosures and make recommendations to the board when steps should be taken to mitigate potential conflicts of interest, including recommendations regarding removal of work group members. This committee has adopted the Institute of Medicine Conflict of Interest standards as outlined in the report, *Clinical Practice Guidelines We Can Trust* (2011).

Where there are work group members with identified potential conflicts, these are disclosed and discussed at the initial work group meeting. These members are expected to recuse themselves from related discussions or authorship of related recommendations, as directed by the Conflict of Interest committee or requested by the work group.

The complete ICSI policy regarding Conflicts of Interest is available at <http://bit.ly/ICSICOI>.

Funding Source

The Institute for Clinical Systems Improvement provided the funding for this guideline revision. ICSI is a not-for-profit quality improvement organization based in Bloomington, Minnesota. ICSI's work is funded by the annual dues of the member medical groups and three sponsoring health plans in Minnesota. Individuals on the work group are not paid by ICSI but are supported by their medical group for this work.

The only exception to this, patient and public members of a work group, are provided with a small stipend to cover meeting attendance.

ICSI facilitates and coordinates the guideline development and revision process. ICSI, member medical groups and sponsoring health plans review and provide feedback but do not have editorial control over the work group. All recommendations are based on the work group's independent evaluation of the evidence.

Disclosure of Potential Conflicts of Interest

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Guideline-Related Activities: None
Research Grants: None
Financial/Non-Financial Conflicts of Interest: None

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Guideline-Related Activities: ICSI Lipid Management Guideline
Research Grants: None
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Guideline-Related Activities: ICSI Diagnosis and Treatment of Hypertension, ICSI Lipid Management Guideline, ICSI Prevention and Diagnosis of Obesity Guideline, ICSI Childhood Obesity Guideline, American Diabetes Association Guidelines
Research Grants: NIH grants related to cardiovascular disease and diabetes as well as decisions for pediatric acute abdominal pain
Patent: Software on disease simulation algorithms

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Research Grants: None

Financial/Non-Financial Conflicts of Interest: None

Document Drafted
May – Oct 2007

Critical Review
Nov – Dec 2007

First Edition
Apr 2008

Second Edition
Jun 2009

Third Edition
Jun 2010

Fourth Edition
Jun 2011

Fifth Edition
Jun 2013

Sixth Edition
Begins Jan 2016

◀ The next revision will be no later than January 2021.

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Document History

In 2009, the Minnesota Department of Health selected the ICSI guideline on Healthy Lifestyles as an intervention for organizations to implement as part of the Statewide Health Improvement Program (SHIP).

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ICSI Document Development and Revision Process

Overview

Since 1993, the Institute for Clinical Systems Improvement (ICSI) has developed more than 60 evidence-based health care documents that support best practices for the prevention, diagnosis, treatment or management of a given symptom, disease or condition for patients.

Audience and Intended Use

The information contained in this ICSI Health Care Guideline is intended primarily for health professionals and other expert audiences.

This ICSI Health Care Guideline should not be construed as medical advice or medical opinion related to any specific facts or circumstances. Patients and families are urged to consult a health care professional regarding their own situation and any specific medical questions they may have. In addition, they should seek assistance from a health care professional in interpreting this ICSI Health Care Guideline and applying it in their individual case.

This ICSI Health Care Guideline is designed to assist clinicians by providing an analytical framework for the evaluation and treatment of patients, and is not intended either to replace a clinician's judgment or to establish a protocol for all patients with a particular condition.

Document Development and Revision Process

The development process is based on a number of long-proven approaches and is continually being revised based on changing community standards. The ICSI staff, in consultation with the work group and a medical librarian, conduct a literature search to identify systematic reviews, randomized clinical trials, meta-analysis, other guidelines, regulatory statements and other pertinent literature. This literature is evaluated based on the GRADE methodology by work group members. When needed, an outside methodologist is consulted.

The work group uses this information to develop or revise clinical flows and algorithms, write recommendations, and identify gaps in the literature. The work group gives consideration to the importance of many issues as they develop the guideline. These considerations include the systems of care in our community and how resources vary, the balance between benefits and harms of interventions, patient and community values, the autonomy of clinicians and patients and more. All decisions made by the work group are done using a consensus process.

ICSI's medical group members and sponsors review each guideline as part of the revision process. They provide comment on the scientific content, recommendations and implementation strategies. This feedback is used by and responded to by the work group as part of their revision work. Final review and approval of the guideline is done by ICSI's Committee on Evidence-Based Practice. This committee is made up of practicing clinicians and nurses, drawn from ICSI member medical groups.

Implementation Recommendations and Measures

These are provided to assist medical groups and others to implement the recommendations in the guidelines. Where possible, implementation strategies are included that have been formally evaluated and tested. Measures are included that may be used for quality improvement as well as for outcome reporting. When available, regulatory or publicly reported measures are included.

Document Revision Cycle

Scientific documents are revised as indicated by changes in clinical practice and literature. ICSI staff monitors major peer-reviewed journals for any pertinent evidence that would effect a particular guideline and recommendation.

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