**Draft Guideline for Health and Developmental Follow-up for Children Born Very Preterm**

**Feedback Form**

We would like to hear any feedback you have on the recommendations presented in the draft guideline as well as any comments you may have on the associated technical and administrative report.

**Please read the checklist for submitting comments below as we** **are unable to accept forms that are partially or incorrectly completed.**

Feedback on the draft Guideline for Growth, Health and Developmental Follow-up for Children Born Very Preterm must be received by **11:59pm on the 13th of October 2023** to be considered. To submit this feedback document please go to <https://redcap.link/pretermguideline> and follow the instructions.

**Checklist For Submitting Comments**

* Use this comment form and submit it as a **Word document (do not save as a PDF)**.
* Combine all comments from your organisation into 1 response. **We cannot accept more than 1 response from each organisation**.
* Do not paste other tables into this table – type directly into the table.
* Ensure each comment stands alone; do not cross-refer within one comment to another comment.
* **Clearly mark any confidential information or other material that you do not wish to be made public.**
* **Do not name or identify any person or include medical information about yourself or another person** from which you or the person could be identified as all such data will be deleted or redacted.
* Spell out any abbreviations you use
* For copyright reasons, **do not include attachments** such as research articles, letters or leaflets. We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments, but it must be received by the deadline.
* **We do not accept comments submitted after the deadline stated for close of consultation.**

**Types of Feedback Accepted**

Three (3) types of feedback will be considered: **general feedback, feedback on recommendations and feedback on additional evidence**. Please provide feedback in the relevant feedback tables in the document below. Any comments greater than the maximum word count per cell will not be considered.

**Note:** We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by MCRI, its officers or advisory Committees.

**Data Protection**

The information you submit on this form will be retained and used by MCRI and its advisers for the purpose of developing its guidance and may be passed to other approved third parties. Please do not name or identify any individual patient or refer to their medical condition in your comments as all such data will be deleted or redacted. ***By submitting your data via this form, you are confirming that you have read and understood this statement.***

1. **General Feedback**

*Please use the area below to provide any feedback that does not relate directly to the draft recommendations. This may include feedback about feasibility or implementation.* ***(Maximum 250 words)***

1. **Feedback On Recommendations**

*Use the table below to provide specific feedback on draft recommendations. All feedback must consider the rigorous and transparent guideline development processes, which includes integration of evidence, multidisciplinary expertise, and consumer perspectives****.*** *Feedback involving any alterations of recommendations should refer to guideline methods, relevant sections in the draft guideline and the technical report.*

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| **Document (Guideline or Technical Document)** | **Section Of Document** | **Page Number** | **Recommendation Number** | **Comment**  **(Maximum 150 Words)** |
| *e.g., Guideline document* | *e.g., Chapter 1* | *e.g., 38* | *e.g., 1.1* | *e.g., The commonly co-occurring condition, cerebral palsy, is not considered here but evidence suggests it is important and should be a high risk group.* |
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1. **Feedback On Additional Evidence**

*If you believe additional evidence should be considered that was not included in the guideline development process, please provide comments below including a reference to the evidence and justification. Any new evidence needs to consider that evidence was included only if it met rigorous pre-specified selection criteria as outlined in the technical document. Whilst additional evidence cannot be included in the systematic reviews, additional evidence can be included in the narrative review sections where it: 1) will influence a recommendation or practice point, and 2) meets the rigorous pre-specified selection criteria described in the associated technical report.*

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| **Section Of Document** | **Recommendation Number** | **Evidence Details**  **(example)** | **Comment**  ***(Maximum 150 Words)*** |
| *e.g., Chapter 1* | *e.g., 1.1* | *e.g., Smith et al. (2000). "Fictional Paper" Scientific Journal XX(X): X.* | *e.g., This article is relevant to recommendation 1.1 and could be considered in the narrative review.* |
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