Interim process and methods for developing rapid guidelines on COVID-19

Process and methods
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## Contents

1 Scoping............................................................................................................................................................................ 3  
2 Finding evidence .......................................................................................................................................................... 4  
3 Drafting the guideline ................................................................................................................................................ 6  
4 NICE quality assurance and sign off ............................................................................................................................ 7  
5 Review and adoption .................................................................................................................................................. 8  
6 Updating the guideline ............................................................................................................................................... 9  
7 Appendix: search strategy for Medline (Ovid Platform) ............................................................................................... 10  
Update information ...................................................................................................................................................... 12
1 Scoping

This information sets out the process and methods used to develop rapid guidelines on COVID-19.

1.1 Agree the scope with National Leads and NHS England.

- There will be no public consultation on the scope. The aim is to produce common guidance where possible to reduce duplication and promote consistency.
- Identify key questions that apply to all settings as well as those specific to each topic.
2 Finding evidence

2.1 There will be no systematic literature search. Reuse existing guidance far as possible.

2.2 Little information is likely to be available specifically on COVID-19. Use information on related infections, in particular severe acute respiratory syndrome (SARS), Middle East respiratory syndrome (MERS) and pandemic influenza.

2.3 Adopt a targeted approach and search all of following:

- WHO COVID-19 guidance
- Public Health England guidance and advice
- NICE guidance
- NICE-accredited guidance via NICE Evidence Search
- MHRA or National Patient Safety Alerts, or other official advice (for example on infection control and prevention)
- guidance from professional bodies and royal colleges, prioritised as follows:
  - guidance from organisations within the UK
  - guidance from organisations in other countries as required.

2.4 If no answer is found from the sources listed, search:

- the WHO database of publications on coronavirus disease (COVID-19)
• Medline and Cochrane Database of Systematic of Reviews to identify published literature. Search strategies were adapted from a strategy previously developed by Public Health England (see Appendix A for details of the search used by NICE). Use a simple hierarchy:
  – prioritise systematic reviews and meta-analyses
  – if no systematic reviews or meta-analyses are available, use randomised controlled trials
  – if no randomised controlled trial data are available, include observational studies
  – if no observational data are available, use published expert opinion.

• If no published evidence is identified, reviewers will provide expert input through NHS England’s Clinical Reference Groups.

2.5 There will be no formal risk of bias assessment of the evidence and GRADE will not be used to assess the quality of the outcomes.
3 Drafting the guideline

3.1 NICE will identify any existing guidance that is impacted by new recommendations on COVID-19. Links between new and existing guidance will be included.

3.2 A brief statement may be included to explain the type of evidence on which the recommendation is based.

3.3 There will be no public consultation on the draft guideline. Targeted peer review will be used to ask reviewers specific questions about the draft guideline.
4 NICE quality assurance and sign off

4.1 A pragmatic accuracy check will be done. NICE staff with responsibility for quality assurance will approve the guideline before final sign off by NICE's Guidance Executive.
5  Review and adoption

5.1  The guideline will be reviewed by NHS England before publication.
6 Updating the guideline

6.1 The guideline will be updated as the situation changes. The process and methods for surveillance and rapid updating are described in interim process and methods for guidelines developed in response to health and social care emergencies.
## Appendix: search strategy for Medline (Ovid Platform)

**Search strategy for Ovid MEDLINE ALL**

<table>
<thead>
<tr>
<th>1</th>
<th>exp coronavirus/</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>((corona* or corono*) adj1 (virus* or viral* or virinae*)).ti,ab,kw.</td>
</tr>
<tr>
<td>3</td>
<td>(coronavirus* or coronovirus* or coronavirinae* or Coronavirus* or Coronovirus* or Wuhan* or Hubei* or Huanan or &quot;2019-nCoV&quot; or 2019nCoV or nCoV2019 or &quot;nCoV-2019&quot; or &quot;COVID-19&quot; or COVID19 or &quot;CORVID-19&quot; or CORVID19 or &quot;WN-CoV&quot; or WNCoV or &quot;HCoV-19&quot; or HCoV19 or CoV or &quot;2019 novel*&quot; or Ncov or &quot;n-cov&quot; or &quot;SARS-CoV-2&quot; or &quot;SARS-CoV-2&quot; or &quot;SARS-CoV2&quot; or SARS19 or &quot;SARS-CoV19&quot; or &quot;SARS-Cov19&quot; or &quot;SARS-Cov-19&quot; or Ncovor or Ncorona* or Ncorono* or NcovWuhan* or NcovHubei* or NcovChina* or NcovChinese*).ti,ab,kw.</td>
</tr>
<tr>
<td>4</td>
<td>(((respiratory* adj2 (symptom* or disease* or illness* or condition*)) or &quot;seafood market*&quot; or &quot;food market&quot;) adj10 (Wuhan* or Hubei* or China* or Chinese* or Huanan*)).ti,ab,kw.</td>
</tr>
<tr>
<td>5</td>
<td>(outbreak* or wildlife* or pandemic* or epidemic*) adj1 (China* or Chinese* or Huanan*).ti,ab,kw.</td>
</tr>
<tr>
<td>6</td>
<td>&quot;severe acute respiratory syndrome*&quot;.ti,ab,kw.</td>
</tr>
<tr>
<td>7</td>
<td>or/1-6</td>
</tr>
<tr>
<td>8</td>
<td>limit 7 to yr=&quot;2019 -Current&quot;</td>
</tr>
</tbody>
</table>

**Key to search operators**

<table>
<thead>
<tr>
<th>Operator</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>/</td>
<td>Medical Subject Heading (MeSH) term</td>
</tr>
<tr>
<td>exp</td>
<td>Explodes the MeSH terms to retrieve narrower terms in the hierarchy</td>
</tr>
<tr>
<td>adjn</td>
<td>Adjacency operator to retrieve records containing the terms within a specified number (n) of words of each other</td>
</tr>
<tr>
<td>.ab</td>
<td>Searches the abstract field</td>
</tr>
<tr>
<td></td>
<td>Searches the keyword headings assigned by authors field</td>
</tr>
<tr>
<td>---</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td>.ti</td>
<td>Searches the title field</td>
</tr>
<tr>
<td>*</td>
<td>Truncation symbol (searches all word endings after the stem)</td>
</tr>
</tbody>
</table>
Update information

Minor changes since publication

July 2020: We added a cross-reference in section 6.1 to the process and methods for surveillance and rapid updating.