

| Section/Topic | | Item | n/N (%) | | |
|---|---|------|--|---------------|--------------|
| Basic information | | | R | U | NA |
| Title/subtitle | 1a. Identify the report as a guideline, that is, with “guideline(s)” or “recommendation(s)” in the title | | 21/22 (95%) | 1/22 (5%) | - |
| | 1b. Describe the year of publication of the guideline. | | 22/22 (100%) | - | - |
| | 1c. Describe the focus of the guideline, such as screening, diagnosis, treatment, management, prevention, or others. | | 15/22 (68%) | 7/22 (32%) | - |
| Executive summary | 2. Provide a summary of the recommendations contained in the guideline. | | 20/22 (91%) | 2/22 (9%) | - |
| Abbreviations and acronyms | 3. Define new or key terms, and provide a list of abbreviations and acronyms if applicable | | 15/22 (68%) (3 reported terms, 5 reported acronym, and 7 both) | 7/22 (32%) | - |
| Corresponding developer | 4. Identify at least 1 corresponding developer or author who can be contacted about the guideline. | | 22/22 (100%) | - | - |
| Background | | | | | |
| Brief description of the health problem(s) | 5. Describe the basic epidemiology of the problem, such as the prevalence/incidence, morbidity, mortality, and burden resulting from the problem. | | 22/22 (100%) | - | - |
| Aim(s) of the guideline and specific objectives | 6. Describe the aim(s) of the guideline and specific objectives, such as improvements in health indicators (e.g., mortality and disease prevalence), quality of life, or cost savings. | | 22/22 (100%) | - | - |
| Target population(s) | 7a. Describe the primary population(s) that is affected by the recommendation(s) in the guideline. | | 22/22 (100%) | - | - |
| | 7b. Describe any subgroups that are given special consideration in the guideline. | | 20/22 (91%) | - | 2/22 (9%) |
| End users and settings | 8a. Describe the intended primary users of the guideline (such as primary care providers, clinical specialists, public health practitioners, program managers, and policymakers) and other potential users of the guideline | | 21/22 (95%) | - | - |
| | 8b. Describe the setting(s) for which the guideline is intended, such as primary care, low- and middle-income countries, or inpatient facilities. | | 21/22 (95%) | - | - |
| Guideline development groups | 9a. Describe how all contributors to the guideline development were selected and their roles and responsibilities (e.g., steering group, guideline panel, external reviewers, systematic review team, and methodologists). | | 22/22 (100%) (8 method and role, 14 only role) | - | - |
| | 9b. List all individuals involved in developing the guideline, including their title, role(s), and institutional affiliation(s) | | 22/22 (100%) | - | - |
| Systematic reviews | 10a. State the key questions that were the basis for the recommendations in PICO (population, intervention, comparator, and outcome) or other format as appropriate. | | 16/22 (73%) | 6/22 (27%) | - |

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| | 10b. Indicate how the outcomes were selected and sorted. | 14/22 (64%) (5 selected, 6 sorted, 3 both) | 8/22 (36%) | - |
| Evidence | | | | |
| Health care questions | 11a. Indicate whether the guideline is based on new systematic reviews done specifically for this guideline or whether existing systematic reviews were used. | 19/22 (86%) (11 existed, 5 new, 3 both) | 3/22 (14%) | - |
| Systematic reviews | 11b. If the guideline developers used existing systematic reviews, reference these and describe how those reviews were identified and assessed and whether they were updated. | 10/22 (45%) | 7/22 (32%) | 5/22 (23%) |
| Assessment of the certainty of the body of evidence | 12. Describe the approach used to assess the certainty of the body of evidence. | 21/22 (95%) | 1/22 (5%) | - |
| Recommendations | | | | |
| Recommendations | 13a. Provide clear, precise, and actionable recommendations. | 22/22 (100%) | - | - |
| | 13b. Present separate recommendations for important subgroups if the evidence suggests that there are important differences in factors influencing recommendations, particularly the balance of benefits and harms across subgroups. | 19/22 (86%) | 2/22 (9%) | 1/22 (5%) |
| | 13c. Indicate the strength of recommendations and the certainty of the supporting evidence | 20/22 (91%) | 2/22 (9%) | - |
| Rationale/explanation for recommendations | 14a. Describe whether values and preferences of the target population(s) were considered in the formulation of each recommendation. If yes, describe the approaches and methods used to elicit or identify these values and preferences. If values and preferences were not considered, provide an explanation. | 21/22 (95%) (8 provided no method) | 1/22 (5%) | - |
| | 14b. Describe whether cost and resource implications were considered in the formulation of recommendations. If yes, describe the specific approaches and methods used (such as cost-effectiveness analysis) and summarize the results. If resource issues were not considered, provide an explanation. | 19/22 (86%) (5 provided no method) | 3/22 (14%) | - |
| | 14c. Describe other factors taken into consideration when formulating the recommendations, such as equity, feasibility, and acceptability | 21/22 (95%) | 1/22 (5%) | - |
| Evidence to decision processes | 15. Describe the processes and approaches used by the guideline development group to make decisions, particularly the formulation of recommendations (such as how consensus was defined and achieved and whether voting was used). | 21/22 (95%) | 1/22 (5%) | - |
| Review and quality assurance | | | | |
| External review | 16. Indicate whether the draft guideline underwent independent review and, if so, how this was executed and the comments considered and addressed | 22/22 (100%) | - | - |

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| Quality assurance* | 17. Indicate whether the guideline was subjected to a quality assurance process. If yes, describe the process. | - | - | 22/22 (100%) |
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Funding and declaration and management of interests

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| 18a. Describe the specific sources of funding for all stages of guideline development. | 19/22 (86%) | 3/22 (14%) | - |
| 18b. Describe the role of funder(s) in the different stages of guideline development and in the dissemination and implementation of the recommendations. | 8/22 (36%) | 11/22 (50%) | 3/22 (14%) |
| 19a. Describe what types of conflicts (financial and nonfinancial) were relevant to guideline development. | 19/22 (86%) | 3/22 (14%) | - |
| 19b. Describe how conflicts of interest were evaluated and managed and how users of the guideline can access the declarations. | 21/22(95%) | 1/22(5%) | - |

Other information

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|----------------------------------|--|-------------|-----------------|---|
| Access | 20. Describe where the guideline, its appendices, and other related documents can be accessed | 20/22 (91%) | 2/22 (9%) | - |
| Suggestions for further research | 21. Describe the gaps in the evidence and/or provide suggestions for future research. | 20/22 (91%) | 2/22 (9%) | - |
| Limitations of the guideline | 22. Describe any limitations in the guideline development process (such as the development groups were not multidisciplinary or patients' values and preferences were not sought), and indicate how these limitations might have affected the validity of the recommendations. | - | 22/22 (100%) | - |

*All the WHO guidelines will be approved by Guidelines Review Committee of WHO.

R: Reported; U: Unreported; NA: Not Applicable

-: no such guideline