

## **2019 Update on Methods:** How to Read the New Recommendation Statement

The U.S. Preventive Services Task Force (USPSTF) is committed to developing and disseminating evidence-based recommendations on clinical preventive services. To better support implementation by primary care clinicians, the USPSTF updated the presentation and format of its recommendation statements. More detailed information about the methods and processes used by the USPSTF is described in a *JAMA Viewpoint*.<sup>(1)</sup>

## The USPSTF used the following goals, consistent with national standards,(2) to guide the revisions:

- Be clear and helpful for clinicians in practice
- Convey trustworthiness through transparency in describing its methods and decision making in recommendation statements
- Describe the evidence on which the recommendations were made and any research gaps found in the evidence

## The USPSTF hopes the changes will help clinicians find the information they need and act upon it. The overarching changes include:

- Emphasizing the summary of recommendations with color coding to correspond with the letter grade
- Emphasizing the USPSTF rationale for its recommendations, including the benefits and harms of the preventive service
- Streamlining the content to avoid repetition, make it easier to locate relevant information, and use clear language

The table below summarizes these changes.

## Table. Contents of the Revised USPSTF Recommendation Statement\*

Section	Description
Summary of Recommendation	The recommendation, including the letter grade; the "bottom line" of the USPSTF's statement.
Clinician Summary	Table that summarizes the recommendation and what clinicians may need to do to carry out the recommendation in practice.
Importance	Why this health issue matters; a brief description of the condition, the prevalence, and major consequences.
Assessment of Magnitude of Net Benefit	USPSTF's reasoning or rationale for its recommendation, including an overall assessment of the evidence.
Practice Considerations	Information clinicians need to know to carry out the recommendation in practice, including population, assessment of risk, screening tests or interventions, and additional tools and resources.
Update of Previous USPSTF Recommendations	Overall changes from the prior recommendation (if applicable).
Supporting Evidence	Summary of the evidence the USPSTF used to inform its recommendation, and the USPSTF's interpretation of the evidence that justifies the recommendations made.
Research Needs and Gaps	Key research that is still needed on this topic.
Recommendations of Others	Summary of recommendations from related organizations and agencies.
Supplemental Materials and End Matter	Tables of what the USPSTF grades mean and levels of certainty of the evidence
	USPSTF statement of principles, orients readers to the intention and proposed usage of USPSTF recommendations in clinical practice.
	References, provide a small sample of the important literature on this topic and citations from the evidence review.
	Other related information, including conflict of interest disclosures.

<sup>\*</sup> Reproduced from Epling et al<sup>(1)</sup> with permission from *JAMA*.

<sup>1.</sup> Epling JW, Borsky AE, Gerteis J. Improvements to the US Preventive Services Task Force Recommendation Statement. JAMA. 2019;322(12):1143–1144. doi:https://doi.org/10.1001/jama.2019.11311

<sup>2.</sup> Institute of Medicine Committee on Standards for Developing Trustworthy Clinical Practice Guidelines. Clinical Practice Guidelines We Can Trust. Washington, DC: National Academies Press; 2011.