

National -Level Quality Programs Research Policy

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Authority: American Heart Association National Quality Research Staff

Overview

The American Heart Association (AHA) Get With The Guidelines® (GWTG) is a hospital -based quality improvement program designed to close treatment gaps. Our Quality Programs include

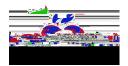


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I. General Information

A. Definitions

- Designated Analytic Center : A center commissioned by the AHA and/or its volunteer leadership which may perform statistical analysis on Get With The Guideline s® datasets for strategic analyses.
- o Early Career Investigator (ECI): PhDs and/or MDs who are current residents, fellows in training or have completed training within the last five years, or other doctoral prepared professionals who are early in their career development and have interest in cardi1 (n)3.oth hsnn-2.1 . (th4.6x. n226(h)8.5 imn)1.4 5tnc a23.9522.3 (C)3 (I))2 (e(a)5.3 (h(035) emn16T)



- o Resuscitation : Submit to GWTGResuscitationResearch@heart.org
- 5. Limitations and project scope:
 - o A lead author may have a total of 2 active projects across all the modules ; additional proposals will not be accepted. Manuscripts submitted to journal are not considered an active project.
 - o Resuscitation: If the lead author has not complied with the data destruction policy for previous projects, additional proposals will not be accepted until the requirements have been fulfilled.

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- Once the SAP is approved, additional analytic requests may not be completed until after a review of the manuscript by either coauthor s or the journal to ensure limiting scope -creep.
- Additional requests may also need to be reviewed for approval by AHA and the SOCAG. Additional charges may be billed to the investigator for additional analyses.
- o After final SAP is approved by the author group, the Designat ed Analytic Center sends the completed analyses to the lead researcher.

IV. Conference Abstract and Manuscript Preparation

A. Authorship guidelines

- 1. In accordance with the International Committee of Medical Journal Editors (ICMJE) guidelines, authorship credit is based on the following conditions:
 - Substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data.
 - o Drafting or critically revising the content.
 - o Final approval of the version to be published.
 - o Accountability regarding accuracy or integrity of the content.
- 2. The order of authorship on the byline should be a joint decision of the coauthor s.
- 3. AHA staff can serve as coauthor s if authorship requirements are met.
- 4. In the event of a disagreement regarding authorship, the Chair of the Systems of Care Advisory Group or Research Task Force will determine authorship, in consultation with AHA scientific staff.
- 5. Plagiarism will not be tolerated and, if detected, will lead to removal of the author from the GWTG writing process. Sentences should not be cut and pasted from other published works, including works by the author or coauthor s, or in prior publications.

B. Conference abstract process

1.



o Abstracts are separately reviewed by the Adult/Pediatric Research Task Forces



o If the abstract is submitted and accepted to a conference, the goal is to have conference dates coincide with journal publication .

D. Publication requirements and information

- 1. The following are required when submitting to journal for publication:
 - o AHA representation : Includes use of AHA GWTG trademarks, acronyms and use of approved templates.
 - o Acknowledgement statements : Included in the Methods section for data collection, coordination, and analysis providers.
 - f Statement is based on how/where analytics performed:
 - f Research letters or other works with smaller word count restrictions can include the acknowledgement statemen ts in a note a t the end.
 - o Sponsorship statements : All manuscripts should include the appropriate standard statement under the Sources of Funding or Funding Support section of the manuscript.

2. Other relevant information

- Open Access Agreement (OAA): All manuscripts are considered the work of the authors even if an author is employed by AHA or an AHA vendor ; thereby the authors retain the copyright.
- o Transparency and Openness Promotion (TOP) : AHA data is collected for clinical care and quality improvement, rather than primarily for research, data sh aring agreements require an application process for other researchers to access the data.
- Ethics approval statement: Each participating hospital received either human research approval to enroll patients without individual consent under the Common Rule or a waiver of authorization and exemption from subsequent review by their Institutional Review Board.
- o Institutional Review Board (IRB): Given that the primary purpose of the registry is quality improvement, each participating center either received human res earch approval to enroll patients without individual consent under the Common Rule or a waiver of authorization and exemption from subsequent review by their Institutional Review Board.
- 3. After journal acceptance

