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|  | | **Please read the checklist for submitting comments at the end of this form.** We cannot accept forms that are not filled in correctly.  We would like to hear your views on the draft recommendations presented in the guideline, and any comments you may have on the rationale and impact sections in the guideline and the evidence presented in the evidence reviews documents. We would also welcome views on the Equality Impact Assessment.  In addition to your comments below on our guideline documents, we would like to hear your views on these questions:   1. Which areas will have the biggest impact on practice and be challenging to implement? Please say for whom and why. 2. Would implementation of any of the draft recommendations have significant cost implications? 3. What would help users overcome any challenges? (For example, existing practical resources or national initiatives, or examples of good practice.) 4. The recommendations in this guideline were developed before the coronavirus pandemic. Please tell us if there are any particular issues relating to COVID-19 that we should take into account when finalising the guideline for publication.   See [[Developing NICE guidance: how to get involved](http://www.nice.org.uk/process/pmg22/chapter/how-you-can-get-involved)](https://www.nice.org.uk/process/pmg20/resources/developing-nice-guidelines-how-to-get-involved-2722986687/chapter/commenting-on-a-draft-guideline) for suggestions of general points to think about when commenting. | | |
| Organisation name – Stakeholder or respondent (if you are responding as an individual rather than a registered stakeholder please leave blank): | | Pelvic Partnership | | |
| Disclosure  Please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry. | | None | | |
| Name of commentator person completing form: | | Jen Campbell, co-ordinator at the Pelvic Partnership | | |
| Type | | [office use only] | | |
| **Comment number** | **Document**  **[guideline, evidence review A, B, C etc., methods or other (please specify which)]** | Page number  Or **‘general’** for comments on whole document | Line number  Or **‘general’** for comments on whole document | Comments Insert each comment in a new row.  Do not paste other tables into this table, because your comments could get lost – type directly into this table. |
| Example 1  Example 2  Example 3  Example 4  Example 5  Example 6  Example 7 | Guideline  Guideline  Guideline  Guideline  Evidence review C  Methods  Algorithm | 16  17  23  37  57  34  General | 45  23  5  16  32  10  General | We are concerned that this recommendation may imply that …………..  Question 1: This recommendation will be a challenging change in practice because ……  Question 3: Our trust has had experience of implementing this approach and would be willing to submit its experiences to the NICE shared learning database. Contact……………….  This rationale states that…  There is evidence that …  The inclusion criteria …  The algorithm seems to imply that … |
| 1 | Guideline | General | General | The Pelvic Partnership welcomes the decision of the committee to refer to caesarean sections as caesarean births in this guideline.  Many women with pregnancy-related pelvic girdle pain (PGP) choose to have a planned caesarean birth in consultation with their medical team as a result of their PGP or trauma from a previous birth, while others may undergo an emergency caesarean birth due to a range of complications in the birth. Whatever the cause, this change in nomenclature reflects the validity of this mode of birth and will have significant impacts on maternal mental health antenatally and postnatally. |
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Insert extra rows as needed

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| **Checklist for submitting comments**   * Use this comment form and submit it as a **Word document (not a PDF)**. * Complete the disclosure about links with, or funding from, the tobacco industry. * Include **page and line number (not section number)** of the text each comment is about. * 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. Also, ensure you state in your email to NICE that your submission includes confidential comments.** * **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 have not reviewed the evidence for the recommendations shaded in grey. Therefore, please do not submit comments relating to these recommendations as we cannot accept comments on them.** * **We do not accept comments submitted after the deadline stated for close of consultation.**   You can see any guidance that we have produced on topics related to this guideline by checking [NICE Pathways](http://pathways.nice.org.uk/).  **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 NICE, its officers or advisory Committees.  **Data protection**  The information you submit on this form will be retained and used by NICE 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. The information may appear on the NICE website in due course in which case all personal data will be removed in accordance with NICE policies.  By submitting your data via this form you are confirming that you have read and understood this statement.  For more information about how we process your data, please see our [privacy notice](https://www.nice.org.uk/privacy-notice). |