

ASCO[®] Guidelines

ASCO Representative Request Form

In order to facilitate the nomination of ASCO representatives for organizations' guideline panels, please complete this form and submit it to guidelines@asco.org.

PLEASE BE ADVISED: Requesting or receiving a representative for a guideline panel IS NOT an endorsement of the guideline or of the requesting organization by ASCO. ASCO does not review or approve guidelines as a result of nominating representatives unless a separate endorsement or joint development agreement is in place. Please contact ASCO if your organization wishes to consider joint development or endorsement of a guideline.

Name:

Title:

Organization:

Email:

1. Guideline Title:
2. Number of ASCO representatives requested:
3. Please note the type of expertise or subspecialty requested (e.g. Medical oncologist with expertise in breast cancer specializing in young adults):
4. Please list any geographic preferences (e.g. within the USA, international, or specific geographical locations):
5. Is travel anticipated? If so, are travel costs covered by your organization?
6. Please indicate any known limitations that would preclude a nominated representative from participating on this guideline, such as specific disclosures.
7. Suggested Representatives (Optional). Please note, while suggested representatives will be considered, it is not a guarantee of nomination by ASCO.

Name:

Specialty:

Institution:

Email:

Name:

Specialty:

Institution:

Email:

Name:

Specialty:

Institution:

Email:

Name:

Specialty:

Institution:

Email:

8. Please provide a short summary on the guideline topic.