



National Association of Pediatric Nurse PractitionersSM

NAPNAP Position Statement Evaluation Form

Please complete the following evaluation form and return it to Simone Daley at the national office: sdaley@napnap.org or via fax 212-785-1713 by: INSERT DATE.

| Criteria | Excellent | Fair | Poor | Comments |
|--|-----------|------|------|----------|
| Adheres to NAPNAP position statement format. (See attached guidelines). | | | | |
| Written clearly with cohesive flow and appropriate grammatical structure. | | | | |
| Includes the most current data and up-to-date recommendations and/or evidence-based practice guidelines relevant to the subject. | | | | |
| Accurately reflects NAPNAP's point of view or philosophy on the issue. | | | | |
| References used are comprehensive and current (within the last 5 years unless a seminal source)*. | | | | |
| References are evidence-based, research-focused, primary sources and/or systematic reviews. | | | | |
| Scope of the statement is appropriate for the needs of the identified patient populations and/or the role of the pediatric-focused APRN. | | | | |
| Incorporates the collaborative role of the pediatric-focused APRNs with other health care providers as appropriate. | | | | |
| NAPNAP can realistically support the recommendations. | | | | |
| Statement is reflective of NAPNAP's goals, objectives and strategic plan. | | | | |
| Statement is professionally worded and free of bias or inflammatory language. | | | | |
| Statement is appropriate for the consumer reader. | | | | |
| Length of the statement is appropriate; statement is concise and complete. | | | | |

Blinded editorial comments to the authors:

* A literature review may not be necessary for more philosophical statements.

Do you feel it necessary or beneficial to send this statement to an editor for additional revisions/edits?

Yes _____ **No** _____

Considering the needs of the patient population, the role pediatric APRNs play in the care of that patient population, role in inter- and multi-disciplinary team and the document being reviewed, I make the following recommendation to the NAPNAP Executive Board:

Accept _____

Minor Revision _____

Major Revision _____

Reject _____

Please state below why you have decided on the recommendation you are making (use another sheet, if necessary):

Reviewed by:

Date: