Clinical Practice Guideline:  
Benign Paroxysmal Positional Vertigo (BPPV) Update

External Review Overview

External reviews should be detailed, in-depth, and critically appraise the various action statement profiles and supporting text for each bold-faced statement in the guideline. Review should be focused on three main guideline attributes: validity, reliability, and feasibility:

- Valid guidelines include all relevant literature, have explicit links between decisions and scientific evidence, and clearly distinguish and justify situations where expert judgment or group consensus is used to support recommendations.

- Reliable and reproducible guidelines allow a knowledgeable peer reviewer to arrive at similar conclusions to the development group when considering the evidence.

- Feasible guidelines are clearly written, user friendly, allow for flexibility in individual clinician decisions, and are suitable for routine use in intended settings.

Clarification of the External Guideline Review versus Traditional Peer Review

This external guideline review will be different from traditional peer review in journals. While journal peer review consists of typically 2 referees who participate in a feedback loop until consensus is achieved, this external review will solicit comments from all stakeholder groups (soliciting up to 30 to 40 and returning approximately 25 to 30 referees). Comments that are received will be collated and distributed to the guideline development group. Corrections and changes are made to the guideline as deemed appropriate by the chair or designee(s) and a summary is returned to the external guideline reviewers indicating the disposition for each comment (i.e., incorporated, not incorporated) with an explanation as to why it was handled in that manner. The large number of reviewers (much greater than normal peer review) and diversity of disciplines involved helps ensure the integrity of this process. The comments and dispositions are submitted to the publishing journal as a record of external guideline review.

All concerns will be addressed and changes made by the discretion of the Chair and guideline development group. There is no honorarium given to reviewers and all guideline activities are supported by the AAO-HNSF. The guideline will be submitted for publication to Otolaryngology-Head and Neck Surgery. Thank you again for your leadership in critically reviewing this guideline on behalf of the specialty.