



Guidance for Translation of 2020 International HHT Guidelines

March 17, 2021

- A. **Process for Translating Patient Materials (Checklists, etc.) related to the Second International HHT Guidelines (2020 Annals Intern Med) from English to other languages.** This process will typically be initiated by an HHT patient advocacy group.
1. Initial translation can be performed by a patient advocate knowledge of HHT, typically of the Patient Care Checklists, rather than the Guidelines Recommendations statements (see section B below for that process).
 2. The translating patient advocate will involve a clinician with expertise in HHT, and fluent in both languages, to review the translated materials.
 3. Once the translation is approved by the patient advocate and the HHT Clinician, they will submit the translated guidelines to Cure HHT for confirmation, and posting on hhtguidelines.org, watermarked with a standard statement (e.g. *Translation provided on a volunteer basis by xxx of XXX and reviewed by xxx, HHT Guidelines Panel. Original paper is "Second International Guidelines for the Diagnosis and Management of Hereditary Hemorrhagic Telangiectasia", Annals of Internal Medicine doi:10.7326/M20-1443. This translation is approved by Cure HHT. You can use this translation freely, but you are requested to write the reference as follows: This is a translated version of "Clinical Recommendations From the Second International HHT Guidelines and Currently Recommended Clinical, Recommendations From the First International HHT Guidelines" published in Annals of Internal Medicine, 2020.*).
- B. **Process for Translating the Second International HHT Guidelines (2020 Annals Intern Med) from English to other languages.** This process will typically be initiated by an HHT Clinician.
1. Initial translation can be performed by a Clinician with medical expertise in HHT, typically of the Executive Summary, including all the Recommendations, the Quality of Evidence, Strength of the Recommendations, with vote %, and the Clinical Considerations.
 2. The translating clinician will register the planned translation with Cure HHT.
 3. The translating clinician/group will hire a professional medical translator to back-translate the Recommendation statements to English, providing results to Cure HHT and the translating clinician. It is not mandatory to back -translate the other elements, but certainly desirable if financially feasible.
 4. Cure HHT will maintain a spreadsheet of the original Recommendation statements and the back translated versions.
 5. The translating clinician will provide responses to any discrepancies between the original and the back translated Recommendations, to resolve the discrepancies and revise the translated document. Then the translating clinician will request that the professional translator back translate the revised statements, with same process as above.

6. Once all discrepancies are resolved and back translated recommendations are consistent with the English language Recommendation statements, the translating clinician will submit the translated guidelines to Cure HHT for confirmation, and posting on hhtguidelines.org, watermarked with a standard statement. (e.g. *Translation provided on a volunteer basis by xxx of XXX and reviewed by xxx, HHT Guidelines Panel. Original paper is "Second International Guidelines for the Diagnosis and Management of Hereditary Hemorrhagic Telangiectasia", Annals of Internal Medicine doi:10.7326/M20-1443. This translation is approved by Cure HHT. You can use this translation freely, but you are requested to write the reference as follows: This is a translated version of "Clinical Recommendations From the Second International HHT Guidelines and Currently Recommended Clinical, Recommendations From the First International HHT Guidelines" published in Annals of Internal Medicine, 2020.*).