

Appendix 1. Additional information of Expert Panel recruitment

Each Expert Panel (EP) is made up 6 to 9 members, made up of at least one radiologist, one referring clinician, one patient advisor, and a guideline methodologist.

Recruiting the Expert Panel chair

The Working Group will provide names for candidate EP chairs. The EP chair is a radiologist who specializes in the section they are invited to. They are also members of the CAR. The EP chair candidate is emailed with an introduction of the project and invitation to take this role.

Example email

Hello Dr. *insert name*,

My name is *insert name* and I am a *insert job title* at the Canadian Association of Radiologists (CAR) working on the CAR Diagnostic Imaging Referral Guidelines project. The CAR is currently updating their 2012 Diagnostic Imaging Referral guidelines (<https://car.ca/patient-care/referral-guidelines/>). One of the sections within these guidelines is *section name* (2012 recommendations attached). We are in the process of establishing a *section name* Expert Panel (EP) and we would like to ask you to take on the role as the EP Chair.

We have attached the draft Terms of Reference which describes the purpose, mandate, and other pertinent details. If you would like some additional details on this project and role before deciding, we would be happy to meet with you (via Teams) at your convenience.

Many thanks for considering,

Recruiting additional Expert Panel members

Once the EP chair is recruited, they are asked to provide names of other radiologists and/or referring clinicians, preferably with geographic representation. The Working Group is also asked for suggestions of additional members, particularly for the referring clinicians. The CAR radiologist database is searched for additional members, when required. All candidate EP members are sent an invitation email like the one sent to the EP chair. We aim to get national representation in BC, Western Canada, Ontario, Quebec, and

Eastern Canada, including representation from both urban and rural areas. As each section is specialized, we aim to get representation from specialists in the area (e.g., sports medicine doctor for the Musculoskeletal system, maternal fetal medicine physician for the Obstetrics and Gynecology section), and general practitioners.

The patient and family advisor is an active member of the EP, who has received formal training in a patient/family advisor program through a hospital or certified health care organization. They are involved in every stage of the guideline process and are invited to all meetings. They help with revision and restructure of the clinical scenarios, provide input on phrasing of recommendations, provide the patient/family advisor perspective, and review and provide feedback on all versions of the guideline.

In the circumstance where the EP is not representative of all potential stakeholders, we mitigate this by having an external peer-review process from both the oversight Working Group (made up of radiologists, physicians, nurse practitioners, and a patient advisor), as well as peer-reviewers completely external to the guideline work. This allows for input on clarity of the recommendations and ensuring they are actionable.