# Cover Sheet

Please ensure that all details on this page are completed.

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| **Is this submission being made on behalf of an organisation? (Y/N)** |  |
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| **Authorising Person** |  | Name |  |
| Position |  |
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*\* Personal information on this form is collected to enable the NBA to clarify or seek further information on submissions, if required.*

*\*\* The NBA may include your name, or the name of your organisation with your submission, and/or quotes from your submission in any reports prepared relating to the development of this guideline, the final published guideline and its later publications.*

# Submission Template – Individual Chapters

Please type directly into the tables below. Add extra rows as needed.

It is not necessary to respond to all the identified areas, only those areas for which you have views. If you choose not to respond to some areas, please just leave them blank.

*Note: The final version of this document will be professionally designed. The electronic version will have links to each chapter, which will be able to be accessed by clicking on the table of contents.*

**GENERAL COMMENTS**

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| **Comments** | **Attached documentation (Y/N)** |
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**SUMMARY OF KEY PRACTICE POINTS (PP)**

|  |  |  |  |
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| **Section Number** | **PP #** | **Comments** | **Attached documentation (Y/N)** |
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**INTRODUCTION**

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**CHAPTER 1 – GENERAL CARE AND MANAGEMENT OF HAEMOPHILIA**

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**CHAPTER 2 – SPECIAL MANAGEMENT ISSUES**

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**CHAPTER 3 – LABORATORY DIAGNOSIS**

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**CHAPTER 4 – HAEMOSTATIC AGENTS**

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**CHAPTER 5 – TREATMENT OF SPECIFIC HAEMORRHAGES**

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**CHAPTER 6 – COMPLICATIONS OF HAEMOPHILIA**

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**CHAPTER 7 – PLASMA FACTOR LEVEL AND DURATION OF ADMINISTRATION**

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**CHAPTER 8 – FRAMEWORK FOR MANAGEMENT OF BLEEDING DISORDERS IN AUSTRALIA**

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**APPENDIX A – ACRONYMS AND ABBREVIATIONS**

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**APPENDIX B – DEVELOPMENT PROCESS**

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**APPENDIX C – SYSTEMATIC REVIEW METHODOLOGY**

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**APPENDIX D – AREAS FOR FURTHER RESEARCH**

*Please indicate areas that have not been identified that require further research to enable improvements in patient outcomes.*

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**APPENDIX E – PATIENT INFORMATION**

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**APPENDIX F – IMPLEMENTATION AND REVIEW**

*Please provide suggestions for implementation, evaluation and maintenance of the guidelines*

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| **Comments** | **Attached documentation (Y/N)** |
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