It is an unreasonable requirement to convene a panel of the best experts none of whom have conflicts of interest, as they likely will have been consulted by others because of their expertise. However, those expected to read and abide by conclusions and recommendations contained in the documents have the right to know of real and apparent conflicts.

I suggest that the ASA provide the readership with complete funding and disclosure information for expert-authored practice parameters, standards, guidelines, and recommendations, and that readers not automatically dismiss documents provided by appropriate experts when produced using a thorough and appropriate process.

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In Reply:

We thank Dr. Weiskopf for his letter concerning our Editorial View.[1] We agree with him that conflict of interest is a complex issue. Nevertheless, Dr. Weiskopf has chosen to ignore our most important concern. **Guidelines and practice parameters should not be promulgated by groups without standing**. The primary reason we criticize guidelines and practice parameters offered by "shadow" organizations is that there is no large national or international medical organization that vets their work. For whom and for what purpose are these guidelines and practice parameters being created when they do not arise from a relevant national or specialty society? Why should physicians be encumbered by guidelines or practice parameters the contents of which have not been vetted by physicians in open fora at national or international medical meetings? Why should physicians be encumbered by guidelines or practice parameters that were initiated and funded by a company, not by a relevant national or international medical association?

We have served on task forces that have created guidelines and practice parameters. It is a difficult job, and it must be done correctly, without undue influence from sponsors with vested interests. There can be problems even when relevant organizations sponsor guidelines if they provide conflicting recommendations.[2] Groups without standing should find another line of work.

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In Reply:

Dr. Weiskopf's letter raises important issues about disclosure and transparency that have received much attention from the American Society of Anesthesiologists (ASA) in recent years.[1] We have developed, refined, and implemented a Conflict of Interest policy aimed at informing all those acting in an official capacity for ASA of real or potential conflicts:

A member of the American Society of Anesthesiologists (ASA) shall not serve as an officer, director, alternate director, committee member, representative to another organization or in another appointed position if that service would involve a conflict, real or apparent, with any other relationship or arrangement, financial or otherwise, participated in by the member or the member's family. ASA requires each member nominated to serve, as indicated above, to disclose his or her affiliations and execute this statement.

Disclosure of a member's affiliations is intended to assist ASA in resolving conflicts of interest. An affiliation with another organization does not necessarily mean that a conflict of interest exists or that the affiliation would unduly influence the member in his or her nominated position.

A listing of affiliations will be distributed or made available to all respective members of the Board, committee, task force or