Article I. NAME

The name of the organization is the Society for Pediatric Anesthesia Improvement Network (hereinafter called “SPAIN”)

Article II. AFFILIATION

SPAIN is an affiliation of the Society for Pediatric Anesthesia (SPA) and as such conforms to its policies and procedures and by-laws.

Article III. MISSION STATEMENT

Society for Pediatric Anesthesia Improvement Network (SPAIN) is a group of clinical investigators that focuses on the advancement of perioperative outcomes of children who undergo various painful surgeries. The objectives of this organization are:

1) Provide infrastructure for fostering collaboration, trading research ideas and execution of research to improve pediatric anesthesia outcomes
2) Create prospective registries to follow biomarkers, genomics, and/or other data
3) Develop opportunities to promote academic and research leaders within the pediatric anesthesia community

Overall, the goal of the SPAIN is to serve as the premier organization that promotes collaborative, multi-institutional research; collects and analyzes reliable evidence; and disseminates findings nationwide and beyond to improve outcomes in children who undergo various surgeries.

Vision:

SPAIN will maintain a reputation for successful multi-institution collaboration and subsequent publication of pediatric surgical and perioperative outcomes including pain-related outcomes in peer-reviewed journals/media. The desired goals of the group will be achieved through the leadership of distinguished pediatric anesthesiologists and clinical research leaders from across the country. The organization aims
to build an infrastructure for data design, data management and funding for multi-center collaboration. This foundation will support prospective observational and randomized clinical trials to aid in the integration of sound evidence into clinical practice, thus improving patient outcomes.

Article IV. PARTICIPATING INSTITUTIONS

a) Any individual that is a member of Society for Pediatric Anesthesia may participate in SPAIN. Members must attend 50% of the meetings.

b) Any pediatric anesthesiologist may participate in research as long as they can comply with the codes of conduct to participate in clinical research, such as obtain IRB approval and oversee research audits.

Article V. LEADERSHIP

(a) SPAIN structure will have a group of leaders who are pediatric anesthesiologists that are assigned to specific roles to manage different aspects of the organization.

(b) SPAIN members from participating institutions will have an opportunity to participate in leadership roles in a rotating fashion approximately every two years.

(c) Pursuant to the SPA by-laws, the Executive Committee shall have the power by two-thirds vote to suspend or expel any member who fails to meet the requirements for membership in SPAIN or whose conduct is contrary to the mission, values and/or reputation of SPAIN, SPA, or the profession.

(d) Executive committee will consist of President (2 years), President elect (2 years), Research Director (4 years) and four members at large (2 years) in a staggered fashion.

   a. For the first election, two members at large will be elected for 4 year terms and two members will be elected for 2 year terms.

   b. For subsequent elections, all members at large will be elected for 2 year terms with the option to run for re-election once. Only members at large will be eligible for re-election.

   c. After serving one or two terms, a member at large can run for re-election after taking at least 2 years off of the board.

(e) The executive committee will either be nominated by a member of SPAIN or self-nominated. A vote will be held by voting members of SPAIN to elect individuals for
the roles. Members of the executive committee need to attend 75% of the meetings and be available by email for consultation at other times as needed.

(f) Voting: All members of SPAIN

Article VI. Meetings

(a) The communication among members actively participating in research projects will be facilitated by monthly virtual meetings to share data and interval outcomes related to ongoing projects.

(b) The executive committee will have quarterly meetings to prioritize the next research project, oversight of the ongoing projects and to assist in manuscript oversight (see below).

(c) Meetings will occur in-person and virtually at national society gatherings twice a year. At these meetings, general membership of ongoing research and potential next research projects will be discussed.

Article VII. Data

(a) The organization will ensure that the data collected is securely stored and confidentially shared among members.

(b) Participating institutions will preserve the opportunity to independently conduct their own research related to the study area at the organization.

Article VIII. Executive Committee / Manuscript Oversight Committee (MOC)

General Principles

1. Authorship eligibility: Priority and eligibility for authorship will be given to those investigators at sites that have contributed data. Site Principal Investigators (PIs) and Coordinators who have not contributed data will, in general, not be considered for co-authorship nor will they be acknowledged as contributors. Exceptions can be granted for special circumstances at the request of the first or senior author of each manuscript, and should be discussed and approved by the MOC.
2. All site investigators **who contributed data** will be recognized as part of the “Society of Pediatric Anesthesia Interest Network” in all publications with the byline “... Society of Pediatric Anesthesia Interest Network”. (Note: with proper COI submission, this usually allows all of these investigators to be cited in PubMed as co-authors).

3. Local SPAIN collaborators at sites who are not site PIs or co-PIs will generally be acknowledged in an **appendix** of site participants appropriate to that manuscript (this will include acknowledgement of key research coordinators, key local investigators or organizers of research at each institution).

4. All site investigators contributing data will be eligible and recognized with named authorship in at least one SPAIN publication (in addition to #1 above), provided they contribute as an author to that writing group.

5. First, second, third and senior authorship will be assigned to individuals who have done the most work (i.e. development and organization of protocol or tool, recruited many subjects, etc), and who have intellectually contributed to that specific manuscript. These, for the most part, are individuals who have been working on the project over the past 2-3 years, and who have been involved from the inception of the project.

6. Prioritize young investigators as first, second, and third authors, when possible and appropriate.

7. Attempt to appropriately attribute academic credit, with emphasis on acknowledgement of all involved (usually with most input from first and senior authors as to order).

8. Executive Committee/MOC subcommittee to negotiate and mitigate disagreements among/between investigators about authorship. Facilitate identification and management of Conflicts of Interest, if they arise. Assist with enforcement of timelines for analysis and publication of data. If any first author cannot complete the manuscript submission within 1 year following the end of data collection/closure of data collection, then first authorship will be re-evaluated and potentially reassigned by the MOC.