



National Comprehensive  
Cancer Network®

# NCCN Commercial Licensing and Permissions Process

# Meet the NCCN Business Development Permissions Team



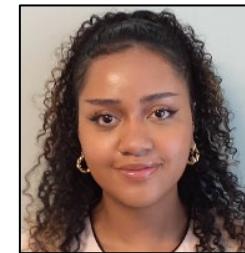
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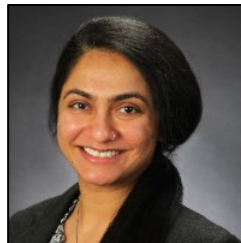
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# NCCN Licensing and Permissions

NCCN regularly licenses NCCN Content and **does not** permit commercial use of NCCN Content without a License Agreement between the user and NCCN.

If you or your organization would like to license NCCN Content for any purpose or if you would like to review the Agreement required, please contact [permissionrequest@nccn.org](mailto:permissionrequest@nccn.org).

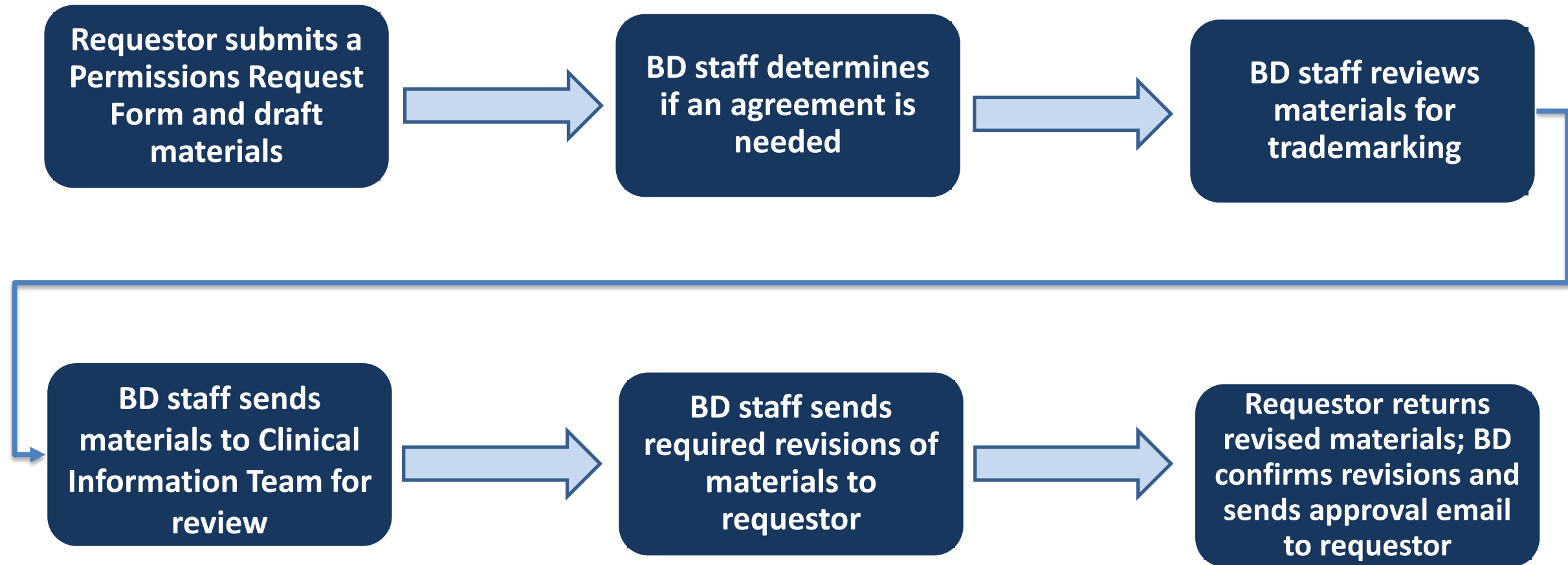
If you would like any further information concerning NCCN or NCCN Content, please visit our website at [www.nccn.org](http://www.nccn.org).

# NCCN Guidelines®

## NCCN Firewall

- NCCN imposes strict policies to shield the guidelines development processes from external influences.
- The “firewall” surrounding the NCCN Guidelines **processes includes:**
  - financial support policies
  - panel participation and communication policies;
  - guidelines disclosure policies;
  - and policies regarding relationships to NCCN’s other business development activities.
- NCCN does not accept any form of industry or other external financial support for the guideline development program.
- Development of NCCN Guidelines is supported exclusively by NCCN Member Institution dues.

# Permissions Process Overview



# NCCN.org/permissions

## Permission to Cite or Use NCCN Content

### Permission to Cite or Use NCCN Content

#### Treatment by Cancer Type

Detection, Prevention,  
and Risk Reduction

Supportive Care

Specific Populations

Guidelines for Patients

Guidelines With Evidence  
Blocks

NCCN Framework For  
Resource Stratification +

Harmonized Guidelines

International Adaptations  
and Translations

NCCN Mobile Apps

Guidelines Process +

Guidelines Panels and  
Disclosure +

Permission to Cite or Use  
NCCN Content

Recently Updated  
Guidelines

**NEW PROCESS FOR SUBMITTING PERMISSIONS REQUEST FORMS** – Please log in to access the **Permissions Request Form**. Please upload your PDF draft materials directly to the form.

If your organization would like to use, reproduce, and/or distribute NCCN Content for any purpose, please review the applicable information below, log in to NCCN.org, and complete the **Permissions Request Form**. Please also view this **Permissions 101 Webinar** and informative **slide set** on how to properly cite NCCN Content and submit your materials for approval.

[Permissions Request Form](#)

[View Existing Permissions](#)

#### NCCN Permissions Request Policies:

- All materials that reference NCCN Content must go through the permissions request process (see **Legal Notices**)
- All requests must be submitted online via the form below
- Permission for use of NCCN Content is not guaranteed; NCCN must review intended use for accuracy and context
- Permissions and use fees vary depending upon quantity, specific use, format, etc.
- Materials submitted for review must be NCCN Content and not be credited to another source
- NCCN makes every effort to process permissions requests within 7-10 business days
- Submitted materials that do not reflect the most updated NCCN Guidelines version may be delayed
- See **NCCN Referencing Guidance** for important information on how to properly reference

# NCCN Licensing and Permissions

## Permissions Process

- **Process to submit**
  - Please login to NCCN.org to access the Permissions Request Form.
  - Please upload draft materials directly to the Permissions Request Form.
    - No wait time to submit draft materials.
    - Please do not submit the Form without draft materials uploaded.
- After receiving draft materials, NCCN will review to determine if a license is required.
- Once a fully executed agreement is in place, NCCN will issue an invoice (if applicable).
- Permissions Team will send drafted materials to NCCN Guidelines Staff (not Panel Members) for review.
- Required edits will need to be made and resubmitted for final approval.
- Upon final approval of content, NCCN will send an email finalizing permission.



# NCCN Licensing and Permissions

## Per Project Licensing Agreement vs. Annual Licensing Agreement:

- Per Project Licensing Agreement: granted for a single use case for one year (for example, one website, one marketing piece, one banner ad, etc.).
- Annual Licensing Agreement: provides the rights to reference one or more Guidelines for one year for an unlimited number of use cases. An Annual license is financially advantageous if you will cite a specific Guideline in more than 7 or 8 use cases/projects per year.

# Draft Submission Requirements

**All drafts should be uploaded to the Permissions Request Form at [NCCN.org/permissions](https://www.nccn.org/permissions)**

## **Draft Requirements\***

- All drafts must be submitted in a readable and searchable PDF format.
- On the first page, please list all pages in which NCCN Content/references are located.
- On all pages, please *highlight* and/or *box* the NCCN Content to be reviewed.
- Please superscript all NCCN Content throughout your materials.
- Please cite the Permission Request # assigned to your request on all communications.
- Submit only the slides or pages that contain NCCN Content.

## **Audio/Video Recorded Content:**

- If content is scripted, submit the script to NCCN **prior** to recording.
- If content is un-scripted, it will be handled on a case-by-case basis.

***\*Please note: Failure to adhere to the following Draft Requirements will result in your permissions request being voided.***

# NCCN Licensing and Permissions

## Using the NCCN Guidelines®

- The most current NCCN Content/Guideline version must be used.
  - *NCCN will not review material that references outdated content and will request an updated draft prior to initiating the review process.*
- Appropriate NCCN branding/trademarking standards must be followed.
- Appropriate credit language must be added.
- Content must be consistent with the original NCCN Guidelines and cannot appear to be favoring a specific product unless this is specified in the NCCN Guidelines.

# NCCN Licensing and Permissions

## Using the NCCN Logo



- The NCCN logo cannot be used in whole or in part in any commercial materials.

## Use of Third-Party Content

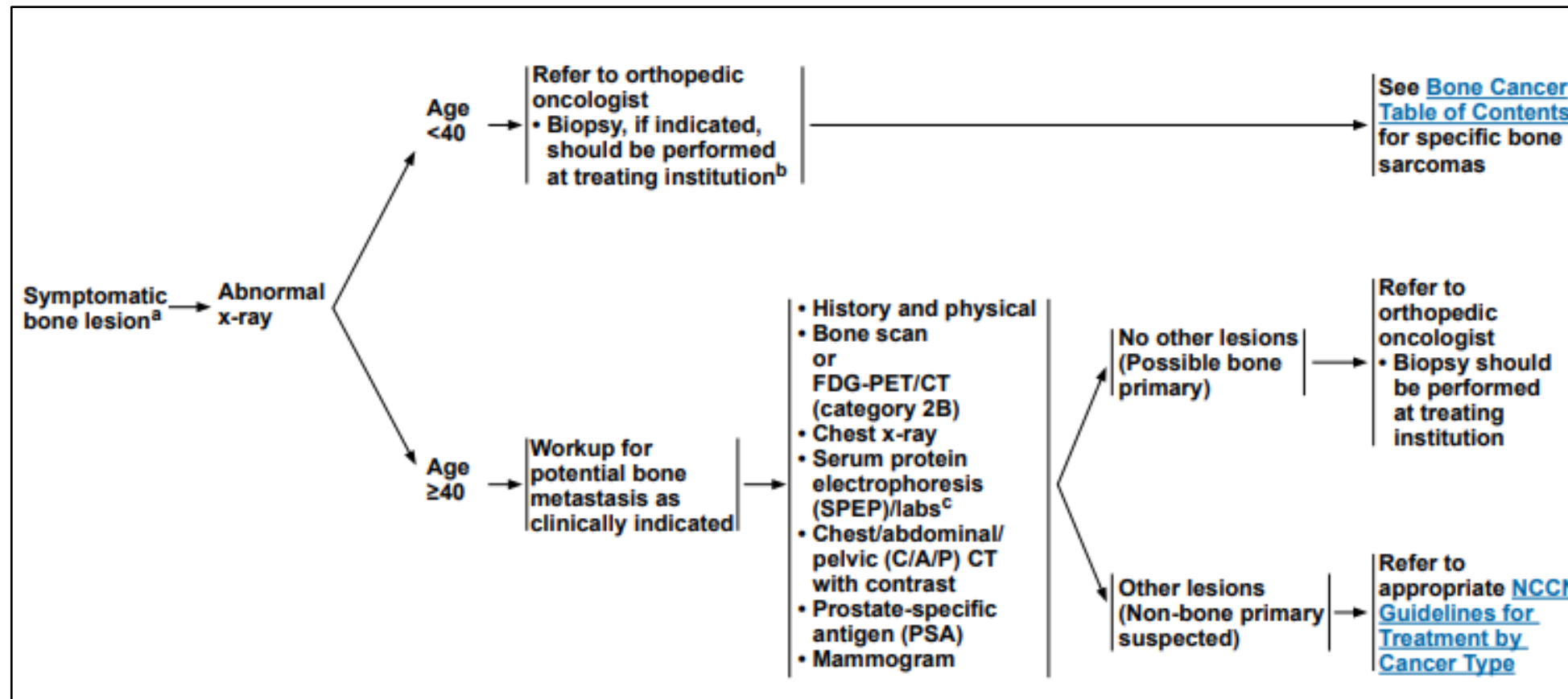
- Any other use of third-party content (i.e., staging tables or citation from *JNCCN*) requires permission from the original source.

# NCCN Licensing and Permissions

## Using the NCCN Guidelines (continued)

- Algorithm or figure page(s) cannot be used in its entirety, unchanged within branded pieces – it must be adapted significantly if used promotionally.
- How to appropriately adapt an algorithm or table:
  - Remove NCCN logo, headers, footers, and clinical trial information.
  - Add appropriate reference statement specific to adapted algorithms.
  - Change font, spacing, style, coloring, etc. (content should be distinguishable from an algorithm page in the NCCN Guidelines).

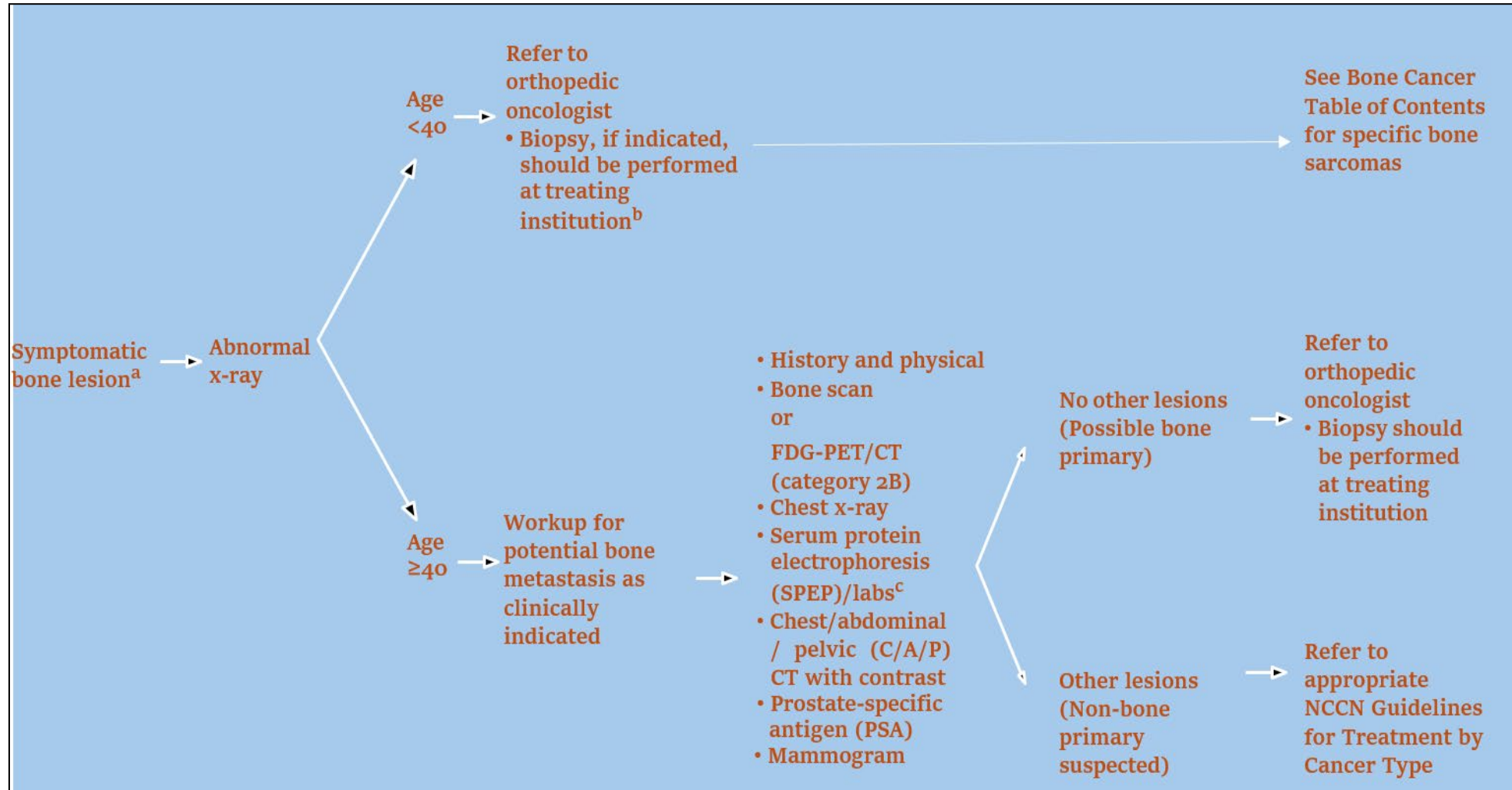
# Algorithms in Promotional Materials:



## Improper Use

Algorithms must be adapted significantly if used commercially.  
Screenshots cannot be utilized.

# Algorithms in Promotional Materials:



## Proper Use

### How to appropriately adapt an algorithm or table:

- Remove NCCN logo, headers, footers, and clinical trial information.
- Add appropriate reference statement specific to adapted algorithms.
- Change font, spacing, style, coloring, etc. (content should be distinguishable from an algorithm page in the NCCN Guidelines).

# Referencing Recommendations included within NCCN Guidelines

- **Generic Drug Names** – NCCN Guidelines always recommend the generic, and do not recommend a brand.
- **NCCN Recommendation is a treatment OPTION.**
- **Do not use the phrase “standard of care”** when referring to recommendations in the NCCN Guidelines.
- **The term “certain patients” may be used** if the full NCCN recommendation cannot be listed on a piece due to regulatory requirements or space limitations.
- **If including both the NCCN Category of Evidence and the NCCN Category of Preference,** the Category of Evidence should be first, followed by the Category of Preference.
- **Caution should be used when making “only” statements regarding NCCN Guidelines.**
- **Stay true to how the NCCN recommendation is written and avoid subjective commentary.**
  - For example, avoid “highest recommendation,” use “preferred” only when explicitly noted, and avoid oversimplification of recommendations.



# NCCN and NCCN Guidelines must be referenced according to the NCCN written identity

## ***When “NCCN” is mentioned:***

- First Mention: National Comprehensive Cancer Network® (NCCN®)
- All Other Mentions: NCCN

## ***When “NCCN Guidelines” are mentioned:***

- First Mention: NCCN Clinical Practice Guidelines In Oncology (NCCN Guidelines®)
- Second Mention: NCCN Guidelines®
- All Other Mentions: NCCN Guidelines

***Please note that trademarks cannot be combined.***

***When other NCCN Content (e.g., Guidelines for Patients, Guidelines with Evidence Blocks, etc.) is mentioned:*** Please reach out to the Business Development team member who is managing your request with additional trademarking rules specific to the NCCN Content you are referencing.

# Additional Referencing

## ***When “Category” is mentioned:***

- First Mention: NCCN Category X
- All Other Mentions: NCCN Category X or Category X (either one is acceptable)

Please note that “Category” mentions are separate from NCCN organization and NCCN Guideline mentions.

# NCCN and NCCN Guidelines Content must contain Superscripts

## Correct Superscript Example:

### Lung Cancer Risk Factors:

- A. Ionizing radiation exposure<sup>1</sup>
- B. Age<sup>2</sup>
- C. Prolonged exposure to cigarette smoke<sup>3</sup>

1. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Non-Small Cell Lung Cancer V.X.20XX. © National Comprehensive Cancer Network, Inc. 20XX. All rights reserved. Accessed [Month and Day, Year]. To view the most recent and complete version of the guideline, go online to NCCN.org.
2. Reference 2
3. Reference 3

# NCCN Mentioning in Subject Lines and Preheader Text

## **Email Subject Lines:**

Mention of “NCCN” use NCCN

Mention of “NCCN Guidelines” use NCCN Guidelines®

## **Preheader Text (always use the first mention):**

Mention of “NCCN” use National Comprehensive Cancer Network® (NCCN®)

Mention of “NCCN Guidelines” use NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®)

# The Proper Method for Referencing and Adapting NCCN Guidelines

## ***Proper citing when referencing:***

Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Guideline Name V.X.202X. © National Comprehensive Cancer Network, Inc. 202X. All rights reserved. Accessed [Month and Day, Year]. To view the most recent and complete version of the guideline, go online to NCCN.org.

## ***Proper citing when adapting an NCCN Figure/Algorithm:***

Adapted with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Guideline Name V.X.202X. © 202X National Comprehensive Cancer Network, Inc. All rights reserved. The NCCN Guidelines® and illustrations herein may not be reproduced in any form for any purpose without the express written permission of NCCN. To view the most recent and complete version of the NCCN Guidelines, go online to NCCN.org. The NCCN Guidelines are a work in progress that may be refined as often as new significant data becomes available.

# No Warranties Statement and NCCN Abbreviation

Please include on all materials that reference NCCN or the NCCN Guidelines:

- **No Warranties Statement**

NCCN makes no warranties of any kind whatsoever regarding their content, use or application and disclaims any responsibility for their application or use in any way.

- **Accepted Abbreviations**

NCCN = National Comprehensive Cancer Network<sup>®</sup> (NCCN<sup>®</sup>)

NCCN = National Comprehensive Cancer Network

NCCN, National Comprehensive Cancer Network<sup>®</sup> (NCCN<sup>®</sup>)

NCCN, National Comprehensive Cancer Network

# NCCN Global/International Permissions

## How does Global differ from US?

### Pricing

- Global Fee Structure
- International Fee Structure

### Territory

- International (single country or multiple countries not including US)
- Global (US and other areas of distribution)
- Global or Specific Country written in agreement under territory

### Translations

- Translation verification of content OR Full translation of NCCN content

# Common Submission Issues & How to Avoid Them

## Use Correct Trademarking

- Please have the correct NCCN reference statements and written identity completed for draft submission.

## Follow the Process

- Please upload your materials directly to the Permissions Request Form. Please do not submit a Request Form if your draft materials are not ready yet.

## Complete the Request Form Accurately and in Detail

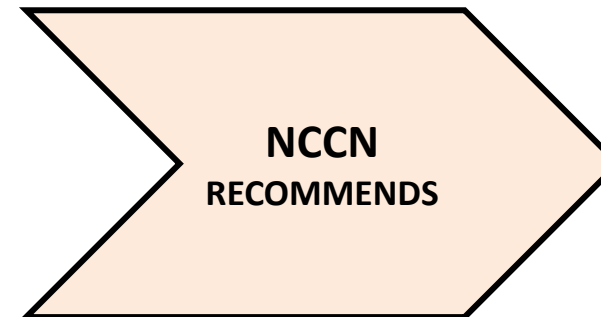
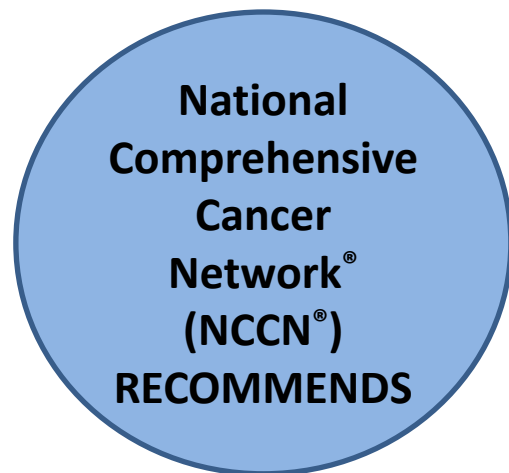
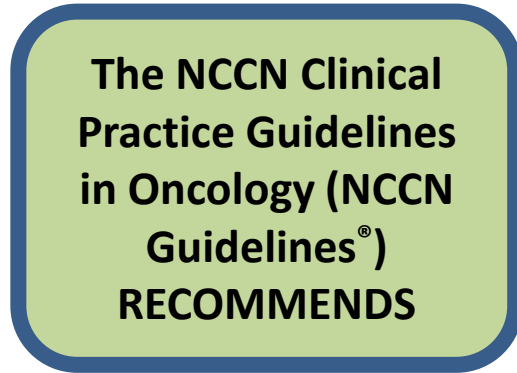
- Please complete all fields on the Permissions Request Form.
- Please check all Guidelines being referenced, area of distribution and how many copies/views-these are most helpful for quoting purposes.

## Escalate Requests Appropriately

- If you do not receive responses within the stated timeframe, please email the contact you are working with directly on the request and cc: [permissionsrequest@nccn.org](mailto:permissionsrequest@nccn.org).



# “Seal of Approval” Artwork **NOT PERMITTED**



# “Seal of Approval” Artwork

## PERMITTED

NCCN  
RECOMMENDS

Generic (brand name) is an NCCN Category 2a Preferred option for patients with renal cancer....

NCCN GUIDELINES®  
RECOMMENDS

The NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) recommend...

NCCN GUIDELINES®  
RECOMMENDS

Generic (brand name) drug is an NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) preferred option....

The National Comprehensive Cancer Network® (NCCN®)

Generic drug (brand name) is an NCCN Category 2A option....

# Proximity of NCCN Name to the Brand Name

- The NCCN name cannot be located directly next to the Brand name/logo
- The NCCN name cannot be located directly above or below the Brand name/logo
- There must be a significant amount of space between the location of the NCCN name and the Brand name/logo
- Brand logo must be removed from slides that contain NCCN content, only

**Example 1:** If the brand name/logo is located at the top of the material(s), the NCCN mention must be located close to the middle of the material(s) or further **down** the page.

**BRAND NAME/DRUG LOGO**

**National Comprehensive  
Cancer Network® (NCCN®)  
RECOMMENDED**

Generic name (Brand) is an NCCN Recommended first line therapy option for breast cancer

**Example 2:** If the brand name/logo is located close to the middle of the material(s), the NCCN mention must be located at the very bottom of the page or close to the top of the page. If NCCN is close to the top of the page, please make sure it does not appear as a title to the material(s).

**National Comprehensive Cancer Network® (NCCN®) RECOMMENDED**  
Generic name (Brand) is a Recommended first-line therapy option for breast cancer

**BRAND NAME/DRUG LOGO**

This diagram illustrates a page layout where the NCCN recommendation text is positioned at the top. It consists of two stacked orange boxes with dark blue borders. The top box contains the text "National Comprehensive Cancer Network® (NCCN®) RECOMMENDED" in bold black font. The bottom box contains the text "Generic name (Brand) is a Recommended first-line therapy option for breast cancer" in a regular black font. Below these boxes, centered on the page, is the text "BRAND NAME/DRUG LOGO" in a large, bold, blue font.

**National Comprehensive Cancer Network® (NCCN®) RECOMMENDED**  
Generic name (Brand) is a Recommended first-line therapy option for breast cancer

**BRAND NAME/DRUG LOGO**

This diagram illustrates a page layout where the NCCN recommendation text is positioned at the bottom. It consists of two stacked orange boxes with dark blue borders. The top box contains the text "National Comprehensive Cancer Network® (NCCN®) RECOMMENDED" in bold black font. The bottom box contains the text "Generic name (Brand) is a Recommended first-line therapy option for breast cancer" in a regular black font. Above these boxes, centered on the page, is the text "BRAND NAME/DRUG LOGO" in a large, bold, blue font.

# Use of Checkmarks in Materials

- ✓ Any artwork that contains checkmarks/symbols and comes across as an NCCN logo/stamp or NCCN “Seal of Approval” will not be permitted.
- ✓ Checkmarks located directly next to the NCCN name may denote a seal of approval and are not permitted
- ✓ Checkmarks located directly next to your company’s brand name/logo are not permitted
- ✓ Checkmarks *may* be utilized as bullet points in charts and diagrams, but the brand name, brand logo, or NCCN name may not be included in the diagram and/or chart.
- ✓ **Key Takeaway:** Try your best to avoid the use of any symbols or checkmarks in the materials that you submit to NCCN. This will ensure a timely review with fewer revisions. If you are using checkmarks and symbols, we will provide you with feedback if necessary.

# Citing a Watermarked Discussion Section

- Citing a watermarked Discussion section is *not* permitted if the text directly contradicts what is in the algorithm section of the Guidelines.
- Citing watermarked Discussion sections is generally permissible in the following scenarios:
  - The information is not in the algorithm portion of the Guidelines because it is expanding on Guideline recommendations or providing additional information.
  - The information is consistent with the current algorithm portion of the Guidelines.
- Clinical review is still required, and you may be asked to make edits.

**NCCN** National Comprehensive Cancer Network® **NCCN Guidelines Version 4.2024 Prostate Cancer**

**NCCN Risk Groups**

The NCCN Guidelines have, for many years, incorporated a risk stratification scheme that uses a minimum of stage, Gleason grade, and PSA to assign patients to risk groups. These risk groups are used to select the appropriate options that should be considered and to predict the probability of biochemical recurrence after definitive local therapy.<sup>92</sup> Risk group stratification has been published widely and validated, and provides a better basis for treatment recommendations than clinical stage alone.<sup>93,94</sup>

- Grade Group 1: Gleason score ≤6; only individual discrete well-formed glands
- Grade Group 2: Gleason score 3+4=7; predominantly well-formed glands with lesser component of poorly formed/fused/cribriform glands
- Grade Group 3: Gleason score 4+3=7; predominantly poorly formed/fused/cribriform glands with lesser component of well-formed glands
  - For cases with >95% poorly formed/fused/cribriform glands or lack of glands on a core or at radical prostatectomy, the component of <5% well-formed glands is not factored into the grade.
- Grade Group 4: Gleason score 4+4=8; 3+5=8; 5+3=8
  - Only poorly formed/fused/cribriform glands; or
  - Predominantly well-formed glands and lesser component lacking glands (poorly formed/fused/cribriform glands can be a more minor component); or
  - Predominantly lacking glands and lesser component of well-formed glands (poorly formed/fused/cribriform glands can be a more minor component)
- Grade Group 5: Gleason score 9–10; lack gland formation (or with necrosis) with or without poorly formed/fused/cribriform glands
  - For cases with >95% poorly formed/fused/cribriform glands or lack of glands on a core or at radical prostatectomy, the component of <5% well-formed glands is not factored into the grade.

A new prostate cancer grading system was developed during the 2014 International Society of Urological Pathology (ISUP) Consensus Conference.<sup>95</sup> Several changes were made to the assignment of Gleason pattern based on pathology. The new system assigns Grade Groups from 1 to 5, derived from the Gleason score.

Many experts believe that ISUP Grade Groups will enable patients to better understand their true risk level and thereby limit overtreatment. The new Grade Group system was validated in two separate cohorts, one of >26,000 patients and one of 5880 patients, treated for prostate cancer with either radical prostatectomy or radiation.<sup>96,97</sup> Both studies found that Grade Groups predicted the risk of recurrence after primary treatment. For instance, in the larger study, the 5-year biochemical recurrence-free progression probabilities after radical prostatectomy for Grade Groups 1 through 5 were 96% (95% CI, 95–96), 88% (95% CI, 85–89), 63% (95% CI, 61–65), 48% (95% CI, 44–52), and 26% (95% CI, 23–30), respectively. The separation between Grade Groups was less pronounced in the radiation therapy (RT) cohort, likely because of increased use of neoadjuvant/concurrent/adjuvant androgen deprivation therapy (ADT) in the higher risk groups. In another study of the new ISUP Grade Group system, all-cause mortality and prostate cancer-specific mortality were higher in patients in Grade Group 5 than in those in Grade Group 4.<sup>98</sup> Additional studies have supported the validity of this new system.<sup>99–104</sup> The NCCN Panel has accepted the new Grade Group system to inform better treatment discussions compared to those using Gleason score. Patients remain divided into very-low-, low-, intermediate-, high-, and very-high-risk groups.

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*Example watermarked discussion section*

# Materials with Brand Name Drugs Awaiting FDA Approval

- NCCN can only review materials containing brand name drugs awaiting FDA approval if references to NCCN are general.
- Any materials containing NCCN content connected directly to a brand name drug (category designations, recommendations, etc.) *will not* be reviewed by NCCN.
- You are welcome to resubmit your materials when FDA approval is given and NCCN guidelines are updated. Please note that reviews are done on a first-come, first-served basis and we are unable to expedite requests.



# Press Releases

- NCCN neither reviews nor approves external press releases announcing the inclusion of tests, agents, and/or therapies listed within the NCCN Guidelines.
- It is incumbent on all to use due diligence in ensuring accuracy in both content and attribution.
- Please adhere to the [following guidance](#) on how to reference NCCN Content in a press release.

# Other Helpful Hints

- Guideline Version Updates: Please update your materials as NCCN Guidelines update.
- If you are submitting several materials using the same language, you can submit them together under one Permissions Request Form.
- If timing precludes submitting together, submit a new Permissions Request Form for each draft.
  - Annotate phrases and citations in the new piece referencing formerly approved material by indicating the previous Request #.
- Reply to the most recent communication emailed from NCCN to maintain the chain of communication.
- Please include your Permission Request # in all communications.
- Please make all changes indicated by NCCN; these are required revisions, not suggestions.
- NCCN processes Requests on a first-in, first-out basis; we cannot accommodate “rushed” or “expedited” submissions.
- You may continue to submit your material(s) under the original email thread in which the materials were previously approved if you’re submitting minor updates to the content and you have a current Commercial Licensing agreement in place.

# Frequently Asked Questions (FAQs)

## Permission to Cite or Use NCCN Content FAQs

COVID-19 Resources

Treatment by Cancer Type

Detection, Prevention,  
and Risk Reduction

Supportive Care

Specific Populations

Guidelines for Patients

Guidelines With Evidence  
Blocks

NCCN Framework For  
Resource Stratification

Harmonized Guidelines

International Adaptations  
and Translations

NCCN Mobile Apps

Guidelines Process +

Guidelines Panels and  
Disclosure +

Permission to Cite or Use  
NCCN Content

Recently Updated  
Guidelines

If you have any questions regarding permission to use NCCN Content or are interested in purchasing an annual license, please e-mail [permissionrequest@nccn.org](mailto:permissionrequest@nccn.org).

[Requesting Permission](#) | [Referencing](#) | [Journal Articles](#) | [Clinical Review/Feedback](#) | [Pricing](#) | [Process Timing](#) | [Penalties](#) | [General NCCN Questions](#)

### Requesting Permission

#### 1. How do I access the Permissions Request Form?

Please log in to NCCN.org, or create an account if you do not already have one. After logging in, go to NCCN.org/permissions if you are not automatically directed back to this page. The Permissions Request Form will appear at the bottom of the page with your contact information pre-filled into the form.

#### 2. Do I need to include my materials when submitting the Permission Request Form?

Yes. Please do not submit a request for materials review without uploading your materials to the **Permissions Request Form**. If we receive a request without any materials attached, we will ask that you please submit a new Permissions Request Form, and the original request will be voided.

#### 3. I cited a version of the NCCN Guidelines that was updated after our Permission Request was approved. Do I need to submit my materials again for NCCN Review?

Yes. The approved materials should be updated with the current Guidelines version number and submitted again. If the content of the materials was impacted by the Guidelines update, it should be revised to reflect the current content of the Guidelines. All changes to the previously approved materials should be explicitly called out in the updated submission.

#### 4. If the algorithm stays the same in a specific guideline, but the guideline version updates, do we need to update our materials to reference the latest version, even if no other changes occurred?

NCCN Website  
contains 48 FAQs  
related to:



National Comprehensive  
Cancer Network<sup>®</sup>

# NCCN Commercial Licensing and Permissions

Website: [NCCN.org/permissions](https://www.nccn.org/permissions)

Email: [permissionrequest@nccn.org](mailto:permissionrequest@nccn.org)