The ideas and viewpoints expressed in this commentary are those of the author and do not necessarily represent any policy, position, or program of NCCN.
define best practices in the United States and many other parts of the world. The concepts of evidence-based recommendations, whenever possible; development by multidisciplinary teams of experts; and assurance of patient and physician choice have been central to the NCCN Guidelines process over the years. Being a part of this process has been an honor and a privilege!”

Al B. Benson III, MD (2011)
“Rodger Winn’s contributions to NCCN and to the concept of guidelines development, administrative infrastructure, and methodology in general are immeasurable. His vision clearly helped to fill a void by cultivating an essential tool to assist clinicians’ efforts to provide timely, state of the art, evidence-based care for patients with cancer. The guideline derivative products, including the Drugs & Biologics Compendium, also have been influential in advancing the most effective treatment options for patients. As someone who was a recipient of Rodger’s mentorship as the first NCCN Guidelines Panels were organized, it has been a great honor to be designated an NCCN Winn Awardee.”

Robert J. Morgan, MD (2013)
“The National Comprehensive Cancer Network has grown to be an internationally recognized organization whose influence has continued to improve the medical care of patients with cancer. At the beginning of the NCCN Guidelines program, I don’t think that anyone foresaw the great impact that these efforts would have on cancer care. It is largely through the foresight of Rodger Winn, MD, and Bill McGivney, PhD, that the guidelines have attained the prominence and influence that make them a major source for referencing the best in care. The entire NCCN staff works very hard to maintain the excellence of the guidelines process. It has been and continues to be one of the highlights of my career to have had the privilege to work with such a distinguished team of physicians and NCCN staff colleagues. I foresee that the continued efforts to improve the guidelines and the process will result in increased international recognition, importance, and improvements in the lives of our patients.”

Paul F. Engstrom, MD (2014)
“As a member of Rodger Winn’s inaugural Guidelines Steering Committee and as Chair of the original NCCN Guidelines Panel for Colon, Rectal, and Anal Cancers writing committee, I have witnessed the growing influence and acceptance of NCCN Guidelines. Developing global guidelines was a challenges because a multidisciplinary team consisting of faculty from the original 13 NCCN Member Institutions had to actually agree on complex treatment plans for patients referred to our respective institutions. As the development process has become more sophisticated, the guidelines have become the standard of treating cancer throughout the United States and in many foreign countries. In addition, the guidelines have also become the basis for reimbursement by CMS for chemotherapy of advanced cancer.

I take great personal pride in the fact that the NCCN Guidelines provide an ever increasing opportunity for NCCN to improve patient care and influence physician behavior. Simply stated, the time and effort that I devoted to these NCCN-related projects is one of the most satisfying and rewarding accomplishments in my career in oncology.”
Daniel G. Coit, MD (2015)

“I can recall quite vividly the initial face-to-face meeting of our NCCN Melanoma Panel, now some 20 years ago. Clinical experts from around the country had enthusiastically agreed to gather and create a basic framework to guide the treatment of patients with melanoma, from the earliest to the most advanced stages. As would be expected with such a gathering of highly opinionated experts, the tenor of that initial meeting was spirited and often quite contentious. Ultimately, we achieved consensus and made progress under the steady helm and perceptive, calm, intelligent leadership of our first Panel Chair, Alan Houghton. Rodger Winn was also present at that and many subsequent meetings, gently guiding the process, but not the content, of the discussions, to ensure the development of a consistent high-quality product across all disease sites. When we were on the verge of getting lost in passionate debates over minutiae, a quiet word or two from Rodger would always return our focus to the big task at hand.

I suspect that few, if any, of us were really aware at the time of how nationally and internationally impactful these guidelines would eventually become, as the initial vision of the NCCN founders has become a reality over the ensuing 2 decades. I think that now, with the perspective of time, many on the NCCN Melanoma Panel have come to realize that our work at NCCN is as important as anything we have ever accomplished outside of the clinical practice of medicine. Certainly for me, personally, I will always consider being named as the 2015 recipient of the Rodger Winn award, on the 20th anniversary of that first meeting, as one of the single greatest honors of my career.”