## Supplement 2. Eligibility Criteria

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<th>Study Characteristic</th>
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| Population           | Adults (≥18 years of age) with diabetes, hypertension, hyperlipidemia, or combinations of these chronic medical conditions. In mixed samples, ≥ 80% of the sample must be selected for one of the 4 target conditions.  
Outpatients in a primary care setting or specialty clinic/practice. Studies with patients enrolled during a hospitalization if the majority of the intervention is delivered on an outpatient basis. | Gestational diabetes                         |
| Intervention         | Intervention must involve an RN or LPN functioning beyond the usual scope of practice, which must include adjustment of medications.  
Activities must be based on a written protocol that specifies the scope of practice and is designed to support longitudinal care for chronic conditions.  
Interventions may be delivered by telephone or face-to-face visits. | Care plans  
Protocols limited to telephone triage  
Telecare limited to symptom or vital sign monitoring and information support  
Disease management protocols limited to educational interventions or assessment of treatment response |
<p>| Comparator           | Usual outpatient care or other quality-improvement strategy                                                                                                                                                    | None                                          |</p>
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| **Outcome**          | KQ 1: Study must report at least 1 of the following relevant outcomes:  
- Nursing staff experience using validated measures  
- Treatment adherence to medication or behavioral/lifestyle recommendations  
- Laboratory or physiological markers of health status such as HbA1c and BP (prioritizing measures associated with accepted indicators of quality of care)  
- Nationally recognized performance metrics related to the conditions of interest (e.g., foot exams in diabetes or proportion of patients meeting a treatment goal)  
- Utilization of medical resources (prioritizing hospitalizations or emergency department visits related to the condition) or health care costs (prioritizing total, inpatient and primary care outpatient costs)  
KQ 2: Fidelity to the nurse-managed protocol  
KQ 3: Adverse effects, particularly drug-related adverse effects including drug-drug interactions | No relevant outcomes |
| **Timing**           | Outcomes reported ≥3 months from randomization and initiation of intervention | Outcomes reported <3 months from randomization and initiation of intervention |
| **Setting**          | Outpatient setting  
Studies conducted in North America, Western Europe, Australia/New Zealand, and selected Caribbean countries  
<p>| Care model where the intervention is delivered primarily in the patient’s home or community setting (e.g., community centers, workplace settings) |</p>
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| Study design        | Study designs recommended by the Cochrane Effective Practice and Organization of Care Group:  
• Patient or cluster randomized controlled trials  
• Nonrandomized cluster controlled trials: experimental studies in which practices or clinicians are allocated to different interventions using a nonrandom method  
• Controlled before-and-after studies: studies in which observations are made before and after the implementation of an intervention, both in an intervention group and a control group  
• Interrupted time-series designs: studies that use observations at multiple time points before and after an intervention. Interrupted time series must have at least 3 measurement points prior to and after the intervention is begun. | Cross-sectional studies and other observational study designs not specifically listed as “included” study designs |
| Publications        | English-language only  
Published from 1980 to present<sup>b</sup>  
Peer-reviewed, full publication | Not English language  
Published before 1980  
Abstract only |

<sup>a</sup> Rationale is to include economically developed countries with sufficient similarities in health care system and culture to be applicable to U.S. medical care.

<sup>b</sup> Rationale is that prior to 1980, nursing education differed importantly from contemporary training; e.g., physical examination was not taught.

KQ=key question; HbA1c=glycosylated hemoglobin; LPN=licensed practical nurse; RN=registered nurse