Table F-6. Key Question 2 studies with a second outcome

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** |
| Banait et al., 20032 | G1: Mailed guidelines (increase reach)  G2: Educational outreach (Multicomponent) | Behavior (applicable for clinicians)  Findings at open access endoscopy. Number of endoscopies performed. | 7 mths before and after intervention  Chart | G1: 56 G2: 57 (ITT analysis) | Preintervention Major findings G1: 37.4% G2: 31.1% Minor findings:  G1: 24.8% G2: 29.4% Normal G1: 37.8% G2: 39.5%  Postintervention Major Findings: G1:35.5% G2: 31.7% Minor findings G1: 25.4% G2: 24.9% Normal findings: G1: 39.1% G2: 43.4% | No change in the relative proportions of major, minor, and normal findings pre- and post- for either group of practices. | NR  Non-parametric |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Becker et al., 20084 | G1: Mailed guideline (Increase clinician reach)  G2: Guideline implementation (multicomponent, clinicians only)  G3: Guideline implementation and motivational counseling directed at patient (multicomponent, clinicians and patients) | Health-related decisions or behavior (applicable for general public/patients)  Overall physical activity. Measured using the FQPA. The FQPA has satisfactory psychometrical properties and allows a calculation of weighted MET hours per week. | baseline, 6 mth, 12 mth  self-report | Patient N at baseline = 1378 G1: 479 G2: 489 G3: 410  N at 6 mths=1261 G1: 450 G2: 435 G3: 376  N at 12 mths=1211 G1: 425 G2: 421 G3: 365 | 6 months G1: M =33.51 G2: M=36.47 G3: M=36.29  12 months G1: M=42.88 G2: M=46.43 G3: M=45.93 | 6 months (author provided odds ratios for groups compared with control only) Mean diff (95% CI) G1 vs. G2: 2.96  (-1.63/7.55) G1 vs. G3: 2.78  (-1.78/7.35) G2 vs. G3: 0.177\*  p=NR  12 months Mean difference (95% CI) G1 vs. G2: 3.55  (-1.45/8.54) G1 vs. G3: 2.52  (-2.48/7.50) G2 vs. G3: 1.036\*  p=NR | Sex, age, fear avoidance, physical activity, and number of days in pain during previous 6 months  Multilevel mixed modeling accounting for clustering of data on practice level |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Bekkering et al., 20055,6 | G1: Received guidelines by mail (increase reach)  G2: Received guidelines + active training strategy (multicomponent) | Clinical outcomes (applicable for general public/patients)  Physical functioning (QBPDS), which consists of 20 activities of daily living. Each activity is scored on a 6-point scale ranging from 0 (“no trouble”) to 5 (“unable to”), and the total score ranges from 0 (“no dysfunction”) to 100 (“maximum dysfunction”). | Baseline, 6, 12, 26, and 52 weeks after baseline  Self-report | Baseline Overall=511 patients G1: 259 patients G2: 256 patients 6 weeks Overall=511 patients G1: 259 patients G2: 256 patients 12 weeks Overall=511 patients G1: 259 patients G2: 256 patients 26 weeks Overall=511 patients G1: 259 patients G2: 256 patients 52 weeks Overall=511 patients G1: 259 patients G2: 256 patients | Mean scores and interquartile ranges Baseline G1: 40.5 (26.3-55.8) G2: 38.0 (26.5-50.5) 6 weeks G1: 23.5 (11.0-37.8) G2: 24.0 (13.0-40.0) 12 weeks G1: 17.5 (6.0-30.8) G2: 20.0 (7.0-32.8) 26 weeks G1: 11.0 (4.0-29.0) G2: 16.0 (5.0-32.0) 52 weeks G1: 13.0 (4.8-29.0) G2: 17.0 (4.6-32.0) | Adjusted absolute differences (G2-G1):  6 weeks:  1.96 (-1.44 to 5.37)  12 weeks:  2.83 (-0.66 to 6.31)  26 weeks:  4.00 (0.68 to 7.33)  52 weeks:  3.55 (-0.25 to 7.35) | Sex, Previous episode of back pain, duration of current episode of back pain, pain and coping inventory relaxation subscale. Clustering of practices, physical therapists, patients, time points.  Multilevel modeling; Wald chi-square tests |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Bishop and Wing, 200641 | G1: Control (not abstracted)  G2: Physician only (increase reach)  G3: Physician and patient (multicomponent) | Behavior (applicable for clinicians)  Guideline-concordant treatment advice for 5-12 week post injury period. The compulsory WCB physician report forms were collected and scored. Dichotomous measure of 1 = presence of concordant/ discordant behavior. | Once at 5-12 weeks  Workers’ Compensation Board reports | 5-12 weeks Overall N=448 G2: 154  G3: 145 | Concordant Supervised exercise program: G2: 19% G3: 18% Return to work G2: 24% G3: 23% Ref to Interdisc. Program: G2: 4% G3: 0% Discordant behavior Physiotherapy G2: 41% G3: 42%  NOTE: Authors did not provide any figures, tables, or data for the >12 week measures. Only state no change seen in the recommended use of ongoing supervised exercise programs. | Only compared control to each condition Supervised exercise G2 vs. G3: 1%\*, p=NR Return to work G2 vs. G3: 1%\*,p=NR  Referred to Interdisc program G2 vs. G3: 4%\*,p=NR Physiotherapy G2 vs. G3: 1%\*, p=NR  NOTE: Authors did not analyze between groups difference from each other. Only state no change seen in the recommended use of ongoing supervised exercise programs. | None  Chi-square |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Campbell et al., 20047 | G1: Control (not abstracted)  G2: LHA (increase motivation)  G3: TPV (multicomponent)  G4: TPV and LHA (multicomponent) | Health-related decisions or behavior (applicable for general public/patients)  Physical activity. 16-item checklist assessed frequency of different types of activity, with response options of “don’t do”, “1-3 times/month” “1-2/week” “3-4/week” “5 or more/week” Total physical activity was the sum of all 16 items. Moderate-vigorous recreational activity was calculated by summing responses for 11 of the items (walking, jogging, swimming, biking, sports, etc.). PA was then calculated in terms of MET hours per week. MET hours/week calculated by multiplying frequency time duration (converted | Baseline and 1 yr followup  Self-report | N=587  G2: 123 G3: 159 G4: 176 | Recreational activity MET Baseline G2: 10.5 (0.90) G3: 9.5 (0.80) G4: 9.7 (0.76)  Followup G2: 10.6 (0.70) G3: 10.9 (0.61) G4: 9.7 (0.60)  % meeting PA recommendations Baseline G2: 45.5 G3: 41.1 G4: 40.9  Followup G2: 43.9 G3: 46.3 G4: 45.9 | Recreational activity MET Baseline G2 vs. .G3: 1.0\* G2 vs. G4: 0.8\* G3 vs. G4: 0.2\* ns, p=0.80  Followup G2 vs. G3: 0.3\* G2 vs. G4:0.9\* G3 vs. G4: 1.2\* p=0 .04 for TPV intervention versus control Baseline G2vsG3: 4.4\* G2vsG4: 4.6\* G3vsG4: 0.2\* ns, p=0.68  Followup G2vsG3: 2.4\* G2vsG4: 2.0\* G3vsG4: 0.4\* p=0.04 for the TPV “intervention main effect” (see outcome 1) | Demographics  regression models |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Campbell et al., 20047 (continued) |  | to hours per week) by the MET value for each activity and summing across items. |  |  |  |  |  |
| Carney et al., 20058 | G1: Mailed health information (increase reach)  G2: Telephone counseling (increase motivation) | Health-related decisions or behavior (applicable for general public/patients)  Mean time interval between screening exams (measured in months). | Designated time interval for up-to-date status was within 14 months of the intervention date  Objective measurement; NIH mammography registry | Overall N=258 G1: 126 G2: 132 | M (SD) between 1st and 2nd intervention G1: 30.3 (15.9) G2: 25.7 (14.4)  M (SD) 15 months after 2nd intervention G1: 33.2(19.4) G2: 25.8 (16.4) | Difference in groups between 1st and 2nd intervention, 4.6\*, p=0.02  Difference in groups 15mth after 2nd intervention=7.4\*, p=0 .001 | NR  t-test |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Christakis et al., 20069 | G1: Usual care (not abstracted)  G2: Parental content Alone (increase reach)  G3: Provider notification alone (not abstracted)  G4: Parental content and provider notification (multicomponent) | Health-related decisions or behavior (applicable for general public/patients)  Patients were asked about their preventative practices. In some cases, there was >1 question for each behavior. For example, for smoking, they asked whether patient had quit, had set a quit date, or had contacted the tobacco quit line, all of which were associated with successful smoking cessation. | 2 to 4 weeks after the scheduled well-child visit  self-report | Unclear | IRR (95%CI)  G2: 1.05(1.01-1.09) G4: 1.07 (1.03-1.11) | G4 and G2 significantly differed from G1 (reference) G2 vs. G4: 0.02 | NR  Poisson Regression |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Davis et al., 200410 | G1: Control - guidelines by mail (increase reach)  G2: Intermediate (multicomponent)  G3: High intervention (multicomponent) | Clinical outcomes (applicable for general public/patients)  Epilepsy-specific QOL.  Mastery = measures their sense of mastery of their illness Impact = the impact of epilepsy on patients’ lives | Baseline and 12 month followup  Self-report | Patients at Baseline:  Overall:1,133  G1: 370 G2: 364 G3: 399  Patients at followup Overall=811 G1: 255 G2: 269 G3: 287 | Baseline Mastery G1: 20.1 (19.4/20.8) G2: 20.2 (19.7/20.7) G3: 19.9 (19.2/20.7)  Impact G1: 28.4 (27.1/29.6) G2: 29.1 (28.1/30.2) G3: 27.8 (26.0/29.7)  12mth followup Mastery G1: 20.3 (19.7/20.8) G2: 20.5 (19.9/21.0) G3: 19.7 (19.1/20.4)  Impact G1: 28.8 (27.6/29.9) G2: 29.4 (28.3/30.5) G3: 28.1 (26.3/30.0) | No significant differences in scale scores were seen across the arms at baseline or after the intervention Mastery G1 vs. G2: 0.1\* G1 vs. G3: 0.2\* G2 vs. G3: 0.3\* p=NR Impact G1 vs. G2: 0.7\* G1 vs. G3: 0.6\* G2 vs. G3: 1.3\* p=NR  12 month followup Mastery G1 vs. G2: 0.2\* G1 vs. G3: 0.6\* G2 vs. G3: 0.8\* p=NR Impact  G1 vs. G2: 0.6\* G1 vs. G3: 0.7\* G2 vs. G3: 1.3\* p=NR | Deprivation, age, sex, and the training status of the practice  t tests |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Elder et al., 2005;12 200642 | G1: Culturally targeted print-materials + activity inserts (increase reach)  G2: Tailored print materials + activity inserts + supporting materials (multicomponent).  G3: Tailored print materials + in-person promotora (multicomponent) | Clinical outcomes (applicable for general public/patients)  Total dietary fiber (g)  12 months  Total fat  Energy  Total saturated fat  Soluable dietary fiber  Insoluable dietary fiber  Total carbohydrates  Glucose  Fructose  Sucrose | Baseline,12 week, and 12 month followups  Self-report face-to-face interview | 12 weeks  Followup N=313 G1: 107 G2: 99 G3: 107  12 months  N=281 G1:98 G2: 90 G3: 93 | 12 weeks  Adjusted Mean at Time 2 for total dietary fiber G1: 15.6g G2: 17.2g G3: 16.1g  12 months  Adjusted mean, in grams of total fat at 12 weeks minus grams at 12 months (p=0.028)  G1: 49.1-51.9=-2.8  G2: 49.8-45.3=4.5  G3: 43.1-50.4=7.3  Adjusted mean, in grams of energy at 12 weeks minus kilocalories at 12 months (p=0.018)  G1: 1430.5-1459.6  =-26.1 G2: 1420.6-1352.9  =-67.7  G3: 1288.7-1453.7  =-165 | 12 weeks,  dietary fiber  G1 vs. G2: 1.6\* G1 vs. G3: 0.5\* G2 vs. G3: 1.1\* p=NR, but not significant  12 months  Difference of the differences between values at 12 months compared to 12 weeks  Energy (p<0.03)  Total fat (p<0.03)  Fructose (p<0.02)  Total saturated fat  (p<0.07)  Differences *among the 3 groups* at 12 months for every outcome controlling for group main effect, time main effect, group x time interaction, and baseline level not significant  Glucose:  Group-by-time interaction was not significant but a main | baseline mean  Tukey-Kramer multiple comparison test  Mixed effects regression |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Elder et al., 2005;12 200642  (continued) |  |  |  |  | Adjusted mean, in grams of total saturated fat at 12 weeks minus grams at 12 months (p=0.043) G1: 16.5-18.4=-1.9 G2: 16.9-15.6=1.3  G3: 14.5-17.2=-2.7  Adjusted mean, in grams of fructose at 12 weeks minus grams at 12 months (p=0.007)  G1: 19.0-19.7=-0.7 G2: 22.7-18.2=4.5  G3: 17.0-19.0=-2.0 | effect was detected (p<0.03). Promotora condition had a lower mean (16.8) than the tailored group (19.3) based on a Tukey’s test. |  |

Table F-6. Key question 2 studies with a second outcome (continued)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Feldstein et al., 200613 | G1: Usual care (not abstracted)  G2: EMR reminder (increase reach for clinicians)  G3: EMR reminder and patient reminder (via letter with educational materials (multicomponent) | Health-related decisions or behavior (applicable for general public/patients)  Percent receiving Bone mineral density measurement via DXA | Within 6 months of intervention  Electronic data provided by referral site | G1: 101 G2: 101 G3: 109 | G1: .9% G2: 23.8% G3:22.9% | Difference:  G2 vs. G1 22.9 95% CI: .39 (.28-.50) p=NR G3 vs. G1 22 95% CI: .31 (.21-.43) p=NR G3 vs. G2 -.9 95% CI:NR | Fracture type, age, weight less than 127 pounds, osteoporosis diagnosis, and Charlson co-morbidity index.  General linear modeling using treatment group, fracture type, age, weight, osteoporosis diagnosis and Charlson Comorbidity Index indicators. Models include independent variables significant in univariate analyses at p<.10. Continuous outcome measures change scores regressed on the baseline values and indicators of treatment |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Feldstein et al., 200613 (continued) |  |  |  |  |  |  | groups. Logistic regression used for unadjusted results |
| Gattellari et al., 200514 | G1: Leaflet (increase reach)  G2: Video (increase reach)  G3: Booklet (increase reach) | Behavioral intentions to use or apply the evidence  Propensity to undergo screening during the next 12 months (5-point likert ranging from “definitely not want”, “unlikely to want”, “not mind”, “probably want” to “definitely want” | 21 days after receiving information (range 15-31)  Self-report | N=405 | Posttest: n (%) G1:  Definitely not want: 3 (2.2) Unlikely to want: 17 (12.5) Not mind: 28 (20.6) Probably want: 46 (33.8) Definitely want: 42 (30.9) G2:  Definitely not want: 6 (4.3) Unlikely to want: 17 (12.3) Not mind: 21 (15.2) Probably want: 41 (29.7) Definitely want: 53 (38.4) G3:  Definitely not want: 6 (4.6) Unlikely to want: 18 (13.7) Not mind: 26 (19.8) Probably want: 44 (33.6) Definitely want: 37 (28.2) | Absolute difference in propensity to go screening: G2-G1:  definitely not want: +2.1%\* be unlikely to want: -0.2%\* not mind: -5.4%\* probably want: -4.1%\* definitely want: +7.5%\*  G3-G1: definitely not want: +2.4%\* be unlikely to want: +1.2%\* not mind: -0.8%\* probably want: -0.2%\* definitely want: -2.7%\*  any difference between G1, G2, G3: p=0.31 | None  McNemar’s chi-squared |

Table F-6. Key question 2 studies with a second outcome (continued)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Hagmolen et al., 200815 | G1: Guideline dissemination (increase reach)  G2: Guideline dissemination + educational program (increase ability)  G3: Guideline dissemination + educational program + individualized treatment advice based on airway responsiveness and symptoms (multicomponent) | Clinical outcomes (applicable for general public/patients)  Changes in asthma symptom scores  Total Symptom Score: Mean score per day. Cough, wheeze, and shortness of breath were scored twice daily (0=no complaints, 1=once a day, 2=more than once a day, 3=whole day) in a two week diary. Range = 0-18. Calculated total symptom score, night symptom score, and the number of symptom-free days | 2-week diary ; respondents entered scores 2 times a day (morning and night) for 2 weeks  Self-report | G1: N=98 G2: N=133 G3: N=131 | Total Symptom Score: G1: M=0.9 (SE = 0.2)  G2: M=1.2 (SE= 0.2)  G3: M=1.0 (SE = 0.2)   Post-hoc analysis: G1&G2: 1.1 (SE = 0.1) G3: 1.0 (SE=0.2)  Nocturnal symptom score:  G1: M=0.3 (SE = 0.1) (difference between baseline and end of study = -0.24) G2: M=0.5 (SE= 0.1) (difference between baseline and end of study = -0.07) G3: M=0.4 (SE = 0.1) (difference between baseline and end of study = -0.15)  Post-hoc analysis: G1&G2: 1.1 (SE = 0.1) G3: 1.0 (SE=0.2) | Total Symptom Score: Difference:  G1 vs. G2: 0.3\* G1 vs. G3: 0.1\* G2 vs. G3: 0.2\* No significant differences between all 3 groups p=0 .08  Significant difference between baseline and end of study measurement in Groups 1 (-.6, p<.05) and G3 (-.5, p<0.05)  Post-hoc analysis: G1&G2 vs. G3: 0.1\* Significant difference between groups p=0 .6  Significant difference between baseline and end of study measurement in Groups 1&2 (-.4, p<.05) and G3 (-.5, p<0.05)  Nocturnal symptom score:  G1 vs. G2: 0.2\* G1 vs. G3: 0.1\* G2 vs. G3: 0.1\* | NR  Mixed model ANOVA analyses |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Hagmolen et al., 200815 (continued) |  |  |  |  |  | Significant overall treatment effect for all 3 groups. p=0.02.   Post-hoc analysis G1&G2 vs. G3: 0.1\* No significant difference p=0.2 |  |
| Jain et al., 200616 | G1: Passive intervention- guidelines by mail (increase reach)  G2: Active intervention (multicomponent) | Clinical outcomes (applicable for general public/patients)  Glycemic control Measured 3 different ways:  Daily average glucose % of ICU stay with glucose between 4.4-6.1 mmol/L Hyperglycemic index above 6.1 | Baseline and 12 month followup  Observation | Practice Overall=58 ICUs randomized as 50 clusters G1: 25 clusters G2: 25 clusters  Patients Baseline Overall=623 G1: 298 G2: 325 Followup Overall=612 G1: 305 G2: 307  Note: patients not the same at baseline and followup. Authors took a cross-sectional survey at both time points. | Daily Average Glucose (raw Median with interquartile ranges) Baseline  G1:8.2 (7.2/9.5) G2: 8.1 (7.3/9.7) Followup G1: 8.1 (7.1/9.4) G2: 7.7 (6.9/8.8)  % of ICU, Median Baseline G1: 5.9 (0.0/19.0) G2: 3.4 (0.0/14.8) Followup G1: 7.7 (0.7/22.6) G2: 13.5 (3.6/27.9)  Hyperglycemic index, median Baseline G1: 2.1 (1.2/3.5) G2: 2.1 (1.3/3.8) Followup G1: 2.0 (1.1/3.4) G2: 1.7 (0.9/2.7) | Difference (G1 minus G2) in change:   Daily Average Glucose  p=.003  % of ICU p=0 .003  Hyperglycemic index p=0.003 | NR  Linear mixed model |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Kennedy et al., 200319 | G1: Control (not abstracted)  G2: Information (increase reach)  G3: Interview (increase motivation) | Knowledge about the evidence  “I fully understand what treatment options are available to me: strongly agree, agree, not sure, disagree, strongly disagree | Postconsultation  Self-report | Overall=717 G2: 244 G3: 236 | Strongly Agree: G2: 86 (35.7%) G3: 71 (30.7%) Agree G2: 101 (41.9%) G3: 120 (51.9%) Not sure G2: 27 (11.2%) G3: 20 (8.7%) Disagree G2: 23 (9.5%) G3: 17 (7.4%) Strongly disagree: G2: 4 (1.7%) G3: 3 (1.3%) | NR | Consultant sex age baseline knowledge  Ordinal regression |
| King et al., 200720 | G1: Attention control (not abstracted)  G2: Counselor via phone (increase motivation)  G3: Automated counselor via phone (increase reach) | Clinical outcomes (applicable for general public/patients)  The CHAMPS physical activity questionnaire for older adults used to supplement the PAR. Estimates of mean times per week engaged in 30 minutes or more of MOD physical activity and mean minutes per week in MOD activity can also be derived from the CHAMPS. | Baseline, 6, 12 months  Self report | N=189 G2: 66 G3: 61 | CHAMPS kcal/kg-1/day-1 (SD) Baseline G2: 1.5 (1.8) G3: 1.4 (1.5) 6 months-baseline ∆ G2: 2.1 (2.4) G3: 1.3 (2.5) 12 months-baseline ∆ G2: 2.1 (2.6) G3: 2.0 (3.0)  CHAMPS min. of MOD+ activity/week Baseline G2: 166.1 (210.9) G3: 154.0 (164.0) | Difference in ∆ scores at 6 months  CHAMPS kcal/kg-1/day-1 (SD) G2 vs. G3: 0.8\*, p=NR  CHAMPS min. of MOD+ activity/week G2 vs. G3: 78.8\*, p=NR CHAMPS days/week engaged in ≥ 30 min of MOD+ G2 vs. G3:0.5\*, p=NR   Difference in ∆ scores at 12 months  CHAMPS kcal/kg-1/day-1 (SD) G2 vs. G3=0.1\*, p=NR | Baseline levels of dependent variables Gender  ANCOVA |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| King et al., 200720 (continued) |  | CHAMPS is expected to find higher numbers than the PAR measures because it involves self-reporting of “usual activity levels” over the previous 4 week period |  |  | 6 months-baseline ∆ G2: 217.3 (252.3) G3: 138.5 (258.0) 12 months-baseline ∆ G2: 216.7 (272.2) G3: 205.0 (323.9) CHAMPS days/week engaged in ≥ 30 min of MOD+ Baseline G2: 2.5 (2.8) G3: 3.1 (3.8) 6 months-baseline ∆ G2: 1.4 (5.7) G3: 0.9 (5.7) 12 months-baseline ∆ G2: 5.3 (6.1) G3: 4.7 (5.9) | CHAMPS min. of MOD+ activity/week G2 vs. G3: 11.7\*, p=NR  CHAMPS days/week engaged in ≥ 30 min of MOD+ G2 vs. G3:0.6\*, p=NR |  |
| Laprise et al., 200921 | G1: CME (increase ability)  G2: CME + practice enablers and reinforcers (multicomponent) | Behavior (applicable for clinicians)  Adherence to specific recommendations. Patients considered undermanaged at baseline if no record, for at least 1 recommendation of a preventive action undertaken by their GP in the 12 months prior to the first visit | Baseline and followup (exact time not specified)  Retrospective audit information | G1: 948 G2: 1396 | Recommendation of antiplatelets # undermanaged at baseline G1: 367 G2: 494 # of patient with recommendation at followup G1: 136 (37.1%) G2: 235 (47.6%) | Antiplatelets OR:1.50 (1.00-2.24)  Angiotensine OR: 2.19 (1.45-3.30)  Lipid-lowering OR:1.50 (0.99-2.30)  Beta-blockers OR:1.12 (0.57-2.18) | NR  Logistic regression |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Laprise et al., 200921 (continued) |  | following recruitment. Recorded as binary outcome (present, not present) |  |  | Recommendation of Angiotensine converting enzyme inhibitor # undermanaged at baseline G1: 600 G2: 875 # of patient with rxn at followup G1: 66 (11.0%) G2: 179 (20.5%)  Recommendation of lipid-lowering agent when LDL >2.5 mmol/L # undermanaged at baseline G1: 224 G2: 345 # of patient with recommendation at followup G1: 58 (25.9%) G2: 119 (34.5%)  Recommendation of beta-blockers in post-MI patients # undermanaged at baseline G1: 110 G2: 143 |  |  |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Laprise et al., 200921 (continued) |  |  |  |  | # of patients with recommendation at followup G1: 17 (15.5%) G2: 24 (16.8%) |  |  |
| Lien et al., 2007,22 Svetkey et al., 2003,23 Young et al., 200924 | G1: Advice only (increase reach)  G2: Advice + behavioral counseling using established intervention (multicomponent)  G3: Established intervention + DASH dietary recommendations (multicomponent) | Clinical outcomes (applicable for general public/patients)  Change in weight measured using a calibrated scale | Measured at baseline and 6 months  Objective measurement | N=713 G1: 242 G2: 238 G3: 233 | G1: -1.1 (3.2)  G2: -4.9 (5.5) G3: -5.8 (5.8) | G2-G1: -3.8, p<0.001 G3-G1: -4.7, p<0.001 G3-G2: -0.9, p=0.07 | None  Mantzel-Haenzel chi-squared |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Marcus et al., 200925 | G1: Contact control treatment delayed group (not abstracted)  G2: Telephone-based individualized feedback (increase motivation)  G3: Print-based individualized feedback (increase reach) | Self-efficacy to use the evidence  Exercise-specific self-efficacy measured by questionnaire developed by Marcus, et al. | Baseline, 6 and 12 months | NR | G1:  6 Months: 2.47;  12 Months: 2.37 G2:  6 Months: 3.04;  12 Months: 2.86  G3: 6 Months: 2.87;  12 Months: 2.98 | Difference: 6 Months: F=10.33; 12 Months: F=18.00 95% CI: NR  6 Months: P<0.0001; 12 Months: P<0.0001 | Yes  Analysis of covariance, adjusted for treatment effects for gender and seasonal differences. When overall test of between-groups differences was significant at the >05 level, the source of these differences was examined further using single-degree-of-freedom contrasts that compared the active treatment arms with each other as well as with the treatment delayed group. |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** |
| Murtaugh et al.,200527 | G1: Usual care (not abstracted)  G2: Basic intervention email reminder (increase reach)  G3: Augmented intervention of email reminder + package of supporting materials (multicomponent) | Discussions about the evidence  % giving patients instruction about fluid weight gain | Chart-review of subsequent RN visit, within 45 days of initial intake  Chart | 354 | | Overall N=354 G1: 20.6% G2: 29.9% G3: 39.7% | Difference  G2-G1: 9.3%, p=0.097  Difference  G3-G1: 19.1%, p=0.001 Difference  G3-G2: 9.8%\*,  CI and p=NR | Sociodemo-graphic variables of the RN (age, gender, race/ethnicity), Rn employment status, educational level and caseload; average baseline characteristics of patients care for by each RN including health, functional status; geographic area where nurse provided care  Predictive multivariate modeling |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Paradis et al.,201128 | G1: Paper handouts (increase reach)  G2: Educational DVD (increase reach) | Self-efficacy to use the evidence  Infant care self-efficacy; assessed using 20 items from the 52-item Infant Care Survey. These included knowledge items such as recognizing gas pains and knowing regular breathing sounds of babies, and skill items such as treating diaper rash and taking the baby’s temperature. Each item was rated on a 5-point scale, from 1 (very little confidence) to 5 (quite a lot of confidence). | 2 weeks postintervention  Self-report | Overall N=137 G1: 64 G2: 70 | Mean change in Self-Efficacy (from baseline): Overall self-efficacy: G1: 0.14 (SD = 0.26) G2: 0.16 (SD = 0.32)  NOTE: baseline self-efficacy G1: 4.6, G2: 4.6  Very confident, n (%): Bathing your baby: G1: 52 (77.6%) G2: 65 (92.9%) Knowing regular breathing sounds of babies: G1: 40 (59.7%) G2: 50 (71.4%) Recognizing congestion: G1: 35 (52.2%) G2: 49 (70.0%) Relieving gas pains: G1: 38 (56.7%) G2: 43 (61.4%) Soothing your crying baby: G1: 46 (68.7%) G2: 55 (78.6%) Breast- or bottle-feeding your baby: G1: 54 (80.6%) G2: 62 (88.6%) | Overall self-efficacy: G2-G1:  +0.02, p=0.60  Bathing your baby: G2-G1:  15.3%, p=0.01 Knowing regular breathing sounds of babies: G2-G1:  11.7%, p=0.15 Recognizing congestion: G2-G1:  17.8%, p=0.03 Relieving gas pains: G2-G1: 4.7%, p=0.58 Soothing your crying baby: G2-G1:  9.9%, p=0.19 Breast- or bottle-feeding your baby: +W4 8%, p=0.20 | Hispanic ethnicity, babies born at outside hospital, #exclusively breast fed  Multivariate regression analysis |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Partin et al., 200429 | G1: Usual care (not abstracted)  G2: Pamphlet (increase reach)  G3: Video (increase reach) | Behavioral intentions to use or apply the evidence  Screening intention was assessed from a single yes/no question regarding whether the patient thought they would have a PSA test in the next year. | 1 week posttarget appointment  Self-report | N=893 G2: 295 G3: 308 | Unadjusted proportions  G2: 0.64 G3: 0.61 Adjusted proportions G2: .65 G3: .63 | Unadjusted:  G2 vs. G3: 0.03\*, p=NR Adjusted G2 vs. G3: 0.02\* p=NR | Adjusted analysis accounted for marital status, education, race, health status, comorbid conditions, experience with prostate problems, symptom severity, medication use  Logistic regression |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Rebbeck et al., 200631 | G1: Dissemination of guidelines by mail (increase reach)  G2: Implementation group (multicomponent) | Knowledge about the evidence  Measured using a  questionnaire developed for this study. Questions included: self-rating of knowledge of the guidelines, treatments currently used to manage whiplash, treatments understood to be evidence-based, when and why physiotherapists refer to other disciplines, treatment goals set for whiplash patients, reporting responsibilities, and understanding of yellow flags (see Appendix 1). Score ranges from 0 to 28, with higher scores indicating greater knowledge of the guidelines. | Baseline and 12 months  Self-report | Baseline: Overall=27 G1: 13 G2: 14 After study (12 mo followup) Overall=26 G1: 12 G2: 14 | Total knowledge score: Baseline G1: M=14.6 (SD=2.3) G2: M=13.6 (SD=3.2)  12 month followup G1: 12.8 (SD=3.3) G2: 17.9 (SD=3.5) | Absolute differences: Baseline: G1 vs. G2: 1.0\* 12 month followup: G1 vs. G2: 5.1\* Difference: Physiotherapists in the implementation group increased their knowledge of the guidelines by 5.5 points more than physiotherapists in the dissemination group  95% CI: 2.5-8.4 p=0.001 | NR  Linear regression, adjusted for before trial score |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Rimer et al., 200132 | G1: No treatment control/usual care (not abstracted)  G2: Tailored print (increase reach)  G3: Tailored print + telephone counseling (multicomponent) | Awareness of the evidence  Perceptions of absolute 10-year and lifetime breast cancer risks between self versus other using verbal and numerical anchors. “How likely are you to get breast cancer in=1. the next 10 years and 2. your life-time? With 5-pt Likert scale, converted to a percentile. Measured as “over-estimate”, accurate in estimates, and under-estimate | 12-15 months after baseline interview  Self-report | Overall N=1127 G1: 412 G2: 392 G3: 323 | Baseline G1: 305\*, 74% G2: 274\*, 70% G3: 232\*, 72%  Yearly- overestimate G1: 309\*, 75% G2: 282\*, 72% G3: 187\*, 58%  Yearly- Correctly estimate: G1: 103\*, 25% G2: 110\*, 28% G3: 136\*, 42% | Correctly estimate Yearly: p=0.001  G2-G1: 3%, NS G3-G1: 17%, P<0.05 G3-G2: 14%, P<0.05 Any difference in groups P<0.001 | None  Pearson chi-squared |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Rycroft-Malone  201233 | G1: Standard dissemination via postal mail (increase reach)  G2: Standard dissemination + a Web-based education package championed by an opinion leader (Multicomponent)  G3: Standard dissemination + plan-do-study-act (Multicomponent) | Clinical:  Duration of food fast prior to induction of anaesthesia— Asked patients preoperatively when they last ate. This information was also checked against reported information in their notes. | Data were collected 4 times preintervention and 4 times postintervention; up to 2 months interval between data collection points  Self-report and objective measurement | Preintervention timepoints: N=1,435  Postintervention timepoints: N=1,777 | Preintervention=  G1: M=14.2 hours (95% CI: 13.2, 15.2)  G2: M=13.8 hours (95% CI: 13.0, 14.6)  G3: M=14.0 hours (95% CI: 13.5, 14.6)  Postintervention=  G1: M=14.4 hrs. (95% CI: 13.4, 15.4)  G2: M=14.5 hrs. (95% CI: 13.4, 15.7)  G3: M=14.0 hrs. (95% CI: 12.9, 15.0) | Postintervention=  G1: p=0.872  G2: p=0.536  G3: p=0.748  PostIntervention Differences  G2-G1: 0.1\*  G3-G1: -0.4\*  G3-G2: -0.5\*  No significant difference in the mean food fast time in the postintervention period between the intervention groups (p=0.641). | NR  ANOVA |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Simon et al., 200534 | G1: Mailed educational materials (increase reach)  G2: Individual academic detailing (increase ability)  G3: Group academic detailing (increase ability) | Clinical outcomes (applicable for general public/patients)  Blood pressure control - blood pressure measurements | Baseline, 1 year followup, 2 year followup  objective measurement | NR | NR | Year 1 Difference: G2 more likely to have systolic blood pressure less than 140 mmHg compared to G1, OR: 0.87 (95% CI: 0.55-1.39) p=NS No difference between G3 and G1, OR: 0.98 (95% CI: .65-1.49) | Differences among individual patients  Logistic regression |
| Soler et al., 201035 | G1: Control (not abstracted)  G2: Training session on the SEPAR guidelines (increase ability)  G3: G2 + portable-device for spirometry (multicomponent) | Clinical outcomes (applicable for general public/patients)  Use of chest X-rays and arterial blood gas studies (secondary outcome) | NR  Chart | G1: 1481,  G2: 2119,  G3: 5556 | Blood gases (phase 2) G1: 41.7% G2: 43.1% G3: 31.6%  Chest X-rays (phase 2): G1: 74.6% G2: 74.8% G3: 71% | Absolute Difference in blood gas use: G2-G1: +1.4%, P<0.001 G3-G1: -10.1%, P<0.001   Absolute difference in x-rays: G2-G1: +0.2%, P<0.001 G3-G1: -3.6%, P<0.001 | Baseline values  Logistic regression |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Sullivan et al., 201036 | G1: VA guidelines (increase reach)  G2: COPE: web-based education program (increase ability) | Behavior (applicable for clinicians)  Frequency of using 4-core management strategies over the earlier 2 months  How often did you (0-100%): 1) Agree to prescribe opioids when patients request this? 2) Obtain urine toxicology prior to prescribing? 3) Have patient sign a pain contract (specifying prohibited behavior)? 4) Negotiate a patient treatment agreement (specifying functional goals)? | Baseline and 45-60 days post training  Self-report | NR | 1) Agree to prescribe opioids when patients request this? G1:  Pretest: 43.6% Posttest: 38.0% G2:  Pretest: 45.6% Posttest: 37.8% 2) Obtain urine toxicology prior to prescribing? G1:  Pretest: 41.8% Posttest: 41.6% G2:  Pretest: 39.4% Posttest: 39.9% 3) Have patient sign a pain contract (specifying prohibited behavior)? G1:  Pretest: 38.8% Posttest: 41.9% G2:  Pretest: 37.9% Posttest: 41.7% 4) Negotiate a patient treatment agreement (specifying functional goals)? | No statistically significant differences between groups  Q1 (posttest): G1 vs. G2: 0.2\*  Q2 (posttest): G1 vs. G2: 1.7\*  Q3 (posttest): G1 vs. G2: 0.2\*  Q4 (posttest): G1 vs. G2: 0.9\* | NR  Independent group t tests; intention-to-treat analyses using the GEE |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Sullivan et al., 201036 (continued) |  |  |  |  | G1:  Pretest: 17.1% Posttest: 20.2% G2:  Pretest: 15.5% Posttest: 21.1% |  |  |
| Watson et al., 200237 | G1: Guideline materials by postal mail (increase reach)  G2: EO session and guidelines (increase ability)  G3: CPE session and guidelines (increase ability)  G4: Guidelines + EO and CPE (multicomponent) | Knowledge about the evidence  5 knowledge items with 7-point Likert scale: antibiotics can predispose a customer to vaginal thrush; elderly customers should not use OTC anti-fungal preparations; if I recommend an OTC anti-fungal preparation, I will reduce the risk of the infection spreading; women who are pregnant should not use anti-fungal preparations and I only recommend OTC anti-fungal preparations if the customer has a previous diagnosis of vaginal thrush | Baseline and postintervention but timing not specified  Self-report | 52 pharmacies at baseline (87%) and 50 (83%) at followup | Not presented by group | Difference: No significant changes were shown following either intervention in the five knowledge items. Results summarized but not presented by intervention group; just before and after for all pharmacies. | Unclear  NR |

Table F-6. Key question 2 studies with a second outcome (continued)

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| **Author, Year** | **Groups** | **Outcome #2, Exact measure used** | **Timing of measurement,**  **Data Source** | **N analyzed for this outcome** | **Results by group** | **Differences in Groups** | **Covariates controlled for in analysis, Statistical methods used** | |
| Wolters et al., 200539 | G1: Control mailed guidelines (increase reach)  G2: Intervention involving package for learning, supporting materials, decision tree, and information leaflets for patients (multicomponent) | Behavior (applicable for clinicians)  Provision of patient education materials | Up to 1 year postintervention  Prospective recording of patient data and management immediately after consultation with eligible patient | N=187  G1: 92 G2: 95 | G1: 7.6% G2: 51.6% | G1 vs. G2: 44%\* OR: 75.5 (no CI reported) | Age, group allocation, IPSS and BS  Logistic regression |
| Wright et al., 200840 | G1: Standardized lecture by expert opinion leader (increase motivation)  G2: Standardized lecture by expert opinion leader + academic detailing and a toolkit (multicomponent) | Clinical outcomes (applicable for general public/patients)  Lymph node removal | 360 days before intervention, 360 days after intervention  NR | NR | # of lymph nodes removed after lecture G1: 306 G2: 320 | G1 vs. G2: 14 Difference: No difference between G1 and G2 95% CI: NR p=0.54 | # of lymph nodes retrieved 360 days before the standardized lecture  Poisson regression |

\* calculated by reviewer

Abbreviations: ANCOVA = Analysis of covariance; ANOVA = ANalysis Of Variance; BS=Bother score; CHAMPS=Community Healthy Activities Model Program for Seniors; CI = confidence interval; CPE = continuing professional education; DASH = Dietary Approaches to Stop Hypertension; DXA = Dual X-ray absorptiometry; EMR = electronic medical record; EO = Education Outreach; FQPA = Freiburg Questionnaire on Physical Activity; G = group; GEE = generalized estimating equations method; ICU = intensive care unit; IPSS=International Prostate Symptom Score; kcal/kg-1 = kilocalorie/kilogram;LDL = low-density lipoprotein; LHA = lay health advisor; M=Mean; MET = metabolic equivalent take; mmol/L = millimoles/liter; MOD = moderate intensity or more vigorous; mths = months; N = number; NR = not reported; OTC = Over the counter; PA = physician’s assistant; QBPDS=Quebec Back Pain Disability Scale; QOL = quality of life; RN=registered nurse; SD = standard deviation; SEPAR = Spanish Society of Pulmonology; TPV = tailored and targeted print and video; WCB = Workers Compensation Board; wk = week.