Evidence Table 6. Intervention characteristics—nurse-led survivorship care models

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| **Author, Year****Trial Name****Type of Survivorship Model, if Defined****Recipient of Intervention Component** | **Inclusion/Exclusion Criteria** | **Goal of Intervention****Intervention Duration** | **Components of Survivorship Care** | **Intensity of Intervention** | **Delivery Agent (and Mode of Delivery)** |
| Gates et al., 20124NRNurse-led survivorship care(Draws on Pender’s Revised Health Promotion Model)Patients | Inclusion criteria:* Survivor participants: Had a diagnosis of HL; received upper torso radiotherapy at any stage during treatment, regardless of other therapies; at least 5 years postcompletion of curative treatment for HL; a new referral to the haematology late effects clinic at Peter Mac; over 18 years old; able to complete study requirements in English; had a sibling, partner, or significant other unaffected by a diagnosis of cancer who met eligibility criteria outlined below, and were willing to take part as a control participant.
 | To establish whether receiving a health-promoting intervention from a specialist cancer nurse demonstrates capacity to improve HL survivors’ knowledge of and motivation to adopt health-promoting behaviors.Average duration of interaction: 6 months | Nurse-led consultations include an education package tailored to the individual’s health needs, screening for emotional distress, and delivery of an individualized SCPPhone calls to reinforce intervention | Intervention component 1: Nurse-led consultationsAverage number of sessions: 2Intervention component 2: Phone call to reinforce interventionAverage number of sessions: 2 | Intervention component 1: Nurse (face-to-face)Intervention component 2: Nurse (telephone) |

Evidence Table 6. Intervention characteristics—nurse-led survivorship care models (continued)

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| **Author, Year****Trial Name****Type of Survivorship Model, if Defined****Recipient of Intervention Component** | **Inclusion/Exclusion Criteria** | **Goal of Intervention****Intervention Duration** | **Components of Survivorship Care** | **Intensity of Intervention** | **Delivery Agent (and Mode of Delivery)** |
|  | Inclusion critieria (cont.):* Healthy participants: A sibling, partner, or significant other of a study group HL survivor; never diagnosed with cancer (excluding nonmelanoma skin cancers); of comparable age (+/− 5 years) and gender to the study group HL survivor; over 18 years; able to complete the study requirements in English; no co-occurring serious and/or uncontrolled illness that impacted their functional status, including heart disease, stroke, respiratory disease, diabetes, dementia, and Alzheimer’s disease.
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Evidence Table 6. Intervention characteristics—nurse-led survivorship care models (continued)

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| **Author, Year****Trial Name****Type of Survivorship Model, if Defined****Recipient of Intervention Component** | **Inclusion/Exclusion Criteria** | **Goal of Intervention****Intervention Duration****Cointerventions**  | **Components of Survivorship Care** | **Intensity of Intervention** | **Delivery Agent (and Mode of Delivery)** |
| Knowles et al., 20075NRNurse-led carePatients | Inclusion criteria (cont.):* All patients having undergone surgery with curative intent for a colorectal cancer primary (Dukes A, B, and C) who would be considered eligible for surgical resection in the event of disease recurrence.

Exclusion criteria:* Patients with metastatic or recurrent colorectal disease.
* Patients who wished to remain in traditional followup care.
* Patients not deemed suitable for nurse-led followup by their surgeon/oncologist due to complications or complex comorbidities.
* Patients from outside of the Lothian Area who would routinely be followed up closer to home.
 | Pilot study designed to assess the feasibility of a followup program led by nurse specialists for patients with colorectal cancerAverage duration of interaction: ~12 months | Telephone clinic; consultant clinic; nurse specialist clinicsInvestigations and assessments (e.g., pathology results, symptom assessment, clinical examination, wound examination, rectal exam, carcinoembryonic antigen marker, computed tomography scan) routinely required per-protocol varied per clinic interval | Intervention component 1: Telephone clinicAverage number of sessions: 1 Intervention component 2: Consultant clinicAverage number of sessions: 1 Intervention component 3: Nurse specialist clinicsAverage number of sessions: 3 Average time in each session: 20–25 minutes | Intervention component 1: Nurse (telephone)Intervention component 2: Surgical consultant (face-to-face) Intervention component 3: Nurse (face-to-face) |

Abbreviations: HL = Hodgkin’s lymphoma; NR = not reported; SCP = survivorship care plan; SD = standard deviation.