

# Nurses expand outpatient care for chronically ill adults

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including a 9.37-mg/dL decrease in total cholesterol level (nine patients; 95 percent CI, 20.77-mg/dL decrease to 2.02-mg/dL increase) and a 12.07-mg/dL decrease in low-density lipoprotein cholesterol level (six patients; 95 percent CI, 28.27-mg/dL decrease to 4.13-mg/dL increase).

"We need new models of primary care, and enlisting nurses will be central to this effort," write the authors of an accompanying editorial.

"Recognizing that nurse-managed protocols work for common outpatient diseases may be one step toward solving America's primary care problem."

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(HealthDay)—Team care involving nurse-managed protocols is one model that may improve outpatient care for adults with chronic conditions, according to research published in the July 15 issue of the *Annals of Internal Medicine*.

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Ryan J. Shaw, Ph.D., R.N., of the Durham Veterans Affairs Medical Center in North Carolina, and colleagues conducted a systematic review of the literature and a meta-analysis of data from 18 studies. The authors sought to assess the effects of nurse-managed protocols on the outpatient management of adults with diabetes, [hypertension](#), and hyperlipidemia. All of the studies involved a [registered nurse](#), or equivalent, who titrated medications according to a protocol.

The researchers found that outpatients with diabetes receiving care under nurse-managed protocols experienced a 0.4 percent decrease in hemoglobin A1c level (eight patients; 95 percent confidence interval [CI], 0.1 to 0.7 percent). Those with hypertension (12 patients) experienced decreases in systolic and [diastolic blood pressure](#) of 3.68 mm Hg (95 percent CI, 1.05 to 6.31 mm Hg) and 1.56 mm Hg (95 percent CI, 0.36 to 2.76 mm Hg), respectively. Individuals with [hyperlipidemia](#) had changes in lipid levels,

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