Additional file 1 – Examples of implemented decision support rules for diabetes and the reminders that may be triggered depending on the patient.

<table>
<thead>
<tr>
<th>Decision support rule description</th>
<th>Reminder number</th>
<th>Reminder short version</th>
<th>Reminder long version</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metformin is the first choice oral hypoglycaemic agent in type 2 diabetes (scr00016)</td>
<td>1</td>
<td>Type 2 diabetes - start metformin?</td>
<td>This patient has type 2 diabetes. Metformin is the drug of choice for better glycaemic control.</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Type 2 diabetes - start metformin? Note GFR.</td>
<td>This patient has type 2 diabetes. Metformin is the drug of choice for better glycaemic control. This patient's glomerular filtration rate, calculated with the MDRD formula (@1), is at a level where a lower than usual dose of metformin should be considered.</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Type 2 diabetes - check renal function and start metformin?</td>
<td>This patient has type 2 diabetes. Metformin is the drug of choice for better glycaemic control. Consider checking renal function and starting metformin.</td>
</tr>
<tr>
<td>UKPDS Risk Engine to calculate cardiovascular and stroke risk in patients with type 2 diabetes (scr00129)</td>
<td>1</td>
<td>Type 2 diabetes - increased cardiovascular risk (UKPDS).</td>
<td>The risk of cardiovascular event is @1% in ten years according to the UKPDS risk engine.</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Type 2 diabetes - increased stroke risk (UKPDS).</td>
<td>This patient's ten-year risk of stroke is @1%, as calculated with the UKPDS Risk Engine.</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Type 2 diabetes, unknown smoking status - increased</td>
<td>This patient's ten-year risk of a cardiovascular event is @1%, as calculated with the UKPDS Risk Engine. Since information about this patient's smoking status is unknown, the reminder is shown if the risks exceed 10% or 5% by using the default settings &quot;non-smoker&quot; and &quot;no atrial fibrillation&quot;. If the 10-year risk of cardiovascular disease is above 10% reminder 1 (or 3) is shown. If the 10-year stroke risk is above 5% reminder 2 (or 4) is shown.</td>
</tr>
</tbody>
</table>
Additional file 1 – Examples of implemented decision support rules for diabetes and the reminders that may be triggered depending on the patient.

<table>
<thead>
<tr>
<th>Recall of patients with diabetes (scr00492)</th>
<th>1 Diabetes - time for the annual follow-up appointment?</th>
<th>This patient has diabetes. More than 13 months have passed since blood glucose and cholesterol were measured. Time for the annual follow-up appointment?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recall of patients with diabetes (scr00492)</td>
<td>If none of the following laboratory tests has been taken during the last 13 months, a reminder on recalling the patient is shown: HbA1c, blood glucose, cholesterol.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Screening for diabetic nephropathy in type 2 diabetes (scr00549)</th>
<th>1 Type 2 diabetes - time for nephropathy screening?</th>
<th>This patient has type 2 diabetes, and no screening for microalbuminuria has been carried out during the last year. Annual screening for microalbuminuria is recommended in type 2 diabetes.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening for diabetic nephropathy in type 2 diabetes (scr00549)</td>
<td>Albuminuria screening is recommended annually for patients with type 2 diabetes, if no result is available or the last result was negative.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Intensifying diabetes treatment in recently diagnosed type 2 diabetes (scr00564)</th>
<th>1 Type 2 diabetes and high Hba1c - intensify diabetes treatment?</th>
<th>This patient has type 2 diabetes and the HbA1c value is high (@1). Consider intensifying diabetes treatment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensifying diabetes treatment in recently diagnosed type 2 diabetes (scr00564)</td>
<td>If a patient with fresh (at most 2 years old) type 2 diabetes has an elevated HbA1c level (&gt; 6,5 %) but no insulin treatment, the user is recommended to intensify hyperglycaemia treatment according to the flow-sheet described in the Finnish Current Care Guideline.</td>
<td></td>
</tr>
</tbody>
</table>