Tool 15. Patient education handouts

A patient is often asked to read something in their doctor's office. They may be asked to fill out a form or may be given written material on how to manage their disease. A patient's reading abilities are often below the readability of this material. In addition, patients who are ill can sometimes find it hard to answer complex questions accurately. Practices that are conscientious about developing and using written materials that are easier to read may increase the chance that patients will use it correctly, thereby saving staff time and improving patient outcomes.

Health materials are effective only when used as a part of an overall patient education strategy. Simply handing your patient a pamphlet is not enough to promote understanding or behavior change. Patients have various levels of literacy and speak different languages. Your selection of well-designed educational materials and how you use them when educating your patients will determine how effective you are at helping them manage their health care.

- Use in conjunction with spoken instruction. Educational material should be used to facilitate discussion, not replace it. Do not assume that patients read the materials you give them. Just handing a pamphlet to a patient has been shown ineffective at changing behavior. Educational material should be used when a clinician is focusing on a specific point of care that needs further reinforcement.
- Review the material with the patient. Make note of important information by circling or highlighting it in the material, and discuss how it relates to the patient's care. Consider personalizing the materials by adding the patient's name, medications, or specific care instructions. Make sure the patient understands the written material and verbal instruction by asking them to restate the main points.
- Repeat and follow-up. Reinforcing information is essential for a patient to learn skills and change behavior. Providing follow-up phone contact and referring to the educational material again in future visits can improve understanding and adherence. You may need to give the material to the patient more than once, and you may focus on different topics at subsequent visits.
- Use video. Incorporating a video presentation into patient education can be effective if the practice identifies good videos and has the capacity to show them to patients. Videos that review the causes and treatment of a specific disease can be especially helpful for patients who are newly diagnosed with an illness. Videos should follow similar principles to good educational materials, including use of simple graphics and plain language. They should review material at a moderate pace and with clear pronunciation. Remember that video presentations are not a substitute for reviewing and discussing the information with the patient, but they can be helpful to introduce and/or reinforce the topics discussed.

Tips for creating great patient handouts

- Document length should be 2 pages or less
- Document font should be 12 point or larger. A serif font such as Times is recommended.
- Do not use ALL CAPITAL LETTERS, even in the title of the document
- Avoid acronyms and contractions by spelling out all words
- Use simple, declarative sentences with maximum of 10 to 15 words
- Use simple words with one or two syllables.
- Paragraphs should contain no more than two or three sentences.
- Use words and phrases familiar to the audience.
- Materials should be justified and contain sufficient white space surrounding text with at least one inch margins.
- If a word or phrase needs to be emphasized, use a large font, bold, or underline. Avoid using italics.
- Avoid using too much space between the paragraph headings. The text and title should be in close proximity.
- Information should be written in an active voice rather than a passive voice:
 - Passive example: An appointment letter will be sent to you.
 - Active example: We will send an appointment letter to you.
- Avoid technical words or jargon. If you must use a technical word, define it by explaining any terms that might be new to the reader.
- Technical example: This medication reduces intra-operative bleeding.
- Non-technical: This medicine will reduce bleeding during the surgery.
- Use strong, vivid verbs. Often, verbs are changed into nouns and adjectives. This makes sentences longer, weaker, and harder to read.
 - Verb Example: Mary Garcia was responsible for writing this patient brochure.
 - Verb Example: Mary Garcia wrote this patient brochure.
- Avoid too much information for patients to absorb by keeping the message simple.
- Images should be simple without an excess in detail to avoid clutter and confusion.
- Avoid images or illustrations that could be considered culturally insensitive.
 - Example: If patients have religious or cultural beliefs such that they would be uncomfortable seeing pictures of body parts unclothed or reading about particular health topics.
 - Example: an image of an owl may be considered a bad omen to some tribes

There are numerous resources for obtaining patient education handouts. Two recommended resources are:

- IHS Health Communications website which contains locally developed and culturally relevant patient education handouts on a wide variety of diseases and topics that can be easily printed
 - Patient education handouts
 - How to submit a patient education handout
- Through the EHR InfoButton which provides health literacy appropriate handouts on medications, lab tests, and health conditions through the National Library of Medicine.
 - More information on the EHR InfoButton can be found in the patch release notes for EHR Version 1.1 patch 8