

Style Guide for AHRQ Website

The articles published on the Agency for Healthcare Research and Quality (AHRQ)’s website are intended for a general audience. Although they are often summarized from larger, more complex scientific studies, these articles should be organized simply and clearly and should flow smoothly so that all readers can follow along. Use these guidelines to write an informative and easy-to-read article for a general audience.

Break Up Large Blocks of Text

Make the article easier to scan and read by breaking up large blocks of text.

Insert bullet points for items that form a natural list.

Original

In 1900, the leading causes of death among U.S. women included infectious diseases and complications of pregnancy and childbirth. Today, other health problems and chronic conditions face women. Heart disease is the number one killer of women in the United States. Approximately 185,000 new cases of breast cancer are diagnosed among U.S. women each year, and nearly 45,000 women die from the disease.

Revised

In 1900, the leading causes of death among U.S. women included infectious diseases and complications of pregnancy and childbirth. Today, other health problems and chronic conditions face women in the United States:

- Heart disease is the number one killer of women.
- Approximately 185,000 new cases of breast cancer are diagnosed among women each year, and nearly 45,000 women die from the disease.

Organize the article around AHRQ standard headings.

Original

AHRQ Research
Impact
Initiatives

Revised

Scope of the Problem
Background
Impact of AHRQ Research
Current Projects

Include subheadings where appropriate.

Original

Impact

AHRQ funded the development of two software tools, now standard features on hospital electrocardiograph machines, that have improved diagnostic accuracy and dramatically increased the timely use of “clot-busting” medications in women having heart attack. Women treated in emergency rooms (ERs) are less likely to receive life-saving medication for heart attack.

Older black women are least likely to be referred for cardiac catheterization. A survey of physician referral practices found

Revised

Impact of AHRQ Research

AHRQ contributes essential research about costs, access, and outcomes to the women’s health care system. The results of several studies in three key areas of women’ are discussed below.

Cardiac Health Care Studies

- Women treated in emergency rooms (ERs) are less likely to receive life-saving medication for heart attack. AHRQ

Edit Choppy, Wordy Paragraphs

Improve the flow of the article by removing unnecessary words and organizing each paragraph around a central idea.

Use active voice to create shorter sentences.

Original

A priority is given to identify and reduce disparities in the health care of minority women, address the health needs of women living in rural areas, and care for women with chronic illness and disabilities.

This important information is brought to the attention of policymakers, health care providers, and consumers who can make a difference in the quality of health care women receive.

This agency serves as a catalyst for change by promoting the results of research findings and incorporating those findings into improvements in the delivery and financing of health care.

Revised

AHRQ prioritizes the following goals:

- identifying and reducing disparities in the health care of minority women
- addressing the health needs of women living in rural areas
- caring for women with chronic illness and disabilities

AHRQ shares this important information with policymakers, health care providers, and consumers who can make a difference in the quality of health care women receive. As a catalyst for change, this agency promotes its research findings to improve

Lead with a strong topic sentence and focus the paragraph around it.

Original

AHRQ funded the development of two software tools, now standard features on hospital electrocardiograph machines, that have improved diagnostic accuracy and dramatically increased the timely use of “clot-busting” medications in women having heart attack. Women treated in emergency rooms (ERs) are less likely to receive life-saving medication for heart attack.

Revised

- Women treated in emergency rooms (ERs) are less likely to receive life-saving medication for heart attack. AHRQ funded the development of two software tools, now standard features on hospital electrocardiograph machines, that have improved diagnostic accuracy and dramatically increased the timely use of “clot-busting” medications in women having heart attack.

Delete repetitive words and phrases.

Original

Poor and minority women have fewer mammograms than other women. AHRQ-funded researchers have used less traditional approaches, such as providing information through churches, to increase mammography screenings. Over the past two decades, AHRQ has been a co-sponsor of research that supported mobile mammography screening vans. This intervention has also increased access to mammography for poor and minority women.

Revised

- Poor and minority women have fewer mammograms than other women. AHRQ-funded or co-sponsored researchers have used less traditional approaches to increase access to and frequency of mammography screenings, such as providing information through churches and supporting mobile screening vans.

Strengthen the Article's Impact

Find ways to spotlight the most important information in the article.

Make percentages feel personal by wording them as whole numbers.

Original

Each year, about 600,000 women have a hysterectomy. By age 60, more than one-third of U.S. women have had a hysterectomy. Costs associated with hysterectomy are estimated at \$5 billion per year.

Revised

- About 600,000 women have a hysterectomy each year, and more than 1 in 3 women will have had the procedure by age 60. Roughly \$5 billion is spent on hysterectomies a year.

Use contrasting fonts to filter important information.

Original

Clinical preventive services are the focus of the U.S. Preventive Services Task Force (USPSTF), an independent panel of experts in primary care and prevention whose work is supported by AHRQ. They are updating its recommendations for preventive interventions on many conditions affecting women. For example, the USPSTF recently recommended screening mammography, with or without clinical breast examination, every 1 to 2 years for women ages 40 or older.

Revised

AHRQ is currently funding the following major projects:

- ***USPSTF Preventive Intervention Recommendations.*** AHRQ supports U.S. Preventive Services Task Force (USPSTF), an independent panel of experts in primary care and prevention whose focus is clinical preventive. USPSTF is updating its recommendations for preventive interventions on many conditions affecting women. For example, USPSTF now