

Selection of the information and structure of the text	
Information overload	Avoid overwhelming the reader with too much information.
Big picture	Presentation of the “big picture” before the details (inverted pyramid writing style).
Sentences	Avoid long and complex sentences that include many clauses, as these are difficult to understand.
Verbs	
Active/Passive	Use active, rather than passive, voice.
Vocabulary	
Words choice	Use simple vocabulary familiar to non-medical people:
Technical language	Avoid jargon, technical, medical, or scientific language (for example, use “high blood pressure rather than “hypertension”)
Complex words	Remove unnecessary or complex words (for example, “use” rather than “utilize”).
Acronyms, medical/technical words, etc.	Limit the use of acronyms, abstract, medical/technical, or multisyllabic words (e.g., “unanticipated,” “hematopoietic”). If such words must be used, add clear language to define them.
Wording consistency	Be consistent in the use of terms/words throughout the document and define them.
Underlying concepts	Ensure that the underlying concepts are clear and easy to understand. Where necessary, explain the underlying concept.
Oneness	Avoid ambiguous words and phrases (for example, “felt badly”).
Elements to help improve comprehension	
Headlines	Headlines and descriptive subheadings to organize information.
Bullet points	Bullet points instead of paragraphs.
Numeracy principles	Numbers allow a quantitative understanding of facts: consider including them in summary. ¹⁹
White space	Adequate “white space” (for example, separate topics by one or two lines, a minimum of 12-point font)
Links	Link to additional information and resources for online summaries and background information. Such links need to be minimal since hyperlinks may become out of date over time.
Imagery	Limited use of unnecessary imagery (icons, logos, etc.)

Table 3. General criteria to maximize readability of layperson summaries.