Information/Education Pages (I/EPs)

What is an Information/Education Page (I/EP)?

I/EPs are brief (2-page) handouts that provide consumer-friendly information on topics relevant to medical rehabilitation. I/EPs are designed to be torn out of the printed Archives of Physical Medicine and Rehabilitation (APM&R) and copied, or downloaded, for sharing with others.

Potential audiences for I/EPs include people with disabilities, their caregivers, clinicians, or others with an interest in rehabilitation-related topics. While I/EPs may provide information that may assist clinicians in their practice, they should not present position statements or clinical practice guidelines. For guidance on developing specific recommendations for clinical practice, consult ACRM's Evidence and Practice Committee [http://www.acrm.org/resources/evidence-and-practice/].

I/EPs may present basic background or overview of a particular topic of importance, brief how-to information, worksheets, or other published materials useful to everyday living or clinical practice. Topics may address lifestyle, well-being, relationships, safety, travel, technology, or other issues relevant to living with a disability or providing care or services to people with disabilities.

I/EPs are published on a monthly-to bi-monthly basis in the Organization News section of APM&R and are indexed in PubMed. Accepted I/EPs are published electronically ahead of print. A complete list of I/EPs published to date is posted on the ACRM website [http://www.archives-pmr.org/content/infoeducation].

Who can create an I/EP?

I/EPs are welcomed from all members of the rehabilitation community with knowledge about topics of interest. I/EPs may be submitted by individuals or on behalf of a group (such as an ACRM Interdisciplinary Special Interest Group, Networking Group, or Task Force). Both members and non-members of ACRM may submit I/EPs. At least one author should be an ACRM member.

What are the benefits of creating an I/EP?

I/EPs provide an opportunity to share research evidence, clinical expertise and other information in a manner that facilitates translation of knowledge into everyday life and clinical practice. In so doing, they may help people with disabilities make decisions or take other actions to maximize their functioning, health and well-being. I/EPs also may help to improve the quality of clinical services provided to individuals with disabilities. Creating an I/EP provides authors an opportunity to collaborate with others who share common interests, and can be a means of building networking connections.

If I would like to create an I/EP, how do I start?

- We strongly recommend that you contact the ACRM Communications Committee chair/co-chairs prior to developing a new I/EP. The co-chairs can help determine whether your idea is appropriate for an I/EP, of interest to the intended audience, and does not duplicate other resources. (See the ACRM Committees page [http://www.acrm.org/about/committees-groups/] for the name and e-mail address of the current chair/co-chairs.)
- If appropriate, the ACRM Communications Committee chair or co-chair may recommend collaborating with another group that has an interest in the proposed topic.
- Review the requirements for I/EPs submissions and suggestions for creating engaging content that are presented in this guide.
- Choose a general topic in which further education is needed through discussion with consumers, other professionals, etc.
- Review existing resources to identify gaps in coverage and avoid duplication of content.
- Identify a specific topic to be addressed by the I/EP.
- Identify collaborators with relevant expertise and/or experience.
- Develop an outline for the content of the I/EP.
• Write a first draft.
• Get feedback on the draft from writing team members, other professionals, and (crucial for I/EPs for lay people) patients and their family members.
• Revise based on this feedback, rewrite and get new feedback
• Check spelling and grammar.
• If at any point you need guidance, contact the chair/co-chairs of the Communications Committee.

How should I/EP manuscripts be formatted?

• **Word count:** 1200-1400 words (Final typeset I/EP is limited to 2 sides of a page)
• **Font size:** 12 (Times New Roman)
• **Spacing:** Double
• **Images and artwork:** Authors are encouraged to include an image and artwork in their I/EP manuscripts to support understanding of the material. If reproducing an image or other content published elsewhere, documentation of permission of the rights to use that content will be required. For specific guidelines on the format and resolution of images, see the Artwork guidelines for Archives of Physical Medicine and Rehabilitation that are presented at [http://www.archives-pmr.org/content/authorinfo#idp1444432](http://www.archives-pmr.org/content/authorinfo#idp1444432).
• **References:** Authors are asked to include references in their I/EP manuscripts (limit 12) to demonstrate to reviewers that coverage reflects the state of the art.
• **Authorship and acknowledgements:** Authors’ names, acknowledgements, and attribution to a specific ACRM ISIG, Networking Group, or Task Force (if relevant) should be included at the end of your manuscript.
• **Disclaimers:** I/EPs should include the following disclaimer: “This information is not meant to replace the advice of a medical professional and should not be interpreted as a clinical practice guideline. This Information/Education Page may be reproduced for noncommercial use by health care professionals and other service providers to share with their patients, clients or colleagues. Any other reproduction is subject to approval by the publisher.”

What should I do to maximize the usefulness and quality of my I/EP?

To create an I/EP that makes a unique contribution and is engaging to readers, consider the following suggestions:

• **Review existing resources** (whether published in APM&R or another journal) to avoid duplication.
• **Specify your audience.** When creating your I/EP, think carefully about who you are targeting with its content. In general, writing to a narrower audience will allow you to tailor the information presented more effectively. If, however, you are writing an I/EP that you intend to be useful to multiple audiences (clinicians and non-clinicians), write the I/EP in language suitable for the least medically knowledgeable portion of that audience to maximize its accessibility to readers. Consider including a (sub)title that specifies your audience (for example: “Five Key Exercises for Upper Body Strength: A Guide for Persons with Paraplegia”).
• **Use appropriate terminology and tone** for the intended audience. For I/EPs targeted to non-clinicians, authors should try to find more common lay-language substitutes for technical or clinical terminology and phrases where possible. If a technical term cannot be avoided, try to give a parenthetical explanation. Avoid acronyms and abbreviations; if they are absolutely needed, make sure each one is expanded when first used.
• **Write in the second person point of view** ("you"), rather than the third person ("people with spinal cord injury") to streamline the writing and make the content more personally engaging.
• **Aim for an 8th grade reading level**, especially for I/EPs targeted to non-clinical audiences. Authors can check the reading level of their manuscript at [http://read-able.com/](http://read-able.com/).
• **Use short sentences** without dependent clauses.
• **Use headings and subheadings** to organize the content of the I/EP. A question-and-answer format can be helpful.
• **When presenting a list, use bullets.** Bulleted lists can also help break up large sections of text.
• **Consider using images, figures, or tables** to convey information rather than only text. If doing so, reduce the maximum number of words (1200–1400) by the number that would fit in the space taken up by the image, graph or table.
• **Share drafts of your I/EP with members of the target audience** prior to submission to obtain feedback and assist the writing process.
How do I submit an I/EP for review?

For questions about I/EPs or to inquire whether a topic is appropriate for an I/EP, contact the Chair of the Communications Committee of ACRM via e-mail. See the ACRM Committees Page [http://www.acrm.org/about/committees-groups/] for the name and e-mail address of the current chair.

Completed I/EPs must be submitted through the journal's online system, Editorial Manager, at https://www.editorialmanager.com/ARCHIVES-PMR/default.aspx. The review process will not begin until authors have completely complied with the submission requirements. Submissions should include:

1. A cover letter that includes the following table, with all rows completed:

<table>
<thead>
<tr>
<th>I/EP title (and subtitle, if applicable)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of ACRM task force, ISIG, or committee that developed this product (if none, enter “n/a”)</td>
<td></td>
</tr>
<tr>
<td>Corresponding author name, affiliation, and contact information</td>
<td></td>
</tr>
<tr>
<td>Name/affiliation of other author(s):</td>
<td></td>
</tr>
<tr>
<td>Social media handles of author(s) and institution(s):</td>
<td></td>
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<tr>
<td>The audience for which the I/EP is intended (People with a certain condition or disability, caregivers, clinicians, etc.)</td>
<td></td>
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<tr>
<td>Purpose and intended use (Describe the purpose of the I/EP and how you envision it will be used by members of its target audience)</td>
<td></td>
</tr>
</tbody>
</table>

2. I/EP Manuscript (formatted as specified above)

What is the review process for I/EPs?

1. At least two members of the ACRM Communications Committee review the manuscript for intelligibility, accessibility, and usefulness. Note that this process should not be considered an official peer review of the content. Reviewers consider the extent to which the I/EP:
   - Addresses a topic of importance
   - Presents content that is appropriate to share in an I/EP as opposed to by means of other formats (position statement, clinical practice guideline, etc.)
   - Is written in a manner that is understandable
   - Is free of grammar, spelling and other written communication errors
   - Contains content that is appropriately supported through research evidence, expert consensus, or other means relevant to the topic

2. The Communications Committee chair/co-chair compiles the feedback received and notifies the corresponding author of acceptance, acceptance with revisions, requests for major revisions, or rejection of the manuscript. Allow 30-60 days to complete this initial review/feedback process.

3. If revisions are requested, they will be due within 14 days of the decision. Revisions are submitted through the Editorial Manager system along with a cover letter outlining the responses to the reviewer comments. Authors may request extensions by contacting the Communications Committee Chair directly by email. The chair or co-chair will be identified as the section editor on the decision letter.

4. After satisfactory review of the (revised) manuscript, the Communications Committee Chair approves the manuscript and authors will receive notifications of acceptance.

What happens after the I/EP is approved for publication?

Before publication, all co-authors are required to complete conflict of interest (ICMJE) forms per standard Archives submission protocols. The editorial office will send the accepted I/EP to the publisher for typesetting and creation of proof. Following approval of content and layout by the author(s) in the proofing process, the I/EP will be scheduled for the next available issue at the discretion of the editors of the Archives.

If you have any questions about creating or sharing I/EPs, please contact the ACRM Communications Committee (see the ACRM Committees page [http://www.acrm.org/about/committees-groups/] for current contact information).

www.archives-pmr.org