



**HEALTH LITERACY IN  
LAYOUT & DESIGN**

## WHAT WE'LL DISCUSS

1. What is design?
2. Design techniques that complement plain language
3. Making tough content choices
4. Determining your social media strategy

What do we mean when we say  
**“DESIGN?”**

**“Make it pretty?”**



To use design to impress,  
to polish things up, to make  
them chic, is not design at all.

**This is packaging.**

— DIETER RAMS

“Design by Vitsoe”  
New York, December 1976



A photograph of Marie Kondo sitting at a long wooden table. She is wearing a white short-sleeved top and has her hands resting on the table. To her left is a light-colored wooden vase containing a branch of cherry blossoms. To her right, on the table, is a traditional Japanese tea set (chawanabachi) including a dark brown teapot, a white teapot, and several small cups, some of which are light blue. The background is a bright, minimalist room with a window on the left.

People cannot change  
their habits without  
first changing their  
**way of thinking.**

— MARIE KONDO  
*The Life-Changing Magic of Tidying Up*



Design is a  
**CRITICAL EXERCISE.**



Good design  
is a lot like  
**clear thinking**  
**made visual.**

— EDWARD TUFTE

# Design maturity continuum

Design value isn't recognized. This attitude fosters design by default.

Design is the gateway to be hip and cool.

Design makes things work better.

Design finds new opportunities by solving existing problems.

Design redefines the challenges facing the organization.

no  
conscious  
design

style

function  
and form

problem  
solving

framing

Why is design important in  
**HEALTH CARE?**

...the onus of interpreting the information should be shifted toward the information provider when **the skill level of the users are lower, when the common decision errors are known and can be countered, and when the stakes involved in the choices are high for individuals or society.**

— MELISSA G. FRENCH, ET AL  
*Health Insurance and Insights from Health Literacy:  
Helping Consumers Understand Proceedings of a Workshop*

Let's talk about

# **DESIGN TECHNIQUES**

Start with a  
**GRID.**

\* I mean it. It's the anchor that prevents visual chaos.

When used correctly and appropriately, a grid provides **simplicity, clarity, efficiency, flexibility, economy, continuity, consistency, and unity** to any visual communication.

— RICHARD POULIN  
*The Language of Graphic Design*



# Hygiene

## Hand Washing Steps

### Prevent the Spread of Germs

**1** Wet hands with warm running water.

**2** Apply soap.



**3** Rub hands together for at least twenty seconds.



**4** Clean under fingernails and between fingers.

**5** Rinse hands thoroughly under running water.



**6** Dry hands - use towel or warm-air hand dryer.

*Keep the Children in Your Care Healthy.*

DEPARTMENT NAME HERE

## This is where your title will go



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- This is what a bullet point looks like.

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Think of this area as a call-out box, where you would have some important info stand out. Treat it as the area for lead-in messaging that will catch the viewer's eye before they dive into the main content to the left.



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- Last Page ⌘⇧↓
- Next Spread ⌘⇩
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- Go to Page... ⌘J
- Go Back ⌘⇧⌘↑
- Go Forward ⌘⇧⌘↓
- Numbering & Section Options...
- Table of Contents...
  - Update Table of Contents
  - Table of Contents Styles...

### Gastric sleeve surgery

...removes about 80 percent of your stomach to create an egg-size pouch. This surgery is almost always done with a minimally invasive laparoscope, with small incisions. You will probably spend one night in the hospital.

...consume less food because you feel full after eating less. Your body absorbs fewer calories and nutrients. You will probably spend one or two nights in the hospital.

...eat because the removed part of your stomach sends different signals to the brain that change your metabolism, reducing your appetite.

...your surgeon may recommend gastric bypass surgery if your weight-loss goals are less than what might be expected for gastric bypass.

...by-related medical problems.

- You take certain medications, such as anti-inflammatory drugs or steroids, that might complicate other types of bariatric surgery.

**Benefits:**

- Gastric sleeve can improve obesity-related conditions such as diabetes, sleep apnea, high blood pressure, fatty liver disease and osteoarthritis. It reduces the risk of ulcers.
- It usually has fewer side effects than gastric bypass surgery.

**Risks:**

- It's not reversible.
- You must take supplements for life.
- Complications are uncommon but can include:
  - Bleeding
  - Infection
  - Heartburn
  - Hernias
  - Scarring
  - Leaking from the staple line
  - New or worse acid reflux

### GASTRIC BYPASS SURGERY

**What it is:** Your surgeon seals off the top part of your stomach to create an egg-size pouch. The pouch is attached to your small intestine, bypassing most of your stomach and upper intestine. The rest of your stomach is attached lower on the small intestine. This surgery is almost always done with a minimally invasive laparoscope, with small incisions. You will probably spend one or two nights in the hospital.

**How it works:** You feel full after small meals, so you eat less. Your body absorbs fewer calories and nutrients. Your stomach sends different signals to the brain that change your metabolism, reducing your appetite.

**Is it right for me?** Gastric bypass may be recommended if:

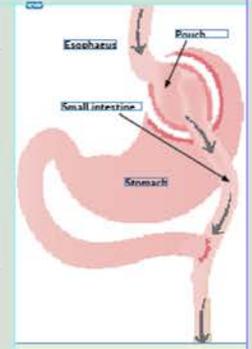
- You have a high weight-loss goal.
- You have type 2 diabetes or acid reflux disease. Many gastric bypass patients see dramatic improvement.

**Benefits:**

- Gastric bypass can achieve slightly higher weight loss than gastric sleeve.
- It can be an effective treatment for type 2 diabetes and acid reflux disease.

**Risks:**

- It's not reversible.
- You must take supplements for life.
- Complications are uncommon but can include:
  - Intestinal connection leaks
  - Blood clots and bleeding
  - Pneumonia
  - Infections
  - Hernias
  - Ulcer
  - Narrower intestinal connections



Gastric bypass surgery

Paste New Slide Layout Reset Section

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Convert to SmartArt Picture Shapes Text Box Arrange Quick Styles Shape Fill Shape Outline



We've offered the **Raleigh community** space-saving solutions for the past 10 years.

PLACE STAMP HERE

Recipient Name  
Street Address  
City, ST ZIP Code



**SPRING CLEANING WITH FABRIKAM**

- Cut ⌘X
- Copy ⌘C
- Paste ⌘V
- Paste Special...
- New Slide ⌘N
- Duplicate Slide ⌘D
- Delete Slide
- Hide Slide
- ✓ Ruler
- Guides ▶
  - Add Vertical Guide
  - Add Horizontal Guide
  - Delete
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Snap to Grid

Custom Newsletter.pub - Publisher

File Home Insert Page Design Mailings Review View TeachUcomp Teacher

Change Template Options Margins Orientation Size Guides Align To Delete Move Rename

Apex Aspect Black & ... Civic Concourse Equity Flow Foundry Median Metro Module Office

Fonts Apply Image Background Master Pages

Pages

Layout Guides

Margin Guides Grid Guides Baseline Guides

Column Guides

Columns: 3 Spacing: 0.1"

Row Guides

Rows: 1 Spacing: 0.1"

Add center guide between columns and rows

Preview

OK Cancel

In Publisher, you can only apply shape formatting to the object even if the shape contains text. To apply text formatting to text contained within an object, you must click into the text within the object and then select the name and function of each button. Note that some buttons, such as the "Font Color" button, have a small dropdown arrow on them that you can click to select a choice from a dropdown menu. Other

Page: 1 of 1 90%

Word File Edit **View** Insert Format Tools Table Window Help

Document2 (Recovered)

Search in Document

Share

Home Insert Design

Margins Orientation Size

- ✓ Print Layout
  - Web Layout
  - Outline
  - Draft
- ✓ Ribbon Sidebar
  - Message Bar
- ✓ Ruler
  - Header and Footer
  - Footnotes
  - Master Document
- ✓ Markup
  - Reveal Formatting
  - Zoom
- ✓ Gridlines
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Mailings Review View Acrobat **Table Design** Layout

Indent Spacing

Left: 0" Before: 0 pt

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Position Wrap Text Bring Forward Send Backward Selection Pane Align Group Rotate

1 2 3 4 5 6 7 8



2018  
FALL  
FEST

Page 1 of 1 100 words English (United States) 157%

Use **HIERARCHY** to  
signal order of importance.

# We're breaking ground in so many ways.

We're bringing research, healing and family well-being to one place, with each part lifting the others to new heights.

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## Our Research

- [Our technologies](#) >
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# MINDFULNESS PARENTING ~ study

## Participants needed for:

- **4 week trial**
- Currently looking for **parents of school-aged children** to complete 5 minutes of mindfulness techniques daily and report about the experience on a weekly basis.

## Study involves:

- **Online questionnaire** (approximately 20 minutes)
- **Mindfulness training** (to be completed online taking approximately 10 minutes), which involves reading activity descriptions and using guided practice
- Completing five-minute mindfulness exercises 5-7 days per week for 4 weeks
- Reporting on experience

All inquiries are confidential

**For more information please contact: [krystle.trautz@my.calsouthern.edu](mailto:krystle.trautz@my.calsouthern.edu)**



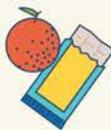
Use **CONTRAST** to  
create separation and direct attention.

# The Four Cs of Parenting



## Choices

Providing your child with choices that fit reasonable constraints allows her to practice decision-making and build a sense of autonomy and growing independence. But you must remain firm about which options are available. An example: "You can either choose to clean your room before you go out to play, or you can clean your room after you play, but will have to come inside 30 minutes earlier. What would you like to do?" You have given her the opportunity to choose how she will complete her work, but within limits that are acceptable to you.



## Consequences

Consequences can be either good or bad, but it is important that your child grasp that consequences are a result of his choices. Providing consequences that make sense will allow your child to understand how his choices will influence outcomes. For example, "You can either choose to speak respectfully right now, or you will need to take some time in your room."

## Consistency

Mean what you say and say what you mean. This principle helps young people gain a stable sense of how to interact with other people. Although your child will eventually encounter people who will be emotionally or behaviorally inconsistent with her, she needs you to offer the kind of consistency that creates a positive standard. It will support disciplinary action when she knows you mean what you say. Note: Parents should always be on the same page.



## Care

No matter what you do, your child must sense that you are acting out of love. It is important to remind him that you are acting because you love and care about him, especially in moments of conflict. A good example is, "I would not be a good mom if I allowed you to think it is alright to hit other children."



Use **WHITE SPACE** to  
improve comprehension, guide  
attention, and let the eye rest.



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Support



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Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived not only five centuries, but also the leap into electronic typesetting, remaining essentially unchanged. It was popularised in the 1960s with the release of Letraset sheets containing Lorem Ipsum passages, and more recently with desktop publishing software like Aldus PageMaker including versions of Lorem Ipsum



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## When your child goes home

While your child is at Doernbecher, you and your child's healthcare team will plan for the day your child goes home. The doctors and nurses will talk with you about the care your child will need at home.

- If you think your child will go home soon, bring:
- Clothes for the trip home
  - Booster or car seat if your child needs one
  - Your insurance card if you will need to fill any prescriptions before you leave.

Please pack any personal belongings and arrange for a ride so you can leave shortly after your child's doctor says your child is ready to go home.

Before you go, your child's nurse will give you written instructions on what to do at home. This will include a phone number to call with questions or concerns. If your child will need additional services or follow up appointments after leaving Doernbecher, we will also give you that information. If you have questions about going home, please ask your child's nurse or another member of the healthcare team.

### Questions to ask before leaving

- \_\_\_ Whom should I call with questions or concerns?
- \_\_\_ How will my child feed at home (acting normally, sleeping a lot, eating less than usual)?
- \_\_\_ Are there any symptoms I should be concerned about (fever, vomiting, pain or other symptoms)?
- \_\_\_ What medicines are my child going home with?
- \_\_\_ What is each medicine for?
- \_\_\_ What are the side effects?
- \_\_\_ How long should my child take the medicines?
- \_\_\_ If my child stopped taking regular medicines in the hospital, should he or she start taking them again?
- \_\_\_ When should I get refills for my child's medicines?
- \_\_\_ Does my child need any treatments at home?
- \_\_\_ What information is Doernbecher sending to my child's primary care provider (regular doctor or nurse)?
- \_\_\_ Does my child have any healthcare needs that will change our family routines?

\_\_\_ What activities are OK for my child at home and at school (taking a shower or bath, playing, doing homework, doing chores, food and activity restrictions, recess, gym)?

\_\_\_ When is my child's next appointment? Should my child be seen by the primary care provider before the next specialty appointment?

\_\_\_ What information does my child's school need from the healthcare team?

### After your child is home

You might notice changes in your child's behavior after he or she comes home from the hospital. These might include:

- Changes in sleep patterns (sleeping more or less than usual, having bad dreams or waking up at night).
- Fear of leaving you or leaving home.
- Returning to old behaviors like thumb-sucking or temper tantrums.

These changes are normal for children who have spent time in the hospital. Usually, they do not last more than a few days or weeks.

Talk with your child about fears or anxieties, and reassure your child. If behavior changes last more than a few days or weeks, talk to your child's primary care provider (regular doctor or nurse).

### Your pediatric nurse care manager

If you are arranging for your child's healthcare at home, a pediatric nurse care manager can help. Nurse care managers can help you find:

- Home health care
- Community health nurses
- Home medical equipment
- Community placements
- Medical transportation

If your child will need healthcare support services or equipment at home, please ask your child's nurse or call Care Management at 503 494-3273.

We offer professional development opportunities to providers around the state so they can stay current on the latest treatment recommendations for kids.

OHSU Doernbecher is an integral part of the Oregon Clinical and Translational Research Institute (OCTRI), one of 12 NIH-funded centers in the nation to promote translational research.



| Medications  |  |
|--|--|
| What medicine(s) does my child need to take when they leave the hospital? Does my child take the same medicines that they took before they went into the hospital? |  |

| For each medication:  |  |
|---|--|
| What is the name of this medicine? Is this the generic or brand name? |  |
| Why do does my child take this medicine?                              |  |
| When and how do should I give this medicine to my child?              |  |

|   |  |
|---|--|
| How much do I give?   |  |
| What does this medicine look like?  |  |
| What are potential side effects of this medicine? What problems do I need to look out for?                      |  |
| Will this medicine interfere with other medicines, foods, vitamins, or other herbal supplements my child takes? |  |
| Where and how do I get this medicine?   |  |
| What medicines can I give my child for pain? Upset stomach? Headaches? Allergies?                               |  |

# The Four Cs of Parenting



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Working with  
**TYPOGRAPHY**

Helvetica

Futura

Bembo

Typefaces of | the same size | look different sizes  
| because they | have varying | x-heights |

Bodoni

Bernhard Modern

Times New Roman

Use the equivalent of  
12 pt Times New Roman x-height  
**FOR MOST AUDIENCES.**



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Sleep Medicine Program Administrator  
Neurology Sleep Medicine

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There is inconclusive evidence that either *serif* or *sans serif* type is more legible.

**LEARN TO SEE READABILITY**

and then make decisions in context.



## Planning for your arrival

You can do some planning to make your child's stay at Doernbecher easier.

### Plan to bring:

- Personal items (toothbrush, toothpaste, lotion)
- Robe and slippers
- Glasses, if your child wears them
- Payment for any insurance co-pay or deductible that your plan requires
- Insurance billing information

### Leave at home:

- Valuables (if your child wears jewelry or a watch, please leave them at home)
- Electrically operated appliances
- Medicines (unless your child's doctor tells you to bring them)

### Where to check in

The doctor's office will give you instructions and information about where to check in to Doernbecher. If you do not receive this information, please call the doctor's office. If it is the night before or the same day your child is admitted to the hospital, call the operator at 503-494-8311, or DCH Admitting at 503-418-5313. Admitting will need to know why your child is coming to the hospital and your doctor's name.

### Parking for families and visitors

Patients and visitors to Doernbecher may park for free in the lot directly in front of the main entrance, in marked spaces in the

lower lot and on the lower floors of the parking garage to the west of Doernbecher.

If you cannot find parking, please see the attendant at the main entrance for a permit and directions.

### Staying with your child in the hospital

If you are a parent or primary caregiver, we encourage you to spend the night at Doernbecher with your child. This can make your child feel more comfortable. Each patient room is private and has space for one or two parents to sleep.

If you are a mother who is also nursing a baby, the baby may stay with you in your child's room. Other siblings may not spend the night, so please make plans for your other children.

Your child will be provided a bed according to their age and developmental level. For safety reasons, please do not share a sleeping surface with your child.

### Lodging

There are many lodging options for patients who come to OHSU from out of town. Some of them offer OHSU patients a discounted rate, so please ask for the most up-to-date rate when checking on availability or making your reservation. Visit [www.ohsuhealth.com/lodging](http://www.ohsuhealth.com/lodging) for a complete list that includes hotels, motels, bed and breakfasts, and RV and Trailer Parks.

For information about the Ronald McDonald House, visit [www.ohsidoernbecher.com/ronaldmcdonald](http://www.ohsidoernbecher.com/ronaldmcdonald).

OHSU Doernbecher is one of only 19 clinical research groups nationwide selected to participate in the NIH's Rare Diseases Clinical Research Network (RDCRN), offering access to two major clinical trials and six pilot research studies.

We are national leaders in the diagnosis and treatment of children with neurological disorders. Each year we see more than 4,000 patients in our neurosciences program, more than anywhere else in Oregon.

## Services

We provide a variety of resources to make you and your child comfortable during your stay at OHSU Doernbecher, including services that may be helpful to your visiting family and friends.

### Concierge services

503-418-1818

OHSU's concierge staff are here to make your stay more comfortable and to provide information to your visitors. The concierge can assist with hospital information, directions and locations for dining and lodging.

### Oregon Fresh room service

503-494-1111

Once your child settles into a room, a room service associate from OHSU's Food and Nutrition Department will meet with you to talk about meals. Our nutritional program allows your child to choose what he or she wants to eat (based on diet orders) from a restaurant-style menu and to order when hungry. Place orders over the phone and delivery is within 45 minutes. This service is available 6:30 a.m. – 8:30 p.m.

### Play areas

An outdoor play structure is located outside of the Doernbecher lobby level, behind Starbucks. Use the doors just past Starbucks and look for the play structure on the right. Patients and their families can also enjoy the outdoor courtyard on the 9th floor.

### Pharmacy

888-279-9211

The OHSU Doernbecher Children's Hospital Pharmacy is on the 7th floor in the Outpatients Clinics area. The pharmacy is open Monday–Friday, 9 a.m. – 5:30 p.m. [www.ohsuhealth.com/pharmacy](http://www.ohsuhealth.com/pharmacy).

### Lactation

503-418-4500

Doernbecher's lactation consultants help mothers and babies who are having problems with breastfeeding. A team of nurses who are Board Certified Lactation Consultants work with patients during hospital stays or for follow-up.

### Spiritual care

A team of chaplains serve Doernbecher patients and families for spiritual guidance, prayer, emotional support and comfort. We provide counseling to anyone who asks. You do not need to be a member of any particular faith. Chaplains are available Monday–Friday, 9 a.m. – 5 p.m., and on an emergency basis on weekends and evenings.

### Meditation room

Doernbecher has a peaceful meditation room on the 10th floor for patients and families.



Don't use more than  
two typefaces unless you're  
**REALLY ADVANCED.\***

\* I mean it. That's what fonts are for!

# Working with **COLOR**

Color palettes should be  
**LIMITED AND INTENTIONAL.**





VISUAL IDENTITY GUIDELINES – COLOR

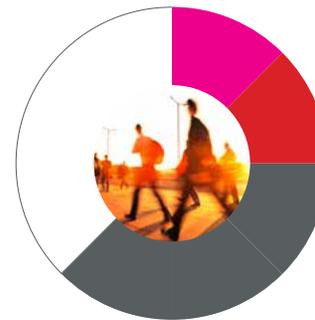
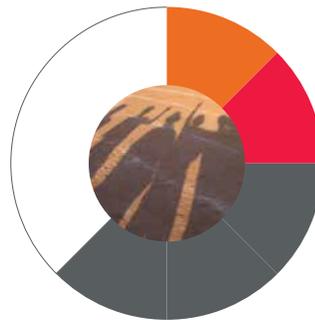
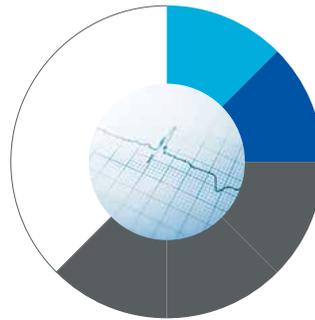
# Usage Ratios

The charts at right demonstrate the general ratios in which color, photography and white space should be used in designing for the OHSU brand.

The neutral color, OHSU Charcoal, provides a strong and sophisticated background against which accent colors — and carefully selected photography — can appear to their best advantage.

As much as possible, look for photography that works with the color palette in terms of tonality. Choose photos that complement and work aesthetically with the temperature of the design. Consider incorporating a duotone image into the design as well.

Additionally, think of white space as a “color” and incorporate ample amounts into the design as much as possible.



Your design should work well  
in black and white first.

That's a signal you've thought about  
hierarchy and contrast.

## Protect yourself from **shingles** ... Get vaccinated!

### What is shingles?

Shingles is a painful disease caused by the same virus that causes chickenpox. It is also called zoster.

Shingles usually includes a painful rash with blisters that can occur anywhere on your body, even the face and eyes.

The main symptom of shingles is severe pain. Some people have compared it with the pain of childbirth or kidney stones.

### Is it serious?

Get vaccinated against shingles if you're 50 or older!

Yes. For about 1 out of 5 people with shingles, severe pain can continue for months, or even years.

This long-lasting pain can be so bad that it interferes with eating and sleeping. Some people with severe pain from shingles have even committed suicide.

Although some medicines can help treat shingles, there is no cure.



### Am I at risk?

Anyone who has ever had chickenpox can get shingles. You are more likely to develop shingles as you get older.

### How can I protect myself from shingles?



The best way to prevent shingles and its serious complications is to get vaccinated. Two shingles vaccines are available in the U.S. – Shingrix and Zostavax.

You should get the shingles vaccine (Shingrix) if you are age 50 years or older, even if you've already had shingles or already received the older shingles vaccine (Zostavax). It is possible to get shingles more than once.

► For more information, visit [www.vaccineinformation.org](http://www.vaccineinformation.org)

For other vaccine handouts in this series, visit [www.immunize.org/vaccine-summaries](http://www.immunize.org/vaccine-summaries)

immunization  
action coalition  
**IAC**  
immunize.org

Technical content reviewed by the Centers for Disease Control and Prevention  
Saint Paul, Minnesota • [www.immunize.org](http://www.immunize.org)  
[www.immunize.org/catg.d/p4434.pdf](http://www.immunize.org/catg.d/p4434.pdf) • Item #P4434 (5/18)

## Summary of Recommendations for Adult Immunization (Age 19 years and older)

| Vaccine name and route   | People for whom vaccination is recommended   | Schedule for vaccination administration (any vaccine can be given with another unless otherwise noted)  | Contraindications and precautions (mild illness is not a contraindication)  |
|--|--|---|---|
| <p><b>Influenza Inactivated influenza vaccine (IIV*)</b><br/>Give IM</p> <p>* includes recombinant influenza vaccine (RIV)</p> <p>Live attenuated influenza vaccine (LAIV)<br/>Give NAS (intranasally)</p> | <p>For people through age 18yrs, consult "Summary of Recommendations for Child/Teen Immunization" at <a href="http://www.immunize.org/catg.d/p2010.pdf">www.immunize.org/catg.d/p2010.pdf</a>.</p> <ul style="list-style-type: none"> <li>Vaccination is recommended for all adults.</li> <li>Adults age 18 through 64yrs may be given any intramuscular IIV product (Fluzone, Fluvirin, Afluria, Flucelevax, Fluarix, FluLaval), or RIV3/RIV4 (FluBlok).</li> <li>Adults age 18 through 64yrs may be given intramuscular IIV (Afluria) with a needle and syringe or using a jet injector (Stratis).</li> <li>Adults age 65yrs and older may be given any standard-dose IIV referenced in the second bullet above, Flud, or high-dose IIV (Fluzone High-Dose), or RIV3/RIV4.</li> </ul> <p><b>Note:</b> Healthcare personnel who care for severely immunocompromised persons (i.e., those who require care in a protective environment) should receive IIV rather than LAIV. For information on other contraindications and precautions to LAIV, see far right column.</p> | <ul style="list-style-type: none"> <li>Give 1 dose every year in the fall or winter.</li> <li>Begin vaccination services as soon as vaccine is available and continue until the supply is depleted.</li> <li>Continue to give vaccine to unvaccinated adults throughout the influenza season (including when influenza activity is present in the community) and at other times when the risk of influenza exists.</li> <li>If 2 or more of the following live virus vaccines are to be given – LAIV, MMR, Var, ZVL, and/or yellow fever – they should be given on the same day. If they are not given on the same day, space them by at least 28d. May use as post-exposure prophylaxis if given within 3d of exposure.</li> </ul> | <p><b>Contraindications</b></p> <ul style="list-style-type: none"> <li>History of severe allergic reaction (e.g., anaphylaxis) to any component of the vaccine (except egg) or after a previous dose of any influenza vaccine.</li> <li>For LAIV only: pregnancy; immunosuppression; receipt of specific antivirals (i.e., amantadine, rimantadine, zanamivir, oseltamivir, or peramivir) within the previous 48hrs. Avoid use of these antiviral drugs for 14d after vaccination.</li> </ul> <p><b>NOTE:</b> People with egg allergy of any severity can receive any recommended and age-appropriate influenza vaccine (i.e., any IIV, RIV, or LAIV) that is otherwise appropriate for their health status. People having had a previous severe reaction to eggs involving symptoms other than hives should be administered vaccine in a medical setting (e.g., a health department or physician office) and should be supervised by a healthcare provider who is able to recognize and manage severe allergic conditions.</p> <p><b>Precautions</b></p> <ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever.</li> <li>History of Guillain-Barré syndrome (GBS) within 6wks following previous influenza vaccination.</li> <li>For LAIV only: Chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, neurologic, hematologic or metabolic (including diabetes) disorders; immunosuppression (including that caused by medications or HIV).</li> </ul> |
| <p><b>Td, Tdap (Tetanus, diphtheria, pertussis)</b><br/>Give IM</p>  | <p>For people through age 18yrs, consult "Summary of Recommendations for Child/Teen Immunization" at <a href="http://www.immunize.org/catg.d/p2010.pdf">www.immunize.org/catg.d/p2010.pdf</a>.</p> <ul style="list-style-type: none"> <li>All people who lack written documentation of a primary series consisting of at least 3 doses of tetanus- and diphtheria-toxoid-containing vaccine.</li> <li>A booster dose of Td or Tdap may be needed for wound management, so consult ACIP recommendations.<sup>1</sup></li> </ul> <p><b>For Tdap only</b></p> <ul style="list-style-type: none"> <li>Adults who have not already received Tdap or whose Tdap history is not known.</li> <li>Healthcare personnel of all ages.</li> <li>Give Tdap to pregnant women during each pregnancy (preferred during the early part of gestational weeks 27 through 36), regardless of the interval since prior Td or Tdap.</li> </ul>  | <ul style="list-style-type: none"> <li>For people who are unvaccinated or behind, complete the primary Td series (3 doses with an interval of 1–2m between dose #1 and #2, and an interval of 6–12m between dose #2 and #3); substitute a one-time dose of Tdap for one of the doses in the series, preferably the first.</li> <li>Give Td booster every 10yrs after the primary series has been completed.</li> <li>Tdap should be given regardless of interval since previous Td.</li> </ul>  | <p><b>Contraindications</b></p> <ul style="list-style-type: none"> <li>Previous severe allergic reaction (e.g., anaphylaxis) to this vaccine or to any of its components.</li> <li>For Tdap only, history of encephalopathy not attributable to an identifiable cause, within 7d following DTP/DTaP, or Tdap.</li> </ul> <p><b>Precautions</b></p> <ul style="list-style-type: none"> <li>Moderate or severe acute illness with or without fever.</li> <li>History of Guillain-Barré syndrome within 6wks following previous dose of tetanus-toxoid-containing vaccine.</li> <li>History of Arthus-type reaction following a prior dose of tetanus- or diphtheria-toxoid-containing vaccine (including MenACWY); defer vaccination until at least 10yrs have elapsed since the last tetanus toxoid-containing vaccine.</li> <li>For pertussis-containing vaccines only, progressive or unstable neurologic disorder, uncontrolled seizures, or progressive encephalopathy until a treatment regimen has been established and the condition has stabilized.</li> </ul>   |

This document was adapted from the vaccine recommendations of the Advisory Committee on Immunization Practices (ACIP) and also *Best Practices Guidance of the ACIP*. To view the full vaccine recommendations, visit CDC's website at [www.cdc.gov/vaccines/hcp/ACIP-recs/index.html](http://www.cdc.gov/vaccines/hcp/ACIP-recs/index.html) or, for the complete guidance document, visit [www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html](http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html)

This table is revised periodically. Visit IAC's website at [www.immunize.org/adultrules](http://www.immunize.org/adultrules) to make sure you have the most current version.

For the purposes of calculating intervals between doses, 4 weeks = 28 days. Intervals of 4 months or greater are determined by calendar months.

A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses.

Use color to  
**DRAW ATTENTION.**

BEGINS  
SEPT. 16  
4 P.M.

# SOLO PARENT SUPPORT GROUP

FIND SUPPORT  
FROM OTHER  
SINGLE  
PARENTS

EVERY  
SUNDAY

Childcare Provided  
Childcare and information at  
[fumc.com/solo-parent](http://fumc.com/solo-parent)

**Single parenting** is not easy!  
We invite you to join our  
Solo Parenting Support Group.  
The class will help you find  
answers to questions such as,  
"How do I find peace when  
everything around me is  
in chaos?"

**Contact**  
Wesley Welch  
806.790.8237  
Shera Atkinson  
[satkinson@fumc.com](mailto:satkinson@fumc.com)

Use color to  
**DIFFERENTIATE.**



### Bedside Reporting Tips

#### Decide which family members or visitors should be present

with you during the meeting. We want to protect your privacy and will only talk about your health with others when you say it is okay.

#### Think about any concerns and questions

you have and write them down. This is the perfect time to speak up.

#### Let us know if something is confusing.

If the nurses use any words or share information that you don't understand, ask them to explain it.

## Communicating with your team

Good communication is critical to ensure we provide the best care possible. Please ask questions and tell us about any special needs you may have so that we can help you recover as quickly as possible.

### Family spokesperson

We recommend that you designate a trusted relative or friend as your family spokesperson — a person who can help with communications and keep other family and friends informed while you're in the hospital.

### Healthcare agent or proxy

Tell us who you would want to speak for you in the event you are unable to speak for yourself. This may include loved ones not legally related to you, such as a non-registered domestic partner, significant other or foster parent.

### Bedside reporting

When your nurse is about to go off duty and transition your care to a new nurse, they will meet at your bedside to talk about your care before a shift change. This gives you a chance to meet the nurse taking over your care, ask questions and share important information. During a bedside report, the nurses will:

Introduce your new nurse to you and anyone with you.

Talk with you about your health.

Check the medicines you are taking.

Ask what could have gone better during the last shift.

Answer any questions you may have.

Bedside reporting gives you and your family the chance to be more involved in your care.

### Patient and family rounding

In addition to bedside reporting, on some units in the hospital, the care team performs rounds. Rounds are a structured time for doctors, nurses and representatives from other departments to discuss your health, results from labs and procedures, goals for the day and recommendations for next steps. The care team generally gathers in front of your room with a computer to discuss your health and care plan. You and your family spokesperson are encouraged to participate in rounds. Your questions and input help the team make the best decisions for you.



### Medication Safety Tip

When you are brought medicines or IV fluids in the hospital, **make sure your care provider checks your ID bracelet** and asks for your name and other identifiers such as your date of birth. This ensures that you are receiving the right medicines.

### Medications in the hospital

The proper use of medications is important for your health and safety. The key is communication.

#### ALLERGIES AND REACTIONS



Make sure your healthcare team knows any allergies or side-effects you have had to any medications in the past, including reactions to anesthesia, foods, latex products or other environmental allergens.

#### MEDICATIONS BEFORE YOUR HOSPITAL STAY



Tell your healthcare providers about all prescription and over-the-counter medicines, herbal vitamin supplements, natural remedies and recreational drugs that you were taking before you came to the hospital. It may be helpful to keep a list of these with you at all times.

#### MEDICINE FROM HOME



While you are in the hospital, **DO NOT** take any of your medications from home unless those medications **AND** the correct dose have been approved by your doctor. Make sure to tell your nurse if you do take your own medication.

#### HOSPITAL MEDICATION



Don't be afraid to ask questions regarding your medications, especially during your hospital stay. It is important that you and your caregiver know details regarding your medication plan. You should always ask:

- What is the name of the medication?
- Why do I need to take it?
- How much should I take and at what times?
- What are the possible side effects?

Working with  
**IMAGERY**

Imagery should be  
**FAMILY-CENTERED.**







Imagery should be  
**INCLUSIVE.**







Consider an interesting  
**ANGLE OR VIEWPOINT.**







Avoid shots that looks too  
**POSED OR STAGED.**





## **SCALE MATTERS**

One large image can have more visual impact than several small images.



Cuarto Anual

# Parenting PalOOza

Para mujeres embarazadas y familias con hijos menores de 12 meses que viven en el condado de Essex!

**¡Entrada gratuita, almuerzo, fotos, y rifas!**

**¡Talleres y actividades divertidos y interactivos!**

Yoga para mí y mi bebé

Desestresar y relajarse

Música juntos®

Masaje Infantil

¿Por qué amamantar? Lactancia 101

Preparación para el parto

El desarrollo y el juego de mi bebé

Y estaciones de actividad



Fecha: 2 de junio del 2017

Horario: 10am-3pm

Lugar: Newark, NJ

¡El espacio es limitado y se requiere pre-registro!

Llame al: 973-621-9157

¡Regístrese hoy!

¡Síguenos!  

[www.essexpregnancyandparenting.org](http://www.essexpregnancyandparenting.org)



En alianza con:

Patrocinado por:



Horizon Blue Cross Blue Shield of New Jersey



PROJECT LAUNCH  
Helping children soar



# Mindful Fathering®

## NEXT GROUP SERIES STARTS

February 25, 2019 (ends May 20th)  
Monday's from 5:30-8pm (No class March 25)  
*This program is FREE and dinner will be provided.*

**YWCA York Board Room**  
320 E. Market Street, York PA

To learn more, make a referral, or self-refer, please contact:

**Ruby Martin, YWCA York Chief**  
Child and Youth Program Officer  
717-845-2631, ext 119 [rmartin@ywcayork.org](mailto:rmartin@ywcayork.org)  
Pre-Registration is required.



Developed by Yorktown Family Services, **Mindful Fathering** is a 12-week psycho-educational group program for fathers who desire to raise children in a violence free environment or may have exposed their children, of any age, to intimate partner violence. Welcoming men of all backgrounds, orientations and cultures, this evidence-informed, early intervention program helps fathers learn to reduce harm, improve mental health, and make positive changes in their lives and their relationships with children and women.

- ✓ develop a personal vision for change by identifying hopes for the future, setting goals, and working together to overcome barriers
- ✓ explore personal narratives to see how the past affects the present
- ✓ increase awareness of attitudes regarding masculinity and gender roles that contribute to partner abuse and child maltreatment
- ✓ increase understanding of the impact of abuse on children and partners
- ✓ increase responsibility for own behaviours, including abuse
- ✓ learn effective ways of dealing with anger and aggression, including using mindfulness to help regulate emotions
- ✓ increase knowledge about child development, attachment, and appropriate expectations  
learn new skills in parenting, relationships
- ✓ improve parent/child relationships, co-parenting relationships, relationships in general



**Oregon Health & Science University (OHSU)**

February 21 at 4:00 PM · 🌐

What is the No. 1 way to increase lean body mass and reduce sarcopenia (loss of muscle mass and VO2Max)? Resistance exercise and strength training.



NEWS.OHSU.EDU

**Prescription for aging: Resistance exercise and strength training**

👍❤️ 17

1 Comment 9 Shares



**Oregon Health & Science University (OHSU)**

February 20 at 9:53 AM · 🌐

“My number one goal is to deliver the highest quality and safest possible care to all Oregonians,” said John Ma, M.D., F.A.C.E.P., professor and chair of emergency medicine in the [OHSU School of Medicine](#). “People walking into any of the emergency departments we staff should have the same outstanding service and quality of care. We are making that a reality through our regional partnerships.”

Clinicians joining the OHSU health system today could be stationed anywhere from The Dalles to Portland to Astoria, and emergency medicine is a prime example of the growing OHSU campus.



NEWS.OHSU.EDU

**Staffing emergency departments across Oregon**

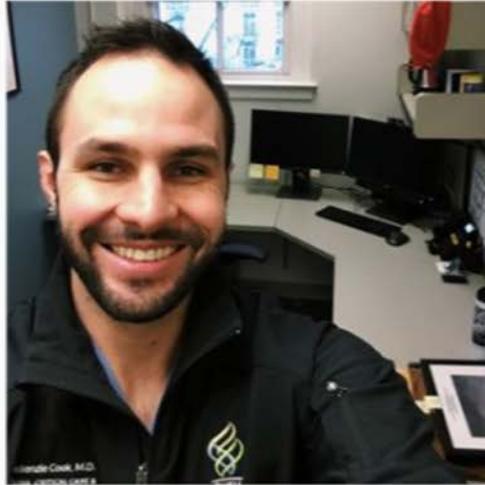
OHSU sends board-certified emergency medicine physicians to staff...

👍❤️ 102

5 Comments 8 Shares



Search



## **SCALE MATTERS**

Consider how many pieces of visual information (shapes) make up your image.

EL CENTRO DE AMISTAD PRESENTS:



## MAKE PARENTING A PLEASURE

A SERIES OF WORKSHOPS  
TO HELP FAMILIES

### MAKING PARENTING A PLEASURE

has been proven to help families of young children alleviate family stress. Parenting is the most challenging and important job there is.

This thirteen-session course gives families strategies and skills that will reduce family stress, help parents understand and communicate more effectively with their children, and help parents provide positive and effective discipline.

This series is for any parent who wants to improve their parenting skills and help their child to be more successful.

CLASSES BEGIN WEDNESDAY, NOVEMBER 8, 2017 | 9:00AM - 11:00AM  
WEST VALLEY LOCATION: 7038 OWENSMOUTH CANOGA PARK, CA  
[WWW.ECDA.ORG](http://WWW.ECDA.ORG)

FREE OF  
COST  
LIMITED SPACES  
AVAILABLE



# RESILIENT PARENTING

RISE ABOVE THE DAILY STRESSORS

*Thursday, March 9<sup>th</sup> 2017 @ 7:00pm*



**THIS IS A COMPLIMENTARY EVENT OPEN TO THE PUBLIC**

PRESENTED BY: JEN GENTILE

HOSTED BY :

THE JEWELS INSTITUTE, A 501(C)3 ORGANIZATION

3 THE BOULEVARD, NEW ROCHELLE, NY 10801

FOR MORE INFO: 917-715-1702 OR [WWW.JENGENTILE.COM](http://WWW.JENGENTILE.COM)

TO RSVP EMAIL [FRONTDESK@CSJINC.COM](mailto:FRONTDESK@CSJINC.COM)

🏠 Oral Health home

Oral Health Basics —

Children's Oral Health —

Protecting Your Child's Teeth

Adult Oral Health +

Disparities in Oral Health

Oral Health Conditions +

Community Water Fluoridation +

Dental Sealants +

Infection Prevention & Control in  
Dental Settings +

Oral Health Data Tools +

State-Based Oral Health  
Programs +

Research & Publications +

# Children's Oral Health

## Overview

Cavities (also known as caries or tooth decay) are one of the most common chronic diseases of childhood in the United States. Untreated cavities can cause pain and infections that may lead to problems with eating, speaking, playing, and learning. Children who have poor oral health often [miss more school and receive lower grades than children who don't](#).

- About 1 of 5 (20%) children aged 5 to 11 years have at least one untreated decayed tooth.<sup>1</sup>
- 1 of 7 (13%) adolescents aged 12 to 19 years have at least one untreated decayed tooth.<sup>1</sup>
- Children aged 5 to 19 years from low-income families are twice as likely (25%) to have cavities, compared with children from higher-income households (11%).<sup>1</sup>

The good news is that cavities are preventable. Fluoride varnish can prevent about one-third (33%) of cavities in the primary (baby) teeth.<sup>2</sup> Children living in communities with fluoridated tap water have fewer cavities than children whose water is not fluoridated.<sup>3</sup> Similarly, children who brush daily with fluoride toothpaste will have fewer cavities.<sup>4</sup>

Dental sealants can also prevent cavities for many years. Applying dental sealants to the chewing surfaces of the back teeth prevent 80% of cavities.<sup>5</sup>



# CONSISTENT VISUAL STYLE

Whether using illustrations or photography, your images should feel like they came from the same artist.

### Four important steps!

The best ways to make sure your loved ones and other residents don't get sick is to:

- Stay home when you're sick – this is the most important one!
- Cover your coughs and sneezes – completely!
- Wash your hands well – especially after going to the bathroom, and before eating
- Get your flu shot – it protects you and those around you.

### Can I visit if I'm only a little bit sick?

If we get a cold or flu-like virus, we're usually sick for a couple days, maybe a week if it's the flu – and then we're okay again.

Seniors do not have as good immune systems as we do, so if they catch the flu or another virus, it can lead to serious health problems, and in some cases, death.

That's why it's so important not to visit when you're sick – even if you think you're "just a little bit" sick. A minor sickness to you may be a very dangerous one to them!



With influenza (the flu), it's possible to spread the flu virus for an entire day before you even feel sick. That's why we recommend getting the flu vaccination – you'll protect yourself, your family, and your loved ones.

- VISITORS – REMEMBER:**  
Please do not visit if you have a fever, cough, diarrhea, nausea, and/or vomiting, or are feeling unwell. Help keep those germs away!
- Also:
- Follow instructions on signs.
  - Ask about any special visiting instructions.
  - Be understanding – the person you are visiting may be in good health, but others here may be in poor health, so it's important to keep germs away from everyone.

By following the simple steps in this brochure, you can help prevent the spread of germs to residents, staff, volunteers, and visitors. Thank you!

### The four steps:



For more information, visit

## Infection Control Information for Visitors to residential care facilities

Simple ways to protect your loved ones from influenza, norovirus, and other common infections



### Cover your cough – it's how germs travel!

Many infections, such as the common cold and the flu, are spread when people don't cover their cough or sneeze.



When a sick person coughs or sneezes, droplets spray out of their nose and mouth, and these droplets are full of germs. If another person breathes in these droplets, they can get sick. Some of the droplets land on surfaces, and if people touch these surfaces and then touch their mouth, nose, or eyes, the germs have found another way to get in. That's why you must cover your cough or sneeze when you're sick!



You can cover your cough or sneeze with a tissue or use your sleeve. You should never cough or sneeze into your hand, but if you do, make sure you clean your hands with soap and water or sanitizer immediately after.

If you cough or sneeze into a tissue, throw the tissue into the garbage right away, and clean your hands after – because germs can get through the tissue to your hands.

### Wash your hands so germs can't hitch a ride!

Another way germs like to travel is by hitching a ride on our hands. As we go through our day, we touch all kinds of things that other people have touched: door handles, bus seats, coins, elevator buttons... which means that we are constantly getting germs on our hands.



Every time you wash your hands or clean them with hand sanitizer, you remove or kill those germs. Washing your hands regularly is the best form of infection prevention.

### Sanitizer kills germs

Cleaning your hands is easy! The fastest way is with hand sanitizer.

- Apply a loonie-sized amount of your hands
- Rub all areas of your hands: palms, fingers, fingernails, thumbs, in between the fingers, and the backs of your hands.
- It should take about 15 seconds of rubbing for the sanitizer to dry; if it takes less time, you need to use more sanitizer.



Remember, sanitizer is safe and effective, and it does not build resistance in germs. It's a quick, easy, way to kill those germs – and you can carry a bottle of it in your pocket or handbag, which you can't do with a sink!

### Use soap and water when hands are dirty

If your hands are visibly dirty, then you need to wash with soap and water, because sanitizer won't remove dirt. To wash your hands:



### Hand cleaning stops the spread of germs!

Clean your hands often, especially after using the bathroom, before eating, and before visiting.

When you visit, you can also help your loved ones to wash their hands.



## all about CLEANING

### CLEANING AND DISINFECTING IS IMPORTANT

CLEANING AND DISINFECTING ARE THE BUILDING BLOCKS FOR PROPER INFECTION CONTROL PRACTICES IN YOUR BUSINESS. THEY ELIMINATE DISEASE CAUSING MICRO-ORGANISMS ON YOUR INSTRUMENTS, EQUIPMENT, AND SURFACES. CLEANING AND DISINFECTING HELPS STOP THE SPREAD OF DISEASE CAUSING MICRO-ORGANISMS THAT CAUSE INFECTIONS.

Your instruments and equipment may not look dirty but they are still a source of disease causing micro-organisms. That's why you must clean and disinfect them after each use. **Protect you and your clients.**

### ALL ABOUT CLEANING

Cleaning is a very simple, yet important step. It removes visible dirt and some micro-organisms from instruments, equipment and surfaces.

Always clean from the least soiled areas to the heaviest soiled areas, paying particular attention to doorknobs, sink taps, washrooms and workstations.



Utility gloves are suitable for cleaning and may be reused, but must be replaced if torn, cracked or showing signs of wear and tear.

Remember - do not soak dirty instruments in the disinfectant before cleaning as this can cause the disinfectant to corrode or damage your instruments.

To clean properly, you need detergent, warm water and scrubbing action. Scrubbing helps remove visible dirt and debris and allows the disinfectant to work properly and kill disease causing micro-organisms.



detergent



warm water



friction

= clean

## CLEANING TOOLS

**Ultrasonic cleaner:** A cleaning device that uses high frequency sound waves and an appropriate cleaning solution to agitate and loosen dirt and debris from soiled instruments.

These devices are used to clean delicate instruments instead of cleaning instruments by hand. Do not allow instruments to rest on the bottom of the device as it will prevent proper cleaning. Always follow the manufacturer's instructions and use the recommended cleaning detergent because others may limit the effectiveness of the ultrasonic cleaner. Ultrasonic cleaners only clean instruments, they do not disinfect or sterilize instruments.

Always ensure the ultrasonic cleaner lid is down when in use to prevent the aerosolization of micro-organisms.

**Mops:** Used to clean large surfaces such as floors. Make sure you wash and dry mop heads on a regular basis and replace when they are in poor condition. Any items used in the cleaning process should be cleaned and low level disinfected after each use.

**Brushes:** Used in the cleaning process to remove dirt and debris out of the cracks and crevices of the instruments. Choose the right size of brush for the size of the instruments you are cleaning. Clean and low level disinfect the brushes or other items that are used in the cleaning process after each use.

**Paper towels and cloths:** Used for surface cleaning such as workstations, countertops, phones and doorknobs. Paper towels are to be used once and discarded. However, cloths can be reused if you clean and dry them after each use. Remember to have multiple cloths on-site because you do not want to use the same cloth for all surfaces.

**One cloth for one surface**



### REMEMBER:

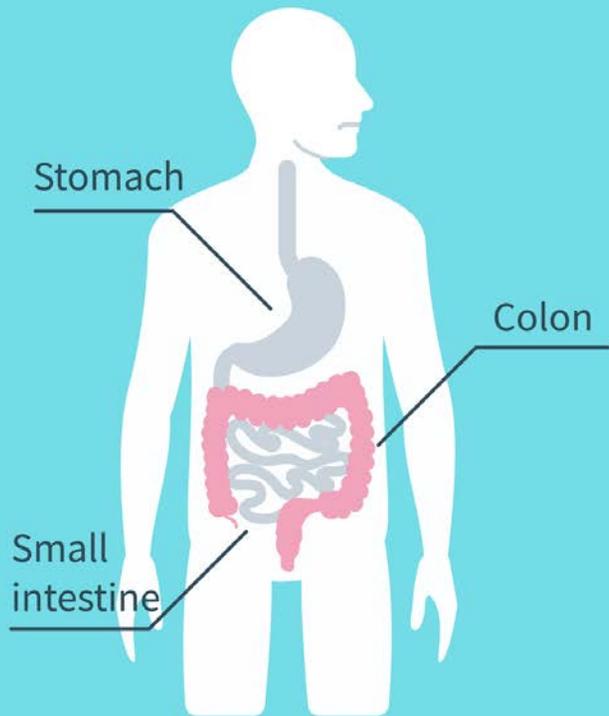
WEAR UTILITY GLOVES, A MASK AND GOGGLES TO PROTECT YOURSELF FROM SPLASHES TO THE FACE

ALL ABOUT CLEANING

# IBS

## SIGNS AND SYMPTOMS

Irritable Bowel Syndrome



Constipation and Diarrhea



Colon pain



Mucus in the stool



Bloating



Helicobacter pylori



Microflora

Making tough  
**CONTENT CHOICES**

Design is for  
**THE USER.\***

\* I mean it. Don't get attached.

A health literate organization makes it easier for people to **navigate, understand, and use** information and services to take care of their health.

— BRACH C. ANDRULIS

*“Integrating literacy, culture, and language to improve health care quality for diverse populations.”  
American Journal of Health Behavior*

User-oriented design is  
**EMPATHIC.**



The limits of  
**EMPATHY**

When trying to empathize, it's generally better **to talk with people about their experiences** than to imagine how they might be feeling....

— ADAM WAYTZ

*"The Limits of Empathy." Harvard Business Review*

OHSU SURGICAL SERVICES

## Preparing for your surgery



### Your surgery information

Date of surgery: \_\_\_\_\_ Do not eat or drink after: \_\_\_\_\_

Surgeon: \_\_\_\_\_

Location:

**OHSU Hospital**  
 Admitting: 9th floor hospital lobby  
 3181 S.W. Sam Jackson Park Road  
 Portland, OR 97239

**Center for Health & Healing, Building 2**  
 Admitting: 1st floor lobby  
 3303 S.W. Bond Ave.  
 Portland, OR 97239

| Take these medications as directed with a sip of water the morning of surgery: | Stop taking these medications: |
|--|--------------------------------|
|  |                                |
|  |                                |
|  |                                |
|  |                                |
|  |                                |
|  |                                |
|  |                                |
|  |                                |

**Other appointments:**

Doctor: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Doctor: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Tests and follow-up:**

EKG: \_\_\_\_\_  X-ray: \_\_\_\_\_

Lab: \_\_\_\_\_  Occupational therapy: \_\_\_\_\_

MRI: \_\_\_\_\_  Physical therapy: \_\_\_\_\_

**An EKG**, also written ECG, is a heart test called an “electrocardiogram.” This test measures your heart’s electrical activity. It is done before surgery to learn if your heart’s activity is normal.

**An MRI** is a picture of the inside of the body. MRI stands for “magnetic resonance imaging.” You might have one before surgery to show the area that needs treatment.

We focus on users and what  
**THEY WANT TO KNOW,**  
not on what we want to tell them.

- Clinical Trials
  - Healthcare**
  - Who We Are
  - Healthcare Services
  - OHSU Near You
  - For Patients and Visitors
  - How You Can Help
  - Clinical Trials
  - Health Information
  - For Health Care Professionals
  - Contact Us
- 
- Quick Links**
  - MyChart 
  - Find a Doctor
  - Find Conditions, Treatments and Clinics
  - Maps and Directions
  - Contact OHSU

# Brintha Enestvedt, M.D., M.B.A.



[Faculty profile](#)  
 Assistant professor of medicine, Division of Gastroenterology and Hepatology  
 Assistant Professor of Medicine, Division of Gastroenterology and Hepatology, School of Medicine

● Accepting new patients  
 ★★★★★  
 4.6 out of 5 (149 Ratings, 49 Comments)

## Expertise

Cancer, Digestive Health  
 Special focus on Colorectal Cancer, Esophageal Cancer, Gastroenterology, Gastrointestinal Cancer, Liver Cancer, Pancreatic Cancer

## Education

M.D., Northwestern University Feinberg School of Medicine, Chicago Illinois 2005  
 M.B.A., Northwestern University Kellogg School of Management, Evanston Illinois 2005

**Residency:**  
 Internal medicine, Oregon Health & Science University, Portland, OR, 2005-2008

**Fellowship:**  
 Gastroenterology, Oregon Health & Science University, Portland, OR, 2008-2011

**Certifications:**  
 Internal medicine, 2008; gastroenterology, 2011

## Biography

Dr. Enestvedt emigrated from Malaysia at a very early age to New Jersey. Her medical education brought her steadily west to Portland, Oregon after completing medical and business school in Chicago at Northwestern University. After her internal medicine residency and gastroenterology fellowship at OHSU, she completed an advanced endoscopy fellowship at the University of Pennsylvania, focusing on ERCP, endoscopic ultrasound, double balloon enteroscopy, luminal stents and esophageal and colonic endoscopic mucosal resection. She served as gastroenterology faculty at Temple University

[Email this page](#)   
[Print this page](#) 

**Make an Appointment**  
 (503) 494-4373 

**Physician Referrals**  
 503 494-8311 

- I see patients at
- Multidisciplinary Liver Tumor Program  
[Directions](#)
  - Gastroenterology  
[Directions](#)
  - Digestive Health Center  
[Directions](#)
  - Pancreatic cancer  
Portland  
[Directions](#)
  - Esophageal cancer  
[Directions](#)
  - Pancreatic Diseases  
[Directions](#)
  - Colorectal cancer  
[Directions](#)



## Tomasz M. Beer

M.D., F.A.C.P.

- Professor of Medicine, Division of Hematology/Medical Oncology School of Medicine
- Deputy Director, OHSU Knight Cancer Institute, School of Medicine
- Grover C. Bagby Endowed Chair for Prostate Cancer Research, Division of Hematology/Medical Oncology, School of Medicine
- Cancer Biology Graduate Program, School of Medicine

[Email this page](#)

[Print this page](#)

★★★★★ 4.7 out of 5

(100 Ratings, 8 Comments)

[View faculty profile](#)

[Accepting new patients](#)

### Expertise

Cancer and Blood Disorders  
Special focus on Oncology Prostate Cancer

## I see patients at

### OHSU Primary Care, Gabriel Park

#### Office

503-494-8311

#### Physician referrals

503-494-8311

#### Address

4411 SW Vermont St  
Gabriel Park Shopping Center,  
Portland, OR 97219

#### Next available appointment:

Today at 8:00 a.m., 9:15 a.m., 9:45 a.m., & more...

[Schedule online](#)



## Insurance

OHSU contracts with most major health insurance carriers and transplant networks, including the ones listed below. Before scheduling your appointment, we strongly recommend you contact your insurance company to verify that the OHSU location or provider you plan to visit is included in your network. Your insurance company will also be able to inform you of any co-payments, co-insurances, or deductibles that will be your responsibility. If you proceed in scheduling an appointment and your health insurance benefits do not participate with OHSU, your out of pocket liability may be higher. We will contact you regarding your coverage and patient liability. If you are uninsured, learn more about our [financial assistance policy](#).

[Click to see a list of accepted insurance plans](#)

User-centered design calls for  
**USER PARTICIPATION.**

A deeper question is: How do researchers and practitioners even know what questions to ask? In my view, **the lack of intensive participation of the users** has been a major impediment to designing, implementing, and evaluating more powerful health literacy interventions.

— LINDA NEUHAUSER

*“Integrating Participatory Design and Health Literacy to Improve Research and Interventions”*

# User participation continuum

Designer creates materials based on expertise, available resources and past templates.

Ask for written feedback from users after use.

Ask open-ended questions with follow-up.

Participation of user before, during, and after creation.

Equal partnership in planning, creation, dissemination, and revision of materials.

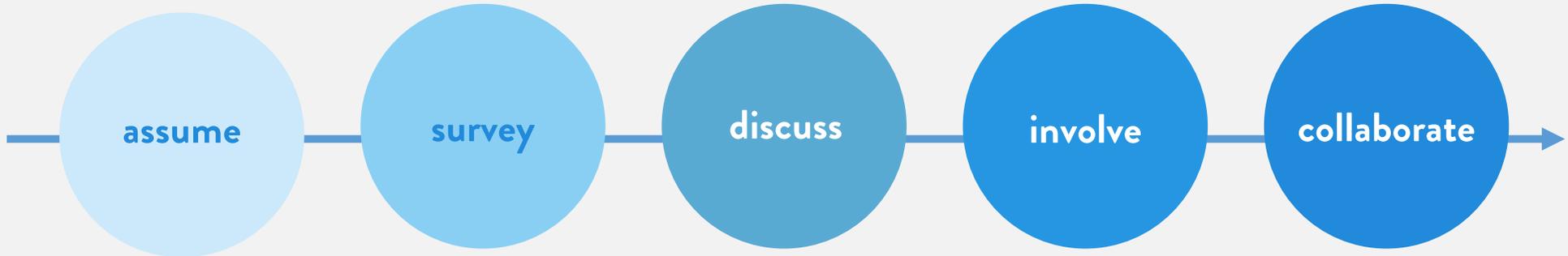
**assume**

**survey**

**discuss**

**involve**

**collaborate**



Focus on  
**ONE AUDIENCE**

# ARTISTS WITH KIDS

## Meeting

## Group

starts  
Sunday  
4th June

First Sunday  
of each month  
11 - 1

The Milk Bar  
46 Old Market  
BS2 0EX



Meet like minded parents, - an alternative  
baby and toddler group, for parents  
who work in the arts.

Bring yourself, bring your kids.

Free tea and coffee.

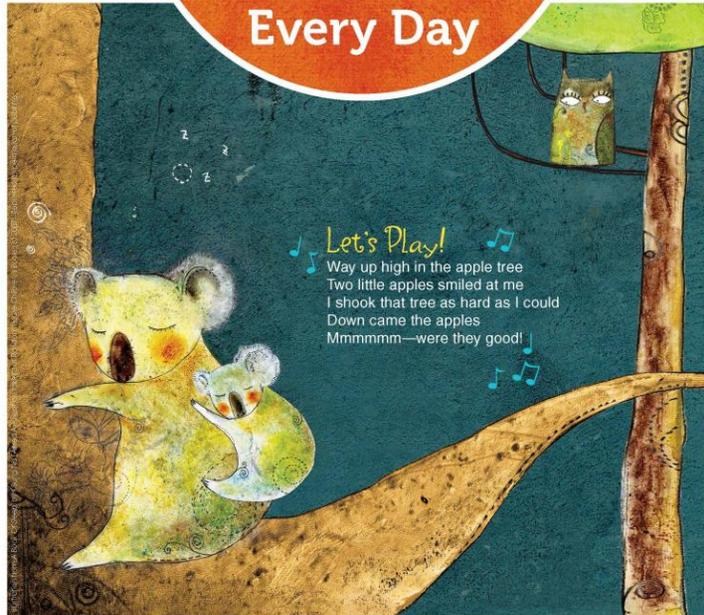
Focus on  
**ONE MESSAGE**

When you are trying to drive a piece of information into your brain's memory systems, make sure you understand exactly what that information means. If you are trying to drive information into someone else's brain, **make sure they know what it means.**

— JOHN MEDINA

*Brain Rules*

# Babies Need Words Every Day



## Let's Play!

Way up high in the apple tree  
Two little apples smiled at me  
I shook that tree as hard as I could  
Down came the apples  
Mmmmm—were they good!

Children learn new words, letters, and sounds when you **TALK, READ, SING,** and **WRITE** together. **PLAY** allows children to practice everything they've learned!



When you walk from place to place with your child and talk about things you see, your child learns new words.



For more information, tips and booklists for babies please visit [www.ala.org/alsc/babiesneedwords](http://www.ala.org/alsc/babiesneedwords)  
To learn more about building healthy early learning skills in your baby visit your local public library!

Content on this poster was created by members of the Association for Library Service to Children's Early Childhood Programs and Services Committee.

We remember more when involving

**EMOTION**

**REPETITION**

**NOVELTY**







If in doubt,  
**LEAVE IT OUT.\***

\* I mean it. Then give sources for more information.

Determining your  
**SOCIAL MEDIA STRATEGY**

Create content pillars and use  
**SMALL PIECES FOR SOCIAL.**

# SUPPORTING FAMILIES

with tools to promote children's learning and healthy development

INDURHAM

Decades of research have demonstrated the important role of parents as a child's first teacher, a role that is amplified when children are not in formal early education programs. Parenting style and the home learning environment are two of the most significant predictors of school readiness among young children.

## HOME VISITING

138 underserved families received intensive home visiting services to support parent engagement during the earliest stages of child development.

### IMPROVED PARENTING PRACTICES

86%



of parents who received home visits improved or sustained positive parenting practices

### EARLY INTERVENTION

100%



of children over 3 months of age received a developmental screening and appropriate referrals to early intervention services

### WELL CHILD CARE

49%



of children were up-to-date on immunizations

Home visits help monitor medical visits, but factors such as illness and appointment wait times can cause delays.



of literacy program participants reported reading more to their children

## PARENT EDUCATION

169 parents participated in parenting education classes and groups. Evidence-based parenting programs focus on positive discipline strategies, child development, and early literacy.



## TRANSITION TO KINDERGARTEN

Transition to Kindergarten activities support rising Kindergarteners and their families to become familiar with a formal school setting, increase on-time enrollment and attendance, foster parent involvement, and reduce anxiety associated with their transition to school.

### TRANSITION EVENTS

98%

OF PARENTS

Parents who participated in school-based events left feeling more confident about ways to prepare their child for Kindergarten

### BLASTOFF KITS

50%

OF INCOMING STUDENTS

1,500 rising Kindergarteners received school readiness kits to promote parent-child learning activities

Attendance in Kindergarten is a predictor of academic outcomes including 3rd grade test scores and high school graduation rates

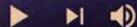


FY13-14 Program Evaluation Results





Play (k)



0:07 / 9:11

 babystep.tv 



# Breastfeeding your baby



Remember

**ONE AUDIENCE**

**ONE MESSAGE**

You can't show your audience *everything*,  
so consider carefully what you want attendees  
**to learn from and more importantly, do with**  
your findings.

— KATE HARRISON

*"4 Simple Ways to Make Data Easier to Understand"*



**American Academy of Pediatrics**

March 7 at 9:05 AM · 🌐

Is your family traveling for spring break? Car seats or booster seats should be used in cars and airplanes. Learn more about traveling with the right seat for your child:



HEALTHYCHILDREN.ORG

### **Car Seats: Information for Families**

One of the most important jobs you have as a parent is keeping your child safe when riding in a vehicle. The following information from the AAP offers guidance on choosing the most

  142

5 Comments 198 Shares

 Like

 Comment

 Share



**OHSU Center for Women's Health**

January 24 · 🌐

If you're in your 40s, this month's Women's Health Monthly is for you. We talked to experts about your period -- do you still need it? -- and about when to start breast cancer screening.



OHSU.EDU

**News: Women's Health Monthly**

Featured stories from the OHSU Center for Women's Health in Portland,...

👍 2

2 Shares

👍 Like

💬 Comment

➦ Share

Use

**EVERYDAY LANGUAGE**



**Massachusetts Institute of Technology (MIT)**  @MIT · Mar 13

Soft, squishy device could potentially track ulcers, cancers, and other GI conditions over the long term. [mitsha.re/ObRM30nvNhm](https://mitsha.re/ObRM30nvNhm)



 20

 62



**Harvard Health**  @HarvardHealth · 7h

Blue light has a dark side. [bit.ly/2FdGwni](https://bit.ly/2FdGwni) #HarvardHealth



 1

 39

 67



Seattle Children's

March 14 at 5:00 PM · 🌐

A little humor goes a long way—Kids learn about poop from one of our gastroenterologists, Dr. Marina Panopoulos.



YOUTUBE.COM

### Kids Meet A Poop Doctor | Kids Meet | HiHo Kids

The #HiHoKids get the dirty details direct from the poop doctor, in #kidsmeet a Gastroenterologist...

👍🤔❤️ 106

9 Comments 18 Shares

👍 Like

💬 Comment

➦ Share

Tell a  
**STORY**



**OHSU Doernbecher Children's Hospital**

March 6 at 10:20 AM · 🌐

"He doesn't go to public places. He doesn't go to playdates. He doesn't go to people's houses. We don't go out to eat. He doesn't go to the grocery store."

Five-year-old Kai has acute lymphoblastic leukemia. His mom, Jessica, shares how the recent measles outbreak has impacted their lives (via [KATU News](#)).

[#VaccinesSaveLives](#) [#YesOnHB3063](#)



KATU.COM

**Mother's plea to get people immunized to protect immunocompromised son**

👍👎❤️ 285

39 Comments 161 Shares

👍 Like

💬 Comment

➦ Share



Mayo Clinic

44 mins · 🌐

Snow and ice cause cars to stall out on the road to their destination. In patients with chronic lymphocytic leukemia, it's their stem cells that stall out and researchers want to know why. Read more at Advancing the Science: <https://mayocl.in/2VWthwY>



ADVANCINGTHESCIENCE.MAYO.EDU

### Bone Marrow Stem Cells Stall Out in Chronic Lymphocytic Leukemia

👍 🤔 🙄 63

3 Comments 15 Shares



Thank You