



# Expedited I&E Materials Review Form

**Purpose:** Title X-funded agencies are responsible for evaluating the appropriateness of I&E materials for their client population and for ensuring the factual, technical, and clinical accuracy of all I&E materials developed or made available under the project prior to their sharing.

**How to use:** Identify a staff member and a medical reviewer within your agency to review the material and complete this form.

Name of Reviewer: \_\_\_\_\_

Position of Reviewer: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Reviewer: \_\_\_\_\_

Position of Reviewer: \_\_\_\_\_

Date: \_\_\_\_\_

**Material Title** (if there is no title, describe the material):

\_\_\_\_\_

Material Type: \_\_\_\_\_

Publication: \_\_\_\_\_ Publication Date: \_\_\_\_\_

Language(s) the material is available in: \_\_\_\_\_

Language(s) under review: \_\_\_\_\_

Indicate your level of comfort with the language(s) of the material under review:

	Very Comfortable	Somewhat Comfortable	Not Comfortable
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Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Intended Audience: \_\_\_\_\_

1.) This material is for (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Males               | <input type="checkbox"/> Young adults (18-25)  |
| <input type="checkbox"/> Females             | <input type="checkbox"/> Adults (26 and older) |
| <input type="checkbox"/> LGBTQIA+            | <input type="checkbox"/> Other: _____          |
| <input type="checkbox"/> Adolescents (13-18) |  |

2.) What grade level is the material written for? \_\_\_\_\_

Describe how you arrived at the reading lever (Fry Graph, SMOG, Flesch Kincaid, etc.): \_\_\_\_\_

	Yes	No	N/A
3.) Is the message of the material clear?	<input type="checkbox"/>	<input type="checkbox"/>	
4.) Does it use common, everyday words?	<input type="checkbox"/>	<input type="checkbox"/>	
5.) Is the content accurate?	<input type="checkbox"/>	<input type="checkbox"/>	
6.) Does the material use the active voice? For example, does it say, "We will ask..." rather than, "You will be asked..."	<input type="checkbox"/>	<input type="checkbox"/>	
7.) Does the material use font types and sizes that are easy to read?	<input type="checkbox"/>	<input type="checkbox"/>	
8.) Does it incorporate white space and margins to break up the text?	<input type="checkbox"/>	<input type="checkbox"/>	
9.) If there are illustrations or pictures, are they appropriate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.) If there are illustrations or pictures, are visually appealing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.) Is the material respectful of the clients' cultures and values?	<input type="checkbox"/>	<input type="checkbox"/>	
12.) Do you recommend that we share this material with our clients?	<input type="checkbox"/>	<input type="checkbox"/>	

Comments or suggestions:

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1.) In your estimation, how medically accurate is this material (in other words, to what extent does it reflect current medical practices)?

Highly accurate

Not accurate

Somewhat accurate

List any inaccuracies:

2.) Do you recommend this material to our clients?  Yes  No

*Please explain:*

Executive Director's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Medical Reviewer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Staff Reviewer's Signature: \_\_\_\_\_

Date: \_\_\_\_\_