Patient plain-language edit: cover note

Scientific & medical editing portfolio · patient-facing register shift with measured readability

WHAT THIS SAMPLE IS

A plain-language edit of a one-page patient information paragraph about apixaban, an oral blood thinner. The source paragraph is written in clinical language that a patient would struggle to read. The edit rewrites it for a patient audience while keeping every fact accurate, shown as before-and-after tracked changes with margin comments explaining the editorial reasoning.

READABILITY, MEASURED

14.6	→	8.2	17.5 → 60.4
BEFORE · FK GRADE		AFTER · FK GRADE	READING EASE

Flesch-Kincaid grade level and Flesch reading ease, computed with the *textstat* library. The before text moves from a college/graduate level to a Grade 8 level a general reader can follow.

SOURCE, LICENCE, AND SPELLING

The patient text is a mock, self-authored from the public Health Canada product monograph for ELIQUIS® (apixaban), submission control 288960, dated January 10, 2025. Because it is self-authored, no third-party licence is required; the monograph is cited as the factual source. Spelling follows the product monograph's conventions. This is a training artifact, not a real patient leaflet and not medical advice; not for distribution.

HIGHEST-VALUE CHANGES

1. **Defined the mechanism instead of deleting it.** Factor Xa and thrombin were kept but explained in plain words ("a protein"; "a chemical that starts clot formation"), so the science stays accurate without leaving the reader behind.
2. **Made the key safety instruction unmissable.** The warning not to stop the drug is highlighted in a short, direct sentence ("Never stop taking it on your own").
3. **Turned clinical terms into everyday words.** Epistaxis, contusion, and hematuria became nosebleeds, bruising, and blood in the urine, respectively; hematemesis and melena became blood in the vomit and black stools.

MARGIN COMMENTS IN THE TRACKED FILE

> The edited Word file carries five comments recording the reasoning at each major move: the blood-thinner term choice, the defined mechanism, the safety-instruction rewrite, the plain-word adverse-event terms, and the concrete emergency signs.

Self-authored portfolio exercise. Facts trace to the public ELIQUIS® product monograph (Health Canada, control 288960). Package: this cover note, the before text, the tracked edit (with comments), and the clean after version.

Patient information: apixaban (BEFORE)

Apixaban is an oral anticoagulant used to reduce the risk of stroke and systemic embolism in patients with non-valvular atrial fibrillation. It is also indicated for the treatment and prevention of venous thromboembolic events. The medication acts by inhibiting Factor Xa, which reduces thrombin generation and clot formation. It should be administered orally on a twice-daily basis. Discontinuation should not occur without consultation with the prescribing physician, as premature cessation may increase the risk of thromboembolic events, including stroke. Because of its anticoagulant properties, use of this medication is associated with an increased risk of hemorrhagic events. These may include epistaxis, contusion, and hematuria. In more serious cases, urgent medical intervention may be required. Concomitant use of other antithrombotic agents or non-steroidal anti-inflammatory drugs may potentiate bleeding risk and should be disclosed to a healthcare provider prior to initiation. Patients should remain vigilant for signs of abnormal or prolonged bleeding. Immediate medical evaluation should be sought in the event of hematemesis, melena, or clinical signs suggestive of intracranial hemorrhage.

Editing brief: rewrite this for a patient audience at Grade 6-8. Short sentences, active voice, address the reader as "you", define or replace every clinical term, make instructions concrete. Use tracked changes (Review > Track Changes). Add Word comments explaining your 4-5 biggest editorial moves.

Mock patient text, self-authored from the public ELIQUIS® product monograph (Health Canada, control 288960) for a portfolio exercise. Not medical advice; not for distribution.

Patient information: apixaban (BEFORE)

Apixaban is a blood thinnern that is taken orally. It is anticoagulant used to reduce the risk ofprevent stroke and systemic embolism blood clots in patients with non-valvular atrial fibrillation, a type of irregular heartbeat. It is also indicated used for the treatment and prevention offor treating and preventing blood clots in the veinsnous thromboembolic events. The medicationIt acts byblocks inhibiting a protein, Factor Xa, which and reduces stops the body from producing thrombin. Thrombin is a chemical that initiates generation the formation of and clots formation. It T should be administeredake apixaban by mouth twice a day orally on a twice-daily basis. Never stop taking it on your own. Always Discontinuation should not occur without consult your doctor,ation with the prescribing physician, as prematureas stopping it suddenly cessation may increase the risk of blood clotsthromboembolic events, including stroke. Because of its anticoagulant blood thinning properties, use of thisapixaban medication iscan associated with an increased the risk of hemorrhagic eventsheavy bleeding. These may includeSpecifically, it can lead to epistaxisnosebleeds, contusionbruising, and hematuriablood in the urine. In more serious cases, you may require urgent medical intervention may be requiredcare. Concomitant use of other If you are using any other antithrombotic blood thinners agents or non-steroidal anti-inflammatory drugs (such as ibuprofen), may potentiate bleeding risk and should be disclosed to ayou should mention this to your healthcare provider prior to . Using apixaban with these medications can also increase the risk of bleeding.initiation. Patients If you noticeshould remain vigilant for signs oany signs of abnormal or prolonged bleeding, please seek immediate medical help. These include . Immediate medical evaluation blood in the vomit, black stools, or signs of bleeding in the brain, such as a sudden severe headacheshould be sought in the .event of hematemesis, melena, or clinical signs suggestive of intracranial hemorrhage.

Replaced 'anticoagulant' with 'blood thinner' and used it consistently, so a lay reader has one familiar term throughout.
Sachin Karol
08/04/2026 15:11

Kept the mechanism but defined Factor Xa and thrombin in plain words, so the science stays accurate without confusing the patient.
Sachin Karol
08/04/2026 15:11

Placed the key safety instruction in a short, direct sentence, because a patient must not miss this point.
Sachin Karol
08/04/2026 15:11

Converted the clinical terms (epistaxis, contusion, hematuria) into everyday words a patient will recognise.
Sachin Karol
08/04/2026 15:11

Made the emergency signs concrete (blood in the vomit, black stools, sudden severe headache) so the reader knows exactly what to watch for.
Sachin Karol
08/04/2026 15:11

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